Texas Unified Licensure Information Portal (TULIP)
Training Guide

August 20, 2018
Version 3.0
1. TRAINING GUIDE OVERVIEW: TULIP PORTAL

This training guide is organized into the following major components:

- **Portal Navigation**: login & registration, user management, general navigation, and settings
- **Applications**: create, upload documents, review deficiencies, pay for, and submit an application
- **Account Updates**: submit a change that does not incur a fee
- **Facility / Agency Management**: manage a facility or agency account after application submission or license approval. This section details the following:
  - How to upload a document to your facility or agency account
  - How to renew existing licenses
  - How to submit and edit a monthly resident death report
  - How to access the Incident Self Reporting Portal

Please note that TULIP is optimized for Google Chrome and should be used in this browser whenever possible.
# CONTENTS

TULIP PORTAL PROVIDER TRAINING GUIDE ................................................................. 2

1. TRAINING GUIDE OVERVIEW: TULIP PORTAL ...................................................... 2

  1.1 PROVIDER REGISTRATION AND LOGIN ................................................................ 4

   1.1.A. Overview ........................................................................................................ 4

   1.1.B. Create a Provider Account ............................................................................ 4

   1.1.C. Log in as a Provider ....................................................................................... 6

   1.1.D. Granting Access to New Users ...................................................................... 8

   1.1.E. Manage Provider Access .............................................................................. 10

  1.2 PORTAL NAVIGATION ......................................................................................... 12

   1.2.A. Homepage .................................................................................................... 12

   1.2.B. Application Statuses .................................................................................... 13

   1.2.C. Application Types ......................................................................................... 14

  1.3 APPLICATIONS ................................................................................................... 16

   1.3.A. Overview ....................................................................................................... 16

   1.3.B. Submit an Agency Application ...................................................................... 19

   1.3.C. Submit a Facility Application ....................................................................... 35

   1.3.D. Renew an Existing License ......................................................................... 55

   1.3.E. Address Deficiencies After Submission .................................................... 57

   1.3.F Account Updates .......................................................................................... 60

  1.4 FACILITY / AGENCY MANAGEMENT ................................................................. 63

   1.4.A. Overview ....................................................................................................... 63

   1.4.B. Upload a Form ............................................................................................... 63

   1.4.C. Submit a Resident Death Report ............................................................... 66

  1.5 ADDITIONAL FUNCTIONALITY ......................................................................... 70

  1.6 CONTACT HHS ................................................................................................. 71
1.1 PROVIDER REGISTRATION AND LOGIN

1.1.A. OVERVIEW

1.1.B. CREATE A PROVIDER ACCOUNT

Once on the Registration page, providers can select from three paths:

1. If they do not already have a TULIP account, users will first be prompted with the question “Have you or a representative of your business completed first time registration?” If “Yes”, search for your Business Entity. Enter the user-specific details below and select the “Submit” button when finished.
2. If they do not already have a TULIP account, you will first be prompted with the question “Have you or a representative of your business completed first time registration?” If “No”, you will still the user-specific details below. In addition, the user will need to disclose the following four items:

a. Representation: Disclose whether you represent one or more facilities, one or more agencies, or both facilities and agencies.

b. Consultancy: Check this box if you are a consultant. This will add minor restrictions to your account to ensure your employer is legally responding to attestations.
c. Outside Ownership: Select “Yes” if your business is owned by another legal entity. If you select “Yes”, additional fields will display. If you have been provided with a registration code(s), enter those here. If you do not have a registration code, select “No” and proceed.

![TULIP Registration Page - Outside Ownership](image)

Figure 5. TULIP Registration Page - Outside Ownership

d. Security Authority: Identify whether you are the single individual that will approve / reject access requests on behalf of your business. If you select “No”, you will be prompted to enter the user-specific details for the designated Security Authority.

When you have completed the Registration page, click “Submit”. An email will be sent confirming your registration and prompting you to log in with credentials. Please note this email may take up to 30 minutes to arrive.

3. If you are a returning TULIP user, select the “Already have an account?” link under the Texas Health and Human Services logo to log into TULIP with your existing provider credentials. Skip to section 1.1.C. below.

1.1.C. LOG IN AS A PROVIDER

It is highly recommended that providers bookmark the login screen for easy access to their TULIP account portal. To log in, enter your username and password.

From this initial login page, you may navigate back to the initial registration page (Section 2.1.2.B., “Create a Provider Account”) by selecting the “Not a member?” link.
Resetting your password

If you have forgotten your password, select the “Forgot your password?” link from the screen above, just under the login fields. You will be prompted to enter your username (the email address used to register). The following screen will display, allowing you to return to the login screen or resend the password reset email.
Additional TULIP Information

HHSC maintains a webpage to host the most updated information regarding TULIP. Access this webpage by clicking the link at the bottom of the login screen that reads, “Click here for additional information about TULIP”.

![TULIP HHSC Webpage Link](image)

Figure 8. TULIP HHSC Webpage Link

1.1.D. GRANTING ACCESS TO NEW USERS

To grant portal access to new users or remove old users, the Security Authority must first log into their Salesforce TULIP account. Once logged in, the Security Authority will navigate to Manage Users in their provider portal. If someone other than the Security Authority logs into TULIP, they will not see a Manager Users option.
A list of recently viewed contacts will be displayed. Use the dropdown list on the left side of the page to change views.

