



HCAI eServices Portal

Public User Guide

Version Number: 1.0

Section 19

Small and Rural Hospital Relief Program Eligibility Tool




1 Introduction

Welcome to HCAI Electronic Services Portal (eSP) User Guides

This section details the step-by-step instructions for creating a Small and Rural Hospital Relief Program Eligibility Tool Request using the HCAI eServices Portal.



Remember: Help is available throughout the online application. Wherever you see the help  icon, click on the question mark to open help and instructions for that item in the application.

eSP eClient Access url = <https://esp.oshpd.ca.gov>

2 Eligibility Survey

Prerequisites:

- A registered public user account. Click Register at the top of eClient Access for an Account.
- Facility PIN. If you do not have the facility PIN, contact eSP Support at (916) 440-8400 or eserv@hcai.ca.gov.

2.1 Page Flow Overview

The predefined steps to create and submit an eligibility survey are detailed in this guide.

Table 1: eSP Pageflow

Step No.	Step Title	Description
Seismic Compliance Extension Applications		
1	Record Type	Small and Rural Hospital Relief Program Eligibility Survey
2	Facility Information	Look up and select the facility from HCAI’s facility database. eSP auto-populates the facility, address, and facility owner information.
3	Contacts	Look up and identify each contact(s) specific to the application.
4	Eligibility Survey Questions	Eligibility questions. All questions require an answer.
5	Facility Authorization	Enter a valid Facility PIN code. Usually entered by Facility Representative but may be entered by any user with the valid PIN.
6	Review	Final review opportunity of all the data entered on the application for accuracy; edits can still be made if necessary.
7	Confirmation	Confirmation survey is submitted to HCAI and eSP issues a record ID number. You may print project summary sheet.

2.2 Basic rules of page flow

Below are some basic rules for using the eServices Portal:

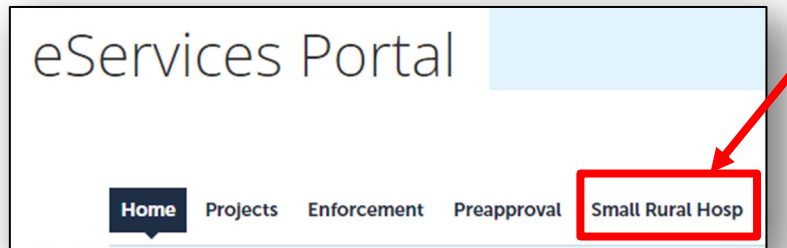
- ✓ When creating an application, follow the page flow in order to avoid errors or missed data.

- ✓ When resuming an existing in-progress application, you will be given the option to start from the beginning or continue where the application was left off. It is best to start from beginning.
- ✓ You can navigate back and forth within the completed pages by clicking the top of each page.
- ✓ You must click on **Continue Application** or **Save and Resume Later** button to save the data entered on the page.
- ✓ It is recommended that you click the **Save and Resume Later** button as needed to prevent data loss due to data entry errors.
- ✓ If any required data is missing from the page, when the **Continue Application** button is clicked, an error message is displayed on the top of the page. You must correct any errors before continuing to the next page flow screen.

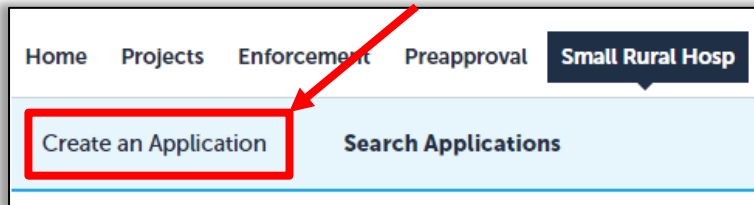
2.3 Submitting survey for Small and Rural Hospital Relief Program Eligibility

The following information will guide you through the steps necessary to create a Small and Rural Hospital Relief Program Eligibility Survey. The following instructions assume you are logged into eClient Access.

Enter the **Small and Rural Hospital Relief Program module** by clicking ‘Small Rural Hosp’.



