

AUTOMATED SECURITY ACCESS PROCESSING (A.S.A.P)

REQUESTING ACCESS TO
OPENELIS LABORATORY RESULTS
WEB PORTAL
(LABORATORY SUBMITTERS)

STEP A. Creating A.S.A.P User profile

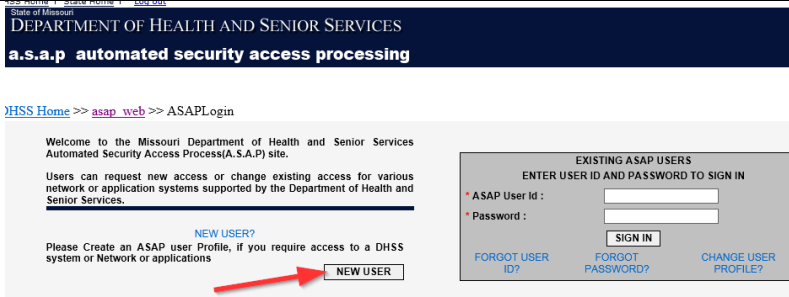
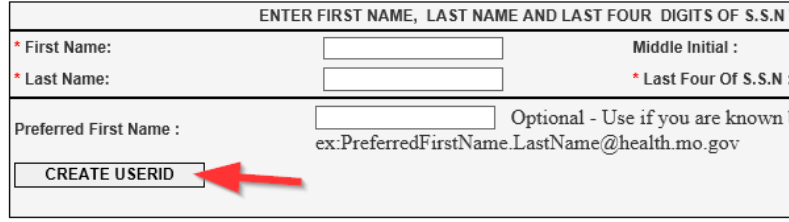
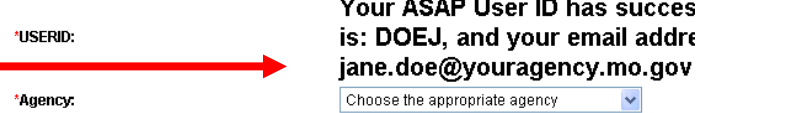
(This step is to be completed only once per user)

Please read...

- If you have an ASAP profile already and know your login credentials, please skip to Step B (submitting the request)
- If you are unsure you have an ASAP profile, here are a few steps to determine that
 - If you already have an LPHA email account, DHSS health applications and/or DSS prod/mainframe access you mostly likely have an ASAP profile.
 - If you try to create an ASAP profile and you receive a red message indicating that first name and last name is already in use, please contact the ITSD Call Center at 800.347.0887 for assistance. This most likely means you have an ASAP profile and the call center can assist with profile updates, password resets, logging into ASAP, and/or submitting requests.
- If you have questions on completing the ASAP process, please call Sandy Jones or Shondra Johnson at 573-751-3334.

Creating A.S.A.P User profile

- Open Internet Browser and enter address
http://webapp02.dhss.mo.gov/asap_web/ASAPLogin.aspx
- Click “Yes” to any security messages

Steps	Screen Print
<p>If you have not used ASAP before or do not have an ASAP profile, click the NEW USER button.</p> <p>You will only need to go through the profile creation steps once.</p>	
<p>1. Enter your first name, last name and last four of S.S.N. Also enter a Preferred First Name if desired.</p> <p>Click the CREATE USERID button.</p>	
<p>2. Make note of the User ID that is assigned to you.</p>	 <p>Your ASAP User ID has succes is: DOEJ, and your email address jane.doe@youragency.mo.gov</p>

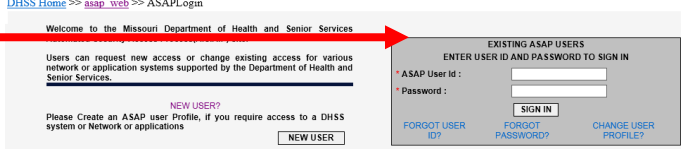
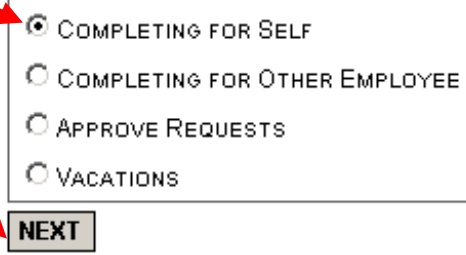
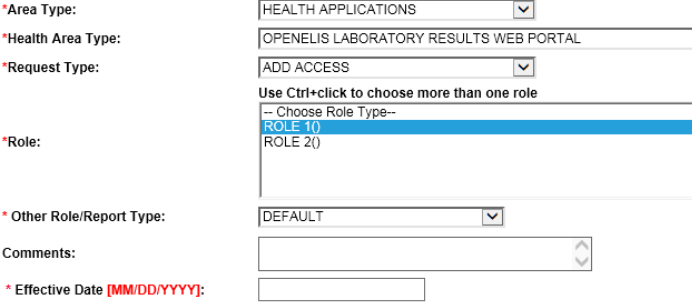
ASAP

