

# Indiana Division of Disability and Rehabilitative Services

Vocational Rehabilitation Claim Payment System  
Vendor Registration User Guide

April 6, 2018

## How to Complete VR Vendor Account Request

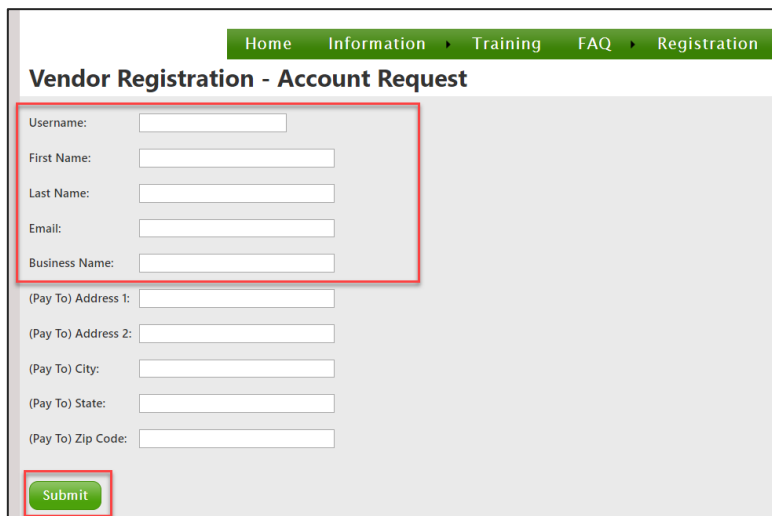
1. Select/Click on **Registration**.



2. Select/Click on **Vendor Account Request**.



3. Enter information in **the Username, First Name, Last Name. Email and Business Name** fields. Information can be entered in the non-required "(Pay To) fields.
4. Select/Click on **Submit**.

A screenshot of the 'Vendor Registration - Account Request' form. The form is titled 'Vendor Registration - Account Request' and has a navigation bar at the top with 'Home', 'Information', 'Training', 'FAQ', and 'Registration'. The form contains several input fields: 'Username:', 'First Name:', 'Last Name:', 'Email:', and 'Business Name:'. These five fields are grouped together and highlighted with a red rectangular box. Below these fields are six more input fields: '(Pay To) Address 1:', '(Pay To) Address 2:', '(Pay To) City:', '(Pay To) State:', and '(Pay To) Zip Code:'. At the bottom of the form, there is a green 'Submit' button, which is also highlighted with a red rectangular box.

*A message stating “Your vendor registration account request has been accepted. You should receive an email here shortly, with your login credentials.”*



## How to Login

1. Enter information in the **Username**, and **Password** fields, then select/click on the **Login** button.



The screenshot shows the login page for the Indiana Vocational Rehabilitation Claim Payment System. At the top, there is a banner with the text "Welcome to the Indiana Vocational Rehabilitation Claim Payment System" and a sub-header "This site is developed for the Indiana Vocational Rehabilitation vendors to submit claims for vocational rehabilitation services and products." Below the banner, there are three main sections: "Login Here", "Weekly Tips", and "System News".

**Login Here**

User name:  **Required.**  
Password:  **Required.**

[Login](#)

[Forgot Username](#) | [Forgot Password](#)

**Weekly Tips**

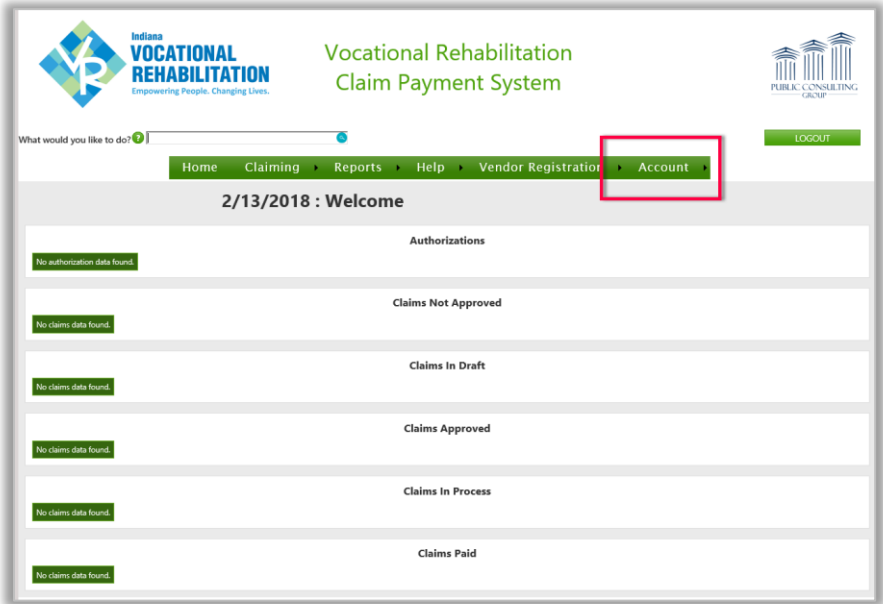
[View More Links](#)

**System News**

[View More Links](#)

# How to Reset Password

- 1. Select/Click on **Account**.



