



EUROPEAN COMMISSION
DIRECTORATE-GENERAL INFORMATICS

Directorate B - Digital Business Solutions
DIGIT B2 - Solutions for Legislation, Policy & HR

MyPMO

My Health - User Guide

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TABLE OF CONTENTS

1.	INTRODUCTION	4
2.	ADMINISTRATIVE DATA (JSIS).....	4
2.1.	View Administrative data.....	4
3.	INSURANCE CERTIFICATES (JSIS)	5
3.1.	View Insurance Certificates	5
3.2.	Request Insurance Certificates	6
4.	DIRECT BILLINGS (JSIS)	9
4.1.	View direct billings	9
4.2.	Create a new direct billing.....	10
4.3.	Adding additional required information in a Direct billing.....	12
5.	ACCIDENT DECLARATIONS (JSIS)	14
5.1.	View Accident Declarations.....	14
5.2.	Create new accident declaration	14
6.	MEDICAL ABSENCES (JSIS)	17
6.1.	View Medical Absences	17
6.2.	Declare Medical Absence.....	17
7.	REIMBURSEMENT REQUESTS (JSIS).....	20
7.1.	View reimbursement requests	20
7.2.	Create a new reimbursement request.....	20
7.2.1.	Create a standard reimbursement request.....	21
7.2.2.	Create an accident reimbursement request	27
7.2.3.	Create an occupational disease reimbursement request	32
7.2.4.	Create a serious illness reimbursement request.....	38
7.2.5.	Create a JSIS Health Screening Programme reimbursement request.....	45
7.2.6.	Create a medical service – spectacles for work reimbursement request.....	50
7.2.7.	Create a medical service – annual medical check-up reimbursement request.....	55
7.3.	Duplicate Reimbursement request.....	60
7.4.	Adding additional required information in a Reimbursement request	61
7.5.	Reopen reimbursement requests.....	62
7.6.	View account sheets	63

8.	PRIOR AUTHORISATIONS (JSIS)	66
8.1.	View Medical Authorizations.....	66
8.2.	Create Prior Authorisation Request.....	67
8.2.1.	Create Request for Medical care	68
8.2.2.	Create Request for Dental care.....	72
8.3.	Adding additional required information in a Prior Authorization request	74
9.	AFFILIATIONS TO EXTERNAL INSURANCE (JSIS).....	76
9.1.	View affiliation request	76
9.2.	Create an affiliation	76
10.	PHARMACEUTICAL PRODUCTS LIST (JSIS).....	80
11.	SERIOUS ILLNESS RECOGNITION (JSIS)	81
11.1.	View Serious illness recognition requests	81
11.2.	Create a new serious illness recognition request.....	81
11.3.	Adding additional required information in a Serious Illness Recognition request	86
12.	HEALTH SCREENING REQUESTS (JSIS)	87
12.1.	View health screening requests	87
12.2.	Create a health screening invitation request.....	88
12.2.1.	Invitation agreed center	90
12.2.2.	Open invitation	92
13.	JSIS ONLINE HELP (JSIS).....	93

1. INTRODUCTION

MyPMO is a native mobile application that allows all current and former employees of the European Union Institutions, depending on their level of access, to view their family insurance cards, request insurance certificates, declare medical absences, request direct billings, to view missions, add mission document's view meeting details and much more directly from their mobile phone. Additionally, allows to receive invitations and updates about meetings within European Commission, connecting officers and experts all around the world such as lawyers, doctors, farmers and many others.

MyPMO also allows accessing the payment slips, salaries, pension and unemployment, together with related documents and certificates.

MyPMO can also be accessed via a browser on your computer/phone.

Note: For details regarding the common features of MyPMO, like how to manage the favourites or how to check the notifications, please see the MyPMO Common features user guide.

2. ADMINISTRATIVE DATA (JSIS)

2.1. View Administrative data

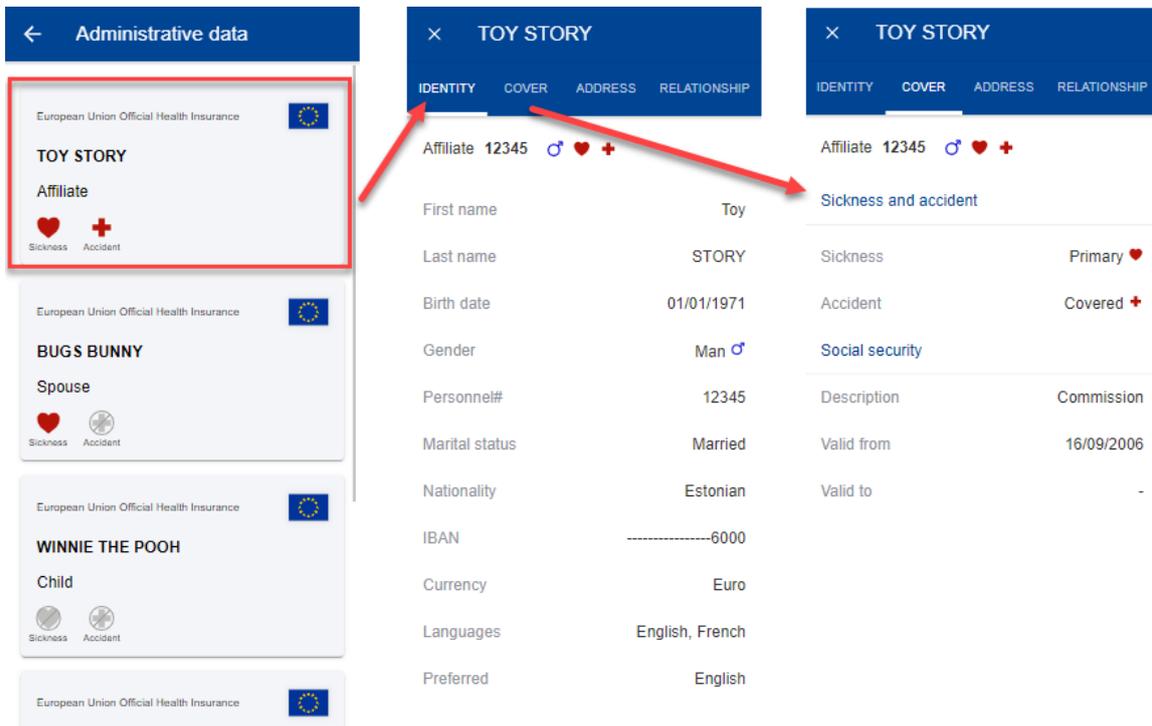
JSIS members can view the insurance cards for all family members covered by JSIS.

From the service list, tap on "Administrative data". The App will display all insurance cards of your family composition (below left).

As in JSIS Online, the sickness and accident coverage icons are available:

- Red icon: Primary full right coverage.
- Orange icon: Complementary right coverage.
- Grey icon: No Coverage

You can select an insurance card to view more details (below middle and right). The details are organized in tabs, below the beneficiary's name.



For other questions related to the coverage, consult JSIS Online first, then contact Staff Matters or contact PMO.

JSIS Online:

<https://webgate.ec.europa.eu/RCAM>

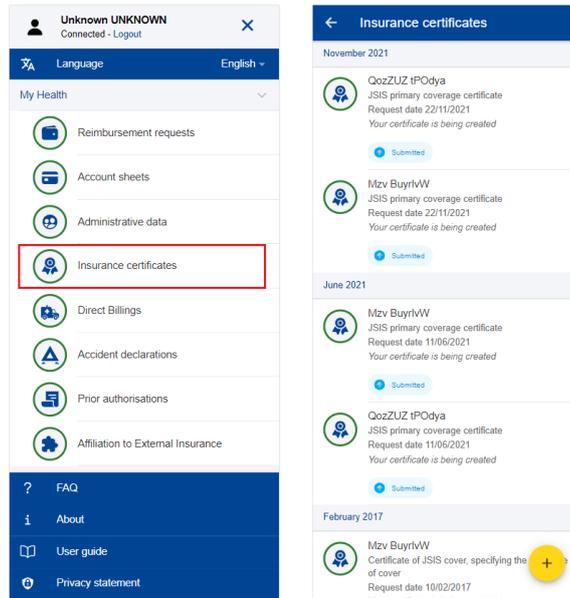
Staff Matters:

<https://myintracomm.ec.europa.eu/staff/EN/Pages/index.aspx?ln=en>

3. INSURANCE CERTIFICATES (JSIS)

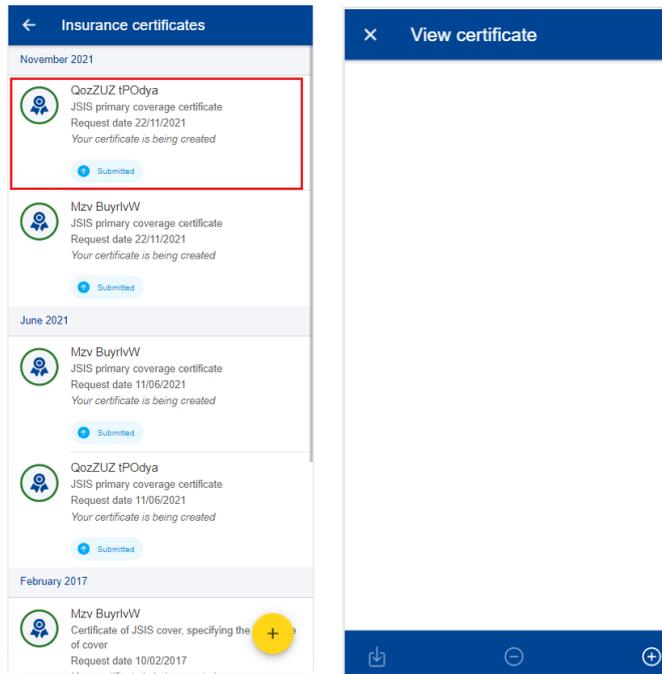
3.1. View Insurance Certificates

From the service list, select “Insurance certificates” to view all certificates requested so far.



Note: The floating action button (FAB)  will allow you to request a new insurance certificate.

Once available (status changes to “Available”), to view a requested certificate, tap on the corresponding item in the list.



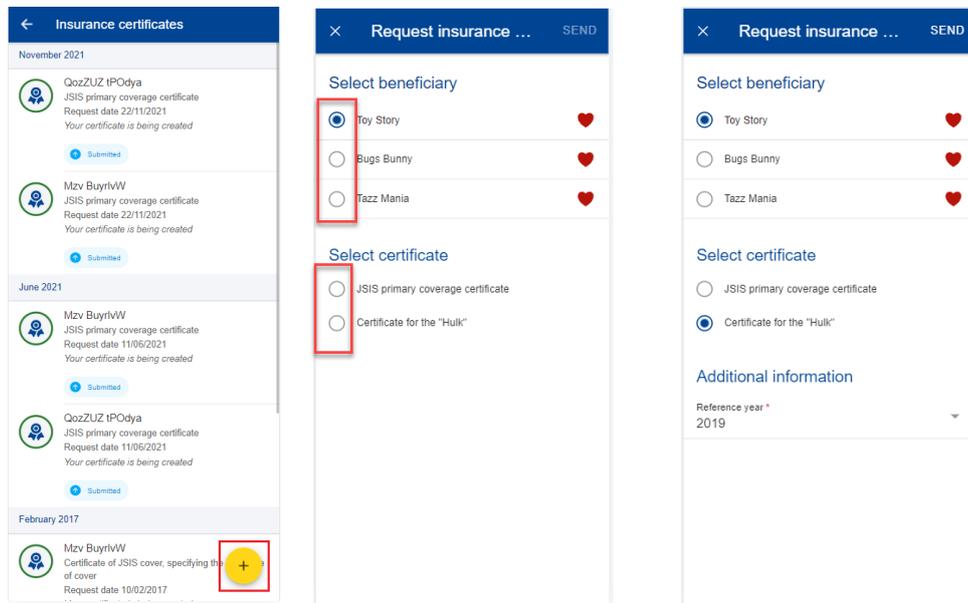
3.2. Request Insurance Certificates

JSIS members can request insurance certificates for all family members covered by JSIS.

Steps:

- 1) From the service list, select “Insurance certificates”

- 2) Tap on the  icon.
- 3) Select the beneficiary and choose the type of certificate.
- 4) Depending on the certificate, additional information may be requested such as visited country, start date, end date and language for a VISA.
- 5) Tap Send.



- 6) The app confirms that a new certificate was requested and adds the certificate to the list of requested certificates. The status of the request is “Submitted”.
- 7) The App generates the certificate which can take up to 30 minutes.
- 8) Once generated, the App fires a notification (tap on the  icon) and changes the status of the request to “Available”.
- 9) Select the insurance certificate to view it.

← Insurance certificates

February 2024

Zpeb CepYpTg
Certificate for the "Vlaamse Zorgkas"
Request date 29/02/2024
Your certificate is being created

Submitted

June 2014

Zpeb CepYpTg
Certificate of JSIS cover (for holidays, school trips, university, etc)
Request date 12/06/2014
Your certificate is being created

Submitted

← My insurance certificates

November 2022

TOY STORY
Certificate for the "Hulk"
Request date 04/11/2022

Available

October 2022

TOY STORY
Certificate for the "Hulk"
Document date 26/10/2022

Available

February 2022

TOY STORY
Certificate for the "Hulk"
Request date 22/02/2022

Submitted

November 2021

BUGS BUNNY
JSIS primary coverage certificate
Request date 22/11/2021

Submitted

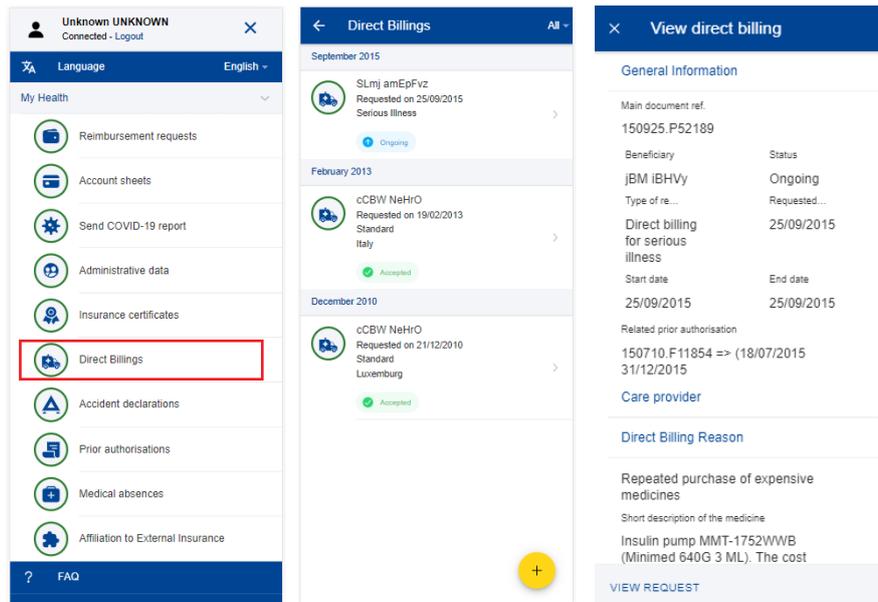
× View certificate

4. DIRECT BILLINGS (JSIS)

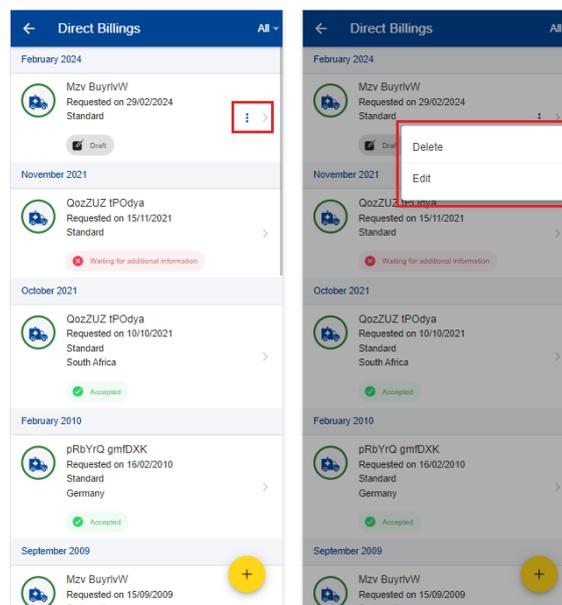
4.1. View direct billings

From the service list, select “Direct Billings” to view all direct billings requests created so far (left below).

The existing direct billing requests are displayed for each beneficiary with the type of request, the country where the request was made, the date of the request and the request’s status. The most recent direct billing requests are displayed on top of the list (middle below).



You can tap on an existing direct billing to view more details (right above). You can also choose to edit or delete a direct billing in Draft status by tapping on the three dots icon  next to the direct billing.



The floating action button (FAB)  allows you to create a new direct billing.

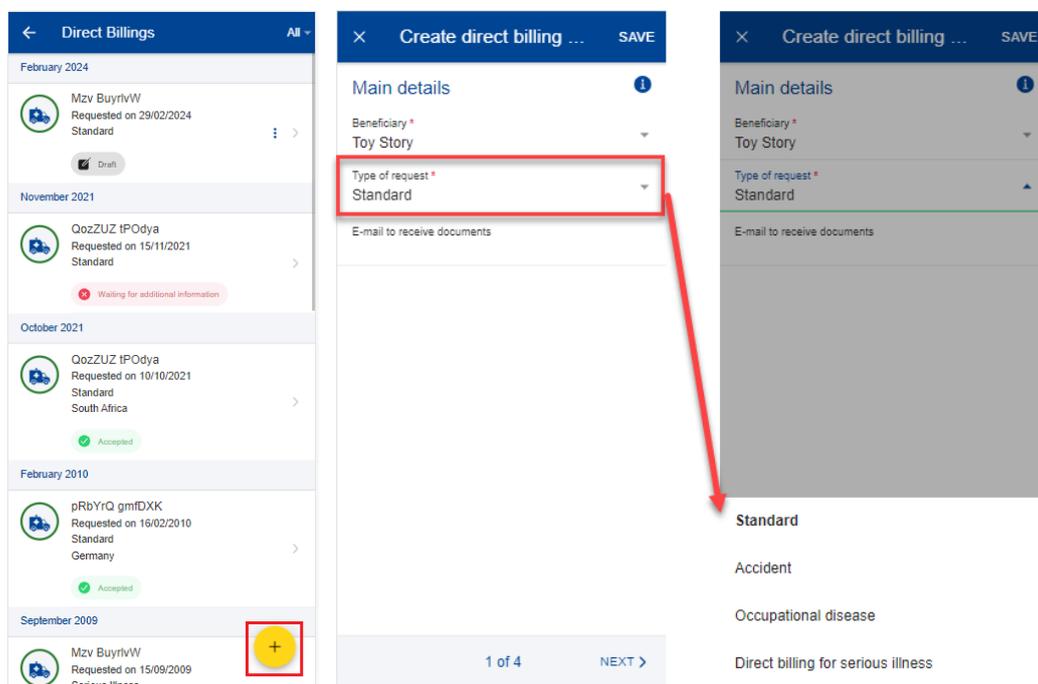
4.2. Create a new direct billing

JSIS members can request a direct billing for all family members covered by JSIS.

Steps:

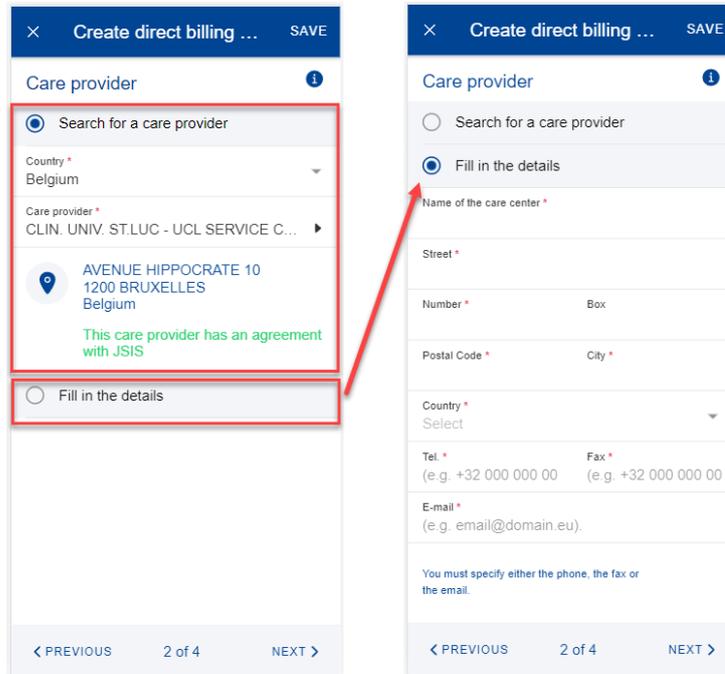
- 1) From the service list, select “Direct billings”
- 2) Tap on the  icon.
- 3) Step1: Select the beneficiary and choose request type*.

*Request type depends on the profile of the beneficiary and/or the institution s/he belongs to.



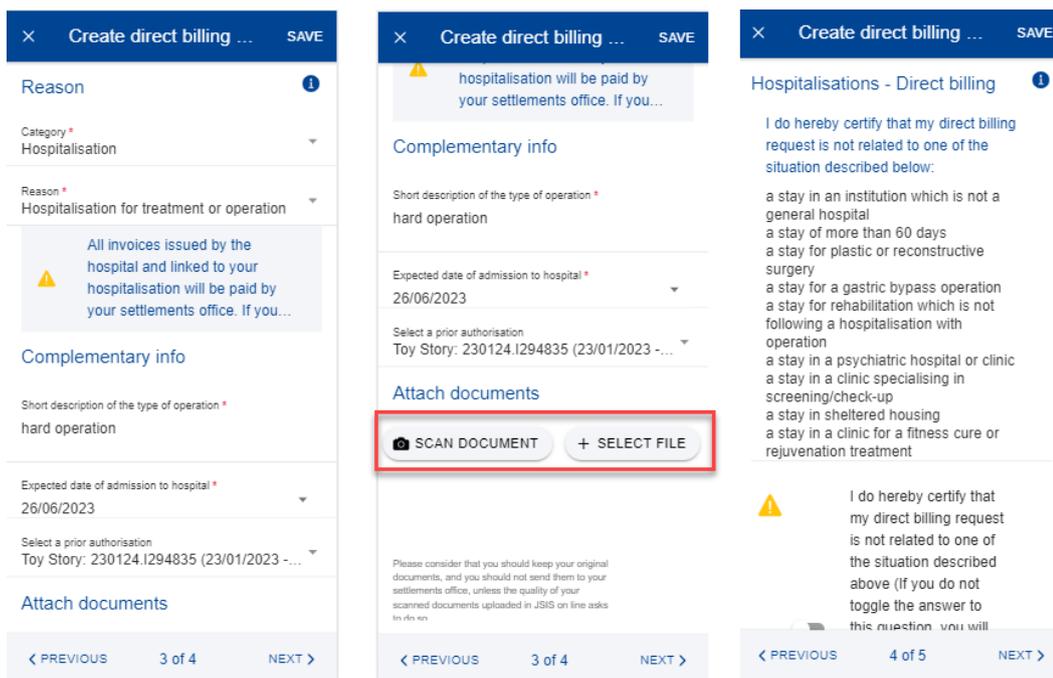
Note: You can Save in each step the data that you’ve already filled in. The direct billing will appear in your direct billings list in Draft status and you can go back and edit it at a later stage. You can also continue modifying your direct billings in the desktop application.

- 4) Step 2: Search for a care provider. You can filter care providers by country and name or insert a new care provider detail if you did not find the care provider in the pre-existing list. Once done, tap Next.



- 5) Step 3: Insert the Category, Reason and all additional mandatory fields, as requested by the application. You can also scan or add a document from your phone in this step, if required (left below).
- 6) Step 4: A summary of the direct billing is displayed in this step together with one or more acknowledge checks (right below). Once you've verified the data and agreed with the General Conditions, you can send your direct billing by tapping Send.

If something in your summary is not correct, you can always go back to previous steps by tapping the Previous button. You can also Save the data if you do not want to submit the direct billing request immediately.



Note: Once you have sent the direct billing, you can retrieve it back in your direct billings list. The direct billing will be further processed in JSIS back office like any direct billings created in the JSIS desktop application. The direct billing will change its status after being processed.

4.3. Adding additional required information in a Direct billing

There are two ways of adding supplementary information in a previously submitted Direct Billing:

- a. From the notification that requires you to add further information, you tap on “Details” (upper right side). This redirects you to the Direct Billing item where you can add the information immediately.
- b. In the Direct Billings list, you can view the items with the “Waiting for additional information” status. If you did not provide the information yet, tap on the item and add the additional info required.

Steps:

- 1) Within to the specific Direct Billing item you can add the required supplementary information (below left and middle screen):
 - a. Tap on “Add Info”
 - b. Fill in the “General comment” text field
 - c. Attach additional documents, if needed
 - d. Tap “Send”
- 2) The additional information will be appended to the existing item (below right) and will appear as “Submitted”.

- 3) You are not able to add more information after you've submitted, unless you request the JSIS back office or they send an additional request for information.

The image displays three screenshots of a web application interface, illustrating the process of adding information to a direct billing request.

Left Screenshot: View direct billing

- General Information
- Main document ref: 123456.P12345
- Beneficiary: RyCmCh TMuploT
- Status: Waiting for additional information
- Type of request: Occupational disease
- Requested on: 17/03/2021
- Start date: 17/03/2021
- End date: 16/05/2021
- Direct Billing Reason: Hospitalisation for treatment or operation
- Expected date of admission to hospital: 17/03/2021
- Short description of the type of operation: hand operation
- Documents attached: PCADINF - Direct billing add. info letter 16/03/2021
- Buttons: VIEW REQUEST, ADD INFO (circled in red)

Middle Screenshot: Add info to direct billing

- General comment
- First info
- Attach documents
- Attachment comment: Medical prescription 1
- Upload limit: Updated files must be less than 10Mb. Allowed formats are PDF, JPEG, TIFF, BMP, GIF
- Buttons: SCAN DOCUMENT, + ADD DOCUMENT
- Buttons: SEND (circled in red)

Right Screenshot: View direct billing

- General Information
- Type of request: Occupational disease
- Requested on: 17/03/2021
- Start date: 17/03/2021
- End date: 16/05/2021
- Direct Billing Reason: Hospitalisation for treatment or operation
- Expected date of admission to hospital: 17/03/2021
- Short description of the type of operation: hand operation
- Documents attached: PCADINF - Direct billing add. info letter 16/03/2021
- Additional information: First info (Submitted)
- Buttons: VIEW REQUEST, SEND (circled in red)

5. ACCIDENT DECLARATIONS (JSIS)

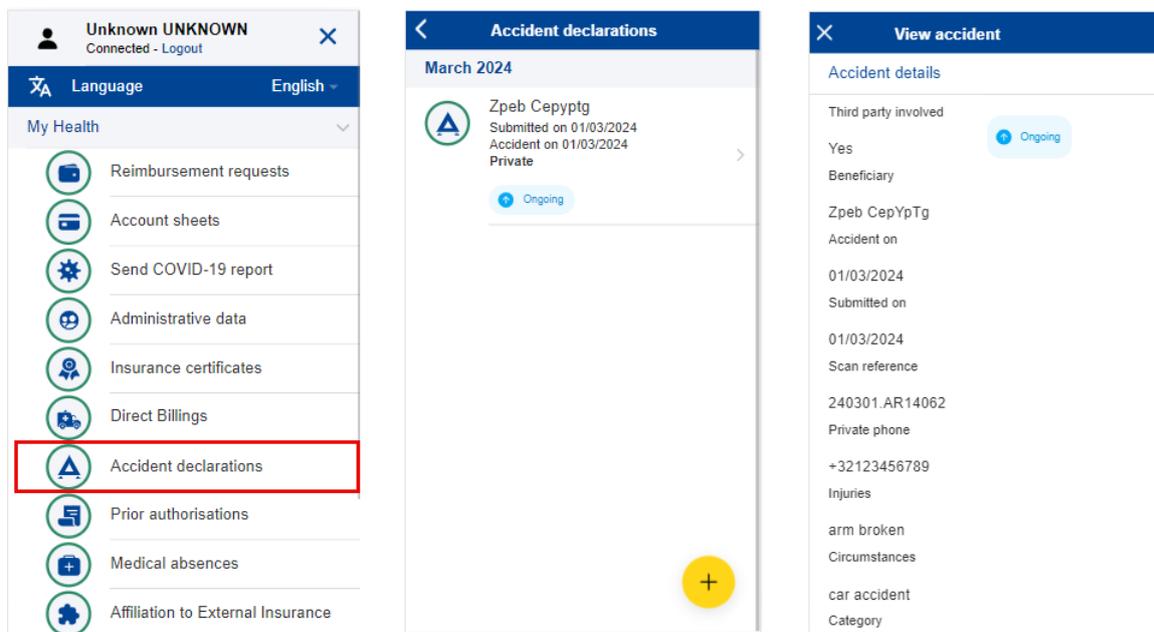
5.1. View Accident Declarations

JSIS members can view the history of their declarations of accident.

From the service list, select “Accident declarations”. The app will display the list of accident declarations submitted, ongoing or closed.

The beneficiary’s name submitted and accident date, the category and the status are displayed.

You may view the details of a declaration by selecting it.



The floating action button (FAB)  allows you to create a new declaration.

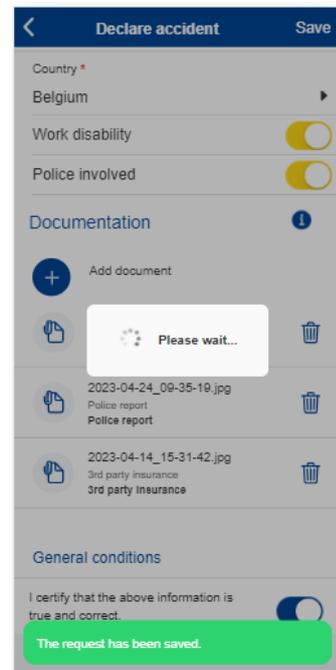
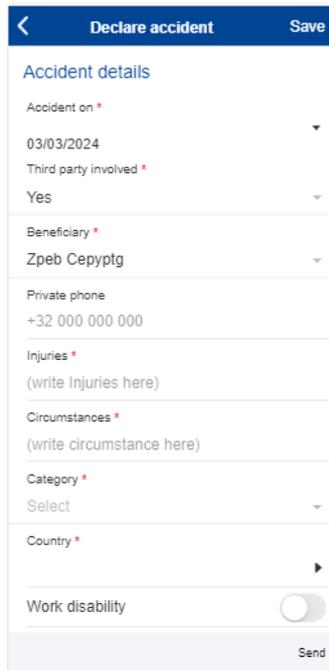
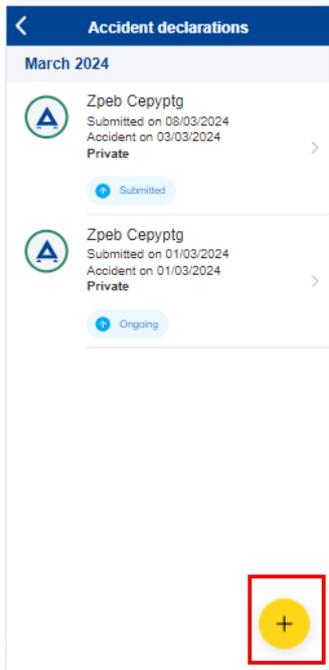
5.2. Create new accident declaration

JSIS members can create a new accident declaration.

To create a new declaration, follow the steps:

- 1) From the service list, select “Accident declarations”.
- 2) Tap on the  icon.
- 3) Enter the accident date, tap done.
- 4) Select if a Third party was involved: Yes/No.
- 5) Select the beneficiary from the list.

- 6) Enter the private phone with the country extension (e.g. +32...).
- 7) If accident date is older than 14 days, fill the reason for late declaration.
- 8) Enter the injuries.
- 9) Provide the circumstances of the accident.
- 10) Select the category from the list: private, sport, work or on the way to work.
- 11) Start by typing the name of the country where the accident happened or select directly from the list.
- 12) You can choose “Work disability” by switching on the toggle button right below the Country list.
- 13) By switching on the toggle button right you can inform as well if the police were involved.
- 14) Tap “ add document” to upload documents.
- 15) Tap “scan document” to take a photo of the medical certificate with your mobile phone or tap “+ select file” to select a document from the mobile gallery.
- 16) If necessary, update the file name, otherwise will have the same name from the mobile phone.
- 17) Select the type of document to attach: Medical certificate, Police report (if “police involved” selected), 3rd party insurance (if Third Party is yes).
- 18) Insert a comment about the document, if relevant.
- 19) Tap “Done” to save the document with the details or “x” to cancel.
- 20) General conditions should be accepted, by switching on the toggle button right, in order to be able to submit the accident declaration.
- 21) Tap “Send” to submit your accident declaration. The Send button will only be enabled when all mandatory fields are filled in.
- 22) The app confirms that the accident declaration was sent and adds the declaration to the list of accident declarations.



6. MEDICAL ABSENCES (JSIS)

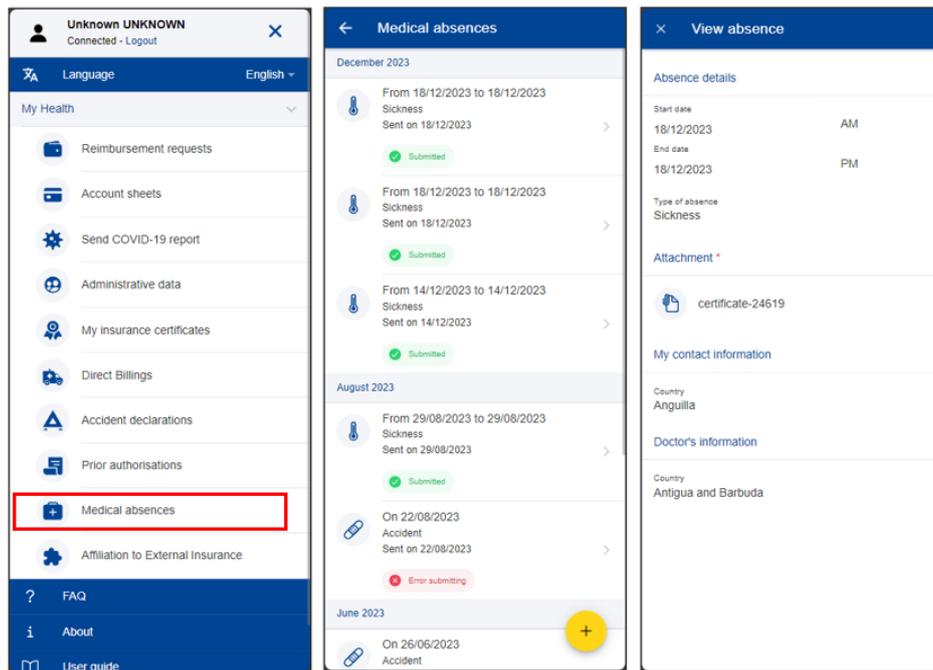
6.1. View Medical Absences

JSIS members can view submitted medical absences.

From the service list, select “Medical absences”. The App will display the list of absences submitted.

You may view the details of an absence by selecting it.

Note: You will only see these certificates that were submitted through the JSIS mobile application.



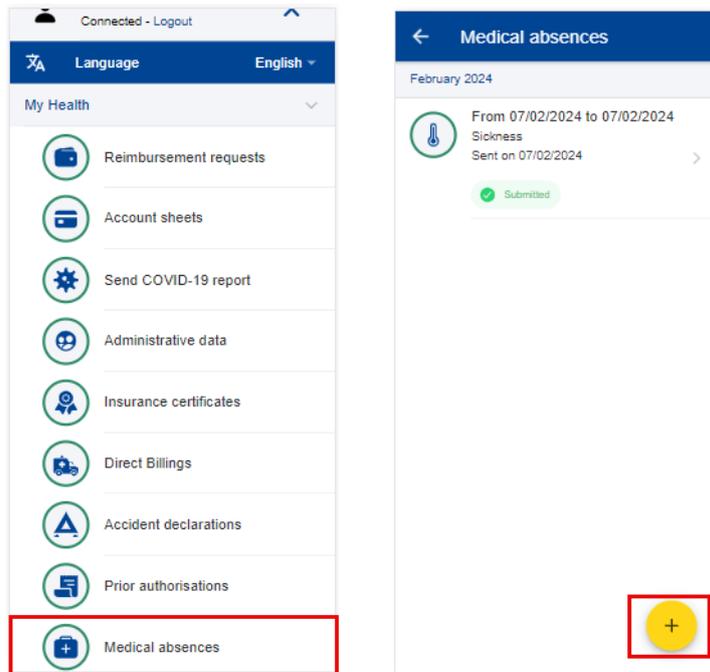
The floating action button (FAB)  will allow you to declare a new absence.

6.2. Declare Medical Absence

JSIS members can declare medical absences.

