

# **Emergency Triage, Treat, and Transport (ET3) Model**

## **ET3 Model Data Submission Guide for NEMESIS 3.5 Support, 2<sup>nd</sup> Ed.**

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*October 18, 2021*

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## Acknowledgement

The Emergency Triage, Treat, and Transport (ET3) Model acknowledges the support and collaboration of the National Highway Traffic Safety Administration (NHTSA) Office of Emergency Medical Services (OEMS) and the National Emergency Medical Services Information System (NEMSIS) Technical Assistance Center (TAC). Both this revised guide, and the ET3 Model data submission process that it covers, would not be what they are without this partnership.

## Overview

The ET3 Model requires that Participants regularly submit data in addition to the Medicare claims information used as part of billing for ET3 Model Interventions. NEMSIS standard electronic Patient Care Report (ePCR) data are an important and large component of ET3 Model data submissions. NEMSIS standard ePCR data are a new quantitative data source for the ET3 Model and the Center for Medicare and Medicaid Innovation (CMMI) at the Centers for Medicare and Medicaid Services (CMS). However, the data source is very familiar to participating EMS ambulance suppliers and providers, and their supporting software vendors. Thus, the main goal of this guide is to familiarize Participants and their supporting vendors with the submission of NEMSIS version 3.5 ePCR data into ET3 Model systems and confirmation that the ET3 Model has correctly received that data. This guide assumes familiarity with the NEMSIS standard specifications and readers are encouraged to contact the NEMSIS TAC with any questions about those [specifications](#).

NEMSIS standard ePCR data will benefit both the ET3 Model and Participants. For the ET3 Model, ePCR data will be used in Model monitoring and evaluation. A consistent data format will enable CMS to aggregate data across the Model and provide Participants with feedback and assistance implementing Model interventions.

Submission of ePCR data is divided into two periods: initial submission and subsequent submissions. (Note: additional information on data submission requirements can be found in Article 16 of the ET3 Model Participation Agreement.)

The initial ePCR submissions were initially due on April 30, 2021. These submissions were composed of two sets of ePCR data. The first component was all participating EMS agencies' ePCRs generated from March 2019 to February 2020. These data will be used to form a standard baseline for all agencies before both the coronavirus disease 2019 (COVID-19) national public health emergency and the ET3 Model altered their operations. The second component was all participating EMS agencies' ePCRs generated in January to March 2021. These data covered the first three months of ET3 Model performance.

Subsequent ePCR submissions are due on the last day of each calendar month, starting on March 31, 2021. These submissions will be composed of all participating EMS agencies' ePCRs generated in the *previous* calendar month. For example, all of the ePCRs generated in September 2021 are due by October 31, 2021. All of the ePCRs generated in October 2021 are due by November 30, 2021 and so forth for each month during participation in the ET3 Model. ePCRs may be submitted before the due date and they are expected to be submitted in real time using the NEMSIS web services description language (WSDL)/application programming interface (API) transmission standard.

## **Roles and Responsibilities**

Several entities play roles in providing the necessary tools, processes, and techniques for fulfilling the ET3 Model data submission requirements.

### **ET3 Model Participants**

ET3 Participants are entities that have signed and executed ET3 Participation Agreements to provide ET3 Model Interventions to Medicare Fee-for-Service beneficiaries. The Participant is responsible for collecting ePCR data in the NEMSIS standard and submitting that ePCR data to the ET3 Model. Submission of ePCRs to the ET3 Model is in addition to—not in lieu of—Participants' existing data submission requirements to other regulatory entities, such as local and state governments.

Participants may send the ePCR data directly to CMS or with the support of NEMSIS-compliant ePCR software vendors.

### **NEMSIS-compliant ePCR Software Vendors**

NEMSIS-compliant ePCR software vendors are permitted to submit ePCR data to CMS on behalf of Participants. Any software vendors supporting Participants are encouraged to closely coordinate their ePCR submission processes with the ET3 Model and the NEMSIS TAC.

Software vendors can play vital roles in ePCR submissions to the ET3 Model, but their supported Participants maintain final responsibility for meeting the ET3 Model data submission requirements.

### **NEMSIS Technical Assistance Center**

NEMSIS provides the framework for collecting, storing, and sharing standardized EMS data. NEMSIS is both a universal standard for how patient care information resulting from an emergency 911 call for assistance is collected and the national database used to store EMS data from signatory US states and territories.

The ET3 Model has partnered with the NEMSIS TAC to assist the Model's adoption of NEMSIS data standards and provide related technical support. For example, the NEMSIS TAC assisted the ET3 Model with the development of the ET3 Schematron schema for validating ePCRs and with delivering technical information to ePCR software vendors.

### **CMMI at CMS**

CMMI develops new payment and service delivery models in accordance with the requirements of Section 1115A of the Social Security Act. The ET3 Model is one of several models that require the exchange of patient data between the medical community and CMS. CMMI has provided the platform and technologies required to accept ePCR data from Participants.

CMMI will then analyze the ePCR data collected as part of the ET3 Model to support its ongoing statutory mission, including Participant performance, payment monitoring, and Model evaluation.

## ET3 Model Help Resources

In addition to their assigned ET3 Model Project Officers, Participants have access to Help Desks for questions throughout their participation in the ET3 Model.

- The ET3 Mailbox is available for general ET3 Model questions via [ET3Model@cms.hhs.gov](mailto:ET3Model@cms.hhs.gov).
- The ET3 Help Desk is available for all data submission *technical* questions via 1-844-711-2664.

## Required Data Submissions

### NEMSIS Standard ePCR Data for the ET3 Model

The ET3 Model will require Participants to submit ePCRs that are compliant with current NEMSIS versions. As of June 2021, NEMSIS versions 3.4.0 and 3.5.0 are current. The NHTSA OEMS and the NEMSIS TAC are scheduled to stop supporting (“sunset”) NEMSIS version 3.4.0 in January 2023. ET3 will adopt a similar data submission compliance schedule: ET3 will accept ePCR submissions in both versions 3.4.0 and 3.5.0 during the implementation period, then ET3 will accept only ePCRs in version 3.5.0 once the NEMSIS TAC has sunset version 3.4.0.

Much of what Participants and their supporting software vendors already know and do for ePCR submissions remains the same for ET3 Model data submissions. The ET3 Model took this approach of making limited customizations to facilitate and streamline the data submission process and to provide common data standards for a national model while accommodating agencies’ respective state data regulations.

The ET3 Model will apply the same standard structure of NEMSIS ePCR elements and the data validations for the XSD and National Schematron schemas. The ET3 Model will collect all Mandatory data elements, but there are some Required and Recommended data elements that the ET3 Model will not collect. There also are some Optional elements that the ET3 Model will collect. It is important to note that the ET3 Model has not made any changes that conflict with the XSD and National Schematron schemas. The XSD and National Schematron validation schemas will be applied to ePCR data submissions that the ET3 Model receives with no changes, additions, or deletions to the existing “Errors,” “Warnings,” and status codes.

The ET3 Model will require Participants to apply some limited customizations to version 3.5.0 ePCR submissions in order to help appropriately document the ET3 Model’s Interventions.

First, the ET3 Model has a list of NEMSIS data elements that are to be collected. The list includes all of the elements that are “Mandatory” in the NEMSIS data standard, plus additional standard NEMSIS elements. The list of data elements collected by the ET3 Model can be found in Appendix B. Participants may submit NEMSIS elements that are not on the ET3 Model list, but the ET3 Model will not process or store those elements.

Second, the ET3 Model has one custom element (et3Disposition.01) and custom values added to two existing NEMSIS data elements (eDisposition.21 and eDisposition.29). More details on this element and values, including their codes and definitions, can be found in Appendix B.

Third, the ET3 Model has one set of new Schematron rules that will be used to validate ePCRs submitted by Participants. This Schematron schema consists entirely of “Warnings” and will be utilized in a similar fashion as a

set of “State” rules applicable to Participants. More details on this ET3 Model-specific Schematron schema can be found in Appendix C.

Finally, the NEMSIS TAC also has resources available for Participants on its website. Participants are encouraged to contact the NEMSIS TAC for technical questions on the NEMSIS standard (<https://nemsis.org/using-ems-data/cms-et3-project/>).

## Medicare Claims Data for the ET3 Model

The ET3 Model will use Medicare claims data generated by Participants and their Partners as a data source. While Medicare claims and ePCRs can be related data and cover the same ET3 Model Intervention/response, this guide will not focus on Medicare claims because those data are submitted through different processes and systems. For further information on Medicare claims data as part of the ET3 Model, Participants are encouraged to refer to the “Participant Billing and Payment Factsheet” available for download on the [ET3 Connect Site](#) and reach out their assigned Project Officers with any questions.

## Submission Process and Work Flow

Once an ePCR is generated by a Participant, it must be submitted to CMS by the last day of the calendar month following the date of the incident. The Participant is responsible for the data submission into ET3 Model systems, whether directly or through a supporting ePCR software vendor.

As part of the ET3 Model Onboarding process, a participating agency or supporting software vendor will create an account with ET3 Model systems and request the application programming interface (API) keys needed for secure ePCR transmission. After those API keys are issued and test transmissions are confirmed, ePCRs can be submitted.

Participating agencies or their supporting software vendors will submit ePCRs into the ET3 Model’s Centralized Data Exchange (CDX) system. Each ePCR will be validated using the NEMSIS standard XSD and National Schematron schema, as well as the ET3 Model-specific “State” Schematron schema. A status code will be generated for each submission.

Once an ePCR submission passes validation, it will be filtered and only the elements that the ET3 Model requires will proceed to further data processing.

## Confirming Data Receipt

ET3 Participants can check the status of their ePCR submissions to the ET3 Model through the CDX Dashboard component of the ET3 application. The steps for accessing this function in CDX are detailed in Appendix E.

Additionally, Participants can reach out to their Project Officers to inquire about submission status.

## Frequently Asked Questions

1. What required data elements will Participants need to report? How often? To whom?

*CMS currently requires Medicare claims data and NEMSIS standard ePCR data from Participants. Participants will be notified at least 60 days in advance if CMS changes the required data elements. Please see Overview and Required Data Submissions section(s) in this document for more details on data submission frequency, deadlines, and routes.*

2. Why is CMS collecting National Emergency Medical Services Information System (NEMSIS) standard electronic Patient Care Report (ePCR) data for the ET3 Model?

*NEMSIS standard ePCR data is very familiar to participating Emergency Medical Services (EMS) ambulance suppliers, providers, and their supporting software vendors, and will be used in Model monitoring and evaluation. It provides a consistent data format that will enable CMS to aggregate data across the Model, and provide Participants with feedback and assistance implementing Model interventions.*

3. Do we need to submit all electronic Patient Care Reports (ePCRs) regardless of payer?

*Yes, ET3 requires the submission of all PCRs generated by Participants for the time periods listed in the Data Submission Guide. Specifically, any ePCR with an eTimes.03 (NEMSIS v3.5) value that falls in the time periods listed is required for submission. Time period submissions and/or deadlines enable the comparison of ET3 interventions to a control group of ePCR records.*

4. When will ePCR data be submitted?

*Submission of ePCR data is divided into two periods: Initial Submission and Subsequent Submissions.*

**Initial ePCR Submission:** Due April 30, 2021, and will be composed of two sets of ePCR data:

- 1) All participating EMS agencies' ePCRs generated from March 2019 to February 2020; and
- 2) All participating EMS agencies' ePCRs generated from January to March 2021.

**Subsequent ePCR Submissions:** Due on the last day of each calendar month, starting March 31, 2021. These submissions will be composed of all participating EMS agencies' ePCRs generated in the previous calendar month.

*Additional information on data submission requirements can be found in Article 16 of the Participation Agreement.*

5. Our organization is not planning to implement ET3 Model Interventions until late 2021. Do we still need to submit initial and subsequent ePCR data?

*ET3 Model Implementation is not required until January 1, 2022. However, the initial ePCR data submission, due April 30<sup>th</sup>, 2021, was required to establish a baseline for Model participation, regardless of whether you are implementing ET3 Model Interventions. Subsequent data submissions are required on a monthly basis regardless of Model implementation date. If you will have any issues meeting these deadlines, or require technical support, please contact your Project Officer. Please refer to Article 6 of the Participation Agreement regarding Model implementation date, and Article 16 regarding data submission requirements.*



6. What are the data submission requirements of the ET3 Participant and their NEMSIS-compliant ePCR software vendor(s)?

*The Participant is responsible for collecting ePCR data in the NEMSIS standard and submitting that ePCR data to CMS, either directly to CMS or with the support of NEMSIS-compliant ePCR software vendor(s). Any software vendors supporting Participants are encouraged to closely coordinate their ePCR submission processes with the ET3 Model and the NEMSIS Technical Assistance Center (TAC Participants maintain final responsibility for meeting the ET3 Model's data submission requirements.*

7. Whom should an ET3 Participant contact for assistance around data submission?

*Participants can contact their ET3 Model Project Officer for all ET3 Model non-technical questions. Email the ET3 Mailbox at [ET3Model@cms.hhs.gov](mailto:ET3Model@cms.hhs.gov), and include your Application ID in the format "ET3-OXXX" in the subject line.*

*The Innovation Development and Operations Services (IDOS) Help Desk is available for all ET3 Model data submission technical questions. Call 1-844-711-2664 to reach the IDOS Help Desk.*

8. What NEMSIS version standard will Participants need to comply with for ePCR submission?

*The ET3 Model will require Participants to submit ePCRs that are compliant with the NEMSIS version 3.4 or 3.5 standard. The ET3 Model will require Participants to apply some limited customizations to version 3.4 or 3.5 ePCR submissions to help appropriately document the ET3 Model's Interventions.*

- 1) The ET3 Model has one custom element (eDisposition.01), and has added custom values to two elements (eDisposition.21 and eDisposition.29) for NEMSIS version 3.5.*
- 2) The ET3 Model has one set of new schematron rules that CMS will use to validate ePCRs submitted by Participants; this schematron consists entirely of "Warnings" and will be treated as a set of "State" rules applicable to Participants.*

*Additional information around these customizations can be found in the **NEMSIS Data Submission – Prerecorded Webinar** available for download from the [ET3 Connect Site](#).*

*The NEMSIS TAC has resources available for Participants [on their website](#), and Participants are encouraged to contact the NEMSIS TAC for technical questions on the NEMSIS standard.*

9. How does an ET3 Participant or supporting software vendor submit ePCR data to CMS by the required due date (the last day of the following calendar month)?

*As part of the ET3 Model onboarding process, a Participant or supporting software vendor will create an account in the CMS Enterprise Portal, and request the application programming interface (API) keys needed for secure ePCR transmission. After those API keys are issued and test transmissions are confirmed, ePCRs can be submitted using any NEMSIS-compliant ePCR software.*

*Participating agencies, or their supporting software vendors, will submit ePCRs into the ET3 Model's Centralized Data Exchange (CDX) system; access to CDX is managed through the CMS Enterprise Portal. Each ePCR will be validated using the NEMSIS standard XML Schema Definition (XSD) and National Schematron schema, as well as the ET3 Model-specific "State" Schematron schema; a status code will be generated for each submission.*

*Once an ePCR submission passes validation, it will be filtered, and only the elements that the ET3 Model requires will proceed to further data processing.*



10. How will I know if CMS has received my ePCR data?

ET3 Participants can check the status of their ePCR submissions to the ET3 Model through the CDX Dashboard component of the ET3 application. The steps for accessing this function in CDX are detailed in Appendix E.

