

## How to submit a CMS User ID request

1. Download a copy of the [Application for Access to CMS Computer Systems](#) form.

2. You must complete all the steps below or your request will not be processed:

**Step 1:** In Section 1, check "New" for your type of request.

**Step 2:** In Section 2, select the 3rd check box in the left-hand column, "Medicare Advantage / Medicare Advantage with Prescription Drug / Prescription Drug Plan / Cost Contracts – Using Other Systems."

**Step 3:** In Section 2, complete your contact information—Name, Company Name, Mailing Address, Phone Numbers and Email address.

**Step 4:** In Section 3, enter the ACO ID number(s) you're authorized to request access for. If you're requesting multiple ACO IDs, enter **all** ACO IDs on the Contract Number line. Your ACO ID begins with the letter "A", followed by a 4-digit number.

**Step 5:** In Section 4, go to the 3rd line down and select the "Connect" check box. On the blank lines, hand-write the following job code clearly:

- HPMS\_P\_Comm1User (this job code is for HPMS access)
- ACO\_EFT\_User (this job code is Managed File Transfer access)

Note: the text box won't accept a typed entry; you must hand-write the job code.

**Step 6:** In Section 5, briefly say why you need access for each job code (example: "I need a CMS User ID to access the Medicare Shared Savings Program systems for ACOs.")

**Step 7:** Leave Section 6 blank.

**Step 8:** On page 3, read and complete each

- Print your name as you want it recorded.
- Do not fill out the "CMS USERID" field.
- Enter your Social Security Number and date of birth.
- Read the Privacy Act Statement and Security Requirements for Users of CMS Computer Systems statements.
- You must sign and date your application to make sure your request gets processed successfully.

3. Make sure each individual's application includes:

- Applicant's Original Signature
- Date
- Social Security Number
- All ACO ID number(s) the user is authorized to have access to

4. Submit (1) form for each individual contact by following the instructions in Step 2-3. You are prohibited from sharing your CMS issued User ID and password with anyone. We strongly encourage you to have separate contacts for each contact type listed below:
  - Submit (1) form for Application Contact (primary)
  - Submit (1) form for Application Contact (secondary)
  - Submit (1) form for IT Contact (primary)
  - Submit (1) form for IT Contact (secondary)

These contacts will receive communication about application training and important information during the application review process.

- The Application contacts will be contacted for questions about your ACO's NOI and application submission.
  - IT contacts will receive additional communication about testing your ACO's IT connectivity during the application review period. This initial testing will not include the transfer of Personal Health Information (PHI) or Personally Identifiable Information (PII). Approved applicants will continue with additional system testing later in the year.
5. If the contact is a consultant, include an authorization letter from the ACO which authorizes the consultant to gain access to the ACO's data maintained in CMS systems. The letter must have the following:
    - must be on the ACO's official letterhead
    - must clearly indicate the consultant's name and state that the he or she will be serving as a consultant on behalf of the ACO(s)
    - Authorized ACO Identification Number(s) (ACO ID) consultant can have access to
    - Signed by the ACO's authorized official
  6. Send the completed application by an expedited mail service as soon as possible to:

Centers for Medicare & Medicaid Services  
Attention: Adam Foltz  
7500 Security Blvd  
Mail Stop: C4-18-13  
Baltimore, MD 21244

Contact [SSPACO\\_Applications@cms.hhs.gov](mailto:SSPACO_Applications@cms.hhs.gov) if you have any questions on getting a User ID.