Register Organizations for Access to the Clinical Portal

Confidential & Proprietary

Presented by Jyotsna Rao

Created by and for the local healthcare community, OneHealthPort solves information exchange and workflow problems shared across healthcare organizations.

Agenda

- Part 1: How to register your organization for a OneHealthPort Single Sign-On (SSO) account
- Part 2: How to execute the OneHealthPort HIE Participation Agreement with Special Terms for Correctional/Detention facilities
- Part 3: How to add one or more SSO
 Administrators (besides yourself) to manage
 Clinical Portal access for your staff
- Next steps

Clinical Portal and Clinical Data Repository



Part 1: How to register your Organization for a OneHealthPort Single Sign-On (SSO) account



Link to OneHealthPort Registration

Go to: https://www.onehealthport.com/sso/register-your-organization



Click "Register"

Review these agreements before starting the process. Note: You do not have to physically sign any documents. Your completion of the registration serves as an electronic signature.

Organization Registration

Organization Registration

Please read the registration information below

OneHealthPort

Organization Registration Process

Welcome to OneHealthPort.

On this page you will begin the process of getting a OneHealthPort secure Digital ID for you and your Organization. With this Digital ID you and your colleagues can more easily access the local online healthcare sites you visit most often.

To successfully complete this process, you must be the person your Organization has designated to be the OneHealthPort Administrator. As the OneHealthPort Administrator you will manage your Organization's account. The responsibilities and privileges of the OneHealthPort Administrator are described here. You should be prepared on behalf of your Organization to agree to the terms and conditions of enrolling in OneHealthPort. You will then complete your own registration as a OneHealthPort Subscriber (all Administrators are also registered as Subscribers).

If you are **not** designated as the Administrator of your Organization, please close this page now and ask the appropriate person in your Organization to complete the registration.

This site will walk you through a simple step-by-step process to register your Organization with OneHealthPort and provide you with a OneHealthPort Digital ID. Following are the four steps you must complete.

- 1. Create Profiles you will be asked to provide basic information about yourself and your Organization. How we protect the privacy of the information you share can be reviewed <u>here</u>.
- 2. Sign Agreements you will view terms and conditions for you and your Organization to become enrolled with OneHealthPort and you will be asked to agree to these terms online.
- 3. Verify Identity you will provide the necessary information to complete the identity verification process to have your identity verified by OneHealthPort.

4. Confirm Registration - you will receive confirmation that you have been registered, and you will create your OneHealthPort password. Once you've completed these four steps you will receive notification from OneHealthPort within 72 hours that your Organization and individual Digital ID have been activated and you can begin to use the Digital ID to simplify your work at local on-line healthcare web sites.

Continue



Organization Agreements

Organization Agreement

Please click Agree & Continue to confirm this acknowledgment

OneHealthPort

Terms Of Use

Enrolling your Organization with OneHealthPort carries certain responsibilities to protect the privacy and confidentiality of personal health information and minimize risk for participating healthcare organizations like yours. All OneHealthPort Organizations, Subscribers and Relying Party Sites are united in a trusted community for the benefit of all members. The Participating Organization Agreement makes your Organization and an inimize risk for participating organization Agreement below. If you wish, you can also read all the terms and conditions below. Once you are satisfied that you understand the terms of the agreement, you can click on "Approve" if you agree to all of the terms and conditions of the Participating Organization Agreement. If you do not agree, click "Reject" and your registration process will be terminated.

Participating Organization Agreement

The "Participating Organization" orders the following "Services" from OneHealthPort:

SERVICES - Include use of the OneHealthPort System ("System") to facilitate the secure exchange of healthcare and other information electronically through use of identity management and authentication. Services include "Delegated Registration Privileges" which give Participating Organization control of, and responsibility for, confirming the identity of your employees and agents. This Agreement is effective as of the date it is submitted and accepted, and the Participating Organization acknowledges that it is subject to OneHealthPort's Participating Organization Terms in effect from time-to-time, compliance with applicable U.S. and state laws and regulations, including without limitation the Health Insurance Portability and Accountability Act of 1996, as it is amended, and to such additional privacy and security policies and rules of use as OneHealthPort may adopt from time to time. Please click "Agree & Continue" to confirm this Agreement.

