

Attachment N: NAMCS Brochure

Why are you collecting patient medical record numbers in the instrument if you eventually remove it from the data?

We ask that you release the medical record number so that if we need to contact you regarding missing or conflicting information from the abstracted electronic form, we can give you the unique number. This will enable you to locate their patient's medical record without disclosing their name to us. In addition, if Census Bureau staff needs to move from one data record-keeping system during abstracting, they can easily find a patient's medical record. Finally, the medical record number will be used for a reabstraction study to evaluate the reliability of the abstraction process.

Under what authorization do you collect this information?

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. The Centers for Disease Control and Prevention's (CDC) National Center for Health Statistics (NCHS) is legally bound to assure confidentiality of all responses, including any information that might result in a physician's practice or hospital being identified. The data files that are released for research do not include any provider or patient identifying information. 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 NCHS, sign an affidavit making them subject to the Privacy Act, the Public Health Service Act, and other laws that require data to be protected.

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.

Is participation mandatory?

No, participation is completely voluntary.

What are the benefits of participating?

By participating in NAMCS, you will be able to contribute to the national description of office-based and CHC-based patient care. Participation will result in more reliable data which will permit researchers, including other health care providers, to better assess the current state of ambulatory medical care utilization and provision. NAMCS fulfills an ongoing need for national statistics on ambulatory care that can be used to improve professional education curricula for health care workers, formulate health policy, inform medical practice management, and evaluate quality of care. Failure to participate lessens the accuracy of data used by physicians and other researchers.

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

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CS246152-A

National Ambulatory Medical Care Survey

We need your help to
produce valid public
health information

NAMCS

Please consider
participating
in NAMCS



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
National Center for Health Statistics

Frequently asked questions about NAMCS

What is NAMCS?

The National Ambulatory Medical Care Survey (NAMCS) is the Nation's foremost study of ambulatory care provided at physicians' offices and has been conducted since 1973. It focuses on visits made to nonfederally employed office-based physicians who are primarily engaged in direct patient care. Beginning in 2006, the survey also includes an annual sample of visits to community health centers (CHCs). NAMCS provides information on patient, provider, and visit characteristics. Participants in NAMCS are asked to provide data on approximately 30 patient visits during a randomly assigned 1-week reporting period. The encounter information includes items on patient's age, sex, and race; physician diagnosis; diagnostic and therapeutic services ordered or provided; and medications prescribed or provided.

Who is eligible to participate?

Nonfederally employed physicians (excluding those in the specialties of anesthesiology, radiology, and pathology) who are classified by the American Medical Association or the American Osteopathic Association as primarily engaged in office-based patient care are randomly chosen to participate in NAMCS. Physicians and nonphysician clinicians (i.e., physician assistants, nurse practitioners, nurse midwives) working at CHCs are also eligible to participate.

How are the data used?

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. These data

are widely used by health care researchers, medical schools, policy analysts, congressional staff, the news media, and many others to improve our knowledge of medical practice patterns. The data are disseminated in the form of public health reports, journal articles, and microdata files.

Why does the Health Insurance Portability and Accountability Act Privacy Rule apply to the data collected for NAMCS?

The Privacy Rule applies to data collected for 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. Although 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. We are legally bound to ensure the confidentiality of your responses, including anything that might result in a practice being identified. The data files released for research do not include any identifying provider or patient information. Beginning in 2012, we began collecting patients' medical record numbers. While this is considered directly identifiable data, provisions of the Privacy Rule still permit collection of this type of data. Medical record numbers are removed from the file before final data transmission, and you have the ability to choose which data is ultimately released. As described above, the rule allows you to disclose both types of information for public health and research purposes.

The logo for the National Ambulatory Medical Care Survey (NAMCS) is displayed in a large, stylized font. The letters 'NAMCS' are rendered in a dark teal color with a slight 3D effect and a reflection below them. Behind the letters, there is a graphic of a DNA double helix structure, with pink and white spheres representing the base pairs and a light blue background. The entire graphic is set against a dark teal background with a subtle pattern of small, light-colored dots.