- The Pending Approval list will display users waiting for approval to the user group they wish to join. To take action on a pending user, click on the user. You will see three buttons on the record: Approve, Reject, and Deactivate.

- The Active Users list allows Security Authorities to deactivate and manage users.
- The Deactivated Users list allows Security Authorities to reactivate and manage users.
1.1.E. MANAGE PROVIDER ACCESS

To manage access, the Security Authority must first log into their Salesforce TULIP account.

A list of Entity Access records will be displayed. An Entity Access record describes the relationship between a user and an entity. Use the dropdown list on the left to change views.
Edit and delete access records using the dropdown arrows to the right of each line item record.

*Note: Selecting “Delete” for an entity access record will remove access for that particular entity. Selecting this button does not delete the entity from existence.*

**Link an existing entity to an existing user in TULIP**

To tie an existing entity to an existing user, follow the steps outlined below. If the user or entity you wish to link is not yet created, please reference **Section 1.1.B. Create a Provider Account** to register a new account.

1. Select the “New” button from the Entity Access page above. A New Entity Access Record box will open.

2. Search and select the account and the contact you wish to link. Use the checkboxes provided to designate whether a user is also a Security Authority and whether they have permissions to submit applications on the entity’s behalf. Click “Save” when you are finished.
Note: There is no limit on how many Security Authorities can be designated for a given entity; the number of Security Authorities allowed for a given provider entity is up to the discretion of the provider entity.

1.2. PORTAL NAVIGATION

1.2.A. HOMEPAGE

The image below is an example of a provider homepage, the screen you will see when you first log into the TULIP portal. From here you can submit applications, update resident death reports, upload forms, view account details, and address deficiencies. To return to this page from anywhere in the portal, simply select the Home icon on the leftmost side of the page banner.

Figure 15. TULIP Provider Homepage

The following sections can be found on a provider homepage:

- **Pending Provider Action**
  The Pending Provider Action list displays either incomplete or pending payment applications. This list also displays applications marked with the status “Response Required” (used to denote items that must be completed by a provider as soon as possible).

- **Previously Submitted Applications**
  All submitted applications will be added to this list. Users can see the date submitted and status of the submitted application. For more information on application statuses, see Section 1.2.A. Application Statuses directly below.

- **Facility / Agency Details**
If you manage multiple or a blend of facilities and agencies, you can toggle between the various providers to quickly reference their details by selecting the provider name from the dropdown list. If you would like to change the details you see listed, clicking the “Update” button will direct the user to the application list to submit a Change of Information. **It is imperative that providers ensure the accuracy of the contact information on file with HHSC for each of their licensed entities.**

- **Other Actions**

The Other Actions section features links on the righthand side of the homepage. From these links, providers can submit and manage resident death reports, upload a form, or access the external Self Reporting Incident Portal. Security Authorities will also see links to Manage Users and Manage Facility/Agency Access.

For details on these links, see **Section 1.5. Facility / Agency Management.**

### 1.2.B. APPLICATION_STATUSES

All applications will feature a status to communicate the stage at which an application sits in processing. The following statuses will help providers track the progress of their TULIP applications:

<table>
<thead>
<tr>
<th>Status</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>NEW</td>
<td>An application has been created and is in data entry progress.</td>
</tr>
<tr>
<td>READY TO SUBMIT</td>
<td>All required fields have been completed on the application and it is ready for payment and submission.</td>
</tr>
<tr>
<td>SUBMITTED PAYMENT PENDING</td>
<td>Payment has been submitted or mailed. The application will not be processed until payment is sent and cleared.</td>
</tr>
<tr>
<td>SUBMITTED</td>
<td>An application has been submitted and is under initial review. This application has not completed deficiency review.</td>
</tr>
<tr>
<td>COMPLETE</td>
<td>A Licensing Specialist has requested all necessary information through the deficiency review period and has moved onto the next stage of processing.</td>
</tr>
<tr>
<td>RESPONSE REQUIRED</td>
<td>The application requires a response or action from the provider as soon as possible to proceed with processing.</td>
</tr>
<tr>
<td>DENIED</td>
<td>The submitted application has been denied by HHS.</td>
</tr>
<tr>
<td>WITHDRAWN</td>
<td>Marks an application that has been withdrawn by the provider.</td>
</tr>
<tr>
<td>EXPIRED</td>
<td>A renewal application was automatically generated but not submitted before license expiration. See <strong>Section 1.3.D. Renew an Existing License</strong> for more information.</td>
</tr>
<tr>
<td>Status</td>
<td>Description</td>
</tr>
<tr>
<td>--------------------------------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>APPROVED / LICENSE ISSUED</td>
<td>A license has been issued and mailed to the provider based on an approved application.</td>
</tr>
<tr>
<td>CERTIFICATION GRANTED</td>
<td>A certification has been granted and mailed to the provider based on an approved application.</td>
</tr>
</tbody>
</table>

### 1.2.C. APPLICATION TYPES

The following application types are offered through TULIP.

