

THE INDIAN HEALTH SERVICE

RPMS Direct Messaging (Secure Messaging)



Electronic Health Record

Presented by Marilyn Freeman

California Area HIM Consultant

Superior Health Information Management
Now and for the Future

RPMS Direct Messaging Team

- Glenn Janzen, Chief Enterprise Architect - IHS
- Chris Lamer, Clinical Informatics Consultant - IHS
- Meghna Patel, Business Analyst - DNC
- Duane Rosznyai, Application System Analyst – DNC



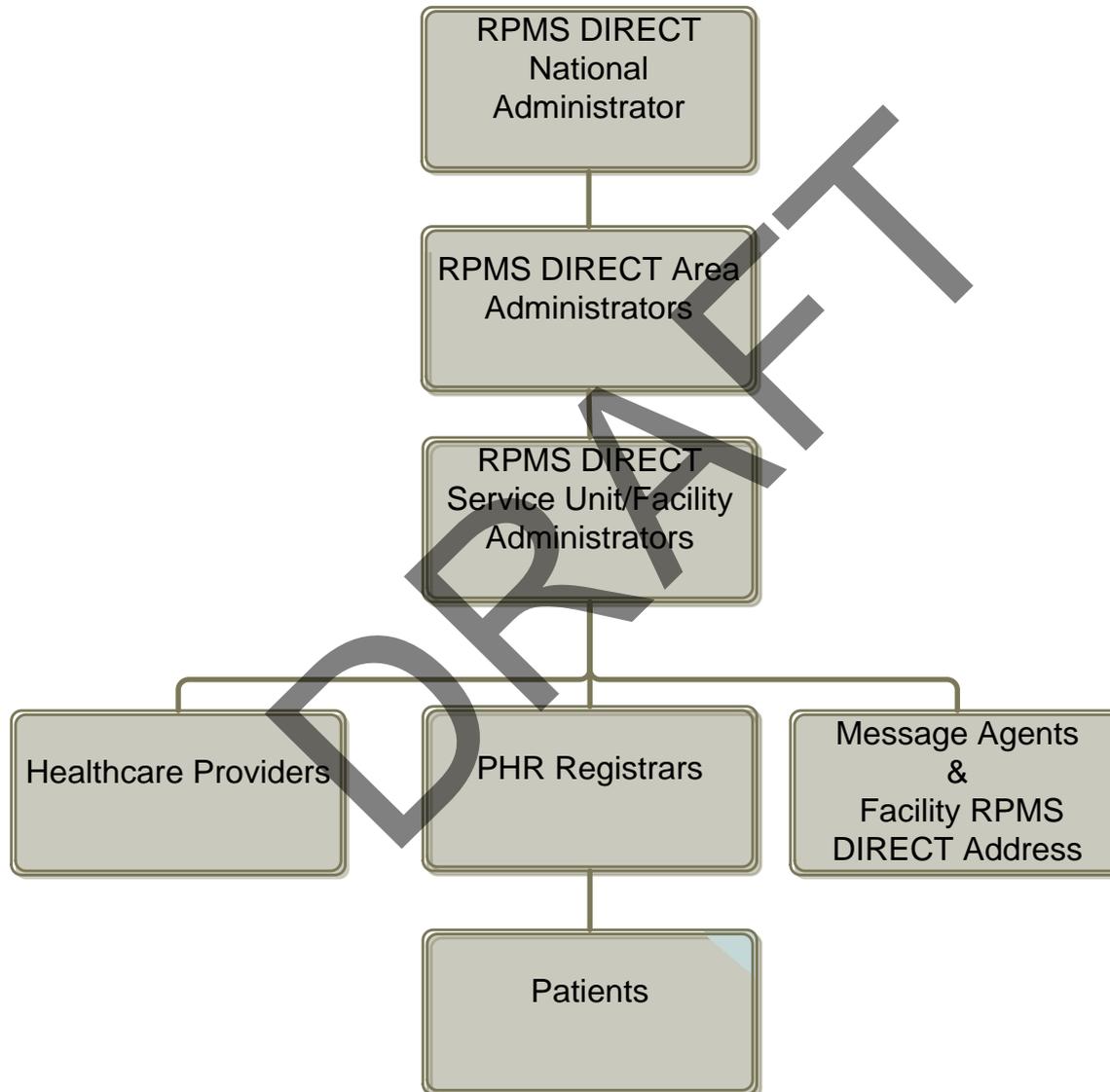
Key Terms

- **RPMS DIRECT:** A standard based, secure, point-to-point, web-based messaging system. It is intended for the exchange of patients' health information between healthcare Providers, such as Physicians, Nurse Practitioners, Physician Assistance, Medical Assistance, and other Healthcare providers who regularly transmit and/or receive Protected Health Information/Personally Identifiable Information (PHI/PII).
- **Certificate Authority:** An authority trusted by the IHS Health Information Service Provider (HISP) for issuance and management of certificates.
- **Registration Authority:** An authority trusted by the IHS HISP that works in collaboration with the IHS trusted CA to collect and verify information of the certificate subjects such as RPMS DIRECT Administrators and will evaluate to either approve or reject subscriber certificate management transactions, including certificate renewal, re-key, and revocation requests.
- **Domain Name:** A fully qualified domain name that identified the organization that assigns the health endpoint names and is dedicated solely to the purpose of health information exchange. Example: facilityname.directihs.net.

Key Terms

- **Message Agent:** An individual assigned to receive secure messages on behalf of healthcare provider(s). Messaging Agent's responsibility is assigned usually to the same person assigned to answer the phone in the clinic. Similar to the calls, Message Agent will get the messages, respond, and/or distribute them to the appropriate party.
- **Trusted Agent:** The Trusted Agent is an individual appointed on behalf of the Registration Authority to complete an in-person identity verification of the RPMS DIRECT users. The RPMS DIRECT Administrators will serve as a Trusted Agent.
- **SU/FA:** Service Unit/Facility Administrator
- **CSR:** Certificate Signing Request
- **DCV:** Domain Control Validation

