

ASPIRE Supplier Manual

A 'how to' guide for primary care to:

- Register as new supplier**
- Update existing supplier details**

Single practice/site version

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Important information about your supplier registration

You **must be registered as a supplier** in the WA Primary Health Alliance (WAPHA) ASPIRE portal for grant and program payments.

This document details the steps required to complete:

- new supplier registrations with WAPHA. Please read the notes below before you begin registering your practice/site as a supplier.
- Updating existing supplier details.

Please follow this manual if you are registering as a supplier for ONE practice/site only.

It should take approximately five minutes to complete the registration for one practice/site.

If you are registering for **MULTIPLE practices or sites**, please refer to the [registering as a supplier for Multiple Practices manual](#) on the Practice Assist page.

What you need to complete a new registration or to update existing details

Having the following information at hand will help you register your practice as a supplier:

- ABN (Australian Business Number)
- Organisation full legal name
- Tax organisation type: Corporate, Trust, Partnership, etc.
- ACN (Australian Company Number)
- Bank Account details: BSB, Account, Account Name
- Address of practice/site

Recipient Created Tax Invoice (RCTI) Agreement

An RCTI agreement will expedite the payment of invoices for grants and program funding via WA Primary Health Alliance (WAPHA). This system relies on WAPHA issuing a tax invoice on behalf of a supplier.

However, this can only be done under GST legislation if there is an RCTI agreement between the supplier and the recipient.

The key benefit of entering an RCTI agreement with WAPHA is expediting the payment of your grant or program funding.

You, or your enterprise, must be registered for GST to enter the RCTI agreement.

To enter this agreement, review the Written Agreement below and mark the box as part of Step 1 during the registration process.

WRITTEN AGREEMENT

The recipient and the supplier declare that this agreement relates to the above supplies. The recipient can issue tax invoices in respect of these supplies. The supplier will not issue tax invoices in respect of these supplies. The supplier acknowledges that it is registered for GST and that it will notify the recipient if it ceases to be registered. The recipient acknowledges that it is registered for GST and that it will notify the supplier if it ceases to be registered. Acceptance of this recipient created tax invoice (RCTI) constitutes acceptance of the terms of this written agreement. Both parties to this supply agree that they are parties to an RCTI agreement. The supplier must notify the recipient within 21 days of receiving this document if the supplier does not wish to accept the proposed agreement.

Notice about the collection, storage, and use of your private information

The information you provide will be used to maintain contact with you throughout the Program. WAPHA uses an encrypted / secure process to capture and store all data captured through ASPIRE.

To find out more about how we use, and store, information please view our [Privacy Policy](#).

Need further help?

Please refer to the FAQ (Frequently Asked Questions) at the end of this document for further details.

If you have any queries please contact the grant or program teams who can assist you. Alternatively you can email practiceassist@wapha.org.au or call on **1800 2 ASSIST (1800 2 277 478)**.

Supplier Registration Process (New)

The supplier registration process includes **four steps / sections**.

Each section requires you to provide valuable information about your practice/site. The sections include:

1. Company details
2. Company contacts
3. Company addresses
4. Bank accounts

1. Company details

Enter the details for the Legal Entity for your General Practice or Pharmacy. You must complete all mandatory fields (those marked with an *) as well as those listed below (and highlighted in yellow in the screen shot below):

1. Company name – Enter the Legal name of the entity
2. Tax organisation type
3. Supplier type (please select 'General Practice' or 'Operational Supplier' for Pharmacy)
4. Tax country (please select Australia)
5. ABN (Australian Business Number)
6. ACN (Australian Company Number)
7. GST (Goods and Services Tax) registered (Yes/No)
8. RCTI (Recipient Created Tax Invoice) **refer to previous section for more information about RCTIs*
9. Indigenous owned
10. Your contact details (must include those of the authorised practice representative**)

****An authorised representative is a practice manager, practice principal or practice GP (owner), Pharmacist - Proprietor/ Owner Pharmacist who can legally sign on behalf of your practice/sites.**

Important points

- To populate your ABN, first select the tax country (Australia) and then enter your ABN.
- You can provide current insurance expiry dates in the additional information section (optional).

Register Supplier: Company Details

Company Name 1

Tax Organization Type 2

Supplier Type 3

Corporate Web Site

Attachments None

Additional Information

Professional Indemnity Expiry

Public Liability Expiry

Workers Compensation Expiry

ACN 6

Tax Country Australia 4

ABN 5

GST Registered Yes 7

Recipient Created Tax Invoice (RCTI) Yes 8

Indigenous Owned 9

Your Contact Information

Enter the contact information for communications regarding this registration.

First Name 10

Last Name

Email

Confirm Email

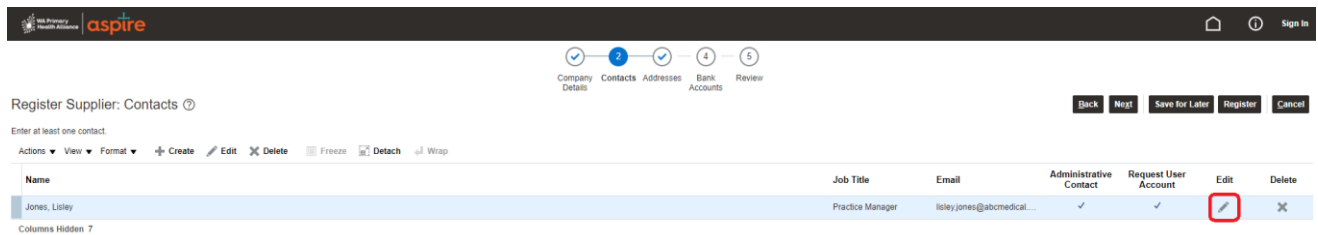
Once complete, click the 'Next' button to move to the Contacts page.

2. Company contacts

The contact details you entered during step 1 (for your organisation's authorised person) will be displayed on this page.

To ensure our Finance team can contact the authorised representative, click on the edit pen icon for the contact created during step 1 to add:

1. A phone or mobile number
2. Job Title



See below screen shot example.

Click 'Ok' when the contact details have been updated.

Edit Contact: Lesley Jones

Salutation

* First Name

Middle Name

* Last Name

2 Job Title

Administrative contact

1 Phone

Mobile

Fax

* Email

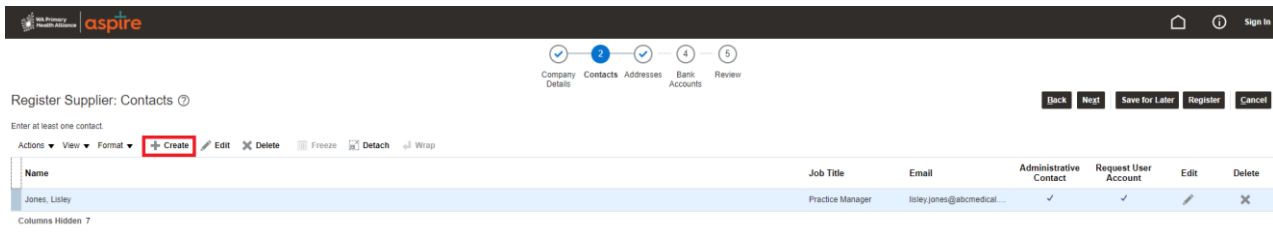
User Account

Request user account

Roles

Role	Description
Supplier Self Service Administrator	Manages the profile information for the supplier company. Primary tasks include updating supplier profile information and requ...
WAPHA_Supplier Bidder	Sales representative from a potential supplier responsible for responding to requests for quote, requests for proposal, request...

If you wish to add a second authorised contact for your organisation, simply click on the '+ create' icon and enter their details.



If you would like any new contact/s to be notified about their registration status, tick the 'administrative contact' check box.

If new contact/s require a 'user account' (to manage your organisation's profile and / or submit responses to WAPHA requests), please tick the 'request user account' checkbox.

Click 'OK' once this step is complete.

