

**Vermont Department of Banking, Insurance, Securities
and Health Care Administration
Division of Health Care Administration**

**VERMONT HEALTHCARE CLAIMS UNIFORM
REPORTING AND EVALUATION SYSTEM**

**APPLICATION FOR A LIMITED USE
HEALTH CARE CLAIMS RESEARCH DATA SET
Authorized Institutional User**

Application : 2011-05-UVM-CCTS

INTRODUCTION

To the extent allowed by federal HIPAA provisions, the Vermont Legislature authorized the Department of Banking, Insurance, Securities and Health Care Administration (the department, or BISHCA) to collect health care eligibility and medical and pharmacy claims data from health insurers to be available as a resource for insurers, employers, providers, purchasers of health care and state agencies to continuously review health care utilization, expenditures, and performance in Vermont. 18 V.S.A. § 9410. The Vermont Healthcare Claims Uniform Reporting and Evaluation System (VHCURES) data collection program produces consolidated claims data sets that are updated on a periodic basis. Record-level files contain unrestricted data elements that are available for public use, and restricted data elements that are only available if approved by the department. Extracts containing restricted data elements are referred to as limited use health care claims research data sets (limited use data sets). Regulation H-2008-01, available on the department's website (www.bishca.state.vt.us), provides specific requirements concerning the release of limited use health care claims research data.

To obtain a limited use health care claims research data set, requestors must complete this application and submit it to the department for approval. If approved, the requestor enters into a data use agreement, which cannot be amended without the express written consent of the department or, in some instances, the submission and approval of a new application. Approved users are responsible for covering the cost of the files or technical assistance provided by the department's designated contractor managing the consolidated VHCURES data set.

If the department declines to release a requested limited use data set, it will provide, within 60 days of receipt of the application, a written statement identifying the specific criteria that are the basis for denial of the application. The requestor shall have leave to resubmit or supplement the application to address the commissioner's concerns. Any adverse decision regarding an application may be appealed within 30 days by filing a request for hearing with the commissioner pursuant to Department Regulation 82-1 (Revised).

INSTRUCTIONS

Complete all required sections of the application and submit one (1) copy of the completed application, including all supplementary materials and attachments, in electronic format via electronic mail and one (1) hard copy to the department contact at the address listed below. Incomplete applications will not be approved until the applicant has provided all required information.

The commissioner may request a review of an application by the VHCURES Data Release Advisory Committee. Refer to Regulation H-2008-01, Section 8, for detailed information about the committee.

For questions about the VHCURES program, including the application process and for routing completed applications, contact

Dian Kahn
Director of Analysis and Data Management
BISHCA
89 Main Street, Drawer 20
Montpelier, VT 05620-3101
(802) 828-2906
Dian.Kahn@state.vt.us

SECTION 1: APPLICANT INFORMATION

2011-05 UVM-CTS

1-1. Authorized Institutional User

The authorized institutional user is the licensee ultimately responsible for the approved use of the VHCURES limited use research health care claims data sets. The individual signing on behalf of the authorized institutional user must be in an executive position of authority within the agency, department or organization. Upon approval of the application, the authorized user must sign the data use agreement, and at the termination of the project, must certify to BISHCA that the released data has been destroyed.

Authorized User Name:	University of Vermont & State Agricultural College
Signatory:	Ruth A. Farrell
Title:	Associate Vice President
Street/PO Address:	85 South Prospect Street, Waterman 300
City/State/ZIP:	Burlington, VT 05401
Phone Number:	802-656-3360
Email address:	Ruth.Farrell@uvm.edu
Fax Number:	802-656-1326

1-2. Principal Investigator

"Principal investigator" means the person in charge of a project that makes use of limited use research health care claims data sets. The principal investigator is

the custodian of the data and is responsible for compliance with all restrictions, limitations and conditions of use associated with data release.

