

PPS Referral Management Module (MDS 3.0 Section Q Referrals) Quick Reference Guide for Administration Users Delete User Access

1. Click the **PPS-Request Access** Option



2. Login – Enter your WAMS ID and Password. You will be taken to the “**Program Participation System Web Access Request**”

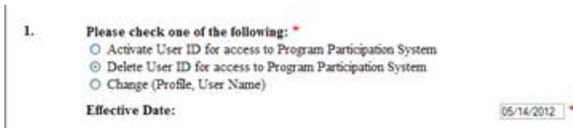


Administrator: If you do not have a WAMS ID and need to delete a former employee’s access to the system, attach the following information on facility letterhead and email it to the SOS Desk at DHSSOSHelp@wisconsin.gov

- the name of the former employee
- their WAMS ID, if known
- name of the nursing home

The SOS Desk will send you confirmation that the employee’s access to the PPS Referral Management system has been removed.

3. Select the “**Delete User ID for access to Program Participation System**” radio button. The Effective Date will prepopulate



4. Fields marked with a red asterisk (*) are required and need to be completed.
5. **User Information:** Enter the “**User ID**” (WAMS ID), “**First Name**”, and “**Last Name**” of the user you wish to have removed from PPS. All other fields in the **User Information** section of the PPS Web Access Request Form are optional. If the User ID (WAMS ID) is unknown, the individual's first and last name will suffice.

User Information

2.	User ID: (From Wisconsin Self-registration Process)	<input type="text"/>	*
3.	First Name:	<input type="text"/>	MI: <input type="text"/>
	Last Name:	<input type="text"/>	
4.	Mother's Maiden Name:	<input type="text"/>	
5.	User's Daytime Phone:	(<input type="text"/>) <input type="text"/> - <input type="text"/> Ext: <input type="text"/>	

6. **Agency Information:** Enter the Agency Name and Contact Information and select the profiles
 - a. Agency Name (Nursing Home Name)
 - b. Agency Supervisor Name (Nursing Home Administrator’s Name)
 - c. Supervisor’s Phone Number (Nursing Home Administrator’s Phone Number)
 - d. Select the Profiles Assigned to the User ID (WAMS ID)
 - e. Click the Submit Button
7. **Fax** or email the **completed and signed form** to the State Security Officer at 608-267-2437 or DHSSOSHelp@wisconsin.gov

PROGRAM PARTICIPATION SYSTEM WEB ACCESS REQUEST

[\(Please read the information below for instructions.\)](#)

1. Please check one of the following: *
- Activate User ID for access to Program Participation System
 - Delete User ID for access to Program Participation System
 - Change (Profile, User Name)

Effective Date: *

User Information

2. User ID: *
- (From Wisconsin Self-registration Process)
3. First Name: MI:
- Last Name:
4. Mother's Maiden Name:
5. User's Daytime Phone: () - Ext:

Agency Information

6. Agency Name:
7. Agency Supervisor Name:
8. Supervisor's Phone Number: () - Ext:
9. Profiles:
- Adult LTC Waitlist Full Access Profile
 - Adult LTC Waitlist View Only Profile
 - Agency Administration Profile
 - Children Waitlist Full Access Profile
 - Children Waitlist View Only Profile
 - Family Care Support Full Access Profile
 - Family Care Support View Only Profile
 - Intensive Autism Waitlist Full Access Profile
 - Intensive Autism Waitlist View Only Profile
 - Mental Health Full Access Profile
 - Mental Health View Only Profile
 - OIE MCO or IRIS Full Access Profile
 - OIE OFCE Full Access Profile
 - Nursing Home Referral Entry Profile
 - Nursing Home Referral Processing Profile
 - OIE Employment Provider Full Access
 - OIE Super User Full Access

Special Instructions: If the user is assigned to more than one nursing home, then a form must be completed for each nursing home separately to delete the user ID.

Questions about deleting a user?

Contact the SOS Desk at: DHSSOSHelp@wisconsin.gov or (608) 266-9198