Questions deleted

22. At the reporting location, are there plans to purchase a new EHR system within the next 18 months?

☐1 Yes ☐2 No ☐3 Don't know

24. To what extent do you agree or disagree that your practice has optimized the use of its EHR system?

☐1 Strongly Agree

☐2 Somewhat Agree

☐3 Somewhat Disagree

☐4 Strongly Disagree

30. To what extent do you agree or disagree that you can trust the clinical information you receive electronically from providers outside your organization?

☐1 Strongly Agree

☐2 Somewhat Agree

☐3 Somewhat Disagree

☐4 Strongly Disagree

36. How often do you electronically search for health information from sources outside of your medical organization when seeing a new patient or an existing patient who has received services from other providers?

☐1 Always

☐2 Often

☐3 Sometimes

☐4 Rarely

☐5 Never

38. How often do you use electronically received patient health information from outside of your medical organization to manage your patient population?

☐1 Often

☐2 Sometimes

☐3 Rarely

☐4 Never

☐5 Don't know

Changes to the Assurance of Confidentiality languages in the approved 2017 NEHRS, formerly the 2016 NEHRS (previously approved languages are in red; updated languages are in black)

All information which would permit identification of an individual, a practice, or an establishment will be held confidential, will be used only by NCHS staff, contractors, and agents only when required and with necessary controls, and will not be disclosed or released to other persons without the consent of the individual or the establishment in accordance with section 308(d) of the Public Health Service Act (42 USC 242m(d)) and the Confidential Information Protection and Statistical Efficiency Act (PL-107-347).

We take your privacy very seriously. All information that relates to or describes identifiable characteristics of individuals, a practice, or an establishment will be used only for statistical purposes. NCHS staff, contractors and agents will not disclose or release responses in identifiable form without the consent of the individual or establishment in accordance with section 308(d) of the Public Health Service Act (42 USC 242m(d)) and the Confidential Information Protection and Statistical Efficiency Act of 2002 (CIPSEA, Title 5 of Public Law 107-347). In accordance with CIPSEA every NCHS employee, contractor, and agent has taken an oath and is subject to a jail term of up to five years, a fine of up to $250,000, or both if he or she willfully discloses ANY identifiable information about you. In addition, NCHS complies with the Federal Cybersecurity Enhancement Act of 2015 (6 U.S.C. §§ 151 & 151 note). This law requires the Federal government to protect its information by using computer security programs to identify cybersecurity risks against federal computer networks.

The Cybersecurity Act of 2015 permits monitoring information systems for the purpose of protecting a network from hacking, denial of service attacks and other security vulnerabilities.[1] The software used for monitoring may scan information that is transiting, stored on, or processed by the system. If the information triggers a cyber threat indicator, the information may be intercepted and reviewed for cyber threats. The Cybersecurity Act specifies that the cyber threat indicator or defensive measure taken to remove the threat may be shared with others only after any information not directly related to a cybersecurity threat has been removed, including removal of personal information of a specific individual or information that identifies a specific individual. Monitoring under the Cybersecurity Act may be done by a system owner or another entity the system owner allows to monitor its network and operate defensive measures on its behalf.

_____

[1] "Monitor" means "to acquire, identify, or scan, or to possess, information that is stored on, processed by, or transiting an information system"; "information system" means "a discrete set of information resources organized for the collection, processing, maintenance, use, sharing, dissemination or disposition of information"; "cyber threat indicator" means "information that is necessary to describe or identify security vulnerabilities of an information system, enable the exploitation of a security vulnerability, or unauthorized remote access or use of an information system".

Questions modified (questions in approved 2017 NEHRS (previously ERB and OMB approved 2016 NEHRS) are in red; updated questions in the proposed 2017 NEHRS are in black)

4. **Do you see ambulatory patients in any of the following settings? CHECK ALL THAT APPLY.**

   2☐ Freestanding clinic/urgicenter (not part of a hospital outpatient department)

4. **Do you see ambulatory patients in any of the following settings? CHECK ALL THAT APPLY.**

   2☐   Freestanding clinic or Urgent Care Center

6. **What are the county, state, zip code, and telephone number of the _reporting location_?**

   Country _____USA_____   County _____   State _____

   Zip Code _____   Telephone   (_____)_____

   - **Item below** amends Q6 _above_ to include a specific address, which will be used as part of the screening question to verify that the respondent's responses in the 2017 NEHRS follow-up survey is based on the reporting location that was identified in the first NEHRS survey conducted in the first quarter of 2017.

