

TIERS Access and Security Role Assignment Request

[Form 4743A Instructions \(PDF\)](#)

Supervisor/Manager Information

First and Last Name:		Request Type:	Date of Request:
Area Code and Phone No.:	Work Email Address:		

Employee/Contractor Information

Employee Last Name:	First Name:	MI:	Agency:
Existing TIERS User ID:	HHSAS Employee No.:		User Type:
Employee's Business Email Address:		TIERS Region No. (TIERS MOR Offices):	
Area Code and Phone No.:		TIERS Job Title:	
Name of User's TIERS Primary Office (<i>Select from TIERS MOR Offices for internal users or TIERS External Offices for external users</i>):			

For Internal Users Only

Name of Other TIERS Offices Where Roles are to be Assigned (*Copy/paste all that apply from the [TIERS MOR Offices](#)*):

Internal Users

Refer to [TIERS Functional Roles](#) for role descriptions. Select all that apply.

Generic:		
<input type="checkbox"/> Advisor	<input type="checkbox"/> Application Processor	<input type="checkbox"/> Case Data Change Corrector
<input type="checkbox"/> Change Clerk	<input type="checkbox"/> EBT Clerk	<input type="checkbox"/> Full Inquiry
<input type="checkbox"/> Med ID Clerk	<input type="checkbox"/> MEPD Program Status Date	<input type="checkbox"/> ME Worker
<input type="checkbox"/> MOR Administrator	<input type="checkbox"/> MOR Viewer	<input type="checkbox"/> Out Stationed All
<input type="checkbox"/> Scheduler	<input type="checkbox"/> Security Inquiry	<input type="checkbox"/> Star+Plus
<input type="checkbox"/> Star+Plus MMP	<input type="checkbox"/> TAA Change Clerk	<input type="checkbox"/> TAA Full Inquiry
<input type="checkbox"/> TIERS Supervisor LTC	<input type="checkbox"/> TIERS TW Supervisor	

Centralized Benefit Services (CBS): *Must also select **Advisor** role in the **Generic** section above.*

<input type="checkbox"/> CBS Specialized Unit	<input type="checkbox"/> General CBS FS SNAP Advisor	<input type="checkbox"/> General CBS FS SSI Advisor
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Regional:		
<input type="checkbox"/> Assistant Regional Director	<input type="checkbox"/> Field Quality Examiner	<input type="checkbox"/> Program Manager
<input type="checkbox"/> Regional Director	<input type="checkbox"/> Regional Director Administrative Assistant	<input type="checkbox"/> Regional Director LTC
<input type="checkbox"/> Regional EBT LSIS	<input type="checkbox"/> Program Manager LTC	

State Office:		
<input type="checkbox"/> Alerts Administrator	<input type="checkbox"/> Audit	<input type="checkbox"/> Batch Administrator
<input type="checkbox"/> Central Print Facility	<input type="checkbox"/> Conversion Specialist	<input type="checkbox"/> Correspondence Administrator DBSU
<input type="checkbox"/> Correspondence Viewer	<input type="checkbox"/> Data Control Administrator	<input type="checkbox"/> Data Integrity Buy In Unit
<input type="checkbox"/> Data Integrity SDX	<input type="checkbox"/> DBSU Administrator	<input type="checkbox"/> Development Administrator
<input type="checkbox"/> DI Foster Care	<input type="checkbox"/> DI Med ID Clerk	<input type="checkbox"/> DI Newborn
<input type="checkbox"/> Disability Determination Worker	<input type="checkbox"/> Disaster Administrator	<input type="checkbox"/> EA FCAA
<input type="checkbox"/> Fiscal Processing	<input type="checkbox"/> Fiscal Reports	<input type="checkbox"/> Help Desk
<input type="checkbox"/> Help Manager	<input type="checkbox"/> Interface Administrator	<input type="checkbox"/> Interface Viewer
<input type="checkbox"/> Interim Conversion Task F	<input type="checkbox"/> IPV Sanctions	<input type="checkbox"/> Limited Fiscal Processing
<input type="checkbox"/> Lock In	<input type="checkbox"/> Lone Star Business Services	<input type="checkbox"/> Maintain Warrants
<input type="checkbox"/> Mass Batch Correspondence Administrator	<input type="checkbox"/> Medical Occurs	<input type="checkbox"/> OIG
<input type="checkbox"/> OPI	<input type="checkbox"/> OPI Full Inquiry	<input type="checkbox"/> Override Eligibility Run Date
<input type="checkbox"/> Perform SSI Certification	<input type="checkbox"/> Provider Claims CMS	<input type="checkbox"/> Provisioning
<input type="checkbox"/> Quality Control	<input type="checkbox"/> Quality Control Samples	<input type="checkbox"/> Reference Table Administrator No Versioning
<input type="checkbox"/> Reports Administrator	<input type="checkbox"/> Reference Table Administrator	<input type="checkbox"/> Reference Table Viewer
<input type="checkbox"/> SOLQ Administrator	<input type="checkbox"/> Split Merge	<input type="checkbox"/> SPSU
<input type="checkbox"/> Test Login	<input type="checkbox"/> TIERS Level 2 Help Desk	<input type="checkbox"/> Transaction Log Viewer

