

Centers for Medicare & Medicaid Services

Internet Quality Improvefment & Evaluation System (iQIES)

Survey and Certification (S&C)

Electronic Plan of Correction (ePOC):

Provider ePOC Administrator Role

User Manual

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1. Introduction

This user manual addresses the processes necessary to perform Survey & Certification (S&C) Electronic Plan of Correction (ePOC) functions in iQIES.

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

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

Below is important general information about iQIES.

- Log in to iQIES at <u>https://iqies.cms.gov/</u> with Health Care Quality Information Systems (HCQIS) Access Roles and Profile (<u>HARP</u>) login credentials. Refer to <u>iQIES Onboarding Guide</u> for further information, if necessary.
- All screenshots included in this manual contain only test data. Current screens in iQIES may be different 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 15 minutes of nonuse and reverts to the login page. Be sure to save data regularly. iQIES remains up and active as long as it is in use.

- iQIES uses a smart search. Once three letters/digits are typed in the search bar, results are shown based on letters/digits entered. The more letters/digits entered, the narrower the search. If any of the results is the correct result, click the result to open.
- Review any notification banners. Some banners may have links to review further information; others may be a reminder of a task that must be completed. See *Figure 2, Notification Banner* and *Table 1, Notification Banner Color Descriptions.* These banners can be closed (X'd out) at any time.

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

Figure 2: Notification Banner

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

Table 1: Notification Banner Color Descriptions

• Review any Tool Tips for additional information to perform an action. Hover over the **i** 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

Manual

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

Foundation Series Videos

1.3 Roles and Permissions

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

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

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

🗙 Patt. 🗸

Figure 4: Help Icon

2. ePOC Process

Purpose: ePOC allows healthcare providers to submit and manage their Plans of Correction (POC) electronically in response to identified deficiencies found during surveys conducted by CMS or state agencies.

This manual shows the Provider ePOC Administrator role with appropriate permissions.

- **2.1** The Survey Team User with appropriate permissions updates the status of the citation. Review <u>ePOC Overview</u> for details.
- 2.2 The Provider ePOC Administrator reviews the citations, then writes a POC or acknowledges the citation and updates the citation status. Review <u>Provider ePOC Administrator</u> for details.
- **2.3** The Survey Team User with appropriate permissions reviews and rejects or approves the POC. Review <u>Reject or Approve the POC</u>.

Note: This process may take several iterations before a POC is finalized.

Notifications:

Each of the survey's Responsible Staff receives an email when the provider submits each citation's plan of correction and completion date for review.

The provider receives email alerts when:

- Citations that need a plan of correction are posted
- Citations that need acknowledgement are posted
- Citation POC is rejected
- Citation POC is accepted

3. Provider ePOC Administrator

Purpose: To review the citations, acknowledge or write a plan of correction.

Notes:

- The Provider ePOC Administrator role can view the posted Statement of Deficiencies and provide the Plan of Correction as well as completion dates for citations posted to the provider.
- Log in to iQIES prior to starting this section. For details on how to create a user role, or log into iQIES, review <u>onboarding guides on QTSO.</u>
- 3.1 Access Provider Information
 - 3.1.1 Select ePOC Providers from the Survey & Certification top menu. See Figure 5, Survey & Certification Drop-Down Menu. The My Facilities page opens.

Survey & Certification V	•
ePOC Providers	

Figure 5: Survey & Certification Drop-Down Menu

Notes:

- The associated facilities are selected when the user role is chosen. To add additional facilities, click **Request User Role** under the profile picture on the top right. On **Step 3**, select additional providers.
 - **Note**: The Provider ePOC Administrator can request which facilities to manage within ePOC when requesting approval for their user role.
- Click the caret next to **Name** and **ID** to sort the columns.

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• Search by **facility/provider** or **DBA name**, **CCN**, or **State Facility ID** (FACID) to search for a specific provider.

