HEALTHCARE COST AND UTILIZATION PROJECT (HCUP)
MEMORANDUM OF AGREEMENT

This Memorandum of Agreement (MOA) is made between the <organization name>, a <hospital association / state data organization / private data organization>, in the State or Commonwealth of <state name>, referred to within this agreement as the "Data Organization," and the Agency for Healthcare Research and Quality (AHRQ), U.S. Public Health Service, Department of Health and Human Services. The MOA establishes conditions of participation of the Data Organization and AHRQ in the Healthcare Cost and Utilization Project (HCUP). HCUP is supported by AHRQ within its Center for Delivery, Organization, and Markets (CDOM).

This MOA supersedes the previous Agreement executed on <date> and will remain in effect until replaced or terminated by either party.

I. DESCRIPTION OF HCUP

HCUP builds on the data collection efforts of state data organizations, hospital associations, and private data organizations to create a national information resource of encounter-level health care data. HCUP is made possible through the voluntary participation of Data Organizations that allow the use of their data for the project to create research databases, build software tools for use with administrative data, write research publications, and produce other information resources disseminated by AHRQ. These products inform research on a broad range of health policy issues, including cost and quality of health services, medical practice patterns, access to health care programs, and outcomes of treatments. Further information about the project is available on the HCUP-US Website: http://www.hcup-us.ahrq.gov. Website references in this document are provided for informational purposes only unless stated otherwise.

The release of information collected, assembled, or used by AHRQ is controlled by Section 944(c) of the Public Health Service Act (42 U.S.C. 299c-3(c)) ("the AHRQ Confidentiality Statute"). This Act precludes releasing information that might identify individuals who have been described in, or who might have been the source of, the information. The AHRQ confidentiality statute requires the data collected by AHRQ that identify individuals or establishments be used only for the purpose for which they were supplied. AHRQ and contractor staff with access to HCUP data are required to complete privacy training and sign Staff/Contractor Agreements that specify privacy protections and restrictions placed on the use of HCUP data (http://www.hcup-us.ahrq.gov/partner/MOARef/StaffContractorAgreement.pdf).

II. LEVELS OF PARTICIPATION FOR DATA ORGANIZATIONS

A. *DESCRIPTION OF BASIC PARTICIPATION*

All Data Organizations that participate in HCUP (referred to as "HCUP Partners") meet the criteria for inclusion of state-level data in HCUP, or "basic participation." This means that a Data Organization has agreed to the inclusion of their data in the Intramural[1] State Inpatient Databases (SID) and the Nationwide Inpatient Sample (NIS). A brief description of these databases follows.

1. Intramural State Inpatient Databases (**Intramural SID**) – The HCUP Intramural SID are produced annually and contain 100 percent of inpatient discharge records for all or almost all hospitals in states participating in HCUP. Intramural databases are available only to authorized AHRQ staff, their contractors, and on-site guest workers.[2] The data are used for research, aggregate statistical reporting, and development of software tools that assist in analysis of administrative health care data. More information about the SID is available in the *State Inpatient Databases Overview* on HCUP-US: http://www.hcup-us.ahrq.gov/sidoverview.jsp.

2. Nationwide Inpatient Sample (**NIS**) – The HCUP NIS database consists of discharge records selected from the collection of HCUP Intramural SID data. The NIS is produced annually, and the sample is designed to be nationally representative. The NIS is referred to as a "restricted access public release database"[3] because it is made available to researchers and analysts outside of AHRQ. Dissemination of restricted access public release databases is accomplished through a mechanism called the HCUP Central Distributor (described below in Section II.D). More information about the NIS is available in the *Nationwide Inpatient Sample Overview* on HCUP-US: http://www.hcup-us.ahrq.gov/nisoverview.jsp.

B. *DESCRIPTION OF ADDITIONAL PARTICIPATION – NATIONWIDE DATABASES*

Participation in the additional nationwide databases such as the Kids' Inpatient Database (KID) and the Nationwide Emergency Department Sample (NEDS) is optional; however, HCUP Data Organizations customarily contribute data to these databases.

