PA PROMISe[™] User Manual

Hewlett Packard Enterprise

PROMIS*e*[™]/LIHEAP Vendor Internet User Manual

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1 Introduction

The PROMIS e^{TM} /LIHEAP Vendor Internet allows you to:

- Electronically submit LIHEAP claims and attachments from any location connected to the Internet.
- View the status of any claim.
- View vouchers via the 'Vouchers (RA)' link

1.1 Key Features and Benefits

The interactive features on the PROMIS e^{TM} LIHEAP Vendor Internet Web site provide easy access and exchange of up-to-date information previously unavailable between vendors and LIHEAP. The PROMIS e^{TM} /LIHEAP Vendor Internet solution allows you to log on using a standard Internet browser to enter or request information. Any information you pull from this application is specific to your vendor number and will not be shared with others.

1.2 Secured External Web Site

 $PROMISe^{TM}$ provides security to the Internet Web-based application through an external Web site. Using a logon ID, password, and site certificate features, this secure Web site is accessible through the public Internet. The options and activities listed below are available to LIHEAP vendors who have received authorization to access this site.

- Maintain account information: password; security question and answer; contact information
- Create and manage user accounts for others (alternates) in your organization.
- Submit LIHEAP claims for payment.
- Submit supporting documentation.
- Review the status of LIHEAP claims.
- Review vouchers

1.3 Windows

The PROMIS e^{TM} /LIHEAP Vendor Internet windows give you the ability to electronically submit claims and supporting documentation (attachments), perform claim inquiry, review and print vouchers, manage your online account, create alternates, and grant access to, as well as, revoke permissions to those accounts by alternates. This manual will lead you through the process of completing the tasks associated with the functionalities that support these capabilities.

<u>Section 7</u> of this manual provides detailed information for each window in the PROMIS e^{TM} /LIHEAP Vendor Internet application. Documentation for each window includes:

Window NarrativeBrief description of the window, its purpose, and use.
--

Layout	Sample "screen shot" of the window that illustrates all data fields and controls (buttons, drop-down boxes, etc.).	
Field Description Table	Detailed description of each data field and object within the window, including field lengths and data types. The Field Descriptions help you understand the information requested in the windows, and explain the information you are asked to provide in the window fields. All field description tables are located in <u>Section 7, LIHEAP Vendor Internet Windows</u> .	
Field Edits	The Field Edits tables explain what to do if you encounter error messages while using a window. Error Messages, Error Codes, and Corrective Actions to fix incorrect/invalid entries or actions are listed in these tables, which are included following the Field Descriptions in the window documentation in <u>Section 7</u> , <u>LIHEAP Vendor Internet Windows</u> of this document. See Section 1.4 below for more detailed information about Field Edits.	
Accessibility and Use, Step/Action Tables	Description of how the window is accessed, followed by systematic instructions to navigate within and between windows and perform basic functions and operations within the window.	

1.4 About Field Edits

All relevant Field Edits for the windows in the PROMIS e^{TM} /LIHEAP Vendor Internet User Manual are listed after the Field Descriptions for each window in <u>Section 7</u>, if Field Edits are applicable to the window being described. Not all windows are subject to Field Edits. If Field Edits do not apply to a window, the Field Edits table states "No Field Edits found for this window." Windows that do not require field edit information are usually windows that do not contain fields in which you enter or save information.

Field Edits are a combination of error messages, which the system detects and communicates, and the corrective actions that should be taken to remedy them. The columns of information in the Field Edits tables should be used to understand the error messages you may receive while using the PROMIS e^{TM} /LIHEAP Internet application, and what to do about them.

- The **Field** column reflects the name of a field found in one or more of the windows of this application.
- The **Error Code** is a numeric value the system uses to identify the correct error message to display.
- The **Error Message** column shows the message displayed by PROMIS e^{TM} to tell you the error has occurred. The content of each error message is specific to the field in which the error occurred.
- The **To Correct** column describes how to correct the detected error.

1.4.1 Sample Error Message Scenario

The following scenario depicts a sample of when an error message occurs and how to correct it:

You are working in a window that contains the field **ICN** (**Claim ID**). You enter an incomplete ICN/Claim ID number. When you finish entering information in the window and attempt to go to another window or complete the action on which you are working, the following error message appears:

"ICN must be 13 characters."

This error message indicates to you that the information you entered is not correct and the system requires this information to correctly process the task you are performing. To correct the error, locate the ICN (Claim ID) field in the Field Edits table for that window, and follow the instruction in the **To Correct** column. For this field and error, the instructions are:

"Enter a numeric, 13-character ICN."

Go back to that field in the window and enter the correct information. You may then proceed to the next task you want to perform in the system.

1.4.2 Sample Field Edits Table

Field Edits

Field	Error Code	Error Message	To Correct
From Date (Input)	0	The from date Month is invalid	Enter a valid month.
	1	When ICN is not specified, the date range may not exceed one year. Please enter a shorter period of time or specify the ICN.	Enter a shorter range of days or populate the ICN field.
	2	When searching by date range only, the date range may not exceed 31 days. Please enter a shorter period of time or specify additional search criteria.	Enter a shorter range of days or populate the ICN field.
ICN (Input)	0	ICN must be 13 characters.	Enter a numeric, 13- character ICN.
	1	ICN must be numeric.	Enter a numeric, 13- character ICN.
Search	0	Please specify ICN, Recipient Name, Crisis Authorization # or enter a Date Range.	Enter at least one of the specified fields.
Thru Date (Input)	0	Thru date must be later than From Date.	Enter a Thru date later then the From date.
	1	[The thru date Day is invalid.	Enter a valid day.

1.5 The Menu Bar

Common to almost all PROMIS e^{TM} /LIHEAP Vendor Internet windows are the tab options found on the Menu Bar, shown below. This Menu Bar is located below the "Pennsylvania Department of Human Services" window banner.

Main Account Vouchers (RA) Help Log Off

The table below describes the menu and window options that are accessible from the Menu Bar.

Menu Selection		
Main	Displays or returns to the LIHEAP Main Menu Page.	
Account	Displays the function for maintaining user profiles.	
Vouchers (RA)	Displays the function for viewing Vouchers	
Help	Opens the LIHEAP Vendor Internet User Manual.	
Log Off	Logs off the Web application.	

2 Logging in to the LIHEAP Vendor Internet Site

LIHEAP vendors must follow the security process to be granted access to the PROMIS e^{TM} /LIHEAP Vendor Internet application. Please follow the steps listed below to attain this access:

- You must be registered with the Commonwealth or Pennsylvania as an enrolled and valid vendor.
- You must have a vendor ID and service location(s). This information becomes very important when you request authorization for a logon ID and password.
- You must have a computer with access to the Internet, and an active Internet account.

2.1 **PROMISeTM/LIHEAP Vendor Internet Logon Window**

Access the PROMIS e^{TM} /LIHEAP Vendor Internet main window from the LIHEAP Web site, or use the link <u>http://LIHEAP.dpw.state.pa.us/</u> to open the LIHEAP home page. Click the **PROMIS** e^{TM} /LIHEAP Internet link. The Logon window for the PROMIS e^{TM} /LIHEAP Vendor Internet application below will be displayed.

DEPARTMENT OF HUMAN SERVICES Development of HUMAN SERVICES DHS LIHEAP Logon Help Reed Help? Use the Intermet Help Manuals Here Vendor Crisis Attachment Upload Process Here The LIHEAP program is no longer accepting claims for the 2015	- 2016 heating season.
Important Reminders:	
1. Submitting documentation for a Crisis authorization may be done in one of three ways:	
 Attached by uploading the document onto PROMISe when submitting the claim is the quickest way to get paid for a crisis authorization Sent with the LIHEAP Cover Sheet specific to the crisis authorization (write the Authorization # on the documentation) by: Fax to 717-207-7997 or 717-207-7994 	
Note: When faxing, the LIHEAP Cover Sheet must be the 1st document, followed by the metered trip ticket or other documentation. Multiple LIHEAP Crisis Claims may be sent on the same fax transaction (up to 30 pages)	
 US Mail to DHS-LIHEAP Crisis Claims, PO Box 69028, Harrisburg, PA 17106 	
 Your password must begin with an alpha character, be between six and eight characters in length, and contain at least two numeric characters. If you have trouble resetting your password, call 1-800-248- 2152. 	
Already registered? If you have already set up your account or a vendor has set one up for you, log on here. Logon ID:(13 digit Vendor ID or 9 digit Alternate ID) Password:Forcet Password? Log On Not yet registered? Create your user account now.	
This site requires, at minimum, Internet Explorer version 6 with 128-bit encryption.	

2.1.1 Logon Menu Bar

The Menu Bar in the Logon window offers different options from the Menu Bar on all other windows in the application. These options are specific to the tasks you may want to perform at the time you log on to the application. From the Menu Bar in the Logon window, you can do the following:

DHS LIHEAP	Logon	<u>Help</u>	Forgot Password?
------------	-------	-------------	------------------

- **DHS LIHEAP** Accesses the DHS LIHEAP Main Page on the DHS website.
- **Logon** This is a default option for this window.
- **Help** Opens the PROMIS e^{TM} /LIHEAP Vendor Internet User Manual.
- **Forgot Password?** Select this option if you have forgotten your password and need to reset it to log on to the application.

2.1.2 Logon Notices

System outage messages and other notices will display above the Login box on this page.

2.2 Establishing a New Vendor User Account

If an account has not yet been established for you, click on the link **Create your user account now** located under the logon box. The User Registration window will be displayed.

PLEASE NOTE: This link is only available when vendor registration is open. It will not display when the vendor registration is closed.

2.2.1 User Registration

The User Registration window allows a vendor to request access to the PROMIS e^{TM} /LIHEAP Web site by submitting the necessary entity information requested in this online form. You are asked to read the appropriate disclaimers and fill in the Web form with identifying information, email address, and to confirm that you have read and understand the disclaimers presented.

Vendor ID: (13 digits required) E-mail Address: (Example: vendor@fuelcompany.com Retype E-mail Address: (Example: vendor@fuelcompany.com Contact Person: (10 digits) Phone Number: (10 digits) Enter a password: (10 digits)
E-mail Address: (Example: vendor@fuelcompany.com Retype E-mail Address: Contact Person: (10 digits) Phone Number: (10 digits) Enter a password: Retype password: (10 digits)
Retype E-mail Address: Contact Person: Phone Number: (10 digits) Enter a password: Retype password:
Contact Person: Phone Number: (10 digits) Enter a password: Retype password:
Phone Number: (10 digits) Enter a password: Retype password:
Enter a password:
Retype password:
Providers and Billing Agents must enter the SSN or IRS EIN that is registered with your DHS Vendor Number. This require alidate your identity:
SSN: (OR) IRS EIN:
Select a security question and provide an answer:
Security Question: What is your mother's maiden name? 🗸
Select a security question and provide an answer: Security Question: What is your mother's maiden name?

Your password must:

- Begin with an alpha character
- Be between 6 and 8 characters in length
- Contain at least 2 numeric characters within the length ranges (do not exceed 8 characters).

After completing the User Registration form, click the **Submit Registration** button to submit the form electronically. If all required information is present, you will be able to proceed to the Statement of Entitlement page to confirm that you have read and understand the disclaimers presented. This page must be signed and submitted before gaining access to the PROMIS e^{TM} /LIHEAP Web application.

NOTE: PROMIS e^{TM} supports user IDs issued from both PROMIS e^{TM} and DHS Unified Security. Because a vendor user ID is comprised of the nine-digit PROMIS e^{TM} vendor number plus a four-digit service location, vendors with more than one service location may create more than one account.

2.2.2 Statement of Entitlement

The Statement of Entitlement, also called the Web User Agreement, displays when you register for Internet access or upon your initial logon. You are required to sign the user agreement to use the Web site. If you do not sign and submit the agreement, you will be logged off the system and returned to the Logon window.

By entering my full name in the space provided below and transmitting this form electronically, I state, I am the person whom I represent myself to be herein, and I affirm the information within this web application is complete and accurate and made subject to the penalties of 18 Pa.C.S. §4904 relating to unsworn falsification to authorities. In addition, I acknowledge that misstating my identity or assuming the identity of another person may subject me to misdemeanor or felony criminal penalties for identity theft pursuant to 18 Pa.C.S. §4120 or other sections of the Pennsylvania Crimes Code. Sign by typing your full name below.	PENNSYLVANIA DEPARTMENT OF HUMAN SERVICES
By entering my full name in the space provided below and transmitting this form electronically, I state, I am the person whom I represent myself to be herein, and I affirm the information within this web application is complete and accurate and made subject to the penalties of 18 Pa.C.S. §4904 relating to unsworn falsification to authorities. In addition, I acknowledge that misstating my identity or assuming the identity of another person may subject me to misdemeanor or felony criminal penalties for identity theft pursuant to 18 Pa.C.S. §4120 or other sections of the Pennsylvania Crimes Code.	Statement of Entitlement
Sign by typing your full name below.	By entering my full name in the space provided below and transmitting this form electronically, I state, I am the person whom I represent myself to be herein, and I affirm the information within this web application is complete and accurate and made subject to the penalties of 18 Pa.C.S. §4904 relating to unsworn falsification to authorities. In addition, I acknowledge that misstating my identity or assuming the identity of another person may subject me to misdemeanor or felony criminal penalties for identity theft pursuant to 18 Pa.C.S. §4120 or other sections of the Pennsylvania Crimes Code.
	Sign by typing your full name below.

To accept the User Agreement, type your **full name** in the field and click the **Submit** button.

1	Message fr	om webpage		x
	À	You have successfully registered for the LIHEAP web site then enter your new logon information to access the we	. Press (b site	OK,
				ок

2.3 Changing Your Password

You are periodically required to change your passwords. You cannot reuse your three most recent passwords. To change a password, access the Account Maintenance window by selecting the **Account** option on the Menu Bar on the PROMIS e^{TM} /LIHEAP Main Menu Page.

See <u>Section 7.1, the Account Maintenance</u> window for instructions on performing account maintenance tasks.

2.4 Forgotten Passwords

In the event you forget your password, you can reset it in either of two ways:

- Select the Forgot Password? option from the Logon window menu bar.
- Click the **Forgot Password?** link located to the right of the **Password** field in the Logon window. The initial Password Reset Logon ID window shown below opens.

R	DEPARTMENT C	(Vania		Income Home Energy Assistant	nce Program	
<u>[</u>	OHS LIHEAP	<u>Logon</u>	<u>Help</u>	Forgot Password?		Monday 24 October 2016 2:32 pm
N c; P le	otice: Before yo annot answer the asswords must b ngth.	u can use the "l security questi egin with alpha	Forget Passy ion, please c character, h	word" function, you mus all the Vendor Assistand nave at least 2 numbers,	t answer th ce Center ; , and be be	ne security question. If you at 800-248-2152 for assistance. etween 6 and 8 characters in
			Passw	ord Reset - Logon	ID	
		Enter	your Logon ID	entinue Cancel		

Enter your Logon ID (9-digit PROMIS e^{TM} /LIHEAP vendor number plus 4-digit service location), and click the **Continue** button. The Password Reset – Security Information window shown below opens. Vendors must provide their Federal Employee Identification Number (FEIN), or Social Security Number (SSN), and answer a single security question.

PLEASE NOTE: Alternates should skip to <u>Section 3.4 Resetting a Password for</u> <u>Alternate Users</u> for complete instructions.

	DEPARTMENT OF HUMAN SERVICES
<u>[</u>	Low-income home chergy Assistance Program DHS LIHEAP Logon Help Forgot Password? Monday 24 October 2016 2:32 pm
N F I	Notice: Before you can use the "Forget Password" function, you must answer the security question. If you cannot answer the security question, please call the Vendor Assistance Center at 800-248-2152 for assistance. Passwords must begin with alpha character, have at least 2 numbers, and be between 6 and 8 characters in ength.
n F I	Notice: Before you can use the "Forget Password" function, you must answer the security question. If you cannot answer the security question, please call the Vendor Assistance Center at 800-248-2152 for assistance. Passwords must begin with alpha character, have at least 2 numbers, and be between 6 and 8 characters in ength. Password Reset - Security Information
F I	Notice: Before you can use the "Forget Password" function, you must answer the security question. If you cannot answer the security question, please call the Vendor Assistance Center at 800-248-2152 for assistance. Passwords must begin with alpha character, have at least 2 numbers, and be between 6 and 8 characters in ength. Password Reset - Security Information Please answer the following security questions: Enter the FEIN/SSN for this vendor account:
N F It	Notice: Before you can use the "Forget Password" function, you must answer the security question. If you cannot answer the security question, please call the Vendor Assistance Center at 800-248-2152 for assistance. Passwords must begin with alpha character, have at least 2 numbers, and be between 6 and 8 characters in ength. Password Reset - Security Information Please answer the following security questions: Enter the FEIN/SSN for this vendor account: What is your mother's maiden name?

Enter your FEIN or SSN, and correctly answer the security question. Press the **Continue** button to complete self-authentication. The Password Reset window shown below opens.

NOTE: The FEIN or SSN **must** match the tax identification number associated with your PROMIS e^{TM} Vendor ID number.

NOTE: The security answer field is case sensitive. Please type it exactly as it was when initially established, paying particular attention to your current 'Caps Lock' setting prior to hitting enter.

DHSLIHEAP Logon Help Forgot Password? Thursday 20 October Notice: Before you can use the "Forget Password" function, you must answer the security question cannot answer the security question, please call the Vendor Assistance Center at 800-248-2152 for Passwords must begin with alpha character, have at least 2 numbers, and be between 6 and 8 challength. Password Reset - New Password Password: (Max 8 characters) Confirm Password: (Max 8 characters)			w-Income Home Energy Assis	ylvania OF HUMAN SERVICES	DEPARTME
Notice: Before you can use the "Forget Password" function, you must answer the security question cannot answer the security question, please call the Vendor Assistance Center at 800-248-2152 for Passwords must begin with alpha character, have at least 2 numbers, and be between 6 and 8 charlength. Password Reset - New Password Password: (Max 8 characters) Confirm Password: (Max 8 characters)	2016 10:17 am	Thursday 20 October 2016 10:17	Forgot Password?	<u>Logon Help</u>	<u>DHS LIHEAP</u>
Password Reset - New Password Password: (Max 8 characters) Confirm Password:	n. If you r assistance. iracters in	the security question. If you r at 800-248-2152 for assistant between 6 and 8 characters in	sword" function, you n call the Vendor Assist have at least 2 numb	u can use the "Forget e security question, ple begin with alpha chara	Notice: Before cannot answer Passwords mu length.
Password: (Max 8 characters) Confirm Password:			rd Reset - New Pa	Pass	
Confirm Password:		:haracters)		Password:	
				nfirm Password:	
Reset Password Cancel			et Password Car		

Enter a new password, re-enter the password to confirm it, and then press the **Reset Password** button.

2.5 Denial of Access

Under certain circumstances, you may be denied access to the system. Your account can become disabled or inaccessible for the following reasons:

- You have made six unsuccessful logon attempts.
- Your user account has been inactive for more than 90 days.
- You have forgotten your password and have a Unified Security logon ID, which cannot be reset in the Password Reset window.

The "Contact Person" on record must call the LIHEAP Vendor Assistance Center to reset your account's status. Please have your FEIN information available when calling.

