# Table of Contents

**Table of Contents** ................................................................................................................ ii

**List of Figures** ......................................................................................................................... v

**List of Tables** .......................................................................................................................... xi

1. **Introduction** ....................................................................................................................... 1
2. **Overview** ............................................................................................................................ 2
   2.1 User Interface .................................................................................................................. 2
   2.2 Conventions .................................................................................................................... 3
   2.3 iQIES Log-in .................................................................................................................. 3
      2.3.1 iQIES S&C User Types and Log-in ....................................................................... 4
      2.3.2 iQIES S&C User Help Desk ................................................................................. 5
      2.3.3 Organization of the S&C Manual ......................................................................... 6
      2.3.4 Additional User Support Features ......................................................................... 6
3. **Surveys & Certification** ........................................................................................................ 7
   3.1 How to Manage Surveys ............................................................................................... 7
4. **Managing Providers** ............................................................................................................ 8
   4.1 Search for a Provider ....................................................................................................... 8
      4.1.1 Search for a Provider, or add a Provider ................................................................. 9
      4.1.1.1 Advanced Search ............................................................................................... 10
      4.1.1.2 Toggle Number of Pages .................................................................................. 11
      4.1.1.3 View Recent Survey, Intakes and Enforcements ................................................. 12
      4.1.1.4 Search Results .................................................................................................. 13
      4.1.1.5 Provider - Basic Information Page .................................................................. 14
      4.1.1.6 View Provider History Report ......................................................................... 15
      4.1.1.6.1 Save to My Reports .................................................................................. 18
      4.1.1.6.2 Download Reports ...................................................................................... 18
      4.1.2 Add a New Provider ............................................................................................... 20
      4.1.2.1 New Provider Details ...................................................................................... 22
      4.1.2.2 New Provider Basic Information Page ............................................................. 23
      4.1.2.2.1 Mailing Address ......................................................................................... 24
      4.1.2.2.2 Additional Branch Addresses .................................................................... 25
      4.1.2.2.3 Operating Details ....................................................................................... 27
      4.1.2.2.4 Additional Contacts ................................................................................... 28
      4.1.2.2.5 Certification and Licensure ...................................................................... 30
      4.1.2.2.6 Certify a Medicare Provider ..................................................................... 33
      4.1.2.2.7 Deeming Information ............................................................................... 36
      4.1.3 Approve or Reject New Provider .......................................................................... 37
      4.1.3.1 Administrators ................................................................................................. 38
      4.1.3.1.1 Administrator Details Section .................................................................... 39
      4.1.3.2 Letters ............................................................................................................. 40
      4.1.3.3 Attachments ..................................................................................................... 44
      4.1.3.3.1 Attachments Download ............................................................................ 45
4. **Managing Surveys** .............................................................................................................. 47
   5.1 Survey Review ................................................................................................................... 47
      5.1.2 Responsible Staff ..................................................................................................... 49
      5.1.3 Survey Team ............................................................................................................ 50
5.1.3.1 Survey Team Coordinator .................................................................51
5.1.4 Add New Survey ..................................................................................53
5.2 Citations ...................................................................................................56
  5.2.1 Navigate to the Citation Page..............................................................56
    5.2.1.1 Add Citation to a Survey ..............................................................57
    5.2.1.2 Add Findings or Delete Citations ...............................................58
    5.2.1.3 Citation Overview Section .........................................................59
    5.2.1.4 Edit Citation Overview Section .................................................60
    5.2.1.5 Citation Findings .........................................................................62
    5.2.1.5.1 Citation Writing Complete ......................................................64
    5.2.1.6 Citation Attachments .................................................................64
  5.2.2 Lock Citations / Unlock Citations ......................................................65
    5.2.2.1 Start and Exit Dates to Unlock Citations ....................................66
    5.2.2.2 Lock Citations Confirmation .......................................................67
    5.2.2.3 Date not Entered for Statement of Deficiencies Message - Citations 68
    5.2.2.4 Revisit Survey .............................................................................69
    5.2.2.4.1 Revisit Survey Considerations ................................................70
  5.2.3 Statement of Deficiencies .................................................................70
    5.2.3.1 Generate the Statement of Deficiencies ....................................71
    5.2.3.1.1 Statement of Deficiencies Downloaded Form .......................72
    5.2.3.3 Statement of Deficiencies Dates ...............................................74
    5.2.3.3.1 All Statement of Deficiencies Dates Set ................................75
    5.2.3.3.2 Citation Writing Not Completed Message .............................76
  5.2.4 Informal Dispute Resolution .............................................................77
  5.2.5 Plan of Correction (POC) ..................................................................78
    5.2.5.1 Add a Plan of Correction ...........................................................79
    5.2.5.2 Plan of Correction Status ...........................................................79
    5.2.5.3 Accepted Plan of Correction .......................................................80
  5.2.6 Rejected Plan of Correction ...............................................................81
  5.2.7 Form CMS-1572 ............................................................................82
    5.2.7.1 Editing the Form CMS-1572 .......................................................82
    5.2.7.2 Adding Branches to Form CMS-1572 ........................................84
    5.2.7.3 Editing the Records Reviewed and Other Data on Form CMS-1572 86
    5.2.7.4 CMS-670 Timesheet .................................................................87
    5.2.7.4.1 CMS-670 Timesheet Entry .....................................................87
    5.2.7.4.2 My Time / Team Time Tabs in CMS-670 Section ...................88
    5.2.7.5 Merge Citations (Done by Team Coordinator) .........................90
    5.2.7.5.1 Merge Findings - Citation .......................................................90
    5.2.7.5.2 Merged Citation Overview ....................................................91
    5.2.7.5.3 Edit Citation Overview ..........................................................92
  5.2.8 Letters ............................................................................................92
  5.2.9 Notes .............................................................................................95
  5.2.10 Attachments ...................................................................................97
  5.2.11 Survey Closed Status ....................................................................97
6. Managing Intakes .........................................................................................100
  6.1 How to Manage Intakes .......................................................................100
    6.1.1 Recent Intakes ...............................................................................100
    6.1.1.1 Search for Provider Intakes ......................................................101
    6.1.2 Add a New Intake .........................................................................102
      6.1.2.1 Intakes – Basic Information Page ...........................................104
      6.1.2.2 Responsible Staff .................................................................104
List of Figures

Figure 1: iQIES Welcome Page and Log-in ................................................................. 4
Figure 2: Survey & Certification Search Dropdown – Search ........................................ 8
Figure 3: Search for Provider – Input Fields .................................................................. 9
Figure 4: Advanced Search Screen – Example ............................................................ 11
Figure 5: Toggle Number of Pages Displayed - Example ............................................. 12
Figure 6: View Recent Surveys, Intakes and Enforcements - Example ....................... 13
Figure 7: Search- Results and Permission Warning - Example .................................... 14
Figure 8: Provider History – Enforcement Page - Example .......................................... 15
Figure 9: View Provider History Reports - Example .................................................... 16
Figure 10: Expand All Provider History Reports - Example ....................................... 17
Figure 11: Save to My Reports for Provider History - Example .................................... 18
Figure 12: Download Button Option - Example ............................................................ 19
Figure 13: Download Report - Provider History pdf Format- Example ........................ 20
Figure 14: Add a Provider – Basic Information .............................................................. 20
Figure 15: Add a Provider – Basic Information Example .............................................. 21
Figure 16: New Provider Added and iQIES ID Created ................................................. 22
Figure 17: New Provider Details Basic Information Section – Example ....................... 23
Figure 18: Provider Mailing Address Details Section – Example .................................. 24
Figure 19: Mailing Address - ‘Save’ or ‘Cancel’ Warning - Example .............................. 25
Figure 20: Add Branch Address Section - Example ..................................................... 26
Figure 21: Additional Branch Address Details - Example ............................................. 27
Figure 22: Operating Details Section - Example .......................................................... 28
Figure 23: Additional Contacts Section - Example ....................................................... 29
Figure 24: Add Emergency Contact Section - Example .............................................. 30
Figure 25: Certifying a Provider Instructions – Example .............................................. 31
Figure 26: Provider Certification Criteria – Example .................................................... 32
Figure 27: Medicare Certified and Automatically Assign a CCN - Example 33
Figure 28: Certification and Licensure Section- Example 34
Figure 29: Certification and Licensure Section - Example 35
Figure 30: Certification and Licensure Edit Page - Example 36
Figure 31: Deeming Information Section – Example 37
Figure 32: Approve or Reject New Provider – Example 38
Figure 33: Add Administrator – Example 39
Figure 34: Administrator Details Section – Example 40
Figure 35: Add Letter Section - Example 41
Figure 36: Edit Letter Overview - Example 42
Figure 37: Add Letter Overview – Example 43
Figure 38: Letter Actions Overview – Example 44
Figure 39: Attachments Details Section- Example 45
Figure 40: Attachments Section – Download 46
Figure 41: Survey Data Basic Information Section - Example 48
Figure 42: Responsible Staff Section - Example 49
Figure 43: Survey Team Section - Example 50
Figure 44: Survey Team Warning - Example 51
Figure 45: Survey Team Coordinator - Example 52
Figure 46: Survey Team No Information Selected Message - Example 53
Figure 47: New Survey – Example 55
Figure 48: Citations - Example 56
Figure 49: Add Citations Regulations in Survey – Example 58
Figure 50: Add Findings or Delete Citation Status - Example 59
Figure 51: Citation Overview Section – Example 60
Figure 52: Edit Citation Overview - Example 61
Figure 53: Add Citation Summary and Findings – Example 62
Figure 54: Citation Findings – ‘In Progress’ Example ........................................................................................................... 63
Figure 55: Citation Findings – ‘Writing Complete’ Example .................................................................................................. 64
Figure 56: Citation Attachments – Example .......................................................................................................................... 65
Figure 57: Lock Citations – Example ....................................................................................................................................... 66
Figure 58: Survey Needs a Start and Exit Date Message – Example ......................................................................................... 67
Figure 59: Confirm Locking Citations – Example .......................................................................................................................... 68
Figure 60: Date not Entered for Statement of Deficiencies Message – Example ............................................................... 69
Figure 61: Revisit Survey Notification Message -Example ........................................................................................................... 69
Figure 62: Statement of Deficiencies Section – Example ........................................................................................................... 70
Figure 63: Generate a Statement of Deficiencies – Example ...................................................................................................... 71
Figure 64: Generate a Statement of Deficiencies – Example ...................................................................................................... 72
Figure 65: Downloaded Statement of Deficiencies - Page 1 – Example ..................................................................................... 73
Figure 66: Edit Statement of Deficiencies Dates – Example ........................................................................................................ 74
Figure 67: Enter Date Sent – Example ......................................................................................................................................... 75
Figure 68: All Statement of Deficiencies Dates Populated – Example ........................................................................................ 76
Figure 69: Editing Statement of Deficiencies Dates Message -Example ........................................................................................ 77
Figure 70: Informal Dispute Resolution Information -Example .................................................................................................. 78
Figure 71: Plan of Correction – Dates - Example ........................................................................................................................ 79
Figure 72: Select Status Button on the Plan of Correction – Dates - Example .................. 80
Figure 73: Accepted Status Button on the Plan of Correction – Dates - Example……... 81
Figure 74: Not Accepted Status Button on the Plan of Correction – Dates - Example . 82
Figure 75: Edit the HHA Survey & Deficiencies Report – Form CMS-1572 – Example 83
Figure 76: Adding Branches to Form CMS-1572 – Example...................................................................................................... 84
Figure 77: Providing Branch Information to Form CMS-1572 – Example ....................... 85
Figure 78: Number of Records Error Message on Form CMS-1572 – Example ........... 86
Figure 79: CMS-670 Timesheet – New Time – My Time – Team – Example.................. 87
Figure 80: CMS-670 Timesheet – Entering My Time Info – Example................................. 88
Figure 81: My Time / Team Time Tab in CMS-670 Section – Example ...................... 89
Figure 82: Citations Ready for Merge in Survey -Example ........................................ 90
Figure 83: Citation Findings Prior to Merge Findings -Example .............................. 91
Figure 84: Merge Findings Warning – Example ....................................................... 91
Figure 85: Citation Overview - Merge Findings – Example ....................................... 92
Figure 86: Edit Citation Overview – Example .......................................................... 92
Figure 87: Add or Edit Letter in Survey -Example .................................................... 93
Figure 88: Letter Overview Page – Survey – Example .............................................. 94
Figure 89: Letter Overview Edit Page – Survey – Example .................................... 95
Figure 90: Add Notes to Survey – Example ............................................................. 96
Figure 91: Manage Survey Notes– Example ............................................................ 96
Figure 92: Add Attachments to Survey – Example ..................................................... 97
Figure 93: Survey Complete and Ready to be Closed - Example .............................. 98
Figure 94: Closed Status for Survey – Example ....................................................... 99
Figure 95: Search Recent Intakes by Provider - Example ......................................... 101
Figure 96: View Recent Intakes Tab in Search – Example ....................................... 102
Figure 97: Intakes Type Selection – Example .......................................................... 103
Figure 98: Intake Details – Incident Basic Information Page – Example .................. 104
Figure 99: Intake Responsible Staff – Example ....................................................... 105
Figure 100: Add Responsible Staff – Example ....................................................... 106
Figure 101: No Staff Selected Error Warning – Example .......................................... 107
Figure 102: Adding an Involved Party for Complainant - Example .......................... 108
Figure 103: Adding an Allegation – Example ......................................................... 109
Figure 104: Allegation Review Page – Example ....................................................... 110
Figure 105: Triage Review Page – Example ............................................................. 111
Figure 106: Triage Completion Date – Example ....................................................... 112
Figure 107: Triage Edit and Information Notification Page – Example .................... 113
Figure 108: An Intake Required Survey Action – Example ........................................ 114
Figure 109: Intake Letters Page – Example .......................................................... 115
Figure 110: Add Intake Letter Overview – Example .............................................. 116
Figure 111: Letter Overview Edit Page – Intake – Example .................................. 117
Figure 112: Add Notes to Intake – Example ......................................................... 118
Figure 113: Add Attachments to an Intake – Example ........................................... 119
Figure 114 - Add Survey Button on Provider Profile Page ................................. 120
Figure 115 - Select the Intake's Information When Adding the Survey - Example ... 121
Figure 116 - Select a Survey in the Intake's Survey Section - Example ................. 122
Figure 117 - Intake and Survey Information - Example ......................................... 123
Figure 118 - Select the Intake to Include in the Complaint Survey - Example ........ 124
Figure 119: Search for Recent Enforcements - Example ....................................... 126
Figure 120: Recent Enforcement Basic Information Page - Example .................... 127
Figure 121: View all Enforcements – Links - Example ........................................... 129
Figure 122: View all Enforcements List - Example ............................................... 129
Figure 123: Add Enforcement - Example ................................................................. 130
Figure 124: Add New Enforcement and Link Survey List - Example ....................... 131
Figure 125: New Enforcement Basic Information Page - Example ......................... 132
Figure 126: Responsible Staff for New Enforcement Page – Example .................... 132
Figure 127: Add Responsible Staff for New Enforcement Page – Example ............. 133
Figure 128: Manage Responsible Staff for New Enforcement Page – Example ....... 134
Figure 129: Manage Responsible Staff for New Enforcement Page – Example ....... 134
Figure 130: Add Sanction Page – Example .............................................................. 135
Figure 131: View Sanction Page – Example ............................................................ 136
Figure 132: Add Civil Money Penalty Page – Example .......................................... 137
Figure 133: Civil Money Penalty Review Page – Example ..................................... 138
Figure 134: Add Appeal to Enforcement – Example ............................................. 139
Figure 135: Appeal Information Page – Example ....................................................... 140
Figure 136: Add Legal Action to Appeal Information Page – Example ................. 141
Figure 137: Add Letter – Enforcement – Example .................................................. 142
Figure 138: Letter Overview Page – Enforcement – Example .................................. 142
Figure 139: Add Notes – Enforcement – Example .................................................... 143
Figure 140: Attachments – Enforcement – Example .............................................. 144
## List of Tables

Table 1: Conventions ...................................................................................................... 3  
Table 2: Record of Changes ....................................................................................... 147  
Table 3: Acronyms ...................................................................................................... 149  
Table 4: Referenced Documents ............................................................................... 150  
Table 5: Approvals ...................................................................................................... 151
1. Introduction

This manual provides the information necessary for Centers for Medicare & Services (CMS) stakeholders to effectively use the Internet Quality Improvement Evaluation System (iQIES) application. These stakeholders include State Survey Agencies, CMS Locations, CMS Headquarters, Accrediting Organizations, and federal contractors. iQIES is replacing the Automated Survey Processing Environment (ASPEN) for the management of survey and certification (S&C) activities.

