



News Flash - The Office of the Inspector General in the Department of Health and Human Services has issued a policy statement that assures Medicare providers, practitioners, and suppliers affected by retroactive increases in payment rates under the Medicare Improvements for Patients and Providers Act (MIPPA) of 2008 that they will not be subject to OIG administrative sanctions if they waive retroactive beneficiary cost-sharing amounts attributable to those increased payment rates, subject to the conditions noted in the policy statement. To view the document, go to http://oig.hhs.gov/fraud/docs/alertsandbulletins/2008/MIPPA_Policy_Statement.PDF on the Internet.

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

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 contains:

- 3 questions and answers about the registration process for provider organizations. (See NOTE below.)
- Links to the Quick Reference Guides for completing the registration process for provider organizations. (See NOTE below.)

NOTE: For purposes of the IACS-PC, “Provider Organizations” include individual practitioners who will delegate IACS-PC work to staff as well as their staff using IACS-PC.

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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 this new 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 inform 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 and other articles in the IACS-PC series will help you navigate this process when directed to do so by CMS.

What Providers Need to Know

The CMS will be announcing new online enterprise applications that will allow Medicare fee-for-service providers to access, update, and submit information over the Internet. CMS enterprise applications are those hosted and managed by CMS and do not include FI/Carrier/MAC Internet applications. Details of these provider applications will be announced as they become available.

Registering in IACS-PC

IACS protects and allows access to CMS enterprise applications. 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, providers need access to provider-related CMS applications). The next community which will become available is the FI/Carrier/MAC community. It will be comprised of users who work within Medicare contracting organizations (FI's, 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.

When given a choice in IACS to select your community, Medicare providers should select the "Provider/Supplier Community".

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The first MLN Matters article in this series provided an overview of the IACS-PC registration process as well as registration instructions for Security Officials (SOs) of provider organizations and individual practitioners using IACS-PC personally. This article can be found at

<http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0747.pdf> on the CMS website.

Three Questions and Answers about the Provider Organization Registration Process

1. How can I get registered in IACS-PC? Can I just figure it out by myself?

We recommend that you use the reference guides as they contain detailed explanations of the role responsibilities, acceptable data formats and interpretations of error messages. To directly access IACS-PC, go to <https://applications.cms.hhs.gov> and then click on Enter CMS Applications Portal.

2. I will work for more than one provider, or serve in multiple roles in the same organization. Do I need to register in IACS separately for each organization or role?

No, only register once. Each user will receive only one IACS-PC User ID and password. Once you receive approval and your user ID and password, you can add additional roles to your account.

Instructions for modifying your IACS profile will be released shortly. In the meantime, questions may be directed to the help desk as shown in the "Additional Help" section at the end of this article.

3. My organization is too small to fill all these roles. What should I do?

As few as 2 staff can be registered in IACS-PC for a provider organization to access CMS enterprise applications. The first person must register as a Security Official (SO), the second registers as a User Group Administrator (UGA). The UGA may access CMS applications as approved by the SO.

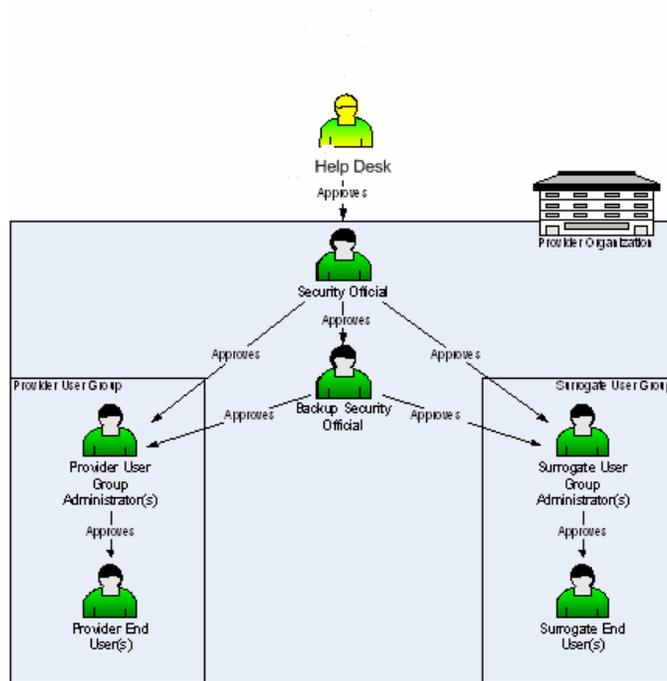
The Backup Security Official is an optional role. End users are only required for provider organizations with 10 or more IACS-PC users.

