

Wisconsin Functional Screen Information System

Adult Long Term Care Functional Screen Issue Date: May 26, 2023 Screen Liaison Toolkit

Topic: Adding Access for the Long Term Care Functional Screen (LTCFS) in Functional Screen Information Access (FSIA)

Purpose: This document explains the process for adding access to FSIA for a screener or staff member at a screening agency.

Definitions: Definitions are located in the Screen Liaison Toolkit Definitions document.

How to Add Access to FSIA

- Step 1: Open the Human Services System Gateway at <u>https://fsia.wisconsin.gov/</u>. If the agency staff already has a Web Access Management System (WAMS) ID, proceed to Step 3. If the agency staff does not yet have a Web Access Management (WAMS) ID, complete Step 2.
- **Step 2:** Select "WAMS." When the next page is displayed, choose "Self-Registration (Request a Wisconsin User ID and Password)," and follow the instructions. When complete, return to the Human Services System Gateway.



Step 3:	Select "FSIA – Request Access."
---------	---------------------------------

	Gateway Page × +			·		-	×
$\leftarrow \rightarrow$	C Attps://fsia.wisconsin.gov			A* 📩	£≡	Ē	
RE CONSIN	Strate W S	CONSIN					
		Human Services System Gateway		Add this Page to Favorites			
		** Production Environment **					
This page lists the applications that are used to determine functional and financial eligibility for various programs across the State of Wisconsin. The functional eligibility is determined for Adult, Children's and Mental Health programs. The financial eligibility includes FoodShare, Medicaid, SeniorCare, SSI Care Taker Supplement, Wisconsin Works and Child Care Programs.							
\bigotimes	ESIA - Production Functional Screen Information Access (Production Environment)	Program Participation System (Production Environment)		WAMS To access PPS / CWW / FSIA, signup for a Web Access Management System (WAMS) ID.			
	ESIA - Request Access To complete a particulty form that you can submit to your agency's security officer to get access to FSIA	PPS - Request Access To complete a printable form that you can submit to your agency's security officer to get access to PPS		WISA Wisconsin Integrated Security Application			
	Technical Information • Agency Workstation Requirements	PPS - Training Program Participation System (Training Environment)	CARES	CARES Worker Web			
	Ш	ebsite Policies Need to Add or Update a Link?			-		

Step 4: The WAMS login screen appears. The requester uses their own WAMS ID and password.

-			
$\sum $	Wisconsin.Gov		
WEB ACCESS MANAGEMENT SYSTEM	User ID: Password: Login		
	Forgot your password? Is your account locked?		
	Request a Wisconsin User ID and Password.		
	You are about to access a State of Wisconsin computer system. This is a restricted computer system for authorized users only. All equipment, systems, services, and software connected to this system are intended only for official business use of the State of Wisconsin,		

Not are about to access a stactess and software connected to this system are intended only for official business use of the State of Wisconsin, and may contain U.S. Government information. All data contained on this system is owned by the State of Wisconsin. The State of Wisconsin reserves the right to audit, monitor record and/or disclose all transactions and data sent over this system in a manner consistent with State and federal law. Use of this system by any user, authorized or unauthorized, constitutes consent to monitoring, recording, reading, copying, or capturing and disclosure of data and transactions by authorized, constitutes consent to monitoring, recording, reading, copying, or capturing and disclosure of data and transactions by authorized, constitutes consent to monitoring, state of Wisconsin data, equipment, systems, services, or software by any person(s) is prohibited and may be subject to civil or criminal prosecution under state and/or federal laws.

WAMS Home Wisconsin Portal Home Please don't bookmark this page.

Step 5: The Functional Screen Web Access Request form is displayed. Choose "Add FSIA Access." Complete all fields following the instructions provided on the page. Select "Submit" to generate the completed form in a new window.

