



EUROPEAN COMMISSION
DIRECTORATE-GENERAL INFORMATICS

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

MyPMO

User Guide

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1. COMMON FEATURES

1.1. What is MyPMO?

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

1.2. Requirements

MyPMO is a native mobile application. For access via a browser, Chrome or Firefox are recommended on Windows 10, Chrome on Android and Safari on MacOS/iOS.

1.3. Access to MyPMO

MyPMO is available in the Apple App and Google Play stores.

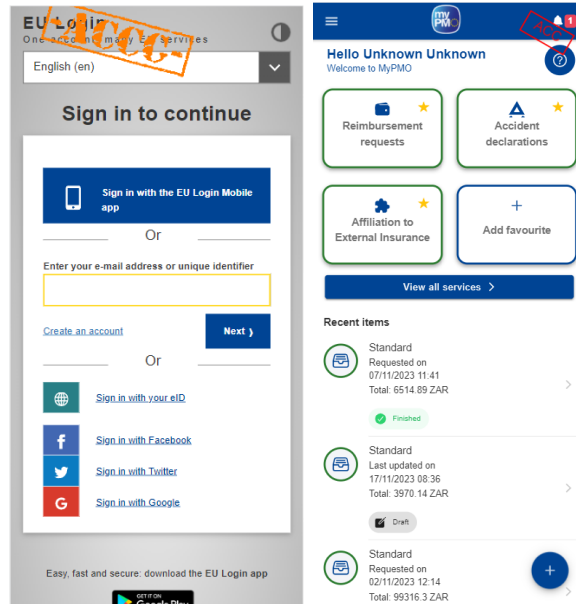
MyPMO for internet browser is available at:

<https://webgate.ec.europa.eu/MYPMO> (Case sensitive URL).

The MyPMO App is accessible via EULogin with double authentication method (for instance using Password and Mobile phone + SMS). More information related to EULogin and how to add a mobile device are available at:

<https://webgate.ec.europa.eu/cas/userdata/mobileApp/manageMyMobileDevices.cgi>

EC staff and other European institutions and agencies can access MyPMO with the same access rights they have for Health and MIPS applications. External experts may access experts meetings (AGM).



In case you can't log in, please contact your usual support EC-HELPDESK-IT@ec.europa.eu.

1.4. Access to MyPMO from OnTheGo

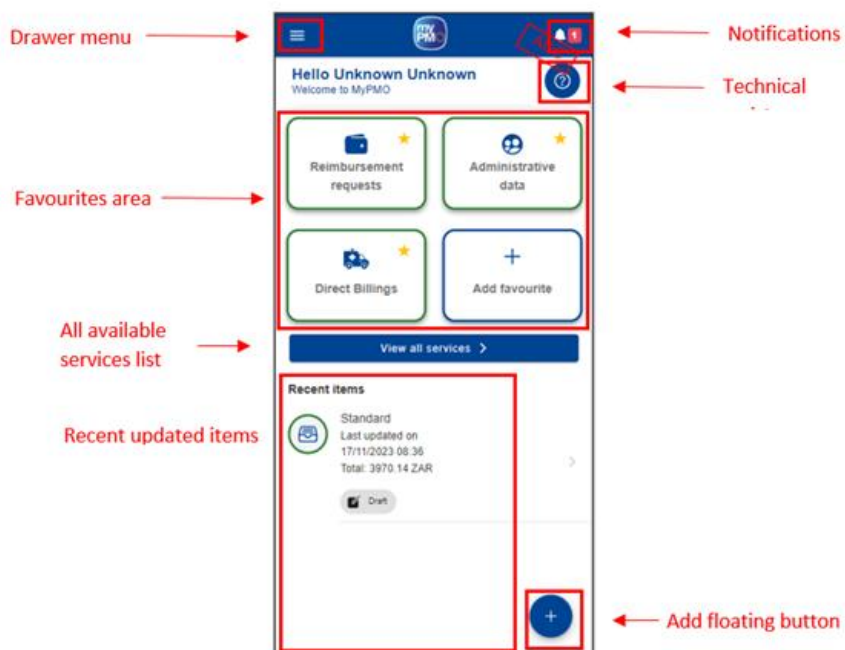
The tool is also available in “EC on the Go” for EC and Agencies staff at: <https://webgate.ec.europa.eu/cotg/home>

<https://webgate.ec.europa.eu/cotg/home>

If a browser is preferred, then we recommend using Chrome on Android or Safari on IOS, it can also be accessed through Chrome or Firefox on Windows 10.

1.5. Home page

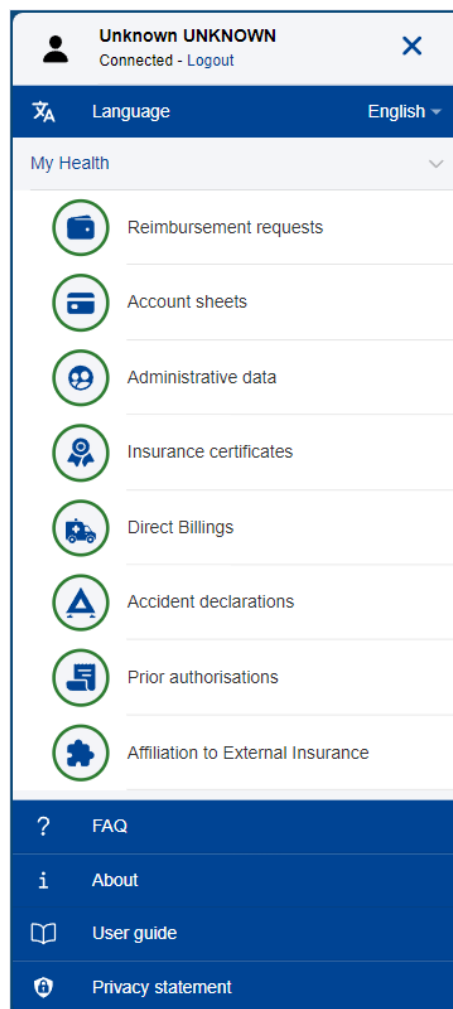
The home page displays the list of available actions.



1.5.1. Drawer menu

The drawer menu provides access to the following options:

- Logout (for further details see 1.10 Log out)
- Change language (for further details see 1.9 Change language)
- Service list – a list with direct links to all available services, grouped by type
- FAQ – link to the Frequently Asked Questions section
- About – information about the application version (for further details see 1.8 View App details and confidentiality statement)
- User guide – external redirect to the user guide in PDF file. This action will open a browser and display the PDF.
- Privacy statement – the confidentiality statement (for further details see 1.8 View App details and confidentiality statement)



1.5.2. Notifications

This menu will redirect the user to the Notifications area, as described in 2 Notifications)

1.5.3. All services list

The "View all services" will redirect the user to a complete list of available services, grouped by type (e.g. My Health, My Missions). In this screen, the user can also set services as favourites, as described in the next section.

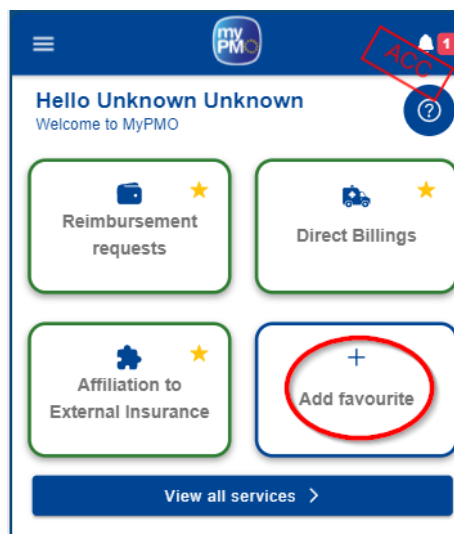
1.5.4. Favourites

The Favourites area displays the services set as favourites. The application allows setting up to four (4) favourites. The user can modify the favourites as many times as needed.

Setting a service as favourite can be done in two ways:

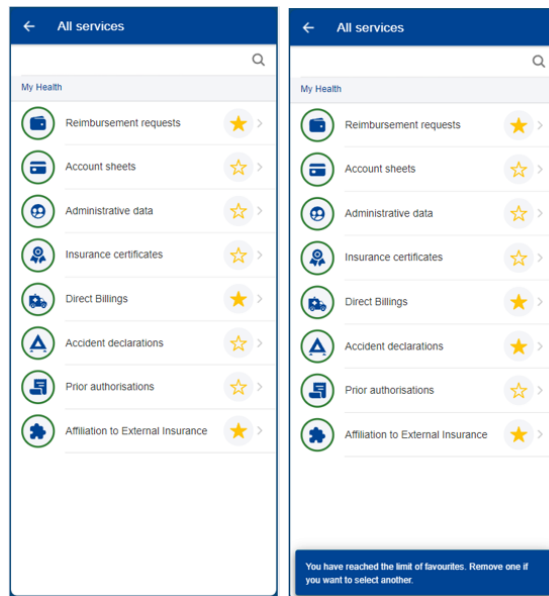
A. Home page

In Home page, if there are less than 4 services set as favourite, a favourite card will display "Add favourite" and tapping on it will redirect the user to the service list where can set the favourites.



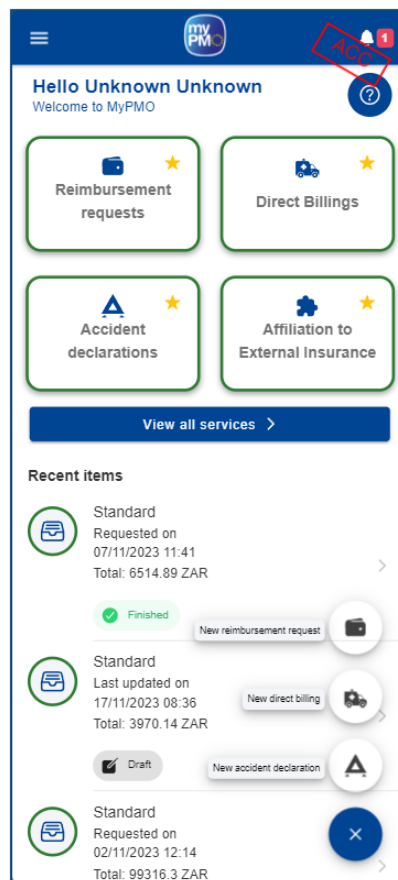
B. All services list

The service list displays a yellow star next to each service. If the star is filled, then that service is set as favourite. If the star is empty, then it is not set as favourite. Switching between full/empty star can be done by tapping on the star. If there are already 4 services set as favourite, tapping on the fifth empty star will result in an informative message informing the user that will need to remove one favourite to set a new one.



1.5.5. Add floating button

The Add floating button from the Home page is a dynamic button allowing users to start the process of creating an item set as favourite. The contents of the button is depending on the services set as favourite.



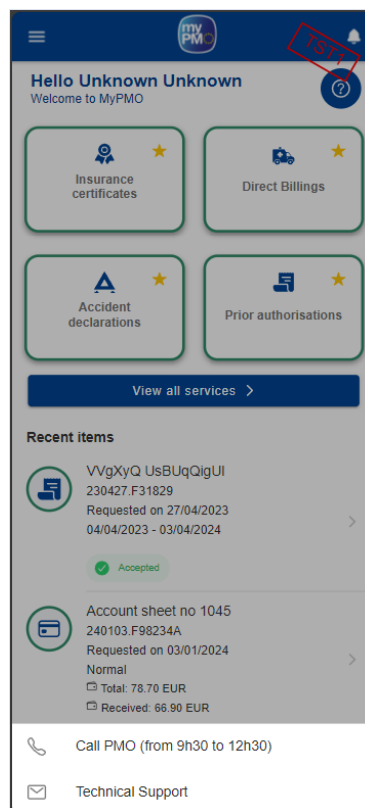
1.5.6. Recent items

The Recent items area lists the last 5 items that were recently updated by the user. From here, one can quickly access a recent modified item, such as a reimbursement request to perform the available actions, depending on the item's status.


1.5.7. Technical Assistance

The Technical Assistance button will open a dedicated menu with the following options:


- Call PMO – this will activate the phone's call feature and suggest dialling PMO's contact number: +32 2 291 11 11 (from 9h30 to 12h30)
- Technical support – this will activate the mobile's mail app proposing to send an email to PMO's technical support contact address: PMO-IT-APPLICATIONS@ec.europa.eu



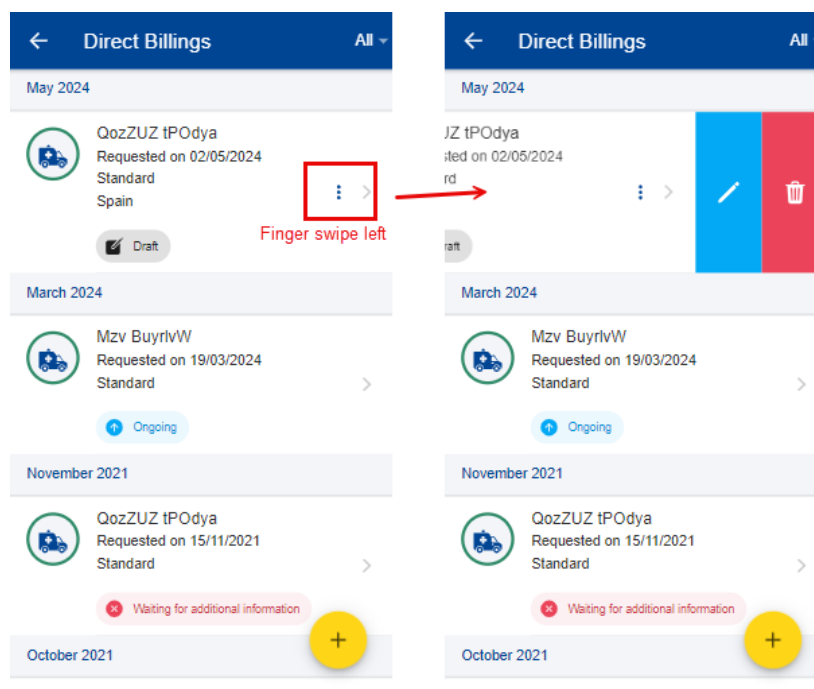
1.6. Context menu and the slide action

The context menu is a set of actions that are available for certain items in the application. Due to the screen size limitation on the mobile devices, the context menu is normally hidden and becomes visible only when you tap on the three dots  icon next to the item or, alternatively, you swipe the item to the left side of the screen using a finger motion (the slide action).

The context menu changes from a type of item to another. You can edit, delete, duplicate the item etc. The context menu is only displayed if you are allowed to perform a certain action, otherwise, it does not appear.

The screen below shows the context menu for an item in the direct billings list. In order to see the possible actions under the menu, you can either tap on the  icon or slide the item to the left side of the screen.

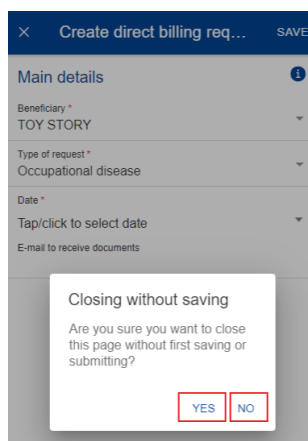
In this specific case, you can see two possible actions: edit and delete item.



1.7. Warning save popup

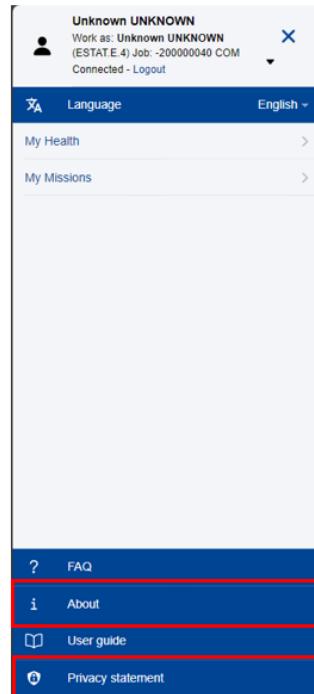
When you are modifying a form in the application and trying to leave without saving your data, the system will display a warning message asking you if you want to save the modifications so far.

You can choose to save them or not. If you save then you will be able to find back your form in Draft mode and continue working on it, otherwise the data will be lost.




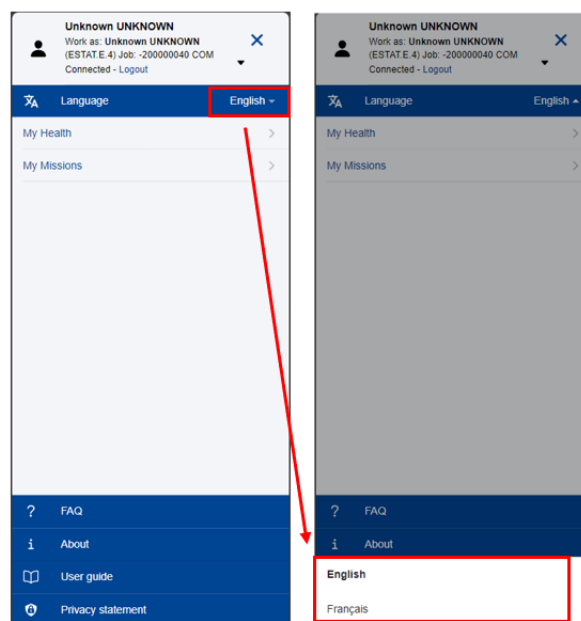
1.8. View App details and confidentiality statement

Tap on the “About” button to obtain information about the application version and improvements. You may also view the confidentiality statement.



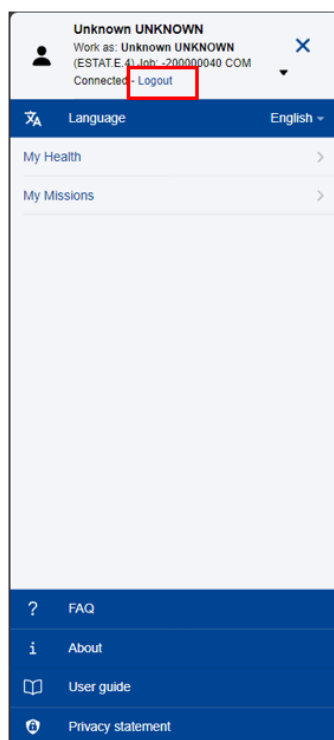
1.9. Change language

To change the language, tap on the  icon then select the language from the languages list.



1.10. Log out

To log out, tap on the ☰ icon then select “Logout”.



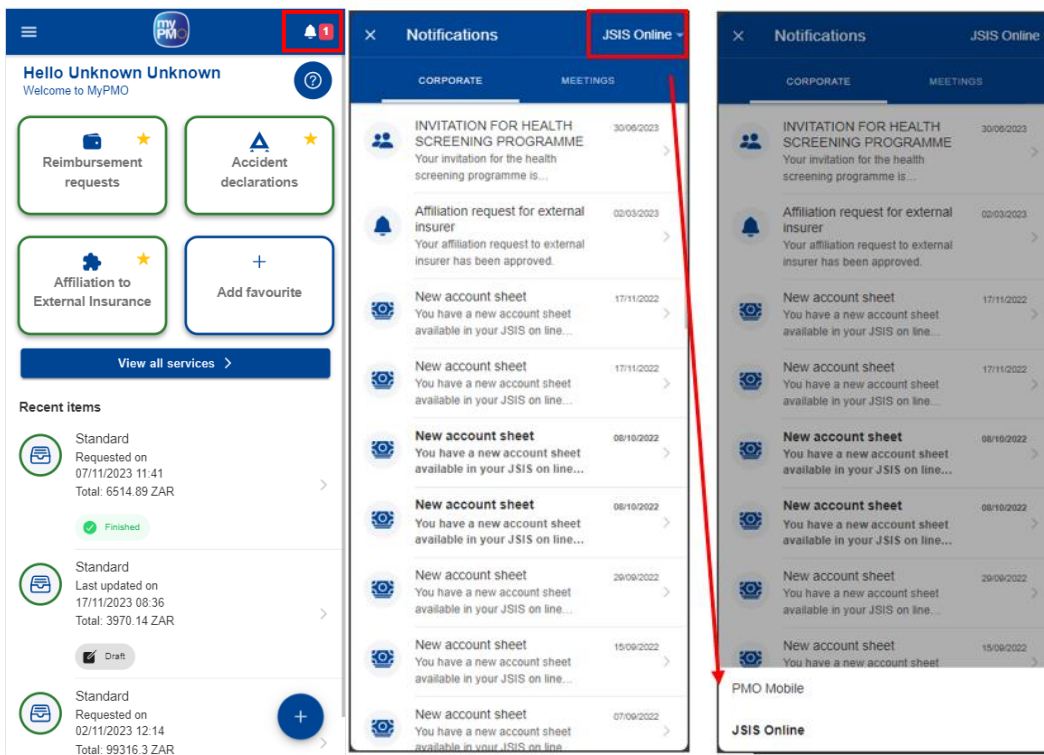
2. NOTIFICATIONS

The domain specific desktop applications (JSIS, AGM, MiPS) may send notifications related to previous user actions etc. These notifications are grouped under the bell icon on the upper right side of the MyPMO home screen.

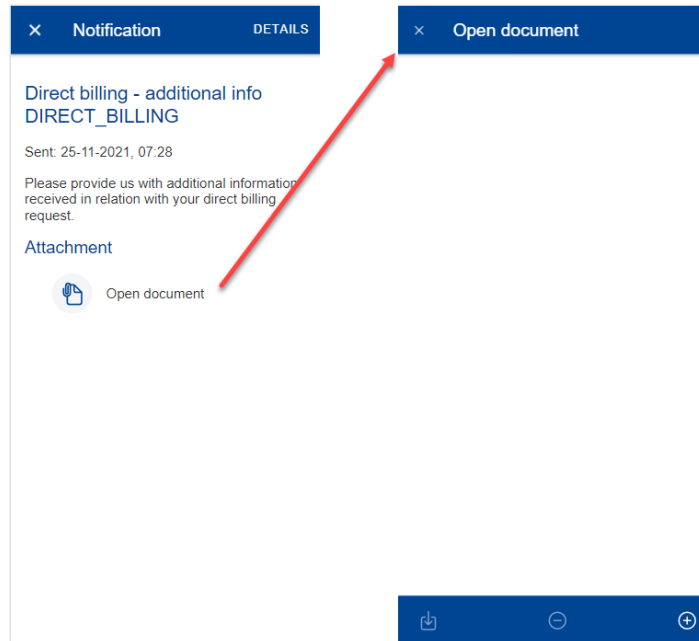
For the functionalities already implemented on MyPMO, the notification link will lead to the specific MyPMO functionality. For the functionalities not implemented in MyPMO, the notification will point back to the domain-specific desktop application.

2.1. Visualizing a notification

- 1) Tap on the bell icon on the upper right of the home screen (left below)
- 2) The list of notifications is displayed. The notifications in bold are the ones unread.
- 3) Choose a notification from the notifications list (middle below)
- 4) Alternatively, you can filter the notifications by tapping on the “All”. It will display the list of available filters. (right below)



- 5) When you tap on the notification, you can see the details of the notification: text and attached documents, if any. (left below) If you tap on an attachment, it will open on the screen. (left right)



- 6) If the notification is linked to a MyPMO implemented functionality, by tapping on 'Details' (upper left corner) you will be redirected to the specific functionality item (e.g. Direct Billing, Medical Absence etc). You can then update your request and submit the additional information (comments, documents etc)

Note: If the functionality is not yet implemented in MyPMO, the "Details" button does not appear.

3. ADMINISTRATIVE DATA (JSIS)

3.1. View Administrative data

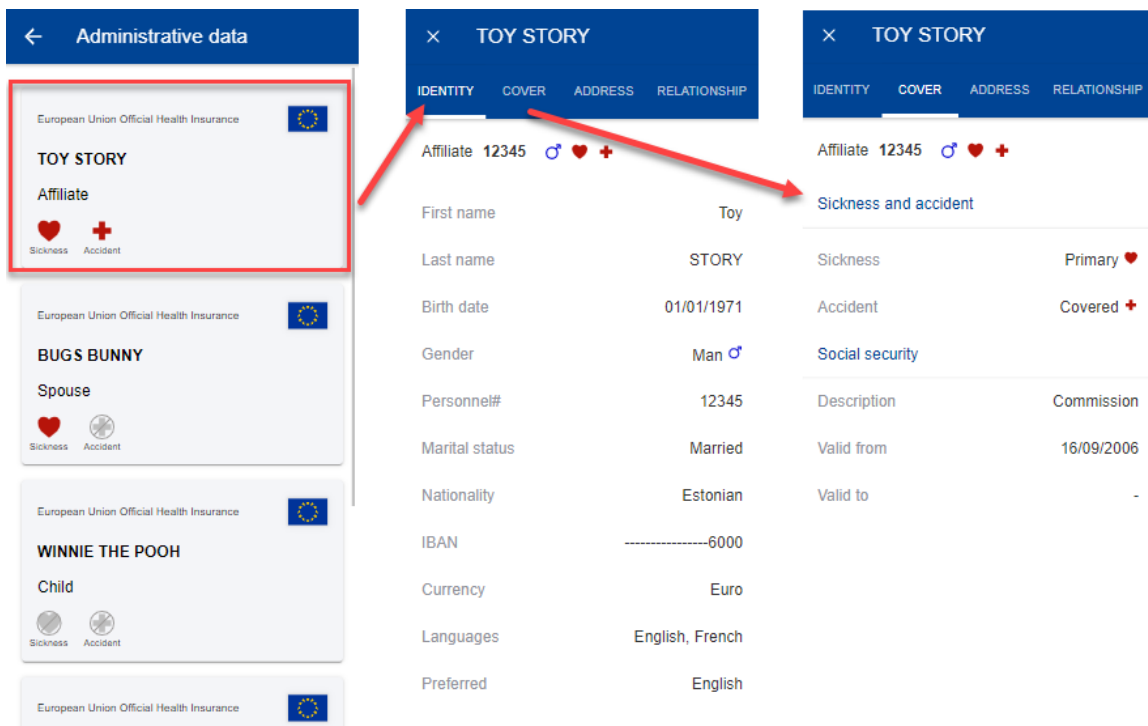
JSIS members can view the insurance cards for all family members covered by JSIS.

From the service list, tap on “My 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>

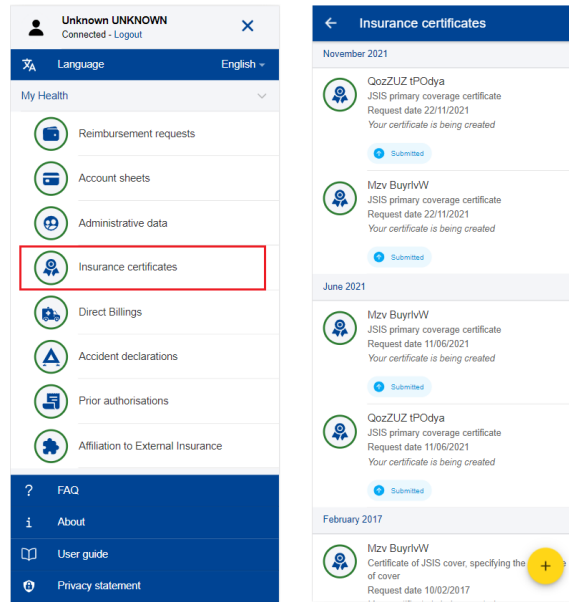
Staff Matters:

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

4. INSURANCE CERTIFICATES (JSIS)

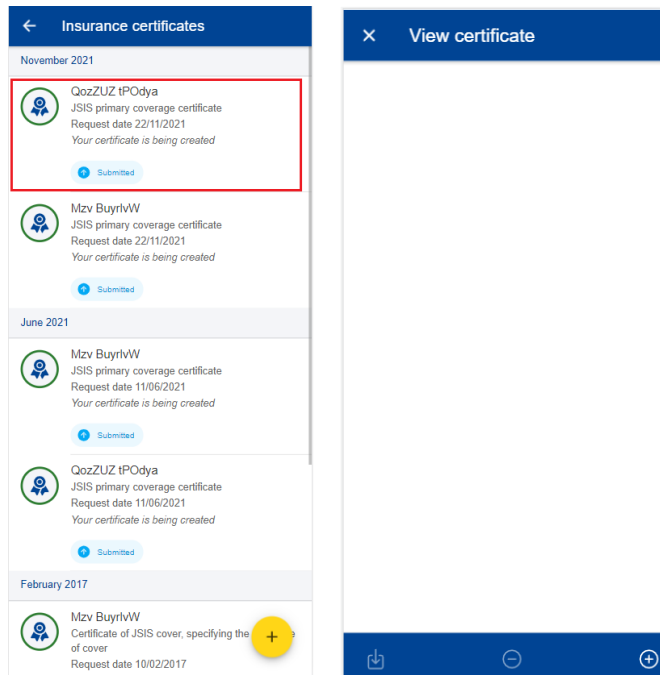
4.1. View Insurance Certificates

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.

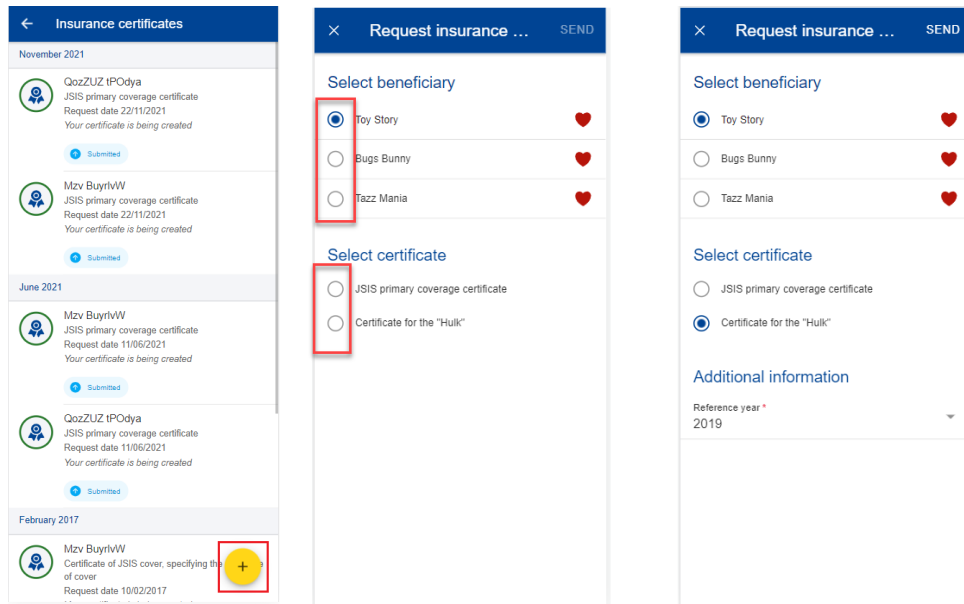



4.2. Request Insurance Certificates

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

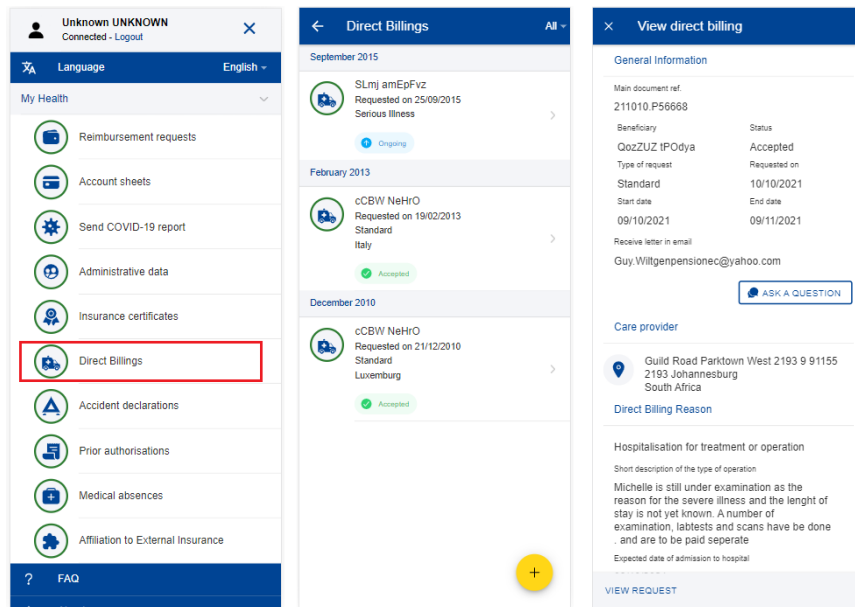
× View certificate


5. DIRECT BILLINGS (JSIS)

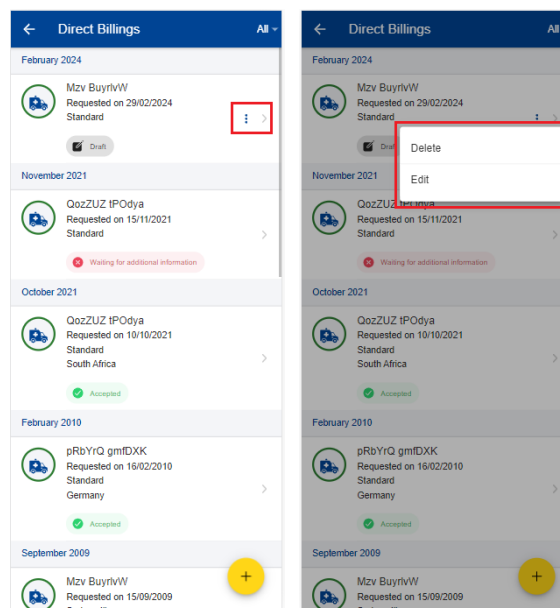
5.1. View direct billings

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.

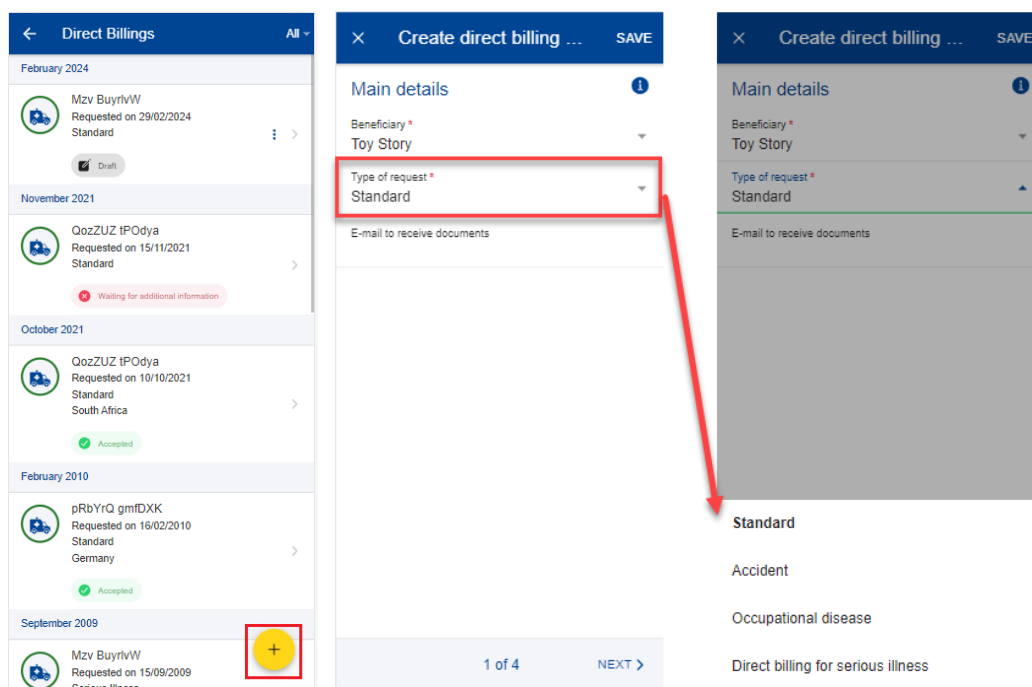
5.2. Create a new direct billing

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

Steps:

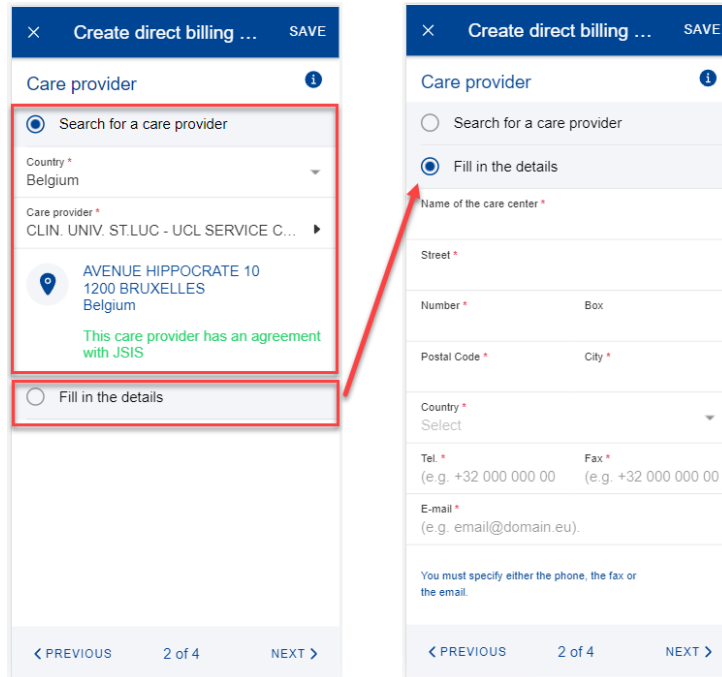
- 1) From the service list, select “Direct billings”
- 2) Tap on the  icon.
- 3) Step1: Select the beneficiary and choose request type*.