- 2. Select/Click **My Account**.



3. Enter information in the **Current Password**, **New Password** and **Confirm Password** fields, then select/click on **Change Password**.

The screenshot displays a web interface titled "My Account". It is divided into two main sections: "Update Account" and "Update Password".

**Update Account Section:**

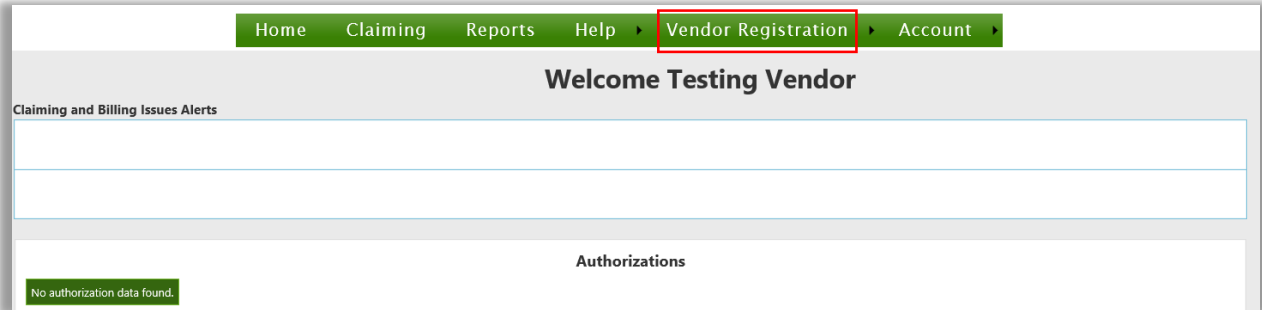
- First Name: Vocational
- Last Name: Rehabilitation
- Email Address: training@training.com
- Update Account button

**Update Password Section (highlighted with a red box):**

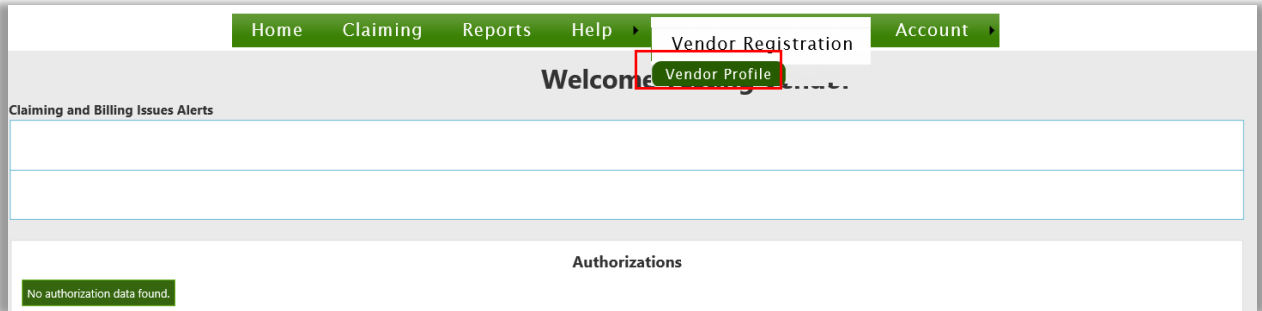
- Current Password: [masked]
- New Password: [masked]
- Confirm Password: [masked]
- Change Password button

# How to Complete Vendor Registration

- 1. Select/Click on **Vendor Registration**.



- 2. Select/Click **Vendor Profile**.



