



RESOURCE AND PATIENT MANAGEMENT SYSTEM

# **Contract Health Services Management Information System**

(ACHS)

## **Addendum to User Manual**

Version 3.1 Patch 34  
April 2026

Office of Information Technology  
Division of Information Resource Management

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## 1.0 Introduction

Please review these changes and add a copy of them to any printed documentation your site may be using for Contract Health Services Management Information System (CHS/MIS) v3.1. These changes will be integrated into future versions of the software and user manuals. These changes will no longer be considered as an addendum at the time of the next version release.

This addendum only provides written guidance on changes made in the patch that are relevant to the user. To see a list of all changes made in a patch, refer to the patch notes for each of the respective patches.

### 1.1 Summary of Changes

Patch 34 contains the following changes:

- Prevent Purchase Order Number Increments During Purchase Order Creation
- Display Railroad Policy# on VURS
- Update Electronic Signature parameter to prevent adding user twice
- Combine Electronic Signature reports
- Track Allowances updates & include reason for change
- CHS Denial Letter Update – Create a Parameter for a Minor Patient
- CHS Denial Letter Printing
- Denote Tribal Self Insurance on Purchase Order
- Move Date of Service Above the Insurance Display for Purchase Order Entry
- Enable IHS Communication Support (BCOM) Production Services

## 2.0 Patch 34 Changes

### 2.1 Prevent Purchase Order Number Increments During Purchase Order Creation

Modifications have been made so that when two users enter a purchase order at the same time, the purchase order number does not increase when purchase order is not created. Therefore, there are no gaps in purchase order numbering. This can be verified through the **Document Status Report (DSR)** (Figure 2-1) for any gaps between purchase orders.

**Note:** It is possible there may be gaps in previous Purchase Order creations. The fix will apply to POs going forward at the time of installation.

**MENU PATH: IHS CORE: IHS CORE | CHS | MGT | PR | DSR**

```

                2021 DEMO HOSPITAL (INST)
                DOCUMENT STATUS REPORT
                Feb 16, 2026@07:29:51
                OPEN AND CLOSED DOCUMENTS
                For the period Jan 01, 2021 through Jan 01, 2022
    
```

Patient Name Document number	Provider of Service EIN Number	Issue /DOS Type	Status	Amount
DEMO,PATIENTXP 1-H01-00001	PHYSICIANS PROFESSIONAL COR 1860178942 00	051321 OUTPATIENT		1,000.00
DEMO,DEJON 1-H01-00002	UNSPECIFIED 2999999999	060121 OUTPATIENT		1,000.00
DEMO,KATY 1-H01-00003	UNSPECIFIED 2999999999	062921 OUTPATIENT		55.00

Figure 2-1: Sample Document Status Report display

### 2.2 Display Railroad Policy Number on VURS

Modifications were made on the **Vendor Usage Report by Vendor (VURS)** to display the **Railroad Retirement Policy Number** (Figure 2-2).

**MENU PATH: IHS CORE | CHS | MGT | PR | VRPT | VURS**

```

                *** CONTRACT HEALTH MANAGEMENT SYSTEM ***
    DEMO,USER
                2021 DEMO HOSPITAL (INST)
                VENDOR USAGE REPORT - OPEN AND PAID DOCUMENTS
                Vendor: All Vendors
                Feb 19, 2026@10:20:47
                For the period Jan 29, 2024 through Jan 26, 2025
    
```

DOCUMENT #	PO	ISSUE DATE	PATIENT NAME	HRN	DOB	LAST-4SSN	TYP
------------	----	------------	--------------	-----	-----	-----------	-----

OC	AUTHORIZATION	FROM-TO	STAFF	DOLLARS (*=PAID)		
=====						
Vendor: 3M PHARMACEUTICALS						
25-H01-00051	09/22/2025		Demo, User	90	03/10/2001	1213 64
254C	09/22/2025-10/02/2025		TGC	50.00		
			ALTERNATE RESOURCE	<b>POLICY NUMBER</b>	ELIG ST	ELIG END
			RAILROAD RETIREMENT	A <b>2EG4TE5MK81</b>	09/02/25	
-----						
TOTALS		PAID:	0	DOLLARS:		\$0.00

