PressGaney

InfoTurn Technical Transmission Instructions

A GUIDE FOR SENDING PATIENT DATA TO PRESS GANEY

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Introduction

Your facility has partnered with Press Ganey to survey your patients to evaluate and improve patient care. A major part of the survey process is your ability to upload patient data to Press Ganey so those surveys may be administered. This document explains the steps needed to create and send your data to Press Ganey. It describes how to create and transmit the patient information we will use to prepare and distribute your surveys. Press Ganey's InfoTurn Division uses automated, state-of-the-art technology to print, fold, insert, and mail your satisfaction surveys and personalized cover letters. When the completed surveys are returned, we scan the responses into our database so that your patients' feedback is available to you in the shortest time possible.

Who should be reading this guide?

It is intended for the staff members at your facility who will be involved in the data transmission process. Often, these are members of your Information Technology team. The Press Ganey "primary contact" at your organization—working closely with your Press Ganey Client Support Specialist—will also play a key role by helping to determine the appropriate data to upload. Members of Press Ganey's Electronic Data Interchange (EDI) team are dedicated to assist you and provide ongoing support for file transmission and import. You will need to work closely with both your internal contacts and your Client Support Specialist to ensure all required data is included in your data uploads.

Key Players at Your Facility	Role
IT Contact	• Test file creation/data extraction • Data file transmission and monitoring
Primary Contact	• Test file creation – Coordinates internal needs to instruct IT contact on what data points should be included in the files

Key Players at Press Ganey	Role
Client Support Specialist	• Assists Primary Contact in determining what data to include
EDI (Electronic Data Interchange) Specialist	• Assists IT Contact with data transmission

In order for Press Ganey to be able to interpret your patient data files, a test file must be sent prior to sending any live patient data.

If you plan on making any changes to your live data files, a new test file will also be needed.

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Test Files

A test file will inform us of how your data will be organized in your regular patient uploads. This layout will help us identify each piece of patient data in your files so surveys may be administered, and patient demographic information can be identified.

HINT: Click on any of the items in the below checklist to jump to that section for more detail.

The setup process may take some time depending on the complexity of your account and any revisions that may be needed to your test file. Because of this, it is extremely important that test files are created and uploaded to Press Ganey as soon as possible to avoid any potential delays.

New Setup Test File Checklist:

- ☐ **Decide what patient data should be included in the files**
- ☐ **Determine the frequency of data uploads**
- ☐ **Determine who will monitor upload confirmations**
- ☐ **Determine who will transmit test file and send your Client Support Specialist their name and email address. Login credentials will be sent from MFT system upon creation.**
- ☐ **Determine first visit, discharge or procedure date that should be included in the first upload**
- ☐ **Create a test file**
- ☐ **Upload your test file and file layout to your MFT account test folder**
- ☐ **Receive feedback from Press Ganey regarding your test file. Send revisions as needed.**
- ☐ **Receive approval of test file**
- ☐ **Upload first live file to your MFT account Inbox folder**
- ☐ **Review upload confirmation emails on an ongoing basis to ensure successful uploads**

File Revision Checklist:

- ☐ **Notify your Client Support Specialist of any planned EMR upgrades or conversions.**
- ☐ **Determine first visit, discharge or procedure date that should be included in the first upload**
- ☐ **Decide what changes are needed to your data files**
- ☐ **Create a test file**
- ☐ **Email your file name and layout to your Client Support Specialist**
- ☐ **Upload your test file and file layout to your MFT account test folder**
- ☐ **Receive feedback from Press Ganey regarding your test file. Send revisions as needed.**
- ☐ **Send all necessary uploads and update files in old layout prior to switch**
- ☐ **Receive approval of test file**
- ☐ **Upload first live file to your MFT account Inbox folder**
- ☐ **Review upload confirmation emails on an ongoing basis to ensure successful uploads**

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Data File Formats

Press Ganey can accept standard ASCII text files in either fixed or comma-delimited format. Null characters are not permitted. The maximum record length is 1000 characters, and each record should be terminated by a carriage return line feed (CRLF), which is equivalent to pressing the ENTER key. Each field must be no longer than 50 characters, except for email address which is 60. Each line is considered one record and should not span across multiple lines. Note: Microsoft Excel XLS, Microsoft Word, and Microsoft Access documents are not permitted.

Multiple services (e.g., inpatient and outpatient testing) may be included in the same uploaded file if the approved layout for each service follows an identical format. In this situation, you may upload a field as empty if it does not apply to a particular service. For example, if inpatient records and outpatient testing records were included in the same uploaded file, the room number field would be populated in the inpatient records, but it could be left blank in the outpatient records.

Pulling Data from Your System

Because we are unfamiliar with your internal information systems, Press Ganey cannot offer advice on the specifics of how to extract your patient data. For assistance, you may contact your EMR vendor, check online forums, consult with other facilities in your system, or contact your IT vendor.

Fixed File Format

A fixed format file simply means that a particular field in every record always starts in the same column. As shown below, for example, every patient record appears on a separate line and the last name for each patient always begins in column 14, the patient's middle initial is always listed in column 25, and so on. Fixed format files are left justified and space padded. The records may not be tab delimited.

```
Survey  C_ID Last     First      Mid   Addr 1              Addr 2     City          St Zip   Various demographic data...                                E.O.R.

OU0101  1234 SMITH    MARY ANNE        410 N MAINE ST      APT 2      RED VILLAGE   IN 46601  43 052505 052705 3W  0130 LAB     123456S 123456  $
OU0101  1234 JONES    THOMAS     R.    100 W CIRCLE COURT  APT 16-A   GREENTOWN     IN 46600  27 052605 052905 4N  1620 RAD     987654J 123123  $
OU0101  1234 BROWN    SHEILA     E.    42 E 63RD                      BLUEVILLE     IN 46601  54 052405 052605 16E 4321 MAMMO  889988B 112233  $
```

Comma-Delimited File Format

Where fields begin within a comma-delimited file depends on the length of the information in each field. The fields must always be listed in the same order and are separated by commas. The commas indicate where one field ends and the next begins. Some systems add quotation marks to each field automatically, which is permissible. It is recommended that you add quotation marks to ensure that a comma within a field is not misinterpreted as a field separator (e.g., "Stephen, J." could represent the FIRSTNAME field by enclosing the text in quotation marks).

```
Survey,ClientID,Lastname,Firstname,Middle,Addr1,Addr2,City,State,Zip,Various demographic data...                                E.O.R.

OU0101,1234,SMITH,MARY ANNE,,410 N MAINE ST,APT 2,RED VILLAGE,IN,46601,43,052505,052705,3W,0130,LAB,123456S,123456,$
OU0101,1234,JONES,THOMAS,R.,100 W CIRCLE COURT,APT 16-A,GREENTOWN,IN,46600,27,052605,052905,4N,1620,RAD,987654J,123123,$
OU0101,1234,BROWN,SHEILA,E.,42 E 63RD,BLUEVILLE,IN,46601,54,052405,052605,16E,4321,MAMMO,889988B,112233,$
```

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Pipe Delimited File Format

A pipe delimited file has its fields separated by the pipe character, much like a comma delimited file is separated by commas. The fields must always be listed in the same order and are separated by a |. The pipes indicate where one field ends and the next begins. Files must have one record per line with no word wrap.

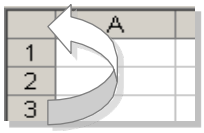
```
Survey|Client ID|LastName|FirstName|Middle|Address_1|City|State|Zip|Various_DemographicFields|End of Record($)
OU0101|1234|Ganey|Rodney|404 Columbia Pl.|South Bend|IN|46601|$
OU0101|1234|Press|Irwin|404 Columbia Pl.|South Bend|IN|46601|$
```

Excel CSV Format

We recommend that you send files in standard ASCII text format, but if Microsoft Excel is used the file should be saved as a CSV (comma-delimited) file. Records saved in CSV format can be viewed in text editors separated by commas. These instructions walk you through the process of creating an Excel CSV file. Note: Menu options may vary depending on your version of Microsoft Office. Microsoft Excel XLS, Microsoft Word, and Microsoft Access documents are not permitted.

1. Open a new Excel spreadsheet. Click the empty cell above row heading “1” and left of column heading “A.” This highlights the entire spreadsheet.

