

### Provider Screening Module user manual

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### Contents:

1	Why	Why do we have this enrollment process?		
2	Maki     2.1     2.2     2.3     2.4     2.5     2.6     2.7     2.8	How do I log in? I forgot my password. Can I retrieve or reset it?   I registered using an old email address I don't have access to anymore, and I've forgotten my pas word. How can I log in?   Someone stole my identity and created an account or took over my existing account. How do I g control of my account back?   Can I change my username or password?   Can I delete my account?		
3	<b>Provi</b> 3.1 3.2 3.3 3.4	ider help documentation   Do I count as a provider?   How do I change my name in this system? Can I update it in one place for all my enrollments?   How do I update my contact information for an approved enrollment? Can I update it in one place for all my enrollments?   How do I update my license/certification information for an approved enrollment (e.g., if I have renewed my license)?	<b>7</b> 7 7 8 8	
4	Enro 4.1 4.2 4.3 4.4 4.5 4.6 4.7 4.8 4.9 4.10 4.11 4.12 4.13	<b>Ilment</b> What information do I need to apply to enroll?   What is an NPI?   What are the steps in the enrollment process?   Who can view enrollments?   Which enrollment information can a provider, service agent, or state Medicaid agency staffer modify or delete?   How will a provider learn when their enrollment changes status?   Can I create an enrollment for someone else?   Can I start an enrollment now and finish it later, or do I have to start and submit it all in one session?   Can I start a draft enrollment or update an enrollment?   How do I renew an enrollment or update an enrollment?   Can I change something in a pending enrollment after I submit it?   How will I find out when my enrollment is accepted or rejected?	<b>9</b> 9 9 10 10 10 10 10 11 11 11 11	

		What can I do to reduce the risk of delay or rejection for an enrollment?	11
			12
	4.16	Am I employed and/or independently contracted by a group practice?	12
	4.17	What are the types for "Ownership or Control Interest"?	12
	4.18	What do "Title V", "Title XX", etc. refer to?	13
	4.19	Can I create multiple enrollments for one person (e.g., if a person is licensed as two or more kinds of	10
	4.20	provider)?	13
	4.20 4.21	How do I input an enrollment for an individual provider who is affiliated with multiple organizations	13
	4.21	(e.g., a psychologist who works for two clinics)?	13
	4.22	How do I input an enrollment for an organization with several individual providers (e.g., a clinic	15
		employing several physicians)?	13
	4.23	When an organizational provider owns a number of separately located facilities in the state, does each	
		facility need to enroll separately?	13
	4.24	What do I do if none of the provider types seem to describe what I do (what this provider does)?	14
	4.25	How can I update an existing organizational enrollment to add a new provider (e.g., if a clinic hires a new physician)?	14
	4.26	How can I update an existing organizational enrollment to remove a provider (e.g., if a physician	
		retires from a clinic)?	14
	4.27	How do I view license/certification files?	14
	4.28	What if I know from past experience that someone else with the same name, address, or NPI has	
		previously been excluded from Medicaid and that automatic checks are likely to flag this enrollment	
		as a result?	14
	4.29	How do I end (terminate) my own active enrollment?	15
5	Some	ce agent help documentation	17
5	5.1	Who is allowed to be a service agent?	17
	5.2	Is it acceptable for me to fill out and sign the Provider Statement on the provider's behalf?	17
	5.2	When the state accepts or rejects an enrollment I've submitted, how do I find out? Is it my responsi-	17
	5.5	bility to notify the provider?	17
	5.4	Can I submit a batch submission to renew several providers' enrollments?	18
	5.5	How do I change a provider's name in this system? Can I update it in one place for all their enrollments?	
	5.6	How do I update the contact information for an approved enrollment? Can I update it in one place for	
		all their enrollments?	18
	5.7	How do I update the license/certification information for an approved enrollment (e.g., if the provider	
		has renewed their license)?	18
	5.8	How do I terminate an enrollment (e.g., if a provider retires or dies)?	18
(	A		10
0		ication reviewer help documentation How do I use the enrollment verification process?	<b>19</b> 19
	6.1 6.2	How do I look at and change the risk assessment rules?	19 20
	6.2 6.3	What's the difference between an agreement and an addendum?	20 20
	6.4	What's the difference between an agreement and an addendum?	20 20
	6.5	Where do I create, edit, or delete a provider type?	20 20
	0.5		20
7	Syste	em administrator help documentation	21
	7.1	What's the difference among the different user roles?	21
	7.2	Why can't users register for their accounts?	21
	7.3	Why can't users log in?	21
	7.4	Which user information is required or optional?	22
	7.5	Who can modify or delete user information?	22
	7.6	Can I connect PSM login to another authentication system?	22