Welcome, Pat My Facilities		Search for Facilities	ie, CCN, or State Facili	ity ID (FACID).	Search
Name ≑	ID ÷	Address	City	State	Zip
Marion Manor NH	CCN 015651 FACID IQ00000004680762	123 Test Provider	Test	Alabama	41232

Figure 6: My Facilities

3.1.3 Click the provider name. The **Surveys** page opens. See *Figure 7, Surveys Page*.

Surveys										
Sets & Survey ID	SOD ÷ Sent	Exit Date 🗧	Туре 🗧	Status 🗧	Survey Category	#Def ‡	Submitted 🗧	Approved / Unapproved	÷	POC Due Date
1DF843-H1	11/07/2024	11/07/2024	Health	Statement of Deficiencies sent	Recertification, Complaint	3	1	2		11/17/2024

Figure 7: Surveys Page

Notes:

- Only the surveys that have been published are shown.
- Surveys are listed by exit date.
- A reminder that this user role does not have permission to manage the provider's information. This yellow notification banner can be X'd out.
- 3.1.4 Click the **Survey ID** to view the survey. The page defaults to the **Statement of Deficiencies** page. See *Figure 8, Statement of Deficiencies*.

C	and the second s	and a second dealer and the second states of
Senerate the statement of defici	ancies and enter the date sent once the form ha	as been sent to the provider.
Generate Form		
Generate Form		
Generate Form	Date Sent	Due Back from Provide

Figure 8: Statement of Deficiencies

Note: Go to <u>Generate a Statement of Deficiencies</u> to view details on how to generate form CMS-2567.

3.2 Generate a Statement of Deficiencies

3.2.1 Click Generate Form on the <u>Statement of Deficiencies</u> page. The **Statement of Deficiencies** page show additional fields. See *Figure 9, Statement of Deficiencies Window.*

Statement of Deficiencies Select preferred options for Statement of Deficiencies	s form.
All required fields are marked with an asterisk (*)	
Statement of Deficiencies * CMS-2567 - Federal Statement of Deficiencies State Licensure Statement of Deficiencies	
Format Options Include tag 9999	
Download Form Cancel	-

Figure 9: Statement of Deficiencies Window

3.2.2 Click the checkbox next to **CMS-2567**. Further fields open. See *Figure 10, CMS-2567 Details.*

ederal Regulations CONG TERM CARE FACILITIES (FED - F - 20.00)	IJ Survey Include only IJ citations and memos
Click caret to open b	uilding/wing details
Marion Manor Maple Residence 22 Building Active Federal	State Licensed No effective date
Marion Manor Walnut Residence 23 Wing Active Federal St 	ate Licensed No effective date
> The Andrea Deux 24 Building Active Federal	State Licensed Effective 09/19/2024
mat Options	

Figure 10: CMS-2567 Details

Notes:

- Check the box next to **Include tag 9999**, if desired.
- Check the box next to **Include only IJ citations** and memos to include Immediate Jeopardy (IJ) citations and memos.
- Click the carets next to the buildings/wings to view details about the specific building or wing.
- 3.2.3 Click **Download Form**. The **Statement of Deficiencies** downloads to the **Downloads** folder on the host computer.
- 3.2.4 Go to the **Downloads** folders to open the form. See *Figure 11, Statement of Deficiencies Downloaded Form.* This figure shows just the first page of the three-page form.

