



Centers for Medicare & Medicaid Services

Internet Quality Improvement & Evaluation System (iQIES)

Survey and Certification (S&C) Manage a Provider User Manual

Version 3.1

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Table of Contents

1. Introduction	1
1.1 Getting Started in S&C – Important Information to Know	1
1.2 iQIES Service Center	4
1.3 Roles and Permissions	5
1.4 My Tasks Landing Page	6
2. Manage a Provider Overview	11
3. Search for a Provider	12
4. Certification Event	16
4.1 View Certification Progress in Workload Management	16
4.2 View Certification Progress in Survey	18
4.3 View Certification Progress on Provider History Page	19
5. View Provider Details	20
5.2 Click Return to Provider to return to the Provider History page.	22
6. Add a Provider	23
7. Inpatient Care Provided	28
8. Inpatient Locations	30
9. Responsible Staff	35
9.1 Add Responsible Staff	35
9.2 Delete Responsible Staff	37
10. Manage Tasks	38

11. Buildings/Wings	39
11.1 View Buildings and Wings	39
11.2 Add a Building	41
11.3 Delete a Building	43
11.4 Edit a Building	44
12. Mailing Address	45
12.1 Add a new mailing address	45
12.2 Edit an existing address	46
13. Locations	47
13.1 Add a building	48
13.2 Delete a building	50
13.3 Edit a building	51
14. Multiple Locations	52
14.1 Add a Location	52
14.2 Delete a Location	54
14.3 Edit a Building	55
15. Additional Branch Addresses	56
16. Extension Locations	58
17. Modalities	60
18. Operating and Ownership	61
18.1 Operating Details	61
18.2 Provider Conversion: OPT/SLP to CORF	62
18.3 Provider Conversion: FQHC to RHC and RHC to FQHC	65
18.4 Change of Ownership (CHOW)	68

19. Relationship Manager	72
19.1 Provider Relationships	72
19.2 Provider Subunits	75
20. Additional Contacts	77
20.1 Add First Additional Contact	78
20.2 Edit Additional Contacts	79
20.3 Add Emergency Contact	79
20.4 Add Additional Contact After One Contact has been Added	79
21. Certification	80
21.1 Certification Information	81
21.2 Self Attestation	83
22. Licensure	84
23. Accreditation	85
24. Transplant Programs	87
24.1 Certification	88
24.2 Transplant Program Summary	88
25. Deeming Information	92
25.1 View Deeming Information	92
25.2 View State Survey Jurisdiction History	94
25.3 Add Accrediting Organization	95
26. Performance	97
27. Administrators	99
28. Bed Summaries	100
29. Special Fields	102
30. Letters, Notes, Attachments	105
31. Waivers	106
32. Terminate a Provider	107

List of Figures

Figure 1: Expandable Field _____	1
Figure 2: Notification Banner _____	2
Figure 3: Tool Tip Icon _____	3
Figure 4: Help Icon _____	5
Figure 5: My Tasks Landing Page _____	6
Figure 6: My Tasks Login _____	8
Figure 7: iQIES Logo _____	8
Figure 8: No Active Tasks _____	8
Figure 9: Task Status Details _____	9
Figure 10: My Tasks Comments _____	10
Figure 11: S&C Search _____	12
Figure 12: Search _____	12
Figure 13: Provider Search Results _____	13
Figure 14: Provider History Page _____	14
Figure 15: Provider Advanced Search _____	15
Figure 16: Workload Management Track Status _____	16
Figure 17: Detailed Certification Status _____	17
Figure 18: Survey Basic Information Page Certification Progress _____	18
Figure 19: Provider History Page Certification Progress _____	19
Figure 20: View Details Link _____	20
Figure 21: Provider Basic Information Page _____	22
Figure 22: Add a Provider _____	23
Figure 23: Add a Provider Basic Information _____	25
Figure 24: FQHC Provider Type _____	26

Figure 25: Organ Transplant Program Subtype _____	26
Figure 26: FQHC Provider Type _____	27
Figure 27: Provider Basic Information Edit Page _____	28
Figure 28: Inpatient Care Provided Radio Buttons _____	29
Figure 29: Inpatient Locations _____	30
Figure 30: Inpatient Locations Fields _____	31
Figure 31: Inpatient Locations Information _____	32
Figure 32: Inpatient Locations Building _____	33
Figure 33: Inpatient Locations Buildings Information _____	34
Figure 34: Provider Responsible Staff _____	35
Figure 35: Delete a Responsible Staff _____	37
Figure 36: Manage Tasks _____	38
Figure 37: Buildings/Wings _____	39
Figure 38: View Buildings Only _____	40
Figure 39: Add New Building _____	41
Figure 40: New Buildings Information _____	42
Figure 41: Delete Building Pop-up Window _____	43
Figure 42: Provider Mailing Address _____	45
Figure 43: Edit Mailing Address _____	46
Figure 44: Locations _____	47
Figure 45: New Building _____	48
Figure 46: New Buildings Information _____	49
Figure 47: Delete Building Pop-up Window _____	50
Figure 48: Multiple Locations _____	52
Figure 49: Multiple Locations Information _____	53
Figure 50: Delete Location Pop-up Window _____	54
Figure 51: Edit Multiple Locations _____	55

Figure 52: Provider Additional Branch Addresses _____	56
Figure 53: Extension Locations _____	58
Figure 54: Extension Location with Locations _____	59
Figure 55: Modalities _____	60
Figure 56: Provider Operating Details _____	61
Figure 57: Find CORF Provider for Conversion _____	62
Figure 58: Select CORF Provider for Conversion _____	63
Figure 59: Provider Conversion From OPT/SLP _____	64
Figure 60: Provider Conversion To CORF _____	64
Figure 61: Find Provider for Conversion _____	65
Figure 62: Select RHC Provider for Conversion _____	66
Figure 63: Provider Conversion From FQHC _____	66
Figure 64: Provider Conversion to an RHC _____	67
Figure 65: Add CHOW Record _____	68
Figure 66: Add Change of Ownership with Assignment _____	68
Figure 67: With Assignment _____	69
Figure 68: With Assignment CHOW Record _____	69
Figure 69: Without Assignment _____	70
Figure 70: Select Related Provider _____	70
Figure 71: Without Assignment CHOW Record _____	71
Figure 72: Relationship Manager _____	72
Figure 73: Relationship Type Pop-Up Window _____	72
Figure 74: Search for Provider Fields _____	73
Figure 75: Provider Relationships _____	74
Figure 76: Provider Subunits _____	75
Figure 77: Psychiatric Subunit _____	75
Figure 78: Rehabilitation Subunit _____	76

Figure 79: Edit, Add Emergency Contact and Add Additional Contact Buttons	77
Figure 80: Provider Additional Contacts	78
Figure 81: OPO QCOR Public Report Link	81
Figure 82: Provider Federal Certification Details	81
Figure 83: Self Attestation	83
Figure 84: Provider Federal Certification Details	84
Figure 85: Accreditation	85
Figure 86: Add Accreditation Organization	86
Figure 87: Organ Transplant Programs	87
Figure 88: Add Transplant Program	88
Figure 89: Transplant Program Summary	90
Figure 90: Transplant Program Surveyed History	91
Figure 91: Transplant Program Citations	91
Figure 92: Deeming Information Details	93
Figure 93: State Survey Jurisdiction Details	94
Figure 94: Add Accrediting Organization	95
Figure 95: Performance	97
Figure 96: Performance and Special Focus Details	98
Figure 97: Add Administrator	99
Figure 98: Add Bed Summary	100
Figure 99: Bed Summaries	101
Figure 100: Add Special Fields	102
Figure 101: Special Fields	103
Figure 102: Completed Special Fields	104
Figure 103: Waivers	106
Figure 104: Certification Left Menu	107
Figure 105: Federal Certification Status	108

Figure 106: Federal Certification Involuntary Withdrawal Details _____	108
Figure 107: Termination Reason _____	109
Figure 108: Termination Pop-Up Window _____	109
Figure 109: Federal Certification Involuntary Withdrawal Status _____	110
Figure 110: Federal Certification Voluntary Withdrawal Details _____	111
Figure 111: Termination Pop-Up Window _____	111
Figure 112: Federal Certification Voluntary Withdrawal Status _____	112

List of Tables

Table 1: Notification Banner Color Descriptions _____	2
Table 2: My Tasks Landing Page Detailed Callout _____	7
Table 3: Task Status Details Detailed Callout _____	9
Table 4: Survey Basic Information Page Certification Progress Callout Details ____	18
Table 5: Manage Tasks Detailed Callout _____	38
Table 6: Manage Tasks Detailed Callout _____	85
Table 7: Transplant Program Summary Detailed Callout _____	90

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 [Reference & Manuals](#) 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 <https://iqies.cms.gov/> with Health Care Quality Information Systems (HCQIS) Access Roles and Profile ([HARP](#)) login credentials. Refer to the [iQIES Onboarding Guide](#) 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*.

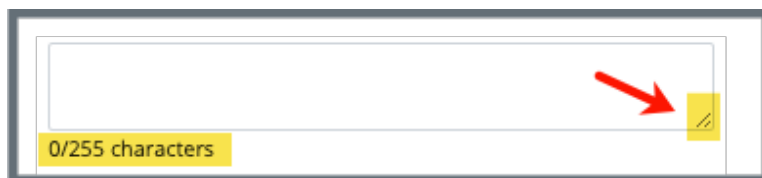


Figure 1: Expandable Field

- 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.

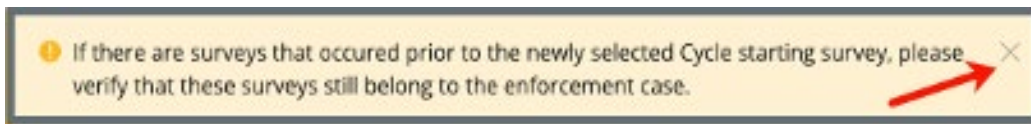


Figure 2: Notification Banner

Table 1: Notification Banner Color Descriptions

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.

- 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*.

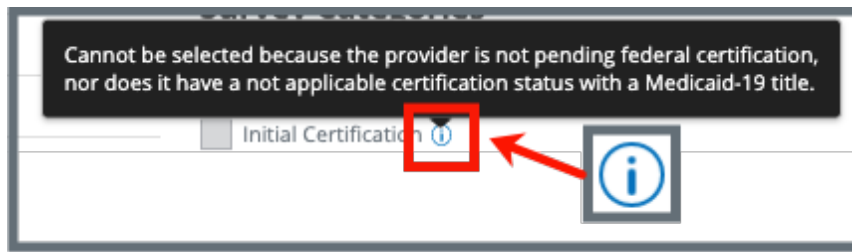


Figure 3: Tool Tip Icon

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

[Chrome](#)

[Edge](#)

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: iQIES@cms.hhs.gov

CCSQ Support Central: Create a new ticket or track an existing ticket:
https://cmsqualitysupport.servicenowservices.com/ccsq_support_central

Idea Portal: Feedback for future iQIES software development: [CCSQ Support Central](#). Click **Idea Portals** and select **Idea Portal**.

More information on iQIES: Refer to the [QIES Technical Support Office](#) (QTSO) and the [Quality, Safety, & Education Portal](#) (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 [iQIES User Roles Matrix](#) for detailed information on roles.

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



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 it is possible to 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.

The screenshot shows the 'My Tasks' landing page. At the top, a blue header bar contains 'Welcome, Pat' and a 'My Tasks' button (a). Below the header is a navigation bar with 'Providers', 'Surveys', 'Intakes', and 'Enforcements' tabs. The main content area is titled 'My Providers Tasks' and includes a filter for 'Active tasks' (b). A table lists tasks for two providers. The first provider, 'House of the Rising Sun', has a 'Licensure Review' task (c) with a 'New' badge (h), ID 'FACID IQ00000002521599' (d), and status 'Pending Certification' (f). The second provider, 'House of the Rising Sun3', has a 'Branch Approver' task (i) with ID 'CCN 69K394' (e) and status 'Certified' (f). The table also shows 'Licensure Review', 'Provider Maintenance', and 'Scheduling' tasks for the second provider. Each task row includes columns for 'ASSIGNED TASK', 'DUE DATE', 'TASK STATUS' (with a dropdown menu), and 'COMMENTS' (with a comment icon). A red box highlights the main task table area.

Provider	ID	Provider Type	Certification Status	Assigned Tasks
House of the Rising Sun 1 Main St Anytown, Florida 87960	FACID IQ00000002521599 Enable Offline	HHA	Pending Certification	Licensure Review
House of the Rising Sun3 1 Main St, #305 Anytown, Florida 87960	CCN 69K394 FACID IQ00000002521587 Enable Offline	HHA	Certified	Provider Maintenance, Licensure Review, Scheduling, Branch Approver
Branch Approver	07/11/2025	To Do		
Licensure Review	07/16/2025	To Do		
Provider Maintenance	07/17/2025	To Do		
Scheduling	No information	To Do		

Figure 5: My Tasks Landing Page

Table 2: My Tasks Landing Page Detailed Callout

No.	Name	Description
a	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 S&C User Manual: Offline .
b	Expand All Tasks	This checkbox defaults to checked so users can see tasks assigned to them. Uncheck box to close task detail.
c	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 S&C User Manual: Offline .
e	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 Comments for details.

- 1.4.2 Click **My Tasks** under **Survey & Certification** on the top menu to access My Tasks at any time. See *Figure 6, My Tasks Login*. **My Tasks** landing page opens.

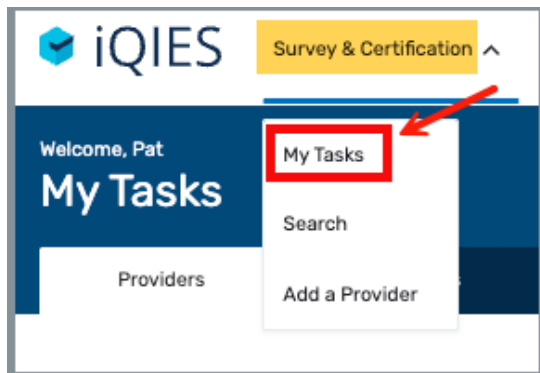


Figure 6: My Tasks Login

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 7, iQIES Logo*.

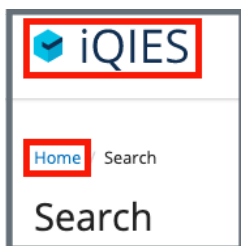


Figure 7: iQIES Logo

- A message appears below the selected tab when there are no tasks. See *Figure 8, No Active Tasks*, for an example from the **Providers** tab.

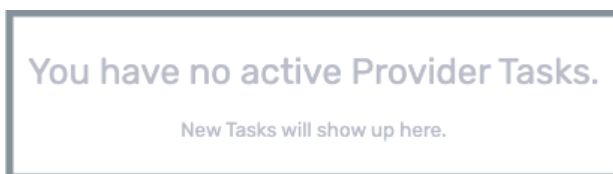


Figure 8: No Active Tasks

1.4.3 Task Detail: Tasks are shown by default. See *Figure 9, Task Status Details* and *Table 3, Task Status Details Detailed Callout*.

La Maison Suisse Deux
123 Main St
Anytown, Florida 88990

CCN 10A518
FACID IQ00000004235034
NH
Certified
[Enable Offline](#)

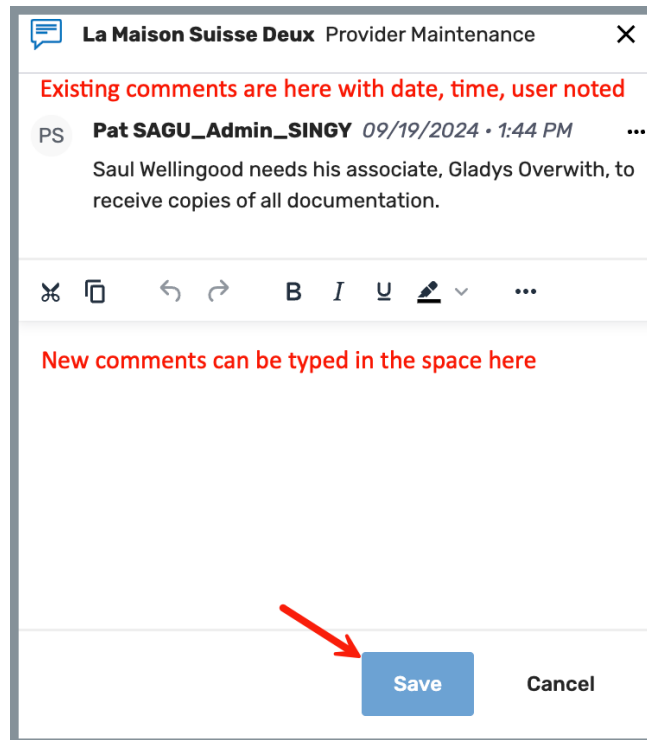
ASSIGNED TASK	DUE DATE	TASK STATUS	COMMENTS
Branch Approver	09/26/2024	To Do	No comment
Provider Maintenance	09/26/2024	To Do	Existing comment

Figure 9: Task Status Details

Table 3: Task Status Details Detailed Callout

No.	Name	Description
a	ASSIGNED TASK	The name of the task assigned.
b	DUE DATE	The date the task is due, if available.
c	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 step 1.4.3 .

