

Employment First

How To Enroll as a Personal Support Worker Job Coach

Version 8.0
Updated 07/26/21



NEXT



Welcome

The Oregon Department of Human Services Office of Developmental Disabilities Services appreciates your interest in becoming a Personal Support Worker (PSW) Job Coach.

This tool will help you become an enrolled Medicaid service provider.

Although there are many slides in this presentation, you'll be guided to only those that are pertinent to your specific situation by answering a series of questions or selecting from a menu of options.

NEXT



How To Navigate

Everything you need to get started is here - by answering questions or selecting choices, we will take you to what you need to provide job coaching.

We'll guide you step-by-step, and you'll be able to skip over instructions for things you already know how to do.

Click Next to continue.....



How To Fill Out Forms

* Indicate Action: <input checked="" type="checkbox"/> Add User <input type="checkbox"/> Modify User <input type="checkbox"/> Deactivate User <input type="checkbox"/> Change of Info	
* User's Name: (Last, First MI) (Print Name) Doe, John X.	Already have an eXPRS login name? N/A
* Job Title (* check one): <input checked="" type="checkbox"/> Personal Support Worker <input type="checkbox"/> Behavior Consultant	* Provider Number(s) (SPD or eXPRS): UI12345678
* Address: (Mailing Address) 1234 AnyStreet	* City, State, Zip: AnyTown, OR 97000
* Phone Number: (503) 000-0000	* Email Address: (must be your unique email address; it cannot be shared with another eXPRS user) john.doe@email.com

We'll help you complete the necessary forms using filled out examples like this one.

You'll see example entries in **red**, but you'll enter your specific information instead.

Don't leave anything blank – enter "N/A" if it doesn't apply to you.


NEXT

What does a PSW Job Coach do?

- Job Coaches help people with intellectual/developmental disabilities (I/DD) learn their new job. If needed, job coaches provide additional support.
- The next slide will outline all the steps you'll need to complete in order to deliver ODDS-funded job coaching. It may look like a lot to do, but don't worry - we'll walk you through it step-by-step.



PSW Job Coach Checklist

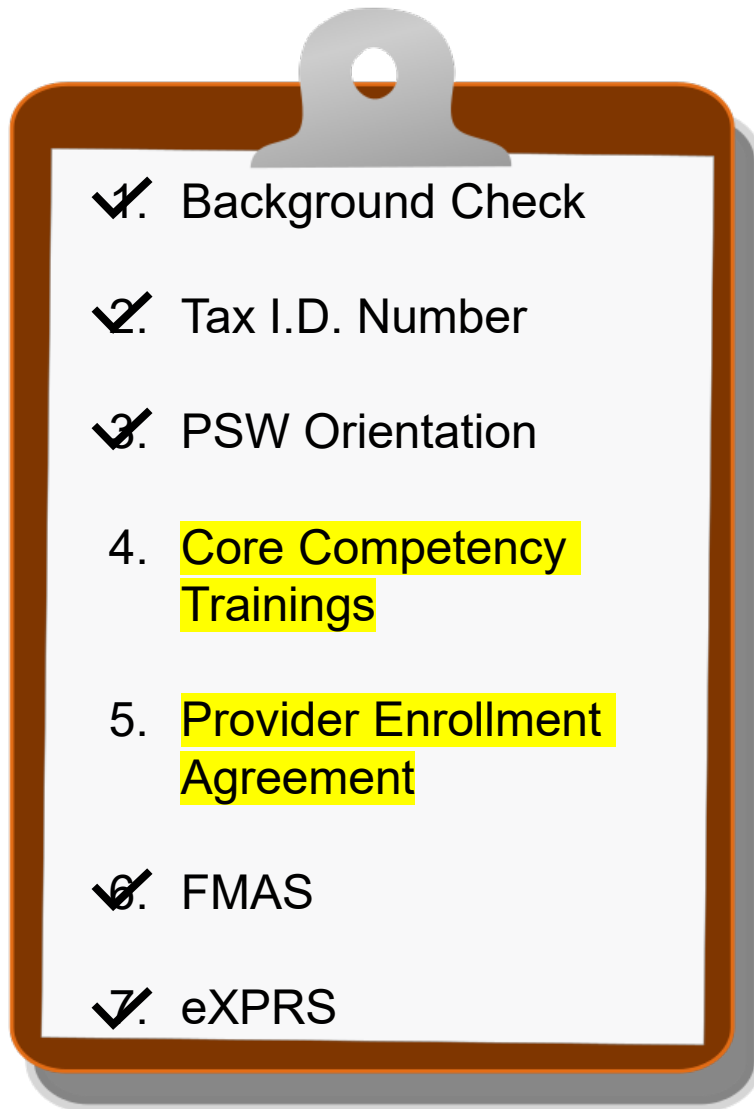
- 
1. Background Check
 2. Tax I.D. Number
 3. Core Competency Trainings
 4. PSW Orientation
 5. Provider Enrollment Agreement
 6. FMAS
 7. eXPRS

Are you currently enrolled as a PSW?

YES

NO

PSW-Job Coach Checklist



Good News!

As a currently enrolled PSW you only need to meet the Core Competency Training requirement and submit an updated Provider Enrollment Agreement to receive the Job Coach endorsement.

Let's work on the Core Competency Trainings next.

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Background Check

DHS requires that all service providers undergo a background check in order to protect the people we serve.

To initiate the background check process, you'll need to schedule an appointment with the Community Developmental Disabilities Program (CDDP) or Brokerage in the area where you wish to provide Job Coaching services to discuss becoming a supported employment service provider. They will initiate the background check process and help you complete the background check application.

Click on this link for a [list of CDDPs](#)

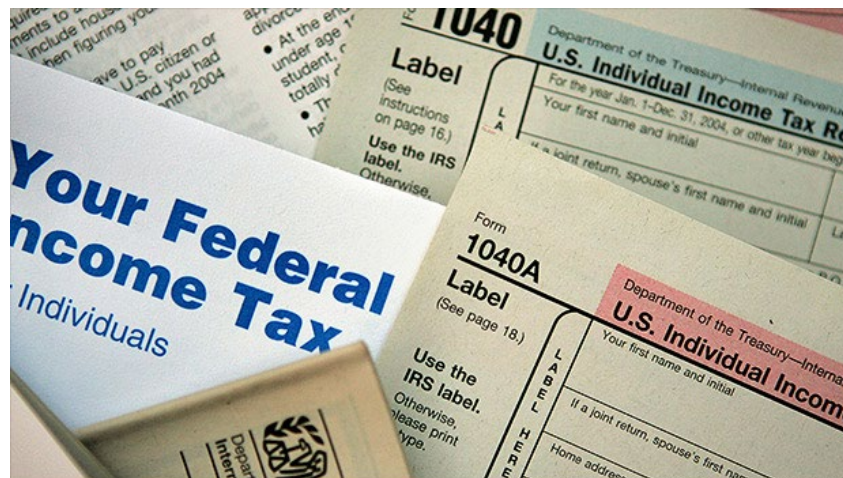
Click on this link for a [list of Brokerages](#)



Tax Identification Number

You will need your Federal Tax Identification number during the enrollment process. In most cases, this will be your Social Security number. If you have an Employer Identification number, you can use that.

Do you already have a Social Security number or Employer Identification number?



YES

NO

How to Apply for Federal Tax I.D. Numbers

Information about how to apply for a Social Security Number can be found here: <https://www.ssa.gov/forms/ss-5.pdf>

Information about how to apply for an Employer Identification Number can be found here:

<https://www.irs.gov/businesses/small-businesses-self-employed/apply-for-an-employer-identification-number-ein-online>

NOTE: You'll need either a Social Security Number **OR** an Employer Identification Number, **NOT BOTH**

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Core Competency Trainings

Prior to providing job coaching services, you must pass twelve free [Core Competency Trainings](#).

Altogether it will take you about eight hours to complete all twelve modules which cover a variety of employment topics. While you must take and pass all twelve before providing services, you do not need to take them all at once.

The Core Competency Trainings are only available online through the Workday Learning training website.

Are you already registered in Workday Learning?

[YES](#)

[NO](#)

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Workday Learning – How To Register

A comprehensive step-by-step guide on how to register for a Workday Learning account is available at this link:

[Workday Learning \(oregon.gov\)](https://workdaylearning.oregon.gov)

Workday Learning

A Guide for ODDS Partners



Workday Learning – Core Competencies - 1

Welcome, Tim Acker [E]

Announcements
1 item

Applications
3 items

Inbox
0 items

Go to Inbox

Learning
Helpful Links
Favorites

Log into your Workday Learning account. Click on the “Learning” application icon.

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Workday Learning – Core Competencies - 2

The screenshot shows the Workday Learning interface. At the top, there is a search bar and navigation icons. The main content area is divided into several sections: 'My Enrolled and Waitlisted Offerings', 'Recently Added' (with three course cards), 'Based on Your Interests', and 'Learning Paths'. On the right side, there is a vertical navigation menu with the following items: 'Learn', 'Drop Learning Enrollment', 'My Library', 'Preferences', 'Progress', 'In Progress', 'Not Started', 'Waitlisted', 'Learning History', 'My Transcript', and 'My Learning Certificate'. The 'Learn' item is circled in red, and a red arrow points to it from the right.

Click on the “Browse Learning Content” option

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Workday Learning – Core Competencies - 3

The screenshot shows the Workday Learning interface. At the top, there is a search bar with the text 'ODHS-DD-EP' entered, circled in red with a '1' next to it. To the right of the search bar is a 'Search' button, also circled in red with a '2' next to it and a red arrow pointing to it. Below the search bar, there are four search results listed. The second result, 'ODHS - DD - EP 102 Discovery and Career Planning', is circled in red with a '3' next to it. On the left side of the interface, there are filters for 'Current Search', 'Topic', 'Delivery Mode', 'Access Type', and 'Type'. The 'Topic' filter is expanded, showing 'Technical Skills (12)', 'ODDS (Developmental Disab... (12)', and 'Certifications and Continuin... (12)'. The 'Delivery Mode' filter is also expanded, showing 'Self-Directed (12)'. The 'Access Type' and 'Type' filters are collapsed.

1. Type “ODHS-DD-EP” in the Search box
2. Click on “Search”
3. The Core Competency courses will populate the center window
4. Scroll and click on the course you want to take

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Workday Learning – Core Competencies - 4

The screenshot shows the Workday Learning interface for the course "ODHS - DD - EP 101 Introduction to Supported Employment". The course title is prominently displayed at the top. Below it, the description reads "Employment Professional Core Competency 101 - Introduction to Supported Employment." The interface is divided into two main sections: "Lessons in This Course" and "Additional Course Details".

The "Lessons in This Course" section shows a table with one lesson listed:

Lesson ID	Lesson Title	Media	Completed
1	Core Comp: Introduction to Supported Employment	Media	0/1

The "Additional Course Details" section on the right provides more information about the course:

- Start Course:** A blue button with a play icon, circled in red with an arrow pointing to it.
- Duration:** 60 minutes
- Lessons:** 1
- Delivery Mode:** Self-Directed
- CONTACTS:** Eugene Rada (Contact Person)
- Save:** A bookmark icon.

Click on “Start Course” to begin the course content

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Workday Learning – Get Your Transcript - 1

The screenshot shows the Workday Learning interface. At the top, there is a search bar and navigation icons. The main content area is titled 'Learning' and contains several sections: 'My Enrolled and Waitlisted Offerings', 'Recently Added' (with three course cards), 'Based on Your Interests', and 'Learning Paths'. On the right side, there is a vertical menu with categories: 'Learn', 'Progress', and 'Learning History'. Under 'Learning History', the 'My Transcript' option is circled in red, and a red arrow points to it from the right.

Log into your Workday Learning account and click on the Learning application. Click on “My Transcript”

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Workday Learning – Get Your Transcript - 2



Q Search



My Transcript



Turn on the new tables view

Not Started 0 items



Name	Content Type	Registration Status	Date Enrolled	Completion Status	Attendance Status	Grade	Score	Record Type
No Data								

Turn on the new tables view

In Progress 0 items



Name	Content Type	Registration Status	Date Enrolled	Completion Status	Attendance Status	Grade	Score	Record Type
No Data								

Turn on the new tables view

Learning History 1 item



Name	Content Type	Registration Status	Date Enrolled	Completion Status	Completion Date and Time	Attendance Status	Grade	Score	Record Type
ODHS – HR – Interview Panelist Training	Digital Course	Enrolled	06/23/2021	Completed	06/23/2021 09:51:41 AM	Do Not Track		0	Enrollment

[Learning Home](#)

You can download your transcript to Excel or Acrobat to save or print it.



Workday Learning – How To Log Out



Search



My Transcript

Not Started 0 items


Name	Content Type	Registration Status	Date Enrolled	Completion Status	Attendance Status	Grade
No Data						

In Progress 0 items

Name	Content Type	Registration Status	Date Enrolled	Completion Status	Attendance Status	Grade
No Data						

Learning History 1 item

Name	Content Type	Registration Status	Date Enrolled	Completion Status	Completion Date and Time	Attendance Status	Grade	Score	Record Type
ODHS – HR – Interview Panelist Training	Digital Course	Enrolled	06/23/2021	Completed	06/23/2021 09:51:41 AM	Do Not Track		0	Enrollment



Timothy Acker
View Profile

- Home
- My Account >
- Favorites
- Drive
- My Reports
- Help & Settings

Sign Out

Turn on the new tables view



Learning Home

1. Click on the cloud icon in the upper right corner to reveal the dropdown menu.
2. Click on “Sign Out.”

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Workday Learning – More Information

See the latest Oregon Department of Human Services [COVID-19 Information and Resources](#) and [2020 Wildfire Information and Resources](#).

[Oregon Department of Human Services / Seniors & People with Disabilities / Intellectual and Developmental Disabilities / Developmental Disabilities Provider and Partner Resources](#)

iLearn to Workday Learning Transition

► DD PROVIDER AND PARTNER RESOURCES

ELECTRONIC VISIT VERIFICATION PROJECT

ODDS ENGAGEMENT AND INNOVATION

DD FOSTER CARE PROVIDER RESOURCES

DD HCBS RESOURCES

BEHAVIOR PROFESSIONAL RESOURCES

☐ CERTIFICATION, ENDORSEMENT & LICENSING

PERSONAL SUPPORT WORKER

Information for Developmental Disabilities Providers, Case Management Entities and Partners

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Background: The Department of Administrative Services (DAS) is transitioning from iLearn Oregon to Workday Learning, with an anticipated date of June 2021.

This means that all future trainings required by the Office of Developmental Disabilities Services (ODDS) and the Oregon Department of Human Services (ODHS), including core competencies, will be on the Workday Learning platform instead of iLearn.

Course credits recorded in iLearnOregon for providers and their staff are going away in June 2021. Workday Learning will replace iLearn as the tool the State uses to deliver training and maintain transcripts and credits. When this happens, the accounts of all non-State workers (called "Partners") will not be moved to Workday Learning.

Visit the [iLearn Transition to Workday page](#) to learn more.

Additional information about Workday Learning can be found at: [State of Oregon: Developmental Disabilities Provider and Partner Resources - iLearn to Workday Learning Transition](#)



Workday Learning – Core Competencies - 1

Welcome, Tim Acker [E]

Announcements
1 item

Applications
3 items

Inbox
0 items

LEARNING
LEARNING LEARNING

Welcome to learning in Workday Oregon!
We are happy to announce iLearnOregon has been retired as the state's learning Management system, we are

Learning Helpful Links Favorites

Log into your Workday Learning account. Click on the “Learning” application icon.

Go to Inbox

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Workday Learning – Core Competencies - 2

The screenshot displays the Workday Learning dashboard. At the top, there is a search bar and navigation icons. The main content area is divided into several sections: 'My Enrolled and Waitlisted Offerings', 'Recently Added' (featuring three course cards), 'Based on Your Interests', and 'Learning Paths'. On the right side, there is a vertical navigation menu with the following items: 'Learn', 'Drop Learning Enrollment', 'My Library', 'Preferences', 'Progress', 'Learning History', 'My Transcript', and 'My Learning Certificate'. The 'Learn' section is expanded, and the 'Browse Learning Content' option is circled in red, with a red arrow pointing to it from the right.

Click on the “Browse Learning Content” option

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Workday Learning – Core Competencies - 3

The screenshot shows the Workday Learning interface. At the top, there is a search bar with the text "ODHS-DD-EP" entered. A red circle labeled "1" is around the search input. To the right of the search bar is a "Search" button, with a red circle labeled "2" around it and a red arrow pointing to it. Below the search bar, there is a "Current Search" section with a "Save" button and a "Clear All" button. On the left, there are filters for "Topic", "Delivery Mode", "Access Type", and "Type". The main content area displays a list of search results. The first result is "ODHS - DD - EP 101 Introduction to Supported Employment" with a duration of 60 minutes and 34 enrolled. The second result is "ODHS - DD - EP 102 Discovery and Career Planning" with a duration of 90 minutes and 30 enrolled. A red circle labeled "3" is around the second result. The third result is "ODHS - DD - EP 103 Marketing and Job Development" with a duration of 30 minutes and 23 enrolled. The fourth result is "ODHS - DD - EP 104 Workplace and Job Analysis" with a duration of 30 minutes and 23 enrolled.

1. Type “ODHS-DD-EP” in the Search box
2. Click on “Search”
3. The Core Competency courses will populate the center window
4. Scroll and click on the course you want to take

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Workday Learning – Core Competencies - 4

The screenshot shows the Workday Learning interface for the course "ODHS - DD - EP 101 Introduction to Supported Employment". The course title is prominently displayed at the top. Below it, the description reads "Employment Professional Core Competency 101 - Introduction to Supported Employment." The interface includes a search bar at the top left and navigation icons at the top right. The main content area is divided into two sections: "Lessons in This Course" and "Additional Course Details". The "Lessons in This Course" section shows a single lesson titled "Core Comp: Introduction to Supported Employment" with a "Media" icon. The "Additional Course Details" section provides information about the course, including a "Start Course" button, which is circled in red with an arrow pointing to it. Other details include a duration of 60 minutes, 1 lesson, and a self-directed delivery mode. The contact person is listed as Eugene Rada.

ODHS - DD - EP 101 Introduction to Supported Employment

Employment Professional Core Competency 101 - Introduction to Supported Employment.

Lessons in This Course Additional Course Details

Lessons in This Course Completed 0/1

1 Core Comp: Introduction to Supported Employment Media

Start Course

Duration 60 minutes Lessons 1

Delivery Mode Self-Directed

CONTACTS

[Eugene Rada](#)
Contact Person

Save

Click on “Start Course” to begin the course content



Workday Learning – Get Your Transcript - 1

The screenshot displays the Workday Learning interface. At the top, there is a search bar and navigation icons. The main content area is titled 'Learning' and contains several sections: 'My Enrolled and Waitlisted Offerings', 'Recently Added' (with course cards like 'College of Employment Services Supported'), 'Based on Your Interests', and 'Learning Paths'. On the right side, there is a vertical menu with categories: 'Learn', 'Progress', and 'Learning History'. Under 'Learning History', the 'My Transcript' option is circled in red, with a red arrow pointing to it from the right.

Log into your Workday Learning account and click on the Learning application. Click on “My Transcript”

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Workday Learning – Get Your Transcript - 2



Q Search



My Transcript



Turn on the new tables view

Not Started 0 items



Name	Content Type	Registration Status	Date Enrolled	Completion Status	Attendance Status	Grade	Score	Record Type
No Data								

Turn on the new tables view

In Progress 0 items



Name	Content Type	Registration Status	Date Enrolled	Completion Status	Attendance Status	Grade	Score	Record Type
No Data								

Turn on the new tables view

Learning History 1 item



Name	Content Type	Registration Status	Date Enrolled	Completion Status	Completion Date and Time	Attendance Status	Grade	Score	Record Type
ODHS – HR – Interview Panelist Training	Digital Course	Enrolled	06/23/2021	Completed	06/23/2021 09:51:41 AM	Do Not Track		0	Enrollment

[Learning Home](#)

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Workday Learning – How To Log Out



Search



My Transcript

Not Started 0 items


Name	Content Type	Registration Status	Date Enrolled	Completion Status	Attendance Status	Grade
No Data						

In Progress 0 items

Name	Content Type	Registration Status	Date Enrolled	Completion Status	Attendance Status	Grade
No Data						

Learning History 1 item

Name	Content Type	Registration Status	Date Enrolled	Completion Status	Completion Date and Time	Attendance Status	Grade	Score	Record Type
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Timothy Acker
View Profile

- Home
- My Account >
- Favorites
- Drive
- My Reports
- Help & Settings

Sign Out

Turn on the new tables view



Learning Home

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[Oregon Department of Human Services](#) / [Seniors & People with Disabilities](#) / [Intellectual and Developmental Disabilities](#) / [Developmental Disabilities Provider and Partner Resources](#)

iLearn to Workday Learning Transition

DD PROVIDER AND PARTNER RESOURCES

ELECTRONIC VISIT VERIFICATION PROJECT

ODDS ENGAGEMENT AND INNOVATION

DD FOSTER CARE PROVIDER RESOURCES

DD HCBS RESOURCES

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CERTIFICATION, ENDORSEMENT & LICENSING

PERSONAL SUPPORT WORKER

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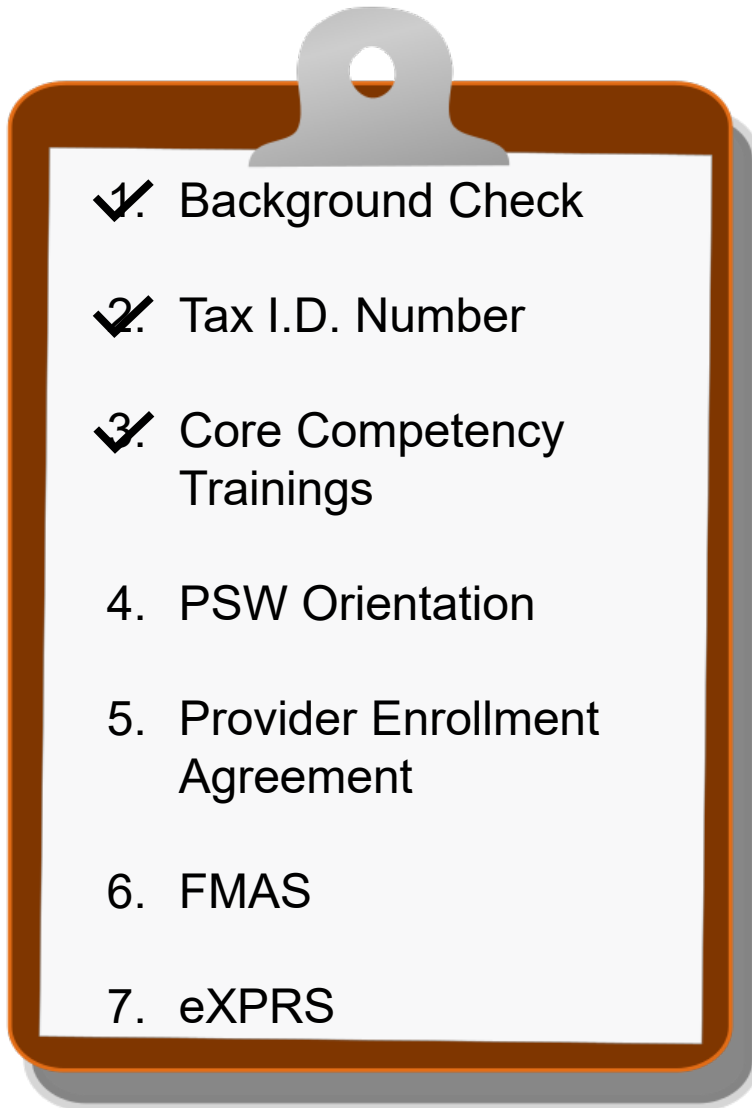
Visit the [iLearn Transition to Workday page](#) to learn more.

Additional information about Workday Learning can be found at: [State of Oregon: Developmental Disabilities Provider and Partner Resources - iLearn to Workday Learning Transition](#)

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PSW-Job Coach Checklist



Good progress!

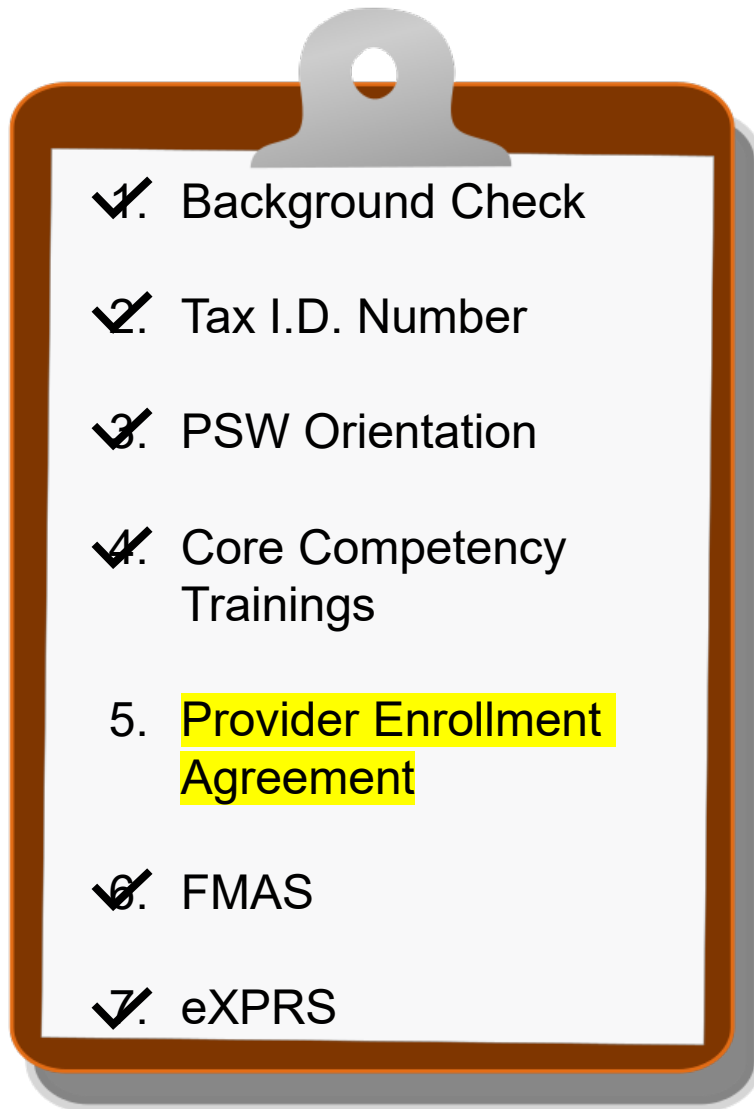
You've got your background check underway, your Core Comps done, and your tax I.D. number on its way if you don't already have one.