Appeals Divisions:		
<input type="checkbox"/> Agency Representative Supervisor	<input type="checkbox"/> Agency Representative	<input type="checkbox"/> All TIERS Users HHSC
<input type="checkbox"/> External Agency Hearing Administrator	<input type="checkbox"/> Hearings Assistance	<input type="checkbox"/> Hearings Manager
<input type="checkbox"/> Hearings Officer		

External Users – TIERS Functional Roles

The following roles do not require MOR Profiles and are unique to DADS, DFPS, DSHS, HHSC, Medical Transportation, MHMR, OAG, TAA, TWC and TYC. Refer to [TIERS Functional Roles](#) for role descriptions. Select all that apply.

External:

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> Agency Representative | <input type="checkbox"/> Agency Representative Supervisor | <input type="checkbox"/> Correspondence Viewer | <input type="checkbox"/> DADS ALL |
| <input type="checkbox"/> DADS Reports (State Level) | <input type="checkbox"/> Development Administrator | <input type="checkbox"/> DFPS | <input type="checkbox"/> DFPS Eligibility Specialist |
| <input type="checkbox"/> DFPS Foster Care | <input type="checkbox"/> DI Foster Care | <input type="checkbox"/> DSHS | <input type="checkbox"/> Full Inquiry |
| <input type="checkbox"/> HHSC One | <input type="checkbox"/> HHSC Two | <input type="checkbox"/> HHSC Three | <input type="checkbox"/> HHSC Four |
| <input type="checkbox"/> HHSC Five | <input type="checkbox"/> HHSC Lock In Reports (State Level) | <input type="checkbox"/> HHSC MAXIMUS One | <input type="checkbox"/> HHSC MAXIMUS Two |
| <input type="checkbox"/> HHSC TMPH | <input type="checkbox"/> IPV Sanctions | <input type="checkbox"/> Limited Inquiry | <input type="checkbox"/> Medical Transportation Inquiry |
| <input type="checkbox"/> MHMR DME | <input type="checkbox"/> MHMR North Star | <input type="checkbox"/> OAG Crime Victims | <input type="checkbox"/> OAG Help Desk |
| <input type="checkbox"/> OAG One | <input type="checkbox"/> OAG Two | <input type="checkbox"/> Provider Claims CMS | <input type="checkbox"/> Reference Table Viewer |
| <input type="checkbox"/> Security Inquiry | <input type="checkbox"/> Star+Plus | <input type="checkbox"/> Star+Plus MMP | <input type="checkbox"/> SOQL Historical Reports |
| <input type="checkbox"/> TAA Full Inquiry | <input type="checkbox"/> TWC | <input type="checkbox"/> TWPA Level Two Help Desk | <input type="checkbox"/> TYC |

Internal Users – TIERS Report Roles

Requires entry in section below, TIERS Report Access Level. Refer to second tab of [TIERS Functional Roles](#) for available role reports.

Generic:

- | | | | |
|---------------------------------------|---|--|--------------------------------------|
| <input type="checkbox"/> DADS Reports | <input type="checkbox"/> HHSC Lock In Reports | <input type="checkbox"/> TAA Operational Reports | <input type="checkbox"/> TAA Reports |
|---------------------------------------|---|--|--------------------------------------|

Regional:

- | | | |
|---|---|--|
| <input type="checkbox"/> Regional Reports EBT Coordinator | <input type="checkbox"/> Regional Reports LTC Regional Director | <input type="checkbox"/> Regional Reports ME Worker |
| <input type="checkbox"/> Regional Reports TW Advisor | <input type="checkbox"/> Regional Reports TW Program Manager | <input type="checkbox"/> Regional Reports TW Regional Director |
| <input type="checkbox"/> Regional Reports TW Supervisor | | |

State Office:

- | | | |
|---|---|---|
| <input type="checkbox"/> SO Provider Claims CMS | <input type="checkbox"/> SO Reports Civil Rights | <input type="checkbox"/> SO Reports Data Integrity Section |
| <input type="checkbox"/> SO Reports Fiscal | <input type="checkbox"/> SO Reports Framework | <input type="checkbox"/> SO Reports LTC Program |
| <input type="checkbox"/> SO Reports Lone Star Business Services | <input type="checkbox"/> SO Reports Office of Program Integrity | <input type="checkbox"/> SO Reports Program Analysis and Evaluation |
| <input type="checkbox"/> SO Reports Program Budget and Statistics | <input type="checkbox"/> SO Reports TW Program Policy | |

Appeals Divisions:

- | | | |
|---|---|---|
| <input type="checkbox"/> Reports Administrator | <input type="checkbox"/> Reports Agency Representative Supervisor | <input type="checkbox"/> Reports All TIERS Users HHSC Hearings |
| <input type="checkbox"/> Reports Hearings Administrator | <input type="checkbox"/> Reports Hearings Assistant | <input type="checkbox"/> Reports Hearings Manager |
| <input type="checkbox"/> Reports Hearings Officers | <input type="checkbox"/> Reports SDS Formerly PBS | <input type="checkbox"/> SO Reports Fair Hearing/Legal Case Summary |

Internal Users – TIERS Report Access Level

Requires entry in section above, TIERS Report Roles.

Report Access Level:

- | | | | | |
|-----------------------------------|-------------------------------|--|---------------------------------|--------------------------------|
| <input type="checkbox"/> Employee | <input type="checkbox"/> Unit | <input type="checkbox"/> Program Manager | <input type="checkbox"/> Region | <input type="checkbox"/> State |
|-----------------------------------|-------------------------------|--|---------------------------------|--------------------------------|

Internal Users – Portal Functional Roles

Refer to [Portal Functional Roles](#) for role descriptions. Select all that apply.

Generic:

<input type="checkbox"/> CBO TW	<input type="checkbox"/> DataMart (cognosea)	<input type="checkbox"/> HHSC Data Integrity
<input type="checkbox"/> HHSC Ombudsman	<input type="checkbox"/> HHSC Program Integrity – All	<input type="checkbox"/> HHSC Scheduler
<input type="checkbox"/> HHS Legal All	<input type="checkbox"/> MEPD App Registration (SSP)	<input type="checkbox"/> Office of Inspector General
<input type="checkbox"/> Performance Oversight Specialist	<input type="checkbox"/> RCC	<input type="checkbox"/> TW App Registration (SSP)

ART:

<input type="checkbox"/> ART Administrative Assistant	<input type="checkbox"/> ART Assistant Manager	<input type="checkbox"/> ART Clerk
<input type="checkbox"/> ART Disposition Worker TW	<input type="checkbox"/> ART Manager	<input type="checkbox"/> ART Program Specialist
<input type="checkbox"/> ART Senior Disposition Worker TW	<input type="checkbox"/> ART Team Supervisor	

Customer Care Centers:

<input type="checkbox"/> ART Clerk – WHP	<input type="checkbox"/> Call Center Administrative Assistant	<input type="checkbox"/> Call Center Assistant Manager
<input type="checkbox"/> Call Center Clerk	<input type="checkbox"/> Call Center Disposition Worker TANF	<input type="checkbox"/> Call Center Disposition Worker TW
<input type="checkbox"/> Call Center Operations Manager	<input type="checkbox"/> Call Center Refugee	<input type="checkbox"/> Call Center Secretary
<input type="checkbox"/> Call Center Team Supervisor	<input type="checkbox"/> CBS Disposition Worker	<input type="checkbox"/> CBS Supervisor
<input type="checkbox"/> Disposition Worker CBSMT (MTFCY Role)	<input type="checkbox"/> HHSC Benefits Office Team Supervisor CBS	<input type="checkbox"/> Regional Director – Assistant – WHP
<input type="checkbox"/> Regional Director – WHP	<input type="checkbox"/> Senior ART Worker WHP	<input type="checkbox"/> State Document Processing Technician
<input type="checkbox"/> Team Supervisor WHP		

Health and Human Services Commission Benefits Office:

<input type="checkbox"/> CMC	<input type="checkbox"/> HHSC Benefits Office Clerk	<input type="checkbox"/> HHSC Benefits Office Clerk CBSMT
<input type="checkbox"/> HHSC Benefits Office EBT LSIS Clerk	<input type="checkbox"/> HHSC Benefits Office Secretary Team Supervisor	<input type="checkbox"/> HHSC Benefits Office Senior Disposition Worker TW
<input type="checkbox"/> HHSC Benefits Office Team Supervisor	<input type="checkbox"/> Out Stationed – TW	

