IDA Guide to ONLINE.IHCDA.IN.GOV

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Registering on OnlineIHCDA

First-time users will need to register for an account.

- 1. Go to online.ihcda.in.gov to access the website
- 2. Choose "Authority Online"



3. First-time Users will have to click on the "New User? Register Here"

ihcda OO© Indees Reading & Consensity Development Authority	Indiana Housing Online Management System
	Welcome to the Authority DMS Online Management System This site will allow organizations working with the Indiana Housing and Community Development Authority to manage information about their awards. Some of the features of this site are daims management. Owner Certifications, IDA Awards, NAP Reporting, and the Single Family software download. This site continues to be expanded to allow our partners to work more closely with us and to streamline our processes. If you are heaving problems logging in or creating a profile please email claims@thoda.in.gov. Usemame:

NOTE: An organization code is preferred for new Users establishing profiles because this Organization Code directly links new Users to their organization in the system.

If you do not know your organization code, you can email <u>claims@ihcda.in.gov</u> and request it. Not having it will **not keep you from establishing a profile but may delay your permissions request if the claims specialist does not know which organization to affiliate you with in our system. **

New User Registration:

1. Enter the Profile Information, including First Name and Last Name. Then enter your business email address and create a password. The default user name will be your email, but you can change this if you wish only during the initial setup.

Once this is established, it cannot be changed or reset. User Passwords must be at least 7 characters and contain at least one number.

Registration In order to gain access to this website, you must request it an	nd have it approved by the S
If your organization is already registered, please enter your or organization or the HFA. This code will ensure that your regis	rganization code which you (tration can be processed m
Profile Information	
First Name:	If your organization is alre
Last Name:	organization or the HFA. T
E-mail: NOTE: It is recommended that new users use	can be processed more q
their business email address.	
	My Organization is not reg
Osemame:	Organization
Password:	Name:
Confirm Password:	Address:
	City:
	State:
	Zip Code:
	Telephone:
	Fax: (ontional)

If you do not know your organization code, you can email <u>claims@ihcda.in.gov</u> and request it. Not having it will **not keep you from establishing a profile but may delay your permissions request if the claims specialist does not know which organization to affiliate you with in our system. **

2. Once you have entered your code, please select the *Load* button. This will populate the information in the organization area based upon the Organization Code entered. Please verify the information is correct.

egistration		
rder to gain access to this website, you must request it a	nd have it approved by the State. Please enter the following informa	nation:
our organization is already registered, please enter your of anization or the HFA. This code will ensure that your regis	ganization code which you can obtain from another user at your tration can be processed more quickly.	
Profile Information		
First Name:	If your organization is already registered, please enter your organization code which you can obtain from another user at you	ur
Last Name:	organization or the HFA. This code will ensure that your registrati	tion
E-mail: NOTE: It is recommended that new users use their business email address.	Enter Organization Code:	
	My Organization is not registered 🔲	
Username:	C Organization	
Password:	Name:	
Confirm Password:	Address:	
	City:	
	State:	
	Zip Code:	
	Telephone:	
	Fax: (optional)	

3. If your organization has never used IHCDAOnline before and is, therefore, not registered, please check the My Organization is not registered box.

egistration

rder to gain access to this website, you must request it an	d have it approved by the State. Please enter the following information:
our organization is already registered, please enter your or anization or the HFA. This code will ensure that your regist	ganization code which you can obtain from another user at your tration can be processed more quickly.
Profile Information	
First Name:	If your organization is already registered, please enter your organization code which you can obtain from another user at your
Last Name:	organization or the HFA. This code will ensure that your registration
E-mail: NOTE: It is recommended that new users use their business email address.	can be processed more quickly. Enter Organization Code:
	My Organization is not registered 🔲 🖕
Username:	Organization
Password:	Name:
Confirm Password:	Address:
	City:
	State:
	Zip Code:
	Telephone:
	Fax: (optional)

4. Enter your organization's information in the Organization Box below. This will also cause the Organization to be registered for future use

egistration

rder to gain access to this website, you must request it and have it approved by the State. Please enter the following information:

our organization is already registered, please enter your organization code which you can obtain from another user at your anization or the HFA. This code will ensure that your registration can be processed more quickly.

Profile Information	
First Name:	If your organization is already registered, please enter your organization code which you can obtain from another user at your
Last Name:	organization or the HFA. This code will ensure that your registration
E-mail: NOTE: It is recommended that new users use	can be processed more quickly.
their business email address.	Enter Organization Code:
	My Organization is not registered 🔲
Username:	Organization
Password:	Name:
Confirm Password:	Address:
	City:
	State:
	Zip Code:
	Telephone:
	Fax: (optional)

5. Select the Access Type needed by the user as described in Section 2 of this document. Your Organization Administrator will review the requested access type and determine which specific permissions best fit the user needs. Once you have made the appropriate selections, click the *Next* button.