## General Information Tab

1. Select/Click a **User Type**.

**Profile**

Please review each tab (General Information, Addresses, Current Service Location, Banking Information and Services/Goods) prior to submitting your application for State review

General Information | Addresses | Current Service Location | Banking Information | Services/Goods

Be advised - Changes to certain information must be verified by State of Indiana before payments will be released

Certification Status:  
Not Certified  
Approval Status:  
Not available at this time

**UserType**  
Business

Business Name: \_\_\_\_\_ Business Website: \_\_\_\_\_ First Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_ Doing Business As (DBA): \_\_\_\_\_  
PeopleSoft ID: \_\_\_\_\_ Client ID: \_\_\_\_\_ FEIN/Federal ID: \_\_\_\_\_  
Vendor Bidder Number: \_\_\_\_\_ Vendor Classification: \_\_\_\_\_ DUNS Number: \_\_\_\_\_  
Agency Primary Contact First Name: \_\_\_\_\_ Agency Primary Contact Last Name: \_\_\_\_\_ Agency Primary Contact Title: \_\_\_\_\_  
Agency Primary Contact Email: \_\_\_\_\_

2. Enter information in the **Business Website, First Name, Last Name, DBA, FEIN/Federal ID, Vendor Bidder Number, Vendor Classification, DUNS Number, Agency Primary Contact First Name, Agency Primary Contact Last Name, Agency Primary Contact Title and Agency Primary Contact Email** fields.

**Profile**

Please review each tab (General Information, Addresses, Current Service Location, Banking Information and Services/Goods) prior to submitting your application for State review

General Information | Addresses | Current Service Location | Banking Information | Services/Goods

Be advised - Changes to certain information must be verified by State of Indiana before payments will be released

Certification Status:  
Not Certified  
Approval Status:  
Not available at this time

**UserType**  
Business

Business Name: VR Testing Business Website: \_\_\_\_\_ First Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_ Doing Business As (DBA): \_\_\_\_\_  
PeopleSoft ID: \_\_\_\_\_ Client ID: \_\_\_\_\_ FEIN/Federal ID: \_\_\_\_\_  
Vendor Bidder Number: \_\_\_\_\_ Vendor Classification: \_\_\_\_\_ DUNS Number: \_\_\_\_\_  
Agency Primary Contact First Name: \_\_\_\_\_ Agency Primary Contact Last Name: \_\_\_\_\_ Agency Primary Contact Title: \_\_\_\_\_  
Agency Primary Contact Email: \_\_\_\_\_



- 3. Enter information in the **Secondary Contact** section (if applicable). Enter information in the **Pay-To Address**, **First Phone Number**, **Second Phone Number** (if applicable) and the **Third Phone Number** (if applicable) section.

The screenshot shows five distinct form sections on a green background. The 'Secondary Contact' section includes fields for Contact Type (dropdown), Contact Title, Contact First Name 2, Contact Last Name 2, and Email 2. The 'Pay-To Address' section includes Address 1, Address 2, City, State, and Zip. The 'First Phone Number' section includes Area Code, Phone Number, and Extension. The 'Second Phone Number' section includes Phone Type (dropdown), Primary? (checkbox), Area Code, Phone Number, and Extension. The 'Third Phone Number' section includes Phone Type (dropdown), Primary? (checkbox), Area Code, Phone Number, and Extension.

- 4. Complete the Business Classification Section. Select a **Business Type**. Select an answer to the **Current Vocational Rehabilitation Services Vendor** question. Select an answer to the **Outstanding Federal or State Tax Debt** question.

The screenshot shows the 'Business Classification' section with three radio button options: Private Community Rehabilitation Program (CRP), Public Service Provider, and Other Private Service Provider. Below this are two dropdown menus: 'Current Vocational Rehabilitation Services Vendor?' and 'Outstanding Federal or State Tax Debt?'. Red boxes highlight the dropdown arrows for both menus.

- 5. Enter Credential Information (if applicable). Select a **Credential Type**, select a **Credential Status**. Enter information in the **State Issued By**, **Issue Date**, **Expiry Date**, **Staff Name** and **License Number** fields.

The screenshot shows the 'Credential Information' section. It includes dropdown menus for 'Credential Type' and 'Credential Status'. Below these are text input fields for 'Issue Date', 'Expiry Date', 'State Issued By', 'Staff Name', and 'License Number'. Red boxes highlight the dropdown arrows for 'Credential Type' and 'Credential Status', and the text input fields for 'Issue Date', 'Expiry Date', 'State Issued By', 'Staff Name', and 'License Number'.

6. Upload registration documents in the Supporting Documentation section. Select a **Document Type**. Select/Click on **Browse**. Enter a **File Name** then select/click on the **Upload** button.

The screenshot shows the 'Supporting Documentation' section with the text 'No registration documents found.' Below this is a 'Valid files: Any' dropdown menu. To the right of the dropdown are three buttons: 'Browse...', 'Enter file name', and 'Upload'. Below the dropdown is a list of document types with checkboxes: 'Uploaded Business Entity Form', 'Uploaded Vendor Rates', 'Uploaded Background Check', and 'Uploaded IRS Form W-9'. At the bottom left is an 'Update' button.

