

## Hello PA Providers!

In Pennsylvania, we employ a Gatekeeping facility to manage HRST account activation and removal requests serves to both standardize the account management process and, more importantly, to keep the data within the application secured and visible only to people who are qualified to see it.

When you, as a Provider, need to request account activation, updates, or removal you are required to fill out the User Data Template and submit it to your Gatekeeper.

We've put together the following Best Practice guides on how to follow the Gatekeeping process to submit compliant account activation and removal requests. The process is quick and simple. Following it, as laid out below, will reduce any extra confusion caused by incomplete requests.

1. Filling Out the HRST User Data Template for New Users
2. Filling Out the HRST User Data Template to Update or Remove Users

## Filling Out the HRST User Data Template for New Users

1. Select your agency from the Provider dropdown menu.

\*\*If you do not see your Provider agency, Stop Here.

\*\*Please contact, [pasupport@hrstonline.com](mailto:pasupport@hrstonline.com) to verify if your agency is in the system.

| 1  | Provider   | BASIC INFO |           |             |             |                  |              |            | SECURITY ROLES<br>(Put an x in all that apply) |       |
|----|--|------------|-----------|-------------|-------------|------------------|--------------|------------|--|-------|
| 2  | Provider<br>Happy Homes, LLC<br>PersonFirst Services<br>HHomes | Required   | Required  | Required    |             | Required         |              |            |  |       |
| 3  |  |            |           |             |             |                  |              |            |  |       |
| 4  |  |            |           |             |             |                  |              |            |  |       |
| 5  | Email Address  | First Name | Last Name | Middle Name | Credentials | Title            | Work Phone   | Cell Phone | View Only                                      | Rater |
| 6  | <a href="mailto:user@sample.com">user@sample.com</a>           | Bill       | Jones     |             | RN          | Nurse Supervisor | 800-555-1414 |            |  | x     |
| 7  |  |            |           |             |             |                  |              |            |  |       |
| 8  |  |            |           |             |             |                  |              |            |  |       |
| 9  |  |            |           |             |             |                  |              |            |  |       |
| 10 |  |            |           |             |             |                  |              |            |  |       |
| 11 |  |            |           |             |             |                  |              |            |  |       |
| 12 |  |            |           |             |             |                  |              |            |  |       |
| 13 |  |            |           |             |             |                  |              |            |  |       |
| 14 |  |            |           |             |             |                  |              |            |  |       |
| 15 |  |            |           |             |             |                  |              |            |  |       |
| 16 |  |            |           |             |             |                  |              |            |  |       |
| 17 |  |            |           |             |             |                  |              |            |  |       |
| 18 |  |            |           |             |             |                  |              |            |  |       |
| 19 |  |            |           |             |             |                  |              |            |  |       |
| 20 |  |            |           |             |             |                  |              |            |  |       |
| 21 |  |            |           |             |             |                  |              |            |  |       |
| 22 |  |            |           |             |             |                  |              |            |  |       |
| 23 |  |            |           |             |             |                  |              |            |  |       |
| 24 |  |            |           |             |             |                  |              |            |  |       |
| 25 |  |            |           |             |             |                  |              |            |  |       |
| 26 |  |            |           |             |             |                  |              |            |  |       |
| 27 |  |            |           |             |             |                  |              |            |  |       |

**2. Enter your New User’s Information.**

\*\*Please note, the required fields are highlighted in red.

|   |                 |            |           |             |             |                  |              |            |           |       |
|---|-----------------|------------|-----------|-------------|-------------|------------------|--------------|------------|-----------|-------|
| 4 | Required        | Required   | Required  |             |             | Required         |              |            |           |       |
| 5 | Email Address   | First Name | Last Name | Middle Name | Credentials | Title            | Work Phone   | Cell Phone | View Only | Rater |
| 6 | user@sample.com | Bill       | Jones     |             | RN          | Nurse Supervisor | 800-555-1414 |            |           | x     |

**3. Review your data entry for each user.** To ensure receipt of credentials, please verify the correct email address has been entered.

**4. Submit the User Data Template**

- a. If you are a Provider, submit your newly filled out User Data Template to your respective Gatekeeper by emailing them directly.

In the body of your email please include the following information:

- i. (MPI Number)
- ii. Provider Agency Legal Business Name

For example,

(103221438) Happy Homes, LLC.

- a. If you are a Gatekeeper, please follow the in-depth guide: *Reviewing User Data Templates Before Submitting to HRS Support*

## Filling Out the HRST User Data Template To Update or Remove Users

**1. Select your agency from the Provider dropdown menu.**

\*\*If you do not see your Provider agency, Stop Here.

\*\*Please contact, [pasupport@hrstonline.com](mailto:pasupport@hrstonline.com) to verify if your agency is in the system.

| 1  | Provider   | BASIC INFO |           |             |             |                  |              | SECURITY ROLES<br>(Put an x in all that apply) |           |       |
|----|--|------------|-----------|-------------|-------------|------------------|--------------|--|-----------|-------|
| 2  | Provider   | Required   | Required  | Required    |             | Required         |              |  |           |       |
| 3  | Happy Homes, LLC<br>PersonFirst Services<br>HHomes   |            |           |             |             |                  |              |  |           |       |
| 4  |  | Required   | Required  | Required    |             | Required         |              |  |           |       |
| 5  | Email Address  | First Name | Last Name | Middle Name | Credentials | Title            | Work Phone   | Cell Phone                                     | View Only | Rater |
| 6  | <a href="mailto:user@sample.com">user@sample.com</a> | Bill       | Jones     |             | RN          | Nurse Supervisor | 800-555-1414 |  |           | x     |
| 7  |  |            |           |             |             |                  |              |  |           |       |
| 8  |  |            |           |             |             |                  |              |  |           |       |
| 9  |  |            |           |             |             |                  |              |  |           |       |
| 10 |  |            |           |             |             |                  |              |  |           |       |
| 11 |  |            |           |             |             |                  |              |  |           |       |
| 12 |  |            |           |             |             |                  |              |  |           |       |
| 13 |  |            |           |             |             |                  |              |  |           |       |
| 14 |  |            |           |             |             |                  |              |  |           |       |
| 15 |  |            |           |             |             |                  |              |  |           |       |
| 16 |  |            |           |             |             |                  |              |  |           |       |
| 17 |  |            |           |             |             |                  |              |  |           |       |
| 18 |  |            |           |             |             |                  |              |  |           |       |
| 19 |  |            |           |             |             |                  |              |  |           |       |
| 20 |  |            |           |             |             |                  |              |  |           |       |
| 21 |  |            |           |             |             |                  |              |  |           |       |
| 22 |  |            |           |             |             |                  |              |  |           |       |
| 23 |  |            |           |             |             |                  |              |  |           |       |
| 24 |  |            |           |             |             |                  |              |  |           |       |
| 25 |  |            |           |             |             |                  |              |  |           |       |
| 26 |  |            |           |             |             |                  |              |  |           |       |
| 27 |  |            |           |             |             |                  |              |  |           |       |

2. Enter or select the user’s information you wish to update or remove.

*\*To ensure the best quality of service from both your Gatekeeper and HRS Support, keeping a saved running spreadsheet is recommended but not required\**

3. To request an UPDATE to an existing user
  - a. Locate the existing user on the User Data Template and make the changes needed in the same row.
  - b. After making changes, highlight the user’s row in Yellow

|   |  |            |           |             |             |                     |              |            |  |
|---|--|------------|-----------|-------------|-------------|---------------------|--------------|------------|--|
| 4 | Required   | Required   | Required  |             |             | Required            |              |            |  |
| 5 | Email Address  | First Name | Last Name | Middle Name | Credentials | Title               | Work Phone   | Cell Phone |  |
| 6 | <a href="mailto:user@sample.com">user@sample.com</a> | Bill       | Jones     |             | RN          | Director of Nursing | 800-555-1414 |            |  |

4. To request REMOVAL of an existing user, highlight the user’s row in Red

|   |  |            |           |             |             |                     |              |            |  |
|---|--|------------|-----------|-------------|-------------|---------------------|--------------|------------|--|
| 4 | Required   | Required   | Required  |             |             | Required            |              |            |  |
| 5 | Email Address                                      | First Name | Last Name | Middle Name | Credentials | Title               | Work Phone   | Cell Phone |  |
| 6 | <a href="mailto:usa@sample.com">usa@sample.com</a> | Bill       | Jones     |             | RN          | Director of Nursing | 800-555-1414 |            |  |

## 5. Submit the User Data Template

- a. If you are a Provider, submit your newly filled out User Data Template to your respective Gatekeeper by emailing them directly.

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