2015 Online Provider Survey REV 1/29/21

BACKGROUND

The 2015 Online Provider Survey is an online survey of primary care physicians, specialists and practice managers in the offices of primary care and specialist private practices.

TOPICS

Technology Health system change Provider Communications

Method and Sample quotas

Participant Types and Counts:

Primary Care physicians in small practices with 1-5 physicians (n=200)

Primary Care physicians in larger practices with over 5 physicians (n=200)

Specialist physicians in small practices with 1-5 physicians (n=200)

Specialist physicians in larger practices with over 5 physicians (n=200)

Practice managers in small practices with 1-5 physicians (n=200)

Practice managers larger practices with over 5 physicians (n=200)

<u>Practice Characteristics:</u> specialty (mix); years in practice =3+; Percent of time direct patient care = 75%+; percent revenue from Medicare=cap of no more than 20% of the sample can have Medicare revenues of less than 20%

[Within each participant type:] Minimum of 10% in ACO or Patient Centered Medical Home **PRIMARY CARE:**

QUOTA: fixed, weight proportional to universe

MONITOR: GET A MIX

SPECIALISTS:

OUOTA: fixed, weight proportional to universe

MEDICAL SPECIALTIES

50%, MONITOR: GET A MIX.

SURGERY AND SURGICAL SPECIALTIES

50%, MONITOR: GET A MIX

<u>Outcome Measures</u>: Medicare awareness and knowledge; awareness and participation in CMS programs and initiatives; usage of CMS and non-CMS communications, social media and other channels

Segmentation of physicians and physician practices

Consider separate segmentations for physicians as individuals and physician practices as entities.

Segment by social media use, CMS website use

Segment by awareness and use of CMS initiatives

<u>Analysis</u>: Compare subsamples on variables such as years in practice; practice size; region; respondent type; primary/specialist; urban density; practice ownership and derived segment. Also, identify key questions to be answered by this dataset and design analysis accordingly.

See practice structure list. AMA 2012

2015 PROVIDER SURVEY SCREENING QUESTIONS

We are conducting a survey for the Center for Medicare and Medicaid Services (CMS) to better understand what medical professionals and their patients need to know about Medicare, and to learn how to best meet these needs.

Your input is very important. The information collected will be used for research purposes only. At no time will we attempt to sell you anything. Your participation in this survey is anonymous and voluntary. Your individual answers will remain confidential and reported only in the aggregate. Click here to view our Privacy Policy.

Thank you very much for your time.

S1.	 Which of these best describes your role? [DO NOT Primary Care Physician Specialist Practice Manager/Office Manager None of the above Don't know 	Refer to quotas above TERMINATE TERMINATE	DP2
S2.	[If Primary Care Physician or Specialist] Are you be certification?YesNo	ard certified or eligible for board TERMINATE	
S3.	[If Primary Care Physician or Specialist] Including y your primary practice (the place where you spend t [If Practice Manager/Office Manager] How many ph (the place where you spend the most time as a Pra Number of physicians: [RECORD NUMBER 1–	ne most time seeing patients)? hysicians are in your primary practice ctice Manager/Office Manager)?	DP2
S4.	[If Primary Care Physician or Specialist] Is your prinspend the most time seeing patients) part of a large locations? [If Practice Manager/Office Manager] Is your prima spend the most time as a Practice Manager/Office practice with multiple locations? Yes No	er group practice with multiple ry practice (the place where you	

S5. [If S4=Yes and Primary Care Physician or Specialist] Including yourself, how many

[If S4=Yes and Practice Manager/Office Manager] How many physicians are in the

physicians are in the overall group practice, including all offices?

Number of physicians: [RECORD NUMBER 1-9999]

overall group practice, including all offices?

DP2

S6.	 Which of the following best describes the ownership arrangement of you Sole proprietorship Physician partnership 3rd-party owned (e.g. Health System, Hospital, Insurer) Government owned Other (please specify) Don't know 	r practice? TERMINATE	DP2
S7.	[If Primary Care Physician or Specialist] How many years have you bee (excluding residency or fellowship training)? • Years [TERMINATE IF <3 YRS] (Weight to AMA Master List proportions for years in practice)	en in practice	SB04

DP2

S8. [If Primary Care Physician or Specialist] What is your primary medical specialty? [DO NOT ACCEPT MULTIPLES]

