



*"Good Beginnings Last a Lifetime"*  
**Kansas Provider Access Portal**  
Childcare Licensing And Regulation Information System (CLARIS)



**\*\* BEFORE\*\* you create your Provider Account**

If you are a:

- **Person-Owned facility (not an LLC, Inc., etc.)** - you will need your **KDHE Person ID number**.  
Child Care Licensing mailed letters prior to December 3, 2018 to all person-owned facilities that listed the owner's person ID number.
  - **Organization Owned facility (Your facility is owned by an LLC, LLP, Corporation, or Government entity/agency or School District)** - you will need the **KDHE Organization ID number**.
- \*\* The authorized representative of the Organization is required to call to obtain the ID number. \*\***

If you **do not** have your **KDHE Person ID number** or **Organization ID number**, please **STOP** and call Child Care Licensing at 785-296-1270 **PRIOR** to creating your account.  
This will allow us to process your user account request timely.

## Create a Provider Account

### Hello and Welcome!!

The Provider Access Portal Homepage will allow you to create a provider account under the Registration section. Please be aware that when you are creating an account, you will be required to provide certain information. Click [Create Provider Account] to start.

**"Good Beginnings Last a Lifetime"**

## Kansas Provider Access Portal

Childcare Licensing And Regulation Information System (CLARIS)

Welcome to the Kansas Provider Access Portal. The purpose of this website is to offer Child Care Providers, Early Education Professionals, and Kansas Families a one-stop location to review information, submit online applications directly to

**Kansas Department of Health & Environment**  
and  
**Kansas Department for Children & Families,**  
and conveniently exchange information with both agencies.

*If you cannot read and understand English, please have this information read to you or translated before you sign it.  
(Si no puede leer ni entender inglés, por favor tenga esta información leída o traducida antes de firmarla y enviarla.)*

Registration	Links	Resources
<a href="#">Create Provider Account</a> <a href="#">Log In</a> <a href="#">Log In Help</a>	<a href="#">Kansas Department of Health &amp; Environment - Child Care Licensing</a> <a href="#">Department for Children &amp; Families</a> <a href="#">Tutorial Videos</a> <a href="#">Instruction Sheets</a>	<b>*** DOES NOT REQUIRE REGISTRATION ***</b> <a href="#">Search for Child Care in Kansas</a> Use this link to route to the Kansas Resource and referral website. <a href="#">Review Child Care Facility Compliance Information</a> Use this link to view compliance information and licensing history for a child care facility.

**Internet Requirements**

*Provider Access Portal for the CLARIS System will allow you to complete your online application successfully. For best internet security, it is recommended to KEEP the most current browser version available.*

All fields that are required will be marked with an asterisk (see example below). These fields must be filled out to move to the next step. If you try to move forward without filling out the required fields, an error ribbon will appear at the top of the page and the missing section will be indicated in red.

### Create CLARIS User Profile

**Good Beginnings Last a Lifetime**

Please enter the following:

I am creating a Child Care Account for :

Person Owner  
 Organization Owner (Your facility is owned by a corporation, LLC, LLP, government entity/agency or school district)

Do you have a KDHE Person ID ?  Yes  No

Person ID :  \*

When all information has been entered and you are ready to submit, you will enter the captcha (see example below). By entering the captcha you are letting us know that you are not a robot. You will need to make sure that you have entered it correctly; if you do not you will receive this notice:



You will then be required to input a new captcha.

**Create CLARIS User Profile**

## Good Beginnings Last a Lifetime

Please enter the following:

I am creating a Child Care Account for :  Person Owner  
 Organization Owner (Your facility is owned by a corporation, LLC, LLP, government entity/agency or school district)

Do you have a KDHE Person ID ?  Yes  
 No

Person ID :  \*

Date of Birth :  \*MMDDYYYY

Email Address :  \*


Business Phone Number :    Ext:  \*  
*Use numbers only. Special characters are not allowed.*



License Number:  
If you have a license number, enter the first 7 digits including the leading zeros. **DO NOT** enter the hyphen and 3 numbers.  

0000121

~~001~~

Captcha:  

  
Retype the characters from the picture:

Keep in mind that if you cannot read the captcha, there is a speaker button next to the captcha you can select for the computer to say the captcha out loud or a button to request a new captcha.