Fax: (optio	ial)		
Access Types Please check the box next to the type of access you are requesting. You <i>directly</i> involved in. If you request access for a program that you are not for all programs.	should <i>only</i> avolved with	request access to the progra , you may find that your requi	am(s) that you are est will be denied
 Annual Owner Certification and 8609 Access for Rental Housing Neighborhood Assistance Program Access for Community Develop Individual Development Account Access Claim Managment Access HCV Access Third Party Claims Access 	nent		
Manage your organizations information and users			
Cancel Next			

- 6. Review the Registration Summary screen. Please verify all information on this screen is correct. Please note that if you cancel at this point, all information will be removed from the Registration Screen. If it is all correct, click the Submit button.
- 7. You will then receive the following message at the bottom of the screen:

"Your registration information has been submitted and is being processed. An email notification will be sent to you upon approval or denial. Please be aware that your request may take up to 3 business days to be processed."

Click *Return* to exit this page.

After you have completed the New User registration, your Organization's administrator will receive an email indicating that you have requested permissions. At this time, please email claims@ihcda.in.gov and request permissions from IHCDA. Once the Claims department receives your email, someone from that department will grant your permissions.

How to Find Your Organization Code (for returning organizations)

Returning organizations can find their organization code by logging on to onlineIHCDA.

1. Click on "My Profile" on the left. This screen may look different depending on the reports an agency submits and what individual staff have access to.

ihcda O C C Indiana Housing & Community Development Authority	Welcome Veda Morris-May	Indiana Housing Online Management System	Logout Help
My Profile	Programs		11.45
	IDA	Individual Development Account Administrators can manage their participants and programs through this site.	
	NAP	Neighborhood Assistance Program. This will allow awardees to enter their semi-annual reporting as well as apply for the NAP program during open rounds.	
	Award Claims Management	Claims Management will allow an Awardee to submit claims online for payment. This will work for the majority of the awards that use a claims process. You are able to submit claims for any award that your organization is the awardee as well as view the claim status.	
	Professional Services Claims Management	Claims Management will allow an Awardee to submit claims online for payment. This will work for the majority of the awards that use a claims process. You are able to submit claims for any award that your organization is the awardee as well as view the claim status.	
	My Profile	Manage your profile including your password, contact information, your organization information, and other information about your organization.	
	Many features of the Authority Online sys with another organization or with someor your profile screen on the 'My Organizati	stem are based your organization. In some cases, you may need to share your 'Organization Code' ie in your organization who is registering as a new user. This organization code can be found from on' page.	

2. Choose "Information" under Organization on the left-

ihcda OO Indiana Housing & Community Development	Authority Welcome Veda h	^{Norns-May} Indiana	Housing Online Management System
Return To Programs Listing	Password Reset		User Access
Return	Current Password:		Neighborhood Assistance Program Access for Community Development
User Details	New Password:		NAP Viewers - Date Granted: 1/24/2018
Change Organization	Confirm Password:		NAP Editors - Date Granted: 4/4/2018
Organization Information Contacts	Set Password		Individual Development Account Access RIDA Administrators - Date Granted: 5/14/2018 IDA Administrators - Date Granted: 5/14/2018
	First Name:	Veda	Claim Managment Access
	Last Name: Organization:	Morris-May	Claims Management Submitter - Date Granted: 4/4/2018 Claims Management Editors - Date Granted: 4/4/2018
	Organization Addres	s: 30 South Meridian St Suite 1000	Third Party Claims Access
	City:	Indinapolis	Third Party Claims
	State:	IN	Manage your organizations information and users
	Zip Code:	46204	Organization Administrators
	Telephone:	(317) 232-7777	View organization information and request new permissions
	Fax: (optional)	(317) 232-7778	Granization Viewers - Date Granted: 1/24/2018
	E-mail:	vmorrismay@ihcda.in.gov	Online Application Access for Developers Only
	Username:	vmorrismay	User Access Administration
	Update		Online Application Editors