Reference Documents: Organization Agreement (PDE) Participating Organization Terms (PDF) Subscriber Agreement (PDF) OHP Privacy Policy Role and Responsibilities of the Administrator (PDF)

During the registration process, please do not click your browser Pack", "Forward", "Refresh" or "Reload" buttons as this may cause issues with your registration and you will have to start again.

Agree & Continue

Cancel

These are the same agreements that are available for review before starting the registration process

Organization Information

Organization I Please enter the inform	nformation nation below that describes the Organization you are registering				<i>One</i> H	ealthPort
Organization Information						
Legal Business Name:*	Legal Business Name		Doing Business As:	DBA Name		
Business Type:*	Business type of Organization	-	National Provider Identifier (NPI):	NPI		2
Address Line 1:*	Ambulance/Transport		Address Line 2:	Suite, unit, building, floor, etc		
City:*	Behavior Health Practice Chiropractic/Massage Therapy		State:*	State Abbreviation		*
Zip:*	Clinic					
Contact Phone:*	Coordinated Care Organization		Contact E-Mail:			
	Dental	÷		Only used by OneHealthPort if needed for support.		
Web Site URL:		_	Fax Number:	()		
	Please include http:// or https:// in the URL			Only used by OneHealthPort if needed for support.		
					Cancel	Continue

Important: Please click on "Correctional/Detention Facility" as Business Type from the drop-down list. This will ensure the timely approval of your organization.

Note: Only fields marked with an * are mandatory. NPI and other fields not marked with * are not required to be filled out.

Add Tax Identification Number (TIN)

TINs Values for Organization

Manage Assigned Tax IDs for this Organization.

Tax Identification Entry

Your Organization's Tax ID is an important identifier. It is important to list all the Tax IDs that belong to your Organization.

The following is a list of Tax IDs associated with this Organization. To add a new one, click "Add New Tax ID", to delete an existing one, click the icon next to the Tax ID.

Add New Tax ID

When at least one Tax Identification Number has been entered for this Organization, the "Continue" button will become enabled to allow you to continue to the Subscriber Registration section.

Continue

Cancel



Organization TIN

During the addition system. If the TIN i proceeding.	of a new Tax Identification Num not unique, you will be given t	ber, we will ensure it is unique within he opportunity to correct the conflict	our before
Tax Identification N	umber:*		
	Please enter a new 9 Dig	it Tax Identification Number	
		Concert.	

Administrator Information

OneHealthPort Subscriber Information

Please enter your Subscriber information below.

*One*HealthPort

Demograp	hic In	formation
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In order to register your Organization for OneHealthPort, you must also register as a Subscriber and get your own Digital ID.

As the first Subscriber for your Organization, you will be the OneHealthPort Administrator.

The responsibilities and privileges of the OneHealthPort Administrator are described here and the privacy policy related to the information you enter can be reviewed here.

Middle Name: Ent	ter your middle name or initial	Last Name:*	Entor your last name
Suffix: Sel			Effet your last fidfile
Sumar Ser	elect a suffix or leave empty	Year of Birth:*	Enter your birth year in YYYY format.
rimary E-Mail:* Ent	iter your primary E-Mail address	Alternate E-Mail:	Enter your secondary E-Mail address
Job Title: Ent	iter your job title	Gender:*	Select your gender
ddress Line 1:* En	iter your street address of physical location	Address Line 2:	Suite, unit, building, floor, etc
City:* Ent	iter your City	State:*	Enter your State abbreviation
Zip:* Ent	iter your Zip Code	Phone Number:*	()
Mobile Number: (Accept SMS for Mobile Number:	

The person registering the Organization automatically becomes the Administrator. Later you will be able to add one or more additional Administrators who can manage users accounts.

