



# State or ODDS Staff User Enrollment Form

**INSTRUCTIONS:** \* indicates required fields. The authorizing manager must complete this form based on the employee's specific job duties. Access to Service Elements is determined by your Organization and roles.

- Send completed form to [info.exprs@state.or.us](mailto:info.exprs@state.or.us) or 503-947-5044.

*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:	*Name of Organization:
*Organization Address: (Mailing Address)	*City, State Zip:
*Phone Number:	*Email Address:

## State ODDS Staff User Roles

### State eXPRS Contracting/Funding Management Roles

ADD	DEL	Role Name/Description
<input type="checkbox"/>	<input type="checkbox"/>	<b>State Contract Creator</b> <ul style="list-style-type: none"> <li>• <u>View</u>: Service Element</li> <li>• <u>Create, Delete, Update</u>: Contact, Party</li> <li>• <u>Create, Update, View</u>: Contract</li> <li>• <u>Create, Delete, Update, View</u>: Local Authority</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<b>State Contract Updater</b> <ul style="list-style-type: none"> <li>• <u>View</u>: Service Element</li> <li>• <u>Update, View</u>: Contract, Local Authority</li> <li>• <u>Update</u>: Party</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<b>State Contract Manager</b> <ul style="list-style-type: none"> <li>• <u>View</u>: Service Element</li> <li>• <u>Update, View</u>: Contract, Local Authority</li> <li>• <u>Update</u>: Party</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<b>State PAL Creator</b> <ul style="list-style-type: none"> <li>• <u>View</u>: Budget Allocation Item, Contract, Service Element, SEPA Line Item</li> <li>• <u>Create, Delete, Update, View</u>: Program Area Limitation</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<b>State PAL Updater</b> <ul style="list-style-type: none"> <li>• <u>View</u>: Contract, Service Element</li> <li>• <u>Update, View</u>: Program Area Limitation</li> </ul>

<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State BA Worksheet Creator</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Client Eligibility, Contract, Program Code, Service Element</li> <li>• <b><u>Create, Delete, Submit, Update, View:</u></b> Budget Allocation Worksheet</li> <li>• <b><u>Create, Delete, Update, View:</u></b> Budget Allocation Item</li> <li>• <b><u>Create, View:</u></b> Client</li> <li>• <b><u>Run Reports:</u></b> Budget Allocation Review, Client Enrollment, CPA Unclaimed Balance, Payment Detail, Provider Payment Summary, Remittance Advice, Remittance Advice Monthly, SE 54 Daily Claims, Suspended Claim</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State SEPA Creator</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Budget Allocation Item, Contract, Program Area Limitation, Service Element</li> <li>• <b><u>Create, Update, View:</u></b> SEPA Line Item</li> <li>• <b><u>Create, Delete, Update, View:</u></b> SEPA Approval Unit</li> <li>• <b><u>Run Reports:</u></b> Budget Allocation Review, Client Enrollment, CPA Unclaimed Balance, Payment Detail, Provider Payment Summary, Remittance Advice, SEPA Detail, SE 54 Daily Claims, Suspended Claim</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State SEPA Submitter</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Budget Allocation Item, Contract, Program Area Limitation, Service Element, SEPA Line Item</li> <li>• <b><u>Submit, View, Void, Withdraw:</u></b> SEPA Approval Unit</li> <li>• <b><u>Run Reports:</u></b> Client Enrollment, CPA Unclaimed Balance, Payment Detail, Provider Payment Summary, Remittance Advice, Remittance Advice Monthly, SE 54 Daily Claims, SEPA Detail, Suspended Claim</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State SEPA First Reviewer</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Budget Allocation Item, Contract, Program Area Limitation, Service Element, SEPA Line Item</li> <li>• <b><u>First Review, View, Void, Withdraw:</u></b> SEPA Approval Unit</li> <li>• <b><u>Run Reports:</u></b> Client Enrollment, CPA Unclaimed Balance, Payment Detail, Provider Payment Summary, Remittance Advice, Remittance Advice Monthly, SE 54 Daily Claims, SEPA Detail, Suspended Claim</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State SEPA Signer</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Budget Allocation Item, Contract, Program Area Limitation, Service Element, SEPA Line Item</li> <li>• <b><u>Second Review, View, Void, Withdraw:</u></b> SEPA Approval Unit</li> <li>• <b><u>Run Reports:</u></b> Client Enrollment, CPA Unclaimed Balance, Payment Detail, Provider Payment Summary, Remittance Advice, Remittance Advice Monthly, SE 54 Daily Claims, SEPA Detail, Suspended Claims</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State SEPA Manager</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Budget Allocation Item, Contract, Program Area Limitation, Service Element, SEPA Line Item</li> <li>• <b><u>Delete, First Review, Second Review, Update, View, Void, Withdraw:</u></b> SEPA Approval Unit</li> <li>• <b><u>Run Reports:</u></b> Client Enrollment, CPA Unclaimed Balance, Payment Detail, Provider Payment Summary, Remittance Advice, Remittance Advice Monthly, SE 54 Daily Claims, SEPA Detail, Suspended Claims</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State SEPA Acceptor</b></p> <ul style="list-style-type: none"> <li>• <b><u>For SEs:</u></b> 44, 45, 49, 50, 51, 52, 53, 54, 56, 57, 58, 141, 142, 143, 147, 149, 150, 151, 156</li> <li>• <b><u>View:</u></b> Budget Allocation Item, Contract, Program Area Limitation, Service Element, SEPA Line Item</li> <li>• <b><u>Accept/Reject, Delete, First Review, Second Review, Submit, Update, View, Void, Withdraw:</u></b> SEPA Approval Unit</li> <li>• <b><u>Run Reports:</u></b> Client Enrollment, CPA Unclaimed Balance, Payment Detail, Provider Payment Summary, Remittance Advice, Remittance Advice Monthly, SE 54 Daily Claims, SEPA Detail, Suspended Claim</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State SEPA Accepted Notification</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Budget Allocation Item, Contract, Program Area Limitation, Service Element, SEPA Approval Unit, SEPA Line Item</li> </ul>

