NDWS Restricted Data Request Form

Primary Data User

The Primary Data User is the person who must sign the NDWS Data Use Agreement and is responsible for the project and all Authorized Users' use and handling of data on the LINKAGE Enclave.

Legal First Name: _____

Legal Last Name: _____

Work Email: _____

Phone Number: _____

Work Location (country): _____

Institution/Company Name: _____

Institution/Company Type: _____
If other, please explain:

Primary Appointment/Job Title: _____

Primary Role*: _____
If other, please explain:

*Note:
If Primary Data User is a student, the following are required:
- A letter of support from an advisor/mentor
- The advisor/mentor must be included as a project team member with data access

The Primary Data User must sign the NDWS DUA; if students are not permitted to sign DUAs/contracts at your institution, then their advisor/mentor may need to serve as the Primary Data User. **Before you submit your NDWS restricted data request, please confirm that your institution will sign a DUA on behalf of the identified Primary Data User.**

Additional Project Team Members

Please list all additional project team members in the table below. Include key project personnel, whether or not they will require access to data in LINKAGE. Please note that gaining access to LINKAGE requires users to undergo identity verification.

Legal First & Last Name	Work Email Address	Phone Number	Work Location (country)	Project Role	Does this team member require data access on LINKAGE?

Project Information

Project Title: _____

Project Narrative

Please provide a plain language summary of your proposal in no more than three sentences:

If this project is a resubmission of a previously denied NDWS Restricted Data Request, please provide the original submission Project ID#: _____

Funding Source: _____

Funding Source Comments (required if "other" selected above)**:**

IRB Approval Type*: _____

IRB Approval Comments (required if "other" selected above)**:**

*Note: A determination of "Not Human Subjects Research" is not accepted by LINKAGE for projects that request beneficiary-level CMS claims data. A NHSR determination is acceptable for NDWS-only projects.

Explain why the public use data available on NACDA are not adequate for your research purposes:

Requested Data Products

Please fill out the form below to specify which data you are requesting. Descriptions of these data products are available on the NDWS website.

Data Products	Requesting?
NDWS Family of Surveys	
Community Clinician	
Nursing Home: Administrator & Staff	
Assisted Living: Administrator & Staff	
Home Care: Administrator & Staff	*Not available in Wave 1*
Environment	
Social Vulnerability Index	
Area Health Resources Files (AHRF)	
Medicaid State LTSS Expenditure Report	
AARP LTSS State Scorecard	
Nurse Practitioner Scope of Practice Regulations	
Process & Quality of Care	
Medicare Physician & Other Practitioners - by Provider	
Medicare Physician & Other Practitioners - by Provider and Service	
Medicare Part D Prescribers - by Provider	
Medicare Part D Prescribers - by Provider and Drug	
LTCFocus Nursing Home data	
CMS Nursing Home Compare	
CMS Care Compare: Home Health Quality Reporting Program	*Not available in Wave 1*
Payroll Based Journal Daily Nurse Staffing	
Payroll Based Journal Daily Non-Nurse Staffing	
Payroll Based Journal Employee Detail Nursing Home Staffing	
Long-Term Care (LTC) Data Cooperative*	*Not available in Wave 1*

Requires additional approval from the LTC Data Cooperative. May not be available if sample size is not sufficient.

NDWS NATIONAL DEMENTIA WORKFORCE STUDY

Please indicate which CMS claims files (if any) you are requesting for your analysis; researchers are limited to the files and years necessary to complete their scientific aims.

