Released: March 2016

Purpose: EpicCare Link Access Changes

Contact: Allina Service Desk, 612-262-1900 or 800-315-4085

<u>Managing User Access to EpicCare Link</u>

Audience:
Contacts at organizations using EpicCare Link who are managing user access for their site.

Overview:
EpicCare Link is a view only application that provides access for our community partners who share in the care of our patients at Allina Health. Designated site contacts, also known as submitters, will use these secure online tools to manage new user access and terminations for staff utilizing EpicCare Link at their facility.

Requirements:
- Allina login ID & Password
- RSA Secure Token

<u>Getting Started</u>:

Go to www.allinahealth.org/epiccare

This is a <mark>new web site</mark> address for both submitters and users of EpicCare Link. Please make sure that you update your bookmarks or shortcuts to reflect the new address.

Logging in to submit user requests (new, termination, name change):

Excellian EpicCare Link

Use these resources to access and learn about the Allina Health electronic health record system.

Ⓔ EXCELLIAN®

Excellian® EpicCare Link access

Sign in
▶ 🔳 Token users
▶ Non-token users
(User ID and password required)

Web-based training
▶ Log in to training.
📄 Privacy and security training guide
📄 Excellian® EpicCare Link eLearning guide

Access request
▶ Request access to EpicCare Link.

ServiceNow

▶ Log in to ServiceNow
(User name and password required)

Technical assistance
Call **612-262-1900** or 1-800-315-4085.

Passwords
For password assistance, call the Allina Health Service Desk at 612-262-1900 or 1-800-315-4085.

⊞ **Password requirements**
⊞ **Password best practices**

Click here

Excellian EpicCare Link access request

Use these resources to request access to the Allina Health electronic health record system.

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Access request form

▶ Sign in to request form.
(Login ID and password required)

References
📄 Submitter instructions
📄 Frequently asked questions: Submitting an access request form

WebCARF access

▶ Sign in to WebCARF.
(Login ID and password required)

References
📄 Submitter instructions
📄 Frequently asked questions: Submitting a WebCARF

Technical assistance
Call **612-262-1900** or 1-800-315-4085.

Passwords
For password assistance, call the Allina Health Service Desk at 612-262-1900 or 1-800-315-4085.

⊞ **Password requirements**
⊞ **Password best practices**

Click here

You will need your RSA Token to log in to the Allina network in order to access the request form.

User Name – your Allina issued login ID (may begin with an A, R or D, not case sensitive)
Password – password issued with this ID or your existing personal password that you have set
RSA Token – enter the digital number displaying on your RSA Token.
Hint: make sure you have at least 2 bars left on the timer before entering the code.

EpicCare Link Request Form

If you are experiencing issues logging in, please contact the Allina Health
Service Desk at 612-262-1900 or 1-800-315-4085 (outside the Twin Cities).

Please enter your username and password.

Allina Health

User Name: [   ]
Password: [   ]
RSA Token: [   ]

[Sign In]

You are accessing a PRIVATE NETWORK which contains confidential information. All unauthorized users will be
prosecuted.
By logging in, you agree to abide by the Allina Health Information Services policies for computer usage and the
confidentiality provisions of Allina Health System's Employee Standards of Business Conduct. Indicate your
agreement by pressing "Sign In."

Log in to the HR site to submit your request. Use your Allina login ID & password.

Allina Health Login

Allina Health

Please enter your Allina Login ID and Password to Sign-In.

If you experience any issues with your login attempts - please call the Allina Health Service Desk at 612-262-1900, press option #3.

Login ID: [   ]
Password: [   ]

[Sign In]

By logging into this system, I agree to abide by Allina Health
policies for computer usage.

When you see this form, you have reached the new request form. Use this form for a new user request, termination requests and name changes.

Begin by entering the users SSN in both fields for verification. It is not necessary to enter the dashes, the system will convert it for you. Note: You must hit ENTER after completing the second SSN field. This will submit a search request to our database to determine if the user is already registered with Allina.

EpicCare Form

SSN Instructions (26000, 61) Enter SSN# and press Tab to move to the SSN Verification field.
Pressing Enter or Tab again will activate the Epic Care Link page..

SSN

          *SSN: 111-22-1234

Verification SSN: 111-22-1234   ×

Cancel

If your search does not return an existing user, you will be taken to the blank form to add the user information.

Epic Care Form Instructions (26000, 62)

Review or complete the information below, then click **Save** to submit. If information is not correct you may edit the data and then click **Save** to submit.

For further instructions, please refer to the **Online Request Form Instructions** on the login page.

