

Accessing Supplier Portal

- Catholic Health will provide the url for you to access the supplier portal website via the invite email.
- The Supplier Portal url can then be saved to your Favorites for quicker access in the future.

Technical Specifications

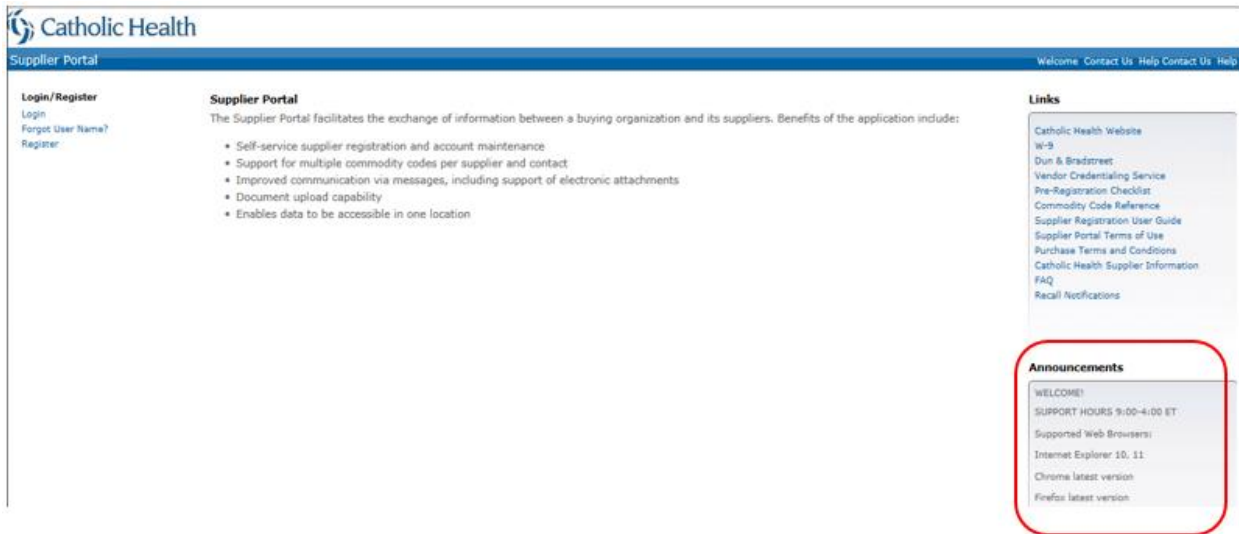
- Supported Web browsers:
 - Internet Explorer 11
 - Google Chrome latest version
 - Firefox latest version
 - Safari 5.1+
- Third-party tool bars and pop up blockers running in the browser may interfere with Supplier Portal operations.
- Monitor resolution could affect the Supplier Portal display. A resolution of at least 1024 x 768 is required to run the Supplier Portal.

Pre-Registration Notes

- Plan 20-30 minutes to complete the registration process.
 - Contact and Company Information must be entered to create your account.
 - Registration Questions can be completed later. Catholic Health does require specific information so we ask that you answer all questions and attach documents where requested.
 - Diversity and Commodity Codes can also be completed and saved separately.
- The Links section in the upper right portion of the home page includes documents and websites to provide guidance and information. Select and print the Pre-Registration Checklist. This document outlines the information and documents you will need to gather for a smooth registration process.
- Please assist in keeping our database consistent by entering information in all CAPS (except username and password which must follow the format provided in your invitation email and in section 5.1.1 and 5.1.2 below). There are some system fields that default to all CAPS.
- Fields with an asterisk* are system required but our business processes require additional information. Please enter data in all fields.
- The system will display any portal messages in the upper right portion of the screen (normally errors are in red with information and completed actions in blue).
- When navigating through the screens, utilize the *Back* button at the bottom left in the screen instead of the browser's back arrow.
- The steps below are mainly for suppliers new to doing business with Catholic Health. Existing suppliers will be provided their username and will use the update account functionality but this information is applicable.