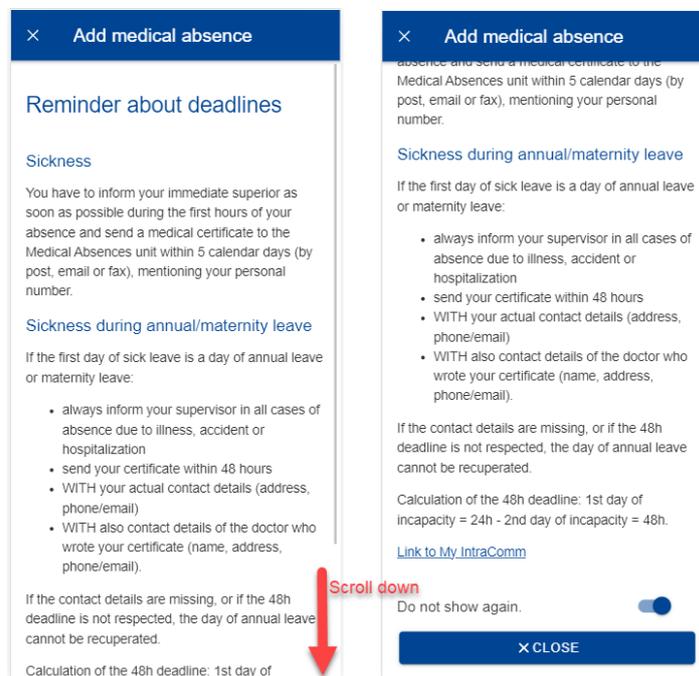
To submit a new absence, follow the steps:

- 1) From the service list, select “Medical absences”.
- 2) Tap on the  icon.



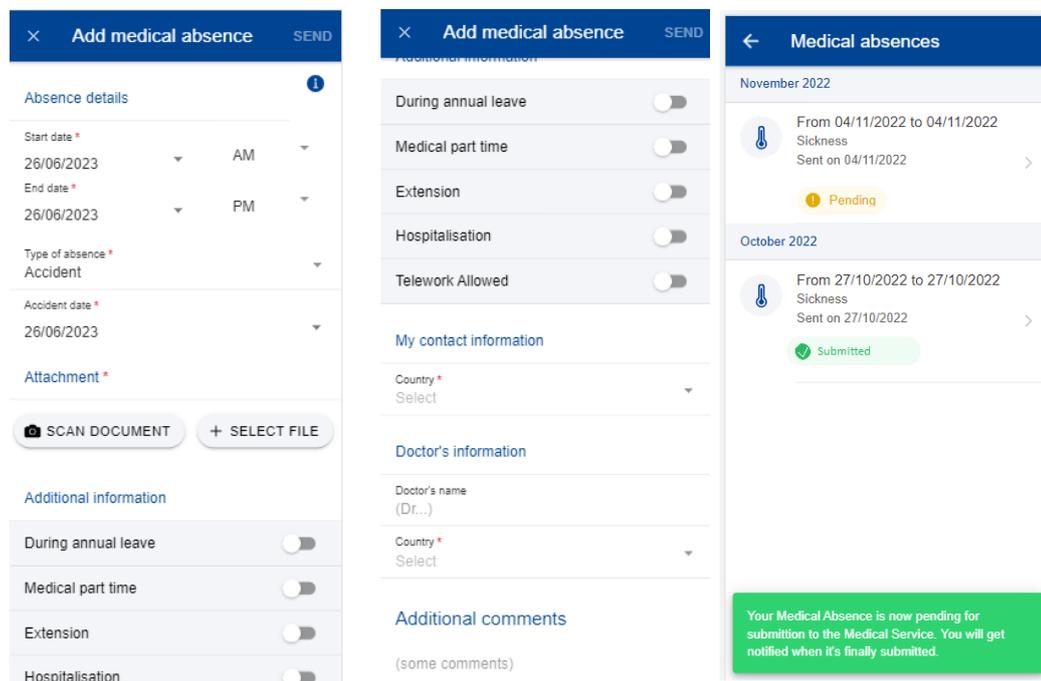
- 3) The App may display a reminder as to actual deadlines. If this is the case, close the reminder. By leaving the checkbox “Do not show again” checked, the App will not show this reminder again.

Note: Depending on the screen size, users may have to scroll down to access the “Do not show again” option and access the “Close window” button.



- 4) Enter Start and End date of the medical absence. Specify whether it is AM or PM.
- 5) Select the type of absence, sickness or accident.

- 6) Tap “Add document” to take a photo of the medical absence with your mobile phone. Multiple documents can be added.
- 7) Provide additional information, when relevant (during annual leave, medical part time.).
- 8) Add additional comments, when needed.
- 9) Tap “Send” to submit your medical absence. The Send button will only be enabled when all mandatory fields are filled in.
- 10) The app confirms that the medical certificate was sent and adds the absence to the list of declared absences.



Notes:

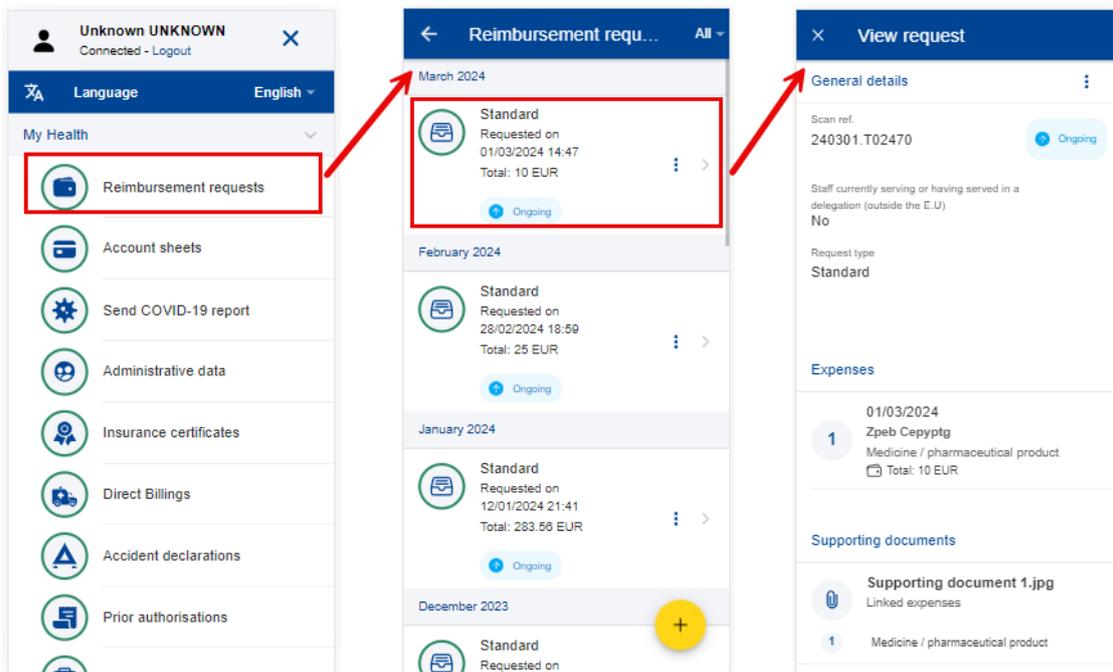
1. You are not obliged to send medical certificates from MyPMO, you can follow the procedure available in Staff Matters Portal.
2. Your line manager will not be informed when your medical absence was submitted.
3. Once submitted, medical absences may not be removed or edited. When needed, you can follow the procedure available here:

<https://myintracomm.ec.europa.eu/staff/EN/health/specific-events/Pages/sickness.aspx?ln=en>

7. REIMBURSEMENT REQUESTS (JSIS)

7.1. View reimbursement requests

- 1) From the service list, select “Reimbursement requests” to view all your reimbursement requests created so far (below left).
- 2) The system displays the list of requests showing the type of request, the date of the request, the request’s status and the total amount of the request. The most recent reimbursement requests are displayed on top of the list. You can scroll down to view the reimbursement requests grouped under each month. (below middle)
- 3) You can choose to edit or delete a request in Draft status by tapping on the three dots icon  next to the request. (below middle)
- 4) Tap on an existing reimbursement request to view the request information. If the request has been submitted, you can see the Scan reference code. (below right)
- 5) If your request is in Draft status you can continue to modify it as described in the next section.



7.2. Create a new reimbursement request

JSIS members can request a reimbursement for all family members covered by JSIS at the time of the treatment.

There are six different types of reimbursement requests in MyPMO:

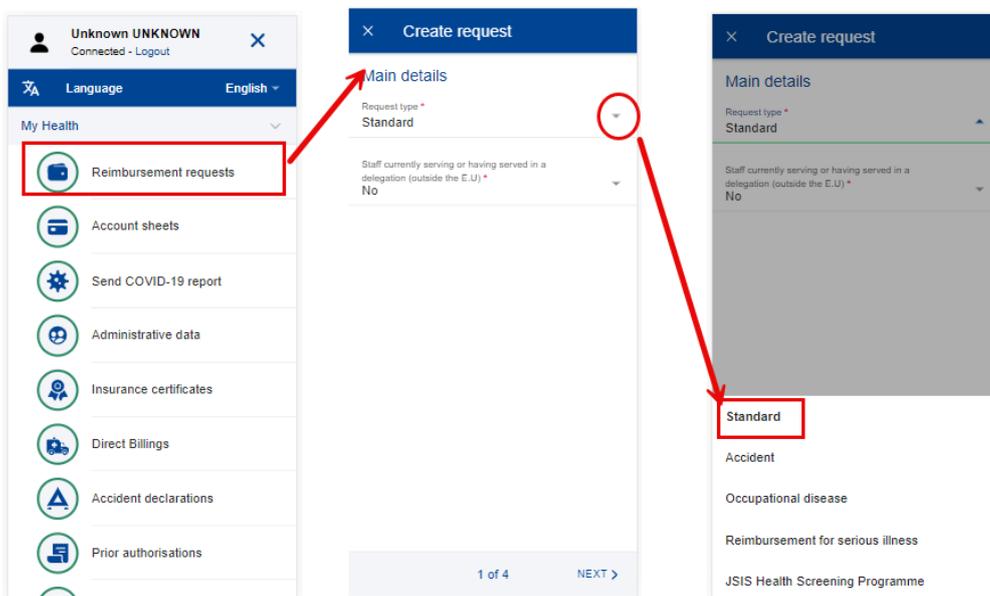
- Standard reimbursement
- Accident reimbursement
- Occupational disease
- Serious illness
- JSIS Health Screening Programme
- Medical services
 - Spectacles for work
 - Annual medical check-up

All types of reimbursements share the same principle with the Standard reimbursement flow, with the following notes: additional details are requested, and the list of expenses is tailored according to the reimbursement type. In the next chapter we can see the in detail each reimbursement type creation.

7.2.1. Create a standard reimbursement request

Standard reimbursement steps:

- 1) From the service list, select “Reimbursement requests”
- 2) Tap on the  icon to add a new reimbursement request. (below left)
- 3) Step1: Change the delegation information if needed. By default, the Delegation field is set to “No”.
- 4) Choose “Standard” request type from list. Tap “Next”



5) System displays Step2 - List of expenses.

6) Tap on the  icon to add a new expense. You are allowed to add up to five expenses. (below left)

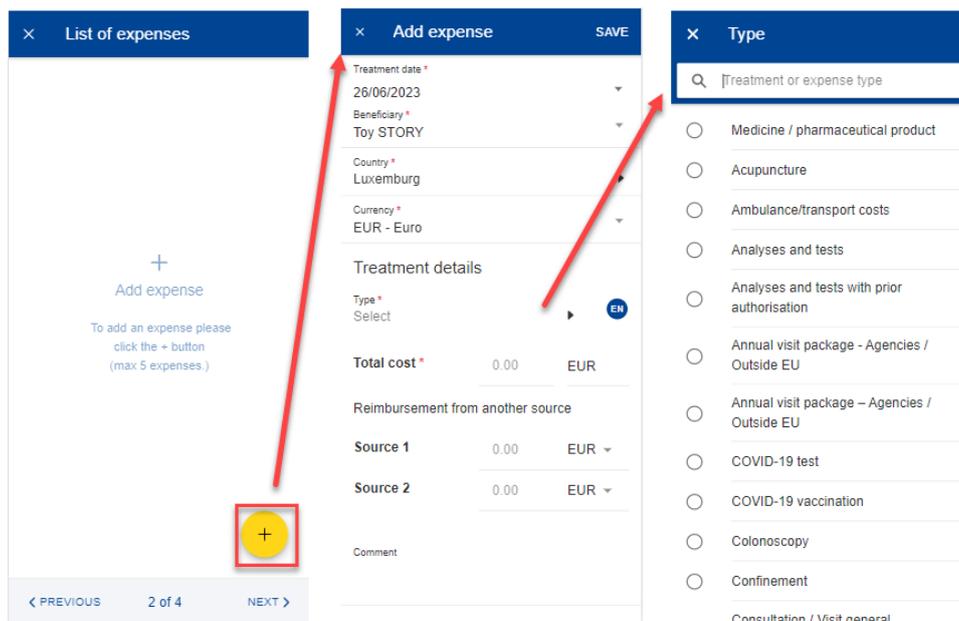
7) Select the Treatment date. The list of beneficiaries will be filled in based on the selected date and the type of request. Only the beneficiaries covered by JSIS on that date will be displayed. (below middle)

8) Select the Beneficiary.

9) Select the Expense/Treatment detail from the list. Start by typing the name of the treatment or select directly from the list. (below right)

10) Depending on your selection, additional fields may appear in the expense form: prior Authorization requests, dental cost estimates, number of Sessions etc.

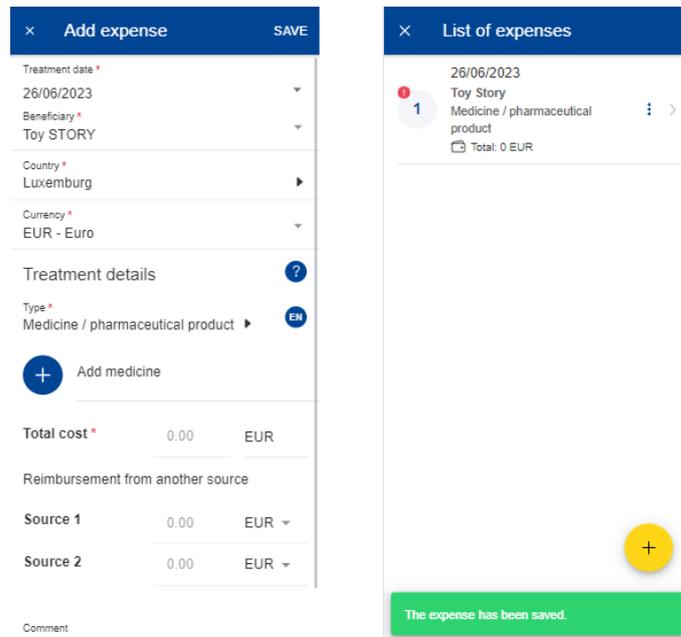
Note: You can choose to change the language of the Treatment detail by tapping on the language icon, just above the Treatment list. That will switch your list from English to French and vice versa.



11) Select the Country.

12) Change the Currency, if needed. The default currency is the currency of the country from the previous step.

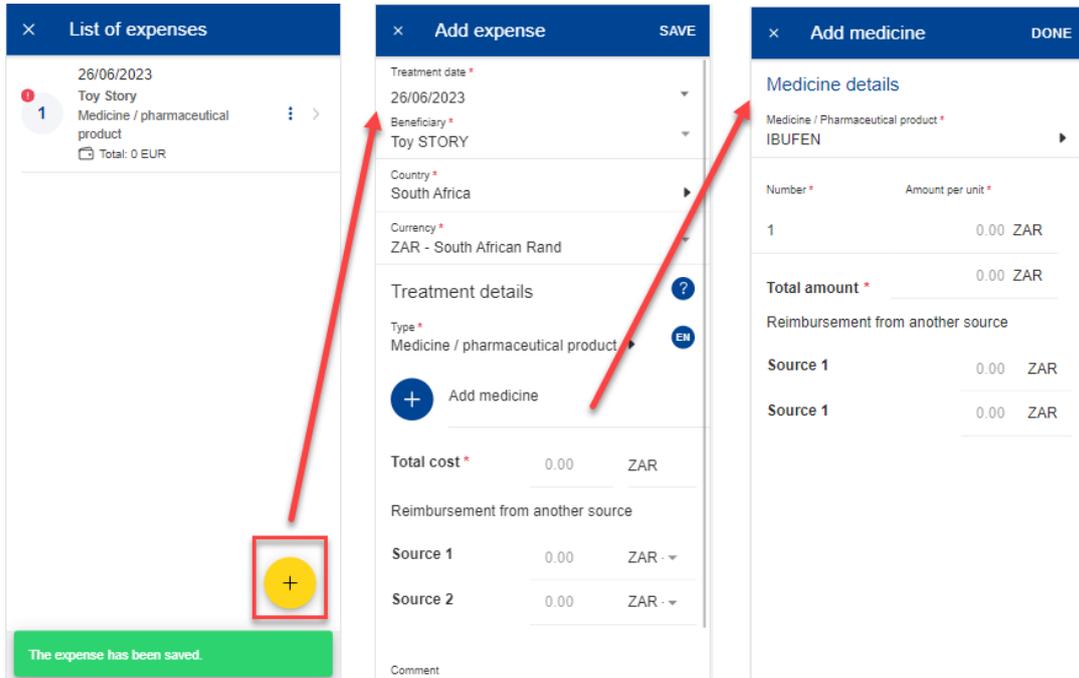
13) Add your costs and the reimbursement received from other sources and tap "Save". (below left)



- 14) The system will save and add your expense to the list of expenses (below right)
- 15) You can choose to add a new expense in the list of expenses by tapping the  icon. (below left)
- 16) In order to add a medicine, you go through the same steps as before, but select “Medicine/Pharmaceutical product” in the Treatment type details list. (below middle)
- 17) Tap on the  icon to add a new medicine. (below middle)
- 18) Select the medicine, add the number of items, the amount per item and the amount received from other sources if any. Tap on Done to return the expense screen (below right)

Note: The currency in the medicine details is given by the currency of the country selected in the expense screen. You cannot modify that in the Medicine details screen.

Note: If your medicine is not in the Medicines list, you can just type the name and you will be able to use it in your request.

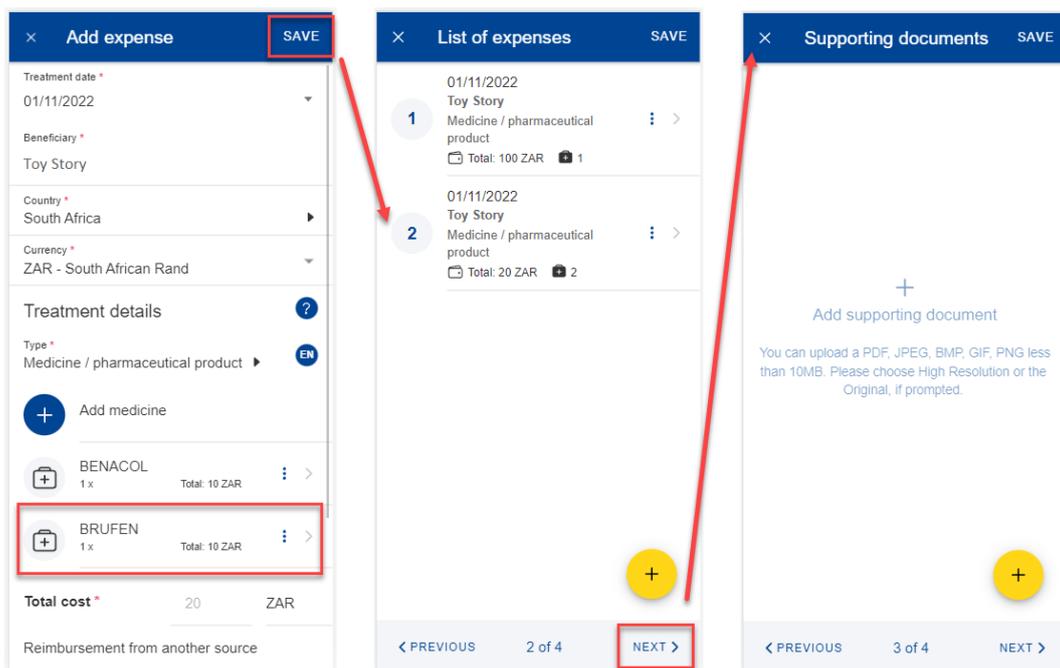


19) Your list of medicines will appear in the expense screen. If there are any errors, you will see a red exclamation icon on the medicine name. Please correct that in order to move forward and tap on Save when you're done (below left)

20) The system will save and add your new expense to the list of expenses (below middle)

21) You can still edit an expense by tapping on it or delete it by tapping on the three dots icon  next to the request and choosing Delete. Tap on Next to move to the next step. (below middle)

22) The system will move to Step 3 – Supporting documents (below right)

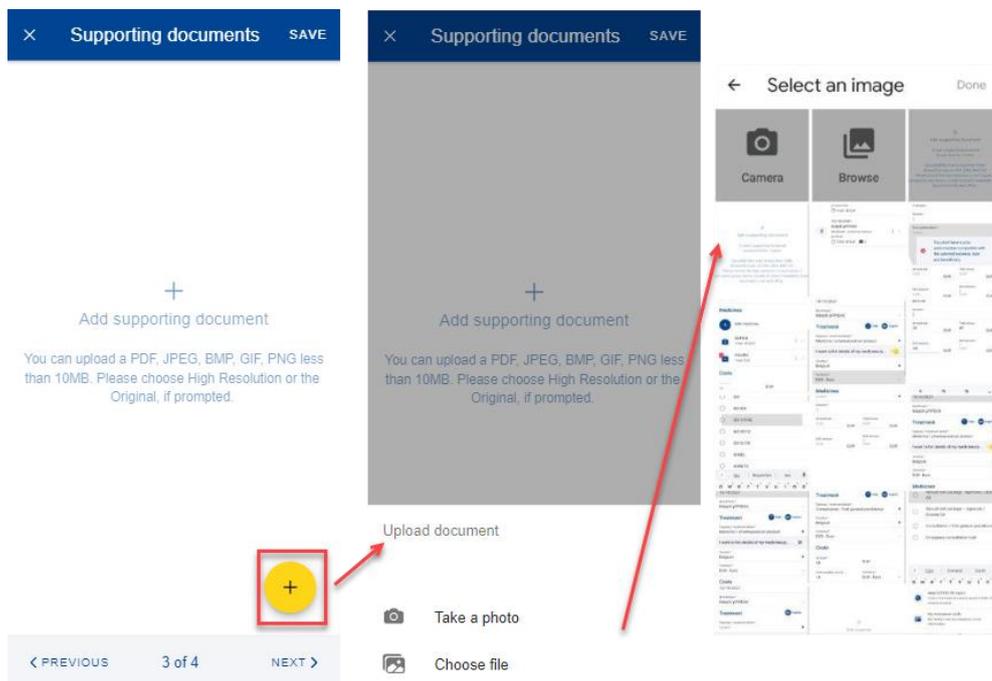


23) Step 3 – Supporting documents. Tap on the  icon to add a new supporting document. (below left)

Note: Please make sure to choose High resolution or the Original for your uploaded documents when promoted by your mobile, otherwise the documents may not be readable in the back office following the rendition to PDF.

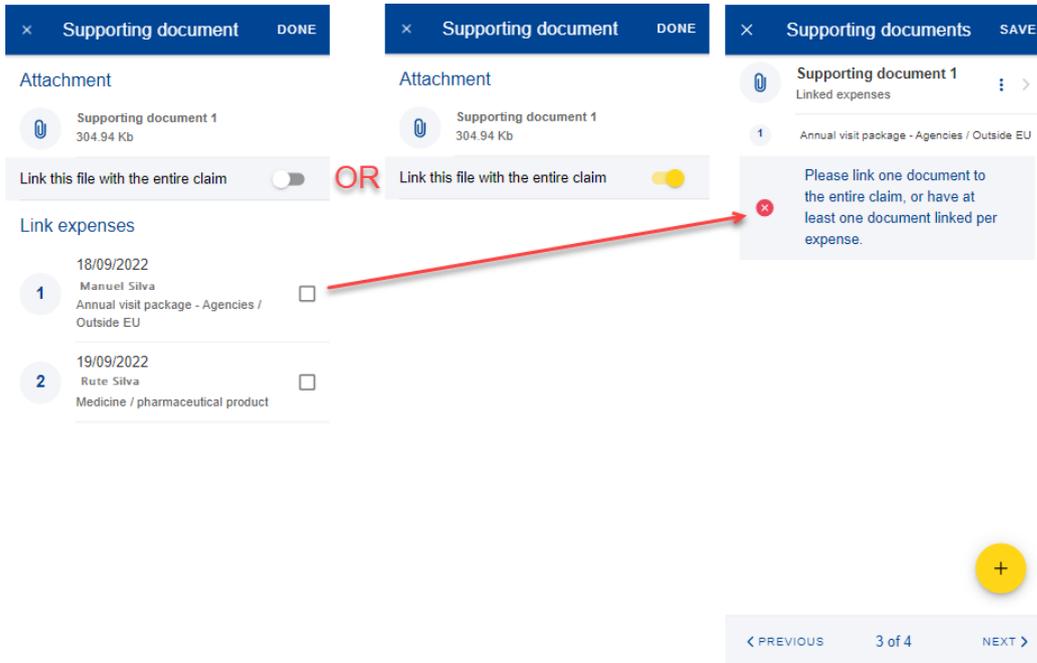
24) The system will prompt you to take a photo or choose a file from your mobile. (below middle)

25) Take a photo or select document from your documents list. (below right)



26) Once your document is uploaded, you need to link it to an expense (below left) or to the entire claim, if relevant (below middle). Tap Done to return to the list of supporting documents.

27) If you choose to link the document to an expense only, you will be prompted to make sure that all expenses have supporting proofs. (below right)

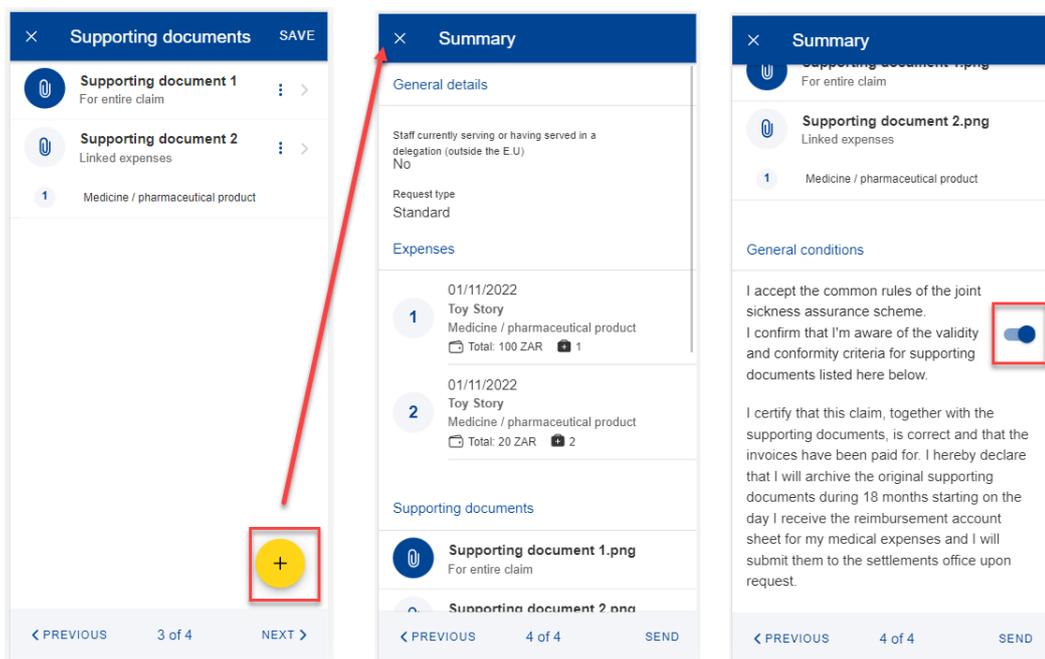


28) Repeat the process above and when you have finished adding your supporting documents and linking them to the expense, tap Next. (below right)

29) The system will move to Step 4 – Request summary. In this step you can view all your information in a summarized way: general information, expenses and supporting documents (below middle and right).

30) You can tap on the expenses or supporting documents to view all details but, if you need to edit any of the data, you need to go back to the previous steps.

31) When you're done checking your information, confirm that you have acknowledged the conditions of the JSIS and tap on "Send" to submit the request or on Save to keep it as Draft, if you have any doubts. (below right)

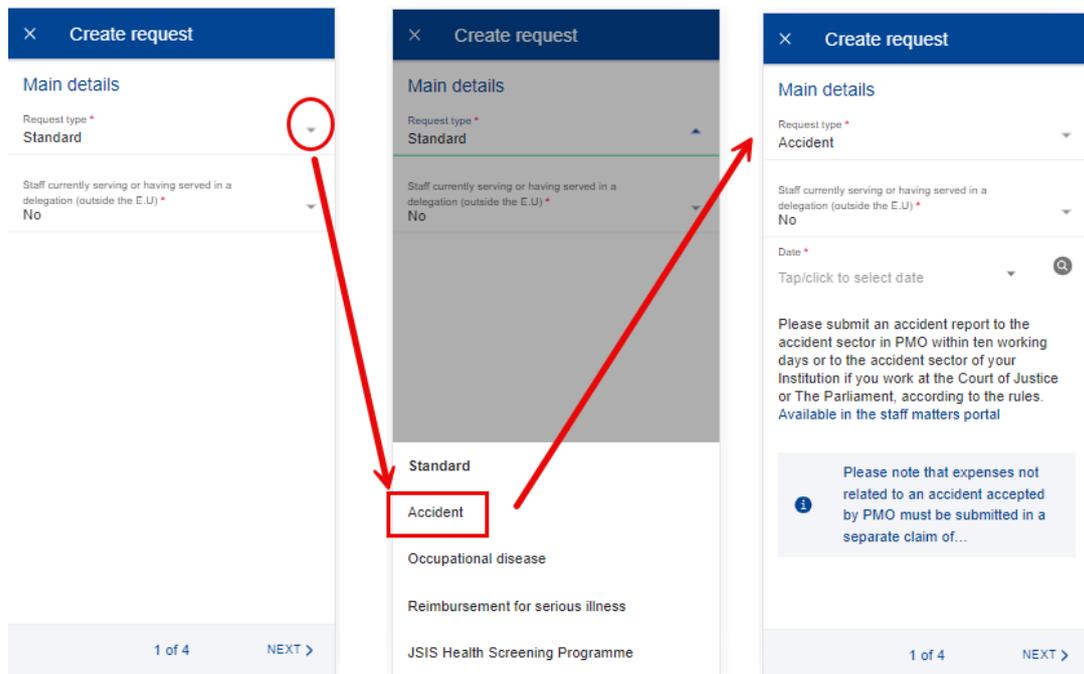


32) You can retrieve your request in the list of reimbursements. If the request is in Draft status, you can tap to edit it, if the request has been submitted you can view the information as shown in section 7.1 View reimbursement

7.2.2. Create an accident reimbursement request

Accident reimbursement steps:

- 1) From the service list, select “Reimbursement requests”
- 2) Tap on the  icon to add a new reimbursement request. (below left)
- 3) Step1: Change the delegation information if needed. By default, the Delegation field is set to “No”.
- 4) Choose “Accident” request type from list.
- 5) Select the date of the accident (can be only in the past). Tap “Next”



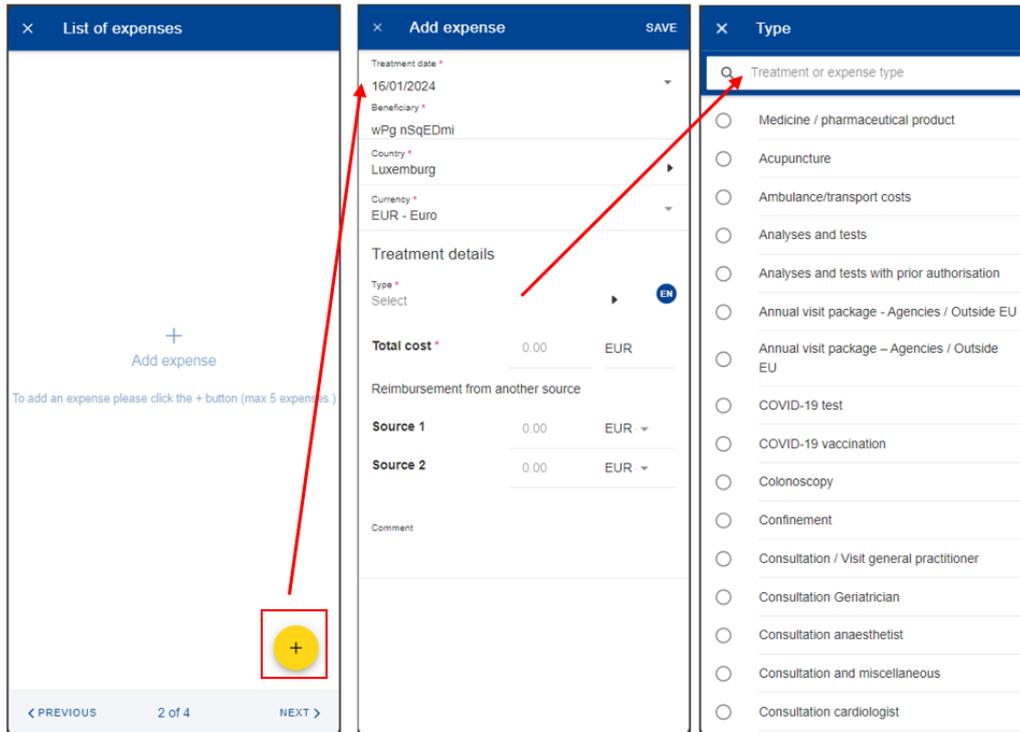
6) System displays Step2 - List of expenses.

- 7) Tap on the  icon to add a new expense. You are allowed to add up to five expenses. (below left)
- 8) Select the Treatment date. For Accident requests, the treatment date can be set only after the accident date. The list of beneficiaries will be filled in based on the selected date and the type of request. Only the beneficiaries covered by JSIS on that date will be displayed. (below middle)
- 9) Select the Beneficiary.

10) Select the Expense/Treatment detail from the list. Start by typing the name of the treatment or select directly from the list. (below right)

11) Depending on your selection, additional fields may appear in the expense form: number of Sessions etc.

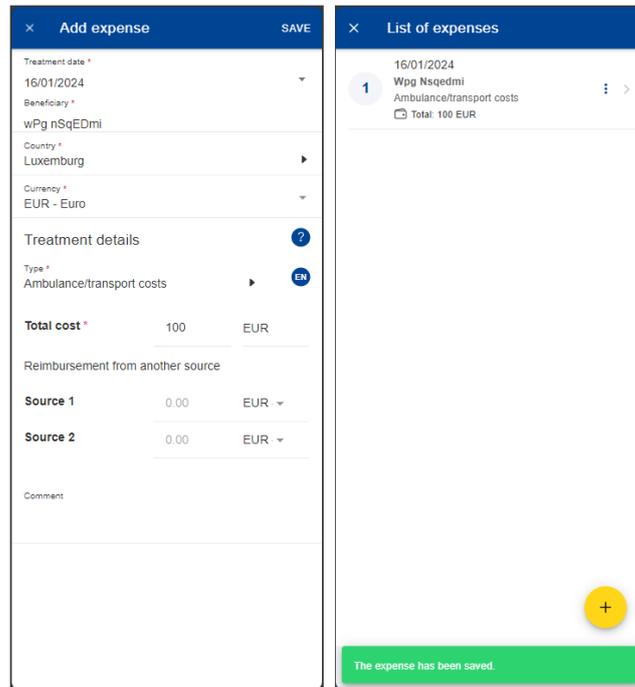
Note: You can choose to change the language of the Treatment detail by tapping on the language icon, just above the Treatment list. That will switch your list from English to French and vice versa.



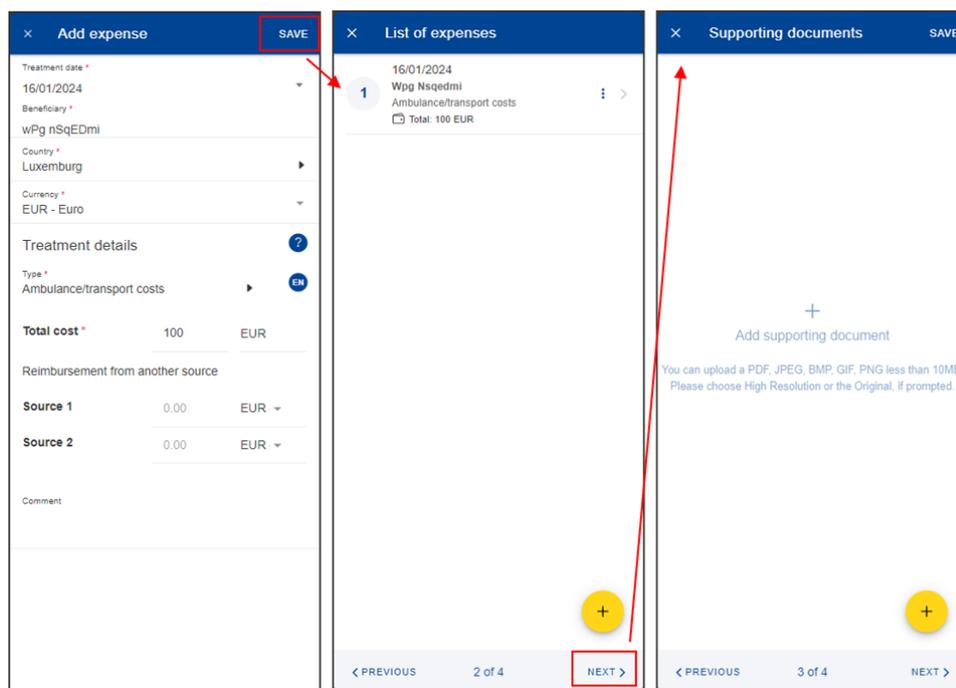
12) Select the Country, if needed

13) Change the Currency, if needed. The default currency is the currency of the country from the previous step.

