**Attachment 4 - NAMCS Physician Feasibility Study Letters/ G1: 12- page, Combined questionnaire**

**DEPARTMENT OF HEALTH & HUMAN SERVICES** **Public Health Service**

 Centers for Disease Control and Prevention

 **National Center for Health Statistics**

#### 3311 Toledo Road

###  Hyattsville, Maryland 20782

Month Day, 2014

**NAMCS**

**Endorsing Organizations**

American Academy of

Ambulatory Care Nursing

American Academy

of Dermatology

American Academy of

Family Physicians

American Academy of

Neurology

American Academy

of Ophthalmology

American Academy of

Orthopaedic Surgeons

American Academy of

Otolaryngology - Head

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American Academy

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American Academy of

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American College

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American Congress of

Obstetricians and

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Association

American Psychiatric

Association

American Society of

Clinical Oncology

American Society of

Plastic Surgeons

American Urological

Association

Association of American

Medical Colleges

National Association of

Community Health Centers

John Doe, MD

Position (if provided, i.e. Director, Chief, etc.)

Practice Name (if provided)

5 Smith Street

Nowhere, NC 99999-1111

Dear Dr. Doe:

You have been randomly selected to participate in a research study conducted by the U.S. Department of Health and Human Services (DHHS) and the National Center for Health Statistics (NCHS) to collect information about physician work environments across many settings. Results from the enclosed research survey will be used to understand the current state of physician practices and key policy issues affecting physicians in the United States.

We are conducting this study as an expansion of the National Ambulatory Medical Care Survey (NAMCS) to include and better understand all settings where physicians are engaged in clinical work. We recognize your time is limited. We request that you please take the time to answer the 35-minute **NAMCS: Physician and Medical Organization Survey** research questionnaire and return it in the enclosed envelope. You are not being asked to provide any patient information for this mail survey.

Data collection for the NAMCS is authorized under Section 306 of the Public Health Service Act (Title 42, U.S. Code, 242k). We are required to keep your survey data confidential in accordance with 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. Also, we intend to do additional health care research by linking your responses from this survey to available administrative medical information and other related records. The NCHS Ethics Review Board has approved this survey.

We look forward to receiving your completed survey on this important public health issue. Participation is voluntary. If you choose not to participate, please answer Questions 1, 2, and 7 on the form and return it to us in the enclosed envelope.

We have routinely relied on the generosity of physicians like you to provide this much needed information to help policymakers, health services researchers, and medical associations understand the current issues with health care delivery in the United States. If you have any questions regarding this study, please call the study coordinator at 1-866-966-1473. Additional information on the survey may be obtained by visiting the NAMCS participant Web site at [www.cdc.gov/namcs](http://www.cdc.gov/namcs).

Thank you for your valuable assistance with this worthy study.

Sincerely,



Charles J. Rothwell

Director

National Center for Health Statistics

**Attachment 4 - NAMCS Physician Feasibility Study Letters/ 2nd Mailing Letter G1: 12- page, Combined questionnaire**

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John Doe, MD

Position (if provided, i.e. Director, Chief, etc.)

Practice Name (if provided)

5 Smith Street

Nowhere, NC 99999-1111

Dear Dr. Doe:

About four weeks ago, I sent you a 35- minute questionnaire entitled the **NAMCS: Physician and Medical Organization Survey** about the current state of physician practices and key policy issues affecting physicians in the United States. As of the date of this letter, we have not received your survey.

I am writing again because of the importance of your participation to us. Although the survey was sent to other physicians, the value of this study is dependent upon obtaining a good representation of physicians’ unique insights and experiences. The data you provide are invaluable to better understand all settings where physicians are engaged in clinical work.

We are required to keep your survey data confidential in accordance with 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). All information will be used for statistical purposes only. Also, we intend to do additional health care research by linking your responses to this survey to available administrative medical information and other related records. Although we hope that you will take part in the study, your participation is voluntary.

If you are no longer in practice or do not spend time in clinical work, please answer Questions 1, 2, and 7 on the form and return it in the envelope provided.

Whether you have already mailed a completed survey, are planning to complete the survey, or decided not to participate, we want to thank you very much for your time, effort, and contribution to this important study. If you have any questions or comments regarding this study, please do not hesitate to contact the study coordinator at 1-866-966-1473.