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



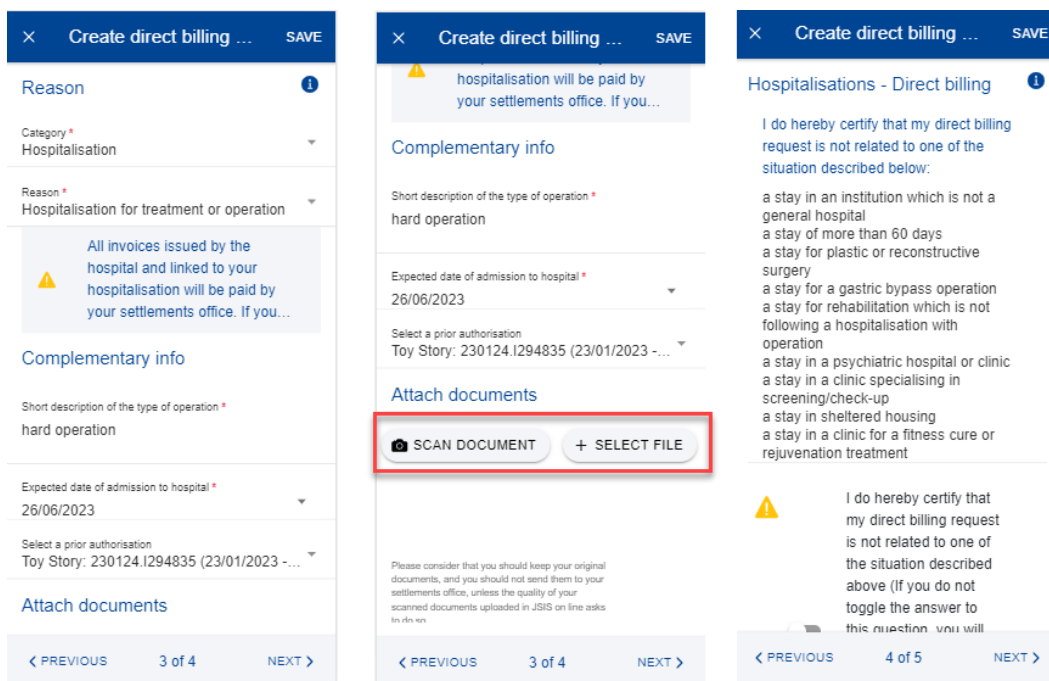
Note: You can Save in each step the data that you’ve already filled in. The direct billing will appear in your direct billings list in Draft status and you can go back and edit it at a later stage. You can also continue modifying your direct billings in the desktop application.

- 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 backoffice like any direct billings created in the JSIS desktop application. The direct billing will change its status after being processed.

5.3. Adding supplementary 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

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

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

6. ACCIDENT DECLARATIONS (JSIS)

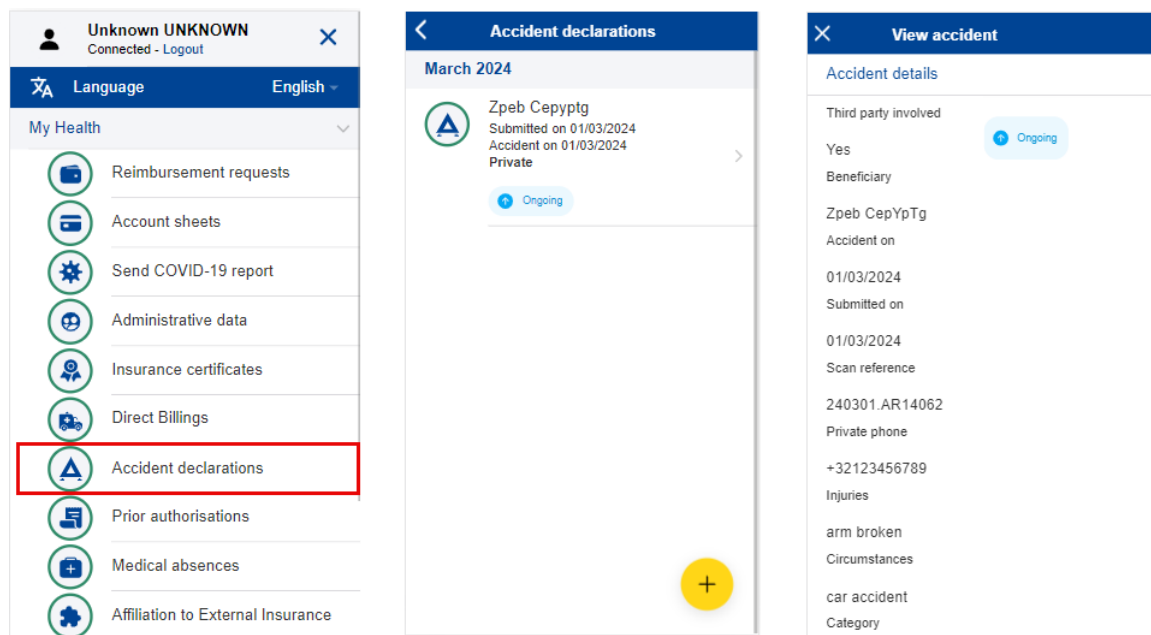
6.1. View Accident Declarations

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.

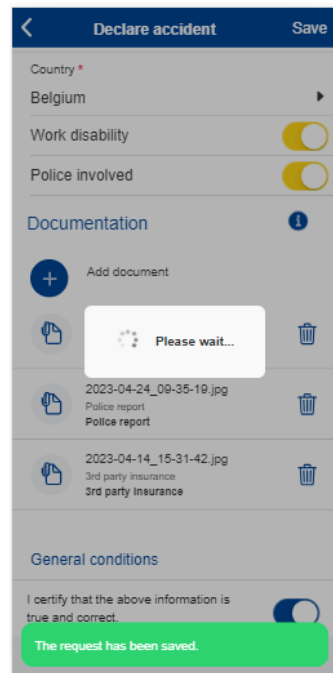
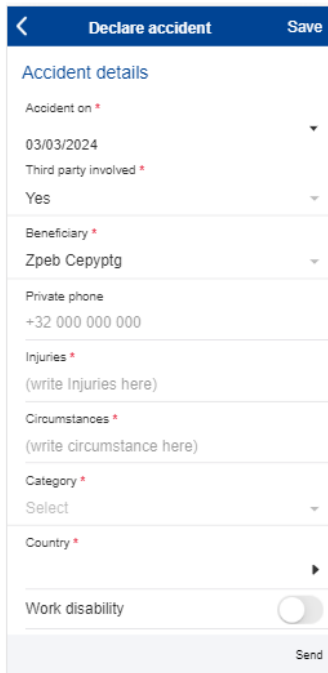
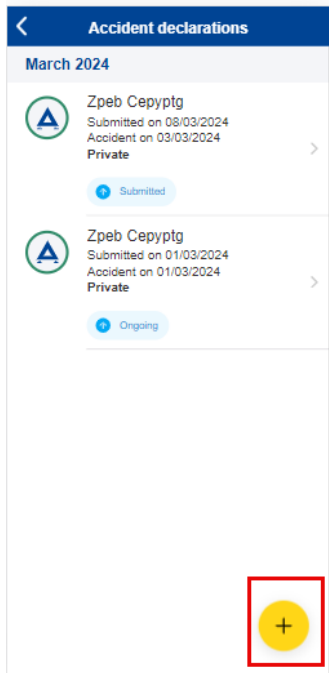
6.2. Create new accident declaration

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.



7. MEDICAL ABSENCES (JSIS)

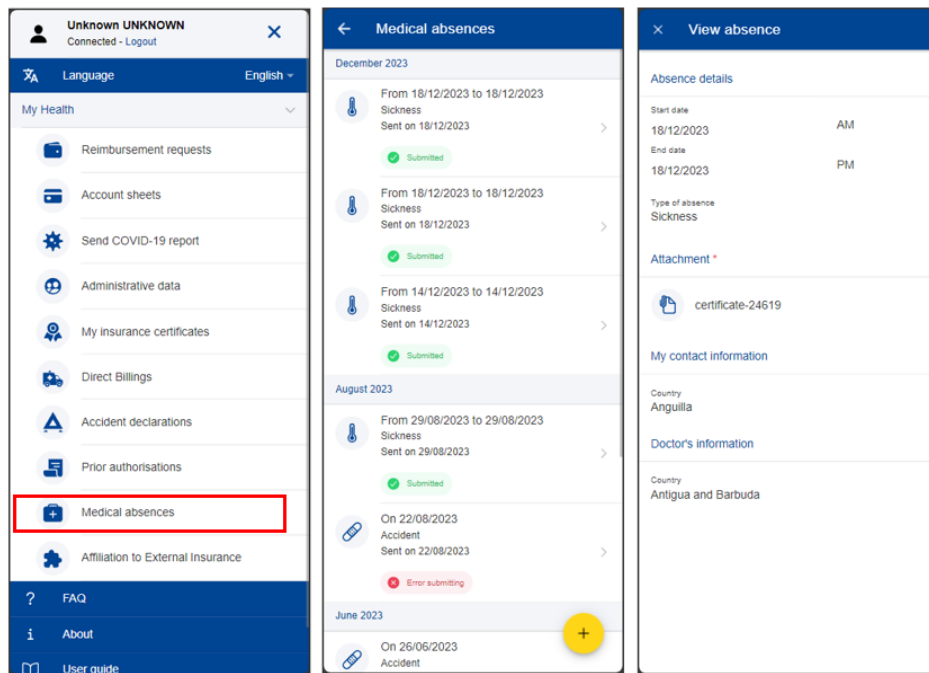
7.1. View Medical Absences

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.




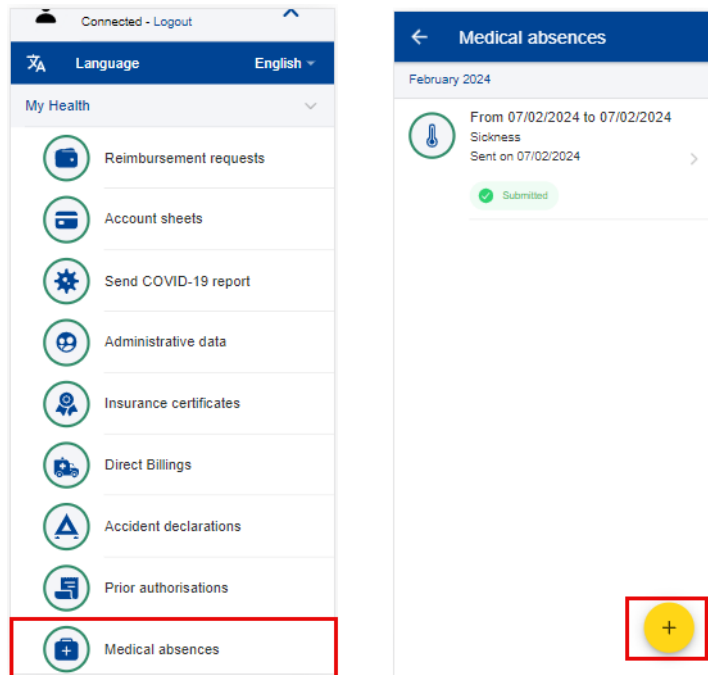
The floating action button (FAB)  will allow you to declare a new absence.

7.2. Declare Medical Absence

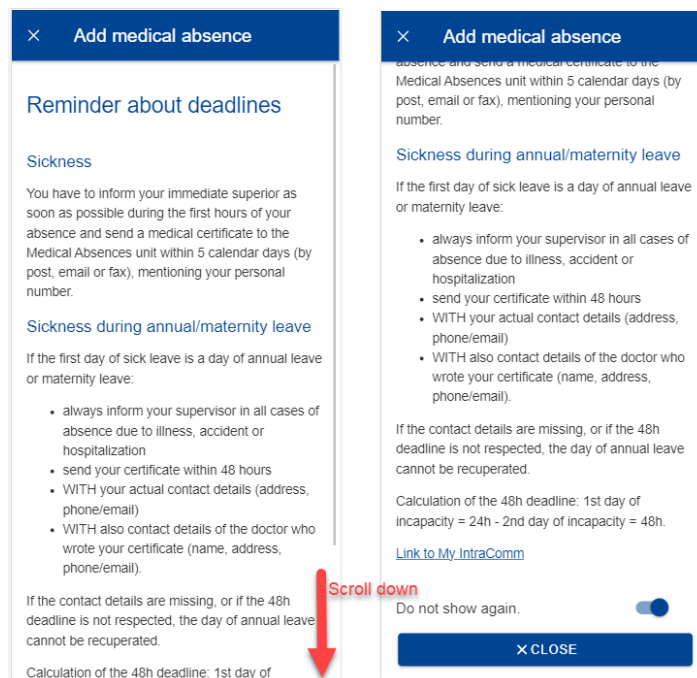
JSIS members can declare medical absences.

To submit a new absence, follow the steps:

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

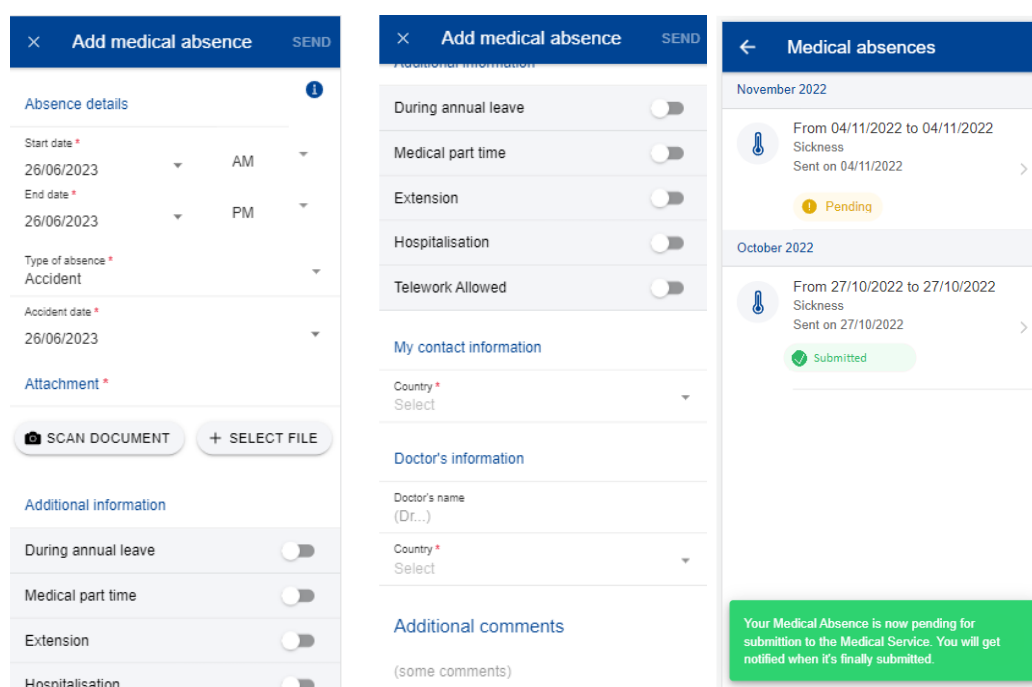


- 3) The App may display a reminder as to actual deadlines. If this is the case, close the reminder. By leaving the checkbox “Do not show again” checked, the App will not show this reminder again.
 Note: Depending on the screen size, users may have to scroll down to access the “Do not show again” option 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:

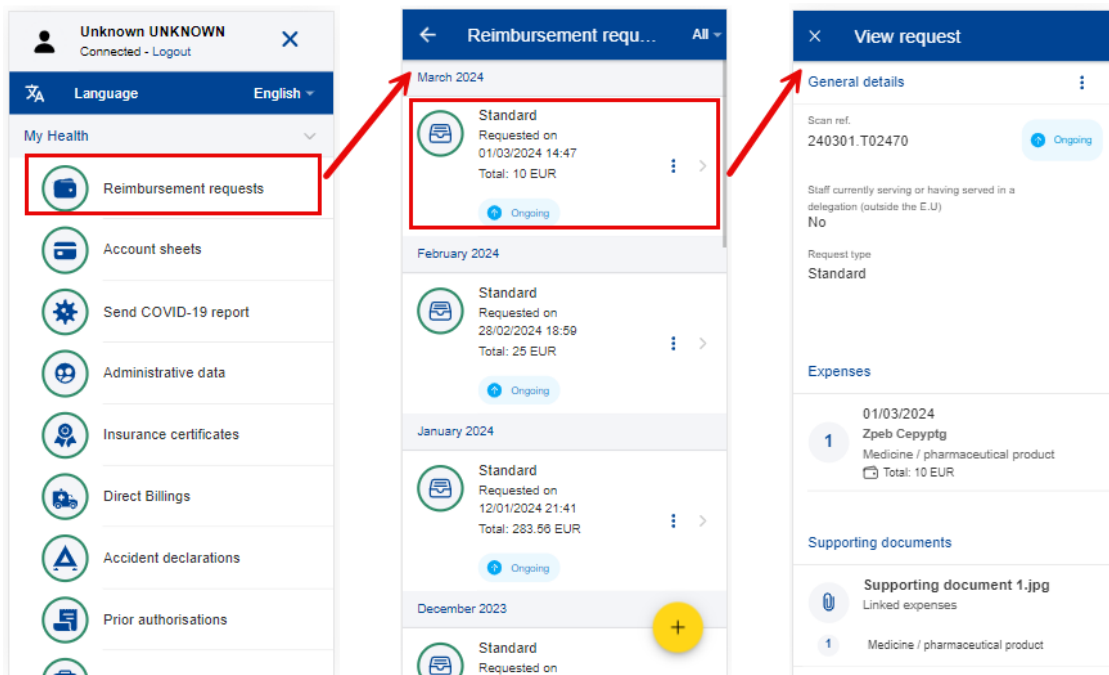
1. You are not obliged to send medical certificates from MyPMO, you can follow the procedure available in Staff Matters Portal.
2. Your line manager will not be informed when your medical absence was submitted.
3. Once submitted, medical absences may not be removed or edited. When needed, you can follow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

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

8. REIMBURSEMENT REQUESTS (JSIS)

8.1. 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.



8.2. 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:

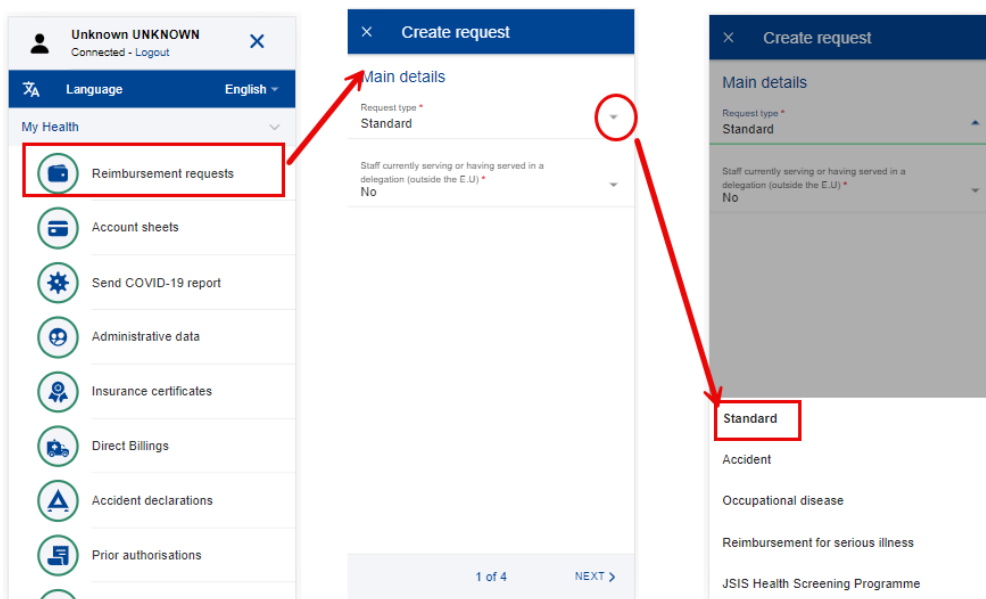
- Standard reimbursement
- Accident reimbursement
- Occupational disease
- Serious illness
- JSIS Health Screening Programme
- Medical services
 - Spectacles for work
 - Annual medical check-up


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.

8.2.1. Create a standard reimbursement request

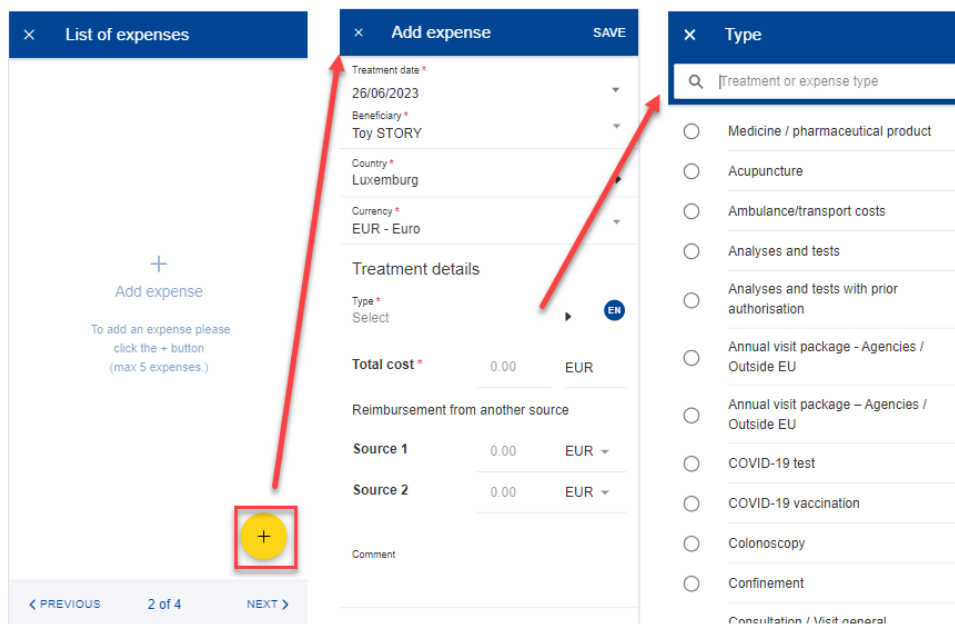
Standard reimbursement steps:

- 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”

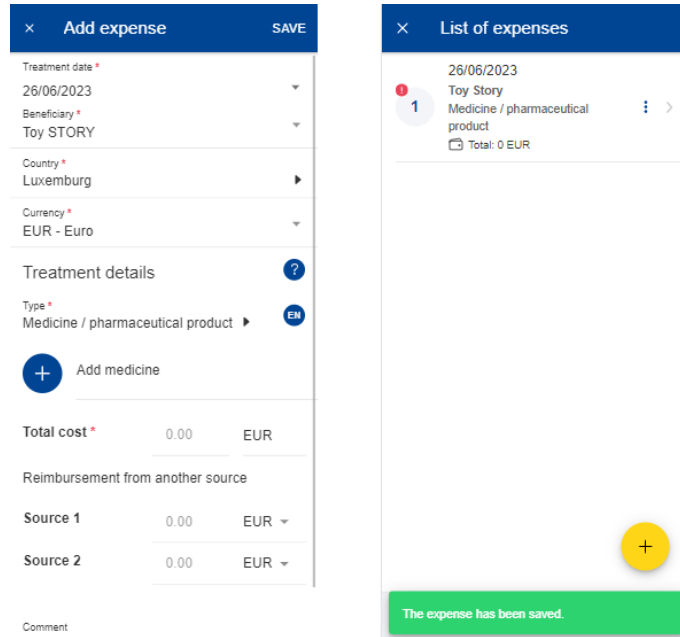




- 5) System displays Step2 - List of expenses.
- 6) Tap on the  icon to add a new expense. You are allowed to add up to five expenses. (below left)
- 7) Select the Treatment date. The list of beneficiaries will be filled in based on the selected date and the type of request. Only the beneficiaries covered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



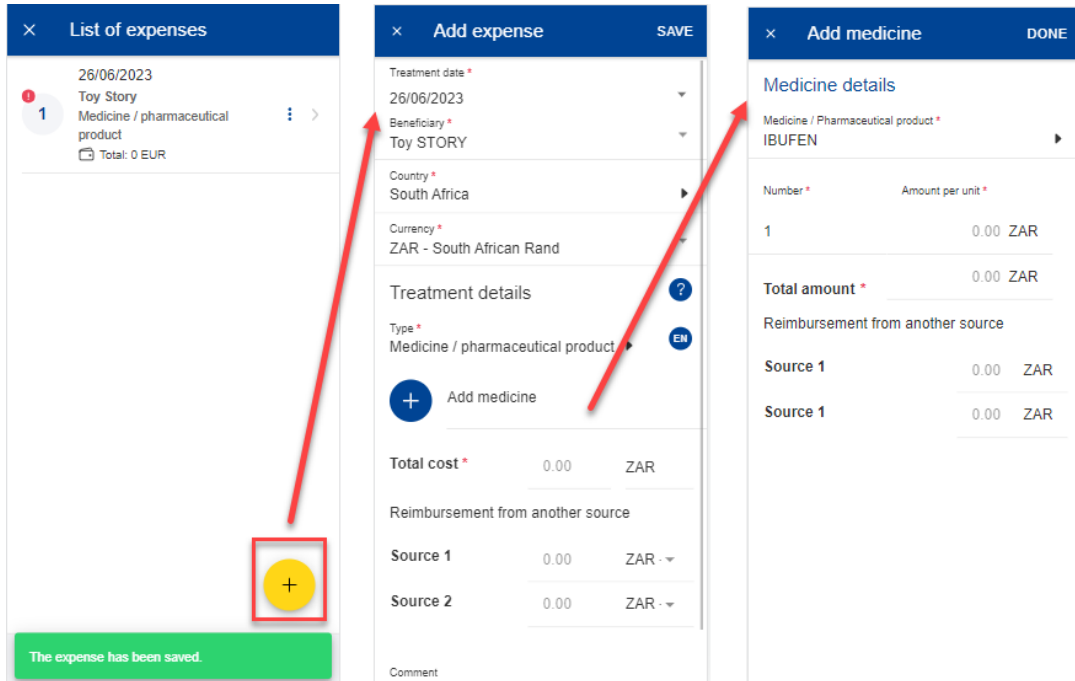
- 11) Select the Country.
- 12) Change the Currency, if needed. The default currency is the currency of the country from the previous step.
- 13) Add your costs and the reimbursement received from other sources and tap "Save". (below left)



- 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.

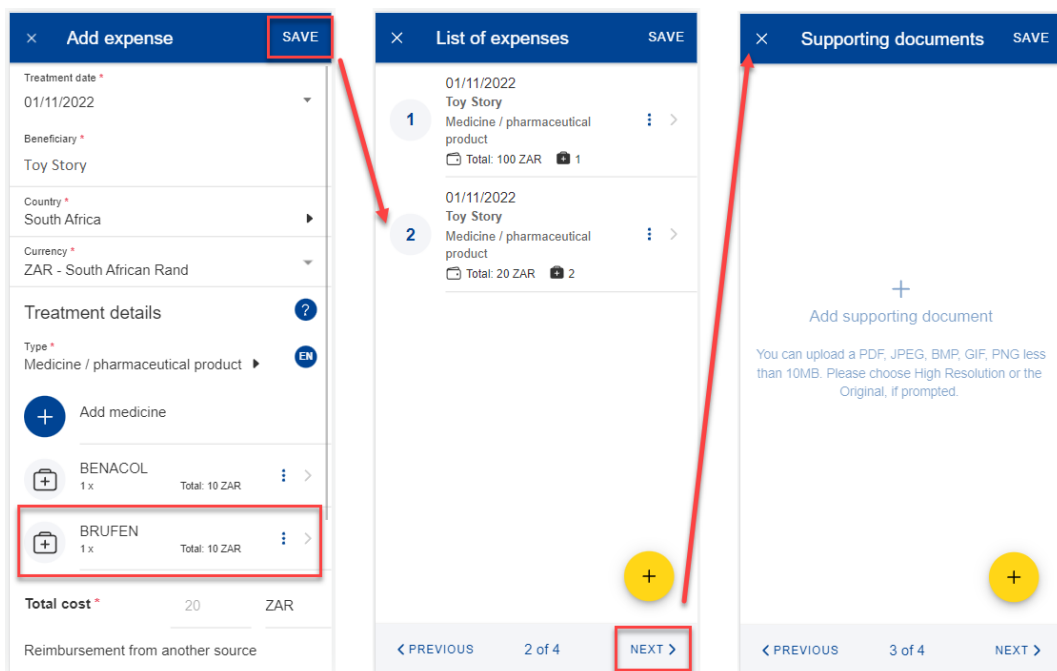



19) Your list of medicines will appear in the expense screen. If there are any errors, you will see a red exclamation icon on the medicine name. Please correct that in order to move forward and tap on Save when you're done (below left)

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)

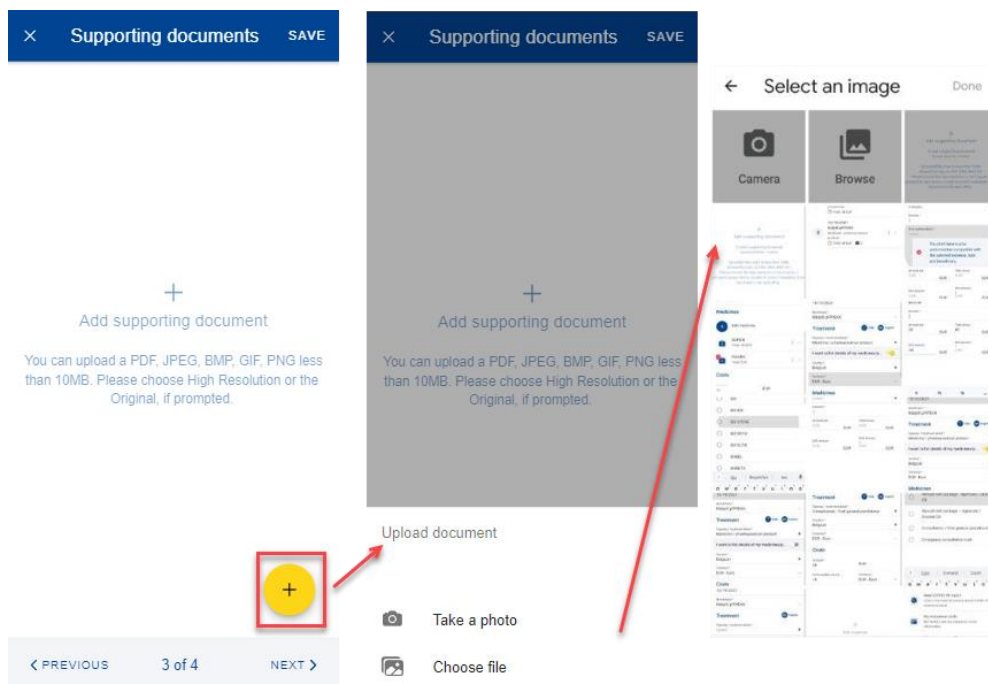


23) Step 3 – Supporting documents. Tap on the  icon to add a new supporting document. (below left)

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.

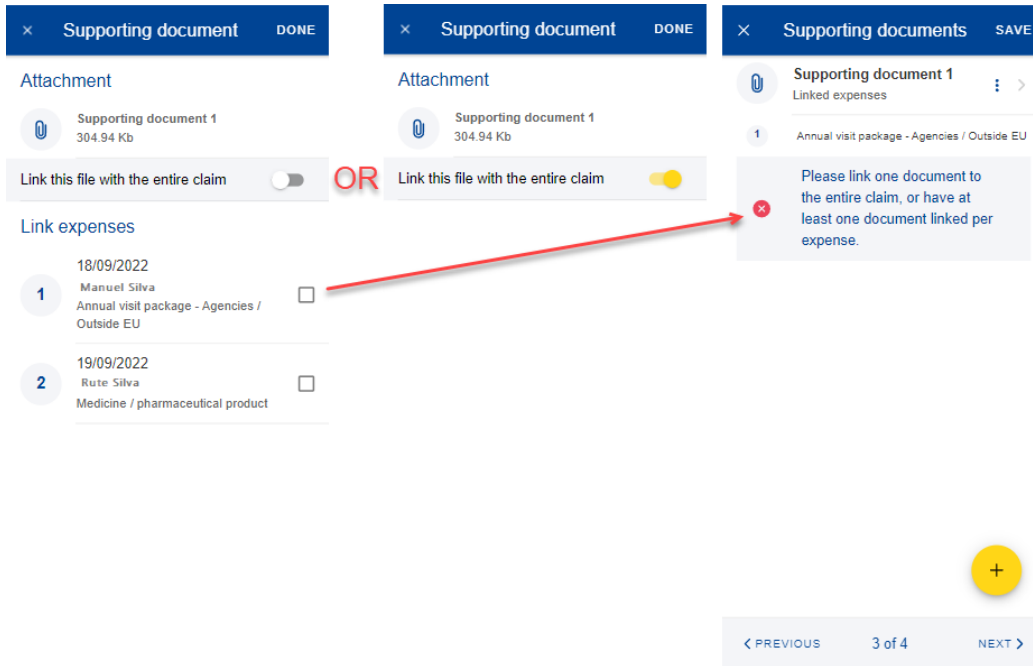
24) The system will prompt you to take a photo or choose a file from your mobile. (below middle)

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)

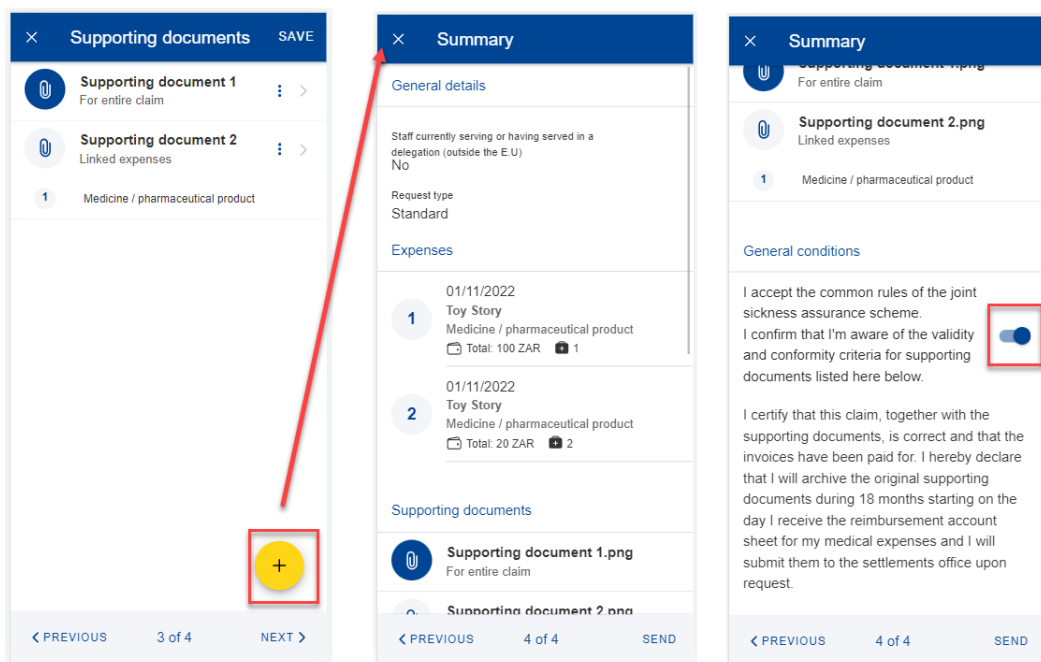


28) Repeat the process above and when you have finished adding your supporting documents and linking them to the expense, tap Next. (below right)

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)

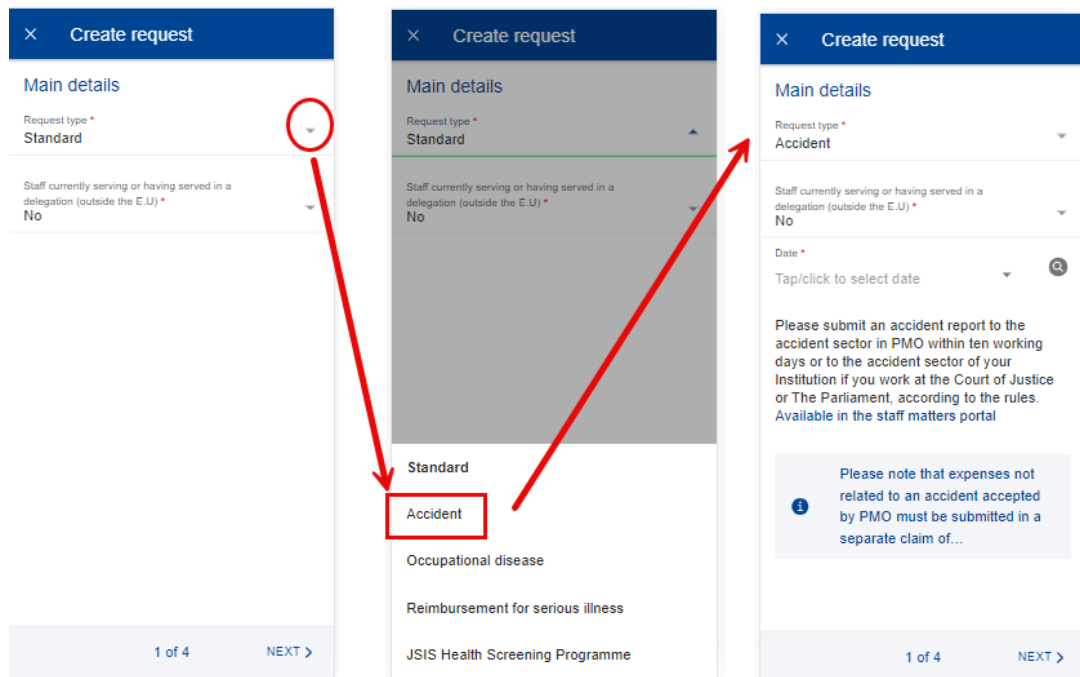


32) You can retrieve your request in the list of reimbursements. If the request is in Draft status, you can tap to edit it, if the request has been submitted you can view the information as shown in section 8.1 View reimbursement


8.2.2. 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”



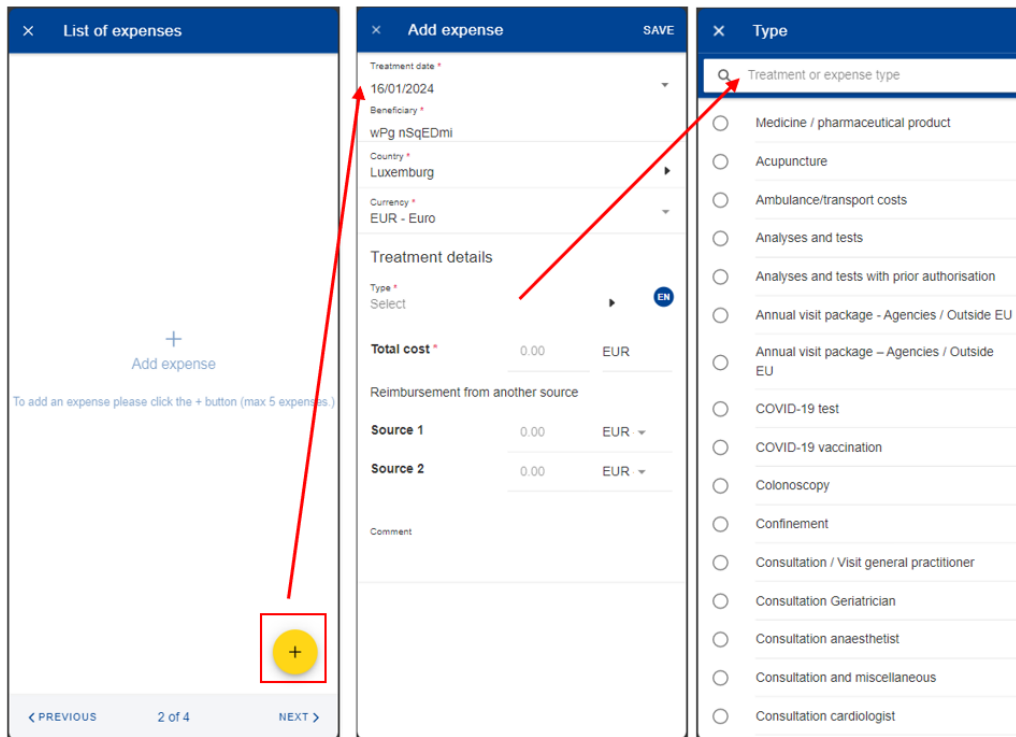
6) System displays Step2 - List of expenses.