This code is a work-in-progress and is not yet ready for production deployment. Please see our code repository<sup>1</sup> for details, and check our current status.

If you have suggestions for improving this user help guide, please add them as comments on this issue<sup>2</sup> or as emails to this mailing list<sup>3</sup>. Thank you!

<sup>&</sup>lt;sup>1</sup> https://github.com/SolutionGuidance/psm/ <sup>2</sup> https://github.com/SolutionGuidance/psm/issues/338

<sup>&</sup>lt;sup>3</sup> https://groups.google.com/forum/#!forum/psm-dev

### Why do we have this enrollment process?

Under Medicaid and similar programs, federal and state governments pay doctors, pharmacists, and other medical service providers for treating patients. State and federal regulations require providers to meet eligibility standards. The enrollment process is where we verify that eligibility. The Provider Screening Module (PSM) helps states manage the enrollment process so that eligible providers can serve Medicaid clients.

The goal of the PSM is to make it as easy as possible for providers to enroll (encouraging enrollment and thus improving service to Medicaid patients), and as easy as possible for administrators to manage enrollments.

#### Making and changing your account on this site

### 2.1 How do I register for an account on this site?

This depends on whether you are a healthcare provider or not.

#### 2.1.1 If you're a healthcare provider:

Go to the main page and click the "Register New Account" link. The site will help you create an account that can submit enrollment applications for individual or organizational healthcare providers.

A new account needs a username, first and last name, and an email address. The site will create a random password and email it to you.

Your account can also have a middle name (this is optional).

This site does not enforce any limits on the number or type of characters in the user's first name, last name, username or password.

You will need to have JavaScript turned on in your browser<sup>4</sup>.

#### 2.1.2 If you are not a healthcare provider:

You probably want to create an account to be a "service agent" (someone who helps get providers enrolled) or a "service admin" (a state employee who approves and rejects enrollments). Please speak with the state Medicaid office for an account.

### 2.2 How do I log in?

Go to the main page of the website and enter your username and password, and click the "Login" button.

<sup>&</sup>lt;sup>4</sup> https://www.enable-javascript.com/

### 2.3 I forgot my password. Can I retrieve or reset it?

On the main page, click the "Forgot Password?" link and enter your username and email address. Click the "Reset Password" button. The website will email you a new password to use to log in.

### 2.4 I registered using an old email address I don't have access to anymore, and I've forgotten my password. How can I log in?

You will need to contact your state Medicaid office directly to get your account information changed and to get a new password.

### 2.5 Someone stole my identity and created an account or took over my existing account. How do I get control of my account back?

To get your account back after identity theft, you will need to contact your state Medicaid office directly.

### 2.6 Can I change my username or password?

You can't change your username after you register it.

You can change your password using the Change Password page. Go to "My Profile" and click the "Change Password" link.

### 2.7 Can I delete my account?

No, you cannot. A future version of the PSM may let you do so.<sup>5</sup>

### 2.8 I stopped using the PSM for a while and when I came back I had to log in again. Is that normal?

Yes. For security purposes, the PSM will automatically log you out after you haven't interacted with the application for a given amount of time. The default is 30 minutes, but it may be as little as 15 minutes depending on the guidelines in your state.

<sup>&</sup>lt;sup>5</sup> https://github.com/SolutionGuidance/psm/issues/327

### Provider help documentation

This is documentation for health care providers using the Provider Screening Module.

### 3.1 Do I count as a provider?

Providers are:

- · people and organizations that render health care services
- group practices that furnish health care supplies to patients
- in some cases, other people or organizations who are eligible to be reimbursed through Medicaid for providing certain services

Providers can be sole proprietorships or incorporated practices.

