

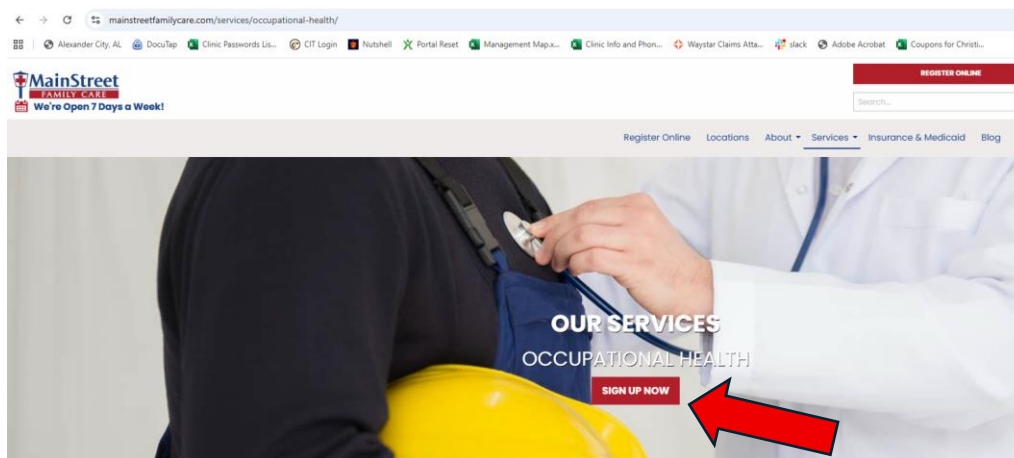


## **Occupational Medicine and Worker's Compensation Navigation Guide:**

### **How to set up an account in the Sigma employer portal:**

1. Go to our website page below and click "Sign Up Now."

<https://www.mainstreetfamilycare.com/services/occupational-health/>



2. Add your email address, confirm your email, and click "Next."

A screenshot of the "Employer Portal Sign Up" form. The form has a white background with a light gray border. It contains two input fields: "Enter your Email Address" and "Confirm your Email Address". Below these fields are two blue links: "Click Here to Sign In" and "Click Here for Support". At the bottom of the form is a large blue button labeled "Next". Two large red arrows point to the email input fields.

3. You will then see the following pop-up boxes.

One-Time Passcode

A one-time passcode has been sent to acmorrow6@gmail.com

Employer Portal Log in

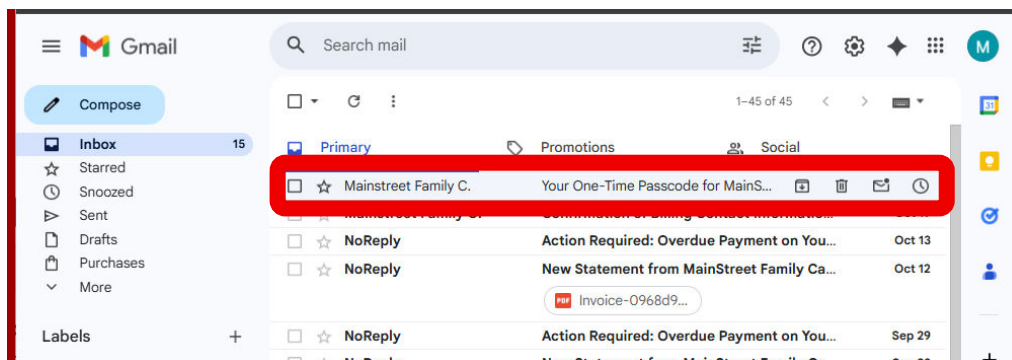
Enter One-Time Passcode

[Click Here to re-send code](#)[Click Here for Support](#)

< Back

Submit

4. Check your email for the registration code. If you do not see the email in your inbox, please check your junk folder.



5. Go back to the pop-up and enter the passcode from your email.
6. You will now have to fill out information about your company. If your company does NOT have a third-party administrator, please answer “No” to the first question. (TPAs pay the bill for these services instead of the company) If you are a TPA OR your company has a TPA, then select yes. After this screen is completed, hit “Next” in the bottom right corner.