- 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.

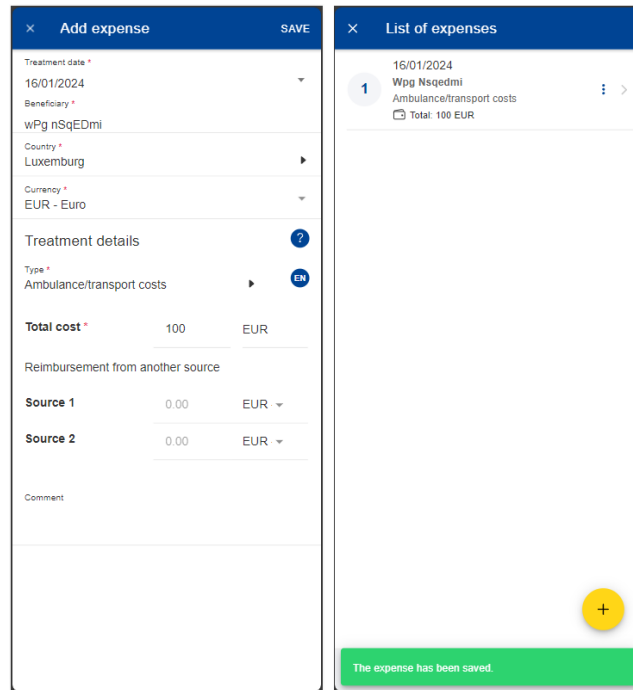
Note: You can choose to change the language of the Treatment detail by tapping on the language icon, just above the Treatment list. That will switch your list from English to French and vice versa.





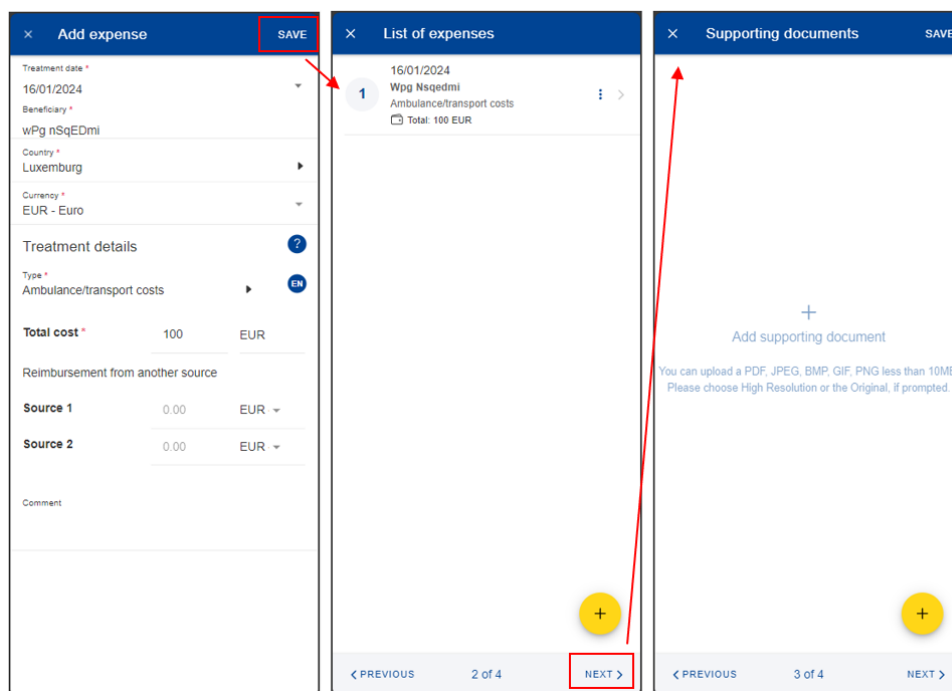
12) Select the Country, if needed


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)

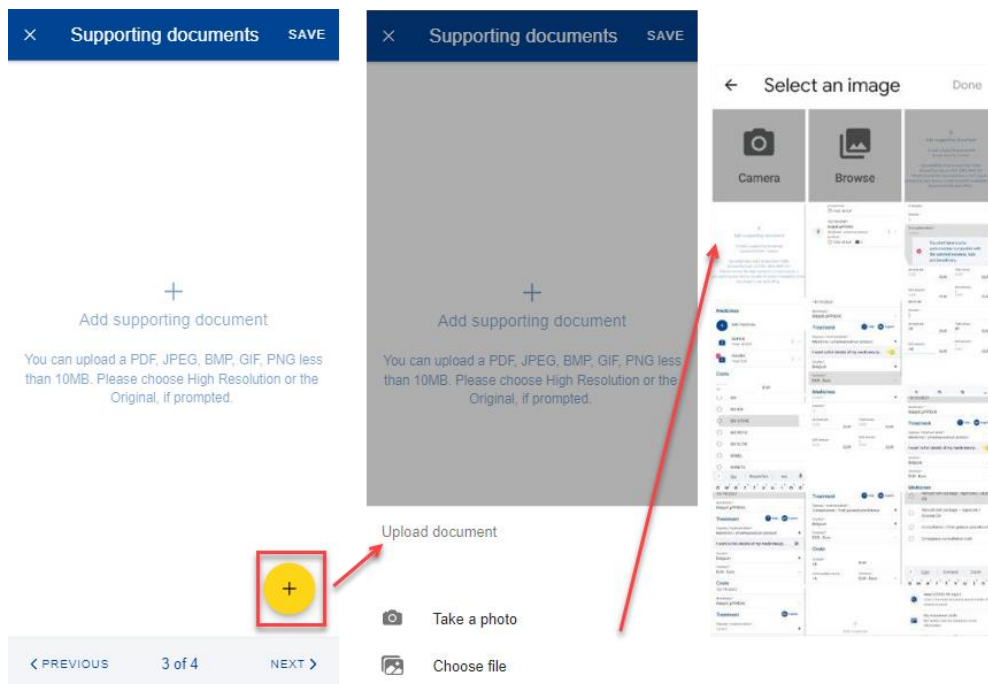


19) Step 3 – Supporting documents. Tap on the  icon to add a new supporting document. (below left)

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.

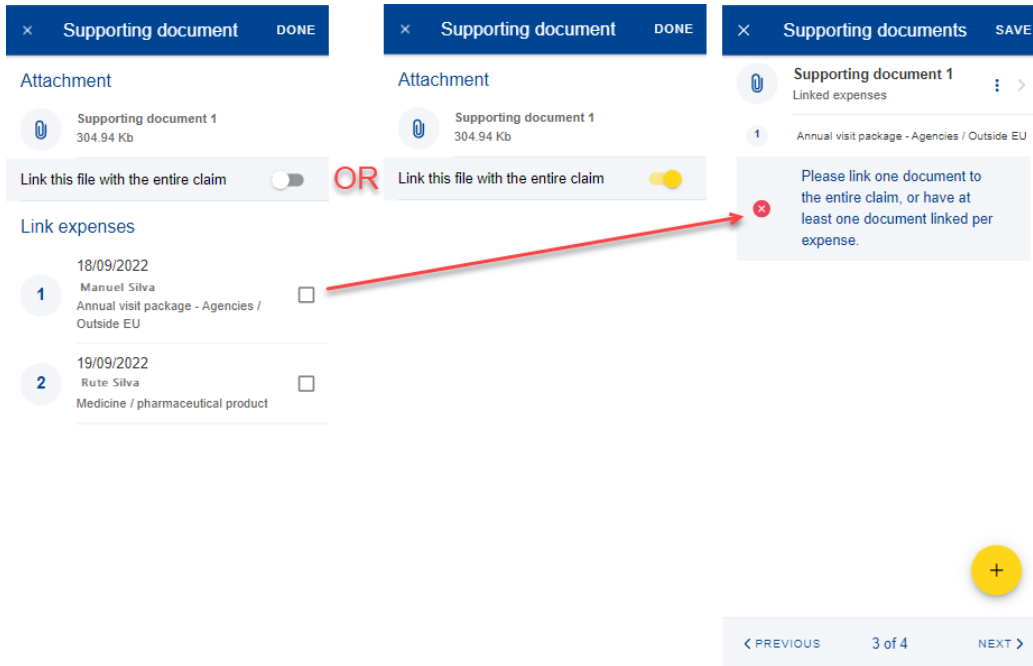
20) The system will prompt you to take a photo or choose a file from your mobile. (below middle)

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)

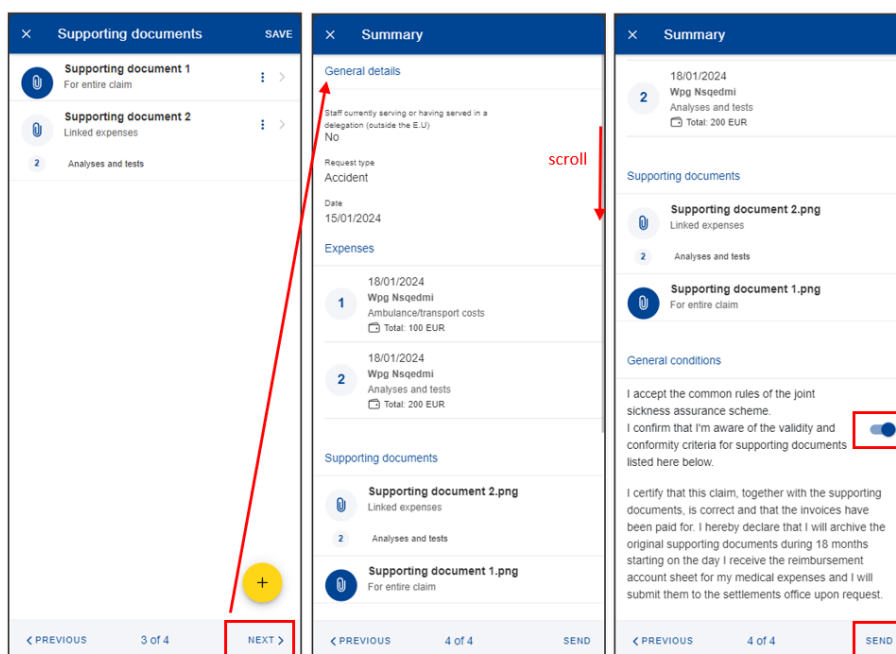


24) Repeat the process above and when you have finished adding your supporting documents and linking them to the expense, tap Next. (below right)

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)

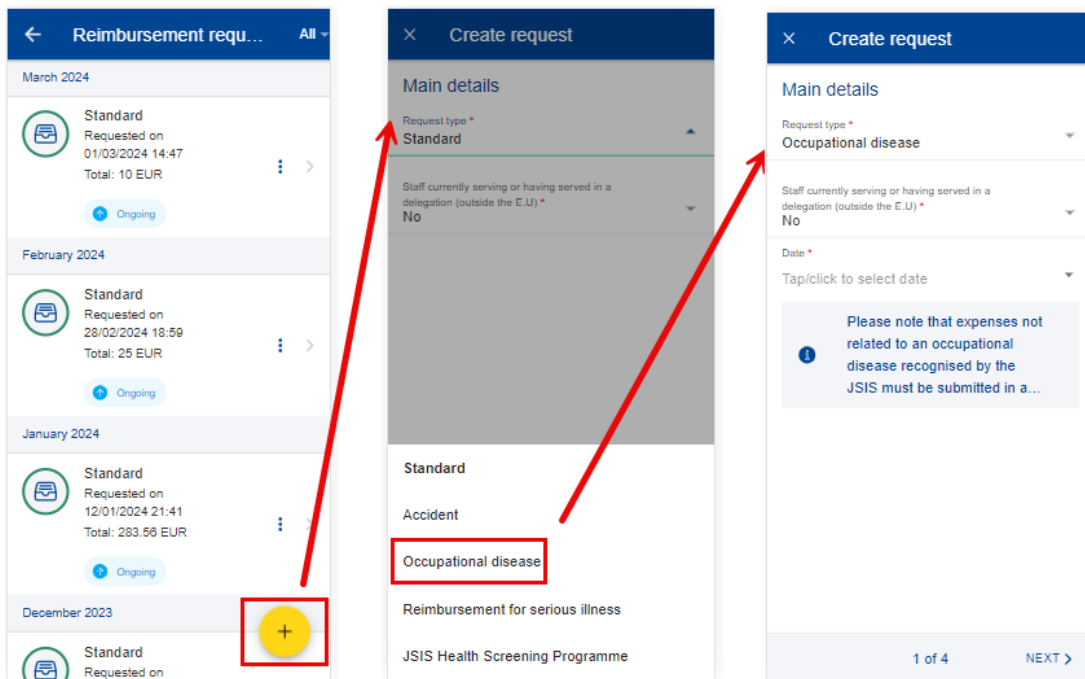



- 28) You can retrieve your request in the list of reimbursements. If the request is in Draft status, you can tap to edit it, if the request has been submitted you can view the information as shown in section 8.1 View reimbursement

8.2.3. Create an occupational disease reimbursement request

Occupational disease reimbursement steps:

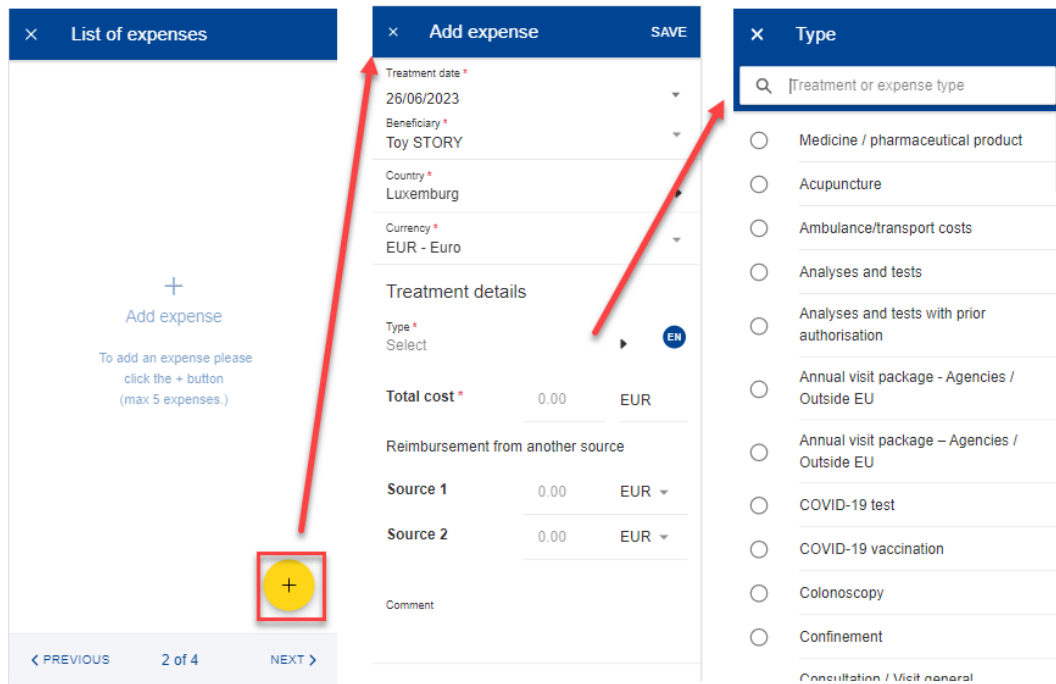
- 1) From the service list, select “Reimbursement requests”
- 2) Tap on the  icon to add a new reimbursement request. (below left)
- 3) Step1: Change the delegation information if needed. By default, the Delegation field is set to “No”.
- 4) Choose “Occupational disease” request type from list.
- 5)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



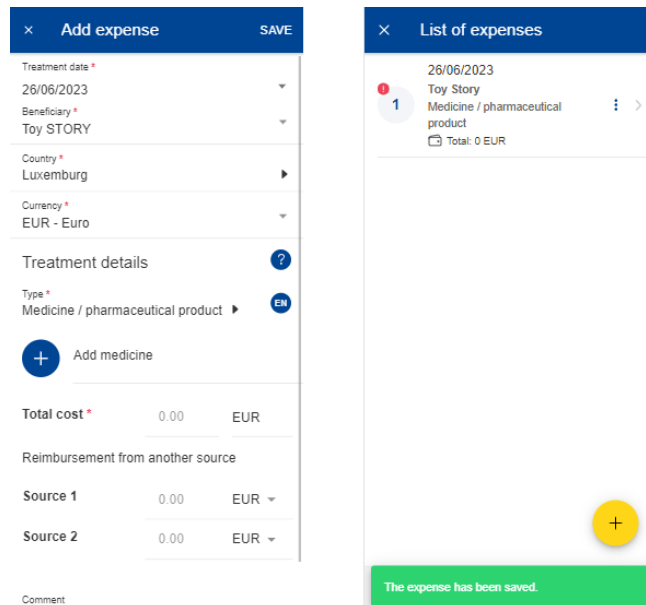
- 6) System displays Step2 - List of expenses.
- 7) Tap on the  icon to add a new expense. You are allowed to add up to five expenses. (below left)
- 8) Select the Treatment date. The list of beneficiaries will be filled in based on the selected date and the type of request. Only the beneficiaries covered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



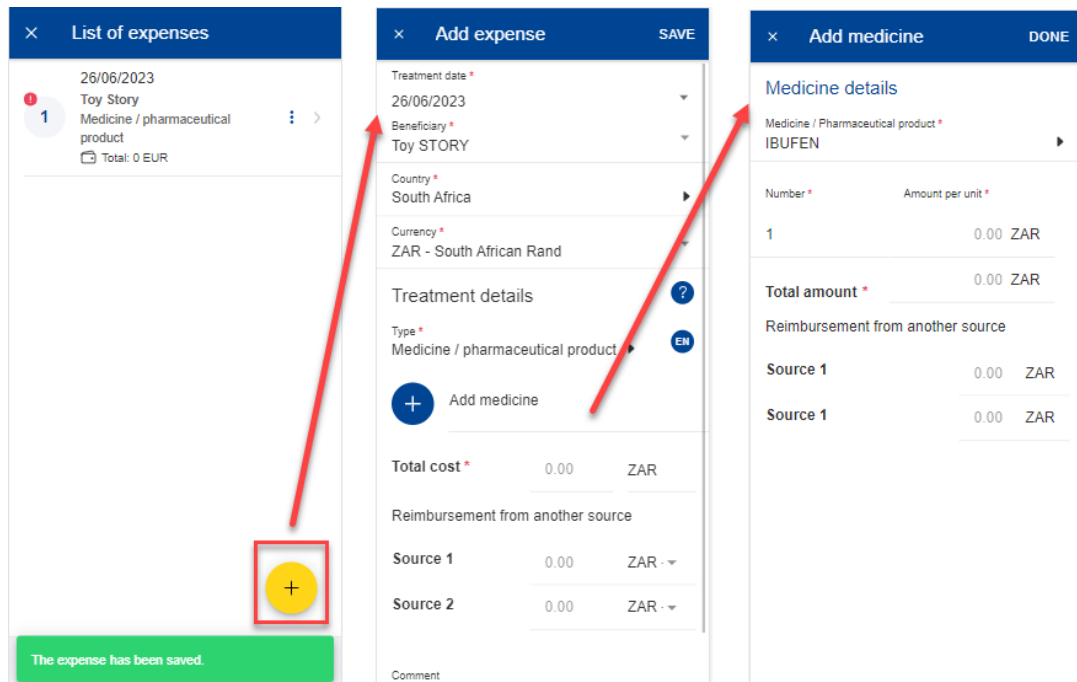
- 12) Select the Country, if needed. .
- 13) Change the Currency, if needed. The default currency is the currency of the country from the previous step.
- 14) Add your costs and the reimbursement received from other sources and tap "Save". (below left)




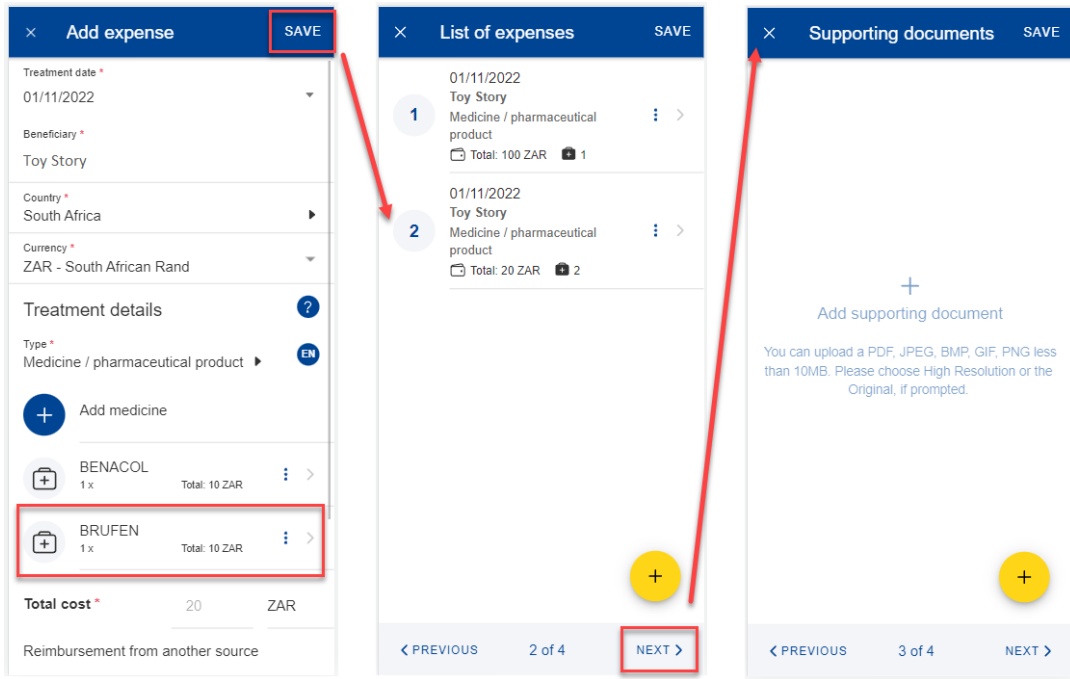
- 15) The system will save and add your expense to the list of expenses (below right)
- 16) You can choose to add a new expense in the list of expenses by tapping the  icon. (below left)
- 17) In order to add a medicine, you go through the same steps as before, but select “Medicine/Pharmaceutical product” 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)

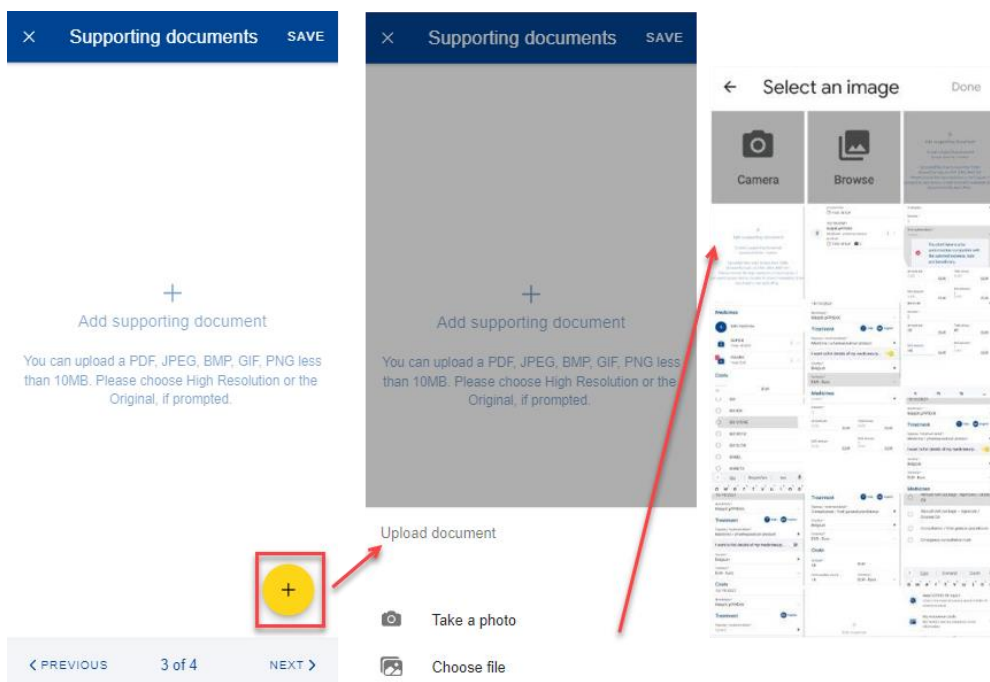


24) Step 3 – Supporting documents. Tap on the  icon to add a new supporting document. (below left)

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

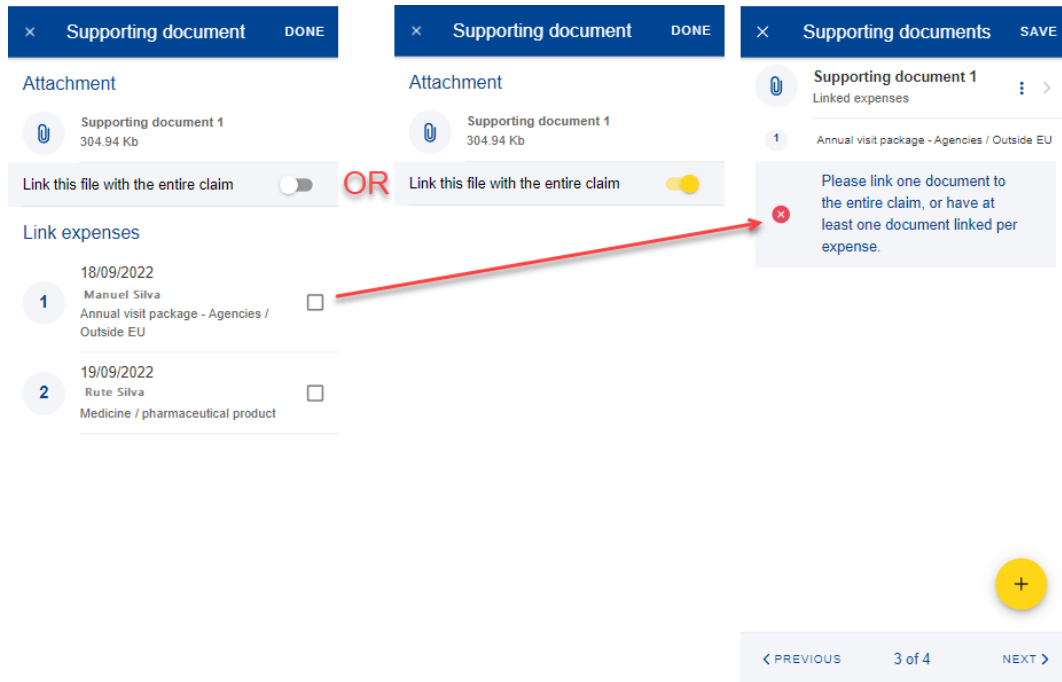
25) The system will prompt you to take a photo or choose a file from your mobile. (below middle)

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)

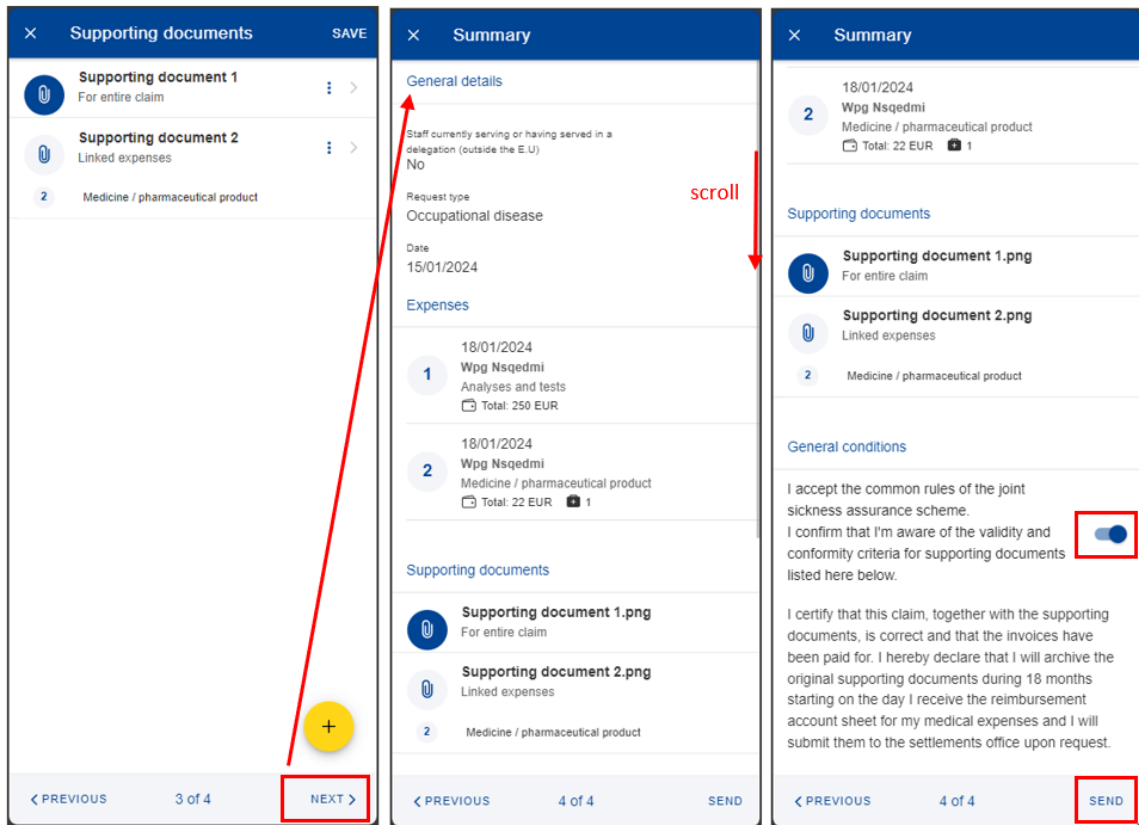


29) Repeat the process above and when you have finished adding your supporting documents and linking them to the expense, tap Next. (below right)

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)

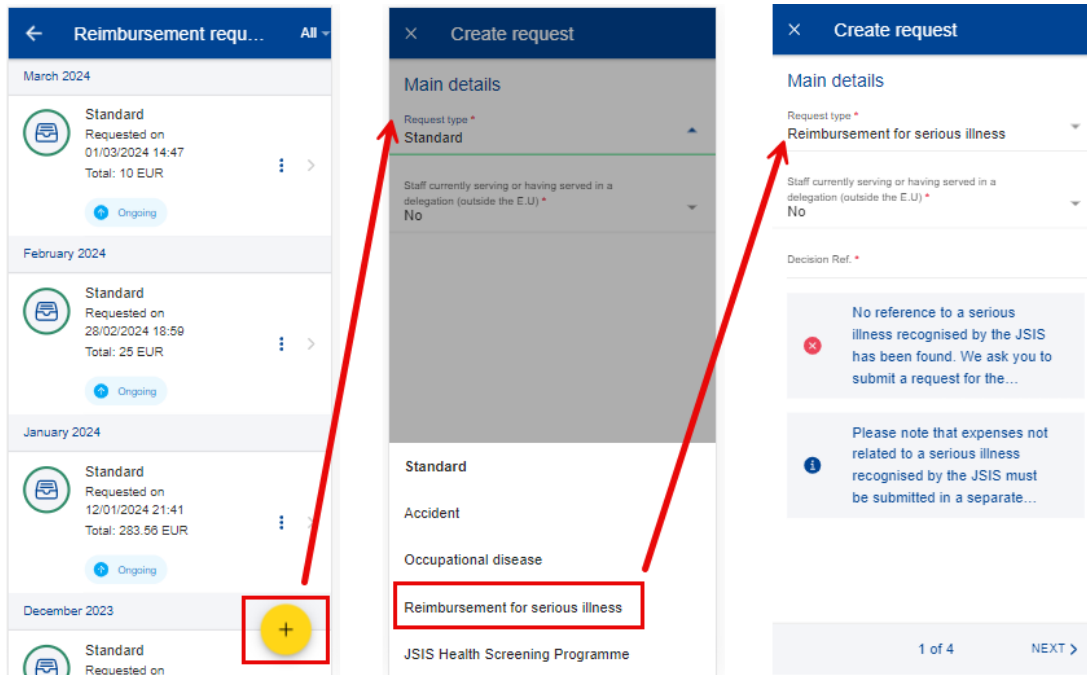


- 33) You can retrieve your request in the list of reimbursements. If the request is in Draft status, you can tap to edit it, if the request has been submitted you can view the information as shown in section 8.1 View reimbursement

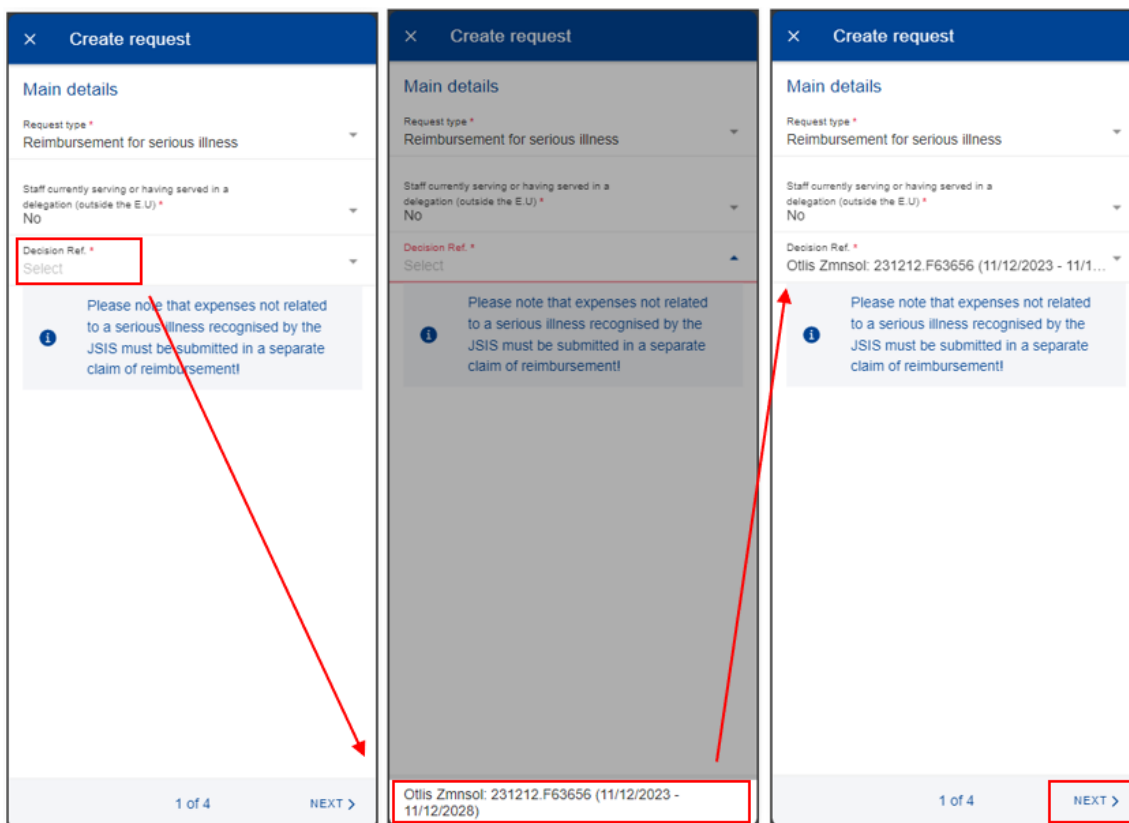
8.2.4. Create a serious illness reimbursement request

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”

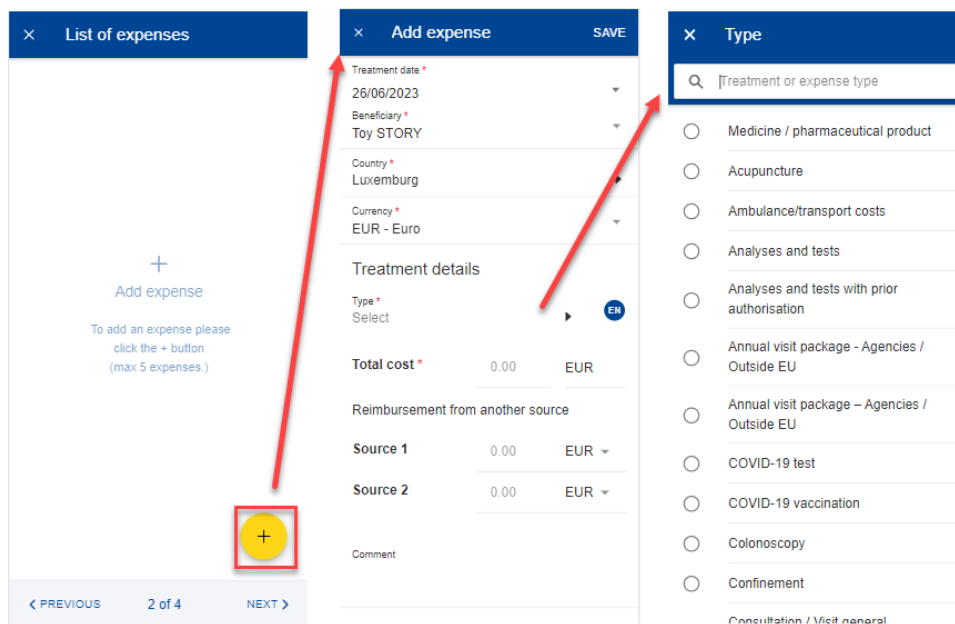


6) System displays Step2 - List of expenses.

