



According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is [0938-XXXX].

This information collection is to gather feedback to enhance our iQIES development and deployment efforts and will be used to measure the effectiveness of our system launch. The time required to complete this information collection is estimated to average less than five (5) minutes per response, including the time to review instructions, search existing data resources, gather the data needed, to review and complete the information collection. This information collection is voluntary and confidential. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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How would you rate your **experience with the new LTCSP software** in iQIES so far?

- ☐ 1 (Very Negative)
- ☐ 2 (Slightly Negative)
- ☐ 3 (Neutral)
- ☐ 4 (Slightly Positive)
- ☐ 5 (Very Positive)

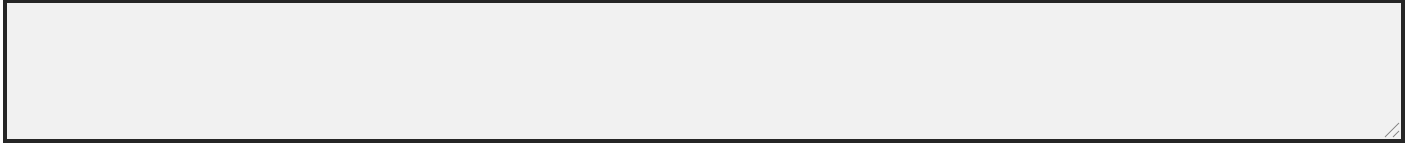
How would you rate your experience with the **Training and Communications efforts** (user guides, training sessions, office hours, etc.) relating to the Nursing Home transition to iQIES?

- ☐ 1 (Very Negative)
- ☐ 2 (Slightly Negative)
- ☐ 3 (Neutral)
- ☐ 4 (Slightly Positive)
- ☐ 5 (Very Positive)

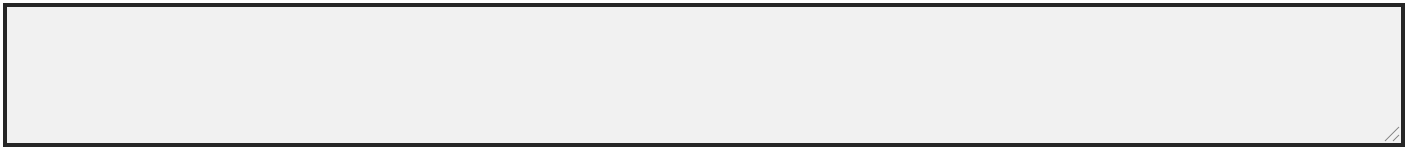
Based on the information, impressions, and/or experiences you have had to date, how would you rate your experience with the **Service Center support** for the Nursing Home transition to iQIES?

- ☐ 1 (Very Negative/Low)
- ☐ 2 (Slightly Negative)
- ☐ 3 (Neutral)
- ☐ 4 (Slightly Positive)
- ☐ 5 (Very Positive)
- ☐ Not Applicable

Please share any feedback on what could have gone better or what we can improve going forward.

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Please share any feedback on what went well before, during, or post the iQIES launch.

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