SUPPLEMENT 1: SEARCH STRATEGY & DATA ABSTRACTION

The following is the search strategy used in this study. After the search was executed, Level 1 screenings were conducted. Those that passed Level 1 screening were passed to full-text review where researchers read and abstracted data from a subset of these articles. Data were abstracted onto a shared Excel spreadsheet to ensure that all authors were consistently capturing the same types of information. The categories of data captured included: 1) author(s); 2) title; 3) date of publication within range of interest; 4) type of outcome (e.g. prevalence, incidence, direct cost, indirect cost, total cost, activity limitation, or work limitation); 5) results from the study; 6) definition of the condition that the study used; 7) sample size; 8) sample methodology (e.g. databases used, survey methods, etc.); 9) sample distribution (national, subnational, single-facility, etc.); 10) population makeup/key sample demographics; 11) response rate; 12) data collection date; and 13) use of specific modeling techniques.

I. Pubmed

Back Pain:

("back pain/economics"[Majr] OR "back pain/epidemiology"[Majr] OR "back pain/statistics and numerical data"[Majr]) AND ("cost of illness"[MeSH] OR "cost of illness"[TiAb] OR cost[TiAb] OR "disability evaluation"[MeSH] OR disability[TiAb] OR socioeconomic[TiAb] OR work[TiAb] OR burden[TiAb] OR epidemiology[TiAb] OR incidence[MeSH] OR incidence[TiAb] OR prevalence[MeSH] OR prevalence[TiAb] OR financial[TiAb] OR employment[TiAb]) AND ("2013/04/01"[PDAT] : "2019/07/26"[PDAT]) AND "humans"[MeSH] AND English[Ia]

Rheumatoid Arthritis:

("arthritis, rheumatoid/economics"[Majr] OR "arthritis, rheumatoid/epidemiology"[Majr] OR "arthritis, rheumatoid/statistics and numerical data"[Majr]) AND ("cost of illness"[MeSH] OR "cost of illness"[TiAb] OR cost[TiAb] OR "disability evaluation"[MeSH] OR disability[TiAb] OR socioeconomic[TiAb] OR work[TiAb] OR burden[TiAb] OR epidemiology[TiAb] OR incidence[MeSH] OR incidence[TiAb] OR prevalence[TiAb] OR financial[TiAb] OR employment[TiAb]) AND ("2013/04/01"[PDAT] : "2019/07/26"[PDAT]) AND "humans"[MeSH] AND English[Ia]

Amputation

("amputation/economics"[Majr] OR "amputation/epidemiology"[Majr] OR "amputation/statistics and numerical data"[Majr] OR "amputees"[Majr] OR "amputees/statistics and numerical data"[Majr]) AND ("cost of illness"[MeSH] OR "cost of illness"[TiAb] OR cost[TiAb] OR "disability evaluation"[MeSH] OR disability[TiAb] OR socioeconomic[TiAb] OR work[TiAb] OR burden[TiAb] OR epidemiology[TiAb] OR incidence[MeSH] OR incidence[TiAb] OR prevalence[MeSH] OR prevalence[TiAb] OR financial[TiAb] OR employment[TiAb]) AND ("2013/04/01"[PDAT] : "2019/07/26"[PDAT]) AND "humans"[MesH] AND English[la]

Osteoarthritis:

("osteoarthritis/economics"[Majr] OR "osteoarthritis/epidemiology"[Majr] OR "osteoarthritis/statistics and numerical data"[Majr]) AND ("cost of illness"[MeSH] OR "cost of illness"[TiAb] OR cost[TiAb] OR "disability evaluation"[MeSH] OR disability[TiAb] OR socioeconomic[TiAb] OR work[TiAb] OR burden[TiAb] OR epidemiology[TiAb] OR incidence[MeSH] OR incidence[TiAb] OR prevalence[MeSH] OR prevalence[TiAb] OR financial[TiAb] OR employment[TiAb]) AND ("2013/04/01"[PDAT] : "2019/07/26"[PDAT]) AND "humans"[MesH] AND English[Ia]

Stroke:

("stroke/economics"[Majr] OR "stroke/epidemiology"[Majr] OR "stroke/statistics and numerical data"[Majr]) AND ("cost of illness"[MeSH] OR "cost of illness"[TiAb] OR cost[TiAb] OR "disability evaluation"[MeSH] OR disability[TiAb] OR socioeconomic[TiAb] OR work[TiAb] OR burden[TiAb] OR epidemiology[TiAb] OR incidence[MeSH] OR incidence[TiAb] OR prevalence[MeSH] OR prevalence[TiAb] OR financial[TiAb] OR employment[TiAb]) AND ("2013/04/01"[PDAT] : "2019/07/26"[PDAT]) AND "humans"[MesH] AND English[la]

Traumatic Brain Injury:

("brain injuries, traumatic/economics"[Majr] OR "brain injuries, traumatic/epidemiology"[Majr] OR "brain injuries, traumatic/statistics and numerical data"[Majr] OR "brain concussion/economics"[Majr] OR "brain concussion/epidemiology"[Majr] OR "brain concussion/statistics and numerical data"[Majr]) AND ("cost of illness"[MeSH] OR "cost of illness"[TiAb] OR cost[TiAb] OR "disability evaluation"[MeSH] OR disability[TiAb] OR socioeconomic[TiAb] OR work[TiAb] OR burden[TiAb] OR epidemiology[TiAb] OR incidence[TiAb] OR prevalence[MeSH] OR prevalence[TiAb] OR financial[TiAb] OR employment[TiAb]) AND ("2013/04/01"[PDAT] : "2019/07/26"[PDAT]) AND "humans"[MesH] AND English[Ia]

Multiple Sclerosis:

("multiple sclerosis/economics"[Majr] OR "multiple sclerosis/epidemiology"[Majr] OR "multiple sclerosis/statistics and numerical data"[Majr]) AND ("cost of illness"[MeSH] OR "cost of illness"[TiAb] OR cost[TiAb] OR "disability evaluation"[MeSH] OR disability[TiAb] OR socioeconomic[TiAb] OR work[TiAb] OR burden[TiAb] OR epidemiology[TiAb] OR incidence[MeSH] OR incidence[TiAb] OR prevalence[MeSH] OR prevalence[TiAb] OR financial[TiAb] OR employment[TiAb]) AND ("2013/04/01"[PDAT] : "2019/07/26"[PDAT]) AND "humans"[MesH] AND English[Ia]

Spinal Cord Injury:

("spinal cord injuries/economics"[Majr] OR "spinal cord injuries/epidemiology"[Majr] OR "spinal cord injuries/statistics and numerical data"[Majr]) AND ("cost of illness"[MeSH] OR "cost of illness"[TiAb] OR cost[TiAb] OR "disability evaluation"[MeSH] OR disability[TiAb] OR socioeconomic[TiAb] OR work[TiAb] OR burden[TiAb] OR epidemiology[TiAb] OR incidence[MeSH] OR incidence[TiAb] OR prevalence[MeSH] OR prevalence[TiAb] OR financial[TiAb] OR employment[TiAb]) AND ("2013/04/01"[PDAT] : "2019/07/26"[PDAT]) AND "humans"[MesH] AND English[Ia]

II. Web of Science

All

(TI=(("back pain" OR "rheumatoid arthritis" OR amputation OR amputee OR osteoarthritis OR stroke OR "traumatic brain injury" OR "brain concussion" OR "multiple sclerosis" OR "spinal cord injury" OR "prevalence OR epidemiology)))

Filter: 2013-2019; Language: English

Back Pain

(TI = ("back pain" AND ("cost of illness" OR disability OR employment OR financial OR incidence OR prevalence OR epidemiology)))

Filter: 2013-2019; Language: English

Rheumatoid Arthritis

(TI = ("rheumatoid arthritis" AND ("cost of illness" OR disability OR employment OR financial OR incidence OR prevalence OR epidemiology)))

Amputation

(TI = ((amputation OR amputee) AND ("cost of illness" OR disability OR employment OR financial OR incidence OR prevalence OR epidemiology)))

Filter: 2013-2019; Language: English

Osteoarthritis

(TI = ("osteoarthritis" AND ("cost of illness" OR disability OR employment OR financial OR incidence OR prevalence OR epidemiology)))

