



# **OPPS Drug Acquisition Cost Survey (ODACS)**

## **Registration User Guide**

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**Version 1.0**

**Date: November 20, 2025**

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## 1. Purpose

The purpose of this user guide is to provide instructions for registering as a new user in the Centers for Medicare & Medicaid Services (CMS) Identity Management (IDM) system to request access to the Fee-for-Service Data Collection System (FFSDCS) Hospital Outpatient Prospective Payment System (OPPS) Drug Acquisition Survey (ODACS) module.

CMS uses the FFSDCS to collect and synthesize data on products under Fee-for-Service (FFS) payment mechanisms. CMS added the ODACS module to collect hospital acquisition costs for covered outpatient drugs at hospital outpatient departments paid under the Medicare Hospital OPPS.

Hospitals are asked to designate the most appropriate individual to register as the ODACS Submitter for each CMS Certification Number (CCN). The Submitter will gather the required data and submit the data on behalf of the CCN. It is at each organization's discretion who to designate as the Submitter. This individual requires access to financial data and must have strong working knowledge of the organization's operations. Even though multiple individuals may contribute to gathering and preparing the data, only one person per CCN may submit the data to CMS. While there may only be one Submitter per CCN, Submitters may register to submit data on behalf of multiple CCNs.

Before the Submitter can log in to the FFSDCS, they must create a new user account by completing the new user registration steps in the following section.

**Note:** If you have already completed the registration and IDM process through the CMS Enterprise Portal for any other CMS application, you may skip *Section 2 - New User Registration* and proceed to *Section 3 - Logging in Using MFA* for instructions to log in and request access to the ODACS module.

### 1.1 Paperwork Reduction Act (PRA) Notice

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid Office of Management and Budget (OMB) control number. The valid OMB control number for this information collection is 0938-1487 (CMS-10931). If you have comments or suggestions, please write to: CMS, 7500 Security

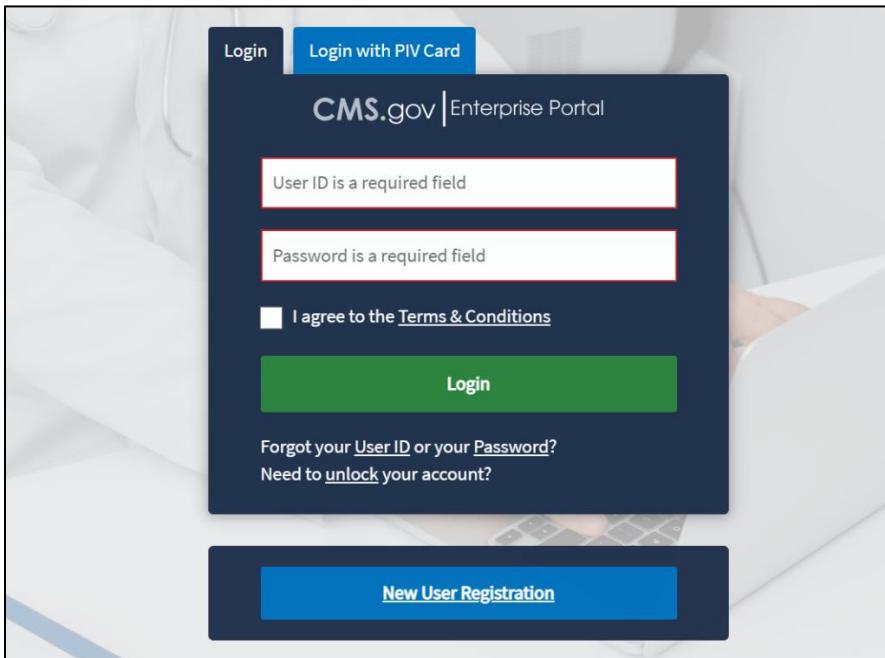
Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850. CMS-10931 approval through December 31, 2028.

## 2. New User Registration

You must have an IDM username and password to access the FFSDCS and ODACS module. Follow these steps to register with IDM and receive your credentials:

1. Navigate to the [CMS Enterprise Portal](#) main page.

The **CMS Enterprise Portal Login Page** opens. Refer to *Figure 1*.



The screenshot shows the CMS Enterprise Portal Login Page. At the top, there are two buttons: 'Login' and 'Login with PIV Card'. The main area is titled 'CMS.gov | Enterprise Portal'. It contains two red-bordered input fields, one for 'User ID' and one for 'Password', both with the message 'User ID is a required field' and 'Password is a required field' respectively. Below these fields is a checkbox labeled 'I agree to the [Terms & Conditions](#)'. A large green 'Login' button is centered. At the bottom of the form, there are links for 'Forgot your [User ID](#) or your [Password](#)?' and 'Need to [unlock](#) your account?'. At the very bottom, there is a blue button with the text '[New User Registration](#)'.

Figure 1: CMS Enterprise Portal - Login Page

2. Click the **New User Registration** button.

The **Select Your Application** page opens. Refer to *Figure 2*.



The screenshot shows the 'Step #1: Select Your Application' page. The title is 'Step #1: Select Your Application'. Below it, a sub-instruction reads 'Step 1 of 3 - Select your application from the dropdown. You will then need to agree to the terms & conditions.' A dropdown menu is displayed with the placeholder text 'Select Your Application'.

Figure 2: New User Registration - Select Your Application Drop-Down

3. Click the **Select Your Application** drop-down; select **FFSDCS** from the list of applications.

The **Step #1: Terms and Conditions** page opens. Refer to *Figure 3*.

### Step #1: Select Your Application

Step 1 of 3 - Select your application from the dropdown. You will then need to agree to the terms & conditions.

**FFS/DCS**

**Application Description:** The Fee for Service Data Collection System (FFS/DCS) application collects data related to Medicare Part B reimbursement information.

**Terms & Conditions**  
OMB No.0938-1236 | Expiration Date: 08/31/2025 | Paperwork Reduction Act  
**Consent to Monitoring**  
By logging onto this website, you consent to be monitored. Unauthorized attempts to upload information and/or change information on this web site are strictly prohibited and are subject to prosecution under the Computer Fraud and Abuse Act of 1986 and Title 18 U.S.C. Sec.1001 and 1030. We encourage you to read the [HHS Rules of Behavior](#).  
**Protecting Your Privacy**

I agree to the Terms and Conditions

[Cancel](#)

**Figure 3: New User Registration - Terms & Conditions**

4. Read the **Terms & Conditions**. If you agree, select the **I agree to the Terms & Conditions** checkbox; click **Next**.