*Participants can also reach out to their Project Officers and inquire about submission status. Email the ET3 Mailbox at [ET3Model@cms.hhs.gov](mailto:ET3Model@cms.hhs.gov), and include your Application ID in the format "ET3-XXXX" in the subject line.*

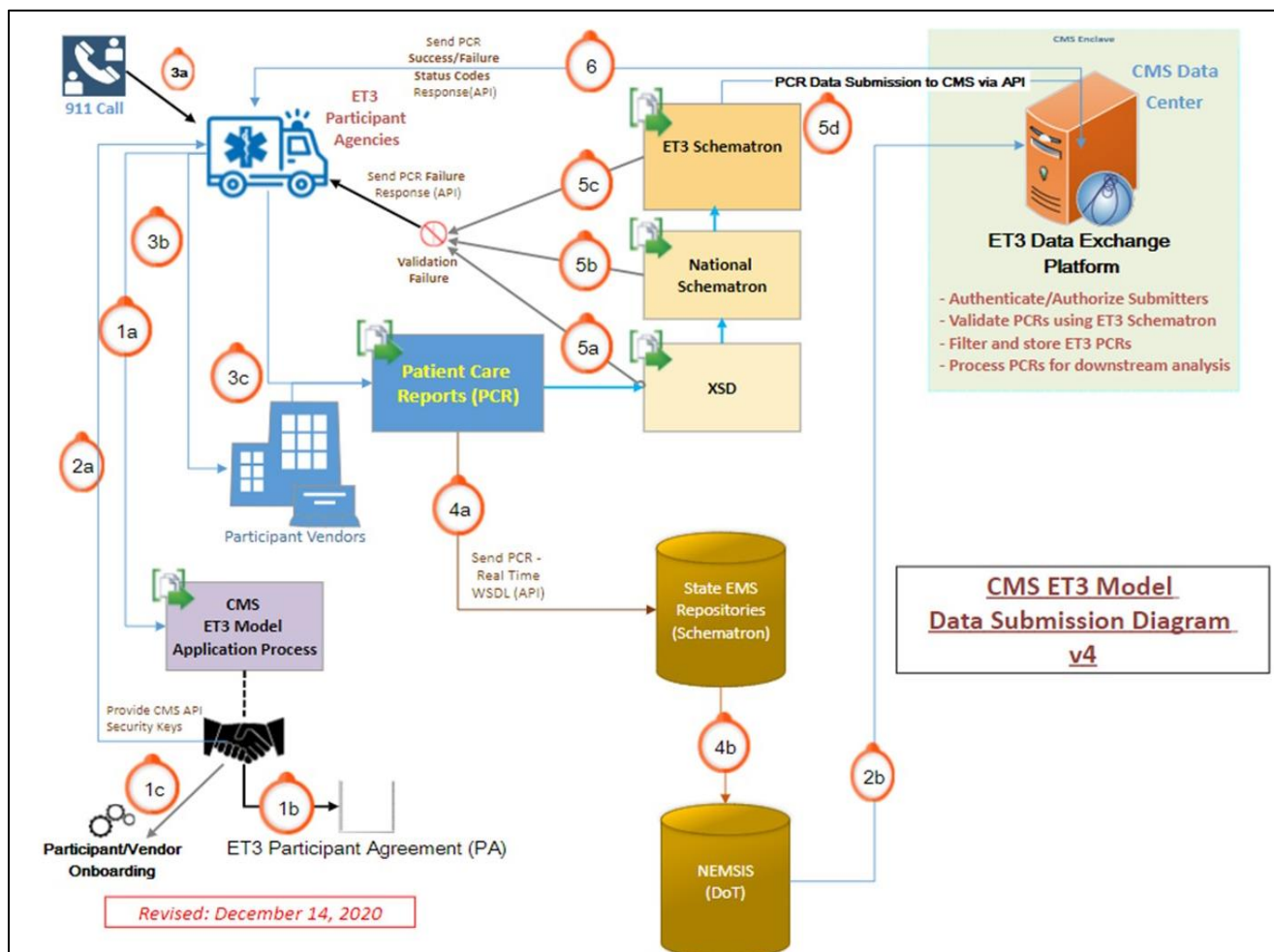
## Appendices

- A. ET3 Model Data Flow Diagram and Definition Table – CMMI
- B. ET3 Model “State” Dataset for NEMSIS v3.5.0 – NEMSIS TAC
- C. ET3 Model “State” Schematron Rules for NEMSIS v3.5 – NEMSIS TAC
- D. ET3 Model Scenarios for NEMSIS v3.5.0 ePCRs – NEMSIS TAC and CMMI
- E. Excerpts of User Manuals for Innovation Center (IC) Portal and CDX – CMMI

## Appendix A: ET3 Model Data Flow Diagram and Definition Table – CMMI

The following graphic depicts the flows and steps associated with ET3 Data Submission.

*Exhibit 1. CMS ET3 Model Data Submission Diagram (v4)*



*Exhibit 2. CMS ET3 Model Data Submission Data Flow Definition Table (v3)*

Ref No.	Process Type	Actor (Start)	Actor (End)	Includes	Frequency
1a	Manual	ET3 Participants Agencies	CMS ET3 Model Application Process	Application Data	Once
1b	Manual	CMS ET3 Model Application Process	ET3 Participant Agreement (PA)	CMS Approval, Application Data	Once
1c	Manual	CMS ET3 Model Team	ET3 Participant/Vendor Onboarding (PA)	ET3 Webinar, User Guidance, Security Keys, etc.	Once
2a	Online	CMS ET3 Model Team	ET3 Participant Agencies & Vendors	ET3 Webinar, User Guidance, Security Keys, etc.	Once
2b	File Transfer	NEMSIS TAC (DOT)	ET3 Data Exchange Platform	Participant Demographic Data	4 times per year
3a	911 Call	911 Call Center	ET3 Participant Agencies	Incident Details	Continuous
3b	Data Submission	ET3 Participant Agencies	ET3 Participant Vendors	Patient Care Information	Continuous
3c	Data Submission	ET3 Participant Agencies/Vendors	Electronic Patient Care Report (PCR) records	Patient Care Reports (PCR)	Continuous
4a	State Data Submission & Validation	Patient Care Reports (PCR)	State EMS Repositories	PCR Data & State Schematron	Continuous
4b	National Data Submission & Validation	Patient Care Reports (PCR)	NEMSIS National Repository	PCR Data & National Schematron	Continuous
5a	ET3 Data Validation	XML Schema Definition (XSD)	Validation Failure	PCR Data & XSD	Only when Validation fails
5b	ET3 Data Validation	National Schematron	Validation Failure	PCR Data National Schematron	Only when Validation fails
5c	ET3 Data Validation	ET3 Schematron	Validation Failure	PCR Data and ET3 Schematron	Only when Validation fails
5d	Data Submission (Successful)	ET3 Schematron	ET3 Data Exchange Platform	PCR Data sent to CMS via NEMSIS API	Continuous
6	Data Submission Response (Success or Fail)	ET3 Data Exchange Platform	ET3 Participant Agencies/Vendors	ET3 Validation Response from ET3 Data Exchange Platform	Continuous

Starting in the lower left corner of the diagram, prospective Participants first applied for entry into the ET3 Model using the ET3 Model Application Process (see Flow 1a). This was a manual process, which resulted in the transfer of Applicant data to CMML.

ET3 Participants later signed Participant Agreements, which then permitted participation in ET3 Model Onboarding activities (see Flows 1b & 1c). Additionally, Participants could then request access to the ET3 Model system by registering through the CMS Enterprise Portal (<https://portal.cms.gov>).

Concurrent with ET3 Model Onboarding activities, the NEMSIS TAC generates a Department of Transportation (DoT) file containing Demographic Data for all of the ET3 Model's participating EMS agencies (see Flow 2b).

Once a 911 call is initiated, a participating ambulance supplier or provider responds to the incident location and provides EMS to any affected patient(s) or Medicare beneficiary(ies). While treatment activities are the highest priority, the collection of patient data begins.

Using a software vendor's product, EMS personnel collect ePCR data and the data are formatted using the NEMSIS standard prior to transmission (see Flows 3b & 3c). Once the complete ePCR data are collected, the ePCR software vendor will send the ePCR data to the state in which the Participant is licensed to provide EMS (see Flow 4a). Each state participating in the NEMSIS standard sends a subset of ePCR data to the national NEMSIS Data Repository (see Flow 4b).

After successfully transmitting ePCR data to the state, the ePCR software vendor will then send the ePCR data to the ET3 Model (see Flow 5a). The validation process is performed in three steps, starting with the XSD, then the National Schematron schema, and finally the ET3 Model “State” Schematron schema validation. If a validation failure occurs at any point in the three-step validation process, then the ET3 Model-bound data are not sent further through CMS systems (see Flows 5a, 5b, & 5c). Once a successful validation process occurs, ePCR records continue through systems for further processing (see Flows 5d). Either a SUCCESS or FAILURE response report will be sent back to whomever submits the ePCR data (see Flow 6a).

Once accepted, the ePCR data are filtered and only the required ET3 Model data submission elements (see Appendix B) are stored and processed for downstream data analyses.

## Appendix B: ET3 Model “State” Dataset for NEMSIS v3.5.0 – NEMSIS TAC

The ET3 Model “State” Dataset for NEMSIS v3.5.0 can be found online at  
[https://stash.utahdcc.org/stash/projects/NES/repos/et3-project/raw/Resources/ET3\\_StateDataSet.pdf?at=refs%2Fheads%2Frelease-3.5.0](https://stash.utahdcc.org/stash/projects/NES/repos/et3-project/raw/Resources/ET3_StateDataSet.pdf?at=refs%2Fheads%2Frelease-3.5.0)

# NEMSIS

## V3 State Data Set

# ET3 Project

NEMSIS Version 3.5  
Version Date: 04/09/2021

[www.NEMSIS.org](http://www.NEMSIS.org)

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# Custom Data Elements

Configuration for custom data elements created to collect information that is not defined formally in NEMSIS Version 3.

Legend	Usage:	M = Mandatory, R = Required, E = Recommended, or O = Optional
	Attributes:	N = Not Values, P = Pertinent Negatives, L = Nillable, and/or C = Correlation ID

## seCustomConfiguration

1 : 1	eDisposition.29 - Crew Disposition	R	L, C
1 : 1	eDisposition.21 - Type of Destination	R	L, C
1 : 1	et3Disposition.01 - ET3 Alternative Disposition Offer and Result	R	N, L, C

# Custom Data Elements

eDisposition.29

## eDisposition.29 - Crew Disposition

### Definition

The crew disposition for this EMS event identifying which crew provided primary patient care or whether support services were required.

National Element		Pertinent Negatives (PN)	No
State Element	Yes	Not Values (NV)	No
Version 2 Element		Is Nillable	Yes
Usage	Required	Recurrence	1 : 1

### Extends NEMESIS Element

## eDisposition.29 - Crew Disposition

### Code List

NEMESIS		Description
Code	Code	
4229901	4229003	Initiated Primary Care and Transferred to Another Provider on Scene (non-EMS)
4229902	4229003	Initiated Primary Care and Transferred to Telehealth Provider

# Custom Data Elements

eDisposition.21

## eDisposition.21 - Type of Destination

### Definition

The type of destination the patient was delivered or transferred to

National Element		Pertinent Negatives (PN)	No
State Element	Yes	Not Values (NV)	No
Version 2 Element		Is Nillable	Yes
Usage	Required	Recurrence	1 : 1

### Extends NEMESIS Element

## eDisposition.21 - Type of Destination

### Code List

Code	NEMESIS Code	Description
4221901	4221007	Federally Qualified Health Center
4221902	4221013	Qualified Health Care Partner
4221903	4221007	Rural Health Clinic

# Custom Data Elements

et3Disposition.01

## et3Disposition.01 - ET3 Alternative Disposition Offer and Result

### Definition

An indication of whether EMS offered an ET3 alternative disposition to the patient and whether the patient accepted the alternative. If the patient refused one alternative but accepted another, record that the patient accepted.

National Element		Pertinent Negatives (PN)	No
State Element	Yes	Not Values (NV)	Yes
Version 2 Element		Is Nillable	Yes
Usage	Required	Recurrence	1 : 1

### Attributes

#### Not Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Code List

Code	NEMSIS Code	Description
et3Disposition.01.01		Alternative Disposition Not Offered
et3Disposition.01.02		Alternative Disposition Offered, Accepted by Patient
et3Disposition.01.03		Alternative Disposition Offered, Refused by Patient

# State Collected Elements

The data elements that the state collects or requires.

☒ DEMDataSet ☒ EMSDataSet

☐ Show Non-state-required Data Elements

		Element	
N	S	Number	Element Name
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	eRecord.01	Patient Care Report Number
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	eRecord.02	Software Creator
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	eRecord.03	Software Name
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	eRecord.04	Software Version
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	eResponse.01	EMS Agency Number
	<input checked="" type="checkbox"/>	eResponse.02	EMS Agency Name
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	eResponse.03	Incident Number
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	eResponse.05	Type of Service Requested
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	eResponse.07	Unit Transport and Equipment Capability
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	eResponse.10	Type of Scene Delay
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	eResponse.11	Type of Transport Delay
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	eResponse.12	Type of Turn-Around Delay
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	eResponse.13	EMS Vehicle (Unit) Number
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	eResponse.14	EMS Unit Call Sign
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	eResponse.23	Response Mode to Scene
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	eDispatch.01	Dispatch Reason
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	eDispatch.02	EMD Performed
	<input checked="" type="checkbox"/>	eDispatch.05	Dispatch Priority (Patient Acuity)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	eTimes.01	PSAP Call Date/Time
	<input checked="" type="checkbox"/>	eTimes.02	Dispatch Notified Date/Time
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	eTimes.03	Unit Notified by Dispatch Date/Time
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	eTimes.05	Unit En Route Date/Time
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	eTimes.06	Unit Arrived on Scene Date/Time
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	eTimes.07	Arrived at Patient Date/Time
	<input checked="" type="checkbox"/>	eTimes.08	Transfer of EMS Patient Care Date/Time
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	eTimes.09	Unit Left Scene Date/Time

Element			Element Name
N	S	Number	
N	S	eTimes.11	Patient Arrived at Destination Date/Time
N	S	eTimes.12	Destination Patient Transfer of Care Date/Time
N	S	eTimes.13	Unit Back in Service Date/Time
	S	ePatient.02	Last Name
	S	ePatient.03	First Name
	S	ePatient.04	Middle Initial/Name
	S	ePatient.05	Patient's Home Address
	S	ePatient.06	Patient's Home City
N	S	ePatient.07	Patient's Home County
N	S	ePatient.08	Patient's Home State
N	S	ePatient.09	Patient's Home ZIP Code
	S	ePatient.12	Social Security Number
N	S	ePatient.13	Gender
N	S	ePatient.14	Race
N	S	ePatient.15	Age
N	S	ePatient.16	Age Units
	S	ePatient.17	Date of Birth
	S	ePatient.20	State Issuing Driver's License
	S	ePatient.21	Driver's License Number
	S	ePatient.22	Alternate Home Residence
N	S	ePayment.01	Primary Method of Payment
N	S	ePayment.50	CMS Service Level
N	S	eScene.01	First EMS Unit on Scene
	S	eScene.02	Other EMS or Public Safety Agencies at Scene
	S	eScene.03	Other EMS or Public Safety Agency ID Number
	S	eScene.04	Type of Other Service at Scene
	S	eScene.24	First Other EMS or Public Safety Agency at Scene to Provide Patient Care
	S	eScene.05	Date/Time Initial Responder Arrived on Scene
N	S	eScene.06	Number of Patients at Scene
N	S	eScene.07	Mass Casualty Incident
N	S	eScene.08	Triage Classification for MCI Patient
N	S	eScene.09	Incident Location Type

