Guidance for Vendor Services:

Obtaining Vendor OID from PHINTEC

The Vendor (Application) OID is assigned by PHINTECH and is unique for each Vendor. If you need a Vendor (Application) OID, please contact the PHINDIR team via email at PHINTech@cdc.gov and include the following information in order to process your request:

Subject Line: Vendor (Application) OID Request for NHSN_PH

Body of Email:

Program: **NHSN_PH**
Vendor Name:
Requestor First Name:
Requestor Last Name:
Requestor Email Address:
Requestor Phone number:

In response to your email, you will receive a Vendor (Application) OID. This OID cannot be used other than to include Vendor (Application) OID in CDA files for the NHSN program. Alternatively, you can contact the PHINDIR team by phone at 404-334-4290 or 800-532-9929. Please be prepared to provide the same information as above. Obtaining Vendor OID

Vendor Services – Requesting Facility Location Data

1) Once the Vendor OID is obtained, you will need to register to use Vendor Services.
   a. Vendors shall meet all requirements prior to registering:
      - Valid DIRECT address
      - Valid vendor OID
   b. Vendors with multiple DIRECT addresses can only register 1 time with 1 DIRECT address
   c. JSON file will be sent to NHSN via DIRECT (vendorservices@direct.nhsn.us)

```
1  {
2   "action":"VS_REGISTRATION"
3   ,
4   "directAddress":"testAT@direct.hisp.com"
5   ,
6   "vendorOID":"1.111.22.111.3"
7   ,
8   "vendorName":"TEST Ahmed 2"
9   ,
10  "vendorTPOC":"AT 2 Customer"
```

   d. A response email message from vendorservices@direct.nhsn.us will be sent
   e. Once confirmed, NHSN will send back an email confirming registration is completed
      - The subject line of the response email shall be: "Vendor Services Registration Completed"
      - The nhsnvendorservices@cdc.gov shall receive a copy of the email.
      - The email body shall contain: "Vendor Services Registration Completed"

2) Request Facility Location Data:
   a. Vendors can request only location data for 1 facility at a time
   b. Request shall contain 'action' key word (i.e. request)
   c. Requests will be in JSON format
   d. Must be sent in a zip file via DIRECT
   e. Vendors who maintain their own HISP may also request facility location data
      – Vendors who maintain their own HISP will need to use their Vendor OID
   f. Include the following information as noted in the screenshot below:

```
{
    "action":"FACILITY_LIST",
    "vendorOID":" 1.111.33.981.1",
    "facilityOID":"2.111.111.111.10009",
    "vendorName":"XYZ facility",
    "directAddress":"hospital@direct.hispdirect.com",
}
```

3) Response Format:

   a. A response email message shall be sent from vendorservices@direct.nhsn.us (dedicated inbox) address to the DIRECT address from which it came.
   b. The subject line of the email shall be: "FacilityID: NHSN Vendor Service Response" and use the following naming convention for the zip file: FacilityID_2018-Aug-16_13-34-12.zip
   c. One zip file will be attached per message.
   d. Zip file shall contain location data in the specific format that was requested in JSON format

4) The same process as currently used for DIRECT CDA Automation will be used to troubleshoot issues. Due to the variety of issues, vendor will send an email with summary of issue to the nhsnvendorservices@cdc.gov mailbox.