

Centers for Medicare & Medicaid Services

Internet Quality Improvement & Evaluation System (iQIES)

Survey and Certification (S&C)

Manage a Provider

User Manual

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1. Introduction

This user manual addresses the processes necessary to perform Survey & Certification (S&C) Provider functions in iQIES.

For information on other modules, refer to <u>Reference & Manuals</u> on QTSO.

1.1 Getting Started in S&C – Important Information to Know

Below is important general information about iQIES.

- Log in to iQIES at <u>https://iqies.cms.gov/</u> with Health Care Quality Information Systems (HCQIS) Access Roles and Profile (<u>HARP</u>) login credentials. Refer to the <u>iQIES Onboarding Guide</u> for further information, if necessary.
- All screenshots included in this manual contain only test data. Current screens in iQIES may differ from what is shown in screenshots below.
- Screenshots are dependent on user role and may not be an exact representation.
- Words highlighted in blue are clickable links.
- A red asterisk (*) indicates a required field.
- Blank fields may have a limited number of characters allowed in that field. If so, the character limit is shown on the bottom left. The blank fields may also be expanded. Click the two 45° parallel lines and drag to the right to enlarge the box. See *Figure 1, Expandable Field*.



Figure 1: Expandable Field

- iQIES times out after 30 minutes of nonuse and reverts to the login page.
 - iQIES remains up and active as long as it is in use.
 - iQIES gives a five-minute warning before timing out.
 - The session resumes at the last accessed page after reauthentication.
 - Be sure to save data regularly. Pages that require saving are noted in this document, and have a **Save** button on the page.
- iQIES uses a smart search. Once three letters/digits are typed in the search bar, results are shown based on the letters/digits entered. The more letters/digits entered, the narrower the search. If any of the results is the correct result, click the result to open.
- Review any notification banners. Some banners may have links to review further information; others may be a reminder of a task that must be completed. See *Figure 2, Notification Banner* and *Table 1, Notification Banner Color Descriptions.* These banners can be closed (X'd out) at any time.

If there are surveys that occured prior to the newly selected Cycle starting survey, please verify that these surveys still belong to the enforcement case.

Figure 2: Notification Banner

Notification Banner Color	Reason
Green	Action was successful
Blue	Informational only
Yellow	Warning. Review for information.
Red	Stop and review. The banner explains the actions must be taken.

Table 1: Notification Banner Color Descriptions

• Review any Tool Tips for additional information to perform an action. Hover over the information icon to see the tip. Tool Tips are in iQIES to communicate information. Look for the information icon. See *Figure 3, Tool Tip Icon.*

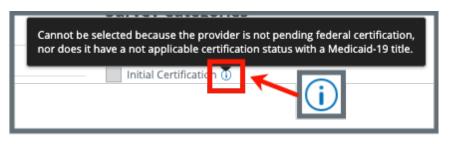


Figure 3: Tool Tip Icon

• Below are the supported browsers for access to iQIES. Be sure to keep your browser updated.

<u>Chrome</u> <u>Edge</u>

1.2 iQIES Service Center

The iQIES Service Center supports users working within the various iQIES components: S&C, Patient Assessment, and Reporting.

Assistance Accessing iQIES:	Contact the iQIES Security Official (SO) for your organization
Technical Support:	Contact the iQIES Service Center:
	Phone: 888-477-7876 (select Option 1) Email: <u>iQIES@cms.hhs.gov</u>
CCSQ Support Central:	Create a new ticket or track an existing ticket: <u>https://cmsqualitysupport.servicenowservices.c</u> <u>om/ccsq_support_central</u>
Idea Portal:	Feedback for future iQIES software development: <u>CCSQ Support Central</u> . Click Idea Portals and select Idea Portal.
More information on iQIES:	Refer to the <u>QIES Technical Support Office</u> (QTSO) and the <u>Quality, Safety, & Education</u> <u>Portal</u> (QSEP). Logging in to HARP may be required before accessing some documentation in QTSO and QSEP.
	iQIES reference materials include:
	 Links to Training Videos for providers Assessment Management User Manual Quick Reference Guides Onboarding Guide Managing User Information Other helpful iQIES material

iQIES training materials on QSEP include S&C Foundation Series Videos

1.3 Roles and Permissions

iQIES roles allow users to access information pertinent to their area of work. The examples provided in this document pertain to S&C and require a State Agency or Centers for Medicare & Medicaid Services (CMS) role with the capability to view or edit this information.

Permissions are ultimately governed by HARP access privileges. Contact the SO for your organization or the iQIES Service Center for issues relating to access and permissions. Refer to the <u>iQIES User Roles Matrix</u> for detailed information on roles.

For additional help, refer to <u>https://iqies.cms.gov/iqies/help</u> or click the help icon in the top right corner of the screen, see *Figure 4, Help Icon*, for further information.

Q Patt.

Figure 4: Help Icon

1.4 My Tasks Landing Page

- **Purpose:** My Tasks Landing Page is a tool used to track and display data for individual users. It consolidates information and processes into one area so that the user can see at a glance what actions must be performed.
 - 1.4.1 Log in to iQIES. The landing page displays the **My Tasks** tool. See *Figure 5, My Tasks Landing Page and Table 2, My Tasks Landing Page Detailed Callout*.
 - Note: The My Tasks landing page defaults to Active tasks. Click the drop-down menu and select Closed tasks to view completed tasks.

/ Tasks						
Providers	Surveys	Intakes	Enforcements			
Providers Tasks	(]				Expand All Tasks	Active tasks ~
Provider House of the Rising 1 Main St Anytown, Florida 879	() Ena	IQ0000002521599 ble Offline	Provider Type 🗧	Certification Status ÷	Assigned Tasks	
ASSIGNED TASK 👙		DUE DATE 👙	TASK ST	ATUS ¢		COMMENTS \$
Licensure Review		07/18/2025	То	Do	~	Þ
House of the Rising 9 1 Main St, #305 Anytown, Florida 879	FACID	PK394 IQ0000002521587 ble Offline	нна	Certified	Provider Maintenance, Licensure Re Approver	riew, Scheduling, Branch
ASSIGNED TASK 💲		DUE DATE 👙		TASK STATUS		COMMENTS \$
Branch Approver 07/11/2025		5	To Do	~	E	
Licensure Review		07/16/202	5	To Do	~	Þ
Provider Maintenanc	9	07/17/2025	5	То Do	~	F
Scheduling No information		tion	To Do	~	(±	

Figure 5: My Tasks Landing Page

Table 2: My Tasks Landing Page Detailed Callout

No.	Name	Description
а	Providers tab	Click each tab (Providers , Surveys , Intakes , Enforcements) to review the respective tasks. Not all tabs are available in all user roles. Click Enable Offline to enable the survey offline. For more details on how to enable offline, refer to <u>S&C</u> <u>User Manual: Offline</u> .
b	Expand All Tasks	This checkbox defaults to checked so users can see tasks assigned to them. Uncheck box to close task detail.
с	Provider	The provider address shows as a link directly under Provider . Click the link to go directly to the Provider Basic Information page.
d	ID	The provider CCN and FACID are shown. Click Enable Offline to enable the survey offline. For more details on how to enable offline, refer to <u>S&C</u> <u>User Manual: Offline</u> .
е	Provider Type	Shows the provider type (ASC, HHA, Hospice, Nursing Homes).
f	Certification Status	Shows certification status of the provider.
g	Assigned Tasks	Lists the assigned tasks.
h	Active/Closed Tasks	Toggle between Active and Closed tasks.
i	New	A blue New in an oval shape (badge) next to the Survey ID in the Survey tab indicates that the survey task's status is New .
j	COMMENTS	Add or review a comment. See <u>Comments</u> for details.

Notes:

• Click the iQIES logo on the top left of the screen or **Home** to return to the **My Tasks** landing page at any time. See *Figure 6, iQIES Logo*.



Figure 6: iQIES Logo

• If there are no tasks, then a message appears below the selected tab. See *Figure 7, No Active Tasks*, for an example from the **Providers** tab.

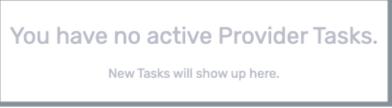


Figure 7: No Active Tasks

1.4.2 **Task Detail**: Tasks are shown by default. See *Figure 8, Task Status Details* and *Table 3, Task Status Details Detailed Callout*.

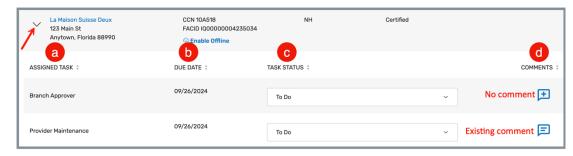


Figure 8: Task Status Details

Table 3: Task Status Details Detailed Callout

No.	Name	Description
а	ASSIGNED TASK	The name of the task assigned.
b	DUE DATE	The date the task is due, if available.
С	TASK STATUS	The task status. Task statuses are: To Do, In Progress, Complete .
d	COMMENTS	Comments. A + (plus sign) indicates a comment has not been left. See <u>step 1.4.3</u> .

1.4.3 Click the + to leave a comment. The side menu opens. See *Figure 9, My Tasks Comments.*

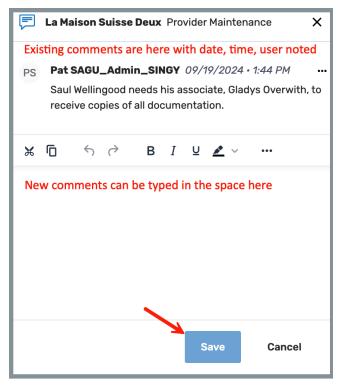


Figure 9: My Tasks Comments

1.4.4 Click **Save** to save comments. The side menu closes.

2. Manage a Provider Overview

A provider is any organization, institution, or individual that provides health care services to Medicare beneficiaries. Physicians, ambulatory surgical centers, and outpatient clinics are some of the providers of services covered under Medicare Part B.

This manual explains how to search, add, approve, or reject a provider, view and download reports, add buildings, multiple locations, branch addresses, operating details, additional contacts and explains certification and licensure and deeming information for Home Health Agencies (HHA), Ambulatory Surgical Centers (ASC), and Hospice provider types.

Contact the <u>iQIES Service Center</u> to delete a provider.

3. Search for a Provider

- 3.1 Go to **Survey & Certification** at the top of the iQIES home page. Click the arrow to open the drop-down menu.
- 3.2 Click **Search**. The **Search** screen opens. See *Figure 10, S&C Search*.

Note: The Providers tab is the default landing tab.



Figure 10: S&C Search

3.3 Select **Provider** or **DBA** (Doing Business As), **CCN** (CMS Certification Number) or **State Facility ID** (FACID) from the drop-down menu under **Search for Surveys**. See *Figure 11, Search*

Search		
Providers S	urveys Intakes	
earch for Providers		
Provider or DBA V Sea	arch	
Show Advanced Search	CCN State Facility	
Search Reset		

Figure 11: Search

- 3.4 Type search criteria.
- 3.5 Click **Search**. The provider information shows below. See *Figure 12, Provider Search Results*.