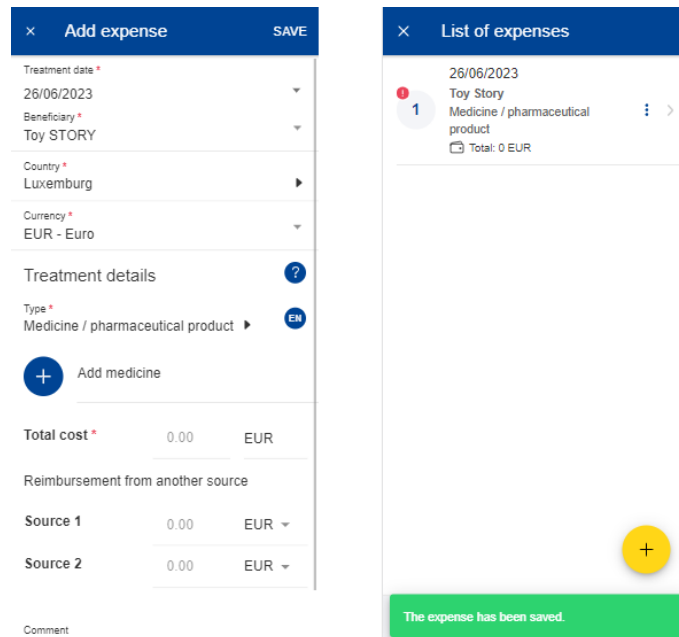
7) Tap on the  icon to add a new expense. You are allowed to add up to five expenses. The expense list is filtered according to the serious illness. (below left)



- 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.



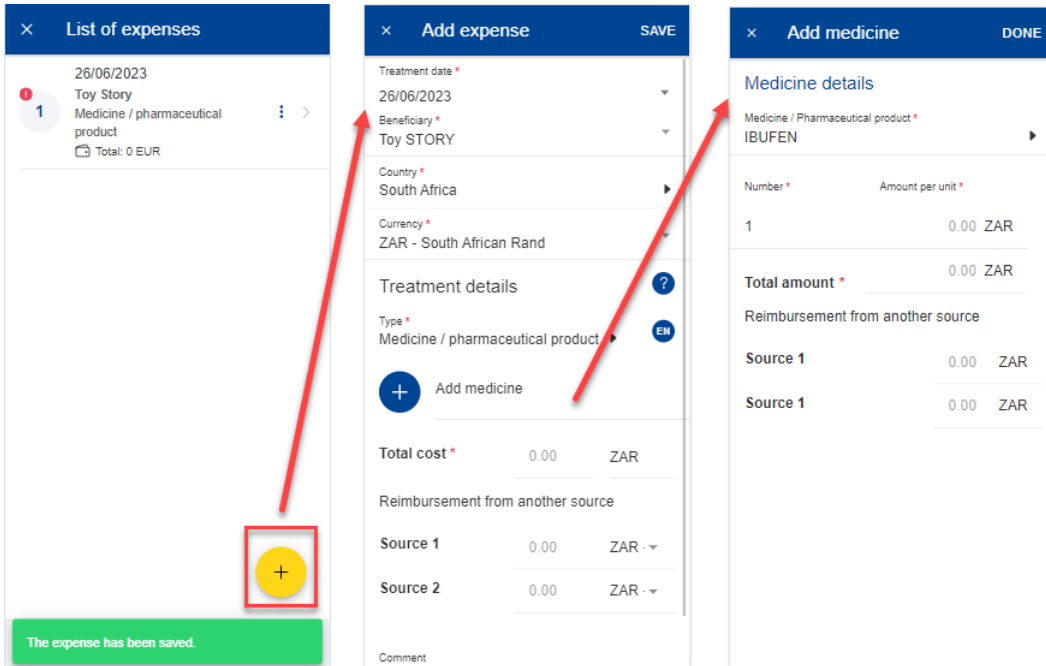
- 12) Select the Country.
- 13) Change the Currency, if needed. The default currency is the currency of the country from the previous step.
- 14) Add your costs and the reimbursement received from other sources and tap “Save”. (below left)



- 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.

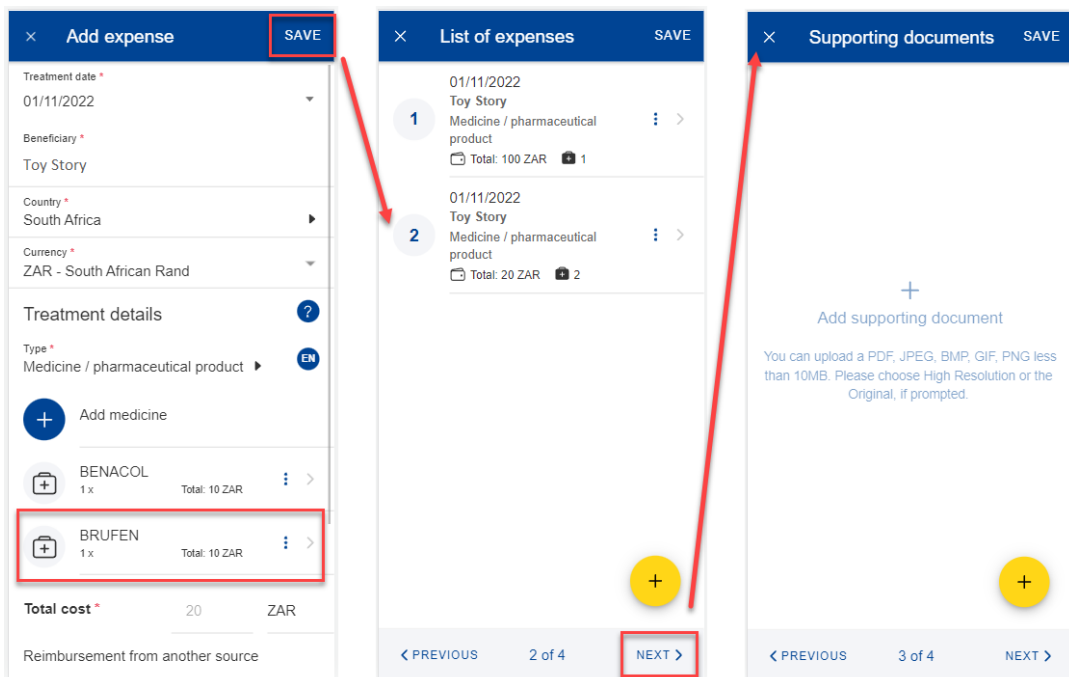



20) Your list of medicines will appear in the expense screen. If there are any errors, you will see a red exclamation icon on the medicine name. Please correct that in order to move forward and tap on Save when you're done (below left)

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)

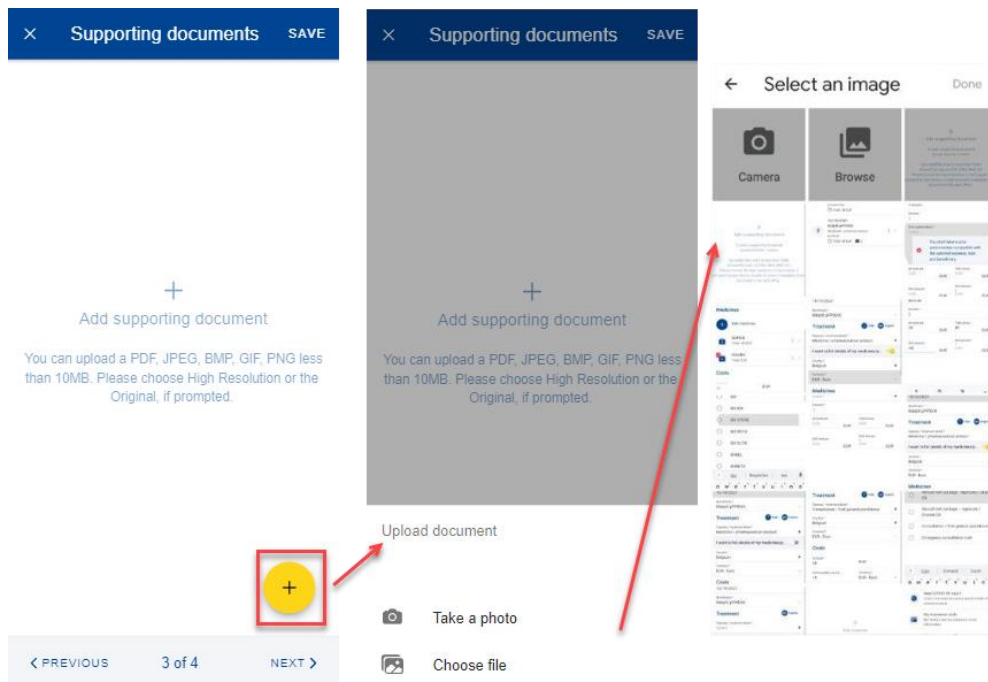


24) Step 3 – Supporting documents. Tap on the  icon to add a new supporting document. (below left)

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.

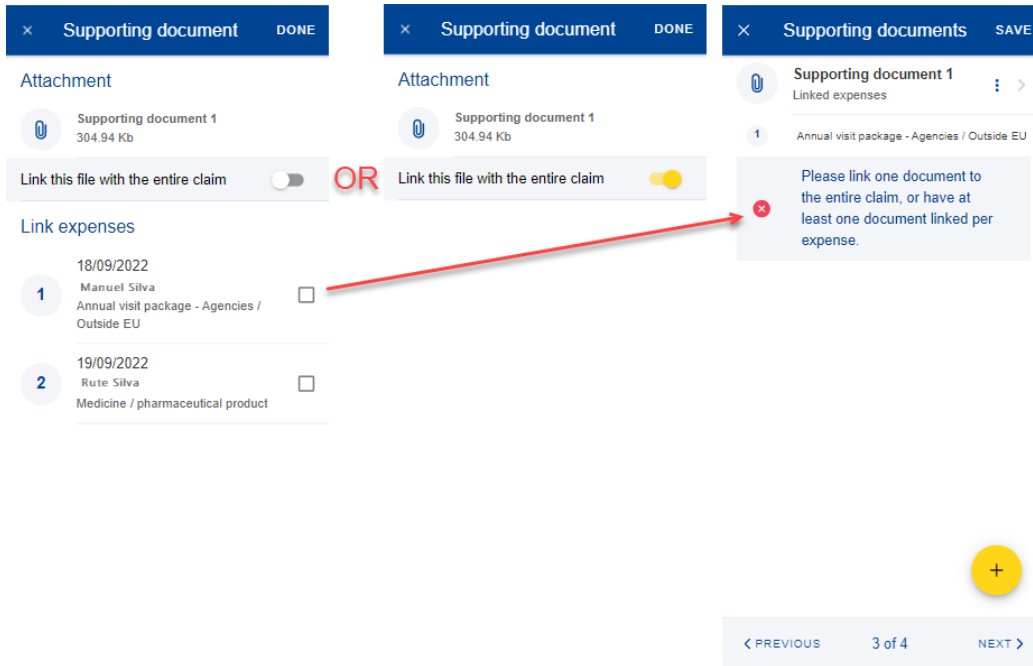
25) The system will prompt you to take a photo or choose a file from your mobile. (below middle)

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)

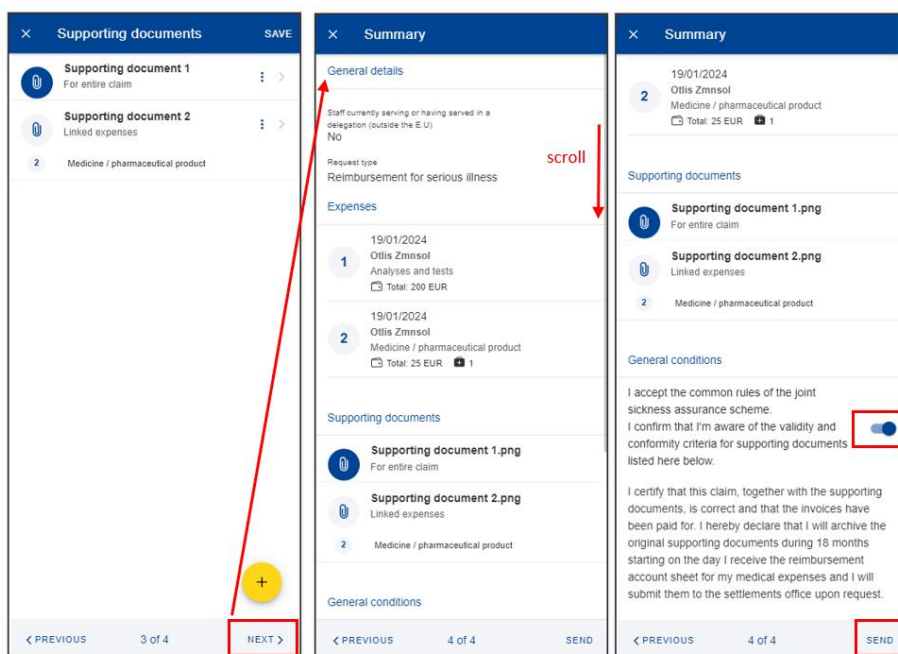


29) Repeat the process above and when you have finished adding your supporting documents and linking them to the expense, tap Next. (below right)

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)

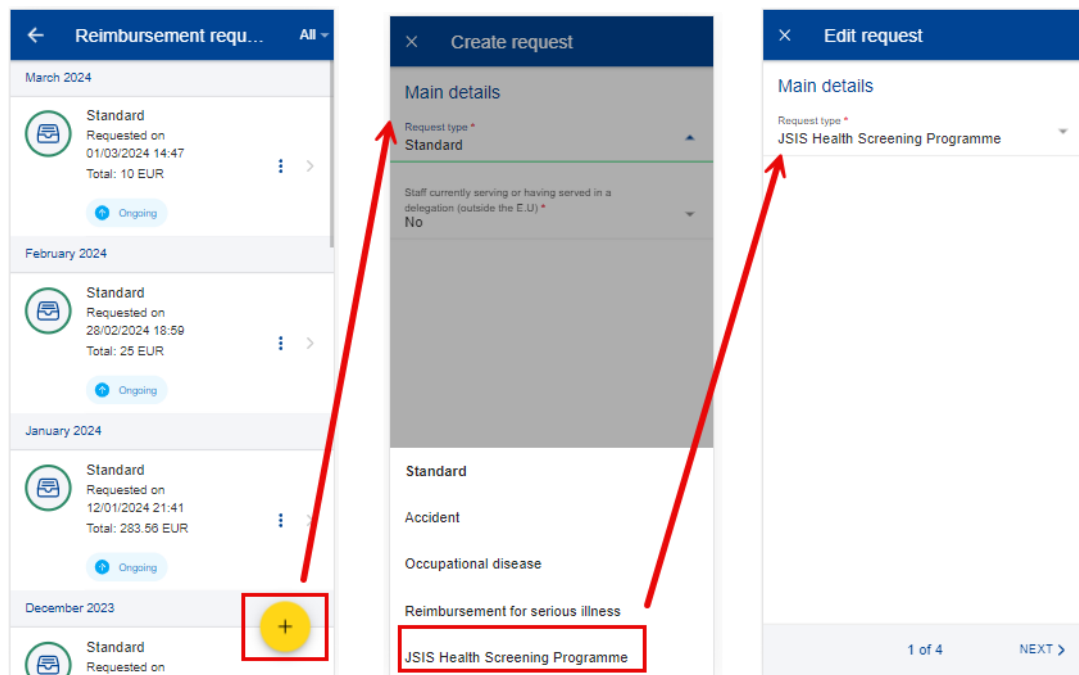


- 33) You can retrieve your request in the list of reimbursements. If the request is in Draft status, you can tap to edit it, if the request has been submitted you can view the information as shown in section 8.1 View reimbursement

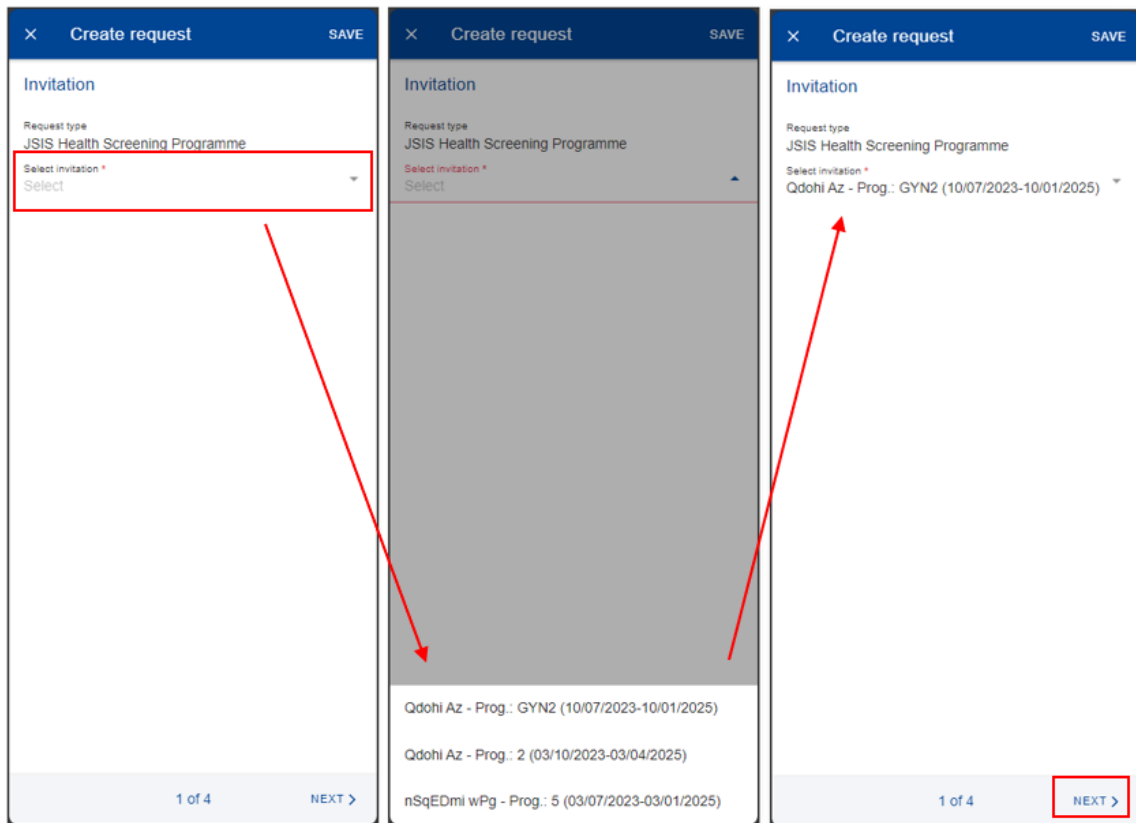
8.2.5. Create a JSIS Health Screening Programme reimbursement request

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”



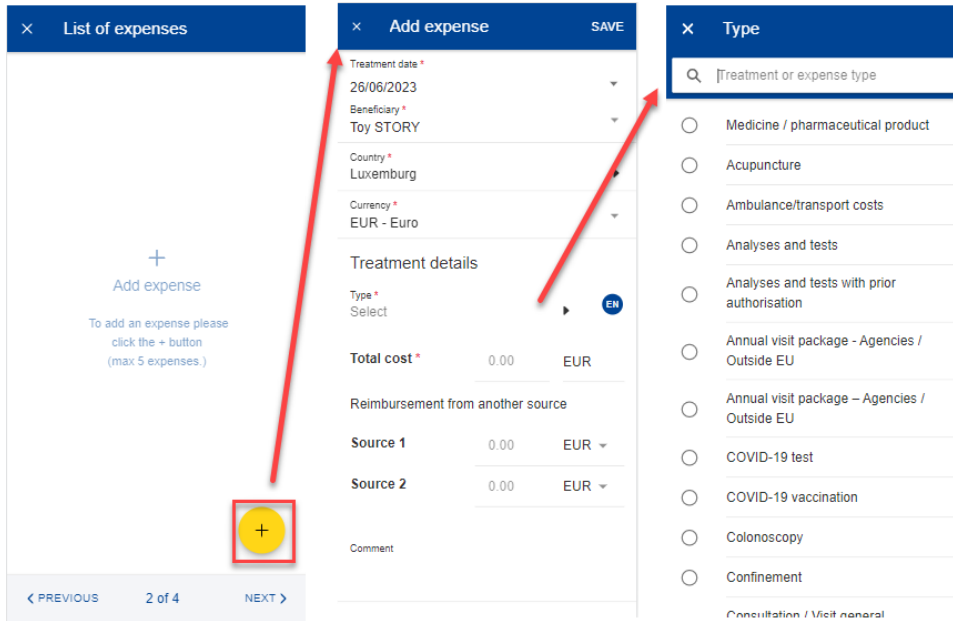
- 5) System displays a field to choose the invitation. Tap on invitation and select the related invitation. There is a pre-requisite to have a decision registered in JSIS.



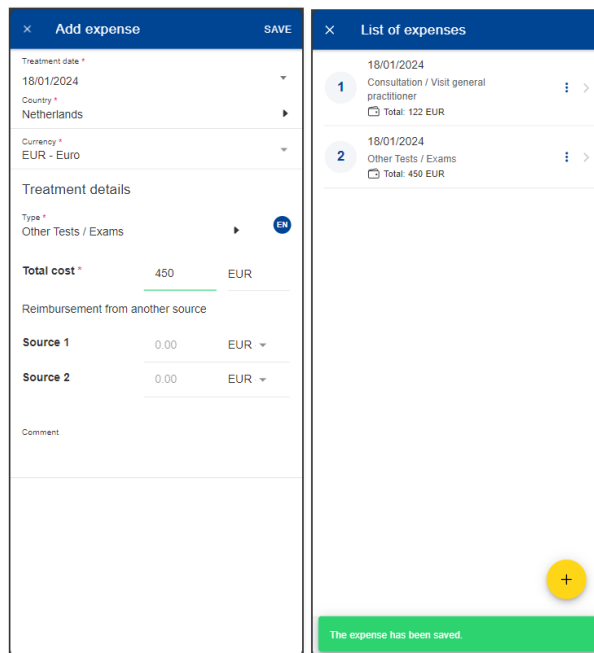
6) System displays Step2 - List of expenses.


- 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.

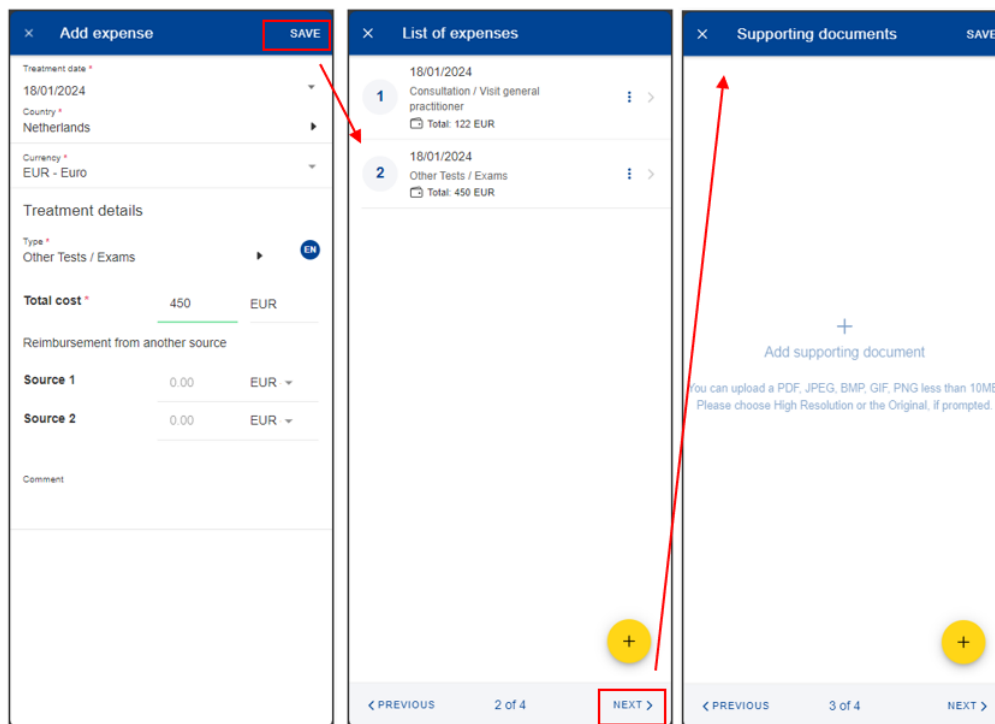



- 11) Select the Country.
- 12) Change the Currency, if needed. The default currency is the currency of the country from the previous step.
- 13) Add your costs and the reimbursement received from other sources and tap “Save”. (below left)



- 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)

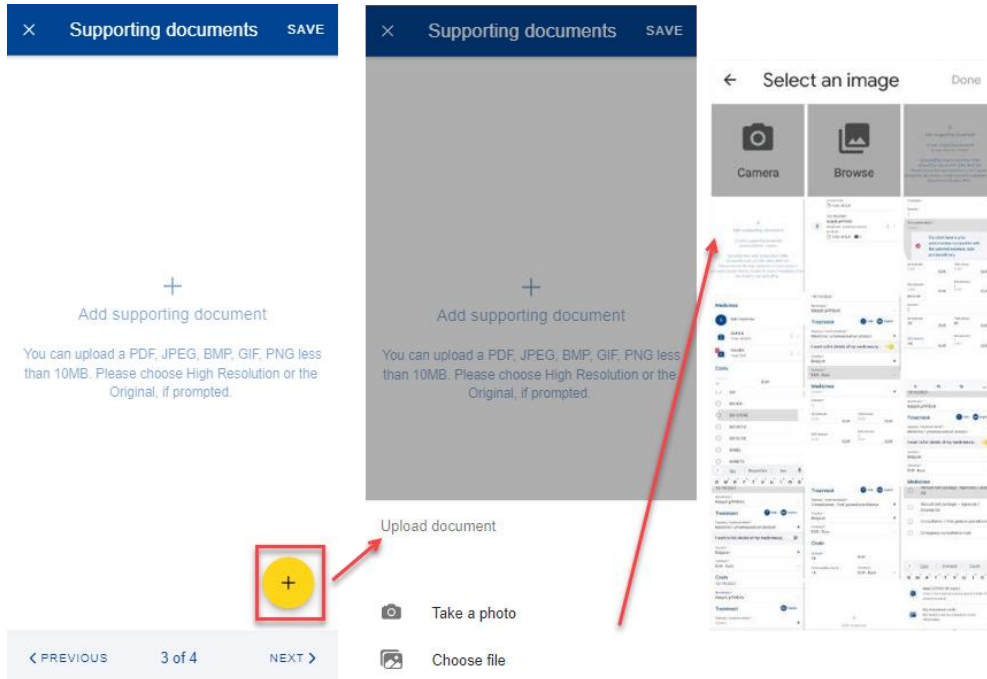
- 17) You can still edit an expense by tapping on it or delete it by tapping on the three dots icon  next to the request and choosing Delete. Tap on Next to move to the next step. (below middle)
- 18) The system will move to Step 3 – Supporting documents (below right)



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

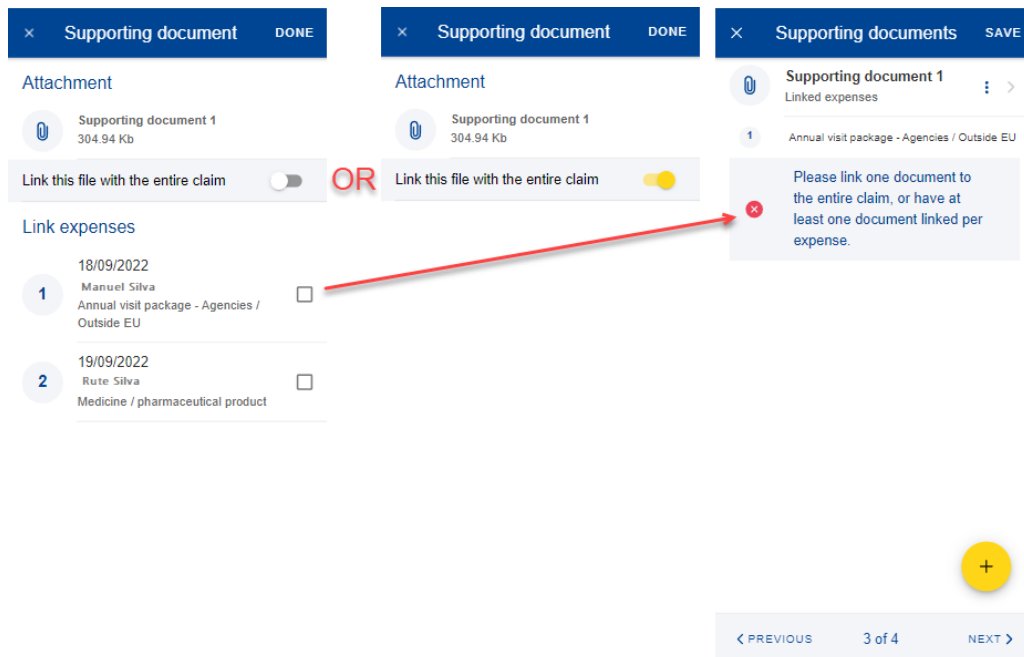
Note: Please make sure to choose High resolution or the Original for your uploaded documents when promoted by your mobile, otherwise the documents may not be readable in the back office following the rendition to PDF.

- 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)



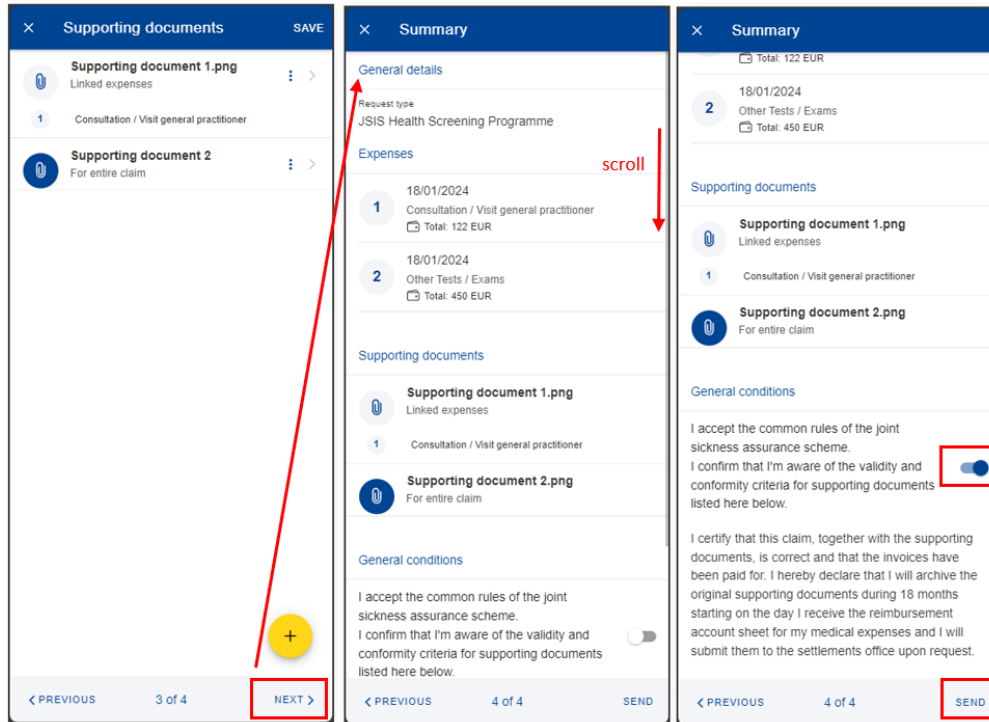
22) Once your document is uploaded, you need to link it to an expense (below left) or to the entire claim, if relevant (below middle). Tap Done to return to the list of supporting documents.

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)

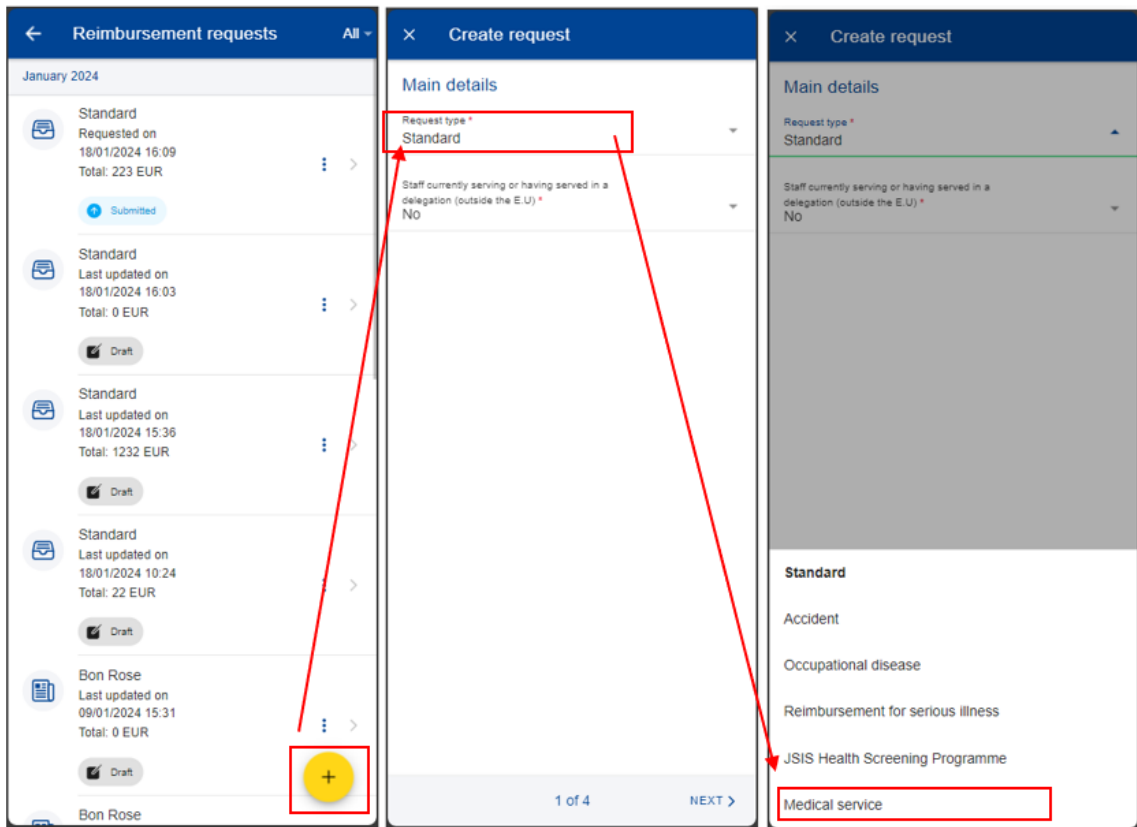


- 28) You can retrieve your request in the list of reimbursements. If the request is in Draft status, you can tap to edit it, if the request has been submitted you can view the information as shown in section 8.1 View reimbursement

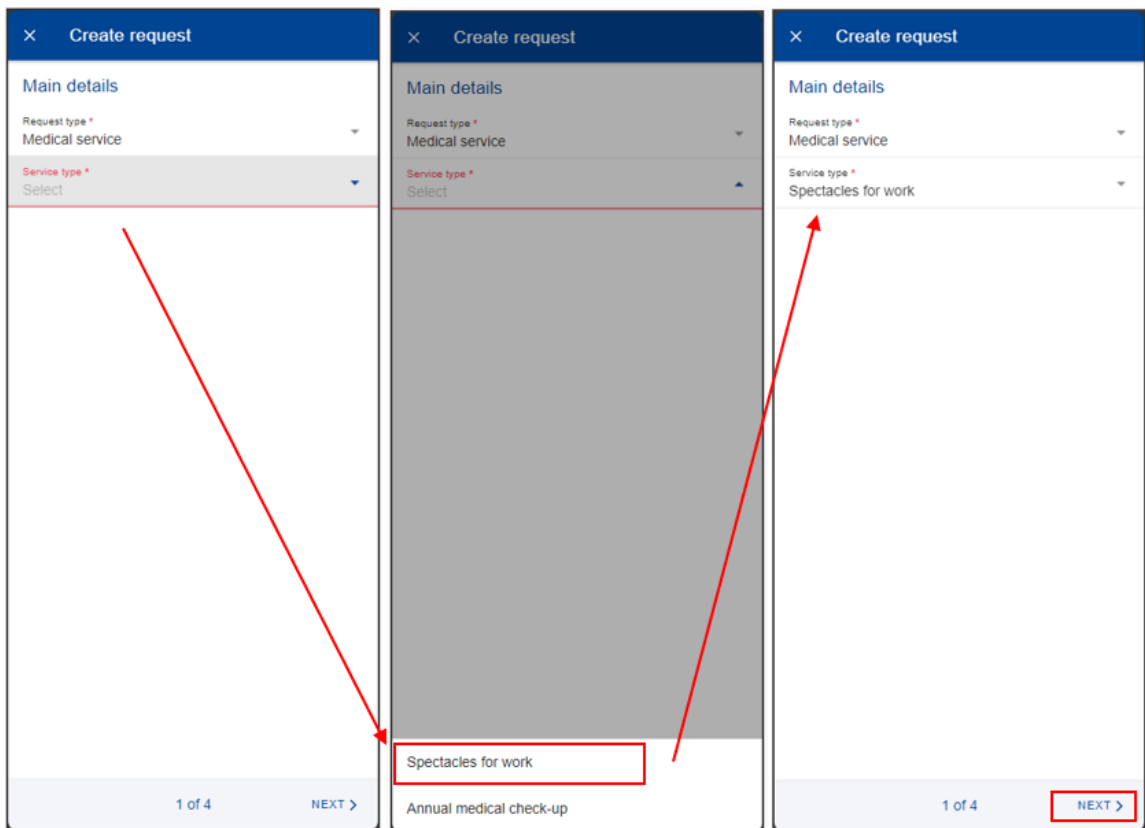
8.2.6. Create a medical service – spectacles for work reimbursement request

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.