Role Hierarchy

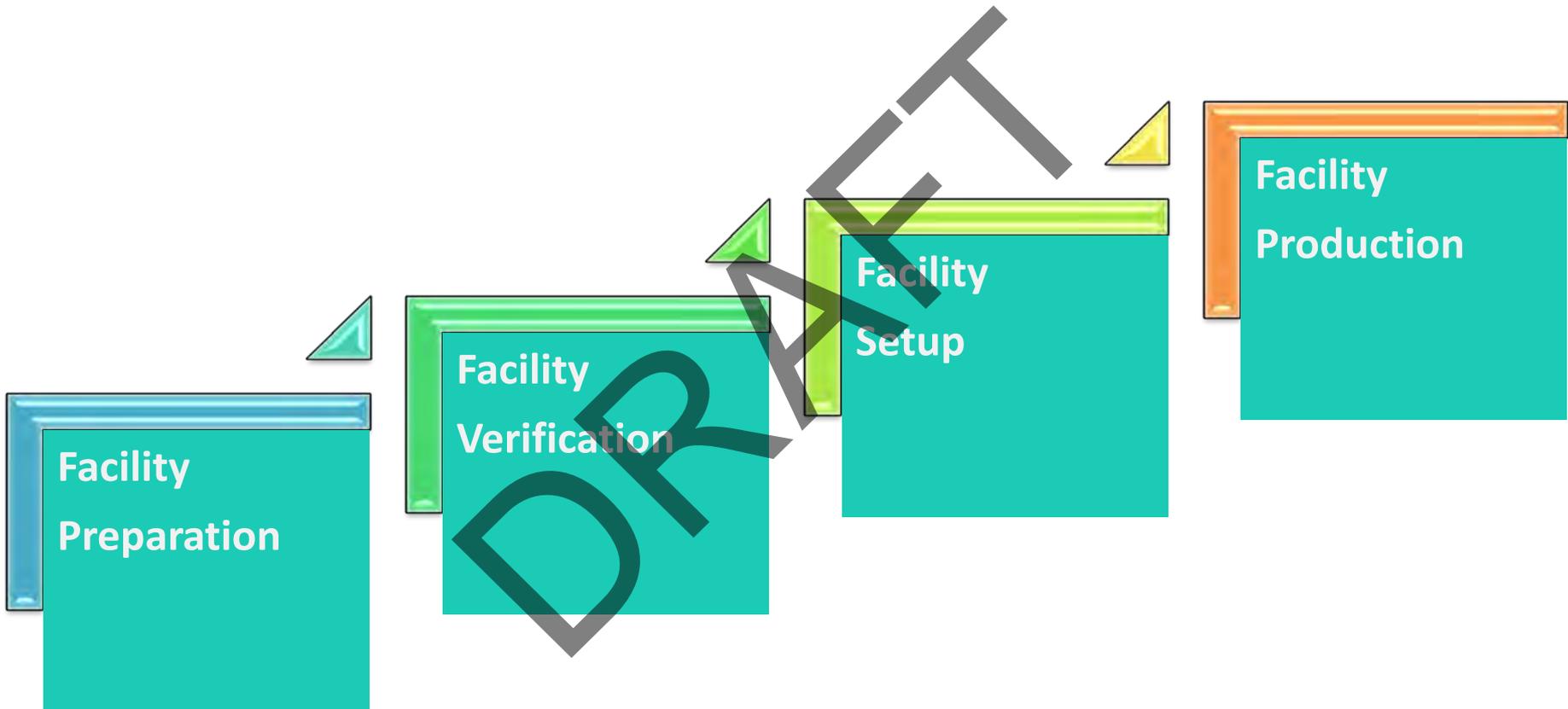




Area Administrator Responsibilities

- Onboarding support to Service Unit/Facility (SU/F)
 - Prepare SU/F for deployment
 - Verify SU/F's readiness for deployment
 - Setup SU/F for deployment
 - Setup SU/F in the Certificate Portal
 - Order organization certificate
 - Setup SU/F in the RPMS DIRECT Administrative Application
 - Complete/validate deployment/production
- On-going support to SU/F
 - Tier 1 and 2 support to SU/FA
 - Tier 2 and 3 Support to SU/F
 - Access Management: ITAC System and Help Desk Tickets
- Regular Audits

Deployment Phases



Facility Deployment: Phase 1 & 2



Preparation

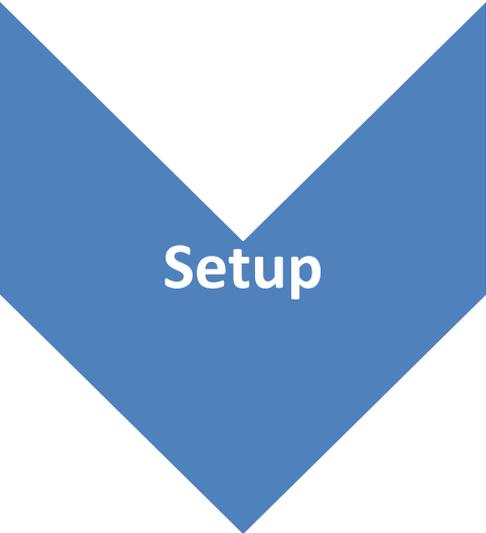
- **Establish Local RPMS DIRECT Team**
 - Service Unit/Facility Administrator (SU/FA)
 - Message Agents
 - Facility RPMS DIRECT Address Designee
 - PHR Registrars
 - Clinical Application Coordinator (CAC)
- **Complete RPMS DIRECT Pre-Requisite Task**
 - Agreements (i.e. ISA, BAA, and EUA; Multi-Purpose Agreement)
 - Trainings for Local Team
 - Policies and Procedure development and incorporation
 - Contingency plan
 - Outreach



Verification

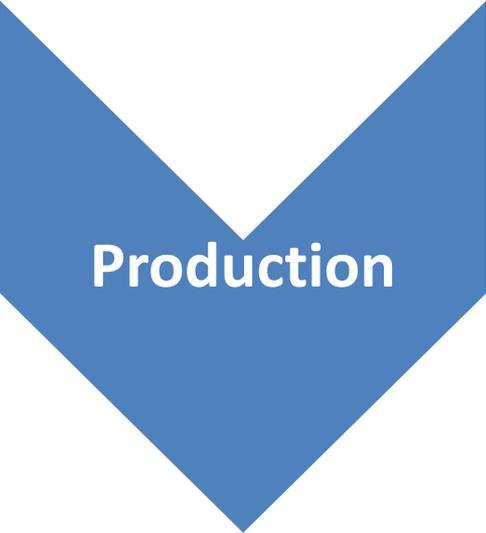
- **Complete Readiness Assessment Form**
- **Verify Readiness Assessment Form and Related Tasks**

Facility Deployment: Phase 3 & 4



Setup

- Setup HCO and SU/FA in the Portal
- ID Vetting of SU/FA
- Order and Map Facility Domain Certificate
- Add RPMS DIRECT Messaging Menu in the EHR
- Setup Facility Domain and SU/FA in the hMail Application



Production

- Setup Local RPMS DIRECT Team
- Verification and Testing
- Onboard Users
 - Registration
 - Training
 - Setup
- Additional Trainings and Support
- Ready to Send and Receive Messages

- Ready to Send and Receive Secure Messages

Applications

- **Certificate Authority Portal**
 - Order and approve Certificates and manage representatives and Trusted Agents for both Area and Site.
- **hMail Administrative Application**
 - Complete implementation, perform audits, and manage domain, administrator, and user access.
- **RPMS DIRECT Messaging Webmail**
 - Connects Healthcare providers and other healthcare professional to the RPMS DIRECT Messaging via RPMS-EHR.