### 3.2 How do I change my name in this system? Can I update it in one place for all my enrollments?

If an enrollment is a draft (you haven't submitted it yet), then yes, you can click on the draft enrollment and edit your name. If you have already submitted the enrollment, then it is not possible to edit your name as associated with that enrollment; you'll need to contact the state Medicaid office directly.

Currently it is not possible for you to change your name for your account; you will need to contact a system administrator at your state Medicaid office to do this.

A future version of the PSM will allow you to change your name in the system.<sup>6</sup>

<sup>&</sup>lt;sup>6</sup> https://github.com/SolutionGuidance/psm/issues/408

### 3.3 How do I update my contact information for an approved enrollment? Can I update it in one place for all my enrollments?

Once an enrollment has been approved, you cannot change the contact information in it via this system (although a future version of the PSM will allow you to do this<sup>7</sup>); please contact the state Medicaid office directly.

### 3.4 How do I update my license/certification information for an approved enrollment (e.g., if I have renewed my license)?

Once an enrollment has been approved, you cannot change the license and certification information in it via this system (although a future version of the PSM will allow you to do this<sup>8</sup>); please contact the state Medicaid office directly.

<sup>&</sup>lt;sup>7</sup> https://github.com/SolutionGuidance/psm/issues/416

<sup>&</sup>lt;sup>8</sup> https://github.com/SolutionGuidance/psm/issues/416

### Enrollment

#### 4.1 What information do I need to apply to enroll?

First, you'll need to register for an account (see "how do I register for an account on this site?"). Then you'll need to click the button to create a new enrollment.

An application includes:

- provider/organization information, such as provider type, name, NPI, and contact information
- · license and certification information, including a scan of the license or certification itself
- · contact and billing/reimbursement addresses for the practice
- answers to questions about the provider's past exclusions, penalties, terminations, and convictions, if any
- information about ownership and potential conflicts (e.g. ownership over other entities billing Medicaid)
- · an electronic signature and date attesting to the accuracy of the enrollment information

#### 4.2 What is an NPI?

An *NPI* is a National Provider Identifier number. You can search for an NPI, register for an NPI, and check whether an NPI's status is active at (link opens in a new tab).

#### 4.3 What are the steps in the enrollment process?

- A provider, a service agent, or a state Medicaid agency staffer creates and submits a new enrollment application for a particular provider. (A user can save a draft application and come back later to finish and submit it.)
- A state Medicaid agency staffer reviews the enrollment, using links provided by the PSM to verify enrollment details, and decides whether to approve or reject the submission.

• After an enrollment has been approved, a state Medicaid agency staffer can select and renew it.

#### 4.4 Who can view enrollments?

A provider can view their own enrollments (including draft, rejected, approved, and pending enrollments).

A service agent or state Medicaid agency staffer can view all enrollments (including draft, rejected, approved, and pending enrollments). (The PSM may limit this ability in a future version.<sup>9</sup>)

A system admin should not be able to view any enrollments. The PSM currently allows a system admin to view enrollments, but will remove that capability in a future version.<sup>10</sup>

### 4.5 Which enrollment information can a provider, service agent, or state Medicaid agency staffer modify or delete?

A provider can modify a draft enrollment, but can't delete it. A provider also cannot delete or modify an enrollment after submitting it (once it is "pending", "approved", or "denied").

A service agent or state Medicaid agency staffer can modify a draft or pending enrollment, but cannot delete any enrollments.

#### 4.6 How will a provider learn when their enrollment changes status?

When you log into the PSM, you'll see any enrollments you've submitted or started drafting via your PSM user account. You'll be able to see the status of each enrollment.

Right now, a provider does not receive any email notifications about their enrollment. (A future version of the PSM will send email notifications to providers when the status of your enrollment changes.<sup>11</sup>)

#### 4.7 Can I create an enrollment for someone else?

A service agent or a state Medicaid agency staffer can create an enrollment for someone else.

### 4.8 Can I start an enrollment now and finish it later, or do I have to start and submit it all in one session?

This site lets you save a "draft" at any point while you are creating a new enrollment. Click the "Save as draft" button. Even if you log out and then log back in, that draft enrollment will still be available for you to work on - you will see it in your Dashboard and in the Draft tab under Enrollments.