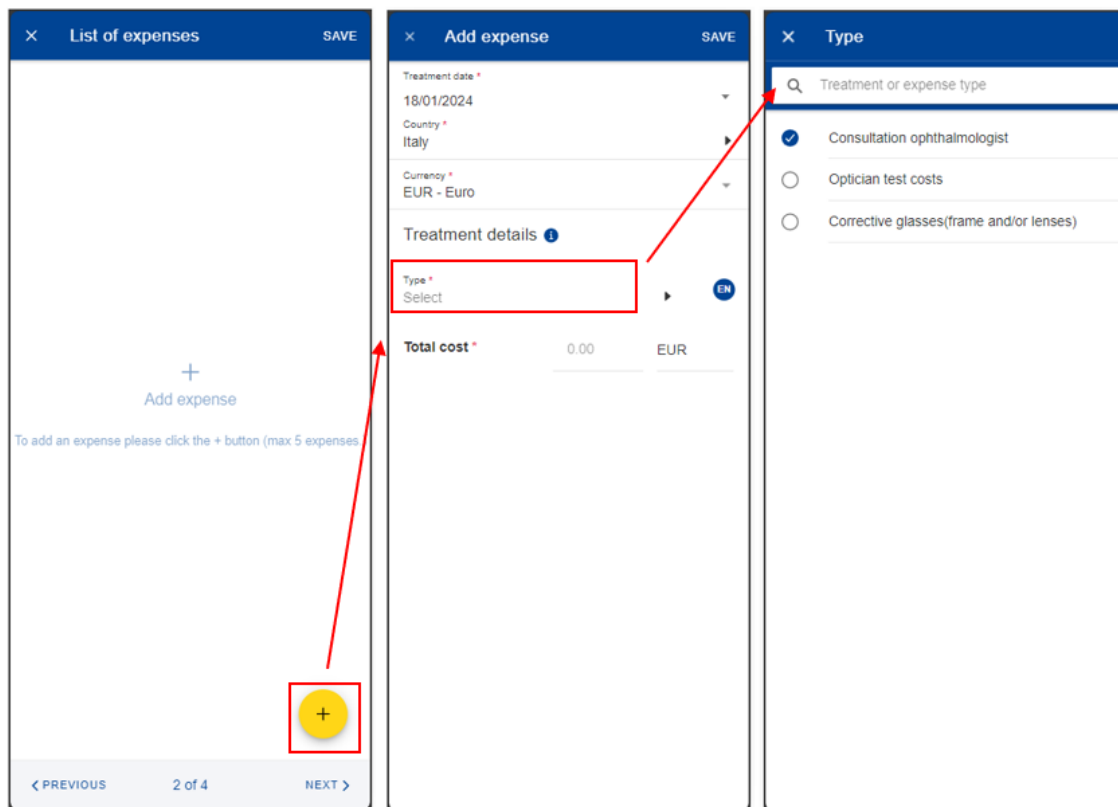



5) A new field will be displayed “Service Type”. Tap on it and select “Spectacles for work”. Tap “Next”.




6) System displays Step2 - List of expenses.

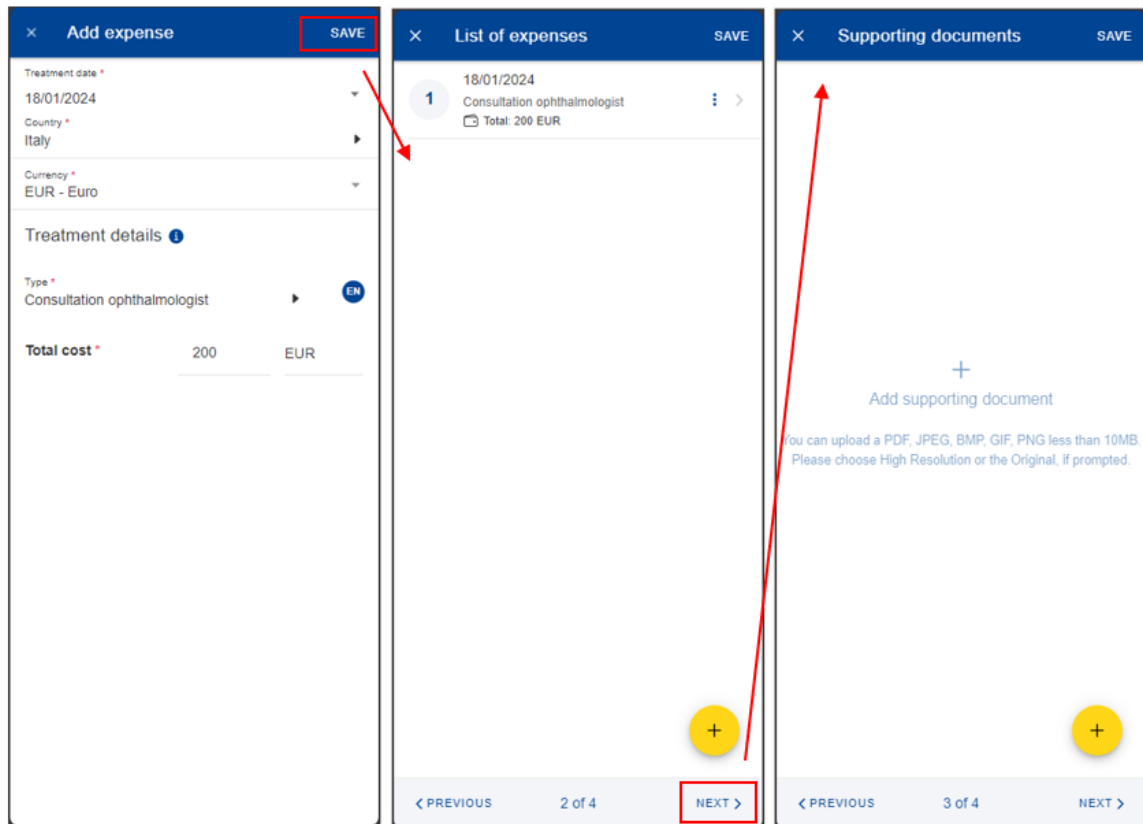
- 7) Tap on the  icon to add a new expense. You are allowed to add up to five expenses. (below left). The expense list is limited to spectacles related services/items.
- 8) Select the Treatment date.
- 9) Select the Expense/Treatment detail from the list. Start by typing the name of the treatment or 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)

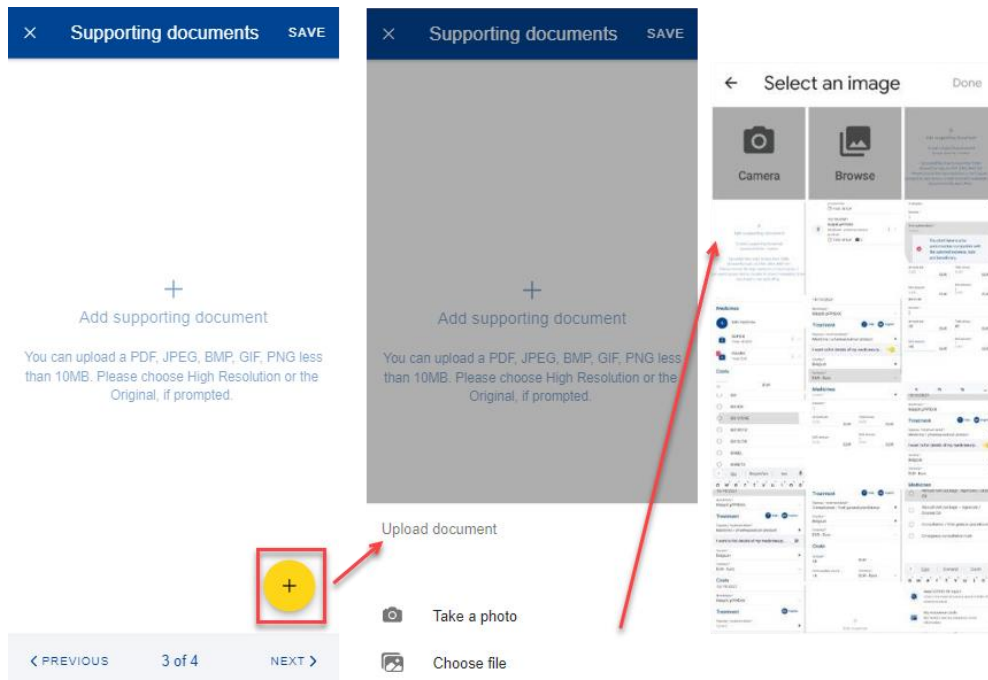


17) Step 3 – Supporting documents. Tap on the  icon to add a new supporting document. (below left)

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.

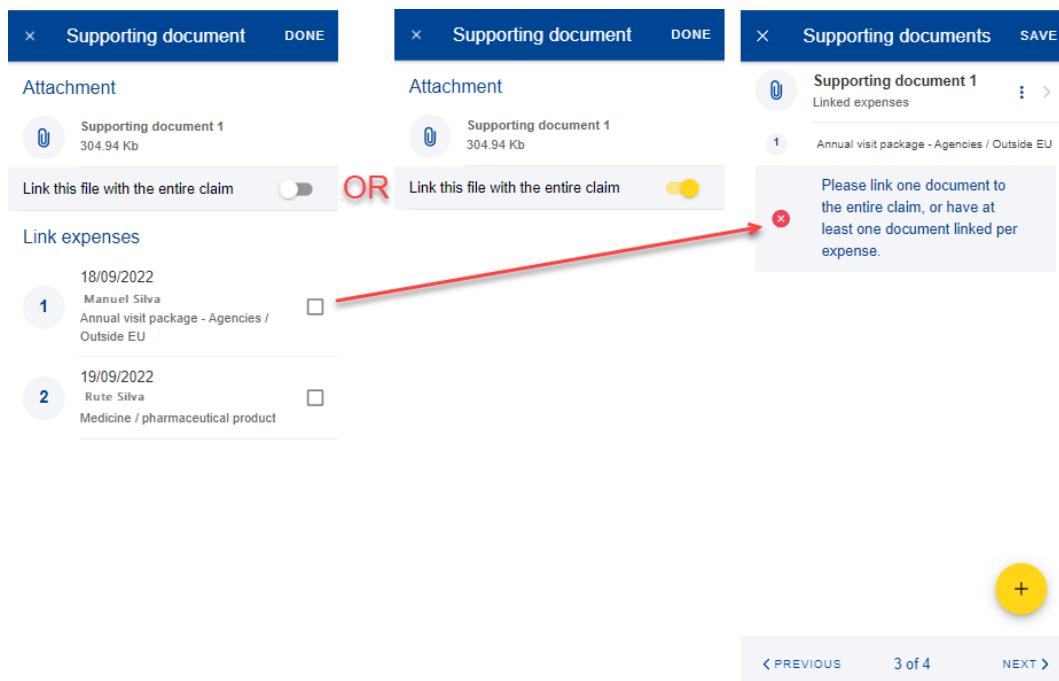
18) The system will prompt you to take a photo or choose a file from your mobile. (below middle)

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



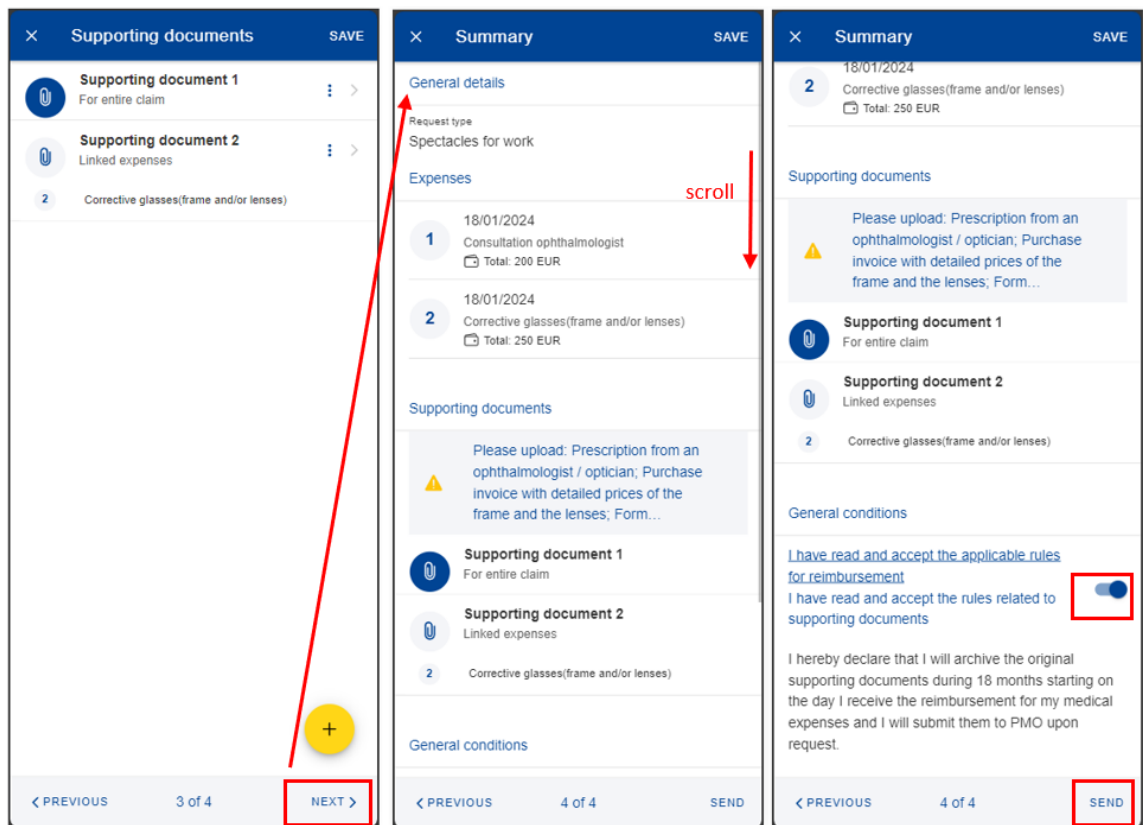
20) Once your document is uploaded, you need to link it to an expense (below left) or to the entire claim, if relevant (below middle). Tap Done to return to the list of supporting documents.

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)



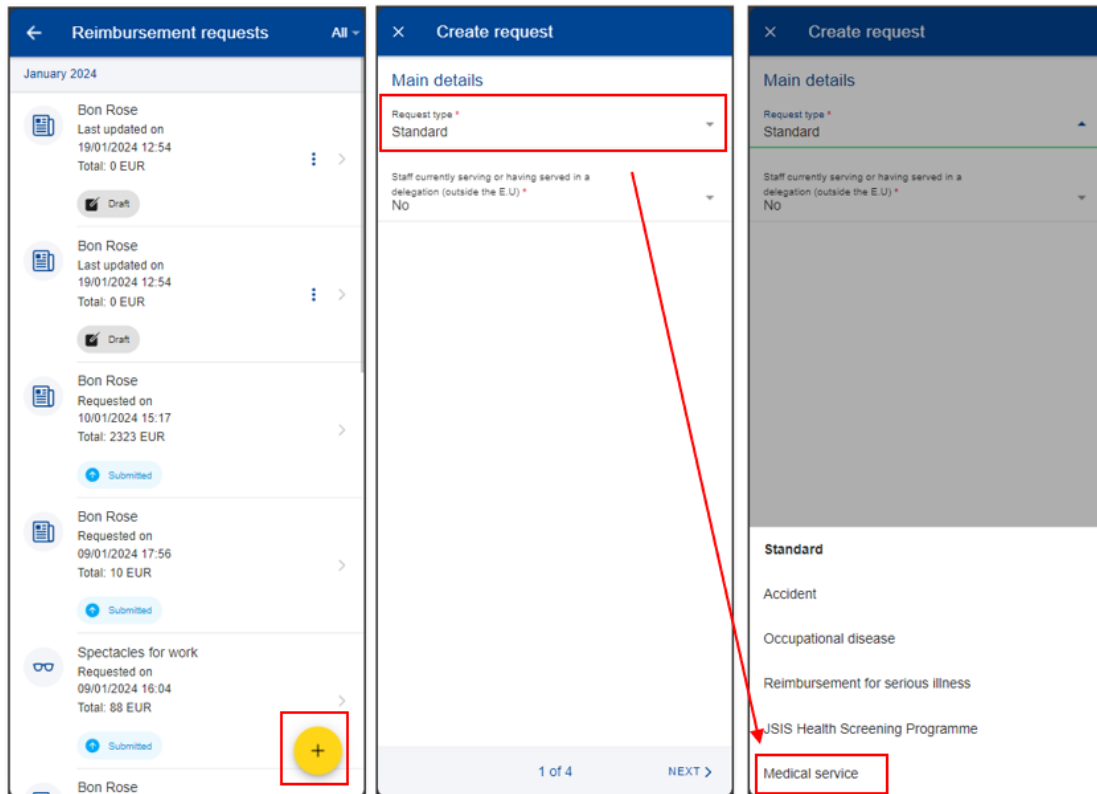
- 26) You can retrieve your request in the list of reimbursements. If the request is in Draft status, you can tap to edit it, if the request has been submitted you can view the information as shown in section 8.1 View reimbursement

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

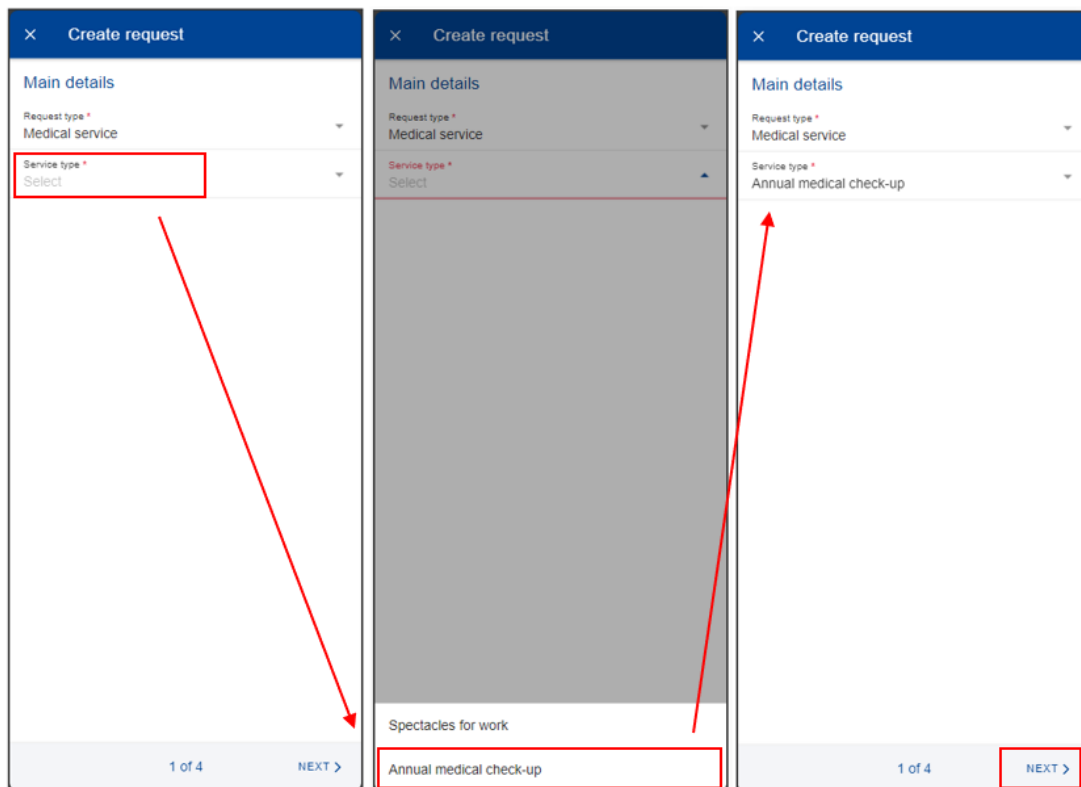
For a reimbursement for annual medical check-up request there is a pre-requisite to have a consultation registered in the annual service from JSIS. Request steps:

- 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.



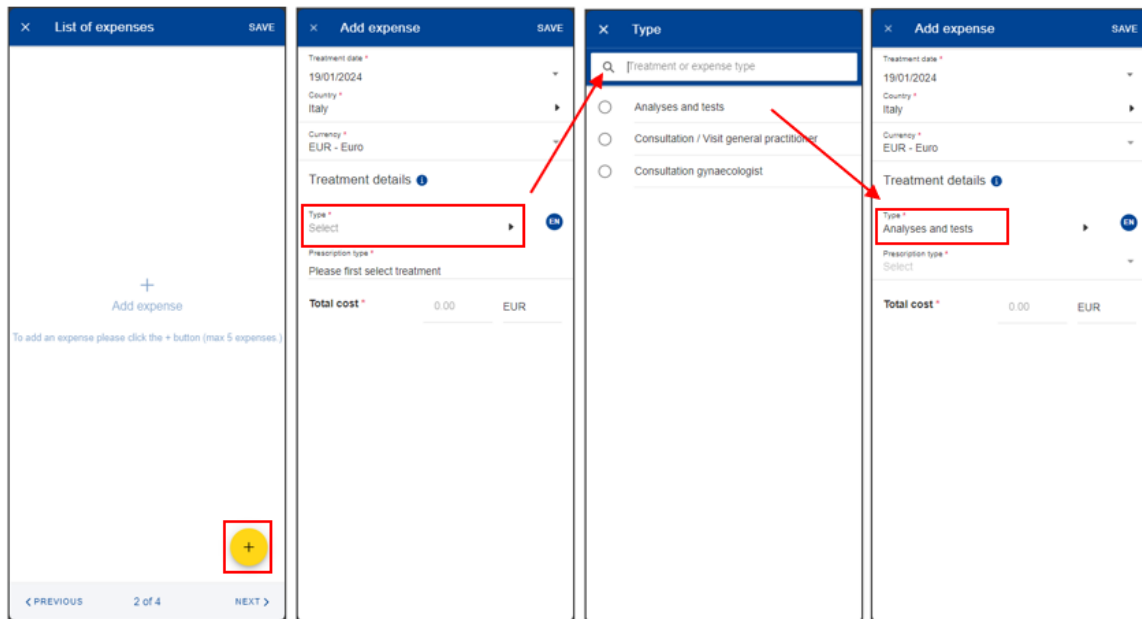
5) A new field will be displayed “Service Type”. Tap on it and select “Spectacles for work”. Tap “Next”.



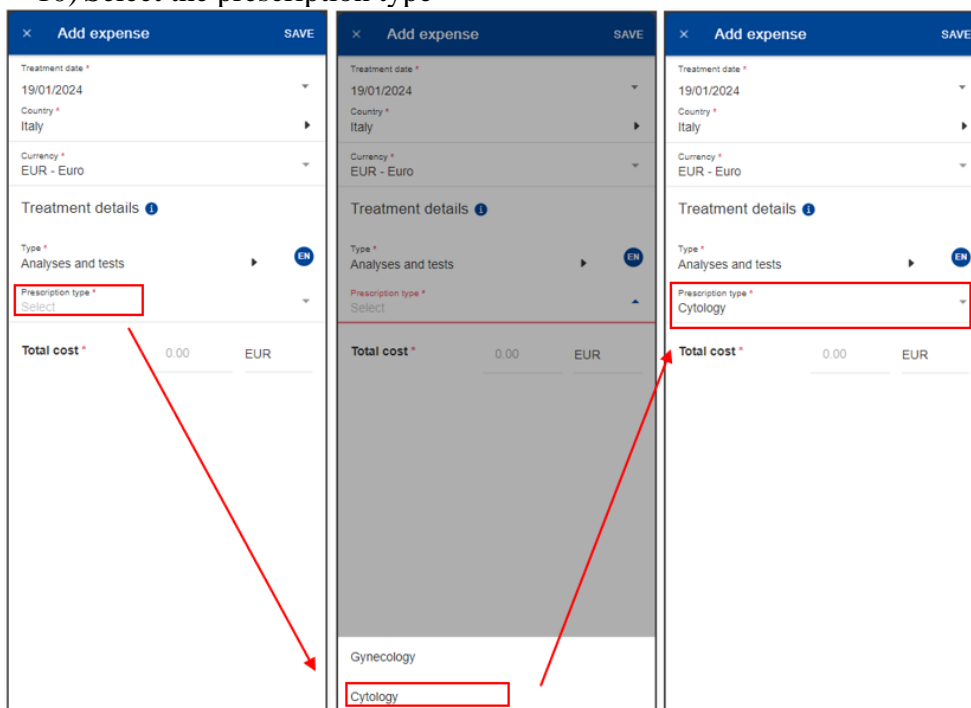
6) System displays Step2 - List of expenses.



- 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)

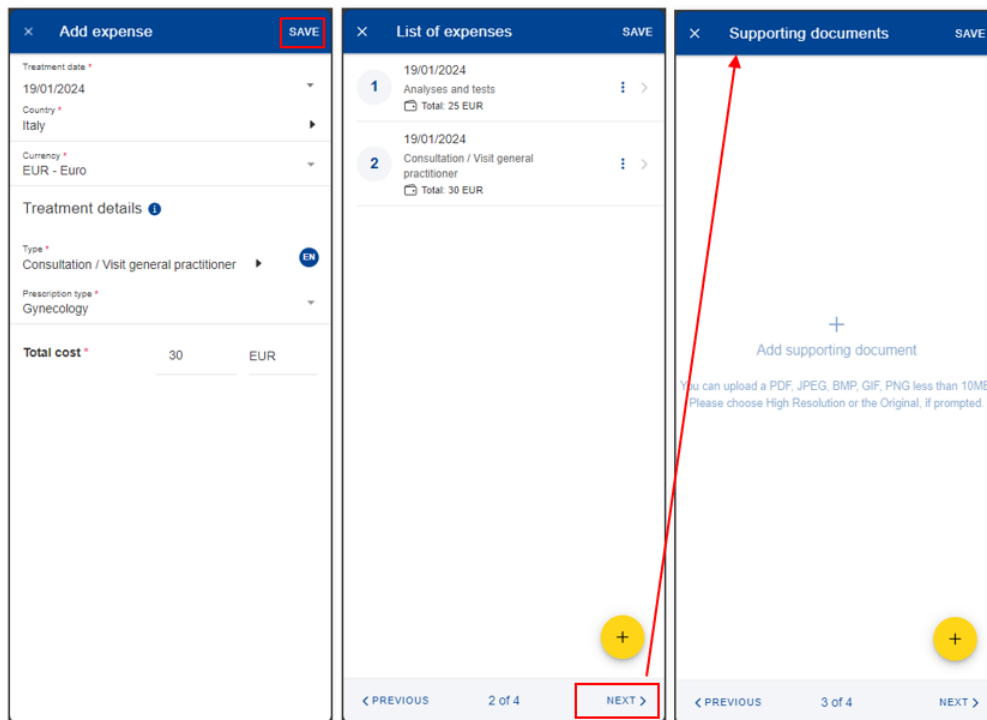
Note: You can choose to change the language of the Treatment detail by tapping on the language icon, just above the Treatment list. That will switch your list from English to French and vice versa.




10) Select the prescription type



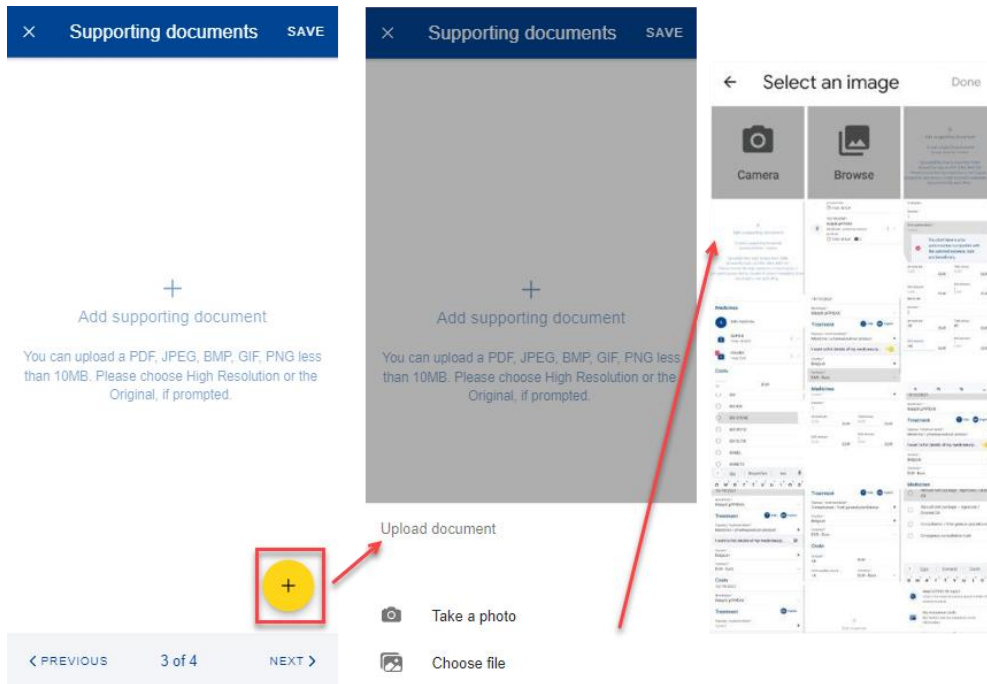
- 11) Select the Country
- 12) Change the Currency, if needed. The default currency is the currency of the country from the previous step.
- 13) You can choose to add a new expense in the list of expenses by tapping the  icon. (below left)
- 14) The system will save and add your new expense to the list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

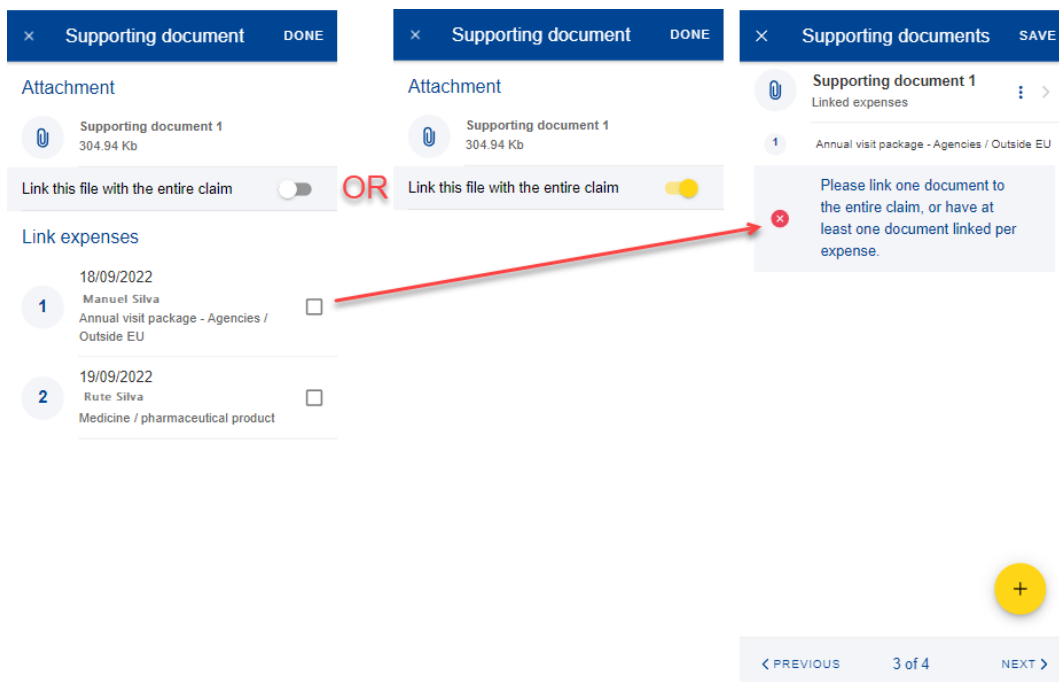
Note: Please make sure to choose High resolution or the Original for your uploaded documents when promoted by your mobile, otherwise the documents may not be readable in the back office following the rendition to PDF.

- 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)



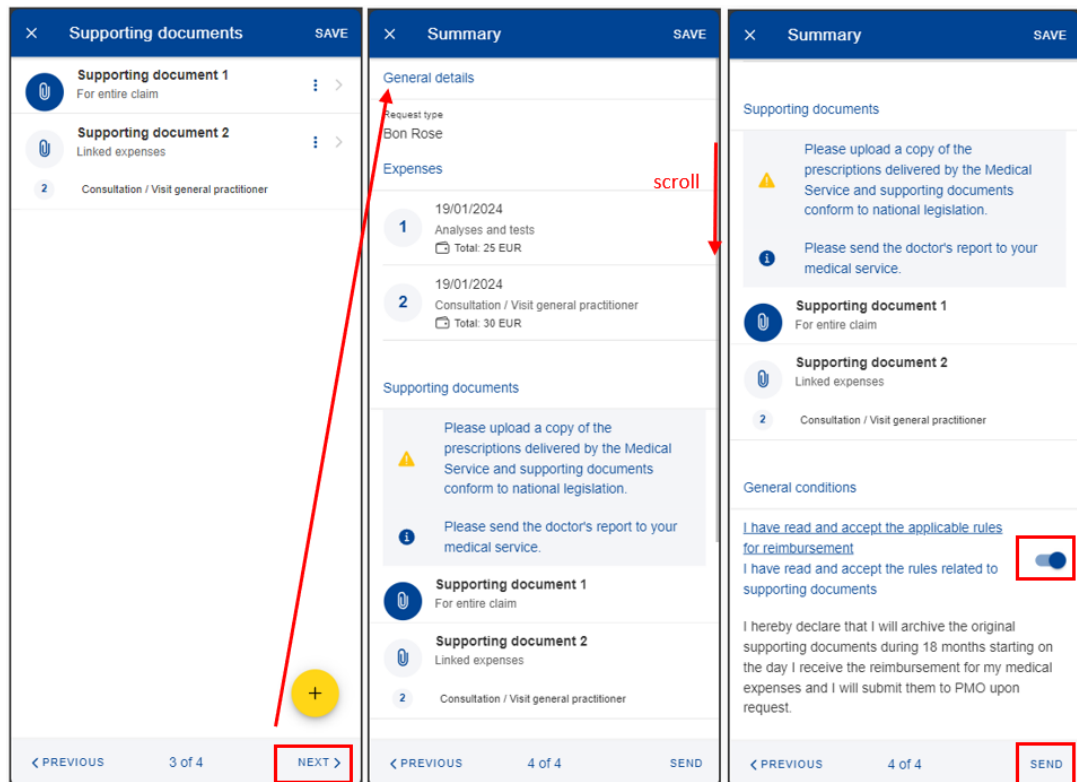
20) Once your document is uploaded, you need to link it to an expense (below left) or to the entire claim, if relevant (below middle). Tap Done to return to the list of supporting documents.

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)

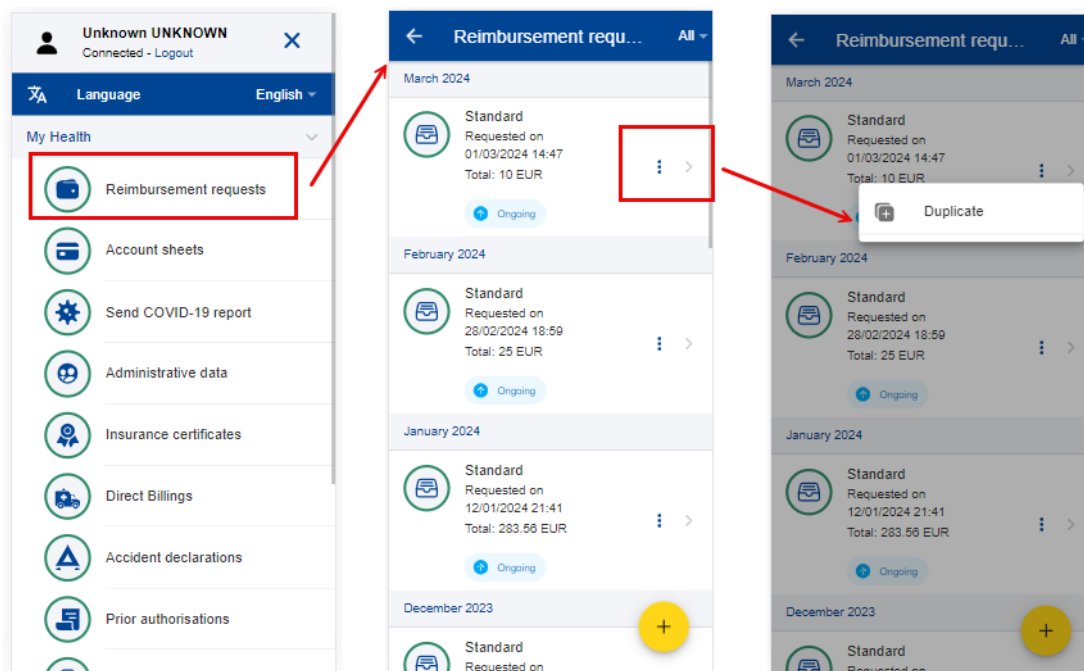


- 26) You can retrieve your request in the list of reimbursements. If the request is in Draft status, you can tap to edit it, if the request has been submitted you can view the information as shown in section 8.1 View reimbursement

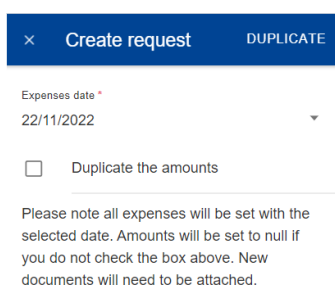
8.3. Duplicate Reimbursement request

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



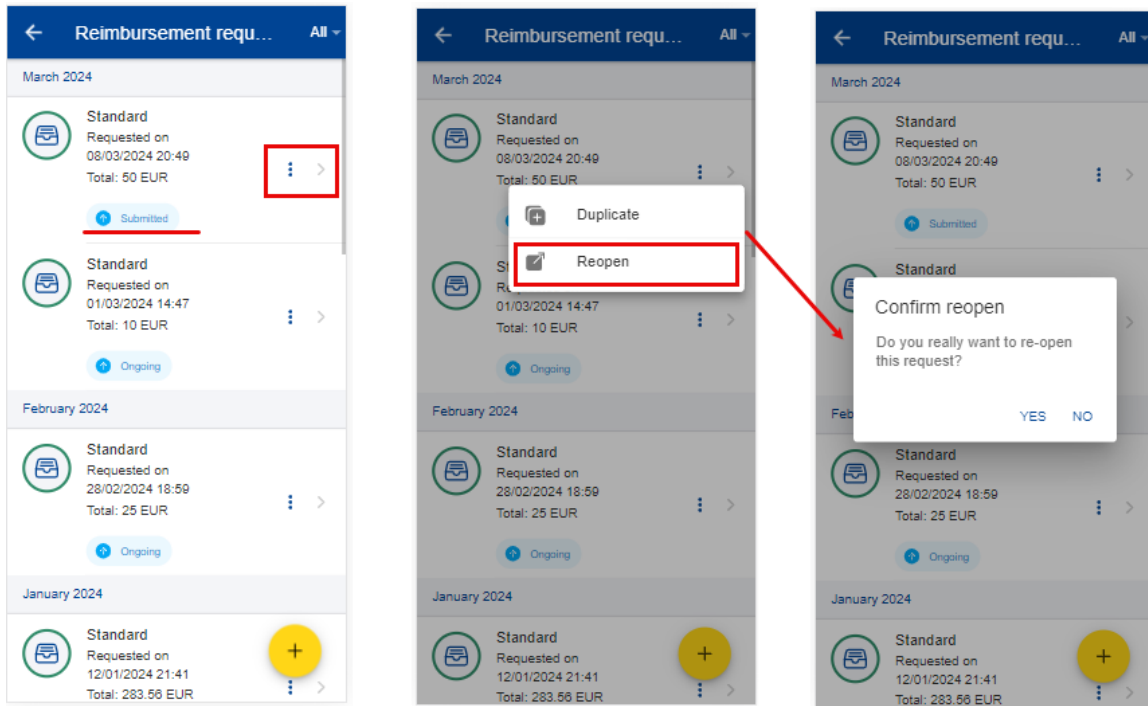
5. Select the expenses date (this new date is used to all copied expenses)
6. Choose if it's to duplicate the amounts as well, or not
7. Tap duplicate to save the action (all information is copied from the original reimbursement)
8. The reimbursement is saved in "draft" and it opens in edit mode.