14) Add your costs and the reimbursement received from other sources and tap "Save". (below left)



- 15) The system will save and add your expense to the list of expenses (below right)
- 16) You can choose to add a new expense in the list of expenses by tapping the  icon. (below left)
- 17) You can still edit an expense by tapping on it or delete it by tapping on the three dots icon  next to the request and choosing Delete. Tap on Next to move to the next step. (below middle)
- 18) The system will move to Step 3 – Supporting documents (below right)

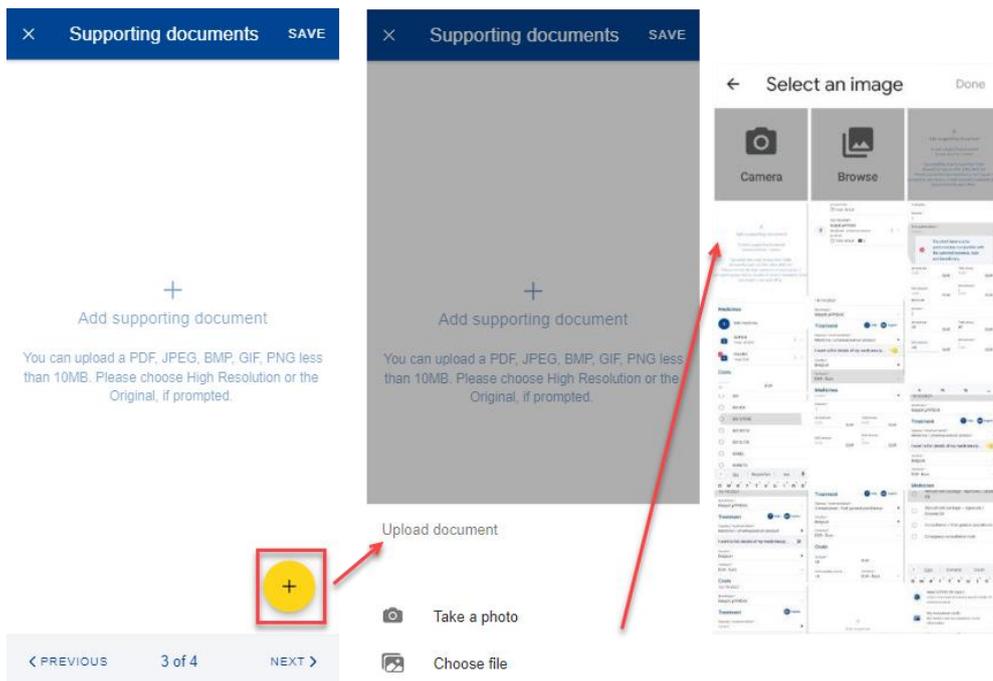


19) Step 3 – Supporting documents. Tap on the  icon to add a new supporting document. (below left)

Note: Please make sure to choose High resolution or the Original for your uploaded documents when promoted by your mobile, otherwise the documents may not be readable in the back office following the rendition to PDF.

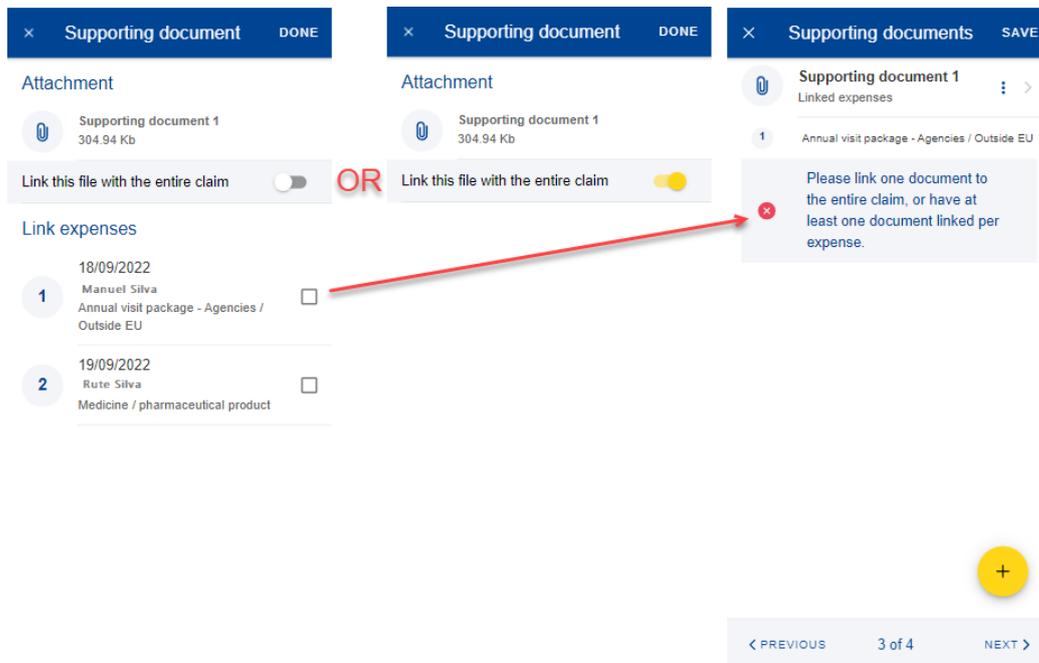
20) The system will prompt you to take a photo or choose a file from your mobile. (below middle)

21) Take a photo or select document from your documents list. (below right)



22) Once your document is uploaded, you need to link it to an expense (below left) or to the entire claim, if relevant (below middle). Tap Done to return to the list of supporting documents.

23) If you choose to link the document to an expense only, you will be prompted to make sure that all expenses have supporting proofs. (below right)

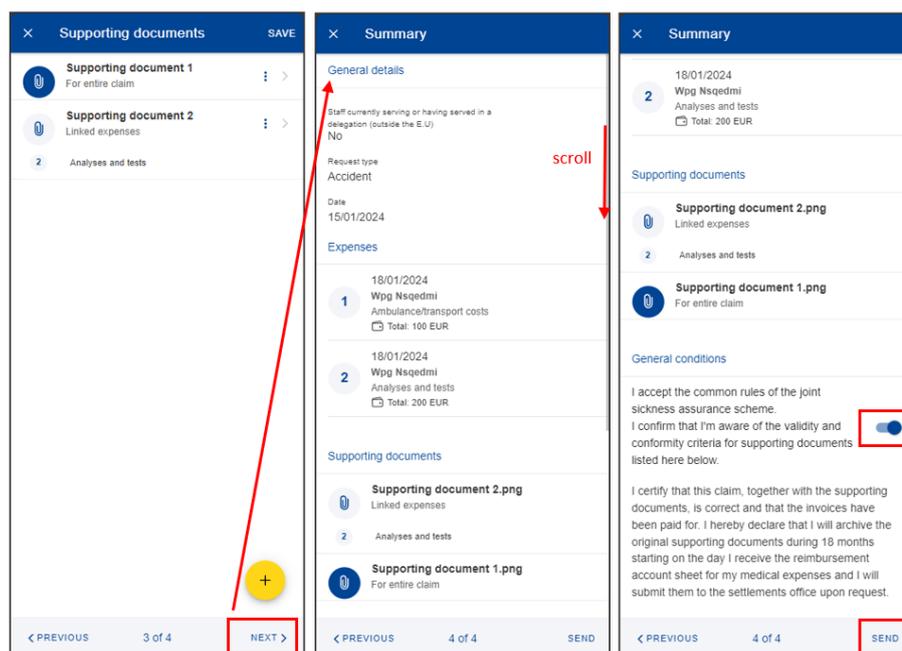


24) Repeat the process above and when you have finished adding your supporting documents and linking them to the expense, tap Next. (below right)

25) The system will move to Step 4 – Request summary. In this step you can view all your information in a summarized way: general information, expenses and supporting documents (below middle and right).

26) You can tap on the expenses or supporting documents to view all details but, if you need to edit any of the data, you need to go back to the previous steps.

27) When you're done checking your information, confirm that you have acknowledged the conditions of the JSIS and tap on "Send" to submit the request or on Save to keep it as Draft, if you have any doubts. (below right)

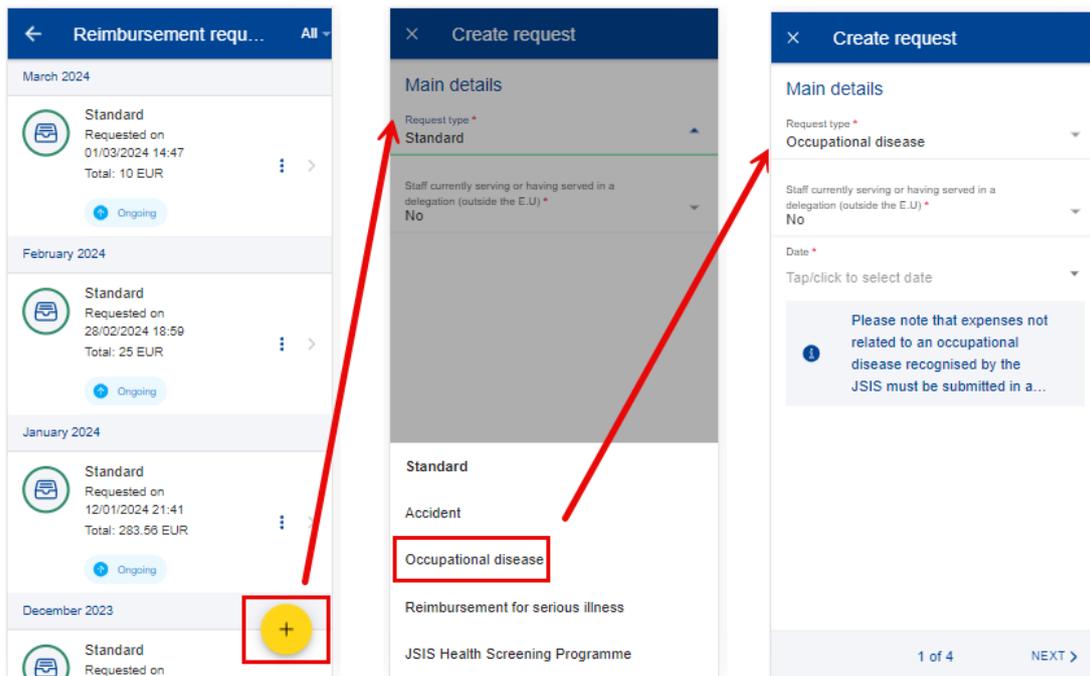


- 28) You can retrieve your request in the list of reimbursements. If the request is in Draft status, you can tap to edit it, if the request has been submitted you can view the information as shown in section 7.1 View reimbursement

7.2.3. Create an occupational disease reimbursement request

Occupational disease reimbursement steps:

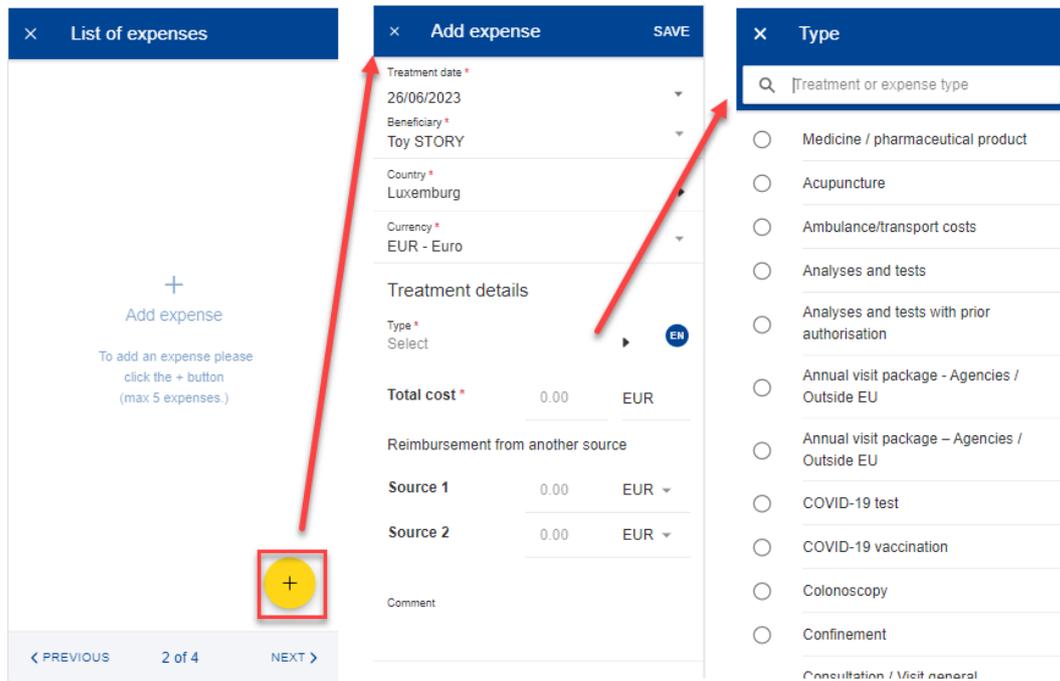
- 1) From the service list, select “Reimbursement requests”
- 2) Tap on the  icon to add a new reimbursement request. (below left)
- 3) Step1: Change the delegation information if needed. By default, the Delegation field is set to “No”.
- 4) Choose “Occupational disease” request type from list.
- 5) Specify the date of the request. Tap “Next”



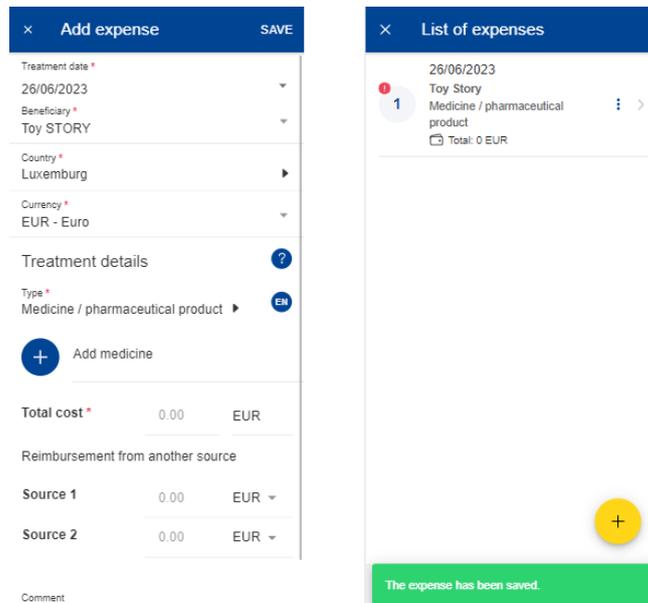
- 6) System displays Step2 - List of expenses.
- 7) Tap on the  icon to add a new expense. You are allowed to add up to five expenses. (below left)
- 8) Select the Treatment date. The list of beneficiaries will be filled in based on the selected date and the type of request. Only the beneficiaries covered by JSIS on that date will be displayed. (below middle)
- 9) Select the Beneficiary.

- 10) Select the Expense/Treatment detail from the list. Start by typing the name of the treatment or select directly from the list. (below right)
- 11) Depending on your selection, additional fields may appear in the expense form: prior Authorization requests, dental cost estimates, number of Sessions etc.

Note: You can choose to change the language of the Treatment detail by tapping on the language icon, just above the Treatment list. That will switch your list from English to French and vice versa.



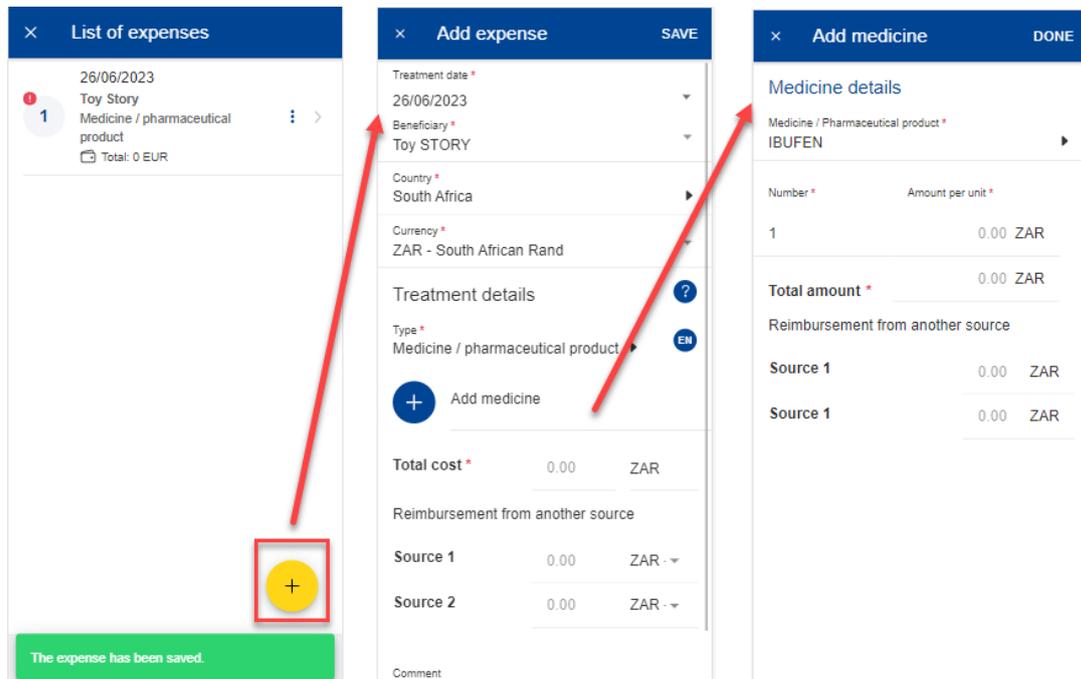
- 12) Select the Country, if needed. .
- 13) Change the Currency, if needed. The default currency is the currency of the country from the previous step.
- 14) Add your costs and the reimbursement received from other sources and tap "Save". (below left)



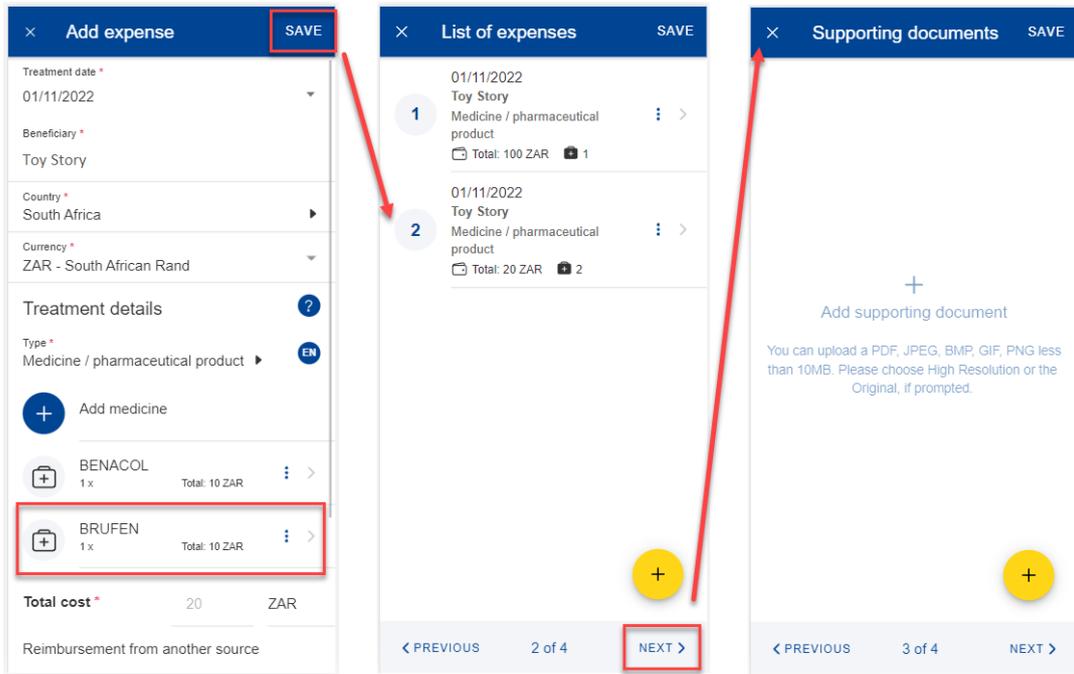
- 15) The system will save and add your expense to the list of expenses (below right)
- 16) You can choose to add a new expense in the list of expenses by tapping the  icon. (below left)
- 17) In order to add a medicine, you go through the same steps as before, but select “Medicine/Pharmaceutical product” in the Treatment details list. (below middle)
- 18) Tap on the  icon to add a new medicine. (below middle)
- 19) Select the medicine, add the number of items, the amount per item and the amount received from other sources if any. Tap on Done to return the expense screen (below right)

Note: The currency in the medicine details is given by the currency of the country selected in the expense screen. You cannot modify that in the Medicine details screen.

Note: If your medicine is not in the Medicines list, you can just type the name and you will be able to use it in your request.



- 20) Your list of medicines will appear in the expense screen. If there are any errors, you will see a red exclamation icon on the medicine name. Please correct that in order to move forward and tap on Save when you're done (below left)
- 21) The system will save and add your new expense to the list of expenses (below middle)
- 22) You can still edit an expense by tapping on it or delete it by tapping on the three dots icon  next to the request and choosing Delete. Tap on Next to move to the next step. (below middle)
- 23) The system will move to Step 3 – Supporting documents (below right)

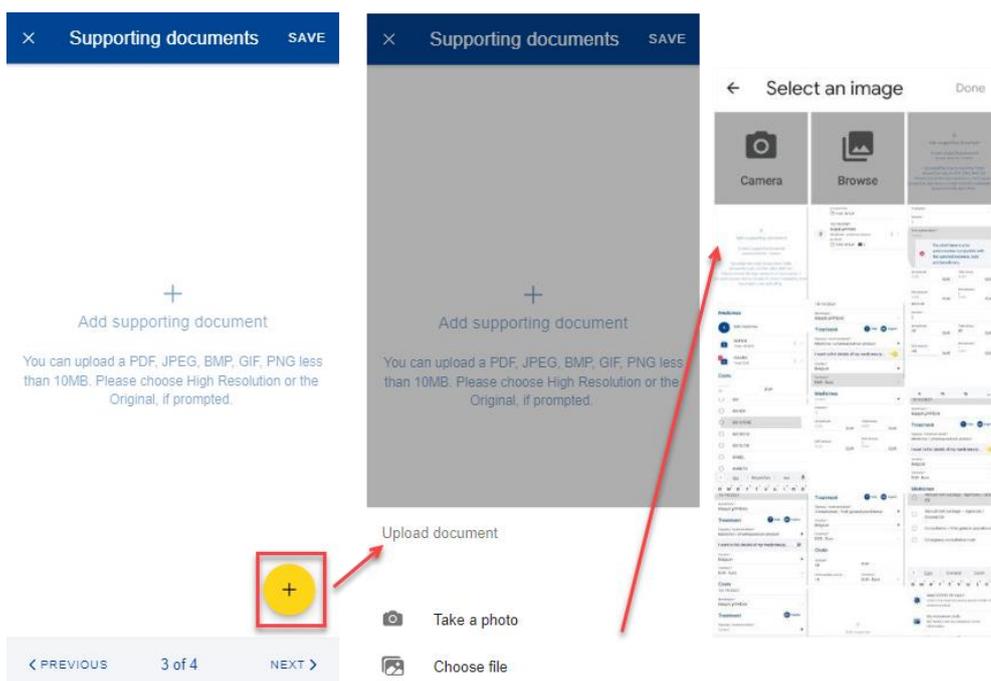


24) Step 3 – Supporting documents. Tap on the  icon to add a new supporting document. (below left)

Note: Please make sure to choose High resolution or the Original for your uploaded documents when promoted by your mobile, otherwise the documents may not be readable in the back office following the rendition to PDF.

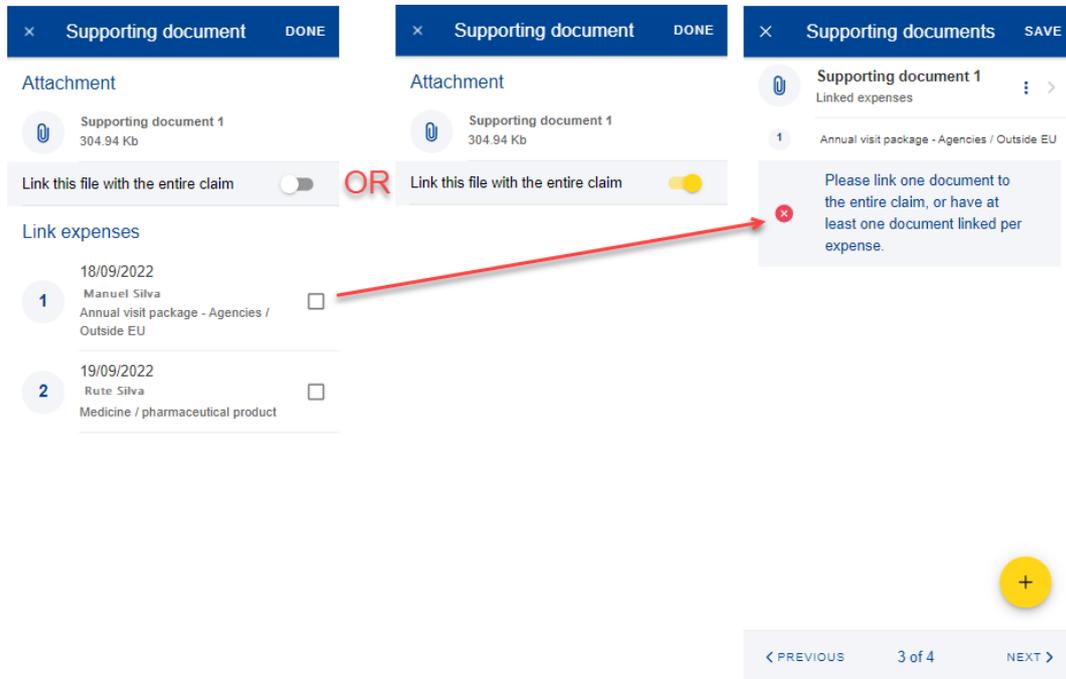
25) The system will prompt you to take a photo or choose a file from your mobile. (below middle)

26) Take a photo or select document from your documents list. (below right)



27) Once your document is uploaded, you need to link it to an expense (below left) or to the entire claim, if relevant (below middle). Tap Done to return to the list of supporting documents.

28) If you choose to link the document to an expense only, you will be prompted to make sure that all expenses have supporting proofs. (below right)

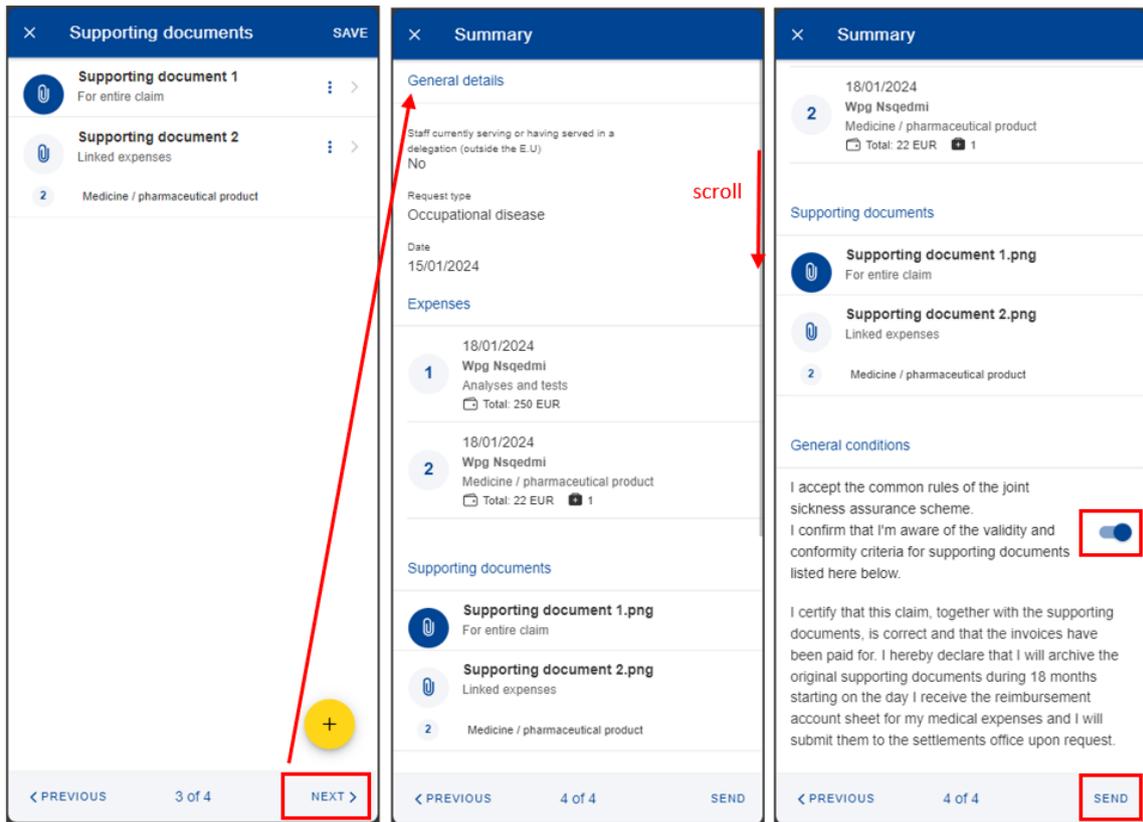


29) Repeat the process above and when you have finished adding your supporting documents and linking them to the expense, tap Next. (below right)

30) The system will move to Step 4 – Request summary. In this step you can view all your information in a summarized way: general information, expenses and supporting documents (below middle and right).

31) You can tap on the expenses or supporting documents to view all details but, if you need to edit any of the data, you need to go back to the previous steps.

32) When you're done checking your information, confirm that you have acknowledged the conditions of the JSIS and tap on "Send" to submit the request or on Save to keep it as Draft, if you have any doubts. (below right)

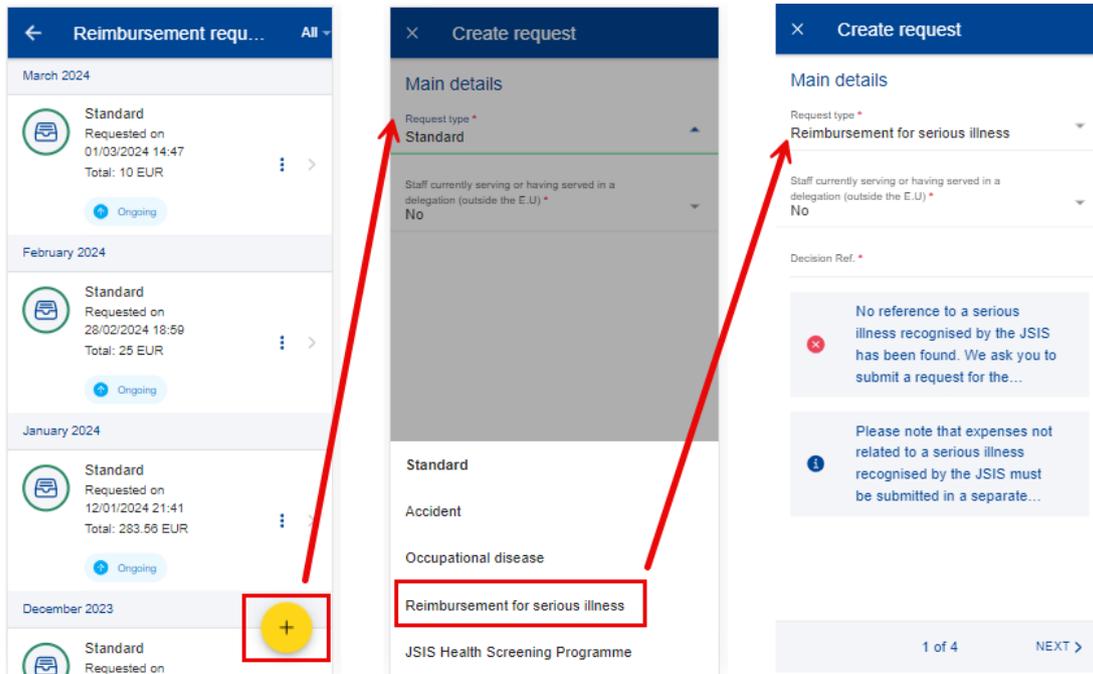


- 33) You can retrieve your request in the list of reimbursements. If the request is in Draft status, you can tap to edit it, if the request has been submitted you can view the information as shown in section 7.1 View reimbursement

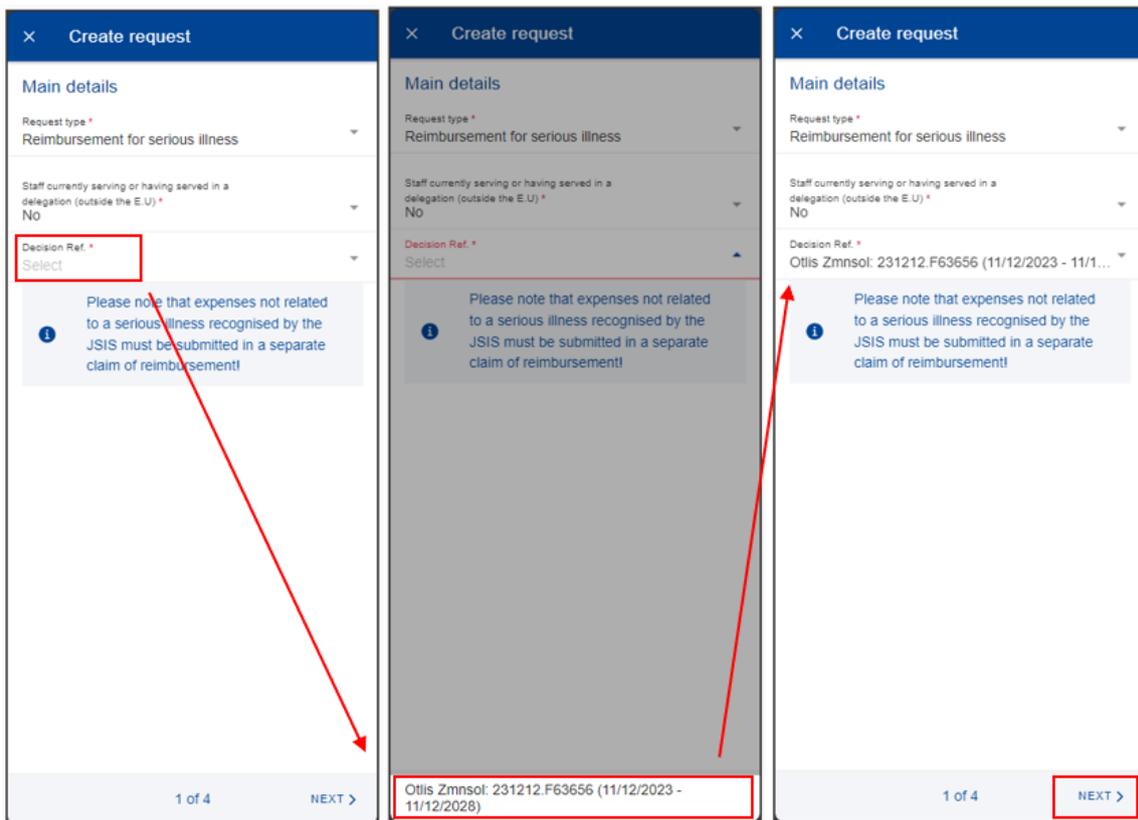
7.2.4. Create a serious illness reimbursement request

For a reimbursement for serious illness request there is a pre-requisite to have a decision registered in JSIS. Request steps:

- 1) From the service list, select “Reimbursement requests”
- 2) Tap on the  icon to add a new reimbursement request. (below left)
- 3) Step1: Change the delegation information if needed. By default, the Delegation field is set to “No”.
- 4) Choose “Reimbursement for serious illness” request type from list.



