



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

Enterprise Privacy Policy Engine (EPPE)



**Limited Data Set (LDS) Approval
Workflow Training Module: New LDS
DUA Request with New Data Files**

DUA Requester – New LDS DUA Request

Training Topics in This Module

- EPPE Application Access Prerequisites
- Basic Information About EPPE
- Creating a New/Re-Use LDS DUA
 - Add Collaborating Organization(s)
 - Main Information
 - Add Custodian(s)/DESY User(s)
 - New Data File(s) Selection
 - Upload Documents
 - Review & Submit the DUA
 - Print the DUA
- EPPE Help Desk Information

EPPE ACCESS PREREQUISITES

EPPE Access Pre-Requisites

CMS Enterprise Portal Access, EIDM Credentials, and EPPE Access

- Obtain access to the CMS Enterprise Portal
 - Access CMS Portal
 - <https://portal.cms.gov/>
 - Download the Symantec Validation & ID Protection (VIP) Access Multi-factor Authentication (MFA) Software
 - <https://vip.symantec.com/>
 - Obtain Enterprise Identity Management (EIDM) Credentials and EPPE Access
 - <https://www.cms.gov/Research-Statistics-Data-and-Systems/Computer-Data-and-Systems/Privacy/EIDMNewUser.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.

CREATE A NEW LDS DUA

DUA Requester – New LDS DUA Request

EPPE Welcome Screen: DUA(s) Menu

Enterprise Privacy Policy Engine

Logged in as: DUA REQUESTER

EPPE Home

DUA(s)

New / Re-Use

Update / Amend

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

Exit EPPE

Welcome to EPPE

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.

Select **New / Re-Use** on the **DUA(s)** menu to begin a new DUA.

DUA Requester – New LDS DUA Request

DUA Type Selection

New / Re-Use DUA Request

DUA TYPE

Required fields are marked with an asterisk ().*

What type of New or Re-Use DUA do you wish to request? *

Contractor ?

Limited Data Set ?

Quit Next

1. The **DUA Type** Screen for **New / Re-Use DUA Request** displays.
2. Select the **Limited Data Set** radio button.
3. Select **Next**.

DUA Requester – New LDS DUA Request

Organization Selection

New / Re-Use DUA Request

ORGANIZATION(S)

Required fields are marked with an asterisk ().*

Your Organization : Demonstration Organization 1

Save Quit Previous Next

1. **Your Organization** is pre-populated. A drop-down will appear for you to select your organization if you are a Requester for multiple organizations.
2. Select **Next**.

ADD COLLABORATING ORGANIZATION(S)

DUA Requester – New LDS DUA Request

Collaborating Organization Decision

New / Re-Use DUA Request

COLLABORATING ORGANIZATION(S)

Required fields are marked with an asterisk (*).

Your Organization : Demonstration Organization 1

Do you wish to add/remove a Collaborating Organization(s) for this DUA request? *

YES NO 

Save

Quit

Previous

Next

1. The **Collaborating Organization(s)** screen displays with the selected Primary **Organization Name**.
2. Select the **Yes** or **No** radio button to answer the question, ***“Do you wish to add/remove a Collaborating Organization(s) for this DUA request?”***

Note: The **Yes** and **No** selections are depicted in the following slides.

DUA Requester – New LDS DUA Request

No Collaborating Organization(s) Needed

New / Re-Use DUA Request

COLLABORATING ORGANIZATION(S)

Required fields are marked with an asterisk ().*

Your Organization : **Demonstration Organization 1**

Do you wish to add/remove a Collaborating Organization(s) for this DUA request? *

YES NO

1. If no **Collaborating Organization(s)** is needed, select the **No** radio button.
2. Select the **Next** button.

DUA Requester – New LDS DUA Request

Add Collaborating Organization

1. Answer **Yes** to be able to **Select Collaborating Organization** if you need to add one or more to the DUA.
2. Enter the **Collaborating Organization** name.
3. Select the **Collaborating Organization** from the drop-down list.
4. Select **Add**.

Notes:

- You must select the organization from the drop-down list.
- Adding **Collaborating Organization(s)** to an LDS DUA is optional.

New / Re-Use DUA Request

COLLABORATING ORGANIZATION(S)

Required fields are marked with an asterisk ().*

Selected Organization : DEMONSTRATION ORGANIZATION 1

Do you wish to add/remove a Collaborating Organization(s) for this DUA request? *

YES NO [?](#)

Use the Collaborating Organization (autocomplete search field) to select an organization and then click **Add** button to add the collaborating organization to the DUA Request. Repeat the process to add additional collaborating organizations to the DUA Request. If the organization is not located in the search list, select **Cannot Locate Organization** link. The selected collaborating organizations on the DUA request are shown in the table.

Select Collaborating Organization *:

[Cannot locate the Organization? ?](#)

Selected Collaborating Organizations

Collaborating Organization Name	Action
---------------------------------	--------

DUA Requester – New LDS DUA Request

Collaborating Organization Displays in Table

1. After selecting the **Add** button, the **Collaborating Organization** is added to the selection table.
2. Select **Next**.

Notes:

- Use the **Remove** link to remove the **Collaborating Organization** from the table.
- You can add multiple **Collaborating Organizations**.