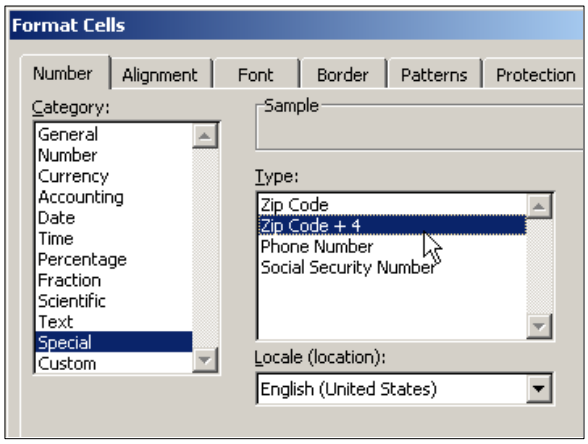
   Tip: You may also select the entire spreadsheet by pressing **CTRL + A.**



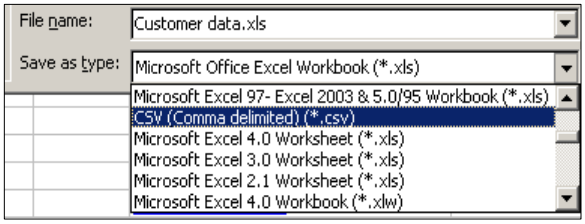
2. From the main menu, select **FORMAT > CELLS > NUMBER > TEXT** and click **OK**. This formats all cells in the spreadsheet as “Text.”

3. To populate your spreadsheet with your patient data, use the main menu to select **DATA > IMPORT EXTERNAL DATA > IMPORT DATA**. Select your source data and follow the prompts to import your text file.

4. Format the ZIP Code field as “ZIP Code.” To do this, highlight the ZIP Code column and select **FORMAT > CELLS > NUMBER > SPECIAL > ZIP CODE** or **ZIP CODE + 4**. This prevents Excel from truncating leading zeros at the beginning of ZIP Codes.



5. Save your file after import by selecting **FILE > SAVE AS**. Choose “CSV (Comma delimited) (*.csv)” under “Save as type.” This will automatically save your data as a comma-delimited file.



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New Setup Test File Checklist

Decide what patient data should be included in the files

Who to include

Each service line has its own unique set of rules regarding what type of patient visits should be included in your upload files. Please refer to the separate guide(s) for the service(s) you will be surveying for more specific guidelines.

There may be additional exclusions that your facility would like to have in place. Please work with your internal team and Press Ganey to ensure all necessary exclusions are in place.

Official HCAHPS Participants:

Please reference HCAHPS Criteria - Hospital Responsibilities for specific information on HCAHPS requirements and responsibilities.

Official OAS CAHPS Participants:

Please reference OAS CAHPS Criteria – Facility Responsibilities for specific information on OAS CAHPS requirements and responsibilities.

What to include

All files need to contain a survey designator (e.g. IN0101), client ID, patient demographics*, and an end of record marker ($). The survey designator is a code defined by Press Ganey that identifies which survey version each patient should receive. The files you build should contain everything that will be necessary to both administer surveys (like name and mailing address) along with information that will help your facility group their returned survey data in a useful way (like rendering provider, room number, or service received).

Please work with your internal team and Press Ganey to ensure all necessary data fields for reporting purposes are included in your file layout.

Note: The required patient demographics vary by service. Please speak with your Client Support Specialist and see **Field Names and Descriptions for additional details on required data fields.*

Determine the frequency of data uploads

Your upload schedule may vary depending on the patient type that is being surveyed. Some programs, such as HCAHPS or HHCAHPS, have specific deadlines that need to be followed. Other services have more flexibility. It is ideal for patients to receive a survey as soon as possible, which increases the likelihood of a survey being returned. If a patient's record is not fully coded, we can accept update files to fill in that missing information at a later date. More information on update files is included below.

Please work with your internal and Press Ganey teams to determine what upload schedule you will need to follow.

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Determine who will monitor upload confirmations

Each time a file is transmitted to Press Ganey via the File Transfer Portal, a confirmation email is sent to recipients at your facility. These emails can be extremely helpful in monitoring the success of your uploads as they indicate how your file was processed. Your Client Support Specialist will provide you with a guide for interpreting upload confirmations, so you and your team are able to help monitor the success of your uploads.

A facility's primary and IT contacts are generally the best equipped to monitor upload confirmations. Although your Client Support Specialist helps to monitor your uploads and will alert you if any major issues arise, we need your assistance to verify that your data is being transmitted appropriately. For example, Press Ganey may not know about a file that was supposed to be sent on a particular day but did not get transmitted. In these instances, it is important that someone at your facility monitors the upload process and ensure an upload confirmation email is received each time a file is sent.

Please inform your Client Support Specialist about whom you would like to receive your upload confirmation emails.

Determine first visit/discharge date that should be included in the first upload

Create a test file

After you've reviewed this guide and have discussed what patient data needs to be included in your upload files, a test file will need to be sent to Press Ganey for review. Real patient data should be used in this test file to help ensure the formatting and layout matches what will appear in the live files.

Provide Press Ganey with a file layout, either as a header or separate file.

A file layout (the "map" that tells us which demographic field will appear in each column of your uploaded records) must be provided, either as a header row within the file or in a separate document that is uploaded along with your test file to the MFT Test folder. Files must consistently follow the layout that is tested and approved. Deviations will result in processing failures. If you need to alter the layout, please work with your Client Support Specialist to coordinate.

Files should be sent in either comma delimited or fixed format. Please see the section on **Data File Formats** for additional details.

As we are unfamiliar with your internal information systems, Press Ganey cannot offer advice on the specifics of how to extract your patient data. We recommend that individuals familiar with your databases extract the information or contact the vendor that supports your applications.

Determine who will send test files

Determine who will transmit test files and send your Client Support Specialist their name and email address. Login credentials will be sent from the File Transfer Portal system upon creation

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Upload your test file to Press Ganey via the File Transfer Portal

Patient data must be uploaded to Press Ganey via HTTPS or SFTP to ensure patient PHI is protected. You can find more information about transmitting data in the section **Transmitting Patient Data to Press Ganey**.

The name of your file must include both your client ID and the word "test". This will help ensure your data is easily identified and placed in the correct queue for testing.

When you send your test file, please be sure to notify your Client Support Specialist so they may ensure the file is picked up and assigned for testing as quickly as possible. Be sure to include your file name and layout.

Test files must contain the word TEST and your client ID as part of the file name.

Receive feedback from Press Ganey regarding your test file / Send revisions as needed

A Press Ganey EDI will be assigned to review your test file and will provide feedback on any changes needed, if any. When resubmitting a test file, please follow the same process as when sending your initial test file.

Receive approval of test file

Once your test file has been approved and we are ready to receive live patient data, either a member of the Press Ganey EDI team or your Client Support Specialist will notify you that we are ready for live patient data.

Upload first live file via the File Transfer Portal Inbox

The MFT test folder is only for test files, therefore all live files moving forward must be sent to Inbox. **Files uploaded to the test folder will not process or generate surveys**. Before sending your first live file, check with your Client Support Specialist to verify the first visit/discharge/procedure date that should be included.
Live data file specifications:

- Files should be named **XXXXXmmddyyyy.csv**. The XXXXX represents your unique client ID assigned by Press Ganey and mmddyyyy represents the month, day, and year the file is transmitted.
- Avoid using special characters in the file name as it may cause your file to be rejected.
- If you are sending multiple client IDs in one file, just use one client ID as part of the naming convention. If you send multiple files daily, file names must be unique (i.e., XXXXXMMDDYYYY_1, XXXXXMMDDYYYY_2).
- Files should not be any larger than 2GB

Review Upload Confirmation emails on an ongoing basis to ensure successful uploads

Your Client Support Specialist will provide you with a guide to help interpret Upload Confirmation emails.

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Notify your Client Support Specialist of any planned EMR upgrades or conversions

Any changes made to your EMR will likely affect the patient data you are uploading to Press Ganey. Things that are often changed with these upgrades/conversions, like coding, can affect your extract queries and cause patients to be excluded or included from your upload files inappropriately. If your facility plans on upgrading or changing their EMR, please check with your internal data extraction team to determine whether the proposed upgrade will affect the data. If the data changes, please contact your Client Support Specialist as soon as possible to discuss how it may change the way your patient data is being uploaded.

Field Names and Descriptions

The following information describes the content of each field that may be uploaded. Not all fields are required for all services. Please consult your service specific guides for details on what is required for each service you are surveying.

It is important that these fields are populated accurately and in the correct format because some of these fields will drop on the actual survey the patient receives and are also used for reporting purposes. The service or survey type determines the most appropriate fields to include.

Note: Due to the number and complexity of required fields, Safety Culture, PCMH, Minnesota CG CAHPS, Home Health CAHPS and Hospice CAHPS requirements are noted in their respective service line specific ITTI guides.