5) System will display an additional field to select the decision. Select the decision and tap “Next”

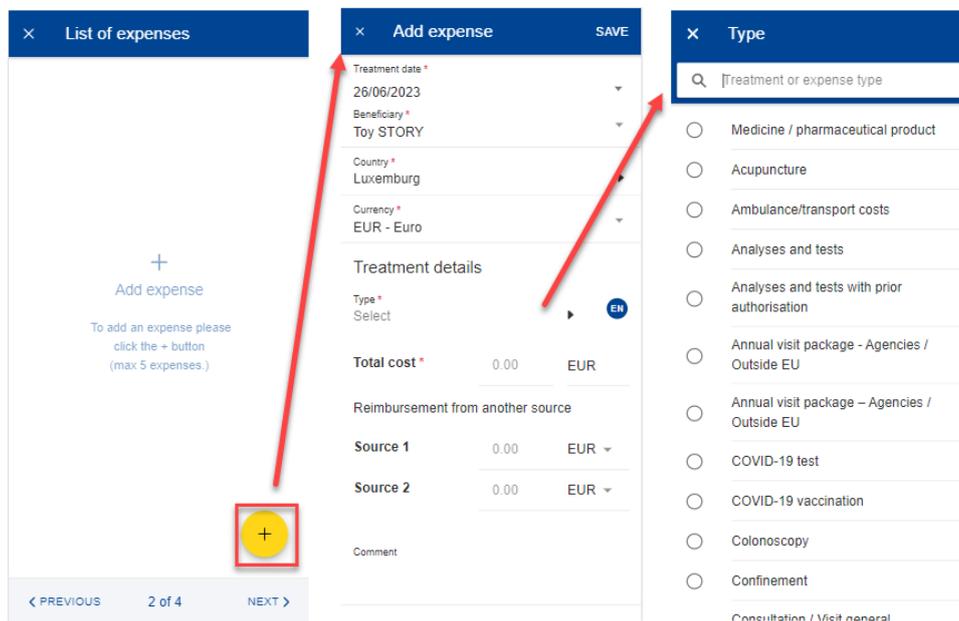


6) System displays Step2 - List of expenses.

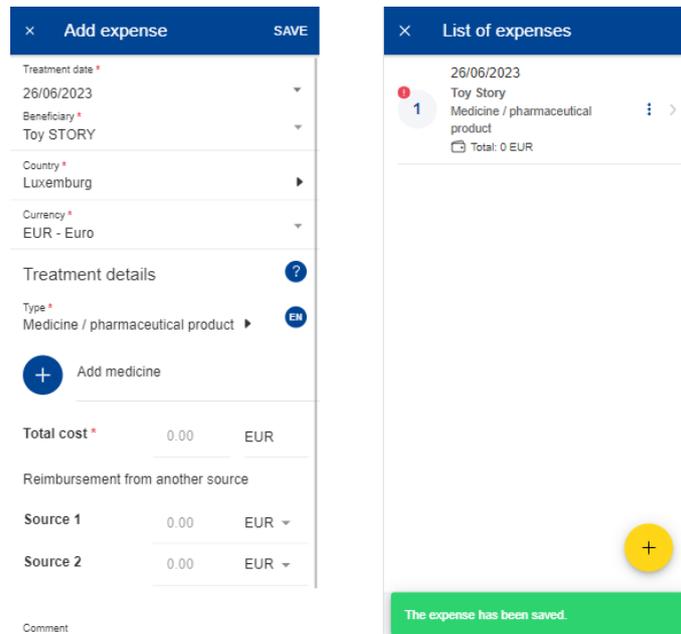
7) Tap on the  icon to add a new expense. You are allowed to add up to five expenses. The expense list is filtered according to the serious illness. (below left)

- 8) Select the Treatment date. The list of beneficiaries will be filled in based on the selected date and the type of request. Only the beneficiaries covered by JSIS on that date will be displayed. (below middle)
- 9) Select the Beneficiary.
- 10) Select the Expense/Treatment detail from the list. Start by typing the name of the treatment or select directly from the list. (below right)
- 11) Depending on your selection, additional fields may appear in the expense form: number of Sessions etc.

Note: You can choose to change the language of the Treatment detail by tapping on the language icon, just above the Treatment list. That will switch your list from English to French and vice versa.



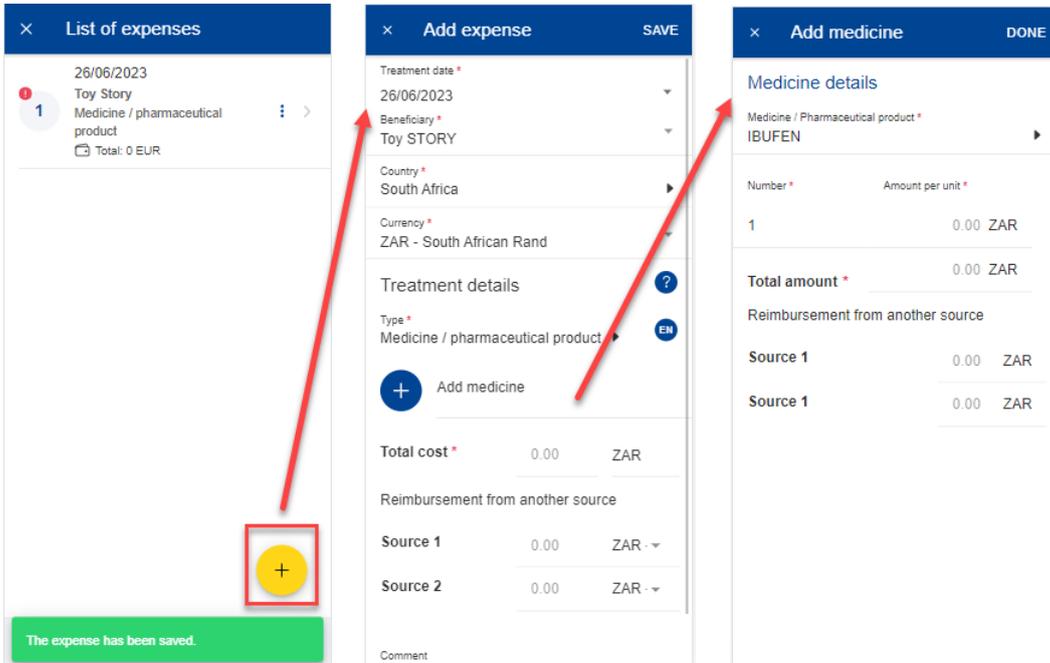
- 12) Select the Country.
- 13) Change the Currency, if needed. The default currency is the currency of the country from the previous step.
- 14) Add your costs and the reimbursement received from other sources and tap “Save”. (below left)



- 15) The system will save and add your expense to the list of expenses (below right)
- 16) You can choose to add a new expense in the list of expenses by tapping the  icon. (below left)
- 17) In order to add a medicine, you go through the same steps as before, but select “Medicine/Pharmaceutical product” in the Treatment type details list. (below middle)
- 18) Tap on the  icon to add a new medicine. (below middle)
- 19) Select the medicine, add the number of items, the amount per item and the amount received from other sources if any. Tap on Done to return the expense screen (below right)

Note: The currency in the medicine details is given by the currency of the country selected in the expense screen. You cannot modify that in the Medicine details screen.

Note: If your medicine is not in the Medicines list, you can just type the name and you will be able to use it in your request.

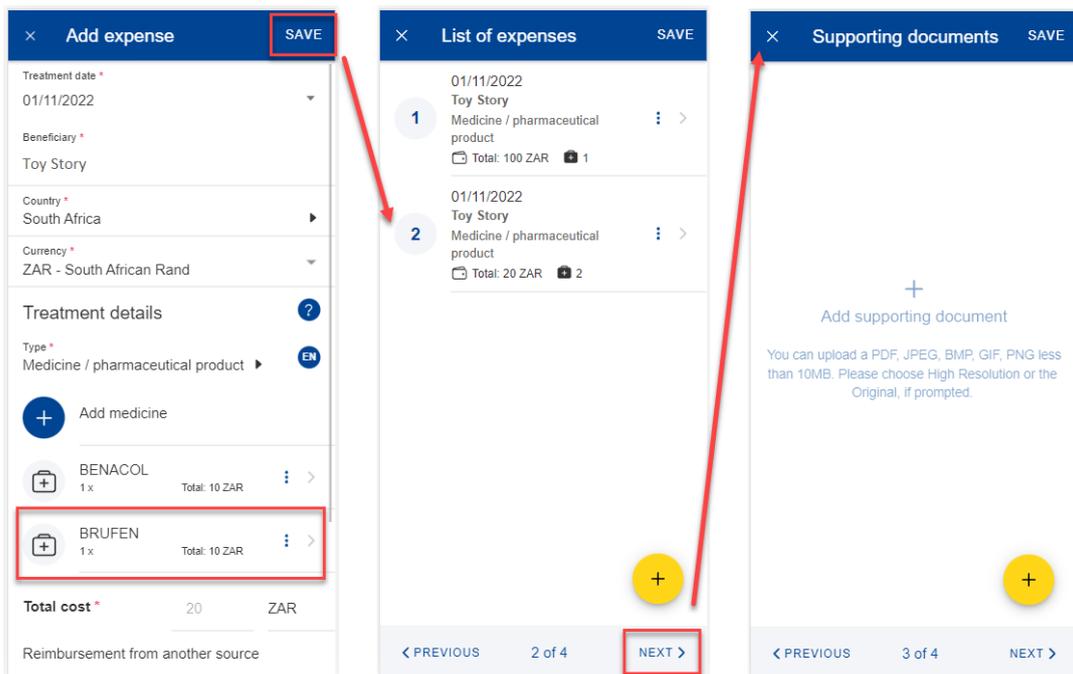


20) Your list of medicines will appear in the expense screen. If there are any errors, you will see a red exclamation icon on the medicine name. Please correct that in order to move forward and tap on Save when you're done (below left)

21) The system will save and add your new expense to the list of expenses (below middle)

22) You can still edit an expense by tapping on it or delete it by tapping on the three dots icon  next to the request and choosing Delete. Tap on Next to move to the next step. (below middle)

23) The system will move to Step 3 – Supporting documents (below right)

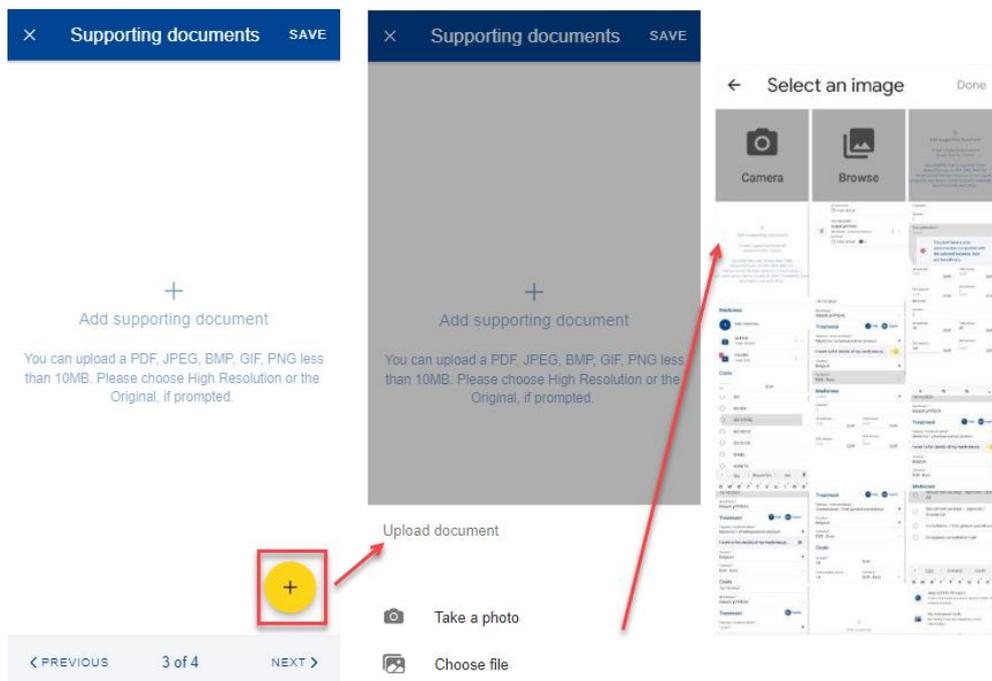


24) Step 3 – Supporting documents. Tap on the  icon to add a new supporting document. (below left)

Note: Please make sure to choose High resolution or the Original for your uploaded documents when promoted by your mobile, otherwise the documents may not be readable in the back office following the rendition to PDF.

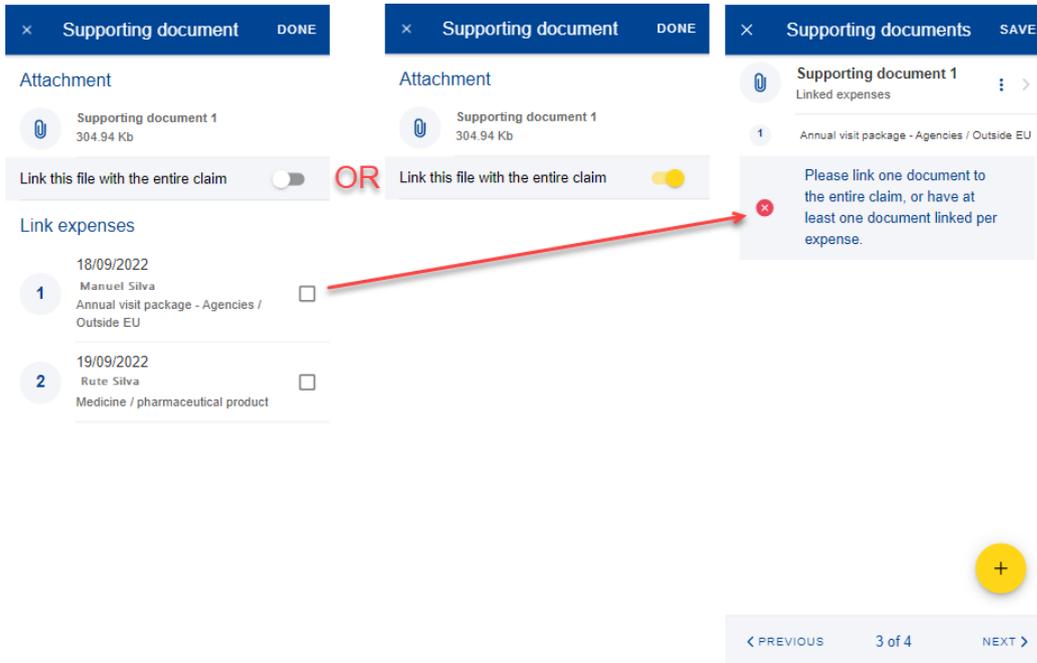
25) The system will prompt you to take a photo or choose a file from your mobile. (below middle)

26) Take a photo or select document from your documents list. (below right)



27) Once your document is uploaded, you need to link it to an expense (below left) or to the entire claim, if relevant (below middle). Tap Done to return to the list of supporting documents.

28) If you choose to link the document to an expense only, you will be prompted to make sure that all expenses have supporting proofs. (below right)

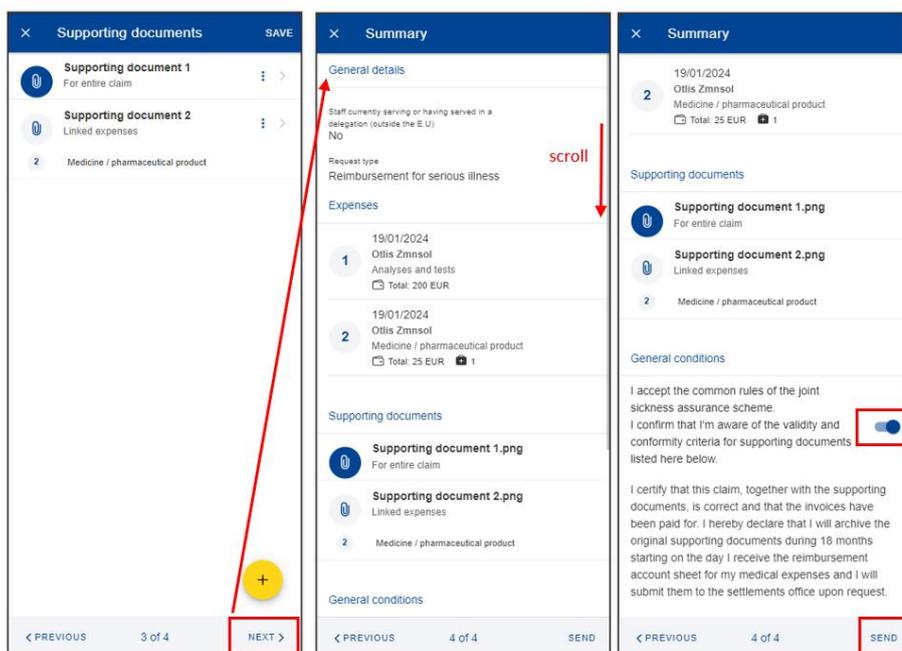


29) Repeat the process above and when you have finished adding your supporting documents and linking them to the expense, tap Next. (below right)

30) The system will move to Step 4 – Request summary. In this step you can view all your information in a summarized way: general information, expenses and supporting documents (below middle and right).

31) You can tap on the expenses or supporting documents to view all details but, if you need to edit any of the data, you need to go back to the previous steps.

32) When you're done checking your information, confirm that you have acknowledged the conditions of the JSIS and tap on "Send" to submit the request or on Save to keep it as Draft, if you have any doubts. (below right)

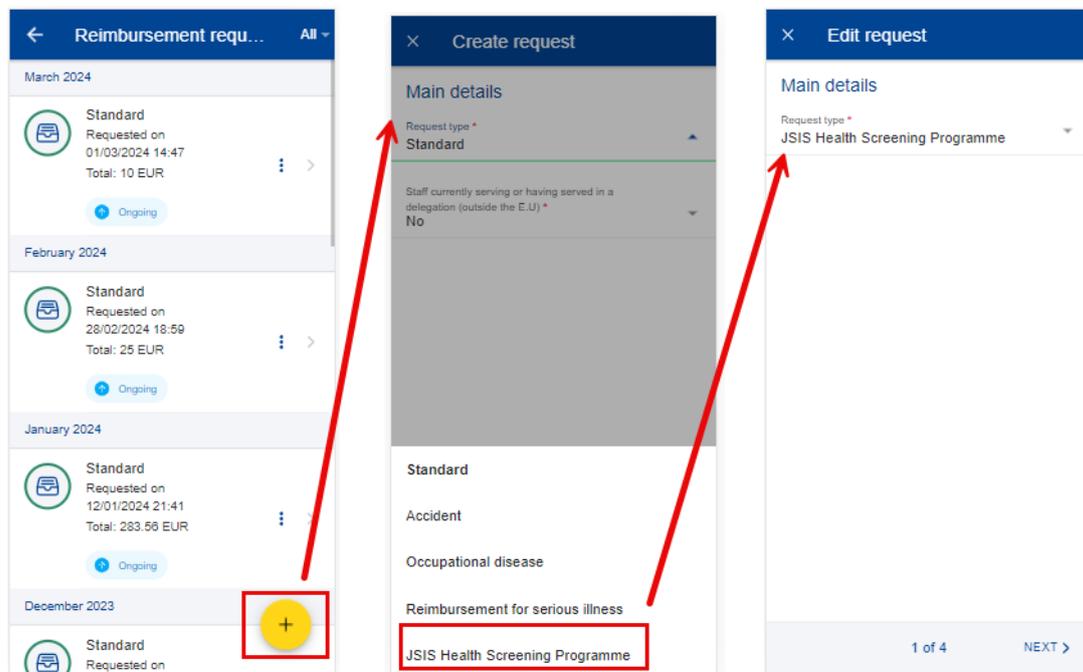


- 33) You can retrieve your request in the list of reimbursements. If the request is in Draft status, you can tap to edit it, if the request has been submitted you can view the information as shown in section 7.1 View reimbursement

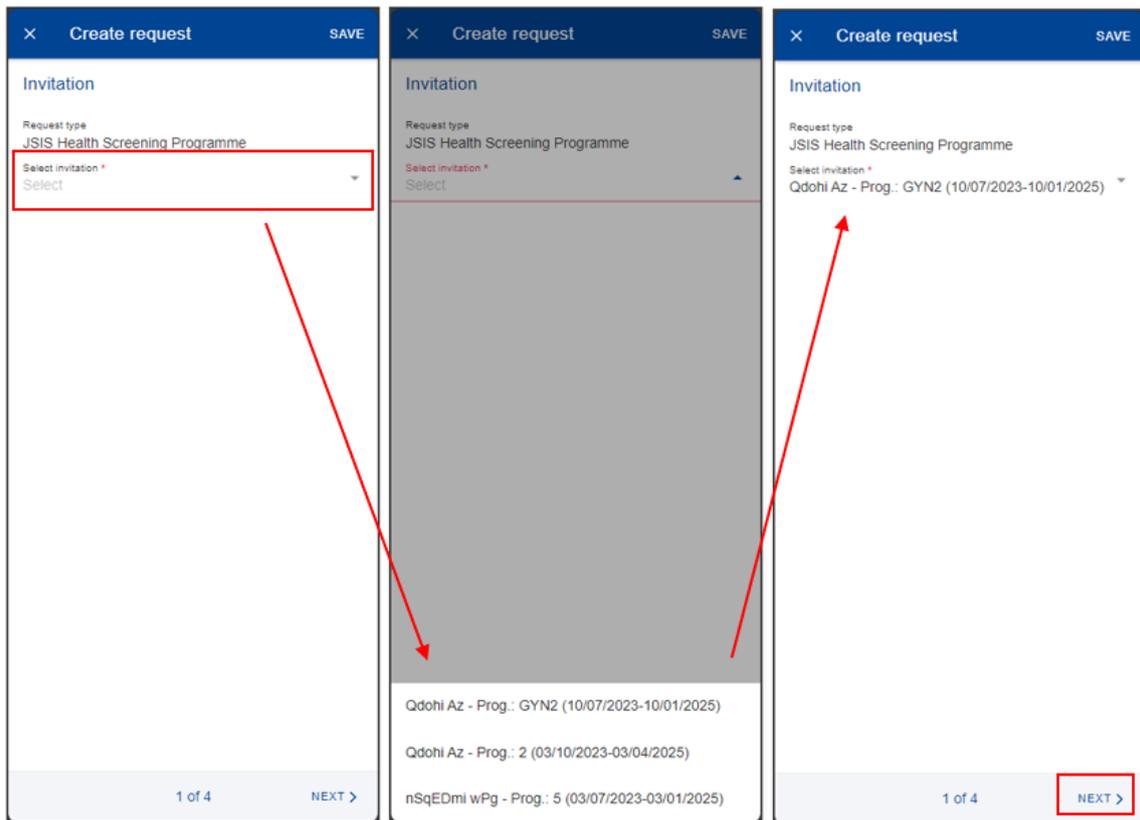
7.2.5. Create a JSIS Health Screening Programme reimbursement request

JSIS Health Screening Programme reimbursement steps:

- 1) From the service list, select “Reimbursement requests”
- 2) Tap on the  icon to add a new reimbursement request. (below left)
- 3) Step1: Change the delegation information if needed. By default, the Delegation field is set to “No”.
- 4) Choose “JSIS Health Screening Programme” request type from list. Tap “Next”



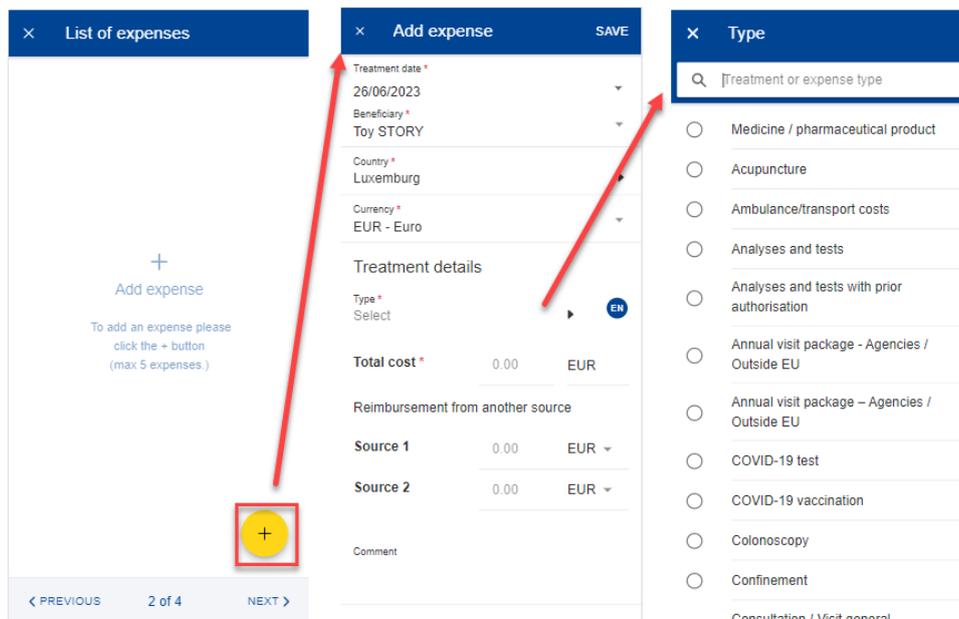
- 5) System displays a field to choose the invitation. Tap on invitation and select the related invitation. There is a pre-requisite to have a decision registered in JSIS.



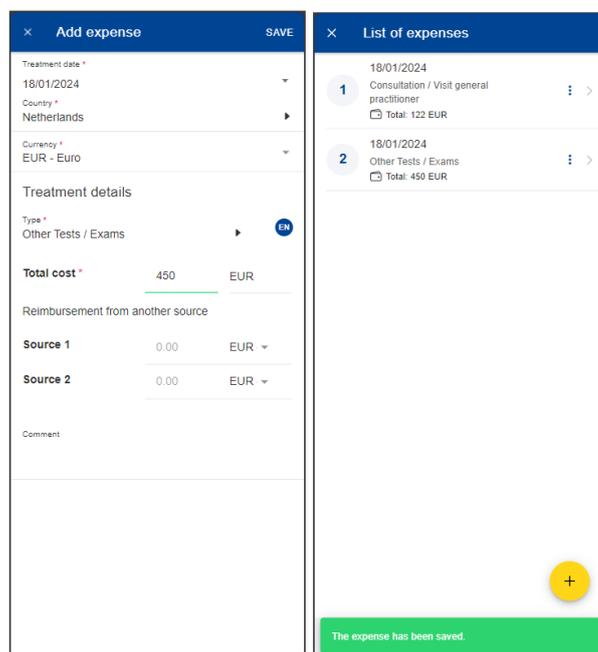
6) System displays Step2 - List of expenses.

- 7) Tap on the  icon to add a new expense. You are allowed to add up to five expenses. (below left)
- 8) Select the Treatment date.
- 9) Select the Expense/Treatment detail from the list. Start by typing the name of the treatment or select directly from the list. (below right). The expense list is filtered according to the serious illness.
- 10) Depending on your selection, additional fields may appear in the expense form: prior Authorization requests, number of Sessions etc.

Note: You can choose to change the language of the Treatment detail by tapping on the language icon, just above the Treatment list. That will switch your list from English to French and vice versa.

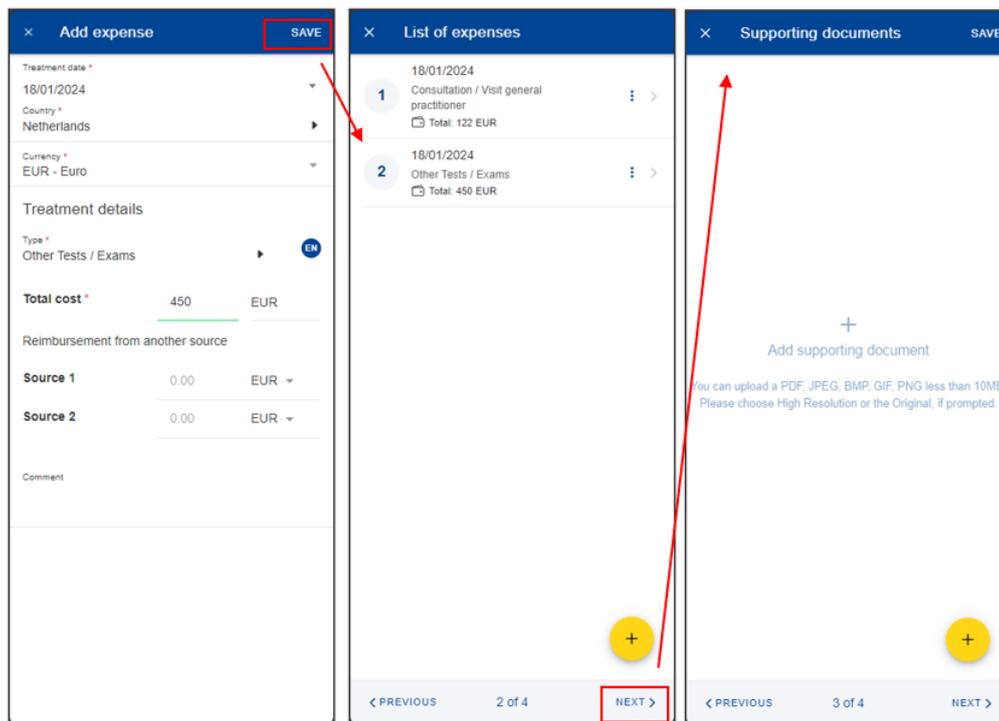


- 11) Select the Country.
- 12) Change the Currency, if needed. The default currency is the currency of the country from the previous step.
- 13) Add your costs and the reimbursement received from other sources and tap “Save”. (below left)



- 14) The system will save and add your expense to the list of expenses (below right)
- 15) You can choose to add a new expense in the list of expenses by tapping the  icon and follow the same process as above.
- 16) The system will save and add your new expense to the list of expenses (below middle)

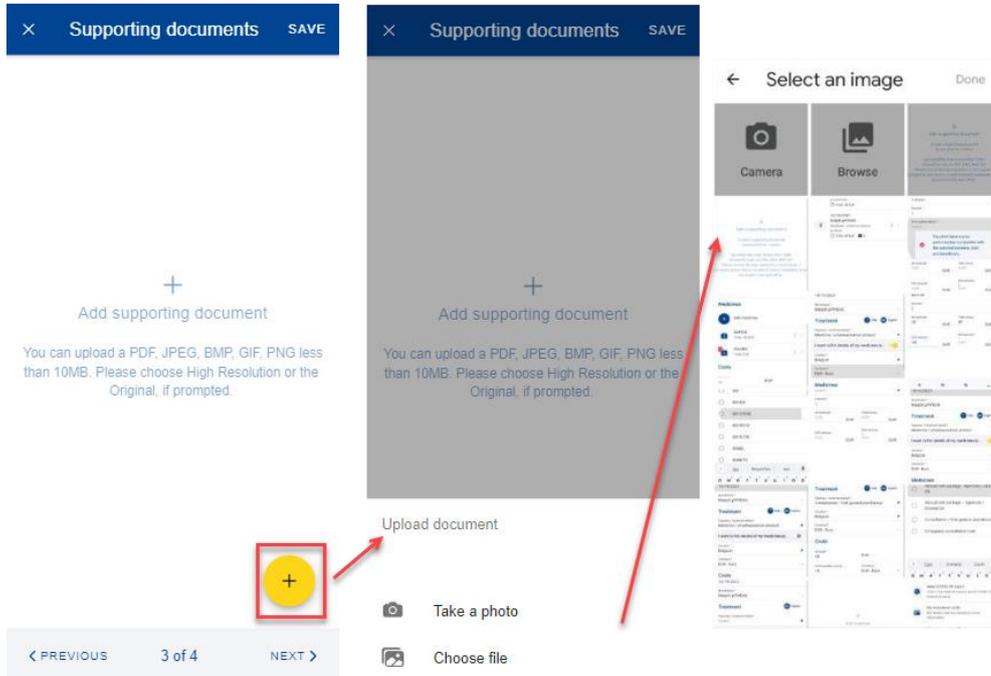
- 17) You can still edit an expense by tapping on it or delete it by tapping on the three dots icon  next to the request and choosing Delete. Tap on Next to move to the next step. (below middle)
- 18) The system will move to Step 3 – Supporting documents (below right)



- 19) Step 3 – Supporting documents. Tap on the  icon to add a new supporting document. (below left)

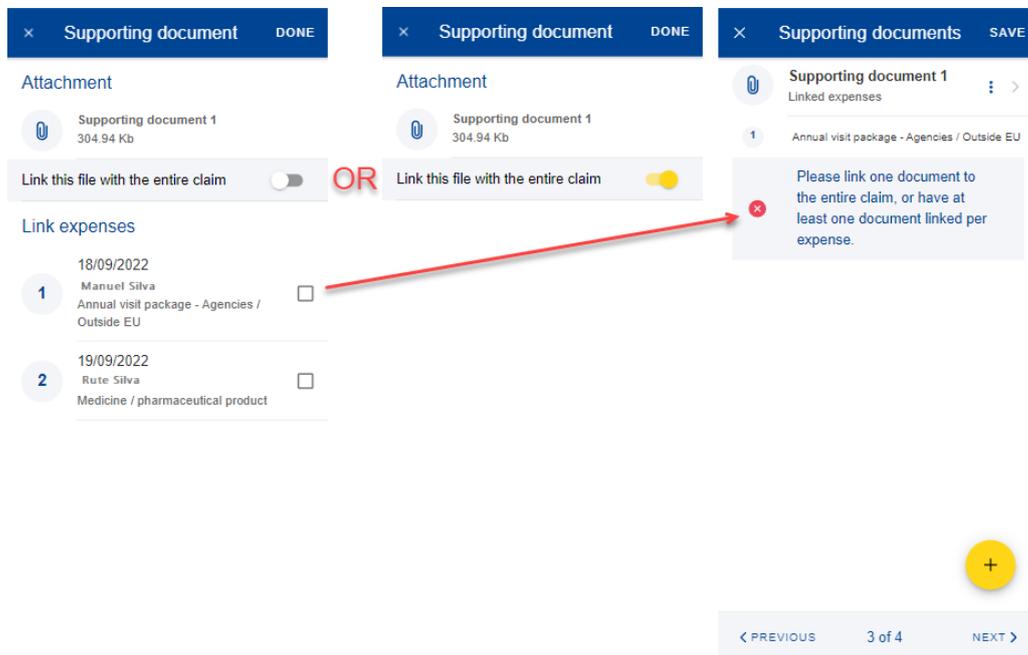
Note: Please make sure to choose High resolution or the Original for your uploaded documents when promoted by your mobile, otherwise the documents may not be readable in the back office following the rendition to PDF.

- 20) The system will prompt you to take a photo or choose a file from your mobile. (below middle)
- 21) Take a photo or select document from your documents list. (below right)



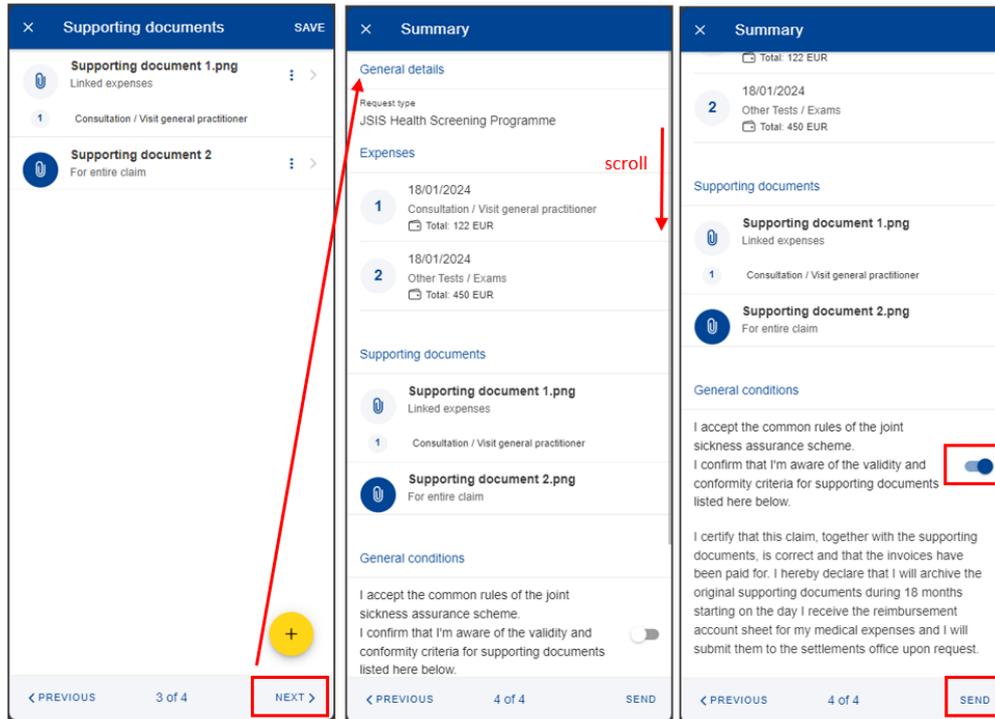
22) Once your document is uploaded, you need to link it to an expense (below left) or to the entire claim, if relevant (below middle). Tap Done to return to the list of supporting documents.

