



**[CRN] Centralized Data Enhancements: Enabling  
Expanded Patient-Centered Research Through the  
Addition of PCORnet Priority Elements Across  
Network Sites**



As previously discussed, [CRN] is requesting sites provide additional PCORnet fields for use in research projects. This document will highlight each field ([Fields listed]). [CRN] requests you review the documentation and send us a decision for each field.

NEEDED ACTIONS FROM [CRN] SITES:	<ul style="list-style-type: none"><li>• <b>[CRN] IS REQUESTING NETWORK SITES TO EXPLORE THE ACCEPTABILITY OF THE INCLUSION OF THE BELOW DATA ELEMENTS IN [CRN] DATA SUBMISSIONS</b></li></ul>
CONTACT:	[Add Contact Details Here]

**[DATA ELEMENT]**  
**EXAMPLE: PATIENT INSURANCE INFORMATION**

PROPOSAL:	<ul style="list-style-type: none"> <li>All [CRN] sites to include information on [data element]</li> <li><b>EXAMPLE:</b> All [CRN] sites to include information on patient insurance status (Medicare, Medicaid, Government Insurance (other than Medicare/Medicaid), Commercial and Self-pay)</li> </ul>
IMPACT:	<ul style="list-style-type: none"> <li>[List impact of data element addition to research projects]</li> <li><b>EXAMPLE:</b> Population and health services research often requires the inclusion of patient insurance type to assess the impact of different payor categories (commercial, Medicare, Medicaid, self-pay), changes in insurance status on health outcome, and changes in health status on insurance coverage</li> </ul>
SUPPORTING DETAILS:	<ul style="list-style-type: none"> <li>[List supporting details to add data element]</li> <li><b>EXAMPLE:</b> The PCORnet CDM includes insurance detail for every encounter record enabling assessments of changes in insurance status over time</li> </ul>
EXPECTED BARRIERS/ FACILITATORS:	<ul style="list-style-type: none"> <li>[List expected barriers to adding data element]</li> <li><b>EXAMPLE:</b> Payor data in source systems at the sites may be stored differently – either at the encounter level reflecting visit billing activity, or at the patient level with recorded coverage start and end dates. The currency and accuracy of these methods needs to be explored</li> </ul>

**Implications of Decisions [EXAMPLE: PATIENT INSURANCE INFORMATION]**

Decision	Pros	Cons
Do Not Include in CDM	<ul style="list-style-type: none"> <li>Regulatorily simple</li> </ul>	<ul style="list-style-type: none"> <li>Unable to determine payor for research</li> </ul>
Include in CDM but only use with prior authorization from [CRN] site leadership	<ul style="list-style-type: none"> <li>Allows inclusion/analysis of Payor information on an ad hoc basis</li> </ul>	<ul style="list-style-type: none"> <li>Potential delays in research requests that ask for Payor information</li> </ul>
Include in CDM with retrospective interval reports on use	<ul style="list-style-type: none"> <li>Provides sites with visibility into the use of payor data</li> </ul>	
Include in CDM without restriction	<ul style="list-style-type: none"> <li>Payor data is available for all studies</li> </ul>	