1. Kids' Inpatient Database (**KID**) – The KID is a sample of pediatric inpatient discharge records (for newborns, children, and adolescents) extracted from the collection of HCUP Intramural SID and produced approximately every three years. The KID is made available as a restricted access public release database to researchers and analysts outside of AHRQ through the HCUP Central Distributor. More information about the KID is provided in the *Kids' Inpatient Database Overview* on HCUP-US: http://www.hcup-us.ahrq.gov/kidoverview.jsp.

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[1] "Intramural" refers to activities that take place under the direction of AHRQ staff and are bound by AHRQ policies and procedures.

[2] "Guest workers" is a term used by AHRQ to describe academic scientists, Federal employees, or graduate/PhD level students who have been authorized to use Agency facilities to further their research or training. For specific approved projects, guest workers are sometimes given access to HCUP intramural data under direct supervision and guidance of a member of the HCUP team, provided that the data files are used only on AHRQ premises.

[3] "Restricted access public release" means the HCUP state and nationwide data are available to the public under certain restricted conditions that include an application process for receipt of state databases, an electronic training course, and submission of a signed HCUP Data Use Agreement for state and nationwide databases.

2. <u>Nationwide Emergency Department Sample (**NEDS**)</u> – The NEDS consists of a sample of hospital-based emergency departments (EDs) from the collection of the HCUP Intramural SID and State Emergency Department Databases (SEDD). 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 sampling strategy for the NEDS is identical to the one employed for the NIS – that is, AHRQ selects a 20 percent stratified sample of U.S. community hospitals with emergency departments and includes all ED-related discharges from the selected hospitals. Starting with 2006, the NEDS is made available as a restricted access public release database to researchers and analysts outside of AHRQ through the HCUP Central Distributor. More information about the NEDS is available in the *Nationwide Emergency Department Sample Overview* on HCUP-US: http://www.hcup-us.ahrq.gov/nedsoverview.jsp.

C. *DESCRIPTION OF ADDITIONAL PARTICIPATION - OUTPATIENT DATA*

Participation in the following Intramural outpatient databases is optional.

1. <u>Intramural State Ambulatory Surgery Databases (**Intramural SASD**)</u> – The Intramural SASD are produced annually and are available only to authorized AHRQ staff, their contractors, and on-site guest workers. The SASD contain data for outpatient surgeries in which patients are admitted and discharged on the same day from hospital-based and, in some states, free-standing ambulatory surgery sites. More information about the SASD is available in the *State Ambulatory Surgery Databases Overview* on HCUP-US: http://www.hcup-us.ahrq.gov/sasdoverview.jsp.

2. <u>Intramural State Emergency Department Databases (**Intramural SEDD**)</u> – The Intramural SEDD are produced annually and are available only to authorized AHRQ staff, their contractors, and on-site guest workers. The SEDD contain data for outpatient encounters in hospital-affiliated emergency departments for visits that do not result in hospitalizations. More information about the SEDD is available in the *State Emergency Department Databases Overview* on HCUP-US: http://www.hcup-us.ahrq.gov/seddoverview.jsp.

D. *DESCRIPTION OF ADDITIONAL PARTICIPATION - HCUP CENTRAL DISTRIBUTOR STATE DATABASES*

Participation in release of state databases through the HCUP Central Distributor is optional. On behalf of participating Data Organizations, AHRQ prepares and distributes the following restricted access public release versions of HCUP databases for research use outside of AHRQ:

- HCUP Central Distributor State Inpatient Databases (**CD-SID**)
- HCUP Central Distributor State Ambulatory Surgery Databases (**CD-SASD**)
- HCUP Central Distributor State Emergency Department Databases (**CD-SEDD**).

AHRQ's dissemination of databases through the HCUP Central Distributor is provided at no cost to participating Data Organizations. Each Data Organization sets the purchase price for their HCUP State Databases, and payments received from sales are reimbursed to the Data Organization through AHRQ's contractors. Each Data Organization determines the data elements included in the HCUP Central Distributor version of their SID, SASD, and SEDD, within the AHRQ-defined framework applied to all databases.

