



Trillium Community 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 Trillium Community Health Plan members. Trillium Community 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	
	Trillium Community Health Plan	Overall	Trillium Community Health Plan	Overall
**First mailing - sent	900	15300	900	15300
*First mailing - usable survey returned	189	3240	131	2377
Second mailing - sent	697	12007	748	12648
*Second mailing - usable survey returned	55	979	63	987
*Phone - usable surveys	81	1234	109	1999
Total - usable surveys	325	5453	303	5363
†Ineligible: According to population criteria‡	12	261	8	158
†Ineligible: Deceased	1	39	0	1
†Ineligible: Mentally or physically unable to complete survey	9	207	0	0
†Ineligible: Language barrier	1	52	2	40
Incorrect address AND incorrect phone number	76	1173	83	1296
Refusal/Returned survey blank	43	667	59	729
Nonresponse - Unavailable by mail or phone	433	7448	445	7713
Adjusted Response Rate	37.1%	37.0%	34.0%	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	217 45.6%	130 40.0%	-5.59%
Female	259 54.4%	195 60.0%	5.59%
18-24	99 20.8%	31 9.5%	-11.26%
25-34	122 25.6%	62 19.1%	-6.55%
35-44	104 21.8%	47 14.5%	-7.39%
45-54	76 16.0%	74 22.8%	6.80%
55-64	58 12.2%	89 27.4%	15.20%
65-74	14 2.9%	13 4.0%	1.06%
75 or Older	3 0.6%	9 2.8%	2.14%

Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	257 51.0%	151 49.8%	-1.16%
Female	247 49.0%	152 50.2%	1.16%
<3	100 19.8%	59 19.5%	-0.37%
4-7	128 25.4%	81 26.7%	1.34%
8-12	141 28.0%	88 29.0%	1.07%
13 or older	135 26.8%	75 24.8%	-2.03%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	TCH 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 ILND	AMER IND/ PAC ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q1 YES	319	5345	28	55	43	69	85	24	258	4	4	2	2	8	15	26	277	201	99	121	180
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
NOT ANSWERED	6	108	1			2	2	1	4				1			1	5	3	3	4	2
VALID CASES	319	5345	28	55	43	69	85	24	258	4	4	2	2	8	15	26	277	201	99	121	180
NUMBER OF RESPONDENTS	325	5453	29	55	43	71	87	25	262	4	4	2	3	8	15	27	282	204	102	125	182
	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?

	TCH 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		
Q3 YES	154 49%	2233 43%*	10 36%~	29 53%	13 30%~	38 54%	48 56%	14 56%~	130 50%	3 75%~	1 ~	1 50%~	1 50%~	3 38%~	7 47%~	12 44%~	140 50%~	77 38%*	71 71%*	51 42%*	99 55%*
NO	159 51%	2997 57%*	18 64%~	26 47%	30 70%~	32 46%	37 44%	11 44%~	130 50%	1 25%~	4 100%~	1 50%~	1 50%~	5 63%~	8 53%~	15 56%~	139 50%~	125 62%*	29 29%*	71 58%*	82 45%*
NOT ANSWERED	12	223	1			1	2		2				1			3	2	2	3	1	
VALID CASES	313	5230	28	55	43	70	85	25	260	4	4	2	2	8	15	27	279	202	100	122	181
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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					
	TCH 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	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE			
Q4 NEVER	7 5%	63 3%	1 10%~	2 7%~	1 8%~	1 3%~	2 5%~	5 4%~	~	~	~	~	2 33%~	~	7 6%~	2 3%	5 8%	2 5%~	4 4%~			
SOMETIMES	18 13%	285 14%	1 10%~	6 21%~	4 33%~	3 10%~	2 5%~	1 8%~	14 12%~	1 33%~	~	~	1 33%~	1 17%~	2 20%~	15 12%~	7 10%	9 14%	3 7%~	14 16%~		
USUALLY	41 30%	563 28%	3 30%~	8 29%~	2 17%~	11 37%~	14 33%~	2 15%~	30 26%~	2 67%~	~	~	1 100%~	1 33%~	1 17%~	4 40%~	36 29%~	19 28%	19 30%	16 37%~	23 26%~	
ALWAYS	71 52%	1115 55%	5 50%~	12 43%~	5 42%~	15 50%~	24 57%~	10 77%~	66 57%~	~	~	~	1 100%~	1 33%~	2 33%~	4 40%~	67 54%~	40 59%	30 48%	22 51%~	49 54%~	
#ALWAYS + USUALLY (NET)	112 82%	1678 83%	8 80%~	20 71%~	7 58%~	26 87%~	38 90%~	12 92%~	96 83%~	2 67%~	~	~	1 100%~	1 100%~	2 67%~	3 50%~	8 80%~	103 82%~	59 87%	49 78%	38 88%~	72 80%~
TOP BOX SCORE	71 52%	1115 55%	5 50%~	12 43%~	5 42%~	15 50%~	24 57%~	10 77%~	66 57%~	~	~	~	1 100%~	1 33%~	2 33%~	4 40%~	67 54%~	40 59%	30 48%	22 51%~	49 54%~	
NOT ANSWERED	17	220		1	1	8	6	1	15				1	2	15	9	8	8	9			
VALID CASES	137	2026	10	28	12	30	42	13	115	3		1	1	3	6	10	125	68	63	43	90	
NUMBER OF RESPONDENTS	154	2246	10	29	13	38	48	14	130	3		1	1	3	7	12	140	77	71	51	99	
	100%	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 AT A DOCTOR'S OFFICE OR CLINIC?

	TCH 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- WHTE	AS- IAN AMER	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE				
Q5 YES	221 71%	3616 70%	13 45%	34 63%	31 74%	53 76%	64 75%	20 80%	178 69%	4 100%	3 75%	2 100%	2 67%	7 88%	11 79%	19 70%	195 70%	132 66%*	78 78%*	77 64%*	135 75%
Q5 NO	91 29%	1586 30%	16 55%	20 37%	11 26%	17 24%	21 25%	5 20%	80 31%	1 25%	1 33%	1 12%	1 21%	3 21%	8 30%	82 30%	69 34%*	22 22%*	44 36%*	46 25%	
NOT ANSWERED	13	251		1	1	1	2		4					1		5	3	2	4	1	
VALID CASES	312	5202	29	54	42	70	85	25	258	4	4	2	3	8	14	27	277	201	100	121	181
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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			
	TCH 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	NOT HIS- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q6 NEVER	16 8%	100 3%*	3 25%~	3 9%~	3 10%~	2 4%~	5 9%	~	13 8%~	1 25%~	~	~	~	1 11%~	~	15 9%~	11 9%	5 7%	8 13%	7 6%	
SOMETIMES	38 19%	562 17%	2 17%~	6 19%~	8 28%~	11 23%~	8 15%	2 11%~	28 17%~	1 25%~	1 33%~	2 100%~	1 100%~	1 17%~	1 11%~	5 28%~	32 18%~	23 19%	14 20%	11 17%	25 20%
USUALLY	58 29%	870 27%	5 42%~	11 34%~	8 28%~	13 27%~	13 24%	5 26%~	46 29%~	1 25%~	~	~	~	3 50%~	2 22%~	7 39%~	48 27%~	31 26%	21 30%	17 27%	38 30%
ALWAYS	88 44%	1715 53%*	2 17%~	12 38%~	10 34%~	22 46%~	28 52%	12 63%~	74 46%~	1 25%~	2 67%~	~	~	2 33%~	5 56%~	6 33%~	80 46%~	56 46%	30 43%	28 44%	57 45%
#ALWAYS + USUALLY (NET)	146 73%	2585 80%*	7 58%~	23 72%~	18 62%~	35 73%~	41 76%	17 89%~	120 75%~	2 50%~	2 67%~	~	~	5 83%~	7 78%~	13 72%~	128 73%~	87 72%	51 73%	45 70%	95 75%
TOP BOX SCORE	88 44%	1715 53%*	2 17%~	12 38%~	10 34%~	22 46%~	28 52%	12 63%~	74 46%~	1 25%~	2 67%~	~	~	2 33%~	5 56%~	6 33%~	80 46%~	56 46%	30 43%	28 44%	57 45%
NOT ANSWERED	21	326	1	2	2	5	10	1	17				1	1	2	1	20	11	8	13	8
VALID CASES	200	3247	12	32	29	48	54	19	161	4	3	2	1	6	9	18	175	121	70	64	127
NUMBER OF RESPONDENTS	221 100%	3573 100%	13 100%	34 100%	31 100%	53 100%	64 100%	20 100%	178 100%	4 100%	3 100%	2 100%	2 100%	7 100%	11 100%	19 100%	195 100%	132 100%	78 100%	77 100%	135 100%

[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?

	TCH 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	GOOD & FAIR & POOR	MALE	FE- MALE		
Q7 NONE	69 22%	1271 25%	11 38%~	15 27%	8 19%~	19 27%	13 16%	2 9%~	57 22%	2 ~ 50%~	~	2 ~ 25%~	4 29%~	6 23%~	61 22%~	53 26%*	16 16%	34 28%	34 19%		
1 TIME	60 19%	975 19%	4 14%~	11 20%	10 23%~	14 20%	13 16%	6 26%~	51 20%	1 25%~	~ 50%~	1 33%~	1 25%~	2 14%~	2 8%~	56 20%~	49 24%*	9 9%*	25 20%	33 19%	
2	66 21%	973 19%	5 17%~	11 20%	10 23%~	8 11%*	25 30%*	6 26%~	53 21%	1 25%~	~ 50%~	1 33%~	1 12%~	2 14%~	9 35%~	56 20%~	41 20%	22 22%	27 22%	35 20%	
3	36 12%	600 12%	2 7%~	3 5%*	6 14%~	4 6%*	16 19%*	3 13%~	26 10%	2 ~ 50%~	~	1 33%~	2 25%~	3 21%~	3 12%~	31 11%~	23 11%	11 11%	13 11%	21 12%	
4	22 7%	448 9%	1 3%~	3 5%	5 12%~	4 6%	6 7%	3 13%~	21 8%*	~	~	~	1 12%~	~	22 8%~	13 6%	9 9%	7 6%	15 8%		
5 TO 9	36 12%	631 12%	5 17%~	5 9%	2 5%~	13 19%	7 8%	3 13%~	31 12%	2 50%~	~	~	~	1 7%~	2 8%~	33 12%~	14 7%*	18 18%*	11 9%	24 13%	
10 OR MORE TIMES	21 7%	265 5%	1 3%~	7 13%	2 5%~	8 11%	3 4%	~	18 7%	~	~	~	~	2 14%~	4 15%~	17 6%~	8 4%*	13 13%*	5 4%	16 9%	
NOT ANSWERED	15	290				1	4	2	5					1	1	6	3	4	3	4	
VALID CASES	310	5163	29	55	43	70	83	23	257	4	4	2	3	8	14	26	276	201	98	122	178
NUMBER OF RESPONDENTS	325	5453	29	55	43	71	87	25	262	4	4	2	3	8	15	27	282	204	102	125	182
	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		
TCH 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	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q8 #YES	159 67%	2683 71%	12 67%	26 65%	27 77%	31 62%	46 68%	16 76%	131 66%	3 75%	2 100%	2 100%	2 67%	6 100%	6 60%	16 80%	142 67%	97 66%	55 69%	62 72%	93 65%
NO	79 33%	1081 29%	6 33%	14 35%	8 23%	19 38%	22 32%	5 24%	66 34%	1 25%	~	~	1 33%	4 40%	4 20%	70 33%	50 34%	25 31%	24 28%	50 35%	
NOT ANSWERED	3	79				1	2		3						3	1	2		2	1	
VALID CASES	238	3764	18	40	35	50	68	21	197	4	2	2	3	6	10	20	212	147	80	86	143
NUMBER OF RESPONDENTS	241 100%	3843 100%	18 100%	40 100%	35 100%	51 100%	70 100%	21 100%	200 100%	4 100%	2 100%	2 100%	3 100%	6 100%	10 100%	20 100%	215 100%	148 100%	82 100%	88 100%	144 100%

[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?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
TCH 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 AMER	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q9 YES	134 57%	2125 57%	8 44%~	24 60%~	20 59%~	31 65%~	36 53%~	12 57%~	114 58%~	2 50%~	1 50%~	1 50%~	2 100%~	2 40%~	4 40%~	10 53%~	121 58%~	76 52%*	53 67%*	46 54%	82 58%
NO	100 43%	1611 43%	10 56%~	16 40%~	14 41%~	17 35%~	32 47%~	9 43%~	82 42%~	2 50%~	1 50%~	1 50%~	3 ~ 60%~	6 60%~	9 47%~	89 42%~	70 48%*	26 33%*	39 46%	59 42%	
NOT ANSWERED	7	107			1	3	2		4				1	1		5	2	3	3	3	
VALID CASES	234	3736	18	40	34	48	68	21	196	4	2	2	2	5	10	19	210	146	79	85	141
NUMBER OF RESPONDENTS	241	3843	18	40	35	51	70	21	200	4	2	2	3	6	10	20	215	148	82	88	144
	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]

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

	TCH 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	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE		
Q10 #YES	122 95%	1887 92%	8 100%	22 96%	18 100%	29 94%	34 97%	9 82%	104 95%	2 100%	1 100%	1 100%	2 100%	1 50%	4 100%	9 90%	111 96%	68 93%	50 98%	42 95%	76 96%
NO	7 5%	166 8%		1 4%		2 6%	1 3%	2 18%	5 5%					1 50%		1 10%	5 4%	5 7%	1 2%	2 5%	3 4%
NOT ANSWERED	27	436		1	3	4	7	3	14				1	1	1	2	16	8	9	8	10
VALID CASES	129	2053	8	23	18	31	35	11	109	2	1	1	2	2	4	10	116	73	51	44	79
NUMBER OF RESPONDENTS	156 100%	2489 100%	8 100%	24 100%	21 100%	35 100%	42 100%	14 100%	123 100%	2 100%	1 100%	1 100%	3 100%	3 100%	5 100%	12 100%	132 100%	81 100%	60 100%	52 100%	89 100%

[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			
TCH 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- WHTE	AS- IAN AMER	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE			
Q11 #YES	96 74%	1488 73%	7 88%~	20 87%~	13 72%~	24 77%~	23 66%~	6 55%~	80 73%~	2 100%~	1 ~100%~	1 50%~	4 ~100%~	8 80%~	85 73%~	48 66%*	43 84%*	27 61%~	64 81%*		
NO	33 26%	562 27%	1 12%~	3 13%~	5 28%~	7 23%~	12 34%~	5 45%~	29 27%~	1 ~100%~	1 ~50%~	2 ~100%~	2 ~20%~	31 27%~	25 34%*	8 16%*	17 39%~	15 19%*			
NOT ANSWERED	5	44	1	2		1	1	5						5	3	2	2	3			
VALID CASES	129	2050	8	23	18	31	35	11	109	2	1	1	2	2	4	10	116	73	51	44	79
NUMBER OF RESPONDENTS	134 100%	2094 100%	8 100%	24 100%	20 100%	31 100%	36 100%	12 100%	114 100%	2 100%	1 100%	1 100%	2 100%	2 100%	4 100%	10 100%	121 100%	76 100%	53 100%	46 100%	82 100%

[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	
TCH 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 ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q12 #YES	90 70%	1534 75%	7 88%	13 59%	16 89%	22 71%	25 71%	7 64%	79 73%	2 100%	1 100%	1 100%	1 ~	4 50%	4 100%	86 75%	53 74%	34 67%	27 63%	61 77%	
NO	38 30%	511 25%	1 12%	9 41%	2 11%	9 29%	10 29%	4 36%	29 27%	~	~	2 ~100%	1 50%	6 ~	29 25%	19 26%	17 33%	16 37%	18 23%		
NOT ANSWERED	6	49	2	2	1	1	6							6	4	2	3	3			
VALID CASES	128	2045	8	22	18	31	35	11	108	2	1	1	2	2	4	10	115	72	51	43	79
NUMBER OF RESPONDENTS	134 100%	2094 100%	8 100%	24 100%	20 100%	31 100%	36 100%	12 100%	114 100%	2 100%	1 100%	1 100%	2 100%	2 100%	4 100%	10 100%	121 100%	76 100%	53 100%	46 100%	82 100%

[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?

