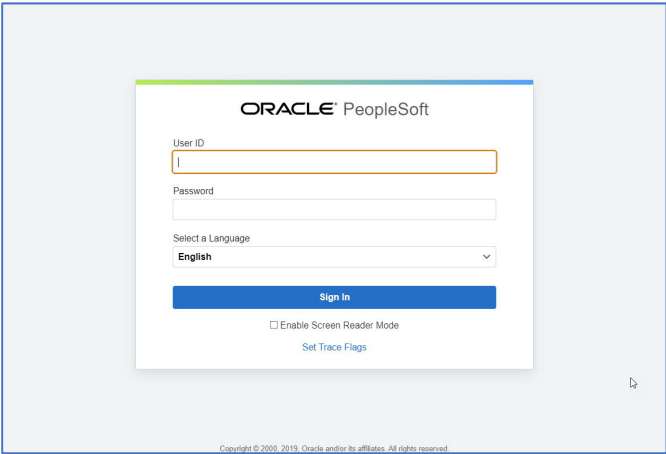UT Southwestern Medical Center
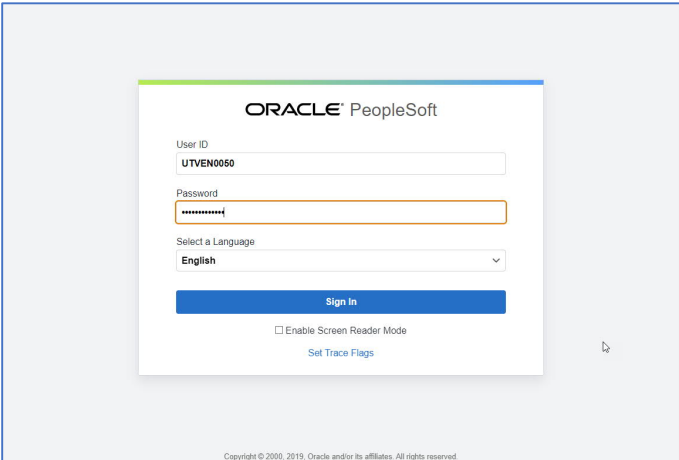PeopleSoft Accounts Payable Supplier Portal - Change Request

The Administrator for each company has been designated as someone with authority to make changes such as update for address, banking information, and the ability to add additional users to access invoice/payment status. The following are instructions on how to submit a change to an address or banking information. See the main Accounts Payable Supplier Portal page for any additional instructions needed.

Steps for PeopleSoft Supplier Portal Change Request:

Go to Supplier Log In link found on UT Southwestern Accounts Payable Supplier Portal page. Login screen will be loaded as below
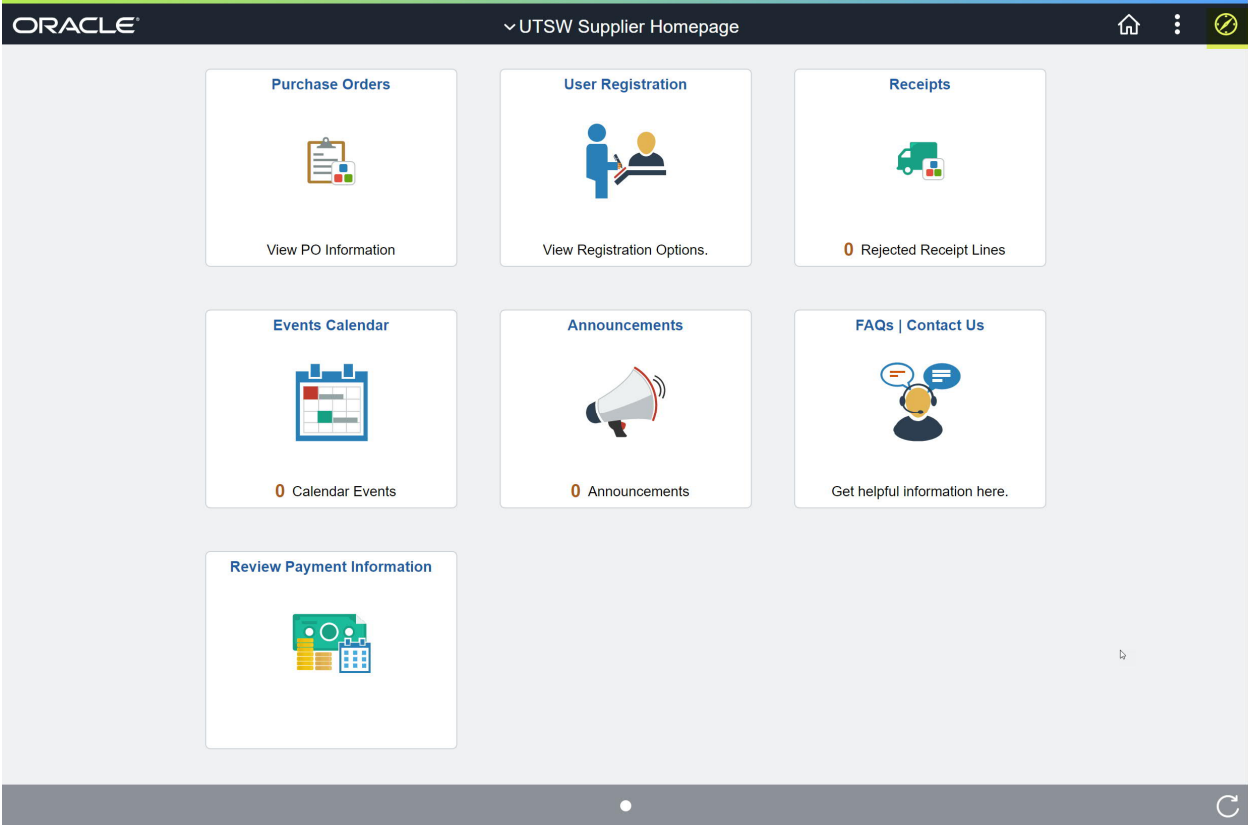

Enter your User ID / Password from email and click Sign in

Note: Any field with * in front is required field. Please fill all the required fields to move to next screen.
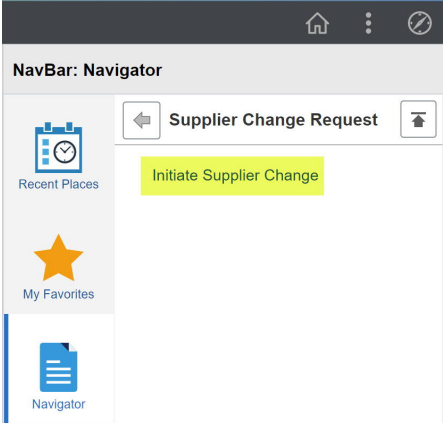
Update any profile information as needed. Then click Home.

Supplier portal homepage will be displayed. Click on ⊘ navigator icon on the right-hand top corner to access Supply Change request page.

Navigate to Navigator > Maintain Supplier Information > Supplier Change Request > Initiate Supplier Change

Note: Any field with * in front is required field. Please fill all the required fields to move to next screen.

System will display Supplier Change Request for your company

Note: Any field with * in front is required field. Please fill all the required fields to move to next screen.

Supplier Name and Tax Identification Number cannot be updated or deleted. If you have a new name or Tax ID number send your W9 or W8 with paperwork for name change, merger/acquisition information to UTSWAccounting@utsouthwestern.edu for review.

Government Certifications – Edit this section to provide any government certifications like TX HUB, CMBL etc.

Entry Field	Description
EEO Certification Date (equal employment opportunity certification date)	Enter the supplier's EEO certification date.
HUB Zone (historically underutilized business zone)	Select if the supplier qualifies for this classification.
Certification Source	Enter the supplier's certification source.
Certification Begin Dt and Certification Expiration	Enter the start date and expiration date for the certificate.
Government Classification	Enter the type of government classification for which your supplier qualifies.
Certificate number	Enter the number of the certificate that your supplier received from this source, verifying that the supplier is qualified for this government classification.