6. **What are the county, state, zip code, and telephone number of the _reporting location_?**

   Country _____USA_____   County _____   State _____

   Zip Code _____   Telephone   (_____)_____

   Address   _____

12. **If yes, from those new patients, which of the following types of payment do you accept?**

	Yes	No	Unknown
1. Private insurance capitated	☐1	☐2	☐3
2. Private insurance non-capitated	☐1	☐2	☐3
3. Medicare	☐1	☐2	☐3
4. Medicaid/CHIP	☐1	☐2	☐3
5. Workers' compensation	☐1	☐2	☐3
6. Self-pay	☐1	☐2	☐3
7. No charge	☐1	☐2	☐3

   - **Item below** amends Q12 _above_ to maintain consistent response choices throughout the survey; the response choice "Unknown" was changed to "Don't know".

12. **If yes, from those new patients, which of the following types of payment do you accept?**

	Yes	No	Don't know
1. Private insurance capitated	☐1	☐2	☐3
2. Private insurance non-capitated	☐1	☐2	☐3
3. Medicare	☐1	☐2	☐3
4. Medicaid/CHIP	☐1	☐2	☐3
5. Workers' compensation	☐1	☐2	☐3
6. Self-pay	☐1	☐2	☐3
7. No charge	☐1	☐2	☐3

17. **Has your reporting location been recognized as a Patient Centered Medical Home (PCMH) by a state, a commercial health plan, or a national organization, such as the National Committee for Quality Assurance (NCQA), the Joint Commission, URAC, or the Accreditation Association for Ambulatory Health Care (AAAHC)?**

☐1 Yes   ☐2 No   ☐3 Don't know

20. **Has your reporting location been recognized as a Patient Centered Medical Home (PCMH) by a state, a commercial health plan, or a national organization?**

☐1 Yes

☐2 No

☐3 Don't know

18. **Does the reporting location participate in an Accountable Care Organization (ACO) arrangement with Medicare or private insurers?** An ACO is an entity typically composed of primary care physicians, specialists, and hospitals, and held financially accountable for the cost and quality of care delivered to a defined group of patients.

☐1 Yes   ☐2 No   ☐3 Don't know

21. **Does the reporting location participate in an Accountable Care Organization (ACO) arrangement with Medicare or private insurers?**

☐1 Yes

☐2 No

☐3 Don't know

27. Do you send or receive patient health information electronically? Electronically does not include scanned or pdf documents from fax, eFax, or mail.

   ☐1 Yes

   ☐2 No (Skip to 32)

   ☐3 Don't know (Skip to 32)

- **Item below** (Q25) amends question above (Q27) to assess how patient health data is shared with other providers. Patient health information sharing was refined into separate questions, rather than including both send or receive in one question, without listing each type of data transmission in the updated 2017: electronically send patient health information.

25. Do you electronically <u>send</u> patient health information to other providers outside your medical organization using an EHR (not eFax) or a Web Portal (separate from EHR)?

   ☐1 Yes

   ☐2 No (Skip to 28)

   ☐3 Don't know

24. **Do you refer patients to the following providers? If so, how do you send patient health information to them?** Electronic does not include fax, eFax, or mail.	No	Yes, we send patient health information electronically (EHR, webportal or online registries)	Yes, we send patient health information via paper-based methods (Fax, eFax, or mail)	Yes, we send patient health information both electronically and via paper based methods	Yes, we do not send patient health information to the provider
Ambulatory care providers outside your organization	☐	☐	☐	☐	☐
Ambulatory care providers within your organization	☐	☐	☐	☐	☐
Hospitals unaffiliated with your organization	☐	☐	☐	☐	☐
Hospitals affiliated with your organization	☐	☐	☐	☐	☐
Behavioral Health providers	☐	☐	☐	☐	☐
Long-term care providers	☐	☐	☐	☐	☐

- **Item below** (Q26) amends Q24 above to assess how patient health data is sent to different providers. The response choices were modified and 5 out of 6 providers were retain to reduce burden on the respondents.

