

Observational Medical Outcomes Partnership Data Source Characteristics Profile

1 Organization name

Please provide the following primary contact information:

2 Contact name:

3 Mailing Address:

4 Email address:

5 Phone number:

6 Within your dataset, what is the date of the most current data?

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Population Size

- 7 Please describe how you define the population covered within the database

- 8 Number of unique persons within the database

- 9 Number of currently active persons

- 10 Is the database a population-based sample?

- 11 Is all the care for the population captured in the data?

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Person coverage/eligibility/period of data capture

- 12 What information is available to define the period of data capture available for each person? (e.g. claims may have eligibility/enrollment files, EHR may contain first/last observation date)



13 Range of calendar years of coverage (min year/max year)

14 Average length of capture

15 Minimum length of capture

16 Maximum length of capture

17 # (%) of persons with coverage as of reference year 2008:

>=1 yr
coverage

>=2 yr
coverage

>=3 yr
coverage

>=4 yr
coverage

>=5 yr
coverage



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Person Demographics

Age

- 18 Information available to calculate age (e.g. date or year of birth, age at reference date)?

- 19 Distribution of year of birth across entire population

Average year of birth

Minimum year of birth

Maximum year of birth

- 20 # (%) of persons as of reference date 1Jan2009:

<1 year old	<input type="text"/>
1-9 year old	<input type="text"/>
10-19 year old	<input type="text"/>
20-29 year old	<input type="text"/>
30-39 year old	<input type="text"/>
40-49 year old	<input type="text"/>
50-59 year old	<input type="text"/>
60-69 year old	<input type="text"/>
70-79 year old	<input type="text"/>
>=80 year old	<input type="text"/>
missing age	<input type="text"/>

Gender

- 21 # (%) of persons:

Male	<input type="text"/>
Female	<input type="text"/>
Unclassified	<input type="text"/>
Missing gender	<input type="text"/>

Race/Ethnicity

22 What is the origin of capture? (physician, self-report by patient, etc.)

23 What race/ethnicity categories are used, or is it open text?

24 # (%) of persons in each race/ethnicity category, as described in prior question

25 # (%) of persons missing race/ethnicity information

Geographic region:

26 Available information (e.g. 3-level zip, census region)?

27 # (%) of persons in each census region:

Northeast (ME,NH,VT,MA,CT,RI,NY,PA,RI)

Midwest (OH,MI,IN,IL,WI,MO,IA,MN,KS,NE,SD,ND)

South

(DE,MD,DC,WV,VA,KY,TN,NC,SC,GA,FL,AL,MS,AR,LA,OK,TX)

West (MT,WY,CO,NM,AZ,UT,ID,NV,WA,OR,CA)

Other/non-US

Missing geographic region



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Insurance Coverage

28 # (%) of persons with:

Commercial insurance-HMO staff	<input type="text"/>
Commercial insurance-HMO other	<input type="text"/>
Commercial insurance-other	<input type="text"/>
Medicaid	<input type="text"/>
Medicare	<input type="text"/>
Uninsured	<input type="text"/>
Unknown	<input type="text"/>



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Visit Information

29 Does the database systematically capture each of the following?

	1 Yes	2 No	N/A
Outpatient visits	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Inpatient visits	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Hospital visits-general

1

2

Hospital visits- ED

1

2

Hospital visits- OR

1

2

Hospital visits- ICU

1

2

Provider Identifier

1

2

Provider type/specialty

1

2

Visit start/stop dates

1

2

Other health service utilization

1

2

30 Please specify any other health service utilization captured

31 Ability to follow patients across different care settings?

YES NO

32 Please provide the following quantitative metrics:

of all visits
across the
entire dataset

of inpatient
visits across
the entire
dataset

of outpatient
visits across
the entire
dataset

(%) of
persons with
>=1 visit of

any type



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Drug Utilization Measures

33 Does the database contain:

	1 Yes	2 No	N/A
Prescriptions written (e.g. captured from the doctor's orders or e-prescription)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Drug dispensings (e.g. captured from the pharmacy)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Process to delineate initial and follow-up prescriptions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Inpatient pharmacy records	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vaccine administration	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vaccine manufacturer/lot #	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Infusion administrations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other drugs reported (OTC, supplement, specialty pharmaceutical)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Implantable device utilization	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Device manufacturer/lot #	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Formulary restrictions (e.g. prior authorization, copay tiers, stop orders)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