Click "Add Certifications Source" to add more than one certification.

US – NAICS Codes - 	The system provides the list of US NAICS codes. Select a code for the supplier.

Note: Any field with * in front is required field. Please fill all the required fields to move to next screen.

Based on the SIC information that you select, the system populates the Description field.

Additional Reporting Elements

Field	Description
Common Parent's TIN	Enter the tax identification number for the common parent. This number is used to uniquely identify a business. Note: Common Parent's TIN is not used in 1099 Withholding processing.
Common Parent's Name	Enter a parent supplier name for this supplier ID. In this case, the common parent is the corporate entity that owns or controls an affiliated group of corporations that files its federal income tax returns on a consolidated basis, and of which this supplier is a member.
Type of Contractor	Select the type of contractor that this supplier represents, such as a large business or education institution. The contract types are defined in Federal Acquisition Regulation (FAR) Part 16.
HUBZone Program (historically underutilized business zone program)	The HUBZone Empowerment Contracting program provides federal contracting opportunities for qualified small businesses located in distressed areas.
SDB Program (small, disadvantaged business program)	A Small Disadvantage Business (SDB) program provides business development and federal contracting opportunities for small, disadvantaged businesses that would not otherwise qualify for such programs. An SDB enables small businesses to compete in the federal contracting arena and helps expose them to a wider range of subcontracting opportunities that are typically available for large firms only. Programs of this nature are intended to help federal agencies achieve the government-wide goal of 5 percent SDB participation in prime contracting.
Size of Small Business	If you selected the Emerging Small Business check box, select the applicable business size for this small business from the available options.
Other Preference Programs	Select a preferred socioeconomic program for use with this supplier. These programs are defined under FAR subchapter D - Socioeconomic Programs.
Veteran-owned small business	The veteran-owned small business program provides veteran-owned small businesses maximum practical opportunity to participate in the performance of contracts and subcontracts awarded by any federal agency.

Note: Any field with * in front is required field. Please fill all the required fields to move to next screen.

Ethnicity	Select an ethnic group that applies to the supplier. Values include: African American, Asian American, Hispanic American, Native American, and Other. When you select the other option, you can enter the ethnicity.
Please Check all the Apply	Emerging Small Business Women-Owned Business Veteran Disabled
Comments	Enter any comments about the Supplier.

Profile questions

Question	Type	Description
Texas HUB Vendor	Yes / NO	Please select "Yes" if you are an active TX HUB supplier. Also complete the sections for HUB status, gender, ethnicity (Government Classification), certification source (TEXASHUB), certification begin date and certification expiration. If you are registered with the TX CMBL please include your vendor ID# assigned by the CMBL in the certification number field. If you are an MWBE, MBE or WBE please also add those records and according to certification information. Otherwise, select "No".
If Texas HUB vendor – Owner's Gender	List	If Texas HUB = Yes; Provide the Owner's gender as reported to the CMBL. (Not Texas HUB certified select Not Applicable)
PO Distribution method	List	Specify your PO Distribution Method Ex. Fax, Email or Electronic

Note: Any field with * in front is required field. Please fill all the required fields to move to next screen.

Email of Fax number for PO Distribution	Text	Provide the email address or fax number for PO Distribution
EDX integration of PO	List	Is your company on Jaggaer or GHX platform? (If not on one of them select Not Applicable)
US or Foreign company	Yes / No	Are you a foreign company?
Type of provider	List	Are you providing Product or Service?
Payment method Preferred	List	* Payment Method a. Credit Card - Skip section 5, we will contact you with additional information b. ACH - Complete section 5 and attach banking info c. Wire (foreign suppliers only, fees apply) - Skip section 5 and attach banking info

Addresses

Field or Control	Description
Change Effective Date	Displays the effective date if a future effective date was specified for the change, after a change has been made. Note: If there is an existing effective-dated record for the approval date or specified future date, the new effective-dated record will be created for the following day.
Edit	Click the Edit icon for an existing address to access the Address Information detail page for the contact. You can edit or delete address data from the secondary page and indicate the date for the changes to take effect. Choose either a specified future date or the approval date.
Add New Address	Click this button to add a new address on the Address Information page. Indicate the date for the changes to take effect. Choose either a specified future date or the approval date.