<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State FFS PPA Manager</b></p> <ul style="list-style-type: none"> <li><b>View:</b> Contract, Provider, Provider Liability Account, Provider Service Location, Service Element, SEPA Approval Unit, SEPA Line Item</li> <li><b>Create, Delete, First Review, Second Review, Submit, Update, View, Void, Withdraw:</b> Provider Prior Auth</li> <li><b>Run Reports:</b> Outstanding Provider Liability, SEPA Detail</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Allotment PPA Manager</b></p> <ul style="list-style-type: none"> <li><b>View:</b> Contract, Encounter, Provider, Provider Liability Account, Provider Service Location, Service Element, SEPA Approval Unit, SEPA Line Item</li> <li><b>Create, Delete, First Review, Second Review, Submit, Update, View, Void, Withdraw:</b> Provider Prior Auth</li> <li><b>Run Reports:</b> CM Enrollment, CM Fiscal, CM Participation, CM Provider Financial Statement, FFS Full General Fund Payments, Outstanding Provider Liability, PPA Unpaid Allotment, RFFS Claims Summary, RFFS Fiscal, RFFS Funding, RFFS Participation, RFFS Payment Detail, RFFS Provider Payment Summary</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Allotment PPA Approver (CAU)</b></p> <ul style="list-style-type: none"> <li><b>For SEs:</b> 02, 44, 48, 49, 55, 58, 146, 147, 148, 149, 150, 151, 157</li> <li><b>View:</b> Budget Allocation Item, Budget Allocation Worksheet, Contract, Encounter, Provider, Provider Liability Account, Provider Service Location, Service Element, SEPA Approval Unit, SEPA Line Item</li> <li><b>Accept/Reject, Delete, Second Review, Submit, Update, View, Void, Withdraw:</b> Provider Prior Auth</li> <li><b>Run Reports:</b> CM Enrollment, CM Fiscal, CM Participation, CM Provider Financial Statement, FFS Full General Fund Payments, Outstanding Provider Liability</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Out of Cycle Processor</b></p> <ul style="list-style-type: none"> <li><b>View/Update:</b> Out of Cycle</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Rate Increase Runner</b></p> <ul style="list-style-type: none"> <li><b>View:</b> Service Element</li> <li><b>Submit:</b> Rate Increase</li> <li><b>Accept/Reject, Create, Submit, Update, View:</b> Client Prior Auth</li> </ul>
<b>State eXPRS Accounting &amp; Finance Services Management Roles</b>		
<b>ADD</b>	<b>DEL</b>	<b>Role Name/Description</b>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Allotment PPA Approver (Acctg)</b></p> <ul style="list-style-type: none"> <li><b>For SEs:</b> 53, 56, 57, 156</li> <li><b>View:</b> Budget Allocation Item, Budget Allocation Worksheet, Contract, Encounter, Provider, Provider Liability Account, Provider Service Location, Service Element, SEPA Approval Unit, SEPA Line Item</li> <li><b>Accept/Reject, Delete, Second Review, Submit, Update, View, Void, Withdraw:</b> Provider Prior Auth</li> <li><b>Run Reports:</b> CM Enrollment, CM Fiscal, CM Participation, CM Provider Financial Statement, FFS Full General Fund Payments, Outstanding Provider Liability</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Payee Updater</b></p> <ul style="list-style-type: none"> <li><b>View:</b> Provider, Provider Extended, Service Element</li> <li><b>Create, Delete, Update, View:</b> Payee</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Funding Formula Creator</b></p> <ul style="list-style-type: none"> <li><b>View:</b> Contract, Service Element</li> <li><b>Create, Delete, Update, View:</b> Claim Funding, Funding Rule</li> <li><b>Run Reports:</b> CM Fiscal, CM Funding, CM Participation, FFS Full General Fund Payments, SFMA Interface Detail, SFMA Interface Summary</li> </ul>

