Operational Guidance for Reporting COVID-19 Vaccination Data for Healthcare Personnel into NHSN

Updated January 2026

Contents

Background

The Centers for Medicare and Medicaid Services (CMS) published a final rule in the Federal Register on August 13, 2021.[1, 2] This rule required healthcare facilities to report COVID-19 vaccination data for healthcare personnel (HCP) via the Centers for Disease Control and Prevention's (CDC's) National Healthcare Safety Network (NHSN) as part of CMS Quality Reporting Program requirements. This is in accordance with the Consensus-Based Entity (CBE)-endorsed quality measure for Quarterly Reporting of COVID-19 Vaccination Coverage among HCP (CBE ID# 3636). NHSN developed the Weekly COVID-19 Vaccination Module for HCP to help guide the public health emergency response to the COVID-19 pandemic. CDC aligned NHSN COVID-19 vaccination coverage surveillance with the CBE-endorsed quality measure for Annual Influenza Vaccination Coverage among HCP (CBE ID# 0431), which is collected through the NHSN Healthcare Personnel Influenza Vaccination Module.

The rule announced a requirement for facilities to report COVID-19 vaccination data for HCP beginning on October 1, 2021. Beginning on October 1, facility types that are part of certain CMS Quality Reporting Programs (acute care hospitals, inpatient psychiatric facilities, inpatient rehabilitation facilities, long-term acute care facilities, and Prospective Payment System [PPS]-exempt cancer hospitals) were required to submit COVID-19 vaccination data via the Weekly COVID-19 Vaccination Module for at least one week per month to fulfill CMS reporting requirements. CMS also published the calendar year 2022 Ambulatory Surgical Center Payment System Final Rule, which required ambulatory surgery centers to report COVID-19 vaccination data for HCP via the Weekly COVID-19 Vaccination Module at least one week per month beginning on January 1, 2022. As of January 2025, CMS removed the reporting requirement for ambulatory surgery centers, inpatient hospitals, inpatient psychiatric facilities, and inpatient rehabilitation facilities to report COVID-19 vaccination data for HCP.[3] CMS also removed the reporting requirement for outpatient hospitals in

November 2025.[4] However, these facilities may still voluntarily submit COVID-19 vaccination data for HCP through NHSN.

This operational guidance provides additional information about reporting COVID-19 vaccination data for HCP through NHSN as part of CMS Quality Reporting Programs.[5] The requirements for reporting COVID-19 vaccination data for HCP through NHSN for these CMS programs do not preempt or supersede any state mandates for reporting COVID-19 vaccination data for HCP through NHSN (i.e., facilities in states with COVID-19 vaccination reporting mandates for HCP must also abide by their state's requirements, even if they are more extensive than the requirements for these CMS programs).

NHSN guidance and definitions for reporting COVID-19 vaccination data for HCP can be found in the Weekly COVID-19 Vaccination Module for Healthcare Personnel protocol. The NHSN protocol contains guidance for facilities to report COVID-19 vaccination data for HCP from December 2020 when the vaccine became available through the current date, which includes the most recent recommended Up to Date (UTD) COVID-19 vaccines administered at the facility or elsewhere, medical contraindications to COVID-19 vaccines, COVID-19 vaccine declinations, and unknown/other COVID-19 vaccination status. Facilities must also report associated denominator data for number of HCP who were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection, regardless of clinical responsibility or patient contact. Data are reported separately for employees, licensed independent practitioners, adult students/trainees, volunteers, and other contract personnel/vendors. Facilities should collect COVID-19 vaccination data for HCP according to the table of instructions at COVID-19 Vaccination Staff TOI (cdc.gov).

Inpatient Facilities and Ambulatory Surgery Centers

Inpatient facilities and ambulatory surgery centers must activate the NHSN Healthcare Personnel Safety (HPS) Component to report COVID-19 vaccination data for HCP.

Long-term Care Facilities

Long-term care facilities must activate the NHSN Long-Term Care Facility (LTCF) Component to report COVID-19 vaccination data for HCP.

Required Fields

Facilities must submit all required information for the numerator and denominator through NHSN. Data must be reported to NHSN by entering data manually or uploading .CSV files into the NHSN web-based application. Facilities

following the LTCF and HPS Components also have the option to use the Person-Level Vaccination Forms to report data to the main weekly COVID-19 Vaccination Modules.

Numerator

The numerator consists of HCP receiving the most recently recommended COVID-19 vaccine(s) (defined as Up to Date or UTD). Learn more about key terms regarding COVID-19 vaccines in the COVID-19 Vaccine Modules: Key Terms guidance.

Vaccination coverage is defined as a measure of the estimated percentage of people in a sample or population who received a specific vaccine or vaccines.