See AMA 2012 Specialties

[Hitech SURVEY SPECIALIST PRECODES] (ALPHABETIZE CODES IN SURVEY PROGRAM; ONLY SHOW CODES 01-04, 99 FOR S1=PRIMARY CARE PHYSICIAN AND SHOW CODES 10-99 FOR S1=SPECIALIST)

PRIMARY CARE:	QUOTA: SEE ABOVE	
Internal medicin	e01	
Family medicine	and general practice02	
Obstetrics and g	ynecology (Ob/Gyn)03	
Pediatrics	04	
SPECIALTIES:	QUOTA: SEE ABOVE	
Allergy and imm	unology10	
Cardiology and c	ardiac surgery11	
Chiropractor	12	
Colon and rectal	surgery	
Dermatology	16	
Endocrinology		
Gastroenterolog	y18	
General surgery		
Hematology/ond	ology20	
Infectious diseas	e21	
Nephrology		
Neurology	23	
Ophthalmology	24	
Optometrist	25	
Orthopedic surge	ery26	
Otolaryngology (ENT)27	
Plastic and recor	structive surgery28	
Podiatry	29	
Psychiatry	30	
Pulmonary disea	se/pulmonary and critical care31	
Rheumatology	32	
Surgery		
Urology	34	
Anesthesiology		
Radiology	38	
Rehabilitation	39	
ER/trauma/critic	al care40	
Geriatrics	41	
Other Specialist	(specify):	
Don't know/Refu	ısed (VOL.)99	TERMINATE

S9.	(Us	which state is your primary practice located? _ se drop down box. Limit to 50 US states and oth	ner. Tern	 ninate if other.)	DG11
	(Sti	ratify to AMA Master List proportions)?			CD1
S10.	-	Primary Care Physician or Specialist] What perdictice (i.e., direct patient care) as opposed to teather to 24% of your working time 25% to 49% of your working time 50% to 74% of your working time 75% or more of your working time Don't know	_		SP1
S11.		pproximately what percent of your primary prime from Medicare?	oractice's	s revenues would you say	
	•	Zero to 19%	Сар	Monitor and cap at 20% of any subgroup from Quota Group on Page 1.	SP2
	•	20% to 39% 40% to 59% 60% to 79% 80% or more Don't know		Mix	
S12.		oout what percent of your primary practice's te insurance program? Zero to 19% 20% to 39% 40% to 59% 60% to 79% 80% or more Don't know	revenue	es come from Medicaid, the	SP2
S13.	Doe •	es your primary practice currently accept new M Yes No Don't know	ledicare p	patients?	SP3
S14.	Doe •	es your primary practice currently accept new M Yes No Don't know	ledicaid p	patients?	SP3
[S15.	Org [If I	Primary Care Physician or Specialist] Are you pe ganization (ACO)? Practice Manager/Office Manager] Are the phys countable Care Organization (ACO)?	_	part of art / toodaritable Gare	BP1
	•	Yes No		nt toward target (see first page tinue asking question)	

S16. [If Primary Care Physician or Specialist] Are you personally part of a Patient Centered Medical Home (PCMH)?

[If Practice Manager/Office Manager] Are the physicians in your practice part of a Patient Centered Medical Home (PCMH)?

Yes

Count toward target (see first page. BP1 Continue asking question)

No

IF PASSED -- Congratulations – you are eligible to take this important survey regarding the Centers for Medicare and Medicaid Services (CMS). Your responses will help the Department of Health and Human Services improve services to you and your patients.

IF TERMINATED – Thank you. Based on your responses you aren't eligible for this survey.

2015 PROVIDER SURVEY QUESTIONNAIRE

TECHNOLOGY

None of the above

Pleas	 te answer the following questions about your use of technology. In general, how quickly do you adopt new technologies, such as new electronics, software, or apps? Very late to adopt new technology Wait and see how it works for other people In the middle, neither early nor late adopting Slightly ahead of the curve in trying new technology One of the first to adopt new technology 	DMG4A
2.	 Which of the following devices do you use in your practice? (Select all that apply.) A smart phone like iPhone, Blackberry, or Android iPad or other tablet computer None of the above 	BP1
3.	Does your primary practice provide TeleHealth or mHealth, meaning that you provide professional medical advice over the phone, smart phone, or computer? • Yes • No • Don't know	BP1
4.	Does your practice have a website? • Yes • No • Don't know	BP1
5.	 [If practice has a website] Which of the following best describes the practice's website? (Select all that apply.) Provides general information (hours, location, etc.) Provides interactive features to patients (schedule appointments, pay bills, etc.) Allows for secure two-way communication between patients and providers, such as e-mail Includes access to a secure online patient portal 	K1