Begin Registration

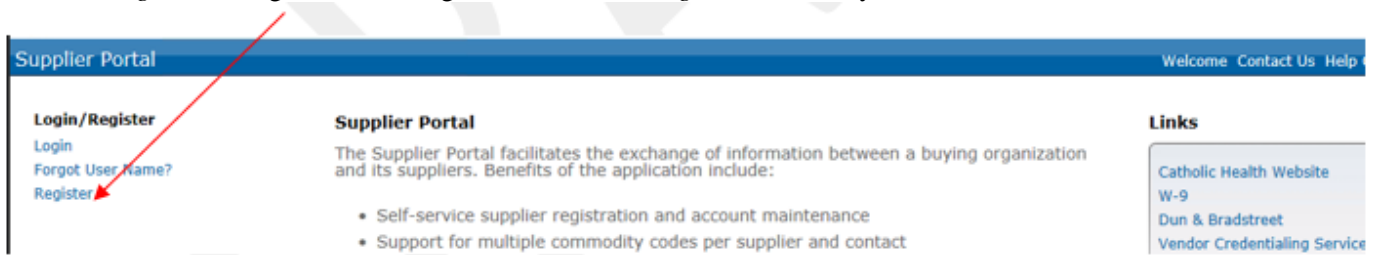
1. Review Announcements for any downtime notices or important information.



2. The right portion of the blue bar contains information for assistance.
 - 2.1. Click *Help* to open Frequently Asked Questions (FAQ).
 - 2.2. Click *Contact Us* to find the email address to request additional assistance.
(Note: The system currently shows these twice but will be corrected soon.)



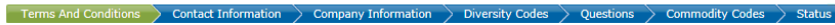
3. Click *Register* to begin. Once a registered user, the *Login* functionality will be used instead.



4. Read and accept the Supplier Registration Terms and Conditions for use of the Supplier Portal website. These are Terms of Use and not terms related to purchase. The terms must be accepted before you can proceed with registration. Check the box then click *Continue*.

Depending on the screen you are viewing, you may need to scroll down to see the Continue button.

Supplier Registration - Terms And Conditions



These are Terms of Use related to utilizing the Supplier Portal software. The Terms must be accepted in order to proceed with registration.

These Terms and Conditions relate to your use, as a Vendor or Supplier of the Catholic Health System, INC (CHS), of the Supplier Portal software and associated websites. These Terms must be accepted in order to proceed with registration.

The individual who registers your Supplier account becomes the primary contact and administrator for your account in all matters relevant to the management of your Supplier/Vendor account with CHS. This primary contact should be your primary Accounts Receivable representative (Representative). The individual registering must be authorized to provide corporate information and accept Terms and Conditions on behalf of their company. These Terms apply to all subsequent and future contacts added to this account.

The Representative agrees to provide accurate and complete information and will be responsible for the completeness and accuracy of all Vendor information on the Supplier Portal. The supplier agrees to regularly maintain and promptly update all information as necessary to ensure it remains accurate, including but not limited to monthly invoice statements. The supplier is responsible for all Supplier Portal activities that occur under the Supplier's account. Catholic Health grants the Supplier only a limited, non-exclusive, non-transferable, revocable license to use this website only for Catholic Health's intended purpose. Any information obtained from this website should be considered confidential and shall not be shared with unauthorized entities. Catholic Health will not be held responsible for effects of any software limitations or defects related to this website or any linked services.

Registration is by Catholic Health invitation only. If you have reached this website without prior communications with Catholic Health, please click the Contact Us link and request approval to register. Invitation to and registration on this site does not guarantee your organization will be approved as a supplier to do business with Catholic Health. All activities on this Supplier Portal and these Terms of Service will be governed by New York State law without respect to conflict of laws provisions.

* Accept Terms and Conditions

[Continue](#) [Cancel](#)

5. Enter your Contact Information (primary contact). The primary contact becomes the administrator for your company's account. This primary contact should be your main Accounts Receivable representative. This person will be able view all company invoices and payments. They will also add additional company contacts.

Progress Bar only indicates your place in registration steps; cannot move directly to another step.

Supplier Registration - Contact Information



Enter the primary Accounts Receivable contact information for your business (becomes administrator of your company account). Username should begin with alpha and have no special chrs. Password must be 8-20 chrs include upper, lower case and number.