8.4. 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".

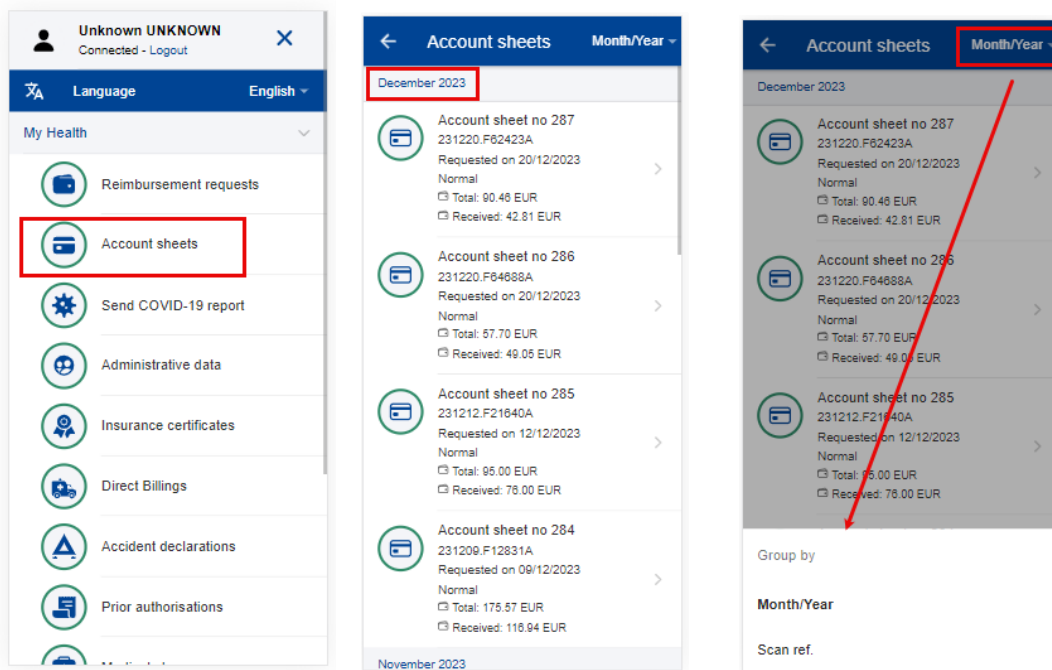
A confirmation message will appear, if you accept it this will revert the request to "Draft" status. You can modify the request without having to start over: the information and documents you have already entered remain in place.



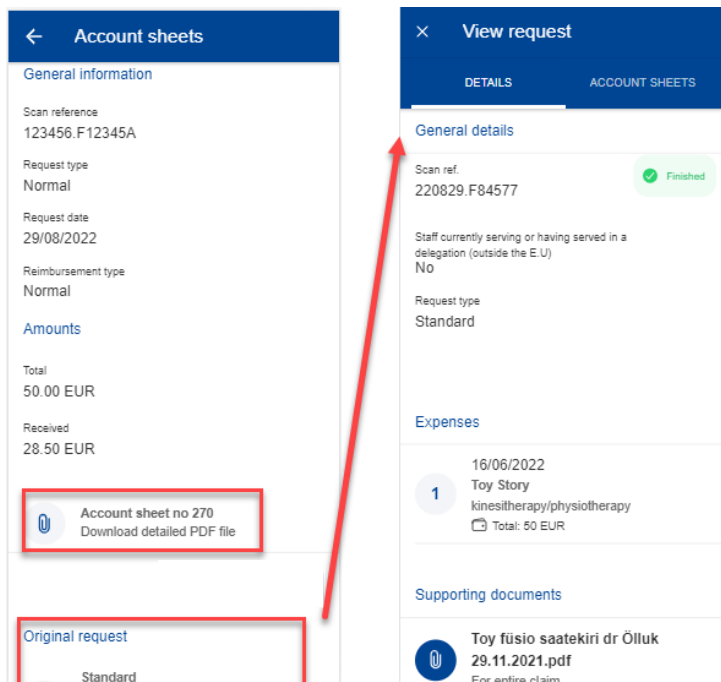
8.5. View account sheets

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.

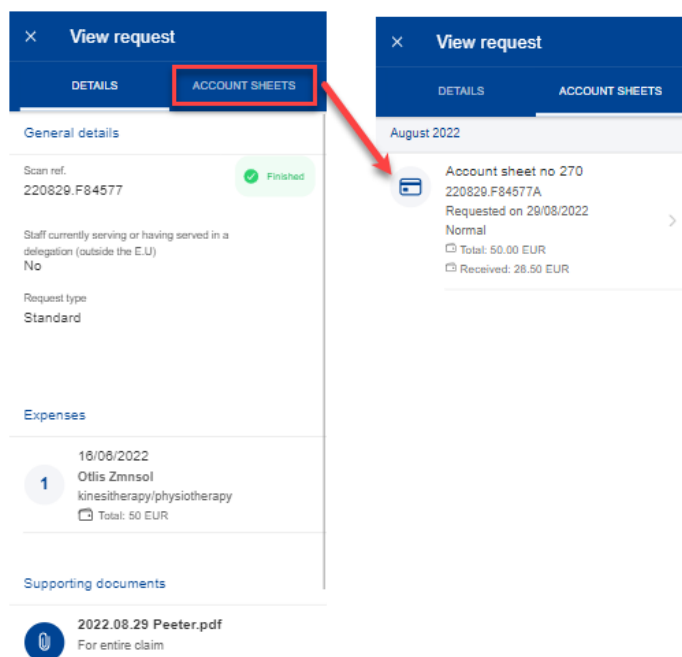
- 1) From the service list, select “Account sheets” to view your account sheets (below left).
- 2) The system displays the list of account sheets showing the request type, date and the total amount. The most recent account sheets are displayed on top of the list.
- 3) You can scroll down to view the 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.



8.6. Account sheets – Ask a Question

Note: Due to a future migration of StaffContact, this option is temporarily unavailable

A wide choice of FAQ will clarify most of your doubts. If this is not the case, you can send your questions directly to the competent sectors via Staff Contact.

- 1) From the service list, select “Account sheets” to view your account sheets
- 2) Tap on an account sheet to see the details of it
- 3) Tap ask a question
- 4) The staff contact site opens.

View request

General details

Scan ref.
123456.F1234A Finished

Staff currently serving or having served in a delegation (outside the E.U.)
No

Request type
Standard

ASK A QUESTION

Expenses

1	29/11/2022 TOY STORY Medicine / pharmaceutical product Total: 36.9 EUR 2
2	29/11/2022 TOY STORY Medicine / pharmaceutical product Total: 4 EUR 1
3	29/11/2022 TOY STORY Medicine / pharmaceutical product Total: 8.99 EUR 1

Supporting documents

20221129_204821.jpg	Linked expenses
---------------------	-----------------

European Commission | Staff Contact

EN FR My Questions

Back to Staff Matters Sign Out

ACCEPTANCE
Reimbursement account sheet

Subject* Beneficiary concerned by your question*

Account sheets

Reference*

111111.F11111A

Description*

9. PRIOR AUTHORISATIONS (JSIS)

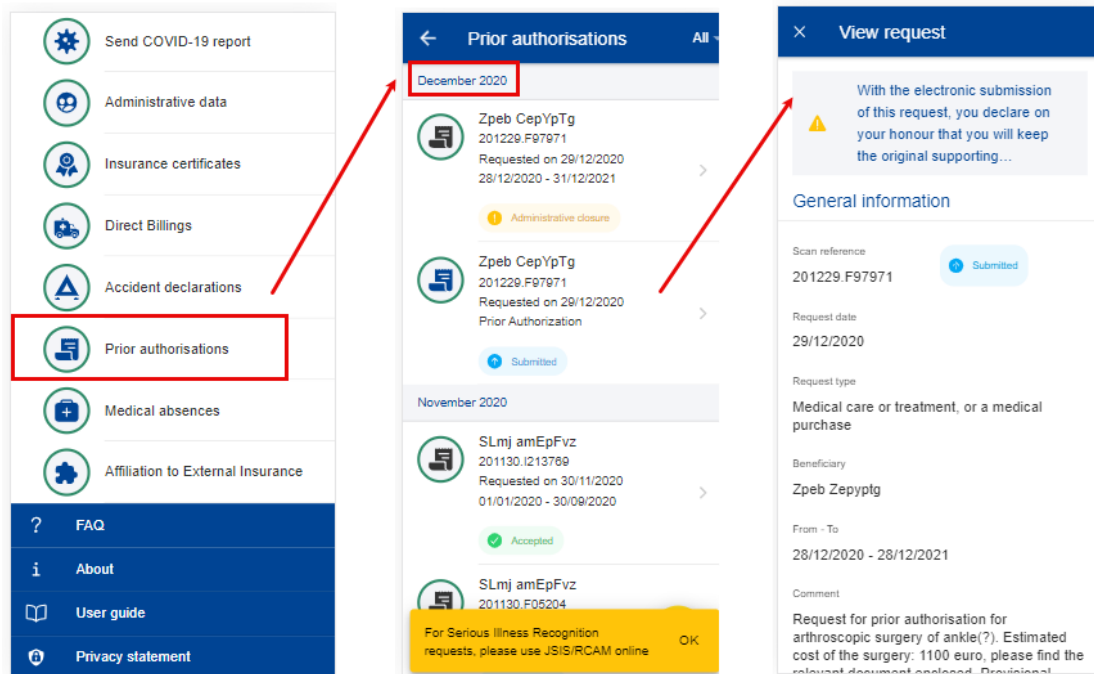
This service allows you to create and view the history of your prior medical authorisations.


For Serious Illness Recognition requests, please use JSIS/RCAM online. These requests are not supported in MyPMO and currently are only listed without the option to view them.

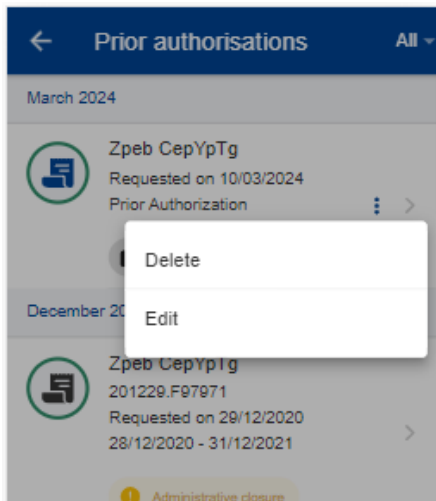
Please keep the original documents and do not introduce the same request for prior authorisation on paper.

9.1. View Medical Authorizations

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

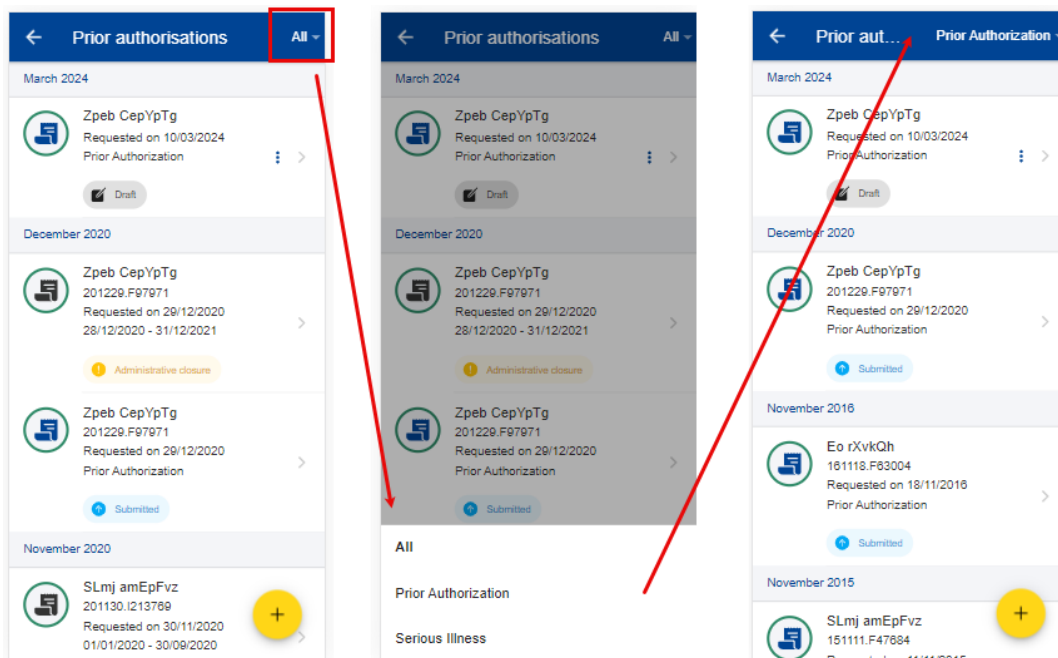


- 2) The system displays the list of requests showing the beneficiary, the date of the request, the type of request, and the request's status. The most recent prior authorisations requests are displayed on top of the list. You can scroll down to view the prior authorisations requests grouped under each 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:



9.2. 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.

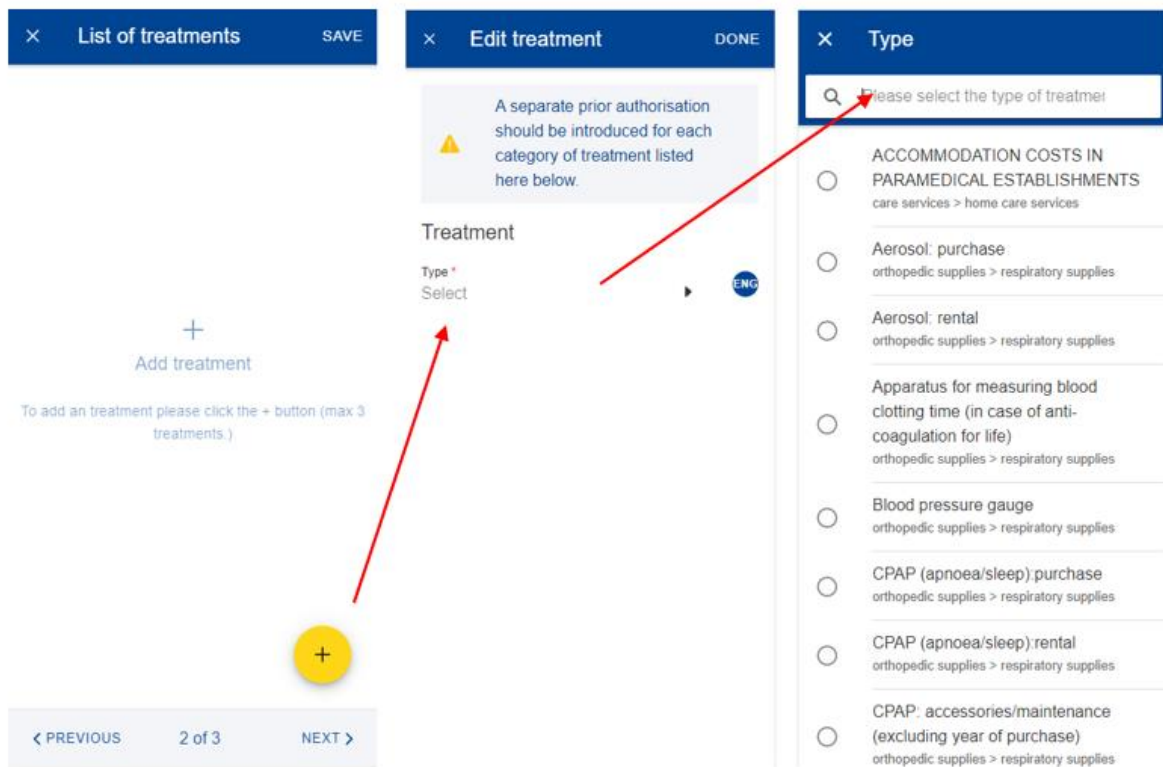
9.2.1. *Create Request for Medical care*

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

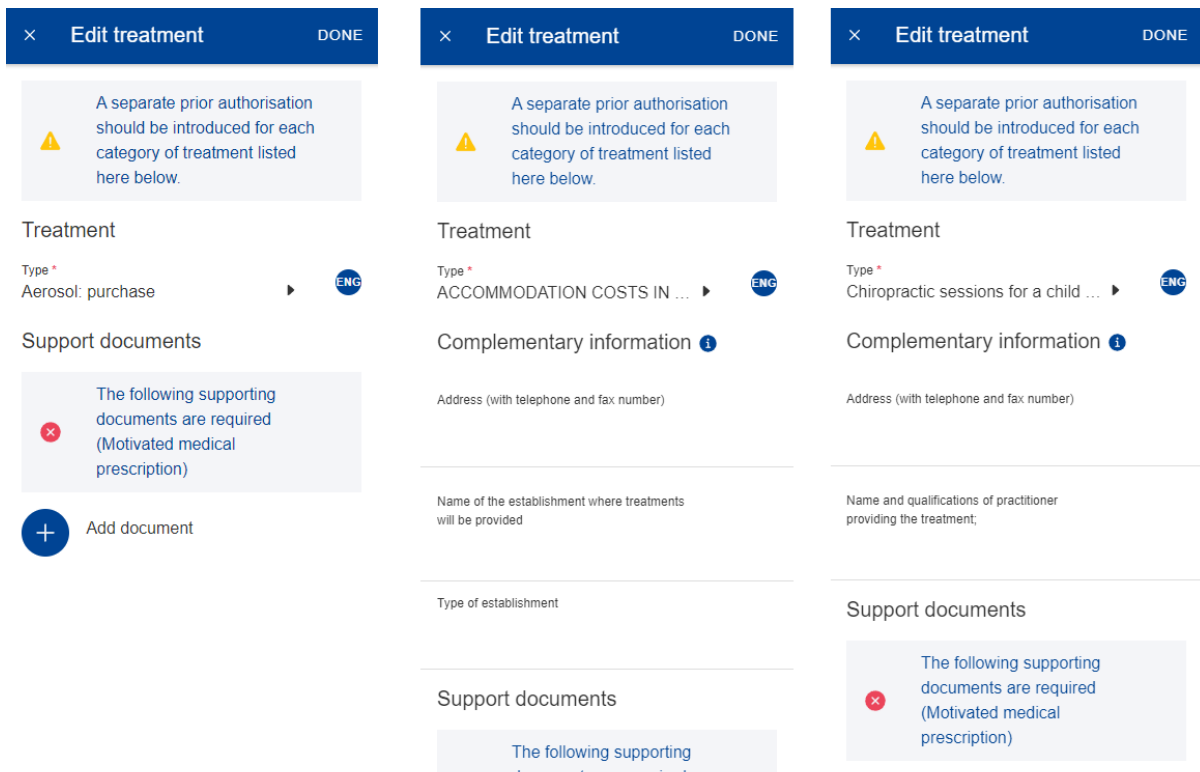
1. From the service list, select “Prior Authorisations”.
2. Tap on the  icon.
3. Select the Beneficiary from the list.
4. Select the Start Date.
5. Select the request type: Medical care or treatment, or a medical purchase
 - If the context type is Standard, then tap “Next”
 - If the context type is Accident or Occupational disease, 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.
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:

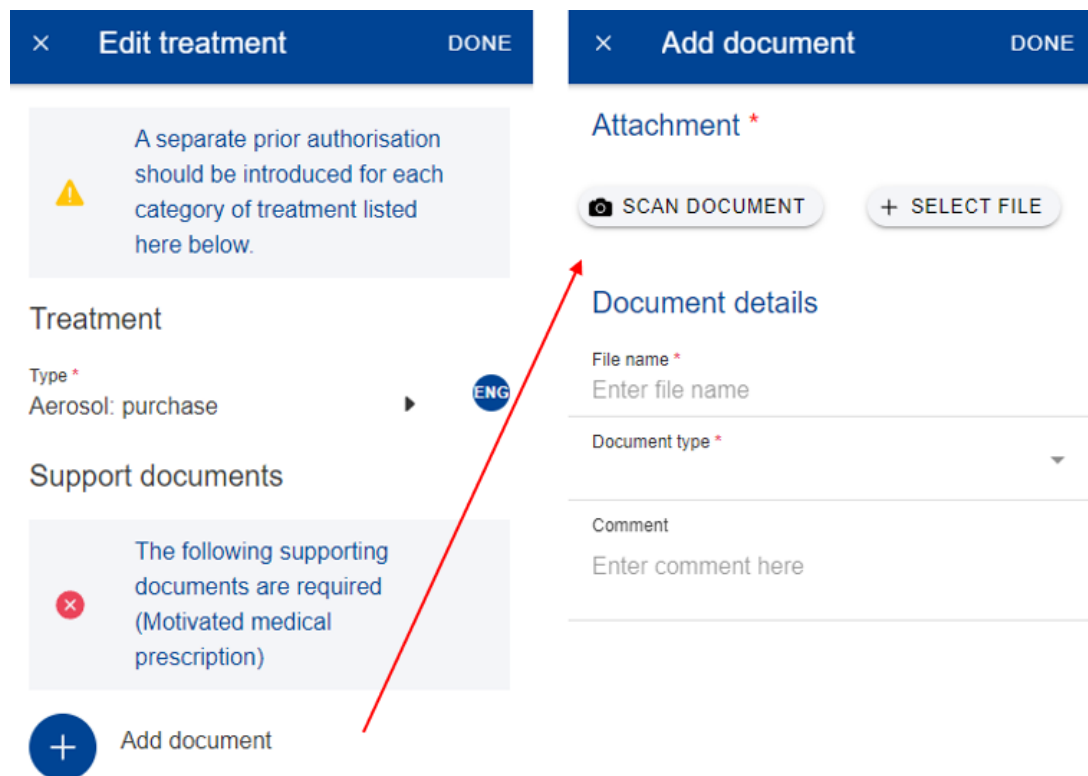


10. Following the treatment selection, the support documents will need to be added

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.

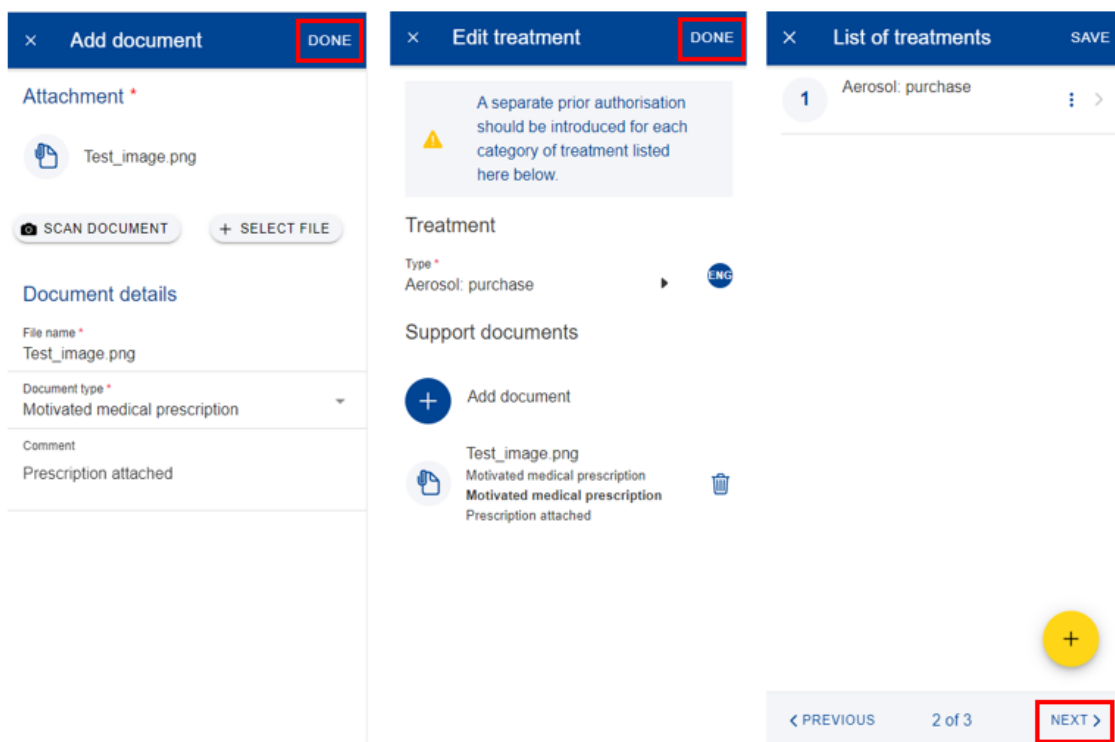
Note: Please make sure to choose High resolution or the Original for your uploaded documents when promoted by your mobile, otherwise the documents may not be readable in the back office following the rendition to PDF.

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

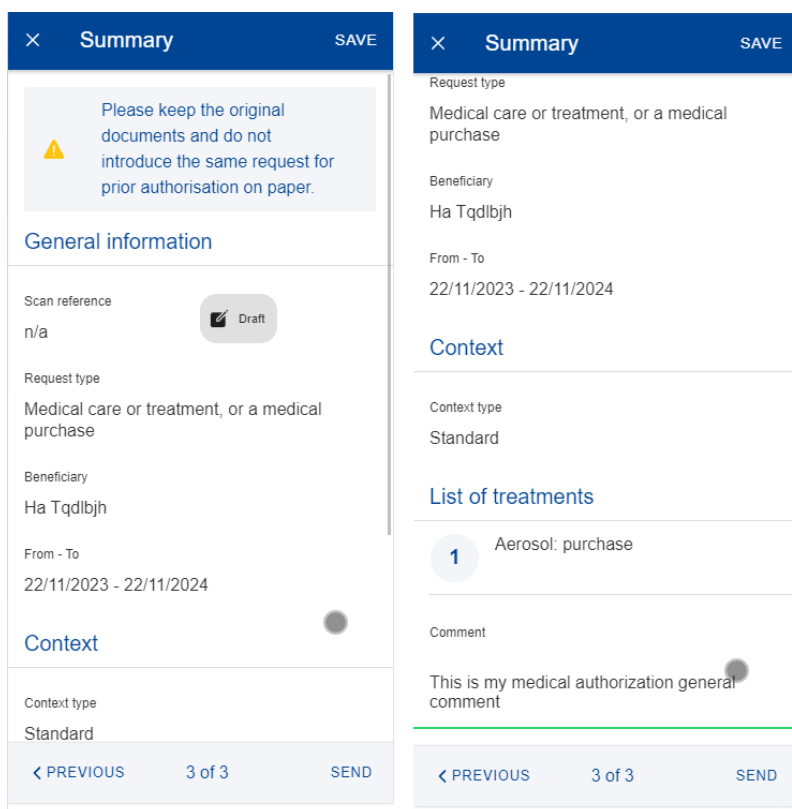


13. Take a photo or select document from your documents list.
14. If the document is scanned, you'll need to add the File name, otherwise if it's selected from the device it is automatically proposed (it will include the document type e.g. .pdf, .jpeg)
15. Tap Done to save and return to the treatment. 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 9.1 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.

9.2.2. *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, the 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:

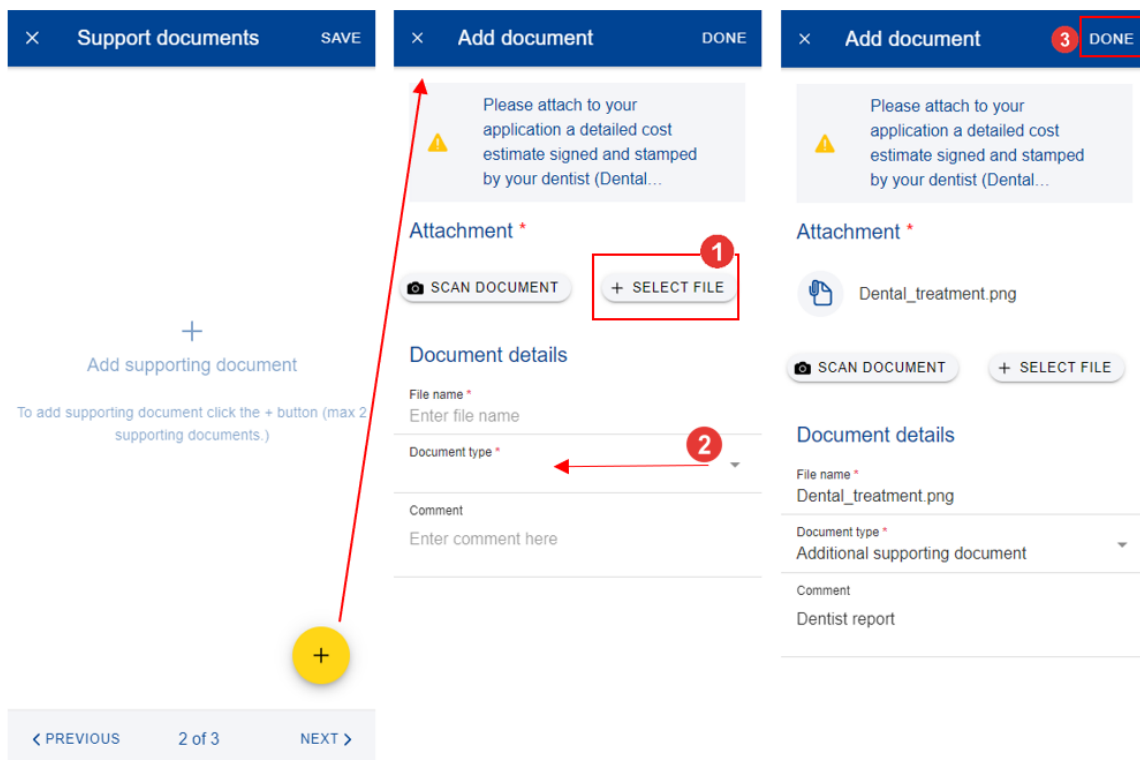
- Periodontal treatment;
- Dental occlusion;
- Dental prostheses;
- Implantology;

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.

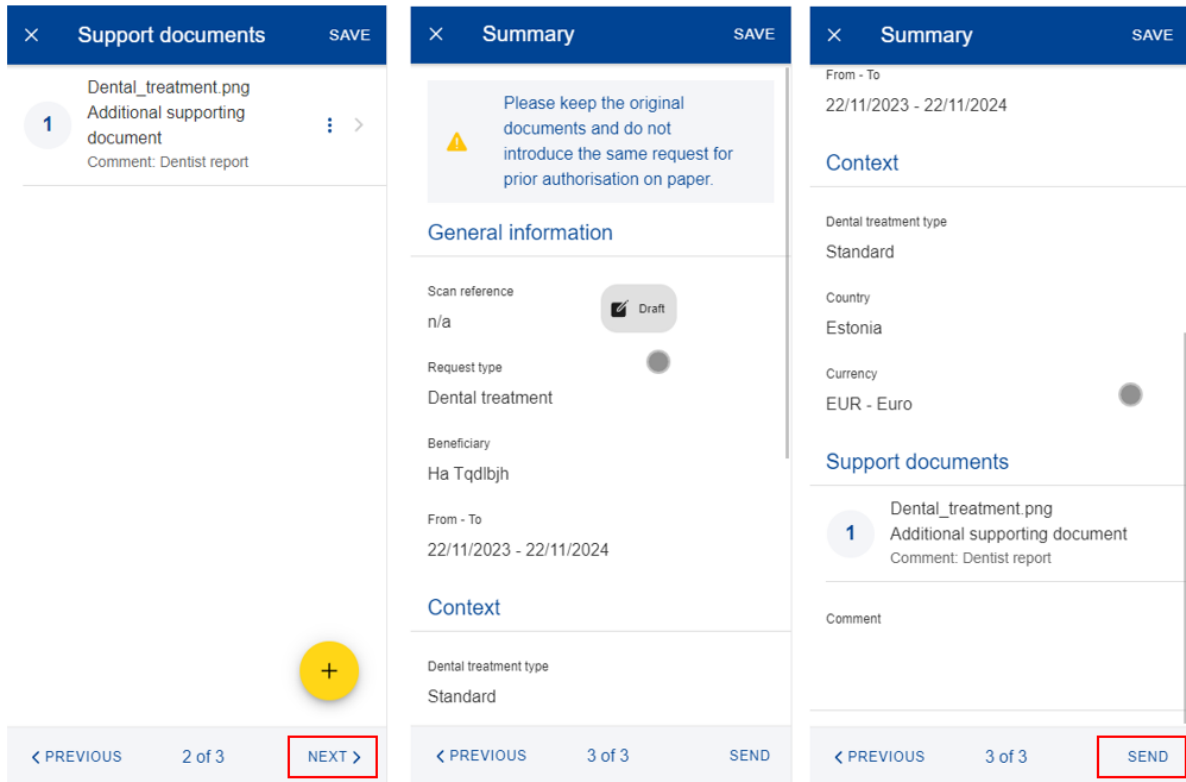
6. System displays Step 2 – Support documents

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 9.1 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.

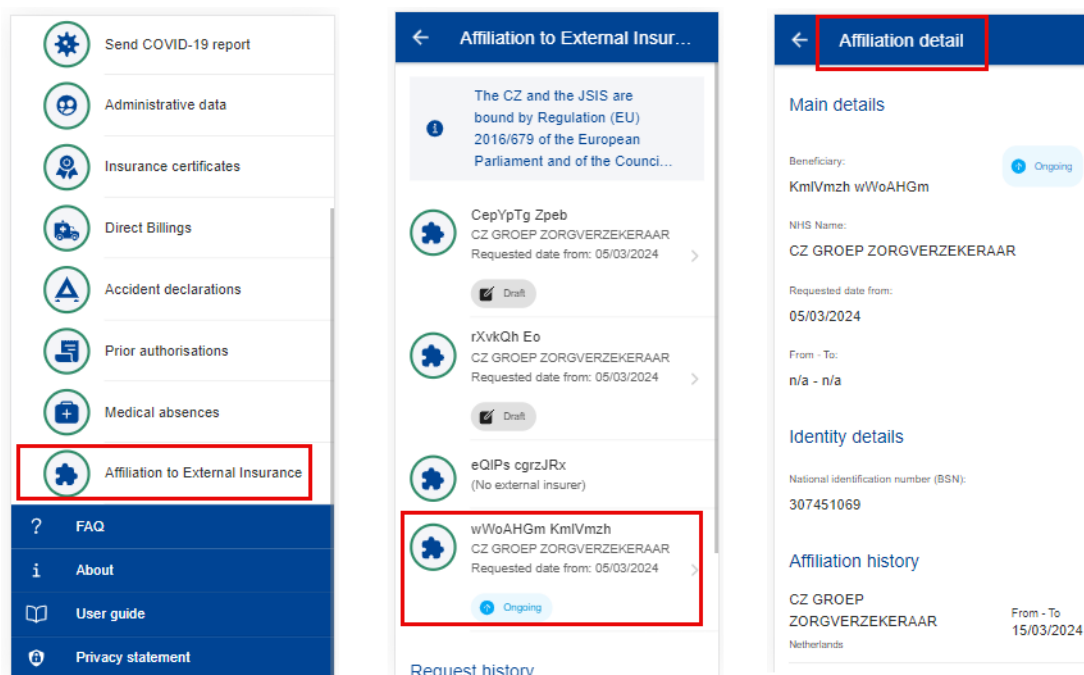


10. AFFILIATIONS TO EXTERNAL INSURANCE (JSIS)

This service allows you to see the affiliation requests status and history both for you and your family.

10.1. View

- 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.



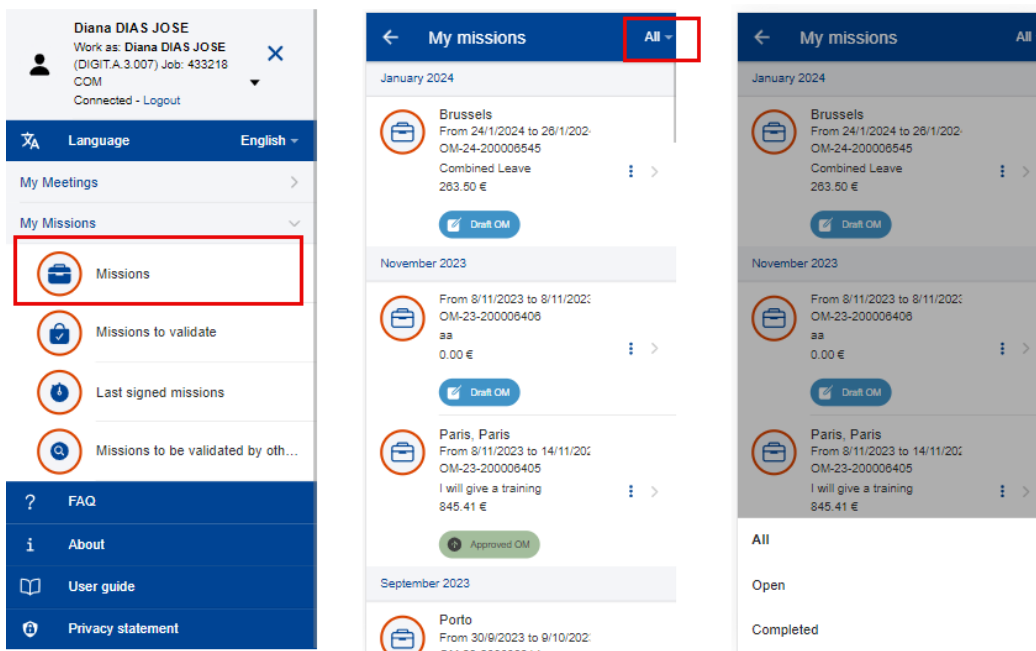
11. MISSIONS (MiPS)

11.1. View Missions

The MyPMO application allows you to view missions in all status (e.g.: draft, under validation, approved, etc).

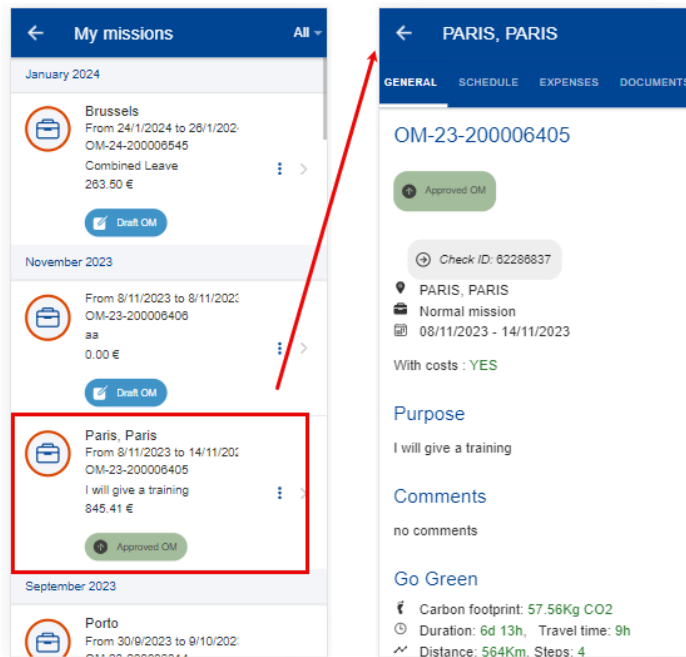
To view missions, select “My missions” from the service list.