<table>
<thead>
<tr>
<th>Agency or Facility</th>
<th>Application Number</th>
<th>Application Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility</td>
<td>3720</td>
<td>Account Update</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Capacity Increase/Decrease</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Management Company</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Relocation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Shares Transfer</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change of ICF/IID Administrator</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change of Ownership (CHOW)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Initial</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Initial – New Construction Provisional</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Reactivate (Bed Suspension)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Real Estate Change</td>
</tr>
<tr>
<td>Facility</td>
<td>3720-N</td>
<td>Account Update</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Capacity Increase/Decrease</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Management Company</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Relocation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Shares Transfer</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change of ICF/IID Administrator</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change of Ownership (CHOW)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Initial</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Initial – New Construction Provisional</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Reactivate (Bed Suspension)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Real Estate Change</td>
</tr>
<tr>
<td>Agency or Facility</td>
<td>Application Number</td>
<td>Application Type</td>
</tr>
<tr>
<td>--------------------</td>
<td>--------------------</td>
<td>------------------</td>
</tr>
<tr>
<td>Facility</td>
<td>3720-P</td>
<td>Account Update</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Capacity Increase/Decrease</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Admin/CFO</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Operating Hours</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Relocation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change of Ownership (CHOW)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Initial</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Management Company</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Real Estate Change</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Transfer of Ownership Interest</td>
</tr>
<tr>
<td>Facility</td>
<td>3720-G</td>
<td>Initial</td>
</tr>
<tr>
<td>Facility</td>
<td>3721</td>
<td>Capacity Increase/Decrease</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Relocation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change of Ownership (CHOW)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Initial</td>
</tr>
<tr>
<td>Facility</td>
<td>3736</td>
<td>Renewals only</td>
</tr>
<tr>
<td>Agency</td>
<td>2021</td>
<td>Change – Accreditation Status</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Admin/CFO</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Alternate Administrator</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Update Category of Service</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Controlling Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – DBA (not CHOW)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Mailing Address</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Name of Owner (not CHOW)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Phone/Fax/Email/Operating Hours</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Relocation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Service Area Expansion</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Service Area Reduction</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Stock Transfer</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change of Ownership (CHOW)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Initial</td>
</tr>
<tr>
<td>Agency or Facility</td>
<td>Application Number</td>
<td>Application Type</td>
</tr>
<tr>
<td>-------------------</td>
<td>--------------------</td>
<td>------------------</td>
</tr>
<tr>
<td>Agency</td>
<td>2023</td>
<td>Adding Licensed &amp; Certified Category</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change of Ownership (CHOW)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Initial</td>
</tr>
<tr>
<td>Agency</td>
<td>2024</td>
<td>Initial</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Update Category of Service</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Relocation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Phone/Fax/Email/Operating Hours</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Service Area Expansion</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Service Area Reduction</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change of Ownership (CHOW)</td>
</tr>
<tr>
<td>Agency</td>
<td>2025</td>
<td>Initial</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change of Ownership (CHOW)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Relocation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Update Category of Service</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Phone/Fax/Email/Operating Hours</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Service Area Expansion</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change – Service Area Reduction</td>
</tr>
</tbody>
</table>

**1.3. APPLICATIONS**

**1.3.A. OVERVIEW**

TULIP online applications will enable both agencies and facilities to submit license and certification applications from start to finish. The following flow lays out the steps to complete an application:

![Applications Process Overview](image)

*Figure 16. Applications Process Overview*

**Quick Reference: TULIP Online Application Features**
The applications as represented in TULIP are made to reflect the previous HHS paper applications as much as possible. Depending on each question, data entry fields will vary between free text fields, date calendars, numerically restricted, or picklists. The following features are unique to TULIP and of note:

- **Progress Bar**: This bar is featured at the top of each application and will help providers track progress during data entry. Each step within the bar may be clicked to jump to different application pages.

- **Date Calendars**: Throughout applications, providers will find date fields with three options for entry: a “mm/dd/yyyy” manual keyboard option, up/down selection arrows, or a dropdown calendar at the far right of the field box.

- **Instructions**: Instructions can be accessed both from the initial Application List page and within the footer at the bottom of all applications. When selected, this link will open in a new tab so as to not disrupt application progress.

- **Saving**: Moving to a new step or selecting the “Next” or “Save” buttons in the footer at the bottom of the application will automatically save application progress. After saving, you may navigate away from TULIP or close your browser entirely to resume the application at a later date. The saved application will be stored in the Pending Provider Action section of the homepage.

- **Required Fields**: TULIP applications include required fields and documents, marked both in red and with an asterisk (*). Providers will not be blocked from moving between steps or saving/closing/exiting the application if required fields are left blank. Missing required fields will be displayed in the “Deficiencies” step and will, however, prevent access to the final stages of payment and application submission.
Figure 21. Example of TULIP Required Field

- **Exemptions:** Applications will vary by type. On some applications, providers may notice checkboxes or Yes/No fields that could exempt them from certain pieces of the application. TULIP applications will use the concept of required fields (explained above) to enforce fields that apply to all users. If you complete a field that exempts you from another non-required field, continue through the application. The following examples will help illustrate exemptions:
  - *Example, Address entry fields:* A provider enters their Physical Address. Instead of entering a Mailing Address, they select a checkbox that reads “Same as Physical Address” and continue through the application. The information entered into the physical address fields will also populate the mailing address fields upon application approval.
  - *Example, Yes/No selection fields:* A provider selects “Yes” in a Yes/No selection field. Oftentimes, if the selection is No the provider may simply move onto the next question. TULIP applications include all necessary instructions around Yes/No fields. If you need further help, please access the Instructions document using the button at the bottom left of the screen.

