



IHCA/INCAL

myIHCA

HOW DO I RENEW MY ASSOCIATE MEMBERSHIP

myIHCA TRAINING MODULE

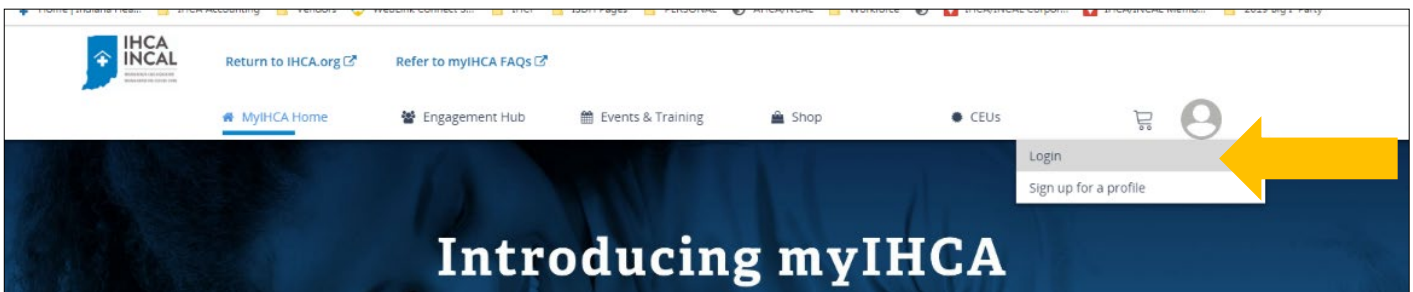
HOW DO I RENEW MY ASSOCIATE MEMBERSHIP?

Please note that you **MUST** first have an individual account within the myIHCA Portal in order to renew your membership. If you don't know whether you have any account, [click here](#) and follow the steps in the training document.

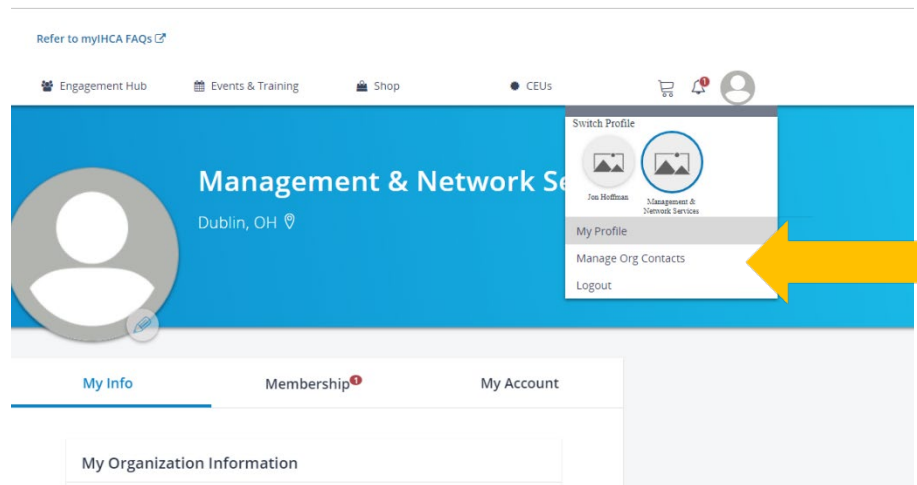
Associate Members at the Standard (\$500) and Key (\$3,500) level have the ability to renew their membership online via the myIHCA portal. Please note that the renewal option will only populate under the related organization if you are the **Primary Contact (ADMIN)** for your company. If you do not have this designation, you will not have the ability to renew online.

Please reach out to Emily Berger at eberger@ihca.org, or Erin Weliver at eweliver@ihca.org, or call 317-616-9036 if you need to update your Primary Contact for the company OR be invoiced for your membership renewal. You may also fill out the [2020 IHCA/INCAL Associate Member application form](#) and remit that form with credit card or check payment to the address noted on the form.