Certificate Authority Portal

Access limited to:

- National Administrators
- Area Administrators

Functions:

- Set-up HCO
- Order
 - Organization certificates
 - Address certificates
- Manage
 - Contacts
 - Users
 - Domains
 - Certificates: Issue new, reissue, and revoke

Portal Role & Access

Defined Roles and Access within the CA Portal

	Role	Access
National Administrator	ISSO, Trusted Agent	Admin
Area Administrator	Trusted Agent	Operator
Service Unit/Facility Administrator	Representative, Trusted Agent	No Access

Area Administrator Setup

1. ITAC System: RPMS DIRECT Area Admin
2. Complete DigiCert Declaration Form

From: DigiCert <admin@digicert.com>
To: Patel, Meghna (IHS/HQ) [C]
Cc:
Subject: Please complete the required identity form for Indian Health Service



Hello Meghna Patel,

Indian Health Service has requested a certificate for use with Directed Exchange messaging they manage for your organization. Before DigiCert can issue this certificate, DirectTrust requires that your identity be verified.

Please visit the link below to ensure that your personal information is correct and to give Indian Health Service permission to manage this certificate on your behalf.

<https://www.digicert.com/direct/contact-update.php?token=>

If you have any questions please contact DigiCert Support or your account manager at Indian Health Service.

To learn more about DigiCert's role in Directed Exchange please visit this link.

www.digicert.com/direct-project/what-is-the-direct-project.htm

To learn more about DirectTrust please visit this link.

www.directtrust.org/directtrust-101/

Thank you,

DigiCert Support
Online: www.digicert.com
Support: support@digicert.com
Phone: 1-801-877-2100
Toll Free: 1-800-896-7973 (US & Canada)
Fax: 1-866-842-0223 (Toll Free - US & Canada)

AA Declaration Form

Indian Health Service has requested a certificate for use with the Directed Exchange messaging they manage for your organization. Before DigiCert can issue this certificate, DirectTrust requires that your identity be verified.

Please complete the form below to ensure that your personal information is correct and to give Indian Health Service permission to manage this certificate on your behalf.

Identity Information	Government ID Information
First Name Meghna	Photo ID Type*
Last Name Patel	ID Number*
Email meghna.patel@ihs.gov	Expiration Date* mm/dd/yyyy
Telephone*	
Birth Date* mm/dd/yyyy	
Country*	
Address*	
City*	
State*	
Postal Code*	

Password
Password
Confirm Password

Terms of Service
<p>ISSO ACCEPTANCE OF APPOINTMENT</p> <p>PLEASE READ THIS ACCEPTANCE CAREFULLY BEFORE ACCEPTING APPOINTMENT AS AN ISSO AND TRUSTED AGENT UNDER DIGICERT'S AGREEMENT WITH HISP. BY ACCEPTING APPOINTMENT, YOU AGREE TO THE TERMS HEREIN AND THAT YOU WILL BE RESPONSIBLE FOR THE USE AND SECURITY OF THE PRIVATE KEYS ASSOCIATED WITH CERTIFICATES YOU APPROVE. IF YOU DO NOT WISH TO TAKE ON THIS RESPONSIBILITY, DO NOT ACCEPT APPOINTMENT, SUBMIT IDENTITY INFORMATION TO DIGICERT, OR APPROVE THE ISSUANCE OF CERTIFICATES. IF YOU HAVE ANY QUESTIONS, PLEASE E-MAIL DIGICERT AT LEGAL@DIGICERT.COM OR CALL 1-800-896-7973.</p> <p>DigiCert and HISP previously entered into an agreement ("HISP Agreement") wherein your Health Information Service Provider ("HISP") was authorized to order ITU X.509 v-3</p>

* I have read and agree to the terms above

SAVE CHANGES

- Email:** Enter work email address. This will be used to request more information for you and any future communication in regards to your account and domain. This email address will become your CA portal User ID.
- Address:** Your home address as this will be used to identify your identity.
- Government ID Information:** Select PIV Card from the dropdown.
- Password:** Password length must be 8 or longer, contain a capital letter and either a number or special character.
- Terms of service:** Read and accept DigiCert Terms of service by checking the checkbox
- Save Changes**

Area Administrator

- Upon successful completion of the form, all the information/form is submitted to DigiCert for your ID proofing
- Setup complete for Area Administrator
- Upon completion ID proofing you are now ready to:
 - Setup HCO
 - Request org. certificates