1.4.4 **Comments:** Click the **+** to leave a comment. The side menu opens.
See *Figure 10, My Tasks Comments*.



The screenshot shows a side menu titled "La Maison Suisse Deux" with a sub-header "Provider Maintenance". The menu contains a list of existing comments, each with a user icon (PS), name (Pat SAGU_Admin_SINGY), date and time (09/19/2024 • 1:44 PM), and a truncated comment text. Below the list is a rich text editor with a toolbar containing icons for bold, italic, underline, link, unlink, and a dropdown menu. A red arrow points to the "Save" button at the bottom right of the menu, next to a "Cancel" button.

Figure 10: My Tasks Comments

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

2. Manage a Provider Overview

Important Note: This manual provides technical instruction on system functionality and does not replace CMS policy. Refer to official CMS guidance for policy requirements.

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 the following provider types:

ASC: Ambulatory Surgical Centers

CMHC: Community Mental Health Centers

CORF: Comprehensive Outpatient Rehabilitation Facilities

ESRD: End Stage Renal Disease Centers

FQHC: Federally Qualified Health Centers

HHA: Home Health Agencies

Hospice

Hospitals

ICF/IID: Intermediate Care Facilities for Individuals with Intellectual Disabilities

Nursing Homes, including Risk-Based Surveys (RBS)

OPO: Organ Procurement Organizations

OPT/SLP: Outpatient Physical Therapy/Speech Language Pathology

PRTF: Psychiatric Residential Treatment Facility

PXR: Portable X-Ray

RHC: Rural Health Clinic

Contact the [iQIES Service Center](#) 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 11, S&C Search*.

Note: The **Providers** tab is the default landing tab.

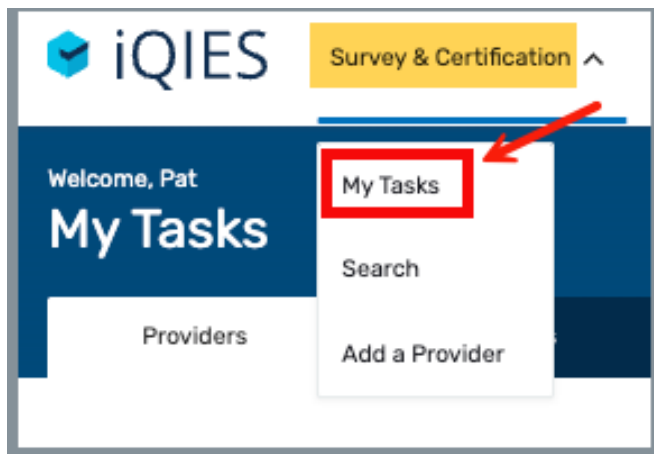


Figure 11: S&C Search

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 12, Search*

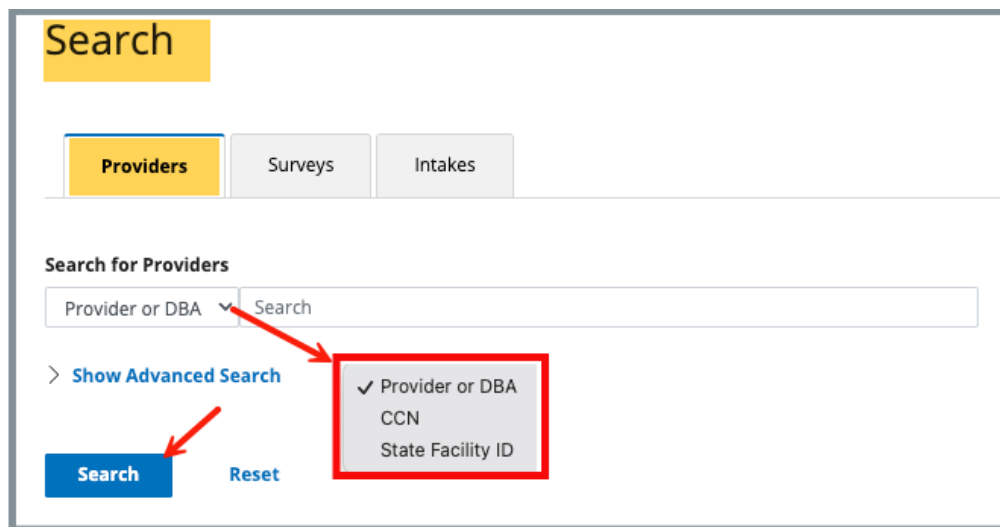
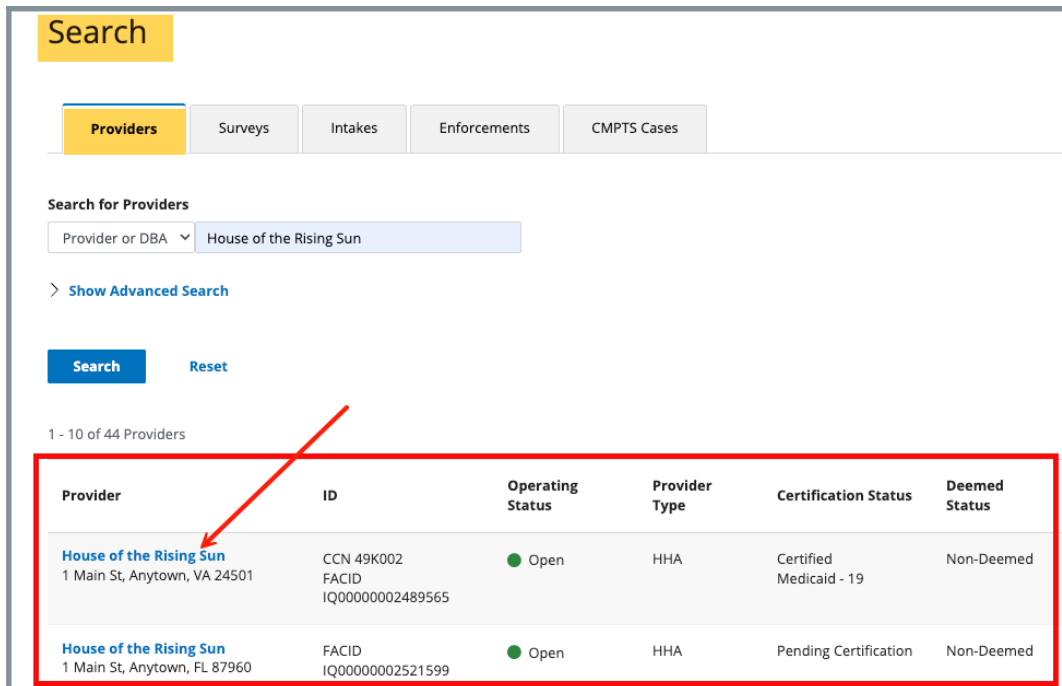


Figure 12: Search

3.4 Type search criteria.

3.5 Click **Search**. The provider information shows below. See *Figure 13, Provider Search Results*.

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



Search

Providers Surveys Intakes Enforcements CMPTS Cases

Search for Providers

Provider or DBA

> [Show Advanced Search](#)

Search [Reset](#)

1 - 10 of 44 Providers

Provider	ID	Operating Status	Provider Type	Certification Status	Deemed Status
House of the Rising Sun 1 Main St, Anytown, VA 24501	CCN 49K002 FACID IQ00000002489565	● Open	HHA	Certified Medicaid - 19	Non-Deemed
House of the Rising Sun 1 Main St, Anytown, FL 87960	FACID IQ00000002521599	● Open	HHA	Pending Certification	Non-Deemed

Figure 13: 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 14, Provider History Page*.

Provider History
For more information on the deficiency history of a provider, view the provider history report.

[View Provider History Report](#)
[View All Provider Reports](#)

Provider Forms
[Add Form](#)

Form Name	Status	Related Survey(s)	Created Date	Last Updated	Track ID	Actions
CMS-1539	Complete	E0DA1-H1	03/29/2023	01/31/2024	E0DA1 100%	Form action
CMS-1572	Complete	E0DA1-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 action

[View All Forms \(18\)](#)

Recent Surveys
[Add Survey](#)

Sets & Survey ID	Survey Type	Survey Category	Exit Date	Status	Track ID	Actions
12B715-H1	Health	Validation Survey		Writing in progress	12B715 0%	
12B714-H1	Health	Recertification, Complaint		Writing in progress	12B714 0%	
115866-H1	Health	Recertification, Complaint		Writing in progress	115866 0%	

[View All Surveys \(25\)](#)

Recent Intakes
[Add Intake](#)

Intake ID	Status	Priority	Allegations	Intake Start Date	Survey Due Date	Actions
Complaint 732400	Pending Finalization	Immediate Jeopardy	1	08/08/2023	No information	View
Complaint 726374	Triage/Prioritization	Immediate Jeopardy	1	08/01/2023	No information	View
Complaint 726352	Triage/Prioritization	Immediate Jeopardy	2	08/01/2023	No information	View

[View All Intakes \(25\)](#)

Recent Enforcements
[Add Enforcement](#)

Case ID	Case Type	Cycle Start Date	Starting Survey	Status	Actions
453785-F	Federal	10/04/2023	1538C1-H1 (10/04/2023)	Open - CMP Collection	View
240992-F	Federal	03/17/2022	D4547-H1 (01/05/2022)	Open	View

Figure 14: 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 drop-down menu and narrow the search criteria. See *Figure 15, Provider Advanced Search*.

Figure 15: Provider Advanced Search

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

Notes:

- All provider types can be searched by **Provider Subtype**. Select the provider under **Provider Type** and the **Provider Subtype** field opens.
- 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 16, Workload Management Track Status*.

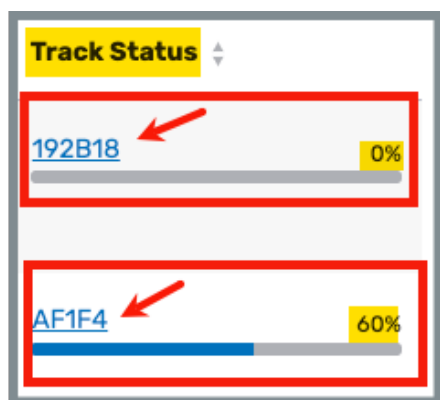


Figure 16: Workload Management Track Status

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 17, Detailed Certification Status*.

The screenshot shows a window titled "Track AF1F4 Status" with a close button (X) in the top right corner. The window contains two expandable sections, each with a caret icon and a red arrow pointing to it. The first section is "Survey AF1F4-H1" and the second is "Track Forms". Both sections contain a table with three columns: "Name", "Status", and "Completed Date".

Name	Status	Completed Date
CMS-670	Complete	-
CMS-2567	Complete	04/30/2021
Closed Status	In Progress	-

Name	Status	Completed Date
CMS-1539	Not Started	-
CMS-1572	Complete	11/02/2022

At the bottom right of the window is a blue "Close" button with a red arrow pointing to it.

Figure 17: Detailed Certification Status

4.2 View Certification Progress in Survey

Go to the **Survey Basic Information** page. See *Figure 18, Survey Basic Information Page Certification Progress* and *Table 4, Basic Information Page Certification Progress Callout Details*.

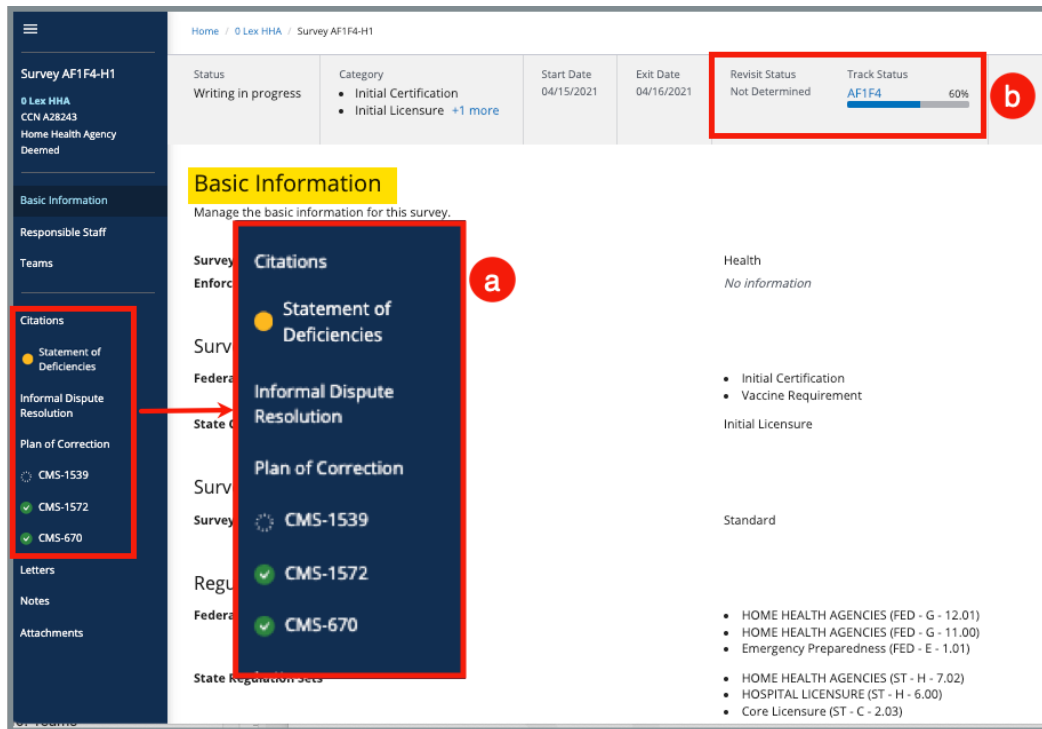


Figure 18: Survey Basic Information Page Certification Progress

Table 4: Survey Basic Information Page Certification Progress Callout Details

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

4.3 View Certification Progress on Provider History Page

4.3.1 Go to the **Provider History** page. See *Figure 19, Provider History Page Certification Progress*.

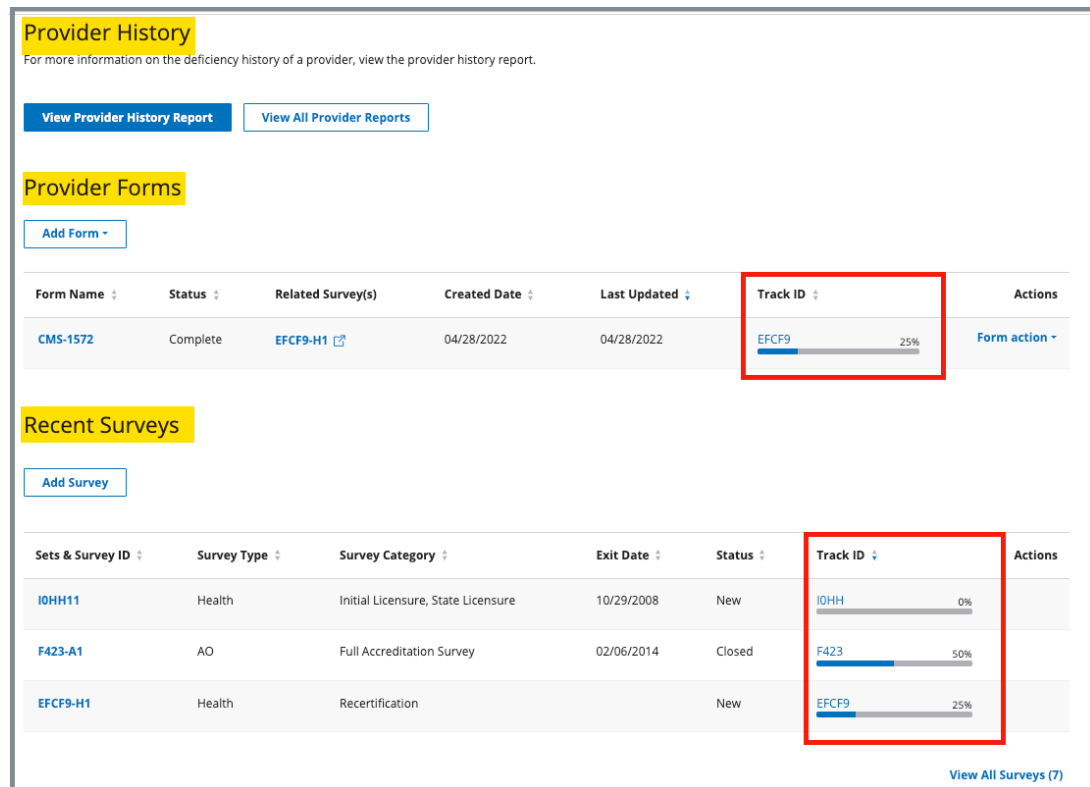


Figure 19: Provider History Page Certification Progress

4.3.2 Click survey number under **Track ID** to see detailed information on certification status. [See step 4.1.6](#) for further details.

5. View Provider Details

Click **View Details** on the **Provider History** page. The provider **Basic Information** page opens. See *Figure 20, View Details Link*.

