Centers for Medicare & Medicaid Services

Internet Quality Improvement & Evaluation System (iQIES)

Survey and Certification (S&C) Manage an Intake User Manual

Version 1.2

November 27, 2023

Table of Contents

List of Figures

List of Tables

1. Introduction

This user manual addresses how to view and add a new intake, including involved parties, allegations, and responsible staff. Review the workflow in the next step to understand how the intake process works.

For information on other modules, refer to [Reference & Manuals] on QTSO.

1.1 Getting Started in S&C – Important Information to Know

Below is important general information about iQIES.

- Log in to iQIES at https://iqies.cms.gov/ with HARP (Health Care Quality Information Systems (HCQIS) Access Roles and Profile) login credentials. Refer to iQIES Onboarding Guide for further information, if necessary.
- All screenshots included in this manual contain only test data. Current screens in iQIES may be different from what is shown in screenshots below.
- Screenshots are dependent on user role and may not be an exact representation.
- Words highlighted in blue are clickable links.
- A red asterisk (*) indicates a required field.
- Blank fields may have a limited number of characters allowed in that field. If so, the character limit is shown on the bottom left. The blank fields may also be expanded. Click the two 45° parallel lines and drag to the right to enlarge the box. See *Figure 1, Expandable Field*.

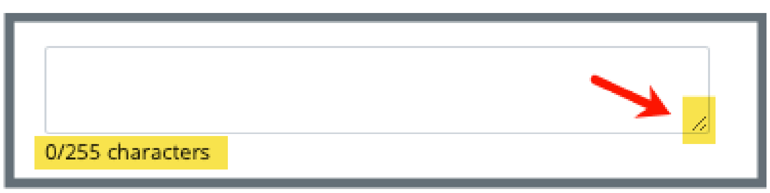

Figure 1: Expandable Field

- iQIES times out after 15 minutes of nonuse and reverts to the login page. Be sure to save data regularly. iQIES remains up and active as long as it is in use.
- iQIES uses a smart search. Once three letters/digits are typed in the search bar, results are shown based on letters/digits entered. The more

letters/digits entered, the narrower the search. If any of the results is the correct result, click the result to open.

- Review any yellow/orange notification banners. See *Figure 2, Notification Banner*. These banners can be closed (X'd out) if they do not apply or they are resolved.

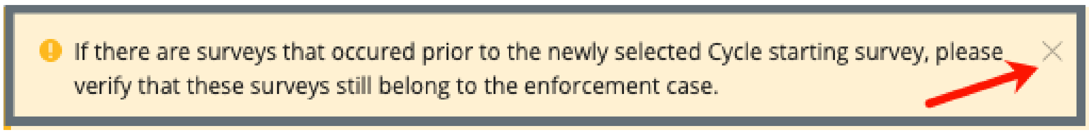

Figure 2: Notification Banner

- Review any Tool Tips for additional information to perform an action. Hover over the **i** icon to see the tip. Tool Tips are in iQIES to communicate information. Look for the information icon. See *Figure 3, Tool Tip Icon.*

Figure 3: Tool Tip Icon

- Below are the supported browsers for access to iQIES. **Do not use Internet Explorer.** It is not supported. Be sure to keep your browser updated.

  For best results, please use the latest version of these browsers:
  Chrome
  Firefox

  The latest versions of the browsers below are also supported:
  Microsoft Edge
  Safari

1.2 iQIES Service Center

The iQIES Service Center supports users working within the various iQIES components: S&C, Patient Assessment, and Reporting.

Assistance Accessing iQIES:	Contact the iQIES Security Official (SO) for your organization
Technical Support:	Contact the iQIES Service Center: **Phone**: 888-477-7876 (select Option 1) **Email**: iQIES@cms.hhs.gov
CCSQ Support Central:	Create a new ticket or track an existing ticket: https://cmsqualitysupport.servicenowservices.com/ccsq_support_central
Idea Portal:	Feedback for future iQIES software development: CCSQ Support Central. Click **Idea Portals**.
More information on iQIES:	Refer to the QIES Technical Support Office (QTSO) and the Quality, Safety, & Education Portal (QSEP). Logging in to HARP may be required before accessing some documentation in QTSO and QSEP. iQIES reference materials include: • Links to Training Videos for providers • Assessment Management User Manual • Quick Reference Guides • Onboarding Guide • Managing User Information • Other helpful iQIES material iQIES training materials on QSEP include S&C Foundation Series Videos.

1.3 Roles and Permissions

iQIES roles allow users to access information pertinent to their area of work. The examples provided in this document pertain to S&C and require a State Agency or Centers for Medicare & Medicaid Services (CMS) role with the capability to view or edit this information.

Permissions are ultimately governed by HARP access privileges. Contact the SO for your organization or the iQIES Service Center for issues relating to access and permissions. Refer to the iQIES User Roles Matrix for detailed information on roles.

For additional help, refer to https://iqies.cms.gov/iqies/help or click the help icon in the top right corner of the screen, see *Figure 4, Help Icon*, for further information.

Figure 4: Help Icon

1.4 Workload Management

Workload Management is a tool used to track and display data for individual users. It consolidates information and processes into one area so that the user can see at a glance what actions must be performed.

Note: Workload Management is limited to the State Agency General User and CMS General User roles.

1.4.1 Log in to iQIES. The landing page displays the Workload Management tool. See *Figure 5, Workload Management Landing Page.*

Note: The Workload Management landing page defaults to active tasks. Click the **List View** drop-down and select **Closed tasks** to view completed tasks.

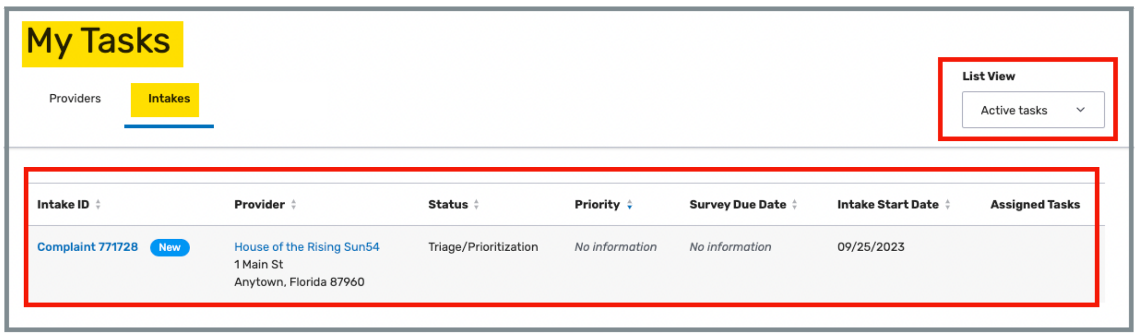

Figure 5: Workload Management Landing Page

Note: Click the iQIES logo on the top left of any screen or **Home** to return to the Workload Management landing page at any time. See *Figure 6, iQIES Logo*.

Figure 6: iQIES Logo

1.4.2 Review tasks. Click each tab (**Providers**, **Intakes**) to review tasks. See *Table 1: Workload Management Data Display* for details on when data is displayed.

Table 1: Workload Management Data Display

Tab	Data Displayed When User Is:
Providers	• Responsible Staff for a provider or • Survey team member for a survey for a provider
Intakes	Responsible Staff for an intake

Notes:

- A blue **New** in an oval shape (pill) under the **ID** indicates that the survey's status is **New**. See *Figure 7, New Notification.*

Figure 7: New Notification

- If there are no tasks, then a message appears below the selected tab. See *Figure 8, No Active Tasks*, for an example from the **Intakes** tab.

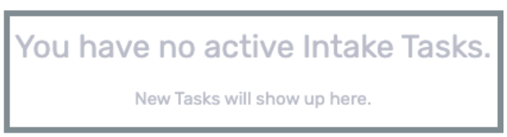

Figure 8: No Active Tasks

2. Manage an Intake Overview

This manual explains how to manage intakes, from adding or searching for an intake, to intake statuses, adding Responsible Staff, parties involved, allegations, triage, adding a survey, linking an intake, changing a provider, and the investigation narrative.

The intake workflow, see *Figure 9, Intake Workflow,* shows how the intake process works from start to finish. The intake status in iQIES is shown on the left for each step of the process. Review step 3, Intake Statuses, for details on each status.

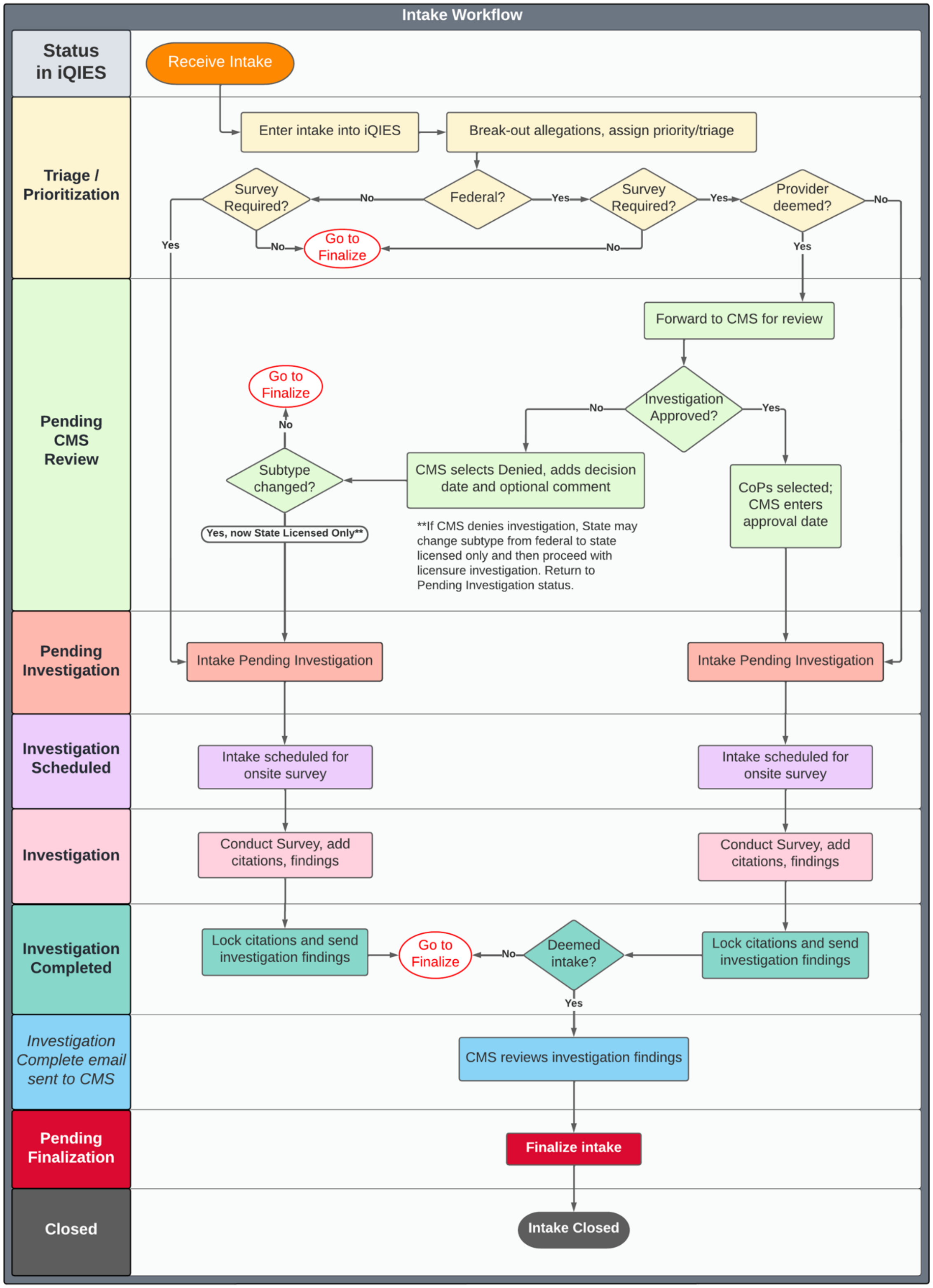

Figure 9: Intake Workflow

3. Intake Statuses

There are nine statuses for intakes. Each status shows where the intake process is in the workflow. Review the status on the gray bar. See *Figure 10, Intake Status.*

No Investigation	*No investigation reason is available and triage is disabled and set to complete.*
Triage/Prioritization	*Intake is entered and no priority assigned*
Pending CMS Review	*Deemed intakes that require a survey and pending approval by CMS to conduct an onsite investigation*
Pending Investigation	*Triaged intakes that require a survey, but no survey is linked*
Investigation Scheduled	*Intake is linked to a survey record where survey status is **New***
Investigation	*Linked survey that has at least 1 citation added*
Pending Finalization	*State finalization step. Contains intakes where no survey is required, or intakes where a survey was conducted and the Statement of Deficiencies **Date Sent** has been updated.*
Investigation Completed	*Citations in linked survey are locked*
Closed	*Enter date SAGU completed all activities related to the intake*

Figure 10: Intake Status

4. Search for an Intake

4.1 Go to **Survey & Certification** at the top of the iQIES home page. Click the arrow to open the drop-down menu.

4.2 Click **Search**. The **Search** screen opens.

4.3 Click the **Intakes** tab on the **Search** page. See *Figure 11, Intakes Search Page*.

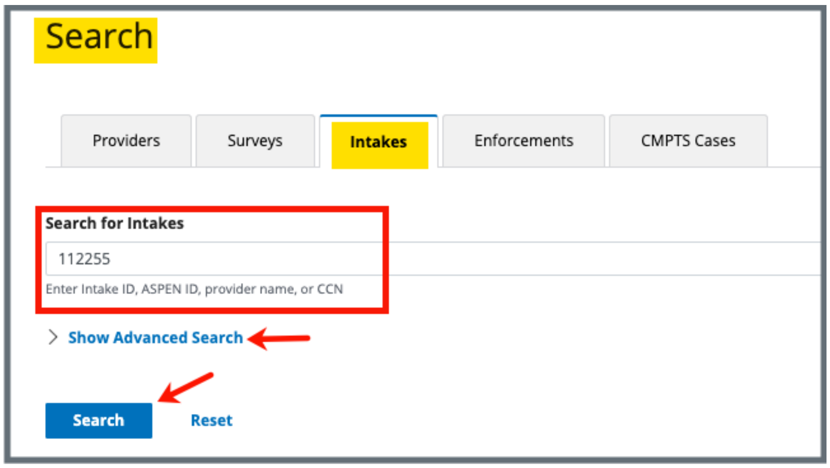

Figure 11: Intakes Search Page

Note: Click **Show Advanced Search** for a more detailed search. Refer to step 4.7, Advanced Search, for details.

