Qualitrac® Registration: DocuSign® Process Tip Sheet

This tip sheet outlines the steps the Provider Executive and Authorized Official follow to complete the Qualitrac Registration DocuSign process.

Process for the Provider Executive

The first web page displayed is the PowerForm Signer Information.

Note: The Provider Executive is the duly authorized representative permitted to bind your organization and who agrees to the terms and conditions of the Provider Portal Agreement. This is usually someone with the title such as Owner, CEO, President, Director. The role of Provider Executive only grants the Authorized Official access. A Provider Executive will not be provided with an account.

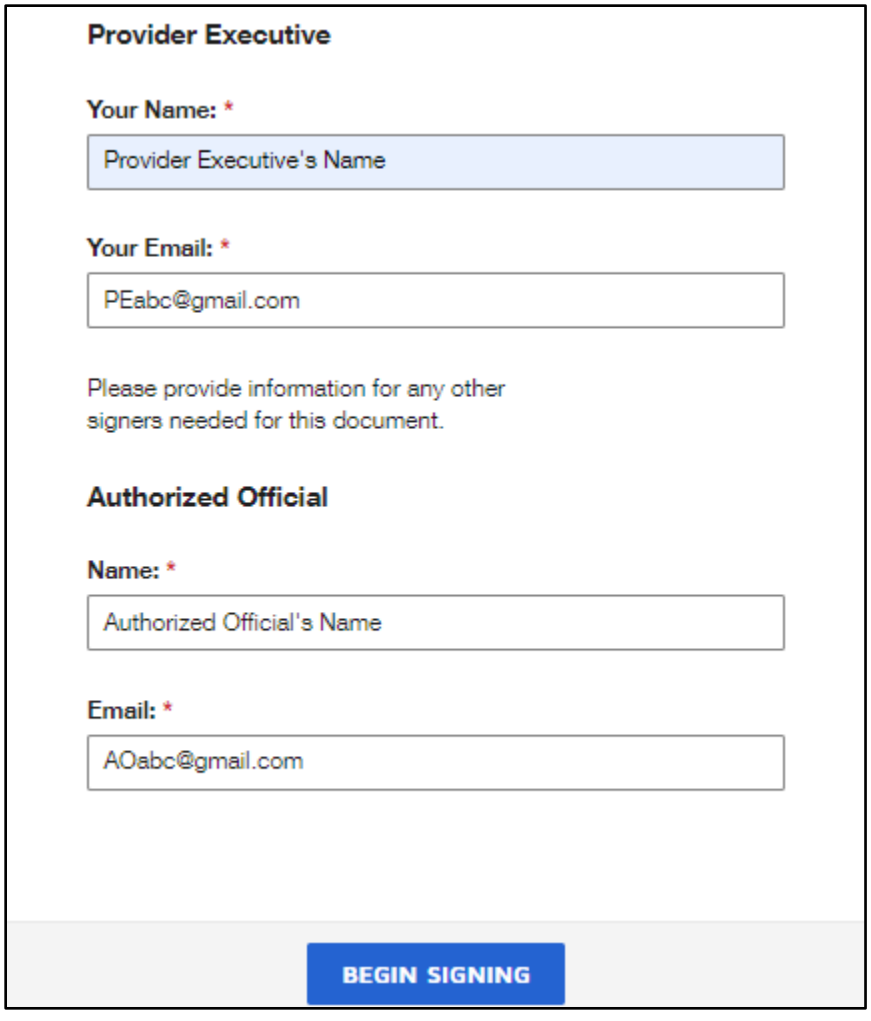


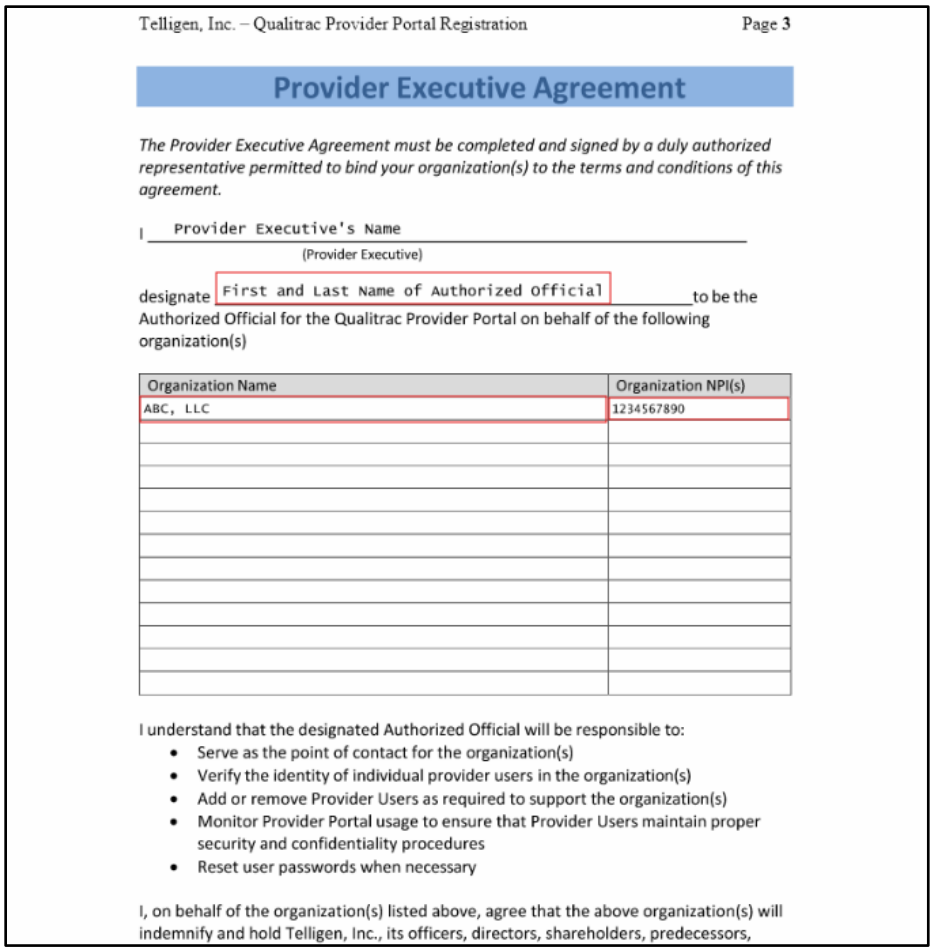
Figure 1: Example screenshot showing the PowerForm Signer Information

Step 1. Click the "I agree to use electronic records and signatures" checkbox, and then click "Continue."

Step 2. Read the Welcome, Roles & Responsibilities, and the Registration Steps.

Step 3. Provider Agreement:

a. Enter the Authorized Official's name in the 'Authorized Official' field (the person who will serve as the Authorized Official).
b. Enter the organization name in the 'Organization Name' field and the NPI in the 'Organization NPI' field.



Telligen, Inc. – Qualitrac Provider Portal Registration Page 3

Provider Executive Agreement

The Provider Executive Agreement must be completed and signed by a duly authorized representative permitted to bind your organization(s) to the terms and conditions of this agreement.

I Provider Executive's Name
(Provider Executive)

designate First and Last Name of Authorized Official to be the Authorized Official for the Qualitrac Provider Portal on behalf of the following organization(s)

Organization Name	Organization NPI(s)
ABC, LLC	1234567890

I understand that the designated Authorized Official will be responsible to:

- Serve as the point of contact for the organization(s)
- Verify the identity of individual provider users in the organization(s)
- Add or remove Provider Users as required to support the organization(s)
- Monitor Provider Portal usage to ensure that Provider Users maintain proper security and confidentiality procedures
- Reset user passwords when necessary

I, on behalf of the organization(s) listed above, agree that the above organization(s) will indemnify and hold Telligen, Inc., its officers, directors, shareholders, predecessors,

Figure 2: screenshot example showing the Provider Executive Agreement

Step 4. Signature of Provider Executive

a. Click "Signature," then click "Adopt" and "Sign."
b. Enter your title in the 'Title' field.
c. Enter your phone number in the 'Phone Number' field.

d. Click "Finish" to complete the Provider Executive portion of the process.

