

MCCIST: The Collaborative Care Model (CoCM): An Evidence and Team –Based Care Approach to Integrating Behavioral Health into Primary Care

How to Register

1) Follow the link to the event page. You will need to register for both Day 1 **and** Day 2.

Day 1: August 25 (8:00 am – 4:00 pm)	https://micmt-cares.org/event/mccist-collaborative-care
Day 2: August 26 (8:00 am – 4:15 pm)	https://micmt-cares.org/event/mccist-collaborative-1

OR

Day 1: September 1 (8:00 am – 4:00 pm)	https://micmt-cares.org/event/mccist-collaborative-0
Day 2: September 2 (8:00 am – 4:15 pm)	https://micmt-cares.org/event/mccist-collaborative-2

2) If you are not already logged into the website, you will be brought to the login screen:

The screenshot shows a login form with the following elements:

- Username*** field with a text input box. Below it, the text reads: "Your username is your email address."
- Password*** field with a text input box. Below it, the text reads: "Enter the password that accompanies your username. If you have forgotten your password, you may request a reset link."
- A **LOG IN** button.
- A [create new account](#) link.

Two blue arrows point to these elements with the following text:

- An arrow points to the Username field with the text: "If you have an account, please login".
- An arrow points to the "create new account" link with the text: "If you do not have an account, please click create new account".

3) For **first time users:**

a. Please see Appendix A

4) For **existing users:**

a. Locate the Register Now button on the event page



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5) Complete the registration form

Are you registering for yourself or on behalf of others*

Myself

On behalf of others

Additional Emails to copy on the confirmation message

Multiple email addresses may be separated by commas.

I attest that I am registering for myself and/or I am the PO leader, practice manager, or direct manager of the attendee being registered. *

What is your role within collaborative care?*

Number of years' experience with CoCM*

I attest that the practice assessment was completed.*

The practice assessment is an excel document to be completed with MiCCSI and MCCIST.

SUBMIT **RESET**

Search Existing Users*
Search by first name, last name, or email

or

▶ Register a New User

If you are registering for someone else, you will need to search for their existing account or create an account on their behalf

**QUESTIONS ABOUT CREATING AN ACCOUNT OR REGISTERING?
PLEASE CONTACT MICMT-REQUESTS@MED.UMICH.EDU**

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Appendix A

1) For first time users, please create an account with the following fields:

CREATE NEW ACCOUNT

First Name*

Last Name*

Contact Phone Number*

Organization*

Practice

Role*

Licensure*

Email address*

A valid email address. All emails from the system will be sent to this address. The email address is not made public and will only be used if you wish to receive a new password or wish to receive certain news or notifications by email.

Username*

Several special characters are allowed, including space, period (.), hyphen (-), apostrophe ('), underscore (_), and the @ sign.

Password*

Password strength:

2) For next steps, please refer to **Step 4) for existing users**