

DHS Provider Information System Access Request Form User Guide

**A red asterisk indicates a required field*

Step 1. Please select from the dropdown menu the **Type of Request**:

Type of Request *

Step 2. If requesting for another person please enter **Requestor's Name**, **Requestor's Email Address** and **Requestor's Phone Number**:

Requestor's Name

Requestor's Email Address

Requestor's Phone Number

Step 3. Please enter the information for the person receiving the system access:

First Name *

Last Name *

Job Title *

Phone Number *

Email *

Provider Agency Street Address *

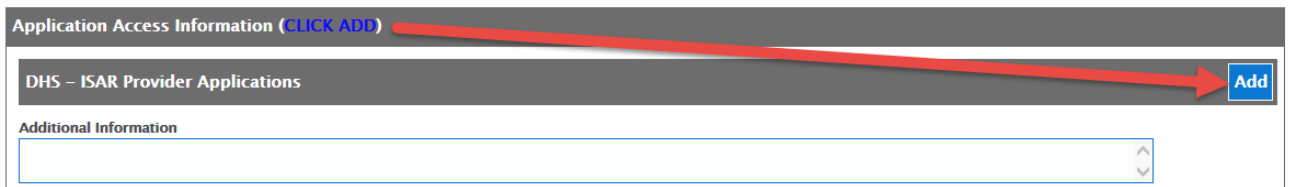
City *

State *

Zip *

DHS Provider Information System Access Request Form User Guide

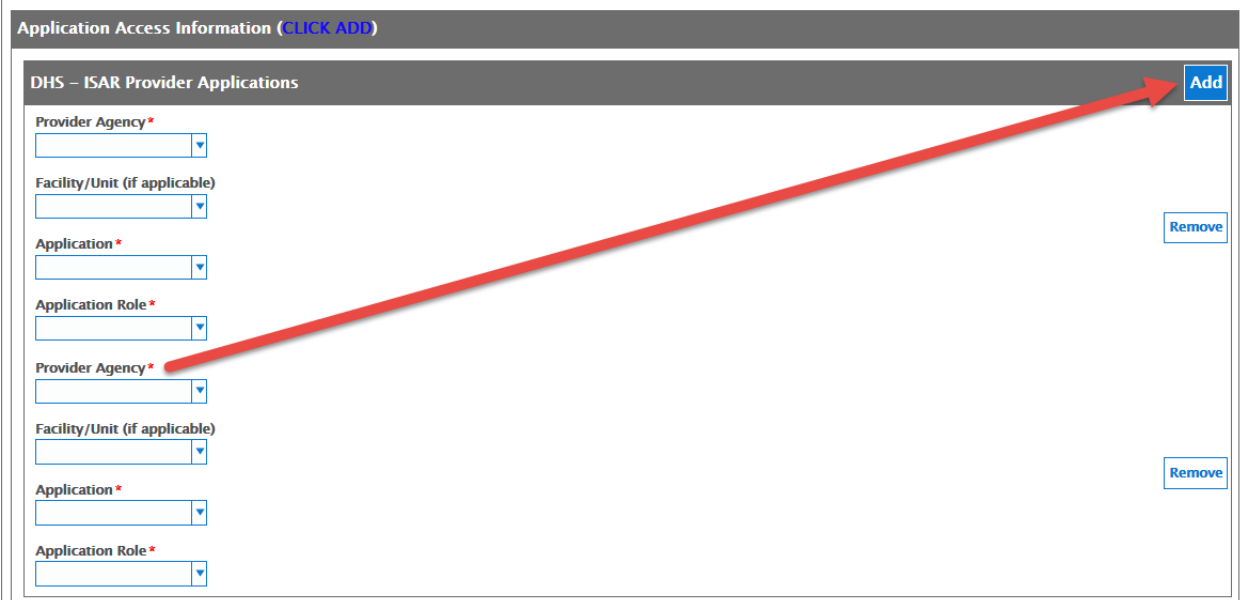
Step 4: Please click the **Add** button to select your Application Access:



The screenshot shows the 'Application Access Information' section with a 'CLICK ADD' link. Below it is a header 'DHS – ISAR Provider Applications' and an 'Add' button. Underneath is an 'Additional Information' text area.