- 6. Thinking about Electronic Health Records (EHR), which of the following statements BEST DMG4A describes your primary practice's current position? (Select only one response.)
 - a. Have not considered acquiring an electronic health record at all
 - b. Have considered and decided <u>not</u> to acquire an electronic health record system at all
 - c. Have considered possibly acquiring an electronic health record at some point in the future
 - d. Have thoroughly investigated the factors involved in acquiring an electronic health record, for implementation in the near future
 - e. Have already acquired an electronic health record and are now in the implementation stage
 - f. Have completed training and fully implemented our electronic health record and are now maintaining and improving our use of it
- 7. [If have completed training and fully implemented (6=F)]

ING7

How does your primary practice share data electronically through the EHR (not including Fax)? [ROTATE] (Select all that apply.) We share data...

- a. ... with a local or state Health Information Exchange (HIE)
- b. ...within your own practice site
- c. ...among different sites within your medical group*
- d. ...with pharmacies outside your medical organization
- e. ...with hospitals outside your medical organization
- f. ...with labs outside your medical organization
- g. ...with specialists outside your medical group
- h. ...with patients and caregivers using an online Personal Health Record (PHR)
- * asked of non-solo practices (S4=Yes)

NEW PROGRAMS AND INITIATIVES

The next series of questions focus on some new CMS initiatives.

8. Typically, which of the following best describes when you prepare for upcoming changes to the U.S. healthcare system? (select one)

DMG4A

- Well in advance of the change taking effect
- Immediately prior to the change taking effect
- When the change takes effect
- After the change takes effect
- 9. When you are considering adopting new programs or practices, which of the following is the MOST important factor? Which is the LEAST important factor? (randomize)
 - Check one as MOST important
 - Check one as LEAST important
- a. MOST LEAST IMPORTANT IMPORTANT
 - a. Adherence to sound business practices
 - b. Well supported evidence in peer-reviewed journals
 - c. Potential for improving patients' health outcomes

1	10. How favorable is your opinion of each of the following programs (randomize a-f; show g-k not randomized at the end of the series)							
		Very favorable	Somewha t favorable	Somewhat unfavorable	Very unfavorable		I am not familiar with this program	ATG7 AWG2
	a. Accountable Care Organization (e.g., New Generation ACOs, Pioneer ACO, Medicare Shared Savings Program, or Advance Payment ACO Model) or any program in which providers are compensated partly based on measurable quality						. 0	
	b.Patient Centered Medical Home: A primary care practice in which providers are compensated for coordinating all of							

the netional health			Ī	
the patient's health				
care				
c. Open Payments,				
also known as the				
Physician				
Payments				
Sunshine Act:				
Reporting of				
compensation to				
providers by				
pharmaceutical				
companies to CMS				
-				
d.The Health				
Insurance				
Marketplace:				
Offering consumers				
the ability to shop				
for affordable				
coverage and				
subsidies (also				
known as health				
insurance				
exchanges)				
e.Medicare durable				
medical equipment				
supplier program:				
Known as the				
Competitive				
Bidding Program				
for durable medical				
1 1				
equipment,				
prosthetics,				
orthotics, and				
supplies				
(DMEPOS)				
f. Medicare Part D				
Prescriber				
Enrollment Rule				
4159: Part of the				
Medicare Part D				
Fraud Prevention				
Program				
g.Physician Quality				
Reporting System				
(PQRS)				
h.ICD-10: The new				
coding system to				
replace ICD-9				
i. Medicare e-				
Prescribing				