Select/Click on the **View** button to view the uploaded document.

Select/Click on the **Delete** button to remove the uploaded document.

The screenshot shows the 'Supporting Documentation' section with a table of uploaded documents. The table has columns for 'Name', 'Type', and 'Uploaded Date'. The first row shows 'Training' as the name, 'Business Entity Form from Secretary of State' as the type, and '02/14/2018 1:43 PM' as the upload date. To the right of the table are 'View' and 'Delete' buttons. Below the table is a 'Valid files: Any (\*.\*)' dropdown menu with 'Business Entity Form from Secretary of State' selected. To the right of the dropdown are 'Browse...', 'Enter file name', and 'Upload' buttons. Below the dropdown is a list of document types with checkboxes: 'Uploaded Business Entity Form', 'Uploaded Vendor Rates', and 'Uploaded Background Check'.

7. Select/Click on the **Update** button to save information entered.

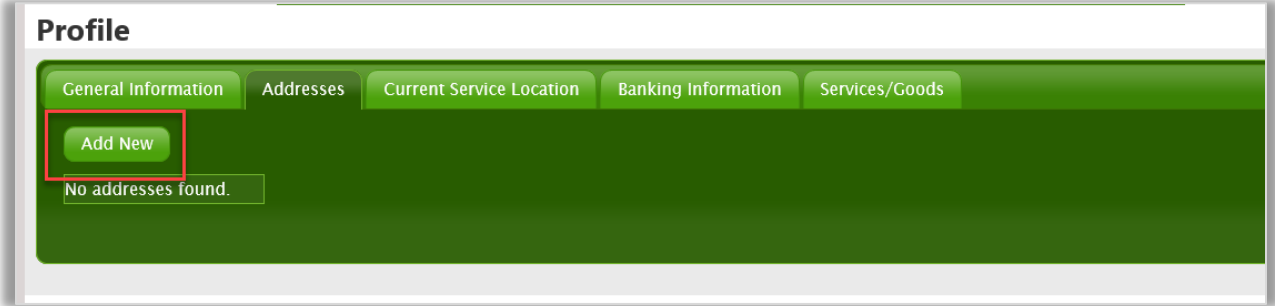
The screenshot shows the 'Supporting Documentation' section with the text 'No registration documents found.' Below this is a 'Valid files: Any' dropdown menu. To the right of the dropdown are three buttons: 'Browse...', 'Enter file name', and 'Upload'. Below the dropdown is a list of document types with checkboxes: 'Uploaded Business Entity Form', 'Uploaded Vendor Rates', 'Uploaded Background Check', and 'Uploaded IRS Form W-9'. At the bottom left is an 'Update' button.

## Addresses Tab

1. Enter Address information. Select/Click on the **Addresses** tab.

The screenshot shows the 'Profile' section with a navigation bar containing five tabs: 'General Information', 'Addresses', 'Current Service Location', 'Banking Information', and 'Services/Goods'. The 'Addresses' tab is selected. Below the navigation bar is a message: 'Be advised - Changes to certain information must be verified by State of Indiana before payments will be released'. At the bottom right is a 'Submit' button. Below the message is the 'Certification Status' and 'Approval Status' information: 'Certification Status: Not Certified' and 'Approval Status: Not available at this time'.

2. Select/Click on the **Add New** button.



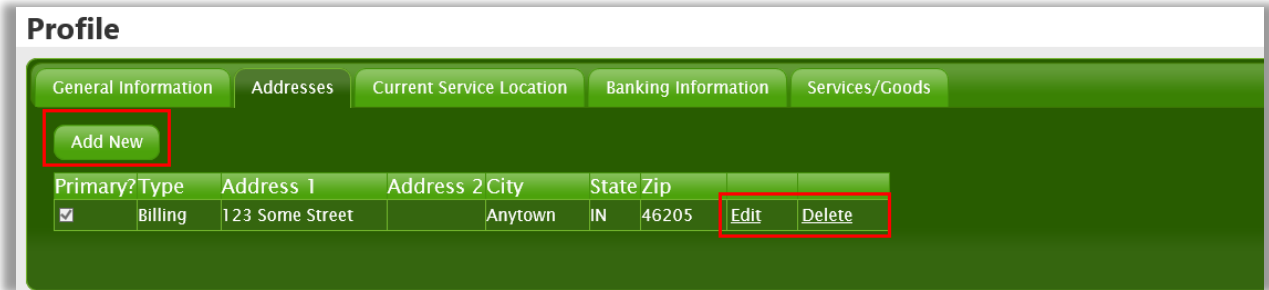
3. Enter **Vendor Address**. Select an **Address Type**, indicate if address is primary, enter address details. Select/Click on the **Add** button.