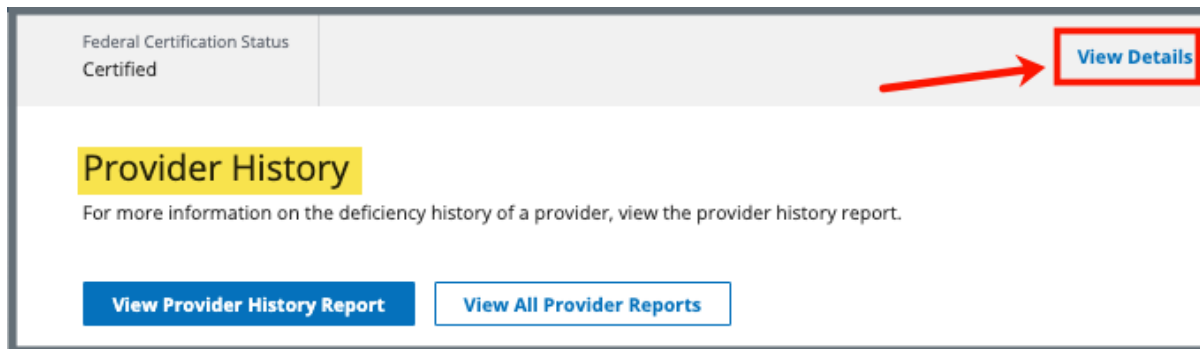


Figure 20: View Details Link

- 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 21, Provider Basic Information Page*.

Note: The left menu varies by provider type. The [Provider Basic Information Page figure](#) below shows the left menu for an HHA provider. These are the provider attributes that are provider specific:

Inpatient Care Provided	Hospice Hospital
Inpatient Locations	Hospice Hospital
Buildings/Wings	ICF/IID Nursing Homes
Locations	ASC
Multiple Locations	Hospice
Additional Branch Addresses	HHA
Extension Locations	CORF OPT/SLP
Modalities	ESRD
Relationship Manager	Hospitals
Accreditation	PRTF
Performance	Hospice Nursing Homes
Transplant Programs	Hospitals/Organ Transplant Programs
Bed Summaries	Nursing Homes PRTF
Waivers	ESRD

Notes:

- Both a **Tier** and a **Donation Service Area** must be assigned when transitioning OPO provider types from the legacy system. Click **Edit** to update provider details.
- Services Provided** is for the OPT/SLP provider type only.

Provider Details
Singy Speech Services
CCN 686974
Outpatient Physical
Therapy / Speech
Language Pathology
Non-Deemed

[< Return to Provider](#)

Basic Information

Responsible Staff

Manage Tasks

Mailing Address

Extension Locations

Operating and Ownership

Additional Contacts

Certification

Licensure

Deeming Information

Administrators

Letters

Notes

Attachments

Federal Certification Status
Certified

Title
Medicare - 18

Basic Information

Edit

Manage the basic information for this provider.

Overview

Provider Legal Business Name	Singy Speech Services
Provider Doing Business As Name	Singy Speech Services
Provider Type	OPT/SLP
Provider Subtype	N/A
Services Provided	Speech Pathology ⓘ
Address	123 Main St FLEMING ISLAND, FL 32003
Phone	8005551212
Phone EXT	No information
Fax	No information
Email	No information
Website	No information
County	Sarasota
CMS Location	4 - Atlanta
State Region	41 - TAMPA
Management Unit	No information
Work Unit	No information

Figure 21: Provider Basic Information Page

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

6. Add a Provider

Notes:

- New providers are automatically set to **Pending Certification** status.
- Review information in the [Certification and Licensure](#) section to certify a new provider, if necessary.
- It is not possible to add new OPO providers. Contact the [Service Center](#) if a new provider needs to be added.

6.1 Click **Add a Provider** from the **Survey & Certification** drop-down menu to add a new provider. See *Figure 22, Add a Provider*. The **Add a Provider** window opens.

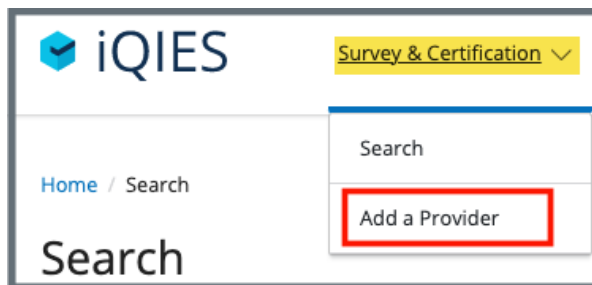


Figure 22: Add a Provider

6.2 Fill out the information. See *Figure 23, 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.
- The system automatically selects a Network ID for ESRD based on the provider's state.
- **OPO** provider types must select a **Tier** (**Tier 1**, **Tier 2**, or **Tier 3**) to add a provider.

Add a Provider

Basic Information
All required fields are marked with an asterisk (*)

Legal Business Name *

The provider name that is registered with the IRS and the Legal Business Name reported on the CMS 855

☐ Same as Legal Business Name

Doing Business As Name *

The name under which the provider operates and the Doing Business As Name reported on the CMS 855

Primary Practice Location

Address 1 *

Address 2

City *

State *
Select one ▼

ZIP Code *

County
Select one ▼

Provider Type *
Select one ▼

Provider Subtype
▼

Contact Information

Phone *

Ext

Fax

E-Mail

Website

Licensure

Employer/Tax Identification Number

Federal tax identification number known as the Employer Identification Number (EIN) used to identify a business entity

State Facility ID *

Unique identifier assigned by the state

Figure 23: Add a Provider Basic Information

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

Notes:

- **Add Provider** is disabled until required information is completed.
- An iQIES ID is automatically generated.
- New surveys and intakes can now be added.
- All provider types require a **Provider Subtype**. The **Provider Type** selection determines which additional fields or options are available. Some provider types may only have one choice, but that must be selected. Any nonstandard behavior is noted below.
- **FQHC provider types:** Have an additional field of **Offer Mobile Services**. See *Figure 24, FQHC Provider Type*.

Provider Type *

FQHC

Offers Mobile Services *

☐ Mobile Unit

☐ Permanent Unit

☒ Permanent Unit with Mobile Services

Figure 24: FQHC Provider Type

- **Hospitals/Transplants:** The [Transplant Programs](#) selection on the left menu appears when the **Organ Transplant Programs Provider Subtype** is selected. See *Figure 25, Organ Transplant Program Subtype*. Click **Transplant Programs** on the left menu to view certification details and the transplant program summary.

Provider Type *

Hospital

Provider Subtype *

Organ Transplant Programs

Figure 25: Organ Transplant Program Subtype

- **RHC provider types:** Have an additional field of **Offer Mobile Services**. See *Figure 26, FQHC Provider Type*.

The screenshot displays a form for FQHC Provider Type. It contains three main sections, each highlighted with a red border:

- Provider Type ***: A dropdown menu with "RHC" selected.
- Provider Subtype ***: A dropdown menu with a list of options: "Select one", "✓ Free-Standing", and "Provider-Based".
- Offers Mobile Services ***: A group of radio buttons with three options: "Mobile Unit", "Permanent Unit", and "Permanent Unit with Mobile Services" (which is selected).

Figure 26: FQHC Provider Type

7. Inpatient Care Provided

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

Notes:

- Inpatient Care Provided is enabled for Hospice and Hospital provider types only.
- Examples shown are for Hospice.

7.1 Click **Edit** on the **Provider Basic Information** page. See *Figure 27, Provider Basic Information Edit Page*. The **Basic Information** edit page opens.

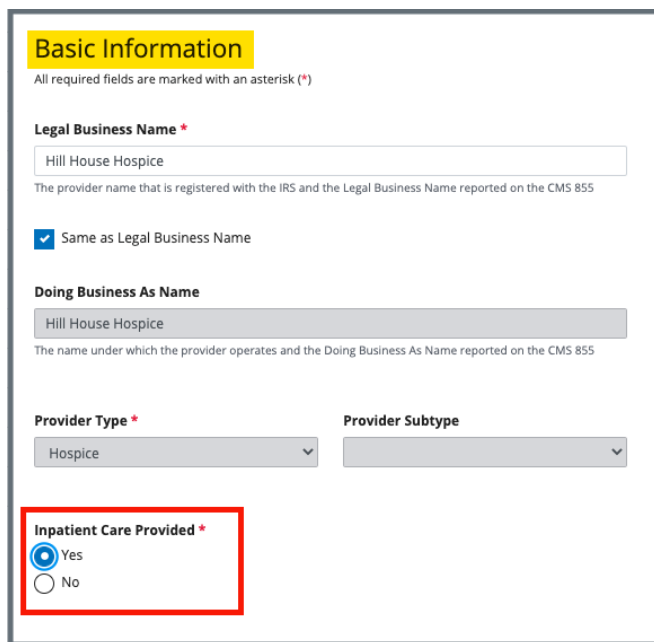


Basic Information	
Manage the basic information for this provider.	
Overview	
Provider Name	Hill House Hospice
Provider Type	Hospice

Figure 27: Provider Basic Information Edit Page

7.2 Click the **Yes** or **No** radio button under **Inpatient Care Provided**. See *Figure 28, 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 and 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 the Doing Business As Name reported on the CMS 855

Provider Type * **Provider Subtype**

Hospice

Inpatient Care Provided *

☒ Yes

☐ No

Figure 28: 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 and Hospital provider types only.
- Not all Hospital subtypes can be enabled for **Inpatient Locations**.
- [Inpatient Care Provided](#) must be answered **Yes** to view **Inpatient Locations**.

8.1 Click **Inpatient Locations** on the left menu. See *Figure 29, Inpatient Locations*. The **Inpatient Locations** page opens.

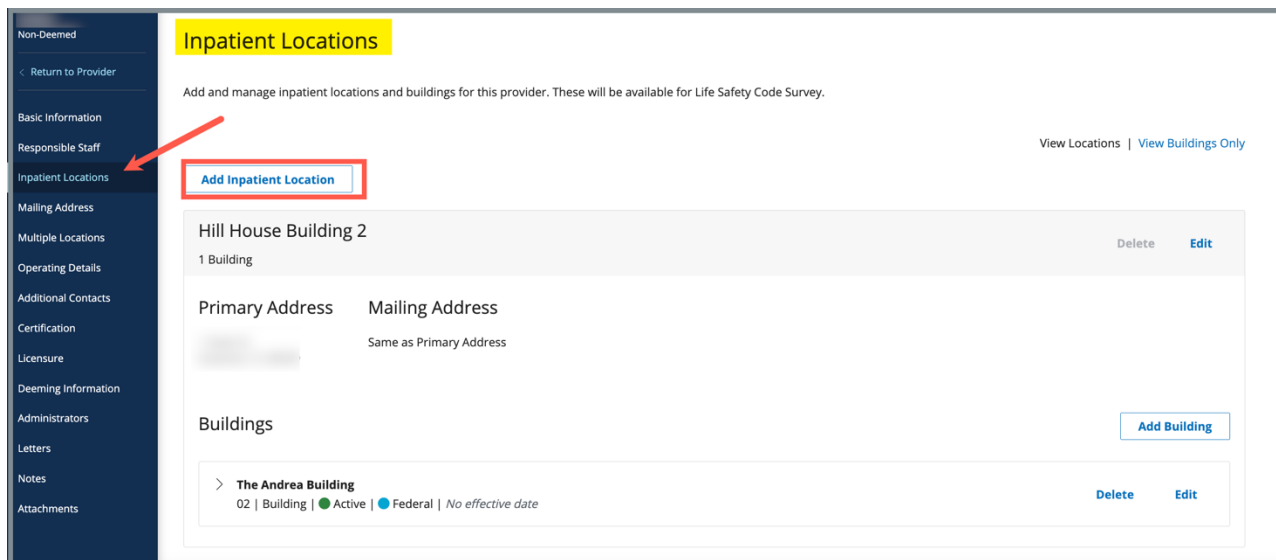
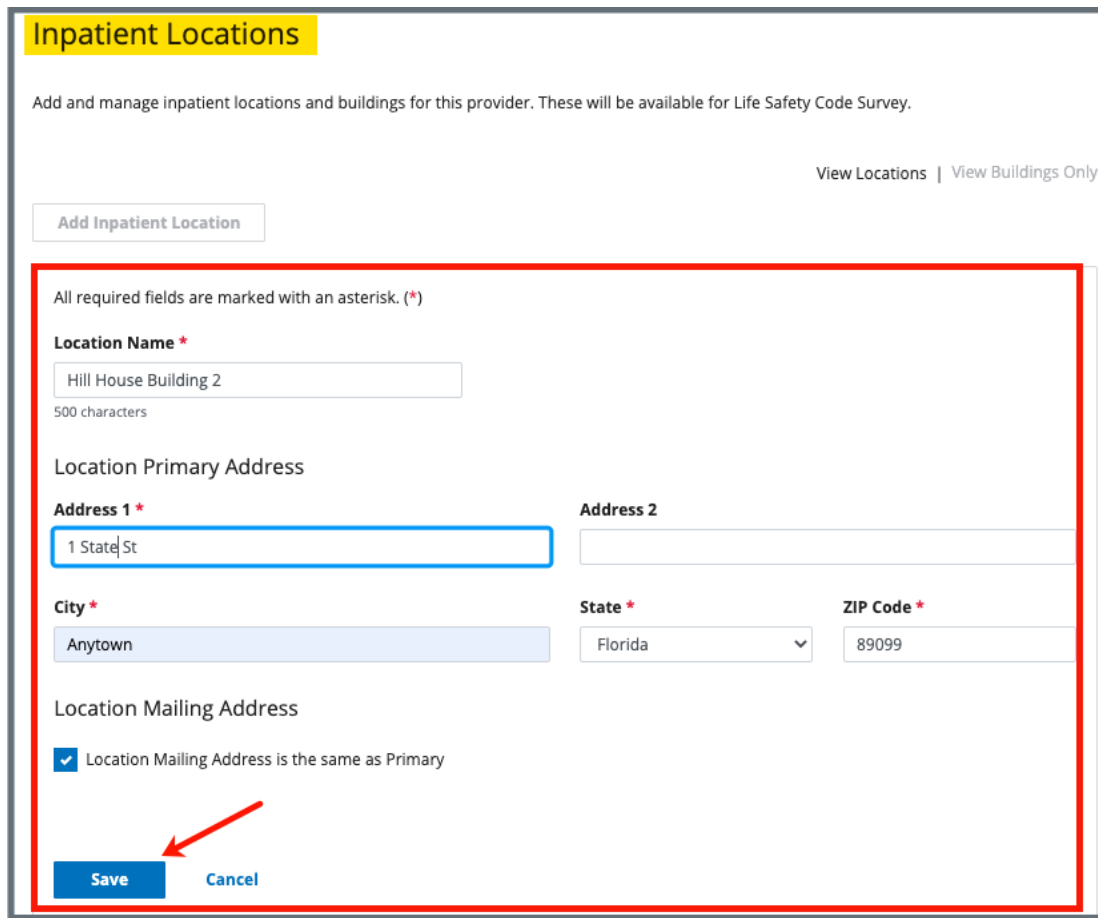


Figure 29: Inpatient Locations

8.2 Click **Add Inpatient Location**. The **Inpatient Location** fields open below. See *Figure 30, Inpatient Locations Fields*.



Inpatient Locations

Add 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 * 1 State St

Address 2

City * Anytown

State * Florida

ZIP Code * 89099

Location Mailing Address

☒ Location Mailing Address is the same as Primary

Save [Cancel](#)

Figure 30: Inpatient Locations Fields

- 8.3** Fill out the information.
- 8.4** Click **Save**. The **Inpatient Locations** page populates with the new location. See *Figure 31, 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 Locations](#) | [View Buildings Only](#)

[Add Inpatient Location](#)

Hill House Building 2 [Edit](#)

No Buildings

Address

1 State St
Anytown, FL 89099

Buildings [Add Building](#)

No buildings
Your buildings will show up here.

Figure 31: 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 32, Inpatient Locations Building*.

Hill House Building 2

No Buildings

Edit

Address

1 State St
Anytown, FL 89099

Buildings

Add Building

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

Parent Location

Hill House Building 2

Building Name *

The Andrea Building

500 characters

Building Licensure

☐ State Licensed Only

Building ID *

02

Limit 2 characters

Type *

Building

Number of Stories

Plan Approval Date

MM/DD/YYYY

Effective Date

MM/DD/YYYY

Closed Date

MM/DD/YYYY

Construction Type

Select one

Construction Date

MM/DD/YYYY

LSC Form Indicator *

LSC 2012 Health Existing

Regulation Set

FED - K - 03.02

Hazmat Area Separate

Select one

FSES Date

MM/DD/YYYY

Sprinkler Status

Select one

Sprinkler Required

Select one

Building Location Detail

Additional details such as landmarks, directions, etc.

Save

Cancel

Figure 32: Inpatient Locations Building

- 8.6** Click **Save**. The **Inpatient Locations** page populates with the new building information. See *Figure 33, Inpatient Locations Buildings Information*.

The screenshot displays the 'Inpatient Locations' page. At the top, a yellow header reads 'Inpatient Locations'. Below it, a subtitle states: 'Add and manage inpatient locations and buildings for this provider. These will be available for Life Safety Code Survey.' A red arrow points from the text 'Toggle between Locations and Buildings' to a red-bordered box containing two links: 'View Locations' and 'View Buildings Only'. On the left, there is a blue button labeled 'Add Inpatient Location'. The main content area shows details for 'Hill House Building 2', including '1 Building' and an 'Edit' link. Below this, the 'Address' is listed as '1 State St, Anytown, FL 89099'. The 'Buildings' section includes an 'Add Building' button and a list item for 'The Andrea Building' (02 | Building | Active | No effective date) with 'Delete' and 'Edit' links.

