



News Flash Physician Quality Reporting Initiative (PQRI) - The Centers for Medicare & Medicaid Services (CMS) is pleased to announce that a new educational resource has been posted to the PQRI webpage on the CMS website and is available for ordering through the Medicare Learning Network product ordering system. The *2008 PQRI Reporting Options Quick Reference Chart* is a two-sided laminated reference chart, which gives eligible professionals and practice staff a quick reference to the new reporting options available for 2008 PQRI with their corresponding alternative reporting periods. To access this new educational resource, visit <http://www.cms.hhs.gov/PQRI> on the CMS website and click on the Educational Resources tab. Once on the *Educational Resources* page, scroll down to the "Downloads" section and click on the "2008 PQRI Quick Reference Chart" link. To order the laminated product, visit http://cms.meridianksi.com/kc/main/kc_frame.asp?kc_ident=kc0001&loc=5 on the CMS website and click on the 2008 Physician Quality Reporting Initiative (PQRI) Reporting Quick Option Reference Chart (ICN# 900843)(May 2008) link.

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Individuals Authorized Access to CMS Computer Services – Provider/Supplier Community (IACS-PC): THE THIRD IN A SERIES OF ARTICLES ON THE IACS-PC

Note: This article was revised on July 30, 2008, to reflect current processes and provide the Web address for the new IACS website which contains user reference guides. Please note that CMS will notify providers as internet applications become available, and provide clear instructions that specify which providers should register in IACS-PC. Do not register until you are notified by CMS or one of its contractors to do so and only if you meet the criteria in the notice.

This article describes the 3 steps providers must take to access a CMS Enterprise Provider Application including how to request a provider application role in IACS-PC (See step 2).

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Provider Types Affected

Medicare physicians, providers, and suppliers (collectively referred to as providers) who submit fee-for-service claims to Medicare contractors (carriers, fiscal intermediaries (FIs), Regional Home Health Intermediaries (RHHIs), and Medicare Administrative Contractors (A/B MACs)).

Special Note for Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) suppliers: Do not register for IACS -PC at this time.

DMEPOS suppliers may want to review the first MLN Matters article in the series on IACS-PC which can be found at:

<http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0747.pdf> on the Centers for Medicare & Medicaid Services (CMS) website

Provider Action Needed

CMS will notify providers as internet applications become available, and provide clear instructions that specify which providers should register in Individuals Authorized Access to CMS Computer Services – Provider/Supplier Community (IACS-PC). Do not register until you are notified by CMS or one of its contractors to do so and only if you meet the criteria in the notice.

What Providers Need to Know

The CMS will announce new online enterprise applications that will allow Medicare Fee-For-Service (FFS) providers to access, update, and submit information over the Internet.

CMS enterprise applications are those hosted and managed by CMS and for the most part do not include internet applications offered by FIs/carriers/MACs. Details of these provider applications will be announced as they become available.

CMS will inform providers or appropriate staff when they should begin to register for access through the CMS security system known as the Individuals Authorized Access to CMS Computer Services – Provider/Supplier Community (IACS-PC).

The first article in this series provided an overview of the IACS-PC registration process as well as registration instructions for Security Officials (SOs) and individual practitioners. This article can be found at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0747.pdf> on the CMS website.

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Note: Individual practitioners must register differently depending on whether they will have employees use IACS-PC and/or the CMS application on their behalf. Those using employees must register in IACS-PC as an “Organization”. See the MLN Matters SE 0747 for more information.

The second article in this series addressed common questions and gave remaining instructions for registering provider organizations including registration as Backup Security Officials (BSOs), User Group Administrators (UGAs), and End Users (EUs). It also provided instructions SOs, BSOs, and UGAs can use to approve user registration requests. This article can be found at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0753.pdf> on the CMS website.

The 3 Steps to Access a CMS Enterprise Provider Application

Provider IACS-PC users must take 3 steps to access a CMS enterprise application:

Step 1: Be Approved for an IACS-PC Role.

The first two MLN Matters Articles in this series discussed how to register in IACS-PC.

The purpose of the IACS-PC registration process is to:

- Confirm the identity of the person requesting registration;
- Assure registrants have a legitimate business need to access CMS provider systems;
- Provide the registrant an IACS-PC role (e.g., SO, BSO, UGA, or End User) that defines their responsibilities (if any) for approving the registration requests of others in their organization; and
- Provide the registrant a User ID and Password for IACS-PC.

Step 2: Be Approved for an Application Role

After receiving approval for an IACS-PC role, a registered user in a Provider Organization may then request access to CMS provider Applications. This requires specifying a role for specific applications. For example, the role may be an “Application Approver” or an “Application

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User.” (Note: Because Individual Practitioners do work in the application themselves, they do not require “Application Approver” roles).