23) If you choose to link the document to an expense only, you will be prompted to make sure that all expenses have supporting proofs. (below right)



24) Repeat the process above and when you have finished adding your supporting documents and linking them to the expense, tap Next. (below right)

- 25) The system will move to Step 4 – Request summary. In this step you can view all your information in a summarized way: general information, expenses and supporting documents (below middle and right).
- 26) You can tap on the expenses or supporting documents to view all details but, if you need to edit any of the data, you need to go back to the previous steps.
- 27) When you're done checking your information, confirm that you have acknowledged the conditions of the JSIS and tap on "Send" to submit the request or on Save to keep it as Draft, if you have any doubts. (below right)

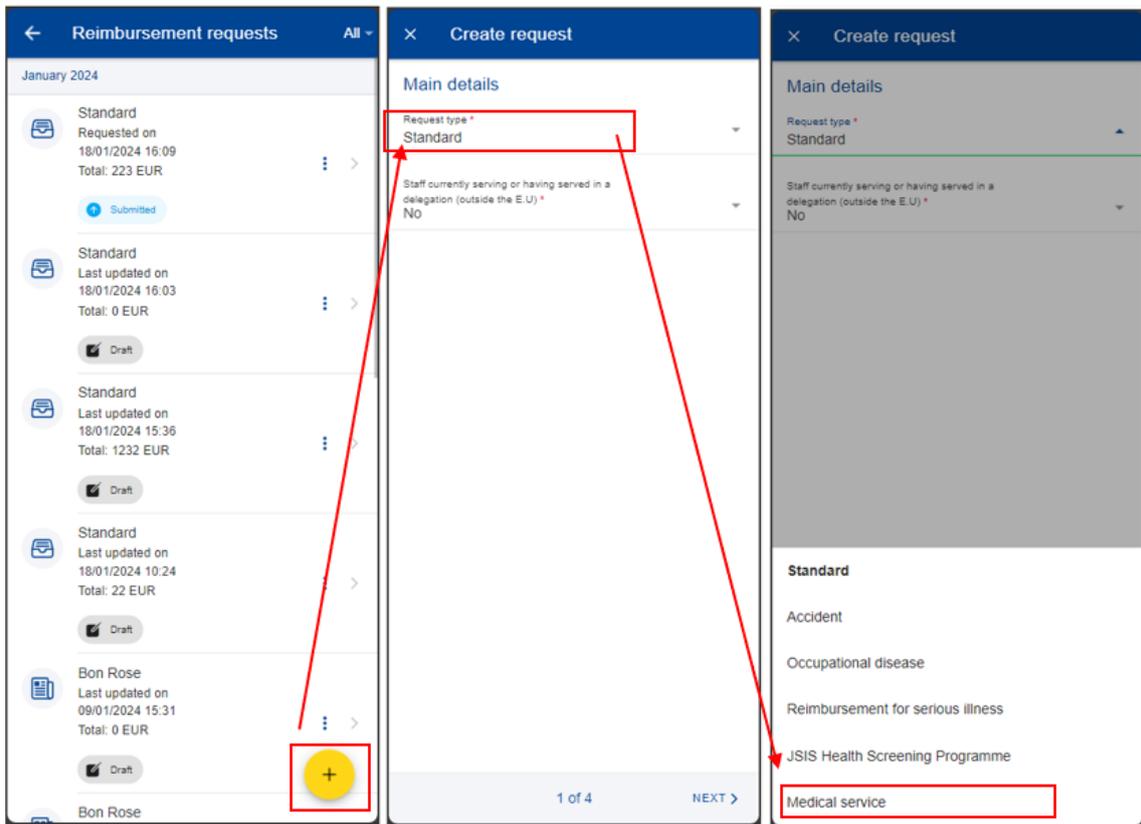


- 28) You can retrieve your request in the list of reimbursements. If the request is in Draft status, you can tap to edit it, if the request has been submitted you can view the information as shown in section 7.1 View reimbursement

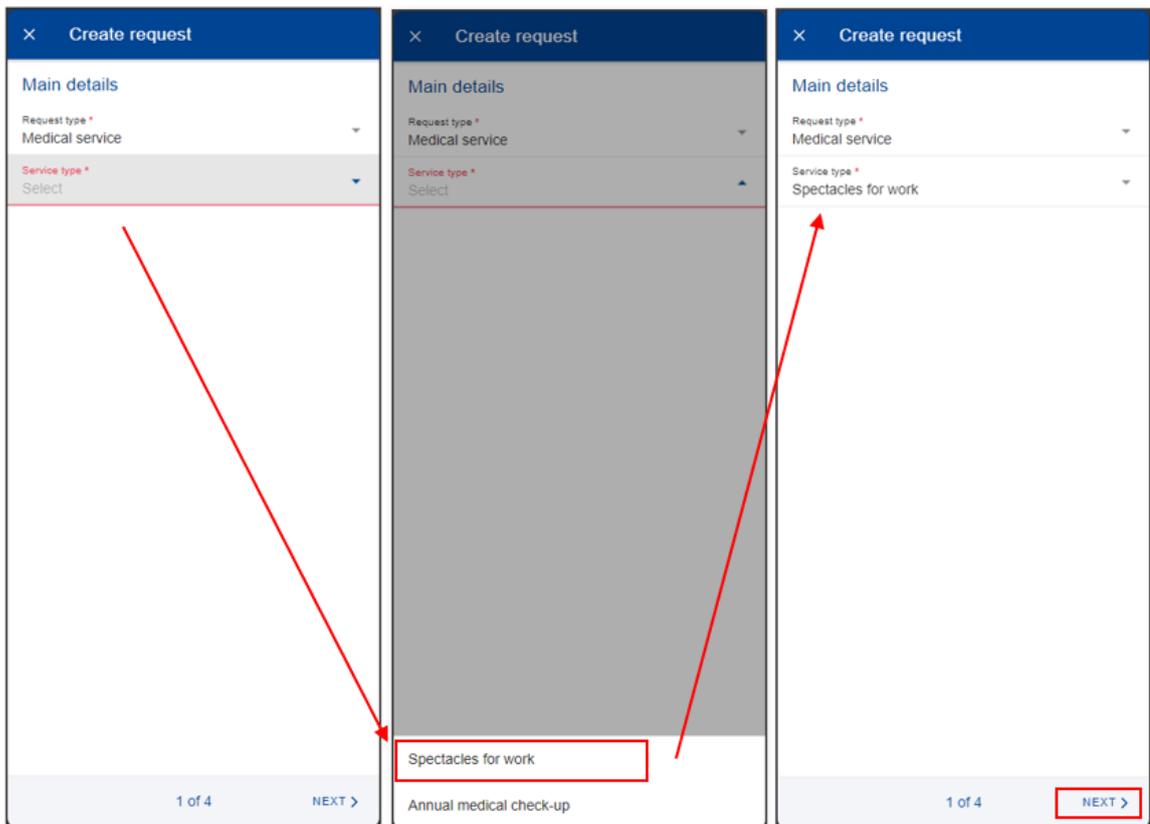
7.2.6. Create a medical service – spectacles for work reimbursement request

Medical service – spectacles for work reimbursement steps:

- 1) From the service list, select “Reimbursement requests”
- 2) Tap on the  icon to add a new reimbursement request. (below left)
- 3) Step1: Change the delegation information if needed. By default, the Delegation field is set to “No”.
- 4) Choose “Medical service” request type from list.

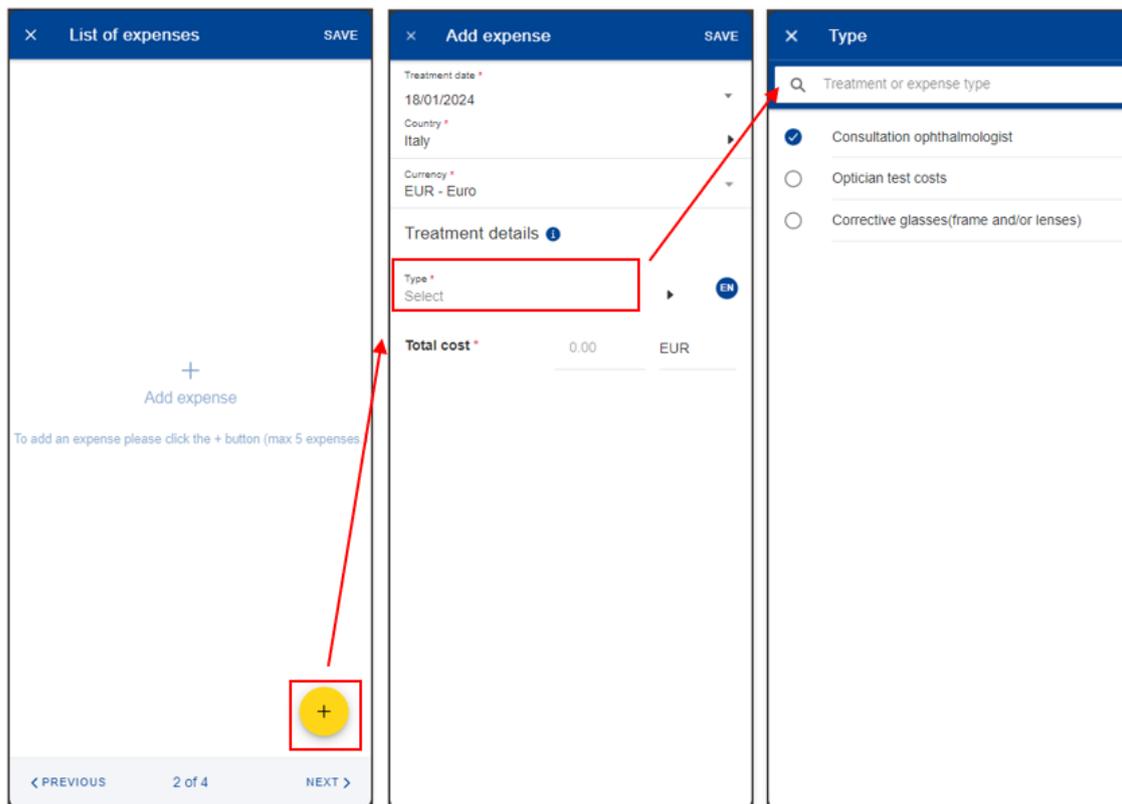


5) A new field will be displayed “Service Type”. Tap on it and select “Spectacles for work”. Tap “Next”.



6) System displays Step2 - List of expenses.

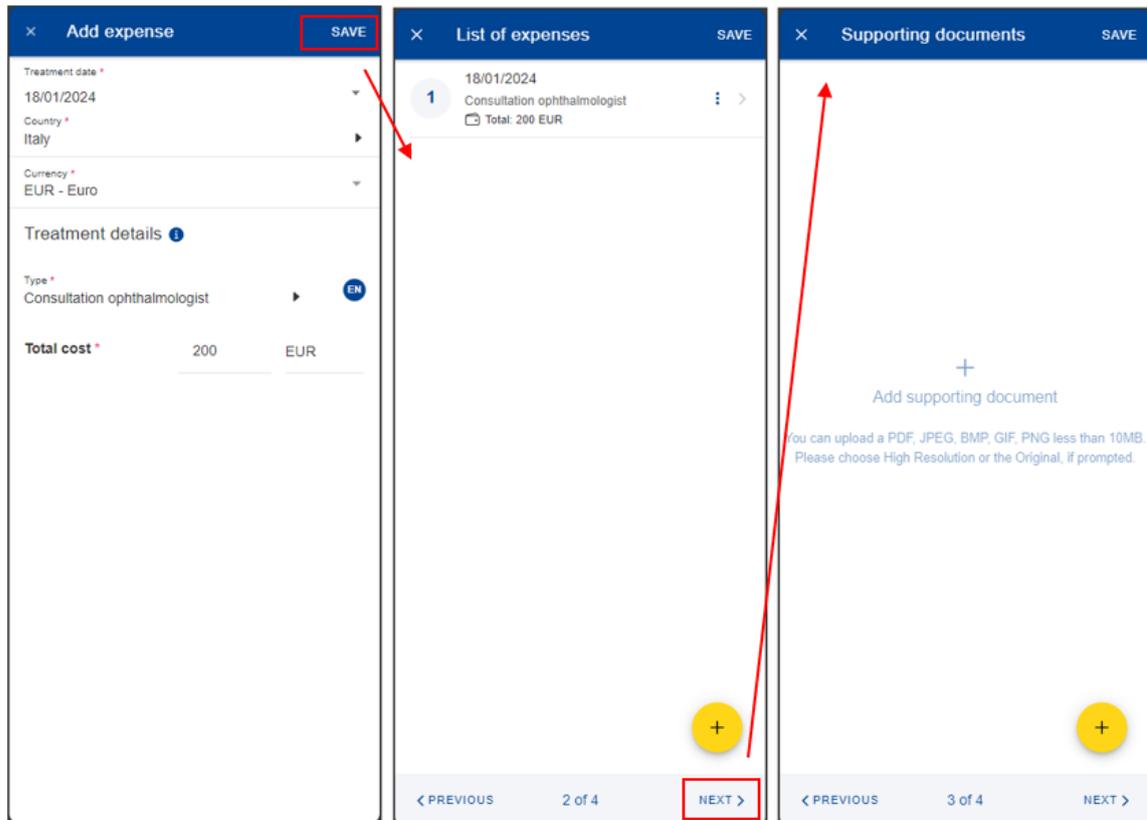
- 7) Tap on the  icon to add a new expense. You are allowed to add up to five expenses. (below left). The expense list is limited to spectacles related services/items.
- 8) Select the Treatment date.
- 9) Select the Expense/Treatment detail from the list. Start by typing the name of the treatment or select directly from the list. (below right)
Note: You can choose to change the language of the Treatment detail by tapping on the language icon, just above the Treatment list. That will switch your list from English to French and vice versa.



- 10) Select the Country.
- 11) Change the Currency, if needed. The default currency is the currency of the country from the previous step.
- 12) The system will save and add your expense to the list of expenses (below right)
- 13) You can choose to add a new expense in the list of expenses by tapping the  icon. (below left)
- 14) The system will save and add your new expense to the list of expenses (below middle)

15) You can still edit an expense by tapping on it or delete it by tapping on the three dots icon  next to the request and choosing Delete. Tap on Next to move to the next step. (below middle)

16) The system will move to Step 3 – Supporting documents (below right)

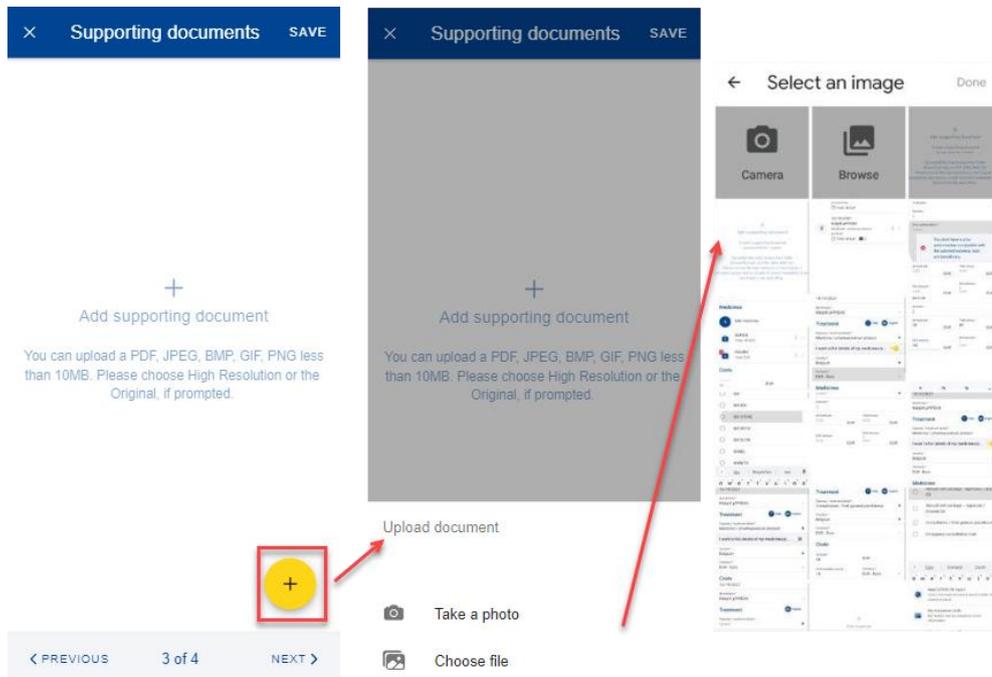


17) Step 3 – Supporting documents. Tap on the  icon to add a new supporting document. (below left)

Note: Please make sure to choose High resolution or the Original for your uploaded documents when promoted by your mobile, otherwise the documents may not be readable in the back office following the rendition to PDF.

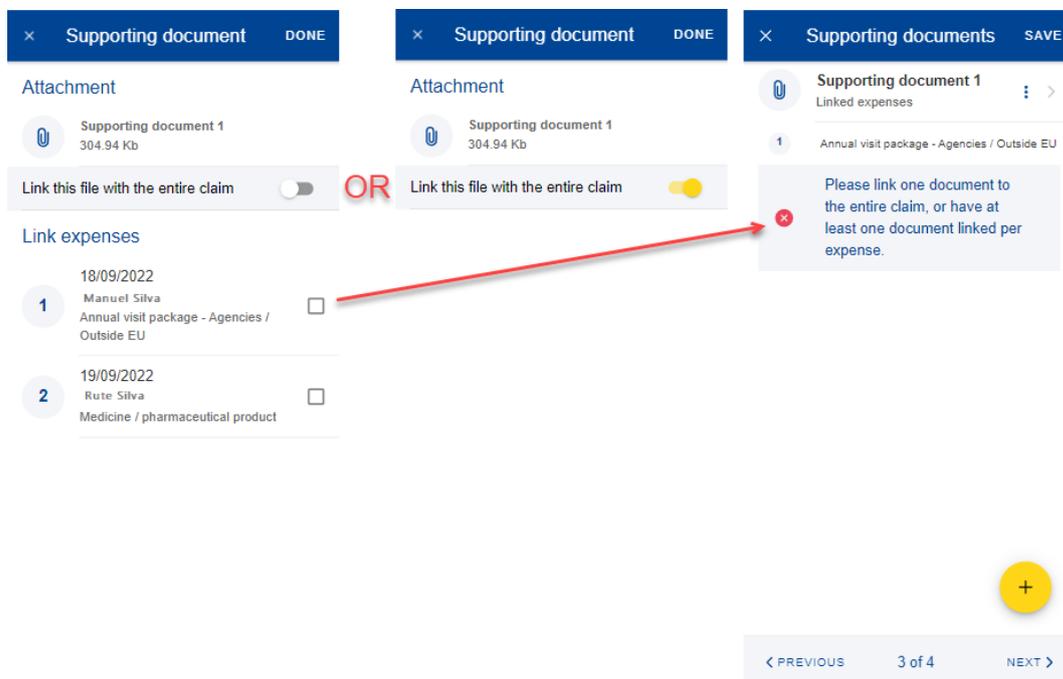
18) The system will prompt you to take a photo or choose a file from your mobile. (below middle)

19) Take a photo or select document from your documents list. (below right)



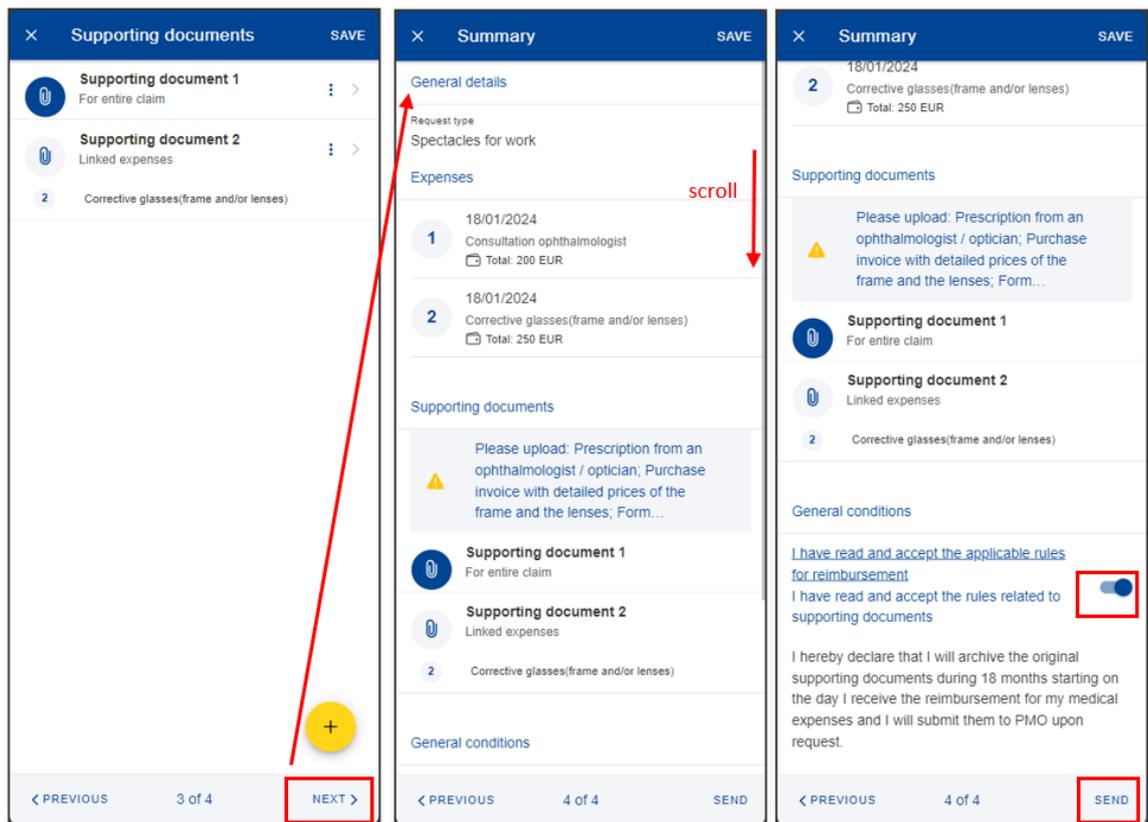
20) Once your document is uploaded, you need to link it to an expense (below left) or to the entire claim, if relevant (below middle). Tap Done to return to the list of supporting documents.

21) If you choose to link the document to an expense only, you will be prompted to make sure that all expenses have supporting proofs. (below right)



22) Repeat the process above and when you have finished adding your supporting documents and linking them to the expense, tap Next. (below right)

- 23) The system will move to Step 4 – Request summary. In this step you can view all your information in a summarized way: general information, expenses and supporting documents (below middle and right).
- 24) You can tap on the expenses or supporting documents to view all details but, if you need to edit any of the data, you need to go back to the previous steps.
- 25) When you're done checking your information, confirm that you have acknowledged the conditions of the JSIS and tap on "Send" to submit the request or on Save to keep it as Draft, if you have any doubts. (below right)



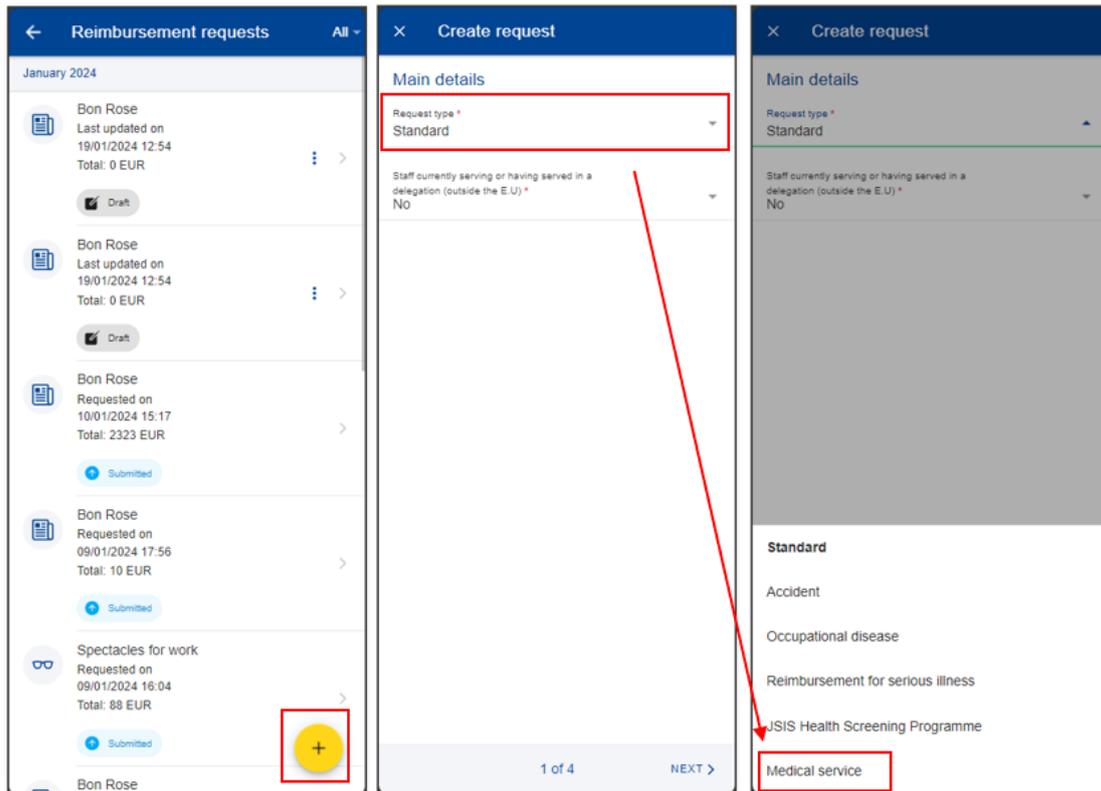
- 26) You can retrieve your request in the list of reimbursements. If the request is in Draft status, you can tap to edit it, if the request has been submitted you can view the information as shown in section 7.1 View reimbursement

7.2.7. Create a medical service – annual medical check-up reimbursement request

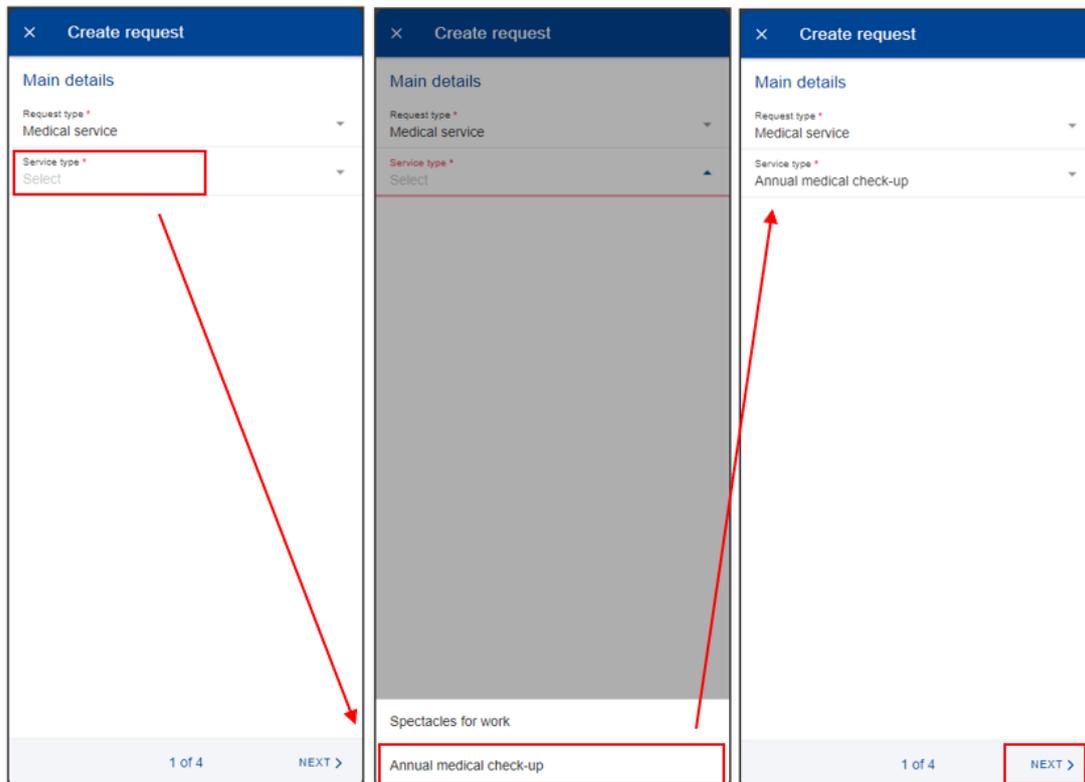
For a reimbursement for annual medical check-up request there is a pre-requisite to have a consultation registered in the annual service from JSIS. Request steps:

- 1) From the service list, select “Reimbursement requests”
- 2) Tap on the  icon to add a new reimbursement request. (below left)
- 3) Step1: Change the delegation information if needed. By default, the Delegation field is set to “No”.

4) Choose “Medical service” request type from list.



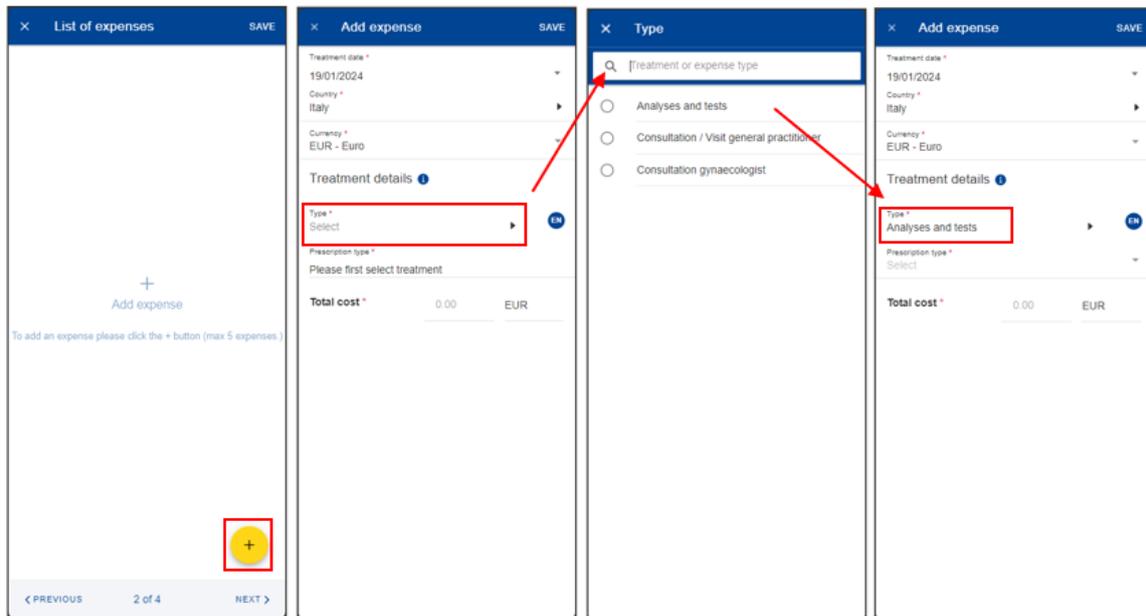
5) A new field will be displayed “Service Type”. Tap on it and select “Spectacles for work”. Tap “Next”.



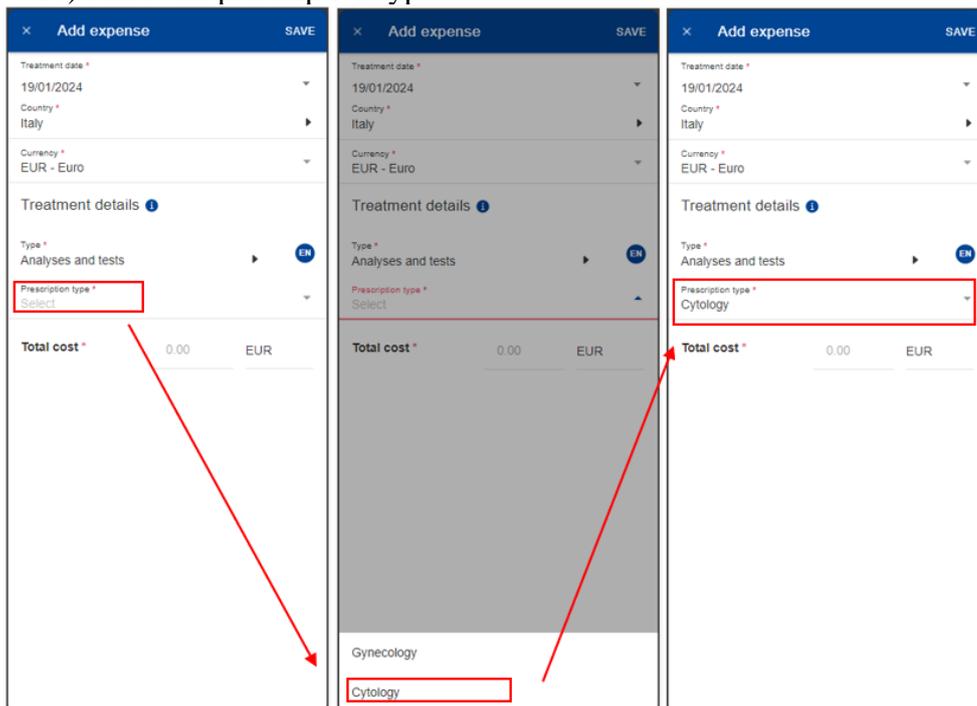
6) System displays Step2 - List of expenses.

- 7) Tap on the  icon to add a new expense. You are allowed to add up to five expenses. (below left)
- 8) Select the Treatment date. The list of beneficiaries will be filled in based on the selected date and the type of request. Only the beneficiaries covered by JSIS on that date will be displayed. (below middle)
- 9) Select the Expense/Treatment detail from the list. Start by typing the name of the treatment or select directly from the list. (below right)

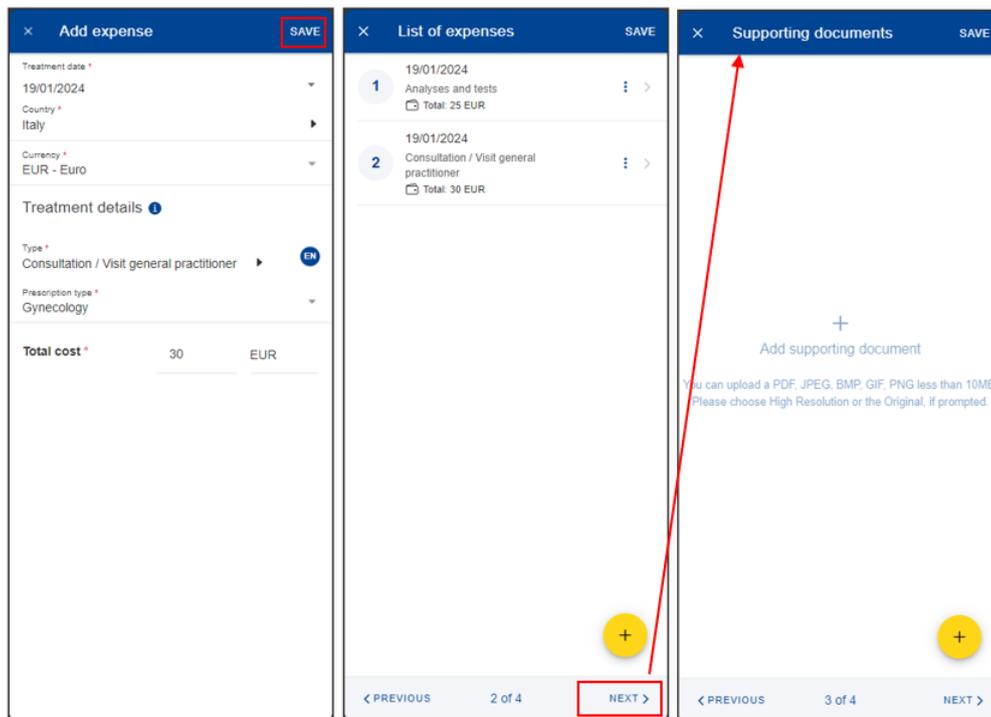
Note: You can choose to change the language of the Treatment detail by tapping on the language icon, just above the Treatment list. That will switch your list from English to French and vice versa.