## State eXPRS Foundational Data Management Roles

ADD	DEL	Role Name/Description
<input type="checkbox"/>	<input type="checkbox"/>	<b>State Service Determination Manager</b> <ul style="list-style-type: none"> <li><u>View</u>: Service Element</li> <li><u>Create, View, Update</u>: Service Determination</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<b>State Rate Manager</b> <ul style="list-style-type: none"> <li><u>View</u>: Service Element</li> <li><u>Create, View, Update</u>: Rate</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<b>State Program Codes Maintenance</b> <ul style="list-style-type: none"> <li><u>View</u>: Service Element</li> <li><u>Create, Delete, Update, View</u>: Program Code</li> </ul>

## State eXPRS Provider Record/Credential Management Roles

ADD	DEL	Role Name/Description
<input type="checkbox"/>	<input type="checkbox"/>	<b>State Licensing Updater</b> <ul style="list-style-type: none"> <li><u>View</u>: Client Prior Auth, Provider Service Location, Service Element</li> <li><u>Update, View</u>: Provider, Provider License</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<b>State Provider Creator</b> <ul style="list-style-type: none"> <li><u>View</u>: Service Element</li> <li><u>Create, Delete, Update, View</u>: Party, Provider, Provider Service Location</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<b>State CDDP Provider Add/Update</b> <ul style="list-style-type: none"> <li><u>View</u>: Provider License, Service Element</li> <li><u>Create/Delete/View/Update</u>: Party, Provider, Provider Contacts, Provider Extended, Provider Service Location</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<b>State CDDP Provider Credential</b> <ul style="list-style-type: none"> <li><u>Create/Delete/View/Review/Submit/Update/Accept-Reject</u>: Provider License</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<b>State Provider CPAU, Add/Update</b> <ul style="list-style-type: none"> <li>This role must be assigned in conjunction with one of the "Provider Role, Add/Update" or "Provider Role, Credential" roles. This role controls which provider types the user is permitted to add/update or create and the other roles contain the actual permissions.</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<b>State Provider CPAU, Credential</b> <ul style="list-style-type: none"> <li>This role must be assigned in conjunction with one of the "Provider Role, Add/Update" or "Provider Role, Credential" roles. This role controls which provider types the user is permitted to add/update or create and the other roles contain the actual permissions.</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<b>State Provider Role, Add/Update</b> <ul style="list-style-type: none"> <li>This role must be assigned in conjunction with one of the Provider "Add/Update" or "Credential" roles. This role contains the actual permissions; the other roles control which provider types the user is permitted to add/update or create.</li> <li><u>View</u>: Provider License, Service Element</li> <li><u>Create/Delete/View/Update</u>: Party, Provider, Provider Contacts, Provider Extended, Provider Panel, Provider Service Location</li> <li><u>View/Create</u>: PSW Weekly Hours</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<b>State Provider Role, Credential</b> <ul style="list-style-type: none"> <li>This role must be assigned in conjunction with one of the Provider "Add/Update" or "Credential" roles. This role contains the actual permissions; the other roles control which provider types the user is permitted to add/update or create.</li> <li><u>View</u>: PSW Weekly Hours</li> <li><u>Create/Delete/View/Update</u>: Provider Panel</li> <li><u>Create/Delete/View/Review/Submit/Update/Accept-Reject</u>: Provider License</li> </ul>

<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Provider Role, Update Only</b></p> <ul style="list-style-type: none"> <li>• <i>This role must be assigned in conjunction with one of the Provider "Add/Update" or "Credential" roles. This role contains the actual permissions; the other roles control which provider types the user is permitted to add/update or create.</i></li> <li>• <b><u>View:</u></b> Provider License, Service Element, PSW Weekly Hours</li> <li>• <b><u>Delete/View/Update:</u></b> Party, Provider, Provider Contacts, Provider Extended, Provider Panel, Provider Service Location</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Provider Caps Manager</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Provider License, Service Element</li> <li>• <b><u>Create/Delete/View/Update:</u></b> Party, Provider, Provider Contacts, Provider Extended, Provider Panel, Provider Service Location, PSW Weekly Hours</li> </ul>