3. "Organization Code" will be found in the 'Physical Address " section

ibeda OOE	Welcome Veda Morris-N	lay			<u>Loqout</u>
		Indiana I	Housing Online Manageme	ent System	<u>Help</u>
Indiana Housing & Community Development Authorit	Ŷ				18:58
Return To Programs Listing	Organization Information				
Return Profile	Physical Address				
User Details	Organization Code:				
Request New Access Change Organization	Organization Type	Government - State	Organization Sub-Type	• •	
Organization	Organization Name:	IHCDA	Parent Organization:		
Information	Federal ID#:		Duns#:	086870479	
Contacts	Address 1:	30 S Meridian St	Primary Phone:	(317) 232-7777	
	Address 2:	ste 1000	Primary Fax:		
	City:	Indianapolis	State:	IN 🗸	
	Zip:	46204	County:	MARION	\checkmark
	Date of Formation		MBE WBE		

Submitting a Claim

1. Select "Awards Claims Management" on the left side of the screen for access to the IDA program within IHCDAOnline.

ihcda OO®	Welcome Veda Morris-May	Indiana Housing Online Management System	Loqout Help 17:45
My Profile	Programs		
	IDA	Individual Development Account Administrators can manage their participants and programs through this site.	
	NAP	Neighborhood Assistance Program. This will allow awardees to enter their semi-annual reporting as well as apply for the NAP program during open rounds.	
	Award Claims Management	Claims Management will allow an Awardee to submit claims online for payment. This will work for the majority of the awards that use a claims process. You are able to submit claims for any award that your organization is the awardee as well as view the claim status.	
	Professional Services Claims Management	Claims Management will allow an Awardee to submit claims online for payment. This will work for the majority of the awards that use a claims process. You are able to submit claims for any award that your organization is the awardee as well as view the claim status.	
	My Profile	Manage your profile including your password, contact information, your organization information, and other information about your organization.	
	Many features of the Authority Online sy with another organization or with someor your profile screen on the 'My Organizati	stem are based your organization. In some cases, you may need to share your 'Organization Code' e in your organization who is registering as a new user. This organization code can be found from on' page.	

2. To create a new claim click on "create claim" in the left column

ibada OOG	Welcome Adam	Lawson							<u>Loqout</u>
	test			Indiana Ho	using Onli	ne Management Sy	/stem		<u>Help</u>
Indiana Housing & Community Development Authority									19:51
Return To Programs Listing	Award Cla	im List							
Awards		Elot							
Award Info	Claims manager	nent is designe	d to al	llow a grantee to s	ubmit your red	uest for reimbursement to	HCDA. The list b	elow will allow you to)
Claim List	view all of your ac	tive claims. The	e step	represents where	your claim is	in the payment approval pr	the eword is active	ew claim, click the lir	IK
Create Claim	programs that are	e currently allow	/ind el	ectronic claims	e your organiz	auon is ule grantee, while	une awaru is acuve	e, and for furfulling	
Manage Award Job Hours	programo trat an	currently anot	ing on	control ordinity.					
Manage Program Income	Once you submit	the claim, you i	may sti	ill need to submit y	our supportin	g documentation to IHCD/	Abefore your claim	will be processed. In	1
	the future, this sit	e will allow you	to atta	ch electronic copie	es of your sup	porting documentation as	part of the claim.		
My Profile	Note that a status the status is 'Awa	of 'Awaiting Ap iting Approval',	proval you ha	' means that the cl we not yet submitte	aim has not p ed this claim f	assed that step yet. If the s or payment.	step is 'Claim Subi	mitted by Grantee' ar	d
	Click a claim nun	nber to view the	claim.						
	My Awards		~ [Show Only Unst	ubmitted Clair	ns Show All Claims			
	Receipt No.	Award No.	∇	Award Amount	Claim Total	Step	Status	Status Date	
	130/30	IDA TEST		\$100,000.00		Claim Created - IDA Agency	Awaiting Approval	11/23/2015	
	150455	test						Third Party Payment	
	120005	IDA TEST		\$100,000.00		ACH Transfer	Approved	4/26/2016	
	123333	test						Grantee Payment	

3. Use the first drop down to "Select the Award". This will be the IDA award that you are wanting to claim from.

Indiana Housing & Community Development Authority Welcome Test Person Indiana Housing & Community Development Authority Indiana Housing Return To Programs Listing Create Claim Award Info Claim List Create Claim To start a new claim, select the award from the list and click the to most likely cause is that you have an existing claim that has not be do not see an unsubmitted claim for your award in that list, then the electronically. Select an Award IDA TEST My Profile Select a Transaction Type	Welcome Test Person test Indiana Housing Online Management System	<u>Logout</u> <u>Help</u> 19:50
Return To Programs Listing	Create Claim	
Award Info Claim List Create Claim Manage Award Job Hours Manage Program Income	To start a new claim, select the award from the list and click the button. If your award is not in the list, there could be a couple reasons. The most likely cause is that you have an existing claim that has not been submitted for payment. Verify this from the 'Claim List' screen. If you do not see an unsubmitted claim for your award in that list, then IHCDA may not be currently allowing this award to be submitted electronically. Select an Award IDA TEST V Create Claim	
My Profile	Select a Transaction Type	