Password Questions

Password Self-Service Reset Questions

Please answer questions for future password self-service reset

On	<i>e</i> He	alt	hPc	ort
	~~~~			

Selectable Questions		
The following questions can be used for tasks such as self-service password reset	and	nd device registration.
Select Question #1	•	Enter Answer #1
Select Question #2	-	Enter Answer #2
Select Question #3	*	Enter Answer #3
Hide Answers		
		Cancel Continue



# Verify Email

E-Mail Confirmation Confirmation of Subscriber E-Mail	<i>One</i> H	ealthPort
E-Mail Validation		
To verify your email address, you must enter the Activation Code that has been sent to your primary email address scole@onehealthport.com. open a new browser window or tab so that this page can remain open while you get the activation code. If you would like us to resend the cod change your email address, please <u>Click Here</u> . Activation Code: * Enter the activation code that was sent to you in e-mail	If you use a browser f le, please <u>Click Here</u> . I	to access email, please f you would like to
	Cancel	Continue

**Note:** Please check your spam or junk email folder in case you do not receive the email. If you still do not find it, please check with your IT department to ensure you receive emails from OneHealthPort.



# Verify Email

#### OneHealthPort Organization Registration Activation Code

OneHoolthDort cooreply@onehealthport.com>

← Reply	🏀 Reply All	$\rightarrow$ Forward	
		Tue 4/27/2021 10	0:51 AM

i) Click here to download pictures. To help protect your privacy, Outlook prevented automatic download of some pictures in this message.

<i>One</i> HealthPort	Account Activation Notification
	April 27, 2021
OneHealthPort.com	Dear t
Get Support	Your activation code, necessary to complete the Organization registration process, is provided to you below. Please use this to complete the registration process.
Contact Us	Your Activation Code: 186539
	Sincerely, OneHealthPort Support Toll free, 24x7 at 1-800-973-4797
	This e-mail, and any attachments hereto, is intended only for use by the named addressee(s) and may contain legally privileged and/or confidential information. If you are not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this e-mail, and any attachments hereto, is strictly prohibited. If you have received this transmission in error, please notify OneHealthPort Support immediately and permanently delete the original and all copies and printouts of this e-mail.
	All trademarks or registered trademarks are property of their respective owners.



# **Identity Verification**

#### Personal Address Information

Enter your home address information below for Identity Verification.

#### **One**HealthPort

#### Home Address

To protect your patients' privacy and minimize risk for your Organization, it is very important that the Digital ID OneHealthPort is providing is assigned to the right person. For this reason before we complete the enrollment process you will be required to verify your identity.

Your identity will be verified by interacting on-line with a third party data base OneHealthPort has partnered with. To interact with this third party database you will be required to enter your name and home address. You will then be asked a series of questions related to information about you in the third party database. For example, based on public property records you might be asked multiple choice questions about places you have lived.

Please note, OneHealthPort does not store any of the information you enter or any of the information in the third party database. This information is only accessible to the independent third party Organization. If your identity is successfully verified you will continue with the on-line registration process. If your identity is not successfully verified you will receive instructions on how to verify your identity using an off-line method.

You may choose to not use online identity verification by clicking "Off-line Identity Verification" button but you will be required to use a notary form process to confirm your identity with OneHealthPort.

To begin the identity verification process, please enter your home address information below:

Address Line 1:*					
Address Line 2:	Suite, unit, building, floor, etc				
City:*		State:* Washington	▼ Zip:*		
Last 4 Digits Of You	r Social Security Number:* ••••	]			
Debug Response: q	uestions 🔻		Off-Line Identity Verification	Cancel	Continue

Enter your <u>personal</u> information on this screen to perform the online identify verification. OneHealthPort uses a third-party system also used by many banks and healthcare systems to verify an individual's identity. We do not retain any personal information used in the identity process once your identity has been confirmed.

## Off-Line Identity Verification Notary Process

#### Personal Address Information

Enter your home address information below for Identity Verification.