## Account Type

Are you a TPA (third-party administrator)? ☐ Yes ☒ No

Please complete all fields

## Company Information

Company Name MainStreet Test 123	Store/Location # Store Location	Billing Address 123 MainStreet North Pole	Address Line 2 Address Line 2	City Birmingham
State Alabama	Zip Code 35203	Phone (256) 791-1175	Fax	Email acmorrow6@gmail.com

## Account Administrator Contact Information

Name Christine Morrow	Phone (256) 791-1175	Email acmorrow6@gmail.com
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## Billing Contact Information

Name Christine Morrow	Phone (256) 791-1175	Fax (205) 555-5555	Email acmorrow6@gmail.com
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## Assign a Vendor #

Assign a vendor

&lt; Back

Next &gt;

7. The next screen is the Third-Party Administrator screen. If you are a company that has a Third-Party Administrator (TPA) that will be paying for your services, please add this information to this screen. If you do not, please select "No" and hit "Next."

## Third-Party Administrator

Do you have a TPA? ☐ Yes ☒ No

## TPA Information

TPA Name Enter or search TPA name	TPA Billing Address TPA Billing Address	Address Line 2 Address Line 2
City City	State Select State	Zip Code Zip Code
Phone Phone	Fax Fax	Email Email
Contact Name Contact Name		

&lt; Back

Next &gt;

8. If you are using your own chain of custody for drug tests, please complete the lab information on the next screen. Your employee will need to bring this chain of custody to the visit. If you are using our lab account (our chain of custodies), select "No," and hit "Next."

Do you have your own Lab account? ☐ Yes ☒ No

## Lab Information

Lab Name Lab Name	Phone Phone	Account Number Account Number
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## MRO Information

MRO Name MRO Name	Phone Phone	Fax Fax
----------------------	----------------	------------

&lt; Back

Next &gt;

- This information can be located on your chain of custody in the top right hand side. Please see the redacted example below:

1. Rights reserved. 00262015 FED. Revised 12/14 SCZK - 111192.

A. Employer Name, Address, I.D. No.

B. MRO Name, Address, Phone No. and Fax No.

C. Donor SSN, Employee I.D., or CDL State and No.

D. Specify Testing Authority: ☐ HHS ☐ NRC Specify DOT Agency: ☒ FMCSA ☐ FAA ☐ FRA ☐ FTA ☐ PHMSA ☐ USCG

E. Reason for Test: ☐ Pre-employment ☒ Random ☐ Reasonable Suspicion/Cause ☐ Post Accident ☐ Return to Duty ☐ Follow-up ☐ Other (specify) \_\_\_\_\_

9. If you will be using the clinic for workers compensation, please add your work comp carrier information on this screen. Be sure to mark if you need a rapid drug screen for your injured worker.

Will you be sending employees in for Worker's Compensation visits? ☐ Yes ☒ No

**Work Comp Carrier Information**  
Please use Search below to find your carrier and plan. If you cannot find your carrier and plan, please fill out this page and our team will verify the information entered.

Work Comp Carrier:  Work Comp Plan:  Claims Address of Carrier:  City:

State:  Zip:  Phone:  Fax:

Email:  Contact Name:

Do you want all worker's compensation visits to include a rapid in-house drug screen? ☐ Yes ☒ No

[< Back](#) [Next >](#)

10. Next you can select your favorite services. What are favorite services? It is a way to standardize the services you are most likely going to be using at MainStreet. If you will be using MainStreet for a drug screen and DOT physical only, add those services to your favorite list to keep them at the top of your list.

**Add services to your favorites list for easy scheduling:**

Select Services

Select a service for Physical to edit preferences:

☐ DOT Physical Follow-Up \$25.00

☒ DOT Physical \$100.00 ☐ ☐

Select Payer

MainStreet Test 123

☐ Work Physical \$80.00

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11. Now select the way you would like to receive the bill.

- a. If you want or need to receive something via mail, please select option 2.

☐ **Option 1: Standard Billing**  
Most Flexible

- Pay anytime through your portal
- Option to prepay for visits for a worry-free experience
- Balances due immediately after each visit
- A payment method is required to be put on file, but can be changed later

[Add Payment Method](#)

☐ **Option 2: Bill Me Later**  
Traditional Billing Cycle

- Receive a statement every 14 days
- Option for mailed statements
- Payment is due 15 days after statement is sent

[< Back](#) [Next >](#)

12. Select how you would like your statement delivered, whether you would like paperless billing or not.

Please choose how you want your statements delivered:

☐ Electronic (email) Only
 ☒ Electronic (email) + Paper Statements

Please confirm or edit your mailing address where you will receive paper statements:

Address line 1: 123 MainStreet North Pole

Address line 2:

City: Birmingham

State: Alabama

Zip: 35203

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### 13. Sign the portal agreement and you are ready to go!!!