10) Select the prescription type



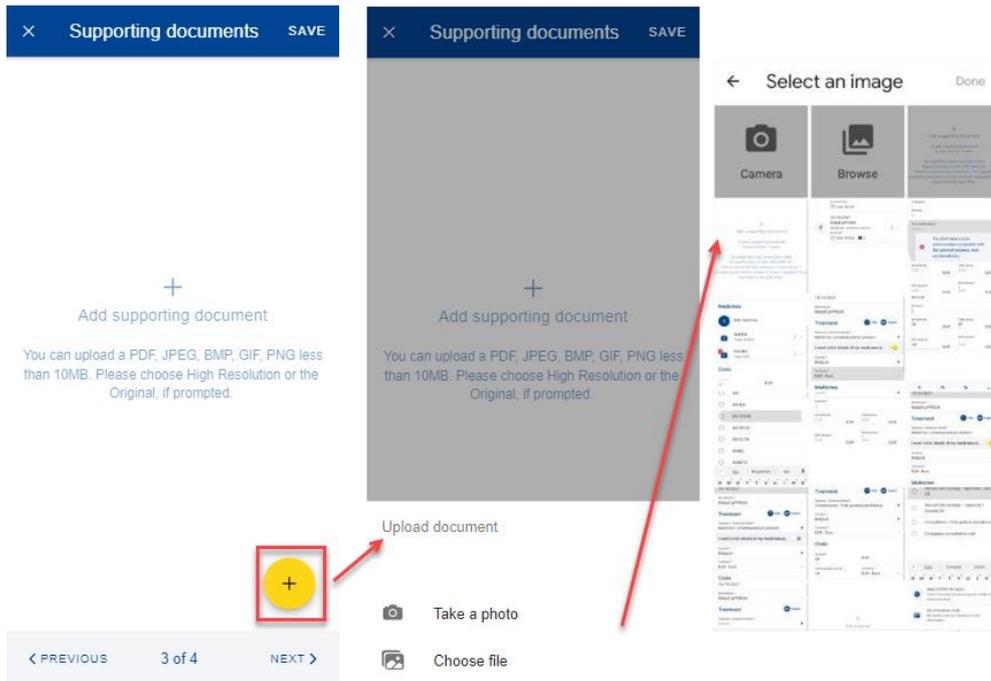
- 11) Select the Country
- 12) Change the Currency, if needed. The default currency is the currency of the country from the previous step.
- 13) You can choose to add a new expense in the list of expenses by tapping the  icon. (below left)
- 14) The system will save and add your new expense to the list of expenses (below middle)
- 15) You can still edit an expense by tapping on it or delete it by tapping on the three dots icon  next to the request and choosing Delete. Tap on Next to move to the next step. (below middle)
- 16) The system will move to Step 3 – Supporting documents (below right)



- 17) Step 3 – Supporting documents. Tap on the  icon to add a new supporting document. (below left)

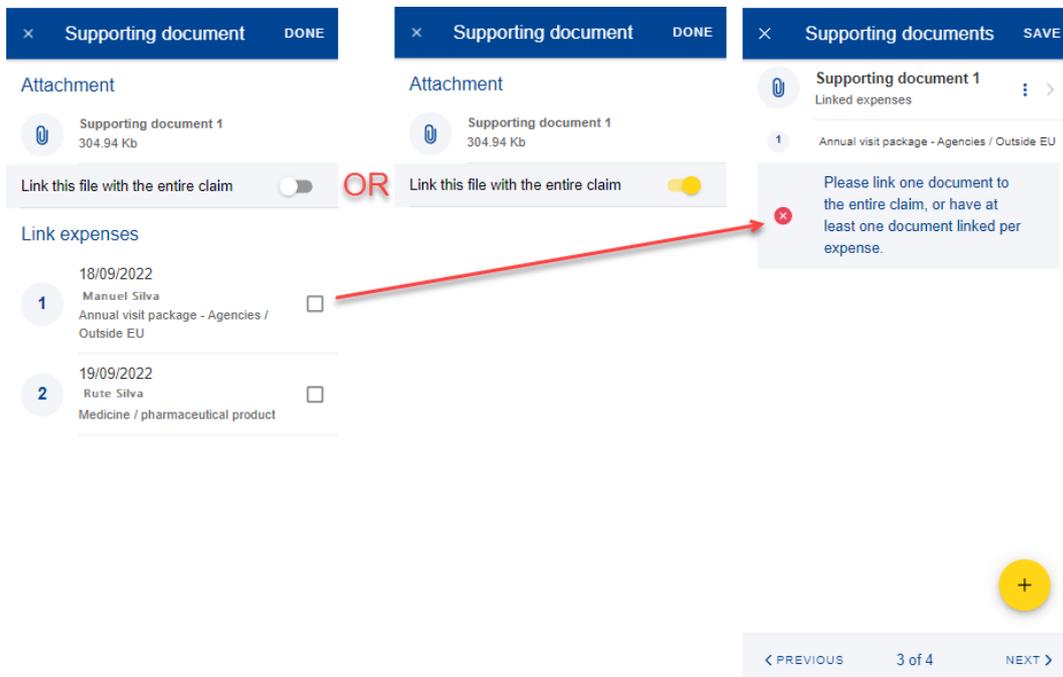
Note: Please make sure to choose High resolution or the Original for your uploaded documents when promoted by your mobile, otherwise the documents may not be readable in the back office following the rendition to PDF.

- 18) The system will prompt you to take a photo or choose a file from your mobile. (below middle)
- 19) Take a photo or select document from your documents list. (below right)



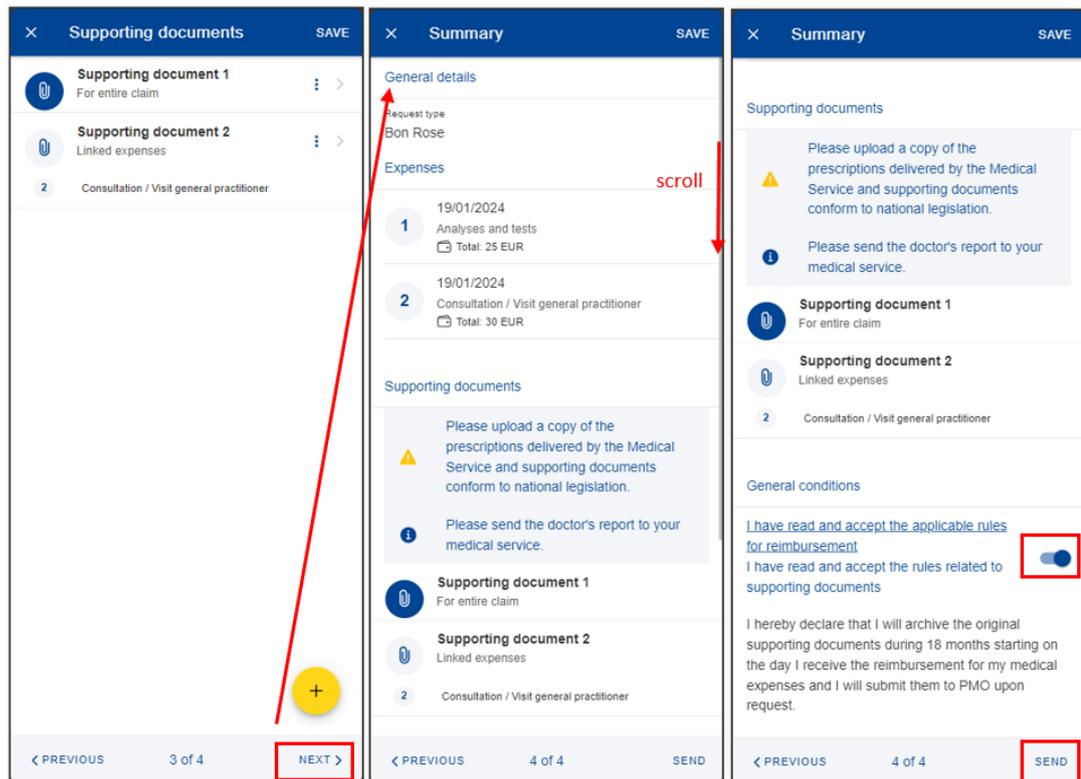
20) Once your document is uploaded, you need to link it to an expense (below left) or to the entire claim, if relevant (below middle). Tap Done to return to the list of supporting documents.

21) If you choose to link the document to an expense only, you will be prompted to make sure that all expenses have supporting proofs. (below right)



22) Repeat the process above and when you have finished adding your supporting documents and linking them to the expense, tap Next. (below right)

- 23) The system will move to Step 4 – Request summary. In this step you can view all your information in a summarized way: general information, expenses and supporting documents (below middle and right).
- 24) You can tap on the expenses or supporting documents to view all details but, if you need to edit any of the data, you need to go back to the previous steps.
- 25) When you're done checking your information, confirm that you have acknowledged the conditions of the JSIS and tap on "Send" to submit the request or on Save to keep it as Draft, if you have any doubts. (below right)

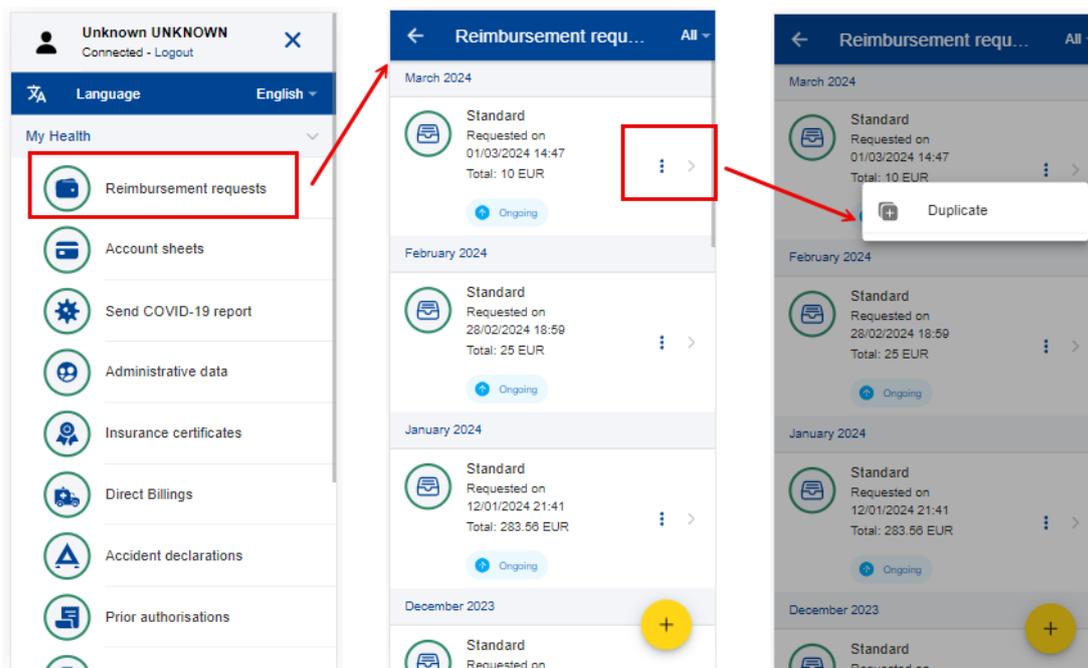


- 26) You can retrieve your request in the list of reimbursements. If the request is in Draft status, you can tap to edit it, if the request has been submitted you can view the information as shown in section 7.1 View reimbursement

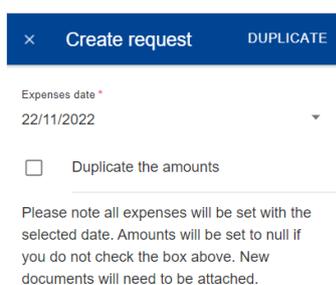
7.3. Duplicate Reimbursement request

You can duplicate an existent reimbursement to avoid encoding everything again.

1. From the service list, select "Reimbursement requests".
2. Tap on the three dots icon
3. Select "Duplicate"



4. A pop-up to create a request opens



5. Select the expenses date (this new date is used to all copied expenses)
6. Choose if it's to duplicate the amounts as well, or not
7. Tap duplicate to save the action (all information is copied from the original reimbursement)
8. The reimbursement is saved in "draft" and it opens in edit mode.

7.4. Adding additional required information in a Reimbursement request

There are two ways of adding additional information in a previously submitted Reimbursement request:

- a. From the notification that requires you to add further information, you tap on "Details" (upper right side). This redirects you to the Reimbursement request item where you can add the information immediately.

- b. In the Reimbursement requests list, you can view the items with the “Waiting for additional information” status. If you did not provide the information yet, tap on the item and add the additional info required.

Steps:

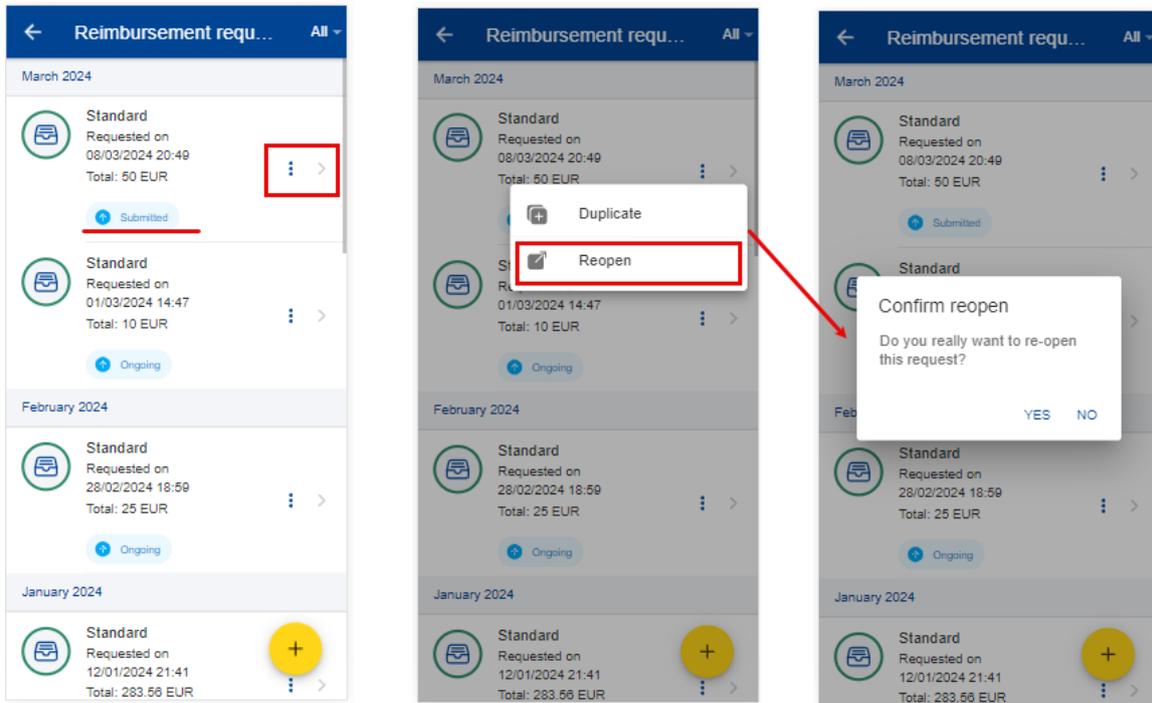
- 1) Within to the specific Reimbursement request item you can add the required supplementary information (below left and middle screen):
 - a. Tap on “Add Info”
 - b. Fill in the “General comment” text field
 - c. Attach additional documents, if needed
 - d. Tap “Send”
- 2) The additional information will be appended to the existing item (below right) and will appear as “Submitted”.
- 3) You are not able to add more information after you’ve submitted, unless you request the JSIS back office or they send an additional request for information.

7.5. Reopen reimbursement requests

A submitted reimbursement request can be reopened for corrections of omissions and/or inaccuracies only on the same day as it was submitted, before 11:59:59 PM (midnight) Brussels time.

To reopen a submitted request, tap the three dots icon  and select “Reopen”.

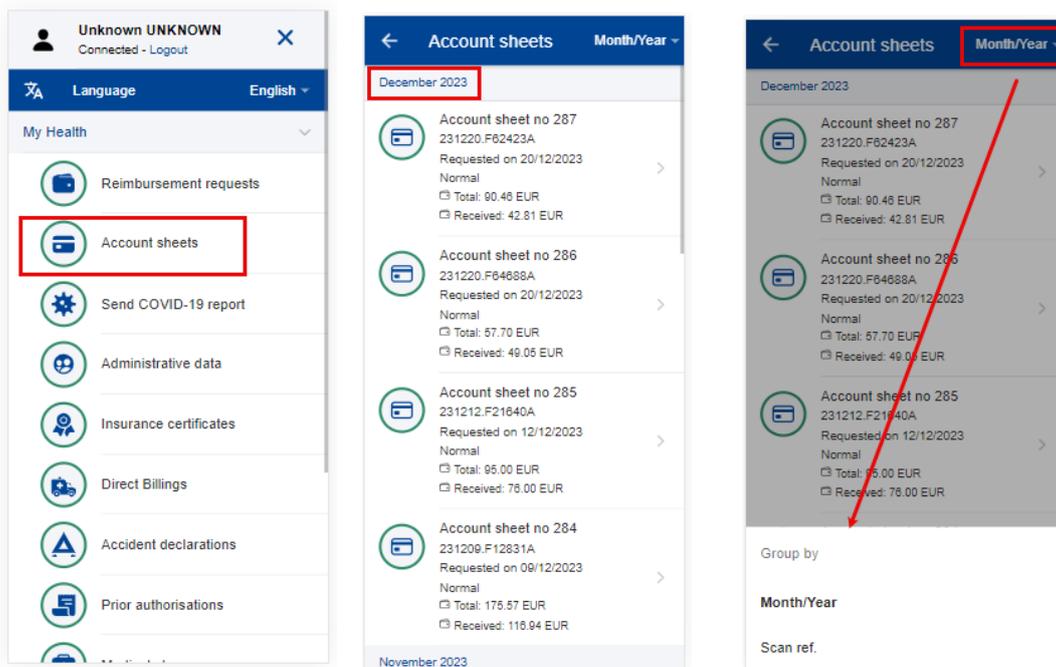
A confirmation message will appear, if you accept it this will revert the request to “Draft” status. You can modify the request without having to start over: the information and documents you have already entered remain in place.



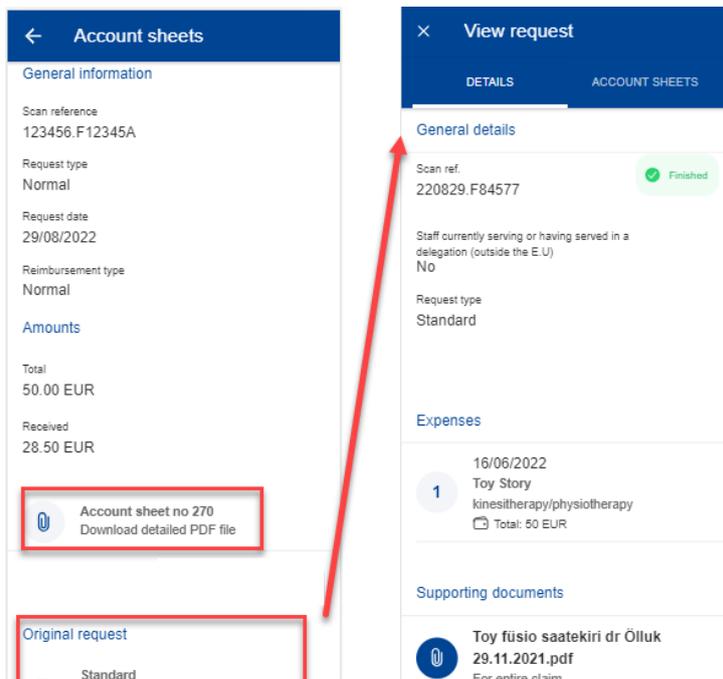
7.6. View account sheets

Once your request for reimbursement has been approved and processed in the back office, one or more account sheets are generated with the amounts that were reimbursed per your request of reimbursement.

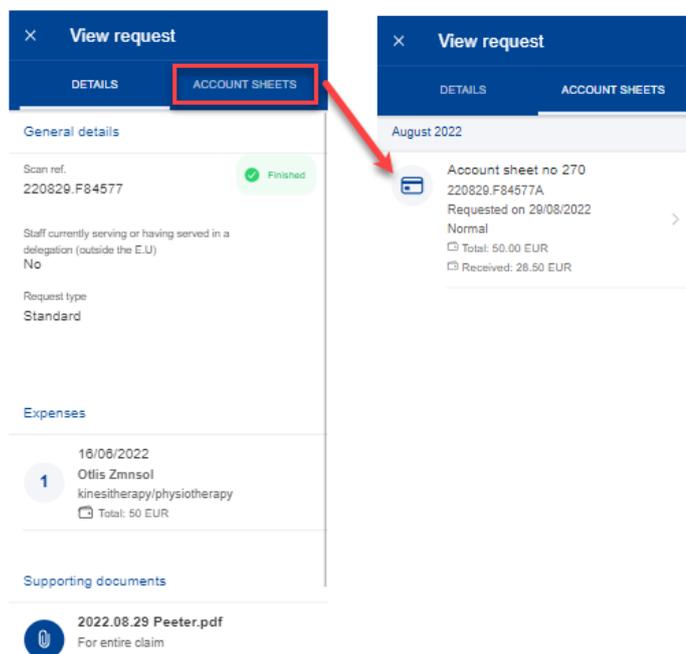
- 1) From the service list, select “Account sheets” to view your account sheets (below left).
- 2) The system displays the list of account sheets showing the request type, date and the total amount. The most recent account sheets are displayed on top of the list.
- 3) You can scroll down to view the account sheets grouped per month (below middle)
- 4) Alternatively, you can see your account sheets grouped by scan reference if you change the grouping option (middle screen up right) from Month/Year to Scan reference.
- 5) The system displays the list of account sheets grouped by Scan reference (below right)



- 6) You can tap on an account sheet in order to see the details of the account sheet (below left).
- 7) In the Account sheet view you can download the Detailed Account sheet PDF file to see all the details of your reimbursement per each line of expense (below left, above General Information)
- 8) You can additionally view your original reimbursement request by tapping on the original request (below left).
- 9) The system will open the original request with all the details in view mode. (below middle)
- 10) When opening reimbursement request details using link from associated account sheet you cannot see account sheet linked to this reimbursement request. This is to avoid infinite loop of links between reimbursement request and account sheet.



- 11) When opening original reimbursement request using “Reimbursement Request“ menu the details page will have “Account sheets” tab. You can navigate to the account sheet details page by tapping an Account sheet from the list.



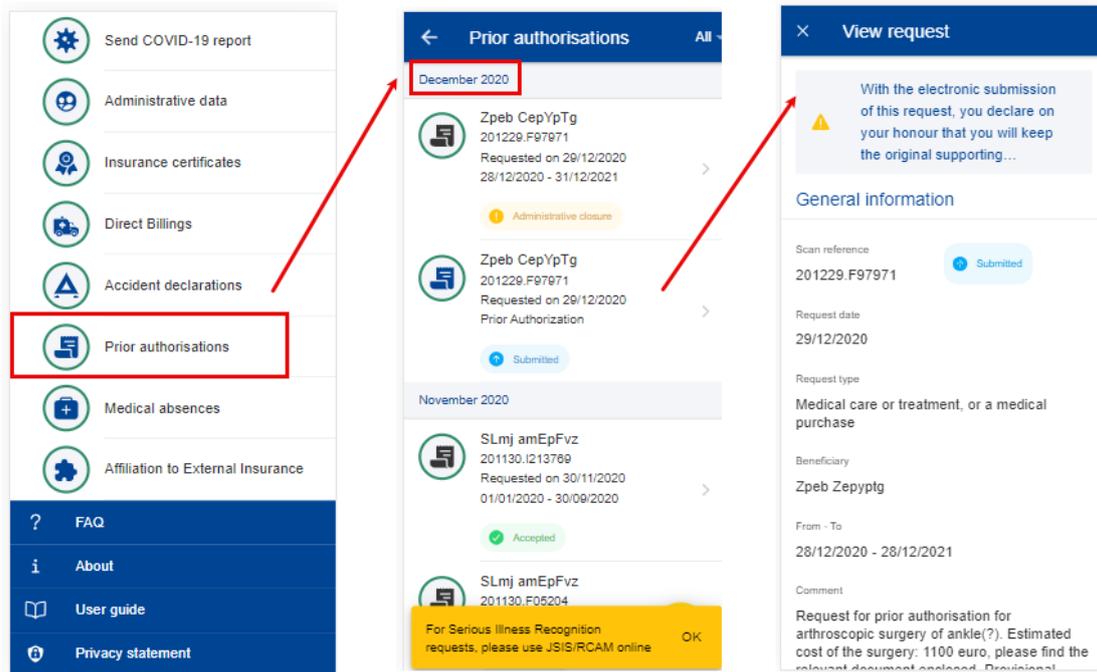
8. PRIOR AUTHORISATIONS (JSIS)

This service allows you to create and view the history of your prior medical authorisations.

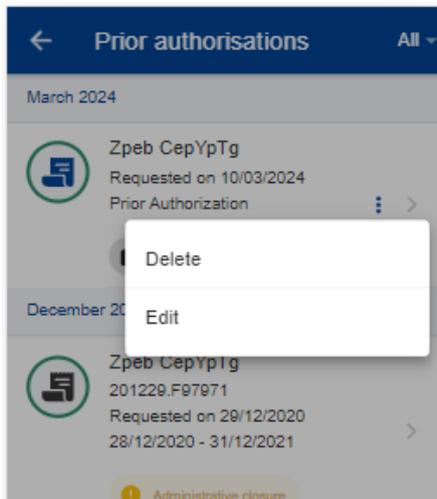
Please keep the original documents and do not introduce the same request for prior authorisation on paper.

8.1. View Medical Authorizations

- 1) From the service list, select “Prior Authorisations” to view all your medical authorisations requests created so far (below left).

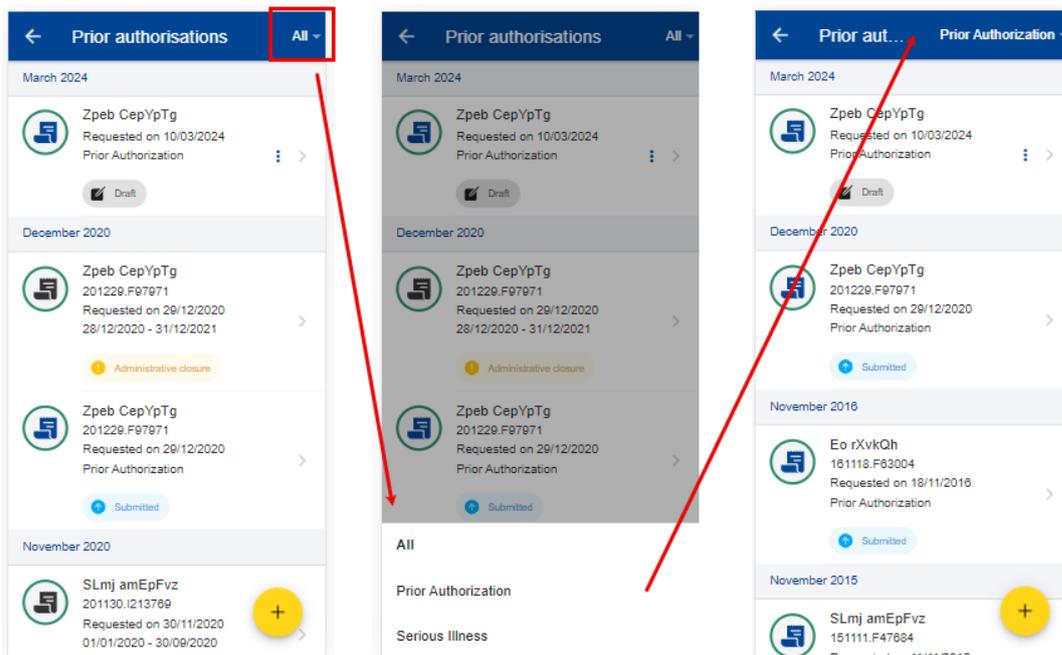


- 2) The system displays the list of requests showing the beneficiary, the date of the request, the type of request, and the request's status. The most recent prior authorisations requests are displayed on top of the list. You can scroll down to view the prior authorisations requests grouped under each month.
- 3) You can choose to edit or delete a request in Draft status by tapping on the three dots icon  next to the request.



- 4) Tap on an existing prior authorisation request to view the request information. If the request has been submitted, you can see the Scan reference code. You cannot modify such a request.
- 5) If your request is in Draft status you can continue to modify it as described in the next section.

The list can be filtered, by the different types of prior authorisations (Dental Cost Estimate and Prior Authorization), from the top right button as displayed below:



8.2. Create Prior Authorisation Request

There are two main prior authorisations requests that can be created in MyPMO:

1. Medical care or treatment, or a medical purchase

2. Dental treatment.

The flow for creating a request is detailed below for each authorisation.

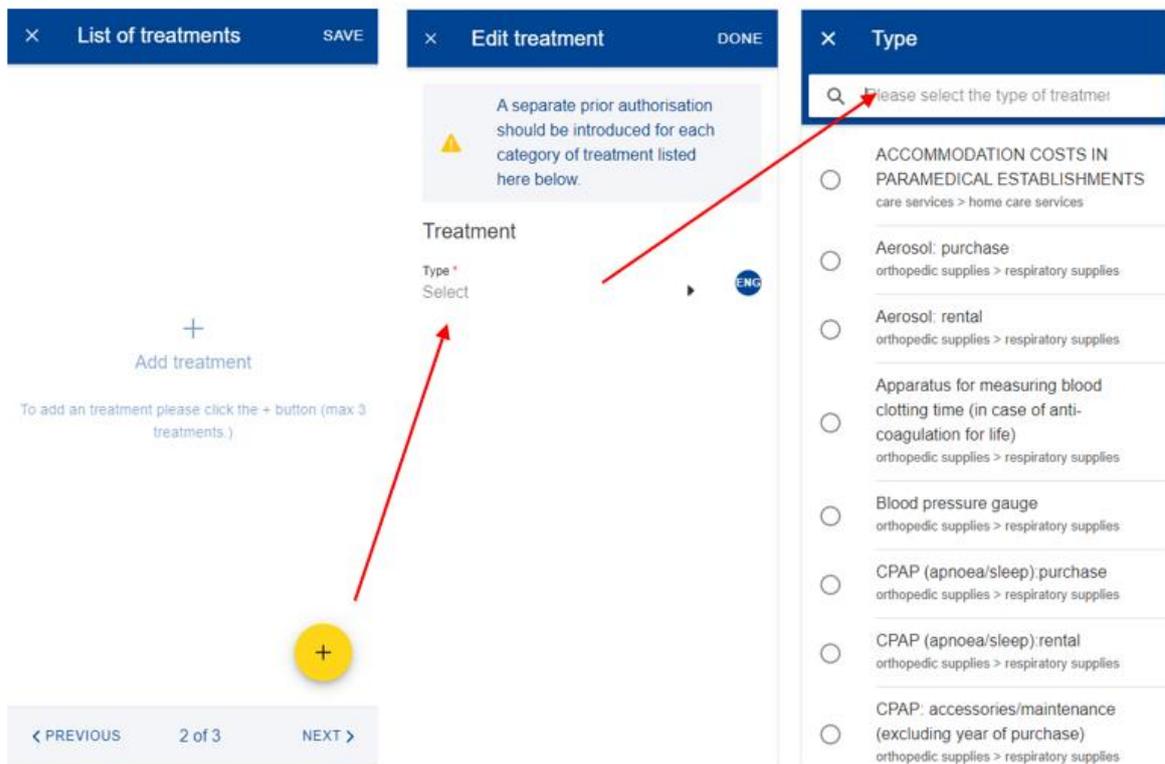
8.2.1. *Create Request for Medical care*

JSIS members can create a new Prior Authorisation Request for Medical care or treatment, or a medical purchase as follows:

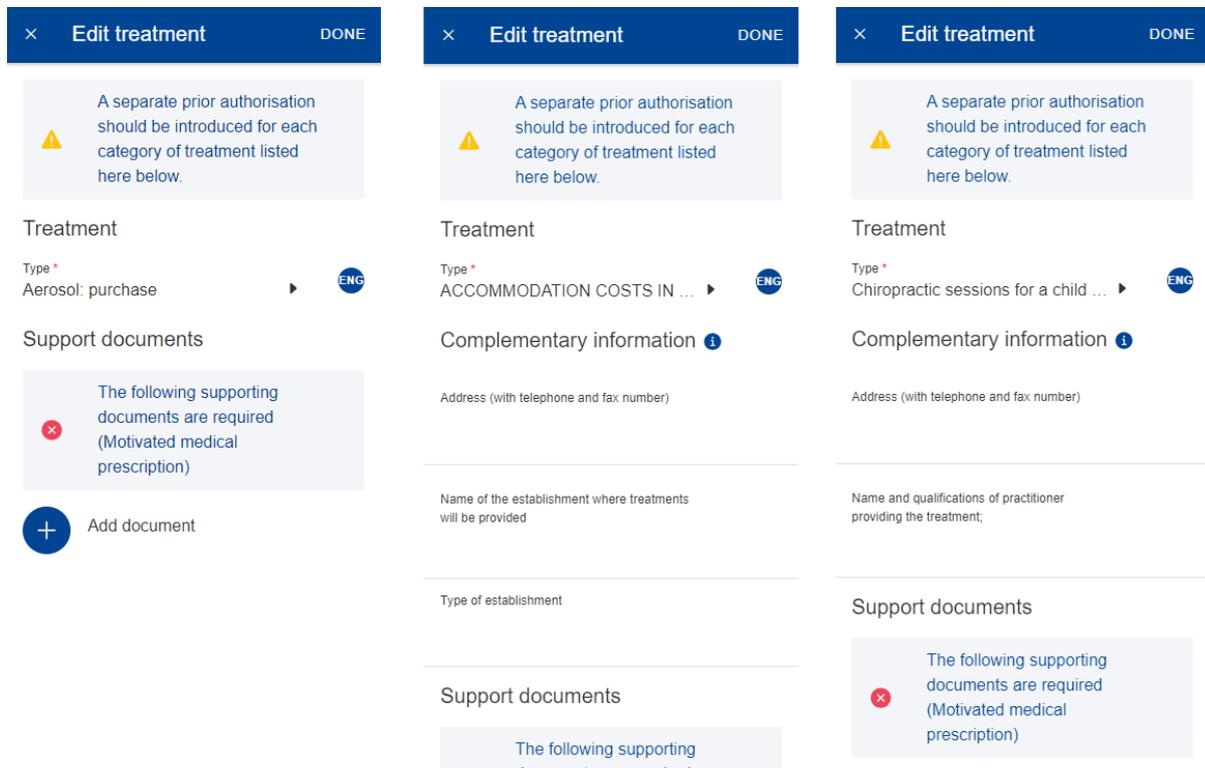
1. From the service list, select “Prior Authorisations”.
2. Tap on the  icon.
3. Select the Beneficiary from the list.
4. Select the Start Date.
5. Select the request type: Medical care or treatment, or a medical purchase
 - If the context type is Standard, then tap “Next”
 - If the context type is Accident, Occupational disease, Serious Illness or Health Screening, then you are requested to additional information before tapping “Next”

Note: You will have read-only fields with additional information:

- Request date – automatically set to current date. It cannot be changed.
 - For Health Screening context, a valid convocation needs to be selected. If there are no valid convocations, you can create one using Health Screening Requests menu.
6. System displays Step 2 – List of treatments.
 7. Tap on the  icon to add a new treatment. You are allowed to add up to three treatments.
 8. Select the treatment type from the list. Start by typing the name of the treatment or select directly from the list.



9. Depending on your selection, additional fields may appear in the treatment form, such as: address, name and qualifications of the practitioner etc. Examples are shown below:

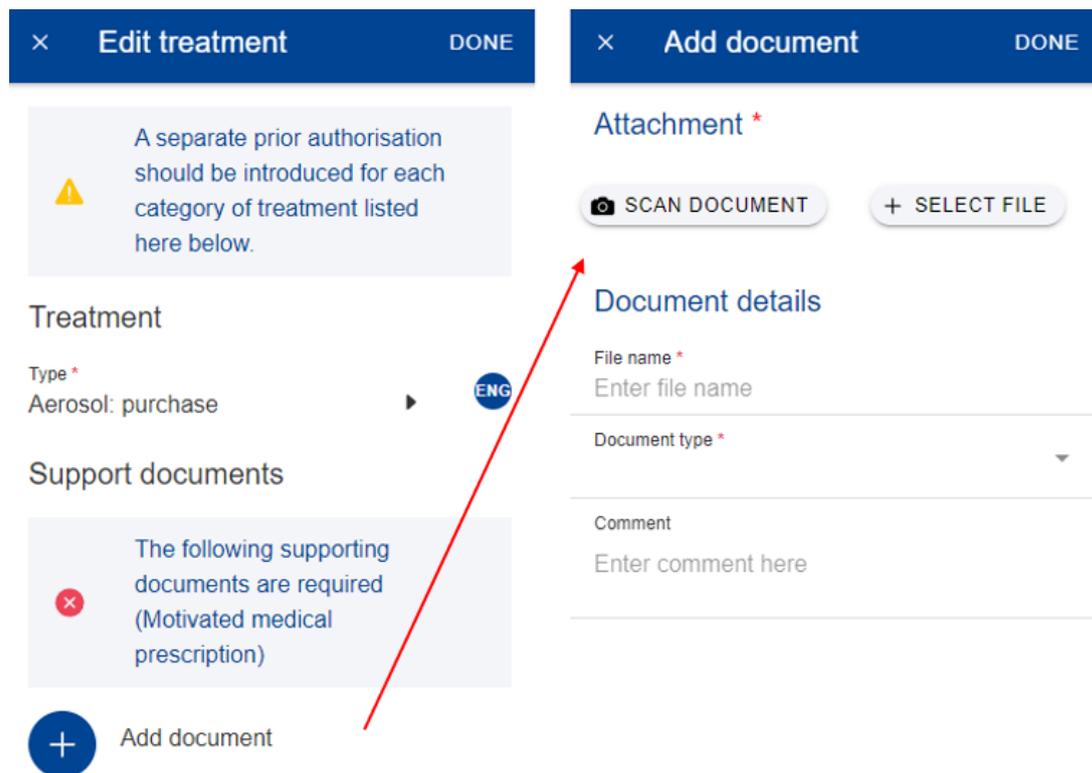


10. Following the treatment selection, the support documents will need to be added.

11. Tap on the  icon to add a new supporting document. The following types of supported documents are available: Motivated medical prescription (mandatory) and Detailed medical report (optional). A single file per type is allowed.