Figure 2-2: Sample Vendor Usage Report by Vendors display

## 2.3 Update Electronic Signature Parameter Logic to Prevent Adding User Twice

The Electronic Signature parameter logic has been changed to not allow adding a user twice. To add a new authorized user, the prompt “Are you adding “DEMO,USER” as a new AUTHORIZED USER (the 3<sup>rd</sup> for this CHS E-SIG AUTHORITY?)” is displayed (Figure 2-3) and the user can select Yes or No. If the user already exists as an Authorized User, the menu prompts will display to update as needed (Figure 2-4). The location prompt was no longer needed and has been removed.

**MENU PATH: IHS CORE | CHS | MGT | PED| EOFF**

```
Add or Edit entries in the CHS E-Sig Authority File for 2021 DEMO HOSPITAL
(INST).
    Users must have a written Delegation of Authority to sign
    Contract Health Services Purchase Orders.
Select AUTHORIZED USER USERS NAME: DEMO,PROVIDER          PDM
    Are you adding 'DEMO,PROVIDER' as a new AUTHORIZED USER (the 17TH for
this
CHS E-SIG AUTHORITY)? No//
```

Figure 2-3: Sample Add Electronic Signature Official display

```
CONTRACT HEALTH MGMT SYSTEM
VERSION: 3.1 PATCH 34
2021 DEMO HOSPITAL (INST)
    Add or Edit Electronic Signature Officials
Add or Edit entries in the CHS E-Sig Authority File for 2021 DEMO HOSPITAL
(INST).
    Users must have a written Delegation of Authority to sign
    Contract Health Services Purchase Orders.
Select AUTHORIZED USER USERS NAME: PATIENT,DEMO          DP
    ...OK? Yes// Y (Yes)
LEVEL OF AUTHORITY: 50000//
ACTIVATION DATE: JAN 1,2020//
INACTIVATED DATE:
ORDERING OFFICIAL: YES//
AUTHORIZING OFFICIAL: YES//
DENIAL OFFICIAL: YES//
DENIAL ACTIVATION DATE: APR 23,2022//
```

Figure 2-4: Sample Edit Electronic Signature Official display

## 2.4 New Electronic Signature Report

A new **Electronic Signature Report (ESP)** has been created that combines the **Electronic Signature approved (ESAP)** by **Ordering Official** and **Pending Electronic Signature (ESPD)** of **Ordering Official** reports (Figure 2-5). The report has been moved under the **Electronic Signature Authorization Menu** which is reflected in the path below. The report offers an option of **Pending signatures** and **Signed Purchase Orders** (Figure 2-6). The Signed report requires a start and end date.

**MENU PATH: IHS CORE | CHS | EMNU | ESP**

DEMO, USER	*** CONTRACT HEALTH MANNAGEMENT SYSTEM *** 2021 DEMO HOSPITAL (INST) PENDING ELECTRONIC SIGNATURE REPORT Feb 16, 2026@09:04:0280	Page 1	
Document #	Obligation Amt	Ord Sig Date/Official	Auth Sig Date/Official
6-H01-00012	500.00		
6-H01-00013	450.00		
6-H01-00016	400.00		
6-H01-00017	400.00		
6-H01-00018	400.00		

Figure 2-5: Sample ESP Electronic Signature Report display (Pending)

DEMO, USER	*** CONTRACT HEALTH MANNAGEMENT SYSTEM *** 2021 DEMO HOSPITAL (INST) SIGNED ELECTRONIC SIGNATURE REPORT During the Period of Jan 01, 2016 through Jan 08, 2026	Page 1	
Document #	Obligation Amt	Ord Sig Date/Official	Auth Sig Date/Official
7-H01-00001	400.00	121417 Demo, User	121025 Demo, User
7-H01-00002	500.00	121417 Demo, User	121025 Demo, User
8-H01-00001	250.00	121417 Demo, User	121025 Demo, User
8-H01-00002	1,000.00	121417 Demo, User	121025 Demo, User
8-H01-00003	200.00	122017 Demo, User	121025 Demo, User