26. Do you **send** patient health information to any of the following providers electronically? Electronically does not include scanned or pdf documents from fax, eFax, or mail.	Yes	No	Don't know	Not Applicable
Ambulatory care providers outside your organization	☐	☐	☐	☐
Hospitals unaffiliated with your organization	☐	☐	☐	☐
Hospitals affiliated with your organization	☐	☐	☐	☐
Behavioral Health providers	☐	☐	☐	☐
Long-term care providers	☐	☐	☐	☐

27. **Do you send or receive patient health information electronically?** Electronically does not include scanned or pdf documents from fax, eFax, or mail.

    ☐1 Yes

    ☐2 No (Skip to 32)

    ☐3 Don't know (Skip to 32)

- **Item below** (Q27) amends question above (Q27) to assess how patient health data is shared with other providers. Patient health information sharing was refined into separate questions, rather than including both send or receive in one question, without listing each type of data transmission in the updated 2017: electronically receive patient health information.

27. **Do you electronically receive patient health information from other providers outside your medical organization using an EHR (not eFax) or a Web Portal (separate from EHR)?**

    ☐1 Yes

    ☐2 No (Skip to 31)

    ☐3 Don't know

25. **Do you see patients from the following providers? If so, how do you receive patient health information from them?** Electronic does not include fax, eFax, or mail.	No	Yes, we receive patient health information electronically (EHR, webportal or online registries)	Yes, we receive patient health information via paper-based methods (Fax, eFax, or mail)	Yes, we receive patient health information both electronically and via paper based methods	Yes, we do not receive patient health information from the provider
Ambulatory care providers outside your organization	☐	☐	☐	☐	☐
Ambulatory care providers within your organization	☐	☐	☐	☐	☐
Hospitals unaffiliated with your organization	☐	☐	☐	☐	☐
Hospitals affiliated with your organization	☐	☐	☐	☐	☐
Behavioral Health providers	☐	☐	☐	☐	☐
Long-term care providers	☐	☐	☐	☐	☐

- **Item below** (Q28) amends Q25 above to assess how patient health data is received from different providers. The response choices were modified and 5 out of 6 providers were retain to reduce burden on the respondents.

28. **Do you <u>receive</u> patient health information from the following providers electronically?** Electronically does not include scanned or pdf documents from fax, eFax, or mail.	Yes	No	Don't know	Not Applicable
Ambulatory care providers outside your organization	☐	☐	☐	☐
Hospitals unaffiliated with your organization	☐	☐	☐	☐
Hospitals affiliated with your organization	☐	☐	☐	☐
Behavioral Health providers	☐	☐	☐	☐
Long-term care providers	☐	☐	☐	☐

31. When electronically receiving information from other providers, do you integrate the following types of patient health information into your EHR without special effort like manual entry or scanning?	Yes	No	Don't know	Not Applicable
Medication lists	☐1	☐2	☐3	☐4
Patient problem lists	☐1	☐2	☐3	☐4
Medication allergy lists	☐1	☐2	☐3	☐4
Imaging reports	☐1	☐2	☐3	☐4
Laboratory results	☐1	☐2	☐3	☐4
Public health registry data (e.g., immunizations, cancer)	☐1	☐2	☐3	☐4
Referrals (e.g., referral requests or reports)	☐1	☐2	☐3	☐4
Hospital discharge summaries	☐1	☐2	☐3	☐4
Emergency Department notifications	☐1	☐2	☐3	☐4
Summary of care records for transitions of care or referrals	☐1	☐2	☐3	☐4
Patient-generated data (e.g. data from self-monitoring devices or mobile health applications)	☐1	☐2	☐3	☐4

- **Items below** (Q31 and Q32) amend Q31 above to assess the type of patient health data that is being integrated. Patient health information integration was refined and streamlined into separate questions in the updated 2017.

31. **Do you integrate summary of care records into your EHR without special effort like manual entry or scanning?**

    ☐1 Yes

    ☐2 No

    ☐3 Don't know

    ☐4 Not applicable

32. **Do you integrate any other type of patient health information into your EHR without special effort like manual entry or scanning?**

    ☐1 Yes

    ☐2 No

    ☐3 Don't know

    ☐4 Not applicable

32. **Can patients seen at the reporting location do the following online activities? Can patients…**	**Yes**	**No**	**Don't Know**
View their medical record online?	1☐	2☐	3☐
Download health information from their electronic medical record to their personal files?	1☐	2☐	3☐
Transmit health information from their electronic medical record to a designated third party of their choice (e.g. another provider)?	1☐	2☐	3☐
Request corrections to their electronic medical record?	1☐	2☐	3☐
Enter their health information online (e.g., weight, symptoms)?	1☐	2☐	3☐
Upload their data from self-monitoring devices (e.g., blood glucose readings)?	1☐	2☐	3☐

- **Item below** (Q33) amends Q32 above to streamline the computerized capabilities question to 3 out of 6 sub-questions.

