Attachment M: NAMCS Introductory Letters and Motivational Insert

Date

Full name Street address City, State, Zip

The Centers for Disease Control and Prevention's National Center for Health Statistics (NCHS) is conducting the National Ambulatory Medical Care Survey (NAMCS). This annual study, which has been in the field since 1973, collects information about the large portion of ambulatory care provided by physicians and mid-level providers throughout the United States. Research utilizing the NAMCS helps to inform physicians, health care researchers, and policy makers about the changing characteristics of ambulatory health care in this country. In addition to the regular sample of physicians, the NAMCS is once again specifically sampling providers from a national sample of community health centers.

Your center has been selected and we are requesting a short interview (approximately 20 minutes) with you to obtain information that would allow us to sample three physicians or mid-level providers in your health center. From these providers we will collect (1) information from a sample of patient visits (e.g., demographics, diagnoses, services, and treatments); and (2) provider demographic and practice characteristics.

Many organizations and leaders in the health care community, including those providing the enclosed letter of endorsement, have expressed their support and join me in urging your participation in this meaningful study. Participation is voluntary, and you or your staff may refuse to answer any question or may stop participating at any time without penalty or loss of benefits. The following are some key points about the survey:

- Data collection for the NAMCS is authorized by Section 306 of the Public Health Service Act (Title 42, U.S. Code, 242k).
- All information collected will be held in confidence according to Section 308(d) of the
 Public Health Service Act (42, U.S. Code, 242m(d)) and the Confidential Information
 Protection and Statistical Efficiency Act (Title 5 of PL 107-347). The selected providers'
 name may be used by NCHS for matching purposes to minimize the possibility of sampling
 in future years and to reduce the paperwork burden on the provider. No patient names,
 social security numbers or addresses are collected.
- This study conforms to the Privacy Rule as mandated by HIPAA, because disclosure of
 patient data is permitted for public health purposes, and the NCHS Research Ethics Review
 Board has approved NAMCS.
- U.S. Census Bureau employees, who administer the study, have taken an oath to abide by Title 13, U.S. Code, Section 9, which requires them to keep all information about your practice and patients confidential.

A representative of the Census Bureau, acting as our agent, will be calling you to schedule an appointment regarding the details of your participation. If you have any questions regarding your participation, please call a NAMCS representative at (800) 392-2862. Additional information on the survey may be obtained by visiting the NAMCS participant Web site at www.cdc.gov/namcs. We greatly appreciate your cooperation.

Sincerely,

Edward J. Sondik, Ph.D. Director

Full name Street address City, State, Zip

Dear

The Centers for Disease Control and Prevention's National Center for Health Statistics (NCHS) is conducting the National Ambulatory Medical Care Survey (NAMCS). This annual study, which has been in the field since 1973, collects information about the large portion of ambulatory care provided by physicians and mid-level providers throughout the United States. Research utilizing the NAMCS helps to inform physicians, health care researchers, and policy makers about the changing characteristics of ambulatory health care in this country. The information that will be requested includes data about the patient visit (e.g., demographics, diagnoses, services, and treatments), provider practice characteristics (e.g., practice type), and the use of electronic medical records.

Based on a list of providers provided by the Executive Director or his/her designee, you have been sampled to participate in the survey. Many organizations and leaders in the health care community, including those providing the enclosed letter of endorsement, have expressed their support and join me in urging your participation in this meaningful study. You will be asked to complete a one-page questionnaire on a sample of about 30 patient encounters during a randomly assigned one-week reporting period. Additionally, there is a short interview (approximately 30 minutes) with you about the nature of your practice. Participation is voluntary, and you or your staff may refuse to answer any question or may stop participating at any time without penalty or loss of benefits. The following are some key points about the survey:

- Data collection for the NAMCS is authorized by Section 306 of the Public Health Service Act (Title 42, U.S. Code, 242k).
- All information collected will be held in confidence according to Section 308(d) of the Public Health Service Act (42, U.S. Code, 242m(d)) and the Confidential Information Protection and Statistical Efficiency Act (Title 5 of PL 107-347). Your name may be used by NCHS for matching purposes to minimize the possibility of being sampled in future years and to reduce the paperwork burden to you. No patient names, social security numbers or addresses are collected.
- This study conforms to the Privacy Rule as mandated by HIPAA, because disclosure of patient data is permitted for public health purposes, and the NCHS Research Ethics Review Board has approved NAMCS.
- U.S. Census Bureau employees, who administer the study, have taken an oath to abide by Title 13, U.S. Code, Section 9, which requires them to keep all information about your practice and patients confidential.

A representative of the Census Bureau, acting as our agent, will be calling you to schedule an appointment regarding the details of your participation. If you have any questions regarding your participation, please call a NAMCS representative at (800) 392-2862. Additional information on the survey may be obtained by visiting the NAMCS participant Web site at www.cdc.gov/namcs. We greatly appreciate your cooperation.

Sincerely,

Date

Full name Street address City, State, Zip

Dear Dr.

The Centers for Disease Control and Prevention's National Center for Health Statistics (NCHS) is conducting the National Ambulatory Medical Care Survey (NAMCS). This annual study, which has been in the field since 1973, collects information about the large portion of ambulatory care provided by physicians and mid-level providers throughout the United States. Research utilizing the NAMCS helps to inform physicians, health care researchers, and policy makers about the changing characteristics of ambulatory health care in this country. The information that will be requested includes data about the patient visit (e.g., demographics, diagnoses, services, and treatments), physician practice characteristics (e.g., practice type), and the use of electronic medical records.

Many organizations and leaders in the health care community, including those providing the enclosed letter of endorsement, have expressed their support and join me in urging your participation in this meaningful study. You will be asked to complete a one-page questionnaire on a sample of about 30 patient encounters during a randomly assigned one-week reporting period. Additionally, there is a short interview (approximately 30 minutes) with you about the nature of your practice. Participation is voluntary, and you or your staff may refuse to answer any question or may stop participating at any time without penalty or loss of benefits. The following are some key points about the survey:

- Data collection for the NAMCS is authorized by Section 306 of the Public Health Service Act (Title 42, U.S. Code, 242k).
- All information collected will be held in the strictest confidence according to Section 308(d) of the Public Health Service Act (42, U.S. Code, 242m(d)) and the Confidential Information Protection and Statistical Efficiency Act (Title 5 of PL 107-347). This information will be used for statistical purposes only. No patient names, social security numbers, or addresses are collected.
- This study conforms to the Privacy Rule as mandated by HIPAA, because disclosure of patient data is permitted for public health purposes, the NCHS Research Ethics Review Board has approved NAMCS.
- U.S. Census Bureau employees, who administer the study, have taken an oath to abide by Title 13, U.S. Code, Section 9, which requires them to keep all information about your practice and patients confidential.

A representative of the Census Bureau, acting as our agent, will be calling you to schedule an appointment regarding the details of your participation. If you have any questions regarding your participation, please call a NAMCS representative at (800) 392-2862. Additional information on the survey may be obtained by visiting the NAMCS participant Web site at www.cdc.gov/namcs. We greatly appreciate your cooperation.

Sincerely,

Motivational Mailing Insert

We need your help to produce valid public health information. Please consider participation in the NAMCS.

Frequently asked questions about the NAMCS

Q. What is NAMCS?

A. The National Ambulatory Medical Care Survey (NAMCS) is a probability sample survey of patient visits to office-based physicians. As in 2010 physicians and mid-level providers at community health centers (CHCs) will be included in the 2011 sample. NAMCS consists of a brief interview with you and the abstraction of patient and visit information from approximately 30 patient encounters during a 1-week reporting period. Office-based physicians and physicians or mid-level providers at CHCs are randomly selected and assigned to 1 of 52 reporting weeks during the year. The encounter information includes items on patient's age, sex and race; physician diagnoses; diagnostic and therapeutic services ordered or provided; and medications prescribed or provided.