**Note:** By selecting this checkbox, you certify that you read and consent to monitoring while accessing and using the portal. The terms and conditions describe why the application collects personally identifiable information (PII), which is to identify the unique, new user who is registering to use the application.

The terms and conditions link provides additional hyperlinks to the HHS Rules of Behavior and the CMS Privacy Act Statement.

The **Step #2: Register Your Information** page opens. Refer to *Figure 4*.

### Step #2: Register Your Information

Step 2 of 3 - Please enter your personal and contact information.

All fields are required unless marked (optional).

Is Your Home Address U.S. Based?

Yes  No

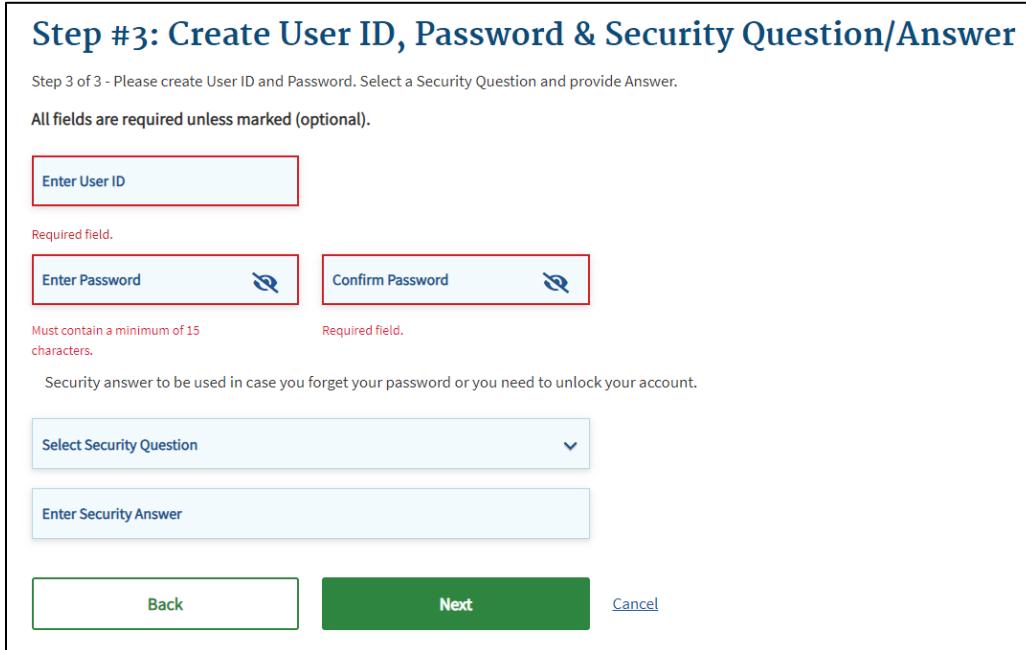
[Cancel](#)

**Figure 4: New User Registration - Step #2 Register Your Information**

- Enter your personal information in each of the required fields; click **Next**.

**Note:** The application requires you to complete all fields unless marked as optional.

The **Step #3: Create User ID, Password & Security Question/Answer** page opens. Refer to *Figure 5*.



**Step #3: Create User ID, Password & Security Question/Answer**

Step 3 of 3 - Please create User ID and Password. Select a Security Question and provide Answer.

All fields are required unless marked (optional).

Enter User ID

Required field.

Enter Password

Confirm Password

Must contain a minimum of 15 characters.

Required field.

Select Security Question

Enter Security Answer

Back

Next

Cancel

**Figure 5: New User Registration - Step #3 Create User ID & Password**

- Type your desired user identification in the **User ID** field.

**Note:** Per the User ID Requirements, your user ID must:

- Consist of a minimum of six (6) alphanumeric characters and cannot exceed seventy-four (74) characters.
- Contain at least one (1) uppercase or lowercase letter.
- Contain one (1) special character. You may use hyphens (-), underscores (\_), apostrophes ('), and periods (.).
- Not have a special character as the first or last letter of your user ID.
- Not contain eight (8) consecutive numbers.

- Type your desired password in the **Password** field; then re-type your password in the **Confirm Password** field. Passwords must match before you move to the next step.

**Note:** Your password must conform to the [CMS Acceptable Risk Safeguards \(ARS\) Password Policy](#). You may only change your password once every 24 hours. Per the password policy, your password must:

- Consist of a minimum of fifteen (15) alphanumeric characters and not exceed sixty (60) characters.
- Contain at least one (1) uppercase and one (1) lowercase letter.
- Contain at least one (1) number.
- Not contain part of your user ID, first name, last name, or common passwords.

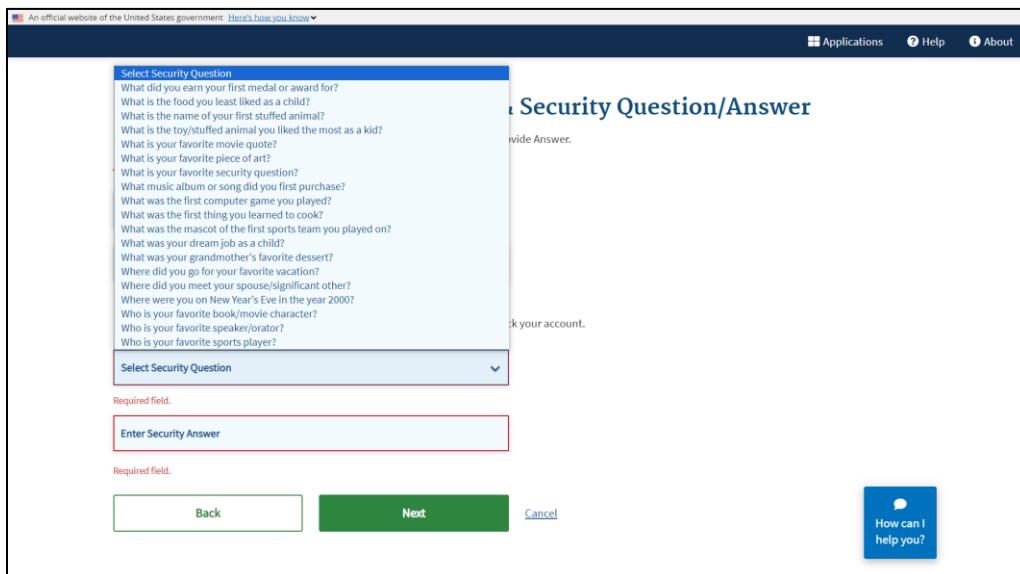
e. Be different from your previous six (6) passwords.