Filter: 2013-2019; Language: English

<u>Stroke</u>

(TI = ("stroke" AND ("cost of illness" OR disability OR employment OR financial OR incidence OR prevalence OR epidemiology)))

Filter: 2013-2019; Language: English

Traumatic Brain Injury

(TI = (("traumatic brain injury" OR concussion) AND ("cost of illness" OR disability OR employment OR financial OR incidence OR prevalence OR epidemiology)))

Filter: 2013-2019; Language: English

Multiple Sclerosis

(TI = ("multiple sclerosis" AND ("cost of illness" OR disability OR employment OR financial OR incidence OR prevalence OR epidemiology)))

Filter: 2013-2019; Language: English

Spinal Cord Injury

(TI = (("spinal cord injury" OR "spinal cord injuries") AND ("cost of illness" OR disability OR employment OR financial OR incidence OR prevalence OR epidemiology)))

Filter: 2013-2019; Language: English

III. SCOPUS

All

TITLE (("back pain" OR "rheumatoid arthritis" OR amputation OR amputee OR osteoarthritis OR stroke OR "traumatic brain injury" OR "multiple sclerosis" OR "spinal cord injury" OR "spinal cord injuries") AND ("cost of illness" OR disability OR incidence OR prevalence OR epidemiology OR financial OR employment)) AND (LIMIT-TO (PUBYEAR, 2019) OR LIMIT-TO (PUBYEAR, 2018) OR LIMIT-TO (PUBYEAR, 2017) OR LIMIT-TO (PUBYEAR, 2016) OR LIMIT-TO (PUBYEAR, 2015) OR LIMIT-TO (PUBYEAR, 2014) OR LIMIT-TO (PUBYEAR, 2013) AND (LIMIT-TO (LANGUAGE, "English"))

Back Pain

TITLE (("back pain") AND ("cost of illness" OR disability OR incidence OR prevalence OR epidemiology OR financial OR employment)) AND (LIMIT-TO (PUBYEAR, 2019) OR LIMIT-TO (PUBYEAR, 2018) OR LIMIT-TO (PUBYEAR, 2017) OR LIMIT-TO (PUBYEAR, 2016) OR LIMIT-TO (PUBYEAR, 2015) OR LIMIT-TO (PUBYEAR, 2014) OR LIMIT-TO (PUBYEAR, 2013) AND (LIMIT-TO (LANGUAGE, "English"))

Rheumatoid Arthritis

TITLE (("rheumatoid arthritis") AND ("cost of illness" OR disability OR incidence OR prevalence OR epidemiology OR financial OR employment)) AND (LIMIT-TO (PUBYEAR, 2019) OR LIMIT-TO (PUBYEAR, 2018) OR LIMIT-TO (PUBYEAR, 2017) OR LIMIT-TO (PUBYEAR, 2016) OR LIMIT-TO (PUBYEAR, 2015) OR LIMIT-TO (PUBYEAR, 2014) OR LIMIT-TO (PUBYEAR, 2013) AND (LIMIT-TO (LANGUAGE, "English"))

Amputation

TITLE ((amputation OR amputee) AND ("cost of illness" OR disability OR incidence OR prevalence OR epidemiology OR financial OR employment)) AND (LIMIT-TO (PUBYEAR, 2019) OR LIMIT-TO (PUBYEAR, 2018) OR LIMIT-TO (PUBYEAR, 2017) OR LIMIT-TO (PUBYEAR, 2016) OR LIMIT-TO (PUBYEAR, 2015) OR LIMIT-TO (PUBYEAR, 2014) OR LIMIT-TO (PUBYEAR, 2013) AND (LIMIT-TO (LANGUAGE, "English"))

Osteoarthritis

TITLE (("osteoarthritis") AND ("cost of illness" OR disability OR incidence OR prevalence OR epidemiology OR financial OR employment)) AND (LIMIT-TO (PUBYEAR, 2019) OR LIMIT-TO (PUBYEAR, 2018) OR LIMIT-TO (PUBYEAR, 2017) OR LIMIT-TO (PUBYEAR, 2016) OR LIMIT-TO (PUBYEAR, 2015) OR LIMIT-TO (PUBYEAR, 2014) OR LIMIT-TO (PUBYEAR, 2013) AND (LIMIT-TO (LANGUAGE, "English"))