<p>3. Select Others (Schools, Private Providers, etc.) for Agency.</p> <p>4. Choose DEPARTMENTAL SUPPORT SERVICES for Local Security Security Officer County.</p> <p>5. Choose OpenELIS Laboratory Results Web Portal (Shondra Johnson) for Local Security Officer.</p>	<div style="border: 1px solid #ccc; padding: 5px;"> <p>*Agency: Others (Schools, Private Providers, etc.)</p> <p>*Local Security Officer County: DIVISION OF COMMUNITY AND PUBLIC HEALTH - DCPH</p> <p>*Local Security Officer: SHOWMEVAX LSO (DEBORAH BONCHONSKY)</p> </div>
<p>6. Type your work street number, it will provide a drop-down list. Click your address. If you address is not listed, call ITSD at 573.751.6388 or 1.800.347.0887 and they will work with you to get your address added.</p>	<div style="border: 1px solid #ccc; padding: 5px;"> <p style="text-align: right; margin: 0;">ADDRESS INFORMATION</p> <p>*Address Search (Type in your address starting with Street Number) </p> </div>
<p>7. Enter your email address and phone number. Fax number is not needed.</p>	<div style="border: 1px solid #ccc; padding: 5px;"> <p>*Email1 </p> <p>* Phone1 Ext </p> <p>Fax Number </p> </div>
<p>8. Enter a password. ASAP password should be 6-8 characters, include letters and numbers but does not allow special characters.</p> <p>Retype your password.</p> <p>Enter a challenge question. This should be a question only you know the answer too.</p> <p>Type the response or answer to the challenge question</p> <p>Retype the response or answer to the challenge questions</p> <p style="background-color: yellow; padding: 2px; margin-top: 10px;">**If ASAP did not prompt you to create a password, your password was automatically set to first initial of first name, first initial of last name, and last four digits of your social security number.**</p>	<div style="border: 1px solid #ccc; padding: 5px;"> <p>* Password [Password length between</p> <p>* Retype Password </p> <p>* Challenge Question ex:What is your favorite</p> <p>* Challenge Response ex:Blue</p> <p>* Retype Response </p> </div>
<p>9. Click the CREATE PROFILE button</p>	<div style="border: 1px solid #ccc; padding: 5px; text-align: center;"> <p>CREATE PROFILE</p> </div>
<p>10. You should see a message about the profile being successfully created. Make note of your User ID</p>	<p>PROFILE SUCCESSFULLY CREATED.</p> <p>Your ASAP User ID has successfully been generated. Your User ID is: USERL</p> <div style="text-align: right; margin-top: 5px;"> Request Access </div>

----- Please continue to Step B -----

STEP B. Request OpenELIS Web Portal access

- Open Internet Browser and enter address
http://webapp02.dhss.mo.gov/asap_web/ASAPLogin.aspx
- Click Yes to any security messages

<p>1. Type the User ID and Password you created in Step A.</p> <p>**If ASAP did not prompt you to create a password, your password was automatically set to first initial of first name, first initial of last name, and last four digits of your social security number.**</p> <p>2. Click the SIGN IN button.</p>	
<p>3. Choose the 'Completing for Self' option.</p> <p>4. Click the NEXT button.</p>	
<p>5. Choose 'HEALTH APPLICATIONS' for Area Type.</p> <p>6. Choose 'OPENELIS LABORATORY RESULTS WEB PORTAL' for Health Area Type.</p> <p>7. Choose 'ADD ACCESS' for Request Type.</p> <p>8. Choose 'DEFAULT ROLE' for Role.</p> <p>9. Choose 'DEFAULT' from the Other Role/Report Type dropdown list.</p> <p>10. Type in the name of the facility(s) in which you collect water samples in the Comments field. If you are requesting for a Public Water Supply please include your PWS ID.</p> <p>11. Type in the Effective Date</p>	

<p>12. Leave the Do you enter Data for Additional Agencies question defaulted to 'NO'.</p>	<p>Do you enter Data for Additional Agencies? <input checked="" type="radio"/> YES <input type="radio"/> NO</p>
<p>13. Click the 'I Agree' button.</p> <p>14. Click the 'Submit Form' button.</p>	<p>I, THE UNDERSIGNED, AN EMPLOYEE OF THE STATE OF MISSOURI OR AUTHORIZED U UNDERSTAND THAT APPROVAL AND ASSIGNMENT OF THE REQUESTED ID OR APPROV ENABLES ME TO ACCESS THE RESOURCES WHICH, BY LAW, MUST BE UTILIZES ONLY ASSIGNED DUTIES. THEREFORE, I AGREE TO MAKE NO INQUIRIES OR UPDATES WHICI PERFORMANCE OF MY OFFICIAL DUTIES. I UNDERSTAND THAT STATE AND FEDERAL S CONFIDENTIALITY OF INFORMATION AND PROVIDE PENALTIES FOR UNAUTHORIZED A OF INFORMATION. VIOLATIONS OR DISCLOSURES ON MY PART MAY RESULT IN DISCIPL ONE OR ALL OF THE FOLLOWING: (1) SUSPENSION, (2) CIVIL COURT AND (3) DISMISS. CONFIDENTIAL ALL INFORMATION MADE AVAILABLE TO ME IN THE PERFORMANCE OF ADDITION, I AGREE NOT TO DIVULGE OR SHARE MY PASSWORD WITH ANYONE.</p> <p><input type="button" value="Submit Form"/> <input type="button" value="I Agree"/> <input type="button" value="Quit"/></p>
<p>A message should appear stating the request was sucessfully completed.</p> <p>Print a copy of the form for your records.</p>	<p>You have successfully completed your request form. Press the button below to view a printer friendly copy of your request for your records. Please do not send the print copy for Request process.</p> <p><input type="button" value="Printer Friendly Copy"/> <input type="button" value="FILL OUT ANOTHER ACCESS FORM"/></p>