

X-ray Registrant Verification System

E-PAYMENTS GUIDE

Important Notices

It is highly suggested that registrants gather all data before entering it into the X-ray Registrant Verification System. Registrants will receive a warning after 25 minutes of inactivity. Data will be lost if the time is not extended another 30 minutes. The Equipment tab can be saved as a draft by clicking "Save As Draft" on the bottom of the tab. The draft will save for 72 hours.

Registrants who want to pay their x-ray registrations by e-check or credit card must complete their verification in the X-ray Registrant Verification System. The ability to make e-payments will not be available for registrants who have not completed their data verification.

E-Payment Enhancements

The E-Payment project includes several enhancements to the X-ray Registrant Verification System. You do not need to mail registration forms or fees for the enhancements below:

- 1. Annual Registration annual data review process
- 2. Annual Registration online payments
- 3. Additional Registration process and online payments
- 4. Replacement process with no payment due

Conduct Annual Data Review

Registrants with an Annual Registration due must conduct an annual data review in the X-ray Registrant Verification System before they can pay their invoice online. The system will timeout after 30 minutes of inactivity, so be sure to gather all necessary documentation to complete your review.

All three tabs on the left-hand side of the screen, Demographics, Contacts, and Equipment must be reviewed before a payment can be made. To complete this review, follow the steps below:

 Login to the online system through this link: <u>https://xray.web.health.state.mn.us/</u>.

X-RAY REGISTRANT VERIFICATION SYSTEM E-PAYMENTS



- 2. Enter your facility Username and Password. If you do not remember your username, contact Maddy Schopf at madelyn.schopf@state.mn.us. If you do not remember your password, click on Forgot Password, and the system will send you an email.
- 3. After you click on "view", you will see a "Time for Yearly Renewal" message at the top of the screen.



4. Verify the data on the Demographics tab. Make changes as needed to the data including adding any new equipment, and then click the Submit button at the bottom of the screen.



5. When the Submit button is clicked, you will see the word "Verified" on the tab completed.



6. If data is missing, you will receive red error messages at the top of the screen. You need to fill out all mandatory fields, and then again click the Submit button at the bottom of the screen.

- 7. Complete these steps for the Contacts and Equipment tabs until all mandatory data is entered.
- 8. When you have completed entering data on the last tab, the annual review is complete. The system will direct you to your invoice.

Pay Invoice

After the review is complete or after you added new equipment, the system will direct you to your invoice. To make a payment, follow the steps below:

- 1. Verify the invoice is correct. If anything is incorrect, click on the Return to Home button to correct the data.
- 2. Click on Pay Now. You will be redirected to the US Bank Payment Portal.
- 3. Enter all the mandatory fields in the US Bank Payment Portal.
- 4. For credit card payments, there is a 2.49% service fee in addition to the invoice payment. There is no fee for e-check payments.
- 5. Click Confirm. You will receive a confirmation number.
- 6. Click Continue to finalize your payment in our system. If you do not click Continue, the invoice will not show as paid in the system.

Minnesota Department of Health Protecting, maintaining and improving the health of all Minnesotaus		E
Confirmation Please keep a record of your Confirmation Number, or <u>print this pa</u>	<u>ige</u> for your records.	
Confirmation Number MDHRAY000148081 You must click 'Continue' for payment to be properly applied.		
Continue		
Payment Details		

- 7. After payment is complete, you will be redirected back to the online system.
- 8. You will receive a Payment Confirmation message in our online system.

DEPARTMENT OF HEALTH	X-ray Registrant Verification System
Home staff@lifequestbemidji.com ◄	
Payment Confirmation	
Transaction Completed	
The transaction has been recorded in the X-ray Registrant Verification System. Transaction ID: 500614 Confirmation Number: MDHRAY000148081	
If you paid for a facility's annual registration, you can return to the facility's verify information page to view the annual registration certificate.	

- 9. If you have submitted your Annual Registration, you can print or save your registration certificate by clicking on the Home button, then view. You will see the print certificate message on the top of the Demographics screen.
- 10. The X-ray Unit will receive record of your payment made.

Adding New Equipment

Registrants with an Additional Registration can make payments through the online X-ray Registrant Verification System. New equipment can be added to the system, and the invoice can be paid at that time. To complete additional registration, follow the steps below:

- 1. Go to the Equipment tab.
- 2. Click on Add Equipment button. The new equipment will be added to the inventory list in sequential order.