4.4 Type **Intake ID**, **ASPEN ID**, **provider name**, or **CCN** under **Search for Intakes**.

Notes:

- ASPEN is the legacy system.
- Intakes created in iQIES do not have an ASPEN ID. See *Figure 12, Intake Created in ASPEN.*

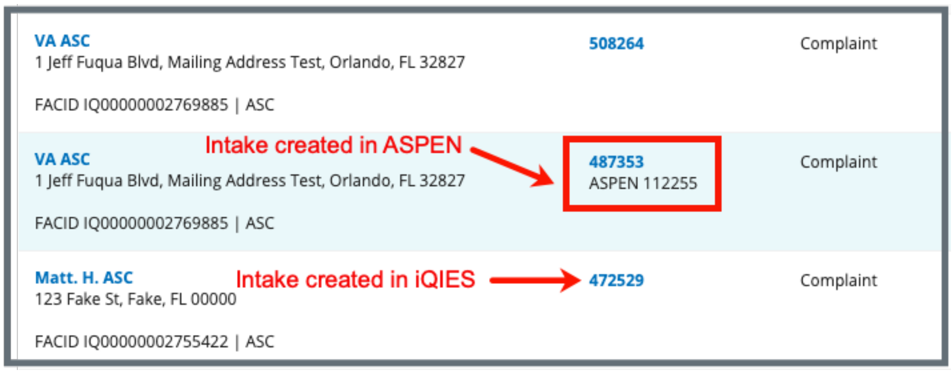

Figure 12: Intake Created in ASPEN

- There are existing intakes with ASPEN IDs that were created in ASPEN and are still in use
- **Basic Information** about the intake only shows an ASPEN ID if there is one available. See *Figure 13, Basic Information ASPEN ID.*

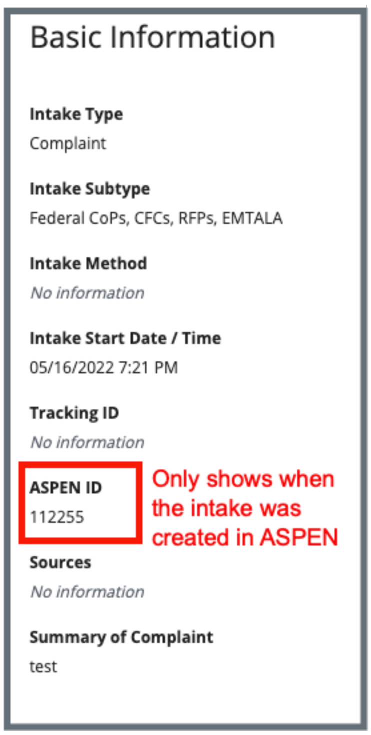

Figure 13: Basic Information ASPEN ID

4.5 Click **Search**. The provider and intake information show below.

4.6 Click the intake ID to open the intake. The **Complaint Basic Information** window opens.

4.7 Click **Show Advanced Search** to open the **Advanced Search** drop-down menu and narrow the search criteria. See *Figure 14, Intakes Advanced Search*.

Note: Click **Hide Advanced Search** to close the **Advanced Search** menu.

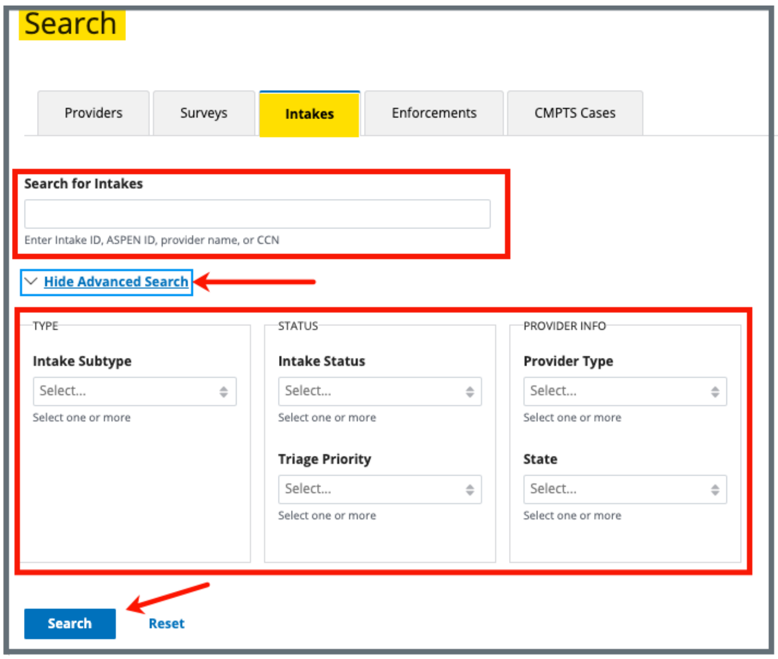

Figure 14: Intakes Advanced Search

5. Add an Intake

5.1 Click the desired provider record. The **Provider History** page opens. For more information on searching for and accessing a provider, refer to the [Manage a Provider User Manual] on QTSO.

Note: It is also possible to click the provider from the **Basic Information** page to open **Provider History**.

5.2 Click **Add Intake** on the **Provider History** page. See *Figure 15, Recent Intakes.* The **Basic Information** window opens.

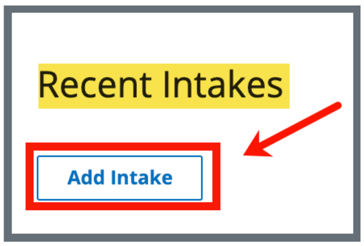

Figure 15: Add Intake

5.3 Click **Complaint** or **Incident.** See *Figure 16, Save Section*. A menu opens for either a complaint or an incident.

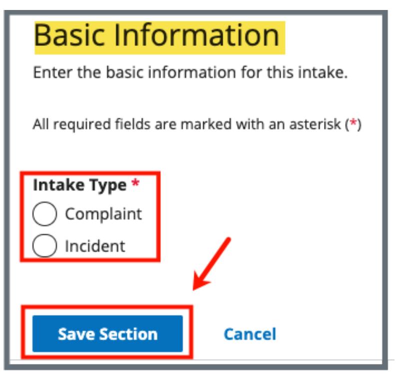

Figure 16: Save Section

5.4 Fill out the information.

5.5 Click **Save Section**.

6. Basic Information

Purpose: The **Basic Information** page gives basic information about the intake, including type, subtype, method, start date, tracking ID, sources, and summary.

6.1 Click **Edit** to edit the **Basic Information** details. The **Basic Information** fields are now editable. See *Figure 17, Intakes Basic Information*.

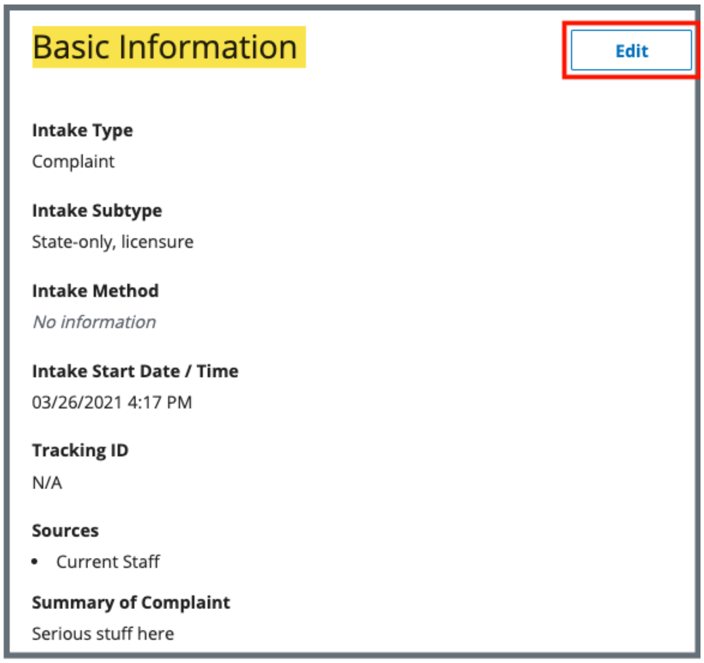

Figure 17: Intakes Basic Information

6.2 Click **Save Section**.

7. Responsible Staff

Purpose: Add new, delete, or view existing staff responsible for the complaint.

Notes: Responsible Staff are HARP ID users.

One SAGU and one CMSGU must be selected as Responsible Staff for deemed providers to complete triage when CMS approval is required.

Adding Responsible Staff ensures that the appropriate individuals receive email notifications throughout the complaint process (approval, reviewing investigation findings).

7.1 Click **Responsible Staff** on the left menu. The **Responsible Staff** screen opens. See *Figure 18, Intakes Responsible Staff*.

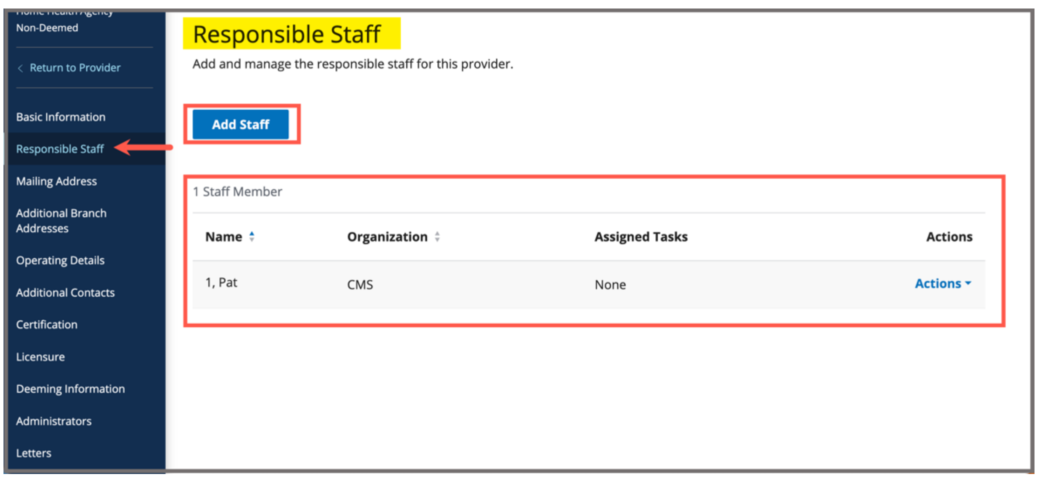

Figure 18: Intakes Responsible Staff

7.2 Click **Add Staff** to add responsible staff. The **Add Responsible Staff** page opens.

7.3 Type last name in text box under **Last Name**. Add first name to narrow down the results, if necessary.

7.4 Click **Search**. The search results appear below.

7.5 Check the box under **Select** next to the correct name. Click **Save**. A green notification box appears at the top of the screen, verifying the member was successfully added. See *Figure 19, Survey Team Member Successfully Added*.