Note: Click **Show Advanced Search** for a more detailed search. Refer to step 3.7 for details.

Providers Surveys	Intakes Enf	orcements CM	PTS Cases		
Search for Providers					
Provider or DBA 👻 House of	the Rising Sun				
Search Reset	/				
Search Reset 1 - 10 of 44 Providers Provider	ID	O perating Status	Provider Type	Certification Status	Deemed Status
1 - 10 of 44 Providers	ID CCN 49K002 FACID IQ0000002489565			Certification Status Certified Medicaid - 19	

Figure 12: Provider Search Results

3.6 Click desired provider name under **Provider**. The **Provider History** window opens with a list of provider forms, surveys, intakes, and enforcements related to the provider. See *Figure 13, Provider History Page*.

View Provider History Re	View All Provider Re	eports					
Provider Forms							
Add Form -							
Form Name 🕴	Status 0	Related Survey(s)	Created Date 🕴	Last Updated 🕴	Track ID 🕴		Acti
CMS-1539	Complete	E0DA1-H1 🖾	03/29/2023	01/31/2024	E0DA1	100%	Form actio
CMS-1572	Complete	EODA1-H1 🗹	01/31/2024	01/31/2024	E0DA1	100%	Form action
CMS-1572	Complete	15A11A-H1 🖪	08/29/2023	01/31/2024	15A11A	0%	Form actio
						\rightarrow	View All Form
ecent Surveys							
Add Survey							
Add Survey							
Sets & Survey ID 🔅	Survey Type 💠	Survey Category 🗧	Exi	it Date 🗘 Status 🗧	Track ID	±.	Act
12B715-H1	Health	Validation Survey		Writing in pro	gress 12B715	0	%
12B714-H1	Health	Recertification, Complai	int	Writing in pro	gress 12B714	0	56
115866-H1	Health	Recertification, Complai	int	Writing in pro	gress 115866	0	%
							-
ecent Intakes							-
							-
Add Intake							-
Add Intake	Status ()	Priority b	Alleg	ations : Intake Start	Date ý Surv	ey Due Date 🕆	View All Survey
Add Intake	Status ÷ Pending Finalization			ations : Intake Start 08/08/2023		ey Due Date 👌	View All Survey
Add Intake	Pending Finalization	n Immediate Jeop n Immediate Jeop	bardy 1	08/08/2023 08/01/2023	No in No in	nformation	View All Survey
Add Intake	Pending Finalization	n Immediate Jeop n Immediate Jeop	bardy 1	08/08/2023	No in No in	nformation	View All Survey
Add Intake Add Intake Intake ID \diamond Complaint 726374 Complaint 726352	Pending Finalization	n Immediate Jeop n Immediate Jeop	bardy 1	08/08/2023 08/01/2023	No in No in	nformation	View All Survey
Add Intake	Pending Finalization Triage/Prioritization Triage/Prioritization	n Immediate Jeop n Immediate Jeop	bardy 1	08/08/2023 08/01/2023	No in No in	nformation	View All Survey Act View All Intake
Add Intake Intake ID Complaint 732400 Complaint 726374 Complaint 726352	Pending Finalization Triage/Prioritization Triage/Prioritization	n Immediate Jeop n Immediate Jeop	bardy 1	08/08/2023 08/01/2023	No in No in	nformation	View All Survey
Add Intake Intake ID ÷ Complaint 726374 Complaint 726352	Pending Finalization Triage/Prioritization Triage/Prioritization	n Immediate Jeop n Immediate Jeop	bardy 1	08/08/2023 08/01/2023 08/01/2023	No in No in	nformation	View All Survey

Figure 13: Provider History Page

Notes:

- Click Add [Form/Survey/Intake/Enforcement] to add a form, survey, intake, or enforcement directly from the Provider History page.
- Click View All [Forms, Surveys, Intakes, Enforcements] [#] at the bottom right of each list to view all the forms, surveys, intakes, or enforcements associated with the provider. The number next to View All is the total number of forms, surveys, intakes, or enforcements associated with the provider.
- 3.7 Click **Show Advanced Search**, if desired, to open the Advanced Search dropdown menu and narrow the search criteria. See *Figure 14, Provider Advanced Search*.

Providers Surveys	Intakes		
Search for Providers Provider or DBA Search Hide Advanced Search			
TYPE & ID	STATUS	LOCATION	
Provider Type	Deemed Status	Street Address	City
Select v	Select v		
Select one or more	Select one or more		
iQIES ID	State Licensed	State Florida × Select × v	ZIP Code
License Number	Federal Certification Status Select Select one or more	Select one or more State Region Select one	
Certification Title	Operating Status	CMS Location	
Medicare - 18	Both 🗸	Select v	
Search Reset			

Figure 14: Provider Advanced Search

3.8 Type in desired detailed criteria. Click **Search**. The provider information shows below.

Note: Click Hide Advanced Search to close the Advanced Search menu.

4. Certification Event

- **Purpose**: To organize certification documents for provider certification.
- **Note**: It may be necessary to refresh the page to update track status when changes are made.

View Certification Progress in Workload Management

View Certification Progress in Survey

View Certification Progress in Provider History Page

- 4.1 View Certification Progress in Workload Management
 - 4.1.1 Go to the iQIES home page.
 - 4.1.2 Click the **Survey** tab.
 - 4.1.3 View certification status under **Track Status** for each survey in Workload Management.
 - 4.1.4 Click survey number to view details. See *Figure 15, Workload Management Track Status.*

Track Status 🝦	
<u>192B18</u>	
<u>AF1F4</u> 60%	

Figure 15: Workload Management Track Status

4.1.5 Click the survey number to view detailed certification status. The track status for the selected survey opens.

4.1.6 Click the carets next to the survey number or **Track Forms** to view additional details. See *Figure 16, Detailed Certification Status*.

Survey AF1F4-H1		
Name	Status	Completed Date
CMS-670	Complete	-
CMS-2567	Complete	04/30/2021
Closed Status	In Progress	-
Track Forms	Status	Completed Date
CMS-1539	ි Not Started	-
CMS-1572	Complete	11/02/2022

Figure 16: Detailed Certification Status

4.2 View Certification Progress in Survey

Go to the **Survey Basic Information** page. See Figure 17, Survey Basic Information Page Certification Progress and Table 4, Basic Information Page Certification Progress Callout Details.

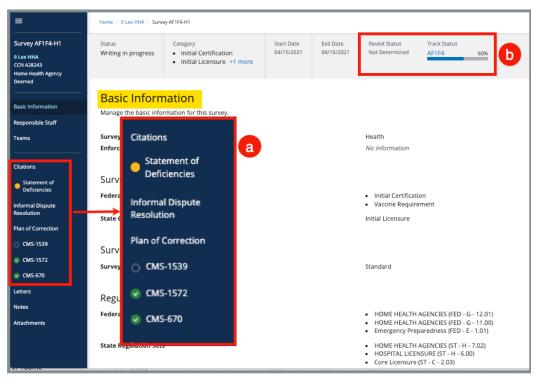


Figure 17: Survey Basic Information Page Certification Progress

Callout	Action	
	The left men	u shows the status at a glance.
	No fill	Not Started : Form or information hasn't been started
а	Yellow fill	In Progress: Form or information has been started, but it is incomplete
	Green fill	Complete: Form or information is complete
b	Click survey	tus bar shows the certification track status. number under Track Status to see detailed on certification status. <u>See step 4.1.6</u> for ls.

- 4.3 View Certification Progress on Provider History Page
 - 4.3.1 Go to the **Provider History** page. See *Figure 18, Provider History Page Certification Progress*.

view Provider Histo	ory Report	View All Pro	ovider Reports							
r <mark>ovider For</mark>	<mark>ms</mark>									
Add Form +										
orm Name 💠	Status 💠	Related S	urvey(s)	Created Date 🝦	Last Updated 🝦		Track ID	Å. V		Actions
CMS-1572	Complete	EFCF9-H1	17	04/28/2022	04/28/2022		EFCF9	259	For	m action -
				04/20/2022			_		i	
ecent Surve	eys			04/20/2022			_		i	
ecent Surve Add Survey	eys			04720/2022						
	2YS Survey Ty		Survey Categ		Exit Date 🗘	Statu		Track ID ‡	5	Actions
Add Survey			Survey Categ		Exit Date \$ 10/29/2008	Statu			0%	Actions
Add Survey	Survey Ty		Survey Categ	gory ¢ re, State Licensure			IS ∲	Track ID ‡	•	Actions

Figure 18: Provider History Page Certification Progress

4.3.2 Click survey number under **Track ID** to see detailed information on certification status. <u>See step 4.1.6</u> for further details.

5. View Provider Details

Click **View Details** on the **Provider History** page. The **Basic Information** page opens. See *Figure 19, View Details Link*.

Federal Certification Status Certified	View Details
Provider Histo	ry he deficiency history of a provider, view the provider history report.
View Provider History	Report View All Provider Reports

Figure 19: View Details Link

- 5.1 Click any selection on the left menu (e.g., **Mailing Address**, **Letters**) to go to a different page in iQIES and view further provider information. See *Figure 20, Provider Basic Information Page*.
 - **Note**: The left menu varies by provider type. The figure below shows the left menu for an HHA provider. these are the provider attributes that are provider specific:

HHA:	Additional Branch Addresses
ASC:	Locations
Hospice:	Inpatient Locations Multiple Locations
Nursing Homes	Buildings/Wings Performance Bed Summaries

5.2 Click Return to Provider to return to the Provider History page.

, ≡	Home / House of the Rising Sun5	4 / Provider Details		
Provider Details House of the Rising Sun54 CCN A28439	Federal Certification Status Certified	Title Medicare - 18		
Home Health Agency Non-Deemed C Return to Provider	Basic Information Manage the basic information for this provider.			Edit
Basic Information Responsible Staff	Overview			
Manage Tasks	Provider Name		House Of The Rising Sun54	
Mailing Address	Provider Type		HHA	
Additional Branch	Provider Subtype		N/A	
Addresses	Address		1 Main St Anytown, FL 87960	
Operating and Ownership	Phone		4345551212	
Additional Contacts	Phone EXT		No information	
Certification	Fax		No information	
Licensure	Email		jeannevaljean@fake.com	
Deeming Information	Website		No information	
Administrators	County		No information	
Letters	CMS Location		4 - Atlanta	
Notes	State Region		No information	
Attachments	Management Unit		No information	
	Work Unit		No information	
6				

Figure 20: Provider Basic Information Page

6. Add a Provider

New providers are automatically set to **Pending Certification** status.

Review information in the <u>Certification and Licensure</u> section to certify a new provider, if necessary.

6.1 Click **Add a Provider** from the **Survey & Certification** drop-down menu to add a new provider. See *Figure 21, Add a Provider*. The **Add a Provider** window opens.