YOUR SUCCESS IS BUILT ON TRUST®

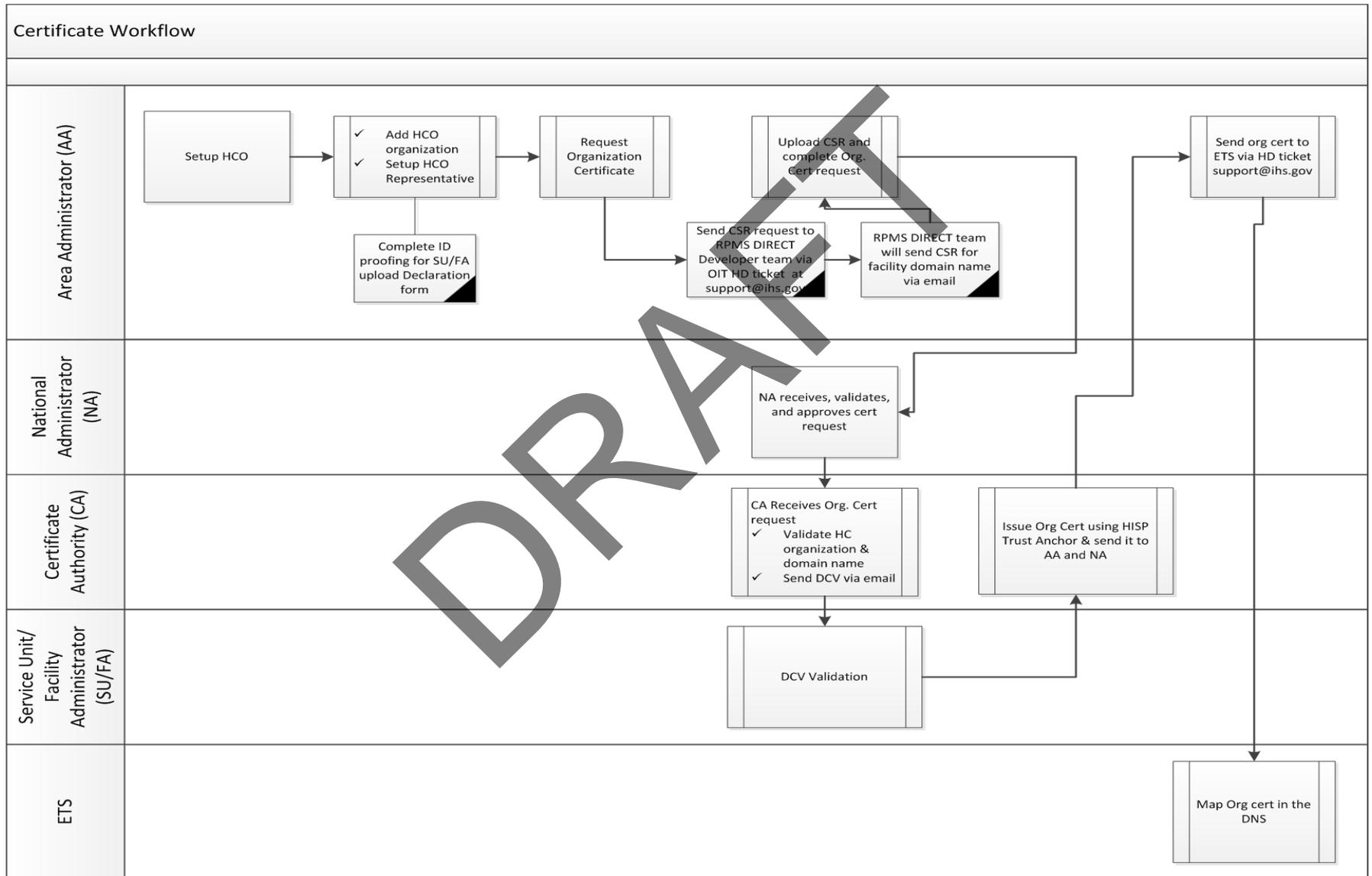
Support ▾

Thank You For Updating Your Information

Simplified Certificate Workflow

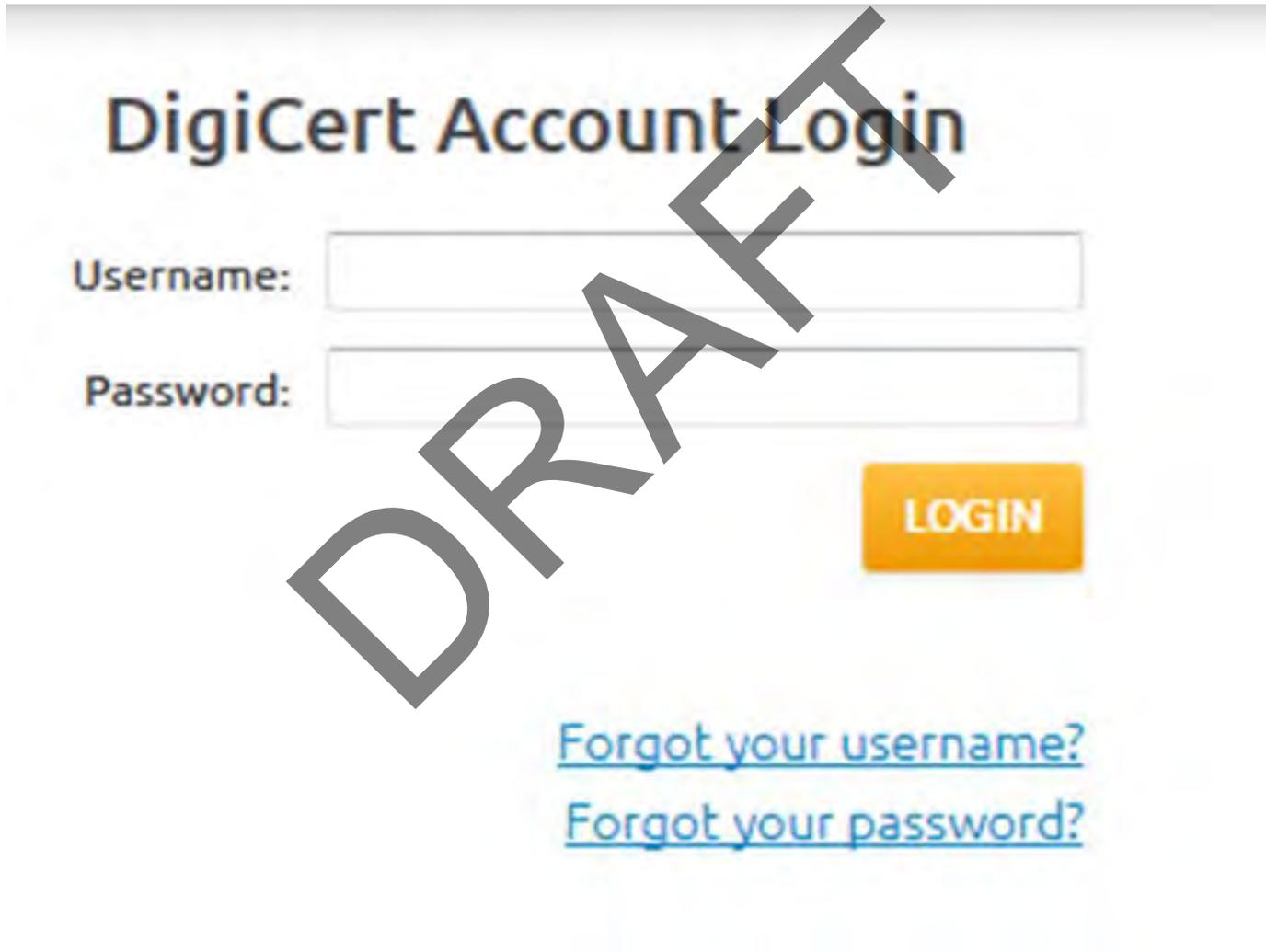


Certificate Workflow in Detail



Certificate Authority Portal

<https://www.digicert.com/account/login.php>



DigiCert Account Login

Username:

Password:

LOGIN

[Forgot your username?](#)

[Forgot your password?](#)

Certificate Authority Portal

First time user will be required to set security question and answer


Account Settings

User Management

Edit My Profile

Please select a new question and enter the answer below.

Update My Security Question

Security Question	<ul style="list-style-type: none">Your childhood nickname?The name of your childhood best friend?The name of your first stuffed animal?The city or town where your parents met?Where does your nearest sibling live?Your maternal grandmother's maiden name?Your best friend in high school?The strangest thing you've ever eaten?
-------------------	---

Your Answer

Save

Add HCO

1. HCO → Add New HCO

The screenshot shows the digicert web interface. The top navigation bar includes 'Certificates', 'Requests', 'HCOs', 'Users', 'Contacts', 'Finances', 'Settings', and 'Support'. The user is logged in as 'Meghna Patel'. The main content area is titled 'Manage Health Care Organizations' and features a sidebar with 'Manage' options: Certificates, Requests, HCOs, Users, and Contacts. The main area has a search bar, a status dropdown set to 'All', a product dropdown set to 'All', and view options for 'List' and 'Detail'. A table displays one HCO entry:

Order #	Common Name	ISSO	Rep	Status	Expires	HCO
00509078	direcths.net	Glenn Janzen	Glenn Janzen	Issued	28-Apr-2015	Indian Health Ser...

The page also shows '1 of 1' for both the table and the overall content.

