

## Check Processing Through RevSpring

Check Processing URL: <https://m.usapaymentexchange.com/?sUID=e7bdccba-decf-40fd-aa52-7dbccef93418&aid=>

After navigating to the site with the above link, add user and clinic identifiers to the end of the URL. This will tie the transaction to a specific user and clinic location for reporting purposes.

This will be your first name and last name, then a period, and then your OfficeCare Account #. You do not need to put “OC” in the URL.



❖ **Example User URL:** <https://m.usapaymentexchange.com/?sUID=e7bdccba-decf-40fd-aa52-7dbccef93418&aid=DonJoy.123456>



DJO Global OfficeCare Patient Portal Payment Site

Account Information

Order Number, PPA Number or Product Description:

Patient's First Name:

Patient's Last Name:

Please use the MotionMD ID or Full Paper PPA #.

Next

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## DJO Global Patient Portal Payment Site

### Payment Options

Name: Betty Johnson

Order Number or Product Description: PA#996548

Payment Method: ☐ Credit Card ☒ eCheck

#### Payment Information:

Payment Amount: \$ 15.00  
Format: ###.##

Receipt: ☐ None ☒ Email

Email: BettyJ@email.com

Verify Email: BettyJ@email.com

Select eCheck\*

Enter payment amount

If patient wants email receipt  
select Email and enter patient's  
email address

If patient does not need receipt  
leave None selected

Do Not select Credit Card if  
you are using MotionMD

### Bank Account Information

JOHN Q. CUSTOMER 0123  
1234 ANYWHERE LANE  
SMALL TOWN, GA 12345

Pay To The Order Of \$

Amount

Routing Transit Number 0123456789 Account Number 0123456789 Check # 0123

Account Name: Betty Johnson

Routing Transit Number: # Routing Transit Number

Account Number: # Account Number

Selecting eCheck opens  
check detail section

Enter check holder name

Routing #

Account #

Click Next

Back

Next

Entering billing address is not necessary. To complete the transaction, click the Next button.

Address Line 1:

Address Line 2:

City:

State/Province:

Zip/Postal Code:

Back **Next**

Final step is to attach your confirmation receipt to the PA and add a note to the Patient Facing note in **MotionMD** that the check payment was processed through REV SPRING. Please note confirmation # (highlighted below).




DJO Global Patient Portal Payment Site

Success

Your payment of \$15.00 on Order Number or Product Description PA 893417 has been delivered. Your confirmation number is 24679. Please print and save this page for your records.

This is the PA #

This is your confirmation #, please place on MotionMD Notes "Patient Visible"

Add Note ×

Processed check number XXXX through RevSpring for TOS or Self Pay in the amount of \$XX.XX, see attached receipt.

Note Type (Visibility)

☐ Billing Note  
Visible on Billing PDF, Not Visible to Patient

☒ **Patient Visible**  
Displayed on Patient Facing documents and Billing PDF

☐ PA Comment  
Only visible on MotionMD

Cancel Save Note