Submitting HIN Requests to HIBCC
(Revised August 30, 2017)

HIN request submission guidelines exist for the sole purpose of enabling HIBCC to deliver a quality product to its licensees. With the broadening of its licensee base and significant growth both in HIN request submissions and enumerated facilities, HIBCC can no longer afford inefficiencies that impact service levels and, ultimately, licensee costs. The following information should be reviewed by all HIN® Human Health licensees intending to submit HIN requests to HIBCC. Note that HIBCC reserves the right to change any or all charges described in this document.

General

1. $3.00 applied to each record not submitted in either of the automated HIN submission options:
   a. by email, to dba@hibcc.org, using the standardized HIN Request Template (http://www.hibcc.org/wp-content/uploads/2012/09/HIN_Request_Template.xls);
   b. by uploading HIN requests via the HIN search portal, iHIN: http://www.hibcchin.org.

2. $3.00 applied to each record and subsequent rejection when a licensee submits an invalid or wrong telephone number in the request.

3. $2.00 applied to each record submitted as a "new HIN request" when in fact the record exists and is identified via a cross-reference to an existing HIN.

4. $2.00 applied to each record submitted for an entity using its old (or former) address (verified via telephone call) when the correct address is already available on the HIN database.

5. $2.00 applied to each record when a licensee submits wrong information (wrong name, address, city, state, postal code) and the licensee is referred by HIBCC to a HIN with the correct information.

6. $2.00 applied to each record when a licensee submits an "ADD FACILITY" request when the entity should have been submitted as an "ADD LOCATION" request and the licensee is referred by HIBCC to the correct HIN.

7. $2.00 applied to each record when a licensee submits an incorrect or inactive HIN for repair (i.e., the HIN specified by the licensee differs from the intended HIN).

8. $2.00 applied to each record when a licensee submits a HIN for repair which requires no change (i.e., current HIN information is correct).

9. $2.00 applied to repeat submissions (i.e., when a licensee submits new requests for the same entity multiple times).

10. In the case of a new-licensee initial customer load (ICL) and/or pre-scheduled mass data loads (i.e., those that exceed 500 records), HIBCC can reduce its costs and thus the above charges if update requests are submitted in the appropriate format and the licensee is able to accept longer than customary turn-around times.

Most of the above charges can be avoided by following the steps below.

Check to see if your customer is already enumerated by cross-referencing it to your copy of the HIN Database.

This saves you both time and money. If you submit a HIN request to HIBCC that is subsequently matched to a facility or location that was enumerated later than 14 days prior to the date the request was processed, you will be charged $2.00.

Review the customers you are submitting as HIN requests.

HIBCC cannot guess what you want to have enumerated and will cancel any HIN requests that do not meet minimum information standards. Unacceptable HIN requests include customers with incomplete names and addresses, internal accounts, non-physical addresses such as PO Boxes, requests that do not include customer reference numbers and otherwise indeterminate entities.

Provide as much information as possible in the HIN request for a customer.

Include the customer's telephone number so that HIBCC can verify the name and location of the entity. HIBCC passes all costs incurred for directory assistance back to licensees that submit HIN requests without telephone numbers or with incorrect telephone numbers. These charges are currently $2.49 per call. Include a market segment or activity code with your HIN requests and a DEA number if you maintain this information.

HIN Requests Using the HIN-Request Submission Template in a Microsoft Excel .xls Format or Fixed-Length Text File

Licensees are strongly encouraged to submit HIN requests using the HIN-request submission template in a Microsoft Excel .xls format or a fixed-length text file. The accepted layout for HIN requests is as follows:

O = Optional, M = Mandatory

Field Name	Length	Begin	Usage	Notes
HIN	9	1	O	Optional only if Adding Facility; otherwise, Mandatory. Facility HIN must be included for CHANGE FACILITY, DEACTIVATE FACILITY and ADD LOCATION request types. Location HIN must be included for CHANGE LOCATION and DEACTIVATE LOCATION request types. A base HIN ending in "00" must be given for all ADD LOCATION and CHANGE FACILITY requests.
NAME	35	10	M	Only DBA or Legal Name is allowed.
ADDRESS1	35	45	M	Only USPS verifiable addresses are allowed; **PO Box addresses are not.**
ADDRESS2	35	80	O	Additional name/address information

ADDRESS3	35	115	O	Must include 340B ID for all 340B requests. May be used for additional notes but will not be used as part of HIN record.
CITY	20	150	M	Mandatory for all request types.
STATE/PROVINCE	2	170	M	Mandatory for all request types.
POSTAL CODE	9	172	M	Mandatory for all request types.
COUNTRY	2	181	O	US assumed, if blank.
MARKET/FUNCTION	2	183	O	Mandatory for ADD LOCATION request type; otherwise, optional. Use HIBCC Market or Activity Codes: Facility Market Codes Academic Institute [UN] Clinic [CL] Gov't Agency [GV] Home Health Corp [HH] Hospital [HO] Military Facility [MF] Non-Health Misc [NM] Nursing Home [NH] Location Activity Code Nuclear Medicine [C6] Medical Department [C7] Out-Patient Services [C8] Pharmacy Services [C9] Nursing Services [CA] Location PHS Activity Code Cmnty Hlth Ctr [22] Dispro Shr Hosp [24] Fmly Planning [25] Refer to the HIN PHS 340B Program Codes and HIN Database Layout documents for all market and activity codes.
TELEPHONE	16	185	M	Enter valid telephone number. Do not enter extensions. Extensions can be included in the COMMENTS field. Field must not be left blank.
DEA	9	201	O	Enter valid DEA number, if available.
REQUEST TYPE	2	210	M	OPTIONAL if Adding Facility; otherwise, MANDATORY