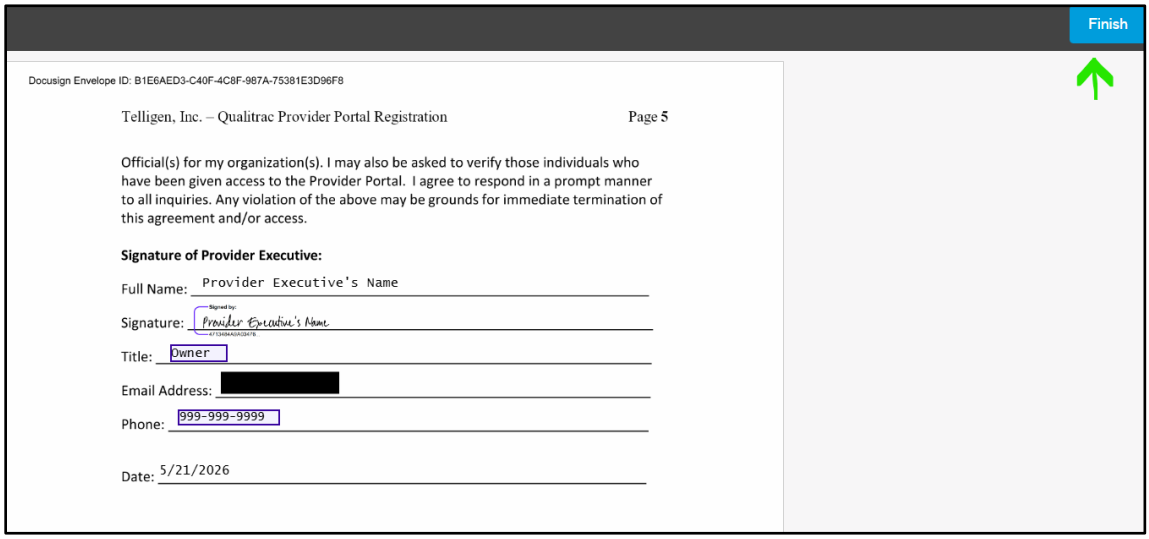


Figure 3: DocuSign screenshot showing the location of the Finish button

Step 5. DocuSign will send a link to the Authorized Official in order to complete their section of the packet.

Step 6. You will now have the option to save a copy of your document and can exit DocuSign.

Process for the Authorized Official

The Authorized Official will serve as the point of contact for the organization and be responsible for managing Provider user accounts, including adding or removing Provider users as required to support the organization.

The Provider Executive enters the Authorized Official email address on the PowerForm (refer to the Process for the Provider Executive). The Authorized Official should receive an email containing an access link to start the next steps in the DocuSign process.

Step 1. Click the link in the email to go to a web page displaying a message that a document is ready to review and sign.

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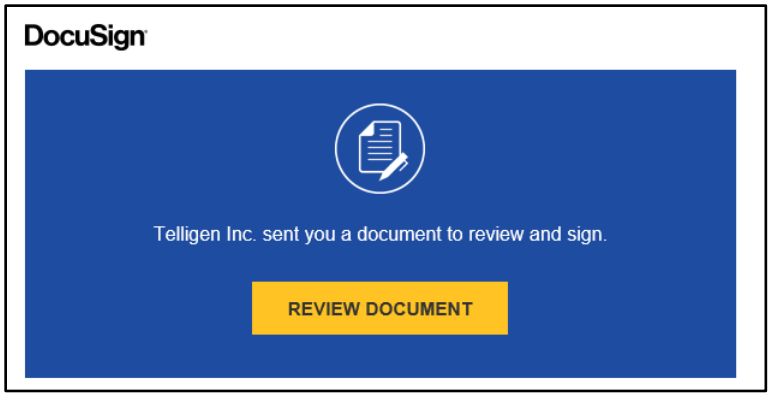


Figure 4: DocuSign screenshot showing the Review Document button

Step 2. Click the "Review Document" button. This will take you to the DocuSign document already in progress that was initiated by the Provider Executive.