Principal Investigator: Indra Neil Sarkar, PhD, MLIS
Title: Director of Biomedical Informatics
& Assistant Professor
Organization: University of Vermont & State Agricultural College
Street/PO Address: 89 Beaumont Avenue, Given Courtyard N309
City/State/ZIP: Burlington, VT 05405
Phone Number: 802-656-8286
Email address: Neil.Sarkar@uvm.edu
Fax Number: 802-656-4589

1-3. Project Director

The project director is either the principal investigator or an individual designated as the project director by the authorized institutional user. The project director is responsible for the physical security of the VHCURES data and for the access to and the approved use of the VHCURES data by the project staff.

Principal Investigator: Indra Neil Sarkar, PhD, MLIS
Title: Director of Biomedical Informatics
& Assistant Professor
Organization: University of Vermont & State Agricultural College
Street/PO Address: 89 Beaumont Avenue, Given Courtyard N309
City/State/ZIP: Burlington, VT 05405
Phone Number: 802-656-8286
Email address: Neil.Sarkar@uvm.edu
Fax Number: 802-656-4589

1-4. Additional Project Staff with Access to the Limited Use Health Care Claims Research Data Set

All project staff, including contractors and subcontractors, who will have access to the data must be identified prior to such access and must complete a notarized affidavit (attached), certifying that they understand and agree to the terms of use of the data.

List the following information for each staff person:

Name: Indra Neil Sarkar, PhD, MLIS
Title: Director of Biomedical Informatics
& Assistant Professor
Organizational Affiliation/Employer: University of Vermont &
State Agricultural College
Project Role: Principal Investigator
Qualifications: Doctoral level faculty

Name: Elizabeth S. Chen, PhD
Title: Associate Director of Biomedical Informatics & Assistant Professor
Organizational Affiliation/Employer: University of Vermont & State Agricultural College
Project Role: Researcher
Qualifications: Doctoral level faculty

Name: Rama Kocherlakota, PhD
Title: Software Engineer & Research Associate
Organizational Affiliation/Employer: University of Vermont & State Agricultural College
Project Role: Software Engineer
Qualifications: Doctoral level faculty

Attach additional sheets, if needed.

SECTION 2: RESEARCH PROTOCOL

Provide the information below in summary format. In addition, attach a copy of the detailed research protocol that comprehensively describes the need for and intended uses of the requested limited use data. If you have obtained approval from an Institutional Review Board for your study, attach a copy of the approval to this application.

N.B.: If there are changes in the course of the research that affect the information below, contact the Director of Analysis and Data Management at the address shown in the Instructions, p. 3.

2-1. Research Protocol Filename (File must be included in electronic submission of this application):

approved-IRIS_IRB-repository_protocol_20100831.pdf

2-2. IRB Study Approval Filename (If applicable, file must be included in electronic submission of this application):

approved-IRIS_IRB-CHRMS-10-228 Sarkar.pdf

2-3. Summary of background, purposes, and origin of the research:

The overall goal of this project is to develop an informatics platform for meeting both the short-term and long-term needs of the broad constituency that aims to understand underpinning principles associated with health care across the State of Vermont. The successful establishment of the proposed informatics platform will make possible a new generation of evaluative studies across the entire spectrum of health care. The

VHCURES data set will be the primary source of data for claims data that will principally be used to develop evaluation and analytical studies of the patient population associated with the Blueprint for Health. Minimally, the informatics platform will enable generation of regular reports on quality of care, utilization, and variance in care patterns for patients that are part of the Blueprint.

2-4. Statement of the health-related problem or issue to be addressed by the research:

The ultimate goal of this project is to develop a comprehensive health informatics platform that can be used to formulate and address population level inquiries. Such studies will be positioned to demonstrate impact from the level of bench researchers to practicing physicians to public health policy makers. To this end, the core set of aims for this project are to: (1) develop a central repository that can accommodate heterogeneous clinical, research, administrative, and public health data from a wide array of private and public resources; (2) demonstrate the power of secondary and tertiary uses of de-identified data derived from the central repository within the context of specific queries; and, (3) develop and evaluate de-identification and scrubbing approaches to remove Protected Health Information from clinical and related data.

