METHODS

The Healthcare Cost and Utilization Project Kids’ Inpatient Database (KID) data are available every 3 years and have been used to estimate national and regional incidence of neonatal herpes simplex virus infection in 2006. The MarketScan Commercial Claims and Encounters (CCAE) data, containing records from employee-sponsored private health insurance plans, were used to examine trends from employee beneficiaries in 2009 (most recent national data).

The national Medicaid Analytic Extract (MAX) data are being used to estimate annual incidence of congenital syphilis from 2003 to 2007.

STRENGTHS:

- Availability of diagnosis and procedure codes for large numbers of records:
  - KID – 3.4 million birth and hospitalization discharge records for children/adolescents through age 20 in 2009 (most recent data)
  - CCAE – 1.1 billion inpatient and outpatient claims records for employees and their dependents in 2012 (most recent data)
  - MAX – 2.3 billion inpatient and outpatient claims records for child and adult beneficiaries in 2009 (most recent national data).
- Standardized data values and formats
- Relatively low cost, compared to national reporting and sentinel surveillance

STRENGTHS continued:

- KID data are weighted to be nationally representative; MAX data represent the entire population of Medicaid enrollees

LIMITATIONS:

- Laboratory results and inpatient medications are unavailable, although the CCAE and MAX contain outpatient prescription claims
- Access is not timely; currently, KID and MAX are available through 2009 and CCAE through 2012
- Race/ethnicity information is available in only KID and MAX, and this information is incomplete—in 2009, 15% of race/ethnicity values were missing in KID and 28% in MAX

CONCLUSIONS

Administrative health care data provide new opportunities for STD surveillance among large numbers of health care consumers, despite limitations. These data may be particularly useful for non-reportable STDs and STD clinical sequelae, but delayed availability may limit their utility for public health response.

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