



Centers for Medicare & Medicaid Services
eXpedited Life Cycle (XLC)

Enterprise Privacy Policy Engine (EPPE)



**Limited Data Set (LDS) Approval Workflow
Training Module: Update/Amend Existing
Data Files**

Training Topics

Training Topics in This Module

- EPPE Application Access Prerequisites
- Basic Information About EPPE
- Update/Amend an LDS DUA
 - Existing Data File Descriptions
- EPPE Help Desk Information

EPPE ACCESS PREREQUISITES

EPPE Access Prerequisites

CMS Enterprise Portal Access, IDM Credentials, and EPPE Access

- Obtain access to the CMS Enterprise Portal
 - Access CMS Portal
 - <https://portal.cms.gov/>
 - Obtain Identity Management (IDM) Credentials, Multi-Factor Authentication (MFA) and EPPE Access
 - <https://www.cms.gov/files/document/eppeidm.pdf>

Basic Information About EPPE

Icons Used Throughout the EPPE System



A red asterisks denotes that a field is required to be entered.



The question mark icon when selected will display field specific help.

UPDATE EXISTING DATA FILE(S)

DUA Requester – Update/Amend LDS DUA

EPPE Welcome Screen: DUA(s) Menu

The screenshot displays the Enterprise Privacy Policy Engine (EPPE) interface. On the left is a navigation menu with the following items: EPPE Home, DUA(s), New / Re-Use, Update / Amend (circled in red), Close, Extend, My DUA(s), Un-Finished, Submitted, Pending Action(s), Approved, Expired, Closed, Denied, Re-Assign DUA(s), Change Contact, Ad Hoc Request, Search, DUA Search, My Access, Manage Access, My Preference(s), Email Preference, and Exit EPPE. The main content area is titled 'Welcome to EPPE' and contains the following text: 'EPPE is an application that streamlines the process of requesting data from the Centers for Medicare & Medicaid Services (CMS) via an online Data Use Agreement (DUA). Goals: • Reduce the amount of time to process a DUA. • Transition from a paper-based to an automated process. • Provide a 100% traceable record of CMS data disclosures. Training Materials: Visit the EPPE web page on cms.gov, to download Training Slide Decks for the following: • Contractor Approval Workflow. • LDS Approval Workflow.' The top right corner shows 'Logged in as: DUA REQUESTER'.

Select **Update / Amend** on the **DUA(s)** menu to display a list of Approved DUAs that can be updated.

DUA Requester – Update/Amend LDS DUA

Search for Approved DUA

DUA

UPDATE DUA
PLEASE SELECT ONE OF THE DUA TO UPDATE

Search:

DUA Number	Organization	Requester	Request Date	Status	
CONT-2019-52533	Demonstration Organization 1	Demo UserOne	4-2-2019	Approved	View
LDSS-2019-52542	Demonstration Organization 1	Demo UserOne	4-18-2019	Approved	View
CONT-2019-52556	Demonstration Organization 1	Demo UserOne	4-15-2019	Approved	View
LDSS-2019-52557	Demonstration Organization 1	Demo UserOne	4-17-2019	Approved	View
LDSS-2019-52558	Demonstration Organization 1	Demo UserOne	4-17-2019	Approved	View

Showing 1 to 5 of 9 entries

[Previous](#) [Next](#)

1. A list of Approved DUAs displays.
2. Select the **View** link to update or **Search** for the DUA to update.

Notes:

- If you are an existing Requester or Requester Proxy, any Approved **Contractor** type DUAs on which you are the Requester or Requester Proxy will also display in the list.
- If there are multiple pages of Approved DUAs, the **Previous** and **Next** buttons become enabled to scroll through the listing.

DUA Requester – Update/Amend LDS DUA

MY DUA

Print DUA

DUA Life Cycle

MAIN INFORMATION

DUA Number : LDSS-2019-54170
DUA Customer Type : Limited Data Set
DUA Status : Approved
Expiration Date : 05-06-2020
Requested Date : 05-07-2019
Requester : Demo UserOne
Requester's Email : test@eppe.com
Requester's Phone Number : (410) 555-1212 Ext:null
Last Updated By :
Organization Name : Demonstration Organization 1
Study/Project Aim : Test Study
Project Name : Test Study

COLLABORATING ORGANIZATION(S)
NORTH CAROLINA STATE UNIVERSITY

CUSTODIAN(S)

Search:

User Name	EUA User Id	Organization
Demo UserOne		Demonstration Organization 1

Showing 1 to 1 of 1 entries

PROXY

First Name	Last Name	Organization Name	Email Address	Phone Number
Demo	UserTwo	Demonstration Organization 1	test@eppe.com	4105551212

DATA FILE DESCRIPTIONS

Data File Description	From Year	To Year
SAF-5C - LDS - SAF 5% - CARRIER	2011	2020
SAF-5D - LDS - SAF 5% - DURABLE MEDICAL EQUIPMENT	2011	2020
SAF-5H - LDS - SAF 5% - HOME HEALTH AGENCY	2011	2020
SAF-5S - LDS - SAF 5% - HOSPICE	2011	2020
SAF-5I - LDS - SAF 5% - INPATIENT	2011	2020