2-5. Research design and methodology, including the topics of exploratory research or the specific research hypotheses to be tested:

The type of research that will be performed will include the full spectrum of clinical data mining, which includes exploration and linking of de-identified data across the range of data aggregated in IRIS. It is anticipated that a significant amount of effort will be focused on enhancing de-identification and reliable matching approaches (e.g., probabilistic) to transform raw clinical electronic data into a form that new and existing data mining approaches can be developed and used. Of particular emphasis will be the study of how textual data (e.g., clinical narratives) can be mined for studying clinically interesting trends in a way to complement structured data (e.g., laboratory results). Finally, an area of planned research will be assessment of tools and techniques for de-identification of sensitive health data (i.e., removal of the 18 PHI data elements as specified by HIPAA).

2-6. The procedures that will be followed to maintain the confidentiality of any data or copies of records provided to the principal investigator or other persons:

Access to IRIS will be tightly restricted and only available to key personnel credentialed to produce de-identified extracts for researchers. For the purposes of the present protocol, only the named key personnel will be allowed access and use of IRIS and any derived data. Protected Health Information (PHI), as defined by the Health Insurance Portability and Accountability Act (HIPAA), will be maintained within a secure firewall and under no circumstances be released or used for research without prior approval from the UVM/FAHC Institutional Review Board (IRB). De-identified data will be made available only to the key personnel of this protocol, all of whom have undergone specific training on the use of such data, including confidentiality and security issues as well as awareness

of the epidemiologic limitations of the data. There may be instances where researchers need to know when observations in two different data sets refer to the same patient, but cannot know the identity of the patient. To address this scenario, IRIS will use a "trusted third party" (T3P) approach. Each research dataset created by the T3P will have a unique set of randomly generated identifiers. When a new dataset is created, the identifiers will be regenerated to limit the ability of datasets to be merged without permission. However, if an investigator has legitimate need for additional fields in an existing dataset, the T3P identifier will be able to link back to the original records, retrieve the additional data, and assign them the correct identifier for a given project.

2-7. Intended research completion date: June 30, 2014 (Studies that take longer than 3 years shall require submission of a new application and approval from the department for up to an additional 3 years).

SECTION 3: PRICES FOR DATA SETS

The cost of limited use research health care claims data sets, as approved by the Department, is set by the Department's designated vendor. The charge does not include the cost of additional programming and consulting services that requestors may procure from the vendor. Approved users will be invoiced by, and pay directly to, the vendor for the data and for any additional vendor services. The BISHCA Designator Vendor is:

Onpoint Health Data
16 Association Drive
Manchester, ME 04351
207 430-0632
207 622-7086 fax
www.OnpointHealthData.org

The extract price is \$5,200 for an extract of multiple years of incurred claims and eligibility data including the services and products listed below. This includes extracts only from existing warehouse data sets for up to five (5) years of incurred data. The Vermont warehouse has a start date of January 2007 for incurred claims and eligibility files.

The extract price does not include any conditional programming to meet clients' customized conditions or research methodologies. The vendor will not extract defined subsets without additional cost as required for vendor consultation and programming.

SECTION 4: ROUTING AND DELIVERY

Data will be shipped via UPS or FedEx, unless otherwise requested. Please provide your UPS or FedEx billing number and any other relative shipping information.

UPS Billing Number:
FedEx Billing Number:
Other Shipping Options:

Ship to the attention of (Name): Indra Neil Sarkar, PhD, MLIS
 Shipping Address: Center for Clinical and Translational Science
 University of Vermont
 89 Beaumont Avenue
 Given Courtyard, N309
 Burlington, VT 05405

SECTION 5: SPECIFICATION OF REQUEST FOR LIMITED USE DATA SET

In the subsections below, identify the file type, reporting period, and minimum data elements needed to support the research protocol, the justification of need for each restricted data elements requested, and the selection criteria for subgrouping and filtering in conformance with the VHCURES' data release policy.

5-1. Please indicate the type of data and time period requested:*

Data Set	Incurred Time Period
(X) Member Eligibility	January 2007 - Present
(X) Medical Claims	January 2007 - Present
(X) Pharmacy Claims	January 2007 - Present

5-2. If your study requires additional time periods beyond those noted above, specify what periods are required:

Future requests for data will be made on a regular interval (e.g., annually) along with requisite payment to above identified vendor.