## State eXPRS Client Information & Eligibility Management Roles

ADD	DEL	Role Name/Description
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State CLA Manager</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Claim, Client, Service Element</li> <li>• <b><u>Create, Delete, Update, View:</u></b> Client Liability Account</li> <li>• <b><u>Run Reports:</u></b> Client Enrollment, CPA Unclaimed Balance, Payment Detail, Provider Payment Summary, Remittance Advice, Remittance Advice Monthly, SE 54 Daily Claims, Suspended Claim</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Client Update</b></p> <ul style="list-style-type: none"> <li>• <b><u>Create, Update, View:</u></b> Client (NOTE: This only updates the client information in the eXPRS tables; it does not update CI information.)</li> <li>• <b><u>Run Reports:</u></b> Client Discrepancy</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Eligibility Enrollment Processor – Super User</b></p> <ul style="list-style-type: none"> <li>• <b><u>Accept/Reject, Review, Update, View:</u></b> DD Eligibility Enrollment</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Eligibility Enrollment D&amp;E Processor</b></p> <ul style="list-style-type: none"> <li>• <b><u>Accept/Reject, Review, Update, View:</u></b> DD Eligibility Enrollment</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Eligibility Enrollment Processor</b></p> <ul style="list-style-type: none"> <li>• <b><u>Accept/Reject, Review, Update, View:</u></b> DD Eligibility Enrollment</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Foster Care Rate Authorizer</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Client, DD Eligibility Enrollment,</li> <li>• <b><u>Update, View:</u></b> DD Eligibility Enrollment Foster Care</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Foster Care Processor</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Client, Party</li> <li>• <b><u>Update, View:</u></b> DD Eligibility Enrollment</li> <li>• <b><u>Accept/Reject, Update, View:</u></b> DD Eligibility Enrollment Foster Care</li> </ul>

## State eXPRS Client Services Management Roles

ADD	DEL	Role Name/Description
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State CPA Creator</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Client Eligibility, Client Liability Account, Contract, DD Eligibility, Provider, Provider Service Location, Rate, Service Element, Service Eligibility</li> <li>• <b><u>Create, View:</u></b> Client</li> <li>• <b><u>Create, Delete, Submit, Update, View, Void:</u></b> Client Prior Auth</li> <li>• <b><u>Update:</u></b> Client Prior Auth Rate</li> <li>• <b><u>Run Reports:</u></b> Client Enrollment, CPA Unclaimed Balance, Payment Detail, Provider Payment Summary, Remittance Advice, Remittance Advice Monthly, SE 54 Daily Claims, Suspended Claim</li> </ul>

<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State CPA Approver</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Client Eligibility, Contract, DD Eligibility, Provider, Provider Service Location, Rate, Service Element, Service Eligibility</li> <li>• <b><u>Create, View:</u></b> Client</li> <li>• <b><u>Update:</u></b> Client Prior Auth Rate</li> <li>• <b><u>Accept/Reject, View:</u></b> Client Prior Auth</li> <li>• <b><u>Run Reports:</u></b> 90 Day Referral Report, Available Monthly Balance, Brokerage Authorization, Client Enrollment, CM Available Monthly Balance, CPA Unclaimed Balance, Payment Detail, Provider Payment Summary, Remittance Advice, Remittance Advice Monthly, SE 54 Daily Claims, Suspended Claim</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State CPA (PA) Approver</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Client Eligibility, Contract, DD Eligibility, Provider, Provider Service Location, Rate, Service Element, Service Eligibility</li> <li>• <b><u>Create, View:</u></b> Client</li> <li>• <b><u>Accept/Reject, View:</u></b> Client Prior Auth</li> <li>• <b><u>Run Reports:</u></b> 90 Day Referral Report, Available Monthly Balance, Brokerage Authorization Report, Client Enrollment, CM Available Monthly Balance, CPA Unclaimed Balance, Payment Detail, Provider Payment Summary, Remittance Advice, Remittance Advice Monthly, SE 54 Daily Claims, Suspended Claim</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State CPA Override Manager</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Client Eligibility, Contract, DD Eligibility, Provider, Provider Service Location, Rate, Service Element, Service Eligibility</li> <li>• <b><u>Create, View:</u></b> Client</li> <li>• <b><u>Accept/Reject, Override, View:</u></b> Client Prior Auth</li> <li>• <b><u>Run Reports:</u></b> 90 Day Referral, Available Monthly Balance, Brokerage Authorization, Client Enrollment, CM Available Monthly Balance, CPA Unclaimed Balance, Payment Detail, Provider Payment Summary, Remittance Advice, Remittance Advice Monthly, SE 54 Daily Claims, Suspended Claim</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State CPA SE53 Override Manager</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Client Eligibility, Contract, DD Eligibility, Provider, Provider Service Location, Rate, Service Element, Service Eligibility</li> <li>• <b><u>Create, View:</u></b> Client</li> <li>• <b><u>Accept/Reject, Override, View:</u></b> Client Prior Auth</li> <li>• <b><u>Run Reports:</u></b> 90 Day Referral Report, Available Monthly Balance, Brokerage Authorization, Client Enrollment, CM Available Monthly Balance, CPA Unclaimed Balance, Payment Detail, Provider Payment Summary, Remittance Advice, Remittance Advice Monthly, SE 54 Daily Claims, Suspended Claim</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State CM/PA CPA Manager</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Client Eligibility, Contract, DD Eligibility, Encounter, Provider, Provider Service Location, Rate, Service Element, Service Eligibility</li> <li>• <b><u>Create, View:</u></b> Client</li> <li>• <b><u>Create, Delete, Submit, Update, View, Void, Withdraw:</u></b> Client Prior Auth</li> <li>• <b><u>Update:</u></b> Client Prior Auth Rate</li> <li>• <b><u>Run Reports:</u></b> CM Enrollment, CM Fiscal, CM Participation, CM Provider Financial Statement, FFS Full General Fund Payments</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State ReBAR CPA Manager</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Claim, Client Eligibility, Client Liability Account, DD Eligibility, Provider, Provider Service Location, Rate, Service Element, Service Eligibility</li> <li>• <b><u>Create, View:</u></b> Client, Contract</li> <li>• <b><u>Accept/Reject, Create, Delete, Submit, Update, View, Void:</u></b> Client Prior Auth</li> <li>• <b><u>Update:</u></b> Client Prior Auth Rate</li> </ul>