	TCH 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-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q13 WORST HEALTH CARE POSSIBLE	3	29	1	1	1			2				1		1	2		2		3	
	1%	0.8%	6%	3%	3%			1%				17%		5%	1%		3%		2%	
01		27																		
		0.7%																		
02	6	39		1	2	3		6						6		4	2	2	4	
	3%	1%		3%	6%	6%		3%						3%		3%	3%	2%	3%	
03	7	70	1	1		2	3	6				1		1	6	3	4	4	3	
	3%	2%	6%	3%		4%	4%	3%				17%		5%	3%	2%	5%	5%	2%	
04	6	85	1	2	1	1	1	4					1	1	5	3	3	1	4	
	3%	2%	6%	5%	3%	2%	1%	2%					10%	5%	2%	2%	4%	1%	3%	
05	19	285		3	4	5	6	16	1				2	1	18	11	8	6	13	
	8%	8%		7%	11%	10%	9%	8%	25%				20%	5%	9%	8%	10%	7%	9%	
06	17	223	1	2	2	4	4	15				1	1	15	6	9	5	11		
	7%	6%	6%	5%	6%	8%	6%	8%				17%		5%	7%	4%*	11%	6%	8%	
07	34	493	3	5	6	6	9	28		1			2	2	30	24	8	11	21	
	15%	13%	18%	13%	17%	12%	13%	14%		50%			20%	11%	14%	17%	10%	13%	15%	
08	58	772	5	14	6	12	16	43	2	1	2	2	1	3	3	53	38	27	29	
	25%	21%	29%	35%	17%	24%	24%	22%	50%	50%	100%	100%	17%	30%	16%	25%	26%	32%	21%	
09	30	616	2	7	5	5	8	29						1	29	21	9	10	20	
	13%	16%	12%	18%	14%	10%	12%	15%						5%	14%	14%	11%	12%	14%	
BEST HEALTH CARE POSSIBLE	53	1096	3	4	8	11	20	46	1			2	2	8	45	35	16	19	32	
	23%	29%*	18%	10%	23%	22%	30%	24%	25%			33%	20%	42%	22%	24%	20%	22%	23%	
#8-10 (NET)	141	2485	10	25	19	28	44	118	3	1	2	2	3	5	12	127	94	56	81	
	61%	66%*	59%	63%	54%	57%	66%	61%	75%	50%	100%	100%	50%	50%	63%	61%	65%	66%	58%	

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		
	TCH 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		
9-10 (NET)	83 36%	1712 46%*	5 29%~	11 28%~	13 37%~	16 33%~	28 42%	10 50%~	75 38%~	1 25%~	~	~	2 33%~	2 20%~	9 47%~	74 35%~	56 39%	25 32%	29 34%	52 37%	
NOT ANSWERED	8	106	1			2	3	1	5			1			1	6	3	3	3	4	
VALID CASES	233	3737	17	40	35	49	67	20	195	4	2	2	2	6	10	19	209	145	79	85	140
NUMBER OF RESPONDENTS	241 100%	3843 100%	18 100%	40 100%	35 100%	51 100%	70 100%	21 100%	200 100%	4 100%	2 100%	2 100%	3 100%	6 100%	10 100%	20 100%	215 100%	148 100%	82 100%	88 100%	144 100%
MEAN	7.54	7.91	7.18	7.25	7.29	7.31	7.91	8.25	7.57	7.75	7.50	8.00	8.00	6.17	7.20	7.63	7.54	7.80	7.13	7.68	7.45
p stat_(*=Sig @ p<=.05)		.004*	~	~	~	~	.102	~	~	~	~	~	~	~	~	~	~	~.020*	.057	.448	.467

[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?

	TCH 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- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q14 NEVER	10 4%	104 3%	2 12%~	2 5%~	2 6%~	1 2%~	3 4%	9 5%~	~	~	~	~	1 17%~	~	1 5%~	9 4%~	4 3%	5 6%	4 5%	6 4%	
SOMETIMES	44 19%	575 15%	1 6%~	9 23%~	9 26%~	12 24%~	10 15%	35 18%~	1 25%~	1 50%~	1 50%~	~	1 17%~	2 20%~	2 11%~	39 19%~	25 17%	17 22%	9 11%*	31 22%	
USUALLY	70 30%	1243 33%	8 50%~	15 37%~	12 34%~	8 16%~	17 25%	8 29%~	1 25%~	~	1 50%~	1 50%~	1 17%~	4 40%~	4 21%~	64 31%~	42 29%	24 30%	24 28%	44 31%	
ALWAYS	109 47%	1797 48%	5 31%~	14 35%~	12 34%~	28 57%~	37 55%	13 62%~	94 48%~	2 50%~	1 50%~	~	1 50%~	3 50%~	4 40%~	12 63%~	97 46%~	73 51%	33 42%	48 56%*	59 42%
#ALWAYS + USUALLY (NET)	179 77%	3040 82%	13 81%~	29 72%~	24 69%~	36 73%~	54 81%	21 100%~	151 77%~	3 75%~	1 50%~	1 50%~	2 100%~	4 67%~	8 80%~	16 84%~	161 77%~	115 80%	57 72%	72 85%*	103 74%
TOP BOX SCORE	109 47%	1797 48%	5 31%~	14 35%~	12 34%~	28 57%~	37 55%	13 62%~	94 48%~	2 50%~	1 50%~	~	1 50%~	3 50%~	4 40%~	12 63%~	97 46%~	73 51%	33 42%	48 56%*	59 42%
NOT ANSWERED	8	124	2			2	3		5				1		1	6	4	3	3	4	
VALID CASES	233	3719	16	40	35	49	67	21	195	4	2	2	2	6	10	19	209	144	79	85	140
NUMBER OF RESPONDENTS	241 100%	3843 100%	18 100%	40 100%	35 100%	51 100%	70 100%	21 100%	200 100%	4 100%	2 100%	2 100%	3 100%	6 100%	10 100%	20 100%	215 100%	148 100%	82 100%	88 100%	144 100%

[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	
TCH 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	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q15 YES	257 83%	4201 81%	20 69%~	39 72%	36 84%~	58 83%	77 91%*	23 92%~	215 83%	4 100%~	3 75%~	1 50%~	1 50%~	7 88%~	14 93%~	19 73%~	233 84%~	159 80%*	89 88%	100 82%	151 83%
NO	54 17%	995 19%	9 31%~	15 28%	7 16%~	12 17%	8 9%*	2 8%~	45 17%	1 ~	1 25%~	1 50%~	1 50%~	1 12%~	1 7%~	7 27%~	46 16%~	41 20%*	12 12%	22 18%	31 17%
NOT ANSWERED	14	257	1	1	1	2		2			1				1	3	4	1	3		
VALID CASES	311	5196	29	54	43	70	85	25	260	4	4	2	2	8	15	26	279	200	101	122	182
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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

	TCH 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- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE				
Q16 NONE	43	713	6	11	6	10	8	2	42							1	1	42	37	6	22	21
	18%	18%	32%~	28%~	17%~	19%	11%	9%~	20%~	~	~	~	~	~	8%~	6%~	19%~	25%*	7%*	24%	14%	
1 TIME	60	973	6	8	10	11	17	6	46	2			1	4	3	6	51	44	14	27	31	
	25%	24%	32%~	21%~	29%~	21%	24%	26%~	22%~	50%~	~	~	100%~	67%~	25%~	33%~	23%~	29%*	16%*	29%	21%	
2	60	1005	2	7	9	10	26	6	51			1		2	2	6	54	33	26	19	39	
	25%	25%	11%~	18%~	26%~	19%	36%*	26%~	25%~	~	~	100%~	~	33%~	17%~	33%~	24%~	22%	31%	21%	27%	
3	29	534	2	5	6	2	11	1	20		2				4	1	26	16	11	10	17	
	12%	13%	11%~	13%~	17%~	4%*	15%	4%~	10%~	~	67%~	~	~	~	33%~	6%~	12%~	11%	13%	11%	12%	
4	19	322		3	1	5	5	5	17	1					1		19	8	10	3	16	
	8%	8%	~	8%~	3%~	10%	7%	22%~	8%~	25%~	~	~	~	~	8%~	~	9%~	5%	12%	3%*	11%*	
5 TO 9	25	403	3	3	3	9	4	3	22	1	1				1	3	22	10	13	9	16	
	10%	10%	16%~	8%~	9%~	17%	6%	13%~	11%~	25%~	33%~	~	~	~	8%~	17%~	10%~	7%*	15%	10%	11%	
10 OR MORE TIMES	8	75		2		5	1		7							1	7	3	5	2	6	
	3%	2%	~	5%~	~	10%	1%	~	3%~	~	~	~	~	~	~	6%~	3%~	2%	6%	2%	4%	
NOT ANSWERED	13	238	1		1	6	5		10					1	2	1	12	8	4	8	5	
VALID CASES	244	4026	19	39	35	52	72	23	205	4	3	1	1	6	12	18	221	151	85	92	146	
NUMBER OF RESPONDENTS	257	4264	20	39	36	58	77	23	215	4	3	1	1	7	14	19	233	159	89	100	151	
	100%	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			
	TCH 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- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FEMALE		
Q17 NEVER	4 2%	47 1%	1 8%~	1 4%~	1 3%~	~	1 2%	~	4 2%~	~	~	~	~	~	~	4 2%~	2 2%	2 3%	1 1%	3 2%	
SOMETIMES	17 8%	196 6%	2 15%~	4 14%~	2 7%~	6 14%~	1 2%*	~	13 8%~	1 25%~	~	~	~	1 9%~	1 6%~	14 8%~	5 4%*	9 11%	4 6%	11 9%	
USUALLY	47 23%	719 22%	2 15%~	10 36%~	8 28%~	8 19%~	11 17%	8 38%~	35 21%~	2 50%~	1 33%~	~	3 50%~	2 18%~	7 41%~	40 22%~	28 25%	18 23%	14 20%	33 26%	
ALWAYS	133 66%	2245 70%	8 62%~	13 46%~	18 62%~	28 67%~	51 80%*	13 62%~	111 68%~	1 25%~	2 67%~	1 100%~	1 100%~	3 50%~	8 73%~	9 53%~	121 68%~	79 69%	50 63%	51 73%	78 62%
#ALWAYS + USUALLY (NET)	180 90%	2963 92%	10 77%~	23 82%~	26 90%~	36 86%~	62 97%*	21 100%~	146 90%~	3 75%~	3 100%~	1 100%~	1 100%~	6 91%~	10 94%~	161 90%~	107 94%*	68 86%	65 93%	111 89%	
TOP BOX SCORE	133 66%	2245 70%	8 62%~	13 46%~	18 62%~	28 67%~	51 80%*	13 62%~	111 68%~	1 25%~	2 67%~	1 100%~	1 100%~	3 50%~	8 73%~	9 53%~	121 68%~	79 69%	50 63%	51 73%	78 62%
NOT ANSWERED		22																			
VALID CASES	201	3206	13	28	29	42	64	21	163	4	3	1	1	6	11	17	179	114	79	70	125
NUMBER OF RESPONDENTS	201 100%	3228 100%	13 100%	28 100%	29 100%	42 100%	64 100%	21 100%	163 100%	4 100%	3 100%	1 100%	1 100%	6 100%	11 100%	17 100%	179 100%	114 100%	79 100%	70 100%	125 100%

[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		
	TCH 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- WHT	AS- IAN	NATV PAC ILND	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FEMALE		
Q18 NEVER	5 2%	67 2%	1 8%~	2 7%~	1 3%~	1 2%~	~	~	5 3%~	~	~	~	~	~	~	5 3%~	2 2%	3 4%	1 1%	4 3%	
SOMETIMES	15 7%	251 8%	1 8%~	2 7%~	2 7%~	4 10%~	4 6%	1 5%~	11 7%~	~	~	~	~	~	1 9%~	2 12%~	12 7%~	7 6%	6 8%	4 6%	10 8%
USUALLY	51 25%	665 21%	4 31%~	10 36%~	7 24%~	14 33%~	9 14%*	5 24%~	42 26%~	1 25%~	~	~	~	2 33%~	2 18%~	4 24%~	44 25%~	31 27%	16 20%	21 30%	28 23%
ALWAYS	129 65%	2214 69%	7 54%~	14 50%~	19 66%~	23 55%~	50 79%*	15 71%~	104 64%~	3 75%~	3 100%~	1 100%~	1 100%~	4 67%~	8 73%~	11 65%~	117 66%~	73 65%	54 68%	44 63%	82 66%
#ALWAYS + USUALLY (NET)	180 90%	2879 90%	11 85%~	24 86%~	26 90%~	37 88%~	59 94%	20 95%~	146 90%~	4 100%~	3 100%~	1 100%~	1 100%~	6 100%~	10 91%~	15 88%~	161 90%~	104 92%	70 89%	65 93%	110 89%
TOP BOX SCORE	129 65%	2214 69%	7 54%~	14 50%~	19 66%~	23 55%~	50 79%*	15 71%~	104 64%~	3 75%~	3 100%~	1 100%~	1 100%~	4 67%~	8 73%~	11 65%~	117 66%~	73 65%	54 68%	44 63%	82 66%
NOT ANSWERED	1	31					1		1							1	1				1
VALID CASES	200	3197	13	28	29	42	63	21	162	4	3	1	1	6	11	17	178	113	79	70	124
NUMBER OF RESPONDENTS	201 100%	3228 100%	13 100%	28 100%	29 100%	42 100%	64 100%	21 100%	163 100%	4 100%	3 100%	1 100%	1 100%	6 100%	11 100%	17 100%	179 100%	114 100%	79 100%	70 100%	125 100%

[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		
	TCH 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- WHT	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		
Q19 NEVER	8 4%	85 3%	1 8%	3 11%	2 7%	1 2%	1 2%	8 5%	~	~	~	~	~	~	~	8 4%	4 4%	4 5%	2 3%	6 5%	
SOMETIMES	11 6%	193 6%	1 8%	2 7%	2 7%	3 7%	2 3%	1 5%	8 5%	~	~	~	~	1 9%	2 12%	9 5%	6 5%	5 6%	4 6%	7 6%	
USUALLY	35 18%	575 18%	1 8%	6 21%	5 17%	13 31%	7 11%	3 15%	32 20%	1 25%	~	~	1 17%	1 9%	35 20%	22 19%	10 13%	15 22%	20 16%		
ALWAYS	145 73%	2339 73%	10 77%	17 61%	20 69%	25 60%	54 84%*	16 80%	114 70%	3 75%	3 100%	1 100%	1 100%	5 83%	9 82%	15 88%	126 71%	82 72%	59 76%	48 70%	92 74%
#ALWAYS + USUALLY (NET)	180 90%	2915 91%	11 85%	23 82%	25 86%	38 90%	61 95%	19 95%	146 90%	4 100%	3 100%	1 100%	1 100%	6 91%	10 88%	161 90%	104 91%	69 88%	63 91%	112 90%	
TOP BOX SCORE	145 73%	2339 73%	10 77%	17 61%	20 69%	25 60%	54 84%*	16 80%	114 70%	3 75%	3 100%	1 100%	1 100%	5 83%	9 82%	15 88%	126 71%	82 72%	59 76%	48 70%	92 74%
NOT ANSWERED	2	35					1	1							1		1	1			
VALID CASES	199	3193	13	28	29	42	64	20	162	4	3	1	1	6	11	17	178	114	78	69	125
NUMBER OF RESPONDENTS	201	3228	13	28	29	42	64	21	163	4	3	1	1	6	11	17	179	114	79	70	125
	100%	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				
	TCH 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- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q20 NEVER	6 3%	95 3%	1 8%	3 11%	1 3%	1 2%	~	~	6 4%	~	~	~	~	~	6 3%	2 2%	4 5%	2 3%	4 3%		
SOMETIMES	17 8%	295 9%	1 8%	5 18%	1 3%	5 12%	4 6%	1 5%	13 8%	1 25%	~	~	~	1 9%	2 12%	15 8%	8 7%	8 10%	4 6%	13 10%	
USUALLY	55 27%	856 27%	4 31%	6 21%	9 31%	12 29%	16 25%	8 38%	45 28%	1 25%	1 100%	3 50%	2 18%	5 29%	49 27%	32 28%	21 27%	24 34%	31 25%		
ALWAYS	122 61%	1950 61%	7 54%	14 50%	18 62%	24 57%	44 69%	12 57%	99 61%	2 50%	3 100%	1 100%	3 50%	8 73%	10 59%	109 61%	72 63%	46 58%	40 57%	77 62%	
#ALWAYS + USUALLY (NET)	177 89%	2806 88%	11 85%	20 71%	27 93%	36 86%	60 94%	20 95%	144 88%	3 75%	3 100%	1 100%	1 100%	6 91%	10 88%	158 88%	104 91%	67 85%	64 91%	108 86%	
TOP BOX SCORE	122 61%	1950 61%	7 54%	14 50%	18 62%	24 57%	44 69%	12 57%	99 61%	2 50%	3 100%	1 100%	3 50%	8 73%	10 59%	109 61%	72 63%	46 58%	40 57%	77 62%	
NOT ANSWERED	1	31																			
VALID CASES	200	3197	13	28	29	42	64	21	163	4	3	1	1	6	11	17	179	114	79	70	125
NUMBER OF RESPONDENTS	201 100%	3228 100%	13 100%	28 100%	29 100%	42 100%	64 100%	21 100%	163 100%	4 100%	3 100%	1 100%	1 100%	6 100%	11 100%	17 100%	179 100%	114 100%	79 100%	70 100%	125 100%

[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	WHITE	BLACK OR AFR-	ASIAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE	
Q21	TCH TOT ADLT	18	25	35	45	55	65														
YES	126 63%	8 62%	18 64%	19 66%	28 67%	40 63%	13 62%	107 66%	3 75%	2 67%			4 67%	6 55%	9 53%	117 65%	70 61%	52 66%	41 59%	84 67%	
NO	74 37%	5 38%	10 36%	10 34%	14 33%	24 37%	8 38%	56 34%	1 25%	1 33%	1 100%	1 100%	2 33%	5 45%	8 47%	62 35%	44 39%	27 34%	29 41%	41 33%	
NOT ANSWERED	1																				
VALID CASES	200	13	28	29	42	64	21	163	4	3	1	1	6	11	17	179	114	79	70	125	
NUMBER OF RESPONDENTS	201 100%	13 100%	28 100%	29 100%	42 100%	64 100%	21 100%	163 100%	4 100%	3 100%	1 100%	1 100%	6 100%	11 100%	17 100%	179 100%	114 100%	79 100%	70 100%	125 100%	