4. Use the second dropdown to "Select a Transaction Type". For IDA, agencies should select one of the following:

iboda OOO	Welcome Test Person	ogout
	test Indiana Housing Online Management System	<u>Help</u>
Indiana Housing & Community Development Authority		19:50
Return To Programs Listing	Create Claim	
Award Info Claim List Create Claim Manage Award Job Hours	To start a new claim, select the award from the list and click the button. If your award is not in the list, there could be a couple reasons. The most likely cause is that you have an existing claim that has not been submitted for payment. Verify this from the 'Claim List' screen. If you do not see an unsubmitted claim for your award in that list, then IHCDA may not be currently allowing this award to be submitted electronically.	
Manage Program Income	Select an Award IDA TEST V	
My Profile	Select a Transaction Type	

<u>Third Party Payment</u>: A third party payment is a draw of funds that *will be paid to an IDA Participant*.

<u>Grantee Payment:</u> A grantee payment is a standard draw of funds *for the administration of the grantee's IDA award.*

<u>Adjustment:</u> An adjustment transaction allows an award grantee to make corrections to line items within an award. An adjustment will have both positive and negative line item amounts and must have a net total of zero. No funds are either drawn or paid as part of an adjustment transaction.

****ADJUSTMENT CLAIMS SHOULD NOT BE USED IN THE IDA AWARDS.** You need to consult a Claims Review Specialist to discuss the filing of an adjustment claim. No adjustment claims will be approved without prior approval being given to grantee per IHCDA staff. ******

<u>Return of Funds</u>: Is a transaction to return funds back to IHCDA. The organization will not be able to access those funds again, so **ROF claims should only be used at the end** of an award or if there are leftover funds from an IDA participant graduating.

<u>Repayment Claim</u>: Is a *transaction to return funds back to IHCDA that will go back into the award amount. These funds are able to be reused*, and are most common when an IDA participant either leaves the program or is reassigned to a new award.

5. When you have selected the appropriate award and transaction type you can hit "create claim". The budget lines remain the same for all the claim types.



** It is important to note that you may NOT have a claim that contains both administrative and match amounts. These are two different types of claims, as specified above in #4. **

GRANTEE (ADMINISTRATIVE) CLAIMS BEFORE IDA018:

On awards previous to IDA018, the amount that you are requesting for ADMIN will have to be split in half between State and AFI (Federal). These amounts must be exactly split 50% into each line item. For example: If you are claiming 100.00, \$50.00 will be placed in the State Admin line item and \$50.00 will be placed into the Federal AFI Admin line item.

After you enter the amounts, you will click SAVE in the bottom right hand corner of the screen.

Award F	Remaining Budget: \$7,356.00			
Awa AF	rd I			
	Remaining Budget: \$3,678.00			
	Line Item	Total Budget	Remaining Balance	Amount
	Admin	\$750.00	\$750.00	497.23
	AFI Match	\$4,000.00	\$2,928.00	0.00
	Remaining Budget: \$3.678.00			
	Line Item	Total Budget	Remaining Balance	Amount
	Line Item	Total Budget \$750.00	Remaining Balance \$750.00	Amount
	Line Item Admin State Match	Total Budget \$750.00 \$4,000.00	Remaining Balance \$750.00 \$2,928.00	Amount 497.23
Commer	Line Item Admin Admin State Match Its	Total Budget \$750.00 \$4,000.00	Remaining Balance \$750.00 \$2,928.00	Amount 197.23 0.00

GRANTEE (ADMINISTRATIVE) CLAIMS IDA018 & Beyond:

You will enter the Administrative amount being claimed in the ADMIN line item. You may only enter the amount in the STATE line item provided for ADMIN.