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Charles J. Rothwell

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National Center for Health Statistics

**Attachment 4 - NAMCS Physician Feasibility Study Letters/ 3rdnd Mailing Letter G1: 12- page, Combined questionnaire**

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This research study is drawing to a close, and one of our concerns is that those physicians who have not responded to the survey may have different experiences from those who have returned surveys. In order to make statistically valid conclusions from this research study, we need to hear from all types of physicians. I urge you to complete the survey and return it in the postage-paid envelope. If you are no longer in practice or do not spend time in clinical work, please answer Questions 1, 2, and 7 on the form and return it in the envelope provided.

Whether you have already mailed a completed survey, are planning to complete the survey, or decided not to participate, we want to thank you very much for your time, effort, and contribution to this important study. If you have any questions or comments regarding this study, please do not hesitate to contact the study coordinator at 1-866-966-1473.

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Charles J. Rothwell

Director

National Center for Health Statistics

**Attachment 4 - NAMCS Physician Feasibility Study Letters/ G2: 8 and 4 page, Physician chooses MOS respondent**

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We are conducting this study as an expansion of the National Ambulatory Medical Care Survey (NAMCS) to include and better understand all settings where physicians are engaged in clinical work. We recognize your time is limited. We request that you please take the time to answer the 20-minute **NAMCS: Physician Survey**  research questionnaire and return it in the envelope provided.

Additionally we included the **NAMCS: Medical Organization Survey**. Please pass the 15-minute survey on to the person you think is best suited to answer questions about your medical organization that employs you at the location you spend the most time engaged in clinical work. The person best suited to answer questions about the medical organization may be you. We request that this person completes the research questionnaire and returns it in the envelope provided.

Data collection for the NAMCS is authorized under Section 306 of the Public Health Service Act (Title 42, U.S. Code, 242k). We are required to keep all survey data confidential in accordance with 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. Also, we intend to do additional health care research by linking your responses from this survey to available administrative medical information and other related records. The NCHS Ethics Review Board has approved this survey.

We look forward to receiving your completed surveys on this important public health issue. Participation is voluntary. If you choose not to participate, please answer Questions 1, 2, and 7 on the Physician form and return it to us in the enclosed envelope. We have routinely relied on the generosity of physicians like you to provide this much needed information to help policymakers, health services researchers, and medical associations understand the current issues with health care delivery in the United States. If you have any questions regarding this study, please call the study coordinator at 1-866-966-1473. Additional information on the survey may be obtained at [www.cdc.gov/namcs](http://www.cdc.gov/namcs).

Thank you for your valuable assistance with this worthy study.

Sincerely,



Charles J. Rothwell

Director

National Center for Health Statistics**Attachment 4 - NAMCS Physician Feasibility Study Letters/ 2nd Mailing Letter G2: 8 and 4 page, Physician chooses MOS respondent –Neither received**

**DEPARTMENT OF HEALTH & HUMAN SERVICES** **Public Health Service**

 Centers for Disease Control and Prevention

 **National Center for Health Statistics**

#### 3311 Toledo Road

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**Endorsing Organizations**

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###  Hyattsville, Maryland 20782

Month Day, 2014

John Doe, MD

Position (if provided, i.e. Director, Chief, etc.)

Practice Name (if provided)

5 Smith Street

Nowhere, NC 99999-1111

Dear Dr. Doe:

About four weeks ago, I sent you two surveys: **NAMCS: Physician Survey** and **NAMCS: Medical Organization Survey.** These surveys are about the current state of physician practices and key policy issues affecting physicians in the United States. As of the date of this letter, we have not received both of your surveys.

I am writing again because of the importance of your participation to us. Although the survey was sent to other physicians, the value of this study is dependent upon obtaining a good representation of physicians’ unique insights and experiences. The data you provide are invaluable to better understand all settings where physicians are engaged in clinical work.

Please complete the 20- minute **NAMCS: Physician Survey** and return it in the envelope provided. Please pass the 15-minute **NAMCS: Medical Organization Survey** on to the person you think is best suited to answer questions about your medical organization that employs you at the location you spend the most time engaged in clinical work. This person who is best suited to answer questions about the medical organization may be you. We request that this person completes the research questionnaire and returns it in the envelope provided.

We are required to keep your survey data confidential in accordance with 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). All information will be used for statistical purposes only. Also, we intend to do additional health care research by linking your responses to this survey to available administrative medical information and other related records. Although we hope that you will take part in the study, your participation is voluntary.