3 Alternate Management

Alternate accounts may be created by vendors to provide employees with their own account and password, permitting them to gain access to the LIHEAP Internet site to view voucher information, submit claims and supporting documentation (attachments), and view submitted claims on behalf of the vendor.

- Only one Alternate ID should be created per employee.
- Switching Alternate IDs to another employee is not permitted.
- Alternate IDs are not be shared.

Vendors with multiple service locations, or a group of multiple vendors, can grant access to alternates. To accomplish this, the vendor must sign on to each primary account (Vendor ID and Service Location) they intend to "Grant Access To" the Alternate ID(s). An alternate account that has been granted access to multiple vendors' accounts may switch to a different vendor ID to inquire on claims or submit new claims on behalf of that vendor.

The vendor can revoke access to an alternate account at any time by signing on to each of the primary accounts (Vendor ID and Service Location) they wish to "Revoke Permissions" from.

3.1 Create a New Alternate

Follow the steps below to assign an alternate to your account.

- 1. Select Account from the menu bar on the LIHEAP Main Menu to open the Account Maintenance window.
- 2. Click the Manage Alternates button to open the Alternate Management window.



3. Click the **Create New Alternate** button to open the Alternate Creation window, shown below.

Alternate Creation

To create an Alternate, complete the fields listed below and click the Create Alternate button.

Please be advised that, for security reasons, the *Password* that you assign on this screen will be changed when the alternate initializes their account. It is therefore recommended that the alternate's actual name be used for the *Contact Name* field. The *Contact Name* field will not be updateable once the alternate is created and will serve as the provider's primary means of tracking the alternate's identity.

Once a alternate is created, they are web users in their own right. A single alternate may be granted access to multiple providers. If a alternate has not been granted access by any providers, they will be denied access to the secure website. The alternate's access may be revoked at any time by the granting provider.

Contact Name:	
Password:	
Create Alternate	Cancel

- 4. Type the full name of the individual to whom you want to assign alternate status in the **Contact Name** field.
- 5. Enter a password in the **Password** field. The password you create must begin with an alpha character, contain at least two numbers, and be six to eight characters in length. (Example: autumn01). This is a temporary password that must be changed by the alternate after initial sign on.
- 6. Click the **Create Alternate** button. The Alternate Creation Complete window below will display.

Alternate Creation	on Complete				
The following Alternate user has been created. They now have access to your account. To access your account they will be required to login into the system using the assigned User Logon ID below					
**Please print this for your r	ecords.				
	User Logon ID: Contact Name:	<mark>ALT123456</mark> John Doe]		
	Co	ntinue			

Make note of the User Logon ID that appears in red that the system assigned to your new alternate. When the system displays this window, it provides confirmation of the creation of an alternate ID. Print this window as a record of the new alternate User Logon ID.

3.2 Grant Access to an Alternate

Alternate accounts may be given access to multiple vendor accounts. To grant access to an alternate:

- 1. Log on to the PROMIS*e*[™]/LIHEAP Vendor Internet application using the 13-digit vendor number.
- 2. Select Account from the menu bar on the LIHEAP Main Menu to open the Account Maintenance window.
- 3. Click the Manage Alternates button to open the Alternate Management window.
- 4. Enter the ALTxxxxx of the alternate account in the **Logon ID** field.
- 5. Click the **Grant Access To** button. The alternate account is granted access to the signedin vendor account. The Logon ID and Contact Name for this alternate is now visible in the alternate list.

Logon ID rrent alternates h	Contact Name ave permissions.	Grant Access To Logon ID: ALT123456
		Create New Alternate
		Revoke Permissions
		Close

	Logon ID	Contact Name	Grant Access To
A	LT123456	John Doe	Logon ID:
			Create New Alternate
			Revoke Permissions

3.2.1 Revoke Alternate Permissions

To revoke permissions from an alternate account:

1. Log on to the PROMIS e^{TM} /LIHEAP Vendor Internet application using the vendor number.

- 2. Select Account from the menu bar on the LIHEAP Main Menu to open the Account Maintenance window.
- 3. Click the Manage Alternates button to open the Alternate Management window.
- 4. Click the appropriate radio button to select the Alternate Logon ID.
- 5. Click the **Revoke Permissions** button. The alternate account will no longer have access to the signed-in vendor account. The Logon ID and Contact Name for this revoked alternate have been deleted and are no longer visible in the alternate list.

3.3 First Time Access for Alternates – Initial Password

Alternates who log on using their "ALTxxxxx" ID for the first time are required to sign the Statement of Entitlement.

PENNSYLVANIA DEPARTMENT OF HUMAN SERVICES
Statement of Entitlement
By entering my full name in the space provided below and transmitting this form electronically, I state, I am the person whom I represent myself to be herein, and I affirm the information within this web application is complete and accurate and made subject to the penalties of 18 Pa.C.S. §4904 relating to unsworn falsification to authorities. In addition, I acknowledge that misstating my identity or assuming the identity of another person may subject me to misdemeanor or felony criminal penalties for identity theft pursuant to 18 Pa.C.S. §4120 or other sections of the Pennsylvania Crimes Code.

After signing the online entitlement form with the full name, the alternate is navigated to the Account Maintenance page where the alternate is prompted to create a new password and update the security questions. At this point please verify the CAPS LOCK setting (on the keyboard) to ensure your password is set as intended, since the password fields are case sensitive (and will not display). Failure to provide the necessary information will result in receipt of one or more alert message(s) which will need to be addressed in order to save the information entered.

The alternate user must follow the steps below to continue.

DEPARTME	Sylvania NT OF HUMAN SERV	VICES Low-Income Home Energy Assistance Program
Account Voi	ichers (RA) <u>Help Lo</u>	og Off Thursday 20 October 2016 10:29 am
	Vendo	r Account Maintenance: ALT980229
New Password:		Confirm Password:
	Password has exp	pired. Please reset your
	nassword	
	password	•
Use a DHS Unifi	password ed Security user logon	n: ALT980229
Use a DHS Unifi User ID:	password ed Security user logon	n: ALT980229 Password:
Use a DHS Unifi User ID: User Name:	password ed Security user logon ALT980229	n: ALT980229 Password: Security Level: Alternate
Use a DHS Unifi User ID: User Name: Status:	password ed Security user logon ALT980229 Active	ALT980229 Password: Security Level: Alternate Last Logged On: 1/1/1964
Use a DHS Unifi User ID: User Name: Status: Contact Name:	password ed Security user logon ALT980229 Active John Doe	n: ALT980229 Password: Security Level: Alternate Last Logged On: 1/1/1964 E-Mail: InvalidEmailAddress@sta
Use a DHS Unifi User ID: User Name: Status: Contact Name: Phone Number:	ed Security user logon ALT980229 Active John Doe 5551212	n: ALT980229 Password: Security Level: Alternate Last Logged On: 1/1/1964 E-Mail: InvalidEmailAddress@sta
Use a DHS Unifi User ID: User Name: Status: Contact Name: Phone Number: Security Questi	password ed Security user logon ALT980229 Active John Doe 5551212 on: What is your r	n: ALT980229 Password: Security Level: Alternate Last Logged On: 1/1/1964 E-Mail: InvalidEmailAddress@sta
Use a DHS Unifi User ID: User Name: Status: Contact Name: Phone Number: Security Questio Security Questio	ALT980229 Active John Doe 5551212 Mhat is your i What is your i	n: ALT980229 Password: Security Level: Alternate Last Logged On: 1/1/1964 E-Mail: InvalidEmailAddress@sta mother's maiden name? Answer: mother's maiden name? Answer:

3.3.1 Entering User Information

- 1. Enter a new password in the New Password field. The password you create must begin with an alpha character, contain at least two numbers, and be six to eight characters in length (Example: autumn01).
- 2. Re-enter the new password in the **Confirm Password** field.

PLEASE NOTE: The action of tabbing to the Confirm Password Field will initiate the field edit that compares the contents of both password fields and will return an error message because the Confirm Password field is blank. This is normal and this error message will no longer display after changes are saved.

- 3. Provide a phone number in the **Phone Number** field. Begin by entering the area code, followed by the seven-digit number. Do not use hyphens to separate the telephone number segments.
- 4. Enter a valid e-mail address in the **E-mail** field.

3.3.2 Selecting Secret Questions and Creating Answers

Alternate users are required to select secret questions from a list provided in the window, and type in answers when setting a password for the first time. This information is used by the system to verify the identity of the alternate at a future time when resetting a password. The system is designed to request the secret answers in the Reset Password – Security Information window, when this window is accessed for resetting a password.

To select secret questions and create answers for later use in verifying an alternate's identity, follow the steps below.

PLEASE NOTE: The "Answer" fields are case sensitive.

- 1. Select a question only you can answer from the dropdown list within the <u>first</u> Security Question field. Enter the answer to this question in the adjacent answer field.
- 2. Select a different question only you can answer from the dropdown list within the <u>second</u> **Security Question** field. Enter the answer to this question in the second adjacent answer field.
- 3. Click the **Save** button.
- 4. The message below displays to confirm that the information entered in the Account Maintenance window has been successfully updated:

DEPARTM	ISYLVANIA ENT OF HUMAN SERVICES	LUBBLARP Low-Income Home Energy Assistance Program	
Account Vo	uchers (RA) <u>Help Log Off</u>	Thursday 20 October 2016 10:37 am	
	Manda, A		
	Vendor Acc	count Maintenance: AL 1980	229
New Password:		Confirm Passwore	d:
	Your account in	formation	
		-	
	has been update	ed.	
	has been update	ed.	
Use a DHS Unifi	has been update	alT980229	
Use a DHS Unifi User ID:	has been update	ALT980229 Password:	
Use a DHS Unifi User ID: Jser Name:	has been update	ed. ALT980229 Password: Security Level:	Alternate V
Use a DHS Unifi User ID: User Name: Status:	has been update ed Security user logon: ALT980229 Active	ed. ALT980229 Password: Security Level: Last Logged On:	Alternate ~
Use a DHS Unifi User ID: User Name: Status: Contact Name:	has been update ed Security user logon: A ALT980229 Active V John Doe	ALT980229 Password: Security Level: Last Logged On: E-Mail:	Alternate V 1/1/1964 InvalidEmailAddress@sta
Jse a DHS Unifi User ID: Jser Name: Status: Contact Name: ² hone umber:	has been update ed Security user logon: A ALT980229 Active V John Doe 7175551212	ed. ALT980229 Password: Security Level: Last Logged On: E-Mail:	Alternate V 1/1/1964 InvalidEmailAddress@sta
Use a DHS Unifi User ID: User Name: Status: Contact Name: Phone Number: Security Questi	has been update ed Security user logon: A ALT980229 Active V John Doe 7175551212 PR: What is your mother	ALT980229 Password: Security Level: Last Logged On: E-Mail:	Alternate 1/1/1964 InvalidEmailAddress@st
Jse a DHS Unifi User ID: Jser Name: Status: Contact Name: Phone Number: Security Questi Security Questi	has been update ed Security user logon: A ALT980229 Active V John Doe 7175551212 on: What is your mother on: What street did you	ed. ALT980229 Password: Security Level: Last Logged On: E-Mail:	Alternate V 1/1/1964 InvalidEmailAddress@st
Use a DHS Unifi User ID: Jser Name: Status: Contact Name: Phone Number: Security Questi Security Questi	has been update ed Security user logon: A ALT980229 Active V John Doe 7175551212 on: What is your mother on: What street did you	ed. ALT980229 Password: Security Level: Last Logged On: E-Mail: r's maiden name? V Answer: Jones grow up on? V Answer: Elm	Alternate V 1/1/1964 InvalidEmailAddress@st

The alternate user is then returned to the LIHEAP Main Menu Page and may continue to access the features of the PROMIS e^{TM} /LIHEAP Vendor Internet as an alternate user.

3.4 Resetting a Password for Alternate Users

If an alternate user forgets the account password or needs to change the password, the Reset Password – Logon ID window must be accessed. This window is accessed by clicking the **Forgot Password?** link on the Logon window to assist an alternate in recovering their password.

In the Password Reset Logon ID window, enter your Logon ID ("ALTxxxxx"). Click the **Continue** button.

R	DEPARTMENT OF HUMAN SERVICES	Home Energy Assistance Program	•
<u>[</u>	DHS LIHEAP Logon Help F	Forgot Password?	Thursday 20 October 2016 10:39 am
	Notice: Before you can use the "Forget Password cannot answer the security question, please call th Passwords must begin with alpha character, have length.	" function, you must answer he Vendor Assistance Center at least 2 numbers, and be b	the security question. If you at 800-248-2152 for assistance. between 6 and 8 characters in
	Password Rese	t - Security Informatio	n
	Please answer the following security questions:		
	What is your mother's maiden name?		
	What street did you grow up on?		
	Contin	nue Cancel	

The Password Reset – Security Information window shown above opens.

Correctly answer the security questions. Click the **Continue** button to complete self-authentication.

The Password Reset window opens. In the Password Reset window, enter a new password, reenter the password to confirm it, and then press the **Reset Password** button.

82	DEPARTMENT	/lvania DF HUMAN SEF	RVICES	Low-Income Home Energy Assistance Program	
	<u>DHS LIHEAP</u>	<u>Logon</u>	<u>Heip</u>	Forgot Password?	Thursday 20 October 2016 10:51 am
	Notice: Before you annot answer the s Passwords must be ength.	can use the "F security questio gin with alpha	orget Pas on, please character	ssword" function, you must answer th e call the Vendor Assistance Center a , have at least 2 numbers, and be be	e security question. If you at 800-248-2152 for assistance. tween 6 and 8 characters in
			Passwo	rd Reset - New Password	
	Conf	Password: irm Password:	5	(Max 8 cha	iracters)

You will then be returned to the Login screen, where you will be prompted to log in using the reset password.

DEPARTMENT OF HUMAN SERVICES Low-Income Home Energy Assistance Pro DHIS LIHEAP Logon Help Forgot Password? Need Help? Use the Internet Help Manuals Here Vendor Crisis Attachment Upload Process Here The LIHEAP program is no longer acceptin	g claims for the 2015 - 2016 heating season.
	Message from webpage
Important Reminders: 1. Submitting documentation for a Crisis authorization may be done • Attached by uploading the document onto PROMISe when su way to get paid for a crisis authorization • Sent with the LIHEAP Cover Sheet specific to the crisis author the documentation) by: • Fax to 717-207-7997 or 717-207-7994 Note: When faxing, the LIHEAP Cover Sheet must be th metered trip ticket or other documentation. Multiple LII the same fax transaction (up to 30 pages)	Password has been reset successfully. Please login.
 • US Mail to DHS-LIHEAP Crisis Claims, PO Box 69028, H 2. Your password must begin with an alpha character, be between s and contain at least two numeric characters. If you have trouble res 2152. 	farrisburg, PA 17106 six and eight characters in length, etting your password, call 1-800-248-

3.5 Switch to a Different Vendor for Alternate Accounts

Alternate accounts that have been granted permission to access multiple accounts possess the ability to switch to a different Vendor login.

To switch to a different vendor:

1. Click the Switch to a Different Vendor link on the LIHEAP Main Menu



2. The Internet Vendor Switch page will appear.

DEPARTMENT OF HUMAN SERVICES	Low-Income Home Energy Assistance Program
Main Account Help Log Off	Wednesday 28 October 2015 3:19 pm
VENDOR NUMBER MANAGEMENT	
CURRENT VENDOR NUMBER 3	006543210001.
The following Vendors have authorized t Select a Vendor Number from the followi	he current Login ID for Access. ng list to act on behalf of that account:
Vendor Number 3001234560001 3001231230001	

3. Click a Vendor number from the available list. The user session will change to function under the context of that Vendor ID.

4 Submitting Claims Electronically

The PROMIS e^{TM} /LIHEAP Vendor Internet application has been designed to make claim submission as efficient as possible using the currently available electronic technology.

Online submission of a LIHEAP claim requires completion of the following steps:

- 1. Obtain the Active Crisis Authorization Number (AAN) by performing a search using the Internet application.
- 2. Request an Attachment Control Number (ACN) using the Internet application.
- 3. Submit an Internet LIHEAP Claim, including the AAN and the ACN on the claim form where indicated.

You can use one of two methods to submit a LIHEAP claim. The **Express Process** will guide you through the steps of obtaining the crisis authorization number and requesting an ACN, and will pre-populate the claim form with the selected information. The **Manual Process** allows you to skip directly to a step; however, all required information must be manually entered. For this reason, the Express Process is recommended.

Option 1. EXPRESS Process:	Option 2. Manual Process:
Guides Me through the Process and Pre-populates Claim Data	 Active Crisis Authorizations Attachment Control Numbers Claim Submission

4.1 Active Crisis Authorizations

The first step is to search for and select an Active Crisis Authorization. Vendors can also review their Active Crisis Authorizations by clicking the **Active Crisis Authorizations** link on the LIHEAP Main Menu window.

Submit all Claims & Attachments within 3	0 days of Authorization!
Account: 3002908940110	
Step 1: Search for existing Active Crisis Authorization Numbers.	
First Name: Status:	Active V
Date Type	Sort Type Sort Order
Issue Date	Authorization Newest
From Date: Thru Date:	Oldest
Search Reset	

1. Enter search criteria for an active crisis authorization number

Features:

- When searching using a Date Range, please enter numeric values only.
- The format for both date fields is MM/DD/CCYY
- Search criteria is retained after selecting the search button.
- Reset button has been added to return fields within the Search criteria section of the Active Crisis Authorization page back to their default values.

The following search field combinations can be used to pull up a crisis authorization number:

- Crisis Authorization Number
- Last Name, First Name, and Date Range (maximum 365 days)
- Date Range (maximum 31 days), Status (select one: Active, In Progress, Completed, All). If a value is not selected, the default "Active" will be submitted with the search.

ast Name:		Crisis Authorization #:		
First Name:		Status:	Active 🗸	
Date Type			Sort Type	Sort Order
Issue Date			Authorization	Newest
From Date:	Thru Date:		⊖ Status	

2. Click the **Search** button. Search results are displayed in the lower portion of the window.

Crisis Authorization #	<u>Auth.</u> Status	<u>Crisis</u> <u>Auth</u> <u>Amount</u>	Acct #	<u>Last</u> <u>Name</u>	<u>First</u> <u>Name</u>	Street	<u>City</u>	Date Issued
<u>800000589</u>	Active	500.00	and the second s		GARCIA	321 NEW STREET	MILFORD	

3. In the search results, click the **Crisis Authorization** # link to continue to the next step to request an Attachment Control Number.

4. If there are multiple pages of search results, the links below the Authorization results will be highlighted indicating there are additional pages of selections. Clicking on the either the page number or "Next" and "Last" links will display additional pages. An indicator at the bottom of the window displays what page of search results you are currently on.

NOTE: Column headers that are underlined have sort capabilities. Click on the header to sort the column. Click on the header once to list the column in Ascending sort order, or twice for Descending sort order.