Figure 21: Add a Provider

6.2 Fill out the information. See *Figure 22, Add a Provider Basic Information*.

Notes:

- Greyed out areas cannot be filled out. They are disabled based on the provider's information.
- Check Same as Legal Business Name to automatically populate Doing Business as Name if both names are the same.
- Address 1 must be a locatable address. Use Address 2 for additional details, if necessary. For questions about a locatable address, go to the USPS ZIP Code locator and enter Street Address, City, and State and click Find. A new window opens with the locatable address.
- Address 2 can be a PO Box, but a provider that has a PO Box cannot be a practice location.

6.3 Click **Add Provider** to add the provider. The new **Provider History** page opens and can be viewed and edited.

Notes:

- An iQIES ID is automatically generated.
- New surveys and intakes can now be added.

Add a Provider					
Basic Information All required fields are marked with an asterisk (*)					
Legal Business Name *		1			
The provider name that is registered with the IRS and the Legal Busin	iness Name reported on the CMS 855	L			
Same as Legal Business Name					
Doing Business As Name *		L			
The name under which the provider operates and the Doing Business As Name reported on the CMS 855					
Provider Type *	Provider Subtype	L			
Select one	~	L			
Primary Practice Location					
Address 1 *	Address 2	L			
		L			
City *	State * ZIP Code *	L			
	Select one	L			
County		L			
Add Provider Cancel					

Figure 22: Add a Provider Basic Information

7. Inpatient Care Provided

Purpose: To identify whether the Hospice provides care in an inpatient setting.

Note: Inpatient Care Provided is enabled for Hospice provider type only.

7.1 Click **Edit** on the **Provider Basic Information** page. See *Figure 23, Hospice Provider Details Edit Page*. The **Basic Information** edit page opens.



Figure 23: Hospice Provider Details Edit Page

7.2 Click the **Yes** or **No** radio button under **Inpatient Care Provided**. *See Figure 24, Inpatient Care Provided Radio Buttons*.

Note: Click Yes to enable the Inpatient Locations selection on the left menu.

Basic Information						
All required fields are marked with an asterisk (*)						
Legal Business Name *						
Hill House Hospice						
The provider name that is registered with the IRS an	d the Legal Business Name reported on the CMS 855					
 Same as Legal Business Name Doing Business As Name 						
Hill House Hospice						
The name under which the provider operates and th	The name under which the provider operates and the Doing Business As Name reported on the CMS 855					
Provider Type *	Provider Subtype					
Hospice 🗸	· · ·					
Inpatient Care Provided * Yes No						
○ No						

Figure 24: Inpatient Care Provided Radio Buttons

7.3 Click Save.

8. Inpatient Locations

Purpose: To add locations and buildings for Life Safety Code surveys.

Notes:

- Inpatient Locations is enabled for Hospice provider type only.
- Inpatient Care Provided must be answered Yes to view Inpatient Locations.
- 8.1 Click **Inpatient Locations** on the left menu. See *Figure 25, Inpatient Locations*. The **Inpatient Locations** page opens.

Non-Deemed	Inpatient Locations	
< Return to Provider	Add and manage inpatient locations and buildings for this provider. These will be available for Life Safety Code Survey.	
Basic Information		
Responsible Staff	View Locations View Buildings Only	
Inpatient Locations	Add Inpatient Location	
Mailing Address		
Multiple Locations	Hill House Building 2 Delete Edit	
Operating Details	1 Building	
Additional Contacts	Primary Address Mailing Address	
Certification	Same as Primary Address	
Licensure		
Deeming Information		
Administrators	Buildings Add Building	
Letters		
Notes	> The Andrea Building Delete Edit	
Attachments	02 Building Sector Active Federal No effective date	

Figure 25: Inpatient Locations

8.2 Click **Add Inpatient Location**. The **Inpatient Location** fields open below. See *Figure 26, Inpatient Locations Fields*.

npatient Locations					
dd and manage inpatient locations and buildings for this provider. These will be available for Life Safety Code Survey.					
		View Locations View Buildings Only			
Add Inpatient Location					
All required fields are marked with an asterisk. (*)					
Location Name *					
Hill House Building 2					
500 characters					
Location Primary Address					
Address 1 *	Address 2				
	Address 2				
1 State St					
City *	State *	ZIP Code *			
Anytown	Florida	♥ 89099			
Location Mailing Address Location Mailing Address is the same as Primary					
Save Cancel					

Figure 26: Inpatient Locations Fields

- 8.3 Fill out the information.
- 8.4 Click **Save**. The **Inpatient Locations** page populates with the new location. See *Figure 27, Inpatient Locations Information*.

Inpatient Locations					
Add and manage inpatient locations and buildings for this provider. These will be available for Life Safety Code Survey.					
Toggle between Locations and Buildings View Location Add Inpatient Location View Location	tions View Buildings Only				
Hill House Building 2 No Buildings	Edit				
Address					
1 State St Anytown, FL 89099					
Buildings	Add Building				
No buildings Your buildings will show up here.					

Figure 27: Inpatient Locations Information

Note: Toggle between View Location and View Buildings to see each view. View Location shows the address of the building. View Buildings shows information about the buildings.

In the example above, **View Buildings Only** is in blue, so the buildings are what is shown.

A building must be added to create an LSC survey.

8.5 Click **Add Building** to add a building. The **Buildings** fields open below. See *Figure 28, Inpatient Locations Building*.

Hill House Building 2				Edit
No Buildings				
Address				
1 State St Anytown, FL 89099				
Allywwit, FL 63033				
Buildings				Add Building
				Photo Ballionio
All required fields are marked with an	asterisk. (*)			
Parent Location				
Hill House Building 2				
Thir House building 2				
Building Name *			Building Licensure	
The Andrea Building			State Licensed Only	
500 characters				
Building ID • Ty	/pe *		Number of Stories	
	Building	~		
Limit 2 characters				
Plan Approval Date	Effective Date		Closed Date	
MM/DD/YYYY	MM/DD/YYYY		MM/DD/YYYY	
Construction Type		Construction Date		
Select one	~			
		MWDD/YYYY		
LSC Form Indicator *				
LSC 2012 Health Existing				~
Regulation Set				
FED - K - 03.02				
Hazmat Area Separate	FSES Date			
Select one	~			
	MM/DD/YYYY			
Sprinkler Status	Sprinkler Requ	ired		
Select one	✓ Select one	~		
Building Location Detail				
Additional details such as landmarks, directio	ons, etc.			
Save Cancel				

Figure 28: Inpatient Locations Building

8.6 Click **Save**. The **Inpatient Locations** page populates with the new building information. See *Figure 29, Inpatient Locations Buildings Information*.

Inpatient Locations					
Add and manage inpatient locations and buildings for this provider. These will be available for Life Safety Code Survey.					
Toggle between Locations and Buildings	View Locations View Buildings Only				
Add Inpatient Location					
Hill House Building 2 1 Building	Edit				
Address 1 State St Anytown, FL 89099					
Buildings	Add Building				
The Andrea Building 02 Building Active No effective date	Delete Edit				

Figure 29: Inpatient Locations Buildings Information

9. Responsible Staff

Purpose: Add new, delete, or view existing staff responsible for the complaint.

Notes:

- Responsible Staff are HARP ID users.
- One SAGU and one CMSGU must be selected as Responsible Staff for an intake of a deemed provider to complete triage when CMS approval is required.
- Adding Responsible Staff ensures that the appropriate individuals receive email notifications throughout the complaint process (approval, reviewing investigation findings).
- 9.1 Add Responsible Staff
 - 9.1.1 Click **Responsible Staff** on the left menu. The **Responsible Staff** page opens. See *Figure 30, Provider Responsible Staff*.
 - Note: The Add Responsible Staff page opens when there are no existing responsible staff.

Home Health Agency Non-Deemed	Add Responsible Staff			
< Return to Provider	Find and add the responsible staff for this provid	der.		
Basic Information	First Name	Last Name	Organization	
Responsible Staff			Select	~
Manage Tasks	Management Unit	v	Work Unit	
Mailing Address	Select one	~	Select one	~
Additional Branch Addresses Operating and Ownership	Search			

Figure 30: Provider Responsible Staff

9.1.2 Click **Add Staff** when there are existing staff to add additional responsible staff. The **Add Responsible Staff** page opens.

- It is only possible to add staff that are in the list of staff members.
- It is not possible to select options that are greyed out.
- Click the arrow next to **Name** to sort names in alphabetical or reverse alphabetical order.
- 9.1.3 Type last name in text box under **Last Name**.
- 9.1.4 Select CMS or State from the Organization drop-down menu.
- 9.1.5 Click **Search**. The search results appear below.
- 9.1.6 Check the box under **Select** next to the correct name.
- 9.1.7 Click Save.
- 9.1.8 Verify the staff member appears in the list below Responsible Staff.Note: Click Add Staff to add additional Responsible Staff.

9.2 Delete Responsible Staff

- 9.2.1 Click **Delete** under **Actions** to delete a staff member. A confirmation pop-up window opens.
- 9.2.2 Click **Delete**. See *Figure 31, Delete a Responsible Staff*.

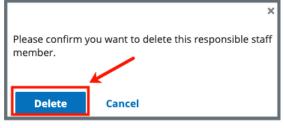


Figure 31: Delete a Responsible Staff

9.2.3 Verify that the staff member is no longer on the list.

10. Manage Tasks

Purpose: To manage and assign tasks for Nursing Home Responsible Staff.

Note: Manage Tasks is enabled for the Nursing Home provider type only.

Click **Manage Tasks** on the left menu. The Manage Tasks screen opens. See *Figure 32, Manage Tasks* and *Table 5, Manage Tasks Detailed Callout*.

Home Health Agency Non-Deemed < Return to Provider Basic Information Responsible Staff	Manage Tasks Manage and assign tasks for y Assign users to start managin Tasks					b Filte	er	
Manage Tasks	All × Search tasks	X v			-	Vie	w All v	/
Mailing Address	С	d	е		ſ		g	
Additional Branch Addresses	Task	Due Date	Status		Assigned To		Comments	
Operating and Ownership Additional Contacts Certification	Provider Maintenance	MM/DD/YYYY	Complete	~	SAGU_Admin_SINGY, Pat × Assign Staff	x v	Ŧ	
Licensure Deeming Information Administrators	Licensure Review	MM/DD/YYYY	To Do	~	SAGU_Admin_SINGY, Pat × test2.CMSSINGY, Pat × Assign Staff	×	Ŧ	
Letters Notes Attachments	Scheduling	MM/DD/YYYY	To Do	~	SAGU_Admin_SINGY, Pat × test2.CMSSINGY, Pat × Assign Staff	×	Ŧ	

Figure 32: Manage Tasks

Table 5: Manage	Tasks	Detailed	Callout
-----------------	-------	----------	---------

No.	Description
1	Select individual tasks from the drop-down menu under Tasks to assign to the Responsible Staff or select All
2	Select View All, Assigned , or Unassigned from the drop-down menu. View All is the default.
3	Each task that is selected shows under Task
4	The Due Date of the task
5	The Status of the task.
6	The Responsible Staff assigned to the task. More than one Responsible Staff can be assigned the task.
7	Click the 🕇 icon to add a comment.