[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		
TCH 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	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & POOR	FAIR & POOR	FE- MALE	MALE	
Q22 NEVER	8 7%	119 6%	1 13%~	2 11%~	1 6%~	2 7%~	2 5%~	7 7%~	~	~	~	~	1 25%~	1 11%~	7 6%~	2 3%	6 12%	3 8%~	5 6%~	
SOMETIMES	14 11%	265 14%	1 13%~	3 17%~	2 11%~	4 14%~	3 8%~	1 10%~	1 33%~	~	~	~	1 25%~	1 11%~	13 12%~	6 9%	6 12%	2 5%~	12 15%~	
USUALLY	40 33%	545 29%	2 25%~	9 50%~	4 22%~	9 32%~	11 29%~	5 42%~	36 34%~	1 50%~	~	~	1 25%~	4 44%~	36 32%~	23 35%	17 33%	19 49%~	21 26%~	
ALWAYS	60 49%	927 50%	4 50%~	4 22%~	11 61%~	13 46%~	22 58%~	6 50%~	51 49%~	2 67%~	1 50%~	~	2 50%~	3 75%~	57 33%~	35 53%	23 44%	15 38%~	44 54%~	
#ALWAYS + USUALLY (NET)	100 82%	1472 79%	6 75%~	13 72%~	15 83%~	22 79%~	33 87%~	11 92%~	87 83%~	2 67%~	2 100%~	~	3 75%~	3 75%~	93 78%~	58 88%	40 77%	34 87%~	65 79%~	
TOP BOX SCORE	60 49%	927 50%	4 50%~	4 22%~	11 61%~	13 46%~	22 58%~	6 50%~	51 49%~	2 67%~	1 50%~	~	2 50%~	3 75%~	57 33%~	35 53%	23 44%	15 38%~	44 54%~	
NOT ANSWERED	4	61			1		2	1	2				2		4	4		2	2	
VALID CASES	122	1856	8	18	18	28	38	12	105	3	2		4	4	9	113	66	52	39	82
NUMBER OF RESPONDENTS	126	1917	8	18	19	28	40	13	107	3	2		4	6	9	117	70	52	41	84
	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				
	TCH 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				
Q23 WORST PERSONAL DOCTOR POSSIBLE	2 0.8%	60 2%	~	~	2 6%	~	~	~	1 0.5%	~	~	~	1 14%	1 5%	1 0.5%	1 0.7%	1 1%	1 0.7%			
01	6 2%	30 0.7%	2 11%	1 3%	1 3%	2 4%	~	6 3%	~	~	~	~	~	6 3%	4 3%	2 2%	1 1%	5 3%			
02	1 0.4%	27 0.7%	~	1 3%	~	~	~	~	~	~	~	~	~	1 5%	~	1 1%	~	1 0.7%			
03	5 2%	71 2%	~	2 6%	1 3%	1 2%	1 1%	4 2%	~	~	~	~	1 8%	1 5%	4 2%	4 3%	1 1%	2 2%	3 2%		
04	1 0.4%	80 2%	~	~	~	~	1 1%	1 0.5%	~	~	~	~	~	1 0.5%	~	1 1%	~	1 0.7%			
05	18 7%	203 5%	4 21%	3 8%	3 8%	4 8%	2 3%*	2 9%	17 8%	~	~	~	~	18 8%	10 7%	8 9%	7 8%	11 8%			
06	8 3%	153 4%	~	2 6%	~	3 6%	2 3%	7 3%	~	~	~	~	~	7 3%	3 2%	4 5%	2 2%	5 3%			
07	19 8%	289 7%	1 5%	2 6%	3 8%	4 8%	7 10%	2 9%	16 8%	~	~	~	2 29%	1 8%	18 8%	10 7%	8 9%	7 8%	12 8%		
08	52 21%	720 18%	2 11%	8 22%	7 19%	15 28%	14 19%	6 26%	45 22%	1 33%	~	~	1 14%	3 23%	3 16%	48 22%	37 25%	15 18%	27 27%	27 19%	
09	46 19%	743 19%	5 26%	7 19%	5 14%	6 11%	19 26%	2 9%	35 17%	1 33%	1 33%	1 100%	1 100%	3 23%	5 26%	39 18%	32 21%	13 15%	17 18%	27 19%	
BEST PERSONAL DOCTOR POSSIBLE	84 35%	1623 41%	5 26%	10 28%	14 39%	18 34%	26 36%	11 48%	71 35%	1 33%	2 67%	1 100%	1 100%	3 43%	5 38%	7 37%	77 35%	49 33%	32 38%	30 33%	52 36%
#8-10 (NET)	182 75%	3087 77%	12 63%	25 69%	26 72%	39 74%	59 82%	19 83%	151 74%	3 100%	3 100%	1 100%	1 100%	4 57%	11 85%	15 79%	164 75%	118 79%	60 71%	72 78%	106 73%

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		
	TCH 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- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE			
9-10 (NET)	130 54%	2366 59%	10 53%~	17 47%~	19 53%~	24 45%	45 62%	13 57%~	106 52%~	2 67%~	3 100%~	1 100%~	1 100%~	3 43%~	8 62%~	12 63%~	116 53%~	81 54%	45 53%	47 51%	79 54%
NOT ANSWERED	15	265	1	3		5	5		12	1				1		14	9	4	8	6	
VALID CASES	242	3999	19	36	36	53	72	23	203	3	3	1	1	7	13	19	219	150	85	92	145
NUMBER OF RESPONDENTS	257 100%	4264 100%	20 100%	39 100%	36 100%	58 100%	77 100%	23 100%	215 100%	4 100%	3 100%	1 100%	1 100%	7 100%	14 100%	19 100%	233 100%	159 100%	89 100%	100 100%	151 100%
MEAN	8.13	8.32	7.37	7.69	7.81	8.02	8.62	8.70	8.11	9.00	9.67	10.0	9.00	7.43	8.54	7.95	8.15	8.19	8.09	8.22	8.06
p stat_(*=Sig @ p<=.05)		.159	~	~	~.674	.008*		~	~	~	~	~	~	~	~	~	~	.633	.844	.630	.497

[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?

	TCH 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/ IND/ PAC ALSK	AMER ILND NATV OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q24 YES	131 42%	2074 40%	10 34%~	17 31%	17 40%~	31 44%	43 50%	11 44%~	110 42%	3 75%~	2 50%~	1 ~	3 33%~	7 38%~	10 37%~	119 42%~	71 35%*	55 54%*	50 40%	77 42%	
NO	183 58%	3119 60%	19 66%~	38 69%	26 60%~	40 56%	43 50%	14 56%~	151 58%	1 25%~	2 50%~	2 100%~	2 67%~	5 63%~	8 53%~	17 63%~	162 58%~	132 65%*	47 46%*	74 60%	105 58%
NOT ANSWERED	11	260					1		1						1	1			1		
VALID CASES	314	5193	29	55	43	71	86	25	261	4	4	2	3	8	15	27	281	203	102	124	182
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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				
	TCH 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- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q25 NEVER	12 9%	135 7%	~	~	3 18%	4 13%	5 12%	~	12 11%	~	~	~	~	~	1 10%	11 9%	6 8%	6 11%	2 4%	10 13%*	
SOMETIMES	16 12%	292 15%	2 20%	4 25%	1 6%	4 13%	5 12%	~	12 11%	1 50%	1 50%	~	~	2 29%	~	16 14%	7 10%	9 17%	5 10%	11 15%	
USUALLY	42 33%	614 31%	1 10%	10 63%	5 29%	11 37%	10 23%	4 36%	34 31%	1 50%	1 50%	~	1 100%	2 67%	~	4 40%	37 32%	18 25%	21 39%	19 38%	21 28%
ALWAYS	59 46%	926 47%	7 70%	2 12%	8 47%	11 37%	23 53%	7 64%	51 47%	~	~	~	~	1 33%	5 71%	5 50%	53 45%	40 56%*	18 33%*	24 48%	33 44%
#ALWAYS + USUALLY (NET)	101 78%	1540 78%	8 80%	12 75%	13 76%	22 73%	33 77%	11 100%	85 78%	1 50%	1 50%	~	1 100%	3 100%	5 71%	9 90%	90 77%	58 82%	39 72%	43 86%	54 72%*
TOP BOX SCORE	59 46%	926 47%	7 70%	2 12%	8 47%	11 37%	23 53%	7 64%	51 47%	~	~	~	~	1 33%	5 71%	5 50%	53 45%	40 56%*	18 33%*	24 48%	33 44%
NOT ANSWERED	2	78	~	1	~	1	~	~	1	1	~	~	~	~	~	2	~	1	~	2	
VALID CASES	129	1967	10	16	17	30	43	11	109	2	2	~	1	3	7	10	117	71	54	50	75
NUMBER OF RESPONDENTS	131	2045	10	17	17	31	43	11	110	3	2	~	1	3	7	10	119	71	55	50	77
	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		
	TCH 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- WHT	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		
Q26 NONE	9 7%	93 5%	~	1 6%	2 12%	3 10%	3 7%	~	8 7%	~	~	~	~	1 14%	~	9 8%	7 10%	2 4%	3 6%	6 8%	
1 SPECIALIST	66 51%	1033 52%	7 70%	10 59%	12 71%	11 37%	20 47%	5 45%	55 50%	2 ~100%	~	~	3 ~100%	4 57%	5 50%	60 51%	41 58%	24 44%	26 52%	38 50%	
2	31 24%	522 26%	3 30%	2 12%	3 18%	9 30%	10 23%	3 27%	26 24%	~	~	~	~	2 29%	2 20%	28 24%	14 20%	16 30%	12 24%	17 22%	
3	20 15%	217 11%	~	2 12%	~	6 20%	9 21%	3 27%	18 17%	2 67%	~	~	~	~	3 30%	17 14%	8 11%	10 19%	8 16%	12 16%	
4	3 2%	74 4%	~	2 12%	~	1 3%	~	~	1 0.9%	1 33%	~	~	1 ~100%	~	~	3 3%	1 1%	1 2%	1 2%	2 3%	
5 OR MORE SPECIALISTS	1 0.8%	41 2%	~	~	~	~	1 2%	~	1 0.9%	~	~	~	~	~	1 ~0.8%	~	1 ~	1 2%	~	1 1%	
NOT ANSWERED	1	66				1			1						1		1		1		
VALID CASES	130	1979	10	17	17	30	43	11	109	3	2		1	3	7	10	118	71	54	50	76
NUMBER OF RESPONDENTS	131	2045	10	17	17	31	43	11	110	3	2		1	3	7	10	119	71	55	50	77
	100%	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?

	AGE							RACE					ETHNICITY	HEALTH STATUS		GENDER					
	TCH 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	FE- MALE	MALE				
Q27 WORST SPECIALIST POSSIBLE	2 2%	21 1%	~	~	~	~	5%~	~	2 2%~	~	~	~	~	~	2 2%~	~	2 4%~	~	2 3%~		
01	2 2%	7 0.4%	1 10%~	1 6%~	~	~	~	~	1 1%~	~	~	~	1 17%~	~	2 2%~	~	2 4%~	~	2 3%~		
02		19 1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
03	2 2%	28 2%	~	1 6%~	~	~	3%~	~	2 2%~	~	~	~	~	~	2 2%~	~	2 4%~	~	2 3%~		
04		18 1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
05	8 7%	88 5%	1 10%~	1 6%~	~	4 16%~	2 5%~	~	8 8%~	~	~	~	~	~	1 10%~	7 7%~	5 8%	2 4%	6 13%~	2 3%	
06	6 5%	76 4%	2 20%~	~	~	2 8%~	1 3%~	1 10%~	5 5%~	~	~	~	~	1 17%~	6 6%~	2 3%	4 8%	2 4%~	4 6%		
07	13 11%	154 8%	~	3 19%~	2 13%~	3 12%~	5 13%~	~	13 13%~	~	~	~	~	~	13 12%~	5 8%	8 15%	3 6%~	10 15%		
08	19 16%	272 15%	1 10%~	3 19%~	4 27%~	3 12%~	8 20%~	~	15 15%~	1 33%~	~	1 100%~	2 67%~	~	2 20%~	17 16%~	14 23%*	5 10%	8 17%~	11 16%	
09	21 18%	345 19%	2 20%~	3 19%~	3 20%~	6 24%~	6 15%~	1 10%~	18 18%~	1 33%~	~	~	~	~	3 30%~	18 17%~	11 18%	9 17%	9 19%~	12 18%	
BEST SPECIALIST POSSIBLE	45 38%	812 44%	3 30%~	4 25%~	6 40%~	7 28%~	15 38%~	8 80%~	34 35%~	1 33%~	2 100%~	~	1 33%~	4 67%~	4 40%~	39 37%~	25 40%	18 35%	19 40%~	23 34%	
#8-10 (NET)	85 72%	1429 78%	6 60%~	10 63%~	13 87%~	16 64%~	29 73%~	9 90%~	67 68%~	3 100%~	2 100%~	~	1 100%~	3 100%~	4 67%~	9 90%~	74 70%~	50 81%*	32 62%*	36 77%~	46 68%

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		
	TCH 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-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	OTH	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE			
9-10 (NET)	66 56%	1157 63%	5 50%~	7 44%~	9 60%~	13 52%~	21 53%~	9 90%~	52 53%~	2 67%~	2 100%~	1 ~	4 ~	7 70%~	57 54%~	36 58%	27 52%	28 60%~	35 51%	
NOT ANSWERED	3	34				2	1		3						3	2		2		
VALID CASES	118	1838	10	16	15	25	40	10	98	3	2	1	3	6	10	106	62	52	47	68
NUMBER OF RESPONDENTS	121 100%	1872 100%	10 100%	16 100%	15 100%	27 100%	40 100%	11 100%	101 100%	3 100%	2 100%	1 100%	3 100%	6 100%	10 100%	109 100%	64 100%	52 100%	47 100%	70 100%
MEAN	8.19	8.47	7.40	7.56	8.87	8.04	8.05	9.50	8.06	9.00	10.0	8.00	8.67	7.83	8.80	8.09	8.60	7.67	8.47	7.91
p stat_(*=Sig @ p<=.05)		.106	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~.040*	.037*	~	.099

[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		
TCH 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	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q28 YES	83 27%	1182 23%	10 34%	13 24%	14 33%	13 19%	24 28%	7 28%	71 27%	1 25%	3 75%	1 50%	1 12%	3 20%	2 7%	78 28%	55 27%	26 26%	33 27%	48 27%	
NO	229 73%	3968 77%	19 66%	42 76%	29 67%	56 81%	62 72%	18 72%	189 73%	3 75%	1 25%	2 100%	1 50%	7 88%	12 80%	25 93%	201 72%	147 73%	75 74%	91 73%	133 73%
NOT ANSWERED	13	303				2	1		2			1			3	2	1		1	1	
VALID CASES	312	5150	29	55	43	69	86	25	260	4	4	2	2	8	15	27	279	202	101	124	181
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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?

	TCH 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	OTH-	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE MALE		
Q29 NEVER	7 9%	119 12%	2 20%	2 ~	2 14%	1 15%	1 4%	7 10%	~	~	~	~	~	~	7 9%	4 7%	3 12%	1 3%	6 13%	
SOMETIMES	31 38%	339 34%	5 50%	7 54%	6 43%	4 31%	7 30%	2 29%	27 39%	2 ~	1 ~	1 ~	1 ~	2 ~	30 39%	22 40%	8 32%	15 47%	16 33%	
USUALLY	25 30%	332 33%	2 20%	3 23%	2 14%	3 23%	10 43%	4 57%	19 27%	1 100%	1 33%	~	~	2 ~	1 50%	23 30%	16 29%	8 32%	9 28%	15 31%
ALWAYS	19 23%	213 21%	1 10%	3 23%	4 29%	4 31%	5 22%	1 14%	17 24%	~	~	~	~	1 33%	1 50%	17 22%	13 24%	6 24%	7 22%	11 23%
#ALWAYS + USUALLY (NET)	44 54%	545 54%	3 30%	6 46%	6 43%	7 54%	15 65%	5 71%	36 51%	1 100%	1 33%	~	~	3 ~	2 100%	40 100%	29 52%	14 53%	16 56%	26 54%
TOP BOX SCORE	19 23%	213 21%	1 10%	3 23%	4 29%	4 31%	5 22%	1 14%	17 24%	~	~	~	~	1 33%	1 50%	17 22%	13 24%	6 24%	7 22%	11 23%
NOT ANSWERED	1	19					1		1						1		1		1	
VALID CASES	82	1003	10	13	14	13	23	7	70	1	3	1	1	3	2	77	55	25	32	48
NUMBER OF RESPONDENTS	83	1022	10	13	14	13	24	7	71	1	3	1	1	3	2	78	55	26	33	48
	100%	100%	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?

