

## Instructions for Renewing an EIDS Account

All DODD portal accounts, which are used to access the EIDS application, must be renewed on an annual basis. In order to renew a DODD portal account, a security affidavit will first need to be completed and submitted to DODD. To do so, go to this link:

<https://sra.prodapps.dodd.ohio.gov/default2.aspx>

On the **Start** screen, enter all account information into each field, as follows:

- **Account Type:** Select "Independent or Agency Provider"
- **Request Type:** Select "Renew Account"
- **First Name, Middle Initial, Last Name:** Enter these exactly as they are listed within your DODD portal account
- **Phone Number:** Enter the best phone number to reach you during the day
- **Email Address:** Enter the email address associated with your DODD portal account
- **Provider Type:** Select "Agency Provider"

Be sure to check the box under your email address to certify that the email listed is your personal email address. Then click "Next."

The screenshot shows the 'Start' screen of the 'Data Security/Confidentiality Individual Application' on the Ohio.gov DODD portal. The page has a dark green sidebar on the left with the text 'Steps to Complete: Start Information Systems Review Finish'. The main content area has a header with the Ohio.gov logo and 'DODD Data Security/Confidentiality Individual Application'. Below the header is a warning box: 'When Renewing an Account, ALL CURRENT SYSTEMS WILL BE RENEWED. If you need to ADD a System, please choose Change System Access.' Below this is a red note: 'Please fill in all fields if possible: Incomplete or missing information may delay processing'. The form fields are as follows: 'Account Type' (dropdown menu set to 'Independent or Agency Provider'), 'Request Type' (dropdown menu set to 'Renew Account'), 'First Name' (text box with 'Taylor'), 'MI' (text box with 'M'), 'Last Name' (text box with 'Hammond'), 'Phone Number' (text box with '(614)728-9164' and a hint 'ex.(###)###-####'), 'Email Address' (text box with 'Taylor.Hammond@dodd.ohio.gov'), and a checkbox labeled 'I certify that the listed email is my personal email address and not a group or shared email.' which is checked. Below the email field is a 'Provider Type' dropdown menu set to 'Agency Provider'. At the bottom, there is a note: 'Note: Access to DODD systems will expire on their own annually' and a 'Next' button.

On the **Information** screen, enter your agency information into each field as follows:

- **Address, City, State, Zip Code:** Enter your employer's address
- **Are there any changes to the contact information on your account:** Select the appropriate response
- **Agency Name:** Enter your employer name
- **Director's Name:** Enter the name of the director of your agency/company/division (e.g., your supervisor, contract manager, etc.)
- **Contract Number:** Enter "0000000" (seven zeros)

Then, click "Next."

The screenshot shows a web form titled "Ohio.gov | DODD Data Security/Confidentiality Individual Application". On the left, a vertical sidebar lists "Steps to Complete:" with "Start Information" highlighted in bold, and "Systems", "Review", and "Finish" below it. The main form area has a header with the Ohio.gov logo and "DODD Data Security/Confidentiality Individual Application". Below the header is a large empty text box. A red message reads: "Please fill in all blank fields: Incomplete or missing information may delay processing". The form contains several input fields: "Address:" with "30 E. Broad St.", "City:" with "Columbus", "State:" with a dropdown menu showing "OHIO", and "Zip Code:" with "43215" and a placeholder "ex.#####". Below these is a question: "Are there any changes to the contact information on your account?" with radio buttons for "YES" and "NO", where "NO" is selected. Further down are three rows of input fields: "Agency Name:" with "Your Agency Name", "Director's Name:" with "Your Director's Name", and "Contract Number:" with "0000000" and a placeholder "ex.#####". Each of these three rows has a "What's This" link to its left. At the bottom, a note states: "Note: Access to DODD systems will expire on their own annually". To the right of the note are two buttons: "Previous" and "Next".

On the **Finish** screen, read the entire DODD Data Security and Confidentiality Agreement.