Multiple addresses can be added to a vendor’s Address tab by selecting/clicking on the **Add New** button and repeating the previous steps.

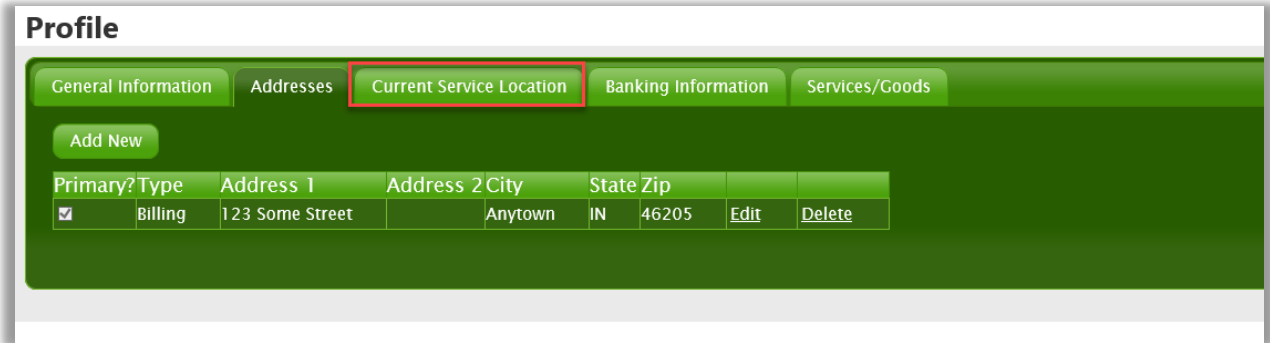
Select/Click on the **Edit** link to update or correct address information entered.

Select/Click on the **Delete** link to remove address information entered.