Developed by CMS, iQIES is a single application that can be broken down into three major capabilities that supports the following categories:

- Survey and Certification (S&C)
- Patient Assessments (PA)
- Reporting - Quality Measure Implementation and Reporting (QMIR)

This manual is intended to specifically address the Survey and Certification (S&C) functionalities. These functionalities include the processes necessary to add a new surveys, intakes, certifications, and enforcement actions, and to edit and review what is in the system.

The procedures for patient assessment and reporting can be found in the respective user manual for each site. Links to the other manuals can be found in the Training Guides section at the end of this S&C Manual. Note that most, but not all iQIES roles provide access to run reports and other tasks.

Most iQIES roles provide access to perform S&C or PA related functions, run reports, and other tasks. To be assigned a role and use the system, users must first obtain a HARP username and password. Users can setup their HARP account at the following website: https://harp.cms.gov/

Once that has been done, the user needs to request one or more roles within iQIES. Information about roles and other iQIES features can be found at the QIES Technical Support Office (QTSO) website at https://qtso.cms.gov/software/iqies/. If problems with access and permissions should occur, the user should contact their HARP representative for HARP related issues, or their iQIES State Security Official (SSO).

The reporting capability of the iQIES system includes the user’s ability to access, view, and download previously generated reports, as well as being able to run new reports. The application provides system generated and user-requested reports (e.g., PA submission/error reports, final validation reports, quality measure reports, and provider preview reports; and the S&C ‘Provider History Report’. Note: Only the S&C ‘Provider History Report’ is available at the present time.

This CMS iQIES S&C manual will cover the functionality found within the iQIES application as well as the help and security features. Please note, all screen shots included in this reference material are meant for sample purposes only and contain only test data.

Due to updates made after the release of this document, detailed information displayed within screen shots may not be an exact representation of the current iQIES site.
2. Overview

The iQIES system is the key source of survey and certification (S&C) data for CMS. It is CMS' major tracking and data repository system for Medicare and Medicaid providers, and the Clinical Laboratory Improvement Amendments of 1974 (CLIA) provider data. It collects and validates data on provider and beneficiary healthcare outcomes for use in improving the quality and cost effectiveness of services provided by CMS. iQIES provides the means for all CMS locations and State Survey Agencies to monitor, track, and document issues with regulatory compliance for healthcare providers across seventeen different care settings.

The Survey and Certification (S&C) portion of the iQIES system is designed to provide the user with the necessary information to assist in using and navigating iQIES features regarding provider, survey, intake, and enforcement data entry. While this user manual is comprehensive, it does not provide troubleshooting or other technical support information (refer to the 'Troubleshooting and Support' section of this user manual for iQIES technical support).

Further training or assistance may be needed by the user to be capable of performing certain types of operations.

iQIES utilizes a cloud-based architecture and takes advantage of all typical best practices for Amazon Web Services (AWS) deployments. AWS provides a rich layer of integrated services that have been developed using the same methodologies, with integration in mind. AWS services seamlessly integrate with each other to provide a common application development platform, and a consistent user experience. AWS shares its resources across hundreds of data centers, thousands of underlying machines, and multiple availability zones that span the globe and enable a full, global fault-tolerant, computing environment.

AWS provides Federal Risk and Authorization Management Program (Fed Ramp) approved services that ensure security across all components, provide near limitless scalability for system resources, can support zero-downtime applications with simple configuration choices, and support a multitude of commercially available off-the-shelf (COTS) and open-source technologies. It provides all these services in an affordable, commitment-free services model.

iQIES is being developed utilizing best-of-breed development methodologies, operating under the Scaled Agile Framework (SAFe) and developed utilizing Agile/Scrum methodologies. The AWS resources are deployed utilizing modern DevOps toolsets and the application itself is developed using a Microservices paradigm involving autonomous programming modules capable of being individually maintained or upgraded without impact to the larger system.

2.1 User Interface

Users access iQIES via a web browser through a custom-developed HTML interface. iQIES maintains a supported browser list but has been developed utilizing technologies that are designed to support any browser. New users will request appropriate access for their role within the provider or vendor organization and will be validated in conjunction with the larger CMS user management module (HARP). All file submission and reporting activities are performed via the same interface.

iQIES was designed to aid in eliminating the complex web of databases and external process needed to move, consolidate, and manage data in legacy systems. iQIES is a single solution with many services, secure, web based, and more user friendly to enhance and efficient to manage.
2.2 Conventions

This document provides screenshot prints and corresponding narrative to describe how to use the iQIES S&C application.

*Note:* The term ‘user’ and ‘you(r)’ are utilized throughout this document to refer to a person who requires and/or has acquired access to the iQIES system.

Table 1 below indicates the conventions that have been used in this user manual.

<table>
<thead>
<tr>
<th>Formatting Convention</th>
<th>Type of Information</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Bold</strong></td>
<td>Links and Calls to Action (CTA)</td>
</tr>
<tr>
<td><em>Italics</em></td>
<td>Page names, features, functions, and categories/subcategories</td>
</tr>
<tr>
<td>‘Single quotation marks’</td>
<td>Specific text on a page</td>
</tr>
<tr>
<td><img src="#" alt="Callout A" /></td>
<td>The lettered items are callouts that are intended to direct the user to location(s) on page where warnings or other critical directions or information may be provided.</td>
</tr>
<tr>
<td><img src="#" alt="Callout 1" /></td>
<td>The numbered items are callouts that are intended to direct the user to location(s) on page where specific input information is requested or required from the user.</td>
</tr>
</tbody>
</table>

*Note:*
The graphic symbols used above are not intended to indicate every situation or occurrence in a figure but are utilized to help direct the user to a typical case.

2.3 iQIES Log-in

Once the user has selected the Accept and Proceed button they will be directed to the ‘Welcome to iQIES’ Home Page, and the Log-in criteria will be displayed.

See callout 1 in Figure 1.

The username and password are the HARP username and password that each user has established. To have a HARP username and password, the user will need a HARP account. To learn more about creating your HARP account, refer to the iQIES Onboarding Guide. A link to this Guide can be found in the ‘Training Guides’ section of this manual.
2.3.1 iQIES S&C User Types and Log-in

The iQIES user types and the associated Log-in will help you determine which role best fits your needs and requirements. Each of the specific role actions and permissions and a brief description are provided below:

- Accrediting Organizations
  Accrediting Organizations (AO) are CMS approved, third party organizations that provide administration and surveying of both accredited and deemed healthcare providers. AO’s are required to follow the same regulations as the State Agencies and essentially act as a third party to conduct surveys of providers.
• CMS Central Office
CMS Central Office staff provide support for the administration, surveying, and certification of healthcare providers, along with offering security and support for system users.

• CMS Contractors
Contractors include Medicare Administrative Contractors (MAC) and Medicare Administrative Contractor Security Officials. MACs are multi-state, regional contractors responsible for administering both Medicare Part A and Medicare Part B claims.

• CMS Location
The CMS Locations are the agency’s state and local presence. The CMS field staff provide region-level administration, surveying, and certification of healthcare providers.

• Providers
Providers are organizations, agencies, and facilities that provide healthcare services.

• State Agencies
State agencies provide state-level administration and surveying of healthcare providers, along with completing patient assessments, managing ICD-10 codes, and generating keys.

• Vendors
Vendors are third party data and Patient Assessment submitters on behalf of providers and their roles are approved by the provider’s Security Official.

Note that the user should refer to iQIES Onboarding Guide. A link to this Guide can be found in the ‘Training Guides’ section of this manual. This Guide will provide additional information to help the user make their selection and includes tables that are organized with the user role names in the columns section and the permissions in the rows section.

IMPORTANT NOTE:
Due to the large number of possible user roles and options, this user manual is meant to illustrate the conditions for what a general user will encounter in the iQIES system. All features for all possible user scenarios cannot be effectively and efficiently covered in this manual. In other words, some users will experience a different look to their screen than what may be shown herein as an example.

Therefore, it is anticipated that some users will need to rely on the actual training to gain detailed instructions. In addition, the iQIES Help Desk can be utilized to address specific areas where problems occur or if questions arise. If the user is unclear on how a procedure functions it is recommended that they reach out to the iQIES Help Desk for further assistance or guidance, or they should request additional training.

2.3.2 iQIES S&C User Help Desk
The iQIES Help Desk has been optimized and redesigned to improve the iQIES user experience. The iQIES Help Desk aids the users who are attempting to perform tasks for patient assessments, reporting, survey and certification, and state information as well as to provide links to helpful resources.

If you need assistance with accessing iQIES, please consult the iQIES State Security Official (SSO) for your organization or contact the help desk by phone at 800-339-9313, or by email at iqies@cms.hhs.gov.
Additionally, the QIES Technical Support Office (QTSO) website provides functionality to meet the needs of the users, and includes CMS application training videos, user manuals and procedure guides for various CMS systems, and other helpful resources.

Some of the basic features on QTSO include, but are not limited to the following:

- Software Resources
- News & Updates
- References and Manuals
- Training
- Access Forms

Users can access the QTSO website by navigating to this URL: [https://qtso.cms.gov/](https://qtso.cms.gov/)

### 2.3.3 Organization of the S&C Manual

This manual is organized into four (4) key modules that will direct the user to useful information and specific directions on how to navigate within the iQIES system. These four areas are:

1. Managing Providers
2. Managing Surveys
3. Managing Intakes
4. Managing Enforcements

Each module may have similar input requirements and other functional similarities and certain procedures from one module may spill over or affect another.

### 2.3.4 Additional User Support Features

In addition to the user functions and other search features provided in each section of the S&C system, the user can also access other iQIES support resources at any time while on the site, they can be found in the lower left portion of the window under the View Resources heading, and accessed by selecting the following:

- QIES Technical Support Office
- Known Issues
- Validation Utility Tool
- System Requirements
- Medicare
- Help
- Get Help
  - By Phone: (800) 339-9313
  - By Email: iQIES@cms.hhs.gov
- Sign up for the iQIES newsletter
3. Surveys & Certification

3.1 How to Manage Surveys

Your iQIES Role determines iQIES your permissions in iQIES and therefore, a user’s ability to manage, add or edit information. Surveys. The iQIES Role ID incorporates HARP and State Agency Security Officials approval, and it determines if the user will have access to Federal or State Surveys, and the degree to which the user has permission to drill down into the data, make revisions, or create new Providers, Surveys, Intakes, Enforcements and Certifications.

A healthcare provider survey essentially sets the groundwork for an inspection(s) that are contracted by the state and CMS to perform an on-site review of nursing homes, home health agencies (HHA), hospitals and other Medicare or Medicare facilities that provide applicable services. The inspections consider complaints, incidents, or other allegations of non-compliance that do not meet Federal requirement and may be reported by patients or other agencies. Note that the survey information and the data collected can vary by state and by the user’s role, thus users will experience some differences in the look of their screens and their ability to access certain information.

Certification is the system that provides onsite, objective and outcome-based verification by knowledgeable and trained individuals to assure that basic standards of quality are being met by healthcare providers across the nation or, if not met, that appropriate remedies are promptly applied and implemented effectively. In addition, each year the accrediting organizations must provide CMS with information and documentation on the performance of the health care organizations it accredits.”
4. Managing Providers

4.1 Search for a Provider

To search for an existing provider, from the iQIES home page top ribbon the user can select the Survey & Certification dropdown, see call out 1 in Figure 2 below. By selecting the Survey & Certification button the user will be prompted to Search, see call out 2 in Figure 2. This dropdown menu allows the user to perform a comprehensive ‘Search of Providers’ by name.

Note that additional resources are available to the user by selecting any of the items in the list, see callout 3 in Figure 2.

Note that the ‘Assessment’, and ‘Reports’ tabs in the top ribbon are only to be used for the purposes of accessing the Patient Assessment or Reports functions and are they not discussed in detail in this manual. For more information about either topic, refer to their respective manuals.

However, note that the ‘AO Provider Pending Approval’, in the drop-down (where applicable) below ‘Search’, see callout 2 in Figure 2, will be described in greater detail, at a time to be determined later.

Figure 2: Survey & Certification Search Dropdown – Search

**NOTE:**

The user’s role may determine available features and accessible options that are presented in many of the drop-down menu options. In the examples shown in this user manual, the user has been identified with a user role of either a CMS Regional Office user or that of a State Agency.
General user. Dependent on the user role, the screenshots used in this guide may vary slightly than what the user views in iQIES.

4.1.1 Search for a Provider, or add a Provider

Selecting the Search for a Provider option will direct the user to the Search page, see callout 1 in Figure 3 below.

To filter this list the user can ‘Enter Provider or DBA name, CCN, or State Facility ID (FACID)’ in the text box under “Search for Providers”, see NOTE: in Figure 3.

The user can also type in just a few characters in the ‘Search for Providers’ box and the list will populate with similarly spelled entries.

Some additional provider information may also populate below the ‘Show Advanced Search’ option, see callout 2 in Figure 3. Figure 3 provides a typical example.

Figure 3: Search for Provider – Input Fields

A table of providers will be displayed and can be sorted further by selecting the Provider header
or any of the other headers by category. To go to the providers profile page, select the name of the provider link (highlighted in blue).

**NOTE:**
For vision impaired users, the blue links can also be identified with an underline when you hover with your cursor over a blue link. In addition, a button or box that directs a user to a new page or section will also become highlighted.

If the user is unable to find a particular provider, they can do an advanced search. Instructions for performing an Advanced Search are provided below.

### 4.1.1.1 Advanced Search

The user can also perform an advanced search that gives additional ways of searching for a provider, by selecting the ‘Show Advanced Search’ link on the search page of the ‘Providers’ tab.

The available advanced search options are:

- Provider Type
- Street Address
- iQIES ID
- State
- Deemed Status
- City
- Federal Certification Status
- Zip Code
- License Number
- Operating Status
- CMS Region
- CMS Region
- State Facility ID

The advanced search provides more drilled down detail and allows for more refined sorting based on the criteria listed above. The user can input just a Provider name, DBA name, CCN or State Facility ID, see callout 1 in Figure 4 below.

Or you can input the advanced search criteria from the list above and perform a more refined search, see callout 2 in Figure 4. Select the ‘Search’ button once you have entered the information, see callout 3 in Figure 4.

Note that the Hide Advance Search can also be utilized to close the current screen and return to the Search window.
4.1.1.2 Toggle Number of Pages

The user can also toggle the number of providers that will be displayed by selecting the ‘# per page’ box in the lower-left corner of the display. The options are 20, 50, 75 or 100 per page, see callout 1 in Figure 5 below.
4.1.1.3 View Recent Survey, Intakes and Enforcements

Views of recent surveys, intakes and enforcements can all be initiated from the ‘Provider History’ page, see callout 1 in Figure 6 below.

Selecting the ‘View Provider History Report’ or ‘View All Provider Reports’, see callout 2 in Figure 6, will open the respective pages for a list of the deficiencies and complaint survey information, or display a list of report type, that are all downloadable.

Clicking on any of the blue links, see callouts 3 and 5 in Figure 6, will take you to that respective page.

Selecting the ‘Starting Survey’ button, see callout 4 in Figure 6, will open the starting survey and display the key survey information.

NOTE:

The recent surveys, intakes and enforcements options will only display the information that has already been recorded for that provider.
Figure 6: View Recent Surveys, Intakes and Enforcements - Example

### 4.1.1.4 Search Results

Once a provider has been selected because of the search or advanced search feature, clicking on the provider name under the ‘Provider’ column will bring you to the provider’s main page. From here, you can access recent surveys, intakes, and enforcements. You can also get basic provider information by clicking on the ‘View Details’ link in the upper-right corner of the screen. Note that the intake and enforcement sections of this screen will only appear if any intakes or enforcement cases have already been entered into the system.

It is important to note that in some circumstances a user may not have permissions to perform certain inquiries or to make any revisions or changes to the data. The user should check with their relevant State Security Official (SSO) if necessary, to change or request additional roles.

**NOTE:** If the user does not have permissions to manage a particular provider’s information, a warning notice will appear in an orange rectangle above the ‘Provider History’ list. An example of this warning, ‘You do not have permission to manage this Providers information’, is illustrated in callout A in Figure 7 below.
Figure 7: Search- Results and Permission Warning - Example

4.1.1.5 Provider - Basic Information Page

The Basic Information page provides general data about a specific Provider and is intended to give the user a brief overview about the provider. The user has the option to select and view any of the specific information that display a blue link, as described in Section 4.1.1.3 - View Recent Survey, Intakes and Enforcements.

The user can select from a list of items located under the Basic Information line to review the topics. Also, be aware that while working within an individual section the section will be marked with a blue bar that corresponds to the title of that section, and by changing sections the blue bar will move accordingly to indicate where the user is currently working. The section title will also appear across from sections titles near the top, with a brief instruction or direction to the user. Again, it is important for the user to save any new information before switching to another section to avoid the risk of losing that data.

See callout 1 in the example of the Basic Information page for Enforcement 18516F displayed in Figure 8 below. Select the ‘View Provider History Report’ button to be taken to the ‘Provider History Report’ page, see callout 2 in Figure 8.
4.1.1.6 View Provider History Report

The ‘Provider History’ section is where users can view the provider’s citation history. Select the ‘View Provider History Report’ button to run and view the report. The report criteria are defaulted to the provider’s 4 - most recent standard surveys, and complaints for the past 3 years.

Selecting the ‘View Provider History Report’ button will run the report and direct the user to a page that displays options for (but not limited to) the following types of information:

1. Standard Health Survey Deficiency Summary
2. Current Standard Health Survey
3. Standard Health Survey Deficiency Comparison
4. Health Complaint Survey Information
5. Health Complaints Survey Deficiency Comparison

NOTE:

Only sections that have data will display on the Report(s). For example, if the provider has had no health complaints against them, then that section of the report does not display.

These reports list the deficiencies cited on up to four of the provider’s most recent surveys and up to three years of recent complaint surveys. You can select any of the reporting categories
listed above to either run the report or save the criteria for a later time. See call out 1 in Figure 9 below, for an example.

From this page the user can also select the ‘Expand All’ button, see callout 2 in Figure 9 to display the details or select ‘Collapse All’ button, see callout 3 in Figure 9 to clear the Providers information. Callout 4 in Figure 9 provides you with the option to ‘Save to My Reports’ or ‘Download’ the report for immediate use. These options are described in greater detail in sections 4.1.1.6.1. - Save to My Reports, and 4.1.1.6.2 – Download Reports.

NOTE:

Reports in this case are not to be confused with the ‘Reports’ tab in the top ribbon of the iQIES program. Reports in this case are only about the report functions available while you are in the S&C functions of the program.

Figure 9: View Provider History Reports - Example

Selecting the drop-down carat arrow, see callout 1 in Figure 10 below, will display an expanded list of the standard survey and citation information for that provider.
Figure 10: Expand All Provider History Reports - Example
4.1.1.6.1 Save to My Reports

Should the user want to save the report information it can be saved to a specific folder to be accessed later. Selecting the ‘Save to My Reports’ button, see callout 4 in Figure 9 above, will provide a drop-down menu which will require that a report name and save to folder information be provided. Upon selecting the ‘Save to My Reports’ button, a drop-down box will appear that requests the report name, and the folder where you want to save the file to. See callout 1 in Figure 11 below.

NOTE:

Both fields are required before you can save, you also have the option to cancel the operation.

![Figure 11: Save to My Reports for Provider History - Example](image)

4.1.1.6.2 Download Reports

Selecting the ‘download’ button option; located next to the ‘Save to My Reports’ button, see callout 1 in Figure 12 below, will provide you with the opportunity to create a pdf file or CSV sheet which can be printed.
Figure 12: Download Button Option - Example

A sample of a ‘Provider History Report’ page in a pdf format is provided in Figure 13 below. Note that the number of pages in the report will depend on the amount of provider’s citation history.

Provider History Report

**Note**: The Provider History Report will consist of multiple pages

This report may contain privacy protected data and should not be released to the public. Any alteration to this report is strictly prohibited.
4.1.2 Add a New Provider

If the user has the proper permissions, they can add providers by selecting the ‘Add a Provider’ option from the iQIES Survey & Certification dropdown on the top ribbon, which will bring you to the ‘Basic Information’ input page. This page requires that the following be entered:

- Legal Business Name *
- Doing Business as Name * (Note: If you select the “Same as Legal Business Name” box, the Legal Business Name will be automatically entered in the field)
- Provider Type *
- Provider Subtype *

Four of the fields under the Primary Office Location section are also required:

- Address 1 *
- Address 2
- City *
- State *
- ZIP Code *
- County

All required fields are marked with an asterisk (*) and must be entered before you can save. Once the required fields have been completed, the user selects the ‘Add Provider’ button, see Callout 1 in Figure 14 below.

Figure 14 illustrates a new provider page that has not been filled in (e.g., blank).

Once the fields have been completed you can select the add provider button, see callout 2 in Figure 15 below.
This example illustrates a new provider with the basic information filled in, see callout 1 in Figure 15. Note that in this example all the cell information has been provided.

Figure 15: Add a Provider – Basic Information Example

Once the information has been saved a new basic information page will automatically be created for the new provider. This page will appear with the basic information about the new provider.

The new provider history page will indicate a new provider iQIES ID reference number which will be automatically generated, see callout 1 in Figure 16 below. The address will also be displayed, see callout 2 in Figure 16. The Federal Certification Status will automatically be set to ‘Pending Certification’, see callout 3 in Figure 16.

New surveys and intakes can now be added, see callout 4 in Figure 16. Refer to the sections on ‘Adding Surveys’ and ‘Intakes’ in this user manual for details on how to add this information.

The ‘View Details’ link, see callout 5 in Figure 16, will display the additional details about the new provider that has been entered.
New surveys, intakes and enforcements can also be added and created by selecting the appropriate button for each and performing a similar process to the ‘Add Provider’ task. More information and examples about the process for creating new surveys, intakes and enforcements are described in subsequent sections.

### 4.1.2.1 New Provider Details

From the Provider History page, additional provider details can be viewed by selecting the ‘View Details’ tab, see callout 5 in Figure 16, above.

The provider ‘Basic Information’ page will be displayed and will allow you to make edits and include additional provider information, see callout 3 in Figure 17 below, or you can ‘Return to Provider’ page see callout 2 in Figure 17.
Figure 17: New Provider Details Basic Information Section – Example

NOTE:

Users are permitted to fill out the ‘Basic Information’ page in any order they choose and can move around within the section. However, it is highly recommended that the user ‘Save’ the data entered before selecting or moving into another section.

Also, be aware that while working within an individual section the section will be marked with a blue bar, and by changing sections the blue bar will move accordingly to indicate where the user is currently working, see callout 1 in Figure 17 above. Again, it is important for the user to save any new information before switching to another section to avoid the risk of losing that data.

4.1.2.2 New Provider Basic Information Page

The basic information page includes additional sections that require information be included about the provider. These sections consist of the following:

- Mailing Address - The mailing address if it is different from their primary office location.
- Additional Branch Address – Home Health Agency (HHA) branch office information and their locations.
- Operating Details - Provider operating status, important dates, and special operating hours.
- Additional Contacts - Emergency contacts and any other contact information.
- Certification and Licensure - Federal certification status, licensure information, CCN and other identification numbers. CMS certification is achieved through a survey conducted either by a state agency or an AO on behalf of the Centers for Medicare & Services (CMS). In addition, each year the accrediting organizations must provide CMS with information and
documentation on the performance of the health care organizations it accredits. A CCN is generated by the CMS Office General User role once the provider has met all certification requirements.

- Deeming Information - Deeming status and accrediting organization details. ‘Deeming’ indicates that a Provider is certified by an Accredited Organization (AO) agency other than the State.
- Administrators - All administrators and their contact information.
- Letters - Uploaded letters related to the provider.
- Attachments - All supplemental documentation for the provider, including attachments for surveys, complaint and incident intakes, and enforcements.

Instructions for adding the information for each of the sections listed above are presented below:

**4.1.2.2.1 Mailing Address**

The provider mailing address information is managed in the ‘Provider Details’ left hand navigation pane for ‘Mailing Address’. Selecting this item, see callout 1 in Figure 19 below, will provide the user with an opportunity to enter additional mailing address information or to keep the mailing address the same as the physical address by checking the ‘Same as Practice Location’ box, see Callout 2 in Figure 19. Be sure to select ‘Save’ before exiting, see callout 4 in Figure 19. In addition, the Address 2 box can include PO Box information, see callout 3 in Figure 19. While a PO box can be used as a mailing address, it cannot be a practice location.
NOTE: If the user attempts to navigate to another section of this page without saving, a warning message will appear, see callout A in Figure 19.

The warning will ask you if you want to ‘Continue’ without saving and abandon any information that has been added, or ‘Cancel’ and return to the section to ‘Save’ before returning to the previous screen.

![Figure 19: Mailing Address - ‘Save’ or ‘Cancel’ Warning - Example](image)

4.1.2.2 Additional Branch Addresses

In the ‘Additional Branch Address’ section list, see callout 1 in Figure 20 below, users can add Home Health Agency (HHA) branch offices and their locations, as needed. Note that when the provider is certified, each branch is automatically assigned a unique branch ID based on the primary provider’s CCN.

Selecting this section will give you the opportunity to include additional Mailing Address information or to keep the Mailing address the same as the Practice Location by checking the designated box.

Note that all input items with asterisk are required, see callout 2 in Figure 20 for an example.

Be sure to select ‘Save’ before exiting, see callout 3 in Figure 20.
Figure 20: Add Branch Address Section - Example

After entering this information and saving, see callout 3 in Figure 20 above, a table will be displayed with all the additional branch office information.

Select ‘Add Branch’, see callout 1 in Figure 21 below, to include additional branch locations and other available information. Note that this page can be further edited or deleted by selecting either option on that page, see callout 2 in Figure 21.
4.1.2.2.3 **Operating Details**

Selecting the 'Operating Details' section, see callout 1 in Figure 22 below, the user can view information regarding the provider's operating status. Select 'Edit', see callout 2 in Figure 22 to edit the provider operating status, important dates, and add any special operating hours.
4.1.2.2.4 Additional Contacts

Emergency contacts and additional contact information can be added or updated by selecting the ‘Additional Contacts’ section from the ‘Provider Details’ left hand navigation pane, see callout 1 in Figure 23 below.

On this page the user can select ‘Add Emergency Contact’, see callout 2 in Figure 23, or ‘Add an Additional Contact’, see callout 3 in Figure 23, or ‘Edit’ existing contacts, see callout 4 in Figure 23.
Callout 1 indicates the 'Operating Details' section and the sliding bar location.

Figure 23: Additional Contacts Section - Example

Selecting the 'Edit' button, see callout 4 in Figure 23 above, will open another page to allow the existing contact information to be edited. Selecting the 'Add Emergency Contact' or 'Add Additional Contact' buttons see callout 3 in Figure 23, will open a new page for that information to be entered, if needed.

At least one field must be completed before the user can save the data. Be sure to select 'Save' before exiting or select 'Cancel' to stop editing and return to the previous screen, see callout 2 in Figure 24 below.

An example of the screen for entry of a new contact is illustrated in Figure 24.
4.1.2.2.5 Certification and Licensure

Certification is when the State Survey Agency officially recommends its findings regarding whether health care entities meet the Social Security Act’s provider or supplier definitions, and whether the entities comply with standards required by Federal regulations.

4.1.2.2.5.1 Certifying a Provider, Assigning a CCN, and Other Instructions

CMS certification is achieved by completing an initial certification survey conducted by either a state survey agency or, for providers seeking deeming status, an accrediting organization (AO).

When a provider is certified, a unique CMS Certification Number (CCN) is assigned to the provider. That CCN can only be assigned to a single provider, and provider’s in iQIES will not have a CCN number unless it is certified.

New providers created in iQIES have their ‘Federal Certification Status’ automatically set to a ‘Pending Certification’ status until the certification process has been completed. This includes an initial certification survey is entered into iQIES, citations are locked, a CCN number has been issued, and the ‘Federal Certification Status’ has been changed to ‘Certified’.

To initiate the certification process for a new provider, the user must first verify that the provider’s ‘Federal Certification Status’ is set to ‘Pending Certification’, see callout 1 in Figure 25 below. After providing the necessary information be sure to select the ‘Save’ button, see callout 4 in Figure 25.
Figure 25: Certifying a Provider Instructions – Example
Note that certain key criteria must be provided before a provider can be ready to be submitted for certification. This information can be edited by accessing the survey basic information page. This criterion includes the following:

- Certification Status must be Pending, see callout 1 in Figure 25 above.
- Survey Extents must be selected, see callout 1 in Figure 26 below.
- Survey Status Dates must be provided, see callout 2 in Figure 26 below.
- All other information with asterisk (*) has been provided.
- All dates and survey extents must also be provided on the citations page like the process described above and the citations have been ‘Locked, refer to Section 5.2 of the user manual for details about establishing criterion for citations. Note that these prerequisites are necessary to prepare the survey for certification.

Once this has information has been provided, the citations are ‘Locked’, from the State side this survey is ready to be submitted for the certification process.
4.1.2.2.6  **Certify a Medicare Provider**

Once the initial certification survey is completed, the related forms have been entered, and the citations locked; a CMS user must complete the following steps to certify a Medicare provider:

1. Find the provider and select the 'View Details' button
2. Next, select the 'Certification and Licensure' link in the left-hand navigation pane
3. Change the 'Federal Certification Status' to 'Certified'
4. Add the provider 'Certification Date'
5. Add the provider 'Original Participation Date'
6. Select the 'Save' button

In iQIES, the provider CCN is automatically assigned the next available provider number for the selected provider type and state. Once a CCN is assigned to the provider, this action cannot be undone. Check the name and address of the provider in the top ribbon to confirm you have selected the correct provider, then click ‘Confirm’ to change the provider to Medicare certified and automatically assign a CCN to the provider as well as any HHA branches that have been added to this providers record. See Figure 27 below, for an example.

![Figure 27: Medicare Certified and Automatically Assign a CCN - Example](image-url)
4.1.2.2.6.1 **View Certification and Licensure**

A provider’s certification and licensure information can be reviewed by selecting the ‘Certifications and Licensure’ section on the left side navigation pane, see callout 1 in Figure 28 below.

Note that the options for ‘Federal Certification Status’ indicate if this provider’s federal certification status is ‘Not Applicable’ (e.g., licensed-only providers), ‘Pending Certification’, ‘Certified’, or ‘Terminated’, see callout 2 in Figure 28.

An example of a completed ‘Certification and Licensure’ section is illustrated below in Figure 28.

![Figure 28: Certification and Licensure Section- Example](image)

After saving and the State has notified the CMS Office the user will need to log out and log back in as a State user role. A CCN number will automatically be assigned to the provider and will appear beneath the provider’s name in the top ribbon.