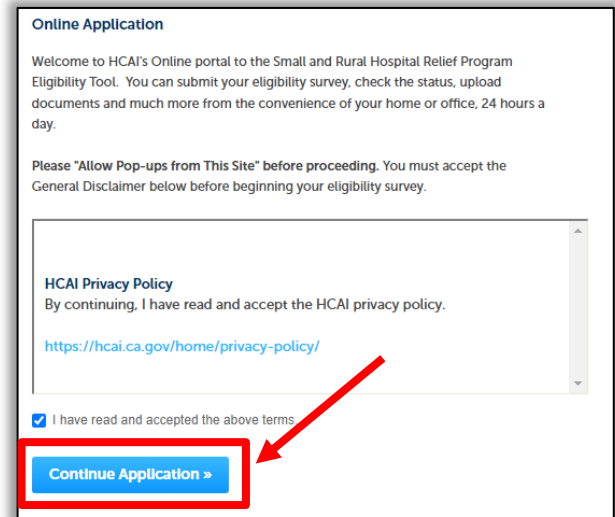
Start the Eligibility Tool Survey submission process



Only registered users may create an Eligibility Tool Survey. Navigate to the **Small Rural Hosp** tab and begin by clicking **Create an Application**.

Accept HCAI Privacy Policy

Click on the link in the window to review the privacy policy. Check “I have read and accepted the above terms” then click the **Continue Application** button.

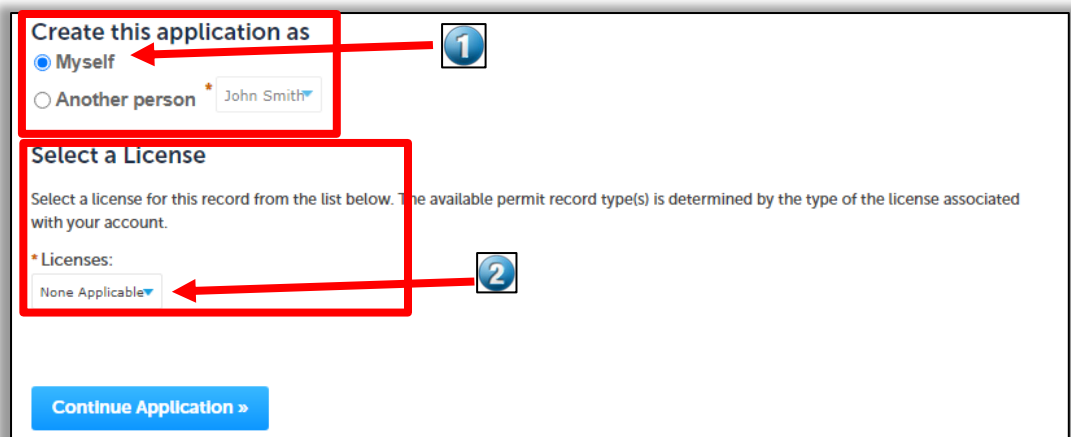


Selecting Delegation and/or a License

1 If you are delegated permissions from another public user, you will be prompted to create the application as yourself or your delegator. You need to select ‘Myself’.

2 If your public user account is associated to Licensed Professional, when prompted, select ‘None Applicable’.

Note: These prompts will not appear if your account is not delegated permissions or associated with a license.



Click ‘Continue Application’ to begin the Eligibility Tool Survey.


Step 1. Enter Facility Information

Enter the HCAI Facility ID or Facility Name then click the **Search** button. If the facility is found, the facility information, address, and owner fields will be automatically populated and become read-only. To restart the search, click the **Clear** button in Facility section; this clears all previous entered data and allows you to start over. Remember: Entering too many characters in the Facility Name may cause the search to not return your facility. ‘%’ can be used as a wildcard when entering the facility name like %north% will find all facilities with ‘north’ in the name.

