



Related MLN Matters Article #: SE0753 **Revised**

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

Note: Special Edition (SE) article SE0753 was revised to reflect current terminology and processes as reflected on the IACS website. Please note that the Centers for Medicare & Medicaid Services (CMS) will notify providers as Internet applications become available and provide clear instructions that specify which providers should register in IACS to access those applications. For example, MLN Matters articles 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

SE0753, SE0747, SE0754, IACS, Computer

Provider Types Affected

Medicare Physicians, providers, and suppliers (collectively referred to as providers) who submit fee-for-service 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 the first MLN Matters article in this new series on IACS, which can be found at

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

Key Points

- For purposes of the IACS, "Provider Organizations" include individual practitioners who will delegate IACS work to staff as well as their staff using IACS.

Registering in IACS

- 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 Fee-for-Service 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.
- **When given a choice in IACS to select their community, Medicare providers should select the "Provider/Supplier Community".**

Questions and Answers about the Provider Organization Registration Process

1. How can I get registered in IACS? 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, 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 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 account profile will be released shortly. In the meantime, questions may be directed to the help desk as shown in the "Additional Help" section below.

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

As few as two staff can be registered in IACS 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 SO (BSO) is an optional role.

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

Note: There is an illustration of the IACS registration approval process on page 4 of MLN Matters article SE0753.

Quick Reference Guides for Completing the Provider Organization Registration Process

- **BSO Guide**
 - BSOs will request access to an organization using the IACS *BSO Registration Quick Reference Guide*, which may be found at http://www.cms.hhs.gov/IACS/04_Provider_Community.asp#TopOfPage on the CMS website.
- **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 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 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. For this reason, they should know everyone in their user group.
- The IACS *UGA Registration Quick Reference Guide* may be found at http://www.cms.hhs.gov/IACS/04_Provider_Community.asp#TopOfPage on the CMS website.
- ***End User Registration Quick Reference Guide***
 - An IACS *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.
- ***User Guide for Approvers***
 - The IACS *User Guide for Approvers* provides step-by-step instructions that SOs, BSOs and UGAs will use to approve or deny user requests to register in IACS. The IACS *User Guide for Approvers* can be found by going to the download section at http://www.cms.hhs.gov/IACS/03_General_User_Guides_and_Resources.asp 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 that performs Medicare work on behalf of the provider organization (a contractor for a provider organization, billing company, etc.).
- If the provider 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, the surrogate billing company ABC can register in IACS 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 three different provider organizations, the UGA for the surrogate user group will need to make three different requests to create three different surrogate user groups, one for each provider organization with which the UGA needs to associate.
- If a **provider's organization does not appear in IACS**, they have not yet registered/been approved and you should contact them. You will not be able to associate with them until the provider organization appears in IACS.
- If the **provider's organization does appear in IACS**, each provider's SO or BSO must approve the request to associate that surrogate user group with their organization. As a surrogate user group, you

will only be able to associate with provider organizations after those respective provider organizations and SOs have been approved in IACS.

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

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

- CMS has established an end user support (EUS) Help Desk to assist with providers with access to IACS. The EUS Help Desk may be reached by E-mail at EUSSupport@cqi.com or by phone on 1-866-484-8049 or TTY/TDD on 1-866-523-4759.
- In addition, providers 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.

Important Links

The related MLN Matters article can be found at

<http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0753.pdf> on the CMS website.

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

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