5-3. Due to the size of the typical data request, data is provided in a delimited text file format. If you are requesting smaller subsets of records, however, we may be able to accommodate requests in alternative formats or layouts. Indicate any such request here:

N/A

5-4. If applicable, provide a detailed specification for any customized flagging and coding, summary data tables, and reports that you are requesting the Department's designated vendor, Onpoint Health Data to generate *at your cost* for your research using restricted (R) data elements per tables 1-3 (below). This includes all summary data tables

* Data is collected on an incurred basis starting with January 2007 and will be available on quarter-by-quarter time periods. A sixth month lag on payments to account for claim payment run-out is recommended.

and reports that include information using calculated variables based on restricted data elements:

N/A

5-5. Provide the justification and need for your request for the release of Member Date of Birth (ME014) data.

Full DOB
Approved
-1) in 10/11/12

The Date of Birth (DOB) field is requested so that it may be used to enable more reliable probabilistic matches to limited data sets of interest. The field, as with all data fields from limited data sets will be used exclusively as a quasi-identifier, and under no circumstances used to re-identify individuals (either beneficiaries or providers). As with all quasi-identifiers that are part of this data set, they will be used exclusively for linking between limited data sets (sensu HIPAA) and separated from the data in a logically and physically secure location when performing analytic tasks. All probabilistic linkages between limited data sets will be done on the UVM CCTS IRIS informatics platform, which is housed in a secure, HIPAA-compliant environment as well as maintained and used in accordance to an approved UVM IRB protocol (CHRMS 10-228). The resulting integrated limited data set (e.g., that would link claims data to clinical data) will be used for the purposes of developing de-identified aggregate reports, dashboard functions, and advanced research for approved uses including the Vermont Blueprint for Health that are associated with an approved IRB. The linked limited data set or any subset thereof will not be released without prior permission from the limited data set providers including BISHCA for the VHCURES data and appropriate IRB approvals.

5.6. Tables 1-3 (below) include a listing of public use (P) and restricted (R) data elements. Check all data elements applicable to data extracts and any customized summary data tables and reports that you are requesting for your research. In the case of restricted data elements, you must also provide a justification for need for such data. Specify any sub-selection of records or grouping of values you expect to use for each data elements. Attach additional sheets, as necessary.

- *Need:* For restricted data elements, we provide the minimum set of information with the minimum specificity that you need. Data elements may be denied if your application does not justify your need explicitly as required in the Need/Filter/Group column.
- *Sub-selection of Records (Filters):* We will only release the minimum set of records needed for your study. Please provide any selection criteria for the records you are specifically interested in.
- *Grouping of Values:* Where relevant, we will provide data elements pre-grouped. Please indicate any grouping that is needed for your study. For instance, if you only need to know information based on specified age groups, we can recode single-year age into relevant age groupings.

Special Request for Sub-selection of Records (Filters)

In the space below, identify the selection criteria below for any sub-selection of records that you want included in the file, if applicable. A sub-selection may be specified by gender, age range, insurance market or product type, etc.

Pursuant to Regulation H-2008-01, VHCURES data may not be used in any manner that identifies individual employer groups or purchaser groups from information contained in a limited use data set. In addition, requesting the VHCURES data set to be filtered may require a processing cost in addition to the file price. See Section 3, above.

Table 1: Member Eligibility File Data Element Request

Release Status Key:

P= Public or unrestricted data elements

R= Restricted elements require department approval

Under section 5-5, BISHCA has approved the release of full Date of Birth: - Din K...