Element			Element Name
N	S	Number	
	S	eScene.10	Incident Facility Code
	S	eScene.13	Incident Facility or Location Name
	S	eScene.15	Incident Street Address
	S	eScene.16	Incident Apartment, Suite, or Room
	S	eScene.17	Incident City
N	S	eScene.18	Incident State
N	S	eScene.19	Incident ZIP Code
N	S	eScene.21	Incident County
N	S	eSituation.01	Date/Time of Symptom Onset
N	S	eSituation.02	Possible Injury
N	S	eSituation.07	Chief Complaint Anatomic Location
N	S	eSituation.08	Chief Complaint Organ System
N	S	eSituation.09	Primary Symptom
N	S	eSituation.10	Other Associated Symptoms
N	S	eSituation.11	Provider's Primary Impression
N	S	eSituation.12	Provider's Secondary Impressions
N	S	eSituation.13	Initial Patient Acuity
	S	eSituation.19	Justification for Transfer or Encounter
N	S	eSituation.20	Reason for Interfacility Transfer/Medical Transport
N	S	eInjury.03	Trauma Triage Criteria (Steps 1 and 2)
N	S	eInjury.04	Trauma Triage Criteria (Steps 3 and 4)
N	S	eArrest.01	Cardiac Arrest
	S	eHistory.05	Advance Directives
N	S	eHistory.17	Alcohol/Drug Use Indicators
N	S	eVitals.01	Date/Time Vital Signs Taken
N	S	eVitals.02	Obtained Prior to this Unit's EMS Care
N	S	eVitals.03	Cardiac Rhythm / Electrocardiography (ECG)
N	S	eVitals.04	ECG Type
N	S	eVitals.05	Method of ECG Interpretation
N	S	eVitals.06	SBP (Systolic Blood Pressure)
	S	eVitals.07	DBP (Diastolic Blood Pressure)
	S	eVitals.08	Method of Blood Pressure Measurement
N	S	eVitals.10	Heart Rate



Element		Element Name
N	S	Number
N	S	eVitals.12
N	S	eVitals.14
N	S	eVitals.16
N	S	eVitals.18
N	S	eVitals.19
N	S	eVitals.20
N	S	eVitals.21
N	S	eVitals.22
	S	eVitals.23
	S	eVitals.24
N	S	eVitals.26
N	S	eVitals.27
	S	eVitals.28
N	S	eVitals.29
N	S	eVitals.30
N	S	eVitals.31
N	S	eProtocols.01
N	S	eMedications.01
N	S	eMedications.02
N	S	eMedications.03
N	S	eMedications.05
N	S	eMedications.06
N	S	eMedications.07
N	S	eMedications.08
N	S	eMedications.10
N	S	eProcedures.01
N	S	eProcedures.02
N	S	eProcedures.03
N	S	eProcedures.05
N	S	eProcedures.06
N	S	eProcedures.07
N	S	eProcedures.08
N	S	eProcedures.10
		Pulse Oximetry
		Respiratory Rate
		End Tidal Carbon Dioxide (ETCO2)
		Blood Glucose Level
		Glasgow Coma Score-Eye
		Glasgow Coma Score-Verbal
		Glasgow Coma Score-Motor
		Glasgow Coma Score-Qualifier
		Total Glasgow Coma Score
		Temperature
		Level of Responsiveness (AVPU)
		Pain Scale Score
		Pain Scale Type
		Stroke Scale Score
		Stroke Scale Type
		Reperfusion Checklist
		Protocols Used
		Date/Time Medication Administered
		Medication Administered Prior to this Unit's EMS Care
		Medication Administered
		Medication Dosage
		Medication Dosage Units
		Response to Medication
		Medication Complication
		Role/Type of Person Administering Medication
		Date/Time Procedure Performed
		Procedure Performed Prior to this Unit's EMS Care
		Procedure
		Number of Procedure Attempts
		Procedure Successful
		Procedure Complication
		Response to Procedure
		Role/Type of Person Performing the Procedure

Element		Element Name
N	S	Number
	S	eDisposition.01
	S	eDisposition.02
N	S	eDisposition.05
N	S	eDisposition.06
N	S	eDisposition.07
N	S	eDisposition.27
N	S	eDisposition.28
N	S	eDisposition.29
N	S	eDisposition.30
	S	eDisposition.31
N	S	eDisposition.17
N	S	eDisposition.19
N	S	eDisposition.20
N	S	eDisposition.21
N	S	eDisposition.23
N	S	eDisposition.32
N	S	eOutcome.01
N	S	eOutcome.02
N	S	eOutcome.09
N	S	eOutcome.19
N	S	eOutcome.10
N	S	eOutcome.11
N	S	eOutcome.12
N	S	eOutcome.20
N	S	eOutcome.13
N	S	eOutcome.16
N	S	eOutcome.18
		Destination/Transferred To, Name
		Destination/Transferred To, Code
		Destination State
		Destination County
		Destination ZIP Code
		Unit Disposition
		Patient Evaluation/Care
		Crew Disposition
		Transport Disposition
		Reason for Refusal/Release
		Transport Mode from Scene
		Final Patient Acuity
		Reason for Choosing Destination
		Type of Destination
		Hospital Capability
		Level of Care Provided per Protocol
		Emergency Department Disposition
		Hospital Disposition
		Emergency Department Procedures
		Date/Time Emergency Department Procedure Performed
		Emergency Department Diagnosis
		Date/Time of Hospital Admission
		Hospital Procedures
		Date/Time Hospital Procedure Performed
		Hospital Diagnosis
		Date/Time of Hospital Discharge
		Date/Time of Emergency Department Admission

## Overview By Validation Message

- et3\_e001 **Warning** **Transfer of EMS Patient Care Date/Time** should be recorded when **Crew Disposition** is "Initiated Primary Care and Transferred to Another Provider on Scene (non-EMS)" or "... to Telehealth Provider".
- et3\_e002 **Warning** **Last Name** should be recorded when **Patient Evaluation/Care** is "Patient Evaluated and Care Provided".
- et3\_e003 **Warning** **First Name** should be recorded when **Patient Evaluation/Care** is "Patient Evaluated and Care Provided".
- et3\_e004 **Warning** **Date of Birth** should be recorded when **Patient Evaluation/Care** is "Patient Evaluated and Care Provided".
- et3\_e005 **Warning** **Primary Method of Payment** should be recorded when **Crew Disposition** is "Initiated Primary Care and Transferred to Another Provider on Scene (non-EMS)" or "... to Telehealth Provider".
- et3\_e006 **Warning** **Type of Destination** (the type of provider to whom care was transferred) should be recorded when **Crew Disposition** is "Initiated Primary Care and Transferred to Another Provider on Scene (non-EMS)" or "... to Telehealth Provider".
- et3\_e007 **Warning** ET3 Alternative Disposition Offer and Result should be recorded when **Primary Method of Payment** is "Medicare".
- et3\_e008 **Warning** **Type of Destination** (the type of provider to whom care was transferred) should be "Qualified Health Care Partner" when **Crew Disposition** is "Initiated Primary Care and Transferred to Another Provider on Scene (non-EMS)" or "... to Telehealth Provider".
- et3\_e009 **Warning** The correct NEMSIS fallback code should be used when an ET3 custom value is recorded for **Crew Disposition**.
- et3\_e010 **Warning** A custom value permitted by ET3 for **Crew Disposition** should not occur more than once on a PCR.
- et3\_e011 **Warning** The correct NEMSIS fallback code should be used when an ET3 custom value is recorded for **Type of Destination**.
- et3\_e012 **Warning** A custom value permitted by ET3 for **Type of Destination** should not occur more than once on a PCR.
- et3\_e013 **Warning** ET3 Alternative Disposition Offer and Result should be a value permitted by ET3.
-

- et3\_e014 **Warning** ET3 Alternative Disposition Offer and Result should not occur more than once on a PCR.
- et3\_e015 **Warning** Transfer of EMS Patient Care Date/Time should not be earlier than Date/Time Initial Responder Arrived on Scene.
- et3\_e016 **Warning** Transfer of EMS Patient Care Date/Time should not be earlier than Date/Time of Symptom Onset.
- et3\_e017 **Warning** Transfer of EMS Patient Care Date/Time should not be earlier than Unit Notified by Dispatch Date/Time.
- et3\_e018 **Warning** Transfer of EMS Patient Care Date/Time should not be earlier than Unit En Route Date/Time.
- et3\_e019 **Warning** Transfer of EMS Patient Care Date/Time should not be earlier than Unit Arrived on Scene Date/Time.
- et3\_e020 **Warning** Transfer of EMS Patient Care Date/Time should not be earlier than Arrived at Patient Date/Time.
- et3\_e021 **Warning** Unit Back in Service Date/Time should not be earlier than Transfer of EMS Patient Care Date/Time.
- et3\_e022 **Warning** Date/Time Medication Administered should not be later than Transfer of EMS Patient Care Date/Time.
- et3\_e023 **Warning** Date/Time Procedure Performed should not be later than Transfer of EMS Patient Care Date/Time.
- et3\_e024 **Warning** Date/Time Vital Signs Taken should not be later than Transfer of EMS Patient Care Date/Time.

## Appendix D: ET3 Model Scenarios for NEMSIS v3.5.0 ePCRs – NEMSIS TAC and CMMI

The ET3 Model Scenarios for NEMSIS v3.5.0 ePCRs can be found online at [https://stash.utahdcc.org/stash/projects/NES/repos/et3-project/raw/Resources/ET3\\_CustomDispositions.pdf?at=refs%2Fheads%2Frelease-3.5.0](https://stash.utahdcc.org/stash/projects/NES/repos/et3-project/raw/Resources/ET3_CustomDispositions.pdf?at=refs%2Fheads%2Frelease-3.5.0).

# ET3 Dispositions for NEMSIS 3.5

Published May 10, 2021 (DRAFT)

Developed by CMMI and the NEMSIS TAC

## Guidelines

These guidelines do not constitute billing guidance. Billing is mentioned in order to assist EMS agencies to document ePCR data in a manner that is compatible with accurate billing.

The term “alternative disposition” used in this document is synonymous with the term “ET3 intervention” used by in ET3 Model communications.

These guidelines cover how to appropriately record the various ET3 scenarios of treatment and transport alternative dispositions within the NEMSIS version 3.5.0 standard, including the ET3 custom elements and values. NEMSIS data prior to version 3.4.0 will not be accepted by CMS. A version of this guidance for NEMSIS version 3.4.0 is provided separately. These general guidelines are followed by specific scenario examples.

### 1. ET3 is for low-acuity 9-1-1 fee-for-service Medicare transports

The purpose of the ET3 Model is to test whether paying for (1) Transport to an Alternative Destination and (2) Treatment-in-Place, each furnished to low-acuity Medicare fee-for-service (FFS) beneficiaries following a 9-1-1 call, will reduce avoidable transports of Medicare FFS beneficiaries to emergency departments and/or utilization of other Covered Services. (Note: please see page 1 of the ET3 Participation Agreement for further information.)

### 2. If multiple ET3 alternative dispositions occurred, record the final disposition

If the EMS agency provides multiple ET3 alternative dispositions during an incident, then EMS records the final disposition of the incident. For example, if treatment-in-place was used but the patient was also transported, the EMS agency records (and bills) the incident as a transport. The fact that treatment-in-place occurred has no impact on the EMS agency’s billing for the incident.

### 3. ET3 collects whether alternative dispositions were offered and accepted, but not details about the offer and acceptance of each alternative

An EMS agency may offer multiple ET3 alternative dispositions during an incident, and patient may refuse one alternative but accept another. If any alternative disposition was accepted by the patient (even if the final disposition of the incident is a standard hospital transport), the EMS agency will record that an ET3 alternative disposition was offered and accepted by the patient. ET3 does not collect details specifically about which alternatives were offered and which were accepted. This approach minimizes the additional burden on EMS personnel for completing extra data elements on their calls.

### 4. The ET3 model only affects *whether* an incident is billable, not the billable amount

Under standard CMS policy, EMS agencies would not be able to bill for transport to a non-hospital destination or for facilitating treatment-in-place. ET3 makes those incidents billable, but the amount of the bill is unaffected by ET3: the bill includes the standard CMS base rate plus mileage (if a transport occurred).

## Transport to Alternative Destination (TAD)

An EMS agency transports the patient to an alternative destination (not a hospital) approved by CMS. Within ET3, the incident is billable using the base rate plus mileage.

### [eTimes.11](#) - Patient Arrived at Destination Date/Time

The date/time the EMS unit arrived with the patient at the alternative destination

### [eTimes.12](#) - Destination Patient Transfer of Care Date/Time

The date/time that patient care was transferred to the alternative destination healthcare staff

### [eDisposition.01](#) – Destination/Transferred To, Name

The name of the alternative destination

### [eDisposition.02](#) – Destination/Transferred To, Code

The state- or agency-assigned code of the alternative destination

### [eDisposition.21](#) – Type of Destination

4221007 Clinic  
4221021 Urgent Care  
4221031 Mental Health Facility  
4221039 Drug and/or Alcohol Rehabilitation Facility  
4221901 Federally Qualified Health Center (*custom value*)  
4221903 Rural Health Clinic (*custom value*)

### [eDisposition.27 - Unit Disposition](#)

[4227001 Patient Contact Made](#)

### [eDisposition.28 - Patient Evaluation/Care](#)

[4228001 Patient Evaluated and Care Provided](#)

### [eDisposition.29 - Crew Disposition](#)

[4229001 Initiated and Continued Primary Care](#)

### [eDisposition.30 - Transport Disposition](#)

[4230001 Transport by This EMS Unit \(This Crew Only\)](#)  
[4230003 Transport by This EMS Unit, with a Member of Another Crew](#)  
[4230007 Transport by Another EMS Unit, with a Member of This Crew](#)

### [et3Disposition.01](#) – ET3 Alternative Disposition Offer and Result (*custom element*)

*et3Disposition.01.02* Alternative Disposition Offered, Accepted by Patient



## Treatment-in-Place (TIP)

An EMS agency transfers care of the patient to a Qualified Health Care Partner (non-EMS) approved by CMS, with the partner either responding to the scene in-person or providing care via telehealth. Within ET3, the incident is billable using the base rate with no mileage.

### [eTimes.08](#) - Transfer of EMS Patient Care Date/Time

The date/time that patient care was transferred to the partner (i.e., when the partner began providing care)

### [eDisposition.01](#) – Destination/Transferred To, Name

The name of the partner

### [eDisposition.02](#) – Destination/Transferred To, Code

The state- or agency-assigned code of the partner

### [eDisposition.21](#) – Type of Destination

[4221902](#) Qualified Health Care Partner (*custom value*)

### [eDisposition.27](#) - Unit Disposition

[4227001](#) Patient Contact Made

### [eDisposition.28](#) - Patient Evaluation/Care

[4228001](#) Patient Evaluated and Care Provided

### [eDisposition.29](#) - Crew Disposition

[4229901](#) Initiated Primary Care and Transferred to Another Provider on Scene (non-EMS) (*custom value*)

[4229902](#) Initiated Primary Care and Transferred to Telehealth Provider (*custom value*)

### [eDisposition.30](#) - Transport Disposition

[4230013](#) No Transport

### [et3Disposition.01](#) – ET3 Alternative Disposition Offer and Result (*custom element*)

[et3Disposition.01.02](#) Alternative Disposition Offered, Accepted by Patient

## Additional Scenarios

### Treatment-in-Place (TIP) Followed by Transport to an Alternative Destination (TAD)

An EMS agency attempts to transfer care of patient to a Qualified Health Care Partner (non-EMS), either on scene or via telehealth, but the partner instructs EMS to retain care of the patient and transport the patient to an alternative destination approved by CMS, or the patient requests such transport, or EMS determines after treatment-in-place begins that it is necessary to transport due to patient condition. The incident is billable as an ET3 alternative destination using the base rate plus mileage.