Field Name	Description	Max Field Length	Required for All Services	Required for Medical Practice	Official HCAHPS Inpatient	Official OASCAHPS Amb. Surg.
Survey Designator †‡	Alphanumeric code that indicates the survey version a patient should receive. Assigned to you by Press Ganey.	8	X	X	X	X
Client ID †‡	Client identification number assigned to you by Press Ganey	7	X	X	X	X
Last Name	Patient or responsible party's last name	25	X	X	X	X
Middle Initial	Patient or responsible party's middle initial	1	X	X	X	X
First Name	Patient or responsible party's first name	20	X	X	X	X
Address 1	Address survey should be mailed to. Abbreviations may be rejected	40	X	X	X	X
Address 2	Apartment, Suite, etc.	40	X	X	X	X
City	City spelled out. Abbreviations may be rejected	25	X	X	X	X
State	Standard U.S.P.S. two-letter state abbreviation	2	X	X	X	X
ZIP Code	Five digits. Four-digit extension is acceptable	10	X	X	X	X

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Field Name	Description	Max Field Length	Required for All Services	Required for Medical Practice	Official HCAHPS Inpatient	Official OASCAHPS Amb. Surg.
Telephone Number	Customer or patient telephone number (standard 10-digit numeric value, no extensions or parenthesis – xxx-xxx-xxxx). Primarily used for administering phone surveys.	12	X	X	X	X
Mobile Number	Customer or patient mobile phone number (standard 10-digit numeric value, no extensions or parenthesis – xxx-xxx-xxxx). Primarily used for administering survey invitations via text message.	12	X	X	X	X
MS-DRG †	Medicare Severity Diagnosis Related Group. PG will convert to CMS-required Service Line. Note: Records uploaded with an MS-DRG of 999 (formerly DRG 470) will be considered ineligible. Must be the current version MS-DRG codes for all records, *regardless of payer.* (UB-04 field 71)	3			X	
Gender	1 = Male; 2 = Female; U = Unknown/Missing	1	X	X	X	X
Race	Customer's race	50				
Ethnicity	Customer's ethnicity	50				
Date of Birth †‡	Customer's date of birth (mmddyyyy)	10	X	X	X	X
Language	Primary language -see Survey Language Codes. Will trigger a foreign language survey to mail if a survey is activated in that language.	50	X ***for foreign language surveys only***	X ***for foreign language surveys only***	X	X
Medical Record Number †	Number unique to a patient. Enterprise/Global MRN required for PX Connect Suite for Epic®.	20	X	X	X	X
Unique ID	Number unique to patient's visit. Acceptable codes include account #, visit #, encounter #, CSN, etc.). **Do not use SSN.**	50	X	X	X	X
Location Code	Distinguish between multiple sites, clinics, or provider practices	50		X		
Location Name	Distinguish between multiple sites, clinics, or provider practices as it should appear on survey materials (if used)	50		X		
Attending Physician NPI	National Provider Identifier, unique to each physician	50		X		
Attending Physician Name	Provider's name as it should appear on survey materials (e.g. Dr. John Smith)	50		X		
Provider type	Physician, Nurse Practitioner, Physician Assistant, etc.	50		X	X	
Provider specialty	ABMS approved specialty for provider if applicable	50		X	X	
Site address 1	Physical address of site. Abbreviations may be rejected	40		X	X	
Site address 2	Site's apartment, Suite number, etc.	40		X	X	

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Field Name	Description	Max Field Length	Required for All Services	Required for Medical Practice	Official HCAHPS Inpatient	Official OASCAHPS Amb. Surg.
Site city	Site's city spelled out. Abbreviations may be rejected	25		X	X	
Site state	Site's state; standard U.S.P.S. two-letter state abbreviation	2		X	X	
Site zip	Site's zip; five digits. Four-digit extension is acceptable	10		X	X	
Patient Admission Source ‡‡	UB-04 data, field 15 – see Valid Admission Source and Discharge Status Codes	1			X	X
Visit or Admit Date †	Date of visit, admission or start of care (mmddyyyy)	10	X	X	X	X
Visit or Admit Time	Time of visit or admission (military time)	5				
Discharge Date	Date of discharge (date of procedure for OAS) (mmddyyyy)	10	X		X	X
Discharge Time	Time of discharge (military time)	5				
Patient Discharge Status ‡‡	UB-04 data, field 17 – see Valid Admission Source and Discharge Status Codes	2			X	X
Unit	Nursing unit or area within facility, if applicable. Generally used to group data in reports.	50				
Service	Last service patient received (x-ray, lab, radiology, etc.) as it should appear on survey materials (if used)	50				
Specialty	Identifies the service type/specialty of the patient's visit. This field is used for reporting purposes to provide specialty level benchmarking	50				
Payor / Insurance / Financial Class	Insurance (do not send patient account information, send only insurance company information)	50				
Length of Stay	Length in days, if applicable	50				
Room	Room number, if applicable	50				
Bed	Bed number patient resided in	50				
Hospitalist	Attending physician is a hospitalist; 1=yes; 2=no	50				
Fast Track or Acute Flag	Identifies fast track vs. acute within the ED; 1 = fast track; 2 = acute. This field is used for reporting purposes and to provide benchmarking.	1				
Email	Patient's email address	100	X *for email surveys only*	X *for email surveys only*	X *for email surveys only*	X *for email surveys only*
Hospitalist_1	Unique physician ID (NPI) of hospitalist who cared for the patient (must be a hospitalist). Requirement is to include hospitalists who had the most interaction with the patient based upon the time component of Evaluation and Management (E & M) codes from the hospitalist billing system (Please see Identifying Hospitalists in Patient Uploads document for specific information). Two Hospitalists must be identified for each patient.	50			X *for the hospitalist survey only*	

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Field Name	Description	Max Field Length	Required for All Services	Required for Medical Practice	Official HCAHPS Inpatient	Official OASCAHPS Amb. Surg.
Hospitalist_2	Please see above (Hospitalist_1). Two Hospitalists must be identified for each patient.	50			X *for the hospitalist survey only*	
ER_ADMIT	Identifies if the patient was admitted through the Emergency Department, if applicable	1			X	
Other Diagnosis or Procedure Code	Other patient visit data that would enable your facility breakout data by service, procedure, or diagnosis. Example: ICD-10, internal procedure or service codes	50				
Procedure Code 1 ‡	CPT or G Codes UB-04 data, field 44 ***Category I:*** Codes for Surgery: 10004-69990, (New 1/2025) Codes for Medicine: 92920, 92921, 92928, 92929, 92978, 93451-93462, 93566-93572, 93985, 93986 ***Category II:*** 4 Eligible G Codes: G0104, G0105, G0121, G0260 Please include up to 6 Category I CPT codes or the eligible Category II G codes and PG will determine eligibility. Each code must be in a separate field. The primary procedure code should appear in Procedure Code 1	10				X
Procedure Code 2 ‡		10				X
Procedure Code 3 ‡		10				X
Procedure Code 4 ‡		10				X
Procedure Code 5 ‡		10				X
Procedure Code 6 ‡		10				X
Deceased Flag †‡	Identifies patients who are deceased. Must use Y or N	1			X	X
No Publicity Flag †	Identifies patients who do not wish to have their information shared. Must use Y or N	1			X	
State Regulation Flag †	Identifies patients whose records are restricted due to state regulations. Must use Y or N	1			X	
Newborn patient †	Identifies newborns. Must use Y or N	1			X	
Transferred/admitted to inpatient ‡	For Ambulatory Surgery/OAS CAHPS only – Identifies patients who were transferred or admitted as inpatients (if you cannot identify through discharge status codes). Must use Y or N	1				X
MyChart® Status (Epic® Only)	My Chart® Status (EPT 28006) External Value. Required for Epic MyChart® Surveying	50				
My Chart® Expiration (Epic® Only)	My Chart® Expiration Date (EPT 28200). Required for Epic MyChart® Surveying	10				
Visit Type (Epic® Only)	Visit Type (EPT 30) Mapped via DXR 8024 using ID. Required for Epic MyChart® Surveying	10				
CSN (Epic® Only)	Epic® Contact Serial Number. Required for PX Connect Suite for Epic®. (EPT 8)	50				
E.O.R Indicator	End-of-record marker (i.e. $)	1	X	X	X	X

† These fields are required by Press Ganey to determine HCAHPS eligibility and meet CMS specifications
‡ These fields are required by Press Ganey to determine OAS CAHPS eligibility and meet CMS specifications

Exclusion flag fields: Values of "Y" or "Yes" in the Deceased, No Publicity, State Regulation, Newborn or Transferred/admitted to inpatient flag fields will exclude a patient record from being sampled. Values of "N" or "No" will allow the patient record to be sampled.