11. Buildings/Wings

- **Purpose**: To add and manage locations and buildings for Life Safety Code surveys.
- **Note:** Buildings/Wings is enabled for the Nursing Home provider type only.
- 11.1 View Buildings and Wings

Click **Buildings/Wings** on the left menu. See *Figure 33, Buildings/Wings*. The **Buildings/Wings** page opens.

< Return to Provider	Buildings/Wings	
Basic Information	Click to view Buildings Only tab Add and manage locations and buildings for this provider. These will be available for Life Safety Code Survey.	
Responsible Staff	View Locations View Buildings Or	nlv
Manage Tasks		
Buildings/Wings	Marion Manor NH	1
Mailing Address	1 Building	
Operating and Ownership		
Additional Contacts	Primary Address	
Certification	123 Test Provider Test, AL 41232	
Licensure		
Performance		
Administrators	Buildings Add Building	
Bed Summaries	Marion Manor Maple Residence	
Letters	22 Building ● Active ● Federal ● State Licensed No effective date Delete ① Edit	
Notes		
Attachments		-

Figure 33: Buildings/Wings

- The Buildings/Wings page can be viewed for the Location or for the buildings associated with the location. Toggle between View Location and View Buildings Only to see each view. View Locations shows the address of the building. View Buildings Only shows information about open and closed buildings. See Figure 34, View Buildings Only.
- A building must be added before an LSC survey can be created.

Buildings/Wings		
Add and manage locations and buildings for this provider. These will be available for Life S	afety Code Survey.	
	View Locations	View Buildings Only
Open Buildings		
1 Building Click caret to expand for building details		
Marion Manor Maple Residence 22 Building Active Federal State Licensed No effective date Marion Manor NH Closed Buildings No Buildings	Deleta Edit	• (j
No buildings Your buildings will show up here.		

Figure 34: View Buildings Only

11.2 Add a Building

11.2.1 Click Add Building on the View Locations tab. The New Building window opens directly below Buildings. See *Figure 35, Add New Building*.

Buildings					Add Building
All required fields are mark	ed with an a	sterisk. (*)			
Parent Location *					
Marlon Manor NH			~		
Building Name *				Building Licensure	
				State Licensed	
500 characters					
Building ID *	Туре *			Number of Stories	
Limit 2 characters	Select one		~		
Linit 2 Characters					
Plan Approval Date		Effective Da	te	Closed Date	
MM/DD/YYYY		MM/DD/YYYY		MM/DD/YYYY	
MMCDLVTTT		MMULLEVIIII		NINULUTITI	
Construction Type			Construction Date		
Select one		~			
			MM/DD/YYYY		
Federal LSC Form Indicate	or *				~
Select one					•
Regulation Set					
State LSC Form Indicator					
Select one					~
Select one					· ·
Regulation Set					
Hazmat Area Separate		FSES Date			
Select one	~	MM/DD/YYYY			
Sprinkler Status		Sprinkler Re			
Select one	~	Select one	~		
Building Location Detail					
Additional datally such as inside	aske disast				
Additional details such as landm	arks, direction	s, etc.			
Save Cancel					
save 👝 cance					

Figure 35: Add New Building

11.2.2 Fill out the information.

Notes:

- The **Building ID** is determined at the state level. The **Building ID** is added to the Statement of Deficiencies and cannot be changed or edited once saved.
- The LSC Form Indicator specifies the LSC regulation set that applies to the building.
- 11.2.3 Click **Save**. The new building information appears in the **Buildings** section. See *Figure 36, New Building Information*.

Buildings		Add Building
 Marion Manor Maple Residence 22 Building Active Federal State Licensed No effective date 	Delete	í) Edit
> The Andrea Deux 24 Building Active Federal State Licensed Effective 09/19/2024	Delete	Edit

Figure 36: New Buildings Information

Note: Click Add Building to add additional buildings.

11.3 Delete a Building

- **Note: Delete** is disabled (greyed out) when a citation is associated with a building.
- 11.3.1 Click **Delete** next to the building that needs to be deleted. A pop-up window opens asking for confirmation of the deletion. See *Figure 37, Delete Building Pop-up Window*.

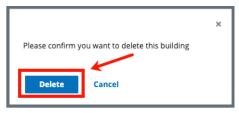


Figure 37: Delete Building Pop-up Window

11.3.2 Click **Delete** again. The building is removed from the **Buildings** list.

11.4 Edit a Building

- 11.4.1 Click **Edit** next to the building that needs to be edited. The current building information populates below **Buildings** and can be edited.
- 11.4.2 Click **Save**.

12. Mailing Address

12.1 Add a new mailing address

12.1.1 Click **Mailing Address** on the **Provider Details** window. See *Figure 38, Provider Mailing Address*. The **Mailing Address** window opens.

< Return to Provider	Mailing Address	
Basic Information Responsible Staff	Same as Practice Location	
Manage Tasks	Address 1 *	Address 2
Buildings/Wings		
Mailing Address	City *	State * ZIP Code *
Operating and Ownership	-	Select one
Additional Contacts		
Certification		
Licensure	Save	
Da-fa		

Figure 38: Provider Mailing Address

- 12.1.2 Fill out the information.
- 12.1.3 Click Save. The Mailing Address updates.

12.2 Edit an existing address

- 12.2.1 Click Mailing Address on the Provider Details window. The Mailing Address window opens
- 12.2.2 Click Edit. See Figure 39, Edit Mailing Address.



Figure 39: Edit Mailing Address

- 12.2.3 Fill out the information.
- 12.2.4 Click **Save**. The Mailing Address is added.

13. Locations

Note: Locations is enabled for the ASC provider type only.

Click **Locations** on the left menu of the **Provider Details** window. See *Figure 40, Locations*. The **Locations** window opens.

Non-Deemed	Locations	
< Return to Provider	Add and manage locations and buildings for this provider. These will be available for Life Safety Code Survey.	View Buildings Only
Basic Information		
Responsible Staff		View Locations View Buildings Only
Locations	Alaska ASC 💿	
Mailing Address	1 Building	
Operating Details		
Additional Contacts	Primary Address	
Certification	500 Primary Street Cityville, AK 12345	
Licensure		
Deeming Information	Click caret for Building details	
Administrators	Buildings	Add Building
Letters		
Notes	Structure 1 01 Building Active Federal No effective date	Delete Edit
Attachments		

Figure 40: Locations

- The Locations page can be viewed for the Location or for the buildings associated with the Location. Toggle between View Location and View Buildings Only to see each view. View Locations shows the address of the building. View Buildings Only shows information about open and closed buildings.
- In the example above, **View Buildings Only** is in blue, so the buildings are what is shown.
- A building must be added to create an LSC survey.
- ASC providers can have only one location, but they can have multiple buildings associated with that location.

13.1 Add a building

13.1.1 Click **Add Building** on the **View Locations** tab. The **New Building** window opens directly below Buildings. See *Figure 41, New Building*.

Buildings					Add Building
New Building All required fields are marked wi	ith an asterisk. (*))			×
Parent Location					
Andrea's All-Inclusive ASC					
Building Name *				Building Licensure	
				State Licensed Only	
500 characters					
Building ID	Turne			Number of Stories	
Building ID *	Type * Select one		~	Number of Stories	
Limit 2 characters	Select one				
Plan Approval Date		Effective Date		Closed Date	
MM/DD/YYYY		MM/DD/YYYY		MM/DD/YYYY	
Construction Type			Construction Date		
Select one		~			
			MM/DD/YYYY		
LSC Form Indicator *					
Select one					~
Regulation Set					
Hazmat Area Separate		FSES Date			
Select one	~				
		MM/DD/YYYY			
Sprinkler Status		Sprinkler Requi	ired		
Select one	~	Select one	~		
Building Location Dotail					
Building Location Detail					
					/
Additional details such as landmarks, o	directions, etc.				
Save Cancel	•				

Figure 41: New Building

13.1.2 Fill out the information.

Notes:

- The **Building ID** is determined at the state level. The **Building ID** is added to the Statement of Deficiencies and cannot be changed or edited once saved.
- The LSC Form Indicator specifies the LSC regulation set that applies to the building.
- 13.1.3 Click **Save**. The new building information appears in the **Buildings** section. See *Figure 42, New Building Information*.

Delete Edit

Figure 42: New Buildings Information

Note: Click Add Building to add additional buildings.

13.2 Delete a building

- **Note: Delete** is disabled (greyed out) when a citation is associated with a building.
- 13.2.1 Click **Delete** next to the building that needs to be deleted. A pop-up window opens asking for confirmation of the deletion. See *Figure 43, Delete Building Pop-up Window*.

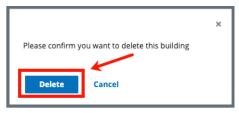


Figure 43: Delete Building Pop-up Window

13.2.2 Click **Delete** again. The building is removed from the **Buildings** list.

13.3 Edit a building

- 13.3.1 Click **Edit** next to the building that needs to be edited. The current building information populates below **Buildings** and can be edited.
- 13.3.2 Click **Save**.

14. Multiple Locations

Notes:

- Multiple Locations is enabled for the Hospice provider type only.
- Hospice providers can have multiple locations. Multiple locations are not considered as part of the Life Safety Code survey process.
- 14.1 Add a Location
 - 14.1.1 Click **Multiple Locations** on the left menu of the **Provider Details** window. See *Figure 44, Multiple Locations*. The **Locations** window opens.

Non-Deemed C Return to Provider	Multiple Locations All required fields are marked with an asterisk (*)					
Basic Information Responsible Staff	Location Name *					
Mailing Address Multiple Locations	Status	Open Date				
Operating Details	Open	MM/DD/YYYY				
Additional Contacts Certification	Address					
Licensure Deeming Information	Address 1 *		Address 2			
Administrators	City *		State *	ZIP Code *		
Letters Notes	County		Select one 🗸			
Attachments						
	Save					

Figure 44: Multiple Locations

14.1.2 Fill out the information.

- The **Building ID** is determined at the state level. The **Building ID** is added to the Statement of Deficiencies and cannot be changed or edited once saved.
- The LSC Form Indicator specifies the LSC regulation set that applies to the building.

14.1.3 Click **Save**. The new location information appears in the **Multiple Locations** section. See *Figure 45, Multiple Locations Information*.

Add Location				
lesstien				
location				
	Status 👙	Opened 🗧	Closed $ eq$	Actior
Location ‡	Status ¢ Open	Opened \$	Closed \$ Not Applicable	Actior

Figure 45: Multiple Locations Information

Note: Click **Add Location** when there is another location to add.

14.2 Delete a Location

- **Note**: A location cannot be deleted if there is a Medicare Branch ID tied to it.
- 14.2.1 Click **Delete** next to the location that needs to be deleted. A pop-up window opens asking for confirmation of the deletion. See *Figure 46, Delete Location Pop-up Window*.

