

- 1. Go to the VHASS website: <u>http://vhass.org/</u>
- 2. In the upper left-hand corner of the page, look for the box labeled "Member Login" and click the text "Register Now!"



3. If your organization is not listed in the dropdown menu, click the "Add Organization" button

Select Hospital/Organization			
Home > Select Hospital/Organization			
Select Your Organization			
The first step in creating a new user account is selecting your Ho click "Continue" to create your account. * Organization:	plat / Employer / Organization. Use the following select box to see if you Please Choose	your organization is currently registered in our system. If your organization is listed, please select your organization and	ind
	Continue		
Add New Organization			
If your hospital/employer/organization is not listed, please click th	e button below to add your organization/employer. After adding your orga	rganization/employer, you will then be able to create an account.	
Add Organization			

4. Select your organization type (Hospital, Long-Term Care Facility, etc.) from the dropdown menu, then click "Continue"

VITASS Virginia Healthcare Alerting & Status Syst	Free Standing Emergency Department Home Health Agency	1	NURCENIA HOUPERAL IN DEAL THE ARE RECORDERING	You Tube
# Home • EMERGENCY OPER	Hospital	ts + 🔒 Administration +		
Organization Type	Inter. Care for Ind. Intellectual Disabilities			
organization rype	Long Term Care Facility			
Home > Membership Manager	NDMS Federal Coordinating Center			
Step 1 of 6	Outpatient Care Center Public Health			
Organization Type	Regional Healthcare Coordinating Center			
Please choose organization ty	State Office of the Chief Medical Examiner	ype? Click here for definitions.		
* O Organization Type:	Please Choose	*		
		Continue		

5. If necessary, select an organization subtype before proceeding



- Virginia Healthcare Emergency Management Program
 - 6. Enter the requested information under "Demographic Information".

Note: VHASS uses the 6-digit Medicare number to identify your organization. The number must begin with the number 49, i.e. 491234. If your organization does not have a Medicare number, you have multiple organizations with the same number, or if you do not know your organization's Medicare Number, leave the field blank and a number will be generated for you.

# Home	EMERGENCY OPER	RATIONS -	Documents	🚔 Resources 👻	🖿 My Accounts 🚽	Administration -		
Demo	Demographic Information							
Home :	Home > Membership Management > Organization List > Demographic Information							
Step 2	? of 6							
General I	nformation							
.0	Organization Name:							
	O Medicare Number:	88 characters	s remain					
Numb	er of Licensed Beds:							
CMS	Certification Number (CCN):							
Natio	nal Provider Number (NPI):							

- 7. Proceed to fill out all the requested fields and submit. When finished, click the green "Continue" button
- 8. NOTE: Once you have entered your organization information, you will then be prompted to create your personal account. Since you are the first person from your organization to register, you will be designated as the Organization Contact*. Your account will receive emails for all future member accounts that are created in your organization and will have the ability to approve new users for your organization.
- 9. Registration Complete

Upon completing the registration process, you will be sent a confirmation email notifying you that your information has been received.

*Organization Contacts

- There are 2 contacts per organization.
- Responsible for managing organization contact information
- Responsible for approving new members
- Responsible for assigning members to application modules
- Access to basic contact reports i.e. Alerting Confirmation Number report that allows user to review members that have confirmed receiving text alerts.