Showing 1 to 5 of 64 entries

DOCUMENTS

Additional Supporting Documents

S.No	Document	Description	Date and Time	Action
1	Upload_Test_File.txt	Test file for training demonstration.	May 07, 2019 10:58:41 AM	Download

Update

DUA Displays

1. The **My DUA** screen displays.
2. Select the **Update** button.

Note: If your organization has at least one (1) DUA in Expired status, a message will display (when you select the **Update** button) a list of the expired DUA(s) number(s) and instructions that you cannot create or update any DUAs until either extending or closing all of the expired DUAs.

DUA Requester – Update/Amend LDS DUA

Edit DUA: Existing Data File(s)

CUSTODIAN/DESY USERS

[Edit](#)

Search:

User Name	EUA User Id	Organization	
Demo UserOne		Demonstration Organization 1	+
Demo UserTwo	U12V	Demonstration Organization 1	+

Showing 1 to 2 of 2 entries [Previous](#) [Next](#)

EXISTING DATA FILE DESCRIPTIONS

[Edit](#)

Data File Description	From Year	To Year	
SAF-5H - LDS - SAF 5% - HOME HEALTH AGENCY	2011	2020	+
SAF-5S - LDS - SAF 5% - HOSPICE	2011	2020	+
SAF-5I - LDS - SAF 5% - INPATIENT	2011	2020	+
SAF-5O - LDS - SAF 5% - OUTPATIENT	2011	2020	+
SAF-5F - LDS - SAF 5% - SKILLED NURSING FACILITY	2011	2020	+

Showing 1 to 5 of 64 entries [Previous](#) [Next](#)

Select the **Edit** button associated with the **Existing Data File Descriptions** section to make changes, if applicable.

DUA Requester – Update/Amend LDS DUA

Edit DUA: Select Existing Data File(s)

Update DUA Request

DUA Number : LDSS-2019-54170

UPDATE DATA FILE(S) SELECTION

<input type="checkbox"/> Select All	Data File Description	Extraction Percent	From - To Year	
<input type="checkbox"/>	SAF-5C - LDS - SAF 5% - CARRIER	• 5%	2011 - 2020	
<input type="checkbox"/>	SAF-5D - LDS - SAF 5% - DURABLE MEDICAL EQUIPMENT	• 5%	2011 - 2020	
<input type="checkbox"/>	SAF-5H - LDS - SAF 5% - HOME HEALTH AGENCY	• 5%	2011 - 2020	
<input type="checkbox"/>	SAF-5S - LDS - SAF 5% - HOSPICE	• 5%	2011 - 2020	
<input type="checkbox"/>	SAF-5I - LDS - SAF 5% - INPATIENT	• 5%	2011 - 2020	

Showing 1 to 5 of 64 entries Previous Next

[Add selection to Update DUA request](#)

Selected Data File Descriptions

Data File Description	Extraction % / Cohort	From Year	To Year	Privacy Level	Status	Action
No data available in table						

Showing 0 to 0 of 0 entries Previous Next

[Done](#)

1. The **Update Data File(s) Selection** section becomes editable.
2. Select the **Existing Data File(s)** that needs editing.
3. Select the **Add selection to Update DUA request** button.

DUA Requester – Update/Amend LDS DUA

Edit DUA: Edit Existing Data File(s)

1. The selected **Data File** moves to the update table below.
2. The **Status** of the data file reflects **Not Updated**.
3. Select **Edit** to change any of the data file attributes.
4. Select the **Remove** link to remove the file from the update table.

Note: Remove does not delete the file from the system. It will only remove the file from the update table below and place it back in the list of data files to be selected above.

Update DUA Request

DUA Number : LDSS-2019-54170

UPDATE DATA FILE(S) SELECTION

<input type="checkbox"/> Select All	Data File Description	Extraction Percent	From - To Year	
<input type="checkbox"/>	SAF-5I - LDS - SAF 5% - INPATIENT	• 5%	2011 - 2020	
<input type="checkbox"/>	SAF-5O - LDS - SAF 5% - OUTPATIENT	• 5%	2011 - 2020	
<input type="checkbox"/>	SAF-5F - LDS - SAF 5% - SKILLED NURSING FACILITY	• 5%	2011 - 2020	
<input type="checkbox"/>	SAFAP - SAF - ALL STANDARD ANALYTICAL FILES - LIMITED DATA SET	• 5%	2011 - 2020	
<input type="checkbox"/>	SAFHHP - SAF - HOME HEALTH AGENCY LIMITED DATA SET	• 5%	2011 - 2020	

Showing 1 to 5 of 62 entries Previous Next

[Add selection to Update DUA request](#)