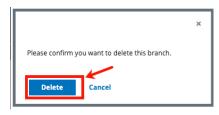


Figure 46: Delete Location Pop-up Window

14.2.2 Click **Delete** again. The location is removed from the **Multiple** Locations list.

14.3 Edit a Building

14.3.1 Click **Edit** next to the location that needs to be edited. The current location information opens and can be edited. See *Figure 47, Edit Multiple Locations*.

Multiple Loca	ations			
All required fields are mar	ked with an asterisk (*)			
Location Name *				
Hill House Building 1				
Status *	Open Date			
Open				
	MM/DD/YYYY			
Address				
Address 1 *		Address 2		
1 Main St				
City *		State *		ZIP Code *
Anytown		Florida	~	90809
County				
	-			

Figure 47: Edit Multiple Locations

- 14.3.2 Update information.
- 14.3.3 Click Save.

15. Additional Branch Addresses

Note: Additional Branch Addresses is enabled for the HHA provider type only.

- All non-Medicaid additional branch addresses are automatically reviewed by CMS. An email is then automatically sent to notify the SAGU of approval/disapproval.
- Medicaid Branch IDs do not need CMS approval.
- Providers must be certified to add an additional branch.
- New branches are assigned Branch CCNs.
- 15.1 Click **Additional Branch Addresses** on the **Provider Details** window. See *Figure 48, Provider Additional Branch Addresses*. The **Add Branch** window opens if there are no existing additional branches. If there are existing branches, click **Add Branch**.

Deemed	Add Branch			
< Return to Provider	All required fields are marked with an asterisk (*)			
Basic Information	Branch Name *		Branch Type	
Responsible Staff			Select one	~
Mailing Address	Medicare Branch ID			
Additional Branch Addresses	Automatically generated upon CMS approval	if the provider is certified		
Operating and Ownership	CMS Decision Date	CMS Decision Time		
Additional Contacts	No information	No information		
Certification	Additional Comments			
Licensure	No information			
Deeming Information			-	
Administrators	CMS Approval Notification	on *		
Letters	Add and manage the CMS users who will be n	notified for approval of the Medicare Branch ID.		
Notes	Add CMS General Users			
Attachments				
	There are no staff members added.			
	Branch Status	Open Date		
	Open			
		MM/DD/YYYY		
	Branch Address			
	Address 1 *		Address 2	
	City *		State *	ZIP Code *
			Select one	
	County			
	Save			

Figure 48: Provider Additional Branch Addresses

- 15.2 Fill out the information.
- 15.3 Click **Save**. The **Additional Branch Addresses** updates and the multiple locations update is saved.

- There must be a designated CMSGU to approve the additional branch.
- An automatic email is sent to the CMSGU when **Save** is clicked.
- The CMS user then approves or disapproves the additional branch address.
- An automatic email is sent to the SAGU with the decision.
- Once the **Branch ID** is assigned, the additional branch can be edited but no longer be deleted.

16. Operating and Ownership

- 16.1 Operating Details
 - 16.1.1 Click **Operating and Ownership** on the **Provider Details** window. See *Figure 49, Provider Operating Details*. The **Operating Details** window opens.

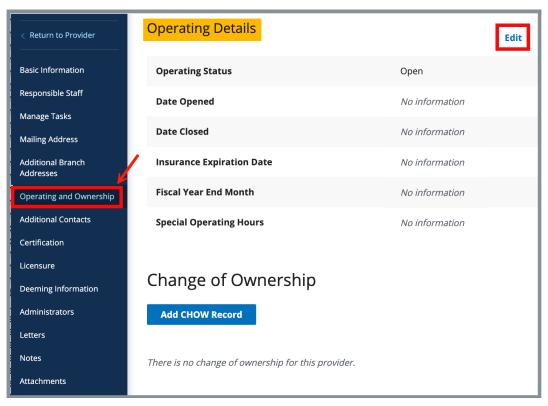


Figure 49: Provider Operating Details

- 16.1.2 Click **Edit** to make any updates. The editable **Operating Details** page opens.
- 16.1.3 Update information as needed.
- 16.1.4 Click **Save**. The **Operating Details** page opens, and the updated information is shown.

16.2 Change of Ownership (CHOW)

- 16.2.1 Click **Operating and Ownership** on the **Provider Details** window.
- 16.2.2 Click Add CHOW Record. See *Figure 50, Add CHOW Record*. The Add Change of Ownership window opens. See *Figure 51, Add Change of Ownership*.

Change of Owr	nership
Add CHOW Record	
	•

Figure 50: Add CHOW Record

Change of Ownership Type *		
Select one		~
Request Received Date	Effective Date *	
MM/DD/YYYY	MM/DD/YYYY	

Figure 51: Add Change of Ownership with Assignment

Note: There are two types of ownership:

With Assignment	The owner takes responsibility and
	ownership of the history of the provider. All
	prior information is retained and transfers to
	the new owner, including surveys and CCN.
Without Assignment	The current provider is terminated, and a

<u>Without Assignment</u> The current provider is terminated, and a new provider is created. No surveys or CCN are retained.

With Assignment

a. Select With Assignment (see *Figure 52, With Assignment*) under Change of Ownership Type.

Add Change of Own	ership	
Change of Ownership Type * With Assignment		~
Request Received Date	Effective Date *	
MM/DD/YYYY	MM/DD/YYYY	
Save		

Figure 52: With Assignment

Note: The **Request Received Date** is the date the CHOW recommendation was received from the State Agency.

- b. Type **Effective Date** or enter date from pop-up calendar.
- c. Click Save. The Operating Details/Change of Ownership window opens.
- d. Verify the CHOW record is correct. See *Figure 53, With Assignment CHOW Record*.

Add CHOW Record				
Туре	Related Provider	Request Received	Effective Date	Actions



Without Assignment

a. Select **Without Assignment** (see *Figure 54, Without Assignment*) under **Change of Ownership Type**.

Add Change of Own	ership
Change of Ownership Type *	
Without Assignment	~
Request Received Date	Effective Date *
MM/DD/YYYY	MM/DD/YYYY
Previous Provider Name *	
	Find Facility
Save	

Figure 54: Without Assignment

Note: The **Request Received Date** is the date the CHOW recommendation was received from the State Agency.

- b. Type **Effective Date** or enter date from pop-up calendar.
- c. Click **Find Facility**. The **Select Related Provider** pop-up window opens. See *Figure 55, Select Related Provider*.

Select Related Provi	der Be sure	to review state is	correct ×
AL Q 2297049 Enter provider or 1 Provider) r DBA name, CCN, or State Facility ID (F	-ACID)	Search
Provider 🗧	ID 4	Provider Type	Deemed Status 🗧
2.21.22 315pm	CCN 01C000004 FACID IQ0000002684700	ASC	Non-Deemed
	Submit	Cancel	

Figure 55: Select Related Provider

- d. Select state from the drop-down menu.
- e. Type provider or DBA name, CCN, or State Facility ID (FACID) under Search for Provider.
- f. Click **Search**.
- g. Select the radio button next to the correct provider.
- h. Click Submit. The Add Change of Ownership window opens.
- i. Click Save. The Operating Details/Change of Ownership window opens.
- j. Verify the CHOW record is correct. See *Figure 56, Without Assignment CHOW Record.*

Γ	Change of Ow	nership			
	Add CHOW Record				
	Туре	Related Provider	Request Received	Effective Date	Actions
	Without Assignment	2.21.22 315pm - CCN 01C0000004	No information	12/01/2023	Edit

Figure 56: Without Assignment CHOW Record

17. Additional Contacts

Once one additional contact is listed, the **Edit**, **Add Emergency Contact**, and **Add Additional Contact** buttons appear. See *Figure 57*, *Edit*, *Add Emergency Contact and Add Additional Contact Buttons*.

Michael Johnson	Contacts		
Provider Contact	Phone	Edit	Delete
	(405) 222-1111		
	23		
	Fax		
	(405) 222-1112		
	Email		
	mj@noemail.com		
	Website		
	www.cms.hhs.gov		

Figure 57: Edit, Add Emergency Contact and Add Additional Contact Buttons

17.1 Add First Additional Contact

17.1.1 Click **Additional Contacts** on the **Provider Details** window. See *Figure 58, Provider Additional Contacts*. The **Additional Contacts** window opens.

< Return to Provider	Additional Conta			
Basic Information				
Responsible Staff	Contact Name		Contact Type	
Manage Tasks			Primary V	
Buildings/Wings	Phone	Ext	Fax	
Mailing Address				
Operating and Ownership	E-Mail		Website	
Additional Contacts				
Certification				
Licensure	Save			
Performance				

Figure 58: Provider Additional Contacts

- 17.1.2 Fill out the information.
- 17.1.3 Click Save. The Additional Contacts updates and is listed.

- 17.2 Edit Additional Contacts
 - 17.2.1 Click **Edit** to make any updates. Another **Additional Contacts** page opens and all fields except **Contact Type** can be updated.
 - 17.2.2 Fill out the information.
 - 17.2.3 Click Save.
- 17.3 Add Emergency Contact
 - 17.3.1 Click Add Emergency Contact to add an emergency contact.
 Another Additional Contacts page opens and all fields except Contact Type can be updated.
 - 17.3.2 Fill out the information.
 - 17.3.3 Click Save.
- 17.4 Add Additional Contact After One Contact has been Added
 - 17.4.1 Click Add Additional Contact to add an emergency contact.
 Another Additional Contacts page opens and all fields except Contact Type can be updated.
 - 17.4.2 Fill out the information.
 - 17.4.3 Click **Save**.

18. Certification

- Certified providers have a unique system-generated CCN assigned. The CCNs are state and provider-specific.
- Only CMS General Users can change the certification status from **Pending** to **Certified** for a Medicare, Medicare/Medicaid provider.
- State Agency users with S&C Provider Administrator or State Agency Admin privileges can certify and terminate Medicaid Title 19.
- The certification date derives from the most recent survey exit date and is editable for non-deemed Providers.
- **Certification Date** is editable for deemed providers when there is no certification survey in iQIES.
- Certification Changes and CCN transitions: Users with appropriate privileges can edit and update the Certification Title. The system automatically assigns the applicable CCN, and the prior record will be listed in the Certification History table.

18.1 Click **Certification** on the **Provider Details** window. See *Figure 59, Provider Federal Certification Details.* The **Certification** window opens with details on the certification and the certification history.

Home Health Agency Non-Deemed	Certificatio	n					Edit
< Return to Provider							
Basic Information	Federal Certif	ication					
Responsible Staff							
Manage Tasks	Federal Certificat	ion Status			Certified		
Mailing Address	CCN				A28439		
Additional Branch Addresses	Certification Date	2			01/05/20	22 👔	
Operating and Ownership Additional Contacts	Original Participa	tion Date			No inform	mation	
Certification	Title	Title			Medicare	- 18	
Licensure	NPI				No inform	mation	
Deeming Information							
Administrators	Certification H	listory					
Letters	certification	listory					
Notes							
Attachments	Certification Status	Certification Title	CCN	Certification Date	Original Participation Date	Termination Date	Withdrawal Type
	Certified	No information	No informa- tion	No information	No information	No information	No information

Figure 59: Provider Federal Certification Details

- 18.2 Click **Edit** to make any updates. The **Certification** page opens with current certification and certification history details.
- 18.3 Update information as needed.