<u>Crisis</u> Authorization # ↑	<u>Auth.</u> <u>Status</u>	<u>Crisis</u> <u>Auth</u> <u>Amount</u>	<u>Acct#</u>	<u>Last</u> <u>Name</u>	<u>First</u> <u>Name</u>	<u>Street</u>	<u>City</u>	<u>Date</u> Issued
8000001585	Active	500.00	101111		ROBIN	321 NEW STREET	MILFORD	
8000001584	Active	500.00	10000		TYREEK	321 NEW STREET	MILFORD	
8000001583	Active	500.00	101111		KAILA	321 NEW STREET	MILFORD	
8000001582	Active	500.00	apress.		ALI	321 NEW STREET	MILFORD	
<u>8000001581</u>	Active	500.00	101111		NASIR	321 NEW STREET	MILFORD	
8000001580	Active	500.00	-		GARTH	321 NEW STREET	MILFORD	
<u>8000001579</u>	Active	500.00			PAULINA	4 FAWN LAKE FOREST	HAWLEY	
8000001577	Active	500.00	101111		TRACI	16 BROOM ST	PHILADELPHIA	
<u>8000001576</u>	Active	500.00	-		OLD	222 RED LANE	PHILA	
8000001575	Active	500.00	and the second s		ALBERT	321 NEW STREET	MILFORD	
8000001574	Active	500.00	and the second s		CECIL	321 NEW STREET	MILFORD	
8000001572	Active	500.00	101111		JOSHUA	650 MUSIC HOUSE ROAD	MUSICTOWN	
<u>8000001571</u>	Active	500.00	10111		NASIR	321 NEW STREET	MILFORD	
8000001570	Active	500.00	101111		LORRIE	12895 CASTOR AVE.	PHILA	
8000001569	Active	500.00			LAVINIA	321 NEW STREET	MILFORD	
8000001568	Active	500.00	101111		FATIMA	321 NEW STREET	MILFORD	
8000001567	Active	500.00	101111		TIESHA	321 NEW STREET	MILFORD	
8000001566	Active	500.00	101111		EBONY	321 NEW STREET	MILFORD	
8000001565	Active	500.00	-		DAVID	321 NEW STREET	MILFORD	
8000001564	Active	500.00	10111		SAVUN	321 NEW STREET	MILFORD	
8000001563	Active	500.00	101111		TAKIA	321 NEW STREET	MILFORD	
8000001562	Active	500.00	101111		NATHANIEL	321 NEW STREET	MILFORD	
8000001561	Active	500.00	-		MABEL	321 NEW STREET	MILFORD	
8000001558	Active	500.00	- Martine		TAKIA	321 NEW STREET	MILFORD	
8000001557	Active	500.00	10111		SABRINA	321 NEW STREET	MILFORD	
8000001556	Active	500.00	and the second s		TIMIRRA	321 NEW STREET	MILFORD	
8000001536	Active	500.00	and the second s		DOROTHY	321 NEW STREET	MILFORD	
8000001535	Active	500.00	- Married		CHARLES	321 NEW STREET	MILFORD	
8000001534	Active	500.00	and the second s		VICTOR	321 NEW STREET	MILFORD	
8000001533	Active	500.00	-		ANDREA	321 NEW STREET	MILFORD	
8000001532	Active	500.00	apress.		JUSTIN	321 NEW STREET	MILFORD	
8000001531	Active	500.00	100000		ALBERT	321 NEW STREET	MILFORD	
			0	23		1 of 3	Next	Last

4.2 Attachment Control Numbers

Vendors must submit the appropriate supporting documentation for their fuel type using <u>one</u> of the three methods available (Mail, Fax, or Electronic Transmission). Deliverable fuels, (Blended Fuels, Kerosene, Oil, Propane), require a trip ticket. Utilities, (Electric, Gas), require a shut off notice. All others (Bottled Propane, Coal, Pellets, Wood) require an invoice.

All claims with attachments must be received within 30 days of the crisis authorization date.

The handling of the supplemental documentation (LIHEAP Cover Sheet) is done using the Attachment Control Process.

The Attachment Control Form (LIHEAP Cover Sheet) must accompany the supporting documentation for each claim that will be submitted. An attachment control number (ACN) is generated after the request is submitted. When using the Manual process, the vendor must enter the supplied ACN in the appropriate field on the Internet claim page.

PLEASE NOTE: The Attachment Control Form (LIHEAP Cover Sheet) will be automatically system generated when utilizing the Internet "Submit Attachment(s)" functionality to electronically transmit supporting documentation.

4.2.1 Request a New Attachment Control Number

To request a new Attachment Control Number using the Manual Process, enter the **Crisis Authorization Number** and click the Request button. If you accessed this page using the Express Process, the recipient's Last Name, First Name and the Crisis Authorization Number fields will be pre-populated using information from the selected Crisis Authorization Number.



NOTE: If an attachment control number already exists for the crisis authorization number, an error message will appear. Should this occur, click **Search** to display the existing attachment control numbers associated with the crisis authorization number.

The newly created Attachment Control Number is displayed in the lower portion of the window.

	Step 2 Options:									
	Mail/Fax (If mailin	g/faxing attachments f	ollow the steps belo	w)						
	 Select "Print Form" (under "Attachment Control Number") to view and print the desired ACN Form Retain the printed ACN Form for later use Select "Continue" (under "Online Claim") to submit a new claim After submitting the claim, mail the printed attachments (and the ACN form) to the address indicated on the cover sheet OR fax the printed attachments (and the ACN form) to the fax number provided on the DHS LIHEAP website 									
	Submit/Re-Submit Attachment(s) (If electronically submitting attachments follow the steps below)									
	 Select "Submit Attachment(s)" to upload attachments OR Select "Re-Submit Attachment(s)" to resend attachments (ACN Form will be systematically generated and transmitted) Select "Continue" (under "Online Claim") to submit a new claim 									
	IMPORTANT: Do NOT print this page to send in with your attachments!									
Attachment Control Number	Status	Crisis Authorization # ID	Last Name	First Name	Date Issued	Date Received	Online Claim			
800003385 Print Form OR Submit Attachment(s)	ISSUED	8000001352		JORDAN	20161021	0	Continue			
To view and print the ACN form, you will need to install the Acrobat Reader software:										

4.2.2 Search for an Existing Attachment Control Number

To search for an existing attachment control number, enter the **Attachment Control Number**, the **Crisis Authorization Number**, or the recipient's **Last Name** and **First Name** and click the **Search** button.

Account: 3006543210001							
Step 1:							
 Request an requested: 	Attachment Control Number (AC	CN), or search for an existing ACN that has already been					
 Request and Searc Last Name 	h Criteria	Attachment Control Number					
First Name Crisis Authorization #	8000001352						
	Request	Search					

Search results are displayed in the lower portion of the window.

4.2.3 Print an Attachment Control Number Form

To print the Attachment Control Number form to submit with your supporting claim documentation via Mail or Fax, click the **Print Form** button.

Attachm Nu	ent Control mber	Status	Crisis Authorization # ID	Last Name	First Name	Date Issued	Date Received	Online Claim
Prin Submit A	ttachment(s)	ISSUED	8000001352		JORDAN	20151026	O	Continue

The form will open using Adobe Reader.

🔁 ACNAttachment.pdf - Adobe Reader										
File Edit View Window Help *										
🗁 Open 🛃 🔁 🐼 🍙 💾 🖨 1 / 1 75.7% 🔹 🛃 후 Tools	Fill & Sign Comment									
	A									
PROMISe™										
LIHEAP Paper Attachment to Electronic Claim										
Cover Sheet										
Crisis Authorization Number 8 0 0 0 1 3 5 2										
2 Vendor Number 0 0 0 6 6 4 4 6 8										
3 Service Location 0 0 0 4										
4 Recipient Last Name										
5 Recipient First Name J O R D A N										
6 Attachment Control Number 8 0 0 0 0 3 3 8 5										
IMPORTANT: DO NOT WRITE IN THE TOP MARGIN OF THIS COVER S	HEET									
This cover sheet identifies a specific crisis authorization and must be included when submitting the attachment (metered trip ticket or shut off/reconnection notice) by fax or US mail.										
Do not send the same claim by multiple methods (such as fax AND mail). If documentation was uploaded to PROMISe, do not resubmit it by fax or mail. Resubmissions cause processing delays. Call the toll-free LIHEAP Vendor Helpline at 1-877-537.9517 if you have questions about a crisis claim.										
 Organize your information: Write the Attachment Control Number (ACN) or Crisis Authorization Number on the attachment Place the pre-populated cover sheet on top of every corresponding attachment. When faxing – limit faxes to no more than 30 sheets of paper per transmission. 										
2. Submit documentation by one of these methods:										
- Fax: (717) 207-7997 or (717) 207-7994										
- Mail: Department of Human Services, LIHEAP Crisis Claims, PO Box 69028, Harrisburg, PA 17106										
NOTE: Never use staples or paper clips when submitting documentation by mail.										
Revis	ed 9/29/15									
•										
	*									

Print the form and mail it and the supporting documentation to:

Department of Human Services Office of Income Maintenance P.O. Box 69028 Harrisburg, PA 17106

NOTE: You can also fax attachments to 717-207-7997 or 717-207-7994 or submit attachments electronically using the <u>Crisis Attachment Upload</u> page.

Close the Adobe Reader. The Crisis Attachment Number Request page will be visible.

Click the **Continue** button to open a new LIHEAP claim with pre-populated data using the selected Attachment Control Number using the Express Process.

A	ttachment Control Number	Status	Crisis Authorization # ID	Last Name	First Name	Date Issued	Date Received	Online Claim
Su	800003425 Print Form OR Ibmit Attachment(s)	ISSUED	8000001401		ANTHONY	20151028	O	Continue

4.2.4 Crisis Attachment Upload

To submit supporting documentation, click the **Submit Attachment(s)** button to open the Crisis Attachment Upload page.

Attachment Control Number	Status	Crisis Authorization # ID	Last Name	First Name	Date Issued	Date Received	Online Claim
800003425 Print Form OK Submit Attachment(s)	ISSUED	8000001401		ANTHONY	20151026	D	Continue
The Crisis Attachment Upload page will open.

DEPARTMENT OF HUMAN	ISERVICES Low-income Home Energy	Assistance Program
Crisis Attachment Upload		
	Account: 3002	908940110
Upload Instruction	s:	
 Click the Brov Attach addition PDF files). Confirm that if Click the Sub 	wse button. Search and select a PD onal PDF files for this Crisis Authoriz the PDF files you added relate to thi mit Attachment(s) button to complet	F file for this Crisis Authorization # and click Add. ation # by repeating Step 1 (up to a maximum of 3 s specific customer and Authorization #. le the upload process.
Upload Criteria		
Last Name First Name	ALLEN	Attachment Control Number 800003825
Crisis Authorization #	8000001613	
File to Upload:		Browse ADD
		Submit Attachment(s)
	No files	Uploaded
	Active Crisis Authorization	on Continue to Claim

4.3 Crisis Attachment Upload

LIHEAP vendors are required to submit crisis delivery claims via the PROMIS e^{TM} Internet. Once submitted, the vendor is required to provide supporting documents via one of three options:

- Fax (Vendor required to submit LIHEAP cover sheet)
- Mail (Vendor required to submit LIHEAP cover sheet)
- Electronic Submission (LIHEAP system generates LIHEAP cover letter for Vendor)

A feature allows vendors to electronically submit the supporting documents (trip tickets, shutoff notices, etc.) along with a system generated LIHEAP cover sheet.

There are three access points to submit attachments:

- 1. Claim Inquiry page
- 2. Vendor Claim Attachment Control Number Request page
- 3. Claim Submission page

PLEASE NOTE: Prior to submitting attachments, the following Directory Setup and File Naming conventions are recommended:

Create a folder to hold all of the scanned PDF files for the new LIHEAP season:

Example: 2015-2016 LIHEAP ATTACHMENTS

Adopt a file naming standard that includes the Crisis Authorization Number, the Recipient's First and Last name, and one key element your company uses to identify this customer (e.g. Customer Account Number).

Example: **0012345678 JANE DOE 100267345**

Important Notes for submitting Attachments:

- The LIHEAP Cover Sheet will be automatically generated and transmitted with the electronically submitted files.
- Supporting documentation must be in a PDF format.
- Only 3 supporting documents may be electronically submitted per claim.
- Each electronically submitted document must have a different PDF file name.
 - Examples:
 - 0012345678 JANE DOE 100267345 **1**.pdf
 - 0012345678 JANE DOE 100267345 **2**.pdf
 - 0012345678 JANE DOE 100267345 **3**.pdf
 - Any duplication in the file names per ELECTRONIC ATTACHMENT SUBMISSION will not be accepted.
- Electronic Attachment submissions can occur **ONLY** for Suspended Claims or Active Authorizations.
- Electronic Attachment submissions will not be accepted on Paid or Denied claims.
- Upon claim submission, the message ESC 6104 REQ'D ATTACHMENT NOT REC'D/FINALIZED is applied to the claim, indicating the attachment has not yet finished processing.
 - 1. Click the **Browse** button to open your directory. Locate the file(s) to be submitted and click the **Add** button. You can add up to three PDF attachments.
 - 2. Once added, attachments appear at the bottom of the page. Click the **Remove** button to delete a file before it is submitted.

DEPARTMENT OF HU Main Account Vouchers (RAM Crisis Attachment Uploa	ania IMAN SERVICES I <u>Help Log Off</u> d	Low-Income Home Energy A	ssistance Program er 2016 11:16 am	
	А	ccount: 3002908	940110	
Upload Instructions				
1. Click the Brow 2. Attach additio PDF files). 3. Confirm that ti 4. Click the Subr Upload Criteria Last Name	vse button. Sear nal PDF files for he PDF files you mit Attachment(s	ch and select a PDF file fr this Crisis Authorization # added relate to this spec button to complete the u	or this Crisis Autho by repeating Step ific customer and A upload process. At	rization # and click Add. p 1 (up to a maximum of 3 Authorization #. tachment Control Number
First Name	ALLEN			800003825
Crisis Authorization #	8000001613	Br		
			Submit Attach	ment(s)
Bate A	dded	File Name	File Size	
10/20/2016	11:10:30 Supp	porting Documentation 1.pdf	78 KB	Remove
10/20/2016	11:10:52 Supp	corting Documentation 2.pdf	78 KB	Remove
	Active	Crisis Authorization	Continue to Clair	n

3. Click the **Submit Attachment**(s) button to initiate the file transmission.

PLEASE NOTE: If you submit files after you've previously submitted files for an ACN, click the **Re-Submit Attachment(s)** button to submit new files.

4. Upon successful transmittal, the following displays:



The Submit Attachment(s) button will then display Resubmit Attachment(s). This option is available if needed. There is no requirement to resubmit attachments once they have been successfully submitted.

5. If the claim has not been submitted, click on the **Continue to Claim** button to navigate to the Claims Submission page.

4.4 Claims Submission

Claims should be completed in accordance with DHS's guidelines, policies, and procedures. Refer to the DHS web site for more specific information on completing a claim submission.

penn DEPARTME	Sylvania	Low-Income Home End	ergy Assistance Pr	ogram		
<u>Main Account Vo</u>	<u>uchers (RA) Help Log Off</u>	Thursday 20 (October 2016 11:	:21 am	Pre-popula the Expres	ated using s Process
LIHEAP Claim	Need help sul	omitting a claim? Vi	ew sample cl	aim submissi	ons <u>here</u> .	
Vendor:	3002908940110		Attachment Con	trol #: 80	00003825	
Claim Frequency:	1 - Original 🗸	_	Crisis Authorizat	ion #: 80	000001613	
Customer Assount #			Total Crisis Bills			
Last Neme:	L1516-800004590					
Last Name.		Pre-po	pulated	using		
First Name:	ALLEN	the Ex	press Pro	ocess		
Middle Initial:						
Familia Linea						
Delivery	Carries.	Denia of		D-i	Dillo d	7
Date	Code	Measurement	Units	per Unit	Amount	
1			1			Add Remove
Service Code:						~
Basis of Measurement	~					
Units: (decimal only)	1					
Price per Unit:						
Crisis Amount Billed:						
Submit 4	Active Crisis Authorizat	on Submit At	tachment(s)	I		

4.4.1 Billing Information

In the **Billing Information**, or header, portion of the LIHEAP Claim form, enter data in the following fields:

- Customer Account # (optional)
- Delivery Date in MMDDYYYY format
- Total Crisis Billed to LIHEAP. This field must be the total of all of the service lines on the claim.

Features:

- Slashes are automatically inserted into the Delivery Date field.
- Please enter numeric values only.
- The slashes are now provided by the LIHEAP system.

The following fields are required but are pre-populated when using the Express Process. If you are using the **Claims Submission** link from the LIHEAP Main Menu, you will need to manually enter these fields:

- Last Name
- First Name
- Attachment Control Number
- Crisis Authorization Number.

NOTE: The Recipient's first and last name must be spelled correctly and exactly match the name on the Crisis Authorization.

4.4.2 Service Lines

In the **Service Lines**, or detail, portion of the LIHEAP claim form, enter data or select a value in each of the following fields:

- Service Code
- Basis of Measurement
- Units
- Price per Unit
- Crisis Billed Amount.

The service line table will update automatically as you enter data in the above fields.

Multiple Service Lines

- To **add an additional service line**, click the **Add** button located to the right of the service line table. A blank service line will be added to the table for you to enter the service line information. A single claim may contain up to four service lines.
- To **edit a service line**, click to highlight the service line to be modified. The service fields will update to display the selected service line data. Changes to the selected service line will automatically update in the service line table.

• To **remove a service line**, click to highlight the service line to be removed then click the **Delete** button located to the right of the service line. The selected service line will be deleted from the claim.

4.5 Submit the Claim

Once all fields have been completed, click the **Submit** button to submit the claim for processing.

Submit Active Crisis Authorization	Submit Attachment(s)
Claim Status Information Claim Status Not Submitted yet.	



4.6 Claim Status Information and Disposition

The claim will initially suspend for up to 14 days until the attachment control form and supporting documentation is received.

Claim Stat	us Information	
Claim Status	Suspended	
Claim ICN		
Paid Amount		
Paid Date		
Allowed Amou	nt	
Hdr/Dtl ESC	Description	Disposition
Header 6104	REQ'D ATTACHMENT NOT RECEIVED / FINALIZED	Sus pended

Once the supporting documentation (trip ticket or shutoff notice, and the accompanying attachment control form) is received the claim will process.

Claim Status	Paid	
Claim ICN	100000-0000	
Paid Amount	200.00	
Paid Date		
Allowed Amou	nt 200.00	

If additional errors are present on the claim, the claim may deny. Descriptive Error Status Codes (ESCs) will be displayed containing information about why the claim was denied. See <u>Section 8</u>, <u>Claims Disposition</u>, for a listing of ESCs that may be received when submitting LIHEAP claims.

Claim Status	s Information	
Claim ICN	Denieu	
Paid Amount	0.00	
Paid Date		
Allowed Amount	t	
Hdr/Dtl ESC	Description	Disposition
Header 605	ACN NOT ON FILE	Denied
Header 6104	REQ'D ATTACHMENT NOT RECEIVED / FINALIZED	Denied

You may resubmit denied claims. All claims and attachments must be received within 30 days of the active crisis authorization date.

Use the **Claims Inquiry** feature of the PROMIS e^{TM} /LIHEAP Vendor Internet application to check the status of submitted claims. This feature is described in <u>Section 5</u> of this manual.

4.7 Crisis Attachment Upload

If you have not already done so, you can submit supporting documentation by clicking the **Submit Attachment(s)** button to open the Crisis Attachment Upload page.

