

| Quick Reference Guide

>> Workshop Registration Tool Quick Reference Guide

in.gov/medicaid/providers

This quick reference guide provides instructions for accessing and using the Indiana Health Coverage Programs (IHCP) <u>Workshop Registration Tool</u>. The Workshop Registration Tool enables you and your staff to register for IHCP provider workshops and the annual seminar, change enrollment reservations, and review topics that will be covered in the sessions.

Registering for Workshops

To register for workshop sessions, you must sign up to access the registration tool by creating a workshop registrant profile. You need to create the profile only once, unless your email address changes. To create your profile, follow these steps:

- 1. From the home page of in.gov/medicaid/providers, select the **Provider Education** tab.
- 2. In the left panel, select **Workshop Registration** (see Figure 1).

Figure 1 – Provider Education > Workshop Registration



3. From the *Workshop Registration* page, choose **Launch Workshop Registration Tool** (see Figure 2).



Figure 2 – Launch the Workshop Registration Tool

 At the Workshop Registration Tool, click Create Workshop Registrant Profile (see Figure 3). If you already have a workshop registrant profile created, select Register for Workshops/Classes and skip to <u>step 8</u>.

Figure 3 – Workshop Registration Tool

weico	ome to the IHCP Workshop Registration Tool
The Ir up you	idiana Health Coverage Programs (IHCP) Workshop Registration Tool makes it easy for you to set ir workshop registrant profile and register for IHCP workshops and classes.
٥	Create Workshop Registrant Profile register for a workshop. If you try to register for courses without a registrant profile, we will not receive your information. If you are an IHCP provider, you will need your IHCP Provider ID number to create a registrant profile.
	 Edit Registrant Information - Edit an existing registrant profile to update contact information. The name and email address fields are not editable on an existing profile. If this information has changed, a new profile must be created.
٥	Register for Workshops/Classes - Register for workshops and sign up for classes. You must have a registrant profile before you can register for a workshop or class.
	Search for/View an Existing Registration - Search, view, and print your registration and class schedules for upcoming workshops.
	Modify an Existing Registration - Change or add classes to workshops for which you are already registered. You can also ask to be added to the waiting list for courses that are full. You must have the confirmation number from your original registration to be added to a waiting list.
•	Workshop Registration Tool Quick Reference - The quick reference tool includes your contact information, as well as instructions for creating a registrant profile, registering for a workshop, and signing up for classes.

5. At the *Workshop Registration – Create Workshop Registrant Profile*, complete the requested information. Fields marked with an asterisk (*) are required (see Figure 4).

Fiaure 4 –	Workshop	Reaistration -	- Create	Workshop	Registrant	Profile

A valid email address i	n: is required for registration.
If you do not have one	, visit: <u>Yahoo</u> or <u>Gmail</u> for a free account.
For basic security, pleatelephone number. Evalution able to view your busin	ase use your business information and do not include your private address or en though this information will not be shared with anyone, other registrants may ness information.
*Required Information	
*First Name:	
*Last Name:	
Are you (or do you wo	rk for) an IHCP-enrolled provider?: Yes 💿 No 🔾
*IHCP Provider ID:	
*Business Name:	
*Business Address:	
*Citur	
*State:	IN Indiana N
*7IP Code:	
*Business Phone:	
*Email:	
*Confirm Email:	
Fax:	Submit
Return to the Works Return to the main me	hop Registration Main Menu - enu to access other IHCP workshop registration features.

- *Note:* To access help for the Create Workshop Registrant Profile page, click **Submit** at the bottom of the page before entering information in any of the fields. The help text displays in red. If you still have questions, call the IHCP Provider Workshop Line at 317-488-5072. Leave a message with your name and telephone number, and your call will be returned within two business days.
- 6. After completing the form, click **Submit**. If your entry contains an error, such as missing information, the red help text appears next to the missing information. After making the necessary corrections, click **Submit** again.
- When the form is complete and submitted, the *Workshop Registration Email Address Confirmation* page appears. Confirm that your email is correct and click **Sign up for Workshops** and **Classes** (see Figure 5).



8. At the *Workshop Registration – Register for Workshops/Classes* page, click **Display All Workshops** (see Figure 6).

Fiaure 6 -	Workshop	Reaistration	- Reaister for	Workshops/Classes	page
J · · ·					1 - 3 -

	Search for a Workshop: Display All Workshops
Location:	Search All Locations
Date Range: Select from calendar	From: 07/03/2019
or use MM/DD/YYYY format to enter dates	To: 01/03/2020
	Search
Return to the Return to the	e <u>Workshop Registration Main Menu</u> - a main menu to access other IHCP workshop registration features.
f there are any questions, eturned within 2 business	please call the IHCP Provider Workshop Line at (317) 488-5072. Calls will t days.

 The lower portion of the Workshop Registration – Register for Workshops/Classes page populates with available workshops (see Figure 7). Click **Register** to the left of the workshop you would like to attend.

Note: If you are interested in a specific date or range of dates, or want to search by location, use the **Location** and **Date Range** features to narrow your search.

	Display A	Il Workshops	
ocation:	Search All Locations		~
ate Range: elect from calendar	From: 07/03/2019		
r use MM/DD/YYYY ormat to enter dates.	To: 01/03/2020		
	S	earch	
Worksh	ор	Location	Dates
Register Hospital	2019 IU Bloomington	IU Health Bloomington - Bloomington, IN	Start Date: 07/09/2019 End Date: 07/09/2019
Register Hospital	2019 IU Methodist	Indiana University Health Methodist Hospital - Indianapolis, IN	Start Date: 07/18/2019 End Date: 07/18/2019
Register	2019 Lutheran Hospita	l Lutheran Hospital - Fort Wayne, IN	Start Date: 07/16/2019 End Date: 07/16/2019
Register	2019 Reid Hospital	Reid Hospital - Richmond, IN	Start Date: 07/25/2019 End Date: 07/25/2019
Register Hospital	2019 St. Catherine	St. Catherine Hospital - East Chicago, IN	Start Date: 07/11/2019 End Date: 07/11/2019
Register Regiona	2019 St. Joseph I Medical Center	St Joseph Regional Medical Ctr Mishawaka - Mishawaka, IN	Start Date: 07/12/2019 End Date: 07/12/2019
	Workshop Registrati	on Main Menu -	

- 10. At the *Workshop Registration Register for a Workshop* page, enter the email address used to create the workshop registrant profile (see Figure 8). (*Note: This email address must match the email in your profile.*)
- 11. Click **Go** beside the email address entered.

u have selected to registe	r for the following workshop continue registrat	. Please enter yoι ion.	ır email address below
Workshop	Location	Dates	Registration Deadline
Summer 2019 Reid Hospital	Reid Hospital - Richmond, IN	07/25/2019 - 07/25/2019	07/23/2019
ttendees must have comp Already signed up? Enter	leted a workshop registrant Create a Workshop Regist the attendee's email address to Email	profile before reg rant Profile continue and reg	istering for a workshop ister for this workshop:
Already registere	d? Enter your confirmation nun Confirmation #:	nber to sign up for	more classes.
Return to <u>Regis</u> Search for anoth	ter for Workshops/Classes - er workshop at a different loca	tion or date range.	
Return to the W Return to the ma	Internation Main Main Main Main Main Main Main Mai	<mark>lenu</mark> - workshop registra	tion features.

Figure 8 – Workshop Registration – Register for a Workshop Page

Note: If you are registering on behalf of someone else in your organization who does not have a profile, you must first create a profile for that registrant by choosing **Create a Workshop Registrant Profile**. After a registrant's profile is established, the window automatically populates with the registrant's name and provider/place of business (see Figure 9).

The email used to register for a workshop must always match an email address used to create a workshop registrant profile.

12. Click **Register** to continue confirming your registration (see Figure 9).

Figure 9 – Register for a Workshop Page Showing Registrants and Their Providers/Places of Business

ou have selected to register	for the following workshop continue registrat	. Please enter you ion.	r email address belo
Workshop	Location	Dates	Registration Deadline
Summer 2019 Reid Hospital	Reid Hospital - Richmond, IN	07/25/2019 - 07/25/2019	07/23/2019
ttendees must have comp	eted a workshop registrant Create a Workshop Regist	profile before registrant Profile	stering for a worksh
Aiready signed up? Enter t	Email: Email address	Go Go	ster for this workshop.
Plea	se select the <i>Register</i> link b	elow to continue:	
Registrant	Provider/Place of	Business	
Registrant Name	Provider/Place of Registrant Place of Busin	Business	Register
Registrant Registrant Name Already registered	Provider/Place of Registrant Place of Busin Place of Busin Place of Busin	Business less nber to sign up for n	Register
Registrant Registrant Name Already registered	Provider/Place of J Registrant Place of Busin Place of Busin Place of Busin Place of Busin Place of Busin Place of Busin Place of Place of	Business nber to sign up for n Go	Register nore classes.
Registrant Name Already registered C Return to <u>Regis</u>	Provider/Place of J Registrant Place of Busin ? Enter your confirmation num confirmation #: ter for Workshops/Classes -	Business nber to sign up for n Go	Register
Pogistrant Registrant Name Already registered C Return to <u>Regis</u> Search for anoth	Provider/Place of J Registrant Place of Busin ? Enter your confirmation num confirmation #: ter for Workshops/Classes - er workshop at a different loca	Business less nber to sign up for n Go tion or date range.	Register nore classes.
Pogistrant Registrant Name Already registered C Return to <u>Regis</u> Search for anothe Return to the <u>W</u> Return to the ma	Provider/Place of J Registrant Place of Busin I? Enter your confirmation num confirmation #: ter for Workshops/Classes - er workshop at a different loca orkshop Registration Main M in menu to access other IHCP	Business ness nber to sign up for n Go tion or date range. <u>Aenu</u> - workshop registrati	Register nore classes.