<u>Stroke</u>

TITLE (("stroke") AND ("cost of illness" OR disability OR incidence OR prevalence OR epidemiology OR financial OR employment)) AND (LIMIT-TO (PUBYEAR, 2019) OR LIMIT-TO (PUBYEAR, 2018) OR LIMIT-TO (PUBYEAR, 2017) OR LIMIT-TO (PUBYEAR, 2016) OR LIMIT-TO (PUBYEAR, 2015) OR LIMIT-TO (PUBYEAR, 2014) OR LIMIT-TO (PUBYEAR, 2013) AND (LIMIT-TO (LANGUAGE, "English"))

Traumatic Brain Injury

TITLE (("traumatic brain injury" OR concussion) AND ("cost of illness" OR disability OR incidence OR prevalence OR epidemiology OR financial OR employment)) AND (LIMIT-TO (PUBYEAR, 2019) OR LIMIT-TO (PUBYEAR, 2018) OR LIMIT-TO (PUBYEAR, 2017) OR LIMIT-TO (PUBYEAR, 2016) OR LIMIT-TO (PUBYEAR, 2015) OR LIMIT-TO (PUBYEAR, 2014) OR LIMIT-TO (PUBYEAR, 2013) AND (LIMIT-TO (LANGUAGE, "English"))

Multiple Sclerosis

TITLE (("multiple sclerosis") AND ("cost of illness" OR disability OR incidence OR prevalence OR epidemiology OR financial OR employment)) AND (LIMIT-TO (PUBYEAR, 2019) OR LIMIT-TO (PUBYEAR, 2018) OR LIMIT-TO (PUBYEAR, 2017) OR LIMIT-TO (PUBYEAR, 2016) OR LIMIT-TO (PUBYEAR, 2015) OR LIMIT-TO (PUBYEAR, 2014) OR LIMIT-TO (PUBYEAR, 2013) AND (LIMIT-TO (LANGUAGE, "English"))

Spinal Cord Injury

TITLE (("spinal cord injury" OR "spinal cord injuries") AND ("cost of illness" OR disability OR incidence OR prevalence OR epidemiology OR financial OR employment)) AND (LIMIT-TO (PUBYEAR, 2019) OR LIMIT-TO (PUBYEAR, 2018) OR LIMIT-TO (PUBYEAR, 2017) OR LIMIT-TO (PUBYEAR, 2016) OR LIMIT-TO (PUBYEAR, 2015) OR LIMIT-TO (PUBYEAR, 2014) OR LIMIT-TO (PUBYEAR, 2013) AND (LIMIT-TO (LANGUAGE, "English"))

IV. Grey Literature Search

Performed manual internet searches and condition-specific online searches based on expert advice.

The websites of the following organizations were searched for relevant data. Below is the search strategy used, as typed into the websites' search engines. Each new search is separated by a semicolon. All searches were performed as of 03/03/2020.

Organizations: Agency for Healthcare Research and Quality, National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention, Healthcare Cost and Utilization Project (Publications Search only) (HCUP), Medical Expenditure Panel Survey (MEPS), National Heart, Lung, and Blood Institute, American Heart Association, National Multiple Sclerosis Society, Model Systems Knowledge Translation Center: Traumatic Brain Injury and Spinal Cord Injury

Search strategy: [CONDITION] prevalence; [CONDITION] incidence; [CONDITION] cost; [CONDITION] direct cost; [CONDITION] medical cost; [CONDITION] indirect cost; [CONDITION] non-medical cost; [CONDITION] productivity loss; [CONDITION] absenteeism; [CONDITION] presenteeism; [CONDITION] total cost; [CONDITION] activity limitation; [CONDITION] work limitation; [CONDITION] disability; [CONDITION] employment

Terms used for condition: back pain, amputation, limb loss, osteoarthritis, rheumatoid arthritis, multiple sclerosis, traumatic brain injury, concussion, spinal cord injury, stroke. Note that organizations focused on a single condition (e.g. National Multiple Sclerosis Society) were only searched for the relevant condition. Similarly, organizations focused only on a single outcome (e.g. MEPS is focused on medical cost) were only searched for the relevant outcome.