Submit	Active Crisis Authorization Submit Attachment(s)
Claim Status	Information
Claim Status	Not Submitted yet.

The Crisis Attachment Upload page will open.

Main Account Youchers (RA) Help Log Off Thursday 20 October 2016 11:04 am
Account: 3002908940110
Upload Instructions:
 Click the Browse button. Search and select a PDF file for this Crisis Authorization # and click Add. Attach additional PDF files for this Crisis Authorization # by repeating Step 1 (up to a maximum of 3 PDF files). Confirm that the PDF files you added relate to this specific customer and Authorization #. Click the Submit Attachment(s) button to complete the upload process.
Upload Criteria
Last Name Attachment Control Number First Name ALLEN 800003825
Crisis Authorization # 8000001613 File to Upload: Browse ADD
Submit Attachment(s)
No files Uploaded
Active Crisis Authorization Continue to Claim

5 Claims Inquiry

Through the PROMIS e^{TM} /LIHEAP Vendor Internet application, you can check the status of a claim. The search can be narrowed by specifying the ICN (Claim ID), crisis authorization number, delivery date range, recipient name, or claim status.

To access the LIHEAP Claims Inquiry window:

1. Click the **Claims Inquiry** link from the LIHEAP Main Menu.



5.1 About Internal Control Numbers (ICNs)

Each claim is assigned a 13-digit Internal Control Number (ICN). This ICN identifies each claim as it is processed, tracked, and reported.

The 13-digit ICN is assigned to the invoice by DHS, and includes:

- Digits 1 and 2 represent the Region Code.
- Digits 3 through 7 represent the Year and Julian Date that the claim was submitted.
- Digits 8 and 13 represent the Claim Sequence within the batch.



5.2 Using the Vendor Claims Inquiry Window

The Vendor Claims Inquiry window is used to search claims and check the status of one or more claims. A search can be narrowed by specifying the ICN (Claim ID), crisis authorization number,

delivery date range, recipient name, or claim status criteria. You can perform a search only for claims submitted by your vendor number and service location(s).

Last Name:		Crisis Authorization #:		
First Name:				
ICN (Claim ID):		Claim Status:	Any Status	✓
Date Type			Sort Type	- Sort Order
O Delivery Date	Thru Data-		Delivery Date	Descending

- 1. Enter search criteria.
 - The format for both date fields is MM/DD/CCYY.
 - Slashes are automatically inserted into the Date Range fields
 - When searching using a Date Range, please enter numeric values only.
 - A column for **Document Upload** has been added. The field is blank for PAID and DENIED claims. The values of Submit Attachment(s) and Re-Submit Attachment(s) will display for claims in a SUSPENDED status. The appropriate value displays on the button based on whether attachments have been processed at the time the query was submitted.

The following search field combinations can be used to pull up claims:

- Crisis Authorization Number
- ICN/Claim ID
- Last Name, First Name, and Date Range (maximum 365 days)
- Date Range (maximum 31 days)
- 2. Click the **Search** button. Search results are displayed in the lower portion of the window.

NOTE: The search criteria section is automatically reset back to the default settings upon selecting the Search button and receiving the search results.

NOTE: Column headers that are underlined have sort capabilities. Click on the header to sort the column. Click on the header once to list the column in Ascending sort order, or twice for Descending sort order.

DEPARTMEN	Sylva NT OF HUM	IAN SERVI	CES Low	-Income Ho Thurse quiry: 3	me Energy day 20 Octo 002908	Assistance Pro ober 2016 1:4 940110	Jogram 47 pm
Last Name: First Name: ICN (Claim ID): Date Type Delivery From Date:	Date	016	Thru Date:	10/3	Crisis Authorizati Claim Statu 1/2016	on #:	Status ort Type Delivery Date ICN (Claim ID) Sort Order October
ICN (Claim ID)	Delivery Date	Last Name	<u>First</u> Name	Sear <u>Billed</u> Amount	ch Amount Paid	Status	Document Upload
2815166000001	20161020		SALLYE	500.00	500.00	Paid	
2815162000001	20161020		DONTE	500.00	0.00	Suspended	Re-Submit Attachment(s)
2815180000001	20161018		DIONNA	500.00	0.00	Denied	
			MARCHE	500.00	0.00	Suspended	Submit Attachment(s)
2815159000001	20161021	100000000000000000000000000000000000000	MARCUS	300.00	0.00	Suspended	Submit Attachment(s)

5.2.1 Crisis Attachment Upload

To re-submit supporting documentation, click the **Re-Submit Attachment(s)** button to open the Crisis Attachment Upload page.

DEPARTMEN	Sylva NT OF HUM	IAN SERVI	CES Low	-Income Ho Thurse quiry: 3	me Energy day 20 Oct 002908	Assistance Pro ober 2016 1:4 940110	ogram 47 pm	
Last Name: First Name:				5	Crisis Authorizati	on #:		-
(Claim ID):				(Claim Statu	is: Any	/ Status 🗸 🗸	•
Date Type						S	ort Type	- Sort Order
O Delivery From Date:	Date 10/15/20	D16	Thru Date:	10/3	1/2016		Delivery Date	Descending Ascending
				Sear	ch			9
ICN (Claim ID)	Delivery Date	Last Name	First Name	Billed Amount	Amount Paid	<u>Status</u>	Document Uploa	d
<u>2815166000001</u>	20161020		SALLYE	500.00	500.00	Paid		
<u>2815162000001</u>	20161020		DONTE	500.00	0.00	Suspended	Re-Submit A	ttachment(s)
<u>281518000001</u>	20161018		DIONNA	500.00	0.00	Denied		
2815159000001	20161021		MARCUS	500.00	0.00	Suspended	Submit Atta	achment(s)

6 Vouchers (RA) Search

Through the PROMIS e^{TM} /LIHEAP Vendor Internet application, you can perform searches of vouchers. The search can be narrowed by specifying the Voucher Numbers, or the user can search by the Treasury Pay Date.

6.1 To Access the Vouchers (RA) Search Window:

1. Click the Vouchers (RA) link from the LIHEAP Main Menu.



6.2 Search Methods

There are two ways to perform a search of the Vouchers. You can search either by the Voucher Number or by using the Treasury Pay Date.

Select the appropriate Radio Button for the search you'd like to perform.

6.2.1 Voucher Number

Selecting the Voucher Number radio button displays the following window. Populate the "Voucher Number" field and select the Search button.

DEPARTMENT OF HUMAN SERVICES
Main Account Vouchers (RA) Help Log Off Thursday 20 October 2016 3:12 pm
Voucher (RA) Search
Vendor ID: 3002908940110
Select Search Type
● Voucher Number ◯ Treasury Pay Date
Voucher Number:
Search Reset

Search Results

The following results will display, provided the voucher number contains information pertaining to your Vendor ID/Service Location:

DEPARTMENT OF	Ivania HUMAN SERVICES	Low-Income Home End	ergy Assistance Program	
lain <u>Account</u> <u>Vouchers</u>	(RA) <u>Help Log Off</u>	Friday 21 C	October 2016 11:00 pm	
cher (RA) Search				
	Vendo	or ID: 3002908	940110	
	s	elect Search T	уре	
	• Vou	cher Number \bigcirc Trea	sury Pay Date	
	Vouct	her Number: 5123456	7	
		Occurate Do	set	
		Search Re		
Voucher Number	Report Generate	d Date	Treasury Pay Date	

Click on the Voucher Number to view and print.

The following results will display if the voucher does not contain information pertaining to your Provider ID/Service Location.

Reference of the second	DEPARTMENT OF HUMAN SERVICES
<u>Main</u>	Account Vouchers (RA) Help Log Off Friday 21 October 2016 11:04 pm
Vouche	r (RA) Search
	Vendor ID: 3002908940110
	Select Search Type
	● Voucher Number ○ Treasury Pay Date
	Voucher Number: 51904045
	Search Reset
	No documents were found. Please refine your search and try again.

6.2.2 Treasury Pay Date

Selecting the Treasury Pay Date radio button displays the following window.

DEPARTMENT OF HUMAN SERVICES
Main Account Vouchers (RA) Help Log Off Monday 24 October 2016 11:03 am
Voucher (RA) Search
Vendor ID: 3002908940110
Select Search Type
◯ Voucher Number
From Date: Thru Date:
Search Reset

1. To perform a single day search:

Populate the "From Date" field and select the Search button.

2. To perform a date range search:

Populate both the "From Date" and "Thru Date" fields and select the Search button.

PLEASE NOTE: There are no restrictions on the date range; however, the wider the date range being searched, the longer the response time will be to return the results.

Search Results

The following results of the *single date search* will display provided the voucher for this Treasury Pay Date contains information pertaining to your Vendor ID/Service Location:

Main Account Youchers (RA) Help Log Off					
Voucher (RA) Search					
	Vendor ID: 3002	2908940110			
	Select Search Type				
◯ Voucher Number					
From Date:	10/11/2016	Thru Date: 10/11/2016			
Search Reset					
Voucher Number	Report Generated Date	Treasury Pay Date			
<u>51234567</u>	9/30/2016 12:00:00 AM	10/11/2016 12:00:00 AM			
r					

The following results of the *date range search* will display, provided the voucher for this Treasury Pay Date range contains information pertaining to your Vendor ID/Service Location:

DEPARTMENT OF HUMAN SERVICES				
Main Account Vouchers (RA) Help Log Off Friday 21 October 2016 11:21 pm				
Voucher (RA) Search				
Vendor ID: 3002908940110				
Select Search Type				
○ Voucher Number ④ Treasury Pay Date				
From Date: 10/11/2016 Thru Date: 10/31/2016				
Search Reset				
Voucher Number Report Generated Date Treasury Pay Date				
51234567 9/30/2016 12:00:00 AM 10/11/2016 12:00:00 AM				

Click on the Voucher Number to view and print the voucher.

The following results of the date search will display if the voucher for this Treasury Pay Date does not contain information pertaining to your Vendor ID/Service Location.

NOTE: The same message will display for either a single date or a date range search.

Pennsylvania DEPARTMENT OF HUMAN SERVICES				
Main Account Vouchers (RA) Help Log Off Friday 2	1 October 2016 11:23 pm			
Voucher (RA) Search				
Vendor ID: 30029	08940110			
Select Search	туре			
O Voucher Number 🖲 T	reasury Pay Date			
From Date: 10/18/2016	Thru Date: 10/18/2016			
Search	Reset			
No documents were found. Please re	fine your search and try again.			

Voucher Image:

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF HUMAN SERVICES Provider 300290894 - 0110 CAMP HILL, PA 17011	Provider Pay VOUCHER NUM TRACE ID/DSN: TREASURY PAY PERIOD: 10/01/	yments (LIH610-R04) IBER : 51234587 000170000179558 · DATE: 10/11/2018 2018 - 10/11/2018				Report Generated Page 1 Of 4	: 4/30/2016
PAYMENT DETAILS - CASH				PAY	MODE: EFT		
Advance Payment	0		\$0.0	0			ADV
ACCOUNT NO. AMOUNT LAST	FIRST ADDRESS	СІТҮ	ST ZIP	CO D	INDIV	TYPE	TRANS
Total For Cash: ADV	0		ş	\$0.00			
PAYMENT DETAILS - CRISIS REGULAR							
AUTH ID. ICN# ACCOUNT NO.	AMOUNT AMOUNT BILLED PAID	NAME A	DDRESS	CO/D	INDIV	DLVRY DATE	
0300123456 54321	\$132.88 \$132.88	1403		49/0	120123456	09/18/2016	
Total For Crisis Regular:	1		Crisi	s Dollars:			132.88
PAYMENT DETAILS - CRISIS ADDITIONAL PAYMEN	ITS					PAY MODE:	
ACCOUNT NO. AMOUNT	NAME ADDRES	s	CO/D	INDIV	SERVICE DATE	TYPE	
Total For Crisis Additional:	0		Crisis Dol	lars:			
Total For Crisis:	1		Crisis Dol	lars:			\$132.88
RECOUPMENT DETAILS - CASH ACCOUNT NO. AMOUNT LAST Total For Cash:	FIRST ADDRESS	CITY Cash Dollars:	ST ZIP	CO D	INDIV	VOUCHER	
Total For Cash:	0	Cash Dollars:					

7 PROMISe[™]/LIHEAP Vendor Internet Windows

This section of the *PROMISe*TM/*LIHEAP* Vendor Internet User Manual contains detailed information regarding the windows within the PROMISeTM/LIHEAP Vendor Internet application to help users better understand how each window is used. Windows presented in this section are listed in alphabetical order, and include explanations of the fields, fields edit (error messages), and functions of each window.

NOTE: All relevant Field Edits for the windows in the *PROMISe*TM/*LIHEAP Vendor Internet User Manual* are listed after the Field Descriptions for each window. However, not all windows are subject to Field Edits. If Field Edits do not apply to a window, the Field Edits table states "No Field Edits found for this window."

7.1 Account Maintenance

The Account Maintenance window is used by vendors to display or edit security profile information for users associated with the vendor's account. Information that can be edited or maintained includes the contact name, email address, phone number, Unified Security login information, and password.

Vendors must select and answer a single security question. Alternates must select and answer two security questions. The answers provided are stored in the system and used for selfauthentication. Permission to change a password during subsequent sessions is granted only after the user responds with the correct answers to the selected questions. Users who access this window are prompted to select security questions if none have yet been established for the account.

This window is accessed by selecting the Account option in the menu bar. The system automatically displays the user's profile information. Some of the form fields are conditionally displayed, depending on the permissions established for the user.

NOTE: When this window is initially accessed, a legal agreement (Statement of Entitlement) is displayed. The user is required to accept the agreement before permission to continue is granted. If the agreement is not accepted, the user is logged out of the system and redirected back to the log in page. When the agreement is accepted, the user is required to set up information for a contact name, phone number, and new password.

7.1.1 Layout

Account Youchers (RA) Help Log Off Thursday 20 October 2016 1:55 pm Vendor Account Maintenance: 3002908940110 New Password: Confirm Password:	(penns)	/lvania DF HUMAN SERVICES	COME HOME Energy Assistance P	Frogram
New Password: Confirm Password: Use a DHS Unified Security user logon: 3002908940110 User ID: Password: User Name: 3002908940110 Security Level: Provider Its as Logged On: 10/20/2016 Contact Name: E-Mail: Phone Number: 999999990 Manage Alternates Security Question: What is your city of birth?	Account Voucher	<u>s (RA) Help Log Off</u> Vendor Account M	Thursday 20 October 2016 1 Maintenance: 3002	:55 pm 2908940110
Use a DHS Unified Security user logon: 3002908940110 User ID: Password: User Name: 3002908940110 Security Level: Provider Status: Active Last Logged On: 10/20/2016 Contact Name: E-Mail: Phone Number: 999999990 Manage Alternates Security Question: What is your city of birth? Answer: Camp Hill	New Password:		Confirm Password:	
User Name: 3002908940110 Security Level: Provider Status: Active Last Logged On: 10/20/2016 Contact Name: E-Mail: Manage Alternates Phone Number: 9999999900 Manage Alternates Security Question: What is your city of birth? Answer: Camp Hill	Use a DHS Unified User ID:	Security user logon: 30029089	40110 Password:	
Status: Active Last Logged On: 10/20/2016 Contact Name: E-Mail: Image Alternates Phone Number: 999999990 Manage Alternates Security Question: What is your city of birth? Answer:	User Name:	3002908940110	Security Level:	Provider V
Contact Name: E-Mail: Phone Number: 9999999990 Manage Alternates Security Question: What is your city of birth?	Status:	Active V	Last Logged On:	10/20/2016
Phone Number: 9999999990 Manage Alternates Security Question: What is your city of birth? Answer: Camp Hill	Contact Name:	CONTRACTOR OF STREET	E-Mail:	and the second sec
Security Question: What is your city of birth? Answer: Camp Hill	Phone Number:	9999999990	Manage Alternat	tes
		What is your city of birth?	✓ Answer: Ca	amp Hill
Save Reset Cancel	Security Question:			

7.1.2 Account Maintenance Layout for Alternates

DEPARTME	Sylvania NT OF HUMAN SERVICES	w-Income Home Energy Assistance Program	
<u>Account</u> <u>Vo</u>	<u>ichers (RA) Help Log Off</u> Vendor Accou	Thursday 20 October 2016 10:29 am	
New Password:		Confirm Password:	
Use a DHS Unifi User ID:	ed Security user logon: ALT98	Password:	
User Name:	ALT980229	Security Level: Alternate	~
Status:	Active V	Last Logged On: 1/1/1964	
Contact Name:	John Doe	E-Mail: InvalidEmailAdd	ress@sta
Phone Number:	5551212		
	on: What is your mother's m	aiden name? 🗸 Answer:	
Security Question			
Security Questic	what is your mother's m	naiden name? V Answer:	

7.1.3 Field Descriptions

Field	Description	Data Type	Length
Answer	User-provided answer to the pre-set security question selected.	Character	20
Answer (2)	User-provided answer to the second pre-set security question selected.	Character	20
Cancel	Cancels the action so that no information is added, deleted, or saved to the existing record.	Button	0
Confirm Password	Confirmation check to verify the password.	Character	8
Contact Name	Contact name of the account user.	Character	40
E-mail	Email address of the account user.	Character	50
Last Logged On	Last date the user accessed the secure web site. This field is system-generated and cannot be updated.	Date (MM/DD/CCYY)	10

Field	Description	Data Type	Length
Manage Alternates	Opens the Alternate Management window to maintain alternate information. This button displayed to Vendors.	Button	0
New Password	New password assigned to the user.	Character	8
Password	Unified Security password.	Character	15
Phone Number	Account user's telephone number.	Character	10
Reset	Resets the form to display the default information.	Button	0
Save	Saves the modified information.	Button	0
Security Level	Authorization level of the user. This field is system-generated and cannot be updated.	Drop Down List Box	0
Security Question	Pre-set security question used for password reset purposes. All users see the first security question and answer field.	Drop Down List Box	0
Security Question (2)	Pre-set security question used for password reset purposes. Only alternate accounts see the second security question drop down list and answer fields.	Drop Down List Box	0
Status	Status of the user's account, either "Active" or "Expired Password." This field is system-generated and cannot be updated.	Drop Down List Box	0
Use a DHS Unified Security user logon	Checked if the user has selected to use a Unified Security log on instead of a PROMIS e^{TM} /LIHEAP log on ID.	Check Box	0
User ID	Unified Security log on ID.	Character	17
User Name	System-assigned log on ID of the user. This field is system-generated and cannot be updated.	Character	20

7.1.4 Field Edits

Field	Error Code	Error Message	To Correct
(Window Level Edits)	0	Please choose a security question and answer.	User is missing security questions or has old style custom questions.
Answer	0	Please choose a security question and answer.	Enter answers for the security questions.
	1	Please select a second security question that is different from the first security question.	Use different security questions.
Answer (2)	0	Please choose a second security question and answer.	Enter answers for the security questions.