- **Attestations:** Secured by Salesforce’s logins, TULIP applications ask for an attestation in place of prior notarized affidavits. Please note that most applications will still require a separate fire marshal approval upload.

Figure 22. TULIP Attestation Example
1.3.B. SUBMIT AN AGENCY APPLICATION

Create and Select Your Application

To create a new application for your agency, follow the steps below.

1. Select the “Submit a New Application” button next to the “Pending Provider Action” heading.

![Figure 23. TULIP "Submit a New Application" Button](image)

A list of either agency, facility, or both application types will be displayed (this varies based on who an entity manages). Select the “Start Application” button next to the correct application type. You may also open accompanying instructions in a new tab by selecting the "Instructions" button. For training purposes, we will select Application 2021, the initial application for agencies.

![Figure 24. TULIP Application Selection List](image)

2. Select an Application Type. If you are not submitting an initial application, you may select multiple Changes to update your information. Note than Change types will prompt you to enter both a License Number and an Effective Date. Fees associated with all applications can be found in the Instructions.
For training purposes, we will select the “Initial” checkbox. Note that because the agency has not yet been licensed, a License Number is not required, and the field will disappear from view. Select the “Save” button at the bottom to continue.

3. The application should open and a success message should display upon saving. At the top of the screen, you will see the Application Type reflected. You will not be able to change the application type once information is saved to an application; if you save data and need to change your application type, you will need to delete this record and create a new application.

Enter Application Data

The following screenshots will show the layout of an online application in TULIP. The fields within each application will vary in type:

- Free text
- Numerically-restricted
- Email-restricted
- Picklists (both single- and multiple-selection)
- Checkboxes
- Popup entry boxes

Familiar help text that matches previous HHS paper applications will still be used within TULIP applications to guide the user.
**Figure 26. TULIP Application - Step 1**

**Figure 27. TULIP Application Step 2**
Figure 28. TULIP Application - Step 3

Figure 29. TULIP Application - Step 4
Ownership Control and Disclosure

Certain application types request ownership information. To enter the ownership hierarchy, navigate to the Ownership and Control Interest Disclosure section in the application. Here providers can enter the Type of Ownership, Disclosure checkboxes, and build a Hierarchy.

To enter an Ownership Hierarchy, select the “Add Owner” button, shown below.
A detail box will appear. Enter the details for this owner, including the ownership percentage, Taxpayer Identification Number (TIN), and start date of association. The ownership percentage will be default to 100% for the first entry. Select the “Save” button to return to the application and see the saved record.

![Entity Creation](image)

**Figure 32. TULIP Application – Ownership Entity Record Edit**

The user will see the saved record listed until the Ownership Hierarchy section, and will notice that the record offers the option to add an owner of that record.

![Ownership Hierarchy](image)

**Figure 33. TULIP Application – Ownership Record Display**

Repeat this process with each owner in the hierarchy until you have represented the agency’s ownership structure. Levels of the hierarchy and each ownership percentage will indent to accurately show relationships, and businesses and individuals will be represented with different icons for easy reference. An example is shown below:
Upload Documents

After the final data entry screen, the “Next” button will take the user to the “Documents” step of the progress tracker. On this screen, each application will display the various documents associated with that application type. Required documents are denoted with the phrase “This document is required” in red.

Users may either select the “Upload Files” button to select a local file or drag and drop a file onto the corresponding document row. Once the document upload is complete, the user can click “Done” and see their document name reflected in the document row with the ability to delete the document if desired, as shown above.
To upload a document that is not on the list (or upload an additional page of a document), scroll to the top of the page and select “Add Additional Attachment” button. Enter a Name and Description for the document, and Save the document.

![New Attachment](image)

**Figure 36. TULIP Application - New Attachment**

A placeholder will be created for your document. Again, either select the “Upload Files” button to select a local file or drag and drop a file onto your custom document row. You may delete both the uploaded document and the overall document placeholder using the delete buttons, marked below.

![Delete Document](image)

**Figure 37. TULIP Application - Delete Document**

When you are finished uploading documents, click the “Next” button to continue.

**Review Application Deficiencies**

The “Deficiencies” step ensures a complete application before the Provider is able to proceed to application payment and submission. The Provider is required to select the “Review” button; otherwise, the “Payment” step will not display any information and instead direct the Provider back to the “Review” button.
The “Review” button will capture incorrect values entered into required fields (including blanks or improper formats) and missing attachments on required documents and list the deficiencies. Deficiencies will be listed in the order in which they appear in the application.

In all cases, the deficiency will be delineated by a light gray box and will display the Item (section) in which the deficiency appears; each section can have one or more deficiencies. In some cases, the deficiency will further display the specific field that is deficient within the Item through the deficiency’s Description.