**Note:** Special characters are optional in your password. The system accepts the following special characters: ('), ("), (!), (#), (\$), (%), (&), (( ), ( )), (\*), (+), (.), (-), (.), (/), (:), (;), (<), (>), (=), (?), (@), (|), (|), (^), (\_), (`), (~).

9. Select a security question from the **Security Question** drop-down; enter your answer in the **Security Answer** field. Refer to *Figure 6*.

**Note:** The system requires your security answer to reset your password or unlock your account. Per the security answer requirements, your security answers:

- a. Must contain at least four (4) alphanumeric characters.
- b. Cannot contain part of your security question.
- c. Can contain spaces.



An official website of the United States government [HealthCare.gov](#)

Applications Help About

Select Security Question

What did you earn your first medal or award for?  
What is the food you least liked as a child?  
What is the name of your first stuffed animal?  
What is the toy/stuffed animal you liked the most as a kid?  
What is your favorite movie quote?  
What is your favorite piece of art?  
What is your favorite security question?  
What music album or song did you first purchase?  
What was the first computer game you played?  
What was the first thing you learned to cook?  
What was the mascot of the first sports team you played on?  
What was your dream job as a child?  
What was your grandmother's favorite dessert?  
Where did you go for your favorite vacation?  
Where did you meet your spouse/significant other?  
Where were you on New Year's Eve in the year 2000?  
Who is your favorite book/movie character?  
Who is your favorite speaker/orator?  
Who is your favorite sports player?

Select Security Question

Required field.

Enter Security Answer

Required field.

Back Next Cancel

How can I help you?

**Figure 6: New User Registration - Security Question/Answer Page**

10. Click **Next** to complete the registration process.

The **New User Registration Summary** page opens. Refer to *Figure 7*.

## New User Registration Summary

Please review your information and make any necessary changes before submitting.

**FFSDCS**

**Application Description :** The Fee for Service Data Collection System (FFSDCS) application collects data related to Medicare Part B reimbursement information.

First Name	Enter Middle Name (optional)	Last Name	Suffix (optional)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Birth Month	Birth Date	Birth Year	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Home Address Line 1	Enter Home Address 2 (optional)		
<input type="text"/>	<input type="text"/>		
City	State	ZIP Code	Enter ZIP+4 Code (optional)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Email Address	Confirm Email Address		
<input type="text"/>	<input type="text"/>		
Phone Number	<input type="text"/>		

All fields are required unless marked (optional).

---

User ID	Enter Password	Confirm Password
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>		
Security Question		
What is the food you least liked as a child?	<input type="text"/>	
Security Answer	<input type="text"/>	

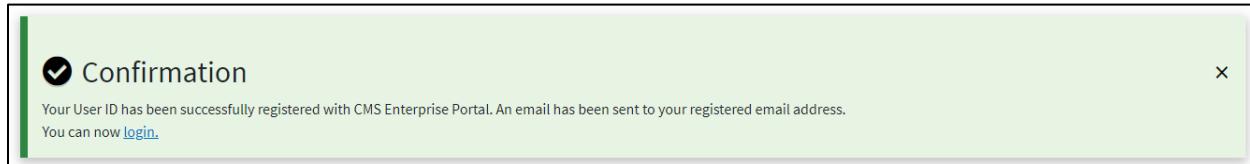
Submit User
[Cancel](#)

**Figure 7: New User Registration - Summary**

**Note:** You may click the **Cancel** button to exit the registration process; however, the system does not save any of the changes you entered.

11. Review the **New User Registration Summary** page; make necessary changes.
12. Click the **Submit User** button to complete the registration process.

A Confirmation message displays. Refer to *Figure 8*.



**Figure 8: New User Registration Confirmation**

13. Click the **login** hyperlink to return to the main login page.

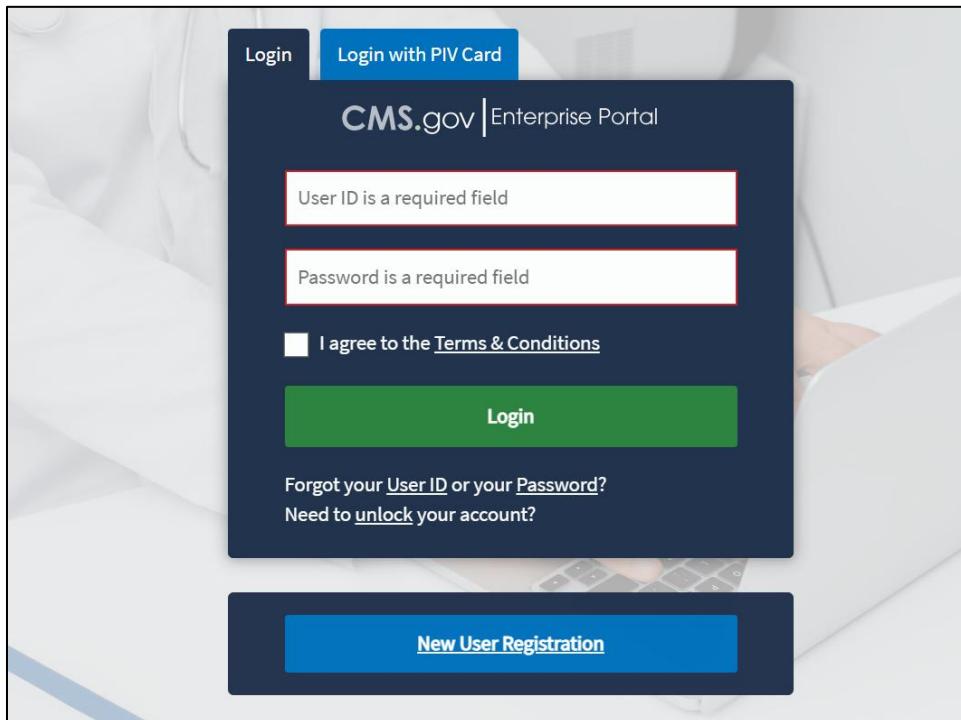
**Note:** Wait at least 5 minutes before logging in to the FFSDCS module with your new User ID and Password.