This application role determines:

- Their responsibilities (if any) to approve application access requests from others in their organization;
- What CMS enterprise applications (if any) they have a legitimate need to access, and
- The appropriate level of access to each application for their job function (which application “role” they require).

Users who received approval in IACS-PC in Step 1 can then request access to specific CMS enterprise applications using their IACS-PC account.

This requires requesting either an “Application Approver” or an application “User” role for each application needed to perform Medicare related job functions. For provider applications, there are specific roles within the application that define what the user can do. For example, some application users may be limited to viewing information and printing reports, while others can enter, edit and submit information to CMS.

Note: Each user must request a specific application role in IACS-PC for each CMS enterprise provider application they wish to use. Roles will be specific to each application

The “Request Access to CMS Application Quick Reference Guide” provides instructions for requesting an application role. It may be found at http://www.cms.hhs.gov/IACS/04_Provider_Community.asp#TopOfPage on the CMS website.

Application Approvers

Organizations must have designated persons that approve each user’s request for an application role. The person who performs this task is an “Application Approver” and as such cannot personally access applications for which they serve in this role.

Though the UGA may frequently be the appropriate person to have this role, organizations have discretion in how they designate the Application Approvers so that it is appropriate for their particular organization. For

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example, the UGA may be designated by the SO or BSO to serve in this role for their user group, or an End User may be approved for this role by the SO or BSO for the user group with which they are associated.

Note: If a user group does not have an Application Approver for an application, the requests will, by default, be routed to the SO and BSO for a decision.

Application Approver- Key Points

- An Application Approver must be a member of the user group(s) for which they serve as an Application Approver (this does not apply if the SO/BSO is the Application Approver).
- Providers have flexibility in assigning the Application Approver role.
- The UGA does not have to be the Application Approver within the user group.
- An End User within a user group may serve in the role of the Application Approver.
- A different person may serve as an Application Approver in a user group for each application.
- The same person can be the Application Approver for multiple applications in a user group.
- The same person can be the Application Approver for multiple user groups (though they must be a member of each group.)
- There can be multiple Application Approvers for the same application within the same user group. In this situation, the first approver who approves or denies the request will serve as the decision authority. All of the application approvers within the user group do not need to act on each request.
- A person can be an Application Approver for one application, and an application user for a different application, just not for the same one.

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- If an Application Approver does not exist for an application in a user group, the user group requests for that application will go to the SO and BSO for a decision.
- Organizations with a large number of IACS-PC users are encouraged to have Application Approvers in each user group for each application (can be the same person) so that all of the application requests are not routed to the SO and BSO as the default application approvers.

Note: System security requires a “separation of duties” – which means that those who approve user requests for CMS enterprise application roles will not have access to the applications for which they have an approver role. Therefore those in Application Approver roles will not have access to the application for which they are an approver. Security Officials and Backup Security Officials, by definition, can never access any applications as they serve as the default Application Approvers as noted above.

Instructions for approving application role requests are the same as for approving IACS-PC registration requests. The Approver Quick Reference Guide may be found by selecting General User Guides and Resources in the left column of the page at

http://www.cms.hhs.gov/IACS/04_Provider_Community.asp#TopOfPage on the CMS website.

Step 3: Enter the application when it becomes available.

You will be notified as CMS enterprise applications become available. After you have been approved in steps 1 and 2, you will be able to access available CMS enterprise applications in accordance with approved application specific roles via the CMS or application website.

Additional CMS Partner and Customer Communities will use IACS

IACS protects and allows access to CMS enterprise applications. IACS Communities (e.g., the IACS - Provider/Supplier Community) are comprised of groups of users who provide a similar service to CMS and who need access to similar applications. For example, the next community will be the FI/Carrier/MAC community. It will be comprised of users who work within Medicare contracting organizations (FIs, Carriers and MACs). Since many IACS communities will be added in the future, the IACS community’s user instructions are generic to allow use by multiple communities. The rules and concepts across communities are very similar.

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When given a choice in IACS to select your community, please select the “Provider/Supplier Community”.

Additional Help

CMS has established the End User Services (EUS) Help Desk to support access to IACS-PC. The EUS Help Desk may be reached by e-mail at EUSsupport@cgi.com or by phone on 1-866-484-8049 or TTY/TDD on 1-866-523-4759.

In addition, you can find an informative reference chart outlining the steps for organizations to access CMS enterprise applications at <http://www.cms.hhs.gov/MLNProducts/downloads/IACSchart.pdf> on the CMS website.

COMING SOON

- CMS enterprise applications to be made available via the web include those related to the Physician Quality Reporting Initiative (PQRI) and the Provider Statistical and Reimbursement Report (PS&R)
- Instructions for modifying your user profile
- What to do if you forget your user ID or password
- Tools for SOs, BSOs and UGAs to manage user accounts

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