Workers' Compensation Medicare Set-Aside Portal (WCMSAP)

Webinar

Note: Coordination of Benefits (COB) activities for both Group Health Plans and Non-Group Health Plans (that is, liability insurance (including self-insurance), no-fault insurance, and workers' compensation laws or plans) and Recovery activities for Non-Group Health Plans will be transitioned from the COB contractor (COBC) and the Medicare Secondary Payer Recovery Contractor (MSPRC) effective February 1, 2014. The new Benefits Coordination & Recovery Center (BCRC) will assume these activities. Due to its historical content, this webinar presentation has not been updated with the new contractor name (BCRC).

Welcome to the Workers' Compensation Medicare Set-Aside Portal (WCMSAP) Webinar. The topics that will be discussed today include: the current WCMSA proposal submission process, the new submission process on the WCMSAP and an overview on the WCMSAP screens that will be used to enter and submit a Workers' Compensation Medicare Set-Aside Arrangement (WCMSA) proposal.
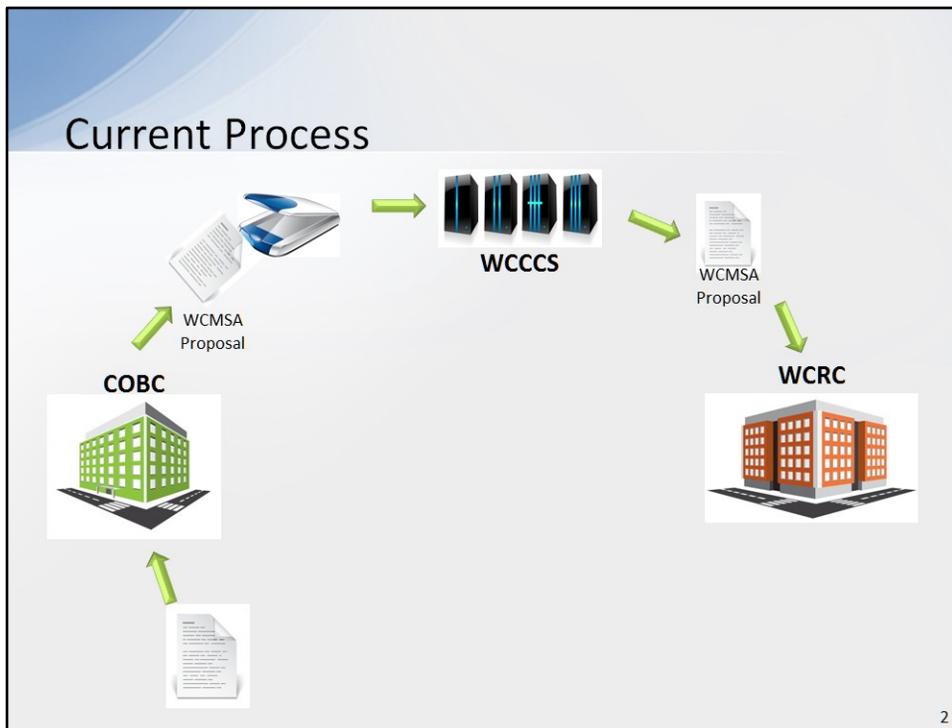
Current Process

Currently, the initial processing of WCMSA proposals are handled manually by the Coordination of Benefits Contractor (COBC). A WCMSA proposal, including all paper documentation, is sent to the COBC. All eligible WCMSA proposals are then physically scanned into the Workers' Compensation Case Control System (WCCCS) in order to create a workers' compensation record on Medicare's System of records, i.e., the Common Working File (CWF). The WCCCS then electronically forwards these WCMSA proposals to the Workers' Compensation Review Contractor (WCRC) for independent review to assess both future medical and prescription drug costs.

The WCMSAP

- The COBC along with the CMS have enhanced the current process by implementing the WCMSAP
  - A web-based application that allows for the electronic submission and tracking of WCMSA proposals submitted to CMS for review
    - Internet access is required

The Coordination of Benefits Contractor (COBC) along with the Centers for Medicare & Medicaid Services (CMS) have enhanced the current process by implementing the WCMSAP. The WCMSAP is a web-based application that allows for the electronic submission and tracking of WCMSA proposals submitted to CMS for review. As a web-based application, users will need Internet access to be able to get into the system.