Create Contact

Salutation

* First Name

Middle Name

* Last Name

Job Title

Administrative contact

Phone

Mobile

Fax

* Email

▲ User Account

Request user account

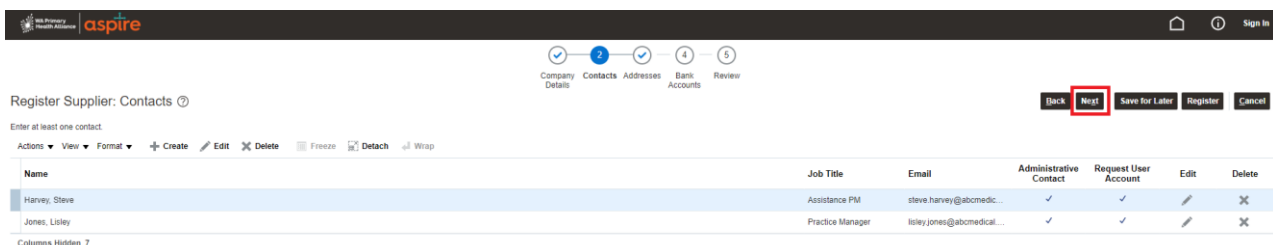
Roles

Actions View Format X Freeze Detach Wrap

Role	Description
WAPHA_Supplier Bidder	Sales representative from a potential supplier responsible for responding to requests for quote, requests for proposal, request...
Supplier Self Service Administrator	Manages the profile information for the supplier company. Primary tasks include updating supplier profile information and requ...

Create Another OK Cancel

Once complete, click the 'Next' button.



Important points

- Please provide a phone or mobile number for each authorised contact in case WAPHA needs to contact them regarding their registration.

3. Company address

Please enter the address for your practice/site in this section. To add your address, simply click the '+ create' icon.

Register Supplier: Addresses

Enter at least one address for remit-to and ordering address purposes.

Address Name: CONNOLLY

Country: Australia

Address Line 1: CONNOLLY Medical Practice

Address Line 2: 1 Fairway Circle

Address Line 3:

Suburb: Connolly

State: WA

Postal Code: 6027

Address Purpose:

- Ordering
- Remit to
- RFQ or Bidding

Phone: 61

Fax: 61

Email:

Address Contacts

Select the contacts that are associated with this address.

Job Title	Email	Administrative Contact	User Account

Columns Hidden: 4

In the 'Address Name' field please enter a 'unique identifier' such as your practice or pharmacy suburb i.e., 'Subiaco' or another reference like 'head office'.

Complete all other fields including:

- Address Line 1 - enter organisation name
- Address Line 2/3 - enter organisation address
- Suburb - enter organisation suburb
- State
- Postal Code
- Address Purpose - check all three 'address purpose' boxes (this field sets you up for the permissions you require,) including:
 - Ordering
 - Remit to
 - RFQ or Bidding
- Phone – enter organisation phone number
- Email – enter organisation email

Once you have entered your organisation address, you now need to link your authorised representative to your address. You do this by clicking the 'Actions' drop-down menu and choosing 'select and add.'

Click on the relevant contact/s from the list and then select 'apply' followed by the 'OK' button.

Select and Add: Contacts ✕

▲ Search

Name Job Title

View ▼ Format ▼

Name	Job Title	Email	Phone
Harvey, Steve	Assistance PM	steve.harvey@a...	
Jones, Lisle	Practice Manager	lislejones@ab...	

Rows Selected 1 Columns Hidden 1

Create Address

* Address Name

* Country

* Address Line 1

Address Line 2

Address Line 3

* Suburb

* State

* Postal Code

* Address Purpose Ordering
 Remit to
 RFQ or Bidding

Phone 61

Fax 61

Email

▲ Address Contacts

Select the contacts that are associated with this address.

Actions ▼ View ▼ Format ▼

Name	Job Title	Email	Administrative Contact	User Account
Jones, Lisle	Practice Manager	lislejones@ab...	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Columns Hidden 4

Click the 'Next' button to continue to the bank accounts section.

aspire Home Refresh Sign In

Company Details
 Contacts
 Addresses
 Bank Accounts
 Review

Register Supplier: Addresses

Enter at least one address for remit-to and ordering address purposes.

Actions ▼ View ▼ Format ▼

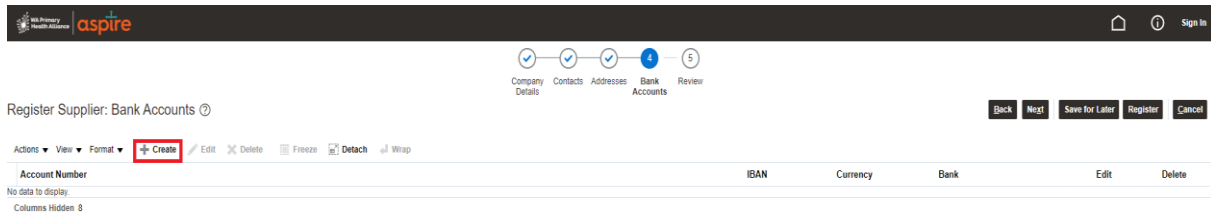
Address Name	Address	Phone	Address Purpose	Edit	Delete
CONNOLLY	CONNOLLY Medical Practice 1 Fairway Circle Connolly WA 6027		Ordering, Remit to, RFQ or Bidding	<input type="button" value="Edit"/>	<input type="button" value="X"/>

Columns Hidden 3

4. Bank account

You can now create a bank account for your organisation. Please note that you can only enter one bank account per organisation.