4.1.2.2.6.2 **Edit or Update Certification and Licensure Information**

If the user has the appropriate user role, they can edit a provider’s federal certification and state licensure status and related information, by selecting the ‘Edit’ button, see callout 2 in Figure 30 below.
Figure 29: Certification and Licensure Section - Example

Selecting the ‘Edit’ button will open a new page which provides the user with more refinement options. Only a federal certification status is required. Some fields have additional requirements, indicated in the helper text below the field. The issue date must be today or in the past, see callout 2 in Figure 30 below.

The provider’s ‘Employer/Tax Identification Number’ entry must be nine digits long, see callout 3 in Figure 30.

Be sure to select ‘Save’ before exiting or ‘Cancel’ to return to the previous screen, see Callout 4 in Figure 30.

An example of the ‘Certifications and Licensure’ edit page is illustrated in Figure 30.
4.1.2.2.7 Deeming Information

In general terms, a ‘deemed’ provider indicates that a provider’s normal survey and certification (S&C) activities are handled by an Accrediting Organization (AO) instead of the state survey agency. In the deeming Information section, the user can review the providers deeming information, see callout 1 in Figure 31 below. The user can also ‘Add Accrediting Organization’.
Additional information about adding deeming and AO information will be discussed in a later version.

---

**4.1.3 Approve or Reject New Provider**

The AO provider approval process will be initiated upon opening the ‘Approve Provider Changes’ page, where you will be asked to confirm or cancel the AO’s approval, see callout 1 in Figure 32 below, where you will be asked to confirm (save) or cancel the approval, see callout 2 in Figure 32.
In the Administrators section, see callout 1 in Figure 33 below, you can review and add the provider administrators and their respective contact information. Note that all required fields are marked with an asterisk (*), see callout 2 in Figure 33. When the user completes filling in the Administrator information they should ‘Save’ the information, see callout 3 in Figure 33.
Figure 33: Add Administrator – Example

4.1.3.1.1 Administrator Details Section

Upon saving the detail page about the administrator will be displayed. The user can then add additional administrators for the same provider, see callout 2 in Figure 34 below, make edits, or delete the information, see call out 3 in Figure 34.
Letters and attachments both can be added in several locations within iQIES and can be tied to providers, surveys, intakes, and enforcements.

To review or add a letter applicable to the provider, navigate to the ‘Letters’ section in the ‘Provider Details’ left hand navigation pane, see callout 1 in Figure 35 below, and select ‘Add Letter’, see callout 2 in Figure 35.

Note:
If previous letters have been included, they will be displayed in the list. In the example shown below there are no letters for this provider.
Figure 35: Add Letter Section - Example

The user can enter information about the letter, however only the letter name is required, see callout 1 in Figure 36 below.

Once the ‘Add Letter’ button has been selected the details of the letter will be displayed.

Attachments and recipients can be added, or the letter can also be edited or deleted. See callout 2 in Figure 36 for example.
Figure 36: Edit Letter Overview - Example

If you are satisfied with the details of the letter, you can ‘Save’ or ‘Cancel’ the information, see callout 2 in Figure 36 above.

Selecting the ‘Save’ button will generate a new page that provides an overview of the letter details, see Figure 37 below.

In addition, the user can choose the following:

- ‘Add Attachments’, see callout 2 in Figure 37
- ‘Add Recipients’, see callout 3 in Figure 37
- ‘Delete Letter’, see callout 4 in Figure 37

The user can also choose to Edit any of the overview information, see callout 1 in Figure 37.
Figure 37: Add Letter Overview – Example

Selecting the ‘Return to Letters’ link, see callout 5 in Figure 37 above, will take you to the main ‘Letters’ section, which will display a list of any letters that have been added, see callout 1 in Figure 38 below. The list can be sorted by the column header ‘Letter Name’ button.

Actions can be taken on a specific letter by using the Actions dropdown. The options presented include:

- Edit Overview
- Add Recipients
- Add Attachments
- Delete Letter

See callout 2 in Figure 38.

Select ‘Add Letter’ to add another letter, see callout 3 in Figure 38.
4.1.3.3 Attachments

To add attachments related to this provider, the user can select the ‘Attachments’ button in the ‘Provider Details’ screen and select a file, see Callout 1 in Figure 39 below.

A brief description of the file being attached is recommended, but not required, see callout 3 in Figure 39. If the file is related to survey information, navigate to a provider’s survey, and go to the ‘Letters’ or ‘Attachments’ section.

The types of supported file formats are indicated below the ‘Select File’ button, see Callout 2 in Figure 39.
Figure 39: Attachments Details Section - Example

When the file has been selected, the ‘Save’ button will highlight and the attachment details will be displayed. The user can also select ‘Cancel’ to return to the previous page.

The attachment details can be further edited, or more attachments can be added.

4.1.3.3.1 Attachments Download

If the user wishes to retrieve their attachment from iQIES, they can select ‘Download’ and the file download will begin, see callout 1 in Figure 40 below.

The user also has the option to ‘Edit’ the attachments, see callout 2 in Figure 30. More attachments can also be added by selecting the ‘Add Attachment’ button, see callout 3 in Figure 40.

The ‘Show Filters’ link, see callout 4 in Figure 40, provides additional filing filter features such as the following:

- File Name
- File Type
- Uploaded By

You can utilize these filters by selecting the ‘Apply Filters’ button.
Figure 40: Attachments Section – Download

The user can select the ‘Return to Provider’ button near the top of screen to return to the ‘Provider History’ page.

END OF SECTION 4
5. Managing Surveys

Surveys are a key component of the iQIES system that allows State Agencies and the Centers for Medicare and Medicaid Services (CMS) to verify how well healthcare entities comply with the conditions of participation (CoPs) or other requirements.

The User’s iQIES user role will determine what surveys can be viewed and what information about surveys can be viewed, as well as the ability to add or edit surveys. user’s survey information is accessed via the ‘Provider’ and ‘Advance Search’ pages in the ‘Survey & Certification’ section of iQIES.

When the user selects a provider while in the search mode, a list of available surveys will be displayed. If an iQIES user has a General User role and approved access to a given state by the State Security Official (SSO), the user can edit the provider’s information, as well as add and edit surveys for that provider for that state.

The user should be aware that surveys having at least one CoP-level citation are required to initiate the enforcement process, and an example of the steps required to perform that procedure is presented in the ‘How to Manage Enforcements’ section of this user manual.

5.1.1 Survey Review

A provider’s three most recent surveys are displayed in the ‘Recent Surveys’ table, as shown on the ‘Provider History’ page. The ‘View All Surveys’ button will be enabled when the provider has four or more surveys. If that button is enabled, all surveys will show up on a list when the user clicks on that button. To access a specific survey, click on the survey ID, shown as a blue hyperlink.

In the ‘Status’ column, it will show if the survey is new, in progress, or closed. The user can view and update an open survey as necessary; however, the user can only view, and not make changes to, closed surveys. Closed surveys must be changed back to an open status for the user to make edits to closed surveys.

‘Selecting any of the surveys within the ‘Provider History’ window will provide a detailed display of a particular survey and the basic information for that provider. The survey ‘Basic Information’ screen includes:

- Survey Type
- Enforcement Case ID
- Survey Categories
  - Federal Categories
  - State Categories
- Regulation Sets
  - Federal Categories
  - State Categories
- Survey Status
  - Survey Status
  - Start Date
  - Exit Date
An example of the survey ‘Basic Information’ screen is shown in Figure 41 below. The ‘Edit’ button, see callout 2 in Figure 41, provides the user with the means to perform certain edits, although many of the key survey categories cannot be revised once they have been created.

Surveys are organized into sections that can be accessed by using the navigation menu on the left side of the screen.

- Responsible Staff
- Survey Team
- Citations
- Statement of Deficiencies
- Plan of Correction
- Form CMS-1572 (Home Health Agency Survey and Deficiencies Report)
- Form CMS-670 (Survey Team Composition and Workload Report)
- Letters
Examples of each of the Basic Information categories are presented in the following sections.

### 5.1.2 Responsible Staff

From the ‘Responsible Staff’ section, see callout 1 in Figure 42 below, is where the user can add new or view existing staff that may interact with the survey, such as the surveyors responsible for conducting the survey, and staff outside of the survey team, such as Quality Assurance (QA) reviewers.

When a user performs certain functions within the survey process, their name may be added as a responsible staff member. This can be done by selecting the ‘Add Staff’ button, see callout 2 in Figure 41. If the information has been entered, the ‘Responsible Staff’ table will initially populate with staff from the Provider’s State Survey Agency. The table of available staff members can be sorted by clicking on a column header carat arrow (^), allowing it to be sorted in alphabetical or reverse alphabetical order.

Enter the search criteria and select ‘Search’ to filter the list of staff. More information about adding responsible staff members is provided later in this section.

Selecting the ‘Survey Action’ link will provide a dropdown list that allows the user, depending on their role, to perform additional actions such as ‘Create Federal Monitoring Survey’ and ‘Create Revisit’, see callout 3 in Figure 42.

More information about creating Federal Monitoring Surveys (FMS) and revisit surveys is provided later in this section.

An example of a ‘Responsible Staff’ page is shown in Figure 42.

![Figure 42: Responsible Staff Section - Example](image-url)
5.1.3 Survey Team

The ‘Survey Team’ section is used to track staff actively performing the survey, writing citations, sending the statement of deficiencies, and reviewing plans of correction. Surveyors can be added to the survey team in this section and, if team members have already been added, a list of the survey team members and their discipline, see callout 1 in Figure 43 below.

Figure 43: Survey Team Section - Example

NOTE:

If a member with a certain discipline is required to be on the survey team but has not been included, a warning message will appear on the screen, see callout 2 in Figure 44 below. In the example a registered nurse is being required for the survey team.

The member identified in the warning message must be included before this task can be completed.
The user can also select 'Add Team Member' to include additional team members to the survey team, see callout 2 in Figure 44 above.

Members can also be removed by selecting the 'Delete' button under 'Actions'.

### 5.1.3.1 Survey Team Coordinator

The Team Coordinator will default to the first team member added to the survey team list and can later be changed if necessary, see callout 1 in Figure 45 below.

**NOTE:**

Only one person can be the Team Coordinator.
Figure 45: Survey Team Coordinator - Example

Note that the ‘Survey Team’ page is updated and displays the team members after each addition or modification to members of the team.

If the user tries to save without selecting a staff member, see callout A in Figure 46 below, they will be prompted with a warning message, see callout A in Figure 46.
5.1.4 Add New Survey

To add a new survey, the user should select the ‘Add Survey’ button on the ‘Provider History’ page. They will be directed to the survey’s ‘Basic Information’ page, see Figure 47 below.

This page requires the following information (note that all required fields are marked with an asterisk (*)):
Survey Categories: *

<table>
<thead>
<tr>
<th>Federal Categories:</th>
<th>State Categories:</th>
</tr>
</thead>
<tbody>
<tr>
<td>o Initial Certification</td>
<td>o Initial Licensure</td>
</tr>
<tr>
<td>o Recertification</td>
<td>o Re-Licensure</td>
</tr>
<tr>
<td>o Complaint</td>
<td>o Licensure Complaint</td>
</tr>
</tbody>
</table>

Regulation Sets: *

<table>
<thead>
<tr>
<th>Federal Regulation Sets:</th>
<th>State Regulation Sets:</th>
</tr>
</thead>
<tbody>
<tr>
<td>o HOME HEALTH AGENCIES (FED - G - 11.00)</td>
<td></td>
</tr>
<tr>
<td>o Emergency Preparedness (FED - E - 1.01)</td>
<td></td>
</tr>
</tbody>
</table>

Survey Status:

- Start Date – A drop-down calendar will be displayed (MM/DD/YYYY)
- Exit Date – A drop-down calendar will be displayed (MM/DD/YYYY)

If this is the first federal Medicare or Medicaid survey, the user should select the ‘Initial Certification’ type of survey to begin the iQIES certification process, see callout 1 in Figure 47 below.

The user can also select both ‘Federal’ and ‘State’ categories and perform a combined survey, see callout 2 in Figure 46. Certain survey categories may be disabled based on the provider’s information and the role of the user creating the survey, see callout 3 in Figure 47.

The user can only choose the ‘Regulation Sets’ categories that are applicable to the provider type and survey category they have selected. If the Federal category is selected, then a ‘Federal Regulation Set’ is required. The same is true for ‘State Regulation Sets’.

The user may also choose ‘Show Older Regulation Sets’, see callout 4 in Figure 47, to populate the list with older surveys, which can then be selected. The ‘Start Date’ and ‘Exit Date’ can be entered in the boxes provided, although they are not initially required.

It is recommended that the user not enter a survey exit date until after the survey onsite portion of the survey is complete.

NOTE:

A calendar will drop down to aid in selecting appropriate dates, see callout 5 in Figure 47.

An example of a new survey is displayed in Figure 47.
Figure 47: New Survey – Example

It is important for the user to save any new information before switching to another section to avoid the risk of losing that data.

Once the data has been entered, select ‘Save’ to record the new survey, or ‘Cancel’ to start over and exit the page.
5.2 Citations

Any user who has permission to create a survey in iQIES, can document citations, or “deficiencies”, identified during a survey in the ‘Citations’ section. From here, users can add their citation summary and findings text, specify if the citation was Immediate Jeopardy (IJ), and other information related directly to a citation.

One or more citations can be added to the survey for the surveyor to enter their findings, and a list of available tags will be displayed below the ‘Filter by:’ feature.

5.2.1 Navigate to the Citation Page

Selecting the ‘Citations’ section from the left-hand side of the survey page, will display the ‘Citations’ page. See Figure 48 for an example.

![Figure 48: Citations - Example](image)

**NOTE:**

In the example above, the user may get a warning about the ‘Survey Extents’ not being updated, see callout A in Figure 48 above. Follow the instructions as indicated to update the survey extents.
Also note that ‘H’ in the iQIES ‘Survey ID’, see callout 1 in Figure 48 above, indicates that this is a health survey, and the ‘1’ indicates that this is the first visit for this health survey.

If the list contains citations, the user can sort them by selecting the carat arrow next to the appropriate column header on the page, see callout 2 in Figure 48.

The ‘Actions’ link provides the user with an opportunity to ‘Add Findings’ or ‘Delete Citation’, see callout 4 in Figure 48. See the subsection below for more information and an example of the ‘Add Citation Findings’ page.

Also note that at the beginning of the citations process, many of the buttons and features will be disabled until another action or step is taken and completed.

One or more citations can be added at the same time, see callout 3 in Figure 48. A list of available tag types will be displayed below the ‘Filter By’ features, see callout 5 in Figure 48.

5.2.1.1.1 Add Citation to a Survey

Specific applicable citation regulations can be added to a citation by selecting the ‘Add Citation’ button, see callout 3 in Figure 48 above, which will populate the ‘Added Citations’ list on the right, see callout 1 in Figure 49 below.

To display the regulation text and interpretive guidelines for a tag, select the title of the respective tag, see Note 1 in Figure 49.

The user can also search for a citation by tag number, title, or keyword; or you can also select the ‘Reset’ button, see callout 3 in Figure 49 to return the list to its original state.
To ensure that the added citations have been recorded, select ‘Save’, see callout 2 in Figure 49 above, to display the added citations list.

By selecting the ‘Actions’ box, see callout 1 in Figure 50 below, citation findings can be added, or a citation can be deleted. More citations can still be added by selecting the ‘Add Citation’ button, see callout 3 in Figure 50, and refer to section below for more citation information.

**5.2.1.2 Add Findings or Delete Citations**

The ‘Actions’ link provides a drop-down for the user to select either ‘Add Findings’ or ‘Delete Citation’, depending on the citation status, see callout 1 in Figure 50 below.
On the citations list, select ‘Delete Citation’ to delete the citation. The ‘Delete Citation’ option is disabled if the citation has saved summary or findings text, or is associated with an enforcement remedy, such as a civil money penalty.

Selecting ‘Delete Citation’ will remove the citation from the current list.