The WCMSAP

WCMSAP users will be able to submit and track WCMSA proposals independently

- Submitters will be notified electronically of any missing documentation or incorrect data

Appending new documents and/or replacing documentation is handled by the submitter through the WCMSAP

WCMSAP users will be able to submit and track WCMSA proposals independently without the need to make an inquiry to the COBC or CMS. Submitters will be notified electronically if any case documentation is missing or if any data was entered incorrectly. Appending new documents and/or replacing documentation to the WCMSA proposal will be handled directly by the submitter through the WCMSAP.

The WCMSAP

Once a case has been entered, the submitter will be able to access the case on the WCMSAP

Phone calls to obtain case status will no longer be necessary

- Status on a given case can be viewed, on a real-time basis, via the web portal

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Once a case has been entered on the WCMSAP, the submitter will be able to access the case on the WCMSAP. Phone calls to obtain case status information will no longer be necessary; status on a given case can be viewed, on a real-time basis, via the web portal.

The WCMSAP

- Authorized submitters (i.e., attorneys, beneficiaries, claimants, insurance carriers, representative payees, and WCMSA vendors) can
  - Create a work-in-progress case
  - Submit a case
  - Perform a case lookup
  - Append (or replace) documentation to a case
  - Receive alerts relating to case activity

Note: a work-in-progress case is a WCMSA proposal that was partially entered and saved, but not yet completed

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The WCMSAP allows authorized submitters (i.e., attorneys, beneficiaries, claimants, insurance carriers, representative payees, and WCMSA vendors) to: create a work-in-progress case, submit a case, perform a case lookup, append (or replace) documentation to a case, and receive alerts relating to case activity.

Note: a work-in-progress case is a WCMSA proposal that was partially entered and saved on the WCMSAP, to be completed and submitted at a later date. This option gives the user the opportunity to gather necessary case information prior to submitting a case to CMS for review.

The WCMSAP and WCCCS Interface

- COBC will continue to support the manual submission of WCMSA proposals

- WCMSA proposals submitted by mail or CD-ROM
  - Not accessible on the WCMSAP
  - Only accessible on the WCCCS

- WCMSAP users cannot view/access any case that was manually processed by the COBC

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The COBC will continue to support the manual submission of WCMSA proposals. However, any case that is submitted by mail or by CD-ROM will not be accessible on the WCMSAP. It will only be accessible on the WCCCS. This means WCMSAP users will not be able to view or access any case that was manually processed by the COBC.

WCMSAP Users

Must register, be vetted and complete account setup before access will be granted

Once authorized, users can enter and submit WCMSA proposals and corresponding documentation directly

In order to gain access to the WCMSAP, potential users must register, be vetted and complete account setup. Once users are authorized, they will be able to enter and submit WCMSA proposals and any corresponding documentation directly into the WCMSAP.

Registration Process

- Submitters must determine their account type
  - Corporate
  - Representative
  - Self
- Submitters can only select one account type
- Account type determines the information captured during registration and the level of vetting

Before beginning the registration process, submitters must determine their account type. There are three types of WCMSAP accounts: Corporate, Representative, and Self. Submitters can only select <u>one</u> account type. The account type selected determines both the basic information that is captured during the registration process and the level of vetting that is subsequently undertaken.

Account Types

- **Corporate account**
  - Submitter is registering as a corporate entity with an EIN
  - Will regularly submit WCMSAP cases

- **Representative account**
  - Submitter is a non-corporate WCMSAP user
  - Does not have an EIN, but will submit multiple cases

- **Self submitter account**
  - Submitter is a Medicare beneficiary, or an individual with a reasonable expectation of becoming a Medicare beneficiary
  - Will submit the case for themselves

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A corporate account indicates that the submitter is registering as a corporate entity with an Employer Identification Number (EIN). Those registering as a Corporate account will regularly submit WCMSAP cases.

A representative account indicates that the submitter is a non-corporate WCMSAP user. These submitters do not have an EIN but will submit multiple cases.