Selected Data File Descriptions

Data File Description	Extraction % / Cohort	From Year	To Year	Privacy Level	Status	Action	
SAF-5S - LDS - SAF 5% - HOSPICE	5%	2011	2020	LIMITED DATASET	NOT_UPDATED	Edit Remove	
SAF-5H - LDS - SAF 5% - HOME HEALTH AGENCY	5%	2011	2020	LIMITED DATASET	NOT_UPDATED	Edit Remove	

Showing 1 to 2 of 2 entries Previous Next

[Done](#)

DUA Requester – Update/Amend LDS DUA

Edit DUA: Existing Data File Data File Extraction Attributes

Data file information

1. Data file extraction | 2. Custodians | 3. Shipping Information

Data File Description : SAF-5S - LDS - SAF 5% - HOSPICE

Data File Extraction % / Cohort * : ?

From * : ?

To * : ?

Quarter(s) : ?

State(s) (if applicable) :

Add

Selected Multiple From and To Year

ID	FROM YEAR	TO YEAR	QUARTER	Extraction % / Cohort	STATES	STATUS	ACTION
1	2011	2020		5%		Approved Year(s)	

Previous **Next**

1. The **Data file information** pop-up displays with the **Data file extraction** tab in focus with the **Approved Year(s)** information.
2. Select the **Data File Extraction % / Cohort**.
3. Select the **From Year**.
4. Select the **To Year**.
5. Choose any **Quarter(s)** (optional). Please note that only **Standard Analytic Files (SAF)** are available quarterly.
6. Select any **State(s)** (optional).
7. Select **Add**.
8. Select **Next**.

Notes:

- Some future file years in the year range may not be available yet.
- You may only order files and years available on the LDS Worksheet.

DUA Requester – Update/Amend LDS DUA

Edit DUA: Existing Data File Data File Extraction Attributes

Data file information

1. Data file extraction | 2. Custodians | 3. Shipping Information

Data File Description : SAF-5S - LDS - SAF 5% - HOSPICE

Data File Extraction % / Cohort * : ?

From * : ?

To * : ?

Quarter(s) : ?

State(s) (if applicable) :

Selected Multiple From and To Year

ID	FROM YEAR	TO YEAR	QUARTER	Extraction % / Cohort	STATES	STATUS	ACTION
1	2011	2020		5%		Approved Year(s)	
2	2000	2010		5%		New Year(s)	Remove

1. The data file extraction attributes for the **New Year(s)** display in the table below.
2. Select **Next**.

DUA Requester – Update/Amend LDS DUA

View Custodian(s) for Existing Data Files

Data file information

1. Data file extraction 2. Custodians 3. Shipping Information

Selected Custodian Locations and Custodians

Id	Organization	Custodian Location	Custodians	Email	Phone
1	Demonstration Organization 1	123 Main Street, Baltimore, Maryland, 21244, USA	1. Demo UserOne	1. test@eppe.com	1. (410) 555-1212
2	Demonstration Organization 1	123 Main Street, Baltimore, Maryland, 21244, USA	1. Demo UserTwo	1. test@eppe.com	1. (410) 555-1212

Previous Next

1. **Custodians** tab displays.
2. The **Organization**, **Custodian Location**, and **Custodians** with their **Email** and **Phone** are displayed as view-only in the table.
3. Select **Next**.

Notes:

- The **Custodians** are automatically populated from the **Custodian(s)/DESY Users** page.
- You can add other **Custodian(s)** from the **Custodian(s)** page.
- You must have at least one (1) **Custodian** on the DUA.

DUA Requester – Update/Amend LDS DUA

Edit DUA: Edit Existing Data File(s) Shipping Information

Data file information

1. Data file extraction 2. Custodians **3. Shipping Information**

Data File Description : SAF-5S - LDS - SAF 5% - HOSPICE

Required fields are marked with an asterisk ().*

Access Method * : DIRECT ACCESS SHIPPING BOTH DIRECT ACCESS AND SHIPPING ?

Data Dissemination System * : SHIPPING INFORMATION

Primary Recipient * : ?

Data Shipping Location * : [Add New Location](#) ?

Selected Shipping Details

Id	Shipping Location	Recipient	Carrier	Carrier Account Number	Action
1	123 Main Street, Baltimore, Maryland, 21244, USA	Demo UserOne			Remove

The **Shipping Information** tab on the **Data file information** screen displays with the file's original shipping information.

DUA Requester – Update/Amend LDS DUA

Edit DUA: Edit Existing Data File(s) Shipping Information

1. You can make the following changes if needed:
 - **Remove** existing Shipping Details from the table or **Add** new Shipping Details.
 - Change the **Access Method** or leave the default **Shipping** selected if you are unsure which method to select.
 - Change the **Data Dissemination System**. Leave the default **CCW/VRDC** selected if you are not sure which data dissemination system to select.
 - Change/Add the **Primary Recipient**.
 - Change/Add the **Data Shipping Location**.
 - Change/Add **Carrier**.
2. Select the **Finish** button.

