

National Ambulatory Medical Care Survey TRADITIONAL PHYSICIAN 2020 INDUCTION SAMPLE CARD

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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 (e.g., VA, military, prison), hospital emergency department, hospital outpatient department, or community health center?**
- **In a typical year, about how many weeks do you not 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?**
- **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

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

- **Is this practice certified 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 full-time and part-time 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 use 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?**

QUESTIONS REGARDING REVENUE, CONTRACTS WITH MANAGED CARE PLANS, AND GENERAL PRACTICE CHARACTERISTICS

- **Roughly, what percent of your patient care revenue comes from the following:**
 - Medicare
 - Medicaid/CHIP
 - Private insurance
 - Patient payments
 - Other (including charity, research, Tricare, VA, etc.)
- **Roughly, what percentage of the patient care revenue received by this practice comes from managed care contracts?**
- **Roughly, what percentage of your patient care revenue comes from each of the following methods of payments?**
 - Fee-for-service
 - Capitation
 - Case rates (for example, package pricing/episode of care)
 - Other
- **Are you currently accepting new patients into your practice? 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 of the following methods best describes your basic compensation?**
 - Fixed salary
 - Share of practice billings or workload
 - Mix of salary and share of billings or other measures of performance (e.g., physician's own billings, practice's financial performance, quality measures, practice profiling)
 - Shift, hourly or other time-based payment
 - Other
- **Clinical practices may take various factors into account in determining the compensation (salary, bonus, pay rate, etc.) paid to the physicians in the practice. Please indicate whether the practice explicitly considers each of the following factors in determining physician's compensation.**
 - Factors that reflect the physician's own productivity
 - Results of satisfaction surveys from the physician's own patients
 - Specific measures of quality, such as rates of preventive services for the physician's patients
 - Results of practice profiling, that is, comparing the physician's pattern of using medical resources with that of other physicians
 - The overall financial performance of the practice
- **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?**