A self submitter account indicates that the submitter is a Medicare beneficiary, or an individual with a reasonable expectation of becoming a Medicare beneficiary within 30 months, who wishes to submit a case for themselves.

The WCMSAP permits multiple users per account type to assist in the account registration and case submission processes. Each user is defined by one of three possible roles, and each user can only have one role within the WCMSAP: Account Representative, Account Manager, or Account Designee.

User Roles

- **Account Representative**
  - Corporate account only
  - Has the legal authority to bind the company to the contract and terms of WCMSAP requirements

- **Account Manager**
  - Controls the administration of an organization's account and manages cases, and case access
  - Each WCMSAP account is required to have only one Account Manager

- **Account Designee**
  - Invited by the Account Manager to have access to the WCMSAP for the Account Manager's account
  - Assist the Account Manager in the WCMSA submission process

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The Account Representative is for Corporate account types only. This is the individual who has the legal authority to bind the company to a contract and the terms of WCMSAP requirements and processing.

The Account Manager is the individual who controls the administration of an organization's account and manages cases, which includes managing case access. Each WCMSAP Account is required to have only one Account Manager.

At the organization's discretion, an Account Manager for Corporate or Representative account types may invite other individuals, known as Account Designees, to have access to the WCMSAP for the Account Manager's account. These individuals will assist the Account Manager in the WCMSA submission process.

Login ID and Password

During the registration process, new registrants will setup their WCMSAP Login ID and Password

The same Login ID and Password must be used to access the WCMSAP application

During the registration process, new registrants will set up their WCMSAP Login ID and Password. WCMSAP users must use that same Login ID and Password to access the WCMSAP application.

EDI Representative Support

- For assistance managing an account/personal information within the WCMSAP
  - Phone: 646-458-6740
  - E-mail: COBVA@GHIMedicare.com

- EDI Representatives are available Monday-Friday, from 9:00 am to 5:00 pm, Eastern Standard Time

If a user needs assistance managing an account or managing personal information within the WCMSAP, they may contact an Electronic Data Interchange (EDI) Representative for assistance by phone at 646-458-6740, or by e-mail at COBVA@GHIMedicare.com. EDI Representatives are available to assist users Monday through Friday, excluding Federal holidays, from 9:00 a.m. to 5:00 p.m., Eastern Standard Time.

Users will access the WCMSAP Web site at the following URL:
https://www.cob.cms.hhs.gov/WCMSA/. Each time a user visits the WCMSAP Web site, the Login Warning page will display the Data Use Agreement (DUA). The DUA provides information about WCMSAP security measures including access, penalty and privacy laws. The Login Warning page can be printed by clicking the [Print this Page] link in the upper right corner of the page. Users must review the DUA and click the [I Accept] link at the bottom of the page to continue otherwise they will be denied access to the WCMSAP site.

After the [I Accept] link is clicked, the WCMSAP Welcome page will display. Here, users must enter their "User Name" and "Password" to sign into their account and access the WCMSAP.

When a user has successfully logged in, the WCMSAP Home Page will display. This page gives the user the ability to manage their account settings or manage a case. Users can access and make changes to cases under their assigned Account ID. Users will click the [Create a New Case] link to input information and all relevant documentation for a WCMSA case. [Case Lookup] will be used to search and/or access a previously submitted or saved case. [View Alerts] will be used to examine any alerts that were sent for a case.

Entering a WCMSA Case

QUICK HELP

Help About This Page

The information requested below will be systematically validated to ensure the Workers' Compensation Medicare Set-Aside Arrangements(WCMSA) case does not already exist in the Web portal and that the data entered meets the criteria set for new case creation. A new WCMSA case should not be created if the beneficiary is deceased or the total settlement amount is under the threshold limits set for a WCMSA case. Note: The Total Settlement Amount field will be rounded to the nearest whole dollar amount.

Once the information is validated, you can continue adding case information, upload corresponding documentation in PDF file format, and if necessary, create a work-in-progress case. A work-in-progress case allows you to enter part of the new case information and save it to the WCMSAP. The information saved will be available when you return to the portal to complete the new case creation process.

To begin the new case creation process, enter the required data and click the 'Continue' button. To cancel the case creation, click the 'Cancel' button to return to the Home page.

