



Event Notifications Powered by
NC HealthConnex

V4.5.2+ Specifications

September 2026

Contents

- 1 Overview..... 3
 - 1.1 Summary..... 3
 - 1.2 Service Options..... 3
- 2 Subscribing to NC*Notify..... 4
 - 2.1 Enrollment..... 4
 - 2.2 Advanced Alerts..... 4
 - 2.2.1 Emergency Department Reutilizer..... 4
 - 2.2.2 High Utilizer..... 4
 - 2.2.3 Dental Alert..... 4
 - 2.3 Clinical Intelligence Engine (CIE) Alerts..... 4
 - 2.3.1 Potential Diabetes Registry Addition..... 4
 - 2.3.2 Pre-Diabetes Alert..... 5
 - 2.3.3 Chronic Care Management (CCM)..... 5
- 3 NC*Notify v4.5.2+..... 6
 - 3.1 Patient Panels..... 6
 - 3.1.1 Patient Panels Sent via sFTP or Direct Secure Messaging (DSM)..... 6
 - 3.1.2 Auto-attribution..... 6
 - 3.2 Notifications..... 6
 - 3.2.1 NC*Notify Dashboard..... 7
 - 3.2.2 Notification Flat File..... 7
 - 3.2.3 Direct Secure Messaging Notifications..... 7
 - 3.2.4 Direct Electronic Health Records Integration..... 7
- 4 Version History..... 8
- Appendix A: Secure Exchange of Patient Panels..... 9
- Appendix B: Secure Exchange of Notification Flat Files..... 10
- Appendix C: Patient Panel Specifications..... 11
- Appendix D: Notification Flat File Specifications..... 15

1 Overview

1.1 Summary

NC*Notify is a subscription-based service that notifies providers as their patients receive services across the care continuum. Based on admission, discharge and transfer (ADT) data received from participating hospitals and encounter data from ambulatory care settings, NC*Notify's real-time event notifications provide care teams with valuable information spanning geography and care settings and support state and federal efforts to focus on patient-centered care.

1.2 Service Options

NC*Notify provides two service options. NC*Notify v4.5.2, known as the base tier, is targeted at organizations that can generate a patient panel, that may wish to integrate notification files into their systems and that often have a high volume of patients for whom they would like to receive notifications. NC*Notify v4.5.2+, known as the plus tier, is suitable for organizations who want to leverage the enhanced features offered by the NC HealthConnex platform for automatically building patient panels and downstream processing and coordination of follow-up activities. The NC*Notify v4.5.2+ service option also has the capability to send alerts for additional events based on data in the NC HealthConnex patient longitudinal records.

2 Subscribing to NC*Notify

2.1 Enrollment

To subscribe to NC*Notify, an enrollment form must be completed. The enrollment form can be completed online at <https://hiea.nc.gov/services/ncnotify/online-enrollment> or as a downloaded form which is then submitted to hiea@nc.gov. Staff from the North Carolina Health Information Exchange Authority (NC HIEA) will validate the enrollment to make sure that the organization wishing to enroll is eligible to receive notifications. NC HIEA staff will reach out to the subscriber to review and confirm enrollment form selections.

Based on these selections, subscribers can enroll in NC*Notify v4.5.2 or NC*Notify v4.5.2+. NC HIEA staff will work with the NC HIEA's technical partner, SAS Institute, and the subscriber to establish a connection (if needed), create and submit patient panels and receive notifications.

2.2 Advanced Alerts

In version 4.0+ of the service, several new subscription options were introduced for advanced alert criteria. In addition to receiving alerts on admission, discharge and transfer (ADT) events, subscribers can receive the alert types described below. By default, these alerts can be triggered for the patients on the existing panel by simply enrolling for the additional use case.

2.2.1 Emergency Department Reutilizer

This alert is triggered when a patient registers at an emergency department (ED) within 30 days from a previous ED visit. The alert can be sent to either the original ED or the one the patient is currently visiting. These alerts do not require a panel but are limited to subscribers who have a qualifying ED within their organization.

This alert is available on the NC*Notify Dashboard, as well as notification flat file.

