



All Care Health Plan
CAHPS® 5.0 Medicaid Survey

Banner Book Report

June 2015



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METHODOLOGY

Introduction

This banner book report summarizes the results of the 2015 CAHPS® Medicaid survey of All Care Health Plan members. All Care Health Plan is one of 17 CCOs that participated in the survey. It was administered over a 10-week period using a mixed-mode (mail and telephone) five-wave protocol. This protocol consisted of a pre-notification letter, an initial survey mailing and reminder postcard to all respondents, followed by a second survey mailing and reminder postcard to non-respondents. Phone follow-up was conducted for members who had not responded to the mailings. Respondents were surveyed in English and Spanish. DataStat administered the survey under contract with the State of Oregon Department of Human Services.

Survey Milestones

Pre-notification letters mailed:	February 19, 2015
1st mailing of survey packets:	February 26, 2015
1st mailing of reminder postcards:	March 5, 2015
2nd mailing of survey packets:	March 24, 2015
2nd mailing of reminder postcards:	April 2, 2015
Phone follow-up start:	April 9, 2015
Mail and phone field terminated:	May 4, 2015

Sampling

The sampling plan for the adult and child surveys called for a random sample of 900 eligible members per CCO in each age group. Adults were defined as members aged 18 years or older and children as 17 years old or younger, both as of December 31, 2014. To be eligible, members had to have been enrolled in Oregon Health Plan for at least six months as of December 31, 2014. The final selected sample consisted of 15,300 adult OHP enrollees and 15,300 child OHP enrollees.

Questionnaires

The instruments selected for the survey were adaptations of the CAHPS® 5.0 adult and child core questionnaires for use in assessing the performance of CCOs. CAHPS® supplemental questions as well as OHP-specific items were added to the instruments.

Selection of Cases for Analysis

Surveys were considered complete if respondents did not say 'No' to Q1 and if they provided a valid response to at least one non OHP-specific question.

Composites, Overall Ratings, and Measures for Reporting

In addition to responses by individual question, the CAHPS® 5.0 questionnaire yields several types of results for reporting. *Composite scores* summarize responses in key areas of member experience. Four composites are calculated for the adult and child instruments: *Getting Needed Care*, *Getting Care Quickly*, *How Well Doctors Communicate*, and *Health Plan Customer Service*, and *Shared Decision Making*. Global or overall ratings measure respondents' assessments, using a scale of 0 to 10, of their health plan, health care, personal doctor, and specialist. In the child questionnaire, an additional set of six *Reporting Measures* are possible. These measures cover topics called *Access to Specialized Services*, *Family Centered Care*, and *Coordination of Care*.

The questions for each composite, overall rating, and reporting measure are listed below, with their locations in the adult and child questionnaires, respectively, as well as the topics addressed by the item.

Composite: Getting Needed Care

Q14/15. Got care, tests or treatment you thought you needed

Q25/46. Getting appointments with specialists

Composite: Getting Care Quickly

Q4/4. Got care for illness/injury/condition as soon as you thought you/child needed

Q6/6. Got an appt. for routine care as soon as you thought you/child needed

Composite: How Well Doctors Communicate

Q17/32. Personal doctor explained things in a way that was easy to understand

Q18/33. Personal doctor listened carefully to you

Q29/34. Personal doctor showed respect for what you had to say

Q20/37. Personal doctor spent enough time with you

Composite: Customer Service

Q31/50. Health plan's customer service gave needed information or help

Q32/51. Treated with courtesy and respect by health plan's customer service staff

Composite: Shared Decision Making

Q10/11. Doctor talked about reasons you might want to take a medicine

Q11/12. Doctor talked about reasons you might not want to take a medicine

Q12/13. Doctor talked about what you thought was best for you when discussing a medication

Rating Questions

Q13/14. Rating of all health care

Q23/41. Rating of personal doctor

Q27/47. Rating of specialist doctor

Q35/54. Rating of health plan

Composite: Access to Specialized Services (Child only)

Q--/20. Getting special medical equipment or devices for your child

Q--/23. Getting special therapy (physical, occupational, speech) for your child

Q--/26. Getting treatment or counseling for your child

Composite: Family Centered Care: Personal Doctor Who Knows Child (Child only)

Q--/38. Child's personal doctor talked with you about how child is feeling, growing, behaving

Q--/43. Child's personal doctor understands how child's health conditions affect child's day-to-day life

Q--/44. Child's personal doctor understands how child's health conditions affect family's day-to-day life

Composite: Coordination of Care for Children with Chronic Conditions (Child only)

Q--/18. Got help contacting school and daycare from someone at health plan or doctor's office

Q--/29. Got help coordinating care among providers from someone at health plan or doctor's office

Comparisons, Statistical Testing, Scoring, and Weighting

In the tables, results are presented for all questionnaire items, reporting measures, and composites, by age category, race/ethnicity, health status, and gender. Significance testing was conducted between overall OHP results and plan or demographic subgroup results. Statistically significant differences were determined with binomial and t-tests, using a significance level of .05 or less. Tests were considered valid when the number of cases used to compute the score was 50 or greater and there was non-zero variation in the tested groups. For comparisons with statistically significant differences, a star (*) is found to the right of the relevant percentage in the table.

For rating, composite, and reporting measure questions, responses grouped together as scores offer a means of comparing performance across plans and other subgroups. Scores are usually designed to capture respondents' positive experiences. Thus, in rating questions, for example, responses of 8, 9, or 10 represent a positive experience, as do responses of 'Usually' or 'Always' to questions that make up the composites and most of the reporting measures. To make these scores easily available to users, positive responses have been set apart in the banner tables and labelled as 'Nets'. A net score preceded by '#' signifies the most inclusive grouping (i.e. 8, 9, and 10), whereas a net score preceded by the label 'Score 2' represents the least inclusive grouping (i.e. 9 and 10).

Data presented in the banner books were weighted to reflect each plan's actual distribution in the total eligible population. A weight unique to each health plan and age category (adults and children) was constructed by applying the percentage of members by plan in the population to the corresponding percentages in the completed cases.

Sample Disposition

Category	Adult		Child	
	All Care Health Plan	Overall	All Care Health Plan	Overall
**First mailing - sent	900	15300	900	15300
*First mailing - usable survey returned	206	3240	145	2377
Second mailing - sent	708	12007	741	12648
*Second mailing - usable survey returned	47	979	56	987
*Phone - usable surveys	75	1234	99	1999
Total - usable surveys	328	5453	300	5363
†Ineligible: According to population criteria‡	15	261	9	158
†Ineligible: Deceased	1	39	0	1
†Ineligible: Mentally or physically unable to complete survey	13	207	0	0
†Ineligible: Language barrier	2	52	0	40
Incorrect address AND incorrect phone number	59	1173	72	1296
Refusal/Returned survey blank	47	667	54	729
Nonresponse - Unavailable by mail or phone	435	7448	465	7713
Adjusted Response Rate	37.7%	37.0%	33.7%	35.5%

*Included in response rate numerator

†Excluded from adjusted response rate denominator

‡Population criteria: The designated respondent must be enrolled in the health plan and meet the age requirements of the survey methodology.

Note: *Adjusted Response Rate = Total Usable Surveys / Total Eligible Cases*

Response/Non-Response Comparison

Presented below is a comparison, by age and gender within each age category, of respondents and non-respondents, all of whom were part of the random sample for the Oregon CAHPS© 2015 survey.

Non-Respondents are members or member proxys who decided not to participate in the study by mail or phone. This group includes two types of non-respondents:

- 1) Members who passively refused by not returning the questionnaire mailed to their household and/or not answering questions over the phone.
- 2) Members who actively refused, either by contacting DataStat or by declining to participate when DataStat attempted to reach them by phone.

The category labeled **Respondents** includes members or member proxys who completed the questionnaire either by mail or phone.

Adult

Gender / Age	Non-Respondents	Respondents	Difference
Male	216 44.8%	132 40.2%	-4.57%
Female	266 55.2%	196 59.8%	4.57%
18-24	93 19.3%	31 9.5%	-9.84%
25-34	135 28.0%	56 17.1%	-10.94%
35-44	99 20.5%	52 15.9%	-4.69%
45-54	72 14.9%	83 25.3%	10.37%
55-64	58 12.0%	83 25.3%	13.27%
65-74	18 3.7%	14 4.3%	0.53%
75 or Older	7 1.5%	9 2.7%	1.29%

Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	266 51.3%	164 54.7%	3.41%
Female	253 48.7%	136 45.3%	-3.41%
<3	117 22.5%	71 23.7%	1.12%
4-7	127 24.5%	82 27.3%	2.86%
8-12	151 29.1%	79 26.3%	-2.76%
13 or older	124 23.9%	68 22.7%	-1.23%

Q1 OUR RECORDS SHOW THAT YOU ARE NOW IN <ALL CARE HEALTH PLAN>. IS THAT RIGHT?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER				
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLACK OR AFR-AMER	ASIAN	NATV ILND	AMER IND/ NATV	OTHER	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE-MALE
Q1 YES	325	5345	27	51	43	76	86	22	248	1	2	2	5	12	26	28	273	193	110	122	184		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
NOT ANSWERED	3	108		1		1		1	3								3	1	2	1	2		
VALID CASES	325	5345	27	51	43	76	86	22	248	1	2	2	5	12	26	28	273	193	110	122	184		
NUMBER OF RESPONDENTS	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q3 IN THE LAST 6 MONTHS, DID YOU HAVE AN ILLNESS, INJURY, OR CONDITION THAT NEEDED CARE RIGHT AWAY IN A CLINIC, EMERGENCY ROOM OR DOCTOR'S OFFICE?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q3 YES	147 46%	2233 43%	10 37%	23 44%	23 53%	36 48%	38 45%	9 39%	119 48%	~	~	~	20% 42%	5% 54%	14 30%	8 48%	131 48%	71 37%*	67 60%*	53 43%	87 47%
NO	172 54%	2997 57%	17 63%	29 56%	20 47%	39 52%	47 55%	14 61%	129 52%	1 100%	2 100%	2 100%	4 80%	7 58%	12 46%	19 70%	143 52%	120 63%*	45 40%*	69 57%	97 53%
NOT ANSWERED	9	223				2	1		3						1	2	3			1	2
VALID CASES	319	5230	27	52	43	75	85	23	248	1	2	2	5	12	26	27	274	191	112	122	184
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q4 IN THE LAST 6 MONTHS, WHEN YOU NEEDED CARE RIGHT AWAY, HOW OFTEN DID YOU GET CARE AS SOON AS YOU NEEDED?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q4 NEVER	2 1%	63 3%	~	~	1 4%	~	1 3%	~	~	~	~	~	~	1 20%	1 8%	~	2 2%	2 3%	~	1 2%	1 1%
SOMETIMES	22 16%	285 14%	~	5 24%	3 13%	8 24%	4 11%	1 17%	18 16%	~	~	~	1 100%	3 23%	~	22 18%	9 14%	12 19%	8 16%	14 17%	
USUALLY	32 24%	563 28%	7 70%	3 14%	2 9%	7 21%	9 26%	2 33%	23 21%	~	~	~	~	1 20%	4 31%	4 50%	25 21%	13 20%	16 26%	14 29%	16 20%
ALWAYS	80 59%	1115 55%	3 30%	13 62%	17 74%	19 56%	21 60%	3 50%	69 63%	~	~	~	~	3 60%	5 38%	4 50%	72 60%	42 64%	34 55%	26 53%	50 62%
#ALWAYS + USUALLY (NET)	112 82%	1678 83%	10 100%	16 76%	19 83%	26 76%	30 86%	5 83%	92 84%	~	~	~	~	4 80%	9 69%	8 100%	97 80%	55 83%	50 81%	40 82%	66 81%
TOP BOX SCORE	80 59%	1115 55%	3 30%	13 62%	17 74%	19 56%	21 60%	3 50%	69 63%	~	~	~	~	3 60%	5 38%	4 50%	72 60%	42 64%	34 55%	26 53%	50 62%
NOT ANSWERED	11	220		2		2	3	3	9						1	10	5	5	4	6	
VALID CASES	136	2026	10	21	23	34	35	6	110				1	5	13	8	121	66	62	49	81
NUMBER OF RESPONDENTS	147 100%	2246 100%	10 100%	23 100%	23 100%	36 100%	38 100%	9 100%	119 100%				1 100%	5 100%	14 100%	8 100%	131 100%	71 100%	67 100%	53 100%	87 100%

[ASKED IF Q3 = YES]

Q5 IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS FOR A CHECK-UP OR ROUTINE CARE AT A DOCTOR'S OFFICE OR CLINIC?

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q5 YES	224 70%	3616 70%	17 63%	35 67%	26 60%	55 73%	62 72%	18 78%	174 70%	1 100%	1 50%	2 ~40%	7 64%	22 85%	19 68%	191 70%	122 63%*	88 79%*	80 65%	133 72%	
NO	95 30%	1586 30%	10 37%	17 33%	17 40%	20 27%	24 28%	5 22%	76 30%	1 ~50%	2 ~100%	3 60%	4 36%	4 15%	9 32%	83 30%	71 37%*	23 21%*	43 35%	51 28%	
NOT ANSWERED	9	251				2			1				1		2		1	1		2	
VALID CASES	319	5202	27	52	43	75	86	23	250	1	2	2	5	11	26	28	274	193	111	123	184
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q6 IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT FOR A CHECK-UP OR ROUTINE CARE AT A DOCTOR'S OFFICE OR CLINIC AS SOON AS YOU NEEDED?

			AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q6 NEVER	10 5%	100 3%	1 6%	4 11%	~	3 6%	2 4%	~	9 6%	~	~	~	~	1 5%	~	10 6%	6 5%	4 5%	~	10 8%*
SOMETIMES	43 21%	562 17%	3 19%	14 40%	6 24%	8 15%	10 18%	1 6%	32 20%	1 ~100%	1 ~	2 ~	5 ~	5 24%	3 18%	39 22%	31 27%*	8 10%*	19 26%	23 19%
USUALLY	45 22%	870 27%	4 25%	6 17%	3 12%	13 25%	13 24%	2 13%	32 20%	~	~	1 ~	5 ~	5 24%	3 18%	37 21%	16 14%*	25 30%*	18 24%	23 19%
ALWAYS	110 53%	1715 53%	8 50%	11 31%	16 64%	28 54%	30 55%	13 81%	89 55%	1 ~100%	~	~	4 ~	10 48%	11 65%	92 52%	60 53%	45 55%	37 50%	68 55%
#ALWAYS + USUALLY (NET)	155 75%	2585 80%	12 75%	17 49%	19 76%	41 79%	43 78%	15 94%	121 75%	1 ~100%	~	1 ~	4 67%	15 71%	14 82%	129 72%	76 67%*	70 85%*	55 74%	91 73%
TOP BOX SCORE	110 53%	1715 53%	8 50%	11 31%	16 64%	28 54%	30 55%	13 81%	89 55%	1 ~100%	~	~	4 67%	10 48%	11 65%	92 52%	60 53%	45 55%	37 50%	68 55%
NOT ANSWERED	16	326	1		1	3	7	2	12				1	1	2	13	9	6	6	9
VALID CASES	208	3247	16	35	25	52	55	16	162	1	1	2	6	21	17	178	113	82	74	124
NUMBER OF RESPONDENTS	224	3573	17	35	26	55	62	18	174	1	1	2	7	22	19	191	122	88	80	133
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q5 = YES]

Q7 IN THE LAST 6 MONTHS, NOT COUNTING THE TIMES YOU WENT TO AN EMERGENCY ROOM, HOW MANY TIMES DID YOU GO TO A DOCTOR'S OFFICE OR CLINIC TO GET HEALTH CARE FOR YOURSELF?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q7 NONE	88 28%	1271 25%	11 41%~	14 27%	15 35%~	18 24%	24 28%	3 14%~	69 28%	1 ~	1 ~	3 60%~	3 25%~	5 19%~	9 33%~	75 27%~	68 35%*	18 17%*	39 32%	47 26%	
1 TIME	53 17%	975 19%	5 19%~	10 20%	6 14%~	15 20%	12 14%	5 23%~	41 17%	~	~	1 ~	3 25%~	4 15%~	8 30%~	43 16%~	35 18%	18 17%	25 20%	28 15%	
2	47 15%	973 19%	2 7%~	10 20%	9 21%~	12 16%	9 11%	4 18%~	36 15%	~	~	1 ~	4 33%~	4 15%~	2 7%~	44 16%~	31 16%	15 14%	15 12%	31 17%	
3	43 14%	600 12%	3 11%~	10 20%	4 9%~	11 15%	14 16%	1 5%~	36 15%	~	~	~	1 8%~	4 15%~	3 11%~	39 14%~	29 15%	14 13%	12 10%	31 17%*	
4	31 10%	448 9%	4 15%~	2 4%*	3 7%~	6 8%	9 11%	4 18%~	22 9%	1 100%~	~	~	~	6 23%~	1 4%~	27 10%~	13 7%*	13 12%	16 13%	12 7%*	
5 TO 9	38 12%	631 12%	2 7%~	4 8%	2 5%~	11 15%	13 15%	4 18%~	31 13%	1 ~	~	1 20%~	1 8%~	2 8%~	3 11%~	34 12%~	10 5%*	25 23%*	12 10%	25 14%	
10 OR MORE TIMES	12 4%	265 5%	~	1 2%	4 9%~	2 3%	4 5%	1 5%~	11 4%	~	~	~	~	1 4%~	1 4%~	11 4%~	6 3%	6 6%	4 3%	8 4%	
NOT ANSWERED	16	290	1			2	1	1	5						1	3	2	3		4	
VALID CASES	312	5163	27	51	43	75	85	22	246	1	2	2	5	12	26	27	273	192	109	123	182
NUMBER OF RESPONDENTS	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q8 IN THE LAST 6 MONTHS, DID YOU AND A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT SPECIFIC THINGS YOU COULD DO TO PREVENT ILLNESS?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q8 #YES	169 76%	2683 71%	13 81%	29 78%	19 68%	45 80%	45 74%	13 72%	132 75%	1 100%	1 100%	1 100%	2 100%	6 67%	16 76%	16 89%	146 74%	95 77%	66 74%	63 76%	102 76%
NO	53 24%	1081 29%	3 19%	8 22%	9 32%	11 20%	16 26%	5 28%	43 25%	~	~	~	~	3 33%	5 24%	2 11%	50 26%	29 23%	23 26%	20 24%	32 24%
NOT ANSWERED	2	79				1	1	2								2		2		1	1
VALID CASES	222	3764	16	37	28	56	61	18	175	1	1	1	2	9	21	18	196	124	89	83	134
NUMBER OF RESPONDENTS	224 100%	3843 100%	16 100%	37 100%	28 100%	57 100%	61 100%	19 100%	177 100%	1 100%	1 100%	1 100%	2 100%	9 100%	21 100%	18 100%	198 100%	124 100%	91 100%	84 100%	135 100%

[ASKED IF Q7 >= 1 TIME]

Q9 IN THE LAST 6 MONTHS, DID YOU AND A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE?

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q9 YES	134 61%	2125 57%	11 69%~	21 57%~	14 50%~	34 62%	38 64%	11 58%~	108 62%~	~	~	~	2 ~100%~	4 44%~	12 57%~	9 50%~	118 61%~	64 52%*	62 70%*	44 54%	86 65%
NO	85 39%	1611 43%	5 31%~	16 43%~	14 50%~	21 38%	21 36%	8 42%~	65 38%~	1 100%~	1 ~100%~	1 ~	2 ~56%~	9 43%~	9 50%~	75 39%~	58 48%*	26 30%*	38 46%	47 35%	
NOT ANSWERED	5	107				2	2		4		1					5	2	3	2	2	
VALID CASES	219	3736	16	37	28	55	59	19	173	1		1	2	9	21	18	193	122	88	82	133
NUMBER OF RESPONDENTS	224 100%	3843 100%	16 100%	37 100%	28 100%	57 100%	61 100%	19 100%	177 100%	1 100%	1 100%	1 100%	2 100%	9 100%	21 100%	18 100%	198 100%	124 100%	91 100%	84 100%	135 100%

[ASKED IF Q7 >= 1 TIME]

Q10 DID YOU AND A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT WANT TO TAKE A MEDICINE?

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q10 #YES	127	1887	11	20	14	32	34	11	103				2	2	12	7	113	62	57	42	81
	95%	92%*	100%~	95%~	100%~	94%~	92%~	100%~	95%~	~	~	~	100%~	67%~	100%~	88%~	96%~	97%	93%	98%~	94%~
NO	6	166		1		2	3		5					1		1	5	2	4	1	5
	5%	8%*	~	5%~	~	6%~	8%~	~	5%~	~	~	~	~	33%~	~	13%~	4%~	3%	7%	2%~	6%~
NOT ANSWERED	22	436		1		4	4	1	9		1			1		2	8	4	7	3	6
VALID CASES	133	2053	11	21	14	34	37	11	108				2	3	12	8	118	64	61	43	86
NUMBER OF RESPONDENTS	155	2489	11	22	14	38	41	12	117		1		2	4	12	10	126	68	68	46	92
	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME AND Q9 = YES]

Q11 DID YOU AND A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT NOT WANT TO TAKE A MEDICINE?

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHTE	AS- IAN AMER	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q11 #YES	93 70%	1488 73%	9 82%~	16 76%~	10 71%~	22 65%~	25 68%~	7 64%~	75 69%~	~	~	~	2 ~100%~	10 ~ 83%~	4 50%~	84 71%~	48 75%	40 66%	32 74%~	58 67%~	
NO	40 30%	562 27%	2 18%~	5 24%~	4 29%~	12 35%~	12 32%~	4 36%~	33 31%~	~	~	~	3 ~100%~	2 17%~	4 50%~	34 29%~	16 25%	21 34%	11 26%~	28 33%~	
NOT ANSWERED	1	44					1						1		1			1	1		
VALID CASES	133	2050	11	21	14	34	37	11	108				2	3	12	8	118	64	61	43	86
NUMBER OF RESPONDENTS	134	2094	11	21	14	34	38	11	108				2	4	12	9	118	64	62	44	86
	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME AND Q9 = YES]

Q12 WHEN YOU TALKED ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE, DID A DOCTOR OR OTHER HEALTH PROVIDER ASK YOU WHAT YOU THOUGHT WAS BEST FOR YOU?

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q12 #YES	94 71%	1534 75%	8 80%~	19 90%~	10 71%~	18 53%~	29 76%~	6 55%~	78 73%~	~	~	1 ~ 50%~	3 75%~	6 50%~	9 100%~	80 68%~	45 71%	43 69%	32 74%~	59 69%~
NO	39 29%	511 25%	2 20%~	2 10%~	4 29%~	16 47%~	9 24%~	5 45%~	29 27%~	~	~	1 ~ 50%~	1 25%~	6 50%~	37 ~ 32%~	18 29%	19 31%	11 26%~	27 31%~	
NOT ANSWERED	1	49	1						1						1	1		1		
VALID CASES	133	2045	10	21	14	34	38	11	107			2	4	12	9	117	63	62	43	86
NUMBER OF RESPONDENTS	134 100%	2094 100%	11 100%	21 100%	14 100%	34 100%	38 100%	11 100%	108 100%			2 100%	4 100%	12 100%	9 100%	118 100%	64 100%	62 100%	44 100%	86 100%

[ASKED IF Q7 >= 1 TIME AND Q9 = YES]

Q13 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH CARE POSSIBLE AND 10 IS THE BEST HEALTH CARE POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE ALL YOUR HEALTH CARE IN THE LAST 6 MONTHS?

			AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER					
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE				
Q13 WORST HEALTH CARE POSSIBLE	1 0.5%	29 0.8%	~	~	1 4%	~	~	~	~	~	~	1 11%	~	1 0.5%	1 0.8%	~	1 1%	~			
01	1 0.5%	27 0.7%	~	~	1 4%	~	~	~	~	~	~	~	1 5%	1 0.5%	~	1 1%	~	~			
02	1 0.5%	39 1%	~	~	~	1 2%	~	~	~	~	~	1 11%	~	1 6%	~	1 1%	~	~			
03	5 2%	70 2%	~	2 5%	~	2 4%	1 2%	~	4 2%	~	~	~	~	1 6%	4 2%	1 0.8%	4 4%	2 2%	3 2%		
04	6 3%	85 2%	1 6%	3 8%	~	~	2 3%	~	5 3%	~	~	~	~	1 5%	6 3%	2 2%	4 4%	2 2%	4 3%		
05	10 5%	285 8%	1 6%	~	1 4%	4 7%	4 7%	~	8 5%	~	~	1 50%	1 11%	~	1 6%	9 5%	5 4%	5 6%	10 7%		
06	18 8%	223 6%	2 13%	7 19%	1 4%	3 5%	3 5%	1 5%	16 9%	~	~	~	~	~	1 6%	16 8%	8 7%	10 11%	7 9%	11 8%	
07	33 15%	493 13%	4 25%	6 16%	3 11%	10 18%	6 10%	3 16%	26 15%	~	~	1 50%	4 19%	~	32 16%	18 15%	13 14%	10 12%	22 16%		
08	42 19%	772 21%	4 25%	5 14%	9 32%	9 16%	11 19%	3 16%	37 21%	~	~	~	1 11%	3 14%	1 6%	40 21%	25 20%	16 18%	17 21%	24 18%	
09	28 13%	616 16%	1 6%	4 11%	3 11%	10 18%	8 14%	2 11%	25 14%	~	~	~	~	3 14%	2 11%	26 13%	14 11%	11 12%	13 16%	15 11%	
BEST HEALTH CARE POSSIBLE	76 34%	1096 29%	3 19%	10 27%	9 32%	17 30%	24 41%	10 53%	53 30%	1 100%	1 100%	1 100%	~	5 56%	9 43%	11 61%	60 31%	47 39%	26 29%	28 34%	45 34%
#8-10 (NET)	146 66%	2485 66%	8 50%	19 51%	21 75%	36 64%	43 73%	15 79%	115 66%	1 100%	1 100%	1 100%	~	6 67%	15 71%	14 78%	126 65%	86 70%	53 59%	58 71%	84 63%

Continued

Q13 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH CARE POSSIBLE AND 10 IS THE BEST HEALTH CARE POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE ALL YOUR HEALTH CARE IN THE LAST 6 MONTHS?

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
9-10 (NET)	104 47%	1712 46%	4 25%	14 38%	12 43%	27 48%	32 54%	12 63%	78 45%	1 100%	1 100%	1 100%	2 100%	9 100%	21 100%	13 72%	86 44%	61 50%	37 41%	41 50%	60 45%
NOT ANSWERED	3	106				1	2		3							3	2	1	2	1	
VALID CASES	221	3737	16	37	28	56	59	19	174	1	1	1	2	9	21	18	195	122	90	82	134
NUMBER OF RESPONDENTS	224 100%	3843 100%	16 100%	37 100%	28 100%	56 100%	57 100%	61 100%	177 100%	1 100%	1 100%	1 100%	2 100%	9 100%	21 100%	18 100%	198 100%	124 100%	91 100%	84 100%	135 100%
MEAN	8.05	7.91	7.50	7.51	7.93	8.00	8.32	8.89	8.05	10.0	10.0	10.0	6.00	7.22	8.29	8.44	7.98	8.26	7.69	8.07	8.00
p stat_(*=Sig @ p<=.05)		.319	~	~	~.831	.227	~	~	~	~	~	~	~	~	~	~	~	~.086	.027*	.895	.659

[ASKED IF Q7 >= 1 TIME]

Q14 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THE CARE, TESTS OR TREATMENT YOU NEEDED?

	AHP TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE	
Q14 NEVER	3 1%	104 3%	~	1 3%	1 4%	1 2%	~	~	~	~	~	~	1 50%	1 13%	~	1 6%	2 1%	2 2%	1 1%	1 2%	
SOMETIMES	35 16%	575 15%	3 19%	8 22%	2 7%	9 17%	10 16%	1 5%	27 16%	~	~	~	1 50%	1 13%	3 14%	2 11%	31 16%	16 13%	17 19%	11 13%	23 17%
USUALLY	69 31%	1243 33%	8 50%	15 41%	6 22%	19 35%	18 30%	1 5%	59 34%	~	~	~	~	1 13%	7 33%	4 22%	63 32%	34 28%	30 34%	29 35%	38 29%
ALWAYS	113 51%	1797 48%	5 31%	13 35%	18 67%	25 46%	33 54%	17 89%	88 51%	1 100%	1 100%	1 100%	~	5 63%	11 52%	11 61%	98 51%	71 58%*	40 45%	41 50%	70 53%
#ALWAYS + USUALLY (NET)	182 83%	3040 82%	13 81%	28 76%	24 89%	44 81%	51 84%	18 95%	147 84%	1 100%	1 100%	1 100%	~	6 75%	18 86%	15 83%	161 83%	105 85%	70 80%	70 85%	108 81%
TOP BOX SCORE	113 51%	1797 48%	5 31%	13 35%	18 67%	25 46%	33 54%	17 89%	88 51%	1 100%	1 100%	1 100%	~	5 63%	11 52%	11 61%	98 51%	71 58%*	40 45%	41 50%	70 53%
NOT ANSWERED	4	124			1	3			3					1			4	1	3	2	2
VALID CASES	220	3719	16	37	27	54	61	19	174	1	1	1	2	8	21	18	194	123	88	82	133
NUMBER OF RESPONDENTS	224	3843	16	37	28	57	61	19	177	1	1	1	2	9	21	18	198	124	91	84	135
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

Q15 A PERSONAL DOCTOR IS THE ONE YOU WOULD SEE IF YOU NEED A CHECK-UP, WANT ADVICE ABOUT A HEALTH PROBLEM, OR GET SICK OR HURT. DO YOU HAVE A PERSONAL DOCTOR?

	AGE								RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q15 YES	271 85%	4201 81%*	22 81%~	45 87%	37 86%~	65 84%	72 84%	22 96%~	216 86%	1 100%	2 100%~	2 ~ 40%~	10 83%~	24 92%~	22 79%~	238 86%~	158 81%*	102 91%*	103 84%	160 86%	
NO	47 15%	995 19%*	5 19%~	7 13%	6 14%~	12 16%	14 16%	1 4%~	35 14%	~	2 ~100%~	3 60%~	2 17%~	2 8%~	6 21%~	38 14%~	36 19%*	10 9%*	20 16%	26 14%	
NOT ANSWERED	10	257																			
VALID CASES	318	5196	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q16 IN THE LAST 6 MONTHS, HOW MANY TIMES DID YOU VISIT YOUR PERSONAL DOCTOR TO GET CARE FOR YOURSELF?

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q16 NONE	58	713	8	14	10	12	10	4	43		1			2	7	6	51	42	16	24	34
	23%	18%*	38%~	31%~	28%~	20%	15%	22%~	21%	~	50%~	~	~	22%~	30%~	32%~	22%~	28%*	17%	24%	23%
1 TIME	64	973	5	14	8	14	19	3	53				1	2	5	7	56	46	16	28	35
	25%	24%	24%~	31%~	22%~	23%	28%	17%~	26%	~	~	~	50%~	22%~	22%~	37%~	25%~	31%*	17%*	29%	23%
2	49	1005	4	6	8	10	15	5	38					4	5	3	45	25	22	15	33
	19%	25%*	19%~	13%~	22%~	16%	22%	28%~	19%	~	~	~	44%~	22%~	16%~	20%~	17%	23%	15%	22%	
3	40	534	1	5	6	14	10	2	34					1	3	2	36	19	19	16	22
	16%	13%	5%~	11%~	17%~	23%	15%	11%~	17%	~	~	~	11%~	13%~	11%~	16%~	13%	20%	16%	15%	
4	15	322	1	2	1	3	5	1	12	1							12	6	6	7	6
	6%	8%	5%~	4%~	3%~	5%	7%	6%~	6%	100%~	~	~	~	~	~	~	5%~	4%	6%	7%	4%
5 TO 9	24	403	2	3	3	7	6	2	20		1		1		2	1	23	7	16	8	16
	9%	10%	10%~	7%~	8%~	11%	9%	11%~	10%	~	50%~	~	50%~	~	9%~	5%~	10%~	5%*	17%*	8%	11%
10 OR MORE TIMES	5	75		1		1	2	1	4						1		4	4	1		5
	2%	2%	~	2%~	~	2%	3%	6%~	2%	~	~	~	~	~	4%~	~	2%~	3%	1%	~	3%*
NOT ANSWERED	16	238	1		1	4	5	4	12					1	1	3	11	9	6	5	9
VALID CASES	255	4026	21	45	36	61	67	18	204	1	2		2	9	23	19	227	149	96	98	151
NUMBER OF RESPONDENTS	271	4264	22	45	37	65	72	22	216	1	2		2	10	24	22	238	158	102	103	160
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q15 = YES]

Q17 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR EXPLAIN THINGS IN A WAY THAT WAS EASY TO UNDERSTAND?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV ILND	AMER PAC ALSK	IND/ OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q17 NEVER	5 3%	47 1%	1 8%~	3 ~	1 12%~	1 2%~	~	~	1 ~0.6%~	~	~	~	~	1 ~14%~	3 19%~	~	5 3%~	1 0.9%	3 4%	3 4%	2 2%
SOMETIMES	11 6%	196 6%	~	2 6%~	1 4%~	2 4%~	4 7%	~	8 5%~	~	~	~	~	~	1 6%~	1 8%~	9 5%~	2 2%*	8 10%*	4 5%	6 5%
USUALLY	42 22%	719 22%	7 54%~	11 35%~	2 8%~	7 15%~	13 23%	~	36 23%~	~	~	~	~	~	5 31%~	1 8%~	40 23%~	22 21%	17 22%	15 21%	25 22%
ALWAYS	137 70%	2245 70%	5 38%~	18 58%~	19 76%~	38 79%~	40 70%	14 100%~	114 72%~	1 100%~	1 100%~	~	2 ~100%~	6 86%~	7 44%~	11 85%~	120 69%~	82 77%*	50 64%	51 70%	83 72%
#ALWAYS + USUALLY (NET)	179 92%	2963 92%	12 92%~	29 94%~	21 84%~	45 94%~	53 93%	14 100%~	150 94%~	1 100%~	1 100%~	~	2 ~100%~	6 86%~	12 75%~	12 92%~	160 92%~	104 97%*	67 86%*	66 90%	108 93%
TOP BOX SCORE	137 70%	2245 70%	5 38%~	18 58%~	19 76%~	38 79%~	40 70%	14 100%~	114 72%~	1 100%~	1 100%~	~	2 ~100%~	6 86%~	7 44%~	11 85%~	120 69%~	82 77%*	50 64%	51 70%	83 72%
NOT ANSWERED	2	22			1	1			2							2		2	1	1	
VALID CASES	195	3206	13	31	25	48	57	14	159	1	1		2	7	16	13	174	107	78	73	116
NUMBER OF RESPONDENTS	197	3228	13	31	26	49	57	14	161	1	1		2	7	16	13	176	107	80	74	117
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q15 = YES AND Q16 >= 1 TIME]

Q18 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR LISTEN CAREFULLY TO YOU?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q18 NEVER	5 3%	67 2%	1 8%~	1 ~	2 4%~	2 4%~	~	2 1%~	~	~	~	~	2 ~	13%~	4 ~	2 0.9%	1 3%	3 4%	1 0.9%		
SOMETIMES	20 10%	251 8%	1 8%~	4 13%~	4 15%~	3 6%~	7 12%	16 10%~	~	~	~	~	1 ~	14%~	2 13%~	1 8%~	19 11%~	7 7%	13 16%*	7 10%	13 11%
USUALLY	30 15%	665 21%*	1 8%~	7 23%~	2 8%~	9 19%~	8 14%	24 15%~	~	~	~	~	4 ~	25%~	28 ~	14 13%	13 16%	12 16%	15 13%		
ALWAYS	140 72%	2214 69%	10 77%~	20 65%~	19 73%~	34 71%~	41 73%	14 100%~	117 74%~	1 100%~	1 100%~	2 ~	6 86%~	8 50%~	12 92%~	123 71%~	84 79%*	51 65%	51 70%	87 75%	
#ALWAYS + USUALLY (NET)	170 87%	2879 90%	11 85%~	27 87%~	21 81%~	43 90%~	49 88%	14 100%~	141 89%~	1 100%~	1 100%~	2 ~	6 86%~	12 75%~	12 92%~	151 87%~	98 92%*	64 81%*	63 86%	102 88%	
TOP BOX SCORE	140 72%	2214 69%	10 77%~	20 65%~	19 73%~	34 71%~	41 73%	14 100%~	117 74%~	1 100%~	1 100%~	2 ~	6 86%~	8 50%~	12 92%~	123 71%~	84 79%*	51 65%	51 70%	87 75%	
NOT ANSWERED	2	31			1	1		2							2	1	1	1	1		
VALID CASES	195	3197	13	31	26	48	56	14	159	1	1	2	7	16	13	174	106	79	73	116	
NUMBER OF RESPONDENTS	197	3228	13	31	26	49	57	14	161	1	1	2	7	16	13	176	107	80	74	117	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q15 = YES AND Q16 >= 1 TIME]

Q19 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR SHOW RESPECT FOR WHAT YOU HAD TO SAY?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHTE	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q19 NEVER	6 3%	85 3%	~	~	12%~	2%~	4%	~	2%~	~	~	~	~	19%~	~	3%~	2% 5%	2% 5%	3% 3%	3% 3%	
SOMETIMES	14 7%	193 6%	~	6%~	8%~	8%~	7%	~	6%~	~	~	~	14%~	6%~	8%~	7%~	5% 10%	5% 10%	5% 8%	5% 8%	
USUALLY	25 13%	575 18%*	23%~	19%~	~	10%~	14%	14%~	13%~	~	~	~	~	19%~	~	14%~	9% 16%	9% 16%	16% 10%	16% 10%	
ALWAYS	150 77%	2339 73%	77%~	74%~	81%~	79%~	75%	86%~	79%~	100%~	100%~	~	100%~	86%~	56%~	92%~	76%~	84%* 68%*	75% 78%	75% 78%	
#ALWAYS + USUALLY (NET)	175 90%	2915 91%	100%~	94%~	81%~	90%~	89%	100%~	92%~	100%~	100%~	~	100%~	86%~	75%~	92%~	90%~	93% 85%	92% 89%	92% 89%	
TOP BOX SCORE	150 77%	2339 73%	77%~	74%~	81%~	79%~	75%	86%~	79%~	100%~	100%~	~	100%~	86%~	56%~	92%~	76%~	84%* 68%*	75% 78%	75% 78%	
NOT ANSWERED	2	35				1	1		2						2	1	1	1	1	1	
VALID CASES	195	3193	13	31	26	48	56	14	159	1	1		2	7	16	13	174	106	79	73	116
NUMBER OF RESPONDENTS	197	3228	13	31	26	49	57	14	161	1	1		2	7	16	13	176	107	80	74	117
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q15 = YES AND Q16 >= 1 TIME]

Q20 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR SPEND ENOUGH TIME WITH YOU?

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q20 NEVER	8 4%	95 3%	1 8%	3 ~	1 12%	2 2%	4 4%	5 ~	3 3%	~	~	~	~	3 19%	8 ~	1 0.9%*	7 9%*	4 5%	4 3%		
SOMETIMES	19 10%	295 9%	6 ~	19 ~	4 8%	8 14%	17 ~	11 11%	~	~	~	~	~	~	1 8%	17 10%	9 8%	8 10%	4 5%	14 12%	
USUALLY	44 22%	856 27%	6 46%	7 23%	4 15%	12 25%	9 16%	2 14%	34 21%	~	~	~	1 ~	6 38%	2 15%	39 22%	23 21%	17 22%	15 21%	25 21%	
ALWAYS	125 64%	1950 61%	6 46%	18 58%	19 73%	31 65%	38 67%	12 86%	104 65%	1 100%	1 100%	~	2 ~	6 86%	7 44%	10 77%	111 63%	74 69%	47 59%	50 68%	74 63%
#ALWAYS + USUALLY (NET)	169 86%	2806 88%	12 92%	25 81%	23 88%	43 90%	47 82%	14 100%	138 86%	1 100%	1 100%	~	2 ~	7 100%	13 81%	12 92%	150 86%	97 91%	64 81%	65 89%	99 85%
TOP BOX SCORE	125 64%	1950 61%	6 46%	18 58%	19 73%	31 65%	38 67%	12 86%	104 65%	1 100%	1 100%	~	2 ~	6 86%	7 44%	10 77%	111 63%	74 69%	47 59%	50 68%	74 63%
NOT ANSWERED	1	31				1		1							1		1		1		
VALID CASES	196	3197	13	31	26	48	57	14	160	1	1		2	7	16	13	175	107	79	73	117
NUMBER OF RESPONDENTS	197	3228	13	31	26	49	57	14	161	1	1		2	7	16	13	176	107	80	74	117
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q15 = YES AND Q16 >= 1 TIME]

Q21 IN THE LAST 6 MONTHS, DID YOU GET CARE FROM A DOCTOR OR OTHER HEALTH PROVIDER BESIDES YOUR PERSONAL DOCTOR?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q21	AHP TOT ADLT																				
YES	113 58%	1943 61%	7 54%	17 55%	14 54%	25 52%	38 67%	11 79%	96 60%	1 ~100%	1 ~50%	4 57%	9 56%	4 31%	107 61%	59 55%	51 65%	38 52%	75 64%*		
NO	82 42%	1222 39%	6 46%	14 45%	12 46%	23 48%	19 33%	3 21%	63 40%	1 ~100%	1 ~50%	3 43%	7 44%	9 69%	67 39%	48 45%	27 35%	35 48%	42 36%*		
NOT ANSWERED	2	62				1		2							2		2		1		
VALID CASES	195	3166	13 100%	31 100%	26 100%	48 100%	57 100%	14 100%	159 100%	1 100%	1 100%	2 100%	7 100%	16 100%	13 100%	174 100%	107 100%	78 100%	73 100%	117 100%	
NUMBER OF RESPONDENTS	197 100%	3228 100%	13 100%	31 100%	26 100%	49 100%	57 100%	14 100%	161 100%	1 100%	1 100%	2 100%	7 100%	16 100%	13 100%	176 100%	107 100%	80 100%	74 100%	117 100%	

[ASKED IF Q15 = YES AND Q16 >= 1 TIME]

Q22 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR SEEM INFORMED AND UP-TO-DATE ABOUT THE CARE YOU GOT FROM THESE DOCTORS OR OTHER HEALTH PROVIDERS?

			AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER	
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	OTH- R	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE
Q22 NEVER	8 7%	119 6%	~	~	1 7%	2 8%	5 14%	7 ~	~	~	~	~	1 13%	~	8 8%	4 7%	4 8%	5 14%	3 4%
SOMETIMES	13 12%	265 14%	~	1 6%	1 7%	4 16%	5 14%	1 9%	~	~	1 100%	~	~	~	13 12%	4 7%	8 16%	3 8%	10 14%
USUALLY	31 28%	545 29%	4 57%	6 35%	3 21%	10 40%	6 17%	2 18%	~	~	~	~	3 38%	~	30 29%	13 23%	17 33%	9 24%	22 30%
ALWAYS	59 53%	927 50%	3 43%	10 59%	9 64%	9 36%	20 56%	8 73%	49 52%	1 100%	~	4 100%	4 50%	4 100%	54 51%	36 63%*	22 43%*	20 54%	39 53%
#ALWAYS + USUALLY (NET)	90 81%	1472 79%	7 100%	16 94%	12 86%	19 76%	26 72%	10 91%	76 80%	1 100%	~	4 100%	7 88%	4 100%	84 80%	49 86%	39 76%	29 78%	61 82%
TOP BOX SCORE	59 53%	927 50%	3 43%	10 59%	9 64%	9 36%	20 56%	8 73%	49 52%	1 100%	~	4 100%	4 50%	4 100%	54 51%	36 63%*	22 43%*	20 54%	39 53%
NOT ANSWERED	2	61					2	1					1		2	2		1	1
VALID CASES	111	1856	7	17	14	25	36	11	95	1	1	4	8	4	105	57	51	37	74
NUMBER OF RESPONDENTS	113	1917	7	17	14	25	38	11	96	1	1	4	9	4	107	59	51	38	75
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q15 = YES AND Q16 >= 1 TIME AND Q21 = YES]

Q23 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST PERSONAL DOCTOR POSSIBLE AND 10 IS THE BEST PERSONAL DOCTOR POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR PERSONAL DOCTOR?

			AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER				
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q23 WORST PERSONAL DOCTOR POSSIBLE	2 0.8%	60 2%	~	~	3%~	2%	~	0.5%	~	~	~	~	~	4%~	2 ~0.9%	1 ~0.7%	1 1%	1 1% 0.7%		
01	3 1%	30 0.7%	~	~	3%~	3%	~	1%~	~	~	~	~	4%~	3 ~ 1%	1 ~0.7%	2 2%	2 2%	1 0.7%		
02	2 0.8%	27 0.7%	5%~	~	3%~	~	~	0.5%	~	~	~	11%~	~	1 5%~	1 ~0.5%	~	2 2%	2 2%~		
03	4 2%	71 2%	5%~	~	3%~	3%	~	2%~	~	~	~	~	4%~	4 ~ 2%	1 ~0.7%	3 3%	2 2%	2 1%		
04	11 4%	80 2%	~	4%~	3%~	3%	6%	4%~	~	~	~	~	4%~	1 5%~	9 4%~	4 3%	6 6%	1 1%*	9 6%	
05	16 6%	203 5%	5%~	9%~	8%~	8%	5%	7%~	~	~	~	22%~	~	16 ~ 7%	11 8%	5 5%	5 5%	11 7%		
06	13 5%	153 4%	5%~	7%~	6%~	3%	6%	5%~	~	~	~	~	4%~	13 ~ 6%	10 7%	3 3%	6 6%	7 5%		
07	20 8%	289 7%	5%~	13%~	6%~	7%	9%	5%~	~	~	~	~	4%~	1 5%~	19 9%~	13 9%	7 7%	12 12%	8 5%	
08	40 16%	720 18%	35%~	18%~	8%~	22%	8%*	11%~	~	1 ~ 50%	~	1 ~ 50%	~	4 ~ 17%	1 5%~	36 16%~	25 17%	13 14%	14 14%	24 16%
09	44 18%	743 19%	5%~	18%~	28%~	12%	20%	21%~	~	~	~	11%~	17%~	3 15%~	40 18%~	21 14%	20 21%	14 14%	29 20%	
BEST PERSONAL DOCTOR POSSIBLE	96 38%	1623 41%	35%~	31%~	31%~	36%	46%	58%~	1 37%	1 100%~	~	1 ~ 50%	5 56%~	9 39%~	13 65%~	79 36%~	59 40%	33 35%	38 39%	56 38%
#8-10 (NET)	180 72%	3087 77%*	75%~	67%~	67%~	69%	74%	89%~	1 71%	2 100%~	~	2 ~100%	6 67%~	17 74%~	17 85%~	155 70%~	105 72%	66 69%	66 68%	109 74%

Continued

Q23 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST PERSONAL DOCTOR POSSIBLE AND 10 IS THE BEST PERSONAL DOCTOR POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR PERSONAL DOCTOR?

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR	ASIAN	NATV HAW/IND/PAC	AMER ALSK	MULTI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE-MALE	MALE		
9-10 (NET)	140 56%	2366 59%	8 40%~	22 49%~	21 58%~	28 47%	43 66%*	15 79%~	111 56%	1 100%~	1 50%~	1 ~ 50%~	6 67%~	13 57%~	16 80%~	119 54%~	80 55%	53 56%	52 54%	85 57%	
NOT ANSWERED	20	265	2		1	6	7	3	17				1	1	2	16	12	7	6	12	
VALID CASES	251	3999	20	45	36	59	65	19	199	1	2		2	9	23	20	222	146	95	97	148
NUMBER OF RESPONDENTS	271 100%	4264 100%	22 100%	45 100%	37 100%	65 100%	72 100%	22 100%	216 100%	1 100%	2 100%		2 100%	10 100%	24 100%	22 100%	238 100%	158 100%	102 100%	103 100%	160 100%
MEAN	8.12	8.32	7.90	8.09	7.64	7.76	8.52	9.21	8.16	10.0	9.00		9.00	7.89	7.78	8.90	8.03	8.25	7.84	8.03	8.17
p stat_(*=Sig @ p<=.05)		.138	~	~	~.217	.061	~	.581	~	~	~	~	~	~	~	~	~.269	.156	.645	.659	

[ASKED IF Q15 = YES]

Q24 SPECIALISTS ARE DOCTORS LIKE SURGEONS, HEART DOCTORS, ALLERGY DOCTORS, SKIN DOCTORS, AND OTHER DOCTORS WHO SPECIALIZE IN ONE AREA OF HEALTH CARE. IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS TO SEE A SPECIALIST?

	AGE								RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q24 YES	112 36%	2074 40%	5 19%	17 33%	13 30%	27 36%	37 43%	11 55%	92 37%	1 ~	1 50%	1 ~	1 20%	13 50%	5 19%	104 38%	57 30%*	51 47%*	34 28%*	76 41%*	
NO	199 64%	3119 60%	22 81%	34 67%	30 70%	48 64%	49 57%	9 45%	154 63%	1 100%	1 50%	2 100%	4 80%	11 92%	13 50%	22 81%	168 62%	134 70%*	58 53%*	86 72%*	108 59%*
NOT ANSWERED	17	260		1		2		3	5						1	4	3	3	3	2	
VALID CASES	311	5193	27	51	43	75	86	20	246	1	2	2	5	12	26	27	272	191	109	120	184
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q25 IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT TO SEE A SPECIALIST AS SOON AS YOU NEEDED?

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER						
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE				
Q25 NEVER	4 4%	135 7%	~	~	~	4%	6%	11%	2%	~	~	~	100%	~	8%	~	4%	2%	2%	~	4%	6%	
SOMETIMES	10 9%	292 15%	~	4%	2%	15%	8%	6%	~	10%	~	~	~	~	8%	~	10%	5%	4%	9%	9%	9%	10%
USUALLY	33 31%	614 31%	40%	29%	15%	38%	35%	11%	25%	~	~	~	100%	38%	25%	31%	27%	15%	17%	36%	34%	29%	
ALWAYS	59 56%	926 47%	60%	47%	69%	50%	53%	78%	50%	~	100%	~	~	46%	75%	55%	60%	33%	24%	51%	56%	56%	
#ALWAYS + USUALLY (NET)	92 87%	1540 78%	100%	76%	85%	88%	88%	89%	75%	~	100%	~	100%	85%	100%	86%	87%	48%	41%	87%	91%	85%	
TOP BOX SCORE	59 56%	926 47%	60%	47%	69%	50%	53%	78%	50%	~	100%	~	~	46%	75%	55%	60%	33%	24%	51%	56%	56%	
NOT ANSWERED	6	78				1	3	2	6						1	5	2	4	2	4			
VALID CASES	106	1967	5	17	13	26	34	9	86	1	1	1	13	4	99	55	47	32	72				
NUMBER OF RESPONDENTS	112	2045	5	17	13	27	37	11	92	1	1	1	13	5	104	57	51	34	76				
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q24 = YES]

Q26 HOW MANY SPECIALISTS HAVE YOU SEEN IN THE LAST 6 MONTHS?

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q26 NONE	2 2%	93 5%*	~	1 6%~	~	~	1 3%~	~	2 2%~	~	~	~	~	~	~	2 2%~	1 2%	1 2%~	~	2 3%~
1 SPECIALIST	55 51%	1033 52%	4 80%~	10 59%~	7 54%~	13 50%~	17 50%~	4 40%~	45 52%~	~	~	1 ~100%~	7 ~54%~	1 25%~	53 53%~	36 65%*	18 38%~	14 44%~	41 56%~	
2	30 28%	522 26%	1 20%~	3 18%~	2 15%~	8 31%~	12 35%~	2 20%~	23 26%~	1 ~100%~	~	1 ~100%~	3 23%~	1 25%~	27 27%~	14 25%	14 29%~	9 28%~	19 26%~	
3	10 9%	217 11%	~	1 6%~	~	3 12%~	3 9%~	3 30%~	8 9%~	~	~	~	~	2 ~15%~	10 ~10%~	2 4%*	7 15%~	6 19%~	4 5%~	
4	5 5%	74 4%	~	~	3 23%~	1 4%~	1 3%~	~	4 5%~	~	~	~	~	1 8%~	1 25%~	4 4%~	1 2%	4 8%~	2 6%~	3 4%~
5 OR MORE SPECIALISTS	5 5%	41 2%	~	2 12%~	1 8%~	1 4%~	1 ~10%~	~	5 6%~	~	~	~	~	~	1 25%~	4 4%~	1 2%	4 8%~	1 3%~	4 5%~
NOT ANSWERED	5	66				1	3	1	5					1	4	2	3	2	3	
VALID CASES	107	1979	5	17	13	26	34	10	87	1		1	1	13	4	100	55	48	32	73
NUMBER OF RESPONDENTS	112	2045	5	17	13	27	37	11	92	1		1	1	13	5	104	57	51	34	76
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

Q27 WE WANT TO KNOW YOUR RATING OF THE SPECIALIST YOU SAW MOST OFTEN IN THE LAST 6 MONTHS. USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST SPECIALIST POSSIBLE AND 10 IS THE BEST SPECIALIST POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE THAT SPECIALIST?

	AHP TOT ADULT	OHP TOT ADULT	AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	MALE	FE- MALE		
Q27 WORST SPECIALIST POSSIBLE		21 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
01		7 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
02		2 2%	19 1%	1 6%	~	~	1 3%	~	2 2%	~	~	~	~	~	2 2%	2 4%	~	~	2 3%		
03		1 1%	28 2%	~	~	1 4%	~	~	1 1%	~	~	~	~	~	1 1%	~	1 2%	~	1 3%		
04		2 2%	18 1%	~	~	~	~	2 6%	~	2 2%	~	~	~	~	~	2 4%	~	~	1 3%	1 1%	
05		5 5%	88 5%	2 13%	~	~	3 9%	~	5 6%	~	~	~	~	~	5 5%	1 2%	4 9%	4 12%	1 1%		
06		1 1%	76 4%	~	~	1 8%	~	~	1 1%	~	~	~	~	~	1 1%	~	1 2%	~	1 1%		
07		4 4%	154 8%	1 6%	~	2 8%	1 3%	~	3 4%	~	~	1 100%	~	~	4 4%	2 4%	2 4%	~	4 6%		
08		19 18%	272 15%	1 20%	2 13%	2 15%	4 17%	8 24%	1 10%	14 17%	~	~	~	~	2 15%	1 25%	17 18%	9 17%	8 18%	3 9%	15 22%
09		20 19%	345 19%	1 20%	4 25%	1 8%	4 17%	9 27%	1 10%	18 22%	~	~	~	~	2 15%	20 21%	12 22%	8 18%	7 22%	13 19%	
BEST SPECIALIST POSSIBLE		49 48%	812 44%	3 60%	6 38%	9 69%	13 54%	9 27%	8 80%	37 45%	1 ~100%	~	1 ~100%	9 69%	3 75%	44 46%	26 48%	21 47%	16 50%	32 46%	
#8-10 (NET)		88 85%	1429 78%	5 100%	12 75%	12 92%	21 88%	26 79%	10 100%	69 83%	1 ~100%	~	1 ~100%	13 100%	4 100%	81 84%	47 87%	37 82%	26 81%	60 87%	

Continued

Q27 WE WANT TO KNOW YOUR RATING OF THE SPECIALIST YOU SAW MOST OFTEN IN THE LAST 6 MONTHS. USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST SPECIALIST POSSIBLE AND 10 IS THE BEST SPECIALIST POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE THAT SPECIALIST?