An asterisk (*) indicates a required field.

The Beneficiary/Claimant's Social Security Number (SSN) or Health Insurance Claim Number (HICN) must be provided. You may not provide both. The Initial Date of Injury CCYY may not be less than 1965.

HICN: * OR SSN: *
Initial Date of Injury: * (MM/DD/CCYY)
Last Name: * First Name: * MI:
Gender: * -Select-
Date of Birth: * (MM/DD/CC
Proposed Settlement Amount: * $

Data is used to verify that a duplicate case does not already exist and that the proposed settlement amount is over the threshold amount for case submission and review

Cancel   Continue

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After the [Create a New Case] link is clicked, the New Case Creation page displays. Data entered on this screen will be used to verify that a duplicate case does not already exist and that the proposed settlement amount is over the threshold amount for case submission and review.

If the case creation criteria are met, the system will display the Case Information tabbed pages where the user will enter all information and relevant documentation for the WCMSA case. Tabs denoted with an asterisk indicate that data is required to be entered for that page. All required fields are denoted by a superscript (^{1}).

The first tabbed page that displays is the Beneficiary/Claimant Information page. When data-entry is completed on this page, the system will verify that the beneficiary is alive. If the beneficiary is deceased according to Medicare's records, the user will be notified and asked if they wish to proceed with the entry. If the user proceeds and successfully submits the case, the case status will be set to DECD (Deceased), the case will be routed to the WCRC, and an alert will be sent to the submitter that states "Our records indicate the beneficiary is deceased. If there is evidence to the contrary, contact the WCRC. Within 10 business days, you must submit information that shows the beneficiary is not deceased."

The submitter must then provide supplemental information via the WCMSAP. If supplemental information is provided within 10 business days, the case status will change to DREC (Development Received). If supplemental information is not provided within 10 business days, the system will close the case and update the case status to CLOS (Manually Closed). After the 10th business day, if information is provided, the system will change the status to REOP (Case Reopened).

The next page in the WCMSAP case submission process is Diagnosis Codes.   Users are required to enter at least one Diagnosis Code prior to the case submission, but may enter a maximum of 5 Diagnosis Codes for any given case.

A diagnosis lookup function will be available for the user to look up and select proper diagnosis codes. Searches may be performed by specifying partial diagnosis codes or keywords.   If diagnosis codes are entered manually, they will be validated against the existing International Classification of Diseases, ninth revision (ICD-9) Diagnosis Code table. If the entered code is invalid, the user will be notified and will be required to correct it.

Prior to case submission, users will have the ability to delete any diagnosis code from the case.

Please note: WCMSA cases that have been submitted are reviewed in detail by the WCRC. If the WCRC identifies additional Diagnosis Codes, they will be included as a part of the WCRC's final recommendation.

Workers' Compensation (WC) Carrier is the next page in the WCMSAP case submission process. Users are required to enter information for one Workers' Compensation Insurance Carrier upon case submission.

The next page in the WCMSAP case submission process is Employer Information. Data entry is required on this page prior to case submission.

The Beneficiary/Claimant Attorney page is next. If the beneficiary or claimant is represented by an attorney, the user is required to enter data on this page. However, if the beneficiary or claimant is not represented by an attorney, the user is instructed to leave these fields blank.

The Case Notes page provides the user with the ability to add notes related to the WCMSA case in order to keep a listing of changes or other miscellaneous information. Once a note is added, the system will immediately display the date the note was added, the name of the user that added the note, and the contents of the note on the Case Notes page. Notes may be deleted anytime prior to a case's submission. Data is not required on this page.

The Case Documents page will be used to add documents to a case, delete documents prior to submitting a case, and/or replace documents on submitted cases. Typically, documents must be replaced when a case has been submitted and it contains co-mingled documents. Only files that have been flagged as replaceable by the WCRC can be replaced. A co-mingled alert will be listed on the Alert Lookup page in this instance.