Request (X)	BISCHA Approval (BISHCA use only)	Element #	Release Status	Element Description	Need/Filter/Group
(X)	(X)	ME001 & 2	R	Payer and Payer National Plan ID	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	ME006	R	Encrypted Insured Group or Policy Number (specify at right if grouping or filtering by number of members in group)	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	ME007	P	Benefit Coverage Level Code	Not Required
(X)	(X)	ME013	P	Member Gender	Not required

Request (X)	BISCHA Approval (BISHCA use only)	Element #	Release Status	Element Description	Need/Filter/Group
(X)	(X)	ME015	R	Member City	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	ME016	P	Member State	Not required
(X)	(X)	ME017	R	Member ZIP Code	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	ME018	P	Medical Coverage Flag	Not required
(X)	(X)	ME019	P	Prescription Drug Coverage Flag	Not required
(X)	(X)	ME028	P	Primary Insurance Indicator	Not required
(X)	(X)	ME029	P	Coverage Type	Not required
(X)	(X)	ME030	P	Market Category Code	Not required
(X)	(X)	ME901	P	Member Age: Aggregate 90+	Not required
(X)	(X)	ME902	P	Record ID#	Not required
(X)	(X)	ME905	P	Medicare Coverage Flag	Not required
(X)	(X)	ME907	R	Double Encrypted Subscriber SSN	Need: For data mining studies looking for causal relationships or associations. For example to track un-identified groups of individuals (>5) across time.
(X)	(X)	ME908	R	Double Encrypted Plan Specific Contract Number	Need: For data mining studies looking for causal relationships or associations. For example to track un-identified groups of individuals (>5) across time.
(X)	(X)	ME911	P	Standardized Individual Relationship to Insured Code	Not required
(X)	(X)	ME912	P	Standardized Insurance Type Code/Product Code	Not required
(X)	(X)	ME914	P	Eligibility Year and Month	Not required

Request (X)	BISCHA Approval (BISHCA use only)	Element #	Release Status	Element Description	Need/Filter/Group
(X)	(X)	ME915	P	Member Vermont County	Not required
(X)	(X)	ME916	P	Composite Unique Member ID# (required for linking to claim tables)	Not required
(X)	(X)	ME032	R	Insured Group Name	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:

Table 2: Medical Claims File Data Element Request

Release Status Key:

P= Public or unrestricted data elements

R= Restricted elements require department approval

*=Provider detail not released where the medical abortion or medication abortion flag=1

Request (X)	BISCHA Approval (BISHCA use only)	Element #	Release Status	Element Description	Need/Filter/Group
(X)	(X)	MC001 & 2	R	Payer and Payer National Plan ID	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	MC005A	P	Version Number	Not required
(X)	(X)	MC006	R	Encrypted Insured Group or Policy Number (specify at right if grouping or filtering by number of members in group)	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	MC011	P	Member Relationship to Insured Code	Not required
(X)	(X)	MC012	P	Member Gender	Not required

Request (X)	BISCHA Approval (BISHCA use only)	Element #	Release Status	Element Description	Need/Filter/Group
(X)	(X)	MC014	R	Member City	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	MC015	P	Member State	Not required
(X)	(X)	MC016	R	Member ZIP Code	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	MC017	R	Date Service Approved (AP Date)	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	MC018	R	Inpatient Admission Date	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	MC019	R	Admission Hour	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	MC020	P	Admission Type	Not required
(X)	(X)	MC021	P	Admission Source	Not required

Request (X)	BISCHA Approval (BISHCA use only)	Element #	Release Status	Element Description	Need/Filter/Group
(X)	(X)	MC022	R	Discharge Hour	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	MC023	P	Member Status at Discharge	Not required
(X)	(X)	MC024 & MC026 & MC912	R*	Payer Service, National Service Provider, Standardized Provider ID# Numbers	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	MC027	R	Service Provider Entity Type Qualifier (Person or Non-Person Entity)	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter:
(X)	(X)	MC028 - 31	R*	Service Provider Name or Organization Name	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	MC032	P*	Payer Service Provider Specialty Code	Not required
(X)	(X)	MC033	P*	Service Provider City	Not required
(X)	(X)	MC034	P*	Service Provider State	Not required
(X)	(X)	MC035	P*	Service Provider ZIP Code	Not required
(X)	(X)	MC036	P	Type of Bill – Institutional	Not required
(X)	(X)	MC037	P	Facility Type – Professional	Not required
(X)	(X)	MC038	P	Claim Status (payment status of specific service line record)	Not required
(X)	(X)	MC039	P	Inpatient Admitting Diagnosis	Not required
(X)	(X)	MC040	P	E-Code	Not required
(X)	(X)	MC041	P	Principal Diagnosis	Not required

