

DATA MANAGEMENT AND SHARING PLAN

If any of the proposed research in the application involves the generation of scientific data, this application is subject to the NIH Policy for Data Management and Sharing and requires submission of a Data Management and Sharing Plan. If the proposed research in the application involves the generation of large-scale genomic data, the Genomic Data Sharing Policy also applies and must be addressed in this Plan. Refer to guidance on [Writing a Data Management and Sharing Plan](#). When preparing your plan, you should delete the text in italics. There is no "form page" for the Data Management and Sharing Plan. The DMS Plan must be provided in the *format* shown below.

1. Will there be [maximum appropriate sharing of scientific data](#) underlying peer-reviewed publications and other findings resulting from the work supported by this award (including preprints, refereed papers reported at conferences, and other findings)?
Yes ☒ No ☐
2. Will the scientific data underlying peer-reviewed publications be shared by the time of publication, or for other findings, by the end of the period of performance, which includes no-cost extensions?
Yes ☐ No ☒
3. Will shared scientific data be made available for at least as long as required by applicable data repository policies and/or journal policies?
Yes ☒ No ☐
4. If you answered "no" to elements 1, 2, or 3, or if you anticipate that sharing will be limited in some other way, please describe these limitations and the ethical, legal, or technical factors for them. Your response should specify a particular reason(s) for limiting sharing. *[300 words maximum]*

Sufficient data from this project will be preserved to enable sharing of sufficient quality to validate and replicate research findings described in the Aims. De-identified data sharing will be consistent with HIPAA guidelines and the Final NIH Statement on Sharing Research Data. The analysis datasets themselves will be preserved and shared to the extent permissible by the data sharing agreements (DSAs) that enable our use of these data. We will work with agencies that maintain the administrative data to implement DSAs that will facilitate preservation and reuse to the greatest extent possible. Although not immediately ruled out, data that is deemed "sensitive" may be added to limited-use datasets. In accordance with NIH guidelines, we will make all data and materials available in a timely manner to the extent possible (http://grants.nih.gov/policy/data_sharing/).

5. If scientific data derived from human research participants will be shared, will privacy, rights, and confidentiality of participants be protected as outlined in [NOT-OD-22-213](#)?
Yes ☒ No ☐ Not Applicable ☐
6. *In the table below, please list [100 words maximum]:*
 - a. *Key types of scientific data anticipated to be generated during the project, including the species and modality, if known (e.g., "human genomic data," "rat functional magnetic resonance imaging data"). NIH recognizes that not all data types expected to be generated in the study will meet the definition of scientific data or can be anticipated in advance. If a data type does not appear on the list, it does not imply that that data type will not be shared if it is generated in the study.*

Data will be interview data from 100 participants generated per study protocol and a combination of administrative data from different state agencies including the Arkansas All Payer Claims Database (APCD), discharge data from School Based Health Centers in Arkansas, and data reported to the Arkansas

Department of Education (ADE). Administrative data will be de-identified and cover years 2013-2024 and linkages will take place via an honest data broker arrangement with the Arkansas Center for Health Improvement. Metadata and data dictionaries are available for the ADE and APCD, the two primary administrative data sources from which this project will be derived.

- b. The repository or an example of a repository where the scientific data may be managed and shared, if the scientific data is known at time of application. NIH expects the use of established repositories for preserving and sharing scientific data when they are available.*

Expected Data Type	Established Repository or Example
Data and metadata	Open Science Framework. The Arkansas APCD data that will be used in this study are archived within the Arkansas Healthcare Transparency Initiative and can be accessed by other researchers upon approval from the Arkansas Insurance Department (AID) and ACHI. The educational data being used in the study are archived within the ADE Data Warehouse and can be accessed by other researchers through an approved DSA.

7. For studies subject to the NIH Genomic Data Sharing Policy (GDS) (e.g., using NIH funds to generate large-scale human genomic data):

- a. Will you share all large-scale human genomic and associated data in a NIH-designated repository according to the accelerated timelines expected in the GDS Policy?

Yes ☐ No ☐ Not Applicable ☒

If "no," address in element 4.

- b. Do you anticipate that when sharing you will be able to meet the [expectations of the Institutional Certification](#) in the GDS Policy?

Yes ☐ No ☐ Not Applicable ☒

If "no," address in element 4.