Become A Supplier - Create An Account

* User Name
 * Password
 * Confirm Password

Enter Information About Yourself

Title
 * First Name
 * Last Name
 * Phone Number Ext: (international prefix, phone number, extension)
 Mobile Phone Ext: (international prefix, phone number, extension)
 Fax Number Ext: (international prefix, fax number, extension)
 * Email Address You will be set to receive email notifications; use update account information to change flag

- 5.1. Create your login username and password. Your username and password are case sensitive. Please note the following rules:

- 5.1.1. **Username:** If the Catholic Health invitation did not provide a username, please use the following format to create a username.
- 5.1.1.1. First initial of first name, full last name, and **must end with sp** (jsmithsp).
If you receive an error message that the username already exists add a number before the sp (jsmith1sp, tjones2sp).
 - 5.1.1.2. Do not use special characters (e.g. @ % ? # !) in your username.
Please note Catholic Health will not be able to process the Supplier Portal registration if the username does not follow the proper format.

- 5.1.2. **Password:** Must be at least 8 but no more than 20 characters in length and contain the following requirements:

- 5.1.2.1. Upper case alpha character (e.g., A, B, C)
- 5.1.2.2. Lower case alpha character (e.g., a, b, c)
- 5.1.2.3. Number (e.g., 1, 2, 3)
- 5.1.2.4. Maximum character repeat is 2
Passwords will expire every 90 days.

- 5.2. If you forget your username or password before your next login, you can retrieve using the *Forgot User Name* link on the home page or the *Forgot Your Password* link on the login page. The password reset functionality is not engaged until your first login when you will be asked to answer security questions.

- 5.3. The first field of the phone and fax number is for International Country Code. United States phone numbers can leave this field blank and enter area code and phone number in second field (format 123-456-7890). Click *Continue*.

6. Enter information about your Company then click *Continue*. Fields with an asterisk* are system required but our business processes require additional information. Please enter data in all fields. Remit to address is required. A box is available to check if Remit To is same as mailing address.

- | | |
|----------------------|--------------------------------|
| - Legal Company Name | - Doing Business As |
| - Dun and Bradstreet | - Business Type |
| - Tax Id Type | - Tax Id |
| - Website | - Remit To First and Last Name |
| - Mailing Address | - Remit To Address |

Supplier Registration - Company Information

Terms And Conditions
Contact Information
Company Information
Diversity Codes
Questions
Commodity Codes
Status

Enter your company information. Please enter your Legal Company Name as shown on W-9.

Company Information

* Company Name <input type="text"/>	Doing Business As <input type="text"/>
Dun And Bradstreet <input type="text"/>	Business Type <input type="text"/>
* Tax Id Type <input type="text"/>	
* Tax Id <input type="text"/> <small>Include '-' Characters. Example: 12- 3456789</small>	
Global Location Number <input type="text"/>	Website <input type="text"/>

Address Information

Mailing address

* * Address Line 1

Address Line 2

Address Line 3

Address Line 4

* * City

* * State Province

* * Postal Code

County

* * Country

Remit to name and address

Remit To First Name

Remit To Last Name

Check If Remit To Address Is The Same As Mailing Address

Address Line 1

Address Line 2

Address Line 3

Address Line 4

City

State Province

Postal Code

County

Country

7. You will receive a system generated email notification after contact information and company information screens are completed. This confirms that your account was set up but all steps must be finished for your registration to be considered complete. Information is saved when you click the *Complete* button in the lower right portion of each screen and move to the next page. If you are unable to complete full registration at one time, you must click cancel to exit the registration process and then click the logout button.
 - 7.1. Contact and Company Information must be completed at a minimum to set up your account.
 - 7.2. The system will not give you an error if you do not answer Registration Questions but please note that Catholic Health does require specific information so we ask that you answer all questions. It will save our staff the time that would be required to follow up with you for missing information and/or documents.
 - 7.3. Instructions on how to update your account information is provided near the end of this document.
 - 7.4. Registrants with incomplete profiles cannot be validated and will not have the opportunity to view invoices and payments.

8. Select *Add* for a list of Diversity Codes.

Supplier Registration - Diversity Codes

Terms And Conditions
Contact Information
Company Information
Diversity Codes
Questions
Commodity Codes
Status

Click Add to select all Diversity Codes which apply to your organization. CHS requires a certificate of approval, with expiration dates, for all diversity codes chosen. You will attach these in the Questions section.