The screenshot shows the 'Hospital Relief Program Eligibility Tool' interface. At the top, there is a progress bar with six steps: 1 Facility, 2 Contact Information, 3 Survey, 4 Security, 5 Review, and 6. Below this, the title 'Step 1: Facility > Select Facility' is displayed. A note indicates that an asterisk (*) denotes a required field. The main heading is 'Small and Rural Hospital Facility'. Below the heading, there is explanatory text about entering the HCAI Facility Number and using the Auto-Populate dropdown. The form includes an 'Auto-fill with' dropdown set to '10160'. The 'Facility Number' field is highlighted with a red box, and a red arrow points to it from the right. The 'Facility Name' field is also present. Below these are dropdown menus for 'Type of Facility' and 'County Code'. At the bottom, there are 'Search' and 'Clear' buttons.

The screenshot shows the 'Address' and 'Owner' sections of the form. The 'Address' section has fields for 'Street No.' (1234), 'Street Name' (Facility Address), 'City' (Facility City), 'State' (CA), and 'Zip' (99999). Below these are 'Search' and 'Clear' buttons. The 'Owner' section has an 'Auto-fill with' dropdown set to '10160 - HANFORD COMMUNITY HOSPITAL'. Below this are fields for 'Owner Name' (00000 - NO FACILITY), 'Address Line 1' (1234 FACILITY ADDRESS), 'City' (FACILITY CITY), 'State' (CA), and 'Zip' (99999). Below these are 'Search' and 'Clear' buttons. At the bottom, there is a 'Continue Application >' button highlighted with a red box, and a 'Save and resume later' button to its right. A red arrow points to the 'Continue Application >' button from the right.

Remember: Only General Acute Care hospitals may apply for Small and Rural Hospital Relief Program. If a non-General Acute Care hospital facility tries to enter the facility number and click Continue Application, an error message will be displayed.

 **An error has occurred.**
This facility is not a General Acute Care facility. It is not applicable for the Small and Rural Hospital Relief Program. Contact Seismic Compliance Unit at seismiccomplianceunit@hcai.ca.gov. Please press the *Clear* button on the address, owner, and facility sections to clear all data and try to search again.

Please press the **Clear** button on the address, owner, and facility sections to clear all data and try to search again.

As stated above, the Address and Owner sections will be populated when a facility search is successfully found. Once the facility, address and owner sections are populated correctly, click “**Continue Application**”.

Step 2. Contact Information – Enter Contacts

Hospital Relief Program Eligibility Tool

1 Facility | 2 Contact Information | 3 Survey | 4 Security | 5 Review | 6

Step 2: Contact Information > Enter Contact

On this page, you have up to three contacts available. The first is the Applicant which will be the primary contact person for this submittal and should be the facility administrator. Two additional contacts can be added. These contacts are not required. These contacts will be included in all communications.

For each, you can select an account or enter each field manually. To select the user from an account in account, click 'Select from Account'. To enter each field manually, click 'Add New'.

Once all information is complete, click Continue Application.

* indicates a required field.

Administrator

This contact is the primary contact for the submittal. This contact is considered the Applicant and the facility administrator.

Select from Account Add New

Administrator

Contact

This contact is not required and is intended for an additional person to be sent all communications.

Select from Account Add New

Optional Contact

Contact

This contact is not required and is intended for an additional person to be sent all communications.

Select from Account Add New

Optional Contact

Continue Application > Save and resume later

Three different contacts can be entered on this application.

- **Administrator** – This person is the applicant and must be the facility administrator and is required. If a design professional submits this Eligibility Tool Survey, the facility will be asked to revise this entry.
- **Optional Contact** – This contact is available if you want a second person to receive communications. This contact is not required.
- **Optional Contact** - This contact is available if you want a third person to receive communications. This contact is not required.

Contacts can be added by clicking the **Add New** button and completing each applicable field **OR** by clicking the **Select from Account** button to use information contained in your Public User account.

When **Add New** is selected, you must enter all required information. Click Continue when finish to return to the Contacts Information page.

When **Select from Account** is selected, you will be prompted with a list of associated contacts. Select the appropriate contact. Click Continue to complete the selection and return to the Contacts page.

Category	Type	Name
<input checked="" type="radio"/> Associated Contact	Individual	Robert D Fisher
<input type="radio"/> Associated License Contractor	Contractor	FACILITY - SYSTEM USE ONLY Contractor OB00000
<input type="radio"/> Associated Owner		00000 - NO FACILITY - SYSTEM USE ONLY

If any required data is not populated, you will be presented the data entry screen to complete the required data.