Figure 2-6: Sample ESP Electronic Signature Report display (Signed)

## 2.5 Track Allowances Updates and Allowance Reason

The **Allowance Update** (Figure 2-7) now tracks all funds entered throughout the fiscal year. All allowances are tracked by user, date of entry, additional funds and an allowance reason. When entering a new allowance, the display shows the initial allowance entered at the beginning of the fiscal year, the current year to date (YTD) allowance and the unobligated balance. There are 12 standard CHS allowance reasons. The **Funds Transfer** and **Other** allowance reasons include a required free-text field. Any additional funds are added to the **Current YTD Allowance** and **Unobligated Balance**. The user receives a prompt if they are sure they want to add the new allowance of Yes or No. If **Yes** is selected, a summary of the changes will be applied and displayed.

**MENU PATH: IHS CORE | CHS | MGT | ALU**

```

CONTRACT HEALTH MGMT SYSTEM
VERSION: 3.1 PATCH 34
2021 DEMO HOSPITAL (INST)
Facility Management

PVD Provider/Vendor Data
PR Reports ...
PAD Payment Adjustment
PED Parameter Edit ...
ALU Allowance Update
SDA Enter/Edit Tribal CHSDA
XPOR Data Export ...
EOBR Facility EOBR menu ...
CHEF C H E F Management ...
HHS Edit HHS Contract Action Type
HVP High Volume Provider Menu ...
RES Reset the error global ACHSERR
TUPD Add/Edit CAN, CC, SCC ...
TVR Test Version Switch

Select Facility Management <TEST ACCOUNT> Option: ALU Allowance Update
The Following are Valid Fiscal Years
2009
2017
2018
2019
2020
2021
2022
2023
2024
2025
2026

ENTER FISCAL YEAR: (2009-2026): 2026//

Initial YTD allowance for 2026 is: $ 20,000.00
Current YTD allowance for 2026 is: $ 50,000.00
Unobligated Balance is: $ 45,000.00

New Advice of Allowance: 10000
    
```

```

Enter the corresponding numeric value for the change in Allowance
1. 1ST QUARTER
2. 2ND QUARTER
3. 3RD QUARTER
4. 4TH QUARTER
5. RECURRING INCREASE
6. NON-RECURRING INCREASE
7. CHEF REIMBURSEMENT
8. CONTINUING RESOLUTION
9. FMCRA REIMBURSEMENT
10. FUNDS TRANSFER
11. OTHER
12. TRIBAL FUNDS
    
```

```

Enter the CHS Allowance Reason: (1-12): 10
Funds Transfer Reason Comments: FACILITY A TRANSFER
    
```

```

For Fiscal Year 2026 the new Allowance is 60,000.00
Reason for Allowance update: FUNDS TRANSFER
    
```

```

Are you sure this NEW ALLOWANCE is CORRECT? NO//YES
    
```

```

***** ALLOWANCE UPDATED *****
    
```

```

Your Initial Register Balances don't = your Advice of Allowance.
Do you want to update the Initial Register Balances? N// O
    
```

```

Updated YTD allowance for 2026 is:          $ 60,000.00
Unobligated Balance is:                   $ 55,000.00
Date Changed: JAN 30, 2026      User: DEMO,USER
Reason for change: FUNDS TRANSFER
Comment: FACILITY TRANSFER
Additional Amount:                $ 10,000.00
    
```

Figure 2-7: Sample Allowance Update display

In the **View Account Balance (VB)** option under the **Account Balances** menu (Figure 2-8), the user can view all allowances applied. This is displayed after the register balances.

