

Agency Name (or County if county staff)

Fax

	For All Users a) Name [Last, First, Middle Init	g) Agency #'s or County	
~	b) Phone number	c) E-mail address	
Step 1	d) User status	e) Select user type(s)	
	 Remove User Add/Change User Type Add Agencies for User 	□ TARGET - Reports	
	f) User Signature	1	

Step 2	For All Users	h) Date
	This form must be signed by the treatment Agency Director or, for county	i) Print Name
	staff, by the County Drug and Alcohol Coordinator	j) Authorizing Signature

	For ATR Users Only: Fax to County Alcohol and Drug Coordinator	I) Date
Step 3	k) ATR user type □ RSS □ RSS-Data Entry Only	m) Print Name
	 ATR Interview Only – Data Entry (GPRA) ATR County Rate Manager/Provider List Manager 	n) Signature of County Coordinator

	For All Users	
ep	Please Mail to: HCA Division of Behavioral Health and Recovery, TARGET2000	
St	Helpdesk, PO Box 42711, Olympia, WA 98504 or Fax to (360) 763-4701.	

Agency Registration

The Target Agency Registration Form is used to manage access and user rights on the Target system. Each person that wishes to use Target must complete this form and have it signed by either their agency director or, for county staff, by the County Alcohol and Drug Coordinator.

This form is also used to request that a user's access to Target be revoked if the user changes positions or leaves the employment of the agency or county.

With the exception of Step 3, which is conditionally required, please fill out all portions of this form.

Step 1

d) User Status Definitions:

New User: Select this option for new users to Target

Remove User: Remove access for selected user

Change User Type: Add or change user rights

Add Agencies for User: Add access to more agencies for selected user

e) User Type Definitions:

TARGET Data Entry: Able to input data and run reports

TARGET Reports: Reports only, no data entry

ATR: (Access To Recovery) Able to perform the various ATR functions. If you select this then Step 3 must be completed as well.

g) Agency #s or County

Agency Number: If the user works at a treatment agency, enter the six-digit "Greenbook" number for the agency or agencies for which access is to be given

County: If the user works for the county, enter the name of the appropriate county

Step 2

i,j) Authorizing Signature

Printed name and signature of the treatment agency director or, for county staff, by the County Drug and Alcohol Coordinator.

Step 3

This section must be completed if the user is requesting access to ATR functionality within Target. All other users may skip this section.

k) ATR User Type

RSS: Authorizes services, creates vouchers, documents eligibility, add and edit recovery plan, interviews (GPRA's), ATR reports

RSS – Data Entry Only: Creates vouchers, documents eligibility, add and edit recovery plan, interviews (GPRA's)

ATR Interview Only – DATA Entry (GPRA): access to interview screens (GPRA) for data entry ATR County Rate Manager/Provider List Manager: Add and change the County Rate Table and the Provider list

m,n) Signature of County Coordinator

The printed name and signature of the Drug and Alcohol Coordinator in your county or another person specifically authorized to approve ATR access must be obtained.

Step 4

Once this form is received by HCA it will be processed. Any return correspondence will be sent to the fax number provided in the initial section of the form.

Secure Access Washington(SAW): <u>https://secureaccess.wa.gov</u> TARGET Forms and Documentation:

https://www.hca.wa.gov/billers-providers-partners/behavioral-health-recovery/target

Please contact the **TARGET Help Desk** at **888-461-8898** or **360-725-1111** if you have any questions.