13. Click **Confirm Your Registration** (see Figure 10).

Important: This step is not the final step to complete the registration process.

kshop Registration - Regis elcome RegistrantX, you have sel Confi	ter for a Workshop ected to register for the following workshop. Please select irm Your Registration below.
Workshop:	Summer 2019 Reid Hospital
Start Date:	07/25/2019
End Date:	07/25/2019
Registration Deadline:	07/23/2019
Location:	Reid Hospital Richmond, IN
Confirm that this is the Return to <u>Select a Differen</u> Search for another worksho Return to the <u>Workshop F</u> Return to the main menu to	onfirm Your Registration - e correct workshop that you want to register for. nt Workshop - p at a different location or date range. Registration Main Menu - access other IHCP Workshop Registration features.
e are any questions, please call the	IHCP Provider Workshop Line at (317) 488-5072. Calls will be

Figure 10 – Confirm Your Registration

14. After you register for a workshop, you must select all, or some, of the sessions you want to attend at that workshop (see Figure 11) by choosing the radio button under **Select Class** and then clicking **Signup and Confirm Workshop Registration**.

tant: Your re	gistration is not complete	until you co	omplete step	0 14.	
Figure 11 – Select the Sessions You Would Like To Attend					
Course: FSSA - Medicaid Questions					
Description: F	Participate in an interactive qui	z show while le	earning about N	Medicaid	
Date	Time	Room	Capacity	Select Clas	
10/05/2021	11:30 AM - 12:30 PM	WebEx 2	0/100	0	
Signup and C	onfirm Workshop Registration	Cancel Re	gistration		
Course: FSSA Description: I	- Pharmacy Benefit n-depth review of fee-for-servi	ce (FFS) pharr	nacy benefit		
Date	Time	Room	Capacity	Select Clas	
10/05/2021	9:30 AM - 10:30 AM	WebEx 2	0/100	0	
Signup and C	onfirm Workshop Registration	Cancel Re	gistration		

15. The *Workshop Registration – Register for a Workshop* page appears. The selected session, location, start date, end date, and time are displayed. Your confirmation number will also appear on the page. This process must be repeated when selecting multiple sessions. **Always note your confirmation number and print the confirmation page** (see Figure 12).

Figure 12 – Note Your Confirmation Number and Print a Confirmation



Note: You must have your confirmation number to verify information, make changes, select additional sessions, cancel registration for individual sessions, or cancel the entire workshop registration.

Canceling Your Registration

- If you have already signed up for a workshop and individual sessions and would like to cancel your registration, return to the Workshop Registration Main Menu and select **Modify an Existing Registration** (see <u>Figure 3</u>).
- 2. You will now be able access your workshop registration information, if necessary, by entering your confirmation number in the **Confirmation #** field and clicking **Search** (see Figure 13).

Workshop Registration - Mo	dify an Existing Registration
Enter your confirm	nation number to modify an existing registration:
Confirmation #:	Search
Return to the Workshi	op Registration Main Menu -
Return to the main men	u to access other IHCP workshop registration features.
If there are any questions, please call returned within 2 business days.	the IHCP Provider Workshop Line at (317) 488-5072. Calls will be

Figure 13 – Enter Confirmation Number to Verify or Modify Information

3. To cancel per class, click the Cancel link in the **Select Class** field. To cancel the entire registration, click the **Cancel** button to cancel your registration for a selected session (see Figure 14). This step must be done for each individual session for which registration is being canceled.



Registration Tips

Here are some general tips to make registering for IHCP workshops easier:

- You cannot be registered in two sessions scheduled for the same time slot. If you attempt to do so, the registration tool prompts you to make another selection. To change registration from one session to another **concurrent** session, you must cancel your registration in the first session before registering for the replacement session.
- If you would like to sign up for additional sessions after you have registered for a workshop and a session, click **Sign up for More Classes** (see <u>Figure 12</u>). You can also use this feature to modify your existing registration for this workshop.
- If you have questions, please call the IHCP Provider Workshop Line at 317-488-5072 and leave a message with your name and telephone number. Your call will be returned within two business days.

Thank you for participating in IHCP workshops and seminars!