



Agency for Healthcare  
Research and Quality  
540 Gaither Road  
Rockville, MD 20850

TIME SENSITIVE

June 18, 2008

<Partner>  
<Title>  
<Address>  
<Address>  
<Address>  
<Address>  
<City>, <State> Zip

Dear Mr./Ms./Dr. <name>:

I am writing to invite you to participate in an exciting new HCUP specialized database – the Nationwide Emergency Department Sample (NEDS). The design and development process for the NEDS was presented at the HCUP Partners meeting in April, and the initial response has been very positive.

The NEDS is a unique and powerful database of emergency department encounters from across the nation. The database contains records for patients that are treated and released from the ED as well as patients admitted to the hospital through the ED. The NEDS was specifically designed to permit researchers to study a broad range of conditions and procedures related to emergency department use. This database addresses a large gap in healthcare data – the lack of nationally representative encounter-based information on emergency care. To date, AHRQ has developed the 2005 NEDS as a pilot database and plans to continue this series with annual releases each year, starting with the 2006 NEDS.

This letter briefly describes the database and requests permission to modify the existing HCUP Memorandum of Agreement (MOA) so that AHRQ may include <Data Organization> data in the public release of the 2006 Nationwide Emergency Department Sample (NEDS) through the HCUP Central Distributor and subsequent annual releases.

Enclosed for your review is the *Amendment to the Healthcare Cost and Utilization Project Memorandum of Agreement (MOA): Participation in the Nationwide Emergency Department Sample (NEDS)*. Please review and sign the amendment to include data from your state in the 2006 NEDS and future annual releases.

***Design of the Nationwide Emergency Department Sample (NEDS)***

The design of the 2006 NEDS will be similar to the NIS and the 2005 NEDS, using the same methods for sampling discharges and the many of the same data elements. Some key features of the database:

1. State-specific *sampling restrictions* imposed on the NIS will also be applied to the NEDS. For example, if your data organization limits the number of discharges from your state in the sampling stratum, this will be factored in the creation of the NEDS.

2. State-specific *variable restrictions* imposed on the NIS will also be applied to the NEDS. For all states in the 2006 NEDS, AHRQ has decided not include state and hospital identifiers on the file. There will be a new data element that allows the researcher to group records from a hospital-based ED, but this identifier will not link to other HCUP databases or the American Hospital Association Annual Database.
3. The data element list for the 2006 NEDS will be similar to the NIS. The key exceptions will be the inclusion of several emergency department-related variables, including: trauma designation for selected hospitals, and flags to indicate how the record was identified for inclusion in the file (selected from the State Inpatient Databases (SID) vs. State Emergency Department Databases (SEDD)). The core NEDS file will include patient demographics, clinical information such as diagnosis codes and the discharge status from the ED, and, if available, ED charges. Information from inpatient admissions through the ED that cannot be identified as specific to the ED will be retained in a separate supplemental file. This will include ICD-9-CM procedures, total charge for the inpatient stay, length of the stay, and discharge status. ICD-9-CM and CPT procedures that are specific to the ED will be retained in a second supplemental file.
4. The sampling strategy for the NEDS will be identical to the one employed for the NIS – that is, AHRQ will select a 20 percent stratified sample of U.S. community hospitals with emergency departments and include all ED-related discharges from selected hospitals in the NEDS. This includes discharges from the SEDD, along with SID discharges for patients receiving ED services prior to admission.

A one-page description of the pilot database, the 2005 NEDS, is attached. Questions about the NEDS may be directed to Joanna Jiang at (301) 427-1436 or by e-mail at [joanna.jiang@ahrq.hhs.gov](mailto:joanna.jiang@ahrq.hhs.gov).

If you have general questions or comments about the proposed amendments, please do not hesitate to contact <liaison>, Thomson Reuters, by phone at (805) 681-58xx or by e-mail at <liaison>@thomsonreuters.com. You may also call me at any time regarding HCUP agreements or the project in general. I can be reached at (301) 427-1442 or by e-mail at [jenny.schnaier@ahrq.hhs.gov](mailto:jenny.schnaier@ahrq.hhs.gov).