Add HCO

Certificates Requests HCOs Users Contacts Domains Finances Settings Support Meghna Patel

Manage

- Certificates
- Requests
- HCOs
- Users
- Contacts
- Domains

Search Ctrl +

Recently Viewed

Add Health Care Organization

HCOs > new

Identity

Type*
Organization

Health Care Organization*

Legal Assumed Name (DBA)

Representative

Email

First Name

Last Name

Send contact info and authorization email

Address

Country*

Address*

City*

State*

Postal Code*

Domain Info

Domain Info

Domain Name

Options

HPAA Compliance Type

Default Assurance Level*

Use a Custom Declaration of Identity

Validation Options

When validating Order's DigiCert should contact: *

The ISSO for the Order

When validating Domains DigiCert should contact: *

HISP Validation Contact

Terms of Service

By checking below, I agree as follows:

The organization is a HIPAA covered entity, a HIPAA business associate, or a healthcare-related organization which treats protected health information with privacy and security protections that are equivalent to those required by HIPAA. If the organization is a healthcare-related organization, the organization limits its use of the Certificate to purposes related to Direct messages and has agreed to handle protected health information with privacy and security protections that are equivalent to those required by HIPAA. I acknowledge that the organization may terminate my agency to request certificates on its behalf and immediately forward any requests for termination to DigiCert.

The organization has authorized HISP as its certificate email and consent to the subscriber agreement. I will only use certificates requested by:

*I have read and agree to the terms above

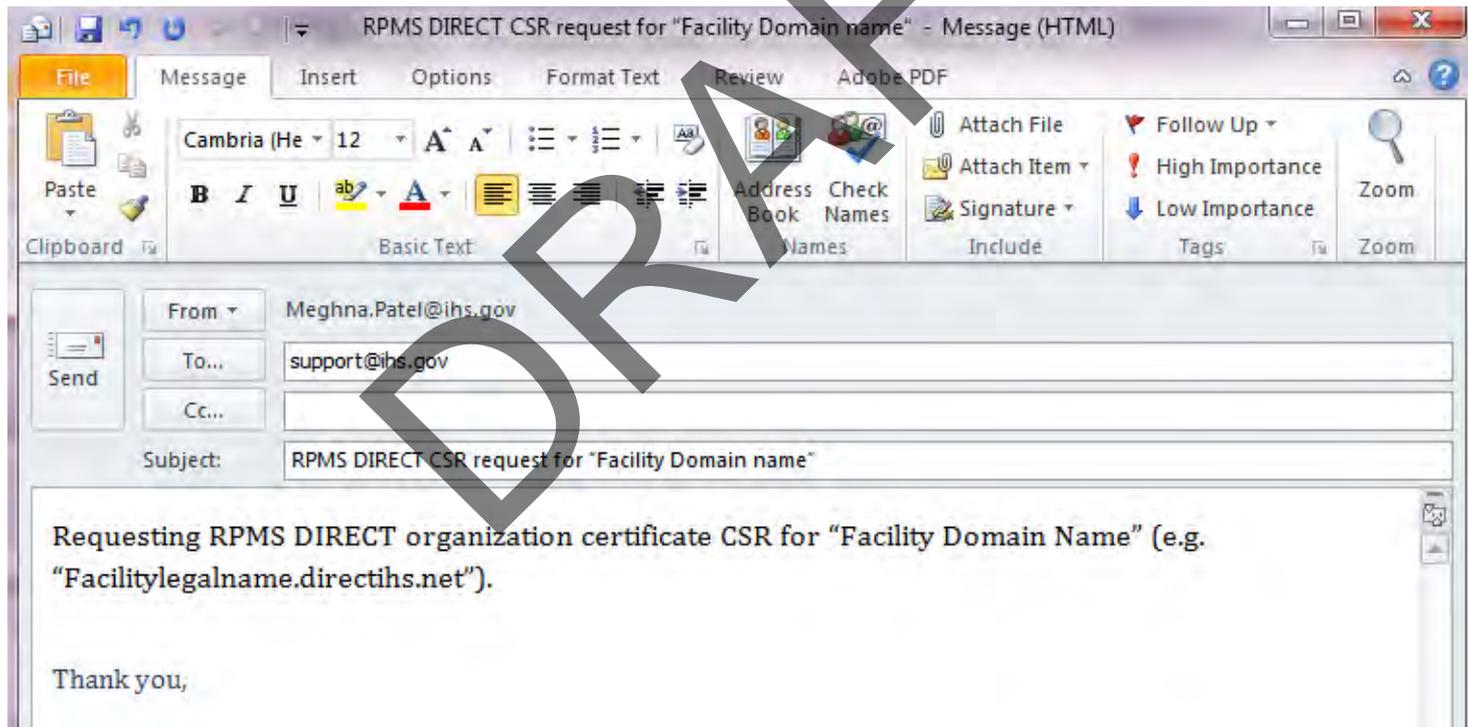
CREATE HEALTH CARE ORGANIZATION

2. Complete requested information:

- Identity section:**
 - Type Field:** *Organization*
 - Health Care Organization:** *Facility's Legal Name*
 - Address:** *Registered Address*
- Representative Section:**
 - MUST include the designated facility SU/FA information in the *Email, First Name, and Last Name field*
 - Check box for the *"Send contact info and authorization email"*.
- Domain Info section:** *Facility's full domain name*
- Options section:**
 - HIPAA Compliance Type field:** *HIPAA Covered Entity*
 - Default Assurance Level field:** *Medium*
- Validation Options section:**
 - When validating Order DigiCert should contact field:** *HISP Validation Contact*
 - When validating Domains DigiCert should contact field:** *HISP Validation Contact*
- Read & accept **Terms of Service**
- Click on **CREATE HEALTH CARE ORGANIZATION** button at the bottom of the page.