Claim IDA TE	Details ST				
The clair the rema budgete list of the button a	ns detail displays the information about the current claims for this awar ining amount for each line item. Use the box for each line item to enter d line items, you will see all available line items for your award. If your as ebuildings along with the line items associated with those buildings. the bottom of the page.	d. You can see the born the amount you are award requires claims Once you have entern	udget breakdown for the awar claiming. If your award is not r against individual buildings, y ed your claim amounts, click th	d along with restricted by you will see a he 'Save'	
Claim R	eference Number:				
Award F	emaining Budget: \$60,000.00				
Awa Sta	rd te				
	Remaining Budget: \$60,000.00				
	Line Item	Total Budget	Remaining Balance	Amount	
	Admin	\$10,000.00	\$10,000.0 <mark>0 0.00</mark>		
	State Match	\$50,000.00	\$50,000.00 0.00		
Commei	ts				
			~		
			\checkmark	\square	
			(Save	
			(

MATCH CLAIMS BEFORE IDA018:

On awards previous to IDA018, the amount that you are requesting for THIRD PARTY / MATCH claims will have to be split in half between State and AFI (Federal). These amounts must be exactly split 50% into each line item. For example: If you are claiming 100.00, \$50.00 will be placed in the State Match line item and \$50.00 will be placed into the Federal AFI Match line item. You will need to click SAVE for the amounts to register in the system.

Award Remaining Budget: \$8,436.00

Award

AFI

Remaining Budget: \$4,218.00

Line Item	Total Budget	Remaining Balance	Amount
Admin	\$750.00	\$252.77	0.00
AFI Match	\$4,000.00	\$3,468.0 <mark>0</mark>	540.00

State

Remaining Budget: \$4,218.00

Line Item	Total Budget	Remaining Balance	Amount
Admin	\$750.00	\$252.77	0.00
State Match	\$4,000.00	\$3,468.00	540.00

Comments MATCH CLAIMS BEGINNING WITH IDA018 & BEYOND:

You will enter the MATCH amount being claimed in the STATE MATCH line item. You may only enter the amount in the STATE MATCH line item for a match claim. Then you will click SAVE.

Summar	y Claim Claim Status Supporting Documentation Receivables	5				
Claim I IDA TE	Details ST					
The clair the rema budgete list of the button a	ns detail displays the information about the current claims for this awar ining amount for each line item. Use the box for each line item to enter d line items, you will see all available line items for your award. If your see buildings along with the line items associated with those buildings, the bottom of the page.	rd. You can see the b r the amount you are award requires claims Once you have enter	udget breakdown fo claiming. If your aws s against individual l red your claim amou	r the award along wi ard is not restricted b buildings, you will see nts, click the 'Save'	th by e a	
Claim R	eference Number:					
Award F	Remaining Budget: \$60,000.00					
Awa Sta	rd Ite					
	Remaining Budget: \$60,000.00					
	Line Item	Total Budget	Remaining Balance	Amount		
	Admin	\$10,000.00	\$10,000.00	0.00		
	State Match	\$50,000.00	\$50,000.00	0.00		
Comme	nts					
				\sim		
				\sim		
				Sa	ve	

ATTACHING SUPPORTING DOCUMENTATION:

A. To Attach supporting documentation for the claim click "Supporting Documentation" at

the top.			
Summary Claim Claim Status Supporting Documentation Receivable	S		
Claim Details IDA TEST			
The claims detail displays the information about the current claims for this awa the remaining amount for each line item. Use the box for each line item to ente budgeted line items, you will see all available line items for your award. If your list of those buildings along with the line items associated with those buildings. button at the bottom of the page.	rd. You can see the b r the amount you are award requires claim: Once you have enter	udget breakdown fo claiming. If your awa s against individual b red your claim amou	r the award along wi ard is not restricted t buildings, you will se nts, click the 'Save'
Claim Reference Number:			
Award Remaining Budget: \$60,000.00			
Award			
State			
Remaining Budget: \$60,000.00			
Line Item	Total Budget	Remaining Balance	Amount
Admin	\$10,000.00	\$10,000.00	0.00
State Match	\$50,000.00	\$50,000.00	0.00

B. You will choose **"Claims documentation"** for the Document type and click BROWSE to upload documentation from your files. Once you have the correct file selected you will click on SUBMIT DOCUMENT.

	Summary Claim Claim Status Supporting Documentation Receivables
	Supporting Documentation
	IDATEST
	Accepted File Extensions: tiff, tif, doc, docx, xls, xlsx, xml, jpeg, jpg, pdf, msg
	Max File Size: 30720 KB
1	Document Type
	Upload Document Browse
	Required for Claim Submission
	Submit Document

C. Once you successfully upload files you will see them appear below the submit button. Please note that you cannot submit without attaching supporting documentation.