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
9-10 (NET)	69 67%	1157 63%	4 80%~	10 63%~	10 77%~	17 71%~	18 55%~	9 90%~	55 66%~	1 ~100%~		1 ~100%~	11 85%~	3 75%~	64 67%~	38 70%~	29 64%~	23 72%~	45 65%~
NOT ANSWERED	2	34				2		2						2		2		2	
VALID CASES	103	1838	5	16	13	24	33	10	83	1	1	1	13	4	96	54	45	32	69
NUMBER OF RESPONDENTS	105 100%	1872 100%	5 100%	16 100%	13 100%	26 100%	33 100%	10 100%	85 100%	1 100%	1 100%	1 100%	13 100%	4 100%	98 100%	54 100%	47 100%	32 100%	71 100%
MEAN	8.70	8.47	9.40	8.19	9.31	8.96	8.09	9.70	8.57	10.0	7.00	10.0	9.54	9.50	8.65	8.72	8.64	8.56	8.75
p stat_(*=Sig @ p<=.05)		.248	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

[ASKED IF Q24 = YES AND Q26 >= 1 SPECIALIST]

Q28 IN THE LAST 6 MONTHS, DID YOU LOOK FOR ANY INFORMATION IN WRITTEN MATERIALS OR ON THE INTERNET ABOUT HOW YOUR HEALTH PLAN WORKS?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q28 YES	72 23%	1182 23%	7 26%	12 23%	16 37%	12 16%	19 23%	5 24%	58 23%	~	~	50%	~	18%	31%	4% 26%	22%	24%	20 17%*	51 28%*	
NO	237 77%	3968 77%	20 74%	40 77%	27 63%	63 84%	65 77%	16 76%	189 77%	1 100%	2 100%	1 50%	5 100%	9 82%	18 69%	25 96%	202 74%	149 78%	82 76%	100 83%*	132 72%*
NOT ANSWERED	19	303				2	2	2	4				1		2	4	2	4	3	3	
VALID CASES	309	5150	27	52	43	75	84	21	247	1	2	2	5	11	26	26	272	192	108	120	183
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q29 IN THE LAST 6 MONTHS, HOW OFTEN DID THE WRITTEN MATERIALS OR THE INTERNET PROVIDE THE INFORMATION YOU NEEDED ABOUT HOW YOUR HEALTH PLAN WORKS?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	OTH- R	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q29 NEVER	9 12%	119 12%	1 14%~	2 17%~	3 19%~	2 17%~	1 5%~	7 12%~	~	~	~	~	1 50%~	~	8 11%~	6 14%~	3 12%~	2 10%~	7 14%~	
SOMETIMES	26 36%	339 34%	2 29%~	4 33%~	7 44%~	5 42%~	4 21%~	3 60%~	24 41%~	~	1 100%~	~	~	~	26 37%~	13 30%~	13 50%~	8 40%~	17 33%~	
USUALLY	20 28%	332 33%	2 29%~	3 25%~	4 25%~	3 25%~	7 37%~	1 20%~	15 26%~	~	~	~	~	4 50%~	20 29%~	11 26%~	7 27%~	4 20%~	16 31%~	
ALWAYS	17 24%	213 21%	2 29%~	3 25%~	2 13%~	2 17%~	7 37%~	1 20%~	12 21%~	~	~	~	1 50%~	4 50%~	1 100%~	16 23%~	13 30%~	3 12%~	6 30%~	11 22%~
#ALWAYS + USUALLY (NET)	37 51%	545 54%	4 57%~	6 50%~	6 38%~	5 42%~	14 74%~	2 40%~	27 47%~	~	~	~	1 50%~	8 100%~	1 100%~	36 51%~	24 56%~	10 38%~	10 50%~	27 53%~
TOP BOX SCORE	17 24%	213 21%	2 29%~	3 25%~	2 13%~	2 17%~	7 37%~	1 20%~	12 21%~	~	~	~	1 50%~	4 50%~	1 100%~	16 23%~	13 30%~	3 12%~	6 30%~	11 22%~
NOT ANSWERED		19																		
VALID CASES	72	1003	7	12	16	12	19	5	58		1		2	8	1	70	43	26	20	51
NUMBER OF RESPONDENTS	72	1022	7	12	16	12	19	5	58		1		2	8	1	70	43	26	20	51
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

Q30 IN THE LAST 6 MONTHS, DID YOU GET INFORMATION OR HELP FROM YOUR HEALTH PLAN'S CUSTOMER SERVICE?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	FE- MALE	MALE		
Q30 YES	93 30%	1525 30%	5 19%	20 39%	11 26%	20 27%	26 31%	9 43%	72 30%	1 100%	1 50%	1 50%	1 20%	2 17%	9 35%	9 33%	80 30%	59 31%	32 30%	25 21%*	66 36%*
NO	215 70%	3584 70%	22 81%	31 61%	31 74%	55 73%	12 69%	17 57%	172 70%	1 50%	1 50%	4 80%	10 83%	17 65%	18 67%	189 70%	133 69%	74 70%	94 79%*	116 64%*	
NOT ANSWERED	20	344	1	1	2	1	2	7							1	7	2	6	4	4	
VALID CASES	308	5109	27	51	42	75	85	21	244	1	2	2	5	12	26	27	269	192	106	119	182
NUMBER OF RESPONDENTS	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q31 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR HEALTH PLAN'S CUSTOMER SERVICE GIVE YOU THE INFORMATION OR HELP YOU NEEDED?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER PAC ALSK	IND/ NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q31 NEVER	4 4%	51 4%		2 ~ 10%~			2 ~ 8%~		3 ~ 4%~								1 ~ 13%~	3 ~ 4%~	3 ~ 5%~	1 ~ 3%~	1 ~ 4%~	3 ~ 5%~
SOMETIMES	20 22%	295 21%		5 ~ 25%~	5 ~ 45%~	3 ~ 15%~	6 ~ 24%~		16 ~ 23%~	1 ~ 100%~	1 ~ 100%~	1 ~ 100%~	1 ~ 50%~				1 ~ 13%~	19 ~ 24%~	9 ~ 16%~	11 ~ 34%~	5 ~ 21%~	14 ~ 22%~
USUALLY	27 30%	400 28%	3 60%~	5 ~ 25%~	3 ~ 27%~	6 ~ 30%~	6 ~ 24%~	4 ~ 50%~	19 ~ 27%~						5 ~ 63%~	2 ~ 25%~	24 ~ 30%~	14 ~ 25%~	12 ~ 38%~	6 ~ 25%~	21 ~ 32%~	
ALWAYS	40 44%	670 47%	2 40%~	8 40%~	3 27%~	11 55%~	11 44%~	4 50%~	33 46%~	1 100%~				1 ~ 50%~	3 38%~		4 50%~	33 42%~	31 54%~	8 25%~	12 50%~	27 42%~
#ALWAYS + USUALLY (NET)	67 74%	1070 76%	5 100%~	13 65%~	6 55%~	17 85%~	17 68%~	8 100%~	52 73%~	1 100%~				1 ~ 50%~	8 100%~		6 75%~	57 72%~	45 79%~	20 63%~	18 75%~	48 74%~
TOP BOX SCORE	40 44%	670 47%	2 40%~	8 40%~	3 27%~	11 55%~	11 44%~	4 50%~	33 46%~	1 100%~				1 ~ 50%~	3 38%~		4 50%~	33 42%~	31 54%~	8 25%~	12 50%~	27 42%~
NOT ANSWERED	2	26					1 1	1	1						1	1	1	2			1	1
VALID CASES	91	1415	5	20	11	20	25	8	71	1	1	1	1	2	8	8	79	57	32	24	65	
NUMBER OF RESPONDENTS	93	1441	5	20	11	20	26	9	72	1	1	1	1	2	9	9	80	59	32	25	66	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

Q32 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR HEALTH PLAN'S CUSTOMER SERVICE STAFF TREAT YOU WITH COURTESY AND RESPECT?

	AHP TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q32 NEVER	2 2%	24 2%		2 ~ 10%~					1 1%~							1 13%~	1 1%~	1 2%~	1 3%~		2 3%~
SOMETIMES	5 5%	83 6%		1 ~ 5%~	1 9%~	1 5%~	1 4%~		4 6%~			1 ~100%~					5 6%~	2 4%~	3 9%~	2 8%~	2 3%~
USUALLY	18 20%	312 22%		2 ~ 10%~	4 36%~	2 10%~	9 36%~	1 13%~	17 24%~								18 23%~	8 14%~	10 31%~	7 29%~	11 17%~
ALWAYS	66 73%	995 70%	5 100%~	15 75%~	6 55%~	17 85%~	15 60%~	7 88%~	49 69%~	1 100%~	1 100%~	1 100%~		2 ~100%~	8 100%~	7 88%~	55 70%~	46 81%~	18 56%~	15 63%~	50 77%~
#ALWAYS + USUALLY (NET)	84 92%	1307 92%	5 100%~	17 85%~	10 91%~	19 95%~	24 96%~	8 100%~	66 93%~	1 100%~	1 100%~	1 100%~		2 ~100%~	8 100%~	7 88%~	73 92%~	54 95%~	28 87%~	22 92%~	61 94%~
TOP BOX SCORE	66 73%	995 70%	5 100%~	15 75%~	6 55%~	17 85%~	15 60%~	7 88%~	49 69%~	1 100%~	1 100%~	1 100%~		2 ~100%~	8 100%~	7 88%~	55 70%~	46 81%~	18 56%~	15 63%~	50 77%~
NOT ANSWERED	2	27					1 1	1	1						1	1	1	2		1	1
VALID CASES	91	1414	5	20	11	20	25	8	71	1	1	1	1	2	8	8	79	57	32	24	65
NUMBER OF RESPONDENTS	93	1441	5	20	11	20	26	9	72	1	1	1	1	2	9	9	80	59	32	25	66
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

Q33 IN THE LAST 6 MONTHS, DID YOUR HEALTH PLAN GIVE YOU ANY FORMS TO FILL OUT?

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q33 YES	128 42%	1804 36%*	9 35%~	22 43%	21 49%~	35 47%	32 39%	6 32%~	100 41%			1 ~ 50%~		5 ~ 42%~	13 52%~	12 44%~	111 42%~	75 40%	47 45%	51 43%	74 41%
NO	174 58%	3261 64%*	17 65%~	29 57%	22 51%~	39 53%	51 61%	13 68%~	141 59%	1 100%	2 ~ 100%~	1 50%~	4 ~ 100%~	7 58%~	12 48%~	15 56%~	154 58%~	113 60%	58 55%	67 57%	106 59%
NOT ANSWERED	26	388	1	1		3	3	4	10				1		1	1	11	6	7	5	6
VALID CASES	302	5065	26	51	43	74	83	19	241	1	2	2	4	12	25	27	265	188	105	118	180
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

PQ34 IN THE LAST 6 MONTHS, HOW OFTEN WERE THE FORMS FROM YOUR HEALTH PLAN EASY TO FILL OUT?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV ILND	AMER PAC ALSK	OTH	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
PQ34 NEVER	5 2%	97 2%	1 4%	1 2%	1 2%	1 ~	1 1%	2 ~	0.8%	~	~	~	~	1 8%	~	1 4%	2 0.8%	2 1%	2 2%	1 0.9%	3 2%
SOMETIMES	21 7%	322 6%	1 4%	4 8%	6 14%	5 7%	4 5%	1 5%	20 8%*	~	~	~	~	1 4%	1 8%	19 7%	15 8%	5 5%	9 8%	12 7%	
USUALLY	45 15%	697 14%	2 8%	9 18%	7 16%	12 16%	12 15%	2 11%	39 16%	~	~	1 50%	~	2 8%	1 4%	42 16%	24 13%	20 20%	18 16%	26 15%	
ALWAYS	226 76%	3891 78%	22 85%	36 72%	29 67%	56 77%	63 79%	16 84%	176 74%	1 100%	2 100%	1 50%	4 100%	11 92%	22 88%	198 76%	145 78%	75 74%	88 76%	136 77%	
#ALWAYS + USUALLY (NET)	271 91%	4589 92%	24 92%	45 90%	36 84%	68 93%	75 94%	18 95%	215 91%	1 100%	2 100%	2 100%	4 100%	11 92%	24 96%	240 92%	169 91%	95 93%	106 91%	162 92%	
TOP BOX SCORE	226 76%	3891 78%	22 85%	36 72%	29 67%	56 77%	63 79%	16 84%	176 74%	1 100%	2 100%	1 50%	4 100%	11 92%	22 88%	198 76%	145 78%	75 74%	88 76%	136 77%	
NOT ANSWERED	5	87		1		1	3		4						1	4	2	3	2	3	
VALID CASES	297	5008	26	50	43	73	80	19	237	1	2	2	4	12	25	261	186	102	116	177	
NUMBER OF RESPONDENTS	302	5095	26	51	43	74	83	19	241	1	2	2	4	12	25	265	188	105	118	180	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q33 = YES. RESPONSE OF 'ALWAYS' PADDED WITH Q33 = NO]

Q35 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH PLAN POSSIBLE AND 10 IS THE BEST HEALTH PLAN POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR HEALTH PLAN?

			AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER					
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q35 WORST HEALTH PLAN POSSIBLE	7 2%	59 1%	~	1 2%	2 5%	3 4%	1 1%	~	3 1%	~	~	1 25%	2 18%	1 4%	~	7 3%	5 3%	2 2%	3 3%	4 2%	
01	1 0.3%	31 0.6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
02	4 1%	40 0.8%	~	~	1 3%	2 3%	1 1%	~	3 1%	~	~	~	1 9%	~	~	4 2%	2 1%	2 2%	2 2%	2 1%	
03	3 1%	85 2%	~	~	~	~	2 2%	1 5%	2 0.9%	~	~	1 25%	~	~	~	3 1%	3 2%	~	2 2%	1 0.6%	
04	11 4%	121 2%	~	4 8%	1 3%	3 4%	3 4%	~	10 4%	~	~	~	~	~	1 4%	10 4%	7 4%	4 4%	3 3%	8 5%	
05	21 7%	451 9%	2 8%	5 10%	4 10%	4 5%	6 7%	~	17 7%	~	~	1 25%	1 9%	2 8%	2 8%	18 7%	11 6%	10 10%	6 5%	15 9%	
06	35 12%	332 7%*	4 16%	7 14%	4 10%	7 10%	11 14%	~	30 13%	~	~	~	~	3 12%	1 4%	33 13%	20 11%	13 12%	10 9%	24 14%	
07	33 11%	632 13%	5 20%	7 14%	3 8%	8 11%	6 7%	3 16%	28 12%	~	1 50%	~	~	1 4%	1 4%	30 12%	24 13%	7 7%*	14 12%	18 10%	
08	52 18%	921 19%	7 28%	9 18%	7 18%	12 16%	15 19%	2 11%	46 20%*	~	~	~	~	5 19%	1 4%	51 20%	31 17%	19 18%	28 24%*	24 14%*	
09	36 12%	768 16%	2 8%	3 6%	6 15%	10 14%	10 12%	4 21%	29 13%	1 100%	~	~	~	2 8%	3 12%	30 12%	18 10%	17 16%	15 13%	20 12%	
BEST HEALTH PLAN POSSIBLE	90 31%	1430 29%	5 20%	13 27%	12 30%	24 33%	25 31%	9 47%	64 28%*	1 50%	1 100%	1 25%	7 64%	12 46%	17 65%	72 28%	58 32%	31 30%	32 28%	57 33%	
#8-10 (NET)	178 61%	3119 64%	14 56%	25 51%	25 63%	46 63%	50 63%	15 79%	139 60%	1 100%	1 50%	1 100%	1 25%	7 64%	19 73%	21 81%	153 59%	107 60%	67 64%	75 65%	101 58%

Continued

Q35 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH PLAN POSSIBLE AND 10 IS THE BEST HEALTH PLAN POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR HEALTH PLAN?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE				
9-10 (NET)	126 43%	2198 45%	7 28%	16 33%	18 45%	34 47%	35 44%	13 68%	93 40%	1 100%	1 50%	1 100%	1 25%	7 64%	14 54%	20 77%	102 40%	76 42%	48 46%	47 41%	77 45%
NOT ANSWERED	35	583	2	3	3	4	6	4	19		1	1	1		2	18	15	7	8	13	
VALID CASES	293	4870	25	49	40	73	80	19	232	1	2	1	4	11	26	26	258	179	105	115	173
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%
MEAN	7.67	7.82	7.72	7.37	7.52	7.67	7.73	8.74	7.68	9.00	8.50	10.0	4.50	7.00	8.19	8.92	7.57	7.68	7.73	7.73	7.66
p stat_(*=Sig @ p<=.05)		.258	~	~	~1.00	.811	~	.920	~	~	~	~	~	~	~	~	~	.974	.741	.735	.947

Q35A IN THE LAST 6 MONTHS, DID YOU HAVE A HEALTH PROBLEM FOR WHICH YOU NEEDED SPECIAL MEDICAL EQUIPMENT, SUCH AS A CANE, A WHEELCHAIR, OR OXYGEN EQUIPMENT?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLK OR AFR-	AS- IAN	NATV ILND	AMER HAW/ IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE
Q35A YES	41 13%	736 14%	1 4%	6 12%	6 14%	9 12%	10 12%	6 30%	33 14%	~	~	~	~	2 17%	4 16%	2 7%	37 14%	13 7%*	26 25%*	20 17%	18 10%*
NO	264 87%	4378 86%	26 96%	45 88%	37 86%	66 88%	72 88%	14 70%	209 86%	1 100%	2 100%	2 100%	5 100%	10 83%	21 84%	26 93%	229 86%	178 93%*	79 75%*	100 83%	161 90%*
NOT ANSWERED	23	339		1		2	4	3	9						1	10	3	7	3	7	
VALID CASES	305	5114	27	51	43	75	82	20	242	1	2	2	5	12	25	28	266	191	105	120	179
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q35B IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THE MEDICAL EQUIPMENT YOU NEEDED THROUGH YOUR HEALTH PLAN?

	AHP TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV ILND	AMER PAC ALSK	OTH	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE
Q35B NEVER	8 20%	123 19%~100%	1 17%	1 33%	2 33%	2 20%	5 15%	~	~	~	~	2 100%	~	1 50%	6 16%	3 23%	4 15%	5 25%	2 11%		
SOMETIMES	5 12%	72 11%~	~	1 17%	2 33%	2 20%	3 9%	~	~	~	~	~	1 25%	1 50%	4 11%	~	5 19%	3 15%	2 11%		
USUALLY	8 20%	177 27%~	~	1 17%	1 17%	4 44%	2 20%	7 21%	~	~	~	~	1 25%	~	8 22%	1 8%	7 27%	4 20%	4 22%		
ALWAYS	20 49%	279 43%~	~	3 50%	1 17%	5 56%	4 40%	6 100%	18 55%	~	~	~	~	2 50%	19 51%	9 69%	10 38%	8 40%	10 56%		
#ALWAYS + USUALLY (NET)	28 68%	456 70%~	~	4 67%	2 33%	9 100%	6 60%	6 100%	25 76%	~	~	~	~	3 75%	27 73%	10 77%	17 65%	12 60%	14 78%		
TOP BOX SCORE	20 49%	279 43%~	~	3 50%	1 17%	5 56%	4 40%	6 100%	18 55%	~	~	~	~	2 50%	19 51%	9 69%	10 38%	8 40%	10 56%		
NOT ANSWERED		24																			
VALID CASES	41	651	1	6	6	9	10	6	33					2	4	2	37	13	26	20	18
NUMBER OF RESPONDENTS	41	675	1	6	6	9	10	6	33					2	4	2	37	13	26	20	18
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35A = YES]

Q35C IN THE LAST 6 MONTHS, DID YOU HAVE ANY HEALTH PROBLEMS THAT NEEDED SPECIAL THERAPY, SUCH AS PHYSICAL, OCCUPATIONAL, OR SPEECH THERAPY?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q35C YES	39 13%	760 15%	2 7%	6 12%	5 12%	9 12%	13 16%	3 14%	31 13%	~	~	~	~	2 20%	3 12%	2 8%	35 13%	19 10%	19 18%	18 15%	21 12%
NO	263 87%	4319 85%	25 93%	45 88%	38 88%	65 88%	67 84%	18 86%	211 87%	1 100%	2 100%	2 100%	5 100%	8 80%	23 88%	23 92%	232 87%	169 90%	87 82%	99 85%	159 88%
NOT ANSWERED	26	373		1		3	6	2	9					2		3	9	6	6	6	6
VALID CASES	302	5080	27	51	43	74	80	21	242	1	2	2	5	10	26	25	267	188	106	117	180
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q35D IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THE SPECIAL THERAPY YOU NEEDED THROUGH YOUR HEALTH PLAN?

	AHP TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER PAC ALSK	IND/ NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	MALE
Q35D NEVER	14 40%	165 23%~	1 50%~	2 40%~	2 40%~	4 44%~	5 45%~	10 37%~	~	~	~	~	~	2 100%~	1 33%~	2 100%~	11 35%~	10 59%~	4 22%~	3 18%~	11 61%~
SOMETIMES	9 26%	141 19%~	~	1 20%~	2 40%~	2 22%~	2 18%~	1 50%~	7 26%~	~	~	~	~	~	1 33%~	~	9 29%~	2 12%~	7 39%~	6 35%~	3 17%~
USUALLY	5 14%	179 25%~	~	1 20%~	~	2 22%~	1 9%~	1 50%~	5 19%~	~	~	~	~	~	~	~	5 16%~	1 6%~	4 22%~	5 29%~	~
ALWAYS	7 20%	239 33%~	1 50%~	1 20%~	1 20%~	1 11%~	3 27%~	5 19%~	~	~	~	~	~	~	1 33%~	~	6 19%~	4 24%~	3 17%~	3 18%~	4 22%~
#ALWAYS + USUALLY (NET)	12 34%	418 58%~	1 50%~	2 40%~	1 20%~	3 33%~	4 36%~	1 50%~	10 37%~	~	~	~	~	~	1 33%~	~	11 35%~	5 29%~	7 39%~	8 47%~	4 22%~
TOP BOX SCORE	7 20%	239 33%~	1 50%~	1 20%~	1 20%~	1 11%~	3 27%~	5 19%~	~	~	~	~	~	~	1 33%~	~	6 19%~	4 24%~	3 17%~	3 18%~	4 22%~
NOT ANSWERED	4	20	~	1	~	~	2	1	4	~	~	~	~	~	~	~	4	2	1	1	3
VALID CASES	35	725	2	5	5	9	11	2	27	~	~	~	~	2	3	2	31	17	18	17	18
NUMBER OF RESPONDENTS	39	745	2	6	5	9	13	3	31	~	~	~	~	2	3	2	35	19	19	18	21
	100%	100%	100%	100%	100%	100%	100%	100%	100%	~	~	~	~	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35C = YES]

Q35E IN THE LAST 6 MONTHS, DID YOU VISIT A PROVIDER FOR A SPECIFIC HEALTH ISSUE?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV ILND	AMER PAC ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q35E YES	175 57%	2872 56%	12 44%	32 62%	21 49%	41 54%	51 59%	14 74%	143 58%	1 ~	1 50%	1 ~	6 20%	17 50%	10 36%	162 60%	95 49%*	74 68%*	63 52%	109 60%	
NO	133 43%	2261 44%	15 56%	20 38%	22 51%	35 46%	5 41%	5 26%	103 42%	1 100%	1 50%	2 100%	4 80%	6 50%	9 35%	18 64%	110 40%	97 51%*	35 32%*	59 48%	74 40%
NOT ANSWERED	20	320			1		4	5							4	2	3	1	3		
VALID CASES	308	5133	27	52	43	76	86	19	246	1	2	2	5	12	26	28	272	192	109	122	183
NUMBER OF RESPONDENTS	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q35F HOW MUCH EFFORT WAS MADE TO HELP YOU UNDERSTAND YOUR HEALTH ISSUE?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35F																					
NO EFFORT AT ALL	12 7%	94 3%	1 8%~	1 3%~	2 11%~	5 12%~	1 2%~	2 18%~	7 5%~	~	~	~	~	4 67%~	1 7%~	2 22%~	10 6%~	5 5%	7 10%	4 6%	8 8%
A LITTLE EFFORT WAS MADE	13 8%	213 8%	1 8%~	1 3%~	~	5 12%~	5 10%~	~	9 7%~	~	~	~	~	1 17%~	1 7%~	2 22%~	10 6%~	4 4%	9 13%*	8 13%	5 5%
SOME EFFORT WAS MADE	31 19%	662 24%	2 17%~	10 31%~	3 16%~	4 10%~	10 20%~	1 9%~	25 18%~	~	~	1 ~100%~	3 ~20%~	1 11%~	29 19%~	14 15%	14 21%	11 18%	19 19%		
A LOT OF EFFORT WAS MADE	111 66%	1793 65%	8 67%~	20 63%~	14 74%~	26 65%~	33 67%~	8 73%~	96 70%~	1 ~100%~	~	1 ~	10 17%~	4 67%~	106 44%~	71 68%~	38 56%*	39 76%*	70 56%*	63% 69%	
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	142 85%	2455 89%	10 83%~	30 94%~	17 89%~	30 75%~	43 88%~	9 82%~	121 88%~	1 ~100%~	1 ~100%~	1 17%~	13 87%~	5 56%~	135 87%~	85 90%*	52 76%*	50 81%*	89 87%		
TOP BOX SCORE	111 66%	1793 65%	8 67%~	20 63%~	14 74%~	26 65%~	33 67%~	8 73%~	96 70%~	1 ~100%~	~	1 ~	10 17%~	4 67%~	106 44%~	71 68%~	38 56%*	39 76%*	70 56%*	63% 69%	
NOT ANSWERED	8	95			2	1	2	3	6				2	1	7	1	6	1	7		
VALID CASES	167	2763	12	32	19	40	49	11	137	1	1	6	15	9	155	94	68	62	102		
NUMBER OF RESPONDENTS	175	2858	12	32	21	41	51	14	143	1	1	6	17	10	162	95	74	63	109		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		

[ASKED IF Q35E = YES]

Q35G HOW MUCH EFFORT WAS MADE TO LISTEN TO THE THINGS THAT MATTER MOST TO YOU ABOUT YOUR HEALTH ISSUE?

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35G																					
NO EFFORT AT ALL	12 7%	135 5%	1 8%~	1 3%~	2 10%~	5 13%~	1 2%~	2 17%~	6 4%~	~	~	~	~	5 83%~	1 6%~	3 33%~	9 6%~	5 5%	7 10%	5 8%	7 7%
A LITTLE EFFORT WAS MADE	14 8%	226 8%	1 8%~	2 6%~	1 5%~	3 8%~	5 10%~	1 8%~	11 8%~	~	~	~	~	~	2 12%~	1 11%~	13 8%~	4 4%*	10 14%*	5 8%	9 9%
SOME EFFORT WAS MADE	40 24%	652 24%	1 8%~	12 37%~	4 19%~	8 21%~	14 29%~	1 8%~	35 26%~	~	~	~	~	~	3 18%~	1 11%~	38 24%~	21 22%	18 26%	16 26%	24 23%
A LOT OF EFFORT WAS MADE	103 61%	1759 63%	9 75%~	17 53%~	14 67%~	23 59%~	29 59%~	8 67%~	85 62%~	1 ~100%~	~	1 ~100%~	1 17%~	1 17%~	11 65%~	4 44%~	97 62%~	64 68%*	35 50%*	35 57%	65 62%
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	143 85%	2411 87%	10 83%~	29 91%~	18 86%~	31 79%~	43 88%~	9 75%~	120 88%~	1 ~100%~	~	1 ~100%~	1 17%~	1 82%~	14 56%~	5 86%~	135 90%*	85 90%*	53 76%*	51 84%	89 85%
TOP BOX SCORE	103 61%	1759 63%	9 75%~	17 53%~	14 67%~	23 59%~	29 59%~	8 67%~	85 62%~	1 ~100%~	~	1 ~100%~	1 17%~	1 65%~	11 65%~	4 44%~	97 62%~	64 68%*	35 50%*	35 57%	65 62%
NOT ANSWERED	6	87				2	2	2	6							1	5	1	4	2	4
VALID CASES	169	2771	12	32	21	39	49	12	137	1		1	6	17	9	157	94	70	61	105	
NUMBER OF RESPONDENTS	175	2858	12	32	21	41	51	14	143	1		1	6	17	10	162	95	74	63	109	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q35E = YES]

Q35H HOW MUCH EFFORT WAS MADE TO INCLUDE WHAT MATTERS MOST TO YOU IN CHOOSING WHAT TO DO NEXT?

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q35H																					
NO EFFORT AT ALL	14 8%	191 7%	1 8%~	~	1 5%~	6 15%~	4 8%~	2 17%~	8 6%~	~	~	~	~	4 67%~	2 13%~	2 22%~	12 8%~	7 8%	7 10%	5 8%	9 8%
A LITTLE EFFORT WAS MADE	16 9%	242 9%	1 8%~	5 16%~	1 5%~	6 15%~	3 6%~	~	11 8%~	~	~	~	~	1 17%~	1 6%~	3 33%~	12 8%~	4 4%*	12 17%*	8 13%	8 8%
SOME EFFORT WAS MADE	41 24%	781 28%	1 8%~	9 28%~	6 29%~	8 20%~	12 25%~	3 25%~	36 26%~	~	~	~	1 100%~	~	4 25%~	41 26%~	20 22%	19 26%	16 26%	24 23%	
A LOT OF EFFORT WAS MADE	98 58%	1558 56%	9 75%~	18 56%~	13 62%~	21 51%~	29 60%~	7 58%~	84 60%~	1 100%~	~	~	~	1 17%~	9 56%~	4 44%~	93 59%~	62 67%*	34 47%*	32 52%	65 61%
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	139 82%	2339 84%	10 83%~	27 84%~	19 90%~	29 71%~	41 85%~	10 83%~	120 86%~	1 100%~	~	1 100%~	1 17%~	13 81%~	4 44%~	134 85%~	82 88%*	53 74%*	48 79%	89 84%	
TOP BOX SCORE	98 58%	1558 56%	9 75%~	18 56%~	13 62%~	21 51%~	29 60%~	7 58%~	84 60%~	1 100%~	~	~	~	1 17%~	9 56%~	4 44%~	93 59%~	62 67%*	34 47%*	32 52%	65 61%
NOT ANSWERED	6	85					3	2	4						1	1	4	2	2	2	3
VALID CASES	169	2773	12	32	21	41	48	12	139	1		1	6	16	9	158	93	72	61	106	
NUMBER OF RESPONDENTS	175	2858	12	32	21	41	51	14	143	1		1	6	17	10	162	95	74	63	109	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35E = YES]

Q35I CHOICES FOR YOUR TREATMENT OR HEALTH CARE CAN INCLUDE CHOICES ABOUT MEDICINE, SURGERY, OR OTHER TREATMENT. IN THE LAST 6 MONTHS, DID THIS PROVIDER TELL YOU THERE WAS MORE THAN ONE CHOICE FOR YOUR TREATMENT OR HEALTH CARE?

			AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q35I YES	108 36%	1866 37%	6 22%	22 43%	10 24%	24 32%	37 44%	7 35%	91 37%	1 100%	1 50%	1 50%	~	1 8%	7 29%	8 30%	96 36%	65 34%	39 36%	41 34%	66 37%	
NO	195 64%	3186 63%	21 78%	29 57%	32 76%	51 68%	47 56%	13 65%	154 63%	~	1 50%	1 50%	5 100%	11 92%	17 71%	19 70%	172 64%	125 66%	68 64%	79 66%	114 63%	
NOT ANSWERED	25	400		1	1	2	2	3	6						2	1	8	4	5	3	6	
VALID CASES	303	5053	27	51	42	75	84	20	245	1	2	2	5	12	24	27	268	190	107	120	180	
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%	

Q35J IN THE LAST 6 MONTHS, DID YOUR PROVIDER TALK WITH YOU ABOUT THE PROS AND CONS OF EACH CHOICE FOR YOUR TREATMENT OR HEALTH CARE?

	AHP TOT ADULT	OHP TOT ADULT	AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q35J #YES	86 86%	1483 85%	5 83%~	17 81%~	9 100%~	21 88%~	28 85%~	5 100%~	74 88%~	1 100%~	1 100%~	~	~	1 ~100%~	5 83%~	6 100%~	78 87%~	52 85%~	31 86%~	32 82%~	53 88%~
NO	14 14%	254 15%	1 17%~	4 19%~	~	3 12%~	5 15%~	~	10 12%~	~	~	~	1 ~100%~	~	1 ~17%~	~	12 ~13%~	9 15%~	5 14%~	7 18%~	7 12%~
NOT ANSWERED	8	58		1	1		4	2	7					1		2	6	4	3	2	6
VALID CASES	100	1737	6	21	9	24	33	5	84	1	1	1		1	6	6	90	61	36	39	60
NUMBER OF RESPONDENTS	108	1795	6	22	10	24	37	7	91	1	1	1		1	7	8	96	65	39	41	66
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35I = YES]

Q35K IN THE LAST 6 MONTHS, WHEN THERE WAS MORE THAN ONE CHOICE FOR YOUR TREATMENT OR HEALTH CARE, DID YOUR PROVIDER ASK YOU WHICH CHOICE WAS BEST FOR YOU?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE
Q35K #YES	84 84%	1402 81%	6 100%	18 86%	8 89%	21 88%	26 79%	4 80%	70 83%	1 100%	1 100%	1 100%	1 ~100%	4 67%	6 100%	74 82%	50 82%	32 89%	33 85%	50 83%
NO	16 16%	326 19%		3 ~14%	1 11%	3 12%	7 21%	1 20%	14 17%					2 33%		16 ~18%	11 18%	4 11%	6 15%	10 17%
NOT ANSWERED	8	67		1	1		4	2	7					1	2	6	4	3	2	6
VALID CASES	100	1728	6	21	9	24	33	5	84	1	1	1	1	6	6	90	61	36	39	60
NUMBER OF RESPONDENTS	108 100%	1795 100%	6 100%	22 100%	10 100%	24 100%	37 100%	7 100%	91 100%	1 100%	1 100%	1 100%	1 100%	7 100%	8 100%	96 100%	65 100%	39 100%	41 100%	66 100%

[ASKED IF Q35I = YES]

Q35L IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PROVIDER MAKE IT EASY FOR YOU TO ASK QUESTIONS OR RAISE CONCERNS?

	AHP TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q35L NEVER	41 14%	654 13%	4 15%	5 10%	9 22%	10 13%	12 15%	1 5%	31 13%	~	~	~	2 50%	5 42%	3 12%	3 12%	37 14%	26 14%	15 14%	26 22%*	15 8%*
SOMETIMES	37 12%	567 11%	6 23%	4 8%	5 12%	5 7%*	13 16%	2 10%	28 12%	~	~	1 50%	~	1 8%	4 16%	4 15%	31 12%	14 8%*	22 20%*	11 9%	26 14%
USUALLY	64 21%	1126 23%	4 15%	16 31%	4 10%	21 28%	13 16%	5 24%	52 22%	~	1 50%	1 50%	~	2 17%	5 20%	7 27%	57 21%	38 21%	26 24%	24 21%	39 22%
ALWAYS	157 53%	2613 53%	12 46%	26 51%	23 56%	40 53%	42 53%	13 62%	129 54%	1 100%	1 50%	~	2 50%	4 33%	13 52%	12 46%	141 53%	107 58%*	47 43%*	56 48%	100 56%
#ALWAYS + USUALLY (NET)	221 74%	3739 75%	16 62%	42 82%	27 66%	61 80%	55 69%	18 86%	181 75%	1 100%	2 100%	1 50%	2 50%	6 50%	18 72%	19 73%	198 74%	145 78%*	73 66%*	80 68%	139 77%
TOP BOX SCORE	157 53%	2613 53%	12 46%	26 51%	23 56%	40 53%	42 53%	13 62%	129 54%	1 100%	1 50%	~	2 50%	4 33%	13 52%	12 46%	141 53%	107 58%*	47 43%*	56 48%	100 56%
NOT ANSWERED	29	493	1	1	2	1	6	2	11				1		1	2	10	9	2	6	6
VALID CASES	299	4960	26	51	41	76	80	21	240	1	2	2	4	12	25	26	266	185	110	117	180
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q35M IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER TALK TOO FAST WHEN TALKING TO YOU?

	AHP TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER PAC ALSK	OTH	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q35M ALWAYS	14 5%	387 8%*	~	4 8%	3 7%~	3 4%	2 2%	1 5%~	12 5%	~	~	~	~	~	2 8%~	~	13 5%~	6 3%	8 7%	6 5%	8 4%
USUALLY	7 2%	258 5%*	~	1 2%	2 5%~	3 4%	1 1%	~	7 3%*	~	~	~	~	~	~	~	7 3%~	6 3%	1 0.9%	1 0.8%	6 3%
SOMETIMES	61 20%	881 18%	7 27%~	9 18%	5 12%~	20 27%	16 20%	4 19%~	51 21%	~	~	1 50%~	1 25%~	2 17%~	5 19%~	3 12%~	56 21%~	31 17%*	29 27%*	24 20%	37 21%
NEVER	216 72%	3452 69%	19 73%~	36 72%	30 75%~	49 65%	63 77%	16 76%~	170 71%	1 100%~	2 100%~	1 50%~	3 75%~	10 83%~	19 73%~	21 88%~	191 72%~	143 77%*	70 65%*	87 74%	127 71%
#NEVER + SOMETIMES (NET)	277 93%	4333 87%*	26 100%~	45 90%	35 88%~	69 92%	79 96%	20 95%~	221 92%	1 100%~	2 100%~	2 100%~	4 100%~	12 100%~	24 92%~	24 100%~	247 93%~	174 94%	99 92%	111 94%	164 92%
TOP BOX SCORE	216 72%	3452 69%	19 73%~	36 72%	30 75%~	49 65%	63 77%	16 76%~	170 71%	1 100%~	2 100%~	1 50%~	3 75%~	10 83%~	19 73%~	21 88%~	191 72%~	143 77%*	70 65%*	87 74%	127 71%
NOT ANSWERED	30	476	1	2	3	2	4	2	11				1			4	9	8	4	5	8
VALID CASES	298	4977	26	50	40	75	82	21	240	1	2	2	4	12	26	24	267	186	108	118	178
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q35N IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER INTERRUPT YOU WHEN YOU WERE TALKING?

	AHP TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE	
Q35N ALWAYS	8	113	1	2	2	2	1	6						1	1	1	7	3	5	3	5
	3%	2%	4%~	4%	5%~	3%	1%	~ 3%	~	~	~	~	~	8%~	4%~	4%~	3%~	2%	5%	3%	3%
USUALLY	4	124		1	1	1	1	2						1	1	1	3	2	2	2	2
	1%	2%	~	2%	2%~	1%	1%	~0.8%	~	~	~	~	~	8%~	4%~	4%~	1%~	1%	2%	2%	1%
SOMETIMES	36	728	3	2	1	12	12	5	32		1	1			2	1	34	14	22	14	22
	12%	15%	12%~	4%*	2%~	16%	15%	24%~	13%	~	50%~	50%~	~	~	8%~	4%~	13%~	8%*	20%*	12%	12%
NEVER	250	4037	22	46	36	60	68	16	200	1	1	1	4	10	22	22	223	167	80	100	149
	84%	81%	85%~	90%	90%~	80%	83%	76%~	83%	100%~	50%~	50%~	100%~	83%~	85%~	88%~	84%~	90%*	73%*	84%	84%
#NEVER + SOMETIMES (NET)	286	4765	25	48	37	72	80	21	232	1	2	2	4	10	24	23	257	181	102	114	171
	96%	95%	96%~	94%	93%~	96%	98%	100%~	97%	100%~	100%~	100%~	100%~	83%~	92%~	92%~	96%~	97%	94%	96%	96%
TOP BOX SCORE	250	4037	22	46	36	60	68	16	200	1	1	1	4	10	22	22	223	167	80	100	149
	84%	81%	85%~	90%	90%~	80%	83%	76%~	83%	100%~	50%~	50%~	100%~	83%~	85%~	88%~	84%~	90%*	73%*	84%	84%
NOT ANSWERED	30	451	1	1	3	2	4	2	11				1			3	9	8	3	4	8
VALID CASES	298	5002	26	51	40	75	82	21	240	1	2	2	4	12	26	25	267	186	109	119	178
NUMBER OF RESPONDENTS	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q350 IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER USE A CONDESCENDING, SARCASTIC, OR RUDE TONE OR MANNER WITH YOU?

			AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER HAW/ IND/ PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q350 ALWAYS	2 0.7%	98 2%*	~	~	2 5%~	~	~	~	~	~	~	~	~	2 8%~	2 ~0.8%~	2 ~	1 2%~	1 0.8%	1 0.6%		
USUALLY	8 3%	112 2%	~	2 4%	2 5%~	3 4%	1 1%	~	7 3%	~	~	~	~	1 8%~	1 4%~	7 3%~	4 2%	4 4%	2 2%	6 3%	
SOMETIMES	27 9%	493 10%	2 8%~	4 8%	5 12%~	6 8%	5 6%	3 14%~	23 10%	~	~	1 50%~	1 ~	1 8%~	1 4%~	25 9%~	12 6%	15 14%	10 8%	17 10%	
NEVER	261 88%	4278 86%	24 92%~	45 88%	31 78%~	65 88%	77 93%	18 86%~	210 87%	1 100%~	2 100%~	1 50%~	4 100%~	10 83%~	23 88%~	24 92%~	232 87%~	169 91%*	89 81%*	106 89%	154 87%
#NEVER + SOMETIMES (NET)	288 97%	4771 96%	26 100%~	49 96%	36 90%~	71 96%	82 99%	21 100%~	233 97%	1 100%~	2 100%~	2 100%~	4 100%~	11 92%~	24 92%~	257 96%~	181 98%	104 95%	116 97%	171 96%	
TOP BOX SCORE	261 88%	4278 86%	24 92%~	45 88%	31 78%~	65 88%	77 93%	18 86%~	210 87%	1 100%~	2 100%~	1 50%~	4 100%~	10 83%~	23 88%~	24 92%~	232 87%~	169 91%*	89 81%*	106 89%	154 87%
NOT ANSWERED	30	472	1	1	3	3	3	2	11			1			2	10	9	2	4	8	
VALID CASES	298	4981	26	51	40	74	83	21	240	1	2	2	4	12	26	26	266	185	110	119	178
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q35P IN THE LAST 6 MONTHS, DID YOU FEEL YOU COULD TRUST A DOCTOR OR OTHER HEALTH PROVIDER WITH YOUR MEDICAL CARE?

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q35P #YES DEFINITELY	180 61%	3312 67%*	17 65%~	36 71%	25 63%~	35 47%*	50 61%	16 76%~	150 63%		2 ~100%~		2 ~ 67%~	6 50%~	14 54%~	17 65%~	161 61%~	125 68%*	52 48%*	68 58%	111 62%
YES SOMEWHAT	90 30%	1213 25%*	7 27%~	12 24%	9 22%~	29 39%	28 34%	3 14%~	71 30%			2 ~100%~		4 ~ 33%~	10 38%~	5 19%~	83 31%~	47 25%*	43 39%*	35 30%	55 31%
NO	27 9%	418 8%	2 8%~	3 6%	6 15%~	10 14%	4 5%	2 10%~	19 8%	1 100%~			1 ~ 33%~	2 17%~	2 8%~	4 15%~	22 8%~	13 7%	14 13%	15 13%	12 7%
NOT ANSWERED	31	511	1	1	3	3	4	2	11				2			2	10	9	3	5	8
VALID CASES	297	4942	26	51	40	74	82	21	240	1	2	2	3	12	26	26	266	185	109	118	178
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q35Q A REGULAR DENTIST IS ONE YOU WOULD GO TO FOR CHECK-UPS AND CLEANINGS OR WHEN YOU HAVE A CAVITY OR TOOTH PAIN. DO YOU HAVE A REGULAR DENTIST?

	AHP TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q35Q YES	164 55%	2643 53%	20 77%~	29 58%	22 55%~	44 58%	38 47%	10 45%~	133 55%	1 100%~	1 50%~	2 ~ 50%~	3 27%~	15 58%~	11 46%~	149 56%~	111 59%	50 47%*	60 51%	104 58%	
NO	134 45%	2382 47%	6 23%~	21 42%	18 45%~	32 42%	43 53%	12 55%~	108 45%	1 ~ 50%~	2 100%~	2 50%~	8 73%~	11 42%~	13 54%~	118 44%~	78 41%	56 53%*	58 49%	74 42%	
NOT ANSWERED	30	428	1	2	3	1	5	1	10			1	1		4	9	5	6	5	8	
VALID CASES	298	5025	26	50	40	76	81	22	241	1	2	2	4	11	26	24	267	189	106	118	178
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q35R IN THE LAST 6 MONTHS, IF YOU NEEDED TO SEE A DENTIST RIGHT AWAY BECAUSE OF A DENTAL EMERGENCY, DID YOU GET TO SEE A DENTIST AS SOON AS YOU WANTED?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q35R NEVER	42 34%	799 36%	2 15%	6 32%	7 41%	10 32%	11 39%	5 45%	34 36%	1 ~100%	1 ~33%	3 75%	1 10%	3 33%	38 35%	30 38%	12 29%	20 35%	21 33%		
SOMETIMES	16 13%	439 20%*	2 15%	6 32%	2 12%	3 10%	2 7%	10 ~11%	~	2 ~100%	~	~	2 ~20%	3 33%	12 11%	10 13%	6 14%	4 7%	12 19%*		
USUALLY	25 20%	421 19%	3 23%	3 16%	4 24%	7 23%	5 18%	2 18%	22 23%	1 100%	~	1 33%	~	~	23 21%	14 18%	11 26%	12 21%	12 19%		
ALWAYS	39 32%	564 25%	6 46%	4 21%	4 24%	11 35%	10 36%	4 36%	29 31%	~	~	1 33%	1 25%	7 70%	3 33%	36 33%	25 32%	13 31%	21 37%	18 29%	
#ALWAYS + USUALLY (NET)	64 52%	985 44%	9 69%	7 37%	8 47%	18 58%	15 54%	6 55%	51 54%	1 100%	~	2 67%	1 25%	7 70%	3 33%	59 54%	39 49%	24 57%	33 58%	30 48%	
TOP BOX SCORE	39 32%	564 25%	6 46%	4 21%	4 24%	11 35%	10 36%	4 36%	29 31%	~	~	1 33%	1 25%	7 70%	3 33%	36 33%	25 32%	13 31%	21 37%	18 29%	
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	172	2730	13	31	23	44	49	12	144	1	1	8	14	13	156	106	64	60	112		
NOT ANSWERED	34	500	1	2	3	2	9	12	12	1	1	1	2	6	11	9	6	6	11		
VALID CASES	122	2223	13	19	17	31	28	11	95	1	1	2	3	4	10	9	109	79	42	57	63
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q36 IN GENERAL, HOW WOULD YOU RATE YOUR OVERALL HEALTH?

	AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE	
Q36 EXCELLENT	28 9%	477 9%	5 20%~	7 13%	5 12%~	6 8%	4 5%	1 4%~	23 9%	~	1 ~ 50%~	2 ~ 17%~	2 8%~	3 11%~	24 9%~	28 14%*	~	13 11%	14 8%		
VERY GOOD	75 25%	1176 23%	10 40%~	20 38%*	11 26%~	14 18%	16 19%	3 13%~	63 26%	~	1 ~ 50%~	1 20%~	1 8%~	6 24%~	4 15%~	69 25%~	75 39%*	~	26 22%	49 27%	
GOOD	91 30%	1761 35%*	5 20%~	15 29%	16 37%~	24 31%	27 33%	4 17%~	71 29%	1 100%~	2 100%~	3 ~ 60%~	4 33%~	6 24%~	11 41%~	78 29%~	91 47%~	~	31 26%	60 33%	
FAIR	90 29%	1244 25%	5 20%~	10 19%*	10 23%~	25 32%	29 35%	11 48%~	74 30%	~	~	~	5 ~ 42%~	6 24%~	9 33%~	80 29%~	90 ~ 80%*	~	40 33%	50 27%	
POOR	22 7%	405 8%	~	~	1 2%~	8 10%	7 8%	4 17%~	16 6%	~	~	1 ~ 20%~	5 ~ 20%~	21 ~	21 8%~	22 ~ 20%~	~	10 8%	11 6%		
#EXCELLENT + VERY GOOD + GOOD (NET)	194 63%	3415 67%	20 80%~	42 81%*	32 74%~	44 57%	47 57%	8 35%~	157 64%	1 100%~	2 100%~	2 100%~	4 80%~	7 58%~	14 56%~	18 67%~	171 63%~	194 100%~	~	70 58%	123 67%
NOT ANSWERED	22	389	2				3		4				1	1	4			3	2		
VALID CASES	306	5064	25	52	43	77	83	23	247	1	2	2	5	12	25	27	272	194	112	120	184
NUMBER OF RESPONDENTS	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q37 IN GENERAL, HOW WOULD YOU RATE YOUR OVERALL MENTAL OR EMOTIONAL HEALTH?

	AHP TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV ILND	AMER PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q37 EXCELLENT	57 19%	895 18%	7 28%	12 23%	9 21%	10 13%	16 19%	3 13%	42 17%	1 100%	1 50%	1 50%	1 20%	2 17%	8 32%	7 27%	48 18%	50 26%*	7 6%*	25 20%	31 17%
VERY GOOD	87 28%	1258 25%	7 28%	14 27%	17 40%	22 29%	22 26%	5 22%	74 30%	~	~	1 50%	~	5 42%	5 20%	6 23%	79 29%	73 38%*	13 12%*	39 32%	48 26%
GOOD	83 27%	1533 30%	7 28%	13 25%	8 19%	24 31%	25 29%	6 26%	69 28%	~	1 50%	~	1 20%	3 25%	5 20%	9 35%	73 27%	47 24%	35 32%	29 24%	54 30%
FAIR	53 17%	1027 20%	2 8%	9 17%	7 17%	14 18%	13 15%	7 30%	40 16%	~	~	~	2 40%	1 8%	7 28%	3 12%	50 18%	17 9%*	36 32%*	16 13%	36 20%
POOR	26 8%	363 7%	2 8%	4 8%	1 2%	7 9%	9 11%	2 9%	23 9%	~	~	~	1 20%	1 8%	~	1 4%	23 8%	5 3%*	20 18%*	13 11%	13 7%
#EXCELLENT + VERY GOOD + GOOD (NET)	227 74%	3685 73%	21 84%	39 75%	34 81%	56 73%	63 74%	14 61%	185 75%	1 100%	2 100%	2 100%	2 40%	10 83%	18 72%	22 85%	200 73%	170 89%*	55 50%*	93 76%	133 73%
NOT ANSWERED	22	378	2		1		1		3						1	2	3	2	1	1	4
VALID CASES	306	5075	25	52	42	77	85	23	248	1	2	2	5	12	25	26	273	192	111	122	182
NUMBER OF RESPONDENTS	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q38 HAVE YOU HAD EITHER A FLU SHOT OR FLU SPRAY IN THE NOSE SINCE JULY 1, 2014?

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q38 #YES	84 28%	2160 44%*	10 40%~	7 14%*	6 15%~	19 25%	26 31%	13 57%~	64 26%	2 ~100%	2 ~100%	1 20%~	2 17%~	8 32%~	11 41%~	70 26%~	46 24%	37 34%	27 23%	56 31%	
NO	218 72%	2803 56%*	15 60%~	44 86%*	34 85%~	58 75%	57 69%	10 43%~	179 74%	1 100%~	~	4 ~80%	10 83%~	17 68%~	16 59%~	198 74%~	144 76%	72 66%	93 77%	124 69%	
DON'T KNOW	5	112	1	1	2		1		5						5	3	2	2	3		
NOT ANSWERED	21	379	1		1		2		3					1	1	3	1	1	1	3	
VALID CASES	302	4963	25	51	40	77	83	23	243	1	2	2	5	12	25	27	268	190	109	120	180
NUMBER OF RESPONDENTS	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q39 DO YOU NOW SMOKE CIGARETTES OR USE TOBACCO EVERY DAY, SOME DAYS, OR NOT AT ALL?

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q39 EVERY DAY	69 23%	1063 21%	3 12%	11 21%	8 20%	28 37%*	17 20%	1 4%	60 24%	1 ~	2 50%	3 ~	3 40%	3 25%	3 12%	65 11%	40 24%	28 21%	30 25%	39 22%	
SOME DAYS	31 10%	463 9%	2 8%	7 13%	5 12%	10 13%	5 6%	2 9%	19 8%*100%	1 ~	1 50%	2 ~	1 40%	5 8%	5 20%	25 15%	20 9%	11 10%	16 13%	15 8%	
NOT AT ALL	204 67%	3502 70%	21 81%	34 65%	28 68%	38 50%*	61 73%	20 87%	167 68%	~	2 ~100%	1 20%	8 67%	17 68%	17 68%	20 74%	181 67%	131 69%	71 65%	75 62%	127 70%
DON'T KNOW	2	42				1	1		1							1	2			2	
NOT ANSWERED	22	383	1		2		2		4					1	1	4	1	2	2	3	
VALID CASES	304	5028	26	52	41	76	83	23	246	1	2	2	5	12	25	27	271	191	110	121	181
NUMBER OF RESPONDENTS	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q40 IN THE LAST 6 MONTHS, HOW OFTEN WERE YOU ADVISED TO QUIT SMOKING OR USING TOBACCO BY A DOCTOR OR OTHER HEALTH PROVIDER IN YOUR PLAN?

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q40 NEVER	30 30%	435 26%	1 20%	9 50%	3 23%	10 27%	7 32%	24 31%	~	~	~	2 50%	2 50%	~	3 43%	26 29%	20 34%	10 26%	11 24%	19 35%
SOMETIMES	25 25%	355 21%	3 60%	4 22%	3 23%	9 24%	5 23%	21 27%	~	~	~	1 25%	3 38%	1 14%	24 27%	10 17%	14 36%	13 29%	12 22%	
USUALLY	14 14%	280 17%	1 20%	1 6%	5 38%	5 14%	1 5%	12 15%	1 50%	~	~	~	1 13%	1 14%	13 15%	9 15%	5 13%	7 16%	7 13%	
ALWAYS	30 30%	589 35%	~	4 22%	2 15%	13 35%	9 41%	2 67%	21 27%	1 100%	1 50%	2 50%	1 25%	4 50%	2 29%	26 29%	20 34%	10 26%	14 31%	16 30%
#ALWAYS + USUALLY (NET)	44 44%	869 52%	1 20%	5 28%	7 54%	18 49%	10 45%	3 100%	33 42%	1 100%	2 100%	2 50%	1 25%	5 63%	3 43%	39 44%	29 49%	15 38%	21 47%	23 43%
TOP BOX SCORE	30 30%	589 35%	~	4 22%	2 15%	13 35%	9 41%	2 67%	21 27%	1 100%	1 50%	2 50%	1 25%	4 50%	2 29%	26 29%	20 34%	10 26%	14 31%	16 30%
NOT ANSWERED	1	31				1		1							1	1		1		
VALID CASES	99	1659	5	18	13	37	22	3	78	1	2	4	4	8	7	89	59	39	45	54
NUMBER OF RESPONDENTS	100	1690	5	18	13	38	22	3	79	1	2	4	4	8	7	90	60	39	46	54
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

Q41 IN THE LAST 6 MONTHS, HOW OFTEN WAS MEDICATION RECOMMENDED OR DISCUSSED BY A DOCTOR OR HEALTH PROVIDER TO ASSIST YOU WITH QUITTING SMOKING OR USING TOBACCO? EXAMPLES OF MEDICATION ARE: NICOTINE GUM, PATCH, NASAL SPRAY, INHALER, OR PRESCRIPTION MEDICATION.