Q. How are the data used?

A. NAMCS data are used to statistically describe the patients who use office-based physician services and services provided at CHCs, the conditions most often treated, and the diagnostic and therapeutic services rendered, including medications prescribed. The data are used by public health policymakers, health services researchers, medical schools, physician associations, epidemiologists, and the print and broadcast media to describe and understand the changes that occur in medical care requirements and practices. The data are disseminated in the form of public health reports, journal articles, and microdata files.

Q. Under what authorization do you collect this information?

A. The NAMCS falls under Title 42, United States Code, Section 242k, which permits data collection for health research. The confidentiality of the data is protected by Title 42, United States Code, Section 242m(d). Information collected in NAMCS is used only for statistical purposes. No information that could identify a person or establishment can be released to anyone without the consent of the provider. The U.S. Census Bureau staff, who are collecting the data for the National Center for Health Statistics (NCHS), sign an affidavit making them subject to the Privacy Act, the Public Health Service Act and other laws that require the data be protected. NCHS and the U.S. Census Bureau have maintained a perfect record in protecting the privacy of health care providers and patients.

Q. Does the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule on health information allow me to participate in this survey?

Yes. The Privacy Rule permits you to make disclosures of protected health information without patient authorization for public health purposes or for research that has been

approved by an Institutional Review Board (IRB). This survey meets both of these criteria. Additionally, disclosures may be made under a data use agreement with NCHS. If you have questions about your rights as a respondent, you may call the IRB at 1-800-223-8118. The IRB is an independent board that protects the interests of people who take part in studies.

We have included all the information you need to be assured that you are allowed to disclose protected health information for NAMCS in our introductory letter to you and on our Website: www.cdc.gov/NAMCS. However, there are several things that you must do to assure compliance with the Privacy Rule when participating in the survey. First, the privacy notice that you generally provide to your patients must indicate that patient information may be disclosed for either research or public health purposes. Second, you may need to keep a record of the disclosure (which we will provide), which shows that some data from the patient's medical record were disclosed to CDC for NAMCS. Of course, if you do not transmit health information electronically (such as claims data), then you are not subject to the Privacy Rule or the requirements described above.

Q. Why does the HIPAA Privacy Rule apply to the data collected for NAMCS?

A. The Privacy Rule applies to data collected for the NAMCS because we are asking you to provide certain information about patients without their authorization. For public health and research purposes, NAMCS collects information from the patient's medical record such as visit date, birth date, and residential ZIP Code. While not directly identifiable, these data are considered protected health information as defined by the Privacy Rule. As described above, the rule allows you to disclose this information for public health and research purposes

Q. Will anyone be able to identify my practice in the survey data?

A. No, we are legally bound to assure the confidentiality of your responses including anything that might result in your practice being identified. The data files released for research do not include any provider or patient identifying information.

Q. Why does "patient's name" appear on the form if you do not collect it?

A. We ask that you keep that part of the form above the perforation (which contains the patient's name). We collect the remaining information. We want you to keep the patient's name so that if we need to contact you regarding missing or conflicting information from the abstract form, then we can give you our unique serial number which is also contained on the top portion of the form you retain. This will allow you to locate the patient's medical record without disclosing the name to us.

Q. Is participation mandatory?

A. No, participation is completely voluntary.

Q. Then why should I participate?

A. Without your participation, neither you nor the other physicians or providers like you will be represented in the national description of office-based and CHC patient care. You were randomly chosen to represent not only yourself but thousands of other physicians or providers in your geographic region and medical specialty.

For specific questions about how NCHS protects the information you provide, contact:

David Woodwell

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http://ww.cdc.gov/NAMCS