Additional Grey Literature Search Strategy

- HCUP statistical briefs were reviewed manually for relevant titles
- MEPS summary tables for medical conditions were queried for relevant conditions ("back problems" and "osteoarthritis and other non-traumatic joint disorders")
- National Health and Nutrition Examination Survey archive of past publications was reviewed manually for relevant titles
- NCHS data briefs reviewed manually by keyword
- National Spinal Cord Injury Statistic Center:
 - o Publications Database reviewed manually for relevant titles
 - o Facts and Figures archive reviewed manually for relevant data

SUPPLEMENT 2: QUALITY GRADING FORMS

Modified MORE Observational Studies of Incidence or Prevalence of Chronic Diseases

1. Define and Justify Target Population: All US, Adult-specific (Sub-National: Major Flaw)

2. Response Rate: Justify acceptable response rate: 40% is the minimum. Anything below 40% is a

Major Flaw. Unreported response rate is a Major Flaw.

3. Exclusion Rate from Analysis: N/A

4. Source of Measure Incidence/Prevalence of Chronic Diseases:

- Claims Database: Major flaw

- Crude Prevalence: Minor flaw

- Unreported Crude/Adjusted: Minor flaw

- Proxy-Reported: Minor flaw

1. Reference Period: N/A

2. Severity: N/A

3. Frequency of Symptoms of the Chronic Disease in Definition of the Outcome: N/A

4. Dependent Variable in Sub-populations: N/A

Descriptive

1. Condition *

Mark only one oval.

Amputation

Back Pain

Multiple Sclerosis

Osteoarthritis

Rheumatoid Arthritis

Arthritis

Spinal Cord Injury

Stroke

Traumatic brain injury

2. Article ID *

3. Journal of Publication *

4. Year of Publication *

	Not Reported - POOR REPORTING
X	Industry
X	Grant (includes grants received from government, agencies, and other non-industry sponsors
X	Combined Industry + Grant
X	Government (i.e. government research group receiving government funds)
00	Other:
Confli	ct of Interest *
Mark o	only one oval.
\bigcirc	Disclosure not reported - POOR REPORTING
\bigcirc	Reported not having conflict of interest
\bigcirc	Reported having significant conflict of interest - MINOR FLAW
\bigcirc	Other:
Mark o	ry Aim of the Study * only one oval.
Mark	
Mark (only one oval.
	Aim was not stated - POOR REPORTING
	inly one oval. Aim was not stated - POOR REPORTING Included prevalence estimation in general population
Mark 0	inly one oval. Aim was not stated - POOR REPORTING Included prevalence estimation in general population Included prevalence estimation in racial/sex/other population subgroups
	inly one oval. Aim was not stated - POOR REPORTING Included prevalence estimation in general population Included prevalence estimation in racial/sex/other population subgroups Included prevalence estimation without clear target population - MINOR FLAW
	Aim was not stated - POOR REPORTING Included prevalence estimation in general population Included prevalence estimation in racial/sex/other population subgroups Included prevalence estimation without clear target population - MINOR FLAW Included incidence estimation in the general population
000000 Study	Aim was not stated - POOR REPORTING Included prevalence estimation in general population Included prevalence estimation in racial/sex/other population subgroups Included prevalence estimation without clear target population - MINOR FLAW Included incidence estimation in the general population Included incidence estimation in racial/sex/other population subgroups Included incidence estimation without clear target population subgroups Included incidence estimation without clear target population subgroups Included incidence estimation without clear target population - MINOR FLAW
000000 Study	Aim was not stated - POOR REPORTING Included prevalence estimation in general population Included prevalence estimation in racial/sex/other population subgroups Included prevalence estimation without clear target population - MINOR FLAW Included incidence estimation in the general population Included incidence estimation in racial/sex/other population subgroups Included incidence estimation without clear target population subgroups Included incidence estimation without clear target population FLAW
000000 Study	Aim was not stated - POOR REPORTING Included prevalence estimation in general population Included prevalence estimation in racial/sex/other population subgroups Included prevalence estimation without clear target population - MINOR FLAW Included incidence estimation in the general population Included incidence estimation in racial/sex/other population subgroups Included incidence estimation without clear target population subgroups Included incidence estimation without clear target population Subgroups Included incidence estimation without clear target population - MINOR FLAW
000000 Study	Aim was not stated - POOR REPORTING Included prevalence estimation in general population Included prevalence estimation in racial/sex/other population subgroups Included prevalence estimation without clear target population - MINOR FLAW Included incidence estimation in the general population Included incidence estimation in racial/sex/other population subgroups Included incidence estimation without clear target population subgroups Included incidence estimation without clear target population - MINOR FLAW Design *
Study Mark C	Aim was not stated - POOR REPORTING Included prevalence estimation in general population Included prevalence estimation in racial/sex/other population subgroups Included prevalence estimation without clear target population - MINOR FLAW Included incidence estimation in the general population Included incidence estimation in racial/sex/other population subgroups Included incidence estimation without clear target population subgroups Included incidence estimation without clear target population - MINOR FLAW Design * only one oval. Not clearly stated - POOR REPORTING
Study Mark C	Aim was not stated - POOR REPORTING Included prevalence estimation in general population Included prevalence estimation in racial/sex/other population subgroups Included prevalence estimation without clear target population - MINOR FLAW Included incidence estimation in the general population Included incidence estimation in racial/sex/other population subgroups Included incidence estimation without clear target population subgroups Included incidence estimation without clear target population - MINOR FLAW Design * only one oval. Not clearly stated - POOR REPORTING Cross-sectional