#### *One*HealthPort

#### Home Address

To protect your patients' privacy and minimize risk for your Organization, it is very important that the Digital ID OneHealthPort is providing is assigned to the right person. For this reason before we complete the enrollment process you will be required to verify your identity.

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You may choose to not use online identity verification by clicking "Off-line Identity Verification" button but you will be required to use a notary form process to confirm your identity with OneHealthPort.

To begin the identity verification process, please enter your home address information below:

Address Line 1:*					
Address Line 2:	Suite, unit, building, floor, etc				
City:*		State:* Washington	▼ Zip:*	_	
Last 4 Digits Of You	ır Social Security Number:* ••••	]			
	and the second		and the second		
Debug Response: q	uestions 🔻		Off-Line Identity Verification	Cancel	Continue

**Note:** If you choose to perform Off-Line Identity Verification, it may take longer to approve your organization. We recommend that you perform the online verification process.

## Off-Line Identity Verification Notary Process

#### **OneHealthPort Pending Registration Information**



OneHealthPort <noreply@onehealthport.com>

$\leftarrow$ Reply $\ll$ Reply All $\rightarrow$ Forward $\cdots$
-------------------------------------------------------------------

Tue 4/27/2021 10:55 AM

(i) Click here to download pictures. To help protect your privacy, Outlook prevented automatic download of some pictures in this message.

<i>Owe</i> HealthPort	New Organization Registration Information					
Ond realitin of t	April 27, 2021					
OneHealthPort.com	Deart					
Get Support	During the process of registering your Organization, Steph Test Clinic d/b/a OneHealthPort, we weren't able to verify your identity through the on-line service OneHealthPort uses because you elected to skip this portion of the registration.					
Contact Us	The offline identity verification process requires that you print the notary form which may be downloaded from <a href="http://www.onehealthport.com/sites/default/files/content-uploads/documents/OHPSubscriberIdentity/Verification.pdf">http://www.onehealthport.com/sites/default/files/content-uploads/documents/OHPSubscriberIdentity/Verification.pdf</a> and take it to a notary public in your local area. Typically your bank will do this for free or for a nominal fee. You will need to present an appropriate form of identification (listed in the notary form) to the notary public and they are vouching for your identity by placing their notary seal on the document. After having the notary form completed please fax the completed form to 206-624-3168. It will then be processed and your Organization registration can continue through the approval process.					
	Sincerely, OneHealthPort Support Toll free, 24x7 at 1-800-973-4797					
	This e-mail, and any attachments hereto, is intended only for use by the named addressee(s) and may contain legally privileged and/or confidential information. If you are not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this e-mail, and any attachments hereto, is strictly prohibited. If you have received this transmission in error, please notify OneHealthPort Support immediately and permanently delete the original and all copies and printouts of this e-mail.					
	All trademarks or registered trademarks are preparty of their respective owners					



# **Approval Email to Administrator**

F	le Message	Help Acrobat	Ô	Tell me what you wa	nt to do	)							
<u>هر</u> مر	Delete Archive	Reply Reply Forward All		<ul> <li>➡ Robo User</li> <li>➡ To Manager</li> <li>➡ Team Email</li> </ul>	<ul><li>&gt;</li></ul>	Move S v	Assign Policy ~ Pollow Up ~	Q  ∑  }	A)) _{Read} Aloud	Translate	Zoom	) Insights	
	Delete	Respond		Quick Steps	Lآ	Move	Tags f	Editing	Speech	Language	Zoom		~

#### Organization Administrator Information

	OneHealthPort <noreply@onehealthport.com></noreply@onehealthport.com>	S Reply	Keply All	$\rightarrow$ Forward	••••
	То			Tue 4/27/2021 11	12 AM
$\sim$					

(i) Click here to download pictures. To help protect your privacy, Outlook prevented automatic download of some pictures in this message.

<i>One</i> HealthPort	New Organization Administrator Information				
	April 27, 2021				
OneHealthPort.com	Dear				
Get Support	Your Organization registration has been approved for Steph Test Clinic d/b/aOneHealthPort (syv484-00). Here is the account information you will need.				
Contact Us	Please wait at least 30 minutes before attempting to login to make sure all Subscriber and Organization information is fully set up and active in the OHP system.				
Your Subscriber ID. Your Temporary Password.					
	Please go to the Organization Administrative Page to set your password and begin administering your Organization.				
	Sincerely, OneHealthPort Support Toll free, 24x7 at 1-800-973-4797				