New / Re-Use DUA Request

COLLABORATING ORGANIZATION(S)

Required fields are marked with an asterisk ().*

Selected Organization : DEMONSTRATION ORGANIZATION 1

Do you wish to add/remove a Collaborating Organization(s) for this DUA request? *

YES NO [?](#)

Use the Collaborating Organization (autocomplete search field) to select an organization and then click **Add** button to add the collaborating organization to the DUA Request. Repeat the process to add additional collaborating organizations to the DUA Request. If the organization is not located in the search list, select **Cannot Locate Organization** link. The selected collaborating organizations on the DUA request are shown in the table.

Select Collaborating Organization *: [Cannot locate the Organization? ?](#)

Add

Selected Collaborating Organizations

	Collaborating Organization Name	Action
1	NORTH CAROLINA STATE UNIVERSITY	Remove

Save **Quit** **Previous** **Next**

DUA Requester – New LDS DUA Request

Add New Collaborating Organization

New / Re-Use DUA Request

COLLABORATING ORGANIZATION(S)

Required fields are marked with an asterisk (*).

Selected Organization : DEMONSTRATION ORGANIZATION 1

Do you wish to add/remove a Collaborating Organization(s) for this DUA request? *

YES NO [?](#)

Use the Collaborating Organization (autocomplete search field) to select an organization and then click **Add** button to add the collaborating organization to the DUA Request. Repeat the process to add additional collaborating organizations to the DUA Request. If the organization is not located in the search list, select **Cannot Locate Organization** link. The selected collaborating organizations on the DUA request are shown in the table.

Select Collaborating Organization *

Search by entering at least 3 character

[Cannot locate the Organization?](#) [?](#)

Add

Selected Collaborating Organizations

Collaborating Organization Name	Action
---------------------------------	--------

Save

Quit

Previous

Next

Select the **Cannot locate the Organization?** link to add a **Collaborating Organization** that is not listed.

DUA Requester – New LDS DUA Request

Add New Collaborating Organization

New / Re-Use DUA Request

COLLABORATING ORGANIZATION(S)

Required fields are marked with an asterisk ().*

Selected Organization : DEMONSTRATION ORGANIZATION 1

Do you wish to add/remove a Collaborating Organization(s) for this DUA request? *

YES NO

Use the Collaborating Organization (autocomplete search field) to select collaborating organizations to the DUA Request. If the organization is not shown in the table.

Select Collaborating Organization *:

Search by entering at least 3 characters

Selected Collaborating Organizations

	Collaborating Organization Name	Action
1	NORTH CAROLINA STATE UNIVERSITY	Remove

Organization

You can submit a request for a new organization, however it will be available for you to select only upon approval. Do you wish to request for a new organization?

1. The **Organization** pop-up message displays with a question asking if you want to submit a request for a new organization.
2. Select the **Yes** button to add a new Collaborating Organization.

DUA Requester – New LDS DUA Request

Add New Organization Information

Add New Organization

Required fields are marked with an asterisk (*). Please enter your Organization information.

Organization Name * : ?

Address Type * :
 Domestic Address International Address ?

Address Line 1 * : ?

Address Line 2 : ?

Address Line 3 : ?

City * : ?

State * : ?

Country : ?

Zip Code * : ?

Zip Code Extension : ?

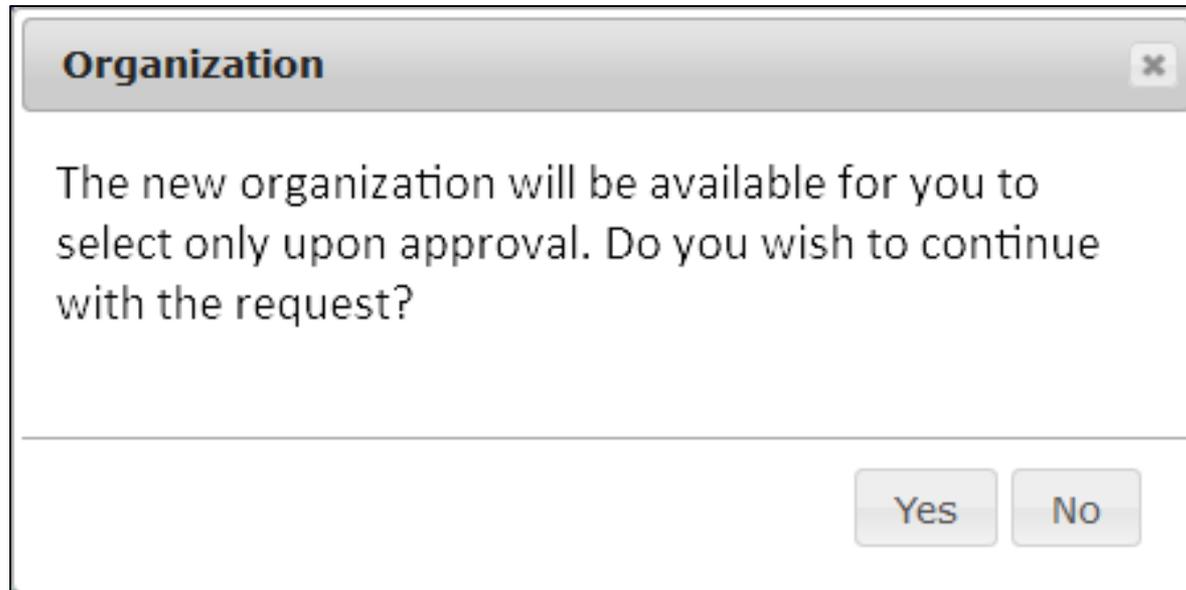
Submit **Cancel**

Note: The **Requesting Organization** must be a location within the U.S. since **LDS** data files cannot be shipped outside of the U.S.

