

AUTHORIZATION FOR QUARTERLY STAFFING REPORTING SYSTEM ACCESS

Nursing Home facilities in Michigan are required to report quarterly staffing data pursuant to Section 708 of Public Act 249 of 2008.

The Bureau of Health Systems (BHS) will accept data submissions from the current Administrator of the facility and ONE additional person who MUST be authorized by the current Administrator.

By signing and submitting this document the Administrator is stipulating to the following:

- 1) The person identified (Submitter) below is approved to register for access to their facility in the Quarterly Staffing Reporting System (QSRS) via the Michigan Single Sign-On (SSO) system and to submit data approved by the current administrator.
- 2) Authorizes the Submitter to enter the Administrator name as an electronic signature on the QSRS report form to certify that the data being submitted is accurate and approved by the Administrator
- 3) The Administrator **MUST** notify the Quarterly Staffing Coordinator in writing if the Submitter is no longer authorized to submit data for their facility and request the account be disabled.

Facility Name _____

Facility ID _____

Additional User Name _____

Contact Phone _____

Additional User SSO Username _____

Facility Administrator Name (Printed) _____

Facility Administrator Signature

Date

Submit the completed form as an attachment to: lara-bhs-quarterly-staffing@michigan.gov or Fax to 517-241-2635 Attention: Quarterly Staffing Coordinator