**Ohio.gov | DODD** Data Security/Confidentiality Individual Application

### DODD Data Security and Confidentiality Agreement

Security and confidentiality are a matter of concern for all users of Ohio Department of Developmental Disabilities (DODD) information systems and all other persons who have access to DODD confidential data. Each person authorized to access DODD systems holds a position of trust relative to this information and must recognize the responsibilities entrusted to him in preserving the security and confidentiality of this information. Confidentiality requirements contained in law include, but are not limited to, ORC sections 5123.62(T), 5123.89 and 5126.044. An authorized user's conduct, either on or off the job, may threaten the security and confidentiality of this information. It is the responsibility of every user to understand and comply with the following:

1. You must not make or permit unauthorized uses, nor violate the confidentiality or privacy, of any information in files maintained by DODD.
2. You must not seek to benefit personally or permit others to benefit personally by any confidential information that has come to you by virtue of your work duties.
3. You must not exhibit or divulge the contents of any record to any person except in the conduct of your work duties or in accordance with the policies of DODD.
4. You must not knowingly include or cause to be included in any record or report a

**Steps to Complete:**  
Start  
Information Systems  
Review  
**Finish**

Scroll down to view the rest of the agreement. Check the box to indicate you have read and understand the DODD policy on data security and confidentiality. Then, select "Finish."

**Ohio.gov | DODD** Data Security/Confidentiality Individual Application

...me from the system where it is stored except when required in the performance of your duties.

6. You must not access or request others to access any DODD or Ohio Data Network system for personal business.
7. You must not violate rules and regulations concerning access to controlled areas.
8. You must not divulge or share any security codes (i.e., user-names, passwords, etc.) used to access any secured files.
9. You must immediately report any violation of this policy by anyone to the DODD/IT Security Manager.
10. You must not aid, abet, or act in conspiracy with another to violate any part of this policy.
11. You must agree to follow all applicable DODD policies and procedures pertaining to the use of DODD or Ohio Data Network computer software and hardware.

Any Violations Of This Agreement May Result In the Cancellation of your Security Access and Possible Referral to the Office of the Attorney General for its Disposition Pursuant To All Applicable Laws and Rules Any Violations of this Policy may result in Disciplinary Action Pursuant to all of the applicable Laws and Rules.

**I have read and understand the DODD policy on data security and confidentiality.**

Thank you for completing the wizard. Please click finish and print your application.

**Steps to Complete:**  
Start  
Information Systems  
Review  
**Finish**

Note: Access to DODD systems will expire on their own annually

[Previous](#) [Finish](#)

When you reach the screen confirming you have finished the security wizard, Select "Print Form."

## Security Application Form

You have finished the Security Wizard. Thank You!

Applications must be filled out completely and accurately. Incomplete/inaccurate affidavits will not be processed.

Once Completed, Please PRINT the Form and have it SIGNED:  
You can Submit through Email to:

Ohio Dept. of Developmental Disabilities Information Technology Services  
Email: [itscallcenter@dodd.ohio.gov](mailto:itscallcenter@dodd.ohio.gov)

*(Building your form may take some time. Please allow it a few seconds.)*

**What do you want to do?**

After printing the form, manually write in "EIDS" in the white space at the bottom of the first page (see example form on the next page). Then, scan the document and send the scanned file to the DODD Help Desk at [ITSCallCenter@dodd.ohio.gov](mailto:ITSCallCenter@dodd.ohio.gov).

If you experience any issues or have any questions regarding renewing your DODD portal account, you can also email [ITSCallCenter@dodd.ohio.gov](mailto:ITSCallCenter@dodd.ohio.gov) or call 1-800-617-6733 Option 4 to reach the DODD Help Desk.



**Account Type**  **Request Type**

**Last Name**  **First Name**  **MI**

**Phone Number**  **E-Mail Address**

I Certify that the listed e-mail address is my personal e-mail address, not a group or shared e-mail account.