Click the '+' icon to add your organisation bank account.



Input all the following details and then click the 'OK' button:

- Country – Australia
- Bank – first three digits of your practice BSB
- Branch – second three digits of your practice BSB
- Account number
- Account name – practice name

Create Bank Account

Enter account number or IBAN unless account number is marked as required.

* Country	Australia	IBAN	<input type="text"/>
Bank	035 - WBC	Currency	<input type="text"/>
Branch	016 - Central Market		
* Account Number	57655468		

Additional Information

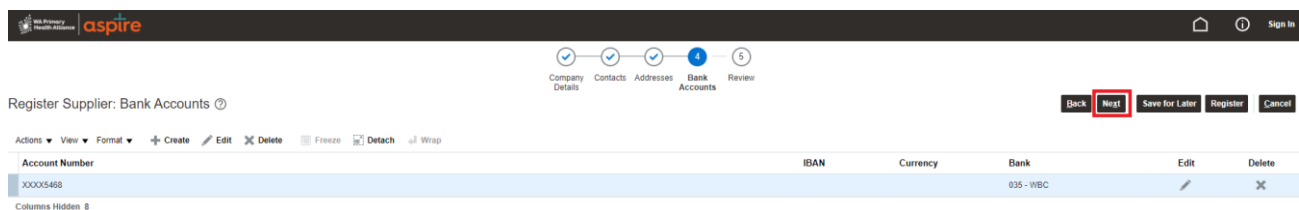
Account Name	Connolly Medical Group	Agency Location Code	<input type="text"/>
Alternate Account Name	<input type="text"/>	Account Type	<input type="text"/>
Account Suffix	<input type="text"/>	Description	<input type="text"/>
Check Digits	<input type="text"/>		

Comments

Note to Approver

Create Another **OK** Cancel

Click the 'Next' button to continue to the review page.



Important points

- Only fields populated in the screenshot below need to be entered.
- Please exclude/ignore IBAN and currency fields.

5. Review and Submit new registration

You can review and / or update your details at this (or any) point by clicking the 'back' button or by clicking on the relevant icon at the top of the page.

Once you are happy with the details you have provided, click the 'Register' button to submit your application.

Review Supplier Registration: ABC Medicals Groups

Company Details

Company Name: ABC Medicals Groups
Tax Organization Type: Trust
Supplier Type: General Practice
Corporate Web Site

Additional Information

Professional Indemnity Expiry
Public Liability Expiry
Workers Compensation Expiry
ACN

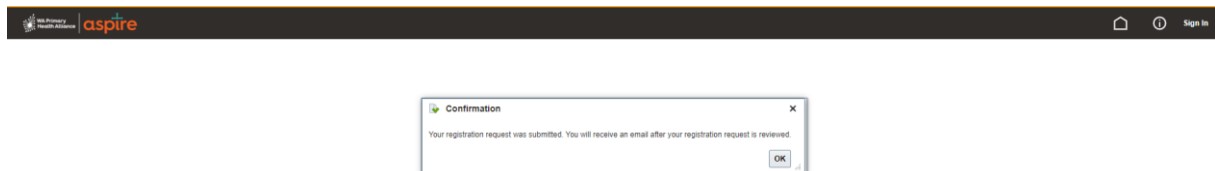
Tax Country: Australia
ABN: 123123413

GST Registered: Yes
Recipient Created Tax Invoice (RCTI): Yes
Indigenous Owned

Attachments

Type	Category	File Name or URL	Title	Description	Attached By	Attached Date
No data to display						

After clicking the 'Register' button a confirmation message will be displayed stating that your registration request was submitted.



6. Post registration notifications

Once you submit your application in ASPIRE it will be reviewed and verified by an administrator. If any critical fields or information is missing, you may be contacted.

Following your approval as a supplier in our system, you will receive important notifications from ASPIRE to your registered mailbox from the following email address:
evjf.fa.sender@workflow.mail.ap1.cloud.oracle.com.

Note – please check your spam folder in case you do not receive these emails.