Summary Claim Claim Status Supporting Documentation Receivables
Supporting Documentation IDA TEST
Accepted File Extensions: tiff, tif, doc, docx, xls, xlsx, xml, jpeg, jpg, pdf, msg
Max File Size: 30720 KB
Document Type Claims Documentation V
Upload Document Browse
Required for Claim Submission
Submit Document
View DO NOT PAY DO NOT PAY BLN PRE DEMO INSPECTION CLAIM 9/18/2019 1:03:28 PM

SUPPORTING DOCUMENTATION REQUIREMENTS:

- a. Grantee Payments must include the following:
 - i. Timesheets for any IDA admin dollars that are being claimed
 - ii. The receipts for any supplies related to the IDA program purchased.
- b. Third Party Payments (MATCH) claims must include the following:
 - i. IHCDA Match Claim Document
- c. Return of Funds Claims must include the following:
 - i. Account Closeout Form
- d. Repayment Claims must include the following:
 - i. Account Closeout Form

6. After all documentation has been uploaded and the claim amounts have been entered and saved you will click on the **SUMMARY** tab at the top of the screen.

Sum	nary Claim Claim Stat	tus Supportin	g Documentatio	n Receivable	5			
Clair IDA Clair test Tran Vend	n Summary TEST n Receipt: 224902 saction Type: Grante lor:	e Payment						
The c award you w buildii	laims summary displays th d, previous draws against l ill see all available line iter ngs along with the line iter	ne information a ine items, and t ms for your awa ns associated w	bout previous a he remaining ar Ird. If your awar vith those buildir	nd existing clain nount for each li d requires claim ngs. To modify th	ns for this awar ine item. If you s against indivi ne current clain	rd. You can see th r award is not rest dual buildings, yo n, click on the 'Cla	ne budget break tricted by budge ou will see a list aim' link above.	down for the ted line items, of those
Awar	d Amount: \$60,000.00							
St	ate -							
	1.5 10	D 1 1	D : CL :	C 101	TILOL		D : DOE	C 1005
	Line item	Budget	Previous Claim	Current Claim	Total Claim	Balance to Claim	Previous RUF	Current ROF
	Nata Matak	\$10,000.00	\$0.00	\$0.00	\$0.00	\$10,000.00	\$0.00	\$0.00
2		\$50,000.00	\$0.00	\$0.00	\$0.00	\$50,000.00	\$0.00	\$0.00
	Group Total	\$60,000.00	\$0.00	\$0.00	\$0.00	\$60,000.00	\$0.00	\$0.00
				Claim	ied Percentage	0%		
То	tals							
		Budget	Previous Claim	Current Claim	Total Claim	Balance to Claim	Previous ROF	Current ROF
	Total - All Groups	\$60,000.00	\$0.00	\$0.00	\$0.00	\$60,000.00	\$0.00	\$0.00
				Claim	ed Percentage	0%		
By prome is funde may to 18 U. or jud scher false title, a share	essing the button on this s true, accurate, and compl with federal and state tu be prosecuted under appli S.C. § 1001, "Fraud and F tical branch of the Govern ne, or device a material fa evice a material fa withing or document knowi nd'or imprisoned for not I d. Please register for a us lete Claim	creen, I hereby ete. I understan nding sources, ; cable federal an alse Statements ment of the Unit ct, (2) makes ar ng the same to nger than five (ername if you d	certify that any d that any infor and any false cl d state laws an s," provides am ted States, anyq y materially fal contain any ma (5) years. I also o not have your	information sub mation, docume aims, statement d may result in o ong other things one who knowin se, fictitious, or f teirally false, fict understand that own.	mitted into the ntation, etc., sr s, documents, riminal and/or i, in any matter gly and willfully raudulent state fitous, or fraud Authority Onli omit Cleim	Indiana Housing (Idmitted by me is falsifications, or c civil penaltes. within the jurisdic (1) falsifies, com ment or represen ulent statement on ne usernames and Print Receip	Online Managen related to progr concealment of r tion of the exect ceals, or covers tation; or (3) me d passwords sh t Claim D	nent System by ams that are naterial fact(s), utive, legislative, up by any trick, kes or uses any fined under this ould not be etails Report
		Copyright © 2011	9, Authority DMS.	All rights reserved.				

7. You will verify the amounts are correct within this screen and then you will hit **SUBMIT CLAIM** in the bottom right-hand corner of the screen