Sincerely,



Jenny A. Schnaier  
HCUP Project Officer

cc: Carol Stocks and Joanna Jiang, AHRQ  
Jon Busch, Teresa Gibson, Jayne Johann, <analyst>, and <liaison>, Thomson Reuters  
Marguerite Barrett, M.L. Barrett

Enclosures: Amendment to HCUP MOA for Nationwide Emergency Department Sample (NEDS)  
Description of Nationwide Emergency Department Sample (NEDS) 2005 Pilot Database

## How to Indicate Your Approval

By completing and signing the enclosed amendment to the HCUP Memorandum of Agreement (MOA), your Data Organization agrees to the proposed modifications. These modifications permit AHRQ to use your state's data for the creation and release of the 2006 NEDS and subsequent releases.

We ask that you do the following:

- √ Sign the amendment titled "*Participation in Nationwide Emergency Department Sample (NEDS)*" to include your state's data in the NEDS.
- √ Review Attachment C-4 and indicate whether AHRQ may release the specified data elements on the NEDS. This list includes two types of data elements: those provided directly by your organization and others created by AHRQ from the data you provide (such as the AHRQ Tools).

We are requesting your response by [July 18, 2008](#).

If the proposed modifications to the HCUP MOA meet with your approval, please return the signed originals to Thomson Reuters. For Federal Express packages, you may charge Thomson Reuters' account number **2602-0063-1** and mark **Bill to Recipient**.

Packages may be addressed to the HCUP State Liaison:

<liaison>

Thomson Reuters  
5425 Hollister Avenue, Suite 140  
Santa Barbara, CA 93111  
(805) 681-5800 FAX: (805) 681-5810

AHRQ will review and countersign the MOA amendment, and a fully executed copy will be sent back to you for your files. This signed authorization will serve as an extension to your original HCUP MOA.



## Nationwide Emergency Department Sample (NEDS) 2005 Pilot Database

### **Selected a sample of HCUP ED hospitals "generalizable" to the target universe of U.S. hospital-based EDs**

- ▶ Emergency department data from twenty-three States (AZ, CA, CT, FL, GA, HI, IA, IN, KS, MA, MD, MN, MO, NE, NH, NJ, OH, SC, SD, TN, UT, VT, WI)
- ▶ State Emergency Department Databases (SEDD) – ED visits that do not result in an admission (e.g., treat and release or transferred to another hospital)
- ▶ State Inpatient Databases (SID) – Select ED visits that result in an admission

### **Defining an ED record**

- ▶ Services to ED revenue center codes 450-459 reported on discharge record
- ▶ Positive ED charge, when revenue center codes were not available
- ▶ CPT code of 99281-99285 indicating ED physician services reported on record
- ▶ Admission source of ED
- ▶ Source-defined ED record (not standardized across data sources)

### **Design of the 2005 NEDS**

- ▶ Similar approach as the Nationwide Inpatient Sample
- ▶ Stratified probability sample of hospitals in the frame (23 HCUP States)
- ▶ Stratum defined by census region, trauma designation, urban-rural location, teaching status, and hospital control
- ▶ Sampling probabilities calculated to select 20% of the universe contained in each strata
- ▶ Large sample size – 972 hospitals, 27 million records
- ▶ Comparable to other ED sources:
  - Consistent in terms of total ED visits
  - Higher percent of inpatient admissions with ED admission source
  - Larger amount of diagnostic and procedure information available
  - Similar for injury rates

**AMENDMENT TO  
HEALTHCARE COST AND UTILIZATION PROJECT  
MEMORANDUM OF AGREEMENT  
NATIONWIDE EMERGENCY DEPARTMENT SAMPLE  
(NEDS)**

**<<STATE>>**

**Amendment to HCUP Memorandum of Agreement:  
Participation in  
Nationwide Emergency Department Sample (NEDS)  
<STATE NAME>**

IV. DESCRIPTION OF HCUP DATABASES

B. ADDITIONAL PARTICIPATION

4. **Specialized Databases.** These databases will be designed to address research questions on specific populations or types of discharges that the *NIS, SID, or SEDD* cannot ideally address. Examples of HCUP specialized databases are pediatric discharges (e.g., the Kids' Inpatient Database, referred to as the KID), *emergency department encounters (e.g., the Nationwide Emergency Department Sample, referred to as the NEDS)*, and women's health. The HCUP specialized databases exclude data elements that directly or indirectly might increase risk for re-identification of a person, such as patient names, addresses, identification numbers (e.g., unencrypted billing number and medical record number), social security numbers, and full dates of admission, discharge, procedures, and births. AHRQ also imposes any additional confidentiality requirements agreed upon with specific Data Organizations.