This scenario is documented the same way as the Transport to Alternative Destination (TAD) scenario.

### Treatment-in-Place (TIP) Followed by Transport to a Hospital

An EMS agency attempts to transfer care of the patient to a Qualified Health Care Partner (non-EMS), either on scene or via telehealth, but the partner instructs EMS to retain care of the patient and transport the patient to a hospital, or the patient requests such transport, or EMS determines after treatment-in-place begins that it is necessary to transport due to patient condition. The incident is billable as a standard hospital transport using the base rate plus mileage.

This scenario is documented the same way as a standard non-ET3 transport, except with the following additional information recorded:

#### et3Disposition.01 - ET3 Alternative Disposition Offer and Result (*custom element*)

*et3Disposition.01.02 Alternative Disposition Offered, Accepted by Patient (if the partner requested the transport)*

*et3Disposition.01.03 Alternative Disposition Offered, Refused by Patient (if the patient requested the transport)*

### Treatment-in-Place (TIP) Offered, Refused by Patient, Transport to Hospital

An EMS agency offers a treatment-in-place alternative to the patient, but the patient refuses it. EMS transports the patient to a hospital. The incident is billable as a standard hospital transport using the base rate plus mileage.

This scenario is documented the same way as a standard non-ET3 transport, except with the following additional information recorded:

#### et3Disposition.01 - ET3 Alternative Disposition Offer and Result (*custom element*)

*et3Disposition.01.03 Alternative Disposition Offered, Refused by Patient*

### Treatment-in-Place Offered (TIP), Refused by Patient, Transport to Alternative Destination (TAD)

An EMS agency offers a treatment-in-place alternative to the patient, but the patient refuses it. EMS offers an alternative destination transport to the patient, and the patient accepts it. EMS transports the patient to an alternative destination. The incident is billable as an ET3 Transport to Alternative Destination using the base rate plus mileage.

This scenario is documented the same way as the Transport to Alternative Destination (TAD) scenario.



### Transport to Alternative Destination (TAD) Offered, Refused by Patient, Treatment in Place (TIP)

An EMS agency offers transport to an alternative destination, but the patient refuses it. EMS offers a treatment-in-place alternative to the patient, and the patient accepts it. Treatment-in-place is performed and the EMS agency does not transport the patient. The incident is billable as an ET3 treatment-in-place using the base rate with no mileage.

This scenario is documented the same way as the Treatment-in-Place (TIP) scenario.

### Transport to Alternative Destination (TAD) Offered, Refused by Patient, Transport to Hospital

An EMS agency offers a transport to an alternative destination to the patient, but the patient refuses it. EMS transports the patient to a hospital. The incident is billable as a standard hospital transport using the base rate plus mileage.

This scenario is documented the same way as a standard non-ET3 transport, except with the following additional information recorded:

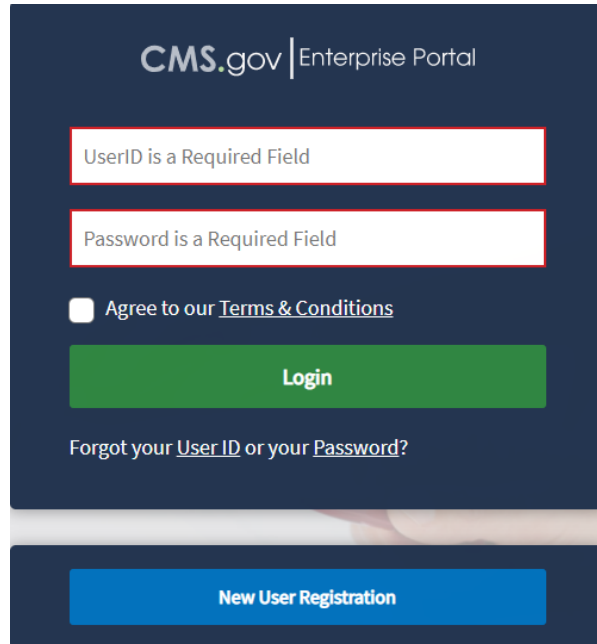
[et3Disposition.01](#) - ET3 Alternative Disposition Offer and Result (*custom element*)

*et3Disposition.01.03* Alternative Disposition Offered, Refused by Patient

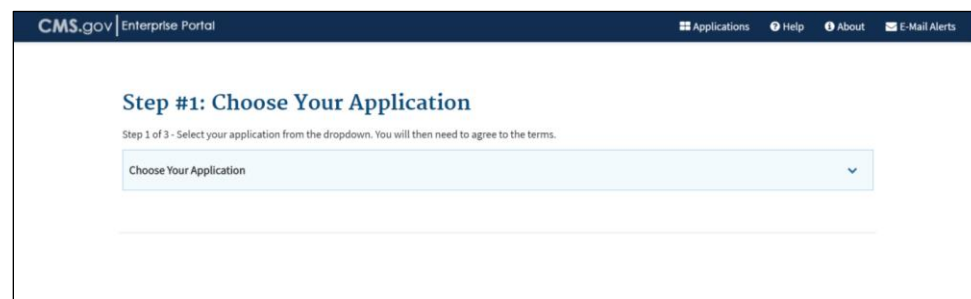
## Appendix E: Excerpts of User Manuals for Innovation Center (IC) Portal and CDX – CMMI

Before accessing the CMS ePortal (<https://portal.cms.gov/>), you will need to create a user ID and password by completing the Enterprise Identify Management (EIDM) user registration process.

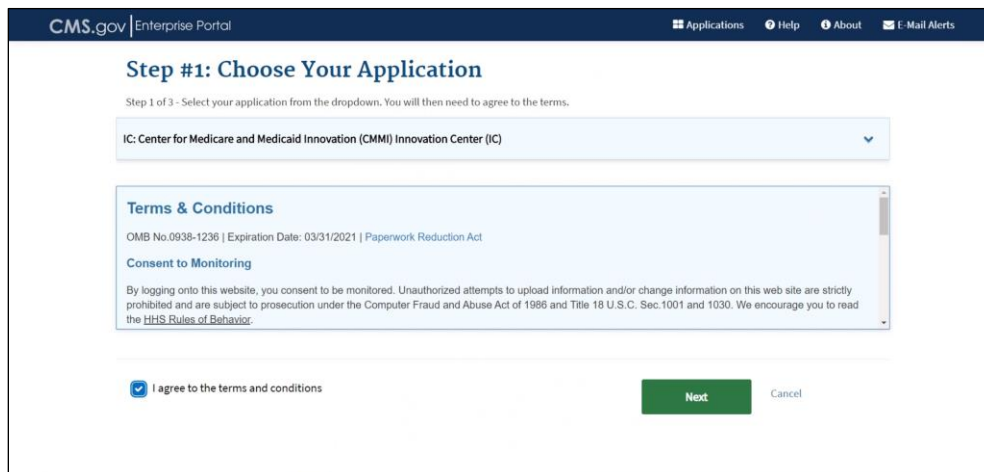
Go to <https://portal.cms.gov/> and click on **New User Registration**.



1. On the **Choose Your Application** page, select your application from the **Choose Your Application** drop-down.

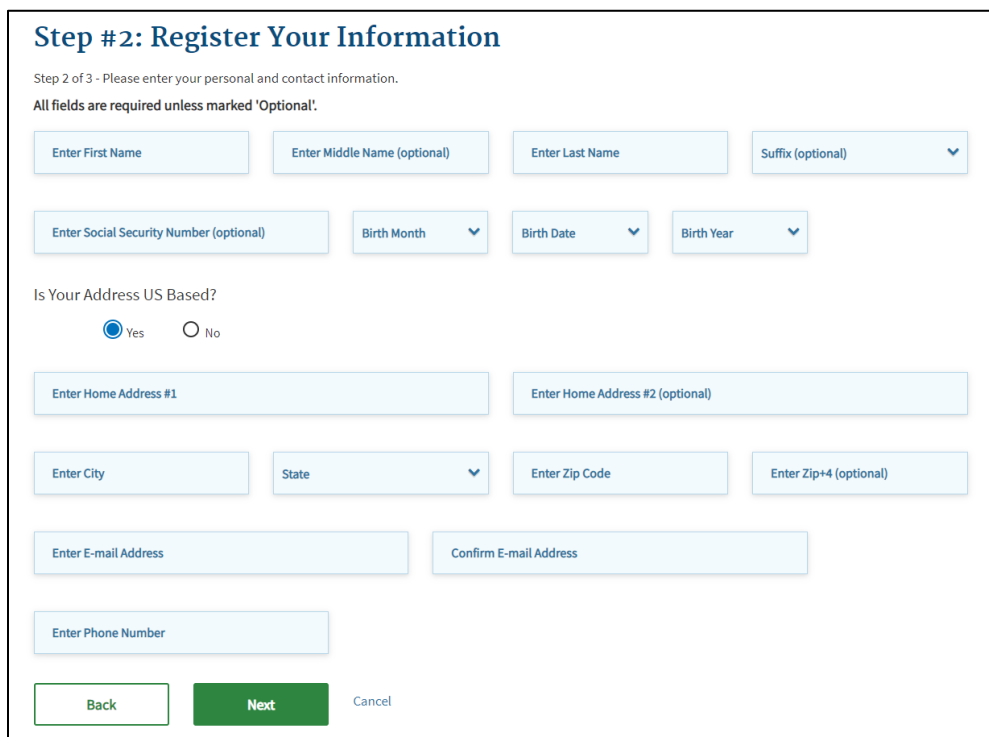


2. Select **IC: CMS Innovation Center (IC)** and acknowledge you have read the terms and conditions by clicking the box indicating **"I agree to the terms and conditions."**



The screenshot shows the 'Step #1: Choose Your Application' page. At the top, it says 'Step 1 of 3 - Select your application from the dropdown. You will then need to agree to the terms.' Below this is a dropdown menu with 'IC: Center for Medicare and Medicaid Innovation (CMMI) Innovation Center (IC)' selected. Underneath is a 'Terms & Conditions' section with a scrollable area containing text about OMB No. 0938-1236, expiration date, and consent to monitoring. At the bottom, there is a checkbox labeled 'I agree to the terms and conditions' which is checked, and two buttons: 'Next' and 'Cancel'.

3. On the **Register Your Information** page, fill out the page with your personal information.



The screenshot shows the 'Step #2: Register Your Information' page. It says 'Step 2 of 3 - Please enter your personal and contact information.' and 'All fields are required unless marked 'Optional''. The form contains several input fields: 'Enter First Name', 'Enter Middle Name (optional)', 'Enter Last Name', 'Suffix (optional)' (dropdown), 'Enter Social Security Number (optional)', 'Birth Month' (dropdown), 'Birth Date' (dropdown), 'Birth Year' (dropdown), 'Is Your Address US Based?' (radio buttons for Yes/No), 'Enter Home Address #1', 'Enter Home Address #2 (optional)', 'Enter City', 'State' (dropdown), 'Enter Zip Code', 'Enter Zip+4 (optional)', 'Enter E-mail Address', 'Confirm E-mail Address', and 'Enter Phone Number'. At the bottom are 'Back', 'Next', and 'Cancel' buttons.

4. On the **Create User ID, Password & Challenge Questions** page, fill out the page with your chosen CMS access credentials.

### Step #3: Create User ID, Password & Challenge Questions

Step 3 of 3 - Please create User ID and Password, Select Challenge questions and provide answers.

User ID  
health123

Password  
\*\*\*\*\*

Confirm Password  
\*\*\*\*\*

Select Challenge Question #1

Enter Challenge Question #1 Answer

Select Challenge Question #2

Enter Challenge Question #2 Answer

Select Challenge Question #3

Enter Challenge Question #3 Answer

Back

Next

Cancel

5. Review the **Registration Summary** page to ensure your choices and personal information are accurate.

### Registration Summary

Please review your information and make any necessary changes before submitting.

IC: Center for Medicare and Medicaid Innovation (CMMI) Innovation Center (IC) ▼

All fields are required unless marked 'Optional'.

First Name Joe	Enter Middle Name (optional)	Last Name Smith	Suffix (optional) ▼
-------------------	------------------------------	--------------------	---------------------

Enter Social Security Number (optional)	Birth Month January ▼	Birth Date 1 ▼	Birth Year 2000 ▼
---	--------------------------	-------------------	----------------------

Home Address #1 123 Mockingbird Ln	Enter Home Address #2 (optional)
---------------------------------------	----------------------------------

City Seattle	State Washington ▼	Zip Code 33344	Enter Zip+4 (optional)
-----------------	-----------------------	-------------------	------------------------

E-mail Address healthon@hotmail.com	Confirm E-mail Address healthon@hotmail.com
--	--

Phone Number  
444-222-3432

---

User ID  
health123

Password *****	Confirm Password *****
-------------------	---------------------------

What is your favorite radio station? ▼	Challenge Question #1 Answer wdas
In what city was your mother born? ▼	Challenge Question #2 Answer Dallas
What is the name of your favorite childhood friend? ▼	Challenge Question #3 Answer Jimmy

Submit User

Cancel

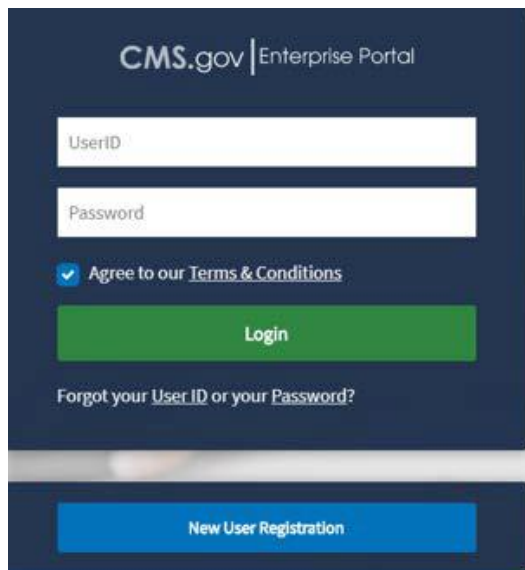
6. Click on the “Submit User” button located at the bottom of the page.

Once you have successfully completed EIDM registration, you may log in to the ePortal and request an Innovation Center (IC) Application role. To request an IC Application role, you must successfully complete the Remote Identity Proofing (RIDP) process and register your Multi-Factor Authentication (MFA) device. Once your IC Application user role request is approved, you may request access to the CMMI CDX Application.



To request access, please complete the following steps.

