

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) by **June 18, 2025**.

- Abstract, and research narrative (download template from the iPHD website 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](#)

Is this application an initial submission or a re-submission for this proposal?

- ☐ Initial submission
- ☐ Re-submission

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** and addressing **social determinants of health** in New Jersey
- ☐ Conducting analyses to support New Jersey's response to **COVID-19 and other public health emergencies**
- ☐ Promoting equitable access to **high-value health services**

Funding Support

Specify the type of application (check one):

- ☐ Applying for data preparation fee waivers. Available only to NJ-based organizations.
- ☐ Applying for data only (self-pay): Not requesting 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/iphd-project-fee-schedule.)

If your application is not approved for 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, visit iphd.rutgers.edu/iphd-project-fee-schedule.)

- ☐ Yes
- ☐ No

Do you have an identified funding source to support this research?

- ☐ No
- ☐ Yes, confirmed
- ☐ Yes, applied and pending acceptance

iPHD Data Request and Safeguards

Data Set(s) and Date Range Requested:

For each dataset, indicate the requested **start and end years** within the available range. Requests outside the available data range will not be processed.

NJ Birth Data: Available 2000 – 2021

Requesting data

NJ Mortality Data: Available 2000 – 2021

Requesting data

NJ Hospital Discharge Data (Uniform Billing): Available 2010 – 2022

Requesting data

NJ Communicable Disease Reporting and Surveillance System (CDRSS) Data: Available 2020 – 2022

Requesting data

NJ Emergency Medical Services (EMS) Data: Available 2017 – 2022

Requesting data

Additional information about your data request (if any):

[Enter response](#)

Does your research plan require the iPHD data to be linked to any non-iPHD dataset(s)? *

- ☐ Yes
☐ No

If yes:

1) What **type of dataset(s)** will be used for linkage?

- ☐ Publicly available dataset(s) (e.g., census data, open access government datasets)
☐ Proprietary or restricted-access dataset(s) (e.g., commercially licensed/purchased datasets, institutional research databases)
☐ Other

2) Please **describe the data source(s)** and, if applicable, any **required permissions or data use agreement(s)**:

[Enter response here](#)

3) Will the data be linked using **group-level or person-level identifiers**?

- ☐ Using group-level identifiers (e.g., zip codes, national provider IDs)
☐ Using person-level identifiers (e.g., name, date of birth, address) that require a finder file for linkage
☐ Other – **please specify:**
[Enter response here](#)
☐ Unsure

**** 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

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