	This e-mail, and any attachments hereto, is intended only for use by the named addressee(s) and may contain legally privileged and/or confidential information. If you are not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this e-mail, and any attachments hereto, is strictly prohibited. If you have received this transmission in error, please notify OneHealthPort Support immediately and permanently delete the original and all copies and printouts of this e-mail.				
	All trademarks or registered trademarks are property of their respective owners.				

#### **One**HealthPort

# **Directed to Login Page**





Subscriber ID:	User Name
Password:	Password
	Login

This login page requires that you have registered as a OneHealthPort Subscriber.

I'm not a OneHealthPort Subscriber but would like information on subscribing Forgot My Password Forgot My Subscriber ID



# **Administrator Change Password**

#### OneHealthPort

Change Password

Please enter a new password

Password Modified	
	Current Password Modified
	New Password
	Confirm Password
	Password does not contain user name
	<ul><li>The minimum password length is 12 characters</li><li>The password requires mixed case.</li></ul>
	<ul> <li>Password must contain at least 1 digit(s)</li> <li>Password must contain at least 1 special character(s)</li> </ul>

Submit

Part 2: How to Execute the OneHealthPort HIE Participation Agreement with Special Terms for Correctional/Detention Facilities



# What is the HIE Participation Agreement and Special Terms?

**The HIE Participation Agreement** is a common agreement signed by all participants in order to use the OneHealthPort HIE.

- Covers terms and conditions
- HIE policies and operating manual
- The agreement mentions an annual subscription
  - This subscription fee is waived for Correctional/Detention Facilities using the Clinical Portal and no other HIE services as per the Special Terms.

<u>Special Terms For Correctional/Detention Facilities:</u> Health Care Authority (HCA) of Washington governs the data contained in the CDR. As part of the HCA approval for Correctional/Detention Facilities to view patient information in the Clinical Portal, additional requirements are added to the standard agreement in the Special Terms*. A copy of the Special Terms is available for review at:

#### https://www.onehealthport.com/onehealthport-clinical-portal-resourcescorrectional/detention-facilities

The Special Terms was created with input from John McGrath, Daniel S. Johnson, Barbarra Carr, Kyn Ahrens and Dr. Marc F. Stern

# **Requirements for Online Contracting**

During the online contracting process, you will be asked for the following information:

1. Selection of an annual HIE subscription fee based on the organization's annual net operating revenue.

Note: The contracting workflow requires selection of an annual subscription fee. Please select the Entry Level fee of \$600. Per the Special Terms your organization will not be invoiced for this fee.

- 2. Business contact information (name, email and phone number)
- Technical contact information (name, email and phone number) Repeat business contact information
- 4. Billing information (organization billing address, billing contact information, name, email and phone number)

Repeat business contact information



## Step 1: Review the Agreement and Special Terms



Review the OneHealthPort HIE Participation Agreement before starting the online contracting process. For reference purposes, please see the OneHealthPort HIE Operating Manual.

G OneHealthPort HIE Participation Agreement

G OneHealthPort HIE Operating Manual

#### Step 2

Determine your annual subscription fee. The annual subscription fee is based on your organization's annual net operating revenue.

Learn more about the HIE Subscription Fees

#### Step 3

Identify the person in your organization that has the authority to contract for HIE services. This individual will need a OneHealthPort Single Sign-On (SSO) Subscriber identifier (ID) and assigned Administrator privilege to perform the online contracting. For assistance with OneHealthPort SSO Subscriber IDs, please submit a OneHealthPort HIE and CDR Information Request Form.

#### Step 4

Requirements for online contracting.

Contract

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Contact Us

**Before you start.** Review the information provided on the OneHealthPort HIE Contracting webpage.

**Note:** The HIE subscription fee is waived as part of the Special Terms if you are only using the Clinical Portal and no other HIE services.

To start the online contracting workflow, click on the **Contract** box.

## Step 2: Log in Using Your OneHealthPort SSO Credentials

#### **One**HealthPort

OneHealthPort HIE

Subscriber ID:	User Name
Password:	
	LOGIN

This login page requires that you have registered as a OneHealthPort Subscriber.