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	POOR	MALE	FE- MALE
Q41 NEVER	51 52%	750 46%	4 80%~	10 56%~	5 38%~	18 49%~	13 59%~	1 33%~	43 55%~	1 ~ 50%~	2 ~ 50%~	3 75%~			4 ~ 57%~	46 52%~	32 54%~	19 49%~	21 47%~	30 56%~
SOMETIMES	20 20%	380 23%		3 ~ 17%~	6 46%~	7 19%~	3 14%~		17 22%~					3 ~ 38%~	1 14%~	19 21%~	10 17%~	10 26%~	11 24%~	9 17%~
USUALLY	14 14%	243 15%	1 20%~	5 28%~	1 8%~	4 11%~	2 9%~	1 33%~	9 12%~	1 ~ 50%~		1 ~ 25%~	3 38%~	1 14%~	13 15%~	8 14%~	5 13%~		5 11%~	9 17%~
ALWAYS	14 14%	267 16%			1 ~ 8%~	8 22%~	4 18%~	1 33%~	9 12%~	1 100%~		2 ~ 50%~	2 ~ 25%~	2 14%~	11 12%~	9 15%~	5 13%~		8 18%~	6 11%~
#ALWAYS + USUALLY (NET)	28 28%	510 31%	1 20%~	5 28%~	2 15%~	12 32%~	6 27%~	2 67%~	18 23%~	1 100%~	1 50%~	2 ~ 50%~	1 25%~	5 63%~	2 29%~	24 27%~	17 29%~	10 26%~	13 29%~	15 28%~
TOP BOX SCORE	14 14%	267 16%			1 ~ 8%~	8 22%~	4 18%~	1 33%~	9 12%~	1 100%~		2 ~ 50%~	2 ~ 25%~	2 14%~	11 12%~	9 15%~	5 13%~		8 18%~	6 11%~
NOT ANSWERED	1	51				1			1						1	1		1		
VALID CASES	99	1639	5	18	13	37	22	3	78	1	2	4	4	8	7	89	59	39	45	54
NUMBER OF RESPONDENTS	100	1690	5	18	13	38	22	3	79	1	2	4	4	8	7	90	60	39	46	54
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

Q42 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR DOCTOR OR HEALTH PROVIDER DISCUSS OR PROVIDE METHODS AND STRATEGIES OTHER THAN MEDICATION TO ASSIST YOU WITH QUITTING SMOKING OR USING TOBACCO? EXAMPLES OF METHODS AND STRATEGIES ARE: TELEPHONE HELPLINE, INDIVIDUAL OR GROUP COUNSELING, OR CESSATION PROGRAM.

	AGE							RACE					ETHNICITY		HEALTH STATUS		GENDER				
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q42 NEVER	57 58%	864 53%	4 80%~	10 56%~	6 46%~	19 53%~	15 68%~	2 67%~	50 64%~	~	~	~	1 33%~	3 75%~	1 13%~	3 50%~	53 60%~	33 57%~	24 62%~	24 53%~	33 62%~
SOMETIMES	20 20%	340 21%	~	3 17%~	6 46%~	9 25%~	1 5%~	1 33%~	16 21%~	1 100%~	1 50%~	~	~	~	2 25%~	1 17%~	18 20%~	9 16%~	11 28%~	10 22%~	10 19%~
USUALLY	12 12%	207 13%	1 20%~	4 22%~	1 8%~	4 11%~	2 9%~	~	6 8%~	1 50%~	~	~	1 25%~	4 50%~	1 17%~	11 12%~	8 14%~	3 8%~	6 13%~	6 11%~	
ALWAYS	9 9%	215 13%	~	1 6%~	~	4 11%~	4 18%~	~	6 8%~	~	~	~	2 67%~	1 13%~	1 17%~	7 8%~	8 14%~	1 3%~	5 11%~	4 8%~	
#ALWAYS + USUALLY (NET)	21 21%	422 26%	1 20%~	5 28%~	1 8%~	8 22%~	6 27%~	~	12 15%~	1 50%~	~	~	2 67%~	1 25%~	5 63%~	2 33%~	18 20%~	16 28%~	4 10%~	11 24%~	10 19%~
TOP BOX SCORE	9 9%	215 13%	~	1 6%~	~	4 11%~	4 18%~	~	6 8%~	~	~	~	2 67%~	1 13%~	1 17%~	7 8%~	8 14%~	1 3%~	5 11%~	4 8%~	
NOT ANSWERED	2	64				2			1				1		1	2			1	1	
VALID CASES	98	1626	5	18	13	36	22	3	78	1	2		3	4	8	6	89	58	39	45	53
NUMBER OF RESPONDENTS	100	1690	5	18	13	38	22	3	79	1	2		4	4	8	7	90	60	39	46	54
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

Q43 DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q43 YES	65 21%	1180 23%	2 8%	6 12%*	2 5%	15 20%	28 33%*	11 50%~	52 21%	1 ~	1 50%~	1 50%~	2 25%~	5 17%~	20 20%~	8 31%~	57 21%~	33 17%*	31 28%*	32 26%	32 18%
NO	238 79%	3848 77%	24 92%~	45 88%*	40 95%~	60 80%	56 67%*	11 50%~	194 79%	1 100%~	1 50%~	1 50%~	3 75%~	10 83%~	20 80%~	18 69%~	215 79%~	156 83%*	80 72%*	89 74%	149 82%
DON'T KNOW	2	55			1	1			1							1	2			2	
NOT ANSWERED	23	370	1	1	1	1	1	1	4			1		1	2	3	3	1	2	3	
VALID CASES	303	5028	26	51	42	75	84	22	246	1	2	2	4	12	25	26	272	189	111	121	181
NUMBER OF RESPONDENTS	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q44 DO YOU HAVE A HEALTH PROBLEM OR TAKE MEDICATION THAT MAKES TAKING ASPIRIN UNSAFE FOR YOU?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	HIS- IC	NOT VERY GOOD & FAIR & POOR	EX & VERY GOOD & POOR	FE- MALE	MALE		
Q44 YES	31 11%	460 10%	1 ~	4 2%	9 10%	12 13%	5 25%	24 10%	~	~	~	~	1 8%	6 25%	30 ~	12%	13 7%*	18 18%*	8 7%	23 14%	
NO	256 89%	4154 90%	24 100%	47 98%	38 90%	63 88%	15 85%	207 90%	1 100%	2 100%	2 100%	5 100%	11 92%	18 75%	24 100%	227 88%	171 93%*	82 82%*	109 93%	146 86%	
DON'T KNOW	22	459	2	4	1	5	6	3	18					2	3	18	10	12	5	16	
NOT ANSWERED	19	380	1				1	2							1	1			1	1	
VALID CASES	287	4614	24	48	42	72	79	20	231	1	2	2	5	12	24	24	257	184	100	117	169
NUMBER OF RESPONDENTS	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q45 HAS A DOCTOR OR HEALTH PROVIDER EVER DISCUSSED WITH YOU THE RISKS AND BENEFITS OF ASPIRIN TO PREVENT HEART ATTACK OR STROKE?

	AHP TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNICITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q45 YES	104 34%	1742 35%	6 23%~	8 15%*	11 27%~	24 31%	39 46%*	15 65%~	81 33%	1 100%	2 100%	2 100%	3 ~	13 25%~	8 30%~	93 34%~	60 31%	42 39%	44 36%	58 32%	
NO	202 66%	3293 65%	20 77%~	44 85%*	30 73%~	53 69%	45 54%*	8 35%~	166 67%	~	~	5 ~100%	9 75%~	12 48%~	19 70%~	179 66%~	134 69%	67 61%	77 64%	125 68%	
NOT ANSWERED	22	417	1		2		2		4					1	1	4		3	2	3	
VALID CASES	306	5036	26	52	41	77	84	23	247	1	2	2	5	12	25	27	272	194	109	121	183
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q46.1 ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: HIGH CHOLESTEROL

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE			
Q46.1	AHP TOT ADLT	68	1316	1	3	6	19	30	8	55			4	5	9	58	35	31	22	44		
YES	OHP TOT ADLT	21%	24%	4%~	6%*	14%~	25%	35%*	35%~	22%	~	~	~	33%~	19%~	32%~	21%	18%	28%*	18%	24%	
		260	4137	26	49	37	58	56	15	196	1	2	2	5	8	21	19	218	159	81	101	142
NO	OHP TOT ADLT	79%	76%	96%~	94%*	86%~	75%	65%*	65%~	78%	100%~	100%~	100%~	100%~	67%~	81%~	68%~	79%	82%	72%*	82%	76%
VALID CASES		328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
NUMBER OF RESPONDENTS		328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q46.2 ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: HIGH BLOOD PRESSURE

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q46.2																					
YES	AHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
	95 29%	1635 30%	5 19%~	5 10%*	11 26%~	24 31%	32 37%	16 70%~	75 30%	1 50%~	1 50%~	1 20%~	4 33%~	8 31%~	10 36%~	82 30%	37 19%*	57 51%*	41 33%	52 28%	
NO	233 71%	3818 70%	22 81%~	47 90%*	32 74%~	53 69%	7 63%	176 70%	1 100%~	1 50%~	1 50%~	4 80%~	8 67%~	18 69%~	18 64%~	194 70%	157 81%*	55 49%*	82 67%	134 72%	
VALID CASES	328	5453	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q46.3 ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: PARENT OR SIBLING WITH HEART ATTACK BEFORE THE AGE OF 60

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q46.3																					
YES	48 15%	862 16%	4 15%~	6 12%	8 19%~	11 14%	16 19%	3 13%~	38 15%	1 100%~	~	1 20%~	1 8%~	6 23%~	2 7%~	45 16%*	23 12%	24 21%*	19 15%	29 16%	
NO	280 85%	4591 84%	23 85%~	46 88%	35 81%~	66 86%	70 81%	20 87%~	213 85%	2 ~100%	2 ~100%	4 80%~	11 92%~	20 77%~	26 93%~	231 84%*	171 88%	88 79%*	104 85%	157 84%	
VALID CASES	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
NUMBER OF RESPONDENTS	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q47.1 HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: A HEART ATTACK

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q47.1 YES	15 5%	281 5%	~	~	1 2%	2 3%	5 6%	7 30%	12 5%	1 50%	~	~	2 8%	15 5%	4 2%*	11 10%*	7 6%	8 4%			
NO	313 95%	5172 95%	27 100%	52 100%	42 98%	75 97%	81 94%	16 70%	239 95%	1 100%	1 50%	2 100%	5 100%	12 100%	24 92%	28 100%	261 95%*	190 98%*	101 90%*	116 94%	178 96%
VALID CASES	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q47.2 HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: ANGINA OR CORONARY HEART DISEASE

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q47.2	AHP TOT ADLT	18	25	35	45	55	65															
YES	OHP TOT ADLT	24	34	44	54	64	OVER	6	~	~	~	~	~	8%	~	3%*	1%	4%	2%	3%		
		2%	5%*	~	~	~	1%	5%	13%~	2%	~	~	~	8%	~	3%*	1%	4%	2%	3%		
NO		320	5169	27	52	43	76	82	20	245	1	2	2	5	12	24	28	268	192	107	120	181
		98%	95%*	100%	100%	100%	99%	95%	87%~	98%	100%	100%	100%	100%	100%	92%~	100%	97%*	99%	96%	98%	97%
VALID CASES		328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
NUMBER OF RESPONDENTS		328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q47.3 HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: A STROKE

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q47.3 YES	13 4%	221 4%	~	~	~	2 3%	5 6%	4 17%	12 5%	~	~	~	~	~	1 4%	~	13 5%*	4 2%	8 7%	4 3%	8 4%
NO	315 96%	5232 96%	27 100%	52 100%	43 100%	75 97%	81 94%	19 83%	239 95%	1 100%	2 100%	2 100%	5 100%	12 100%	25 96%	28 100%	263 95%*	190 98%	104 93%	119 97%	178 96%
VALID CASES	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q47.4 HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: ANY KIND OF DIABETES OR HIGH BLOOD SUGAR

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q47.4																					
YES	52 16%	1002 18%	1 4%~	1 2%*	6 14%~	18 23%	18 21%	8 35%~	43 17%	~	~	1 50%~	3 ~	3 12%~	6 21%~	44 16%	21 11%*	30 27%*	18 15%	33 18%	
NO	276 84%	4451 82%	26 96%~	51 98%*	37 86%~	59 77%	68 79%	15 65%~	208 83%	1 100%	2 100%	1 50%~	5 100%	9 75%~	23 88%~	22 79%~	232 84%	173 89%*	82 73%*	105 85%	153 82%
VALID CASES	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q48 IN THE LAST 6 MONTHS, DID YOU GET HEALTH CARE 3 OR MORE TIMES FOR THE SAME CONDITION OR PROBLEM?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q48 YES	98 32%	1692 34%	2 7%	15 29%	12 28%	29 38%	29 34%	10 45%	81 33%	~	~	~	20%	17%	46%	5 18%	93 34%	40 21%*	56 51%*	33 27%	65 35%
NO	210 68%	3335 66%	25 93%	36 71%	31 72%	48 62%	57 66%	12 55%	167 67%	1 100%	2 100%	2 100%	4 80%	10 83%	14 54%	23 82%	181 66%	153 79%*	54 49%*	89 73%	121 65%
NOT ANSWERED	20	426	1					1	3							2		1	2	1	
VALID CASES	308	5027	27	51	43	77	86	22	248	1	2	2	5	12	26	28	274	193	110	122	186
NUMBER OF RESPONDENTS	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q49 IS THIS A CONDITION OR PROBLEM THAT HAS LASTED FOR AT LEAST 3 MONTHS? DO NOT INCLUDE PREGNANCY OR MENOPAUSE.

	AHP TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT VERY GOOD & FAIR & POOR	EX & VERY GOOD & POOR	MALE	FE- MALE	
Q49 YES	81 86%	1394 85%	2 100%	12 80%	11 100%	24 86%	24 83%	7 88%	68 87%	~	~	~	~	1 50%	10 83%	2 50%	79 88%	29 76%	50 93%	30 94%	51 82%
NO	13 14%	240 15%	~	3 20%	~	4 14%	5 17%	1 13%	10 13%	~	~	~	~	1 50%	2 17%	2 50%	11 12%	9 24%	4 7%	2 6%	11 18%
NOT ANSWERED	4	62			1	1		2	3				1			3	2	2	1	3	
VALID CASES	94	1633	2	15	11	28	29	8	78					2	12	4	90	38	54	32	62
NUMBER OF RESPONDENTS	98	1695	2	15	12	29	29	10	81				1	2	12	5	93	40	56	33	65
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q48 = YES]

Q50 DO YOU NOW NEED OR TAKE MEDICINE PRESCRIBED BY A DOCTOR? DO NOT INCLUDE BIRTH CONTROL.

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q50 YES	188 61%	3255 65%	7 26%	28 54%	19 44%	52 68%	63 73%*	18 78%	152 61%	1 ~	3 50%~	9 ~	15 60%~	12 44%	172 63%	87 45%*	97 87%*	73 59%	115 62%		
NO	121 39%	1781 35%	20 74%	24 46%	24 56%	24 32%	23 27%*	5 22%	97 39%	1 100%	1 50%	2 100%	2 40%	3 25%	11 42%	15 56%	103 37%	106 55%*	14 13%*	50 41%	70 38%
NOT ANSWERED	19	417			1			2							1	1	1	1		1	
VALID CASES	309	5036	27	52	43	76	86	23	249	1	2	2	5	12	26	27	275	193	111	123	185
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	76 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q51 IS THIS MEDICINE TO TREAT A CONDITION THAT HAS LASTED FOR AT LEAST 3 MONTHS? DO NOT INCLUDE PREGNANCY OR MENOPAUSE.

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q51 YES	168 93%	2975 94%	6 86%~	27 96%~	17 89%~	49 96%	54 92%	15 94%~	136 94%~	1 ~100%~	3 ~100%~	8 89%~	13 93%~	10 83%~	155 95%~	73 89%*	91 97%	64 93%	104 94%	
NO	12 7%	176 6%	1 14%~	1 4%~	2 11%~	2 4%	5 8%	1 6%~	9 6%~	~	~	~	1 ~11%~	1 7%~	2 17%~	9 5%~	9 11%*	3 3%	5 7%	7 6%
NOT ANSWERED	8	127				1	4	2	7				1		8	5	3	4	4	
VALID CASES	180	3151	7	28	19	51	59	16	145	1	3	9	14	12	164	82	94	69	111	
NUMBER OF RESPONDENTS	188 100%	3278 100%	7 100%	28 100%	19 100%	52 100%	63 100%	18 100%	152 100%	1 100%	3 100%	9 100%	15 100%	12 100%	172 100%	87 100%	97 100%	73 100%	115 100%	

[ASKED IF Q50 = YES]

NQ52 WHAT IS YOUR AGE?

	AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
NQ52																					
18 TO 24	29 9%	547 10%	27 100%	~	~	~	~	~	18 7%	~	~	50%	~	8%	23%	4 14%	21 8%	20 10%	5 4%*	12 10%	15 8%
25 TO 34	59 18%	870 16%	~	52 ~100%	~	~	~	~	43 17%	~	~	50%	~	~	15%	4 18%	47 17%	42 22%*	10 9%*	17 14%	35 19%
35 TO 44	47 14%	802 15%	~	~	43 ~100%	~	~	~	40 16%	~	~	~	~	8%	2 8%	3 11%	41 15%	33 17%	11 10%	13 11%	31 17%
45 TO 54	82 25%	1153 21%	~	~	~	77 ~100%	~	~	61 24%	1 100%	~	~	3 60%	5 42%	5 19%	9 32%	66 24%	44 23%	34 30%	36 29%	42 23%
55 TO 64	87 27%	1412 26%	~	~	~	~	86 ~100%	~	74 29%*	1 50%	~	~	1 20%	4 33%	5 19%	6 21%	80 29%*	47 24%	37 33%	38 31%	48 26%
65 TO 74	15 5%	405 7%*	~	~	~	~	14 61%	~	9 4%	1 50%	~	~	1 20%	~	2 8%	~	14 5%	5 3%	9 8%	5 4%	9 5%
75 OR OLDER	9 3%	264 5%*	~	~	~	~	9 39%	~	6 2%	~	~	~	1 8%	2 8%	~	1 4%	7 3%	3 2%	6 5%	2 2%	6 3%
VALID CASES	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

[BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]

NQ53 ARE YOU MALE OR FEMALE?

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
NQ53																					
MALE	132 40%	2159 40%	12 44%~	17 33%	13 30%~	35 45%	38 44%	7 30%~	93 37%*100%~	1 50%~	1 50%~	1 50%~	3 60%~	9 75%~	11 42%~	14 50%~	105 38%	70 36%	50 45%	123 100%~	~
FEMALE	196 60%	3294 60%	15 56%~	35 67%	30 70%~	42 55%	48 56%	16 70%~	158 63%*	1 ~ 50%~	1 50%~	2 40%~	3 25%~	15 58%~	14 50%~	171 62%	124 64%	62 55%	186 ~100%~		
VALID CASES	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

[BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]

Q54 WHAT IS THE HIGHEST GRADE OR LEVEL OF SCHOOL THAT YOU HAVE COMPLETED?

			AGE					RACE						ETHNICITY		HEALTH STATUS		GENDER			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q54																					
8TH GRADE OR LESS	17 6%	312 6%	~	2 4%	~	1 1%*	9 11%	4 17%~	9 4%*	2 ~100%~	~	~	3 ~25%~	~	7 26%~	10 4%~	7 4%	10 9%	6 5%	11 6%	
SOME HIGH SCHOOL BUT DID NOT GRADUATE	39 13%	755 15%	19%~	5 12%	6 12%~	5 16%	12 9%	8 9%~	2 13%	~	~	~	4 ~33%~	3 12%~	5 19%~	32 12%~	24 13%	15 14%	19 16%	19 10%	
HIGH SCHOOL GRADUATE OR GED	121 40%	1615 32%*	58%~	15 44%	23 44%	11 26%~	30 41%	31 36%	10 43%~	95 39%	1 100%~	2 ~100%~	4 80%~	2 17%~	12 46%~	12 44%~	105 39%~	76 40%	43 39%	56 47%*	64 35%*
SOME COLLEGE OR 2-YEAR DEGREE	99 32%	1732 34%	23%~	6 35%	18 43%~	18 35%	26 31%	26 22%~	5 34%	83 34%	~	~	1 ~20%~	2 17%~	11 42%~	3 11%~	96 35%~	64 34%	33 30%	31 26%*	68 37%*
4-YEAR COLLEGE GRADUATE	15 5%	415 8%*	~	2 4%	5 12%~	4 5%	3 4%	1 4%~	15 6%~	~	~	~	~	~	~	15 6%~	10 5%	5 5%	2 2%*	13 7%*	
MORE THAN 4-YEAR COLLEGE DEGREE	14 5%	214 4%	~	1 2%	3 7%~	1 1%*	8 9%*	1 4%~	13 5%	~	~	~	1 ~8%~	~	~	14 5%~	10 5%	4 4%	6 5%	8 4%	
NOT ANSWERED	23	410	1		1	3	1		5						1	4	3	2	3	3	
VALID CASES	305	5043	26	52	42	74	85	23	246	1	2	2	5	12	26	27	272	191	110	120	183
NUMBER OF RESPONDENTS	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q55 ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q55																					
YES HISPANIC OR LATINO	28 9%	610 12%	4 16%	5 10%	2 5%	9 12%	6 7%	1 5%	8 3%*	~	~	~	25%~	9 75%~	3 12%~	100%~	28 ~	18 10%	9 8%	14 12%	14 8%
NO NOT HISPANIC OR LATINO	276 91%	4367 88%	21 84%~	47 90%	41 95%~	65 88%	79 93%	21 95%~	241 97%*	~	100%~	2 100%~	1 100%~	3 75%~	3 25%~	23 88%~	276 ~	171 90%	101 92%	105 88%	170 92%
NOT ANSWERED	24	476	2			3	1	1	2	1		1	1					5	2	4	2
VALID CASES	304	4977	25	52	43	74	85	22	249		2	1	4	12	26	28	276	189	110	119	184
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q56.1 WHAT IS YOUR RACE? RESPONSE: WHITE

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q56.1 YES	275 84%	4262 78%*	24 89%~	46 88%	42 98%~	65 84%	77 90%	19 83%~	251 100%~	~	~	~	~	~	24 92%~	11 39%~	262 95%*	169 87%	101 90%*	104 85%	169 91%*
NO	53 16%	1191 22%*	3 11%~	6 12%	1 2%~	12 16%	9 10%	4 17%~	~	1 100%~	2 100%~	2 100%~	5 100%~	12 100%~	2 8%~	17 61%~	14 5%*	25 13%	11 10%*	19 15%	17 9%*
VALID CASES	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q56.2 WHAT IS YOUR RACE? RESPONSE: BLACK OR AFRICAN-AMERICAN

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLACK OR AFR-AMER	AS-IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL-TI	HIS-IC	NOT HIS-IC	EX & VERY GOOD &	FAIR & POOR	FE-MALE	MALE		
Q56.2	AHP TOT ADLT	18	25	35	45	55	65														
	OHP TOT ADLT	24	34	44	54	64	OVER	WHTE	AMER	IAN	ILND	NATV	OTHR	TI	HIS-IC	HIS-IC	EX & VERY GOOD &	FAIR & POOR	FE-MALE		
YES	2	133	1	1	1	1	1	1	1	1	1	1	1	1	1	2	1	1	1		
	0.6%	2%*	~ 2%	~ 1%	~ 1%	~ 1%	~ 1%	~100%	~ 100%	~ 100%	~ 100%	~ 100%	~ 100%	~ 100%	~ 100%	~ 100%	~ 100%	~ 100%	~ 100%		
NO	326	5320	27	51	43	76	86	23	251	2	2	5	12	25	28	275	192	112	122	185	
	99%	98%*	100%~	98%	100%~	99%	100%~	100%~	100%~	~100%	~100%	~100%	~100%	~100%	96%	~100%	~100%	~100%	99%	99%	
VALID CASES	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
NUMBER OF RESPONDENTS	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q56.3 WHAT IS YOUR RACE? RESPONSE: ASIAN

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV ILND	AMER PAC	IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q56.3	AHP TOT ADLT	3	225	1	1	1	1			2				1		3	3		1	2	
YES	OHP TOT ADLT	0.9%	4%*	~	2%	~	~	~	~	100%~	~	~	~	4%~	~	1%~	2%~	~	0.8%	1%	
NO	AHP TOT ADLT	325	5228	27	51	43	77	85	22	251	1	2	5	12	25	28	273	191	112	122	184
	OHP TOT ADLT	99%	96%*	100%~	98%	100%~	100%~	99%	96%	100%~	100%~	~	100%~	100%~	96%	100%~	99%	98%~	100%~	99%	99%
VALID CASES	AHP TOT ADLT	328	5453	27	52	43	77	86	23	251	1	2	5	12	26	28	276	194	112	123	186
NUMBER OF RESPONDENTS	OHP TOT ADLT	328	5453	27	52	43	77	86	23	251	1	2	5	12	26	28	276	194	112	123	186
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q56.4 WHAT IS YOUR RACE? RESPONSE: NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q56.4																					
YES	AHP TOT ADULT 4 1%	OHP TOT ADULT 41 0.7%	18 TO 24 2 7%	25 TO 34 2 4%	35 TO 44 ~	45 TO 54 ~	55 TO 64 ~	65 AND OVER ~	BLK OR AFR- ~	AS- IAN ~	NATV HAW/ PAC ILND ~100%	AMER IND/ ALSK ~	MUL- OTHR ~	TI 2 8%	HIS- IC ~	NOT HIS- IC 3 1%	EX & VERY GOOD & FAIR & POOR 4 2%	FE- MALE 1 ~0.8%	MALE 3 2%		
NO	324 99%	5412 99%	18 TO 24 25 93%	25 TO 34 50 96%	35 TO 44 43 100%	45 TO 54 77 100%	55 TO 64 86 100%	65 AND OVER 23 100%	BLK OR AFR- 251 100%	AS- IAN 1 100%	NATV HAW/ PAC ILND 2 100%	AMER IND/ ALSK 5 100%	MUL- OTHR 12 100%	TI 24 92%	HIS- IC 28 100%	NOT HIS- IC 273 99%	EX & VERY GOOD & FAIR & POOR 190 98%	FE- MALE 112 100%	MALE 122 99%		
VALID CASES	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q56.5 WHAT IS YOUR RACE? RESPONSE: AMERICAN INDIAN OR ALASKA NATIVE

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q56.5 YES	21 6%	314 6%	3 11%	1 2%*	2 5%	7 9%	4 5%	4 17%	~	~	~	~	5 ~100%	16 ~62%	1 4%	19 7%	11 6%	9 8%	11 9%	10 5%	
NO	307 94%	5139 94%	24 89%	51 98%*	41 95%	70 91%	82 95%	19 83%	251 100%	1 100%	2 100%	2 100%	~	12 ~100%	10 38%	27 96%	257 93%	183 94%	103 92%	112 91%	176 95%
VALID CASES	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q56.6 WHAT IS YOUR RACE? RESPONSE: OTHER

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	WHTE AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q56.6 YES	20 6%	300 5%	3 11%	1 2%*	1 2%~	6 8%	7 8%	2 9%~	~	~	~	~	12 ~100%~	8 31%~	12 43%~	8 3%*	12 6%	8 7%	12 10%	8 4%	
NO	308 94%	5153 95%	24 89%~	51 98%*	42 98%~	71 92%	79 92%	21 91%~	251 100%~	1 100%~	2 100%~	2 100%~	5 100%~	18 ~ 69%~	16 57%~	268 97%*	182 94%	104 93%	111 90%	178 96%	
VALID CASES	328	5453	27	52	43	77	86	23	251	1	2	2	5	12	26	28	276	194	112	123	186
NUMBER OF RESPONDENTS	328 100%	5453 100%	27 100%	52 100%	43 100%	77 100%	86 100%	23 100%	251 100%	1 100%	2 100%	2 100%	5 100%	12 100%	26 100%	28 100%	276 100%	194 100%	112 100%	123 100%	186 100%

Q57 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	AHP TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNICITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT VERY GOOD & FAIR & POOR	EX & VERY GOOD & POOR	FE- MALE	MALE	
Q57 YES	239%	65216%*	422%~	618%~	1~	79%	420%~	157%~	2~100%~	~	4~36%~	~	522%~	178%~	127%	1012%	1515%*	85%*			
NO	22791%	348884%*	1478%~	2882%~	30100%~	6699%*	7291%	1680%~	19393%~	1~100%~	~	5~100%~	764%~	15100%~	1878%~	20492%~	14893%	7688%	8485%*	14195%*	
NOT ANSWERED	3	78	1							1				1		2		1	1		
VALID CASES	250	4141	18	34	30	67	79	20	208	1	2		5	11	15	23	221	160	86	99	149
NUMBER OF RESPONDENTS	253100%	4219100%	19100%	34100%	30100%	67100%	79100%	20100%	208100%	1100%	2100%	1	5100%	11100%	15100%	24100%	221100%	162100%	86100%	100100%	150100%

[ASKED IF SURVEY COMPLETED BY MAIL]

Q58.1 HOW DID THAT PERSON HELP YOU? RESPONSE: READ THE QUESTIONS TO ME.

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q58.1 YES	10 43%	253 47%	1 25%	3 50%	~	4 57%	1 25%	6 40%	~	~	~	4 100%	4 80%	6 35%	4 33%	6 60%	7 47%	3 38%		
NO	13 57%	289 53%	3 75%	3 50%	~	1 100%	3 43%	3 75%	9 60%	2 100%	~	~	~	1 20%	11 65%	8 67%	4 40%	8 53%	5 63%	
VALID CASES	23	542	4	6	1	7	4	15	2	4	5	17	12	10	15	8				
NUMBER OF RESPONDENTS	23 100%	542 100%	4 100%	6 100%	1 100%	7 100%	4 100%	15 100%	2 100%	4 100%	5 100%	17 100%	12 100%	10 100%	15 100%	8 100%				

[ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]

Q58.2 HOW DID THAT PERSON HELP YOU? RESPONSE: WROTE DOWN THE ANSWERS I GAVE.

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
Q58.2 YES	11 48%	188 35%	1 25%	2 33%	~	5 71%	2 50%	7 47%	~	~	~	4 ~100%	~	4 80%	7 41%	4 33%	7 70%	9 60%	2 25%	
NO	12 52%	354 65%	3 75%	4 67%	~	1 100%	2 29%	2 50%	8 53%	2 ~100%	~	~	~	1 20%	10 59%	8 67%	3 30%	6 40%	6 75%	
VALID CASES	23	542	4	6	1	7	4	15	2	4	5	17	12	10	15	8				
NUMBER OF RESPONDENTS	23 100%	542 100%	4 100%	6 100%	1 100%	7 100%	4 100%	15 100%	2 100%	4 100%	5 100%	17 100%	12 100%	10 100%	15 100%	8 100%				

[ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]

Q58.3 HOW DID THAT PERSON HELP YOU? RESPONSE: ANSWERED THE QUESTIONS FOR ME.

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q58.3 YES	8 35%	197 50%~	2 50%~	3 50%~	1 ~100%~	1 14%~	1 25%~	7 47%~	~	~	~	~	~	1 20%~	7 41%~	5 42%~	2 20%~	4 27%~	4 50%~
NO	15 65%	345 64%~	2 50%~	3 50%~	~	6 ~86%~	3 75%~	8 53%~	2 ~100%~	~	~	4 ~100%~	~	4 80%~	10 59%~	7 58%~	8 80%~	11 73%~	4 50%~
VALID CASES	23	542	4	6	1	7	4	15	2	~	~	4	~	5	17	12	10	15	8
NUMBER OF RESPONDENTS	23 100%	542 100%	4 100%	6 100%	1 100%	7 100%	4 100%	15 100%	2 100%	~	~	4 100%	~	5 100%	17 100%	12 100%	10 100%	15 100%	8 100%

[ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]

Q58.4 HOW DID THAT PERSON HELP YOU? RESPONSE: TRANSLATED THE QUESTIONS INTO MY LANGUAGE.

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q58.4 YES	2 9%	81 15%	~	~	~	~	14% 25%	~	~	100%	~	~	~	~	12%	2 17%	2 17%	~	1 7%	1 13%
NO	21 91%	461 85%	4 100%	6 100%	~	1 100%	6 86%	3 75%	15 100%	~	~	~	4 100%	~	5 100%	15 88%	10 83%	10 100%	14 93%	7 88%
VALID CASES	23	542	4	6	~	1	7	4	15	2	~	~	4	~	5	17	12	10	15	8
NUMBER OF RESPONDENTS	23 100%	542 100%	4 100%	6 100%	~	1 100%	7 100%	4 100%	15 100%	2 100%	~	~	4 100%	~	5 100%	17 100%	12 100%	10 100%	15 100%	8 100%

[ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]

Q58.5 HOW DID THAT PERSON HELP YOU? RESPONSE: HELPED IN SOME OTHER WAY.

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q58.5	YES	1	44	1	~	~	~	~	~	~	~	~	1	20%	~	~	10%	7%	~	
	4%	8%	25%	~	~	~	~	~	~	~	~	25%	~	20%	~	~	10%	7%	~	
	NO	22	498	3	6	1	7	4	15	2	3	4	17	12	9	14	8	93%	100%	
	96%	92%	75%	100%	~	100%	100%	100%	100%	~	75%	~	80%	100%	100%	90%	93%	100%	~	
	VALID CASES	23	542	4	6	1	7	4	15	2	4	5	17	12	10	15	8	100%	100%	
	NUMBER OF RESPONDENTS	23	542	4	6	1	7	4	15	2	4	5	17	12	10	15	8	100%	100%	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]

NQ13 RATING OF ALL HEALTH CARE

	AHP TOT ADULT	OHP TOT ADULT	AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE				
NQ13 0-6	42 19%	759 20%	4 25%	12 32%	4 14%	10 18%	10 17%	1 5%	33 19%	~	~	~	1 50%	3 33%	2 10%	4 22%	37 19%	18 15%	24 27%*	14 17%	28 21%		
7-8	75 34%	1267 34%	8 50%	11 30%	12 43%	19 34%	17 29%	6 32%	63 36%	~	~	~	1 50%	1 11%	7 33%	1 6%	72 37%	43 35%	29 32%	27 33%	46 34%		
9-10	104 47%	1714 46%	4 25%	14 38%	12 43%	27 48%	32 54%	12 63%	78 45%	1 100%	1 100%	1 100%	2 100%	9 100%	21 100%	5 56%	12 57%	13 72%	86 44%	61 50%	37 41%	41 50%	60 45%
VALID CASES	221	3741	16	37	28	56	59	19	174	1	1	1	2	9	21	18	195	122	90	82	134		
NUMBER OF RESPONDENTS	221 100%	3741 100%	16 100%	37 100%	28 100%	56 100%	59 100%	19 100%	174 100%	1 100%	1 100%	1 100%	2 100%	9 100%	21 100%	5 100%	12 100%	13 100%	86 100%	61 100%	37 100%	41 100%	60 100%
MEAN	2.28	2.26	2.00	2.05	2.29	2.30	2.37	2.58	2.26	3.00	3.00	3.00	1.50	2.22	2.48	2.50	2.25	2.35	2.14	2.33	2.24		
p stat_(*=Sig @ p<=.05)		.621	~	~	~.794	.280	~	~	~	~	~	~	~	~	~	~	~	.125	.028*	.466	.315		

[ASKED IF Q7 >= 1 TIME]

NQ23 RATING OF PERSONAL DOCTOR

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
NQ23																					
0-6	51 20%	617 16%	4 20%	9 20%	10 28%	14 24%	11 17%	1 5%	39 20%	~	~	~	~	3 33%	5 22%	2 10%	48 22%	28 19%	22 23%	19 20%	31 21%
7-8	60 24%	999 25%	8 40%	14 31%	5 14%	17 29%	11 17%	3 16%	49 25%	~	1 50%	~	1 50%	~	5 22%	2 10%	55 25%	38 26%	20 21%	26 27%	32 22%
9-10	140 56%	2342 59%	8 40%	22 49%	21 58%	28 47%	43 66%*	15 79%	111 56%	1 100%	1 50%	~	1 50%	6 67%	13 57%	16 80%	119 54%	80 55%	53 56%	52 54%	85 57%
VALID CASES	251	3959	20	45	36	59	65	19	199	1	2		2	9	23	20	222	146	95	97	148
NUMBER OF RESPONDENTS	251 100%	3959 100%	20 100%	45 100%	36 100%	59 100%	65 100%	19 100%	199 100%	1 100%	2 100%		2 100%	9 100%	23 100%	20 100%	222 100%	146 100%	95 100%	97 100%	148 100%
MEAN	2.35	2.44	2.20	2.29	2.31	2.24	2.49	2.74	2.36	3.00	2.50		2.50	2.33	2.35	2.70	2.32	2.36	2.33	2.34	2.36
p stat_(*=Sig @ p<=.05)		.079	~	~	~.198	.107		~.780	~	~	~	~	~	~	~	~	~.971	.668		.821	.808

[ASKED IF Q15 = YES]

NQ27 RATING OF SPECIALIST SEEN MOST OFTEN

	AHP TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
NQ27 0-6	11 11%	257 14%	3 ~ 19%	1 8%	1 4%	6 18%	11 13%	~	~	~	~	~	~	~	11 11%	5 9%	6 13%	6 19%	5 7%	
7-8	23 22%	429 23%	1 20%	3 19%	2 15%	6 25%	9 27%	1 10%	17 20%	~	~	1 100%	~	2 15%	1 25%	21 22%	11 20%	10 22%	3 9%	19 28%
9-10	69 67%	1164 63%	4 80%	10 63%	10 77%	17 71%	18 55%	9 90%	55 66%	1 100%	~	1 100%	11 85%	3 75%	64 67%	38 70%	29 64%	23 72%	45 65%	
VALID CASES	103	1850	5	16	13	24	33	10	83	1	1	1	13	4	96	54	45	32	69	
NUMBER OF RESPONDENTS	103 100%	1850 100%	5 100%	16 100%	13 100%	24 100%	33 100%	10 100%	83 100%	1 100%	1 100%	1 100%	13 100%	4 100%	96 100%	54 100%	45 100%	32 100%	69 100%	
MEAN	2.56	2.49	2.80	2.44	2.69	2.67	2.36	2.90	2.53	3.00	2.00	3.00	2.85	2.75	2.55	2.61	2.51	2.53	2.58	
p stat_(*=Sig @ p<=.05)		.299	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

[ASKED IF Q24 = YES AND Q26 >= 1 SPECIALIST]

NQ35 RATING OF HEALTH PLAN

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE			
NQ35																						
0-6	82 28%	1116 23%	6 24%	17 35%	12 30%	19 26%	24 30%	1 5%	65 28%	~	~	~	3 75%	4 36%	6 23%	4 15%	75 29%	48 27%	31 30%	26 23%	54 31%	
7-8	85 29%	1551 32%	12 48%	16 33%	10 25%	20 27%	21 26%	5 26%	74 32%*	~	1 50%	~	~	~	6 23%	2 8%	81 31%	55 31%	26 25%	42 37%*	42 24%*	
9-10	126 43%	2193 45%	7 28%	16 33%	18 45%	34 47%	35 44%	13 68%	93 40%	1 100%	1 50%	1 100%	1 25%	4 64%	7 54%	14 77%	20 40%	102 40%	76 42%	48 46%	47 41%	77 45%
VALID CASES	293	4860	25	49	40	73	80	19	232	1	2	1	4	11	26	26	258	179	105	115	173	
NUMBER OF RESPONDENTS	293 100%	4860 100%	25 100%	49 100%	40 100%	73 100%	80 100%	19 100%	232 100%	1 100%	2 100%	1 100%	4 100%	11 100%	26 100%	26 100%	258 100%	179 100%	105 100%	115 100%	173 100%	
MEAN	2.15	2.22	2.04	1.98	2.15	2.21	2.14	2.63	2.12	3.00	2.50	3.00	1.50	2.27	2.31	2.62	2.10	2.16	2.16	2.18	2.13	
p stat_(*=Sig @ p<=.05)		.116	~	~	~.514	.873	~	.258	~	~	~	~	~	~	~	~	~.872	.859	.592	.665		

GETTING NEEDED CARE

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
NPRBSEE4 NQ25	2.42	2.25	2.60	2.24	2.54	2.38	2.41	2.67	2.45	3.00	1.00	2.00	2.31	2.75	2.40	2.47	2.38	2.47	2.40		
p stat_(*=Sig @ p<=.05)		.024*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.475	~	~	~	
NCARNES4 NQ14	2.34	2.30	2.12	2.11	2.56	2.28	2.38	2.84	2.35	3.00	3.00	3.00	1.00	2.38	2.38	2.44	2.34	2.43	2.25	2.35	2.34
p stat_(*=Sig @ p<=.05)		.421	~	~	~.482	.662	~	~	~	~	~	~	~	~	~	~	~.048*	.151	.845	.950	
COMPOSITE	2.38	2.28	2.36	2.17	2.55	2.33	2.39	2.75	2.40	3.00	3.00	3.00	1.00	2.19	2.34	2.60	2.37	2.45	2.32	2.41	2.37
p stat_(*=Sig @ p<=.05)		.045*	~	~	~.465	.866	~	~.361	~	~	~	~	~	~	~	~	~.060	.191	.582	.697	

GETTING CARE QUICKLY

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHER	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NCARSN4 NQ4	2.41	2.38	2.30	2.38	2.57	2.32	2.46	2.33	2.46				1.00	2.40	2.08	2.50	2.40	2.47	2.35	2.35	2.43
p stat_(*=Sig @ p<=.05)		.606	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.399	.435	~	.712
NAPGET4 NQ6	2.27	2.32	2.25	1.80	2.40	2.33	2.75	2.30	3.00	1.00			1.50	2.33	2.19	2.47	2.24	2.20	2.40	2.24	2.28
p stat_(*=Sig @ p<=.05)		.349	~	~	~.593	.579	~	~	~	~	~	~	~	~	~	~	~	.183	.065	.696	.864
COMPOSITE	2.34	2.35	2.27	2.09	2.48	2.33	2.39	2.54	2.38	3.00	1.00	x	1.25	2.37	2.13	2.49	2.32	2.34	2.38	2.30	2.36
p stat_(*=Sig @ p<=.05)		.880	~	~	~.822	.510	~	.096	~	~	~	~	~	~	~	~	~	.880	.518	.410	.705

HOW WELL DOCTORS COMMUNICATE

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
NDREXPL4 NQ17	2.62	2.62	2.31	2.52	2.60	2.73	2.63	3.00	2.66	3.00	3.00	3.00	2.71	2.19	2.77	2.61	2.74	2.50	2.60	2.65	
p stat_(*=Sig @ p<=.05)		.929	~	~	~	~	.876	~	~	~	~	~	~	~	~	~	~	.006*	.030*	.767	.497
NDRLSTN4 NQ18	2.59	2.59	2.62	2.52	2.54	2.60	2.61	3.00	2.62	3.00	3.00	3.00	2.71	2.25	2.85	2.57	2.72	2.46	2.56	2.63	
p stat_(*=Sig @ p<=.05)		.947	~	~	~	~	.828	~	~	~	~	~	~	~	~	~	~	.007*	.037*	.672	.351
NDRESPU4 NQ19	2.67	2.65	2.77	2.68	2.62	2.69	2.64	2.86	2.70	3.00	3.00	3.00	2.71	2.31	2.85	2.66	2.77	2.53	2.67	2.67	
p stat_(*=Sig @ p<=.05)		.638	~	~	~	~	.749	~	~	~	~	~	~	~	~	~	~	.015*	.024*	.940	.883
NDRTMEN4 NQ20	2.50	2.49	2.38	2.39	2.62	2.54	2.49	2.86	2.51	3.00	3.00	3.00	2.86	2.25	2.69	2.49	2.60	2.41	2.58	2.48	
p stat_(*=Sig @ p<=.05)		.808	~	~	~	~	.918	~	~	~	~	~	~	~	~	~	~	.042*	.146	.254	.613
COMPOSITE	2.59	2.59	2.52	2.52	2.59	2.64	2.59	2.93	2.62	3.00	3.00	x 3.00	2.75	2.25	2.79	2.58	2.71	2.47	2.60	2.61	
p stat_(*=Sig @ p<=.05)		.931	~	~	~	~	.990	~	~	~	~	~	~	~	~	~	~	.022*	.073	.902	.776

CUSTOMER SERVICE

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHER	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NPBCLCS4 NQ31	2.18	2.23	2.40	2.05	1.82	2.40	2.12	2.50	2.20	3.00	1.00	1.00	1.00	2.00	2.38	2.25	2.14	2.33	1.87	2.25	2.15
p stat_(*=Sig @ p<=.05)		.528	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ32	2.65	2.63	3.00	2.60	2.45	2.80	2.56	2.87	2.62	3.00	3.00	3.00	1.00	3.00	3.00	2.75	2.62	2.75	2.44	2.54	2.71
p stat_(*=Sig @ p<=.05)		.753	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.41	2.43	2.70	2.32	2.14	2.60	2.34	2.69	2.41	3.00	2.00	2.00	1.00	2.50	2.69	2.50	2.38	2.54	2.16	2.40	2.43
p stat_(*=Sig @ p<=.05)		.867	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHER	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NNRXWHY NQ10	2.91	2.84	3.00	2.90	3.00	2.88	2.84	3.00	2.91				3.00	2.33	3.00	2.75	2.92	2.94	2.87	2.95	2.88
p stat_(*=Sig @ p<=.05)		.049*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.458	.315	~	~
NNRXWYNT NQ11	2.40	2.45	2.64	2.52	2.43	2.29	2.35	2.27	2.39				3.00	1.00	2.67	2.00	2.42	2.50	2.31	2.49	2.35
p stat_(*=Sig @ p<=.05)		.486	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.222	.318	~	~
NRXBST NQ12	2.41	2.50	2.60	2.81	2.43	2.06	2.53	2.09	2.46				2.00	2.50	2.00	3.00	2.37	2.43	2.39	2.49	2.37
p stat_(*=Sig @ p<=.05)		.241	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.858	.757	~	~
COMPOSITE	2.57	2.60	2.75	2.75	2.62	2.41	2.57	2.45	2.58	x	x	x	2.67	1.94	2.56	2.58	2.57	2.62	2.52	2.64	2.53
p stat_(*=Sig @ p<=.05)		.831	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.591	.577	~	~

GETTING NEEDED CARE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE	
PRBSEE4 Q25	87%	78%	100%	76%	85%	88%	88%	89%	87%		100%		0%	100%	85%	100%	86%	87%	87%	91%	85%
CARNES4 Q14	83%	82%	81%	76%	89%	81%	84%	95%	84%	100%	100%	100%	0%	75%	86%	83%	83%	85%	80%	85%	81%
AVERAGE	84.76	80.02	90.63	76.07	86.75	84.97	85.92	91.81	85.85	x	x	x		75.00	85.16	91.67	84.42	86.32	83.39	88.00	82.96

GETTING CARE QUICKLY (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE	
CARSN4 Q4	82%	83%	100%	76%	83%	76%	86%	83%	84%				0%	80%	69%	100%	80%	83%	81%	82%	81%
APGET4 Q6	75%	80%	75%	49%	76%	79%	78%	94%	75%	100%	0%		50%	67%	71%	82%	72%	67%	85%	74%	73%
AVERAGE	78.44	81.23	87.50	62.38	79.30	77.66	81.95	88.54	79.16	x	x	x	50.00	73.33	70.33	91.18	76.32	75.29	83.01	77.98	77.43

HOW WELL DOCTORS COMMUNICATE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
DREXPL4 Q17	92%	92%	92%	94%	84%	94%	93%	100%	94%	100%	100%		100%	86%	75%	92%	92%	97%	86%	90%	93%
DRLSTN4 Q18	87%	90%	85%	87%	81%	90%	88%	100%	89%	100%	100%		100%	86%	75%	92%	87%	92%	81%	86%	88%
DRESPU4 Q19	90%	91%	100%	94%	81%	90%	89%	100%	92%	100%	100%		100%	86%	75%	92%	90%	93%	85%	92%	89%
DRTMEN4 Q20	86%	88%	92%	81%	88%	90%	82%	100%	86%	100%	100%		100%	100%	81%	92%	86%	91%	81%	89%	85%
AVERAGE	88.7	90.4	92.3	88.7	83.5	90.6	88.1	100	90.3	x	x	x	100	89.3	76.6	92.3	88.5	93.4	83.2	89.4	88.6

CUSTOMER SERVICE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTH R	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE	
PBCLCS4 Q31	74%	76%	100%	65%	55%	85%	68%	100%	73%	100%	0%	0%	0%	50%	100%	75%	72%	79%	63%	75%	74%
CSRESP Q32	92%	92%	100%	85%	91%	95%	96%	100%	93%	100%	100%	100%	0%	100%	100%	88%	92%	95%	87%	92%	94%
AVERAGE	82.97	84.03	100.0	75.00	72.73	90.00	82.00	100.0	83.10	x	x	x	x	75.00	100.0	81.25	82.28	86.84	75.00	83.33	83.85

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE			
NRXWHY Q10	95%	92%	100%	95%	100%	94%	92%	100%	95%			100%	67%	100%	88%	96%	97%	93%	98%	94%	
NRXWYNT Q11	70%	73%	82%	76%	71%	65%	68%	64%	69%			100%	0%	83%	50%	71%	75%	66%	74%	67%	
RXBST Q12	71%	75%	80%	90%	71%	53%	76%	55%	73%			50%	75%	50%	100%	68%	71%	69%	74%	69%	
AVERAGE	78.7	79.8	87.3	87.3	81.0	70.6	78.6	72.7	79.2	x	x	x	83.3	47.2	77.8	79.2	78.4	81.1	76.1	82.2	76.7

Q1 OUR RECORDS SHOW THAT YOUR CHILD IS NOW IN <ALL CARE HEALTH PLAN>. IS THAT RIGHT?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q1 YES	299	5304	2	63	82	79	73	204	3	3	1	3	14	36	83	194	270	12	233	66
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
NOT ANSWERED	1	59			1			1							1		1		1	
VALID CASES	299	5304	2	63	82	79	73	204	3	3	1	3	14	36	83	194	270	12	233	66
NUMBER OF RESPONDENTS	300	5363	2	63	83	79	73	205	3	3	1	3	14	36	84	194	270	13	234	66
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q3 IN THE LAST 6 MONTHS, DID YOUR CHILD HAVE AN ILLNESS, INJURY, OR CONDITION THAT NEEDED CARE RIGHT AWAY IN A CLINIC, EMERGENCY ROOM OR DOCTOR'S OFFICE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q3 YES	122 41%	1687 32%*	1 50%~	35 56%*	34 42%	25 32%	27 37%	80 39%	1 33%~	1 33%~	2 ~ 67%~	4 29%~	15 42%~	33 40%	76 39%	100 37%~	10 77%~	89 39%	33 50%	
NO	173 59%	3541 68%*	1 50%~	28 44%*	47 58%	52 68%	45 63%	124 61%	2 67%~	2 67%~	1 100%~	1 33%~	10 71%~	21 58%~	49 60%	117 61%	167 63%~	3 23%~	140 61%	33 50%
NOT ANSWERED	5	135			2	2	1	1						2	1	3		5		
VALID CASES	295	5228	2	63	81	77	72	204	3	3	1	3	14	36	82	193	267	13	229	66
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	73 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%

Q4 IN THE LAST 6 MONTHS, WHEN YOUR CHILD NEEDED CARE RIGHT AWAY, HOW OFTEN DID YOUR CHILD GET CARE AS SOON AS HE OR SHE NEEDED?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q4 NEVER	2 2%	18 1%	~	3%~	~	~	4%~	2 3%~	~	~	~	~	~	2 6%~	2 2%~	~	2 2%~	~		
SOMETIMES	8 7%	148 9%	~	3%~	3%~	17%~	8%~	6 8%~	~	~	~	1 25%~	4 13%~	3 4%~	6 7%~	1 10%~	6 7%~	2 6%~		
USUALLY	17 15%	323 20%	~	3%~	4%~	22%~	5%~	10 14%~	~	~	1 50%~	4 27%~	4 13%~	11 16%~	13 14%~	3 30%~	12 15%~	5 16%~		
ALWAYS	86 76%	1151 70%	100%~	85%~	84%~	61%~	68%~	55 75%~	1 100%~	1 100%~	~	3 50%~	11 75%~	21 68%~	56 80%~	71 77%~	6 60%~	61 75%~	25 78%~	
#ALWAYS + USUALLY (NET)	103 91%	1475 90%	100%~	94%~	97%~	83%~	88%~	65 89%~	1 100%~	1 100%~	~	2 100%~	3 75%~	15 81%~	15 96%~	84 91%~	9 90%~	73 90%~	30 94%~	
TOP BOX SCORE	86 76%	1151 70%	100%~	85%~	84%~	61%~	68%~	55 75%~	1 100%~	1 100%~	~	3 50%~	11 75%~	21 68%~	56 80%~	71 77%~	6 60%~	61 75%~	25 78%~	
NOT ANSWERED	9	142		2	3	2	2	7					2	6	8		8	1		
VALID CASES	113	1641	1	33	31	23	25	73	1	1		2	4	15	31	70	92	10	81	32
NUMBER OF RESPONDENTS	122	1783	1	35	34	25	27	80	1	1		2	4	15	33	76	100	10	89	33
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q3 = YES]

Q5 IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS FOR A CHECK UP OR ROUTINE CARE FOR YOUR CHILD AT A DOCTOR'S OFFICE OR CLINIC?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q5 YES	195 66%	3345 65%	2 100%~	54 86%*	48 59%	40 53%*	51 70%	135 66%	2 67%~	1 33%~	3 ~100%~	8 57%~	26 74%~	55 66%	127 66%	174 65%~	11 85%~	146 64%	49 74%	
Q5 NO	100 34%	1824 35%	~	9 14%*	33 41%	36 47%*	22 30%	70 34%	1 33%~	2 67%~	1 100%~	6 ~	9 43%~	28 34%	66 34%	94 35%~	2 15%~	83 36%	17 26%	
NOT ANSWERED	5	194			2	3							1	1	1	2		5		
VALID CASES	295	5169	2	63	81	76	73	205	3	3	1	3	14	35	83	193	268	13	229	66
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	73 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%

Q6 IN THE LAST 6 MONTHS, WHEN YOU MADE AN APPOINTMENT FOR A CHECK UP OR ROUTINE CARE FOR YOUR CHILD AT A DOCTOR'S OFFICE OR CLINIC, HOW OFTEN DID YOU GET AN APPOINTMENT AS SOON AS YOUR CHILD NEEDED?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC			
Q6 NEVER	1 0.5%	35 1%	~	~	~	~	2%	1 0.8%	~	~	~	~	~	1 ~0.8%	1 0.6%	~	~	1 2%			
SOMETIMES	25 13%	451 14%	100%~	14%	13%~	13%~	10%	17 13%	~	~	~	~	5 19%~	9 17%	13 11%	23 14%~	1 9%~	17 12%~	8 16%~		
USUALLY	43 23%	814 26%	~	18%~	11 23%~	11 28%~	12 24%	30 23%	~	~	~	1 33%~	2 25%~	7 27%~	15 28%	27 22%	38 23%~	4 36%~	30 21%~	13 27%~	
ALWAYS	120 63%	1829 58%	~	68%~	34 64%~	30 59%~	23 65%	33 63%	81 100%~	2 100%~	1 100%~	~	2 67%~	6 75%~	14 54%~	29 55%	82 67%	106 63%~	6 55%~	93 66%~	27 55%~
#ALWAYS + USUALLY (NET)	163 86%	2643 84%	~	86%~	43 87%~	41 87%~	34 88%	45 86%	2 100%~	1 100%~	~	3 100%~	8 100%~	21 81%~	44 83%	109 89%	144 86%~	10 91%~	123 88%~	40 82%~	
TOP BOX SCORE	120 63%	1829 58%	~	68%~	34 64%~	30 59%~	23 65%	33 63%	81 100%~	2 100%~	1 100%~	~	2 67%~	6 75%~	14 54%~	29 55%	82 67%	106 63%~	6 55%~	93 66%~	27 55%~
NOT ANSWERED	6	215		4	1	1		6							2	4	6		6		
VALID CASES	189	3129	2	50	47	39	51	129	2	1		3	8	26	53	123	168	11	140	49	
NUMBER OF RESPONDENTS	195	3344	2	54	48	40	51	135	2	1		3	8	26	55	127	174	11	146	49	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q5 = YES]