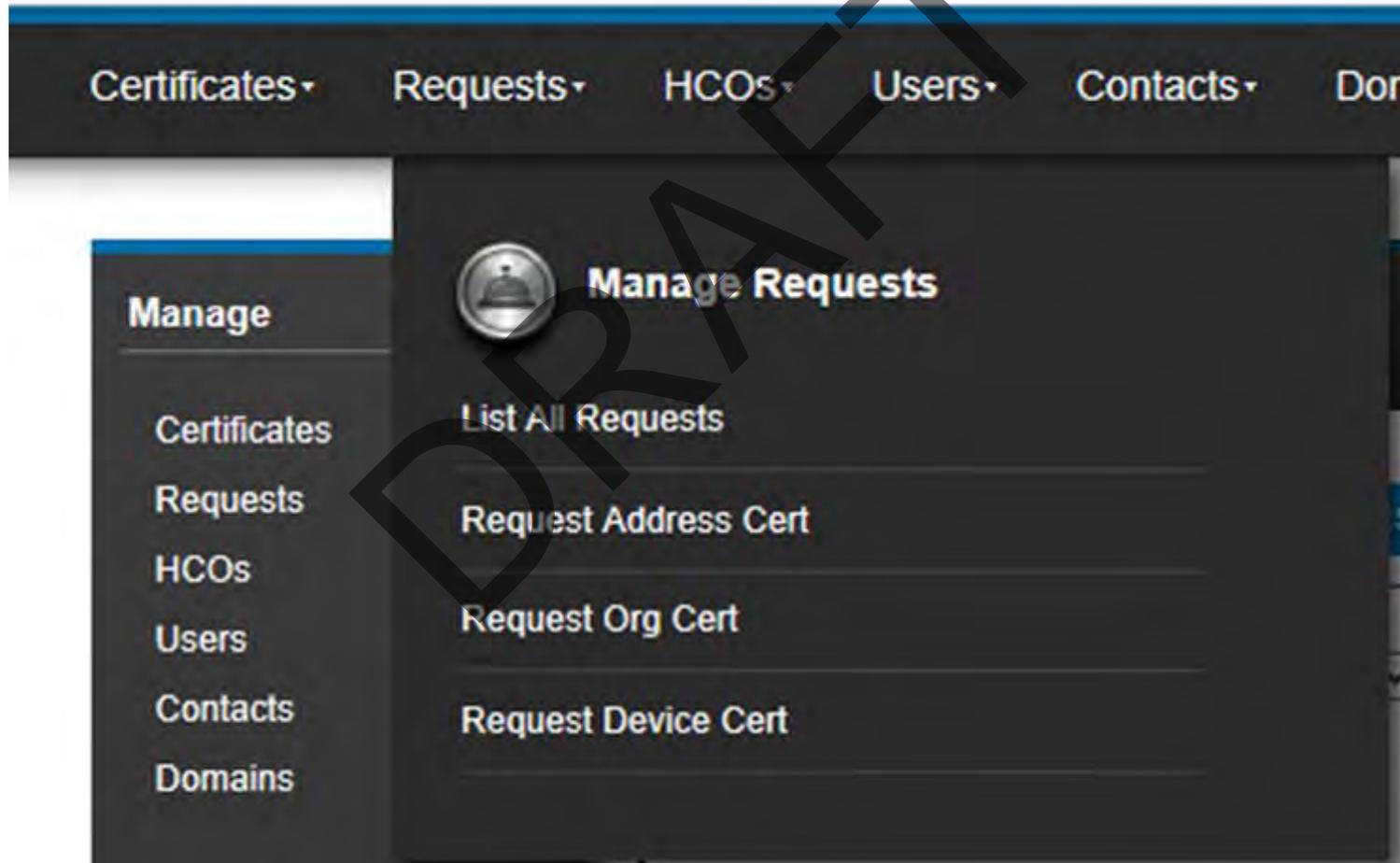
Request Org. Certificate

1. Complete Identity Proofing & upload Declaration Form for SU/FA
2. Update SU/FAs role to Trusted Agent
3. Request CSR for the facility domain name via OIT HD ticket from the RPMS DIRECT Development team at Support@ihs.gov:



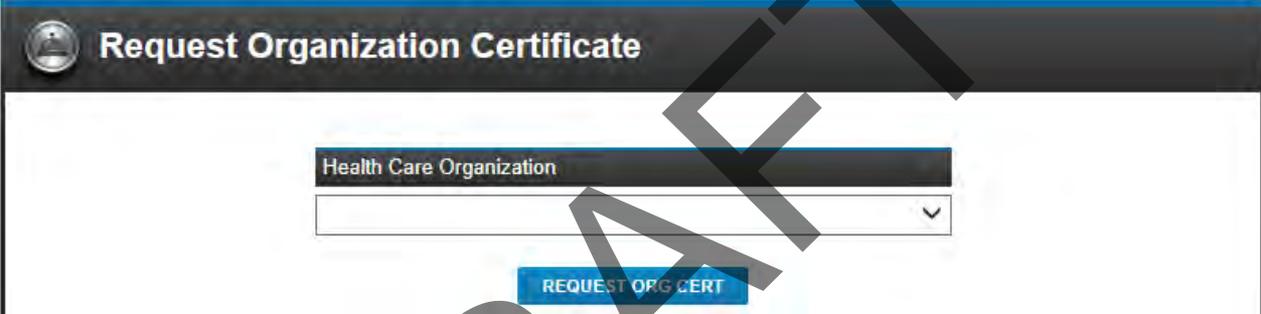
Request Org. Certificate

4. From the CA Portal Main screen: Request → Request Org Cert



Request Org. Certificate

5. Select Facility's name for which organization certificate is being requested
 - Click on the Request Org. Cert button



Request Organization Certificate

Health Care Organization

REQUEST ORG CERT

OR

When in the HCO screen click on the **Request ORG CERT** button



HCO Info Users Contacts Requests Certificates Domains

REQUEST ADDRESS CERT REQUEST ORG CERT REQUEST DEVICE CERT EDIT

Request Org. Certificate

Gallup Indian Medical Center

HCO Info Users Contacts Requests Certificates Domains

Requests > Request an Organization Certificate

Authorization

Representative*

Certificate Details

Domain (common name)* [View Domains](#)

Validity Period*

Assurance Level* **Medium**

Organization Info

Name: Gallup Indian Medical Center
Address: 516 East Nizhoni Blvd
PO BOX 1337
City: Gallup
State: NM
Postal Code: 87301
Country: USA

Certificate Signing Request

[Click to upload a CSR](#) or paste one below

[How should I format my CSR?](#)

Notifications

ISSO

Additional certificate recipient email(s) Comma separated

Comments

Comments to Administrator

Terms of Service

DIRECT CERTIFICATE SUBSCRIBER AGREEMENT

PLEASE READ THIS AGREEMENT CAREFULLY BEFORE PROCEEDING. YOU MUST CHECK "I AGREE" BELOW TO ACKNOWLEDGE THAT YOU HAVE READ THIS AGREEMENT, THAT YOU UNDERSTAND IT, AND THAT YOU AGREE TO IT. IF YOU DO NOT ACCEPT THIS AGREEMENT, DO NOT CONTINUE OR APPROVE THE ISSUANCE OF A DIGITAL CERTIFICATE. IF YOU HAVE ANY QUESTIONS REGARDING THIS AGREEMENT, PLEASE E-MAIL DIGICERT AT LEGAL@DIGICERT.COM OR CALL 1-800-896-7973.

This subscriber agreement is between DigiCert, Inc., a Utah corporation ("DigiCert") and the entity applying for a Certificate. A Glossary of Terms

I agree to the Terms of Service above*

REQUEST ORG CERTIFICATE

6. Complete Org Cert Request:

- Representative:** This should be the HCO representative (RPMS DIRECT SU/FA) you added in the "Adding HCO". Ensure that representative has submitted their Declaration form to complete the request.
- Domain:** Enter the Facility's Domain name for whom the certificate is being requested.
- Validation Period:** 1 year
- Assurance Level:** Medium
- Certificate Signing Request (CSR):** Copy and paste CSR you received in step 3.
- Notifications:** Select alternate AA name or enter their email under the Additional Certificate recipient email(s)
- Read and accept **Terms of Service**
- Click on **Request Org Certificate**

CSR

Important Note:

- Be sure to use CSR for the given Domain name
- When you paste the CSR in the box, make sure to include the first and last lines: **BEGIN CERTIFICATE REQUEST** and **END CERTIFICATE REQUEST** as illustrated below.

```
-----BEGIN CERTIFICATE REQUEST-----  
MIICvDCCAaQCAQAwdzELMAkGA1UEBhMCVVMxDTALBgNVBAGyMBFV0YWxkZANBgNV  
BAcMBkxpbmRvbjEWMBQGA1UECgwNRGlnaUNlcnQgSW5jLjERMA8GA1UECwwlRGln  
aUNlcnQxHTAbBgNVBAMMFjV4YW1wbGUuZGlnaWNlcnQuY29tMIIlBijANBgkqhkiG  
9w0BAQEFAAOCAQ8AMIIBCgKCAQEAs+To7d+2kPWeBv/orU3LVbJwDrSQbeKamCmo  
wp5bqDxlwV20zqRb7APUOKYoVEFFOEGs6T6gImnlolhbiH6m4zgZ/CPvWBOkZc+c  
1Po2EmvBz+AD5sBdT5kzGQA6NbWyZGldxRthNLOs1efOhdnWFuhl162qmcflgpil  
WDuwq4C9f+YkeJhNn9dF5+owm8cOQmDrV8NNdiTqin8q3qYAHHRW28gJUCZkTZ  
wlaSR6crBQ8TbYNE0dc+Caa3DOIkz1EOsHWzTx+n0zKfqcbgXi4DJx+C1bjptYPR  
BPZL8DAeWuA8ebudVT44yEp82G96/Ggcf7F33xMxe0yc+Xa6owIDAQABoAAwDQYJ  
KoZlhvcNAQEFBQADggEBAB0kcrFccSmFDmxox0Ne01UlqSsDqHgL+XmHTXJwre6D  
hJSzwbvEtOK0G3+dr4Fs11WuUNT5qcLsx5a8uk4G6AKHMzuhlSj7XZjgmQXGECpY  
Q4mC3yT3ZoCGpIXbw+iP3lmEEXgaQL0Tx5LFl/okKbKYwlqNiyKWOMj7ZR/wxWg/  
ZDGRs55xuoELDj/ZRff9bl+laCUd1YrfYchIi3G87Av+r49YVwqRDT0VDV7uLgqn  
29XI1PpVUNCPQGn9p/eX6Qo7vpDaPybRtA2R7XLKjQaF9oXWeCUqy1hvJac9QFO2  
97Ob1alpHPoZ7mWiEuJwjBPii6a9M9G30nUo39lBi1w=  
-----END CERTIFICATE REQUEST-----
```

Certificate Issuance & Mapping

7. DigiCert will validate organization and issue certificate
8. Email Certificate to ETS team for Mapping via email at Support@ihs.gov

Send

From ▾ Meghna.Patel@ihs.gov

To... support@ihs.gov

Cc...

Subject: DNS CERT record request for the DIRECTIHS.NET zone. (Service/Unit Facility Name)

Attached: DigiCert certs.zip (7 KB)

Please find RPMS DIRECT facility certificate for:

Name: "Facility Domain name" (e.g. "Facilityname.directihs.net")

Record type: CERT

Zone: directihs.net

View: External

Data: See Attached

Thank you!
Meghna

9. Receive mapping confirmation from ETS

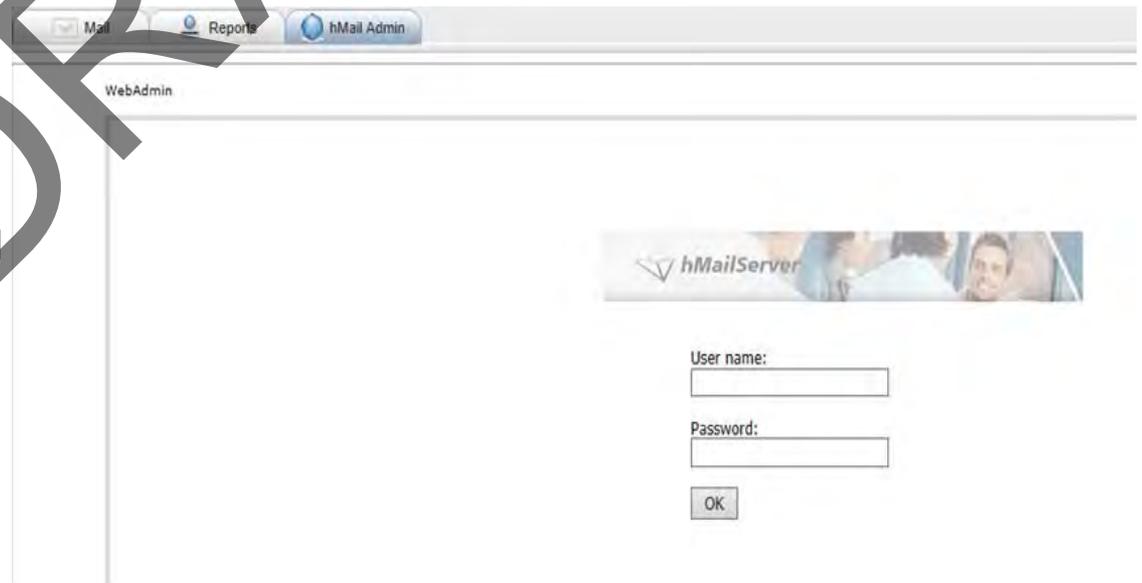
hMail Administrative Application

Access limited to:

- National Administrators
- Area Administrators
- Service Unit/Facility Administrators (SU/FA)

Functions:

- Manage
 - Facility Domain Names
 - Users
 - User's Profile
 - Auto-reply
 - Message Forwarding



hMail: Add Domain

1. Add new Domain in the hMail Administrative Application

WebAdmin

Domains

Domain name	Maximum size (MB)	
direct.ihs.gov	0	Remove
directihs.net	0	Remove
facilityname.directihs.net	0	Remove

Add

hMail: Add Domain

1a. General: Add facility's domain name

Domain

General Signature

Name

Enabled

Save

1b. Signature: Do not make any changes

Domain

General Signature

Enabled

Add signatures to local email

Add signatures to replies

Use signature if none has been specified in sender's account

Plain text signature

HTML signature

Save

1c. Save

hMail Administration Level

- Role designation within the hMail Administrative application.
- When setting up new Users and Administrator be sure to assign correct Administration Level.

RPMS DIRECT Messaging Role	Designated Administration level within RPMS DIRECT Administrative Application
National Administrator	Server
Area Administrator	Server
Service Unit/Facility Administrator	Domain
All None-Administrative Users: Message Agents, PHR Registrars, healthcare providers, healthcare staffs, and patients)	User

hMail: Add SU/FA

2. Add facility SU/FA in the hMail Administrative Application under their own domain.

WebAdmin

Accounts

Address	Maximum size (MB)	
Firstname.lastname@facilityname.directihs.net	500	Remove
provider.test@facilityname.directihs.net	500	Remove
test.user@facilityname.directihs.net	500	Remove

[Add](#)

hMail: Add SU/FA

2a. General:

- Address:** format must be *Firstname.lastname*
- Password:** see requirement on the screen
- Administration Level:** Select appropriate level based on the role

Account

General | **Auto-reply** | Forwarding | Signature | Advanced

Address: John.Doe @facilityname.directihs.net

Password: ●●●●●●●●

Maximum size (MB): 500

Size (MB): 0

Last logon time:

Administration level: Domain ▾

Enabled:

Your password must:

- be 8-15 characters long
- have at least one capital letter and lower case letter
- have at least one number
- have at least one special character (e.g., \$! #), but it MUST NOT be % & - + [] ` ' " .`
- NOT contain spaces
- NOT be the same as username

NOTICE: Your password is case-sensitive.

