Screen Shots Submission Flow

The screen shots below illustrate the workflow (submission + Attestation) of a user uploading a file containing general payments records.

File Upload-General Payments

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	e Portal						
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CMS Portal > Open Pa	ayments > Registratio	on 2					
	Open P	ayments					
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	Home	Payments View, edit & report (transfers of value)	Manage Organizations Register, edit and nominate roles	My Profile Account, Roles, Notifications	Help		
		View, Edit, or Attest Payments				_	
	Home > Upload Fil	Upload Files					
	Upload	Enter Payments Manually					
	A field with an as	t					
			ing a file or by entering a single payn a, you will see a confirmation messag				
	You can then go		ly uploaded files when they have finis				
	uploading. First_please.perf	orm a test of the file by selecting Te	st File Submission You can then				
		d the appropriate file for the paymer	nt category (Research, Nonresearch,	and			
	To succesfully up		a valid file format (OOV as VMI) If				
		re each file you are submitting is in a download the latest Open Paymen	a valid file format (CSV or XML). If ts submissions sample files from this	link			
	Sample Files						
		and review your data for accuracy, c d upload the correct file, then click "	ompletion, and valid field formatting. "Submit File to Open Payments"				
		teps 1-4 if you are uploading multipl					
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Select criteria for file upload

More about updating records can be found in the Open Payments User Guide.	Í
Upload Payments When you upload a payment file, you must first identify the payment category. You can upload more than one file, but no file can be larger than 250 MB.	
*Payment Category General Payments	
*Program Year 2013	
*File	
Browse	Ξ
Must be a valid .csv or .xml or a .zip file. Maximum of 250MB per file.	
Submit as Test File	
Submit File to Open Payments	
Cancel Go To View Payments	

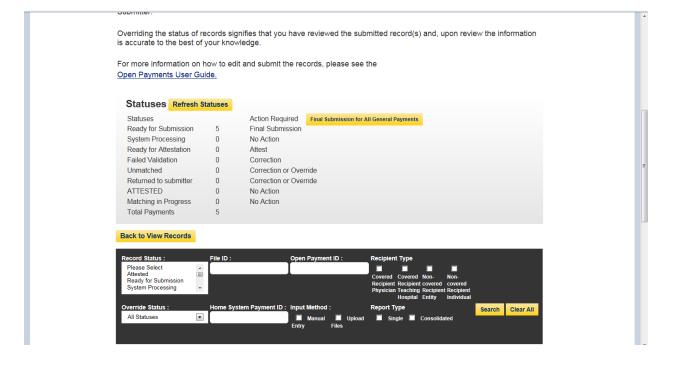
Successful File Upload

More about updating records can be found in the Open Payments User Guide.
Upload Payments When you upload a payment file, you must first identify the payment category. You can upload more than one file, but no file can be larger than 250 MB.
File Successfully Uploaded. *Payment Category General Payments
*Entity CITY OF JOSEPHINE
*Program Year 2013
*File
C:\Users\ebirgach\Documents\SUnshine\Testing\consoli Browse
Must be a valid .csv or .xml or a .zip file. Maximum of 250MB per file.
Submit as Test File
Submit File to Open Payments
Cancel Go To View Payments

s.cmsval/wps/myportal/cmsportal/op/op_reg/ ge Requests - All Ite 4000 Cisco Unified Meet					CMS Enterprise Portal - Re
99CA LP				Help with this Pa	
Program Year 201	4			Status Definitions	
				How do I begin attestation	?
Research Payments			View All	What do I do if payments favoration with the second	ail
Statuses		Action Required			
Ready for Submission	0	Final Submission			
System Processing	0	No Action			
Ready for Attestation	0	Attest			
Failed Validation	0	Correction			
Unmatched	0	Correction or Override			
Returned to submitter	0	Correction or Override			
ATTESTED	0	No Action			
Matching in Progress	0	No Action			
Total Payments	0				
General Payments			View All		
Statuses		Action Required			
Ready for Submission	5	Final Submission			
System Processing	0	No Action			
Ready for Attestation	0	Attest			
Failed Validation	0	Correction			
Unmatched	0	Correction or Override			
Returned to submitter	0	Correction or Override			
ATTESTED	0	No Action			
Matching in Progress	0	No Action			
Total Payments	5				