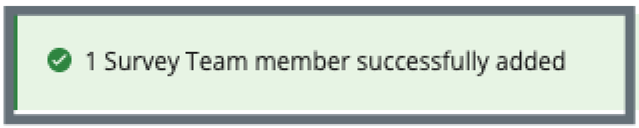

Figure 19: Survey Team Member Successfully Added

Notes:

- It is only possible to add staff that are in the list of staff members.
- It is not possible to select options that are greyed out.
- Only one staff can be primary.
- Click the arrow next to **Name** to sort names in alphabetical or reverse alphabetical order.

7.6 Verify the staff member was added.

7.7 Click **Delete** under **Actions** to delete a staff member. A confirmation pop-up window opens.

7.8 Click **Delete**. See *Figure 20, Delete a Responsible Staff*.

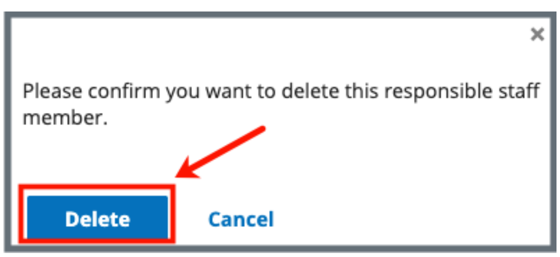

Figure 20: Delete a Responsible Staff

7.9 Verify that the Responsible Staff is no longer on the list.

8. Parties Involved

Purpose: Add new, manage, or view parties involved with the intake for the complaint.

Note: The **Complainant** and the **Person Affected** can be anonymous. Multiple anonymous people cannot be added.

8.1 Click **Parties Involved** on the left menu. The **Parties Involved** screen opens.

8.2 Click **Add Party**. The **Add Parties Involved** screen opens. See *Figure 21, Add Parties Involved.*

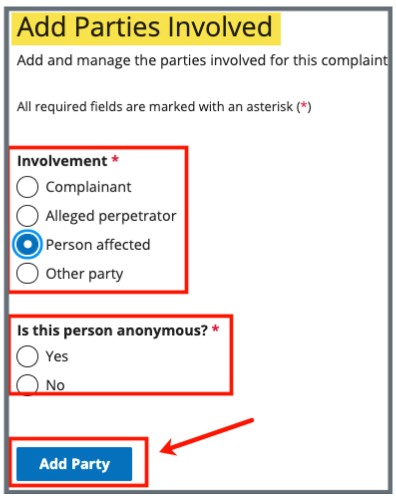

Figure 21: Add Parties Involved

8.3 Select **Involvement**.

8.4 Select **Yes** or **No** for Is this person anonymous?

Note: **Is this person anonymous?** only appears when either **Complainant** or **Person affected** is selected.

8.5 Click **Add Party**.

Notes:

- The **Add Parties Involved** window opens when the person is anonymous.
- The **Add Complainant** window opens when **Complainant** is selected and is not anonymous**.**

- The **Add Alleged Perpetrator** window opens when **Alleged perpetrator** is selected.
- The **Add Person Affected** window opens when **Person affected** is selected and is not anonymous.
- The **Add Other Party** window opens when **Other party** is selected.

8.6 Fill out the information.

8.7 Click **Save**.

8.8 Add additional parties, as necessary.

8.9 Verify all parties involved are included on the **Parties Involved** page.

8.10 Click **View**, **Edit**, or **Delete** under **Actions** to view, edit or delete an involved party. See *Figure 22, View, Edit, Delete*.

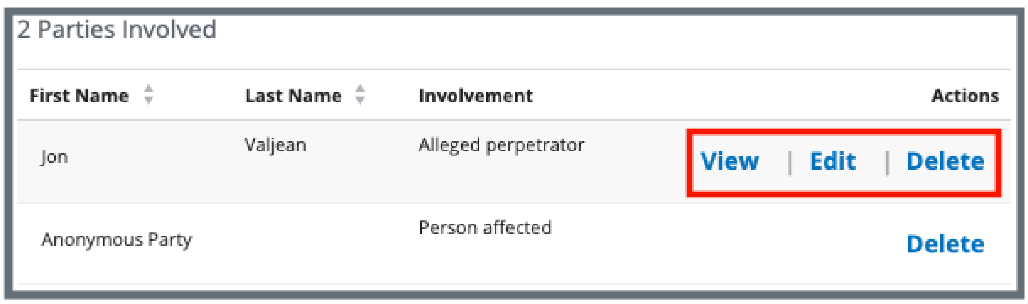

Figure 22: View, Edit, Delete

Notes:

- Anonymous parties can only be deleted. There is no information about them.
- A pop-up window asks to confirm a deletion.

9. Allegations

Purpose: To enter and track allegations. Each allegation must be entered separately.

9.1 Click **Allegations** on the left menu. The **Add Allegation** screen opens. See *Figure 23, Add Allegation*.

Note: When there are existing allegations, an **Add Allegation** button is shown above the existing allegations. Click **Add Allegation** to add a new allegation.

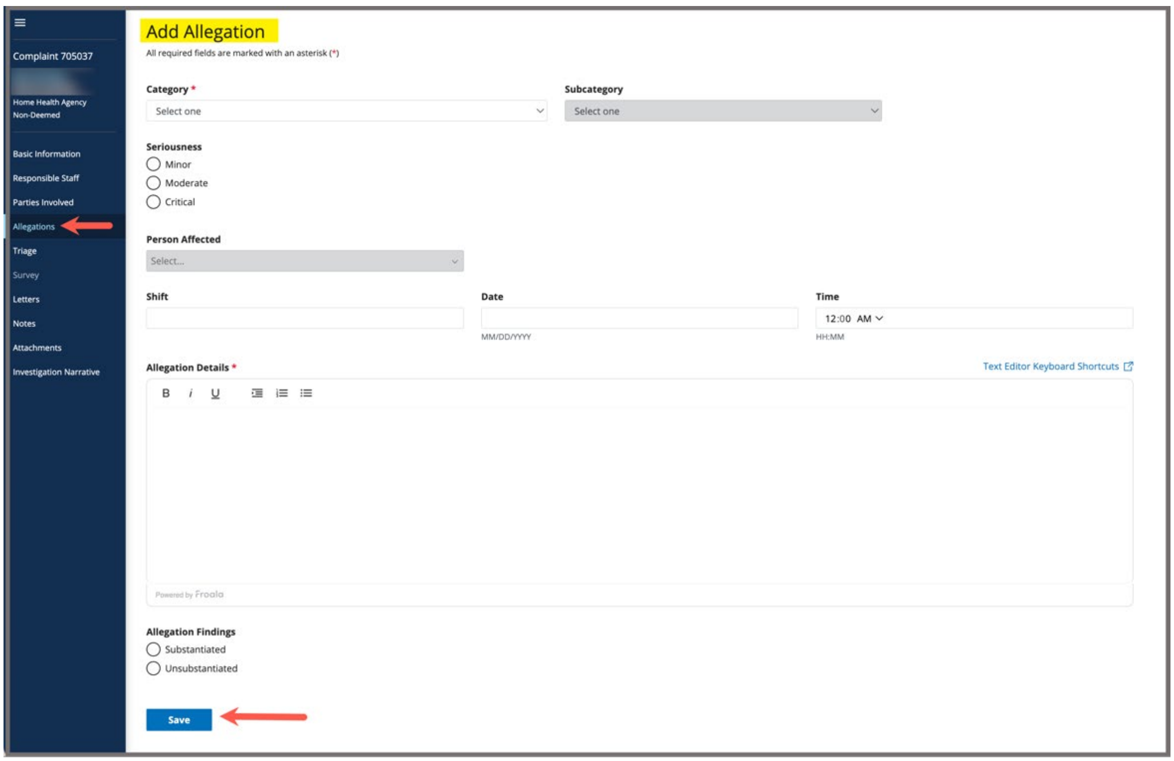

Figure 23: Add Allegation

9.2 Fill in the form with as much information possible.

9.3 Click **Save**. The screen populates with form information.

9.4 Click **Return to Allegations Overview** to add additional allegations, if necessary.

9.5 Click **View**, **Edit**, or **Delete** to view, edit, or delete an allegation.

Note: A pop-up window asks to confirm a deletion.

10. Triage

Purpose: To enter and view the triage prioritization.

10.1 Click **Triage** on the left menu. The **Triage** screen opens. See *Figure 24, Triage.*

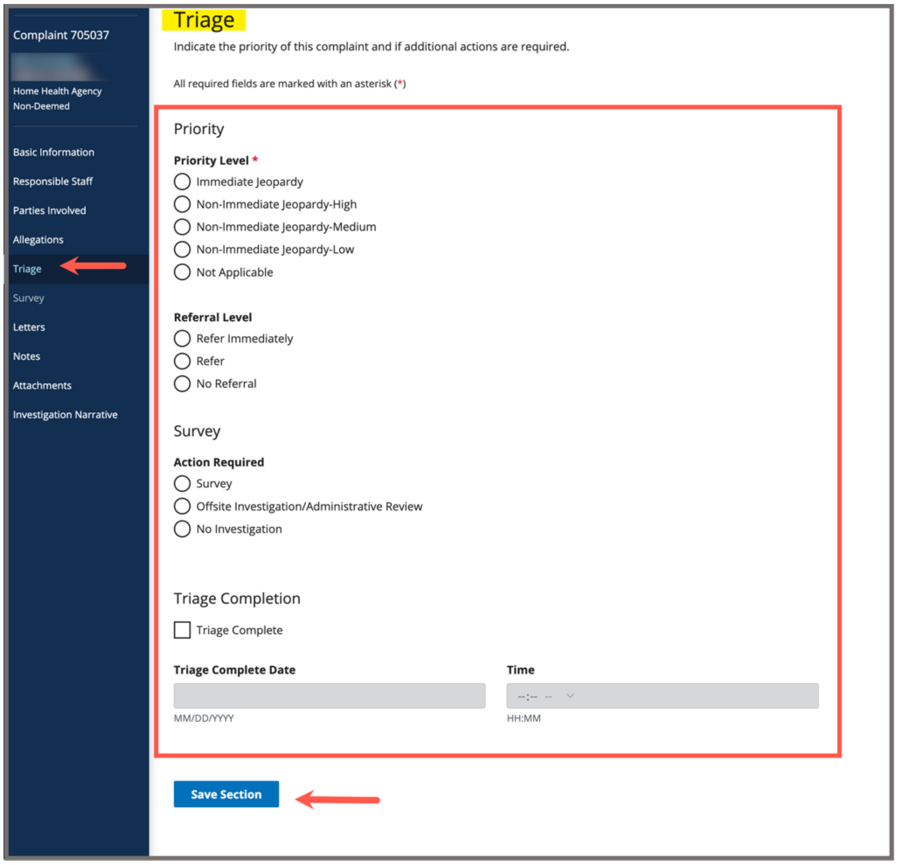

Figure 24: Triage

10.2 Fill in the form with as much information as possible.

Notes:

- A priority level is required.
- If a survey is required, check the **Enter calculated date** box to have the date calculated. Click **Accept Date** to accept the date. **Accept Date** populates the **Survey Due Date** box.
- The Triage **Complete Date / Time** autopopulates.

