

| Affected Provider Status Report Data Elements | | |
|--|---|---|
| Provider Contacts | Provider Operational Status | Provider Plans |
| <ul style="list-style-type: none"> • Provider's name • CMS Certification Number (CCN) • National Provider Information (NPI) Number • Provider type • For-profit/not-for-profit/government agency status • Address (Street, City, ZIP Code, County) • Current emergency contact name • Contact's telephone number, alternate number (e.g., cell phone), email address | <ul style="list-style-type: none"> • Provider operational status (evacuated, closed, damaged) • Provider census • Available beds • Emergency department contact information (name, telephone number, email address) • (FAX number) if different than provider contact information • Emergency department status (if applicable) • Loss of power • Provider unable to be reached | <ul style="list-style-type: none"> • Estimated date for restored operations • Source of information • Date of the operational status information |