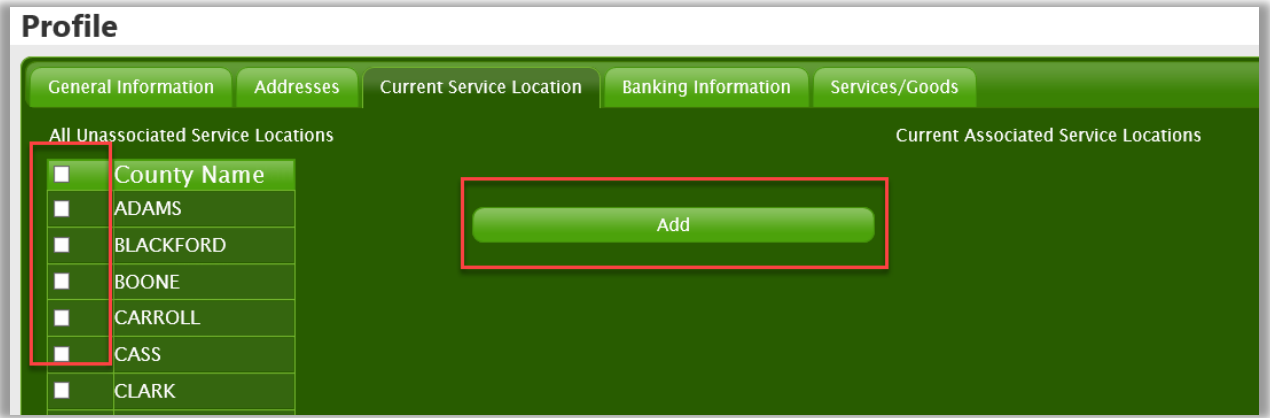


### Current Service Location Tab

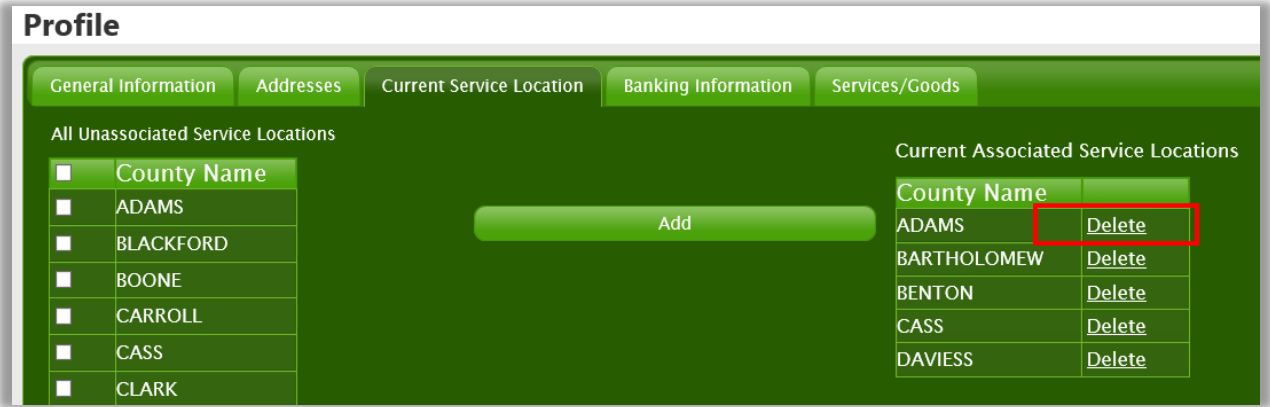
1. Select/Click on the **Current Service Location** tab.



2. Select/Click on the checkbox to select a **County Name**, then select/click on the **Add** button.

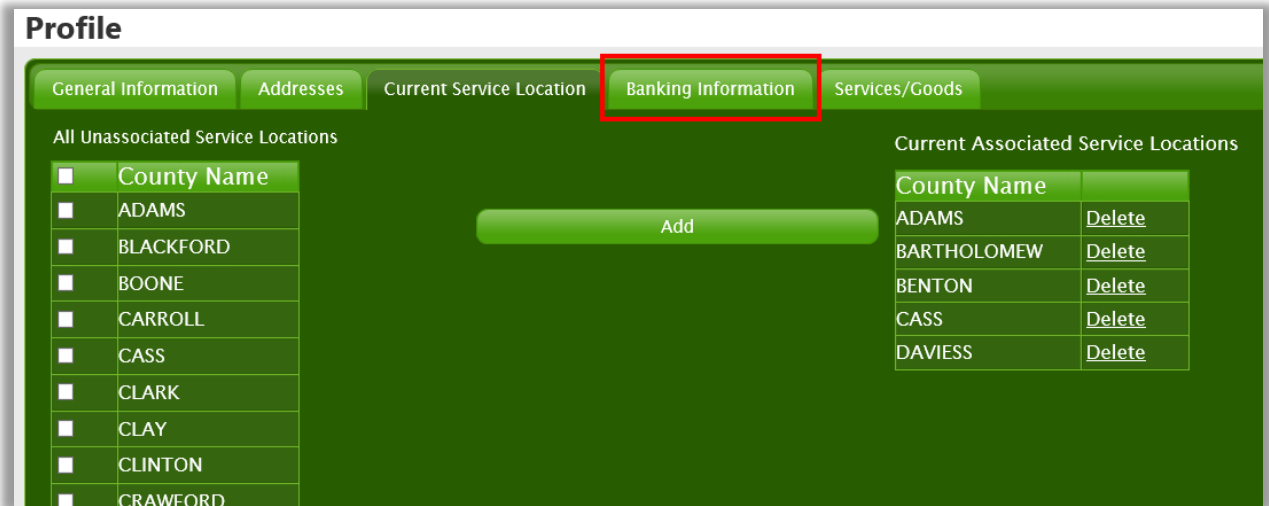


Select/Click on the **Delete** link to remove a county.