### 3. Logging in Using MFA

Following registration, use these steps to log in to the FFSDCS and ODACS module:

1. Navigate to the [CMS Enterprise Portal](#) main page.

The **CMS Enterprise Portal Login Page** opens. Refer to *Figure 9*.



**Figure 9: Logging in Using MFA - CMS Enterprise Portal Login Page**

2. Type your user ID and password in the **User ID** and **Password** fields.
3. Click the **Terms & Conditions** hyperlink and review the text in the pop-up window; close the window.
4. Read the terms and conditions. If you agree, select the **I agree to the Terms & Conditions** checkbox.

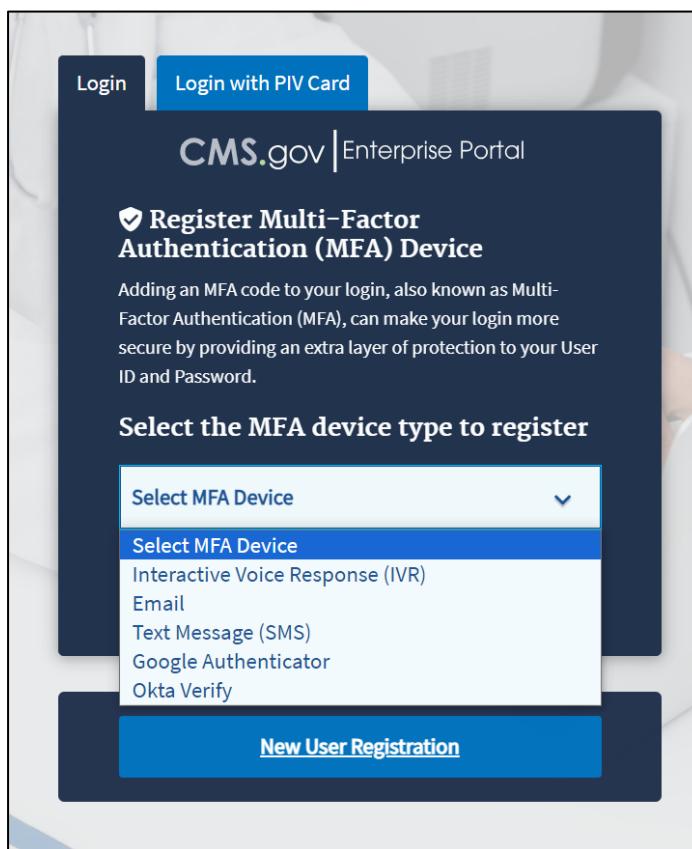
**Note:** By selecting this checkbox, you certify that you read and consent to monitoring while accessing and using the portal. Additionally, the terms and conditions provide hyperlinks to the HHS Rules of Behavior and the CMS Privacy Act Statement.

5. Click **Login**.

**Note:** If you forget your user ID or password, click the appropriate hyperlinked text in **Forgot your User ID or your Password?** under the **Login** button and follow the provided instructions. If you are still not able to access your account and need to unlock your account, click the hyperlinked unlock text under **Need to unlock your account?**

To protect both your personal information and the security of the FFSDCS and ODACS module, you must verify your identity using multi-factor authentication (MFA), which adds an extra layer of security beyond just a username and password. Users have various authentication options, including Interactive Voice Response (IVR), Email, Text Message (Short Message Service (SMS)), or Okta Verify.

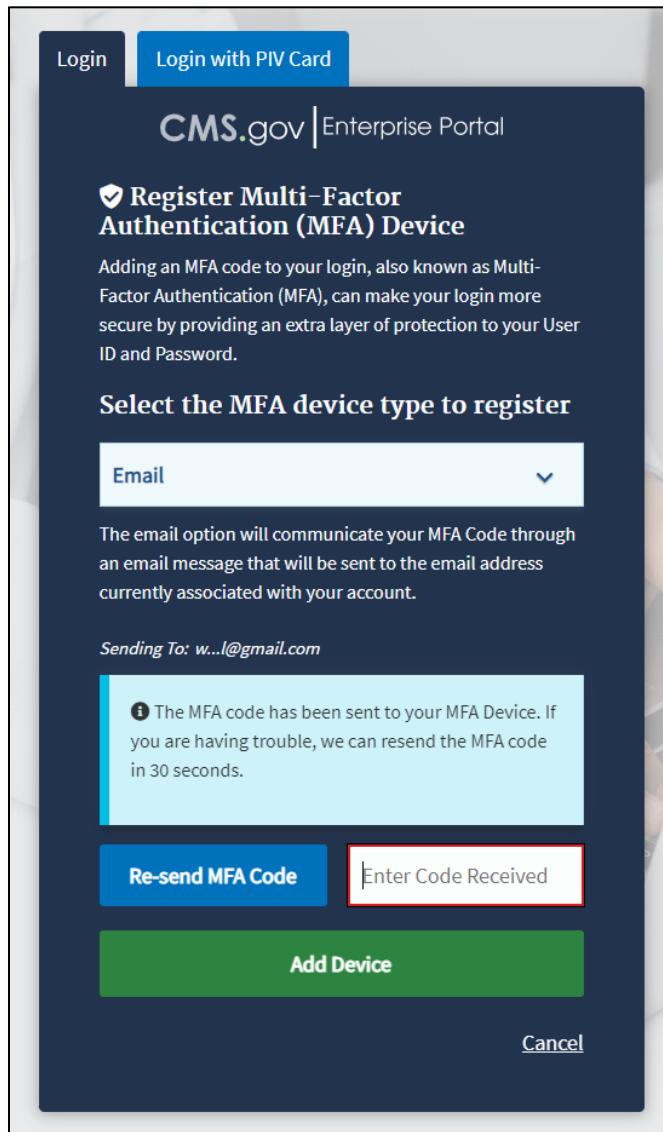
6. Click the **Select MFA Device** drop-down; select your preferred MFA device type from the list. Whenever you log back in to the CMS Enterprise Portal through this process, your preferred method of MFA reloads automatically. Refer to *Figure 10*.