Please agree to our Employer Portal terms and conditions.

[CLICK HERE TO VIEW TERMS](#)

Name:

☐ I Agree

< Back Submit

**CONGRATULATIONS! You have successfully created your account.**  
**Now let's showcase what the new employer portal can do for you.**

## PORTAL NAVIGATION

- Under the first tab in your portal, you can **view your invoices and make payments**. You can also run a statement by using the filters on this screen. For example, if you would like to **run a statement/invoice** for June you will type in June 1, 2025, in the Start Date and June 30, 2025, for the end date. Now select "Print Statement" in the top right corner.

**MainStreet HEALTHCARE** Logout

**Invoices & Payments** Print Statement View Last 60 Days

Start Date: MM/DD/YYYY End Date: MM/DD/YYYY Employee Name: Employee Name Employee DOB: MM/DD/YYYY

Total Amount Due: \$0.00 Clear Filters Pay All Pay Selected

Date	Age	Invoice #	Clinic	First Name	Last Name	DOB	Service	Charges	Adjustments	Payments	Amount Due	Status	Options
<div>Previous Page 1 of 0 Next</div>													

When you run a statement, it will look like this.

1 / 1 100% +

**MainStreet**  
FAMILY CARE  
Account Statement

Statement Date: 10/23/2025 Vendor #

Company Name :MainStreet Test 123  
City,Birmingham

Call  
9876543212  
m-f 8am-5pm CST

Send a Message  
Login to your Employer Portal and click the "Messages" tab  
[employer.mainstreetfamilycare.com](#)

Total Invoice Amount: \$0.00  
Total Adjustments: \$0.00  
Total Payments: \$0.00  
Total Due: \$0.00

Questions about this statement?

Questions about results?

Login to Portal  
Login to your Employer Portal and click the "Results" tab  
[employer.mainstreetfamilycare.com](#)

Date	Invoice #	Clinic	First Name	Last Name	Service	Charges	Adjustments	Payments	Amount Due	Status
------	-----------	--------	------------	-----------	---------	---------	-------------	----------	------------	--------

2. Under the second tab "Schedule Visit," you can now **SCHEDULE YOUR EMPLOYEE** in advance by following these steps:

- Select Schedule Visit

**MainStreet**  
FAMILY CARE

Invoices & Payments  
**Schedule Visit**  
Results  
Messages  
Settings

**Schedule Visit**

Choose a time for the employee to arrive at the clinic today or tomorrow

Select State Select Clinic

Next >

- Choose the state and clinic location you plan to send your employee to. Then select the approximate time slot your team member would like to arrive at the clinic. Please keep in mind this slot is an estimated time to be seen, and heavy volume may mean there is an additional wait.

**Schedule Visit**

Choose a time for the employee to arrive at the clinic today or tomorrow

Alabama Alexander City

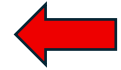
**Important Notice:** If the location you're looking for is not shown, this means the location is still using our previous system. To schedule an occupational medicine or worker's compensation visit at these locations register your employee online at [MainStreetFamilyCare.com/online-registration/#location-select](https://MainStreetFamilyCare.com/online-registration/#location-select)

**Alexander City**  
2508 Hwy 280, Alexander City, AL 36010

Today Thursday, October 23rd		Tomorrow Friday, October 24th	
5:10 PM	5:43 PM	6:49 PM	7:11 PM
7:22 PM	7:33 PM	7:44 PM	7:55 PM

↓ Click here to view times at nearby locations

Next >



- Add your employees' information. Be sure to add THEIR cell number so that they will receive text message notifications on their registration process. Be sure to select the service we need to complete for your team members at the bottom of this screen. The staff will only complete the services you select. You can also upload specific forms that you need the staff to complete.

**Schedule Visit**

**Clinic and Date Selection**  
Alexander City  
2025-10-23 07:33 PM [Change](#)

**Employee Information**

First Name  Last Name

Date of Birth  Phone   
MUST be a valid cell phone number for employee.

Gender  
☐ Male ☐ Female

**Select Services** [Select Additional Services](#)

**Favorite Services**  
☐ DOT Physical \$100.00



- Once you press "Submit," you will receive a confirmation page with a check-in code/QR code. Your employees will use this code to check-in at the kiosk when they arrive at the clinic. If you would like to print this code, be sure to scroll down to the bottom to access the print button.