1. The **Add New Organization** pop-up displays.
2. Enter the **Organization** information.
 - **Organization Name**
 - **Address Type:** Note this defaults to **Domestic Address**. (**International Address** is not applicable to LDS DUAs)
 - **Address** (Lines 1-3)
 - **City**
 - **State**
 - **Country** (not applicable to LDS DUAs)
 - **Zip Code**
 - **Zip Code Extension** (optional)
3. Select the **Submit** button.

DUA Requester – New LDS DUA Request

New Collaborating Organization Confirmation



1. The **Confirmation** message displays: ***“The new organization will be available for you to select only upon approval. Do you wish to continue with the request?”***. Select either **Yes** or **No**.
2. If you selected **Yes**, click the **Quit Without Saving** button.

Note: A new Organization requires EPPE Administrator approval. The DUA will not be saved and the DUA Requester will have to restart the DUA once the organization is approved.

MAIN INFORMATION

DUA Requester – New LDS DUA Request

Main Information Screen

New / Re-Use DUA Request

Main Information Data Selection Upload Documents Review & Submit

DUA Number : LDSS-2019-54177

MAIN INFORMATION

Required fields are marked with an asterisk (*).

Project Name * : ?

Project Aim * : ? 4000 characters remaining (4000 maximum)

Save Quit Previous Next

1. The **DUA Number** is displayed on the **Main Information** screen.
2. Enter **Project Name** and **Project Aim**.
3. Select **Next**.

ADD CUSTODIAN(S)/DESY USERS

DUA Requester – New LDS DUA Request

Custodian(s)/DESY Users Screen: Add a Custodian/DESY User

New / Re-Use DUA Request

Main Information Data Selection Upload Documents Review & Submit

DUA Number : LDSS-2019-54177

CUSTODIAN(S)/DESY USERS

Search:

User Name	EUA User Id	Organization	Action
Showing 0 to 0 of 0 entries			

Add Custodian(s)/DESY User

Save Quit Previous Next

1. The **Custodian(s)/DESY Users** screen displays.
 - There must be at least one (1) Custodian on the DUA which can include the Requester.
2. Select the **Add Custodian(s)/DESY User** button to add **Custodian(s)/DESY User(s)**.

Notes:

- It is optional to add **DESY Users** but there must be at least one (1) **Custodian** on the DUA which can include the Requester
- **Custodian(s)** added will display in the Custodians List.

DUA Requester – New LDS DUA Request

Custodian(s)/DESY Users Screen: Add a Custodian/DESY User

Add Custodian/DESY User

Required fields are marked with an asterisk (*).

Select Organization * : Choose Organization...
Select Users * : Choose Users... Add New User
Select User Location * : Choose Location... Add New Location

Is the selected user a DESY User? : Yes No

EUA User Id * :

Cancel Submit

Add Custodian/DESY User

Required fields are marked with an asterisk (*).

Select Organization * : Choose Organization...
Select Users * : Choose Users... Add New User
Select User Location * : Choose Location... Add New Location

Is the selected user a DESY User? : Yes No

Cancel Submit

1. The **Add Custodian/DESY User** pop-up displays.
2. Select the **Organization**.
3. Select a **User** from the drop-down.
4. Select the **User Location**.
5. Answer the question **“Is the selected user a DESY User?”**
 - a) If you selected **Yes**, enter the required EUA User ID.
 - b) If you selected **No**, no EUA User ID is required.
6. Select the **Submit** button.

Notes:

- Custodian(s)/DESY User(s) are selectable from the Primary Organization and any Collaborating Organization(s) associated to the DUA.
- Use **Add New User** to add a new Custodian/DESY User for the selected organization.
- Use **Add New Location** to add a new location for the selected Custodian/DESY User.

DUA Requester – New LDS DUA Request

Custodian(s)/DESY Users Screen: Custodian(s)/DESY Users Table

New / Re-Use DUA Request

Main Information → Data Selection → Upload Documents → Review & Submit

DUA Number : LDSS-2019-54177

CUSTODIAN(S)/DESY USERS

Search:

User Name	EUA User Id	Organization	Action
Demo UserOne		Demonstration Organization 1	Edit Remove

Showing 1 to 1 of 1 entries

1. The Custodian/DESY User displays in the table.
2. Enter additional **Custodian(s)/DESY User(s)** as needed.
3. Select the **Next** button when all Custodian(s)/DESY User(s) have been added.

Notes:

- Editing a **Custodian/DESY User's** information will affect their information across all DUAs on which they are listed.
- Use **Edit** to update/change a Custodian/DESY User's information.
- Use the **Remove** link to remove Custodian(s)/DESY Users from the table.

RE-USE DATA FILE(S) SELECTION

DUA Requester – New LDS DUA Request

Please refer to the **New/Re-Use LDS DUA Request with Re-Use Data Files** training module for more information on adding Re-Use Data Files to a New/Re-Use DUA.

NEW DATA FILE(S) SELECTION

DUA Requester – New LDS DUA Request

Add New Data File(s)

New / Re-Use DUA Request

Main Information → Data Selection → Upload Documents → Review & Submit

DUA Number : LDSS-2019-54177

NEW DATA FILE(S) SELECTION

Required fields are marked with an asterisk (*).