Below are examples of the email notifications you should expect to receive.

Notification of supplier registration approval

This email will be sent to you/an authorised representative confirming a registration request has been approved (see below screenshot). No action is required - this is just a notification.

Updating Existing Supplier Details

1. Reset your ASPIRE Password

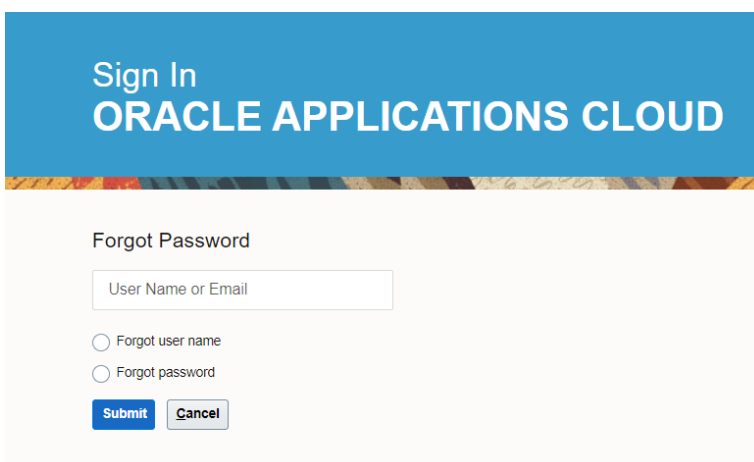
Please use the link to log in to the [Aspire Portal](#).

You can recover your access to ASPIRE by using the 'Forgot Password' functionality (see below screenshot).

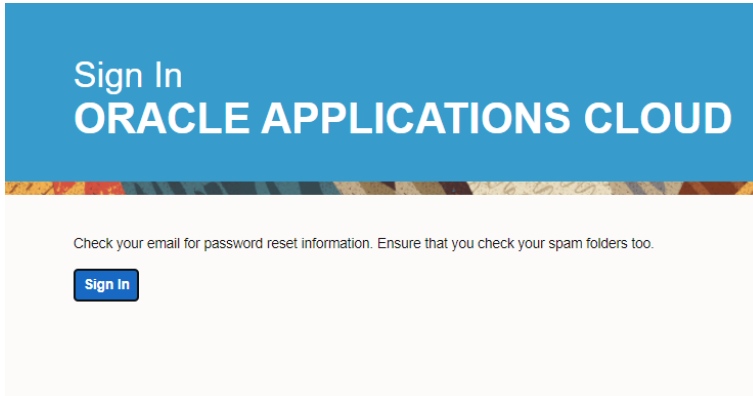
- Click on 'sign in'
- Click on 'Forgot Password'.



Provide your username (registered email address) and click 'Forgot Password.'

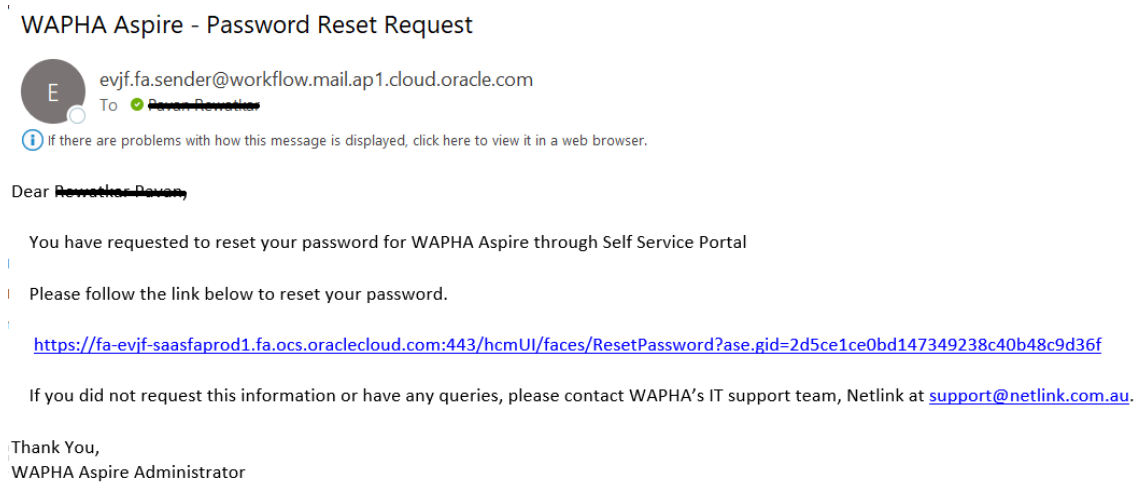


You will receive another notification in your inbox to reset your password.