33. **Does your EHR have the computerized capability to allow patients to…**	**Yes**	**No**	**Don't Know**
Electronically view their health information (e.g. test results).	1☐	2☐	3☐
Request refills for prescriptions online.	1☐	2☐	3☐
Enter health information (e.g. weight, symptoms) online.	1☐	2☐	3☐

35. **Within the last 30 days has your EHR system…**	**Yes**	**No**	**Not Applicable**
Sent you too many alerts, causing you to overlook something important?	1☐	2☐	3☐

- **Item below** (Q34) amends Q35 above. It was approved for 2014 attitudinal question (Q36g) so we would like to retain this question for 2017 as part of the attitudinal measure.

34. **Within the last 30 days has your EHR system…**	**Yes**	**No**	**Not Applicable**
Increased the time spent documenting patient care?	1☐	2☐	3☐

38. How often do you use electronically received patient health information from outside of your medical organization to manage your patient population?

☐1   Often

☐2   Sometimes

☐3   Rarely

☐4   Never

☐5   Don't know

41. To what extent do you agree or disagree with the following statements.	**Strongly Agree**	**Somewhat Agree**	**Somewhat Disagree**	**Strongly Disagree**	**Not Applicable**
Electronic information exchange with providers outside my organization gives me access to the patient health information I need.	☐1	☐2	☐3	☐4	☐5
Electronically sending clinical information to providers outside my organization is easy to do using my EHR.	☐1	☐2	☐3	☐4	☐5
Electronically receiving clinical information from other providers is easy to do using my EHR	☐1	☐2	☐3	☐4	☐5
Electronic information exchange with providers outside my organization improves my ability to coordinate care for my patients.	☐1	☐2	☐3	☐4	☐5
Electronic information exchange with other providers reduces duplicate test ordering.	☐1	☐2	☐3	☐4	☐5
Electronic information exchange with providers outside my organization is cumbersome to do with our EHR.	☐1	☐2	☐3	☐4	☐5
Electronic information exchange with providers outside my organization prevents medication errors.	☐1	☐2	☐3	☐4	☐5
Electronic information exchange with providers outside my organization is difficult because providers in my referral network do not have the capability to exchange data electronically.	☐1	☐2	☐3	☐4	☐5
Electronic information exchange with providers outside my organization provides me with clinical information that I can trust.	☐1	☐2	☐3	☐4	☐5
Electronic information exchange with providers outside my organization increases my practice's vendor costs.	☐1	☐2	☐3	☐4	☐5

- **Item below** (Q29 and Q29a) amends Q38 and Q41 above to assess attitudinal measures for not using patient health data from other providers when treating a patient. These attitudinal measures were refined and streamlined in the question below.

29. **How frequently do you <u>use</u> patient health information electronically (not eFax) received from providers or sources outside your organization when treating a patient?**

☐ Often ☐ Sometimes ☐ Rarely ☐ Never ☐ Don't know

29a. **If rarely or never used, please indicate the reason(s) why. Check all that apply.**

    1. ☐ Information not always available when needed (e.g. not timely)

    2. ☐ Do not trust accuracy of information

    3. ☐ Difficult to integrate information in EHR

    4. ☐ Information not available to view in EHR as part of clinicians' workflow

    5. ☐ Information not useful (e.g. redundant or unnecessary information)

    6. ☐ Difficult to find information necessary information

    7. ☐ Other_____

Questions added

- **Item below** (Q22) was approved for 2014 and 2015 NEHRS but it was deleted from the approved 2017 NEHRS, formerly 2016 NEHRS, when the OMB nonsubstantive package was submitted. This question is added to the proposed 2017 NEHRS as it has been part of the definition of delivery system reform (DSR): Patient Centered Medical Home (PCMH), Accountable Care Organization (ACO) and Pay-for-Performance (P4P) arrangement.

22. **Does the reporting location participate in a Pay-for-Performance arrangement, where you can receive financial bonuses based on your performance?**

☐1 Yes ☐2 No ☐3 Unknown