2024 Call for Proposals

Robert Wood Johnson Foundation

Proposal Deadline: February 21, 2024 (3 p.m. ET)

Research on Diet-Related Health Award
Informational Webinar Frequently Asked Questions (FAQ)

Q: What type of data are available? What can I do with the available data?

A: The data available for this CFP are made up of medical and pharmacy claims. Claims data available in this research award may be used to understand the broader health care landscape: for example, research questions that can be answered by analyzing each patient interactions with the health care system, such as getting a prescription or getting a procedure, that is coded for billing claims.

Q: How would one look for nutrition related outcomes in the data?

A: Nutrition research that uses medical or prescription claims data to study interactions with the health care landscape is well-suited for this opportunity. For example, if a patient visits with a dietician and that dietician records relevant diagnosis and treatment codes for billing claims to insurance, those details can be found in the Komodo Health dataset. Please see Komodo's website for publications *https://www.komodohealth.com/publications*. Data for this CFP does not include unstructured data such as chart notes or visit communication.

Q: Would there be information on nutritional counseling by a healthcare provider (not a dietician) during an encounter?"

A: There are non-billable Z-codes that other providers use, such as Z71.3 for Dietary Counseling and Surveillance. As an example, Komodo's Healthcare Map has ~23 million visits with the Z71.3 code in 2022. Please note that Z-code usage may vary significantly by provider.

Q: What is the most recent year for which data are available? Additionally, what is the timeframe for data that we can request in the proposal?

A: For this initiative, historical data beginning January 2016 through approximately early 2024 can be available. Research data are considered most complete 3-6 months after claim filing.

Q: Are there any unstructured text data like 24-hour food recall, EMR notes part of the dataset (e.g., provider notes)?

A: No, the dataset will not include unstructured data such as visit notes or text fields within the EHR.

Q: Does the dataset include all claims or just those that were approved? In other words, can we see claims that were denied? Does the dataset include uninsured patients?

A: Yes, the foundation for Komodo Health's dataset is administrative claims data that have been adjudicated.

Q. Does the dataset include uninsured patients?

A: The dataset is not able to capture those patients who are truly uninsured.

Q: What is the geographic representation of the data if data are available at the state or county level?

A: Komodo Health's data includes a representative sample across all regions in the country and data for patients from every state. Several projects utilizing data on patients from a specific county have been completed; please visit Komodo Health's website for further details. Data are available at the state and zip-3 (first three numerals of a five-digit zip code) levels.

Q: Will applicants need to provide preliminary data for the project proposal seeing as applicants will not have access to Komodo?

A: No, please refer to the Call for Proposals for guidance on detail to include in the application submissions. For questions about specific Komodo Health data related to a potential research question, please reach out to the team at *DRH@Mathematica-mpr.com*.

Q: Is there any funding for the grantees in addition to the data access aspect of the award?

A: The DRH Research awards are specifically for data access to the Komodo Health's Healthcare Map dataset and basic analytic support – please refer to the Call for Proposals and recorded webinar for additional detail.

Q: Are Registered Dietitians or Nutritionists one of the provider types included?

A: Komodo Health's data includes provider type codes for registered dietitians as well as nutritionists. As a claims dataset, insurance covered providers are included.

Q: Can you identify families in the data (e.g., kid and parents)?

A: Due to deidentification processes, it is not possible to identify related individuals such as those within a family. There are, however, some ICD codes for genetic susceptibility or family history of specific diseases.

Q: What about post-pandemic data quality and representativeness?

A: Komodo Health has supported significant research into the impact of the pandemic on the U.S. health care landscape and is confident about the representativeness and quality of the dataset post-pandemic. Please note that there was a decline in the number of health care encounters in 2020 related to deferred care under the public health emergency; Komodo Health has observed an increase in claims data as anticipated in the years since 2020 reflecting the resumption of access to routine care.

Q: Do we have data regarding 24-hour recalls or food frequency questionnaires?

A: Unstructured data, like 24-hour recalls and surveys are not available for this grant opportunity.

Q: Can other data analysis programs be used inside the other software solution other than Prism? Can we export your data outside to be processed in R or Python?

A: Grantees will have access to both Prism and Sentinel. Prism is a low-code environment where grantees will be able to define their specific cohort of interest based on billing codes and other criteria such as age, gender, race, and ethnicity. Once defined, cohorts will be accessed within the Sentinel platform where grantees will have access to their defined cohort within Komodo's dataset. Within Sentinel, grantees can utilize a choice of tools and algorithms (Python, R, R Studio, SAS, SQL) for data analysis. Aggregated Sentinel data can be exported to prepare for publication and use. Komodo's team will provide training upon grant award to ensure familiarity with both Prism and Sentinel.

Q: Is access to longitudinal growth trajectory data available for pediatric patients, or at least percentiles and anthropometric data?

A: This data award is limited to claims data which does not include anthropometric data.

Q: Are underweight/overweight statuses available? Unhoused status?

A: This information is available if the weight or housing status has an accompanying ICD code used by providers or health organizations in claims. There are ICD10 codes associated with overweight and obesity, and Z-codes related to BMI. Additionally, there are Z-codes codes associated with problems related to housing and homelessness and BMI. Note that the use of Z-codes may be inconsistent in practice but may be useful for hypothesis-generating research questions. Please visit ICD10Data.com to search for specific ICD codes.

Q: How might researchers identify patients who are overweight or obese without a growth trajectory?

A: Please visit ICD10Data.com to search for specific ICD codes related to overweight or obesity. For specific questions, please reach out to *DRH@Mathematica-mpr.com*.

Q: How long will grantees have access to the data?

A: The Diet-Related Health Research award will provide access to the Komodo Health dataset for studies up to 18 months in duration, beginning in September 2024 and concluding in March 2026.

Q: Is there a data dictionary available that grantees would be able to access prior to receiving an award?

A: No, a data dictionary itself will not be available in advance. Please review the Call for Proposals *https://www.mathematica.org/projects/diet-related-health-grant-competition* for additional information about the resources available.

Q: Is this project intended for those who have prior experience with the Komodo landscape?

A: No. Grantees will receive training on using Komodo platforms but are expected to have data science experience. The DRH Grant is a unique data-only access award for noncommercial use of the Komodo Health dataset and thus applicants may likely be first-time users.

Q: What are the benefits that Komodo will obtain from the research that's selected?

A: RWJF and Komodo Health are offering this research opportunity to further a shared goal of reducing the burden of disease through providing access to a broad claims-based dataset to support cutting-edge, front-line researchers in answering important questions on diet-related health outcomes.

Q: How does RWJF? hope to benefit from analyses and how will findings be translated to society's benefit?

A: RWJF is primarily interested in projects that help further understand obesity and health outcomes. Although RWJF has a broader range of work that includes diabetes and cardiovascular health, the Diet-Related Health Research Call for Proposals is looking for issues related to the clinical implications of obesity and other diet-related health issues. For example, based on the medical and prescription claims data available from Komodo Health, the focus of research may look at access to treatment and where different diagnoses do or do not receive services.