Q7 IN THE LAST 6 MONTHS, NOT COUNTING THE TIMES YOUR CHILD WENT TO AN EMERGENCY ROOM, HOW MANY TIMES DID HE OR SHE GO TO A DOCTOR'S OFFICE OR CLINIC TO GET HEALTH CARE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC			
Q7 NONE	78 27%	1553 31%		7 ~ 11%*	25 31%	28 37%*	18 25%	58 28%	1 33%~	1 33%~	1 100%~	1 33%~	5 36%~	5 14%~	21 26%	53 27%	75 28%~	1 8%~	69 31%*	9 14%*	
1 TIME	71 24%	1446 28%		15 ~ 24%	17 21%	22 29%	17 24%	52 25%	2 67%~	2 67%~				1 ~ 7%~	8 22%~	19 24%	48 25%	68 25%~	1 8%~	61 27%*	10 15%*
2	72 25%	1007 20%*		1 50%~	21 34%	18 23%	13 17%	19 27%	46 22%				1 ~ 33%~	5 36%~	13 36%~	24 30%	43 22%	66 25%~	1 8%~	50 22%	22 33%
3	34 12%	534 11%		7 ~ 11%	11 14%	7 9%	9 13%	23 11%				1 ~ 33%~		4 ~ 11%~	7 9%	24 12%	29 11%~	3 25%~	24 11%	10 15%	
4	17 6%	260 5%		8 ~ 13%*	3 4%	3 4%	3 4%	13 6%						1 ~ 7%~	2 6%~	5 6%	11 6%	15 6%~	1 8%~	13 6%	4 6%
5 TO 9	13 4%	196 4%		2 ~ 3%	5 6%	2 3%	4 6%	10 5%						2 ~ 14%~	1 3%~	4 5%	9 5%	10 4%~	3 25%~	4 2%*	9 14%*
10 OR MORE TIMES	6 2%	87 2%		1 50%~	2 3%	1 1%	1 1%	1 1%	3 1%						3 8%~		6 3%*	4 1%~	2 17%~	4 2%	2 3%
NOT ANSWERED	9	280		1	3	3	2							4			3	1	9		
VALID CASES	291	5083	2	62	80	76	71	205	3	3	1	3	14	36	80	194	267	12	225	66	
NUMBER OF RESPONDENTS	300	5363	2	63	83	79	73	205	3	3	1	3	14	36	84	194	270	13	234	66	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q8 IN THE LAST 6 MONTHS, DID YOU AND YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT SPECIFIC THINGS YOU COULD DO TO PREVENT ILLNESS IN YOUR CHILD?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC		
Q8 #YES	155 73%	2386 68%	2 100%	40 74%	39 71%	33 70%	41 77%	104 72%	2 100%	2 100%	2 ~100%	7 78%	23 74%	38 66%	107 76%	140 74%	7 64%	109 71%	46 81%	
NO	56 27%	1113 32%		14 ~26%	16 29%	14 30%	12 23%	41 28%				2 ~22%	8 26%	20 34%	33 24%	50 26%	4 36%	45 29%	11 19%	
NOT ANSWERED	2	69		1		1		2						1	1	2		2		
VALID CASES	211	3499	2	54	55	47	53	145	2	2	2	9	31	58	140	190	11	154	57	
NUMBER OF RESPONDENTS	213 100%	3568 100%	2 100%	55 100%	55 100%	48 100%	53 100%	147 100%	2 100%	2 100%		2 100%	9 100%	31 100%	59 100%	141 100%	192 100%	11 100%	156 100%	57 100%

[ASKED IF Q7 >= 1 TIME]

Q9 IN THE LAST 6 MONTHS, HOW OFTEN DID YOU HAVE YOUR QUESTIONS ANSWERED BY YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q9 NEVER	2 1%	78 2%	~	2%	~	2%	~	0.7%	~	~	~	~	~	3%	~	1%	1%	~	1%	~
SOMETIMES	23 11%	344 10%	~	9%	13%	7%	15%	13 9%	~	~	~	50%	11%	16%	21%*	6%*	11%	18%	8%*	19%*
USUALLY	41 20%	768 22%	~	20%	20%	22%	17%	28 19%	~	~	~	33%	19%	24%	17%	19%	36%	4%	21%	16%
ALWAYS	144 69%	2292 66%	100%	69%	67%	70%	68%	103 71%	2 100%	2 100%	~	50%	56%	61%	55%*	75%*	69%	45%	70%	65%
#ALWAYS + USUALLY (NET)	185 88%	3059 88%	100%	89%	87%	91%	85%	131 90%	2 100%	2 100%	~	50%	89%	81%	79%*	92%*	88%	82%	91%	81%
TOP BOX SCORE	144 69%	2292 66%	100%	69%	67%	70%	68%	103 71%	2 100%	2 100%	~	50%	56%	61%	55%*	75%*	69%	45%	70%	65%
NOT ANSWERED	3	87		1		2		2							1	1	2		3	
VALID CASES	210	3481	2	54	55	46	53	145	2	2		2	9	31	58	140	190	11	153	57
NUMBER OF RESPONDENTS	213 100%	3568 100%	2 100%	55 100%	55 100%	48 100%	53 100%	147 100%	2 100%	2 100%		2 100%	9 100%	31 100%	59 100%	141 100%	192 100%	11 100%	156 100%	57 100%

[ASKED IF Q7 >= 1 TIME]

Q10 IN THE LAST 6 MONTHS, DID YOU AND YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE FOR YOUR CHILD?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC			
Q10 YES	67 32%	1122 32%	1 50%~	15 28%	19 35%	12 27%~	20 38%	47 33%	1 50%~	~	1 ~	1 50%~	9 11%~	29%~	13 22%*	49 35%	56 30%~	6 55%~	42 28%*	25 44%*	
NO	141 68%	2348 68%	1 50%~	39 72%	36 65%	33 73%~	32 62%	97 67%	1 50%~	2 100%~	~	1 ~	8 50%~	22 89%~	71%~	45 78%*	90 65%	133 70%~	5 45%~	109 72%*	32 56%*
NOT ANSWERED	5	97		1		3	1	3							1	2	3		5		
VALID CASES	208	3471	2	54	55	45	52	144	2	2		2	9	31	58	139	189	11	151	57	
NUMBER OF RESPONDENTS	213	3568	2	55	55	48	53	147	2	2		2	9	31	59	141	192	11	156	57	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q7 >= 1 TIME]

Q11 WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT WANT YOUR CHILD TO TAKE A MEDICINE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q11 #YES	60 94%	947 94%	1 100%~	13 93%~	17 94%~	10 83%~	19 100%~	42 93%~	1 100%~		1 ~	1 ~	9 ~	11 100%~	45 94%~	50 94%~	6 100%~	38 93%~	22 96%~
NO	4 6%	63 6%		1 ~	1 7%~	2 6%~	17%~	3 7%~						3 ~	3 6%~		3 7%~	1 4%~	
NOT ANSWERED	17	450		3	4	6	4	5					7	3	9	1	15	2	
VALID CASES	64	1010	1	14	18	12	19	45	1	1	1	9	11	48	53	6	41	23	
NUMBER OF RESPONDENTS	81 100%	1460 100%	1 100%	17 100%	22 100%	18 100%	23 100%	50 100%	1 100%	1 100%	1 100%	9 100%	18 100%	51 100%	62 100%	7 100%	56 100%	25 100%	

[ASKED IF Q7 >= 1 TIME AND Q10 = YES]

Q12 WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT NOT WANT YOUR CHILD TO TAKE A MEDICINE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q12 #YES	45 70%	718 70%		9 ~ 64%	15 83%	8 67%	13 68%	30 67%	1 100%		1 ~	1 ~	7 78%	6 55%	36 75%	37 70%	5 83%	26 63%	19 83%
NO	19 30%	305 30%	1 100%	5 36%	3 17%	4 33%	6 32%	15 33%					2 22%	5 45%	12 25%	16 30%	1 17%	15 37%	4 17%
NOT ANSWERED	3	87		1	1		1	2						2	1	3		1	2
VALID CASES	64	1023	1	14	18	12	19	45	1		1	1	9	11	48	53	6	41	23
NUMBER OF RESPONDENTS	67	1110	1	15	19	12	20	47	1		1	1	9	13	49	56	6	42	25
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME AND Q10 = YES]

Q13 WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, DID A DOCTOR OR OTHER HEALTH PROVIDER ASK YOU WHAT YOU THOUGHT WAS BEST FOR YOUR CHILD?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC
Q13 #YES	48 73%	830 78%		11 ~ 73%~	13 68%~	7 58%~	17 89%~	34 74%~	1 100%~		1 ~ 100%~	1 100%~	5 56%~	8 62%~	37 77%~	40 73%~	5 83%~	29 69%~	19 79%~
NO	18 27%	241 22%	1 100%~	4 27%~	6 32%~	5 42%~	2 11%~	12 26%~					4 ~ 44%~	5 38%~	11 23%~	15 27%~	1 17%~	13 31%~	5 21%~
NOT ANSWERED	1	39					1	1						1	1			1	
VALID CASES	66	1071	1	15	19	12	19	46	1	1	1	9	13	48	55	6	42	24	
NUMBER OF RESPONDENTS	67	1110	1	15	19	12	20	47	1	1	1	9	13	49	56	6	42	25	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q7 >= 1 TIME AND Q10 = YES]

Q14 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH CARE POSSIBLE AND 10 IS THE BEST HEALTH CARE POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE ALL YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q14 WORST HEALTH CARE POSSIBLE	3	0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01	2	7	~	1	~	~	1	2	~	~	~	~	~	2	2	~	1	1
	1%	0.2%	~	2%	~	~	2%	1%	~	~	~	~	~	1%	1%	~	0.7%	2%
02	2	9	~	~	~	~	2	~	~	~	~	1	1	2	2	~	1	1
	1%	0.3%	~	~	~	~	4%	~	~	~	~	11%	3%	4%	1%	~	0.7%	2%
03	2	25	~	~	1	1	~	~	~	~	~	~	1	1	1	~	1	1
	1%	0.7%	~	~	2%	2%	~	~	~	~	~	3%	2%	~	0.5%	~	0.7%	2%
04	3	47	~	1	~	~	2	3	~	~	~	~	~	2	1	~	3	~
	1%	1%	~	2%	~	~	4%	2%	~	~	~	~	~	4%	0.7%	~	2%	~
05	7	121	~	2	4	1	~	6	~	~	~	~	~	1	5	~	4	3
	3%	3%	~	4%	7%	2%	~	4%	~	~	~	~	~	2%	4%	~	3%	5%
06	13	116	~	4	3	3	3	8	~	~	~	~	~	3	5	7	11	1
	6%	3%	~	7%	5%	7%	6%	6%	~	~	~	~	~	10%	9%	5%	6%	10%
07	13	300	~	2	2	5	4	10	~	~	~	1	2	1	12	12	1	11
	6%	9%	~	4%	4%	11%	8%	7%	~	~	~	11%	6%	2%*	9%*	6%	10%	7%
08	42	813	50%	11	12	8	10	31	~	~	~	1	9	11	29	38	3	31
	20%	23%	50%	20%	22%	18%	19%	22%	~	~	~	11%	29%	19%	21%	20%	30%	21%
09	40	704	50%	9	10	10	10	27	1	~	~	~	2	6	13	27	38	2
	19%	20%	50%	17%	18%	23%	19%	19%	50%	~	~	~	22%	19%	23%	19%	20%	20%
BEST HEALTH CARE POSSIBLE	83	1323	~	24	23	16	20	57	1	2	~	1	4	9	21	56	75	3
	40%	38%	~	44%	42%	36%	38%	40%	50%	100%	~	~	100%	44%	29%	37%	40%	40%
#8-10 (NET)	165	2841	100%	2	44	45	34	40	115	2	2	~	1	7	24	45	112	151
	80%	82%	100%	81%	82%	77%	77%	80%	100%	100%	~	~	100%	78%	77%	79%	81%	80%

Continued

Q14 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH CARE POSSIBLE AND 10 IS THE BEST HEALTH CARE POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE ALL YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC		
9-10 (NET)	123 59%	2027 58%	1 50%~	33 61%	33 60%	26 59%~	30 58%	84 58%	2 100%~	2 100%~	1 ~100%~	6 67%~	15 48%~	34 60%	83 60%	113 60%~	5 50%~	91 60%	32 57%	
NOT ANSWERED	6	98	1			4 1	3				1			2 2	3 1		5 1			
VALID CASES	207	3470	2	54	55	44	52	144	2	2	1	9	31	57	139	189	10	151	56	
NUMBER OF RESPONDENTS	213 100%	3568 100%	2 100%	55 100%	55 100%	48 100%	53 100%	147 100%	2 100%	2 100%		2 100%	9 100%	31 100%	59 100%	141 100%	192 100%	11 100%	156 100%	57 100%
MEAN	8.47	8.58	8.50	8.56	8.56	8.52	8.25	8.49	9.50	10.0	10.0	8.33	8.16	8.28	8.58	8.48	8.50	8.58	8.20	
p stat_(*=Sig @ p<=.05)		.406	~.709	.678		~.322		.829	~	~	~	~	~	~.402	.263	~	~	~.196	.196	

[ASKED IF Q7 >= 1]

Q15 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THE CARE, TESTS, OR TREATMENT YOUR CHILD NEEDED?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q15 NEVER	8 4%	64 2%	~	2%	4%	~	9%	7 5%	~	~	~	~	11%~	~	9%	3 2%	8 4%~	~	5 3%	3 5%	
SOMETIMES	24 12%	353 10%	100%~	13%	9%	13%~	8%	13 9%	~	~	~	50%~	11%~	23%~	16%	9 9%	20 11%~	3 27%~	13 9%	11 20%	
USUALLY	54 26%	1112 32%*	~	24%	22%	33%~	26%	35 24%	1 50%~	1 50%~	~	~	33%~	10 32%~	14 24%	39 28%	49 26%~	4 36%~	35 23%	19 34%	
ALWAYS	122 59%	1922 56%	~	61%	65%	53%~	57%	89 62%	1 50%~	1 50%~	~	~	50%~	4 44%~	14 45%~	30 52%	84 60%	112 59%~	4 36%~	99 65%*	23 41%*
#ALWAYS + USUALLY (NET)	176 85%	3034 88%	~	85%	87%	87%~	83%	124 86%	2 100%~	2 100%~	~	~	50%~	7 78%~	24 77%~	44 76%	123 88%*	161 85%~	8 73%~	134 88%*	42 75%*
TOP BOX SCORE	122 59%	1922 56%	~	61%	65%	53%~	57%	89 62%	1 50%~	1 50%~	~	~	50%~	4 44%~	14 45%~	30 52%	84 60%	112 59%~	4 36%~	99 65%*	23 41%*
NOT ANSWERED	5	117	~	1	1	3		3								1 2	3		4 1	1	
VALID CASES	208	3451	2	54	54	45	53	144	2	2		2	9	31	58	139	189	11	152	56	
NUMBER OF RESPONDENTS	213 100%	3568 100%	2 100%	55 100%	55 100%	48 100%	53 100%	147 100%	2 100%	2 100%		2 100%	9 100%	31 100%	59 100%	141 100%	192 100%	11 100%	156 100%	57 100%	

[ASKED IF Q7 >= 1 TIME]

Q16 IS YOUR CHILD NOW ENROLLED IN ANY KIND OF SCHOOL OR DAYCARE?

	AGE						RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC				
Q16 YES	207 71%	3643 71%	1 50%~	16 26%*	62 78%	65 87%*	63 89%*	146 71%	2 100%~	2 67%~	1 100%~	3 100%~	10 71%~	26 72%~	55 67%	139 72%	191 71%~	8 67%~	152 68%*	55 83%*	
NO	83 29%	1481 29%	1 50%~	46 74%*	18 22%	10 13%*	8 11%*	59 29%	1 ~	33%~	~	4 ~	10 29%~	27 28%~	54 28%~	27 33%	54 28%	77 29%~	4 33%~	72 32%*	11 17%*
NOT ANSWERED	10	239		1	3	4	2	1									2	1	10		
VALID CASES	290	5124	2	62	80	75	71	205	2	3	1	3	14	36	82	193	268	12	224	66	
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	73 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%	

Q17 IN THE LAST 6 MONTHS, DID YOU NEED YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TO CONTACT A SCHOOL OR DAYCARE CENTER ABOUT YOUR CHILD'S HEALTH OR HEALTH CARE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q17 YES	179%	40311%	~	20%~	12%	3%*	9%	11%	150%~	~	~	~	20%~	4%~	13%	7%	14%	25%~	7%	10%
NO	17891%	314389%	100%~	80%~	53%	88%	97%*	53%	123%	150%~	2100%~	1100%~	3100%~	880%~	25%	96%~	47%	87%	120%	93%
NOT ANSWERED	12	226		1	2	4	5	12							1	10	11		11	1
VALID CASES	195	3545	1	15	60	61	58	134	2	2	1	3	10	26	54	129	180	8	141	54
NUMBER OF RESPONDENTS	207	3771	1	16	62	65	63	146	2	2	1	3	10	26	55	139	191	8	152	55
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q16 = YES]

Q18 IN THE LAST 6 MONTHS, DID YOU GET THE HELP YOU NEEDED FROM YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER IN CONTACTING YOUR CHILD'S SCHOOL OR DAYCARE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
Q18 #YES	16 94%	349 94%~	3 ~100%~	6 86%~	2 ~100%~	5 ~100%~	10 91%~	1 100%~					2 ~100%~	1 ~100%~	7 100%~	8 89%~	13 93%~	2 100%~	7 100%~	9 90%~
NO	1 6%	22 6%~		1 ~14%~			1 9%~								1 ~11%~	1 7%~			1 ~10%~	
NOT ANSWERED		7																		
VALID CASES	17	371	3	7	2	5	11	1					2	1	7	9	14	2	7	10
NUMBER OF RESPONDENTS	17 100%	378 100%	3 100%	7 100%	2 100%	5 100%	11 100%	1 100%					2 100%	1 100%	7 100%	9 100%	14 100%	2 100%	7 100%	10 100%

[ASKED IF Q16 = YES AND Q17 = YES]

Q19 SPECIAL MEDICAL EQUIPMENT OR DEVICES INCLUDE A WALKER, WHEELCHAIR, NEBULIZER, FEEDING TUBES, OR OXYGEN EQUIPMENT. IN THE LAST 6 MONTHS, DID YOU GET OR TRY TO GET ANY SPECIAL MEDICAL EQUIPMENT OR DEVICES FOR YOUR CHILD?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q19 YES	14 5%	175 3%	1 50%~	2 3%	6 7%	4 5%	1 1%*	8 4%	~	~	~	33%~	~	11%~	4%	5%	10 4%~	3 25%~	6 3%*	8 12%*
NO	278 95%	4948 97%	1 50%~	59 97%	76 93%	71 95%	71 99%*	197 96%	3 100%	3 100%	1 100%	2 67%~	13 100%	32 89%~	80 96%	184 95%	260 96%~	9 75%~	220 97%*	58 88%*
NOT ANSWERED	8	240		2	1	4	1					1		1			1		8	
VALID CASES	292	5123	2	61	82	75	72	205	3	3	1	3	13	36	83	194	270	12	226	66
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	73 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%

Q20 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET SPECIAL MEDICAL EQUIPMENT OR DEVICES FOR YOUR CHILD?

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC
Q20 NEVER	3 21%	23 12%	1 100%	1 ~	1 17%	1 25%	1 13%	~	~	~	1 100%	~	1 25%	~	3 30%	2 20%	1 33%	1 17%	2 25%
SOMETIMES	3 21%	35 18%	~	~	3 50%	~	2 25%	~	~	~	~	~	1 25%	2 67%	1 10%	3 30%	~	1 17%	2 25%
USUALLY	4 29%	49 25%	~	1 50%	1 17%	1 25%	1 100%	2 25%	~	~	~	~	2 50%	~	4 40%	2 20%	2 67%	2 33%	2 25%
ALWAYS	4 29%	87 45%	~	1 50%	1 17%	2 50%	3 38%	~	~	~	~	~	~	1 33%	2 20%	3 30%	~	2 33%	2 25%
#ALWAYS + USUALLY (NET)	8 57%	135 70%	~	2 100%	2 33%	3 75%	1 100%	5 63%	~	~	~	~	2 50%	1 33%	6 60%	5 50%	2 67%	4 67%	4 50%
TOP BOX SCORE	4 29%	87 45%	~	1 50%	1 17%	2 50%	3 38%	~	~	~	~	~	~	1 33%	2 20%	3 30%	~	2 33%	2 25%
NOT ANSWERED		3																	
VALID CASES	14	193	1	2	6	4	1	8			1		4	3	10	10	3	6	8
NUMBER OF RESPONDENTS	14	196	1	2	6	4	1	8			1		4	3	10	10	3	6	8
	100%	100%	100%	100%	100%	100%	100%	100%			100%		100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q19 = YES]

Q21 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE, OR CLINIC HELP YOU GET SPECIAL MEDICAL EQUIPMENT OR DEVICES FOR YOUR CHILD?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q21 #YES	11 79%	157 84%~		2 ~100%~	5 83%~	3 75%~	1 100%~	7 88%~	~	~	~	~	3 ~ 75%~	2 67%~	8 80%~	8 80%~	2 67%~	5 83%~	6 75%~
NO	3 21%	31 16%~	1 100%~		1 ~ 17%~	1 25%~		1 12%~	~	~		1 ~100%~	1 ~ 25%~	2 33%~	2 20%~	2 20%~	1 33%~	1 17%~	2 25%~
NOT ANSWERED		8																	
VALID CASES	14	188	1	2	6	4	1	8			1		4	3	10	10	3	6	8
NUMBER OF RESPONDENTS	14 100%	196 100%	1 100%	2 100%	6 100%	4 100%	1 100%	8 100%			1 100%		4 100%	3 100%	10 100%	10 100%	3 100%	6 100%	8 100%

[ASKED IF Q19 = YES]

Q22 IN THE LAST 6 MONTHS, DID YOU GET OR TRY TO GET SPECIAL THERAPY SUCH AS PHYSICAL, OCCUPATIONAL, OR SPEECH THERAPY FOR YOUR CHILD?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q22 YES	25 9%	446 9%	~ 10%	6 10%	8 10%	7 9%	4 6%	18 9%	1 ~ 33%	2 ~ 33%	1 ~ 33%	3 ~ 8%	3 9%	7 9%	18 9%	21 8%	4 31%	5 2%*	20 31%*	
NO	263 91%	4656 91%	100%~	2 90%	55 90%	73 91%	67 94%	184 91%	3 100%~	2 67%~	1 100%~	2 67%~	14 100%~	33 92%~	75 91%	174 91%	245 92%~	9 69%~	218 98%*	45 69%*
NOT ANSWERED	12	261		2	2	5	3	3						2	2	4		11	1	
VALID CASES	288	5102	2	61	81	74	70	202	3	3	1	3	14	36	82	192	266	13	223	65
NUMBER OF RESPONDENTS	300	5363	2	63	83	79	73	205	3	3	1	3	14	36	84	194	270	13	234	66
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q23 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THIS THERAPY FOR YOUR CHILD?

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC
Q23 NEVER	5 21%	62 15%	~ 17%	1 13%	2 33%	1 25%	4 24%	~	~	~	1 100%	~	~	~	5 29%	4 20%	1 25%	~	5 25%
SOMETIMES	6 25%	96 24%	~ 50%	3 13%	1 ~	2 50%	5 29%	~	~	~	~	~	1 33%	3 43%	3 18%	6 30%	~	~	6 30%
USUALLY	8 33%	112 28%	~ 17%	1 63%	5 17%	1 25%	6 35%	~	1 100%	~	~	~	1 33%	2 29%	6 35%	6 30%	2 50%	2 50%	6 30%
ALWAYS	5 21%	135 33%	~ 17%	1 13%	1 50%	3 50%	2 12%	~	~	~	~	~	1 33%	2 29%	3 18%	4 20%	1 25%	2 50%	3 15%
#ALWAYS + USUALLY (NET)	13 54%	247 61%	~ 33%	2 75%	6 67%	4 25%	1 47%	8 47%	1 100%	~	~	~	2 67%	4 57%	9 53%	10 50%	3 75%	4 100%	9 45%
TOP BOX SCORE	5 21%	135 33%	~ 17%	1 13%	1 50%	3 50%	2 12%	~	~	~	~	~	1 33%	2 29%	3 18%	4 20%	1 25%	2 50%	3 15%
NOT ANSWERED	1	14				1	1								1	1		1	
VALID CASES	24	405		6	8	6	4	17	1		1		3	7	17	20	4	4	20
NUMBER OF RESPONDENTS	25	419		6	8	7	4	18	1		1		3	7	18	21	4	5	20
	100%	100%		100%	100%	100%	100%	100%	100%		100%		100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q22 = YES]

Q24 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE OR CLINIC HELP YOU GET THIS THERAPY FOR YOUR CHILD?

	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q24 #YES	10 42%	260 64%	3 ~ 50%	2 ~ 29%	2 ~ 29%	3 75%	8 47%	1 ~100%	1 ~100%				2 29%	8 47%	8 40%	2 50%	10 ~ 53%	
NO	14 58%	143 36%	3 ~ 50%	5 71%	5 71%	1 25%	9 53%					3 ~100%	5 71%	9 53%	12 60%	2 50%	5 100%	9 47%
NOT ANSWERED	1	16		1			1							1	1		1	
VALID CASES	24	403	6	7	7	4	17	1	1	3	7	17	20	4	5	19		
NUMBER OF RESPONDENTS	25 100%	419 100%	6 100%	8 100%	7 100%	4 100%	18 100%	1 100%	1 100%	3 100%	7 100%	18 100%	21 100%	4 100%	5 100%	20 100%		

[ASKED IF Q22 = YES]

Q25 IN THE LAST 6 MONTHS, DID YOU GET OR TRY TO GET TREATMENT OR COUNSELING FOR YOUR CHILD FOR AN EMOTIONAL, DEVELOPMENTAL, OR BEHAVIORAL PROBLEM?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
Q25 YES	34 12%	666 13%	~	1 2%*	11 14%	7 9%	15 21%*	26 13%	~	~	2 ~	4 ~	9 11%	25 13%	30 11%	4 33%	9 4%*	25 39%*		
NO	254 88%	4441 87%	100%~	2 98%*	61 86%	69 91%	55 79%*	178 87%	3 100%	3 ~	1 100%	1 ~	14 33%	31 100%	73 89%	167 67%	8 96%*	215 61%*	39	
NOT ANSWERED	12	256		1	3	5	3	1				1	2	2	3	1	10	2		
VALID CASES	288	5107	2	62	80	74	70	204	3	3	1	3	14	35	82	192	267	12	224	64
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	73 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%

Q26 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THIS TREATMENT OR COUNSELING FOR YOUR CHILD?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q26 NEVER	8 24%	92 14%	~	~	3 27%	3 43%	2 13%	5 19%	~	~	~	1 50%	~	2 50%	4 44%	4 16%	7 23%	1 25%	2 22%	6 24%
SOMETIMES	8 24%	116 18%	~	~	2 18%	3 43%	3 20%	6 23%	~	~	~	1 50%	~	~	1 11%	7 28%	8 27%	~	3 33%	5 20%
USUALLY	5 15%	171 27%	~	1 100%	2 18%	~	2 13%	5 19%	~	~	~	~	~	~	1 11%	4 16%	3 10%	2 50%	1 11%	4 16%
ALWAYS	13 38%	258 41%	~	~	4 36%	1 14%	8 53%	10 38%	~	~	~	~	~	2 50%	3 33%	10 40%	12 40%	1 25%	3 33%	10 40%
#ALWAYS + USUALLY (NET)	18 53%	429 67%	~	1 100%	6 55%	1 14%	10 67%	15 58%	~	~	~	~	~	2 50%	4 44%	14 56%	15 50%	3 75%	4 44%	14 56%
TOP BOX SCORE	13 38%	258 41%	~	~	4 36%	1 14%	8 53%	10 38%	~	~	~	~	~	2 50%	3 33%	10 40%	12 40%	1 25%	3 33%	10 40%
NOT ANSWERED		17																		
VALID CASES	34	636		1	11	7	15	26				2	4	9	25	30	4	9	25	
NUMBER OF RESPONDENTS	34	653		1	11	7	15	26				2	4	9	25	30	4	9	25	
	100%	100%		100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

Q27 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE OR CLINIC HELP YOU GET THIS TREATMENT OR COUNSELING FOR YOUR CHILD?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q27 #YES	12 35%	311 49%~	~100%~	1 27%~	3 14%~	1 47%~	7 42%~	11 42%~	~	~	~	~	1 25%~	11 11%~	11 44%~	11 37%~	1 25%~	12 48%~
NO	22 65%	326 51%~	~	8 73%~	6 86%~	8 53%~	15 58%~	~	~	2 100%~	3 75%~	8 89%~	14 56%~	19 63%~	3 75%~	9 100%~	13 52%~	
NOT ANSWERED		17																
VALID CASES	34	636		1	11	7	15	26		2	4	9	25	30	4	9	25	
NUMBER OF RESPONDENTS	34	653		1	11	7	15	26		2	4	9	25	30	4	9	25	
	100%	100%		100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q25 = YES]

Q28 IN THE LAST 6 MONTHS, DID YOUR CHILD GET CARE FROM MORE THAN ONE KIND OF HEALTH CARE PROVIDER OR USE MORE THAN ONE KIND OF HEALTH CARE SERVICE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q28 YES	69 24%	978 19%	1 50%~	17 27%	19 24%	10 14%*	22 32%	50 25%	~	~	~	33%~	14%~	34%~	11 14%*	55 29%*	60 23%~	6 50%~	41 18%*	28 44%*
NO	218 76%	4103 81%	1 50%~	45 73%	61 76%	64 86%*	47 68%	153 75%	3 100%	3 100%	1 100%	2 67%~	12 86%~	23 66%~	70 86%*	137 71%*	206 77%~	6 50%~	182 82%*	36 56%*
NOT ANSWERED	13	281		1	3	5	4	2						1	3	2	4	1	11	2
VALID CASES	287	5082	2	62	80	74	69	203	3	3	1	3	14	35	81	192	266	12	223	64
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	73 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%

Q29 IN THE LAST 6 MONTHS, DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE, OR CLINIC HELP COORDINATE YOUR CHILD'S CARE AMONG THESE DIFFERENT PROVIDERS OR SERVICES?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC		
Q29 #YES	38 58%	594 60%	1 100%~	9 60%~	12 63%~	3 30%~	13 65%~	27 57%~	~	~	~	1 50%~	9 75%~	5 45%~	32 62%~	33 58%~	4 67%~	21 57%~	17 61%~	
NO	27 42%	403 40%	~	40%~	6 37%~	7 70%~	7 35%~	20 43%~	~	~	~	1 100%~	1 50%~	3 25%~	6 55%~	20 38%~	24 42%~	2 33%~	16 43%~	11 39%~
NOT ANSWERED	4	32		2			2	3						3	3			4		
VALID CASES	65	998	1	15	19	10	20	47			1	2	12	11	52	57	6	37	28	
NUMBER OF RESPONDENTS	69 100%	1030 100%	1 100%	17 100%	19 100%	10 100%	22 100%	50 100%			1 100%	2 100%	12 100%	11 100%	55 100%	60 100%	6 100%	41 100%	28 100%	

[ASKED IF Q28 = YES]

Q30 A PERSONAL DOCTOR IS THE ONE YOUR CHILD WOULD SEE IF HE OR SHE NEEDS A CHECKUP, HAS A HEALTH PROBLEM, OR GETS SICK OR HURT. DOES YOUR CHILD HAVE A PERSONAL DOCTOR?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q30 YES	259 91%	4410 88%*	2 100%~	53 93%	72 90%	68 92%	64 90%	185 93%	3 100%~	2 67%~	1 100%~	2 67%~	12 86%~	30 88%~	75 90%	171 91%	238 90%~	13 100%~	195 89%*	64 97%*
NO	25 9%	622 12%*	~	4 7%	8 10%	6 8%	7 10%	15 7%	~	1 33%~	~	1 33%~	2 14%~	4 12%~	8 10%	17 9%	25 10%~	~	23 11%*	2 3%*
NOT ANSWERED	16	331		6	3	5	2	5						2	1	6	7		16	
VALID CASES	284	5032	2	57	80	74	71	200	3	3	1	3	14	34	83	188	263	13	218	66
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	73 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%

Q31 IN THE LAST 6 MONTHS, HOW MANY TIMES DID YOUR CHILD VISIT HIS OR HER PERSONAL DOCTOR FOR CARE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV ILND	AMER IND/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q31 NONE	61 24%	1163 27%	~	4 8%*	18 26%	22 33%	17 27%	44 24%	1 33%~	~	1 ~100%~	3 ~	5 17%~	19 26%	40 24%	59 25%~	2 15%~	52 28%*	9 14%*		
1 TIME	82 32%	1470 34%	~	14 26%	24 34%	25 38%	19 31%	59 32%	2 67%~	2 ~100%~	~	3 ~	11 37%~	22 30%	57 34%	79 34%~	1 8%~	63 33%	19 30%		
2	52 21%	817 19%	50%~	1 34%*	18 34%*	11 16%	9 14%	13 21%	40 22%	~	~	1 ~	2 ~	6 ~	15 21%	34 20%	48 21%~	2 15%~	35 19%	17 27%	
3	27 11%	450 11%	~	8 15%	8 11%	5 8%	6 10%	18 10%	~	~	~	1 ~	1 8%~	3 10%~	7 10%	17 10%	24 10%~	1 8%~	21 11%	6 9%	
4	15 6%	180 4%	~	6 11%	2 3%	3 5%	4 6%	12 7%	~	~	~	~	~	3 3%~	1 5%	4 6%	10 5%~	12 15%~	2 6%	11 6%	4 6%
5 TO 9	14 6%	146 3%	50%~	1 6%	3 10%	7 10%	1 2%*	2 3%	8 4%	~	~	~	3 ~	3 10%~	6 8%	8 5%	10 4%~	4 31%~	7 4%	7 11%	
10 OR MORE TIMES	2 0.8%	40 0.9%	~	~	~	1 2%	1 2%	1 0.5%	~	~	~	~	1 3%~	~	2 1%	~	1 0.4%~	1 8%~	~	2 3%	
NOT ANSWERED	6	203			2	2	2	3						2	3	5		6			
VALID CASES	253	4266	2	53	70	66	62	182	3	2	1	2	12	30	73	168	233	13	189	64	
NUMBER OF RESPONDENTS	259	4469	2	53	72	68	64	185	3	2	1	2	12	30	75	171	238	13	195	64	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q30 = YES]

Q31A IN THE LAST 6 MONTHS, HOW OFTEN DID YOU HAVE A HARD TIME SPEAKING WITH OR UNDERSTANDING YOUR CHILD'S PERSONAL DOCTOR BECAUSE YOU SPOKE DIFFERENT LANGUAGES?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC		
Q31A ALWAYS	3 2%	82 3%	~	2 4%	1 2%	~	1 0.7%	~	~	~	1 11%	~	2 4%	1 0.8%	2 1%	1 9%	2 1%	1 2%		
USUALLY	2 1%	49 2%	~	~	1 2%	1 2%	1 0.7%	~	~	~	~	~	1 2%	1 0.8%	1 0.6%	1 9%	~	2 4%		
SOMETIMES	12 6%	229 8%	~	2 4%	5 10%	3 7%	2 5%	6 4%	~	~	~	2 22%	1 4%	8 15%*	2 2%*	11 6%	~	10 7%	2 4%	
NEVER	173 91%	2671 88%	100%	2 92%	45 86%	44 91%	40 95%	42 94%	2 100%	2 100%	~	2 100%	6 67%	24 96%	43 80%*	122 97%*	158 92%	9 82%	123 91%	50 91%
#NEVER + SOMETIMES (NET)	185 97%	2900 96%	100%	2 96%	47 96%	49 96%	43 98%	44 100%	2 99%	2 100%	~	2 100%	8 89%	25 100%	51 94%	124 98%	169 98%	9 82%	133 99%	52 95%
TOP BOX SCORE	173 91%	2671 88%	100%	2 92%	45 86%	44 91%	40 95%	42 94%	2 100%	2 100%	~	2 100%	6 67%	24 96%	43 80%*	122 97%*	158 92%	9 82%	123 91%	50 91%
NOT ANSWERED	2	30			1	1	2						2		2		2			
VALID CASES	190	3030	2	49	51	44	44	136	2	2	2	9	25	54	126	172	11	135	55	
NUMBER OF RESPONDENTS	192	3060	2	49	52	44	45	138	2	2	2	9	25	54	128	174	11	137	55	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q30 = YES AND Q31 >= 1 TIME]

Q32 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR EXPLAIN THINGS ABOUT YOUR CHILD'S HEALTH IN A WAY THAT WAS EASY TO UNDERSTAND?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC			
Q32 NEVER	4 2%	80 3%	~	~	3 6%	~	1 2%	2 1%	~	~	~	~	~	1 4%	2 4%	1 0.8%	4 2%	~	2 2%	2 4%	
SOMETIMES	10 5%	145 5%	50%~	2 4%~	5 10%~	~	2 5%~	6 4%	~	~	~	1 11%~	3 12%~	5 9%	5 4%	10 6%~	~	5 4%	5 9%		
USUALLY	27 14%	478 16%	~	8 17%~	7 14%~	7 16%~	5 11%~	20 15%	~	~	~	2 22%~	4 16%~	14 26%*	13 10%*	23 13%~	4 36%~	18 14%	9 17%		
ALWAYS	146 78%	2312 77%	50%~	1 79%~	38 69%~	34 84%~	37 82%~	36 82%~	108 79%	2 100%~	2 100%~	~	2 100%~	6 67%~	17 68%~	33 61%*	107 85%*	135 78%~	7 64%~	108 81%	38 70%
#ALWAYS + USUALLY (NET)	173 93%	2790 93%	50%~	1 96%~	46 84%~	41 100%~	44 93%~	41 93%~	128 94%	2 100%~	2 100%~	~	2 100%~	8 89%~	21 84%~	47 87%	120 95%	158 92%~	11 100%~	126 95%	47 87%
TOP BOX SCORE	146 78%	2312 77%	50%~	1 79%~	38 69%~	34 84%~	37 82%~	36 82%~	108 79%	2 100%~	2 100%~	~	2 100%~	6 67%~	17 68%~	33 61%*	107 85%*	135 78%~	7 64%~	108 81%	38 70%
NOT ANSWERED	5	44		1	3		1	2								2	2		4	1	
VALID CASES	187	3016	2	48	49	44	44	136	2	2		2	9	25	54	126	172	11	133	54	
NUMBER OF RESPONDENTS	192	3060	2	49	52	44	45	138	2	2		2	9	25	54	128	174	11	137	55	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q30 = YES AND Q31 >= 1 TIME]

Q33 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR LISTEN CAREFULLY TO YOU?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV HAW/IND/PAC	AMER ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q33 NEVER	5 3%	40 1%	~	2%~	3 6%	~	2%~	1 1%	~	~	~	~	11%~	4%~	2 4%	2 2%	5 3%~	~	3 2%	2 4%
SOMETIMES	8 4%	145 5%	50%~	4%~	2 4%	~	7%~	5 4%	~	~	~	~	12%~	3 6%	5 4%	8 5%~	~	5 4%	3 5%	
USUALLY	34 18%	494 16%	~	21%~	8 16%	11 25%	5 11%	22 16%	~	~	~	50%~	22%~	8 32%	11 20%	23 18%	30 17%~	4 36%~	22 16%	12 22%
ALWAYS	142 75%	2341 77%	50%~	73%~	37 74%	33 75%	36 80%	109 79%	2 100%	2 100%	~	50%~	67%~	13 52%	38 70%	98 77%	131 75%~	7 64%~	104 78%	38 69%
#ALWAYS + USUALLY (NET)	176 93%	2835 94%	50%~	94%~	45 90%	44 100%	41 91%	131 95%	2 100%	2 100%	~	100%~	89%~	21 84%	49 91%	121 95%	161 93%~	11 100%	126 94%	50 91%
TOP BOX SCORE	142 75%	2341 77%	50%~	73%~	37 74%	33 75%	36 80%	109 79%	2 100%	2 100%	~	50%~	67%~	13 52%	38 70%	98 77%	131 75%~	7 64%~	104 78%	38 69%
NOT ANSWERED	3	39		1	2														3	
VALID CASES	189	3021	2	48	50	44	45	138	2	2	2	9	25	54	128	174	11	134	55	
NUMBER OF RESPONDENTS	192 100%	3060 100%	2 100%	49 100%	52 100%	44 100%	45 100%	138 100%	2 100%	2 100%		2 100%	9 100%	25 100%	54 100%	128 100%	174 100%	11 100%	137 100%	55 100%

[ASKED IF Q30 = YES AND Q31 >= 1 TIME]

Q34 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR SHOW RESPECT FOR WHAT YOU HAD TO SAY?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q34 NEVER	5 3%	28 0.9%		1 ~ 2%	2 4%		2 ~ 5%	3 2%					1 ~ 11%	1 4%	2 4%	3 2%	5 3%		3 2%	2 4%
SOMETIMES	8 4%	114 4%	1 50%	2 4%	3 6%		2 5%	5 4%						2 8%	2 4%	5 4%	8 5%		4 3%	4 7%
USUALLY	23 12%	407 14%		5 ~ 10%	9 18%	7 16%	2 5%	15 11%					2 ~ 22%	5 20%	11 20%	12 9%	21 12%	2 18%	17 13%	6 11%
ALWAYS	152 81%	2460 82%	1 50%	40 83%	36 72%	37 84%	38 86%	114 83%	2 100%	2 100%		2 ~ 100%	6 67%	17 68%	39 72%	107 84%	139 80%	9 82%	110 82%	42 78%
#ALWAYS + USUALLY (NET)	175 93%	2867 95%	1 50%	45 94%	45 90%	44 100%	40 91%	129 94%	2 100%	2 100%		2 ~ 100%	8 89%	22 88%	50 93%	119 94%	160 92%	11 100%	127 95%	48 89%
TOP BOX SCORE	152 81%	2460 82%	1 50%	40 83%	36 72%	37 84%	38 86%	114 83%	2 100%	2 100%		2 ~ 100%	6 67%	17 68%	39 72%	107 84%	139 80%	9 82%	110 82%	42 78%
NOT ANSWERED	4	51		1	2		1	1							1	1		3	1	
VALID CASES	188	3009	2	48	50	44	44	137	2	2		2	9	25	54	127	173	11	134	54
NUMBER OF RESPONDENTS	192 100%	3060 100%	2 100%	49 100%	52 100%	44 100%	45 100%	138 100%	2 100%	2 100%		2 100%	9 100%	25 100%	54 100%	128 100%	174 100%	11 100%	137 100%	55 100%

[ASKED IF Q30 = YES AND Q31 >= 1 TIME]

Q35 IS YOUR CHILD ABLE TO TALK WITH DOCTORS ABOUT HIS OR HER HEALTH CARE?

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q35 YES	110 59%	2050 69%*	~	2 4%~	30 61%~	36 82%~	42 93%~	80 59%	1 50%~	2 100%~	1 ~	4 50%~	16 44%~	28 52%	80 63%	103 60%~	6 55%~	72 54%*	38 70%*
NO	77 41%	942 31%*	100%~	2 96%~	45 39%~	19 18%~	8 7%~	3 41%	1 50%~	~	1 ~	5 50%~	9 36%~	26 48%	46 37%	69 40%~	5 45%~	61 46%*	16 30%*
NOT ANSWERED	5	67		2	3			2							2	2		4	1
VALID CASES	187	2993	2	47	49	44	45	136	2	2	2	9	25	54	126	172	11	133	54
NUMBER OF RESPONDENTS	192	3060	2	49	52	44	45	138	2	2	2	9	25	54	128	174	11	137	55
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q31 >= 1 TIME]

Q36 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR EXPLAIN THINGS IN A WAY THAT WAS EASY FOR YOUR CHILD TO UNDERSTAND?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q36 NEVER	1 0.9%	19 1%	~	~	3%~	~	~	~	~	~	~	~	~	1 4%~	1 1%~	1 1%~	~	~	1 3%~		
SOMETIMES	7 6%	119 6%	~	~	3 10%~	1 3%~	3 7%~	6 7%~	~	~	~	~	~	1 6%~	2 7%~	5 6%~	7 7%~	~	5 7%~	2 5%~	
USUALLY	24 22%	466 23%	~	1 50%~	10 33%~	8 22%~	5 12%~	17 21%~	~	1 50%~	~	~	1 25%~	4 25%~	6 21%~	18 22%~	22 21%~	2 33%~	13 18%~	11 29%~	
ALWAYS	78 71%	1408 70%	~	1 50%~	16 53%~	27 75%~	34 81%~	57 71%~	1 100%~	1 50%~	~	~	1 100%~	3 75%~	10 63%~	19 68%~	57 71%~	73 71%~	4 67%~	54 75%~	24 63%~
#ALWAYS + USUALLY (NET)	102 93%	1874 93%	~	2 100%~	26 87%~	35 97%~	39 93%~	74 93%~	1 100%~	2 100%~	~	~	1 100%~	4 100%~	14 88%~	25 89%~	75 94%~	95 92%~	6 100%~	67 93%~	35 92%~
TOP BOX SCORE	78 71%	1408 70%	~	1 50%~	16 53%~	27 75%~	34 81%~	57 71%~	1 100%~	1 50%~	~	~	1 100%~	3 75%~	10 63%~	19 68%~	57 71%~	73 71%~	4 67%~	54 75%~	24 63%~
NOT ANSWERED		36																			
VALID CASES	110	2013		2	30	36	42	80	1	2		1	4	16	28	80	103	6	72	38	
NUMBER OF RESPONDENTS	110	2049		2	30	36	42	80	1	2		1	4	16	28	80	103	6	72	38	
	100%	100%		100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q30 = YES AND Q31 >= 1 TIME AND Q35 = YES]

Q37 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR SPEND ENOUGH TIME WITH YOUR CHILD?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER IND/ PAC ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q37 NEVER	5 3%	89 3%		1 ~ 2%	3 6%		1 ~ 2%	2 1%					1 ~ 13%	1 4%	3 6%	1 0.8%	5 3%		4 3%	1 2%	
SOMETIMES	23 12%	318 11%	1 50%	5 11%	8 16%	4 9%	5 12%	13 10%					1 ~ 13%	6 24%	12 24%*	10 8%*	22 13%	1 10%	14 11%	9 16%	
USUALLY	38 21%	708 24%	1 50%	12 26%	10 20%	9 20%	6 14%	28 21%					1 ~ 50%	2 25%	6 24%	12 20%	26 20%	34 20%	4 40%	27 21%	11 20%
ALWAYS	119 64%	1876 63%		29 ~ 62%	29 58%	31 70%	30 71%	93 68%	2 100%	2 100%			1 ~ 50%	4 50%	12 48%	24 47%*	90 71%*	110 64%	5 50%	85 65%	34 62%
#ALWAYS + USUALLY (NET)	157 85%	2584 86%	1 50%	41 87%	39 78%	40 91%	36 86%	121 89%	2 100%	2 100%			2 ~ 100%	6 75%	18 72%	36 71%*	116 91%*	144 84%	9 90%	112 86%	45 82%
TOP BOX SCORE	119 64%	1876 63%		29 ~ 62%	29 58%	31 70%	30 71%	93 68%	2 100%	2 100%			1 ~ 50%	4 50%	12 48%	24 47%*	90 71%*	110 64%	5 50%	85 65%	34 62%
NOT ANSWERED	7	70		2	2		3	2					1		3	1	3	1	7		
VALID CASES	185	2990	2	47	50	44	42	136	2	2			2	8	25	51	127	171	10	130	55
NUMBER OF RESPONDENTS	192	3060	2	49	52	44	45	138	2	2			2	9	25	54	128	174	11	137	55
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q31 >= 1 TIME]

Q38 IN THE LAST 6 MONTHS, DID YOUR CHILD'S PERSONAL DOCTOR TALK WITH YOU ABOUT HOW YOUR CHILD IS FEELING, GROWING, OR BEHAVING?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC
Q38 #YES	152 80%	2520 84%	1 50%~	45 94%~	37 74%	35 80%~	34 76%~	117 85%*100%~	2 100%~	1 50%~	2 ~100%~	5 56%~	19 76%~	38 70%*	108 84%	138 79%~	10 91%~	106 79%	46 84%
NO	37 20%	484 16%	1 50%~	3 6%~	13 26%	9 20%~	11 24%~	21 15%*	1 ~ 50%~			4 ~ 44%~	6 24%~	16 30%*	20 16%	36 21%~	1 9%~	28 21%	9 16%
NOT ANSWERED	3	56		1	2													3	
VALID CASES	189	3004	2	48	50	44	45	138	2	2	2	9	25	54	128	174	11	134	55
NUMBER OF RESPONDENTS	192 100%	3060 100%	2 100%	49 100%	52 100%	44 100%	45 100%	138 100%	2 100%	2 100%		9 100%	25 100%	54 100%	128 100%	174 100%	11 100%	137 100%	55 100%

[ASKED IF Q30 = YES AND Q31 >= 1 TIME]

Q39 IN THE LAST 6 MONTHS, DID YOUR CHILD GET CARE FROM A DOCTOR OR OTHER HEALTH PROVIDER BESIDES HIS OR HER PERSONAL DOCTOR?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q39 YES	76 40%	1156 39%	~	44%~	34%	36%~	50%~	40%	50%~	~	~100%~	33%~	48%~	28%*	46%*	38%~	82%~	32%*	60%*	
NO	112 60%	1846 61%	100%~	56%~	66%	64%~	50%~	60%	50%~	100%~	~	~	67%~	52%~	72%*	54%*	62%~	18%~	68%*	40%*
NOT ANSWERED	4	59		1	2		1	1						1		1		4		
VALID CASES	188	3001	2	48	50	44	44	137	2	2		2	9	25	53	128	173	11	133	55
NUMBER OF RESPONDENTS	192	3060	2	49	52	44	45	138	2	2		2	9	25	54	128	174	11	137	55
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q31 >= 1 TIME]

Q40 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR SEEM INFORMED AND UP-TO-DATE ABOUT THE CARE YOUR CHILD GOT FROM THESE DOCTORS OR OTHER HEALTH PROVIDERS?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q40 NEVER	5 7%	80 7%	~	~	2 12%	1 6%	2 10%	3 6%	~	~	~	~	~	1 8%	1 7%	3 5%	5 8%	2 5%	3 9%	
SOMETIMES	15 20%	163 14%	~	7 35%	3 18%	4 25%	1 5%	11 21%	~	~	~	1 33%	3 25%	6 40%	9 16%	13 20%	2 22%	9 21%	6 19%	
USUALLY	18 24%	320 28%	~	2 10%	5 29%	4 25%	7 33%	13 25%	1 100%	~	~	1 50%	1 33%	2 17%	3 20%	14 25%	4 20%	13 31%	5 16%	
ALWAYS	36 49%	595 51%	~	11 55%	7 41%	7 44%	11 52%	26 49%	~	~	~	1 50%	1 33%	6 50%	5 33%	31 54%	3 52%	3 33%	18 43%	18 56%
#ALWAYS + USUALLY (NET)	54 73%	915 79%	~	13 65%	12 71%	11 69%	18 86%	39 74%	1 100%	~	~	2 100%	2 67%	8 67%	8 53%	45 79%	7 72%	7 78%	31 74%	23 72%
TOP BOX SCORE	36 49%	595 51%	~	11 55%	7 41%	7 44%	11 52%	26 49%	~	~	~	1 50%	1 33%	6 50%	5 33%	31 54%	3 52%	3 33%	18 43%	18 56%
NOT ANSWERED	2	33	1			1	2							2	2		1	1		
VALID CASES	74	1158	20	17	16	21	53	1			2	3	12	15	57	64	9	42	32	
NUMBER OF RESPONDENTS	76	1191	21	17	16	22	55	1			2	3	12	15	59	66	9	43	33	
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q30 = YES AND Q31 >= 1 TIME AND Q39 = YES]

Q41 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST PERSONAL DOCTOR POSSIBLE AND 10 IS THE BEST PERSONAL DOCTOR POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR CHILD'S PERSONAL DOCTOR?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q41 WORST PERSONAL DOCTOR POSSIBLE	2 0.8%	9 0.2%	~	~	1% 1	2% 1	~	~	~	~	~	~	2 7%	2 3%	2 ~0.9%	~	1 ~0.6%	1 2%		
01	2 0.8%	6 0.1%	~	2%	~	~	2% 1	0.6%	~	~	~	~	1 8%	1 0.6%	2 0.9%	~	2 1%	~		
02	2 0.8%	7 0.2%	~	~	~	~	2 3%	2 1%	~	~	~	~	~	2 1%	2 ~0.9%	~	1 ~0.6%	1 2%		
03	3 1%	14 0.3%	~	~	4% 3	~	~	1%	~	~	~	~	~	2 1%	3 1%	~	1 ~0.6%	2 3%		
04	1 0.4%	45 1%	~	~	~	~	2% 1	0.6%	~	~	~	~	~	1 ~0.6%	1 ~0.4%	~	1 ~0.6%	~		
05	8 3%	127 3%	~	3% 6%	4% 6%	1% 2%	~	7% 4%	~	~	~	~	1 3%	5 7%	3 2%	8 4%	~	4 2%	4 6%	
06	8 3%	112 3%	~	2% 4%	3% 4%	1% 2%	2% 3%	6% 3%	~	~	~	~	2 7%	2 3%	6 4%	8 4%	~	6 3%	2 3%	
07	16 7%	293 7%	~	3% 6%	2% 3%	6% 9%	5% 8%	8% 5%	1% 50%	~	~	~	1 8%	4 13%	7 10%	8 5%	15 7%	1 8%	12 7%	4 6%
08	34 14%	690 16%	50% ~	10% 10%	18% 18%	12% 18%	4% 7%*	26% 15%	~	~	~	~	2 17%	4 13%	7 10%	25 15%	30 13%	3 23%	25 14%	9 14%
09	42 17%	810 19%	~	10% 20%	11% 16%	12% 18%	9% 15%	31% 18%	1% 50%	~	~	~	2 17%	5 17%	15 21%	27 16%	39 17%	3 23%	33 18%	9 14%
BEST PERSONAL DOCTOR POSSIBLE	126 52%	2128 50%	50% ~	26% 52%	31% 46%	32% 49%	36% 60%	93% 53%	2 ~100%	1 ~100%	2 ~100%	6 50%	12 40%	33 46%	90 55%	118 52%	6 46%	95 52%	31 49%	
#8-10 (NET)	202 83%	3628 86%	100% ~	41% 82%	54% 81%	56% 86%	49% 82%	150 85%	1 50%	2 ~100%	1 ~100%	2 ~100%	10 83%	21 70%	55 76%	142 86%	187 82%	12 92%	153 85%	49 78%

Continued

Q41 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST PERSONAL DOCTOR POSSIBLE AND 10 IS THE BEST PERSONAL DOCTOR POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR CHILD'S PERSONAL DOCTOR?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR AFR-	AMR AS-	NATV HAW/ PAC	AMR IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC		
9-10 (NET)	168 69%	2937 69%	1 50%~	36 72%	42 63%	44 68%	45 75%	124 70%	1 50%	2 100%	1 100%	2 100%	8 67%~	17 57%~	48 67%	117 71%	157 69%~	9 69%~	128 71%	40 63%
NOT ANSWERED	15	228		3	5	3	4	8	1						3	6	10		14	1
VALID CASES	244	4241	2	50	67	65	60	177	2	2	1	2	12	30	72	165	228	13	181	63
NUMBER OF RESPONDENTS	259 100%	4469 100%	2 100%	53 100%	72 100%	68 100%	64 100%	185 100%	3 100%	2 100%	1 100%	2 100%	12 100%	30 100%	75 100%	171 100%	238 100%	13 100%	195 100%	64 100%
MEAN	8.73	8.89	9.00	8.78	8.45	8.88	8.82	8.81	8.00	10.0	10.0	10.0	8.50	8.07	8.44	8.88	8.70	9.08	8.83	8.43
p stat_(*=Sig @ p<=.05)		.186		~.819	.204	.420	.694	.340	~	~	~	~	~	~	.189	.107	~	~	.210	.209

[ASKED IF Q30 = YES]

Q42 DOES YOUR CHILD HAVE ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITIONS THAT HAVE LASTED FOR MORE THAN 3 MONTHS?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q42 YES	56 22%	1024 24%	1 50%~	10 19%	10 14%*	14 22%	21 33%*	39 22%	2 67%~	~	2 ~100%~	2 17%~	9 31%~	12 16%	44 26%*	49 21%~	7 54%~	12 6%*	44 69%*	
NO	194 78%	3250 76%	1 50%~	42 81%	59 86%*	50 78%	42 67%*	142 78%	1 33%~	2 100%~	1 100%~	10 ~ 83%~	20 69%~	63 84%	124 74%*	185 79%~	6 46%~	174 94%*	20 31%*	
NOT ANSWERED	9	195		1	3	4	1	4					1		3	4		9		
VALID CASES	250	4274	2	52	69	64	63	181	3	2	1	2	12	29	75	168	234	13	186	64
NUMBER OF RESPONDENTS	259 100%	4469 100%	2 100%	53 100%	72 100%	68 100%	64 100%	185 100%	3 100%	2 100%	1 100%	2 100%	12 100%	30 100%	75 100%	171 100%	238 100%	13 100%	195 100%	64 100%

[ASKED IF Q30 = YES]

Q43 DOES YOUR CHILD'S PERSONAL DOCTOR UNDERSTAND HOW THESE MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITIONS AFFECT YOUR CHILD'S DAY-TO-DAY LIFE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q43 #YES	50 94%	896 89%	1 100%	10 100%	8 89%	13 100%	18 90%	35 95%	2 100%	~	2 100%	2 100%	8 100%	11 92%	39 95%	43 93%	7 100%	9 90%	41 95%
NO	3 6%	110 11%	~	~	1 11%	2 10%	2 5%	~	~	~	~	~	1 8%	2 5%	3 7%	~	1 10%	2 5%	
NOT ANSWERED	3	35			1	1	1	2				1		3	3		2	1	
VALID CASES	53	1006	1	10	9	13	20	37	2		2	2	8	12	41	46	7	10	43
NUMBER OF RESPONDENTS	56	1041	1	10	10	14	21	39	2		2	2	9	12	44	49	7	12	44
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

Q44 DOES YOUR CHILD'S PERSONAL DOCTOR UNDERSTAND HOW YOUR CHILD'S MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITIONS AFFECT YOUR FAMILY'S DAY-TO-DAY LIFE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q44 #YES	47 87%	836 84%	1 100%	10 100%	7 70%	13 93%	16 84%	35 92%	2 100%	~	~	1 50%	1 50%	7 78%	8 67%	39 93%	41 87%	6 86%	8 80%	39 89%
NO	7 13%	163 16%	~	~	3 30%	1 7%	3 16%	3 8%	~	~	~	1 50%	1 50%	2 22%	4 33%	3 7%	6 13%	1 14%	2 20%	5 11%
NOT ANSWERED	2	41					2	1						2		2		2		
VALID CASES	54	1000	1	10	10	14	19	38	2			2	2	9	12	42	47	7	10	44
NUMBER OF RESPONDENTS	56	1041	1	10	10	14	21	39	2			2	2	9	12	44	49	7	12	44
	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

Q45 SPECIALISTS ARE DOCTORS LIKE SURGEONS, HEART DOCTORS, ALLERGY DOCTORS, SKIN DOCTORS, AND OTHER DOCTORS WHO SPECIALIZE IN ONE AREA OF HEALTH CARE. IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS FOR YOUR CHILD TO SEE A SPECIALIST?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q45 YES	48 17%	774 15%	1 50%~	11 18%	12 15%	8 11%	16 23%	35 17%		1 ~ 33%~		1 ~ 33%~	6 ~ 17%~	9 11%	36 19%	40 15%~	7 54%~	27 12%*	21 32%*	
NO	236 83%	4257 85%	1 50%~	49 82%	67 85%	64 89%	55 77%	169 83%	3 100%~	2 67%~	1 100%~	2 67%~	14 100%~	29 83%~	74 89%	156 81%	227 85%~	6 46%~	191 88%*	45 68%*
NOT ANSWERED	16	332		3	4	7	2	1					1	1	2	3		16		
VALID CASES	284	5031	2	60	79	72	71	204	3	3	1	3	14	35	83	192	267	13	218	66
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	73 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%

Q46 IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT FOR YOUR CHILD TO SEE A SPECIALIST AS SOON AS YOU NEEDED?