Figure 33: Inpatient Locations Buildings Information

9. Responsible Staff

Purpose: Add new, delete, or view existing staff for the provider record.

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 34, Provider Responsible Staff*.

Note: The **Add Responsible Staff** page opens when there are no existing responsible staff.

Home Health Agency
Non-Deemed

< Return to Provider

Basic Information

Responsible Staff

Manage Tasks

Mailing Address

Additional Branch
Addresses

Operating and Ownership

Add Responsible Staff

Find and add the responsible staff for this provider.

First Name

Last Name

Organization

Select...

Management Unit

Select one

Work Unit

Select one

Search

Figure 34: 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.

Notes:

- 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 35, Delete a Responsible Staff*.

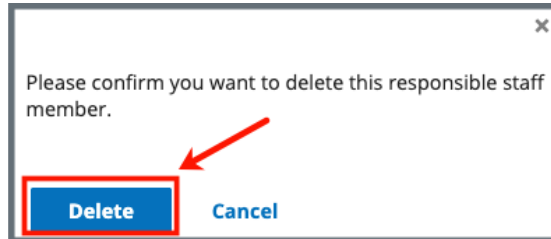


Figure 35: Delete a Responsible Staff

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 36, Manage Tasks* and *Table 5, Manage Tasks Detailed Callout*.

Manage Tasks

Manage and assign tasks for your responsible staff.

Assign users to start managing task details.

Tasks **a** All × Search tasks ×

b Filter View All

c Task	d Due Date	e Status	f Assigned To	g Comments
Provider Maintenance	MM/DD/YYYY	Complete	SAGU_Admin_SINGY, Pat × Assign Staff ×	+
Licensure Review	MM/DD/YYYY	To Do	SAGU_Admin_SINGY, Pat × test2.CMSSINGY, Pat × Assign Staff	+
Scheduling	MM/DD/YYYY	To Do	SAGU_Admin_SINGY, Pat × test2.CMSSINGY, Pat × Assign Staff	+

Figure 36: Manage Tasks

Table 5: Manage Tasks Detailed Callout

No.	Description
a	Select individual tasks from the drop-down menu under Tasks to assign to the Responsible Staff or select All
b	Select View All , Assigned , or Unassigned from the drop-down menu. View All is the default.
c	Each task that is selected shows under Task
d	The Due Date of the task
e	The Status of the task.
f	The Responsible Staff assigned to the task. More than one Responsible Staff can be assigned the task.
g	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 and ICF/IID provider types only.

11.1 View Buildings and Wings

Click **Buildings/Wings** on the left menu. See *Figure 37, Buildings/Wings*. The **Buildings/Wings** page opens.

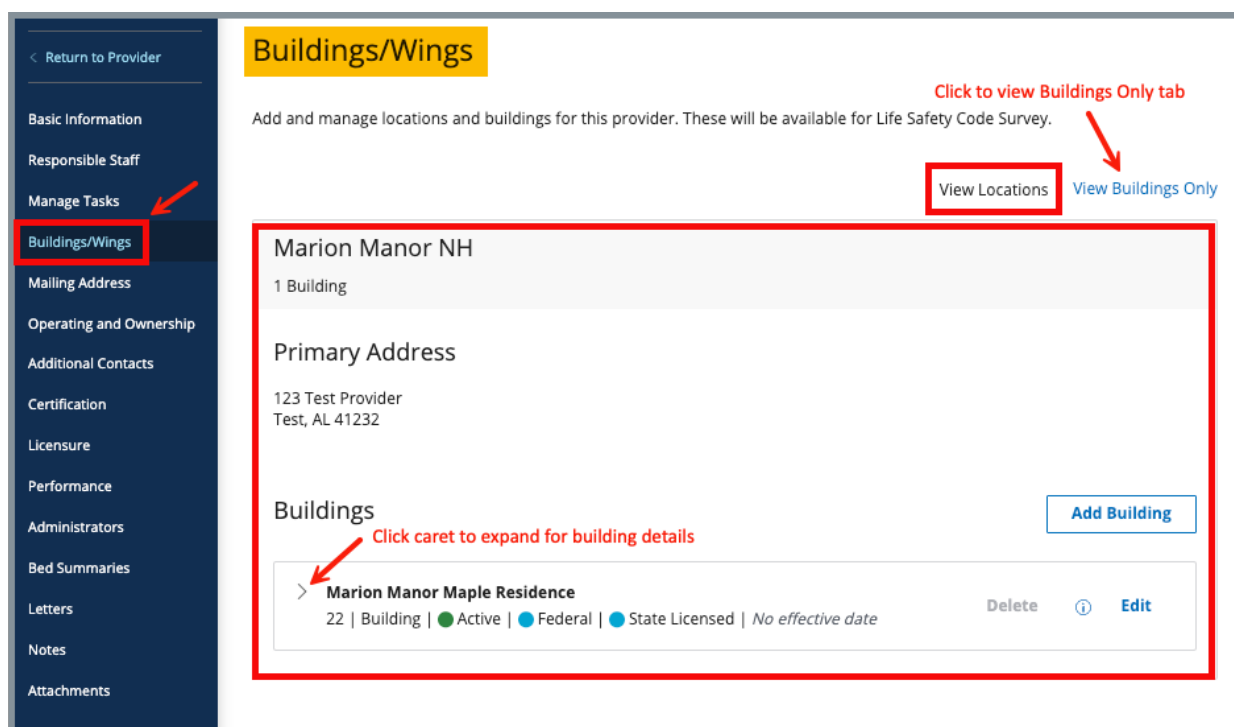


Figure 37: Buildings/Wings

Notes:

- 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 38, 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 Safety 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

[Delete](#) [i](#)
[Edit](#)

Closed Buildings

No Buildings

No buildings

Your buildings will show up here.

Figure 38: 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 39, Add New Building*.

Buildings Add Building

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

Parent Location *
 Marion Manor NH

Building Name *
 500 characters

Building Licensure
☐ State Licensed

Building ID *
 Limit 2 characters

Type *
 Select one

Number of Stories

Plan Approval Date
 MM/DD/YYYY

Effective Date
 MM/DD/YYYY

Closed Date
 MM/DD/YYYY

Construction Type
 Select one

Construction Date
 MM/DD/YYYY

Federal LSC Form Indicator *
 Select one

Regulation Set

State LSC Form Indicator *
 Select one

Regulation Set

Hazmat Area Separate
 Select one

FSES Date
 MM/DD/YYYY

Sprinkler Status
 Select one

Sprinkler Required
 Select one

Building Location Detail
 Additional details such as landmarks, directions, etc.

Save Cancel

Figure 39: 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 40, New Building Information*.

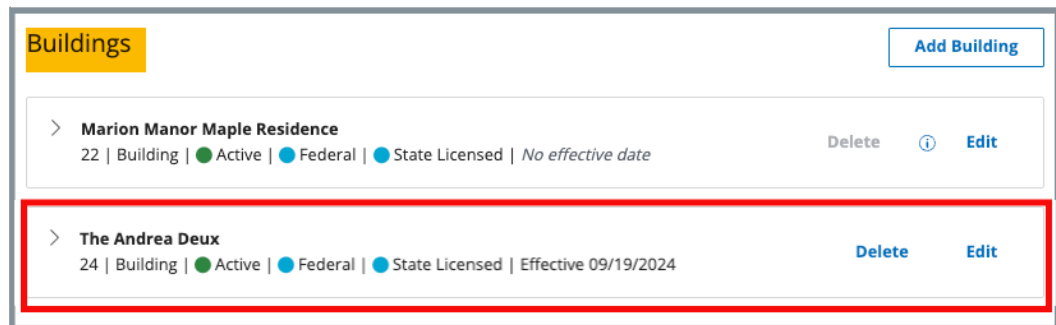


Figure 40: New Buildings Information

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 41, Delete Building Pop-up Window*.

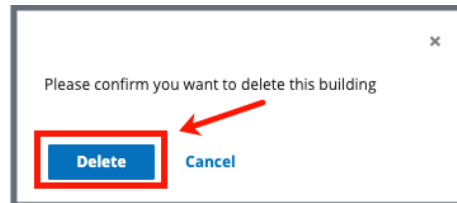


Figure 41: Delete Building Pop-up Window

- 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 Basic Information** page. See *Figure 42, Provider Mailing Address*. The **Mailing Address** window opens.

< Return to Provider

Mailing Address

☐ Same as Practice Location

Address 1 * Address 2

City * State * ZIP Code *

Select one

Save

Figure 42: 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 Basic Information** page. The **Mailing Address** window opens

12.2.2 Click **Edit**. See *Figure 43, Edit Mailing Address*.

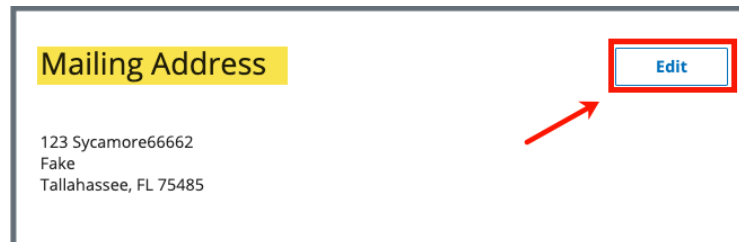


Figure 43: Edit Mailing Address

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 Basic Information** page. See *Figure 44, Locations*. The **Locations** window opens.

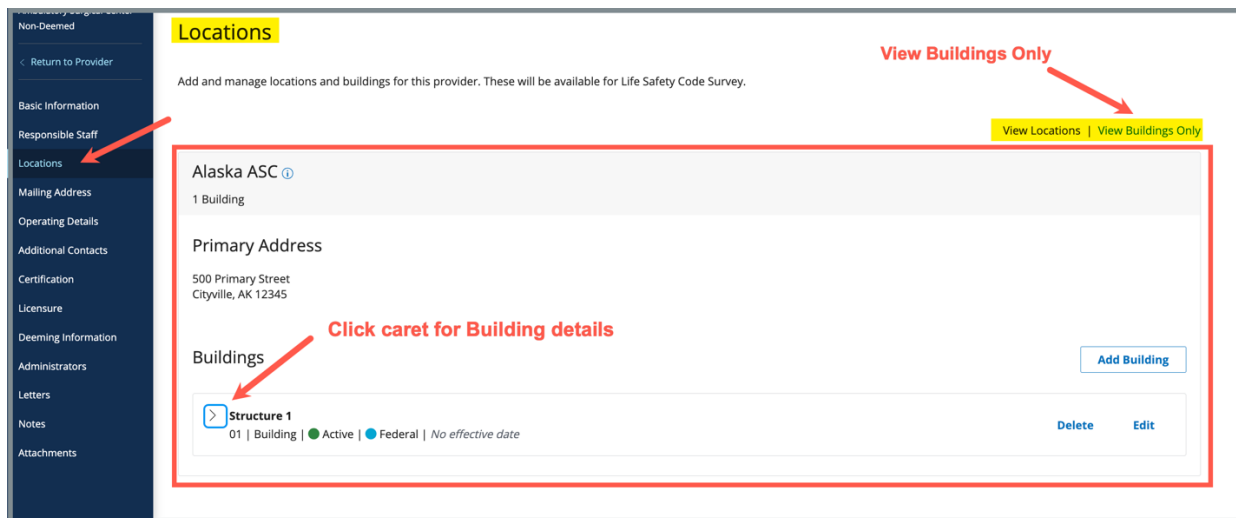


Figure 44: Locations

Notes:

- 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 45, New Building*.

Buildings Add Building

New Building X

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

Parent Location
Andrea's All-Inclusive ASC

Building Name *
500 characters

Building ID *
Limit 2 characters

Type *
Select one

Building Licensure
☐ State Licensed Only

Number of Stories

Plan Approval Date
MM/DD/YYYY

Effective Date
MM/DD/YYYY

Closed Date
MM/DD/YYYY

Construction Type
Select one

Construction Date
MM/DD/YYYY

LSC Form Indicator *
Select one

Regulation Set

Hazmat Area Separate
Select one

FSIS Date
MM/DD/YYYY

Sprinkler Status
Select one

Sprinkler Required
Select one

Building Location Detail
Additional details such as landmarks, directions, etc.

Save **Cancel**

Figure 45: 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 46, New Building Information*.

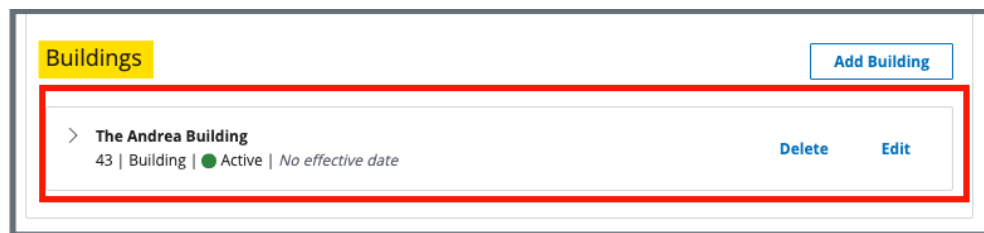


Figure 46: New Buildings Information

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 47, Delete Building Pop-up Window*.

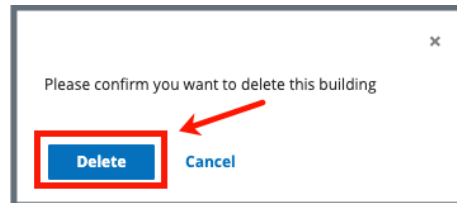


Figure 47: Delete Building Pop-up Window

- 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 Basic Information** page. See *Figure 48, Multiple Locations*. The **Locations** window opens.

Multiple Locations
All required fields are marked with an asterisk (*)

Location Name *

Status: Open Open Date: MM/DD/YYYY

Address

Address 1 * Address 2

City * State * ZIP Code *

County

Save

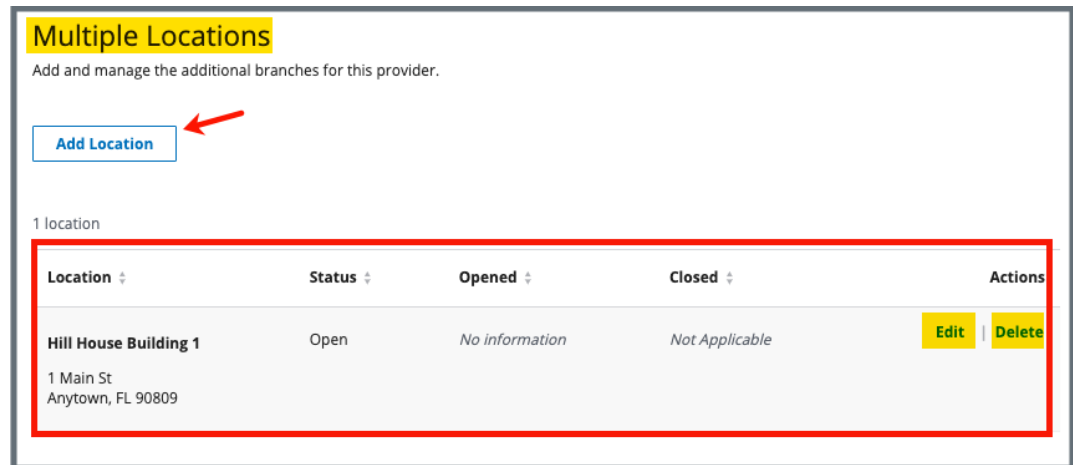
Figure 48: Multiple Locations

14.1.2 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.

- 14.1.3 Click **Save**. The new location information appears in the **Multiple Locations** section. See *Figure 49, Multiple Locations Information*.



Multiple Locations

Add and manage the additional branches for this provider.

[Add Location](#)

1 location

Location	Status	Opened	Closed	Actions
Hill House Building 1 1 Main St Anytown, FL 90809	Open	No information	Not Applicable	Edit Delete

Figure 49: 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 50, Delete Location Pop-up Window*.

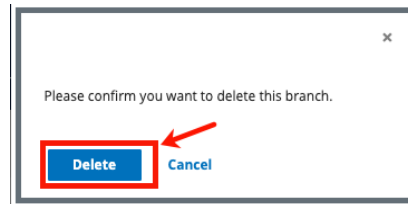


Figure 50: Delete Location Pop-up Window

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 51, Edit Multiple Locations*.

Multiple Locations

All required fields are marked with an asterisk (*)

Location Name *

Hill House Building 1

Status *

☒ Open

☐ Closed

Open Date

MM/DD/YYYY

Address

Address 1 *

1 Main St

Address 2

City *

Anytown

State *

Florida

ZIP Code *

90809

County

Save **Cancel**

Figure 51: 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 CORF, HHA, and OPT/SLP provider types only.

Notes:

- Providers must be certified to add an additional branch.
- New branches are assigned Branch CCNs when the record is saved.

15.1 Click **Additional Branch Addresses** on the **Provider Basic Information** page. See *Figure 52, Provider Additional Branch Addresses*. The **Add Branch** window opens if there are no existing additional branches. If there are existing branches, click **Add Branch**.