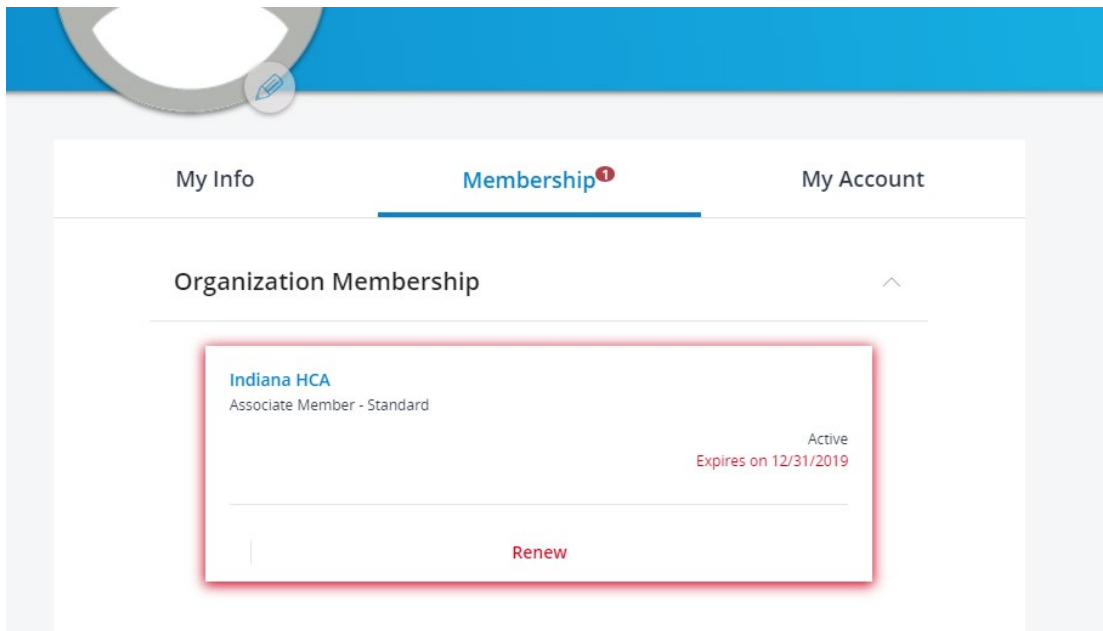
1. [Click here](#) to access the myIHCA portal.
2. Select the **Profile icon** (small gray circle with white head and shoulders) in the upper right of the window. And click **"Login"** in the drop-down menu. Complete the login process.



3. If you are the Primary Contact (ADMIN) for your organization, you will be asked to "Select a Profile."
 - **Choose the organization profile.**
 - Then click on **"My Profile."**



4. Once you are in the organization profile, you should see a red “1” next to the Membership tab.
- **Click on “Membership”** and you will be presented with an option to renew your membership.



5. Select your membership type.

- You can choose from Standard (\$500) or Key (\$3,500) membership. A complete list of benefits for each membership tier are included on pages 4-5 of the [2020 Associate Membership & Sponsorship Guide](#).
- If you are interested in joining as a Title member, please contact Emily Berger at eberger@ihca.org or 317-616-9036.
- **Once you select your tier/pricing, click “Next.”**

Membership Type
Select your membership type

Associate Member
Please select your 2020 Associate Membership tier from the options below. For a list of benefits associated with each tier, please refer to the 2020 Associate Membership and Sponsorship Guide (pages 4-5).

- If you are interested in becoming a Title Associate Member, or if you have general questions about the Associate Member offering or join process, please contact Emily Berger at eberger@ihca.org or 317-616-9036
- You will also have the option of making a tax-deductible contribution to the Indiana Health Care Foundation to support scholarships and workforce programming for long-term care professionals. The suggested contribution amount is \$85, but you have the option to adjust your optional contribution amount as you see fit, or enter \$0 to bypass the Add-Ons screen.

Dues for Associate Membership are collected on an annual basis and provide Associate Members benefits from the date of membership approval by the IHCA Board of Directors to December 31, 2020. Please be advised that pursuant to Federal tax law dues spent on lobbying and other related costs are not deductible for federal income tax purposes. The IHCA reasonably estimates that 15% of dues will be spent on lobbying costs for 2020.

If you are interested in joining IHCA/INCAL as a facility member, please contact Emily Berger at eberger@ihca.org or 317-616-9036 for a copy of the application form or additional membership details.