Documents can be added to a case under the following document categories: Submitter Letter or Other Summary Documents, Consent Form, Rated Age Information or Life Expectancy, Life Care Plan, Proposed/Final Settlement Agreement or Court Order, Set-Aside Administrator or Copy of Agreement, Medical Records (1st Report of Injury through Recent Treatment). (Note: Medical records must be separated into files that contain less than 100 pages and these separate files must be created before attaching to a case); Payment History, Future Treatment Plans, and Supplement/Additional Information. The Consent Form is required for case submission.

The Case Summary page provides a summary of all the information that has been entered for the WCMSA case and gives users the chance to verify and make any changes or additions to the data pages prior to saving or submitting the case.

With the exception of the Health Insurance Claim Number (HICN), Social Security Number (SSN), Initial Date of Injury, Proposed Settlement Amount, Last Name, First Name, Date of Birth and Gender, a user may modify data on all screens at any time prior to a case's submission. They may also add new files and/or delete previously added files. To make any required changes or additions the user will click the [Edit] button for the data page that needs modifications. This action will re-direct the user to the corresponding data page where changes can be made.

Once users have verified that all case information is complete and accurate and they are ready to submit the case, they will click the [Submit Case] button. The [Submit Case] button is active only after all required case information has been entered and a Consent Form has been uploaded. Once a case is submitted, it will be electronically sent to the WCRC for processing.
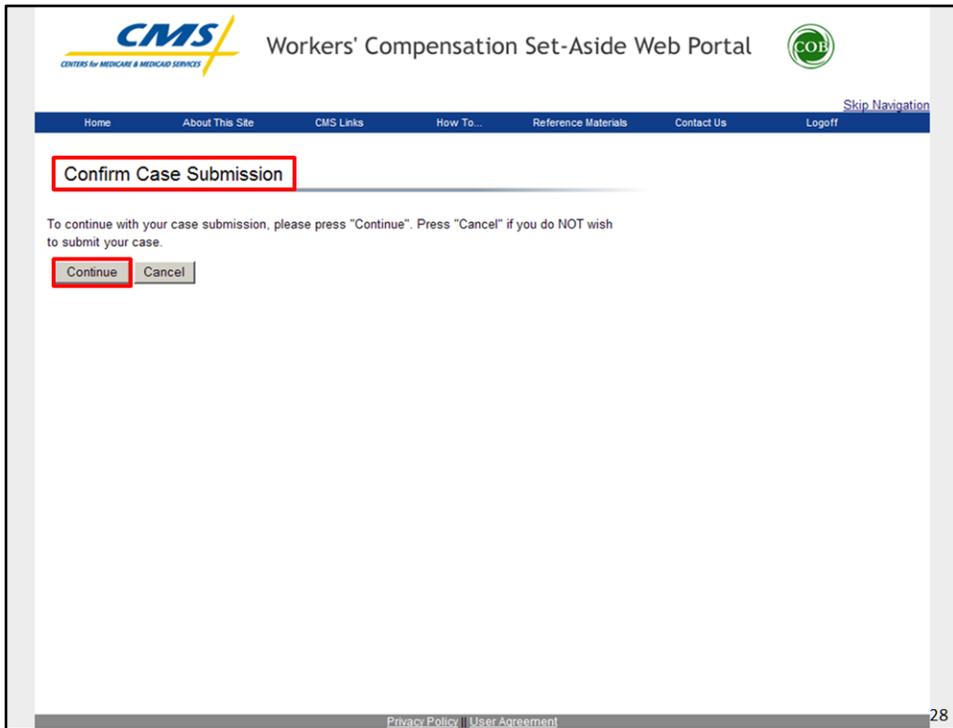
When a user has clicked on the [Submit Case] button, the Confirm Case Submission page displays. To continue with the case submission select the [Continue] button. The Successful Case submission page then displays.

Work-In-Progress (WIP)

- May be used at any point during case creation

- Allows a user to input partial information if they do not have all of the information readily available

- User will receive a Case Control Number which will enable them to access the case at a later time

- Must be submitted within 60 business days from the initial WIP creation date, otherwise it will be deleted

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The WCMSAP provides a function that allows the user to save the case as a Work-In-Progress (WIP) at any point during the case creation. This option allows a user to input partial information for a case if they do not have all of the information readily available to submit the case. When a case is saved as a WIP, the user will receive a Case Control Number which will enable them to return to the case at a future point(s) in time in order to complete the case creation. Users must submit WIP cases within 60 business days from the initial WIP creation date, otherwise, the WIP case will be automatically marked as deleted.

