

Overall Comment on Providing Incentives for Participation in Marketing Research.

The research in this package is marketing research, designed for fast turn-around to inform key Agency communication decisions. Providing incentives for participation in social research is not uncommon and is being used increasingly as one component of improving overall response rates and reducing non-response bias (see, e.g., Massey & Tourangeau, 2013; Singer & Ye, 2013) even in academic and government-sponsored social research. In the marketing research arena, providing participant incentives is a well-established and accepted standard practice in the healthcare industry. Appropriate incentives are viewed as an important tool in the successful completion of these marketing research studies. In our experience, in order to achieve a representative sample of required participants in a timely and cost-effective manner, projects must provide incentives at levels that attract, retain, and adequately compensate respondents for their time and effort, especially physicians. The use of incentives to bolster participation applies to both survey and qualitative research. Indeed, incentives improve the quality and efficiency of research in a number of ways, including reducing non-response bias, improving participation by those in hard-to-reach groups, and increasing the efficiency and cost-effectiveness of research (e.g., David & Ware, 2014; Singer & Ye, 2013).

Many research firms recognized this need and developed participant panels that can provide a sampling source for thematically and methodologically diverse studies. In contrast to ad hoc recruitment, use of such panels can significantly reduce the costs associated with locating appropriate respondents and ensure their immediate availability. Economic and research success with panels is strongly linked with screening, segmentation, and motivational issues which assure panelist availability. Appropriate incentives play a key role in these efforts. The ideal amount of the incentive will vary depending on the target audience and time and effort required for participation. These incentive levels are typically established by market rates for specific audiences in specific locations, and are typically outside the control of the Agency or its primary contract agent. In developing our mini-Supporting Statements, we estimated incentive levels that we believed were reasonable given the goals of our proposed studies and our understanding of market conditions, as indicated in our generic Supporting Statement. As we implement the studies, we may find that there will be some shifts in incentive levels due to evolving market conditions and other aspects of panel maintenance, but we expect these changes to be relatively minor in the overall conduct of any particular study.

Specific Justification for Use of Incentives in Physician Online Survey.

Surveys involving healthcare providers have been particularly affected by declining response rates in recent years. Academic researchers have called for increased efforts to improve this situation. Incentives for participation have been among the most successful of evidence-based interventions in reversing this trend without

introducing bias (see Cho et al., 2013 for a meta-analysis of recent studies). In one recent study, for example, Dykema and colleagues (2011) found that online response rates were highest among physician participants promised \$100 and \$50 for completion of an online survey, as compared with no incentive or entry into a \$200 lottery. A small \$2 pre-incentive had no effect on participation and was not regarded as cost-effective. A postal pre-notification letter increased rates somewhat, but this effect was much smaller than the promised incentive. Taken together, these findings support the use of larger incentives as a way of increasing participation among physicians in web-based surveys. In the proposed research, we will use a panel of physicians and healthcare providers already screened to meet our inclusion criteria. While we are not paying these participants directly, the survey research firm, Research Now, that maintains the panel provides compensation for voluntary completion of surveys. Incentive rates are impacted by the difficulty associated with a particular audience and by the length of the survey. The incentive for this 20 minute survey among three audiences (i.e., Primary Care Providers, Specialists, and Office Managers) averages about \$50 per completed survey. This amount is somewhat lower than the rate we initially estimated. We believe this is a very reasonable rate of compensation for highly skilled professionals, commensurate with similar studies, and a very cost-effective way to accomplish the goals of this market research study of provider attitudes and perceptions of key Agency initiatives.

References

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