Summary Claim Claim Sta	tus Supporting	Documentatio	n Receivables	3			
Claim Summary IDA TEST Claim Receipt: 224902 test Transaction Type: Grant Vendor:	ee Payment						
he claims summary displays t ward, previous draws against ou will see all available line it uildings along with the line ite	he information abo line items, and the ems for your award ms associated with	out previous a e remaining an d. If your award h those buildin	nd existing clain nount for each li d requires claim igs. To modify th	ns for this awar ne item. If you s against indivi ne current clair	rd. You can see th r award is not rest dual buildings, yo n, click on the 'Cla	ne budget breakt tricted by budget ou will see a list o aim' link above.	down for the led line items, of those
ward Amount: \$60,000.00							
State -							
Line Item	Budget P	revioue Claim	Current Claim	Total Claim	Balance to Claim	Previous ROF	Current ROF
Admin	\$10.000.00	\$0.00	\$0.00	\$0.00	\$10,000.00	\$0.00	\$0.00
State Match	\$50,000.00	\$0.00	\$0.00	\$0.00	\$50,000.00	\$0.00	\$0.00
Group Total	\$60,000.00	\$0.00	\$0.00	\$0.00	\$60,000.00	\$0.00	\$0.00
			Claim	ed Percentage	0%		
Totals	Budget P	revious Claim	Current Claim	Total Claim	Balance to Claim	Previous ROF	Current ROF
Total - All Groups	\$60,000.00	\$0.00	\$0.00	\$0.00	\$60,000.00	\$0.00	\$0.00
			Claim	ed Percentage	0%		
pressing the button on this is true, accurate, and comp ded with federal and state h y be prosecuted under appl U.S.C. § 1001, "Fraud and J judicial branch of the Govern heme, or device a material fis e writing or document know e, and/or imprisoned for not and. Please register for a u	screen, I hereby or lete. I understand unding sources, ar cable federal and also Statements, ment of the Unite uct, (2) makes any ing the same to or onger than five (5) sername if you do	ertify that any i that any inform of any false cl. state laws and " provides amo d States, anyo materially fals ontain any mat) years. I also not have your	information subr mation, documer alms, statement d may result in c ong other things one who knowing e, fictious, or f terially false, fict understand that own.	nitted into the ntation, etc., st , documents, riminal and/or , in any matter ply and willfully raudulent state titious, or fraud Authority Onli	Indiana Housing (ubmitted by me is falsifications, or c Civil penalties. within the jurisdic : (1) falsifies, con- ment or represen ulent statement on ne usernames and	Online Managem related to progra oncealment of m tion of the exect ceals, or covers tation; or (3) mai r entry; shall be t d passwords sho	thent System by ans that are haterial fact(s), itive, legislative, up by any trick, kes or uses any fined under this build not be
Delete Claim			Sut	omit Claim	Print Receip	t Claim D	etails Report

NOTE: If you do not see the amounts displaying in this screen, this means that you did not click the SAVE button in the CLAIM screen and you will need to go back into that screen,

re-enter the amounts and click save. You will then return to the SUMMARY screen and submit the claim .

NOTE: If you would at any time like to check on the status of your claim as it is moving throughout the system, you can click on the CLAIM STATUS tab. There are four steps a claim can be in.

- 1. Claim Created which means you have created the claim but the claim has NOT been submitted
- 2. IHCDA Program Administrator Review means the claim is being reviewed.
- 3. Accounting Review the claim has moved to Program accounting for review
- 4. ACH Transfer the claim is being paid

ihcda OO	Welcome Adam Lawson test Indiana Housing Online Management System	<u>Loqout</u> <u>Help</u> 19:55
Return To Programs Listing Awards Award Info Claim List Create Claim Manage Award Job Hours Manage Program Income My Profile	Summary Claim Claim Status Supporting Documentation Receivables Claim Status DA TEST This will allow you to follow the progress of your claim through the payment process. Below, you can see your claim move through the approval process toward payment. The current step is at the top of the list. Step Status Step Date Comment Claim Created - IDA Agency Awatting Approval 5/31/2019 7:41:00 AM Adam Lawson	

AMENDING A CLAIM THAT YOU HAVE ALREADY SUBMITTED:

- 1. Contact IHCDA at claims@ihcda.in.gov and request that the claim be denied.
- 2. Once the claim has been denied you will go back into the system, click on the claim, make the adjustments needed, click save and resubmit the claim.

How To Update Third Party Banking Information for the IDA Program

Third Party Claims should be going into a HOLDING ACCOUNT that you have established at a bank. They are for Participant match claims.

Third Party Claims (Match Claims):

Your Organization MUST HAVE A SEPARATE BANK ACCOUNT for your match claims.

IT IS A FEDERAL REQUIREMENT FOR THE IDA PROGRAM

This Account is a **<u>HOLDING</u>** account and should be established with the bank before you begin to process any type of claim within the IDA program.