Click **Continue Application** to proceed to the next page flow screen.

Step 3. Eligibility Tool Survey Questions

Complete the survey question shown. If you have any questions, contact SCU at SeismicComplianceUnit@hcai.ca.gov.

Hospital Relief Program Eligibility Tool

1 Facility 2 Contact Information **3 Survey** 4 Security 5 Review 6

Step 3: Survey > Eligibility Survey

This section presents question that will be used to determine eligibility. If you are unsure of any information, click *Save and Resume Later*. This will save you submittal and send you an email with a TMP record number where you can resume at a later time.

You can contact Seismic Compliance Unit at SeismicComplianceUnit@hcai.ca.gov

* indicates a required field.

Custom Fields

APPLICATION

- * Does the facility has fewer than 50 general acute care beds?: Yes No
- * Is the facility currently designated as “Rural” or “Frontier” under the Medical Service Study Areas?: Yes No
- * Is the facility currently designated as a “Critical Access Hospital” by the Centers for Medicare and Medicaid Services?: Yes No
- * Does the seismic safety compliance impose a financial burden on the applicant that may result in hospital closure?: Yes No
- * Will closure of the hospital substantially impact the accessibility to health care in the surrounding communities? : Yes No
- * Do you have a seismic compliance plan on file with the Facilities Development Division? : Yes No

Continue Application >


* Do you have a seismic compliance plan on file with the Facilities Development Division? : Yes No

What is the approval date of your Seismic Compliance Plan?: *

A ‘Yes’ answer on the sixth question will prompt you for the date of approval.

Click **Continue Application** to go to the next page

If you receive an error message when clicking the Continue Application button, contact SeismicComplianceUnit@hcai.ca.gov for assistance.



An error has occurred.
Please contact Seismic Compliance Unit at SeismicComplianceUnit@hcai.ca.gov for assistance in submitting the Eligibility Survey for the Small Rural Hospital Relief Program.

Click ‘**Save and Resume Later**’ to save your application. See **Appendix A** for resuming your saved application and other tips and tricks.

Step 4. Enter Facility PIN

If you are authorized by the facility and have obtained a valid Facility PIN, enter it on the screen, then click **Continue Application** button to proceed to the next page flow screen.

If you do not have a valid Facility PIN code, click the **Save and Resume Later** button to save the record.

Hospital Relief Program Eligibility Tool

1 2 Contact Information 3 Survey 4 Security 5 Review 6 Record Issuance

Step 4: Security > PIN Validation * indicates a required field.

PIN Validation

SECURITY
Please enter your Facility's six digit PIN below. **You will not be able to complete this survey without a valid PIN.** If you do not know your Facility's PIN, click "Save pending submittal" now. This will save your record and issue a temporary project number (e.g. TMP-SRHE-0014); a confirmation email will be sent to you.

If your facility has not been issued a PIN, or you are having other access issues, please contact the eCA Access Manager at eCA.Access.Manager@oshpd.ca.gov or call (916) 440-8400.

Facility PIN Code:

[Continue Application >](#) [Save and resume later](#)

If you click the “Save and Resume Later” button, the application process stops and you will be redirected to the Record List page. eSP issues a temporary Record ID and displays the application in the Record list. You will receive an email message with instructions, if you are not the PIN holder, to send to PIN holder for completion of the application.

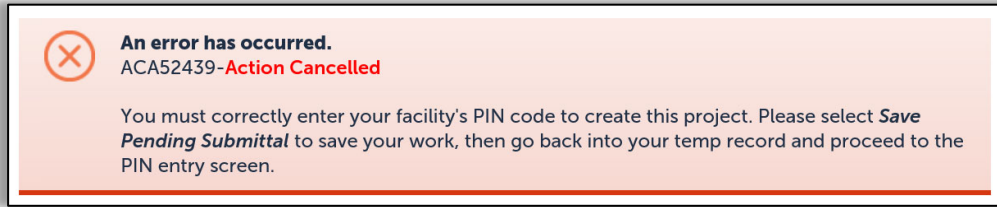
Your partial application (TMP-HRPE-0011) has been successfully saved.
To resume the application(s), go to the Records section and click the Resume Application link.