10.3 Click **Save Section**.

10.4 Click **Edit** to edit the Triage, if desired. The **Edit Triage** window opens. See *Figure 25, Edit Triage*.

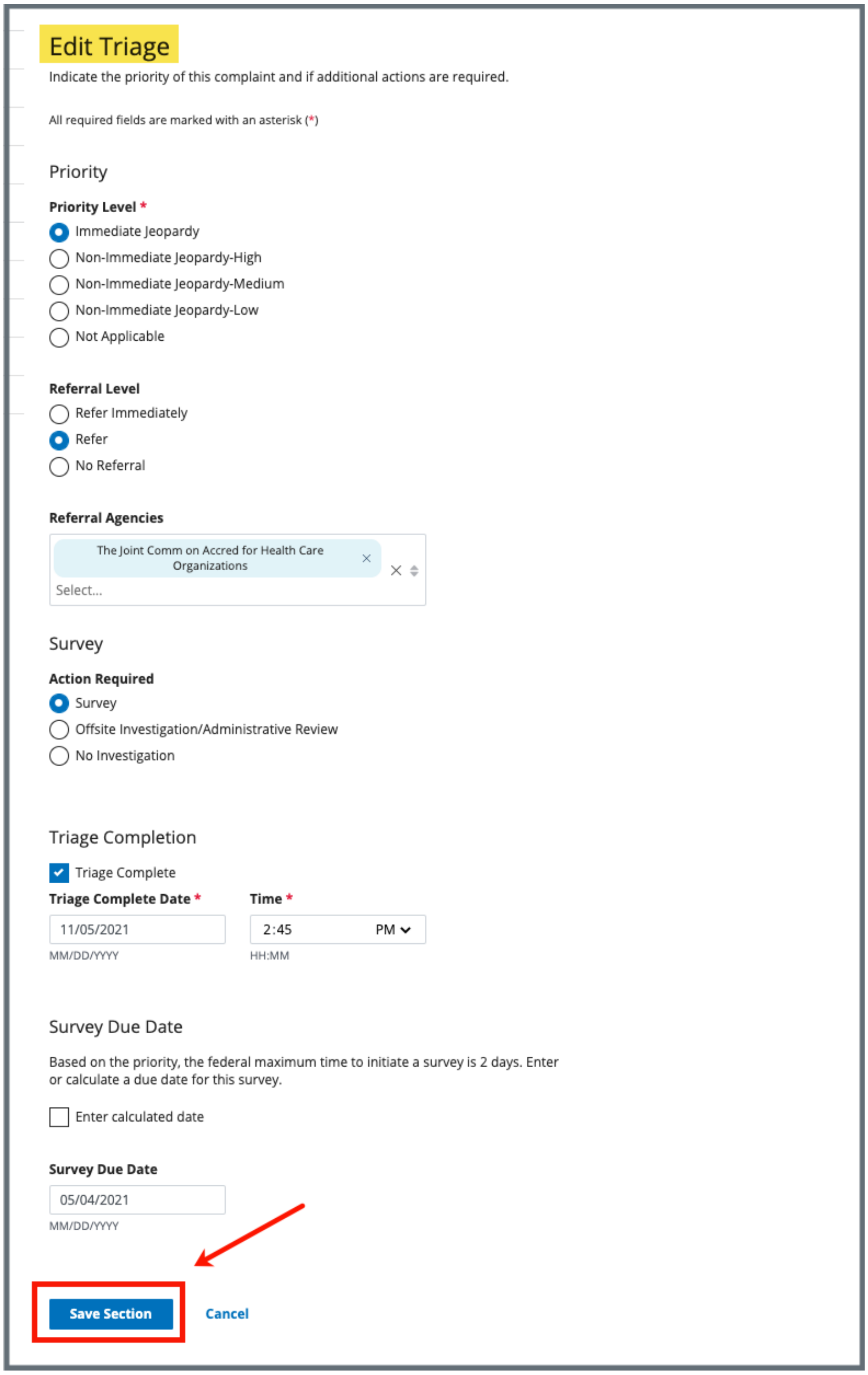

Figure 25: Edit Triage

10.5 Update the form.

Note: Check the **Triage Complete** box on the form to complete the triage. See *Figure 26, Triage Completion*.

Figure 26: Triage Completion

10.6 Click **Enter calculated date**. A form opens and shows calculation dates. See *Figure 27, Calculate Date*.

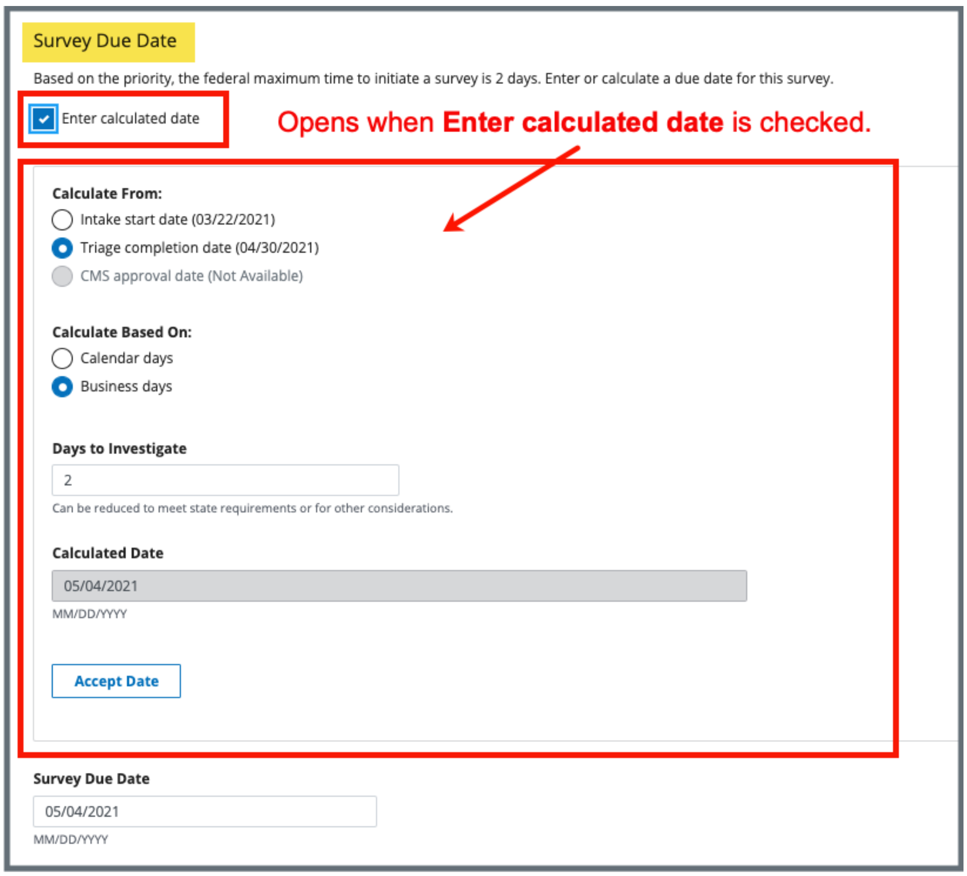

Figure 27: Calculate Date

Note: The **Intake Sent Date** (automatically generated) is the date the intake was sent to CMS, if CMS approval is required. The intake may be sent more than once. In that case, it is the latest date the intake was sent.

10.7 Click **Save Section**. The screen populates with updated form information.

11. Survey

Purpose: To create a survey if one is required for the intake.

Note: A triage category that requires a survey must be selected to enable the survey tab. Refer to S&C User Manual: Manage a Survey for further details.

11.1 Click **Survey** on the left menu. The **Survey** screen opens. See Figure 28, Survey.

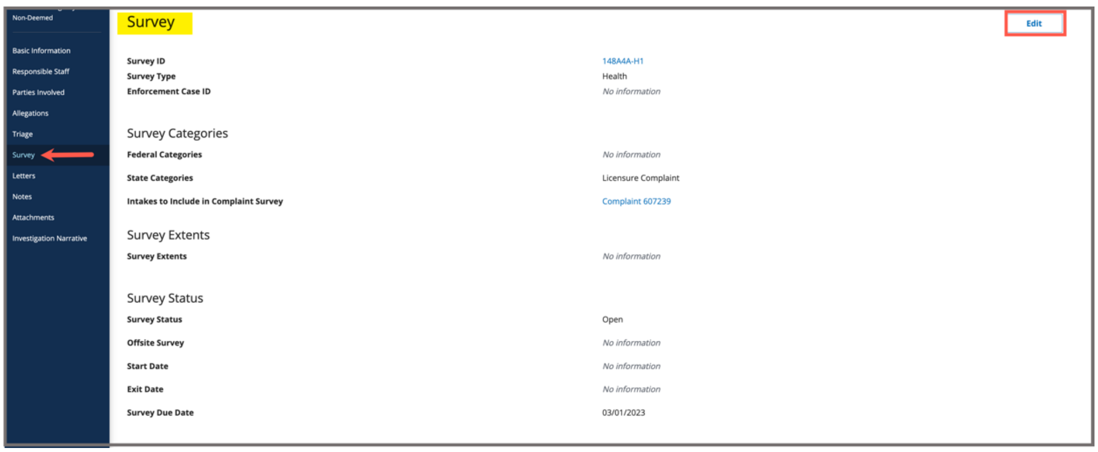

Figure 28: Survey

11.2 Click **Edit**. The **Basic Information** page opens. See *Figure 29, Survey Basic Information.*

11.3 Click **Edit** to edit the survey, if desired.

11.4 Click **Save Basic Information**. The **Basic Information** page updates.

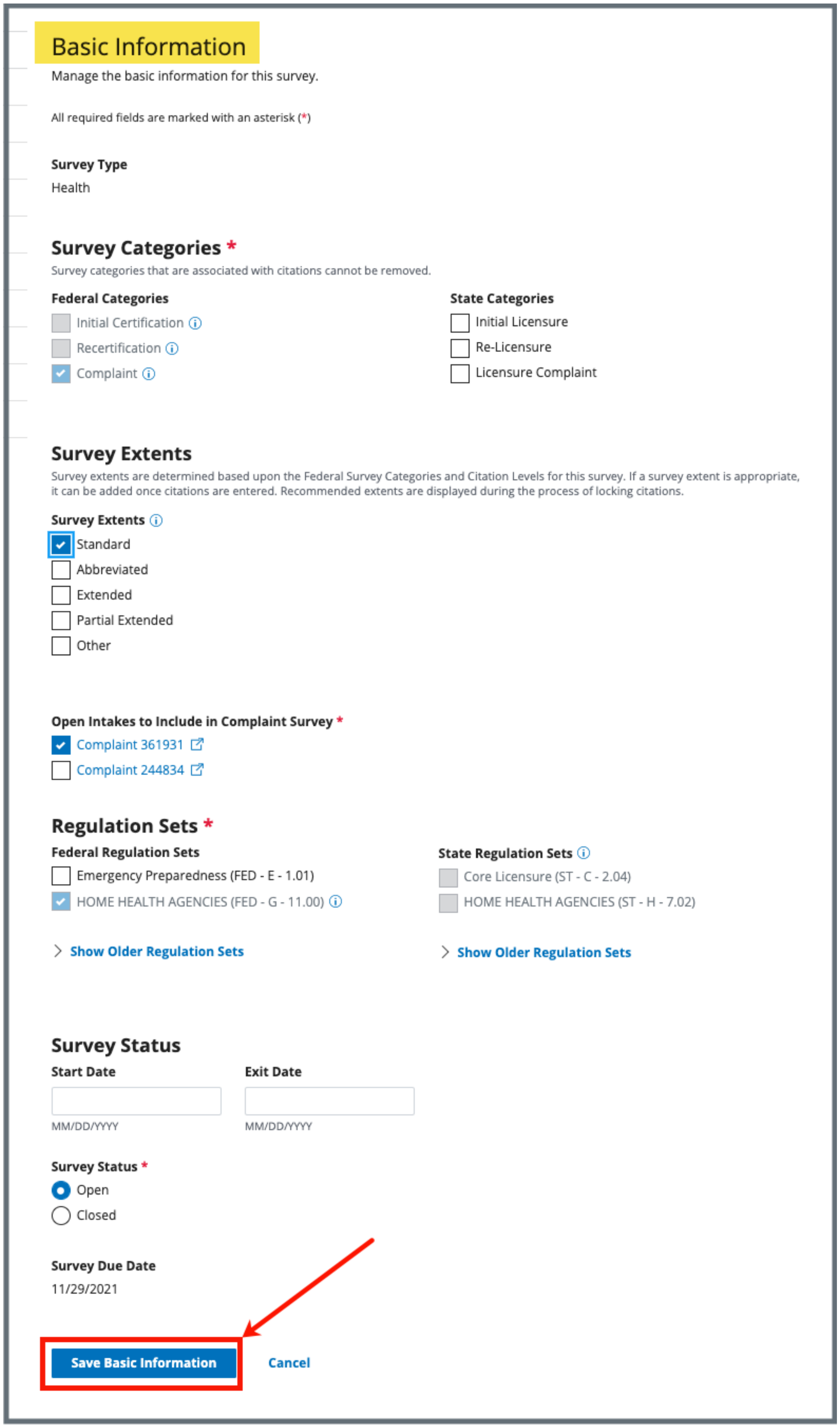

Figure 29: Survey Basic Information

12. Link an Intake

Purpose: To link an intake to a survey.

Notes:

- There must be an existing complaint intake to link an intake to a survey.
- There are two ways to link an intake to a survey, from the **Provider History** page or from the **Complaint** page.

12.1 Link an Intake to a Survey from the Provider History page

12.1.1 Click **Add Survey** on the **Provider History** page. The **Basic Information** page opens. See *Figure 30, Link an Intake Basic Information.*

12.1.2 Check the **Complaint** box in the **Survey Categories** section.

Note: An intake must be pending investigation to check Complaint.

