Validation Of Mortality Information From A Real-world Data Source: Can Administrative Claims Alone Be Trusted?

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Study Summary

Study Question: To evaluate validity of death information coming from employer-based sources relative to the National Death Index (NDI)

Study Design:

Random sample of 6,000 adults from the MarketScan Commercial Claims and Encounters Database

Identify deaths in MarketScan (MSN) data

Identify deaths in National Death Index (NDI)

Validate MSN-identified deaths compared with NDI deaths

Study Results: Accuracy of MSN-identified Deaths vs. NDI

Negative Predictive Value
Positive Predictive Value
Specificity
Sensitivity

Date concordance (% within 1 day)

Observed Value (95% CI)

86% (85%, 87%) 93% (91%, 94%) 99% (98%, 99%) 54% (51%, 56%) 96.9%

Conclusion: Employer-provided death data provides accurate mortality information but may need to be supplemented with other sources to be comprehensive.

Background

- Mortality data is leveraged in multiple ways in pharmacoepidemiologic research, including assessment of survival, establishing the end of patient follow-up, and defining specific outcomes (e.g., non-fatal stoke).
- Identifying a reliable source of mortality data using Real-World Data (RWD) is challenging due to variability in the validity, granularity, and comprehensiveness of data across sources impacting study conclusions.^{1,2}

Objective

 To validate death information coming from employer-based sources relative to that contained in the Centers for Disease Control and Prevention's National Death Index (NDI).

Methods

Data Source

- Administrative claims data from the MerativeTM MarketScan[®]
 Commercial and Medicare Database (MSN) linked to the NDI.
 - Death data in MarketScan includes day, month, and year of death derived from inpatient discharge status and employer-reported outpatient deaths.
 - Death data in the NDI includes day, month, and year of death derived from death certificates provided by vital records offices.

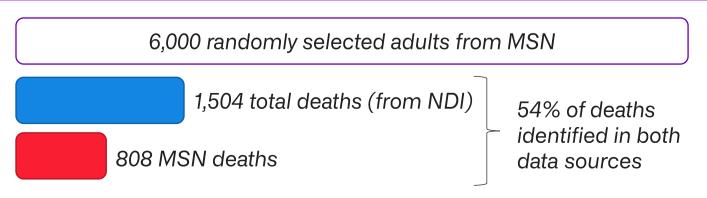
Study Design and Outcomes

- A random sample of 6,000 adults whose employer-sponsored insurance benefits ended during the 2019 or 2022 calendar years were selected in the MarketScan Database and linked to the NDI.
- Individuals who died in each calendar year were identified within both the NDI and MSN data sources; the date of death was also extracted.
- NDI reported deaths were considered the "gold standard" for validation of MSN deaths.
 - Sensitivity, specificity, positive predictive value (PPV) and negative predictive value (NPV) of MarketScan based deaths was assessed.
 - · Concordance between the death date was also evaluated.

Results

• Of the 1,504 deaths identified in the NDI data, 808 (54%) were also identified using MSN data (Figure 1).

Figure 1. Deaths identified in NDI and in MSN data



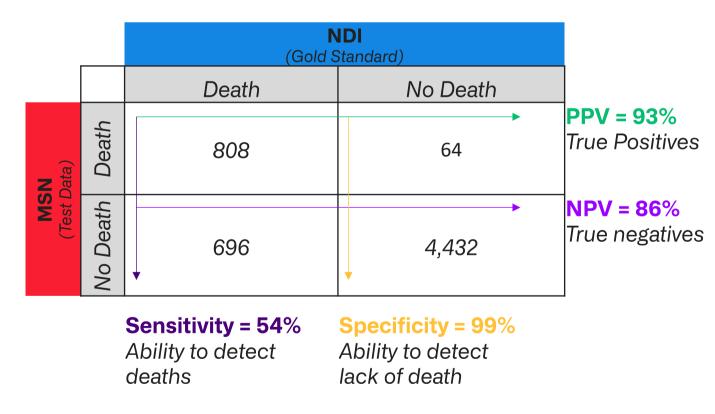
Results, continued

 For the 808 deaths in both databases, date of death in MSN was within +/- 1 day of the NDI for 97% (Figure 2).



- Compared with the NDI, death information available in MSN was accurate as evidenced by a high PPV and NPV (Figure 3).
- Although specificity was also high, sensitivity was moderate indicating that death in MSN could be more comprehensive (Figure 3).

Figure 3. Validation of MSN Deaths



Limitations

• The study sample was composed of a randomly selected population of adults and may not generalize to specific populations (e.g., pediatrics, oncology patients, etc.).

Conclusions

- Death information captured through employer supplied data is accurate with a high degree of NPV, PPV and specificity.
 - Provided dates of death also have high concordance to NDI provided date of death.
- However, employer provided death data is not completely comprehensive and provides modest sensitivity.
 - Inclusion of secondary death data sources, such as the Social Security Death Master file, could be considered to help increase the comprehensive capture of death.

References

Levin MA, et al. *Health Serv Res.* 2019 Jun;54(3):722; 2. Sholle ET, et al. *AMIA Annu Symp Proc.* 2024 Jan 11:2023:634-640. eCollection 2023. Sholle ET, et al. AMIA Annu Symp Proc. 2024 Jan 11:2023:634-640. eCollection 2023.

Disclosure

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