

State: Minnesota
Title: Using Clinically Enhanced Claims Data to Guide Treatment of Acute Heart Failure
Principal Investigator: Mark Sonneborn
Organization: Minnesota Hospital Association
Project Dates: September 30, 2010, to September 29, 2013
Grant Number: R01 HS20043-01

The long-term objective of this research is to develop a clinically enhanced administrative database that builds on the foundation that has already been established in Minnesota by the Minnesota Hospital Association and to demonstrate its use in studying comparative effectiveness. Minnesota's administrative claims database already is enhanced by present-on-admission coding and the addition of laboratory data.

This proposal will increase the number of hospitals submitting laboratory data, will expand the database to include inpatient pharmacy data, and will link patient data across hospitals and with Minnesota death certificates. The expanded dataset will support better measurement of risk-adjusted clinical outcomes and comparative effectiveness analyses of pharmaceutical interventions.

A comparative effectiveness analysis of alternative drug regimens used to treat patients hospitalized with acute decompensated heart failure will be performed using the clinically enhanced administrative hospital discharge database. The care and clinical outcomes of subgroups of high interest patients (e.g., elderly, women, high-risk patients) also will be evaluated. Because of the complexity of heart failure and the therapies used to manage it, this study will be an excellent test of the ability of clinically-enhanced administrative databases to provide important information about comparative effectiveness in areas where randomized controlled clinical trials and prospectively designed clinical registries often fall short.