



Related MLN Matters Article #: SE0747 **Revised**

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*Individuals Authorized Access to CMS Computer Services (IACS) – Provider/Supplier Community: THE FIRST IN A SERIES OF ARTICLES*

**Note:** Special Edition (SE) article SE0747 was revised to reflect current terminology and processes as reflected on the IACS website. The Centers for Medicare & Medicaid Services (CMS) will notify providers as CMS applications integrated with IACS become available and provide clear instructions that specify which providers should register in IACS to access those applications. For example, SE0830 and SE0831 inform physicians how to register in IACS to access their Physician Quality Reporting Initiative (PQRI) feedback reports. Providers should not register until they are notified to do so by CMS or one of its contractors and only if they meet the criteria in the notice.

### Key Words

SE0747, IACS, Access, Computer

### Provider Types Affected

Medicare Physicians, providers, and suppliers who submit fee-for-service (FFS) claims to Medicare Carriers, Fiscal Intermediaries (FIs), Regional Home Health Intermediaries, and Part A/B Medicare Administrative Contractors (A/B MACs)

**Special Note:** Durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS) suppliers should not register for IACS at this time. DMEPOS suppliers may want to review question #11 in MLN Matters article SE0747.

### Key Points

- CMS will be announcing new online enterprise applications that will allow Medicare FFS 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-supplied Internet applications. Details of these provider applications that are integrated with IACS will be announced as they become available.
- MLN Matters article SE0747 has 11 questions and answers (starting on page 3) discussing the registration process.

## Registering in IACS as a Provider Organization or a Provider Organization User

- For IACS registration purposes, an “organization” includes providers and suppliers such as hospitals, home health agencies, skilled nursing facilities, independent diagnostic testing facilities, ambulance companies, ambulatory surgical centers, and physician group practices.
- It also includes individual physicians and non-physician practitioners who want to delegate employees to conduct transactions on their behalf.

## The Registration Process

- IACS is based on a delegated authority model. Each user self-registers and is approved. There is an illustration of this, called the “delegated authority model”, on page 8 of SE0747.
- The system is designed for flexibility to meet provider needs while assuring security of computer systems and privileged information. **At this time, a provider organization must have at least two users, one of whom will be able to access CMS applications integrated with IACS.**
- The EUS Help Desk will be responsible for approving the organization's Security Official. Then the Security Official may approve the Backup Security Official(s) etc.

## Registration Roles

### Security Officer

- **The first person to register must be the Security Official.** The Security Official is the person who registers their organization in IACS and establishes the organization profile information in IACS. There can be only one Security Official for an organization.
- The Security Official is trusted to approve the access request of Backup Security Official(s) and can approve the access requests of User Group Administrators and End Users. The Security Official will be approved by CMS through its EUS help desk.
- The Security Official is held accountable by CMS for the behavior of those approved in the organization, including the End Users for the organization. The IACS Security Official *Quick Reference Guide* may be found at [http://www.cms.hhs.gov/IACS/04\\_Provider\\_Community.asp#TopOfPage](http://www.cms.hhs.gov/IACS/04_Provider_Community.asp#TopOfPage) on the CMS website.
- **Additional employee and contractor users cannot be approved until the Security Official has been approved by the EUS HELP Desk.**

### Backup Security Officials (Optional)

- An organization may choose to have one or more Backup Security Officials, but it is **not required** to have Backup Security Officials.
- The Backup Security Official is approved by the Security Official. A Backup Security Official performs the same functions as a Security Official in an organization, with the exception of approving other Backup Security Officials and updating the organization profile. There can be one or more Backup Security Officials in an organization.

- The Backup Security Official can approve the access request of User Group Administrators and may aid the Security Official with the administration of User Groups and User Group Administrators' accounts.