<sup>&</sup>lt;sup>9</sup> https://github.com/SolutionGuidance/psm/issues/10

<sup>&</sup>lt;sup>10</sup> https://github.com/SolutionGuidance/psm/issues/10

<sup>11</sup> https://github.com/SolutionGuidance/psm/issues/341

### 4.9 Can I start a draft enrollment and then have someone else finish it for me?

Service agents and state Medicaid agency staffers can finish draft enrollments started by other people. A provider can save a draft enrollment and then phone or otherwise contact a service agent or the state Medicaid agency to ask them to help finish it for you. One provider cannot access, and therefore cannot finish and submit, a draft enrollment started by another provider.

#### 4.10 How do I renew an enrollment or update an enrollment?

Right now that's not something the PSM can do, but it'll be possible in a future version.<sup>12</sup>

#### 4.11 Why can I edit some enrollments but not others?

You can only edit an enrollment if its status is still "Draft" (it hasn't been submitted yet). If its status is "Pending", "Approved", or "Denied" then you can view but not edit it.

### 4.12 Can I change something in a pending enrollment after I submit it?

You'll need to directly contact the state Medicaid office; once you've submitted an enrollment, you can't update it in the PSM.

### 4.13 How will I find out when my enrollment is accepted or rejected?

Right now, this site does not notify you via email or paper mail when the state accepts or rejects an enrollment you have submitted. This will change in a future version of the Provider Screening Module.<sup>13</sup>

When you log into the PSM, you'll see any enrollments you've submitted or saved as a draft. You'll be able to see the status of each enrollment.

### 4.14 What can I do to reduce the risk of delay or rejection for an enrollment?

You should:

- Include clear, accurate scans of your licenses/certifications
- Make sure your NPI number, address, and other details in the application are correct
- Check the (link opens in a new tab) to ensure your NPI status is active
- · Check the state Medicaid provider guidelines

<sup>12</sup> https://github.com/SolutionGuidance/psm/issues/401

<sup>13</sup> https://github.com/SolutionGuidance/psm/issues/341

#### 4.15 Do I maintain my own private practice?

If you have an Individual NPI number (Entity Type 1) then you maintain your own private practice and should answer "yes" for this question. The Center for Medicare and Medicaid Services website has more guidance on your NPI number.<sup>14</sup>

### 4.16 Am I employed and/or independently contracted by a group practice?

If you are employed and/or independently contracted by an organization health care provider that has an Organization NPI number (Entity Type 2), then you should answer "yes" for this question. The Center for Medicare and Medicaid Services website has more information on Type 2 NPI numbers and what kinds of business structures should have them<sup>15</sup>.

### 4.17 What are the types for "Ownership or Control Interest"?

Agent - anyone who has been delegated the authority to obligate or act on behalf of the provider.

**Managing Employee** - someone who exercises operational or managerial control over, or who directly or indirectly conducts or manages the day-to-day operations of an institution, organization, agency or school, such as a general manager, business manager, administrator, director.

**Owner - 5% or more of Ownership Interest** - any person, business or organization to which any one or more of the following apply:

- Direct ownership of 5% or more in the disclosing entity.
- Indirect ownership interest equal to 5% or more in a disclosing entity (meaning ownership in another entity that has an ownership interest in the disclosing entity). Determine the amount of indirect ownership interest by multiplying the percentages of ownership in each entity. For example, if A owns 10% of the stock in a corporation which owns 80% of the stock of the disclosing entity, A's interest equals an 8% indirect ownership interest in the disclosing entity and must be reported. Conversely, if B owns 80% of the stock of a corporation which owns 5% of the stock of the disclosing entity, B's interest equals a 4% indirect ownership interest in the disclosing entity and need not be reported.
- A combination of direct and indirect ownership interest equal to 5% or more in the disclosing entity.
- Owns an interest of 5% or more in any mortgage, deed of trust, note or other obligation secured by the disclosing entity if that interest equals at least 5% of the value of the property or assets of the disclosing entity. Determine the percentage of ownership, mortgage, deed of trust, note, or other obligation by multiplying the percentage of interest owned in the obligation by the percentage of the disclosing entity's assets used to secure the obligation. For example: If A owns 10% of a note secured by 60% of the provider's assets, A's interest in the provider's assets, B's interest in the provider's assets equals 6% and must be reported. If B owns 40% of a note secured by 10% of the provider's assets, B's interest in the provider's assets equals 4% and need not be reported.
- Is an officer or director of a disclosing entity that is organized as a corporation (for profit or non-profit).
- Is a partner in a disclosing entity that is organized as a partnership.