	TCH 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 PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q30 YES	93 30%	1525 30%	11 38%~	11 21%	12 29%~	21 30%	32 37%	5 20%~	75 29%	1 25%~	3 75%~	2 ~	2 67%~	2 25%~	5 38%~	9 35%~	82 30%~	50 25%*	40 40%*	31 26%	60 33%
NO	215 70%	3584 70%	18 62%~	42 79%	30 71%~	48 70%	54 63%	20 80%~	183 71%	3 75%~	1 25%~	2 100%~	1 33%~	6 75%~	8 62%~	17 65%~	195 70%~	149 75%*	61 60%*	89 74%	122 67%
NOT ANSWERED	17	344		2	1	2	1		4						2	1	5	5	1	5	
VALID CASES	308	5109	29	53	42	69	86	25	258	4	4	2	3	8	13	26	277	199	101	120	182
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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		
	TCH 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- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q31 NEVER	5 5%	51 4%	1 9%~	1 9%~	1 8%~	1 5%~	1 3%~	5 7%~	~	~	~	~	~	~	5 6%~	3 6%~	2 5%~	2 6%~	3 5%~		
SOMETIMES	14 15%	295 21%	1 9%~	2 18%~	3 25%~	1 5%~	6 19%~	1 20%~	10 13%~	~	~	1 50%~	1 20%~	3 33%~	11 13%~	6 12%~	8 20%~	3 10%~	11 18%~		
USUALLY	28 30%	400 28%	5 45%~	5 45%~	4 33%~	5 24%~	8 25%~	1 20%~	25 33%~	1 100%~	1 33%~	~	~	3 33%~	24 29%~	17 34%~	11 28%~	11 35%~	17 28%~		
ALWAYS	46 49%	670 47%	4 36%~	3 27%~	4 33%~	14 67%~	17 53%~	3 60%~	35 47%~	2 67%~	~	1 50%~	2 100%~	4 80%~	3 33%~	42 51%~	24 48%~	19 47%~	15 48%~	29 48%~	
#ALWAYS + USUALLY (NET)	74 80%	1070 76%	9 82%~	8 73%~	8 67%~	19 90%~	25 78%~	4 80%~	60 80%~	1 100%~	3 100%~	~	1 50%~	2 100%~	4 80%~	6 67%~	66 80%~	41 82%~	30 75%~	26 84%~	46 77%~
TOP BOX SCORE	46 49%	670 47%	4 36%~	3 27%~	4 33%~	14 67%~	17 53%~	3 60%~	35 47%~	2 67%~	~	1 50%~	2 100%~	4 80%~	3 33%~	42 51%~	24 48%~	19 47%~	15 48%~	29 48%~	
NOT ANSWERED		26																			
VALID CASES	93	1415	11	11	12	21	32	5	75	1	3	2	2	5	9	82	50	40	31	60	
NUMBER OF RESPONDENTS	93 100%	1441 100%	11 100%	11 100%	12 100%	21 100%	32 100%	5 100%	75 100%	1 100%	3 100%	2 100%	2 100%	5 100%	9 100%	82 100%	50 100%	40 100%	31 100%	60 100%	

[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?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	TCH 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- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q32 NEVER	1 1%	24 2%	~	~	~	5%	~	1%	~	~	~	~	~	~	1%	~	3%	~	2%	
SOMETIMES	5 5%	83 6%	~	~	8%	14%	3%	3%	~	~	~	~	40%	11%	5%	4%	7%	10%	3%	
USUALLY	23 25%	312 22%	4%	4%	5%	10%	22%	27%	~	~	50%	20%	1%	22%	26%	30%	20%	29%	23%	
ALWAYS	64 69%	995 70%	64%	64%	50%	71%	75%	69%	100%	100%	~	50%	100%	40%	67%	68%	66%	70%	61%	72%
#ALWAYS + USUALLY (NET)	87 94%	1307 92%	100%	100%	92%	81%	97%	96%	100%	100%	~	100%	100%	60%	89%	94%	96%	90%	90%	95%
TOP BOX SCORE	64 69%	995 70%	64%	64%	50%	71%	75%	69%	100%	100%	~	50%	100%	40%	67%	68%	66%	70%	61%	72%
NOT ANSWERED		27																		
VALID CASES	93	1414	11	11	12	21	32	5	75	1	3	2	2	5	9	82	50	40	31	60
NUMBER OF RESPONDENTS	93 100%	1441 100%	11 100%	11 100%	12 100%	21 100%	32 100%	5 100%	75 100%	1 100%	3 100%	2 100%	2 100%	5 100%	9 100%	82 100%	50 100%	40 100%	31 100%	60 100%

[ASKED IF Q30 = YES]

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

	TCH 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- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q33 YES	117 38%	1804 36%	13 48%	21 39%	18 42%	25 37%	29 35%	8 32%	92 36%	4 100%	2 50%	1 ~	3 33%	8 38%	53%	11 44%	103 37%	70 36%	42 42%	48 40%	66 37%
NO	187 62%	3261 64%	14 52%	33 61%	25 58%	43 63%	54 65%	17 68%	162 64%		2 ~	2 50%	2 100%	5 67%	7 63%	14 47%	172 56%	126 63%	58 64%	72 60%	111 63%
NOT ANSWERED	21	388	2	1		3	4		8							2	7	8	2	5	5
VALID CASES	304	5065	27	54	43	68	83	25	254	4	4	2	3	8	15	25	275	196	100	120	177
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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		
	TCH 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- 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		
PQ34 NEVER	5 2%	97 2%	1 4%	1 2%	2 ~	1 3%	1 1%	5 ~	2%	~	~	~	~	~	~	5 2%	5 3%	1 ~	4 2%		
SOMETIMES	17 6%	322 6%	3 11%	2 4%	2 5%	2 3%	5 6%	2 8%	14 6%	2 67%	~	~	~	~	1 4%	15 6%	6 3%*	9 9%	9 8%	7 4%	
USUALLY	40 13%	697 14%	4 15%	9 17%	7 16%	9 13%	7 9%	4 17%	34 13%	2 ~	50%	~	~	3 ~	3 12%	37 14%	22 11%	17 17%	18 15%	22 13%	
ALWAYS	238 79%	3891 78%	19 70%	42 78%	34 79%	55 81%	67 84%	18 75%	199 79%	1 33%	2 50%	2 100%	3 100%	8 100%	11 79%	21 84%	214 79%	160 83%*	73 74%	90 76%	142 81%
#ALWAYS + USUALLY (NET)	278 93%	4589 92%	23 85%	51 94%	41 95%	64 94%	74 93%	22 92%	233 92%	1 33%	4 100%	2 100%	3 100%	8 100%	14 96%	251 93%	182 94%	90 91%	108 92%	164 94%	
TOP BOX SCORE	238 79%	3891 78%	19 70%	42 78%	34 79%	55 81%	67 84%	18 75%	199 79%	1 33%	2 50%	2 100%	3 100%	8 100%	11 79%	21 84%	214 79%	160 83%*	73 74%	90 76%	142 81%
NOT ANSWERED	4	87					3	1	2	1				1		4	3	1	2	2	
VALID CASES	300	5008	27	54	43	68	80	24	252	3	4	2	3	8	14	25	271	193	99	118	175
NUMBER OF RESPONDENTS	304	5095	27	54	43	68	83	25	254	4	4	2	3	8	15	25	275	196	100	120	177
	100%	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				
	TCH 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				
Q35 WORST HEALTH PLAN POSSIBLE	4 1%	59 1%	1 ~ 2%	1 2%	2 3%			1 ~ 0.4%				2 ~ 29%	1 8%	2 9%	2 0.8%	1 0.5%	2 2%	1 0.8%	2 1%		
01	2 0.7%	31 0.6%	1 ~ 2%				1 1%	2 ~ 0.8%						2 ~ 0.8%			2 2%	1 0.8%	1 0.6%		
02	4 1%	40 0.8%		1 2%	1 2%	2 3%		3 ~ 1%				1 ~ 14%		4 ~ 2%	3 2%	1 1%	1 0.8%	3 2%			
03	10 3%	85 2%	2 8%	3 6%	1 2%	3 5%	1 1%	10 ~ 4%						10 ~ 4%	9 5%*	1 1%	3 3%	7 4%			
04	6 2%	121 2%	2 8%		2 5%	1 2%	1 1%	5 ~ 2%						1 4%	5 2%	4 2%	2 2%	4 3%	2 1%		
05	20 7%	451 9%	6 ~ 11%	4 10%	5 8%	3 4%		14 ~ 6%		1 ~ 50%		3 ~ 23%	2 9%	16 6%	13 7%	7 8%	8 7%	10 6%			
06	27 9%	332 7%	1 4%	6 11%	2 5%	7 11%	9 11%	1 5%	25 10%	1 33%					26 ~ 10%	14 7%	12 13%	8 7%	18 11%		
07	41 14%	632 13%	3 12%	7 13%	6 14%	7 11%	13 16%	4 18%	37 15%					5 22%	34 13%	29 15%	11 12%	20 17%	20 12%		
08	56 19%	921 19%	1 4%	15 28%	9 21%	15 23%	13 16%	3 14%	52 21%	1 ~ 25%		1 ~ 50%	1 14%	1 8%	55 4%	35 21%	21 18%	24 23%	32 19%		
09	41 14%	768 16%	7 29%	5 9%	6 14%	7 11%	13 16%	3 14%	33 13%	1 ~ 25%			4 ~ 31%	2 9%	39 15%	30 16%	9 10%	18 15%	23 14%		
BEST HEALTH PLAN POSSIBLE	79 27%	1430 29%	8 33%	10 19%	10 24%	16 25%	24 30%	11 50%	63 26%	2 67%	2 50%	1 50%	1 50%	3 43%	4 31%	10 43%	69 26%	53 28%	24 26%	30 25%	49 29%
#8-10 (NET)	176 61%	3119 64%	16 67%	30 56%	25 60%	38 59%	50 62%	17 77%	148 60%	2 67%	4 100%	1 50%	2 100%	4 57%	9 69%	13 57%	163 62%	118 62%	54 59%	72 61%	104 62%

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	
		TCH 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	FE- MALE MALE			
9-10 (NET)	120 41%	2198 45%	15 63%~	15 28%*	16 38%~	23 36%	37 46%	14 64%~	96 39%~	2 67%~	3 75%~	1 50%~	1 50%~	3 43%~	8 62%~	12 52%~	108 41%~	83 43%	33 36%	48 41%	72 43%
NOT ANSWERED	35	583	5	1	1	7	7	3	17	1		1	1	2	4	20	13	10	7	15	
VALID CASES	290	4870	24	54	42	64	80	22	245	3	4	2	2	7	13	23	262	191	92	118	167
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%
MEAN	7.66	7.82	8.00	7.22	7.45	7.41	7.91	8.86	7.67	8.67	9.25	7.50	9.00	5.71	7.62	7.61	7.69	7.75	7.48	7.71	7.71
p stat_(*=Sig @ p<=.05)		.156	~.121		~.352	.213	~	~	~	~	~	~	~	~	~	~	~	.325	.381	.721	.653

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		
	TCH 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	
Q35A YES	44 14%	736 14%	1 4%~	2 4%*	3 7%~	16 23%*	16 19%	6 25%~	40 15%~	~	~	~	~	1 ~ 14%~	4 ~ 17%~	40 14%~	17 9%*	25 25%*	16 13%	28 16%	
NO	262 86%	4378 86%	27 96%~	53 96%*	40 93%~	53 77%*	67 81%	18 75%~	219 85%~	3 100%~	4 100%~	2 100%~	3 100%~	6 86%~	15 100%~	19 83%~	238 86%~	182 91%*	74 75%*	107 87%	149 84%
NOT ANSWERED	19	339	1			2	4	1	3	1				1	4	4	5	3	2	5	
VALID CASES	306	5114	28	55	43	69	83	24	259	3	4	2	3	7	15	23	278	199	99	123	177
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
	TCH TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-AMER	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
Q35B NEVER	9 21%	123 19%	1 100%	~	~	4 25%	4 25%	~	8 21%	~	~	~	~	1 100%	~	~	9 23%	4 25%	5 20%	4 25%	5 19%	
SOMETIMES	4 9%	72 11%	~	1 50%	~	2 13%	1 17%	~	4 10%	~	~	~	~	~	~	~	4 10%	~	4 16%	1 6%	3 11%	
USUALLY	9 21%	177 27%	~	~	2 100%	3 19%	3 19%	1 17%	8 21%	~	~	~	~	~	~	~	2 50%	7 18%	4 25%	5 20%	4 25%	5 19%
ALWAYS	21 49%	279 43%	~	1 50%	~	7 44%	9 56%	4 67%	19 49%	~	~	~	~	~	~	~	2 50%	19 49%	8 50%	11 44%	7 44%	14 52%
#ALWAYS + USUALLY (NET)	30 70%	456 70%	~	1 50%	2 100%	10 63%	12 75%	5 83%	27 69%	~	~	~	~	~	~	~	4 100%	26 67%	12 75%	16 64%	11 69%	19 70%
TOP BOX SCORE	21 49%	279 43%	~	1 50%	~	7 44%	9 56%	4 67%	19 49%	~	~	~	~	~	~	~	2 50%	19 49%	8 50%	11 44%	7 44%	14 52%
NOT ANSWERED	1	24	~	~	1	~	~	~	1	~	~	~	~	~	~	~	1	1	~	~	1	
VALID CASES	43	651	1	2	2	16	16	6	39	~	~	~	~	1	~	~	4	39	16	25	16	27
NUMBER OF RESPONDENTS	44	675	1	2	3	16	16	6	40	~	~	~	~	1	~	~	4	40	17	25	16	28
	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?

	TCH 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-	NATV AS- IAN	AMER HAW/ IND/ ALSK	MUL- TI	OTH-	NOT HIS- IC	HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE				
Q35C YES	57 19%	760 15%	2 7%	6 11%	8 19%	18 26%	18 21%	4 17%	50 19%	1 33%	~	~	~	2 29%	7 28%	49 18%	26 13%*	27 27%*	16 13%*	39 22%	
NO	248 81%	4319 85%	26 93%	48 89%	35 81%	50 74%	67 79%	19 83%	207 81%	2 67%	4 100%	2 100%	3 100%	5 71%	15 100%	18 72%	227 82%	172 87%*	72 73%*	106 87%*	138 78%
NOT ANSWERED	20	373	1	1		3	2	2	5	1				1	2	6	6	3	3	5	
VALID CASES	305	5080	28	54	43	68	85	23	257	3	4	2	3	7	15	25	276	198	99	122	177
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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

	TCH 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	
Q35D NEVER	15 27%	165 23%	1 50%~	1 17%~	2 25%~	6 35%~	5 28%~	13 ~ 27%~					2 ~100%~		1 ~ 14%~	14 29%~	7 27%~	7 27%~	5 33%~	10 26%~	
SOMETIMES	6 11%	141 19%*		1 ~ 17%~	2 25%~	1 6%~	2 11%~	6 ~ 12%~							1 ~ 14%~	5 10%~	5 19%~	1 4%~	1 7%~	5 13%~	
USUALLY	15 27%	179 25%		3 ~ 50%~	1 13%~	5 29%~	3 17%~	3 75%~	12 24%~	1 100%~					3 ~ 43%~	12 25%~	4 15%~	9 35%~	3 20%~	12 31%~	
ALWAYS	20 36%	239 33%	1 50%~	1 17%~	3 38%~	5 29%~	8 44%~	1 25%~	18 37%~	1 ~					2 ~ 29%~	17 35%~	10 38%~	9 35%~	6 40%~	12 31%~	
#ALWAYS + USUALLY (NET)	35 63%	418 58%	1 50%~	4 67%~	4 50%~	10 59%~	11 61%~	4 100%~	30 61%~	1 100%~					5 ~ 71%~	29 60%~	14 54%~	18 69%~	9 60%~	24 62%~	
TOP BOX SCORE	20 36%	239 33%	1 50%~	1 17%~	3 38%~	5 29%~	8 44%~	1 25%~	18 37%~						2 ~ 29%~	17 35%~	10 38%~	9 35%~	6 40%~	12 31%~	
NOT ANSWERED	1	20				1		1								1		1	1		
VALID CASES	56	725	2	6	8	17	18	4	49	1			2		7	48	26	26	15	39	
NUMBER OF RESPONDENTS	57	745	2	6	8	18	18	4	50	1			2		7	49	26	27	16	39	
	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	
TCH 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		
Q35E YES	180 58%	2872 56%	13 45%~	29 53%	27 63%~	40 57%	56 67%	12 50%~	150 58%~	1 33%~	~	~	2 67%~	5 71%~	12 80%~	17 68%~	160 57%~	106 53%*	67 66%*	68 55%	106 60%
NO	129 42%	2261 44%	16 55%~	26 47%	16 37%~	30 43%	28 33%	12 50%~	110 42%~	2 67%~	4 100%~	2 100%~	1 33%~	2 29%~	3 20%~	8 32%~	119 43%~	94 47%*	34 34%*	56 45%	72 40%
NOT ANSWERED	16	320				1 3	1	2	1			1			2	3	4	1	1	4	
VALID CASES	309	5133	29	55	43	70	84	24	260	3	4	2	3	7	15	25	279	200	101	124	178
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	70 100%	84 100%	24 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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

	TCH 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	
Q35F																					
NO EFFORT AT ALL	7 4%	94 3%	1 8%~	2 7%~	1 4%~	2 5%~	1 2%	7 5%~	~	~	~	~	~	~	~	7 5%~	3 3%	4 6%	3 5%	4 4%	
A LITTLE EFFORT WAS MADE	10 6%	213 8%	1 8%~	1 3%~	1 4%~	4 11%~	3 6%	9 6%~	~	~	~	~	1 20%~	~	1 6%~	9 6%~	4 4%	5 8%	4 6%	6 6%	
SOME EFFORT WAS MADE	40 23%	662 24%	5 38%~	5 17%~	7 27%~	9 24%~	12 22%	2 17%~	34 23%~	~	~	~	1 50%~	1 20%~	3 25%~	4 25%~	36 23%~	25 25%	15 23%	15 24%	25 24%
A LOT OF EFFORT WAS MADE	117 67%	1793 65%	6 46%~	21 72%~	17 65%~	22 59%~	38 70%	10 83%~	95 66%~	1 100%~	~	~	1 50%~	3 60%~	9 75%~	11 69%~	103 66%~	70 69%	41 63%	42 66%	70 67%
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	157 90%	2455 89%	11 85%~	26 90%~	24 92%~	31 84%~	50 93%	12 100%~	129 89%~	1 100%~	~	~	2 100%~	4 80%~	12 100%~	15 94%~	139 90%~	95 93%	56 86%	57 89%	95 90%
TOP BOX SCORE	117 67%	1793 65%	6 46%~	21 72%~	17 65%~	22 59%~	38 70%	10 83%~	95 66%~	1 100%~	~	~	1 50%~	3 60%~	9 75%~	11 69%~	103 66%~	70 69%	41 63%	42 66%	70 67%
NOT ANSWERED	6	95			1	3	2		5							1	5	4	2	4	1
VALID CASES	174	2763	13	29	26	37	54	12	145	1			2	5	12	16	155	102	65	64	105
NUMBER OF RESPONDENTS	180	2858	13	29	27	40	56	12	150	1			2	5	12	17	160	106	67	68	106
	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?