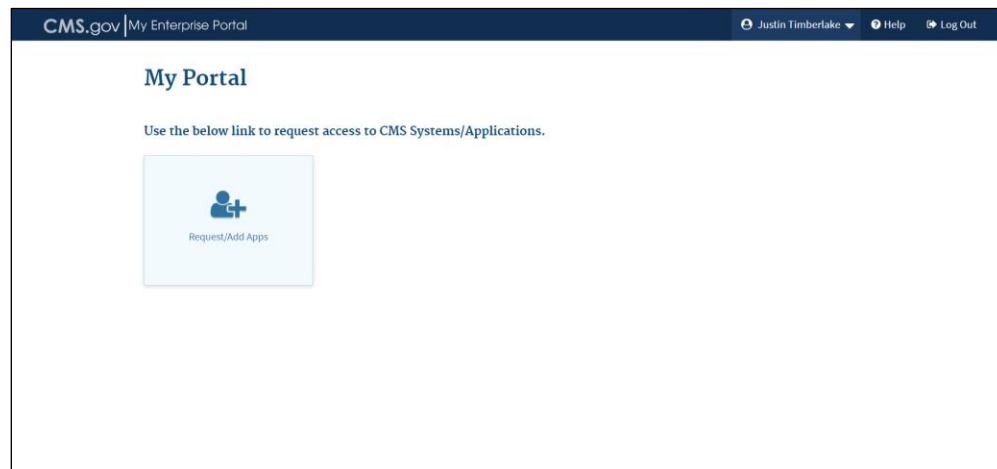
1. Go to <https://portal.cms.gov/> and log in using your credentials and security code.



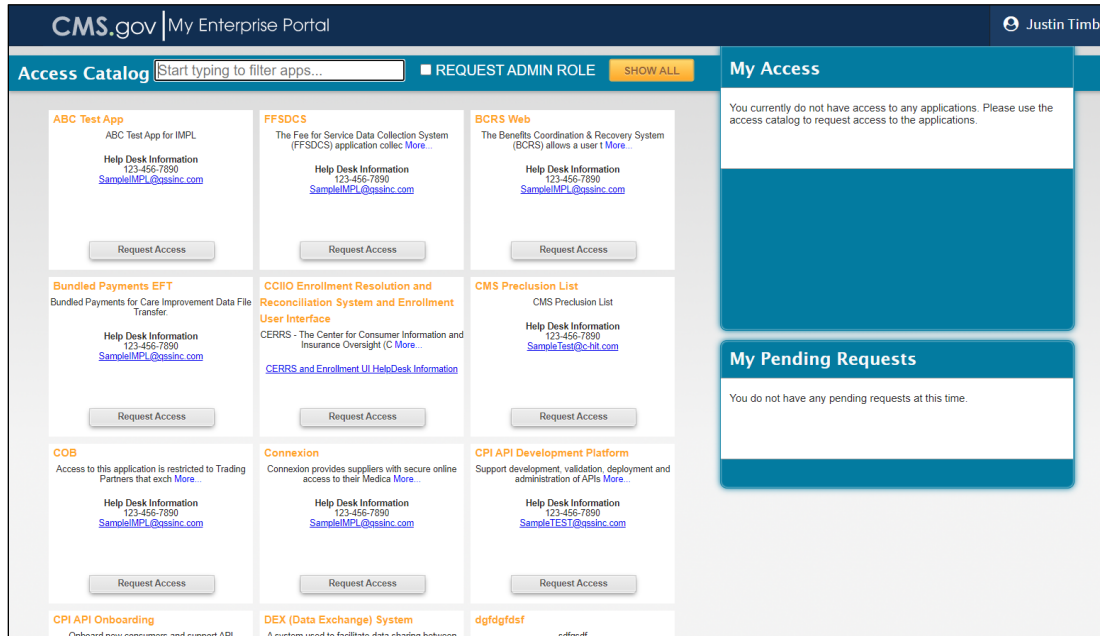
The image shows the login page of the CMS.gov Enterprise Portal. It has a dark blue header with the CMS.gov logo and 'Enterprise Portal' text. Below the header are two white input fields for 'UserID' and 'Password'. A checkbox labeled 'Agree to our Terms & Conditions' is checked. A green 'Login' button is below the fields. Below the button is a link 'Forgot your User ID or your Password?'. At the bottom of the form is a blue button labeled 'New User Registration'.

2. Access the catalog by:

- Selecting the **My Access** option from the Welcome drop-down list in the top navigation bar, or
- Clicking the **Request/Add Apps** tile on the **My Portal** page.



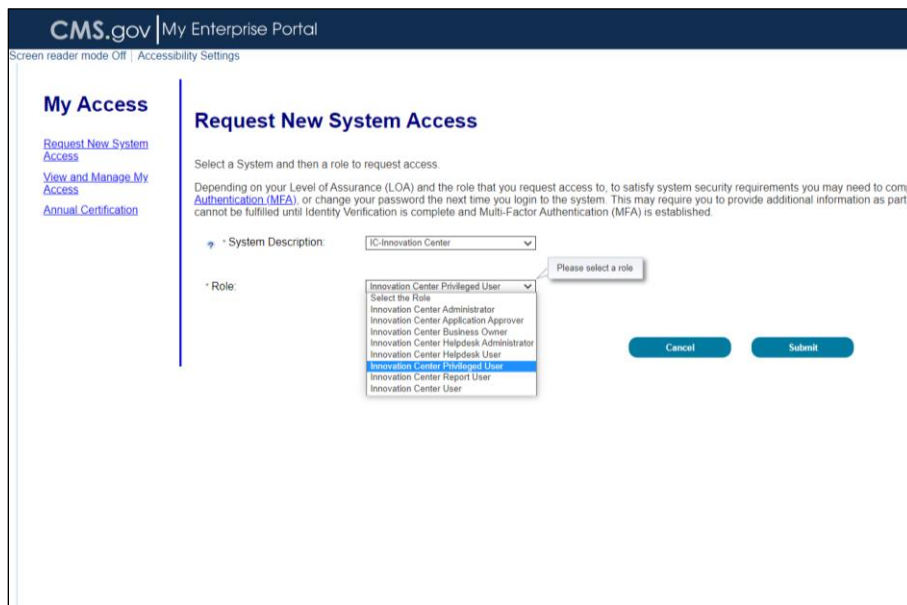
- A set of CMS systems will appear in tiles:
  - Look for the system tile called “Innovation Center (IC), or
  - Enter “IC” into the filter field to find the tile.



The screenshot shows the CMS.gov My Enterprise Portal. At the top, there's a search bar for the Access Catalog and a role selector set to 'REQUEST ADMIN ROLE'. Below this, a grid of application tiles is displayed, each with a title, description, help desk information, and a 'Request Access' button. The tiles include: ABC Test App, FFSDCS, BCRS Web, Bundled Payments EFT, CCIIO Enrollment Resolution and Reconciliation System and Enrollment User Interface, CMS Preclusion List, COB, Connexion, CPI API Development Platform, CPI API Onboarding, DEX (Data Exchange) System, and dgfdgdfsf. On the right side, there are two panels: 'My Access' which states 'You currently do not have access to any applications...' and 'My Pending Requests' which states 'You do not have any pending requests at this time.'

Click on the **Request Access** button for the IC tile.

- Select **Innovation Center Privileged User** from the **Role** drop down menu.



The screenshot shows the 'Request New System Access' form. On the left, there's a 'My Access' sidebar with links for 'Request New System Access', 'View and Manage My Access', and 'Annual Certification'. The main form area has a 'System Description' dropdown set to 'IC-Innovation Center'. Below it, the 'Role' dropdown is open, showing a list of roles: 'Innovation Center Privileged User', 'Innovation Center Administrator', 'Innovation Center Application Approver', 'Innovation Center Business Owner', 'Innovation Center Helpdesk Administrator', 'Innovation Center Helpdesk User', 'Innovation Center Privileged User' (highlighted), 'Innovation Center Report User', and 'Innovation Center User'. There are 'Cancel' and 'Submit' buttons at the bottom right.

Click the **Submit** button.

## Remote Identity Proofing (RIDP)

CMS uses the **Experian identity verification system** (Experian) to remotely perform identity proofing. Experian is used by CMS to confirm your identity when you need to access a protected CMS Computer System.

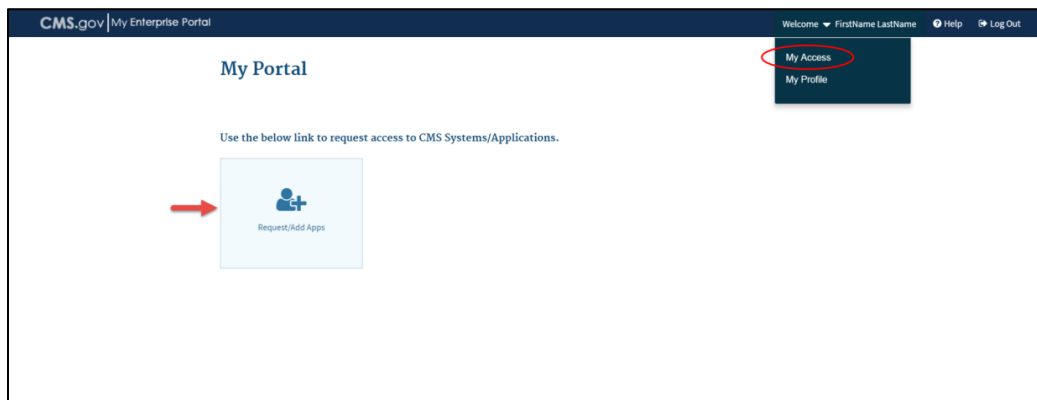
The following data elements are requested from users:

- Full Legal Name
- Social Security Number (SSN)
- Date of Birth
- Current Residential Address
- Personal Telephone Number

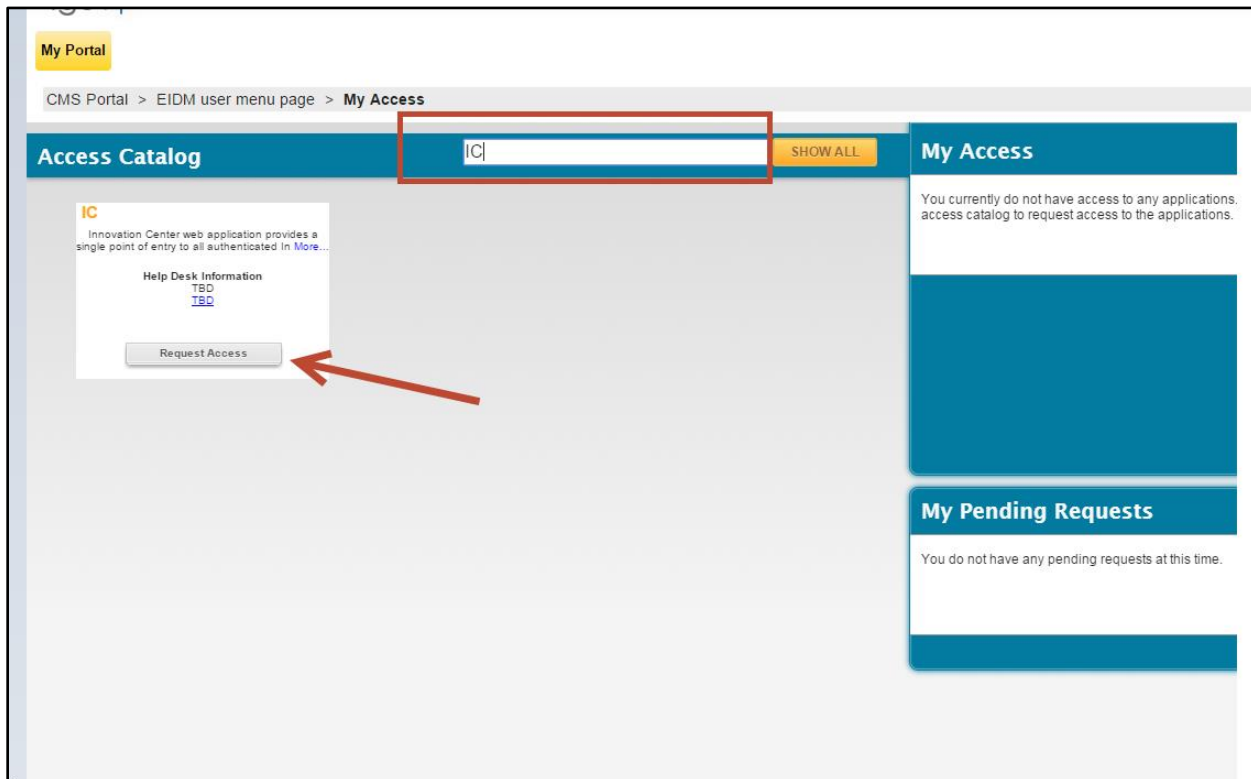
CMS does not store your personal information; CMS only passes it to Experian to help confirm your identity. Your SSN will be validated with Experian only for the purpose of verifying your identity.

To complete the RIDP process, please complete the following steps.

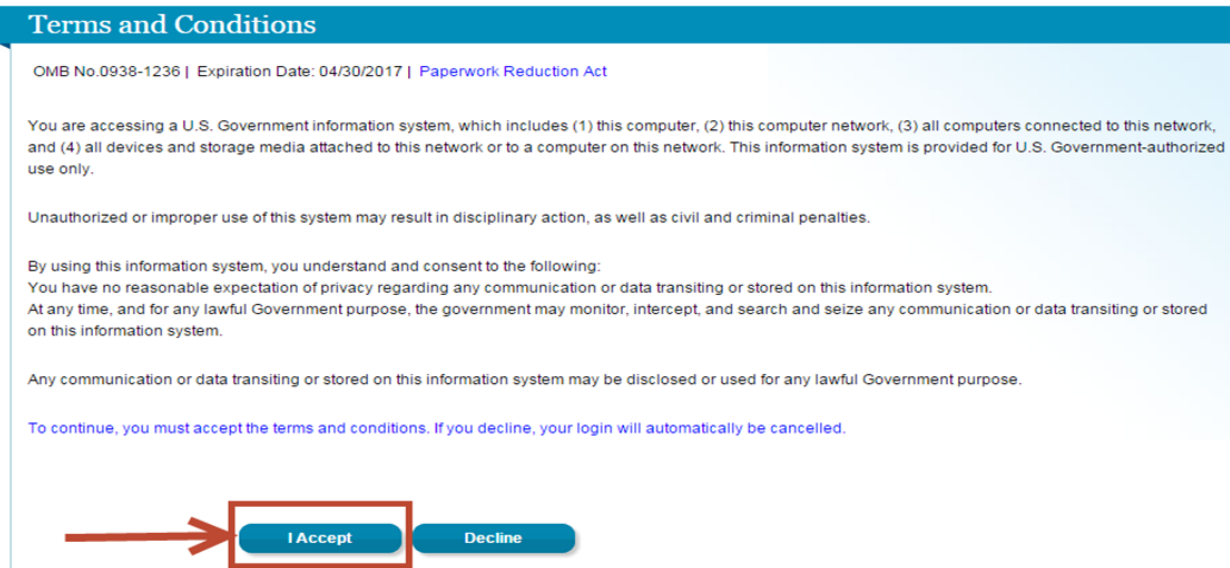
1. On the CMS Enterprise Portal Main Page, click on **Request/Add Apps** tile on the My Portal page or My Access option from the Welcome drop-down list.



2. The application Access Catalog displays all CMS applications that use EIDM services. Type “IC” in the search box and press “Enter” to find the IC application.



3. Read and accept or decline the “Terms and Conditions” by clicking the appropriate I **Accept** or **Decline** option.



Depending on your Level of Assurance (LOA) and the role that you request access to, you may need to complete the Identity Verification; establish credentials for MFA, and change your password the next time you log in to the system.