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OAS Note: ASCs may not be able to send data in the Patient Admission Source and Patient Discharge Status fields. If that is the case, we encourage them to utilize the Transferred/admitted to inpatient field so Press Ganey can determine patient eligibility. **State Regulation and No Publicity patients must not be included in OAS files.**

Race and Ethnicity Field Information

- Organizations ***should*** upload fields for Race and Ethnicity for all PX services.
  - Organizations should upload separate fields for Race and Ethnicity rather than combining into a single field.
- When organizations send data about Race and Ethnicity, they should minimize sending blank fields or fields that indicate an unknown (e.g., unknown, missing, not available).
- The values for the Race and Ethnicity fields should be text based and interpretable to any user. That is, they should be words like 'Asian' not be a list of codes (e.g., 1, A, AS, R1) that need a key to define them.
  - Note that if your organization is already using FHIR code standards within HL7 to code for Race and Ethnicity, Press Ganey can accept that national standard of codes in lieu of text-based value labels.
- The values being sent to define Race and Ethnicity should be consistent across locations and survey populations within the system. That is, the same group should be represented with the same spelling and abbreviations, rather than several different formats, spellings or abbreviations to denote the same group.
- At minimum, the values being sent should define the broad racial groups for Race and denote membership within the Hispanic/Latino identify for Ethnicity. In addition, there should be options to denote 'Prefer not to answer' as well as 'Other' and 'Two or more races' (for the Race variable).
  - Below is the minimum set of categories that should be provided – note that your spelling/abbreviations may vary but each of the below should be represented.
    - RACE
      - American Indian or Alaskan Native
      - Asian
      - Black or African American
      - Native Hawaiian or other Pacific Islander
      - White or Caucasian
      - Other
      - Two or more races
      - Prefer not to answer
    - ETHNICITY
      - Hispanic/Latino
      - Not Hispanic/Latino
      - Prefer not to answer
  - It is also possible to provide additional values that provide more specific information about an individual's background such as 'Chinese' as a value for Race or 'Cuban' as a value for Ethnicity.

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HCAHPS Valid Admission Source and Discharge Status Codes

Note: For reference, below are listed all valid admission and discharge codes.

Patient Admission Source (*UB-04, field 15)*	***HCAHPS Eligible Codes*** 1 = Non-health care facility point of origin 2 = Clinic referral 4 = Transfer from a hospital 5 = Transfer from an SNF or ICF 6 = Transfer from another health care facility 9 = Information not available	D = Transfer from one distinct unit to another distinct unit of the same hospital E = Transfer from ambulatory surgery center F = Transfer from hospice facility G= Transfer from a Designated Disaster Alternative Care Site (ACS) ***HCAHPS Ineligible Codes*** 8 = Court/law enforcement
Patient Discharge Status (*UB-04, field 17)*	***HCAHPS Eligible Codes*** 01 = Home care or self-care 02 = Another short-term general hospital 04 = Intermediate care facility (ICF) 05 = Cancer center or children's hospital 06 = Home with home health services 07 = Left against medical advice 09 = Admitted as an inpatient to this hospital 43 = Discharged to federal health care facility 62 = Inpatient rehabilitation facility 63 = Long-term care hospital 65 = Psychiatric hospital or psychiatric unit 66 = Transfer to critical access hospital 69 = Discharged to designated disaster alternative care site 70 = Other type of health care institution 81 = Discharged to home with planned acute care hospital inpatient readmission 82 = Discharged to a short-term general hospital for inpatient care with planned AC hospital inpatient readmission 84 = Discharged to custodial or supportive care facility with planned AC hospital inpatient readmission 85 = Discharged to cancer center or children's hospital with planned AC hospital inpatient readmission 86 = Discharged to home under HH organization with planned AC hospital inpatient readmission 88 = Discharged to federal health care facility with planned AC hospital inpatient readmission 90 = Discharged to IRF with planned AC hospital inpatient readmission	91 = Discharged to a Medicare certified LTCH with planned AC hospital inpatient readmission 93 = Discharged to psychiatric unit with planned AC hospital inpatient readmission 94 = Discharged to CAH with planned AC hospital inpatient readmission 95 = Discharged to another type of health care institution not defined elsewhere in this code list with planned AC hospital inpatient readmission M = Missing ***HCAHPS Ineligible Codes*** 03 = Skilled nursing facility (SNF) 20 = Expired 21 = Discharged to court/law enforcement 30 = Still a Patient 40 = Expired at home 41 = Expired in a medical facility 42 = Expired, place unknown 50 = Hospice – home 51 = Hospice – medical facility 61 = SNF swing bed within hospital 64 = Certified Medicaid nursing facility 83 = Discharged to SNF with planned AC hospital inpatient readmission 87 = Discharged to court/law enforcement with planned AC hospital inpatient readmission 89 = Discharged to hospital-based Medicare approved swing bed with planned AC hospital inpatient readmission 92 = Discharged to nursing facility certified under Medicaid but not Medicare with planned AC hospital inpatient readmission

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OAS CAHPS Valid Admission Source and Discharge Status Codes

Note: For reference, below are listed all valid admission and discharge codes.

Patient Admission Source (*UB-04, field 15*)	***OAS CAHPS Eligible Codes*** 1 = Non-health care facility point of origin 2 = Clinic referral 4 = Transfer from a hospital 6 = Transfer from another health care facility 9 = Information not available	D = Transfer from one distinct unit to another distinct unit of the same hospital E = Transfer from ambulatory surgery center F = Transfer from hospice facility G = Transfer from a Designated Disaster Alternative Care Site (ACS) ***OAS CAHPS Ineligible Codes*** 5 = Transfer from an SNF or ICF 8 = Court/law enforcement
Patient Discharge Status (*UB-04, field 17*)	***OAS CAHPS Eligible Codes*** 01 = Home care or self-care 04 = Intermediate care facility (ICF) 05 = Cancer center or children's hospital 06 = Home with home health services 07 = Left against medical advice 43 = Discharged to federal health care facility 62 = Inpatient rehabilitation facility 63 = Long-term care hospital 69 = Discharged to designated disaster alternative care site 70 = Other type of health care institution 81 = Discharged to home with planned acute care hospital inpatient readmission 84 = Discharged to custodial or supportive care facility with planned AC hospital inpatient readmission 85 = Discharged to cancer center or children's hospital with planned AC hospital inpatient readmission 86 = Discharged to home under HH organization with planned AC hospital inpatient readmission 88 = Discharged to federal health care facility with planned AC hospital inpatient readmission 90 = Discharged to IRF with planned AC hospital inpatient readmission 91 = Discharged to a Medicare certified LTCH with planned AC hospital inpatient readmission 95 = Discharged to another type of health care institution not defined elsewhere in this code list with planned AC hospital inpatient readmission M = Missing	***OAS CAHPS Ineligible codes*** 02 = Another short-term general hospital 03 = Skilled nursing facility (SNF) 09 = Admitted as an inpatient to this hospital 20 = Expired 21 = Discharged to court/law enforcement 40 = Expired at home 41 = Expired in a medical facility 42 = Expired, place unknown 50 = Hospice – home 51 = Hospice – medical facility 61 = SNF swing bed within hospital 64 = Certified Medicaid nursing facility 65 = Psychiatric hospital or psychiatric unit 66 = Transfer to critical access hospital 82 = Discharged to a short-term general hospital for inpatient care with planned AC hospital inpatient readmission 83 = Discharged to SNF with planned AC hospital inpatient readmission 87 = Discharged to court/law enforcement with planned AC hospital inpatient readmission 89 = Discharged to hospital-based Medicare approved swing bed with planned AC hospital inpatient readmission 92 = Discharged to nursing facility certified under Medicaid but not Medicare with planned AC hospital inpatient readmission 93 = Discharged to psychiatric unit with planned AC hospital inpatient readmission 94 = Discharged to CAH with planned AC hospital inpatient readmission

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Survey Language Codes

Include one of the following codes in the Language field of each patient record to tell us what language to print on the survey.

Language	Code
Albanian	57
Amharic	68
Arabic	22
Armenian	31
Bengali	60
Bosnian	50
Bosnian-Croatian	49
Bosnian-Muslim	48
Bosnian-Serbian	32
Cambodian	34
Chao-Chou	41
Chinese-Simplified	12
Chinese-Traditional	10
Chuukese	23
Creole	21
Croatian	52
Dari	67
English	0
English/Spanish	33
Farsi	59

Language	Code
French-Canadian	35
French-France	20
German	4
Greek	7
Haitian-Creole	36
Hakha Chin	66
Hebrew	37
Hindi	38
Hmong	26
Ilocano	56
Indonesian	42
Italian	5
Japanese	28
Korean	29
Laotian	43
Malayan	44
Malayalam	58
Marshallese	24
Nepali	69
Oromo	70

Language	Code
Pashto	71
Polish	6
Portuguese-Brazilian	8
Portuguese-Continental	47
Punjabi	54
Romanian	55
Russian	3
Samoan	25
Serbian	51
Somali	27
Spanish	1
Swahili	45
Tagalog	30
Tamil	64
Telugu	65
Thai	46
Turkish	53
Urdu	39
Vietnamese	13
Yiddish	40

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Transmitting Patient Data to Press Ganey

In our role as your Business Associate under the HIPAA Security Rule, Press Ganey is responsible for protecting your patient data once we receive it. We also want to make sure you transmit the data to us in the most secure way possible. We support several methods for file transfer, and some are more secure than others. You should consult with your own security and privacy resources if you have concerns about which of these transmission methods is appropriate for you.