Denominator

Denominator data are collected for four categories of HCP:

1. Employees: This includes all persons receiving a direct paycheck from the reporting facility (i.e., on the facility's payroll), regardless of clinical responsibility or patient contact.
2. Licensed independent practitioners (LIPs): This includes physicians (MD, DO), advanced practice nurses, and physician assistants who are affiliated with the reporting facility but are not directly employed by it (i.e., they do not receive a paycheck from the facility), regardless of clinical responsibility or patient contact. Post-residency fellows are also included in this category if they are not on the facility's payroll.
3. Adult students/trainees and volunteers: This includes medical, nursing, or other health professional students, interns, medical residents, or volunteers aged 18 or older who are affiliated with the healthcare facility but are not directly employed by it (i.e., they do not receive a paycheck from the facility), regardless of clinical responsibility or patient contact.
4. Other contract personnel: Contract personnel are defined as persons providing care, treatment, or services at the facility through a contract who do not fall into any of the other denominator categories. Please note this also includes vendors providing care, treatment, or services at the facility who may or may not be paid through a contract.

The denominator for this measure excludes HCP with medical contraindications to COVID-19 vaccine. CDC considers contraindications to COVID-19 vaccine to be:

- Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a component of the COVID-19 vaccine.
- Known diagnosed allergy to a component of the COVID-19 vaccine.

Data Reporting

CDC reports the COVID-19 vaccination data for HCP to CMS for each facility by CMS Certification Number (CCN). An accurate CCN is essential. Facilities should verify their CCN, and if updates are necessary, follow the guidance to change the CCN listed for the facility in NHSN.

CDC upgraded the NHSN application in March 2024. As a result, timestamps in the application (such as create dates, or dates when data were first entered into NHSN) now reflect Coordinated Universal Time (UTC) rather than Eastern Time.

Facilities are required to report data for at least one week per month. Therefore, facilities can report data for more than one week per month; however, this is not mandatory. The week-end date determines for which month a week is included. For example, reporting data for the week of January 26, 2026 through February 1, 2026 is considered as submitting data for a week in February 2026 but not January 2026. This is because the week-end date (February 1) is in February. For facilities that choose to report more than one week per month, the last week of the reporting month will be shared with CMS. CDC will provide COVID-19 vaccination percentages for each reporting CCN.

CDC will calculate quarterly COVID-19 vaccination coverage rates for HCP for each facility by taking the average of the data from the three weekly rates submitted by the facility for that quarter. This calculation includes data from the core HCP categories of employees, licensed independent practitioners, and adult students/trainees and volunteers who received the most recent recommended UTD COVID-19 vaccinations. HCP with contraindications to COVID-19 vaccination are excluded from the denominator. For example, the calculation of the COVID-19 vaccination coverage rate for All Core HCP is listed below.

$$\frac{\text{\# Cumulative total of Core HCP UTD}}{\text{\# Core HCP eligible to have worked (excluding contraindications)}} \times 100 = \text{Pct. of Core HCP vaccinated}$$

References and Notes

[1]Centers for Medicare & Medicaid Services (CMS). Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long [1] Term Care Hospital Prospective Payment System and Policy Changes and Fiscal Year 2022 Rates; Quality Programs and Medicare Promoting Interoperability Program Requirements for Eligible Hospitals and Critical Access Hospitals; Changes to Medicaid Provider Enrollment; and Changes to the Medicare Shared Savings Program. Federal Register 2021; 86:44774-45615: https://www.govinfo.gov/content/pkg/FR-2021-08-13/pdf/2021-16519.pdf

[2]CMS Value Based Programs: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/Value-Based-Programs#:~:text=What%20are%20CMS%E2%80%99%20original%20value-based%20programs%3F%20There%20are,End-Stage%20Renal%20Disease%20Quality%20Incentive%20Program%20%28ESRD%20QIP%29

[3]Fiscal Year 2026 Hospital Inpatient Prospective Payment Systems Final Rule: https://www.cms.gov/medicare/payment/prospective-payment-systems/acute-inpatient-pps/fy-2026-ipps-final-rule-home-page

[4]Medicare Program: Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems; Quality Reporting Programs; Overall Hospital Quality Star Rating; Hospital Price Transparency; and Notice of Closure of a Teaching Hospital and Opportunity To Apply for Available Slots: https://www.federalregister.gov/documents/2025/11/25/2025-20907/medicare-program-hospital-outpatient-prospective-payment-and-ambulatory-surgical-center-payment

[5]Outpatient dialysis facilities are also required to report COVID-19 vaccination data for HCP to meet End Stage Renal Disease Quality Incentive Program (ESRD QIP) requirements.