Action Request Transmittal
Aging and People with Disabilities

ζDHS | Oregon Department of Human Services

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Authorized signature

Number: APD-AR-20-071

Issue date: 7/14/2020

Topic: Systems Issues

Due date: 7/14/2020

Subject: Oregon Access utilization of new user role, Super User

Applies to (*check all that apply*):

☐ All DHS employees
☒ Area Agencies on Aging: Type B
☒ Aging and People with Disabilities
☐ Self Sufficiency Programs
☐ County DD program managers
☐ Support Service Brokerage Directors
☐ ODDS Children's Residential Services
☐ Child Welfare Programs

☐ County Mental Health Directors
☐ Health Services
☐ Office of Developmental Disabilities Services (ODDS)
☐ ODDS Children's Intensive In Home Services
☐ Stabilization and Crisis Unit (SACU)
☐ Other (*please specify*):

Action required:

Effective immediately, please ensure your office has a supervisor assigned to the Super User role in Oregon Access. Emails are going out to supervisors who were provided these rights already. If you need additional supervisors to have this role please submit the completed 784 form to APD.Security-Requests@dhsoha.state.or.us.

In case you might not be aware, here is a description of what the Super User rights provide:

Users granted Super User rights have the ability to integrate cases, change the Applying For status on the Case Overview tab and navigate to the Medical Assistance tab in OA that non-Super Users cannot. For Super Users, the integration process works the same way it did before the IE/ONE changes were implemented. This also means that Super Users will not receive any warnings if the consumer already has eligibility in the ONE system. It is VERY important that Super Users ensure integrating a case will not result in duplicate benefits before they take any action.

Non-Super Users will be prompted when an action they are attempting to take must be performed by a Super User.

As a reminder, here are some brief descriptions for each of the IE/ME statuses you may see:

- NO = this status means the consumer has no current eligibility in the ONE system.
- MED = A status of MED indicates that the consumer is currently receiving at least 1 benefit through the ONE system. If integrating a case for a consumer with this status, **verify** it will not result in duplicate benefits.
- FAIL = this means that an attempt was made to convert the consumer's record to the ONE system, but the conversion failed. If integrating a case for a consumer with this status, **verify** it will not result in duplicate benefits.
- YES = a status of YES indicates that the consumer's DHS benefits (SNAP, OSIPM, etc.) was successfully converted to the ONE system. This status generally means that program eligibility is managed through the ONE system

Local Management may decide to allow a Lead Worker to have this role, this should be discussed and approved by the District Manager or Program Manager, noting the intent is for a supervisor to approve these rare instances for approvals.

Reason for action:
New edits were added to Oregon Access to ensure that duplicate benefits are not issued. Non-Super Users will be prompted when an action they are attempting to take must be performed by a Super User.

How to request Super User rights:

- Search for and open the de0784.pdf form from this location https://sharedsystems.dhsoha.state.or.us/forms/
- Be sure to use the PDF version of the form. The Word version is out of date.

Template name: _____

APD — Individual User Profile

DHS | Oregon Department of Human Services
AGING & PEOPLE WITH DISABILITIES
Information Systems Coordination Unit

Section 1: Individual user profile ("User" is the person whose account is being affected.)

Check all that apply:

☐ Add a new user ID   ☐ Terminate a user ID (No longer with agency.)   ☐ Keep all previous roles

☐ Revoke a user ID (Temporary revoke/leave of absence.)

☐ Change name on user ID (New user ID will not be issued for name changes.)

☐ Modify access (Be sure to designate which roles you are adding or deleting OR check the "Keep all previous roles" box, above. Failure to do so will result in all previous roles being deleted.)

Employed by:

○ DHS/AAA branch number: Choose one ▾   SDistXX: Choose one if needed ▾

○ Contractor agency/business name: _____

○ Other agency (specify): _____

Employment status: Choose one ▾   ○ Permanent   ○ Temporary

DHS user information (users who have OR numbers)

Name (first, MI, last):		RACF ID:	Effective date:
Branch/unit name:		Position/title:	
Email address:	Phone:	Extension:	OR number:
Work address (include floor/suite number when applicable):	City:	State: OR	ZIP:

Non-DHS user information (users who have P numbers)

Name (first, MI, last):		RACF ID:	Effective date:
Access Agreement (AA) number:		Position/title:	
Email address:	Phone:	Extension:	Partner ID number:
Work address:	City:	State: OR	ZIP:

Manager information

Name (first, MI, last):	Phone:	Extension:	Date submitted:
Branch/unit name:	Position/title: Manager		
Email address:	Manager's signature:		

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- Select a branch, then scroll down to page 12.
- Select the 'Add' IE/ME Super Users Override box.