External Validity

Assesses the generalizability of the article to the general, US population (population of interest for the purposes of the study).

9. Population-based sampl	ing	
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Mark only one oval.

\bigcirc	Not reported - POOR REPORTING
\bigcirc	Random, General population-based
\bigcirc	Random, Multistage and/or Stratified, General population-based
\bigcirc	Non-random, General population-based - MINOR FLAW
$\overline{\bigcirc}$	Random, Non-general population-based (e.g. random sampling restricted to geographic area)

-	MI	N	O	R	FL	A	W	

Non-random, non-general population-based sampling - MAJOR FLAW

Other:

10. Population-based sampling frame *

Mark only one oval.

	-+	norted	DOOD	DEDOD:	TIMO
) IN	otre	poneu ·	- FUUR	REPOR	HING

Sampling within nationally representative frame

Sampling within non-nationally representative frame - MINOR FLAW

Insurance claims - MAJOR FLAW

Work place - MAJOR FLAW

Health-care based (clinics, hospitals) - MAJOR FLAW

Proxy selection (parents, relatives, legal representatives, care takers, etc.)

Self selection

Other:

11. Assessment of Sampling Bias *

Mark only one oval.

No information about sampling bias - POOR REPORTING

Sampling bias was assessed by the authors - Differences in study population vs target population are reported OR justified exclusion of the subjects from the sampling or analysis

C		

12. Estimate Bias: Response rate in total sample. *

Mark only one oval.

13. Address Bias: Sampling	bias is	addressed	in the	analysis *
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Mark only one oval.

National sample with weighting of the estimates by age, sex, and race of US population

National sample without weighting of the estimates by age, sex, and race of US population -MINOR FLAW

	Non-national	sample with	weighting	of the	estimates	to the	US population
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Non-national sample without adjustment to the US population OR unreported - MAJOR FLAW

Other:

Internal Validity

Assesses the overall integrity of the article for the aims that it laid out for itself.

14.	Primary	source o	f measure	incidence	prevalence	of	chronic	diseases	*
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Mark only one oval.

Not reported -	POOR	REPORTING
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Self-reported (collected for the study)

Proxy-reported (collected for the study) - MINOR FLAW

Obtained during clinical exam or objectively measured with diagnostic methods for the purpose of the study

Obtained from medical records or insurance claims - MINOR FLAW

Obtained from registries or administrative databases (epidemiological evaluation independent of healthcare)

15. Reference Period *

Mark only one oval.

	Reference	noriod no	t defined .	POOR	REPORTING
- <i>1</i>	Relefence	penounc	it uenneu -	FOOR	REFORTING

Reference period is not relevant to study design (Prevalence)

Reference	period	of at	least 1	year	(Incidence)	ł
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- Reference period of less than 1 year (Incidence) MINOR FLAW
- Other:

16. Severity *

Mark only one oval.

