

# Health Data Request Form – Philadelphia Department of Public Health

Complete and send to [health.datarequests@phila.gov](mailto:health.datarequests@phila.gov)

\*Requests from the media must be sent to James Garrow at [james.garrow@phila.gov](mailto:james.garrow@phila.gov).

\*\*This form **cannot** be used for Right to Know requests. See City of Philadelphia Open Records Policy: <http://www.phila.gov/privacy/pdfs/FinalCityOpenRecords.pdf> for the appropriate form. Those requests should be directed to [RightToKnowHealth@phila.gov](mailto:RightToKnowHealth@phila.gov).

\*\*\*Requests for data for purposes of research generally must be reviewed by the Department's IRB (<http://www.phila.gov/health/Commissioner/IRB.html>) and Health Commissioner's Office Review Committee (<http://www.phila.gov/health/Commissioner/HCORevCommittee.html>).

\*\*\*\*Data are provided at the discretion of the Department of Public Health permitting that time and resources are available. Not all requests can be met, including those that require extensive data processing.

## 1. Requestor Contact Information

Name: [xxx]
Affiliation: <b>Code for Philly</b> (as volunteer/participant in 2020 Data Hackathon)
Address: [xxx]
Email: [xxx]
Phone: [xxx]

## 2. Specific description of requested data (including data format)

Whatever format is simplest: CSV, Excel, text file with list, etc.

Data requested is to extend time range of information DPH has already visualized helpfully online:

[a] **2019 annual totals for type of MAT via Medicaid**, as shown in leftmost graph in the City's Tableau dashboard for [Unique Medicaid Beneficiaries with a Primary Diagnosis of OUD Receiving ... Medication Assisted Treatment](#)—requesting 3 numbers: *2019 totals for Buprenorphine | Methadone | Naltrexone*

[b] **2019H2 (Q3, Q4) totals for unintentional opioid-related deaths, naloxone administrations on record**, and (if conveniently available) 2019 number of hospitalizations for non-fatal opioid poisonings. See next page for Philadelphia sources where 2015–2018 / 2019H1 equivalents were found.

## 3. Explanation of how the data will be used

Background for developing information-sharing tools to help Philadelphia organizations and individuals find clinics that offer MAT (especially buprenorphine) for OUD recovery. (We are engaging with [the useful resources that DBHIDS provides online for MAT](#), while seeking to address the limits associated with its frequently updated "Treatment Availability Database" PDF, which is "not inclusive of all providers, programs, or levels of care within the network.")

## 4. Date by which data are needed

Best: **March 16, 2020** (probably unrealistically soon...), for initial team presentations

Better: **March 24, 2020** (request [a] is higher priority—if it is only possible to send [a] by this date, please do!)

Still helpful: whenever conveniently possible for City personnel in April or May 2020

<i>Italicized numbers are calculated from the publicly available data collected in non-italics:</i>						<b>Philadelphia data source</b>	
<b>Medicaid records for MAT (# of individuals)</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>		[1] <a href="#">MAT &amp; Medicaid</a>
Buprenorphine	887	1652	3331	5103	###		[1]
Methadone	5298	5416	5179	5170	###		[1]
Naltrexone	69	192	369	420	###		[1]
<b>Total individuals receiving MAT on Medicaid</b>	<b>6254</b>	<b>7260</b>	<b>8879</b>	<b>10693</b>			
<i>Buprenorphine as % of all three MAT types</i>	<i>14%</i>	<i>23%</i>	<i>38%</i>	<i>48%</i>			
<i>Annual rate of increase for MAT</i>		<i>16%</i>	<i>22%</i>	<i>20%</i>			
<i>Annual rate of increase for buprenorphine</i>		<i>86%</i>	<i>102%</i>	<i>53%</i>			
<b>City records for overdose incidents involving opioids</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	2019H1	2019H2
<b>Unintentional opioid-related deaths</b>	<b>561</b>	<b>752</b>	<b>1074</b>	<b>939</b>		<b>465</b>	<b>###</b>
<b>Naloxone administrations by EMS</b>	<b>2805</b>	<b>4091</b>	<b>6069</b>	<b>3912</b>		<b>1507</b>	<b>###</b>
<b>Naloxone administrations by police + SEPTA</b>		<b>70</b>	<b>630</b>	<b>710</b>		<b>192</b>	<b>###</b>
<b>Total opioid overdoses on record</b>	<b>3366</b>	<b>4913</b>	<b>7773</b>	<b>5561</b>		<b>2164</b>	
<b>Fatalities among opioid overdoses on record</b>	<b>16.7%</b>	<b>15.3%</b>	<b>13.8%</b>	<b>16.9%</b>		<b>21.5%</b>	
Hospitalization for non-fatal opioid poisonings	652	682	772	651	###		
<i>Total opioid incidents on record</i>	<i>4018</i>	<i>5595</i>	<i>8545</i>	<i>6212</i>		<i>2164</i>	
<b>Fatalities among opioid incidents on record</b>	<b>14.0%</b>	<b>13.4%</b>	<b>12.6%</b>	<b>15.1%</b>			

#### Data notes & limits:

- [2] Figures for unintentional opioid-related fatalities for **2019Q2** are from **page 54** of the City's "[Opioid Misuse and Overdose Report](#)" (updated 2020 February 26 [and 13 and 10]), "Fatal Overdoses by Incident Location, Philadelphia, 2017-2019Q2".
- [3] Naloxone administrations for **2015-2016H1** = EMS only. Police #s start in **2016H2**. SEPTA #s start in **2017H2**.
- [4] Dataset for **hospital admissions for non-fatal opioid poisonings** wants clarification: Does this dataset [4] include overlaps with post-naloxone ED admissions? (If so, why are these annual totals so *much* smaller than the annual totals for **post-naloxone hospitalizations** in [Philly ED Transfers](#): 2233 | 3142 | 4030 | 2619? [#s thanks to dph\_dash\_n\_ed\_transfers])