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- AMR	IAN	NATV HAW/ ILND	AMR IND/ ALSK	MUL- OHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q46 NEVER	3 7%	73 10%	~	~	~	25%	7%	3%	~100%	~	~100%	~	~	3%	2	1	1	2	
SOMETIMES	9 20%	115 16%	~	18%	18%	38%	14%	27%	~	~	~	~	~	25%	7	8	1	3	6
USUALLY	8 18%	209 28%	~	9%	27%	~	29%	15%	~	~	~	~	33%	2	5	7	1	7	1
ALWAYS	25 56%	340 46%	100%	73%	55%	38%	50%	55%	~	~	~	~	67%	4	19	21	3	14	11
#ALWAYS + USUALLY (NET)	33 73%	549 75%	100%	82%	82%	38%	79%	70%	~	~	~	~	100%	6	24	28	4	21	12
TOP BOX SCORE	25 56%	340 46%	100%	73%	55%	38%	50%	55%	~	~	~	~	67%	4	19	21	3	14	11
NOT ANSWERED	3	29			1		2	2						1	2	2	1	2	1
VALID CASES	45	737	1	11	11	8	14	33	1		1	6	8	34	38	6	25	20	
NUMBER OF RESPONDENTS	48	766	1	11	12	8	16	35	1		1	6	9	36	40	7	27	21	
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q45 = YES]

Q47 HOW MANY SPECIALISTS HAS YOUR CHILD SEEN IN THE LAST 6 MONTHS?

	AGE						RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER				
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q47 NONE	2 4%	67 9%	~	1 9%	~	~	1 7%	1 3%	1 ~100%	~	~	~	~	1 12%	1 3%	2 5%	~	1 4%	1 5%	
1 SPECIALIST	35 76%	450 61%	1 100%	6 55%	11 100%	5 63%	12 80%	26 76%	~	~	~	~	~	5 83%	6 75%	26 74%	32 82%	2 33%	22 88%	13 62%
2	8 17%	144 19%	~	4 36%	~	3 38%	1 7%	7 21%	~	~	1 ~100%	~	~	1 12%	7 20%	5 13%	3 50%	2 8%	6 29%	
3	1 2%	48 6%	~	~	~	~	1 7%	~	~	~	~	~	~	1 17%	1 3%	~	1 17%	~	1 5%	
4		10 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
5 OR MORE SPECIALISTS		23 3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NOT ANSWERED	2	25			1		1	1						1	1	1	1	2		
VALID CASES	46	741	1	11	11	8	15	34	1		1		6	8	35	39	6	25	21	
NUMBER OF RESPONDENTS	48	766	1	11	12	8	16	35	1		1		6	9	36	40	7	27	21	
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%		100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q45 = YES]

Q48 WE WANT TO KNOW YOUR RATING OF THE SPECIALIST YOUR CHILD SAW MOST OFTEN IN THE LAST 6 MONTHS. USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST SPECIALIST POSSIBLE AND 10 IS THE BEST SPECIALIST POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE THAT SPECIALIST?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AMR IAN	NATV HAW/ ILND	AMR IND/ NATV	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q48 WORST SPECIALIST POSSIBLE		1 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
01		2 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
02	1 2%	1 0.2%	~	~	~	13%	~	3%	~	~	~	~	~	3%	1 3%	~	~	5%		
03		8 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
04		17 3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
05	1 2%	11 2%	~	~	1 9%	~	~	3%	~	~	~	~	~	3%	1 17%	~	~	5%		
06	5 11%	29 4%	~	~	1 9%	2 25%	2 14%	4 12%	~	~	1 100%	~	~	1 14%	4 12%	3 8%	2 33%	1 4%	4 20%	
07	3 7%	71 11%	~	1 10%	1 9%	~	1 7%	2 6%	~	~	~	~	~	1 14%	1 3%	3 8%	~	2 8%	1 5%	
08	5 11%	106 16%	~	~	~	1 13%	4 29%	3 9%	~	~	~	~	~	2 33%	1 14%	4 12%	5 14%	~	2 8%	3 15%
09	8 18%	148 22%	~	3 30%	2 18%	1 13%	2 14%	6 18%	~	~	~	~	~	1 17%	1 14%	7 21%	6 16%	2 33%	4 17%	4 20%
BEST SPECIALIST POSSIBLE	21 48%	278 41%	1 100%	6 60%	6 55%	3 38%	5 36%	16 48%	~	~	~	~	~	3 50%	3 43%	16 47%	19 51%	1 17%	15 62%	6 30%

Continued

Q48 WE WANT TO KNOW YOUR RATING OF THE SPECIALIST YOUR CHILD SAW MOST OFTEN IN THE LAST 6 MONTHS. USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST SPECIALIST POSSIBLE AND 10 IS THE BEST SPECIALIST POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE THAT SPECIALIST?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ NATV	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
#8-10 (NET)	34 77%	532 79%	1 100%	9 90%	8 73%	5 63%	11 79%	25 76%	~	~	~	~	~	6 100%	5 71%	27 79%	30 81%	3 50%	21 87%	13 65%
9-10 (NET)	29 66%	426 63%	1 100%	9 90%	8 73%	4 50%	7 50%	22 67%	~	~	~	~	~	4 67%	4 57%	23 68%	25 68%	3 50%	19 79%	10 50%
NOT ANSWERED		10																		
VALID CASES	44	672	1	10	11	8	14	33		1	6	7	34	37	6	24	20			
NUMBER OF RESPONDENTS	44	682	1	10	11	8	14	33		1	6	7	34	37	6	24	20			
	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%			
MEAN	8.64	8.61	10.0	9.40	8.73	7.63	8.50	8.58		6.00	9.17	8.57	8.62	8.78	7.50	9.25	7.90			
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

[ASKED IF Q45 = YES AND Q47 >= 1 SPECIALIST]

Q49 IN THE LAST 6 MONTHS, DID YOU GET INFORMATION OR HELP FROM CUSTOMER SERVICE AT YOUR CHILD'S HEALTH PLAN?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q49 YES	63 22%	1285 26%	1 50%	14 24%	19 24%	13 18%	16 23%	42 21%	~	~	~	33% 21%	3 31%	11 17%	14 23%	45 23%	58 22%	4 31%	50 23%	13 20%
NO	219 78%	3691 74%	1 50%	45 76%	60 76%	59 82%	54 77%	162 79%	3 100%	3 100%	1 100%	2 67%	11 79%	24 69%	69 83%	147 77%	209 78%	9 69%	166 77%	53 80%
NOT ANSWERED	18	387		4	4	7	3	1					1	1	2	3			18	
VALID CASES	282	4976	2	59	79	72	70	204	3	3	1	3	14	35	83	192	267	13	216	66
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	73 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%

Q50 IN THE LAST 6 MONTHS, HOW OFTEN DID CUSTOMER SERVICE AT YOUR CHILD'S HEALTH PLAN GIVE YOU THE INFORMATION OR HELP YOU NEEDED?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC	
Q50 NEVER	1 2%	37 3%	~	~	1 6%	~	~	~	~	~	~	~	1 2%	1 2%	~	~	1 8%		
SOMETIMES	15 25%	235 20%	1 100%	3 21%	3 17%	3 25%	5 33%	10 25%	~	~	1 ~100%	4 ~36%	3 21%	12 28%	14 25%	1 25%	10 21%	5 38%	
USUALLY	20 33%	343 30%	~	7 50%	7 39%	4 33%	2 13%	10 25%	~	~	~	3 ~100%	4 36%	5 36%	12 28%	18 33%	1 25%	19 40%	1 8%
ALWAYS	24 40%	547 47%	~	4 29%	7 39%	5 42%	8 53%	19 47%	~	~	~	~	3 27%	6 43%	18 42%	22 40%	2 50%	18 38%	6 46%
#ALWAYS + USUALLY (NET)	44 73%	890 77%	~	11 79%	14 78%	9 75%	10 67%	29 73%	~	~	~	3 ~100%	7 64%	11 79%	30 70%	40 73%	3 75%	37 79%	7 54%
TOP BOX SCORE	24 40%	547 47%	~	4 29%	7 39%	5 42%	8 53%	19 47%	~	~	~	~	3 27%	6 43%	18 42%	22 40%	2 50%	18 38%	6 46%
NOT ANSWERED	3	42			1	1	1	2						2	3		3		
VALID CASES	60	1162	1	14	18	12	15	40			1	3	11	14	43	55	4	47	13
NUMBER OF RESPONDENTS	63	1204	1	14	19	13	16	42			1	3	11	14	45	58	4	50	13
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]

Q51 IN THE LAST 6 MONTHS, HOW OFTEN DID CUSTOMER SERVICE STAFF AT YOUR CHILD'S HEALTH PLAN TREAT YOU WITH COURTESY AND RESPECT?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER	AS-IAN	NATV ILND	AMER IND/ ALSK	MUL-THI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC	
Q51 NEVER	1 2%	21 2%	~	~	~	8%	~	~	~	~	~	~	~	1 2%	1 2%	1 2%	~	~	1 8%	
SOMETIMES	2 3%	81 7%	~	1 7%	~	~	1 7%	2 5%	~	~	~	~	~	1 8%	1 2%	2 4%	~	1 2%	1 8%	
USUALLY	15 25%	289 25%	~	5 36%	4 24%	3 25%	3 20%	7 18%	~	~	1 ~100%	2 67%	3 27%	3 23%	9 21%	14 26%	~	13 28%	2 15%	
ALWAYS	41 69%	768 66%	100%	1 57%	8 76%	13 67%	8 73%	11 77%	30 77%	~	~	~	1 33%	7 64%	9 69%	32 74%	37 69%	4 100%	32 70%	9 69%
#ALWAYS + USUALLY (NET)	56 95%	1057 91%	100%	1 93%	13 100%	17 100%	11 92%	14 93%	37 95%	~	~	1 ~100%	3 100%	10 91%	12 92%	41 95%	51 94%	4 100%	45 98%	11 85%
TOP BOX SCORE	41 69%	768 66%	100%	1 57%	8 76%	13 67%	8 73%	11 77%	30 77%	~	~	~	1 33%	7 64%	9 69%	32 74%	37 69%	4 100%	32 70%	9 69%
NOT ANSWERED	4	44			2	1	1	3						1	2	4		4		
VALID CASES	59	1160	1	14	17	12	15	39			1	3	11	13	43	54	4	46	13	
NUMBER OF RESPONDENTS	63	1204	1	14	19	13	16	42			1	3	11	14	45	58	4	50	13	
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q49 = YES]

Q52 IN THE LAST 6 MONTHS, DID YOUR CHILD'S HEALTH PLAN GIVE YOU ANY FORMS TO FILL OUT?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q52 YES	93 33%	1790 36%	22 ~	28 37%	20 36%	23 28%	33%	66 33%	2 67%~	~	2 ~	4 67%~	12 29%~	33%~	25 30%	65 34%	89 34%~	4 31%~	73 34%	20 30%
NO	187 67%	3138 64%	2 100%~	37 63%	49 64%	52 72%	47 67%	134 67%	1 33%~	3 100%~	1 100%~	1 33%~	10 71%~	24 67%~	57 70%	126 66%	176 66%~	9 69%~	141 66%	46 70%
NOT ANSWERED	20	435	4	6	7	3	5							2	3	5			20	
VALID CASES	280	4928	2	59	77	72	70	200	3	3	1	3	14	36	82	191	265	13	214	66
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	73 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%

PQ53 IN THE LAST 6 MONTHS, HOW OFTEN WERE THE FORMS FROM YOUR CHILD'S HEALTH PLAN EASY TO FILL OUT?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
PQ53 NEVER	1 0.4%	64 1%*	~	~	~	~	1 ~0.5%	1 ~	~	~	~	~	~	~	1 ~0.5%	1 ~0.4%	1 ~	1 ~0.5%	~	
SOMETIMES	23 8%	317 6%	~	8%	11%	8%	6%	18 9%	~	~	~	33%~	7%~	3%~	4 5%	18 9%	22 8%~	1 8%~	15 7%	8 12%
USUALLY	35 13%	629 13%	~	19%	14%	8%	10%	24 12%	~	~	~	~	7%~	25%~	13 16%	21 11%	32 12%~	3 23%~	30 14%	5 8%
ALWAYS	219 79%	3884 79%	2 100%~	43 73%	57 75%	60 83%	57 83%	156 78%	3 100%~	3 100%~	1 100%~	2 67%~	12 86%~	26 72%~	65 79%	150 79%	208 79%~	9 69%~	166 78%	53 80%
#ALWAYS + USUALLY (NET)	254 91%	4513 92%	2 100%~	54 92%	68 89%	66 92%	64 93%	180 90%	3 100%~	3 100%~	1 100%~	2 67%~	13 93%~	35 97%~	78 95%	171 90%	240 91%~	12 92%~	196 92%	58 88%
TOP BOX SCORE	219 79%	3884 79%	2 100%~	43 73%	57 75%	60 83%	57 83%	156 78%	3 100%~	3 100%~	1 100%~	2 67%~	12 86%~	26 72%~	65 79%	150 79%	208 79%~	9 69%~	166 78%	53 80%
NOT ANSWERED	2	91			1	1	1	1							1	2		2		
VALID CASES	278	4894	2	59	76	72	69	199	3	3	1	3	14	36	82	190	263	13	212	66
NUMBER OF RESPONDENTS	280 100%	4985 100%	2 100%	59 100%	77 100%	72 100%	70 100%	200 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	82 100%	191 100%	265 100%	13 100%	214 100%	66 100%

[ASKED IF Q52 = YES. RESPONSE OF 'ALWAYS' PADDED WITH Q52 = NO]

Q54 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH PLAN POSSIBLE AND 10 IS THE BEST HEALTH PLAN POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR CHILD'S HEALTH PLAN?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q54 WORST HEALTH PLAN POSSIBLE	24	0.5%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01	11	0.2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02	5	2%	~	~	2	1	2	2	~	~	1	1	~	1	3	4	1	3	2
03	4	1%	~	~	1	1	2	2	~	~	~	~	~	2	3	1	4	~	2
04	6	2%	~	2	1	1	2	4	~	~	~	~	~	2	2	4	5	1	2
05	18	6%	~	3	7	5	3	12	~	1	1	1	2	4	13	17	1	13	5
06	16	6%	~	1	5	4	6	14	~	~	~	~	~	2	2	14	15	1	8
07	37	13%	~	11	11	6	9	30	2	~	~	~	1	3	9	26	35	1	30
08	45	16%	100%	2	8	9	14	33	1	~	~	~	1	8	14	31	43	2	35
09	49	17%	~	16	11	11	11	43	~	~	~	~	~	6	7	41	46	2	39
BEST HEALTH PLAN POSSIBLE	103	36%	~	18	31	30	24	63	~	2	1	1	10	11	42	59	99	4	85
#8-10 (NET)	197	70%	100%	2	42	51	55	139	1	2	1	1	11	25	63	131	188	8	159

Continued

Q54 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH PLAN POSSIBLE AND 10 IS THE BEST HEALTH PLAN POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR CHILD'S HEALTH PLAN?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
9-10 (NET)	152 54%	2892 59%	34 ~ 58%	42 54%	41 56%	35 49%	106 52%	2 ~ 67%	1 ~ 100%	1 33%	10 71%	17 47%	49 58%	100 52%	145 54%	6 46%	124 57%*	28 42%*		
NOT ANSWERED	17	430	4	5	6	2	2							2	2		17			
VALID CASES	283	4933	2	59	78	73	71	203	3	3	1	3	14	36	84	192	268	13	217	66
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	73 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%
MEAN	8.20	8.49	8.00	8.37	8.13	8.37	7.99	8.18	7.33	8.33	10.0	5.67	8.71	7.92	8.44	8.14	8.24	7.54	8.41	7.55
p stat_(*=Sig @ p<=.05)		.014*	~.402	.686	.406	.308	.758	~	~	~	~	~	~.191	.448	~	~	~.002*	.002*		

Q55 IN THE LAST 6 MONTHS, DID YOU GET OR REFILL ANY PRESCRIPTION MEDICINES FOR YOUR CHILD?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q55 YES	125 44%	2010 40%	1 50%~	24 41%	39 49%	25 34%*	36 50%	88 43%	2 67%~	2 67%~	2 ~	4 67%~	20 56%~	32 38%	93 48%*	114 42%~	11 85%~	78 36%*	47 71%*	
NO	160 56%	2973 60%	1 50%~	35 59%	40 51%	48 66%*	36 50%	117 57%	1 33%~	1 33%~	1 100%~	1 33%~	10 71%~	16 44%~	52 62%	101 52%*	156 58%~	2 15%~	141 64%*	19 29%*
NOT ANSWERED	15	380		4	4	6	1													15
VALID CASES	285	4983	2	59	79	73	72	205	3	3	1	3	14	36	84	194	270	13	219	66
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	73 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%

Q56 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET PRESCRIPTION MEDICINES FOR YOUR CHILD THROUGH HIS OR HER HEALTH PLAN?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q56 NEVER	2 2%	30 1%	~	~	~	4%~	3%~	2%~	~	~	~	~	~	1 3%~	1 1%~	2 2%~	~	2 3%~	~	
SOMETIMES	12 10%	187 9%	~	8%~	13%~	12%~	6%~	7 8%~	~	~	~	~	3 15%~	6 19%~	6 7%~	10 9%~	2 18%~	4 5%~	8 17%~	
USUALLY	32 26%	459 23%	~	29%~	7 18%~	7 36%~	9 26%~	20 23%~	1 50%~	1 50%~	~	1 50%~	1 25%~	7 22%~	25 27%~	7 22%~	13 64%~	19 17%~	40%~	
ALWAYS	78 63%	1338 66%	100%~	15 62%~	27 69%~	12 48%~	23 66%~	58 67%~	1 50%~	1 50%~	~	1 50%~	3 75%~	10 50%~	18 56%~	60 65%~	76 67%~	2 18%~	58 75%~	20 43%~
#ALWAYS + USUALLY (NET)	110 89%	1797 89%	100%~	1 92%~	22 87%~	34 84%~	21 91%~	32 90%~	2 100%~	2 100%~	~	2 100%~	4 100%~	17 85%~	25 78%~	85 92%~	101 89%~	9 82%~	71 92%~	39 83%~
TOP BOX SCORE	78 63%	1338 66%	100%~	15 62%~	27 69%~	12 48%~	23 66%~	58 67%~	1 50%~	1 50%~	~	1 50%~	3 75%~	10 50%~	18 56%~	60 65%~	76 67%~	2 18%~	58 75%~	20 43%~
NOT ANSWERED	1	42					1	1						1	1		1			
VALID CASES	124	2014	1	24	39	25	35	87	2	2		2	4	20	32	92	113	11	77	47
NUMBER OF RESPONDENTS	125	2056	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

Q57 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE, OR CLINIC HELP YOU GET YOUR CHILD'S PRESCRIPTION MEDICINES?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q57 #YES	66 54%	1193 60%	9 ~ 38%	26 67%	11 44%	20 59%	42 48%	2 100%	2 100%	1 ~ 50%	1 25%	13 65%	21 66%	45 49%	59 53%	7 64%	37 49%	29 62%	
NO	57 46%	793 40%	1 100%	15 62%	13 33%	14 56%	14 41%	45 52%	~	~	1 ~ 50%	3 75%	7 35%	11 34%	46 51%	53 47%	4 36%	39 51%	18 38%
NOT ANSWERED	2	70				2	1							2	2		2		
VALID CASES	123	1986	1	24	39	25	34	87	2	2	2	4	20	32	91	112	11	76	47
NUMBER OF RESPONDENTS	125	2056	1	24	39	25	36	88	2	2	2	4	20	32	93	114	11	78	47
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

Q57A A REGULAR DENTIST IS ONE YOUR CHILD WOULD GO TO FOR CHECK-UPS AND CLEANINGS OR WHEN HE/SHE HAS A CAVITY OR TOOTH PAIN. DOES YOUR CHILD HAVE A REGULAR DENTIST?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q57A YES	213 77%	3840 79%	1 50%~	31 53%*	59 80%	63 86%*	59 88%*	158 80%	2 67%~	2 67%~	2 ~ 67%~	9 75%~	25 71%~	59 77%	148 77%	202 78%~	10 77%~	159 76%	54 83%	
NO	62 23%	1039 21%	1 50%~	28 47%*	15 20%	10 14%*	8 12%*	40 20%	1 33%~	1 33%~	1 100%~	1 33%~	3 25%~	10 29%~	18 23%	43 23%	58 22%~	3 23%~	51 24%	11 17%
NOT ANSWERED	25	484		4	9	6	6	7				2	1	7	3	10		24	1	
VALID CASES	275	4879	2	59	74	73	67	198	3	3	1	3	12	35	77	191	260	13	210	65
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	73 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%

Q57B IN THE LAST 6 MONTHS, IF YOUR CHILD NEEDED TO SEE A DENTIST RIGHT AWAY BECAUSE OF A DENTAL EMERGENCY, DID HE/SHE GET TO SEE A DENTIST AS SOON AS YOU WANTED?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q57B NEVER	37 32%	674 30%		7 ~ 37%	8 24%	10 33%	12 40%	25 32%	~	~	~ 100%	1 57%	4 24%	4 24%	18 44%	19 27%	36 34%	1 11%	25 29%	12 43%
SOMETIMES	18 16%	430 19%		2 ~ 11%	8 24%	4 13%	4 13%	8 10%	~	~	~	~	5 ~ 29%	7 17%	9 13%	15 14%	3 33%	13 15%	5 18%	
USUALLY	23 20%	488 22%		3 ~ 16%	10 29%	6 20%	4 13%	14 18%	1 100%	~	~	~	2 ~ 29%	6 35%	10 24%	13 19%	22 21%	1 11%	20 23%	3 11%
ALWAYS	36 32%	667 30%	1 100%	7 37%	8 24%	10 33%	10 33%	31 40%	~	~	~	~	1 ~ 14%	2 12%	6 15%	29 41%	32 30%	4 44%	28 33%	8 29%
#ALWAYS + USUALLY (NET)	59 52%	1154 51%	1 100%	10 53%	18 53%	16 53%	14 47%	45 58%	1 100%	~	~	~	3 ~ 43%	8 47%	16 39%	42 60%	54 51%	5 56%	48 56%	11 39%
TOP BOX SCORE	36 32%	667 30%	1 100%	7 37%	8 24%	10 33%	10 33%	31 40%	~	~	~	~	1 ~ 14%	2 12%	6 15%	29 41%	32 30%	4 44%	28 33%	8 29%
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	168	2651	1	40	44	43	40	124	2	3	1	2	7	19	42	122	162	4	130	38
NOT ANSWERED	18	454		4	5	6	3	3							1	2	3		18	
VALID CASES	114	2258	1	19	34	30	30	78	1			1	7	17	41	70	105	9	86	28
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	73 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%

Q57C CHOICES FOR YOUR CHILD'S TREATMENT OR HEALTH CARE CAN INCLUDE CHOICES ABOUT MEDICINE, SURGERY, OR OTHER TREATMENT. IN THE LAST 6 MONTHS, DID YOUR PROVIDER TELL YOU THERE WAS MORE THAN ONE CHOICE FOR YOUR CHILD'S TREATMENT OR HEALTH CARE?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q57C YES	49 18%	1026 21%		13 ~ 22%	15 20%	10 14%	11 15%	37 19%	1 33%~			2 ~ 67%~	2 14%~	6 17%~	13 16%	36 19%	44 17%~	5 38%~	32 15%	17 26%
NO	229 82%	3791 79%	2 100%~	45 78%	60 80%	61 86%	61 85%	161 81%	2 67%~	3 100%~	1 100%~	1 33%~	12 86%~	30 83%~	68 84%	156 81%	221 83%~	8 62%~	180 85%	49 74%
NOT ANSWERED	22	546		5	8	8	1	7						3	2	5			22	
VALID CASES	278	4817	2	58	75	71	72	198	3	3	1	3	14	36	81	192	265	13	212	66
NUMBER OF RESPONDENTS	300	5363	2	63	83	79	73	205	3	3	1	3	14	36	84	194	270	13	234	66
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q57D IN THE LAST 6 MONTHS, DID YOUR PROVIDER TALK WITH YOU ABOUT THE PROS AND CONS OF EACH CHOICE FOR YOUR CHILD'S TREATMENT OR HEALTH CARE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q57D #YES	41 84%	865 87%	11 ~ 85%	12 ~ 80%	8 ~ 80%	10 ~ 91%	30 81%	1 100%	~	2 ~ 100%	2 ~ 100%	5 ~ 83%	10 77%	31 86%	36 82%	5 ~ 100%	27 84%	14 82%
NO	8 16%	124 13%	2 ~ 15%	3 ~ 20%	2 ~ 20%	1 ~ 9%	7 19%	~	~	~	~	1 ~ 17%	3 23%	5 14%	8 18%	~	5 16%	3 18%
NOT ANSWERED		6																
VALID CASES	49	990	13	15	10	11	37	1		2	2	6	13	36	44	5	32	17
NUMBER OF RESPONDENTS	49 100%	996 100%	13 100%	15 100%	10 100%	11 100%	37 100%	1 100%		2 100%	2 100%	6 100%	13 100%	36 100%	44 100%	5 100%	32 100%	17 100%

[ASKED IF Q57C = YES]

Q57E IN THE LAST 6 MONTHS, WHEN THERE WAS MORE THAN ONE CHOICE FOR YOUR CHILD'S TREATMENT OR HEALTH CARE, DID YOUR PROVIDER ASK YOU WHICH CHOICE WAS BEST FOR YOUR CHILD?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q57E #YES	40 85%	853 87%	~	10 77%	13 93%	7 70%	10 100%	30 86%	1 100%	~	2 100%	2 100%	5 83%	9 69%	31 91%	35 83%	5 100%	27 87%	13 81%
NO	7 15%	127 13%	~	3 23%	1 7%	3 30%	~	5 14%	~	~	~	~	1 17%	4 31%	3 9%	7 17%	~	4 13%	3 19%
NOT ANSWERED	2	15			1		1	2						2		2		1	1
VALID CASES	47	981		13	14	10	10	35	1		2	2	6	13	34	42	5	31	16
NUMBER OF RESPONDENTS	49	996		13	15	10	11	37	1		2	2	6	13	36	44	5	32	17
	100%	100%		100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q57C = YES]

Q57F IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PROVIDER CONSIDER AND RESPECT WHAT HEALTH CARE AND TREATMENT CHOICES YOU THOUGHT WORK BEST FOR YOUR CHILD?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q57F NEVER	1 2%	20 2%	~	~	~	10%	~	~	~	~	~	~	17%	8%	~	2%	~	3%	~	
SOMETIMES	2 4%	89 9%	~	8%	7%	~	~	~	~	~	~	~	~	8%	3%	5%	~	3%	6%	
USUALLY	14 29%	244 25%	~	31%	40%	10%	30%	31%	~	~	~	50%	33%	38%	26%	30%	20%	28%	31%	
ALWAYS	31 65%	624 64%	~	62%	53%	80%	70%	64%	100%	~	~	100%	50%	50%	46%	71%	63%	80%	66%	63%
#ALWAYS + USUALLY (NET)	45 94%	868 89%	~	92%	93%	90%	100%	94%	100%	~	~	100%	100%	83%	85%	97%	93%	100%	94%	94%
TOP BOX SCORE	31 65%	624 64%	~	62%	53%	80%	70%	64%	100%	~	~	100%	50%	50%	46%	71%	63%	80%	66%	63%
NOT ANSWERED	1	20					1	1							1	1			1	
VALID CASES	48	976		13	15	10	10	36	1			2	2	6	13	35	43	5	32	16
NUMBER OF RESPONDENTS	49	996		13	15	10	11	37	1			2	2	6	13	36	44	5	32	17
	100%	100%		100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q57C = YES]

Q57G IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PROVIDER ENCOURAGE YOU TO ASK QUESTIONS AND RAISE CONCERNS?

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER					
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- AMR	IAN	NATV HAW/ ILND	AMR IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q57G NEVER	4 8%	39 4%	~	1 8%	2 13%	~	1 10%	3 8%	~	~	~	~	1 50%	~	4 11%	4 9%	~	3 9%	1 6%		
SOMETIMES	2 4%	87 9%	~	1 8%	1 7%	~	~	2 6%	~	~	~	~	~	1 8%	1 3%	1 2%	1 20%	~	2 12%		
USUALLY	7 15%	248 25%	~	4 31%	2 13%	~	1 10%	6 17%	~	~	~	~	1 17%	3 23%	4 11%	7 16%	~	5 16%	2 12%		
ALWAYS	35 73%	607 62%	~	7 54%	10 67%	10 100%	8 80%	25 69%	1 100%	~	~	~	2 100%	1 50%	5 83%	9 69%	26 74%	31 72%	4 80%	24 75%	11 69%
#ALWAYS + USUALLY (NET)	42 88%	855 87%	~	11 85%	12 80%	10 100%	9 90%	31 86%	1 100%	~	~	~	2 100%	1 50%	6 100%	12 92%	30 86%	38 88%	4 80%	29 91%	13 81%
TOP BOX SCORE	35 73%	607 62%	~	7 54%	10 67%	10 100%	8 80%	25 69%	1 100%	~	~	~	2 100%	1 50%	5 83%	9 69%	26 74%	31 72%	4 80%	24 75%	11 69%
NOT ANSWERED	1	16				1	1								1	1				1	
VALID CASES	48	980		13	15	10	10	36	1				2	2	6	13	35	43	5	32	16
NUMBER OF RESPONDENTS	49	996		13	15	10	11	37	1				2	2	6	13	36	44	5	32	17
	100%	100%		100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q57C = YES]

Q57H IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PROVIDER MAKE IT EASY FOR YOU TO ASK QUESTIONS AND RAISE CONCERNS?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q57H NEVER	1 2%	18 2%	~	~	1 7%	~	~	1 3%	~	~	~	~	~	~	1 3%	1 2%	~	1 3%	~
SOMETIMES	4 8%	71 7%	~	2 15%	1 7%	1 10%	4 11%	~	~	~	~	~	~	1 8%	3 9%	3 7%	1 20%	1 3%	3 19%
USUALLY	6 13%	202 21%	~	2 15%	3 20%	1 10%	5 14%	~	~	~	1 50%	~	1 8%	5 14%	6 14%	~	5 16%	1 6%	~
ALWAYS	37 77%	690 70%	~	9 69%	10 67%	10 100%	8 80%	26 72%	1 100%	~	2 100%	1 50%	6 100%	11 85%	26 74%	33 77%	4 80%	25 78%	12 75%
#ALWAYS + USUALLY (NET)	43 90%	892 91%	~	11 85%	13 87%	10 100%	9 90%	31 86%	1 100%	~	2 100%	2 100%	6 100%	12 92%	31 89%	39 91%	4 80%	30 94%	13 81%
TOP BOX SCORE	37 77%	690 70%	~	9 69%	10 67%	10 100%	8 80%	26 72%	1 100%	~	2 100%	1 50%	6 100%	11 85%	26 74%	33 77%	4 80%	25 78%	12 75%
NOT ANSWERED	1	16				1	1							1	1			1	
VALID CASES	48	980		13	15	10	10	36	1		2	2	6	13	35	43	5	32	16
NUMBER OF RESPONDENTS	49	996		13	15	10	11	37	1		2	2	6	13	36	44	5	32	17
	100%	100%		100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q57C = YES]

Q58 IN GENERAL, HOW WOULD YOU RATE YOUR CHILD'S OVERALL HEALTH?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q58 EXCELLENT	117 41%	1951 39%	27 ~ 47%	32 41%	31 43%	27 38%	87 43%	1 33%~	1 33%~	1 100%~	1 33%~	5 36%~	14 39%~	26 31%*	87 45%	117 43%~	107 ~ 49%*	10 15%*		
VERY GOOD	106 37%	1732 35%	19 ~ 33%	36 46%	27 38%	24 33%	81 40%	2 67%~	1 33%~	~	1 ~ 33%~	6 43%~	10 28%~	32 38%	73 38%	106 39%~	72 ~ 33%*	34 52%*		
GOOD	47 17%	973 20%	2 100%~	8 ~ 14%	8 10%*	11 15%	18 25%*	29 14%	1 ~ 33%~	~	~	2 ~ 14%~	10 28%~	20 24%	27 14%	47 17%~	31 ~ 14%	16 24%		
FAIR	12 4%	308 6%	4 ~ 7%	3 4%	2 3%	3 4%	6 3%	~	~	~	~	1 7%~	2 6%~	6 7%	6 3%	12 ~ 92%~	7 3%	5 8%		
POOR	1 0.4%	13 0.3%	~	~	~	1 1%	~	~	~	~	1 ~ 33%~	~	~	1 ~ 0.5%	1	1 ~ 8%~	1	1 ~ 2%		
#EXCELLENT + VERY GOOD + GOOD (NET)	270 95%	4656 94%	2 100%~	54 93%	76 96%	69 96%	69 96%	197 97%	3 100%~	3 100%~	1 100%~	2 67%~	13 93%~	34 94%~	78 93%	187 96%	270 100%~	210 ~ 97%	60 91%	
NOT ANSWERED	17	386	5	4	7	1	2											17		
VALID CASES	283	4977	2	58	79	72	72	203	3	3	1	3	14	36	84	194	270	13	217	66
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	73 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%

Q59 IN GENERAL, HOW WOULD YOU RATE YOUR CHILD'S OVERALL MENTAL OR EMOTIONAL HEALTH?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q59 EXCELLENT	134 48%	2270 46%	33 ~ 57%	40 51%	33 46%	28 39%	98 49%	1 ~ 33%	1 ~ 100%		9 ~ 64%	16 ~ 44%	36 43%	96 50%	132 49%	2 15%	121 56%*	13 20%*		
VERY GOOD	81 29%	1311 26%	1 50%	17 ~ 29%	26 33%	21 29%	16 23%	59 29%	1 33%	1 33%	1 ~ 33%	3 21%	13 36%	29 35%	50 26%	76 28%	5 38%	65 30%	16 25%	
GOOD	41 15%	923 19%	1 50%	6 10%	6 8%*	12 17%	16 23%	29 14%	2 67%			2 ~ 14%	4 11%	10 12%	30 16%	39 14%	2 15%	24 11%*	17 26%*	
FAIR	18 6%	400 8%	2 ~ 3%	5 6%	3 4%	8 11%	11 5%				1 ~ 33%		2 ~ 6%	8 10%	10 5%	16 6%	2 15%	7 3%*	11 17%*	
POOR	8 3%	72 1%			2 3%	3 4%	3 4%	5 2%	1 ~ 33%		1 ~ 33%		1 ~ 3%	1 1%	7 4%	6 2%	2 15%		8 ~ 12%	
#EXCELLENT + VERY GOOD + GOOD (NET)	256 91%	4503 91%	2 100%	56 97%*	72 91%	66 92%	60 85%	186 92%	3 100%	2 67%	1 100%	1 33%	14 100%	33 92%	75 89%	176 91%	247 92%	9 69%	210 97%*	46 71%*
NOT ANSWERED	18	387	5	4	7	2	3								1	1		17	1	
VALID CASES	282	4976	2	58	79	72	71	202	3	3	1	3	14	36	84	193	269	13	217	65
NUMBER OF RESPONDENTS	300	5363	2	63	83	79	73	205	3	3	1	3	14	36	84	194	270	13	234	66
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q60 DOES YOUR CHILD CURRENTLY NEED OR USE MEDICINE PRESCRIBED BY A DOCTOR (OTHER THAN VITAMINS)?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q60 YES	65 23%	1132 23%	1 50%~	12 21%	13 17%	14 19%	25 35%*	50 25%	1 33%~	1 33%~	1 ~	2 33%~	7 15%~	18 22%	47 24%	57 21%~	8 62%~	21 10%*	44 67%*	
NO	216 77%	3829 77%	1 50%~	46 79%	65 83%	58 81%	46 65%*	153 75%	2 67%~	2 67%~	1 100%~	2 67%~	11 85%~	29 81%~	65 78%	146 76%	211 79%~	5 38%~	194 90%*	22 33%*
NOT ANSWERED	19	401		5	5	7	2	2				1		1	1	2		19		
VALID CASES	281	4962	2	58	78	72	71	203	3	3	1	3	13	36	83	193	268	13	215	66
NUMBER OF RESPONDENTS	300	5363	2	63	83	79	73	205	3	3	1	3	14	36	84	194	270	13	234	66
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q61 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q61 YES	53	857	1	9	10	11	22	41	1	1	1	1	5	13	40	45	8	10	43	
	85%	79%	100%~	75%~	83%~	85%~	92%~	85%~	100%~	100%~	~100%~	50%~	83%~	76%~	89%~	83%~	100%~	56%~	98%~	
NO	9	234		3	2	2	2	7					1	1	4	5	9	8	1	
	15%	21%		~ 25%~	17%~	15%~	8%~	15%~	~	~	~	~	50%~	17%~	24%~	11%~	17%~	~	44%~	2%~
NOT ANSWERED	3	30			1	1	1	2					1	1	2	3		3		
VALID CASES	62	1091	1	12	12	13	24	48	1	1	1	2	6	17	45	54	8	18	44	
NUMBER OF RESPONDENTS	65	1121	1	12	13	14	25	50	1	1	1	2	7	18	47	57	8	21	44	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q60 = YES]

Q62 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q62 YES	43 83%	763 90%		5 ~ 56%~	9 90%~	10 91%~	19 90%~	33 82%~	1 100%~		1 ~ 100%~	1 100%~	4 80%~	10 83%~	33 82%~	38 86%~	5 63%~		43 ~100%~	
NO	9 17%	83 10%	1 100%~	4 44%~	1 10%~	1 9%~	2 10%~	7 18%~	1 ~100%~				1 ~ 20%~	2 17%~	7 18%~	6 14%~	3 38%~	9 100%~		
NOT ANSWERED	1	20					1	1						1		1		1		
VALID CASES	52	846	1	9	10	11	21	40	1	1		1	1	5	12	40	44	8	9	43
NUMBER OF RESPONDENTS	53	866	1	9	10	11	22	41	1	1		1	1	5	13	40	45	8	10	43
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q60 = YES AND Q61 = YES]

Q63 DOES YOUR CHILD NEED OR USE MORE MEDICAL CARE, MORE MENTAL HEALTH SERVICES, OR MORE EDUCATIONAL SERVICES THAN IS USUAL FOR MOST CHILDREN OF THE SAME AGE?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q63 YES	46 17%	727 15%		9 ~ 16%	10 13%	13 18%	14 20%	31 16%	1 33%~	1 33%~		2 ~ 67%~	2 14%~	8 22%~	12 14%	34 18%	40 15%~	6 46%~	9 4%*	37 57%*
NO	232 83%	4197 85%	2 100%~	49 84%	67 87%	58 82%	56 80%	168 84%	2 67%~	2 67%~	1 100%~	1 33%~	12 86%~	28 78%~	71 86%	157 82%	225 85%~	7 54%~	204 96%*	28 43%*
NOT ANSWERED	22	439		5	6	8	3	6						1	3	5		21	1	
VALID CASES	278	4924	2	58	77	71	70	199	3	3	1	3	14	36	83	191	265	13	213	65
NUMBER OF RESPONDENTS	300	5363	2	63	83	79	73	205	3	3	1	3	14	36	84	194	270	13	234	66
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q64 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION?

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q64 YES	38	620	8	8	10	12	28	1	1	2	6	8	30	32	6	3	35	
	86%	86%	~ 89%	~ 80%	~ 77%	~ 100%	~ 97%	~ 100%	~ 100%	~ 100%	~ 75%	~ 67%	~ 94%	~ 84%	~ 100%	~ 43%	~ 95%	
NO	6	103	1	2	3		1				2	2	4	2	6	4	2	
	14%	14%	~ 11%	~ 20%	~ 23%		~ 3%	~	~	~	~ 100%	~ 25%	~ 33%	~ 6%	~ 16%	~ 57%	~ 5%	
NOT ANSWERED	2	18				2	2							2	2		2	
VALID CASES	44	723	9	10	13	12	29	1	1	2	2	8	12	32	38	6	7	37
NUMBER OF RESPONDENTS	46	741	9	10	13	14	31	1	1	2	2	8	12	34	40	6	9	37
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q63 = YES]

Q65 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q65 YES	35	581	7	7	9	12	26	1	1	2	5	6	29	30	5	35		
	100%	97%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%
NO		18	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
		3%																
NOT ANSWERED	3	12	1	1	1		2				1	2	1	2	1	3		
VALID CASES	35	600	7	7	9	12	26	1	1	2	5	6	29	30	5	35		
NUMBER OF RESPONDENTS	38	612	8	8	10	12	28	1	1	2	6	8	30	32	6	3	35	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q63 = YES AND Q64 = YES]

Q66 IS YOUR CHILD LIMITED OR PREVENTED IN ANY WAY IN HIS OR HER ABILITY TO DO THE THINGS MOST CHILDREN OF THE SAME AGE CAN DO?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q66 YES	37 13%	575 12%	2 100%~	5 9%	6 8%	13 18%	11 16%	24 12%	1 33%~	1 33%~	2 ~ 67%~	7 ~ 19%~	9 11%	28 15%	32 12%~	5 38%~	7 3%*	30 45%*		
NO	242 87%	4353 88%	~ 91%	92%	82%	84%	176 88%	2 67%~	2 67%~	1 100%~	1 33%~	14 100%~	29 81%~	74 89%	164 85%	234 88%~	8 62%~	206 97%*	36 55%*	
NOT ANSWERED	21	435	5	5	8	3	5							1	2	4		21		
VALID CASES	279	4928	2	58	78	71	70	200	3	3	1	3	14	36	83	192	266	13	213	66
NUMBER OF RESPONDENTS	300	5363	2	63	83	79	73	205	3	3	1	3	14	36	84	194	270	13	234	66
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q67 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q67 YES	31	448	1	5	5	11	9	21	1	1	2	5	6	25	26	5	1	30
	89%	80%	50%	100%	83%	92%	90%	91%	100%	100%	~100%	~71%	75%	93%	87%	100%	20%	100%
NO	4	112	1		1	1	1	2				2	2	2	4		4	
	11%	20%	50%		~17%	8%	10%	9%				~29%	25%	7%	13%		~80%	
NOT ANSWERED	2	21				1	1	1					1	1	2		2	
VALID CASES	35	560	2	5	6	12	10	23	1	1	2	7	8	27	30	5	5	30
NUMBER OF RESPONDENTS	37	581	2	5	6	13	11	24	1	1	2	7	9	28	32	5	7	30
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q66 = YES]

Q68 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q68 YES	30	439	1	5	5	11	8	20	1	1	2	5	6	24	25	5	30		
	100%	97%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%
NO		14	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	1	3					1	1						1	1		1		
VALID CASES	30	453	1	5	5	11	8	20	1	1	2	5	6	24	25	5	30		
NUMBER OF RESPONDENTS	31	456	1	5	5	11	9	21	1	1	2	5	6	25	26	5	1	30	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q66 = YES AND Q67 = YES]

Q69 DOES YOUR CHILD NEED OR GET SPECIAL THERAPY, SUCH AS PHYSICAL, OCCUPATIONAL, OR SPEECH THERAPY?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q69 YES	34 12%	459 9%	8 ~ 14%	12 15%	8 11%	6 8%	23 11%	1 33%~	1 33%~	2 ~ 67%~	5 ~ 14%~	9 11%	25 13%	32 12%~	2 15%~	9 4%*	25 38%*			
NO	246 88%	4495 91%	2 100%~	50 86%	66 85%	63 89%	65 92%	178 89%	2 67%~	2 67%~	1 100%~	1 33%~	14 100%~	30 86%~	74 89%	168 87%	235 88%~	11 85%~	205 96%*	41 62%*
NOT ANSWERED	20	409	5	5	8	2	4					1	1	1	3		20			
VALID CASES	280	4954	2	58	78	71	71	201	3	3	1	3	14	35	83	193	267	13	214	66
NUMBER OF RESPONDENTS	300	5363	2	63	83	79	73	205	3	3	1	3	14	36	84	194	270	13	234	66
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q70 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION?

	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q70 YES	24	314	7	6	5	6	18	1		2		2	6	18	22	2	2	22
	71%	71%	~ 88%	~ 50%	~ 63%	~ 100%	~ 78%	~ 100%	~	~ 100%	~	~ 40%	~ 67%	~ 72%	~ 69%	~ 100%	~ 22%	~ 88%
NO	10	129	1	6	3		5	1				3	3	7	10		7	3
	29%	29%	~ 12%	~ 50%	~ 38%		~ 22%	~ 100%	~	~	~	~ 60%	~ 33%	~ 28%	~ 31%		~ 78%	~ 12%
NOT ANSWERED		20																
VALID CASES	34	442	8	12	8	6	23	1	1	2		5	9	25	32	2	9	25
NUMBER OF RESPONDENTS	34	462	8	12	8	6	23	1	1	2		5	9	25	32	2	9	25
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q69 = YES]

Q71 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS?

	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q71 YES	20	260	6	6	4	4	15	1		2		2	4	16	18	2		20
	91%	95%	~ 86%	~ 100%	~ 80%	~ 100%	~ 94%	~ 100%	~	~ 100%	~	~ 100%	~ 67%	~ 100%	~ 90%	~ 100%	~	~ 95%
NO	2	14	1		1		1						2		2		1	1
	9%	5%	~ 14%		~ 20%		~ 6%	~	~	~	~	~	~ 33%		~ 10%		~ 100%	~ 5%
NOT ANSWERED	2	7				2	2							2	2		1	1
VALID CASES	22	274	7	6	5	4	16	1		2		2	6	16	20	2	1	21
NUMBER OF RESPONDENTS	24	281	7	6	5	6	18	1		2		2	6	18	22	2	2	22
	100%	100%	100%	100%	100%	100%	100%	100%		100%		100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q69 = YES AND Q70 = YES]

Q72 DOES YOUR CHILD HAVE ANY KIND OF EMOTIONAL, DEVELOPMENTAL, OR BEHAVIORAL PROBLEMS FOR WHICH HE OR SHE NEEDS OR GETS TREATMENT OR COUNSELING?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q72 YES	37 13%	722 15%	~	5 9%	11 14%	8 11%	13 19%	26 13%	1 33%	1 33%	1 ~	1 33%	7 ~	19%	11%	9 13%	28 23%	3 ~	3 ~	34 1%	34 52%*
NO	241 87%	4209 85%	100%	2 ~	53 91%	67 86%	63 89%	56 81%	174 87%	2 67%	2 67%	1 100%	2 67%	14 100%	29 81%	73 89%	164 85%	231 87%	10 77%	209 99%*	32 48%*
NOT ANSWERED	22	432		5	5	8	4	5							2	2	5			22	
VALID CASES	278	4931	2	58	78	71	69	200	3	3	1	3	14	36	82	192	265	13	212	66	
NUMBER OF RESPONDENTS	300	5363	2	63	83	79	73	205	3	3	1	3	14	36	84	194	270	13	234	66	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q73 HAS THIS PROBLEM LASTED OR IS IT EXPECTED TO LAST FOR AT LEAST 12 MONTHS?