Records

Showing 1-5 of 5 | [Download results](#) | [Add to collection](#)

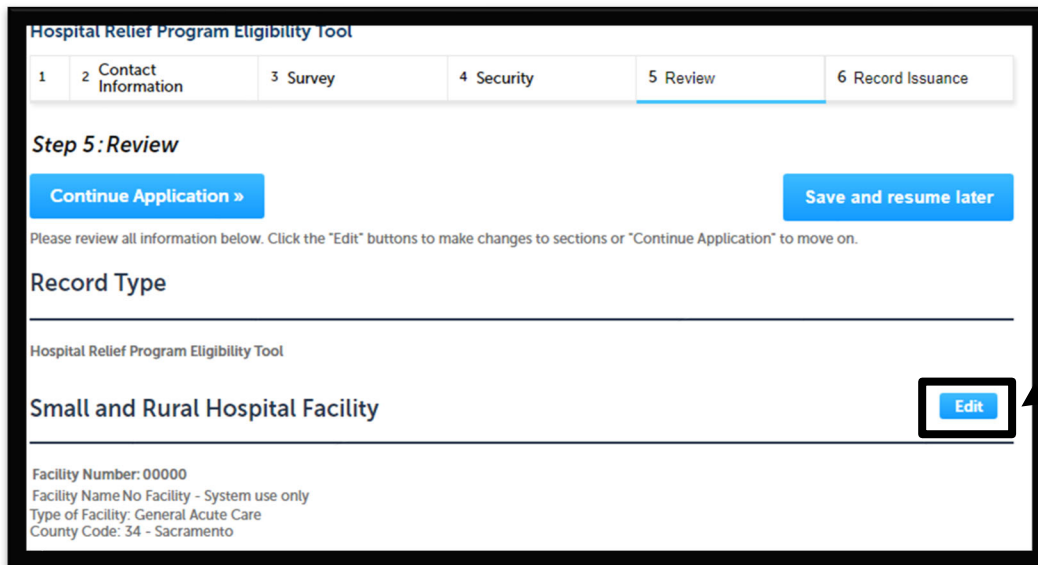
<input type="checkbox"/>	Date	Record Number	Record Type	Project Name	Description	Status	Action
<input type="checkbox"/>	05/29/2022	TMP-HRPE-0011	Hospital Relief Program Eligibility Tool				Resume Application

If you enter an invalid Facility PIN, eSP displays an error message at the review step and prevents you from completing the application. You may return to the Security page and re-enter the correct PIN; however, after 3 times entering an incorrect PIN, the application will be locked.



Step 5. Review the data entered and makes edits if needed.

On this screen, you can click the **Edit** button in each application step to make necessary changes.



If data entry is correct, click '**Continue Application**' to submit your Eligibility Tool Survey.

Step 6. Project submission confirmation.

On this final screen, eSP displays a project submission confirmation including the record number. You may print a project record summary from this screen. These documents open in a PDF format and may be saved or emailed. You can also view the detailed information about the project by clicking on **View Record Details** button.


Email confirmation is automatically sent to the Public User that started the application and to the Public User that entered the PIN if the users are different.

Congratulations! You have successfully submitted an Eligibility Tool Survey to HCAI!

Hospital Relief Program Eligibility Tool

1	2 Contact Information	3 Survey	4 Security	5 Review	6 Record Issuance
---	-----------------------	----------	------------	----------	-------------------

Step 6: Record Issuance



Your application has been successfully submitted.
Please print your record and retain a copy for your records.

Thank you for using our online services.
Your Record Number is HRPE-0007.

You will need this number to check the status of your application. Please print a copy of your record.

Your submission will be reviewed and someone will contact you with the eligibility outcome.

[View Record Details »](#) (You must post the record in the work area.)

HCAI will review your submittal and contact you with your eligibility.