<input checked="" type="radio"/> Associate Member - Standard	\$500.00
<input type="radio"/> Associate Member - Key	\$3,500.00

bttotal: \$500.00

Next

6. Update your membership details by answering the Membership Questions.

- You have the option to update your three category listings that will be reflected in the online Vendor Directory.
- You also have the option of uploading your logo, which will display for Key and Title Members in the Vendor Directory. This is also the logo we will use for exhibitor/sponsorship recognition if you purchase any additional sponsorships throughout the year.
- **Click on the “Agree” button next to the Agreement and Payment language.**
- **Then click “Next.”**

The screenshot shows the 'Membership Questions' form in a web application. The form is titled 'Membership Questions' and includes the instruction 'Please answer the following questions'. It contains several sections: a checkbox for automatic renewal, an 'Other Information' section with a text area for 'Associate Member Vendor Listing Selection', a 'Listing Category 1' dropdown, a logo upload section with 'Choose File' and 'Upload Files' buttons, and an 'Agreement and Payment' section with a long disclaimer and an 'AGREE' button. A yellow arrow points to the 'AGREE' button. Another yellow arrow points to the 'Next' button at the bottom right of the form. The top navigation bar includes 'Membership Type', 'Chapter', 'Section', 'Membership Questions' (active), 'Add-Ons', and 'Summary'. The bottom left shows a price of '\$500.00'.

7. If you would like to make an optional donation to the Indiana Health Care Foundation in support of scholarships and workforce development programs for long term care professionals, you may do so here.

- You can adjust the amount to any monetary amount of your choosing.
- If you **DO NOT** wish to make a contribution, update the amount to \$0.
- **Click the “Add” button, and then click “Next.”**

Membership Type Chapter Section Membership Questions **Add-Ons** Summary

Donations

Indiana Health Care Foundation (Optional)	\$ 85	Add
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We hope you will consider making an optional contribution to the Indiana Health Care Foundation in support of scholarships and workforce programming for long term care professionals.

Additional Products You Might Like

Subtotal: \$500.00

[Next](#)

8. View your Summary detail.

- If you need to make any adjustments, use the arrow at the top left of your screen to navigate back to prior windows.
- Once you are satisfied with the subtotal and then click **“Add to Cart”** at the bottom of your screen.

Membership Type Chapter Section Membership Questions Add-Ons **Summary**

Your Selections [Edit](#)

Membership Fee	
Associate Member - Standard	\$500.00
Subtotal: \$500.00	

Subtotal: \$500.00

[Add to Cart](#)

9. You'll be presented with your cart.

- Click **“Checkout.”**

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[Return to IHCA.org](#) [Refer to myIHCA FAQs](#)

MyIHCA Home Engagement Hub Events & Training Shop CEUs

My Cart

Organization Membership	
Associate Member - Standard	\$500.00
	Remove

Subtotal (1 Item): \$500.00

[Checkout](#)

10. Complete the payment detail.

- You have the option of securely saving your credit card information for future transactions.
- Apply any applicable discount codes.
- Select your billing address preference.
- **Click “Checkout.”**

The screenshot shows a checkout interface with a progress bar at the top indicating the current step. The main content is divided into two columns. The left column contains the 'Payment method' section, which includes a 'New Payment Method' option with a green radio button. Below this, there are fields for 'Credit Card Number' (4111111111111111), 'Name on Card' (TEST), 'Exp. Month' (01), 'Exp. Year' (20), and 'Sec Code' (123). A '+ Save' button is next to the card number field. Below the card details is a section for 'Add a Discount or Promotional Code' with an 'Enter Code' field and an 'Apply' button. At the bottom of the left column is the 'Billing Address' section, which has a green radio button for '5555 Parkcenter Circle, Dublin, OH 43017' and a white radio button for 'New Address'. The right column contains a 'Summary' table with the following data:

Product Name	Price/Qty	Total Price
Associate Member - Standard	\$500.00 x 1	\$500.00
Tax:		\$0.00
Total:		\$500.00

At the bottom right of the form, there is a large yellow arrow pointing to a blue 'Checkout' button.

11. Congratulations! You have renewed your membership. You are now entitled to all membership benefits, including discounted registration fees for various education event attendee registrations, or event sponsorships and exhibit offerings.

If you have any questions about your IHCA/INCAL Associate Membership, please contact Emily Berger at eberger@ihca.org , or 317-616-9036, or refer to the 2020 Associate Membership & Sponsorship Guide, which contains a wealth of information on all of our major events and sponsorships.