

Covered Entities Guide for Public Users

Exporting Search Results Data

This guide describes how to export search data. Having obtained a list of covered entities that matched your search criteria [[Searching for a Covered Entity](#)], you have the option of exporting covered entity data to an Excel spreadsheet. Excel offers numerous features for rearranging and presenting covered entity data.

Major Sections in This Guide

To jump to a specific section in this guide click one of these links:

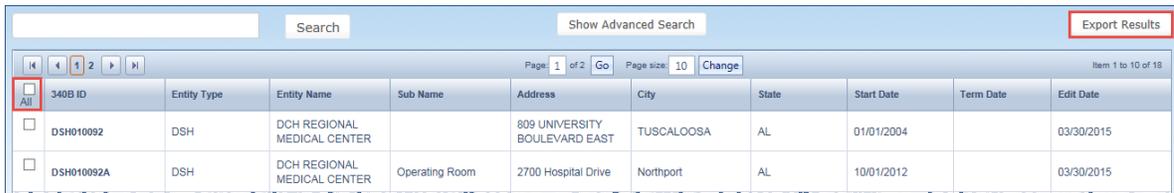
[Covered Entity Data Extract](#) (page 2)

[Exported Data Spreadsheet](#) (page 3)

[Multi-row Entities on Export Spreadsheet](#) (page 3)

Steps for exporting data from the **Search Results** page:

- 1) **All:** Select this checkbox if you want to export all entries in the search results table.



<input checked="" type="checkbox"/> All	340B ID	Entity Type	Entity Name	Sub Name	Address	City	State	Start Date	Term Date	Edit Date
<input type="checkbox"/>	DSH010092	DSH	DCH REGIONAL MEDICAL CENTER		809 UNIVERSITY BOULEVARD EAST	TUSCALOOSA	AL	01/01/2004		03/30/2015
<input type="checkbox"/>	DSH010092A	DSH	DCH REGIONAL MEDICAL CENTER	Operating Room	2700 Hospital Drive	Northport	AL	10/01/2012		03/30/2015

- 2) To export only some of the entries, either select individual checkboxes in the left column or uncheck the boxes for entries you do not want to export if you checked **All**.

Note: A message notifies you if more than 200 records are selected for export.

- 3) Click the button. The **Covered Entity Data Extract** page displays.

Covered Entity Data Extract

4) This page enables you to specify only the data you want on the spreadsheet. Check the boxes in each section to select the data to be exported.

- Check the **Select All** box if you want all the data listed on the page to appear on the spreadsheet. Uncheck a box to deselect data.
- Check the box next to a section heading to export all data in that section.
- Check individual boxes to select only specific items for export.