<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State POC Manager</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Client Eligibility, Contract DD Eligibility, Provider, Provider License, Provider Service Location, Rate, Service Element, Service Eligibility, SIS Assessment</li> <li>• <b><u>Create, View:</u></b> Client</li> <li>• <b><u>Create, Delete, Update, View:</u></b> Plan of Care</li> <li>• <b><u>Create, Delete, Submit, Update, View, Void, Withdraw:</u></b> Service Authorization</li> <li>• <b><u>Run Reports:</u></b> Client Service Authorization</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State POC Approver</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Client Eligibility, Client Prior Auth, Contract, DD Eligibility, Plan of Care, Provider, Provider Service Location, Rate, Service Element, Service Eligibility</li> <li>• <b><u>Update:</u></b> Client Prior Auth Rate</li> <li>• <b><u>Create, View:</u></b> Client</li> <li>• <b><u>Submit, Update, View, Void, Withdraw:</u></b> Service Authorization</li> <li>• <b><u>Run Reports:</u></b> 90 Day Referral, Available Monthly Balance, Brokerage Authorization, Client Enrollment, CM Available Monthly Balance, CPA unclaimed Balance, Payment Detail, Provider Payment Summary, Remittance Advice, Remittance Advice Monthly, SE54 Daily Claims, Suspended Claim</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State POC Override Manager</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Client Eligibility, Contract, DD Eligibility, Provider, Provider Service Location, Rate, Service Element, Service Eligibility</li> <li>• <b><u>Create, View:</u></b> Client</li> <li>• <b><u>View, Update:</u></b> Plan of Care</li> <li>• <b><u>Override, Submit, Update, View:</u></b> Service Authorization</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State POC Super User</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Client Eligibility, Contract, DD Eligibility, Level of Care, Provider, Provider License, Provider Service Location, PSW Weekly Hours, Rate, Service Element, Service Eligibility, SIS Assmt</li> <li>• <b><u>Create/View:</u></b> Client</li> <li>• <b><u>Create/Delete/View/Update:</u></b> Provider Panel</li> <li>• <b><u>Create/Delete/View/Submit/Update/Void:</u></b> Claim, Service Delivery</li> <li>• <b><u>Create/Delete/View/Split/Update:</u></b> Plan of Care</li> <li>• <b><u>Create/Delete/View/Split/Submit/Update/Void/Withdraw:</u></b> Service Authorization</li> <li>• <b><u>Update:</u></b> Plan of Care Units, Service Auth Rate, Service Auth Units</li> <li>• <b><u>Override:</u></b> Client Prior Auth, Plan of Care, Service Auth</li> </ul>

## State eXPRS Payments Management Roles

ADD	DEL	Role Name/Description
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Claims Manager</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Client, Client Eligibility, Client Liability Account, Client Prior Auth, Contract, Provider, Provider Liability Account, Provider Service Location, Service Element</li> <li>• <b><u>Create, Submit, Update, View, Void:</u></b> Claim, Travel Time</li> <li>• <b><u>Review, Update:</u></b> Claim Exception</li> <li>• <b><u>Run Reports:</u></b> Client Enrollment, CPA Unclaimed Balance, Outstanding Provider Liability, Payment Detail, Provider Payment Summary, Remittance Advice, Remittance Advice Monthly, SE 54 Daily Claims, Suspended Claim</li> </ul>

