



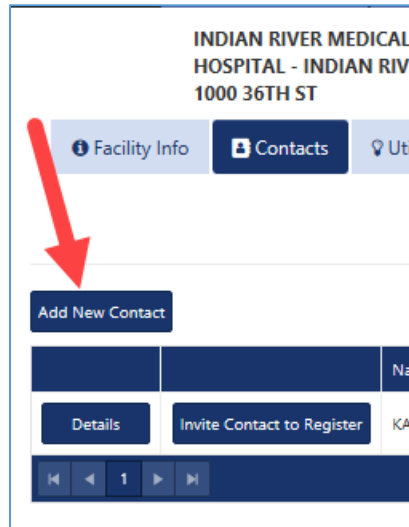
How to Create and Maintain Provider User Accounts in the Health Facility Reporting System (HFRS)

Audience: Providers, Partners, and AHCA Staff

1. Navigate and login to the website: <https://apps.ahca.myflorida.com/hfrs>
2. Locate and select the provider. Click the “Contacts” tab.

a. To add a new contact person:

- i. Click “Add New Contact”.



- ii. Enter the contact’s information on the “Facility Contact-Add” screen. Select the person’s “Title/Position”. Enter the person’s name, email address(es), telephone number(s), type of telephone number, and if the number is able to receive text messages. *Only enter different email addresses and telephone numbers in the additional spaces as needed.*

Facility Contact - Add

Title/Position: Maintenance Director

First Name: Test

Last Name: Contact

Primary Email: email@email.com

Email 2:

Email 3:

Primary Phone Number: (888) 888-5555

Extension:

Phone Type: Office

Text Messaging Capable: Yes

Phone Number 2:

Extension:

- iii. If the person is the designated safety liaison or knowledgeable about the facility's generator(s), indicate this by checking the appropriate box(es) if applicable.

Safety Liaison

Generator Contact

- iv. Indicate if the person is unable to communicate in English and requires a translator if called. If a translator is needed, please indicate the language also. Click "Save" once all information is entered.

Do you require a translator? Yes

Language Spoken Portuguese

Other Language

Save Cancel

b. To edit/update an existing contact:

- i. Click "Details" next to the contact's name.

AMBER PLACE
ASSISTED LIVING FACILITY - CITRUS County - Lic
2365 WEST AMBER PLACE

Facility Info Contacts Utilities Generators

	Name	Title	Pri
Details	Test Test	Maintenance Director	(85
Details	M. ON	CEO/Administrator	(35

1

- ii. Click “Edit” at the bottom of the “Facility Contact-Details” screen.

Facility Contact - Details

Title/Position: Maintenance Director

First Name: Test

Last Name: Test

Primary Email: testahca7@gmail.com

Email 2: [Empty]

Language Spoken: [Empty]

Other Language: [Empty]

Edit **Cancel**

- iii. Click “Save” once information is entered.

Save **Cancel**

c. To invite a contact to register for HFRS:

- i. Click the button “Invite Contact to Register” next to the name of the contact.

Facility Info **Contacts** Utilities

Add New Contact

Name
KAREN

Details **Invite Contact to Register**

- ii. On the “Send Invitation to Contact” screen, select the user role the person will be assigned and click “Create” to send the invitation.
 - 1. Provider User: able to fully utilize the system.

2. Provider Superuser: able to fully utilize the system plus conduct user maintenance.

Send Invitation to Contact

Contact Email Address: karen.davis@irmc.cc

Facility Name: INDIAN RIVER MEDICAL CENTER

Date Expires: 9/17/2018 3:58:24 PM

Select User Role: Provider Superuser

Create Cancel

- iii. Invitation information will populate in the contacts grid for this person.

Facility Contacts

Add New Contact

Name	Title	Primary Phone	Primary Email	Safety Liaison	Generator	Language	Invitation Sent	Invitation Expires	User Registered
T...Y	CEO/Administrator	(8...)	BETA618795@BETA.COM	No	No		07/19/2018 10:09 AM	07/20/2018 12:10 PM	

1 - 1 of 1 items

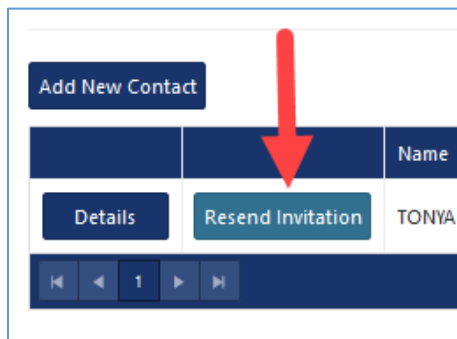
- iv. Once the contact has completed the registration process, this information will be filled in as well.

Invitation Sent	Invitation Expires	User Registered
07/19/2018 10:09 AM	07/20/2018 12:10 PM	07/19/2018 12:14 PM
07/19/2018 12:19 PM	07/20/2018 12:20 PM	07/19/2018 12:21 PM

1 - 2 of 2 items

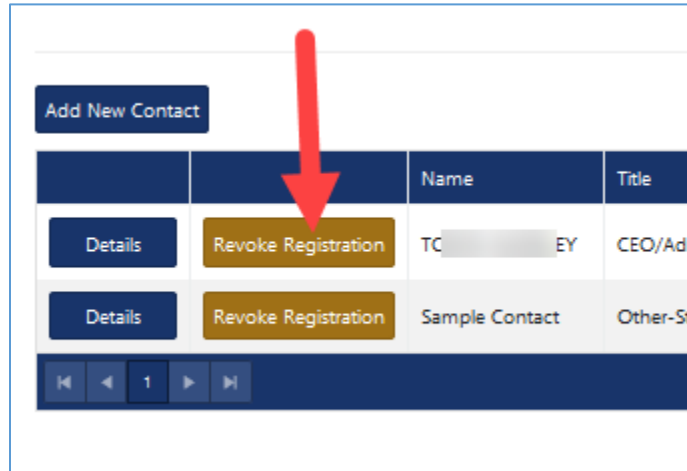
d. To resend a registration invitation:

- i. Click the “Resend Invitation” button next to the contact.



e. To revoke a contact’s registration/access:

- i. Click the “Revoke Registration”.



- ii. The “Invite Contact to Register” will replace the “Revoke Registration” button.