Person Owner

Create CLARIS User Profile	
<b><i>Good Beginnings Last a Lifetime</i></b>	
Please enter the following:	
I am creating a Child Care Account for :	<input checked="" type="radio"/> Person Owner <input type="radio"/> Organization Owner (Your facility is owned by a corporation, LLC, LLP, government entity/agency or school district)
Do you have a KDHE Person ID ?	<input checked="" type="radio"/> Yes <input type="radio"/> No
If you do not have your Person ID, please contact KDHE at 785-296-1270, prior to creating an account.	
Person ID :	<input type="text" value="0"/> *
Date of Birth :	<input type="text"/> *MMDDYYYY*
Email Address :	<input type="text"/> *
Primary Phone :	<input type="text"/> <input type="text"/> <input type="text"/> Ext: <input type="text"/> * <i>Use numbers only. Special characters are not allowed.</i>

Organization Owner

Create CLARIS User Profile	
<b><i>Good Beginnings Last a Lifetime</i></b>	
Please enter the following:	
I am creating a Child Care Account for :	<input type="radio"/> Person Owner <input checked="" type="radio"/> Organization Owner (Your facility is owned by a corporation, LLC, LLP, government entity/agency or school district)
Do you have a KDHE Organization ID ?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Organization Id :	<input type="text" value="0"/> *
Do you have a KDHE Person ID ?	<input checked="" type="radio"/> Yes <input type="radio"/> No
If you do not have your Organization ID and/or Person ID, please contact KDHE at 785-296-1270, prior to creating an account.	
Person ID :	<input type="text" value="0"/> *
Date of Birth :	<input type="text"/> *MMDDYYYY*
Email Address :	<input type="text"/> *
Primary Phone :	<input type="text"/> <input type="text"/> <input type="text"/> Ext: <input type="text"/> * <i>Use numbers only. Special characters are not allowed.</i>

You must read, agree with, and sign the security agreement. The security agreement must be completed to receive the email that contains your assigned username and temporary password. You must have a username and password to login to the Provider Access Portal.

**By Agreeing to this CLARIS User Security and Confidentiality Agreement, I agree to:**

- Comply with the provisions of K.S.A. 65-525 concerning the use and dissemination of confidential information contained in CLARIS.
- Use CLARIS to access information and generate documentation only as necessary to properly conduct the official business of my employer. Permission is given to print copies of licenses, temporary permits and CLARIS screens as necessary for agency file documentation.
- Comply with Kansas Department of Health and Environment (KDHE) policies and procedures concerning entry of data into CLARIS.
- Carefully and deliberately safeguard my user ID and password which provides access to CLARIS and not permit the use of my use ID and password by any other person, unless expressly authorized by the KDHE Child Care Licensing (CCL) CLARIS Security Manager.
- Promptly, but no later than the close of business, report to the KDHE CCL CLARIS Security Manager any threat to CLARIS or a violation of the CLARIS User Security and Confidentiality Agreement.
- Allow the KDHE CCL staff or assigned agents to audit my CLARIS transactions and agency records to ensure compliance with the CLARIS User Security and Confidentiality Agreement.
- Not furnish identifiable information or documentation obtained from CLARIS to individuals, including individuals who may be the subject of the information, for personal use or to any individuals who do not have duties relating to the administration, recoding and management of child care data.
- Not attempt to copy the CLARIS database or software without specific written consent from the KDHE CCL CLARIS Security Manager.
- Not attempt to link nor permit others to attempt to link the information contained in CLARIS with personally identifiable records from any other source.
- Compliant with applicable state and federal law regarding the use and dissemination of child care facility data and information contained in CLARIS.

