

This guide will demonstrate how to enroll in the Edward M. Kennedy Patient Portal

1. Navigate to our portal website: www.kennedychc.org/portal
2. Click the “SIGN UP” button.

Our Patient Portal is an easy way for our medical patients to connect with Kennedy CHC from anywhere!



With a Patient Portal account you can:

- View your personal health record
- View your upcoming appointments
- Receive e-mail reminders prior to your medical appointments
- Request medical appointments
- Request medication renewals
- Send a message to your provider's care team



3. Read through the Terms & Conditions.
 - a. If you agree, click the **check box** and then click the “CONTINUE” button.
 - b. If you do not agree to these terms, please do not sign up.

Terms and Conditions

PRIVACY POLICY
Please review our Privacy Policy, which as between you and NextGen Healthcare Information Systems, LLC, its corporate parent Quality Systems, Inc. and their respective subsidiaries and affiliates (“NextGen Healthcare”) governs your visit to NextGen® Patient Portal (formerly known as NextMD®), to understand our practices.

ELECTRONIC COMMUNICATIONS
When you visit NextGen® Patient Portal or send e-mails to us, you are communicating with us electronically. You consent to receive communications from us electronically. We will communicate with you by e-mail or by posting notices on this site. You agree that all agreements, notices, disclosures and other communications that we provide you electronically satisfy any legal requirements that such communications be in writing.

COPYRIGHT AND TRADEMARKS
NextGen® Patient Portal is the registered trademark of NextGen Healthcare and the website contains our copyrighted and protected material. Some material in the website is from copyrighted sources of the respective copyright claimants. Users of this material are solely responsible for compliance with any copyright restrictions and are referred to the copyright notices appearing in the original sources, all of

I have read and agreed to the Terms and Conditions.

CONTINUE

We help people live healthier lives.

4. Complete all fields with a red asterisk (*) and then click the “NEXT” button.

I have a Patient Portal Account

Username Password **LOGIN**

[Need help with your username and password?](#)

Don't Have an Account? Simply Fill Out the Fields Below

1) Select Your Medical Practice

Practice: **Edward M Kennedy Community Health**

2) Enter your information

* First Name: Middle Name: * Last Name:

* Address:

Address 2:

Address 3:

* City: * ZIP Code: Country: * State:

* Phone number (1234567890) Phone Extension:

* Date of Birth (mm/dd/yyyy)

* Email Address: * Confirm Email Address:

BACK **NEXT** **CANCEL**

5. If you know your insurance information, you can enter it on this screen. This step is *not* required. Once you have entered your information, click the “NEXT” button.

Patient Portal **NEXTGEN HEALTHCARE**

YOUR PRACTICE & INFORMATION **INSURANCE INFORMATION** **ENROLLMENT CREDENTIALS**

1) Enter Your Health Insurance Information (Optional)

I am self-insured

Insurance/Payer name:

Policy number:

Group number:

Group name:

2) Enter Your Health Insurance Claim Mailing Address (Optional)

Address:

City: State: ZIP Code:

Country:

United States

Phone number:

BACK **NEXT** **CANCEL**

6. Create a username, password and security questions to setup your account.

Note: Be sure to remember this information as you will need it to login to your portal account.

ENROLLMENT CREDENTIALS

FRAUD WARNING
Any person who knowingly with the intent to defraud any medical agency by concealing and filing false information for medical care or treatment may be found to have committed a fraudulent act which is a crime and may be subject to criminal and civil penalties.

1) Create Username and Password
Create a username and password you want to use when you log in. Asterisk (*) denotes required field.

* Username:
Username must be between 8-50 characters which may be a combination of letters, numbers and [special characters](#) and it case sensitive.

* Password:
Password must be between 8-50 characters with no spaces, must include at least one numeric digit, is case sensitive, and can be a combination of letters and [special characters](#).

* Retype Password:

2) Create Security Question
Choose a login security question and enter your answer. This question will be used as part of the login authorization process. You will be prompted to enter the answer for your selected question when you try to login to your account. Asterisk (*) denotes required field.

* Select a Question:

* Answer:

* Retype Answer:

3) Create Password Recovery Credentials
Create a forgotten password question and enter the answer. This question will be used in the password reset process. You will be prompted to enter the answer for this question in case you need to reset your password in the future. Asterisk (*) denotes required field.

* Create a Question:

* Enter your answer:

* Retype Answer:

Type the text
Privacy & Terms
RECAPTCHA™

7. In the box on the bottom-right side of the screen, you will need to type in the text that appears in the picture. Once entered, click the “COMPLETE ENROLLMENT” button.

- a. If you cannot read the text, click the “” button to generate a new picture that may be easier to read.



8. Your request has been submitted. We will review the information you entered against the information we have on file for you. You will receive an e-mail to notify you when the request has been processed.

