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ONLINE APPENDIX

NAVIGATING THE REPORT'S ONLINE APPENDIX

Each of the three files listed corresponds to data analyses that used three complementary data sources. Each folder, respectively, contains the materials that the committee received from three different groups. The contents of each submitted data analysis is described in this guide. For a more detailed description of the reporting tools and their contents and limitations, as well as the committee's interpretations, see Chapter 3 of this report.

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Elevance Health

The first analysis by Carelon Research (formerly HealthCore), the only analysis commissioned by the committee, examined commercially insured individuals enrolled in Elevance Health (formerly Anthem, Inc.) Carelon Research contributed aggregated data on trends in the use of pediatric subspecialty care by children receiving private health insurance coverage through Elevance Health.

Elevance Health data were from the Healthcare Integrated Research Database (HIRD®), a large health plan administrative database. Claims data were submitted for payment by health care clinicians for services to individuals enrolled in Elevance Health commercial (i.e., private) plans. The HIRD contains member enrollment, medical care (professional and facility claims), outpatient prescription drug events, and outpatient laboratory test results. All medical claims have associated diagnosis and procedure codes. Claims are subject to the quality control, inspection, and validation procedures performed by the individual health plans for payment processing purposes. The analysis used enrollment files and fully adjudicated claims with service dates between January 2011 and December 2021.

Source materials comprise:

- One PDF of the analysis plan: Analysis of Trends in Pediatric Subspecialty Use Among a Commercial Health Plan Population, 2006-2021.
- Three EXCEL workbooks: Results, Data Dictionary, and Data.

PEDSnet

The second analysis was submitted to the committee by multiple researchers, including three members of the committee, and examined electronic health records from individuals obtaining care from eight of the nation's largest pediatric academic medical centers that participated in PEDSnet, a national pediatric learning health system.

PEDSnet data are imported from individual hospital electronic health record systems and standardized to a common data model. Participating institutions included: Ann & Robert H. Lurie Children’s Hospital of Chicago, Children’s Hospital Colorado, Children’s Hospital of Philadelphia, Cincinnati Children’s Hospital Medical Center, Nationwide Children’s Hospital, Nemours Children’s Health, Seattle Children’s Hospital, and Stanford Children’s Health. Within the PEDSnet database, the study cohort included patients with at least one outpatient visit where the clinician specialty was general pediatrics in one of the academic pediatric medical centers during the time period of January 2010 to December 2021, and where the patient age was less than 21 years old at the end of the calendar year. The PEDSnet data also provided information on payer and patient race and ethnicity. For analyses that examined any subspecialty use across the full study period, insurance was defined as public insurance (i.e., Medicaid or CHIP) if at any time that was their payment for outpatient visits; otherwise, if they ever listed as private/commercial insurance in their general outpatient visits, they are listed as “commercial,” and all others are listed as “unknown/self-pay.”

Source materials comprise:

- One PDF of the submitted report: PEDSnet-Subspecialty-Report.

T-MSIS

The third analysis, submitted to the committee by researchers at The George Washington University (including one member of this committee), used the Transformed Medicaid Statistical Information System (T-MSIS), a national administrative dataset of beneficiaries insured by Medicaid or the Children’s Health Insurance Program (CHIP).

The T-MSIS is a national dataset of Medicaid and CHIP data from states, territories, and the District of Columbia. T-MSIS data included enrollment, service use, and clinician information. The first available year of T-MSIS is 2016; the analysis used data from 2016 through 2019. Data characteristics of the T-MSIS are reported by the Centers for Medicare & Medicaid Services. The analysis included data from 44 states, DC, and Puerto Rico, and excluded Arkansas, California, Delaware, Indiana, Minnesota, and Pennsylvania.

Source materials comprise:

- One EXCEL workbook of the submitted report: Pediatric Medicaid Workforce, 2016-2019.