Specialized databases may become available as restricted access public release files only with the permission of Data Organizations and only after extensive evaluation by AHRQ. To date, AHRQ has developed the 1997, 2000, 2003, and 2006 KID. This series will be extended to include additional releases of the KID approximately every three years. Other topics may be determined annually over the course of the HCUP contract.

The KID is an administrative database designed specifically to assess use of hospital services by newborns, children, and adolescents, age 0-20. The KID enables studies of specific conditions, procedures, and subpopulations that often cannot be assessed with other databases because children account for a relatively small proportion of hospital stays. The sample is drawn from the HCUP Intramural SID and consists of approximately 10% of all normal births and 80% of all other pediatric cases in each stratum.

*A second specialized database, the NEDS, is an administrative database designed specifically to assess emergency department (ED) services for patients treated and released from the ED and those admitted to the hospital. The NEDS enables studies of the effectiveness of interventions and investments in emergency care. The NEDS approximates a 20 percent stratified sample of U.S. community hospitals with an emergency department. Hospitals are sampled from the HCUP Intramural SEDD and all discharges from sampled hospitals are included in the annual databases, along with SID discharges from those same hospitals when they contain an indication of ED services prior to admission.*

V. RESPONSIBILITIES OF THE PARTIES

*E. RESPONSIBILITIES RELATED TO THE NATIONWIDE EMERGENCY DEPARTMENT SAMPLE*

*1. The Data Organization:*

- a. Agrees to allow AHRQ to release to authorized requestors, through the Central Distributor, the emergency department data elements indicated in Attachment C-4 to this Agreement, HCUP Data Elements for Release, Nationwide Emergency Department Sample (NEDS), in a subset of the HCUP discharge records for the Nationwide Emergency Department Sample.*

*An authorized requestor is one who has submitted a signed Data Use Agreement for the Nationwide Emergency Department Sample to the HCUP Central Distributor (see Attachment M).*

2. *AHRQ, directly or through its contractors:*

- a. *Agrees to re-release on the Nationwide Emergency Department Sample only the emergency department data elements specified in Attachment C-4 to this Agreement, HCUP Data Elements for Release, Nationwide Emergency Department Sample (NEDS), as amended and initialed by the authorized representative of the Data Organization.*

I agree to amend the HCUP Memorandum of Agreement (MOA) between the <<Data Org Name>> and the Agency for Healthcare Research and Quality (AHRQ) by adding or modifying the above paragraphs in sections IV.B.4, IV.E.1, and IV.E.2. Attachments C-4 and M to this Amendment are hereby made a part of this Agreement.

The undersigned acknowledges these conditions and agrees to abide by them:

By: \_\_\_\_\_ Date \_\_\_\_\_  
Data Organization Representative, Signature

By: \_\_\_\_\_ Date \_\_\_\_\_  
AHRQ Representative, Signature

Data Organization Representative: \_\_\_\_\_  
(Please Print)

Name of Data Organization: \_\_\_\_\_

Address of Data Organization: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

AHRQ Representative: Jenny A. Schnaier, HCUP Project Officer

Name of Agency: Center for Delivery, Organization, and Markets

Agency for Healthcare Research and Quality

Address of Agency: 540 Gaither Road

Rockville, MD 20850

Telephone: 301-427-1442 Fax: 301-427-1430 Email: Jenny.Schnaier@ahrq.hhs.gov

Attachments:

- C-4. HCUP Data Elements for Release, Nationwide Emergency Department Sample (NEDS)
- M. Data Use Agreement for HCUP Nationwide Emergency Department Sample

**HCUP DATA ELEMENTS FOR RELEASE IN  
NATIONWIDE EMERGENCY DEPARTMENT SAMPLE (NEDS)  
<State Name>**

This list includes a subset of the *Emergency Department Data Elements Requested from the Data Organizations*. It omits elements that could identify individuals directly or indirectly. It adds other elements derived by AHRQ that will be used for research, without identifying individuals.