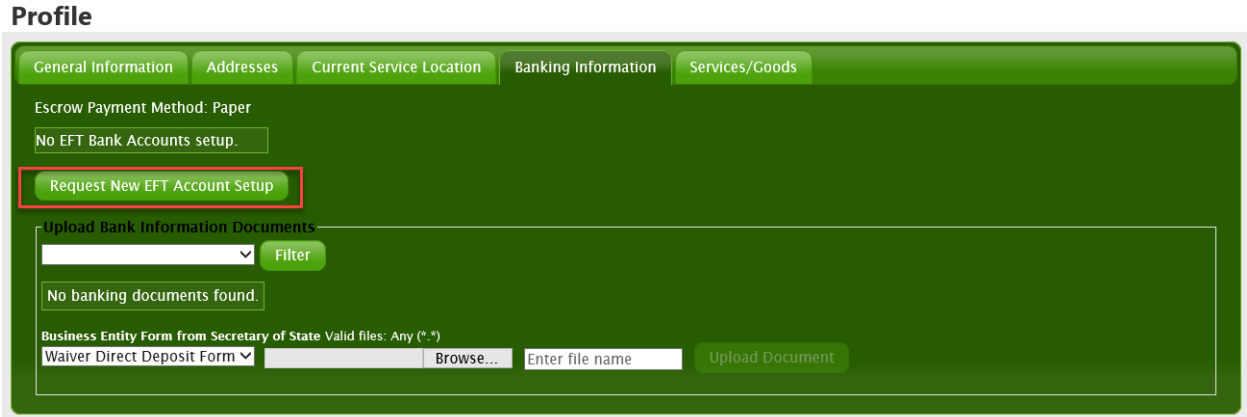


## Banking Information

1. Select/Click on the **Banking Information** tab.



2. Select/Click on the **Request New EFT Account Setup** button.



3. Enter banking information in the **Routing Number, Confirm Routing Number, Account Number, Confirm Account Number, Account Description, Contact Email Address** and **Confirm Contact Email Address** fields.

**EFT Setup Request**

Routing Number <input type="text"/>	Confirm Routing Number <input type="text"/>
Account Number <input type="text"/>	Confirm Account Number <input type="text"/>
Account Description <input type="text"/>	
Contact Email Address <input type="text"/>	Confirm Contact Email Address <input type="text"/>

4. Select/Click on the **Submit** button.

**EFT Setup Request**

Routing Number <input type="text"/>	Confirm Routing Number <input type="text"/>
Account Number <input type="text"/>	Confirm Account Number <input type="text"/>
Account Description <input type="text"/>	
Contact Email Address <input type="text"/>	Confirm Contact Email Address <input type="text"/>

### Upload Waiver Direct Deposit Form

**The Waiver Direct Deposit Form includes submittal of documentation from a banking institution indicating that the vendor is not permitted to obtain a checking account.**

1. Select/Click on **Browse**. Enter a **File Name** then select/click on the **Upload** button

The screenshot shows the 'Upload Bank Information Documents' interface. At the top, there is a search filter with a dropdown menu and a 'Filter' button. Below this, a message states 'No banking documents found.' The main section is titled 'Valid files: Any' and contains a dropdown menu with 'Waiver Direct Deposit Form' selected. To the right of the dropdown are three input fields: 'Browse...' (highlighted with a red box), 'Enter file name' (highlighted with a red box), and 'Upload Document' (highlighted with a red box).

2. Enter information in the **First Name**, **Middle Name** (if applicable), **Last Name** and **Date Bank Signed Waiver** fields, then select/click on the **Save** button.

The screenshot shows the 'Upload Bank Information Documents' interface. At the top, there is a search filter with a dropdown menu and a 'Filter' button. Below this, a table displays the following information:

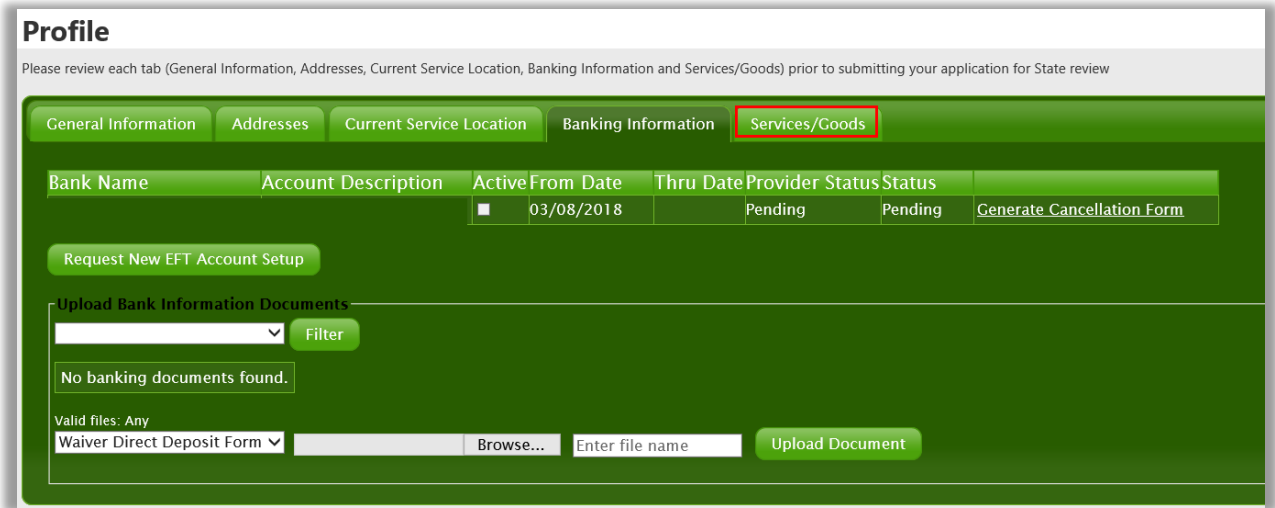
Name	Type	Uploaded Date	View	Delete
Training	Waiver Direct Deposit Form	02/16/2018 05:30 PM	View	Delete

Below the table, there is a section titled 'Business Entity Form from Secretary of State' with the text 'Valid files: Any (\*.\*)'. It contains a dropdown menu with 'Waiver Direct Deposit Form' selected, followed by 'Browse...' (highlighted with a red box), 'Enter file name' (highlighted with a red box), and 'Upload Document' (highlighted with a red box).