Note: In this example, an additional Recipient was added.

The screenshot shows a web application window titled "Data file information" with three tabs: "1. Data file extraction", "2. Custodians", and "3. Shipping Information". The "Shipping Information" tab is active. The window displays the following information:

Data File Description : SAF-5S - LDS - SAF 5% - HOSPICE

Required fields are marked with an asterisk (*).

Access Method *: ODIRECT ACCESS SHIPPING OBOTH DIRECT ACCESS AND SHIPPING ?

Data Dissemination System *: ?

Primary Recipient *: ?

Data Shipping Location *: [Add New Location](#) ?

Selected Shipping Details

Id	Shipping Location	Recipient	Carrier	Carrier Account Number	Action
1	123 Main Street, Baltimore, Maryland, 21244, USA	Demo UserOne			Remove
2	123 Main Street, Baltimore, Maryland, 21244, USA	Demo UserTwo			Remove

DUA Requester – Update/Amend LDS DUA

Edit DUA: Existing Data File(s) Attribute Updates Completed

Update DUA Request

DUA Number : LDSS-2019-54170

UPDATE DATA FILE(S) SELECTION

Select All

Data File Description	Extraction Percent	From - To Year
Processing...		

[Add selection to Update DUA request](#)

Selected Data File Descriptions

Data File Description	Extraction % / Cohort	From Year	To Year	Privacy Level	Status	Action
SAF-5S - LDS - SAF 5% - HOSPICE	5% 5%	2011 2000	2020 2010	LIMITED DATASET	UPDATED	Edit Remove Apply All
SAF-5H - LDS - SAF 5% - HOME HEALTH AGENCY	5%	2011	2020	LIMITED DATASET	NOT_UPDATED	Edit Remove

Showing 1 to 2 of 2 entries

[Previous](#) [Next](#)

[Done](#)

1. The first file's status is **Updated**.
2. Select the **Apply All** link to apply **From/To Years** information to all or some of the remaining files **or**
3. Select the **Edit** link to enter attributes for each file.
4. Select **Done**.

Notes:

- You can select the **Remove** link to remove files from the table.
- The **Apply All** link will only display if the DUA has multiple files. It displays once data file attributes for the first data file selection have been completed.

DUA Requester – Update/Amend LDS DUA

Edit DUA: Apply First Data File Attributes to All Existing Data File(s)

Apply Data Selection Attributes

Select the attribute(s) updated for data file : "SAF-5S - LDS - SAF 5% - HOSPICE" that you wish to apply to any existing data files on this DUA request.

<input checked="" type="checkbox"/> Select All	Element
<input type="checkbox"/>	From/To Year
<input type="checkbox"/>	Custodian/DataStorageLocation

<input checked="" type="checkbox"/> Select All	Data File Description
<input type="checkbox"/>	SAF-5H - LDS - SAF 5% - HOME HEALTH AGENCY

Apply to DUA request

1. The **Apply Data Selection Attributes** pop-up displays.
2. Select the **Element Select All** check box to select all elements or **Select** individual element(s).
3. Select the **Data File Description Select All** check box to select all data files or **Select** individual data file(s).
4. Select the **Apply to DUA request** button.

Note: When using the **Apply All** feature on **Existing** data files, all or selected attributes (From/To Year and Custodian/DataStorageLocation as applicable) and **Data Dissemination System** information will be applied to the selected files.

REVIEW & SUBMIT UPDATED LDS DUA

DUA Requester – Submit Updated DUA

Edit DUA: Review the DUA

Update DUA Request

[Print DUA](#)

DUA Number : LDSS-2019-54170

DUA REQUEST STATUS

Your DUA request LDSS-2019-54170 has been submitted for approval. You will receive a follow-up email notification. To view the status of your DUA request navigate to "My DUA(s)".

DUA Life Cycle +

MAIN INFORMATION

DUA Number :	LDSS-2019-54170
DUA Customer Type :	Limited Data Set
DUA Request Type :	UPDATE DUA
DUA Status :	Submitted
Expiration Date :	05-06-2020
Requested Date :	05-10-2019
Requester :	Demo UserOne
Requester's Email :	test@eppe.com
Requester's Phone Number :	(410) 555-1212Ext-null
Last Updated By :	
Organization Name :	Demonstration Organization 1
Study/Project Aim :	Test Study
Project Name :	Test Study

This first half of the **Review** screen displays the following sections of the DUA:

- **DUA Life Cycle** (select green plus icon)
- **Main Information**
- **Collaborating Organization(s)**
- **Custodian(s)/DESY User(s)**

Note: For better legibility, the image is being displayed on two (2) slides.