1. Fill out the initial “Request New System Access” form.

**My Access**

[Request New System Access](#)

[View and Manage My Access](#)

### Request New System Access

Select a System and then a role to request access.

Depending on your Level of Assurance (LOA) and the role that you request access to, to satisfy system security requirements you may need to complete [Identity Verification](#), establish credentials for [Multi-Factor Authentication \(MFA\)](#), or change your password the next time you login to the system. This may require you to provide additional information as part of the role request process. If applicable, please note that your request cannot be fulfilled until Identity Verification is complete and Multi-Factor Authentication (MFA) is established.

System Description:

Role:

Notes to the Approver:

When adding notes to the approver, you are allowed to use letters, numbers and the following special characters - Hyphen (-), comma (,), underscore (\_), apostrophe ('), period (.)

Click **Submit**.

2. Verify and confirm that your personal information on the “Your Information” screen is correct and click the “Next” button.

### My Access

[Request New System Access](#)

[View and Manage My Access](#)

Your Information

Verify Your Identity

## Your Information

Enter your legal first name and last name, as it may be required for Identity Verification.

\* First Name:

Middle Name:

\* Last Name:

Suffix:

---

Enter your E-mail address, as it will be used for account related communications.

\* E-mail Address:

Re-enter your E-mail address.

\* Confirm E-mail Address:

---

Enter your full 9 digit Social Security Number, as it may be required for Identity Verification.

Social Security Number:

---

Enter your date of birth in MM/DD/YYYY format, as it may be required for Identity Verification.

\* Date of Birth:

☒ U.S. Home Address
 ☐ Foreign address

Enter your current or most recent home address, as it may be required for Identity Verification.

\* Home Address Line 1:

Home Address Line 2:

\* City:

\* State:

\* Zip Code:

Zip Code Extension:

Country:

3. Enter the required information for MFA on the “Verify Identity” screen and click the “Next” button.

Screen reader mode Off | Accessibility Settings

### My Access

[Request New System Access](#)  
[View and Manage My Access](#)

Your Information **Verify Your Identity**

#### Verify Identity

You may have opened an auto loan in or around December 2013. Please select the lender for this account. If you do not have such an auto loan, select 'NONE OF THE ABOVE/DOES NOT APPLY'.

☐ TOYOTA MOTOR CREDIT  
☐ BMW FINANCIAL SERVICES  
☐ HSBC BANK USA  
☐ MB FIN SVCS  
☐ NONE OF THE ABOVE/DOES NOT APPLY

Please select the term of your auto loan (in months) from the following choices. If your auto loan or auto lease term is not one of the choices please select 'NONE OF THE ABOVE'.

☐ 24  
☐ 36  
☐ 48  
☐ 60  
☐ NONE OF THE ABOVE/DOES NOT APPLY

You may have opened a (WFFNATBANK) credit card. Please select the year in which your account was opened.

☐ 2008  
☐ 2010  
☐ 2012  
☐ 2014  
☐ NONE OF THE ABOVE/DOES NOT APPLY

Which of the following institutions do you have a bank account with? If there is not a matched bank name, please select 'NONE OF THE ABOVE'.

☐ LINCOLN SAVINGS BANK  
☐ HOMETOWN BANK  
☐ MERIDIAN TRUST FEDERAL CREDIT UNION  
☐ FARMER'S DEPOSIT BANK  
☐ NONE OF THE ABOVE/DOES NOT APPLY

Which of the following is a current or previous employer? If there is not a matched employer name, please select 'NONE OF THE ABOVE'.

☐ HEALTHCARE ACADEMY  
☐ NORTH AMERICAN COMMUNICATION  
☐ UPS  
☐ SEARS  
☐ NONE OF THE ABOVE/DOES NOT APPLY

4. Click the “Next” button on the “Complete Set Up” screen.

CMS Portal > EIDM User Menu > **My Access**

Screen reader mode Off | Accessibility Settings

### My Access

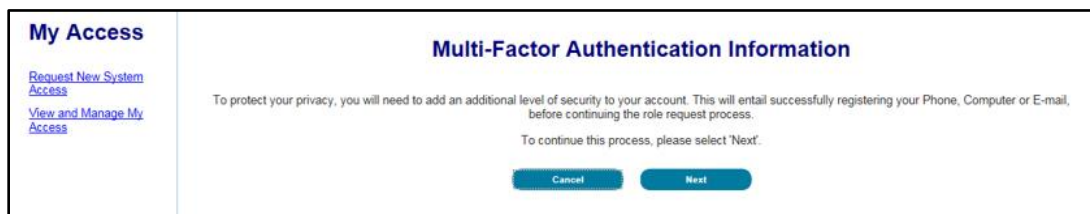
[Request New System Access](#)  
[View and Manage My Access](#)

## Complete Step Up

You have successfully completed the Remote Identity Proofing process.

**MFA Information.** You will need to add an additional level of security to your user account.

1. Click the **“Next”** button to continue the MFA process.



**My Access**

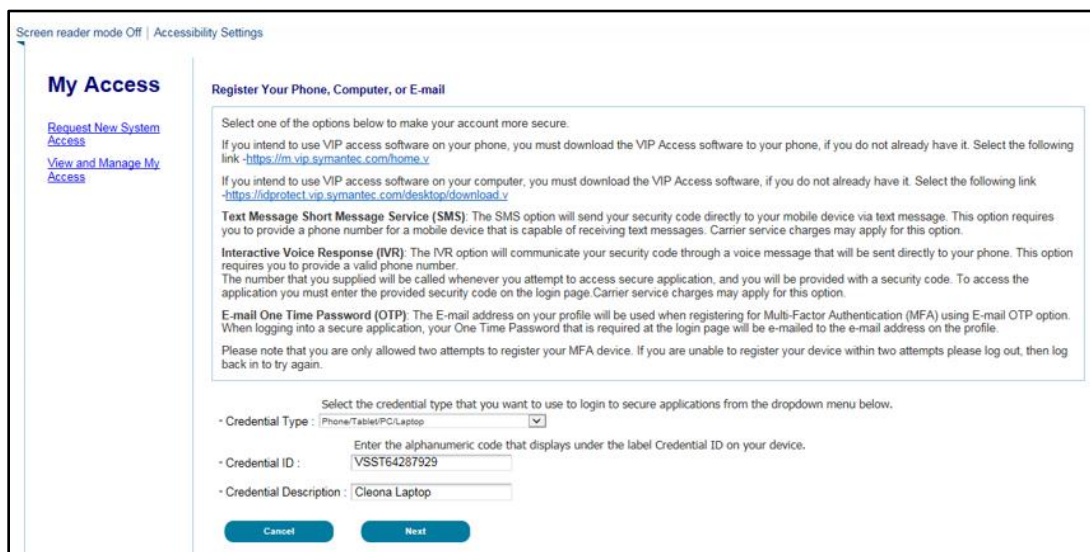
[Request New System Access](#)  
[View and Manage My Access](#)

**Multi-Factor Authentication Information**

To protect your privacy, you will need to add an additional level of security to your account. This will entail successfully registering your Phone, Computer or E-mail, before continuing the role request process.

To continue this process, please select 'Next'.

2. You have the option to receive the MFA security code via Smart Phone/Computer, Short Message Service (SMS), Interactive Voice Response (IVR), or email by providing the applicable information on the **“Register Your Phone, Computer, or Email”** screen.



Screen reader mode Off | Accessibility Settings

**My Access**

[Request New System Access](#)  
[View and Manage My Access](#)

**Register Your Phone, Computer, or E-mail**

Select one of the options below to make your account more secure.

If you intend to use VIP access software on your phone, you must download the VIP Access software to your phone, if you do not already have it. Select the following link -<https://m.vip.symantec.com/home.v>

If you intend to use VIP access software on your computer, you must download the VIP Access software, if you do not already have it. Select the following link -<https://dprotect.vip.symantec.com/desktop/download.v>

**Text Message Short Message Service (SMS):** The SMS option will send your security code directly to your mobile device via text message. This option requires you to provide a phone number for a mobile device that is capable of receiving text messages. Carrier service charges may apply for this option.

**Interactive Voice Response (IVR):** The IVR option will communicate your security code through a voice message that will be sent directly to your phone. This option requires you to provide a valid phone number.

The number that you supplied will be called whenever you attempt to access secure application, and you will be provided with a security code. To access the application you must enter the provided security code on the login page. Carrier service charges may apply for this option.

**E-mail One Time Password (OTP):** The E-mail address on your profile will be used when registering for Multi-Factor Authentication (MFA) using E-mail OTP option. When logging into a secure application, your One Time Password that is required at the login page will be e-mailed to the e-mail address on the profile.

Please note that you are only allowed two attempts to register your MFA device. If you are unable to register your device within two attempts please log out, then log back in to try again.

Select the credential type that you want to use to login to secure applications from the dropdown menu below.

- Credential Type :

Enter the alphanumeric code that displays under the label Credential ID on your device.

- Credential ID :

- Credential Description :

**SMART PHONE / COMPUTER:** You will need to download the Symantec VIP Access software on your smart phone or computer. This installation will require you to navigate to another screen, then return to the MFA screen to complete the process.

Once VIP Access has been downloaded/installed successfully, launch the application. Enter the alphanumeric Credential ID that is generated by the VIP Access client, credential description, and click Next.

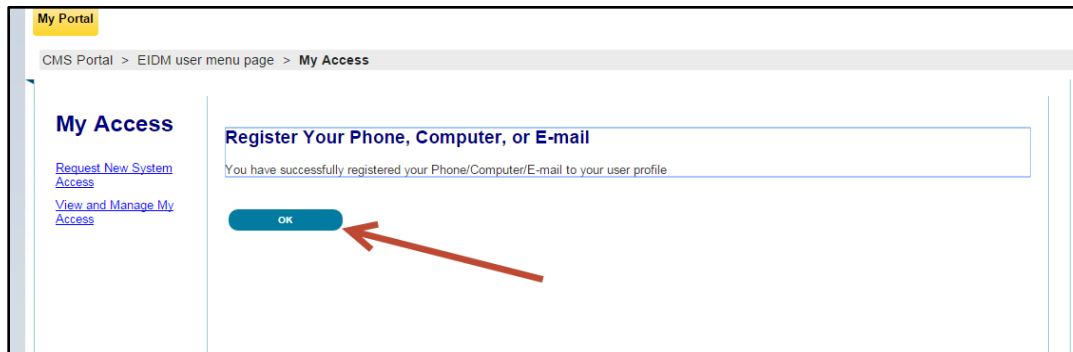
**TEXT MESSAGE (SMS):** Use the SMS option to have the Security Code sent by text to your mobile phone. Enter a valid phone number capable of receive text messages, credential description, and click Next.

**INTERACTIVE VOICE RESPONSE (IVR):** Use the IVR option to receive a voice message containing the Security Code. Enter a valid phone number and (optional) phone extension, credential description, and click Next.

**E-MAIL:** Use the email option to receive an email containing the Security Code required to login. The system uses the email address in your user profile. Click Next.



3. Complete registration by clicking “OK.”

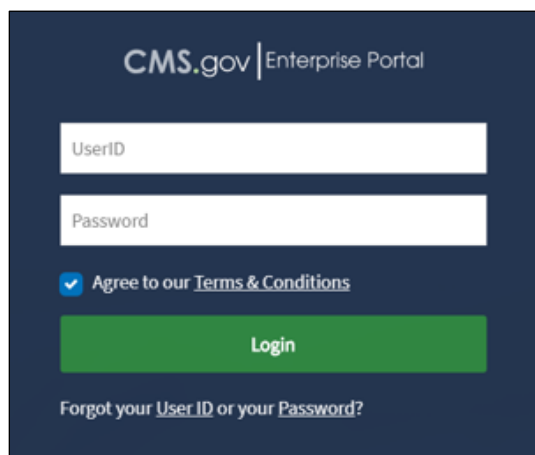


You now have finished the RIDP and MFA process.

## SUBMIT ROLE REQUEST FOR ACCESSING CENTRALIZED DATA EXCHANGE (CDX) APPLICATION

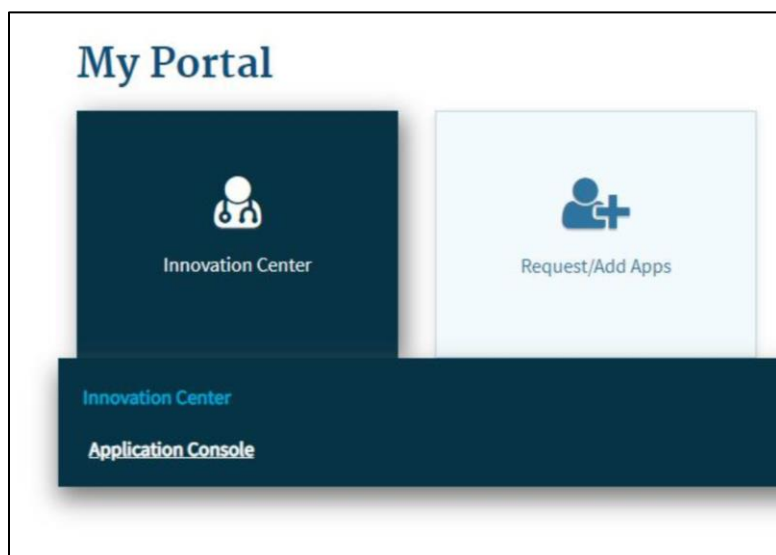
To submit a role request for accessing the CDX application, please complete the following steps.

1. Go to <https://portal.cms.gov/> and log in using your credentials and security code.



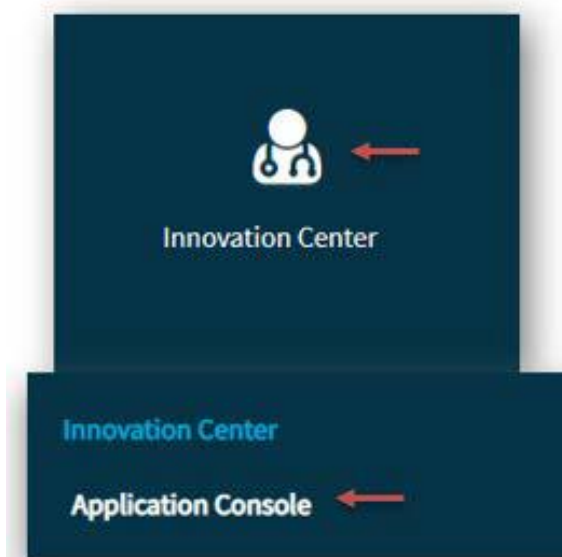
The screenshot shows the CMS.gov Enterprise Portal login interface. It features a dark blue background with the CMS.gov logo and 'Enterprise Portal' text at the top. Below the logo are two white input fields for 'UserID' and 'Password'. A checkbox labeled 'Agree to our Terms & Conditions' is checked. A green 'Login' button is positioned below the fields. At the bottom, there is a link that says 'Forgot your User ID or your Password?'.

