

**Encounter Notification Service (ENS)**

#### What is an ENS configuration change form?

This form is for an existing ENS client to update, delete or add additional configurations to their current subscription service.

#### How Does This Form Work?

Complete the top section titled ‘Subscriber Information’ and then complete the remaining elements of the form (where applicable). If your organization is changing the billing POC, adding a new endpoint, deleting an endpoint or adjusting third-party vendor information, please denote what is changing in regard to your configuration by **highlighting the specific element within the section**.

*Please note, your organization must complete the ‘Subscriber Information’ section but may leave everything else blank if that section is not changing. If you have any questions, please reach out to* [*FLHIE\_Info@ainq.com*](mailto:FLHIE_Info@ainq.com)

**ENS Configuration Change Request Form**

#### Subscriber Information

|  |  |
| --- | --- |
| Configuration Change Request Date | Date this checklist was completed |
| Subscribing Organization Name |  |
| ENS Project Manager POC |  |
| Telephone number |  |
| Email address |  |
| ENS Project Secondary POC |  |
| Telephone number |  |
| Email address |  |
| Organization type (hospital, provider, ACO, payer, etc.) |  |
| Organization ID (identify whether this is a Medicaid ID, ACO ID, CCN, etc.) |  |
| NPPES NPI |  |
| Medicaid ID (if applicable) |  |
| Will your panel include Medicaid patients? Y/N |  |

#### Billing Information

|  |  |
| --- | --- |
| Invoice Recipient Name |  |
| Employer Identification Number (EIN) |  |
| Telephone number |  |
| Email address |  |

#### Third-Party Vendor Information (if applicable)

ENS is offered as a stand-alone service and does not require the use of a third-party vendor. However, some subscribers may choose to use the services of a third-party vendor to handle ENS data. The Florida HIE Services does not endorse or recommend the services of any specific third-party vendor. The Florida HIE Services will work with a third-party vendor at a subscriber’s direction but will not contract with the vendor or pay any vendor costs. If your organization plans to use a third-party vendor to handle ENS data on your behalf, please provide the information requested below.

|  |  |
| --- | --- |
| Vendor Name |  |
| Vendor Point of Contact |  |
| Telephone number |  |
| Email address |  |

#### Sending the Patient Panel

The initial patient panel (and all subsequent updates) can be sent to the Florida HIE Services by any DirectTrust-accredited secure messaging service or by Secure File Transfer Protocol (SFTP). Indicate your preferred delivery method by selecting a box below.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Florida HIE Services SFTP | |  |  |
|  | Subscriber (or third-party vendor) SFTP | |  |  |
|  | Direct Messaging (discounted pricing available through [Inpriva](http://inpriva.com/inpriva/index.php/florida-dsm/)) | |  |  |
|  | Other Method: |  | |  |

Panels uploaded to an SFTP site should be placed in the Outbound folder, as described in the **SFTP Setup** section below. An email should then be sent to [flhie\_info@ainq.com](mailto:flhie_info@ainq.com) to inform the Florida HIE Services that a new panel has been uploaded and is ready for review

#### Receiving Notifications

***Endpoint #1***

*Delivery Options*

|  |  |  |
| --- | --- | --- |
|  | Florida HIE Services SFTP | |
|  | Subscriber (or third-party vendor) SFTP | |
|  | PROMPT | |
|  | Direct Messaging (discounted pricing available through [Inpriva](http://inpriva.com/inpriva/index.php/florida-dsm/)) | |
|  | Direct address: |  |

*Frequency*

|  |  |  |
| --- | --- | --- |
|  | Real-time (within 15 minutes of event occurrence) | |
|  | Batch delivery, once per day (6 am ET) | |
|  | Batch delivery, twice per day (6 am ET and 1 pm ET) | |
|  | Batch delivery, other: |  |

*Format*

|  |  |  |
| --- | --- | --- |
|  | CSV | |
|  | HL7 | |
|  | Other format: |  |

***Endpoint #2***

*Delivery Options*

|  |  |  |
| --- | --- | --- |
|  | Florida HIE Services SFTP | |
|  | Subscriber (or third-party vendor) SFTP | |
|  | PROMPT | |
|  | Direct Messaging (discounted pricing available through [Inpriva](http://inpriva.com/inpriva/index.php/florida-dsm/)) | |
|  | Direct address: |  |

*Frequency*

|  |  |  |
| --- | --- | --- |
|  | Real-time (within 15 minutes of event occurrence) | |
|  | Batch delivery, once per day (6 am ET) | |
|  | Batch delivery, twice per day (6 am ET and 1 pm ET) | |
|  | Batch delivery, other: |  |

*Format*

|  |  |  |
| --- | --- | --- |
|  | CSV | |
|  | HL7 | |
|  | Other format: |  |

#### If additional endpoints beyond the three specified above are desired, please indicate that via email when submitting this ENS Onboarding Checklist to [flhie\_info@ainq.com](mailto:flhie_info@ainq.com).

#### Event Types

ENS can be set up to deliver notifications on the recommended subset of event types or on the broader set of event types sent by participating hospitals. The set of recommended event types includes emergency department registrations and discharges and inpatient admissions and discharges. The broader set of event types includes transfers (for example, when a patient goes from the hospital ICU to the radiology department), pre-admissions, cancelled admissions, and other event types that may not be as actionable or as useful as the recommended event types.

|  |  |  |  |
| --- | --- | --- | --- |
| **Event Type** | **Description** | **Available** | **Recommended Subset** |
| A01 | Admission | ✔ | ✔ |
| A02 | Transfer | ✔ |  |
| A03 | Discharge | ✔ | ✔ |
| A04 | Registration | ✔ | ✔ |
| A05 | Pre-Admission | ✔ |  |
| A06 | Change an Outpatient to Inpatient | ✔ |  |
| A07 | Change an Inpatient to Outpatient | ✔ |  |
| A08 | Patient Information Update\* | ✔ | ✔ |
| A11 | Cancel Admission | ✔ | ✔ |
| A12 | Cancel Transfer | ✔ |  |
| A13 | Cancel Discharge | ✔ | ✔ |

*\*A08 Update messages are only delivered when containing pertinent encounter information not already conveyed in a previous notification.*

|  |  |
| --- | --- |
|  | Send notifications only on the recommended subset of event types (default) |
|  | Send notifications on all available event types |
|  | Neither of the above; please contact me so I can customize the event types received |

#### SFTP Setup

If your organization has selected to upload the patient panel and/or receive notifications through SFTP – either through the Florida HIE Services SFTP or subscriber (or third-party vendor) SFTP – the SFTP site should be set up with three folders, as follows –

1. Inbound – this folder is where ENS notifications will be delivered.
2. Outbound – this folder is where your organization should upload the initial patient panel and any subsequent updates. You must email [flhie\_info@ainq.com](mailto:flhie_info@ainq.com) to inform the Florida HIE Services that a new panel has been uploaded and is ready for review.
3. Test – this folder is for any ad hoc testing will occur or for other uses as needed.

#### SFTP Credentialing

If your organization has chosen to use the Florida HIE Services SFTP to upload the patient panel and/or receive notifications, provide the contact information for the individual at your organization who should receive the SFTP site credentials.

|  |  |
| --- | --- |
| SFTP Credential Recipient’s Name |  |
| Telephone number |  |
| Email address |  |

**Once completed, send this ENS Configuration Change Request Form to the Florida HIE Services at** [**flhie\_info@ainq.com**](mailto:flhie_info@ainq.com)**.**