	TCH 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- WHTE	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q35G																					
NO EFFORT AT ALL	13 8%	135 5%	1 8%	3 10%	3 12%	4 11%	2 4%	11 8%	~	~	~	~	~	1 20%	1 9%	1 6%	12 8%	5 5%	7 11%	4 6%	9 9%
A LITTLE EFFORT WAS MADE	9 5%	226 8%	2 15%	1 3%	~	1 3%	5 9%	8 6%	~	~	~	~	~	~	1 9%	~	9 6%	6 6%	3 5%	6 10%	3 3%
SOME EFFORT WAS MADE	39 23%	652 24%	4 31%	9 31%	5 20%	8 22%	8 15%	3 22%	31 22%	~	~	~	1 50%	1 20%	1 9%	5 31%	32 21%	20 19%	16 26%	12 19%	25 24%
A LOT OF EFFORT WAS MADE	111 65%	1759 63%	6 46%	16 55%	17 68%	23 64%	39 72%	9 75%	93 65%	1 100%	~	~	1 50%	3 60%	8 73%	10 63%	100 65%	72 70%	36 58%	40 65%	67 64%
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	150 87%	2411 87%	10 77%	25 86%	22 88%	31 86%	47 87%	12 100%	124 87%	1 100%	~	~	2 100%	4 80%	9 82%	15 94%	132 86%	92 89%	52 84%	52 84%	92 88%
TOP BOX SCORE	111 65%	1759 63%	6 46%	16 55%	17 68%	23 64%	39 72%	9 75%	93 65%	1 100%	~	~	1 50%	3 60%	8 73%	10 63%	100 65%	72 70%	36 58%	40 65%	67 64%
NOT ANSWERED	8	87			2	4	2		7						1	1	7	3	5	6	2
VALID CASES	172	2771	13	29	25	36	54	12	143	1			2	5	11	16	153	103	62	62	104
NUMBER OF RESPONDENTS	180	2858	13	29	27	40	56	12	150	1			2	5	12	17	160	106	67	68	106
	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?

	TCH 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/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35H																					
NO EFFORT AT ALL	15 9%	191 7%	1 8%	2 7%	3 12%	5 13%	4 7%	11 8%	~	~	~	~	~	1 20%	2 18%	2 12%	13 8%	6 6%	8 12%	4 6%	11 10%
A LITTLE EFFORT WAS MADE	12 7%	242 9%	1 8%	3 10%	~	4 11%	4 7%	11 8%	~	~	~	~	~	~	1 9%	1 6%	11 7%	5 5%	7 11%	4 6%	8 8%
SOME EFFORT WAS MADE	58 33%	781 28%	6 46%	12 41%	8 32%	12 32%	15 28%	3 25%	49 34%	~	~	~	2 100%	2 40%	~	7 41%	49 32%	30 29%	24 37%	21 33%	34 32%
A LOT OF EFFORT WAS MADE	89 51%	1558 56%	5 38%	12 41%	14 56%	17 45%	31 57%	9 75%	74 51%	1 100%	~	~	~	2 40%	8 73%	7 41%	81 53%	61 60%*	26 40%*	34 54%	52 50%
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	147 84%	2339 84%	11 85%	24 83%	22 88%	29 76%	46 85%	12 100%	123 85%	1 100%	~	~	2 100%	4 80%	8 73%	14 82%	130 84%	91 89%*	50 77%*	55 87%	86 82%
TOP BOX SCORE	89 51%	1558 56%	5 38%	12 41%	14 56%	17 45%	31 57%	9 75%	74 51%	1 100%	~	~	~	2 40%	8 73%	7 41%	81 53%	61 60%*	26 40%*	34 54%	52 50%
NOT ANSWERED	6	85			2	2	2		5						1		6	4	2	5	1
VALID CASES	174	2773	13	29	25	38	54	12	145	1			2	5	11	17	154	102	65	63	105
NUMBER OF RESPONDENTS	180	2858	13	29	27	40	56	12	150	1			2	5	12	17	160	106	67	68	106
	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		
TCH 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-	NATV AS- IAN	AMER HAW/ IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE				
Q35I YES	97 32%	1866 37%	12 43%~	11 20%*	18 42%~	20 30%	26 32%	9 41%~	80 31%~	1 ~	2 33%~	2 ~	2 67%~	2 29%~	8 62%~	5 21%~	90 33%~	61 31%	33 34%	40 34%	55 31%
NO	204 68%	3186 63%	16 57%~	44 80%*	25 58%~	47 70%	56 68%	13 59%~	175 69%~	4 100%~	2 67%~	2 100%~	1 33%~	5 71%~	5 38%~	19 79%~	182 67%~	134 69%	65 66%	78 66%	122 69%
NOT ANSWERED	24	400	1			4	5	3	7	1			1	2	3	10	9	4	7	5	
VALID CASES	301	5053	28	55	43	67	82	22	255	4	3	2	3	7	13	24	272	195	98	118	177
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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?

	TCH 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-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE				
Q35J #YES	83 90%	1483 85%	10 91%	10 100%	16 94%	17 89%	23 88%	6 75%	67 88%	1 ~100%	2 ~100%	2 ~100%	8 ~100%	5 100%	77 90%	55 95%	26 81%	34 92%	47 89%	
NO	9 10%	254 15%	1 9%	~	1 6%	2 11%	3 12%	2 25%	9 12%	~	~	~	~	~	9 ~10%	3 5%	6 19%	3 8%	6 11%	
NOT ANSWERED	5	58	1	1	1	1	1	4						4	3	1	3	2		
VALID CASES	92	1737	11	10	17	19	26	8	76	1		2	2	8	5	86	58	32	37	53
NUMBER OF RESPONDENTS	97 100%	1795 100%	12 100%	11 100%	18 100%	20 100%	26 100%	9 100%	80 100%	1 100%		2 100%	2 100%	8 100%	5 100%	90 100%	61 100%	33 100%	40 100%	55 100%

[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?

	TCH 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-	NATV HAW/ AS- PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q35K #YES	78 86%	1402 81%	9 82%	11 100%	16 94%	16 84%	20 80%	6 75%	63 84%	1 ~100%	1 ~50%	2 100%	8 100%	5 100%	72 85%	54 90%	23 77%	32 86%	46 87%	
NO	13 14%	326 19%	2 18%	~	1 6%	3 16%	5 20%	2 25%	12 16%	~	~	1 ~50%	~	13 ~15%	6 10%	7 23%	5 14%	7 13%		
NOT ANSWERED	6	67	1		1	1	1	1	5					5	1	3	3	2		
VALID CASES	91	1728	11	11	17	19	25	8	75	1		2	2	8	5	85	60	30	37	53
NUMBER OF RESPONDENTS	97	1795	12	11	18	20	26	9	80	1		2	2	8	5	90	61	33	40	55
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	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?

	TCH 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	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35L NEVER	39 13%	654 13%	4 14%~	6 11%	7 16%~	13 20%	7 9%	2 8%~	32 13%~	1 ~ 33%~	1 ~ 33%~	2 25%~		6 ~ 22%~	33 12%~	27 14%	11 11%	17 14%	21 12%		
SOMETIMES	36 12%	567 11%	4 14%~	8 15%	7 16%~	11 17%	5 6%*	1 4%~	32 13%~	~	1 ~ 50%~	~	~	4 ~ 15%~	32 12%~	21 11%	15 15%	13 11%	23 13%		
USUALLY	70 23%	1126 23%	8 29%~	18 33%	9 21%~	10 15%	18 22%	7 28%	61 24%~	2 50%~	~	1 ~ 33%~	1 13%~	3 20%~	5 19%~	64 24%~	45 23%	24 24%	32 26%	38 22%	
ALWAYS	155 52%	2613 53%	12 43%~	23 42%	20 47%~	31 48%	52 63%*	15 60%~	126 50%~	2 50%~	2 67%~	1 50%~	1 33%~	5 63%~	12 80%~	12 44%~	141 52%~	103 53%	48 49%	91 53%	
#ALWAYS + USUALLY (NET)	225 75%	3739 75%	20 71%~	41 75%	29 67%~	41 63%*	70 85%*	22 88%~	187 75%~	4 100%~	2 67%~	1 50%~	2 67%~	6 75%~	15 100%~	17 63%~	205 76%~	148 76%	72 73%	129 75%	
TOP BOX SCORE	155 52%	2613 53%	12 43%~	23 42%	20 47%~	31 48%	52 63%*	15 60%~	126 50%~	2 50%~	2 67%~	1 50%~	1 33%~	5 63%~	12 80%~	12 44%~	141 52%~	103 53%	48 49%	91 53%	
NOT ANSWERED	25	493	1		6	5		11		1					12	8	4	3	9		
VALID CASES	300	4960	28	55	43	65	82	25	251	4	3	2	3	8	15	27	270	196	98	122	173
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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

	TCH 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 & POOR	MALE	FE- MALE	
Q35M ALWAYS	176%	3878%	27%~	35%	512%~	23%	45%	14%~	104%~	125%~	133%~	~	~	225%~	214%~	311%~	145%~	105%	55%	76%	106%
USUALLY	145%	2585%	27%~	611%	25%~	12%	24%~	14%~	125%~	~	~	~	~	~	~	14%~	135%~	84%	66%	43%	106%
SOMETIMES	5619%	88118%	621%~	916%	614%~	1421%	1619%	520%~	4718%~	125%~	~50%~	133%~	138%~	37%~	17%~	519%~	5018%~	2814%*	2627%*	2117%	3520%
NEVER	21571%	345269%	1966%~	3767%	2969%~	4974%	6274%	1872%~	18673%~	250%~	267%~	150%~	267%~	338%~	1179%~	1867%~	19672%~	15377%*	6162%*	9074%	12169%
#NEVER + SOMETIMES (NET)	27190%	433387%	2586%~	4684%	3583%~	6395%*	7893%	2392%~	23391%~	375%~	267%~	2100%~	3100%~	675%~	1286%~	2385%~	24690%~	18191%	8789%	11191%	15689%
TOP BOX SCORE	21571%	345269%	1966%~	3767%	2969%~	4974%	6274%	1872%~	18673%~	250%~	267%~	150%~	267%~	338%~	1179%~	1867%~	19672%~	15377%*	6162%*	9074%	12169%
NOT ANSWERED	23	476			1	5	3		7		1			1		9	5	4	3	6	
VALID CASES	302	4977	29	55	42	66	84	25	255	4	3	2	3	8	14	27	273	199	98	122	176
NUMBER OF RESPONDENTS	325100%	5453100%	29100%	55100%	43100%	71100%	87100%	25100%	262100%	4100%	4100%	2100%	3100%	8100%	15100%	27100%	282100%	204100%	102100%	125100%	182100%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	TCH 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- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q35N ALWAYS	6 2%	113 2%	1 3%~	1 2%	3 7%~	1 1%	~	~	5 2%~	~	~	~	~	1 12%~	~	1 4%~	5 2%~	2 1%	3 3%	1 0.8%	5 3%
USUALLY	13 4%	124 2%	1 3%~	4 7%	2 5%~	2 3%	4 5%	~	12 5%~	~	~	~	~	~	~	1 4%~	12 4%~	8 4%	5 5%	4 3%	9 5%
SOMETIMES	38 12%	728 15%	3 10%~	7 13%	7 17%~	9 13%	7 8%	5 20%~	32 12%~	~	~	1 50%~	~	1 12%~	2 14%~	2 7%~	35 13%~	20 10%	17 17%	19 15%	19 11%
NEVER	247 81%	4037 81%	24 83%~	43 78%	30 71%~	55 82%	74 87%	20 80%~	208 81%~	4 100%~	4 100%~	1 50%~	2 100%~	6 75%~	12 86%~	23 85%~	223 81%~	169 85%*	75 75%	99 80%	144 81%
#NEVER + SOMETIMES (NET)	285 94%	4765 95%	27 93%~	50 91%	37 88%~	64 96%	81 95%	25 100%~	240 93%~	4 100%~	4 100%~	2 100%~	2 100%~	7 88%~	14 100%~	25 93%~	258 94%~	189 95%	92 92%	118 96%	163 92%
TOP BOX SCORE	247 81%	4037 81%	24 83%~	43 78%	30 71%~	55 82%	74 87%	20 80%~	208 81%~	4 100%~	4 100%~	1 50%~	2 100%~	6 75%~	12 86%~	23 85%~	223 81%~	169 85%*	75 75%	99 80%	144 81%
NOT ANSWERED	21	451			1	4	2		5				1			7	5	2	2	5	
VALID CASES	304	5002	29	55	42	67	85	25	257	4	4	2	2	8	14	27	275	199	100	123	177
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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?

	TCH 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 ILND	AMER HAW/ IND/ PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE	
Q350 ALWAYS	4	98	1	1	2							1			1	3	1	2		4	
	1%	2%	3%~	2%	5%~	~	~	~	~	~	12%~	~	~	4%~	1%~	0.5%	2%	~	2%~		
USUALLY	11	112	1	5	2	1	1	1	10						11	4	7	2	9		
	4%	2%	3%~	9%	5%~	2%	1%	4%~	4%~	~	~	~	~	~	4%~	2%	7%	2%	5%		
SOMETIMES	28	493	1	5	4	7	10	1	25			1			4	24	15	12	11	17	
	9%	10%	3%~	9%	10%~	11%	12%	4%~	10%~	~	~	33%~	~	~	15%~	9%~	8%	12%	9%	10%	
NEVER	260	4278	26	43	34	58	75	23	216	4	4	2	2	7	15	22	236	178	79	109	147
	86%	86%	90%~	80%	81%~	88%	87%	92%~	85%~	100%~	100%~	100%~	67%~	88%~	100%~	81%~	86%~	90%*	79%*	89%	83%
#NEVER + SOMETIMES (NET)	288	4771	27	48	38	65	85	24	241	4	4	2	3	7	15	26	260	193	91	120	164
	95%	96%	93%~	89%	90%~	98%*	99%*	96%~	95%~	100%~	100%~	100%~	100%~	88%~	100%~	96%~	95%~	97%*	91%	98%*	93%*
TOP BOX SCORE	260	4278	26	43	34	58	75	23	216	4	4	2	2	7	15	22	236	178	79	109	147
	86%	86%	90%~	80%	81%~	88%	87%	92%~	85%~	100%~	100%~	100%~	67%~	88%~	100%~	81%~	86%~	90%*	79%*	89%	83%
NOT ANSWERED	22	472		1	1	5	1		8							8	6	2	3	5	
VALID CASES	303	4981	29	54	42	66	86	25	254	4	4	2	3	8	15	27	274	198	100	122	177
NUMBER OF RESPONDENTS	325	5453	29	55	43	71	87	25	262	4	4	2	3	8	15	27	282	204	102	125	182
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
	TCH 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	MALE	FE- MALE		
Q35P #YES DEFINITELY	202 68%	3312 67%	18 64%~	32 59%	25 60%~	44 67%	64 77%*	18 72%~	170 67%~	3 75%~	3 75%~	2 100%~	1 33%~	4 50%~	12 86%~	15 58%~	186 68%~	140 72%*	59 60%*	80 67%	119 68%	
YES SOMEWHAT	69 23%	1213 25%	5 18%~	17 31%	13 31%~	15 23%	14 17%	5 20%~	60 24%~	1 25%~		1 ~	2 ~	2 33%~	2 25%~	2 14%~	6 23%~	63 23%~	43 22%	24 24%	26 22%	42 24%
NO	28 9%	418 8%	5 18%~	5 9%	4 10%~	7 11%	5 6%	2 8%~	23 9%~	1 ~	1 25%~	1 ~	2 33%~	2 25%~		5 19%~	23 8%~	12 6%*	16 16%*	13 11%	15 9%	
NOT ANSWERED	26	511	1	1	1	5	4		9						1	1	10	9	3	6	6	
VALID CASES	299	4942	28	54	42	66	83	25	253	4	4	2	3	8	14	26	272	195	99	119	176	
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%	

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?

	TCH 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- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q35Q YES	176 58%	2643 53%*	15 56%~	34 62%	27 66%~	43 63%	47 54%	9 38%~	152 59%~	2 50%~	2 50%~	1 50%~		2 ~ 25%~	8 53%~	17 63%~	158 57%~	116 58%	58 58%	64 52%	110 63%
NO	128 42%	2382 47%*	12 44%~	21 38%	14 34%~	25 37%	40 46%	15 63%~	104 41%~	2 50%~	2 50%~	1 50%~	2 100%~	6 75%~	7 47%~	10 37%~	117 43%~	83 42%	42 42%	59 48%	66 37%
NOT ANSWERED	21	428	2		2	3		1	6				1			7		5	2	2	6
VALID CASES	304	5025	27	55	41	68	87	24	256	4	4	2	2	8	15	27	275	199	100	123	176
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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?