**Subcontractor** - an individual, agency, or organization to which a disclosing entity has contracted or delegated some of its management functions or responsibilities of providing medical care to its patients.

<sup>&</sup>lt;sup>14</sup> https://questions.cms.gov/faq.php?id=5005&rtopic=1851&rsubtopic=8605

<sup>&</sup>lt;sup>15</sup> https://questions.cms.gov/faq.php?id=5005&faqId=1965

### 4.18 What do "Title V", "Title XX", etc. refer to?

Title V - Maternal and Child Health Services Block Grant.

Title XVIII - Health Insurance for the Aged and Disabled (Medicare).

Title XX - Block Grants to States for Social Services and Elder Justice.

Title XXI - State Children's Health Insurance Program.

### 4.19 Can I create multiple enrollments for one person (e.g., if a person is licensed as two or more kinds of provider)?

Yes.

### 4.20 Why would a provider have multiple enrollments?

An individual person might be licensed as two or more kinds of provider.

# 4.21 How do I input an enrollment for an individual provider who is affiliated with multiple organizations (e.g., a psychologist who works for two clinics)?

You can choose to "Add Another Practice Location" on the "Practice Info" screen of the enrollment application. This is a way to indicate that a provider works with multiple group practices.

### 4.22 How do I input an enrollment for an organization with several individual providers (e.g., a clinic employing several physicians)?

Choose the correct organizational provider type during the first step of enrollment. On the member entry screen, click the link to add an additional member. Repeat as necessary to add all the individuals who will provide services under the umbrella of the organization.

# 4.23 When an organizational provider owns a number of separately located facilities in the state, does each facility need to enroll separately?

If the organizational provider (often a corporation) owns multiple locations, each one must be enrolled separately.

### 4.24 What do I do if none of the provider types seem to describe what I do (what this provider does)?

Contact your state Medicaid office directly.

### 4.25 How can I update an existing organizational enrollment to add a new provider (e.g., if a clinic hires a new physician)?

If an enrollment is a draft (you haven't submitted it yet), then yes, you can click on the draft enrollment and edit the member list.

If you have already submitted the enrollment, then you should have the individual, or a service agent, create a new enrollment for an individual provider. On the "Practice Info" screen, the user should say "Yes" to the question "Are you employed and/or independently contracted by a group practice?" and enter the organization's information.

### 4.26 How can I update an existing organizational enrollment to remove a provider (e.g., if a physician retires from a clinic)?

If an enrollment is a draft (you haven't submitted it yet), then yes, you can click on the draft enrollment and edit the member list. If you have already submitted the enrollment, then it is not possible to remove an individual member via the PSM, and you will need to directly contact your state Medicaid office.

### 4.27 How do I view license/certification files?

When viewing a pending enrollment, on the "Review Enrollment" screen, look under the "License Information" heading. Next to a license or certification number (issued by the licensure or certification authority), you'll see a "View" link. Click that to access the scanned image of the provider's license or certification. Your computer will probably automatically open a program to view the file, such as:

- PDF files: Adobe Acrobat
- PNG, JPEG, BMP, GIF and TIF files: built-in image viewer
- DOC and DOCX files: Microsoft Word
- PPT and PPTX files: Microsoft PowerPoint

# 4.28 What if I know from past experience that someone else with the same name, address, or NPI has previously been excluded from Medicaid and that automatic checks are likely to flag this enrollment as a result?

Contact your state Medicaid office directly.

### 4.29 How do I end (terminate) my own active enrollment?

Currently the PSM does not give you a way to terminate an approved enrollment, but a future version of the PSM will<sup>16</sup>. Please contact the state Medicaid office directly to terminate an enrollment.