Payments passed file level validation check and ready for FINAL Submission

Final Submission Button Enabled for final Submission



Final Submission Confirmation

Home	Payments View, edit & report (transfers of value)	Manage Organizations Register, edit and nominate roles	My Profile Account, Roles, Notif	fications Help	
	irm Final Submi General Payme		f site	ed help with the web ? Contact us by phone email. wnload the Open	
		for this category.		ments User Guide DF 525kb)	
Kahled Mas title [Thu Apr 10 Cancel	Id 11:16:36 EDT 2014]	Submit as Final Subm	issi		
CMS Enterprise Portal Home CMS.gov	Enterprise Portal 7500 Security	smment website managed by the Centers for N Boulevard, Baltimore, MD 21244	Medicare & Medicaid Service	35	
CMS Enterprise Portal Links Portal Help & FAQs	Helpful Links Web Policies & Important Links Privacy Policy				

Post Final Submission Confirmation

iew Records ow are the records reported by the entity and categorized by status. Each status has a responding action related to it. The details of each action for each corresponding status be found in the <u>Open Payments User Guide</u> . OCA LP			or email. Download the Open Payments User Guide (PDF 525kb) Help with this Page Status Definitions	
You have successf Program Year 2014		d your records in to Oper	n Payments.	How do I begin attestation? What do I do if payments fail validation?
Research Payments		Action Required	View All	
Ready for Submission	0	Final Submission		
Ready for Submission	0			
System Processing	0	No Action		
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System Processing	0			
System Processing Ready for Attestation	0	Attest		
System Processing Ready for Attestation Failed Validation	0 0 0	Attest Correction		
System Processing Ready for Attestation Failed Validation Unmatched	0 0 0 0	Attest Correction Correction or Override		
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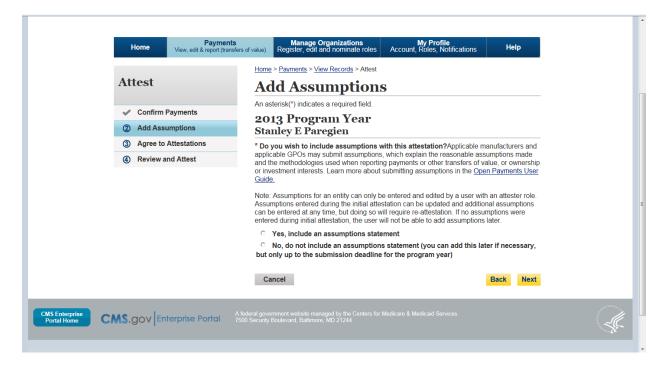
Begin Attestation

General Payments			View All	
Statuses		Action Required		
Ready for Submission	0	Final Submission		
System Processing	0	No Action		
Ready for Attestation	18	Attest		
Failed Validation	0	Correction		
Unmatched	0	Correction or Override		
Returned to submitter	0	Correction or Override		
Attested	17	No Action		
Matching in Progress	0	No Action		
Ownership or Investm	35 nent Interest		View All	
Total Payments Ownership or Investm Statuses Dend for Character	ient Interest	Action Required	View All	
Ownership or Investm Statuses Ready for Submission	ent Interest	Action Required Final Submission	View All	
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Ownership or Investm Statuses Ready for Submission System Processing Ready for Attestation Failed Validation Unmatched Returned to submitter ATTESTED Matching in Progress	0 0 0 0 0 0 0 0 0 0 0 0 0	Action Required Final Submission No Action Attest Correction Correction or Override Correction or Override	View All	
Ownership or Investm Statuses Ready for Submission System Processing Ready for Attestation Failed Validation Unmatched Returned to submitter ATTESTED	0 0 0 0 0 0 0 0 0 0	Action Required Final Submission No Action Attest Correction Correction or Override Correction or Override No Action	View All	