Methods of Transmission

Press Ganey accepts files via **SFTP** (SSH File Transfer Protocol, **FTPS** (FTP Over SSL) and **HTTPS** (Hyper Text Transfer Protocol Secure).

Because email is not secure, we DO NOT accept Protected Health Information (PHI) via email.

The EDI Specialist will create an account for your data transmissions. This account will contain an Inbox, Outbox and Test folder. Only the test folder will be available during the onboarding phase. Once we are ready to begin survey administration, your Inbox and Outbox will be activated. Regular patient data uploads used for survey administration will be sent to the Inbox. The Outbox will be used to send files back to you. These may include raw data files (xml), bad address and upload results files, to mention a few.

Press Ganey File Transfer Portal Information

File Transfer Portal can be accessed through a standard web browser. From there, you will be able to connect and transfer data to and from the available folders. Individual users must have their own login credentials. These credentials will follow standard Press Ganey security procedures for password changing and resetting. You will find the Press Ganey File Transfer Portal here: https://pgds.pressganey.com.

Receiving your new credentials

You will receive a pair of emails from Press Ganey MFT. The first will have your new Username. The second will contain the password for this account.

Individual accounts will have passwords that expire every 90 days. To change your password, go to the web portal and type in your username. Then click on the Forgot Password button.

Service Accounts

Service Accounts used for automated transfers must use SSH Key Authentication. Please send your public key to Press Ganey Client Support (applicationsupport@pressganey.com). Upon creation of the account, you will receive an email with your username for the automated service account.

Instructions for creating an SSH key Pair can be found on pages 22-24.

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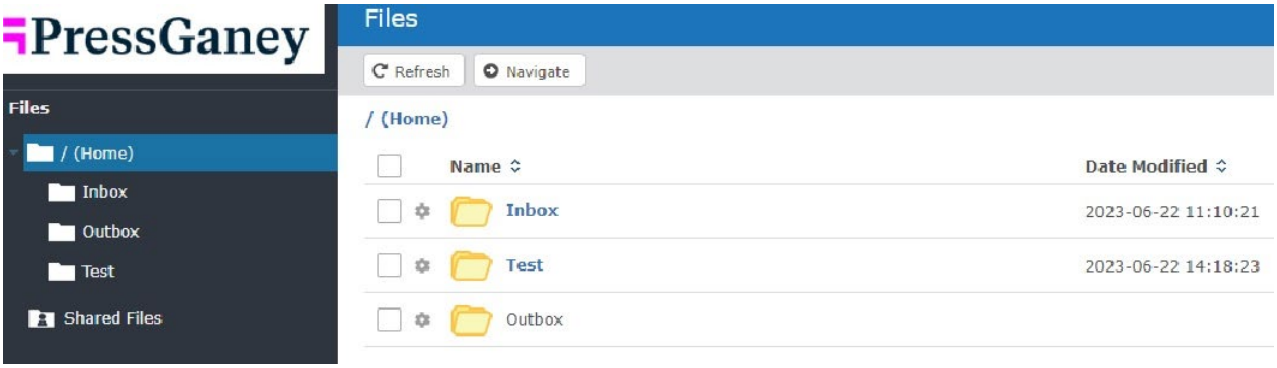
There are several secure methods of transferring files to or from Press Ganey. You can transfer data using our File Transfer Portal website, https://pgds.pressganey.com or an FTP Client software application (there are several free options, such as FileZilla, or Core FTP Lite). The address is the same for both the File Transfer Portal and FTP Client Software Applications.

The connection will be encrypted using HTTPS, SFTP or FTPS. This makes it unnecessary to encrypt files before sending them to Press Ganey. However, you may do so if you wish. If you choose to encrypt your files, they must be encrypted with the Press Ganey PGP Public key.

(https://helpandtraining.pressganey.com/pg_public_04162024/)

After logging in, you will see several folders like this:



- **Inbox** - live uploads
- **Test** - test files
- **Outbox** or **XML Outbox** - files downloaded from Press Ganey

You may see more than one Inbox if you upload to more than one client number and these will be clearly marked. The same is true for the Outbox if you download information from more than one client number.

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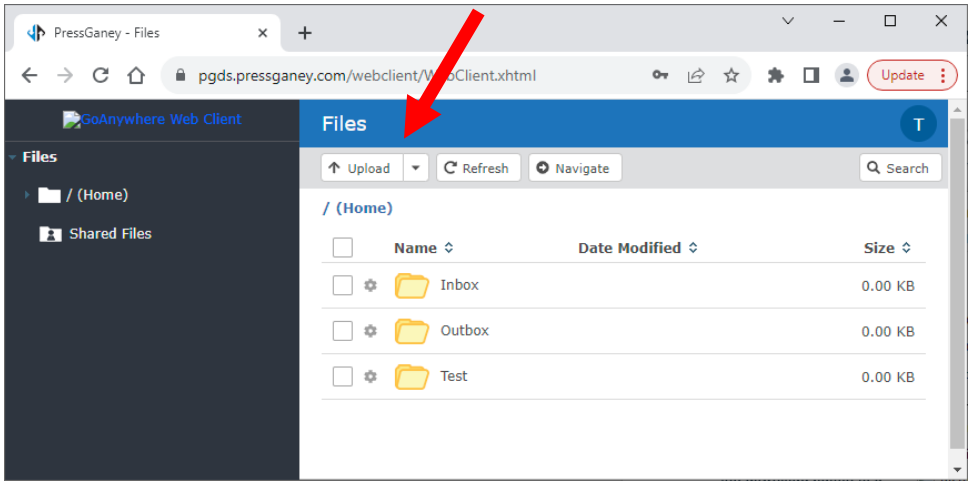
Uploading files to Press Ganey

To upload a file, click into the appropriate folder. Click the upload button and navigate to the file you wish to upload to Press Ganey.

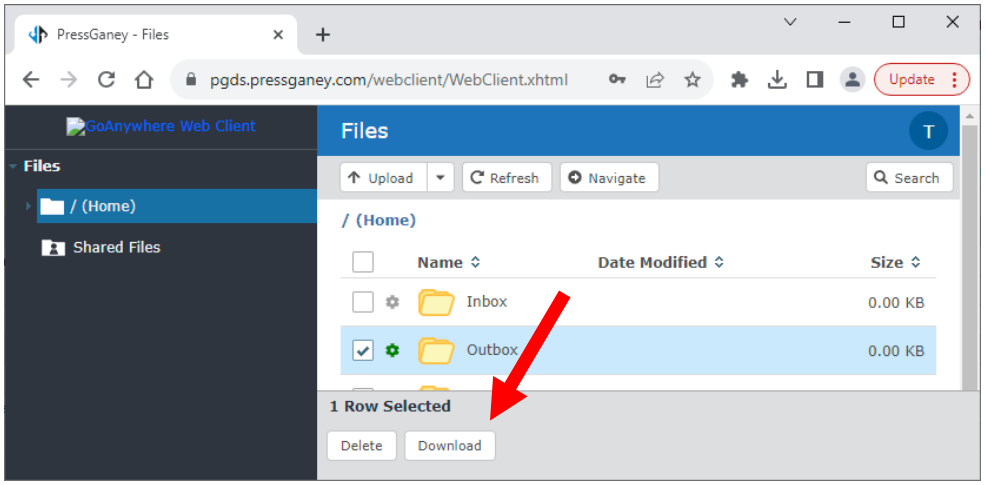


Files placed in the test folder will be moved by the Press Ganey system to an internal staging folder that is monitored by the EDI team. This happens rather quickly, so don't be surprised if the files disappear from your folder after just a few seconds.

Files placed in the inbox folder will be picked up and placed in the queue for processing. If you receive email confirmations with upload results, these will continue as they have in the past.

Downloading files from Press Ganey

If you received reports from Press Ganey, you will be able to access those reports from your MFT account instead of having a separate username and password. The Outbox or XML Outbox folder will be linked to the folders where your reports are stored. Click on the appropriate folder and you will see the reports listed and the download button to assist you in downloading these reports. If you access more than one download folder for your organization, you may have multiple outboxes, and these will be clearly marked.



If you encounter any issues logging into the MFT System, please contact the Press Ganey EDI Team at 574.401.8862. If you have any questions about the creation or contents of your patient data files, please contact your IT administrator or EMR Vendor for assistance.