To quickly navigate through the application to the deficiency, select the “Go to Step” button associated with the deficiency; the hyperlink will direct the Provider to the specific step on which the deficiency appears.
In many cases, deficient fields will be outlined in red boxes to flag the fields for the Provider and may be accompanied by help text. To resolve deficiencies, click into the deficient fields and fill appropriate values, or attach a correct required document if resolving a document deficiency.

You must continue to select the “Review” button on the “Deficiencies” tab to ensure that all deficiencies are resolved. Once all deficiencies have been resolved, the application will display a success message indicating that there are no deficiencies to address and the Provider will be able to proceed to the following tabs.
Review Application Summary and Print Application

The “Summary” tab of the application submission process displays a read-only concatenation of all Steps in the application to allow the user to quickly review all entered information. From the “Summary” tab, Providers can print the application for their own records before application submission.
Providers can similarly print their applications after application submission also from the “Summary” tab. Navigate to the “Previously Submitted Applications” section of the Provider Portal homepage to find and select a previously submitted application to be printed; use the “See More” action if the application is not immediately displayed in the list.

![Previously Submitted Applications List Preview](image)

The Provider will be directed to the “Summary” tab of the previously submitted application; from here, the Provider can review and print the application by again using the “Print” button located above the progress bar.

**Important Note:** Because TULIP applications are modified to display online, the traditional paper sections 1-4 are rolled up into a common process before the application opens. It may be handy to note the application number and entity name if you choose to file anything personally as a paper copy.

**Generate and Print a Payment Coupon**

On the Payment step of the application, the user will see an overview of basic application details such as Application ID, Application Type, Application Status, and Application Date. Underneath these details the user will select a Payment Type from the dropdown picklist field containing three payment options:

1. ACH
2. Credit Card
3. Paper Check / Money Order

If the third option is selected, the page will display a checkbox alongside the price asking you to confirm “I understand that in order to complete this application, I must mail in the coupon”. When checked, the button below this statement is activated. This button generates a populated payment coupon in a new browser tab.

The payment coupon must be printed and mailed to the provided address along with their paper check or money order for the full amount before the application will be processed by HHS. Providers can print the generated payment coupon PDF as their computer normally allows.

Select the “Next” button to continue to the submission step.
Pay Online Through Texas.gov

Texas.gov is the statewide government website and also the official payment processor for Texas agencies. Payments made online with TULIP will be made through the Texas.gov checkout process.

If either the ACH or Credit Card option is chosen as the Payment Type, this payment option will display a Texas.gov price and a link to pay through Texas.gov in a separate tab. Please note that the link is valid for 30 minutes. If the 30 minutes elapse and the link expires, you will need to close the application and refresh the page to re-enter.
Figure 45. TULIP Application - ACH or Credit Card Payment

Figure 46. TULIP Application - Payment Address Information
Once you complete the online payment, you will receive a confirmation email from Texas.gov. Press the “Continue” button to return to the application and submit the application.
Submit a Completed Application

Your application is not considered completed or eligible for processing unless both your payment is submitted and the application itself is submitted.

The Submit step is the final step in the progress tracker and displays a single “Submit Application” button. Press this button to submit your application.

Once submitted, TULIP will display text that reads “Application submitted”. In addition, you will receive an email confirmation notifying you of your application’s receipt at HHS for review after payment processing.
Once you navigate back to your Provider Homepage, your application will reflect a status of “Submitted” under the Previously Submitted Applications section.

**Figure 51. TULIP Provider Homepage - Submitted Application**

### 1.3.C. SUBMIT A FACILITY APPLICATION

#### Create and Select Your Application

To create a new application for your facility, follow the steps below.

1. Select the “Submit a New Application” button near the top of the page.

**Figure 52. TULIP Provider Homepage - Submit a New Application**

2. A list of Applications will be displayed. Find the application you would like to submit and select the “Start Application” button. You may also open accompanying instructions in a new tab by selecting the "Instructions” button. For training purposes, we will select Application 3720-N, the initial application for Nursing and Title XIX facilities.
3. Select an Application Type. If you are not submitting an initial application, you may select multiple Changes to update your information. Change types will prompt you to enter both a License Number and an Effective Date.

Note: ICF Initial applications in TULIP were previously referenced as “ICF reactivations”. Please use the application type “Initial” if looking for ICF reactivations and select “ICF/IID” as the facility type as you normally would.

Figure 54. TULIP Application - License Number and Effective Date Entry Screen

For training purposes, we will select the “Initial” checkbox. Note that because the facility has not yet been licensed, a Facility ID is not required. Select the “Save” button.
4. The application should open and a success message should display when the “Save” button is selected. At the top of the screen, you will see the Application Type reflected. You will not be able to change the application type once information is saved to an application; if you save data and need to change your application type, you will need to delete this record and create a new application.

**Enter Application Data**

The following screenshots will show the layout of an online application in TULIP. The fields within each application will vary in type:

- Free text
- Numerically-restricted
- Email-restricted
- Picklists
- Checkboxes
- Popup entry boxes

Familiar help text that matches previous HHS paper applications will still be used within TULIP applications to guide the user.
Figure 56. TULIP Application - Step 1
Figure 57. TULIP Application - Step 2
Figure 58. TULIP Application - Step 3
Figure 59. TULIP Application - Step 4
Ownership Control and Disclosure

Certain application types request ownership information. To enter the ownership hierarchy, navigate to the Applicant Information section in the application. Here providers can enter the Type of Ownership, Disclosure checkboxes, and build a Hierarchy.