Attestation-Confirm Payments

CMS Portal > Open Payments > Registration 2 Open Paymen	nts	
	Atyments Manage Organizations My Profile Register, edit and nominate roles Account, Roles, Notifications Help	
Attest	Home > Payments > View Records > Attest Confirm Payments Select "Go to View Records" to review and confirm the submitted records, or click "Next" to revie to the word paragrammers	
 Confirm Payments Add Assumptions Agree to Attestations 	and the next page. 2013 Program Year Stanley E Paregien	
 Review and Attest 	Payments Being Attested 18 payments (transfers of value) Total Value : \$226.25 Go to View Records	
	Cancel	ext
CMS Enterprise Portal Home CMS.gov Enterprise Port	A federal government website managed by the Centers for Medicare & Medicaid Services 7500 Security Boulevard, Baltimore, MD 21244	, the second sec
CMS Enterprise Portal Links Helpful Lir	ıks	

Add Assumptions Yes/No?



Add Assumptions- Yes workflow

	Note: Assumptions for an entity can only be entered and edited by a user with an attester role. Assumptions entered during the initial attestation can be updated and additional assumptions can be entered at any time, but doing so will require re-attestation. If no assumptions were entered during initial attestation, the user will not be able to add assumptions later.	
		1
	Cancel Back Next	-
CMS Enterprise Portal Home CMS.gov Enterprise Portal	A federal government website managed by the Centers for Medicare & Medicaid Services 7500 Security Boulevard, Baltmore, MD 21244	A.

Assumptions Added

Note: Assumptions for an entity can only be entered and edited by a user with an attester role. Assumptions entered during the initial attestation can be updated and additional assumptions can be entered at any time, but doing so will require re-attestation. If no assumptions were entered during initial attestation, the user will not be able to add assumptions later.	
 Yes, include an assumptions statement 	
C No, do not include an assumptions statement (you can add this later if necessary, but only up to the submission deadline for the program year)	
Assumptions	
By default, the assumptions statement applies to all payments (transfers of value) being attested to.	
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Cancel Back Next	
	- 1000

Agree To Attestation



Agree to Attestation_Cont

Assumptions
View the Assumptions
Attestation Agreement Please confirm your agreement to the statement(s) below:
I. I am attesting that I am a Chief Executive Officer, Chief Financial Officer, Chief Compliance Officer, or other Officer of the applicable manufacturer or applicable group purchasing organization with the authority to attest to the information submitted to the Open Payments system.
2. I am attesting that the information reported is timely, accurate, and complete to the best of my knowledge and belief.
3. I am attesting that my entity is only reporting payments or other transfers of value associated with covered drugs, devices, biologicals, or medical supplies based on one or more of the reasons listed below. If yes to statement 3 above, indicate the reason by selecting at least one of the following reporting limitation statements:
a. My entity DDDs gross revenue from covered drugs, devices, biologicals or medical supplies constituted less than 10 percent of gross revenue during the fiscal year preceding the reporting year.
b. My entity is under common ownership, as defined by 42 C.F.R. □ 403.902, with an applicable manufacturer and provides assistance or support to an applicable manufacturer with respect to the production, preparation, propagation, compounding, conversion, marketing, promotion, sale or distribution of a covered drug, device, biological, or medical supply. Therefore, my entity is only required to report payments or other transfers of value associated with covered drugs, devices, biologicals or medical supplies which my entity provided assistance and support to an applicable manufacturer.
c. My entity has a separate operating division that does not manufacture any covered drugs, devices, biological, or medical supplies. Therefore, my entity is only required to report payments or other transfer of value to covered recipients related to the activities of these separating operating divisions if those payments or other transfers of value are related to a covered drug, device, biological, or medical supply.