Missions can be filtered by “Open” or “Completed” status.

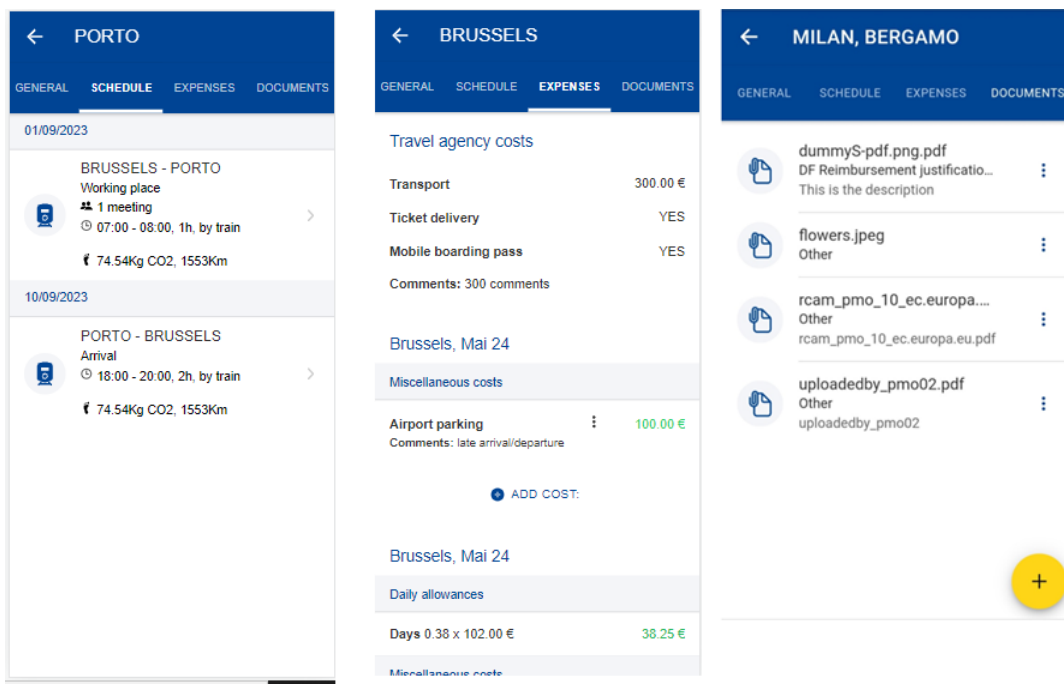


11.2. View Mission details

To view the general details of a mission, select “My missions” from the service list then select a mission from the list.



Additional information about the missions (schedule, expenses and documents) are available by selecting the corresponding tab.

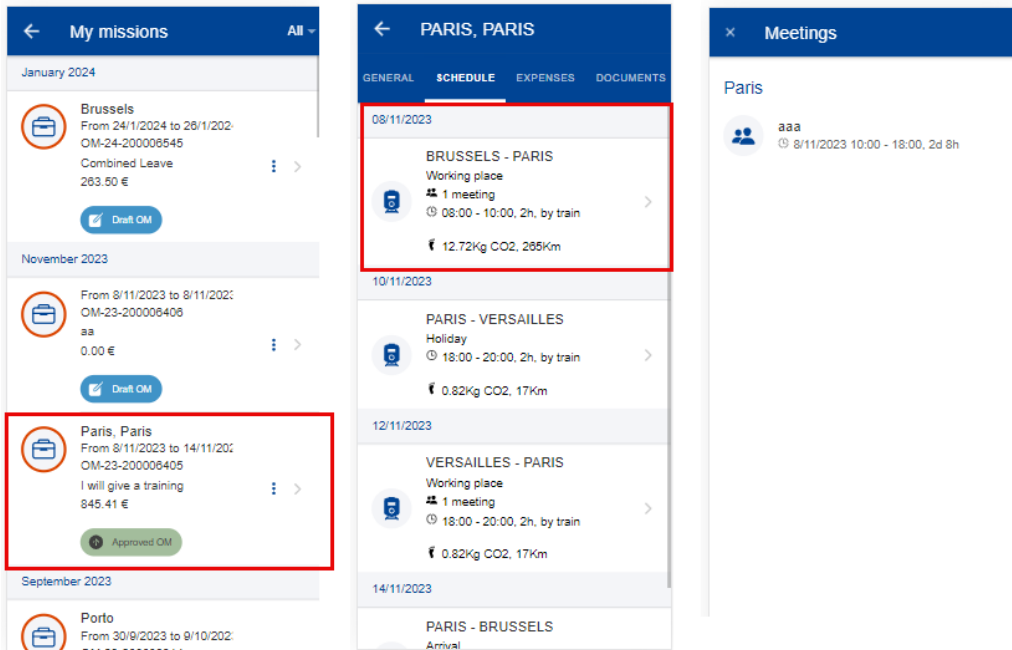


11.3. View Mission meetings

To view meetings, follow the steps:

- 1) Select “My missions” from the service list.
- 2) Select the mission.
- 3) Select the “Schedule” tab.

4) Select the corresponding place.



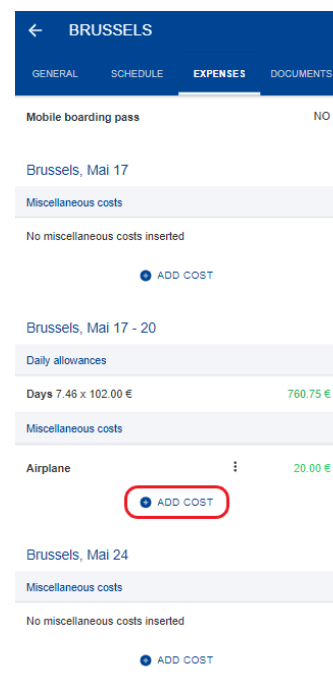
11.4. Mission costs

MyPMO allows the Mission Performer to add or edit miscellaneous costs to a mission.

The costs can be added for a Mission Order (OM) in “Draft” or in “reject for modifications”, also for declarations fees in the same status and when the place type is not holidays, among other rules.

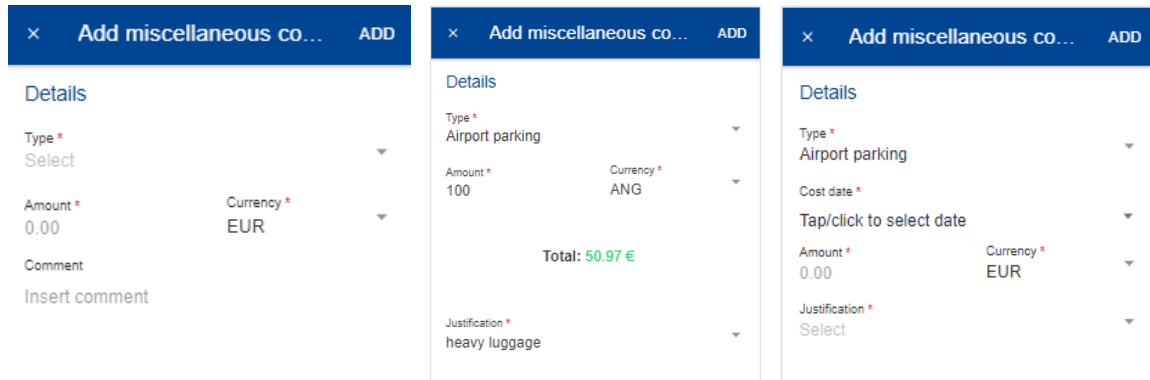
To add a cost, follow the steps:

- 1) Select “My missions” from the service list.
- 2) Select the mission.
- 3) Select the “Expenses” tab.
- 4) Select the “add cost” button.
- 5) The screen with the cost details opens, fill the required information:
 - a. Type
 - b. Cost date (for authorised travels)
 - c. Amount
 - d. Currency



e. Comment/Justification

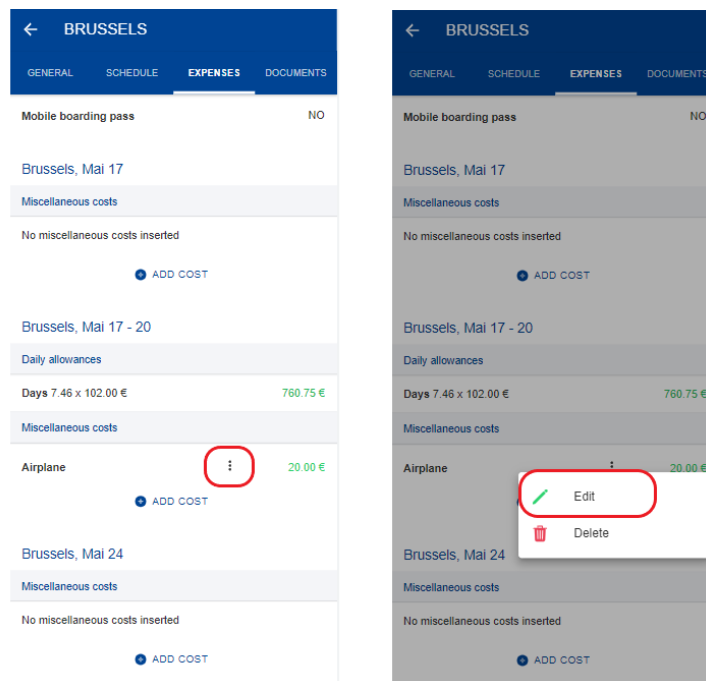
6) Tap “Add” to save.



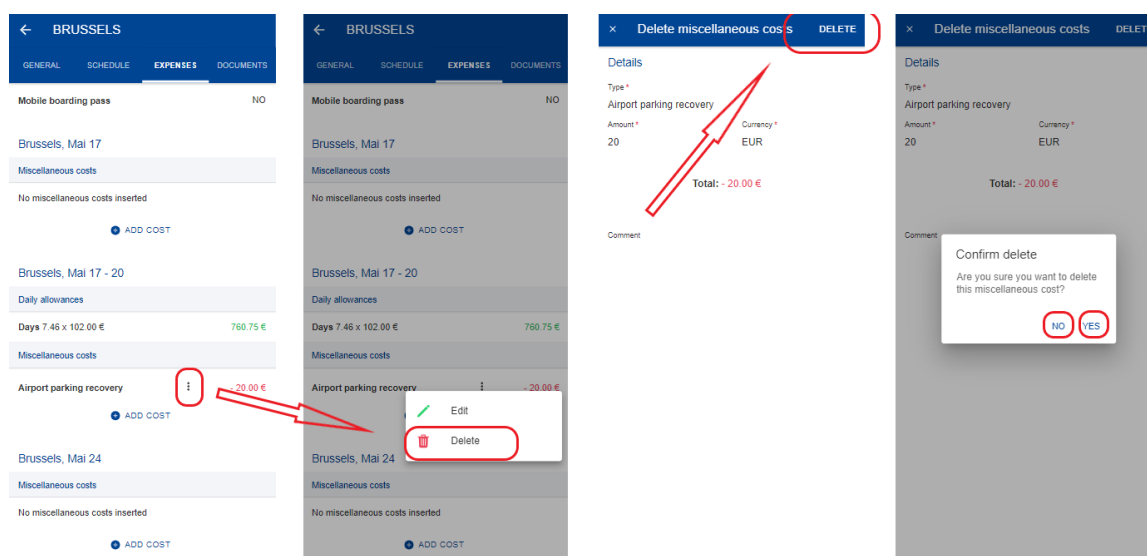
When adding a cost in other currencies the value is converted to EUR, and this is shown on the “Expenses” tab together with the other costs. The original currency and value can be viewed when editing the cost. (above middle)

For authorised travels it’s also required the date/time (this should be between the schedules of the routes). The “cost date” field is displayed after you select the cost type.

To edit a cost simply tap on the cost to be edited or select three dots button next to it and choose “Edit” from the context menu.



You can also delete a cost by using the three dots button next to the cost. When tapping “delete” the cost details opened with the “delete” action. If you tap to delete, a confirmation box is displayed to confirm/cancel the action.




11.5. Add mission documents

The App allows the Mission Performer to upload pictures and documents into a selected mission folder.

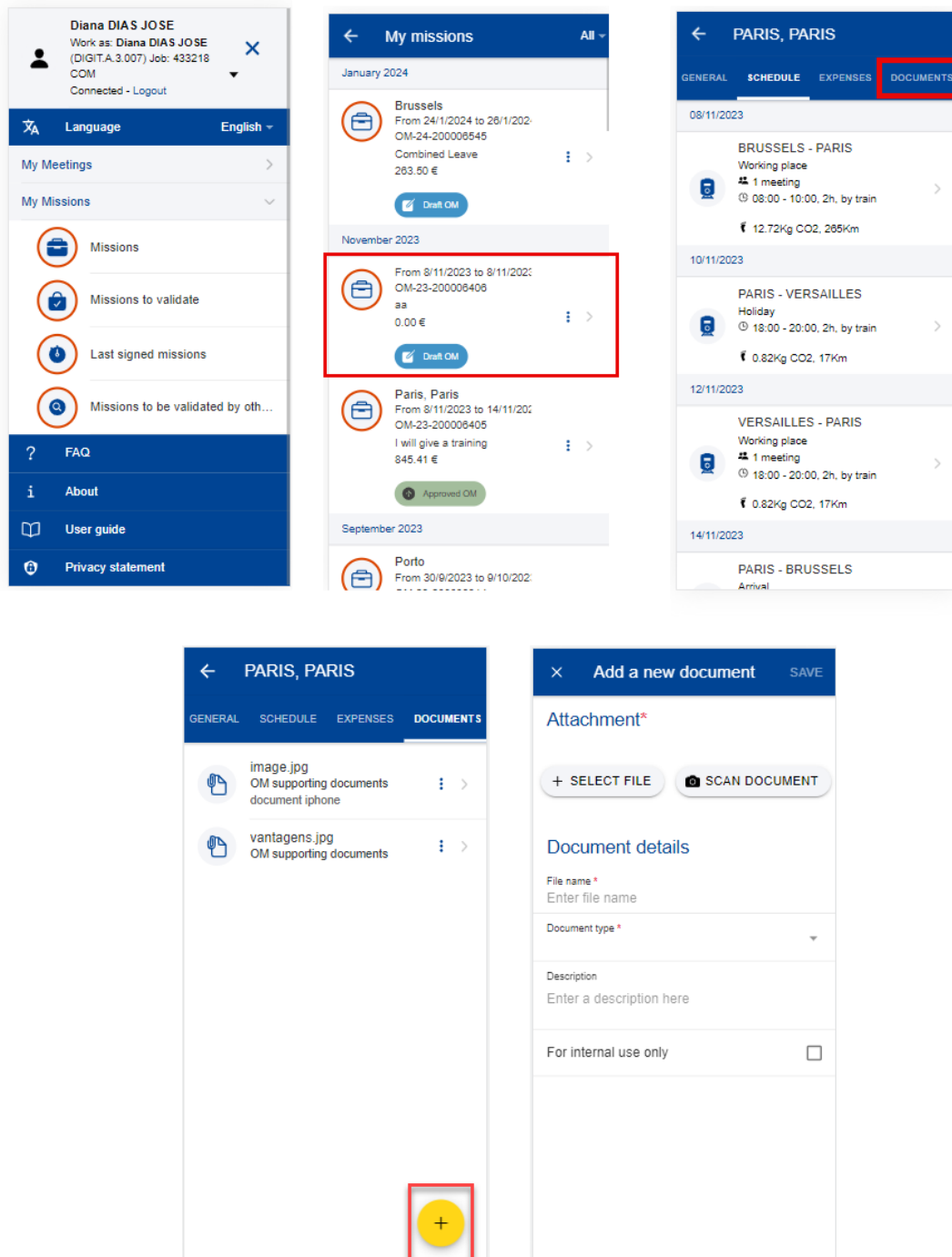
The pictures and documents are either mission-related expenses (hotel bills, travel tickets...) which will be partially or totally reimbursed, or documents identified as “internal only” that relate to the mission itself (such as mission reports).

Adding pictures and/or documents is possible once the mission is created until the Mission Performer validates and signs the statement of expenses.

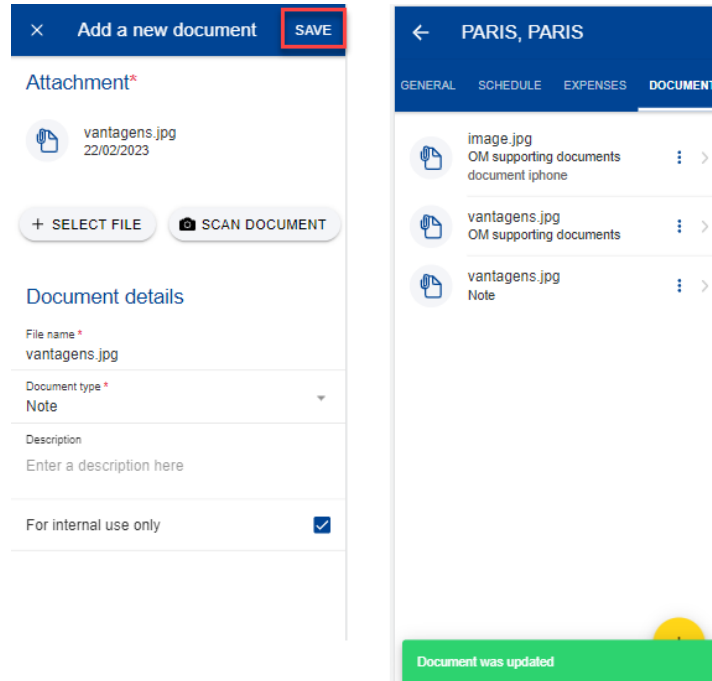
To add a document, follow the steps:

- 1) Select “My missions” from the service list.
- 2) Select the mission.
- 3) Select the “Documents” tab.
- 4) Select the  action button.
- 5) Upload file. The App allows you to add pictures and/or documents, taken by the camera or added from a local folder to the mission (folder). The authorized file formats are PDF, JPG and TIF.
- 6) When needed, update the file name.
- 7) Select the document type.

- 8) When needed, enter some description.
- 9) When applicable, check the “internal-only”¹ checkbox.
- 10) Press “Save”.
- 11) The App confirms that the document was added and add the document to the list of available documents.




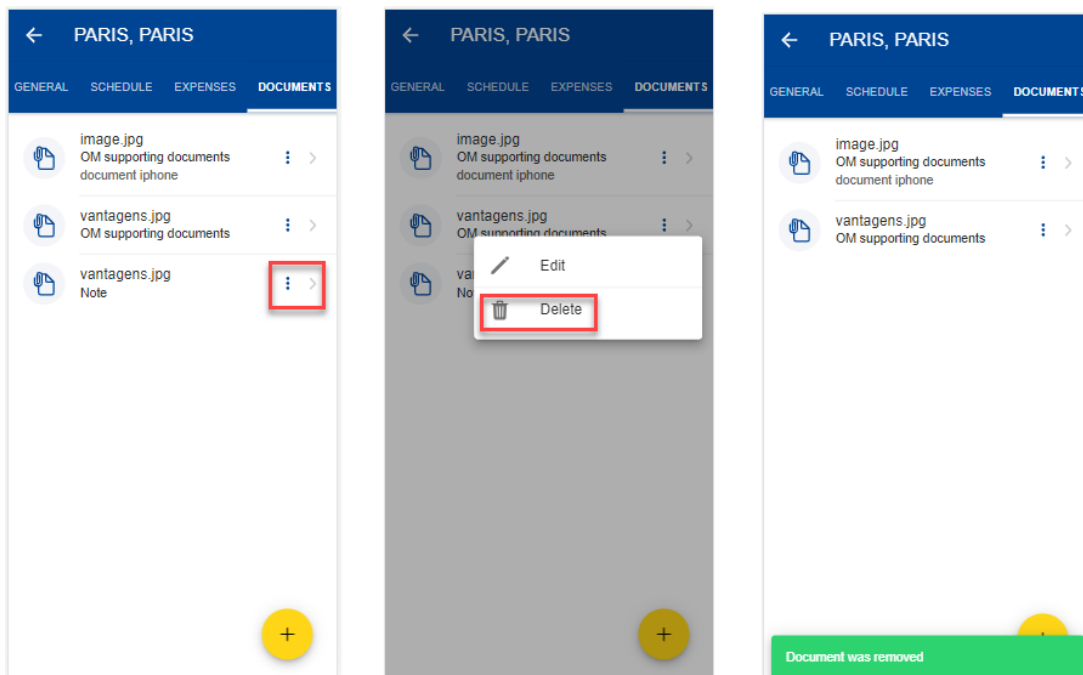
¹ **For internal use only:** The document can be consulted by the members of the visa chain only. By tapping yes, the downloaded documents will not be visible by the PMO but only by the persons having access to your mission (mission performer, hierarchical supervisor, authorising officer ...)



11.6. Delete mission documents


To remove a document, follow the steps:

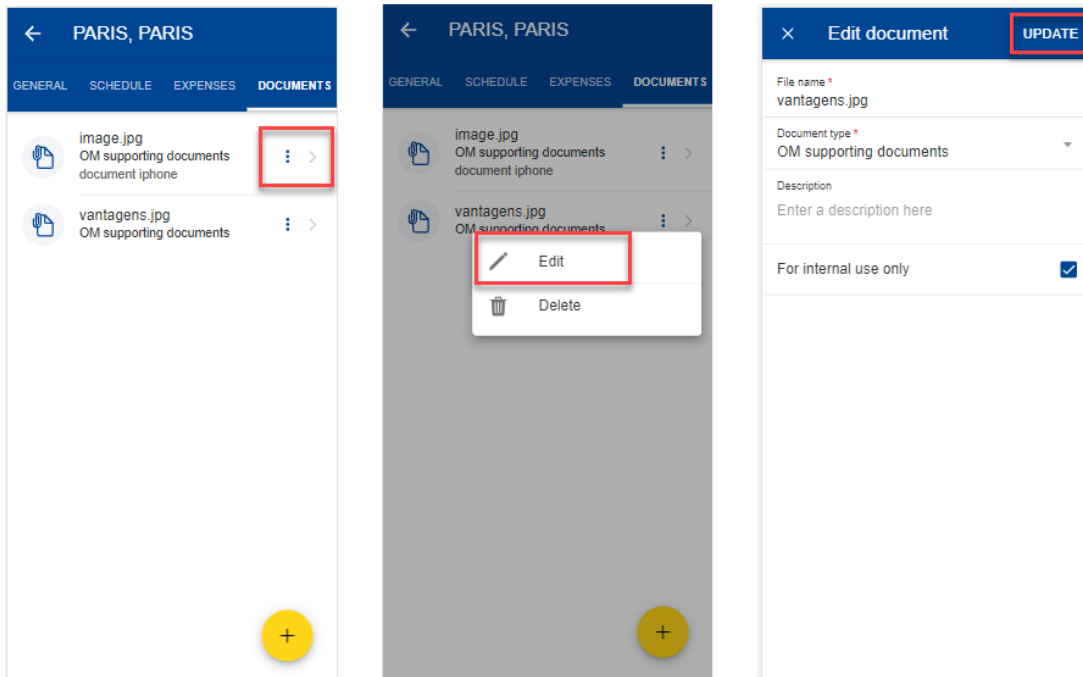
- 1) Select “My missions” from the service list.
- 2) Select the mission.
- 3) Select the “Documents” tab.
- 4) Tap on the  icon next to the document to delete and select “Delete”.
- 5) The App deletes the document and confirms the operation.



11.7. Edit mission documents

To edit a document, follow the steps:


- 1) Select “My missions” from the service list.
- 2) Select the mission.
- 3) Select the “Documents” tab.
- 4) Tap on the  icon next to the document to edit and select “Edit”.
- 5) When needed, update the file name, document type, description and “for internal use only” flag.
- 6) Press “Save”
- 7) The App updates the document metadata and confirms the operation.

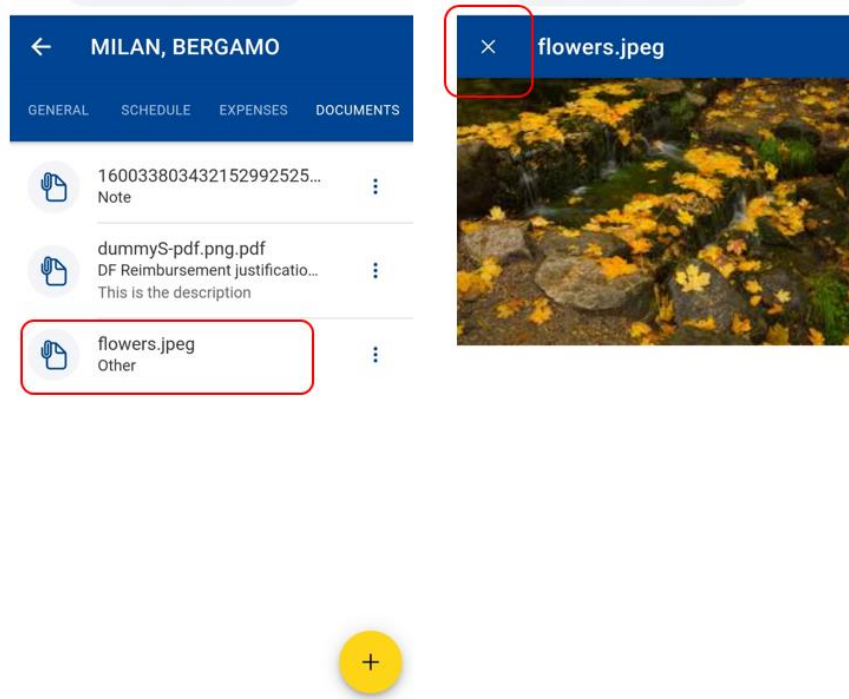


11.8. View mission documents

To view a document, follow the steps:

- 1) Select “My missions” from the service list.
- 2) Select the mission.
- 3) Select the “Documents” tab.
- 4) Select on the document to display.
- 5) The App opens the document in a preview window.

- 6) Close the preview window by tapping on the  icon or on the BACK key.

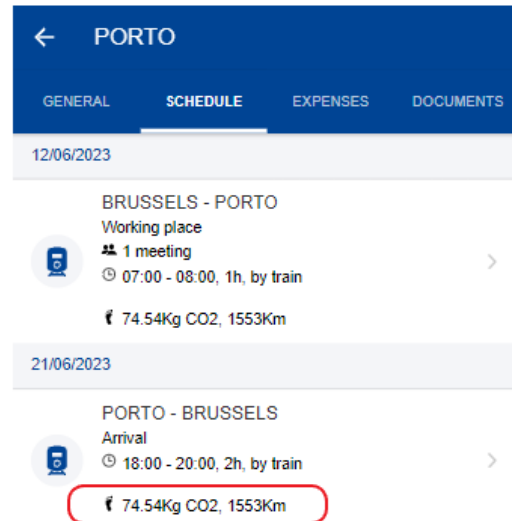
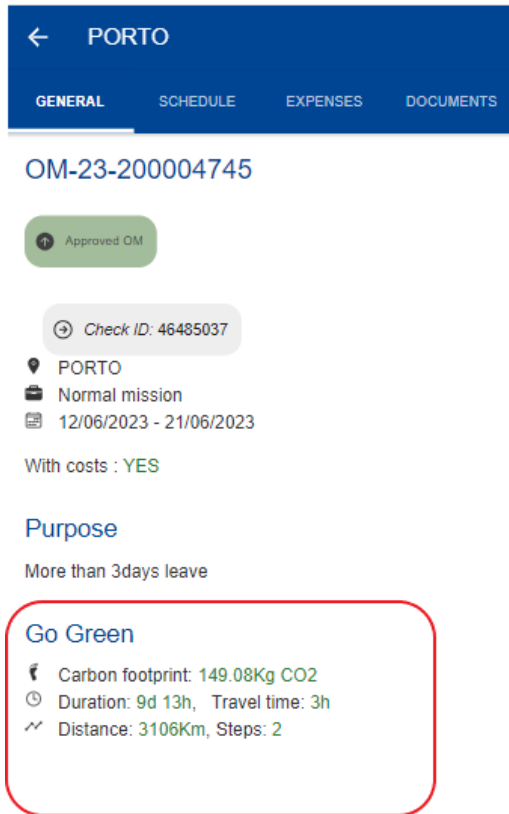


11.9. Go Green

As a part of the greening initiative of the European Commission, the total carbon footprint of the mission will be displayed in your mission details. The carbon footprint is calculated automatically based on the input data: distance to destination, transportation type, etc


You can see the carbon footprint in the mission's details and also broken down for each travel segment.

- 1) Select "My missions" from the service list.
- 2) Go to Mission details.
- 3) Carbon footprint, for the complete mission, is displayed under Go Green paragraph (left below).
- 4) Go to Mission Schedule.
- 5) Carbon footprint for the travel segment is displayed under each travel segment (right below).

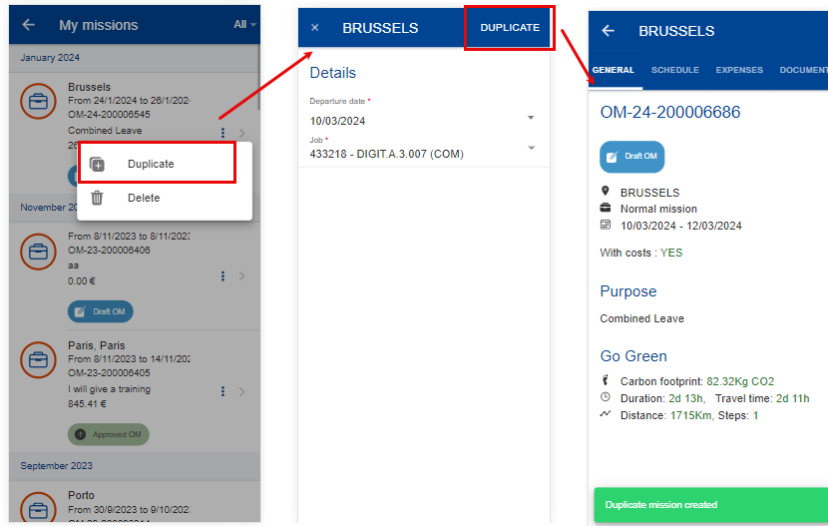


11.10. Duplicate a mission

A mission can be duplicated in any status or type (OM, DF, DL).


- 1) Select “My missions” from the service list.
- 2) System displays your list of missions.
- 3) Select a mission and tap on the  icon.
- 4) Choose Duplicate from the list of possible actions.
- 5) Select a new departure date and select a job for mission.
- 6) Tap on Duplicate button on top right.
- 7) System displays the details of the new duplicated mission.

Note: You are not able to modify any details in the newly duplicated mission on the mobile application. You will need to go to the MIPS desktop application should you want to further modify your duplicated mission.

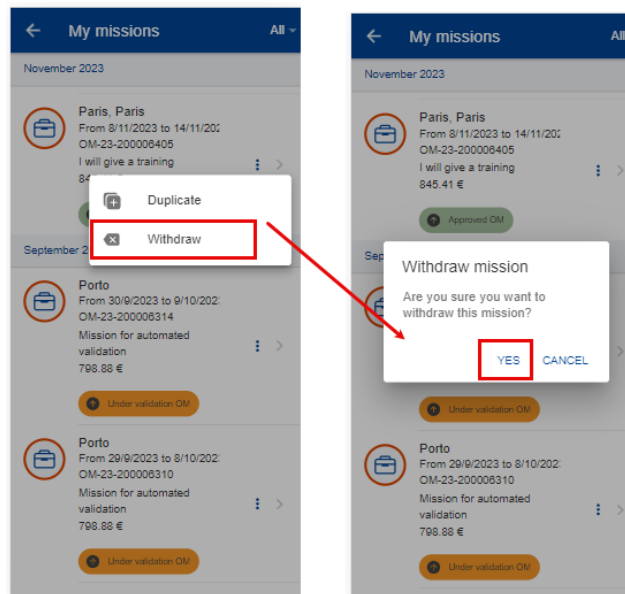


11.11. Withdraw a mission


You can only withdraw a mission that has been previously approved.

- 1) Select “My missions” from the service list.
- 2) System displays your list of missions.
- 3) Select a mission and tap on the  icon.
- 4) Choose Withdraw from the list of possible actions – if Withdraw option does not appear, your mission is not in the correct status (Approved).
- 5) System asks your confirmation.
- 6) If you tap Yes, system shows a confirmation of the withdrawal and changes the status of the mission to Draft (DF)/Cancelled.

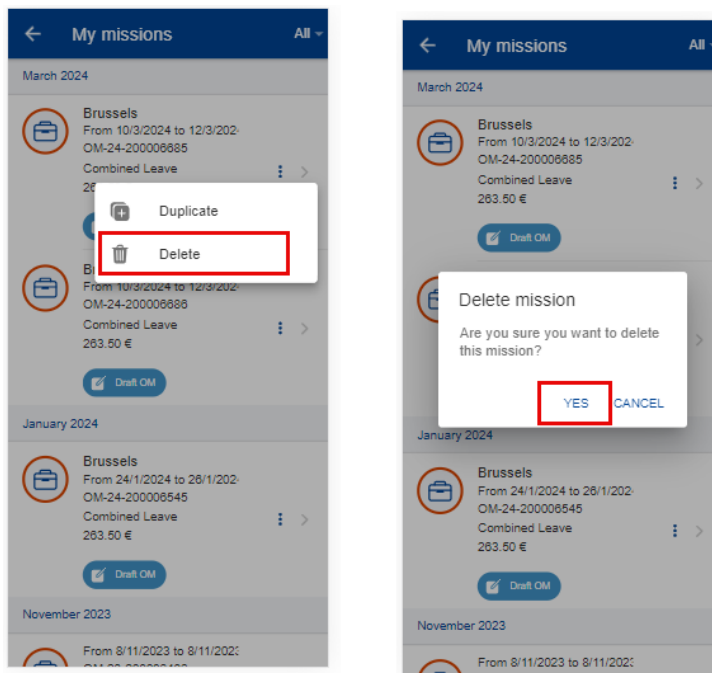
Note: It remains possible to insert cancellation fees if necessary, but only on the desktop application.



11.12. Delete a mission

- 1) Select “My missions” from the service list.
- 2) System displays your list of missions.
- 3) Select a mission and tap on the  icon.
- 4) Choose Delete from the list of possible actions - if the Delete option is not available, the mission is in a status that does not allow you to delete it.
- 5) System asks your confirmation.
- 6) If you tap Yes, system shows a confirmation of the delete action and the mission no longer appears in your missions list.

Note: A mission can only be deleted when it is in Draft status.



12. MISSIONS VALIDATION (MiPS)

As soon as the Mission Order (OM) is signed, the immediate superior is informed automatically (via a notification) that a mission has to be signed. Same procedure for the Authorising Officer (notification sent as soon as OM was signed), who may approve or refuse the mission.

The following menus are only shown for users with permissions to see them and to perform the respective actions.

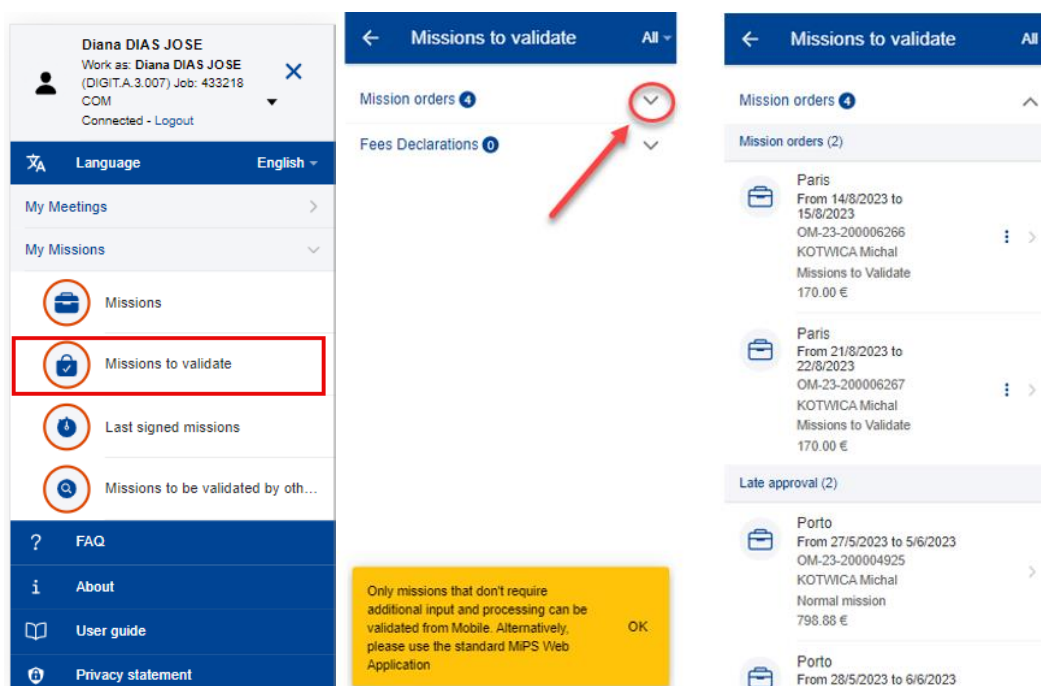
12.1. Missions to validate

From the service list, you should select “Missions to validate” to view all missions assigned to him/her for validation.

Only missions that don't require additional input and processing can be validated from MyPMO. Alternatively, you can use the standard MiPS Web Application.

The existing missions to validate are displayed grouped in sections of:

- Mission orders;
- Fees declarations
- To validate once viewed (visible only when missions under this category are available).