2.2.2 High Utilizer

This notification will help providers identify frequent visitors to the ED and patients that are at high risk for readmission due to recurring inpatient visits. Subscribers to this alert will receive notifications when their patients have two or more visits to the ED in 90 days or less. They will also receive notifications for patients with four or more admissions in 12 months.

This alert is available on the NC*Notify Dashboard, as well as notification flat file.

2.2.3 Dental Alert

This notification is triggered when the primary diagnosis for an ED visit is dental related.

This alert is available on the NC*Notify Dashboard, as well as notification flat file.

2.3 Clinical Intelligence Engine (CIE) Alerts

This series of alerts is triggered from changes in data that are stored in the NC HealthConnex database. These alerts can each be subscribed to independently.

2.3.1 Potential Diabetes Registry Addition

Subscribers to this alert are notified when one of their patients has a new diagnosis of diabetes. The diagnosis must be the first instance of the disease received by NC HealthConnex for the patient and have a diagnosis date within the last 30 days. This alert indicates a patient who is potentially eligible for the NC HealthConnex Diabetes Registry, which is used by NC DPH.

Subscribers will only be alerted once for this use case.

This alert is available on the NC*Notify Dashboard.

2.3.2 Pre-Diabetes Alert

Subscribers to this alert are notified when one of their patients has a new diagnosis of pre-diabetes or a glycated hemoglobin (HbA1c) value in the pre-diabetic range (5.7 – 6.4). The diagnosis must be the first instance of the disease received by NC HealthConnex for the patient and have a diagnosis date within the last 30 days. The HbA1C result must be within the last 30 days. Patients with a diabetes diagnosis will not trigger this alert. Subscribers will only be alerted once for this use case.

This alert is available on the NC*Notify Dashboard.

2.3.3 Chronic Care Management (CCM)

Subscribers will receive an alert when a patient has two or more conditions from the Centers for Medicare and Medicaid Services (CMS) Chronic Care Management (CCM) list. At least one of the qualifying diagnoses must have a diagnosis date within the last 30 days. Subscribers will only be alerted once for this use case.

This alert is available on the NC*Notify Dashboard.

3 NC*Notify v4.5.2+

3.1 Patient Panels

Subscribers enrolled in NC*Notify v4.5.2+ have several options for subscribing to patients. These options include:

- Sending a patient panel via secure file transfer protocol (SFTP) or direct secure messaging (DSM). Details about these connections are provided in Appendix A.
- Auto-attribution of patients based on encounter information sent to NC HealthConnex. Please note that to use auto-attribution, the subscriber must be live and sending encounter data to NC HealthConnex.

NOTE: Subscribers who enroll to receive advanced alerting notifications, in addition to the basic ADT notifications, will receive all alerts from the same panel by default. To subscribe to a different patient cohort for the advanced notifications, please contact the NC*Notify team at hiea@nc.gov.

3.1.1 Patient Panels Sent via SFTP or Direct Secure Messaging (DSM)

Patient panels may be updated no more than once per week. Patient panels must be updated at a minimum of once every 90 days to ensure that subscribers are receiving notifications for patients with whom they have a current relationship

Subscribers to NC*Notify v4.5.2+ and sending patient panels via SFTP or DSM can choose to send a full replacement patient panel or an incremental patient panel that updates an existing panel. When sending replacement panels, all patients will be marked for addition. When sending update panels, patients within the panel will be marked for deletion, addition or update. The processing of the patient panel and handling of each patient is determined based on the name of the file and the first column in the file. For details on naming the files and the required format and content for patient panels, see Appendix C.

3.1.2 Auto-attribution

Subscribers may choose to have NC*Notify generate a patient panel based on encounter information sent to NC HealthConnex by the subscriber. Once the subscriber is configured for auto-attribution, patients will be added to the panel after an encounter at the subscribing organization. Notifications sent back to the subscriber will include the demographics sourced from NC HealthConnex.

The attribution of patients to the subscriber's panel begins once the onboarding is complete. Since the construction of this panel could take time, the subscriber may choose to send an initial panel via SFTP or DSM according to the details in Appendix C, which will be added to the auto-attributed patients. Similarly, if there are specific patients the subscriber would like to add to a panel once auto-attribution is in effect, an incremental panel can be sent via SFTP or DSM according to the details in Appendix C. This will allow patients to be added to the panel without impacting the auto-attribution process.