### User Group Administrator (UGA)

- The next registrant must be a **UGA**.
- The UGA is approved by the Security Official or Backup Security Official. The UGA is trusted to approve the access requests of End Users for that User Group.
- An UGA registers the User Group within an organization in IACS and updates the User Group profile information in IACS. There can be multiple User Group Administrators for the same User Group within an organization.
- If the UGA is a surrogate user (not part of the organization, but rather a contractor company working on behalf of the organization), they should select the option to create a "Surrogate User Group"- See section below. Note that surrogates will not have access to the Provider Statistical and Reimbursement (PS & R) System.

### End Users

- The Next Registrants are **End Users**.
- An End User is a staff member who is trusted to perform Medicare business and conduct transactions for the provider organization.
- An End User is part of a User Group within the provider organization.
- An End User may be an employee of a provider/supplier/practitioner or a contractor working on the behalf of one of these entities. An End User may belong to multiple groups in one or more organizations. The End User is approved by the User Group Administrator.
- **End Users cannot register in User Groups until after the User Group Administrator has been approved.**

### Surrogate User Groups

- This applies to provider organizations that want to delegate online work to individuals or a company outside of the provider's organization.
- Under this scenario, those working on behalf of the provider's organization register as a Surrogate User Group. Examples include clearinghouses, credentialing departments, and independent contractors.
- A Surrogate User Group has a direct contractual business relationship with the Medicare provider/supplier, but not with CMS. A Surrogate User Group may be associated with multiple provider organizations. As noted above, surrogates will not have access to the PS & R system.
- The first contractor employee to register in a Surrogate User Group must be the UGA.
- If there will be only one user in a Surrogate Group, that user must register as a UGA.

- The UGA for the Surrogate User Group will register the Surrogate User Group and update the User Group profile information in IACS. There can be multiple UGAs within the same Surrogate User Group. The UGA is trusted to approve the access requests of End Users for their user group.
- The UGA of the Surrogate User Group must be approved by the Security Official or Backup Security Official in the provider organization on whose behalf it performs work. Once approved, the UGA of a Surrogate Group may request to associate with other provider organizations for which it performs work without registering again.
- A contractor employee may also register as an End User.
- An End User is approved to perform Medicare business for a surrogate or provider User Group by their User Group Administrator. An End User may belong to multiple groups in one or more organizations.

## Important Links

The related MLN Matters article can be found at

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

The IACS web page is at <http://www.cms.hhs.gov/IACS> on the CMS website.

For more information about the Medicare enrollment process, providers may view

<http://www.cms.hhs.gov/MedicareProviderSupEnroll/> on the CMS website.

To facilitate enrollment into the Medicare program or to update enrollment information with Medicare, providers should review the following downloadable file at

<http://www.cms.hhs.gov/MedicareProviderSupEnroll/downloads/Enrollmenttips.pdf> before submitting an enrollment application to a Medicare contractor.

If the provider was enrolled in Medicare after November 2003, or has updated their enrollment since then, they may register as an individual practitioner following the steps in the *Individual Practitioner Registration-Quick Reference Guide*, which can be found at

[http://www.cms.hhs.gov/IACS/04\\_Provider\\_Community.asp#TopOfPage](http://www.cms.hhs.gov/IACS/04_Provider_Community.asp#TopOfPage) on the CMS website. (See question 6 in SE0747 for more information.)

SE0747 and other articles in the IACS series will help providers navigate this process. The other articles currently available are:

- SE0753 at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0753.pdf>; and
- SE0754 at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0754.pdf> on the CMS website.

The EUS help desk will support the provider/supplier community with this process for IACS. It may be reached by email at [EUSupport@cgi.com](mailto:EUSupport@cgi.com) or by phone on 1-866-484-8049 or TTY on 866-523-4759.

Information on the steps needed for **individual eligible professionals** to access their 2007 PQRI Feedback Reports personally is available in MLN Matters article SE0830 at

<http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0830.pdf> on the CMS website.

Information on the steps for **IACS defined "organizations"** to access their PQRI Feedback Report is available at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0831.pdf> on the CMS website.