DUA Requester – Submit Updated DUA

Edit DUA: Review the DUA

EXISTING DATA FILE DESCRIPTIONS Edit

Data File Description	From Year	To Year	
ESRD-F - LDS - ESRD FINAL	2010	2018	↕
HOPPSF - LDS - HOSPITAL OUTPATIENT PROSPECTIVE PAYMENT SYSTEM (OPPS), FINAL	2010	2018	↕
MEDPXM - LDS - MEDPAR - FY08 ¼ YEAR EXPANDED MODIFIED	2010	2018	↕

Showing 1 to 3 of 3 entries Previous Next

RE-USE DATA FILE DESCRIPTIONS Edit

Data File Description	From Year	To Year	
SAD50P - 5% LDS WITH STANDARD ANALYTICAL DATE FILE - OUTPATIENT	RE-USE 2010	2014	↕
SAD - ALL 100% LDS WITH STANDARD ANALYTICAL DATE FILE	RE-USE 2010	2014	↕

Showing 1 to 2 of 2 entries Previous Next

NEW DATA FILE DESCRIPTIONS Edit

Data File Description	From Year	To Year	
No data available in table			

Showing 0 to 0 of 0 entries Previous Next

DOCUMENTS Edit

Document	Uploaded Files
1 SIGNATURE ADDENDUM	Signature_Addendum.docx Download

Additional Supporting Documents

Document	Description	
1 Additional_Information_for_DUA.docx	Additional information for the DUA entry process	Download

Comments :

2000 characters remaining (2000 maximum)

Save Cancel Update Previous Next

1. The second half of the **Update DUA Request Review** screen is displayed here with the following editable sections:
 - **Existing Data File Descriptions**
 - **Re-Use Data File Descriptions**
 - **New Data File Descriptions**
 - **Documents**
 - **Comments**
2. Select the **Next** button when you have finished your updates and entered your comments.

Notes:

- If you were unable to select certain file(s) for re-use, please add a comment that includes the data file name(s) and the DUA(s) from which you are re-using them.
- Comments are required for all Update DUAs.

DUA Requester – Submit Updated DUA

Accept Terms & Conditions and Submit the DUA

Update DUA Request

DUA Number : LDSS-2019-54170

TERMS & CONDITIONS

This Agreement governs the requesting organization's ("you/your") receipt and use of data from the Centers for Medicare & Medicaid Services ("CMS"), a component of the U.S. Department of Health and Human Services ("HHS"). This Agreement covers the CMS data files you requested and the corresponding purposes for their use, as specified in the Enterprise Privacy Policy Engine ("EPPE") system.

CMS agrees to provide you with the data files specified in the DUA Request, which reside in a CMS Privacy Act System of Records ("SOR"). In exchange, you agree to: (a) pay any applicable fees; (b) use the data only for purposes that support your study, research, or project, as specified in the DUA Request, which CMS has determined to be valuable in helping CMS monitor, manage, and improve the Medicare and Medicaid programs and/or services provided to beneficiaries; and (c) to ensure the integrity, security, and confidentiality of the data by complying with the terms of this Agreement and any applicable law(s), including the Privacy Act (5 U.S.C. §552a) and Privacy Rule of the Health Insurance Portability and Accountability Act (HIPAA [45 C.F.R. Subpart C, Parts 160 and Part 164, Subparts A and E]). This Agreement is intended to: (a) secure data that reside in a CMS Privacy Act SOR; (b) ensure the integrity, security, and confidentiality of information maintained by CMS; and (c) permit appropriate disclosure and use of such data as permitted by law.

1. This Agreement addresses the conditions under which CMS will release and you will obtain, use, reuse, and disclose the CMS data files specified in the DUA Request. This Agreement also pertains to and covers any derivative files which may contain direct individual identifiers or elements that can be used in concert with other information to identify individuals. For all data released under this Agreement, the legal clauses contained herein supersede any and all agreements between you and CMS, and preempts and overrides any instructions, directions, agreements, or other understandings pertaining to any grant award or prior communication with HHS (or any of its components).

The terms of this Agreement can be changed only by a written modification to this Agreement or through adoption of a new agreement. Any instructions or interpretations issued to you concerning this Agreement or the data specified in the DUA Request are not considered valid unless issued in writing by the appropriate CMS representative associated with the project (e.g. Contracting Officer's Representative/Government Task Leader, Program Office, System Manager, etc.).

2. You agree that CMS retains all ownership rights to the data files specified in the DUA Request, and that you do not obtain any right, title, or interest in any of the data released by CMS.

3. You represent that the data files covered by this Agreement will be used solely for the purposes described in the DUA Request. In releasing the data files, CMS relies upon such representation.

You represent that the facts and statements made in any study, research protocols, or project plans listed in the DUA Request are complete and accurate. You also represent that said study protocols or project plans, which have been approved by CMS or another appropriate entity as CMS may determine, represent the total uses for which you will use the released data files.

You agree not to disclose, use, or reuse the data covered by this Agreement, except: (a) as specified in an Attachment uploaded to the DUA Request; (b) as authorized by CMS; or (c) as otherwise required by law. You also agree not to sell, rent, lease, loan, or otherwise grant access to the data covered by this Agreement, unless you receive express permission from CMS.