Edit Address

Note: Any field with * in front is required field. Please fill all the required fields to move to next screen.

Add New address page

Example of screen after adding one address and marking one to delete existing address.

Note: Any field with * in front is required field. Please fill all the required fields to move to next screen.

‹ UTSW Supplier Homepage   Addresses for Test Supreg0414

| Company Profile | Addresses | Contacts | Payment Profile | Submit |

Exit   Save for Later | ◀ Previous   Next ▶

Addresses for Test Supreg0414

🔖 Review Changes

Primary address is used for procurement and remit functions (ordering, remitting & returning). Primary email is used for PO dispatch. If separate remit address is needed please add separate address.

Description	Address Line 1	Change Action	Change Effective Date	Edit	
Address 1	123 Main Street			🖉	
New Address	123 New Street	Remove	05/04/2022	🖉	
Main Address	134 Row Street	Add	05/04/2022	🖉	

Add New Address

✉ Contact Us   🔖 Review Changes

Exit   Save for Later | ◀ Previous   Next ▶

Click 'Review Changes' to check changes added.   🔖 Review Changes

Review Page for Test Supreg0414

Expand All   Collapse All
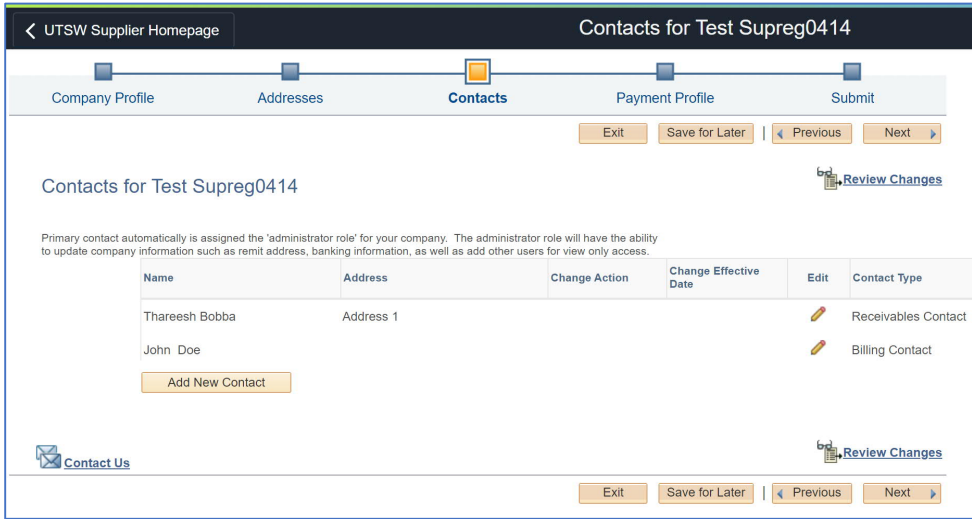
▼ Address Information   🖉

Type	Information	Current	Proposed	Date To Change
Address: New Address				Approval
Remove		New Address USA 123 New Street Dallas Dallas Texas 75226		
Address: Main Address				Approval
Add			Main Address USA 134 Row Street Dallas Dallas Texas 75365	
Address-Phone				
Add				
	Phone Type		Business Phone	
	Location			
	Prefix			
	Telephone			
	Ext			

Return

==Note: Any field with * in front is required field. Please fill all the required fields to move to next screen.==

Contacts - Primary contact automatically is assigned the 'Administrator Role' for the company. The administrator role has the ability to update company information such as address, banking information, and ability to add additional users to access invoice/payment status. Please ensure the Primary Contact has authority to update sensitive information for your company.

Field or Control	Description

Note: Any field with * in front is required field. Please fill all the required fields to move to next screen.