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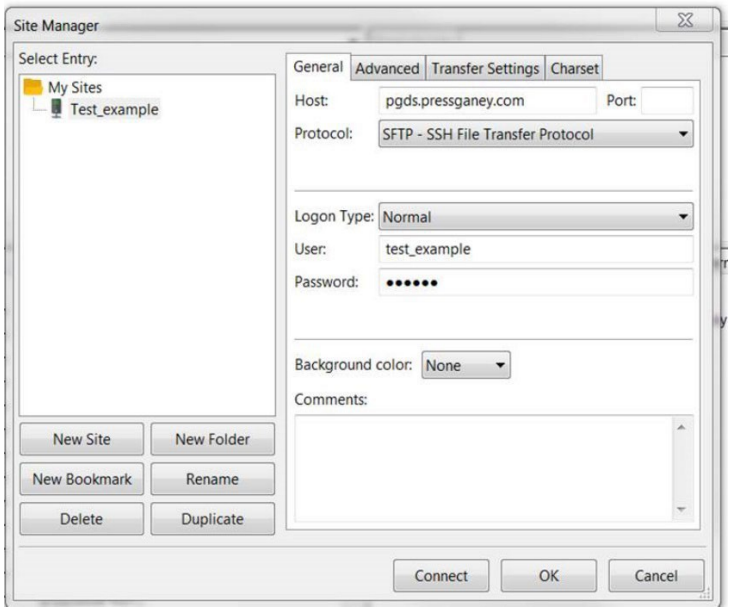
Using FTP Client Software to Transfer Data

You may also access your file transfer account via commonly used FTP client software such as FileZilla, WS_FTP & WinSCP. You may also use your own script to automate the transfer process. Please inform the EDI Specialist that you will be automating your transfer, and they will set up a server/service user account that follows a separate security procedure (SSH Key Authentication).

- Data uploaded to the InfoTurn server is automatically imported into the system. The next production run processed by InfoTurn will include the data.
- Do not ZIP files.
- All files must be uploaded in BINARY MODE.
- FTP site = pgds.pressganey.com
- The IP address for pgds.pressganey.com is 20.186.49.115 (subject to change).
- Please notify your Client Support Specialist when a test file has been transmitted. Be sure to include your Client ID, the test file name and the file layout that describes the content and order of the fields in your file.
- ***Press Ganey does not provide support for automating the transfer process. Please contact your software vendor for assistance.***

Within your FTP Client software, enter pgds.pressganey.com as the host and the system generated Username and Password you received via email. After your initial login, you can create a new password. Your login credentials are the same for the File Transfer Portal and FTP Client software.



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SSH Key Generation

1. Why SSH Key Authentication Is Required for Service Accounts

Secure File Transfer Protocol (SFTP) uses **SSH (Secure Shell)** to securely authenticate users and encrypt data in transit.

Instead of usernames and passwords, **Press Ganey requires SSH key based authentication**, which:

- Is **more secure** than passwords
- Prevents brute-force and credential-theft attacks
- Allows automated and unattended file transfers
- Meets standard security and compliance best practices

With SSH authentication:

- **You keep the private key** (never shared)
- **Share only the public key** with Press Ganey
- Access is granted only if the keys match

2. Overview of What You Will Do

On a Windows system, you will:

1. Install an SSH key generation tool
2. Generate an SSH key pair (public + private key)
3. Store the private key securely
4. Share the public key with Press Ganey
5. Use the private key when connecting to our SFTP host

3. Required Software (Windows)

OpenSSH (Built into Modern Windows)

- Windows 10 and later include OpenSSH by default.
- You may already have it installed. This option is suitable for advanced or command-line users.

4. Creating an SSH Key Pair (OpenSSH – Command Line)

If using OpenSSH:

1. Open **Command Prompt** or **PowerShell**
2. Run: ssh-keygen -t rsa -b 4096 (minimum 2048 bit, 4096 recommended)
3. When prompted:
    - Accept the default file location
    - Enter a passphrase (recommended)

This creates the keys in your home directory C:\Users\<USERNAME>\.ssh\

- **Private key**: id_rsa
- **Public key**: id_rsa.pub

The public key is already in **OpenSSH format**.

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Notes and Common Variations

- <USERNAME> is the Windows login user who ran ssh-keygen
- The .ssh directory is **hidden by default**
- If the directory does not exist, OpenSSH creates it automatically

If run as a different account

- **Administrator / service account**: C:\Users\Administrator\.ssh\
- **Automated service or scheduled task**: The keys are created under **that account's profile**, not the interactive user

5. Only share the public key

You may provide it as:

- The .pub file
- Or the full public key text (preferred)

❌ **Do NOT share**

- Private key files (.ppk, id_rsa)
- Passphrases
- Screenshots of private keys

6. How Press Ganey Uses Your Public Key

Once we receive your public key:

1. We install it on our SFTP host
2. It is mapped to your SFTP account
3. You authenticate using your private key
4. Password authentication is disabled (for security)

7. Using the Key to Connect (High Level)

When connecting via an SFTP client:

- Configure the connection to:
    - Use **SFTP**
    - Specify your **private key**
    - Enter your key passphrase (if set)

Popular SFTP clients:

- PuTTY / PSFTP
- WinSCP
- FileZilla (with SFTP support)

8. Key Security Best Practices

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- Store private keys in a secure location
- Restrict file permissions where possible
- Rotate keys every 12 months
- Use one key per system or application
- Do not email private keys

HCAHPS Criteria – Hospital Responsibilities

Based on current CMS protocol, your responsibilities are listed below.

- **Send all Inpatient discharges within 35 days of discharge**
- **Press Ganey does not keep a record of state exclusion regulations. Please refer to your Internal Counsel for more information.**
- **Update required data that was either missing or incorrect at the time of upload.**
    - Addresses may be corrected with an update file. Records identified as having invalid addresses are noted in the **Invalid Contact Report**.
- **Indicate which fields and values will identify patients who are not eligible for HCAHPS but who should be included for other Press Ganey inpatient sampling.**
    - Example: Observation patients who are not admitted as inpatients but who you would like to receive some type of inpatient survey.
- **The most current version of MS-DRG codes must be sent for all patient records, *regardless of payer*.**
    - If different DRG versions are sent - This will result in an incorrect CMS service line determination and will require notification to the HCAHPS Project Team.
    - If current MS-DRG codes cannot be sent for all records - An exception request may need to be submitted to CMS for approval. Please notify your Client Support Specialist as soon as possible if you are unable to send MS-DRG codes for all patients.
    - If MS-DRG is not available at the time of upload - DO NOT use a value of 999 as a placeholder. This value identifies the record as ineligible for HCAHPS and will result in a discrepancy. MS-DRG may be left blank and can be populated with an update file at a later date.

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OAS CAHPS Criteria – Facility Responsibilities

Based on current CMS protocol, your responsibilities are listed below.

- **Upload patient records by the 15th of the following month**
- **In alignment with CMS' definition of HOPDs and ASCs (described at the end of this section), include all eligible surgical encounters in your upload, taking steps to ensure correct handling of the following special populations:**
  - **Observation**
    - Patients kept for Observation after an outpatient surgical encounter are potentially OAS CAHPS eligible and therefore must be uploaded (unless they are formally admitted as an Inpatient).
  - **Inpatient Admissions**
    - Patients transferred/admitted to the inpatient level of care after a surgical encounter are not eligible for official OAS CAHPS and therefore it is permissible to omit this population from the ambulatory surgery upload files. However, if you would like to administer unofficial OAS CAHPS or another survey from the ambulatory surgery service line to this population, they need to be uploaded as an ambulatory surgery record with the correct discharge status.
      - **Note**: this means if you choose to include this population under Ambulatory Surgery and are also surveying your Inpatients with Press Ganey, you will upload these patient encounters twice: once under ambulatory surgery for their surgical encounter and again under inpatient for their subsequent inpatient discharge.
  - **State Regulated and No Publicity**
    - These patient populations MUST be excluded from your extract file.
    - This CMS rule differs from HCAHPS. State Regulation and No Publicity patients should be sent for HCAHPS but not for OAS CAHPS.
      - **Note:** Press Ganey does not keep a record of state exclusion regulations. Please refer to your internal counsel for more information.
    - If you wish to have one file layout across CAHPS services, Press Ganey requires a signed attestation that State Regulated and No Publicity patients will be excluded from your OAS file. The Press Ganey data ingress process will then ignore these fields for OAS CAHPS records.
  - **Cancelled and Discontinued Procedures**
    - These records do not need to be uploaded; if you would like to include them in your upload file, please discuss this with your Client Support Specialist. These records must be distinctly identifiable in the demographic data you provide so they can be excluded from the official surveying process. Your Client Support Specialist will need additional details on the field(s) and value(s) that will identify these records to configure the setup correctly.
    - One method is to include additional fields for the CPT modifiers in your file layout; if you would like to utilize this method, modifiers 73 and 74 would need to be set as custom exclusions by your Client Support Specialist.