Note: Once assigned, the CCN cannot be changed.

18.4 Click Save. The Certification page updates with the edited information.

19. Licensure

19.1 Click **Licensure** on the **Provider Details** window. See *Figure 60, Provider Federal Certification Details*. The **Licensure** window opens.

Non-Deemed	Licensure	Edit
< Return to Provider		
Basic Information		
Responsible Staff	State Licensure	
Manage Tasks	State Licensed	Yes
Mailing Address Additional Branch	State Licensure Status	Licensed
Addresses	Lisonse Tune	ANNUAL
Operating and Ownership	License Type	ANNUAL
Additional Contacts	License Number	B52
Certification	Issue Date	09/19/2024
Licensure Deeming Information	Effective Date	09/19/2024
Administrators	Expiration Date	09/19/2027
Letters		
Notes	Additional Information	
Attachments	Additional mormation	
	Employer/Tax Identification Number	No information
	State Facility ID	IQ0000002535606

Figure 60: Provider Federal Certification Details

- 19.2 Click Edit to make any updates. The Licensure page opens.
- 19.3 **Update** information as needed.

Note: Once assigned, the CCN cannot be changed.

19.4 **Click Save**. The **Licensure** page updates with the edited information.

20. Deeming Information

A deemed provider is when S&C activities are handled by an Accrediting Organization (AO) instead of the state survey agency.

Only a CMS General User (CMSGU) can certify or terminate a provider.

It is not necessary to add a survey or deeming information to certify a provider.

20.1 View Deeming Information

Click **Deeming Information** on the **Provider Details** window. See *Figure 61, Deeming Information Details.* The **Deeming Information** window opens. **Notes**:

- The **Deemed Status** and **Deemed Date** are directly under **Deeming** Information.
- The **State Survey Jurisdiction History** can be tracked, and the provider can be certified as deemed while under SA Jurisdiction.
- CMSGUs and State Agency General Users (SAGU) can update the **Compliance Date** and **Return to AO** date.
- Only the CMSGU can update the **Reason for Change**.
- Existing AOs, if any, are shown under the **Add Accrediting Organization** button.

Provider Details ULEX HHA CCN A28243 Home Health Agency Deemed CREATER CONTRACTOR CREATER CONTRACTOR Basic Information Responsible Staff	Deeming Information CMS approval is required for a provider to be deemed. Current Deemed Accreditation Status Current Deemed Accreditation Date ① CMS Approval of Deemed Status Date ③ State Survey Jurisdiction History	Deemed 05/01/2023 07/14/2022		
Manage Tasks Mailing Address	Deemed Status Suspended Date	Compliance Date	Returned to AO Date	
Additional Branch Addresses	06/06/2022	No information	No information	
Operating and Ownership	05/10/2022	No information	No information	
Additional Contacts Certification Licensure Deeming Information Administrators Letters Notes	Accrediting Organizations Add a new accrediting organization and manage accreditation Add Accrediting Organization 1 Accrediting Organization	n organizations and status.		
Attachments	The Joint Commission (TJC)			Edit
	AO Facility Id		No information	
	Deemed Accreditation Status		Deemed Accredited	i
	Initial Deemed Accreditation Date ()		05/01/2023	
	Current Deemed Accreditation Date 🕕		05/01/2023	
	Expiration Date		05/31/2023	
	CMS Approval Status		Approved	

Figure 61: Deeming Information Details

20.2 View State Survey Jurisdiction History

Click **View** under **State Survey Jurisdiction History** to view or edit the Jurisdiction History on the <u>Deeming Information</u> page. The **State Survey Jurisdiction Details** window opens. See *Figure 62, State Survey Jurisdiction Details*.

Note: Only the CMSGU can edit the **State Survey Jurisdiction Details**. All details except for the **Deemed Status Suspended Date** can be edited.

< Return to Deeming Information State Survey Jurisdiction Details Edit					
Deemed Status	Suspended Date		04/2	20/2023	
Compliance Date			No information		
Reason for Compliance Date Change			No information		
Return to AO Date			No information		
Reason for Return Date Change			No information		
Surveys Within State Jurisdiction					
Survey	Survey Type	Survey Category	Exit Date	Status	
11710A-H1	Health	Recertification	05/02/2023	Writing in progress	

Figure 62: State Survey Jurisdiction Details

20.3 Add Accrediting Organization

20.3.1 Click Add Accrediting Organization on the <u>Deeming Information</u> page. The Add Accrediting Organization window opens. See *Figure 63, Add Accrediting Organization*.

Add Accreditin	d with an asterisk (*)	
Accrediting Organization	n *	
The Joint Commission (T	זורא	~
AO Facility ID		
Accreditation Status * Pending Accredited Withdrawn Terminated Expired 		
Accreditation Date *		٦
10/21/2021		
MM/DD/YYYY		
Expiration Date *		
10/21/2024		
MM/DD/YYYY		
	Cancel	

Figure 63: Add Accrediting Organization

20.3.2 Fill out the applicable information.

20.3.3 Click **Save Section** to save the AO. The **Deeming Information** page opens, and the updated AO information is listed below.

Notes:

- Click **Edit** on the **Deeming Information** page to edit any AO information.
- Only CMS General Users can select the approval status and approval date of the accreditation.
- The approval date is the same date as the Accreditation Date.

21. Performance

- **Note: Performance** is enabled for the Nursing Home and Hospice provider types only.
- 21.1 Click **Performance** on the **Provider Details** window. See *Figure 64, Performance*. The **Performance** window opens.

Marion Manor Nursing Home Inc CCN 365181 Nursing Home	Performance		
< Return to Provider	Program Selection *	Date Selected for Program *	Program Status
	Select one		Select one
Basic Information		MM/DD/YYYY	
Responsible Staff	Survey Cycle *	Survey Due Date *	Status Changed Date *
Manage Tasks	Select one		
Buildings/Wings		MM/DD/YYYY	MM/DD/YYYY
Mailing Address	Notes		Text Editor Keyboard Shortcuts 🗹
Operating and Ownership	B i <u>U</u> ⊡ ⊫ ≔		
Additional Contacts			1
Certification			
Licensure			
Performance			
Administrators			
Bed Summaries			
Letters			
Notes	Powered by Froala		
Attachments			
	Save		

Figure 64: Performance

- 21.2 Fill out the information.
- 21.3 Click **Save**. The **Performance** page updates with Performance and Special Focus details. The page can be viewed and edited. See *Figure 65, Performance and Special Focus Details.*

Notes:

- Click **Edit** to edit information, if desired.
- It is not possible to edit or delete a note created by another user.
- The Program Selection cannot be edited.

Performanc	ce in the second se				Edit
Program Selection	1	Nursing H	ome Special Focus		
Date Selected for I	Program	09/19/202	4		
Special Focus State	us	Active			
Survey Cycle		6 Months			
Survey Due Date		10/03/202	4		
Last edit by:	NH_CMSGU_Singy				
Doris Schutt has as	sked us to review performance.				
Special Focus I			1		
# of Surveys Since	in Special Focus		0		
Most Recent Survey			No inform	nation	
# of Citations in Most Recent Survey			No inform	nation	
# of Surveys With	lJ Cited		0		
Related Survey H	istory Related Intakes	Related Enforcements A	ll Citations		
Survey ID	Survey Date	Survey Category	Met/Not Met Survey		
12345D-H1	00/00/0000	Recertification	• Met	Active	
12345D-H1	00/00/0000	Recertification	🙁 Not Met	Active	
12345D-H1	00/00/0000	Complaint	S Not Met	Active	
	00/00/0000	Recertification	🔿 Met	Active	

Figure 65: Performance and Special Focus Details

Note: Click each tab under Special Focus Details (Related Survey History, Related Intakes, Related Enforcements, All Citations) to view details about the provider performance.

22. Administrators

22.1 Click **Administrators** on the **Provider Details** window. See *Figure 66, Add Administrator*. The **Add Administrator** window opens.

Deemed C Return to Provider	Administrators Manage all administrators for	this provider.		Add Administrator
Basic Information Responsible Staff	Henry Jekyll	Primary Administrator		Edit Delete
Manage Tasks	Contact Details			
Mailing Address	Phone Number	Fax Number	Email	Address
Additional Branch Addresses	No information	No information	No information	
Operating and Ownership	Administrator Details			
Additional Contacts	Administrator Type	Administrator Qualificati	ons	
Certification	Medical Director	Physician		
Licensure	License Number	Start Date	End Date	Expiration Date
Deeming Information	No information	No information	No information	No information
Administrators				

Figure 66: Add Administrator

22.2 Fill out the information.

Notes:

- Only one Administrator can be primary.
- Only the last five administrators, including the current one, can be listed.
- 22.3 Click **Save**. The **Administrators** page updates with new Administrator. The page can be viewed and edited.

Note: Click **Edit** to edit information, if desired. It is not possible to edit or delete a note created by another user.

22.4 Click **Delete** to delete an administrator. A pop-up window opens and asks for confirmation to delete. Click **Delete** again to confirm removal.

23. Bed Summaries

- **Purpose**: To manage bed summaries for the provider.
- **Note:** Bed Summaries is enabled for the Nursing Home provider type only.
- 23.1 Click **Bed Summaries** on the **Provider Details** window. See *Figure 67, Add Bed Summary*. The **Bed Summaries** window opens.
 - Note: The first time the Bed Summaries window opens, it is called Add Bed Summary.

Figure 67: Add Bed Summary

23.2 Fill out the information.

Note: Total Facility Beds and Total Certified Beds update automatically.

23.3 Click **Save**. The **Bed Summaries** page updates. The page can be viewed and edited. See *Figure 68, Bed Summaries* for a completed form.

Note: Click Edit to edit information, if desired.

ed Summarie anage bed summaries for			Add Bed	l Summary
9/19/2024			Edit	Delete
Bed Summary Break	down			1
Medicare	Medicare/Medicaid	Medicaid	ICF/IID	
15	25	20	5	
Licensed Only 30				
Bed Summary Totals				
Total Facility Beds	Total Certified Beds			
95	65			

Figure 68: Bed Summaries

23.4 Click **Delete** to delete bed summaries. A pop-up window opens and asks for confirmation to delete. Click **Delete** again to confirm removal.

24. Terminate a Provider

Purpose: To terminate a provider.

Notes:

- The CMSGU user role has permission to terminate both Medicare and Medicaid-Only providers.
- The SA Admin role and S&C Provider Administrator user roles have permission to terminate Medicaid-Only providers.
- A provider must be certified to be terminated.
- The CMSGU user role is shown. Other user roles may see slightly different screens.
- 24.1 Click **Certification** from the **Provider Basic Information** page. See *Figure 69, Certification Left Menu*. The **Certification** page opens.