**Figure 10: Logging in Using MFA - Select MFA Device Type Drop-Down**

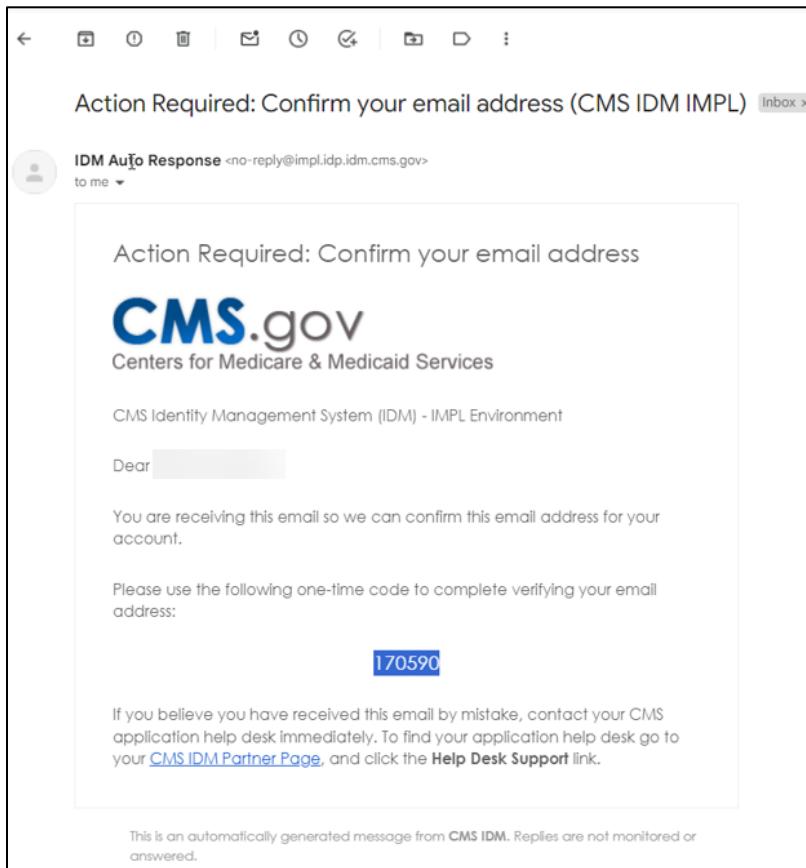
7. Click the **Send MFA Code** green button to receive a one-time phone call, email, text message, or other communication to confirm registration of your identity with the

FFSDCS. This user guide demonstrates email as the chosen MFA method. Refer to *Figure 11*.



**Figure 11: Logging in Using MFA - MFA Code**

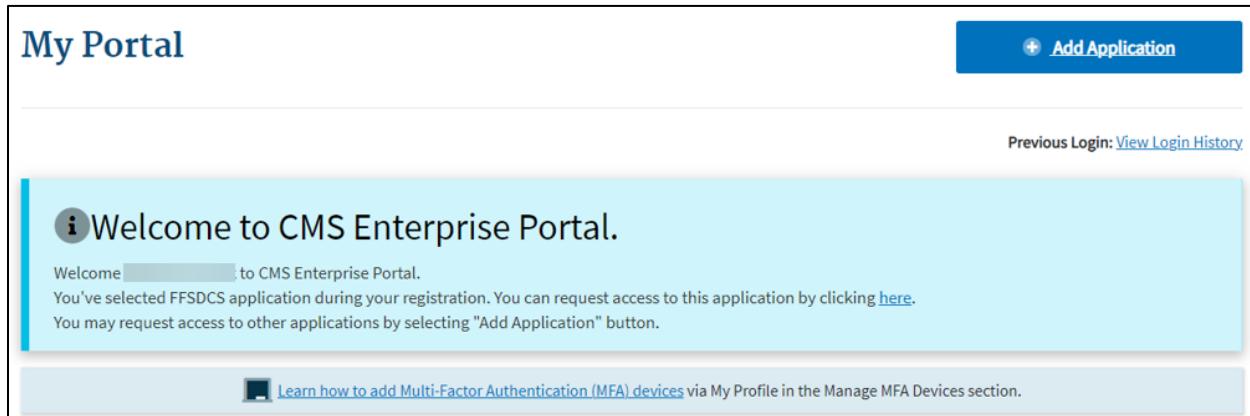
The system sends an email with a six-digit code to confirm your identity. Refer to *Figure 12*.



**Figure 12: Logging in Using MFA - Confirmation Code in Email**

8. Record and type the six-digit code into the **Enter MFA Code** field. Click the **Add Device** button to confirm your identity and enter the FFSDCS.

The **My Portal** landing page opens, displaying a **Welcome to CMS Enterprise Portal** message. Refer to *Figure 13*.



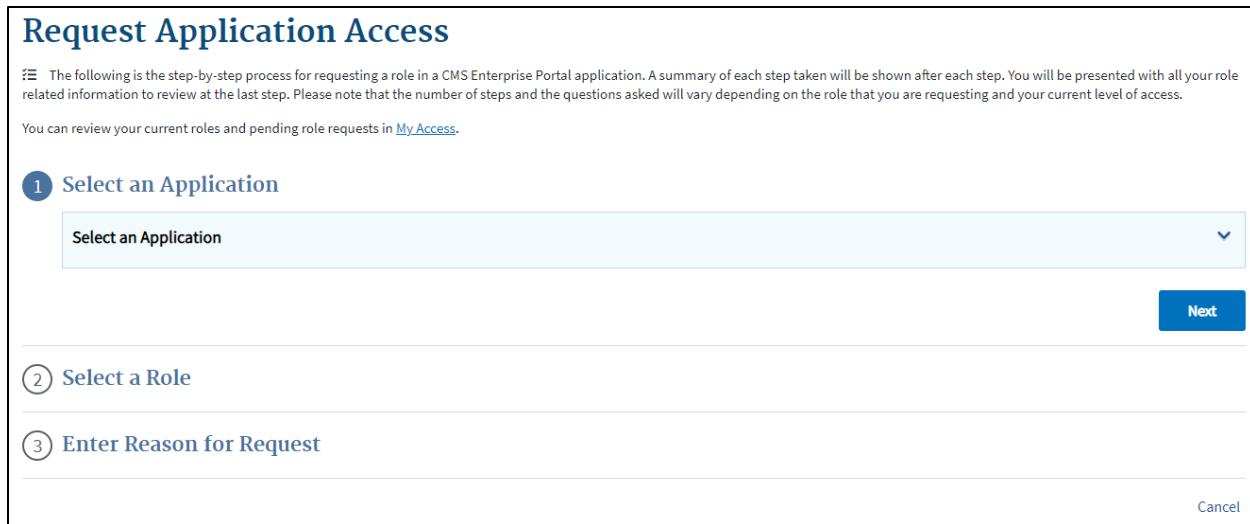
**Figure 13: Logging in Using MFA - My Portal Landing Page**

## 4. Request Application and User Role

Follow these steps to request access to the FFSDCS and establish your role in the ODACS application:

1. Click the **Add Application** button.

The **Request Application Access** page opens. Refer to *Figure 14*.