							PRI	NTED: 04/16/2025
DEPARTME	NT OF HEALTH AND HUMAN	SERVICES					F	ORM APPROVED
CENTERS F	OR MEDICARE & MEDICAID	SERVICES					ON	IB NO. 0938-0391
STATEM AND P	STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS (X1) PROVIDER/SUPPLIER/CL IDENTIFICATION NUMBER: 015651			(X2) MU A. BUIL B. WIN	ULTIPLE CONSTRUCTION DING G	(X3) D 11/07/	ATE SURVE 2024	Y COMPLETED
NAME OF PROVIDER OR SUPPLIER					ODRESS CITY STATE ZIP COD	F		
Marion N	anor NH		12	3 Test Pr	ovider . Test. Alabama, 41232	-		
	anon Manor NH							
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		ID PREFD TAG	¢	PROVIDER'S PLAN OF COR (EACH CORRECTIVE ACTION CROSS-REFERENCED APPROPRIATE DEFICI	RECTION SHOULD TO THE ENCY)	N DBE	(X5) COMPLETION DATE
F0551	Rights Exercised by Represe	entative	F0551					
SS = A	CEB(s): 483 10(b)(3)-(7)(i)-(i	in						
	011(3).400.10(0)(0)(1)(1)(1)							
	§483.10(b)(3) In the case of a resident who has not been adjudged incompetent by the state court, the resident has the right to designate a representative, in accordance with State law and any legal surrogate so designated may exercise the resident's rights to the extent provided by state law. The same-sex spouse of a resident must be afforded treatment equal to that afforded to an opposite-sex spouse if the marriage was valid in the lurisdiction is which it was exclusioned							
	(i) The resident representativ exercise the resident's rights rights are delegated to the re	e has the right to to the extent those spresentative.						
	(ii) The resident retains the ri- rights not delegated to a resi- including the right to revoke a except as limited by State law	ght to exercise those dent representative, a delegation of rights, w.						
	§483.10(b)(4) The facility mu a resident representative as resident to the extent require delegated by the resident, in applicable law.	st treat the decisions of the decisions of the d by the court or accordance with						
	§483.10(b)(5) The facility sha resident representative the ri behalf of the resident beyond the court or delegated by the with applicable law.	all not extend the ght to make decisions on I the extent required by resident, in accordance						
	§483.10(b)(6) If the facility has reason to believe that a resident representative is making decisions or taking actions that are not in the best interests of a resident, the facility shall report such concerns when and in the manner required under State law.							
	§483.10(b)(7) In the case of incompetent under the laws of	a resident adjudged of a State by a court of						
Any deficien safeguards (days followin following the participation	cy statement ending with an as provide sufficient protection to to g the date of survey whether or date these documents are ma	sterisk (*) denotes a deficiency which the patients. (See reverse for further i or not a plan of correction is provided, de available to the facility. If deficienc	the ins instruct For nu ties are	titution m ions.) Ex rsing hon cited, an	ay be excused from correcting pr cept for nursing homes, the findin nes, the above findings and plans approved plan of correction is re	roviding it gs stated s of correc quisite to	is determin above are o ction are dis continued p	ed that other fisclosable 90 closable 14 days program
LABORATO	RY DIRECTOR'S OR PROVID	ER/SUPPLIER REPRESENTATIVE'S	SIGN	ATURE	TITLE		(X6) DAT	E
FORM CMS	-2567 (02/99) Previous Version	ns Obsolete Event I	ID: 1DF	843-H1F	acility ID: IQ0000004680762	lf c	continuation	sheet Page 1 of 3

Figure 11: Statement of Deficiencies Downloaded Form

3.3 Access ePOC

3.3.1 Select **ePOC** from the left menu. See *Figure 12, ePOC Left Menu Selection.* The **Electronic Plan of Correction Overview** page opens.

Survey 1DF843-H1								
Marion Manor NH								
Nursing Home								
SPECIAL FOCUS STATUS Active								
Statement of Deficiencies								
ePOC								
Letters								
Attachments								

Figure 12: ePOC Left Menu Selection

3.3.2 Select an **Action** from the **Actions** drop-down menu. See *Figure 13, Actions Drop-Down Menu*. Review next steps for details about **Actions**.

Electron	ic Plan	of Correc	tion Over	view					
Statuses	and date	es for the P	lan of Correc	tion (POC)					
Event ID 1DF843-H1		Due Date 11/17/2024	Prov	ider Sign Off Date Re	eceived Date	Status Open	5		
ePOC Post Citations for eP	ing OC display								
Citation D	Reg Set	Status €	Тад Туре	Description 🔶	S/S ‡	Comp (X5)	Posted \ddagger	Changed ≑	Actions
F0551	F - 20.00	() Posted	Requirement	Rights Exercised by Representative	A		11/11/2024	Ν	Actions -
F0602	F - 20.00	े Posted	Requirement	Free from Misappropriation/Exp loitation	J-SQC		11/08/2024 Write Chang View F	N Plan of Correctio te the Completion distory	Actions n Date (X5)

Figure 13: Actions Drop-Down Menu

3.4 Actions: Write a Plan of Correction

3.4.1 Select Write a Plan of Correction from the Actions drop-down menu on the Electronic Plan of Correction Overview page. The Electronic Plan of Correction page opens with editable POC Information. See *Figure 14, Actions: Write a Plan of Correction*.