1

2

Indication for drug use (not imputed)

1

2

-
- 34 If you have the ability to determine indication for the drug, briefly describe the process:

-
- 35 If you have the ability to determine initial versus continuing therapy, please explain the process:

-
- 36 Which drug coding scheme is used:

- NDC
- SNOMED
- GPI
- Free text
- Other, please specify

-
- 37 What information is available to infer length of drug exposure?

- Prescription end date
- Days supply
- # of refills
- Quantity dispensed
- Other, please specify

-
- 38 What is the primary source of drug utilization information (ex. merged pharmacy dispensing, physician orders/Rx written, etc.)

39 Please provide the following quantitative metrics:

of
prescriptions
for the overall
population
(%) of
persons with
>=1
prescription

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Condition Occurrence Measures

40 Does the database contain:

	1 Yes	2 No	N/A
Diagnoses, outpatient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
If yes, what is a limit, if any, on the number recorded per visit?			<input type="text"/>
Diagnoses, inpatient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
If yes, what is a limit, if any, on the number recorded per visit?			<input type="text"/>
Symptoms not represented in diagnostic codes (e.g. cough)	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
If yes, what is a limit, if any, on the number recorded per visit?			<input type="text"/>

Outcomes not resulting in hospitalization

If yes, what is a limit, if any, on the number recorded per visit?

Outcomes not resulting in medical attention

If yes, what is a limit, if any, on the number recorded per visit?

41 Which condition coding scheme is used?

- ICD9
- ICD10
- SNOMED
- MedDRA
- Read/OXMIS
- Free Text
- Other, please specify

42 Have there been any prior studies on validation (e.g. positive predictive value) of diagnostic codes in your database?

YES NO

If so, please provide publication references

43 Please provide the following quantitative metrics:

of diagnoses
across the
entire dataset

(%) of
persons with
>=1 diagnosis



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Procedures

44 Does the database contain:

	1 Yes	2 No	N/A
Procedures, outpatient	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
If yes, what is the limit, if any, on the number recorded per visit?			<input type="text"/>
Procedures, inpatient	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
If yes, what is the limit, if any, on the number recorded per visit?			<input type="text"/>
Procedure administration date	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
If yes, what is the limit, if any, on the number recorded per visit?			<input type="text"/>

45 Procedure coding scheme used:

- ICD9
- CPT
- HCPCS
- Free text
- Other, please specify

46 Please provide the following quantitative metrics:

of procedures
for the overall
population
(%) of
persons with
>=1 procedure



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Laboratory values

47 Does the database contain:

	1 Yes	2 No	N/A
Laboratory values, outpatient	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Laboratory values, inpatient	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Laboratory normal values	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
For cultures: MIC/sensitivities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
For ECG: report or measures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

48 Lab coding scheme (e.g. LOINC)

49 Please provide the following quantitative metrics:

(%) of
persons with at
least 1

laboratory
values across
the entire
dataset

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Vital signs

50 Does the database contain:

	1 Yes	2 No	N/A
Height	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Weight	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Blood pressure	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Temperature	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Heart rate	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Additional data and carve-out information

51 Does your database have carriers with mental-health carve-

out?

If so, how is mental health carve-out data represented?