If you choose not to participate, please answer Questions 1, 2, and 7 on the physician form and return it to us in the enclosed envelope.

Whether you have already mailed a completed survey, are planning to complete the survey, or decided not to participate, we want to thank you very much for your time, effort, and contribution to this important study. If you have any questions or comments regarding this study, please do not hesitate to contact the study coordinator at 1-866-966-1473.

Sincerely,



Charles J. Rothwell

Director

National Center for Health Statistics

**Attachment 4 - NAMCS Physician Feasibility Study Letters/ 3rd Mailing Letter G2: 8 and 4 page, Physician chooses MOS respondent –Neither received**

**DEPARTMENT OF HEALTH & HUMAN SERVICES** **Public Health Service**

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#### 3311 Toledo Road

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Community Health Centers

###  Hyattsville, Maryland 20782

Month Day, 2014

John Doe, MD

Position (if provided, i.e. Director, Chief, etc.)

Practice Name (if provided)

5 Smith Street

Nowhere, NC 99999-1111

Dear Dr. Doe:

We have been trying to reach you about an important research study about the current state of physician practices and key policy issues affecting physicians in the United States. Results from the two enclosed questionnaires (**NAMCS: Physician Survey** and **NAMCS: Medical Organization Survey)** will be used to better understand all settings where physicians are engaged in clinical work. We are conducting this as a special expanded “Physician Survey” and “Medical Organization Survey” to the National Ambulatory Medical Care Survey (NAMCS) which routinely collects information about office-based physicians. However, this study collects data from all locations where physicians are engaged in clinical work. You are not being asked to provide any patient information for this mail survey and participation is voluntary. All information will be used for statistical purposes only. Also, we intend to do additional health care research by linking your responses to this survey to available administrative medical information and other related records..

This research study is drawing to a close, and one of our concerns is that those physicians who have not responded to the survey may have different experiences from those who have returned surveys. In order to make statistically valid conclusions from this research study, we need to hear from all types of physicians. I urge you to complete the 20-minute physician survey and return it in the postage-paid envelope. If you are no longer in practice or do not spend time in clinical work, please answer Questions 1, 2, and 7 on the form and return it in the envelope provided. Please pass the 15-minute medical organization survey on to the person you think is best suited to answer questions about your medical organization that employs you at the location you spend the most time engaged in clinical work. This person may be you. Either way we request that this person completes the research questionnaire and returns it in the envelope.

Whether you have already mailed a completed survey, are planning to complete the survey, or decided not to participate, we want to thank you very much for your time, effort, and contribution to this important study. If you have any questions or comments regarding this study, please do not hesitate to contact the study coordinator at 1-866-966-1473.

Sincerely,



Charles J. Rothwell

Director

National Center for Health Statistics

**Attachment 4 - NAMCS Physician Feasibility Study Letters/ 2nd Mailing Letter G2: 8 and 4 page, Physician chooses MOS respondent: Organization not received**

**DEPARTMENT OF HEALTH & HUMAN SERVICES** **Public Health Service**

 Centers for Disease Control and Prevention

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John Doe, MD

Position (if provided, i.e. Director, Chief, etc.)

Practice Name (if provided)

5 Smith Street

Nowhere, NC 99999-1111

Dear Dr. Doe:

About four weeks ago, I sent you two surveys about the current state of physician practices and key policy issues affecting physicians in the United States. As of the date of this letter, we have not received the **NAMCS Medical Organization Survey**.

I am writing again because of the importance of your participation to us. Although the survey was sent to other physicians, the value of this study is dependent upon obtaining a good representation of physicians’ unique insights and experiences. The data you provide are invaluable to better understand all settings where physicians are engaged in clinical work.

Please pass the 15-minute **NAMCS: Medical Organization Survey** on to the person you think is best suited to answer questions about your medical organization that employs you at the location you spend the most time engaged in clinical work. This person may be you. We request that this person completes the research questionnaire and returns it in the envelope provided.

We are required to keep your survey data confidential in accordance with 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). All information will be used for statistical purposes only. Also, we intend to do additional health care research by linking your responses to this survey to available administrative medical information and other related records. Although we hope that you will take part in the study, your participation is voluntary. If you choose not to participate, please indicate this on the blank questionnaire and return it in the envelope.

Whether you have already mailed a completed survey, are planning to complete the survey, or decided not to participate, we want to thank you very much for your time, effort, and contribution to this important study. If you have any questions or comments regarding this study, please do not hesitate to contact the study coordinator at 1-866-966-1473.