You affirm that the requested data is the minimum necessary to achieve the purposes covered by this Agreement. You agree that, within your organization and the organization of your agents, access to the data covered by this Agreement shall be limited to the minimum amount of data and minimum number of individuals necessary to achieve the specified purposes (i.e., individual's access to the data will be on a need-to-know basis).

4. You agree that you may retain the files covered by this Agreement as well as any derivative files—including those that directly identify individuals, or that directly identify bidding firms and/or such firms' proprietary, confidential, or specific bidding information, which in concert with other information can be used to identify individuals—until the End Date specified in the DUA Request. If the purposes covered by this Agreement are completed before the specified End Date, you agree to notify CMS within 30 days of completion of those purposes. Upon such notice or the End Date, whichever occurs sooner, you agree to destroy the data in your possession covered by this Agreement and provide certification of disposition of the files identified in the EPPE system within 30 days. You agree not to retain the files covered by this Agreement or any parts of the files after the notice of disposition, unless the appropriate CMS representative overseeing the project grants written authorization. You acknowledge that the End Date is not contingent on any action by CMS.

You understand that you, or CMS, may terminate this Agreement at any time, for any reason, upon 30 days written notice. Upon notice of termination, CMS will cease releasing the requested data files to you, and will notify you to destroy any data files in your possession. Sections 2, 3, 4, 6, 7, 8, 9, 11, 12, and 13 shall survive termination of this Agreement.

5. You agree to establish appropriate administrative, technical, and physical safeguards to protect the confidentiality of the data and to prevent unauthorized use or access to it. The safeguards shall provide a level and scope of security that is not less than the level and scope of security requirements established by the following documents:

Office of Management and Budget (OMB), "OMB Circular No. A-130, Appendix III—Security of Federal Automated Information Resources," available at https://www.whitehouse.gov/omb/circulars_a130_a130appendix_iii.

National Institute of Standards and Technology (NIST), "Federal Information Processing Standards Publication 200—Minimum Security Requirements for Federal Information and Information Systems," available at <http://csrc.nist.gov/publications/fips/fips200/FIPS-200-final-march.pdf>.

The first half of the
Terms & Conditions
screen displays.

Note: For better
legibility, the image is
being displayed on two
(2) slides.

DUA Requester – Submit Updated DUA

Accept Terms & Conditions and Submit the DUA (cont.)

National Institute of Standards and Technology (NIST), "Special Publication 800-53—Security and Privacy Controls for Federal Information Systems and Organizations," available at <http://nripubs.nist.gov/nistpubs/SpecialPublications/NIST.SP.800-53r4.pdf>.

CMS Office of Information Services, "Acceptable Risk Safeguards, Appendix B—CMSR Moderate Impact Level Data," available at http://www.cms.gov/Research-Statistics-Data-and-Systems/CMS-Information-Technology/InformationSecurity/Downloads/ARS_App_B_CMSR_Moderate.pdf.

You acknowledge that the use of unsecured telecommunications, including the internet, to transmit individually identifiable, bidder identifiable, or deducible information derived from the files covered by this Agreement is prohibited. You also agree that the data must not be physically moved, transmitted, or disclosed in any way from or by the site indicated in the DUA Request without written approval from CMS, unless such movement, transmission, or disclosure is required by law.