Demographics	Equipment
Contacts	Click on a console number below to expand and collapse the console details
Equipment	Console # 003 - Accelerator Medical
	Console # 004 - Accelerator Medical
	Console # 005 - Select
	+ Add Equipment

- Click on new equipment Console #. Enter all mandatory fields. For questions, please review the Field Definition Guide found on <u>X-ray Registration</u> (https://www.health.state.mn.us/communities/environment/radiation/xray/forms.html) webpage.
- 4. To submit equipment changes, the registrant must review the text in red at the bottom of the Equipment tab. It is mandatory to check the box before clicking on Submit Equipment Changes.

Demographics	Equipment
Contacts	Click on a console number below to expand and collapse the console details
Equipment	Console # 002 - Accelerator Medical
	Console # 003 - Accelerator Medical
	Console # 004 - Accelerator Medical
	+ Add Equipment
	Please review the equipment above. It is the registrant's responsibility to ensure all data is correct and make any changes as they occur in the X-ray Registrant Verification System. Refer to Minnesota Rules, Chapter 4732 regarding the importance and impact of this verification.

- 5. Click on Submit Equipment Changes, on the bottom of the inventory list on the Equipment tab. The equipment will now be added to the inventory list.
- 6. The system will direct you to your invoice. See Pay Invoice section above.

Replacement Process

Registrants with x-ray equipment replaced with another piece of x-ray equipment can make replacement changes in the X-ray Registrant Verification System. There is no fee for replacement equipment.

- 1. Go to the Equipment tab.
- 2. Find x-ray equipment being replaced.

X-RAY REGISTRANT VERIFICATION SYSTEM E-PAYMENTS

3. Click on Console # and Replace Console button.

Console # 022			
Manufacturer: *	Model: *	Serial Number:*	Location: *
Acteon	▼ Test	12345678	Rm 1
Installation Date: *	Status: *		
5/1/18	In use	¥	
	help 05/16/2018		
Human Use? *	Portable? *		
Yes	• Yes	V	

- 4. You will receive a Confirmation Replace message. Click Yes button to continue.
- 5. To delete the old equipment, you will be directed to complete the Recipient/Facility Name and Address and Please Describe Status Change fields. Be specific with the old xray equipment disposal information, and include the Service Provider name, Employer, or new site name.

Manufacturer:	Model:	Serial Number:	Location:
Acteon	▼ rest	test	test
nstallation Date:	Status:	Recipient/Facility Name and Addre	ss:*
5/1/18	Deleted	•	
Tubes Tube Number:			
Tubes Tube Number:			
Tubes Tube Number:			
Tubes Tube Number: 1 Type:	Manufacturer:	Tube Insert Seria	Number:
Tubes Tube Number: 1 Type: CBCT-Veterinary	Manufacturer:	Tube Insert Seria	Number:

6. Under the old console information is the new console and number. You must enter all mandatory fields to complete your replacement.

nuracturer: -		Model: *	Serial	lumber: *	Location: *	
ielect	*					
tallation Date: *		Status: *				
		In use	•			
		() help				
man Use? *		Portable? *				
ielect	٣	Select	*			
Tubor						
- Delete Newly Added Tube	1					
ube Number:						
1						
ype: *		Manufacturer: *		Tube Insert Serial Numl	ber:*	
Select	٠	Select		•		
itatus: *						
In use	٠					

7. To submit equipment changes, the registrant must review the text in red at the bottom of the Equipment tab. It is mandatory to check the box before clicking on Submit Equipment Changes.

Demographics	Equipment
Contacts	Click on a console number below to expand and collapse the console details
Equipment	Console # 002 - Accelerator Medical
	Console # 003 - Accelerator Medical
	Console # 004 - Accelerator Medical
	+ Add Equipment
	Please review the equipment above. It is the registrant's responsibility to ensure all data is correct and make any changes as they occur in the X-ray Registrant Verification System. Refer to Minnesota Rules, Chapter 4732 regarding the importance and impact of this verification.

- 8. Click on Submit Equipment Changes, on the bottom of the inventory list on the Equipment tab. The new equipment will now be added to the inventory list as a Replacement, and the old equipment will be marked Deleted Pending Review.
- 9. Deleted equipment will require an MDH review. If MDH determines that the equipment should not have been deleted, it will be added back onto your inventory.
- 10. No fees are due for replacements.

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To obtain this information in a different format, call: 651-201-4545.