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q73 YES	34	612	5	9	8	12	24	1	1		1		6	9	25	31	3	34	
	97%	90%~	~100%~	90%~	100%~	100%~	100%~	100%~	100%~	100%~	~100%~		~ 86%~	100%~	96%~	97%~	100%~	~100%~	
NO	1	68		1									1		1	1		1	
	3%	10%~	~	~ 10%~	~	~	~	~	~	~	~	~	~ 14%~	~	4%~	3%~	~100%~	~	
NOT ANSWERED	2	39		1		1	2								2	2		2	
VALID CASES	35	680	5	10	8	12	24	1	1		1		7	9	26	32	3	1	34
NUMBER OF RESPONDENTS	37	719	5	11	8	13	26	1	1		1		7	9	28	34	3	3	34
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q72 = YES]

NQ74 WHAT IS YOUR CHILD'S AGE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NQ74 LESS THAN 1 YEAR OLD	2 0.7%	27 0.5%	2 100%	~	~	~	~	~	~	~	~	~	2 6%	2 1%	2 0.7%	~	1 0.4%	1 2%		
1 TO 3 YEARS OLD	63 21%	890 17%	63 ~100%	~	~	~	~	47 23%	1 33%	~	~	~	2 14%	7 19%	18 21%	40 21%	54 20%	4 31%	53 23%	10 15%
4 TO 7 YEARS OLD	83 28%	1394 26%	~	~	83 ~100%	~	~	57 28%	1 33%	~	~	~	6 43%	8 22%	28 33%	47 24%	76 28%	3 23%	67 29%	16 24%
8 TO 12 YEARS OLD	79 26%	1563 29%	~	~	~	79 ~100%	~	49 24%	1 33%	1 100%	2 67%	3 21%	10 28%	20 24%	51 26%	69 26%	3 23%	65 28%	14 21%	
13 OR OLDER	73 24%	1489 28%	~	~	~	73 ~100%	~	52 25%	2 67%	1 33%	~	1 33%	3 21%	9 25%	18 21%	54 28%	69 26%	3 23%	48 21%*	25 38%*
VALID CASES	300	5363	2	63	83	79	73	205	3	3	1	3	14	36	84	194	270	13	234	66
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	73 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%

[BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]

NQ75 IS YOUR CHILD MALE OR FEMALE?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
NQ75 MALE	161 54%	2755 51%	41 ~ 65%*	41 49%	41 52%	38 52%	108 53%	1 33%~	1 33%~		2 ~ 67%~	9 64%~	16 44%~	50 60%	95 49%*	141 52%~	7 54%~	131 56%	30 45%	
FEMALE	139 46%	2608 49%	2 100%~	22 35%*	42 51%	38 48%	35 48%	97 47%	2 67%~	2 67%~	1 100%~	1 33%~	5 36%~	20 56%~	34 40%	99 51%*	129 48%~	6 46%~	103 44%	36 55%
VALID CASES	300	5363	2	63	83	79	73	205	3	3	1	3	14	36	84	194	270	13	234	66
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	73 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%

[BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]

Q76 IS YOUR CHILD OF HISPANIC OR LATINO ORIGIN OR DESCENT?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q76																				
HISPANIC OR LATINO	84 30%	2091 42%*	~	18 31%	28 37%	20 28%	18 25%	44 22%*	1 33%~	~	~	13 93%~	10 28%~	84 100%~	~	78 29%~	6 46%~	67 32%	17 26%	
NOT HISPANIC OR LATINO	194 70%	2832 58%*	100%~	2 69%~	40 63%	47 72%	51 75%	157 78%*	2 67%~	3 100%~	1 100%~	3 100%~	1 7%~	26 72%~	194 100%~	187 71%~	7 54%~	145 68%	49 74%	
NOT ANSWERED	22	440		5	8	8	1	4								5		22		
VALID CASES	278	4923	2	58	75	71	72	201	3	3	1	3	14	36	84	194	265	13	212	66
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	73 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%

Q77.1 WHAT IS YOUR CHILD'S RACE? RESPONSE: WHITE

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC		
Q77.1	AHP TOT CHLD																			
YES	239 80%	3570 67%*	2 100%~	54 86%	64 77%	59 75%	60 82%	205 100%~	~	~	~	~	~	34 94%~	52 62%*	183 94%*	229 85%~	8 62%~	182 78%	57 86%
NO	61 20%	1793 33%*	~	9 14%	19 23%	20 25%	13 18%	3 ~100%	3 ~100%	1 ~100%	3 ~100%	14 ~100%	2 6%~	32 38%*	11 6%*	41 15%~	5 38%~	52 22%	9 14%	
VALID CASES	300	5363	2	63	83	79	73	205	3	3	1	3	14	36	84	194	270	13	234	66
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	73 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%

Q77.2 WHAT IS YOUR CHILD'S RACE? RESPONSE: BLACK OR AFRICAN-AMERICAN

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q77.2 YES	9 3%	230 4%	1 50%	1 2%	2 2%	1 1%	4 5%	3 ~100%	~	~	~	~	6 ~17%	3 4%	6 3%	9 3%	~	7 3%	2 3%	
NO	291 97%	5133 96%	1 50%	62 98%	81 98%	78 99%	69 95%	205 100%	3 ~100%	1 ~100%	3 ~100%	14 ~100%	30 83%	81 96%	188 97%	261 97%	13 ~100%	227 97%	64 97%	
VALID CASES	300	5363	2	63	83	79	73	205	3	3	1	3	14	36	84	194	270	13	234	66
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	73 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%

Q77.3 WHAT IS YOUR CHILD'S RACE? RESPONSE: ASIAN

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER PAC	IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC
Q77.3	AHP TOT CHLD	9																	
YES	OHP TOT CHLD	201	3	2	1	3			3				6	1	8	8	1	6	3
		3%	~ 5%	2%	1%	4%	~	~100%	~	~	~	~ 17%	~	1%	4%	3%~ 8%	~	3%	5%
NO	AHP TOT CHLD	291	2	60	81	78	205	3	1	3	14	30	83	186	262	12	228	63	
	OHP TOT CHLD	5162	100%	95%	98%	99%	100%	100%	~100%	~100%	~100%	~100%	83%	99%	96%	97%	92%	97%	95%
VALID CASES	AHP TOT CHLD	300	2	63	83	79	205	3	3	1	3	14	36	84	194	270	13	234	66
NUMBER OF RESPONDENTS	OHP TOT CHLD	5363	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q77.4 WHAT IS YOUR CHILD'S RACE? RESPONSE: NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER

		AGE						RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
Q77.4	AHP TOT CHLD																			
YES	4 1%	82 2%	~	~	1 1%	2 3%	1 1%		1 ~100%		3 ~	8 8%	2 2%	2 1%	3 1%	1 8%	2 0.9%	2 3%		
NO	296 99%	5281 98%	2 100%	63 100%	82 99%	77 97%	72 99%	205 100%	3 100%	3 100%	3 100%	14 100%	33 92%	82 98%	192 99%	267 99%	12 92%	232 99%	64 97%	
VALID CASES	300	5363	2	63	83	79	73	205	3	3	1	3	14	36	84	194	270	13	234	66
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	73 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%

Q77.5 WHAT IS YOUR CHILD'S RACE? RESPONSE: AMERICAN INDIAN OR ALASKA NATIVE

		AGE						RACE						ETHNICITY	HEALTH STATUS	CCC SCREENER			
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV ILND	AMER ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q77.5	AHP TOT CHLD																		
	OHP TOT CHLD																		
YES	21 7%	275 100%	2 5%	3 2%*	2 10%	8 8%				3 ~100%	18 ~50%	4 5%	17 9%	19 7%	2 15%	13 6%	8 12%		
NO	279 93%	5088 95%	60 ~95%	81 98%*	71 90%	67 92%	205 100%	3 ~100%	3 ~100%	1 ~100%	14 ~100%	18 50%	80 95%	177 91%	251 93%	11 85%	221 94%	58 88%	
VALID CASES	300	5363	2	63	83	79	205	3	3	1	3	14	36	84	194	270	13	234	66
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%

Q77.6 WHAT IS YOUR CHILD'S RACE? RESPONSE: OTHER

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
Q77.6	AHP TOT CHLD																			
YES	22 7%	519 10%	3 ~	10 5%	5 12%	4 5%	~	~	~	~	14 ~100%	8 22%	17 20%*	5 3%*	21 8%~	1 8%~	19 8%	3 5%		
NO	278 93%	4844 90%	2 100%~	60 95%	73 88%	74 94%	69 95%	205 100%	3 100%	3 100%	1 100%	3 100%	3 100%	28 ~ 78%	67 80%*	189 97%*	249 92%~	12 92%~	215 92%	63 95%
VALID CASES	300	5363	2	63	83	79	73	205	3	3	1	3	14	36	84	194	270	13	234	66
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	73 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%

Q78 WHAT IS YOUR AGE?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q78 UNDER 18	8	223		3	2		3	6	1						2	6	8		7	1
	3%	5%	~	5%	3%	~	4%	3%	33%~	~	~	~	~	~	2%	3%	3%~	~	3%	2%
18 TO 24	13	229	1	7	4	1	9							4	13	12	1	11	2	
	5%	5%	50%~	12%*	5%	1%*	~	4%	~	~	~	~	~	11%~	~	7%*	5%~	8%~	5%	3%
25 TO 34	106	1610	1	35	42	25	3	80	1	1			5	13	34	68	101	4	90	16
	38%	33%	50%~	59%*	54%*	34%	4%*	39%	33%~	33%~	~	~	36%~	37%~	42%	35%	38%~	31%~	42%*	25%*
35 TO 44	99	1842		13	20	31	35	68	1	1	1	1	7	12	32	67	94	5	76	23
	35%	37%	~	22%*	26%*	42%	51%*	33%	33%~	33%~	100%~	33%~	50%~	34%~	40%	35%	35%~	38%~	35%	35%
45 TO 54	38	718		1	7	10	20	26				2	2	5	11	27	36	2	25	13
	14%	15%	~	2%*	9%	14%	29%*	13%	~	~	~	67%~	14%~	14%~	14%	14%	14%~	15%~	12%	20%
55 TO 64	14	213			3	4	7	13		1					1	11	13		7	7
	5%	4%	~	~	4%	5%	10%	6%*	~	33%~	~	~	~	~	1%*	6%	5%~	~	3%	11%
65 TO 74	2	77				1	1	1						1	2	1	1			2
	0.7%	2%	~	~	~	1%	1%	0.5%	~	~	~	~	~	3%~	~	1%~	0.4%~	8%~	~	3%
75 OR OLDER	1	15				1									1	1	1			1
	0.4%	0.3%	~	~	~	1%~	~	~	~	~	~	~	~	~	1%	~	0.4%~	~	~	2%
NOT ANSWERED	19	436		4	5	6	4	2						1	3	4		18	1	
VALID CASES	281	4927	2	59	78	73	69	203	3	3	1	3	14	35	81	194	266	13	216	65
NUMBER OF RESPONDENTS	300	5363	2	63	83	79	73	205	3	3	1	3	14	36	84	194	270	13	234	66
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q79 ARE YOU MALE OR FEMALE?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q79																				
MALE	27 10%	657 13%*	~	5%	9%	7%	17%*	19%	1	1	~	~	14%~	8%~	7	19	27	23	4	
FEMALE	255 90%	4307 87%*	100%~	95%	91%	93%	83%*	185	2	2	1	3	12	33	75	175	240	13	194	61
NOT ANSWERED	18	399		6	5	6	1	1							2		3	17	1	
VALID CASES	282	4964	2	57	78	73	72	204	3	3	1	3	14	36	82	194	267	13	217	65
NUMBER OF RESPONDENTS	300 100%	5363 100%	2 100%	63 100%	83 100%	79 100%	73 100%	205 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	194 100%	270 100%	13 100%	234 100%	66 100%

Q80 WHAT IS THE HIGHEST GRADE OR LEVEL OF SCHOOL THAT YOU HAVE COMPLETED?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC	
Q80																					
8TH GRADE OR LESS	21 8%	618 13%*	~	2 3%	8 11%	5 7%	6 9%	8 4%*	~	~	~	~	6 43%~	~	19 23%*	1 0.5%*	20 8%~	1 8%~	21 10%*	~	
SOME HIGH SCHOOL BUT DID NOT GRADUATE	27 10%	624 13%	50%~	1 9%	5 12%	9 8%	6 9%	20 10%	~	~	~	~	2 14%~	2 6%~	13 16%*	13 7%*	25 9%~	2 15%~	24 11%	3 5%	
HIGH SCHOOL GRADUATE OR GED	88 32%	1385 28%	~	23 40%	18 24%	25 34%	22 31%	63 31%	1 33%~	1 33%~	~	2 67%~	4 29%~	10 29%~	18 22%*	69 36%*	81 31%~	6 46%~	70 33%	18 28%	
SOME COLLEGE OR 2-YEAR DEGREE	109 39%	1555 32%*	50%~	1 40%	23 40%	32 42%	26 36%	27 39%	84 42%	2 67%~	~	1 100%~	1 33%~	1 7%~	18 53%~	21 26%*	86 45%*	105 40%~	3 23%~	73 34%*	36 55%*
4-YEAR COLLEGE GRADUATE	20 7%	470 10%	~	1 2%*	8 11%	8 11%	3 4%	14 7%	~	1 33%~	~	~	1 7%~	4 12%~	7 9%	13 7%	19 7%~	1 8%~	15 7%	5 8%	
MORE THAN 4-YEAR COLLEGE DEGREE	14 5%	246 5%	~	4 7%	1 1%*	3 4%	6 9%	13 6%*	~	1 33%~	~	~	~	~	3 4%	10 5%	14 5%~	~	11 5%	3 5%	
NOT ANSWERED	21	466		5	7	6	3	3						2	3	2	6		20	1	
VALID CASES	279	4897		2	58	76	73	70	202	3	3	1	3	14	34	81	192	264	13	214	65
NUMBER OF RESPONDENTS	300	5363		2	63	83	79	73	205	3	3	1	3	14	36	84	194	270	13	234	66
	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q81 HOW ARE YOU RELATED TO THE CHILD?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV ILND	AMER PAC ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q81																				
MOTHER OR FATHER	260 95%	4614 94%	2 100%	58 100%	74 96%	65 93%	61 91%	187 95%	3 100%	3 100%	1 100%	2 100%	14 100%	32 91%	80 98%	175 94%	247 95%	12 92%	207 96%	53 90%
GRANDPARENT	10 4%	165 3%	~	~	2 3%	4 6%	4 6%	7 4%	~	~	~	~	~	2 6%	1 1%	9 5%	9 3%	1 8%	6 3%	4 7%
AUNT OR UNCLE		19 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
OLDER BROTHER OR SISTER		8 0.2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
OTHER RELATIVE	1 0.4%	3 0.1%	~	~	1 1%	~	~	1 0.5%	~	~	~	~	~	~	~	1 0.5%	1 0.4%	~	1 0.5%	~
LEGAL GUARDIAN	1 0.4%	60 1%*	~	~	~	1 1%	~	1 0.5%	~	~	~	~	~	~	~	1 0.5%	1 0.4%	~	1 0.5%	~
SOMEONE ELSE	2 0.7%	41 0.8%	~	~	~	~	2 3%	1 0.5%	~	~	~	~	~	1 3%	1 0.5%	1 0.8%	2 0.8%	~	~	2 3%
NOT ANSWERED	26	454		5	6	9	6	8				1		1	2	7	10		19	7
VALID CASES	274	4909	2	58	77	70	67	197	3	3	1	2	14	35	82	187	260	13	215	59
NUMBER OF RESPONDENTS	300	5363	2	63	83	79	73	205	3	3	1	3	14	36	84	194	270	13	234	66
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q82 YES	1	96				1	1							1		1		1		
	0.5%	3%*	~	~	~	2%	~0.7%	~	~	~	~	~	~	2%	~	~0.5%	~	~0.7%		
NO	199	3230	1	45	51	49	53	152	3	3	1	3	11	15	55	139	190	7	152	47
	100%	97%*	100%	100%	100%	98%	100%	99%	100%	100%	100%	100%	100%	100%	98%	100%	99%	100%	99%	100%
NOT ANSWERED	1	38				1		1							1		1		1	
VALID CASES	200	3326	1	45	51	50	53	153	3	3	1	3	11	15	56	139	191	7	153	47
NUMBER OF RESPONDENTS	201	3364	1	45	51	51	53	154	3	3	1	3	11	15	56	140	192	7	154	47
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF SURVEY COMPLETED BY MAIL]

Q83.1 HOW DID THAT PERSON HELP YOU? RESPONSE: READ THE QUESTIONS TO ME.

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC
Q83.1 YES	1	45				1	1							1		1		1
	100%	50%	~	~	~	100%	100%	~	~	~	~	~	~	100%	~	100%	~	100%
NO		44																
		50%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
VALID CASES	1	89				1	1							1		1		1
NUMBER OF RESPONDENTS	1	89				1	1							1		1		1
	100%	100%				100%	100%							100%		100%		100%

[ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]

Q83.2 HOW DID THAT PERSON HELP YOU? RESPONSE: WROTE DOWN THE ANSWERS I GAVE.

		AGE					RACE					ETHNICITY	HEALTH STATUS	CCC SCREENER	
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC
AHP TOT CHLD	OHP TOT CHLD														
Q83.2 YES	28 31%	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	1 100%	~	~	~100%	~	~100%	~	~	~	~	~	~	~	~100%	~
VALID CASES	1											1	1	1	
NUMBER OF RESPONDENTS	1 100%											1 100%	1 100%	1 100%	

[ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]

Q83.3 HOW DID THAT PERSON HELP YOU? RESPONSE: ANSWERED THE QUESTIONS FOR ME.

		AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q83.3																
YES	AHP TOT CHLD	OHP TOT CHLD														
			11 12%	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	1 100%	78 88%	~	~	~100%	~100%	~	~	~	~	~	~	~	~	~	~
VALID CASES	1	89			1	1								1	1	1
NUMBER OF RESPONDENTS	1 100%	89 100%			1 100%	1 100%								1 100%	1 100%	1 100%

[ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]

Q83.4 HOW DID THAT PERSON HELP YOU? RESPONSE: TRANSLATED THE QUESTIONS INTO MY LANGUAGE.

		AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q83.4																	
YES	AHP TOT CHLD	19															
	OHP TOT CHLD	21%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NO	AHP TOT CHLD	1			1	1								1	1		
	OHP TOT CHLD	70	~	~	~100%	~100%	~	~	~	~	~	~	~	~100%	~100%	~100%	
		100%															
VALID CASES	AHP TOT CHLD	1			1	1								1	1	1	
NUMBER OF RESPONDENTS	OHP TOT CHLD	89			1	1								1	1	1	
		100%			100%	100%								100%	100%	100%	

[ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]

Q83.5 HOW DID THAT PERSON HELP YOU? RESPONSE: HELPED IN SOME OTHER WAY.

		AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q83.5	AHP TOT CHLD	OHP TOT CHLD														
YES	8	10%	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	1	81	~	~	~100%	~100%	~	~	~	~	~	~	~	~	~	~
	100%	90%														
VALID CASES	1	89			1	1	1				1		1	1	1	
NUMBER OF RESPONDENTS	1	89			1	1	1				1		1	1	1	
	100%	100%			100%	100%					100%		100%	100%	100%	

[ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]

NQ14 RATING OF ALL CHILD'S HEALTH CARE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NQ14 0-6	29 14%	329 10%	8 ~ 15%	8 15%	5 11%	8 15%	19 13%	~	~	~	~	1 11%	5 16%	11 19%	15 11%	26 14%	1 10%	18 12%	11 20%	
7-8	55 27%	1112 32%	1 50%	13 24%	14 25%	13 30%	14 27%	41 28%	~	~	~	2 22%	11 35%	12 21%	41 29%	50 26%	4 40%	42 28%	13 23%	
9-10	123 59%	2025 58%	1 50%	33 61%	33 60%	26 59%	30 58%	84 58%	2 100%	2 100%	~	1 100%	6 67%	15 48%	34 60%	83 60%	113 60%	5 50%	91 60%	32 57%
VALID CASES	207	3466	2	54	55	44	52	144	2	2	1	9	31	57	139	189	10	151	56	
NUMBER OF RESPONDENTS	207 100%	3466 100%	2 100%	54 100%	55 100%	44 100%	52 100%	144 100%	2 100%	2 100%	1 100%	9 100%	31 100%	57 100%	139 100%	189 100%	10 100%	151 100%	56 100%	
MEAN	2.45	2.49	2.50	2.46	2.45	2.48	2.42	2.45	3.00	3.00	3.00	2.56	2.32	2.40	2.49	2.46	2.40	2.48	2.37	
p stat_(*=Sig @ p<=.05)		.478	~.918	1.00		~.724		.937	~	~	~	~	~	~.563	.323	~	~	~.343	.343	

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
NQ41 0-6	26 11%	319 8%	6 ~ 12%	11 16%	3 5%*	6 10%	19 11%	~	~	~	~	1 8%	5 17%	10 14%	15 9%	26 11%	~	16 9%	10 16%	
7-8	50 20%	980 23%	1 50%	8 16%	14 21%	18 28%	9 15%	34 19%	1 50%	~	~	3 25%	8 27%	14 19%	33 20%	45 20%	4 31%	37 20%	13 21%	
9-10	168 69%	2929 69%	1 50%	36 72%	42 63%	44 68%	45 75%	124 70%	1 50%	2 100%	1 100%	2 100%	8 67%	17 57%	48 67%	117 71%	157 69%	9 69%	128 71%	40 63%
VALID CASES	244	4228	2	50	67	65	60	177	2	2	1	2	12	30	72	165	228	13	181	63
NUMBER OF RESPONDENTS	244 100%	4228 100%	2 100%	50 100%	67 100%	65 100%	60 100%	177 100%	2 100%	2 100%	1 100%	2 100%	12 100%	30 100%	72 100%	165 100%	228 100%	13 100%	181 100%	63 100%
MEAN	2.58	2.62	2.50	2.60	2.46	2.63	2.65	2.59	2.50	3.00	3.00	3.00	2.58	2.40	2.53	2.62	2.57	2.69	2.62	2.48
p stat_(*=Sig @ p<=.05)		.406	~.833	.121	.456	.364		.675	~	~	~	~	~	~.442	.249		~	~.186	.186	

[ASKED IF Q30 = YES]

NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
NQ48 0-6	7 16%	69 10%	~	~	2 18%	3 38%	2 14%	6 18%	~	~	1 100%	~	~	1 14%	6 18%	4 11%	3 50%	1 4%	6 30%
7-8	8 18%	178 26%	~	1 10%	1 9%	1 13%	5 36%	5 15%	~	~	~	~	2 33%	2 29%	5 15%	8 22%	~	4 17%	4 20%
9-10	29 66%	428 63%	1 100%	9 90%	8 73%	4 50%	7 50%	22 67%	~	~	~	~	4 67%	4 57%	23 68%	25 68%	3 50%	19 79%	10 50%
VALID CASES	44	675	1	10	11	8	14	33			1	6	7	34	37	6	24	20	
NUMBER OF RESPONDENTS	44	675	1	10	11	8	14	33			1	6	7	34	37	6	24	20	
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	
MEAN	2.50	2.53	3.00	2.90	2.55	2.13	2.36	2.48			1.00	2.67	2.43	2.50	2.57	2.00	2.75	2.20	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

[ASKED IF Q45 = YES AND Q47 >= 1 SPECIALIST]

NQ54 RATING OF CHILD'S HEALTH PLAN

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC	
NQ54 0-6	49 17%	619 12%*	~	10%	21%	16%	21%	34 17%	1 ~	33%~	2 ~	2 14%~	8 22%~	12 14%	35 18%	45 17%~	4 31%~	28 13%*	21 32%*	
7-8	82 29%	1448 29%	100%~	32%	26%	27%	30%	63 31%	3 100%~	~	~	2 14%~	11 31%~	23 27%	57 30%	78 29%~	3 23%~	65 30%	17 26%	
9-10	152 54%	2927 59%	~	58%	54%	56%	49%	106 52%	2 ~	1 67%~	1 100%~	10 33%~	17 47%~	49 58%	100 52%	145 54%~	6 46%~	124 57%*	28 42%*	
VALID CASES	283	4994	2	59	78	73	71	203	3	3	1	3	14	36	84	192	268	13	217	66
NUMBER OF RESPONDENTS	283 100%	4994 100%	100%	100%	100%	100%	100%	203 100%	3 100%	3 100%	1 100%	3 100%	14 100%	36 100%	84 100%	192 100%	268 100%	13 100%	217 100%	66 100%
MEAN	2.36	2.46	2.00	2.47	2.33	2.40	2.28	2.35	2.00	2.33	3.00	1.67	2.57	2.25	2.44	2.34	2.37	2.15	2.44	2.11
p stat_(*=Sig @ p<=.05)		.027*	~	.210	.677	.665	.310	.745	~	~	~	~	~	~	.264	.416	~	~	.002*	.002*

GETTING NEEDED CARE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
NPRBSEE4 NQ46	2.29	2.21	3.00	2.55	2.36	1.75	2.29	2.24	1.00		1.00		2.67	2.25	2.26	2.29	2.17	2.40	2.15	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCARNES4 NQ15	2.43	2.44	1.00	2.46	2.52	2.40	2.40	2.48	2.50	2.50		2.00	2.22	2.23	2.28	2.49	2.44	2.09	2.53	2.16
p stat_(*=Sig @ p<=.05)	.943		~	.730	.317		~.681	.178	~	~	~	~	~	~.082	.146	~	~	~.003*	.003*	
COMPOSITE	2.36	2.32	2.00	2.50	2.44	2.07	2.34	2.36	2.50	1.75	x	1.50	2.22	2.45	2.26	2.38	2.37	2.13	2.47	2.16
p stat_(*=Sig @ p<=.05)	.348		~	.015*	.153		~.743	1.00	~	~	~	~	~	~.084	.515	~	~	~.000*	.002*	

GETTING CARE QUICKLY

			AGE					RACE					ETHNICITY	HEALTH STATUS	CCC SCREENER					
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
NCARSN4 NQ4	2.67	2.60	3.00	2.79	2.81	2.43	2.56	2.64	3.00	3.00		2.50	2.50	2.73	2.48	2.76	2.68	2.50	2.65	2.72
p stat_(*=Sig @ p<=.05)		.237	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NAPGET4 NQ6	2.50	2.43	1.00	2.54	2.51	2.46	2.53	2.49	3.00	3.00		2.67	2.75	2.35	2.38	2.55	2.49	2.45	2.54	2.37
p stat_(*=Sig @ p<=.05)		.198	~	.630	~	~	.713	.804	~	~	~	~	~	~	.157	.153	~	~	~	~
COMPOSITE	2.58	2.51	2.00	2.66	2.66	2.45	2.54	2.57	3.00	3.00	x	2.58	2.63	2.54	2.43	2.65	2.59	2.48	2.60	2.54
p stat_(*=Sig @ p<=.05)		.189	~	.307	.342	~	.581	.553	~	~	~	~	~	~	.046*	.038*	~	~	.619	.574

HOW WELL DOCTORS COMMUNICATE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
NDREXPL4 NQ32	2.71	2.69	2.00	2.75	2.53	2.84	2.75	2.74	3.00	3.00		3.00	2.56	2.52	2.48	2.80	2.70	2.64	2.76	2.57
p stat_(*=Sig @ p<=.05)		.748	~	~	~	~	~.323	~	~	~	~	~	~	~.005*	.005*	~	~	~.056	.055	
NDRLSTN4 NQ33	2.68	2.71	2.00	2.67	2.64	2.75	2.71	2.74	3.00	3.00		2.50	2.56	2.36	2.61	2.71	2.68	2.64	2.72	2.60
p stat_(*=Sig @ p<=.05)		.450	~	~.559	~	~	~.058	~	~	~	~	~	~	~.300	.374	~	~	~.254	.253	
NDRESPU4 NQ34	2.74	2.77	2.00	2.77	2.62	2.84	2.77	2.77	3.00	3.00		3.00	2.56	2.56	2.65	2.78	2.73	2.82	2.77	2.67
p stat_(*=Sig @ p<=.05)		.449	~	~.125	~	~	~.224	~	~	~	~	~	~	~.170	.192	~	~	~.324	.323	
NDRTMEN4 NQ37	2.49	2.49	1.50	2.49	2.36	2.61	2.57	2.57	3.00	3.00		2.50	2.25	2.20	2.18	2.62	2.49	2.40	2.52	2.44
p stat_(*=Sig @ p<=.05)		.990	~	~.144	~	~	~	~	~	~	~	~	~	~.002*	.002*	~	~	~.512	.512	
COMPOSITE	2.65	2.67	1.88	2.67	2.54	2.76	2.70	2.71	3.00	3.00	x	2.75	2.48	2.41	2.48	2.73	2.65	2.62	2.69	2.57
p stat_(*=Sig @ p<=.05)		.871	~	~.218	~	~	~.177	~	~	~	~	~	~	~.051	.061	~	~	~.337	.336	

CUSTOMER SERVICE

		AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NPBCLCS4 NQ50	2.13	2.24	1.00	2.07	2.17	2.17	2.20	2.20			1.00	2.00	1.91	2.21	2.12	2.13	2.25	2.17	2.00	
p stat_(*=Sig @ p<=.05)		.320	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCSRESP NQ51	2.64	2.57	3.00	2.50	2.76	2.58	2.67	2.72			2.00	2.33	2.55	2.62	2.70	2.63	3.00	2.67	2.54	
p stat_(*=Sig @ p<=.05)		.400	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.39	2.41	2.00	2.29	2.47	2.38	2.43	2.46	x	x	x	1.50	2.17	2.23	2.41	2.41	2.38	2.63	2.42	2.27
p stat_(*=Sig @ p<=.05)		.872	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

SHARED DECISION MAKING

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AMER IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
NNRXWHY NQ11	2.87	2.88	3.00	2.86	2.89	2.67	3.00	2.87	3.00		3.00	3.00	3.00	3.00	2.87	2.89	3.00	2.85	2.91
p stat_(*=Sig @ p<=.05)		1.00	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NNRXWYNT NQ12	2.41	2.40	1.00	2.29	2.67	2.33	2.37	2.33	3.00		3.00	3.00	2.56	2.09	2.50	2.40	2.67	2.27	2.65
p stat_(*=Sig @ p<=.05)		.981	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NRXBST NQ13	2.45	2.55	1.00	2.47	2.37	2.17	2.79	2.48	3.00		3.00	3.00	2.11	2.23	2.54	2.45	2.67	2.38	2.58
p stat_(*=Sig @ p<=.05)		.379	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.58	2.61	1.67	2.54	2.64	2.39	2.72	2.56	3.00	x	x	3.00	3.00	2.44	2.64	2.58	2.78	2.50	2.72
p stat_(*=Sig @ p<=.05)		.826	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

ACCESS TO SPECIALIZED SERVICES

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
NEZMDEQ NQ20	1.86	2.15	1.00	2.50	1.50	2.25	2.00	2.00		1.00		1.50	1.67	1.80	1.80	1.67	2.00	1.75
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTHP NQ23	1.75	1.94		1.50	1.87	2.17	1.25	1.59	2.00	1.00		2.00	1.86	1.71	1.70	2.00	2.50	1.60
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTC NQ26	1.91	2.08		2.00	1.91	1.29	2.20	1.96		1.00		2.00	1.78	1.96	1.90	2.00	1.78	1.96
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	1.84	2.06	1.00	2.00	1.76	1.90	1.82	1.85	x 2.00	x 1.00		x 1.83	1.77	1.82	1.80	1.89	2.09	1.77
p stat_(*=Sig @ p<=.05)		.003*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

GETTING NEEDED CARE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-AMER	AS-IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
PRBSEE4 Q46	73%	75%	100%	82%	82%	38%	79%	70%		0%		0%	100%	75%	71%	74%	67%	84%	60%	
CARNES4 Q15	85%	88%	0%	85%	87%	87%	83%	86%	100%	100%		50%	78%	77%	76%	88%	85%	73%	88%	75%
AVERAGE	78.97	81.22		83.50	84.43	62.08	80.80	77.90	100.0	100.0	x	50.00	77.78	88.71	75.43	79.54	79.43	69.70	86.08	67.50

GETTING CARE QUICKLY (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-AMER	AS-IAN	NATV HAW/PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
CARSN4 Q4	91%	90%	100%	94%	97%	83%	88%	89%	100%	100%		100%	75%	100%	81%	96%	91%	90%	90%	94%
APGET4 Q6	86%	84%	0%	86%	87%	87%	88%	86%	100%	100%		100%	100%	81%	83%	89%	86%	91%	88%	82%
AVERAGE	88.70	87.16		89.97	92.00	84.89	88.12	87.54	100.0	x	x	100.0	87.50	90.38	81.83	92.17	88.51	90.45	88.99	87.69

HOW WELL DOCTORS COMMUNICATE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
DREXPL4 Q32	93%	93%	50%	96%	84%	100%	93%	94%	100%	100%	100%	89%	84%	87%	95%	92%	100%	95%	87%	
DRLSTN4 Q33	93%	94%	50%	94%	90%	100%	91%	95%	100%	100%	100%	89%	84%	91%	95%	93%	100%	94%	91%	
DRESPU4 Q34	93%	95%	50%	94%	90%	100%	91%	94%	100%	100%	100%	89%	88%	93%	94%	92%	100%	95%	89%	
DRTMEN4 Q37	85%	86%	50%	87%	78%	91%	86%	89%	100%	100%	100%	75%	72%	71%	91%	84%	90%	86%	82%	
AVERAGE	90.9	92.0	50.0	92.6	85.4	97.7	90.2	93.0	100	100	x	100	85.4	82.0	85.2	93.7	90.3	97.5	92.4	87.2

CUSTOMER SERVICE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-AMER	AS-IAN	NATV HAW/PAC ILND	AMER IND/ALSK NATV	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
PBCLCS4 Q50	73%	77%	0%	79%	78%	75%	67%	73%				0%	100%	64%	79%	70%	73%	75%	79%	54%
CSRESP Q51	95%	91%	100%	93%	100%	92%	93%	95%				100%	100%	91%	92%	95%	94%	100%	98%	85%
AVERAGE	84.12	83.89	x	85.71	88.89	83.33	80.00	83.69	x	x	x	x	100.0	77.27	85.44	82.56	83.59	87.50	88.27	69.23

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NRXWHY Q11	94%	94%	100%	93%	94%	83%	100%	93%	100%		100%	100%	100%	100%	94%	94%	100%	93%	96%	
NRXWYNT Q12	70%	70%	0%	64%	83%	67%	68%	67%	100%		100%	100%	78%	55%	75%	70%	83%	63%	83%	
RXBST Q13	73%	78%	0%	73%	68%	58%	89%	74%	100%		100%	100%	56%	62%	77%	73%	83%	69%	79%	
AVERAGE	78.9	80.5	x	76.8	82.1	69.4	86.0	78.0	x	x	x	x	x	77.8	72.0	81.9	79.0	88.9	75.0	85.8

ACCESS TO SPECIALIZED SERVICES (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
EZMDEQ Q20	57%	70%	0%	100%	33%	75%	100%	63%			0%	50%	33%	60%	50%	67%	67%	50%	
EZTHP Q23	54%	61%		33%	75%	67%	25%	47%	100%		0%	67%	57%	53%	50%	75%	100%	45%	
EZTC Q26	53%	67%		100%	55%	14%	67%	58%			0%	50%	44%	56%	50%	75%	44%	56%	
AVERAGE	54.8	66.1	x	66.7	54.3	52.0	45.8	55.8	x	x	x	x	55.6	45.0	56.3	50.0	72.2	70.4	50.3

PERSONAL DOCTOR WHO KNOWS CHILD (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
DRTLKU Q38	80%	84%	50%	94%	74%	80%	76%	85%	100%	50%	100%	56%	76%	70%	84%	79%	91%	79%	84%
DRUNCON Q43	94%	89%	100%	100%	89%	100%	90%	95%	100%		100%	100%	100%	92%	95%	93%	100%	90%	95%
DRUNFAM Q44	87%	84%	100%	100%	70%	93%	84%	92%	100%		50%	50%	78%	67%	93%	87%	86%	80%	89%
AVERAGE	87.3	85.5	50.0	97.9	77.6	90.8	83.3	90.5	100	50.0	x 83.3	68.5	84.6	76.2	90.8	86.7	92.2	83.0	89.2

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
HELPCONT Q18	94%	94%	100%	86%	100%	100%	91%	100%				100%	100%	100%	89%	93%	100%	100%	90%	
HLPCOORD Q29	58%	60%	100%	60%	63%	30%	65%	57%			0%	50%	75%	45%	62%	58%	67%	57%	61%	
AVERAGE	76.3	76.8	x	80.0	74.4	65.0	82.5	74.2	x	x	x	x	75.0	75.0	72.7	75.2	75.4	83.3	78.4	75.4

INDEX OF ADULT TABLES

PAGE QUESTION TITLE

1. INTRODUCTION

1 Q1 OUR RECORDS SHOW THAT YOU ARE NOW IN <HEALTH PLAN>. IS THAT RIGHT?

2. YOUR HEALTH CARE IN THE LAST 6 MONTHS

2 Q3 IN THE LAST 6 MONTHS, DID YOU HAVE AN ILLNESS, INJURY, OR CONDITION THAT NEEDED CARE RIGHT AWAY IN A CLINIC, EMERGENCY ROOM OR DOCTOR'S OFFICE?

3 Q4 IN THE LAST 6 MONTHS, WHEN YOU NEEDED CARE RIGHT AWAY, HOW OFTEN DID YOU GET CARE AS SOON AS YOU NEEDED? [ASKED IF Q3 = YES]

4 Q5 IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS FOR A CHECK-UP OR ROUTINE CARE AT A DOCTOR'S OFFICE OR CLINIC?

5 Q6 IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT FOR A CHECK-UP OR ROUTINE CARE AT A DOCTOR'S OFFICE OR CLINIC AS SOON AS YOU NEEDED? [ASKED IF Q5 = YES]

6 Q7 IN THE LAST 6 MONTHS, NOT COUNTING THE TIMES YOU WENT TO AN EMERGENCY ROOM, HOW MANY TIMES DID YOU GO TO A DOCTOR'S OFFICE OR CLINIC TO GET HEALTH CARE FOR YOURSELF?

7 Q8 IN THE LAST 6 MONTHS, DID YOU AND A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT SPECIFIC THINGS YOU COULD DO TO PREVENT ILLNESS? [ASKED IF Q7 >= 1 TIME]

8 Q9 IN THE LAST 6 MONTHS, DID YOU AND A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE? [ASKED IF Q7 >= 1 TIME]

9 Q10 DID YOU AND A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT WANT TO TAKE A MEDICINE? [ASKED IF Q7 >= 1 TIME AND Q9 = YES]

10 Q11 DID YOU AND A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT NOT WANT TO TAKE A MEDICINE? [ASKED IF Q7 >= 1 TIME AND Q9 = YES]

11 Q12 WHEN YOU TALKED ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE, DID A DOCTOR OR OTHER HEALTH PROVIDER ASK YOU WHAT YOU THOUGHT WAS BEST FOR YOU? [ASKED IF Q7 >= 1 TIME AND Q9 = YES]

12 Q13 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH CARE POSSIBLE AND 10 IS THE BEST HEALTH CARE POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE ALL YOUR HEALTH CARE IN THE LAST 6 MONTHS? [ASKED IF Q7 >= 1 TIME]

13 Q14 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THE CARE, TESTS OR TREATMENT YOU NEEDED? [ASKED IF Q7 >= 1 TIME]

PAGE QUESTION TITLE

3. YOUR PERSONAL DOCTOR

- 14 Q15 A PERSONAL DOCTOR IS THE ONE YOU WOULD SEE IF YOU NEED A CHECK-UP, WANT ADVICE ABOUT A HEALTH PROBLEM, OR GET SICK OR HURT. DO YOU HAVE A PERSONAL DOCTOR?
- 15 Q16 IN THE LAST 6 MONTHS, HOW MANY TIMES DID YOU VISIT YOUR PERSONAL DOCTOR TO GET CARE FOR YOURSELF? [ASKED IF Q15 = YES]
- 16 Q17 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR EXPLAIN THINGS IN A WAY THAT WAS EASY TO UNDERSTAND? [ASKED IF Q15 = YES AND Q16 >= 1 TIME]
- 17 Q18 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR LISTEN CAREFULLY TO YOU? [ASKED IF Q15 = YES AND Q16 >= 1 TIME]
- 18 Q19 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR SHOW RESPECT FOR WHAT YOU HAD TO SAY? [ASKED IF Q15 = YES AND Q16 >= 1 TIME]
- 19 Q20 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR SPEND ENOUGH TIME WITH YOU? [ASKED IF Q15 = YES AND Q16 >= 1 TIME]
- 20 Q21 IN THE LAST 6 MONTHS, DID YOU GET CARE FROM A DOCTOR OR OTHER HEALTH PROVIDER BESIDES YOUR PERSONAL DOCTOR? [ASKED IF Q15 = YES AND Q16 >= 1 TIME]
- 21 Q22 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR SEEM INFORMED AND UP-TO-DATE ABOUT THE CARE YOU GOT FROM THESE DOCTORS OR OTHER HEALTH PROVIDERS? [ASKED IF Q15 = YES AND Q16 >= 1 TIME AND Q21 = YES]
- 22 Q23 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST PERSONAL DOCTOR POSSIBLE AND 10 IS THE BEST PERSONAL DOCTOR POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR PERSONAL DOCTOR? [ASKED IF Q15 = YES]

4. GETTING HEALTH CARE FROM SPECIALISTS

- 23 Q24 SPECIALISTS ARE DOCTORS LIKE SURGEONS, HEART DOCTORS, ALLERGY DOCTORS, SKIN DOCTORS, AND OTHER DOCTORS WHO SPECIALIZE IN ONE AREA OF HEALTH CARE. IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS TO SEE A SPECIALIST?
- 24 Q25 IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT TO SEE A SPECIALIST AS SOON AS YOU NEEDED? [ASKED IF Q24 = YES]
- 25 Q26 HOW MANY SPECIALISTS HAVE YOU SEEN IN THE LAST 6 MONTHS? [ASKED IF Q24 = YES]
- 26 Q27 WE WANT TO KNOW YOUR RATING OF THE SPECIALIST YOU SAW MOST OFTEN IN THE LAST 6 MONTHS. USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST SPECIALIST POSSIBLE AND 10 IS THE BEST SPECIALIST POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE THAT SPECIALIST? [ASKED IF Q24 = YES AND Q26 >= 1 SPECIALIST]

PAGE QUESTION TITLE

5. YOUR HEALTH PLAN

27 Q28 IN THE LAST 6 MONTHS, DID YOU LOOK FOR ANY INFORMATION IN WRITTEN MATERIALS OR ON THE INTERNET ABOUT HOW YOUR HEALTH PLAN WORKS?

28 Q29 IN THE LAST 6 MONTHS, HOW OFTEN DID THE WRITTEN MATERIALS OR THE INTERNET PROVIDE THE INFORMATION YOU NEEDED ABOUT HOW YOUR HEALTH PLAN WORKS? [ASKED IF Q28 = YES]

29 Q30 IN THE LAST 6 MONTHS, DID YOU GET INFORMATION OR HELP FROM YOUR HEALTH PLAN'S CUSTOMER SERVICE?

30 Q31 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR HEALTH PLAN'S CUSTOMER SERVICE GIVE YOU THE INFORMATION OR HELP YOU NEEDED? [ASKED IF Q30 = YES]

31 Q32 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR HEALTH PLAN'S CUSTOMER SERVICE STAFF TREAT YOU WITH COURTESY AND RESPECT? [ASKED IF Q30 = YES]

32 Q33 IN THE LAST 6 MONTHS, DID YOUR HEALTH PLAN GIVE YOU ANY FORMS TO FILL OUT?

33 PQ34 IN THE LAST 6 MONTHS, HOW OFTEN WERE THE FORMS FROM YOUR HEALTH PLAN EASY TO FILL OUT? [ASKED IF Q33 = YES. RESPONSE OF 'ALWAYS' PADDED WITH Q33 = NO]

34 Q35 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH PLAN POSSIBLE AND 10 IS THE BEST HEALTH PLAN POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR HEALTH PLAN?

35 Q35A IN THE LAST 6 MONTHS, DID YOU HAVE A HEALTH PROBLEM FOR WHICH YOU NEEDED SPECIAL MEDICAL EQUIPMENT, SUCH AS A CANE, A WHEELCHAIR, OR OXYGEN EQUIPMENT?

36 Q35B IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THE MEDICAL EQUIPMENT YOU NEEDED THROUGH YOUR HEALTH PLAN? [ASKED IF Q35A = YES]

37 Q35C IN THE LAST 6 MONTHS, DID YOU HAVE ANY HEALTH PROBLEMS THAT NEEDED SPECIAL THERAPY, SUCH AS PHYSICAL, OCCUPATIONAL, OR SPEECH THERAPY?

38 Q35D IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THE SPECIAL THERAPY YOU NEEDED THROUGH YOUR HEALTH PLAN? [ASKED IF Q35C = YES]

PAGE QUESTION TITLE

5. ADDITIONAL QUESTIONS

- 39 Q35E IN THE LAST 6 MONTHS, DID YOU VISIT A PROVIDER FOR A SPECIFIC HEALTH ISSUE?
- 40 Q35F HOW MUCH EFFORT WAS MADE TO HELP YOU UNDERSTAND YOUR HEALTH ISSUE? [ASKED IF Q35E = YES]
- 41 Q35G HOW MUCH EFFORT WAS MADE TO LISTEN TO THE THINGS THAT MATTER MOST TO YOU ABOUT YOUR HEALTH ISSUE? [ASKED IF Q35E = YES]
- 42 Q35H HOW MUCH EFFORT WAS MADE TO INCLUDE WHAT MATTERS MOST TO YOU IN CHOOSING WHAT TO DO NEXT? [ASKED IF Q35E = YES]
- 43 Q35I CHOICES FOR YOUR TREATMENT OR HEALTH CARE CAN INCLUDE CHOICES ABOUT MEDICINE, SURGERY, OR OTHER TREATMENT. IN THE LAST 6 MONTHS, DID THIS PROVIDER TELL YOU THERE WAS MORE THAN ONE CHOICE FOR YOUR TREATMENT OR HEALTH CARE?
- 44 Q35J IN THE LAST 6 MONTHS, DID YOUR PROVIDER TALK WITH YOU ABOUT THE PROS AND CONS OF EACH CHOICE FOR YOUR TREATMENT OR HEALTH CARE? [ASKED IF Q35I = YES]
- 45 Q35K IN THE LAST 6 MONTHS, WHEN THERE WAS MORE THAN ONE CHOICE FOR YOUR TREATMENT OR HEALTH CARE, DID YOUR PROVIDER ASK YOU WHICH CHOICE WAS BEST FOR YOU? [ASKED IF Q35I = YES]
- 46 Q35L IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PROVIDER MAKE IT EASY FOR YOU TO ASK QUESTIONS OR RAISE CONCERNS?
- 47 Q35M IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER TALK TOO FAST WHEN TALKING TO YOU?
- 48 Q35N IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER INTERRUPT YOU WHEN YOU WERE TALKING?
- 49 Q35O IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER USE A CONDESCENDING, SARCASTIC, OR RUDE TONE OR MANNER WITH YOU?
- 50 Q35P IN THE LAST 6 MONTHS, DID YOU FEEL YOU COULD TRUST A DOCTOR OR OTHER HEALTH PROVIDER WITH YOUR MEDICAL CARE?

5. ACCESS TO DENTAL CARE

- 51 Q35Q A REGULAR DENTIST IS ONE YOU WOULD GO TO FOR CHECK-UPS AND CLEANINGS OR WHEN YOU HAVE A CAVITY OR TOOTH PAIN. DO YOU HAVE A REGULAR DENTIST?
- 52 Q35R IN THE LAST 6 MONTHS, IF YOU NEEDED TO SEE A DENTIST RIGHT AWAY BECAUSE OF A DENTAL EMERGENCY, DID YOU GET TO SEE A DENTIST AS SOON AS YOU WANTED?

PAGE	QUESTION	TITLE
6.	ABOUT YOU	
53	Q36	IN GENERAL, HOW WOULD YOU RATE YOUR OVERALL HEALTH?
54	Q37	IN GENERAL, HOW WOULD YOU RATE YOUR OVERALL MENTAL OR EMOTIONAL HEALTH?
55	Q38	HAVE YOU HAD EITHER A FLU SHOT OR FLU SPRAY IN THE NOSE SINCE JULY 1, 2014?
56	Q39	DO YOU NOW SMOKE CIGARETTES OR USE TOBACCO EVERY DAY, SOME DAYS, OR NOT AT ALL?
57	Q40	IN THE LAST 6 MONTHS, HOW OFTEN WERE YOU ADVISED TO QUIT SMOKING OR USING TOBACCO BY A DOCTOR OR OTHER HEALTH PROVIDER IN YOUR PLAN? [ASKED IF Q39 = EVERY DAY OR SOME DAYS]
58	Q41	IN THE LAST 6 MONTHS, HOW OFTEN WAS MEDICATION RECOMMENDED OR DISCUSSED BY A DOCTOR OR HEALTH PROVIDER TO ASSIST YOU WITH QUITTING SMOKING OR USING TOBACCO? EXAMPLES OF MEDICATION ARE: NICOTINE GUM, PATCH, NASAL SPRAY, INHALER, OR PRESCRIPTION MEDICATION. [ASKED IF Q39 = EVERY DAY OR SOME DAYS]
59	Q42	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR DOCTOR OR HEALTH PROVIDER DISCUSS OR PROVIDE METHODS AND STRATEGIES OTHER THAN MEDICATION TO ASSIST YOU WITH QUITTING SMOKING OR USING TOBACCO? EXAMPLES OF METHODS AND STRATEGIES ARE: TELEPHONE HELPLINE, INDIVIDUAL OR GROUP COUNSELING, OR CESSATION PROGRAM. [ASKED IF Q39 = EVERY DAY OR SOME DAYS]
60	Q43	DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?
61	Q44	DO YOU HAVE A HEALTH PROBLEM OR TAKE MEDICATION THAT MAKES TAKING ASPIRIN UNSAFE FOR YOU?
62	Q45	HAS A DOCTOR OR HEALTH PROVIDER EVER DISCUSSED WITH YOU THE RISKS AND BENEFITS OF ASPIRIN TO PREVENT HEART ATTACK OR STROKE?

PAGE	QUESTION	TITLE
63	Q46.1	ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: HIGH CHOLESTEROL
64	Q46.2	ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: HIGH BLOOD PRESSURE
65	Q46.3	ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: PARENT OR SIBLING WITH HEART ATTACK BEFORE THE AGE OF 60
66	Q47.1	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: A HEART ATTACK
67	Q47.2	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: ANGINA OR CORONARY HEART DISEASE
68	Q47.3	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: A STROKE
69	Q47.4	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: ANY KIND OF DIABETES OR HIGH BLOOD SUGAR
70	Q48	IN THE LAST 6 MONTHS, DID YOU GET HEALTH CARE 3 OR MORE TIMES FOR THE SAME CONDITION OR PROBLEM?
71	Q49	IS THIS A CONDITION OR PROBLEM THAT HAS LASTED FOR AT LEAST 3 MONTHS? DO NOT INCLUDE PREGNANCY OR MENOPAUSE. [ASKED IF Q48 = YES]
72	Q50	DO YOU NOW NEED OR TAKE MEDICINE PRESCRIBED BY A DOCTOR? DO NOT INCLUDE BIRTH CONTROL.
73	Q51	IS THIS MEDICINE TO TREAT A CONDITION THAT HAS LASTED FOR AT LEAST 3 MONTHS? DO NOT INCLUDE PREGNANCY OR MENOPAUSE. [ASKED IF Q50 = YES]
74	NQ52	WHAT IS YOUR AGE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
75	NQ53	ARE YOU MALE OR FEMALE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
76	Q54	WHAT IS THE HIGHEST GRADE OR LEVEL OF SCHOOL THAT YOU HAVE COMPLETED?
77	Q55	ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?
78	Q56.1	WHAT IS YOUR RACE? RESPONSE: WHITE
79	Q56.2	WHAT IS YOUR RACE? RESPONSE: BLACK OR AFRICAN-AMERICAN
80	Q56.3	WHAT IS YOUR RACE? RESPONSE: ASIAN
81	Q56.4	WHAT IS YOUR RACE? RESPONSE: NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
82	Q56.5	WHAT IS YOUR RACE? RESPONSE: AMERICAN INDIAN OR ALASKA NATIVE
83	Q56.6	WHAT IS YOUR RACE? RESPONSE: OTHER
84	Q57	DID SOMEONE HELP YOU COMPLETE THIS SURVEY? [ASKED IF SURVEY COMPLETED BY MAIL]
85	Q58.1	HOW DID THAT PERSON HELP YOU? RESPONSE: READ THE QUESTIONS TO ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]

86 Q58.2 HOW DID THAT PERSON HELP YOU? RESPONSE: WROTE DOWN THE ANSWERS I GAVE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]

87 Q58.3 HOW DID THAT PERSON HELP YOU? RESPONSE: ANSWERED THE QUESTIONS FOR ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]

88 Q58.4 HOW DID THAT PERSON HELP YOU? RESPONSE: TRANSLATED THE QUESTIONS INTO MY LANGUAGE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]

89 Q58.5 HOW DID THAT PERSON HELP YOU? RESPONSE: HELPED IN SOME OTHER WAY. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]

PAGE	QUESTION	TITLE
8. RATINGS		
90	NQ13	RATING OF ALL HEALTH CARE [ASKED IF Q7 >= 1 TIME]
91	NQ23	RATING OF PERSONAL DOCTOR [ASKED IF Q15 = YES]
92	NQ27	RATING OF SPECIALIST SEEN MOST OFTEN [ASKED IF Q24 = YES AND Q26 >= 1 SPECIALIST]
93	NQ35	RATING OF HEALTH PLAN
9. COMPOSITES		
94		GETTING NEEDED CARE
95		GETTING CARE QUICKLY
96		HOW WELL DOCTORS COMMUNICATE
97		CUSTOMER SERVICE
98		SHARED DECISION MAKING
10. GLOBAL PROPORTION COMPOSITES		
99		GETTING NEEDED CARE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
100		GETTING CARE QUICKLY (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
101		HOW WELL DOCTORS COMMUNICATE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
102		CUSTOMER SERVICE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
103		SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

INDEX OF CHILD TABLES

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1. INTRODUCTION

1 Q1 OUR RECORDS SHOW THAT YOUR CHILD IS NOW IN <HEALTH PLAN>. IS THAT RIGHT?

2. YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS

2 Q3 IN THE LAST 6 MONTHS, DID YOUR CHILD HAVE AN ILLNESS, INJURY, OR CONDITION THAT NEEDED CARE RIGHT AWAY IN A CLINIC, EMERGENCY ROOM OR DOCTOR'S OFFICE?

3 Q4 IN THE LAST 6 MONTHS, WHEN YOUR CHILD NEEDED CARE RIGHT AWAY, HOW OFTEN DID YOUR CHILD GET CARE AS SOON AS HE OR SHE NEEDED? [ASKED IF Q3 = YES]

4 Q5 IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS FOR A CHECK UP OR ROUTINE CARE FOR YOUR CHILD AT A DOCTOR'S OFFICE OR CLINIC?

5 Q6 IN THE LAST 6 MONTHS, WHEN YOU MADE AN APPOINTMENT FOR A CHECK UP OR ROUTINE CARE FOR YOUR CHILD AT A DOCTOR'S OFFICE OR CLINIC, HOW OFTEN DID YOU GET AN APPOINTMENT AS SOON AS YOUR CHILD NEEDED? [ASKED IF Q5 = YES]

6 Q7 IN THE LAST 6 MONTHS, NOT COUNTING THE TIMES YOUR CHILD WENT TO AN EMERGENCY ROOM, HOW MANY TIMES DID HE OR SHE GO TO A DOCTOR'S OFFICE OR CLINIC TO GET HEALTH CARE?