Selecting the link of the tag number (under Citation ID), see callout 2 in Figure 50, will display the ‘Citations Overview’ page for the citations in the list. See the ‘Citations Overview’ section below for detailed instructions about the ‘Citations Overview’ page.

Figure 50: Add Findings or Delete Citation Status - Example

### 5.2.1.3 Citation Overview Section

Selecting the tag number in the list will open the ‘Citation Overview’ section page, see callout 1 in Figure 51 below. This page provides a summary of the citation details. The user can edit the information by selecting the ‘Edit’ button, see callout 2 in Figure 51.

The edit feature allows you to review the information about the citation. All items marked with a red asterisk (*) are required to be filled out by the user. More instructions about the edit features for citations are presented below.
5.2.1.4 Edit Citation Overview Section

Opening the ‘Citation Overview’ will display the following options:

- Tag Type
- Associated with Immediate Jeopardy
- Regulation Set
- Survey Category

**NOTE:** Fields marked with an asterisk (*) are required and must be entered.

If a condition tag rises to the citation has been marked as being an ‘associated level of immediate jeopardy’, click yes under the “Associated with an Immediate Jeopardy (IJ) situation” category. If it is not, click no, see callout 1 in Figure 52 below.

This category can be revised if necessary. This category is not applicable to standard or element tags. ‘Overview’ (Callout). The user must select ‘Yes’ citation IJ condition. Note that only citations with a ‘Tag Type’ of ‘Condition’ have the option of marking a citation as IJ.

When the user is complete with the edit, select ‘Save’ or ‘Cancel’, see callout 2 in Figure 52 below.
The citations will be saved to the survey’s ‘Citations’ page. The ‘Citations List’ can be filtered by selected regulation sets and sorted by the ‘Citation ID’, ‘Tag Type’, or ‘Citation Status’ columns.

Citation statuses include the following:

- Not Started
- In Progress
- Ready for Merge
- Merged – In Progress
- Writing Complete
- Corrected

Citations start in status ‘Not Started’.

Citation types include memo, licensure, condition, condition-IJ, element, and standard. Citations with the citation type ‘Condition’ will be displayed below the ‘Edit Citation Overview’ heading.
5.2.1.5 Citation Findings

Selecting ‘Citations Findings’ will display the citation findings and status. The user can review the related CFR section, regulation text, and interpretive guidelines, see callout 1 in Figure 53 below. If there is a deficient practice statement for this citation written by any surveyor, or findings added by the current user, they will be displayed as well, see callouts 2 and 3 in Figure 53. The user also has the option to revise or add text to either category.

The user can also select what the ‘Citation Findings’ status is: either ‘In Progress’, to return and finish writing later; or ‘Writing Complete’, to show they have finished their writing for the selected citation, see callout 4 in Figure 53.

Figure 53: Add Citation Summary and Findings – Example
Checking either box will result in different pages being displayed. If the ‘In Progress’ option was selected, the citation status will display ‘In Progress’, see callout 1 in Figure 54 below. The page will display the text that has been entered and provide the user with additional editing options, see callout 2 in Figure 54.

The user also has the option to ‘Delete’ that summary and finding information, see callout 3 in Figure 54. If you wish to display the regulation text and interpretive guidelines, select the right carat (>) symbol, see callout 4 in Figure 54.

Figure 54: Citation Findings – ‘In Progress’ Example
5.2.1.5.1 Citation Writing Complete

If the ‘Writing Complete’ option is selected, a new page will display all the citations that have been selected and the ‘Citation Status’ column will indicate the progress of the writing as mentioned in earlier parts of this section, see callout 1 in Figure 55 below. The user can also add another citation, see callout 2 in Figure 55. Selecting the ‘Actions’ link, see callout 3 in Figure 55, will provide additional editing options, depending on the citation status, such as:

- Add Findings
- Edit
- Delete Citation

Figure 55: Citation Findings – ‘Writing Complete’ Example

5.2.1.6 Citation Attachments

To add an attachment to the citation from the ‘Attachments’ section, select ‘Attachments’ in the sidebar, see callout 1 in Figure 56 below.

Choose ‘Select File’, see callout 2 in Figure 56, select your file, and then enter a file description, see callout 3 in Figure 56. Be sure to click ‘Save’ to save your results before exiting, see callout 4 in Figure 56.
5.2.2 Lock Citations / Unlock Citations

Once the survey 'start' and 'exit' dates and 'survey extent' have been entered under the survey 'Basic Information' section, and all citations are marked 'Writing Complete', see callout 1 in Figure 57 below, —and if necessary "merged"—a notification message will inform you that 'Citations are ready to be locked', see callout A in Figure 57.

NOTE:

All citations must indicate 'Writing Complete' before the 'Lock Citations' icon box will become highlighted, see callout 3 in Figure 57.
5.2.2.1 Start and Exit Dates to Unlock Citations

The user will a warning message, see callout A in Figure 58 below, if the survey does not have a start and exit date, even if writing is complete.

To include a survey, start and exit date in the ‘Basic Information’ section, select ‘Add Exit Date’, see callout B in Figure 58, located in the message to bring you to back to the ‘Basic Information’ screen, where the dates can be entered.
5.2.2.2 Lock Citations Confirmation

Once the start and exit dates have been provided, the ‘Lock Citations’ drop-down will display a warning about selecting the ‘Lock Citations’ button, see callout A in Figure 59 below.

On the following screen, select the ‘Lock’ button on the ‘Lock Citations’ notification, see callout B in Figure 59.
5.2.2.3 Date not Entered for Statement of Deficiencies Message - Citations

There may be a notification message indicating a sent date is needed for the ‘Statement of Deficiencies’. Select ‘Enter Date Sent’ to be taken to the ‘Statement of Deficiencies’ section, see callout 1 in Figure 60 below. You can select the ‘Enter Date Sent’ link to include the Statement of Deficiencies sent date, see callout 2 in Figure 60.

The user also has the option to ‘Unlock Citations’ from this page, see callout 4 in Figure 60. Unlocking will restore the citations back to an editable state.

If citations were added to the survey, the ‘Survey Action’ link, see callout 3 in Figure 60, will display the ‘Create Revisit’ drop-down which will take the user to the ‘Basic Information’ page for a new revisit survey.
Figure 60: Date not Entered for Statement of Deficiencies Message – Example

Refer to the section below to learn more about generating the ‘Statement of Deficiencies’ and entering the date sent to the provider.

5.2.2.4 Revisit Survey

If citations are issued and a revisit survey is required, a notification message will prompt the user to ‘Create Revisit’, see callout A in Figure 61 below. The revisit survey can be created by navigating to the notification message, the ‘Citations’ and ‘POC’ section, or the provider’s recent surveys and selecting ‘Create Revisit’.

Figure 61: Revisit Survey Notification Message -Example
5.2.2.4.1 **Revisit Survey Considerations**

Before the user can create a revisit survey, the following must be confirmed:

- All citations and their findings are added.
- All citations are marked writing complete.
- The survey has an exit date.
- Citations are locked.
- The Plan of Correction (POC) information is complete. If the POC is rejected, the provider must continue to resubmit a new POC until it is approved.

Once the POC is approved, the user will be provided with a new section to enter POC dates, and when the citation has been verified as corrected, Correction Dates for each citation.

The user can create a revisit survey before adding a POC, but make sure to fill out the original survey’s POC information so the revisit survey will update accordingly.

5.2.3 **Statement of Deficiencies**

CMS requires the CMS-2567: Statement of Deficiencies and POC form, to be issued to the provider if the survey or investigation identifies violations of the federal regulations. When the citations described above are complete, the Statement of Deficiencies can then be generated.

To navigate to the ‘Statement of Deficiencies’ section to generate the Statement of Deficiencies, the user must select that section, see callout 1 in Figure 62 below. You can also generate the Statement of Deficiencies by selecting the ‘General Form’ button, see callout 2 in Figure 62, and see instructions in section below.

![Figure 62: Statement of Deficiencies Section – Example](image-url)
5.2.3.1 Generate the Statement of Deficiencies

When citations are complete, merged, and locked, the Statement of Deficiencies can be generated by selecting the ‘Generate Survey’ button, see callout 1 in Figure 63 below.

Refer to the sections in this Manual that discuss merging and locking citations prior to completing the Statement of Deficiencies section.

The first time you visit this iQIES section, the ‘Due to Provider’ date will be auto populated to ten (10) business days after the survey start date, see callout 2 in Figure 63. The other dates will be blank and read ‘No Information’.

Be sure to click ‘Save’ prior to exiting, see callout 3 in Figure 63.

Figure 63: Generate a Statement of Deficiencies – Example

By selecting ‘Generate Form’, see callout 1 in Figure 63 above, you will be directed to the ‘Statement of Deficiencies’ page to further select preferred options for Statement of Deficiencies form.

NOTE: All required fields are marked with an asterisk (*).

The user can select options for the Statement of Deficiencies form, see callout 1 in Figure 64 below, and then select ‘Download Form’ or ‘Cancel’. If a Final Observations (9999) tag was included in the citations, be sure to click the box next to Format Options, see callout 2 in Figure 64.
64. Selecting the Download Form button will generate a pdf form for future use, see callout 3 in Figure 64.

Figure 64: Generate a Statement of Deficiencies – Example

5.2.3.1.1 Statement of Deficiencies Downloaded Form

If you selected the ‘Download Form’ option, see callout 3 in Figure 64 above, the ‘Statement of Deficiencies’ files will be downloaded directly to your computer as separate files for state and federal statements. They can be located and accessed as you would normally access downloaded files.

There may be more than one page depending on the number of deficiencies that were cited.

A one-page example is presented in Figure 65 below.
## Figure 65: Downloaded Statement of Deficiencies - Page 1 – Example

<table>
<thead>
<tr>
<th>ID PREFIX TAG</th>
<th>SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)</th>
<th>ID PREFIX TAG</th>
<th>PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)</th>
<th>COMPLETION DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>G0000</td>
<td>INITIAL COMMENTS</td>
<td>G0000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>G0330</td>
<td>Release of patient identifiable OASIS info. 408.43 4084.40 Condition of participation. Release of patient identifiable OASIS information. The HHA and agent acting on behalf of the HHA is in accordance with a written contract must ensure the confidentiality of all patient identifiable information contained in the clinical record, including OASIS data, and may not release patient identifiable OASIS information to the public.</td>
<td>G0330</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See reverse for further instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.
5.2.3.3 Statement of Deficiencies Dates

The first time the user visits this section, the ‘Due to Provider’ date will be auto populated to ten (10) business days after the survey start date, see callout 1 in Figure 66 below. The other dates will be blank and read ‘No Information’.

You can make further edits by selecting the Edit button, see callout 2 in Figure 66.

Figure 66: Edit Statement of Deficiencies Dates – Example

Upon selecting the ‘Edit’ button, the ‘Statement of Deficiencies’ page will provide options to select the ‘Date Sent’ and ‘Due Back from Provider’. Enter the ‘Date Sent’ once the form has been sent to the provider, see callout 1 in Figure 67 below.

The user shall enter the date sent in MM/DD/YYYY format and then select ‘Save’, see callout 2 in Figure 67.
Figure 67: Enter Date Sent – Example

5.2.3.3.1 All Statement of Deficiencies Dates Set

Once the form has been sent to the provider and the ‘Due Back from Provider’ date has been established, complete all the dates as required, see callout 1 in Figure 68 below.

The user must enter the dates in MM/DD/YYYY format and then select the ‘Save’ button, see callout 2 in Figure 68.
Figure 68: All Statement of Deficiencies Dates Populated – Example

5.2.3.3.2 Citation Writing Not Completed Message

If citation writing is still in progress or a Statement of Deficiencies has already been sent, a message will appear when you try to generate the Statement of Deficiencies and the dates, see callout A in Figure 69 below.

You will be required to correct the citation writing issue by completing the writing and checking the Writing Complete button before you will be allowed to save, see callout 2 in Figure 69.

Each tag must display ‘Writing Complete’ to be allowed to proceed.

Refer to 5.2.1.5.1 - Citation Writing Complete section for instructions on how to perform this task.
5.2.4 Informal Dispute Resolution

In this section, you can add and manage any informal dispute resolutions (IDRs) in response to citations. You must include all the dates with a red asterisk (*), see callout 1 in Figure 70 below.

If the IDR Status is known, check the appropriate icon, see callout 2 in Figure 70. If a POC is required, check the appropriate box, see callout 3 in Figure 70.

A List of Attendees window will appear when you choose the ‘Select’, see callout 4 in Figure 70, and the user can pick from a list of applicable options.

Clicking on any of the links will provide citation details and surveyor findings, see callout 5 in Figure 70.
5.2.5 Plan of Correction (POC)

For most citations, providers are required to submit an acceptable POC for achieving compliance in response to deficiencies issued by surveyors representing the Centers for Medicare and Medicaid Services (CMS whenever standard or condition-level tags are cited). Surveyors identify the federal regulation in violation and describe the findings of noncompliance. The provider is required to submit a written response to these deficiencies, which is known as the ‘Plan of Correction (POC)’. The POC must identify the steps that have been or will be taken to attain compliance with the regulation and must identify the time that correction has been or will be achieved by the provider.
5.2.5.1 Add a Plan of Correction

The user can track the deficiency corrections directly in the iQIES survey section. Once the user has received a POC from the provider, navigate to the ‘Plan of Correction’ section. The ‘Statement of Deficiencies Sent Date’ is displayed, see callout 1 in Figure 71 below, and the ‘Due Date’ is populated, see callout 2 in Figure 71, with the ‘Due Back from Provider’ date from the ‘Statement of Deficiencies’. The ‘Provider Sign-off Date (X6) and Received Date’ are initially blank, see callout 3 in Figure 71. Also, the POC Status will be indicated, see callout 4 in Figure 71.

Figure 71: Plan of Correction – Dates - Example

5.2.5.2 Plan of Correction Status

Select the ‘Pending Review’ radio button, see callout 1 in Figure 72 below. Note that ‘Status’ is a required field. Select the status and provide the corresponding date, see callout 2 in Figure 72. If the ‘Status Accepted’ or ‘Not Accepted Status’ is chosen, you will be prompted for
additional date information, see callout 3 in Figure 72. Further details on completing this information are provided below.

![Image of iQIES Survey & Certification Manual](image-url)

**Figure 72: Select Status Button on the Plan of Correction – Dates - Example**

### 5.2.5.3 Accepted Plan of Correction

If the provider’s POC is accepted, see callout 1 in Figure 73 below, it can be indicated in the Plan of Correction overview and the ‘Accepted Date’ can be entered, see callout 2 in Figure 73. The ‘Provider Sign-off Date (X6)’ and ‘Received Date’ are both required at this time, see callout 3 in Figure 73.

Select “Save’ to save the POC information, see callout 4 in Figure 73.

Citation-level POC dates can be added by selecting ‘View’ next to a citation, and then selecting ‘Edit’ under its Plan of Correction (POC) section.
5.2.6 Rejected Plan of Correction

If the provider’s POC is ‘Not Accepted’, that needs to be shown in the POC overview, and the status date can be entered, see callout 1 in Figure 74 below.

**NOTE:** The ‘Status’ category is a required field (*).

Each time a POC is not accepted, the user can create a new POC record until the ‘Status’ is ‘Accepted’ and the ‘Accepted Date’ is entered, see callout 2 in Figure 74.

**NOTE:** The ‘Provider Sign-off Date (X6)’ and ‘Received Date’ are NOT required when the status is ‘Not Accepted’, see callout 1 in Figure 74 and callout 3 in Figure 74.

Select ‘Save’ to save the POC information, see callout 4 in Figure 74.
5.2.7 Form CMS-1572

Users can update the ‘CMS-1572: HHA Survey and Deficiencies Report’ at any time. The fields on the CMS-1572 form are collected from the provider by the surveyor at the time of the certification survey.