The screenshot shows the 'Add Branch' form in the CMS iQIES system. The sidebar on the left contains navigation links: Deemed, Return to Provider, Basic Information, Responsible Staff, Mailing Address, Additional Branch Addresses (highlighted with a red box), Operating and Ownership, Additional Contacts, Certification, Licensure, Deeming Information, Administrators, Letters, Notes, and Attachments. The main form area is titled 'Add Branch' and includes a note: 'All required fields are marked with an asterisk (*)'. The form contains several sections: 'Branch Name' (text input), 'Branch Type' (dropdown menu), 'Medicare Branch ID' (text input with a note: 'Automatically generated upon CMS approval if the provider is certified'), 'CMS Decision Date' and 'CMS Decision Time' (text inputs), 'Additional Comments' (text input), 'CMS Approval Notification' (text input with a note: 'Add and manage the CMS users who will be notified for approval of the Medicare Branch ID.' and an 'Add CMS General Users' button), 'Branch Status' (text input), 'Open Date' (text input), and 'Branch Address' (text inputs for Address 1, Address 2, City, State, ZIP Code, and County). A red box highlights the 'Branch Name', 'CMS Approval Notification', and 'Branch Address' sections. A red arrow points to the 'Save' button at the bottom left.

Figure 52: 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.

Notes:

- 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. Extension Locations

Note: **Extension Locations** is enabled for the CORF and OPT/SLP provider types only.

16.1 Click **Extension Locations** on the **Provider Basic Information** page. See *Figure 53, Extension Locations*.

Note: The **Add Extension Location** window opens the first time an extension location is added. Otherwise, the **Extension Location** window opens with a link to add an extension location. See [Extension Location with Locations](#).

Provider Details

Singy Motion
Commotion PT
CCN 686973
Outpatient Physical
Therapy / Speech
Language Pathology
Non-Deemed

[Return to Provider](#)

Basic Information

Responsible Staff

Manage Tasks

Mailing Address

Extension Locations

Operating and Ownership

Additional Contacts

Certification

Licensure

Deeming Information

Administrators

Letters

Notes

Attachments

Add Extension Location

All required fields are marked with an asterisk (*)

Extension Location Name *

Singy Motion Commotion PT

Medicare Extension Location ID

Automatically generated upon save if the provider is certified

Extension Location Status

Open

Open Date

MM/DD/YYYY

Services Provided *

Check all that apply

☐ Physical Therapy

☐ Speech Pathology

☐ Occupational Therapy

Hours of Operation

Check one

☐ Full-Time

☐ Part-Time

Extension Location Address

Address 1 *

Address 2

City *

State *

Select one

ZIP Code *

County

Save

Figure 53: Extension Locations

16.2 Fill out the information.

16.3 Click **Save**. The **Extension Locations** window opens with details on the location. See *Figure 54, Extension Location with Locations*.

Notes:

- The **Medicare Extension Location ID** is automatically generated when the provider is certified.
- Click **Add Extension Location** to add additional locations.
- Click **Edit** to update any extension location information.

Extension Locations
Add and manage the extension locations for this provider.

[Add Extension Location](#)

1 extension location

Extension Locations	Status	Opened	Closed	Actions
Singy Water Sports Rehab Facility Medicare Extension Location ID 68B4896001 234 5th Street FLEMING ISLAND, FL 32003	Open	01/09/2026	Not Applicable	Edit

Figure 54: Extension Location with Locations

17. Modalities

Note: **Modalities** is enabled for the ESRD provider type only.

- 17.1** Click **Modalities** on the left menu of the **Provider Basic Information** page. See *Figure 55, Locations*. The **Modalities** window opens.

Provider Details

Kidney Beans Connection
CCN 682663
End-Stage Renal Disease Facility
Non-Deemed

[Return to Provider](#)

Basic Information

Responsible Staff

Manage Tasks

Locations

Modalities

Mailing Address

Operating and Ownership

Additional Contacts

Federal Certification Status
Certified

Title
Medicare - 18

Modalities

Modalities from the [CMS-3427](#) completed on 09/04/2025

Current Modalities:

1. In-center Hemodialysis (HD)
2. In-center Peritoneal Dialysis (PD)
3. In-center Nocturnal HD
5. HD in LTC
8. Dialyzer Reuse

Requested Modalities:

1. In-center HD
2. In-center PD
3. In-center Nocturnal HD
8. Dialyzer Reuse

Figure 55: Modalities

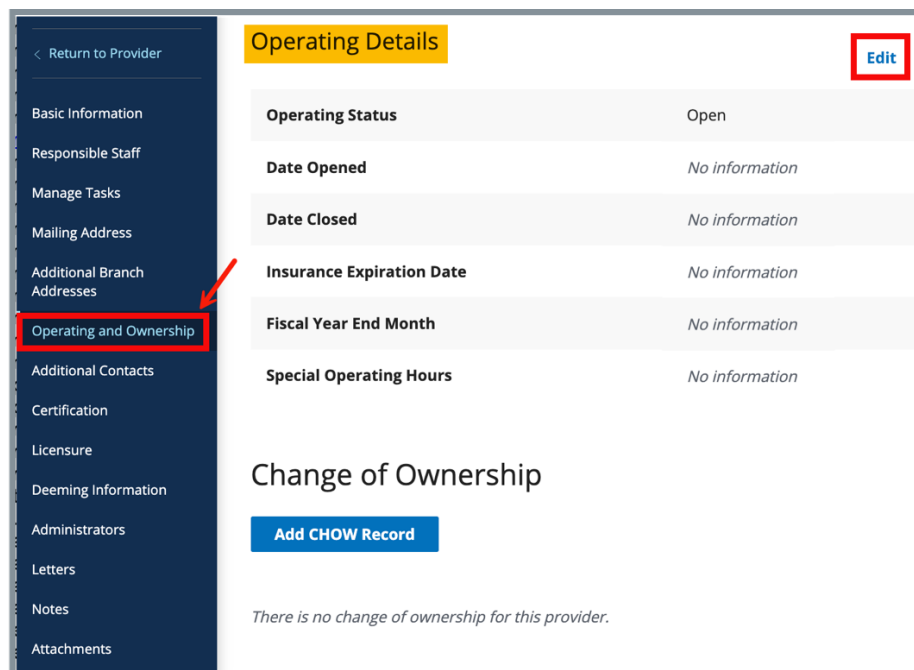
- 17.2** Click **CMS-3427** to view the CMS-3427 form. The form opens in a separate tab.

Note: Modality information found on this page is taken from the most recent completed CMS-3427 form.

18. Operating and Ownership

18.1 Operating Details

18.1.1 Click **Operating and Ownership** on the **Provider Basic Information** page. See *Figure 56, Provider Operating Details*. The **Operating Details** window opens.



Operating Details	
Operating Status	Open
Date Opened	No information
Date Closed	No information
Insurance Expiration Date	No information
Fiscal Year End Month	No information
Special Operating Hours	No information

Change of Ownership

[Add CHOW Record](#)

There is no change of ownership for this provider.

Figure 56: Provider Operating Details

18.1.2 Click **Edit** to make any updates. The editable **Operating Details** page opens.

Notes:

- ESRD provider types show temporary closure reasons, start and stop dates
- ESRD provider types show information from the most recently completed CMS-3427 form.

18.1.3 Update information as needed.

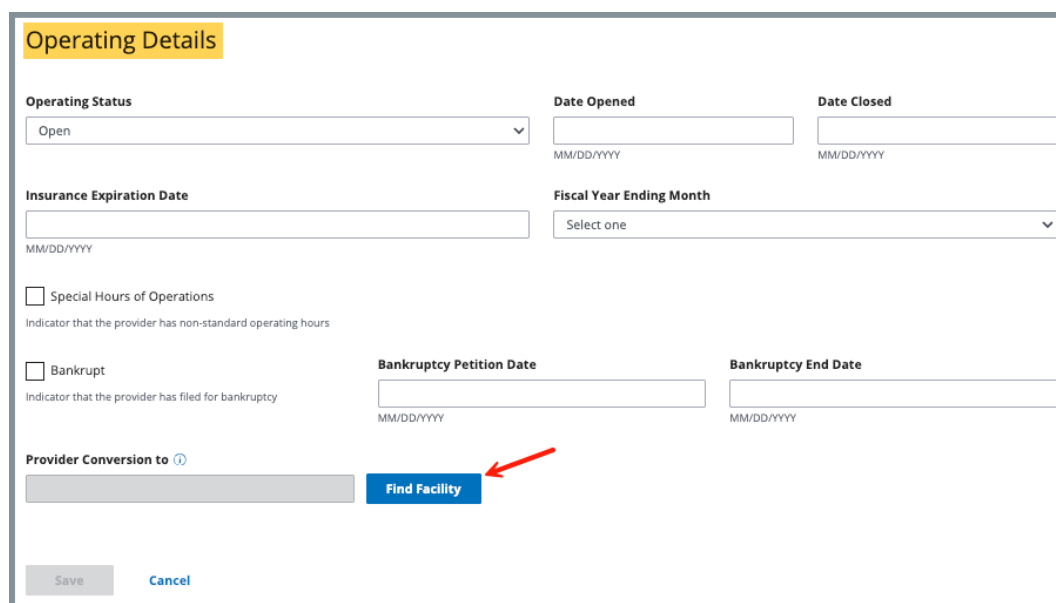
18.1.4 Click **Save**. The **Operating Details** page opens, and the updated information is shown.

18.2 Provider Conversion: OPT/SLP to CORF

Note: The OPT/SLP provider type can convert to a CORF provider.

18.2.1 Click **Edit** on the **Operating Details** page. The editable **Operating Details** page opens.

18.2.2 Click **Find Facility**. See *Figure 57, Find CORF Provider for Conversion*. The **Select the CORF Provider for Conversion** pop-up window opens.



The screenshot shows the 'Operating Details' form. At the top, there's a yellow header with the text 'Operating Details'. Below this, the form is organized into several sections. The first section contains 'Operating Status' (a dropdown menu with 'Open' selected), 'Date Opened' (a date input field with 'MM/DD/YYYY' placeholder), and 'Date Closed' (a date input field with 'MM/DD/YYYY' placeholder). The second section contains 'Insurance Expiration Date' (a date input field with 'MM/DD/YYYY' placeholder) and 'Fiscal Year Ending Month' (a dropdown menu with 'Select one' selected). Below these are two checkboxes: 'Special Hours of Operations' (with a note 'Indicator that the provider has non-standard operating hours') and 'Bankrupt' (with a note 'Indicator that the provider has filed for bankruptcy'). The third section contains 'Bankruptcy Petition Date' and 'Bankruptcy End Date' (both date input fields with 'MM/DD/YYYY' placeholder). At the bottom, there's a 'Provider Conversion to' section with a dropdown menu and a blue 'Find Facility' button. A red arrow points to the 'Find Facility' button. At the very bottom of the form are 'Save' and 'Cancel' buttons.

Figure 57: Find CORF Provider for Conversion

18.2.3 Search for a provider by Provider name, DBA, CCN, or State Facility ID.

18.2.4 Select the radio button next to the provider. See *Figure 58, Select CORF Provider for Conversion*.

Select the CORF Provider for Conversion

Search for Provider

FL Provider or DBA Water Search

1 Provider

Provider	ID	Provider Type	Deemed Status
☒ Singy Water Sports Rehab Facility	CCN 684896 FACID FLSWSRF123	CORF	Non-Deemed

Submit Cancel

Figure 58: Select CORF Provider for Conversion

18.2.5 Click **Submit**.

18.2.6 Click **Save**.

18.2.7 Verify **Provider Conversion** is correct in both original provider and converted provider. See *Figure 59, Provider Conversion From OPT/SLP Provider* and *Figure 60, Provider Conversion To CORF*.

Note: **Provider Conversion** is a clickable link.

Home / Search / Singy Water Sports Rehab Facil... / Provider Details

Federal Certification Status	Title
Certified	Medicare - 18

Operating Details

Operating Status	Open
Date Opened	No information
Date Closed	No information
Insurance Expiration Date	No information
Fiscal Year End Month	No information
Special Operating Hours	No information
Provider Converted from	Singy Motion Commotion PT (686973)

Figure 59: Provider Conversion From OPT/SLP

Home / Search / Singy Motion Commotion PT / Provider Details

Federal Certification Status	Title
Terminated	Medicare - 18

Operating Details

Operating Status	Open
Date Opened	07/25/2025
Date Closed	No information
Insurance Expiration Date	2026-07-25
Fiscal Year End Month	June
Special Operating Hours	No information
Provider Conversion To	Singy Water Sports Rehab Facility (684896)

Figure 60: Provider Conversion To CORF

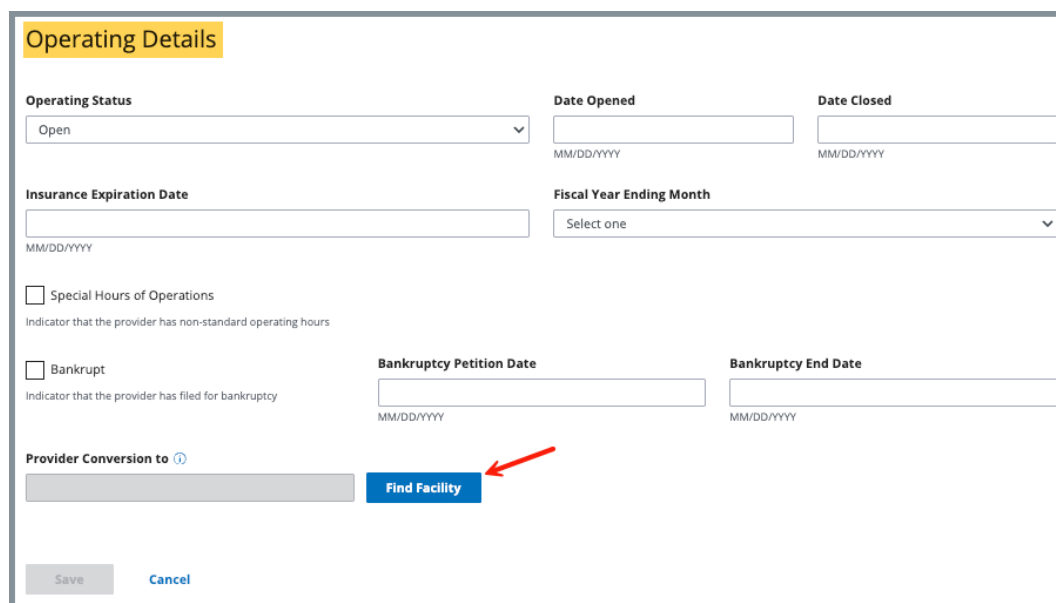
18.3 Provider Conversion: FQHC to RHC and RHC to FQHC

Notes:

- Both the FQHC and RHC provider types can convert between provider types.
- The examples below show an FQHC provider type conversion to an RHC provider type. RHC can also convert to FQHC.

18.3.1 Click **Edit** on the **Operating Details** page. The editable **Operating Details** page opens.

18.3.2 Click **Find Facility**. See *Figure 61, Find RHC Provider for Conversion*. The **Select the RHC Provider for Conversion** pop-up window opens.



The screenshot shows the 'Operating Details' form. At the top, there's a yellow header with the text 'Operating Details'. Below this, the form is organized into several sections. The first section contains 'Operating Status' (a dropdown menu with 'Open' selected), 'Date Opened' (a date input field with 'MM/DD/YYYY' placeholder), and 'Date Closed' (a date input field with 'MM/DD/YYYY' placeholder). The second section contains 'Insurance Expiration Date' (a date input field with 'MM/DD/YYYY' placeholder) and 'Fiscal Year Ending Month' (a dropdown menu with 'Select one' selected). The third section contains two checkboxes: 'Special Hours of Operations' (with a note 'Indicator that the provider has non-standard operating hours') and 'Bankrupt' (with a note 'Indicator that the provider has filed for bankruptcy'). The fourth section contains 'Bankruptcy Petition Date' and 'Bankruptcy End Date' (both date input fields with 'MM/DD/YYYY' placeholder). The fifth section contains 'Provider Conversion to' (a dropdown menu with a help icon) and a 'Find Facility' button. A red arrow points to the 'Find Facility' button. At the bottom of the form, there are 'Save' and 'Cancel' buttons.

Figure 61: Find Provider for Conversion

18.3.3 Search for a provider by Provider name, DBA, CCN, or State Facility ID.

18.3.4 Select the radio button next to the provider. See *Figure 62, Select RHC Provider for Conversion*.

Figure 62: Select RHC Provider for Conversion

18.3.5 Click **Submit**.

18.3.6 Click **Save**.

18.3.7 Verify **Provider Conversion** is correct in both original provider and converted provider. See *Figure 63, Provider Conversion From FQHC* and *Figure 64, Provider Conversion To RHC*.

Note: **Provider Conversion** is a clickable link.