<sup>&</sup>lt;sup>16</sup> https://github.com/SolutionGuidance/psm/issues/407

### Service agent help documentation

This is documentation for service agents using the Provider Screening Module.

### 5.1 Who is allowed to be a service agent?

The state Medicaid office decides on criteria for service agents.

### 5.2 Is it acceptable for me to fill out and sign the Provider Statement on the provider's behalf?

Please confer with the state Medicaid office.

### 5.3 When the state accepts or rejects an enrollment l've submitted, how do I find out? Is it my responsibility to notify the provider?

Right now, this site does not notify you via email or paper mail when the state accepts or rejects an enrollment you have submitted. This will change in a future version of the Provider Screening Module.<sup>17</sup>

When you log into the PSM, you'll see any enrollments you've submitted or started drafting via your PSM user account. You'll be able to see the status of each enrollment.

<sup>&</sup>lt;sup>17</sup> https://github.com/SolutionGuidance/psm/issues/341

### 5.4 Can I submit a batch submission to renew several providers' enrollments?

No. Currently the PSM does not support this.

### 5.5 How do I change a provider's name in this system? Can I update it in one place for all their enrollments?

If an enrollment is a draft (you haven't submitted it yet), then yes, you can click on the draft enrollment and edit the provider's name. If you have already submitted the enrollment, then it is not possible to edit the provider's name. A future version of the PSM will allow you to change a provider's name in the system.<sup>18</sup>

Currently you cannot update multiple draft enrollments at once.

### 5.6 How do I update the contact information for an approved enrollment? Can I update it in one place for all their enrollments?

If an enrollment is a draft (you haven't submitted it yet), then yes, you can click on the draft enrollment and edit the provider's contact information. If you have already submitted the enrollment, then it is not possible to edit the provider's contact information. However, a future version of the PSM will let you do this.<sup>19</sup>

Currently you cannot update multiple draft enrollments at once.

## 5.7 How do I update the license/certification information for an approved enrollment (e.g., if the provider has renewed their license)?

Currently, the PSM does not allow you to update information for an approved enrollment. You'll need to contact the state Medicaid office directly. A future version of the PSM will let you do this.<sup>20</sup>

### 5.8 How do I terminate an enrollment (e.g., if a provider retires or dies)?

Currently the PSM does not give you a way to terminate an approved enrollment, but a future version of the PSM will<sup>21</sup>. Please contact the state Medicaid office directly to terminate an enrollment.

<sup>&</sup>lt;sup>18</sup> https://github.com/SolutionGuidance/psm/issues/408

<sup>&</sup>lt;sup>19</sup> https://github.com/SolutionGuidance/psm/issues/416

<sup>&</sup>lt;sup>20</sup> https://github.com/SolutionGuidance/psm/issues/416

<sup>&</sup>lt;sup>21</sup> https://github.com/SolutionGuidance/psm/issues/407

#### Application reviewer help documentation

This is documentation for service administrators for the Provider Screening Module. Usually these are state Medicaid agency staffers.

#### 6.1 How do I use the enrollment verification process?

Verification is checking an enrollment with federal or state data sources and visually inspecting the license(s) or certification(s) in a submitted enrollment.

Click "Enrollments" in the navigation bar and go to the "Pending" tab. Click the "Review" link for the enrollment you want to verify. You'll see a list of things that you want to verify about the pending enrollment before approving it. Under "Auto Screening", click "View" or "View Log" to see the "External Source Screening Log," which will tell you whether the PSM has been able to automatically verify each piece of enrollment data with an external information source. If you are satisfied with that result, or if you go to the government database yourself and manually verify that piece of the enrollment, click the "Verified" checkbox for that row.

Check the Provider Information:

• Is this provider on the List of Excluded Individuals and Entities provided by the Office of the Inspector General for the US Department of Health and Human Services<sup>22</sup>? If so, you should reject the enrollment.

Check the License Information (more details below). Look at the files to see whether they are legitimate licenses or certifications, and (if applicable) check with the issuing board or authority to validate the license. Go back to the list of pending enrollments and click the NPI/UMPI number to view the enrollment details, and look at the License Info tab. Confirm that the issue and renewal end dates in the image are the same as in the enrollment. If you see any discrepancies, you should reject the enrollment.