52 What types of health care delivery data are excluded from the database?

- Health care by non-MD but reimbursed (e.g. chiropractor, physical therapy, natural/homeopathic medicine, nurse educator, psychologist)
- Home care or home visit
- On-site employer health clinic
- Employee assistance plan delivery: e.g. substance abuse
- Durable medical equipment
- Nursing home or rehabilitation center
- Specialist or surgical data for services delivered outside of network or not reimbursed by carrier
- Other, please specify



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Ability for Source Record Verification

53 Ability to get more information on patients:

1 Yes	2 No	N/A
via medical record accessibility (electronic or paper)		
<input type="button" value="1"/>	<input type="button" value="2"/>	<input type="button" value=""/>
via electronic free text		

<input type="radio"/> 1	<input type="radio"/> 2	<input type="checkbox"/>
process in place to do this?		
<input type="radio"/> 1	<input type="radio"/> 2	<input type="checkbox"/>
Do you have an institutional IRB?		
<input type="radio"/> 1	<input type="radio"/> 2	<input type="checkbox"/>
Can you use a centralized IRB?		
<input type="radio"/> 1	<input type="radio"/> 2	<input type="checkbox"/>
When accessing patient records for validation, is individual patient informed consent required?		
<input type="radio"/> 1	<input type="radio"/> 2	<input type="checkbox"/>
If EHR: is there a patient record or additional archived electronic data to review?		
<input type="radio"/> 1	<input type="radio"/> 2	<input type="checkbox"/>



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Data Currency and Validity

54 Data lag time (time from most recent healthcare interaction until appearance in database source)

55 Frequency of data updates

56 Average age of records

57 Are there formulary or pharmacy control measures in place that would delay availability of a newly approved product appearing in the database?

Additional Comment

58 Please explain the data cleanup process for anomalies: (ex. automatic, return to source, none)

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Data Linkage

59 Does any of the database population contain the following available linkages or the ability to link?

	1 Yes	2 No	N/A
Mother-child	<input type="button" value="1"/>	<input type="button" value="2"/>	<input type="button" value="N/A"/>
If yes, please explain the linkage process and define what proportion of the population it applies to			
			<input type="text"/> <input type="text"/>
Cancer registry	<input type="button" value="1"/>	<input type="button" value="2"/>	<input type="button" value="N/A"/>
If yes, please explain the linkage process and define what proportion of the population it applies to			
			<input type="text"/> <input type="text"/>
Death index (e.g. social security records or National Death Index)	<input type="button" value="1"/>	<input type="button" value="2"/>	<input type="button" value="N/A"/>
If yes, please explain the linkage process and define what proportion of the population it applies to			



Cost Information

60 Does the database contain?

	1 Yes	2 No	N/A
Charge per visit	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Co-pay by patient	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Amount covered by insurance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other data elements

61 Does the database contain any of the following

- Past medical history
- Family history information
- Marital status
- Smoking status
- Alcohol use
- Allergy status
- Genetic data
- Patient reported outcomes/quality of life measures
- Socioeconomic status
- Dwelling status (e.g. lives alone, dependents, assisted care, nursing home)
- Free text health information
- Additional Comment



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Research considerations

62 Check any of the following data access models would you consider to participate in the Observational Medical Outcomes Partnership?

- Provide your data externally to load into the Central Research Core IT environment
- Facilitate OMOP researchers access to execute queries directly (through firewall)
- OMOP queries run locally by your research staff
- Develop and run your own queries locally
- Other, please specify


63 Please comment on the potential cost of using the database for drug safety research

64 Please describe your organization's experience and interest in drug safety research


65 Please describe your organization's internal expertise in data management and analysis of the data source

66 Please describe the IRB approval process for conducting

sponsored research



-
- 67** Please describe the HIPAA-compliant data collection and management procedures, including method of data de-identification



-
- 68** Please describe the data quality assurance procedures and minimum requirements for inclusion of data into the research data resource



-
- 69** Please comment on the quality of your data over time. For example, Most systems have evolved rapidly; a system may have claims data since Date1, and EMR data for X people since Date2 and for another Y people since Date2A. Or the lab data may only be usable since Date3. Or the data before Date4 may be archived and retrievable only at great cost in time and effort.



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- 70** Please provide any additional comments about your database or organization that you would like us to know