The HCUP Central Distributor is described more fully on the "HCUP MOAs and Partnership Documentation" section of HCUP-US. This information includes:

- HCUP Central Distributor Overview: http://www.hcup-us.ahrq.gov/partner/MOARef/CDoverview.pdf
- HCUP Central Distributor Reimbursement Procedures: http://www.hcup-us.ahrq.gov/partner/MOARef/CDreimbursement.pdf
- Sample HCUP DUA: http://www.hcup-us.ahrq.gov/partner/MOARef/HCUPDUA.pdf.

III. RESPONSIBILITIES OF AHRQ

AHRQ (directly or through its contractors):

1. Agrees to purchase the data files in Section IV.A.1 below, consistent with provisions of applicable Federal regulations. These regulations require AHRQ to purchase data at a reasonable published price established for other comparable data purchasers.

2. Agrees to abide by the terms of the HCUP Data Security Plan provided on HCUP-US: http://www.hcup-us.ahrq.gov/partner/MOARef/DataSecurityPlan.pdf. Changes to the HCUP Data Security Plan will be reported to HCUP Data Organizations.

3. Agrees to be the custodian of the data files provided by the Data Organization, and as such, will be responsible for observing all conditions of use and ensuring that authorized contractors to whom it provides HCUP data agree to the same restrictions and conditions.

4. Agrees to provide a list of data elements included in the HCUP databases for review by the Data Organization. The list is available in the electronic *HCUP Data Elements Table* on HCUP-US (http://www.hcup-us.ahrq.gov/partner/MOARef/HCUPdata_elements.pdf). Data elements included in HCUP databases may change over time; should this occur, changes will be reported to HCUP Data Organizations.

5. Agrees not to alter the data element listings included in Table 1 of this Agreement, *HCUP Intramural State Databases – Approval For Selected Data Elements,* or Table 2, *HCUP Central Distributor (CD) Databases – Restrictions on Release of Data Elements*, without prior approval from your Data Organization.

6. Agrees not to release outside of AHRQ (its authorized staff, contractors, and on-site guest workers) any data elements obtained from the Data Organization without the express written permission of the Data Organization other than those agreed upon and authorized in this Agreement and any future amendments.

7. Agrees to observe state statutory requirements referenced below and attached to this MOA. Reference: _____

   _____

8. Agrees to these additional non-statutory requirements, as specified by the Data Organization. Describe: _____

   _____

9. Approximately two (2) years after creating the files for a given data year, or at the conclusion of a contract period, all source data received from the Data Organization will be destroyed, returned, or transferred to a subsequent Primary Contractor. When source data are destroyed, certification of the data destruction will be sent to the Data Organization.

10. With the exception of source data, there is no expiration date for AHRQ's continued use of databases and products created under this agreement, within the restrictions of this agreement.

IV. RESPONSIBILITIES OF THE DATA ORGANIZATION

A. *PROVIDING DATA FOR HCUP*

The Data Organization:

1. Agrees to supply for HCUP the Data Organization's inpatient <ambulatory surgery, emergency department> data in annual or more frequent periodic data sets, beginning with calendar year < **YYYY** (inpatient), **YYYY** (ambulatory surgery), **YYYY** (emergency department) >.

2. (a) Agrees to permit AHRQ to use the supplied file(s) for development of the following HCUP databases:

   i. Intramural State Inpatient Databases (SID)

   ii. Nationwide Inpatient Sample (NIS)

   (b) Agrees to permit AHRQ to use the supplied file(s) for the development of the following HCUP databases, **if listed in Section VI. Database Participation**:

   iii. Kids' Inpatient Database (KID)

   iv. Nationwide Emergency Department Sample (NEDS)

   v. Intramural State Ambulatory Surgery Databases (SASD)

   vi. Intramural State Emergency Department Databases (SEDD)

   (c) Agrees to supply to AHRQ the requested data elements for development of the HCUP Intramural State Databases, listed in the electronic *HCUP Data Elements Table** on HCUP-US, if collected by the Data Organization; further agrees to allow use of the data elements requested by AHRQ in Table 1 of this Agreement.