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- **Provide Category I CPT-4 range codes or Category II G-codes (up to 6) for each patient record**
- **Stratified sampling must be pre-approved by the OAS CAHPS Coordination Team**
    - Please discuss plans to stratify your sample with your Press Ganey Client Support Specialist. Press Ganey must submit a formal request prior to implementation.

CMS Definition of HOPD and ASC*

- **HOPD:** An **HOPD** is an outpatient surgery department or specialized department of a hospital that performs outpatient surgeries and procedures. A hospital is eligible to participate in the OAS CAHPS Survey if it has an HOPD or any department that meets **all** the following criteria:
    - performs procedures that are within the OAS CAHPS–eligible range of CPT-4[1] Codes for Surgery in category I or II.
      Category I: Codes for Surgery: 10004-69990, **(New 1/2025)** Codes for Medicine: 92920, 92921, 92928, 92929, 92978, 93451-93462, 93566-93572, 93985, 93986
      Category II: 4 Eligible G Codes: G0104, G0105, G0121, G0260
    - is Medicare-certified, has a CCN, and has in effect an agreement with CMS obtained in accordance with 42 CFR 419 subpart B (General Conditions and Requirements);
    - bills under the Outpatient Payment Prospective System (OPPS) when billing CMS; and
    - is eligible to participate in the Hospital Outpatient Quality Reporting (Hospital OQR) Program.

Clarification for Hospital Billing Forms

The following claim forms are used to bill CMS for institutional charges under OPPS:

- CMS-1450 (formerly known as UB-04)
- 837I electronic form

Note: Billing with CMS-1500 claim form for the Physician Fee Schedule would not be eligible for OAS CAHPS hospital outpatient billing under OPPS.

- While facility-level eligibility for OAS CAHPS is based on how HOPDs submit for payment to CMS, OAS CAHPS patient-level eligibility includes all payer types, not only CMS.
- For HOPDs: Every HOPD that is under this hospital's CCN needs to participate in OAS CAHPS (both on and off campus) for the sample to be valid.

- **ASC:** An **ASC** is a freestanding medical facility that performs outpatient surgeries and procedures. CMS specifically defines eligible ASCs as distinct entities that operate exclusively for the purpose of furnishing outpatient services to patients. An ASC is eligible to participate in the OAS CAHPS Survey if it meets **all** of the following criteria:
- performs procedures that are within the OAS CAHPS–eligible range of CPT-4[2] Codes for Surgery in category I or II.
  Category I: Codes for Surgery: 10004-69990, **(New 1/2025)** Codes for Medicine: 92920, 92921, 92928, 92929, 92978, 93451-93462, 93566-93572, 93985, 93986
  Category II: 4 Eligible G Codes: G0104, G0105, G0121, G0260
    - is Medicare-certified, has a CCN, and has in effect an agreement with CMS obtained in accordance with 42 CFR 416 subpart B (General Conditions and Requirements);
    - bills under ASC Payment System when billing CMS; and
    - is eligible to participate in the Ambulatory Surgical Center Quality Reporting (ASCQR) Program.

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Clarification for ASC Billing Forms
The following claim forms are used to bill CMS for institutional charges under the ASC Payment System:

- CMS-1500
- ASC X12 837P claim form

- While facility-level eligibility for OAS CAHPS is based on how ASCs submit for payment to CMS, OAS CAHPS patient-level eligibility includes all payer types, not only CMS.
- For ASCs: Every department or location within the ASC that is under their CCN needs to participate in OAS CAHPS for the sample to be valid.

***Source:** Centers for Medicare & Medicaid Services Outpatient and Ambulatory Surgery CAHPS **Protocols and Guidelines Manual**

Update Files

In some cases, it might not be possible to have a patient's record fully coded by the time an upload file is scheduled to be sent. Update files may be sent to fill in this missing information after patient data has been uploaded to Press Ganey.

For official CAHPS programs, there are certain required pieces of patient data that are needed within specific timeframes that Press Ganey audits monthly. Your Client Support Specialist will work with you to define how the review and update process will take place.

Update files may be sent with the same FTP process as live files. However, update files need to include the word "update" as part of the file name for our system to identify these as records that have already been imported into our system as opposed to brand new records.

Update files must include the word "UPDATE" as part of the file name.

Press Ganey has developed a process to allow update files to initiate mailings under very specific circumstances when the original contact information was unusable. To initiate administration from an Update File, the record must meet these criteria:

- Record is associated with a regulated service (e.g., Inpatient, Home Health, or Dialysis)
- Identified at the time of import as having either:
  - a missing or bad address, and/or
  - a missing or invalid patient name
- Update file is processed within the survey administration window based on the CAHPS program associated with the service

Records that can be updated via this process are identified as part of the Invalid Contact report. Note that if these records are corrected via Update File late in the administration window, it is possible that the first contact will not occur by the administration deadline (i.e. day 42 for HCAHPS). We recommend that update files with corrected contact information be provided based on our preferred upload window for each service.

FTP confirmation emails will be sent out for both live and update files. It is important to note that although you may receive confirmation that an update file processed, it does not necessarily mean that any data has been changed. It is only confirmation that our system was able to locate the record in our database.

Update File Requirements

- **Every original and updated patient record sent to Press Ganey must include the Survey Designator, Client ID, and Unique Identifier.** The Survey Designator, Client ID, and Unique Identifier in the original file and the update file must be identical and specific to a particular patient's visit. Social

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security numbers or medical record numbers cannot be used to differentiate multiple visits for the same patient.

- The update file must be named UPDATE or the word "update" must appear in the file name of every update file you send to Press Ganey (e.g., UPDATEIN.txt or UPDATE1.txt).

Your update file must match the current layout and include the word UPDATE as part of the file name so that the records are not processed and mailed.

- A unique ID field also must be included in your file layout. Both original and updated records must follow the file layout that was approved by the Press Ganey Electronic Data Interchange (EDI) Specialist during the upload testing phase.

How the Update Process Works

Our system uses Survey Designator, Client ID, and Unique ID to match up the updated patient record with the original that had been previously uploaded.

Once the original and updated patient records are matched, the system compares the data in the two records.

- A blank field in the update record will not overwrite the corresponding field in the original record (as in the "Discharge Status" column below).
- A populated field in the update record will overwrite the corresponding field in the original record (as in the "Gender" column below).

File Layout	Designator	Client ID	Last Name	First Name	Middle Initial	Address	City	State	Zip	Gender	Admit Source	Discharge Status	MS-DRG	Unique ID	Admit Date
Original Record	IN0101	1234	Smith	John	R	123 Main	Towne	IN	46601	F		01		644435434	10252015
Update Record	IN0101	1234	Smith	Jon	R	123 Main	Towne	IN	46601	M	6		905	644435434	10252015
Result	**IN0101**	**1234**	**Smith**	**John**	**R**	**123 Main**	**Towne**	**IN**	**46601**	**M**	**6**	**01**	**905**	**644435434**	**10252015**

The Unique ID must appear in every record. The Unique ID for a particular patient and visit must be identical in the original record and the update record.

Non-Updateable Fields

**Official CAHPS includes: HCAHPS, HHCAHPS, HPCAHPS and OASCAHPS*

Field Description	Press Ganey Field Name	Notes
First Name	FIRST_NAME*	*These fields may be updateable for official CAHPS only, when the original record was submitted with invalid contact information.*
Last Name	LAST_NAME*	
Address 1	ADDR1*	
Address 2	ADDR2*	
City	CITY*	
State	STATE*	
Zip Code	ZIP*	
Discharge/Visit Date	DISDATE*	*Can be updated for official HHCAHPS only*
Medical Record #	MEDREC	
Unique ID	UNIQUE_ID	
Email Address	EMAIL*	*Can be updated for OAS CAHPS when the original record was submitted with invalid contact information.*

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Troubleshooting & Technical Support

Technical Support

For questions or concerns about file requirements, data transmission, encryption, or general questions about getting started with InfoTurn, please contact a member of the EDI team at **574.401.8862**.

Wrong File Uploaded – Live Data

If you have uploaded a file or record that should not be processed, immediately contact your Press Ganey Client Support Specialist at applicationsupport@pressganey.com or a member of the EDI team at **574.401.8862**. Please be ready to provide the filename or information about a specific record, such as medical record number, first and last name, or mailing information for that patient spelled exactly as it appears in your files. We will not stop individual records from processing; the entire file will need to be removed.