**MainStreet FAMILY CARE**  
Occupational Medicine & Worker Compensation

**MainStreet Family Care - Alexander City**  
2508 Hwy 280  
Alexander City AL, 35010

**Arrival Time:**  
Thu Oct 23 2025 7:33 PM

**What to bring:**

1. These instructions
2. Your valid driver's license
3. Any misc forms, equipment, etc. that you need for your visit

**Arrival Instructions:**

1. When you arrive at the clinic, please proceed to one of our self check-in kiosks and click the option to enter a check in code.
2. Enter your check in code or hold up this paper with the QR code in front of the camera

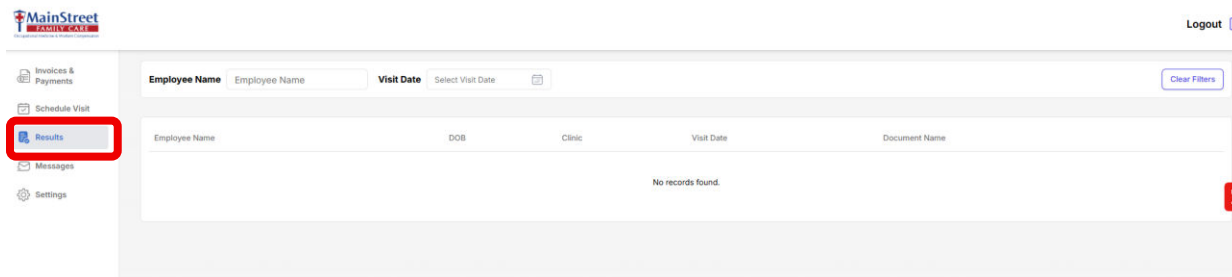
**WVHT**

3. Follow the directions on the kiosk.
4. After completing everything on the kiosk, have a seat in our waiting room and a MainStreet employee will call you back when it's your turn.

Show this QR Code to the kiosk camera



3. Under the third tab labeled “Results,” you can view your employees’ **RESULTS**. Once the visit is completed, the staff will send the results to the email provided during account set-up.
  - To locate results for a specific employee you can use filters to search by Employee Name and visit date. Once you locate your employee, please click the paper clip under document name to download your team members’ results.



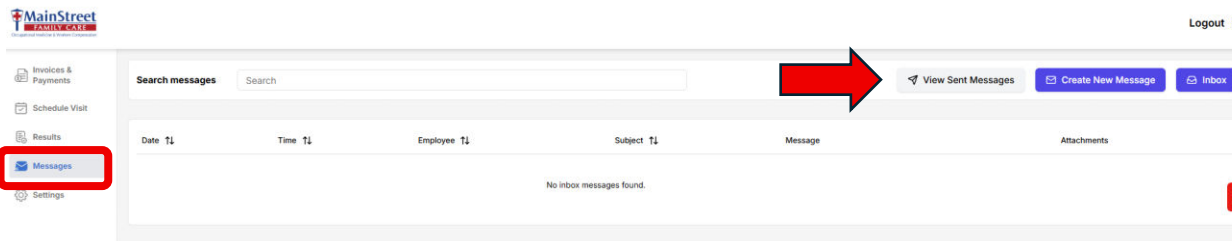
**MainStreet FAMILY CARE** Logout

Invoices & Payments Schedule Visit **Results** Messages Settings

Employee Name  Visit Date  [Clear Filters](#)

Employee Name	DOB	Clinic	Visit Date	Document Name
No records found.				

4. Under the fourth tab, “Messages,” you can **MESSAGE** our team directly if you have any questions or concerns. You will select “Create New Message”.



**MainStreet FAMILY CARE** Logout

Invoices & Payments Schedule Visit Results **Messages** Settings

Search messages

[View Sent Messages](#) [Create New Message](#) [Inbox](#)

Date	Time	Employee	Subject	Message	Attachments
No inbox messages found.					

- After selecting “Create New Message” you will receive the following pop up that needs to be completed:



**Send Message** [X]

**Subject Type**  
Select a subject type [v]

**Choose Location**  
Select Clinic [v]

**Employee Name**  
Employee Name [text box]

**Employee Date of Birth**  
MM/DD/YYYY [calendar icon]

**Message Body**  
Enter your message [text area]

Choose File No file chosen

**Send Message**

5. Under the fifth tab, “Settings,” you can **control your SETTINGS**. This tab will allow you to do the following:
  - Update your **ACCOUNT INFORMATION**. You can update address, billing address, or contact information.