**Request Application Access**

The following is the step-by-step process for requesting a role in a CMS Enterprise Portal application. A summary of each step taken will be shown after each step. You will be presented with all your role related information to review at the last step. Please note that the number of steps and the questions asked will vary depending on the role that you are requesting and your current level of access.

You can review your current roles and pending role requests in [My Access](#).

① Select an Application

Select an Application

Next

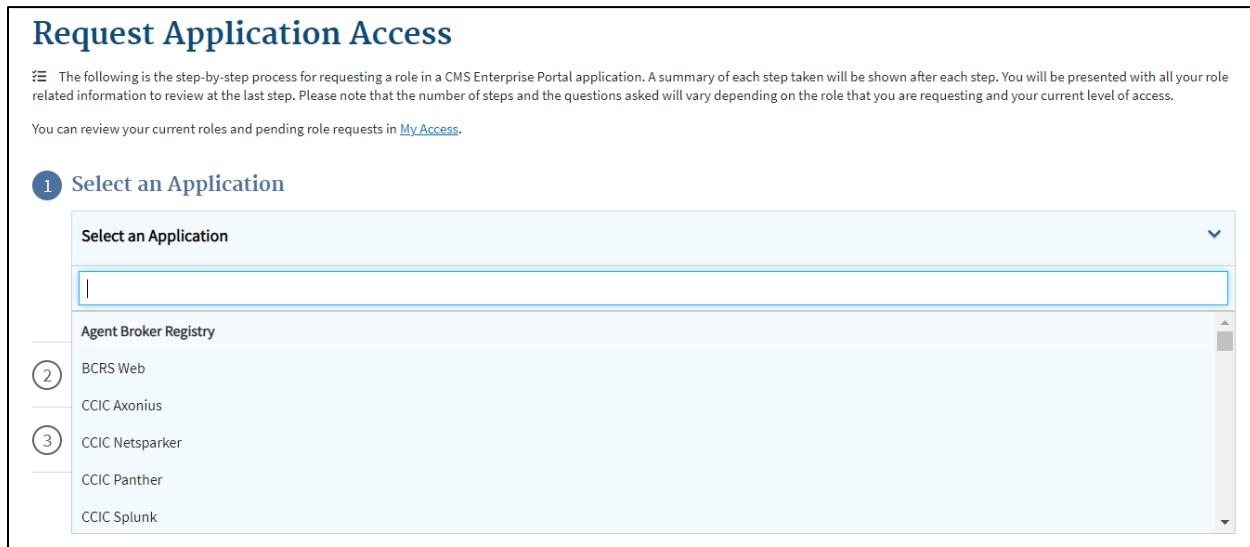
② Select a Role

③ Enter Reason for Request

Cancel

**Figure 14: Request Application and User Role - Request Application Access**

2. Click the **Select an Application** drop-down; scroll or search for your application. Refer to *Figure 15*.



**Request Application Access**

The following is the step-by-step process for requesting a role in a CMS Enterprise Portal application. A summary of each step taken will be shown after each step. You will be presented with all your role related information to review at the last step. Please note that the number of steps and the questions asked will vary depending on the role that you are requesting and your current level of access.

You can review your current roles and pending role requests in [My Access](#).

① Select an Application

Select an Application

Agent Broker Registry

BCRS Web

CCIC Axonius

CCIC Netsparker

CCIC Panther

CCIC Splunk

**Figure 15: Request Application and User Role - Select an Application Drop-Down**

3. Select **FFSDCS** from the drop-down menu. To be a Submitter, you must register for the role on the FFSDCS module.

The **Request Application Access** page opens. Refer to *Figure 16*.

## Request Application Access

The following is the step-by-step process for requesting a role in a CMS Enterprise Portal application. A summary of each step taken will be shown after each step. You will be presented with all your role related information to review at the last step. Please note that the number of steps and the questions asked will vary depending on the role that you are requesting and your current level of access.

You can review your current roles and pending role requests in [My Access](#).

**1 Select an Application**

Application  
FFSDCS

Application Description: The Fee for Service Data Collection System (FFSDCS) application collects data related to Medicare Part B reimbursement information.

Help Desk Information

Next

**2 Select a Role**

**3 Enter Reason for Request**

Cancel

**Figure 16: Request Application and User Role - Select an Application**

- Click the **Next** button.

A checkmark displays next to **FFSDCS**; the application automatically moves you to the **Select a Role** section. Refer to *Figure 17*.

## Request Application Access

The following is the step-by-step process for requesting a role in a CMS Enterprise Portal application. A summary of each step taken will be shown after each step. You will be presented with all your role related information to review at the last step. Please note that the number of steps and the questions asked will vary depending on the role that you are requesting and your current level of access.

You can review your current roles and pending role requests in [My Access](#).

**1 Select an Application**

✓ Completed  
FFSDCS

**2 Select a Role**

Select a Role

Next

**3 Enter Reason for Request**

Cancel

**Figure 17: Request Application and User Role - Select a Role**

- Click the **Select a Role** drop-down; scroll to find or begin to type **ODACS Submitter** to select your role. Refer to *Figure 18*.

## Request Application Access

The following is the step-by-step process for requesting a role in a CMS Enterprise Portal application. A summary of each step taken will be shown after each step. You will be presented with all your role related information to review at the last step. Please note that the number of steps and the questions asked will vary depending on the role that you are requesting and your current level of access.

You can review your current roles and pending role requests in [My Access](#).