Cases that are saved as work-in-progress can be accessed for editing using the [Case Lookup] link on the WCMSAP Home Page. The [Case Lookup] feature can also be used to view a previously submitted WCMSA case.

When a user clicks on the [Case Lookup] link from the WCMSAP home page, the Case Lookup screen will display. WCMSAP users may access cases that are associated with their Login ID using various user-specified criteria. Case listings may be requested for all cases (both submitted and work in progress cases), submitted cases only, or work-in-progress cases only. Users may narrow down the search results using the remaining, optional search fields: Case Control Number, Health Insurance Claim Number (HICN), Social Security Number (SSN), Case Creation Date Range and/or Case Submission Date Range. To begin the search, users will click the [Search] button.

The slide shows the Case Listing page with annotation callouts:

- Display cases that met the search criteria associated to the User ID
- DREC (user has successfully submitted files to a previously submitted case)
- DECD (beneficiary has been flagged as deceased)
- DEVP (co-mingled documentation...additional information)
- Current location of case — Submitter
- Case Control Number assigned by the system
- Date of the work injury or disease
- Allows Account Managers to manage access to the case by granting/revoking access
- To access/view a case, click on desired Case Number

Case Listing

Delete	Case Number	Claimant Name	Date of Injury	Case Status	Case Location	Creation Date	Submission Date	Case Access
	WC	Doe, John	2011-06-13	Received	WCRC	2011-06-23	2011-06-23	Manage Access
	WC		2008-08-04	Received	WCRC	2011-06-20	2011-06-20	Manage Access
	WC		2008-08-03	Received	WCRC	2011-06-20	2011-06-20	Manage Access
	WC		2000-05-02	Received	WCRC	2011-06-13	2011-06-13	Manage Access
	WC		2000-06-01	Deceased	WCRC	2011-06-13	2011-06-13	Manage Access
	WC				CRC	2011-06-13	2011-06-13	Manage Access
	WC				CRC	2011-06-13	2011-06-13	Manage Access

When the [Search] button has been clicked, the Case Listing page will display the cases that met the search criteria entered which are associated to the User ID. This page provides a summarized view of the case details including: Case Number, Claimant Name, Date of Injury, Case Status, Case Location, Creation Date, Submission Date, and Case Access.

Case Number is the Case Control Number which is assigned by the system.
Claimant Name is the name of the individual for whom the WCMSA has been submitted.
Date of Injury is the date of the work-related injury or disease.
Case Status is the current status of the case. It may be any of the following:
WIP (Work-in-Progress, case has been saved, but not yet submitted);
RECD (case has been successfully submitted);
DREC (user has successfully submitted files to a previously submitted case);
DECD (beneficiary has been flagged as deceased);
DEVP (co-mingled documentation was found in the file or the WCRC/Regional Office (RO) made a request to the submitter for more information);
CLOS (case has been closed);
REOP (case has been re-opened);
Case Location is the current location of the case. This may be Submitter, WCRC, or RO.
Creation Date is the initial date the case was created.
Submission Date is the date the WCMSA case was successfully submitted.
Case Access allows Account Managers to manage access to the case by granting or revoking access for all active Account Designees under the given WCMSAP account.

To access/view a case, the user will click on the desired Case Number. When the case is accessed, the Case Summary Page will be displayed where the user can view any section if the case has been submitted, or edit any section if the case is a WIP.