Field Error Message		To Correct	
	1	Please select a second security question	Use different security
		that is different from the first security	questions.
		question.	
Confirm Password	0	Your passwords do not match.	Re-type both passwords.
Contact Name	0	A Contact Name must be given.	Enter a Contact Name.
New Password	0	Your password must begin with an alpha	Enter a password in the
		character, be between 6 and 8 characters	correct format.
		in length, and contain at least 2 numeric	
		characters.	
	1	Your passwords do not match.	Re-type both passwords.
	2	Previous passwords are prohibited.	Enter a new password.
		Please choose a new password.	
Password	0	You have selected to use a Unified	Enter a password.
		Security Logon to access the system.	
Phone Number	0	A current Phone Number must be given.	Enter a Phone Number.
Save 0 Your account information has been updated.			
	1	Errors occurred while updating your	Click the Save button
		account information.	again.
User ID	0	You have selected to use a Unified	Enter a Logon ID.
		Security Logon to access the system.	_

7.1.5 Accessibility and Use

To access and use the Account Maintenance window, complete the steps in the step/action table(s).

To Access Account Maintenance Window

Step	Action	Response
1	Logon to PROMIS e^{TM} /LIHEAP Vendor	The LIHEAP Main Menu window
	Internet	opens.
2	Click the Account menu tab.	The Account Maintenance window
		opens.

To Update User Information

Step	Action	Response
1	Type a value in the Contact Name, E-Mail, and Phone	
	Number fields.	
2	Click the Save button.	The information is
		saved.

To Change User Password

Step Action Response

Step	Action	Response
1	Type a value in the New Password and Confirm Password	
	fields.	
2	Click the Save button.	The information is
		saved.

Password Requirements

User passwords must:

- Begin with an alpha character
- Be between 6 and 8 characters in length
- Contain at least 2 numeric characters.

Users cannot reuse their three most recent passwords.

To Manage Alternates

Step	Action	Response
1	Click the Manage Alternates button.	The Alternate Maintenance window opens.

7.2 Alternate Creation Complete

The Alternate Creation Complete window appears automatically after successfully creating a new alternate association to a vendor in the Create New Alternate (Alternate Creation) window. The Alternate Creation Complete window verifies the new alternate information by displaying the following:

- The name of the new alternate as it has been keyed into the system.
- The ID number the system has assigned to the new alternate.

Before leaving this window it is advisable to print it to retain a record of the User Logon ID. The alternate that has been created needs this nine-digit ID number to log on to the system and access the vendor's account. To exit this window, press the Continue button and return to the LIHEAP Main Menu.

7.2.1 Layout

Alternate Creation Complete

The following Alternate user has been created. They now have access to your account. To access your account they will be required to login into the system using the assigned User Logon ID below.

**Please print this for your records.

User Logon ID:	ALT123456
Contact Name:	John Doe

Continue

7.2.2 Field Descriptions

Field	Description	Data Type	Length
Contact Name	Displays the name of the new alternate as it has been entered in the Create New Alternate window. This field is display-only and cannot be edited.	Character	20
Continue	Exits this window and returns the user to the LIHEAP Main Page.	Button	0
User Logon ID	System-assigned user ID for the newly created alternate. This field is display-only and cannot be edited.	Character	9

7.2.3 Field Edits

Field Error Code Error Message To Correct

No Error Code Messages found for this window.

7.2.4 Accessibility and Use

To access and use the Alternate Creation Complete window, complete the steps in the step/action table.

To Access Alternate Creation Complete Window

Step	Action	Response
1	Logon to PROMISe [™] /LIHEAP Vendor Internet	The LIHEAP Main Menu window
		opens.
2	Click the Account menu tab.	The Account Maintenance window
		opens.
3	Click the Manage Alternates button.	The Alternate Management window
		opens.
4	Click the Create New Alternate button.	The Create New Alternate window
		opens.

Step	Action	Response
5	Perform the steps outlined in the Create New	
	Alternate Window Use instructions to create a	
	new alternate association to a vendor account.	
6	Click the Create Alternate button.	The Alternate Creation Complete
		window opens to verify the
		information entered in the Create
		New Alternate window.
7	Click the Continue button to exit the window.	

7.3 Alternate Management

The Alternate Management window is used in conjunction with the Account Maintenance window to manage alternate information in the user's account profile. This window displays a list of alternates who have been granted access to this account, and is used to grant new, edit, or revoke permission to an alternate.

Only users who are logged on with a vendor ID can access this window. To navigate to this window, select the Account option in the menu bar of the LIHEAP Main Menu to open the Account Maintenance window; click the Manage Alternates button. The Alternate Management window opens.

7.3.1 Layout

Alternate Managem	ent	
Logon ID No current alternates h	Contact Name ave permissions,	Grant Access To Logon ID:
		Create New Alternate
		Revoke Permissions
Close		

7.3.2 Field Descriptions

Field	Description	Data Type	Length
Close	Exits the window.	Button	0
Contact Name	Alternate user's name.	Character	40
Create New Alternate	Opens the Alternate Creation window.	Button	0
Grant Access To	Grants access to a designated alternate.	Button	0
Logon ID	User log on ID being added to the account.	N/A	0

Field	Description	Data Type	Length
Logon ID (existing)	User log on ID for existing alternate(s).	Character	20
Revoke Permissions	Revokes permissions to the account for the selected alternates.	Button	0

7.3.3 Field Edits

Field	Error Code	Error Message	To Correct
Grant Access To	0	To grant permissions, enter a valid Logon	Enter a valid Logon
		μD.	ID.
	1	'UserName' is not a valid user or you cannot	Enter a valid
		grant permission to that user.	Alternate ID.
Revoke Permissions	0	To revoke permissions, select an alternate	Select an alternate
		from the list.	from the list.

7.3.4 Accessibility and Use

To access and use the Alternate Management window, complete the steps in the step/action table(s).

To Access the Alternate Management Window

Step	Action	Response
1	Logon to PROMISe [™] /LIHEAP Vendor	The LIHEAP Main Menu window opens.
	Internet	
2	Click the Account menu tab.	The Account Maintenance window opens.
3	Click the Manage Alternates button.	The Alternate Management window opens.

To Grant Access to Logon ID

Step	Action	Response
1	Type a value in the Logon ID field.	
2	Click the Grant Access To button.	Access is granted to Logon ID.

To Create New Alternate

Step	Action	Response
1	Click the Create New Alternate button.	The Create New Alternate window opens.

To Revoke Permissions

Step	Action	Response
1	Click to select a Logon ID .	
2	Click the Revoke Permissions button.	Logon permission is revoked.

7.4 Create New Alternate

The Create New Alternate window displays the Alternate Creation page, and is used by a vendor to create a new user account by entering a contact name and assigning a temporary password to the new contact name.

This window is accessed from the Account option on the Menu Bar, which opens the Account Maintenance window. Click the Manage Alternates button to open the Alternate Management window. Click the Create New Alternate button.

7.4.1 Layout

Alternate Creation		
To create an Alternate, complete the fields listed below and click the Create Alternate button.		
Please be advised that, for security reasons, the <i>Password</i> that you assign on this screen will be changed when the alternate initializes their account. It is therefore recommended that the alternate's actual name be used for the <i>Contact Name</i> field. The <i>Contact Name</i> field will not be updateable once the alternate is created and will serve as the provider's primary means of tracking the alternate's identity.		
Once a alternate is created, they are web users in their own right. A single alternate may be granted access to multiple providers. If a alternate has not been granted access by any providers, they will be denied access to the secure website. The alternate's access may be revoked at any time by the granting provider.		
Contact Name: Password: Create Alternate Cancel		

7.4.2 Field Descriptions

Field	Description	Data Type	Length
Cancel	Cancels the action so no new information is added, deleted, or saved in the existing window.	Button	0
Contact Name	Contact name for the new alternate user. It is recommended that this name be the same as the alternate's name for tracking purposes.	Character	40
Create Alternate	Enters the new alternate user account information into the system.	Button	0
Password	Password for the new alternate user account.	Character	20

Field	Error Code	Error Message	To Correct
Contact Name	0	Contact Name is a required field.	Enter a contact name.
Password	0	Password is a required field.	Enter a Password.
	1	Your password must begin with an alpha character, be between 6 and 8 characters in length, and contain at least 2 numeric characters.	Enter a Password in the specified format.

7.4.3 Field Edits

7.4.4 Accessibility and Use

To access and use the Create New Alternate window, complete the steps in the step/action table(s).

To Access Create New Alternate Window

Step	Action	Response
1	Logon to PROMIS e^{TM} /LIHEAP Vendor	The LIHEAP Main Menu window
	Internet	opens.
2	Click the Account menu tab.	The Account Maintenance window
		opens.
3	Click the Manage Alternates button.	The Alternate Management window
		opens.
4	Click the Create New Alternate button.	The Create New Alternate window
		opens.

To Create New Alternate

Step	Action	Response
1	Type a value in the Contact Name and Password	
	fields.	
2	Click the Create Alternate button.	The new alternate logon is
		created.

To Cancel New Alternate

Step	Action	Response
1	Click the Cancel button.	The new alternate is not created and the form is cleared.

7.5 Crisis Attachment Upload

The Crisis Attachment Upload screen was created to handle the functionality of submitting formatted PDFs to be matched up with a claim.

There are three entry points to the page:

- Claims Inquiry
- Attachment Control Number Request

• Claims Submission

The key fields on the screen (Last Name, First Name, Crisis Authorization # and Attachment Control #) will pre-populate with the data from the associated entry point record selected.

7.5.1 Layout

Main Account Heig Log Off					
Main Accour	Main Account Help Log Off Monday 26 October 2015 1:31 pm				
Crisis Attachm	ent Upload				
		Account: 3006	543210001		
Up	load Instruction	is:			
	 Click the Browse button. Search and select a PDF file for this Crisis Authorization # and click Add. Attach additional PDF files for this Crisis Authorization # by repeating Step 1 (up to a maximum of 3 PDF files). Confirm that the PDF files you added relate to this specific customer and Authorization #. Click the Submit Attachment(s) button to complete the upload process. 				
─ Upl Last First Crisi File t	Upload Criteria Last Name ANTHONY 800003425 Crisis Authorization # 8000001401 File to Upload: Browse ADD Submit Attachment(s)				
		No files Upl	paded		

After a file is attached, it displays at the bottom of the page:

Main Account Youchers (RA) Help Log Off Thursday 20 October 2016 11:16 am					
	Account: 3002908940110				
Upload Instruc	tions:				
1. Click the 2. Attach ac PDF files 3. Confirm t 4. Click the	 Click the Browse button. Search and select a PDF file for this Crisis Authorization # and click Add. Attach additional PDF files for this Crisis Authorization # by repeating Step 1 (up to a maximum of 3 PDF files). Confirm that the PDF files you added relate to this specific customer and Authorization #. Click the Submit Attachment(s) button to complete the upload process. 				
Upload Criteria				Attachment Control Number	
First Name	ALLEN			800003825	
Crisis Authorization	# 800000	1613			
File to Upload:		B	rowse	ADD	
			Submit Attac	chment(s)	
Da	e Added	File Name	File Size		
10/20	2016 11:10:30	Supporting Documentation 1.pdf	78 KB	Remove	
10/20	2016 11:10:43	Supporting Documentation 2.pdf	78 KB	Remove	
10/20	2016 11:10:52	Supporting Documentation 3.pdf	78 KB	Remove	
		Active Crisis Authorization	Continue to Cla	aim	

7.5.2 Field Descriptions

Field	Description	Data Type	Length
Active Crisis Authorization	Opens the Active Crisis Authorization window	Button	0
ADD	The button used to upload files for the crisis authorization	Button	0
Attachment Control Number	Attachment control number.	Number	9

Field	Description		Length
Browse	The button used to locate the electronic files used for uploading	Button	0
Claim Inquiry	Opens the Claim Inquiry window	Button	0
Crisis Authorization #	Crisis authorization number	Number	10
File to Upload	PDF file name to be uploaded. Automatically entered after selecting a file using the Browse button	Character	260
First Name	The recipient first name	Character	11
Last Name	The recipient last name	Character	14
Remove	Removes the attachment	Button	0
Submit Attachment(s)	Submits new attachment(s)	Button	0

7.5.3 Fields Edits

Field	Error Code	Error Message	To Correct
ADD	0	Please select a file to add	Select a PDF file
	1	Please select a PDF file	Select a PDF file
	2	File has already been added	Select a new PDF file
Remove	0	Are you sure you want to remove this file?	OK = Removes the file Cancel = File is not removed
Submit Attachments(s)	0	A file must be selected for upload. Please upload only PDF's.	Select a PDF file
	1	The size of the file that was uploaded is larger than the maximum allowed file size of 500KB.	Select a file with a size less than 500KB
	2	A file with the name " <file name="">" has already been uploaded.</file>	Select a new file.

7.5.4 Accessibility and Use

To access and use the Crisis Attachment Upload window, complete the steps in the step/action table(s).

To Access Crisis Attachment Upload Window

Step	Action	Response
1	Logon to PROMIS e^{TM} /LIHEAP Vendor Internet	The LIHEAP Main
		Menu window opens.

Step	Action	Response
2	Click the Express Process, Claim Inquiry, Vendor Claim	The Claim Inquiry,
	Attachment Number Request or Claim Submission links	Vendor Claim
		Attachment Number
		Request or Claim
		Submission window
		opens.
3	From Claim Inquiry, perform a search and click on the	The Crisis Attachment
	Submit Attachment(s) or Re-Submit Attachment(s)	Upload window opens.
	buttons for the appropriate record(s)	
4	From the Vendor Claim Attachment Number Request	The Crisis Attachment
	window request an Attachment Control Number (ACN), or	Upload window opens.
	search for an existing ACN that has already been requested.	
	Select Submit Attachment(s) to submit attachments or select	
	Re-Submit Attachment(s) to resend attachments	
5	From the LIHEAP Claim Submission window, enter the	The Crisis Attachment
	claim information and click the Submit Attachment (s)	Upload window opens.
	button	

To Submit/Re-Submit Electronic Files

Step	Action	Response
1	Open the Crisis Attachment Upload window	The Crisis Attachment Upload window
		opens.
2	Click the Browse button.	The Choose File to Upload window
		opens
3	Locate the appropriate PDF file to attach	The file name populates the File to
		Upload field.
4	Click the ADD button	The file is attached and displays at the
		bottom of the page.
5	Repeat as needed (up to a total of 3	The files are attached and display at
	attachments)	the bottom of the page.
6	Click the Submit Attachment(s) or Re-	The attached files are submitted.
	Submit Attachment(s) button	

NOTE: The LIHEAP Cover Sheet will be automatically generated and transmitted with the submitted files.

To Access the Active Crisis Authorization Window

Step	Action	Response
1	Open the Crisis Attachment Upload	The Crisis Attachment Upload window
	window	opens.
2	Click on the Active Crisis Authorization	The Active Crisis Authorization window
	button	opens.

To Access the Claim Submission Window

Step	Action	Response
		F

Step	Action	Response
1	Open the Crisis Attachment Upload	The Crisis Attachment Upload window
	window	opens.
2	Click on the Continue to Claim button	The Claim Submission window opens.

7.6 Internet Vendor Switch

Alternate accounts with permission to access multiple vendor accounts use the Internet Vendor Switch window to switch to a different Vendor ID. From the LIHEAP Main Menu, click the "Switch to a Different Vendor" link, or select "Change Provider ID" from the Account menu item. The Vendor IDs that have granted permissions to the alternate account are listed.

To switch to a different vendor ID, click the appropriate Vendor ID hyperlink from the list. The user session will change to function under the context of the selected Vendor ID.

7.6.1 Layout



7.6.2 Field Descriptions

Field	Description	Data Type	Length
Home	Returns user to the LIHEAP Main Menu	Button	0
Provider Number	Vendor ID that has granted the alternate account access	Hyperlink	0

7.6.3 Field Edits

Field Error Code Error Message To Correct

No Error Code Messages found for this window.

7.6.4 Accessibility and Use

To access and use the Internet Vendor Switch window, complete the steps in the step/action table(s).

To Access Internet Vendor Switch Window

Step	Action	Response
1	Logon to PROMIS e^{TM} /LIHEAP Vendor Internet as an	The LIHEAP Main Menu
	Alternate Account	window opens.
2	Click the "Switch to a Different Vendor" link.	The Internet Vendor Switch
		window opens.

To Switch to a Different Vendor ID

Step	Action	Response
1	Click the appropriate Vendor ID	Returns to the LIHEAP Main Menu under the
	hyperlink.	selected Vendor ID.

7.7 LIHEAP Claim

The LIHEAP Claim window displays LIHEAP claims. From here, a vendor can enter all of the required information to submit a LIHEAP claim, including up to four detail lines. This window is accessed by clicking the Claim Submission link from the LIHEAP Main Page.