Privacy Level : LIMITED DATASET ?

Select Data File Descriptions : Start typing to search....

- SADHS - 100% LDS WITH STANDARD ANALYTICAL DATE FILE - HOSPICE
- SADIP - 100% LDS WITH STANDARD ANALYTICAL DATE FILE - INPATIENT
- SADOP - 100% LDS WITH STANDARD ANALYTICAL DATE FILE - OUTPATIENT
- SADSNF - 100% LDS WITH STANDARD ANALYTICAL DATE FILE - SKILLED NURSING FACILITY
- SAD5C - 5% LDS WITH STANDARD ANALYTICAL DATE FILE - CARRIER
- SAD5D - 5% LDS WITH STANDARD ANALYTICAL DATE FILE - DURABLE MEDICAL EQUIPMENT

Add selection to DUA request

Selected New 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

Save Quit Previous Next

1. The **New Data File(s) Selection** screen displays with the **Privacy Level** defaulted to “**Limited Data Set**”. You must type at least 3 characters in the **Select Data File Descriptions** search box to narrow the results. If you are unsure of the data code, use key words to find your file e.g. “carrier” or “inpatient”.
2. Select the data file(s).
3. Select **Add selection to DUA request**.

DUA Requester – New LDS DUA Request

Add New Data File(s)

New / Re-Use DUA Request

Main Information → Data Selection → Upload Documents → Review & Submit

DUA Number : LDSS-2019-54177

NEW DATA FILE(S) SELECTION

Required fields are marked with an asterisk (*)

Privacy Level : LIMITED DATASET ?

Select Data File Descriptions :

Start typing to search...

- SADHS - 100% LDS WITH STANDARD ANALYTICAL DATE FILE - HOSPICE
- SADIP - 100% LDS WITH STANDARD ANALYTICAL DATE FILE - INPATIENT
- SADOP - 100% LDS WITH STANDARD ANALYTICAL DATE FILE - OUTPATIENT
- SADSNF - 100% LDS WITH STANDARD ANALYTICAL DATE FILE - SKILLED NURSING FACILITY
- SAD5C - 5% LDS WITH STANDARD ANALYTICAL DATE FILE - CARRIER
- SAD5D - 5% LDS WITH STANDARD ANALYTICAL DATE FILE - DURABLE MEDICAL EQUIPMENT

Add selection to DUA request

Selected New Data File Descriptions

Data File Description	Extraction % / Cohort	From Year	To Year	Privacy Level	Status	Action
SAF-5C - LDS - SAF 5% - CARRIER				LIMITED DATASET	INCOMPLETE	Edit Remove
SAF-5D - LDS - SAF 5% - DURABLE MEDICAL EQUIPMENT				LIMITED DATASET	INCOMPLETE	Edit Remove

Showing 1 to 2 of 2 entries

Save Quit Previous Next

1. The selected data files display in the table below.
2. The file(s) status displays **Incomplete**.
3. Select **Edit** to complete required file attributes.

Note: Select **Remove** for each file you need to remove from the table. It will only remove the file from the table below and place it back in the list of new data files to be selected above.

DUA Requester – New LDS DUA Request

New Data File(s): Enter Data File Extraction Information

The screenshot shows a 'Data file information' pop-up window with three tabs: '1. Data file extraction' (active), '2. Custodians', and '3. Shipping Information'. The 'Data file extraction' tab contains the following fields:

- Data File Description : SAF-5C - LDS - SAF 5% - CARRIER
- Data File Extraction % / Cohort *: Select an Opti... ?
- From *: Select an Opti... ?
- To *: Select an Opti... ?
- Please select quarters when adding quarterly data files to your request.*
- Quarter(s) : Choose Quarters... ?
- State(s) (if applicable) : Select Some Options
- Add** button
- Previous and Next buttons at the bottom right.

1. The **Data file information** pop-up displays with the **Data file extraction** tab in focus.
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 – New LDS DUA Request

New Data File(s): Add Extraction Information

Data file information

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

Data File Description : SAF-5C - LDS - SAF 5% - CARRIER

Data File Extraction % / Cohort * : ?

From * : ?

To * : ?

Please select quarters when adding quarterly data files to your request.

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	2016	2020		5%		New Year(s)	Remove

Previous **Next**

1. The data file extraction attributes display in the table below.
2. Select **Next**.

DUA Requester – New LDS DUA Request

View Custodian(s) for New Data File(s)

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

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

DUA Requester – New LDS DUA Request

New Data File(s): Add Shipping Information

1. The **Shipping Information** tab on the **Data file information** pop-up displays with the **Access Method** defaulted to **Shipping** and **Data Dissemination System** defaulted to **CCW/VRDC**. Select a different **Access Method** and/or **Data Dissemination System**, if applicable.
2. Select **Primary Recipient**.
3. Select **Data Shipping Location**.
4. Select **Carrier** (optional).
5. Select the **Add** button.

Notes:

- If you are not sure of which access method and/or data dissemination system to select, leave the default **Shipping** and **CCW/VRDC** selected.
- Use **Add New Location** to add a new location for the selected Primary Recipient.

Data file information

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

Data File Description : SAF-5C - LDS - SAF 5% - CARRIER

Required fields are marked with an asterisk (*).

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

Data Dissemination System *: CCW/VRDC x

Primary Recipient *: Choose Recipient... ?

Data Shipping Location *: Choose Shipping Location... Add New Location ?

