

# NHSN Facility Enrollment & Set-Up Checklist

## for Long Term Acute Care Facilities

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|
| Complete items in order. This document is only meant for Long Term Acute Care Facilities that have not yet enrolled in NHSN. If you have questions or concerns regarding your facility's enrollment status, please contact the NHSN Helpdesk: <a href="mailto:NHSN@cdc.gov">NHSN@cdc.gov</a> .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ✓ |
| <b>NHSN Facility Enrollment</b><br><b>Step 1: Training and Preparation</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |   |
| <ul style="list-style-type: none"> <li>Complete appropriate Patient Safety trainings: <a href="https://www.cdc.gov/nhsn/training/patient-safety-component/index.html">https://www.cdc.gov/nhsn/training/patient-safety-component/index.html</a></li> <li>Complete Healthcare Personnel Safety Component training: <a href="https://www.cdc.gov/nhsn/training/healthcare-personnel-safety/index.html">https://www.cdc.gov/nhsn/training/healthcare-personnel-safety/index.html</a></li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |   |
| <b>Step 2: Register with NHSN</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |   |
| Read and agree to the NHSN Rules of Behavior at <a href="http://nppt.cdc.gov/RegistrationForm/">nppt.cdc.gov/RegistrationForm/</a> .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |   |
| Register your email address and the facility with NHSN (requires a facility identifier, such as a CMS Certification number [CCN]).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |   |
| <b>Note:</b> If you have confirmed that your facility is a CMS-licensed ASC but does not have a CMS Certification Number (CCN), AHA Number or VA Station Code, or if the number you are using is not validating, please contact <a href="mailto:nhsn@cdc.gov">nhsn@cdc.gov</a> to receive an NHSN Enrollment Number.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |   |
| Immediately after successful registration, receive two NHSN e-mails<br>1) Subject 'Welcome to NHSN!'<br>2) Subject 'U.S. Centers for Disease Control: SAMS Partner Portal – Invitation to Register from 'sams-noreply@cdc.gov' which provides details related to registering with Secure Access Management Services (SAMS)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |   |
| <b>Step 3: Register with SAMS (Secure Access Management Services) and Identity</b> <span style="background-color: yellow;">Email:</span>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |   |
| <a href="mailto:samshelp@cdc.gov">samshelp@cdc.gov</a>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |   |
| <i>From the 'U.S. Centers for Disease Control: SAMS Partner Portal – Invitation to Register' e-mail, log in to SAMS and complete the online SAMS registration form</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |   |
| <b>Within 24 hours of successful online registration, receive SAMS "Identity Verification Request"</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |   |
| <b>Tip: When registering with SAMS, be sure to use full legal name as it appears on your driver's license as well as your home address.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |   |
| SAMS offers on-boarding applicants two options for completing identity proofing.<br><b>Option 1</b> - Using a secure interface, you will provide Experian your Social Security Number (SSN) and Date of Birth (DOB). This information is sent directly to Experian and is NOT stored or saved by SAMS/CDC. Experian will attempt to validate your information and may ask you a series of questions based on your credit history. There is no impact on your credit score or credit worthiness. This is the fastest and safest method to complete the SAMS identity proofing process.<br><b>Option 2</b> – You will be required to complete a form attached to the end of the identity verification instructions email. This form, along with appropriate identification, will need to be reviewed by a notary or other trusted third party and copies submitted to CDC via secure upload or by mail. Once received by CDC, it will be reviewed and validated. This process can take several weeks to complete depending on volume and how the documentation is sent to CDC. |   |
| If Experian successfully validates your identity, SAMS will immediately update your profile and move to the next step in the on-boarding process. If Experian cannot validate your identity, you can retry the process (up to 3 times) or complete verification using Option 2. In many situations Experian will be unable to validate your identity based on the information provided and your credit history. This does NOT indicate an issue with your credit report or credit worthiness.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |   |
| <b>Step 4: Sign and Send Consent</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |   |
| The Facility Administrator and Primary Contact will receive a "NHSN Facility Enrollment Submitted" email.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |   |

# NHSN Facility Enrollment & Set-Up Checklist

## for Long Term Acute Care Facilities

|                                                                                                                                                                    |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Login to NHSN via SAMS, select the appropriate component, and review the “Agreement to Participate and Consent”.                                                   |  |
| Check the box to ‘Accept’ next to the appropriate contact’s name, on the far right of the page, and then ‘Submit’ the form in each component you are enrolling in. |  |
| Once you successfully accept the agreement electronically, you will receive a confirmation email informing you that you can log into your newly enrolled facility. |  |

### NHSN Facility Set-up

#### Step 1: Add Additional Users & Assign Rights

Access “NHSN Reporting” at <https://sams.cdc.gov> using your username and password from Step 3.

Go to “Users” on the side navigation menu and select “Add.”

For each new user, you will need to assign a User ID (any combination of letters and/or numbers you choose up to 32 characters) and provide a first and last name, phone number and e-mail address.

**Note:** Each user will need to complete training and obtain their own SAMS User ID and grid card.

After a user has been added, you can assign rights within the NHSN system.

**Note:** Users can be assigned varying levels of rights within NHSN. Users who will be adding monthly reporting plans, entering and analyzing data, adding new users, and adding facility surveys should be granted “Administrative Rights.” Users who will only be entering data can be granted “Add, Edit, Delete Rights.” Users who will only be analyzing the data can be granted “Analyze Rights.” We suggest each facility adds at least 2 additional users in case of staff absence or turnover.

#### Step 2: Verify Your Facility’s CMS Certification Number (CCN)

After logging into NHSN, click “Facility” on the navigation bar, and then click “Facility Info.” At the top of the Facility Information screen, verify and update, if necessary, the CCN in the appropriate data entry field. If any changes have been made, remember to click the “Update” button at the bottom of the screen. Please be sure to double- and triple-check this number!

**Note:** An accurate CCN is required for those facilities participating in CMS Quality Reporting Programs, as this is the ID that will be used to submit data to CMS on your behalf

#### Step 3: Enter Your Monthly Reporting Plans & Report Your Data

Follow the steps outlined in the below guidance documents to add your monthly reporting plans and report your data:

- Patient Safety training: <https://www.cdc.gov/nhsn/training/patient-safety-component/index.html>
- Healthcare Personnel Safety Component training: <https://www.cdc.gov/nhsn/training/healthcare-personnel-safety/index.html>

Last revised March 2026