<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Claims Override</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Client, Client Eligibility, Client Liability Account, Client Prior Auth, Contract, Provider Liability Account, Provider, Provider Service Location, Service Element</li> <li>• <b><u>Create, Reclass, Submit, Update, View, Void:</u></b> Claim</li> <li>• <b><u>Create, Delete, Override, Submit, Update, View, Void:</u></b> Travel Time</li> <li>• <b><u>Create, View:</u></b> Client Prior Auth</li> <li>• <b><u>Review, Update:</u></b> Claim Exception</li> <li>• <b><u>Update:</u></b> Client Prior Auth Rate</li> <li>• <b><u>Run Reports:</u></b> Client Enrollment, CPA Unclaimed Balance, Outstanding Provider Liability, Payment Detail, Provider Payment Summary, Remittance Advice, Remittance Advice Monthly, SE 54 Daily Claims, Suspended Claim</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State CM/PA Encounter Manager</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Client, Client Prior Auth, DD Eligibility, Provider, Provider Service Location, Rate, Service Element, Service Eligibility</li> <li>• <b><u>Create, Delete, Review, Submit, Update, View, Void:</u></b> Encounter (RFFS Claims)</li> <li>• <b><u>Run Reports:</u></b> CM Enrollment, CM Fiscal, CM Participation, CM Provider Financial Statement, FFS Full General Fund Payments</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Allotment Claims Manager</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Claim Exception, Client, Client Eligibility, Client Liability Account, Client Prior Auth, Contract, Provider, Provider Service Location, Service Element</li> <li>• <b><u>Create, Submit, Update, View, Void:</u></b> Claim</li> <li>• <b><u>Run Reports:</u></b> Client Enrollment, CPA Unclaimed Balance, Payment Detail, Provider Payment Summary, Remittance Advice, Remittance Advice Monthly, Suspended Claim</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Allotment Claims Override</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Client, Client Eligibility, Client Liability Account, Contract, Provider, Provider Liability Account, Provider Service Location, Service Element</li> <li>• <b><u>Create, Submit, Update, View, Void:</u></b> Claim</li> <li>• <b><u>Update, View:</u></b> Claim Exception</li> <li>• <b><u>Create, View:</u></b> Client Prior Auth</li> <li>• <b><u>Update:</u></b> Client Prior Auth Rate</li> <li>• <b><u>Run Reports:</u></b> Client Enrollment, CPA Unclaimed Balance, Payment Detail, Provider Payment Summary, Remittance Advice, Remittance Advice Monthly, Suspended Claim</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State POC Claims Manager/Override</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Claim, Client, Contract, DD Eligibility, Level of Care, Provider, Provider Liability Account, Provider Service Location, PSW Weekly Hours, Rate, Service Auth, Service Element, Service Eligibility</li> <li>• <b><u>Create/Delete/View/Submit/Update/Void/Accept-Reject/Override:</u></b> Service Delivery</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Mass Claims Adjuster</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Claim Funding, Service Element</li> <li>• <b><u>Update, View:</u></b> Claim</li> <li>• <b><u>Review:</u></b> Claim Exception</li> <li>• <b><u>Run:</u></b> Claim Mass Adjustment</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State PLA Manager</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Claim, Provider, Service Element</li> <li>• <b><u>Review, View:</u></b> Encounter</li> <li>• <b><u>Create, Delete, Update, View:</u></b> Provider Liability Account</li> <li>• <b><u>Run Reports:</u></b> CM Enrollment, CM Fiscal, CM Participation, CM Provider Financial Statement, CPA Unclaimed Balance, FFS Full General Fund Payments, Outstanding Provider Liability, Payment Detail, Provider Payment Summary, Remittance Advice, Remittance Advice Monthly, Suspended Claim</li> </ul>



<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Paper Claims Entry</b></p> <ul style="list-style-type: none"> <li><b>View:</b> Client, Client Liability Account, Client Prior Auth, DD Eligibility, Provider Service Location, Rate, Service Element, Service Eligibility</li> <li><b>Create, Delete, Submit, Update, View, Void:</b> Claim</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State SD Importer</b></p> <ul style="list-style-type: none"> <li><b>View:</b> Client, Client Liability Account, Client Prior Auth, DD Eligibility, Provider Service Location, Rate, Service Element, Service Eligibility</li> <li><b>Create/Delete/View/Run/Submit/Update/Void/Accept-Reject/Override:</b> Service Delivery</li> <li><b>Run Reports:</b> Payment Detail, Provider Pmt Summary, Remittance Advice, Suspended Claim</li> </ul>

## State eXPRS System Maintainer Roles

ADD	DEL	Role Name/Description
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State SFMA Interface Runner</b></p> <ul style="list-style-type: none"> <li><b>View:</b> Service Element</li> <li><b>Run, View:</b> SFMA Interface</li> <li><b>Run Reports:</b> SFMA Interface Detail, SFMA Interface Summary</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>System Maintainer</b></p>

## State eXPRS Security/User Maintenance Roles

ADD	DEL	Role Name/Description
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Limited User Maintainer</b></p> <ul style="list-style-type: none"> <li><b>View:</b> Permission, Role Permission, Security Group, Security Role, User Account, User Permission</li> <li><b>Update:</b> User Account</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State User Maintainer</b></p> <ul style="list-style-type: none"> <li><b>View:</b> Permission, Provider, Provider Extended, PSW Weekly Hours, Role Permission, Security Group, Security Role, Security Rules, Service Element, User Permission</li> <li><b>Create/Delete/View/Update:</b> User Account, User Role</li> <li><b>Run Reports:</b> All Permissions, All Roles, All Security Admin, Daily Security, Local User Accounts, Monthly Security</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Role Manager</b></p> <ul style="list-style-type: none"> <li><b>Create:</b> Role Permission</li> <li><b>Create/Delete/View/Update:</b> Security Role</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Security Rule Manager</b></p> <ul style="list-style-type: none"> <li><b>View:</b> User Role, Security Role</li> <li><b>View/Update:</b> Security Rules</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Direct Contract Chief Security Officer</b></p> <ul style="list-style-type: none"> <li><b>View:</b> Permission, Role Permission, Security Group, Security Role, Service Element, User Permission</li> <li><b>Create:</b> User Account Template</li> <li><b>Create/View:</b> User Account Limited</li> <li><b>Create/Delete/View/Update:</b> User Account, User Role</li> <li><b>Run Reports:</b> All Permissions, All Roles, All Security Admin, Daily Security, Local User Accounts, Monthly Security</li> </ul>