< Back to POC Overview Electronic Plan of Correction Tag F0602 Posted Free from Misappropriation/Exploitation		POC List © F0551 Rights Exercised by Representative © F0602
Due Date S/S 11/17/2024 J-SQC	Completion X5 Changed - No	Free from Misappropriation/Exploitation
POC Information History History History Plan OF CORRECTION (POC) RESPONSE	🔓 Submit as Final 🥒 Edit	
Observation Text - Deficiency F0602 Detail Free from Misappropriation/Exploitation CFR(s): 483.12 \$483.12 The resident has the right to be free from abuse, neglect, misappropriation of resident property, and exploitation as defined in this subpart. This includes but is not limited to freedom from corporal punishment, involuntary seclusion and any physical or chemical restraint not required to treat the resident's medical symptoms. This STANDARD is NOT MET as evidenced by: Resident was used in a photo that showed them in a position of vulnerability.	Facility Response Write your Plan of Correction (POC) Response	

Figure 14: Actions: Write a Plan of Correction

3.4.2 Click Edit. See Figure 15, Edit a Plan of Correction.



Figure 15: Edit a Plan of Correction

3.4.3 Type a response in the **Facility Response** field.

Notes:

- There are several formatting tools available for some minor formatting.
- The response can be saved as a draft at this point, but it cannot be submitted until the Completion Date (X5) is updated. See <u>Actions:</u> <u>Change the Completion Date (X5)</u> for more details.

3.5 Actions: Change the Completion Date (X5)

Note: A tags, Past Noncompliance and Memos require an acknowledgement only. An acknowledgement on this page automatically labels the tag as approved. See <u>Change the Completion</u> <u>Date (X5) Acknowledgement Only</u>.

3.5.1 Type the completion date in the **Completion Date (X5) f**ield. See *Figure 16, Completion Date (X5).*



Figure 16: Completion Date (X5)

- Note: Select Change the Completion Date (X5) from the Actions drop-down menu on the Electronic Plan of Correction Overview page, if necessary.
- 3.5.2 Click **Submit as Final** to submit the response.
- 3.5.3 Verify that under **POC List** there is a yellow circle with an exclamation point next to the citation that was updated. See *Figure 17, Updated Citation*.



Figure 17: Updated Citation

3.5.4 Click Back to POC Overview to return to the Electronic Plan of Correction Overview page.

3.5.5 Verify that the status of the citation is updated. See *Figure 18, Citation Status Updated*.

ePOC Post	ting POC display								
Citation ID	Reg Set	Status 🥡 🗍	Тад Туре	Description \ddagger	S/S \$	Comp (X5)	Posted ‡	Changed 🗍	Actions
F0551	F - 20.00	Posted	Requirement	Rights Exercised by Representative	A	-	11/11/2024	Ν	Actions *
F0602	F - 20.00	 Submitted 	Requirement	Free from Misappropriatio n/Exploitation	J-SQC	-	11/08/2024	Ν	Actions -

Figure 18: Citation Status Updated

3.6 Actions: Change the Completion Date (X5) Acknowledgement Only

- Note: A tags, Past Noncompliance and Memos require an acknowledgement only. An acknowledgement on this page automatically labels the tag as approved.
- 3.6.1 Select **Change the Completion Date (X5)** from the **Actions** dropdown menu on the **Electronic Plan of Correction Overview** page.
- 3.6.2 Type the completion date in the **Completion Date (X5) f**ield. See *Figure 19, Completion Date (X5).*

POC Information	History
in Completion Date (X5)	* 11/11/2024

Figure 19: Completion Date (X5)

3.6.3 Click Acknowledge. See Figure 20, Acknowledge.

POC Information History	
Completion Date (X5) * 11/11/2024	X
ACKNOWLEDGE TAGS Incomplete	Acknowledge
Observation Text - Deficiency F0551 Detail	
Rights Exercised by Representative	
CFR(s): 483.10(b)(3)-(7)(i)-(iii)	

Figure 20: Acknowledge

3.6.4 Verify that under **POC List** there is a green circle with an checkmark next to the citation that was updated. See *Figure 21, Updated Citation*.