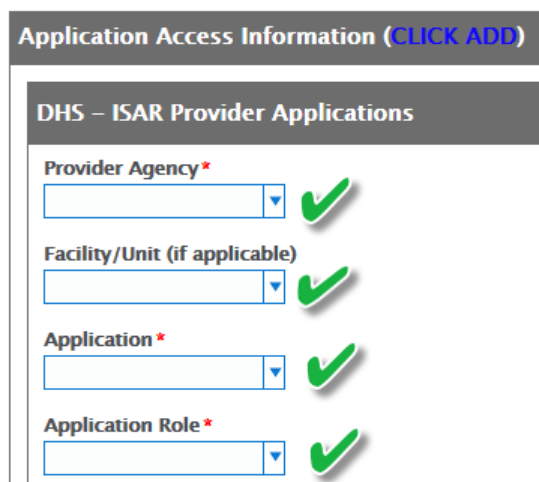
**You can click the Add button multiple times if you need to request multiple Applications and/or Facilities/Units*

Ex:



The screenshot shows the 'Application Access Information' section with a 'CLICK ADD' link. Below it is a header 'DHS – ISAR Provider Applications' and an 'Add' button. There are two application entries, each with a 'Remove' button. The fields for each entry are: Provider Agency*, Facility/Unit (if applicable), Application*, and Application Role*.

Step 5: Select your **Provider Agency**, **Facility/Unit** (if applicable), **Application** and **Application Role** from the dropdown menus:



The screenshot shows the 'Application Access Information' section with a 'CLICK ADD' link. Below it is a header 'DHS – ISAR Provider Applications'. There are four dropdown menus, each with a green checkmark indicating a selection: Provider Agency*, Facility/Unit (if applicable), Application*, and Application Role*.

DHS Provider Information System Access Request Form User Guide

Step 6: If needed you can enter additional notes in the **Additional Information** section:

DHS – ISAR Provider Applications

Provider Agency*

Facility/Unit (if applicable)

Application*

Application Role*

Additional Information
Enter notes here

Step 7. Click on the **HIPAA** tab at the top of the form:

DHS Provider Information System Access Request Form (ISAR)

ISAR HIPAA

Step 8. Please read and check the **Acknowledgement** checkbox to confirm you have read and agree to the terms of the policy:

**The HIPAA tab will remain red until you read and click the Acknowledgement checkbox*

DHS Provider Information System Access Request Form (ISAR)

ISAR HIPAA

ALLEGHENY COUNTY DEPARTMENT OF HUMAN SERVICES USER ACCOUNT POLICY

It is the Policy of the Allegheny County Department of Human Services (DHS) that all users must have a unique identifier in order to access the DHS Computer Network or a DHS application. Sharing Usernames and Passwords is a violation of this policy. Each user must have his/her own user account. This is required as a matter of security. Sharing Usernames and Passwords is a violation of this policy. When access to the DHS Computer Network or a DHS application is needed, the appropriate User Account Request Form must be submitted to the DHS Applications Service Desk Office.

Likewise, when a user no longer requires access to the DHS Computer Network or a DHS application, the appropriate User Account Request Form must be submitted to the DHS Applications Service Desk Office. For example, this action should be taken when a user leaves employment at DHS/Provider/Agency, moves into a position no longer requiring access to the DHS Computer Network or a DHS application, or is terminated from DHS/Provider/Agency.

Questions regarding this Policy or user accounts in general, may be addressed to the DHS Applications Service Desk at 412-350-3500.

The term "user" refers to anyone who has a user account to any DHS application.

Acknowledgement*
I've read and agree to the terms of this policy.

Submit

DHS Provider Information System Access Request Form User Guide

Step 9. Once you have completed the ISAR form, click the **Submit** button.

You can Submit the form from either the ISAR page or the HIPAA page:

DHS – ISAR Provider Applications

Provider Agency*

Facility/Unit (if applicable)

Application *

Application Role*

Additional Information
Enter notes here

****You must read and acknowledge the HIPAA Policy (by clicking on the HIPAA Tab Above) before submitting your request.**



DHS Provider Information System Access Request Form (ISAR)

ALLEGHENY COUNTY DEPARTMENT OF HUMAN SERVICES USER ACCOUNT POLICY

It is the Policy of the Allegheny County Department of Human Services (DHS) that all users must have a unique identifier in order to access the DHS Computer Network or a DHS application.

Each user must have his/her own user account. This is required as a matter of security. Sharing Usernames and Passwords is a violation of this Policy.


When access to the DHS Computer Network or a DHS application is needed, the appropriate User Account Request Form must be completed and submitted to the Information Management Office.

Likewise, when a user no longer requires access to the DHS Computer Network or a DHS application, the appropriate User Account Request Form must be completed and submitted to the Information Management Office. For example, this action should be taken when a user leaves employment at DHS/Provider/Agency, moves into a position no longer requiring access to the DHS Computer Network or a DHS application.

Questions regarding this Policy or user accounts in general, may be addressed to the DHS Applications Service Desk at 412-350-4351.

The term "user" refers to anyone who has a user account to any DHS application.

Acknowledgement*
I've read and agree to the terms of this policy.



DHS Provider Information System Access Request Form User Guide

Step 10. After submitting the form successfully, you will receive the below message. The form will submit and the screen will be blank.

You can then close out of the ISAR form window/tab