Step 3. Next, click the "Continue" button to review the document.

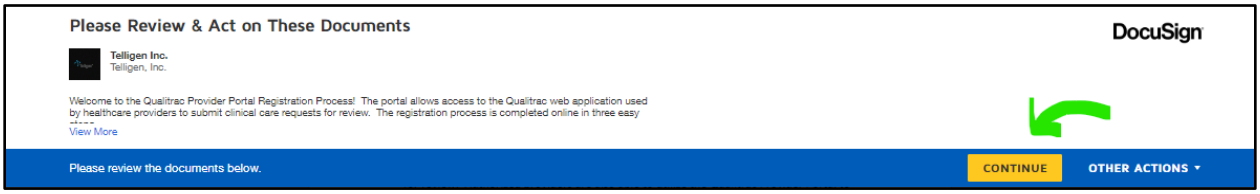


Figure 5: DocuSign screenshot showing the Continue button

Step 4. Review the packet. Authorized Official information starts on page 6.

Step 5. On page 7, click "Signature" and use a saved signature or adopt a new one, then enter your title in the 'Title' field.

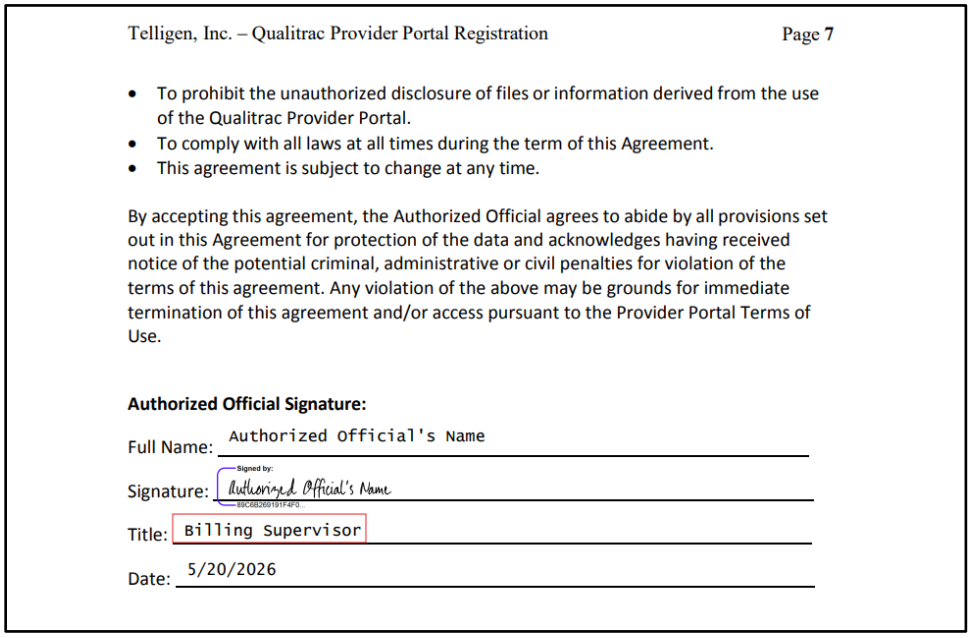
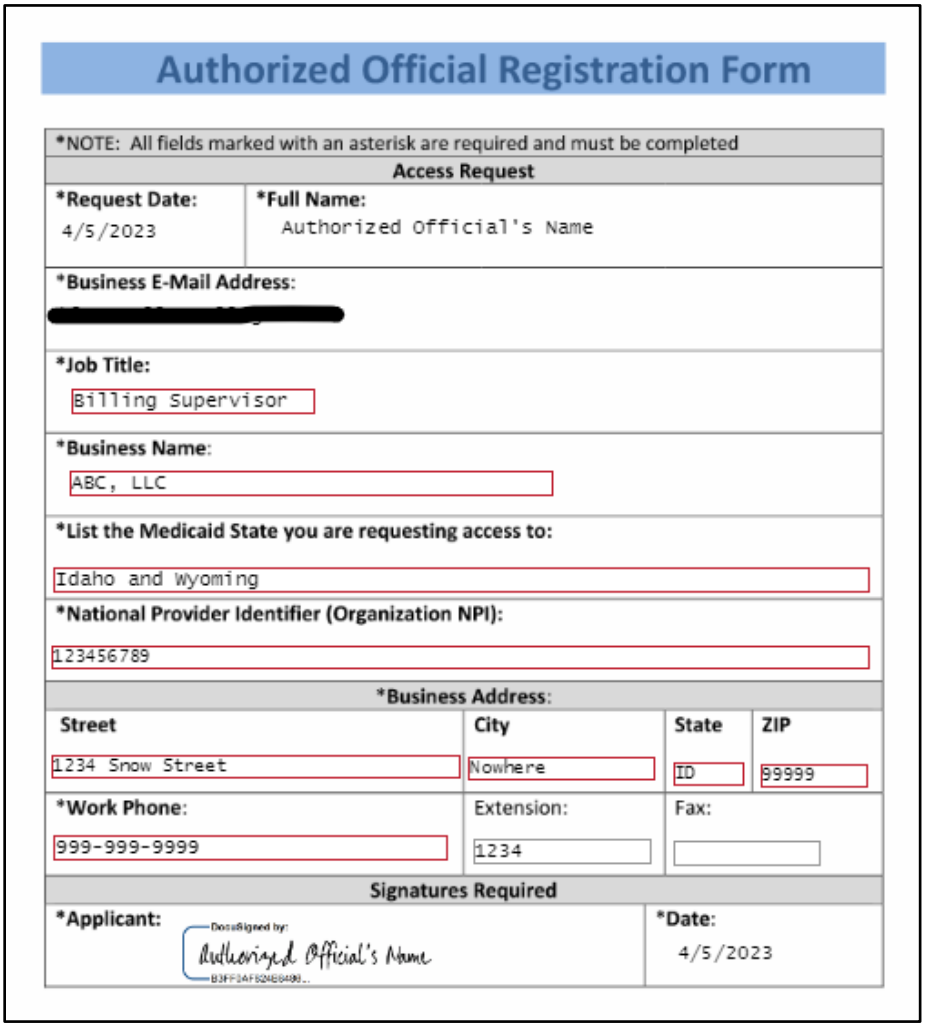


Figure 6: DocuSign screenshot showing the Authorized Official signature

Step 6. On page 8, complete all required fields and sign as the Applicant.



Authorized Official Registration Form

*NOTE: All fields marked with an asterisk are required and must be completed

Access Request

*Request Date:	*Full Name:
4/5/2023	Authorized Official's Name

*Business E-Mail Address: [redacted]

*Job Title: Billing Supervisor

*Business Name: ABC, LLC

*List the Medicaid State you are requesting access to: Idaho and Wyoming

*National Provider Identifier (Organization NPI): 123456789

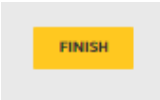
***Business Address:**

Street	City	State	ZIP
1234 Snow Street	Nowhere	ID	99999

*Work Phone:	Extension:	Fax:
999-999-9999	1234	

Signatures Required

*Applicant:	*Date:
DocuSigned by: Authorized Official's Name	4/5/2023

Figure 7: DocuSign screenshot showing the form fields to complete

Step 7. To complete the process, click the "Finish" button, which can be found both at the top and bottom of the screen.