7 Q8 IN THE LAST 6 MONTHS, DID YOU AND YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT SPECIFIC THINGS YOU COULD DO TO PREVENT ILLNESS IN YOUR CHILD? [ASKED IF Q7 >= 1 TIME]

8 Q9 IN THE LAST 6 MONTHS, HOW OFTEN DID YOU HAVE YOUR QUESTIONS ANSWERED BY YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER? [ASKED IF Q7 >= 1 TIME]

9 Q10 IN THE LAST 6 MONTHS, DID YOU AND YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE FOR YOUR CHILD? [ASKED IF Q7 >= 1 TIME]

10 Q11 WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT WANT YOUR CHILD TO TAKE A MEDICINE? [ASKED IF Q7 >= 1 TIME AND Q10 = YES]

11 Q12 WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT NOT WANT YOUR CHILD TO TAKE A MEDICINE? [ASKED IF Q7 >= 1 TIME AND Q10 = YES]

12 Q13 WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, DID A DOCTOR OR OTHER HEALTH PROVIDER ASK YOU WHAT YOU THOUGHT WAS BEST FOR YOUR CHILD? [ASKED IF Q7 >= 1 TIME AND Q10 = YES]

13 Q14 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH CARE POSSIBLE AND 10 IS THE BEST HEALTH CARE POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE ALL YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS? [ASKED IF Q7 >= 1]

14 Q15 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THE CARE, TESTS, OR TREATMENT YOUR CHILD NEEDED? [ASKED IF Q7 >= 1 TIME]

15 Q16 IS YOUR CHILD NOW ENROLLED IN ANY KIND OF SCHOOL OR DAYCARE?

- 16 Q17 IN THE LAST 6 MONTHS, DID YOU NEED YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TO CONTACT A SCHOOL OR DAYCARE CENTER ABOUT YOUR CHILD'S HEALTH OR HEALTH CARE? [ASKED IF Q16 = YES]
- 17 Q18 IN THE LAST 6 MONTHS, DID YOU GET THE HELP YOU NEEDED FROM YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER IN CONTACTING YOUR CHILD'S SCHOOL OR DAYCARE? [ASKED IF Q16 = YES AND Q17 = YES]

3. SPECIALIZED SERVICES

- 18 Q19 SPECIAL MEDICAL EQUIPMENT OR DEVICES INCLUDE A WALKER, WHEELCHAIR, NEBULIZER, FEEDING TUBES, OR OXYGEN EQUIPMENT. IN THE LAST 6 MONTHS, DID YOU GET OR TRY TO GET ANY SPECIAL MEDICAL EQUIPMENT OR DEVICES FOR YOUR CHILD?
- 19 Q20 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET SPECIAL MEDICAL EQUIPMENT OR DEVICES FOR YOUR CHILD? [ASKED IF Q19 = YES]
- 20 Q21 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE, OR CLINIC HELP YOU GET SPECIAL MEDICAL EQUIPMENT OR DEVICES FOR YOUR CHILD? [ASKED IF Q19 = YES]
- 21 Q22 IN THE LAST 6 MONTHS, DID YOU GET OR TRY TO GET SPECIAL THERAPY SUCH AS PHYSICAL, OCCUPATIONAL, OR SPEECH THERAPY FOR YOUR CHILD?
- 22 Q23 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THIS THERAPY FOR YOUR CHILD? [ASKED IF Q22 = YES]
- 23 Q24 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE OR CLINIC HELP YOU GET THIS THERAPY FOR YOUR CHILD? [ASKED IF Q22 = YES]
- 24 Q25 IN THE LAST 6 MONTHS, DID YOU GET OR TRY TO GET TREATMENT OR COUNSELING FOR YOUR CHILD FOR AN EMOTIONAL, DEVELOPMENTAL, OR BEHAVIORAL PROBLEM?
- 25 Q26 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THIS TREATMENT OR COUNSELING FOR YOUR CHILD? [ASKED IF Q25 = YES]
- 26 Q27 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE OR CLINIC HELP YOU GET THIS TREATMENT OR COUNSELING FOR YOUR CHILD? [ASKED IF Q25 = YES]
- 27 Q28 IN THE LAST 6 MONTHS, DID YOUR CHILD GET CARE FROM MORE THAN ONE KIND OF HEALTH CARE PROVIDER OR USE MORE THAN ONE KIND OF HEALTH CARE SERVICE?
- 28 Q29 IN THE LAST 6 MONTHS, DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE, OR CLINIC HELP COORDINATE YOUR CHILD'S CARE AMONG THESE DIFFERENT PROVIDERS OR SERVICES? [ASKED IF Q28 = YES]

PAGE QUESTION TITLE

4. YOUR CHILD'S PERSONAL DOCTOR

- 29 Q30 A PERSONAL DOCTOR IS THE ONE YOUR CHILD WOULD SEE IF HE OR SHE NEEDS A CHECKUP, HAS A HEALTH PROBLEM, OR GETS SICK OR HURT. DOES YOUR CHILD HAVE A PERSONAL DOCTOR?
- 30 Q31 IN THE LAST 6 MONTHS, HOW MANY TIMES DID YOUR CHILD VISIT HIS OR HER PERSONAL DOCTOR FOR CARE? [ASKED IF Q30 = YES]
- 31 Q31A IN THE LAST 6 MONTHS, HOW OFTEN DID YOU HAVE A HARD TIME SPEAKING WITH OR UNDERSTANDING YOUR CHILD'S PERSONAL DOCTOR BECAUSE YOU SPOKE DIFFERENT LANGUAGES? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]

32 Q32 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR EXPLAIN THINGS ABOUT YOUR CHILD'S HEALTH IN A WAY THAT WAS EASY TO UNDERSTAND? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]

33 Q33 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR LISTEN CAREFULLY TO YOU? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]

34 Q34 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR SHOW RESPECT FOR WHAT YOU HAD TO SAY? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]

35 Q35 IS YOUR CHILD ABLE TO TALK WITH DOCTORS ABOUT HIS OR HER HEALTH CARE? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]

36 Q36 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR EXPLAIN THINGS IN A WAY THAT WAS EASY FOR YOUR CHILD TO UNDERSTAND? [ASKED IF Q30 = YES AND Q31 >= 1 TIME AND Q35 = YES]

37 Q37 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR SPEND ENOUGH TIME WITH YOUR CHILD? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]

38 Q38 IN THE LAST 6 MONTHS, DID YOUR CHILD'S PERSONAL DOCTOR TALK WITH YOU ABOUT HOW YOUR CHILD IS FEELING, GROWING, OR BEHAVING? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]

39 Q39 IN THE LAST 6 MONTHS, DID YOUR CHILD GET CARE FROM A DOCTOR OR OTHER HEALTH PROVIDER BESIDES HIS OR HER PERSONAL DOCTOR? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]

40 Q40 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR SEEM INFORMED AND UP-TO-DATE ABOUT THE CARE YOUR CHILD GOT FROM THESE DOCTORS OR OTHER HEALTH PROVIDERS? [ASKED IF Q30 = YES AND Q31 >= 1 TIME AND Q39 = YES]

41 Q41 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST PERSONAL DOCTOR POSSIBLE AND 10 IS THE BEST PERSONAL DOCTOR POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR CHILD'S PERSONAL DOCTOR? [ASKED IF Q30 = YES]

42 Q42 DOES YOUR CHILD HAVE ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITIONS THAT HAVE LASTED FOR MORE THAN 3 MONTHS? [ASKED IF Q30 = YES]

43 Q43 DOES YOUR CHILD'S PERSONAL DOCTOR UNDERSTAND HOW THESE MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITIONS AFFECT YOUR CHILD'S DAY-TO-DAY LIFE? [ASKED IF Q30 = YES AND Q42 = YES]

44 Q44 DOES YOUR CHILD'S PERSONAL DOCTOR UNDERSTAND HOW YOUR CHILD'S MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITIONS AFFECT YOUR FAMILY'S DAY-TO-DAY LIFE? [ASKED IF Q30 = YES AND Q42 = YES]

PAGE QUESTION TITLE

5. GETTING HEALTH CARE FROM SPECIALISTS

45 Q45 SPECIALISTS ARE DOCTORS LIKE SURGEONS, HEART DOCTORS, ALLERGY DOCTORS, SKIN DOCTORS, AND OTHER DOCTORS WHO SPECIALIZE IN ONE AREA OF HEALTH CARE. IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS FOR YOUR CHILD TO SEE A SPECIALIST?

46 Q46 IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT FOR YOUR CHILD TO SEE A SPECIALIST AS SOON AS YOU NEEDED? [ASKED IF Q45 = YES]

47 Q47 HOW MANY SPECIALISTS HAS YOUR CHILD SEEN IN THE LAST 6 MONTHS? [ASKED IF Q45 = YES]

48 Q48 WE WANT TO KNOW YOUR RATING OF THE SPECIALIST YOUR CHILD SAW MOST OFTEN IN THE LAST 6 MONTHS. USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST SPECIALIST POSSIBLE AND 10 IS THE BEST SPECIALIST POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE THAT SPECIALIST? [ASKED IF Q45 = YES AND Q47 >= 1 SPECIALIST]

6. YOUR CHILD'S HEALTH PLAN

49 Q49 IN THE LAST 6 MONTHS, DID YOU GET INFORMATION OR HELP FROM CUSTOMER SERVICE AT YOUR CHILD'S HEALTH PLAN?

50 Q50 IN THE LAST 6 MONTHS, HOW OFTEN DID CUSTOMER SERVICE AT YOUR CHILD'S HEALTH PLAN GIVE YOU THE INFORMATION OR HELP YOU NEEDED? [ASKED IF Q49 = YES]

51 Q51 IN THE LAST 6 MONTHS, HOW OFTEN DID CUSTOMER SERVICE STAFF AT YOUR CHILD'S HEALTH PLAN TREAT YOU WITH COURTESY AND RESPECT? [ASKED IF Q49 = YES]

52 Q52 IN THE LAST 6 MONTHS, DID YOUR CHILD'S HEALTH PLAN GIVE YOU ANY FORMS TO FILL OUT?

53 PQ53 IN THE LAST 6 MONTHS, HOW OFTEN WERE THE FORMS FROM YOUR CHILD'S HEALTH PLAN EASY TO FILL OUT? [ASKED IF Q52 = YES. RESPONSE OF 'ALWAYS' PADDED WITH Q52 = NO]

54 Q54 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH PLAN POSSIBLE AND 10 IS THE BEST HEALTH PLAN POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR CHILD'S HEALTH PLAN?

PAGE QUESTION TITLE

7. PRESCRIPTION MEDICINES

55 Q55 IN THE LAST 6 MONTHS, DID YOU GET OR REFILL ANY PRESCRIPTION MEDICINES FOR YOUR CHILD?

56 Q56 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET PRESCRIPTION MEDICINES FOR YOUR CHILD THROUGH HIS OR HER HEALTH PLAN? [ASKED IF Q55 = YES]

57 Q57 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE, OR CLINIC HELP YOU GET YOUR CHILD'S PRESCRIPTION MEDICINES? [ASKED IF Q55 = YES]

7. ACCESS TO DENTAL CARE

58 Q57A A REGULAR DENTIST IS ONE YOUR CHILD WOULD GO TO FOR CHECK-UPS AND CLEANINGS OR WHEN HE/SHE HAS A CAVITY OR TOOTH PAIN. DOES YOUR CHILD HAVE A REGULAR DENTIST?

59 Q57B IN THE LAST 6 MONTHS, IF YOUR CHILD NEEDED TO SEE A DENTIST RIGHT AWAY BECAUSE OF A DENTAL EMERGENCY, DID HE/SHE GET TO SEE A DENTIST AS SOON AS YOU WANTED?

7. ADDITIONAL QUESTIONS

60 Q57C CHOICES FOR YOUR CHILD'S TREATMENT OR HEALTH CARE CAN INCLUDE CHOICES ABOUT MEDICINE, SURGERY, OR OTHER TREATMENT. IN THE LAST 6 MONTHS, DID YOUR PROVIDER TELL YOU THERE WAS MORE THAN ONE CHOICE FOR YOUR CHILD'S TREATMENT OR HEALTH CARE?

- 61 Q57D IN THE LAST 6 MONTHS, DID YOUR PROVIDER TALK WITH YOU ABOUT THE PROS AND CONS OF EACH CHOICE FOR YOUR CHILD'S TREATMENT OR HEALTH CARE? [ASKED IF Q57C = YES]
- 62 Q57E IN THE LAST 6 MONTHS, WHEN THERE WAS MORE THAN ONE CHOICE FOR YOUR CHILD'S TREATMENT OR HEALTH CARE, DID YOUR PROVIDER ASK YOU WHICH CHOICE WAS BEST FOR YOUR CHILD? [ASKED IF Q57C = YES]
- 63 Q57F IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PROVIDER CONSIDER AND RESPECT WHAT HEALTH CARE AND TREATMENT CHOICES YOU THOUGHT WORK BEST FOR YOUR CHILD? [ASKED IF Q57C = YES]
- 64 Q57G IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PROVIDER ENCOURAGE YOU TO ASK QUESTIONS AND RAISE CONCERNS? [ASKED IF Q57C = YES]
- 65 Q57H IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PROVIDER MAKE IT EASY FOR YOU TO ASK QUESTIONS AND RAISE CONCERNS? [ASKED IF Q57C = YES]

8. ABOUT YOUR CHILD AND YOU

- 66 Q58 IN GENERAL, HOW WOULD YOU RATE YOUR CHILD'S OVERALL HEALTH?
- 67 Q59 IN GENERAL, HOW WOULD YOU RATE YOUR CHILD'S OVERALL MENTAL OR EMOTIONAL HEALTH?
- 68 Q60 DOES YOUR CHILD CURRENTLY NEED OR USE MEDICINE PRESCRIBED BY A DOCTOR (OTHER THAN VITAMINS)?
- 69 Q61 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q60 = YES]
- 70 Q62 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q60 = YES AND Q61 = YES]
- 71 Q63 DOES YOUR CHILD NEED OR USE MORE MEDICAL CARE, MORE MENTAL HEALTH SERVICES, OR MORE EDUCATIONAL SERVICES THAN IS USUAL FOR MOST CHILDREN OF THE SAME AGE?
- 72 Q64 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q63 = YES]
- 73 Q65 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q63 = YES AND Q64 = YES]
- 74 Q66 IS YOUR CHILD LIMITED OR PREVENTED IN ANY WAY IN HIS OR HER ABILITY TO DO THE THINGS MOST CHILDREN OF THE SAME AGE CAN DO?
- 75 Q67 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q66 = YES]
- 76 Q68 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q66 = YES AND Q67 = YES]
- 77 Q69 DOES YOUR CHILD NEED OR GET SPECIAL THERAPY, SUCH AS PHYSICAL, OCCUPATIONAL, OR SPEECH THERAPY?
- 78 Q70 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q69 = YES]
- 79 Q71 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q69 = YES AND Q70 = YES]
- 80 Q72 DOES YOUR CHILD HAVE ANY KIND OF EMOTIONAL, DEVELOPMENTAL, OR BEHAVIORAL PROBLEMS FOR WHICH HE OR SHE NEEDS OR GETS TREATMENT OR COUNSELING?
- 81 Q73 HAS THIS PROBLEM LASTED OR IS IT EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q72 = YES]
- 82 NQ74 WHAT IS YOUR CHILD'S AGE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
- 83 NQ75 IS YOUR CHILD MALE OR FEMALE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
- 84 Q76 IS YOUR CHILD OF HISPANIC OR LATINO ORIGIN OR DESCENT?

85 Q77.1 WHAT IS YOUR CHILD'S RACE? RESPONSE: WHITE

86 Q77.2 WHAT IS YOUR CHILD'S RACE? RESPONSE: BLACK OR AFRICAN-AMERICAN

87 Q77.3 WHAT IS YOUR CHILD'S RACE? RESPONSE: ASIAN

88 Q77.4 WHAT IS YOUR CHILD'S RACE? RESPONSE: NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER

89 Q77.5 WHAT IS YOUR CHILD'S RACE? RESPONSE: AMERICAN INDIAN OR ALASKA NATIVE

90 Q77.6 WHAT IS YOUR CHILD'S RACE? RESPONSE: OTHER

91 Q78 WHAT IS YOUR AGE?

92 Q79 ARE YOU MALE OR FEMALE?

93 Q80 WHAT IS THE HIGHEST GRADE OR LEVEL OF SCHOOL THAT YOU HAVE COMPLETED?

94 Q81 HOW ARE YOU RELATED TO THE CHILD?

95 Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY? [ASKED IF SURVEY COMPLETED BY MAIL]

96 Q83.1 HOW DID THAT PERSON HELP YOU? RESPONSE: READ THE QUESTIONS TO ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]

97 Q83.2 HOW DID THAT PERSON HELP YOU? RESPONSE: WROTE DOWN THE ANSWERS I GAVE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]

98 Q83.3 HOW DID THAT PERSON HELP YOU? RESPONSE: ANSWERED THE QUESTIONS FOR ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]

99 Q83.4 HOW DID THAT PERSON HELP YOU? RESPONSE: TRANSLATED THE QUESTIONS INTO MY LANGUAGE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]

100 Q83.5 HOW DID THAT PERSON HELP YOU? RESPONSE: HELPED IN SOME OTHER WAY. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]

PAGE QUESTION TITLE

9. RATINGS

101 NQ14 RATING OF ALL CHILD'S HEALTH CARE [ASKED IF Q7 >= 1 TIME]

102 NQ41 RATING OF CHILD'S PERSONAL DOCTOR [ASKED IF Q30 = YES]

103 NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN [ASKED IF Q45 = YES AND Q47 >= 1 SPECIALIST]

104 NQ54 RATING OF CHILD'S HEALTH PLAN

10. COMPOSITES

105 GETTING NEEDED CARE

106 GETTING CARE QUICKLY

107 HOW WELL DOCTORS COMMUNICATE

108 CUSTOMER SERVICE

109 SHARED DECISION MAKING
110 ACCESS TO SPECIALIZED SERVICES

11. GLOBAL PROPORTION COMPOSITES

111 GETTING NEEDED CARE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
112 GETTING CARE QUICKLY (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
113 HOW WELL DOCTORS COMMUNICATE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
114 CUSTOMER SERVICE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
115 SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE
116 ACCESS TO SPECIALIZED SERVICES (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
117 PERSONAL DOCTOR WHO KNOWS CHILD (YES) -- GLOBAL PROPORTION COMPOSITE
118 CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

Your privacy is protected. All information that would let someone identify you or your family will be kept private. The research staff will not share your personal information with anyone without your OK.

You may choose to answer this survey or not. If you choose not to, this will not affect the benefits you get. You may notice a number on the cover of this survey. This number is ONLY used to let us know if you returned the survey so we don't have to send you reminders.

If you want to know more about this study, please call 1-888-506-5136 (or, for the hearing-impaired, call 1-888-631-2097).

SURVEY INSTRUCTIONS

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Correct
Mark 

Incorrect
Marks   

- You are sometimes told to skip over some questions in the survey. When this happens you will see an arrow with a note that tells you what question to answer next, like this:

- Yes → *Go to Question 1*
- No

↓ **START HERE** ↓

1. Our records show that you are now in the Oregon Health Plan. Is that right?

- Yes → *Go to Question 3*
- No

2. What is the name of your health plan? (Please print)

YOUR HEALTH CARE IN THE LAST 6 MONTHS

These questions ask about your own health care. Do **not** include care you got when you stayed overnight in a hospital. Do **not** include the times you went for dental care visits.

3. In the last 6 months, did you have an illness, injury, or condition that **needed care right away** in a clinic, emergency room, or doctor's office?
- Yes
 No → *Go to Question 5*
4. In the last 6 months, when you **needed care right away**, how often did you get care as soon as you needed?
- Never
 Sometimes
 Usually
 Always
5. In the last 6 months, did you make any appointments for a **check-up or routine care** at a doctor's office or clinic?
- Yes
 No → *Go to Question 7*
6. In the last 6 months, how often did you get an appointment for a **check-up or routine care** at a doctor's office or clinic as soon as you needed?
- Never
 Sometimes
 Usually
 Always

7. In the last 6 months, **not** counting the times you went to an emergency room, how many times did you go to a doctor's office or clinic to get health care for yourself?
- None → *Go to Question 15*
 1 time
 2
 3
 4
 5 to 9
 10 or more times
8. In the last 6 months, did you and a doctor or other health provider talk about specific things you could do to prevent illness?
- Yes
 No
9. In the last 6 months, did you and a doctor or other health provider talk about starting or stopping a prescription medicine?
- Yes
 No → *Go to Question 13*
10. Did you and a doctor or other health provider talk about the reasons you might want to take a medicine?
- Yes
 No
11. Did you and a doctor or other health provider talk about the reasons you might **not** want to take a medicine?
- Yes
 No
12. When you talked about starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for you?
- Yes
 No

13. Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care in the last 6 months?

- 0 1 2 3 4 5 6 7 8 9 10
- Worst Health Care Possible Best Health Care Possible

14. In the last 6 months, how often was it easy to get the care, tests, or treatment you needed?

- Never
 Sometimes
 Usually
 Always

YOUR PERSONAL DOCTOR

15. A personal doctor is the one you would see if you need a check-up, want advice about a health problem, or get sick or hurt. Do you have a personal doctor?

- Yes
 No → *Go to Question 24*

16. In the last 6 months, how many times did you visit your personal doctor to get care for yourself?

- None → *Go to Question 23*
 1 time
 2
 3
 4
 5 to 9
 10 or more times

17. In the last 6 months, how often did your personal doctor explain things in a way that was easy to understand?

- Never
 Sometimes
 Usually
 Always

18. In the last 6 months, how often did your personal doctor listen carefully to you?

- Never
 Sometimes
 Usually
 Always

19. In the last 6 months, how often did your personal doctor show respect for what you had to say?

- Never
 Sometimes
 Usually
 Always

20. In the last 6 months, how often did your personal doctor spend enough time with you?

- Never
 Sometimes
 Usually
 Always

21. In the last 6 months, did you get care from a doctor or other health provider besides your personal doctor?

- Yes
 No → *Go to Question 23*

22. In the last 6 months, how often did your personal doctor seem informed and up-to-date about the care you got from these doctors or other health providers?

- Never
 Sometimes
 Usually
 Always

23. Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?

- 0 1 2 3 4 5 6 7 8 9 10
- Worst Personal Doctor Possible Best Personal Doctor Possible



GETTING HEALTH CARE FROM SPECIALISTS

When you answer the next questions, do **not** include dental visits or care you got when you stayed overnight in a hospital.

24. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.

In the last 6 months, did you make any appointments to see a specialist?

- Yes
 No → *Go to Question 28*

25. In the last 6 months, how often did you get an appointment to see a specialist as soon as you needed?

- Never
 Sometimes
 Usually
 Always

26. How many specialists have you seen in the last 6 months?

- None → *Go to Question 28*
 1 specialist
 2
 3
 4
 5 or more specialists

27. We want to know your rating of the specialist you saw most often in the last 6 months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

- 0 1 2 3 4 5 6 7 8 9 10
Worst Specialist Possible Best Specialist Possible

YOUR HEALTH PLAN

The next questions ask about your experience with your health plan.

28. In the last 6 months, did you look for any information in written materials or on the Internet about how your health plan works?

- Yes
 No → *Go to Question 30*

29. In the last 6 months, how often did the written materials or the Internet provide the information you needed about how your health plan works?

- Never
 Sometimes
 Usually
 Always

30. In the last 6 months, did you get information or help from your health plan's customer service?

- Yes
 No → *Go to Question 33*

31. In the last 6 months, how often did your health plan's customer service give you the information or help you needed?

- Never
 Sometimes
 Usually
 Always

32. In the last 6 months, how often did your health plan's customer service staff treat you with courtesy and respect?

- Never
 Sometimes
 Usually
 Always

33. In the last 6 months, did your health plan give you any forms to fill out?

- Yes
 No → *Go to Question 35*

34. In the last 6 months, how often were the forms from your health plan easy to fill out?

- Never
- Sometimes
- Usually
- Always

35. Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your health plan?

- 0 1 2 3 4 5 6 7 8 9 10
- Worst Health Plan Possible Best Health Plan Possible

35a. In the last 6 months, did you have a health problem for which you needed special medical equipment, such as a cane, a wheelchair, or oxygen equipment?

- Yes
- No → **Go to Question 35c**

35b. In the last 6 months, how often was it easy to get the medical equipment you needed through your health plan?

- Never
- Sometimes
- Usually
- Always

35c. In the last 6 months, did you have any health problems that needed special therapy, such as physical, occupational, or speech therapy?

- Yes
- No → **Go to Question 35e**

35d. In the last 6 months, how often was it easy to get the special therapy you needed through your health plan?

- Never
- Sometimes
- Usually
- Always

ADDITIONAL QUESTIONS

A health provider could be a general doctor, a specialist doctor, a nurse practitioner, a physician assistant, a nurse or anyone else you would see for health care.

35e. In the last 6 months, did you visit a provider for a specific health issue?

- Yes
- No → **Go to Question 35i**

35f. How much effort was made to help you understand your health issue?

- No effort at all
- A little effort was made
- Some effort was made
- A lot of effort was made

35g. How much effort was made to listen to the things that matter most to you about your health issue?

- No effort at all
- A little effort was made
- Some effort was made
- A lot of effort was made

35h. How much effort was made to include what matters most to you in choosing what to do next?

- No effort at all
- A little effort was made
- Some effort was made
- A lot of effort was made

35i. Choices for your treatment or health care can include choices about medicine, surgery, or other treatment.

In the last 6 months, did this provider tell you there was more than one choice for your treatment or health care?

- Yes
- No → **Go to Question 35l**



35j. In the last 6 months, did your provider talk with you about the pros and cons of each choice for your treatment or health care?

- Yes
- No

35k. In the last 6 months, when there was more than one choice for your treatment or health care, did your provider ask you which choice was best for you?

- Yes
- No

35l. In the last 6 months, how often did your provider make it easy for you to ask questions or raise concerns?

- Never
- Sometimes
- Usually
- Always

The following questions ask about how much you think your doctor or other health provider respects your beliefs, attitudes, language and behavior.

35m. In the last 6 months, how often did a doctor or other health provider talk too fast when talking to you?

- Never
- Sometimes
- Usually
- Always

35n. In the last 6 months, how often did a doctor or other health provider interrupt you when you were talking?

- Never
- Sometimes
- Usually
- Always

35o. In the last 6 months, how often did a doctor or other health provider use a condescending, sarcastic or rude tone or manner with you?

- Never
- Sometimes
- Usually
- Always

35p. In the last 6 months, did you feel you could trust a doctor or other health provider with your medical care?

- Yes, definitely
- Yes, somewhat
- No

ACCESS TO DENTAL CARE

35q. A regular dentist is one you would go to for check-ups and cleanings or when you have a cavity or tooth pain. Do you have a regular dentist?

- Yes
- No

35r. In the last 6 months, if you needed to see a dentist right away because of a dental emergency, did you get to see a dentist as soon as you wanted?

- Never
- Sometimes
- Usually
- Always
- I did not have a dental emergency in the last 6 months

ABOUT YOU

36. In general, how would you rate your overall health?

- Excellent
- Very Good
- Good
- Fair
- Poor

37. In general, how would you rate your overall mental or emotional health?
- Excellent
 - Very Good
 - Good
 - Fair
 - Poor
38. Have you had either a flu shot or flu spray in the nose since July 1, 2014?
- Yes
 - No
 - Don't know
39. Do you now smoke cigarettes or use tobacco every day, some days, or not at all?
- Every day
 - Some days
 - Not at all → *Go to Question 43*
 - Don't know → *Go to Question 43*
40. In the last 6 months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan?
- Never
 - Sometimes
 - Usually
 - Always
41. In the last 6 months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication.
- Never
 - Sometimes
 - Usually
 - Always

42. In the last 6 months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program.
- Never
 - Sometimes
 - Usually
 - Always
43. Do you take aspirin daily or every other day?
- Yes
 - No
 - Don't know
44. Do you have a health problem or take medication that makes taking aspirin unsafe for you?
- Yes
 - No
 - Don't know
45. Has a doctor or health provider ever discussed with you the risks and benefits of aspirin to prevent heart attack or stroke?
- Yes
 - No
46. Are you aware that you have any of the following conditions? Mark all that apply.
- High cholesterol
 - High blood pressure
 - Parent or sibling with heart attack before the age of 60
47. Has a doctor ever told you that you have any of the following conditions? Mark all that apply.
- A heart attack
 - Angina or coronary heart disease
 - A stroke
 - Any kind of diabetes or high blood sugar

48. In the last 6 months, did you get health care 3 or more times for the same condition or problem?

- Yes
- No → **Go to Question 50**

49. Is this a condition or problem that has lasted for at least 3 months? Do **not** include pregnancy or menopause.

- Yes
- No

50. Do you now need or take medicine prescribed by a doctor? Do **not** include birth control.

- Yes
- No → **Go to Question 52**

51. Is this medicine to treat a condition that has lasted for at least 3 months? Do **not** include pregnancy or menopause.

- Yes
- No

52. What is your age?

- 18 to 24
- 25 to 34
- 35 to 44
- 45 to 54
- 55 to 64
- 65 to 74
- 75 or older

53. Are you male or female?

- Male
- Female

54. What is the highest grade or level of school that you have completed?

- 8th grade or less
- Some high school, but did not graduate
- High school graduate or GED
- Some college or 2-year degree
- 4-year college graduate
- More than 4-year college degree

55. Are you of Hispanic or Latino origin or descent?

- Yes, Hispanic or Latino
- No, Not Hispanic or Latino

56. What is your race? Mark one or more.

- White
 - Black or African-American
 - Asian
 - Native Hawaiian or other Pacific Islander
 - American Indian or Alaska Native
 - Other (Please print)
-

57. Did someone help you complete this survey?

- Yes → **Go to Question 58**
- No → **Thank you. Please return the completed survey in the postage-paid envelope.**

58. How did that person help you? Mark one or more.

- Read the questions to me
 - Wrote down the answers I gave
 - Answered the questions for me
 - Translated the questions into my language
 - Helped in some other way (Please print)
-

THANK YOU

Thanks again for taking the time to complete this survey! Your answers are greatly appreciated.

When you are done, please use the enclosed prepaid envelope to mail the survey to:

DataStat, 3975 Research Park Drive, Ann Arbor, MI 48108



Your privacy is protected. All information that would let someone identify you or your family will be kept private. The research staff will not share your personal information with anyone without your OK.

You may choose to answer this survey or not. If you choose not to, this will not affect the benefits you get. You may notice a number on the cover of this survey. This number is **ONLY** used to let us know if you returned the survey so we don't have to send you reminders.

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Correct
Mark 

Incorrect
Marks   

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- Yes ➔ *Go to Question 1*
- No

↓ **START HERE** ↓

Please answer the questions for the child listed on the envelope. Please do not answer for any other children.

1. Our records show that your child is now in the Oregon Health Plan. Is that right?
 - Yes ➔ *Go to Question 3*
 - No
2. What is the name of your child's health plan? (Please print)

**YOUR CHILD'S HEALTH CARE
IN THE LAST 6 MONTHS**

These questions ask about your child's health care. Do not include care your child got when he or she stayed overnight in a hospital. Do not include the times your child went for dental care visits.

- 3. In the last 6 months, did your child have an illness, injury, or condition that needed care right away in a clinic, emergency room, or doctor's office?
 - Yes
 - No → *Go to Question 5*

- 4. In the last 6 months, when your child needed care right away, how often did your child get care as soon as he or she needed?
 - Never
 - Sometimes
 - Usually
 - Always

- 5. In the last 6 months, did you make any appointments for a check-up or routine care for your child at a doctor's office or clinic?
 - Yes
 - No → *Go to Question 7*

- 6. In the last 6 months, when you made an appointment for a check-up or routine care for your child at a doctor's office or clinic, how often did you get an appointment as soon as your child needed?
 - Never
 - Sometimes
 - Usually
 - Always

- 7. In the last 6 months, not counting the times your child went to an emergency room, how many times did he or she go to a doctor's office or clinic to get health care?
 - None → *Go to Question 16*
 - 1 time
 - 2
 - 3
 - 4
 - 5 to 9
 - 10 or more times

- 8. In the last 6 months, did you and your child's doctor or other health provider talk about specific things you could do to prevent illness in your child?
 - Yes
 - No

- 9. In the last 6 months, how often did you have your questions answered by your child's doctors or other health providers?
 - Never
 - Sometimes
 - Usually
 - Always

- 10. In the last 6 months, did you and your child's doctor or other health provider talk about starting or stopping a prescription medicine for your child?
 - Yes
 - No → *Go to Question 14*

- 11. Did you and a doctor or other health provider talk about the reasons you might want your child to take a medicine?
 - Yes
 - No



12. Did you and a doctor or other health provider talk about the reasons you might not want your child to take a medicine?

- Yes
- No

13. When you talked about your child starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for your child?

- Yes
- No

14. Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your child's health care in the last 6 months?

-
- 0 1 2 3 4 5 6 7 8 9 10
- Worst Health Care Possible Best Health Care Possible

15. In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed?

- Never
- Sometimes
- Usually
- Always

16. Is your child now enrolled in any kind of school or daycare?

- Yes
- No → *Go to Question 19*

17. In the last 6 months, did you need your child's doctor or other health provider to contact a school or daycare center about your child's health or health care?

- Yes
- No → *Go to Question 19*

18. In the last 6 months, did you get the help you needed from your child's doctor or other health provider in contacting your child's school or daycare?

- Yes
- No

SPECIALIZED SERVICES

19. Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment.

In the last 6 months, did you get or try to get any special medical equipment or devices for your child?

- Yes
- No → *Go to Question 22*

20. In the last 6 months, how often was it easy to get special medical equipment or devices for your child?

- Never
- Sometimes
- Usually
- Always

21. Did anyone from your child's health plan, doctor's office, or clinic help you get special medical equipment or devices for your child?

- Yes
- No

22. In the last 6 months, did you get or try to get special therapy such as physical, occupational, or speech therapy for your child?

- Yes
- No → *Go to Question 25*



23. In the last 6 months, how often was it easy to get this therapy for your child?

- Never
- Sometimes
- Usually
- Always

24. Did anyone from your child's health plan, doctor's office, or clinic help you get this therapy for your child?

- Yes
- No

25. In the last 6 months, did you get or try to get treatment or counseling for your child for an emotional, developmental, or behavioral problem?

- Yes
- No → *Go to Question 28*

26. In the last 6 months, how often was it easy to get this treatment or counseling for your child?

- Never
- Sometimes
- Usually
- Always

27. Did anyone from your child's health plan, doctor's office, or clinic help you get this treatment or counseling for your child?

- Yes
- No

28. In the last 6 months, did your child get care from more than one kind of health care provider or use more than one kind of health care service?

- Yes
- No → *Go to Question 30*

29. In the last 6 months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these different providers or services?

- Yes
- No

YOUR CHILD'S PERSONAL DOCTOR

30. A personal doctor is the one your child would see if he or she needs a checkup, has a health problem or gets sick or hurt. Does your child have a personal doctor?

- Yes
- No → *Go to Question 45*

31. In the last 6 months, how many times did your child visit his or her personal doctor for care?

- None → *Go to Question 41*
- 1 time
- 2
- 3
- 4
- 5 to 9
- 10 or more times

31a. In the last 6 months, how often did you have a hard time speaking with or understanding your child's personal doctor because you spoke different languages?

- Never
- Sometimes
- Usually
- Always

32. In the last 6 months, how often did your child's personal doctor explain things about your child's health in a way that was easy to understand?

- Never
- Sometimes
- Usually
- Always

33. In the last 6 months, how often did your child's personal doctor listen carefully to you?

- Never
- Sometimes
- Usually
- Always

34. In the last 6 months, how often did your child's personal doctor show respect for what you had to say?

- Never
- Sometimes
- Usually
- Always

35. Is your child able to talk with doctors about his or her health care?

- Yes
- No → *Go to Question 37*

36. In the last 6 months, how often did your child's personal doctor explain things in a way that was easy for your child to understand?

- Never
- Sometimes
- Usually
- Always

37. In the last 6 months, how often did your child's personal doctor spend enough time with your child?

- Never
- Sometimes
- Usually
- Always

38. In the last 6 months, did your child's personal doctor talk with you about how your child is feeling, growing, or behaving?

- Yes
- No

39. In the last 6 months, did your child get care from a doctor or other health provider besides his or her personal doctor?

- Yes
- No → *Go to Question 41*

40. In the last 6 months, how often did your child's personal doctor seem informed and up-to-date about the care your child got from these doctors or other health providers?

- Never
- Sometimes
- Usually
- Always

41. Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your child's personal doctor?

-
- 0 1 2 3 4 5 6 7 8 9 10
- Worst Personal Doctor Possible Best Personal Doctor Possible

42. Does your child have any medical, behavioral, or other health conditions that have lasted for more than 3 months?

- Yes
- No → *Go to Question 45*



43. Does your child's personal doctor understand how these medical, behavioral, or other health conditions affect your child's day-to-day life?

- Yes
- No

44. Does your child's personal doctor understand how your child's medical, behavioral, or other health conditions affect your family's day-to-day life?

- Yes
- No

47. How many specialists has your child seen in the last 6 months?

- None → **Go to Question 49**
- 1 specialist
- 2
- 3
- 4
- 5 or more specialists

48. We want to know your rating of the specialist your child saw most often in the last 6 months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

- | | | | | | | | | | | |
|---------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--------------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| Worst Specialist Possible | | | | | | Best Specialist Possible | | | | |

GETTING HEALTH CARE FROM SPECIALISTS

When you answer the next questions, do not include dental visits or care your child got when he or she stayed overnight in a hospital.

45. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.

In the last 6 months, did you make any appointments for your child to see a specialist?

- Yes
- No → **Go to Question 49**

46. In the last 6 months, how often did you get an appointment for your child to see a specialist as soon as you needed?

- Never
- Sometimes
- Usually
- Always

YOUR CHILD'S HEALTH PLAN

The next questions ask about your experience with your child's health plan.

49. In the last 6 months, did you get information or help from customer service at your child's health plan?

- Yes
- No → **Go to Question 52**

50. In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed?

- Never
- Sometimes
- Usually
- Always



51. In the last 6 months, how often did customer service staff at your child's health plan treat you with courtesy and respect?

- Never
- Sometimes
- Usually
- Always

52. In the last 6 months, did your child's health plan give you any forms to fill out?

- Yes
- No → **Go to Question 54**

53. In the last 6 months, how often were the forms from your child's health plan easy to fill out?

- Never
- Sometimes
- Usually
- Always

54. Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your child's health plan?

- 0 1 2 3 4 5 6 7 8 9 10
 Worst Health Best Health
 Plan Possible Plan Possible

PRESCRIPTION MEDICINES

55. In the last 6 months, did you get or refill any prescription medicines for your child?

- Yes
- No → **Go to Question 57a**

56. In the last 6 months, how often was it easy to get prescription medicines for your child through his or her health plan?

- Never
- Sometimes
- Usually
- Always

57. Did anyone from your child's health plan, doctor's office, or clinic help you get your child's prescription medicines?

- Yes
- No

ACCESS TO DENTAL CARE

57a. A regular dentist is one your child would go to for check-ups and cleanings or when he/she has a cavity or tooth pain. Does your child have a regular dentist?

- Yes
- No

57b. In the last 6 months, if your child needed to see a dentist right away because of a dental emergency, did he/she get to see a dentist as soon as you wanted?

- Never
- Sometimes
- Usually
- Always
- My child did not have a dental emergency in the last 6 months



ADDITIONAL QUESTIONS

57c. Choices for your child's treatment or health care can include choices about medicine, surgery, or other treatment. In the last 6 months, did your provider tell you there was more than one choice for your child's treatment or health care?

- Yes
- No → *Go to Question 58*

57d. In the last 6 months, did your provider talk with you about the pros and cons of each choice for your child's treatment or health care?

- Yes
- No

57e. In the last 6 months, when there was more than one choice for your child's treatment or health care, did your provider ask you which choice was best for your child?

- Yes
- No

57f. In the last 6 months, how often did your provider consider and respect what health care and treatment choices you thought work best for your child?

- Never
- Sometimes
- Usually
- Always

57g. In the last 6 months, how often did your child's provider encourage you to ask questions and raise concerns?

- Never
- Sometimes
- Usually
- Always

57h. In the last 6 months, how often did your child's provider make it easy for you to ask questions and raise concerns?

- Never
- Sometimes
- Usually
- Always

ABOUT YOUR CHILD AND YOU

58. In general, how would you rate your child's overall health?

- Excellent
- Very good
- Good
- Fair
- Poor

59. In general, how would you rate your child's overall mental or emotional health?

- Excellent
- Very good
- Good
- Fair
- Poor

60. Does your child currently need or use medicine prescribed by a doctor (other than vitamins)?

- Yes
- No → *Go to Question 63*

61. Is this because of any medical, behavioral, or other health condition?

- Yes
- No → *Go to Question 63*

62. Is this a condition that has lasted or is expected to last for at least 12 months?

- Yes
- No

63. Does your child need or use more medical care, more mental health services, or more educational services than is usual for most children of the same age?
- Yes
 No → **Go to Question 66**
64. Is this because of any medical, behavioral, or other health condition?
- Yes
 No → **Go to Question 66**
65. Is this a condition that has lasted or is expected to last for at least 12 months?
- Yes
 No
66. Is your child limited or prevented in any way in his or her ability to do the things most children of the same age can do?
- Yes
 No → **Go to Question 69**
67. Is this because of any medical, behavioral, or other health condition?
- Yes
 No → **Go to Question 69**
68. Is this a condition that has lasted or is expected to last for at least 12 months?
- Yes
 No
69. Does your child need or get special therapy such as physical, occupational, or speech therapy?
- Yes
 No → **Go to Question 72**

70. Is this because of any medical, behavioral, or other health condition?
- Yes
 No → **Go to Question 72**
71. Is this a condition that has lasted or is expected to last for at least 12 months?
- Yes
 No
72. Does your child have any kind of emotional, developmental, or behavioral problem for which he or she needs or gets treatment or counseling?
- Yes
 No → **Go to Question 74**
73. Has this problem lasted or is it expected to last for at least 12 months?
- Yes
 No
74. What is your child's age?
- Less than 1 year old
- YEARS OLD (write in)
75. Is your child male or female?
- Male
 Female
76. Is your child of Hispanic or Latino origin or descent?
- Yes, Hispanic or Latino
 No, Not Hispanic or Latino



77. What is your child's race? Mark one or more.

- White
- Black or African-American
- Asian
- Native Hawaiian or other Pacific Islander
- American Indian or Alaska Native
- Other (Please print)

78. What is your age?

- Under 18
- 18 to 24
- 25 to 34
- 35 to 44
- 45 to 54
- 55 to 64
- 65 to 74
- 75 or older

79. Are you male or female?

- Male
- Female

80. What is the highest grade or level of school that you have completed?

- 8th grade or less
- Some high school, but did not graduate
- High school graduate or GED
- Some college or 2-year degree
- 4-year college graduate
- More than 4-year college degree

81. How are you related to the child?

- Mother or father
- Grandparent
- Aunt or uncle
- Older brother or sister
- Other relative
- Legal guardian
- Someone else

82. Did someone help you complete this survey?

- Yes → **Go to Question 83**
- No → **Thank you. Please return the completed survey in the postage-paid envelope.**

83. How did that person help you? Mark one or more.

- Read the questions to me
- Wrote down the answers I gave
- Answered the questions for me
- Translated the questions into my language
- Helped in some other way (Please print)

THANK YOU

Thanks again for taking the time to complete this survey! Your answers are greatly appreciated.

When you are done, please use the enclosed prepaid envelope to mail the survey to:

DataStat, 3975 Research Park Drive, Ann Arbor, MI 48108





Sus respuestas a esta encuesta son completamente confidenciales. Toda información que pueda identificarle a usted o a su familia se mantendrá privada. DataStat, Inc. no divulgará su información personal sin su permiso.

Usted puede elegir si quiere contestar este cuestionario o no. Si decide no participar, esto no afectará los beneficios que usted recibe. El número en la cubierta de este cuestionario sirve para saber que ya envió su respuesta y que no hay que enviarle recordatorios.

Si quiere recibir más información acerca de este estudio, llame al 1-888-506-5136.

INSTRUCCIONES PARA EL CUESTIONARIO

- Por favor llene el círculo de su respuesta completamente. Use solamente tinta NEGRA o AZUL o un lápiz oscuro para completar la encuesta.

Marca
Correcta 

Marca
Incorrecta   

- A veces hay que saltarse alguna pregunta del cuestionario. Cuando esto ocurra, verá una flecha con una nota que le indicará cuál es la siguiente pregunta a la que tiene que pasar. Por ejemplo:

Sí ➔ *Pase a la Pregunta 1*
 No

↓ **COMIENCE AQUI** ↓

1. Nuestros registros muestran que usted está ahora con Oregon Health Plan. ¿Es correcta esta información?

- Sí ➔ *Pase a la pregunta 3*
- No

2. ¿Cómo se llama su plan de salud? (Por favor escriba en letra de molde)

LA ATENCIÓN MÉDICA QUE USTED RECIBIÓ EN LOS ÚLTIMOS 6 MESES

Estas preguntas son acerca de la atención médica que usted ha recibido. **No** incluya la atención que recibió cuando pasó la noche hospitalizado. **No** incluya las consultas al dentista.

3. En los últimos 6 meses, ¿tuvo usted una enfermedad, lesión, o problema de salud para el cual necesitó atención inmediata en una clínica, en una sala de emergencia o en un consultorio médico?

Sí
 No → *Pase a la pregunta 5*

4. En los últimos 6 meses, cuando usted necesitó atención inmediata, ¿con qué frecuencia lo atendieron tan pronto como lo necesitaba?

Nunca
 A veces
 La mayoría de las veces
 Siempre

5. En los últimos 6 meses, ¿hizo alguna cita para un chequeo o una consulta regular en un consultorio médico o en una clínica?

Sí
 No → *Pase a la pregunta 7*

6. En los últimos 6 meses, ¿con qué frecuencia consiguió una cita para un chequeo o una consulta regular en un consultorio médico o en una clínica tan pronto como la necesitaba?

Nunca
 A veces
 La mayoría de las veces
 Siempre

7. En los últimos 6 meses, sin contar las veces en que fue a una sala de emergencia, ¿cuántas veces fue a un consultorio médico o a una clínica para recibir atención médica para usted mismo?

Ninguna vez → *Pase a la pregunta 15*
 1 vez
 2
 3
 4
 5 a 9
 10 veces o más

8. En los últimos 6 meses, ¿hablaron usted y un doctor u otro profesional médico sobre cosas específicas que usted podría hacer para prevenir enfermedades?

Sí
 No

9. En los últimos 6 meses, ¿hablaron usted y un doctor u otro profesional médico sobre comenzar o suspender una medicina recetada?

Sí
 No → *Pase a la pregunta 13*

10. ¿Hablaron usted y un doctor u otro profesional médico sobre las razones por las que tal vez quiera tomar una medicina?

Sí
 No

11. ¿Hablaron usted y un doctor u otro profesional médico sobre las razones por las que tal vez no quiera tomar una medicina?

Sí
 No

35a. En los últimos 6 meses, ¿tuvo usted un problema de salud para el cuál necesitó equipo especial tal como un bastón, silla de rueda, o equipo de oxígeno?

- Sí
- No → *Pase a la pregunta 35c*

35b. En los últimos 6 meses, ¿con qué frecuencia fue fácil para usted conseguir el equipo médico que usted necesitaba a través de su plan de salud?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

35c. En los últimos 6 meses, ¿tuvo usted un problema de salud para el cuál necesitó terapia especial, tal como terapia física, ocupacional o terapia del habla?

- Sí
- No → *Pase a la pregunta 35e*

35d. En los últimos 6 meses, ¿con qué frecuencia fue fácil para usted conseguir la terapia especial que usted necesitaba a través de su plan de salud?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

PREGUNTAS ADICIONALES

Un proveedor de salud puede ser un doctor generalista, un doctor especialista, una enfermera practicante, un asistente médico, una enfermera o cualquiera que usted vería para cuidado de salud.

35e. En los últimos 6 meses, ¿visitó usted a un profesional médico para un problema de salud específico?

- Sí
- No → *Pase a la pregunta 35i*

35f. ¿Cuánto esfuerzo se hizo para ayudarlo/a a entender su problema de salud?

- Ningún esfuerzo en absoluto
- Se hizo un poco de esfuerzo
- Se hizo algún esfuerzo
- Se hizo un gran esfuerzo

35g. ¿Cuánto esfuerzo se hizo para escuchar las cosas que más le importan a usted sobre su problema de salud?

- Ningún esfuerzo en absoluto
- Se hizo un poco de esfuerzo
- Se hizo algún esfuerzo
- Se hizo un gran esfuerzo

35h. ¿Cuánto esfuerzo se hizo para incluir lo que más le importa a usted en escoger que hacer próximamente?

- Ningún esfuerzo en absoluto
- Se hizo un poco de esfuerzo
- Se hizo algún esfuerzo
- Se hizo un gran esfuerzo

35i. Opciones para su tratamiento o atención médica pueden ser opciones sobre medicinas, cirugías u otros tratamientos. En los últimos 6 meses, ¿le dijo este profesional médico que había más de una opción para su tratamiento o atención médica?

- Sí
- No → *Pase a la pregunta 35l*

35j. En los últimos 6 meses, ¿habló su profesional médico con usted acerca de las ventajas y desventajas de cada opción de tratamiento o atención médica?

- Sí
- No

35k. En los últimos 6 meses, cuando había más de una opción de tratamiento o atención médica, ¿su profesional médico le preguntó cuál opción le convenía más a usted?

- Sí
- No

35l. En los últimos 6 meses, ¿con qué frecuencia le hizo fácil su profesional médico el hacer preguntas o plantear inquietudes?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

Las siguientes preguntas son sobre cuánto usted piensa que su doctor u otro proveedor de salud respeta sus creencias, actitudes, lenguaje y comportamiento.

35m. En los últimos 6 meses, ¿con qué frecuencia un doctor u otro proveedor de salud habló muy rápido cuando le habló usted?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

35n. En los últimos 6 meses, ¿con qué frecuencia un doctor u otro proveedor de salud le interrumpió cuando usted estaba hablando?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

35o. En los últimos 6 meses, ¿con qué frecuencia un doctor u otro proveedor de salud uso un tono condesendiente, sarcástico o grosero con usted?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

35p. En los últimos 6 meses, ¿sintió usted que podría confiar en el doctor u otro proveedor de salud con su cuidado médico?

- Sí, definitivamente
- Sí, algo
- No

ACCESO A CUIDADO DENTAL

35q. Un dentista regular es a quien usted va a ver para un chequeo y limpieza o tiene una carie o un dolor de diente. ¿Usted tiene un dentista regular?

- Sí
- No

35r. En los últimos 6 meses, si usted necesitó ver a un dentista de inmediato por una emergencia dental, ¿pudo ver usted a un dentista tan pronto como quería?

- Nunca
- A veces
- La mayoría de las veces
- Siempre
- Yo no tuve una emergencia dental en los últimos 6 meses

ACERCA DE USTED

36. En general, ¿cómo calificaría toda su salud?

- Excelente
- Muy buena
- Buena
- Regular
- Mala

37. En general, ¿cómo calificaría toda su salud mental o emocional?

- Excelente
- Muy buena
- Buena
- Regular
- Mala

38. Desde el 1 de julio del 2014, ¿le han puesto la vacuna para la influenza o gripe ya sea en inyección o con un rociador o spray nasal?

- Sí
- No
- No sé

39. Actualmente, ¿fuma cigarrillos o usa tabaco todos los días, algunos días o nunca?

- Todos los días
- Algunos días
- No fumo en absoluto → **Pase a la pregunta 43**
- No sé → **Pase a la pregunta 43**

40. En los últimos 6 meses, ¿qué tan seguido le aconsejó un doctor u otro profesional médico de su seguro que dejara de fumar o usar tabaco?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

41. En los últimos 6 meses, ¿qué tan seguido le recomendó, o habló un doctor o profesional médico sobre medicamentos para ayudarlo(a) a dejar de fumar o usar tabaco? Ejemplos de medicamentos son: chicle o goma de mascar con nicotina, parche, rociador o aerosol nasal, inhalador o medicamentos con receta.

- Nunca
- A veces
- La mayoría de las veces
- Siempre

42. En los últimos 6 meses, ¿qué tan seguido le ofreció o habló con su doctor o profesional médico sobre métodos y estrategias, aparte de medicamentos, para ayudarlo(a) a dejar de fumar o usar tabaco? Ejemplos de métodos y estrategias son: una línea telefónica de ayuda, consejería individual o terapia de grupo o un programa para dejar de fumar.
- Nunca
 - A veces
 - La mayoría de las veces
 - Siempre
43. ¿Toma aspirina todos los días o un día sí y otro día no?
- Sí
 - No
 - No sé
44. ¿Tiene algún problema de salud o toma algún medicamento que hace que sea peligroso para usted tomar aspirina?
- Sí
 - No
 - No sé
45. ¿Ha hablado alguna vez un doctor o profesional médico con usted acerca de los riesgos y beneficios de la aspirina para prevenir un infarto o un derrame cerebral?
- Sí
 - No

46. Que usted sepa, ¿tiene alguna de las siguientes enfermedades? Marque una o más.
- Colesterol alto
 - Presión sanguínea alta (hipertensión arterial)
 - Padres o hermanos que hayan tenido un infarto antes de los 60 años
47. ¿Alguna vez le ha dicho un doctor que usted tiene alguna de las siguientes enfermedades? Marque una o más.
- Un infarto
 - Angina de pecho o cardiopatía coronaria
 - Un derrame cerebral
 - Algún tipo de diabetes o niveles altos de azúcar en la sangre
48. En los últimos 6 meses, ¿recibió usted atención médica 3 veces o más para la misma enfermedad o problema?
- Sí
 - No → *Pase a la pregunta 50*
49. ¿Se trata de una enfermedad o problema que ha durado al menos 3 meses? No incluya el embarazo ni la menopausia.
- Sí
 - No
50. ¿Necesita o toma ahora alguna medicina recetada por un doctor? No incluya anticonceptivos.
- Sí
 - No → *Pase a la pregunta 52*

51. ¿Es esta medicina para tratar una enfermedad o problema que ha durado al menos 3 meses? **No** incluya el embarazo ni la menopausia.

- Sí
- No

52. ¿Qué edad tiene?

- 18 a 24 años
- 25 a 34
- 35 a 44
- 45 a 54
- 55 a 64
- 65 a 74
- 75 años o más

53. ¿Es usted hombre o mujer?

- Hombre
- Mujer

54. ¿Cuál es el grado o nivel escolar más alto que usted ha completado?

- 8 años de escuela o menos
- 9 a 12 años de escuela, pero sin graduarse
- Graduado de la escuela secundaria (high school), Diploma de escuela secundaria, preparatoria, o su equivalente (o GED)
- Algunos cursos universitarios o un título universitario de un programa de 2 años
- Título universitario de 4 años
- Título universitario de más de 4 años

55. ¿Es usted de origen o ascendencia hispana o latina?

- Sí, hispano o latino
- No, ni hispano ni latino

56. ¿A qué raza pertenece? Marque una o más.

- Blanca
 - Negra o afroamericana
 - Asiática
 - Nativo de Hawái o de otras islas del Pacífico
 - Indígena americano o nativo de Alaska
 - Otra (Por favor escriba en letra de molde)
-

57. ¿Le ayudó alguien a completar esta encuesta?

- Sí → **Pase a la pregunta 58**
- No → **Gracias. Por favor devuelva esta encuesta en el sobre con el porte o franqueo pagado.**

58. ¿Cómo le ayudó a usted esta persona? Marque una o más.

- Me leyó las preguntas
 - Anotó las respuestas que le di
 - Contestó las preguntas por mí
 - Tradujo las preguntas a mi idioma
 - Me ayudó de otra forma (Por favor escriba en letra de molde)
-

Gracias nuevamente por tomar el tiempo de completar el cuestionario! Sus respuestas son sumamente apreciadas.

Cuando haya terminado, por favor envíe la encuesta en el sobre con el porte pagado a:

DataStat, 3975 Research Park Dr, Ann Arbor, MI 48108





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Usted puede elegir si quiere contestar este cuestionario o no. Si decide no participar, esto no afectará los beneficios que usted recibe. El número en la cubierta de este cuestionario sirve para saber que ya envió su respuesta y que no hay que enviarle recordatorios.

Si quiere recibir más información acerca de este estudio, llame al 1-888-506-5136.

INSTRUCCIONES PARA EL CUESTIONARIO

- Por favor llene el círculo de su respuesta completamente. Use solamente tinta NEGRA o AZUL o un lápiz oscuro para completar la encuesta.

Marca
Correcta



Marca
Incorrecta



- A veces hay que saltarse alguna pregunta del cuestionario. Cuando esto ocurra, verá una flecha con una nota que le indicará cuál es la siguiente pregunta a la que tiene que pasar. Por ejemplo:

- Sí → *Pase a la Pregunta 1*
- No



COMIENCE AQUI



Por favor conteste las preguntas para el niño cuyo nombre está anotado en el sobre. No las conteste para ningún otro niño.

1. Nuestros registros muestran que su niño está ahora con Oregon Health Plan. ¿Es correcta esta información?

- Sí → *Pase a la pregunta 3*
- No

2. ¿Cómo se llama el plan de salud de su niño? (Por favor escriba en letra de molde)

**LA ATENCIÓN MÉDICA QUE
RECIBIÓ
SU NIÑO EN LOS ÚLTIMOS 6 MESES**

Estas preguntas son acerca de la atención médica que ha recibido su niño. **No** incluya la atención que recibió su niño cuando pasó la noche hospitalizado. **No** incluya las consultas de su niño con el dentista.

3. En los últimos 6 meses, ¿tuvo su niño una enfermedad, lesión, o problema de salud para el cual necesitó atención inmediata en una clínica, en una sala de emergencia o en un consultorio médico?

Sí
 No → *Pase a la pregunta 5*

4. En los últimos 6 meses, cuando su niño necesitó atención inmediata, ¿con qué frecuencia atendieron a su niño tan pronto como él o ella lo necesitaba?

Nunca
 A veces
 La mayoría de las veces
 Siempre

5. En los últimos 6 meses, ¿hizo alguna cita para un chequeo o una consulta regular para su niño en un consultorio médico o en una clínica?

Sí
 No → *Pase a la pregunta 7*

6. En los últimos 6 meses, ¿con qué frecuencia consiguió una cita para un chequeo o una consulta regular para su niño en un consultorio médico o en una clínica tan pronto como su niño la necesitaba?

Nunca
 A veces
 La mayoría de las veces
 Siempre

7. En los últimos 6 meses, sin contar las veces en que su niño fue a una sala de emergencia, ¿cuántas veces fue su niño a un consultorio médico o a una clínica para que lo atendieran?

Ninguna vez → *Pase a la pregunta 16*
 1 vez
 2
 3
 4
 5 a 9
 10 veces o más

8. En los últimos 6 meses, ¿hablaron usted y el doctor u otro profesional médico de su niño sobre cosas específicas que usted podría hacer para prevenir que su niño se enferme?

Sí
 No

9. En los últimos 6 meses, ¿con qué frecuencia le contestaron sus preguntas los doctores u otros profesionales médicos de su niño?

Nunca
 A veces
 La mayoría de las veces
 Siempre

10. En los últimos 6 meses, ¿hablaron usted y el doctor u otro profesional médico de su niño sobre comenzar o suspender una medicina recetada?

- Sí
- No → *Pase a la pregunta 14*

11. ¿Hablaron usted y un doctor u otro profesional médico sobre las razones por las que tal vez usted quiera que su niño tome una medicina?

