STEP 2.3: Identify non-survey based analytic information to collect for the starting sample at the time of sampling

What is the purpose of this step?

The purpose of this step is to identify data that can be linked to PHDS results to enhance the value of the data collection. Supplemental data, in this case, refers to any data that is not directly needed for the administration of the survey, but is obtained from the survey and used for analytic and dissemination purposes.

For example, you may want to add an indication of whether the child had a **HEDIS-defined** well-child visit, or you may even want to have the child's claims history for more detailed analyses.

Due to new federal regulations on data privacy (HIPAA), it is best to collect any child-level information prior to administering the survey, since obtaining information retroactive to receipt of completed surveys is often not acceptable. The confidential survey administration process recommended in this manual does not allow any person-identifying information, such as the enrollee ID, to be linked with completed survey data.

In this step you will:

- Identify data elements to collect at the same time as survey sampling, such as those outlined in Figure 2.2 (e.g. child enrollment and utilization). These data file elements will be used for analytic purposes.
- **W** Obtain and link data elements to the sampling data file before pulling the starting sample.



For each child in the starting sample, create a unique identifier that will link the starting sample with the completed survey data and with this supplemental data.

- **Identify elements for the supplemental data.** It is important to specify the data elements that will be collected for each of the following:
 - 1. Each child in the starting sample. Collect descriptive variables about the child that you can use to stratify the PHDS data. Supplemental variables created by past users of the PHDS have been based on the following data systems:
 - Administrative and/or enrollment data: Information that can be derived from this data includes the payor (e.g. public or private); the provider the child is enrolled with; and how long the child has been enrolled with that provider.
 - Utilization data: In the PHDS data collected to date, over 95 percent of families who complete the survey say that their child has seen a doctor or other health care provider in the last 12 months or since the child's birth. Such a detail can be valuable when analyzing PHDS results. Other examples of information that can be derived from this data include the number of visits over the past year and indications of certain health problems.

2. Each unit of analysis that you will use to analyze the PHDS findings (e.g. individual pediatric offices, individual pediatric provider). Information that can be collected includes the gender and FTE (full time equivalency) of the individual provider and the number of providers in an office.

Figure 2.3 in the next step provides examples of supplemental items collected by past users of the PHDS.

Create a data dictionary that clearly describes the supplemental variables that will be created based on this data. Appendix 7 provides an example of a data dictionary for a supplemental data collected by a past user of the PHDS.

Figure 2.2: Examples of Data Elements to Collect at the Time of Sampling

Child Characteristics

- Race/ethnicity
- Date of birth
- Gender
- Geographic region (e.g. urban, suburban, rural)

Child Enrollment Characteristics

- Payor for child's insurance (public vs. private)
- Months of continuous enrollment
- Provider and/or office the child is currrently enrolled
- All Providers and/or offices the child has been enrolled with in the last 12 motnhs
- Where applicable, specialty of child's primary care provider (e.g. pediatrics, family medicine).

Child Health Care Utilization Characteristics

- Number of office visits (non-ER, urgent care)
- Number of well-child visits
- Number of sick visits
- Number of urgent care visits
- Number of hospital visits
- Number of referrals, categorical variables related to type of referred services

(For each of the above, the provider who delivered the care and the setting in which the care was provided [e.g. specific office])