# State eXPRS Assessment/SIS Management Roles

ADD	DEL	Role Name/Description
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State ONA Viewer</b></p> <ul style="list-style-type: none"> <li><b>View:</b> Claim, Client, Client Eligibility, Client Liability Account, Client Prior Auth, Contract, DD Eligibility, Encounter, Level of Care, Level of Care Review, Oregon Needs Assmt, ONA RIT, Plan of Care, Program Code, Provider, Provider Prior Auth, Provider Service Location, Rate, Service Element, Service Eligibility</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State ONA Assessor</b></p> <ul style="list-style-type: none"> <li><b>View:</b> Claim, Client, Client Eligibility, Client Liability Account, Client Prior Auth, Contract, DD Eligibility, Encounter, Level of Care, Level of Care Review, Plan of Care, Program Code, Provider, Provider Prior Auth, Provider Service Location, Rate, Service Element, Service Eligibility</li> <li><b>Create/Delete/View/Submit/Update/Void:</b> Oregon Needs Assmt</li> <li><b>Create/View:</b> Oregon Needs Assmt RIT</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State ONA SC/PA</b></p> <ul style="list-style-type: none"> <li><b>View:</b> Claim, Client, Client Eligibility, Client Liability Account, Client Prior Auth, Contract, DD Eligibility, Encounter, Level of Care, Level of Care Review, Plan of Care, Program Code, Provider, Provider Prior Auth, Provider Service Location, Rate, Service Element, Service Eligibility</li> <li><b>Create/CopyView:</b> Oregon Needs Assmt</li> <li><b>Create/View:</b> Oregon Needs Assmt RIT</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State ONA Overrider</b></p> <ul style="list-style-type: none"> <li><b>View:</b> Claim, Client, Client Eligibility, Client Liability Account, Client Prior Auth, Contract, DD Eligibility, Encounter, Level of Care, Level of Care Review, Plan of Care, Program Code, Provider, Provider Prior Auth, Provider Service Location, Rate, Service Element, Service Eligibility</li> <li><b>Create/Delete/View/Submit/Update/Void/Accept-Reject/Override:</b> Oregon Needs Assmt</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State POC Add On Approver</b></p> <ul style="list-style-type: none"> <li><b>View:</b> CIIS Eligibility, Client, Client Eligibility, Contract, DD Eligibility, Level of Care, Plan of Care, Plan of Care Add On, Provider License, Provider Service Location, PSW Weekly Hours, Rate, Service Authorization, Service Element, Service Eligibility, SIS Assessment.</li> <li><b>Create/Update:</b> Plan of Care</li> <li><b>Create/Review/Update:</b> Plan of Care Add On</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State ONA Print Role</b></p> <ul style="list-style-type: none"> <li><b>View:</b> BA Item, BA Worksheet, Claim, Client, Client Eligibility, Client Liability Account, Client Prior Auth, Contract, DD Eligibility, Encounter, Level of Care, Level of Care Review, Oregon Needs Assmt, Plan of Care, PAL, Program Code, Provider, Provider Prior Auth, Provider Service Location, PSW Weekly Hours, Rate, Service Element, Service Eligibility. SEPA Approval Unit, SEPA Line Item</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State SIS Assessment Specialist</b></p> <ul style="list-style-type: none"> <li><b>Do not assign unless approved by the ReBAR Manager:</b></li> <li><b>View:</b> Client, Service Element, User Role</li> <li><b>Update, View:</b> Assessment Appointment</li> <li><b>Run Reports:</b> Assessment Assignment</li> <li><b>Should not be assigned with the State SIS Assessment Manager, State SIS Assessment Viewer, or State Service Desk roles.</b></li> </ul>

<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State SIS Assessment Manager</b></p> <ul style="list-style-type: none"> <li>• <i>Do not assign unless approved by the ReBAR Manager:</i></li> <li>• <b><u>View:</u></b> Client, Service Element</li> <li>• <b><u>Review, Update, View:</u></b> SIS Assessment</li> <li>• <i>Should not be assigned with the State SIS Assessment Assigner or State SIS Assessment Specialist roles.</i></li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State SIS Assessment Assigner</b></p> <ul style="list-style-type: none"> <li>• <i>Do not assign unless approved by the ReBAR Manager:</i></li> <li>• <b><u>View:</u></b> Client, Service Element, User Role</li> <li>• <b><u>Review, View:</u></b> SIS Assessment</li> <li>• <b><u>Create, Update, View:</u></b> Assessment Appointment</li> <li>• <b><u>Run Reports:</u></b> Assessment Assignment</li> <li>• <i>Should not be assigned with the State SIS Assessment Manager, State SIS Assessment Viewer, or State Service Desk roles.</i></li> </ul>