Selected Diversity Codes

Diversity Code	Description
<div style="border: 1px solid #0070C0; border-radius: 50%; width: 20px; height: 20px; display: inline-block; margin-bottom: 5px;"></div> <input type="button" value="Add"/>	

8.1. Check the appropriate box(es) to select diversity code(s) then click *Attach to Supplier*.

Active Diversity Codes

Search
 Diversity Code Description

<input checked="" type="checkbox"/>	Diversity Code	Description
<input type="checkbox"/>	MBE	MINORITY BUSINESS ENTERPRISE
<input checked="" type="checkbox"/>	SBE	SMALL BUSINESS ENTERPRISE
<input checked="" type="checkbox"/>	VBE	VETERAN BUSINESS ENTERPRISE
<input type="checkbox"/>	WBE	WOMEN BUSINESS ENTERPRISE

8.2. Note message in upper right of screen is in blue to reflect completed action.

Supplier Registration - Diversity Codes

The following action 'Attach To Supplier' completed

Terms And Conditions >
 Contact Information >
 Company Information >
 Diversity Codes >
 Questions >
 Commodity Codes >
 Status

Click **Add** to select all Diversity Codes which apply to your organization. CHS requires a certificate of approval, with expiration dates, for all diversity codes chosen. You will attach these in the Questions section.

Selected Diversity Codes

<input checked="" type="checkbox"/>	Diversity Code	Description
<input type="checkbox"/>	SBE	SMALL BUSINESS ENTERPRISE
<input type="checkbox"/>	VBE	VETERAN BUSINESS ENTERPRISE

8.3. Click *Continue*

9. Answer all applicable Registration Questions and attach requested documents.

9.1. You may enter NA in the text box if it does not apply to you.

Supplier Registration - Questions

Terms And Conditions >
 Contact Information >
 Company Information >
 Diversity Codes >
 Questions >
 Commodity Codes >
 Status

Answer the following questions related to your company. An * indicates a required field. NOTE: The system requires all questions to be answered before you can Continue. Plan 15 mins to answer questions so your input is saved.

- An IRS form W-9 is required certifying your Taxpayer ID Number. Please answer Yes and attach W-9 here.**
Both response and attachment are required
 *Answer
 *Attach document
- Please select appropriate business classification.**
Response is required
 *Answer
- If you selected Other as the organization's business classification, please explain.**
 Answer

9.2. Scroll down to click *Continue*.

10. Click *Add* for the list of Commodity Codes.

Supplier Registration - Commodity Codes

Terms And Conditions >
 Contact Information >
 Company Information >
 Diversity Codes >
 Questions >
 Commodity Codes >
 Status

Select all commodity codes for products and/or services your company would like to provide to Catholic Health. Please remember to update commodity codes as your portfolio changes.

Selected Commodity Codes

Add

<input checked="" type="checkbox"/>	Commodity Code	Description
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- 10.1. The top level codes with their descriptions are displayed
- 10.2. There are two levels of commodity codes. Click on the plus sign next to the code to display any specific commodities within that group. You can register for the top level which will include all commodities within that grouping or you can select one or more specific commodities at the lower level.

Available Commodity Codes

Search

Commodity Search

Search
Reset
Save Search

Attach To Contact
Cancel
Options...