Alerts

- WCRC reviews each submitted case for completeness and accuracy

- If errors are found or if additional information is needed, the WCRC will send an e-mail alert
  - For example, if any mandatory documents are missing, a Development Alert will be sent to the submitter requesting the missing information

- E-mail alert will be sent to the e-mail address provided during account setup

WCMSA cases that have been submitted are reviewed in detail by the WCRC to ensure they are complete and accurate. During this review, if errors are found or if additional information is needed, the WCRC will send an e-mail alert to the submitter. For example, if any of the following mandatory documents are not included in the submission: Cover Letter, Consent Form, Medical Records, and Payment Information, a Development Alert will be sent via e-mail to the submitter requesting the missing information. The e-mail alert will be sent to the e-mail address provided during account setup. Please see the Alert Letter section of the WCMSAP User Guide for situations where the WCRC may send an Alert to the Submitter.
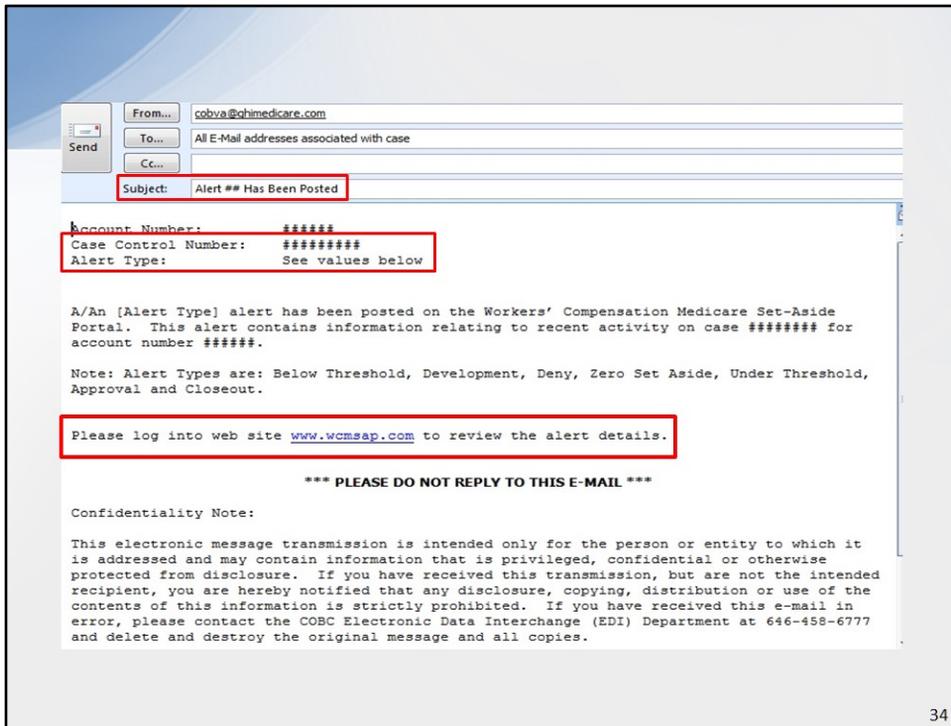
A sample of an e-mail alert is shown here. The e-mail alert will contain the case control number and the type of error found and will invite the submitter to view the alert or letter on the WCMSAP. Most alerts are informational; however, some require action on the case.

To view Alerts, users will click on the [View Alerts] link from the WCMSAP Home Page.

By default, the Alert Lookup page lists all alerts for the previous 60 days associated to the Users ID. Users can use the fields on the page to search for specific alerts. The Alert listing in the lower half of the Alerts page includes the following information related to the Alert:

Alert ID - identifier assigned to the alert by the system for tracking purposes. This is a unique number within the case.

Alert Creation Date - Date the alert was created.

Alert Type - Type of alert. Most alerts are a letter, and the Alert Detail page will contain the letter in PDF format.

Values for Alert Type include:

• *Below Threshold* – indicates that the case has a Total Settlement amount of $250,000 or less for an individual who does not have a reasonable expectation of becoming a Medicare beneficiary within 30 months of the settlement date OR that the case has a Total Settlement amount of $25,000 or less for a Medicare beneficiary;

• *Development* – indicates that there is a need to gather additional information or documentation;

• *Deny* – indicates that the proposed WCMSA amount has been denied;

• *Zero Set-Aside* – indicates that the settlement has been approved with a Medicare Set-Aside Amount of zero dollars;

• *Approval* – indicates the settlement has been approved. This alert includes recommendation attachments;

• *Closeout* – indicates the WCMSA case has been closed;

• *Deceased Beneficiary* – indicates the system found a date of death for the beneficiary. This alert does not produce a letter;

• *Co-Mingling* - indicates that documents must be replaced on the case. Only files that have been flagged as replaceable can be replaced. This alert does not produce a letter. (Note: When co-mingling has occurred the system must check to confirm that a replacement file was provided by the user. The case will be automatically closed out if the replacement documentation is not received within 10 business days).