5.2.7.1 Editing the Form CMS-1572

Select ‘Edit’, see callout 1 in Figure 75 below, to add and change information. ‘Branch Information’ is auto populated from the provider details.
Figure 75: Edit the HHA Survey & Deficiencies Report – Form CMS-1572 – Example
5.2.7.2 Adding Branches to Form CMS-1572

The user can add branches while on the ‘Edit’ page by selecting the ‘Add Branch’ button as shown in callout 1 in Figure 76 below. Callouts 2 thru 4 in Figure 76 provide you with further editing features.

**Note:** Branches can also be added for the HHA provider by selecting the ‘Additional Branch Addresses’ under the ‘Provider Details’, see section 4.1.2.2.2, in this Manual.

---

**Figure 76: Adding Branches to Form CMS-1572 – Example**
When you select the ‘Add Branch’ button, see callout 1 in Figure 76 above, you will be prompted to input the information as required, see callout 1 in Figure 77 below.

Any changes to branch information will also be reflected in the additional branch addresses section for the provider. Be sure to save work when you are finished entering all your information, see callout 2 in Figure 77.

Figure 77: Providing Branch Information to Form CMS-1572 – Example
5.2.7.3 Editing the Records Reviewed and Other Data on Form CMS-1572

Whole numbers need to be entered by the user in the ‘Records Reviewed’, ‘Patient Census Since Last Standard Survey’, and ‘Discharges’ fields, or you will receive an error, see callout A in Figure 78 below.

Figure 78: Number of Records Error Message on Form CMS-1572 – Example
5.2.7.4 CMS-670 Timesheet

All survey team members can update the ‘CMS-670’ section at any time, see callout 1 in Figure 79 below. Team members will add their time spent on work they perform on the survey in this section. Select the ‘New Time Entry’ button to add your time, see callout 2 in Figure 79. If this is a combined survey, select the survey category that this time entry applies to. Enter your time information and then ‘Save’.

![CMS-670 Timesheet](image)

**Figure 79: CMS-670 Timesheet – New Time – My Time – Team – Example**

5.2.7.4.1 CMS-670 Timesheet Entry

The user must fill out the required fields on the CMS-670, including the ‘Arrival’ and ‘Departure Dates’, excepting surveys marked as ‘Offsite’, see callout A in Figure 80 below. Failure to do so will result in an error message when saving.

In addition, the hours entered in the time fields must be to the nearest quarter hour (e.g., 0.25), see callout B in Figure 80. If this is a combined survey, be sure to select the correct survey category that this time entry applies to, see callout 1 in Figure 80. Be sure to ‘save entry’, see callout 2 in Figure 80.
Enter the time information and select ‘Save’ to save the new time entry. See Figure 80 for an example.

Figure 80: CMS-670 Timesheet – Entering My Time Info – Example

5.2.7.4.2 My Time / Team Time Tabs in CMS-670 Section

The surveyor can view their own time or each surveyor team member’s time by selecting the ‘My Time’ or ‘Team Time’ tabs respectively, see callout 1 in Figure 81 below, for an example. The user can also make edits to the individual hours entered by selecting the Edit button next to each category, see callout 2 in Figure 81.
### Team Time

#### Summary

<table>
<thead>
<tr>
<th>Task</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-Survey Preparation</td>
<td>0</td>
</tr>
<tr>
<td>On-site (12am-8am)</td>
<td>1</td>
</tr>
<tr>
<td>On-site (8am-6pm)</td>
<td>4</td>
</tr>
<tr>
<td>On-site (6pm-12am)</td>
<td>1</td>
</tr>
<tr>
<td>Travel</td>
<td>0</td>
</tr>
<tr>
<td>Off-site Report Preparation</td>
<td>0</td>
</tr>
<tr>
<td><strong>Subtotal:</strong></td>
<td><strong>6</strong></td>
</tr>
</tbody>
</table>

#### Supervisory Task

<table>
<thead>
<tr>
<th>Task</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>RO Supervisory Review</td>
<td>0</td>
</tr>
<tr>
<td>RO Clerical/Data Entry</td>
<td>0</td>
</tr>
<tr>
<td>SA Supervisory Review</td>
<td>0</td>
</tr>
<tr>
<td>SA Clerical/Data Entry</td>
<td>0</td>
</tr>
<tr>
<td><strong>Subtotal:</strong></td>
<td><strong>0</strong></td>
</tr>
</tbody>
</table>

#### Pat test2.CO Fisher1

**Recertification**

<table>
<thead>
<tr>
<th>Task</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-Survey Preparation</td>
<td>0</td>
</tr>
<tr>
<td>On-site (12am-8am)</td>
<td>1</td>
</tr>
<tr>
<td>On-site (8am-6pm)</td>
<td>4</td>
</tr>
<tr>
<td>On-site (6pm-12am)</td>
<td>1</td>
</tr>
<tr>
<td>Travel</td>
<td>0</td>
</tr>
<tr>
<td>Off-site Report Preparation</td>
<td>0</td>
</tr>
<tr>
<td><strong>Subtotal:</strong></td>
<td><strong>6</strong></td>
</tr>
</tbody>
</table>

#### Pat "Data-Migration-User"

**Recertification**

<table>
<thead>
<tr>
<th>Task</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-Survey Preparation</td>
<td>0.00</td>
</tr>
<tr>
<td>On-site (12am-8am)</td>
<td>0.00</td>
</tr>
<tr>
<td>On-site (8am-6pm)</td>
<td>0.00</td>
</tr>
<tr>
<td>On-site (6pm-12am)</td>
<td>0.00</td>
</tr>
<tr>
<td>Travel</td>
<td>0.00</td>
</tr>
<tr>
<td>Off-site Report Preparation</td>
<td>0.00</td>
</tr>
</tbody>
</table>

---

**Figure 81:** My Time / Team Time Tab in CMS-670 Section – Example
5.2.7.5 Merge Citations (Done by Team Coordinator)

Citations can be merged when certain criteria are met for a particular survey for a provider. If multiple surveyors document similar findings for the same citation, all findings can be merged by the team coordinator. The key criteria consist of the following:

- There must be more than one citation and it must come from two different sources.
- All citations are marked as ‘writing complete’, see callout 2 in Figure 82 below.
- All surveys must have an exit day filled in. The user will get an error message if the survey does not have a start and exit date, even if writing is complete,
- For the user to merge citations they MUST BE the designated Team Coordinator for the merge function to work properly.

Each surveyor’s findings will be displayed in the citation text section. To merge findings, arrange the order of the text by using the arrows, and select ‘Merge Citation Text’. This button will only be enabled for the team coordinator.

The order of the text can be rearranged by using the up and down carat arrows in the headings. Select ‘Merge Citation Text’ and confirm to merge. The Merged Citation will be shown. To view the Merged Citation, select View. Select Show Original Citation Text to view the individual users’ citation texts. They can be viewed, but no longer edited.

Select Edit to edit the merged citation text, see callout 3 in Figure 82 for example.

![Figure 82: Citations Ready for Merge in Survey - Example](image)

5.2.7.5.1 Merge Findings - Citation

From the ‘Citations’ page the user can select the blue links to display the citation overview page, see callout 1 in Figure 83 below. Note that the order of the findings can be rearranged by selecting the up and down carat arrows located in the boxes, see callout 2 in Figure 83. Select the ‘Merge Finding’ button and confirm to merge the citation findings, see callout 3 in Figure 83.
Upon selecting the ‘Merge Findings’ button a dialog box will drop down that warns the user that the citation writing will no longer be editable once the findings are merged, and to verify the user’s intent, see callout 1 in Figure 84 below.

Figure 84: Merge Findings Warning – Example

5.2.7.5.2 Merged Citation Overview

Selecting the ‘Merge’ button will join the citation information into a single finding. The user can confirm the merge by selecting the citation overview section and refer to the citation status box, see callout 2 in Figure 85 below, which will indicate ‘Merge in Progress’.

The user can also view the other citation details as well as make further edits if required, see callout 3 in Figure 85.
Figure 85: Citation Overview - Merge Findings – Example

5.2.7.5.3 Edit Citation Overview

Selecting the ‘Edit’ button, see callout 3 in Figure 85 above, will take the user to the ‘Edit Citation Overview’ page, see callout 1 in Figure 86 below, and allow you to revise the citation, see callout 3 in Figure 86. Be sure to ‘Save’ prior to exiting the section, see callout 3 in Figure 86.

Figure 86: Edit Citation Overview – Example

5.2.8 Letters

Letters and attachments can be added in several locations within iQIES and can be tied to providers, surveys, intakes, and enforcements. If the letter is related to the survey, or the user
wishes to review or add a letter applicable to the survey, navigate to the ‘Letters’ section, see callout 1 in Figure 87 below, within the survey and select ‘Add Letter’, see callout 2 in Figure 87.

If previous letters have been included, they will be displayed in the list, see callout 3 in Figure 87.

Note that in the example shown in Figure 87, there is one existing letter for this survey. The ‘Actions’ link will provide a drop-down box with additional editing options, see callout 4 in Figure 87.

Figure 87: Add or Edit Letter in Survey -Example

Once you have navigated to and selected the ‘Add Letter’, they will be directed to the ‘Letter Overview’ page.

From there you can enter information about the letter, however only the letter name is required, see callout 1 in Figure 88 below.
Figure 88: Letter Overview Page – Survey – Example

You can add the Federal / State Licensure standing by checking the appropriate box, see callout 2 in Figure 88 above.

If you are satisfied with the details of the letter, you can ‘Save’ or ‘Cancel’ the information, see callout 3 in Figure 88 above.

Selecting the ‘Save’ button will generate a new page that provides an overview of the letter details. In some cases, you may get a message stating that the citation is ready to be locked, see callout A in Figure 89 below. Follow the directions for locking citations and initiating the POC.

In addition, the user can choose to ‘Add Attachments’, ‘Add Recipients’, or ‘Delete Letter’, see callout 1, 2, and 3 in Figure 89.

The user can also choose to ‘Edit’ any of the overview information, see callout 4 in Figure 89.
5.2.9 Notes

Existing notes can be reviewed by selecting the ‘Note’ section in the ‘Basic Information’ column, see callout 1 in Figure 90 below. Or new notes can also be added to the survey by selecting the ‘Add Notes’ button in the section.

Notes can be added at any time and are available for you to view, see callout 2 in Figure 90. You can enter notes and select ‘Save’ before exiting, see callout 3 in Figure 90.
Figure 90: Add Notes to Survey – Example

Once the note is saved it will be recorded with the user’s name and time stamp, see callout 1 in Figure 91 below. The user can also add more notes, see callout 2 in Figure 91. Additionally, you can edit or delete the note, see callout 3 in Figure 91.

Note: Only the user who created the note can edit it.

Figure 91: Manage Survey Notes – Example
5.2.10 Attachments

While letter templates are not currently available at this time, digital copies of images and letters can be uploaded as attachments to a survey.

From the Basic Information column select ‘Attachment’, see callout 1 in Figure 92 below. By selecting the ‘Add Attachments’ button in the new window information about the attachment can be added.

The ‘Select File’ will open a file search and the file can be selected, see callout 2 in Figure 92. The types of supported file formats are listed below the ‘Select File’ button. A brief description of the file can be provided, see callout 3 in Figure 921.

Select the ‘Save’ button before leaving the page, see callout 4 in Figure 92.

![Figure 92: Add Attachments to Survey – Example](image)

5.2.11 Survey Closed Status

When the survey is completed, and all necessary corrections have been made, the survey is now ready to be closed. Navigate to the survey ‘Basic Information’ page, see callout 1 in Figure 93 below, and select ‘Edit’, see callout 2 in Figure 93.
Figure 93: Survey Complete and Ready to be Closed - Example

Selecting ‘Edit’ will reopen the ‘Basic Information’ page, see callout 1 in Figure 94 below. From here the survey status can be changed to ‘Close’, see callout 2 in Figure 94.

Select ‘Save’ before exiting, see callout 3 in Figure 94.
Figure 94: Closed Status for Survey – Example

Depending on the survey outcome, this provider can continue to successfully provide healthcare service without lapse.

END OF SECTION 5
6. Managing Intakes

6.1 How to Manage Intakes

There are two types of Intakes:

- **Complaint** - A complaint is a report made to the SA or CMS Office by anyone other than the administrator or authorized official for a provider or supplier that alleges noncompliance with Federal and/or State laws and regulations.

- **Incident** - An incident is an official notification to the SA or CMS Office from a self-reporting provider or supplier (i.e., the administrator or authorized official for the provider or supplier).

Additionally, there are also subtypes (for Complaints) of Intakes that are not discussed in this manual. The user should refer to other CMS documentation that describes these subtypes in greater detail.

6.1.1 Recent Intakes

Existing intakes can be viewed and edited by navigating to the provider you are working on and viewing the ‘Provider History’ or selecting the Intakes tab in the ‘Search’ window.

Note that currently, only Home Health Agencies are available in iQIES.

From the ‘Provider History’ page, see callout 1 in Figure 95 below, you can view recent intakes.

The three most recent intakes will show up on the Provider History page automatically under Recent Intakes, see callout 2 in Figure 95.

New intakes can also be added by selecting the ‘Add Intake’ button, see callout 3 in Figure 95. Selecting ‘Add Intake’, will open a new intake page. See section 6.1.2 for directions on adding intakes.

If there are more than three intakes, an option to ‘View All Intakes’ will be displayed below the ‘Recent Intakes’ list under ‘Actions’, see callout 4 in Figure 95. To see all intakes, click on the ‘View All Intakes’ button and a complete list will be displayed.

To review an existing Intake, select any of the blue links, see callout 5 in Figure 95.
6.1.1.1 Search for Provider Intakes

The user can view the three most recent intakes from the ‘Provider History’ page, or as described above, if there are more than three all intakes can be viewed. At any time, you can also view the individual intakes by selecting the blue links under the ‘Intake ID’ or ‘View’ headings, see Figure 95 above. You can also type in a specific Provider by name, ID or CCN.
number, see callout 2 in Figure 96 below. Selecting the ‘Show Advanced Search’, see callout 3 in Figure 96, will allow the user to provide more detailed search options.

Additionally, by clicking on the ‘Intakes’ tab in the Search window, see callout 1 in Figure 96, a list of a Provider’s complaints and incidents will be shown in the Recent Intakes table if they currently exist.

Figure 96: View Recent Intakes Tab in Search – Example

6.1.2 Add a New Intake

Adding a new intake can be achieved from the ‘Provider History’ page, see callout 1 in Figure 96 above. When you select the ‘Add Intake’ button you will be taken to the intake’s basic information page, see callout 1 in Figure 97 below.

You must select the ‘Intake Type’, Complaint or Incident, see callout 2 in Figure 97. Note that the ‘Intake Start Date’ and the ‘Intake Start Time’ will both auto-populate based on the current date and time that it is created.

Before exiting the ‘Basic Information’ page select ‘Save’, see callout 3 in Figure 97.
Figure 97: Intakes Type Selection – Example

Upon selecting ‘Save Section’, see callout 4 in Figure 97 above the user will be taken to a view page of the intake, starting on the ‘Basic Information’ page that has just completed (above).

The new intake is given an ‘Intake ID’, which is indicated in the header of the page, see callout 1 in Figure 98 below.

You can also edit the intake page by selecting the ‘Edit’ button, see callout 3 in Figure 98.

An example of a completed intake for an incident for a provider is illustrated in Figure 98.

Note that the basic information page for a complaint will be similar.
6.1.2.1 Intakes – Basic Information Page

The Basic Information page allows you to access additional pages related to the complaint / incident. These pages have additional information. The additional pages are:

- Responsible Staff
- Parties Involved
- Allegations
- Triage
- Survey
- Letters
- Notes
- Attachments

6.1.2.2 Responsible Staff

Responsible staff are any staff that may work on the case. When a user performs certain functions within the intake, their name may be added as a responsible staff member. The user will be added by default for creating the intake. A specific person who is listed can be deleted at any time by selecting ‘Delete’ next to their name, see callout 3 in Figure 99 below.