Please note that to use auto-attribution, the subscriber must be live and sending encounter data, typically found in ADT messages or continuity of care documents (CCD), to NC HealthConnex.

3.2 Notifications

Subscribers to the NC*Notify v4.5.2+ have several options for receiving alerts. These options include:

- Notifications via the NC*Notify Dashboard, a web portal accessed via the NC HealthConnex clinical portal
- Notification flat files that can be delivered as batches of alerts, at a frequency mutually agreed upon during onboarding
- Notifications delivered via DSM as individual messages with full alert details

3.2.1 NC*Notify Dashboard

The NC*Notify Dashboard is a web-based, user-friendly tool used by health care professionals to view event notifications and for care coordination providing a dashboard-like view of patient event notification activity. Past notifications will be removed from the dashboard after six months. The dashboard allows health care professionals to:

- View notifications
- Mark and view workflow history
- Filter and search notifications
- Download a notification summary (1,000 row limit)
- View prior events for a patient

3.2.2 Notification Flat File

A notification flat file will be generated for each NC*Notify v4.5.2+ subscriber according to the schedule determined during enrollment. When a relevant event occurs, a new row will be added to the notification file. Each row of the notification file will consist of the values from the patient panel or gathered during auto-attribution and additional information generated by NC*Notify. The demographics for patients in the notification files are taken from the subscriber's patient panel or gathered during auto-attribution. This ensures better matching at the subscriber system because there is consistency between the demographics on the patient panel and in the notification. Duplicate events will be removed if all fields are the same, resulting in one row per event. See Appendix D for details on the notification flat file.

3.2.3 Direct Secure Messaging Notifications

Full notification details are formatted as individual DSM messages and sent to a pre-defined DSM address for the subscriber.

3.2.4 Direct Electronic Health Records Integration

NC*Notify is working with some EHR systems to deliver notifications directly into the EHR workflow. These alerts are delivered by formatting the data according to the HL7 v3 Clinical Document Architecture (CDA) standard. This format is consumable by some EHR systems with minimal development. Specific details of the integration will vary by EHR. Please contact the HIEA to discuss additional details for connecting.

4 Version History

Version 1.0 September 4, 2018

Version 2.0 May 30, 2019

Version 2.1 August 5, 2019

Version 2.1.1 August 19, 2019

Version 3 June 4, 2020

Version 3.1 July 23, 2020

Version 4.0 January 22, 2020

- Updated “v3” references to “v4”
- Updated section 1 to include additional event triggers
- Added advanced alerting to section 2
- Added place of service fields to table 4 (outbound notification file details)
- Added place of service fields to Table 1 (HL7 segments in notification messages)
- Replaced VPN with TLS references

Version 4.5 September 16, 2021

- Added direct integrations with EHR
- Added DSM notification delivery
- Changed required fields in the patient panel
- Added four new fields to the outbound flat-file notification table

Version 4.5.1 March 25, 2024

- Updated “v4.5” references to “v4.5.1”
- Updated details in section 3.2.1
- Updated DSM details in Appendix A

Version 4.5.2 August 21, 2026

- Updated “v4.5.1” references to “v4.5.2”
- Removed COVID labs advanced alerts information
- Removed Self-Service Panel Loader information
- Removed HL7v2 notification information
- Removed statement regarding submission of separate panels for advanced alerts
- Removed statement about data integration with some EHRs using XDR encoded messages

Appendix A: Secure Exchange of Patient Panels

For sending patient panels, subscribers can choose either direct secure messaging (DSM) or sFTP. If DSM is chosen and the subscriber does not yet have a DSM address, one can be provided by NC HIEA. Please note there is a file size limit of 25MB for DSM attachments. Details on the sFTP connection are provided below.

Appendix A.1 Secure File Transfer (sFTP)

Setup

Exchanging files via sFTP with NC HealthConnex requires configuration within the SAS environments. This includes allowlisting of the sender's IP and port, as well as setup of an sFTP account for the subscriber. Sender's IP addresses must be static and public.

Connecting

There are several methods for connecting to the sFTP server. One method is via the web portal managed by SAS. The user account provided by SAS can be used to login to this portal from the IP address configured during the setup. The sFTP server can also be reached via an FTP client or the command line if the connection is originating from the IP configured during the setup process. The same account information is used in either scenario.

