Adding a Surrogate

If you login to I&A and do not see a request from me to be added to your provider's account, do the following steps.

- 1. Login to I&A using the username and password that allows you to add connections to your providers. If your personal I&A account doesn't allow for this, you may need to login as the provider directly.
- 2. Click on the **My Connections** tab.

My Connection ► Add Surrogate

City:

3. Scroll down until you see the first provider that I am attesting for. NOTE: There is no need to add me to the group, just the individual providers. Click on **Add Surrogate**.

The following Individual(s) or Organization(s) have been authorized to work on behalf of Randall W Marsden. Use the Add Surrogate button to initiate the process of authorizing an Individual or Organization to work on behalf of Randall W Marsden.

Add Surr	ogate		
Name 🔻	Tracking ID	Business Function	Access Status

4. In the **Organization Name** search box, type "Randall W Marsden", and in the **ZIP** box, type "10019". Click **Search**.

	r Individual Providers to connect Provider); or NPI (for Individual P		g either Organization Name (with C ganization).	ity/State or ZIP); or
Organization Name:	Randall W Marsden	NPI:		Search
First Name:		Last Name:		

State:

« Back to Previous Page

‡ ZIP: 10019

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Name 🔻	Business Mailing Address
<u>Randall W Marsden</u>	
View Other Name(s)	
Continue Cancel	

5. Click on my name, then check off **EHR Incentive Program.** Then click **Continue.**

Name 🔻	Business Mailing Address	
Randall W Marsden. View Other Name(s) elect the business function(s) you would like the surrogate to access on our behalf: PECOS EHR Incentive Program NPPES (Future) Note: Access to NPPES via a connection is not currently available, but will be in the future. If you select the NPPES (Future) business function now, the surrogate will be able to access NPPES on your behalf when the functionality becomes available.		

6. Verify that you are adding me to the correct provider, then click **Submit.**

Your Provider Information Name: Doing Business As (DBA): NPI: Surrogate Information Name: Randall W Marsden Business Mailing Address: Business Function(s) Selected:	Name: Doing Business As (DBA): NPI: Surrogate Information Name: Randall W Marsden Business Mailing Address:	A You have requested Randa you continue.	II W Marsden to work on behalf of your provider. Review the information listed below before
Doing Business As (DBA): NPI: Surrogate Information Name: Randall W Marsden Business Mailing Address:	Doing Business As (DBA): NPI: Surrogate Information Name: Randall W Marsden Business Mailing Address: Business Function(s) Selected: EHR Incentive Program To send this connection request notification to a another e-mail address in addition to what is currently on file for this surrogate, enter the additional e-mail address below.	Your Provider Information	
NPI:	NPI: Surrogate Information Name: Randall W Marsden Business Mailing Address: Business Function(s) Selected: • EHR Incentive Program To send this connection request notification to a another e-mail address in addition to what is currently on file for this surrogate, enter the additional e-mail address below.	Name:	
Surrogate Information Name: Randall W Marsden Business Mailing Address:	Surrogate Information Name: Randall W Marsden Business Mailing Address: Business Function(s) Selected: • EHR Incentive Program To send this connection request notification to a another e-mail address in addition to what is currently on file for this surrogate, enter the additional e-mail address below.	Doing Business As (DBA):	
Name: Randall W Marsden Business Mailing Address:	Name: Randall W Marsden Business Mailing Address: Business Function(s) Selected: • EHR Incentive Program To send this connection request notification to a another e-mail address in addition to what is currently on file for this surrogate, enter the additional e-mail address below.	NPI:	
Business Function(s) Selected:	• EHR Incentive Program To send this connection request notification to a another e-mail address in addition to what is currently on file for this surrogate, enter the additional e-mail address below.		
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Additional E-mail Address:		Additional E-mail Addres	5:

If you are not able to perform the steps above, use the form attached to this e-mail that you will need to mail to CMS. Fill out section 3A and have your provider sign. Then send it along with a copy of government identification used with CMS to CMS External User Services (EUS) Help Desk, PO Box 792750, San Antonio TX 78279.