Carrier : Select an Option ?

Add

Selected Shipping Details

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

Previous Finish

DUA Requester – New LDS DUA Request

New Data File(s): Data File Attributes for First File is Complete

New / Re-Use DUA Request

Main Information Data Selection Upload Documents Review & Submit

DUA Number : LDSS-2019-54177

NEW DATA FILE(S) SELECTION

Required fields are marked with an asterisk (*).

Privacy Level : LIMITED DATASET ?

Select Data File Descriptions : Start typing to search....

- SADHS - 100% LDS WITH STANDARD ANALYTICAL DATE FILE - HOSPICE
- SADIP - 100% LDS WITH STANDARD ANALYTICAL DATE FILE - INPATIENT
- SADOP - 100% LDS WITH STANDARD ANALYTICAL DATE FILE - OUTPATIENT
- SADS NF - 100% LDS WITH STANDARD ANALYTICAL DATE FILE - SKILLED NURSING FACILITY
- SAD5C - 5% LDS WITH STANDARD ANALYTICAL DATE FILE - CARRIER
- SAD5D - 5% LDS WITH STANDARD ANALYTICAL DATE FILE - DURABLE MEDICAL EQUIPMENT

Add selection to DUA request

Selected New Data File Descriptions

Data File Description	Extraction % / Cohort	From Year	To Year	Privacy Level	Status	Action
SAF-5C - LDS - SAF 5% - CARRIER	5%	2016	2020	LIMITED DATASET	COMPLETE	Edit Remove Apply All
SAF-5D - LDS - SAF 5% - DURABLE MEDICAL EQUIPMENT				LIMITED DATASET	INCOMPLETE	Edit Remove

Showing 1 to 2 of 2 entries Previous Next

Save Quit Previous Next

1. The first file's status is **Complete**.
2. Select the **Apply All** link to apply the same attributes to all or some of the remaining files **or**
3. Select the **Edit** link to enter attributes for each file.

Note: 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 – New LDS DUA Request

New Data File(s): Apply First Data File Attributes to All New Files

Apply Data Selection Attributes ✕

Select the data file(s) to which you wish to apply the selected data attributes.

<input checked="" type="checkbox"/> Select All	Data File Description	Status
<input type="checkbox"/>	SAF-5D - LDS - SAF 5% - DURABLE MEDICAL EQUIPMENT	INCOMPLETE

Apply to DUA request

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

Note: When using the **Apply All** feature on **New** data files, all **Extraction** attributes (Extraction &/Cohort, From/To Years, and Quarters/States as applicable) and **Data Dissemination System/Shipping** information will be applied to the selected files.

DUA Requester – New LDS DUA Request

New Data File(s): Status for All New Files Displays “Complete”

New / Re-Use DUA Request

Main Information → Data Selection → Upload Documents → Review & Submit

DUA Number : LDSS-2019-54177

NEW DATA FILE(S) SELECTION

Required fields are marked with an asterisk (*).

Privacy Level : LIMITED DATASET ?

Select Data File Descriptions : Start typing to search....

- SADHS - 100% LDS WITH STANDARD ANALYTICAL DATE FILE - HOSPICE
- SADIP - 100% LDS WITH STANDARD ANALYTICAL DATE FILE - INPATIENT
- SADOP - 100% LDS WITH STANDARD ANALYTICAL DATE FILE - OUTPATIENT
- SADSNF - 100% LDS WITH STANDARD ANALYTICAL DATE FILE - SKILLED NURSING FACILITY
- SAD5C - 5% LDS WITH STANDARD ANALYTICAL DATE FILE - CARRIER
- SAD5D - 5% LDS WITH STANDARD ANALYTICAL DATE FILE - DURABLE MEDICAL EQUIPMENT

Add selection to DUA request

Selected New Data File Descriptions

Data File Description	Extraction % / Cohort	From Year	To Year	Privacy Level	Status	Action
SAF-5C - LDS - SAF 5% - CARRIER	5%	2016	2020	LIMITED DATASET	COMPLETE	Edit Remove Apply All
SAF-5D - LDS - SAF 5% - DURABLE MEDICAL EQUIPMENT	5%	2016	2020	LIMITED DATASET	COMPLETE	Edit Remove

Showing 1 to 2 of 2 entries

Previous Next

Save Quit Previous Next

1. The **New Data File(s) Selection** screen displays.
2. The status for all **New** data files is **Complete**.
3. Select the **Next** button.

Note: Use **Remove** to remove a data file from the table, if applicable.

UPLOAD DOCUMENTS

DUA Requester – New LDS DUA Request

Pre-defined LDS Document Types

Document	Rule(s)
Attachment A Research Protocol	Required for all New DUAs.
LDS Worksheet/Re-Use Data Worksheet	<ul style="list-style-type: none">• The LDS Worksheet is required when New use files are being requested.• The Re-Use Data Worksheet is required when Re-Use files are being requested.
Signature Addendum	Required when adding Custodians to an LDS DUA, other than the Requester, through New/Re-Use and/or Update/Amend.

Note: An example of the LDS Worksheet is shown on the next slide.

