**The New Jersey Integrated Population Health Data (iPHD) Project**

**Application & Data Request Form**

**Please complete all sections of this form and the following required application materials.** All files must be uploaded to the iPHD website ([iphd.rutgers.edu/application-process](https://iphd.rutgers.edu/application-process)) by **April 26, 2023**.

* Abstract, research narrative & budget justification (download template from the iPHD website [iphd.rutgers.edu/instructions-forms](https://iphd.rutgers.edu/instructions-forms))
* If requesting pilot funding, the budget using the required template (available from the iPHD website [iphd.rutgers.edu/instructions-forms](https://iphd.rutgers.edu/instructions-forms))
* CVs of the project principal investigator (PI) and all co-investigators

**Project and Applicant Information**

***Project information***

Title: Enter project title

Type of research (check one):

Descriptive analysis

Program or policy evaluation, i.e., drawing causal inference about policy/program effects.

Other study drawing causal inferences

***Principal investigator (PI):***

Name (last, first, MI): Last name, First name, MI

Phone Number: Phone

Email Address: Email

PI’s institution: PI’s Institution

***Other Investigators, their affiliations, and roles on the proposed project:***

List all other investigator(s), their affiliations, roles on proposed project

***iPHD Research Priority Areas Addressed (Please check all that apply):***

Informing New Jersey’s integrated approach to addressing the **opioid epidemic**

Improving **maternal and infant health** in New Jersey

Assuring access to **physical and behavioral health services** andaddressing **social determinants of health** in New Jersey

Conducting analyses to support New Jersey’s response to **COVID-19 and other public health emergencies**

***Specify the type of application (check one):***

Applying for pilot funding including a waiver of iPHD data preparation fees (available only to NJ-based organizations).

Applying for data preparation fee waivers but not pilot funding (available only to NJ-based organizations).

Applying for data only - Not requesting pilot funding or a fee waiver, data preparation fees will apply (available to organizations within and outside of New Jersey). (For more information about the iPHD fees schedule, visit iphd.rutgers.edu, under Application Process.)

**If your application is not approved for pilot funding by the iPHD Governing Board, would you like your application considered for a fee waiver?**

Yes

No

**If your application is not approved for pilot funding or a fee waiver by the iPHD Governing Board, would you like your application considered for approval with applicable fees?** (For more information about the iPHD fees schedule, iphd.rutgers.edu, under Application Process.)

Yes

No

**iPHD Data Request and Safeguards**

**Data Set(s) and Date Range Requested (please check all that apply)**

NJ Birth Data | *Available Years: 2000 – 2020*

All dates available

Custom range: Enter year range

NJ Mortality Data | *Available Years: 2000 – 2020*

All dates available

Custom range: Enter year range

NJ Hospital Discharge Data (Uniform Billing) | *Available Years: 2010 – 2020*

All dates available

Custom range: Enter year range

NJ Communicable Disease Reporting and Surveillance System (CDRSS) Data | *Available Years: 2020-2021*

All data available

Custom range: Enter year range

NJ Emergency Medical Services (EMS) Data | *Available Years: 2017-2022 (subject to confirmation)*

All data available

Custom range: Enter year range

**Does this project require a linked dataset to address the aims of this research?**

Yes

No

**If yes, please describe which datasets listed above should be linked for your study.**

Enter response

**Will you be linking iPHD data to any other data source? \***

Yes

No

**If yes, please indicate the data source(s) you plan to link with iPHD data**

Enter response

*\* The iPHD policy precludes linkage of iPHD data with external records or databases, if such linkages would allow for the re-identification of individuals.*

**Has the appropriate Institutional Review Board (IRB) reviewed and approved this research?**

Yes, approved (*if checked,* provide IRB FWA Number): Enter IRB FWA number

IRB application submitted and pending review

No (*if checked,* enter anticipated date of IRB application submission): Enter date

**Does your organization have the written policies and procedures governing acceptable storage, transmission, access, security, security breach reporting, and destruction of data upon project completion pertaining to HIPPA Protected Health Information (PHI)?**

Yes

No

***Note:*** *Approved applicants will be required to submit a comprehensive data management plan. Projects based in organizations without acceptable security plans and infrastructure, may be required to use secure Rutgers servers (additional fees may apply). Additional information will be provided to approved applicants regarding data security and required data use agreements.*

**Abstract, Research Narrative, and Budget Justification**

**Use the Abstract, Research Narrative & Budget Justification Template** (downloadable from the iPHD website iphd.rutgers.edu/instructions-forms) **and follow the instructions on the template.**