Figure 21: Updated Citation

- 3.6.5 Click **Back to POC Overview** to return to the **Electronic Plan of Correction Overview** page.
- 3.6.6 Verify that the status of the citation is updated to **Approved**. See *Figure 22, Citation Status Updated to Approved*.

ePOC Post	t <mark>ing</mark> POC display								
Citation ID	Reg Set	Status (j) 🛓	Тад Туре	Description 🗘	S/S \$	Comp (X5)	Posted \ddagger	Changed 🗧	Actions
F0551	F - 20.00	Approved	Requirement	Rights Exercised by Representativ e	A	-	11/11/2024	Ν	Actions -
F0602	F - 20.00	0 Submitted	Requirement	Free from Misappropriati on/Exploita- tion	J-SQC	-	11/08/2024	Ν	Actions -

Figure 22: Citation Status Updated to Approved

3.7 Actions: View History

The **History** tab shows the history of the citation and gives status, date, time and the staff member who worked on the citation.

3.7.1 Click **View History** from the **Actions** drop-down menu on the **Electronic Plan of Correction Overview** page. The **Electronic Plan of Correction** page opens and defaults to the **History** tab. See *Figure 23, History Tab*.

Back to POC Overvie	w			POC List	
lectronic Pla	n of Correction			 F0551 Rights Exerc Representat 	ised by tive
Due Date 11/17/2024	Rights Exercised by Representat	ive Completio -	n X5 Changed No	 F0602 Free from Misappropria 	ation/Exploitatio
POC Information	History Date & Time	Status	Staff		
POC Information	History Date & Time 11/11/2024, 6:04 PM	Status	Staff ePOC_Provider_Administrator, Pat		
POC Information Source	History Date & Time 11/11/2024, 6:04 PM 11/11/2024, 6:04 PM	Status Approved Submitted	Staff ePOC_Provider_Administrator, Pat ePOC_Provider_Administrator, Pat		
POC Information Source > ☆ CMS/SA > ☆ Facility > ☆ CMS/SA	History Date & Time 11/11/2024, 6:04 PM 11/11/2024, 6:04 PM 11/11/2024, 5:13 PM	Status Approved Submitted Posted	Staff ePOC_Provider_Administrator, Pat ePOC_Provider_Administrator, Pat NH_CMSGU_Singy, Pat		

Figure 23: History Tab

- 3.7.2 Click the caret to the left of the **Source** listing to view the details about each status listing.
- 3.7.3 Click Back to POC Overview to return to the Electronic Plan of Correction Overview page.

3.8 Actions: Review a Rejected POC

- **Purpose**: To review a rejected tag within the POC after the Provider ePOC Administrator has updated the citation.
- 3.8.1 Go to **ePOC Posting** and review the citations statuses. See *Figure 24, Rejected Status*.

ePOC Posti	ng OC display									
Citation ID	Reg Set	Status	Тад Туре	Description \Leftrightarrow	S/S ÷	Comp (X5)	Å	Posted 🗄	Changed ‡	Actions
F0551	F - 20.00	Approved	Requirement	Rights Exercised by Representative	A			11/11/2024	Ν	Actions -
F0602	F - 20.00	Approved	Requirement	Free from Misappropriation/Exploitation	J-SQC	-		11/08/2024	Ν	Actions -
F0610	F - 20.00	Rejected	Requirement	Investigate/Prevent/Correct Alleged Violation	J-SQC	-		11/12/2024	N	Actions -

Figure 24: Rejected Status

3.8.2 Select **Write Plan of Correction** from the **Actions** drop-down menu. There is a pink rejection notification banner. See *Figure 25, Rejection Notification Banner.*

POC Information	History	
8 Your plan of correct	ion has been rejected. Please review the rejection details and revise your POC below.	×

Figure 25: Rejection Notification Banner

- 3.8.3 Click **Edit** to update the POC.
- 3.8.4 Type the **Completion Date (X5)**.
- 3.8.5 Edit the POC to address any of the reasons for the rejection.
- 3.8.6 Click Submit as Final.

3.9 Letters

- 3.9.1 Click Letters on the left menu to view any letters that have been uploaded. The Letters page opens. See *Figure 26, Letters.*
 - **Note**: The Provider ePOC Administrator role can only view letters. It cannot upload letters.