Directory Structure

Regardless of the sFTP method used to connect and exchange files, the following information applies to the configuration of the directories that will be encountered. At the top level, there are two directories:

- Incoming
- Outgoing

These directories indicate the direction of exchange relative to SAS. For instance, the incoming directory is the location for files sent from the subscriber to SAS.

Appendix B: Secure Exchange of Notification Flat Files

Subscribers will receive notification flat files via sFTP.

Appendix B.1 Secure File Transfer (sFTP)

Setup

Exchanging files via sFTP with NC HealthConnex require configuration within the SAS environments. This includes allowlisting of the sender's IP and port, as well as setup of an sFTP account for the subscriber. Sender's IP addresses must be static and public.

Connecting

There are several methods for connecting to the sFTP server. One method is via the web portal managed by SAS. The user account provided by SAS can be used to login to this portal from the IP address configured during the setup. The sFTP server can also be reached via an FTP client or the command line if the connection is originating from the IP configured during the setup process. The same account information is used in either scenario.

Directory Structure

Regardless of the sFTP method used to connect and exchange files, the following information applies to the configuration of the directories that will be encountered. At the top level, there are two directories:

- Incoming
- Outgoing

These directories indicate the direction of exchange relative to SAS. For instance, the outgoing directory is the location for notification files sent to the subscriber from SAS.

Appendix C: Patient Panel Specifications

Appendix C.1 Patient Panel File Name

The inbound file should be named according to the following naming convention:

- <ORGCODE>-1-<LOADTYPE>-<DATE>-PLUS.csv

Where

- <ORGCODE> will be provided by SAS.
- <LOADTYPE> will be either “Z” for replacement (most common) or “D” incremental changes, including additions, deletions, and updates.
- <DATE> will be formatted as YYYYMMDD.

Example: PRACTICE2-1-Z-20200415-PLUS.csv

Appendix C.2 Replacement Patient Panel Content

The file will be a flat text file and contain a header row and at least one row in the body. Each row in the file will contain fields delimited by a “,” comma. The rows will end with the following ascii characters: carriage return (0x0D) and line feed (0x0A). All fields should be delimited, regardless of whether there is data in the field. The expected content of the body rows is depicted in the table below. The required fields are denoted by a ‘Y’ in the “Value Required” column.

CustomFields 2 through 5 can be used by the subscriber to track information about a patient that a subscriber would like to see in the notification flat file. For example, if the patient is part of a special project or initiative, a CustomField could be used to indicate that.

Note: Only commas used to delimit fields will be included. Other commas should be removed before sending.

Replacement Patient Panel File Details

Field Name	Value Required	Max Length	Data Requirements
MemberStatus	Y	6	For replacement panels, the value will be ADD on every row.
OrganizationID	Y	50	Alphanumeric code. Provided by NC HealthConnex.
OrganizationName	Y	100	Full legal name of Organization. Provided by NC HealthConnex.
Practice	N	100	Practice within the organization
NPI	N	10	NPI of the Patient’s Primary Care Provider (if known)
PCPName	N	80	First and Last Name of the Patient’s PCP
LocalPatientID	Y	50	A single, unique identifier assigned to the patient across the organization and not shared or re-used for different patients. Examples include Enterprise ID, MRN, HICNO.
PatientLastName	Y	80	No suffixes
PatientFirstName	Y	60	No middle initials or aliases
PatientMiddleName	N	60	No aliases
PatientNameSuffix	N	60	No aliases
DateOfBirth	Y	8	Format: YYYYMMDD
Gender	Y	1	Supported Values: F = Female, M = Male, U = Unknown

Address	Y	220	Complete street address, including street number and street name; Homeless or Unhoused are acceptable values.
City	Y	50	
State	Y	2	Standard 2-digit state code.
PostalCode	Y	5	Only basic 5-digit code required (e.g. 27613)
HomePhone	Y*	10	Numbers with no spaces or special characters. E.g. 9193334444
CellPhone	N	10	Numbers with no spaces or special characters. E.g. 9193334444
WorkPhone	N	10	Numbers with no spaces or special characters. E.g. 9193334444
SSN	Y*	11	Up to 11 characters, including dashes; can be last 4 numbers only
DriversLicense	N	50	The official driver's license number
Subprogram	N	220	Alphanumeric code provided by NC HealthConnex
CustomField2	N	220	For use by Subscriber
CustomField3	N	220	For use by Subscriber
CustomField4	N	220	For use by Subscriber
CustomField5	N	220	For use by Subscriber

Y* – Panels are required to have either a phone number or a SSN for each record to be accepted.