- Severity is not defined POOR REPORTING
- Severity is defined or appropriately omitted

Other:

17 Erequency of Symptome of the Chronic Diseases *	
 Frequency of Symptoms of the Chronic Disease * Mark only one oval. 	
Frequency is not defined - POOR REPORTING	
Frequency is defined or appropriately omitted	
Other:	
8. Validation *	
Mark only one oval.	
No information about validation - POOR REPORTING	
Variables were validated OR compared to previously validated methods (validation, previously published research, by comparison to "gold standard")	e.g. inter-methods
Authors did not sufficiently justify methodology - MAJOR FLAW	
Other:	
9. Reliability of the Estimates *	
Mark only one oval.	
Not reported - POOR REPORTING	
Reliability assumed acceptable	
Reliability is questionable - MINOR FLAW	
Other:	
20. Reporting of prevalence	
Mark only one oval.	
Not clear - POOR REPORTING	
Point prevalence - MINOR FLAW (only for back pain)	
Period prevalence	
Not applicable	
Other:	
 Precision of estimate of prevalence (Error, 95% CI, or other) Mark only one oval. 	
Omitted - POOR REPORTING	
Reported	
Not applicable	
Other:	

	Cauda amualanaa MINOD EL MM
0	Crude prevalence - MINOR FLAW
\subseteq	Adjusted prevalence
\bigcirc) Not applicable
\bigcirc) Other:
	rting of incidence
Mark	only one oval.
\bigcirc	Unclear - POOR REPORTING
C	Cumulative incidence
\bigcirc	Incidence rate
\bigcirc) Not applicable
\square) Other:
	sion of estimate of incidence (error, 95% CI) only one oval.
) Omitted - POOR REPORTING) Reported
	Reported
25. Incide) Reported) Not applicable
25. Incide	 Reported Not applicable Other:
25. Incide	 Reported Not applicable Other:
25. Incide	 Reported Not applicable Other:

Modified Newcastle-Ottawa Quality Assessment for Cost-of-Illness Studies *Required

Descriptive

1. Condition *

Mark only one oval.		
Amputation		
Back Pain		
Multiple Scleros	is	
Osteoarthritis		
Rheumatoid Ar	nritis	
Arthritis		
Spinal Cord Inju	ry	
Stroke		
Traumatic Brain	Injury	
2. Article ID *		
3. Journal of Publicatio		
4. Year of Publication *		
election		

5.	1.	Representativeness	of the Cohort with C	ondition *
	M	ark only one oval.		

Truly representative (1 *)

Somewhat representative - Selected from Medicare, Medicaid, or large commercial insurance database (1 *)

Single center study

> No description of the derivation of the cohort

6	2. Selection of the Comparison Cohort without Condition (the Control Population)	*
	Mark only one oval.	

Drawn from the same community as the cohort with the illness of interest (1 *)

Drawn from a different source

\bigcirc	No description of the	derivation of th	e cohort with	nout the illness	of interest	OR no compa	rison
cohort							

7. 3. Definition of the illness of interest *

Mark only one oval.

- 2 codes in claims or diagnosis by an appropriate medical professional (1 *)
- 1 code in claims (1 *)
- Patient self-report
- No description
- Other

Comparability

Comparability of cohorts on the basis of design or analysis controlled for confounders

Analysis of costs controls for confounders * Mark only one oval.



The study controls for age and sex (1 *)

-) Does not adequately control for confounders.
- Analysis of costs controls for confounders Mark only one oval.
 - The study controls for other factors (1*)
 - Does not control for other factors

Cost Outcomes

10. Assessment of Cost*

Mark only one oval.

