
Organization Information

Organization Name

Select "Other" if your organization is not listed.

Massachusetts Department of Public Health

Project Information

Project Title

Community Health and Prevention Surveillance and Evaluation

Primary Investigator - Name

Elizabeth Beatriz

Primary Investigator - Title

Director, Office of Statistics & Evaluation ▪ Bureau of Community Health & Prevention

Project Details

Please provide a detailed description of each of the following project components.

Describe your Project's purpose and the specific need for CHIA Data.

Non-government applicants: You must include your methodology or attach your methodology as a separate document.

To conduct ongoing surveillance of injuries and chronic disease, including but not limited to, poisonings/drug overdoses, falls, motor vehicle injuries, assaults, self-inflicted injuries, asthma, cancer, tobacco use and cessation, obesity, sexual and reproductive health, youth health, hypertension, diabetes, stroke, oral health, and other conditions. Data will also be used for program evaluation and data validation of other datasets.

Describe your Project's intended outputs (e.g., internal or external reports, publications, or other products).

The goal of this work is to provide data to support injury and chronic disease prevention program efforts with a focus on identifying populations most at risk of these types of health outcomes, analyzing trends in various injuries and chronic diseases across all populations, and noting health disparities. This work can then help achieve the goals set forth by prevention programs to address these health disparities and improve the health and well-being of all residents of Massachusetts.

Do you intend to use generative Artificial Intelligence (AI) for this Project or expose CHIA Data to generative AI?

No

Data

What type of Data are you requesting?

APCD

Are you requesting an APCD Identifiable Limited Data Set (LDS) or APCD Statistically De-identified Data?

Statistically De-identified APCD Data is available in addition to the APCD Identifiable Limited Data Set (LDS). Requesting Statistically De-identified Data will likely result in an expedited review process and requires fewer prerequisite conditions than requesting a Limited Data Set. [Learn more about Statistically De-identified Data](#).

LDS

Specify the years of APCD Data you are requesting.

CHIA is supporting requests for APCD Data from 2020-2024. Do not request Data from years that are not included within the available scope. Requests made outside those years will not be fulfilled.

All available

Are you requesting Medicaid Data?

Requests for Medicaid Data will require additional review by MassHealth, the Medicaid plan for Massachusetts. MassHealth must approve the request before CHIA can provide Medicaid Data. All applicants requesting Medicaid Data must review the terms of the [Medicaid Addendum to the Data Use Agreement](#), which contains the terms and conditions upon receiving Medicaid Data.

Yes; I am requesting Medicaid Data

Are you requesting MassHealth Enhanced Member Eligibility (MHEE)?

You can learn more about the MHEE file in our APCD Documentation Guide [here](#).

Yes; I am requesting MHEE

Are you requesting APCD Substance Use Disorder (SUD) Data?

Requesting APCD SUD Data may require a longer review process. CHIA does not provide identifiable Medicaid SUD Data.

No

Select the APCD files you are requesting.

Medical Claims

Dental Claims

Pharmacy Claims

Provider

Product

Member Eligibility

Benefits Plan Control

Medicaid Data

Federal regulations restrict the use of Medicaid data to purposes "directly connected" with the administration of the Medicaid plan. All requests for Medicaid must satisfy the "directly connected" requirement.

How are the Project's hypothesis, aims, or expected results "directly connected" to the administration of the Medicaid program?

MassHealth, the Massachusetts Medicaid plan, has provided the following explanation to meeting this standard:

Research aims that are "directly connected" to the administration of the Medicaid program might involve the production of results, data, estimates, or recommendations that are solely applicable to the Medicaid program. Please note that this does not connote a requirement that all research aims and/or results be solely connected to the administration of the Medicaid program, rather that a not insignificant portion of the aims or results be directly connected to the administration of the Medicaid program. Note that aims or results that might merely be relevant to the Medicaid program will not meet this requirement; any health-related research may be relevant to the Medicaid program, but may not necessarily meet the requirement of being directly connected.

Example 1: A hypothesis that the implementation of a program could be beneficial for Medicaid by improving patient outcomes and saving money is not "directly connected" to the administration of the Medicaid program if the finding is equally as applicable to commercial payers or providers.

Example 2: A research aim that determines that implementation of a program improves outcomes for X out of Y Medicaid enrollees involved in the study and is estimated to save Medicaid M dollars over N years would be "directly connected" to the administration of the Medicaid program, as these results are specific to the Medicaid program.

As an Office within the Massachusetts Department of Public Health, we have both the responsibility and authority to conduct surveillance to investigate and monitor trends related to public health threats. This work involves the collection and analysis of electronic health records, including those who are on Medicaid/MassHealth. We know through past research that the type of health insurance a person has can influence several health factors and outcomes, including the ones our Office studies (e.g., injury and chronic disease). Understanding how the health

needs and outcomes of Medicaid/MassHealth recipients differ compared to other insurances can help us tailor prevention programming to the appropriate communities and populations who need them the most.

Will the results of the research have the potential for any of the following (check all that apply)?

Reducing cost of the Medicaid program

Improving access for recipients

Increasing quality of care to recipients

If your Project is approved to use Medicaid data by MassHealth, describe the project deliverables you will provide to MassHealth.

While this program does not target any specific Medicaid program, policy, rule, or law, our work is part of ongoing public health surveillance designed to increase access to existing services and to aid in prevention. By helping to prevent injuries and chronic health conditions, we would lessen the burden on the Medicaid program overall, thus helping to keep it more sustainable over the long term.

Describe how MassHealth could use the project deliverables in the administration of the MassHealth program.

The goal of our public health surveillance program is to provide the data and resources to our injury and health prevention programs so that they can identify and focus on the most at risk populations for interventions. This program work often involves increasing health care access for individuals and providing services that can increase their quality of life, both of which can lead to reduced costs for the Medicaid program.

Data Linkages

Non-government entities typically are not permitted to link CHIA Data to another source at the individual patient level. If an applicant wishes to link CHIA Data to another source at the individual patient level, CHIA may, in its sole discretion, perform custom linkage work for the applicant. In doing so, CHIA may also charge linkage service fees. Data linkage work performed by CHIA will substantially increase the time it will take for applicants to receive the requested Data.

Will CHIA Data be linked to or merged with another data source?

No