If a data organization restricts the release of a data element in the NEDS, the data element will be set to missing in the NEDS.

For each element in the list, **please place your initials in the appropriate box** provided below to indicate whether HCUP may or may not release the element in the NEDS. **Alternatively, if you allow HCUP to release all of these data elements in the NEDS, you may initial here:** \_\_\_\_\_

Nationwide Emergency Department Sample (NEDS) Data Elements	Yes, HCUP may release in NEDS	No, HCUP may not release in NEDS
<b>LINKAGE ELEMENTS</b>		
HCUP encrypted hospital-based ED number (assigned by AHRQ; unique to the NEDS and not linkable to HCUP or other databases)		
Record sequence key (unique to the NEDS and not linkable to HCUP or other databases)		
<b>PATIENT DEMOGRAPHICS</b>		
Age in years at admission		
Sex		
Median household income (in grouped categories for patient's ZIP Code)		
Urban-Rural location of patient's residence		
<b>CLINICAL INFORMATION</b>		
Discharge year; Discharge quarter		
Admission month		
Admission on weekend		
Principal and secondary ICD-9-CM diagnoses and external cause of injury codes (E codes); Number of reported diagnoses and E codes		
Indicator of attempted suicide (derived from reported diagnoses or E codes)		
Principal and secondary procedures (ICD-9-CM and/or CPT/HCPCS); Number of reported procedures		
Point of origin (beginning in 2007)		
Disposition of patient from ED and from inpatient admission; Died during visit indicator		
Length of stay for inpatient admission		
Source of NEDS record (SID or SEDD)		

Nationwide Emergency Department Sample (NEDS) Data Elements	Yes, HCUP may release in NEDS	No, HCUP may not release in NEDS
<b>PAYMENT INFORMATION</b>		
Expected primary and secondary payers		
Total charge for ED services; Total charge for inpatient discharge		
<b>ADDITIONAL HCUP DATA ELEMENTS</b>		
<i>National Weights</i>		
HCUP sampling strata identifiers (census region, teaching hospital, urban/rural location, control/ownership, trauma center indicator)		
National discharge weights and stratum totals		
National hospital weights and stratum totals		
<i>AHRQ Tools</i>		
AHRQ Clinical Classifications Software (CCS) (diagnosis, E Codes, and procedure groups developed by AHRQ)		
AHRQ Chronic Condition Indicators		
AHRQ Procedure Classes		
<b>FURTHER RESTRICTIONS (SPECIFIC TO THIS STATE'S DATA):</b>		
<b>CT:</b> CHIME is to be notified if more than 50% of their hospitals appear in any year of the NEDS.		
<b>GA, HI, IN, NE, OH, SC, SD, TN:</b>		
Sampling and Weighting Restrictions – when only the HCUP Encrypted Hospital Numbers are permitted on NIS:		
1) Sampling strata elements are set to missing for a hospital if a combination of these data elements includes only one of the state's hospitals: hospital urban/rural location, teaching status, trauma center indicator, control/ownership. Stratum number and region may be included on the NIS.		
2) Small strata/cell restrictions: only hospitals that appear in sampling strata with 2 or more hospitals from this state may be included in the NIS.		
<b>FL:</b> Admission month (AMONTH) is set to missing on all records.		
<b>COMMENTS:</b>		



## **DATA USE AGREEMENT for the Nationwide Emergency Department Sample from the Healthcare Cost and Utilization Project Agency for Healthcare Research and Quality**

This Data Use Agreement (“Agreement”) implements the data protections of the Health Insurance Portability and Accountability Act (HIPAA) of 1996 (Public Law 104-191) and the Agency for Healthcare Research and Quality (AHRQ) confidentiality statute. Any individual (“data recipient”) seeking to obtain or use data in the Nationwide Emergency Department Sample (NEDS) from the Healthcare Cost and Utilization Project (HCUP) maintained by the Center for Delivery, Organization, and Markets (CDOM) within AHRQ, must sign and submit this Agreement to AHRQ or its agent before access to the NEDS may be granted.