Request (X)	BISCHA Approval (BISHCA use only)	Element #	Release Status	Element Description	Need/Filter/Group
(X)	(X)	MC042 - 53	P	Other Diagnosis – 1 to 12	Not required
(X)	(X)	MC054	P	NUBC Revenue Code	Not required
(X)	(X)	MC055 - 57	P	HCPCS/CPT Procedure Code and Modifiers	Not required
(X)	(X)	MC058	P	ICD-9-CM Procedure Code	Not required
(X)	(X)	MC059	R	Date of Service – From	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	MC060	R	Date of Service – Thru	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	MC061	P	Quantity	Not required
(X)	(X)	MC062	R	Charge Amount	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter:
(X)	(X)	MC063	P	Paid Amount	Not required
(X)	(X)	MC064	P	Prepaid Amount (and for capitated services the fee for service equivalent)	Not required
(X)	(X)	MC065	P	Copay Amount	Not required
(X)	(X)	MC066	P	Coinsurance Amount	Not required
(X)	(X)	MC067	P	Deductible Amount	Not required
(X)	(X)	MC069	R	Discharge Date	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:

Request (X)	BISCHA Approval (BISHCA use only)	Element #	Release Status	Element Description	Need/Filter/Group
(X)	(X)	MC070	P*	Service Provider Country Name	Not required
(X)	(X)	MC071	P	DRG	Not required
(X)	(X)	MC072	P	DRG Version	Not required
(X)	(X)	MC073	P	APC	Not required
(X)	(X)	MC074	P	APC Version	Not required
(X)	(X)	MC075	P	Drug Code	Not required
(X)	(X)	MC076	R*	Billing Provider Number	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	MC077	R*	National Billing Provider ID	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	MC078	R*	Billing Provider Last Name or Organization	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	MC901	P	Member Age: Aggregate 90+	Not required
(X)	(X)	MC902	P	Record ID#	Not required
(X)	(X)	MC905	P	Medicare Coverage Flag	Not required
(X)	(X)	MC907	R	Double Encrypted Payer Claim Control Number	Need: For data mining studies looking for causal relationships or associations. For example to track unidentified groups of individuals (>5) across time.

Request (X)	BISCHA Approval (BISHCA use only)	Element #	Release Status	Element Description	Need/Filter/Group
(X)	(X)	MC908	R	Double Encrypted Subscriber Social Security Number	Need: For data mining studies looking for causal relationships or associations. For example to track unidentified groups of individuals (>5) across time.
(X)	(X)	MC909	R	Double Encrypted Plan Specific Contract Number	Need: For data mining studies looking for causal relationships or associations. For example to track unidentified groups of individuals (>5) across time.
(X)	(X)	MC910	P	Composite Unique Member ID# (required for linking to member and pharmacy claim tables)	Not required
(X)	(X)	MC913	P	Standardized Insurance Type/Product Code	Not required
(X)	(X)	MC914	P*	Medical Abortion Flag	Not required
(X)	(X)	MC915	P	Year Paid	Not required
(X)	(X)	MC916	R	Month Paid	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	MC917	P	Year of Service	Not required
(X)	(X)	MC918	R	Month of Service	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	MC919	P	Payment Quarter	Not required
(X)	(X)	MC920	P	Quarter Service Performed	Not required
(X)	(X)	MC921	P*	Medication Abortion Flag	Not required
(X)	(X)	MC922	P	Member County Code	Not required
(X)	(X)	MC923	P	Admission Year	Not required
(X)	(X)	MC924	P	Discharge Year	Not required
(X)	(X)	MC925	P	Length of Stay	Not required
(X)	(X)	MC926	P	Service Event Primary Key	Not required
(X)	(X)	MC928	P*	Service Provider County Code	Not required