Provider Details House of the Rising Sun ASC	Federal Certification Status Certified	Title Medicare - 18		
CCN 10C0001668 Ambulatory Surgical Center Deerned	Basic Information			Edit
< Return to Provider				
Basic Information	Overview			
Responsible Staff	Provider Name		House Of The Rising Sun ASC	
Manage Tasks	Provider Type		ASC	
Locations	Provider Subtype		N/A	
Mailing Address Operating and Ownership	Address		1 Main St Suite 202 Anytown, FL 98765	
Additional Contact	Phone		8005551212	
Certification	Phone EXT		No information	
Licensure	Fax		No information	
Deeming Information	Email		eburdon@fake.org	
Administrators	Website		No information	
Letters	County		No information	
Notes	CMS Location		4 - Atlanta	
Attachments	State Region		37 - ORLANDO	
Attachments	Management Unit		No information	
	Work Unit		No information	

Figure 69: Certification Left Menu

24.2 Click Edit. The Certification page becomes editable.

24.3 Click **Terminated** under **Federal Certification Status**. See *Figure 70, Federal Certification Status*. Additional fields open under **Federal Certification**.

Certification All required fields are marked with an asterisk (* Federal Certification)	
CCN	Certification Date *	Original Participation Date *
10C0001668	01/19/2023	03/04/2025
	Latest certification survey's exit date: 2023-01-19	MM/DD/YYYY
Federal Certification Status * Not Applicable Pending Condition Certification Certified Terminated		

Figure 70: Federal Certification Status

- 24.4 Select the radio button next to the **Withdrawal Type**: **Involuntary Withdrawal** or **Voluntary Withdrawal**.
- 24.5 Select the termination date under **Termination Date**. See *Figure 71, Federal Certification Details.*

Federal Certification
Withdrawal Type * Involuntary Withdrawal Voluntary Withdrawal
Termination Date * Reason * 03/04/2025 Select one MM/DD/YYYY *
Federal Certification Status * Not Applicable Pending Certification Certified Terminated

Figure 71: Federal Certification Details

24.6 Select the reason for termination from the drop-down menu under **Reason**. See *Figure 72, Termination Reason*.

Note: There are three reasons for termination:

- Fail to Meet Health/Safety
- Fail to Meet Agreement
- Provider Status Change

Certification All required fields are marked with a	s astarick (*)		
·			
Federal Certification			
Withdrawal Type *			
 Involuntary Withdrawal 	Involuntary Withdrawal		
Voluntary Withdrawal			
Termination Date *	Reason *		
03/04/2025	✓ Select one		
MM/DD/YYYY	Fail to Meet Health/Safety		
	Fail to Meet Agreement Provider Status Change		
	Provider Status Change		

Figure 72: Termination Reason

24.7 Click **Save**. A pop-up window opens to verify whether the certification should be terminated. See *Figure 73, Termination Pop-Up Window*.

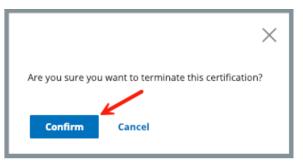


Figure 73: Termination Pop-Up Window

24.8 Click **Confirm**.

24.9 Verify that **Federal Certification Status** is now **Terminated**. See *Figure 74, Federal Certification Status*.

Federal Certification Status Terminated	Title No information		
Certification			Edit
Federal Certificatio	n		
Withdrawal Type		Involuntary Withdrawal	
Termination Date		03/04/2025	
Reason		Fail to Meet Health/Safety	
CCN		10C0001668	
Title		No information	
Certification Histor	у		
There is no certification hist	ory for this provider.		

Figure 74: Federal Certification Status

25. Letters

- Purpose:To add, upload, generate a letter from an existing template, edit a
Letter Overview, delete a letter, or add recipients to a letter.
Nonstandardized templates can be edited in the Letters section of the
applicable S&C area (providers, surveys, intakes, enforcements).
- **Note**: Letter templates are created in the Letter Template Management section. Review <u>S&C User Manual: Letter Template Management</u> for more information.
- 25.1 Add/Upload a letter
 - 25.1.1 Click Letters on the left menu to go to Letters. See Figure 75, Providers Letters.

Non-Deemed	Letters
< Return to Provider	Add and manage the letters for this provider, by uploading letters or generating letters from available templates.
Basic Information	Add Letter
Responsible Staff	
Locations	There are no letters for this provider.
Mailing Address	
Operating Details	
Additional Contacts	
Certification	
Licensure	
Deeming Information	
Administrators	
Letters 🔶	
Notes	
Attachments	

Figure 75: Providers Letters

25.1.2 Click **Add Letter**. The **Letter Overview** window opens. See *Figure 76, Providers Letter Overview*.

Letter Overview
All required fields are marked with an asterisk (*)
Letter Name *
0/255 characters
Letter Description
0/255 characters
Status
Select one
Federal / State Licensure Federal State Licensure
Letter Contents
Select v
Save Cancel

Figure 76: Providers Letter Overview

- 25.1.3 Fill out the information.
- 25.1.4 Click **Save**. The information updates in a new screen. See *Figure 77, Letter Attachment and Recipient*.

< Return to Letters	~		
Letter: Test Letter 2			
Overview			
Description	Request POC		
Status	Draft		
Federal/State Licensure	Federal		
Letter Contents	Request POC		
Date Created	06/29/2025 8:32 PM		
Attachments			
Acadiments			
Upload Attachment Generate from template			
There are no attachments for this letter.			
Recipients			
Add Recipient			
There are no recipients for this letter.			
Delete Letter			

Figure 77: Letter Attachment and Recipient

- 25.1.5 Scroll down to Attachments.
- 25.1.6 Click **Upload Attachment** to upload a letter from the computer.
- 25.1.7 Click **Select File**. The Windows Explorer window pops up. For Mac users, the Finder window pops up.
- 25.1.8 Select the file to be attached. Click **Open**. The file is attached and ready to be saved.
- 25.1.9 Type a file description in the **File Description** field, if desired.
- 25.1.10 Click **Save**. The letter is attached to the survey.

- 25.2 Generate a letter from an existing template
 - 25.2.1 Click Add Letter. The Letter Overview page opens.
 - Note: If there is already an existing letter that can be reused, click Generate from template under the Actions drop-down menu and go to step 25.2.5.
 - 25.2.2 Type the letter name under **Letter Name**. Add additional information, if desired.
 - 25.2.3 Click Save. The Letter: [Template Name] page opens.
 - 25.2.4 Click **Generate** from template under **Attachments**. See *Figure 78, Generate from Template.* The **Add Letter** page opens.

Attachments	
Upload Attachment	Generate from template

Figure 78: Generate from Template

25.2.5 Click the circle next to the desired template. See *Figure 79, Select a Template*.

Select a te	emplate		Cancel
8 Letter Templates			Filter by keyword
ID ‡	Letter Template Name 🗧	Description 🗧	Standardized 🗧
JIAM	A2 Burp-NS Letter - Survey	Nonstandardized survey letter with header/footer	No
0	Andrea's Survey Template	Test	No

Figure 79: Select a Template

25.2.6 Click **Next**. The **Create attachment** page opens.

Note: Next is disabled until a selection is made.

- 25.2.7 Update the template as desired. See *Figure 80, Letter Template*. **Notes**:
 - Only nonstandardized templates can be modified. Textholders can be removed, words can be edited and updated. Refer to
 <u>Appendix A, Provider Textholder Text</u> for a list of textholders. Be
 aware that the text changes apply only to the current letter and
 not to the template. Refer to the <u>Letter Template Management</u>
 <u>User Manual</u> on QTSO to edit the original template.
 - Standardized templates cannot be modified in the Letters section of any S&C area (providers, surveys, intakes, enforcements). To modify a standardized template, the template owner must edit the template in Letter Template Management.

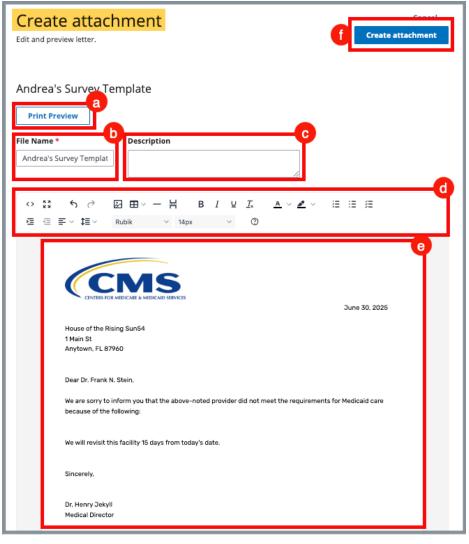


Figure 80: Letter Template

- 1. **Print Preview**: Click **Print Preview** to preview the .pdf version of the letter. The letter can be downloaded from **Print Preview**, if desired.
- 2. File Name: Edit the name, if desired.
- 3. **Description**: Enter keywords, if desired. Keywords are descriptive words that help the user find the content. For example, the template title might be "Unsubstantiated Claim," and the key words could be federal, minor. Separate the keywords with a comma.

- Formatting: The format menu allows content to be edited, including formatting, bulleting, etc. See <u>Appendix B, Tips and</u> <u>Tricks for Working in a Template</u>, for up-to-date details on each icon in the menu.
- 5. **Letter**: Shows how the letter looks. Verify inputs. Make any changes for nonstandardized templates, if desired.
- 6. **Create attachment**: Click **Create attachment** to create a .pdf that attaches to provider/survey/intake/enforcement record.
- 25.2.8 Click **Create Attachment** to attach the letter to the record.
- 25.2.9 Verify the letter is attached under **File Name**. See *Figure 81, Letter Attachment*.
 - **Note**: Click the file name to automatically download the letter to the user's computer.

Attachments Upload Attachment Generate	from template			
File Name 🗧	Date Uploaded 🕴	Last Modified 🕴	Description 🕴	Actions
Andrea's Survey Template	06/29/2025 9:30 PM	06/29/2025 9:30 PM by Pat SAGU_Admin_Singy	No information	Actions -

Figure 81: Letter Attachment

25.3 Add Recipients to a letter

25.3.1 Click **Add Recipient** to add a recipient. The Add Recipient page opens. See *Figure 82, Add Recipient*.

Add Recipient		
All fields are optional. Complete at least one field to save.		
Name		
	Primary Recipient	
Address 1	Address 2	
City	State	ZIP Code
	Select one 🗸	
Email		
Letter Information		
Date Sent		
Sender		
Method		
Select one 🗸		
Tracking ID		
Receipt acknowledged		
Save Cancel		

Figure 82: Add Recipient

25.3.2 Fill out the information.

Notes:

- **Primary Recipient** is automatically checked for the first recipient of the letter. It is grayed out for subsequent recipients.
- Letter Information is not automatic and must be filled out manually.
- **Date Sent** is the date the letter was sent.

25.3.3 Click **Save**. The **Recipient Information** updates. See *Figure 83, Recipient Information.*

Note:

- Click **Return to Letter** to return to the Letter Overview page.
- Click **Add Recipient** under the **Actions** menu on the Letter Overview page to add additional recipients.