	Ince	entive Program							
		Medicare and							
	•	dicaid Fraud							
		vention							
	Pro	gram							
		er quality							
		orting							
	-	uirements (e.g.,							
	-	e, local, insurer)							
		-, ·- · · · · · · · · · · · · · · · · ·					1		
								╗	
1:	1. [If a	ware of Open Pa	vments/Sun	shine Act an	d Primary Care	Physician or	Specialist1	BF	P1
	-	garding Open Pay	-		-	-			
	_	ew your informati				otorou umoug.			
		ware of Open Pa		•		ager/Office Ma	anagerl		
	-	garding Open Pay	-			-			
		stered through Ci							
	•	Yes	ivio to reviet		ation before it	is made public	· ·	_	
	•	No							
		110							
12	2. [If r	egistered to review	w informatic	n and Primai	y Care Physic	ian or Speciali	st] Did you	BF	P1
	-	k up your name to			-	•			
		egistered to review		•	•	•			
	_	physicians in you			_		-		
		m on the public w	•						
	•	Yes							
	•	No							
13	3. [If a	ware of Health In	surance Ma	rketplace and	d Primary Care	Physician or	Specialist]:		
	Do	you tell patients a	bout the He	alth Insuranc	e Marketplace	as a place to	shop for		
	affo	rdable health insu	ırance?						
	•	Yes							
	•	No							
[If	aware o	of the Medicare di	urable medi	cal equipmer	t supplier prog	ram] Regardir	ng your		
pa	atients w	ho require durabl	le medical e	quipment or :	supplies				
14	4A. Hov	v often can you re	adily obtain	DMEPOS ite	ems covered by	y the Competit	ive Bidding	BC	G3
	Pro	gram?							
	•	Always							
	•	Usually							
	•	Sometimes							
	•	Never							
14	4B. Ha	s the quality of the	e medical ed	quipment or s	upplies since t	he DMEPOS (Competitive	ВС	G3
	Bide	ding Program star	ted						
	•	Improved							
	•	Remained about	the same						
	•	Worsened							
	•	Don't know							
								-	

14C. Has the quality of service provided by the Competitive Bidding Program contract suppliers...

BG3

- Improved
- · Remained about the same
- Worsened
- Don't know
- 15. [If aware of Part D Prescriber Enrollment rule 4159, part of the Medicare Part D Fraud Prevention program and Primary Care Physician or Specialist] Are you currently enrolled as a Medicare Part D prescriber (under Part D Prescriber Enrollment Rule 4159)?

BP1/SP3

[If aware of Part D Prescriber Enrollment rule 4159, part of the Medicare Part D Fraud Prevention program and Practice Manager/Office Manager] Are the physicians in your practice currently enrolled as Medicare Part D prescribers (under Part D Prescriber Enrollment Rule 4159)?

- Yes
- No
- Don't know
- 16. In your opinion, which of the new initiatives are most likely to improve health outcomes for the United States as a whole? (Select up to 3)

PG10

- Accountable Care Organization (e.g., New Generation ACOs, Pioneer ACO, Medicare Shared Savings Program, or Advance Payment ACO Model) or any program in which providers are compensated partly based on measurable quality
- Patient Centered Medical Home: A primary care practice in which providers are compensated for coordinating all of the patient's health care
- Open Payments, also known as the Physician Payments Sunshine Act: Reporting of compensation to providers by pharmaceutical companies to CMS
- The Health Insurance Marketplace: Offering consumers the ability to shop for affordable coverage and subsidies (also known as health insurance exchanges)
- Medicare durable medical equipment supplier program: Known as the Competitive Bidding Program for durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS)
- Medicare Part D Prescriber Enrollment Rule 4159: Part of the Medicare Part D Fraud Prevention Program
- Physician Quality Reporting System (PQRS)
- ICD-10: The new coding system to replace ICD-9
- Medicare e-Prescribing Incentive Program
- The Medicare and Medicaid Fraud Prevention Program
- Other quality reporting requirements (e.g., state, local, insurer)
- Other (please specify)
- None
- Don't know

QUALITY PROGRAMS

- 17. [If Primary Care Physician or Specialist] When you admit a Medicare patient to the hospital for a <u>non-emergency</u> issue, which statement best describes the decision process? [ROTATE] [select only one response]
- DMG4A
- My patient requests a particular hospital and I try to accommodate their preference
- I provide written material or online information to review with the patient and the patient decides
- I offer options for discussion, and the patient and I decide together
- I recommend the hospital I feel is best, which the patient generally accepts
- 18. [If Primary Care Physician or Specialist] When you must admit a Medicare patient to the hospital on a <u>non-emergency</u> basis, how often do you discuss hospital quality with them?

BG3

- Always
- Usually
- Sometimes
- Never
- 19. Please indicate how favorable you are towards the following interactive tools available for consumers on Medicare.gov.