Table 3: Pharmacy Claims File Data Element Request

Release Status Key:

P= Public or unrestricted data elements

R= Restricted elements require department approval

*=Provider detail not released where the medical abortion or medication abortion flag=1

Request (X)	BISCHA Approval (BISCHA use only)	Element #	Release Status	Element Description	Need/Filter/Group
(X)	(X)	PC001 & 2	R	Payer and Payer National Plan ID	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	PC003 & PC912	P	Insurance Type/Product Code & Standardized Code	Not required
(X)	(X)	PC006	R	Encrypted Insured Group or Policy Number (specify at right if grouping or filtering by number of members in group)	Need: For data mining studies looking for causal relationships or associations. For example to track unidentified groups of individuals (>5) across time. Filter: Grouping:
(X)	(X)	PC011	P	Member Relationship to Insured Code	Not required
(X)	(X)	PC014	R	Member City	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	PC015	P	Member State or Province	Not required
(X)	(X)	PC016	R	Member ZIP Code	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:

Request (X)	BISCHA Approval (BISCHA use only)	Element #	Release Status	Element Description	Need/Filter/Group
(X)	(X)	PC017	R	Date Service Approved	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	PC018 & PC913	R	Payer Pharmacy Number & Standardized Pharmacy ID# Number	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	PC020	R	Pharmacy Name	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	PC021	R	National Pharmacy ID Number	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	PC022	R	Pharmacy Location City	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	PC023	P	Pharmacy Location State	Not required

Request (X)	BISCHA Approval (BISHCA use only)	Element #	Release Status	Element Description	Need/Filter/Group
(X)	(X)	PC024	R	Pharmacy ZIP Code	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	PC024A	P	Pharmacy Country Name	Not required
(X)	(X)	PC025	P	Claim Status (payment status of specific service line record)	Not required
(X)	(X)	PC026	P	Drug Code (NDC)	Not required
(X)	(X)	PC027	P	Drug Name	Not required
(X)	(X)	PC028	P	New Prescription/Refill Number	Not required
(X)	(X)	PC029	P	Generic Drug Indicator	Not required
(X)	(X)	PC030	P	Dispense as Written Code	Not required
(X)	(X)	PC031	P	Compound Drug Indicator	Not required
(X)	(X)	PC032	R	Date Prescription Filled	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	(X)	PC033	P	Quantity Dispensed	Not required
(X)	(X)	PC034	P	Days Supply	Not required
(X)	(X)	PC035	R	Charge Amount	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter:
(X)	(X)	PC036	P	Health Paid Amount	Not required
(X)	(X)	PC037	P	Ingredient Cost/List Price	Not required
(X)	(X)	PC038	P	Postage Amount Claimed	Not required
(X)	(X)	PC039	P	Dispensing Fee	Not required
(X)	(X)	PC040	P	Copay Amount	Not required
(X)	(X)	PC041	P	Coinsurance Amount	Not required
(X)	(X)	PC042	P	Deductible Amount	Not required

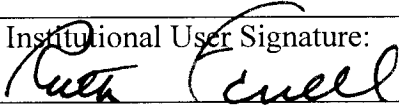
Request (X)	BISCHA Approval (BISHCA use only)	Element #	Release Status	Element Description	Need/Filter/Group
(X)	X	PC044	R*	Prescribing Physician First Name	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	X	PC045	R*	Prescribing Physician Middle Name	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	X	PC046	R*	Prescribing Physician Last Name	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	X	PC901	P	Member Age: Aggregate 90+	Not required
(X)	X	PC902	P	Record ID#	Not required
(X)	X	PC906	R	Double Encrypted Payer Claim Control Number	Need: For data mining studies looking for causal relationships or associations. For example to track unidentified groups of individuals (>5) across time.
(X)	X	PC907	R	Double Encrypted Subscriber Social Security Number	Need: For data mining studies looking for causal relationships or associations. For example to track unidentified groups of individuals (>5) across time.