7.7.1 Layout

DEPARTMENT OF HUMAN SERVICES												
Main Account Vouchers (RA) Help Log Off Thursday 20 October 2016 2:08 pm												
LIHEAP Claim	Need help s	ubmitting a claim? Vi	ew sample c	laim submissior	ıs <u>here</u> .							
Vendor:	3002908940110		Attachment Cor	ntrol #:								
Claim Frequency: Original Claim #: Customer Account #: Last Name: First Name: Middle Initial:	1 - Original V		Crisis Authoriza Delivery Date (I Total Crisis Bille	tion #.								
Service Lines Delivery Date	Service Code	Basis of Measurement	Units <u>1</u>	Price per Unit	Billed Amount	^						
						Remove						
Service Code:						~						
Service Code: Basis of Measurement Units: (decimal only)						~						
Service Code: Basis of Measuremen Units: (decimal only) Price per Unit:						~						
Service Code: Basis of Measuremen Units: (decimal only) Price per Unit: Crisis Amount Billed:						~						
Service Code: Basis of Measuremen Units: (decimal only) Price per Unit: Crisis Amount Billed: Submit	t V 1 Active Crisis Authoriza	ation Submit At	tachment(s)									
Field	Description	Data Type	Length									
-------------------------------------	---	-----------------------	--------									
(Line #)	Sequential number of a service detail.	Number	4									
Active Crisis Authorization	Displays the Vendor Active Authorization window	Button	0									
Add	Add new service line to claim.	Button	0									
Attachment Control #	Attachment control number (ACN) is used to relate attachments to this claim.	Number	9									
Basis of Measurement	Units in which a value is being expressed.	Drop Down List Box	0									
Claim Frequency	Specifies the frequency of the claim. This field cannot be updated by the user.	Drop Down List Box	0									
Crisis Amount Billed	Amount requested for payment for services rendered.	Number	10									
Crisis Authorization #	Crisis Authorization Number submitted on the claim.	Number	10									
Customer Account #	Number assigned to the customer by the vendor, used by the vendor for their own internal claim submission tracking.	Character	25									
Delivery Date (MM/DD/YYYY)	Date of service delivery. The slashes are system generated and cannot be entered.	Date (MM/DD/CCYY)	10									
First Name	First name of the LIHEAP recipient.	Character	11									
Last Name	Last name of the LIHEAP recipient.	Character	14									
Middle Initial	Middle initial of the LIHEAP recipient.	Character	1									
Original Claim #	Original claim number for the claim when the claim frequency code is other than Original. This field cannot be updated by the user.	Character	13									
Price per Unit	The price per unit.	Number	8									
Remove	Remove selected service line from claim.	Button	0									
Resubmit Attachment(s)	Displays the Crisis Attachment Upload page.	Button	0									
Service Code	Description that clarifies the product/service procedure code.	Drop Down List Box	0									
Submit	Submits claim to LIHEAP.	Button	0									
Submit Attachment(s)	Displays the Crisis Attachment Upload page.	Button	0									
Total Crisis Billed To LIHEAP	Total amount requested for payment for services rendered.	Number	12									

7.7.2 Field Descriptions

Field	Description	Data Type	Length
Units	Number of units submitted for payment on a claim service line.	Number	8
Vendor	Vendor's ID number.	Number	13

7.7.3 Field Edits

Field	Error Code	Error Message	To Correct
Attachment Control #	0	Attachment Control Number missing or invalid	Enter the Attachment Control Number
	1	Attachment Control # must be nine digits.	Enter the nine digit Attachment Control Number
	2	Invalid Attachment Control # entered. Please check your Attachment Control # and try again.	Enter a valid Attachment Control Number.
Basis of Measurement	0	Service Line #: Basis of Measurement missing.	Select a Basis of Measurement for Service Line #
Crisis Amount Billed	0	Service Line #: Billed Amount is missing.	Enter Billed Amount for Service Line #
Crisis Authorization #	0	Crisis Authorization # missing or invalid.	Enter the Crisis Authorization Number
	1	Crisis Authorization # must be ten digits.	Enter a ten-digit Crisis Authorization Number
Delivery Date	0	Delivery Date is missing or invalid.	Enter a Delivery Date
First Name	0	First name missing or invalid.	Enter the recipient's First Name
Last Name	0	Last name missing or invalid.	Enter the recipient's Last Name
Price Per Unit	0	Service Line #: Price Per Unit missing.	Enter Price Per Unit for Service Line #
Service Code	0	Service Line #: Service Code missing.	Select a Service Code for Service Line #
Total Crisis Billed to LIHEAP	0	Total billed to LIHEAP is missing or invalid.	Enter a Total Billed to LIHEAP amount.
Units	0	Units are missing.	Enter a number of units for Service Line

NOTE: Any required fields not completed will return an error message and will need to be completed prior to submission of the claim.

penn DEPARTME	ISYLVANIA ENT OF HUMAN SERVIC	ES Low-Income Home E	nergy Assistance Pro	gram		
<u>Main Account Vo</u>	uchers (RA) Help Log C	Off Thursday 2	20 October 2016 2:1	1 pm		
LIHEAP Claim Billing Information	Need help s	submitting a claim?	View sample cla	im submi	ssions <u>here</u> .	
Vendor:	3002908940110		Attachment Contr	ol #:	Attachment Control N	umber missing or
Claim Frequency:	1 - Original 🗸 🗸		Crisis Authorizatio	on #:	invalid	- to the standard
Original Claim #:			Delivery Date (MI	M/DD/YYYY):	Crisis Authorization #	missing or invalid
Customer Account #:			Total Crisis Billed	to LIHEAP:	Total Billed to LIHEAR	missing or invalid.
Last Name:	Last name missing or invali	id				
First Name:	First name missing or invali	id				
Middle Initial:						
Service Lines						
Dote	Code	Measurement	Units	per Unit	Amount	Add Remove
Service Code:	Service Code missing					~
Basis of Measurement	Basis of Measurement	t missing				
Units: (decimal only)	1					
Price per Unit:	Price	e per unit is missing				
Crisis Amount Billed: Submit	Billed Amount is missi	ng ation Submit A	Attachment(s)			
Claim Status Infor Claim Status Not St	mation ubmitted yet.					

7.7.4 Accessibility and Use

To access and use the LIHEAP Claim window, complete the steps in the step/action table(s).

To Access LIHEAP Claim Window

Step	Action	Response
1	Logon to PROMIS e^{TM} /LIHEAP Vendor	The LIHEAP Main Menu window
	Internet	opens.
2	Click the Claim Submission link	The LIHEAP Claim window opens.

To Complete Claim Billing Information

NOTE: Claims should be completed in accordance with DHS's guidelines, policies, and procedures. Refer to the DHS web site for more specific information on completing a claim submission.

Step	Action	Response
1	In the Billing Information section, type a value in the Last Name, First	
	Name, Attachment Control #, Crisis Authorization #, Delivery date, and	
	Total Crisis Billed to LIHEAP fields.	

To Add Claim Service Line Information

Step	Action	Response
1	Select a value in the Service Code and Basis of	
	Measurement fields.	
2	Type a value in the Units, Price per Unit, and Crisis	
	Amount Billed fields.	
3	To add additional lines of service information, click the	An additional line is added
	Add button and repeat steps.	to the claim.

To Edit Service Line Information

Step	Action	Response
1	In the Service Lines section, click to	The service fields will update to display
	highlight the Service Line to be edited.	the selected service line data.
2	Edit the fields as necessary.	The service line is updated.

To Remove Service Line Information

Step	Action	Response
1	In the Service Lines section, click to highlight the Service	
	Line to be removed.	
2	Click the Delete button.	The service line is
		removed.

To Submit the Claim

Step	Action	Response
1	Click the Submit button.	The claim is submitted.

To Submit Electronic Files

Step	Action	Response
1	Click the Submit Attachment (s) button.	The Crisis Attachment Upload page opens.

7.8 LIHEAP Claims Inquiry

The LIHEAP Claims Inquiry window is used by vendors to search all service claims associated with their vendor number. The search can be narrowed by specifying the ICN, crisis authorization number, date range, recipient name, or claim status criteria.

Only the top section of the window above the Search button appears when the window is first accessed. The search results section in the lower portion of the window, as shown in the Layout below, appears after a search has been initiated. This section displays the search results.

This window is accessed by selecting Claims Inquiry from the LIHEAP Main Menu.

7.8.1 Layout

DEPARTMEN	Sylva NT OF HUM	Ania MAN SERVI Help Log	CES Low Low	-Income Ho Thurse quiry: 3	me Energy day 20 Oct 002908	Assistance Pro ober 2016 1:4 940110	Jogram 47 pm
Last Name: First Name: ICN (Claim ID): Date Type O Delivery From Date:	Date	016	Thru Date:	10/3	Crisis Authorizati Claim Statu 1/2018	on #: IS: Any Sc C	Status ort Type Delivery Date DCN (Claim ID) Sort Order Descending Ascending
ICN (Claim ID)	Delivery Date	Last Name	First Name	Sear Billed Amount	ch <u>Amount</u> <u>Paid</u>	<u>Status</u>	Document Upload
2010106000001	20161020		DONTE	500.00	500.00	Falo	Do Submit Attachment(-)
2015162000001	20161020		DONTE	500.00	0.00	Suspended	Re-Submit Attachment(s)
	20161018	Contraction of the local distribution of the	DIONNA	500.00	0.00	Denied	
2815180000001	20101010						
2815180000001 2815159000001	20161021		MARCUS	500.00	0.00	Suspended	Submit Attachment(s)

Field	Description	Data Type	Length
Amount Paid	Amount of the claim payment check.	Number	9
Billed Amount	Billed amount for the specified service.	Number	9
Claim Status (Input)	Type of claim status for which the search is performed. Values are: Any Status, Approved, Denied, Paid, and Suspended.	Drop Down List Box	0
Claim Status (Output)	im Status utput) Current status of the claim as reported by the system. Values are: Approved, Denied, Suspended, or Paid.		0
Crisis Authorization # (Input)	Crisis authorization number associated with submitted claims.	Number	10
Delivery Date	Selects search by Delivery Date.	Radio Button	0
Delivery Date (Output)	Delivery date of service	Date (CCYYMMDD)	10
Document Upload	Indicates if Submit Attachment(s) or Re-Submit Attachment(s) options are available to submit electronic attachments	Button	0
First	Link to the first page of search results, if one exists.	Hyperlink	0
First Name (Input)	Recipient first name for search.	Character	11
First Name (Output)	Recipient first name associated with the claim.	Character	11
From Date (Input)	Beginning date of search. The slashes are system generated and cannot be entered.	Date (MM/DD/CCYY)	10
ICN (Claim ID) (Input)	Internal control number entered by the user to identify a claim.	Character	13
ICN (Claim ID) (Output)	Internal control number that identifies a claim. To view more information about a specific ICN, click the linked ICN number in this field.	Character	13
Last	Link to the last page of search results, if one exists.	Hyperlink	0
Last Name (Input)	Recipient last name for search.	Character	14
Last Name (Output)	Recipient last name associated with the claim.	Character	14
Next	Link to the next page, if one exists.	Hyperlink	0
Previous	Link to the previous page, if one exists.	Hyperlink	0
Re-Submit Attachment(s)	Opens the Crisis Attachment Upload page	Button	0
Search	Searches database for the desired record.	Button	0

7.8.2 Field Descriptions

Field	Description	Data Type	Length
Sort Order	Sorts the results in ascending order.	Radio Button	0
(Ascending)			
Sort Order	Sorts the results in descending order.	Radio Button	0
(Descending)			
(Default)			
Sort Type (Delivery	Sorts the results by delivery date.	Radio Button	0
Date) (Default)			
Sort Type (ICN)	Sorts the results by ICN.	Radio Button	0
Submit	Opens the Crisis Attachment Upload page	Button	0
Attachment(s)			
Thru Date (Input)	Ending date of search. The slashes are system	Date	10
	generated and cannot be entered.	(MM/DD/CCYY)	

7.8.3 Field Edits

Field	Error Code	Error Message	To Correct
Delivery Date	0	Please specify Delivery Dates Range while searching with First Name and Last Name.	Enter the From Date and Thru Date
First Name	0	Please specify both First Name and Last Name.	Enter the first and last name
From Date (Input)	0	The from date Day is invalid.	Enter a valid day.
	1	The from date Month is invalid.	Enter a valid month
	2	When ICN is not specified, the date range may not exceed one year. Please enter a shorter period of time or specify the ICN.	Enter a shorter range of days or populate the ICN field.
	3	When searching by date range only, the date range may not exceed 31 days. Please enter a shorter period of time or specify additional search criteria.	Enter a shorter range of days or populate the ICN field.
ICN (Input)	0	ICN must be 13 characters.	Enter a numeric, 13- character ICN.
	1	ICN must be numeric.	Enter a numeric, 13- character ICN.
Search	0	Please specify ICN, Recipient Name, Crisis Authorization # or enter a Date Range.	Enter at least one of the specified fields.
Thru Date (Input)	0	Thru date must be later than From Date.	Enter a Thru date later then the From date.
	1	The thru date Day is invalid.	Enter a valid day.
	2	The thru date Month is invalid.	Enter a valid month

7.8.4 Accessibility and Use

To access and use the LIHEAP Claims Inquiry window, complete the steps in the step/action table(s).

To Access LIHEAP Claims Inquiry Window

Step	Action	Response
1	Logon to PROMIS e^{TM} /LIHEAP Vendor	The LIHEAP Main Menu window opens.
	Internet	
2	Click the Claims Inquiry link.	The LIHEAP Claims Inquiry window
		opens.

To Search for a Claim by Recipient Name

Step	Action	Response
1	Type a value in the Last Name and First	
	Name fields.	
2	In the Date Type section, enter a From Date	
	and Thru Date.	
3	Click the Search button.	If a match is found, the search results list
		is displayed.
4	Click the ICN (Claim ID) link.	The detailed claim is displayed.

To Search for a Claim by Crisis Authorization Number

Step	Action	Response
1	Type a value in the Crisis Authorization	
	# field.	
2	Click the Search button.	If a match is found, the search results list is
		displayed.
3	Click the ICN (Claim ID) link.	The detailed claim is displayed.

To Search for a Claim by ICN

Step	Action	Response
1	Type a value in the ICN (Claim ID)	
	field.	
2	Click the Search button.	If a match is found, the search results list is
		displayed.
3	Click the ICN (Claim ID) link.	The detailed claim is displayed.

To Search for a Claim by Delivery Date Range

Step	Action	Response
1	In the Date Type section, enter a From Date	
	and Thru Date .	
2	Click the Search button.	If a match is found, the search results list
		is displayed.
3	Click the ICN (Claim ID) link.	The detailed claim is displayed.

To Submit or Re-Submit an Electronic Attachment

Step	Action	Response
1	Click the Submit Attachment(s) or Re-Submit	The Crisis Attachment Upload
	Attachment(s) button.	screen opens

Search Combinations

The following search field combinations can be used to search for LIHEAP claims:

- Crisis Authorization Number
- ICN/Claim ID
- Last Name, First Name, and Date Range (maximum 365 days)
- Date Range (maximum 31 days)

7.9 LIHEAP Main Menu

The LIHEAP Main window is the home page for the vendors. It provides links to all of the vendor's online services including claim inquiry, viewing active crisis authorizations, generating attachment control numbers, and claim submission.

The user can access this window by logging into the PROMIS e^{TM} /LIHEAP Vendor Internet application with a valid username and password.

7.9.1 Layout

Main Account Vouchers (RA) Help Log Off Thursday 20 October 2016 2:14 pm				
Need Help? Accessing Vouchers in PROMISe Adding a PROMISe User				
Submit all Claims & Attachments within 30 days of Authorization				
LIHEAP Main Menu				
Vendor ID: 3002908940110				
Inquire on Existing Claims				
Claims Inquiry				
Submit new Claim				
Online submission of a LIHEAP claim requires completion of the following steps:				
1. Obtain an Active Crisis Authorization Number (AAN)				
2. Generate an Attachment Control Number (ACN)				
 Submit a Claim, including the AAN from Step 1 and the ACN from Step 2 on the Claim Form where indicated. 				
Option 1. EXPRESS Process: Option 2. Manual Process:				
Guides Me through the Process and Pre-populates Claim Data 1. Active Crisis Authorizations 2. Attachment Control Numbers 3. Claim Submission				

7.10 LIHEAP Main Menu Layout for Alternates

DEPARTMENT OF HUMAN SERVICES	e Energy Assistance Program				
Main Account Vouchers (RA) Help Log Off Thursda	y 20 October 2016 2:16 pm				
Need Help? Accessing Vouchers in PROMISe Adding a PROMISe User Submit all Claims & Attachments	within 30 days of Authorization!				
LIHEAP M	<i>l</i> ain Menu				
Vendor ID: 30	002908940110				
Alternate / Delegate A	ccounts:				
Switch to a dif	ferent Vendor				
Inquire on E	kisting Claims				
Claims	Claims Inquiry				
Submit n	Submit new Claim				
Online submission of a LIHEAP claim re-	quires completion of the following steps:				
1. Obtain an Active Crisis Authorization Nu	mber (AAN)				
2. Generate an Attachment Control Number	(ACN)				
 Submit a Claim, including the AAN from Step 1 and the ACN from Step 2 on the Claim Form where indicated. 					
Option 1. EXPRESS Process:	Option 2. Manual Process:				
Guides Me through the Process and Pre-populates Claim Data	 Active Crisis Authorizations Attachment Control Numbers Claim Submission 				
L					

7.10.1 Field Descriptions

Field	Description	Data Type	Length
"Guides Me through the Process and Pre-populates Claim Data"	Hyperlink to the Vendor Active Authorization "Express Process" window	Hyperlink	0
Active Crisis Authorizations	Hyperlink to the Vendor Active Authorization window.	Hyperlink	0
Attachment Control Numbers	Hyperlink to the Vendor Claim Attachment Number Request window	Hyperlink	0
Claim Submission	Hyperlink to the Claim Submission window.	Hyperlink	0
Claims Inquiry	Hyperlink to the Claims Inquiry window.	Hyperlink	0
Switch to a Different Vendor	Hyperlink to the Internet Vendor Switch window.	Hyperlink	0
Vendor ID	Vendor's ID number.	Number	13

7.10.2 Field Edits

Field Error Code Error Message To Correct

No Error Code Messages found for this window.

7.10.3 Accessibility and Use

To access and use the LIHEAP Main Menu window, complete the steps in the step/action table(s).

To Access LIHEAP Main Menu Window

Step	Action	Response
1	Logon to PROMIS e^{TM} /LIHEAP Vendor	The LIHEAP Main Menu window
	Internet	opens.

To Access LIHEAP Claims Inquiry Window

Step	Action	Response
1	Click the Claims Inquiry link.	The LIHEAP Claims Inquiry window opens.

To Access the Vendor Active Authorization Window

Step	Action	Response
1	Click the Active Crisis Authorizations	The Vendor Active Authorization window
	link.	opens.

To Access the Vendo	Claim Attachment	Number Request	Window
---------------------	------------------	-----------------------	--------

Step	Action	Response
1	Click the Attachment Control	The Vendor Claim Attachment Number Request
	Numbers link.	window opens.

To Submit New Claim Using the Express Process

Step	Action	Response
1	Click the "Guides Me through the Process and	The Vendor Active Authorization
	Pre-populates Claim Data" link.	window opens.

To Submit New Claim Using the Manual Process

Step	Action	Response
1	Click the Claim Submission link.	The LIHEAP Claim window opens.

To Switch to a Different Vendor Number (Alternates)

Step	Action	Response
1	Click the Switch to a Different Vendor	The Internet Vendor Switch window
	link.	opens.

7.11 Logon

The Logon window is used by vendors to access the PROMIS e^{TM} /LIHEAP Vendor Internet web site. To enter the site, users identify themselves by entering security profile information.

A user with a temporary or expired password should log in using their system-assigned log on ID and temporary password. After the system successfully verifies the login information the user is directed to the Account Maintenance window and is prompted to change their password.

Users should enter their system-assigned log on ID and the password to enter the site. Users are periodically required to change their password. When changing passwords, the three prior and most recent passwords cannot be re-used. After six unsuccessful logon attempts, the account is disabled. You must contact the LIHEAP Vendor Assistance Center to reset your account.

7.11.1 Layout

DEPARTMENT OF HUMAN SERVICES Low-income Home Energy Assistance Program DHS LIHEAP Logon Help Need Help? Use the Internet Help Manuals Here Vendor Crisis Attachment Upload Process Here The LIHEAP program is no longer accepting claims for the 2015 - 2016 heating season
Important Reminders:
1. Submitting documentation for a Crisis authorization may be done in one of three ways:
 Attached by uploading the document onto PROMISe when submitting the claim is the quickest way to get paid for a crisis authorization Sent with the LIHEAP Cover Sheet specific to the crisis authorization (write the Authorization # on the documentation) by: Fax to 717-207-7997 or 717-207-7994
Note: When faxing, the LIHEAP Cover Sheet must be the 1st document, followed by the metered trip ticket or other documentation. Multiple LIHEAP Crisis Claims may be sent on the same fax transaction (up to 30 pages)
 US Mail to DHS-LIHEAP Crisis Claims, PO Box 69028, Harrisburg, PA 17106
 Your password must begin with an alpha character, be between six and eight characters in length, and contain at least two numeric characters. If you have trouble resetting your password, call 1-800-248- 2152.
Already registered? If you have already set up your account or a vendor has set one up for you, log on here.
Logon ID: (13 digit Vendor ID or 9 digit Alternate ID) Password: Foroot Pessword?
Log On
Not yet registered? Create your user account now.
his site requires, at minimum, Internet Explorer version 6 with 128-bit encryption.