Covered Entity Data Extract

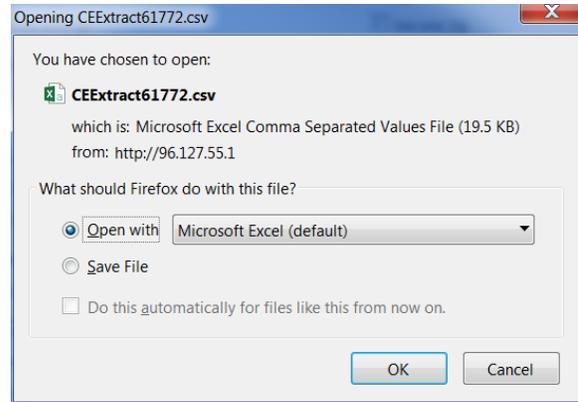
Select All

<p><input type="checkbox"/> Covered Entity Details</p> <p><input checked="" type="checkbox"/> Grant Number</p> <p><input checked="" type="checkbox"/> Site ID</p> <p><input checked="" type="checkbox"/> Medicare Provider Number</p> <p><input checked="" type="checkbox"/> 340B ID</p> <p><input checked="" type="checkbox"/> Entity Type</p> <p><input type="checkbox"/> Participating</p> <p><input type="checkbox"/> Participating Start Date</p> <p><input type="checkbox"/> Termination Code</p> <p><input type="checkbox"/> Termination Date</p> <p><input type="checkbox"/> Certified/Decertified Date</p> <p><input type="checkbox"/> New Record ID</p> <p><input type="checkbox"/> Parent ID</p> <p><input type="checkbox"/> Nature Of Support</p> <p><input type="checkbox"/> Entity Name</p> <p><input type="checkbox"/> Entity Sub-Division Name</p>	<p><input checked="" type="checkbox"/> Covered Entity Address</p> <p><input checked="" type="checkbox"/> Address 1</p> <p><input checked="" type="checkbox"/> Address 2</p> <p><input checked="" type="checkbox"/> City</p> <p><input checked="" type="checkbox"/> State</p> <p><input checked="" type="checkbox"/> Zip</p> <p><input checked="" type="checkbox"/> Second Zip</p> <p><input type="checkbox"/> Medicaid Billing and Orphan Drug Information</p> <p><input type="checkbox"/> Medicaid Number</p> <p><input type="checkbox"/> NPI</p> <p><input type="checkbox"/> Orphan Drug Participation</p>	<p><input type="checkbox"/> Billing Information</p> <p><input type="checkbox"/> Billing Organization</p> <p><input type="checkbox"/> Address 1</p> <p><input type="checkbox"/> Address 2</p> <p><input type="checkbox"/> City</p> <p><input type="checkbox"/> State</p> <p><input type="checkbox"/> Zip</p> <p><input type="checkbox"/> Second Zip</p> <p><input type="checkbox"/> Shipping Information</p> <p><input type="checkbox"/> Shipping Organization</p> <p><input type="checkbox"/> Address 1</p> <p><input type="checkbox"/> Address 2</p> <p><input type="checkbox"/> City</p> <p><input type="checkbox"/> State</p> <p><input type="checkbox"/> Zip</p> <p><input type="checkbox"/> Second Zip</p>
<p><input type="checkbox"/> Contact Information</p> <p><input type="checkbox"/> Contact Name</p> <p><input type="checkbox"/> Contact Title</p> <p><input type="checkbox"/> Contact Telephone</p> <p><input type="checkbox"/> Contact Extension</p>	<p><input type="checkbox"/> Signed By Information</p> <p><input type="checkbox"/> Signed By Name</p> <p><input type="checkbox"/> Signed By Title</p> <p><input type="checkbox"/> Signed By Date</p> <p><input type="checkbox"/> Signed By Telephone</p> <p><input type="checkbox"/> Signed By Extension</p>	<p><input type="checkbox"/> Authorizing Official Information</p> <p><input type="checkbox"/> Authorizing Name</p> <p><input type="checkbox"/> Authorizing Title</p> <p><input type="checkbox"/> Authorizing Telephone</p> <p><input type="checkbox"/> Authorizing Extension</p>
<p><input type="checkbox"/> Contract Pharmacy Details</p> <p><input type="checkbox"/> Pharmacy Name</p> <p><input type="checkbox"/> Address 1</p> <p><input type="checkbox"/> Address 2</p> <p><input type="checkbox"/> Address 3</p> <p><input type="checkbox"/> City</p> <p><input type="checkbox"/> State</p> <p><input type="checkbox"/> Zip</p> <p><input type="checkbox"/> Second Zip</p> <p><input type="checkbox"/> Contract ID</p> <p><input type="checkbox"/> Contract Begin Date</p> <p><input type="checkbox"/> Contract Approval Date</p> <p><input type="checkbox"/> Contract Term Date</p> <p><input type="checkbox"/> Pharmacy Comments</p> <p><input type="checkbox"/> Pharmacy ID</p>	<p><input type="checkbox"/> Contract Pharmacy Rep Information</p> <p><input type="checkbox"/> Contract Pharmacy Rep Name</p> <p><input type="checkbox"/> Contract Pharmacy Rep Title</p> <p><input type="checkbox"/> Contract Pharmacy Rep Telephone</p> <p><input type="checkbox"/> Contract Pharmacy Rep Extension</p>	<p><input type="checkbox"/> Misc.</p> <p><input type="checkbox"/> Rural</p> <p><input type="checkbox"/> Entry Comments</p> <p><input type="checkbox"/> Edit Date</p> <p><input type="checkbox"/> Created Date</p>

5) When finished selecting data for export, click the button. A message warns you not to navigate away from the page while the spreadsheet is being generated.

When the data has been downloaded to your computer a dialog box asks if you want to open the exported data in an Excel spreadsheet or save to your hard drive.

- 6) Select **Open with Microsoft Excel** and click the **OK** button.



Exported Data Spreadsheet

The spreadsheet displays the selected export data in Excel.