User ID Access Information	
1. Please check one of the following:	
Add FSIA Access	
C End FSIA Access	
For changes, please contact the SOS Help De	sk at dhssoshelp@dhs.wisconsin.gov or (608) 266
Effective Date	12/16/2022
User Information	
2. User's WAMS ID:	
3. User's First Name:	MI: (
User's Last Name:	
4. User's Email:	
5. User's Daytime Phone:	
6. Are you a certified Mental Health/SUD, Adult Long Term Care, or Children's Long Term Support Screener?	~
7. Please select if you are requesting PCST Access	~
Agency Information	
8. Agency Name:	Select Agency:
	Contracting only.
9. Authorized Submitter's Name:	
40 Authorized Sub-stands Black	
10. Authorized Submitter's Phone Number:	() [[Ext[]
11. Authorized Submitter's Email:	
12. Profiles:	ADULT SCREENER PROFILE
	ADULT SCREENER VIEW ONLY PROFILE
(Please do not select view, archive or transfer profiles in combination with the full screener profiles of the same	ADULT SCREEN ARCHIVE PROFILE
screen type.	ADULT SCREEN TRANSFER PROFILE
	CHILDREN SCREENER PROFILE
If you are not certain which profiles to select for your role or you are unsure if you are allowed to request a	CHILDREN SCREENER VIEW ONLY
certain profile; please contact the SOS Help Desk or	
speak with your supervisor.)	
	MENTAL HEALTH SCREENER PROFILE
	MENTAL HEALTH SCREENER VIEW ONLY
	PROFILE
	MENTAL HEALTH SCREEN ARCHIVE
	MENTAL HEALTH SCREEN TRANSFER
	PROFILE
	PERSONAL CARE SCREEN ARCHIVE PROFILE
	PERSONAL CARE SCREEN TRANSFER PROFILE
	-
	State User Access Only / MISC*:
	ADULT QUALITY ASSURANCE PROFILE*
	CHILDREN QUALITY ASSURANCE PROFILE
	PROFILE*
	STATE EMPLOYEE PROFILE*
	STATE EMPLOYEE ADMIN PROFILE*
	AGENCY ADMIN PROFILE*
	DELETE APPLICANT PROFILE*
	ADMINISTRATIVE TG PROFILE*
	MCI DISCONNECT PROFILE*
* Do not request these profiles	APPLICANTS SCREEN MERGE PROFILE*
approval from the SOS Help Desk or relevant Program	
Area. State Employee Profile and State Employee	
Admin Profile should only be requested by Wisconsin	
Lenarment of Health Services employees and	
contractors.	

Notes:

For the field "Please select if you are requesting PCST", leave the field blank.

For the Authorized Submitter's Name field, enter the Authorized Submitter (or backup) as listed on the agency's form <u>F-02118</u>, Authorized Signer Designation.

For Profiles field:

- Select Adult Screener Profile for all certified screeners.
- Select Adult Screener View Only Profile for staff at a screening agency who are not certified screeners but need access to FSIA for business needs.
- Select Adult Screen Archive Profile and/or **Adult** Screen Transfer Profile along with the Adult Screener View Only Profile for staff who have a business need to archive or transfer screens.
- Select ICA Profile for staff at an IRIS (Include, Respect, I Self-Direct) Consultant Agency (ICA) who have a business need to view screens and IRIS budgets to assess the individual's **needs and to plan for potential enrollment**.

Step 6: After the form is generated:

- Save the form as a PDF.
- Email it to the <u>Authorized Submitter</u>. A certificate of completion from the screener certification course must be attached for a new certified screener.
- The Authorized Submitter must review the form to make sure that it is correct and complete.
- The Authorized Submitter must email the form and certificate, if applicable, to <u>DHSSOSHelp@dhs.wisconsin.gov</u>.

STATE OF WISCONSIN Department Of Health Services



Please save this form as a PDF file using your web browser's print dialog. The Authorized Submitter for your agency must then submit the form and any required certificates to DHSSOSHelp@dhs.wisconsin.gov. Forms not submitted by the Authorized submitter will be denied.

Use of the FSIA application provides access to confidential information, which must be safeguarded in accordance with Wisconsin Statutes. Using this form to request access constitutes acceptance of responsibility by both User and Authorized Signer for compliance with §49.32(10), §49.32(10m), §49.81, §49.83, §943.70(2) and with DHS policy.

FUNCTIONAL SCREEN WEB ACCESS REQUEST

1. Please check one of the following :

Add FSIA Access X End FSIA Acces

X End FSIA Access	
Effective Date: 12/27/2022	
Please fill in the following information (All ite	ems MUST be completed):
User Information	
2. User's WAMS ID	3. User's Name (Last, First, MI)
SuzieS22	Screener,Suzie
4. User's Email	5. User's Phone Number
suzie.screener@agency123.org	(123)4566789
7. PCST Screener Status (PCST Screener's C Agency Information	thly)
8. Agency Name (Please do not abbreviate.) Agency 123	
9. Authorized Submitter's Name Samantha Submitter	10. Authorized Submitter's Phone Number (123)4567788
11. Authorized Submitter's Email samantha.submitter@agency123.org	
12. Profiles	

ADULT SCREENER PROFILE

The DHS SOS Help Desk will process access requests in the order that they are received. If access has not been granted after 10 business days, please contact the DHS SOS Help Desk at DHSSOSHelp@dhs.wisconsin.gov.

DHS Contacts: If you have questions or comments about this document, please contact the LTCFS Screen Team at <u>DHSLTCFSTeam@dhs.wisconsin.gov</u>.