To enter an Ownership Hierarchy, select the “Add Owner” button, shown below.
A detail box will appear. Enter the details for this owner, including the ownership percentage, Taxpayer Identification Number (TIN), and start date of association. The ownership percentage will be default to 100% for the first entry. Select the “Save” button to return to the application and see the saved record.
The user will see the saved record listed until the Ownership Hierarchy section, and will notice that the record offers the option to add an owner of that record.

![Ownership Hierarchy](image)

### Figure 63. TULIP Application – Ownership Record Display

Repeat this process with each owner in the hierarchy until you have represented the agency’s ownership structure. Levels of the hierarchy and each ownership percentage will indent to accurately show relationships, and businesses and individuals will be represented with different icons for easy reference. An example is shown below:

![Ownership Hierarchy Example](image)

### Figure 64. TULIP Application – Ownership Hierarchy Example

#### Upload Documents

After the final data entry screen, the “Next” button will take the user to the “Documents” step of the progress tracker. On this screen, each application will display the various documents associated with that application type. Required documents are denoted with the phrase “This document is required” in red.

Users may either select the “Upload Files” button to select a local file or drag and drop a file onto the corresponding document row. Once the document upload is complete, the user can click “Done” and see their document name reflected in the document row with the ability to delete the document if desired, as shown above.
Figure 65. TULIP Application - Documents

To upload a document that is not on the list (or upload an additional page of a document), scroll to the top of the page and select “Add Additional Attachment” button. Enter a Name and Description for the document, and Save the document. Again, either select the “Upload Files” button to select a local file or drag and drop a file onto your custom document row.

When you are finished uploading documents, click the “Next” button to move on.

Figure 66. TULIP Application - New Attachment
Review Application Deficiencies

The “Deficiencies” step ensures a complete application before the provider is able to proceed to application payment and submission. Without reviewing the application, the “Payment” step will not display any information and instead direct the provider back to the “Review” button.
The “Review” button will capture incorrect values entered into required fields (including blanks or improper formats) and missing attachments on required documents and list the deficiencies. Deficiencies will be listed in the order in which they appear in the application.

In all cases, the deficiency will be delineated by a light gray box and will display the Item (section) in which the deficiency appears; each section can have one or more deficiencies. In some cases, the deficiency will further display the specific field that is deficient within the Item through the deficiency’s Description.

To quickly navigate through the application to the deficiency, select the “Go to Step” button associated with the deficiency; the hyperlink will direct the Provider to the specific step on which the deficiency appears. See the image below:
In many cases, deficient fields will be outlined in red boxes to flag the fields for the Provider and may be accompanied by help text. To resolve the deficiency, click into the deficient fields and fill appropriate values, or attach a correct required document if resolving a document deficiency.

You must continue to select the “Review” button on the “Deficiencies” tab to ensure that all deficiencies are resolved. Once all deficiencies have been resolved, the application will display a success message indicating that there are no deficiencies to address and the provider will be able to proceed to the following tabs.
Review Application Summary and Print Application

The “Summary” tab of the application submission process displays a read-only concatenation of all Steps in the application to allow the user to quickly review all entered information. From the “Summary” tab, Providers can print the application for their own records before application submission.
Providers can similarly print their applications after application submission also from the “Summary” tab. Navigate to the “Previously Submitted Applications” section of the Provider Portal homepage to find and select a previously submitted application to be printed; use the “See More” action if the application is not immediately displayed in the list.
The Provider will be directed to the “Summary” tab of the previously submitted application; from here, the Provider can review and print the application by again using the “Print” button located above the progress bar.

**Generate and Print a Payment Coupon**

On the Payment step of the application, the user will see an overview of basic application details such as Application ID, Application Type, Application Status, and Application Date. Underneath these details the user will select a Payment Type from the dropdown picklist field containing three payment options:

1. ACH
2. Credit Card
3. Paper Check / Money Order

If the third option is selected, the page will display a checkbox alongside the price asking you to confirm “I understand that in order to complete this application, I must mail in the coupon”. When checked, the button below this statement is activated. This button generates a populated payment coupon in a new browser tab.

The payment coupon must be printed and mailed to the provided address along with their paper check or money order for the full amount before the application will be processed by HHS. Providers can print the generated payment coupon PDF as their computer normally allows.
Select the “Next” button to continue to the submission step.

**Pay Online Through Texas.gov**

Texas.gov is the statewide government website and also the official payment processor for Texas facilities. Payments made online with TULIP will be made through the Texas.gov checkout process.

If either the ACH or Credit Card option is chosen as the Payment Type, this payment option will display a Texas.gov price and a link to pay through Texas.gov in a separate tab. Please note that the link is valid for 30 minutes. If the 30 minutes elapse and the link expires, you will need to close the application and refresh the page to re-enter.
Figure 76. TULIP Application - ACH or Credit Card Payment

Figure 77. TULIP Application - Payment Address Information
Once you complete the online payment, you will receive a confirmation email from Texas.gov. Press the “Continue” button to return to the application and submit the application.
Submit a Completed Application

Your application is not considered completed or eligible for processing unless both your payment is submitted and the application itself is submitted.