Password reset confirmation

The below notification will be sent to you after you have reset your password in ASPIRE.



2. Check Bank Account is correct

Log in to the [Aspire Portal](#)

Click on Supplier Portal tile

Click on 'Payments' tab

Select 'Bank Accounts' check Number and Bank details.

Payment Methods **Bank Accounts**

View ▾

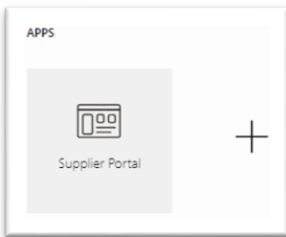
Primary	Number	IBAN	Currency	Bank
▶	✔ XXXX8113		AUD	BSB-CBA

If they are not correct, you will need to request an amendment form via the grant/program team or email practiceassist@wapha.org.au

3. Update Company details (Addresses, Contacts)

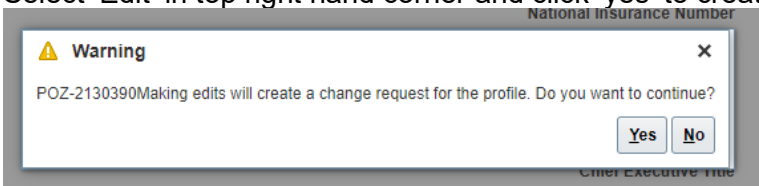
Log in to the [Aspire Portal](#)

Click on Supplier Portal tile



Click on Manage Profile

Select 'Edit' in top right hand corner and click 'yes' to creating a change request to the profile.



Click on TABS to go into different profile areas to update e.g. Addresses, contacts etc

To update, select orange title (address or name in orange) and proceed with change.

If you want to add another name or site, click '+' symbol.

Add a Change Description at the top of profile if you wish to inform WAPHA of further information

Click Save & Close, then click yes and Done

4. Update Bank Account details

To update bank details in an existing Supplier profile. You will need to request an amendment form via the grant/program team or email practiceassist@wapha.org.au

Frequently Asked Questions (FAQs)

Q. Can I register my business multiple times?

A. You cannot register multiple businesses with the same ABN.

Multiple businesses can be registered, however they must each have a unique ABN. To register multiple businesses under the same ABN, please create multiple addresses (for each business) in the registration process and multiple contacts (if needed).

Please refer to the [Register as a Supplier – Multiple Practices manual](#) (found on the [Practice Assist website](#)) if you need to register multiple practices.

Q. Can I create multiple addresses?

A. Yes, multiple addresses are allowed (refer to the [Register as a Supplier – Multiple Practices manual](#)).

Q. Can I create multiple bank accounts?

A. We recommend only one bank account be created. If you have a business requirement to establish multiple bank accounts across different addresses, please contact the grant or program team or practiceassist@wapha.org.au for further queries.

Q. I have realised I have made a mistake; can I update my details before I submit my registration?

A. Yes, you can navigate back at any stage in the registration process by clicking the 'back' button or alternatively clicking the relevant icon at the top of the page (refer to instruction manual).

Q. Can I update my details after I have submitted my registration?

A. Once your registration has been submitted you cannot update your submission in ASPIRE. If you do need to make a change, please contact the grant/program team or practiceassist@wapha.org.au for further queries.

Q. Can I save my partially completed registration and finalise it at a later date?

A. Your registration can be saved at any time. Click the 'save for later' button and you will be emailed a link to your partially completed registration. Please use this link to complete your registration as starting a new registration will not move forward as your ABN is attached to the saved one.

Q. How will I know the status of my registration?

A. Once you submit your registration, you will receive an email from evjf.fa.sender@workflow.mail.ap1.cloud.oracle.com advising it has been approved along with portal access details. If you haven't received this email, please check your spam folder for it.

Q. How do I access the system once I have registered?

A. Once your registration has been evaluated and enabled, you will receive an email from evjf.fa.sender@workflow.mail.ap1.cloud.oracle.com with a link to reset your password.

Q. Can I update by business details after my registration has been enabled?

A. When you are registered you will be able to update all your organisation's details except your bank account. To update your bank account please contact the grant/program team or practiceassist@wapha.org.au for an amendment form.

-Ends-