The responsible staff table will initially populate with members from the provider’s state. Select the ‘Delete’ link to erase the responsible staff list, see callout 3 in Figure 99.

An example of ‘Responsible Staff’ for Complaint #248950 is shown in Figure 99.
6.1.2.2.1 Adding Responsible Staff

Select ‘Add Staff’ button, see callout 2 in Figure 99 above, to add more members and where a staff member can be marked as the primary member. A new window will appear that allows you to search for specific names of responsible staff, see callout 1 in Figure 100 below. You can select the appropriate staff by clicking the box next to each name, see callout 2 in Figure 100. Save before exiting, see callout 3 in Figure 100.
NOTE:

The user can either chose a staff member from the list, see callout 1 in figure 101 below, and select ‘Save’ or, if no staff member is needing to be added, select ‘Cancel’. If the user tries to ‘Save’ without selecting a staff member, they will be prompted with the following error message, see callout A in Figure 101.
6.1.2.3 Parties Involved

The user can add and manage the parties involved with the Intake for both Incidents and Complaints for the following Involvements:

- **Complainant** (for Complaints only)
- Alleged perpetrator
- Person affected
- Other party

See callout 1 in Figure 102 below. Select the involvement, see callout 2 in Figure 102. Indicate if the person involved anonymous or not but selecting the appropriate box, see callout 3 in Figure 102.

**NOTE:**

The ‘Complainant’ and ‘Person Affected’ can be anonymous. However, you cannot add multiple anonymous persons affected or complainants.
6.1.2.3.1 Add Parties Involved

Selecting the ‘Add Party’ button, see callout 4 in Figure 102 below, will open a new page depending on the involvement that was chosen in the ‘Add Parties Involved’ page. The user should proceed to enter all the known information, see callout 1 in Figure 102.

![Figure 102: Adding an Involved Party for Complainant - Example](image)

6.1.2.4 Allegations

A substantiated allegation is an accusation that is verified by evidence. An allegation is considered substantiated based on the finding about the individual or specific situation named by the complainant in his or her allegation; or other residents or patients reviewed or similar situations, even if the noncompliance was corrected for the specific individual(s) named by the complainant in the allegation.

An unsubstantiated allegation is an allegation that cannot be verified by evidence. The State reviews all allegations of resident neglect and abuse and misappropriation of resident property regardless of the source of the complaint.

6.1.2.4.1 How to add Allegations

The user can navigate to the ‘Allegations’ section, see callout 1 in Figure 103 below, where they will be prompted with an ‘Add Allegation’ page, see callout 2 in Figure 103 below. You are expected to fill-in all required fields marked with an asterisk (*). In this case, the required fields are category and allegation details. The allegations cannot be saved unless these fields are filled in, see callout 3 in Figure 103.
Note that multiple allegations can be added to an individual intake. Also, a category and allegation details are required to ‘Save’ the allegation. See callout 2 in Figure 103.

Upon saving, the summary page of the ‘Allegation’ will be displayed. The user can edit the allegation, see callout 1 in Figure 104 below, or select the ‘Return to Allegations Overview’ page, see callout 2 in Figure 104. Once you return to the ‘Allegations Overview’ page, you can add another allegation, like in the instructions above.

Figure 103: Adding an Allegation – Example

Upon saving, the summary page of the ‘Allegation’ will be displayed. The user can edit the allegation, see callout 1 in Figure 104 below, or select the ‘Return to Allegations Overview’ page, see callout 2 in Figure 104. Once you return to the ‘Allegations Overview’ page, you can add another allegation, like in the instructions above.
Figure 104: Allegation Review Page – Example

6.1.2.5 Triage

The ‘Triage’ section, see callout 1 in Figure 105 below, is typically used to indicate the intake’s priority, and whether it needs a referral or survey action. The triage information can be edited prior to sending to CMS for approval, see callout 2 in Figure 105.

Select the ‘Triage’ section on the left side of the Intake page. Fill in the information.

Note that ‘Priority Level’ is required. Save. After you save you will be taken to the triage page to review.
When you select the 'Edit' button you will be taken to the 'Edit Triage' page where key triage information entered can be edited, see callout 1 in Figure 106 below.

Note that all required fields are marked with an asterisk (*), see callout 2 in Figure 106.

Be sure to indicate that the triage is complete, the user can mark the 'Triage Complete' checkbox, see callout 3 in Figure 106.

Upon selecting 'Save', see callout 4 in Figure 106, you will be brought to the ‘Triage’ section main page.
Figure 106: Triage Completion Date – Example
Upon selecting ‘Save’, see callout 4 in Figure 106 above, you will be taken to the ‘Triage’ section main page and a green notification box will appear with the following message:

“A notification has been sent to CMS to request survey approval”. See callout A in Figure 107 below. Select ‘Edit’ to update the triage, see callout 1 in Figure 107.

**NOTE:**

If the user indicates that a referral or survey is needed, additional fields will appear.

If a survey action or offsite investigation is required, you can add a survey due date. Enter a date yourself or have iQIES calculate the due date by selecting the Enter calculated date checkbox.

The survey due date can be calculated from the intake start date, the triage completion date if available, or the CMS Office approval date if available. Select if you want the date calculated
based on calendar days or business days. Enter how many days the survey team needs to investigate the intake. Select ‘Accept Date’ to put this date in the ‘Survey Due Date’ field.

**NOTE:** If the user indicates that a referral or survey is needed, additional fields will appear.

### 6.1.2.6 Open Survey

The associated survey for the intake can be viewed by selecting survey in the section field, see callout 1 in Figure 108 below. The key survey information is displayed, see callouts 2 and 3 in Figure 108. Should the user want to review the survey or if the associated intake requires edits select the ‘Edit’ button to open the survey ‘Basic Information’ page. If the user has permission, they can edit the open survey, see callout 4 in Figure 108.

---

**Figure 108: An Intake Required Survey Action – Example**

### 6.1.2.7 Letters

Like the survey process, letters and attachments can be added in several locations within iQIES and can be tied to providers, surveys, intakes, and enforcements. By selecting the ‘Letters’ section from the left directory, you will be directed to the ‘Intake Letters’ page.
NOTE:
If previous letters for an intake have been included, they will be displayed in a list on the ‘Letters’ page. In this case, to add or review a letter applicable to the provider, navigate to the ‘Letters’ button and select ‘Add Letter’, see callout 1 in Figure 109 below.

Figure 109: Intake Letters Page – Example

6.1.2.7.1 Letter Overview Page

Selecting the ‘Add Letter’ button will open the ‘Letter Overview’ page, see callout 1 in Figure 110 below.

This page provides the user with opportunities to add information about the letter, however only the letter name is required, see callout 2 in Figure 110.

Be sure to ‘Save’ to record letter, see callout 3 in Figure 110.
Figure 110: Add Intake Letter Overview – Example

If the user is satisfied with the details of the letter, you can ‘Save’ or ‘Cancel’ the information. Selecting the ‘Save’ button will generate a new page that provides an overview of the letter details, see Figure 111 below.

You can make changes to the letter by selecting the ‘Edit’ button, see callout 1 in Figure 111.

In addition, you can choose to ‘Add Attachments’, ‘Add Recipients’, or ‘Delete Letter’, see callout 2 in Figure 111.

The user can also choose to select the ‘Return to Letters’ to go back to the letters page. Note that any letters that have been recently added will now appear in the letters listing.
Like the survey process, ‘Notes’ can be added in several locations within iQIES and can be tied to providers, surveys, intakes and enforcements.

In this case, to add or review notes applicable to the provider, navigate to the ‘Notes’ section, see callout 1 in Figure 112 below, a new page will open for you to enter information, see callout 2 in Figure 112 below.

Be sure to ‘Save’ before exiting, see callout 3 in Figure 112.
6.1.2.9 Attachments

While letter templates are not currently available at this time, digital copies of images and letters can be uploaded as attachments to an intake by selecting the ‘Attachments’ button in the ‘Basic Information’ section. Note that existing attachments may also be displayed.

6.1.2.9.1 Add Attachments to an Intake

To add attachments related to this intake, when you open the attachments page, see callout 1 in Figure 113 below, you can select a file with the ‘Select File’ button, see callout 2 in Figure 113 below. The types of supported file formats are indicated below the ‘Select File’ button.

Then provide a brief description of the file being attached, see callout 3 in Figure 113.

Selecting the ‘Save’ button, see callout 4 in Figure 113, will take you back to the ‘Attachments’ page, where you can do further edits, downloads, or add more attachments.
6.1.2.9.2 **Link an Intake to a Survey**

An intake can be connected to a survey in a few ways. Two common ways are as follows:

1. Add a Survey on the Provider’s Profile Page
2. Link to a Survey in the Intake’s Survey Section

These options will be briefly discussed below.

6.1.2.9.3 **Add a Survey on the Provider’s Profile Page**

From the provider’s profile page, you can select ‘Add Survey’ under ‘Recent Surveys’, see callout 1 in Figure 114 below. Selecting this button will take you to the ‘Provider’s Basic Information’ page.
When you are on the ‘Basic Information’ page, see callout 1 in Figure 115 below, connect the survey to your intake by selecting the ‘Complaint’ box in the ‘Survey Categories’ section, see callout 1 in Figure 115 below.

Select the ‘Complaint’ from the ‘Open Intakes to Include in Complaint Survey’*, see callout 2 in Figure 115. The ‘Survey Status’ dates can also be included if known see callout 3 in Figure 115.

If you want to view more information about the intake, select its link, see callout 4 in Figure 115.

When the desired intake has been selected, save the survey, e.g., ‘Save Basic Information’ button, see callout 5 in Figure 115.
Figure 115 - Select the Intake’s Information When Adding the Survey - Example

6.1.2.9.4  **Link to a Survey in the Intake’s Survey Section**

From the ‘Provider History’ page navigate to the Intake you are working on and open the link, see callout 1 in Figure 116 below.
In the survey section, see callout 1 in Figure 117 below, the provider’s open surveys will be listed under ‘Survey Status’. Select the ‘Survey ID’ to view the survey, in the example shown it is ‘Survey ID’ #A8FF8-H1, see callout 2 in Figure 117.

Select ‘Edit’ to get to the edit page and link the survey to the intake, see callout 3 in Figure 117.
On the survey ‘Basic Information’ page, you can select the intake from the open intakes to include from the ‘Open Intakes to Include in Complaint Survey’ category, see callout 1 in Figure 118 below. You must also select the ‘Survey Categories’, ‘Regulation Sets’, and other required information as indicated with the fields that have an asterisk, see callout 2 in Figure 118.

Make sure to ‘Save’, see callout 3 in Figure 118.
Figure 118 - Select the Intake to Include in the Complaint Survey - Example

END OF SECTION 6
7. Managing Enforcements

Enforcements result from the issuance of a CMS-2567 to an entity that indicates there is non-compliance with the regulations. Enforcements help to ensure that providers and suppliers comply with Federal regulations. Because enforcement actions can have time elements, it is very important that enforcements are carefully managed.

The user needs to be aware that an enforcement cannot be implemented until a survey has been submitted for a particular provider, and that provider is certified.

This section will discuss how the user reviews existing enforcements, surveys, and other documentation related to the enforcement, as well as how to create a new enforcement, beginning with the creation of the necessary survey and other steps and processes.

The users iQIES role will determine their ability to add or edit enforcements as well as the level of available detail in the enforcement process. Enforcements are monitored by CMS and each respective state to verify if the provider has cleared the enforcement within the allotted timeframe.

There are several ways for the user to find an existing enforcement record. The three most recent enforcement cases for a provider will be shown on the ‘Provider History’ page under ‘Recent Enforcements’.

A second way is to select the ‘Enforcements’ tab on the Search screen, see callout 1 in Figure 119 below. All enforcement cases will be listed.

To find a specific enforcement record, you can enter information, specifically Case ID, CCN, or provider name, see callout 2 in Figure 119. Finally, you can use the advanced search option to narrow down the search.

To access a specific enforcement record, click on the enforcement number, see callout 3 in Figure 119.
7.1.1 Recent Enforcement Review

Once you have selected a specific enforcement case, the system will take you to the basic information page for that enforcement, see callout 1 in Figure 120 below. You can review any of the surveys added to the case by selecting the blue links, see callout 2 in Figure 120.

The user can also make edits to the basic information, including the enforcement status and enforcement type, see callout 3 in Figure 120.

You can also select the 'View Provider History Report' button for a more comprehensive view of the provider's citation history over time, see callout 4 in Figure 120.

NOTE:

In the example below, note that 'F' in the iQIES 'Enforcement ID', see callout 5 in Figure 120, indicates that this is a federal enforcement type. If this were a state enforcement, the ID would include an ‘S’ after the hyphen, or in some cases a combination of state and federal could be displayed.
7.1.1.1 Enforcement – Basic Information Page

Selecting the Case ID or any of the blue links, see callout 3 in Figure 120 above will display the Basic Information page about the listed enforcements of that provider. Under the Basic Information list on the left, additional information about the enforcement data can be viewed, if it has been entered and is available.

Enforcement details are organized into the following sections:

**Basic Information**
- The overview of an enforcement, including the status type, dates, and added surveys.
- Once the Basic Information is entered, the remaining sections will be enabled.

**Responsible Staff**
- Where state agency and CMS staff who are responsible for enforcement activities are added and managed.
- When a user performs certain functions within the enforcement their name may be added as a responsible staff member.

**Sanctions**
- Where you can add and manage sanctions and enforcement actions, including Civil Money Penalties (CMP’s), training, transfer, suspension, terminations, and other remedies.

**Civil Money Penalty**
- Where you can add and manage Civil Money Penalty (CMP) amounts and payment details for a CMP sanction.
Appeals
- Where survey and enforcement remedy appeal and court hearing information are added and managed.

Letters
- Attached letters related to the enforcement.

Notes
- Notes can be created and are available for other users to view.

Attachments
- All supplemental documentation for the enforcement.

Each of these sections will be discussed in greater detail later in this manual.

7.1.1.1.1 View Provider History Report - Enforcement

Selecting the select View Provider History Report, see callout 4 in Figure 120 above, will navigate you to the Provider History Report page that provides lists such as, but not limited to the following:

- Standard Health Survey Deficiency Summary
- Standard Health Survey Deficiency Comparison
- Health Complaint Survey Information
- Health Complaint Survey Deficiency Comparison

More detailed information about Provider History Reports is presented in Section 4.1.1.7 of this manual.

7.1.1.2 View all Enforcements

Note that the Recent Enforcements list will only display up to three (3) recent enforcement cases. If the provider has more than three cases, the user can view all Recent Enforcements by selecting the View all Enforcements link, see callout 1 in Figure 121 below.

Clicking on any of the blue links, see callouts 2 in Figure 121, will take you to the respective page for that provider. Selecting any of the starting survey links, see callout 3 in Figure 121, will allow you to make changes to the basic information page, or add and remove added surveys for that enforcement case.
When the ‘View all Enforcements’ link is selected, all available Enforcements will be listed, see callout 1 in Figure 122 below.

To view the details of any of the Case ID, Starting Survey, or Actions items select any of the specific survey links in blue, see callouts 2 in Figure 122.

7.1.2 Add an Enforcement

New enforcement cases cannot be added unless the provider is certified, a survey with deficiencies exits, and that survey has citations locked and has not been added to another enforcement case. Once these conditions are met, the user can generate a new Enforcement.
by selecting the ‘Add Enforcement’ button under the ‘Provider History’ screen, see instructions below for adding and enforcement.

If the ‘Add Enforcement’ button is disabled, that indicates that the provider does not have an open survey with added citation tags. This section will demonstrate a typical process to ‘Add an Enforcement’, beginning with the’ Add Survey’ requirement.

7.1.2.1 Add a New Enforcement

To begin a new enforcement case, navigate to the ‘Provider’s History’ page. Verify that the provider is certified see callout 1 in Figure 123, below. Select the ‘Add Enforcement’ button, see callout 2 in Figure 123.