- Sí
- No

12. ¿Hablaron usted y un doctor u otro profesional médico sobre las razones por las que tal vez usted no quiera que su niño tome una medicina?

- Sí
- No

13. Cuando hablaron de comenzar o suspender una medicina recetada para su niño, ¿le preguntó un doctor u otro profesional médico sobre lo que usted creía que sería lo mejor para su niño?

- Sí
- No

14. Usando un número del 0 al 10, el 0 siendo la peor atención médica posible y el 10 la mejor atención médica posible, ¿qué número usaría para calificar toda la atención médica que su niño ha recibido en los últimos 6 meses?

- | | | | | | | | | | | |
|---------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| La peor atención médica posible | | | | | | La mejor atención médica posible | | | | |

15. En los últimos 6 meses, ¿con qué frecuencia le fue fácil conseguir la atención, las pruebas o el tratamiento que su niño necesitaba?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

16. ¿Está matriculado actualmente su niño en algún tipo de escuela o guardería/cuidado infantil?

- Sí
- No → *Pase a la pregunta 19*

17. En los últimos 6 meses, ¿necesitó que los doctores o los otros profesionales médicos de su niño se pusieran en contacto con una escuela o guardería acerca de la salud o la atención médica de su niño?

- Sí
- No → *Pase a la pregunta 19*

18. En los últimos 6 meses, ¿consiguió la ayuda de los doctores o los otros profesionales médicos de su niño que necesitaba para ponerse en contacto con la escuela o guardería de su niño?

- Sí
- No



SERVICIOS ESPECIALIZADOS

19. En el equipo o dispositivo médico especial se incluye un andador, silla de ruedas, nebulizador, tubos de alimentación o equipo de oxígeno. En los últimos 6 meses, ¿consiguió o intentó conseguir algún equipo o dispositivo médico especial para su niño?

- Sí
- No → *Pase a la pregunta 22*

20. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir equipo o dispositivos médicos especiales para su niño?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

21. ¿Alguien del plan de salud, del consultorio médico o clínica de su niño le ayudó a conseguir el equipo o dispositivos médicos especiales para su niño?

- Sí
- No

22. En los últimos 6 meses, ¿consiguió o intentó conseguir terapia especial para su niño tal como terapia física, ocupacional o del habla?

- Sí
- No → *Pase a la pregunta 25*

23. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir esta terapia para su niño?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

24. ¿Alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a conseguir esta terapia para su niño?

- Sí
- No

25. En los últimos 6 meses, ¿consiguió o intentó conseguir tratamiento o consejería para su niño, para un problema emocional, de desarrollo o de comportamiento?

- Sí
- No → *Pase a la pregunta 28*

26. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir este tratamiento o consejería para su niño?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

27. ¿Alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a conseguir este tratamiento o consejería para su niño?

- Sí
- No

28. En los últimos 6 meses, ¿recibió su niño atención de más de un tipo de profesional médico, o usó más de un tipo de servicio de salud?

- Sí
- No → *Pase a la pregunta 30*

29. En los últimos 6 meses, ¿alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a coordinar la atención médica de su niño entre estos profesionales o servicios diferentes?

- Sí
- No

EL DOCTOR PERSONAL DE SU NIÑO

30. El doctor personal es aquel a quien su niño va si necesita un chequeo, tiene un problema de salud o si se enferma o lastima. ¿Tiene su niño un doctor personal?

- Sí
- No → *Pase a la pregunta 45*

31. En los últimos 6 meses, ¿cuántas veces fue su niño a ver a su doctor personal para recibir atención médica?

- Ninguna vez → *Pase a la pregunta 41*
- 1 vez
- 2
- 3
- 4
- 5 a 9
- 10 veces o más

31a. En los últimos 6 meses, ¿con qué frecuencia se le hizo difícil hablar o entender al doctor personal de su niño porque hablaban idiomas diferentes?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

32. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño le explicó las cosas sobre la salud de su niño de una manera fácil de entender?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

33. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño le escuchó a usted con atención?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

34. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño demostró respeto por lo que usted tenía que decir?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

35. ¿Su niño puede hablar con los doctores sobre su atención médica?

- Sí
- No → *Pase a la pregunta 37*

36. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño le explicó las cosas a su niño de una manera fácil de entender?

- Nunca
- A veces
- La mayoría de las veces
- Siempre



PREGUNTAS ADICIONALES

57c. Las opciones de tratamiento o atención médica para su niño pueden incluir opciones sobre medicinas, cirugía u otro tratamiento.

En los últimos 6 meses, ¿le dijo su profesional médico que había más de una opción para el tratamiento o atención médica de su niño?

- Sí
- No → *Pase a la pregunta 58*

57d. En los últimos 6 meses, ¿le habló su profesional médico acerca de las cosas buenas y las cosas malas de cada opción de tratamiento o de atención médica de su niño?

- Sí
- No

57e. En los últimos 6 meses, cuando había más de una opción de tratamiento o de atención médica para su niño, ¿su profesional médico le preguntó cuál opción le convenía más a su niño?

- Sí
- No

57f. En los últimos 6 meses, ¿con qué frecuencia su profesional médico considero y respeto las opciones de atención médica que usted penso funcionarían mejor para su niño?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

57g. En los últimos 6 meses, ¿con qué frecuencia el profesional médico de su niño le animo a usted a hacer preguntas y plantear inquietudes?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

57h. En los últimos 6 meses, ¿con qué frecuencia el profesional médico de su niño le hizo fácil a usted el hacer preguntas y plantear inquietudes?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

ACERCA DE USTED Y DE SU NIÑO

58. En general, ¿cómo calificaría toda la salud de su niño?

- Excelente
- Muy buena
- Buena
- Regular
- Mala

59. En general, ¿cómo calificaría toda la salud mental o emocional de su niño?

- Excelente
- Muy buena
- Buena
- Regular
- Mala

60. ¿Actualmente necesita o usa su niño una medicina recetada por un doctor (aparte de vitaminas)?

- Sí
- No → *Pase a la pregunta 63*

61. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?
- Sí
 No → *Pase a la pregunta 63*
62. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?
- Sí
 No
63. ¿Necesita o usa su niño más servicios médicos, de salud mental o educativos de lo que es normal para la mayoría de los niños de la misma edad?
- Sí
 No → *Pase a la pregunta 66*
64. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?
- Sí
 No → *Pase a la pregunta 66*
65. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?
- Sí
 No
66. ¿Está su niño limitado o impedido de alguna manera en su habilidad de hacer lo que pueden hacer la mayoría de los niños de la misma edad?
- Sí
 No → *Pase a la pregunta 69*

67. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?
- Sí
 No → *Pase a la pregunta 69*
68. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?
- Sí
 No
69. ¿Necesita o recibe su niño terapia especial, tal como terapia física, ocupacional o del habla?
- Sí
 No → *Pase a la pregunta 72*
70. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?
- Sí
 No → *Pase a la pregunta 72*
71. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?
- Sí
 No
72. ¿Tiene su niño algún problema emocional, de desarrollo o de comportamiento, para el cual necesita o recibe tratamiento o consejería?
- Sí
 No → *Pase a la pregunta 74*
73. ¿Ha durado este problema o se espera que dure por lo menos 12 meses?
- Sí
 No

74. ¿Qué edad tiene su niño?

Menos de un año

AÑOS (escriba la respuesta)

75. ¿Es su niño de sexo masculino o femenino?

Masculino

Femenino

76. ¿Es su niño de origen o ascendencia hispana o latina?

Sí, hispano o latino

No, ni hispano ni latino

77. ¿A qué raza pertenece su niño?
Marque una o más.

Blanca

Negra o afroamericana

Asiática

Nativo de Hawái o de otras islas del Pacífico

Indígena americano o nativo de Alaska

Otra (Por favor escriba en letra de molde)

78. ¿Qué edad tiene usted?

Menos de 18 años

18 a 24

25 a 34

35 a 44

45 a 54

55 a 64

65 a 74

75 años o más

79. ¿Es usted hombre o mujer?

Hombre

Mujer

80. ¿Cuál es el grado o nivel escolar más alto que usted ha completado?

8 años de escuela o menos

9 a 12 años de escuela, pero sin graduarse

Graduado de la escuela secundaria (high school), Diploma de escuela secundaria, preparatoria, o su equivalente (o GED)

Algunos cursos universitarios o un título universitario de un programa de 2 años

Título universitario de 4 años

Título universitario de más de 4 años

81. ¿Qué relación tiene con el niño?

Madre o padre

Abuelo o abuela

Tía o tío

Hermano o hermana mayor

Otro familiar

Tutor legal del niño

Otra persona

82. ¿Le ayudó alguien a completar esta encuesta?

Sí → **Pase a la pregunta 83**

No → **Gracias. Por favor devuelva esta encuesta en el sobre con el porte o franqueo pagado.**

83. ¿Cómo le ayudó a usted esta persona? Marque una o más.

Me leyó las preguntas

Anotó las respuestas que le di

Contestó las preguntas por mí

Tradujo las preguntas a mi idioma

Me ayudó de otra forma (Por favor escriba en letra de molde)

◆ **Gracias nuevamente por tomar el tiempo de completar el cuestionario! Sus respuestas son sumamente apreciadas.**

Cuando haya terminado, por favor envíe la encuesta en el sobre con el porte pagado a:

DataStat, 3975 Research Park Drive, Ann Arbor, MI 48108



DIAL.SCREEN

DS. INTERVIEWER: YOU MAY DO THE INTERVIEW WITH ONLY THE NAMED
RESPONDENT.

PHONE NUMBER ---> [1 CELL PHONE - HAND DIAL ([AREA\$]) [FRST3\$] -
[LAST4\$] /*** ***-****]

(IWER: THIS IS NOT A PROXY INTERVIEW.)

Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may
be monitored and recorded for quality control. May I please speak with
[MEMBER FIRST NAME] [MEMBER LAST NAME]?

(IF NEEDED: "We are conducting an important study to find out how
satisfied people are with Oregon Health Plan. The results of the
study will help Oregon Health Plan improve the care they provide and will also
help consumers when they choose health care plans.")

(IF NEEDED: "The interview is completely confidential and voluntary,
and will not affect your health care or benefits in any way.")

(IF NEEDED: "This is purely a research study -- we are polling people
about their health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD
LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the
deadline for mailing surveys has passed and we're now in the telephone
phase of this study. May I continue?")

01. CONTINUE
02. ALREADY COMPLETED AND MAILED SURVEY BACK
03. NEW PHONE NUMBER
04. REFUSAL
05. APPOINTMENT
06. NEVER HEARD OF R
07. KNOWS R BUT HAS NO NEW NUMBER FOR R
08. RNA, ANS MACH, RETURN TO COVERSHEET
09. LANGUAGE PROBLEM -- SPEAKS SPANISH
10. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH

IF DIAL.SCREEN = 01, GO TO RE.INTRO

IF DIAL.SCREEN = 02, GO TO MAIL.SCREEN

IF DIAL.SCREEN = 03, ENTER NEW NUMBER ON COVERSHEET AND RE-DIAL

RETURN TO COVERSHEET

RE.INTRO

RE.INTRO. (INTERVIEWER: READ PARENS TEXT IF R ISN'T PERSON WHO ANSWERED
PHONE OR HAS NOT HEARD IT YET.)

(Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may
be monitored and recorded for quality control.)

We are conducting an important study to find out how satisfied
people are with Oregon Health Plan. The results of the study will help
Oregon Health Plan improve the care they provide and will also help consumers
when they choose health care plans.

The interview is completely confidential and voluntary, and will not
affect your health care or benefits in any way.

(IF R ASKS: "How long will this take?", EXPLAIN: "The questions should
take about 12-15 minutes to answer.")

(IF NEEDED: "This is purely a research study -- we are polling people
about their health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD
LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the
deadline for mailing surveys has passed and we're now in the telephone
phase of this study. May I continue?")

("DK" NOT ALLOWED)

1. CONTINUE
2. APPOINTMENT
3. REFUSAL
4. LANGUAGE PROBLEM -- SPEAKS SPANISH
5. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH

6. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)
7. RETURN TO CS

SEX

SEX. (IWER: RECORD RESPONDENT'S SEX, 'DK' NOT ALLOWED)

1. MALE
2. FEMALE

SPAN.VAR

(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

1. Spanish
2. English

MEMBER

Q1. / MEMBER

Our records show that you are now in Oregon Health Plan. Is that right?

(IWER: IF R SAYS "LEFT PLAN" OR "SWITCHED PLANS" OR "NO LONGER INSURED" ENTER "2". IF R IS NOT SURE IF HE/SHE IS PART OF Oregon Health Plan, ENTER "2".)

- 1. YES --> CK.PLMSTCR
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

NPLNAME

Q2. / NPLNAME

What is the name of your health plan?

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS Oregon Health Plan]

[(ENTER 5 IF R SAYS: MEDICAID)]

(IF R SAYS SOMETHING CLOSE TO Oregon Health Plan, ENTER "2")

(IF R NOT SURE OF PLAN NAME, ENTER "2")

- 1. EXACT MATCH -----> CK.PLMSTCR
- 2. POSSIBLE MATCH -----> PLNAME
- 3. NOT A MATCH -----> PLNAME
- 4. RESPONDENT NO LONGER INSURED -----> NO.INSUR
- 5. RESPONDENT INSURED BY MEDICAID BUT DOESN'T -----> CK.PLMSTCR
KNOW PLAN NAME
- 6. RESPONDENT INSURED BUT NOT BY MEDICAID -----> NO.INSUR

PLNAME

Q2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)

CK.PLMSTCR:

IF NPLNAME = NOT A MATCH (3), GO TO END.SCREEN

INTRO.INCARE

INTRO.INCARE

Now I'm going to ask you some questions about your own health care. When you answer these questions, please do NOT include dental visits or care you got when you stayed overnight in a hospital.

INCARE

Q3. / INCARE

In the last 6 months, did you have an illness, injury, or condition that NEEDED CARE RIGHT AWAY in a clinic, emergency room, or doctor's office?

- 1. YES
- 2. NO -----> APMAKE4

DK/REFUSAL/NOT ASCERTAINED --> APMAKE4

CARSN4

Q4. / CARSN4

In the last 6 months, when you NEEDED CARE RIGHT AWAY, how often did you get care as soon as you needed? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

APMAKE4

Q5. / APMAKE4

In the last 6 months, did you make any appointments for a CHECK-UP OR ROUTINE CARE at a doctor's office or clinic?

- 1. YES
- 2. NO -----> OFCTIM4

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

APGET4

Q6. / APGET4

In the last 6 months, how often did you get an appointment for a CHECK-UP OR ROUTINE CARE at a doctor's office or clinic as soon as you needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

OFCTIM4

Q7. / OFCTIM4

In the last 6 months, NOT counting the times you went to an emergency room, how many times did you go to a doctor's office or clinic to get health care for yourself?

(IWER: IF NECESSARY: "Your best estimate would be fine.")

(IWER: IF NEEDED CLARIFY: "Please don't include dental care you received.")

(IWER: IF NEEDED CLARIFY, "Please include ALL doctor visits including those for routine, regular care and for an illness or injury.")

(READ LIST IF NEEDED: "Would you say...")

0. NONE,
1. 1 TIME,
2. 2,
3. 3,
4. 4,
5. 5 TO 9, OR
6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

IF OFCTIM4=0 OR DK/REFUSAL THEN GO TO PRSNLD4

PRVENT5

Q8. / PRVENT5

In the last 6 months, did you and a doctor or other health provider talk about specific things you could do to prevent illness?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RXSTP

9. / RXSTP

In the last 6 months, did you and a doctor or other health provider talk about starting or stopping a prescription medicine?

- 1. YES
- 2. NO -----> RTALLCR

DK/REFUSAL/NOT ASCERTAINED --> RTALLCR

NRXWHY

10. / NRXWHY

Did you and a doctor or other health provider talk about the reasons you might want to take a medicine?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

NRXWYNT

11. / NRXWYNT

Did you and a doctor or other health provider talk about the reasons you might NOT want to take a medicine?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RXBST

12. / RXBST

When you talked about starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for you?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RTALLCR

13. / RTALLCR

Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care in the last 6 months?

(IF NEEDED: "Please do not include any dental care you may have received.")

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

CARNES4

14. / CARNES4

In the last 6 months, how often was it easy to get the care, tests, or treatment you needed? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PRSNLD4

15. / PRSNLD4

A personal doctor is the one you would see if you need a check-up, want advice about a health problem, or get sick or hurt.

Do you have a personal doctor?

- 1. YES
- 2. NO -----> INTRO.SPDR

DK/REFUSAL/NOT ASCERTAINED --> INTRO.SPDR

DRTMS

16. / DRTMS

In the last 6 months, how many times did you visit your personal doctor to get care for yourself?

(IF NEEDED: "Your best estimate would be fine.")

(READ LIST IF NEEDED: "Would you say...")

- 0. NONE, -----> RATEDR4
- 1. 1 TIME,
- 2. 2,
- 3. 3,
- 4. 4,
- 5. 5 TO 9, OR
- 6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> RATEDR4

DREXPL4

17. / DREXPL4

In the last 6 months, how often did your personal doctor explain things in a way that was easy to understand? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRLSTN4

18. / DRLSTN4

In the last 6 months, how often did your personal doctor listen carefully to you? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRESPU4

19. / DRESPU4

In the last 6 months, how often did your personal doctor show respect for what you had to say? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTMEN4

20. / DRTMEN4

In the last 6 months, how often did your personal doctor spend enough time with you? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DIFFDR

21. / DIFFDR

In the last 6 months, did you get care from a doctor or other health provider besides your personal doctor?

- 1. YES
- 2. NO -----> RATEDR4

DK/REFUSAL/NOT ASCERTAINED --> RATEDR4

DRINFO

22. / DRINFO

In the last 6 months, how often did your personal doctor seem informed and up-to-date about the care you got from these doctors or other health providers? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RATEDR4

23. / RATEDR4

Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

INTRO.SPDR

Now I'm going to ask you some questions about specialists. When you answer these questions, please do NOT include dental visits or care you got when you stayed overnight in a hospital

NDSPDR4

24. / NDSPDR4

SPECIALISTS are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.

In the last 6 months, did you make any appointments to see a specialist?

(CLARIFY IF NEEDED: "Specialists are doctors who specialize in one area of health care. Please include all doctors you consider to be specialists, but do not include any dental visits.")

(IWER: IF RESPONDENT ASKS IF A PARTICULAR TYPE OF DOCTOR IS A SPECIALIST, CLARIFY, "I don't have any information about that, so please just interpret it however it seems best to you.")

(CLARIFY IF NEEDED: "You can interpret this question however it seems best to you.")

- 1. YES
- 2. NO -----> INTRO.PLAN

DK/REFUSAL/NOT ASCERTAINED --> INTRO.PLAN

PRBSEE4

25. / PRBSEE4

In the last 6 months, how often did you get an appointment to see a specialist as soon as you needed? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

SPDRS

26. / SPDRS

How many specialists have you seen in the last 6 months?

(CLARIFY IF NEEDED: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. Would you say you've seen...")

(READ LIST IF NEEDED: "Would you say...")

- 0. NONE, -----> INTRO.PLAN
- 1. 1 SPECIALIST,
- 2. 2,
- 3. 3,
- 4. 4, OR
- 5. 5 OR MORE SPECIALISTS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> INTRO.PLAN

RTSPDR4

27. / RTSPDR4

We want to know your rating of the specialist you saw most often in the last 6 months.

Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

(Clarify if necessary: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.")

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN

Now I'm going to ask you some questions about your experience with your health plan.

LOOMAT4

28. / LOOMAT4

In the last 6 months, did you look for any information in written materials or on the Internet about how your health plan works?

- 1. YES
- 2. NO -----> CLCSRV4

DK/REFUSAL/NOT ASCERTAINED --> CLCSRV4

UNDINF4

29. / UNDINF4

In the last 6 months, how often did the written materials OR the Internet provide the information you needed about how your health plan works? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CLCSRV4

30. / CLCSRV4

In the last 6 months, did you get information or help from your health plan's customer service?

- 1. YES
- 2. NO -----> PLPRWK4

DK/REFUSAL/NOT ASCERTAINED --> PLPRWK4

PBCLCS4

31. / PBCLCS4

In the last 6 months, how often did your health plan's customer service give you the information or help you needed? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CSRESP

32. / CSRESP

In the last 6 months, how often did your health plan's customer service staff treat you with courtesy and respect? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLPRWK4

33. / PLPRWK4

In the last 6 months, did your health plan give you any forms to fill out?

- 1. YES
- 2. NO -----> RTPLEXP

DK/REFUSAL/NOT ASCERTAINED --> RTPLEXP

PBPLPW4

34. / PBPLPW4

In the last 6 months, how often were the forms from your health plan easy to fill out? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTPLEXP

35. / RTPLEXP

Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your health plan?

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

HPMDEQ

35a. / HPMDEQ

In the last 6 months, did you have a health problem for which you needed special medical equipment, such as a cane, a wheelchair, or oxygen equipment?

- 1. YES
 - 2. NO -----> POSTHP
- DK/REFUSAL/NOT ASCERTAINED

EZMDHP

35b. / EZMDHP

In the last 6 months, how often was it easy to get the medical equipment you needed through your health plan?

- 1. NEVER
 - 2. SOMETIMES
 - 3. USUALLY
 - 4. ALWAYS
- DK/REFUSAL/NOT ASCERTAINED

POSTHP

35c. / POSTHP

In the last 6 months, did you have any health problems that needed special therapy, such as physical, occupational, or speech therapy?

- 1. YES
 - 2. NO -----> DTLKTF
- DK/REFUSAL/NOT ASCERTAINED

EZPOST

35d. / EZPOST

In the last 6 months, how often was it easy to get the special therapy you needed through your health plan?

- 1. NEVER
 - 2. SOMETIMES
 - 3. USUALLY
 - 4. ALWAYS
- DK/REFUSAL/NOT ASCERTAINED

INTRO.SHLTHIS

INTRO.SHLTHIS

A health provider could be a general doctor, a specialist doctor, a nurse practitioner, a physician assistant, a nurse or anyone else you would see for health care. Please keep this in mind as you answer the following questions.

SHLTHIS

35e. / SHLTHIS

In the last 6 months, did you visit a provider for a specific health issue?

- 1. YES
- 2. NO -----> CHTREAT

DK/REFUSAL/NOT ASCERTAINED --> CHTREAT

EUNDER

35f. / EUNDER

How much effort was made to help you understand your health issue? Would you say...?

(READ LIST)

- 1. NO EFFORT AT ALL,
- 2. A LITTLE EFFORT WAS MADE,
- 3. SOME EFFORT WAS MADE, or
- 4. A LOT OF EFFORT WAS MADE

DK/REFUSAL/NOT ASCERTAINED

ELISTEN

35g. / ELISTEN

How much effort was made to listen to the things that matter most to you about your health issue?

(READ LIST IF NECESSARY)

- 1. NO EFFORT AT ALL,
- 2. A LITTLE EFFORT WAS MADE,
- 3. SOME EFFORT WAS MADE, or
- 4. A LOT OF EFFORT WAS MADE

DK/REFUSAL/NOT ASCERTAINED

EINCLUD

35h. / EINCLUD

How much effort was made to include what matters most to you in choosing what to do next?

(READ LIST IF NECESSARY)

- 1. NO EFFORT AT ALL,
- 2. A LITTLE EFFORT WAS MADE,
- 3. SOME EFFORT WAS MADE, or
- 4. A LOT OF EFFORT WAS MADE

DK/REFUSAL/NOT ASCERTAINED

CHTREAT

35i. / CHTREAT

Choices for your treatment or health care can include choices about medicine, surgery, or other treatment.

In the last 6 months, did this provider tell you there was more than one choice for your treatment or health care?

- 1. YES
- 2. NO -----> RESPCHT

DK/REFUSAL/NOT ASCERTAINED --> RESPCHT

PCTREAT

35j. / PCTREAT

In the last 6 months, did your provider talk with you about the pros and cons of each choice for your treatment or health care?

- 1. YES
 - 2. NO
- DK/REFUSAL/NOT ASCERTAINED

BSTREAT

35k. / BSTREAT

In the last 6 months, when there was more than one choice for your treatment or health care, did your provider ask you which choice was best for you ?

- 1. YES
 - 2. NO
- DK/REFUSAL/NOT ASCERTAINED

EASYQC

35l. / EASYQC

In the last 6 months, how often did your provider make it easy for you to ask questions or raise concerns? Would you say...?

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED

DTLKTF

35m. / DTLKTF

In the last 6 months, how often did a doctor or other health provider talk too fast when talking to you? Would you say...?

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED

DINTER

35n. / DINTER

In the last 6 months, how often did a doctor or other health provider interrupt you when you were talking? Would you say...?

(READ LIST IF NECESSARY)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED

DRRUDE

35o. / DRRUDE

In the last 6 months, how often did a doctor or other health provider use a condescending, sarcastic or rude tone or manner with you? Would you say...?

(READ LIST IF NECESSARY)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED

TRUSTDR

35p. / TRUSTDR

In the last 6 months, did you feel you could trust a doctor or other health provider with your medical care?

(READ LIST)

1. YES DEFINITELY,
2. YES SOMEWHAT, OR
3. NO?

DK/REFUSAL/NOT ASCERTAINED

REGDENT

35q. / REGDENT

A regular dentist is one you would go to for check-ups and cleanings or when you have a cavity or tooth pain. Do you have a regular dentist?

1. YES
2. NO
- DK/REFUSAL/NOT ASCERTAINED

DNTASAP

35r.

In the last 6 months, if you needed to see a dentist right away because of a DENTAL EMERGENCY, did you get to see a dentist as soon as you wanted?

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?
5. I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS (DO NOT READ)

DK/REFUSAL/NOT ASCERTAINED

HLTSTA4

36. / HLTSTA4

In general, how would you rate your overall health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

MNTLSTAT

37. / MNTLSTAT

In general, how would you rate your overall MENTAL OR EMOTIONAL health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

FLUSHOTQ

38. / FLUSHOTQ

Have you had either a flu shot or flu spray in the nose since July 1, 2014?

- 1. YES
- 2. NO
- 3. DON'T KNOW
- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

NOWSMOK

39. / NOWSMOK

Do you now smoke cigarettes or use tobacco...

(READ LIST)

- 1. EVERY DAY,
- 2. SOME DAYS, OR
- 3. NOT AT ALL? -----> ASPDAY
- 4. DON'T KNOW (DO NOT READ) -----> ASPDAY
- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ) --> ASPDAY

ADVQUIT9

40. / ADVQUIT9

In the last 6 months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PATCH9

41. / PATCH9

In the last 6 months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication. Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

WILLPWR9

42. / WILLPWR9

In the last 6 months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program. Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPDAY

43. / ASPDAY

Do you take aspirin daily or every other day?

(IF NEEDED: "Would you say YES or NO?")

(IWER: If the R asks about whether a particular medication or Brand name is considered aspirin, you may provide the following clarification:

Aspirin: Bayer and Bufferin

Not Aspirin: Tylenol, Motrin, Aleve, Advil, ibuprofen and acetaminophen)

1. YES
2. NO
3. DON'T KNOW
9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPUSF

44. / ASPUSF

Do you have a health problem or take medication that makes taking aspirin unsafe for you?

(IF NEEDED: "Would you say YES or NO?")

1. YES
2. NO
3. DON'T KNOW

9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPPRV

45. / ASPPRV

Has a doctor or health provider ever discussed with you the risks and benefits of aspirin to prevent heart attack or stroke?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.AWCOND
INTRO.AWCOND

When I read the following list, please tell me if you are aware that you have any of these conditions.

PHAWCD.(1-3)
46.(1-3) / PHAWCD.(1-3)

[First,/(Next/How About...)]

1. "High cholesterol"
2. "High blood pressure"
3. "Parent or sibling who had a heart attack before the age of 60"

(IWER IF NECESSARY: "Are you aware if you have this condition?")

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.DRCOND
INTRO.DRCOND

When I read the following list, please tell me if a doctor has ever told you that you have any of these conditions.

PHDRCD.(1-4)
47.(1-4) / PHDRCD.(1-4)

[First,/(Next/How About...)]

1. "A heart attack"
2. "Angina or coronary heart disease"
3. "A stroke"
4. "Any kind of diabetes or high blood sugar"

(IWER IF NECESSARY: "Has a doctor ever told you that you have this condition?")

[FOR PHDRCD.2: (IWER IF NEEDED, CLARIFY: Angina pectoris (an-JYE-nuh or AN-jin-uh PECK-ter-iss) is severe pain in the chest associated with insufficient blood supply to the heart.)]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

SMPROB

48. / SMPROB

I have just a few more questions.

In the last 6 months, did you get health care 3 or more times for the same condition or problem?

- 1. YES
- 2. NO -----> TKMED

DK/REFUSAL/NOT ASCERTAINED --> TKMED

PRBLST

49. / PRBLST

Is this a condition or problem that has lasted for at least 3 months? [Please do NOT include pregnancy or menopause.]

[(IWER IF NEEDED, CLARIFY: Menopause (men-ne-paws) is the time in a woman's life when she stops having menstrual periods. It is sometimes called 'the change of life' or 'the change'.)]

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

TKMED

50. / TKMED

Do you now need or take medicine prescribed by a doctor? [Please do NOT include birth control.]

- 1. YES
- 2. NO -----> QAGE4

DK/REFUSAL\NOT ASCERTAINED --> QAGE4

TRTCOND

51. / TRTCOND

Is this medicine to treat a condition that has lasted for at least three months? [Please do NOT include pregnancy or menopause.]

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

QAGE4

52. / QAGE4

What is your age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your last birthday.")

(READ LIST IF NEEDED, "Are you...")

1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

QGENDER

53. / QGENDER

(IWER: RECORD RESPONDENT'S SEX, 'DK' NOT ALLOWED)

(ASK IF NECESSARY, "Are you male or female?")

1. MALE
2. FEMALE

EDUCAT

54. / EDUCAT

What is the highest grade or level of school that you have COMPLETED?
Did you complete...

(IWER: IF R SAYS HE/SHE HAD NON-ACADEMIC TRAINING, SUCH AS TRADE SCHOOL, PROBE: "Did you receive a high school diploma or GED?")

(IWER: ACADEMIC TRAINING BEYOND A HIGH SCHOOL DIPLOMA THAT DOES NOT LEAD TO A BACHELORS DEGREE, SHOULD BE CODED "4". IF R WENT TO BUSINESS SCHOOL OR GOT A 3-YEAR NURSING DEGREE, ENTER "4")

(IWER: IF R OFFERS MORE THAN ONE RESPONSE, FOR EXAMPLE: "SOME HIGH SCHOOL OR GED", ENTER THE HIGHEST NUMBER THAT APPLIES.)

(READ LIST)

1. 8TH GRADE OR LESS,
2. SOME HIGH SCHOOL, BUT DID NOT GRADUATE,
3. HIGH SCHOOL GRADUATE OR GED,
4. SOME COLLEGE OR 2-YEAR DEGREE,
5. 4-YEAR COLLEGE GRADUATE, OR
6. MORE THAN A 4-YEAR COLLEGE DEGREE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

LATINO

55. / LATINO

Are you of Hispanic or Latino origin or descent?

1. YES / HISPANIC OR LATINO
2. NO / NOT HISPANIC OR LATINO

DK/REFUSAL/NOT ASCERTAINED

INTRO.RACE

INTRO.RACE

I am going to read a list of race categories. For each category, please say YES or NO if it describes your race. I must ask you about all categories in case more than one applies.

PQRACE3.(1-6)

56.(1-6) / PQRACE3.(1-6)

[(Are you)]

1. "White"
2. "Black or African-American"
3. "Asian"
4. "Native Hawaiian or other Pacific Islander"
5. "American Indian or Alaska Native"
6. "Some other race"

(IWER: IF R REPLIES "WHY ARE YOU ASKING ABOUT MY RACE?" SAY "We ask about your race for demographic purposes only. We want to be sure that the people we survey accurately represent the racial diversity of managed care enrollees in this country.")

(IWER: If R answers with a category not listed here, such as "HISPANIC" or "AMERICAN" or "MIXED RACE", probe using the category "OTHER".)

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

ALL.DONE

THANKS.SCREEN.

Those are all the questions I have.

Thank you for taking part in this important interview.

Have a nice (day/evening). Good bye.

RETURN TO COVERSHEET

DIAL.SCREEN

DS. INTERVIEWER: YOU MAY DO THE INTERVIEW WITH ONLY THE PARENT OR GUARDIAN WHO KNOWS MOST ABOUT FNAME LNAME'S HEALTH CARE.
PHONE NUMBER ---> [1 CELL PHONE - HAND DIAL ([AREA\$]) [FRST3\$] - [LAST4\$] /*** ***-****]

(IWER: THIS IS A PROXY INTERVIEW.)

Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may be monitored and recorded for quality control. May I please speak with the person who knows the most about [NAME OF CHILD]'s health care?

(IF NEEDED: "We are conducting an important study to find out how satisfied families are with Oregon Health Plan. The results of the study will help Oregon Health Plan improve the care they provide and will also help consumers when they choose health care plans.")

(IF NEEDED: "The interview is completely confidential and voluntary, and will not affect your child's health care or benefits in any way.")

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

01. CONTINUE
02. ALREADY COMPLETED AND MAILED SURVEY BACK
03. NEW PHONE NUMBER
04. REFUSAL
05. APPOINTMENT
06. NEVER HEARD OF R
07. KNOWS R BUT HAS NO NEW NUMBER FOR R
08. RNA, ANS MACH, RETURN TO COVERSHEET
09. LANGUAGE PROBLEM -- SPEAKS SPANISH
10. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH

IF DIAL.SCREEN = 01, GO TO RE.INTRO

IF DIAL.SCREEN = 02, GO TO MAIL.SCREEN

IF DIAL.SCREEN = 03, ENTER NEW NUMBER ON COVERSHEET AND RE-DIAL

RETURN TO COVERSHEET

MAIL.SCREEN

MS. INTERVIEWER: WE STILL NEED TO CONDUCT A TELEPHONE INTERVIEW EVEN
THOUGH R SAYS THEY'VE SENT BACK THE MAIL SURVEY.

I'm sorry, but we haven't received your survey back -- it may have been lost in the mail. And since the deadline for mailing surveys has passed, we're now in the telephone phase of this study. May I continue?

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

1. CONTINUE
2. REFUSAL BECAUSE ALREADY COMPLETED AND MAILED SURVEY BACK
3. REFUSAL
4. APPOINTMENT

IF MAIL.SCREEN = 1, GO TO RE.INTRO
RETURN TO COVERSHEET

RE.INTRO

RE.INTRO. (INTERVIEWER: READ PARENS TEXT IF R ISN'T PERSON WHO ANSWERED
PHONE OR HAS NOT HEARD IT YET.)

(Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may be monitored and recorded for quality control.)

We are conducting an important study to find out how satisfied families are with Oregon Health Plan. The results of the study will help Oregon Health Plan improve the care they provide and will also help consumers when they choose health care plans.

The interview is completely confidential and voluntary, and will not affect your child's health care or benefits in any way.

(IF R ASKS: "How long will this take?", EXPLAIN: "The questions should take about 12-15 minutes to answer.")

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

("DK" NOT ALLOWED)

1. CONTINUE
2. APPOINTMENT
3. REFUSAL
4. LANGUAGE PROBLEM -- SPEAKS SPANISH
5. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH
6. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)
7. RETURN TO CS

SEX

SEX. (IWER: RECORD RESPONDENT'S SEX, 'DK' NOT ALLOWED)

1. MALE
2. FEMALE

SPAN.VAR

(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

1. Spanish
2. English

MEMBER

Q1. / MEMBER

I will be asking you about [NAME OF CHILD]'s health care. Please answer these questions based on the experiences you have had in getting health care for [NAME OF CHILD], and not on any experiences you may have had getting care for yourself or other members of your family.

Our records show that your child is now in Oregon Health Plan. Is that right?

(IWER: IF R SAYS "LEFT PLAN" OR "SWITCHED PLANS" OR "NO LONGER INSURED" ENTER "2". IF R IS NOT SURE IF HE/SHE IS PART OF Oregon Health Plan, ENTER "2".)

1. YES --> CK.PLMSTCR
2. NO

DK/REFUSAL/NOT ASCERTAINED

NPLNAME

Q2. / NPLNAME

What is the name of your child's health plan?

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS Oregon Health Plan]

[(ENTER 5 IF R SAYS: MEDICAID)]

(IF R SAYS SOMETHING CLOSE TO Oregon Health Plan, ENTER "2")

(IF R NOT SURE OF PLAN NAME, ENTER "2")

1. EXACT MATCH -----> CK.PLMSTCR
2. POSSIBLE MATCH -----> PLNAME
3. NOT A MATCH -----> PLNAME
4. CHILD NO LONGER INSURED -----> NO.INSUR
5. CHILD INSURED BY MEDICAID BUT DOESN'T -----> CK.PLMSTCR
KNOW PLAN NAME
6. CHILD INSURED BUT NOT BY MEDICAID -----> NO.INSUR

PLNAME

Q2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)

CK.PLMSTCR:

IF NPLNAME = NOT A MATCH (3), GO TO END.SCREEN

INTRO.INCARE

INTRO.INCARE

Now I'm going to ask you some questions about your child's health care. When you answer these questions, please do NOT include dental visits or care your child got when [he/she] stayed overnight in a hospital.

INCARE

Q3. / INCARE

In the last 6 months, did your child have an illness, injury, or condition that NEEDED CARE RIGHT AWAY in a clinic, emergency room, or doctor's office?

1. YES
2. NO -----> APMAKE4

DK/REFUSAL/NOT ASCERTAINED --> APMAKE4

CARSN4

Q4. / CARSN4

In the last 6 months, when your child NEEDED CARE RIGHT AWAY, how often did your child get care as soon as [he/she] needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

APMAKE4

Q5. / APMAKE4

In the last 6 months, did you make any appointments for a CHECK-UP OR ROUTINE CARE for your child at a doctor's office or clinic?

1. YES
2. NO -----> OFCTIM4

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

APGET4

Q6. / APGET4

In the last 6 months, when you made an appointment for a CHECK-UP OR ROUTINE CARE for your child at a doctor's office or clinic, how often did you get an appointment as soon as your child needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

OFCTIM4

Q7. / OFCTIM4

In the last 6 months, NOT counting the times your child went to an emergency room, how many times did [he/she] go to a doctor's office or clinic to get health care?

(IWER: IF NECESSARY: "Your best estimate would be fine.")

(IWER: IF NEEDED CLARIFY: "Please don't include dental care your child received.")

(IWER: IF NEEDED CLARIFY, "Please include ALL doctor visits including those for routine, regular care and for an illness or injury.")

(READ LIST IF NEEDED: "Would you say...")

0. NONE,
1. 1 TIME,
2. 2,
3. 3,
4. 4,
5. 5 TO 9, OR
6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

IF OFCTIM4=0 OR DK/REFUSAL THEN GO TO CHSCHL

PRVENT5

Q8. / PRVENT5

In the last 6 months, did you and your child's doctor or other health provider talk about specific things you could do to prevent illness in your child?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

OFTQUES

9. / OFTQUES

In the last 6 months, how often did you have your questions answered by your child's doctor or other health providers? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXSTP

10. / RXSTP

In the last 6 months, did you and your child's doctor or other health provider talk about starting or stopping a prescription medicine for your child?

1. YES
2. NO -----> RTALLCR

DK/REFUSAL/NOT ASCERTAINED --> RTALLCR

NRXWHY

11. / NRXWHY

Did you and a doctor or other health provider talk about the reasons you might want your child to take a medicine?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

NRXWYNT

12. / NRXWYNT

Did you and a doctor or other health provider talk about the reasons you might NOT want your child to take a medicine?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

RXBST

13. / RXBST

When you talked about your child starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for your child?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

RTALLCR

14. / RTALLCR

Using ANY NUMBER FROM 0 TO 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your child's health care in the last 6 months?

(IF NEEDED: "Please do not include any dental care your child may have received.")

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

CARNES4

15. / CARNES4

In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHSCHL

16. / CHSCHL

Is your child now enrolled in any kind of school or daycare?

1. YES
2. NO -----> MEDEQUIP

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

CONTSCHL

17. / CONTSCHL

In the last 6 months, did you need your child's doctors or other health providers to contact a school or daycare center about your child's health or health care?

1. YES
2. NO -----> MEDEQUIP

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

HELPCONT

18. / HELPCONT

In the last 6 months, did you get the help you needed from your child's doctors or other health providers in contacting your child's school or daycare?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

MEDEQUIP

19. / MEDEQUIP

Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment. In the last 6 months, did you get or try to get any special medical equipment or devices for your child?

1. YES
2. NO -----> SPCTHY

DK/REFUSAL/NOT ASCERTAINED --> SPCTHY

EZMDEQ

20. / EZMDEQ

In the last 6 months, how often was it easy to get special medical equipment or devices for your child? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPMDEQ

21. / HELPMDEQ

Did anyone from your child's health plan, doctor's office, or clinic help you get special medical equipment or devices for your child?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

SPCTHY

22. / SPCTHY

In the last 6 months, did you get or try to get special therapy such as physical, occupational, or speech therapy for your child?

1. YES
2. NO -----> TCPBLM

DK/REFUSAL/NOT ASCERTAINED --> TCPBLM

EZTHP

23. / EZTHP

In the last 6 months, how often was it easy to get this therapy for your child? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTHP

24. / HELPTHP

Did anyone from your child's health plan, doctor's office, or clinic help you get this therapy for your child?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

TCPBLM

25. / TCPBLM

In the last 6 months, did you get or try to get treatment or counseling for your child for an emotional, developmental, or behavioral problem?

1. YES
2. NO -----> PLUSCARE

DK/REFUSAL/NOT ASCERTAINED --> PLUSCARE

EZTC

26. / EZTC

In the last 6 months, how often was it easy to get this treatment or counseling for your child? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTC

27. / HELPTC

Did anyone from your child's health plan, doctor's office, or clinic help you get this treatment or counseling for your child?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

PLUSCARE

28. / PLUSCARE

In the last 6 months, did your child get care from more than one kind of health care provider or use more than one kind of health care service?

1. YES
2. NO -----> PRSNLD4

DK/REFUSAL/NOT ASCERTAINED --> PRSNLD4

HLPCOORD

29. / HLPCOORD

In the last 6 months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these different providers or services?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

PRSNLD4

30. / PRSNLD4

A personal doctor is the one your child would see if [he/she] needs a check-up, has a health problem or gets sick or hurt.

Does your child have a personal doctor?

1. YES
2. NO -----> INTRO.SPDR

DK/REFUSAL/NOT ASCERTAINED --> INTRO.SPDR

DRTMS

31. / DRTMS

In the last 6 months, how many times did your child visit
[his/her] personal doctor for care?

(IF NEEDED: "Your best estimate would be fine.")

(READ LIST IF NEEDED: "Would you say...")

0. NONE, -----> RATEDR4
1. 1 TIME,
2. 2,
3. 3,
4. 4,
5. 5 TO 9, OR
6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> RATEDR4

PBDRNG

31a. / PBDRNG

In the last 6 months, how often did you have a hard time speaking with
or understanding your child's personal doctor because you spoke different
languages? Would you say...?

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DREXPL4

32. / DREXPL4

In the last 6 months, how often did your child's personal
doctor explain things about your child's health in a way that was
easy to understand? Would you say...?

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRLSTN4

33. / DRLSTN4

In the last 6 months, how often did your child's personal doctor listen carefully to you? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRESPU4

34. / DRESPU4

In the last 6 months, how often did your child's personal doctor show respect for what you had to say? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CABLTLK

35. / CABLTLK

Is your child able to talk with doctors about [his/her] health care?

1. YES
2. NO -----> DRTMEN4

DK/REFUSAL/NOT ASCERTAINED --> DRTMEN4

CDREXPL

36. / CDREXPL

In the last 6 months, how often did your child's personal doctor explain things in a way that was easy for YOUR CHILD to understand? Would you say...

(READ LIST)

1. NEVER
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTMEN4

37. / DRTMEN4

In the last 6 months, how often did your child's personal doctor spend enough time with your child? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTLKU

38. / DRTLKU

In the last 6 months, did your child's personal doctor talk with you about how your child is feeling, growing, or behaving?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

DIFFDR

39. / DIFFDR

In the last 6 months, did your child get care from a doctor or other health provider besides [his/her] personal doctor?

1. YES
2. NO -----> RATEDR4

DK/REFUSAL/NOT ASCERTAINED --> RATEDR4

DRINFO

40. / DRINFO

In the last 6 months, how often did your child's personal doctor seem informed and up-to-date about the care your child got from these doctors or other health providers? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RATEDR4

41. / RATEDR4

Using ANY NUMBER FROM 0 TO 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your child's personal doctor?

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

COND3MO

42. / COND3MO

Does your child have any medical, behavioral, or other health conditions that have lasted for more than 3 MONTHS?

(IWER: "We are looking for a condition that the child CURRENTLY HAS that has lasted for more than 3 months.")

1. YES
2. NO -----> INTRO.SPDR

DK/REFUSAL/NOT ASCERTAINED --> INTRO.SPDR

DRUNCON

43. / DRUNCON

Does your child's personal doctor understand how these medical, behavioral, or other health conditions affect your child's day-to-day life?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

DRUNFAM

44. / DRUNFAM

Does your child's personal doctor understand how your child's medical, behavioral, or other health conditions affect your FAMILY'S day-to-day life?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.SPDR

INTRO.SPDR

Now I'm going to ask you some questions about specialists. When you answer these questions, please do NOT include dental visits or care your child got when (he/she) stayed overnight in a hospital.

NDSPDR4

45. / NDSPDR4

SPECIALISTS are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.

In the last 6 months, did you make any appointments for your child to see a specialist?

(CLARIFY IF NEEDED: "Specialists are doctors who specialize in one area of health care. Please include all doctors you consider to be specialists, but do not include any dental visits.")

(IWER: IF RESPONDENT ASKS IF A PARTICULAR TYPE OF DOCTOR IS A SPECIALIST, CLARIFY, "I don't have any information about that, so please just interpret it however it seems best to you.")

(CLARIFY IF NEEDED: "You can interpret this question however it seems best to you.")

1. YES
2. NO -----> INTRO.PLAN

DK/REFUSAL/NOT ASCERTAINED --> INTRO.PLAN

PRBSEE4

46. / PRBSEE4

In the last 6 months, how often did you get an appointment for your child to see a specialist as soon as you needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

SPDRS

47. / SPDRS

How many specialists has your child seen in the last 6 months?

(CLARIFY IF NEEDED: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. Would you say your child has seen...")

(READ LIST IF NEEDED: "Would you say...")

0. NONE, -----> INTRO.PLAN
1. 1 SPECIALIST,
2. 2,
3. 3,
4. 4, OR
5. 5 OR MORE SPECIALISTS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> INTRO.PLAN

RTSPDR4

48. / RTSPDR4

We want to know your rating of the specialist your child saw most often in the last 6 months.

Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

(Clarify if necessary: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.")

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN

INTRO.PLAN

Now I'm going to ask you some questions about your experience with your child's health plan.

CLCSRV4

49. / CLCSRV4

In the last 6 months, did you get information or help from customer service at your child's health plan?

1. YES
2. NO -----> PLPRWK4

DK/REFUSAL/NOT ASCERTAINED --> PLPRWK4

PBCLCS4

50. / PBCLCS4

In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CSRESP

51. / CSRESP

In the last 6 months, how often did customer service staff at your child's health plan treat you with courtesy and respect? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLPRWK4

52. / PLPRWK4

In the last 6 months, did your child's health plan give you any forms to fill out?

1. YES
2. NO -----> RTPLEXP

DK/REFUSAL/NOT ASCERTAINED --> RTPLEXP

PBPLPW4

53. / PBPLPW4

In the last 6 months, how often were the forms from your child's health plan easy to fill out? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTPLEXP

54. / RTPLEXP

Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your child's health plan?

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

CHPRES

55. / CHPRES

In the last 6 months, did you get or refill any prescription medicines for your child?

1. YES
2. NO -----> REGDENT

DK/REFUSAL/NOT ASCERTAINED --> REGDENT

EZPRES

56. / EZPRES

In the last 6 months, how often was it easy to get prescription medicines for your child through [his/her] health plan? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPPRES

57. / HELPPRES

Did anyone from your child's health plan, doctor's office, or clinic help you get your child's prescription medicines?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

REGDENT

57a. / REGDENT

A regular dentist is one you would go to for check-ups and cleanings or when [he/she] has a cavity or tooth pain.

Does your child have a regular dentist?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

DNTASAP

57b. / DNTASAP

In the last 6 months, if your child needed to see a dentist right away because of a DENTAL EMERGENCY, did [he/she] get to see a dentist as soon as you wanted? Would you say...?

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?
5. DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS (DO NOT READ)

DK/REFUSAL/NOT ASCERTAINED

CHTREAT

57c. / CHTREAT

Choices for your child's treatment or health care can include choices about medicine, surgery, or other treatment.

In the last 6 months, did your provider tell you there was more than one choice for your child's treatment or health care?

1. YES
2. NO -----> RESPCHT

DK/REFUSAL/NOT ASCERTAINED --> RESPCHT

PCTREAT

57d. / PCTREAT

In the last 6 months, did your provider talk with you about the pros and cons of each choice for your child's treatment or health care?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

BSTREAT

57e. / BSTREAT

In the last 6 months, when there was more than one choice for your child's treatment or health care, did your provider ask you which choice was best for your child?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

RESPCHT

57f. / RESPCHT

In the last 6 months, how often did your child's provider respect what health care and treatment choices you thought work best for your child? Would you say...?

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED

ENCORQC

57g. / ENCORQC

In the last 6 months, how often did your child's provider encourage you to ask questions and raise concerns? Would you say...?

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED

EASYQC

57h. / EASYQC

In the last 6 months, how often did your child's provider make it easy for you to ask questions and raise concerns? Would you say...?

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED

HLTSTA4

58. / HLTSTA4

In general, how would you rate your child's overall health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

MNTLSTAT

59. / MNTLSTAT

In general, how would you rate your child's overall MENTAL OR EMOTIONAL health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CUSEMED

60. / CUSEMED

Other than vitamins, does your child currently need or use medicine prescribed by a doctor?

1. YES
2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

WHYMEDA

61. / WHYMEDA

Is this because of any medical, behavioral, or other health condition?

1. YES
2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

WHYMEDB

62. / WHYMEDB

Is this a condition that has lasted or is expected to last for at least 12 months?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

MOREMED

63. / MOREMED

Does your child need or use more medical care, more mental health services, or more educational services than is usual for most children of the same age?

1. YES
2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

WHYMOREA

64. / WHYMOREA

Is this because of any medical, behavioral, or other health condition?

1. YES
2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

WHYMOREB

65. / WHYMOREB

Is this a condition that has lasted or is expected to last for at least 12 months?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

LIMITED

66. / LIMITED

Is your child limited or prevented in any way in [his/her] ability to do the things most children of the same age can do?

1. YES
2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --> SPECTHP

WHYLIMA

67. / WHYLIMA

Is this because of any medical, behavioral, or other health condition?

1. YES
2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --> SPECTHP

WHYLIMB

68. / WHYLIMB

Is this a condition that has lasted or is expected to last for at least 12 months?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

SPECTHP

69. / SPECTHP

Does your child need or get special therapy such as physical, occupational, or speech therapy?

1. YES
2. NO -----> CHCOUNS

DK/REFUSAL/NOT ASCERTAINED --> CHCOUNS

WHYSTA

70. / WHYSTA

Is this because of any medical, behavioral, or other health condition?

1. YES
2. NO -----> CHCOUNS

DK/REFUSAL/NOT ASCERTAINED --> CHCOUNS

WHYSTB

71. / WHYSTB

Is this a condition that has lasted or is expected to last for at least 12 months?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

CHCOUNS

72. / CHCOUNS

Does your child have any kind of emotional, developmental, or behavioral problem for which [he/she] needs or gets treatment or counseling?

1. YES
2. NO -----> CAGE

DK/REFUSAL/NOT ASCERTAINED --> CAGE

TIMCOUNA

73. / TIMCOUNA

Has this problem lasted or is it expected to last for at least 12 months?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

CAGE

74. / CAGE

I have just a few more questions.

What is YOUR CHILD'S age?

(IWER: ENTER 00 IF LESS THAN 1 YEAR OLD)

(IWER: IF NEEDED CLARIFY, "Please answer based on your child's age as of their last birthday.")

___ ENTER CHILD'S AGE

DK/REFUSAL/NOT ASCERTAINED

CGENDER

75. / CGENDER

(IF NEEDED: "Is your child male or female?")

1. MALE
2. FEMALE

REFUSAL/NOT ASCERTAINED

LATINO

76. / LATINO

Is your child of Hispanic or Latino origin or descent?

1. YES / HISPANIC OR LATINO
2. NO / NOT HISPANIC OR LATINO

DK/REFUSAL/NOT ASCERTAINED

INTRO.RACE

INTRO.RACE

I am going to read a list of race categories. For each category, please say YES or NO if it describes your child's race. I must ask you about all categories in case more than one applies.

PQRACE3.(1-6)

77.1-6) / PQRACE3.(1-6)

[(Is your child)]

1. "White"
2. "Black or African-American"
3. "Asian"
4. "Native Hawaiian or other Pacific Islander"
5. "American Indian or Alaska Native"
6. "Some other race"

(IWER: IF R REPLIES "WHY ARE YOU ASKING ABOUT MY CHILD'S RACE?" SAY "We ask about your child's race for demographic purposes only. We want to be sure that the people we survey accurately represent the racial diversity of managed care enrollees in this country.")

(IWER: If R answers with a category not listed here, such as "HISPANIC" or "AMERICAN" or "MIXED RACE", probe using the category "OTHER".)

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

PAGE

78. / PAGE

Now I have a few questions about you. What is YOUR age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your last birthday.")

(READ IF NEEDED, "Are you...")

0. UNDER 18,
1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PGENDER

79. / PGENDER

(IWER: ENTER RESPONDENT'S SEX. "DK" NOT ALLOWED.)

(IWER: IF NECESSARY ASK, "Are you male or female?")

1. MALE
2. FEMALE

EDUCAT

80. / EDUCAT

What is the highest grade or level of school that you have COMPLETED?
Did you complete...

(IWER: IF R SAYS HE/SHE HAD NON-ACADEMIC TRAINING, SUCH AS TRADE
SCHOOL, PROBE: "Did you receive a high school diploma or GED?")

(IWER: ACADEMIC TRAINING BEYOND A HIGH SCHOOL DIPLOMA THAT DOES NOT
LEAD TO A BACHELORS DEGREE, SHOULD BE CODED "4". IF R WENT TO BUSINESS
SCHOOL OR GOT A 3-YEAR NURSING DEGREE, ENTER "4")

(IWER: IF R OFFERS MORE THAN ONE RESPONSE, FOR EXAMPLE: "SOME HIGH
SCHOOL OR GED", ENTER THE HIGHEST NUMBER THAT APPLIES.)

(READ LIST)

1. 8TH GRADE OR LESS,
2. SOME HIGH SCHOOL, BUT DID NOT GRADUATE,
3. HIGH SCHOOL GRADUATE OR GED,
4. SOME COLLEGE OR 2-YEAR DEGREE,
5. 4-YEAR COLLEGE GRADUATE, OR
6. MORE THAN A 4-YEAR COLLEGE DEGREE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHRELT

81. / CHRELT

How are you related to the child?

(READ IF NEEDED: "Are you the ...")

1. MOTHER OR FATHER,
2. GRANDPARENT,
3. AUNT OR UNCLE,
4. OLDER BROTHER OR SISTER,
5. OTHER RELATIVE,
6. LEGAL GUARDIAN, OR
7. SOMEONE ELSE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ALL.DONE

THANKS.SCREEN.

Those are all the questions I have.

Thank you for taking part in this important interview.

Have a nice (day/evening). Good bye.