Appendix A

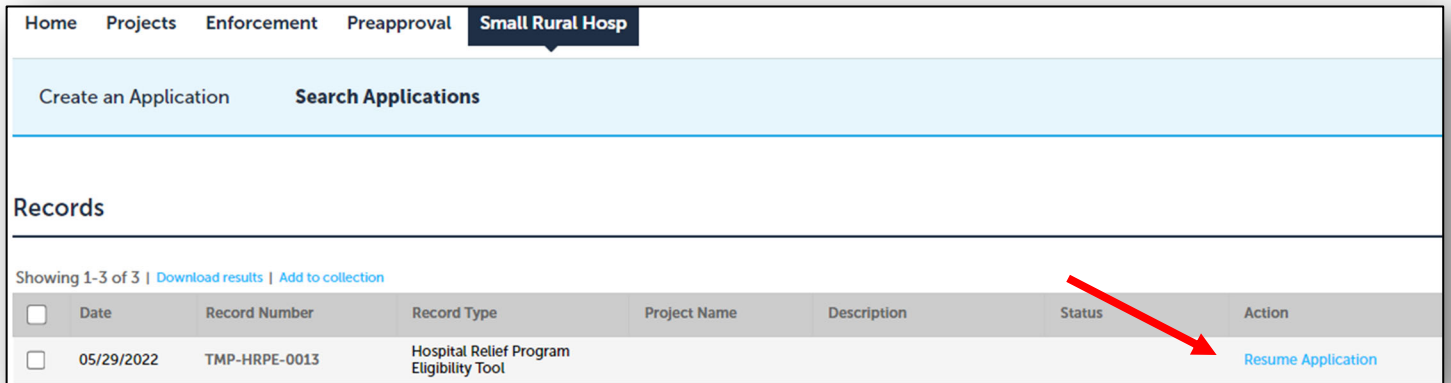
Tips and Tricks and other stuff

- When select ‘Save and Resume Later’, the system saves your application and sends you an email with the application information.

 **Your partial application (TMP-HRPE-0011) has been successfully saved.**
To resume the application(s), go to the Records section and click the Resume Application link.

- When you log into eClient Access and select Small Rural Hosp module, you will see the records waiting to be Resumed or completed applications.

Click ‘**Resume Application**’ to continue your submittal.



Home Projects Enforcement Preapproval **Small Rural Hosp**

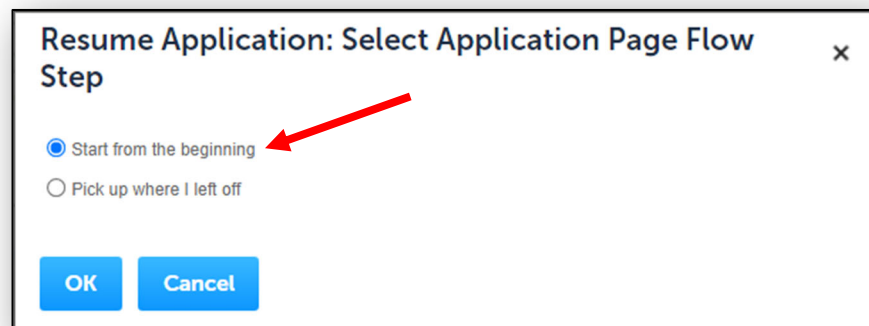
Create an Application Search Applications

Records

Showing 1-3 of 3 | [Download results](#) | [Add to collection](#)

<input type="checkbox"/>	Date	Record Number	Record Type	Project Name	Description	Status	Action
<input type="checkbox"/>	05/29/2022	TMP-HRPE-0013	Hospital Relief Program Eligibility Tool				Resume Application

- When resuming an application, it is best to ‘Start from the beginning’ when prompted.