12.1.3 Select the intake to include under **Open intakes** to include in **Complaint Survey**.

12.1.4 Click **Save Basic Information**. The complaint is now linked to the survey.

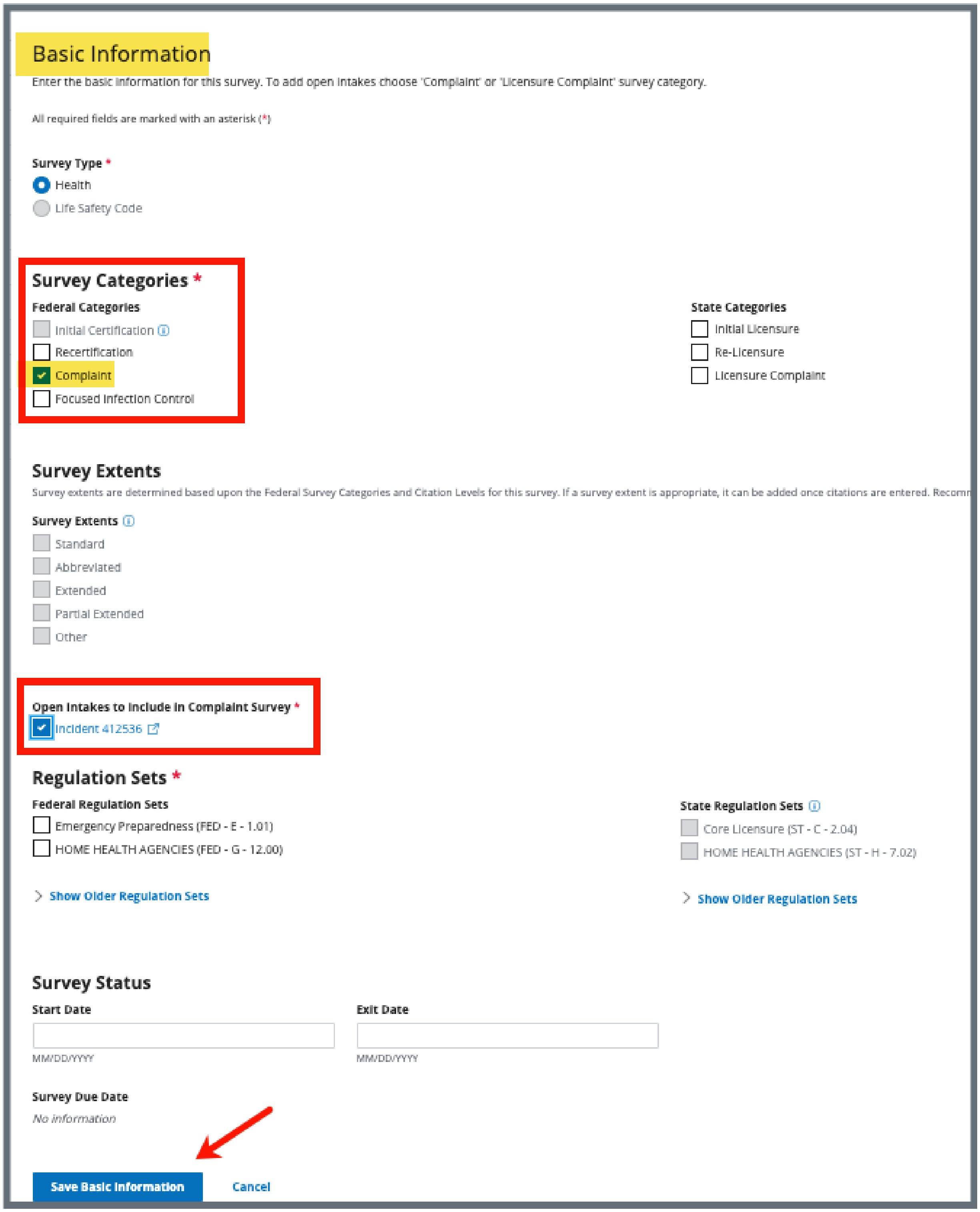

Figure 30: Link an Intake Basic Information

12.2 Link an Intake to a Survey from the Complaint page.

12.2.1 Select the **Intake ID** under **Recent Intakes** on the **Provider History** page. See *Figure 31, Intake ID Link*. The **Basic Information** page opens.

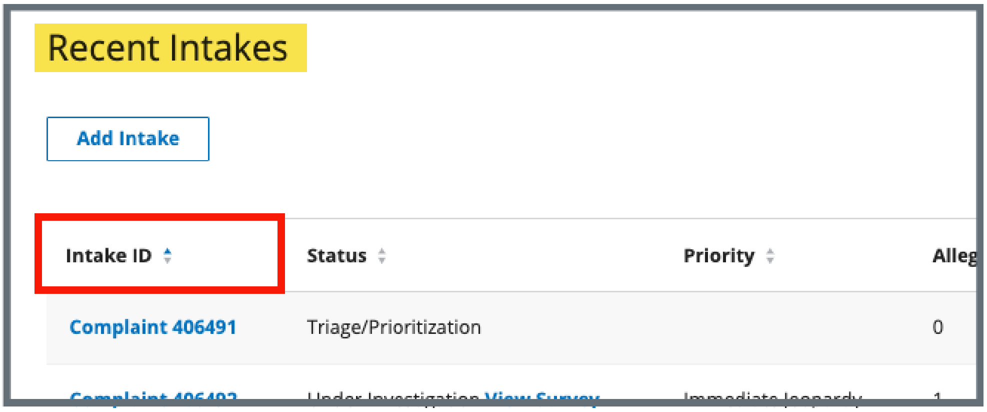

Figure 31: Intake ID Link

12.2.2 Click **Survey** on the left menu. The **Survey** page opens.

12.2.3 Click **Create Survey**. See *Figure 32, Create Survey*. The **Create Survey Basic Information** page opens.

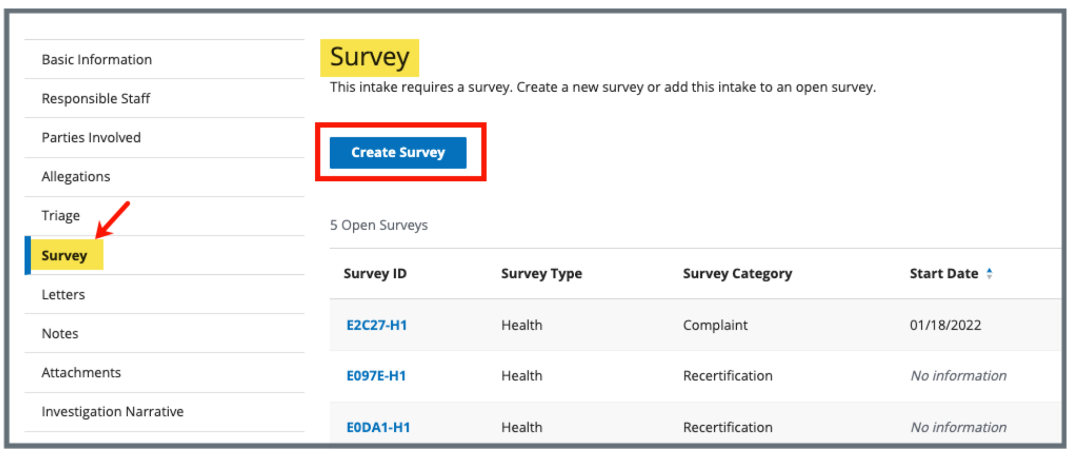

Figure 32: Create Survey

Note: Under **Open intakes to include in Complaint Survey**, the correct complaint intake is already selected. See *Figure 33, Open Intakes to Include in Complaint Survey.*

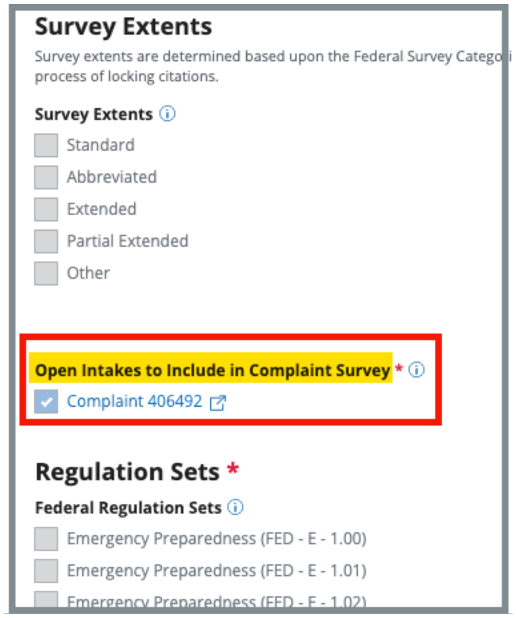

Figure 33: Open Intakes to Include in Complaint Survey

12.2.4 Fill out any other required information.

12.2.5 Click **Save Basic Information**. The **Survey Basic Information** page opens. The complaint or incident is now linked to the complaint survey. See *Figure 34, Linked Survey to Intake*.

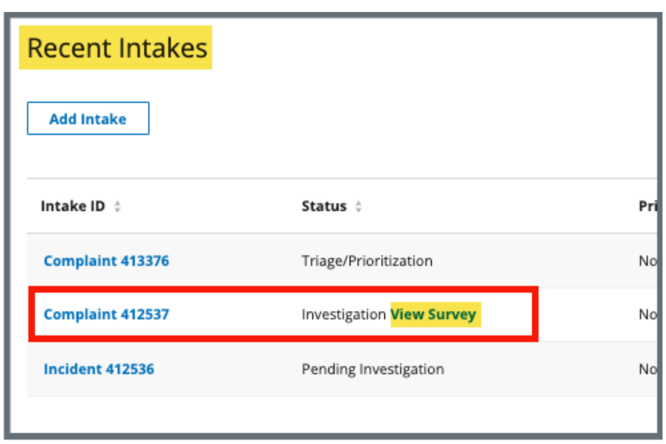

Figure 34: Linked Survey to Intake

13. Reassign Intake to a Different Provider

Purpose: To change a provider on an intake after intake information such as a complaint, allegation, letters, Investigation Narrative, etc., has been added. When a provider is changed, all information entered in the intake is moved to the new provider.

Note: The provider cannot be changed when:

- The intake status is **Under Investigation, Investigation, Scheduled, Pending Finalization, Investigation Completed**
- The provider is deemed and has received CMS approval
- The intake is included in a complaint survey
- The intake is marked as **Triage Complete**

13.1 Click **Change Provider** from the **Intake** action drop-down menu. See *Figure 35, Change Provider Drop-Down Menu*. The **Change Provider** pop-up window opens.

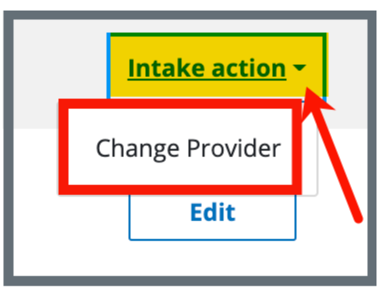

Figure 35: Change Provider Drop-Down Menu

13.2 Type the provider, DBA name, CCN or State Facility ID (FACID) to search for the correct provider. See *Figure 36, Change Provider for Complaint*.

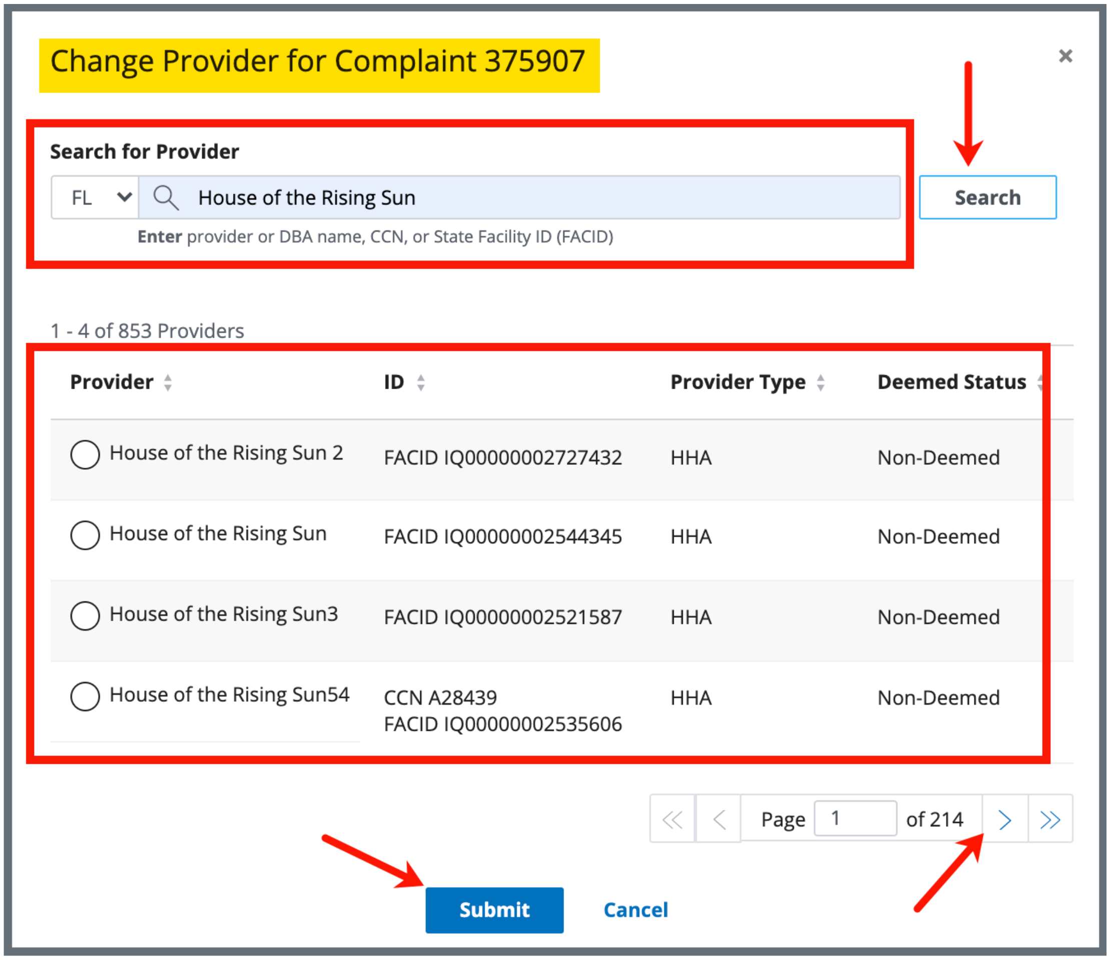

Figure 36: Change Provider for Complaint

13.3 Click the radio button next to the correct provider.

13.4 Click **Submit**. The **Changing Provider** pop-up window opens. See *Figure 37, Changing Provider*.

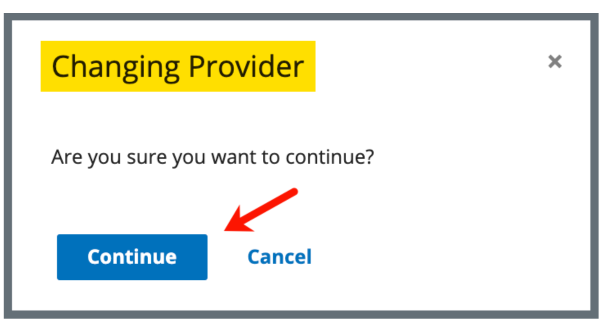

Figure 37: Changing Provider

13.5 Click **Continue**.

13.6 Verify the green notification banner is at the top of the screen confirming the intake provider was changed. See *Figure 38, Provider Intake Changed Green Notification Banner.*