Name: RACF:

Add	Delete	User group	Specialized field and Central Office roles: Additional programs
☐	☐	SAVE	Permits the user to be set up as a regular user in the SAVE program.
☐	☐	The Work Number (TWN)	Permits the user to be set up as a regular user in the TWN program.
☐	☐	Asset Verification Service	Permits the user to be set up with a role in AVS.
☐	☐	*Click here to describe other restricted program access authorization*	

Additional restricted Oregon Access security groups

The following user groups are limited and need additional authorization. **These rights cannot be added or deleted by the local sub-administrator. For rights to the following groups, the manager will need to fill out the first page and this section of this form and fax or e-mail both to: APD Chief Data Steward at 503-947-5357, or at** apd.security-requests@state.or.us.

Statewide CAPS 2 Update, CAPS 2 Update APS type, OAA/OPI General Update and XIX Provider Mainframe rights have same conflict as branch level rights by the same name.

Add	Del	User Group Oregon Access	Add	Del	User Group Oregon Access
☐	☐	Help Desk Application Experts	☐	☐	SW: General Update
☐	☐	IE/ME Super Users Override	☐	☐	SW: Help Desk Application Expert
☐	☐	RAIN File Upload	☐	☐	SW: Home Care Commission
☐	☐	RAIN Provider Batch	☐	☐	SW: Maintain 595 Rates
☐	☐	SW: APS Read Only	☐	☐	SW: Medicaid General Update
☐	☐	SW: APS Update	☐	☐	SW: OA Only Data Provider Update
☐	☐	SW: CA/PS General Read + APS	☐	☐	SW: OAA Provider Maintain
☐	☐	SW: CAPS 2 HR Exception T3	☐	☐	SW: OAA/OPI General Update
☐	☐	SW: CAPS 2 Data Integrity	☐	☐	SW: OMAP Request
☐	☐	SW: CAPS 2 General Read + APS	☐	☐	SW: Provider Inquiry
☐	☐	SW: CAPS 2 General Update	☐	☐	SW: Provider Inquiry and Financial
☐	☐	SW: CAPS 2 Update APS Type	☐	☐	SW: QA Assessment Update
☐	☐	SW: CAPS 2 Update QA Type	☐	☐	SW: RAIN Administration
☐	☐	SW: 723 Web App	☐	☐	SW: Registry Inquiry
☐	☐	SW: Clear Remote Devices	☐	☐	SW: Screening Update
☐	☐	SW: Delete Case	☐	☐	SW: Service Update
☐	☐	SW: EI Update Group	☐	☐	SW: XIX Provider Maintain

Additional instructions:

Additional Restricted Program Access Authorization

These rights cannot be added or deleted by the local sub-administrator. For rights to the following groups, the manager will need to fill out the first page and this section of this form and fax both to: APD Chief Data Steward at 503-947-5357, or via e-mail at apd.security-requests@state.or.us.

- Complete the form as you normally would.

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Name: RACF:

General APD mainframe user groups
None selected.

High level APD mainframe user groups
None selected.

APD Oregon Access (OA) security groups   ☐ No Oregon Access rights needed
None selected.

Statewide roles for Oregon Access only
None selected.

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Add	Del	User Group Oregon Access	Add	Del	User Group Oregon Access
☒	☐	IE/ME Super Users Override	☐	☐	SW: Help Desk Application Expert

Additional Restricted Program Access Authorization
None selected.
ASPEN   ☒ No ASPEN rights needed
None selected.

Signature (*All requests must be approved by user's manager*)		
Manager (*print name*):	Phone:	Ext:
Signature:	Date:	
Additional instructions:		

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Name: RACF:

Annual IUP/ISAA review

Subsequent reviews must be identified after initial access is granted.

At a minimum the assignment of IUP computer access will be revisited annually to ensure accuracy. As employees change positions or work assignments and managers, review computer system access to ensure that appropriate access is maintained or revoked. When necessary complete a new IUP. If for some reason the user's rights are removed by the system, you the manager will be asked for this review page showing that the review of the user's rights has been completed. If your reviews have not been completed a new IUP will be required. Every five (5) years, regardless of annual reviews, a new IUP will be required.

Annual ISP/ISAA review signatures:		
Print name:	Signature:	Date:
Comments:		
Print name:	Signature:	Date:
Comments:		
Print name:	Signature:	Date:
Comments:		
Print name:	Signature:	Date:
Comments:		

You can get this document in other languages, large print, braille or a format you prefer. Contact the Office of Developmental Disabilities Services (ODDS) at 503-945-5600. We accept all relay calls or you can dial 711.

Submission

Step 1: Save a copy for your records
Step 2: Hide all non-applicable sections
Step 3: Submit by email
Optional: Show all non-applicable sections again, if desired

- Select Step 2 on the last page to Hide all non-applicable sections.
- Save a copy for yourself.
- Submit by email. The email will open, already addressed to APD Security. If the manager needs to submit it directly instead of signing the form, then take out the APD security email box and put in the managers email and then they can forward it directly to APD Security.

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Field/stakeholder review: ☐ Yes ☐ No

       If yes, reviewed by:

If you have any questions about this action request, contact:

Contact(s): OIS Service Desk	
Phone: 503-945-5623	Fax: N/A
Email: OIS.ServiceDesk@dhsoha.state.or.us	