In accordance with HIPAA, the NEDS may only be used or disclosed in the form of a *limited data set*, as defined by the HIPAA Privacy Rule (45 CFR § 164.514(e)).

The AHRQ confidentiality statute, Section 924(c) of the Public Health Service Act (42 U.S.C. 299c-3(c)), requires that data collected by AHRQ that identify individuals or establishments be used only for the purpose for which they were supplied. Data supplied to AHRQ for HCUP and disclosed in limited data set form are identifiable under the HIPAA Privacy Rule and are provided by the data sources only for research, analysis, and aggregate statistical reporting. Therefore, data recipients may use HCUP data only for these purposes.

*No Identification of Persons*—Any effort to determine the identity of any person contained in HCUP databases (including but not limited to patients, physicians, and other health care providers), or to use the information for any purpose other than for research, analysis, and aggregate statistical reporting, would violate the AHRQ confidentiality statute, the conditions of this Agreement, and the HIPAA Privacy Rule. Recipients of the data set are prohibited under the AHRQ confidentiality statute and the terms of this Agreement from releasing, disclosing, publishing, or presenting any individually identifying information obtained under this Agreement. AHRQ omits from the data set all direct identifiers that are required to be excluded from limited data sets as defined by the HIPAA Privacy Rule. It may be possible in limited situations, through deliberate technical analysis, and with outside information, to ascertain from the limited data sets the identity of particular persons. Considerable harm could ensue if this were to occur. Therefore, any attempts to identify individuals are prohibited and information that could identify individuals directly or by inference must not be released or published. In addition, users of the data must not attempt to contact individuals for any purpose, including verifying information supplied in the data set. Any questions about the data must be referred exclusively to AHRQ.

*Use of Establishment Identifiers*—Section 924(c) of the Public Health Service Act (42 U.S.C. 299c-3(c)) also restricts the use of any information that permits the identification of establishments for purposes other than those for which the information was originally supplied. Permission is obtained from the HCUP data sources (state data organizations, hospital associations, and data consortia) to use the identification of hospitals (when such identification appears in the data sets) for research, analysis, and aggregate statistical reporting. This may include linking institutional information from outside data sets for these purposes. Such purpose does *not* include the use of information in the data sets concerning individual establishments for commercial or competitive purposes involving those individual establishments, or to determine the rights, benefits, or privileges of establishments. Users of the data must not identify establishments directly or by inference in disseminated material. In addition, users of the data must not contact establishments for the purpose of verifying information supplied in the data set. Any questions about the data must be referred exclusively to AHRQ. Misuse of identifiable HCUP data about hospitals would violate the AHRQ confidentiality statute and trigger its penalty provisions.

**The undersigned gives the following assurances with respect to the NEDS data set:**

- I will not use and will prohibit others from using or disclosing the data set (or any part), except for research, analysis, and aggregate statistical reporting, and only as permitted by this Agreement.
- I will ensure that the data are kept in a secured environment and that only authorized users will have access to the data.

- I will not release or disclose, and will prohibit others from releasing or disclosing, any data that are individually identifiable under the HIPAA Privacy Rule, or any information that identifies persons, directly or indirectly, except as permitted under this Agreement and in accordance with the above-mentioned AHRQ confidentiality statute.
- I will not release or disclose information where the number of observations (i.e., individual discharge records) in any given cell of tabulated data is less than or equal to 10.
- I will not release or disclose, and will prohibit others from releasing or disclosing, the data set (or any part) to any person who is not a member, agent, or contractor of the organization (specified below), except with the approval of AHRQ.
- I will require others employed in my organization (specified below), and any agents or contractors of my organization, who will use or will have access to the data set, to sign a copy of this Agreement (specifically acknowledging their agreement to abide by its terms) and I will submit those signed Agreements to AHRQ or its agent before granting access.
- I will not attempt to link, and will prohibit others from attempting to link, the discharge records of persons in the data set with individually identifiable records from any other source.
- I will not attempt to use and will prohibit others from using the data set to learn the identity of any person included in the data set or to contact any such person for any purpose.
- In accordance with the AHRQ confidentiality statute, I will not use and will prohibit others from using the data set concerning individual establishments (1) for commercial or competitive purposes involving those individual establishments; (2) to determine the rights, benefits, or privileges of individual establishments; or (3) to report, through any medium, data that could identify, directly or by inference, individual establishments.
- When the identities of establishments are not provided in the data sets, I will not attempt to use and will prohibit others from using the data set to learn the identity of any establishment.
- I will not contact and will prohibit others from contacting establishments or persons in the data set to question, verify, or discuss data in the HCUP databases.
- I will indemnify, defend, and hold harmless AHRQ and the data organizations that provide data to AHRQ for HCUP from any or all claims and losses accruing to any person, organization, or other legal entity as a result of violation of this Agreement. This provision applies only to the extent permitted by Federal and State law.
- I will make no statement and will prohibit others from making statements indicating or suggesting that interpretations drawn are those of the data sources or AHRQ.
- I will acknowledge in all reports based on these data that the source of the data is the “Nationwide Emergency Department Sample (NEDS), Healthcare Cost and Utilization Project (HCUP), Agency for Healthcare Research and Quality.”