Change Effective Date	Displays the effective date if a future effective date was specified for the change, after a change has been made. Note: If there is an existing effective-dated record for the approval date or specified future date, the new effective-dated record will be created for the following day.
Edit	Click the Edit icon for an existing contact to access the Contact Information detail page for making changes. You can edit or delete contact data from the secondary page and indicate the date for the changes to take effect. Choose either a specified future date or the approval date.
Add New Contact	Click this button to add a new contact. Indicate the date for the changes to take effect. Choose either a specified future date or the approval date. A contact can have one phone number of each type.

Edit existing contact

Field or Control	Description
Remove Contact	Select this check box to remove a supplier contact.
Contact Address	Select to use a specific contact address.

Note: Any field with * in front is required field. Please fill all the required fields to move to next screen.

Approved Changes Take Effect	Select Approval Date to indicate the change should occur upon the approval of the change request. Select Future Date to indicate the change should occur at a specified date in the future.

Add new contact

Example of contacts screen after mark to remove existing contact and add new contact.

Review contact changes

Note: Any field with * in front is required field. Please fill all the required fields to move to next screen.

Review Page for Test Supreg0414

▼ Contact Information

Type	Information	Current	Proposed	Date To Change
Contact : John Doe				Approval
Remove				
	Description	New Contact		
	Contact Name	John Doe		
	Contact Title			
	Email Address	t@me.net		
	URL	http://		
	Contact Address			
	Contact Type	Billing Contact		
Contact : Jeff Bees				Approval
Add				
	Description		Jeff Bees	
	Contact Name		Jeff Bees	
	Contact Title			
	Email Address		thareesh.bobba@utsw.edu	
	URL			
	Contact Address		Address 1	
	Contact Type		Sales Contact	
Contact-Phone				
Add				
	Phone Type		Business Phone	
	Int'l Prefix			
	Telephone			
	Phone Extension			

Return

Payment profile
- Credit Card – Single Use Program is the preferred payment method by UT Southwestern. If you choose credit card in the profile questions above, we will reach out to you separately with additional details. Skip to section 6 if you choose credit card payment.
- Automated Clearing House (ACH) method is also available. Enter information in this section.

❮ UTSW Supplier Homepage

Payment Profile for Test Supreg0414

Company Profile — Addresses — Contacts — **Payment Profile** — Submit

Exit | Save for Later | ◀ Previous | Next ▶

Payment Profile for Test Supreg0414

Review Changes

Each Payment profile may have different remit information based on business needs. If updating ACH information, documentation such as bank letter must be attached to attachments. All ACH changes are subject to verification prior to being activated.

Description	Change Effective Date	Default	Edit
MAIN - Location	04/14/2022	☑	✏

*Required Field

✉ Contact Us

Review Changes

Exit | Save for Later | ◀ Previous | Next ▶

Note: Any field with * in front is required field. Please fill all the required fields to move to next screen.

Click edit icon ✎ to update Payment details

Payment Profile

Payment Profile for MAIN - Location

Expand All   Collapse All

▼ **Payment Notification Preferences**

☐ Enable Email Payment Advice
Email ID [_____]

Payment Method	Remove
[_____▾]	☐

Add Email Payment Method

▼ **Location Comments**

Comment [_____]

▼ **Attachments**

Attachments

▼ **Bank Accounts**

Default	Beneficiary Bank	Bank ID Number	Branch Name	Branch ID	Bank Account #
☑					

Add Bank Account

OK   Cancel

Here are the details for each section

▼ Payment Notification Preferences

☐ Enable Email Payment Advice
Email ID [_____]

Payment Method	Remove
[_____▾]	☐

Add Email Payment Method

Enable email of supplier payment Advice and fill Email address. Also select the payment method for which you are enabling the payment notification.

▼ Location Comments

Comment [_____]

▼ Attachments

Attachments

Add any comments for UTSW accounting. Use Attachments link to add bank related attachments. ACH documentation must be attached.