Figure 63: Provider Conversion From FQHC

Provider Details
Singy's Florida FQHC
IQIES ID 3813548
Federally Qualified Health Center

[Return to Provider](#)

[Basic Information](#)

[Responsible Staff](#)

[Manage Tasks](#)

[Mailing Address](#)

[Operating and Ownership](#)

[Additional Contacts](#)

[Certification](#)

[Licensure](#)

[Administrators](#)

[Letters](#)

[Notes](#)

Federal Certification Status	Title
Pending Certification	No information

Operating Details[Edit](#)

Operating Status	Open
Date Opened	No information
Date Closed	No information
Insurance Expiration Date	No information
Fiscal Year End Month	No information
Special Operating Hours	No information
Provider Conversion To	Singy's Outback RHC (683828)

Figure 64: Provider Conversion to an RHC

18.4 Change of Ownership (CHOW)

- 18.4.1 Click **Operating and Ownership** on the **Provider Basic Information** page.
- 18.4.2 Click **Add CHOW Record**. See *Figure 65, Add CHOW Record*. The **Add Change of Ownership** window opens. See *Figure 66, Add Change of Ownership*.



Figure 65: Add CHOW Record

A screenshot of a web form titled "Add Change of Ownership" in a yellow header box. The form contains a dropdown menu labeled "Change of Ownership Type *" with "Select one" and a downward arrow. Below this are two date input fields: "Request Received Date" and "Effective Date *", both with "MM/DD/YYYY" placeholders. At the bottom are "Save" and "Cancel" buttons. A red arrow points from the "Cancel" button to the "Save" button. The entire form area is enclosed in a red rectangular border.

Figure 66: 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 new provider is created. No surveys or CCN are retained.

With Assignment

- a. Select **With Assignment** (see *Figure 67, With Assignment*) under **Change of Ownership Type**.

Add Change of Ownership

Change of Ownership Type *

With Assignment

Request Received Date

Effective Date *

MM/DD/YYYY

MM/DD/YYYY

Save Cancel

Figure 67: 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 68, With Assignment CHOW Record*.

Change of Ownership

Add CHOW Record

Type	Related Provider	Request Received	Effective Date	Actions
With Assignment	No information	No information	12/06/2023	Edit

Figure 68: With Assignment CHOW Record

Without Assignment

- a. Select **Without Assignment** (see *Figure 69, Without Assignment*) under **Change of Ownership Type**.

Add Change of Ownership

Change of Ownership Type *

Without Assignment

Request Received Date

MM/DD/YYYY

Effective Date *

MM/DD/YYYY

Previous Provider Name *

Find Facility

Save Cancel

Figure 69: 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 70, Select Related Provider*.

Select Related Provider

Be sure to review state is correct

Search for Provider

AL 2297049 Search

Enter provider or DBA name, CCN, or State Facility ID (FACID)

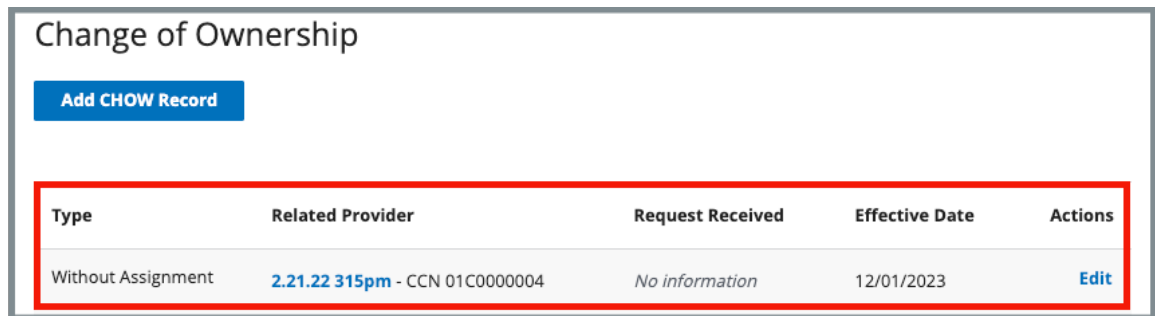
1 Provider

Provider	ID	Provider Type	Deemed Status
2.21.22 315pm	CCN 01C0000004 FACID IQ00000002684700	ASC	Non-Deemed

Submit Cancel

Figure 70: 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 71, Without Assignment CHOW Record*.



Type	Related Provider	Request Received	Effective Date	Actions
Without Assignment	2.21.22 315pm - CCN 01C0000004	No information	12/01/2023	Edit

Figure 71: Without Assignment CHOW Record

19. Relationship Manager

Note: Relationship Manager is enabled for the Hospital provider type only.

19.1 Provider Relationships

- 19.1.1 Click **Relationship Manager** on the left menu of the **Provider Basic Information** page. See *Figure 72, Relationship Manager*. The **Provider Relationships** window opens.

Note: Existing provider relationships appear under **Provider Relationships**.

The screenshot shows the 'Provider Details' page for 'Siny Hospital for Kids'. The left sidebar has a red box around 'Relationship Manager'. The main area has a yellow header 'Provider Relationships' and a blue 'Add Relationship' button. Below it, a section titled 'Provider Subunits' contains two buttons: 'Add Psychiatric Subunit' and 'Add Rehabilitation Subunit'. Red arrows point to the 'Relationship Manager' link and the 'Add Relationship' button.

Figure 72: Relationship Manager

- 19.1.2 Click **Add Relationship**. The **Relationship Type** pop-up window opens. See *Figure 73, Relationship Type Pop-Up Window*.

The screenshot shows the 'Relationship Type' pop-up window. It has a dropdown menu labeled 'Relationship Type' with 'Select one' as the current selection. A red arrow points to the dropdown arrow. The window also has 'Cancel' and 'Add Relationship' buttons. A list of options is visible: 'Select one', 'Affiliated Provider', 'Co-located Hospital', and 'Transplant Program'.

Figure 73: Relationship Type Pop-Up Window

19.1.3 Select **Relationship Type** from the drop-down menu. The Search for Provider fields open. See *Figure 74, Search for Provider Fields*.

Relationship Type *

Affiliated Provider

Search for Provider

FL Provider or DBA Singy Search

4 Providers

Provider	ID	Provider Type	Deemed Status
☐ Singy ESRD	CCN 102345 FACID FL75831	ESRD	Non-Deemed
☐ Singy's High Road	FACID FL29384	HHA	Non-Deemed
☐ Singy's Florida FQHC	FACID FL20934	FQHC	Non-Deemed
☐ Singy's Outback RHC	CCN 683828 FACID FL95721	RHC	Non-Deemed

Cancel Add Relationship

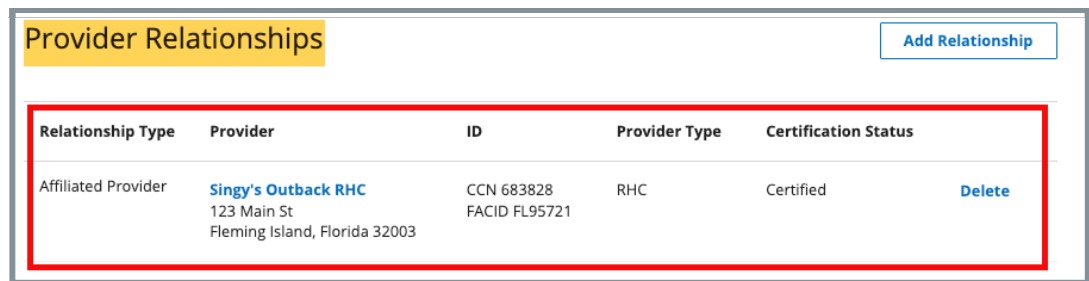
Figure 74: Search for Provider Fields

19.1.4 Click radio button next to desired provider.

19.1.5 Click **Add Relationship**. The **Provider Relationship** page updates. See *Figure 75, Provider Relationships*.

Notes:

- **Add Relationship** is disabled until a **Relationship Type** and **Provider** are selected.
- Additional relationships can be added. Click **Add Relationship** to add additional relationships.
- Click **Delete** to delete a relationship. Be aware that **Delete** immediately deletes the provider relationship. There is no confirmation window.



Relationship Type	Provider	ID	Provider Type	Certification Status
Affiliated Provider	Singy's Outback RHC 123 Main St Fleming Island, Florida 32003	CCN 683828 FACID FL95721	RHC	Certified

Figure 75: Provider Relationships

19.2 Provider Subunits

Notes:

- Subunits cannot be deleted once created.
- Only one subunit of each type can be added.

19.2.1 Click **Relationship Manager** on the left menu of the **Provider Basic Information** page. See *Figure 76, Relationship Manager*. The **Provider Subunits** window opens.

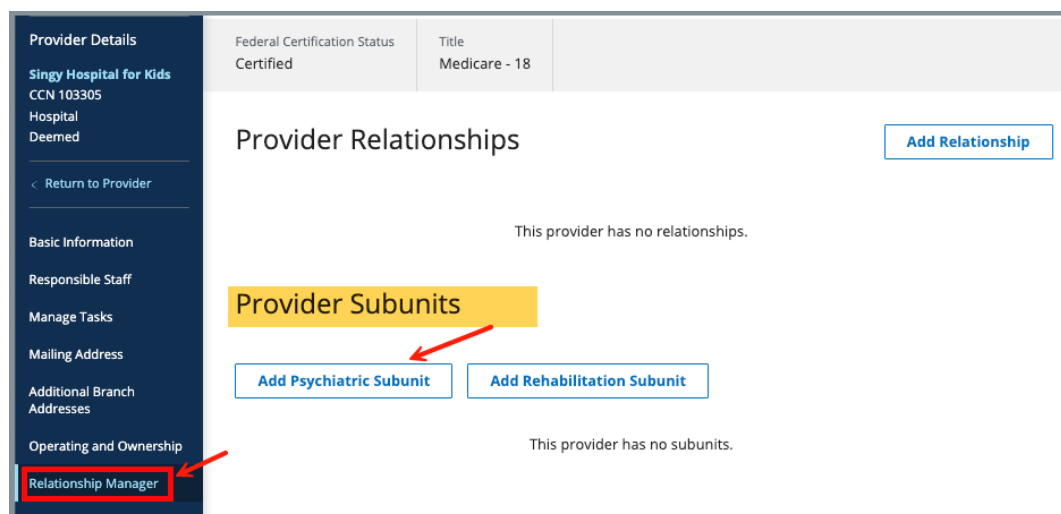


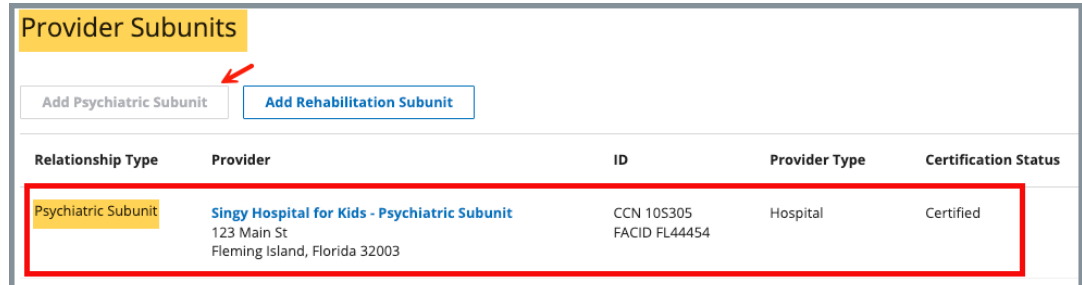
Figure 76: Provider Subunits

19.2.2 Click **Add Psychiatric Subunit** to add a psychiatric subunit. The psychiatric subunit is immediately created and shows below. See *Figure 77, Psychiatric Subunit*.

Provider Subunits				
Add Psychiatric Subunit Add Rehabilitation Subunit				
Relationship Type	Provider	ID	Provider Type	Certification Status
Psychiatric Subunit	Singy Hospital for Kids - Psychiatric Subunit 123 Main St Fleming Island, Florida 32003	CCN 105305 FACID FL44454	Hospital	Certified

Figure 77: Psychiatric Subunit

- 19.2.3 Click **Add Rehabilitation Subunit** to add a rehabilitation subunit. The rehabilitation subunit is immediately created and shows below. See *Figure 78, Rehabilitation Subunit*.



The screenshot shows a web interface titled "Provider Subunits". At the top, there are two buttons: "Add Psychiatric Subunit" and "Add Rehabilitation Subunit". A red arrow points to the "Add Rehabilitation Subunit" button. Below the buttons is a table with five columns: "Relationship Type", "Provider", "ID", "Provider Type", and "Certification Status". The table contains one row of data, which is highlighted with a red border. The "Relationship Type" column has a yellow highlight on the text "Psychiatric Subunit".

Relationship Type	Provider	ID	Provider Type	Certification Status
Psychiatric Subunit	Singy Hospital for Kids - Psychiatric Subunit 123 Main St Fleming Island, Florida 32003	CCN 105305 FACID FL44454	Hospital	Certified

Figure 78: Rehabilitation Subunit

20. Additional Contacts

Once one additional contact is listed, the **Edit**, **Add Emergency Contact**, and **Add Additional Contact** buttons appear. See *Figure 79, Edit, Add Emergency Contact and Add Additional Contact Buttons*.

The screenshot displays a web interface titled "Additional Contacts" in a yellow header. Below the header, a contact entry for "Michael Johnson" is shown, labeled as a "Provider Contact". To the right of the name, there are "Edit" and "Delete" buttons. The contact details are listed under the heading "Contacts":
- **Phone**: (405) 222-1111
- **Fax**: (405) 222-1112
- **Email**: mj@noemail.com
- **Website**: www.cms.hhs.gov
At the bottom of the interface, two buttons are highlighted with red boxes: "Add Emergency Contact" and "Add Additional Contact".

Figure 79: Edit, Add Emergency Contact and Add Additional Contact Buttons

20.1 Add First Additional Contact

- 20.1.1 Click **Additional Contacts** on the **Provider Basic Information** page. See *Figure 80, Provider Additional Contacts*. The **Additional Contacts** window opens.

< Return to Provider

Additional Contacts

All fields are optional. Complete at least one field to save.

Contact Name

Contact Type

Phone Ext Fax

E-Mail Website

Save

Figure 80: Provider Additional Contacts

- 20.1.2 Fill out the information.
- 20.1.3 Click **Save**. The **Additional Contacts** updates and is listed.

20.2 Edit Additional Contacts

20.2.1 Click **Edit** to make any updates. Another **Additional Contacts** page opens and all fields except **Contact Type** can be updated.

20.2.2 Fill out the information.

20.2.3 Click **Save**.

20.3 Add Emergency Contact

20.3.1 Click **Add Emergency Contact** to add an emergency contact. **Another Additional Contacts** page opens and all fields except **Contact Type** can be updated.

20.3.2 Fill out the information.

20.3.3 Click **Save**.

20.4 Add Additional Contact After One Contact has been Added

20.4.1 Click **Add Additional Contact** to add an emergency contact. **Another Additional Contacts** page opens and all fields except **Contact Type** can be updated.

20.4.2 Fill out the information.

20.4.3 Click **Save**.

21. Certification

Notes:

- 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.
- **Certification Date:**
 - The **Certification Date** derives from the most recent survey exit date and is editable for nondeemed Providers.
 - The **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](#).
- **ESRD:**
 - ESRDs have an additional status of **Denied Certification**.
 - The **Emergency/Vacation** radio button is only for the **ESRD SPRDF** subtype.
- **Hospitals:** Shows the OPTN code under **Federal Certification**.
- **OPO:** OPO provider types can view the OPO QCOR Public Report. Click the link on the Certification page. See *Figure 81, OPO QCOR Public Report Link*.

Note: The **QCOR** page opens in a separate tab.



Figure 81: OPO QCOR Public Report Link

21.1 Certification Information

- 21.1.1 Click **Certification** on the **Provider Basic Information** page. See *Figure 82, Provider Federal Certification Details*. The **Certification** window opens with details on the certification and the certification history.

The screenshot shows the 'Certification' page in the CMS iQIES system. The left sidebar contains a menu with 'Certification' highlighted. The main content area is titled 'Certification' and includes an 'Edit' button. Below the title, there is a section for 'Federal Certification' which contains a table of provider details. Below this, there is a section for 'Certificate of Need' which states that certificates can be uploaded in 'Provider Attachments' and that there are no certificates of need for this provider. At the bottom, there is a section for 'Certification History' which contains a table of certification history.

Provider Subtype	Certification Status	Certification Title	CCN	Certification Date	Expiration Date	Original Participation Date	Termination Date	Withdrawal Type
Independent Renal Dialysis Facility	Certified	Medicare - 18	682663	09/03/2025	No information	09/03/2025	No information	No information

Figure 82: Provider Federal Certification Details

21.1.2 Click **Edit** to make any updates. The **Certification** page opens with current certification and certification history details.

21.1.3 Update information as needed.

Notes:

- **Self Attestation** is available for the OPT/SLP, CORF, PXR, and RHC provider types. Review [Self Attestation](#) below for details.
- Once assigned, the CCN cannot be changed.
- Only ESRD provider types show the **Certificate of Need**.

21.1.4 Click **Save**. The **Certification** page updates with the edited information.

21.2 Self Attestation

Notes:

- The **Self Attestation** fields are disabled until a self attestation is uploaded in Attachments.
- PRTF provider type requires a self attestation, but does not require a **Certification** page update. Upload the PRTF self attestation in **Attachments**.

21.2.1 Upload a self attestation in **Attachments**. Review [Letters, Notes, Attachments User Manual](#) for details on how to upload an attachment, if needed.