- Complete accounting and description of included costs and their sources (1 *)
- Weak description of sources of cost, but not self-reported (1 *)
-) Self-reported
- No description of sources of cost
- Other

11. Follow-up for cost accounting	was at least one year *
Mark only one oval.	
Yes (1 *)	
◯ No	

Thresholds for converting the Newcastle-Ottawa scales to AHRQ standards (good, fair, and poor):

Good quality: 3 stars in the selection domain AND 1 or 2 stars in the comparability domain AND 2 stars in the cost outcomes domain

Fair quality: 2 stars in the in selection domain AND 1 or 2 stars in the comparability domain AND 2 stars in the cost outcomes domain

Poor quality: 0 or 1 star in the selection domain OR 0 stars in the comparability domain OR 0 or 1 stars in the cost outcomes domain

SUPPLEMENT 3: RESULTS OF QUALITY GRADING

Individual Item Kappa and Responses for Modified Methodological Evaluation of Observational					
Item	Карра	esearch (n=36) No Flaw and Reported	Not Reported	Minor Flaw	Major Flaw
	0.52				
Funding of Study	(0.04-1)	73.5%	26.5%	0.0%	0.0%
Conflict of Interest	1.00	73.5%	23.5%	2.9%	0.0%
Drive any Aire of the Church	0.68	400.00/	0.00/	0.00/	0.00/
Primary Aim of the Study	(0.28-1)	100.0%	0.0%	0.0%	0.0%
Study Design	1.00	100.0%	0.0%	0.0%	0.0%
Population-based Sampling	1.00	50.0%	0.0%	44.1%	5.9%
Population-based Sampling	1.00	44.40/	0.00/	20.00/	47.00/
Frame	1.00	44.1%	0.0%	38.2%	17.6%
Assessment of Sampling Bias	0.41 (0-1)	70.6%	29.4%	0.0%	0.0%
Estimate Bias: Response rate	0.32 (0-	05.00/	0.00/	0.00/	= 00/
in Total Sample.	0.65)	85.3%	8.8%	0.0%	5.9%
Address Bias: Sampling bias is	0.32 (0-	50.00/	0.00/	00.00/	00.50/
Addressed in the Analysis	0.80)	52.9%	0.0%	20.6%	26.5%
Primary Source of Measure Incidence/prevalence of					
Chronic Diseases	1.00	47.1%	0.0%	52.9%	0.0%
Reference Period	1.00	100.0%	0.0%	0.0%	0.0%
Severity	NA	100.0%	0.0%	0.0%	0.0%
Frequency of Symptoms of the	INA	100.0%	0.0%	0.0%	0.0%
Chronic Disease	NA	100.0%	0.00/	0.09/	0.0%
	NA	100.0% 70.6%	0.0%	0.0%	
Validation					8.8%
Reliability of the Estimates	NA	88.2%	8.8%	2.9%	0.0%
Reporting of Prevalence	0.85 (0.52-1)	73.5%	0.0%	26.5%	0.0%
Precision of Estimate of	(0.52-1)	75.570	0.070	20.370	0.070
Prevalence (Error, 95% CI, or					
other)	1.00	67.6%	32.4%	0.0%	0.0%
other)	0.63	07.0%	32.4%	0.0%	0.0%
Prevalence in Total Sample	(0.14-1)	91.2%	0.0%	8.8%	0.0%
Frevalence in Total Sample	0.79	91.270	0.076	0.070	0.076
Reporting of incidence	(0.40-1)	100.0%	0.0%	0.0%	0.0%
Precision of Estimate of	0.76	100.070	0.070	0.070	0.070
Incidence (error, 95% CI)	(0.24-1)	73.5%	26.5%	0.0%	0.0%
	0.76	10.070	20.370	0.070	0.070
Incidence in Total Sample	(0.24-1)	79.4%	0.0%	20.6%	0.0%
incluence in Total Sample	(0.24-1)	13.470	0.070	20.070	0.070

Individual Survey Item Kappa and Responses for Modified Newcastle-Ottawa Quality Assessment (n=36)						
Item	Карра	Earned Point	No Point			
Representativeness of the Cohort with Condition	0.78 (0.33-1)	97.4%	2.6%			
Selection of the Comparison Cohort without Condition (the Control Population)	1	28.2%	71.8%			
Definition of the Illness of Interest	0.73684 (0.19-1)	94.9%	5.1%			
Analysis of Costs Controls for Confounders	1	46.2%	53.8%			
Analysis of Costs Controls for Confounders2	1	41.0%	59.0%			
Assessment of Cost	0.52381 (0.0-1.0)	100.0%	0.0%			
Follow-up for Cost Accounting was at Least One Year	NA	97.4%	2.6%			