Attachment Q: 2011 Physician Workflow Supplementary Survey Letters

Post Card Thank you for participating/new study:

Thank you for your participation in the Electronic Medical Record Supplement to the National Ambulatory Medical Care Survey (NAMCS). We really appreciate your contribution to this important study.

Based, in part, on your responses to the prior survey, you have been selected to participate in an important follow-up study to learn more about physicians' experience with adopting electronic health records. This study will obtain information annually about the costs, benefits and barriers related to the use of electronic health records, at various stages of adoption over a three-year period.

In the next few weeks, you will receive a short questionnaire called the Physician Workflow Supplement. Your participation in this important study is needed to better understand physician experiences with electronic medical records in office-based practices.

Thank you again for your participation.

First Mailing (NO EHR SYSTEM):

March 1, 2010

Johnny Haznaux-Ehr, MD
Position (if provided, i.e. Director, Chief, etc)
Practice Name (if provided)
5 Smith Street
Not here, NC 27713-5956

Dear Dr. Haznaux-Ehr,

Thank you so much for your contribution in tracking the adoption of electronic health records (EHRs) in office-based practices through your recent participation in the National Ambulatory Medical Care Survey (NAMCS): Electronic Medical Records Supplement. I am asking for your help to participate in a brief follow-up questionnaire, called the Physician Workflow Supplement.

According to your earlier response, your practice at this location does not have an EHR system. This follow-up survey will be used to understand physicians' experiences with adopting EHRs. Please complete the enclosed questionnaire and return it in the enclosed envelope. You are not being asked to provide any patient information for this follow-up mail survey. You will be contacted two additional times during the study period (for a total of 3 years) to help us understand changes in physician experiences with the costs, benefits, and barriers related to the use of EHRs.

This Supplement is authorized under Section 306 of the Public Health Service Act. Your responses are anonymous and we are required to keep your survey data confidential in accordance with Section 308(d) of the Public Health Service Act and the Confidential Information Protection and Statistical Efficiency Act. All information will be used for statistical purposes only, and you may discontinue your participation at any time.

Your participation in this voluntary survey is very important to us, and will help to provide guidance in developing policies concerning EHRs. We rely on the generous cooperation of physicians like you to provide policy makers, health services researchers, and medical associations the information needed to understand health care delivery in the United States. If you have any questions or comments regarding this study, please call the study coordinator at 1-866-635-4515. General information on the survey may be obtained by visiting the NAMCS participant website at www.cdc.gov/namcs.

Thank you for your valuable assistance with this worthy study.

Sincerely,

First Mailing (SOME EHR SYSTEM):

March 1, 2010

Johnny Dunaux-Arm, MD
Position (if provided, i.e. Director, Chief, etc)
Practice Name (if provided)
5 Smith Street
Not here, NC 27713-5956

Dear Dr. Dunaux-Arm,

Thank you so much for your contribution in tracking the adoption of electronic health records (EHRs) in office-based practices through your recent participation in the National Ambulatory Medical Care Survey (NAMCS): Electronic Medical Records Supplement. I am asking for your help to participate in a brief follow-up questionnaire, called the Physician Workflow Supplement.

According to your earlier response, your practice at this location has at least some EHR system. This follow-up survey will be used to understand physicians' experiences with adopting EHRs. Please complete the enclosed questionnaire and return it in the enclosed envelope. You are not being asked to provide any patient information for this follow-up mail survey. You will be contacted two additional times during the study period (for a total of 3 years) to help us understand changes in physician experiences with the costs, benefits, and barriers related to the use of EHRs.

This Supplement is authorized under Section 306 of the Public Health Service Act. Your responses are anonymous and we are required to keep your survey data confidential in accordance with Section 308(d) of the Public Health Service Act and the Confidential Information Protection and Statistical Efficiency Act. All information will be used for statistical purposes only, and you may discontinue your participation at any time.

Your participation in this voluntary survey is very important to us, and will help to provide guidance in developing policies concerning EHRs. We rely on the generous cooperation of physicians like you to provide policy makers, health services researchers, and medical associations the information needed to understand health care delivery in the United States. If you have any questions or comments regarding this study, please call the study coordinator at 1-866-635-4515. General information on the survey may be obtained by visiting the NAMCS participant website at www.cdc.gov/namcs.