DUA Requester – New LDS DUA Request

LDS Worksheet Example

Form updated 04/30/2019

Quarterly Request Form for LDS SAF (Standard Analytic File)

Running Total all Files: \$0										Price per Quarter		
Name of File	Year	5% 100%	Select Quarter(s)							COST	5%	100%
Master Beneficiary Summary File Quarterly	2015	5%	1 ▶	N/A	2 ▶	N/A	3 ▶		4 ▶	\$0	\$150	\$625
		100%	1 ▶	N/A	2 ▶	N/A	3 ▶		4 ▶	\$0		
	2016	5%	1 ▶		2 ▶		3 ▶		4 ▶	\$0		
		100%	1 ▶		2 ▶		3 ▶		4 ▶	\$0		
	2017	5%	1 ▶		2 ▶		3 ▶		4 ▶	\$0		
		100%	1 ▶		2 ▶		3 ▶		4 ▶	\$0		
	2018	5%	1 ▶		2 ▶		3 ▶		4 ▶	\$0		
		100%	1 ▶		2 ▶		3 ▶		4 ▶	\$0		
Carrier File Quarterly	2015	5%	1 ▶	N/A	2 ▶	N/A	3 ▶		4 ▶	\$0	\$1,075	N/A
		100%	N/A							N/A		
	2016	5%	1 ▶		2 ▶		3 ▶		4 ▶	\$0		
		100%	N/A							N/A		
	2017	5%	1 ▶		2 ▶		3 ▶		4 ▶	\$0		
		100%	N/A							N/A		
	2018	5%	1 ▶		2 ▶		3 ▶		4 ▶	\$0		
		100%	N/A							N/A		
Durable Medical Equipment File Quarterly	2015	5%	1 ▶	N/A	2 ▶	N/A	3 ▶		4 ▶	\$0	\$500	N/A
		100%	N/A							N/A		
	2016	5%	1 ▶		2 ▶		3 ▶		4 ▶	\$0		
		100%	N/A							N/A		
	2017	5%	1 ▶		2 ▶		3 ▶		4 ▶	\$0		
		100%	N/A							N/A		

INSTRUCTIONS
PROJECT INFO
Extract Spec 2005-Current
SAF Quarterly
LDS MCBS
LDS HOS
PAYMENT & SHIPPING

The Standard Analytic File (SAF) Quarterly tab of the LDS Worksheet is shown in this example.

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 – New LDS DUA Request

Upload Documents

New / Re-Use DUA Request

Main Information → Data Selection → **Upload Documents** → Review & Submit

DUA Number : LDSS-2019-54177

UPLOAD DOCUMENTS

For the documents, please link to the following page: [Limited Data Set Forms](#)
You may upload one or more documents to support your DUA.

	Document	Uploaded Files	Upload Document
1	ATTACHMENT A RESEARCH PROTOCOL		<button>Upload Documents</button>
2	DUA FORM/DUA UPDATE FORM		<button>Upload Documents</button>
3	LDS WORKSHEET/RE-USE DATA WORKSHEET		<button>Upload Documents</button>
4	SIGNATURE ADDENDUM		<button>Upload Documents</button>

Additional Supporting Documents
Upload any additional supporting documents for your DUA request. You may upload one or more documents to support your DUA.

Upload

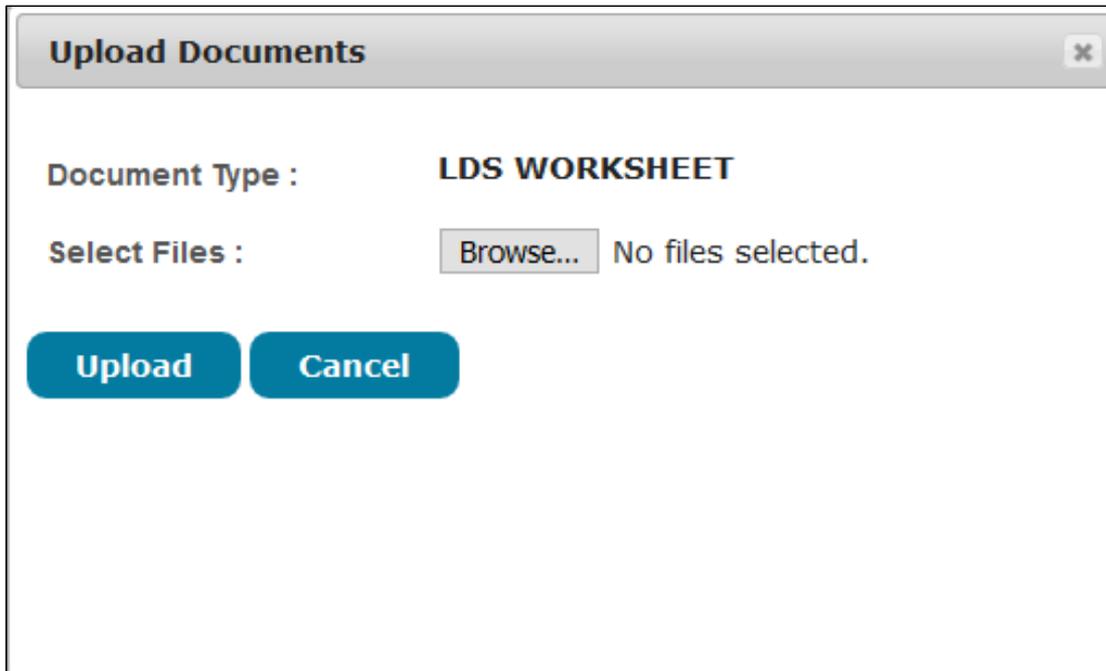
S.No	Document	Description	Date and Time	Action
------	----------	-------------	---------------	--------

Save Quit Previous Next

1. The **Upload Documents** screen displays with pre-defined document types.
 2. Select the **Upload Documents** button to upload the document(s).
- Note:** Use the **Limited Data Set Forms** page link to find and download a copy of the pre-defined documents displayed in this slide.

