Improving Data & Enhancing Access (IDEA-NW) Project

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Indian health delivery system

- 43 Northwest Tribes
- Outpatient ambulatory care provided by IHS, tribal, and urban clinics
  - No Indian Health Service hospitals
- Gaps in health status data
  - States: Misclassification/missing race data
  - Tribes: limited access to quality hospitalization & other surveillance data on their populations
Record linkage approach

- NW Tribal Registry (NTR)
- Linkages conducted with various public health datasets to evaluate racial misclassification & improve disease/mortality estimates
- Source data: Portland Area IHS Registration file - updated annually
  - Direct identifiers for all AI/AN registered at Northwest IHS or tribal clinics (no health status data)
  - Partnership with urban Indian health center in Seattle
  - Tribe-specific data obtained for special projects
- Results of record linkages used to close the data gap
Specific Aims

1. Conduct probabilistic record linkages between the NTR and health-related datasets in ID, OR, and WA
   - Identify racial misclassification of AI/AN.
   - Hospital discharge systems, trauma registries, vital statistics, STD/HIV systems, and cancer registries.
2. Disseminate results and share methods
3. Expand NTR to include tribal enrollment lists and Urban Indian Health Organization users
4. Summative report of the IDEA-NW Project
Specific Aims

State

Hosp. discharge
Cancer
Death records
Trauma
STD/HIV

De-identified data for analysis

Improved race 
data reported back to state

Local-level data disseminated to tribes

Tribal & urban partners

Summative 
methods report
Findings and issues

• Washington hospital discharge system (2008 data)
  ▪ Increased ascertainment of AI/AN admissions >200%
  ▪ Among matched cases, 55% misclassified or unknown race

• Oregon acute & communicable disease registry
  ▪ 40% of AI/AN records misclassified or unknown race

• Idaho, Oregon, and Washington state cancer registries
  ▪ Cumulative misclassification: approx. 30%

• State-TEC-Tribal data sharing issues
  ▪ State epi not familiar with the role & functions of Tribal/Urban EpiCenters
Thank You