**Account Information**

**Company Information**

Company Name	Store/Location #	Billing Address	Address Line 2	City
MainStreet Test 123	Store Location	123 MainStreet North Pole	Address Line 2	Birmingham
State	Zip Code	Phone	Fax	Email
Alabama	35203	(256) 791-1175		acmorrow6@gmail.com

**Account Administrator Contact Information**

Name	Phone	Email
Christine Morrow	(256) 791-1175	acmorrow6@gmail.com

**Billing Contact Information**

Name	Phone	Fax	Email
Christine Morrow	(256) 791-1175	(205) 555-5555	acmorrow6@gmail.com

**Billing Settings**

Current Billing Method Selected

☐ Standard

☒ Bill Later

**Payment Methods Saved to Account**

[Add Payment Method](#)

[Discard](#) [Save Billing Info](#)

- **MANAGE USERS**- This is where you can add people who you would like to have access to schedule visits, view billing, and receive results.

**Manage Users**

User Information

Name	Type	Email	Phone Number	Status	Actions
No Results					

Add Users

- When you add a user, you can assign them a specific level of access.
  - **Admin:** access to everything including the capability to schedule, view billing, and results
  - **Billing:** access to billing only
  - **Results:** access to results only

**MainStreet FAMILY CARE**

Account Information

**Manage Users**

User Information

Name Type

Add Users

Services

TPA Information

Lab Information

Worker's Compensation Information

**Invite Users**

Fill in the details to invite a new user to the system.

First Name Last Name

First Name Last Name

Email

Email

Phone Number

Phone Number

Access Level

Select access level

Invite User Cancel

- **SERVICES:** This is where you can remove/add FAVORITE services.
- Selecting the star adds the service to your favorites list

**MainStreet FAMILY CARE**

Account Information

**Manage Users**

**Services**

Add services to your favorites list for easy scheduling:

Select Services

Select a service for to edit preferences:

☐ DOT Physical Follow-Up \$25.00

☒ DOT Physical \$100.00

Select Payer

MainStreet Test 123

☐ Work Physical \$80.00

Save

**Who can you contact if you are missing results, experience technical difficulties, or have a question about billing?**

**The best way to get in touch with us is sending a message through the portal.**

**Occupational Medicine Contact Directory:**

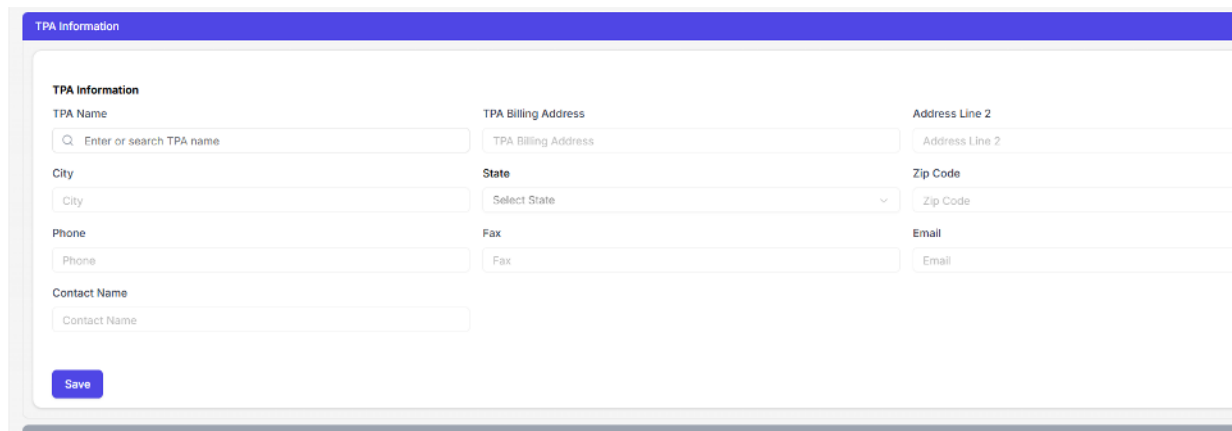
- Department Email:
  - OccMed@mainstreetfamilycare.com
- Contact for missing results, clinic questions, or Sigma issues after account set up.
  - Peyton Stanley
    - Email: [pstanley@mainstreetfamilycare.com](mailto:pstanley@mainstreetfamilycare.com)
- Contact for new account set up, account updates, or secondary contact for missing results, or clinic questions.
  - Christine Morrow
    - Email: [christinem@mainstreetfamilycare.com](mailto:christinem@mainstreetfamilycare.com)
    - Phone: 256-791-1175
- Director of Occupational Medicine:
  - Josh Lourie
    - Email: [jlourie@mainstreetfamilycare.com](mailto:jlourie@mainstreetfamilycare.com)
- Billing Department:
  - Department Email for billing questions or to send ACH remittance.
    - Email: OccMedPaymentPosting@mainstreetfamilycare.com
  - Stephanie Black
    - Email: [sblack@mainstreetfamilycare.com](mailto:sblack@mainstreetfamilycare.com)
    - Phone: 205-545-5089