*Safeguards.* I agree to use appropriate safeguards to prevent use or disclosure of the data set other than as permitted by this Agreement.

*Permitted Access to Limited Data Set.* I shall limit the use or receipt of the data set to the individuals who require access in order to perform activities permitted by this Agreement. This Agreement must be signed by all such individuals and submitted to AHRQ or its agent before access to the data set may be granted.

*Re-disclosure.* I will not re-disclose (i.e., share) the data set (or any part), unless the individual who will receive the data has agreed in writing to be bound by the same restrictions and conditions that apply to me under this Agreement.

*The HIPAA Privacy Rule.* I agree not to use or disclose the data set in any manner that would violate the HIPAA Privacy Rule if I were a covered entity under the Privacy Rule.

*Agents and Contractors.* I shall ensure that any agents, including contractors and subcontractors to whom I provide the data set, agree in writing to be bound by the same restrictions and conditions that apply to me with respect to the limited data set.

*Reporting Violations of this Agreement.* I agree to report any violations to AHRQ within twenty-four (24) hours of becoming aware of any use or disclosure of the limited data set in violation of this Agreement or applicable law.

*Term, Breach, and Termination of this Agreement.* This Agreement shall continue in full effect until the data recipient has returned all copies of the data set to AHRQ. Any noncompliance by the data recipient with the terms of this Agreement will be grounds for immediate termination of the Agreement if, at the sole determination of AHRQ, the data recipient knew or should have known of such noncompliance and failed to immediately take reasonable steps to remedy the noncompliance.

*Reporting to the United States Department of Health and Human Services.* If the data recipient fails to remedy any breach or violation of this Agreement to the satisfaction of AHRQ, and if termination of the Agreement is not feasible, AHRQ shall report the recipient's breach or violation to the Secretary of the United States Department of Health and Human Services, and the recipient agrees that he or she shall not have or make any claims against AHRQ with respect to such report(s).

I understand that this Agreement is requested by the United States Agency for Healthcare Research and Quality to ensure compliance with its statutory confidentiality requirement. My signature indicates my Agreement to comply with the above-stated requirements with the knowledge that any violation of the AHRQ confidentiality statute is subject to a civil penalty of up to \$10,000 under 42 U.S.C. 299c-3(d), and that deliberately making a false statement about this or any matter within the jurisdiction of any department or agency of the Federal Government violates 18 U.S.C. 1001 and is punishable by a fine of up to \$10,000 or up to five years in prison. Violators of this Agreement may also be subject to penalties under state confidentiality statutes that apply to these data for particular states.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Print or Type Name of Data Recipient: \_\_\_\_\_

Title: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

The information above is maintained by AHRQ for the purpose of enforcement of this Agreement. This information may also be used by AHRQ to create an HCUP mailing list. The mailing list allows AHRQ to send users information such as notices about the release of new databases and errata when data errors are discovered.

**Please include me on the HCUP mailing list.**

Note to Purchaser: Shipment of the requested data product will only be made to the person who signs this Agreement, unless special arrangements that safeguard the data are made with AHRQ or its agent.

Agency for Healthcare Research and Quality  
HCUP Project Officer  
540 Gaither Road  
Rockville, Maryland 20850  
<http://www.hcup-us.ahrq.gov/home.jsp>