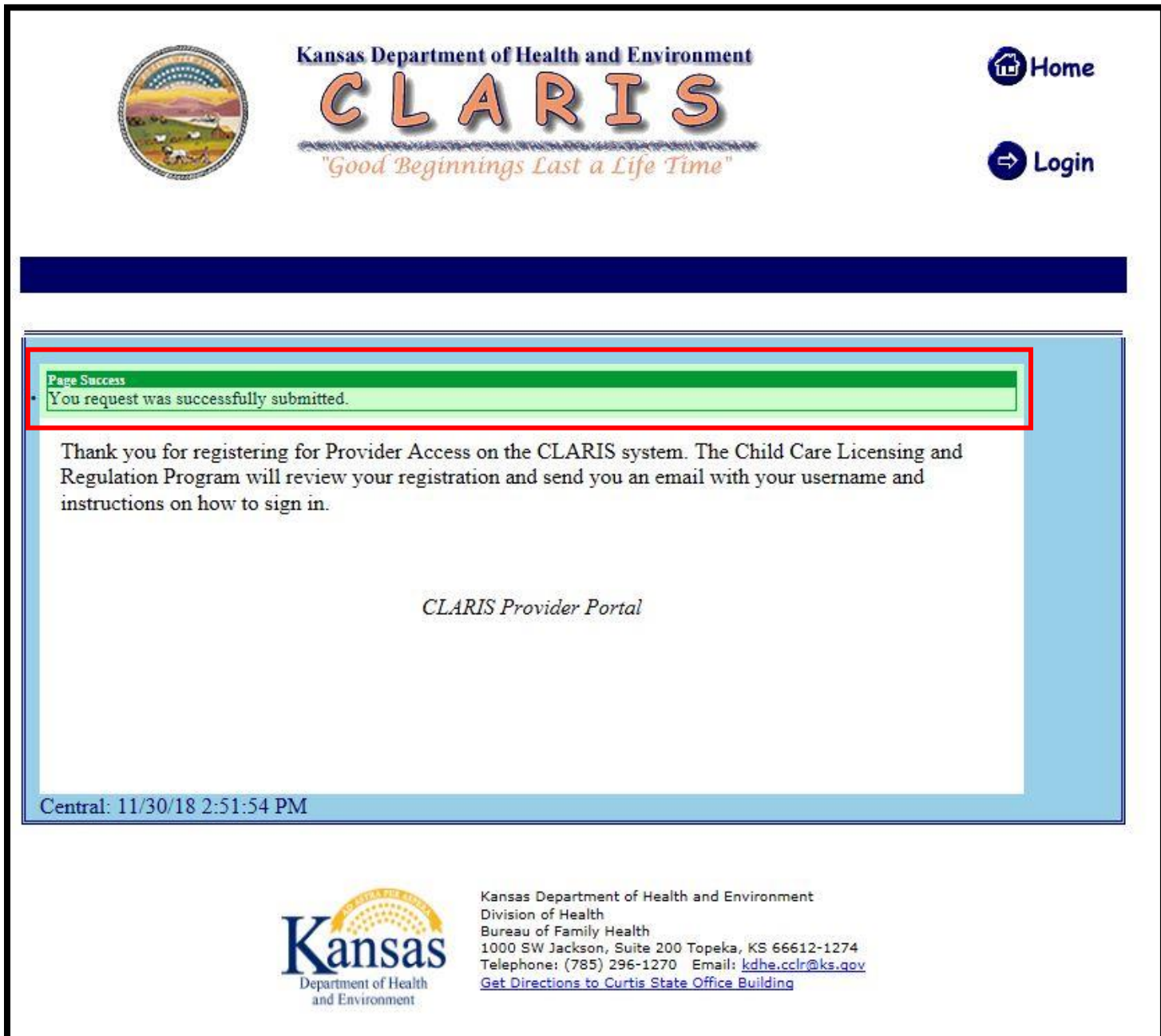
**I have read, understand, and agree to abide by the CLARIS User Security and Confidentiality Agreement. I understand that the KDHE Child Care Licensing CLARIS Security Manager may terminate my access to CLARIS for any reason. I understand that my access to CLARIS will be terminated for any violations of the CLARIS User Security and Confidentiality Agreement and that I may be subject to penalties imposed by law.**

**Do you agree with the terms of this usage agreement?**  I Agree  I Do Not Agree



After agreeing to the Security Agreement, this indicator screen will appear.

- If the information was correctly submitted the ribbon will be green (see example below), and you will receive an email from the Provider Access Portal that will contain your assigned username and temporary password.
- If there are errors with the information submitted, the ribbon will be red and will indicate what the error was. You will be required to correct all errors and resubmit.