**Workers' Compensation Contacts:**

- Workers Comp Billing:
  - Erica Jackson

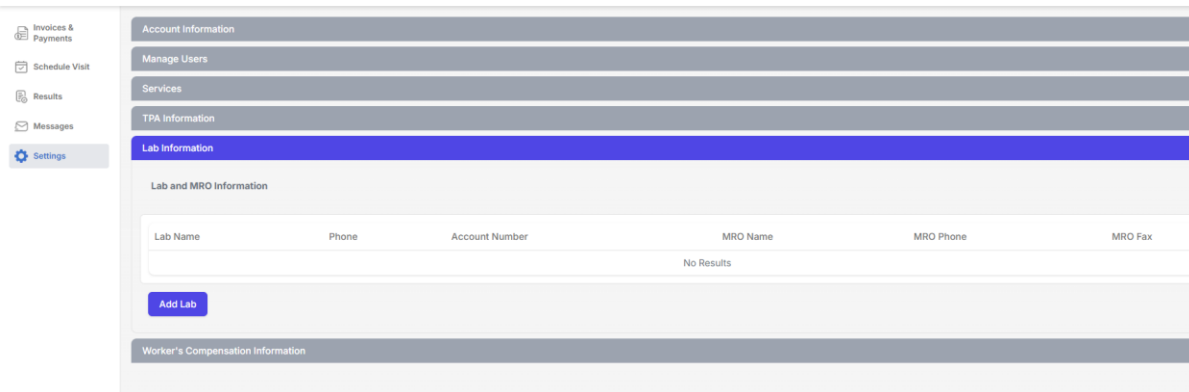
- [ejackson@mainstreetfamilycare.com](mailto:ejackson@mainstreetfamilycare.com)
- Stephanie Black
  - Director of Revenue Cycle
  - 205-545-5089
  - [sblack@mainstreetfamilycare.com](mailto:sblack@mainstreetfamilycare.com)
- Krista Rock
  - Vice President of Revenue Cycle
  - 314-604-4142
  - [krock@mainstreetfamilycare.com](mailto:krock@mainstreetfamilycare.com)

TPA Information- If you have a TPA you can change/update this information if needed.








The screenshot shows a web form titled "TPA Information" with a blue header bar. The form contains several input fields organized into three columns. The first column includes fields for "TPA Name" (with a search icon and placeholder "Enter or search TPA name"), "City", "Phone", and "Contact Name". The second column includes fields for "TPA Billing Address", "State" (a dropdown menu with "Select State" as the current selection), "Fax", and "Contact Name". The third column includes fields for "Address Line 2", "Zip Code", "Email", and "Email". A blue "Save" button is located at the bottom left of the form.

Lab information- If you have your own lab account you can change/update this information if needed.

The screenshot shows the MainStreet FamilyCare system interface. On the left is a sidebar with navigation links: "Invoices & Payments", "Schedule Visit", "Results", "Messages", and "Settings" (highlighted with a gear icon). The main content area has a header with "MainStreet FAMILYCARE" and a list of menu items: "Account Information", "Manage Users", "Services", "TPA Information", and "Lab Information" (highlighted in blue). Below the menu is a section titled "Lab and MRO Information". It contains a table with columns: "Lab Name", "Phone", "Account Number", "MRO Name", "MRO Phone", and "MRO Fax". The table is currently empty, showing "No Results". Below the table is a blue "Add Lab" button. At the bottom of the section is a link for "Worker's Compensation Information".

Worker's Compensation Information- You can update your work comp carrier at any time.

-  Invoices & Payments
-  Schedule Visit
-  Results
-  Messages
-  Settings

Account Information

Manage Users

Services

TPA Information

Lab Information

Lab and MRO Information

Lab Name	Phone	Account Number	MRO Name	MRO Phone	MRO Fax
No Results					

Add Lab

Worker's Compensation Information