7.11.2 Field Descriptions

Field	Description	Data Type	Length
Create your user account now.	Link to the vendor registration page.	Hyperlink	0
Forgot Password?	Links to window to self-authenticate.	Hyperlink	0
here	Link to PROMIS e^{TM} /LIHEAP Vendor Internet user manuals.	Hyperlink	0
Log On	Initiates the logon validation process.	Button	0
Logon ID	System-assigned Logon ID.	Character	20
Password	Password from user's security profile.	Character	15

7.11.3	Field	Edits
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Field	Error Code	Error Message	To Correct
Log On	0	Incorrect logon information entered.	Reenter your Logon ID and Password.
	1	Invalid User Name or Password.	Reenter your Logon ID and Password.
	2	Your account is disabled.	Contact the system administrator.
	4	Your request cannot be processed at this time, please try again later.	Retry your previous request.
Logon ID	0	Please enter a Logon ID.	Enter a valid Logon ID.
Password	0	Please enter password.	Enter the password for your Logon ID.

7.11.4 Accessibility and Use

To access and use the Logon window, complete the steps in the step/action table(s).

To Access Logon window

Step	Action	Response
1	On the LIHEAP Web site, click the	The PROMISe [™] /LIHEAP Vendor Internet
	PROMISe[™]/LIHEAP Internet link.	Logon window is displayed.

To Logon as an Existing User

Step	Action	Response
1	Type a value in the Logon ID and Password	
	fields.	
2	Click the Log On button.	The LIHEAP Main Menu window
		opens

To Logon as a New User

Step	Action	Response
1	Type a value in the Logon ID and Password	
	fields.	
2	Click the Log On button.	The Account Maintenance window
		opens.

7.12 Reset Password - New Password

The Reset Password - New Password window is linked to through the Forgotten Password process. After a user has successfully self-authenticated, they can reset their password.

7.12.1 Layout



7.12.2 Field Descriptions

Field	Description	Data Type	Length
Cancel	Takes the user back to the main logon page	Button	0
Confirm Password	Password Confirmation field.	Character	8
Password	User logon password.	Character	8
Reset Password	Initiates the reset of the password.	Button	0

7.12.3 Field Edits

Field	Error Code	Error Message	To Correct
Password	1	Your password must begin with an alpha character, be between 6 and 8 characters in length, and contain at least 2 numeric characters.	Enter a valid password
Reset Password	1	Password is a required field and must match. Please re-enter.	Enter the same value for password and password confirmation
	2	Previous passwords are prohibited. Please choose a new password.	Enter a password not previously used

7.12.4 Accessibility and Use

To access and use the Reset Password – New Password window, complete the steps in the step/action table(s).

Step	Action	Response
1	On the LIHEAP Web site, click the	The PROMIS e^{TM} /LIHEAP Vendor
	PROMISe[™]/LIHEAP Internet link.	Internet Logon window is displayed.
2	Click the Forgot Password tab.	The Reset Password – Logon ID
		window opens.
3	Type a value in the Enter your Logon ID	
	field.	
4	Click the Continue button.	The Reset Password – Security
		Information window opens.
5	Vendors Only: Type in your answer for	The Reset Password – New Password
	Question 1 and click the Continue button.	window opens.
	Alternates Only: Type in your answers for	
	Questions 1 & 2 and click the Continue	
	button.	

To Access Reset Password – New Password Window

To Reset Password

Step	Action	Response
1	Type and confirm new password.	
2	Click the Reset Password button.	The password is reset.

7.13 Reset Password - Security Information

The Reset Password - Security Information window is linked from the Reset Password window and assists users in resetting their password. The user is asked to provide two of the three fields below to verify they are the owner of the account. Vendors are asked to provide their FEIN/SSN and answer a single security question. Alternates are asked to answer two security questions.

7.13.1 Layout

R	DEPARTMENT C	lvania F HUMAN SERV		-Income Home Energy Assistance Pro-	gram
<u>[</u>	HS LIHEAP	<u>Logon</u>	<u>Help</u>	Forgot Password?	Monday 24 October 2016 2:32 pm
N c: P le	otice: Before yo annot answer the asswords must b ngth.	u can use the " security quest egin with alpha	'Forget Pass tion, please c a character, l	word" function, you must answ all the Vendor Assistance Ce have at least 2 numbers, and b	ver the security question. If you nter at 800-248-2152 for assistance. be between 6 and 8 characters in
			Passw	ord Reset - Logon ID	
		Enter	r your Logon IC		

7.13.2 Reset Password - Security Information Layout for Alternates

DEPARTMENT	/lvania DF HUMAN SEI		VIICOME Home Energy	Assistance Program		
IS LIHEAP	Logon	Help	v-Income Home Energ Forgot Pass	yy Assistance Prograi word?	Monday 24 Octol	ber 2016 2:32 pm
Notice: Bo	efore you can u swer the securi	use the "Forge rity question. r	et Password" func please call the Ve	tion, you must a ndor Assistance	nswer the security qu Center at 800-248-2	uestion. If you 152 for assistance
Notice: Bi cannot an Password: length.	efore you can u swer the securi s must begin w	use the "Forge ity question, p vith alpha cha	et Password" func please call the Ve rracter, have at lea	tion, you must a ndor Assistance st 2 numbers, ar	nswer the security qu Center at 800-248-2 d be between 6 and	uestion. If you 152 for assistance 8 characters in
Notice: Bo cannot an Password: length.	efore you can u swer the securi s must begin w	use the "Forge rity question, p vith alpha cha Passw	et Password" func please call the Ve racter, have at lea vord Reset - S	tion, you must a ndor Assistance ist 2 numbers, ar ecurity Inforn	nswer the security q Center at 800-248-2 d be between 6 and nation	uestion. If you 152 for assistance 8 characters in
Notice: B. cannot an Password: length. Please a	efore you can u swer the securi s must begin w	use the "Forge ity question, p vith alpha cha Passw	et Password" func please call the Ve rracter, have at lea vord Reset - S	tion, you must a ndor Assistance ist 2 numbers, ar recurity Inforn	nswer the security q Center at 800-248-2 d be between 6 and nation	Jestion. If you 152 for assistance 8 characters in
Notice: Be cannot an Password: length. Please a What is y	efore you can u swer the securi s must begin w nswer the follo our mother's maid	use the "Forge rity question, p vith alpha cha Passw owing security den name?	et Password" func please call the Ve racter, have at lea vord Reset - S r questions:	tion, you must a ndor Assistance st 2 numbers, ar	nswer the security q Center at 800-248-2 d be between 6 and nation	Jestion. If you 152 for assistance 8 characters in
Notice: B cannot an Password: length. Please a What is y What stre	efore you can u swer the securi s must begin w nswer the follo our mother's maid et did you grow u	use the "Forge ity question, p vith alpha cha Passw owing security den name? up on?	et Password" func please call the Ve racter, have at lea vord Reset - S v questions:	tion, you must a ndor Assistance Ist 2 numbers, ar	nswer the security q Center at 800-248-2' d be between 6 and nation	Jestion. If you 152 for assistance 8 characters in

Field	Description	Data Type	Length
(FEIN/SSN)	FEIN or SSN number. Only shown to Vendors.	Character	11
(Security Answer 1)	Answer to first security question.	Character	20
(Security Answer 2)	Answer to second security question. Only shown to alternates.	Character	20
(Security Question 1)	First security question the user selected when their account was created.	Character	50
(Security Question 2)	Second security question the user selected when their account was created. Only shown to alternates.	Character	50
Cancel	Returns the user to the logon without resetting their password.	Button	0
Continue	Verify the information entered and continue to the next reset password new password page if they are correct.	Button	0

7.13.3 Field Descriptions

7.13.4 Field Edits

Field	Error Code	Error Message	To Correct
Continue	0	Please answer both questions.	Complete both security questions.
	1	Information entered does not match data on file.	Please verify the FEIN/SSN and the answer to the security question.

7.13.5 Accessibility and Use

To access and use the Reset Password - Security Information window, complete the steps in the step/action table(s).

Fo Access Reset Password – Security Information Window
Fo Access Reset Password – Security Information Window

Step	Action	Response
1	On the LIHEAP Web site, click the	The PROMIS e^{TM} /LIHEAP Vendor
	PROMISe[™]/LIHEAP Internet link.	Internet Logon window is displayed.
2	Click the Forgot Password tab.	The Reset Password – Logon ID
		window opens.
3	Type a value in the Enter your Logon ID	
	field.	
4	Click the Continue button.	The Reset Password – Security
		Information window opens.
5	Vendors Only: Type in your answer for	The Reset Password – New Password
	Question 1 and click the Continue button.	window opens.
	Alternates Only: Type in your answers for	
	Questions 1 & 2 and click the Continue	
	button.	

Step	Action	Response
1	Type in a value for Question 1 and Question 2	The Reset Password – New
	and click the Continue button.	Password window opens.
2	Type and confirm new password.	
3	Click the Continue button.	The password is reset.

To Reset Password

7.14 Session Expiration Warning

The Session Expiration Warning window is generated by the system to warn vendors when their current PROMIS e^{TM} /LIHEAP Vendor Internet session is about to expire. When five minutes remain of the session, this window pops up and displays the warning message and the time remaining in the current session. To reset the session, press the OK button. The warning message window will close, and the clock will reset to the maximum allowable session minutes.

Users may check their remaining session time prior to the pop up of the warning by looking at the timer in the lower left corner of the PROMIS e^{TM} /LIHEAP Internet windows.

7.14.1 Layout



7.14.2 Field Descriptions

Field	Description	Data Type	Length
OK	Resets the PROMIS e^{TM} Internet session time to the maximum allowable time. The session may be reset multiple times through this OK button.	Button	0

7.14.3 Field Edits

Field	Error	Code	Error	Messa	ige	То	Correct
No Er	ror Co	de Me	ssages	found	for	this	window.

7.15 User Registration

The User Registration window allows a vendor to request access to the PROMIS e^{TM} /LIHEAP Vendor Internet web site. The User Registration window is accessed from the Logon window by clicking the "Create your user account now" hyperlink.

The user must complete the User Registration web form and select the Submit Registration button at the bottom of the page. When all required information is present, the user then proceeds to the Web User Agreement page. The agreement must be signed and submitted before gaining access to the PROMIS e^{TM} /LIHEAP Vendor Internet application.

7.15.1 Layout

Type of Access Required	4: Vendor Vhich access is right for me?
Vendor ID:	(13 digits required)
E-mail Address:	(Example: vendor@fuelcompany.com)
Retype E-mail Address:	
Contact Person:	
Phone Number:	(10 digits)
Enter a password:	
Retype password:	
Vendors and Billing Agents validate your identity:	must enter the SSN or IRS EIN that is registered with your DPW Vendor Number. This required to
SSN:	(OR) IRS EIN:
Select a security question a	nd provide an answer:
Security Question:	What is your mother's maiden name?
Answer:	

Field	Description	Data Type	Length
Answer	User provided answer to the security question selected.	Character	20
Contact Person	The name of the contact person	Character	40
E-mail Address	Email Address of the contact	Character	50
Enter a Password	Password for site access	Alphanumeric	8
IRS EIN	EIN Number registered for the LIHEAP vendor	Number	9
Phone Number	Contact Phone Number	Number	10
Retype Email Address	Confirmation of the email address must match the email address field.	Character	50
Retype password	Confirmation of the password must match the password field	Alphanumeric	8
Security Question	List of valid security questions the user can select.	Drop Down List Box	0
SSN	Social security number registered for the LIHEAP vendor.	Number	9
Submit Registration	Submits the registration form	Button	0
Type of Access Required	Drop down for to select the access type.	Drop Down List Box	0
Vendor ID	The LIHEAP Vendor Number and Service Location Combination	Number	13

7.15.2 Field Descriptions

7.15.3 Field Edits

Field	Error Code	Error Message	To Correct
Answer	0	Please answer the security question.	Select and answer one of the security questions.
Contact Person	0	Contact Person must be given.	Enter a contact person's name
E-mail Address	0	Email addresses do not match please verify and re-enter.	Enter matching email addresses.
	1	Email address and email address confirmation are required. Please enter a value in both fields.	Enter email address.
EIN	0	EIN must be 9 characters	Enter 9 digit numeric EIN
	1	EIN must be numeric	Enter a 9 digit numeric EIN
	2	Please enter either SSN or EIN.	Enter a EIN or SSN

Field	Error Code	Error Message	To Correct
Enter a Password	0	Your password must begin with an alpha character, be between 6 and 8 characters in length, and contain at least 2 numeric characters.	Enter valid password.
	1	Your passwords do not match. Please re-type them.	Enter matching passwords.
	2	Passwords are required.	Enter a password.
Phone Number	0	A contact phone number must be given.	Enter contact phone number.
	1	Phone Number must be numeric	Enter a 10 digit numeric Phone Number
	2	Phone Number must be 10 characters	Enter a 10 digit numeric Phone Number
Retype Email Address	0	Email addresses do not match please verify and re-enter.	Enter matching email addresses.
	1	Email address and email address confirmation are required. Please enter a value in both fields.	Enter email address.
Retype password	0	Your password must begin with an alpha character, be between 6 and 8 characters in length, and contain at least 2 numeric characters.	Enter valid password.
	1	Your passwords do not match. Please re-type them.	Enter matching passwords.
	2	Passwords are required.	Enter a password.
SSN	0	SSN must be 9 characters	Enter 9 digit numeric SSN
	1	SSN must be numeric	Enter a 9 digit numeric SSN
	2	Please enter either SSN or EIN.	Enter a EIN or SSN
Submit Registration	0	Warning: Most users of this system are considered Vendors rather than Billing Agents. If you are sure Billing Agent is correct for your needs select OK, otherwise select Cancel.	User selected Billing Agent account type.
Vendor ID	0	Vendor ID must be 13 characters	Enter 13 digit numeric Vendor ID
	1	Vendor ID must be numeric	Enter a 13 digit numeric Vendor ID

Field	Error Code	Error Message	To Correct
	2	Please enter your Vendor ID. Vendor ID is required.	Enter a Vendor ID

7.15.4 Accessibility and Use

To access and use the User Registration window, complete the steps in the step/action table(s).

To Access User Registration Window

Step	Action	Response
1	On the LIHEAP Web site, click the	The PROMIS e^{TM} /LIHEAP Vendor Internet
	PROMISe[™]/LIHEAP Internet link.	Logon window is displayed.
2	Click the Create your user account now	The User Registration window is
	link	displayed.

To Register

Step	Action	Response
1	Complete the Type of Access Required, Vendor ID,	
	E-mail Address, Retype E-mail Address, Contact	
	Person, Phone Number, Enter a Password, Retype	
	Password, SSN or IRS EIN fields.	
2	Click the Submit Registration button.	The Web User Agreement
		window opens.

7.16 Vendor Active Authorization

The Vendor Active Authorization window is used by vendors to search for active, completed, or in progress crisis authorization numbers. When a vendor searches for a crisis authorization number, the details of that crisis authorization are displayed if it exists for the vendor.

This window is accessed from the LIHEAP Main Menu by clicking the Active Crisis Authorizations link. This window is also accessed from the LIHEAP Main Menu by using the Express Process.

7.16.1 Layout

I pennsylv DEPARTMENT OF H	/ania IUMAN SERVICES	Low-Income Ho	IN THE REAL PROPERTY AS	sistance Prog	Iram		
Account Vouchers (R/	A) <u>Help Log Off</u>	Thurs	sday 20 Octob	er 2016 2:29	pm		
Active Crisis Au	thorization N	umbers					
mit all Clain	ns & Atta	chment	ts with	in 30	davs o	f Autho	orizatio
	,		0200804	0110	,		
	,	teeount. oo	/0200004	0110			
Last Name: First Name: Date Type Issue Date From Date: 10/0	D1/2016 ті	Crisi	is Authorizations:	ın #: [Active Sort Type - One of the second	tion	t Order Newest Didest
2: Select the link for <u>Crisis</u> Authorization # ↑	r the Crisis Author Auth. Crisi Status Auth	rization Numbe	er in order to Last Name	initiate a <u>First</u> Name	Claim Submi: <u>Street</u>	ssion request <u>City</u>	Date Issued
2: Select the link for <u>Crisis</u> <u>Authorization #</u> ↑ <u>8000001613</u>	Auth. <u>Auth.</u> <u>Status</u> Active 500.0	rization Numbe	er in order to Last Name	initiate a <u>First</u> <u>Name</u> ALLEN	Claim Submis <u>Street</u> 321 NEW STREET	ssion request <u>City</u>	Date Issued
2: Select the link for <u>Crisis</u> <u>Authorization #</u> ↑ <u>8000001613</u> <u>8000001612</u>	r the Crisis Author Auth. Crisis Status Auth Active 500.0 Active 500.0	rization Numbe	er in order to <u>Last</u> <u>Name</u>	First Name ALLEN DAVID	Claim Submi: Street 321 NEW STREET 321 NEW STREET	ssion request <u>City</u>	Date Issued
2: Select the link for <u>Authorization #</u> ↑ <u>8000001613</u> <u>8000001612</u> <u>8000001611</u>	Auth. Crisis Author <u>Auth. Author</u> <u>Status</u> Author Active 500.0 Active 500.0 Active 500.0	rization Numbe	er in order to Last Name B	Initiate a	Claim Submis Street 321 NEW STREET 321 NEW STREET 321 NEW STREET	city	Date Issued
2: Select the link for <u>Authorization #</u> ↑ <u>8000001613</u> <u>8000001612</u> <u>8000001611</u> <u>8000001610</u>	Auth. Status Crisis Auth Auth Aution Active 500.0 Active 500.0 Active 500.0 Active 500.0 Active 500.0 Active 500.0 Active 500.0	rization Numbe	Last Name B	initiate a First Name ALLEN DAVID ENEDICT IORGAN	Claim Submi Street 321 NEW STREET 321 NEW STREET 321 NEW STREET 321 NEW STREET	city	Date Issued

7.16.2 Field Descriptions

Field	Description	Data Type	Length
Account	ID of the vendor.	Character	13
Acct # (results)	The Vendor's Customer Account Number.	Character	15
Auth. Status	Status of the crisis authorization number.	Character	11

Field	Description	Data Type	Length
City (results)	The Recipient's City.	Character	16
Crisis AUTH Amount (results)	The total dollar amount allocated to the Crisis Authorization.	Numeric (with 2 decimal positions)	8
Crisis Authorization # (input)	Filters the search results by crisis authorization number.	Number	10
Crisis Authorization # ID (results)	Displays the associated crisis authorization number for the search results.	Number	10
Date Issued (Results)	Date the crisis authorization number was issued	Date (CCYYMMDD)	8
First Name (input)	Filters the search results by recipient first name.	Character	11
First Name (results)	Recipient first name associated with the crisis authorization number.	Character	11
From Date (Input)	Beginning date of search.	Date (MM/DD/CCYY)	10
Issue Date	Date the crisis authorization number was issued.	Radio Button	0
Last Name (input)	Filters the search results by recipient last name.	Character	14
Last Name (results)	Recipient last name associated with the crisis authorization number.	Character	14
Reset	Resets the search criteria fields back to their default values.	Button	0
Search	Searches database for the desired record.	Button	0
Sort Order (Ascending)	Sorts the results in ascending order.	Radio Button	0
Sort Order (Descending) (Default)	Sorts the results in descending order.	Radio Button	0
Sort Type (Authorization) (Default)	Sorts the results by authorization number.	Radio Button	0
Sort Type (Status)	Sorts the results by status.	Radio Button	0
Status	Status of the crisis authorization number request. Valid values are "Active", "All", "Completed", and "In Progress". Active is the default.	Character	11
Street (results)	The Recipient's Street address.	Alphanumeric	26

Field	Description	Data Type	Length
Thru Date (Input)	Ending date of search.	Date	10
		(MM/DD/CCYY)	

7.16.3 Field Edits

Field	Error Code	Error Message	To Correct
From Date	0	The from date Month is invalid.	Enter a valid month.
	1	Please specify Delivery Dates Range while searching with First Name and Last Name.	Enter a From Date and a Thru Date
Recipient Name	0	Please specify both First Name and Last Name	Enter both recipient First Name and Last Name.
	1	Please specify Delivery Dates Range while searching with First Name and Last Name.	Enter a delivery date range.
Search	0	Please specify Recipient Name, Crisis Authorization #, enter a Date Range or Status	Enter at least one of the specified fields.
Thru Date	0	Thru date must be later than From Date.	Enter a Thru date later then the From date.
	1	The thru date Day is invalid.	Enter a valid day.