Let's work on the PSW Orientation and Provider Enrollment Agreement next.

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PSW Job Coach Checklist



Almost there!

Now that you've satisfied the Core Competency Training requirement the only thing left is to submit an updated Provider Enrollment Agreement to receive the PSW Job Coach endorsement.

Let's work on the Enrollment Agreement next.

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Background Check

DHS requires that all service providers undergo a background check in order to protect the people we serve.

Schedule an appointment with the Community Developmental Disabilities Program (CDDP) or Brokerage in the area you wish to provide PSW job coaching services. They will assist you with the background check process and help you complete the background check application.

Click on this link for a [list of CDDPs](#)

Click on this link for a [list of Brokerages](#)



Tax Identification Number

Several of the listed requirements will need you to provide your Federal tax I.D. number. In most case this will be your Social Security number; you may also use your Employer Identification number if you have one.

Do you already have a Social Security number or Employer Identification number?



YES

NO

How to Apply for Federal Tax Identification Numbers

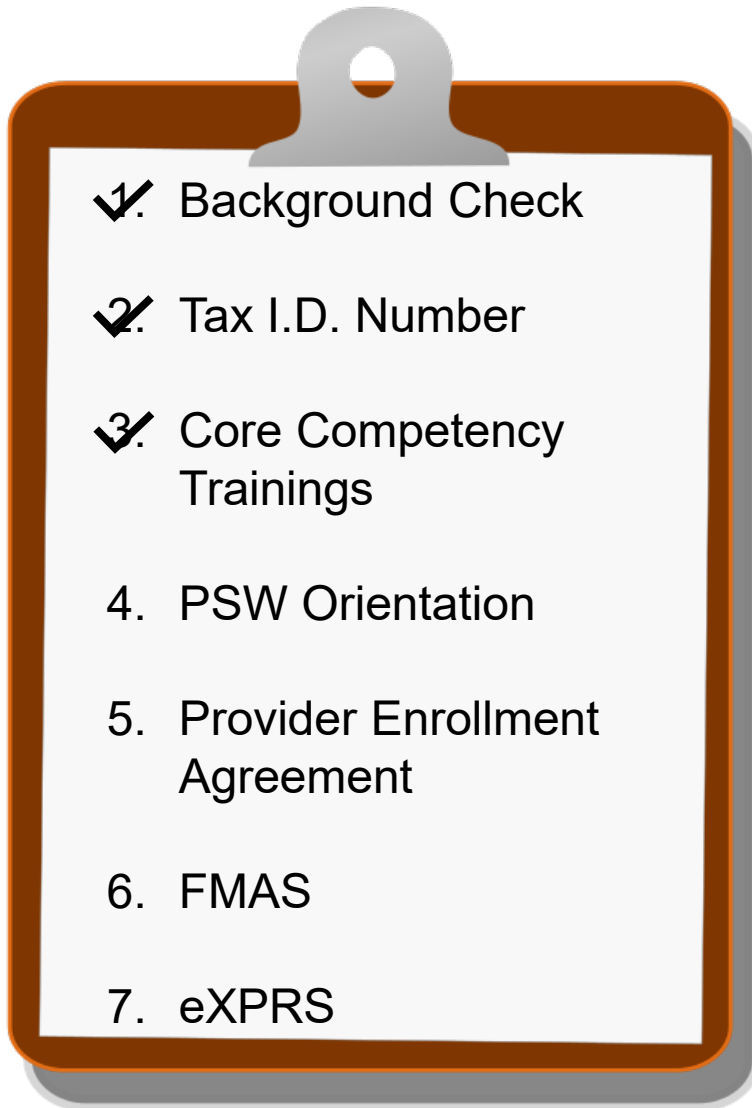
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<https://www.irs.gov/businesses/small-businesses-self-employed/apply-for-an-employer-identification-number-ein-online>

NOTE: You'll need either a Social Security Number OR an Employer Identification Number, **NOT BOTH**



PSW Job Coach Checklist



Almost there!

You've got your background check underway, your Core Competencies done, and your tax I.D. number on its way if you don't already have one.

Let's work on the PSW Orientation and Provider Enrollment Agreement next.

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New PSW Orientation

All new PSWs are required to complete PSW and eXPRS Orientation within 90 days of receiving their provider number from ODDS.

PSW Orientation is available both online and in-person.
eXPRS Orientation is in-person only.



Core Competency Trainings

To provide job coaching services, you must pass twelve free [Core Competency Trainings](#).

Altogether, it will take you about eight hours to complete all twelve modules which cover a variety of employment topics. While you must take and pass all twelve before providing services, you do not need to take them all at once.

The Core Competency Trainings are only available online through the Workday Learning state training website.

Are you already registered in Workday Learning?

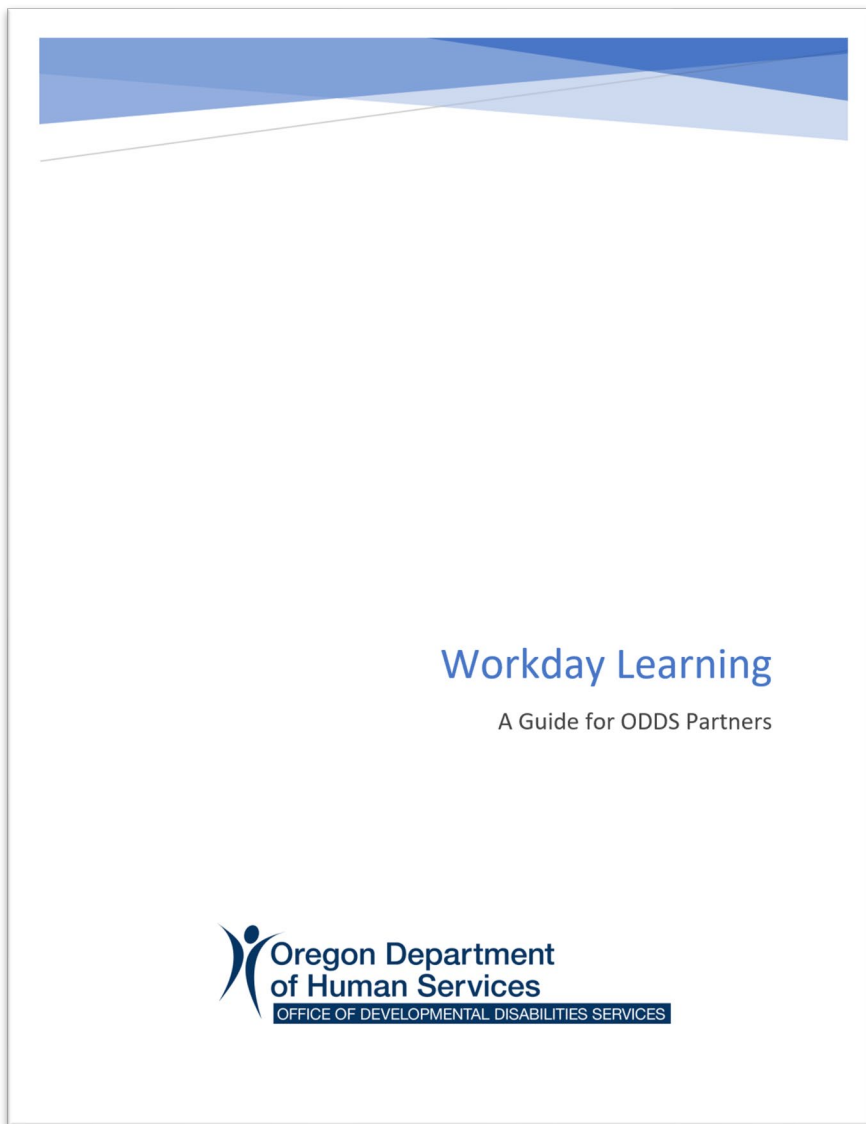
[YES](#)

[NO](#)

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Workday Learning – Core Competencies - 1



Search



Welcome, Tim Acker [E]



Announcements

1 item



Welcome to learning in Workday Oregon!
We are happy to announce iLearnOregon has been retired as the state's learning Management system, we are



Applications

3 items



Learning



Helpful Links



Favorites



Inbox

0 items



[Go to Inbox](#)

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Workday Learning – Core Competencies - 2

The screenshot displays the Workday Learning dashboard. At the top, there is a search bar and navigation icons. The main content area is divided into several sections: 'My Enrolled and Waitlisted Offerings', 'Recently Added' (featuring three course cards: 'College of Employment Services Supported', 'ODHS - APD - APS: When Injuries Speak: Forensic', and 'ODHS - DD - CES Usin Incentives To Increase'), 'Based on Your Interests', and 'Learning Paths' (with a 'Create Learning Path' button). On the right side, there is a vertical navigation menu with the following options: 'Learn', 'Drop Learning Enrollment', 'My Library', 'Preferences', 'Progress', 'In Progress', 'Not Started', 'Waitlisted', 'Learning History', 'My Transcript', and 'My Learning Certificate'. The 'Learn' option is highlighted with a red circle, and a red arrow points to it from the right.

Click on the “Browse Learning Content” option

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Workday Learning – Core Competencies - 3

The screenshot shows the Workday Learning interface. At the top, there is a search bar with the text 'ODHS-DD-EP' entered, circled in red with a '1' next to it. To the right of the search bar is a 'Search' button, also circled in red with a '2' next to it and a red arrow pointing to it. Below the search bar, there is a 'Current Search' section with a 'Save' button and a 'Clear All' button. On the left side, there are filter categories: 'Topic', 'Delivery Mode', 'Access Type', and 'Type'. The main content area displays a list of search results for 'ODHS-DD-EP' courses. The first result is 'ODHS - DD - EP 101 Introduction to Supported Employment', the second is 'ODHS - DD - EP 102 Discovery and Career Planning', the third is 'ODHS - DD - EP 103 Marketing and Job Development', and the fourth is 'ODHS - DD - EP 104 Workplace and Job Analysis'. The second result is circled in red with a '3' next to it.

1. Type “ODHS-DD-EP” in the Search box
2. Click on “Search”
3. The Core Competency courses will populate the center window
4. Scroll and click on the course you want to take

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Workday Learning – Core Competencies - 4

The screenshot shows the Workday Learning interface for the course "ODHS - DD - EP 101 Introduction to Supported Employment". The course description is "Employment Professional Core Competency 101 - Introduction to Supported Employment." The interface includes a search bar, navigation icons, and a course details panel. The "Start Course" button is highlighted with a red circle and an arrow.

ODHS - DD - EP 101 Introduction to Supported Employment
Employment Professional Core Competency 101 - Introduction to Supported Employment.

[Lessons in This Course](#) [Additional Course Details](#)

Lessons in This Course Completed 0/1

Lesson	Media
1 Core Comp: Introduction to Supported Employment	Media

Start Course

Duration: 60 minutes
Lessons: 1
Delivery Mode: Self-Directed

CONTACTS
 [Eugene Rada](#)
Contact Person

[Save](#)

Click on “Start Course” to begin the course content



Workday Learning – Get Your Transcript - 1

The screenshot shows the Workday Learning interface. At the top, there is a search bar and navigation icons. The main content area is titled 'Learning' and contains several sections: 'My Enrolled and Waitlisted Offerings', 'Recently Added' (with three course cards), 'Based on Your Interests', and 'Learning Paths'. On the right side, there is a sidebar menu with categories: 'Learn', 'Progress', and 'Learning History'. Under 'Learning History', the 'My Transcript' option is circled in red, and a red arrow points to it from the right.

Log into your Workday Learning account and click on the Learning application. Click on “My Transcript”

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Workday Learning – Get Your Transcript - 2



Search



My Transcript



Turn on the new tables view

Not Started 0 items



Name	Content Type	Registration Status	Date Enrolled	Completion Status	Attendance Status	Grade	Score	Record Type
No Data								

Turn on the new tables view

In Progress 0 items



Name	Content Type	Registration Status	Date Enrolled	Completion Status	Attendance Status	Grade	Score	Record Type
No Data								

Turn on the new tables view

Learning History 1 item



Name	Content Type	Registration Status	Date Enrolled	Completion Status	Completion Date and Time	Attendance Status	Grade	Score	Record Type
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[Learning Home](#)

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Workday Learning – How To Log Out



Search



My Transcript

Not Started 0 items


Name	Content Type	Registration Status	Date Enrolled	Completion Status	Attendance Status	Grade
No Data						

In Progress 0 items

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View Profile

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- Drive
- My Reports
- Help >

Sign Out

Turn on the new tables view



Learning Home

1. Click on the cloud icon in the upper right corner to reveal the dropdown menu.
2. Click on “Sign Out.”

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Workday Learning – More Information

See the latest Oregon Department of Human Services [COVID-19 Information and Resources](#) and [2020 Wildfire Information and Resources](#).

[Oregon Department of Human Services / Seniors & People with Disabilities / Intellectual and Developmental Disabilities / Developmental Disabilities Provider and Partner Resources](#)

iLearn to Workday Learning Transition

► DD PROVIDER AND PARTNER RESOURCES

ELECTRONIC VISIT VERIFICATION PROJECT

ODDS ENGAGEMENT AND INNOVATION

DD FOSTER CARE PROVIDER RESOURCES


DD HCBS RESOURCES

BEHAVIOR PROFESSIONAL RESOURCES

☰ CERTIFICATION, ENDORSEMENT & LICENSING

PERSONAL SUPPORT WORKER

Information for Developmental Disabilities Providers, Case Management Entities and Partners

 [Subscribe for email updates](#)

Background: The Department of Administrative Services (DAS) is transitioning from iLearn Oregon to Workday Learning, with an anticipated date of June 2021.

This means that all future trainings required by the Office of Developmental Disabilities Services (ODDS) and the Oregon Department of Human Services (ODHS), including core competencies, will be on the Workday Learning platform instead of iLearn.

Course credits recorded in iLearnOregon for providers and their staff are going away in June 2021. Workday Learning will replace iLearn as the tool the State uses to deliver training and maintain transcripts and credits. When this happens, the accounts of all non-State workers (called "Partners") will not be moved to Workday Learning.

Visit the [iLearn Transition to Workday page](#) to learn more.

Additional information about Workday Learning can be found at: [State of Oregon: Developmental Disabilities Provider and Partner Resources - iLearn to Workday Learning Transition](#)

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New PSW Provider Enrollment Agreement - 1



I/DD PERSONAL SUPPORT WORKERS ONLY

Print form

Clear form

Personal Support Worker (PSW) Provider Enrollment Application and Agreement (Revised 08/01/2018)

This Provider Enrollment Application and Agreement (*Agreement*), sets forth the conditions and agreements for being enrolled as a Medicaid Personal Support Worker (*Provider*) with the State of Oregon Department of Human Services (DHS), Office of Developmental Disabilities Services (ODDS), and to receive a Provider number to receive payment for services furnished by the Provider to approved Medicaid eligible individuals (*Recipients*) in Oregon. Payments for services are made using federal Medicaid and state funds.

Type of action requested

New enrollment Renewal or re-enrollment

Provider type requested (mark all that apply)

Note: All new and renewing providers will be enrolled as Personal Support Workers (84-803). Please only check those **additional** provider types which apply to your enrollment.

Legal name (first name, middle initial, last name **as listed on your current SSN card**):

- PSW Children Intensive In-Home Services (84-801)
- PSW State Plan Personal Care (84-800)
- PSW Employment Job Coach (84-809)*

*PSWs enrolling as a **Job Coach (84-809)** must have the appropriate training required in Oregon Administrative Rule (OAR) 411-345-0030 prior to enrollment and must submit training documentation with this application. Job Coach enrollment is good for two years only and must be renewed separately from this agreement.

Download the [PSW Provider Enrollment Agreement](#). It is a form-fillable Acrobat document, so you can fill it out on your computer and then print it out to submit.

The following is a filled-out example for you to follow.

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New PSW Provider Enrollment Agreement - 2

Select "New enrollment"

Type of action requested

New enrollment Renewal or re-enrollment

Provider type requested (*mark all that apply*)

Note: All new and renewing providers will be enrolled as Personal Support Workers (84-803). Please only check those **additional** provider types which apply to your enrollment.

Legal name (*first name, middle initial, last name as listed on your current SSN card*):

John X. Doe

PSW Children Intensive In-Home Services (84-801)

PSW State Plan Personal Care (84-800)

PSW Employment Job Coach (84-809)*

*PSWs enrolling as a **Job Coach (84-809)** must have the appropriate training required in Oregon Administrative Rule (OAR) 411-345-0030 prior to enrollment and must submit training documentation with this application. Job Coach enrollment is good for two years only and must be renewed separately from this agreement.

Enter your name

Select "PSW Employment Job Coach"

[NEXT](#)

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New PSW Provider Enrollment Agreement - 3

Provider Information (Required)

- Disclosure of Social Security Number **is required** pursuant to 41 USC 405(c)(2)(C)(i) to establish identification, 42 CFR 455.104 and 455.436 for exclusion verification and 26 CFR 301.6109-1 for the purpose of reporting tax information. DHS may report information to the Internal Revenue Service (IRS) and the Oregon Department of Revenue under the name and Social Security Number (SSN) provided below.

Do not leave any area of this section blank, failure to fully complete will result in the denial of your application. Put "N/A" for any area that is not applicable.

Street address: City: State:
ZIP code (+4): County:

Enter your address

Mailing address (if different from above):
City: State: ZIP code (+4):
County:

Enter your mailing address

Phone number: Email:
Date of birth: SSN:

Enter your phone number, email, birthday and social security number

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New PSW Provider Enrollment Agreement - 4

Check boxes as appropriate

Have you been convicted of a criminal offense related to your involvement in any program under Medicare, Medicaid or the Title XXI Services Program since the inception of those programs? Yes No

Have you been terminated or excluded from participation as a provider in Medicare or any state Medicaid or Children's Health Insurance Program (CHIP) program? Yes No

I do not have an existing Medicare, Medicaid, CHIP or Oregon DHS Provider Number
 I have an existing Medicare, Medicaid, CHIP or Oregon DHS Provider Number
(list below):

Submitting Agency Information (optional)

Type name and email of
CDDP/Brokerage you used for
the background check

AnyCounty CDDP

Submitting Brokerage/CDDP/CIIS
anycountycddp@anycounty.or.us

Submitting Brokerage/CDDP/CIIS contact email

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New PSW Provider Enrollment Agreement - 5

1. Print your name

8. Provider signature

I have read the forgoing Provider Enrollment Application and Agreement and the attached Exhibit A and any endorsement addendums, understand it and agree to abide by its terms and conditions. I further understand and agree that violation of any of the terms and conditions of this Agreement constitute grounds for termination of this Agreement and may be grounds for other sanctions as provided by statute, administrative rule, or this Agreement.

Print name of provider:

<i>John X. Doe</i>	01/01/2020
Signature of provider	Signature/Effective date

2. Print out the entire application & agreement form (11 pages)

3. Sign and date in the places indicated

POJ approved 6/1/2018

SDS 0734 (08/01/2018) Page 5 of 11

The Enrollment Application & Agreement packet contains a lot of information that you're going to need to read and understand.

THIS IS A CONTRACT! If anything isn't clear, contact the Provider Relations Unit at psw.enrollment@state.or.us



Existing PSW Provider Enrollment Agreement - 1



I/DD PERSONAL SUPPORT WORKERS ONLY

Print form

Clear form

Personal Support Worker (PSW) Provider Enrollment Application and Agreement (Revised 08/01/2018)

This Provider Enrollment Application and Agreement (*Agreement*), sets forth the conditions and agreements for being enrolled as a Medicaid Personal Support Worker (*Provider*) with the State of Oregon Department of Human Services (DHS), Office of Developmental Disabilities Services (ODDS), and to receive a Provider number to receive payment for services furnished by the Provider to approved Medicaid eligible individuals (*Recipients*) in Oregon. Payments for services are made using federal Medicaid and state funds.

Type of action requested

New enrollment Renewal or re-enrollment

Provider type requested (mark all that apply)

Note: All new and renewing providers will be enrolled as Personal Support Workers (84-803). Please only check those **additional** provider types which apply to your enrollment.

Legal name (first name, middle initial, last name **as listed on your current SSN card**):

- PSW Children Intensive In-Home Services (84-801)
- PSW State Plan Personal Care (84-800)
- PSW Employment Job Coach (84-809)*

*PSWs enrolling as a **Job Coach (84-809)** must have the appropriate training required in Oregon Administrative Rule (OAR) 411-345-0030 prior to enrollment and must submit training documentation with this application. Job Coach enrollment is good for two years only and must be renewed separately from this agreement.

Download the [PSW Provider Enrollment Agreement](#). It is a form-fillable Acrobat document, so you can fill it out on your computer and then print it out to submit. The following is a filled-out example for you to follow.

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Existing PSW Provider Enrollment Agreement - 2

Select "re-enrollment"

Type of action requested

New enrollment Renewal or re-enrollment

Re-enrollment **Type "Re-enrollment"**

Provider type requested (mark all that apply)

Note: All new and renewing providers will be enrolled as Personal Support Workers (84-803). Please only check those **additional** provider types which apply to your enrollment.

Legal name (first name, middle initial, last name **as listed on your current SSN card**):

John X. Doe **Type name (as shown on Social Security card)**

- PSW Children Intensive In-Home Services (84-801)
- PSW State Plan Personal Care (84-800)
- PSW Employment Job Coach (84-809)*

*PSWs enrolling as a **Job Coach (84-809)** must have the appropriate training required in Oregon Administrative Rule (OAR) 411-345-0030 prior to enrollment and must submit training documentation with this application. Job Coach enrollment is good for two years only and must be renewed separately from this agreement.

Select "PSW Employment Job Coach"



Existing PSW Provider Enrollment Agreement - 3

Provider Information (Required)

- Disclosure of Social Security Number **is required** pursuant to 41 USC 405(c)(2)(C)(i) to establish identification, 42 CFR 455.104 and 455.436 for exclusion verification and 26 CFR 301.6109-1 for the purpose of reporting tax information. DHS may report information to the Internal Revenue Service (IRS) and the Oregon Department of Revenue under the name and Social Security Number (SSN) provided below.

Do not leave any area of this section blank, failure to fully complete will result in the denial of your application. Put "N/A" for any area that is not applicable.

Street address: City: State:
ZIP code (+4): County:

Enter your address

Mailing address (if different from above):
City: State: ZIP code (+4):
County:

Enter your mailing address

Phone number: Email:
Date of birth: SSN:

Enter your phone number, email, birthday and social security number



Existing PSW Provider Enrollment Agreement - 4

Check boxes as appropriate

Have you been convicted of a criminal offense related to your involvement in any program under Medicare, Medicaid or the Title XXI Services Program since the inception of those programs? Yes No

Have you been terminated or excluded from participation as a provider in Medicare or any state Medicaid or Children's Health Insurance Program (CHIP) program? Yes No

I do not have an existing Medicare, Medicaid, CHIP or Oregon DHS Provider Number
 I have an existing Medicare, Medicaid, CHIP or Oregon DHS Provider Number
(list below):

UI12345678

Submitting Agency Information (optional)

N/A

Type "N/A"

Submitting Brokerage/CDDP/CIIS

N/A

Submitting Brokerage/CDDP/CIIS contact email

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Existing PSW Provider Enrollment Agreement - 5

8. Provider signature

I have read the forgoing Provider Enrollment Application and Agreement and the attached Exhibit A and any endorsement addendums, understand it and agree to abide by its terms and conditions. I further understand and agree that violation of any of the terms and conditions of this Agreement constitute grounds for termination of this Agreement and may be grounds for other sanctions as provided by statute, administrative rule, or this Agreement.

1. Print your name

Print name of provider:

Signature of provider

Signature/Effective date

2. Print out the entire application & agreement form (11 pages)

3. Sign and date in the places indicated

The Enrollment Application & Agreement packet contains a lot of information that you're going to need to read and understand.

THIS IS A CONTRACT! If anything isn't clear, contact the Provider Relations Unit at

psw.enrollment@dhsosha.state.or.us



Existing PSW Provider Enrollment Agreement - 6

You can file the completed document in one of several ways:

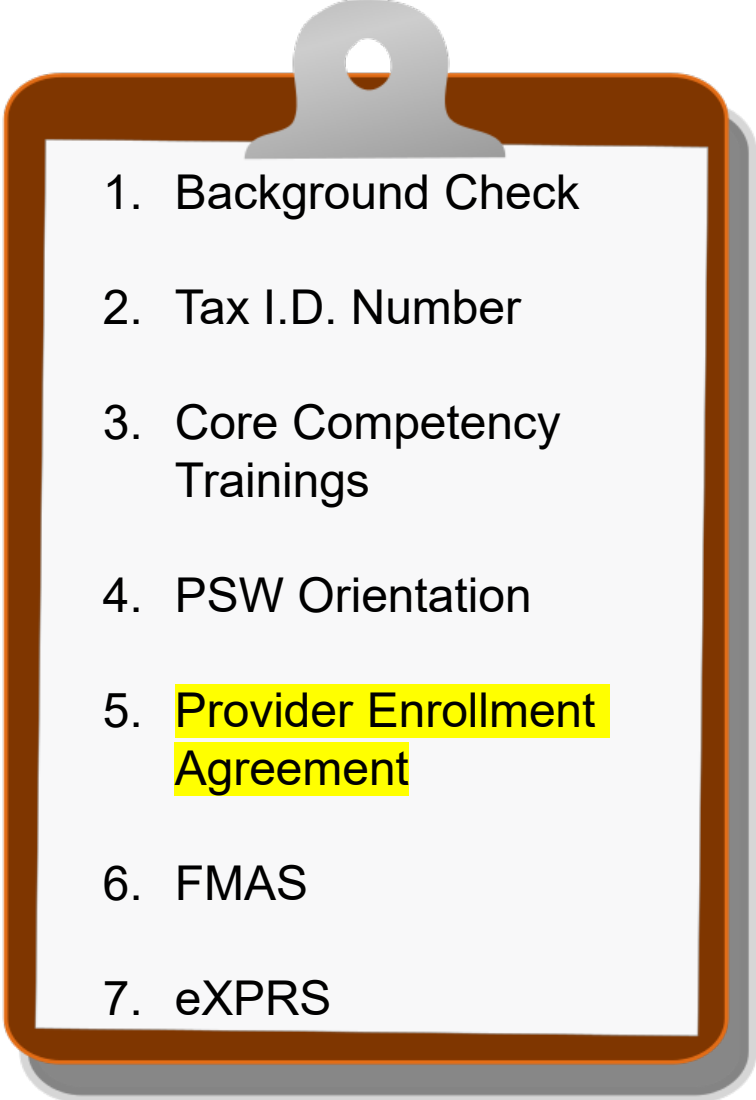
Scan & email to: psw.enrollment@dhsoha.state.or.us

Fax to: 503-947-5044

Mail to: Department of Human Services
ODDS Contracts & Provider Administration Unit
500 Summer St., NE E-09
Salem, OR 97301



What to Expect Next – Provider Enrollment Agreement

- 
1. Background Check
 2. Tax I.D. Number
 3. Core Competency Trainings
 4. PSW Orientation
 5. **Provider Enrollment Agreement**
 6. FMAS
 7. eXPRS

You'll receive an eXPRS-generated letter specifying the provider enrollment agreement's expiration date.



OR-FMAS (Oregon Financial Management Agent Services)

Home | Contact | Search BetterOnline™ Web Portal: [Sign Up](#) | [Login](#)

PUBLIC PARTNERSHIPS SERVICES ▾ MOBILE APPS ▾ PROGRAMS ABOUT ▾

Overview **Program Documents**

Public Partnerships provides financial management agent services for ODDS PSWs. This is an important part of how you will get paid.

Follow this link to get step-by-step help completing enrollment forms.

 [How to Complete Enrollment Forms](#)

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Who We Serve

- ✓ Adults with developmental disabilities
- ✓ Children with developmental disabilities



Services

- ✓ Payroll
- ✓ Employment tax requirements
- ✓ Enrollment Support
- ✓ Customer service

Public Partnerships is pleased to provide Financial Management Agent Services for the Individuals/Employers and Personal Support Workers who are a part of the Oregon Office of Developmental Disabilities Services (ODDS) OR FMAS program. Individuals/Employers enrolled in the OR FMAS program can recruit and hire a Personal Support Worker.

Public Partnerships helps Individuals/Employers and Personal Support Workers by:

- ✓ Helping individuals and employers enroll in OR FMAS using pre-filled forms.
- ✓ Helping Personal Support Workers enroll in OR FMAS using pre-filled forms.
- ✓ Processing payroll for Personal Support Workers
- ✓ Filing Employer related tax information

BetterOnline™ Web Portal Login

BetterOnline provides account-specific information, enrollment paperwork, timesheets, and real-time financial and service utilization reports to make sure you can be in control of your information 24/7

[Login](#)

Need to Verify your

eXPRS Enrollment for New PSW Job Coaches -1



Individual Provider – PSW or BC User Enrollment Form

Provider Types: 74-749, 83-710, 83-711, 84-800, 84-801, 84-803

INSTRUCTIONS: * Indicates required fields. Incomplete forms cannot be processed.

- Send completed form to info.exprs@state.or.us or fax to 503-947-5044.

If the form is complete and your provider record is active, your form should be processed within a week, but may take longer; please be patient.

Once your account has been created, you will receive two emails from info.exprs@state.or.us:

- The 1st email contains generic information and includes several attachments.
- The 2nd email will be secured, and includes your login name and temporary password. NOTE: Unless you already have one, you will have to set up an account with DHS' secure email system. If you need assistance with a secure email, please contact the DHS Service Desk at 503-945-5623 and choose option 3.

If you have not received an email within one week, please check your junk or spam folder. If it is not received within 10 days, please send an email to info.exprs@state.or.us to check on the status.

* Indicate Action: <input type="checkbox"/> Add User <input type="checkbox"/> Modify User <input type="checkbox"/> Deactivate User <input type="checkbox"/> Change of Info	
* User's Name: (Last, First MI) (Print Name)	Already have an eXPRS login name?
* Job Title (*check one): <input type="checkbox"/> Personal Support Worker <input type="checkbox"/> Behavior Consultant	* Provider Number(s) (SPD or eXPRS):
* Address: (Mailing Address)	* City, State, Zip:
* Phone Number:	* Email Address: (must be your unique email address; it cannot be shared with another eXPRS user)

Add	Del	User Role/Description
<input type="checkbox"/>	<input type="checkbox"/>	Provider PSW/IC/BC Claims Manager – able to <u>Create/Submit/View</u> Service Delivered (SD) billing entries; able to <u>Create/Submit/View</u> PSW Travel Time claims; able to view Service Prior Authorizations (SPAs), PSW credential information, claims and payment information; able to print PSW timesheets.

* Print Name	
* Signature:	* Date: / /

Keep a copy of this form for future reference.

Enroll Individual Provider User (PSW or BC) REFORMATTED (v4; 8-10-18)

eXPRS is the state's computer system that allows you to enter your invoices for authorized job coaching services and get paid.

Download the [eXPRS enrollment form for PSW's](#)

Print out the form (it cannot be filled out online), fill it out manually, scan it and attach it to an email or fax it.

The following are step-by-step instructions on how to fill out the form.

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eXPRS Enrollment for New PSW Job Coaches -2

Follow the example below by putting in your information. Note that the Provider Number is the number you received resulting from the Provider Enrollment process (slides 55-59).

* Indicate Action: <input checked="" type="checkbox"/> Add User <input type="checkbox"/> Modify User <input type="checkbox"/> Deactivate User <input type="checkbox"/> Change of Info	
* User's Name: (Last, First MI) (Print Name) Doe, John X.	Already have an eXPRS login name? N/A
* Job Title (*check one): <input checked="" type="checkbox"/> Personal Support Worker <input type="checkbox"/> Behavior Consultant	* Provider Number(s) (SPD or eXPRS): UI12345678
* Address: (Mailing Address) 1234 AnyStreet	* City, State, Zip: AnyTown, OR 97000
* Phone Number: (503) 000-0000	* Email Address: (must be your unique email address; it cannot be shared with another eXPRS user) john.doe@email.com



eXPRS Enrollment for New PSW Job Coaches - 3

Add	Del	User Role/Description
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Provider PSW/IC/BC Claims Manager - able to <u>Create/Submit/View</u> Service Delivered (SD) billing entries; able to <u>Create/Submit/View</u> PSW Travel Time claims; able to view Service Prior Authorizations (SPAs), PSW credential information, claims and payment information; able to print PSW timesheets.

*Print Name John X. Doe	
*Signature: <i>John X. Doe</i>	*Date: 05 / 05 / 2019

Keep a copy of this form for future reference.

Enroll Individual Provider User (PSW or BC) REFORMATTED (v4; 8-10-18)

Scan the completed form and email to info.exprs@dhsosha.state.or.us OR fax to (503) 947- 5044. Keep a copy for your files.

- Are you a registered user of DHS' secure email system?

YES

NO

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DHS Secure Email System



Secure Email Instructions



The Oregon Health Authority (OHA) and Department of Human Services (DHS) are strongly committed to protecting the privacy and security of all of the people we serve. That is why we require that all email be sent securely if it contains protected client information.

- You can only send secure email to addresses that end with **@dhsoha.state.or.us**.
- You must complete all steps – logging in, composing and sending your secure email – in the same browser, on the same device, within one 60-minute period.

Starting a secure email to DHS or OHA

Go to <https://secureemail.dhsoha.state.or.us/encrypt>. Enter your email address, then click "Continue."

- First-time users will go to the "Registration" page.
- Returning users will go to the "Login" page.

Registration (for first-time users)

Enter all fields, then click "Continue." Passwords must:

- Be 8-20 characters long.
- Contain at least one digit (0-9).
- Contain both upper- and lower-case letters.
- Not contain your username.

You will get an activation request email. When you click the link in the email, you will get to compose your secure email.

The registration form is titled "Registration" and includes the following fields: "Email Address" (pre-filled with "email@domain.org"), "First Name", "Last Name", "Password", and "Confirm Password". A blue "Continue" button is at the bottom.

Login (for returning users)

Enter your password, then click "Continue" to compose your secure email. If you forget your password:

- Click "Forgot Password."
- You will get to enter a new password, then get a password authentication email.
- When you click the link in the email, you will get to compose your secure email.

The login form is titled "Login" and includes the following fields: "Log in to compose a secure message" (pre-filled with "email@domain.org"), a password field (masked with "*****"), and a "Forgot Password" link. A blue "Continue" button is at the bottom.

Composing secure email

Once logged in, you can securely send attachments and any information you need to share.

Questions? Email dhs.servicedesk@dhsoha.state.or.us or 503-945-5623.

Because DHS is committed to protecting the privacy and security of all the people we serve, we require all email be sent securely if it contains protected client information.

First-time users need to register at

<https://secureemail.dhsoha.state.or.us/encrypt>.



DHS Secure Email System



Secure Email

Please provide your email address to proceed.

First time here? *You'll be asked to register.*

john.doe@email.com

Continue

Enter your email address to begin the registration process.

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DHS Secure Email System



Registration

Create your account to read secure email.

Email Address: john.doe@email.com

First Name:

John

Last Name:

Doe

Password:


Confirm Password:

Continue

Enter your first and last name, and then set the cursor to the "Password:" field.



DHS Secure Email System



Registration

Password Policy ×

- Passwords must be 8-20 characters long.
- At least one digit (0-9) is required.
- Both uppercase and lowercase characters are required.
- Your username may not appear in the password.

Create your account to read secure email.

Email Address:

First Name:

Last Name:

Password:

Confirm Password:

Enter a password of your choice consistent with the Password Policy, then click on “Continue.”



DHS Secure Email System



Activation Request Sent

A verification message was sent to your email address which contains a URL you must use to activate your account. Once active, you will be able to send your secure message.

If you do not receive this message within a few moments, please check your spam folder or other filtering tools you may be using as this activation message sometimes gets blocked.

You'll receive an email containing a link to activate your secure email account.

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DHS Secure Email System

The activation email will look something like this. Click on the link.



← [Icons] 1 of 124 < > [Settings]

Proofpoint Encryption Registration [Inbox x]

proofpoint-pps@dhsosha.state.or.us
to me ▾

11:46 AM (4 minutes ago) ☆ ↶ ⋮

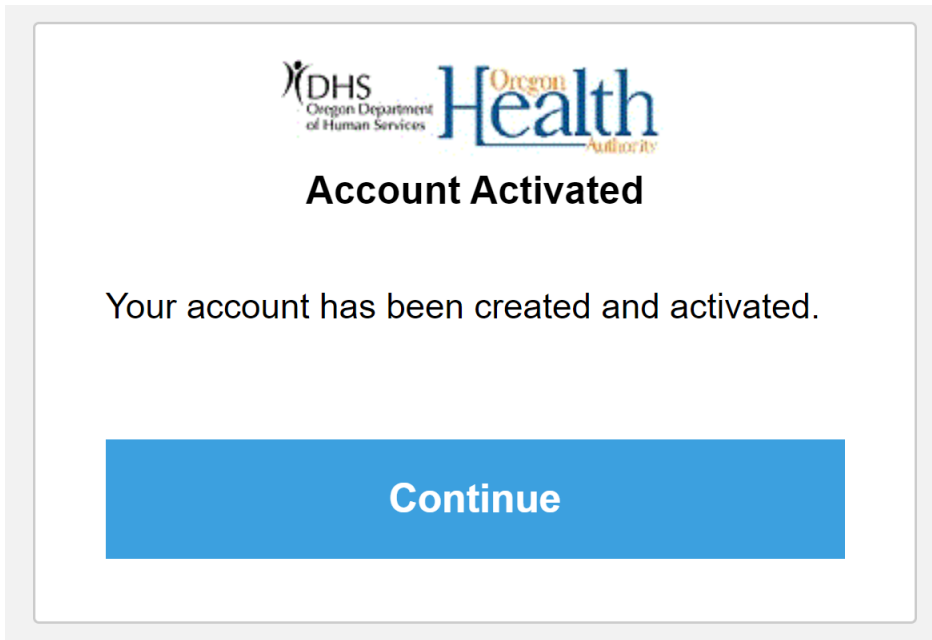
This is the URL to activate your account. Please click the following link to activate your account to send a secure message: <https://secureemail.dhsosha.state.or.us/securereader/activate?token=npH6h8nfw23Viq7siQ2N&brand=d0c67197>. Note: This URL will only work once and will expire in 30 minutes. To restart the activation process, you must start over at the initiate URL.

↶ Reply ➡ Forward

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DHS Secure Email System



The next message will confirm that your secure email account has been activated and you're ready to send secure emails to addresses that end in @dhsoha.state.or.us.



DHS Secure Email System

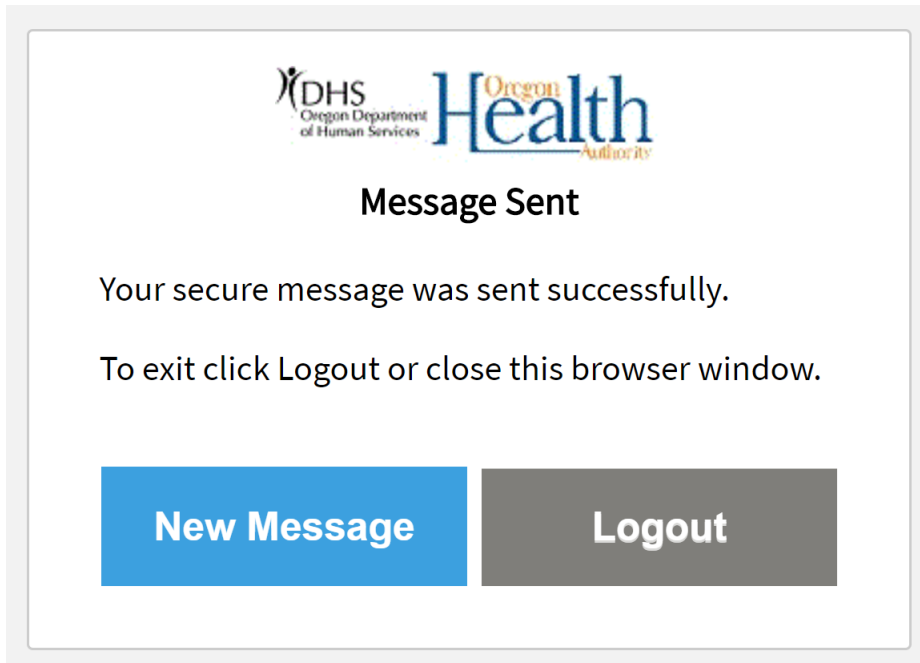
The secure email form will look like this. You may want to send a test message to someone you know at DHS to make sure everything is working.

The screenshot shows the DHS Secure Email System interface. At the top left is the DHS Oregon Department of Human Services logo. At the top right is a 'Logout' button. Below the header is a grey bar containing a 'Send' button on the left and a 'Help' button on the right. The main form area contains three input fields: 'To:', 'Cc:', and 'Subject:'. Below these fields is a checkbox labeled 'Send me a copy'. Underneath the checkbox is an 'Attach a file' button with a paperclip icon. At the bottom of the form is a rich text editor toolbar with various icons for text formatting, including font face (Sans Serif), size (Normal), bold (B), italic (I), underline (U), strikethrough (ABC), text color (A), background color (A), subscript (x₂), superscript (x²), heading 1 (H1), heading 2 (H2), quote (”), list (bulleted), indent (left), indent (right), and link (chain).

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DHS Secure Email System



Once your email is successfully sent, you'll see this confirmation message.

Click "Logout" to leave the DHS secure email system.



DHS Secure Email System



Logged Out

You are now logged out and can close this browser window.

You're all set!



Index

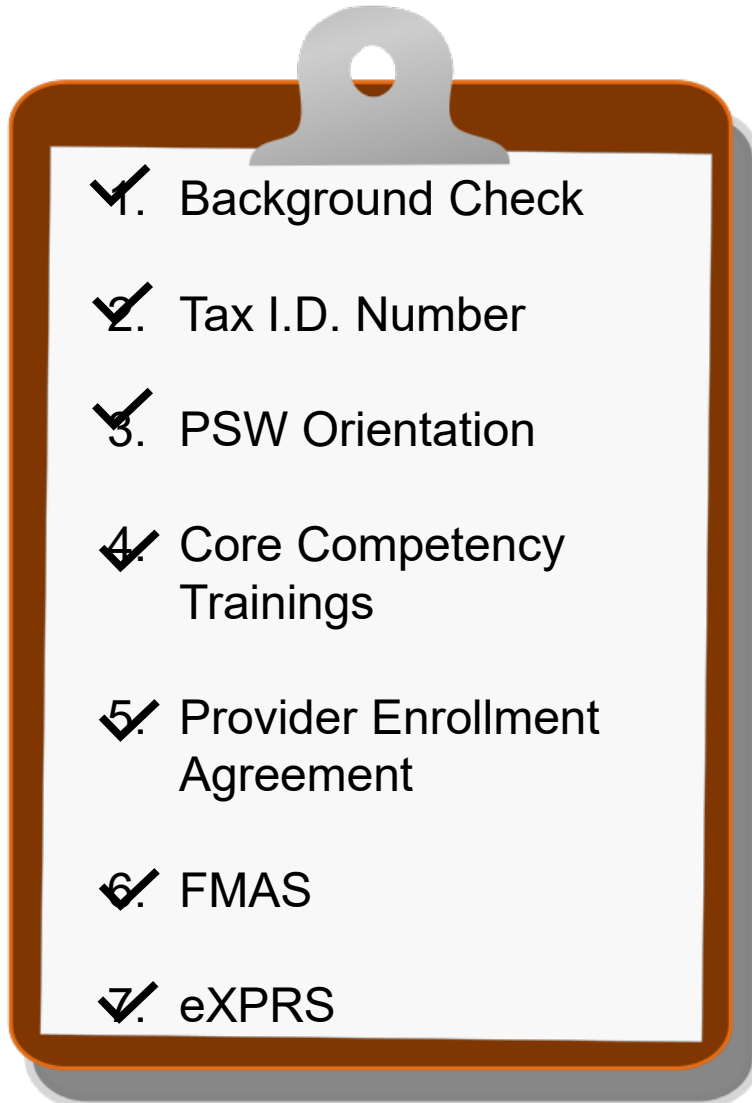
This index is provided to give you a quick and easy way to navigate back to any tasks you want to re-visit. Just click on the task and the link will take you back to that particular section of the tool.

[Core Competency Trainings](#)

[Provider Enrollment](#)



PSW Job Coach Completed Checklist



Congratulations - You did it!
You'll receive an email like this:

“The purpose of this email is to inform you that the your PSW Job Coach enrollment has been completed. Your service dates are from 4/18/19 through 8/31/2021, when your current criminal background check ends. Your service dates can be extended to 4/17/2021 once you renew your criminal background check in August/2021.

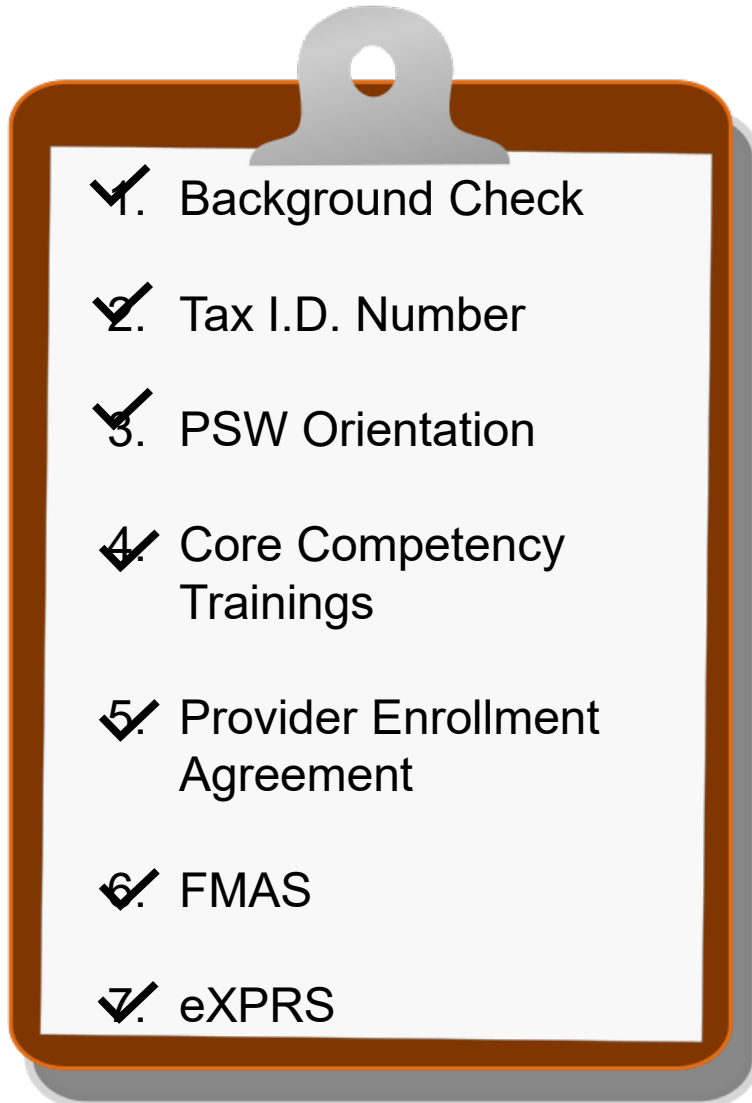
Please be aware, that in order to keep your PSW Job Coach credential current, you must complete 12 continuing education credits annually. The 12 Core Competency trainings you completed for your initial credential can count towards 8 CECs for the first year.

Attached is a [a list of Department-approved trainings](#) that can count as CECs.”

DONE

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PSW Job Coach Completed Checklist



Congratulations - You did it!
You'll receive an email like this:

“The purpose of this email is to inform you that the your PSW Job Coach enrollment has been completed. Your service dates are from 4/18/19 through 8/31/2021, when your current criminal background check ends. Your service dates can be extended to 4/17/2021 once you renew your criminal background check in August/2021.

Please be aware, that in order to keep your PSW Job Coach credential current, you must complete 12 continuing education credits (CECs) annually. The 12 Core Competency trainings you completed for your initial credential can count towards 8 CECs for the first year. Attached is a [a list of Department-approved trainings](#) that can count as CECs.”

DONE

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Background Check

DHS requires that all service providers undergo a background check in order to protect the people we serve.

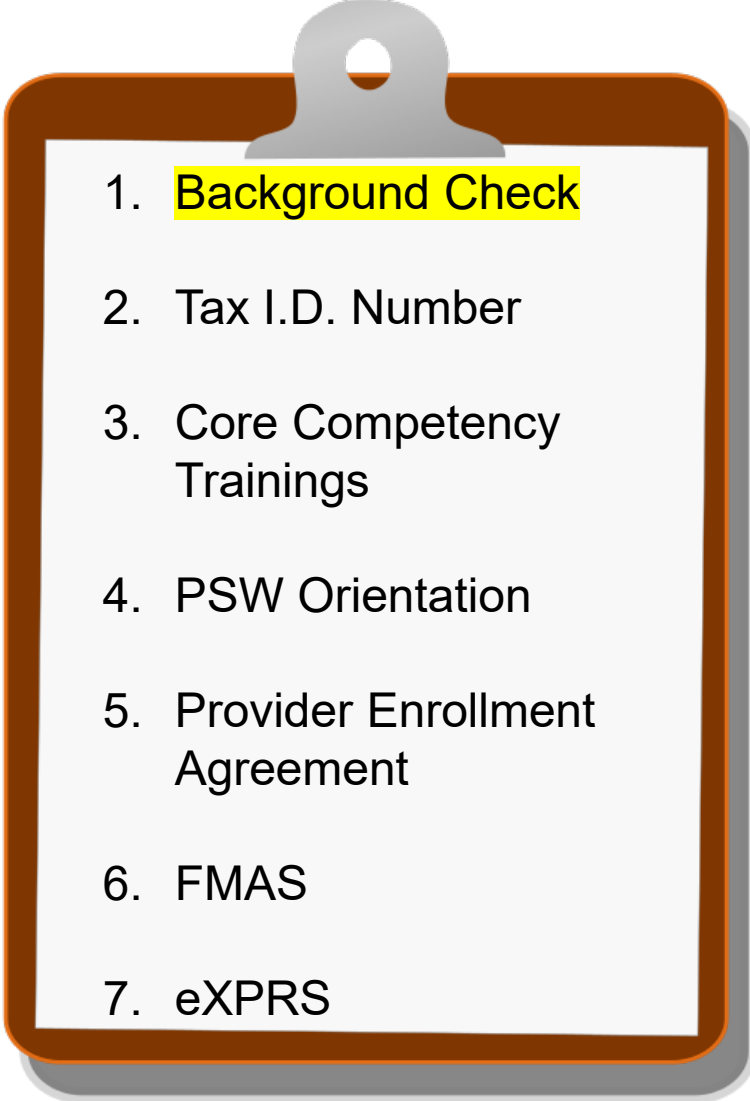
To initiate the background check process, you'll need to schedule an appointment with the Community Developmental Disabilities Program (CDDP) or Brokerage in the area where you wish to provide Job Coaching services to discuss becoming a supported employment service provider. They will initiate the background check process and help you complete the background check application.

Click on this link for a [list of CDDPs](#)

Click on this link for a [list of Brokerages](#)



What to Expect Next – Background Check

- 
1. **Background Check**
 2. Tax I.D. Number
 3. Core Competency Trainings
 4. PSW Orientation
 5. Provider Enrollment Agreement
 6. FMAS
 7. eXPRS

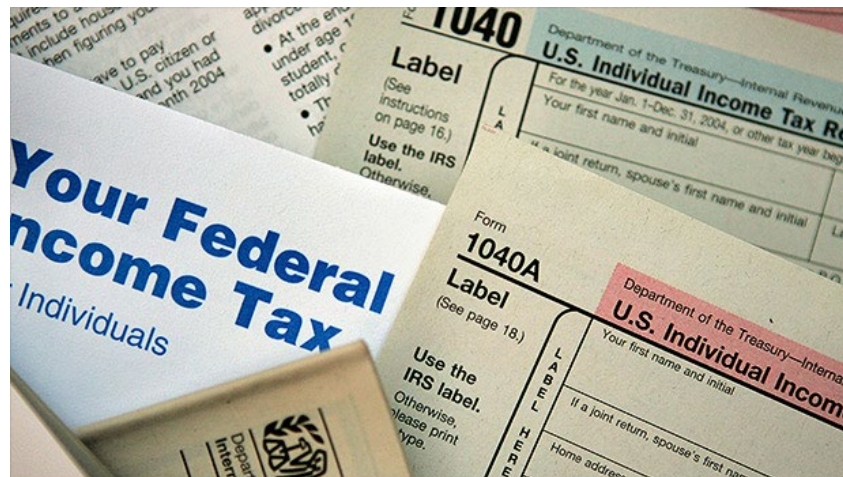
The Community Development Disability Program or Brokerage with which you initiated the background check will inform you of the results.



Tax I.D. Number

You will need your Federal Tax Identification number during the enrollment process. In most cases, this will be your Social Security number. If you have an Employer Identification number, you can use that.

Do you already have a Social Security number or Employer Identification number?



YES

NO

How to Apply for Federal Tax Identification Numbers

Information about how to apply for a Social Security number can be found here: <https://www.ssa.gov/forms/ss-5.pdf>

Information about how to apply for an Employer Identification number can be found here:

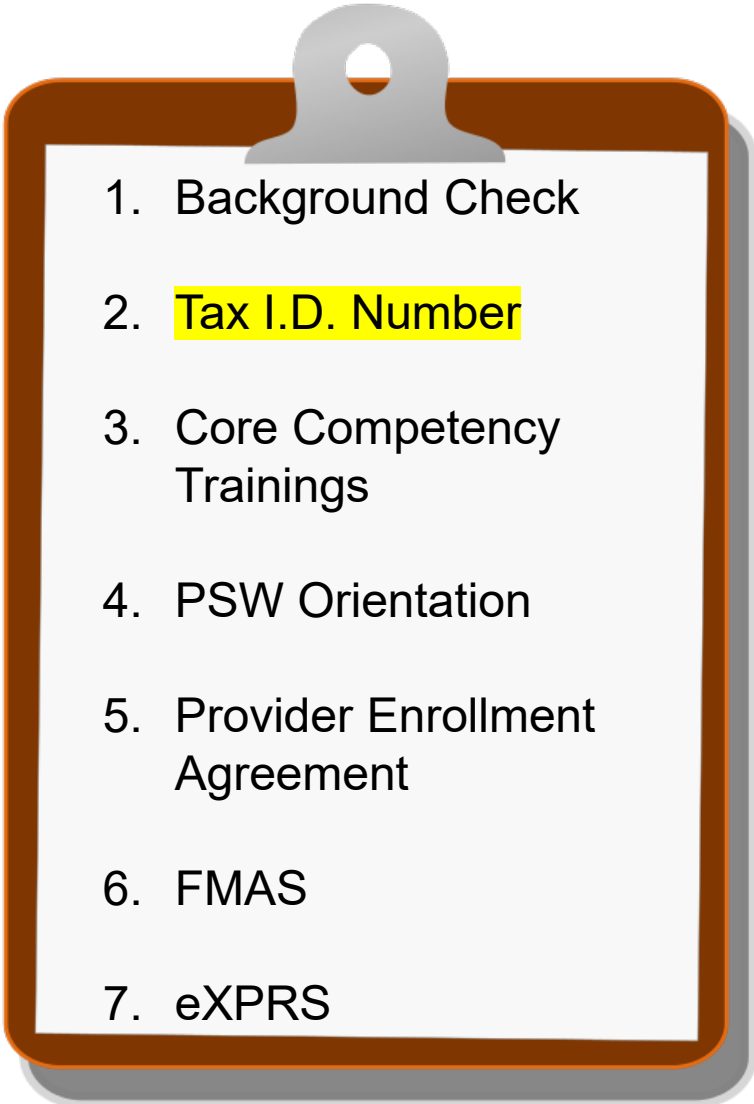
<https://www.irs.gov/businesses/small-businesses-self-employed/apply-for-an-employer-identification-number-ein-online>

NOTE: You'll need either a Social Security number **OR** an Employer Identification number, **NOT BOTH**

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What to Expect Next – Tax I.D. Number

- 
1. Background Check
 2. Tax I.D. Number
 3. Core Competency Trainings
 4. PSW Orientation
 5. Provider Enrollment Agreement
 6. FMAS
 7. eXPRS

- If you applied for a Social Security number, your Social Security card will arrive in the mail.
- If you applied for and Employer Identification number (EIN), you'll receive a letter from the Internal Revenue Service (IRS) that includes your EIN.



Core Competency Trainings

To provide job coaching services, you must pass twelve free [Core Competency Trainings](#).

Altogether, it will take you about eight hours to complete all twelve modules which cover a variety of employment topics. While you must take and pass all twelve before providing services, you do not need to take them all at once.

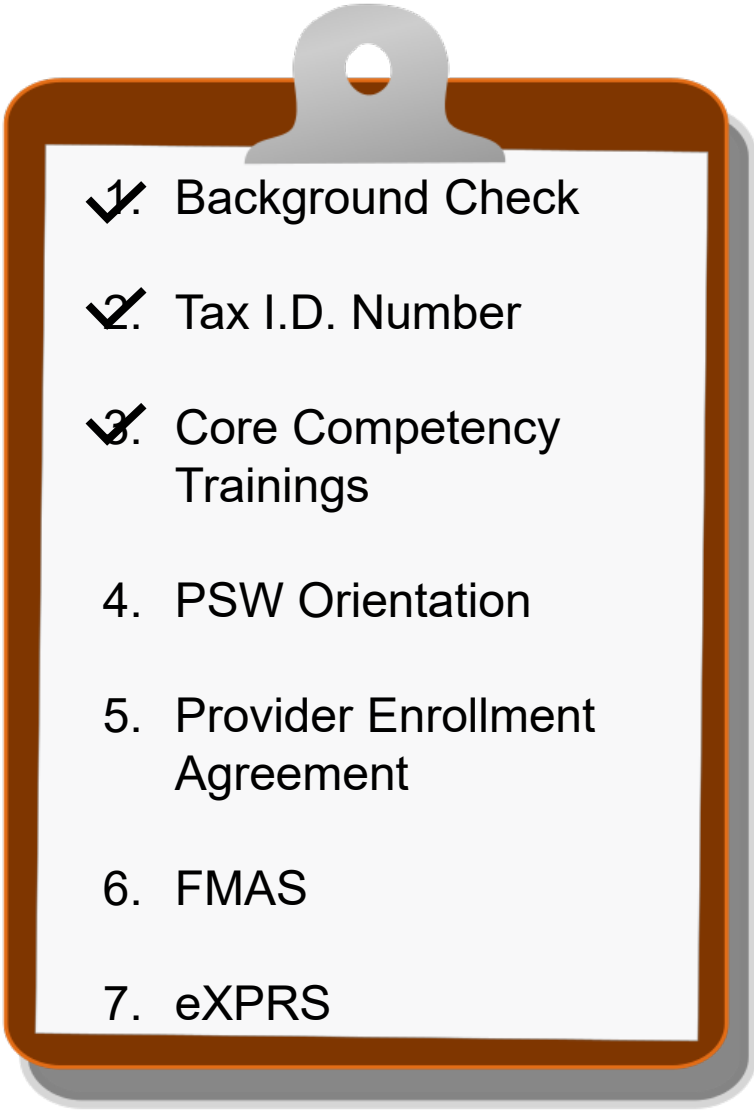
The Core Competency Trainings are only available online through the Workday Learning state training website.

Are you already registered in Workday Learning?

YES

NO

What to Expect Next – Core Competency Trainings

- 
- ✓ Background Check
 - ✓ Tax I.D. Number
 - ✓ Core Competency Trainings
 4. PSW Orientation
 5. Provider Enrollment Agreement
 6. FMAS
 7. eXPRS

You don't need to attach your Core Competency transcript to any form you are required to submit; ODDS will confirm Core Competency training completion directly from Workday Learning.

Next let's tackle new PSW Orientation.



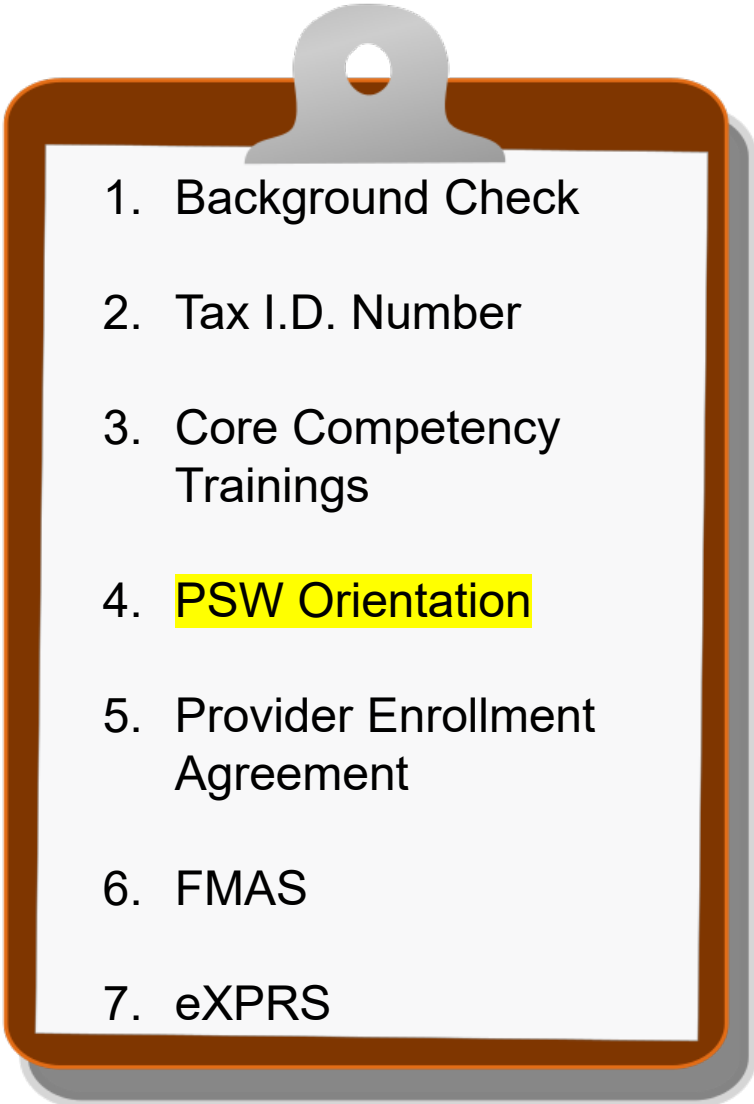
New Personal Service Worker (PSW) Orientation

All PSWs are required to complete PSW and eXPRS Orientation within 90 days of receiving their provider number from ODDS.

PSW and eXPRS Orientation is in-person and is 3½ hours long. PSW Orientation is also available online.



What to Expect Next – PSW Orientation

- 
- A graphic of a clipboard with a white sheet of paper and a silver clip at the top. The paper contains a numbered list of seven items. The fourth item, 'PSW Orientation', is highlighted in yellow.
1. Background Check
 2. Tax I.D. Number
 3. Core Competency Trainings
 4. PSW Orientation
 5. Provider Enrollment Agreement
 6. FMAS
 7. eXPRS

You can download/print a certificate of completion in Workday Learning upon completion of the online PSW orientation.

A certificate of completion will be given to you at the end of the in-person PSW and eXPRS orientations.

Up next – Provider Enrollment Agreement.

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PSW Provider Enrollment Agreement - 1



I/DD PERSONAL SUPPORT WORKERS ONLY

Print form

Clear form

Personal Support Worker (PSW) Provider Enrollment Application and Agreement (Revised 08/01/2018)

This Provider Enrollment Application and Agreement (*Agreement*), sets forth the conditions and agreements for being enrolled as a Medicaid Personal Support Worker (*Provider*) with the State of Oregon Department of Human Services (DHS), Office of Developmental Disabilities Services (ODDS), and to receive a Provider number to receive payment for services furnished by the Provider to approved Medicaid eligible individuals (*Recipients*) in Oregon. Payments for services are made using federal Medicaid and state funds.

Type of action requested

New enrollment Renewal or re-enrollment

Provider type requested (*mark all that apply*)

Note: All new and renewing providers will be enrolled as Personal Support Workers (84-803). Please only check those **additional** provider types which apply to your enrollment.

Legal name (*first name, middle initial, last name as listed on your current SSN card*):

PSW Children Intensive In-Home Services (84-801)

PSW State Plan Personal Care (84-800)

PSW Employment Job Coach (84-809)*

*PSWs enrolling as a **Job Coach (84-809)** must have the appropriate training required in Oregon Administrative Rule (OAR) 411-345-0030 prior to enrollment and must submit training documentation with this application. Job Coach enrollment is good for two years only and must be renewed separately from this agreement.

Download the [PSW Provider Enrollment Agreement](#). It is a form-fillable Acrobat document, so you can fill it out on your computer and then print it out to submit.

The following is a filled-out example for you to follow.



New PSW Provider Enrollment Agreement - 2

Select "New enrollment"

Type of action requested

New enrollment Renewal or re-enrollment

Provider type requested (*mark all that apply*)

Note: All new and renewing providers will be enrolled as Personal Support Workers (84-803). Please only check those **additional** provider types which apply to your enrollment.

Legal name (*first name, middle initial, last name as listed on your current SSN card*):

John X. Doe

PSW Children Intensive In-Home Services (84-801)

PSW State Plan Personal Care (84-800)

PSW Employment Job Coach (84-809)*

*PSWs enrolling as a **Job Coach (84-809)** must have the appropriate training required in Oregon Administrative Rule (OAR) 411-345-0030 prior to enrollment and must submit training documentation with this application. Job Coach enrollment is good for two years only and must be renewed separately from this agreement.

Enter your name

Select "PSW Employment Job Coach"

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New PSW Provider Enrollment Agreement - 3

Provider Information (Required)

- Disclosure of Social Security Number **is required** pursuant to 41 USC 405(c)(2)(C)(i) to establish identification, 42 CFR 455.104 and 455.436 for exclusion verification and 26 CFR 301.6109-1 for the purpose of reporting tax information. DHS may report information to the Internal Revenue Service (IRS) and the Oregon Department of Revenue under the name and Social Security Number (SSN) provided below.

Do not leave any area of this section blank, failure to fully complete will result in the denial of your application. Put "N/A" for any area that is not applicable.

Street address: City: State:
ZIP code (+4): County:

Enter your address

Mailing address (if different from above):
City: State: ZIP code (+4):
County:

Enter your mailing address

Phone number: Email:
Date of birth: SSN:

Enter your phone number, email, birthday and social security number



New PSW Provider Enrollment Agreement - 4

Check boxes as appropriate

Have you been convicted of a criminal offense related to your involvement in any program under Medicare, Medicaid or the Title XXI Services Program since the inception of those programs? Yes No

Have you been terminated or excluded from participation as a provider in Medicare or any state Medicaid or Children's Health Insurance Program (CHIP) program? Yes No

I do not have an existing Medicare, Medicaid, CHIP or Oregon DHS Provider Number

I have an existing Medicare, Medicaid, CHIP or Oregon DHS Provider Number
(list below):

Submitting Agency Information (optional) Type name and email of CDDP/Brokerage you used for the background check

AnyCounty CDDP

Submitting Brokerage/CDDP/CIIS

anycountycddp@anycounty.or.us

Submitting Brokerage/CDDP/CIIS contact email

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PSW Provider Enrollment Agreement - 5

8. Provider signature

I have read the forgoing Provider Enrollment Application and Agreement and the attached Exhibit A and any endorsement addendums, understand it and agree to abide by its terms and conditions. I further understand and agree that violation of any of the terms and conditions of this Agreement constitute grounds for termination of this Agreement and may be grounds for other sanctions as provided by statute, administrative rule, or this Agreement.

1. Print your name

Print name of provider:

John X. Doe

Signature of provider

Signature/Effective date

2. Print out the entire application & agreement form (11 pages)

3. Sign and date in the places indicated

The Enrollment Application & Agreement packet contains a lot of information that you're going to need to read and understand.

THIS IS A CONTRACT! If anything isn't clear, contact the Provider Relations Unit at psw.enrollment@dhsostate.or.us



PSW Provider Enrollment Agreement - 6

You can file the completed document in one of several ways:

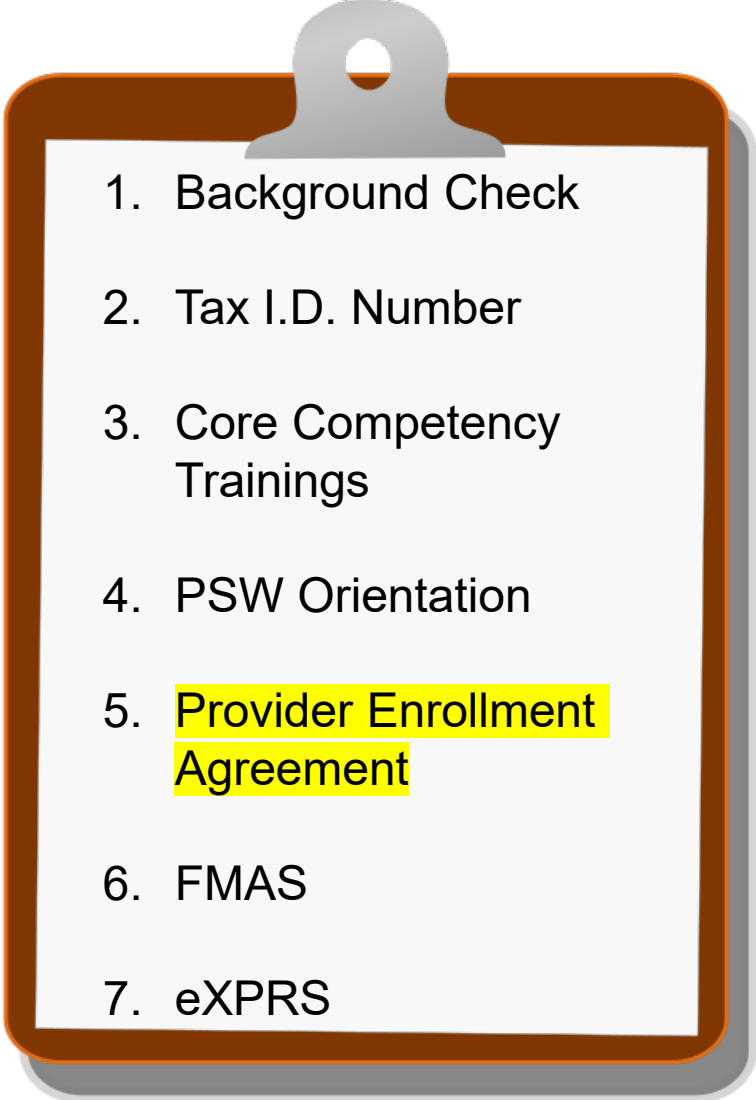
Scan & email to: psw.enrollment@dhsoha.state.or.us

Fax to: 503-947-5044

Mail to: Department of Human Services
ODDS Contracts & Provider Administration Unit
500 Summer St., NE E-09
Salem, OR 97301



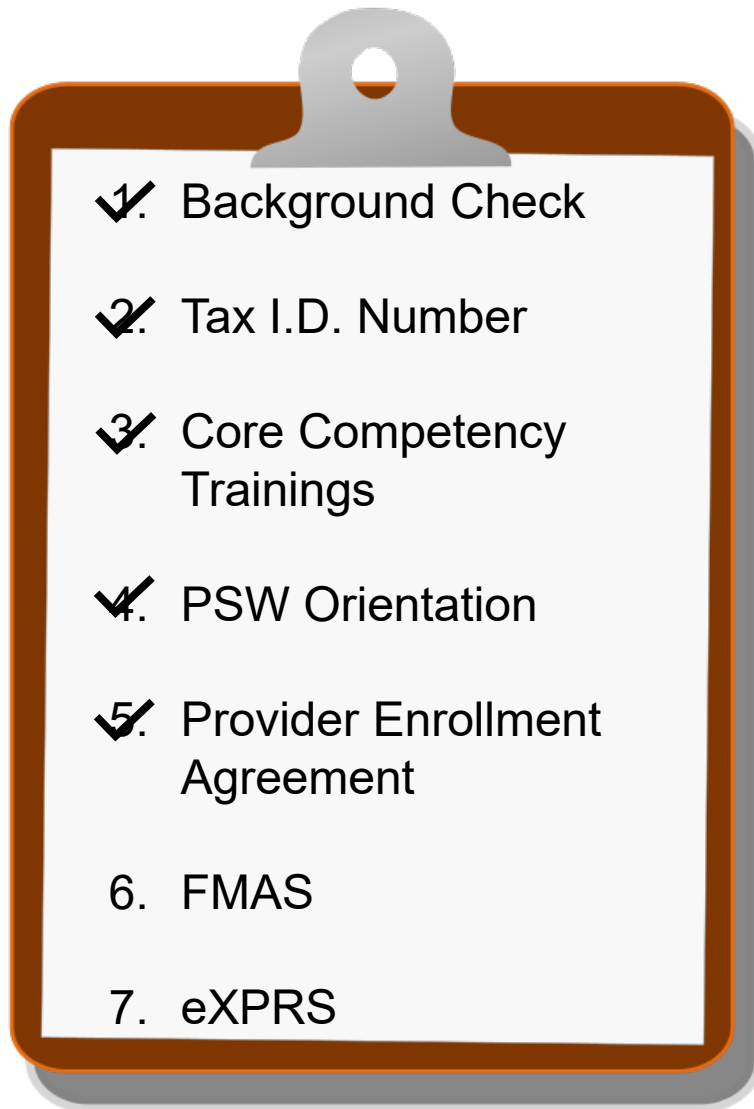
What to Expect Next – Provider Enrollment Agreement

- 
1. Background Check
 2. Tax I.D. Number
 3. Core Competency Trainings
 4. PSW Orientation
 5. **Provider Enrollment Agreement**
 6. FMAS
 7. eXPRS

You'll receive an eXPRS-generated letter specifying the provider enrollment agreement's expiration date.



New PSW-Job Coach Checklist



Almost there!

Only two more items left to complete: FMAS and eXPRS. Both of these are necessary to get paid.

Let's work on FMAS first and then finish off with signing up for eXPRS.

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OR-FMAS (Oregon Financial Management Agent Services)

Home | Contact | Search BetterOnline™ Web Portal: [Sign Up](#) | [Login](#)

PUBLIC PARTNERSHIPS SERVICES ▾ MOBILE APPS ▾ PROGRAMS ABOUT ▾

Overview **Program Documents**

Public Partnerships provides financial management agent services for ODDS PSWs. This is an important part of how you will get paid.

Follow this link to get step-by-step help completing enrollment forms.

 [How to Complete Enrollment Forms](#)



Who We Serve

- ✓ Adults with developmental disabilities
- ✓ Children with developmental disabilities



Services

- ✓ Payroll
- ✓ Employment tax requirements
- ✓ Enrollment Support
- ✓ Customer service

Public Partnerships is pleased to provide Financial Management Agent Services for the Individuals/Employers and Personal Support Workers who are a part of the Oregon Office of Developmental Disabilities Services (ODDS) OR FMAS program. Individuals/Employers enrolled in the OR FMAS program can recruit and hire a Personal Support Worker.

Public Partnerships helps Individuals/Employers and Personal Support Workers by:

- ✓ Helping individuals and employers enroll in OR FMAS using pre-filled forms.
- ✓ Helping Personal Support Workers enroll in OR FMAS using pre-filled forms.
- ✓ Processing payroll for Personal Support Workers
- ✓ Filing Employer related tax information

BetterOnline™ Web Portal Login

BetterOnline provides account-specific information, enrollment paperwork, timesheets, and real-time financial and service utilization reports to make sure you can be in control of your information 24/7

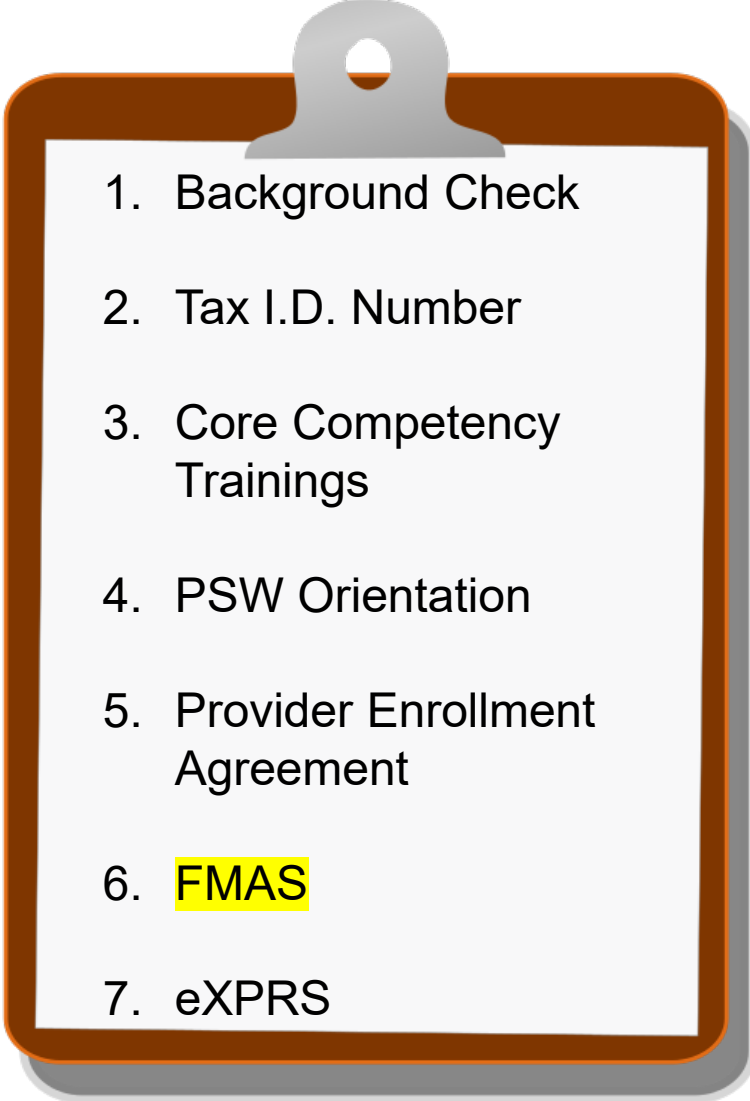
[Login](#)

Need to Verify your

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What to Expect Next – FMAS

- 
1. Background Check
 2. Tax I.D. Number
 3. Core Competency Trainings
 4. PSW Orientation
 5. Provider Enrollment Agreement
 6. **FMAS**
 7. eXPRS

- You'll usually receive an enrollment packet from Public Partnerships by mail within ten days.
- Complete them and send them back by email or fax.
- After all forms are processed and nothing is missing, Public Partnerships will send ODDS a report stating that your enrollment is complete.
- Public Partnerships customer support is available at 888-419-7705.

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eXPRS Enrollment for New PSW Job Coaches - 1



Individual Provider – PSW or BC User Enrollment Form

Provider Types: 74-749, 83-710, 83-711, 84-800, 84-801, 84-803

INSTRUCTIONS: * Indicates required fields. Incomplete forms cannot be processed.

- Send completed form to info.exprs@state.or.us or fax to 503-947-5044.

If the form is complete and your provider record is active, your form should be processed within a week, but may take longer; please be patient.

Once your account has been created, you will receive two emails from info.exprs@state.or.us:

- The 1st email contains generic information and includes several attachments.
- The 2nd email will be secured, and includes your login name and temporary password. NOTE: Unless you already have one, you will have to set up an account with DHS' secure email system. If you need assistance with a secure email, please contact the DHS Service Desk at 503-945-5623 and choose option 3.

If you have not received an email within one week, please check your junk or spam folder. If it is not received within 10 days, please send an email to info.exprs@state.or.us to check on the status.

* Indicate Action: <input type="checkbox"/> Add User <input type="checkbox"/> Modify User <input type="checkbox"/> Deactivate User <input type="checkbox"/> Change of Info	
* User's Name: (Last, First MI) (Print Name)	Already have an eXPRS login name?
* Job Title (*check one): <input type="checkbox"/> Personal Support Worker <input type="checkbox"/> Behavior Consultant	* Provider Number(s) (SPD or eXPRS):
* Address: (Mailing Address)	* City, State, Zip:
* Phone Number:	* Email Address: (must be your unique email address; it cannot be shared with another eXPRS user)

Add	Del	User Role/Description
<input type="checkbox"/>	<input type="checkbox"/>	Provider PSW/IC/BC Claims Manager – able to <u>Create/Submit/View</u> Service Delivered (SD) billing entries; able to <u>Create/Submit/View</u> PSW Travel Time claims; able to view Service Prior Authorizations (SPAs), PSW credential information, claims and payment information; able to print PSW timesheets.

* Print Name	
* Signature:	* Date: / /

Keep a copy of this form for future reference.

Enroll Individual Provider User (PSW or BC) REFORMATTED (v4; 8-10-18)

eXPRS is the state's computer system that allows you to enter your invoices for authorized job coaching services and get paid.

Download the [eXPRS enrollment form for PSW's](#)

Print out the form (it cannot be filled out online), fill it out manually, scan it and attach it to an email or fax it.

The following are step-by-step instructions on how to fill out the form.



eXPRS Enrollment for New PSW Job Coaches - 2

Follow the example below by putting in your information. Note that the Provider Number is the number you received resulting from the Provider Enrollment process (slides 75-80).

* Indicate Action: <input checked="" type="checkbox"/> Add User <input type="checkbox"/> Modify User <input type="checkbox"/> Deactivate User <input type="checkbox"/> Change of Info	
* User's Name: (Last, First MI) (Print Name) Doe, John X.	Already have an eXPRS login name? N/A
* Job Title (*check one): <input checked="" type="checkbox"/> Personal Support Worker <input type="checkbox"/> Behavior Consultant	* Provider Number(s) (SPD or eXPRS): UI12345678
* Address: (Mailing Address) 1234 AnyStreet	* City, State, Zip: AnyTown, OR 97000
* Phone Number: (503) 000-0000	* Email Address: (must be your unique email address; it cannot be shared with another eXPRS user) john.doe@email.com



eXPRS Enrollment for New PSW Job Coaches - 3

Add	Del	User Role/Description
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Provider PSW/IC/BC Claims Manager - able to <u>Create/Submit/View</u> Service Delivered (SD) billing entries; able to <u>Create/Submit/View</u> PSW Travel Time claims; able to view Service Prior Authorizations (SPAs), PSW credential information, claims and payment information; able to print PSW timesheets.

*Print Name John X. Doe	
*Signature: <i>John X. Doe</i>	*Date: 05 / 05 / 2019

Keep a copy of this form for future reference.

Enroll Individual Provider User (PSW or BC) REFORMATTED (v4; 8-10-18)

Scan the completed form and email to info.exprs@dhsosha.state.or.us OR fax to (503) 947- 5044. Keep a copy for your files.

- Are you a registered user of DHS' secure email system?

YES

NO

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DHS Secure Email System



Secure Email Instructions



The Oregon Health Authority (OHA) and Department of Human Services (DHS) are strongly committed to protecting the privacy and security of all of the people we serve. That is why we require that all email be sent securely if it contains protected client information.

- You can only send secure email to addresses that end with **@dhsoha.state.or.us**.
- You must complete all steps – logging in, composing and sending your secure email – in the same browser, on the same device, within one 60-minute period.

Starting a secure email to DHS or OHA

Go to <https://secureemail.dhsoha.state.or.us/encrypt>. Enter your email address, then click "Continue."

- First-time users will go to the "Registration" page.
- Returning users will go to the "Login" page.

Registration (for first-time users)

Enter all fields, then click "Continue." Passwords must:

- Be 8-20 characters long.
- Contain at least one digit (0-9).
- Contain both upper- and lower-case letters.
- Not contain your username.

You will get an activation request email. When you click the link in the email, you will get to compose your secure email.

Login (for returning users)

Enter your password, then click "Continue" to compose your secure email. If you forget your password:

- Click "Forgot Password."
- You will get to enter a new password, then get a password authentication email.
- When you click the link in the email, you will get to compose your secure email.

Composing secure email

Once logged in, you can securely send attachments and any information you need to share.

Questions? Email dhs.servicedesk@dhsoha.state.or.us or 503-945-5623.

Because DHS is committed to protecting the privacy and security of all the people we serve, we require all email be sent securely if it contains protected client information.

First-time users need to register at

<https://secureemail.dhsoha.state.or.us/encrypt>.

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DHS Secure Email System



Secure Email

Please provide your email address to proceed.

First time here? *You'll be asked to register.*

john.doe@email.com

Continue

Enter your email address to begin the registration process.

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DHS Secure Email System



Registration

Create your account to read secure email.

Email Address: john.doe@email.com

First Name:

John

Last Name:

Doe

Password:

Confirm Password:

Continue

Enter your first and last name, and then set the cursor to the "Password:" field.



DHS Secure Email System



Registration

Password Policy

- Passwords must be 8-20 characters long.
- At least one digit (0-9) is required.
- Both uppercase and lowercase characters are required.
- Your username may not appear in the password.

Create your account to read secure email.

Email Address: john.doe@email.com

First Name: John

Last Name: Doe

Password: MyPassword00

Confirm Password: MyPassword00

Continue

Enter a password of your choice consistent with the Password Policy, then click on “Continue.”



DHS Secure Email System



Activation Request Sent

A verification message was sent to your email address which contains a URL you must use to activate your account. Once active, you will be able to send your secure message.

If you do not receive this message within a few moments, please check your spam folder or other filtering tools you may be using as this activation message sometimes gets blocked.

You'll receive an email containing a link to activate your secure email account.



DHS Secure Email System

The activation email will look something like this. Click on the link.



← [Icons] 1 of 124 < > [Settings]

Proofpoint Encryption Registration [Inbox x]

proofpoint-pps@dhsosha.state.or.us
to me ▾

11:46 AM (4 minutes ago) ☆ ↶ ⋮

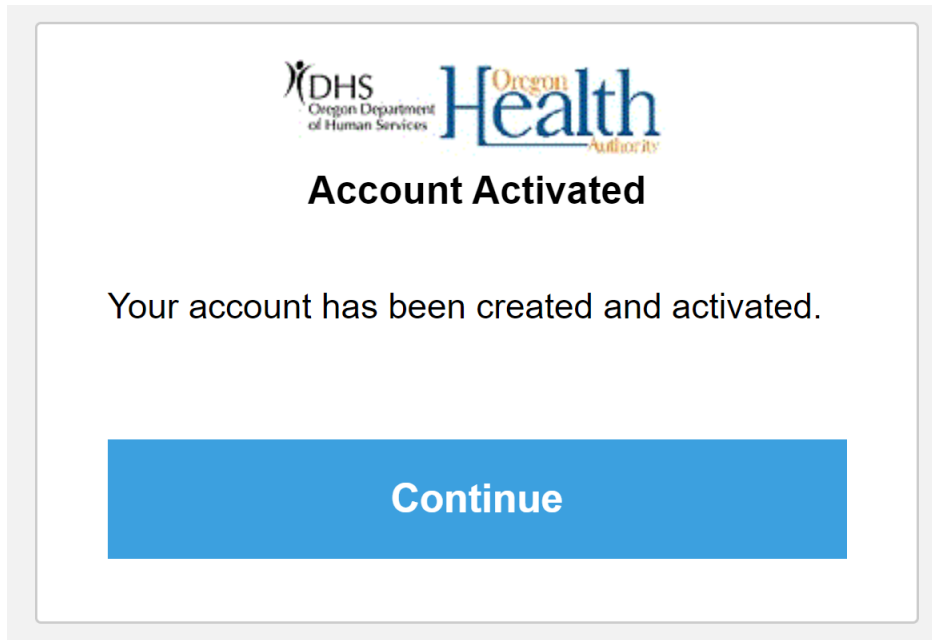
This is the URL to activate your account. Please click the following link to activate your account to send a secure message: <https://secureemail.dhsosha.state.or.us/securereader/activate?token=npH6h8nfw23Viq7siQ2N&brand=d0c67197>. Note: This URL will only work once and will expire in 30 minutes. To restart the activation process, you must start over at the initiate URL.

↶ Reply ➡ Forward

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DHS Secure Email System



The next message will confirm that your secure email account has been activated and you're ready to send secure emails to addresses that end in @dhsoha.state.or.us.



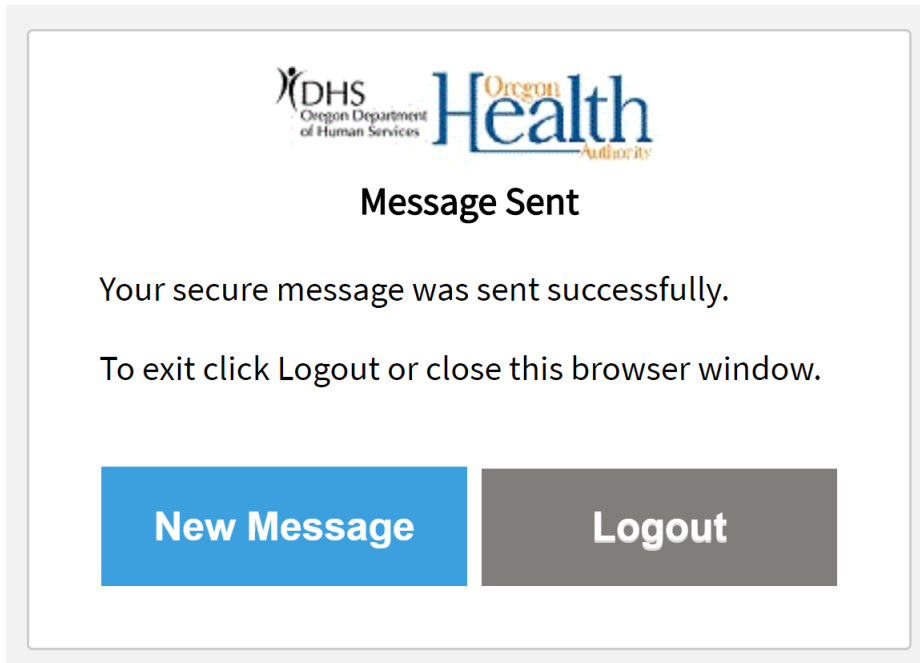
DHS Secure Email System

The secure email form will look like this. You may want to send a test message to someone you know at DHS to make sure everything is working.

The screenshot shows the DHS Secure Email System interface. At the top left is the DHS Oregon Department of Human Services logo with the text "Oregon Health Authority". At the top right is a "Logout" button. Below the header is a grey bar containing a blue "Send" button on the left and a blue "Help" button on the right. The main area contains three input fields for "To:", "Cc:", and "Subject:". Below these fields is a checkbox labeled "Send me a copy". Underneath the checkbox is a blue button labeled "Attach a file" with a paperclip icon. At the bottom of the form is a rich text editor toolbar with options for font face (Sans Serif), font size (Normal), bold (B), italic (I), underline (U), strikethrough (ABC), text color (A), background color, subscript (x₂), superscript (x²), heading (H1, H2), quote, list, link, unlink, and a refresh icon.



DHS Secure Email System



Once your email is successfully sent, you'll see this confirmation message.

Click "Logout" to leave the DHS secure email system.



DHS Secure Email System



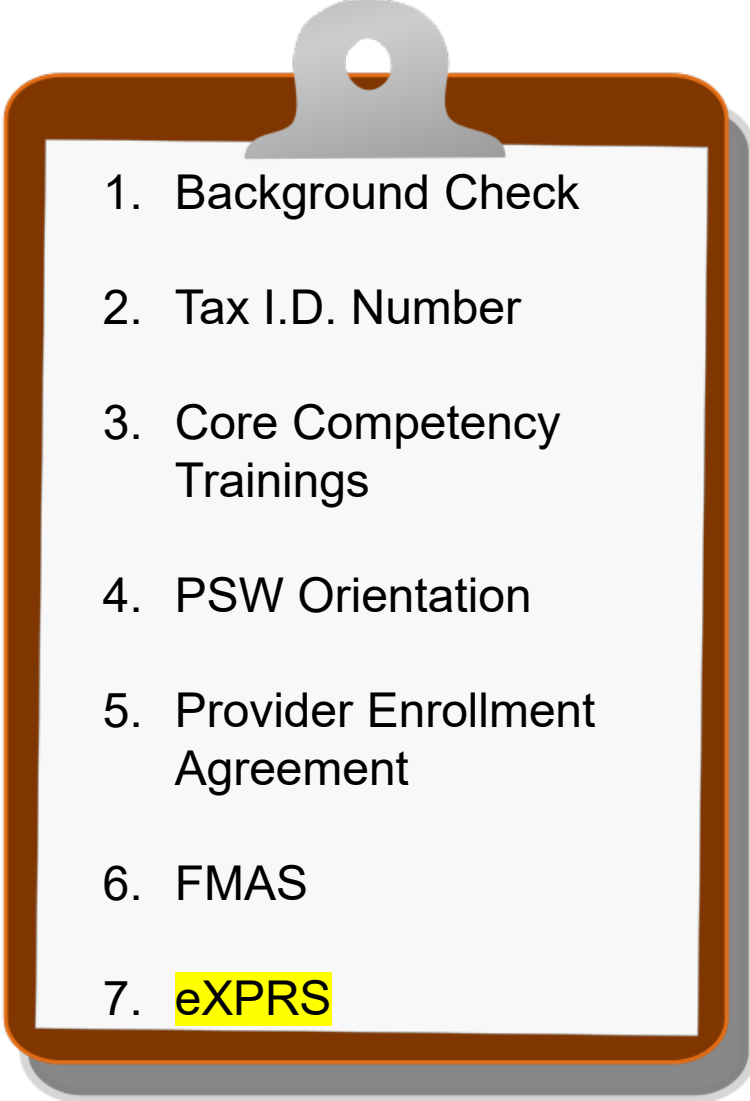
Logged Out

You are now logged out and can close this browser window.

You're all set!



What to Expect Next – eXPRS

- 
1. Background Check
 2. Tax I.D. Number
 3. Core Competency Trainings
 4. PSW Orientation
 5. Provider Enrollment Agreement
 6. FMAS
 7. eXPRS

If the form is complete and your provider record is active, your form should be processed within a week, but it may take longer; please be patient.

Once your account has been created, you will receive two emails from

info.exprs@dhsosha.state.or.us:

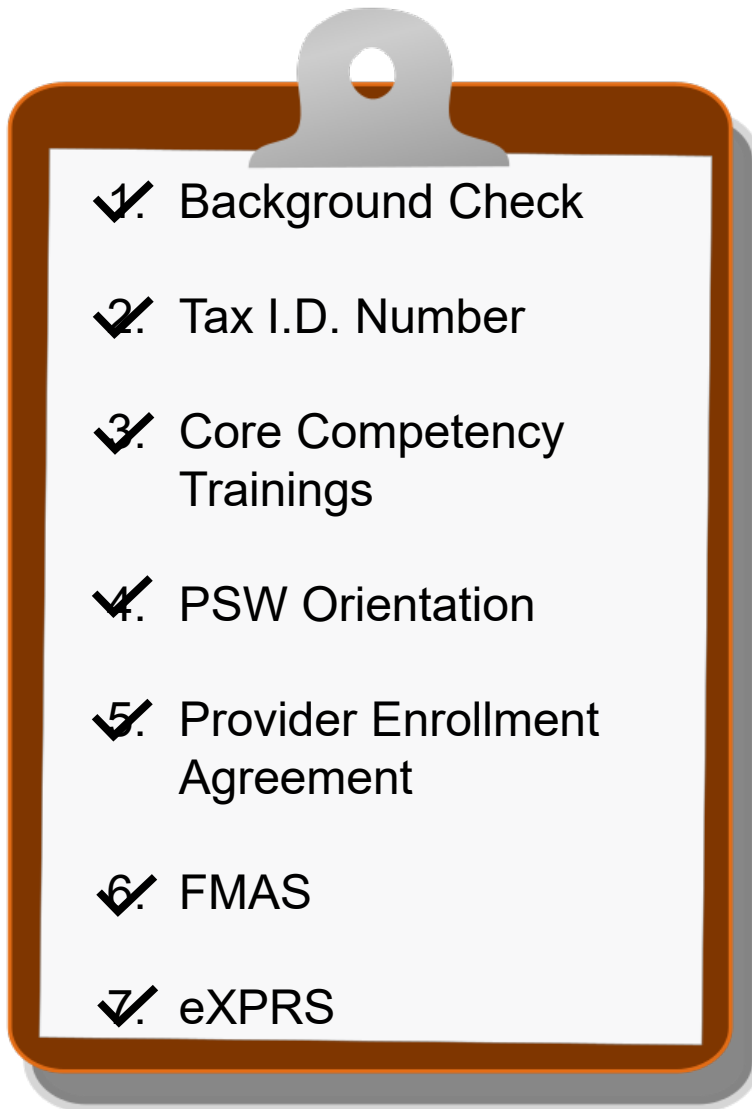
- The 1st email contains generic information and several attachments.
- The 2nd email will be secured and includes your eXPRS login name and temporary password. Set up a secure account with DHS' secure email system by contacting the DHS Service Desk at 503-945-5623 and choose option 3.

If you have not received an email within one week, please check your junk or spam folder. If it is not received within ten days, please check on the status by emailing info.exprs@dhsosha.state.or.us.

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New PSW-Job Coach Checklist



Congratulations – you did it!

You've completed the process of how to become a PSW job coach. If you have additional questions about this process, please contact

EmploymentTraining.Review@dhsoha.state.or.us

END

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New PSW Orientation - Online

New PSW online orientation requirements:

- Available only in English
- Computer (no tablets or smartphones)
- Active email address
- Currently registered in iLearn
- Register with the computer you'll use for the orientation

New PSW online orientation will take about three hours to complete, but you don't have to finish all at once.

Register at <https://www.surveymonkey.com/r/QLDMGKX>

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New PSW Orientation – In-Person

New PSW and eXPRS in-person orientation requirements:

- Available in English, Spanish, Russian and Somali
- Student can request an interpreter of any language to be with them in the classroom
- Registration is by language
 - Register in [English](#)
 - Register in [Spanish](#)
 - Register in [Russian](#)
 - Register in [Somali](#)

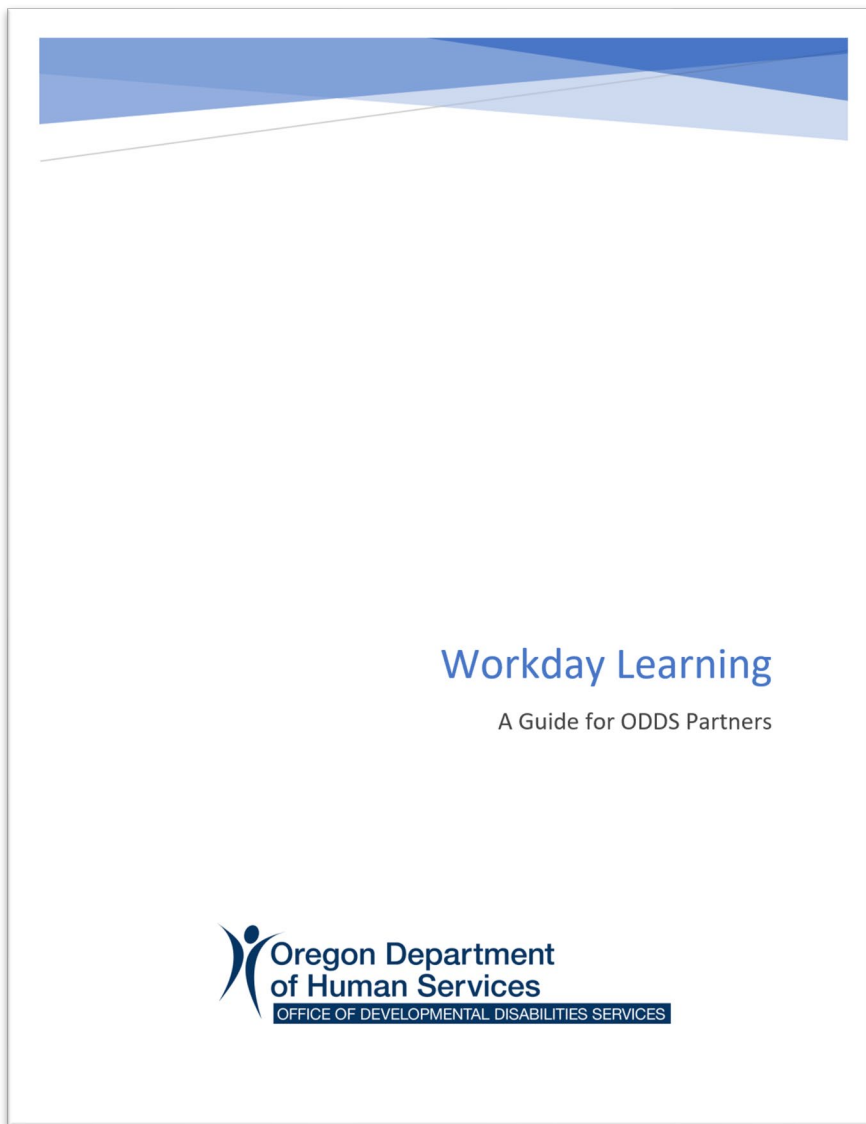
Due to COVID-19, in-person PSW Orientations are currently suspended. Follow this [link](#) for the latest updates on PSW orientation scheduling.

New PSW online orientation will take about three hours to complete; eXPRS will take an additional 1.5 hours.

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Workday Learning – How To Register



A comprehensive step-by-step guide on how to register for a Workday Learning account is available at this link:

[Workday Learning \(oregon.gov\)](https://workdaylearning.oregon.gov)

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Workday Learning – Core Competencies - 1

Welcome, Tim Acker [E]

Announcements
1 item

Welcome to learning in Workday Oregon!
We are happy to announce iLearnOregon has been retired as the state's learning Management system, we are

Applications
3 items

Learning Helpful Links Favorites

Inbox
0 items

Go to Inbox

Log into your Workday Learning account. Click on the “Learning” application icon.

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Workday Learning – Core Competencies - 2

The screenshot displays the Workday Learning dashboard. At the top, there is a search bar and navigation icons. The main content area is divided into several sections: 'My Enrolled and Waitlisted Offerings', 'Recently Added' (featuring three course cards), 'Based on Your Interests', and 'Learning Paths'. On the right side, there is a vertical navigation menu with the following items: 'Learn', 'Drop Learning Enrollment', 'My Library', 'Preferences', 'Progress', 'Learning History', 'My Transcript', and 'My Learning Certificate'. The 'Learn' section is expanded, and the 'Browse Learning Content' option is circled in red, with a red arrow pointing to it from the right.

Click on the “Browse Learning Content” option

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Workday Learning – Core Competencies - 3

The screenshot shows the Workday Learning interface. At the top, there is a search bar with the text 'ODHS-DD-EP' entered, circled in red with a '1' next to it. To the right of the search bar is a 'Search' button, also circled in red with a '2' next to it and a red arrow pointing to it. Below the search bar, there is a 'Current Search' section with a 'Save' button and a 'Clear All' button. To the left of the search results is a sidebar with filters for 'Topic', 'Delivery Mode', 'Access Type', and 'Type'. The search results are displayed in a list format, with the first result circled in red with a '3' next to it. The results include course titles, descriptions, and enrollment information.

Course Title	Description	Duration	Enrollment
ODHS - DD - EP 101 Introduction to Supported Employment	Employment Professional Core Competency 101 - Introduction to Supported Employment.	60 minutes	34 enrolled
ODHS - DD - EP 102 Discovery and Career Planning	Employment Professional Core Competency 102 - Discovery and Career Planning	90 minutes	30 enrolled
ODHS - DD - EP 103 Marketing and Job Development	Employment Professional Core Competency 103 - Marketing and Job Development	30 minutes	23 enrolled
ODHS - DD - EP 104 Workplace and Job Analysis	Employment Professional Core Competency 104 - Workplace and Job Analysis	30 minutes	23 enrolled

1. Type “ODHS-DD-EP” in the Search box
2. Click on “Search”
3. The Core Competency courses will populate the center window
4. Scroll and click on the course you want to take



Workday Learning – Core Competencies - 4

The screenshot shows the Workday Learning interface for the course "ODHS - DD - EP 101 Introduction to Supported Employment". The course title is prominently displayed at the top. Below the title, there is a description: "Employment Professional Core Competency 101 - Introduction to Supported Employment." The interface is divided into two main sections. On the left, there is a "Lessons in This Course" section with a sub-section "Lessons in This Course" containing one lesson: "1 Core Comp: Introduction to Supported Employment". On the right, there is a "Start Course" button, which is circled in red with an arrow pointing to it. Below the button, there are details about the course: "Duration: 60 minutes", "Lessons: 1", and "Delivery Mode: Self-Directed". There is also a "CONTACTS" section with a contact person "Eugene Rada" and a "Save" button.

Click on “Start Course” to begin the course content



Workday Learning – Get Your Transcript - 1

The screenshot shows the Workday Learning interface. At the top, there is a search bar and navigation icons. The main content area is titled 'Learning' and contains several sections: 'My Enrolled and Waitlisted Offerings', 'Recently Added' (with three course cards), 'Based on Your Interests', and 'Learning Paths'. On the right side, there is a sidebar menu with categories: 'Learn', 'Progress', and 'Learning History'. Under 'Learning History', the 'My Transcript' option is highlighted with a red circle and a red arrow pointing to it.

Log into your Workday Learning account and click on the Learning application. Click on “My Transcript”

BACK

NEXT

Workday Learning – Get Your Transcript - 2



Q Search



My Transcript



Turn on the new tables view

Not Started 0 items



Name	Content Type	Registration Status	Date Enrolled	Completion Status	Attendance Status	Grade	Score	Record Type
No Data								

Turn on the new tables view

In Progress 0 items



Name	Content Type	Registration Status	Date Enrolled	Completion Status	Attendance Status	Grade	Score	Record Type
No Data								

Turn on the new tables view

Learning History 1 item



Name	Content Type	Registration Status	Date Enrolled	Completion Status	Completion Date and Time	Attendance Status	Grade	Score	Record Type
ODHS – HR – Interview Panelist Training	Digital Course	Enrolled	06/23/2021	Completed	06/23/2021 09:51:41 AM	Do Not Track		0	Enrollment

[Learning Home](#)

You can download your transcript to Excel or Acrobat to save or print it.

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Workday Learning – How To Log Out



Search



My Transcript

Not Started 0 items


Name	Content Type	Registration Status	Date Enrolled	Completion Status	Attendance Status	Grade
No Data						

In Progress 0 items

Name	Content Type	Registration Status	Date Enrolled	Completion Status	Attendance Status	Grade
No Data						

Learning History 1 item

Name	Content Type	Registration Status	Date Enrolled	Completion Status	Completion Date and Time	Attendance Status	Grade	Score	Record Type
ODHS – HR – Interview Panelist Training	Digital Course	Enrolled	06/23/2021	Completed	06/23/2021 09:51:41 AM	Do Not Track		0	Enrollment



Timothy Acker
View Profile

- Home
- My Account >
- Favorites
- Drive
- My Reports
- Help & Settings

Sign Out

Turn on the new tables view



Learning Home

1. Click on the cloud icon in the upper right corner to reveal the dropdown menu.
2. Click on “Sign Out.”

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Workday Learning – More Information

See the latest Oregon Department of Human Services [COVID-19 Information and Resources](#) and [2020 Wildfire Information and Resources](#).

[Oregon Department of Human Services](#) / [Seniors & People with Disabilities](#) / [Intellectual and Developmental Disabilities](#) / [Developmental Disabilities Provider and Partner Resources](#)

iLearn to Workday Learning Transition

► DD PROVIDER AND PARTNER RESOURCES

ELECTRONIC VISIT VERIFICATION PROJECT

ODDS ENGAGEMENT AND INNOVATION

DD FOSTER CARE PROVIDER RESOURCES

DD HCBS RESOURCES

BEHAVIOR PROFESSIONAL RESOURCES

☐ CERTIFICATION, ENDORSEMENT & LICENSING

PERSONAL SUPPORT WORKER

Information for Developmental Disabilities Providers, Case Management Entities and Partners

 [Subscribe for email updates](#)

Background: The Department of Administrative Services (DAS) is transitioning from iLearn Oregon to Workday Learning, with an anticipated date of June 2021.

This means that all future trainings required by the Office of Developmental Disabilities Services (ODDS) and the Oregon Department of Human Services (ODHS), including core competencies, will be on the Workday Learning platform instead of iLearn.

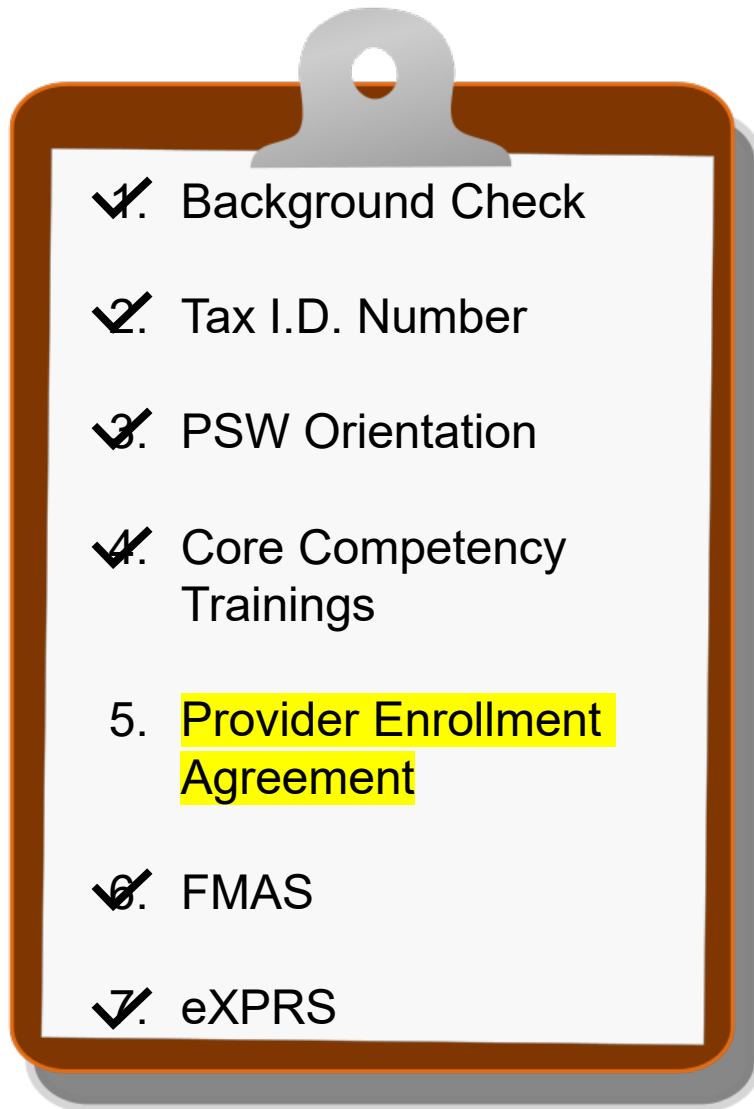
Course credits recorded in iLearnOregon for providers and their staff are going away in June 2021. Workday Learning will replace iLearn as the tool the State uses to deliver training and maintain transcripts and credits. When this happens, the accounts of all non-State workers (called "Partners") will not be moved to Workday Learning.

Visit the [iLearn Transition to Workday page](#) to learn more.

Additional information about Workday Learning can be found at: [State of Oregon: Developmental Disabilities Provider and Partner Resources - iLearn to Workday Learning Transition](#)



PSW Job Coach Checklist



Almost there!

Now that you've satisfied the Core Competency Training requirement the only thing left is to submit an updated Provider Enrollment Agreement to receive the PSW Job Coach endorsement.

Let's work on the Enrollment Agreement next.

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Existing PSW Provider Enrollment Agreement - 1



I/DD PERSONAL SUPPORT WORKERS ONLY

Print form

Clear form

Personal Support Worker (PSW) Provider Enrollment Application and Agreement (Revised 08/01/2018)

This Provider Enrollment Application and Agreement (*Agreement*), sets forth the conditions and agreements for being enrolled as a Medicaid Personal Support Worker (*Provider*) with the State of Oregon Department of Human Services (DHS), Office of Developmental Disabilities Services (ODDS), and to receive a Provider number to receive payment for services furnished by the Provider to approved Medicaid eligible individuals (*Recipients*) in Oregon. Payments for services are made using federal Medicaid and state funds.

Type of action requested

New enrollment Renewal or re-enrollment

Provider type requested (mark all that apply)

Note: All new and renewing providers will be enrolled as Personal Support Workers (84-803). Please only check those **additional** provider types which apply to your enrollment.

Legal name (first name, middle initial, last name **as listed on your current SSN card**):

- PSW Children Intensive In-Home Services (84-801)
- PSW State Plan Personal Care (84-800)
- PSW Employment Job Coach (84-809)*

*PSWs enrolling as a **Job Coach (84-809)** must have the appropriate training required in Oregon Administrative Rule (OAR) 411-345-0030 prior to enrollment and must submit training documentation with this application. Job Coach enrollment is good for two years only and must be renewed separately from this agreement.

Download the [PSW Provider Enrollment Agreement](#). It is a form-fillable Acrobat document, so you can fill it out on your computer and then print it out to submit. The following is a filled-out example for you to follow.

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Existing PSW Provider Enrollment Agreement - 2

Select "re-enrollment"

Type of action requested

New enrollment Renewal or re-enrollment

Re-enrollment **Type "Re-enrollment"**

Provider type requested (mark all that apply)

Note: All new and renewing providers will be enrolled as Personal Support Workers (84-803). Please only check those **additional** provider types which apply to your enrollment.

Legal name (first name, middle initial, last name **as listed on your current SSN card**):

John X. Doe **Type name (as shown on Social Security card)**

- PSW Children Intensive In-Home Services (84-801)
- PSW State Plan Personal Care (84-800)
- PSW Employment Job Coach (84-809)*

*PSWs enrolling as a **Job Coach (84-809)** must have the appropriate training required in Oregon Administrative Rule (OAR) 411-345-0030 prior to enrollment and must submit training documentation with this application. Job Coach enrollment is good for two years only and must be renewed separately from this agreement.

Select "PSW Employment Job Coach"

BACK **NEXT**

Existing PSW Provider Enrollment Agreement - 3

Provider Information (Required)

- Disclosure of Social Security Number **is required** pursuant to 41 USC 405(c)(2)(C)(i) to establish identification, 42 CFR 455.104 and 455.436 for exclusion verification and 26 CFR 301.6109-1 for the purpose of reporting tax information. DHS may report information to the Internal Revenue Service (IRS) and the Oregon Department of Revenue under the name and Social Security Number (SSN) provided below.

Do not leave any area of this section blank, failure to fully complete will result in the denial of your application. Put "N/A" for any area that is not applicable.

Street address: City: State:
ZIP code (+4): County:

Enter your address

Mailing address (if different from above):
City: State: ZIP code (+4):
County:

Enter your mailing address

Phone number: Email:
Date of birth: SSN:

Enter your phone number, email, birthday and social security number



Existing PSW Provider Enrollment Agreement - 4

Check boxes as appropriate

Have you been convicted of a criminal offense related to your involvement in any program under Medicare, Medicaid or the Title XXI Services Program since the inception of those programs? Yes No

Have you been terminated or excluded from participation as a provider in Medicare or any state Medicaid or Children's Health Insurance Program (CHIP) program? Yes No

I do not have an existing Medicare, Medicaid, CHIP or Oregon DHS Provider Number

I have an existing Medicare, Medicaid, CHIP or Oregon DHS Provider Number

(list below):

UI12345678

Submitting Agency Information (optional)

N/A

Type "N/A"

Submitting Brokerage/CDDP/CIIS

N/A

Submitting Brokerage/CDDP/CIIS contact email

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NEXT

Existing PSW Provider Enrollment Agreement - 5

8. Provider signature

I have read the forgoing Provider Enrollment Application and Agreement and the attached Exhibit A and any endorsement addendums, understand it and agree to abide by its terms and conditions. I further understand and agree that violation of any of the terms and conditions of this Agreement constitute grounds for termination of this Agreement and may be grounds for other sanctions as provided by statute, administrative rule, or this Agreement.

1. Print your name

Print name of provider:

<i>John X. Doe</i>	01/01/2020
Signature of provider	Signature/Effective date

2. Print out the entire application & agreement form (11 pages)

3. Sign and date in the places indicated

The Enrollment Application & Agreement packet contains a lot of information that you're going to need to read and understand.

THIS IS A CONTRACT! If anything isn't clear, contact the Provider Relations Unit at psw.enrollment@dhsosha.state.or.us



Existing PSW Provider Enrollment Agreement - 6

You can file the completed document in one of several ways:

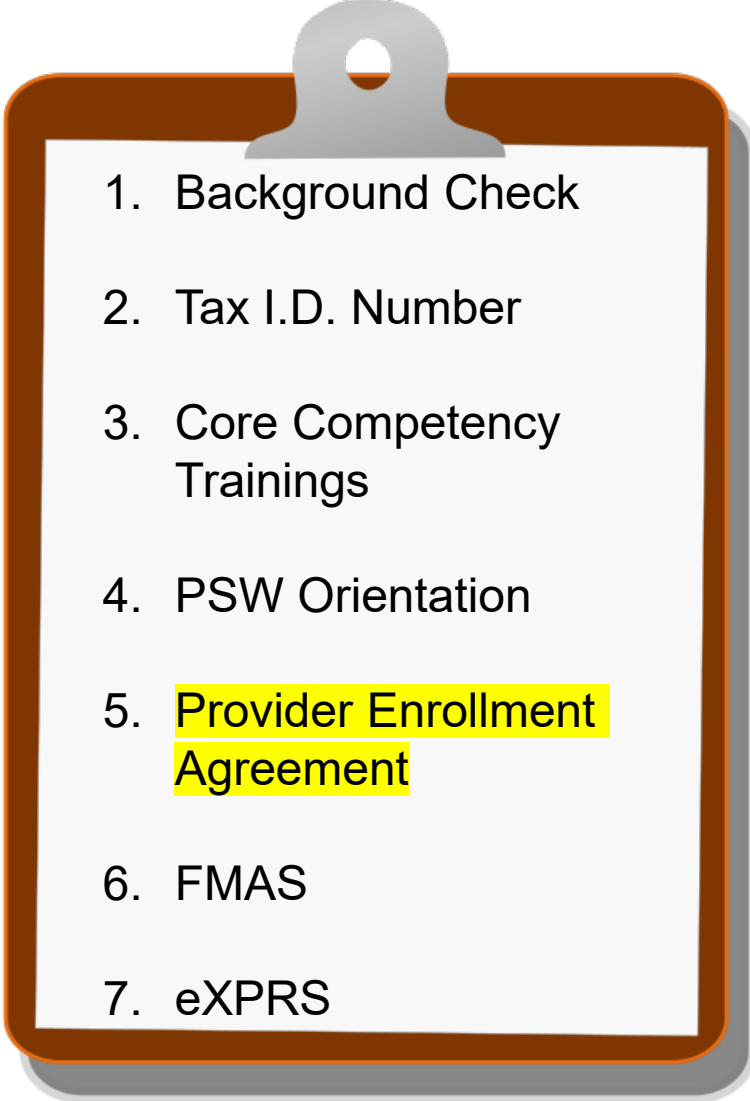
Scan & email to: psw.enrollment@dhsoha.state.or.us

Fax to: 503-947-5044

Mail to: Department of Human Services
ODDS Contracts & Provider Administration Unit
500 Summer St., NE E-09
Salem, OR 97301



What to Expect Next – Provider Enrollment Agreement

- 
1. Background Check
 2. Tax I.D. Number
 3. Core Competency Trainings
 4. PSW Orientation
 5. **Provider Enrollment Agreement**
 6. FMAS
 7. eXPRS

You'll receive an eXPRS-generated letter specifying the provider enrollment agreement's expiration date.



Index

This index is provided to give you a quick and easy way to navigate back to any tasks you want to re-visit. Just click on the task and the link will take you back to that particular section of the tool.

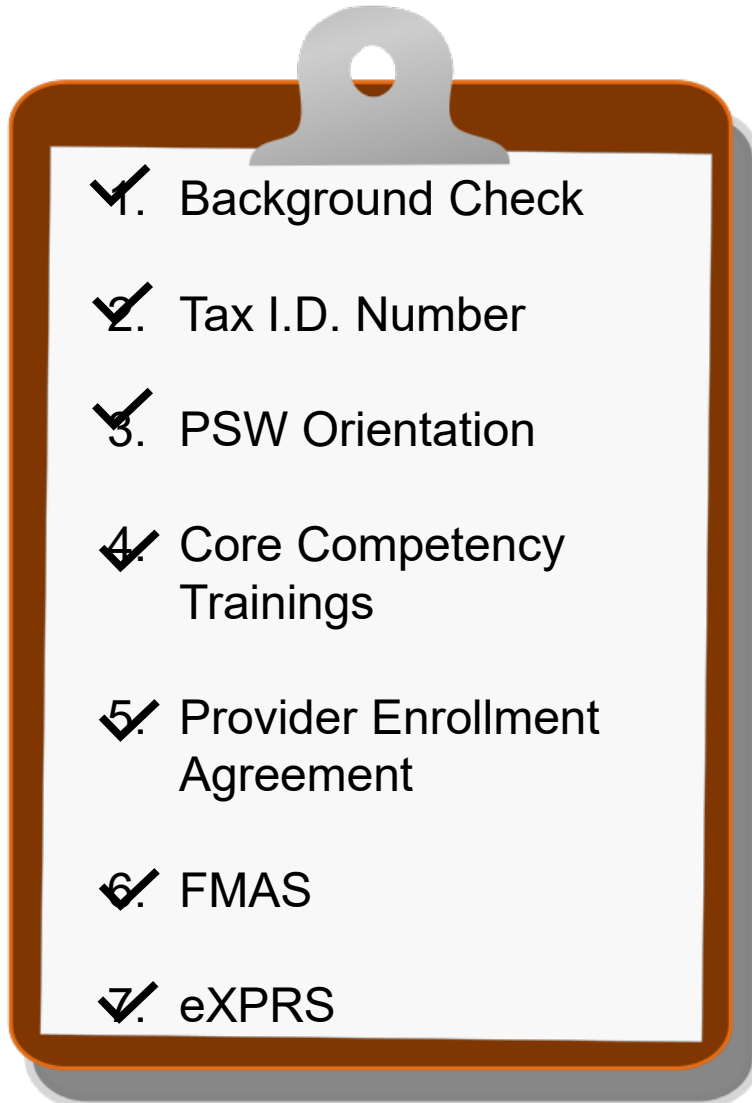
[Core Competency Trainings](#)

[Provider Enrollment](#)

[iLearn Registration](#)



PSW Job Coach Completed Checklist



Congratulations - You did it!
You'll receive an email like this:

“The purpose of this email is to inform you that the your PSW Job Coach enrollment has been completed. Your service dates are from 4/18/19 through 8/31/2021, when your current criminal background check ends. Your service dates can be extended to 4/17/2021 once you renew your criminal background check in August/2021.

Please be aware, that in order to keep your PSW Job Coach credential current, you must complete 12 continuing education credits annually. The 12 Core Competency trainings you completed for your initial credential can count towards 8 CECs for the first year.

Attached is [a list of Department-approved trainings](#) that can count as CECs.”

DONE

BACK

Workday Learning – Core Competencies - 1

Welcome, Tim Acker [E]

Announcements
1 item

Welcome to learning in Workday Oregon!
We are happy to announce iLearnOregon has been retired as the state's learning Management system, we are

Applications
3 items

Learning Helpful Links Favorites

Inbox
0 items

Go to Inbox

Log into your Workday Learning account. Click on the “Learning” application icon.

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Workday Learning – Core Competencies - 2

The screenshot displays the Workday Learning dashboard. At the top, there is a search bar and navigation icons. The main content area is divided into several sections: 'My Enrolled and Waitlisted Offerings', 'Recently Added' (featuring three course cards), 'Based on Your Interests', and 'Learning Paths'. On the right side, a vertical navigation menu is visible, with the 'Learn' section expanded. Within this menu, the 'Browse Learning Content' option is circled in red, and a red arrow points to it from the right. Other options in the menu include 'Drop Learning Enrollment', 'My Library', 'Preferences', 'Progress', 'Learning History', and 'My Learning Certificate'.

Click on the “Browse Learning Content” option



Workday Learning – Core Competencies - 3

The screenshot shows the Workday Learning interface. At the top, there is a search bar with the text 'ODHS-DD-EP' entered, circled in red with a '1' next to it. To the right of the search bar is a 'Search' button, also circled in red with a '2' next to it and a red arrow pointing to it. Below the search bar, there are four search results listed. The second result, 'ODHS - DD - EP 102 Discovery and Career Planning', is circled in red with a '3' next to it. On the left side of the interface, there are filters for 'Current Search', 'Topic', 'Delivery Mode', 'Access Type', and 'Type'. The 'Current Search' section has a 'Save' button and a 'Clear All' button. The 'Topic' section has a dropdown arrow and a list of topics. The 'Delivery Mode' section has a dropdown arrow and a list of modes. The 'Access Type' and 'Type' sections have dropdown arrows and lists of options.

1. Type “ODHS-DD-EP” in the Search box
2. Click on “Search”
3. The Core Competency courses will populate the center window
4. Scroll and click on the course you want to take



Workday Learning – Core Competencies - 4

The screenshot shows the Workday Learning interface for the course "ODHS - DD - EP 101 Introduction to Supported Employment". The course title is prominently displayed at the top. Below it, the description reads "Employment Professional Core Competency 101 - Introduction to Supported Employment." The interface is divided into two main sections: "Lessons in This Course" and "Additional Course Details".

Lessons in This Course:

Lesson ID	Lesson Title	Media	Completed
1	Core Comp: Introduction to Supported Employment	Media	0/1

Additional Course Details:

- Start Course:** A blue button with a play icon, circled in red with an arrow pointing to it.
- Duration:** 60 minutes
- Lessons:** 1
- Delivery Mode:** Self-Directed
- CONTACTS:** Eugene Rada (Contact Person)
- Save:** A bookmark icon with the text "Save".

Click on “Start Course” to begin the course content

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Workday Learning – Get Your Transcript - 1

The screenshot displays the Workday Learning interface. At the top, there is a search bar and navigation icons. The main content area is titled 'Learning' and contains several sections: 'My Enrolled and Waitlisted Offerings', 'Recently Added' (with three course cards), 'Based on Your Interests', and 'Learning Paths'. On the right side, there is a vertical menu with categories: 'Learn', 'Progress', and 'Learning History'. Under 'Learning History', the 'My Transcript' option is circled in red, with a red arrow pointing to it from the right.

Log into your Workday Learning account and click on the Learning application. Click on “My Transcript”

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Workday Learning – Get Your Transcript - 2



Q Search



My Transcript



Turn on the new tables view

Not Started 0 items



Name	Content Type	Registration Status	Date Enrolled	Completion Status	Attendance Status	Grade	Score	Record Type
No Data								

Turn on the new tables view

In Progress 0 items



Name	Content Type	Registration Status	Date Enrolled	Completion Status	Attendance Status	Grade	Score	Record Type
No Data								

Turn on the new tables view

Learning History 1 item



Name	Content Type	Registration Status	Date Enrolled	Completion Status	Completion Date and Time	Attendance Status	Grade	Score	Record Type
ODHS – HR – Interview Panelist Training	Digital Course	Enrolled	06/23/2021	Completed	06/23/2021 09:51:41 AM	Do Not Track		0	Enrollment

[Learning Home](#)

You can download your transcript to Excel or Acrobat to save or print it.

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Workday Learning – How To Log Out

The screenshot shows the Workday Learning interface. At the top right, there is a cloud icon circled with a red '1'. Below it, a dropdown menu is open, showing the user's name 'Timothy Acker' and a 'View Profile' link. The menu items are: Home, My Account, Favorites, Drive, My Reports, and Help. The 'Sign Out' button is circled with a red '2'. Below the menu, there is a toggle for 'Turn on the new tables view' and a set of view icons.

My Transcript

Not Started 0 items

Name	Content Type	Registration Status	Date Enrolled	Completion Status	Attendance Status	Grade
No Data						

In Progress 0 items

Name	Content Type	Registration Status	Date Enrolled	Completion Status	Attendance Status	Grade
No Data						

Learning History 1 item

Name	Content Type	Registration Status	Date Enrolled	Completion Status	Completion Date and Time	Attendance Status	Grade	Score	Record Type
ODHS – HR – Interview Panelist Training	Digital Course	Enrolled	06/23/2021	Completed	06/23/2021 09:51:41 AM	Do Not Track		0	Enrollment

Learning Home

1. Click on the cloud icon in the upper right corner to reveal the dropdown menu.
2. Click on “Sign Out.”

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Workday Learning – More Information

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[Oregon Department of Human Services / Seniors & People with Disabilities / Intellectual and Developmental Disabilities / Developmental Disabilities Provider and Partner Resources](#)

iLearn to Workday Learning Transition

► DD PROVIDER AND PARTNER RESOURCES

ELECTRONIC VISIT VERIFICATION PROJECT

ODDS ENGAGEMENT AND INNOVATION

DD FOSTER CARE PROVIDER RESOURCES

DD HCBS RESOURCES

BEHAVIOR PROFESSIONAL RESOURCES

☰ CERTIFICATION, ENDORSEMENT & LICENSING

PERSONAL SUPPORT WORKER

Information for Developmental Disabilities Providers, Case Management Entities and Partners

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This means that all future trainings required by the Office of Developmental Disabilities Services (ODDS) and the Oregon Department of Human Services (ODHS), including core competencies, will be on the Workday Learning platform instead of iLearn.

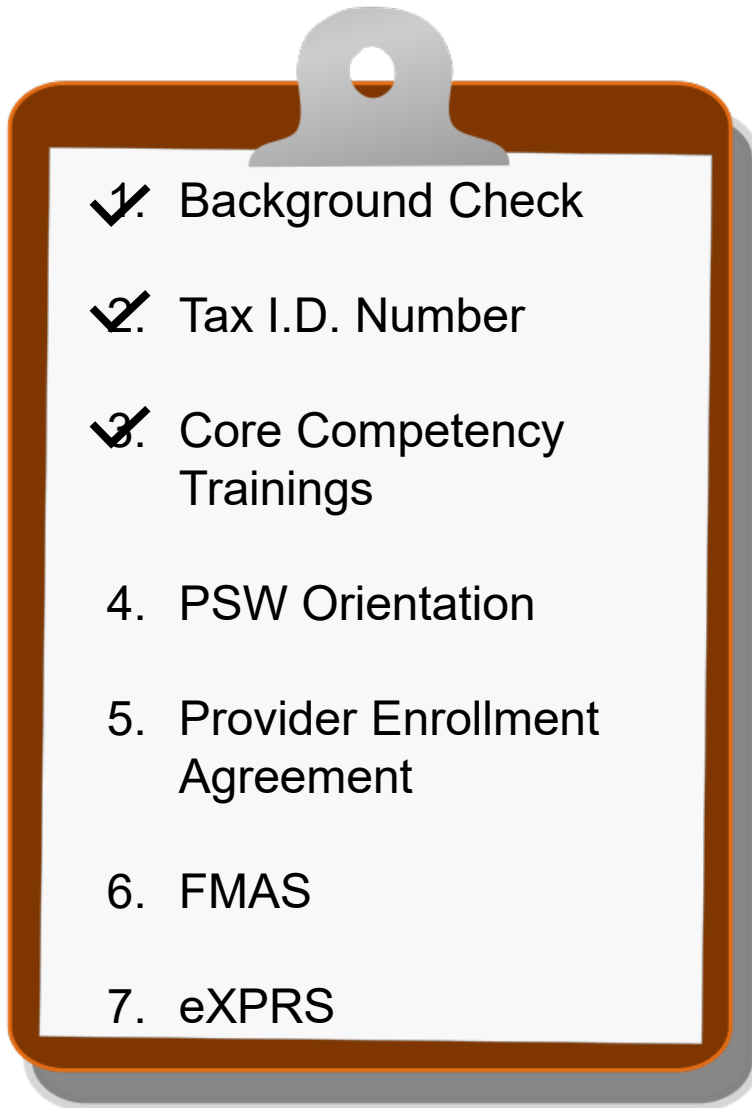
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Visit the [iLearn Transition to Workday page](#) to learn more.

Additional information about Workday Learning can be found at: [State of Oregon: Developmental Disabilities Provider and Partner Resources - iLearn to Workday Learning Transition](#)



What to Expect Next – Core Competency Trainings



You don't need to attach your Core Competency transcript to any form you are required to submit; ODDS will confirm Core Competency training completion directly from Workday Learning.

Next let's tackle new PSW Orientation.



New Personal Service Worker (PSW) Orientation

All PSWs are required to complete PSW and eXPRS Orientation within 90 days of receiving their provider number from ODDS.

PSW and eXPRS Orientation is in-person and is 3½ hours long. PSW Orientation is also available online.



New PSW Orientation - Online

New PSW online orientation requirements:

- Available only in English
- Computer (no tablets or smartphones)
- Active email address
- Currently registered in iLearn
- Register with the computer you'll use for the orientation

New PSW online orientation will take about three hours to complete, but you don't have to finish all at once.

Register at <https://www.surveymonkey.com/r/QLDMGKX>

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New PSW Orientation – In-Person

New PSW and eXPRS in-person orientation requirements:

- Available in English, Spanish, Russian and Somali
- Student can request an interpreter of any language to be with them in the classroom
- Registration is by language
 - Register in [English](#)
 - Register in [Spanish](#)
 - Register in [Russian](#)
 - Register in [Somali](#)

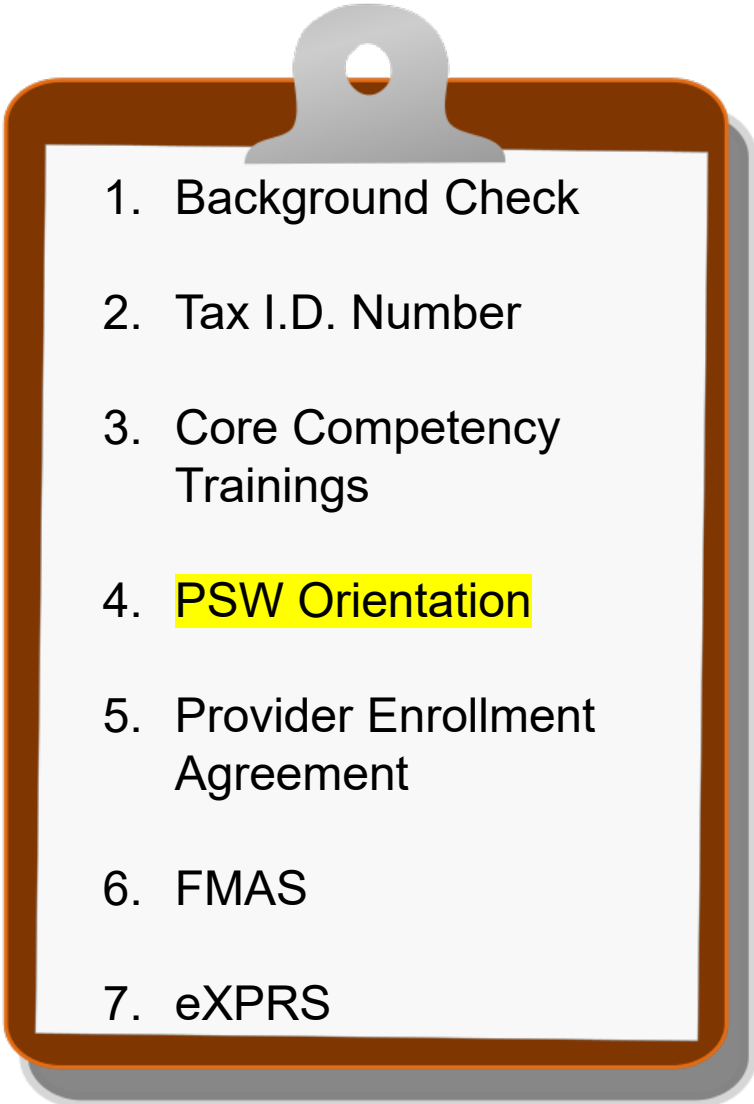
Due to COVID-19, in-person PSW Orientations are currently suspended. Follow this [link](#) for the latest updates on PSW orientation scheduling.

New PSW online orientation will take about three hours to complete; eXPRS will take an additional 1.5 hours.

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What to Expect Next – PSW Orientation

- 
1. Background Check
 2. Tax I.D. Number
 3. Core Competency Trainings
 4. **PSW Orientation**
 5. Provider Enrollment Agreement
 6. FMAS
 7. eXPRS

You can download/print a certificate of completion in iLearn upon completion of the online PSW orientation.

A certificate of completion will be given to you at the end of the in-person PSW and eXPRS orientations.

Up next – Provider Enrollment Agreement.

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PSW Provider Enrollment Agreement - 1



I/DD PERSONAL SUPPORT WORKERS ONLY

Print form

Clear form

Personal Support Worker (PSW) Provider Enrollment Application and Agreement (Revised 08/01/2018)

This Provider Enrollment Application and Agreement (*Agreement*), sets forth the conditions and agreements for being enrolled as a Medicaid Personal Support Worker (*Provider*) with the State of Oregon Department of Human Services (DHS), Office of Developmental Disabilities Services (ODDS), and to receive a Provider number to receive payment for services furnished by the Provider to approved Medicaid eligible individuals (*Recipients*) in Oregon. Payments for services are made using federal Medicaid and state funds.

Type of action requested

New enrollment Renewal or re-enrollment

Provider type requested (*mark all that apply*)

Note: All new and renewing providers will be enrolled as Personal Support Workers (84-803). Please only check those **additional** provider types which apply to your enrollment.

Legal name (*first name, middle initial, last name as listed on your current SSN card*):

- PSW Children Intensive In-Home Services (84-801)
- PSW State Plan Personal Care (84-800)
- PSW Employment Job Coach (84-809)*

*PSWs enrolling as a **Job Coach (84-809)** must have the appropriate training required in Oregon Administrative Rule (OAR) 411-345-0030 prior to enrollment and must submit training documentation with this application. Job Coach enrollment is good for two years only and must be renewed separately from this agreement.

Download the [PSW Provider Enrollment Agreement](#). It is a form-fillable Acrobat document, so you can fill it out on your computer and then print it out to submit.

The following is a filled-out example for you to follow.

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New PSW Provider Enrollment Agreement - 2

Select "New enrollment"

Type of action requested

New enrollment Renewal or re-enrollment

Provider type requested (*mark all that apply*)

Note: All new and renewing providers will be enrolled as Personal Support Workers (84-803). Please only check those **additional** provider types which apply to your enrollment.

Legal name (*first name, middle initial, last name as listed on your current SSN card*):

John X. Doe

PSW Children Intensive In-Home Services (84-801)

PSW State Plan Personal Care (84-800)

PSW Employment Job Coach (84-809)*

*PSWs enrolling as a **Job Coach (84-809)** must have the appropriate training required in Oregon Administrative Rule (OAR) 411-345-0030 prior to enrollment and must submit training documentation with this application. Job Coach enrollment is good for two years only and must be renewed separately from this agreement.

Enter your name

Select "PSW Employment Job Coach"

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New PSW Provider Enrollment Agreement - 3

Provider Information (Required)

- Disclosure of Social Security Number **is required** pursuant to 41 USC 405(c)(2)(C)(i) to establish identification, 42 CFR 455.104 and 455.436 for exclusion verification and 26 CFR 301.6109-1 for the purpose of reporting tax information. DHS may report information to the Internal Revenue Service (IRS) and the Oregon Department of Revenue under the name and Social Security Number (SSN) provided below.

Do not leave any area of this section blank, failure to fully complete will result in the denial of your application. Put "N/A" for any area that is not applicable.

Street address: City: State:
ZIP code (+4): County:

Enter your address

Mailing address (if different from above):
City: State: ZIP code (+4):
County:

Enter your mailing address

Phone number: Email:
Date of birth: SSN:

Enter your phone number, email, birthday and social security number



New PSW Provider Enrollment Agreement - 4

Check boxes as appropriate

Have you been convicted of a criminal offense related to your involvement in any program under Medicare, Medicaid or the Title XXI Services Program since the inception of those programs? Yes No

Have you been terminated or excluded from participation as a provider in Medicare or any state Medicaid or Children's Health Insurance Program (CHIP) program? Yes No

I do not have an existing Medicare, Medicaid, CHIP or Oregon DHS Provider Number

I have an existing Medicare, Medicaid, CHIP or Oregon DHS Provider Number
(list below):

Submitting Agency Information (optional)

Type name and email of
CDDP/Brokerage you used for
the background check

AnyCounty CDDP

Submitting Brokerage/CDDP/CIIS
anycountycddp@anycounty.or.us

Submitting Brokerage/CDDP/CIIS contact email

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PSW Provider Enrollment Agreement - 5

8. Provider signature

I have read the forgoing Provider Enrollment Application and Agreement and the attached Exhibit A and any endorsement addendums, understand it and agree to abide by its terms and conditions. I further understand and agree that violation of any of the terms and conditions of this Agreement constitute grounds for termination of this Agreement and may be grounds for other sanctions as provided by statute, administrative rule, or this Agreement.

1. Print your name

Print name of provider:

John X. Doe

John X. Doe

Signature of provider

01/01/2020

Signature/Effective date

2. Print out the entire application & agreement form (11 pages)

3. Sign and date in the places indicated

The Enrollment Application & Agreement packet contains a lot of information that you're going to need to read and understand.

THIS IS A CONTRACT! If anything isn't clear, contact the Provider Relations Unit at psw.enrollment@dhsostate.or.us



PSW Provider Enrollment Agreement - 6

You can file the completed document in one of several ways:

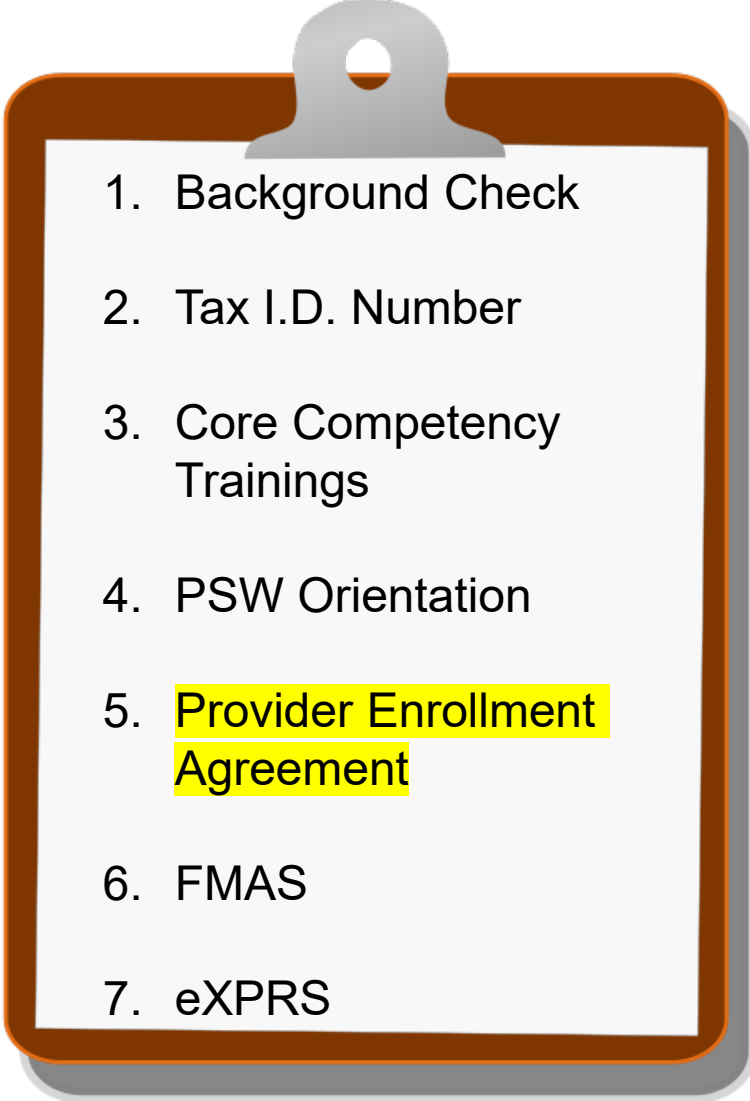
Scan & email to: psw.enrollment@dhsoha.state.or.us

Fax to: 503-947-5044

Mail to: Department of Human Services
ODDS Contracts & Provider Administration Unit
500 Summer St., NE E-09
Salem, OR 97301



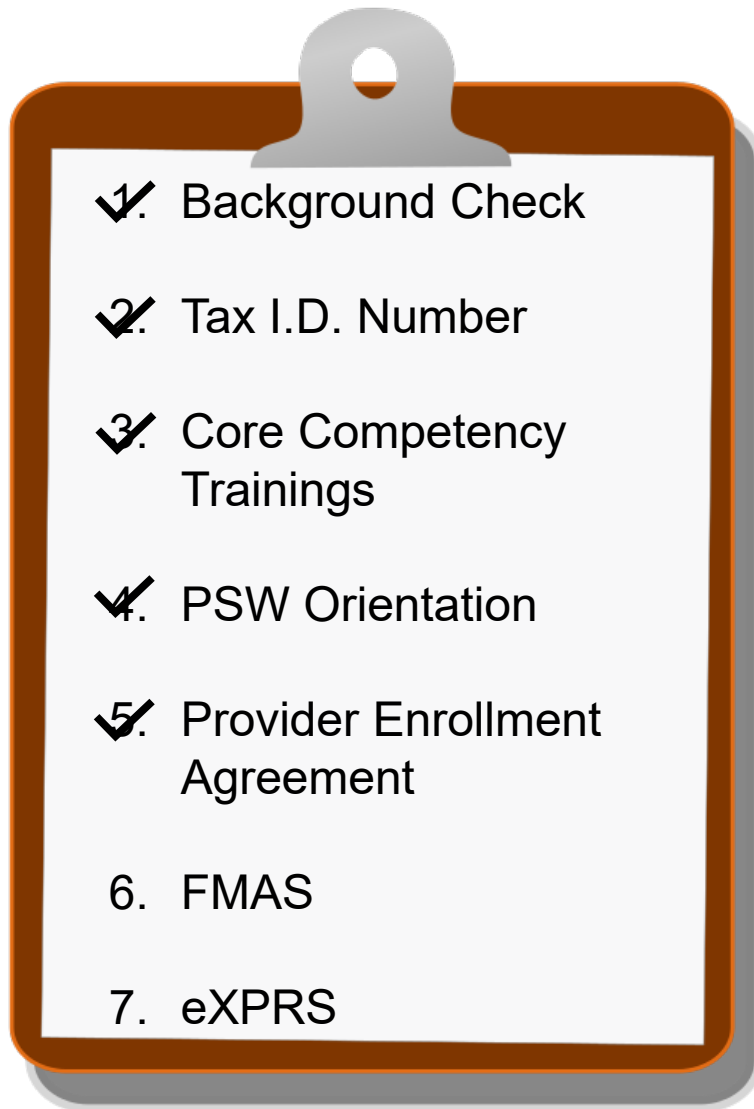
What to Expect Next – Provider Enrollment Agreement

- 
1. Background Check
 2. Tax I.D. Number
 3. Core Competency Trainings
 4. PSW Orientation
 5. **Provider Enrollment Agreement**
 6. FMAS
 7. eXPRS

You'll receive an eXPRS-generated letter specifying the provider enrollment agreement's expiration date.



New PSW-Job Coach Checklist



Almost there!

Only two more items left to complete: FMAS and eXPRS. Both of these are necessary to get paid.

Let's work on FMAS first and then finish off with signing up for eXPRS.

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[NEXT](#)

OR-FMAS (Oregon Financial Management Agent Services)

Home | Contact | Search BetterOnline™ Web Portal: [Sign Up](#) | [Login](#)

PUBLIC PARTNERSHIPS SERVICES ▾ MOBILE APPS ▾ PROGRAMS ABOUT ▾

Overview **Program Documents**

Public Partnerships provides financial management agent services for ODDS PSWs. This is an important part of how you will get paid.

Follow this link to get step-by-step help completing enrollment forms.



Who We Serve

- ✓ Adults with developmental disabilities
- ✓ Children with developmental disabilities



Services

- ✓ Payroll
- ✓ Employment tax requirements
- ✓ Enrollment Support
- ✓ Customer service

Public Partnerships is pleased to provide Financial Management Agent Services for the Individuals/Employers and Personal Support Workers who are a part of the Oregon Office of Developmental Disabilities Services (ODDS) OR FMAS program. Individuals/Employers enrolled in the OR FMAS program can recruit and hire a Personal Support Worker.

Public Partnerships helps Individuals/Employers and Personal Support Workers by:

- ✓ Helping individuals and employers enroll in OR FMAS using pre-filled forms.
- ✓ Helping Personal Support Workers enroll in OR FMAS using pre-filled forms.
- ✓ Processing payroll for Personal Support Workers
- ✓ Filing Employer related tax information

BetterOnline™ Web Portal Login

BetterOnline provides account-specific information, enrollment paperwork, timesheets, and real-time financial and service utilization reports to make sure you can be in control of your information 24/7

[Login](#)

Need to Verify your

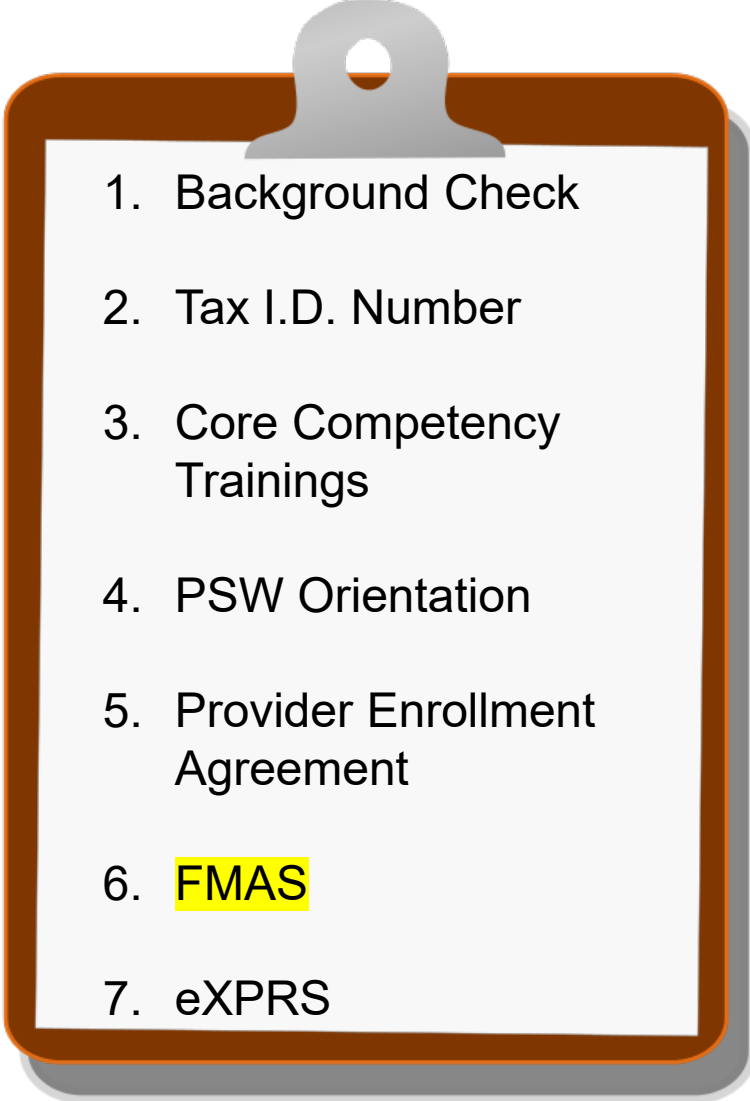


[How to Complete Enrollment Forms](#)

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What to Expect Next – FMAS

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1. Background Check
 2. Tax I.D. Number
 3. Core Competency Trainings
 4. PSW Orientation
 5. Provider Enrollment Agreement
 6. **FMAS**
 7. eXPRS

- You'll usually receive an enrollment packet from Public Partnerships by mail within ten days.
- Complete them and send them back by email or fax.
- After all forms are processed and nothing is missing, Public Partnerships will send ODDS a report stating that your enrollment is complete.
- Public Partnerships customer support is available at 888-419-7705.

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eXPRS Enrollment for New PSW Job Coaches - 1



Individual Provider – PSW or BC User Enrollment Form

Provider Types: 74-749, 83-710, 83-711, 84-800, 84-801, 84-803

INSTRUCTIONS: * Indicates required fields. Incomplete forms cannot be processed.

- Send completed form to info.exprs@state.or.us or fax to 503-947-5044.

If the form is complete and your provider record is active, your form should be processed within a week, but may take longer; please be patient.

Once your account has been created, you will receive two emails from info.exprs@state.or.us:

- The 1st email contains generic information and includes several attachments.
- The 2nd email will be secured, and includes your login name and temporary password. NOTE: Unless you already have one, you will have to set up an account with DHS' secure email system. If you need assistance with a secure email, please contact the DHS Service Desk at 503-945-5623 and choose option 3.

If you have not received an email within one week, please check your junk or spam folder. If it is not received within 10 days, please send an email to info.exprs@state.or.us to check on the status.

* Indicate Action: <input type="checkbox"/> Add User <input type="checkbox"/> Modify User <input type="checkbox"/> Deactivate User <input type="checkbox"/> Change of Info	
* User's Name: (Last, First MI) (Print Name)	Already have an eXPRS login name?
* Job Title (*check one): <input type="checkbox"/> Personal Support Worker <input type="checkbox"/> Behavior Consultant	* Provider Number(s) (SPD or eXPRS):
* Address: (Mailing Address)	* City, State, Zip:
* Phone Number:	* Email Address: (must be your unique email address; it cannot be shared with another eXPRS user)

Add	Del	User Role/Description
<input type="checkbox"/>	<input type="checkbox"/>	Provider PSW/IC/BC Claims Manager – able to <u>Create/Submit/View</u> Service Delivered (SD) billing entries; able to <u>Create/Submit/View</u> PSW Travel Time claims; able to view Service Prior Authorizations (SPAs), PSW credential information, claims and payment information; able to print PSW timesheets.

* Print Name	
* Signature:	* Date: / /

Keep a copy of this form for future reference.

Enroll Individual Provider User (PSW or BC) REFORMATTED (v4; 8-10-18)

eXPRS is the state's computer system that allows you to enter your invoices for authorized job coaching services and get paid.

Download the [eXPRS enrollment form for PSW's](#)

Print out the form (it cannot be filled out online), fill it out manually, scan it and attach it to an email or fax it.

The following are step-by-step instructions on how to fill out the form.



eXPRS Enrollment for New PSW Job Coaches - 2

Follow the example below by putting in your information. Note that the Provider Number is the number you received resulting from the Provider Enrollment process (slides 75-80).

* Indicate Action: <input checked="" type="checkbox"/> Add User <input type="checkbox"/> Modify User <input type="checkbox"/> Deactivate User <input type="checkbox"/> Change of Info	
* User's Name: (Last, First MI) (Print Name) Doe, John X.	Already have an eXPRS login name? N/A
* Job Title (*check one): <input checked="" type="checkbox"/> Personal Support Worker <input type="checkbox"/> Behavior Consultant	* Provider Number(s) (SPD or eXPRS): UI12345678
* Address: (Mailing Address) 1234 AnyStreet	* City, State, Zip: AnyTown, OR 97000
* Phone Number: (503) 000-0000	* Email Address: (must be your unique email address; it cannot be shared with another eXPRS user) john.doe@email.com



eXPRS Enrollment for New PSW Job Coaches - 3

Add	Del	User Role/Description
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Provider PSW/IC/BC Claims Manager - able to <u>Create/Submit/View</u> Service Delivered (SD) billing entries; able to <u>Create/Submit/View</u> PSW Travel Time claims; able to view Service Prior Authorizations (SPAs), PSW credential information, claims and payment information; able to print PSW timesheets.