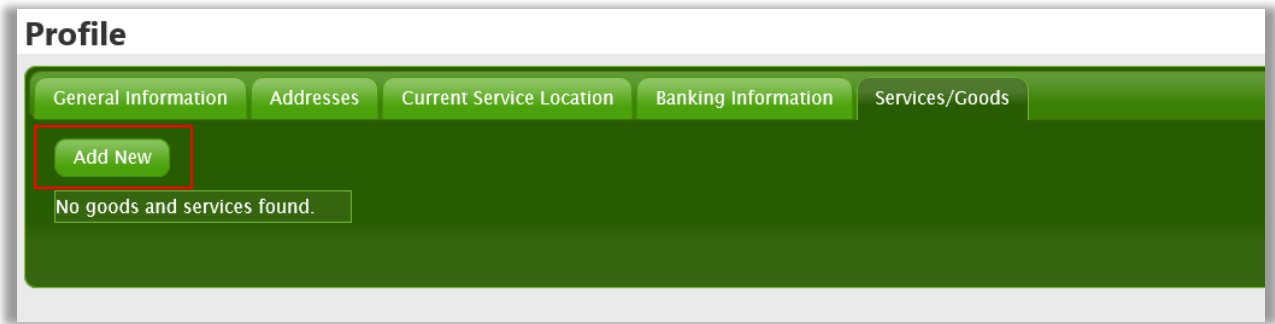
At the bottom, there is a form with the following fields: 'First Name:', 'Middle Name:', 'Last Name:', and 'Date Bank Signed Waiver:'. Each field has a corresponding text input box. A 'Save' button is located to the right of the 'Last Name' field. The entire form area is highlighted with a red box.

### Services/Goods Tab

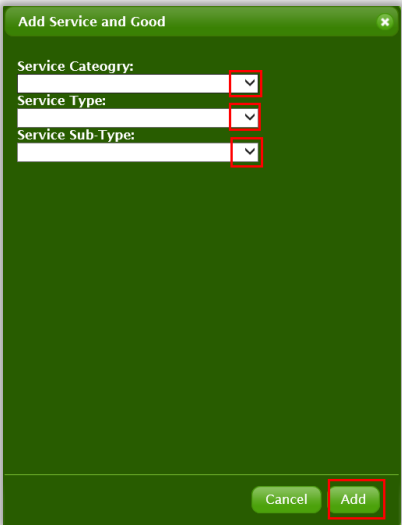
- 1. Select/Click on the **Services/Goods** tab.



- 2. Select/Click on the **Add New** button.



- 3. Enter Services/Goods information. Select a **Service Category**, **Service Type** and **Service Sub-Type** and select/click on the **Add** button.





Select/Click on the **Delete** link to remove a service/good.

**Profile**  
Please review each tab (General Information, Addresses, Current Service Location, Banking Information and Services/Goods) prior to submitting your application for State review

General Information | Addresses | Current Service Location | Banking Information | Services/Goods

Submit Registration

Add New

Service Category	Service Type	Service Sub-Type	Description	Last Modified	
Rehabilitation Technology	Vehicle Modification	Vehicle Modification Evaluators		3/7/2018	Delete
Training	Occupational/Vocational/Technical Training			3/7/2018	Delete

4. Select/Click on the **Submit Registration** button.

**Profile**  
Please review each tab (General Information, Addresses, Current Service Location, Banking Information and Services/Goods) prior to submitting your application for State review

General Information | Addresses | Current Service Location | Banking Information | Services/Goods

Submit Registration

Add New

Service Category	Service Type	Service Sub-Type	Description	Last Modified	
				3/8/2018	Delete

5. Once your Vendor Registration is submitted. Indiana FSSA staff will review your registration. The approval process can take up to 4 to 6 weeks. Once the registration review is completed, the primary contact will receive an auto-generated email from [VRNOREPLY@fssa.in.gov](mailto:VRNOREPLY@fssa.in.gov)