- You agree to grant physical and/or electronic access to authorized representatives of CMS and/or HHS Office of the Inspector General ("OIG") for inspection of the site indicated in the DUA Request to confirm compliance with the terms of this Agreement.
- You agree not to disclose direct findings, listings, or information derived from the files covered by this Agreement with or without identifiers if such findings, listings, or information can by themselves or in combination with other data be used to deduce an individual's identity. Examples of such data elements include, but are not limited to geographic location, age if > 89, sex, diagnosis and procedure, admission/discharge dates, or date of death.
You agree that any use of CMS data in the creation of any document (e.g. manuscript, table, chart, study, report, etc.) concerning the purposes covered by this Agreement—regardless of whether the written product expressly refers to those purposes, CMS, the requested data files, or any data derived from such files—must adhere to CMS' current cell size suppression policy. This policy stipulates that no cell (e.g. admissions, discharges, patients, services, etc.) 10 or less may be displayed. Also, no use of percentages or other mathematical formulas may be used if they result in the display of a cell 10 or less. You agree to abide by these rules, and therefore, will not be required to submit any written documents for CMS review. If you are unsure whether you meet the above criteria, you may submit your written products for CMS review. CMS may withhold approval for publication only if it determines that the format in which data are presented may result in identification of individual beneficiaries.
- You agree that, absent express written authorization from the appropriate CMS representative associated with the project to do so, you shall not attempt to link records included in the files covered by this Agreement to any other individually identifiable source of information. This includes attempts to link the specified data to other CMS data files. CMS approval of study, research, or project protocols covered by this Agreement that include instruction for the linkage of specific files constitutes express authorization from CMS to link files, but only in the manner described in the protocols.
- You understand and agree that you may not reuse original and/or derivative data files without prior written approval from the appropriate CMS representative associated with the project.
- You agree that the Attachments uploaded electronically to the DUA Request are incorporated into this Agreement.
- You agree that, in the event CMS determines or reasonably believes that you have made or may have made an unauthorized use, reuse, or disclosure of the files covered by this Agreement or another written authorization from the appropriate CMS representative associated with the project, then CMS—at its sole discretion—may require you to (a) promptly investigate and report to CMS any of your determinations regarding all alleged or actual unauthorized use, reuse, or disclosure; (b) promptly resolve any problems identified by the investigation; (c) if requested by CMS, submit a formal response to any allegations of unauthorized use, reuse, or disclosure; (d) if requested by CMS, submit a corrective action plan with steps designed to prevent any future unauthorized uses, reuses, or disclosures; and/or (e) if requested by CMS, return or destroy the data files covered by this Agreement to CMS, as well as any derivative files containing information from the files released under this Agreement. You understand that as a result of CMS' determination or reasonable belief that unauthorized uses, reuses, or disclosures have taken place, CMS may determine a period of time during which you are excluded from access to CMS data.
You agree to report any breach, loss, or unauthorized disclosure of protected health information (PHI) and/or personally identifiable information (PII) from the CMS data files covered by this Agreement to the CMS Action Desk by telephone at (410) 786-2850 or by e-mail notification at cms_it_service_desk@cms.hhs.gov within 1 hour and to cooperate fully in the federal security incident process. While CMS retains all ownership rights to the data files, as outlined above, you agree to bear the cost and liability for any breaches of PHI and/or PII from the data files while they are entrusted to you. Furthermore, if CMS determines that the risk of harm requires notification of affected individual persons regarding the security breach and/or other remedies, you agree to carry out these actions without cost to CMS.
- You acknowledge that criminal penalties under Section 1106(a) of the Social Security Act (42 U.S.C. § 1306(a)), including a fine not exceeding \$10,000 or imprisonment not exceeding 5 years, or both, may apply to disclosures of information that are covered by Section 1106 and that are not authorized by regulation or by Federal law. You further acknowledge that criminal penalties under the Privacy Act (5 U.S.C. § 552a(i)(3)) may apply if it is determined that the Requester, Custodian, or any individual employed or affiliated therewith, knowingly and willfully obtained the files under false pretenses. Any person found to have violated the above-cited section of the Privacy Act shall be guilty of a misdemeanor and fined not more than \$5,000. Finally, you acknowledge that criminal penalties may be imposed under 18 U.S.C. § 641 if it is determined that you or any individual employed or affiliated therewith, has taken or converted the data files to their own use, or received the data knowing that the files had been stolen or converted. Under such circumstances, they shall be fined under Title 18 or imprisoned not more than 10 years, or both; but if the value of such property does not exceed the sum of \$1,000, they shall be fined under Title 18 or imprisoned not more than 1 year, or both.
You acknowledge that in the event of a breach of this Agreement, additional criminal, civil, and/or administrative penalties, assessments, or fines may be determined as applicable by law.
- By clicking "Agree," you attest that you are authorized to legally bind the requesting organization listed in the DUA Request, and agree to all the terms specified herein. Furthermore, you agree to abide by all provisions set out in this Agreement and acknowledge having received notice of potential criminal, civil, and/or administrative penalties for violation of the terms of this Agreement.

Attachment B

This attachment supplements the above-referenced Data Use Agreement (DUA) between the Centers for Medicare and Medicaid Services and the User (as set forth in the DUA). Upon execution by both parties, to the extent this Attachment is inconsistent with any terms in the DUA, this Attachment modifies and overrides the DUA.

A-1. Use of Data: Users may disseminate research findings on providers or suppliers (including individual physicians) using original or derived information from the files specified in Section 5 of the DUA provided all findings are limited to patient de-identified data that conform with the HIPAA Privacy Rule's definition of de-identified data at 45 CFR 164.514(b).

A-2. Disclosure of Findings: Nothing in the DUA, including but not limited to Section 8, prohibits Users from discussing or reporting on specific providers or suppliers (including individual physicians) in a manner consistent with A-1.

I agree to the terms and conditions above.

Previous

Submit

1. The second half of the **Terms & Conditions** screen displays.
2. Select the **I agree** checkbox.
3. Use your browser to print if applicable.
4. Select **Submit**.

Note: The **Terms & Conditions** now incorporates **Attachment B** which no longer needs to be submitted as a separate form.

DUA Requester – Submit Updated DUA

Edit DUA: Submitted Confirmation Message

Update DUA Request

Print DUA

DUA Number : LDSS-2018-54035

DUA REQUEST STATUS

DUA request LDSS-2018-54035 has been entered. You will receive a follow-up email notification. To view the DUA navigate to "My DUA(s)".