The “Submit” step is the final step in the progress tracker and displays a single “Submit Application” button. TULIP will display a green success banner that reads, “Application was submitted”. In addition, you will receive an email confirmation notifying you of your application’s receipt at HHS for review after payment processing.

![TULIP Application - Submit Application](image)

Figure 80. TULIP Application - Submit Application

Once you navigate back to your Provider Homepage, your application will reflect a status of “Submitted”.

![TULIP Provider Homepage - Submitted Application Example](image)

Figure 81. TULIP Provider Homepage - Submitted Application Example

1.3.D. RENEW AN EXISTING LICENSE

Users will have the ability to renew an existing license beginning 120 days before their license expires. This renewal application will generate automatically through TULIP. You can access the renewal application from the Pending Provider Action list on your homepage. You will also see the due date for this application displayed to help you plan your time.

Continue with the data entry, document upload, payment, and submission steps as detailed above in sections 1.3.B. Submit an Agency Application or 1.3.C. Submit a Facility Application.
Renewals will appear in the Pending Provider Action section of the homepage with a Type of “Renewal” and a Status of “New”.

![Pending Provider Action Table]

**Figure 82. TULIP Provider Homepage – Renewal Homepage Notification**

When selected, the generated renewal application will open, fully populated, for review. Edit any fields needed, ensuring all required fields are complete. Proceed with deficiency review, document upload, and payment as normal. See sections 1.3.C. and 1.3.D for submission instructions.

![Generated Renewal Application]

**Figure 83. TULIP Provider Homepage – Populated Renewal Application**

Generated renewal applications are valid (with a late fee applied) until close of the day of license expiration. After that, providers must begin a new initial application to file for a license. If you try to access a renewal application after your license has expired, you will see the following message displayed when you open the application:

“Our records indicate that the license you are attempting to renew has expired and, therefore, you cannot submit an application to renew the license through this portal. If you believe that you have received this message in error or you would like to request an exception, which will allow you to submit a renewal application after a license has expired, please send relevant information to the Provider Licensure and Certification Manager at bobby.schmidt@hhsc.state.tx.us. HHSC will review the information you submit, notify you of its determination, and provide you with additional instructions, if necessary. Please note that HHSC will
grant an exception to file a renewal application only under limited circumstances, such as when a waiver has been granted by the Governor after a hurricane.”

1.3.E. ADDRESS DEFICIENCIES AFTER SUBMISSION

After application submission, an HHS Licensing Specialist will review your application in full and mark any information that needs to be corrected or added. Once sent back to providers, these deficiencies must be corrected as soon as possible; if HHS does not receive a corrected response within 30 days, the submitted application will be proposed for denial.

Providers will receive an email to their designated applicant contact when deficiencies are noted on an application and the 30-day correction period has begun.

To find an application marked with deficiencies, navigate to the provider home page. The Pending Provider Action section should be the first section on the page, and any applications waiting for provider response will be listed here with a Status of “Response Required”.

Providers will immediately see deficiencies when the application link is opened. To view a list of all deficiencies marked by an HHS Licensing Specialist, select the “Deficiencies” tab.

*Figure 84. Pending Provider Action Section*
Each marked deficiency will be delineated with a light gray box. The deficiencies will display the Item (section) in which the deficiency occurs and a description of the deficiency entered by the HHS Licensing Specialist. The Provider can add a comment to the deficiency with the “Add Comment” button; the comment will appear in the “Provider Comments” field of the deficiency. Comments cannot be added after a deficiency is marked as addressed. To quickly navigate to the Step on which the deficiency occurs, select the “Go to Step” button.

Once the Provider has navigated to the deficient Item (section), the Provider will see a red banner across the top of the section containing a list of deficiency descriptions for deficiencies occurring within the section. If there are multiple deficiencies within the section, they will all be listed in the banner on separate lines.
To resolve a deficiency, click into the deficient field and update the information. Once a specific deficiency is corrected, select the “Mark as Addressed” action next to the deficiency description in the banner. When all deficiencies in the section are marked as addressed, the deficiency banner will disappear. The Provider can also mark deficiencies as addressed with the “Mark as Addressed” buttons in the “Deficiencies” tab, but it is recommended that the Providers correct the deficiencies within the sections first before marking a deficiency as addressed.

The Provider can return to the “Deficiencies” tab after resolving a deficiency. The red crossout icon will be replaced with an orange crossout icon, and the “Addressed by Provider” field will display “Yes”. The “Resolved” field will still display “No”, as this field is used by the HHS Licensing Specialist when reviewing addressed deficiencies. Once the Provider has addressed all deficiencies, be sure to select the “Save” button to send the corrections back to HHS.
1.3.F ACCOUNT UPDATES

Account updates will be available on Applications 3720, 3720-N, and 3720-P for facility providers who wish to update fields on their application that *do not incur a fee* and are not covered by a Change of Information application type. Note: Facilities that use a 3720-G application form type will simply use a 3720.