Regional:

<input type="checkbox"/> CPC	<input type="checkbox"/> Regional Director	<input type="checkbox"/> Regional Director – Administrative Assistant
<input type="checkbox"/> Regional Director – Assistant	<input type="checkbox"/> Regional EBT LSIS Coordinator	

Appeals Divisions:

<input type="checkbox"/> Agency Representative	<input type="checkbox"/> Agency Representative Supervisor	<input type="checkbox"/> External Hearings and Appeals
<input type="checkbox"/> External Hearings and Appeals Maintenance	<input type="checkbox"/> Hearings and Appeals Staff	<input type="checkbox"/> Provider Hearings and Appeals

MEPD:

<input type="checkbox"/> ART Senior Disposition Worker ME	<input type="checkbox"/> Call Center Senior Disposition Worker ME	<input type="checkbox"/> CCC MEPD Clerk
<input type="checkbox"/> HHSC Benefits Office Disposition Worker ME	<input type="checkbox"/> MBIC Worker	<input type="checkbox"/> MBI
<input type="checkbox"/> MEPD CCC Supervisor	<input type="checkbox"/> MEPD Clerk	<input type="checkbox"/> MEPD Director
<input type="checkbox"/> MEPD Team Supervisor	<input type="checkbox"/> MEPD Worker	<input type="checkbox"/> Out Stationed – MEPD

Portal Roles – Vendor (MAXIMUS)

Refer to "Vendor" under Portal Office Type in the [Portal Functional Roles](#) for role descriptions.

<input type="checkbox"/> CCIAPP	<input type="checkbox"/> TAA Call Center Staff
<input type="checkbox"/> TAA CAS – Complaints and Appeals Specialist	<input type="checkbox"/> TAA CAS Supervisor – Complaints and Appeals Supervisor
<input type="checkbox"/> TAA CCR Escalation – CCR Escalation Team	<input type="checkbox"/> TAA CCR – CCR
<input type="checkbox"/> TAA CCR Supervisor – CCR Supervisor	<input type="checkbox"/> TAA CCR Lead – CCR Lead
<input type="checkbox"/> TAA CT Supervisor – Case Technician Supervisor	<input type="checkbox"/> TAA CT – Case Technician
<input type="checkbox"/> TAA IAS Supervisor – Image Assembly Supervisor	<input type="checkbox"/> TAA IAS – Image Assembly Specialist
<input type="checkbox"/> TAA NTS Supervisor – Non-Technician Support Supervisor	<input type="checkbox"/> TAA NTS – Non-Technician Support
<input type="checkbox"/> TAA Program Specialist Supervisor – Program Specialist Supervisor	<input type="checkbox"/> TAA Program Specialist – Program Specialist
<input type="checkbox"/> TAA PT Supervisor – Program Technician Supervisor	<input type="checkbox"/> TAA PT – Program Technician
<input type="checkbox"/> TAA QA Specialist – Quality Assurance Specialist	<input type="checkbox"/> TAA QA Supervisor – Quality Assurance Supervisor

External Users – Portal Roles

Refer to [Portal Functional Roles](#) for role descriptions. Select all that apply.

Generic:

- CBO TW
 DADSAll
 External All Others
 OAG – All

New MAXe IE:

- Administrator
 Image Only
 QC Specialist QC
 QC Supervisor QC
 Read Only
 Research Supervisor
 Specialist AS
 Supervisor AS

Service Delivery Center

[SDC Location](#). Select all that apply.

Contact Center:

- Administrator
 CC Representative
 CC Supervisor
 QC Specialist
 QC Supervisor
 SEU Specialist
 SEU Supervisor

Document Center:

- Administrator
 Analyst
 Inquiry and Read Only
 QC Specialist
 QC Supervisor
 Research Specialist
 OSS Reports
 Research Supervisor
 Specialist AS
 Supervisor AS
 Technician
 Vendor Ops Reports

Supervisor/Manager Authorization

Supervisor Comments:

Supervisor Name (*First and Last*):

Signature of Supervisor:

Date Signed/Submitted:

[HHS Enterprise Acceptable Use Agreement \(Form HHS AUA\)](#) must be provided by all users. You must sign the new AUA as of September 8, 2021.

Submit form by email at tiersprovision@hhs.texas.gov and copy your supervisor on this email submission.

Provisioning Department Use Only

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Corrections made, if applicable: