National Ambulatory Medical Care Survey TRADITIONAL PHYSICIAN 2021 INDUCTION SAMPLE CARD

Notice – CDC estimates the average public reporting burden for this collection of information as 30 minutes per response, including the time for reviewing instructions, searching existing data/information sources, gathering and maintaining the data/information needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road, MS D-74, Atlanta, GA 30333; ATTN: PRA (0920-0234).

Assurance of Confidentiality – 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 U.S.C. 242m(d)) and the Confidential Information Protection and Statistical Efficiency Act (Title III of the Foundations for Evidence-Based Policymaking Act of 2018 (Pub. L. No.115-435, 132 Stat. 5529 § 302)). 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.

This sample card presents a partial list of the induction questions for traditional physicians. This tool may be shown to physicians who request examples of the questions they may be asked. DISCLAIMER: Questions may not be in the same order or worded exactly as presented in the instrument and may not include the answer options.

This study will be concerned with the AMBULATORY patients seen during the assigned 7-day reporting week. Information for up to 10 office locations will be collected and used to determine the office where PRFs will be sampled.

QUESTIONS ABOUT YOUR ELIGIBILITY FOR NAMCS AND GENERAL PHYSICIAN CHARACTERISTICS

- What is your specialty (including general practice)?
- Which of the following categories best describes your professional activity patient care, research, teaching, administration, or something else?
- Do you directly care for any ambulatory patients in your work?
- Do you work as an employee or a contractor in a federally operated patient care setting (for example, VA, military, prison), hospital emergency department, hospital outpatient department, or community health center?
- In a typical year, about how many weeks do you <u>not</u> see any ambulatory patients (for example, conferences, vacations, etc.)?
- Are you likely to see any ambulatory patients in your office during your 7-day reporting week? If so, what is the location & type of office?
- During your 7-day reporting week, how many days do you expect to see any ambulatory patients and approximately how many ambulatory visits do you expect to have at all eligible locations?
- During your last normal week of practice, how many hours of direct patient care did you provide?

NOVEL CORONAVIRUS DISEASE (COVID-19) IMPACT

- During the past THREE months, how often did your office experience shortages of any of the following personal protective equipment due to the onset of the coronavirus disease (COVID-19) pandemic?
 - N95 respirators or other approved facemasks
 - Eye protection, isolation gowns, or gloves
- During the past THREE months, did your office have the ability to test patients for coronavirus disease (COVID-19) infection?
- During the past THREE months, how often did your office experience shortages of coronavirus disease (COVID-19) tests for any patients who needed testing?

NOVEL CORONAVIRUS DISEASE (COVID-19) IMPACT (Continued)

- During the past THREE months, how often did your office have a location where patients could be referred to for coronavirus disease (COVID-19) testing?
- During the past THREE months, did your office need to turn away or refer elsewhere any patients with confirmed or presumptive positive coronavirus disease (COVID-19) infection?
- During the past THREE months, did any of the following clinical care providers in your office test positive for coronavirus disease (COVID-19) infection?
 - Physicians
 - Physician assistants
 - Nurse practitioners
 - Certified nurse-midwives
 - Registered nurses/licensed practical nurses
 - Other clinical care providers
- During January and February 2020, was your office using telemedicine or telehealth technologies (for example, audio with video, web videoconference) to assess, diagnose, monitor, or treat patients?
- After February 2020, did your office's use of telemedicine or telehealth technologies to conduct patient visits increase?
- After February 2020, how much has your office's use of telemedicine or telehealth technologies to conduct patient visits increased?
- After February 2020, has your office started using telemedicine or telehealth technologies?
- Since your office started using these technologies, how many of your patient visits have been conducted using telemedicine or telehealth technologies?

QUESTIONS THAT REFER TO THE PRACTICE AND SPECIFIC LOCATION WHERE YOU HAVE THE MOST OFFICE VISITS

- Is this practice <u>certified</u> as a patient-centered medical home? If so, by whom?
- Does this practice report any quality measures or quality indicators to either payers or to organizations that monitor health care quality?
- How many <u>full-time</u> and <u>part-time</u> providers are on staff at the office with the most visits?
 Include physicians (MDs and DOs) and other medical providers such as physician assistants (PAs), nurse practitioners (NPs), certified nurse midwives (CNMs), clinical nurse specialists (CNSs), and certified registered nurse anesthetists (CRNAs), etc.
- If applicable, are the PA's, NP's, CNM's, CNS's, and CRNA's patients logged separately and do they bill for services using their own NPI number?

QUESTIONS ABOUT THE ELECTRONIC HEALTH RECORD (EHR) SYSTEM CURRENTLY USED AT THE ELIGIBLE LOCATION WITH MOST VISITS

- Does the reporting location <u>use</u> an electronic health record (EHR) system? If yes, the questions continue:
- In which year did you install your current EHR system?
- Does your EHR system meet meaningful use criteria, also called promoting interoperability (certified EHR), as defined by the Department of Health and Human Services?
- What is the name of your current EHR system?
- At the reporting location, are there plans for installing a new EHR system within the next 18 months?

GENERAL PRACTICE CHARACTERISTICS

- Does your practice set time aside for same day appointments? If so, roughly what percent of your daily visits are same day appointments?
- On average, about how long does it take to get an appointment for a routine medical exam?