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Charles J. Rothwell

Director

National Center for Health Statistics

**Attachment 4 - NAMCS Physician Feasibility Study Letters/3rd Mailing Letter G2: 8 and 4 page, Physician chooses MOS respondent – Organization not received**

**DEPARTMENT OF HEALTH & HUMAN SERVICES** **Public Health Service**

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This research study is drawing to a close, and one of our concerns is that those who have not responded to the survey may have different experiences from those who have returned surveys. In order to make statistically valid conclusions from this research study, we need to hear from all types of physicians. I urge you to please pass the 15-minute medical organization survey on to the person you think is best suited to answer questions about your medical organization that employs you at the location you spend the most time engaged in clinical work. This person may be you.

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Whether you have already mailed a completed survey, are planning to complete the survey, or decided not to participate, we want to thank you very much for your time, effort, and contribution to this important study. If you have any questions or comments regarding this study, please do not hesitate to contact the study coordinator at 1-866-966-1473.

Sincerely,



Charles J. Rothwell

Director

National Center for Health Statistics

**Attachment 4 - NAMCS Physician Feasibility Study Letters/ Invitation Letter G3/Control: 8 page, Physician Survey**

**DEPARTMENT OF HEALTH & HUMAN SERVICES** **Public Health Service**

 Centers for Disease Control and Prevention

 **National Center for Health Statistics**

#### 3311 Toledo Road

###  Hyattsville, Maryland 20782

**NAMCS**

**Endorsing Organizations**

American Academy of

Ambulatory Care Nursing

American Academy

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Neurology

American Academy

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American Society of

Clinical Oncology

American Society of

Plastic Surgeons

American Urological

Association

Association of American

Medical Colleges

National Association of

Community Health Centers

Month Day, 2014

John Doe, MD

Position (if provided, i.e. Director, Chief, etc.)

Practice Name (if provided)

5 Smith Street

Nowhere, NC 99999-1111

Dear Dr. Doe:

You have been randomly selected to participate in a brief research study conducted by the U.S. Department of Health and Human Services (DHHS) and the National Center for Health Statistics (NCHS) to collect information about physician work environments across many settings. Results from the enclosed survey will be used to understand the current state of physician practices and key policy issues affecting physicians in the United States.

We are conducting this study as an expansion of the National Ambulatory Medical Care Survey (NAMCS) to include and better understand all settings where physicians are engaged in clinical work. We recognize your time is limited. We request that you please take the time to answer this 20-minute **NAMCS: Physician Survey** research questionnaire and return it in the enclosed envelope.

Data collection for the NAMCS is authorized under Section 306 of the Public Health Service Act (Title 42, U.S. Code, 242k). We are required to keep your survey data confidential in accordance with 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. Also, we intend to do additional health care research by linking your responses from this survey to available administrative medical information and other related records. The NCHS Ethics Review Board has approved this survey.

We look forward to receiving your completed survey on this important public health issue. Participation is voluntary. If you choose not to participate, please answer Questions 1, 2, and 7 on the form and return it to us in the enclosed envelope.

We have routinely relied on the generosity of physicians like you to provide this much needed information to help policymakers, health services researchers, and medical associations understand the current issues with health care delivery in the United States. If you have any questions regarding this study, please call the study coordinator at 1-866-966-1473. Additional information on the survey may be obtained at [www.cdc.gov/namcs](http://www.cdc.gov/namcs).

Thank you for your valuable assistance with this worthy study.

Sincerely,



Charles J. Rothwell

Director

National Center for Health Statistics

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Month Day, 2014

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Sincerely,



Charles J. Rothwell

Director

National Center for Health Statistics

**Attachment 4 - NAMCS Physician Feasibility Study Letters/ Post Card Reminder for all groups:**

Last week, a questionnaire was mailed to you requesting your participation in an important research study to understand the current state of physician practices and key policy issues affecting physicians in the United States.

If you have already returned the questionnaire, let me take this opportunity to thank you for your contribution to this research. If not, please do so today. Your participation in the study is critical to its success and to improving the understanding of key issues affecting physicians in the United States.

If you did not receive the questionnaire, or if you have misplaced it, please call our toll-free number at 1-866-966-1473 and we will be happy to send you another one.

Thank you for your participation.



Charles J. Rothwell

Director

National Center for Health Statistics