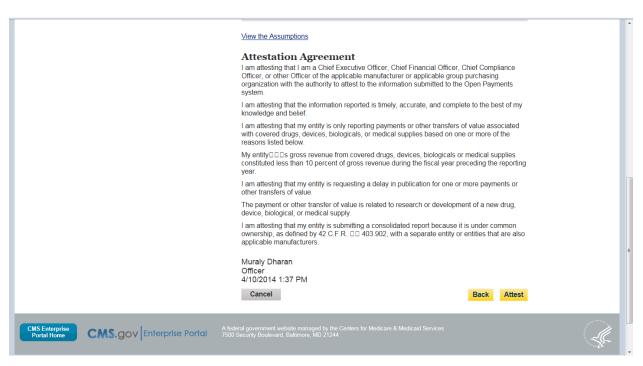
Agree to Attestation_Cont

	d. The only covered drug, device, biological or medical supply manufactured by my entity is pursuant to a written agreement to manufacture a covered drug, device, biological, or medical supply for another entity. My entity does not hold the FDA approval, licensure, or clearance for the covered drug, device, biological, or medical supply, and is not involved in the sale, marketing, or distribution of the covered drug, device, biological or medical supply. Therefore, my entity is only required to report payments or other transfers of value that are related to one or more covered drugs, devices, biologicals, or medical supplies.	
	 e. My entity only manufactures covered drugs, devices, biologicals, or medical supplies. 	
	☐ 4. I am attesting that my entity is requesting a delay in publication for one or more payments or other transfers of value. If yes to statement 4 above, indicate one or more of the reasons listed below.	
	a. The payment or other transfer of value is related to research or development of a new drug, device, biological, or medical supply.	
	b. The payment or other transfer of value is related to research or development of a new application of an existing drug, device, biological, or medical supply.	
	□ c. The payment or other transfer of value is related to clinical investigations regarding a new drug, device, biological, or medical supply.	
	□ 5. I am attesting that my entity is submitting a consolidated report because it is under common ownership, as defined by 42 C.F.R. □□ 403.902, with a separate entity or entities that are also applicable manufacturers.	
	Muraly Dharan Officer 4/10/2014 1:37 PM	E
	Cancel Back Next	
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Review and Attest

Attest	Home > Payments > View Records > Attest
	Review and Attest
✓ Confirm Payments	Please review and agree to the attestation below. The assumptions included, if any, with the payments or other transfers of value,or ownership or investment interest for the 2013program year data submission are provided below. You can
Add Assumptions	view the assumptions by selecting "View Assumptions" or make edits to the assumptions by selecting "Update Assumptions."
 Agree to Attestations 	Select the appropriate attestation statements, and confirm your attestation by clicking "Attest." Or, click "Back" to go back and make corrections to the previous pages.
Review and Attest	Note: Assumptions for an entity can only be entered and edited by a user with an attester role. Assumptions entered during the initial attestation can be updated and additional assumptions can be entered at any time, but doing so will require re-attestation. If assumptions were not entered during the initial attestation, the user will not be able to add assumptions later.
	2013 Program Year Stanley E Paregien Payments Being Attested 18 payments (transfers of value) Total Value : \$226.25
	View the Assumptions
	Attestation Agreement
	Attestation Agreement I am attesting that I am a Chief Executive Officer, Chief Financial Officer, Chief Compliance Officer, or other Officer of the applicable manufacturer or applicable group purchasing organization with the authority to attest to the information submitted to the Open Payments system.
	I am attesting that I am a Chief Executive Officer, Chief Financial Officer, Chief Compliance Officer, or other Officer of the applicable manufacturer or applicable group purchasing organization with the authority to attest to the information submitted to the Open Payments
	I am attesting that I am a Chief Executive Officer, Chief Financial Officer, Chief Compliance Officer, or other Officer of the applicable manufacturer or applicable group purchasing organization with the authority to attest to the information submitted to the Open Payments system. I am attesting that the information reported is timely, accurate, and complete to the best of my

Review and Attest



[Type here]

Records shown as attested

General Payments			View All		
Statuses		Action Required			
Ready for Submission	0	Final Submission			
System Processing	0	No Action			
Ready for Attestation	0	Attest			
Failed Validation	0	Correction			
Unmatched	0	Correction or Override			
Returned to submitter	0	Correction or Override			
Attested	35 🧹	No Action			
Matching in Progress	0	No Action			
Total Payments	35				
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Ownership or Investm		Action Required	View All		
Ownership or Investm Statuses Ready for Submission	nent Interest (Action Required Final Submission	View All		
Ownership or Investm		Action Required	View All		
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Ownership or Investm Statuses Ready for Submission System Processing Ready for Attestation Failed Validation Unmatched Returned to submitter ATTESTED	0 0 0 0 0 0 0	Action Required Final Submission No Action Attest Correction Correction or Override Correction or Override No Action	View All		