**MENU PATH: IHS CORE | CHS | ACC | VB (view account balance)**

```

CONTRACT HEALTH MGMT SYSTEM
VERSION: 3.1 PATCH 34
2021 DEMO HOSPITAL (INST)
Account Balances

VB      View Account Balance
PB      Print Account Balance

Select Account Balances <TEST ACCOUNT> Option: VB View Account Balance

Date Changed: DEC 26, 2026      User: DEMO,USER
Reason for change: FUNDS TRANSFER
Comment: FACILITY TO FACILITY TRANSFER
Additional Amount:                $ 10,000.00
Updated YTD Allowance:            $ 50,000.00
    
```

Date Changed: JAN 2, 2026	User: DEMO,USER
Reason for change: OTHER	
Comment: AREA TRANSFER	
Additional Amount:	\$ 10,000.00
Updated YTD Allowance:	\$ 60,000.00

Figure 2-8: Sample Allowance Transactions (bottom of report)

## 2.6 A New Parameter for a Minor Patient for CHS Denial Letter

A new age for minor denial letter parameter has been added in the "Edit CHS Site Parameters" option (Figure 2-9). The user can enter ages fifteen to twenty-five. The default is set to age eighteen.

**MENU PATH: IHS CORE | CHS | MGT | PED | PAR**

```

CONTRACT HEALTH MGMT SYSTEM
VERSION: 3.1 PATCH 34
2021 DEMO HOSPITAL (INST)
Edit CHS Site Parameters

Edit the CHS facility options for '2021 DEMO HOSPITAL (INST)'.

1 question mark ("?") will get you help.

2 question marks ("??") usually gets you more help.

For printed help, print out chapter 1 of the Tech Manual (D ^ACHSTM).

FACILITY IS 638 TYPE: YES//
P.O. BATCH PRINT RETAIN DAYS: 180//
AREA CONTRACTING NO.: 247//
AUTHORIZING FACILITY: 2021 DEMO HOSPITAL (INST)//
UFMS EXPORT START DATE: OCT 14,2014//
LAST UFMS EXPORT: DEC 18,2024@13:32//
CCR REQUIRED:
UFMS EXPORT BUDGET FY:
ICD10 FI IMPLEMENTATION DATE: OCT 1,2015//
ICD10 STAT REC IMPLEMENTATION: OCT 1,2015//
DIRECT UFMS/FI EXPORT: YES//
NEG. UNOBLIGATED BAL. PRIOR FY: NO//
ISSUE BLANKETS FOR FI DOCS: YES//
PATIENT ADDRESS REQUIRED: NO//
AGE FOR MINOR DENIAL LETTER: 16//
MULT. FACILITY PATIENT LOOKUP: NO/
    
```

Figure 2-9: Sample CHS Site Parameters display

## 2.6.1 CHS Denial Letter for a Minor Patient

The **Add Denial** option will use the new AGE for Minor Denial Letter (Figure 2-10) to address a minor patient. The salutation of the letter reads "TO THE PARENTS OF <minor patient name>" for patients that are the age of the parameter or younger. The option "send letter to patient" during the denial creation has been removed.

PUBLIC HEALTH SERVICE ALBUQUERQUE, NM 87111	PHS Indian Health Service
-----	
Oct 24, 2025	Document number: 261-HHQ2-2
TO: THE PARENTS OF BABY GIRL DEMO 123 REDWOOD SAN DIEGO, CA 92111	
Re: Patient: BABY GIRL DEMO                      CHART: 2311 2021 DEMO HOSPITAL (INST) Contract Health Services request for services on Oct 23, 2025. Date request received: Oct 24, 2025 Provider of services: ORTHOPEDICS SPECIALISTS Amount Denied:            \$150.00 (ACT.)	
Dear BABY GIRL I DEMO,	
We have been requested to authorize payment for medical services received from the above provider(s). Please understand that after careful review of the Contract Health Service rules and regulations, we must advise you the 2021 DEMO HOSPITAL (INST) will not authorize payment for the following Press RETURN To Continue or ^ to Exit or Cancel....:	

Figure 2-10: Sample DEN print letter menu display

## 2.7 Denote Tribal Self Insurance on Purchase Order

A new **Tribal Self-Insurance (TSI)** coverage indicator has been added to the Initial Document purchase order. There are two choices, 1 for TSI with EOB required or 2 for TSI No EOB required. The user will see the indicator when the patient has the Tribal self-insurance added to their Registration Insurance page.