![Figure 123: Add Enforcement - Example](image)

A list of available surveys will be displayed in the ‘New Enforcement’ page, see callout 1 in Figure 124 below.

Select the enforcement type, see callout 2 in Figure 124. All required fields are marked with an asterisk (*).

Select one or more surveys by marking their corresponding checkboxes, see callout 3 in Figure 124, and if adding multiple surveys, indicate the starting survey with the radio selector, see callout 4 in Figure 124.

Only one survey can be designated as a starting survey. Also, note that if the deficiency column indicates “Memo,” it means that the only citation on the CMS-2567 is the ‘0000 – Initial Comments’ tag.
Upon selecting the ‘Save Section’ button, see callout 5 in Figure 124 above, you will be taken to the new enforcement ‘Basic Information’ page and a new enforcement will be assigned, see callout 1 in Figure 125 below. The ‘Basic Information’ page, see callout 2 in Figure 125 will indicate the following information:

- Status
- Enforcement Type
- Transferred to CMS Location (Note that this field can only be filled-in by state agency)
- Added Surveys
- Cycle Start Date

Note that the ‘Starting Survey’ that was selected will be listed in the ‘Added Surveys’ column and the ‘Cycle Start Date’ should also be noted, see callout 3 in Figure 125.

All Surveys that have been added to the enforcement will be displayed in the ‘Added Surveys’ column on the new enforcement ‘Basic Information’ page.

In addition, you can select the ‘View Provider Enforcement Report’ button to be taken to the provider history report page, see callout 4 in Figure 125. You will have the option to view all of the citations and surveys for the provider, or you can select ‘Save to My Reports’ or ‘Download’.
Should you want to edit any of the ‘Basic Information’ you can do so by selecting the ‘Edit’ button.

7.1.3 Responsible Staff for New Enforcement

Selecting the ‘Responsible Staff’ section, see callout 1 in Figure 126 below, will list the primary staff members assigned to the enforcement case, see callout 2 in Figure 126.

New staff can be added, see callout 3 in Figure 126.

Staff can also be deleted, see callout 4 in Figure 126.

If you want to add staff select the ‘Add Staff’ button, see callout 3 in Figure 126 above, and a new window will drop down that allows the user to create new responsible staff and search for
specific names of responsible staff, see callout 1 in Figure 127 below. Input either the first or last name, see callout 2 in Figure 127, then select the ‘Search’ button, see callout 3 in Figure 127. Note that both first names and last names can be included in the search, and if the full name is unknown, the user can search by using partial names as well.

When the user performs certain functions within the enforcement, their name may be added as a responsible staff member. Note that the user creating the enforcement case is added as a responsible staff by default.

![Add Responsible Staff for New Enforcement Page – Example](image)

**7.1.3.1.1 Managing the Responsible Staff**

If staff have already been assigned to the enforcement case, they will be displayed when accessing the ‘Responsible Staff’ page, see callout 1 in Figure 128 below.

Responsible primary staff can be added by selecting the button next to a staff person’s name see callout 2 in Figure 128. Staff can be deleted by selecting the ‘Delete’ link, see callout 3 in Figure 128.

If you want to add additional staff to the enforcement case, select the ‘Add Staff’ button, see callout 4 in Figure 128.
Once ‘Add Staff’ is selected, the user cannot ‘Add Staff’, or if you attempt to ‘Add Staff’ when you are on the ‘Add Responsible Staff’ page, and you do not make any selections, you will receive the following warning when you select the ‘Save’ button: ‘No staff members have been selected. Please make at least one selection to proceed’. See callout A in Figure 129 below. You will need to make at least one selection from the list of staff, see callout 1 in Figure 129, before you can ‘Save’ and exit the page, see callout 2 in Figure 129.
7.1.4 Sanctions

Any provider, individual or organization which is excluded from federal healthcare programs is said to have been “sanctioned”. Sanctioned individuals and entities are barred from participating in federal healthcare programs such as Medicare and Medicaid. You will need to add a record for each sanction that is imposed.”

7.1.4.1 Add Sanctions

From the ‘Sanctions’ section, see callout 1 in Figure 130 below, you can add and manage enforcement actions against a provider, including civil money penalties, in-service training, directed plans of correction, suspension of payment, termination, and other remedies.

All required fields are marked with an asterisk (*), see callout 2 in Figure 130. Once the user selects a sanction type, in this case a ‘Civil Money Penalty’ has been chosen, the fields may change accordingly. Be sure to Save, see callout 3 in Figure 130. Note that because a civil money penalty was chosen, upon saving, the ‘Civil Money Penalty’ section will now be accessible in the section list.

Figure 130: Add Sanction Page – Example

Selecting ‘Save’ will direct the user to the ‘Sanctions’ view page. From here, you can edit the sanction, see callout 1 in Figure 131 below. You can also add another sanction by selecting ‘Add Sanction’, see callout 2 in Figure 131.
Or you can delete the sanction, see callout 3 in Figure 131.

**NOTE:**
The user cannot add duplicate Sanction types.

### 7.1.5 Civil Money Penalty - Sanctions

If a civil money penalty sanction is added, as shown in Figure 131 above, the ‘Civil Money Penalty’ section will be enabled and the ‘Civil Money Penalty’ and ‘Appeals’ buttons will be highlighted, see callout 1 in Figure 132 below.

#### 7.1.5.1 Add / Edit / Manage Civil Money Penalty - Sanctions

From the ‘Civil Money Penalty’ (CMP) this section, see callout 1 in Figure 132, below, you can add, edit, and manage CMP amounts and payment details for a CMP sanction. The user must link the CMP to a survey using the Survey dropdown button, see callout 2 in Figure 132. After selecting the CMP Type, the user will have the option to enter additional payment details or link the CMP to the survey’s citation, see callout 3 in Figure 132.
A CMP cannot be linked to a survey if the survey does not have citations. Note that all required fields are marked with an asterisk (*) and must be filled in. Select ‘Save’ when you are done, see callout 4 in Figure 132.

Figure 132: Add Civil Money Penalty Page – Example

Upon saving a CMP page will be automatically generated that will display the CMP amounts and the applicable survey number and other related data, see callout 1 in Figure 133 below.

The user can also add more CMP’s by clicking the ‘Add CMP’ button, see callout 2 in Figure 133 or the CMP can also be deleted, see callout 3 in Figure 133.
Figure 133: Civil Money Penalty Review Page – Example

7.1.6 Appeal

In the ‘Appeal’ section, users can add and manage appeals and court hearing case information to the enforcement, see callout 1 in Figure 134 below.

7.1.6.1 Add Appeal

When adding an appeal, the ‘Appeal Type’, ‘Appealed Surveys’, and ‘Appealed Sanctions’ must all be entered and saved. Note that all required fields are marked with an asterisk (*), see callout 2 in Figure 134. Select ‘Save’ when you are done, see callout 4 in Figure 134.
Figure 134: Add Appeal to Enforcement – Example

Upon saving the user will be directed to the appeal page where they will have the opportunity to review the appeal, see callout 1 in Figure 135 below.

You can also edit the appeal, see callout 2 in Figure 135, add additional surveys; see callout 3 in Figure 135, or you can ‘Add a Legal Action’ or an ’Injunction’, see callout 4 in Figure 135.

Once appeal information is added, the status of the enforcement will change to ‘Open – Under Appeal’.
7.1.6.2 Add Legal Action on Appeal Page

The ‘Add Legal Action’ page will be displayed upon selecting the ‘Add Legal Action’ button and once the appeal information is added, the status of the enforcement will change to ‘Open Under Appeal’, see callout 1 in Figure 136 below.

Note that all required fields are marked with an asterisk (*), see callout 2 in Figure 136.

If hearing details are known include that information, see callout 3 in Figure 136.

Select ‘Save’ when you are done, see callout 4 in Figure 136.
7.1.7  Letters

Letters to the enforcement case can be managed by selecting the Letters section from the enforcement section list, see callout 1 in Figure 137 below. To include a letter, select the ‘Add Letter’ button, see callout 2 in Figure 137.
Selecting ‘Add Letter’, see callout 2 in Figure 137 above will direct you to the letter overview page, see callout 1 in Figure 138 below, where information about the letter can be provided. All required fields are marked with an asterisk (*). Select ‘Save’ when you are done, see callout 3 in Figure 138.
7.1.8 Notes

Notes can also be included in the enforcement by selecting the ‘Notes’ from the section list, see callout 1 in Figure 139 below. Include any relevant notes applicable to the enforcement, see callout 2 in Figure 139. Be sure to ‘Save’ before exiting, see callout 3 in Figure 139.

![Figure 139: Add Notes – Enforcement – Example](image)

7.1.9 Attachments

While letter templates are not currently available at this time, digital copies of images and letters can be uploaded as attachments to an enforcement by selecting the ‘Attachments’ button under the ‘Basic Information’ section.

The types of supported file formats are listed below the ‘Select File’ button. A brief description of the attached files can be included.

**NOTE:** The ‘Save’ button will highlight once a 'file' has been selected.

See Figure 140 for an example.
Figure 140: Attachments – Enforcement – Example

END OF SECTION 7
8. Training Guides

Each training guide referenced in this user manual represents a topic-specific feature or functionality in iQIES. They are living documents and maintained in Confluence. The links below provide the most up-to-date version of each training guide.

1. User Roles Matrix: Shows all available iQIES roles and their permissions in the system.
2. iQIES Onboarding Guide: Provides an overview of iQIES, explains the use of Remote Identity Proofing, and presents instructions for requesting a user role in iQIES.
3. iQIES Security Official: Manage Access Manual: Outlines the steps a Security Official needs to take to approve or reject requests for access to iQIES from additional users, so they can view information or perform an action, such as submitting assessments on behalf of the organization.
4. Managing User Information: Provides instructions for managing HARP user ID, password, and challenge questions, as well as managing the user profile in iQIES.
5. Reports: Provides instructions for managing iQIES reports, and a list of available reports.
7. Patients: Provides instructions for managing patients by provider list, listing a provider’s patients, searching for patients, editing patients, and adding new patients.
8. Accrediting Organizations and Deeming Information: Provides instructions to search for providers, add accrediting organization surveys, and add an accrediting organization to a provider.
9. CMS Location Office Approval: Provides instructions for CMS location(s) office users to manage provider’s deeming information, approve complaint surveys and offsite investigations, and approve accrediting organization surveys.
10. Administration: Provides instructions to users who have access to the Administration tab in iQIES. Includes steps to manage ICD-10 codes and key management.
9. Troubleshooting and Support

For troubleshooting and support, go to iQIES Technical Support https://qtso.cms.gov/.
## 10. Appendix A: Record of Changes

### Table 2: Record of Changes

<table>
<thead>
<tr>
<th>Version Number</th>
<th>Date</th>
<th>Author/Owner</th>
<th>Description of Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.0</td>
<td>1/29/2021</td>
<td>Jon Fisher</td>
<td>Initial Draft sent out for comments on graphic quality of screen shots. Some comments from CMS received about content. Some revisions made.</td>
</tr>
<tr>
<td>0.1</td>
<td>3/12/2021</td>
<td>Jon Fisher</td>
<td>2nd Draft issuance of Sections 1-3 for review and comment from Semantic Bits SME’s and BA’s, and to incorporate comments from CMS for Initial Draft v0.0.</td>
</tr>
<tr>
<td>1.0</td>
<td>4/16/2021</td>
<td>Jon Fisher</td>
<td>First issuance of manual for CMS internal review and approval</td>
</tr>
<tr>
<td>1.1</td>
<td>4/23/2021</td>
<td>Jon Fisher</td>
<td>Minor revisions to figure numbers due to reconfiguration of Figure 1 per CMS comment and conversion of tables to 508 compliance requirements.</td>
</tr>
<tr>
<td>1.2</td>
<td>4/30/2021</td>
<td>Jon Fisher</td>
<td>Minor changes made from CMS comments made while updating the Training Modules.</td>
</tr>
</tbody>
</table>
## 11. Appendix B: Acronyms

Table 3: Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Literal Translation</th>
</tr>
</thead>
<tbody>
<tr>
<td>AO</td>
<td>Accrediting Organizations</td>
</tr>
<tr>
<td>AWS</td>
<td>Amazon Web Services</td>
</tr>
<tr>
<td>CARE</td>
<td>Continuity Assessment Record and Evaluation</td>
</tr>
<tr>
<td>CMP</td>
<td>Civil Money Penalty</td>
</tr>
<tr>
<td>CMS</td>
<td>Centers for Medicare &amp; Services</td>
</tr>
<tr>
<td>CNN</td>
<td>CMS Certification Number</td>
</tr>
<tr>
<td>CTA</td>
<td>Calls to Action</td>
</tr>
<tr>
<td>HARP</td>
<td>HCQIS Access, Roles, and Profile Management System</td>
</tr>
<tr>
<td>iQIES</td>
<td>Internet Quality Improvement Evaluation System</td>
</tr>
<tr>
<td>IRF</td>
<td>Inpatient Rehab Facility</td>
</tr>
<tr>
<td>LTCH</td>
<td>Long Term Care Hospital</td>
</tr>
<tr>
<td>PA</td>
<td>Patient Assessments</td>
</tr>
<tr>
<td>QIN-QIOs</td>
<td>Quality Innovation Networks-Quality Improvement Organizations</td>
</tr>
<tr>
<td>QMIR</td>
<td>Quality Measure Implementation and Reporting</td>
</tr>
<tr>
<td>S&amp;C</td>
<td>Survey &amp; Certification</td>
</tr>
<tr>
<td>SAFe</td>
<td>Scaled Agile Framework</td>
</tr>
</tbody>
</table>
## Appendix D: Referenced Documents

### Table 4: Referenced Documents

<table>
<thead>
<tr>
<th>Document Name</th>
<th>Document Location and/or URL</th>
<th>CMS Approval Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reports</td>
<td><a href="https://confluence.hcqis.org/pages/wordday/preview.action?fileName=Reports.docx&amp;pageId=86223694">https://confluence.hcqis.org/pages/wordday/preview.action?fileName=Reports.docx&amp;pageId=86223694</a></td>
<td>07/24/2020</td>
</tr>
<tr>
<td>Assessments</td>
<td></td>
<td>In Progress</td>
</tr>
<tr>
<td>Patients</td>
<td></td>
<td>In Progress</td>
</tr>
<tr>
<td>Providers</td>
<td></td>
<td>In Progress</td>
</tr>
<tr>
<td>Surveys</td>
<td></td>
<td>In Progress</td>
</tr>
<tr>
<td>Intakes</td>
<td></td>
<td>In Progress</td>
</tr>
<tr>
<td>Enforcements</td>
<td></td>
<td>In Progress</td>
</tr>
<tr>
<td>Letters Notes and Attachments</td>
<td></td>
<td>In Progress</td>
</tr>
<tr>
<td>Accrediting Organizations and Deeming Information</td>
<td></td>
<td>In Progress</td>
</tr>
<tr>
<td>Regional Office Approval</td>
<td></td>
<td>In Progress</td>
</tr>
<tr>
<td>Administration</td>
<td></td>
<td>In Progress</td>
</tr>
</tbody>
</table>
13. Appendix E: Approvals

The undersigned acknowledge that they have reviewed the user manual and agree with the information presented within this document. Changes to this user manual will be coordinated with, and approved by, the undersigned, or their designated representatives.

Table 5: Approvals

<table>
<thead>
<tr>
<th>Document Approved By</th>
<th>Date Approved</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name: &lt;Name&gt;, &lt;Job Title&gt; - &lt;Company&gt;</td>
<td>Date</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Name: &lt;Name&gt;, &lt;Job Title&gt; - &lt;Company&gt;</td>
<td>Date</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Name: &lt;Name&gt;, &lt;Job Title&gt; - &lt;Company&gt;</td>
<td>Date</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Name: &lt;Name&gt;, &lt;Job Title&gt; - &lt;Company&gt;</td>
<td>Date</td>
</tr>
</tbody>
</table>

END OF MANUAL