Statement of Deficiencies		Letters			
ePOC	١.	1 Letter			
Letters		Letter Name 🕯	Date Created 🕴	Date Posted 🗘	Status 🗧
Attachments					
		Important POC Letter with Important Details	04/16/2025 1:25 PM	04/16/2025 2:57 PM	Sent
	1				

Figure 26: Letters

3.9.2 Click the letter name to view the letter overview. The **Letter Overview** opens. See *Figure 27, Letter Overview* and *Table 2, Letter Overview Detailed Callout*.

< Return to Letters		
Letter: Important POC Letter with Important Details		
Overview b		
Description	POC information for	this survey
Status	Sent	
Federal/State Licensure	Federal	
Letter Category	No information	
Date Created	04/16/2025 1:25 PM	
Post Date	04/16/2025 2:57 PM	
First Viewed	04/17/2025 11:58 AM	Λ
Attachments C		
1 Letter Attachment		
File Name 🗘	Date Uploaded 🗘	Description 🗧
Plan of Correction Backup Information.docx	04/16/2025 1:26 PM	Important POC backup information

Figure 27: Letter Overview

Letter	Description	
а	Click Return to Letters to go back to the Letters page.	
b	Overview : Detailed information about the letter, including a description, status, whether it is a federal or state licensure, letter category, the date the letter was created, posted and first viewed	
с	Attachments : Shows attachments and gives details about the file name, the date the file was uploaded and a description of the attachment.	
d	d File Name: Click the file name to download the document. The document downloads to the Downloads folder on the host computer. This area also shows the date uploaded and file description.	

Table 2: Letter Overview Detailed Callout

3.10 View an Attachment

Click **Attachments** on the left menu to view any attachments that have been uploaded. The **Attachments** page opens. See *Figure 28, Attachments* and *Table 3, Attachments*.

Statement of Deficiencies ePOC Letters Attachments	Attachments Add and manage the attachments for this survey. Add Attachment 1 Attachment Plan of Correction Backup Information.docx	CEdit
	POC Backup Information	
	Date Uploaded	04/16/2025 2:29 PM
	Date Published	No information
	Uploaded By	testepoc, Pat
	File Size	13 KB
	Category	Survey
	Source	Survey 1964099
	₹ Download	

Figure 28: Attachments

Letter	Description	
а	Review Add an Attachment for details.	
b	View document information including the date uploaded, date published, by whom it was uploaded, the file size, category and source.	
С	Edit: Only the document description can be changed or updated.	
d	Download : Click to download the document. The document downloads to the Downloads folder on the host computer.	

3.11 Add an Attachment

3.11.1Click **Attachments** on the left menu to view any attachments that have been uploaded. The **Attachments** page opens. See *Figure 29, Add Attachments*.

 Statement of Deficiencies ePOC 	
Letters	Attachments Add and manage the attachments for this survey.
	Add Attachment

Figure 29: Add Attachments

3.11.2Click Add Attachment to add an attachment. See Figure 30, Add Attachments Overview and Table 4, Add Attachments Overview Detailed Callout.

I o protect patient confidentiality, please attach documents that are necessary to support the Plan of Correction (POC).	a	×
Attachments		
Add attachments for this survey and add a file description below.		
Select File b		
Supported file formats PDF (.pdf), Word (.doc, .docx), Excel (.xls, .xlsx, .csv), Text files (.txt, .rtf), Image files (.jpeg, .jpg, .png, .tif, .tiff), Video files (.mp4, .mov, .wmv, .3gp), Audio files (.mp3, .aac, .wav, .wma), and Message files (.msg, .eml).		
Special Characters Allowed, all unsupported characters will be replaced with a "-" \$ <> . % & " ' () , + ? ! @ # ^ = []		
File Description C		
	1.	
0/255 characters		
Save Cancel		

Figure 30: Add Attachments Overview

Letter	Description	
а	Yellow Notification Banner: This is a reminder to protect patient confidentiality.	
b	Select File : Click to select the file from the computer. A window opens and it is possible to select files from the host computer.	
	Note : Review supported file formats noted on iQIES.	
с	File Description : Write a short description of the file contents.	
d	Click Save to upload file. Save is disabled until the upload is selected.	

Table 4: Add Attachments Overview Detailed Callout