DUA Requester – New LDS DUA Request

Upload Documents – File Selection Popup



Upload Documents [X]

Document Type : **LDS WORKSHEET**

Select Files : No files selected.

1. The **Upload Documents** popup displays for the selected document type. In this example, **LDS Worksheet** was selected.
2. Select the **Browse** button to choose your file from your local computer.
3. Select the **Upload** button.

Notes:

- Max file size is 2 megabytes and not all file types are allowed. EPPE will display a message when attempting to upload non-allowable file types.
- For easy recognition, please name files appropriately based on contents.
- EPPE cannot accept **LDS Worksheets** with macros. Please be sure to save it as a standard Excel file prior to upload.

DUA Requester – New LDS DUA Request

Upload Documents (cont.)

New / Re-Use DUA Request

Main Information → Data Selection → Upload Documents → Review & Submit

DUA Number : LDSS-2019-54177

UPLOAD DOCUMENTS

For the documents, please link to the following page: [Limited Data Set Forms](#)
You may upload one or more documents to support your DUA.

	Document	Uploaded Files	Upload Document
1	ATTACHMENT A RESEARCH PROTOCOL		Upload Documents
2	DUA FORM/DUA UPDATE FORM		Upload Documents
3	LDS WORKSHEET:RE-USE DATA WORKSHEET	LDS_Worksheet_Sample.xlsx Download Delete	Upload Documents
4	SIGNATURE ADDENDUM		Upload Documents

Additional Supporting Documents
Upload any additional supporting documents for your DUA request. You may upload one or more documents to support your DUA.

[Upload](#)

S.No	Document	Description	Date and Time	Action
1	Upload_Test_File.bt	Test file for training demonstration.	May 07, 2019 02:10:35 PM	Download Delete

[Save](#) [Quit](#) [Previous](#) [Next](#)

1. The **Upload Documents** screen displays. In this example, an **LDS Worksheet** was uploaded.
2. Select the **Upload Documents** button to upload additional, pre-defined document types if applicable.
3. Select the **Upload** button at the bottom of the screen to upload **Additional Supporting Documents**. In this example, a sample document was uploaded for demonstration.
4. Select the **Next** button.

Notes:

- Uploaded files can be deleted from this page prior to DUA submission.
- An upload date and time stamp will be displayed on the **DUA Review** screen for all uploaded files.

DUA Requester – New LDS DUA Request

Required Documents

New / Re-Use DUA Request

Main Information → Data Selection → Upload Documents → Review & Submit

DUA Number : LDSS-2019-52742

UPLOAD DOCUMENTS

For the documents, please link to the following page: Limited Data Set Forms
You may upload one or more documents to support your DUA.

	Document	Upload Document
1	Attachment A Research Protocol	Upload Documents
2	DUA FORM/DUA UPDATE FORM	Upload Documents
3	LDS WORKSHEET/RE-USE DATA WORKSHEET	Upload Documents
4	SIGNATURE ADDENDUM	Upload Documents

Additional Supporting Documents
Upload any additional supporting documents for your DUA request. You may upload one or more documents to support your DUA.

Upload

S.No	Document	Description	Date and Time	Action
------	----------	-------------	---------------	--------

Save Quit Previous Next

Document upload is required

Please upload the ATTACHMENT A RESEARCH PROTOCOL document which is required when a new LDS DUA is requested.

OK

1. The **Document upload is required** pop-up displays when selecting **Next** and there are missing documents.
2. In this example, Attachment A is required for all New LDS DUAs.

Note: You will receive additional required document pop-ups when specific pre-defined documents have not been uploaded e.g. An LDS Worksheet is required if New data files are added to the DUA.

REVIEW & SUBMIT NEW/RE-USE LDS DUA

DUA Requester – Submit New DUA

Review the DUA

New / Re-Use DUA Request

Main Information Data Selection Upload Documents Review & Submit

DUA Number : LDSS-2019-54177

REVIEW

DUA Life Cycle 

MAIN INFORMATION

DUA Number : LDSS-2019-54177
DUA Customer Type : Limited Data Set
DUA Request Type : CREATE DUA
DUA Status : In Progress
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

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 Previous Next

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 Users**

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

DUA Requester – Submit New DUA

Review the DUA (cont.)

DATA FILE DESCRIPTIONS

Data File Description		From Year	To Year	
SAF-5C - LDS - SAF 5% - CARRIER	NEW	2016	2020	+
SAF-5D - LDS - SAF 5% - DURABLE MEDICAL EQUIPMENT	NEW	2016	2020	+
SAF-5D - LDS - SAF 5% - DURABLE MEDICAL EQUIPMENT	RE-USE	2011	2015	+
SAF-5C - LDS - SAF 5% - CARRIER	RE-USE	2011	2015	+

Showing 1 to 4 of 4 entries Previous Next

PROXY

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

DOCUMENTS

S.No	Document	Uploaded Files	Date and Time	Action
1	LDS WORKSHEET	LDS_Worksheet_Sample.xlsx	May 07, 2019 02:20:56 PM	Download

Additional Supporting Documents

S.No	Document	Description	Date and Time	Action
1	Upload_Test_File.bt	Test file for training demonstration.	May 07, 2019 02:21:25 PM	Download

Comments :

Submitting this new DUA for reasons x, y, and z. 1952 characters remaining (2000 maximum)

Save Quit Previous Next

1. The second half of the **Review** screen displays the following sections:
 - **Data File Descriptions** for New and Re-Use data files (select green plus icon to see details)
 - **Proxy** (will only display if you have assigned a Proxy)
 - **Documents**
2. Enter required **Comments**.
3. Select the **Next** button.