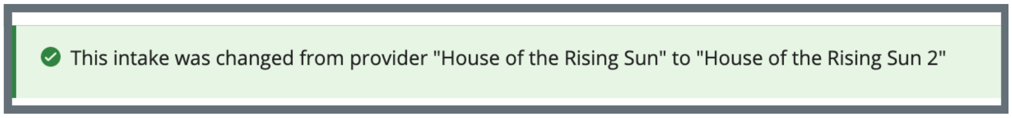

Figure 38: Provider Intake Changed Green Notification Banner

14. Finalization

Purpose: To close out an intake.

Notes: Once the Statement of Deficiency has been sent, the intake status changes to **Pending Finalization** and the intake must be closed manually.

Closed intakes cannot be modified. Go to step 15.6 if an intake needs to be reopened.

14.1 Click **Triage** on the left menu. The **Triage** window opens.

14.2 Click **Edit**. Scroll down to **Finalization**. See *Figure 39, Finalization*.

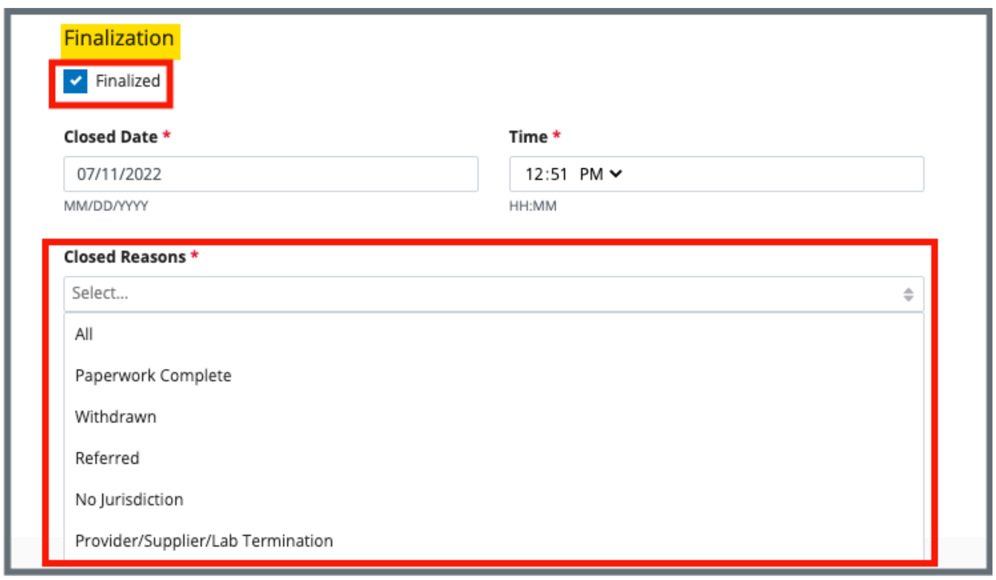

Figure 39: Finalization

14.3 Check the box next to **Finalized**. The date and time automatically populate.

14.4 Select one or more **Closed Reasons** from the drop-down list.

14.5 Click **Save Section**. The **Intake Status** changes to **Closed**. See *Figure 40, Intake Status*.

Figure 40: Intake Status

14.6 Click **Reopen Intake** under Intake action to reopen an intake. See *Figure 41, Reopen Intake*. A green banner notes that the intake is reopened. The **Edit** button is now available.

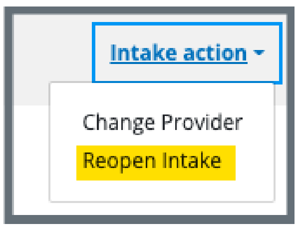

Figure 41: Reopen Intake

15. Letters

Purpose: To add, upload, generate a letter from an existing template, edit a Letter Overview, delete a letter, or add recipients to a letter. Nonstandardized templates can be edited in the Letters section of the applicable S&C area (providers, surveys, intakes, enforcements).

Note: Letter templates are created in the Letter Template Management section. Review S&C User Manual: Letter Template Management for more information.

15.1 Add/Upload a letter

15.1.1 Click **Letters** on the left menu to go to Letters. See *Figure 42, Intakes Letters*.

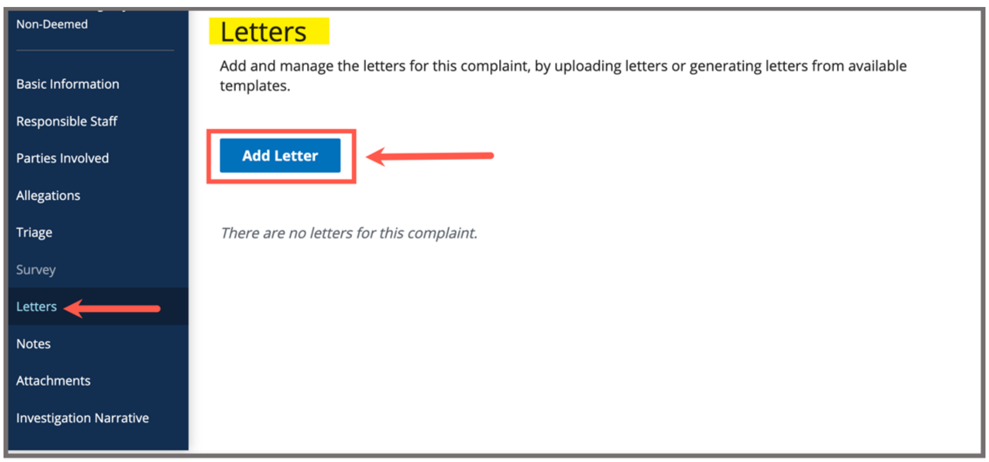

Figure 42: Intakes Letters

15.1.2 Click **Add Letter**. The **Letter Overview** window opens. See *Figure 43, Intakes Letter Overview*.

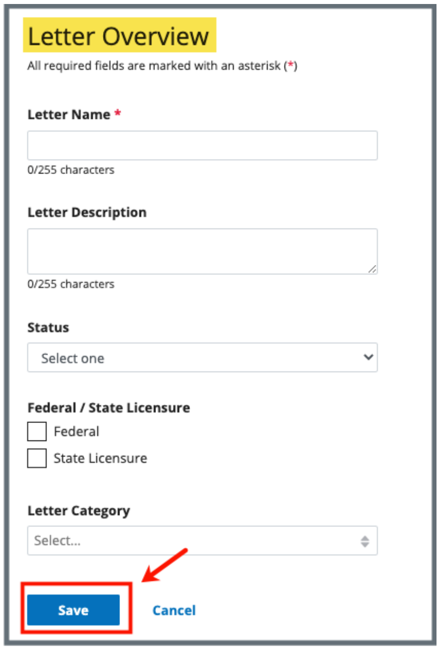

Figure 43: Intakes Letter Overview

15.1.3 Fill out the information.

15.1.4 Click **Save**. The information updates in a new screen. See *Figure 44, Letter Attachment and Recipient*.

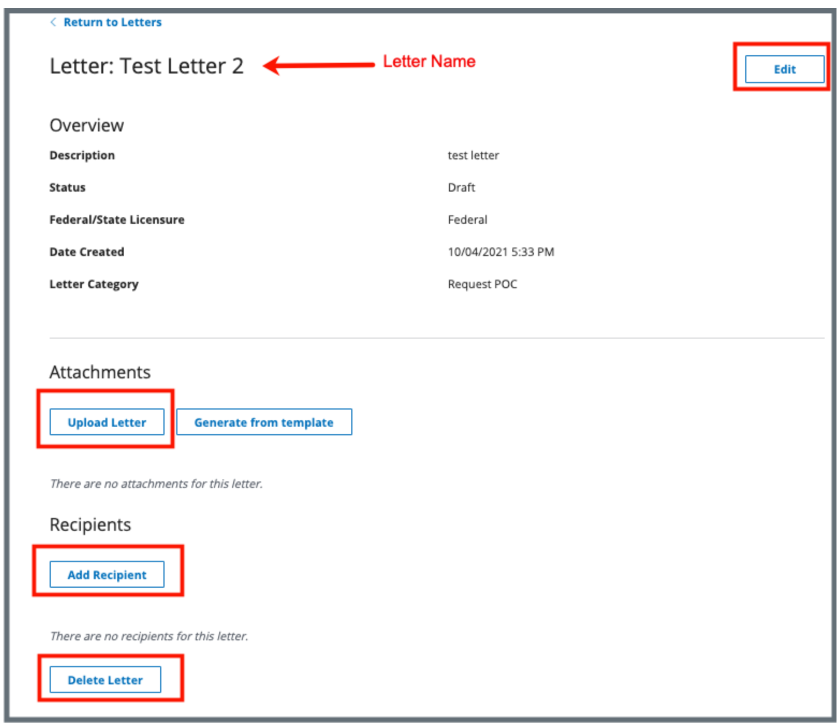

Figure 44: Letter Attachment and Recipient

15.1.5 Scroll down to **Attachments**. Click **Upload Letter** to upload a letter from the computer.

15.1.6 Click **Select File**. The Windows Explorer window pops up. For Mac users, the Finder window pops up.

15.1.7 Select the file to be attached. Click **Open**. The file is attached and ready to be saved.

15.1.8 Type a file description in the **File Description** field, if desired.

15.1.9 Click **Save**. The letter is attached to the survey.

15.2 Generate a letter from an existing template

15.2.1 Click **Add Letter**. The **Letter Overview** page opens.

Note: If there is already an existing letter that can be reused, click **Generate from template** under the **Actions** drop-down menu and go to step 16.2.5.

15.2.2 Type the letter name under **Letter Name**. Add additional information, if desired.

15.2.3 Click **Save**. The Letter: [Template Name] page opens.

15.2.4 Click **Generate from template** under **Attachments**. The **Add Letter** page opens.

15.2.5 Click the circle next to the desired template. See *Figure 45, Add Letter Template*.

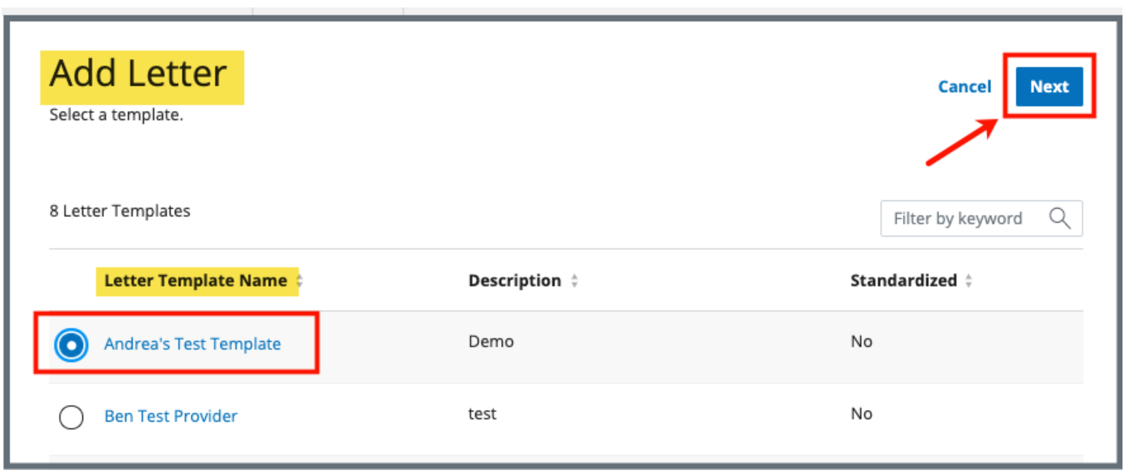

Figure 45: Add Letter Template

15.2.6 Click **Next**. The **Generate attachment from template** page opens.

15.2.7 Update the template as desired. See *Figure 46, Letter Template*.

Notes:

- The template can be modified. Textholders can be removed, words can be edited and updated. Be aware that the text changes apply only to the current letter and not to the template. Refer to Letter Template Management, to edit the original template.
- Standardized templates cannot be modified in the **Letters** section of any S&C area (providers, surveys, intakes, enforcements). To modify a standardized template, the template owner must edit the template in **Letter Template Management**.