### 1 Select an Application

FFSDCS

Completed  
 Edit

### 2 Select a Role

Select a Role

ASP Business Owner Representative

ASP Certifier

ASP End User

ASP Helpdesk User

ASP Staff

ASP Level 2 Staff

**Figure 18: Request Application and User Role - Select a Role Drop-Down**

6. Select the **ODACS Submitter** role. Refer to *Figure 19*.

## Request Application Access ?

The following is the step-by-step process for requesting a role in a CMS Enterprise Portal application. A summary of each step taken will be shown after each step. You will be presented with all your role related information to review at the last step. Please note that the number of steps and the questions asked will vary depending on the role that you are requesting and your current level of access.

You can review your current roles and pending role requests in [My Access](#).

### 1 Select an Application

FFSDCS

Completed  
 Edit

### 2 Select a Role

Role

ODACS Submitter

x v

**Role Description:** Provides the capability of submitting OPPS Drug Acquisition data.

Next

### 3 Enter Reason for Request

Cancel

**Figure 19: Request Application and User Role - Selected Role as ODACS Submitter**

7. Click the **Next** button to confirm your role.

A checkmark displays next to your selected role; the application automatically moves you to the **Complete Identity Verification** section. Refer to *Figure 20*.

## Request Application Access ?

The following is the step-by-step process for requesting a role in a CMS Enterprise Portal application. A summary of each step taken will be shown after each step. You will be presented with all your role related information to review at the last step. Please note that the number of steps and the questions asked will vary depending on the role that you are requesting and your current level of access.

You can review your current roles and pending role requests in [My Access](#).

**1 Select an Application** ✓ Completed  Edit

FFSDCS

**2 Select a Role** ✓ Completed  Edit

ODACS Submitter

**3 Enter Reason for Request**

Enter a Reason for Request

Required field.

**Submit**

**Figure 20: Request Application and User Role - Complete Identity Verification**

8. In the required **Enter Reason for Request** field, enter a reason for the request.
9. Click the **Submit** button.

The **Step #1: Identity Verification Overview** page opens. Refer to *Figure 21*.

## Step #1: Identity Verification Overview

To complete this role request, it is important to note that Experian, a trusted and reliable agent, needs to collect further details about you.

Please ensure that you have entered your full legal name, current home address, your personal primary phone number, date-of-birth, and your personal e-mail address correctly to ensure a seamless and secure process.

For additional information or assistance, we encourage you to visit the Experian Customer Assistance website: <http://www.experian.com/help>.

Experian identity verification is limited to US addresses and US territories only. If you have a foreign address please call your [Tier 1 Help Desk](#) to verify your identity.

**Next** **Cancel**

**Figure 21: Request Application and User Role - Step #1: Identity Verification Overview**

10. Read the **Identity Verification Overview** to gain an understanding of your privacy as well as the process Experian Credit Bureau uses to accurately confirm the identity of users; click **Next**.

The **Step #2: Accept Terms & Conditions** page opens. Refer to *Figure 22*.

## Step #2: Accept Terms & Conditions

OMB No. 0938-1236 | Expiration Date: 08/31/2025 | [Paperwork Reduction Act](#)

### Protecting Your Privacy

Protecting your Privacy is a top priority at CMS. We are committed to ensuring the security and confidentiality of the user registering to EIDM. Please read the [CMS Privacy Act Statement](#), which describes how we use the information you provide.

Personal information is described as data that is unique to an individual, such as a name, address, telephone number, Social Security Number, and date of birth (DOB). CMS is very aware of the privacy concerns around PII data. In fact, we share your concerns. We will only collect personal information to verify your identity. Your information will be disclosed to Experian, an external authentication service provider, to help us verify your identity. If collected, we will validate your Social Security Number with Experian only for the purposes of verifying your identity. Experian verifies the information you give us against their records. We may also use your answers to the challenge questions and other PII to later identify you in case you forget or misplace your User ID /Password.

### HHS Rules of Behavior

We encourage you to read the [HHS Rules of Behavior](#), which provides the appropriate use of all HHS information technology resources for Department users, including Federal employees, contractors, and other system users.

[I have read the HHS Rules of Behavior for Privileged User Accounts \(addendum to the HHS Rules of Behavior \(HHS RoB\), document number HHS-OCIO-2012-0002S](#)

I agree to the Terms & Conditions

[Back](#)

[Next](#)

[Cancel](#)

**Figure 22: Request Application and User Role - Step #2: Accept Terms & Conditions**

11. Read the terms and conditions derived from the [Paperwork Reduction Act of 1995](#), consisting of three sections: Protecting Your Privacy, HHS Rules of Behavior, and Identity Verification.
12. If you agree to the terms and conditions, select the **I agree to the Terms & Conditions** checkbox; click **Next**.

The **Step #3: Enter Your Information** page opens. Refer to *Figure 23*.

## Step #3: Enter Your Information

Enter your legal first name and last name, as it may be required for Identity Verification.  
All fields are required unless marked (optional).

Enter Legal First Name	Enter Middle Name (optional)	Enter Legal Last Name	Suffix (optional)
------------------------	------------------------------	-----------------------	-------------------

Enter Social Security Number	Birth Month	Birth Date	Birth Year
------------------------------	-------------	------------	------------

Is Your Address US Based?

Yes  No

Enter Home Address Line 1	Enter Home Address Line 2 (optional)
---------------------------	--------------------------------------

Enter City	State	Enter ZIP Code	Enter ZIP+4 Code (optional)
------------	-------	----------------	-----------------------------

Save home address to profile

Enter Personal Phone Number
-----------------------------

Enter Personal Email Address	Confirm Personal Email Address
------------------------------	--------------------------------

Check here if you have read and verified the information above is accurate and complete as required by Identity Verification.

[Back](#)

[Next](#)

[Cancel](#)

**Figure 23: Request Application and User Role - Enter Your Information**

13. Enter your information in all required fields.

**Note:** Once you complete all fields, ensure the checkmark is present at the bottom of the page before moving on.

14. Click **Next**.

The **Multi-Factor Authentication Information** page opens. Refer to *Figure 24*.



**Multi-Factor Authentication Information**

To protect your privacy, you will need to add an additional level of security to your account. This will entail successfully registering your Phone, Computer or E-mail, before continuing the role request process.