Case Number - the Case Control Number associated with the alert.

Creator - entity that has entered the alert. Options are Submitter, WCRC and RO.

Status - status of the alert. Options are Read, Not Read and Archived.

HICN/SSN - the HICN or SSN of the beneficiary or claimant associated with the case. The first 5 digits of the HICN or SSN are masked by asterisks.

Bene Name - Name of the beneficiary or claimant associated with the case.

To view an alert, the user can click on the "Alert ID" or the "Case Number" for the specific alert.

The Alert Detail page displays the selected alert. Most alerts are accompanied by letters. In most instances, the Alert Detail page will display the contents of the letter in PDF format. Users are instructed to read the alert and review for any required changes. If changes are required to the case, the user will utilize the [Case Lookup] function to access the case and make any necessary changes.

After viewing the alert, click [Archive This Alert] to change the alert status to Archived. Click [Close this Window] to close the alert and return to the previous page.

Workers' Compensation Set-Aside Web Portal

Customer Service

Users have access to information at any time through the use of the navigation menu options

WCMSAP

The W...
Medic...
case i...
cases...
View /...
that fu...

You may modify Account Settings by clicking the appropriate link under the Account Settings list.

I'd like to...

Create a New Case

Case Lookup

View Alerts

QUICK HELP

Help About This Page

Account Settings

Update Personal Information

Update Account Information

Designee Maintenance

View Account Activity

Change Password

Privacy Policy   User Agreement

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In all data management programs there is the potential for an occasional need of assistance.   Users of the WCMSAP have access to information at any time through the use of the navigation menu options at the top of each page.

"About This Site" will navigate a user to the How to Use This Site link which offers general information on how to use the WCMSAP application.

"CMS Links" provides links to the Workers' Compensation Agency Services page, General Medicare (the Medicare Web site), and the Coordination of Benefits information page on the CMS Web site.

"How To…" provides detailed information on performing the functions listed in the drop down menu.

"Reference Materials" provides access to a link where users can view and download the WCMSAP User Guide.

Workers' Compensation Set-Aside Web Portal

Skip Navigation

WCMSAP

Contact Us displays the following message which includes information on how to contact the COBC.

The WCMSAP provides an interface for entry of Workers' Compensation

Workers' Compensation Medicare Set-Aside Web Portal

Print this page | Close

Contact Us

If you have a program or technical problem involving your WCMSAP submission, contact the COBC EDI Department. EDI Representatives can help you find solutions for any questions, issues, or problems you have.

Call the COBC EDI Department at (646) 458-6740 for assistance.

View Alerts

Privacy Policy   User Agreement

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"Contact Us" displays the following message which includes information on how to contact the COBC. Users can contact the EDI Department by phone or e-mail.

"Logoff" ends the session, logs the user out of the WCMSAP and displays the Login Warning page. Once the Login Warning page is displayed, the user should close their browser.

Next Steps

- Curriculum of CBTs to assist you in
  - Using WCMSAP

- We strongly encourage you to complete all appropriate CBTs offered

This concludes this presentation. CMS has provided a curriculum of computer based training modules (CBTs) to assist you in using the WCMSAP.   We strongly encourage you to complete all appropriate CBTs offered.

Next Steps

- To register for the curriculum, send an e-mail to techi@nhassociates.net
  - Company name
  - Account type (Corporate, Representative or Self)
  - Name
  - Phone number (formatted ###-###-####)
  - E-mail address

- E-mail notification will be sent containing the URL for the curriculum

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If you have not yet registered for the curriculum, send an e-mail to techi@nhassociates.net. Specify that you are requesting the WCMSAP CBT curriculum, and include your company name, Account type (i.e., Corporate, Representative or Self) and the name, phone number (formatted: ###-###-####), and e-mail address for each individual you would like to register. Once your request has been processed, an e-mail notification containing the URL for the curriculum will be sent.

This concludes the WCMSAP Webinar.