7.16.4 Accessibility and Use

To access and use the Vendor Active Authorization window, complete the steps in the step/action table(s).

To Access Vendor Active Authorization Window

Step	Action	Response
1	Logon to PROMIS e^{TM} /LIHEAP Vendor	The LIHEAP Main Menu window opens.
	Internet	
2	Click the Active Crisis Authorizations	The Vendor Active Authorization window
	link	opens.

To Search for a Crisis Authorization

Step	Action	Response
1	Type a value for the Last Name and	
	First Name fields, or the Crisis	
	Authorization # field.	
2	Click the Search button.	If a match is found, the search results list is
		displayed.
3	Click the Crisis Authorization #	The Claim Attachment Number Request window
	link.	opens, with the Recipient Name and selected
		Crisis Authorization Number pre-populated.

Search Combinations

The following search field combinations can be used to pull up a crisis authorization number:

- Crisis Authorization Number
- Last Name, First Name, and Date Range (maximum 365 days)
- Date Range (maximum 31 days), Status (select one: Active, Completed, In Progress)

7.17 Vendor Claim Attachment Number Request

The Vendor Claim Attachment Number Request window is used by vendors to request new or view prior attachment control numbers (ACNs). The ACN is used by vendors to allow paper attachment forms to be submitted with an electronic claim. A cover form with the ACN accompanies the trip ticket or shutoff notice. The ACN on the cover form must match the ACN entered on the related electronic claim.

If a vendor searches on an ACN, the details of that ACN are displayed if it exists for the vendor.

The Request button returns a new claim ACN as a link in a group box that appears at the bottom of the window. To print the associated Paper Attachment to Electronic Cover Sheet, click the Print Form button. The cover sheet opens in an Adobe PDF format, and can be printed from the Adobe page.

The Search button returns all records associated with the crisis authorization number identified for the search.

This window is accessed from the LIHEAP Main Menu by clicking the Attachment Control Numbers link. This window is also accessed from the LIHEAP Main Menu through the Express Process. Search for and select a crisis authorization number and click. Click on the Search/Request Attachment Control Number link.

NOTE: The user must have the Adobe Acrobat Reader application to print the cover sheet. If not already installed on the user's system, a free copy of Adobe Acrobat Reader is available by clicking the Adobe icon on the window.

7.17.1 Layout

DEPARTMENT OF HUMAN SERVICES							
Main Account Vouchers (K	RA) <u>Help Log Off</u>	Thursday 20 Oct	ober 2016 2:33 pm				
Vendor Claim Attachm	ent Number Req	uest					
		Acco	ount: 3002908	940110			
	Step 1: 1. Request an requested:	Attachment Control N	lumber (ACN), or se	arch for an existing A	CN that has already	been	
	Request and Searc Last Name First Name Crisis Authorization #	h Criteria DAVID 8000001612		Attachmen	t Control Number		
		Request		Search			
	Step 2 Options: Mail/Fax (If mailing/faxing attachments follow the steps below) 1. Select "Print Form" (under "Attachment Control Number") to view and print the desired ACN Form 2. Retain the printed ACN Form for later use 3. Select "Continue" (under "Online Claim") to submit a new claim 4. After submitting the claim, mail the printed attachments (and the ACN form) to the address indicated on the cover sheet OR fax the printed attachments (and the ACN form) to the fax number provided on the DHS LIHEAP website Submit/Re-Submit Attachment(s) (If electronically submitting attachments follow the steps below) 1. Select "Submit Attachment(s)" to upload attachments OR Select "Re-Submit Attachment(s)" to resend attachments (ACN Form will be systematically generated and transmitted) 2. Select "Continue" (under "Online Claim") to submit a new claim						
	IMPORTAN	T: Do NOT print t	his page to send	in with your attac	hments!		
Attachment Control Number	Status	Crisis Authorization # ID	Last Name	First Name	Date Issued	Date Received	Online Claim
Print Form OR Submit Attachment(s)	ISSUED	8000001612		DAVID		D	Continue
To view and print the ACN form, you will need to install the Acrobat Reader software:							

The window Layout below displays the PROMIS e^{TM} /LIHEAP Paper Attachment to Electronic Claim Cover Sheet.

🔁 ACNAttachment.pdf - Adobe Reader						
File Edit View Window Help	ډ					
🗁 Open 🤤 🔁 📝 🎧 🖹 🖨 1 / 1	75.7% 🔻 📄 🔻 Tools Fill & Sign Comment					
PF PF	PROMISe™					
<i>A</i>						
LIHEAP Paper Attack	chment to Electronic Claim over Sheet					
1 Crisis Authorization Number	er 8 0 0 0 0 0 1 3 5 2					
2 Vendor Number	0 0 0 6 6 4 4 6 8					
3 Service Location	0 0 0 4					
4 Recipient Last Name	Bio Bio Bio Bio Bio Bio Bio Bio					
5 Recipient First Name	JORDAN					
6 Attachment Control Number	r 8 0 0 0 0 3 3 8 5					
IMPORTANT: DO NOT WRITE IN THE TOP MARGIN OF THIS COVER SHEET						
This cover sheet identifies a specific crisis authorization and must be included when submitting the attachment (metered trip ticket or shut off/reconnection notice) by fax or US mail.						
Do not send the same claim by multiple methods (such as fax AND mail). If documentation was uploaded to PROMISe, do not resubmit it by fax or mail. Resubmissions cause processing delays. Call the toll-free LIHEAP Vendor Helpline at 1-877-537-9517 if you have questions about a crisis claim.						
 Organize your information: Write the Attachment Control Number Place the pre-populated cover sheet When faxing – limit faxes to no more 	 Organize your information: Write the Attachment Control Number (ACN) or Crisis Authorization Number on the attachment Place the pre-populated cover sheet on top of every corresponding attachment. When faxing – limit faxes to no more than 30 sheets of paper per transmission. 					
2. Submit documentation by one of these	2. Submit documentation by one of these methods:					
- Fax: (717) 207-7997 or (717) 207-79	- Fax: (717) 207-7997 or (717) 207-7994					
- Mail: Department of Human Services	- Mail: Department of Human Services, LIHEAP Crisis Claims, PO Box 69028, Harrisburg, PA 17106					
NOTE: Never use staples or paper clips	s when submitting documentation by mail.					
	Revised 9/29/15					
•						

Field	Description	Data Type	Length
Account	ID of the vendor requesting an attachment control number.	Character	13
Attachment Control Number (input)	Filters the search results by attachment control number (ACN).	Number	9
Attachment Control Number (results)	Attachment control number shown in the search results list.	Number	9
Continue	Opens the associated LIHEAP claim.	Button	0
Crisis Authorization #	Filters the search results by crisis authorization number, or for use in requesting a new attachment control number.	Number	10
Crisis Authorization # ID	Displays the associated crisis authorization number for the attachment control number.	Number	10
Date Issued	Date the vendor requested the attachment control number through the Internet.	Date (CCYYMMDD)	8
Date Received	Date the paper attachment for an electronic claim was received.	Date (CCYYMMDD)	8
First Name (input)	Filters the search results by recipient first name, or for use in requesting a new attachment control number.	Character	11
First Name (results)	Recipient first name associated with the claim for which the ACN was requested.	Character	11
Last Name (input)	Filters the search results by recipient last name, or for use in requesting a new attachment control number.	Character	14
Last Name (results)	Recipient last name associated with the claim for which the ACN was requested.	Character	14
Print Form	Opens the Paper Attachment Control Number form for printing.	Button	0
Request	Returns a new attachment control number.	Button	0
Search	Searches database for the desired record.	Button	0
Status	Status of the attachment number request. Valid values are "Issued" and "Received".	Character	8
Submit Attachment(s)	Opens the Crisis Attachment Upload page	Button	0

7.17.2 Field Descriptions

7.17.3 Field Edits

Field	Error Code	Error Message	To Correct
Last Name	0	Last Name is required	Enter a recipient Last Name.
First Name	0	First Name is required	Enter a recipient First Name

7.17.4 Accessibility and Use

To access and use the Vendor Claim Attachment Number Request window, complete the steps in the step/action table(s).

To Access Vendor Claim Attachment Number Request Window

Step	Action	Response
1	Logon to PROMISe TM /LIHEAP Vendor	The LIHEAP Main Menu window opens.
	Internet	
2	Click the Attachment Control	The Vendor Claim Attachment Number
	Numbers link	Request window opens.

To Request a New Claim Attachment Number

Step	Action	Response
1	In the Criteria section, type a value for the Last Name,	
	First Name, and Crisis Authorization # fields.	
2	Click the Request button.	A new claim attachment
		number is displayed.

To Search for an Existing Attachment Control Number

Step	Action	Response
1	In the Criteria section, type a value for the Last	
	Name and First Name fields, or the Crisis	
	Authorization # field, or the Attachment Control	
	Number field.	
2	Click the Search button.	If a match is found, the details of
		that attachment control number
		will be displayed for the vendor.

Search Combinations

The following search field combinations can be used to pull up an attachment control form:

- Attachment Control Number
- Crisis Authorization Number
- Last Name and First Name

To Submit Electronic Attachment(s)

Step	Action	Response
1	Click the Submit Attachment(s) button.	The Crisis Attachment Upload page opens.

7.18 Vouchers (RA) Search

The Vouchers (RA) Search allows you to search LIHEAP Remittance Advices (RAs or Vouchers) using either the Voucher Number, or by Treasury Pay Date.

All vendors who have secure access to $PROMISe^{TM}$ are able to view/download/save their weekly RAs via the <u>LIHEAP web site</u> at their discretion.

7.18.1 Layout – Voucher Number

Pennsylvania DEPARTMENT OF HUMAN SERVICES
Main Account Vouchers (RA) Help Log Off Thursday 20 October 2016 3:12 pm
Voucher (RA) Search
Vendor ID: 3002908940110
Select Search Type
Over Number O Treasury Pay Date
Voucher Number:
Search Reset

7.18.2 Layout – Treasury Pay Date

Pennsylvania DEPARTMENT OF HUMAN SERVICES Low-Income Home Energy Assistance Program
Main Account Vouchers (RA) Help Log Off Monday 24 October 2016 11:03 am
Voucher (RA) Search
Vendor ID: 3002908940110
Select Search Type
○ Voucher Number
From Date: Thru Date:
Search Reset

After performing the search, the voucher will display.

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF HUMAN SERVICES		Provider Paymer	its (LIH610-R	:04)			Report Generate Page 1 Of 4	id: 4/30/2016
Provider		VOUCHER NUMBER :						
800290894 - 0110		TRACE ID/DSN: 000170	000179558					
1302 CAMP HILL BYPASS		TREASURY PAY DATE	05/11/2016					
SAMP HILL, PA 17011		PERIOD: 4/22/2016 - 4/	28/2016					
PAYMENT DETAILS - CASH					PA			
Advance Payment		0		s	0.00			ADV
	FIRST	ADDRESS	СПТУ	8T 7	1P CO D	INDIV	TYPE	TRANS
Total For Cash: ADV		0			\$0.00			
PAYMENT DETAILS - CRISIS REGULAR								
AUTH ID. ICN# ACCOUNT	NO. AMOUNT BILLED	AMOUNT NAM PAID	E	ADDRESS	CO/D	INDIV	DLVR	Y
54321	\$132.88	\$132.88	1234 COAI 1403	W INDEPENDEN TOWNSHIP PA	CE ST 49/D 17866	120123456	3/18/2016	
Fotal For Crisis Regular:		1		c	risis Dollars:			132.88
							DAY MODE	
PAYMENT DETAILS - CRISIS ADDITIONAL P	AYMENIS						PAY MODE:	
ACCOUNT NO. AMOUNT	NAME	ADDRESS		CO/D	INDIV	SERVICE DATE	TYPE	
Fotal For Crisis Additional:		0		Crisis	Dollars:			
Fotal For Crisis:		1		Crisis	Dollars:			\$132.8
RECOUPMENT DETAILS - CASH								
ACCOUNTINO. AMOUNT LAST	FIRST	ADDRESS	СІТҮ	ST Z	IP CO D	INDIV	VOUCHER	ł
Total For Cash:		0	Cash Dollar	5:				
Total Pol Cash.								

7.18.3 Field Descriptions

Field	Description	Data Type	Length
From Date	Users enters the From Date for the Treasury Pay Date	Date (MM/DD/CCYY)	8
Reset	Resets the form to display the default information.	Button	0
Search	Searches database for the desired record.	Button	0
Thru Date	Users enters the Thru Date for the Treasury Pay Date	Date (MM/DD/CCYY)	8
Treasury Pay Date	Select to search by Treasury Pay Date	Radio Button	0
Voucher Number	User enters the voucher number being searched for	Character	10
Voucher Button	Select to search by voucher number	Radio Button	0

7.18.4 Field Edits

Field	Error Code	Error Message	To Correct
From Date	0	From Date is required	Enter the From Date.
	1	Please enter a valid date.	Enter a valid date in the MM/DD/YYY format

Field	Error Code	Error Message	To Correct
Thru Date	0	Please enter a valid date.	Enter valid date in the MM/DD/YYYY
			format
	1	Thru date must be later than	Enter valid date occurring later than
		From Date	the From Date
Voucher Number	0	Voucher # is required.	Enter a valid voucher number.
	1	Voucher # must be numeric	Enter a numeric voucher number.

NOTE: If the Thru Date is not completed, the search will be performed for the single date entered in the From Date field.

7.18.5 Accessibility and Use

To access and use the Vouchers (RA) window, complete the steps in the step/action table(s).

To Access Vouchers (RA) Window

Step	Action	Response
1	Logon to PROMISe [™] /LIHEAP Vendor Internet	The LIHEAP Main Menu window
		opens.
2	Click the Vouchers (RA) link	The Vouchers (RA) window opens.

To Search by Voucher Number

Step	Action	Response
1	Selected the radio button for Voucher	The Voucher Number search box displays
	Number.	
2	Enter the Voucher Number being	
	searched for.	
3	Click the Search button	The list of applicable voucher numbers will
		display

To Search by Treasury Pay Date

Step	Action	Response
1	Selected the radio button for Treasury	The From Date and Thru Date search boxes
	Pay Date.	display
2	Enter the From Date and Thru Date	
3	Click the Search button	The list of applicable voucher numbers will
		display

7.19 Web User Agreement

The Web User Agreement window is displayed after a user registers for Internet access, or upon the user's initial log in. This window presents a Statement of Entitlement that outlines an agreement the user is required to read and sign to be granted access to the web site. The typed name in the Signature field is the electronic equivalent of the user's signature. If the agreement is not signed, the user is logged out of the system and returned to the Logon window.

7.19.1 Layout

	Statement of Entitlement
By entering my form electronic herein, and I a and accurate relating to uns that misstating subject me to pursuant to 1 Crimes Code.	/ full name in the space provided below and transmitting this cally, I state, I am the person whom I represent myself to be affirm the information within this web application is complete and made subject to the penalties of 18 Pa.C.S. §4904 sworn falsification to authorities. In addition, I acknowledge my identity or assuming the identity of another person may misdemeanor or felony criminal penalties for identity theft 8 Pa.C.S. §4120 or other sections of the Pennsylvania

7.19.2 Field Descriptions

Field	Description	Data Type	Length
Signature	User enters their name as a signature to agree with the statement.	Character	50
Submit	Submits the signature and continues the logon process.	Button	0

7.19.3 Field Edits

Field	Error Code	Error Message	To Correct
Signature	0	You have not signed the agreement. Please enter your	Enter name to accept
		name to acknowledge the agreement.	and continue.
Submit	0	Not on file. Press OK to return to the logon page.	Verify the vendor ID
			entered is correct.
	1	Already has an established internet account setup.	Contact the PROMIS e^{TM}
		Press OK to return to the logon page.	web security help desk.
	2	You have successfully registered for the PROMIS e^{TM}	Successful response.
		web site. Press OK, then enter your new logon	
		information to access the web site	

7.19.4 Accessibility and Use

To access and use the Web User Agreement window, complete the steps in the step/action table(s).

To Access Web User Agreement Window
Step	Action	Response
1	Click the Create Your User Account Now link if you are a new	The User
	user.	Registration
		window opens.
2	Complete the Type of Access Required, Vendor ID, E-mail	
	Address, Retype E-mail Address, Contact Person, Phone	
	Number, Enter a Password, Retype Password, SSN or IRS EIN	
	fields. Select a Security Question and type a value in the Answer	
	field.	
3	Click the Submit Registration button.	The Web User
		Agreement
		window opens.

To Accept User Agreement

Step	Action	Response
1	Type your name in the space provided.	
2	Click the Submit button.	Returns to the initial Logon screen.

To Reject User Agreement

Step	Action	Response
1	Do not type your name in the space provided.	
2	Click the Submit button.	The user is logged out of the system.

8 Claims Disposition

When the claim comes into the system, initial edits are used to enforce policy, pricing, and to check for valid field formats and numbers. An Error Status Code (ESC) is posted to the claim to indicate that an action had occurred in the processing of the claim to alter the expected outcome. Dispositions can cause a claim to pay, deny, or suspend. Suspended claims are held pending additional information, either to receive the supporting documentation or for manual review by DHS.

ESC	Description	Disposition
508	Total charge does not equal the sum of all line charges	Deny
554	Billed date less than dates of service on the claim	Deny
605	ACN not on file	Deny
606	ACN already issued for another claim	Deny
4021	Recipient not eligible for service provided	Suspend
4044	Procedure code not compensable for provider type/specialty	Deny
4200	Claim paid at zero	Pay and List
5001	Invoice claim line is a duplicate	Deny
5004	Claim is a duplicate of a previously paid claim.	Deny
6100	Claim/Attachment past filing limit	Pay and List
6101	Delivery date prior to season start date	Deny
6102	Delivery date prior to crisis authorization approval date	Pay and List
6103	Delivery date after season end date	Deny
6104	Required attachment not received/Finalized	Suspend
6105	Auth/ACN info does not match claim info	Deny
6106	Cash authorization within 30 days	Pay and List
6107	Crisis authorization not found	Deny

The following is a table of ESCs that may be received when submitting LIHEAP claims.

ESC	Description	Disposition
6108	Crisis seasonal benefit amount exceeded	Suspend
6109	Crisis utility authorization amount exceeded	Suspend
6110	Crisis authorization already paid	Deny
6111	New claim exists for this attachment number	Deny
6112	Claim amount is less than \$25	Pay and List
9011	Claim denied because at least one detail was denied	Deny