Brokerage User Enrollment Form

Incomplete or illegible forms will not be processed. An asterisk indicates required fields. Maintain form in local file for audit purposes. Send completed for to Info.eXPRS@odhsoha.oregon.gov or fax to (503) 947-5044.

Select Action	
☐ **Add User**	☐ **Modify User**
☐ **Deactivate User**	☐ **Change of Information**

User Information	
***User's Name: (Last, First MI)**	eXPRS Login Name:
*Job Title:	*Name of Organization:
*Organization Address: (*Mailing Address*)	*City, State, Zip:
*Phone Number:	*Email Address:

Brokerage Organization User Roles

Add	Del	Roles	User Role/Description
Contracting Roles			
☐	☐	**Brokerage IGA Manager**	Requires approval by an Authorized Board Delegated Signatory**.** Has all IGA Coordinator permissions, and also - • **Accept/Reject:** Contract and funding allocation information (PAL, SEPA etc.), Individual, Provider, SIS Assessment Information • **Run:** Various Payment and Enrollment reports
☐	☐	**Brokerage IGA Coordinator**	• **View:** Contract funding (PAL, SEPA etc.) • **Run:** Contract and funding-related reports

Plan of Care Roles			
☐	☐	**Brokerage POC Super User**[1]	All Brokerage POC Manager permissions, and also – • **Split:** Plan of Care Plan Lines and Service Prior Authorizations
☐	☐	**Brokerage POC Manager**	All Brokerage POC Preparer permissions, and also • **Submit/Withdraw/Void:** Plan of Care Plan Lines & Service Prior Authorizations • **View:** Claims, Service Delivered Billing Entries, Individual, Provider information
☐	☐	**Brokerage POC Preparer**	All Brokerage POC Viewer permissions, and also – • **Create/Save/Update/Delete:** Draft Plan Lines & Service Prior Authorizations
☐	☐	**Brokerage POC Viewer**	• **View**: Plans of Care, Plan Lines, Service Prior Authorizations, Service Delivered Billing Entries, Individual, Provider information • **Run:** Plan of Care reports
☐	☐	**Brokerage POC Claims Manager**	All Brokerage POC Claims Reviewer permissions, and also - • **Create/Delete/Update/Submit:** Service Delivered Billing Entries • **Run:** Plan of Care reports
☐	☐	**Brokerage POC Claims Reviewer**	All Brokerage POC Claims Viewer permissions, and also - • **Accept/Reject:** Pending Service Delivered Billing Entries
☐	☐	**Brokerage POC Claims Viewer**	• **View:** Service Delivered Billing Entries, Claims, Plan of Care, Plan Line, Service Prior Authorization information
☐	☐	**Brokerage Provider Panel Manager**	All Brokerage Provider Viewer permissions, and also - • **Add/Update/Remove:** Provider Panel • **View:** Provider Information • **Run:** Provider-Site Expire reports able
View Only Roles			

[1] Requires completion of POC Super User training. Max 3 per Brokerage.

☐	☐	**Brokerage Provider Viewer**	• **View:** Provider Panel, Limited provider information • **Run:** Provider Status, CHC/PEAA Expire reports
☐	☐	**Brokerage Provider EVV Exceptions Manager**	• **Add/Update/Remove**: PSW EVV Exceptions
☐	☐	**SIS Brokerage Viewer**	• **View:** Individual SIS Assessments
☐	☐	**Brokerage eXPRS View Only**	• **View:** Individual, Provider, Case Management and Direct CPA Services information
☐	☐	**Brokerage eXPRS Report Access Only**	• **Run:** Various eXPRS reports.

Brokerage PA Case Management User Roles

Add	Del	Roles	User Role/Description
☐	☐	**CM Personal Agent**	**No permissions.** Adds name to dropdowns for RFFS claims, DDEE forms, etc.
☐	☐	**PA CPA Manager**	Cannot be assigned with PA Encounter Manager. All PA CPA Preparer permissions, and also - • **Submit/Void:** Case Management (SE148) Client Prior Authorizations
☐	☐	**PA CPA Preparer**	• **Create/Delete/Edit:** Draft Case Management Client Prior Authorizations (SE148) • **View:** Individual and Case Management Service information

			• **Run:** Case Management Service & RFFS Payment Reports
☐	☐	**PA Encounter Manager**	Cannot be assigned with PA CPA Manager. • **Create/Delete/Update/Submit/Void:** Case Management (SE148) RFFS claims • **View:** Individual and Case Management Service information • **Run:** Case Management Service & RFFS Payment Reports
☐	☐	**Brokerage Eligibility Enrollment Processor**	All Brokerage Eligibility Enrollment Viewer permissions, and also – • **Complete/Update/Accept/Reject:** Section 3a of the Brokerage DD Eligibility Enrollment (0337) • **Submit/Withdraw:** Brokerage DD Eligibility Enrollment (0337)
☐	☐	**Brokerage Eligibility Enrollment Viewer**	• **View:** Brokerage DD Eligibility Enrollment (0337), Individual information.
☐	☐	**Brokerage ONA PA**	This role cannot be assigned until the user completes their required three-part training in Workday. The user or their manager should submit a copy of the certificate along with the User Enrollment Form. A user cannot be assigned this role and the ONA Assessor role at the same time. All Brokerage ONA Viewer permissions, and also – • **Create/Delete/Update/Submit/Void:** Oregon Needs Assessment
☐	☐	**Brokerage ONA Assessor**	This role cannot be assigned until the user completes the virtual ONA New Assessor Orientation. The user or their manager should submit a copy of the certificate along with the User Enrollment Form. A user cannot be assigned this role and the ONA PA role at the same time All Brokerage ONA Viewer permissions, and also –

			• **Create/Delete/Update/Submit/Void:** Oregon Needs Assessment
☐	☐	**Brokerage ONA Viewer**	• **View:** Oregon Needs Assessment, Individual, Provider, Plan of Care, Service Prior Authorization information

Signatures Required for All Roles (Except IGA Manager)

Manager: *(Print Name)*	**Phone Number:**	**Ext.:**
Manager Title:	**Email Address:**	
Manager Signature:	**Date:**	

Signatures Required for IGA Manager Role Only

Authorized Board Delegated Signatory: *(Print Name)*	**Phone Number:**	**Ext.:**
Title:	**Email Address:**	
***Authorized Board Delegated Signatory:** *(Signature)*	**Date:**	