<input checked="" type="checkbox"/>		Commodity Code	Description
<input checked="" type="checkbox"/>	<input type="checkbox"/>	42	MEDICAL EQUIPMENT AND ACCESSORIES AND SUPPLIES
<input type="checkbox"/>	<input type="checkbox"/>	43	INFORMATION TECHNOLOGY BROADCASTING AND TELECOMMUNICATIONS
<input type="checkbox"/>	<input type="checkbox"/>	44	OFFICE EQUIPMENT AND ACCESSORIES AND SUPPLIES
<input type="checkbox"/>	<input type="checkbox"/>	44-10	OFFICE MACHINES AND THEIR SUPPLIES AND ACCESSORIES
<input checked="" type="checkbox"/>	<input type="checkbox"/>	44-11	OFFICE AND DESK ACCESSORIES
<input type="checkbox"/>	<input type="checkbox"/>	44-12	OFFICE SUPPLIES
<input type="checkbox"/>	<input type="checkbox"/>	45	PRINTING, PHOTOGRAPHIC, AUDIO, VISUAL EQUIPMENT, SUPPLIES
<input type="checkbox"/>	<input type="checkbox"/>	46	DEFENSE,LAW ENFORCEMENT,SECURITY,SAFETY EQUIPMENT,SUPPLIES
<input checked="" type="checkbox"/>	<input type="checkbox"/>	47	CLEANING EQUIPMENT AND SUPPLIES
<input type="checkbox"/>	<input type="checkbox"/>	48	SERVICE INDUSTRY MACHINERY AND EQUIPMENT AND SUPPLIES
<input type="checkbox"/>	<input type="checkbox"/>	49	SPORTS, RECREATIONAL EQUIPMENT AND SUPPLIES AND ACCESSORIES
<input type="checkbox"/>	<input type="checkbox"/>	50	FOOD,BEVERAGE AND TOBACCO PRODUCTS

- 10.3. Select all commodity codes for the products and/or services that your company can provide by checking the respective box(es) and then click *Attach to Contact*. The Attach button must be used before proceeding to the next page or your selections on the previous page will not be saved.

Supplier Registration - Commodity Codes

The following action 'Attach To Contact' completed

Terms And Conditions >
 Contact Information >
 Company Information >
 Diversity Codes >
 Questions >
 Commodity Codes >
 Status

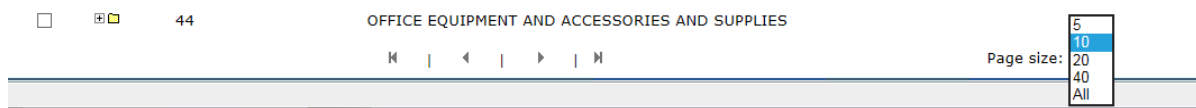
Select all commodity codes for products and/or services your company would like to provide to Catholic Health. Please remember to update commodity codes as your portfolio changes.

Selected Commodity Codes

Actions
Delete
Add

<input checked="" type="checkbox"/>		Commodity Code	Description
<input type="checkbox"/>	<input type="checkbox"/>	14	PAPER MATERIALS AND PRODUCTS
<input type="checkbox"/>	<input type="checkbox"/>	41	LABORATORY,MEASURING,OBSERVING AND TESTING EQUIPMENT
<input type="checkbox"/>	<input type="checkbox"/>	42-13	MEDICAL APPAREL AND TEXTILES
<input type="checkbox"/>	<input type="checkbox"/>	42-14	PATIENT CARE AND TREATMENT PRODUCTS AND SUPPLIES

TIP: You can change Page Size to “All” then you will be able to use the side scroll bar to view all without having to navigate between multiple pages. This allows you to scroll and select commodity codes then click *Attach To Contact* one time.



- 10.4. You can also use the Search field. Using an asterisk* as a wild-card, type a partial description and select **Search** to return entries containing the selection. Check box(es) then *Attach to Contact*.
 Note: Commodity Code must contain search term to return results; list may not be comprehensive.

Available Commodity Codes

Search

Commodity Search

	Commodity Code	Description
<input checked="" type="checkbox"/>	42	MEDICAL EQUIPMENT AND ACCESSORIES AND SUPPLIES
<input type="checkbox"/>	42-13	MEDICAL APPAREL AND TEXTILES
<input type="checkbox"/>	42-17	EMERGENCY AND FIELD MEDICAL SERVICES PRODUCTS
<input type="checkbox"/>	42-19	MEDICAL FACILITY PRODUCTS
<input type="checkbox"/>	42-20	MEDICAL DIAGNOSTIC IMAGING AND NUCLEAR MEDICINE PRODUCTS
<input type="checkbox"/>	42-24	ORTHOPEDIC AND PROSTHETIC AND SPORTS MEDICINE PRODUCTS
<input checked="" type="checkbox"/>	42-28	MEDICAL STERILIZATION PRODUCTS
<input type="checkbox"/>	42-30	MEDICAL TRAINING AND EDUCATION SUPPLIES
<input type="checkbox"/>	45-13	PHOTOGRAPHIC AND RECORDING MEDIA
<input type="checkbox"/>	55-10	PRINTED MEDIA
<input type="checkbox"/>	83-11	TELECOMMUNICATIONS MEDIA SERVICES

- 10.5. When complete click *Continue*.