I'm not a OneHealthPort Subscriber but would like information on subscribing Forgot My Password Forgot My Subscriber ID

Use your OneHealthPort username and password to log in and begin the contracting process.



# **Step 3: Request for Special Terms**



When performing the online contracting process, the person doing so will need to be prepared to enter (copy and paste the sentence in **blue** font exactly as it is shown below) into the section of the online form called **Request for Contract Discussion**.

Once this sentence is added and the online form is completed, the individual will submit the form for approval.

"Our organization would like to request the Special Terms for CDR Portal Access for correctional facilities"

## Step 4: Complete The Process

When the HIE Participation Agreement is approved, the organization will be sent an email to accept the approved contract. A copy of the executed contracting document that includes the *Special Terms for CDR Portal Access for Correctional/Detention Facilities* and a copy of the HIE Participation Agreement will be sent to the individual who performed the online contracting. If the organization requires a written signature for this contract, instructions are provided in the email explaining how to obtain the signature.

Part 3: How to Add One or More SSO Administrators (besides yourself) to Manage Clinical Portal Access for Your Staff



## Log in to Administrative Functions

#### Go to: <a href="https://www.onehealthport.com/sso/manage-your-account">https://www.onehealthport.com/sso/manage-your-account</a>

OneHealthPort SSO	
SSO Home Login Register Manage Account MFA Support FAQs About	
Manage Your Account	
OneHealthPort provides an easy-to-use tool set to manage your account. The quickest and easiest way for you to make a change or fix a problem is with the setf-service options below. Before you call support, click on the appropriate links below to manage your OneHealthPort account (your OneHealthPort) account or noder to access the memou.	
Before you call support, you may also text your 550 login.	
Password Assistance	
If you have formation your assessed, below are the ways to get help:	
1. If you have several questions set on an your arranger then you can use them to self-reset your password	
<ol> <li>If you don't have secret questions, then you should contact your Administrator to assist you. The Administrator logins through the Administrator Account to get to the password reset function.</li> </ol>	
3. If you don't know who is your Administrator, then you can contact the OneHealthPort Support desk for assistance.	CIICK ON
For Subscribers	
A Subscriber can login to manage the following information:	"Administrator Login"
Indet encoded information	Autimistrator Login
Change your email address	
Oninge your password     Onerleat/Port does not routinely expire passwords. However, we do suggest that you change your password whenever you have a concern it may have been used by someone eise. Onerleat/Port also recommends you change the password once a year as a safety precaution.	
Add or change your secret questions	
View roles and affiliations	
Delete your OneHealthPort account	
Subscriber Login	
For Administrators	
An Administrator can login to manage the following for their Subscribers and Organization:	
<ul> <li>Nominate and manage Subscribers within your Organization, including assisting with password resets</li> <li>OneletaitMort does not noutinely expire passwords. However, we do suggest that you change your password whenever you have a covern it may have been used by someone elso. Checkellatiflort also economics do and once a year as a safety precausion.</li> </ul>	
Change a user name or email address	
Access the Administrator's Guide	
Change your Organization information	
Add Tax (Ds	
Audiationstations     Crant Sub-Oranization	
<ul> <li>If your Administrator is leaving your Organization, then please review the encoded states.</li> </ul>	
Administrators Easy Reference Sheet	
Administrator Login	

# Administrator Menu

#### OHP OMINISTRATION

G→ Log Out



#### **OHP** Administration

Welcome

This site allows you to manage the OneHealthPort accounts of all Subscribers and your Organization. You may add and delete Subscriber accounts and edit existing accounts. Additionally you may edit your Organization's profiles and nominate additional Administrators.

#### Subscriber Administration Menu Nominate Subscriber Provide an OHP Credential (Subscriber ID) to another person. Manage Subscriber

- Reset Password
- Modify Subscriber Profile
- Affiliate Subscriber
- Remove Subscriber Affiliation
- Add Subscriber Roles
- Remove Subscriber Roles

Click here to download the OneHealthPort Administration Guide.

Click here to download the OneHealthPort Administration Step By-Step Guide. Click here to download the OneHealthPort Subscriber Step-By-Step Guide.

Resend Activation Code

Organization Menu Add/Edit Tax ID Modify Profile Add Administrator Remove Administrator Create Sub-Organization