21.2.2 Click **Certification** on the left menu.

21.2.3 Check **Self Attestation**. The **Self Attestation Date** becomes available. See *Figure 83, Self Attestation*.

The screenshot shows a web form titled "Certification" with a subtitle "All required fields are marked with an asterisk (*)". Below the title is a section for "Federal Certification" with a "Certified" status. The form contains several fields: "Provider Subtype *" (a dropdown menu showing "Medicare OPT/SLP"), "CCN" (a text field with "686978"), "Certification Date *" (a date field showing "03/01/2026" with a "MM/DD/YYYY" format hint), and "Original Participation Date" (a text field with "03/01/2026"). At the bottom, there is a "Self Attestation" section with a checked checkbox and a "Self Attestation Date *" field (a date field with a "MM/DD/YYYY" format hint). This entire "Self Attestation" section is highlighted with a red rectangular box.

Figure 83: Self Attestation

21.2.4 Type the **Self Attestation Date**.

21.2.5 Click **Save**.

22. Licensure

22.1 Click **Licensure** on the **Provider Basic Information** page. See *Figure 84, Licensure Details*. The **Licensure** window opens.

Licensure

[Edit](#)

State Licensure

State Licensed	Yes
State Licensure Status	Licensed
License Type	ANNUAL
License Number	B52
Issue Date	09/19/2024
Effective Date	09/19/2024
Expiration Date	09/19/2027

Additional Information

Employer/Tax Identification Number	No information
State Facility ID	IQ00000002535606

Figure 84: Licensure Details

22.2 Click **Edit** to make any updates. The **Licensure** page opens.

22.3 Update information as needed.

Notes:

- Once assigned, the CCN cannot be changed.
- Certain licensure information may not be available for all provider types.

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

23. Accreditation

Note: Accreditation is enabled for the PRTF provider type only.

23.1 Click **Accreditation** on the **Provider Basic Information** page. See *Figure 85, Accreditation* and *Table 6, Accreditation Detailed Callout*. The **Accreditation** window opens.

Provider Details
Siny Psychiatric Residential Treatment Facility
CCN 10L017
Psychiatric Residential Treatment Facility
Accredited

< Return to Provider

Basic Information
Responsible Staff
Manage Tasks
Mailing Address
Operating and Ownership
Additional Contacts
Certification
Licensure
Accreditation
Administrators
Bed Summaries
Letters
Notes
Attachments

Federal Certification Status
Certified

Title
Medicaid - 19

Accreditation Information

a Current Accreditation Status
Accredited

Current Accreditation Date ⓘ
06/10/2026

b Accrediting Organizations
Add a new accrediting organization and manage accreditation organizations and status.
Add Accrediting Organization

c Accrediting Organization
Commission on Accreditation of Rehabilitation Facilities (CARF)

d Edit

AO Facility Id	No information
Accreditation Status	Accredited
Initial Accreditation Date ⓘ	06/10/2026
Current Accreditation Date ⓘ	06/10/2026
Expiration Date	06/10/2029

Figure 85: Accreditation

Table 6: Manage Tasks Detailed Callout

No.	Description
a	Shows the accreditation status and date
b	Add additional accreditation organizations (AO)
c	List of current accrediting organizations
d	Click Edit to update existing AO information

23.2 Click **Add Accreditation Organization** to add an AO. The **Add Accreditation Organization** opens. See *Figure 86, Add Accreditation Organization*.

Add Accrediting Organization

All required fields are marked with an asterisk (*)

Accrediting Organization *

Commission on Accreditation of Rehabilitation Facilities (CARF) ▼

AO Facility ID

Accreditation Status *

☐ Pending

☒ Accredited

☐ Withdrawn

☐ Loss of Accreditation Status

☐ Expired

Accreditation Date *

06/10/2026

MM/DD/YYYY

Expiration Date *

06/10/2029

MM/DD/YYYY

Save Section

Figure 86: Add Accreditation Organization

23.3 Fill out information.

Note: Select **Other** from the **Accrediting Organization** drop-down menu to enter a custom AO. The **Other Accreditation Organization Name** field opens and a custom AO can be added.

23.4 Click **Save Section**. The **Accrediting Organizations** page re-opens and the AO is shown.

Note: A list of AOs is shown when there is more than one AO. There is an **Edit** button for each AO.

24. Transplant Programs

Note: Transplant Programs is enabled for the Hospital provider type with **Organ Transplant Programs** subtype only.

Click **Transplant Programs** on the **Provider Basic Information** page. See *Figure 87, Organ Transplant Programs*. The **Organ Transplant Programs** window opens.

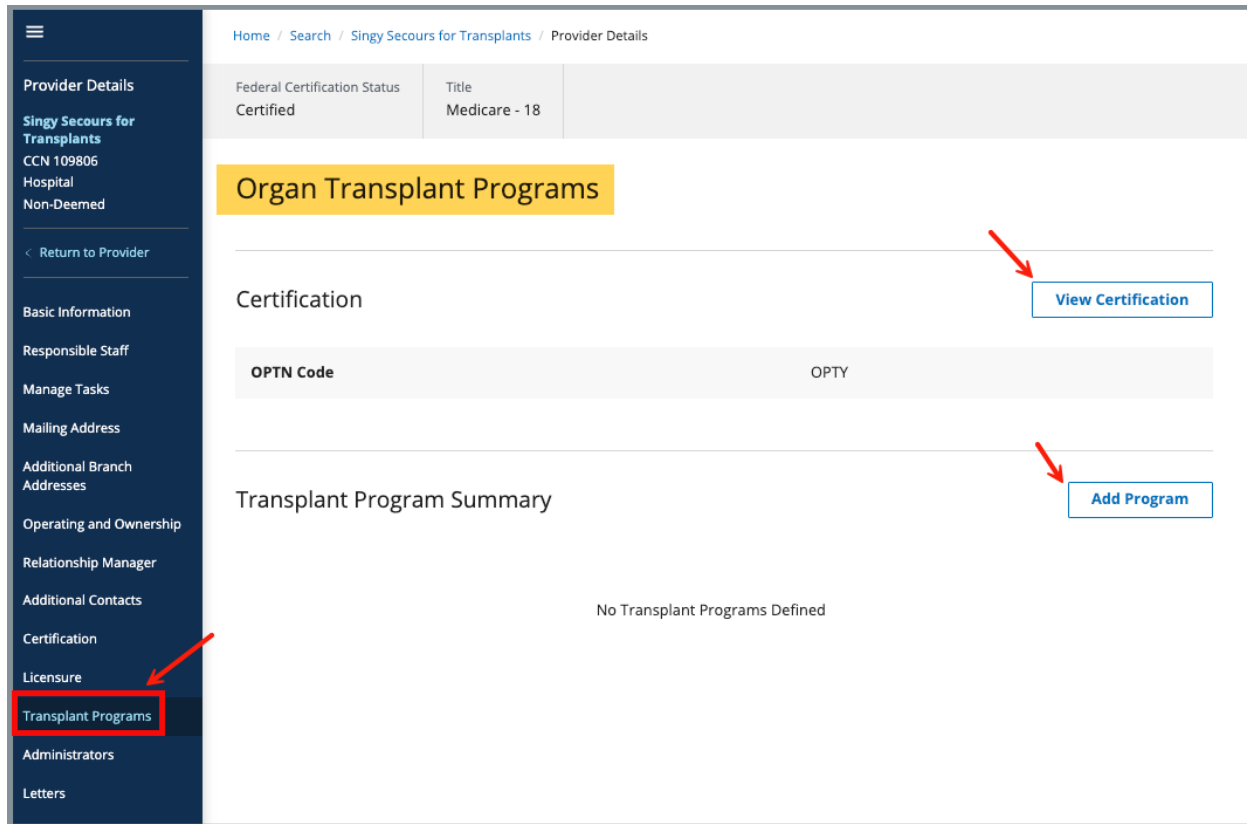


Figure 87: Organ Transplant Programs

24.1 Certification

24.1.1 Click **View Certification** to go to the [Certification](#) page and view the certification information.

Note: The **OPTN Code** is generated on the [Certification](#) page.

24.1.2 Click **Transplant Programs** on the left menu to return to the **Organ Transplant Programs** page.

24.2 Transplant Program Summary

24.2.1 Click **Add Program** to go to the **Add Transplant Program** page. See *Figure 88, Add Transplant Program*.

Add Transplant Program

Program Type *
Select one

Program Status *
Select one

Original Medicare Approval Date
MM/DD/YYYY

Application Information

Date Application is Received
MM/DD/YYYY

Additional fields below

Figure 88: Add Transplant Program

24.2.2 Fill out the information.

Notes:

- A **Pediatric Pancreas Program Type** must also have an approved **Pediatric Kidney Program Type**.
- An **Adult Pancreas Program Type** must also have an approved **Adult Kidney Program Type**.
- A **Pediatric Intestine Multivisceral Program Type** must also have an approved **Pediatric Liver Program Type**.
- An **Adult Intestine Multivisceral Program Type** must also have an approved **Adult Liver Program Type**.

24.2.3 Click **Save**. The **Transplant Program Summary** page opens with the program information. See *Figure 89, Transplant Program Summary* and *Table 7, Transplant Program Summary Detailed Callout*.

The screenshot shows the 'Transplant Program Summary' page. At the top right is a blue 'Add Program' button (a). Below it is a table with columns: 'Program Type' (b) showing '> Adult Heart-only (AHO)', 'Status' (c) showing 'Program Approved', 'Approval Date' (d) showing '04/13/2026', 'Surveyed For Approval' (e) showing 'Onsite' and a 'See history...' link, and 'Citations' (f) showing 'E0001, E0004, See all...'. At the bottom right are 'Edit' (g) and 'Delete' (h) buttons.

Figure 89: Transplant Program Summary

Table 7: Transplant Program Summary Detailed Callout

No.		Description
a	Add Program	Click to add additional transplant programs
b	Program Type	Click the caret to view program details
c	Status	Program status
d	Approval Date	Original Medicare approval date
e	Surveyed for Approval	Click See history... to open Transplant Program Surveyed History pop-up window. See <i>Figure 90, Transplant Program Surveyed History</i> . The Survey Track is a clickable link.
f	Citations	Click any citation to review citation (links to the citation on the survey page) or click See all to see all associated citations. See <i>Figure 91, Transplant Program Citations</i> .
g	Edit	Click Edit to edit program details. Note: Program Type cannot be edited.
h	Delete	Click Delete to delete the program. A pop-up window opens to confirm deletion. Note: Delete is disabled when surveys or citations are attached.

Transplant Program Surveyed History			
Adult Heart-only (AHO)			
Survey Track	Start Date	Exit Date	Surveyed for Approval
32F4E1 	04/02/2026	No information	Onsite

Figure 90: Transplant Program Surveyed History

Transplant Program Citations	
Adult Heart-only (AHO)	
E0001: Establishment of the Emergency Program (EP)	
E0004: Develop EP Plan, Review and Update Annually	
E0006: Plan Based on All Hazards Risk Assessment	
X0014: TERMINATION OF AGREEMENT WITH OPO	

Figure 91: Transplant Program Citations

25. Deeming Information

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

Notes:

- 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.
- Not all provider types have deeming.

25.1 View Deeming Information

Click **Deeming Information** on the **Provider Basic Information** page. See *Figure 92, 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

0 Lex HHA
CCN A28243
Home Health Agency
Deemed

< Return to Provider

Basic Information

Responsible Staff

Manage Tasks

Mailing Address

Additional Branch
Addresses

Operating and Ownership

Additional Contacts

Certification

Licensure

Deeming Information

Administrators

Letters

Notes

Attachments

Deeming Information

CMS approval is required for a provider to be deemed.

Current Deemed Accreditation Status

Deemed

Current Deemed Accreditation Date ⓘ

05/01/2023

CMS Approval of Deemed Status Date ⓘ

07/14/2022

State Survey Jurisdiction History

Deemed Status Suspended Date	Compliance Date	Returned to AO Date
06/06/2022	No information	No information
05/10/2022	No information	No information

Accrediting Organizations

Add a new accrediting organization and manage accreditation organizations and status.

Add Accrediting Organization

1 Accrediting Organization

The Joint Commission (TJC)

Edit

AO Facility Id	No information
Deemed Accreditation Status	Deemed Accredited
Initial Deemed Accreditation Date ⓘ	05/01/2023
Current Deemed Accreditation Date ⓘ	05/01/2023
Expiration Date	05/31/2023
CMS Approval Status	Approved

Figure 92: Deeming Information Details

25.2 View State Survey Jurisdiction History

Click **View** under **State Survey Jurisdiction History** to view or edit the Jurisdiction History on the [Deeming Information](#) page. The **State Survey Jurisdiction Details** window opens. See *Figure 93, 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	04/20/2023
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 93: State Survey Jurisdiction Details

25.3 Add Accrediting Organization

25.3.1 Click **Add Accrediting Organization** on the [Deeming Information](#) page. The **Add Accrediting Organization** window opens. See *Figure 94, Add Accrediting Organization*.

Add Accrediting Organization

All required fields are marked with an asterisk (*)

Accrediting Organization *

The Joint Commission (TJC) ▼

AO Facility ID

Accreditation Status *

☐ Pending

☒ Accredited

☐ Withdrawn

☐ Terminated

☐ Expired

Accreditation Date *

10/21/2021

MM/DD/YYYY

Expiration Date *

10/21/2024

MM/DD/YYYY

Save Section **Cancel**

Figure 94: Add Accrediting Organization

25.3.2 Fill out the applicable information.

25.3.3 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.

26. Performance

Note: Performance is enabled for the Nursing Home and Hospice provider types only.

26.1 Click **Performance** on the **Provider Basic Information** page. See *Figure 95, Performance*. The **Performance** window opens.

Marion Manor Nursing Home Inc
CCN 365181
Nursing Home

< Return to Provider

Basic Information
Responsible Staff
Manage Tasks
Buildings/Wings
Mailing Address
Operating and Ownership
Additional Contacts
Certification
Licensure
Performance
Administrators
Bed Summaries
Letters
Notes
Attachments

Performance

Program Selection *
Select one

Date Selected for Program *
MM/DD/YYYY

Program Status
Select one

Survey Cycle *
Select one

Survey Due Date *
MM/DD/YYYY

Status Changed Date *
MM/DD/YYYY

Notes [Text Editor Keyboard Shortcuts](#)

B i U [List Icons]

Powered by Froala

Save

Figure 95: Performance

26.2 Fill out the information.

26.3 Click **Save**. The **Performance** page updates with Performance and Special Focus details. The page can be viewed and edited. See *Figure 96, 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.

Performance

Edit

Program Selection

Nursing Home Special Focus

Date Selected for Program

09/19/2024

Special Focus Status

Active

Survey Cycle

6 Months

Survey Due Date

10/03/2024

Last edit by: NH_CMSGU_Singy

09/19/2024

Doris Schutt has asked us to review performance.

Special Focus Details

Months as Special Focus

1

of Surveys Since in Special Focus

0

Most Recent Survey

No information

of Citations in Most Recent Survey

No information

of Surveys With IJ Cited

0

Related Survey History

Related Intakes

Related Enforcements

All 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

✗ Not Met

Active

12345D-H1

00/00/0000

Recertification

✓ Met

Active

Figure 96: 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.

27. Administrators

27.1 Click **Administrators** on the **Provider Basic Information** page. See *Figure 97, Add Administrator*. The **Add Administrator** window opens.

The screenshot shows the 'Administrators' page for a provider. On the left is a dark blue sidebar with a list of menu items: 'Deemed', '< Return to Provider', 'Basic Information', 'Responsible Staff', 'Manage Tasks', 'Mailing Address', 'Additional Branch Addresses', 'Operating and Ownership', 'Additional Contacts', 'Certification', 'Licensure', 'Deeming Information', and 'Administrators'. The 'Administrators' item is highlighted with a red box and a red arrow. The main content area has a yellow header 'Administrators' and the text 'Manage all administrators for this provider.' Below this, the name 'Henry Jekyll' is displayed with a 'Primary Administrator' tag. There are three buttons: 'Add Administrator' (highlighted in a red box), 'Edit', and 'Delete'. Below the buttons are two sections: 'Contact Details' and 'Administrator Details'. The 'Contact Details' section has a table with columns: Phone Number, Fax Number, Email, and Address. The 'Administrator Details' section has a table with columns: Administrator Type, Administrator Qualifications, License Number, Start Date, End Date, and Expiration Date. All fields in these tables currently show 'No information'.

Figure 97: Add Administrator

27.2 Fill out the information.

Notes:

- Only one Administrator can be primary.
- Only the last five administrators, including the current one, can be listed.

27.3 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.

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

28. Bed Summaries

Purpose: To manage bed summaries for the provider.

Note: **Bed Summaries** is enabled for the Hospital, Nursing Home, and PRTF provider types only.

28.1 Click **Bed Summaries** on the **Provider Basic Information** page. See *Figure 98, Add Bed Summary*. The **Bed Summaries** window opens.

Note: The first time the **Bed Summaries** window opens, it is called **Add Bed Summary**.

Figure 98: Add Bed Summary

28.2 Fill out the information.

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

28.3 Click **Save**. The **Bed Summaries** page updates. The page can be viewed and edited. See *Figure 99, Bed Summaries* for a completed form.