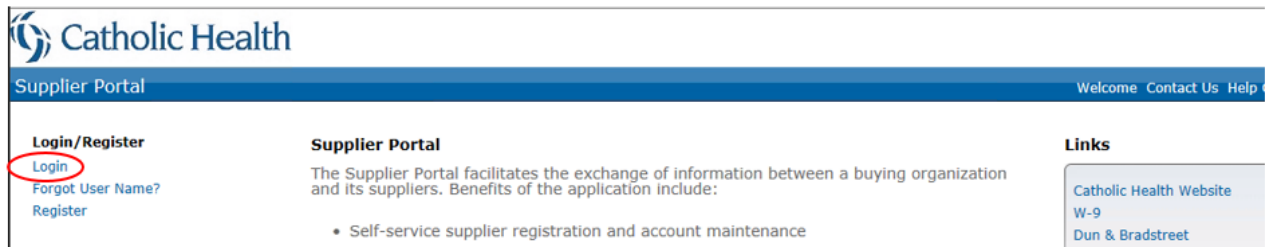
11. Registration is now finished. Verify the Registration Status = Complete.
Click *Done*.

Supplier Registration - Status**Status****Registration status: Complete***Congratulations! Your account has been set up. Please logout and login immediately to establish password security.*

Supplier Number Is: 63

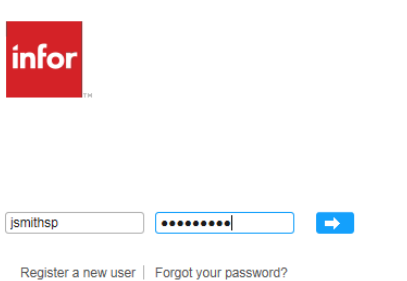
[Back](#)[Done](#)**Updating Information**

1. Once your account is setup, you are able to login and update information. Click login from the home page.



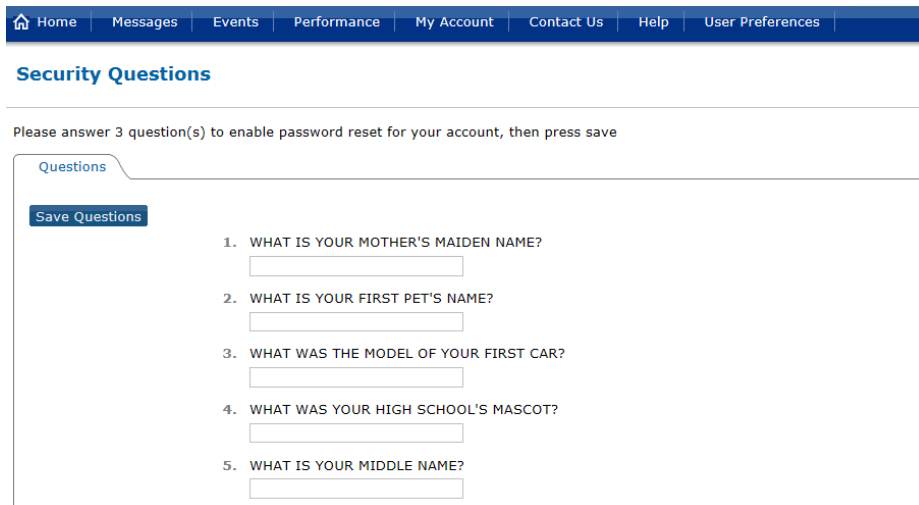
The screenshot shows the Catholic Health Supplier Portal interface. At the top left is the Catholic Health logo. Below it, the text 'Supplier Portal' is displayed. On the right side of the top navigation bar, there are links for 'Welcome', 'Contact Us', and 'Help'. The main content area is divided into three sections: 'Login/Register', 'Supplier Portal', and 'Links'. In the 'Login/Register' section, the 'Login' link is circled in red. Below it are links for 'Forgot User Name?' and 'Register'. The 'Supplier Portal' section contains a description of the portal's purpose and a bullet point: 'Self-service supplier registration and account maintenance'. The 'Links' section contains links for 'Catholic Health Website W-9' and 'Dun & Bradstreet'.