	TCH 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 ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q35R NEVER	43 32%	799 36%	2 15%	7 28%	4 27%	11 31%	15 42%	3 43%	37 34%	~	1 ~100%	1 ~33%	2 25%	3 21%	39 33%	24 29%	19 38%	16 36%	25 29%		
SOMETIMES	25 19%	439 20%	5 38%	6 24%	3 20%	4 11%	4 11%	3 43%	18 17%	1 50%	~	~	1 ~33%	3 38%	22 21%	17 21%	7 14%	8 18%	17 20%		
USUALLY	22 17%	421 19%	4 31%	3 12%	3 20%	8 22%	4 11%	~	16 15%	2 ~100%	~	~	1 ~33%	1 13%	18 21%	15 18%	7 14%	6 14%	16 18%		
ALWAYS	43 32%	564 25%	2 15%	9 36%	5 33%	13 36%	13 36%	1 14%	37 34%	1 50%	~	~	~	2 ~25%	38 36%	32 32%	26 32%	17 34%	14 32%	29 33%	
#ALWAYS + USUALLY (NET)	65 49%	985 44%	6 46%	12 48%	8 53%	21 58%	17 47%	1 14%	53 49%	1 50%	2 ~100%	~	~	1 ~33%	3 38%	56 57%	41 50%	24 48%	20 45%	45 52%	
TOP BOX SCORE	43 32%	564 25%	2 15%	9 36%	5 33%	13 36%	13 36%	1 14%	37 34%	1 50%	~	~	~	2 ~25%	38 36%	32 32%	26 32%	17 34%	14 32%	29 33%	
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	170	2730	16	30	26	32	49	16	148	2	1	1	2	5	6	13	156	118	48	77	90
NOT ANSWERED	22	500			2	3	2	2	6		1		1			9	4	4	4	5	
VALID CASES	133	2223	13	25	15	36	36	7	108	2	2	1		3	8	14	117	82	50	44	87
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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

	AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
	TCH 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- 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	
Q36 EXCELLENT	23 8%	477 9%	4 14%~	2 4%	4 10%~	5 7%	4 5%	3 12%~	14 5%~	1 33%~	1 25%~	~	~	~	3 20%~	5 20%~	17 6%~	23 11%~	10 8%	12 7%	
VERY GOOD	69 23%	1176 23%	9 31%~	20 37%*	13 32%~	13 19%	12 14%*	2 8%~	61 24%~	1 ~	1 25%~	~	~	1 17%~	4 27%~	5 20%~	63 23%~	69 34%*	32 26%	37 21%	
GOOD	112 37%	1761 35%	11 38%~	13 24%*	22 54%~	22 31%	33 38%	10 42%~	102 39%~	1 ~	1 50%~	2 67%~	1 17%~	3 20%~	2 8%~	109 39%~	112 55%~	~	47 38%	62 35%	
FAIR	75 25%	1244 25%	4 14%~	16 30%	1 2%~	19 27%	29 34%*	6 25%~	59 23%~	2 67%~	1 25%~	~	~	4 67%~	4 27%~	11 44%~	64 23%~	75 ~	28 23%	47 26%	
POOR	27 9%	405 8%	1 3%~	3 6%	1 2%~	11 16%	8 9%	3 12%~	23 9%~	~	1 50%~	1 33%~	~	1 7%~	2 8%~	25 9%~	~	27 26%*	6 5%*	20 11%	
#EXCELLENT + VERY GOOD + GOOD (NET)	204 67%	3415 67%	24 83%~	35 65%	39 95%~	40 57%	49 57%*	15 63%~	177 68%~	1 33%~	3 75%~	1 50%~	2 67%~	2 33%~	10 67%~	12 48%~	189 68%~	204 100%~	89 72%	111 62%	
NOT ANSWERED	19	389		1	2	1	1	1	3	1				2		4			2	4	
VALID CASES	306	5064	29	54	41	70	86	24	259	3	4	2	3	6	15	25	278	204	102	123	178
NUMBER OF RESPONDENTS	325	5453	29	55	43	71	87	25	262	4	4	2	3	8	15	27	282	204	102	125	182
	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?

	TCH 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- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q37 EXCELLENT	44 14%	895 18%	6 21%~	7 13%	8 19%~	6 9%	13 15%	4 16%~	33 13%~	3 ~ 75%~			1 ~ 14%~	2 13%~	6 23%~	38 14%~	40 20%*	4 4%*	15 12%	29 16%	
VERY GOOD	72 23%	1258 25%	6 21%~	14 25%	7 17%~	16 23%	22 25%	6 24%~	63 24%~	1 25%~	1 ~ 50%~		1 ~ 14%~	3 20%~	5 19%~	65 23%~	59 29%*	13 13%*	39 31%*	32 18%*	
GOOD	90 29%	1533 30%	5 17%~	15 27%	18 43%~	25 36%	19 22%	7 28%~	79 30%~	1 ~ 25%~		1 ~ 50%~	2 29%~	5 33%~	5 19%~	84 30%~	66 32%	24 24%	35 28%	53 29%	
FAIR	74 24%	1027 20%	11 38%~	17 31%	6 14%~	11 16%	23 26%	6 24%~	64 25%~	1 25%~		1 ~ 50%~	2 29%~	4 27%~	5 19%~	69 25%~	31 15%*	40 40%*	23 19%	49 27%	
POOR	29 9%	363 7%	1 3%~	2 4%*	3 7%~	11 16%	10 11%	2 8%~	22 8%~	2 50%~	1 ~ 50%~		1 ~ 14%~	1 7%~	5 19%~	24 9%~	8 4%*	20 20%*	12 10%	17 9%	
#EXCELLENT + VERY GOOD + GOOD (NET)	206 67%	3685 73%*	17 59%~	36 65%	33 79%~	47 68%	54 62%	17 68%~	175 67%~	1 25%~	4 100%~	1 50%~	1 50%~	4 57%~	10 67%~	16 62%~	187 67%~	165 81%*	41 41%*	89 72%	114 63%
NOT ANSWERED	16	378			1	2			1				1	1	1	2		1	1	2	
VALID CASES	309	5075	29	55	42	69	87	25	261	4	4	2	2	7	15	26	280	204	101	124	180
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	TCH 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- WHTE	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q38 #YES	126 43%	2160 44%	9 36%	18 34%	18 44%	28 43%	36 42%	17 71%	107 43%	2 50%	2 50%	1 50%	6 ~ 75%	3 21%	16 64%	110 41%	72 37%*	50 53%*	46 39%	79 46%	
NO	169 57%	2803 56%	16 64%	35 66%	23 56%	37 57%	49 58%	7 29%	142 57%	2 50%	2 50%	1 50%	2 100%	2 25%	11 79%	9 36%	157 59%	124 63%*	44 47%*	72 61%	94 54%
DON'T KNOW	13	112	4	2	2	2	2	1	11					1	1	12	7	6	6	7	
NOT ANSWERED	17	379				4			2				1		1	3	1	2	1	2	
VALID CASES	295	4963	25	53	41	65	85	24	249	4	4	2	2	8	14	25	267	196	94	118	173
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
TCH 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-	NATV AMER HAW/ IND/ PAC ALSK	AS- IAN	ILND	NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q39 EVERY DAY	82 27%	1063 21%*	4 14%~	17 31%	6 14%~	30 45%*	20 23%	4 17%~	68 26%~	1 ~	1 25%~	1 50%~	1 50%~	1 13%~	8 62%~	5 19%~	76 28%~	44 22%*	37 37%*	35 29%	46 26%
SOME DAYS	33 11%	463 9%	3 10%~	4 7%	5 12%~	7 10%	13 15%	1 4%~	27 10%~	3 75%~	~	~	~	1 13%~	1 8%~	3 11%~	30 11%~	18 9%	13 13%	17 14%	14 8%
NOT AT ALL	191 62%	3502 70%*	22 76%~	34 62%	32 74%~	30 45%*	53 62%	19 79%~	164 63%~	1 25%~	3 75%~	1 50%~	1 50%~	6 75%~	4 31%~	19 70%~	170 62%~	140 69%*	49 49%*	69 57%	120 67%
DON'T KNOW	2	42				1 1	1	1	1					1		2	1 1	1 1	2		
NOT ANSWERED	17	383				3 1	1	2	2			1	1			4	1 2	1 2	2	2	2
VALID CASES	306	5028	29	55	43	67	86	24	259	4	4	2	2	8	13	27	276	202	99	121	180
NUMBER OF RESPONDENTS	325	5453	29	55	43	71	87	25	262	4	4	2	3	8	15	27	282	204	102	125	182
	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?

	TCH 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	OTH-	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q40 NEVER	27 24%	435 26%	3 50%~	6 29%~	2 18%~	9 25%~	6 18%~	23 24%~	1 ~100%~	~	~	~	2 25%~	26 ~25%~	20 33%*	7 14%~	12 23%	14 24%			
SOMETIMES	28 25%	355 21%	1 17%~	6 29%~	3 27%~	9 25%~	8 24%~	1 20%~	25 26%~	~	~	1 ~100%~	2 25%~	3 43%~	25 24%~	15 25%	13 27%~	14 27%	14 24%		
USUALLY	22 19%	280 17%	~	3 14%~	1 9%~	6 17%~	10 30%~	2 40%~	19 20%~	2 67%~	~	~	1 50%~	1 14%~	21 20%~	8 13%	11 22%~	11 21%	11 19%		
ALWAYS	36 32%	589 35%	2 33%~	6 29%~	5 45%~	12 33%~	9 27%~	2 40%~	28 29%~	1 33%~	1 ~100%~	~	1 50%~	4 50%~	3 43%~	33 31%~	18 30%	18 37%~	15 29%	20 34%	
#ALWAYS + USUALLY (NET)	58 51%	869 52%	2 33%~	9 43%~	6 55%~	18 50%~	19 58%~	4 80%~	47 49%~	3 100%~	1 ~100%~	~	2 ~100%~	4 50%~	4 57%~	54 51%~	26 43%*	29 59%~	26 50%	31 53%	
TOP BOX SCORE	36 32%	589 35%	2 33%~	6 29%~	5 45%~	12 33%~	9 27%~	2 40%~	28 29%~	1 33%~	1 ~100%~	~	1 50%~	4 50%~	3 43%~	33 31%~	18 30%	18 37%~	15 29%	20 34%	
NOT ANSWERED	2	31	1			1							1	1	1	1	1			1	
VALID CASES	113	1659	6	21	11	36	33	5	95	3	1	1	1	2	8	7	105	61	49	52	59
NUMBER OF RESPONDENTS	115	1690	7	21	11	37	33	5	95	3	1	1	1	2	9	8	106	62	50	52	60
	100%	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.

	TCH 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- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE		
Q41 NEVER	59 52%	750 46%	4 57%	14 67%	6 55%	20 57%	12 36%	2 40%	50 53%	1 33%	1 100%	1 100%	1 ~	1 ~	4 50%	4 44%	3 43%	55 52%	39 64%*	19 39%	26 50%	32 54%
SOMETIMES	24 21%	380 23%	3 43%	4 19%	1 9%	7 20%	8 24%	1 20%	20 21%	1 33%	~	~	~	~	2 22%	2 14%	23 22%	8 13%*	16 33%	13 25%	11 19%	
USUALLY	12 11%	243 15%	~	5 5%	1 9%	5 14%	4 12%	1 20%	12 13%	~	~	~	~	~	~	~	12 11%	6 10%	6 12%	3 6%	9 15%	
ALWAYS	18 16%	267 16%	~	2 10%	3 27%	3 9%	9 27%	1 20%	12 13%	1 33%	~	~	1 100%	1 50%	3 33%	3 43%	15 14%	8 13%	8 16%	10 19%	7 12%	
#ALWAYS + USUALLY (NET)	30 27%	510 31%	~	3 14%	4 36%	8 23%	13 39%	2 40%	24 26%	1 33%	~	~	1 100%	1 50%	3 33%	3 43%	27 26%	14 23%	14 29%	13 25%	16 27%	
TOP BOX SCORE	18 16%	267 16%	~	2 10%	3 27%	3 9%	9 27%	1 20%	12 13%	1 33%	~	~	1 100%	1 50%	3 33%	3 43%	15 14%	8 13%	8 16%	10 19%	7 12%	
NOT ANSWERED	2	51				2			1								1	1	1	1	1	
VALID CASES	113	1639	7	21	11	35	33	5	94	3	1	1	1	2	9	7	105	61	49	52	59	
NUMBER OF RESPONDENTS	115	1690	7	21	11	37	33	5	95	3	1	1	1	2	9	8	106	62	50	52	60	
	100%	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.

	TCH 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	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- ILND NATV	OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q42 NEVER	65 58%	864 53%	5 83%~	14 67%~	5 45%~	25 69%~	13 41%~	2 40%~	55 60%~	1 33%~	1 100%~				1 50%~	5 56%~	3 38%~	61 59%~	42 70%*	22 45%~	28 56%	35 59%
SOMETIMES	21 19%	340 21%	1 17%~	2 10%~		7 19%~	9 28%~	2 40%~	19 21%~	2 67%~							1 13%~	20 19%~	7 12%*	14 29%~	9 18%	12 20%
USUALLY	12 11%	207 13%		2 10%~	1 9%~	4 11%~	5 16%~		10 11%~				1 100%~				2 25%~	10 10%~	5 8%	7 14%~	4 8%	7 12%
ALWAYS	14 12%	215 13%		3 14%~	5 45%~		5 16%~	1 20%~	8 9%~			1 100%~		1 50%~	4 44%~		2 25%~	12 12%~	6 10%	6 12%~	9 18%	5 8%
#ALWAYS + USUALLY (NET)	26 23%	422 26%		5 24%~	6 55%~	4 11%~	10 31%~	1 20%~	18 20%~			1 100%~	1 100%~	1 50%~	4 44%~		4 50%~	22 21%~	11 18%	13 27%~	13 26%	12 20%
TOP BOX SCORE	14 12%	215 13%		3 14%~	5 45%~		5 16%~	1 20%~	8 9%~			1 100%~		1 50%~	4 44%~		2 25%~	12 12%~	6 10%	6 12%~	9 18%	5 8%
NOT ANSWERED		3 64	1			1	1		3								3		2	1	2	1
VALID CASES	112	1626	6	21	11	36	32	5	92	3	1	1	1	2	9		8	103	60	49	50	59
NUMBER OF RESPONDENTS	115 100%	1690 100%	7 100%	21 100%	11 100%	36 100%	32 100%	5 100%	92 100%	3 100%	1 100%	1 100%	1 100%	2 100%	9 100%		8 100%	106 100%	62 100%	50 100%	52 100%	60 100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

Q43 DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
TCH 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		
Q43 YES	61 20%	1180 23%	2 7%	3 5%*	3 7%	14 20%	28 33%*	11 44%	51 20%	~	~	1 50%	3 ~	5 38%	5 36%	56 19%	27 20%	32 16%*	27 27%*	29 23%	32 18%
NO	247 80%	3848 77%	26 93%	52 95%*	39 93%	56 80%	58 67%*	14 56%	208 80%	4 100%	4 100%	1 50%	3 100%	5 63%	9 64%	22 81%	222 80%	171 84%*	73 73%*	95 77%	148 82%
DON'T KNOW	3	55	1		1		1		2				1			3	1	2	1	1	
NOT ANSWERED	14	370				1			1							1				1	
VALID CASES	308	5028	28	55	42	70	86	25	259	4	4	2	3	8	14	27	278	203	100	124	180
NUMBER OF RESPONDENTS	325	5453	29	55	43	71	87	25	262	4	4	2	3	8	15	27	282	204	102	125	182
	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?

	TCH 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	OTHR	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q44 YES	34 12%	460 10%	3 ~	3 6%~	10 7%~	15 16%	3 19%	26 11%~	1 25%~			1 ~	3 33%~	2 43%~	2 15%~	6 24%~	28 11%~	13 7%*	20 25%*	10 8%	23 15%
NO	246 88%	4154 90%	26 100%~	46 94%~	37 93%~	52 84%	18 81%	209 89%~	3 75%~	2 100%~	2 100%~	2 67%~	4 57%~	11 85%~	19 76%~	224 89%~	181 93%*	61 75%*	109 92%	133 85%	
DON'T KNOW	31	459	3	6	3	8	7	4	26		2		1	2	2	29	10	21	6	25	
NOT ANSWERED	14	380				1		1								1				1	
VALID CASES	280	4614	26	49	40	62	80	21	235	4	2	2	3	7	13	25	252	194	81	119	156
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
TCH 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		
Q45 YES	101 33%	1742 35%	3 10%	10 19%*	5 12%	25 36%	40 46%*	18 72%~	85 33%~	1 25%~	1 25%~	1 50%~	4 ~	8 53%~	8 30%~	93 33%~	54 27%*	44 43%*	43 34%	58 32%	
NO	208 67%	3293 65%	26 90%~	44 81%*	38 88%~	45 64%	47 54%*	7 28%~	175 67%~	3 75%~	3 75%~	1 50%~	3 100%~	4 50%~	7 47%~	19 70%~	187 67%~	148 73%*	58 57%*	82 66%	122 68%
NOT ANSWERED	16	417	1	1	1	1	1	2	2	2	2	2	2	2	2	2	2	2	2	2	
VALID CASES	309	5036	29	54	43	70	87	25	260	4	4	2	3	8	15	27	280	202	102	125	180
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER		
TCH 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- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE			
Q46.1																						
YES	82 25%	1316 24%	1 3%	5 9%*	7 16%~	22 31%	37 43%*	10 40%~	70 27%	1 25%~	1 25%~		4 ~	4 ~	50%~	27%~	7 26%~	75 27%~	45 22%	36 35%*	34 27%	47 26%
NO	243 75%	4137 76%	28 97%~	50 91%*	36 84%~	49 69%	50 57%*	15 60%~	192 73%	3 75%~	3 75%~	2 100%~	3 100%~	4 50%~	11 73%~	20 74%~	207 73%~	159 78%	66 65%*	91 73%	135 74%	
VALID CASES	325	5453	29	55	43	71	87	25	262	4	4	2	3	8	15	27	282	204	102	125	182	
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%	