Very Somewhat Somewhat Very I am not favorable favorable unfavorable unfavorable familiar ATG7 with it AWG2

a. Hospital Compare:

An interactive tool on Medicare.gov that provides information about how well hospitals provide care for certain conditions

b. Nursing Home

Compare: The interactive tool on Medicare.gov that provides information to consumers about the quality of nursing homes

c. Plan Finder: An

interactive tool on Medicare.gov that provides information to help consumers choose a Medicare Part D or Medicare Advantage plan

d. Physician Compare:

A Medicare web based tool that helps patients choose doctors in their locale

e. Dialysis Compare:

A Medicare web based tool that helps patients find dialysis centers in their locale

20. Please indicate how favorable you are towards the CMS Preventive Care program, offering **preventive services** to Medicare patients.

BG3

DMG4A

- Very favorable
- Somewhat favorable
- Somewhat unfavorable
- Very unfavorable
- I am not familiar with it
- 21. [If Primary Care Physician or Specialist] When discussing **preventive services** with patients, which <u>one</u> of the following is most often true? [DO NOT ACCEPT MULTIPLES]
 - .. ______
 - You usually raise the topic of which preventive screenings the patient is due to have
 Patient or caregiver usually raises the topic
 - You and the patient/caregiver raise the topic to about an equal extent
 - You don't typically discuss preventive services with patients or caregivers
 - Someone else manages this
 - Don't know

INFORMATION FOR HEALTHCARE PROFESSIONALS

22. To your knowledge, which of the following services are offered **free of charge** to patients under Original Medicare (Medicare Parts A and B only, and not Medigap or any other supplemental plan)? Please check all that apply. [ACCEPT MULTIPLES]

Check all that apply

KG8

- Alcohol misuse screening/counseling
- Bone mass measurement
- Cancer screenings
- · Cardiovascular or cholesterol screening
- Depression screening
- Diabetes screening and management
- Glaucoma test
- Immunizations and shots
- Obesity screening & counseling
- One time "Welcome to Medicare" Preventive Care Visit
- Smoking cessation counseling
- None of these
- 23. To your knowledge, does Medicare or the Social Security Administration provide any financial help to seniors who cannot afford Part D/prescription drug coverage?

KG8

- Yes
- No
- Don't know

Next, please think about the information resources available to healthcare professionals like yourself.

24. Please indicate which of the following resources you have used in the past year. (Select

Check all that apply

- National, state, or local medical conferences or meetings
- b. Professional membership organizations
- c. Professional journals (paper or online)
- d. Providers and/or staff in your practice
- e. Outside consultants (practice consultant, billing specialist)
- f. www.medscape.com
- g. Private insurance companies
- h. Medical Group Management Association (MGMA)
- i. Hospitals and health systems
- j. EHR vendor
- k. Pharmaceutical or medical device/supply reps
- I. Training sponsored by manufacturers
- m. Other online information sources
- 25. Please indicate which of the following CMS resources for information specifically about Medicare or other CMS programs and initiatives you have used in the past year. (Select all that apply.) [ROTATE]

ISG2/ ISG3

Check all that apply

- a. www.cms.hhs.gov, the general website for the Centers for Medicare and Medicaid Services
- b. www.hhs.gov, the website of the US Department of Health and Human Services
- c. www.medicare.gov, the US government site for people with Medicare
- Medicare Learning Network (MLN), providing email updates, education, information, and resources for health care professionals
- e. MLN Connects, National Provider Calls for Medicare providers and suppliers
- f. <u>www.Healthcare.gov</u>, the Health Insurance Marketplace website
- g. (CMS) Open Door Forums
- h. A newsletter from CMS
- 26. In your primary practice, who is responsible for information seeking and sharing important information about new CMS policies and initiatives? (check all that apply)

DMG1

- Myself
- [If Primary Care Physician or Specialist] Other clinicians
- [If Practice Manager/Office Manager] Clinicians
- [If Primary Care Physician or Specialist] Practice Manager(s)/Office Manager(s)
- [If Practice Manager/Office Manager] Other Practice Manager(s)/Office Manager(s)
- A central department at a hospital or medical group
- A contractor or consultant
- Other (specify title)
- No one in particular
- Don't know
- 27. In general, how strongly do you agree or disagree that you <u>have all the information</u> needed regarding CMS programs and initiatives including Medicare?
 - Strongly agree
 - Somewhat agree
 - Somewhat disagree
 - Strongly disagree
- 28. In general, how strongly do you agree or disagree that CMS provides information that is... PG9
 (rotate) Strongly Somewhat Somewhat Strongly
 agree agree Disagree Disagree
 - a. The right level of detail
 - b. Accurate
 - c. Easy to understand
 - d. [If Primary Care Physician or Specialist] Relevant for your specialty [If Practice Manager/Office Manager] Relevant for your role
 - e. Easily accessible
 - f. Timely
 - g. Up-to-date

