**Attachment L: NAMCS Advanced Letters**

**U.S. Department of**

**Health and Human Services**

Centers for Disease Control and Prevention

National Center for Health Statistics 3311 Toledo Road, Room 3409

Hyattsville, Maryland 20782

Month, Date, Year

Name Here, Additional Info, Street Address, City, State, Zip

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 Association of Orthopaedic Surgeons

American Academy of Otolaryngology–Head and Neck Surgery

American Academy of Pediatrics

American Academy of Physical Medicine and Rehabilitation

American College of Cardiology

American Congress of Obstetricians and Gynecologists

American College of Physicians

American College of Preventive Medicine

American College of Surgeons American Osteopathic Association American Psychiatric Association American Society of Clinical Oncology American Society of Plastic Surgeons American Urological Association

National Association of Community Health Centers

Dear Dr. (Last name),

The Centers for Disease Control and Prevention's National Center for Health Statistics (NCHS) is conducting the National Ambulatory Medical Care Survey (NAMCS). This annual study, which has been in the field since 1973, collects information about

the large portion of ambulatory care provided by physicians and midlevel providers throughout the United States. Research using NAMCS helps to inform physicians, health care researchers, and policy makers about the changing characteristics of ambulatory health care in this country. The information that we will request includes data about patient visits (e.g., demographics, diagnoses, services, and treatments); physician practice characteristics (e.g., practice type); and use of electronic medical records.

Many organizations and leaders in the health care community, including those providing the enclosed letter of endorsement, have expressed their support and join me in urging your participation in this meaningful study. You will be asked for data to complete a short electronic questionnaire on a sample of about 30 patient encounters during a randomly assigned, 1-week reporting period. Additionally, there is a short interview (approximately 45 minutes) with you about the nature of your practice. We intend to conduct additional health care research by linking National Provider Identifiers (NPI) and Federal Tax Identification Numbers collected in this study to health care-related data such as Medicare records. Participation is voluntary, and you or your staff may refuse to answer any question or stop participating at any time without penalty or loss of benefits.

The following are some key points about the survey:

* Data collection for NAMCS is authorized by Section 306 of the Public Health Service Act (Title 42, U.S. Code, 242k).
* All information collected will be held in the strictest confidence according to Section 308(d) of the Public Health Service Act (Title 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. No patient names, social security numbers, or addresses are collected.

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* NAMCS conforms to the Privacy Rule as mandated by HIPAA because disclosure of patient data is permitted for public health purposes, and the NCHS Research Ethics Review Board has approved NAMCS.
* U.S. Census Bureau employees, who administer the study, have taken an oath to abide by Title 13, U.S. Code, Section 9, which requires them to keep all information about your practice and patients confidential.

A Census Bureau employee, acting as our agent, will call you to schedule an appointment regarding the details of your participation. If you have any questions, please call a NAMCS representative at 1–800–392–2862. You can also find additional information on the survey by visiting the NAMCS participant website at: [http://www.cdc.gov/nchs/ahcd/namcs\_participant.htm.](http://www.cdc.gov/nchs/ahcd/namcs_participant.htm)

You may have questions about your rights as a participant in this research study.

If so, please call the Research Ethics Review Board at 1–800–223–8118. Please leave a brief message with your name and phone number and say that you are calling about Protocol 2010–02. Your call will be returned as soon as possible.

We greatly appreciate your cooperation. Sincerely,

Charles J. Rothwell, MS, MBA Director

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Your CHC location has been selected and we are requesting a short interview (approximately 20 minutes) with you to obtain information that would allow us to sample up to three physicians or midlevel providers in your health center. From these providers we will collect information from a sample of patient visits

(e.g., demographics, diagnoses, services, and treatments); and provider demographic and practice characteristics. We intend to conduct additional health care research by linking National Provider Identifiers (NPI) and Federal Tax Identification Numbers collected in this study to health care-related data such as Medicare records.

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