“Mission orders” section displays missions to be validated organized by the following categories:


- Mission orders
- Long term
- Late approval
- More than 3 days of holidays

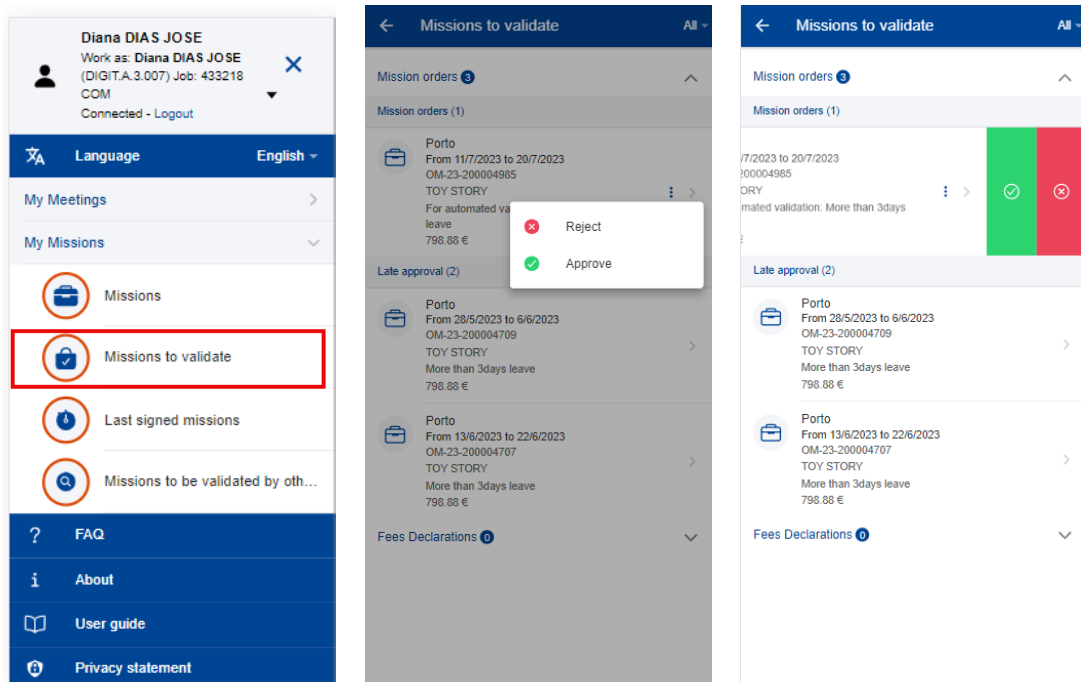
- With combined periods
- Organizer
- With advances

These sections display (e.g. (2)) the number of missions to be validated within each of them. For the moment only missions under “Mission orders” can be validated on MyPMO as they do not require additional information.

12.2. Mission approval

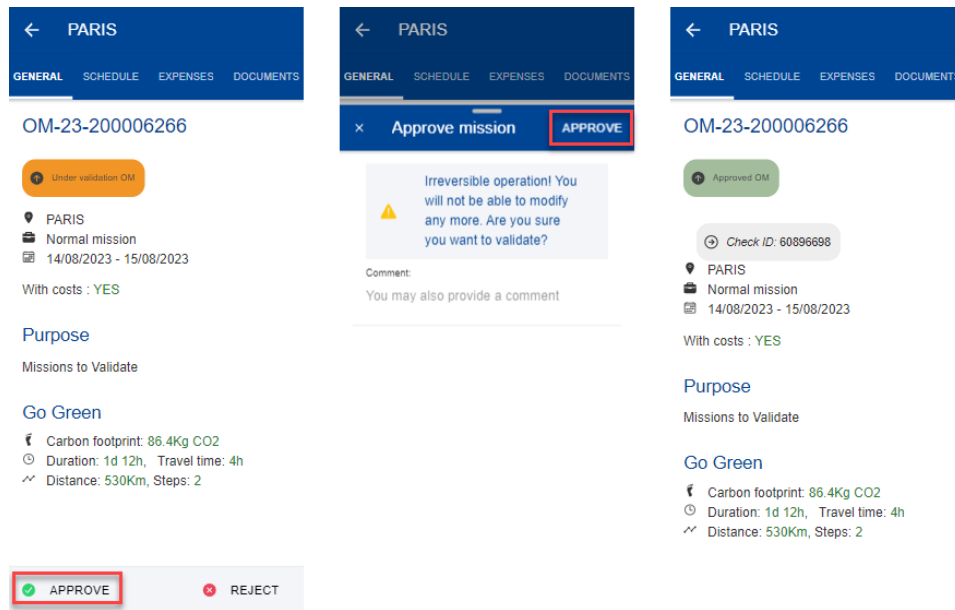
An user with permissions to validate a mission can approve a mission by the following the next steps:

- 1) Select “Missions to validate” from the service list.
- 2) On each mission to validate, you can swipe left the mission or tap the three dots button  , then the Approve/Reject actions are displayed.




- 3) Tap “Approve”.
- 4) A pop up is displayed to confirm the action and informing you that it is an irreversible operation (below middle screen)
- 5) Provide a comment, if needed, not mandatory.
- 6) You can approve the mission by tapping “APPROVE” on the top right.
- 7) The mission status change to “Approved OM”.

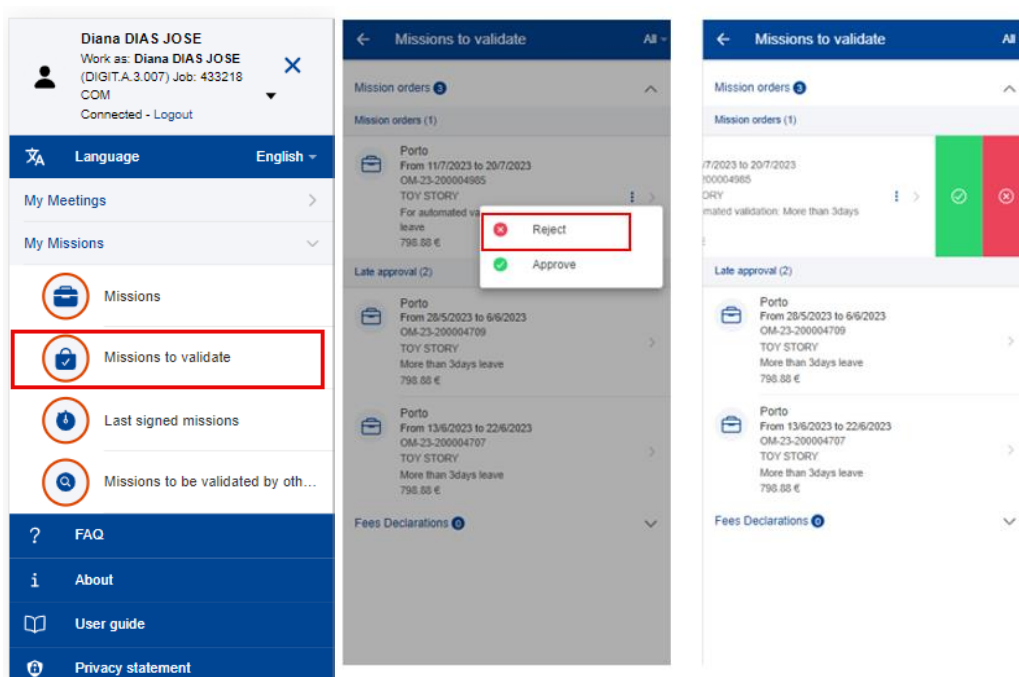
Note: You can also navigate to mission details to check all mission related details (except “Warnings” tab which is not visible on Mobile) and from there tap on the APPROVE button on the bottom left.



12.3. Mission rejection

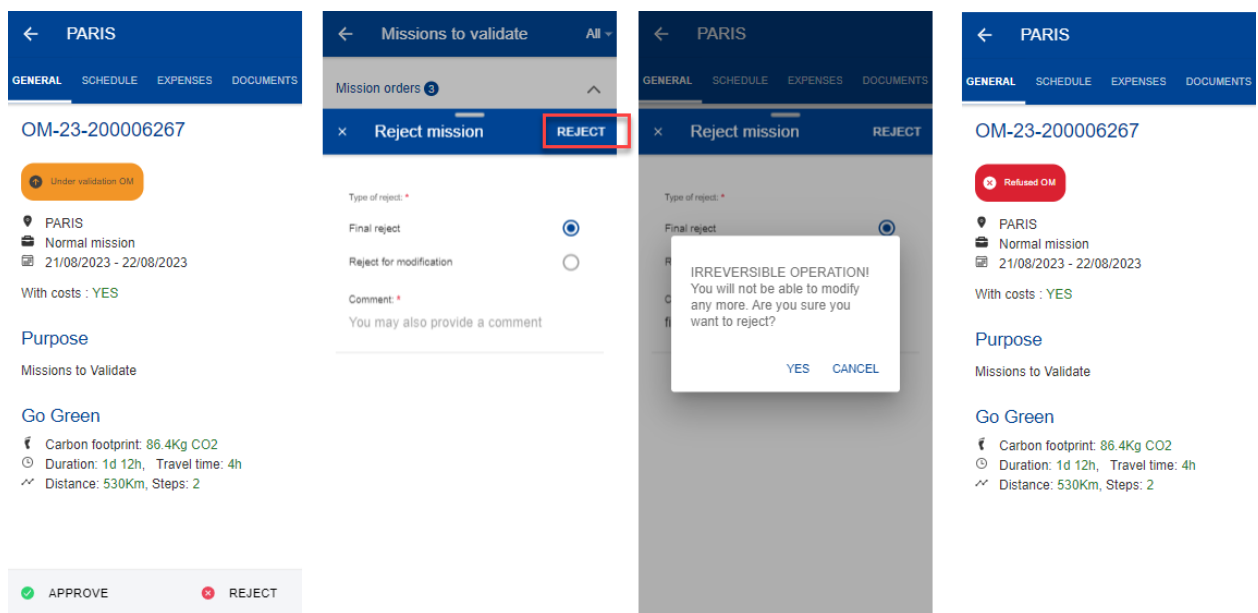
An user with permissions to validate a mission can reject a mission by the following the next steps:

- 1) Select “Missions to validate” from the service list.
- 2) On each mission to validate, you can swipe left the mission or tap the three dots button , then the Approve/Reject actions are displayed.



- 3) Tap “Reject”.
- 4) A pop up is displayed to confirm the action.
- 5) Select the Type of request: “Final reject” or “Reject for modification”
- 6) Provide a comment, which is mandatory.
- 7) You can reject the mission by tapping “REJECT” on the top right.
- 8) A pop up informing you that it is an irreversible operation is shown. If tap “YES” the rejection is performed, if “CANCEL” no action is taken.

Note: You can also navigate to mission details to check all mission related details (except “Warnings” tab which is not visible on Mobile) and from there tap on the Reject button on the bottom left.



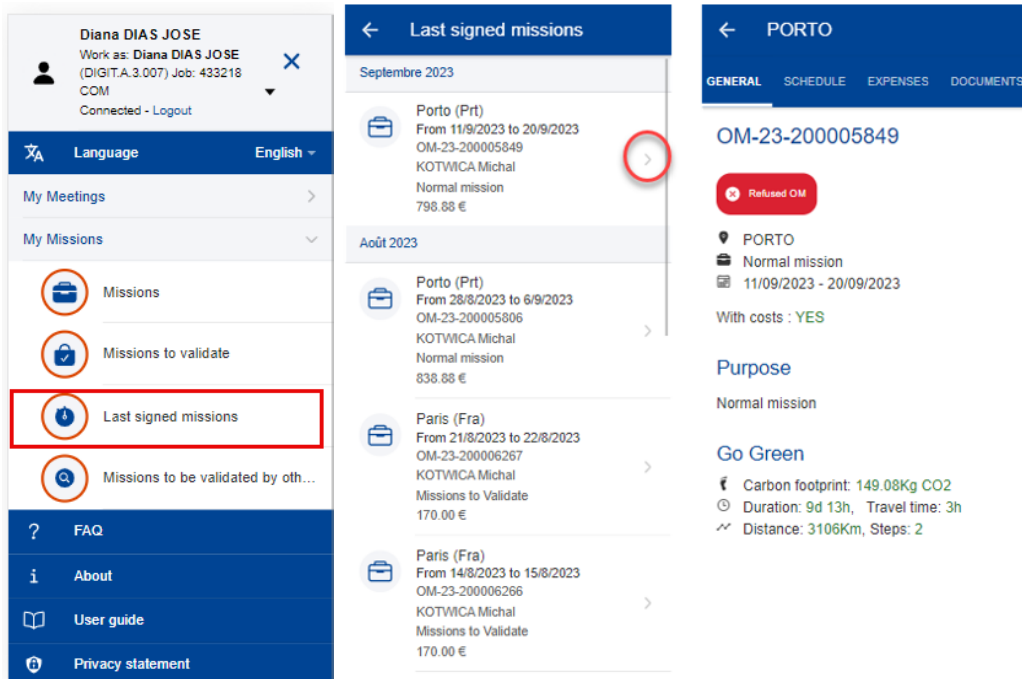
12.4. Last signed mission

On this menu the validator can see the last missions signed by himself. These missions are read-only for the validator.

From the service list, select “Last signed mission” menu and the list of last missions signed with the current job will be displayed.

To see the mission details and current status you can tap on the mission.

The menu is only visible for users with permissions to validate missions.



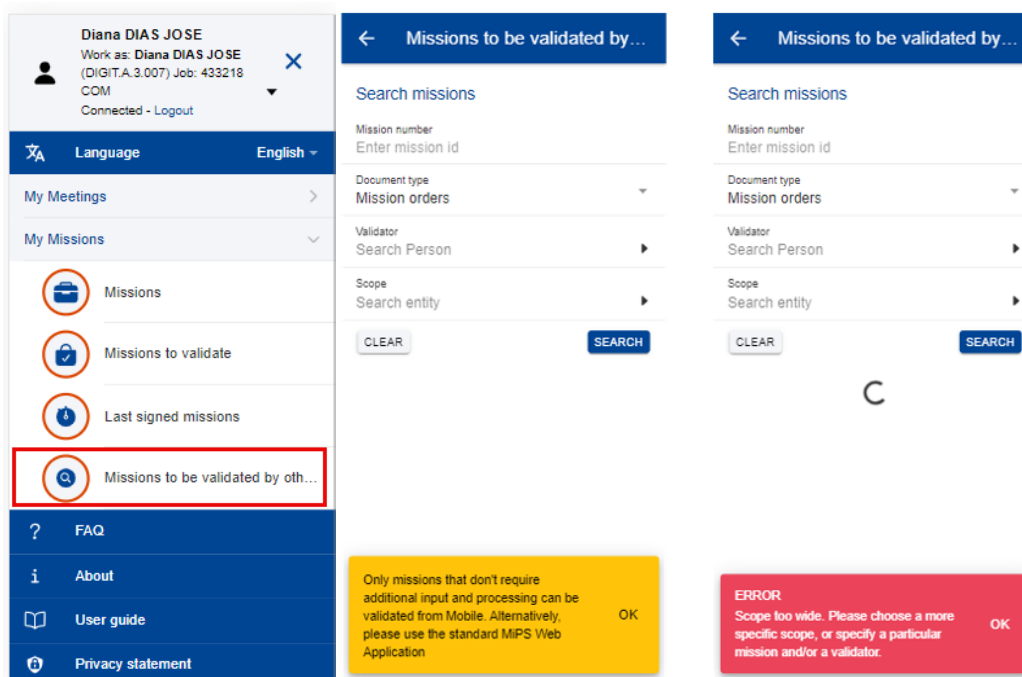
12.5. Missions to be validated by others

On this menu, a user with permissions, can search and view missions assigned to other users for validation.

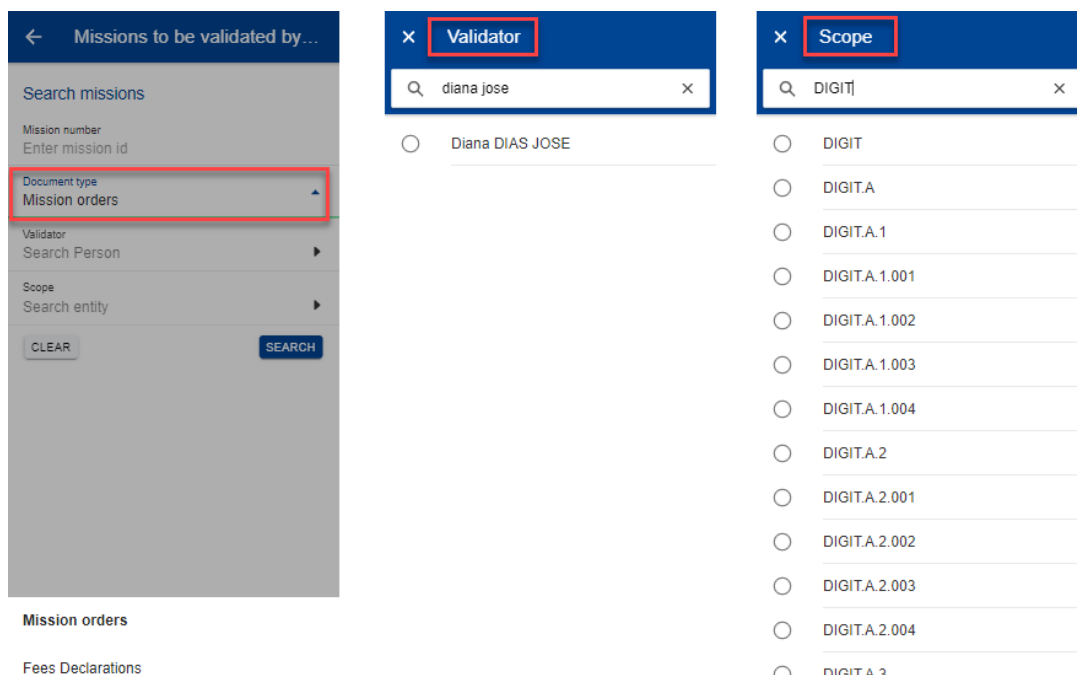
By selecting “Missions to be validated by others” on the service list you will be sent to the search page where you can search missions to be validated using the following criteria:

- Mission number (please notice this is not mission reference number, it’s the mission *numeric ID*)
- Document type: “*Mission orders*” (selected by default) or “*Fees Declarations*”
- Validator (*search person*)
- Scope (*Search entity*)

“Search” button to perform the search based on the filled criteria and “Clear” button to clear all the already encoded data.

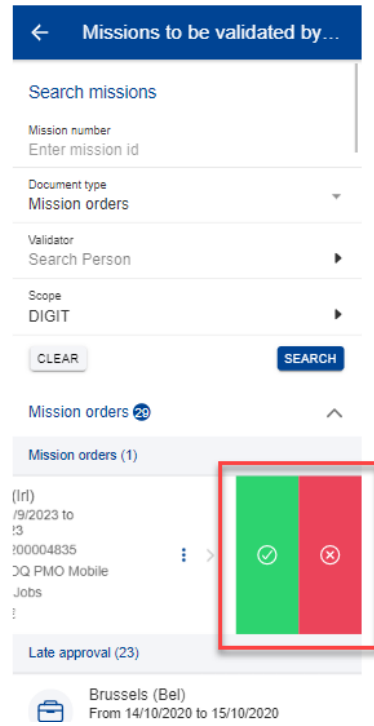
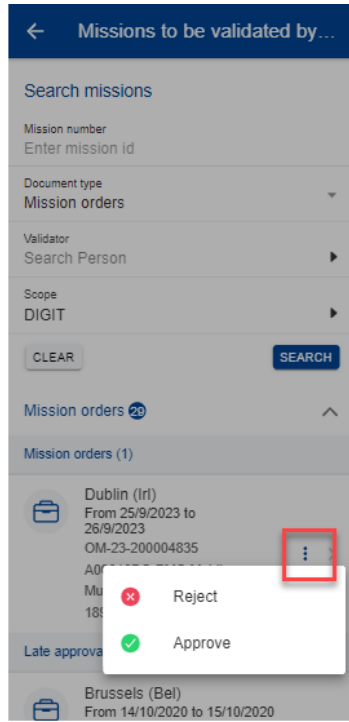
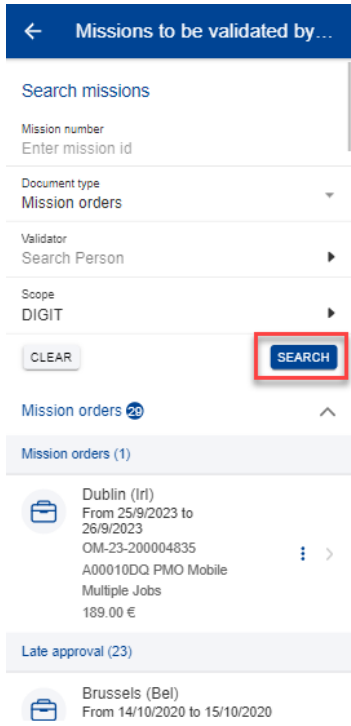


You can use single or multiple search criteria to narrow down search as needed. If the scope is too wide to perform the search an alert message is displayed and the user should fill more criteria (examples below).



From the results you can proceed with approval/rejection, it works the same way as in "Missions to validate".

Following the same rules as in the previous menus, only missions that do not need additional information can be validated from here, such as "Mission orders".

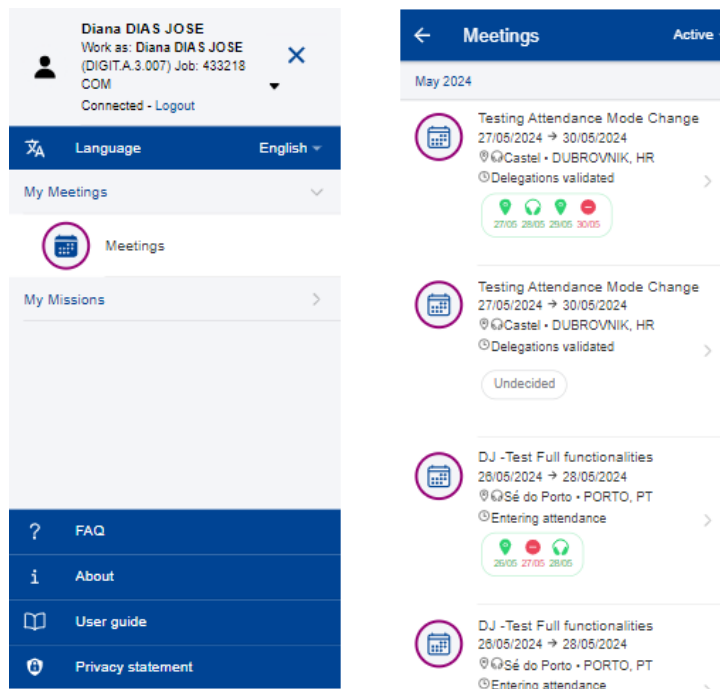


13. MEETINGS (AGM)

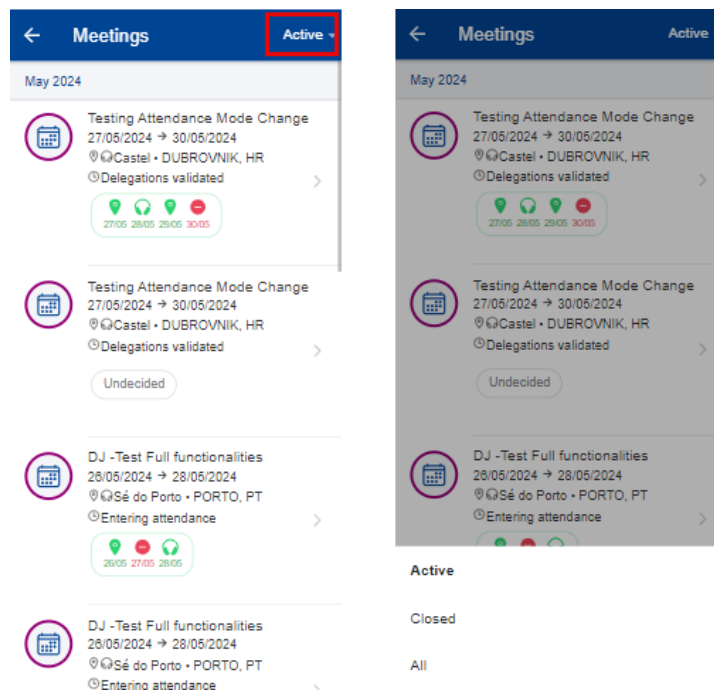
13.1. View meeting list

You may view the list of meetings you have been invited to by selecting “My meetings” on the service list.

For each meeting, the App displays the title, start and end dates, address (venue), country, meeting status and whether the meeting has been accepted, rejected or pending decision.



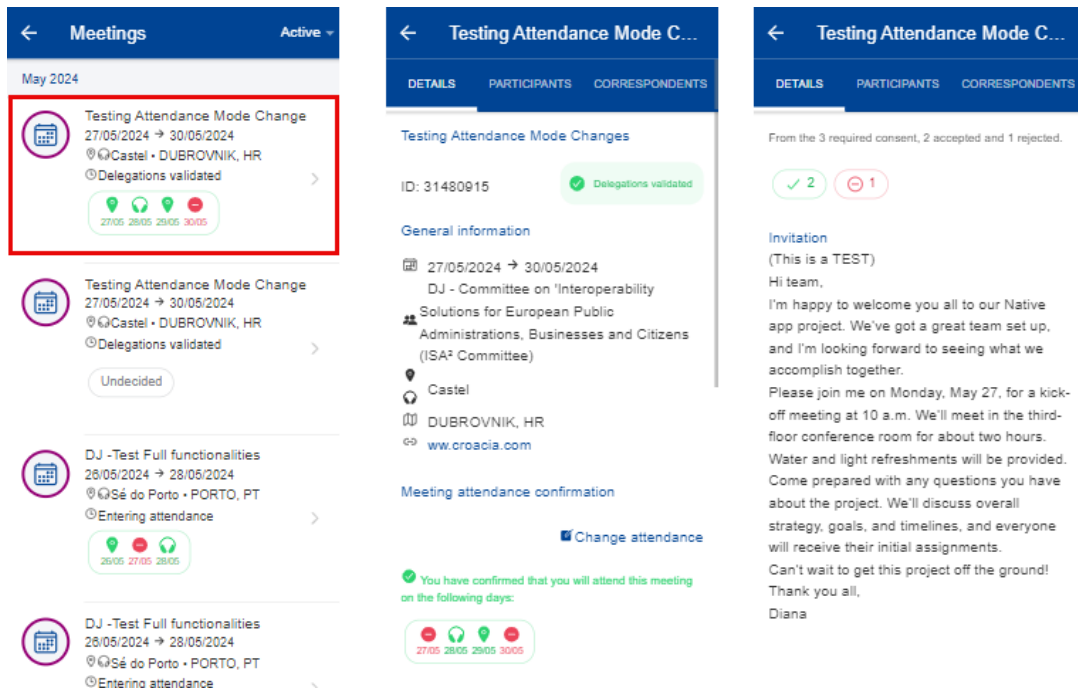
You may view all meetings or only the active or closed meetings. To do so, select the filter option as follows:



13.2. View meeting details

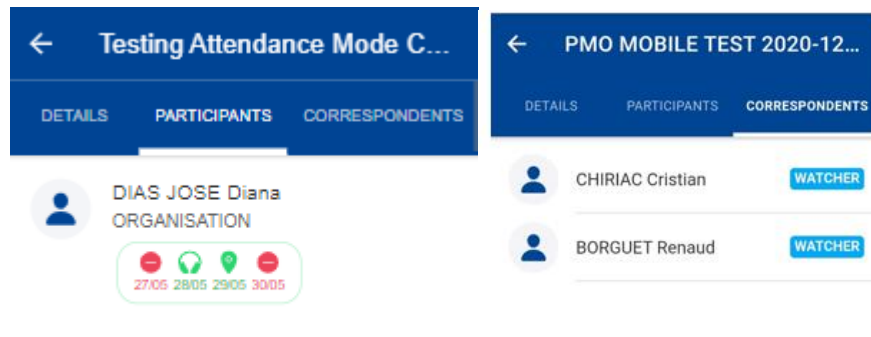
You may view the details of a meetings by selecting the meeting from the meetings list. The MyPMO App displays the following details:

- Title
- ID
- Status
- Dates
- Group
- Venue
- Link (to connect to the virtual meeting)
- Invitation content
- The invitation attachments. (to view/download an attachment, tap on the attachment).



Select the “Participants” tab to view the participants list, under the same member, and dates for which they accepted/rejected the meeting.

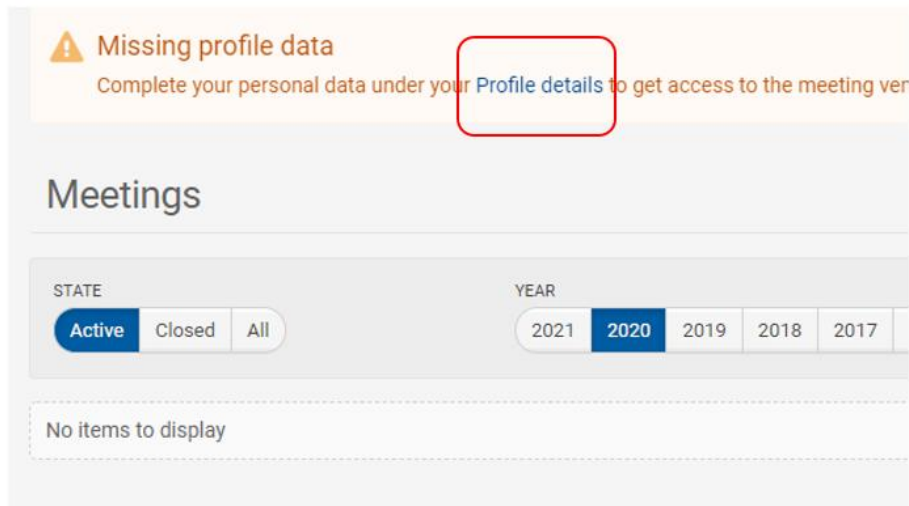
Select the “Correspondents” tab to view the list of correspondents and watchers, under the same member.



13.3. Accept/Reject meeting invitation

When receiving for the first time an invitation to a meeting, you must activate your profile in the AGM front-office application. This can only be done on the desktop application, not on MyPMO.

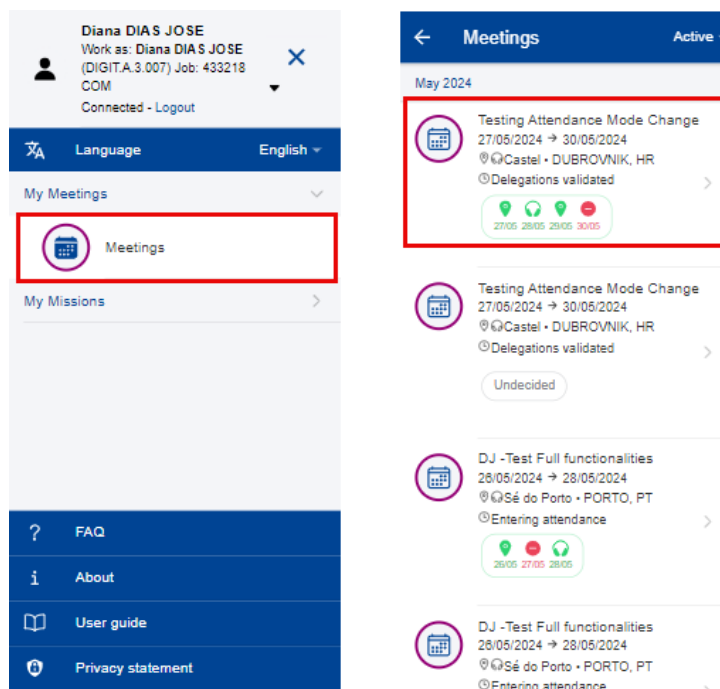
Desktop application link: <https://webgate.ec.europa.eu/tools/aggm/fo>



Once the profile details are completed, meetings to which you were invited are displayed in MyPMO and can be accepted or declined from the meeting details page.

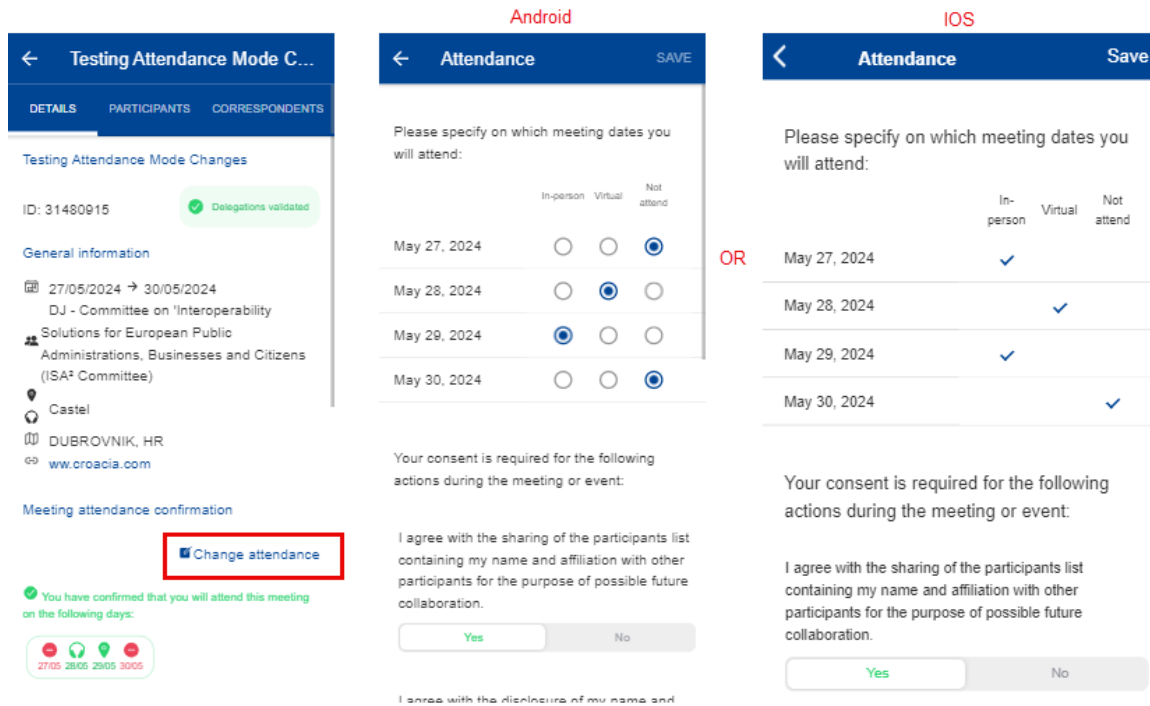
To accept/reject a meeting in MyPMO, follow the steps:

- (1) Select “Meetings” from the service list.
- (2) Select the meeting from the list of meetings.

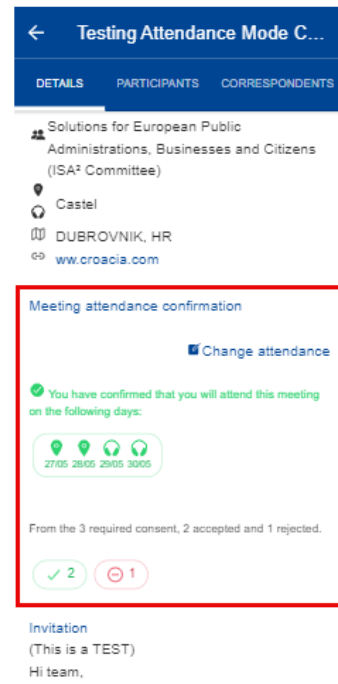
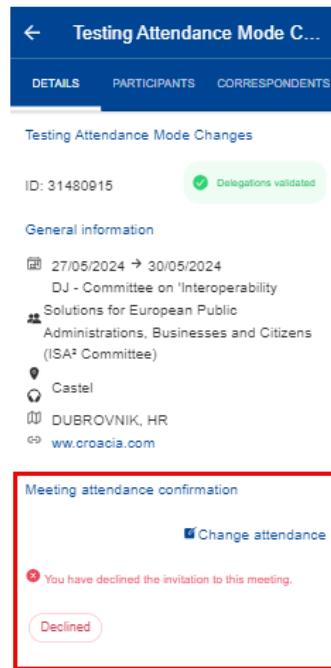
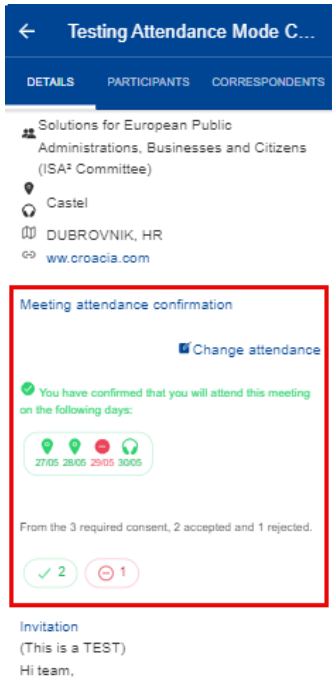


- (3) In the “Details” tab and tap on the “Change attendance” link.

- (4) The app displays the meeting invitation date(s).
- (5) Select the day(s), in accordance with the intention to attend (or not) this meeting, and the attendance mode in case of hybrid meeting.



- (6) For meetings with User Consent required, the list of consent is shown, these consent can be:
 - (a) the type that needs an explicit consent (accept/reject) for some actions that will be carried out during the event.
 - (b) or statements for information only, which the invitee cannot reject it.
- (7) Save (the “save” button is only enable after all required answers are given)



After saving, the overview of the answers given are displayed, for the attendance days, the mode and the consent.

You can change the attendance at any moment until the meeting takes place.

14. TROUBLESHOOTING

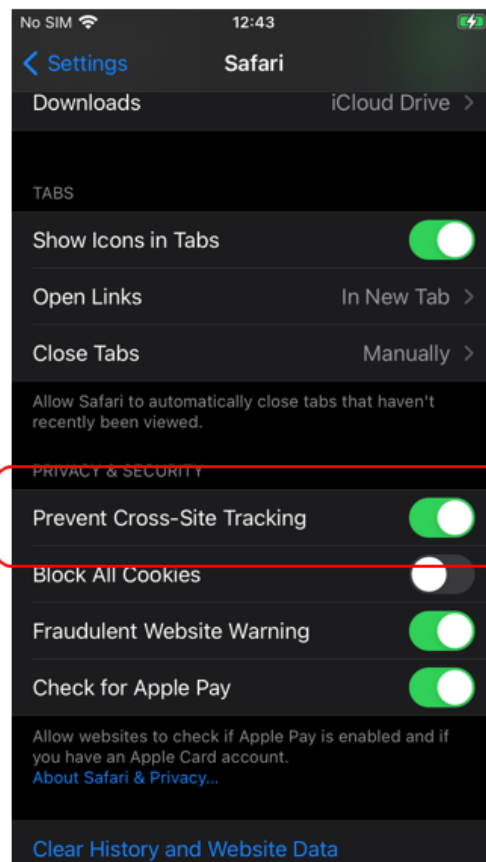
14.1. Client Failure Limit Exceeded

Problem:

When loading MyPMO on browser, iPhones upgraded to iOS version 14 may enter a loop between EU Login and MyPMO (screen switching back and forth between both screens). After a while, EU Login will stop and show a message like “Client Failure Limit Exceeded”.

Solution:

You go to iPhone's settings for Safari, then scroll down to find the “Prevent Cross-Site Tracking” option. If this setting is set to ON (as in the screenshot below), switch it to OFF.



Switch to OFF