

INSTRUCTIONS FOR CHIMS PROVIDER PORTAL ACCOUNT APPLICATION



CHIMS (Chicago Health Information Management System) is an electronic surveillance system utilized by the Chicago Department of Public Health for the reporting of new cases of sexually transmitted infections (STIs)[†] and HIV/AIDS by Chicago health care professionals[‡].

The CHIMS Provider Portal facilitates the electronic submission of the above-mentioned case reports.

The following instructions detail the procedures for submitting account applications for the CHIMS Provider Portal.

- * Go to the **CHIMS Provider Portal Account Application Login Page**: <https://chims.cityofchicago.org/maven/portalLogin.do>
- * If you are registering for a new CHIMS Provider Portal Account, click on **REGISTER**.
- * If you have already started a CHIMS Provider Portal Account Application, please enter your **USERNAME** and **PASSWORD** and click on **LOGIN** in order to continue the application process.

A screenshot of the CHIMS Provider Portal Account Application Login Page. The page is divided into two main sections: "Welcome" and "Login". The "Welcome" section on the left has a blue header and contains a welcome message, a list of actions (Start or resume account application, Submit your application), and a green "Register" button. The "Login" section on the right has a blue header and contains a message for existing users, two input fields for "Username" and "Password" (both highlighted with a red border), a blue "Login" button, and a link for "Forgot your password? Reset password". At the top of the page is the "HEALTHY CHICAGO" logo and the "CHICAGO DEPARTMENT OF PUBLIC HEALTH" text.

CHIMS Provider Portal Account Application Login Page

[†] At this time, only cases of syphilis, congenital syphilis, and HIV/AIDS may be reported via the CHIMS Provider Portal.

[‡] The Illinois Administrative Code defines a health care professional as a physician (MD or DO) licensed to practice medicine in all its branches, a licensed physician's assistant (PA), or a licensed advanced practice nurse (APN).

For more information regarding the requirements for mandated reporting of sexually transmitted infections (STIs) and HIV/AIDS in the State of Illinois, refer to the following websites:

<http://www.ilga.gov/commission/jcar/admincode/077/07700693sections.html> and <https://www.ilga.gov/commission/jcar/admincode/077/07700697sections.html>.

- * Complete the fields on the **Portal Account Registration Page**. Fields highlighted in **GREEN** are required.
- * Once the fields have been completed, click on **SAVE**.

Registration

To begin your application, please fill in the information below. Enter your email address as your Username. Please use your work address.

* indicates a required field

Account Information

Username *

Password *

Confirm Password *

Profile Information

First Name *

Middle Name

Last Name *

Birth Date

MM/DD/YYYY



Gender *

Contact Information

Street *

City *

Chicago

State *

IL

Zip Code *

County

Country

USA

Home Phone

Mobile Phone

Work Phone *

Email *

Security Question

Security Question *

Security Answer *

Confirm Security Answer *

Save

Cancel

Portal Account Registration Page

* To continue with the application process, click on **Create New Application**.

Welcome to the CHIMS Provider Portal Account Application System

Please select the type of the application you want to create below

Portal Account Application

Create New Application

* Complete the following fields on the **Portal Account Application Page**. Fields highlighted in **GREEN** are required.

- ◆ Licensed in Illinois
- ◆ Medical License Type
- ◆ Medical License #
- ◆ Primary Specialty
- ◆ Secondary Specialty (if applicable)
- ◆ Preferred Communication
- ◆ Fax Number
- ◆ Practice Name
- ◆ Do you report on behalf of any agencies? (If Yes, specify the agency). To add additional agencies, click on **ADD NEW**.

* Once the fields have been completed, click on **NEXT >>**.

* To save the application information and complete at a later time, click on **SAVE**.

Certification and Classification

Please enter the professional information of the provider for whom you primarily report.

* Licensed in Illinois

* Medical License Type

* Medical license number

Primary specialty

Secondary specialty

Demographics

To modify the fields that are read-only, use Edit User Profile on the main screen.

* Preferred Communication

* Email address

* Last name

* First name

Middle name

* Phone number

Fax number

* Practice name

Address

Address2

City

Zip code

Reporting on Behalf of Agencies

* Do you report on behalf of any agencies?

Name of agency

DPH Yearly Review

No data required for this section

* Indicates required field

<< Back Next >> Save Cancel

Portal Account Application Page

- * Before submission, please review your provider portal account application information by clicking on [PORTAL ACCOUNT APPLICATION](#).
- * Once you have reviewed your information and are ready to submit your completed application, click on [SUBMIT APPLICATION](#).
 - ◆ A dialog box will open at the top the screen. Click on **OK** to complete the submission of your application.
- * You will receive an email when your application has been processed.

CHIMS Provider Portal Account Application System Home Joe Provider

Welcome to Chicago DPH STD Provider Portal Account Application System

Welcome to the Chicago DPH STD Portal Account Application System

Active Record

Event Summary

Event ID 10000093
Disease Portal Account Application
Create Date 05/21/2018

Once you have completed the form and are ready to submit, click 'Submit Application'.

[Submit Application](#)

Person Summary

Name [Provider, Joe](#)
Gender Male
Birth Date 01/01/1977
Address 100 North Main St Suite 100, Chicago, IL 60660
Phone (W) (555) 555-5555

Collected Information [Attached Documents](#)

Question Package	Status
Portal Account Application	Completed

Showing 1 to 1 of 1 entries

← Previous **1** Next →

chistdtest.consiliencesoftware.com says:

If applying for case reporting access, once you submit the application you will no longer be able to make any changes. Are you sure you want to submit the application?

OK Cancel

* To logout of the CHIMS Provider Portal Account Application System, click on the **NAME** in the upper right-hand corner and then click on **LOGOUT**.



The screenshot shows the top navigation bar of the CHIMS Provider Portal Account Application System. The page title is "CHIMS Provider Portal Account Application System". On the right side, there is a "Home" link and a user profile dropdown menu for "Joe Provider". The dropdown menu contains two options: "Edit Profile" and "Logout". Below the navigation bar, there is a blue banner with the text "Welcome to Chicago DPH STD Provider Portal Account Application System". Below the banner, there is a white box with the text "Welcome to the Chicago DPH STD Portal Account Application System".

For questions, support, and technical assistance, please email chims@cityofchicago.org.