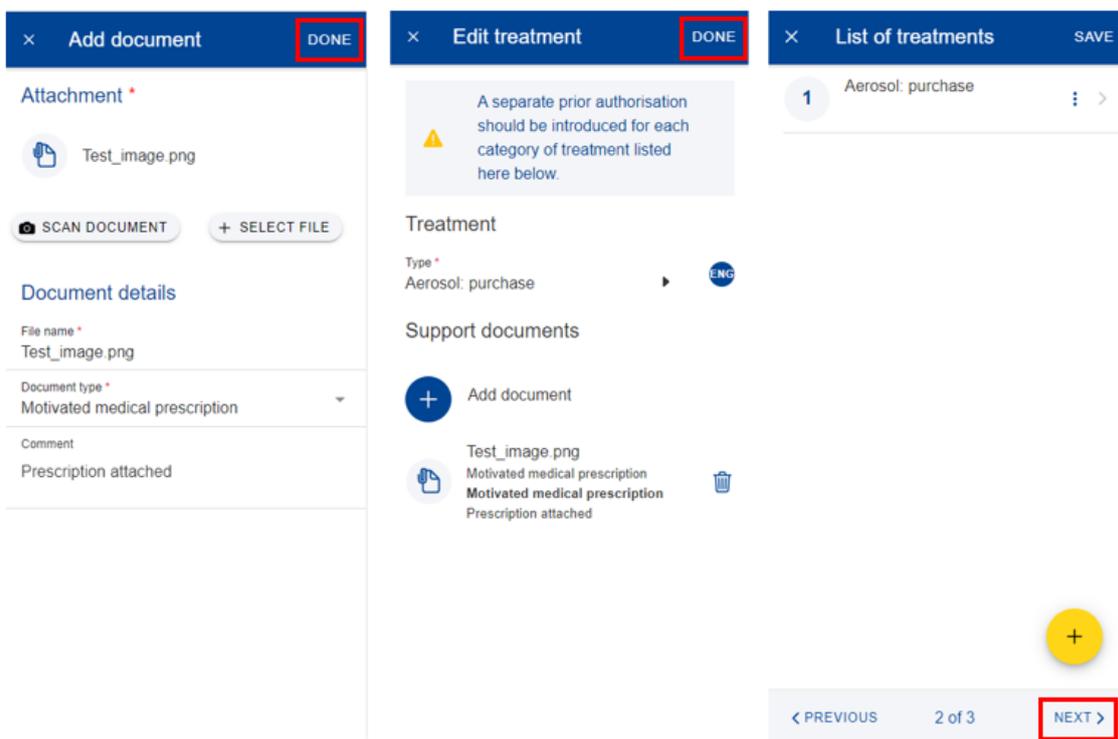
Note: Please make sure to choose High resolution or the Original for your uploaded documents when promoted by your mobile, otherwise the documents may not be readable in the back office following the rendition to PDF.

12. The system will prompt you to take a photo or choose a file from your mobile.

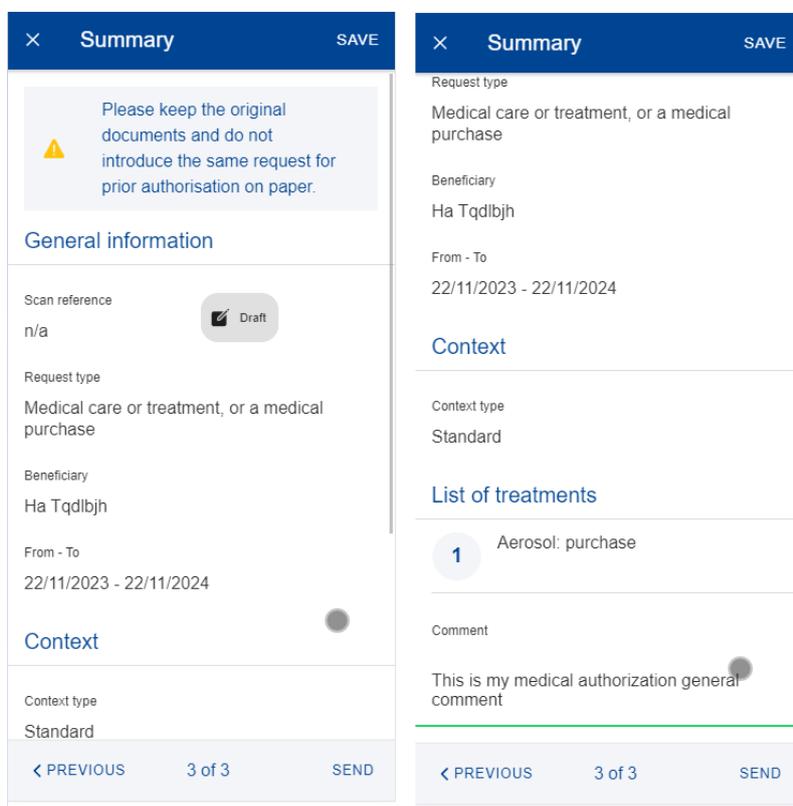


13. Take a photo or select document from your documents list.
14. If the document is scanned, you'll need to add the File name, otherwise if it's selected from the device it is automatically proposed (it will include the document type e.g. .pdf, .jpeg)
15. Tap Done to save and return to the treatment. Repeat the process above to add a second type of document (if needed) and when you have finished addition your support documents, tap Done.
16. The system will return to the list of treatments where you can either add an additional treatment (maximum three treatments) and tap Next. **Note:** an

exclamation mark **!** is displayed in case that there are missing information/documents on the treatment details.



17. The system will move to Step 3 – Summary. In this step you can view all your information in a summarized way: general information, Context, List of treatments and you can add a comment.



18. You can tap on the treatments to view all details but, if you need to edit any of the data, you need to go back to the previous steps.
19. You can retrieve your request in the list of reimbursements. If the request is in Draft status, you can tap to edit it, if the request has been submitted you can view the information as shown in section 8.1 View Medical Authorizations
20. When you're done checking your information, tap on "Send" to submit the request or on Save to keep it as Draft, if you have any doubts.

8.2.2. *Create Request for Dental care*

JSIS members can create a new Prior Authorisation Request for Dental care as follows:

1. From the service list, select "Prior Authorisations".
2. Tap on the  icon.
3. Select the Beneficiary from the list.
4. Select the Start Date.
5. Select the request type: Dental care
 - Dental care: for the dental care, you have to select the dental treatment type, then select the country where the treatment was performed, and tap "Next".

Note: The user will have read-only fields that will present additional information:

- (for Dental care/ all types) Currency – automatically set depending on selected country. It cannot be changed.
- (for Dental care/Orthodontic dental treatment type) – Context – automatically set to Standard.

Note: Choose type "Standard" for the following types of dental treatments:

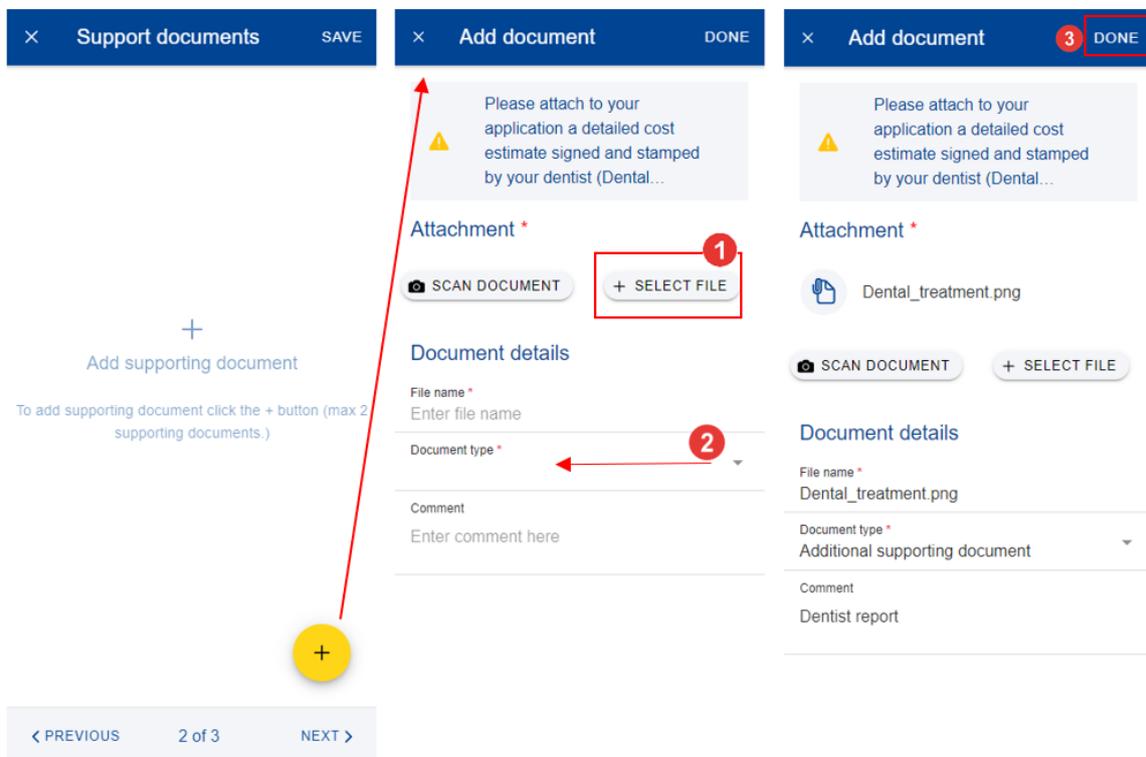
- Periodontal treatment;
- Dental occlusion;
- Dental prostheses;
- Implantology;

Preventive care and conservative treatment do not require the submission of a dental costs estimate.

The costs of treatment for purely aesthetic purposes such as tooth whitening, systematic replacement of silver amalgam fillings, veneers on intact incisors, tooth jewellery, etc are not reimbursed.

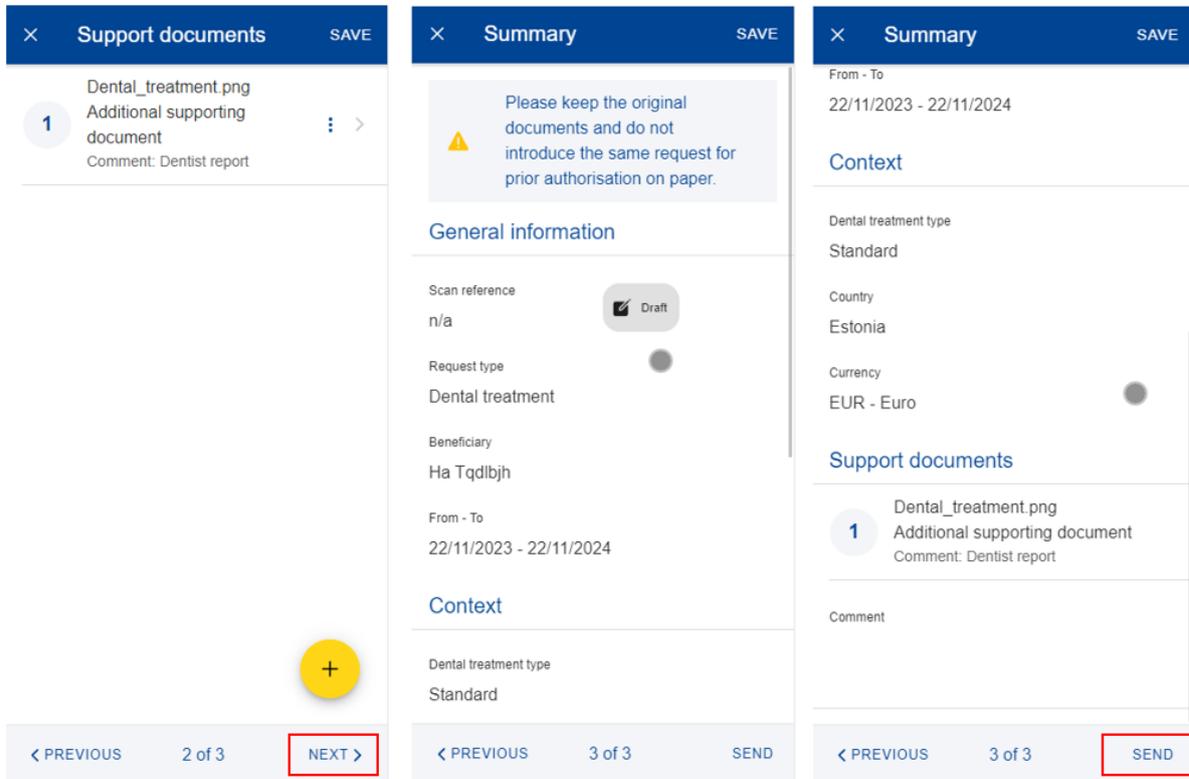
6. System displays Step 2 – Support documents

7. Tap on the  icon to add a new support document. The following types of supported documents are available: Dental Treatment and Additional supporting document. You are allowed to add up to two Dental treatments and two Additional support documents. At least one document is needed to proceed to the next step.
8. The system will prompt you to take a photo or choose a file from your mobile.
9. Take a photo or select document from your documents list.
10. If the document is scanned, you'll need to add the File name, otherwise if it's selected from the device, it is automatically proposed (it will include the document type e.g. .pdf, .jpeg)
11. Tap Done to save and return to the Support documents. Repeat the process above to add a second type of document (if needed) and when you have finished addition your support documents, tap Next.



12. The system will move to Step 3 – Summary. In this step you can view all your information in a summarized way: general information, Context, Support documents and you can add a comment.

13. You can tap on the treatments to view all details but, if you need to edit any of the data, you need to go back to the previous steps.
14. You can retrieve your request in the list of reimbursements. If the request is in Draft status, you can tap to edit it, if the request has been submitted you can view the information as shown in section 8.1 View Medical Authorizations
15. When you're done checking your information, tap on "Send" to submit the request or on Save to keep it as Draft, if you have any doubts.



8.3. Adding additional required information in a Prior Authorization request

There are two ways of adding additional information in a previously submitted Prior authorization request:

- a. From the notification that requires you to add further information, you tap on "Details" (upper right side). This redirects you to the Prior authorization request item where you can add the information immediately.
- b. In the Prior authorization requests list, you can view the items with the "Waiting for additional information" status. If you did not provide the information yet, tap on the item and add the additional info required.

Steps:

- 1) Within to the specific Prior authorization request item you can add the required supplementary information (below left and middle screen):
 - a. Tap on "Add Info"
 - b. Fill in the "General comment" text field

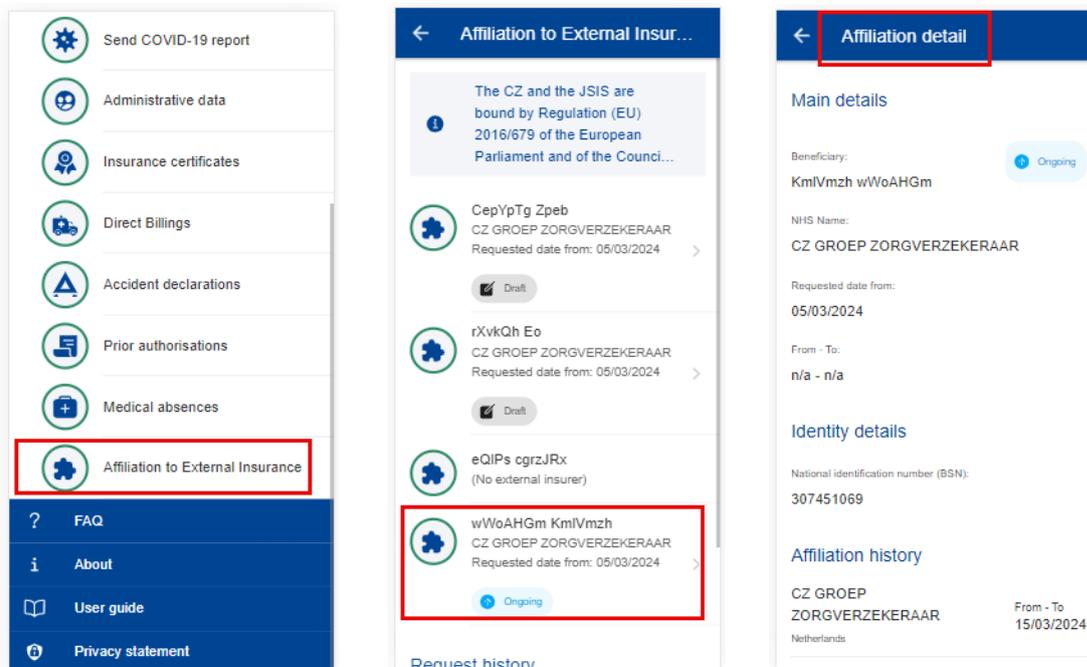
- c. Attach additional documents, if needed
 - d. Tap “Send”
- 2) The additional information will be appended to the existing item (below right) and will appear as “Submitted”.
 - 3) You are not able to add more information after you’ve submitted, unless you request the JSIS back office or they send an additional request for information.

9. AFFILIATIONS TO EXTERNAL INSURANCE (JSIS)

This service allows you to manage the affiliation requests both for you and your family.

9.1. View affiliation request

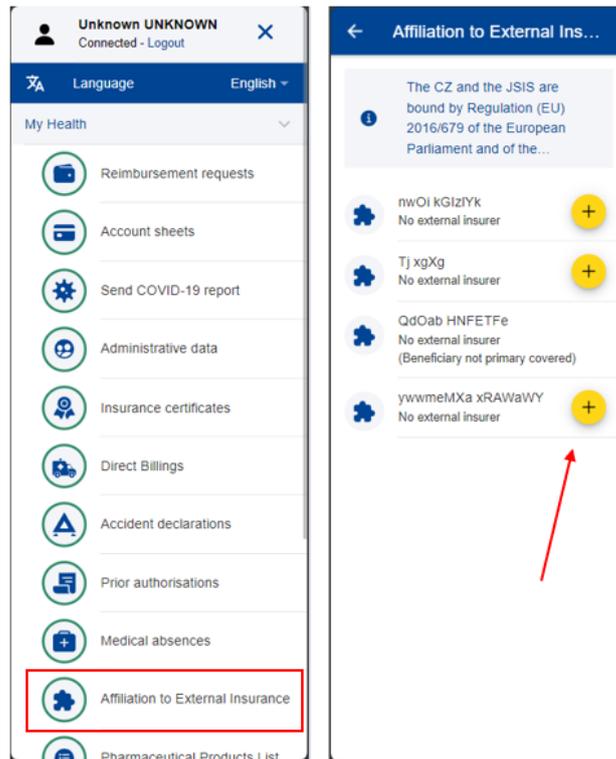
- 1) From the service list, select “Affiliation to External Insurance” to view all your affiliation requests created so far.
- 2) The system displays the list of requests showing the beneficiary, the insurer, the date of the request, and the request’s status. The most recent affiliation requests are displayed on top of the list. You can scroll down to view the affiliation requests history.
- 3) Tap on an existing affiliation request to view the request information. You cannot modify such a request.



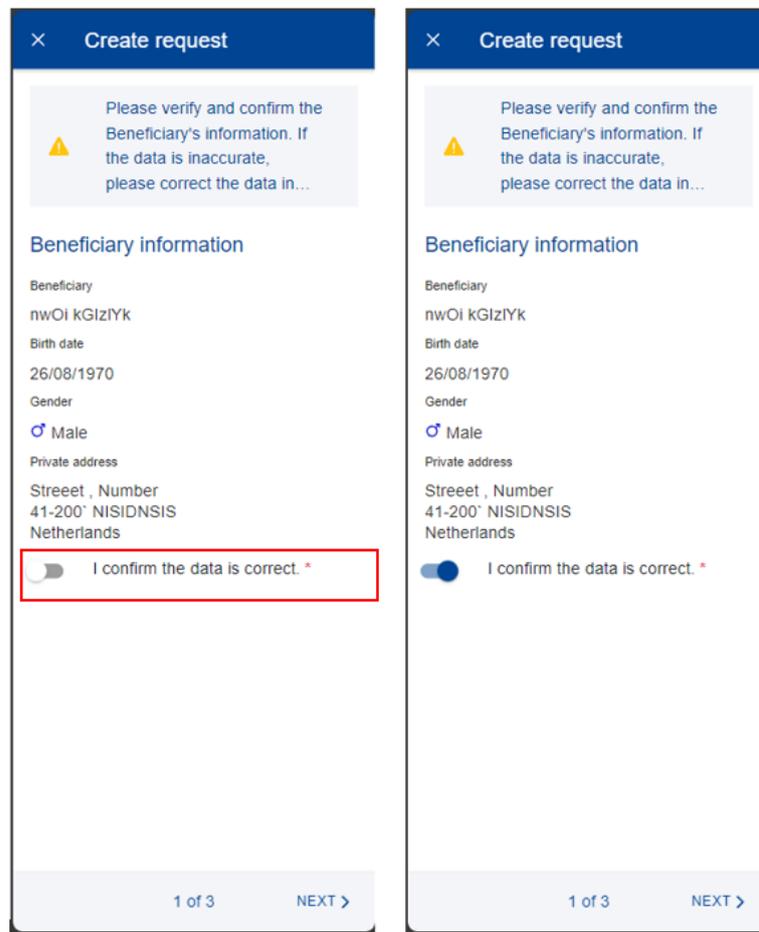
9.2. Create an affiliation

- 1) From the service list, select “Affiliation to External Insurance” to view all your affiliation requests created so far.
- 2) From the Beneficiary list, tap on the Add button  to create an affiliation for that beneficiary

Note: if a Beneficiary is not primarily covered, then the Add button will not be available for that beneficiary



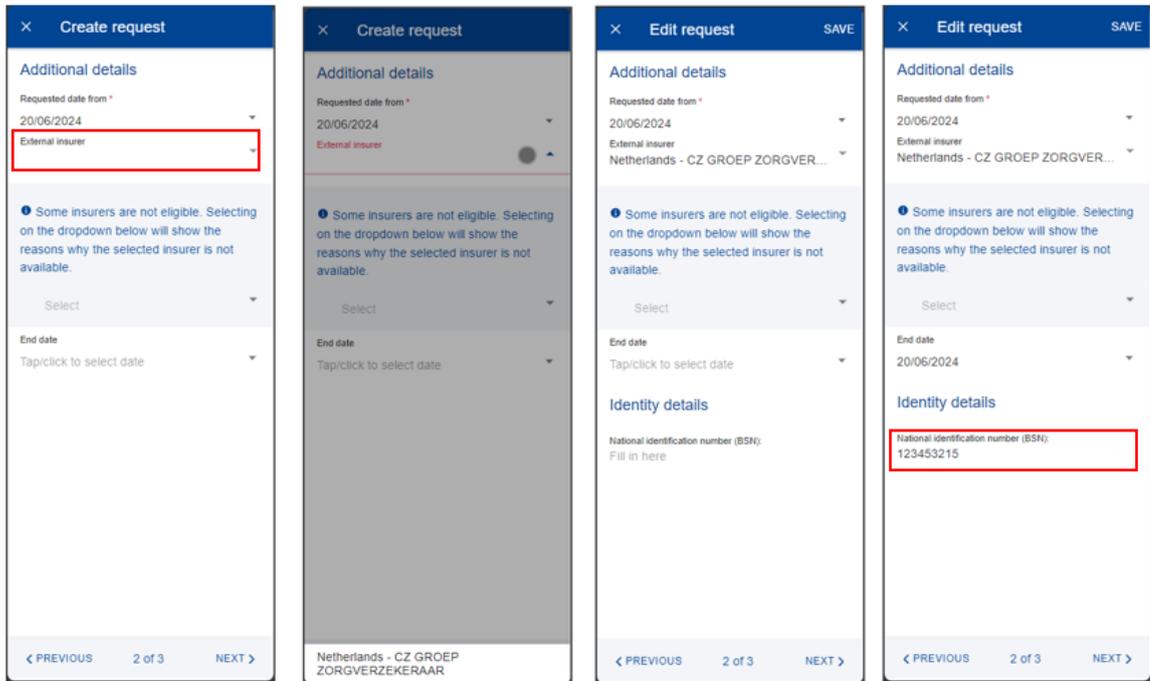
- 3) Step1: Verify that the beneficiary data is correct. If the data is incorrect, then you'll need to either correct it in Sysper or contact PMO.
- 4) Confirm that the data is correct and tap "Next"



- 5) Step2: You can modify the request form date. You need to select the external insurer for which you want to submit the request. The list automatically displays only the eligible insurers.

Note: for informative reasons, other available insurers are listed in the information box and by selecting them you'll be inform why these aren't listed in the eligible insurer list.

- 6) You can select the desired end date and you'll need to provide the National Identification Number. A verification mechanism will confirm the validity of the provided number.



- 7) After all mandatory fields are filled, tap “Next”. A summary of the request is displayed.
- 8) If you need to modify a detail of the request, you can tap on “Previous” and go to previous steps to make the modification.
- 9) Tap on “Send” to submit the request.

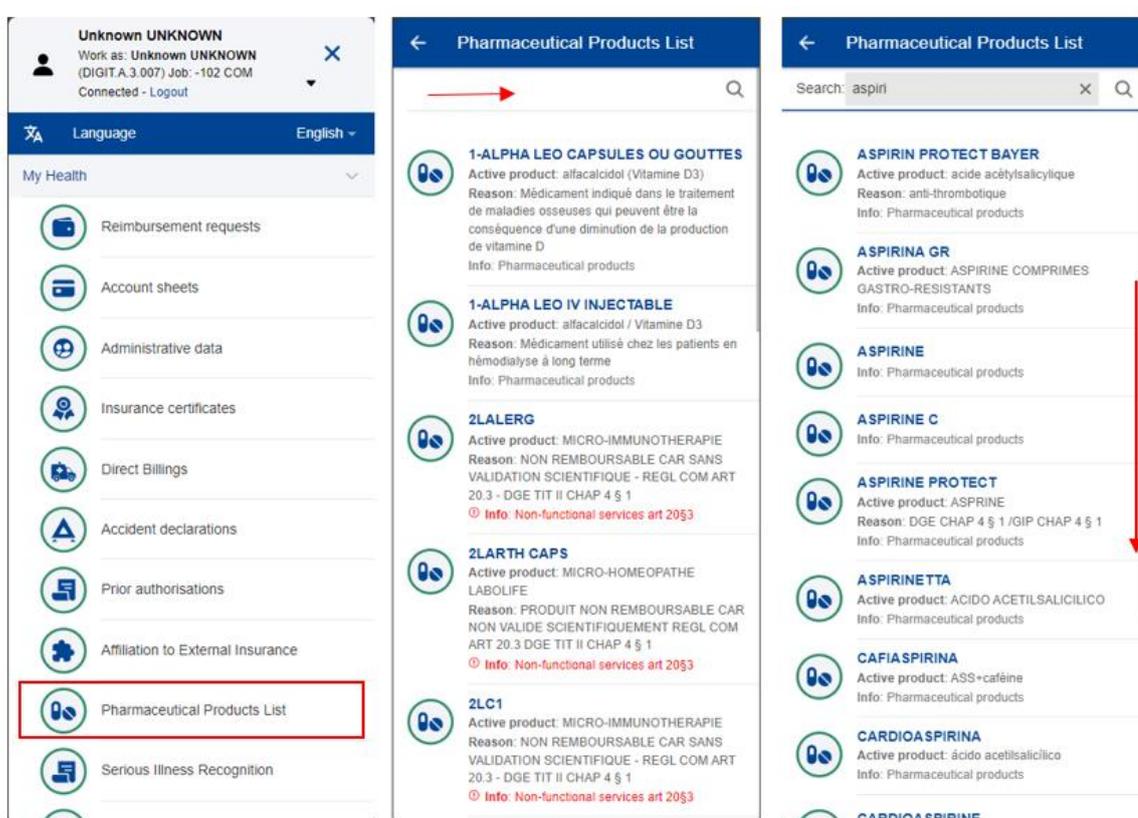


10. PHARMACEUTICAL PRODUCTS LIST (JSIS)

The MyPMO application allows you to search in the pharmaceutical products list to obtain additional details about various pharmaceutical products, including their eligibility.

The list is available in “My Health” services under “Pharmaceutical Products List” menu. The list of products will be displayed and a search box to find the product you are looking for more easily. You’ll need at least three (3) letters to start the search. The search is performed automatically in a few seconds after you stopped typing. The search engine will use the search criteria with the logical operator: “contains”. This means that the result list will include products with the search criteria in the middle in the name (e.g. as displayed below, for search criteria “aspir” the “Aquaspira” product is also returned.)

The results are displayed in a scrollable list, ordered alphabetically.

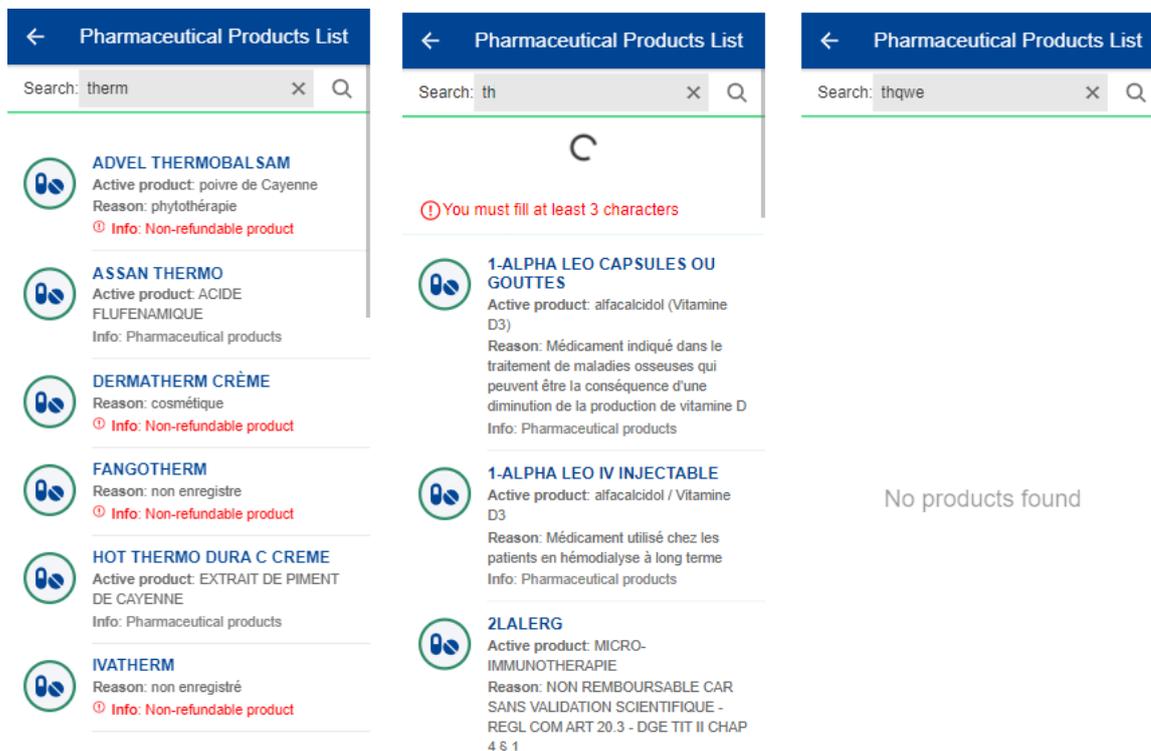


To clear the list and start a new search, simply tap on the X button from the right side of the search bar or delete the search criteria. The list will automatically be updated and you can search using a new criteria.

The products which are non-refundable are marked in red colour.

If you introduce less than three letters as search criteria, you’ll be prompted that at least three characters are needed to perform the search.

If there are no results matching your criteria, then a “No products found” message is displayed.



Tapping on the Back arrow (top-left corner), you'll be return to Home Page.

11. SERIOUS ILLNESS RECOGNITION (JSIS)

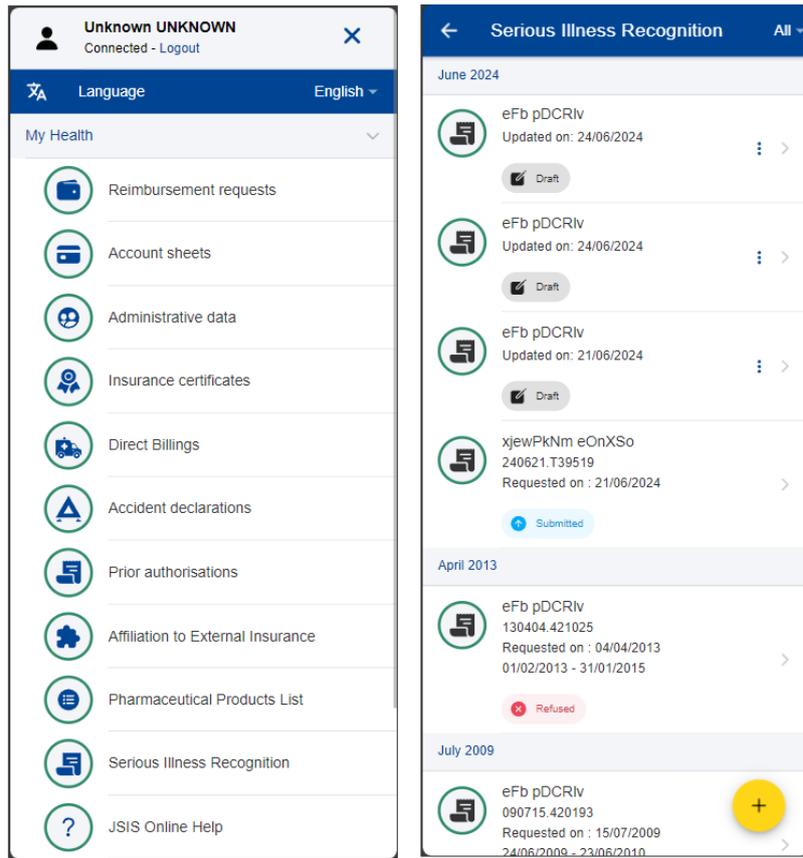
11.1. View Serious illness recognition requests

- 1) From the service list, select “Serious Illness Recognition” to view all serious illness recognition requests created so far (below left).
- 2) The system displays the list of requests showing the date of the request, the request’s status and the total amount of the request. The most recent requests are displayed on top of the list. You can scroll down to view the requests grouped under each month. (below middle)
- 3) You can choose to edit or delete a request in Draft status by tapping on the three dots icon  next to the request. (below middle)
- 4) Tap on an existing request to view the request information. If the request has been submitted, you can see the Scan reference code. (below right)
- 5) If your request is in Draft status you can continue to modify it as described in the next section.
- 6) The floating action button (FAB)  allows you to create a new request.

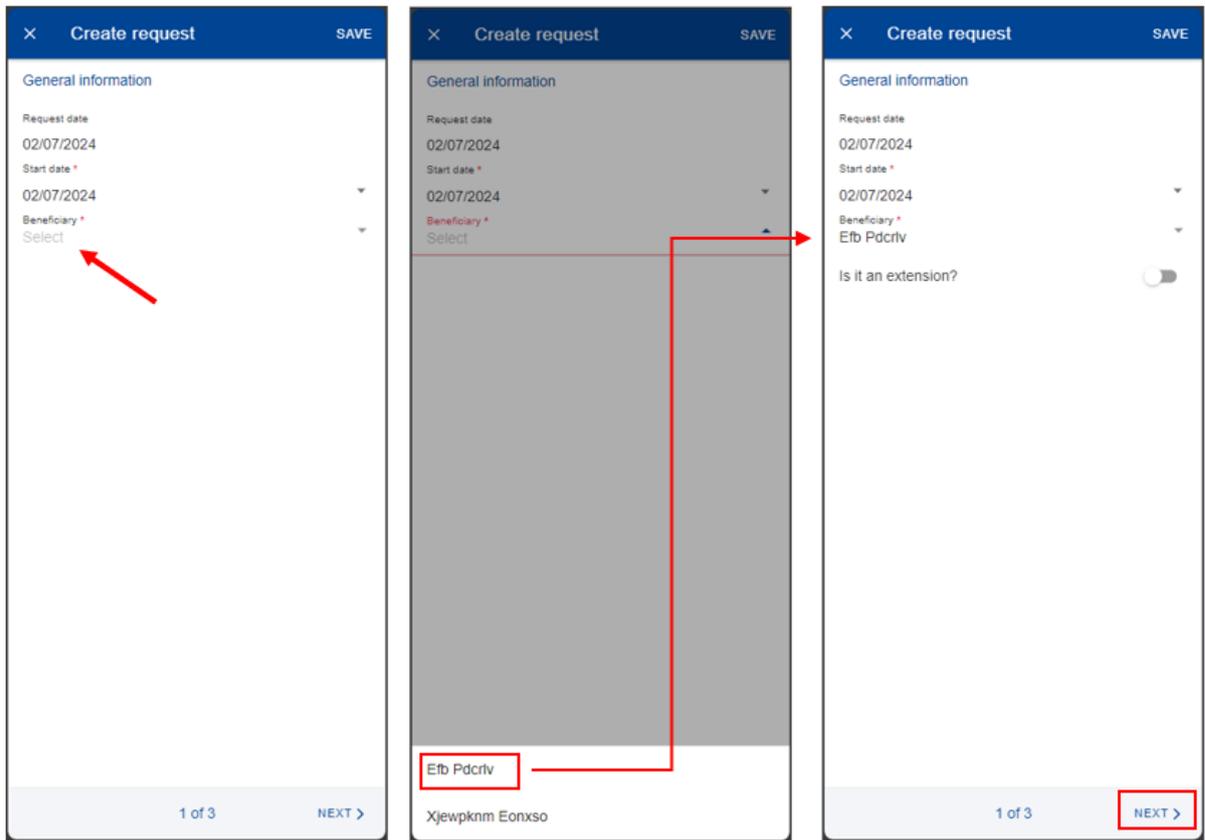
11.2. Create a new serious illness recognition request

JSIS members can create a new Serious Illness Recognition request as follows:

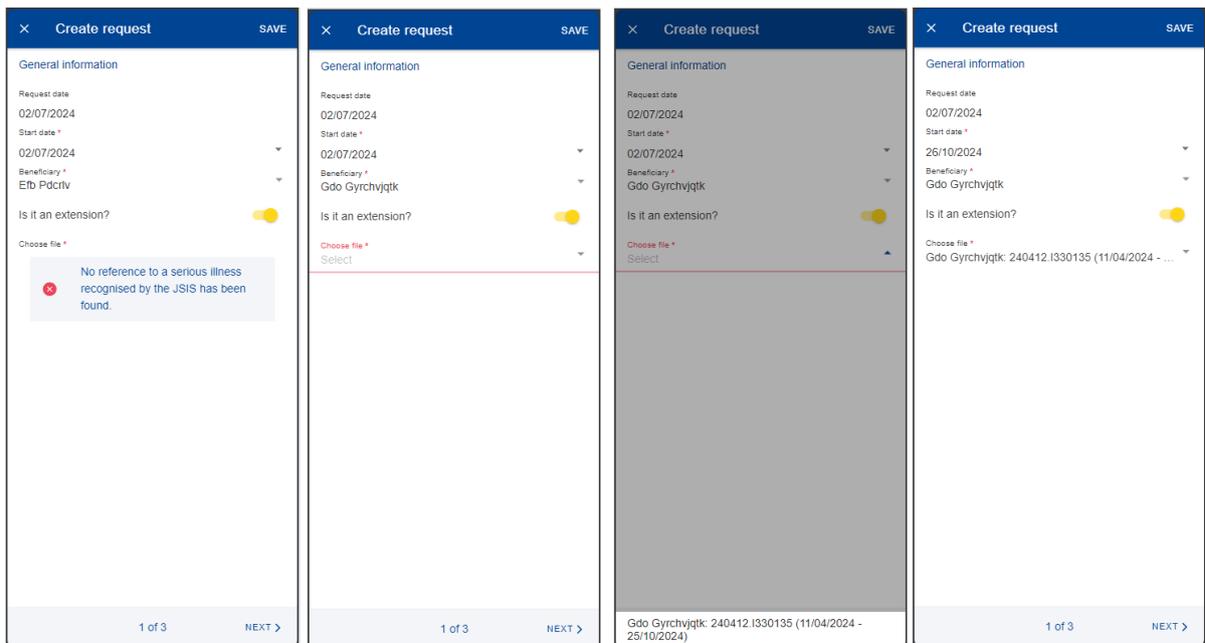
1. From the service list, select “Serious Illness Recognition”.