DUA Life Cycle

MAIN INFORMATION

DUA Number : LDSS-2018-54035
DUA Customer Type : Limited Data Set
DUA Category : 42 - CMS PROGRAMS
DUA Status : Approved
Expiration Date : 01-30-2019
Requested Date : 02-07-2018
Requester : Mary Parker-Smith
Requestor's Email : mpsmith@eppe.com
Requestor's Phone Number : (301) 555-1212
Last Updated By : Viola Davis
Organization Name : UNIVERSITY OF NORTH CAROLINA
Study/Project Aim : LDS Training Project
Project Name : LDS Training Project

Privacy Act And HIPAA Authorization Code

Privacy Act Authorization Code : RESEARCH RU
HIPAA Authorization Code : Limited Data Set

CMS Contact (COR)

First Name : LINDSAY
Last Name : SMITH
Email Address : test@eppe.com
Phone Number : (410) 786-6843

COLLABORATING ORGANIZATION(S)

NORTH CAROLINA STATE UNIVERSITY

DESY USERS

User Name	EUA User Id	Organization
Cindy-Lou Who	CL25	NORTH CAROLINA STATE UNIVERSITY
Clare Huxtable	CH45	NORTH CAROLINA STATE UNIVERSITY

Showing 1 to 2 of 2 entries

Previous Next

1. Submission confirmation message is displayed on the **DUA Request Status** screen.
2. The DUA will be placed in the Requester's **Submitted Queue**.
3. The **LDS DMT** will find the DUA in their **Pending Action(s)** queue.

Notes:

- Denied updates will be placed in the Approved queue with a Denied entry in the DUA Life Cycle. You can re-submit an update with corrected information on the DUA.
- If payment is required, the DUA will not appear in your Approved queue until the LDS DMT approves it and the Payment Coordinator has confirmed payment.
- If payment is **not** required, the DUA will not appear in your Approved queue until the LDS DMT approves it.

DUA Requester – Submit Updated DUA

Displaying the DUA Life Cycle

Update DUA Request


[Print DUA](#)

DUA Number : LDSS-2019-54170

DUA REQUEST STATUS

Your DUA request LDSS-2019-54170 has been submitted for approval. You will receive a follow-up email notification. To view the status of your DUA request navigate to "My DUA(s)".

DUA Life Cycle



MAIN INFORMATION

DUA Number :	LDSS-2019-54170
DUA Customer Type :	Limited Data Set
DUA Request Type :	UPDATE DUA
DUA Status :	Submitted
Expiration Date :	05-06-2020
Requested Date :	05-10-2019
Requester :	Demo UserOne
Requester's Email :	test@eppe.com
Requester's Phone Number :	(410) 555-1212Ext-null
Last Updated By :	
Organization Name :	Demonstration Organization 1
Study/Project Aim :	Test Study
Project Name :	Test Study

Select the **Green Plus Sign Icon** to view the **DUA Life Cycle**.

Note: Some of your DUAs may have been moved from the **Data Agreement and Data Shipping System (DADSS)** system, which is the DUA tracking system used before EPPE. The **DADSS Comments** section will display any comments entered in that system and only for those DUAs.

DUA Requester – Submit Updated DUA

Status Progressions and Actions Display

Update DUA Request

[Print DUA](#)

DUA Number : LDSS-2019-54170

DUA REQUEST STATUS

Your DUA request LDSS-2019-54170 has been submitted for approval. You will receive a follow-up email notification. To view the status of your DUA request navigate to "My DUA(s)".

DUA Life Cycle

DUA Status	DUA Action Date	DUA Action	Action User	Comments	Special Instructions
Submitted-Waiting for Limited Data Set DUA Management Team Approval	May 10, 2019 10:32:14 AM	UPDATE DUA	Demo UserOne	Submitting an update to this DUA for reasons 1, 2, and 3.	
In Progress	May 10, 2019 10:28:05 AM	UPDATE DUA	Demo UserOne		
In Progress	May 10, 2019 10:15:53 AM	UPDATE DUA	Demo UserOne		
In Progress	May 10, 2019 10:15:08 AM	UPDATE DUA	Demo UserOne		
In Progress	May 10, 2019 10:14:04 AM	UPDATE DUA	Demo UserOne		

Showing 1 to 5 of 25 entries Previous 1 2 3 4 5 Next

MAIN INFORMATION

DUA Number : LDSS-2019-54170
DUA Customer Type : Limited Data Set
DUA Request Type : UPDATE DUA

1. The **DUA Life Cycle** details display.
2. Select the **Next** button to scroll through the life cycle list if applicable.
3. Select the **Red Negative Sign** Icon to collapse the **DUA Life Cycle** table.

DUA Requester – Print DUA

Please refer to the **Print DUA** training module for more information on printing your DUA.

EPPE Help Desk Information



EPPE Help Desk Contact Information

Hours of Operation: Monday – Friday 9:00 AM to 6:00 PM EST

844-EPPE-DUA (844-377-3382)

eppe@cms.hhs.gov

Note: For information on policies, forms and other LDS DUA related information, please refer to the [Limited Data Set \(LDS\)](#) page.