< Return to Letter		×.
Recipient Information		Edit
Recipient Name	Recipient Email	
Frank N. Stein	ingelstadt@frankscastle.com	
Recipient Address		
123 Main St Nowhereville, FL 89890		
Letter Information		
Date Sent	Method	
06/30/2025	Email	
Sender Name	Tracking ID	
Surveyor Sam	B12345	
Receipt Acknowledged		
No		

Figure 83: Recipient Information

25.4 Edit a Letter Overview

25.4.1 Click **Edit Overview** from the **Actions** drop-down menu to edit a Letter Overview. See *Figure 84, Edit a Letter Overview*. The **Edit Letter Overview** opens. See *Figure 85, Edit Letter Overview*.



Figure 84: Edit a Letter Overview

Letter Overview	
All required fields are marked with an asterisk (*)	
Letter Name *	
Test Letter 2	
13/255 characters	
Letter Description	
Request POC	
11/255 characters	~~~~
Status	
Draft	~
Federal / State Licensure Federal State Licensure	
Letter Contents	
Request POC × Select	× -
Save Cancel	

Figure 85: Edit Letter Overview

- 25.4.2 Update fields.
- 25.4.3 Click Save.

- 25.5 Edit a Standardized Letter Attachment Description
- **Note**: Standardized letters cannot be edited or changed. Only the **Description** can be updated.
 - 25.5.1 Select a standardized template. The **Create attachment** page opens.
 - 25.5.2 Edit or add a description in the **Description** field. See *Figure 86, Standardized Letter Description.*

Create attachment	
Edit and preview letter.	
Andrea's Standardized Test T	emplate
Print Preview	
File Name *	Description
Andrea's Standardized Test Template	

Figure 86: Standardized Letter Description

25.5.3 Click Create Attachment.

25.6 Edit a Nonstandardized Letter Attachment

Notes:

- Only letters generated from nonstandardized templates can be edited after the .pdf is created.
- Finalized letters cannot be edited.
 - 25.6.1 Click the letter name on the **Letters** page. See *Figure 87, Click Letter Name.* The letter detail page opens with **Overview**, **Attachments**, and **Recipients** sections. See *Figure 88, Letter Details Page.*

Letters	
Add and manage the letters for this	survey, by uploading letters or ge
Add Letter	
Letter Name 🗧	Date Created 🗘
Test Letter 2	06/29/2025 8:32 PM

Figure 87: Click Letter Name

< Return to Letters Letter: Test Letter 2 Overview				Edit
Description		Request POC		
Status		Draft		
Federal/State Licensure		Federal		
Letter Contents		Request POC		
Date Created		06/29/2025 8:32 PM		
Attachments Upload Attachment Generate from	template			
1 Letter Attachment				
File Name 🗧	Date Uploaded 🗘	Last Modified 🗧	Description 0	Actions
Andrea's Survey Template	06/29/2025 9:30 PM	06/29/2025 9:30 PM by Pat SAGU_Admin_Sing	y No information	Actions *
Recipients Add Recipient 1 Recipient				
Recipient Name 💲	Date Sent 👙	Sender 🗧		Actions
Frank N. Stein Primary	06/29/2025	No information		View Edit Delete

Figure 88: Letter Details Page

- 25.6.2 Scroll to the **Attachments** section.
- 25.6.3 Select **Edit** from the drop-down list under **Actions**. See *Figure 89, Edit.* The **Edit Attachment** page opens.
 - Note: Last Modified shows the date, time, and author (user) of the last modification of the file. Last Modified is updated each time the file is modified.

Attachments Upload Attachment	Generate from template			
File Name 🗧	Date Uploaded 🗘	Last Modified 🗧	Description 🗧	Actions
Andrea's Survey Template	06/29/2025 9:30 PM	06/29/2025 9:30 PM by Pat SAGU_Admin_Singy	No information	Actions •
				Delete Edit Finalize

Figure 89: Edit

25.6.4 Make any necessary changes. See *Figure 90, Edit Attachment Page*.

Note: See <u>Appendix B</u> for tips and tricks for working in a template.

Edit attachment	Cancel Save
Print Preview File Name * Description Andrea's Survey Template	
◇ 証 5 ∂ 図 田 ~ 一 片 B I 空 空 三 ~ 羊 × Rubik × 14px	
	Эипе 30, 2025
House of the Rising Sun54 1 Main St Anytown, FL 87960	
Dear Dr. Frank N. Stein, We are sorry to inform you that the abov because of the following:	e-noted provider did not meet the requirements for Medicaid care
We will revisit this facility 15 days from to Sincerely,	xday's date.
Dr. Henry Jekyll Medical Director	

Figure 90: Edit Attachment Page

25.6.5 Click Save.

Notes:

The letter can now be regenerated with these changes.

25.7 Finalize a Letter Attachment

Note: No changes can be made once a letter is finalized.

25.7.1 Select **Finalize Letter** from the **Actions** drop-down menu to finalize a letter attachment. A pop-up window opens. See *Figure 91, Finalize Letter Pop-Up Window*.



Figure 91: Finalize Letter Pop-Up Window

- 25.7.2 Click Finalize. The letter overview opens.
- 25.7.3 Verify that the letter states **Finalized** under the **Actions** menu. See *Figure 92, Finalized*.

Attachments Upload Attachment Generate from template				
1 Letter Attachment File Name 0	Date Uploaded 🕴	Last Modified :	Description ‡	Actions
Andrea's Survey Template	06/29/2025 9:30 PM	06/30/2025 6:41 PM by Pat SAGU_Admin_SINGY	Missing Requirements	Finalized

Figure 92: Finalized

25.8 Delete a Letter Attachment

Note: Letters can only be deleted when no attachments are finalized.

25.8.1 Select **Delete** from the **Actions** drop-down menu to delete a letter. A pop-up window opens. See *Figure 93, Delete Letter Pop-Up Window*.



Figure 93: Delete Letter Pop-Up Window

25.8.2 Click **Delete**. The letter is removed from the list.

26. Notes

- **Purpose**: To add or review any notes. For example, notes can be added to give detailed administrator history, etc.
- 26.1 Click **Notes** on the left menu to view existing notes or add a note. See *Figure 94, Add Note*.
 - Note: When there are no existing notes, the Add Note page opens automatically when Notes is selected as in the figure below. When there are existing notes, click Add Note to add a new note.

Amoulatory Surgical Center	
Non-Deemed	Add Note
< Return to Provider	Text Editor Keyboard Shortcuts 🗗
Basic Information	
Responsible Staff	
Locations	
Mailing Address	
Operating Details	
Additional Contacts	
Certification	
Licensure	
Deeming Information	Poweed by Fraala
Administrators	
Letters	
Notes 🔶	Save
Attachments	

Figure 94: Add Note

- 26.2 Add a note.
- 26.3 Click **Save**. The **Notes** window opens with note information. See *Figure 95, Notes*.

Notes Add and manage the notes for this survey.	
Add Note	
Note added	
Pat test2.SASINGY 10/04/2021 8:27 PM	Delete Edit
Further important survey notes	
Pat test2.SASINGY	Delete Edit
Important Survey Notes	



Note: Click **Edit** to edit information, if desired. It is not possible to edit or delete a note created by another user.

26.4 Click **Delete** to delete a note. A pop-up note opens. See *Figure 96, Delete Note Pop-Up Window*.

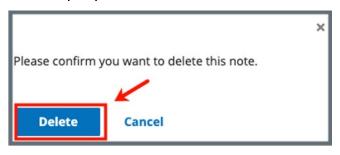


Figure 96: Delete Note Pop-Up Window

26.5 Click **Delete**. The updated **Notes** page opens.

27. Attachments

Note: Only one attachment can be added at a time.

27.1 Click **Attachments** on the left menu. The **Attachments** window opens. See *Figure 97, Attachments*.

Attachments
Add attachments for this provider and add a file description below.
Select File
Supported file formats PDF (.pdf), Word (.doc, .docx), Excel (.xls, .xlsx, .csv), Text files (.txt, .rtf), Image files (.jpeg, .jpg, .png, .tif, .tlff), Video files (.mp4, .mov, .wmv, .3gp), Audio files (.mp3, .aac, .wav, .wma), and Message files (.msg, .eml).
Attachment name Provider John Doe Letter.docx Remove Optional: Type file description
File Description
0/255 characters
Save 🔶

Figure 97: Attachments

- 27.2 Click **Select File.** The Windows Explorer window pops up. For Mac users, the Finder window pops up.
- 27.3 Select the file to be attached. Click **Open**.
- 27.4 Type a file description in the File Description field, if desired.
- 27.5 Click **Save**. The file is attached to the survey.

Note: Click **Edit** to edit information, or click **Download** to download the document, if desired. See *Figure 98, Edit or Download an Existing Attachment.*

textfile.txt	Existing attachment
Date Uploaded	08/04/2021 12:13 PM
Uploaded By	Pat x
File Size	0 KB
Category	Survey
Source	Survey 793755
Download	

Figure 98: Edit or Download an Existing Attachment

Appendix A: Provider Textholder Text

Each provider, survey, intake, or enforcement area has area-appropriate textholders. Provider Textholders are listed below.

Provider Textholders			
Accrediting Organization (AO)	Custom Text Prompt	Provider Mailing Address	
Admin 1 st Name	Letter Sent Date	Provider State	
Admin Full Name	Medicaid ID Number	Provider State ID (FACID)	
Admin Last Name	Provider Address 1 (Street)	Provider State License Number	
Admin Salutation	Provider Address 2	Provider Telephone	
Admin Short with Salutation	Provider CCN	Provider Type Abbrev	
Admin Title	Provider City	Provider Type Full Description	
Administrator Email	Provider Doing Business As	Provider Zip	
Building ID List	Provider Fax Number	Title (Mapped from Provider Certification & Licensure tab)	
Buildings List	Provider Full Address	Today's Date	
Buildings List Open	Provider Legal Name	Today's Date Full	
Accrediting Organization (AO)	Custom Text Prompt	Provider Mailing Address	

Appendix B: Tips and Tricks for Working in a Template

The letters template is very similar to working in Google Docs or Microsoft Word. Here are a few tips and tricks to help:

Template Menu



Hover over the template menu to see screen tips on what each of these icons are:

- 1. Show HTML code
- 2. Put document in full screen (make it bigger)
- 3. Undo/Redo
- Insert an image. A small Drop image box opens. Drag and drop a file or click the box and search for the file.
- 5. Insert a table
- 6. Insert a horizontal line
- 7. Insert a page break
- 8. Highlight text and click to make **bold**
- 9. Highlight text and click to *italicize*
- 10. Highlight text and click to <u>underline</u>
- 11. Clear formatting

- Highlight text and click to change text color
- 13. Highlight text and click to highlight text
- 14. Create a numbered list
- 15. Create a bulleted list
- 16. Insert a checklist
- 17. Indent/Remove indent
- Alignment: Left, Center, Right, Justified
- 19. Adjust the line height
- 20. Select a font
- 21. Select a font size
- Help: shows handy shortcuts, keyboard navigation, plugins and version