**Note:** A Tribal Self-Insurance must be added in Patient Registration with an insurer type of "Tribal Self Insured" shown in Figure 2-11. The insurance must also be added for the patient on the Registration insurance page shown in Figure 2-12. The indicator will transmit on the EPO in the coverage type 3C record.

**Menu Path: IHS CORE | AG | TM | INS | IINS**

```

*** INSURER FILE INQUIRY ***
=====
NAME: TRIBAL HEALTH PARTNERS          STREET: PO BOX 30570
CITY: PHOENIX                        STATE: ARIZONA
ZIP: 85046                            PHONE: (888)419-1094
CONTROL NUMBER: 1001                 FEDERAL TAX ID #: 021393849
BILLING OFFICE: TRIBAL HEALTH PARTNERS
BILLING STREET: 111 WEST SCHOOL RD
BILLING CITY: PHOENIX                BILLING STATE: ARIZONA
BILLING ZIP: 85045                   STATUS: BILLABLE
ALL INCLUSIVE BILLING (Y/N): YES
RX BILLING STATUS: OUTPATIENT DRUGS ONLY
BACKBILLING LIMIT (MONTHS): 13       INSURER TYPE: TRIBAL SELF INSURED
LONG NAME: TRIBAL HEALTH PARTNERS
    
```

Figure 2-11: Sample Registration Insurance Inquiry display

**Menu Path: IHS CORE | AG | PTRG | EPT | P4**

```

IHS REGISTRATION EDITOR      PRIVATE INSURANCE  2021 DEMO HOSPITAL (INST)
=====
DEMO,PATIENT BOB                HRN:999433 CHS & DIRECT
=====
1) Policy Holder.: DEMO,PATIENT BOB      |5) [REDACTED]: MALE
2) Policy or SSN.: 321654444             |6) Date of Birth:
7/11/1980
3) Effective Date: MAR 01, 2020          |7) PCP:
4) Expire Date...:                       |8) CD Name.....:
-HOLDER'S EMPLOYER INFO-----
9) Status.....: UNKNOWN                 |10) Employer:
INSURER INFORMATION-----
TRIBAL HEALTH PARTNERS                |11) Grp Name:
PO BOX 30570                           |   Grp Number:
PHOENIX, ARIZONA 85046                 |12) Coverage:
(888)419-1094                          |13) Copy: N
-----Policy Members-----PC-----Member #-----HRN-----Rel-----From/Thru--
14) DEMO,PATIENT BOB                  321654444      999433  SELF      3/1/2020-----
    
```

Figure 2-12: Sample Registration Insurance Page display

**MENU PATH: IHS CORE | CHS | DOC | ID**

```

CONTRACT HEALTH MGMT SYSTEM
2021 DEMO HOSPITAL (INST)
Document Generation
ID      Initial Document
SUP     Supplemental
SBO     Special Blanket Obligation
CAN     Cancel Obligation
SLO     Special Local Obligations
REFM    Enter/Edit Referral Medical Data
278     X12 Transaction 278 Processing ...
FIM     Send Approval Message to FI
Select Document Generation <TEST ACCOUNT> Option: ID Initial Document
    
```

```

Select RCIS REFERRAL by Patient or by Referral Date or #: 1-26-2026
01/26/26 2321012600003 BPRM,ENTRIBAL - TRIBAL'SELF*
      NATIVE AMERICAN CARDIOLOG 01/26/26 A - 1          CARDIAC EVAL
ENTER FISCAL YEAR: (2009-2026): 2026//

      Select one of the following:

          43      Hospital Service
          57      Dental Service
          64      Outpatient Service

Type Of Service: Outpatient Service// 64 Outpatient Service
Patient Info: BPRM,ENTRIBAL          M 04-04-1935283729382 394820

Enter Estimated Date of Service: Jan 26, 2026// (JAN 26, 2026)

      Type of Coverage          Policy #          Cov. type  EligDt  TermDt
      -----
1.  MEDICARE                    4NN2TW2VT89      A          070323
2.  TRIBAL SELF                236578          010526

TRIBAL SELF 236578
TSI Coverage: (1-2): ?
    1. TSIY - EOB required
    2. TSIN - No EOB required

Select PROVIDER/VENDOR: NATIVE AMERICAN CARDIOLOGY//
    
```

Figure 2-13: Sample Tribal Self Insurance on PO display

## 2.8 Date of Service Moved for Purchase Order Entry

The purchase order **Date of Service** has been moved to display before the insurance information (Figure 2-14). The placement will help determine which insurances are displayed based on their effective dates and the Date of Service.

