



## KDHE Bureau of Community Health Systems

### KS-CRA User Registration Directions

To complete the KS-CRA registration process you must complete the following steps in their entirety (*detailed directions to complete each step are shown below*):

1. Identify your facility's chosen KS-CRA users and complete the **KS-CRA User Identification form** and return by mail, fax, or e-mail to the BCHS.
2. Each user must sign a **KS-CRA User Confidentiality Agreement** and return signed copy by mail to BCHS. KDHE will process your application. Each user will be contacted by phone or e-mail regarding account status.
3. Complete the **KDHE Medical Materials Agreement for Facilities** and return signed copy by mail to the Bureau of Community Health Systems (BCHS).

#### Detailed Directions to Complete Each Step:

##### Steps #1-#3:

1. If you did not receive copies of contracts/forms by e-mail, you can download a copy of each of the 3 required contracts/forms at the following website: [http://kdheks.gov/it\\_systems/ks-cra.htm](http://kdheks.gov/it_systems/ks-cra.htm)
2. Each of the following contracts/forms is required to be completed and returned to BCHS:
  - a. KS-CRA User Identification Form: Use this form to identify at least two KS-CRA users for your facility. Facilities have the option of identifying up to three users. Facilities who request to have more than three users will be given special consideration.
  - b. KS-CRA User Confidentiality Agreement: Each identified user at your facility must sign a copy of the User Confidentiality Agreement; users will not have their account associated without a copy of this agreement on file at KDHE.
  - c. KDHE Medical Materials Agreement for Facilities: This contract is required to be completed for your facility; any facility that wishes to receive medical pharmaceuticals or supplies from KDHE must have this contract in place.
3. Return copies of all contracts/forms to BCHS via:
  - a. Mail: KDHE-BCHS; 1000 SW Jackson, Suite 340; Topeka, KS 66612 (**Signed original required by mail for User Confidentiality Agreement and KDHE Medical Materials Agreement for Facilities**)
  - b. Fax: 785-296-2625; Attn: Laura Ross (**User ID form only; User ID form may also be mailed**)
4. Each of these forms must be on file with BCHS before KDHE can start the facility registration process within KS-CRA. If there are special circumstances involving your contract routing process please contact us directly.

<p><b>Contract Questions: KDHE-Bureau of Community Health Systems</b></p>
<p>Laura Ross cra@kdheks.gov 785-296-7428 (phone) 785-296-2625 (fax)</p>
<p><b>User Registration Questions: Web-IZ Help Desk</b></p>
<p>1-877-296-0464 <a href="mailto:immregistry@kdheks.gov">immregistry@kdheks.gov</a></p>