

Completing and Saving a PDF Form Electronically

1. Select *File* → *Save As*. A **Save As** dialog box opens.
2. From the drop-down list associated with the *Save In* field, select *Desktop*.
Note the name of the file in the *File name* field, and then select the **Save** button.
3. Open the form from its location on your desktop.
4. As you begin to fill out the form a warning message may display that states "Cannot Save Form Information". While it is true that you can not save the information entered in a PDF format, you are able to save it as a text file.
5. After you complete the form, select *File* → *Save As Text*. A **Save As** dialog box opens. From the drop-down list associated with the *Save In* field, select *Desktop* and then click the **Save** button.
6. Open the text file and verify the information you entered before closing the PDF form.
Note: When you close the PDF form, the information you entered is not saved within the form.

MDS Third-Party Service Bureau User Request

This form must be completed by a facility in order to:

1. **Designate a third-party service bureau user** to submit assessments on the facility's behalf.
2. **Remove access** of a current third-party service bureau user to the facility in situations such as termination or turnover.

A Third-Party Service Bureau is defined as follows: An outside entity contracted by the facility or a corporation to provide services. The entity is typically contracted to process submissions, but may also be contracted to retrieve and/or review report data for facilities. The entity is not limited to contracting with facilities in a single state and may provide services for facilities in multiple states.

Warning: Security regulations do not allow a user ID to be logged on to multiple sessions simultaneously. Problems may arise if the third-party service bureau ID is used with an automated submission system and accesses multiple servers.

Please complete this form, in its entirety, electronically.

Note: In order to e-mail this form, you must first save it as a text file.

Instructions for downloading and saving PDF forms are available at www.QTSO.com

Type of Request

Request to Create New Third-Party Personal User ID Access to: Submit Assessments CASPER Reports Request to Change: Add Facility Remove Facility	Third Party User's Current Personal ID	1	MDS0000728
		2	MDS0059803
		3	MDS0059804
		4	MDS0059805
		5	MDS0059806
		6	MDS0059807

Third-Party User Information

User Name:	1 Michele Harold	User E-Mail:	michele.h@pointclickcare.com	User Phone:	(800)277-5889
	2 Megan D'Angelo		megan.d@pointclickcare.com		(800)277-5889
	3 Kelly Rocha		kelly.r@pointclickcare.com		(800)277-5889
	4 Carmen Gilgor		carmen.g@pointclickcare.com		(800)277-5889
	5 Joel Pelletier		joel.p@pointclickcare.com		(800)277-5889
	6 Victor Lan		victor.l@pointclickcare.com		(800)277-5889
User Physical Address:	5570 Explorer Drive Mississauga, Ontario, L4W 0C4 Canada				
Company Name:	Wescom/PointClickCare				

Facility Information

Facility Name: _____

Facility Medicare Number (CCN): _____ NPI: _____

Facility Physical Address: _____

Facility Mailing Address: _____

Facility Contact Person Name: _____ Contact Person Phone: _____

Contact Person Title: _____

Contact Person E-mail Address: _____

Request Date: _____

Fax or e-mail the completed form to the QTSO Help Desk.

FAX: 888-477-7871

E-mail: help@qtso.com

Fax cover sheet must contain facility letterhead and must be sent from a facility fax machine.

Please allow 5 business days for your request to be processed.