At the bottom of the screen, choose "Reject" or "Approve" as appropriate.

Future verification processes will be increasingly automated.

<sup>&</sup>lt;sup>22</sup> https://oig.hhs.gov/exclusions/exclusions\_list.asp

### 6.2 How do I look at and change the risk assessment rules?

Right now that's not something you can do in the PSM, but it'll be possible in a future version. For the moment, speak with your internal IT team. You can also refer to the Centers for Medicare and Medicaid Services' rules, and to the regulations<sup>23</sup> they implement.

### 6.3 What's the difference between an agreement and an addendum?

Both agreements and addenda are documents meant for the "Provider Statement" step in the enrollment process; they are where you place legal terms and conditions for providers to sign. They are identical in format: each agreement and each addendum has a title and content. You can format and style the format of the content.

You should create a few agreements to cover the major types of providers in your program, and then use special provider-specific addenda for additional statements that providers need to sign.

### 6.4 Where do I create, edit, or delete agreements and addenda?

Click on "Functions" in the navigation bar, and look at the "Agreements & Addendums" tab. There, you can create or edit agreements and addenda.

You cannot delete an agreement or an addendum.

### 6.5 Where do I create, edit, or delete a provider type?

Click on "Functions" in the navigation bar, and look at the "Provider Types" tab. Each provider type has a name and zero or more agreements or addenda. You can edit a provider type to change its name and to add or remove an agreement or addendum.

You cannot create or delete a provider type.

<sup>&</sup>lt;sup>23</sup> https://www.law.cornell.edu/cfr/text/42/424.518

### System administrator help documentation

This is documentation for system administrators for the Provider Screening Module.

### 7.1 What's the difference among the different user roles?

See the "User types" section of the design overview<sup>24</sup> for the differences between providers, service agents, service admins, and system admins.

### 7.2 Why can't users register for their accounts?

If a user can't self-register, here are some things to troubleshoot:

- 1. Has the user turned JavaScript off? The PSM's registration page requires JavaScript.
- 2. Ask the user: did they receive an email confirming a successful account registration? If not:
  - (a) Has the user included a valid email address?
  - (b) Ask IT: is the PSM's email working? If the PSM can't reach an email server, it will create a new account but won't email the user their password. Once the PSM's email is working again, ask the user to click "Forgot Password?" to get a password reset email.

### 7.3 Why can't users log in?

If a user can't log into the PSM, here are some things to troubleshoot:

- 1. Is the user using the correct username and password?
- 2. Has the user turned JavaScript off? The PSM's login page requires JavaScript.

<sup>&</sup>lt;sup>24</sup> https://github.com/SolutionGuidance/psm/blob/master/docs/DESIGN.md#user-content-user-types

3. Is the user choosing the correct "Domain" (for authentication) on the login page?

### 7.4 Which user information is required or optional?

A new account needs a username, first and last name, a user role, and an email address. If you (the system admin) are creating it, you'll also need to add a password. If the user is self-registering, the PSM will create a random password and email it to them, and will assume that the account is for a provider.

If a service administrator is creating a service agent account, the PSM also requires a business phone number.

Provider accounts can also have a middle name (this is optional).

The PSM does not enforce any limits on the number or type of characters in the user's first name, last name, username or password.

### 7.5 Who can modify or delete user information?

After account creation, which user information can a user modify or delete themselves, and which user information can a service admin or system admin modify or delete?

After a PSM account is created:

- A provider can change their password, but not change anything else, nor delete their account.
- A service agent or service admin can go to "My Profile" to update their first, middle, and last names, business phone number and email address. But they can't change their own username, and they can't delete their own account.
- A service admin can view the list of service agents, and can delete a service agent's account. (The service agent will not receive any notification of this deletion.) A service admin can edit a service agent's first, middle, and last name, email address, and business phone number, but not their username.
- A system administrator can view, delete, and change all aspects of all PSM user accounts, including their own. In particular, a system administrator can delete other system administrators' accounts, can change any other account's role (e.g., turning a service agent into a service administrator), and can change their own or others' usernames.

### 7.6 Can I connect PSM login to another authentication system?

This functionality is not yet implemented.