ACCESS TO ARCHIVED PIT DATA IS AUTHORIZED FOR RESEARCH PURPOSES ONLY.
Operations groups should email the OIC PIT inbox (vacooicpit@va.gov**) with justification for**
consideration of data access. Please include in the email body the name of the research project, primary contacts, and contact information for each primary contact.

Office of Integrity and Compliance (OIC) and CREEK's Guidance for Using Data from the ARCHIVED Program Integrity Tool (PIT) for Researchers:

RESEARCHER GROUPS MUST INFORM OIC WHEN UTILIZING THE ARCHIVED PIT COPY THROUGH VINCI BY:

1. Emailing the consolidated PIT communications inbox at vacooicpit@va.gov
   a. All emails should utilize the same email subject of 'PIT Data Usage'
2. In the body of email provide
   a. Study name of the research project
   b. Study database (i.e. "ORD_XXXX")
   c. primary contacts
   d. contact information (email, phone number) for each primary contact

IN ORDER TO BE PROVISIONED THE ARCHIVED PIT DATA, RESEARCHERS ALSO NEED TO:

1. Review all guidance provided in this document
2. Watch A Practical Approach to Working with VA-Purchased Community Care Data, a VINCI cyber-seminar
3. Review the PIT Reset presentation (April 26, 2023) 📊 BISL
4. Review the OIC 📄 memo dated February 21, 2023 regarding the Pause of PIT Operations
5. Submit a DART amendment:
   a. Update CDW Domain Checklist to include the archived version of PIT (in the CDW Raw section)
   b. Update research request memo stating:

   > " The project team has read and understands the limitations surrounding the archived PIT data. We have:
   > 1. completed the following email correspondence to the Office of Integrity and Compliance (OIC).
   >   a. Email the consolidated PIT communications inbox at vacooicpit@va.gov
   >   b. All emails should utilize the same email subject of 'PIT Data Usage'
   >   c. In the body of email provide
   >   i. Study name of the research project
   >   ii. Study database (i.e. "ORD_XXXX")
   >   iii. primary contacts
   >   iv. contact information (email, phone number) for each primary contact
   > 2. Read and understand known limitations of the archived PIT domain as outlined in "Guidance for Using Data from the ARCHIVED Program Integrity Tool (PIT) for Researchers" on the CREEK website
   > 3. Watched A Practical Approach to Working with VA-Purchased Community Care Data, a VINCI cyber-seminar
   > 4. Reviewed the PIT Reset presentation (April 26, 2023)   BISL
   > 5. Reviewed the OIC   memo dated February 21, 2023 regarding the Pause of PIT Operations
   > "

6. Once your DART amendment is approved, <u>please ping your data manager via your project correspondence site let them know your DART amendment for the archived PIT data has been approved</u> and you would like them to deploy the archived PIT data to your ORD database.

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GUIDANCE:

CREEK recommends using data from the archived copy of PIT **only** for Choice pre FY19, pharmacy, Veteran Family Member Program (VPMP) claims, lumpsum/expedited claims and claims before October 2018. Eventually pharmacy and VFMP claims will be incorporated into the Consolidated Data Set (CDS schema); once they are incorporated those data should not be sourced from PIT. CDS data for researchers is forthcoming. If it is necessary to use all claims in PIT, we recommend focused studies of procedures/events or only using the data to inform comorbidity measures.

Issue: Duplication of records

Due to the ingestion of claims out of chronological sequence, duplicate claims were created in the PIT Database post January 2022. The duplicate claims in the PIT database could cause over-or-under reporting of claim counts and paid amounts in PIT and downstream stakeholder reporting.

Additionally, users may see the same patient, procedure, date combination due to a PITClaimSID being at the claim submission level, not the claim level (i.e., each re-submission will have a unique PITClaimSID).

If measuring utilization or presence of a diagnosis: We suggest, depending on the study objective, analysts either deduplicate to the patient or the patient-day level. Studies may also consider limiting to CurrentFlag = "Y". Per the Office of Integrated Veteran Care (IVC), studies interested in diagnoses do not need to limit by the ClaimStatus field.

If measuring cost: We suggest following the methodology presented in Wagner et al. 2021 ([Estimating the Cost of Surgical Care Purchased in the Community by the Veterans Health Administration - PubMed (nih.gov)](#)) and becoming familiar with the "typical" costs for the procedure of interest by using the Centers for Medicare and Medicaid Services (CMS) website.

Issue: Professional records in Institutional tables

Between January 1, 2022 and February 21, 2023 some professional claims entered the institutional claim tables. Researchers interested in professional claims should also check the institutional claim tables for claims of interest.

Issue: Missing values

PIT only ingested fields necessary to check for fraud, waste, and abuse. If it is important to know if a diagnosis was primary or not, we suggest looking in the source data (VistA Fee, Fee Basis Claims System (FBCS), etc.) .

References

Wagner TH, Lo J, Beilstein-Wedel E, Vanneman ME, Shwartz M, Rosen AK. Estimating the Cost of Surgical Care Purchased in the Community by the Veterans Health Administration. MDM Policy Pract. 2021 Nov 16;6(2):23814683211057902. doi: 10.1177/23814683211057902. PMID: 34820527; PMCID: PMC8606928.