

Patient List Alerting File Format

Below is the file format that is required for Patient List Alerting. The preferred file format is a comma separate file (.csv), excel format will be accepted. A template is available if needed.

Field Name	Required/Optional	Required Value	Value Definition
MRN	Required	N/A	N/A
Patient First Name	Required	N/A	N/A
Patient Last Name	Required	N/A	N/A
Patient Middle Initial	Optional	N/A	N/A
Date of Birth	Required	MM/DD/YYYY	N/A
Gender	Optional	F, M, O, U, A, N Default to N if not supplied	(F)emale, (M)ale, (O)ther, (U)nkknown, (A)mbiguous, (N)ot applicable
Race	Optional	1002-5, 2028-9, 2054-5, 2076-8, 2106-3, 2131-1, Unknown Default to Unknown if not supplied	1002-5 = American Indian or Alaska Native, 2028-9 = Asian, 2054-5 = Black or African American, 2076-8 = Native Hawaiian or Other Pacific Islander, 2106-3 = White , 2131-1 = Other Race , Unknown = Unknown
Street Address	Required	N/A	N/A
City	Required	N/A	N/A
State	Required	N/A	N/A
Zip or Postal Code	Required	Must be 5,9 or 10 digits	N/A
Address Type	Optional	H, L Will default to 'H' if empty	(H) Home (L) Legal
County/Parish Code (CWE)	Optional	N/A	N/A
Social Security Number	Optional	Must be in following format if included. XXX-XX-XXXX	Must be in following format if included. XXX-XX-XXXX
Provider Identifier (NPI)	Optional	N/A	N/A
Provider Direct Mail to receive Alerts	Optional	N/A	Must be valid direct email address.

Inpatient Admit (A01)	Optional	Contain blank, Y, N If left blank (Inpatient Admit by default)	Contain blank, Y, N
Inpatient Discharge (A03)	Optional	Contain blank, Y, N If left blank (Inpatient Discharge by default)	Contain blank, Y, N
ED Admit (A04)	Optional	Contain blank, Y, N If left blank (ED Admit by default)	Contain blank, Y, N
Data Source ID	Required	To be provided by HeC	
Provider Group Key	Required	To be provided by HeC	
Delivery Frequency	Optional	Contain blank, RT, B, DD	RT = Real Time, receive the Direct Alert as soon as it occurs Leave Blank = Default to Real Time DD = Receive alerts in a daily digest format sent daily B = Receive the alert both real time and in a daily digest format.
Additional Event Types	Optional	Blank or one of the following separated by a ; EDA03; EDA11; EDA13; IPA11; IPA13;	EDA03 = ED Discharge EDA11 = ED Cancel Admit EDA13 = ED Cancel Discharge IPA11 = In- Patient Cancel Admit IPA13 = In-Patient Cancel Discharge