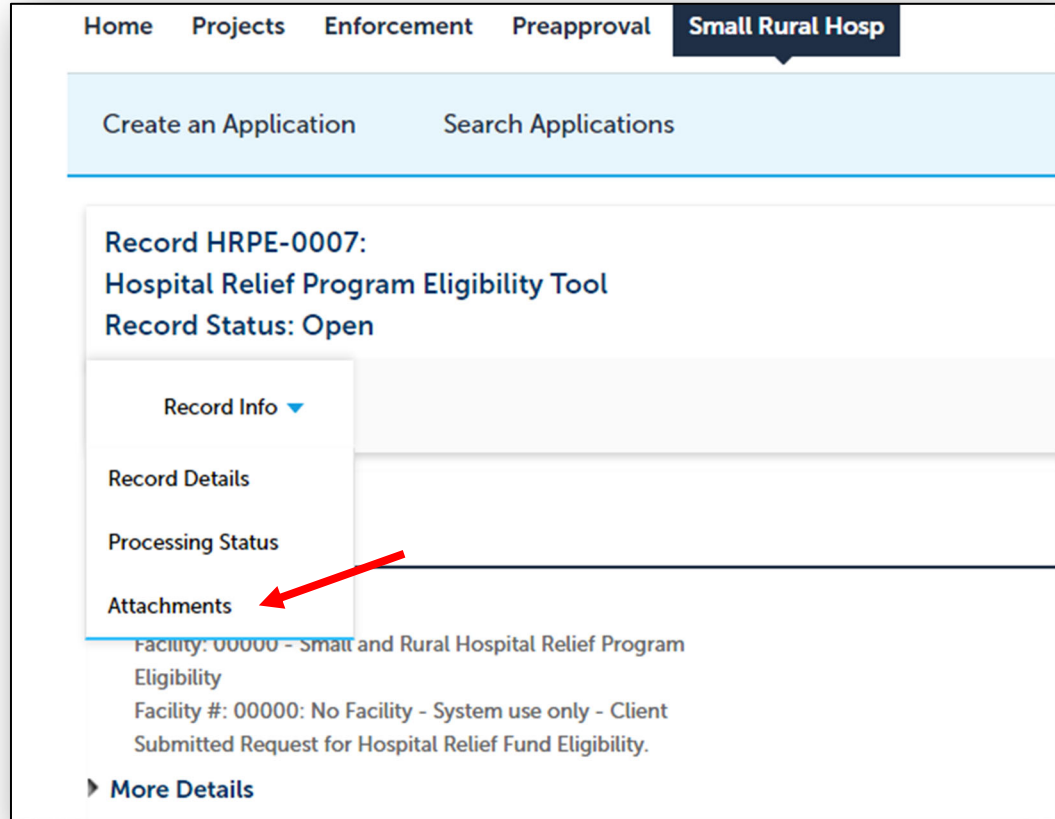
Resume Application: Select Application Page Flow Step

Start from the beginning

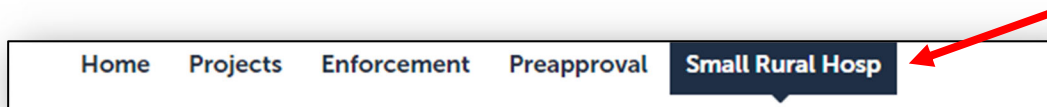
Pick up where I left off

OK Cancel

- To upload documents, select the dropdown under Record Info and select Attachments.



- Selecting the ‘Small Rural Hosp’ module link will return you to the record list.



- If you request or are requested by HCAI to edit your submission, when you enter eCA, you will see an Edit link next to your submission. Click Edit to show the Update page where you can modify your submission.

The screenshot shows the HCAI application interface. At the top, there is a navigation bar with links for Home, Projects, Enforcement, Preapproval, and Small Rural Hosp. Below this is a header area with 'Create an Application' and 'Search Applications'. The main content area is titled 'Records' and shows a table of records. The table has columns for Date, Record Number, Record Type, Project Name, Description, Status, and Action. A red arrow points to the 'Edit' link in the Action column of the first record.

<input type="checkbox"/>	Date	Record Number	Record Type	Project Name	Description	Status	Action
<input type="checkbox"/>	05/29/2022	HRPE-0008	Hospital Relief Program Eligibility Tool	Facility: 00000 - Small and Rural Hospital Relief Program Eligibility	Facility #: 00000: No Facility - System use only - Client Submitted Request for Hospital Relief Fund Eligibility.	Out to Applicant	Edit