iQIES Frequently Asked Questions
Home Health Agencies (HHAs), Inpatient Rehabilitation Facilities (IRFs), Long Term Care Hospitals (LTCHs)

#	Question	Answer
1	Where can I find training resources for iQIES?	Training videos are available on the iQIES YouTube channel at iQIES Training YouTube channel. Users can access training resources on the iQIES Help page by clicking the 'Help' link located in the blue banner at the bottom of the iQIES webpages or by clicking on the circle icon containing your initials in the upper right corner of the iQIES webpage and select 'Help' from the drop down menu. Help topics include how to upload patient assessments, run reports, and user management.
2	If I use the iQIES user tool to create my patient assessment, do I need to export the assessment to generate the XML file to upload to iQIES?	Providers can use iQIES to create their assessment records for submission to iQIES. This functionality replaces the need to download jHAVEN (HHAs), jIRVEN (IRFs) or LASER (LTCHs). Users will enter their assessment data directly into iQIES and receive validation of responses in real time prior to submitting to CMS. After all sections of the assessment instrument (OASIS, IRF-PAI, or LCDS) have been completed, users can select 'submit' to transmit the assessment data directly to CMS. The additional step to export the assessment data in the XML file into the zip file for upload to iQIES is no longer required. Providers who choose to use other vendor software to encode the assessment responses will continue to submit a zip file that contains XML records containing assessment data.
3	Is the patient's Medicare Beneficiary ID (MBI) required if I am submitting a correction to an assessment previously accepted that contained a Health Identification Claim Number (HICN)?	Effective January 1, 2020, only the MBI is allowed to be submitted for the patient Medicare number. Providers are no longer able to submit a Health Insurance Claim Number (HICN) or Railroad Retirement Board (RRB) number in their assessment records, nor on the Medicare claim. This applies to all new and corrected records, including corrections made to records accepted into iQIES prior to January 1, 2020. Additional information about the MBI can be found on the following webpage: https://www.cms.gov/Medicare/New-Medicare-Card.
4	How do I know if my XML file was accepted by iQIES?	Users can review the Submission History on the Upload Assessments screen in iQIES. The current status of the zip file upload will display in the column labelled "File Upload Status". • **Processing** will display after the zip file is uploaded and the records within the zip file are in the process of validation by iQIES. • **Completed** indicates the assessment records in the zip file were processed and technical validations of the assessment record(s) has occurred. Users should refer to the column "Rejected Assessments" to review the number of assessment record(s) in the zip file that were rejected, if any.

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		• **Failed** will display in the "File Upload Status' column if the uploaded zip file (1) fails the virus scan, (2) is encrypted, (3) fails to unzip, or (4) does not contain any files. Please note: The Facility/Provider/Agency Final Validation Report (FVR) will display the submission file status as 'Accepted' and the number of accepted, rejected, and duplicate records in the summary information provided in the header of the report. Users should review the details of the FVR following the summary to determine which assessments require resubmission and/or correction.
5	How do I enter ICD-10 code when my ICD-10 only requires 6 characters?	According to data submission technical specifications, the ICD-10 item(s), if active, must be submitted as 8 characters to be accepted in the database. If the user provides less than 8 characters, iQIES will pad the ICD-10 code with a caret [^] in the missing character spaces during processing. Users should confirm that the assumptions made by iQIES to pad the missing characters with [^] are accurate. Failure to submit complete ICD-10 code(s) could have an impact on your payment or quality measure calculations. The following represents the technical specification requirements for reporting ICD-10 codes: a) Character 1 must be alphabetic. b) Character 2 must be numeric [0-9]. c) Character 3 must be numeric [0-9] or alphabetic [A-Z, a-z]. d) Character 4 must be a decimal point. e) Characters 5 through 8 must be numeric [0-9], alphabetic [A-Z, a-z], or caret [^]. f) If any character 5 through 8 is equal to [^], all subsequent characters must equal [^].
6	How do I correct an assessment previously accepted in iQIES?	With the migration to iQIES, CMS has tightened the automated correction policy requirements. The automated correction policy refers to submission of modification and inactivation records when the current record in the iQIES database is erroneous. The following two processes have been established to correct records that have been accepted into iQIES: • A **Modification** record should be used when a record has been accepted into iQIES, but the information in the record contains clinical errors or errors to non-key fields. • An **Inactivation** record should be used when a record has been accepted into iQIES but the corresponding event did not occur or information in ANY of the key fields are erroneous. Users are not allowed to change data in key fields using a modification record as data in these fields are used to locate the record to be modified or inactivated in iQIES. If data in the key fields in the current

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		record are inaccurate, the current record must be inactivated and a new replacement record should be submitted.
		Key fields for the OASIS, IRF-PAI, and LTCH CARE Data Set (LCDS) records are listed below:

- **OASIS key fields**:
  - ➢ State Code
  - ➢ Agency ID
  - ➢ M0040 Last Name
  - ➢ M0040 First Name
  - ➢ M0064 Social Security Number
  - ➢ M0066 Birth Date
  - ➢ M0069 Gender Code
  - ➢ M0100 Reason for Assessment Code
  - ➢ Effective Date of record
    - ○ M0030 Start of Care date when M0100 = 01
    - ○ M0032 Resumption of Care Date when M0100 = 03
    - ○ M0090 Information Completion Date when M0100 = 04 or 05
    - ○ M0906 Discharge/Transfer/Death date when M0100 = 06, 07, 08, or 09

NOTE: Failure to submit the same data in the key fields of the modification or inactivation record that match the current record in iQIES will result in rejection of the modification or inactivation record with Fatal error -3190:

-3190 No Match Found: This modification/inactivation record does not match a previously accepted record in the iQIES. One or more of the items of this record did not match the corresponding items of an existing record in the database.