   (d) Agrees to allow AHRQ to release on the NIS and other restricted access public release databases, **if listed in Section VI. Database Participation,** the requested data elements listed in the electronic *HCUP Data Elements Table** on HCUP-US, with the exception of the data elements explicitly restricted in Table 2 of this Agreement.

   *The full list of data elements used in the HCUP databases is maintained in the electronic *HCUP Data Elements Table* on HCUP-US: http://www.hcup-us.ahrq.gov/partner/MOARef /HCUPdata_elements.pdf.

3. (a) Agrees to supply for HCUP the Data Organization's <u>physician</u> data in annual or more frequent periodic data sets, including: data already provided for calendar years <**YYYY-2009>**; and future years beginning **20XX.**

   (b) Agrees to permit AHRQ to use the supplied file(s) for intramural purposes.

4. (a) Agrees to supply for HCUP the Data Organization's <u>observation stays</u> data in annual or more frequent periodic data sets, including: data already provided for calendar years <**YYYY-2009>**; and future years beginning **20XX.**

   (b) Agrees to permit AHRQ to use the supplied file(s) for intramural purposes.

B. *RELEASING HCUP CENTRAL DISTRIBUTOR STATE DATABASES*

The Data Organization:

1. (a) Agrees to allow AHRQ to release to authorized requestors, through the HCUP Central Distributor, the following restricted access public release databases, **if listed in Section VI. Database Participation:**

   - HCUP Central Distributor SID
   - HCUP Central Distributor SASD
   - HCUP Central Distributor SEDD

   (b) Agrees to allow AHRQ to release on the HCUP Central Distributor State Databases the requested data elements listed in the electronic *HCUP Data Elements Table** on HCUP-US, with the exception of the data elements explicitly excluded in <u>Table 2</u> of this Agreement.

   Data Organizations will be re-contacted periodically and asked to review and give approval for new data elements proposed to be added to their HCUP Central Distributor State Databases.

   *The full list of data elements released on the HCUP Central Distributor State Databases is maintained in the electronic *HCUP Data Elements Table* on HCUP-US: http://www.hcup-us.ahrq.gov/partner/MOARef/HCUPdata_elements.pdf.

C. *RELEASING HOSPITAL-LEVEL SUPPLEMENTAL FILES*

The Data Organization:

1. (a) Agrees to allow AHRQ to release to authorized requestors, through the HCUP Central Distributor, the following hospital-level supplemental files, designed for use with the HCUP restricted access public release databases, **if listed in Section VI. Database Participation**:

   i.   Hospital Market Structure (HMS) Files
   ii. Cost-to-Charge Ratio (CCR) Files
   iii. Revisit Analysis (Revisit Files)

   Full descriptions of the HMS, CCR, and Revisit files are available at: http://www.hcup-us.ahrq.gov/tools_software.jsp.

(b) Agrees to allow AHRQ to release on the HCUP Hospital-Level Supplemental Files the requested data elements listed in the electronic *HCUP Data Elements Table** on HCUP-US, with the exception of the data elements explicitly excluded in Table 2 of this Agreement.

*The full list of data elements used in HCUP supplemental files is maintained in the electronic *HCUP Data Elements Table* on HCUP-US: http://www.hcup-us.ahrq.gov/partner/MOARef/ HCUPdata_elements.pdf.

D. *RESEARCH USES OF THE DATA*

The Data Organization:

1. Agrees to allow authorized AHRQ staff, their contractors, and on-site guest workers to utilize HCUP intramural and restricted access public release databases for research, tool development, and aggregate statistical reporting. Examples of such use include, but are not limited to:

   (a) Research such as:
   - The National Healthcare Quality Report and the National Healthcare Disparities Report: http://www.hcup-us.ahrq.gov/partner/nhqr_nhdr.jsp.
   - Conducting national and state-level health research studies, public health studies, and studies related to administrative data.
   - Conducting studies related to the development and testing of software tools for the analysis of administrative data.