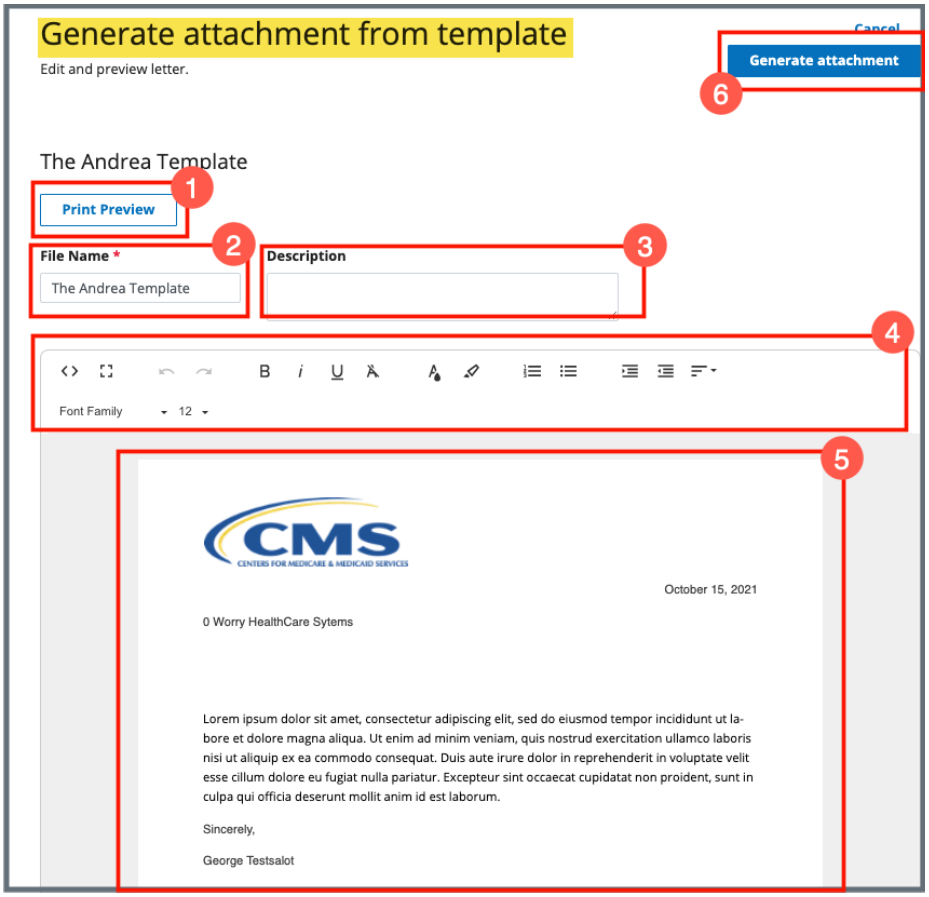

Figure 46: Letter Template

1. **Print Preview**: Click **Print Preview** to preview the .pdf version of the letter. The letter can be downloaded from **Print Preview**, if desired.
2. **File Name**: Edit the name, if desired.
3. **Description**: Enter keywords, if desired. Keywords are descriptive words that help the user find the content. For example, the template title might be “Unsubstantiated Claim,” and the key words could be federal, minor. Separate the keywords with a comma.
4. **Editor**: The editor allows content to be edited, including formatting, bulleting, etc. See Appendix A, Tips and Tricks for Working in a Template, for up-to-date details on each icon in the editor.
5. **Letter**: Shows how the letter looks. Verify inputs. Make any changes for nonstandardized templates, if desired.
6. **Generate attachment**: Click **Generate attachment** to create a .pdf that attaches to provider/survey/intake/enforcement record.

15.2.8 Click **Generate Attachment** to attach the letter to the record.

15.2.9 Verify the letter is attached under **File Name**. See *Figure 47, Letter Attachment.*

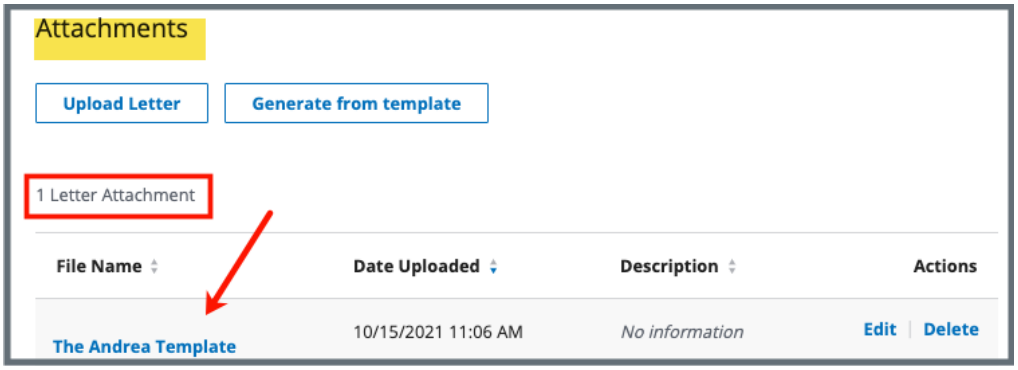

Figure 47: Letter Attachment

15.3 Add recipients to a letter

15.3.1 Click **Add Recipient** to add a recipient. The **Add Recipient** page opens. See *Figure 48, Add Recipient*.

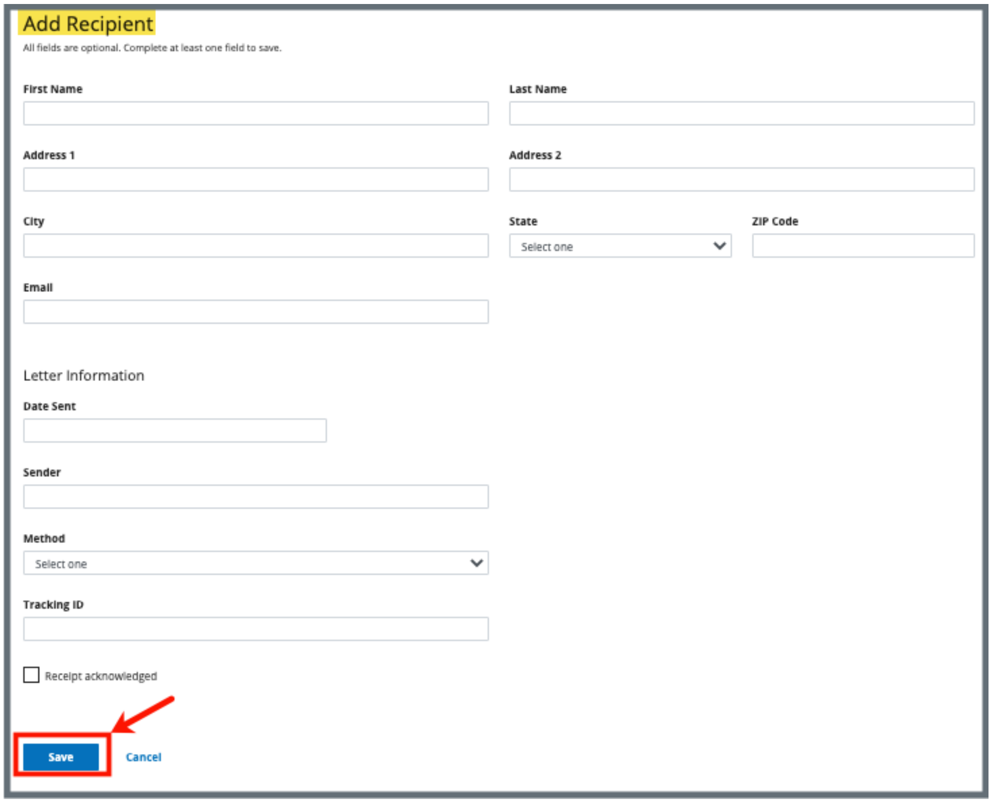

Figure 48: Add Recipient

15.3.2 Fill out the information.

15.3.3 Click **Save**. The Recipient Information updates.

Note: Recipients are not saved to the database.

15.4 Edit a Letter Overview

15.4.1 Click **Edit Overview** from the **Actions** drop-down menu to edit a **Letter Overview**. See *Figure 49, Edit a Letter Overview*. The **Edit Letter Overview** opens. See *Figure 50, Edit Letter Overview*.

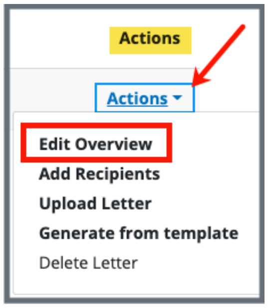

Figure 49: Edit a Letter Overview

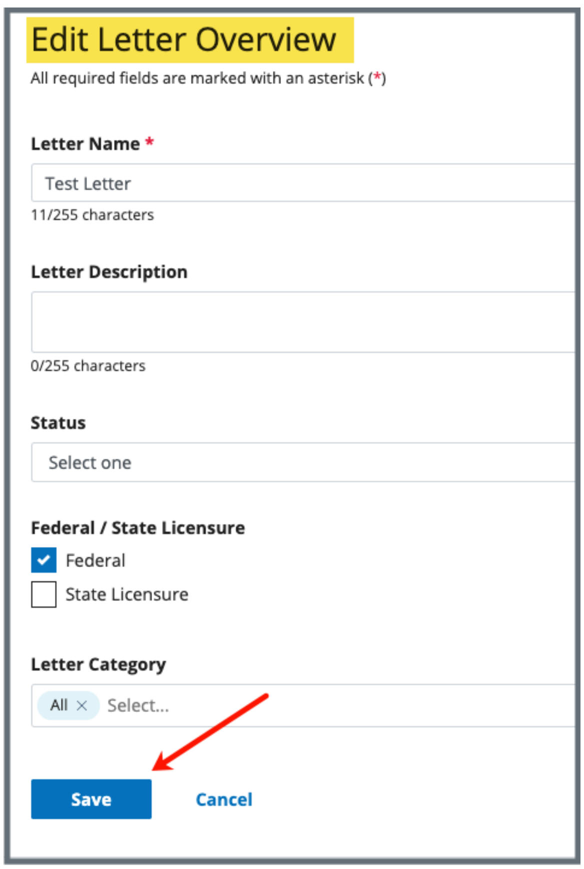

Figure 50: Edit Letter Overview

15.4.2 Update fields.

15.4.3 Click Save.

15.5 Delete a Letter

15.5.1 Click **Delete Letter** from the **Actions** drop-down menu to delete a letter. A pop-up note opens. See *Figure 51, Delete Letter Pop-Up Window*.

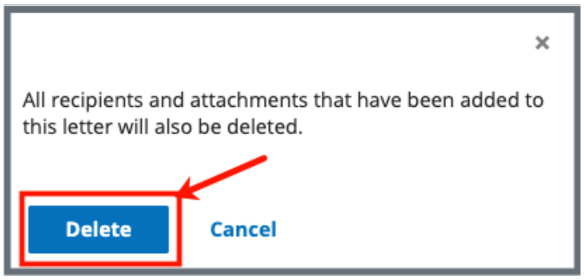

Figure 51: Delete Letter Pop-Up Window

15.5.2 Click **Delete**. The letter is removed from the list.

16. Notes

Purpose: To add or review any notes.