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
TCH 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- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q46.2 YES	96 30%	1635 30%	1 3%	7 13%*	11 26%~	27 38%	37 43%*	13 52%~	83 32%	1 25%~	1 25%~	1 50%~	1 33%~	3 38%~	2 13%~	6 22%~	90 32%~	42 21%*	52 51%*	44 35%	52 29%
NO	229 70%	3818 70%	28 97%~	48 87%*	32 74%~	44 62%	50 57%*	12 48%~	179 68%	3 75%~	3 75%~	1 50%~	2 67%~	5 63%~	13 87%~	21 78%~	192 68%~	162 79%*	50 49%*	81 65%	130 71%
VALID CASES	325	5453	29	55	43	71	87	25	262	4	4	2	3	8	15	27	282	204	102	125	182
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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	
TCH 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 ILND	AMER HAW/ IND/ PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q46.3																					
YES	55 17%	862 16%	2 7%	3 5%*	11 26%	14 20%	20 23%	5 20%	51 19%*	1 25%	1 50%	2 13%	3 11%	52 18%	31 15%	24 24%*	22 18%	33 18%			
NO	270 83%	4591 84%	27 93%	52 95%*	32 74%	57 80%	67 77%	20 80%	211 81%*	3 75%	4 100%	1 50%	3 100%	8 100%	13 87%	24 89%	230 82%	173 85%	78 76%*	103 82%	149 82%
VALID CASES	325	5453	29	55	43	71	87	25	262	4	4	2	3	8	15	27	282	204	102	125	182
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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	
TCH 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		
Q47.1 YES	11 3%	281 5%	~	~	~	2 3%	8 9%*	1 4%	10 4%	~	~	~	~	~	1 7%	11 4%	3 1%*	7 7%	4 3%	7 4%	
NO	314 97%	5172 95%	29 100%	55 100%	43 100%	69 97%	79 91%*	24 96%	252 96%	4 100%	4 100%	2 100%	3 100%	8 100%	14 93%	27 100%	271 96%	201 99%*	95 93%	121 97%	175 96%
VALID CASES	325	5453	29	55	43	71	87	25	262	4	4	2	3	8	15	27	282	204	102	125	182
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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	MALE	FE- MALE	
Q47.2	TCH 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	MALE	FE- MALE	
YES	9 3%	284 5%*	~	~	~	2 3%	6 7%*	1 4%~	7 3%	~	~	~	2 25%~	~	1 4%~	8 3%~	1 0.5%*	7 7%*	4 3%	5 3%	
NO	316 97%	5169 95%*	29 100%	55 100%	43 100%	69 97%	81 93%*	24 96%~	255 97%	4 100%	4 100%	2 100%	3 100%	6 75%~	15 100%~	26 96%~	274 97%	203 100%*	95 93%*	121 97%	177 97%
VALID CASES	325	5453	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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	
TCH 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		
Q47.3 YES	12 4%	221 4%	~	~	~	11%*	3%	4%	11 4%	~	~	~	~	~	7%~	12 4%	5 2%	6 6%	8 6%	4 2%	
NO	313 96%	5232 96%	29 100%	55 100%	43 100%	63 89%*	84 97%	24 96%	251 96%	4 100%	4 100%	2 100%	3 100%	8 100%	14 93%	27 100%	270 96%	199 98%	96 94%	117 94%	178 98%
VALID CASES	325	5453	29	55	43	71	87	25	262	4	4	2	3	8	15	27	282	204	102	125	182
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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	
TCH 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 ILND	AMER HAW/ IND/ PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE				
Q47.4																					
YES	63 19%	1002 18%	1 3%	5 9%*	5 12%~	15 21%	25 29%*	12 48%~	51 19%	2 ~ 50%~	1 50%~	3 ~ 38%~	2 13%~	7 26%~	56 20%~	27 13%*	34 33%*	22 18%	39 21%		
NO	262 81%	4451 82%	28 97%~	50 91%*	38 88%~	56 79%	62 71%*	13 52%~	211 81%	4 100%~	2 50%~	1 50%~	3 100%~	5 63%~	13 87%~	20 74%~	226 80%~	177 87%*	68 67%*	103 82%	143 79%
VALID CASES	325	5453	29	55	43	71	87	25	262	4	4	2	3	8	15	27	282	204	102	125	182
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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

	TCH 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	OTHR	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q48 YES	115 38%	1692 34%	10 34%~	24 44%	11 26%~	28 39%	36 42%	6 25%~	98 38%~	2 50%~	3 75%~	2 ~	2 67%~	2 25%~	4 27%~	9 33%~	106 38%~	54 27%*	57 56%*	40 32%	74 41%
NO	191 62%	3335 66%	19 66%~	31 56%	31 74%~	43 61%	49 58%	18 75%~	160 62%~	2 50%~	1 25%~	2 100%~	1 33%~	6 75%~	11 73%~	18 67%~	172 62%~	144 73%*	45 44%*	84 68%	105 59%
NOT ANSWERED	19	426			1	2	1		4							4	6			1	3
VALID CASES	306	5027	29	55	42	71	85	24	258	4	4	2	3	8	15	27	278	198	102	124	179
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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

	TCH 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 PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q49 YES	95 86%	1394 85%	8 24	20 34	10 44	21 54	31 64	5 OVER	83 87%	2 100%	2 67%	1 ~100%	1 50%	3 75%	8 89%	87 85%	43 83%	49 89%	33 89%	61 84%
NO	16 14%	240 15%	2 20%	4 17%	1 9%	5 19%	3 9%	1 17%	12 13%	1 ~33%		1 ~50%	1 25%	1 11%	15 15%	9 17%	6 11%	4 11%	12 16%	
NOT ANSWERED	4	62				2	2		3			1			4	2	2	3	1	
VALID CASES	111	1633	10	24	11	26	34	6	95	2	3	1	2	4	9	102	52	55	37	73
NUMBER OF RESPONDENTS	115 100%	1695 100%	10 100%	24 100%	11 100%	28 100%	36 100%	6 100%	98 100%	2 100%	3 100%	1 100%	2 100%	4 100%	9 100%	106 100%	54 100%	57 100%	40 100%	74 100%

[ASKED IF Q48 = YES]

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

	TCH 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- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q50 YES	215 70%	3255 65%*	10 34%~	31 57%*	25 58%~	52 74%	75 87%*	22 88%~	183 70%~	4 100%~	3 75%~	1 50%~	2 67%~	6 75%~	10 67%~	17 65%~	198 71%~	121 61%*	88 86%*	83 66%	130 72%
NO	92 30%	1781 35%*	19 66%~	23 43%*	18 42%~	18 26%	11 13%*	3 12%~	77 30%~		1 ~ 25%~	1 50%~	1 33%~	2 25%~	5 33%~	9 35%~	82 29%~	78 39%*	14 14%*	42 34%	50 28%
NOT ANSWERED	18	417		1		1	1		2							1	2	5			2
VALID CASES	307	5036	29	54	43	70	86	25	260	4	4	2	3	8	15	26	280	199	102	125	180
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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

	TCH 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	OTHR	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q51 YES	198 94%	2975 94%	9 90%~	26 84%~	25 100%~	44 88%	72 100%~	22 100%~	167 94%~	3 75%~	3 100%~	1 100%~	2 100%~	6 100%~	10 100%~	17 100%~	181 94%~	110 93%	83 97%	77 96%	119 93%
NO	12 6%	176 6%	1 10%~	5 16%~		6 ~ 12%			11 6%~	1 25%~							12 6%~	8 7%	3 3%	3 4%	9 7%
NOT ANSWERED	5	127				2	3		5								5	3	2	3	2
VALID CASES	210	3151	10	31	25	50	72	22	178	4	3	1	2	6	10	17	193	118	86	80	128
NUMBER OF RESPONDENTS	215 100%	3278 100%	10 100%	31 100%	25 100%	52 100%	75 100%	22 100%	183 100%	4 100%	3 100%	1 100%	2 100%	6 100%	10 100%	17 100%	198 100%	121 100%	88 100%	83 100%	130 100%

[ASKED IF Q50 = YES]

NQ52 WHAT IS YOUR AGE?

			AGE					RACE						ETHNICITY		HEALTH STATUS		GENDER			
	TCH TOT ADLT	OHP TOT ADLT	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/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
NQ52																					
18 TO 24	31 10%	547 10%	29 100%	~	~	~	~	~	23 9%	1 ~	25%	~	~	~	1 7%	3 11%	25 9%	24 12%	5 5%*	12 10%	17 9%
25 TO 34	59 18%	870 16%	~	55 ~100%	~	~	~	~	47 18%	1 25%	~	1 ~	1 33%	1 13%	3 20%	6 22%	49 17%	36 18%	19 19%	21 17%	34 19%
35 TO 44	48 15%	802 15%	~	~	43 ~100%	~	~	~	37 14%	~	~	1 50%	~	2 25%	3 20%	4 15%	39 14%	40 20%*	2 2%*	17 14%	26 14%
45 TO 54	73 22%	1153 21%	~	~	~	71 ~100%	~	~	61 23%	1 25%	1 25%	~	1 33%	2 25%	3 20%	7 26%	64 23%	40 20%	30 29%	28 22%	41 23%
55 TO 64	88 27%	1412 26%	~	~	~	~	87 ~100%	~	73 28%	2 50%	1 25%	1 50%	1 33%	2 25%	4 27%	5 19%	82 29%	49 24%	37 36%*	37 30%	49 27%
65 TO 74	17 5%	405 7%	~	~	~	~	16 ~64%	~	13 5%	~	1 25%	~	~	~	1 7%	1 4%	15 5%	9 4%	6 6%	7 6%	9 5%
75 OR OLDER	9 3%	264 5%*	~	~	~	~	9 ~36%	~	8 3%	~	~	~	~	1 13%	~	1 4%	8 3%	6 3%	3 3%	3 2%	6 3%
VALID CASES	325	5453	29	55	43	71	87	25	262	4	4	2	3	8	15	27	282	204	102	125	182
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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

NQ53 ARE YOU MALE OR FEMALE?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
TCH 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	MALE	FE- MALE		
NQ53																					
MALE	130 40%	2159 40%	12 41%~	21 38%	17 40%~	29 41%	37 43%	10 40%~	102 39%	2 50%~	2 50%~	1 50%~	2 67%~	4 50%~	9 60%~	12 44%~	113 40%~	91 45%*	34 33%	125 100%~	~
FEMALE	195 60%	3294 60%	17 59%~	34 62%	26 60%~	42 59%	15 57%	15 60%~	160 61%	2 50%~	2 50%~	1 50%~	1 33%~	4 50%~	6 40%~	15 56%~	169 60%~	113 55%*	68 67%	182 ~100%~	
VALID CASES	325	5453	29	55	43	71	87	25	262	4	4	2	3	8	15	27	282	204	102	125	182
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

[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?

	TCH 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- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q54 8TH GRADE OR LESS	11 4%	312 6%*	1 4%~	1 ~	3 2%~	2 4%	4 2%	16%~	9 3%~	~	~	~	~	2 ~ 25%~	~	3 11%~	8 3%~	7 3%	4 4%	6 5%	5 3%
SOME HIGH SCHOOL BUT DID NOT GRADUATE	54 17%	755 15%	7 25%~	8 15%	6 14%~	16 23%	16 18%	4%~	39 15%~	2 50%~	1 25%~	~	~	4 ~ 50%~	4 27%~	9 33%~	45 16%~	32 16%	19 19%	25 20%	29 16%
HIGH SCHOOL GRADUATE OR GED	92 30%	1615 32%	11 39%~	17 31%	7 16%~	24 34%	25 29%	32%~	77 30%~	1 25%~	2 50%~	~	1 ~ 33%~	~	4 ~ 27%~	7 26%~	84 30%~	57 28%	34 33%	34 27%	56 31%
SOME COLLEGE OR 2-YEAR DEGREE	118 38%	1732 34%	9 32%~	18 33%	21 49%~	21 30%	39 45%	10 40%~	105 40%~	1 25%~	1 25%~	1 50%~	1 33%~	2 25%~	6 40%~	7 26%~	111 40%~	78 39%	38 37%	47 38%	71 39%
4-YEAR COLLEGE GRADUATE	27 9%	415 8%	~	11 20%*	5 12%~	6 8%	4 5%	1 4%~	25 10%~	~	~	1 ~ 50%~	1 33%~	~	~	1 4%~	26 9%~	21 10%	6 6%	11 9%	15 8%
MORE THAN 4-YEAR COLLEGE DEGREE	7 2%	214 4%*	~	1 2%	3 7%~	1 1%	1 1%	1 4%~	6 2%~	~	~	~	~	~	1 7%~	~	7 2%~	6 3%	1 1%	2 2%	5 3%
NOT ANSWERED	16	410	1						1							1	3			1	
VALID CASES	309	5043	28	55	43	71	87	25	261	4	4	2	3	8	15	27	281	201	102	125	181
NUMBER OF RESPONDENTS	325	5453	29	55	43	71	87	25	262	4	4	2	3	8	15	27	282	204	102	125	182
	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?

	TCH 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- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q55																					
YES HISPANIC OR LATINO	27 9%	610 12%*	3 11%~	6 11%	4 9%~	7 10%	5 6%	2 8%~	9 3%~	~	~	~	~	7 88%~	1 7%~	27 100%~	~	12 6%*	13 13%	12 10%	14 8%
NO NOT HISPANIC OR LATINO	282 91%	4367 88%*	25 89%~	49 89%	39 91%~	64 90%	82 94%	23 92%~	253 97%~	4 100%~	4 100%~	2 100%~	3 100%~	1 12%~	14 93%~	282 ~100%~	~	189 94%*	89 87%	112 90%	168 92%
NOT ANSWERED	16	476	1															3		1	
VALID CASES	309	4977	28	55	43	71	87	25	262	4	4	2	3	8	15	27	282	201	102	124	182
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

Q56.1 WHAT IS YOUR RACE? RESPONSE: WHITE

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
TCH 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		
Q56.1																					
YES	277	4262	24	50	40	64	77	22	262				15	10	267	187	87	110	165		
	85%	78%*	83%~	91%	93%~	90%	89%	88%~	100%~	~	~	~	~	~100%~	37%~	95%~	92%*	85%	88%	91%*	
NO	48	1191	5	5	3	7	10	3	4	4	2	3	8	17	15	17	15	15	17		
	15%	22%*	17%~	9%	7%~	10%	11%	12%~	~100%~	~100%~	~100%~	~100%~	~100%~	~	63%~	5%~	8%*	15%	12%	9%*	
VALID CASES	325	5453	29	55	43	71	87	25	262	4	4	2	3	8	15	27	282	204	102	125	182
NUMBER OF RESPONDENTS	325	5453	29	55	43	71	87	25	262	4	4	2	3	8	15	27	282	204	102	125	182
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
TCH 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- 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		
Q56.2 YES	4 1%	133 2%*	1 ~	2 2%	1 ~	1 1%	2 2%	4 ~100%	~	~	~	~	~	~	4 1%	1 0.5%	2 2%	2 2%	2 1%		
NO	321 99%	5320 98%*	29 100%	54 100%	43 100%	70 99%	85 98%	25 100%	262 100%	4 ~100%	2 100%	3 100%	8 100%	15 100%	27 100%	278 99%	203 100%	100 98%	123 98%	180 99%	
VALID CASES	325	5453	29	55	43	71	87	25	262	4	4	2	3	8	15	27	282	204	102	125	182
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

Q56.3 WHAT IS YOUR RACE? RESPONSE: ASIAN

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
TCH 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- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q56.3 YES	4 1%	225 4%*	1 3%~	~	~	1 1%	1 4%~	~	~	4 ~100%~	~	~	~	~	4 ~1%	3 1%	1 1%	2 2%	2 1%		
NO	321 99%	5228 96%*	28 97%~	55 100%~	43 100%~	70 99%	86 99%	24 96%~	262 100%~	4 100%~	2 ~100%~	3 100%~	8 100%~	15 100%~	27 100%~	278 99%~	201 99%	101 99%	123 98%	180 99%	
VALID CASES	325	5453	29	55	43	71	87	25	262	4	4	2	3	8	15	27	282	204	102	125	182
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
TCH 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		
Q56.4 YES	2 0.6%	41 0.7%	~	~	1 2%	~	1 1%	~	~	~	2 ~100%	~	~	~	2 ~0.7%	1 ~0.5%	1 1%	1 0.8%	1 0.5%		
NO	323 99%	5412 99%	29 100%	55 100%	42 98%	71 100%	86 99%	25 100%	262 100%	4 100%	4 100%	3 100%	8 100%	15 100%	27 100%	280 99%	203 100%	101 99%	124 99%	181 99%	
VALID CASES	325	5453	29	55	43	71	87	25	262	4	4	2	3	8	15	27	282	204	102	125	182
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
TCH 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	HIS- IC	NOT VERY GOOD & FAIR & POOR	EX & VERY GOOD & POOR	FE- MALE	MALE		
Q56.5 YES	14 4%	314 6%	4 ~ 7%	2 5%~	4 6%	4 5%	~	~	~	~	3 ~100%~	11 ~ 73%~	~	14 ~ 5%~	9 4%	5 5%	8 6%	6 3%			
NO	311 96%	5139 94%	29 100%~	51 93%	41 95%~	67 94%	83 95%	25 100%~	262 100%~	4 100%~	4 100%~	2 100%~	8 ~100%~	4 27%	27 100%~	268 95%~	195 96%	97 95%	117 94%	176 97%	
VALID CASES	325	5453	29	55	43	71	87	25	262	4	4	2	3	8	15	27	282	204	102	125	182
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

Q56.6 WHAT IS YOUR RACE? RESPONSE: OTHER

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
TCH 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- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q56.6 YES	13 4%	300 5%	1 3%	2 4%	3 7%	2 3%	3 3%	2 8%	~	~	~	~	~	8 ~100%	5 33%	8 30%	5 2%	5 2%	6 6%	7 6%	6 3%
NO	312 96%	5153 95%	28 97%	53 96%	40 93%	69 97%	84 97%	23 92%	262 100%	4 100%	4 100%	2 100%	3 100%	10 ~67%	19 70%	277 98%	199 98%	96 94%	118 94%	176 97%	
VALID CASES	325	5453	29	55	43	71	87	25	262	4	4	2	3	8	15	27	282	204	102	125	182
NUMBER OF RESPONDENTS	325 100%	5453 100%	29 100%	55 100%	43 100%	71 100%	87 100%	25 100%	262 100%	4 100%	4 100%	2 100%	3 100%	8 100%	15 100%	27 100%	282 100%	204 100%	102 100%	125 100%	182 100%

Q57 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	TCH 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	OTHR	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
Q57 YES	31 13%	652 16%	2 9%~	4 11%~	3 9%~	7 13%	9 12%	6 27%~	24 11%~	1 ~ 25%~		4 ~ 50%~	1 25%~	7 33%~	24 11%~	16 10%	14 17%	19 19%*	11 8%*		
NO	210 87%	3488 84%	20 91%~	32 89%~	29 91%~	48 87%	65 88%	16 73%~	186 89%~	4 100%~	3 75%~	2 100%~	2 100%~	4 50%~	3 75%~	14 67%~	196 89%~	138 90%	67 83%	79 81%*	129 92%*
NOT ANSWERED	3	78	1			2			2						2	2	1	2	1		
VALID CASES	241	4141	22	36	32	55	74	22	210	4	4	2	2	8	4	21	220	154	81	98	140
NUMBER OF RESPONDENTS	244	4219	23	36	32	57	74	22	212	4	4	2	2	8	4	21	222	156	82	100	141
	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]

