National Ambulatory Medical Care Survey

OMB No. 0920-0234 (expires 8/31/2009)

Request for change (83-C)

December 22, 2008

Project Officer: Paul C. Beatty, Ph.D.
Centers for Disease Control and Prevention
National Center for Health Statistics
3311 Toledo Road
Hyattsville, MD 20782
(301)458-4126
pbeatty@cdc.gov

National Ambulatory Medical Care Survey (NAMCS)

This request is to survey physicians in early 2009 to collect information about the adoption of electronic medical/electronic health records in ambulatory care settings. These changes are to be made to an approved data collection, the National Ambulatory Medical Care Survey (OMB No. 0920-0234: Approval expires 8/31/2009). The burden for this 2009 data collection was already included in the September 2007 approval for the 2008 data collection; however, the 2009 data collection was not specifically discussed in that submission.

A. Justification

1. Circumstances making the collection of information necessary

To assist in measuring the progress of meeting the President's goal for most Americans to have access to an interoperable electronic health record by 2014, the National Center for Health Statistics (NCHS) supplemented the National Ambulatory Medical Care Survey (NAMCS) with a mail survey in 2008. Our current plan is to again conduct the mail survey in 2009 with a sample of approximately 2,000 physicians. The NAMCS is an annual survey of non-federal, office-based physicians in the United States. This supplement would be used to collect information on the use and adoption of electronic medical records (EMR)/electronic health records (EHR) from additional physicians. In order to keep costs as low as possible, the questions in this supplemental sample would be conducted using a mail-out/mail back format. A reminder letter will be sent with telephone follow-up for non-respondents. The questions to be asked will be a subset and slightly modified, due to the change in collection method, of those currently asked in the Physician Induction Interview (PII) of the core NAMCS (which is collected via personal interview). The information collected from these additional physicians will be combined with (a) information collected in the core NAMCS, and (b) the comparable 2008 EMR/EHR survey to provide reliable estimates when analyzing data. Tracking the adoption of EMR/EHR systems on a year-by-year basis is important to the Department of Health and Human Services (DHHS) so that close monitoring of the adoption rate is possible. No patient level information will be collected from this additional sample of physicians. This survey will not be fielded before the 60-day notice describing these activities is published.

NAMCS is the only nationally representative annual source of information on EMR/HER adoption and use.

As in 2008, the 2009 supplement will be funded by the Office of the National Coordinator for Health Information Technology (ONC), DHHS.

This supplement was re-approved by the NCHS Research Ethics Review Board (ERB) in the Fall of 2008.

2. Purpose and Use of Information Collection

The addition of a supplementary sample of physicians to the NAMCS in 2009 will complement the data already collected in 2008 by allowing more reliable estimates to be produced on the use and adoption of EMR/EHR systems by private office-based physicians. These data are critical to the ONC as they work toward meeting the President's goal for most Americans to have access to an interoperable EMR/EHR by 2014. Some of the questions we hope to answer: (a) what are the predictors of EMR/EHR adoption, and (b) do physician practice characteristics (e.g., location, organization type, specialty, vulnerable population mix) and EMR/EHR functionality explain the gaps currently found in EMR/EHR adoption rates. Answers to these questions will help DHHS better understand how to better meet the goal and what obstacles they must overcome for those providers reluctant to adopt such a system.

3. Use of Improved Information Technology and Burden Reduction

As in 2008, the additional sample of physicians will once again be contacted by mail.

8. Comments in Response to the Federal Register Notice and Efforts to Consult Outside the Agency

B. Other Consultation

The additional sample of office-based physicians has been funded by the Office of the National Coordinator for Health Information Technology (ONC), DHHS. Both agencies have worked closely on the development of the EMR/EHR questions currently used in the core NAMCS and used as the basis of the questions asked in the mail survey. Consultation with experts from the Robert Wood Johnson Foundation, Massachusetts General Hospital and The George Washington University took place initially to develop the mail survey in 2008.

12. Estimates of annualized burden hours and costs

A. Burden Hours

There is no change to the approved burden hours. The average annual burden for this 2009 data collection was already included in the September 2007 approval for the 2008 data collection; however, the 2009 data collection was not specifically discussed in that submission.

B. Burden Cost

There is no change in the approved burden cost.

Section B. Collection of Information Employing Statistical Methods

1. Respondent Universe and Sampling Methods

The 2,000 physicians will be stratified among the 13 top specialty groups in the same proportions as are the physicians in the core 2009 NAMCS.

The sampling frame will be the same as currently used for the "regular" NAMCS – the masterfiles of the American Medical Association (AMA) and the American Osteopathic Association (AOA).

2. Procedures for the Collection of Information

As mentioned in section A1, the questions that will be asked of the additional physicians will be the same as those in the Physician Induction Interview (PII) of the core NAMCS. Slight changes will be made to account for the different collection method (mail versus personal interview). The mail version is, by design, self administered, where as the core NAMCS questions are asked via a personal interview. As also mentioned earlier, only a subset of the questions from the PII will be used as they relate to the characteristics of the physician's practice, and no patient level data will be collected.

The complete questionnaire which is planned for the 2009 mail survey is included in Attachment A. The 2009 questionnaire has three brief new questions, while two questions were deleted. The changes are detailed below.

New items:

Item 9. At which setting in <i>question 7</i> do you see the most ambulatory patients? WRITE THE NUMBER LOCATED NEXT TO THE BOX YOU CHECKED. □Did not check boxes in question 7
If you <i>only</i> see patient in a <i>reporting location</i> checked in <i>question 8</i> , please mark box 16 stop and return the questionnaire in the envelope provided. Thank you for your time.
•Item 20. What year did you last buy or upgrade your EMR/HER system?
 •Item 21. Is your EMR/HER system certified by the Certification Commission for Healthcare Information Technology (CCHIT)? •□ Yes •□ No •□ Don't know

Deleted items:

• **Old Item 21.** At this location, roughly, how many managed care contracts does this practice have such as HMOs, PPOs, IPAs, and point-of-service plans?

•□ None
• \square Less than 3
•□ 3 to 10
•□ More than 10

•Old Item 22. At this location, roughly, what percentage of the patient care revenue received by this practice comes from managed care contracts (HMOs, PPOs, IPAs, and point-of-service plans)?

_%

The logistical schedule for the mail-out/mail-back is unchanged from the 2008 survey.

5. Individuals Consulted on Statistical Aspects and Individuals Collecting and/or Analyzing Data

The data collection agent is: SRA International Timothy Struttmann 2605 Meridian Parkway, Suite 200 Durham, NC 27713 (919) 313-7631

Attachment

Attachment A National Ambulatory Medical Care Survey (NAMCS): Electronic Medical Records Supplement 2009