

Supplemental Table 1. Comparison of the NDB Offering Options

	Offering Option			
	Sampling Data	Summary Table	Special Extraction	Onsite Research Center
Data provided	Single month sampling of claims data (10% of the total inpatient data and 1% of the total outpatient data)	A summary table	Raw claims data extracted according to the researcher's request	All data stored in the NDB
Pros	As ready-made sampling data are provided, the time between application approval and provision of the data is less.	Although the content that can be accessed is limited, a summary table prepared in response to a request from the researchers will be provided, which allows for longitudinal observations.	As all claims data that meet the criteria requested by the researcher are provided, this format is convenient for researchers to address specific research questions using the NDB data.	At an onsite research center, researchers can directly access all data stored in the NDB. From data extraction to tabulation and analysis, all processes are carried out by the researchers. This allows them to carry out their research as originally planned, while also being able to respond to any errors that may occur during the research implementation phase.
Cons	The sampling data cannot be used for longitudinal studies, and only for cross-sectional studies, because the data are for a single month. In addition, for	Only a table summarizing the results is provided, not the raw claims data. Since it is the provider, not the researcher, who performs the extraction	It takes a very long time from application to provision of data. Additionally, if the data provided are not what was intended or is insufficient, it	There are currently only two onsite research centers in Japan, and the period of use is limited. Researchers are also required to possess the skills to extract and

the protection of privacy, NDB and tabulation, complex will take the same amount of analyze from vast amounts of diagnostic codes and NDB drug extractions are not supported. time and effort to obtain data. codes with less than 0.1% of the additional data. total numbers will be provided in anonymized form. Therefore, it is difficult to accurately evaluate very rare diseases and treatments using sampling data.

This table is based on information published by the Ministry of Health, Labour and Welfare (<https://www.mhlw.go.jp/content/12400000/000678470.pdf>).