Example Header Row

The header row should appear exactly as indicated below.

MemberStatus,OrganizationID,OrganizationName,Practice,NPI,PCPName,LocalPatientID,PatientLastName,PatientFirstName,PatientMiddleName,PatientNameSuffix,DateOfBirth,Gender,Address,City,State,PostalCode,HomePhone,CellPhone,WorkPhone,SSN,DriversLicense,Subprogram,CustomField2,CustomField3,CustomField4,CustomField5

Example Body Rows

Three example rows are provided below.

ADD,HOSP1,General Hospital,City
Obstetrics,1234567890,,4567890,Smith,Sally,Anne,,19901231,F,123 Main
Street,Greensboro,NC,23456,9193334444,9191234567,5134567890,,,,program1,,

ADD,HOSP1,General Hospital,City Family Practice,9876543219,Dr.
Jones,654321,Michael,R,Jr,19520720,M,12 Elm
St.Apt.2,Raleigh,NC,27506,9198765432,9198765432,4135556666,111223333,123456,,program2,,

ADD,PRACTICE1,Salem Pediatrics,,,,567890,Adams,Aaron,David,,20020805,M,456 Hwy 64,Holly
Springs,NC,23207,9096543214,,,777889999,,,,,

Appendix C.3 Update Patient Panel Content

The file will be a flat text file and contain a header row and at least one row in the body. Each row in the file will contain fields delimited by a “,” comma. The rows will end with the following ascii characters: carriage return (0x0D) and line feed (0x0A). All fields should be delimited, regardless of whether there is data in the field. The expected content of the body rows is depicted in the table below. The required fields are denoted by a ‘Y’ in the “Value Required” column.

CustomFields 2 through 5 can be used by the subscriber to track information about a patient that a subscriber would like to see in the notification flat file. For example, if the patient is part of a special project or initiative, a CustomField could be used to indicate that.

Note: Only commas used to delimit fields should be included. Other commas should be removed before sending.

Incremental Patient Panel File Details

Field Name	Value Required	Max Length	Data Requirements
MemberStatus	Y	6	Supported Values: ADD, UPDATE, DELETE
OrganizationID	Y	50	Alphanumeric code. Provided by NC HealthConnex.
OrganizationName	Y	100	Full legal name of Organization. Provided by NC HealthConnex.
Practice	N	100	Practice within the organization
NPI	N	10	NPI of the Patient’s Primary Care Provider (if known)
PCPName	N	80	First and Last Name of the Patient’s PCP
LocalPatientID	Y	50	A single, unique identifier assigned to the patient across the organization and not shared or re-used for different patients. Examples include Enterprise ID, MRN, HICNO.
PatientLastName	Y	80	No suffixes
PatientFirstName	Y	60	No middle initials or aliases
PatientMiddleName	N	60	No aliases
PatientNameSuffix	N	60	No aliases
DateOfBirth	Y	8	Format: YYYYMMDD
Gender	Y	1	Supported Values: F = Female, M = Male, U = Unknown
Address	Y	220	Complete street address, including street number and street name; Homeless or Unhoused are acceptable values.
City	Y	50	
State	Y	2	Standard 2-digit state code.
PostalCode	Y	5	Only basic 5-digit code required (e.g. 27613)
HomePhone	Y*	10	Numbers with no spaces or special characters. E.g. 9193334444
CellPhone	N	10	Numbers with no spaces or special characters. E.g. 9193334444
WorkPhone	N	10	Numbers with no spaces or special characters. E.g. 9193334444
SSN	Y*	11	Up to 11 characters, including dashes; can be last 4 numbers only
DriversLicense	N	50	The official driver’s license number

NC HealthConnex – NC*Notify v4.5.2+ Specifications

Subprogram	N	220	Alphanumeric code provided by NC HealthConnex
CustomField2	N	220	For use by Subscriber
CustomField3	N	220	For use by Subscriber
CustomField4	N	220	For use by Subscriber
CustomField5	N	220	For use by Subscriber

Y - Panels are required to have either phone number or SSN for each record to be accepted*

Example Header Row

The header row should appear exactly as indicated below.

