National Ambulatory Medical Care Survey
COMMUNITY HEALTH CENTER (CHC)
2020 INDUCTION SAMPLE CARD

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This sample card presents a partial list of the induction questions for CHC administrators or CHC providers. This tool may be shown to administrators/providers 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.

Part 1 — CHC DIRECTOR/ADMINISTRATOR INDUCTION INTERVIEW
GENERAL QUESTIONS ABOUT THE SAMPLED CHC

• Physicians and certain medical providers who work at the sampled CHC are listed to determine who gets sampled. Collected data for each include:
  – Name, address, and telephone number of the CHC if update needed
  – Name, greet name, title, telephone number, and email address of the CHC director or alternate contact
  – Provider name, provider type [Medical Doctor (MD), Doctor of Osteopathy (DO), Nurse Practitioner (NP), Physician Assistant (PA), or Certified Nurse Midwife (CNM)], and specialty (if applicable)
  – Expected visit volume during the 7-day reporting week

• How would you classify this center?
  – Federally-funded CHC (330)
  – Federally Qualified Health Center, but not federally funded (330 look-alike)
  – Urban Indian (437) Health Center
  – None of the above

• On average, in a normal year, how many weeks does the CHC at this location see patients?

QUESTIONS ABOUT VARIOUS ADMINISTRATIVE COMPONENTS OF THE SAMPLED CHC

• Is the CHC at this location certified as a patient-centered medical home? If so, by whom?
• Does the CHC at this location report any quality measures or quality indicators to either payers or to organizations that monitor health care quality?
• How many full-time and part-time providers work at the CHC?
  – Include physicians and advanced practice providers [e.g., physician assistants (PAs), nurse practitioners (NPs), certified nurse midwives (CNMs), clinical nurse specialists (CNSs), certified registered nurse anesthetists (CRNAs), etc.]
  – If applicable, are the PA’s, NP’s, CNM’s, CNS’s, or 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

• Does the CHC reporting location use an electronic health record (EHR) system? If yes, the questions continue:
• In which year did the CHC install its 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 the CHC’s current EHR system?
• At the CHC reporting location, are there plans for installing a new EHR system within the next 18 months?
**QUESTIONS REGARDING REVENUE, CONTRACTS WITH MANAGED CARE PLANS, AND GENERAL CHC CHARACTERISTICS**

- What percent of your CHC’s revenue comes from the following sources?
  - 330 grant
  - Title 5 Grant or contract
  - Other federal grant
  - State/local grant
  - Individual, corporation or foundation grants or donations
  - Medicare
  - Medicaid/CHIP
  - Patient payments
  - Other (including private insurance, Tricare, VA, etc.)

- Roughly, what percentage of the patient care revenue received by this CHC comes from managed care contracts?

- Roughly, what percent of this CHC's patient care revenue comes from each of the following methods of payment?
  - Fee-for-service
  - Capitation
  - Case rate (for example, package pricing/episode of care)
  - Other

- Are you currently accepting new patients into the CHC? If yes, are the following types of payment accepted:
  - Capitated private insurance
  - Non-capitated private insurance
  - Medicare
  - Medicaid/CHIP
  - Workers’ compensation
  - Self-pay
  - No charge

- Which are methods that describe basic compensation for providers at this CHC (e.g., fixed salary, etc.) and factors in determining physicians'/providers' compensation at the CHC (e.g., provider's productivity, patient surveys, etc.)?

- Does the CHC set time aside for same day appointments?

- On average, about how long does it take to get an appointment for a routine medical exam?

**Part 2 — CHC PROVIDER INDUCTION INTERVIEW**

**QUESTIONS ABOUT YOUR ELIGIBILITY FOR NAMCS AND GENERAL PROVIDER CHARACTERISTICS**

- 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?
- Outside of this CHC, at how many different office locations do you see ambulatory patients?
- In a typical year, about how many weeks do you not see any ambulatory patients (e.g., conferences, vacations, etc.)?
- Are you likely to see any ambulatory patients at the current office location during your 7-day reporting week?
- Are there other CHC locations where you normally would see patients, even though you will not see any during your 7-day reporting period?
- During the 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 this CHC location?
- During your last normal week of practice, how many hours of direct patient care did you provide?
- During your last normal week of practice, about how many encounters of the following type did you make with patients:
  - Nursing home visits
  - Other home visits
  - Hospital visits
  - Telephone consults
  - Internet or e-mail consults

- Roughly, what percent of your daily visits are same day appointments?

**QUESTIONS ABOUT YOU AND YOUR PROFESSIONAL DEGREE**

- What is your year of birth?
- What is your sex?
- What is your highest medical degree (e.g., MD, DO, Nurse practitioner, Physician assistant, Certified nurse midwife, other)?
- What is your primary and secondary specialty?
- What is your primary and secondary board certification?
- What year did you graduate from medical school?
- Did you graduate from a foreign medical school?