Note: If the files you would like to re-use are not in the re-use data files listed below, add them as new files. Please list the file names in the comment section along with the DUA number(s) from which the files would be re-used.

DUA Requester – Submit New DUA

Accept Terms and Conditions and Submit the DUA

New / Re-Use DUA Request



DUA Number : LDSS-2019-54177

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.

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 New DUA

Accept Terms and 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://nvlpubs.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/InformationSecurityDownloads/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.

6. 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.
7. 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.
8. 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.
9. 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.
10. You agree that the Attachments uploaded electronically to the DUA Request are incorporated into this Agreement.

11. 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 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.

12. 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(j)(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.
13. 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 New DUA

DUA Submission Confirmation

New / Re-Use DUA Request Print DUA

Main Information

DUA REQUEST STATUS

Your DUA request LDSS-2019-54177 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 Number : LDSS-2019-54177

DUA REQUEST STATUS

Your DUA request LDSS-2019-54177 has been submitted for approval. You will

DUA Life Cycle

MAIN INFORMATION

DUA Number : LDSS-2019-54177
DUA Customer Type : Limited Data Set
DUA Request Type : CREATE DUA
DUA Status : Submitted
Requested Date : 05-07-2019
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

COLLABORATING ORGANIZATION(S)
NORTH CAROLINA STATE UNIVERSITY

CUSTODIAN/DESY USERS

User Name	EDU User Id	Organization
Demo UserOne		Demonstration Organization 1

Showing 1 to 1 of 1 entries

DATA FILE DESCRIPTIONS

Date File Description		From Year	To Year	
SAF-SC - LDS - SAF 5% - CARRIER	NEW	2016	2020	🟢
SAF-SD - LDS - SAF 5% - DURABLE MEDICAL EQUIPMENT	NEW	2016	2020	🟢
SAF-SD - LDS - SAF 5% - DURABLE MEDICAL EQUIPMENT	RE-USE	2011	2015	🟢
SAF-SC - LDS - SAF 5% - CARRIER	RE-USE	2011	2015	🟢

Showing 1 to 4 of 4 entries

PROXY

First Name	Last Name	Organization Name	Email Address	Phone Number
Demo	UserTwo	Demonstration Organization 1	test@eppe.com	4155551212

DOCUMENTS

S.No	Document	Uploaded Files	Date and Time	Action
1	LDS WORKSHEET	LDS_Worksheet_Sample.xlsx	May 07, 2019 02:20:58 PM	Download

Additional Supporting Documents

S.No	Document	Description	Date and Time	Action
1	Upload_Test_File.txt	Test file for training demonstration	May 07, 2019 02:21:25 PM	Download

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:

- 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 New DUA

Displaying the DUA Life Cycle

New / Re-Use DUA Request Print DUA



DUA Number : LDSS-2019-54177

DUA REQUEST STATUS

Your DUA request LDSS-2019-54177 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-2019-54177
DUA Customer Type :	Limited Data Set
DUA Request Type :	CREATE DUA
DUA Status :	Submitted
Requested Date :	05-07-2019
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: The **DUA Life Cycle** displays actions on a DUA throughout the course of its life e.g. change in status.

DUA Requester – Submit New DUA

Status Progressions and Actions Display

New / Re-Use DUA Request Print DUA

Main Information Data Selection Upload Documents Review & Submit

DUA Number : LDSS-2019-54177

DUA REQUEST STATUS

Your DUA request LDSS-2019-54177 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 v	DUA Action ^	Action User ^	Comments ^	Special Instructions ^
Submitted-Waiting for Limited Data Set DUA Management Team Approval	May 7, 2019 2:31:44 PM	CREATE DUA	Demo UserOne	Submitting this new DUA for reasons x, y, and z.	
In Progress	May 7, 2019 2:23:16 PM	CREATE DUA	Demo UserOne		
In Progress	May 7, 2019 1:22:41 PM	CREATE DUA	Demo UserOne		
In Progress	May 7, 2019 12:56:46 PM	CREATE DUA	Demo UserOne		
In Progress	May 7, 2019 12:54:51 PM	CREATE DUA	Demo UserOne		

Showing 1 to 5 of 6 entries Previous 1 2 Next

MAIN INFORMATION

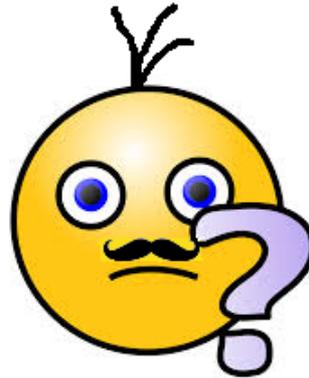
DUA Number : LDSS-2019-54177
DUA Customer Type : Limited Data Set
DUA Request Type : CREATE DUA
DUA Status : Submitted
Requested Date : 05-07-2019

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**.

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.