Request (X)	BISCHA Approval (BISHCA use only)	Element #	Release Status	Element Description	Need/Filter/Group
(X)	X	PC908	R	Double Encrypted Plan Specific Contract Number	Need: For data mining studies looking for causal relationships or associations. For example to track unidentified groups of individuals (>5) across time.
(X)	X	PC910	P	Composite Unique Member ID# (required for linking to member and medical claim tables)	Not required
(X)	X	PC911	P	Standardized Member Gender	Not required
(X)	X	PC912	P	Standardized Insurance Type/Product Code	Not required
(X)	X	PC913	R	Pharmacy ID#	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations.
(X)	X	PC914	P	Year Paid	Not required
(X)	X	PC915	R	Month Paid	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	X	PC916	P	Year Prescription Filled	Not required
(X)	X	PC917	R	Month Prescription Filled	Need: For data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	X	PC918	P	Payment Quarter	Not required
(X)	X	PC919	P	Quarter Prescription Filled	Not required
(X)	X	PC920	R*	Prescribing Physician ID#	Need: Primarily to facilitate probabilistic matching with other Limited Data Sets (sensu HIPAA). May also be used for data mining studies looking for causal relationships or associations. Filter: Grouping:
(X)	X	PC921	P*	Medication Abortion Flag	Not required

Request (X)	BISCHA Approval (BISCHA use only)	Element #	Release Status	Element Description	Need/Filter/Group
(X)	(X)	PC922	P	Member Vermont County	Not required


Section 6: Authorized Institutional User Signature

I have reviewed the request form. All statements made in the request form are true, complete, and correct to the best of my knowledge.

Authorized Institutional User Name: Ruth A. Farrell, Associate Vice President	
Authorized Institutional User Signature: 	Date: 6-8-11

Section 7: Principal Investigator Signature

I have reviewed the request form. All statements made in the request form are true, complete, and correct to the best of my knowledge.

Principal Investigator Name: Indra Neil Sarkar, PhD, MLIS	
Principal Investigator Signature: 	Date: 6/6/2011



**Vermont Department of Banking, Insurance, Securities
and Health Care Administration
Division of Health Care Administration**

Data Use Agreement

Application(s) No. 2011-05 UVM CCTS

The Department of Banking, Insurance, Securities, and Health Care Administration (Department) and the University of Vermont (UVM), on behalf of its Center for Clinical and Translational Science (CCTS), enter into this Data Use Agreement in reference to the attached Application for a Limited Use Health Care Claims Research Data Set (Application) and Agreement for Release of Non-Public Data Elements of Hospital Discharge Data (Agreement). This Data Use Agreement is made and entered into pursuant to the Department's authority under 18 V.S.A. § 9410 and Department Administrative Regulation H-2008-01 to administer the Vermont Health Care Uniform Reporting and Evaluation System (VHCURES), and 18 V.S.A. § 9457.

In consideration for the receipt of limited use health care claims research data sets and hospital discharge data from the Department, UVM and CCTS agree to be bound by the terms and conditions of data use as approved by the Department and as set forth in the Application and Agreement, which are attached and incorporated herein by reference and made part of this agreement.

IN WITNESS WHEREOF, this agreement has been executed by the parties hereto:

**Department of Banking, Insurance, Securities
and Health Care Administration**

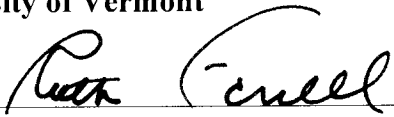
S.W. Kimbell
Authorized Signature

Date: 6/22/11

Printed Name: Stephen W. Kimbell

Title: Commissioner, BISHCA

University of Vermont

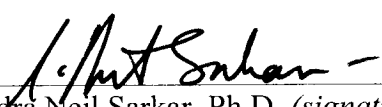

Authorized Signature

Date: 6-8-11

Printed Name: RUTH FARRELL

Title: ASSOC. V.P. FOR RESEARCH ADMIN

Center for Clinical and Translational Science


Indra Neil Sarkar, Ph.D. (signature)

Date: 6/6/2011

Title: DIRECTOR OF BIOMEDICAL INFORMATICS + ASSISTANT PROFESSOR