If you are an individual professional who will be using IACS-PC personally, you may register for the single role of individual practitioner. Please refer to the first MLN article which may be found at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0747.pdf> on the CMS website.

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Quick Reference Guides for Completing the Provider Organization Registration Process



IACS-PC Registration Approval Process

1. Backup Security Official (BSO) Guide

BSOs will request access to an organization using the BSO Registration Quick Reference Guide at

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

2. User Group Administrator (UGA) Guide

UGAs are the first user type able to request access to CMS web-based applications. Their task, during the registration process, is to create a provider or surrogate user group, or associate with an existing provider or surrogate user group. A provider

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user group is a group that can be created by a UGA within an existing provider organization.

Once the user group is created and approved by the SO/BSO, end users can then submit a request to register in IACS-PC and join that user group. The UGA will either approve or deny their request to join their user group. This is a way for users within an organization to form groups that align with business needs or any other logical grouping that is appropriate for that organization and ensure that the UGA appropriately approves each end user into their user group. The important thing to keep in mind is that the UGA will need to approve the end users in the user group for which s/he is responsible, so they should know everyone in their user group.

The UGA Registration Quick Reference Guide may be found at http://www.cms.hhs.gov/IACS/04_Provider_Community.asp#TopOfPage on the CMS website.

Special note for UGAs of Surrogate User Groups

A surrogate user group is established by individuals or a company outside of the provider organization which performs Medicare work on behalf of the provider organization (a contractor for a provider organization, billing company, etc.). If you will be creating a surrogate user group, the UGA of the surrogate user group must be approved by the SO or BSO in the provider organization on whose behalf it performs work. For example: *Surrogate Billing Company ABC will work on behalf of Provider Organization XYZ. Once the Provider Organization XYZ is approved in IACS-PC, the Surrogate Billing Company ABC can register in IACS-PC and request to create a surrogate user group under the Provider Organization XYZ.* Once approved, the UGA of a surrogate user group is issued an IACS user ID that enables the UGA to associate with other provider organizations for which it performs work without registering again.

At this time, a new surrogate user group must be created for each provider organization with which a UGA wishes to associate. If a surrogate user group performs work on behalf of 3 different provider organizations, the UGA for the surrogate user group will need to make 3 different requests to create 3 different surrogate user groups, one for each provider with which the UGA needs to associate. If a provider organization does not appear in IACS-PC, they have not yet registered/been approved and you should contact them. You will not be able to associate with them until the provider appears in IACS-PC.

If the provider organization does appear in IACS-PC, each provider's SO or BSO must approve the request to associate that surrogate user group with their organization. Remember, as a surrogate user group, you will only be able to

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associate with provider organizations after those respective provider organizations and SOs have been approved in IACS-PC.

In the future, CMS will explore options for simplifying this process for contractors which perform work on behalf of more than one provider organization and also to allow surrogate user groups to associate to Individual Practitioners within IACS-PC.

3. An End User Registration Quick Reference Guide may be found at http://www.cms.hhs.gov/IACS/04_Provider_Community.asp#TopOfPage on the CMS website.

4. Approver Quick Reference Guide

The Approver Quick Reference Guide provides step-by-step instructions that SOs, BSOs and UGAs will use to approve or deny user requests to register in IACS-PC. The Approver Quick Reference Guide can be found by selecting General User Guides and Resources on the left column of the following http://www.cms.hhs.gov/IACS/04_Provider_Community.asp#TopOfPage on the CMS website.

Next Steps in Accessing a CMS Enterprise Application

A third MLN article discussing the final steps for using IACS to access CMS enterprise applications may be found at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0754.pdf> on the CMS website.

Additional Help

The CMS has established an External User Services (EUS) Help Desk to assist with your access to IACS-PC. The EUS Help Desk may be reached by E-mail at EUSupport@cqi.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 accessing CMS enterprise applications at <http://www.cms.hhs.gov/MLNProducts/downloads/IACSchart.pdf> on the CMS website.

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