**MENU PATH: IHS CORE | CHS | DOC | ID**

```

CONTRACT HEALTH MGMT SYSTEM
VERSION: 3.1 PATCH 34
2021 DEMO HOSPITAL (INST)
Document Generation

ID      Initial Document
SUP     Supplemental
SBO     Special Blanket Obligation
CAN     Cancel Obligation
SLO     Special Local Obligations
REFM    Enter/Edit Referral Medical Data
278     X12 Transaction 278 Processing ...
FIM     Send Approval Message to FI

Select Document Generation <TEST ACCOUNT> Option: ID Initial Document

Select RCIS REFERRAL by Patient or by Referral Date or #: 1-26-2026
01/26/26 2321012600002 BPRM,ENADDAG - TRIBAL*
      XRAY ASSOCIATES OF NM PC 01/26/26 A - 1          CHEST XRAY
    
```

```

ENTER FISCAL YEAR: (2009-2026): 2026//

      Select one of the following:

          43      Hospital Service
          57      Dental Service
          64      Outpatient Service

Type Of Service: Outpatient Service// 64 Outpatient Service

Patient Info: BPRM,ENADDAG           M 03-03-1945293827345 234890

Enter Estimated Date of Service: Jan 26, 2026// (JAN 26, 2026)

Type of Coverage           Policy #           Cov. type  EligDt TermDt
-----
1.  RAILROAD RETIREMENT    3WE6GH7MD77      A           102424
2.  TRIBAL SELF            873214            010526
    
```

Figure 2-14: Sample Date of Service above Insurance Display

## 2.9 Enable IHS Communication Support (BCOM) Production Services

The IHS Communication Support (BCOM) production services will be incorporated with ACHS v3.1 p34. It is replacing the ZISH SEND PARAMETERS and the automatic SendTo scripts. BCOM is a system to securely transmit files via Secure File Transfer Protocol (SFTP) to a remote system and verifies that the data has not been modified during transit.

**Note:** This will only affect Federal sites. This requires setup in the System Management Portal by the Site or Area IT manager. See the *ACHS Installation Guide* for details.

2.9.1 Federal Facility Exports to Area Office

**MENU PATH: IHS CORE | CHS | MGT | XPOR | CDPE**

**MENU PATH: IHS CORE | CHS | MGT | XPOR | RETD**

2.9.2 Federal Facility with Direct Exports to UFMS

**MENU PATH: IHS CORE | CHS | MGT | XPOR | CDPE**

**MENU PATH: IHS CORE | CHS | MGT | XPOR | RETD**

2.9.3 Area Office Export to UFMS HUB

**MENU PATH: IHS CORE | ACHS | ACON**

2.9.4 Area Office EOBR Export to Facilities

**MENU PATH: IHS CORE | ACHS | EOBR | EOBI**

## Acronym List

Acronym	Meaning
BCOM	IHS Communication Support
CEXS	CHS Export Summary
CHS	Contract Health Services
DSR	Document Status Report
EOBR	Electronic Explanation of Benefits Report
EPO	Electronic Purchase Order
ESAP	Electronic Signature Approved Report
ESP	Electronic Signature Report
ESPD	Electronic Signature Pending Report
FI	Fiscal Intermediary
MIS	Management Information System
NDW	National Data Warehouse
PO	Purchase Order
RETD	Re-Export CHS Transmission Data
RPMS	Resource and Patient Management System
SFTP	Secure File Transfer Protocol
TSI	Tribal Self Insurance
UFMS	Unified Financial Management System
VB	View Balance
VURS	Vendor Usage Report by Vendor
YTD	Year to Date

## Contact Information

If you have any questions or comments regarding this distribution, please contact the IHS IT Service Desk.

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