

Please submit this form to the Home Care Solution Office via email at homecaresolution@ihis.org

Indicate any needed additional information in your Email to HCSO.

		Home Ca	are Solution (H	CS) - User	Access Form	Version 6	i. May 28, 2025
Status:	Create New A	ccount To	emporary Leave	Return from leave Going on leave	fi	ype in eld if other Di alue.	sable Account
Full Name:	First			Last			Sex
Address:	Street Address					Suite ‡	ŧ
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		via Service Ceriti	e iviai	lager Olgilati			
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