	A	B	C	D	E	F	G	H	I	J	K	L	M	N
1	Grant Number	Site_ID	Medicare	340B ID	CE ID	Address 1	City	State	Zip	Medicaid	NPI			
2	H80CS042	BPS-H80-013454		CH0213351	41765	71 4th St	Somerville	NJ	08876					
3	H80CS007	BPS-H80-007028		CH03044J	41338	3811 Ohar	Pittsburgh	PA	15213					
4			060022	DSH06002	40583	175 South	Colorado	CO	80910					
5			190036	DSH19003	40683	1000 Ochs	Covington	LA	70433	1730351(L	NPI-1811973100			
6			190036	DSH19003	40961	2750 Gaus	Slidell	LA	70461	1730351(L	NPI-1811973100			
7			310039	DSH31003	41404	466 New E	Perth Am	NJ	08861					
8			050335	SCH05033	40935	680 GUZZI	SONORA	CA	95370					
9	STD-KS			STD66101	40471	619 Ann A	Kansas Cit	KS	66101					

Multi-row Entities on Export Spreadsheet

Some covered entities have multiple shipping addresses and contracts with multiple pharmacies. A separate row displays for each address and pharmacy. For example, data for an entity with two shipping addresses and five contract pharmacies will display on 10 rows.

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	
1	Grant Number	Site_ID	Medicare	340B ID	CE ID	Entity Typ	Participat	Participat	Terminat	Term Date	Certified/	New Reco	Parent ID	Entity Nar	Entity Sub	Address 1	Address 2	City	State	Zip	
2			051312	CAH05131	13551	CAH	TRUE	*****			*****					SAN BERNARDINO N 29101 HOSPITAL RD	LAKE ARRI	CA		9235	
3			051312	CAH05131	7934	CAH	TRUE	*****			*****			13551		SAN BERN LAKE ARRI 29101 HOSPITAL RD	LAKE ARRI	CA		9235	
4			051314	CAH05131	4513	CAH	TRUE	*****			*****					KERN VALLEY HEALTH 6412 LAUREL AVENUE	LAKE ISAB	CA		9322	
5			051329	CAH05132	6332	CAH	TRUE	8/9/2010			*****					SUTTER LAKESIDE HC 5176 HILL ROAD EAST	LAKEPORT	CA		9543	
6			051329	CAH05132	6332	CAH	TRUE	8/9/2010			*****					SUTTER LAKESIDE HC 5176 HILL ROAD EAST	LAKEPORT	CA		9543	
7			051329	CAH05132	6332	CAH	TRUE	8/9/2010			*****					SUTTER LAKESIDE HC 5176 HILL ROAD EAST	LAKEPORT	CA		9543	
8			051329	CAH05132	16332	CAH	TRUE	8/9/2010			*****			6332		SUTTER LA FAMILY M 5176 HILL ROAD EAST	LAKEPORT	CA		9543	
9	H80CS266	BPS-H80-013341		CHC26613	40670	CH	TRUE	4/1/2014								ANTELOPE Antelope	45104 10th St W	Lancaster	CA		9355
10	H80CS266	BPS-H80-013341		CHC26613	40670	CH	TRUE	4/1/2014								ANTELOPE Antelope	45104 10th St W	Lancaster	CA		9355
11	H80CS266	BPS-H80-013341		CHC26613	40670	CH	TRUE	4/1/2014								ANTELOPE Antelope	45104 10th St W	Lancaster	CA		9355
12	H80CS266	BPS-H80-013341		CHC26613	40670	CH	TRUE	4/1/2014								ANTELOPE Antelope	45104 10th St W	Lancaster	CA		9355
13	H80CS266	BPS-H80-013341		CHC26613	40670	CH	TRUE	4/1/2014								ANTELOPE Antelope	45104 10th St W	Lancaster	CA		9355
14	H80CS266	BPS-H80-013341		CHC26613	40670	CH	TRUE	4/1/2014								ANTELOPE Antelope	45104 10th St W	Lancaster	CA		9355
15	H80CS266	BPS-H80-013341		CHC26613	40670	CH	TRUE	4/1/2014								ANTELOPE Antelope	45104 10th St W	Lancaster	CA		9355
16	H80CS266	BPS-H80-013341		CHC26613	40670	CH	TRUE	4/1/2014								ANTELOPE Antelope	45104 10th St W	Lancaster	CA		9355
17	H80CS266	BPS-H80-013341		CHC26613	40670	CH	TRUE	4/1/2014								ANTELOPE Antelope	45104 10th St W	Lancaster	CA		9355

If you want to generate a report of all the covered entities in the 340B Database, click [Reports > Daily Reports > Covered Entity Daily Report](#). It contains both active and inactive entities in Excel spreadsheet format.

(Back to [Getting Started Guide for Public Users](#))

Other Covered Entities Guides

[Searching for a Covered Entity](#)

[Viewing a Covered Entity Record](#)

[Registering a Covered Entity/Outpatient Facility](#)

[Reviewing the Covered Entity Daily Report](#)

[Submitting a Change or Termination Request](#)

[Recertifying/Decertifying a Covered Entity](#)