To update Third Party/Match banking Information please do the following:

- 1. Go to <u>https://online.ihcda.in.gov</u> to access the website and log in.
- 2. Select the IDA TAB

Programs

Owner Certification	This will allow a property manager to complete their Owner Certifications for the RHTC, CDBG, HOME, and Development Fund programs.
Progress Report	This will allow the owner or developer to enter the Semi-Annual 8609 progress report.
Single Family Software Download	Single Family Participating Lenders can download the SFDMS software from here to manage their MRB, MCC, DPA, and MSP reservations.
HCV Reports	This will allow property owners to enter completion report and closeout information for their awards.
	Individual Development Account Administrators can manage their participants and programs through this site.
NAP	Neighborhood Assistance Program. This will allow awardees to enter their semi-annual reporting as well as apply for the NAP program during open rounds.
Award Claims Management	Claims Management will allow an Awardee to submit claims online for payment. This will work for the majority of the awards that use a claims process. You are able to submit claims for any award that your organization is the awardee as well as view the claim status.
Professional Services Claims Management	Claims Management will allow an Awardee to submit claims online for payment. This will work for the majority of the awards that use a claims process. You are able to submit claims for any award that your organization is the awardee as well as view the claim status.
Third Party Claims Management	Third Party Claims Management will allow a thirdy party organization to view their online claims for payment. Claims are submitted by the Awardee for direct payment to the third party organization.
Online Applications	Applicant organizations can submit an online application for any open rounds for programs.
My Organization	Manage the information about your organization such as contact information, users, partnerships, and partners.

3. Click on Banking Account Information

ihcda OO® Indiana Housing & Community Development Authority	Welcome Test Person Test Indiana Housing Online Management System
Return To Programs Listing	
Main Claims Management	Individual Development Account Management
Award Information Participant Information	This system is provided for IDA Administrators to manage their IDA Participants and associated IDA program information. Both IDA Administrators and IHCDA staff have access to this information and can perform their management functions.
Participal information Reports Bank Account Information Personal Savings Deposits Training Entry Form Manage Projects Manage Traditional IDA EDA Setup Manage Incentives	 The menu at the left will allow you to navigate through the site. The main areas are described below. Award Information - this is where you maintain general information about your IDA awards. Participants - this is where you can access your IDA participants. Reports - these are the available pre-built IDA reports. Banks - this is where you can maintain your list of banking partners. My Profile - this is where you can maintain your user information and change your password. Manage Users - this is where you can manage access to your IDA information for other users.
My Profile	Case Follow Up:
	There are no case notes due for follow up in the next 10 days.

4. You will click the EDIT button on the right hand side of the screen.

ihcda OO® Indiana Housing & Community Development Authority	Welcome Test Person L Test Indiana Housing Online Management System	ogou Heli 19:3-
Return To Programs Listing Main Claims Management Award Information Participant Information	Bank Account Information	
Reports Bank Account Information Personal Savings Deposits Training Entry Form	Show: Active Active Active and Inactive	
Manage Projects Manage Traditional IDA EDA Setup Manage Incentives	Add New Bank Name Routing Number City Contact Name Contact Email Phone Image: Contact Name Contact Name<	
My Profile	Account Information	

5. You will click on <u>ADD NEW BANK</u> if you do not already see your bank account information listed.



6. You will enter your banking information and routing number and click Save.

	YOU SHOULD BE ENTERING YOUR HOLDING ACCOUNT BANK INFORMATION
	Bank Account Information
	Bank Information
	Show: Show: Active Chactive and Inactive
	Name Routing Number City Contact Name Contact Email Phone Note: Some "Deactivate" buttons will remain disabled because the bank is being used by active accounts.
	Add Bank
	Name
	Routing Number
	Contact Email
	Address
	City
	Zip
	Phone Number
	Cancel Save
	A a a a rud Inda umanti a m

7. Then you will click on **Add Account** in the bottom section of the screen and fill out your account number. You will select **Holding** as the account type, select IDA as the Program, select your bank and enter the account number. Then you will click save.

	Account Information	tion	
	Show: O A	Active O Inactive O Active and Inactive	
	Account Type Program	m Bank Account #	
	Note: Some "Deactiv	vate" buttons will remain disabled because the account has a balance greater than zero.	
	Add Account		
ſ	Account Type		
	Program		
	Bank		
	Account Number		
l		Cancel Save	

If this is a bank that you are using for the first time or if you are changing your holding account information, it is imperative that you email claims@ihcda.in.gov_and report your organization, your award number and state that you have made a change or added new IDA THIRD PARTY_BANKING information to IHCDAONLINE. *If you do not report this to the email address, we will not be able to update our payment system with the new information and payments could continue to go to the old account on file.

8. Once we receive the email explaining that your banking information has changed, IHCDA will update the payment system and future payments will go to the updated banking information.