Note: Click **Edit** to edit information, if desired.

Bed Summaries

Manage bed summaries for this provider.

09/19/2024

[Add Bed Summary](#)

[Edit](#) [Delete](#)

Bed Summary Breakdown			
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 99: Bed Summaries

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

29. Special Fields

Purpose: To manage Hospital special fields for the provider.

Note: **Special Fields** is enabled for the Hospital provider type only. Not all Hospital subtypes can access this page.

29.1 Click **Special Fields** on the **Provider Basic Information** page. See *Figure 100, Add Special Fields*. The **Special Fields** window opens.

Note: The first time the **Special Fields** window opens, it is called **Add Special Fields**.

Home / Search / Singy Critical Access Hospital / Provider Details

Federal Certification Status
Certified

Title
Medicare - 18
State Licensed

Add Special Fields

All required fields are marked with an asterisk (*)

Effective Date *

MM/DD/YYYY

Psychiatric Unit

☐ Has Psych PPS Exempt Unit? (SF45)

Rehabilitation Unit

☐ Has PPS Exempt Unit? (SF47)

Swing Beds

☐ Provides Swing Beds? (SF44)

Save

Provider Details

Singy Critical Access Hospital
CCN 101309
Hospital
Non-Deemed

< Return to Provider

Basic Information

Responsible Staff

Manage Tasks

Mailing Address

Branches

Operating and Ownership

Relationship Manager

Additional Contacts

Certification

Licensure

Deeming Information

Administrators

Bed Summaries

Special Fields

Letters

Notes

Attachments

Figure 100: Add Special Fields

29.2 Fill out the information.

Note: Additional fields open under each area when the check box is checked. See *Figure 101, Special Fields*.

Add Special Fields
All required fields are marked with an asterisk (*)

Effective Date *

MM/DD/YYYY

Psychiatric Unit
☒ Has Psych PPS Exempt Unit? (SF45)

Psych Effective Date (SF49)

MM/DD/YYYY

Number of Beds (SF46)

Psych Termination Code (SF51)

Select one

Psych Termination Date (SF52)

MM/DD/YYYY

Rehabilitation Unit
☒ Has PPS Exempt Unit? (SF47)

Rehab Effective Date (SF50)

MM/DD/YYYY

Number of Beds (SF48)

Rehab Termination Code (SF53)

Select one

Rehab Termination Date (SF54)

MM/DD/YYYY

Swing Beds
☒ Provides Swing Beds? (SF44) ☐ 1135 Waiver

Swing Bed Size (SF28)

Select one

Swing Bed Termination Date

MM/DD/YYYY

Save

Figure 101: Special Fields

Manage a Provider

103

Version 3.1
August 17, 2026

29.3 Click **Save**. The **Special Fields** page updates. The page can be viewed and edited. See *Figure 102, Completed Special Fields* for a completed form.

Special Fields
Manage hospital special fields for this provider.

Effective Date: 08/07/2026 **Certification ID:** 2101380

Buttons: **Add Special Fields** (highlighted), **Edit** (highlighted), **Delete**

Psychiatric Unit Details				
Has Psych PPS Exempt Unit? (SF45)	Effective Date (SF49)	Number of Beds (SF46)	Termination Code (SF51)	Termination Date (SF52)
Yes	08/07/2026	5	Provider Status Change	08/07/2026

Rehabilitation Unit Details				
Has PPS Exempt Unit? (SF47)	Effective Date (SF50)	Number of Beds (SF48)	Termination Code (SF53)	Termination Date (SF54)
Yes	08/14/2026	7	No information	No information

Swing Beds			
Provides Swing Beds? (SF44)	1135 Waiver	Swing Bed Size (SF28)	Swing Bed Termination Date
Yes	No	50 to 99 beds	No information

Figure 102: Completed Special Fields

Notes:

- Click **Add Special Fields** to create a new **Special Fields** record. Multiple **Special Fields** records can exist for a provider, similar to **Bed Summaries**.
- The most recently saved **Special Fields** record is considered the record currently in effect for the provider.
- Click **Edit** to edit information, if desired.
- Click **Delete** to delete the entire record.

30. Letters, Notes, Attachments

Note: **Letters, Notes, and Attachments** information can be found in the S&C User Manual: **Letters, Notes, and Attachments** on [QTSO](#).

31. Waivers

Purpose: To manage waivers for the provider.

Note: **Waivers** is enabled for the ESRD provider type only. This waiver is a provider-level waiver. Citation tag-level waivers can be found in the [Manage a Survey User Manual](#) under **Plan of Correction**.

31.1 Click **Waivers** on the **Provider Basic Information** page. See *Figure 103, Waivers*. The **Waivers** window opens.

The screenshot displays the 'Waivers' page for a provider. The left sidebar contains a navigation menu with 'Waivers' highlighted. The main content area shows a table of waivers. The first row of the table is highlighted with a red box, and a red arrow points to the 'Action' dropdown menu for that row, which contains 'View' and 'Edit' options. The table has the following columns: File Name, Description, Date Uploaded, Uploaded By, Approval Status, Approval Status Updated By, Approval Date, Expiration Date, and Actions.

File Name	Description	Date Uploaded	Uploaded By	Approval Status	Approval Status Updated By	Approval Date	Expiration Date	Actions
CMS-1539 (25).pdf	Test pdf 1466	05/08/2025	test2.tmam_c msgu, Pat	No information	No information	No information	No information	Action -
Screenshot 2025-07-07 at 12:28:40--PM.png	Lorem ipsum dolor sit amet, consectetur adipiscing elit. Aenean commodo ligula eget dolor. Aenean massa. Cum sociis natoque penatibus et magnis dis parturient montes, nascetur ridiculus mus. Donec quam felis, ultricies nec, pellentesque eu, pretium quis,	07/07/2025	test2.tmam_c msgu, Pat	No information	No information	No information	No information	Action - View Edit
Screenshot 2025-07-07 at 12:28:40--PM.png	Donec pede justo, fringilla vel, aliquet nec, vulputate eget.	07/07/2025	test2.tmam_c msgu, Pat	No information	No information	No information	No information	Action -

Figure 103: Waivers

31.2 Select **View** under **Action** to view the waiver.

Note: Only a CMSGU can edit the waiver.

31.3 Select **Edit** under **Action** to edit the waiver.

Note: The waiver status defaults to **Pending Approval**.

31.4 Select **Approved** or **Rejected** to approve or reject the waiver.

31.5 Add approval date and approval expiration date, if waiver is approved.

31.6 Click **Save**.

32. Terminate a Provider

Purpose: To terminate a provider or to perform a voluntary conversion.

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.
- Voluntary conversions apply only to OPT/SLP conversions to CORF.

32.1 Click **Certification** from the **Provider Basic Information** page. See *Figure 104, Certification Left Menu*. The **Certification** page opens.

The screenshot displays the 'Provider Basic Information' page for 'House of the Rising Sun ASC'. The left sidebar contains a list of menu items: Provider Details, Basic Information, Responsible Staff, Manage Tasks, Locations, Mailing Address, Operating and Ownership, Additional Contacts, **Certification** (highlighted with a red box and arrow), Licensure, Deeming Information, Administrators, Letters, Notes, and Attachments. The main content area shows the 'Basic Information' tab with an 'Edit' button and a table of provider details.

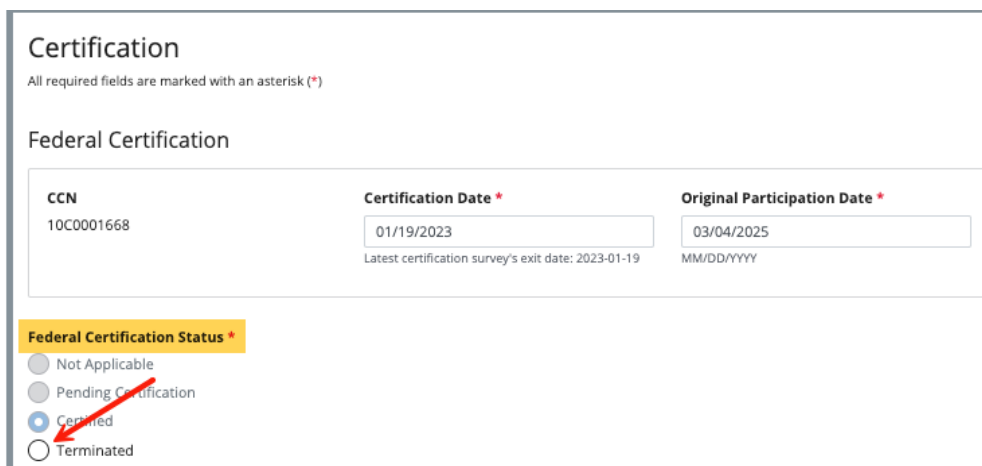
Provider Details	Federal Certification Status	Title
House of the Rising Sun ASC CCN 10C0001668 Ambulatory Surgical Center Deemed	Certified	Medicare - 18

Basic Information																													
Manage the basic information for this provider.																													
Overview <table> <tr> <td>Provider Name</td> <td>House Of The Rising Sun ASC</td> </tr> <tr> <td>Provider Type</td> <td>ASC</td> </tr> <tr> <td>Provider Subtype</td> <td>N/A</td> </tr> <tr> <td>Address</td> <td>1 Main St Suite 202 Anytown, FL 98765</td> </tr> <tr> <td>Phone</td> <td>8005551212</td> </tr> <tr> <td>Phone EXT</td> <td>No information</td> </tr> <tr> <td>Fax</td> <td>No information</td> </tr> <tr> <td>Email</td> <td>eburdon@fake.org</td> </tr> <tr> <td>Website</td> <td>No information</td> </tr> <tr> <td>County</td> <td>No information</td> </tr> <tr> <td>CMS Location</td> <td>4 - Atlanta</td> </tr> <tr> <td>State Region</td> <td>37 - ORLANDO</td> </tr> <tr> <td>Management Unit</td> <td>No information</td> </tr> <tr> <td>Work Unit</td> <td>No information</td> </tr> </table>		Provider Name	House Of The Rising Sun ASC	Provider Type	ASC	Provider Subtype	N/A	Address	1 Main St Suite 202 Anytown, FL 98765	Phone	8005551212	Phone EXT	No information	Fax	No information	Email	eburdon@fake.org	Website	No information	County	No information	CMS Location	4 - Atlanta	State Region	37 - ORLANDO	Management Unit	No information	Work Unit	No information
Provider Name	House Of The Rising Sun ASC																												
Provider Type	ASC																												
Provider Subtype	N/A																												
Address	1 Main St Suite 202 Anytown, FL 98765																												
Phone	8005551212																												
Phone EXT	No information																												
Fax	No information																												
Email	eburdon@fake.org																												
Website	No information																												
County	No information																												
CMS Location	4 - Atlanta																												
State Region	37 - ORLANDO																												
Management Unit	No information																												
Work Unit	No information																												

Figure 104: Certification Left Menu

32.2 Click **Edit**. The **Certification** page becomes editable.

32.3 Click **Terminated** under **Federal Certification Status**. See *Figure 105, Federal Certification Voluntary Withdrawal Status*. Additional fields open under **Federal Certification**.



Certification
All required fields are marked with an asterisk (*)

Federal Certification

CCN 10C0001668	Certification Date * 01/19/2023 Latest certification survey's exit date: 2023-01-19	Original Participation Date * 03/04/2025 MM/DD/YYYY
--------------------------	---	---

Federal Certification Status *

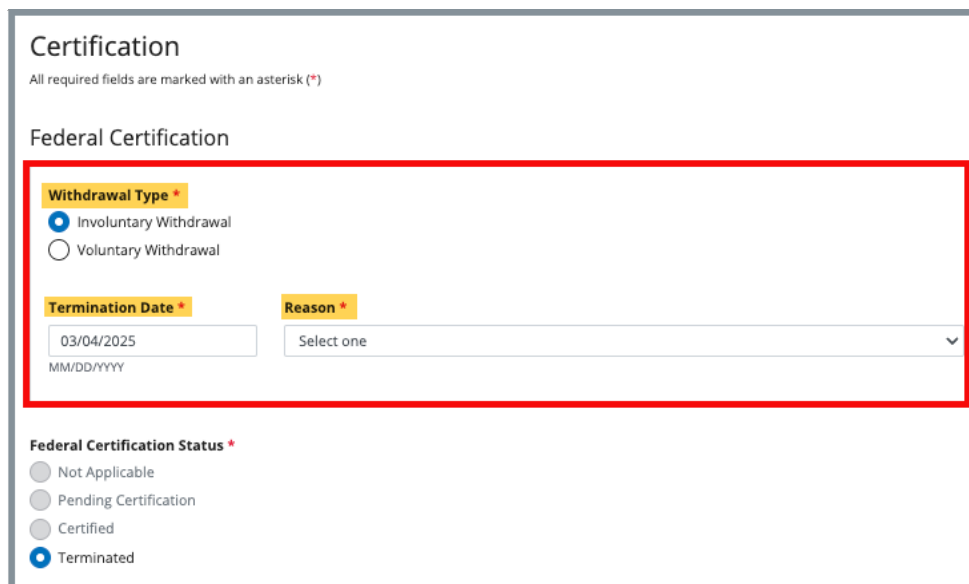
☐ Not Applicable
☐ Pending Certification
☒ **Certified**
☐ Terminated

Figure 105: Federal Certification Status

32.4 Select the radio button next to the **Withdrawal Type**: [Involuntary Withdrawal](#) or [Voluntary Withdrawal](#).

Involuntary Withdrawal

a. Select the termination date under **Termination Date**. See *Figure 106, Federal Certification Involuntary Withdrawal Details*.



Certification
All required fields are marked with an asterisk (*)

Federal Certification

Withdrawal Type *

☒ Involuntary Withdrawal
☐ Voluntary Withdrawal

Termination Date * **Reason ***

03/04/2025 MM/DD/YYYY Select one

Federal Certification Status *

☐ Not Applicable
☐ Pending Certification
☐ Certified
☒ **Terminated**

Figure 106: Federal Certification Involuntary Withdrawal Details

- b. Select the reason for termination from the drop-down menu under **Reason**. See *Figure 107, 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 an asterisk (*)

Federal Certification

Withdrawal Type *

☒ Involuntary Withdrawal
☐ Voluntary Withdrawal

Termination Date *
03/04/2025
MM/DD/YYYY

Reason *

✓ Select one
Fail to Meet Health/Safety
Fail to Meet Agreement
Provider Status Change

Figure 107: Termination Reason

- c. Click **Save**. A pop-up window opens to verify whether the certification should be terminated. See *Figure 108, Termination Pop-Up Window*.

Are you sure you want to terminate this certification?

Confirm **Cancel**

Figure 108: Termination Pop-Up Window

- d. Click **Confirm**.
- e. Verify that **Federal Certification Status** is now **Terminated**. See *Figure 109, Federal Certification Involuntary Withdrawal Status*.

Federal Certification Status Terminated	Title No information	
--	-------------------------	--

Certification

Edit

Federal Certification

Withdrawal Type	Involuntary Withdrawal	
Termination Date	03/04/2025	
Reason	Fail to Meet Health/Safety	
CCN	10C0001668	
Title	No information	

Certification History

There is no certification history for this provider.

Figure 109: Federal Certification Involuntary Withdrawal Status

Voluntary Withdrawal

- a. Select the termination date under **Termination Date**. See *Figure 110, Federal Certification Voluntary Withdrawal Details*.

Certification

All required fields are marked with an asterisk (*)

Federal Certification

Withdrawal Type *

☐ Involuntary Withdrawal

☒ Voluntary Withdrawal

Termination Date *

MM/DD/YYYY

Reason *

✓ Select one

- Merger/Closure
- Dissatisfaction w/ Reimbursement
- Risk of Involuntary Termination
- Other Reason for Withdrawal
- Provider Conversion**

Federal Certification Status *

☐ Not Applicable

☐ Pending Certification

☐ Certified

☒ Terminated

Certification Title

☒ Medicare - 18

☐ Medicaid - 19

NPI

10-digit numerical identifier that identifies an individual provider or a healthcare entity for billing purposes

Save **Cancel**

Figure 110: Federal Certification Voluntary Withdrawal Details

- b. Select **Provider Conversion** from the drop-down menu under **Reason**.
- c. Click **Save**. A pop-up window opens to verify whether the certification should be terminated. See *Figure 111, Termination Pop-Up Window*.

Are you sure you want to terminate this certification?

Confirm **Cancel**

Figure 111: Termination Pop-Up Window

- d. Click **Confirm**.
- e. Verify that **Federal Certification Status** is now **Terminated**. See *Figure 112, Federal Certification Voluntary Withdrawal Status*.

Federal Certification Status
Terminated

Title
Medicare - 18

Certification [Edit](#)

Federal Certification

Withdrawal Type	Voluntary Withdrawal
Termination Date	01/22/2026
Reason	Provider Conversion
CCN	686973
Title	Medicare - 18

Certification History

Certification Status	Certification Title	CCN	Certification Date	Original Participation Date	Termination Date	Withdrawal Type
Terminated	Medicare - 18	686973	01/20/2026 ⓘ	01/20/2026	01/22/2026	Voluntary Withdrawal

Figure 112: Federal Certification Voluntary Withdrawal Status