To make a Account update:

1. Navigate to the Details section of your provider homepage and select the correct facility from the dropdown field.
2. Click the “Update” button.
The user will see the usual application list. Select the proper application as it applies to your facility, and then select the “Start Application” button.

Once inside the application, select “Account Update” as the application type and enter both the effective date and the Facility ID. Enter the application to begin updating your information.
TULIP will generate the most recently submitted application—fully populated—for the user to update. Note that only application sections that do not incur a fee will be displayed. If you need to update information in a section that is hidden, you will need to submit a new Change application and pay the associated fee.

Use the “Next” and “Save” buttons to navigate the application as you normally would. When you have made all necessary field updates, select the “Submit” button to submit the update application to a Licensing Specialist for review. You will not be charged a fee on the Payment tab when submitting.
1.4. FACILITY / AGENCY MANAGEMENT

Figure 92. Facility / Agency Management Overview

1.4.A. OVERVIEW

Through your account, you can utilize additional links and shortcuts to upload documents to your account submit and manage Resident Death Reports, and access external links.

1.4.B. UPLOAD A FORM

Providers may upload documents in both the Uploads tab at the top banner of the page or from the “Upload a Form” link on the righthand side of their home page.

Figure 93. Upload a Form

Once selected, the Uploads tab will display a list of recent uploads to your account. To submit a new one, select the “New” button on the righthand side of the screen. The “Upload a Form” will automatically open a new record.

Create the Document Shell
When selected, this link will open a New Provider Upload popup box in the same window. The user will:

- Enter a name for the document
- Add a description for the document. This helps HHS quickly identify the upload
- Search for and select the associated provider
- Click “Save” to move to the upload portion. The user will see a green success ribbon that reads “Document _____ was created”.

![Figure 94. Upload a Form - New Upload](image)

**Upload a File**

Once created and saved, the user will see the document details displayed. On this screen, the user can either drag and drop a file into the designated box or select the “Upload Files” button to manually select a file. More than one file may be uploaded to the same named document (in the event that a document is multi-page but saved separately), but should be uploaded one at a time. A small, secondary popup box will show the upload progress; when the document is fully uploaded, the user will be prompted to acknowledge the upload by clicking the “Done” button.
To manage files within a document, select the “View All” link in the bottom right corner of the “Notes & Attachments” section. From here, users can see the upload date and size of the files. To upload a new version, delete, or download the file added, click the arrow box on the far right of the file row.

To manage created document uploads, select the Uploads tab in the banner at the top of the screen at any time. Records can be created by clicking the “New” button and edited / deleted at a row level using the arrow box on the far right of each file row.
1.4.C. SUBMIT A RESIDENT DEATH REPORT

The “Resident Death Reporting” functionality is meant for use only by authorized Providers associated with NF and ICF facilities. TX Health and Human Services will have no interaction with submitted resident death reports or ability to view resident death report information.

Create a Resident Death Report

To create a new Resident Death Report, select the “Submit a Resident Death Report” action in the “Other Actions” section of the Provider Portal home page.
Alternatively, the Provider can select the “New” button within the “Resident Death Reports” tab that appears in the navy highlights bar. The “Resident Death Reports” tab can be used for managing previously submitted resident death reports, including viewing, editing, and deleting.

Figure 99. Resident Death Report - New

Either “create” action will open a “New Resident Death Report” popup box in the same window. The user will first search for the facility or agency for which they wish to file a resident death report, then input the administrator, administrator email, and the name of the person preparing the report. When fields are completed, click “Save” to manage your record. The user will see a green success ribbon that reads “Resident Death Report was created”.

Figure 100. New Resident Death Report
Add Resident Death Report Residents

To add residents to a Resident Death Report, select the “New” button in the related “RS Resident Death Report Residents” section. A “New Resident Death Report Resident” popup will prompt the Provider to enter demographic and death details about the resident; at a minimum, the Provider must enter information into all required fields, marked both in red and with an asterisk (*).
Once a resident death report resident has been successfully created, the resident’s record will save to the “RS Resident Death Report Residents” section where it can be viewed and edited at a later time if necessary.

**Manage Resident Death Reports**

To edit a Resident Death Report, select the “Edit” button to open up a popup similar to the initial creation popup that opens the resident death report fields for editing.
To delete a Resident Death Report, select the “Delete” button from this detail page and confirm your intention to delete the record.

**1.5. ADDITIONAL FUNCTIONALITY**
Access the Incident Self Reporting Portal

Selecting this link will direct the user to the instructions for the Provider Self-Reporting of Incidents on the Texas HHS website. From here, a provider can access important instructions, timelines, and document downloads before filing a report.

Submit a request for a Health Visit

If you are an agency, you will upload Form 2020 (or Form 2020-A for agencies with Hospice In-Patient Units) to the Uploads tab of your portal homepage. See the 1.4.B. Upload a Form section for details regarding how to upload a document.

If you would like to request a Health Visit for a facility, please contact the HHS Licensing Specialist reviewing your application. See the 1.6. Contact HHS section for more information.

1.6. CONTACT HHS

To contact HHS (or request a Health / Life Safety Code Visit), call 512-438-2630. For more information on licensing and certification, please visit the Texas HHS website at https://www.hhs.texas.gov.