Select "Administration Level" based on the role being created.

User
Domain
Server

Save

hMail: Add SU/FA

2b. Advanced: Add SU/FA's First and Last Name

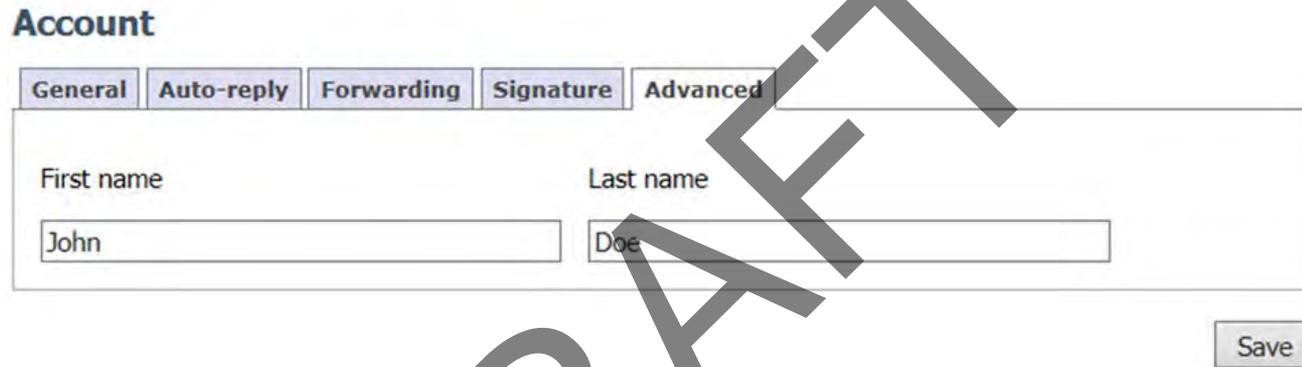
Account

General Auto-reply Forwarding Signature **Advanced**

First name Last name

John Doe

Save



2c. Save

3. Provide login credentials to the SU/FA

RPMS DIRECT Audits

Access limited to:

- National Administrators
- Area Administrators
- Service Unit/Facility Administrators (SU/FA)

Functions:

- Auditing
 - Reactive Auditing
 - Proactive Auditing

NOTE: See RPMS DIRECT Messaging Administrative Manual and Policy for more information

Audits

Mail Reports hMail Admin

* Providing "DIRECT Email Address" takes precedence over "First Name" or "Last Name".
* Based on the date range, the report may take several minutes to complete. Reduce the date range to improve report performance.

First Name :	<input type="text"/>	Last Name :	<input type="text"/>
Activity Start Date (required) :	<input type="text"/>	Activity End Date (required) :	<input type="text"/>
DIRECT Email :	<input type="text"/>	Activity Type :	All Activities ▼

[Accessibility](#) | [Privacy Policy](#) | [Terms and Conditions](#) | [Freedom of Information Act \(FOIA\)](#) | [Contact Information](#)

- Activity Start and end date is required
- Query by:
 - First name
 - Last name
 - Direct Email
 - Activity Type

Activity Type :

- All Activities ▼
- All Activities
- Log In
- Log Out
- Invalid Login
- Send Email
- Receive Email
- Password Reset
- Account Lockout

Audit Report

- Sort Audit report
- Search through Audit report
- Export Audit Reports

First Name :		Last Name :	
Activity Start Date (required) :	2014-05-05	Activity End Date (required) :	2014-05-05
DIRECT Email :		Activity Type :	Send Email
<input type="button" value="Submit"/>		<input type="button" value="Reset Input Fields"/>	

Show 10 Search

Activity Date and Time	DIRECT Email Address	Message	Activity Type	First Name	Last Name
2014-05-05 07:17:19.0	mgreen@Facilityname.direcths.net	Send Email to 'mgrant mgrant@direct.ils.gov' with subject 'An Important Message from your Healthcare Team' on '2014-05-05 07:17:19.0'	Send Email	null	null
2014-05-05 07:18:04.0	mgreen@Facilityname.direcths.net	Send Email to 'mgrant mgrant@direct.ils.gov' with subject 'An Important Message from your Healthcare Team' on '2014-05-05 07:18:04.0'	Send Email	null	null
2014-05-05 07:18:06.0	mgreen@Facilityname.direcths.net	Send Email to 'mgrant mgrant@direct.ils.gov' with subject 'An Important Message from your Healthcare Team' on '2014-05-05 07:18:06.0'	Send Email	null	null
2014-05-05 07:18:12.0	mgreen@Facilityname.direcths.net	Send Email to 'mgrant mgrant@direct.ils.gov' with subject 'An Important Message from your Healthcare Team' on '2014-05-05 07:18:12.0'	Send Email	null	null
2014-05-05 07:24:09.0	mgreen@Facilityname.direcths.net	Send Email to 'mgrant mgrant@direct.ils.gov' with subject 'Other' on '2014-05-05 07:24:09.0'	Send Email	null	null
2014-05-05 07:24:12.0	mgreen@Facilityname.direcths.net	Send Email to 'mgrant mgrant@direct.ils.gov' with subject 'Other' on '2014-05-05 07:24:12.0'	Send Email	null	null

Next Step: Area Administrators

Area Administrators:

- Complete ITAC system for PHR and RPMS DIRECT access request
- Obtain ITAC training and access
- Complete DigiCert Declaration Form
- Identify PHR and RPMS DIRECT early adopters
- Identify early adopters' SU/FA
- Train early adopters' SU/FA
- Submit Readiness Assessment Form by 8/22

Note:

PHR & RPMS DIRECT Beta Area Office will receive Deployment package by 8/13 COB All other Areas will receive post Beta test period

Next Step: SU/FA

Service Unit/Facility Administrators:

- Complete ITAC system for PHR and RPMS DIRECT access request
- Complete DigiCert Declaration Form
- Identify local team
 - PHR Registrars
 - Message Agents
 - Facility Address Designee
 - CAC's
- Train local team
- Submit Readiness Assessment Form by 8/22

Note:

PHR & RPMS DIRECT Beta Area Office will receive Deployment package by 8/13 COB All other Areas will receive post Beta test period

More Information

Additional Resources:

- Pre-Deployment Guide
- User and Administrator Manuals
- Policies
- Flyers for Outreach
- Readiness Assessment Form
- Declaration Form

Training for Areas and Early Adopters

- **Subject:** Central Services PHR & RPMS DIRECT registration and user training for Area and early adopters
- **Date:** August 27th, 2014
- **Time:** 12pm-2:30pm EST (11am CT, 10am MT, 9am PT)

Note:

PHR & RPMS DIRECT Beta Area Office will receive Deployment package by 8/13 COB All other Areas will receive post Beta test period



Questions and Discussion

DRAFT