REASON CODE	2	212	O	Used along with a CHANGE or DEACTIVATE Request Type. Options: Facility Closed [FC] Facility Moved [FM] Change Name [CN] See more HIN Reason Codes under HIN Reason Codes section below.
REFERBACK CODE	35	214	NA	For internal use only. Leave blank.
CUSTOMER NUMBER	30	249	M	Enter your client's internal account number; otherwise, enter any identification number available for your client. Must not be left blank.
COMMENTS	30	278	O	May be used for telephone extension numbers and/or contact name and numbers.

HIN Enumeration Guidelines

HIBCC is undertaking a major maintenance effort to rationalize the identification of facilities and its associated locations. However, database quality is highly dependent on the quality of information in the HIN requests HIBCC receives from its licensees. Use the following enumeration guidelines when preparing HIN requests for submission to HIBCC.

HIN Request Types

Licensees may submit the following request types on customer records sent to HIBCC for enumeration or maintenance.

Request Type	HIBCC Code	Prerequisites	Notes
ADD FACILITY	AF		To request a HIN assignment to an unenumerated facility.
CHANGE FACILITY	CF	HIN, Reason Code	To change one or more attributes associated with a facility record in the HIN database: You must include the HIN of the facility, the reason for change on the HIN request and update all fields that require an update (update the NAME field with an updated DBA).
DEACTIVATE FACILITY	DF	HIN, Reason Code	To deactivate a HIN assignment to a facility record in the HIN database: You must include the HIN of the facility and the reason for deactivating on the HIN request.

ADD LOCATION	AL	HIN (of facility)	To associate a location with an enumerated facility: You must include the HIN of the facility on the HIN request.
CHANGE LOCATION	CL	HIN, Reason Code	To change one or more attributes associated with a location record in the HIN database: You must include the HIN of the location, the reason for change on the HIN request and update all fields that require an update (update the NAME field with an updated DBA).
DEACTIVATE LOCATION	DL	HIN, Reason Code	To deactivate a HIN assignment to a location record in the HIN database: You must include the HIN of the location and the reason for deactivating on the HIN request.

If a HIN request is submitted without a request type, ADD FACILITY will be assumed. ***ADD LOCATION HIN requests will not be inferred from ADD FACILITY requests***. If the request type is ADD FACILITY, the HIN request will either be enumerated as a HIN facility or cross-referenced to a HIN facility record. If enumerated as a HIN facility, the name and address will be changed to conform to facility naming conventions; i.e. room numbers, departments or other intra-facility information will be removed from the record.

HIN Reason Codes

Reason Codes tell why maintenance was performed on a HIN record. Include a reason code for all request types except ADD FACILITY and ADD LOCATION. HIBCC reserves the right to change the reason code associated with a maintenance request. Acceptable reason codes are listed below.

Reason	HIBCC Code	Use With Request Type
NAME CORRECTION	CN	CF, CL
ADDRESS CORRECTION	CA	CF, CL (Corrections only;otherwise use FM)
CITY NAME CORRECTION	CC	CF, CL
ZIP CODE CORRECTION	CZ	CF, CL
TELEPHONE CORRECTION	CT	CF, CL
DEA CORRECTION	CD	CF, CL
DUPLICATE OF EXISTING FACILITY	DF	DF, CF
DUPLICATE OF EXISTING LOCATION	DL	DL, CL
FACILITY MOVED	FM	CF (Provide new address in appropriate fields)
LOCATION MOVED	LM	CL (Provide new address in appropriate fields)
FACILITY CLOSED	FC	DF
LOCATION CLOSED	LC	DL

Enumeration of Campus Facilities

Campuses are groups of contiguous facilities that are operated by an organization. Most campuses in the HIN Database are universities, hospitals and military bases. Naming conventions for facilities in campuses will strictly follow the standards shown in the following table.

Field Name	Contents
NAME	Organization that own the campus
ADDRESS1	Street address of building
ADDRESS2	Building name or number only

Facility records will no longer carry any information that does not satisfy these conventions, such as department name or room numbers. Licensees wishing to enumerate locations within campus facilities must submit ADD LOCATION requests.

Enumeration of Physician Practices

HIBCC will enumerate physician offices, but not physicians, for the HIN facility database. Physician offices will be identified by a clinic name, group practice name or by the name of a practicing physician if the practice is a sole proprietorship. Sole proprietors in the HIN facility database will always be identified using the standard:

[LAST NAME] + [FIRST NAME] + [MIDDLE INITIAL OR NAME] + [GENERATION SUFFIX] + [CREDENTIALS] + OFFICE

In other words, the facility identifier "OFFICE" will always follow the name of the physician in a HIN facility record. For example, a HIN request for Dr. John A. Smith will be transformed into the facility name SMITH JOHN A MD OFFICE.