▼ Bank Accounts

Default	Beneficiary Bank	Bank ID Number	Branch Name	Branch ID	Bank Account #
☑					

Add Bank Account

Note: Any field with * in front is required field. Please fill all the required fields to move to next screen.

If there is any bank account, you can edit or Add bank account using the button.

Add bank account – Filled sample data as an example

Add New Supplier Bank Account

Bank Accounts

Description	This State Bank
Country	USA 🔍 United States
Bank Name	Texas State bank
Branch Name	
Bank ID Qualifier	001 🔍 United States Bank
Bank ID	111000025
Bank Account Number	20256314789
DFI Qualifier	01 🔍 Transit Number
IBAN	

Account Type: Check Acct

DFI ID: 111000025

Bank Address

Country	USA 🔍 United States
Address 1		Postal Search
Address 2	
Address 3	
Address 4:	
City	
County		Postal
State	🔍

Bank Phone

Prefix	
Phone	
Ext	
Fax	

OK   Cancel

Example of screen with bank account added

Payment Profile

Payment Profile for MAIN - Location

Expand All   Collapse All

▼ **Payment Notification Preferences**

☐ Enable Email Payment Advice

Email ID

| Payment Method | Remove |
| | ☐ |

Add Email Payment Method

▼ **Location Comments**

Comment

▼ **Attachments**

Attachments

▼ **Bank Accounts**

Default	Beneficiary Bank	Bank ID Number	Branch Name	Branch ID	Bank Account #	Edit
☑	Texas State bank	111000025			XXXXXXX4789	✏️

Add Bank Account

OK   Cancel

Click Review changes to check bank account addition

Note: Any field with * in front is required field. Please fill all the required fields to move to next screen.

Review Page for Test Supreg0414

Telephone

Phone Extension

▼ **Payment Profile**

Payment Profile : MAIN - Location

Bank Accounts

Type	Information	Current	Proposed
Bank Accounts - 1			
Update	Default	Yes	Yes
	Description		This State Bank
	Country	USA	USA
	Bank Name		Texas State bank
	Branch Name		
	Bank ID Qualifier		001
	Bank ID		111000025
	Branch ID		
	Bank Account Type		Check Acct
	Bank Account Number		20256314789
	Check Digit		
	DFI Qualifier		01
	DFI ID		111000025
	IBAN Check Digit		
	IBAN		

Review and submit

Note: Any field with * in front is required field. Please fill all the required fields to move to next screen.

As of 05/06/2022   16 of 20

Review and Submit Changes for Test Supreg0414

Company Profile — Addresses — Contacts — Payment Profile — **Submit**

Exit | Save for Later | ◄ Previous | Next ►

Review and Submit Changes for Test Supreg0414

Review and confirm your changes before submitting

Use the "Review" button to review changed information.

Use the "Submit" button to submit your change request.

Email communication regarding this request will be sent to:

thareesh.bobba@utsw.edu

*Audit Reason Code

Comments

254 characters remaining

☐ Confirm Changes

Review | Withdraw | Submit

✉ Contact Us

Exit | Save for Later | ◄ Previous | Next ►

Audit reason codes

*Audit Reason Code

Comments

- 1099 Update
- Address Update
- CI Update
- Contact Update
- Correction
- Critical and Sensitive Information
- Location Update
- Supplier Contact Phone Update

☐ Confirm Changes

Review | Withdraw

Select one of the reason codes, add any additional comments, select confirm changes and click submit. Or Save for Later if the changes are not sure yet.