CMS Claims-Based Summary Files (Constructed by NDWS)**	Requesting?
Community Clinician Claims-Based Summary File	
Nursing Home Claims-Based Summary File	

CMS Claims, Encounter, and Assessment Data**	Requesting?
Medicare Enrollment Data	
Master Beneficiary Summary File (MBSF): Base – Segment (A/B/C/D)	
Additional Medicare Summary Files	
Master Beneficiary Summary File (MBSF): Chronic Conditions	
Master Beneficiary Summary File (MBSF): Cost & Utilization	
Master Beneficiary Summary File (MBSF): Other Chronic or Potentially Disabling Conditions	
Medicare Part A & B Claims Data	
Medicare Carrier (PB) Claims	
Medicare Durable Medical Equipment (DM) Claims	
Medicare Home Health (HH) Claims	
Medicare Hospice (HS) Claims	
Medicare Inpatient (IP) Claims	
Medicare Outpatient (OP) Claims	
Medicare Skilled Nursing Facility (SN) Claims	
LINKAGE-Built Medicare Provider Analysis & Review (MedPAR)	
Medicare Part C Encounter Data	
Medicare Carrier Encounter Claims	
Medicare Durable Medical Equipment (DME) Encounter	
Medicare Home Health Agency (HH) Encounter Claims	
Medicare Inpatient (IP) Encounter Claims	
Medicare Outpatient (OP) Encounter Claims	
Medicare Skilled Nursing Facility (SNF) Encounter Claims	
Medicare Part D Prescription Drug Event (PDE) Data	
Beneficiary	
Clinical Information	
Payment Information	
Provider Information	
Medicare Part D Medication Therapy Management (MTM)	
Medicaid Enrollment Data	
Medicaid Analytic eXtract (MAX) Personal Summary (PS) Enrollment Data	
TMSIS Analytic Files (TAF) Demographic and Eligibility (DE) Enrollment Data	
Medicaid Claims Data	
Medicaid Analytic eXtract (MAX) Inpatient (IP) Claims	

CMS Claims, Encounter, and Assessment Data**	Requesting?
Medicaid Analytic eXtract (MAX) Long Term Care (LT) Claims	
Medicaid Analytic eXtract (MAX) Other Services (OT) Claims	
Medicaid Analytic eXtract (MAX) Prescription Drug (RX) Data	
TMSIS Analytic Files (TAF) Inpatient (IP) Claims	
TMSIS Analytic Files (TAF) Long Term Care (LT) Claims	
TMSIS Analytic Files (TAF) Other Services (OT) Claims	
TMSIS Analytic Files (TAF) Pharmacy (RX) Data	
TMSIS Analytic Files (TAF) Annual Provider (APR) Data	
TMSIS Analytic Files (TAF) Annual Managed Care Plan (APL) Data	
Long Term Care Minimum Data Set (MDS)	
Outcome and Assessment Information Set (OASIS)	
Inpatient Rehab Facility-Patient Assessment Instrument (IRF-PAI)	
Healthcare Effectiveness Data and Information Set (HEDIS)	

***Please note: NDWS can **NOT** authorize access to CMS data; access must be granted by NIA through execution of an NIA Data Use Agreement.*

Authorized Project

In no more than 800 words, please describe your project and proposed analyses, including how you will use the NDWS surveys and any linked data requested. If you are requesting CMS data, your description **must address and align with** the CMS files being requested. This description will be included in your DUA with the University of Michigan and it will be used when reviewing publications generated from your analyses on LINKAGE:

Authorized Project (continued)

NDWS Restricted Data Application Checklist & Next Steps

> **Please email the materials listed below in a single email with a subject line that begins with "[Data Request]" to info@ndws.org .**

Application Checklist:

This checklist is for your reference only and does not need to be submitted with your application.

☐ Completed NDWS Restricted Data Request Form

☐ Institutional Review Board (IRB) letter of approval or copy of Exempt Status determination/approval/waiver

☐ NIH Biosketch for Primary Data User

☐ NIH Biosketches for all other project team members
CVs/Resumes only acceptable for team members who do not have a Biosketch

If Primary Data User is a student:

☐ Letter of support from an advisor/mentor

☐ Advisor/mentor is included as a project team member with data access

Next Steps:

1. Applicants will receive a written decision within 2 to 3 weeks, provided the application is complete.
2. Approved applicants will then be asked to execute the NDWS Data Use Agreement (DUA) before access to the restricted data in LINKAGE can be granted.

Please note: To access CMS data in LINKAGE, additional action is needed after NDWS approves your project. Details can be found on our website and your project approval letter will contain instructions.