MemberStatus,OrganizationID,OrganizationName,Practice,NPI,PCPName,LocalPatientID,
PatientLastName,PatientFirstName,PatientMiddleName,PatientNameSuffix,DateOfBirth,G
ender,Address,City,State,PostalCode,HomePhone,CellPhone,WorkPhone,SSN,DriversLice
nse,Subprogram,CustomField2,CustomField3,CustomField4,CustomField5

Example Body Rows

Three example rows are provided below.

ADD,HOSP1,General Hospital,City
Obstetrics,1234567890,,4567890,Smith,Sally,Anne,,19901231,F,123 Main
Street,Greensboro,NC,23456,9193334444,9191234567,5134567890,,,,program1,,
UPDATE,HOSP1,General Hospital,City Family Practice,9876543219,Dr.
Jones,654321,Madison,Michael,R,Jr,19520720,M,12 Elm St.
Apt.2,Raleigh,NC,27506,9198765432,9198765432,4135556666,111223333,123456,,progra m2,,
DELETE,PRACTICE1,Salem Pediatrics,,,,,567890,Adams,Aaron,David,,20020805,M,456 Hwy
64,Holly Springs,NC,23207,9096543214,,,,,777889999,,,,,

Appendix D: Notification Flat File Specifications

Appendix D.1 File Name

The Outbound Result File will be named according to the following naming convention:

- <DATETIME>_EventNotification-<ORGCODE>_PLUS_results.csv

Where:

- <ORGCODE> will be provided by SAS
- <DATETIME> will be formatted as YYYYMMDDHHMMSSmmm

Example: 20200410052525222_EventNotification-PRACTICE2_PLUS_results.csv

The demographics for a patient in the notification are echoed from the panel. For subscribers using auto-attribution for panels, the demographics will be pulled from the HIE's enterprise master patient index (eMPI).

Outbound Notification File Details (shaded rows indicate data provided by NC*Notify)

Name	Required	Max Length	Data Requirements
OrganizationID	Y	50	
OrganizationName	Y	100	
Practice	N	100	
NPI	N	10	
PCPName	N	80	
LocalPatientID	Y	50	
PatientLastName	Y	80	
PatientFirstName	Y	60	
PatientMiddleName	N	60	
PatientNameSuffix	N	60	
DateOfBirth	Y	8	Format: YYYYMMDD
Gender	Y	1	Supported Values: F = Female, M = Male, U = Unknown
Address	Y	220	
City	Y	50	
State	Y	2	Standard 2-digit state code.
PostalCode	Y	5	Only basic 5-digit code required (e.g. 27613)
HomePhone	N	10	Numbers with no spaces or special characters. E.g. 9193334444
CellPhone	N	10	Numbers with no spaces or special characters. E.g. 9193334444
WorkPhone	N	10	Numbers with no spaces or special characters. E.g. 9193334444
SSN	N	11	Up to 11 characters, including dashes
DriversLicense	N	50	The official driver's license number
Subprogram	N	220	Alphanumeric code provided by NC HealthConnex