The screenshot shows the CLARIS Provider Portal interface. At the top left is the Kansas Department of Health and Environment logo. The center features the text "Kansas Department of Health and Environment" above the large "CLARIS" logo, with the tagline "Good Beginnings Last a Life Time" below it. On the top right are "Home" and "Login" buttons. A green success message box is highlighted with a red border, containing the text: "Page Success" and "Your request was successfully submitted." Below this, a paragraph reads: "Thank you for registering for Provider Access on the CLARIS system. The Child Care Licensing and Regulation Program will review your registration and send you an email with your username and instructions on how to sign in." The text "CLARIS Provider Portal" is centered below the paragraph. At the bottom left, the timestamp "Central: 11/30/18 2:51:54 PM" is displayed. At the bottom right, contact information for the Kansas Department of Health and Environment, Division of Health, Bureau of Family Health, is provided, including the address, telephone number, email, and a link to directions to the Curtis State Office Building.

Once you receive your assigned username and temporary password, click on the link in the email to access the Provider Access Portal.

### EXAMPLE OF EMAIL WITH USERNAME AND TEMPORARY PASSWORD

From: KDHE Webservice

Sent: Tuesday, June 26, 2018 3:19 PM

To: KDHE.CCLR <[kdhe.cclr@ks.gov](mailto:kdhe.cclr@ks.gov)>

Subject: CLARIS Access Information

Please do not respond to this message.

This is a message from the Child Care Licensing and Regulation Program.  
Your request for Provider Access to Facilities you own has been accepted.

Your User Id is : mmouse94560

Your Initial Password is : **mm94560**

Enter your username and password.

CLARIS will automatically request that you change your password and add Security Questions/Answers before continuing on into the system.

Enter your username and temporary password; when you first login. You will then be required to create a security question and change your password. Your security question and answer should be something that will never change such as: Where was I born? What is my mother's maiden name? Please remember that passwords are case sensitive.

Change User's Password				
My User Profile				
User Name	First Name	Last Name	Group Manager	
<a href="#">mmouse94560</a>	<a href="#">mmouse</a>	<a href="#">mmouse</a>	No	
Phone Number	Email	Organization	EIS User Name	Security Agreement Date Signed
<a href="#">mmouse94560</a>	<a href="#">mmouse94560@ks.gov</a>			12/04/2018

**Alert**  
Your CLARIS password has expired. You must change your password before you may use the CLARIS System. Thank you.

**Password requirements:**

- Cannot contain your User Name
- Cannot be one of your last 10 passwords
- Cannot be changed more frequently than every 15 days
- Must be changed every 90 days
- Must include at least:
  - > 8 characters long
  - > 1 lower case letter
  - > 1 upper case letter
  - > 1 number
  - > a special character

Password

Repeat Password

**For Security Purposes, you will be asked a question to verify your identify.**  
You may use any question that you will remember here are a couple of examples.

**Example:**  
1) What city was I born in?  
2) What street did I grow up on?  
3) What is my favorite sports team?

Security Question :

Security Answer :

*The answer you type will be case sensitive and exact.*

After changing your password and creating your security question you will have access to the Provider Access Portal. You will now be able to familiarize yourself with the Portal and be able to view the information in your account.

The screenshot displays the CLARIS web portal interface. At the top left is the Kansas Department of Health and Environment logo, featuring a circular emblem with a landscape scene. To its right, the text reads "Kansas Department of Health and Environment" above the large, stylized word "CLARIS" in orange, with the tagline "Good Beginnings Last a Lifetime" in a smaller, cursive font below it. On the top right, there are navigation links: "Home" with a house icon and "Help" with an information icon. Below these, a "Welcome:" message is followed by a blurred name and a "LogOut" link.

A dark blue horizontal bar contains a series of yellow navigation tabs: "Welcome", "My Profile", "My Facilities", "My Applications", "My Background Checks", "My Organization", "My Payments", and "My Authorized Users". The "Welcome" tab is currently selected.

Below the navigation bar, a green message box states: "The password was changed successfully." Below this, the tagline "Good Beginnings Last a Lifetime" is centered in a blue, italicized font.

The main content area contains the following information:

- Child Care Licensing Program  
Bureau of Family Health  
Division of Public Health  
Kansas Department of Health and Environment  
1000 SW Jackson, Suite 200  
Topeka, KS 66612  
Phone (785) 296-1270 Fax (785) 559-4244  
ccir@kshhs.gov
- Welcome [blurred name]!
- Provider Information**
- LICENSE(s) AVAILABLE FOR RENEWAL**  
Available only during renewal period.
- INCOMPLETE APPLICATIONS**  
No Incomplete Applications Found
- OUTSTANDING FEES**  
No current payments are due for this Provider.  
See [History] for past payments.

Thank you and remember good beginnings last a lifetime!