   (b) Tools and Products:

   http://www.hcup-us.ahrq.gov/partner/MOARef/toolsandproducts.pdf.

   (c) Aggregate statistical reporting of national data and, where permitted by data organizations under separate agreement, state-level data, on web-based software tools such as:
   - HCUPnet: http://hcupnet.ahrq.gov
   - NHQRDRnet: http://nhqrnet.ahrq.gov/nhqrdr/jsp/nhqrdr.jsp

   (d) Dissemination of aggregate statistical results from research and analyses using the HCUP data in peer-reviewed journal articles, other publications, conference presentations, and tables developed to provide assistance to other organizations for research and public health purposes.
   - The HCUP Annual Activities Report: http://www.hcup-us.ahrq.gov/partner/MOARef/annual_activities.pdf
   - Project Abstracts: http://www.hcup-us.ahrq.gov/partner/MOARef/HCUPplannedprojects.pdf

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TABLE 1: HCUP INTRAMURAL STATE DATABASES – APPROVAL FOR SELECTED DATA ELEMENTS

<State Name>

Approved By: _____ _____

Data Organization Representative, Signature   Date

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(Please Print)

The Data Organization agrees to supply to AHRQ the data elements listed in the electronic *HCUP Data Elements Table* on HCUP-US for AHRQ's development and use of the HCUP Intramural State Databases. AHRQ requests specific approval to include the data elements listed in Table 1 below. Please indicate approval by marking the table: "Will supply", "Collected/Not supplied" or "Not collected". "N/A" means HCUP does not include this data element in the listed database.

Requested Data Elements: Used to create de-identified HCUP Data Elements	Converted to these HCUP Data Elements	Intramural State Databases		
		Inpatient Data	**Ambulatory Surgery Data**	**Emergency Department Data**
EXAMPLE: Discharge date (month, day, year)	Discharge year and quarter; LOS	*Will supply*	*Collected/Not supplied*	*Not collected*
Encrypted person number, i.e., unique person identifier	Re-identified[4] person number; Visit linkage variable			<File not requested>
Encrypted medical record number	Re-identified MRN			
Date of birth (month, day, and year)	Age in years; Age in months (if <11 years); Age in days (if <1 year)			
Admission/Start of care date (month, day, year)	Admission month; Admission on weekend; LOS			
Discharge date (month, day, year)	Discharge year and quarter; LOS			
Date of principal procedure (month, day, year)	Days from admission to procedure			
Dates of secondary procedures (month, day, year)	Days from admission to procedure			
Date of CPT/HCPCS procedure	Days from admission to procedure	N/A		
Service Date, associated with revenue/ service detail (month, day, year – from separate rev code layout)	Days from admission to service	N/A		
Onset of Symptom/Illness Date	No derived elements			

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[4] The term "re-identified" refers to a HIPAA compliant method for masking the original identification numbers by assigning an arbitrary identification number.

Requested Data Elements: Used to create de-identified HCUP Data Elements	Converted to these HCUP Data Elements	Intramural State Databases		
		Inpatient Data	Ambulatory Surgery Data	Emergency Department Data
Patient ZIP Code (5-digit)	Synthetic (encrypted); Three-digit ZIP Code			
Patient town of residence (e.g., township, borough, parish, or other political entity similar to a county)	No derived elements			
Census tract	No derived elements			
Patient Country (if not U.S.)	No derived elements			
Physician ID numbers (as many as are collected)	Re-identified			
Physician name (as many as are collected by the organization)	No derived elements			
Additional Data Elements Requiring Special Approval, as Defined by Data Organization				
Comments Specific to this State's Supplied Data				

**TABLE 2: HCUP CENTRAL DISTRIBUTOR (CD) DATABASES –
RESTRICTIONS ON RELEASE OF DATA ELEMENTS**

\<State Name\>

Approved By: _____   _____

Data Organization Representative, Signature   Date

_____

(Please Print)

The Data Organization agrees to allow AHRQ to release on the NIS and other restricted access public release databases <u>if listed in Section VI. Database Participation</u>, the requested data elements listed in the electronic *HCUP Data Elements Table* on HCUP-US.