*Print Name John X. Doe	
*Signature: <i>John X. Doe</i>	*Date: 05/05 / 2019

Keep a copy of this form for future reference.

Enroll Individual Provider User (PSW or BC) REFORMATTED (v4; 8-10-18)

Scan the completed form and email to info.exprs@dhsosha.state.or.us OR fax to (503) 947- 5044. Keep a copy for your files.

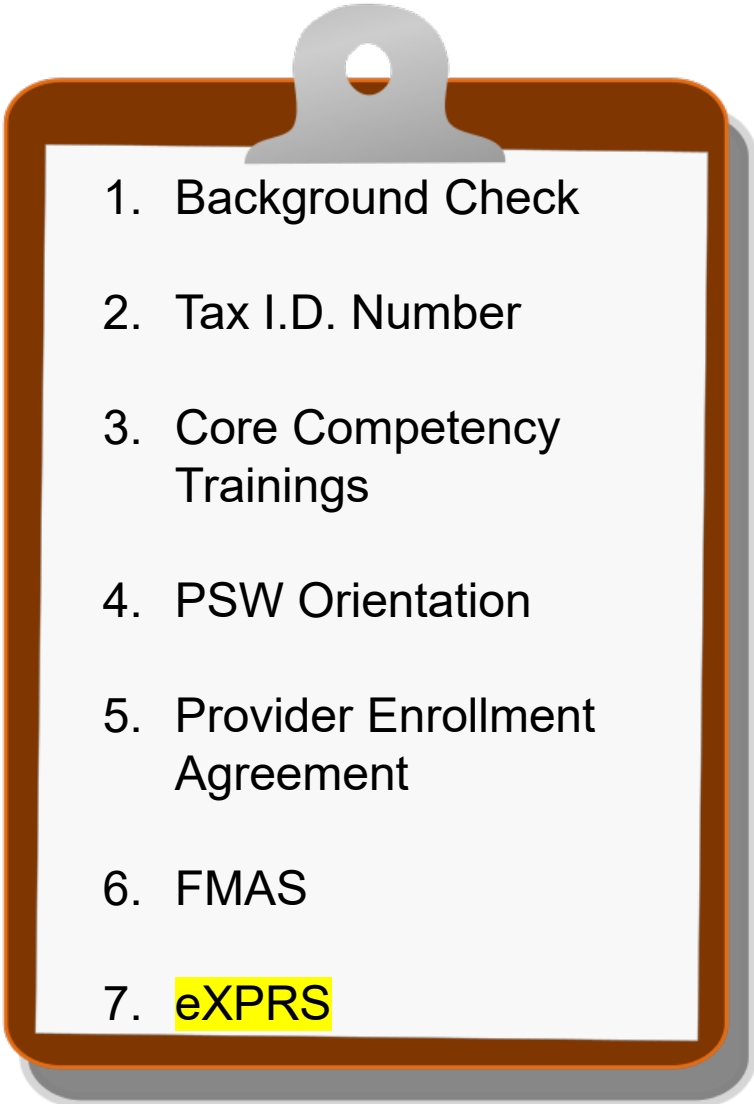
➤ Are you a registered user of DHS' secure email system?

YES

NO

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What to Expect Next – eXPRS

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 5. Provider Enrollment Agreement
 6. FMAS
 7. eXPRS

If the form is complete and your provider record is active, your form should be processed within a week, but it may take longer; please be patient.

Once your account has been created, you will receive two emails from

info.exprs@dhsosha.state.or.us:

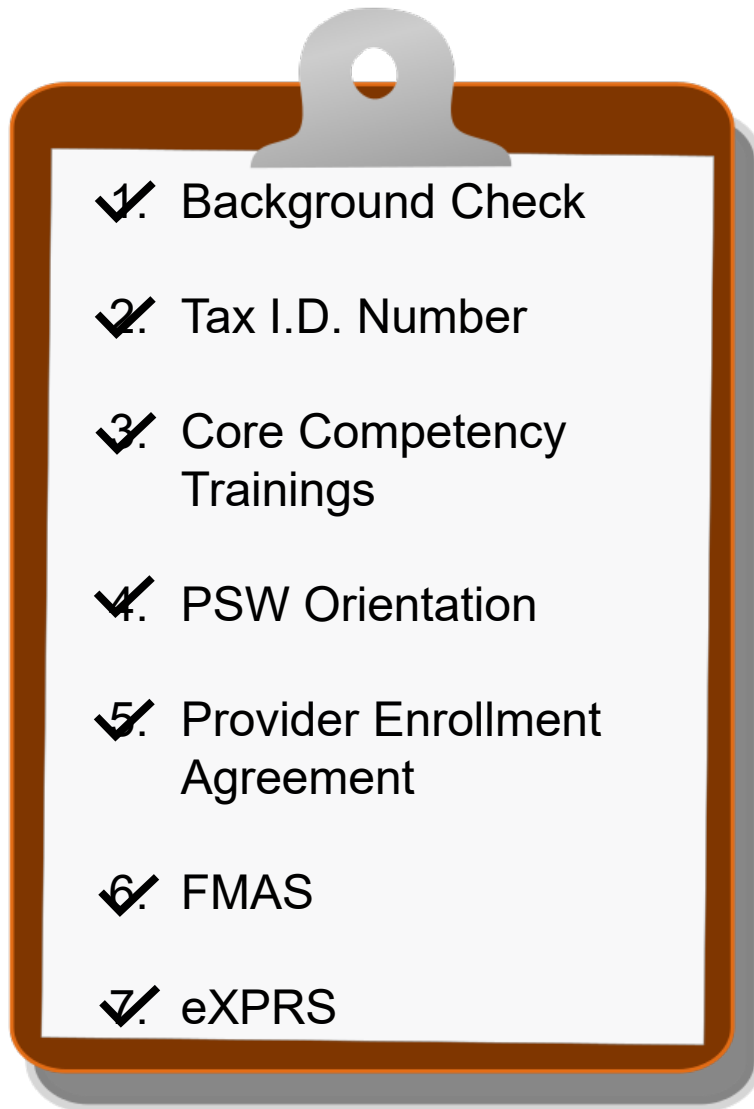
- The 1st email contains generic information and several attachments.
- You'll need to be registered in the DHS Secure Email System. Click here if you are not already registered and we'll help you set that up.
- The 2nd email will be secured and includes your eXPRS login name and temporary password.

If you have not received an email within one week, please check your junk or spam folder. If it is not received within ten days, please check on the status by emailing info.exprs@dhsosha.state.or.us.

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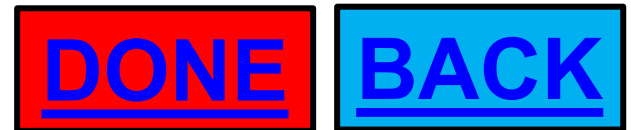
New PSW-Job Coach Checklist



Congratulations – you did it!

You've completed the process of how to become a PSW job coach. If you have additional questions about this process, please contact

EmploymentTraining.Review@dhsosha.state.or.us



DHS Secure Email System



Secure Email Instructions



The Oregon Health Authority (OHA) and Department of Human Services (DHS) are strongly committed to protecting the privacy and security of all of the people we serve. That is why we require that all email be sent securely if it contains protected client information.

- You can only send secure email to addresses that end with @dhsoha.state.or.us.
- You must complete all steps – logging in, composing and sending your secure email – in the same browser, on the same device, within one 60-minute period.

Starting a secure email to DHS or OHA

Go to <https://secureemail.dhsoha.state.or.us/encrypt>. Enter your email address, then click "Continue."

- First-time users will go to the "Registration" page.
- Returning users will go to the "Login" page.

Registration (for first-time users)

Enter all fields, then click "Continue." Passwords must:

- Be 8-20 characters long.
- Contain at least one digit (0-9).
- Contain both upper- and lower-case letters.
- Not contain your username.

You will get an activation request email. When you click the link in the email, you will get to compose your secure email.

Login (for returning users)

Enter your password, then click "Continue" to compose your secure email. If you forget your password:

- Click "Forgot Password."
- You will get to enter a new password, then get a password authentication email.
- When you click the link in the email, you will get to compose your secure email.

Composing secure email

Once logged in, you can securely send attachments and any information you need to share.

Questions? Email dhs.servicedesk@dhsoha.state.or.us or 503-945-5623.

Because DHS is committed to protecting the privacy and security of all the people we serve, we require all email be sent securely if it contains protected client information.

First-time users need to register at

<https://secureemail.dhsoha.state.or.us/encrypt>.

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DHS Secure Email System



Secure Email

Please provide your email address to proceed.

First time here? *You'll be asked to register.*

john.doe@email.com

Continue

Enter your email address to begin the registration process.

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DHS Secure Email System



Registration

Create your account to read secure email.

Email Address: john.doe@email.com

First Name:

John

Last Name:

Doe

Password:


Confirm Password:

Continue

Enter your first and last name, and then set the cursor to the "Password:" field.



DHS Secure Email System



Registration

Password Policy ×

- Passwords must be 8-20 characters long.
- At least one digit (0-9) is required.
- Both uppercase and lowercase characters are required.
- Your username may not appear in the password.

Create your account to read secure email.

Email Address:

First Name:

Last Name:

Password:

Confirm Password:

Enter a password of your choice consistent with the Password Policy, then click on “Continue.”



DHS Secure Email System



Activation Request Sent

A verification message was sent to your email address which contains a URL you must use to activate your account. Once active, you will be able to send your secure message.

If you do not receive this message within a few moments, please check your spam folder or other filtering tools you may be using as this activation message sometimes gets blocked.

You'll receive an email containing a link to activate your secure email account.



DHS Secure Email System

The activation email will look something like this. Click on the link.



← [Icons] 1 of 124 < > [Settings]

Proofpoint Encryption Registration [Inbox x]

proofpoint-pps@dhssoha.state.or.us
to me ▾

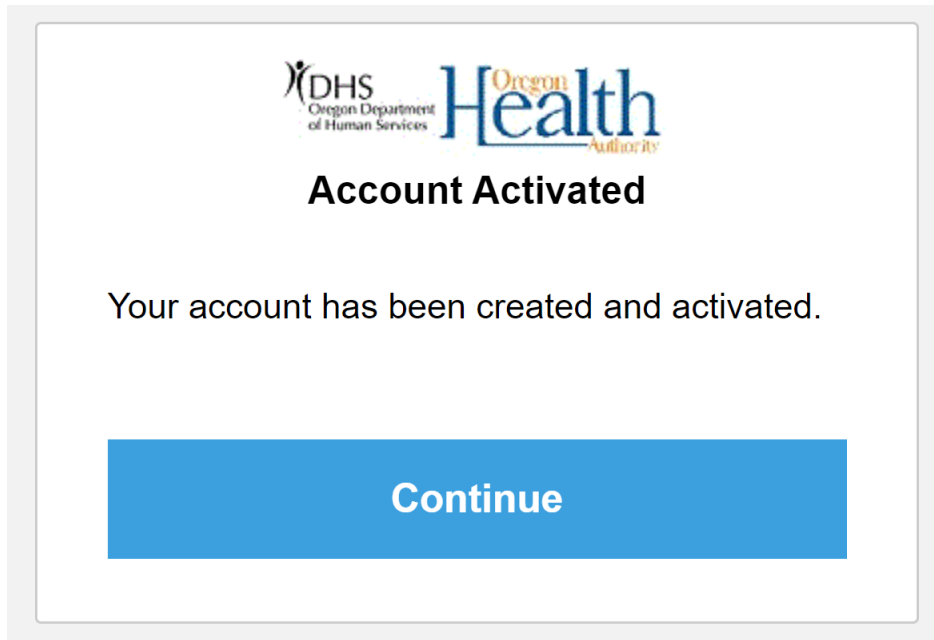
This is the URL to activate your account. Please click the following link to activate your account to send a secure message: <https://secureemail.dhssoha.state.or.us/secrereader/activate?token=npH6h8nfw23Viq7siQ2N&brand=d0c67197>. Note: This URL will only work once and will expire in 30 minutes. To restart the activation process, you must start over at the initiate URL.

11:46 AM (4 minutes ago) ☆ ↶ ⋮

↶ Reply ➡ Forward



DHS Secure Email System



The next message will confirm that your secure email account has been activated and you're ready to send secure emails to addresses that end in @dhsoha.state.or.us.



DHS Secure Email System

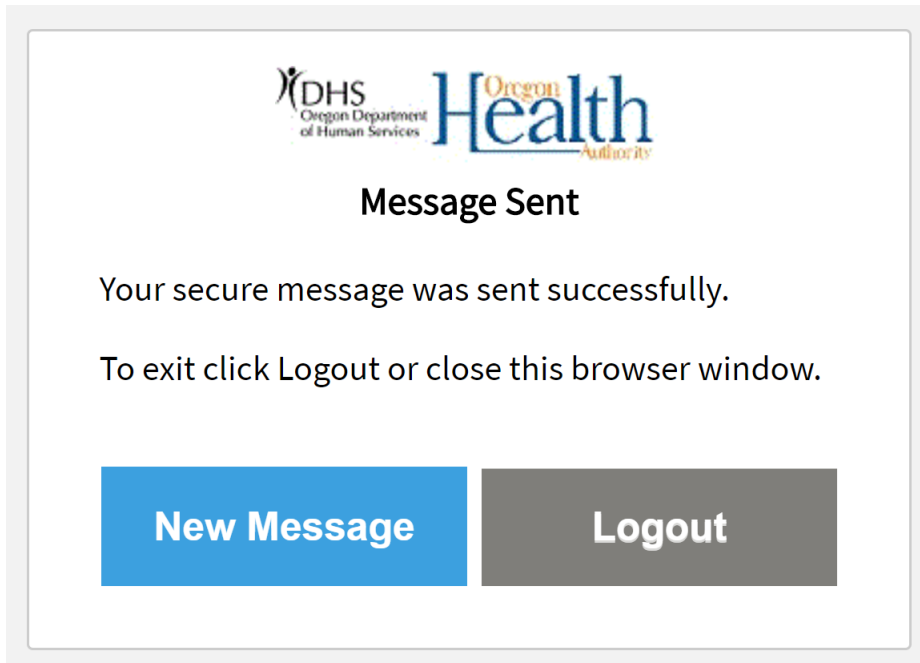
The secure email form will look like this. You may want to send a test message to someone you know at DHS to make sure everything is working.

The screenshot shows the DHS Secure Email System interface. At the top left is the DHS Oregon Department of Human Services logo, and at the top right is a 'Logout' button. Below the header is a grey bar containing a 'Send' button on the left and a 'Help' button on the right. The main area contains three input fields for 'To:', 'Cc:', and 'Subject:'. Below these fields is a checkbox labeled 'Send me a copy' and an 'Attach a file' button with a paperclip icon. At the bottom is a rich text editor toolbar with options for font face (Sans Serif), font size (Normal), bold (B), italic (I), underline (U), strikethrough (ABC), text color (A), background color (A), subscript (x₂), superscript (x²), heading 1 (H1), heading 2 (H2), quote (”), list (bulleted), ordered list, link, and unlink.

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DHS Secure Email System



Once your email is successfully sent, you'll see this confirmation message.

Click "Logout" to leave the DHS secure email system.



DHS Secure Email System



Logged Out

You are now logged out and can close this browser window.

You're all set!



Index

This index is provided to give you a quick and easy way to navigate back to any tasks you want to re-visit. Just click on the task and the link will take you back to that particular section of the tool.

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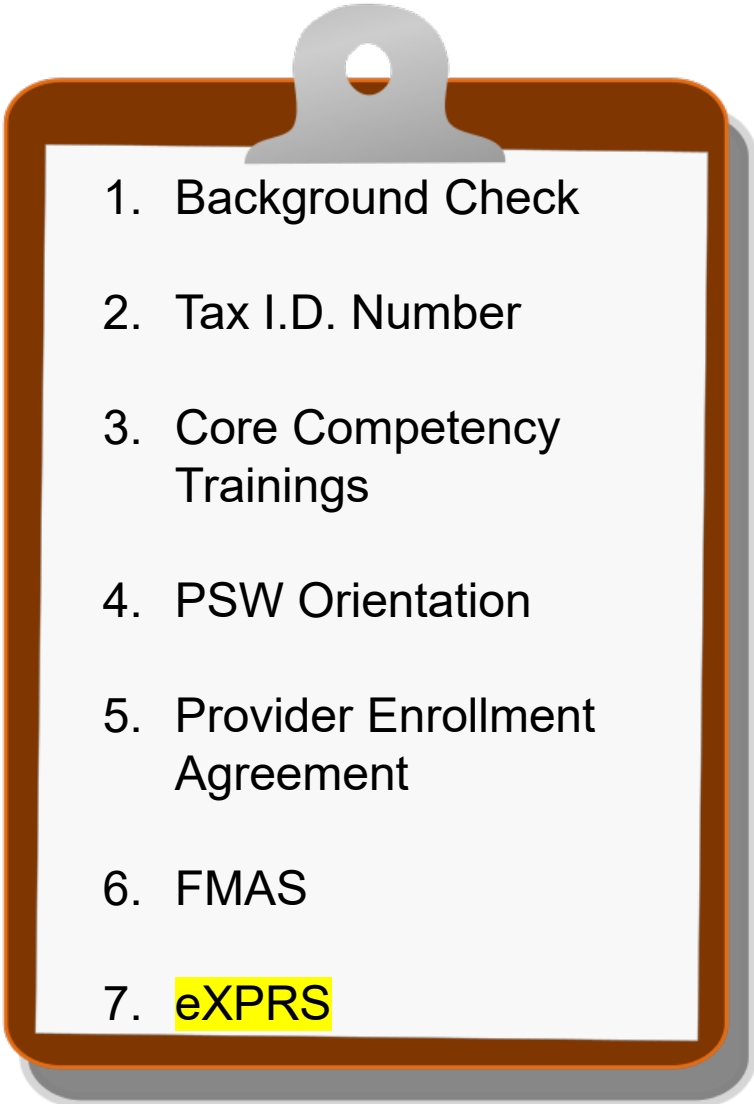
[Provider Enrollment](#)

[FMAS](#)

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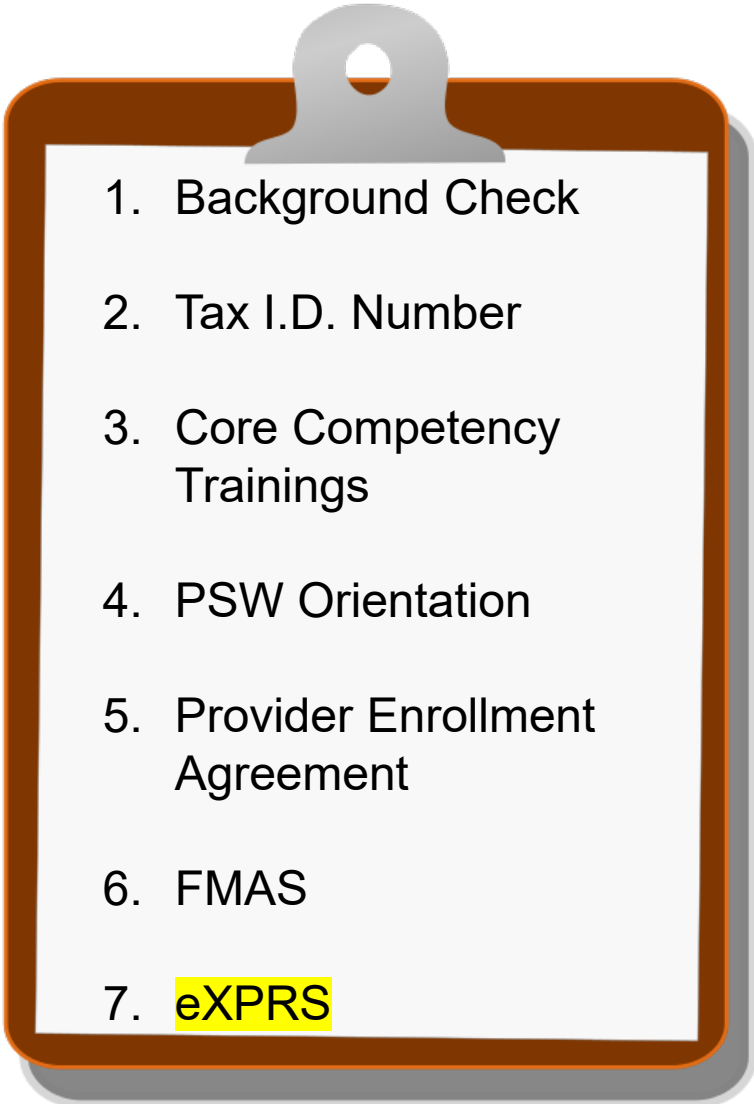
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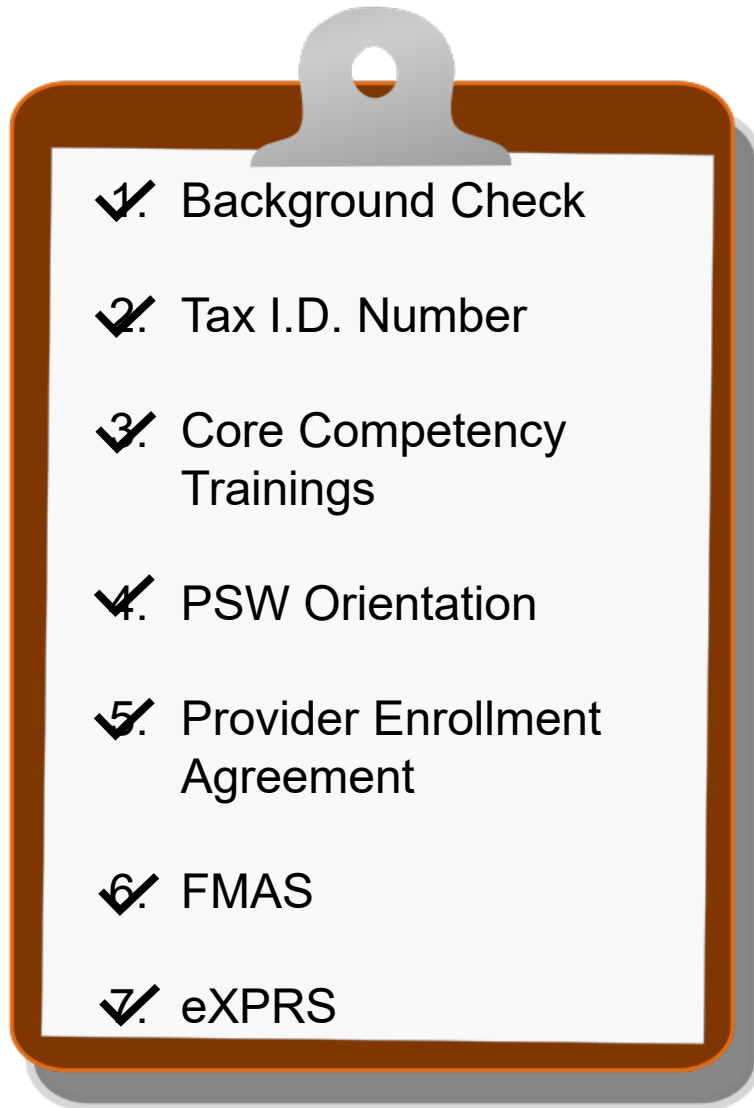
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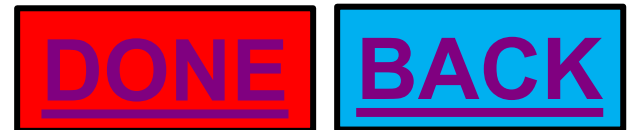
New PSW-Job Coach Checklist



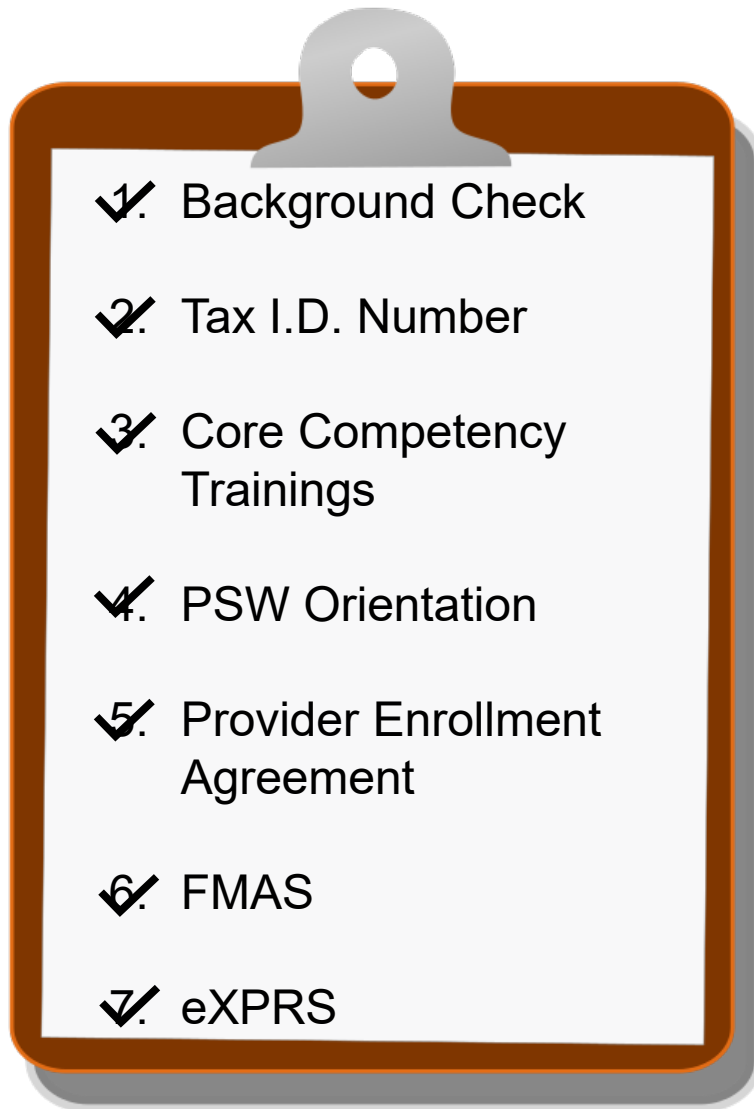
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