2. Click on the Innovation Center button, then click on “Application Console.”

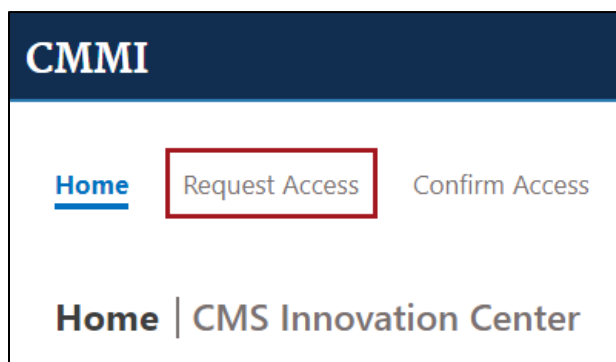


3. On the My Portal page, select the **Innovation Center** widget and then select the **Application Console** link.

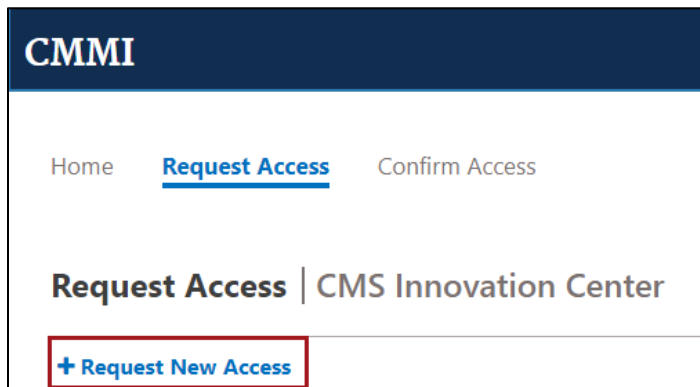
## My Portal



4. Select **Request Access** and you will be directed to a new screen to request access.



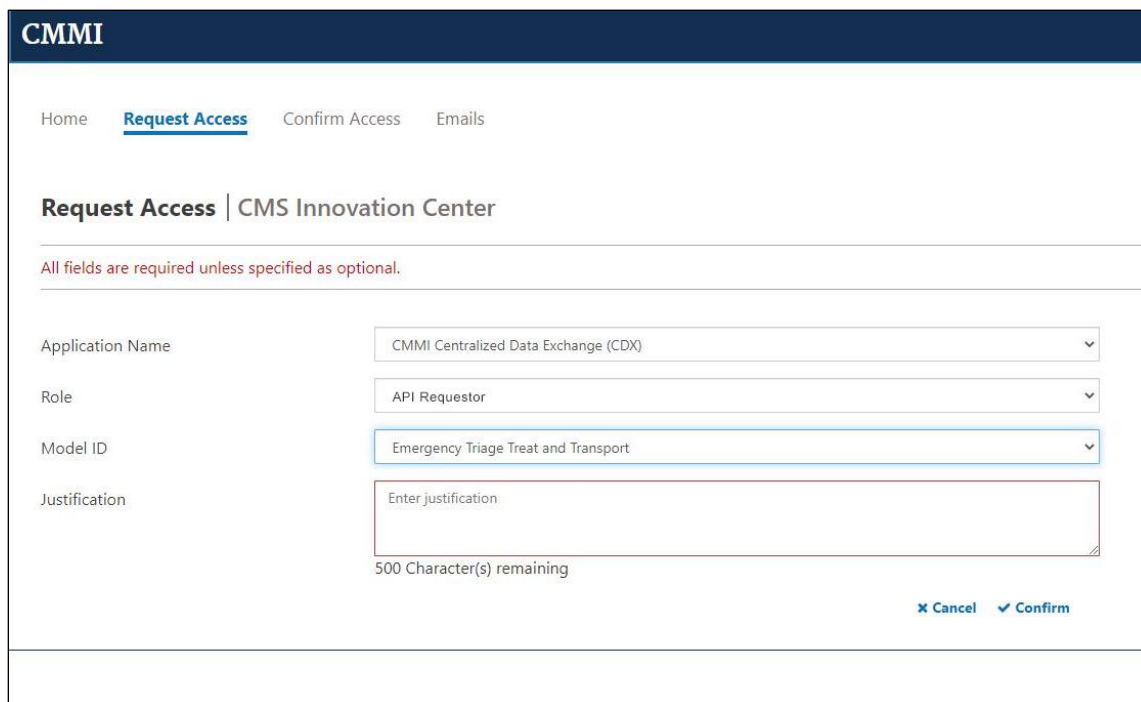
5. On the Request Access tab, select **Request New Access** and you will be directed to a new screen to make your selections.



The screenshot shows the CMMI Request Access screen. At the top, there is a dark blue header with the CMMI logo. Below the header, there is a navigation bar with three tabs: Home, Request Access (which is underlined in blue), and Confirm Access. The main content area has a heading 'Request Access | CMS Innovation Center'. Below this heading, there is a button labeled '+ Request New Access' which is highlighted with a red rectangular border.

6. On the Request Access screen, select **CMMI Centralized Data Exchange (CDX)** from the Application Name dropdown and then select your role from the Role dropdown menu.

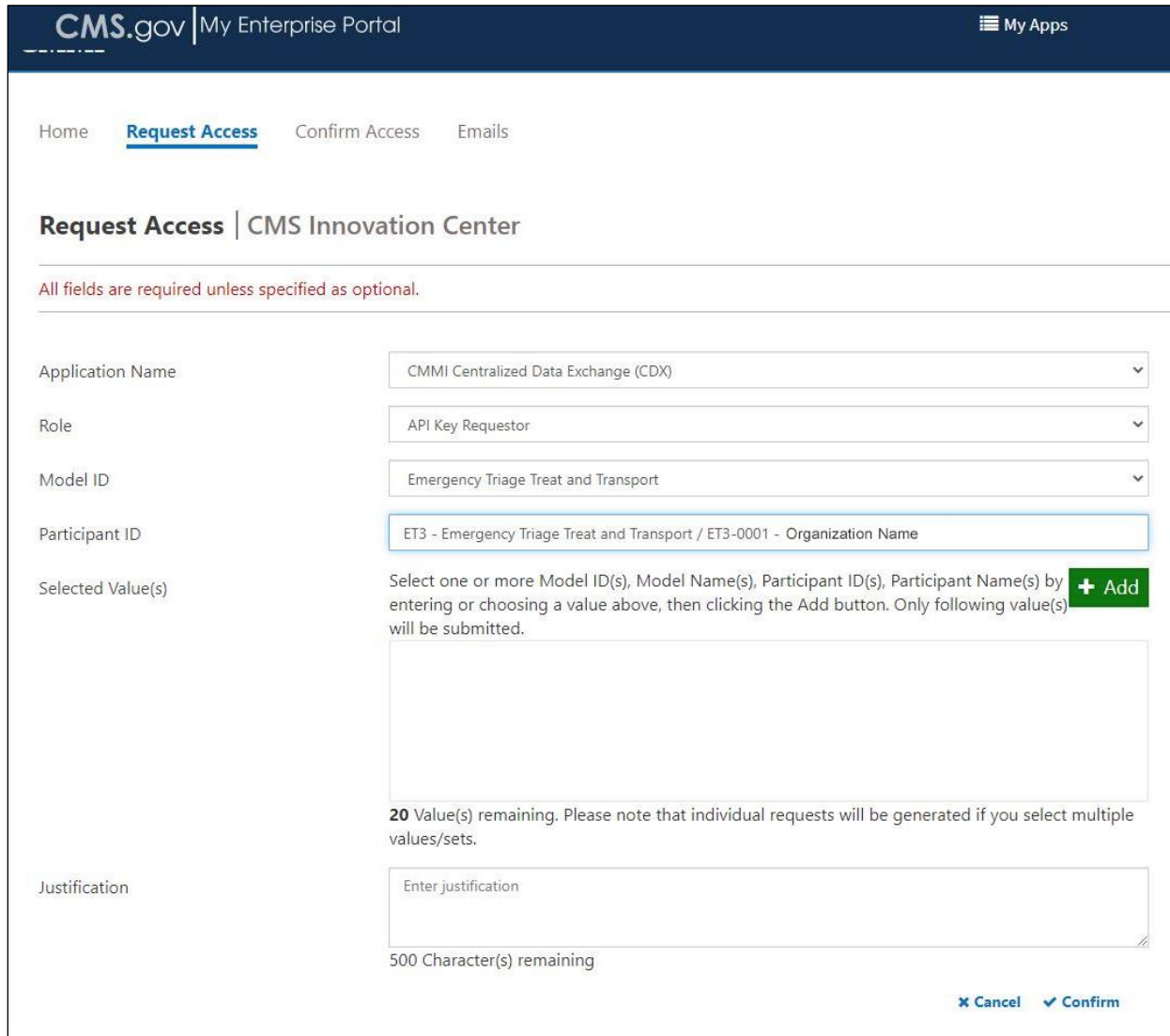
Application permissions are granted based on user role. Depending on the role you select, the system will require additional information from you, such as Model ID and Participant ID.



The screenshot shows the CMMI Request Access screen with the form fields filled out. At the top, there is a dark blue header with the CMMI logo. Below the header, there is a navigation bar with four tabs: Home, Request Access (which is underlined in blue), Confirm Access, and Emails. The main content area has a heading 'Request Access | CMS Innovation Center'. Below this heading, there is a red text message: 'All fields are required unless specified as optional.' The form fields are: Application Name (dropdown menu with 'CMMI Centralized Data Exchange (CDX)' selected), Role (dropdown menu with 'API Requestor' selected), Model ID (dropdown menu with 'Emergency Triage Treat and Transport' selected), and Justification (text area with 'Enter justification' placeholder text). Below the Justification field, there is a text label '500 Character(s) remaining'. At the bottom right of the form, there are two buttons: 'X Cancel' and '✓ Confirm'.

7. If you select the Model Participant, Model Participant Representative, or API Key Requestor role, the system requires that you to select a Model ID and a Participant ID since these user roles are granted access to CMMI models at the organization level. Each organization within a model has its own Participant ID. Model teams can provide the appropriate Participant ID.

After selecting the model from the Model ID dropdown menu, begin typing the Participant ID in the Participant ID field to display Participant IDs for selection. Then select the **Add** button to add the values to your request. You can add up to 20 values/sets.



CMS.gov | My Enterprise Portal My Apps

Home Request Access Confirm Access Emails

### Request Access | CMS Innovation Center

All fields are required unless specified as optional.

Application Name	CMMI Centralized Data Exchange (CDX)
Role	API Key Requestor
Model ID	Emergency Triage Treat and Transport
Participant ID	ET3 - Emergency Triage Treat and Transport / ET3-0001 - Organization Name
Selected Value(s)	<p>Select one or more Model ID(s), Model Name(s), Participant ID(s), Participant Name(s) by entering or choosing a value above, then clicking the Add button. Only following value(s) will be submitted.</p> <div></div> <p>20 Value(s) remaining. Please note that individual requests will be generated if you select multiple values/sets.</p>
Justification	<p>Enter justification</p> <p>500 Character(s) remaining</p>

Cancel Confirm

8. Enter the justification for your access in the Justification field and select the **Confirm** button to submit your request. After your request is reviewed, you will receive an email notification stating whether your request was approved or denied.

CMS.gov | My Enterprise Portal

My Apps

Home

Request Access

Confirm Access

Emails

Request Access | CMS Innovation Center

All fields are required unless specified as optional.

Application Name

CMMI Centralized Data Exchange (CDX)

Role

API Key Requestor

Model ID

Emergency Triage Treat and Transport

Participant ID

ET3 - Emergency Triage Treat and Transport / ET3-0001 - Organization Name

Selected Value(s)

Select one or more Model ID(s), Model Name(s), Participant ID(s), Participant Name(s) by entering or choosing a value above, then clicking the Add button. Only following value(s) will be submitted.

20 Value(s) remaining. Please note that individual requests will be generated if you select multiple values/sets.

Justification

Enter justification

500 Character(s) remaining

+ Add

Cancel

Confirm

Once your IC Application user role request is approved, you may request access to the CMMI CDX Application. To request access, complete the following steps:

1. Go to <https://portal.cms.gov/> and log in using your credentials and security code.

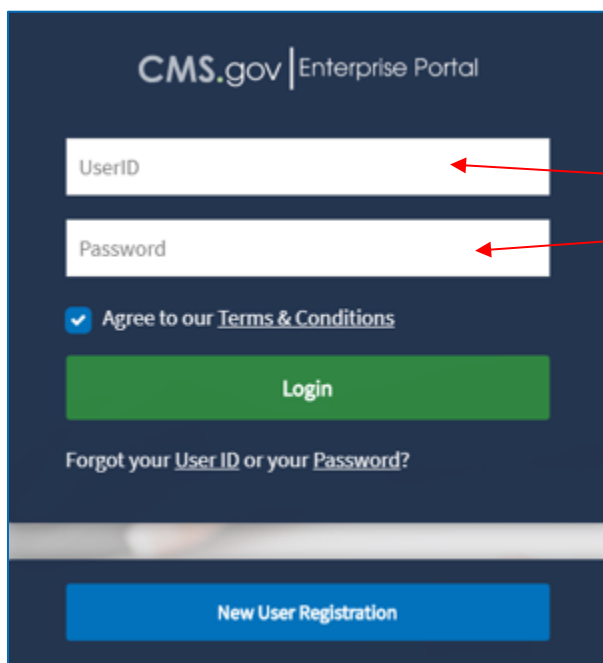


Figure 1 - CMS ePortal Login

2. **Email** is the default option for MFA. Select the **Send MFA Code** button. Check your Email inbox for the security code and enter the numbers in the **Enter MFA Code** field then click the **Verify** button.

CMS.gov | Enterprise Portal

Multi-factor Authentication

Email

Sending To: a...n@newwave.io

Send MFA Code

Enter MFA Code

**Verify**

[Unable to Access MFA Device or MFA Code?](#) [Cancel](#)

- On the **My Portal** page, select the **Innovation Center** widget, then select the **Application Console** link.

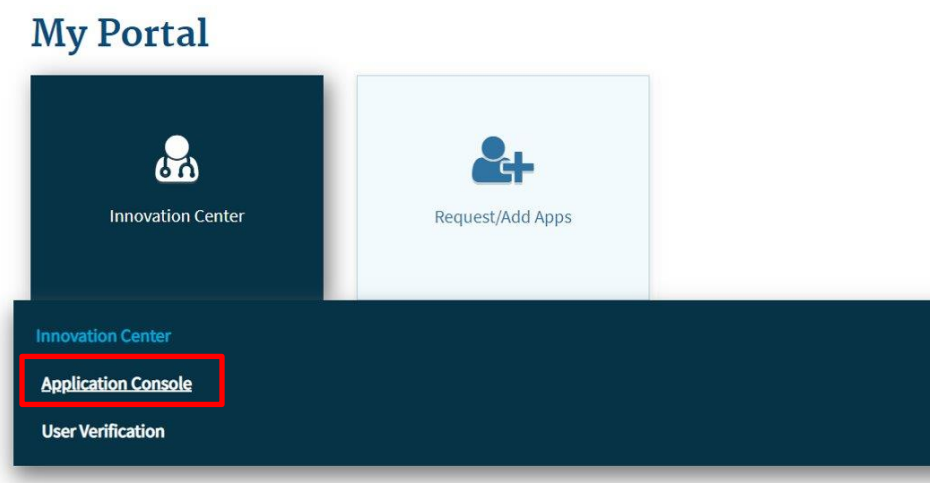


Figure 2 - My Portal Page

- Select **Request Access**. You are directed to a new screen to request access.