2. Tap on the  icon.
3. Modify the start date, if necessary. By default, the current date is selected.
4. Select the Beneficiary from the list.



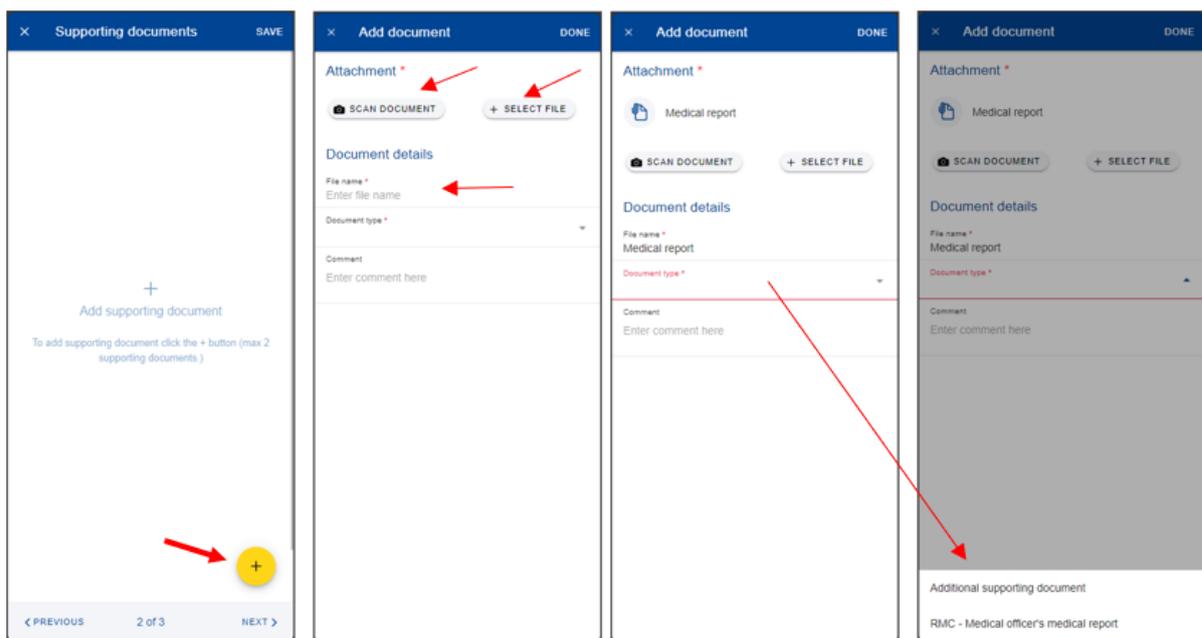
5. Select if the request is an extension. If no, jump to step 7.
6. If the request is an extension, you'll need to select the previous recognition. If there is no previous recognition, then an error will be displayed. In this case, simply set back the "Is this an extension?" field to No. Both cases are exemplified below. As a note, in case of extensions, the start date will be modified as default as the next day after the existing recognition expires.



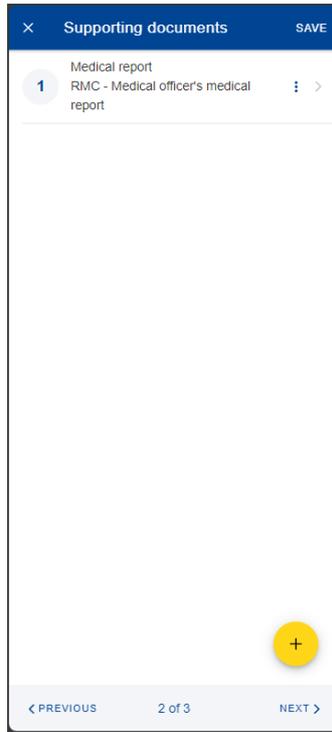
7. Tap Next
8. System displays Step 2 – Supporting documents
9. Tap on the  icon to add a new supporting document. The following types of supported documents are available: RMC – Medical officer’s medical report (mandatory) and Detailed medical report (optional). A single file per type is allowed.

Note: Please make sure to choose High resolution or the Original for your uploaded documents when promoted by your mobile, otherwise the documents may not be readable in the back office following the rendition to PDF.

10. The system will prompt you to take a photo or choose a file from your mobile.
11. Take a photo or select document from your documents list.
12. If the document is scanned, you’ll need to add the File name, otherwise if it’s selected from the device it is automatically proposed (it will include the document type e.g. .pdf, .jpeg)



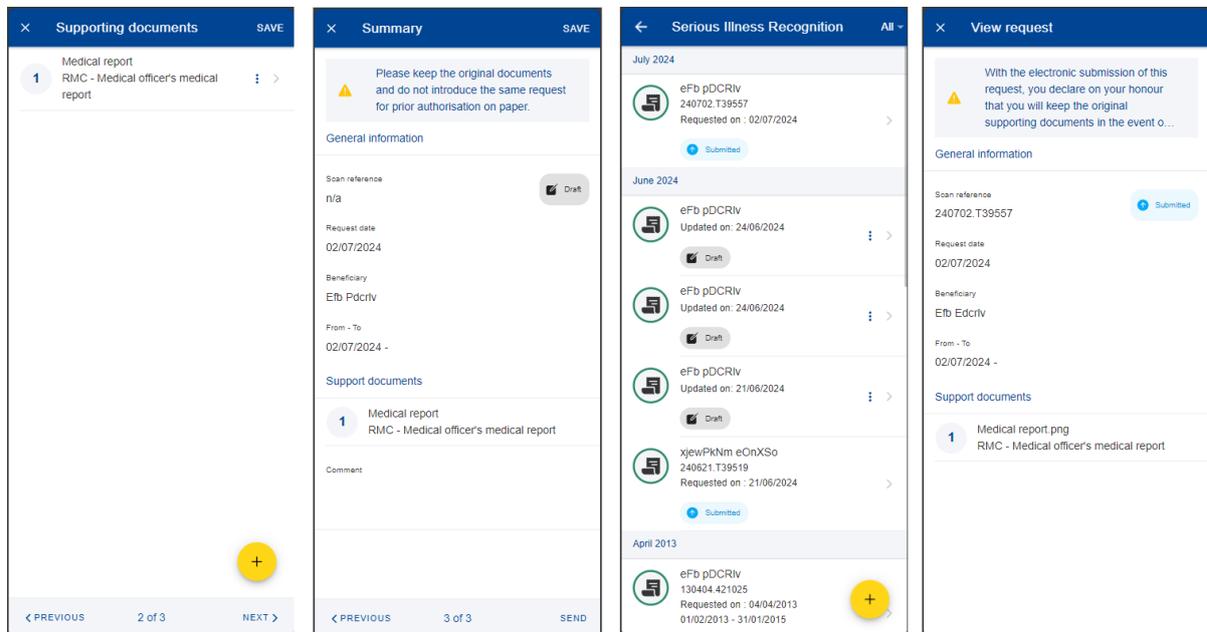
13. Tap Done to save and return to the supporting document list. Repeat the process above to add a second type of document (if needed) and when you have finished addition your support documents, tap Next.



14. The system will move to Step 3 – Summary. In this step you can view all your information in a summarized way and you can add a comment.

15. When you're done checking your information, tap on "Send" to submit the request or on Save to keep it as Draft, if you have any doubts.

16. The request will be listed as Submitted. Tap on it to view the details



11.3. Adding additional required information in a Serious Illness Recognition request

There are two ways of adding additional information in a previously submitted Serious illness recognition request:

- a. From the notification that requires you to add further information, you tap on “Details” (upper right side). This redirects you to the Serious illness recognition request item where you can add the information immediately.
- b. In the Serious illness recognition requests list, you can view the items with the “Waiting for additional information” status. If you did not provide the information yet, tap on the item and add the additional info required.

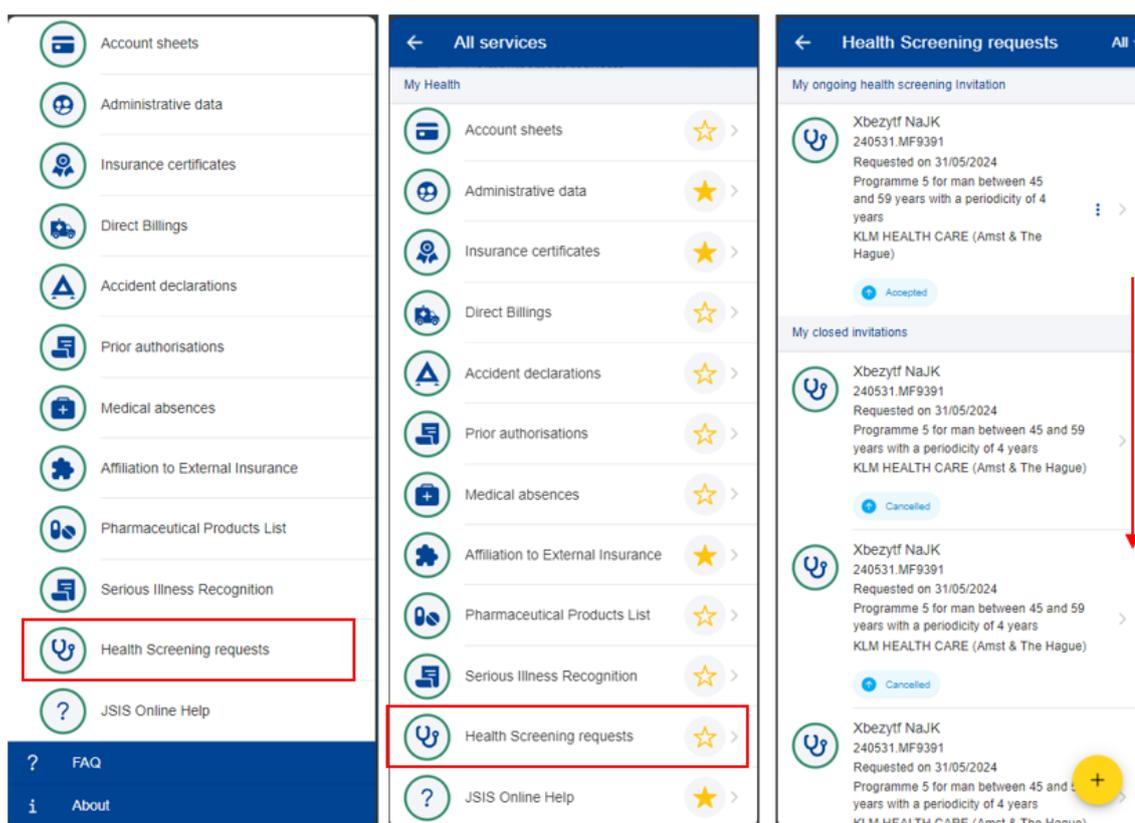
Steps:

- 1) Within to the specific Serious illness recognition request item you can add the required supplementary information (below left and middle screen):
 - a. Tap on “Add Info”
 - b. Fill in the “General comment” text field
 - c. Attach additional documents, if needed
 - d. Tap “Send”
- 2) The additional information will be appended to the existing item (below right) and will appear as “Submitted”.
- 3) You are not able to add more information after you’ve submitted, unless you request the JSIS back office or they send an additional request for information.

12. HEALTH SCREENING REQUESTS (JSIS)

12.1. View health screening requests

- 1) From the service list, select “Health Screening requests” to view all your health screening requests created so far.
- 2) The system displays the list of requests showing the beneficiary, the reference number, the date of the request, the programme, the exam centre, and the request’s status. The most recent requests are displayed on top of the list. You can scroll down to view the invitation requests history. The list clearly separates the ongoing invitations from the closed ones. You can also use the top right filter to see only ongoing or only closed invitations.



- 3) Tap on an existing health screening request to view the invitation. You cannot modify the invitation. Using the bottom left button you can download the invitation in PDF format.



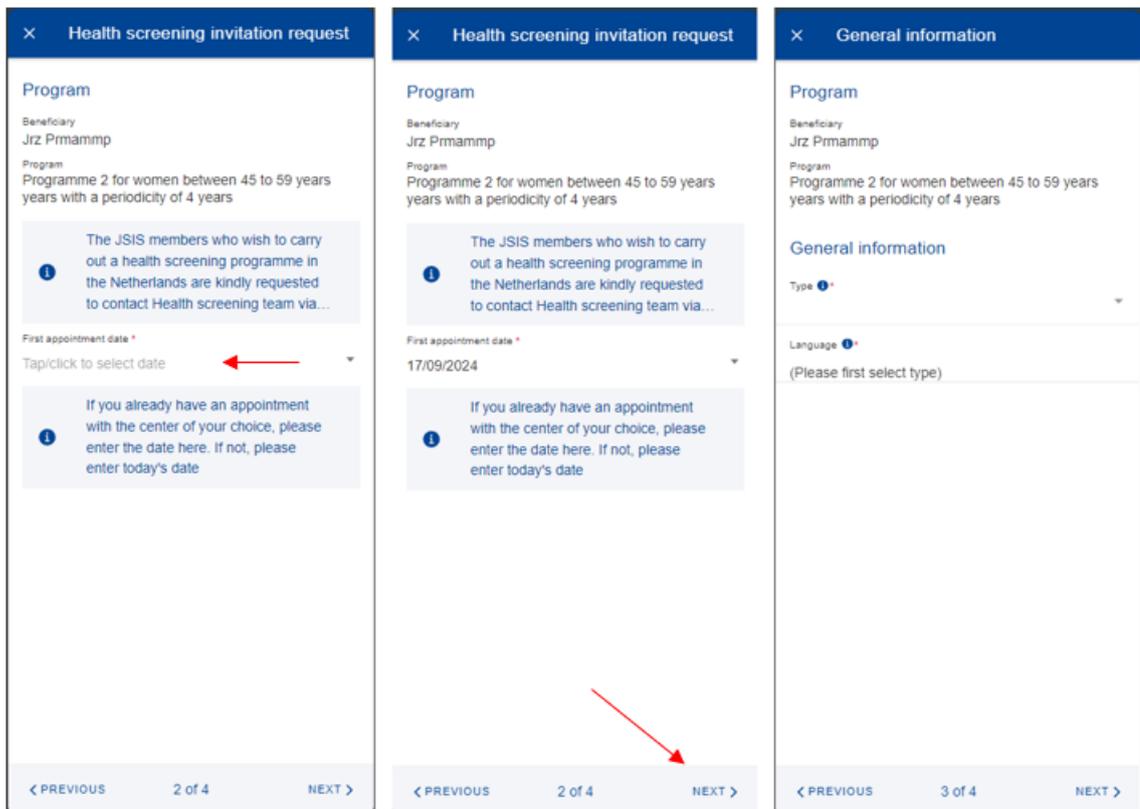
12.2. Create a health screening invitation request

JSIS members can create a new Health screening request as follows:

1. From the service list, select “Health Screening Request”.
2. Tap on the  icon.
3. A list of beneficiaries and the associated programmes are listed.
 - If for a beneficiary, a programme an invitation is already on going then the only action available is view the invitation (case A below)
 - If for a beneficiary, a programme is not yet available, then no action is available and an informative text about the next availability of the programme is displayed (case B below)
 - If for a beneficiary, a programme is available and there is no invitation ongoing, then an Add button (+) is displayed next to the programme. You can tap on the Add button to start the creating a Health Screening invitation request.



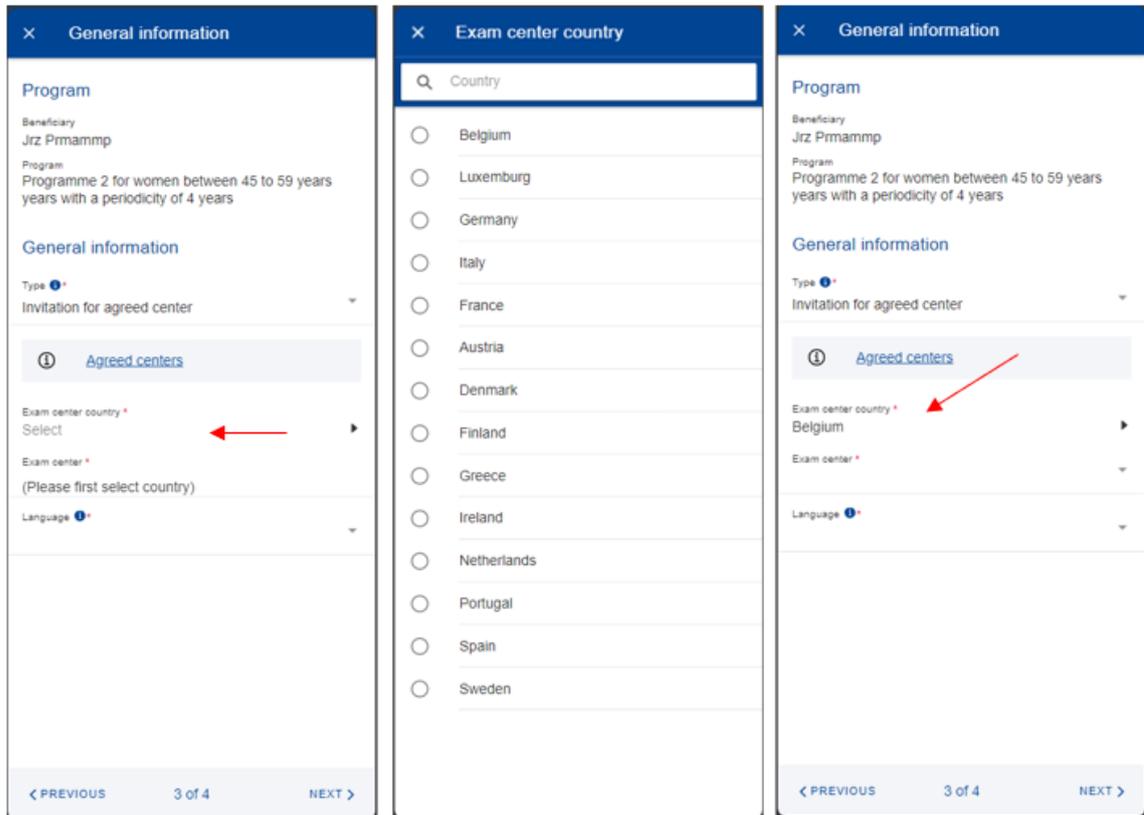
4. Tap on Add (+) button for the desired programme and beneficiary.
5. Select the first appointment date. The displayed information texts provide guidance on which date to select.
6. Tap “Next”



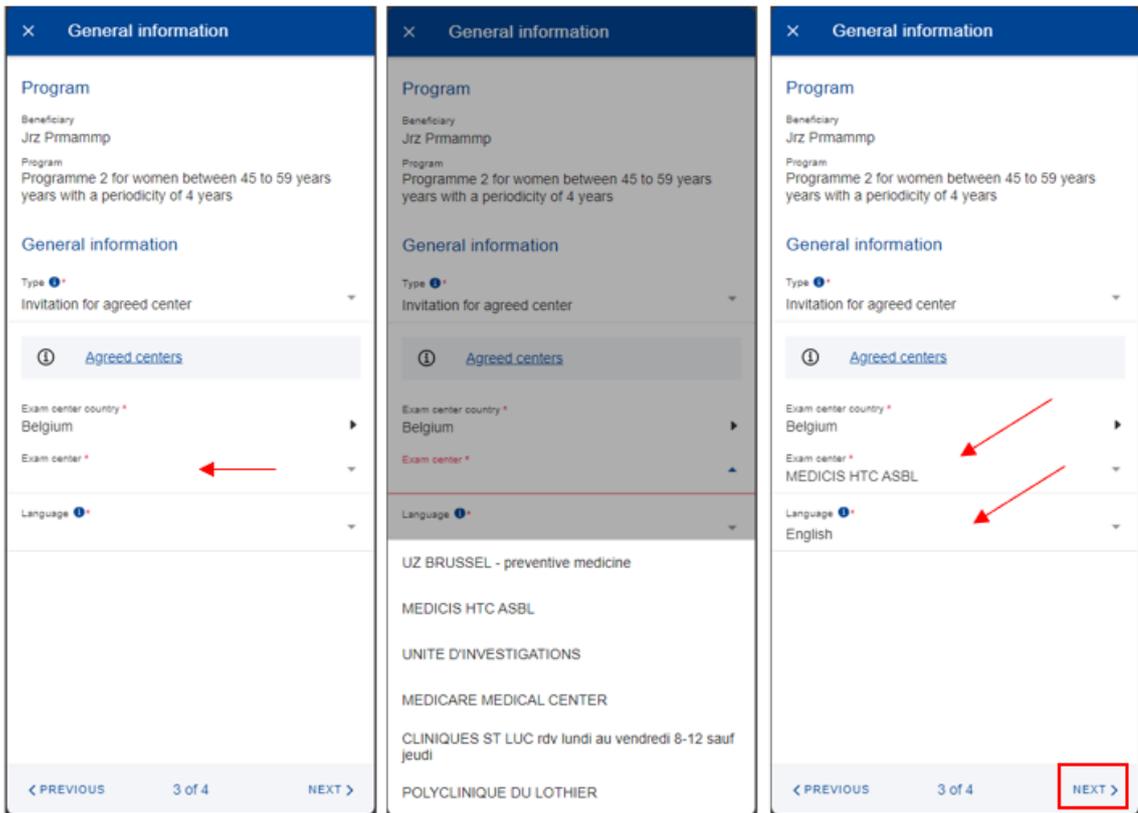
7. Select the invitation type. There are two options: “Invitation for agreed center” and “Open invitation”. Both options are detailed below

12.2.1. Invitation agreed center

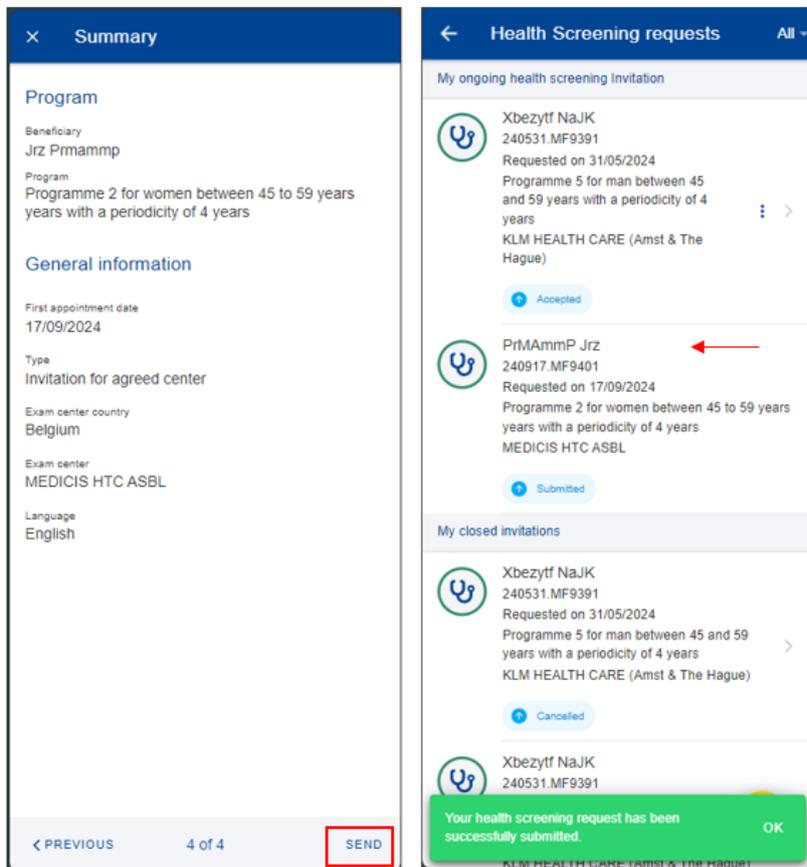
8. Select: “Invitation for agreed center”. Following this selection two more fields will be displayed: “Exam center country” and “Exam Center”.
9. Select the country. Only countries with agreed exam centres are listed.



10. Select the country. Only countries with agreed exam centres are listed.
11. Select the desired exam center. These are filtered by above selected country.
12. Select the language of the invitation. Only English and French languages are supported at the moment.
13. Tap Next

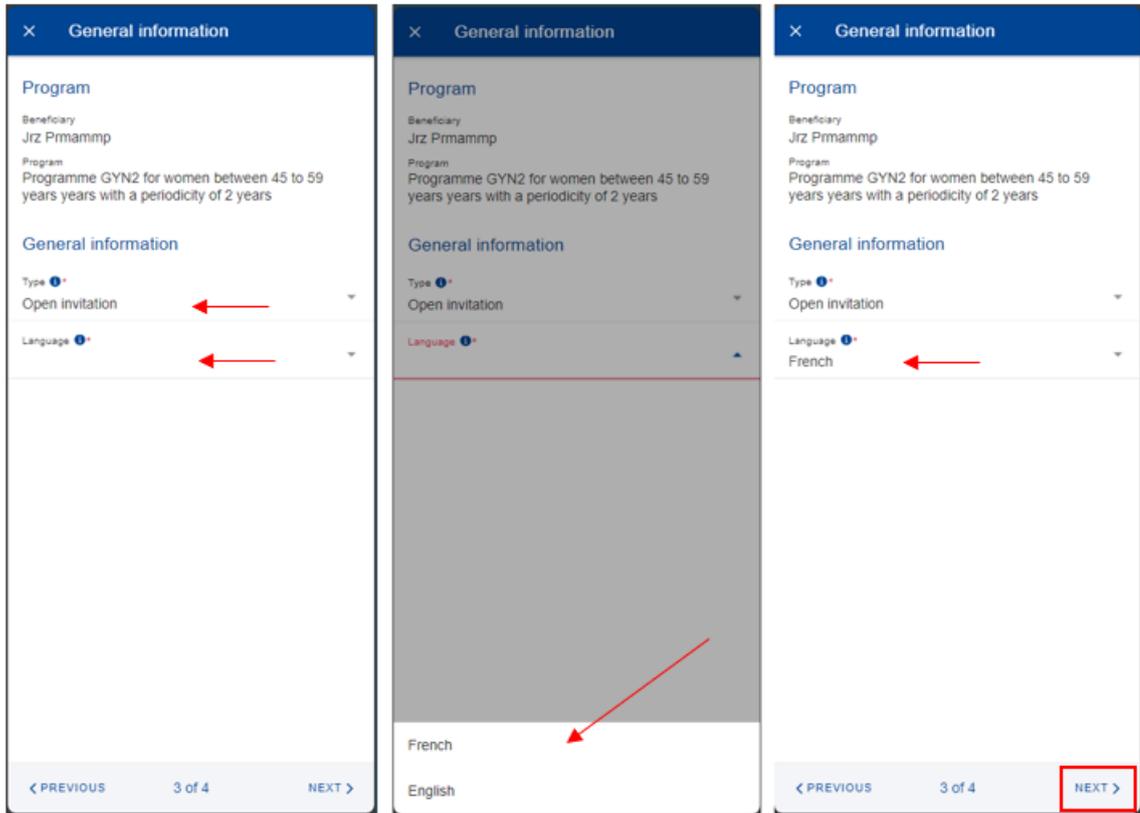


14. A summary of the request is displayed. If you need to amend some provided information you can tap “Previous” to go back and make the necessary changes. If everything is fine, then tap “Send” to submit the request.

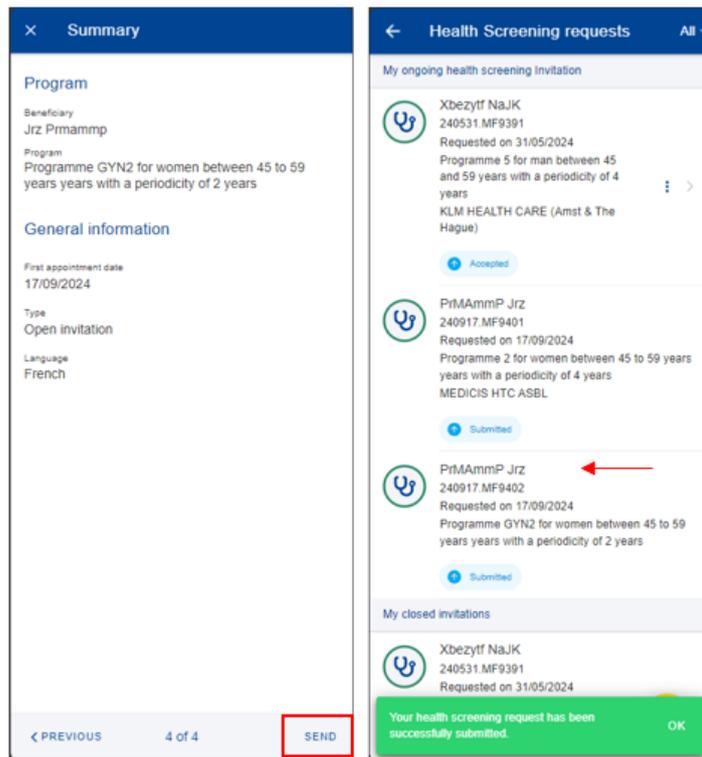


12.2.2. Open invitation

8. Select: “Open invitation”.
9. Select the language of the invitation. Only English and French languages are supported at the moment.

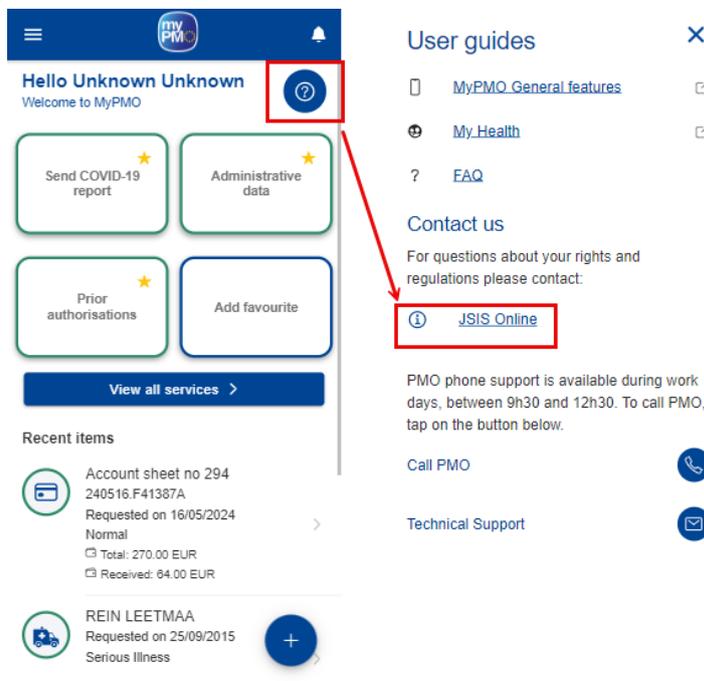


15. Tap “Next”.
16. A summary of the request is displayed. If you need to amend some provided information you can tap “Previous” to go back and make the necessary changes. If everything is fine, then tap “Send” to submit the request.



13. JSIS ONLINE HELP (JSIS)

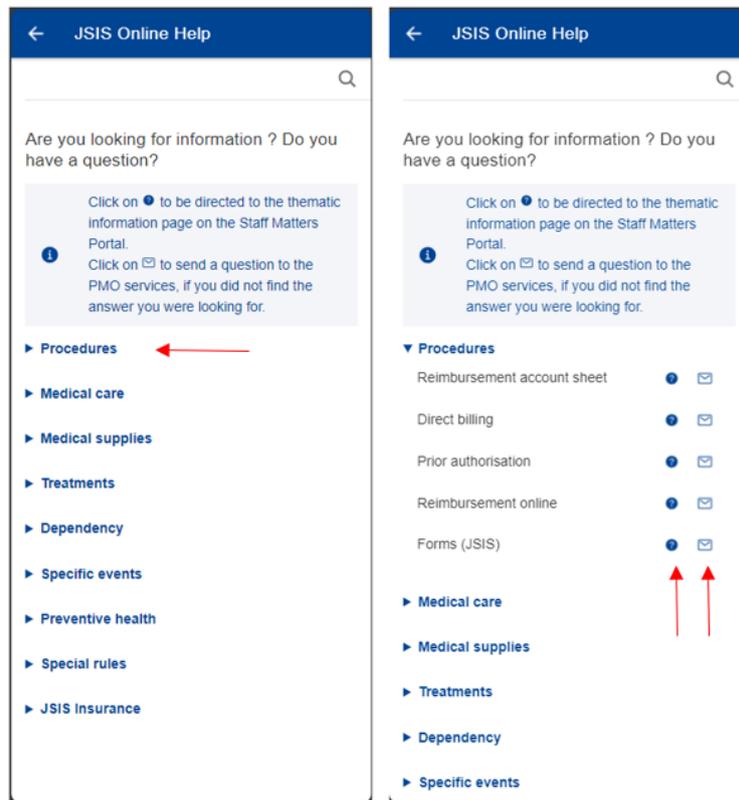
MyPMO includes a dedicated section JSIS online help. This section is available on the  (help button) found on the Homepage. as “JSIS online help”.



Tapping on “JSIS Online Help” will open a help menu with entries grouped in categories. You can manually explore the contents by tapping on each category or you can use the search feature.

Tapping on a category will expand the available topic. For each topic you'll have two options:

- Dedicated thematic information page on Staff Matters Portal – available by tapping on the question mark;
- Contact PMO services by sending a question if you did not find the answer you're looking for – available by tapping on the envelope icon.



Alternatively, you can search through the topics by tapping on the magnifying glass on the top right corner and start typing the search criteria. The search is performed as you type and the search results are displayed.

← JSIS Online Help

Search: 

Are you looking for information ? Do you have a question?

Click on  to be directed to the thematic information page on the Staff Matters Portal.
 Click on  to send a question to the PMO services, if you did not find the answer you were looking for.

- ▶ Procedures
- ▶ Medical care
- ▶ Medical supplies
- ▶ Treatments
- ▶ Dependency
- ▶ Specific events
- ▶ Preventive health
- ▶ Special rules
- ▶ JSIS Insurance

← JSIS Online Help

Search:

Are you looking for information ? Do you have a question?

Click on  to be directed to the thematic information page on the Staff Matters Portal.
 Click on  to send a question to the PMO services, if you did not find the answer you were looking for.

- ▶ Procedures
- ▶ Medical care
- ▶ Medical supplies
- ▶ Treatments
- ▶ Dependency
- ▶ Specific events
- ▶ Preventive health
- ▶ Special rules
- ▶ JSIS Insurance

← JSIS Online Help

Search: dental

Are you looking for information ? Do you have a question?

Click on  to be directed to the thematic information page on the Staff Matters Portal.
 Click on  to send a question to the PMO services, if you did not find the answer you were looking for.

▼ Medical care

Dental care  