Editing & Returning Uploaded Files

To be HIPAA compliant, Press Ganey's EDI staff **cannot edit** files sent in for processing or testing. Your staff must perform any changes needed. Additionally, we **cannot return** uploaded files. We strongly encourage you to keep a copy of all files that you transmit to Press Ganey.

To see detailed results of your uploads (which records processed, skipped, errored, etc.), you need to request InfoTurn Results File be posted to your My Files account in the online tools. These files will be posted after each upload and will include the full patient record uploaded along with a note about how each record processed.

Note: These files are not available for some official CAHPS services due to CMS guidelines. Please consult your Client Support Specialist for further details.

For other questions or concerns regarding Press Ganey's handling of HIPAA-related issues, please contact your Press Ganey Client Support Specialist.

Support for Third Party-Applications

As we are unfamiliar with your internal information systems, Press Ganey cannot offer advice on the specifics of how to extract your patient data. We recommend that individuals familiar with your databases extract the information or contact the vendor that supports your applications.

Press Ganey cannot provide technical support for the third-party encryption products discussed in this guide. For help with PGP encryption, please contact www.openpgp.org. For GnuPG, please contact www.gnupg.org.

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HIPAA, HITECH, and the FTP Process

File transfers between business partners are permitted under HIPAA/HITECH, but those transfers must protect the data being transmitted. While Press Ganey cannot directly control the methods you use to transmit data, we will only process files sent via one of our approved transmission methods. Other approaches (paper files, emails, unencrypted FTP files) will not be processed by Press Ganey and will be deleted as soon as they are detected.

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Glossary

Client Support Specialist

Your Press Ganey point of contact for implementation and account maintenance. Expert on survey setup & process management, sampling, data quality, etc.

Client ID

The unique identifier that is assigned by Press Ganey which is included in each patient record and indicates which facility each patient record belongs to.

CPT

The Current Procedural Terminology (CPT) code set is a medical code set which describes medical, surgical, and diagnostic services and is designed to communicate uniform information about medical services and procedures among physicians, coders, patients, accreditation organizations, and payers for administrative, financial, and analytical purposes.

Designator

The unique identifier that is assigned by Press Ganey which is included in each patient record and indicates which survey version that patient should receive.

EDI Specialist

The EDI (Electronic Data Interchange) Specialist is a member of the Press Ganey team that works on the IT portion of your setup. This team accepts and reviews test files, provides feedback for revisions to those files, diagnoses upload errors, and creates/manages FTP accounts.

Encryption

The process of encoding messages or information in such a way that only authorized parties can read it. Sending patient data that has been encrypted ensures that all PHI remains secure.

EMR

Electronic Medical Record

EOR

An indicator, represented by a dollar sign ($), that tells Press Ganey's systems where an individual patient record ends.

Ethnicity

The Ethnicity field should be reserved for identifying persons within the Hispanic/Latino community.

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Field

A field is a piece of the upload file. Each field carries a different piece of information about the patient (e.g., name, mailing address, medical record number) and encounter (e.g., visit date, nursing unit).

FTP

File Transfer Protocol. FTP is a method of transmitting data over the internet. A standard FTP connection is not encrypted. Therefore, files containing Protected Health Information must be encrypted before they are transmitted. Press Ganey is phasing out the use of standard FTP with file encryption and moving solely to HTTPS, SFTP or FTPS.

File Transfer Portal

The web portal used to transfer data files to and from Press Ganey using the secure HTTPS protocol. The File Transfer Portal is part of press Ganey's Managed File Transfer (MFT) application.

FTPS

FTPS is a protocol that encrypts the connection rather than the data file itself using the FTP over SSL (Secure Sockets Layer) protocol.

HCAHPS

The Hospital Consumer Assessment of Healthcare Providers and Systems survey, better known as HCAHPS (pronounced "H-caps"), is part of a larger Consumer Assessment of Healthcare Providers and Systems (CAHPS) program sponsored by the Agency for Healthcare Research and Quality (AHRQ). HCAHPS was developed by AHRQ in response to the Centers for Medicare & Medicaid Services' (CMS) request for a survey that supports the assessment of patients' perspectives on hospital care. The purpose of HCAHPS is to uniformly measure and publicly report patients' perspectives on their inpatient care. National implementation of the HCAHPS survey began with July 2007 discharges.

ICD-10

ICD-10 is the 10th revision of the International Statistical Classification of Diseases and Related Health Problems (ICD), a medical classification list by the World Health Organization (WHO). It contains codes for diseases, signs and symptoms, abnormal findings, complaints, social circumstances, and external causes of injury or diseases.

InfoTurn

Press Ganey's InfoTurn Division uses automated, state-of-the-art technology to print, fold, insert, and mail your satisfaction surveys and personalized cover letters. When the completed surveys are returned, we scan the responses into our database so that your patients' feedback is available to you in the shortest time possible.

InfoTurn Results File

A file that can be posted to a facility's My Files account within the Improvement Portal that details how each patient record processed from an upload (processed, skipped, etc.). Please contact your Client Support Specialist to activate these files if you would like them posted after each of your uploads. Due to CAHPS guidelines, these files may not be available for all your services.

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Invalid Contact Report

For CAHPS records only, if the record is found to have a bad address but is sampled for CAHPS, it will appear in the Invalid Contact Report that is posted to My Files. The CAHPS records that were originally marked as invalid addresses and were sampled can be updated via an update file correcting the invalid address and surveyed within the administrative window.

The Invalid Contact Report was developed to meet the CMS requirement of notifying clients of CAHPS records that have bad addresses/bad phone numbers. After Press Ganey attempts to correct the address/phone number through Pitney Bowes' Finalist, NCOA and PacificEast for phone numbers, if the record still has invalid contact information, then CMS wants survey vendors to contact the client to look for updated information. For HCAHPS, the scheduled task runs on a weekly basis (Wednesdays) and pulls in data from the previous seven days. The scheduled task for HHCAHPS runs daily.

If the client chooses to correct the information and send an update file within the allotted timeframe, Press Ganey will be able to send a survey or start calling.

Note: This update process will only work for CAHPS services.

IT Contact

A contact at your facility that develops and submits upload files of patient records. He/she becomes the "in-house" Press Ganey technical expert.

MFT

Managed File Transfer. Software that manages the secure transmission of patient data to Press Ganey. This software utilizes HTTPS, SFTP and FTPS encryption protocols for the secure transfer of data.

MS-DRG

Medicare Severity Diagnosis Related Groups. MS-DRGs are codes used to classify hospital cases into groups that are expected to have similar hospital resource use. They are required for all patient records uploaded as inpatients for hospitals participating in HCAHPS.

Patient Record

Patient demographics and visit information extracted from a facility's EMR and placed in a data file that is then uploaded to Press Ganey. Each patient encounter is included as one patient record (i.e. row) in the data file.

PGP

PGP (from the PGP Corporation) is a third-party software application that must be purchased and installed. PGP provides encryption for secure messaging, file transmission, and information storage. It also ensures a very high level of data security through 4096-bit encryption, compression, and authentication. Data encrypted using this software should comply with current HIPAA guidelines.

Primary Contact

A contact at your facility that is responsible for facilitating implementation and managing the account. He/she understands organizational needs and is the primary point of contact for training and improvement plan.

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Race

Other elements of background (besides ethnicity) including broad racial categories as well as more specific nationalities of descent that relate to racial groupings (e.g., Chinese as a subset of Asian, Somali as a subset of Black or African American, Middle Eastern North African as a subset of White) should be included only in the Race field.

SFTP

SFTP is a protocol that encrypts the connection rather than the data file itself using the SSH (Secure Shell) FTP protocol.

Test File

In order to accept your electronic patient data and administer surveys, Press Ganey first needs to know how this data will be uploaded. A test file is an example of how your live upload files will be formatted.

Update File

Not all patient data are available at the time of upload. This data may be added later via an update file.

Upload Confirmation

An automated email that is sent to contacts at a client facility after patient data files are uploaded. The report details the number of records processed, duplicate records, records failed due to address or file errors, and records skipped due to sampling. Your Client Support Specialist can provide you with detailed information on how to interpret these confirmation emails.

Upload File

The Upload file is a file containing fields with patient demographic and mailing information which you transmit to Press Ganey and in turn is used to distribute surveys. To survey your patients, you will need to transmit your patient information to us electronically. We use the information to prepare the surveys and cover letters that are sent to your patients and prepare the reports that your organization can use for performance improvement. Each data file that you upload to Press Ganey includes multiple records. Each record, which represents a unique patient and encounter, is comprised of many fields. Each field carries a different piece of information about the patient (e.g., name, mailing address, medical record number) and encounter (e.g., visit date, nursing unit). It's important that you upload these patient files on a regular basis—as soon as possible after a completed encounter or discharge. This increases the likelihood that the patient will return the survey (better response rates) while the experience is fresh in their minds (more accurate feedback).

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