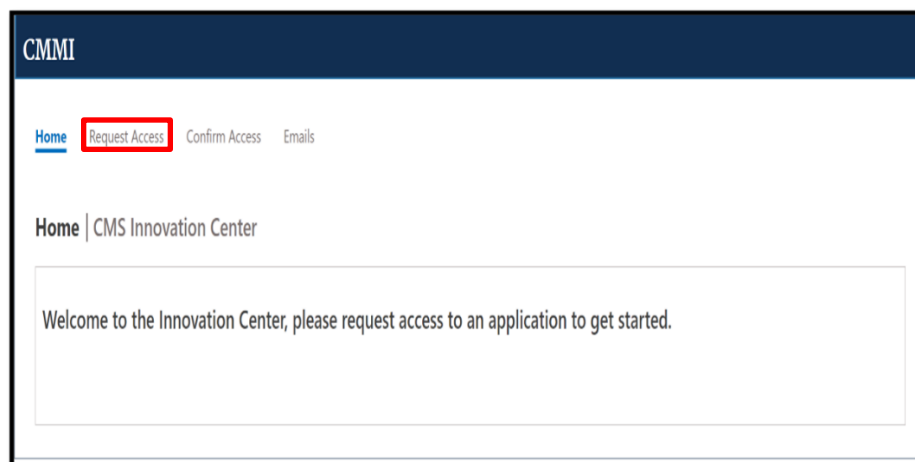


Figure 3 - Landing Page with Request Access Highlighted

5. The IC Application Console **Home** page will not display any widgets until your access to a model has been approved.

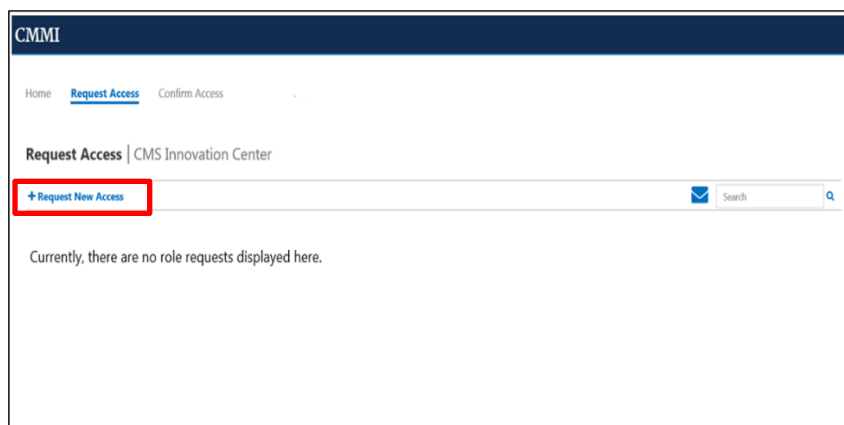


Figure 4 - Request New Access Link

6. On the **Request Access** screen, select **CMMI Centralized Data Exchange (CDX)** from the **Application Name** dropdown, and select your role from the **Role** dropdown menu. Application permissions are granted based on user role. Depending on the role you select, the system requires you to provide additional information, such as Model ID and Participant ID.
7. If you select the **Model Lead** role, the system requires you to select a model from the **Model ID** dropdown menu to access that model.

**Request Access | CMS Innovation Center**

All fields are required unless specified as optional.

Application Name: CMMI Centralized Data Exchange (CDX) ▼

Role: API Key Requestor ▼

**Model ID: Emergency Triage, Treat and Transport ▼**

Participant ID: Please enter your selection

Selected Value(s): Select one or more Model ID(s), Participant ID(s) by entering or choosing a value above, then clicking the Add button. Only following value(s) will be submitted. **+ Add**

20 Value(s) remaining. Please note that individual requests will be generated if you select multiple values/sets.

**Justification**: Enter justification  
500 Character(s) remaining

**Cancel** **Confirm**

Figure 5 - Request Access Screen: Select Model ID

8. If you select the **Model Participant**, **Model Participant Representative**, or **API Key Requestor** role, the system requires you to select a Model ID and a Participant ID since these user roles have access to models at the organization level. Each organization within a model has its own Participant ID. Contact the respective Model Team for the Participant ID.
9. After selecting the model from the **Model ID** dropdown menu, begin typing the Participant ID in the **Participant ID** field to display Participant IDs for selection. Then select the **Add** button to add the values to your request. You can add up to 20 values/sets.

**Request Access** | CMS Innovation Center

All fields are required unless specified as optional.

Application Name: CMMI Centralized Data Exchange (CDX) ▼

Role: Model Participant ▼

Model ID: Emergency Triage, Treat and Transport ▼

Participant ID: ET

Selected Value(s):

- ET3 - Emergency Triage, Treat and Transport
- ET3-0001 - Testing Org Legal Name1
- ET3-0002 - Testing Org Legal Name2
- ET3-0003 - Testing Org Legal Name3
- ET3-0004 - Testing Org Legal Name4
- ET3-0005 - Testing Org Legal Name5
- ET3-0006 - Testing Org Legal Name6
- ET3-0007 - Testing Org Legal Name7
- ET3-0008 - Testing Org Legal Name8
- ET3-0009 - Testing Org Legal Name9
- ET3-0010 - Testing Org Legal Name10

one(s), Participant ID(s), Participant  
above, then clicking the Add button. Only

+ Add

vidual requests will be generated if you select multiple

Figure 6 - Request Access Screen: Select Model ID and Participant ID

10. Enter the justification for your access in the **Justification** field and select the **Confirm** button to submit your request. After reviewing your request, you will receive an email notification stating whether the Model Team approved or denied your request.

**Request Access** | CMS Innovation Center

All fields are required unless specified as optional.

Application Name

CMMI Centralized Data Exchange (CDX)

Role

Model Participant

Model ID

Participant ID

Please enter your selection

Selected Value(s)

Select one or more Model ID(s), Model Name(s), Participant ID(s), Participant Name(s) by entering or choosing a value above, then clicking the Add button. Only following value(s) will be submitted.

Emergency Triage, Treat and Transport

ET3 - Emergency Triage, Treat and Transport / ET...

19 Value(s) remaining. Please note that individual requests will be generated if you select multiple values/sets.

Justification

Enter justification


500 Character(s) remaining

Cancel

Confirm

Figure 7 - Request Access Screen: Enter Justification and Select Confirm

- Users will receive an onscreen and email confirmation for each Role Request that they submit. Select the **OK** button to close the Request Confirmation window.

**Request Confirmation Message** 

Please Note:

You have successfully submitted (1 requests out of 1) for API Key Requestor in the CMMI Centralized Data Exchange (CDX) application.

Successful Request(s):  
Request ID: 22433, Attribute(s): Model ID:Emergency Triage, Treat and Transport, Participant ID:ET3-Emergency Triage, Treat and Transport/ET3-0010-Testing Org Legal Name10


 **OK**

Figure 8 - Request Access Screen: Enter Justification and Select Confirm

After acquiring a User ID and Password, you will then request an ET3 Security Authentication Key, which will be used on each data transmission to and from CMS (see Appendix A, Flow 2a).

**Note:** You must have the CDX API Key Requestor role to complete this task.

You can submit two API Key requests per organization. If you have already requested two keys for an organization, [deactivate an existing key request](#), and submit a new request. The application displays a notification when you have reached the maximum number of requests.

API Key Request

\* indicates a required field;

**Key Name\***  
gfg

**Model\***  
ET3  
Please select a model

**participants\***  
Testing Org Legal Name14  
Please select a participant

**Email\***  
eidm4\_dev@yahoo.com

**Justification\***  
test  
Character Count: 296

**Source IP Address\***  
Include all of the IP addresses that will need access, one IP at a time. Example 127.1.2.3  
69.250.73.26

**API Key Limit Reached**  
The Testing Org Legal Name14 has reached its limit of 2 API key requests.  
OK

Contact your help desk with issues requesting an API Key

CANCEL SUBMIT API REQUEST

Figure 9 - API Key Limit Exceeded Error

1. On the **API Manager** page, select the **REQUEST API KEY** button.

CMMI Centralized Data Exchange (CDX)

API Manager / REQUEST API KEY

Request Date	Key Name	Requestor Name	Model	Organization	Status	Key Expiration Date	Source IP Address	Action
08-28-2020	azure7	API RepFOUR	ET3	Testing Org Legal Name15	Active	10-27-2020	1.1.1.1	DEACTIVATE
08-28-2020	Test Key	API RepFOUR	ET3	Testing Org Legal Name13	Inactive	N/A	1.1.1.1	
08-27-2020	key	API RepFOUR	ET3	Testing Org Legal Name13	Inactive	N/A	1.1.1.1	
08-27-2020	demo	API RepFOUR	ET3	Testing Org Legal Name13	Inactive	N/A	1.1.1.1	
08-27-2020	apikey	API RepFOUR	ET3	Testing Org Legal Name14	Inactive	N/A	2.2.2.2	

Rows per page: 5 1-5 of 58 < >

Figure 10 - Request API Key Button

2. The API Key Request form is displayed. Provide the **Key Name**, **Model**, **Organization**, **Source IP**, **Email**, and **Justification** details. Select **SUBMIT API REQUEST**.
3. It is important to note that the user must use valid IP addresses for the Source IP field. The system validates Source IP Address format. If the IP address format is not valid, the user will not be able to add an invalid IP Address.

**Note:** The IP Address must be the IP Address that the user is sending the PCRs from, it should not be a private internal IP address or the user home IP address.

API Key Request \* indicates a required field;

**Key Name\***  
key2

**Model\***  
ET3  
Please select a model

**participants\***  
Testing Org Legal Name13  
Please select a participant

**Email\***  
eidm4\_dev@yahoo.com

**Justification\***  
new justification  
Character Count: 283

**Source IP Address\***  
Include all of the IP addresses that will need access, one IP at a time. Example 127.1.2.3

Search...	
7.7.7.7	+
111.1.1.2	+
111.1.1.112	+
1.2.3.4	+
4.4.4.4	+
7.2.3.4	+

Contact your help desk with issues requesting an API Key

CANCEL **SUBMIT API REQUEST**

Figure 11 - API Key Request Form

4. The **API Key** pop-up window displays. To save the key, select **COPY TO CLIPBOARD** and then immediately store the key in a secure place. You will need to submit a new request if you lose the key. Once you have stored the key, select the **I have securely stored this key** checkbox and then select **ACKNOWLEDGE**.

The screenshot shows the 'API Key Request' form. A modal window titled 'API Key' is displayed in the center. The modal contains the following text: 'This key must be securely stored immediately. You will not be able to retrieve it after it has been generated. If you lose this key, you must send a new request.' Below this, the 'API Key' is shown as a long alphanumeric string: 'b3IXckhJQ291TEwra2NyNUQ1dWJlcXBubEV6L1VPTGpsYjVEQ0hINHJyYk1XNUJncf'. There is a 'COPY TO CLIPBOARD' link and a checked checkbox labeled 'I have securely stored this key'. An 'ACKNOWLEDGE' button is at the bottom right of the modal. The background form includes fields for 'Key Name' (Test4), 'Model' (ET3), 'Source IP Address', 'Email' (eidm4\_dev@yahoo.com), and 'Justification' (test). A 'SUBMIT API REQUEST' button is at the bottom right of the form.

Figure 12 - API Key Window

- The application displays a notification that the API Key has been created. The request displays with a status of "Requested" in the **API Key Management** table. The Model Lead then needs to review your request. The key is ready for use when the Model Lead approves the request, and the status displays as "Active" in the **Status** column.

CMMI Centralized Data Exchange (CDX)

API key "Test Key 1" created on 08/28/2020 10:07:17 AM

API Manager / REQUEST API KEY

Request Date	Key Name	Requestor Name	Model	Organization	Status	Key Expiration Date	Source IP Address	Action
08-28-2020	Test Key 1	API RepFOUR	ET3	Testing Org Legal Name15	Requested	N/A	1.1.1.1	CANCEL
08-28-2020	azure7	API RepFOUR	ET3	Testing Org Legal Name15	Active	10-27-2020	1.1.1.1	DEACTIVATE
08-28-2020	Test Key	API RepFOUR	ET3	Testing Org Legal Name13	Inactive	N/A	1.1.1.1	
08-27-2020	key	API RepFOUR	ET3	Testing Org Legal Name13	Inactive	N/A	1.1.1.1	
08-27-2020	demo	API RepFOUR	ET3	Testing Org Legal Name13	Inactive	N/A	1.1.1.1	

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Figure 13 - Notification Confirming Request and New Request Displayed with Requested Status

After acquiring an ET3 Security Authentication Key, you will be required to renew the API Key every 180 days.

**NOTE:** IF AN API KEY IS EXPIRED OR INACTIVE THE “CLONE REQUEST” LINK WILL APPEAR IN THE ACTIONS COLUMN.

Here are a few required steps to use the “Clone Request” functionality:

- THE FORM WILL PREPOPULATE WITH THE PREVIOUSLY SUBMITTED INFORMATION.
- THE USER WILL NEED TO ENTER A NEW KEY NAME AND JUSTIFICATION.
- THE USER CAN ALSO ADD AND REMOVE IP ADDRESSES.

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## CMMI Centralized Data Exchange (CDX)

API Manager / [REQUEST API KEY](#) Dashboard Reports

Request Date	Key Name	Requestor Name	Model	Participant	Status	Key Expiration Date	Source IP Address	Action
12-21-2020	ET3_1	API ReqONE	ET3	Testing Org Legal Name2	Active	02-19-2021	69.250.73.26	DEACTIVATE
12-17-2020	key3	API ReqONE	ET3	Testing Org Legal Name5	Expired	N/A	98.117.207.136	CLONE REQUEST
12-17-2020	key2	API ReqONE	ET3	Testing Org Legal Name6	Expired	N/A	98.117.207.136	CLONE REQUEST
12-17-2020	key1	API ReqONE	ET3	Testing Org Legal Name7	Expired	N/A	98.117.207.136	CLONE REQUEST
12-16-2020	1216_3_Deny	API ReqONE	ET3	Testing Org Legal Name7	Inactive	N/A	69.250.73.26	CLONE REQUEST

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**API Key Request** \* indicates a required field

**Key Name\***

**Model\***  
ET3 (Emergency Triage, Treat, and Transport)

**Participant\***

**Email\***

**Justification\***

**Source IP Addresses\***  
Include all of the IP addresses that will need access.

1.1.1.1

Search...

87.123.100.188

92.143.220.175

93.163.690.143

Contact your help desk with issues requesting an API key.

Character Count: 41/300



After renewing your ET3 Security Authentication Key, you can track the number of **ACTIVE** keys associated with each API Key request made using the API Key Manager page:

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### CMMI Centralized Data Exchange (CDX)

API Manager / [REQUEST API KEY](#) | Dashboard | Reports

Request Date	Key Name	Requestor Name	Model	Participant	Status	Key Expiration Date	Source IP Address	Active Keys	Action
12-21-2020	ET3_1	API ReqONE	ET3	Testing Org Legal Name2	Active	02-19-2021	69.250.73.26	2/2	DEACTIVATE
12-17-2020	key3	API ReqONE	ET3	Testing Org Legal Name5	Expired	N/A	98.117.207.136 ...	0/2	VIEW / REAPPLY
12-17-2020	key2	API ReqONE	ET3	Testing Org Legal Name6	Expired	N/A	98.117.207.136 ...	0/2	VIEW / REAPPLY
12-17-2020	key1	API ReqONE	ET3	Testing Org Legal Name7	Expired	N/A	98.117.207.136 ...	0/2	VIEW / REAPPLY
12-16-2020	1216_3_Deny	API ReqONE	ET3	Testing Org Legal Name7	Inactive	N/A	69.250.73.26	2/2	VIEW / REAPPLY

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Active Keys
2/2
0/2
0/2
0/2
2/2