16.1 Click **Notes** on the left menu to view existing notes or add a note. See *Figure 52, Add Note Screen*.

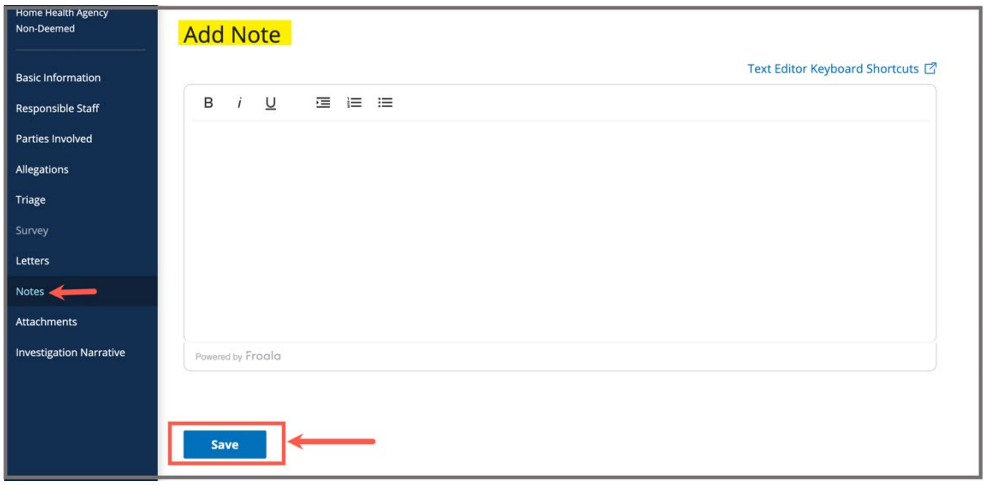

Figure 52: Add Note Screen

16.2 Add a note.

16.3 Click **Save**. The **Notes** window opens with note information.

Note: Click **Edit** to edit information, if desired. It is not possible to edit or delete a note created by another user.

16.4 Click **Delete** to delete a note. A pop-up note opens. See *Figure 53, Delete Note Pop-Up Window*.

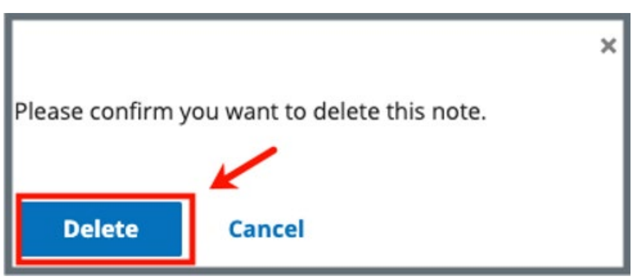

Figure 53: Delete Note Pop-Up Window

16.5 Click **Delete**. The updated **Notes** page opens.

17. Attachments

Notes:

- Only one attachment can be added at a time.
- Attachments can only be deleted by the user who uploaded the attachment. Contact the iQIES Service Center to delete any other attachments.

17.1 Click **Attachments** on the left menu. The **Attachments** window opens. *See Figure 54, Intake Attachments.*

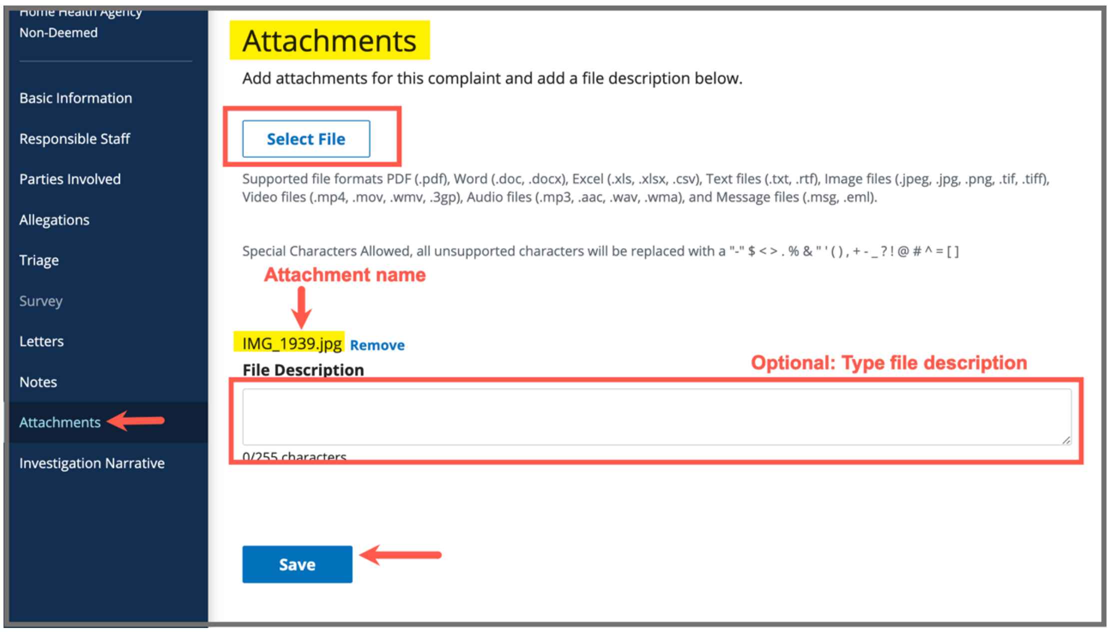

Figure 54: Intake Attachments

17.2 Click **Select File**. The Windows Explorer window pops up. For Mac users, the Finder window pops up.

17.3 Select the file to be attached. Click **Open**.

17.4 Type a file description in the **File Description** field, if desired.

17.5 Click **Save**. The file is attached to the intake.

Notes:

- Click **Edit** to edit information, if desired.
- Click **Download** to download the document, if desired.

18. Investigation Narrative

Purpose: To add a summary of the investigation, additional notes, or other text.

Notes:

- Investigation Narratives cannot be deleted once they are saved.
- Anyone can update the **Investigation Narrative**; it is not limited to the original creator.

18.1 Click **Investigation Narrative** on the left menu. The **Add Investigation Narrative** window opens. See *Figure 55, Add Investigation Narrative*.

Figure 55: Add Investigation Narrative

18.2 Type freeform text in the text box.

18.3 Click **Save**. The **Add Investigation Narrative** window closes. The investigation narrative shows on the intake page. It can be edited or downloaded.

18.4 Click **Edit** to edit the investigation narrative. Click **Save** after editing. See *Figure 56, Edit or Download an Investigation Narrative*.

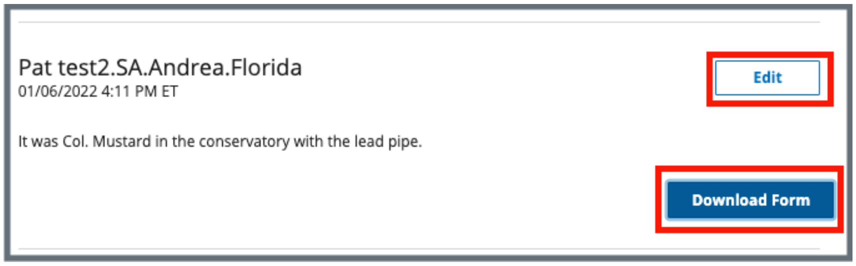

Figure 56: Edit or Download an Investigation Narrative

Notes:

- Be aware that two users can be in **Edit** mode in the **Investigation Narrative** at the same time. See *Figure 57, Concurrent Editor Notification.* <u>One user will overwrite the other person's data</u>. Exit **Edit** mode if either of the notifications below is shown. Carefully verify that any input has been saved correctly. Be sure to refresh the screen, if necessary.

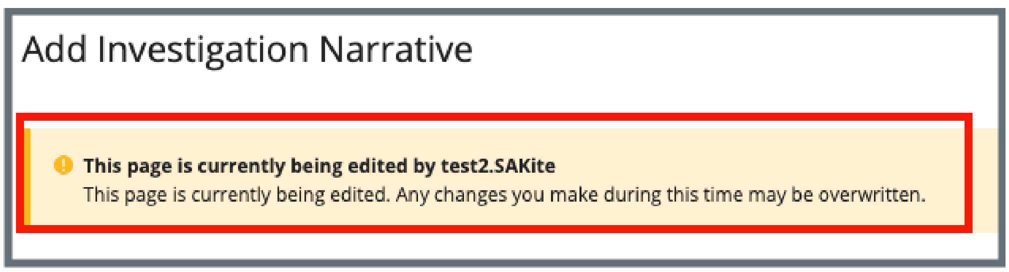

Figure 57: Concurrent Editor Notification

- A pencil icon is shown next to **Investigation Narrative** on the left menu when another user is editing the text area. Click the pencil and an explanatory text shows the name of the user who is editing the **Investigation Narrative**. See *Figure 58, Investigation Narrative Pencil Icon.*

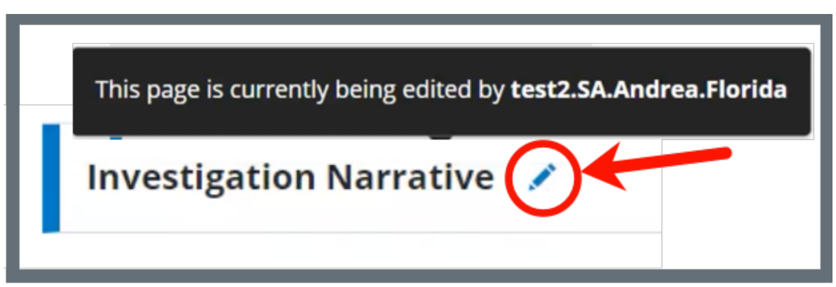

Figure 58: Investigation Narrative Pencil Icon

18.5 Click **Download** to download the narrative, if desired. The narrative downloads as a .pdf.

Appendix A: Tips and Tricks for Working in a Template

The letters template is very similar to working in Google Docs or Microsoft Word. Here are a few tips and tricks to help:

Template Menu

Hover over the template menu to see screen tips on what each of these icons are:

1. Show HTML code
2. Put document in full screen (make it bigger)
3. Undo/Redo
4. Insert an image. A small **Drop image** box opens. Drag and drop a file or click the box and search for the file.
5. Insert a table
6. Insert a horizontal line
7. Insert a page break
8. Highlight text and click to make **bold**
9. Highlight text and click to *italicize*
10. Highlight text and click to underline
11. Clear formatting
12. Highlight text and click to change text color
13. Highlight text and click to highlight text
14. Create a numbered list
15. Create a bulleted list
16. Insert a checklist
17. Indent/Remove indent
18. Alignment: Left, Center, Right, Justified
19. Adjust the line height
20. Select a font
21. Select a font size
22. Help: shows handy shortcuts, keyboard navigation, plugins, and version

Appendix B: Intake Textholder Text

Each provider, survey, intake, enforcement area has area-appropriate textholders. Intake Textholders are listed below.

Intake Textholders		
ALL – Allegation Text[with redact]	ALL – Allegation Text[without redact]	
Accrediting Organization (AO)	Acknowledged	
Activity Assignees	Admin 1st Name	Admin Full Name
Admin Last Name	Admin Salutation	Admin Short with Salutation
Admin Title		
Administrator Email	Allegation Category	Alleged Event Date
Building ID List	Buildings List	Buildings List Open
Complainant Address	Complainant Names	Complainant Relationship (Primary)
Custom Text Prompt		
Date # Days after Exit Date (Numbers)	Date # Days after Exit Date (Words)	Date # Days after Intake Date (Numbers)
Date # Days after Intake Date (Words)	Date # Days after Start Date (Numbers)	Date # Days after Start Date (Words)
Date # Days in Future (Numbers)	Date # Days in Future (Words)	Date # Working Days
Date CMS-2567 Issued	Date Follow-up Investigation	Date IDR Request Received
Date Received/Intake Start Date	Event ID	Exit Date (Numbers)

Intake Textholders		
Exit Date (Words)	Exit Date + 6 Months (Numbers)	Exit Date + 6 Months (Words)
Federal Survey Categories		
First Revisit High Citations	Highest Scope/Severity (Disabled for HHA)	IDR Conducted By
IDR Conducted Date	IJ Citations	Intake ID/Complaint Number
Intake Recipient	Investigation Due Date	Investigation Due Date Long
Investigators	Letter Sent Date	List Intakes For This Survey
List Level A Cites (Disabled for HHA)	List Survey Team	List Tag Numbers Only
List Tag/Surveyor Test	List Tags Cited	Medicaid ID Number
Observation Text (9999)	POC Due Date	POC Due Date in Words
Primary Complainant	Provider Address 1 (Street)	
Provider Address 2	Provider CCN	Provider City
Provider Doing Business As Name	Provider Fax Number	Provider Full Address
Provider Legal Name	Provider Mailing Address	Provider State
Provider State ID (FACID)	Provider State License Number	Provider Telephone
Provider Type Abbrev	Provider Type Full Description	Provider Zip
Reference	Revisit-Corrected Tags	Revisit-List New Tags
Revisit-List Repeat Tags	Start Date (Numbers)	Start Date (Words)

Intake Textholders		
State Intake ID	State Survey Categories	
Survey All Tags IDR Status	Survey Extent(s)	Survey High Citations
Survey Purpose	Survey Regulation Type	Survey Revisits
Survey Revisits – Dates Only	Survey Team Leader	Survey Type
Termination – 23 Days	Termination – 90 Days	Third Visit Date
Title (Mapped from Provider Certification & Licensure tab)	Today's Date	Today's Date Full