2. Enter username and password. Click the arrow or Enter key.



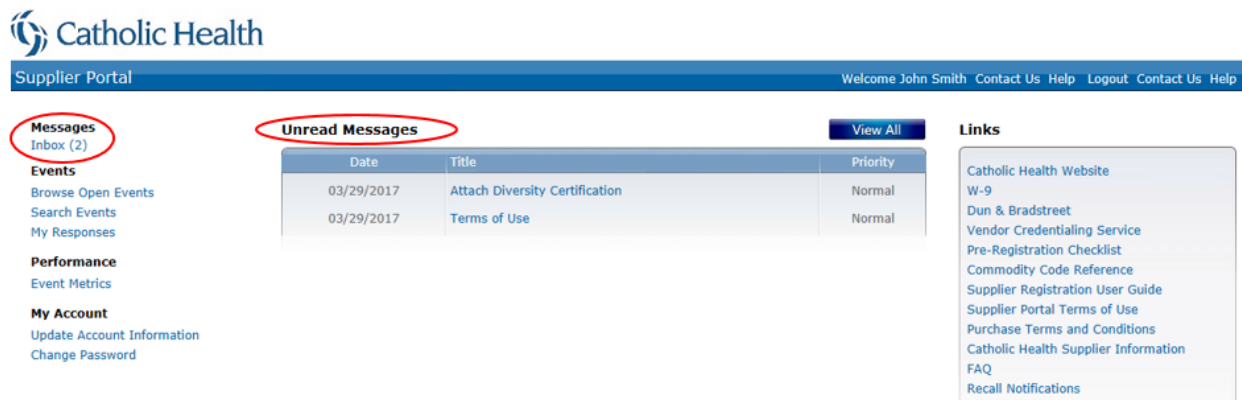
The screenshot shows the Infor login page. At the top left is the Infor logo. Below it, there are two input fields: a username field containing 'jsmithsp' and a password field with masked characters. To the right of the password field is a blue arrow button. Below the input fields, there are links for 'Register a new user' and 'Forgot your password?'.

3. The first time you login, you will be prompted to answer three of the five security questions. This enables the password reset functionality allowing you to click a link to reset your password without needing to call anyone.



- 3.1. Click *Save Questions* and you will be returned to the home page.

4. Messages we send will appear on the home page.
 - 4.1. Click the *Inbox* link and another screen will open where you can manage your messages similar to an email inbox by marking them as Read, Deleted, or Unread.



Date	Title	Priority
03/29/2017	Attach Diversity Certification	Normal
03/29/2017	Terms of Use	Normal

5. Click on *Update Account Information* to change any of the information you previously entered.



The screenshot shows the Catholic Health Supplier Portal interface. On the left sidebar, under the 'My Account' section, the link 'Update Account Information' is circled in red. The main content area includes a 'Messages' section with an 'Unread Messages' table, a 'View All' button, and a 'Links' section with various utility links.

Date	Title	Priority
03/29/2017	Attach Diversity Certification	Normal
03/29/2017	Terms of Use	Normal

5.1. The following sections have an Edit button which will open the screens for editing.

- Supplier Information (Company information)
- My Contact Information
- Questions
- Diversity Codes
- My Commodity Codes
- Additional Contacts

Account Information

- Collapse All [View as pdf](#)

Supplier: JWS Enterprises

Registration Status
Registration status: Complete
 Congratulations! Your account has been set up. Please logout and login immediately to establish password security.
Please note: you have not selected any commodity codes and will not be notified of future opportunities

Supplier Information
[Edit](#)

General Information
 Supplier Number: 103
 Tax ID Type: Federal Tax Id
 Tax ID: 12-3456789

Address Information
 Address: 284 Main Street

5.2. Update the information as needed then click the *Back* button to return to the main Account Information page.

5.3. When finished with updates, click *Home* or *Logout*.

Viewing Invoices and Payments

1. When all registration requirements have been met and approved, Catholic Health will “validate” your account. This status authorizes your Primary Contact to be assigned security to view Invoices and Payments.
 - 1.1. Should you choose to have other contacts in your company view Invoices and Payments, please click *Contact Us* to submit the request.
2. New menu options will appear on your home page.