## State eXPRS VIEW ONLY Roles

ADD	DEL	Role Name/Description
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Viewer Only</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> All modules in eXPRS.</li> <li>• <b><u>Run Reports:</u></b> All reports in eXPRS.</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Provider Viewer</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Party, Provider, Provider Extended, Provider Service Location, Service Element</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Provider Viewer Extended</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Party, Provider, Provider Extended, Provider Service Location, Service Element</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State PA Viewer</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Budget Allocation Item, Client, Client Prior Auth, Contract, DD Eligibility, Local Authority, Payee, Plan of Care, Program Area Limitation, Provider, Provider Contacts, Provider Liability Account, Provider Prior Auth, Provider Service Location, Rate, Service Authorization, Service Delivery, Service Element, Service Eligibility, SEPA Approval Unit, SEPA Line Item, Travel Time</li> <li>• <b><u>Review, View:</u></b> SIS Assessment</li> <li>• <b><u>Run Reports:</u></b> Available Monthly Balance, Biennium Provider Payment, CM Available Monthly Balance, CM Enrollment, CM Funding, Outstanding Provider Liability, PAL Monthly Allocation, PPA Unpaid Allotment, SEPA/CPA Reconciliation</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State Claims Viewer</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Claim, Claim Funding, Client Eligibility, Client Liability Account, Client Prior Auth, DD Eligibility, Encounter, Funding Rule, Provider, Provider Contacts, Provider Service Location, Rate, Service Element, Service Eligibility, Travel Time</li> <li>• <b><u>Run Reports:</u></b> Client Enrollment, CM Provider Financial Statement, CPA Unclaimed Balance, Payment Detail, Provider Payment Summary, Remittance Advice, Remittance Advice Monthly, SE 54 Daily Claims, Suspended Claim</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State CM/PA Encounter Viewer</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Claim Funding, Client, Client Eligibility, Client Liability Account, Client Prior Auth, DD Eligibility, Funding Rule, Provider, Provider Contacts, Provider Service Location, Rate, Service Element, Service Eligibility</li> <li>• <b><u>Review, View:</u></b> Encounter (RFFS Claims)</li> <li>• <b><u>Run Reports:</u></b> CM Enrollment, CM Fiscal, CM Participation, CM Provider Financial Statement, FFS Full General Fund Payments</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>State DDEE Viewer</b></p> <ul style="list-style-type: none"> <li>• <b><u>View:</u></b> Client, Client Eligibility, DD Eligibility, DD Elig Enrollment, DD Elig Enrollment Brokerage, DD Elig Enrollment Foster Care, Level of Care, Service Element, Service Eligibility</li> </ul>

<input type="checkbox"/>	<input type="checkbox"/>	<b>State Kids Foster Care Viewer</b> <ul style="list-style-type: none"> <li><b>View:</b> Client, DD Eligibility Enrollment, DD Eligibility Enrollment Foster Care</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<b>State Funding Viewer</b> <ul style="list-style-type: none"> <li><b>View:</b> Funding Rule</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<b>State SIS Assessment Viewer</b> <ul style="list-style-type: none"> <li><i>Do not assign unless approved by the ReBAR Manager:</i></li> <li><b>View:</b> Client, Service Element</li> <li><b>Review, View:</b> SIS Assessment</li> <li><i>Should not be assigned with the State SIS Assessment Assigner or State SIS Assessment Specialist roles.</i></li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<b>State Report View Only Viewer</b> <ul style="list-style-type: none"> <li><b>View:</b> Contract, Employer Relationships, Provider, Provider Service Location, PSW Weekly Hours,</li> <li><b>Run Reports:</b> all reports</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<b>State PC20 Report Viewer</b> <input type="checkbox"/> MH <input type="checkbox"/> DD <ul style="list-style-type: none"> <li><b>View:</b> Party, Service Element</li> <li><b>Run Reports:</b> PC20</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<b>State User Viewer</b> <ul style="list-style-type: none"> <li><b>View:</b> Permission, Role Permission, Security Group, Security Role, User Account, User Permission, User Role</li> <li><b>Run Reports:</b> All Permissions, All Roles, All Security Admin, Daily Security, Local User Accounts, Monthly Security</li> </ul>
<b>State eXPRS Reports Roles</b>		
<b>ADD</b>	<b>DEL</b>	<b>Role Name/Description</b>
<input type="checkbox"/>	<input type="checkbox"/>	<b>State Data Reporting</b> <ul style="list-style-type: none"> <li><b>View:</b> Service Element</li> <li><b>Run Reports:</b> CM Participation, Participation Rate</li> </ul>

<b>Signature</b>		
<b>Manager:</b> <i>(Print Name)</i>	<b>Phone Number:</b>	<b>Ext.:</b>
<b>Manager Title:</b>	<b>Email Address:</b>	
<b>Manager Signature:</b>	<b>Date:</b> / /	

**Maintain form in local file for audit purposes**