**Provider Type**  **Agency Name**

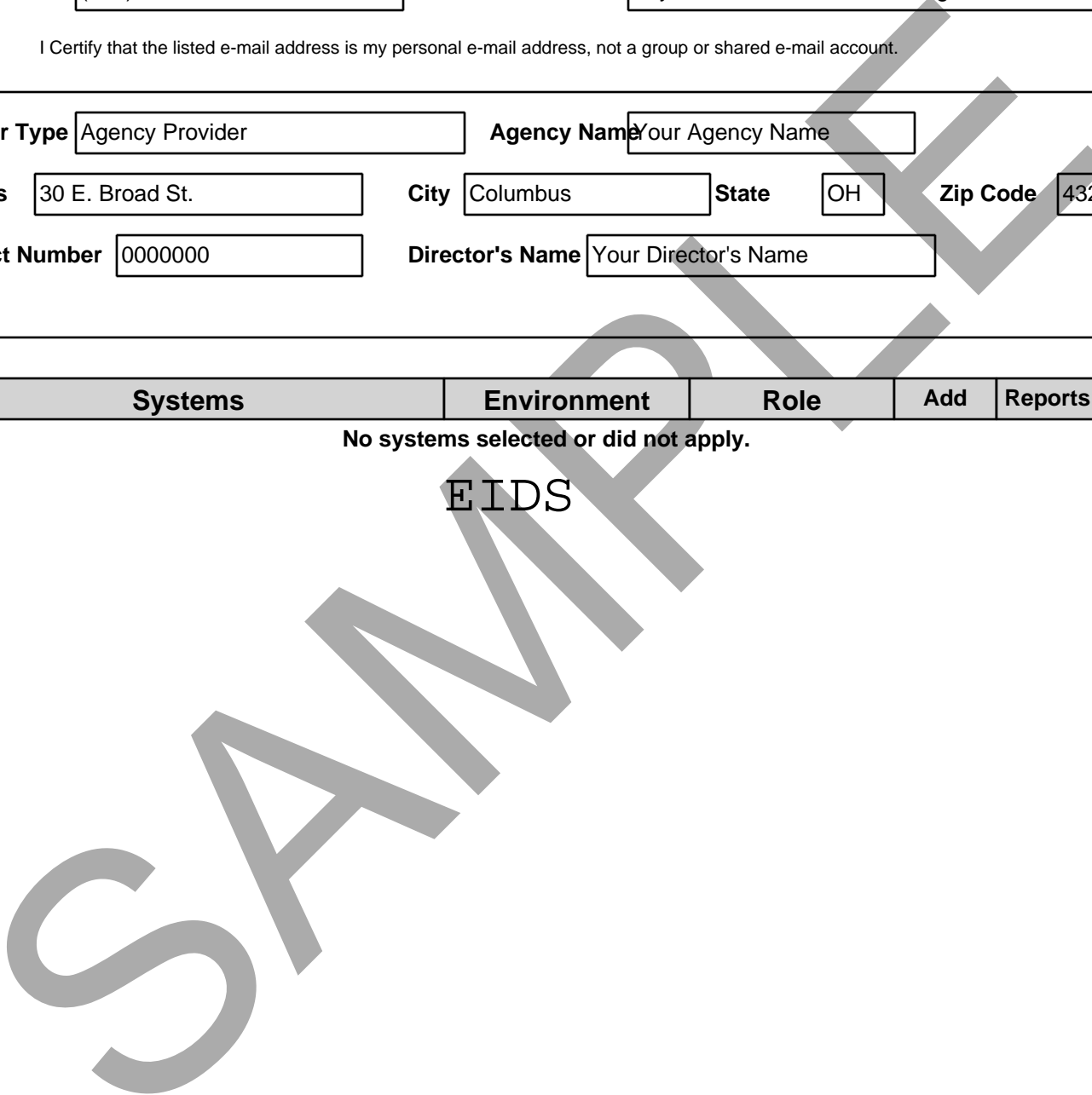
**Address**  **City**  **State**  **Zip Code**

**Contract Number**  **Director's Name**

|  | Systems | Environment | Role | Add | Reports | Remove |
|--|---------|-------------|------|-----|---------|--------|
|--|---------|-------------|------|-----|---------|--------|

No systems selected or did not apply.

EIDS





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1. You must not make or permit unauthorized uses, nor violate the confidentiality or privacy, of any information in files maintained by DODD.
2. You must not seek to benefit personally or permit others to benefit personally by any confidential information that has come to you by virtue of your work duties.
3. You must not exhibit or divulge the contents of any record to any person except in the conduct of your work duties or in accordance with the policies of DODD.
4. You must not knowingly include or cause to be included in any record or report a false, inaccurate, or misleading entry.
5. You must not delete or cause to be deleted any official record or report from any file from the system where it is stored except when required in the performance of your duties.
6. You must not access or request others to access any DODD or Ohio Data Network system for personal business.
7. You must not violate rules and regulations concerning access to controlled areas.
8. You must not divulge or share any security codes (i.e., user-names, passwords, etc.) used to access any secured files.
9. You must immediately report any violation of this policy by anyone to the DODD/IT Security Manager.
10. You must not aid, abet, or act in conspiracy with another to violate any part of this policy.
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|  |          |               |         |
|--|----------|---------------|---------|
| I have read and understand the DODD policy on data security and confidentiality. |          |               |         |
|  |          | Taylor        | Hammond |
| User(Signature)  | Date     | User(Printed) |         |
| <b>FOR DIS USE ONLY</b>  |          |               |         |
| UserID   | Verified | Completed     |         |
|  |          |               |         |
| Begin Date   | End Date |               |         |
|  |          |               |         |