Supplier Portal Welcome John Smith [Contact Us](#) [Help](#) [Logout](#) [Contact Us](#) [Help](#)

Messages
Inbox (2)

Events
[Browse Open Events](#)
[Search Events](#)
[My Responses](#)

Order Management (circled in red)
[Invoices](#)
[Payments](#)

Performance
[Event Metrics](#)

My Account
[Update Account Information](#)
[Change Password](#)

Unread Messages [View All](#)

Date	Title	Priority
03/29/2017	Attach Diversity Certification	Normal
03/29/2017	Terms of Use	Normal

Open Invoices [View All](#)

Invoice	PO Number	Invoice Date	Due Date	Amount

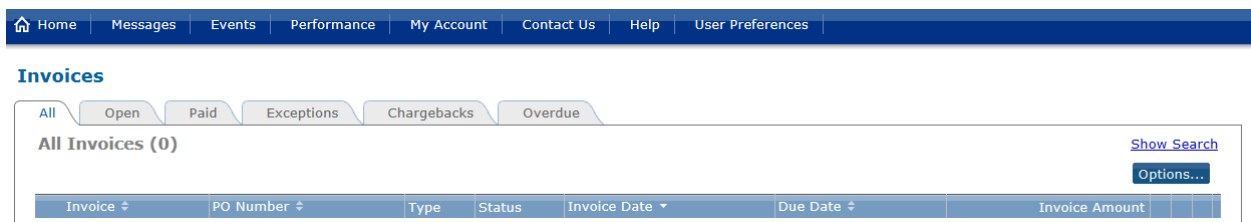
Exception Invoices [View All](#)

Invoice	PO Number	Invoice Date	Due Date	Amount

Links

- [Catholic Health Website](#)
- [W-9](#)
- [Dun & Bradstreet](#)
- [Vendor Credentialing Service](#)
- [Pre-Registration Checklist](#)
- [Commodity Code Reference](#)
- [Supplier Registration User Guide](#)
- [Supplier Portal Terms of Use](#)
- [Purchase Terms and Conditions](#)
- [Catholic Health Supplier Information](#)
- [FAQ](#)
- [Recall Notifications](#)

- 2.1. Click the link to view Invoices or Payments
- 2.2. The examples below do not have data to display but you will see additional buttons on each screen to drill around into Details.



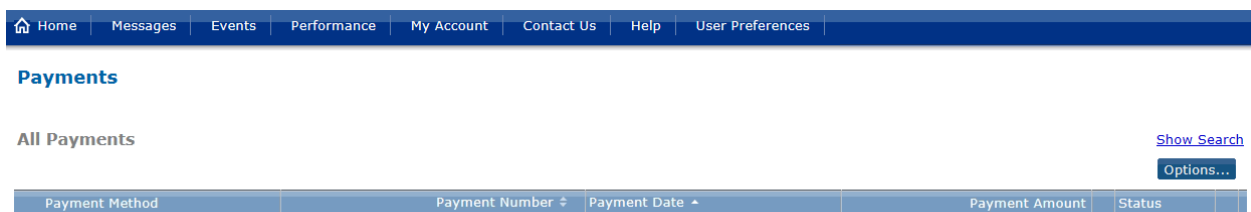
[Home](#) [Messages](#) [Events](#) [Performance](#) [My Account](#) [Contact Us](#) [Help](#) [User Preferences](#)

Invoices

All Open Paid Exceptions Chargebacks Overdue

All Invoices (0) [Show Search](#) [Options...](#)

Invoice	PO Number	Type	Status	Invoice Date	Due Date	Invoice Amount



[Home](#) [Messages](#) [Events](#) [Performance](#) [My Account](#) [Contact Us](#) [Help](#) [User Preferences](#)

Payments

All Payments [Show Search](#) [Options...](#)

Payment Method	Payment Number	Payment Date	Payment Amount	Status

Welcome aboard!! Please do not hesitate to click the *Contact Us* link to ask for assistance if needed.