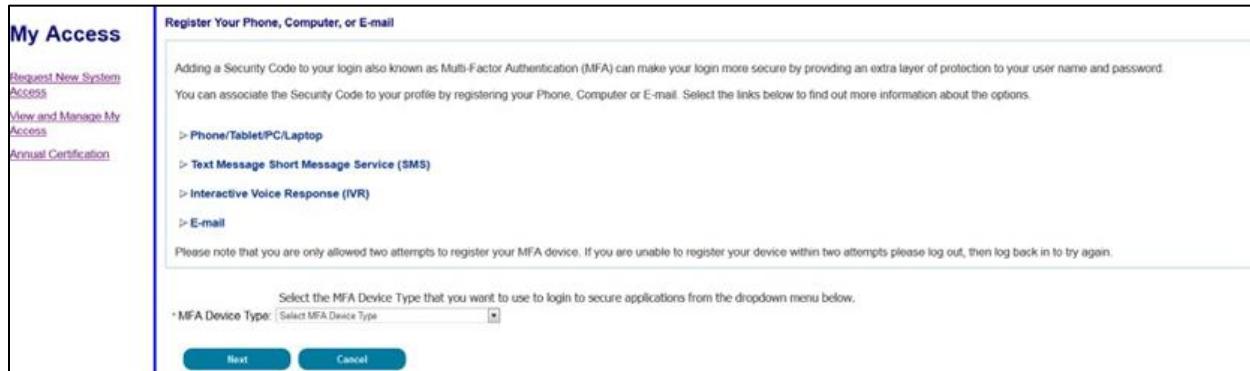
To continue this process, please select 'Next'.

**Next** **Cancel**

**Figure 24: Request Application and User Role - MFA Information**

15. Read the message about MFA information; click **Next** to continue.

The **Register Your Phone, Computer, or Email** page opens. Refer to *Figure 25*.



**Register Your Phone, Computer, or E-mail**

Adding a Security Code to your login also known as Multi-Factor Authentication (MFA) can make your login more secure by providing an extra layer of protection to your user name and password. You can associate the Security Code to your profile by registering your Phone, Computer or E-mail. Select the links below to find out more information about the options.

> Phone/Tablet/PC/Laptop  
> Text Message Short Message Service (SMS)  
> Interactive Voice Response (IVR)  
> E-mail

Please note that you are only allowed two attempts to register your MFA device. If you are unable to register your device within two attempts please log out, then log back in to try again.

Select the MFA Device Type that you want to use to login to secure applications from the dropdown menu below.

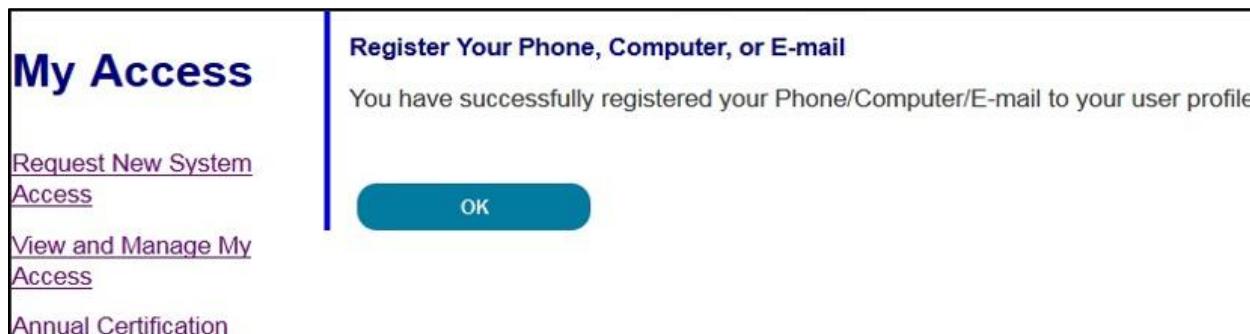
\* MFA Device Type: Select MFA Device Type

**Next** **Cancel**

**Figure 25: Request Application and User Role - Register Your Phone, Computer, or Email**

16. Select a device from the **MFA Device Type** drop-down. Enter any required information requested for the selected device; click **Next**.

A message opens indicating the system successfully registered your device. Refer to *Figure 26*.



**My Access**

[Request New System Access](#)  
[View and Manage My Access](#)  
[Annual Certification](#)

**Register Your Phone, Computer, or E-mail**

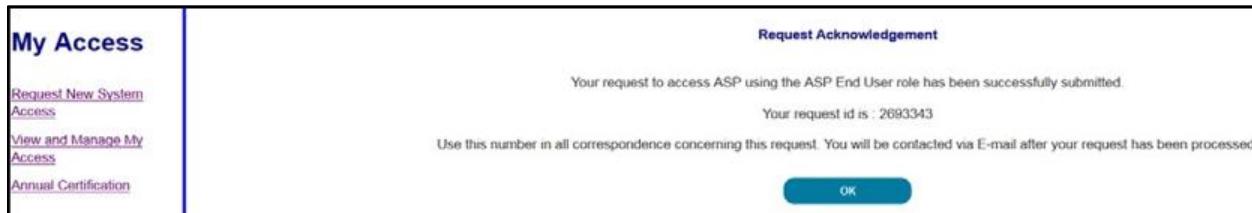
You have successfully registered your Phone/Computer/E-mail to your user profile

**OK**

**Figure 26: Request Application and User Role - Successfully Registered MFA Device**

17. Click **OK**.

A **Request Acknowledgement** page opens. Refer to *Figure 27*.



**Request Acknowledgement**

Your request to access ASP using the ASP End User role has been successfully submitted.

Your request id is : 2693343

Use this number in all correspondence concerning this request. You will be contacted via E-mail after your request has been processed.

**OK**

**Figure 27: Request Application and User Role - Request Acknowledgement**

18. Read the **Request Acknowledgement** statement; click **OK**.

**Note:** Following submission, you may have to wait up to 72 hours (3 days) to receive an email notification confirming your access to the FFSDCS and ODACS module.

## 5. Technical Support Contact Information

Contact the FFSDCS (ASP) Application Helpdesk for issues such as:

- Account unlock
- Password reset
- Registration process questions
- System availability escalations

*Table 1* provides contact information for technical support.

**Table 1: Technical Support Contacts**

Email Address	Phone Number	Hours
<a href="mailto:ODACSHelpDesk@dcca.com">ODACSHelpDesk@dcca.com</a>	1-844-876-0765	9:00 a.m. to 6:00 p.m. Eastern Standard Time (EST), Monday through Friday

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