KG2

29. How often do you use these social media in your medical practice? (randomize)

AWG2+ ISG3

ISG5

	How often used?								
Socia	ıl media:	Once a week or more	More than once a month	About once a month	Less than once a month	One time only	Never	I am not aware of it	
a.	Facebook								
b.	Twitter								
C.	Blogs								
d.	SERMO								
e.	Doximity								
f.	YouTube								
g.	Other, specify								

- 30. In the future, how would you prefer that CMS communicate with you about important information about CMS programs and initiatives, including Medicare? (check all that apply)
 - A CMS website
 - A CMS mobile app
 - A CMS newsletter
 - Block
 - Email that you subscribe to
 - Fax
 - Journal article (online or print)
 - Letter sent by US Mail
 - Medicare CME training seminar
 - Medscape
 - Podcast
 - Regional or local meeting
 - Social media: Facebook
 - Social media: SERMO
 - Social media: Twitter
 - Webinar
 - Other (specify) ______

ABOUT MEDICARE

31. In general, please indicate how strongly you agree or disagree with each statement about Medicare.

(rotate) Strongly Somewhat Somewhat Strongly NA agree agree disagree disagree

- a. Medicare provides access to better healthcare
- Medicare provides tools to help families make better health care decisions
- c. Medicare is your partner
- d. Medicare is innovative
- e. Medicare is an organization you trust
- f. Medicare helps patients manage their health
- g. Medicare is up-to-date
- h. Medicare is responsive when you call
- Medicare is helpful when you have a question

SATISFACTION WITH PROFESSION

- 32. Overall, how satisfied are you with your current profession?
 - Very satisfied
 - Somewhat satisfied
 - Not very satisfied
 - Not at all satisfied

DEMOGRAPHICS

The final few questions are for classification purposes.

- 33. Which of the following categories best describes the size of the city where your primary practice operates?
 - Large city
 - Mid-size city
 - Small city
- 34. Which of the following categories best describes the location where your primary practice operates?
 - Suburban
 - Rural
 - Urban
- 35. Which of the following categories best describes your primary practice?

DP2

DP2

- Single specialty
- · Multi-specialty with primary and specialty care
- Multi-specialty with primary care only
- Multi-specialty with specialty care only
- None of the above
- Don't know

36. [If Primary Care Physician or Specialist] At what type of facility is your practice primarily based? (Even though you may treat patients at multiple locations, indicate where the majority of your practice is based.)

DP2

[If Practice Manager/Office Manager] At what type of facility is your practice primarily based? (Even though you may work as a Practice Manager/Office Manager at multiple locations, indicate where the majority of your practice is based.)

[DO NOT ACCEPT MULTIPLES]

- An office-based private practice
- Community/teaching hospital
- Community/non-teaching hospital
- University-affiliated hospital
- Other (please specify)
- 37. Are you employed by a hospital or health system?
 - Yes
 - No
 - Don't know
- 38. An Integrated Delivery Network (IDN) or Integrated Delivery System (IDS) is a network of hospitals, physicians, other providers, insurers and/or community agencies that engage with each other to provide coordinated care to patients in a particular market. Is your primary practice part of an integrated delivery network or system?
 - Yes
 - No
 - Don't know
- 39. Please indicate any particular nationality, ethnic or racial groups your primary practice specializes in serving. (Select all that apply.)

DP2

- Black/African American
- American Indian/Pacific Islander
- Asian
- Caucasian
- Hispanic
- Other (specify)
- None
- 40. [If Primary Care Physician or Specialist] Which of the following best describes your role in the practice?
 - I see patients exclusively and am not involved in managing my practice
 - I have some involvement in managing my practice
 - I am highly involved in managing my practice
 - I am the sole person who manages my practice
- 41. [If Primary Care Physician or Specialist] Approximately how many patients do you see in an average week?
 - Patients in a typical week: [RECORD NUMBER 1–999]
- 42. Please indicate your gender.

DG1

- Male
- Female

- 43. What is your age?
 - [Record age and code into census age bands]
- 45. May we contact you to conduct additional research studies in the future? Whether you choose to participate in those studies is up to you. We will not share your information with anyone for marketing purposes.
 - Yes
 - No

Thank you very much for your time.

DG2