Review and Submit Changes for Test Supreg0414

| Company Profile | Addresses | Contacts | Payment Profile | **Submit** |

Exit | Save for Later | ◄ Previous | Next ►
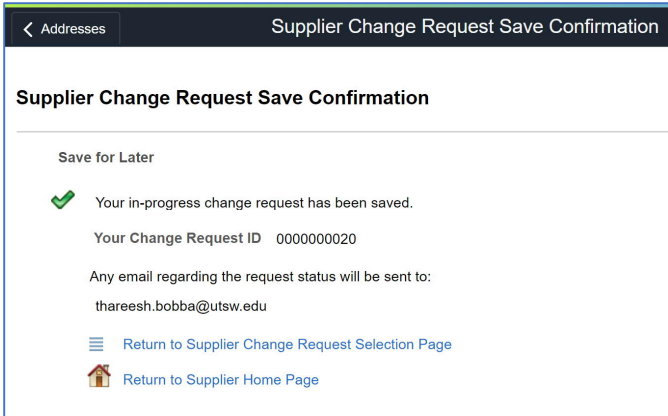
Review and Submit Changes for Test Supreg0414

Review and confirm your changes before submitting

Use the "Review" button to review changed information.

Use the "Submit" button to submit your change request.

Email communication regarding this request will be sent to:

thareesh.bobba@utsw.edu

*Audit Reason Code   Correction

Comments   Addresses updates
Contact updates
Payment bank information added.

189 characters remaining

☑ Confirm Changes

Review   Withdraw   Submit

✉ Contact Us

Exit | Save for Later | ◄ Previous | Next ►

Save for Later email confirmation – check and click OK.

Save for Later   ✕

Your In-Progress Supplier Change request will be saved and email communication regarding the request will be sent to: thareesh.bobba@utsw.edu

You may change to send emails to a different address.

OK   Cancel

Note: Any field with * in front is required field. Please fill all the required fields to move to next screen.

< Addresses   Supplier Change Request Save Confirmation

Supplier Change Request Save Confirmation

Save for Later

✔ Your in-progress change request has been saved.

Your Change Request ID   0000000020

Any email regarding the request status will be sent to:

thareesh.bobba@utsw.edu

≡ Return to Supplier Change Request Selection Page

🏠 Return to Supplier Home Page

Click Return to Supplier Home Page to navigate to home or Click Return to Supplier Change request selection page. On clicking the first link system will navigate to the following page

Email sent by system for the save for later confirmation

EXTERNAL MAIL

Your In-Progress registration form has been saved.

URL: http://swlxmocws1.swmed.edu:8050/psp/FMUAT92/SUPPLIER/ERP/c/SCR_MENU.SCR_VENDOR_SELECT.GBL?Page=SCR_VNDR_SELECT&Action=U

If you have any questions or feedback regarding your Request ID 0000000020, please call Supplier Maintenance at (214)-648-0800 email at UTSWAccounting@UTSouthwestern.edu.

Thank you,
UT Southwestern Medical Center
CAUTION: This email originated from outside UTSW. Please be cautious of links or attachments, and validate the sender's email address before replying.

< SCR Submission Confirmation   Supplier Change Request Selection   🏠 ⋮ ⊘

New Window | Personalize Pag

Supplier Change Request Selection

Select Supplier

*Supplier   Test Supreg0414

[Create New Request]

Pending Change Requests

Supplier ID	Name	Request ID	Change Status	Date		
0000138607	Test Supreg0414	0000000020	Save for Later	05/04/2022	✏	🗐

Field or Control	Description
Supplier	If Supplier user administers more than one supplier click drop down to select the right one and Create New Request
Request ID	Click Request ID hyperlink to review the changes added
Edit ✏	Click edit pencil to open the save for later change request to edit and submit
Withdraw 🗐	Click withdraw link to withdraw the change request meaning cancel it.

Note: Any field with * in front is required field. Please fill all the required fields to move to next screen.

Click edit to review and submit.

Click submit the change request.

Email sent to the contact email address on approval

Your supplier registration changes have been accepted.

Supplier ID: 0000138607
Short Name: TEST SUPRE-001
Supplier Name: Test Supreg0414
Additional Name:

If you have any questions or feedback regarding your Supplier Change Request ID 0000000020, please call Supplier Maintenance at (214)-648-0800 email at UTSWAccounting@UTSouthwestern.edu.

Thank you,
UT Southwestern Medical Center

_____

UT Southwestern

Medical Center

The future of medicine, today.

Note: Any field with * in front is required field. Please fill all the required fields to move to next screen.