List Users

RGANIZATION AGREEMENT | PRIVACY | ABOUT OHP | CONTACT US

Click on "Nominate Subscriber"

# Nominating a Subscriber



Select An Select the Orga	Organization anization for this Subscriber	<i>One</i> He	ealthPort
Select Organizatio	n		
Please select an	Existing Organization to affiliate a Subscriber.		
organization.	Steph Test Clinic d/b/a OneHealthPort (syv484-00)		
		Cancel	Next

Select your organization from the drop-down list

# **Provide Subscriber Information**

Subscrib Enter Subscri			<i>One</i> He	ealthPort		
Subscriber Dem	ographic Data					
First Name:*	Enter Subscriber's First Nam	le	Last Name:*	Enter Subscriber's	i Last Name	
E-Mail:*	Enter Subscriber's E-Mail Ad	dress				
			 0		-1 - 1	_
					Cancel	Next

#### Provide First Name, Last Name and email address of the person you are nominating.

*One*HealthPort

## **Select Roles**

#### **Community Roles**

Select the community roles for the Subscriber

### *One*HealthPort

Comm	Community Roles									
Please	Please select community role(s) for this Subscriber.:*									
	Role	Description								
	Office worker									
	Billing specialist									
	Referral coordinator									
	Licensed practitioner	Practitioner role necessary for access to ProviderSource.								
	Other service provider									
	Licensed nurse	Practitioner role necessary for access to ProviderSource.								
	Office manager									
	QA Report Manager	Role for accessing/managing PSHA quality reports.								
	Medical assistant									
	Medical Director									
	Credentialing Manager	Non-practitioner role necessary for data entry access to ProviderS	Source.							
	Quality Reports and Data Entry									
	Quality reports (view only)									
	EFT Administrator	Electronic Funds Transfer administrator.								
			Cancel	Next						

NOTE: If none of the above roles apply, select "Office worker".

## **Activation Code**

Confirmation of Subscriber Nomination

## *One*HealthPort

Subscriber Nomination Results

A new Subscriber Marie Cole (mcole001) has been added to the Organization Steph Test Clinic d/b/a OneHealthPort (syv484-00) with the following roles:

Office worker

To activate the Subscriber, you must deliver the Activation Code listed below to the Subscriber. An automatic email has been sent to the Subscriber, providing the Subscriber ID and web site link (URL) needed to complete registration. You should make certain that the activation code is received only by this Subscriber.

Activation Code: 173993

Note: This activation code will expire in 72 hours. After expiration, you, the administrator, must log into the Organization Administration page to get a new activation code (via Resend Activation Code Menu item)

Close

Please note down this Activation Code and give it to the Subscriber you are nominating.

## Adding an Administrator

Please wait for confirmation from the Subscriber that they have activated their account before proceeding.

*One*HealthPort



#### Click on "Add Administrator"

# **Select Your Organization**

Promote/Demote Administrator Select an Organization that the Subscriber belongs to	<i>One</i> He	ealthPort
Select Organization Please select an Organization of the Subscriber. Organization:* Take Out Thai Regression Testing (7uycos-08)		
	Cancel	Next

Select your organization from the drop-down menu.



## Select the Subscriber



#### Select the Subscriber you would like to make the Administrator from the drop-down list.



# Confirmation

Promote,	/Demote Administrator Results	<i>One</i> HealthPort
Promote/Demote Administrator Results		
The Subscriber .	) has been promoted to an Administrator for the Organization Take Out Thai Regression Testing (7uycos-08)	
		Close

You will receive an on-screen confirmation that the Subscriber you selected is now an Administrator.



## **Next Steps**

- Nominate one (or more) Administrator(s) in your organization who will be adding and removing Clinical Portal users.
  - Administrator training
    - o October 12th at 10 AM PST
    - o October 15th at 2 PM PST

## **Next Steps**

- Figure out who in your organization should have access to the Clinical Portal
  - Clinical staff (nurses, practitioners, MH counselors)
  - Deputies, if both conditions are met
    - They conduct (or might be assigned to conduct) medical screening at Booking, and
    - You do not have 24/7 medical staffing
  - Clinical Portal user training
    - o October 20th at 7:30 AM PST
    - o October 21st at 4:00 PM PST

## **Next Steps**

- Draft a CDR Use Policy (not a requirement)
  - See model policy drafted by Dr. Marc F Stern (Consultant in Correctional Health Care) located at:

https://www.onehealthport.com/onehealthport-clinical-portal-resourcescorrectional/detention-facilities

This template can be modified to be a free-standing policy or modified to incorporate into a related policy, such as a policy on booking procedures or health records