NC HealthConnex – NC*Notify v4.5.2+ Specifications

CustomField2	N	220	For use by Subscriber
CustomField3	N	220	For use by Subscriber
CustomField4	N	220	For use by Subscriber
CustomField5	N	220	For use by Subscriber
SourceFeed	Y	None	Source of the original message
SourceOrganization	Y	None	Organization where the visit took place
SourceFacility	Y	None	Facility where the visit took place
SourceDepartment	Y	None	Department or unit where the visit took place
SourceMRN	Y	None	Patient MRN associated with source organization
EventDate	Y	12	Date the event was sent to NC*Notify for processing. Format YYYYMMDDHHMM
PatientClass	Y	1	E = EMERGENCY I = INPATIENT O = OUTPATIENT P = PREADMIT R = RECURRING_PATIENT B = OBSTETRICS C = COMMERCIAL_ACCOUNT N = NOT_APPLICABLE U = UNKNOWN. UNKNOWN is used for any Patient Class not matching one of these values, see Table 32, PV1 of NCQ Minimum Data Specifications.
EventType	Y	1	Clinical Event Type A = Admit/Visit D = Discharge T = Transfer
AdmitDate	N	8	Format: YYYYMMDD
AdmitTime	N	8	Format: HHMMSS
AdmitReasonCode	N	None	
AdmitReasonDescription	N	None	
AdmitTypeCode	N	None	
AdmitTypeDescription	N	None	
ReferralInfo	N	200	Referrer First Name Last Name
DischargeDate	N	8	Format: YYYYMMDD
DischargeTime	N	8	Format: DDHHMMSS
DeathIndicator	N	3	Death Indicator. Yes or No
DeathDateTime	N	14	Format: YYYYMMDDHHMMSS
DiagnosisCode	N	None	Encounter diagnosis code. If encounter diagnosis is not available, chief complaint will be provided.
DiagnosisDescription		None	Encounter diagnosis description. If encounter diagnosis is not available, chief complaint will be provided.
VisitNumber	N	None	The visit number from the organization where the encounter occurred
DischargeDispositionCode		3	Discharge Disposition Code
DischargeDispositionDescription	N	50	Discharge Disposition Description

NC HealthConnex – NC*Notify v4.5.2+ Specifications

DischargeLocationCode	N	50	Discharge Location
DischargeLocationDescription	N	None	
AttendingPhysician	N	None	
AdmittingPhysician	N	None	
ReferringPhysician	N	None	
ConsultingPhysician	N	None	
ObservationStatus	N	None	

Example Header Row

The header row will appear exactly as indicated below.

MemberStatus,OrganizationID,OrganizationName,Practice,NPI,PCPName,LocalPatientID,PatientLastName,PatientFirstName,PatientMiddleName,PatientNameSuffix,DateOfBirth,Gender,Address,City,State,PostalCode,HomePhone,CellPhone,WorkPhone,SSN,DriversLicense,Subprogram,CustomField2,CustomField3,CustomField4,CustomField5,SourceFeed,SourceOrganization,SourceFacility,SourceDepartment,SourceMRN,EventDate,PatientClass,EventType,AdmitDate,AdmitTime,AdmitReasonCode,AdmitReasonDescription,AdmitTypeCode,AdmitTypeDescription,ReferralInfo,DischargeDate,DischargeTime,DeathIndicator,DeathDateTime,DiagnosisCode,DiagnosisDescription,VisitNumber,DischargeDispositionCode,DischargeDispositionDescription,DischargeLocationCode,DischargeLocationDescription,AttendingPhysician,AdmittingPhysician,ReferringPhysician,ConsultingPhysician,ObservationStatus

Example Body Rows

Example rows are provided below.

HOSP1,General Hospital,City Obstetrics,1234567890,,4567890,Smith,Sally,Anne,,19901231,F,123 Main Street,Greensboro,NC,23456,9193334444,9191234567,5134567890,,,,program1,,,EMR,Country Family,Country Family Practice Greensboro,,345678,20200530,O,A,20200530,101521,R21,Skin Rash,3,Elective,Smith,,,,DX-123,Cond1,33334455,7,Home,,,House

PRACTICE1,Salem Pediatrics,,,,567890,Adams,Aaron,David,,20020805,M,456 Hwy 64,Holly Springs,NC,23207,9096543214,,,777889999,,,,HOSPSYSTEM2,NC Hospital System,Raleigh Hospital,3West, 135793575,20200530,E,D,,,A91,Dengue Suspect,2,Urgent,,20200530,123000,Yes,20200530,,,98765,2,,,,Jones

HOSP1,General Hospital,City Family Practice,987654321,Dr. Jones,654321,Madison,Michael,R,Jr,19520720,M,12 Elm St.,Apt. 2,Raleigh,NC,27506,9198765432,MC,999998888,123456,,,,HOSPSYSTEM,NC HospitalSystem,Hillside Orthopedics,,8642,20200530,O,A,20200530,113000,R52,Body aches,3,Elective,Clark,,,No,,DX-345,Problem2,66778899,2,,,,Wallace,Smith,Jones,Taylor,OBS