Thank you for your valuable assistance with this worthy study.

Sincerely,

Post Card Reminder:

A Physician Workflow questionnaire was mailed to you last week. We are requesting your participation in this important follow-up study of your experience with electronic medical records in office-based practices.

If you have already returned the questionnaire, let me take this opportunity to thank you for your contribution to this research. If you have not, I encourage you to please do so today. Your participation in the study is critical to its success and to improving our understanding of the adoption of electronic medical records systems in the United States.

If you did not receive the questionnaire, or if you have misplaced it, please call our toll-free number at 1-866-635-4515 and we will be happy to send you with another one.

Thank you for your participation.

Second Mailing:

March 1, 2010

Johnny Doedaux, MD Position (if provided, i.e. Director, Chief, etc) Practice Name (if provided) 5 Smith Street Not here, NC 27713-5956

Dear Dr. Doedaux,

Thank you again for your contribution in tracking the adoption of electronic medical records in office-based practices through your recent participation in the National Ambulatory Medical Care Survey (NAMCS): Electronic Medical Records Supplement. About three weeks ago, I mailed you a questionnaire (Physician Workflow Supplement) requesting your participation in a study about physicians' experiences with the use of electronic health records (EHRs). We have not received your response yet.

Since you took the time to complete our initial survey on EHRs, we know that you recognize the importance of obtaining detailed information on the future of electronic medical records in physicians' offices. Please complete the questionnaire at your earliest convenience and return it in the enclosed envelope. You are not being asked to provide any patient information for this follow-up mail survey. You will be contacted two additional times during the study period (for a total of 3 years) to help us understand changes in physician experiences with the costs, benefits, and barriers related to the use of EHRs

As previously mentioned, this Supplement is authorized under Section 306 of the Public Health Service Act. Your responses are anonymous and we are required to keep your survey data confidential in accordance with Section 308(d) of the Public Health Service Act and the Confidential Information Protection and Statistical Efficiency Act. All information will be used for statistical purposes only, and you may discontinue your participation at any time.

Your participation in this voluntary survey is very important to us, and will help to provide guidance in developing policies concerning EHRs. If you have already mailed a completed questionnaire, we thank you very much for your time and effort. You will find the latest EHR findings and more information about the study at http://www.cdc.gov/namcs. If you have any comments regarding this study, please call 1-866-635-4515.

Sincerely,

Third Mailing:

March 1, 2010

Johnny Doedaux, MD
Position (if provided, i.e. Director, Chief, etc)
Practice Name (if provided)
5 Smith Street
Not here, NC 27713-5956

Dear Dr. Doedaux,

Thank you again for your contribution in tracking the adoption of electronic medical records in office-based practices through your recent participation in the National Ambulatory Medical Care Survey (NAMCS): Electronic Medical Records Supplement. Based, in part, on your responses to the prior survey, you have been selected to participate in a follow-up study about the use of electronic health records (EHRs), called the Physician Workflow Supplement. We have not received your response from our prior requests to date.

Since you took the time to complete our initial survey on electronic medical records, we know that you recognize the importance of obtaining detailed information on the future of EHRs in physicians' offices. You are not being asked to provide any patient information for this mail survey. You will be contacted two additional times during the study period (for a total of 3 years) to help us understand changes in physician experiences with the costs, benefits, and barriers related to the use of EHRs. Please complete the questionnaire and return it in the enclosed envelope.

As previously mentioned, this Supplement is authorized under Section 306 of the Public Health Service Act. Your responses are anonymous and we are required to keep your survey data confidential in accordance with Section 308(d) of the Public Health Service Act and the Confidential Information Protection and Statistical Efficiency Act. All information will be used for statistical purposes only, and you may discontinue your participation at any time.

Your participation in this voluntary survey is very important to us, and will help to provide guidance in developing policies concerning EHRs. If you have already mailed a completed questionnaire, are planning to complete the enclosed questionnaire, or decided not to participate, we thank you very much for your time, effort, and contribution to this important study. If you want more details on the EHR findings to date, you can link to our most recent reports: http://www.cdc.gov/namcs. If you have any comments regarding this study, please call 1-866-635-4515.

Sincerely,