Effective Date 03/08/2016

My Company Info

Provider ID:
Name: Kohls,Pennie S
Company:
Address:

EpicCare User Name

*First Name   Middle Name   *Last Name

User's Work Address

*Company
Address 1
Address 2
City   State   🔍   Postal Code

EpicCare User Contact Methods

*Telephone
*Work Email

Job Information

*Job Title
Start Date   📅
☐ Is this person a Provider?

Save   Cancel

If your search <u>does</u> find a user by that SSN, the information will be displayed and you must verify before you submit. You do have the ability to edit the incorrect information. When complete click the Save button.

Epic Care Form Instructions (26000, 62)

Review or complete the information below, then click **Save** to submit. If information is not correct you may edit the data and then click **Save** to submit.

For further instructions, please refer to the **Online Request Form Instructions** on the login page.

*Reason for Request: 1-New User   Effective Date 03/08/2016

My Company Info

Provider ID:

Name: Kohls,Pennie S

Company:

Address:

EpicCare User Name

*First Name	Middle Name	*Last Name
Susie	K	Tester

User's Work Address

*Company Corporate Office

Address 1 9999 W Cty Rd D

Address 2

City Roseville   State MN   Postal Code 55112

EpicCare User Contact Methods

*Telephone 651/651-6270

*Work Email hermail@allina.com

Job Information

*Job Title HIM Director

Start Date

☐ Is this person a Provider?

Save   Cancel

When your form is submitted, you will receive the following confirmation message:

Save Successfull (26000, 63)

Excellian™ EpicCare Link Access Request Confirmation

Thank you for taking the time to fill out the access request form for Excellian EpicCare Link. If you have an email address on file, you will receive and email notification when complete. Please allow up to 14 business days for processing.

Complete another request form

Return to Excellian EpicCare Link Home Page

Once the user request is processed, new user information will be sent to you in an email. This email will include the following:

You are identified as the supervisor or manager of this Employee or Non-Employee that has just been updated on the Peoplesoft HR System. Below you will find their Employee number and Allina Login ID.

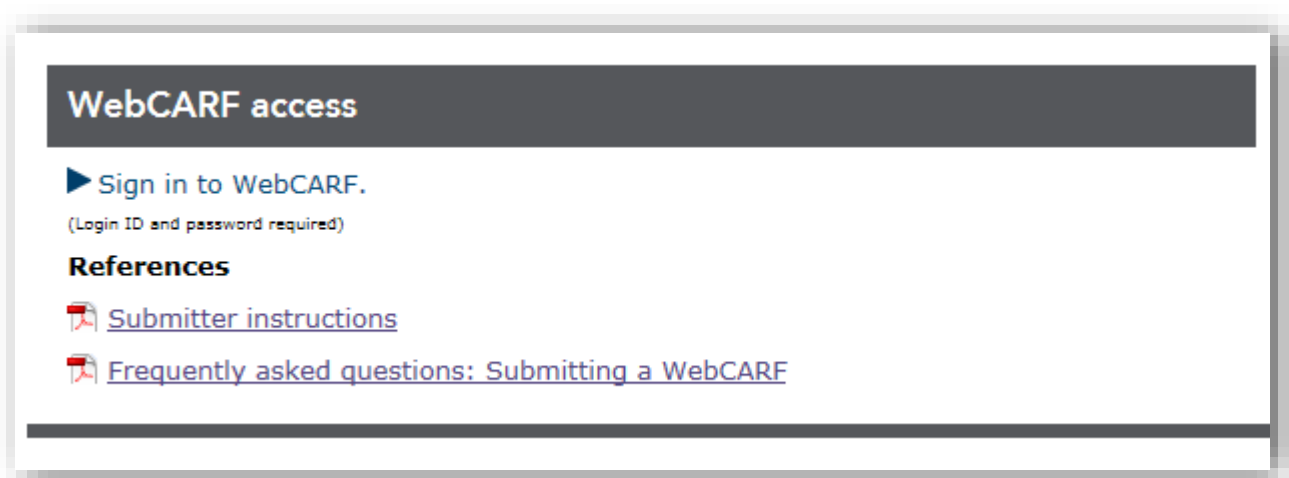*Name: Tester, Test*
Employee ID: 10545953
Allina Login ID: A130064

Note: The Employee ID will also be their temporary password and they must add an "aH" at the end of the 6 or 8 digit number. If the user has an Allina ID they are actively using, then the password that they currently use with this ID is still valid. Once a user is entered in to the Allina system, they will be given the same number again if one existed.

Next Steps for New User Access, Terminations and Changes:

Refer back to the EpicCare Link home page **www.allinahealth.org/epiccare**

Under the WebCARF section, review the **Submitter Instructions** and utilize the link to Sign In when ready to complete the WebCARF