- **IRF-PAI key fields**:
  - ➢ State Code
  - ➢ Facility ID
  - ➢ 4 Patient First Name
  - ➢ 5A Patient Last Name
  - ➢ 6 Birth Date

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		7 Social Security Number 8 Gender Code 40 Discharge Date NOTE: Failure to submit the same data in the key fields of the modification or inactivation record that match the current record in iQIES will result in rejection of the modification or inactivation record with Fatal error -906: -906 No Match Found: No existing record was found in the iQIES database for the submitted modification/inactivation record. • **LCDS key fields**: - State Code - Facility ID - A0500A First Name - A0500C First Name - A0600A Social Security Number - A0800 Gender - A0900 Birth Date - A0250 Reason for Assessment - A0220 Admission Date when A0250 = 01 - A0270 Discharge Date when A0250 = 10, 11, or 12 NOTE: Failure to submit the same data in the key fields of the modification or inactivation record that match the current record in iQIES will result in rejection of the modification or inactivation record with Fatal error -3745: -3745: No Match Found: This modification/inactivation record does not match a previously accepted record in the iQIES. One or more of the items submitted for this record did not match the corresponding items of an existing record in the database. <u>How to Modify an Assessment in iQIES:</u> If an assessment contains inaccurate information, it is possible to modify some information.

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		1. Navigate to the patient's profile page and select **Actions**, then **View Assessment** for the assessment that needs to be modified or open the web view of the assessment. 2. Select **Modify.** 3. Update the desired, non-key field information. How to Inactivate an Assessment in iQIES: Assessments with errors that cannot be corrected with a modification record can only be changed by inactivating and resubmitting the assessment. 1. Navigate to the patient's profile page and select **Actions**, then **View Assessment** for the assessment that needs to be modified or open the web view of the assessment. 2. Select **Inactivate.**
7	How do I request the Provider Preview Report?	Users cannot search or request these reports from the 'Find a Report Type' menu. The Provider Preview Report is auto-generated and placed in the provider's Provider Preview Reports folder specific to the provider type in 'My Reports'. The availability of these reports is announced via our iQIES listserv and posted on the Quality Reporting Program (QRP) webpages. The 'My Reports' folder is also used to distribute initial notices of non-compliance to providers who are determined to be non-compliant with the reporting requirements of the QRPs.
8	Why am I receiving "no results found' when searching for a provider report?	Users are experiencing the following message when searching for reports in the 'Find a Report Type' screen: "*No results found. Please refine your search and try again*." This message will display when the report category and report type do not align. If you encounter this error, reset your search to filter using the drop down menu in 'Report Type' only. Do not select a Report Category. You can also view a complete list of reports available by simply selecting 'Find a Report Type' without entering a Keyword or selecting a Report Category or Report Type.
9	Why is the **View Reports** link under Submission History on the Upload Assessments screen not available even after I see the file upload status of my submission as 'Completed'?	It may take up to 30 minutes after the file upload status of your submission shows as "Completed" for the View Reports link to become available. Please check back after that time to review your Final Validation Report.

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10	How do I register for the iQIES listserv to be sure I receive important updates?	In order to receive up-to-date communications on iQIES, please subscribe to the new CMS iQIES listserv. If you were previously on the QIES Technical Support Office (QTSO) distribution list, you will automatically be added to the distribution list for the new CMS iQIES listserv. Moving forward, users will no longer receive communications via the QTSO listserv. To subscribe to the new CMS iQIES listserv, please visit the website and follow the instructions: https://public.govdelivery.com/accounts/USCMSMYMEDICARE/subscriber/new. On the Featured Government Updates page, locate the Centers for Medicare and Medicaid Services (CMS) section and select "View all topics for Centers for Medicare & Medicaid Services (CMS)." Click to expand the Outreach and Education section, select the checkbox next to "CMS iQIES," and scroll down to the bottom of the page to submit. Subscribers will receive a confirmation email upon successful completion of subscription to CMS iQIES.
11	Can I request the OASIS Quality Improvement Tally and Patient Listing reports for more than one agency at a time?	The Potentially Avoidable Event Patient Listing, Tally: Agency Patient-Related Characteristics (Case Mix), HHA Tally: Process, and HHA Tally: Outcome Report reports must be requested for one HHA at a time. Additionally, the report requests cannot be run real-time and users will be required to schedule the report. Users will be allowed to select the time of their choosing that they would like to retrieve or access the completed report in iQIES, with the minimum retrieval time being two hours following the report request time. Once the scheduled report has been generated, the report will be available for viewing in the HTML, PDF, or CSV outputs.
12	I found the graphs on the OASIS Quality Improvement agency-level reports very helpful in the past. Will graphs be added to the iQIES reports?	The CASPER version of the Outcome, Process Measures, and Potentially Avoidable Event agency-level reports displayed the HHA Observed, HHA Adjusted Prior, HHA HHC Risk Adjusted, HHA Prior Observed, and National Observed values as percentages and those percentages were visually shown in bar graphs as well. The bar graph display was not part of the initial release of these reports in iQIES and will be added in a future release.

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13	iQIES Links and Resources	- Link to iQIES to upload, manage assessments, or access reports: https://iqies.cms.gov - iQIES Helpdesk: iqies@cms.hhs.gov - iQIES Onboarding Guide for information regarding user roles: https://qtso.cms.gov/system/files/qtso/iQIESOnboardingGuide-WebVersion_0.pdf - iQIES YouTube Training Channel: https://www.youtube.com/playlist?list=PLaV7m2-zFKpj2t7Qhn7ONiM0Zb_A1MTIq - QIES Technical Support Office (QTSO) Resources: https://qtso.cms.gov/ - iQIES Known Issues Log: https://iqies.ventera.com/