Please indicate any restricted data elements that should not be released on Central Distributor Databases by marking Table 2 below: "May not release" or "May release". "N/A" means HCUP does not include this data element in the listed database or does not release a Supplemental Database for this data type.

Restricted Data Elements	Central Distributor Databases					
	NIS	**KID**	**NEDS**	**CD-SID**	**CD-SASD**	**CD-SEDD**
EXAMPLE Physician ID (encrypted)	*May release*	*May release*	\<File not requested\>	*May not release*	\<File not requested\>	*May not release*
HCUP Supplemental Files for NIS, KID, & CD State Databases:	**NIS**	**KID**	**NEDS**	**CD-SID**	**CD-SASD**	**CD-SEDD**
Hospital Market Structure (HMS) File:						
Cost-to-Charge Ratio (CCR) File:						
Supplemental File for Revisit Analysis (Revisit File) (*Applicable to 2003-2008 files*):						
Further Restrictions (Specific to this State's Data)						

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V. AGREEMENT OF BOTH PARTIES

Each person signing this Agreement hereby represents that he or she is authorized to enter into this Agreement by the organization for which he or she is signing.

This Agreement is voluntary and shall remain in effect until either party terminates the Agreement through written notification.

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

By: _____   _____
       Data Organization Representative, Signature   Date

By: _____   _____
       AHRQ Representative, Signature   Date

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

These documents are made part of this Agreement by reference:
1. HCUP Data Elements: http://www.hcup-us.ahrq.gov/partner/MOARef/HCUPdata_elements.pdf
2. HCUP Data Security Plan: http://www.hcup-us.ahrq.gov/partner/MOARef/DataSecurityPlan.pdf.

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VI. DATABASE PARTICIPATION - <STATE>

Approval of Database Participation supersedes previous approval on: _____/_____/____

Approved by: _____   _____
Print   Title

_____   _____
Signature   Date

1. PROVIDING DATA FOR HCUP

THE DATA ORGANIZATION AGREES TO supply for HCUP, in annual or more frequent periodic data sets, the following data types:

Data Type	Beginning Data Year
Inpatient Discharge Data	
Ambulatory Surgery Data	
Emergency Department Data	
Physician Data	
Observation Stays Data	

2. PARTICIPATION IN HCUP DATABASES

THE DATA ORGANIZATION AGREES TO allow AHRQ to use the supplied file(s) for the development of the following HCUP databases:

Database	Beginning Data Year
Nationwide Inpatient Database (NIS)	
Kids' Inpatient Database (KID)	
Nationwide Emergency Department Sample (NEDS)	
Intramural State Inpatient Database (SID)	
Intramural State Ambulatory Surgery Databases (SASD)	
Intramural State Emergency Department Database (SEDD)	

3. RELEASING HCUP CENTRAL DISTRIBUTOR STATE DATABASES

THE DATA ORGANIZATION AGREES TO allow AHRQ to release to authorized requestors, through the HCUP Central Distributor, the following restricted access public release databases:

Database	Beginning Data Year
Nationwide Inpatient Database (NIS)	
Kids' Inpatient Database (KID)	
Nationwide Emergency Department Sample (NEDS)	
Central Distributor SID	
Central Distributor SASD	
Central Distributor SEDD	

4. RELEASING HOSPITAL-LEVEL SUPPLEMENTAL FILES

THE DATA ORGANIZATION AGREES TO allow AHRQ to release to authorized requestors, through the HCUP Central Distributor, the following hospital-level supplemental files, designed for use with the HCUP restricted access public release databases:

Supplemental Files	Beginning Data Year
Hospital Market Structure (HMS) Files	
Cost-to-Charge Ratio (CCR) Files	
Supplemental file for Revisit Analysis (Revisit Files) Revisit Files were released as stand-alone supplemental files from 2003-2008. Beginning with 2009, revisit data elements were integrated into the Central Distributor state files.	