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
TCH 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	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q58.1 YES	15 48%	253 47%	3 ~ 75%	6 ~ 86%	5 56%	1 17%	11 46%	~	~	~	~	3 75%	1 100%	3 43%	12 50%	7 44%	8 57%	10 53%	4 36%
NO	16 52%	289 53%	2 100%	1 25%	3 100%	1 14%	4 44%	5 83%	13 54%	1 100%	~	1 25%	~	4 57%	12 50%	9 56%	6 43%	9 47%	7 64%
VALID CASES	31	542	2	4	3	7	9	6	24	1		4	1	7	24	16	14	19	11
NUMBER OF RESPONDENTS	31 100%	542 100%	2 100%	4 100%	3 100%	7 100%	9 100%	6 100%	24 100%	1 100%		4 100%	1 100%	7 100%	24 100%	16 100%	14 100%	19 100%	11 100%

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

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
TCH 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- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q58.2 YES	14 45%	188 35%	4 ~100%	1 33%	4 57%	4 44%	1 17%	10 42%	~	~	~	3 75%	1 100%	4 57%	10 42%	7 44%	6 43%	8 42%	6 55%
NO	17 55%	354 65%	2 100%	2 ~	3 67%	5 43%	5 56%	14 58%	1 100%	~	~	1 25%	~	3 43%	14 58%	9 56%	8 57%	11 58%	5 45%
VALID CASES	31	542	2	4	3	7	9	6	24	1	~	4	1	7	24	16	14	19	11
NUMBER OF RESPONDENTS	31 100%	542 100%	2 100%	4 100%	3 100%	7 100%	9 100%	6 100%	24 100%	1 100%	~	4 100%	1 100%	7 100%	24 100%	16 100%	14 100%	19 100%	11 100%

[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	
TCH 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- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q58.3 YES	14 45%	197 36%	2 100%	2 50%	2 67%	4 57%	2 22%	2 33%	12 50%	~	~	~	~	1 25%	3 43%	11 46%	9 56%	5 36%	11 58%	3 27%
NO	17 55%	345 64%	~	2 50%	1 33%	3 43%	7 78%	4 67%	12 50%	1 100%	~	~	3 75%	1 100%	4 57%	13 54%	7 44%	9 64%	8 42%	8 73%
VALID CASES	31	542	2	4	3	7	9	6	24	1		4	1	7	24	16	14	19	11	
NUMBER OF RESPONDENTS	31 100%	542 100%	2 100%	4 100%	3 100%	7 100%	9 100%	6 100%	24 100%	1 100%		4 100%	1 100%	7 100%	24 100%	16 100%	14 100%	19 100%	11 100%	

[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		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLACK OR AFR-	ASIAN	NATV ILND	AMER PAC	IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q58.4																				
YES	TCH TOT ADLT	2	81				2	1	1						2		2		1	1
		6%	15%	~	~	~	~ 33%	4%	~100%	~	~	~	~	~	8%	~	~ 14%	~	5%	9%
NO	TCH TOT ADLT	29	461	2	4	3	7	9	4	23			4	1	7	22	16	12	18	10
		94%	85%	~100%	~100%	~100%	~100%	~ 67%	~ 96%	~	~	~	~100%	~100%	~100%	~ 92%	~100%	~ 86%	~ 95%	~ 91%
VALID CASES		31	542	2	4	3	7	9	6	24	1		4	1	7	24	16	14	19	11
NUMBER OF RESPONDENTS		31	542	2	4	3	7	9	6	24	1		4	1	7	24	16	14	19	11
		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]

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/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	HIS- IC	NOT VERY GOOD & POOR	EX & FAIR & POOR	FE- MALE	MALE	
Q58.5	TCH TOT ADLT																			
YES	3 10%	44 8%	~	~	~	11%	1 33%	2 13%	3	~	~	~	~	~	3 13%	1 6%	2 14%	1 5%	1 9%	
NO	28 90%	498 92%	2 100%	4 100%	3 100%	7 89%	8 67%	4 88%	1	~	4 100%	1 100%	7 100%	21 88%	15 94%	12 86%	18 95%	10 91%		
VALID CASES	31 31	542 542	2 2	4 4	3 3	7 7	9 9	6 6	24 24	1 1	4 4	1 1	7 7	24 24	16 16	14 14	19 19	11 11		
NUMBER OF RESPONDENTS	31 100%	542 100%	2 100%	4 100%	3 100%	7 100%	9 100%	6 100%	24 100%	1 100%	4 100%	1 100%	7 100%	24 100%	16 100%	14 100%	19 100%	11 100%		

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

NQ13 RATING OF ALL HEALTH CARE

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	TCH 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- WHTE	AS- IAN AMER	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
NQ13 0-6	58 25%	759 20%	4 24%~	10 25%~	10 29%~	15 31%~	14 21%	4 20%~	49 25%~	1 25%~	~	~	3 50%~	3 30%~	5 26%~	52 25%~	27 19%*	28 35%*	18 21%	38 27%	
7-8	92 39%	1267 34%	8 47%~	19 47%~	12 34%~	18 37%~	25 37%	6 30%~	71 36%~	2 50%~	2 100%~	2 100%~	2 100%~	1 17%~	5 50%~	5 26%~	83 40%~	62 43%	26 33%	38 45%	50 36%
9-10	83 36%	1714 46%*	5 29%~	11 28%~	13 37%~	16 33%~	28 42%	10 50%~	75 38%~	1 25%~	~	~	2 33%~	2 20%~	9 47%~	74 35%~	56 39%	25 32%	29 34%	52 37%	
VALID CASES	233	3741	17	40	35	49	67	20	195	4	2	2	2	6	10	19	209	145	79	85	140
NUMBER OF RESPONDENTS	233 100%	3741 100%	17 100%	40 100%	35 100%	49 100%	67 100%	20 100%	195 100%	4 100%	2 100%	2 100%	2 100%	6 100%	10 100%	19 100%	209 100%	145 100%	79 100%	85 100%	140 100%
MEAN	2.11	2.26	2.06	2.03	2.09	2.02	2.21	2.30	2.13	2.00	2.00	2.00	2.00	1.83	1.90	2.21	2.11	2.20	1.96	2.13	2.10
p stat_(*=Sig @ p<=.05)		.002*	~	~	~	~	.202	~	~	~	~	~	~	~	~	~	~	.018*	.048*	.741	.860

[ASKED IF Q7 >= 1 TIME]

NQ23 RATING OF PERSONAL DOCTOR

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	TCH 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	GOOD & POOR	MALE	FE- MALE	
NQ23 0-6	41 17%	617 16%	6 32%~	9 25%~	7 19%~	10 19%	6 8%*	2 9%~	36 18%~	~	~	~	~	1 14%~	1 8%~	3 16%~	37 17%~	22 15%	17 20%	13 14%	27 19%
7-8	71 29%	999 25%	3 16%~	10 28%~	10 28%~	19 36%	21 29%	8 35%~	61 30%~	1 33%~	~	~	~	3 43%~	4 31%~	4 21%~	66 30%~	47 31%	23 27%	32 35%	39 27%
9-10	130 54%	2342 59%	10 53%~	17 47%~	19 53%~	24 45%	45 63%	13 57%~	106 52%~	2 67%~	3 100%~	1 100%~	1 100%~	3 43%~	8 62%~	12 63%~	116 53%~	81 54%	45 53%	47 51%	79 54%
VALID CASES	242	3959	19	36	36	53	72	23	203	3	3	1	1	7	13	19	219	150	85	92	145
NUMBER OF RESPONDENTS	242 100%	3959 100%	19 100%	36 100%	36 100%	53 100%	72 100%	23 100%	203 100%	3 100%	3 100%	1 100%	1 100%	7 100%	13 100%	19 100%	219 100%	150 100%	85 100%	92 100%	145 100%
MEAN	2.37	2.44	2.21	2.22	2.33	2.26	2.54	2.48	2.34	2.67	3.00	3.00	3.00	2.29	2.54	2.47	2.36	2.39	2.33	2.37	2.36
p stat_(*=Sig @ p<=.05)		.128	~	~	~.260	.012*	~	~	~	~	~	~	~	~	~	~	~	.512	.571	.976	.816

[ASKED IF Q15 = YES]

NQ27 RATING OF SPECIALIST SEEN MOST OFTEN

	TCH 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	20 17%	257 14%	4 40%	3 19%	6 ~ 24%	6 15%	1 10%	18 18%	~	~	~	~	~	2 33%	1 10%	19 18%	7 11%	12 23%	8 17%	12 18%	
7-8	32 27%	429 23%	1 10%	6 38%	6 40%	6 24%	13 33%	28 29%	1 33%	~	~	1 100%	2 67%	~	2 20%	30 28%	19 31%	13 25%	11 23%	21 31%	
9-10	66 56%	1164 63%	5 50%	7 44%	9 60%	13 52%	21 52%	9 90%	52 53%	2 67%	2 100%	~	1 ~	4 33%	7 70%	57 54%	36 58%	27 52%	28 60%	35 51%	
VALID CASES	118	1850	10	16	15	25	40	10	98	3	2	~	1	3	6	10	106	62	52	47	68
NUMBER OF RESPONDENTS	118 100%	1850 100%	10 100%	16 100%	15 100%	25 100%	40 100%	10 100%	98 100%	3 100%	2 100%	~	1 100%	3 100%	6 100%	10 100%	106 100%	62 100%	52 100%	47 100%	68 100%
MEAN	2.39	2.49	2.10	2.25	2.60	2.28	2.38	2.80	2.35	2.67	3.00	~	2.00	2.33	2.33	2.60	2.36	2.47	2.29	2.43	2.34
p stat_(*=Sig @ p<=.05)		.106	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.244	.201	~	.393	

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

NQ35 RATING OF HEALTH PLAN

	TCH 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/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
NQ35 0-6	73 25%	1116 23%	5 21%	17 31%	11 26%	19 30%	17 21%	1 5%	60 24%	1 3%	1 5%	3 14%	4 31%	5 22%	65 25%	44 23%	27 29%	26 22%	43 26%		
7-8	97 33%	1551 32%	4 17%	22 41%	15 36%	22 34%	26 32%	7 32%	89 36%	1 25%	1 50%	1 14%	1 8%	6 26%	89 34%	64 34%	32 35%	44 37%	52 31%		
9-10	120 41%	2193 45%	15 63%	15 28%*	16 38%	23 36%	37 46%	14 64%	96 39%	2 67%	3 75%	1 50%	1 50%	3 43%	8 62%	12 52%	108 41%	83 43%	33 36%	48 41%	72 43%
VALID CASES	290	4860	24	54	42	64	80	22	245	3	4	2	2	7	13	23	262	191	92	118	167
NUMBER OF RESPONDENTS	290 100%	4860 100%	24 100%	54 100%	42 100%	64 100%	80 100%	22 100%	245 100%	3 100%	4 100%	2 100%	2 100%	7 100%	13 100%	23 100%	262 100%	191 100%	92 100%	118 100%	167 100%
MEAN	2.16	2.22	2.42	1.96	2.12	2.06	2.25	2.59	2.15	2.33	2.75	2.00	2.50	2.00	2.31	2.30	2.16	2.20	2.07	2.19	2.17
p stat_(*=Sig @ p<=.05)		.171		~.041*		~.260	.245	~	~	~	~	~	~	~	~	~	~.219	.164	.665	.773	

GETTING NEEDED CARE

	TCH 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	
NPRBSEE4 NQ25	2.24	2.25	2.50	1.87	2.24	2.10	2.30	2.64	2.25	1.50	1.50		2.00	2.33	2.43	2.40	2.22	2.38	2.06	2.34	2.16
p stat_(*=Sig @ p<=.05)		.831	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~.025*	.023*	.239	.161
NCARNES4 NQ14	2.24	2.30	2.13	2.08	2.03	2.31	2.36	2.62	2.26	2.25	2.00	1.50	2.50	2.17	2.20	2.47	2.23	2.31	2.14	2.41	2.16
p stat_(*=Sig @ p<=.05)		.162	~	~	~	~.141	~	~	~	~	~	~	~	~	~	~	~	~.097	.196	.011*	.066
COMPOSITE	2.24	2.28	2.31	1.97	2.13	2.20	2.33	2.63	2.25	1.88	1.75	1.50	2.25	2.25	2.31	2.44	2.23	2.34	2.10	2.38	2.16
p stat_(*=Sig @ p<=.05)		.601	~	~	~.792	.433	~	~	~	~	~	~	~	~	~	~	~	~.061	.153	.135	.167

GETTING CARE QUICKLY

	TCH 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- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NCARSN4 NQ4	2.34	2.38	2.30	2.14	2.00	2.37	2.48	2.69	2.41	1.67	3.00	2.00	2.00	1.83	2.20	2.36	2.46	2.25	2.40	2.34	
p stat_(*=Sig @ p<=.05)		.473	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.069	.252	~	~	
NAPGET4 NQ6	2.17	2.32	1.75	2.09	1.97	2.19	2.28	2.53	2.20	1.75	2.33	1.00	1.00	2.17	2.33	2.06	2.19	2.18	2.16	2.14	2.20
p stat_(*=Sig @ p<=.05)		.003*	~	~	~	~	.263	~	~	~	~	~	~	~	~	~	~	.801	.872	.731	.550
COMPOSITE	2.25	2.35	2.02	2.12	1.98	2.28	2.38	2.61	2.31	1.71	2.33	2.00	1.50	2.08	2.08	2.13	2.27	2.32	2.21	2.27	2.27
p stat_(*=Sig @ p<=.05)		.207	~	~	~	.859	.310	~	~	~	~	~	~	~	~	~	~	.276	.640	.880	.752

HOW WELL DOCTORS COMMUNICATE

			AGE					RACE						ETHNICITY		HEALTH STATUS		GENDER			
	TCH 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	GOOD & POOR	FE- MALE	MALE	
NDREXPL4 NQ17	2.56	2.62	2.38	2.29	2.52	2.52	2.77	2.62	2.58	2.00	2.67	3.00	3.00	2.50	2.64	2.47	2.58	2.63	2.49	2.66	2.51
p stat_(*=Sig @ p<=.05)		.098	~	~	~	~	~.001*	~	~	~	~	~	~	~	~	~	~	.084	.299	.110	.218
NDRLSTN4 NQ18	2.54	2.59	2.38	2.36	2.55	2.43	2.73	2.67	2.54	2.75	3.00	3.00	3.00	2.67	2.64	2.53	2.56	2.57	2.57	2.56	2.55
p stat_(*=Sig @ p<=.05)		.274	~	~	~	~	~.004*	~	~	~	~	~	~	~	~	~	~	.614	.679	.847	.926
NDRESPU4 NQ19	2.63	2.65	2.62	2.43	2.55	2.50	2.80	2.75	2.60	2.75	3.00	3.00	3.00	2.83	2.73	2.76	2.61	2.63	2.64	2.61	2.63
p stat_(*=Sig @ p<=.05)		.765	~	~	~	~	~.006*	~	~	~	~	~	~	~	~	~	~	.969	.892	.701	.974
NDRTMEN4 NQ20	2.49	2.49	2.38	2.21	2.55	2.43	2.63	2.52	2.49	2.25	3.00	2.00	3.00	2.50	2.64	2.47	2.49	2.54	2.43	2.49	2.48
p stat_(*=Sig @ p<=.05)		.881	~	~	~	~	~.053	~	~	~	~	~	~	~	~	~	~	.261	.302	.887	.685
COMPOSITE	2.56	2.59	2.44	2.32	2.54	2.47	2.73	2.64	2.55	2.44	2.92	2.75	3.00	2.63	2.66	2.56	2.56	2.59	2.53	2.58	2.54
p stat_(*=Sig @ p<=.05)		.783	~	~	~	~	~.238	~	~	~	~	~	~	~	~	~	~	.686	.850	.884	.851

CUSTOMER SERVICE

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	TCH 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- TI	OTHER	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
NPBCLCS4 NQ31	2.29	2.23	2.18	2.00	2.00	2.57	2.31	2.40	2.27	2.00	2.67		2.00	3.00	2.60	2.00	2.32	2.30	2.23	2.32	2.25
p stat_(*=Sig @ p<=.05)		.442	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ32	2.62	2.63	2.64	2.64	2.42	2.52	2.72	2.80	2.65	3.00	3.00		2.50	3.00	2.00	2.56	2.62	2.62	2.60	2.52	2.67
p stat_(*=Sig @ p<=.05)		.940	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.46	2.43	2.41	2.32	2.21	2.55	2.52	2.60	2.46	2.50	2.83	x	2.25	3.00	2.30	2.28	2.47	2.46	2.41	2.42	2.46
p stat_(*=Sig @ p<=.05)		.865	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
	TCH 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			
NNRXWHY NQ10	2.89	2.84	3.00	2.91	3.00	2.87	2.94	2.64	2.91	3.00	3.00	3.00	3.00	2.00	3.00	2.80	2.91	2.86	2.96	2.91	2.92
p stat_(*=Sig @ p<=.05)		.159	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.400	.115	~	.345	
NNRXWYNT NQ11	2.49	2.45	2.75	2.74	2.44	2.55	2.31	2.09	2.47	3.00	1.00	3.00	2.00	1.00	3.00	2.60	2.47	2.32	2.69	2.23	2.62
p stat_(*=Sig @ p<=.05)		.614	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.007*	.037*	~	.031*	
NRXBST NQ12	2.41	2.50	2.75	2.18	2.78	2.42	2.43	2.27	2.46	3.00	3.00	3.00	1.00	2.00	3.00	1.80	2.50	2.47	2.33	2.26	2.54
p stat_(*=Sig @ p<=.05)		.189	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.358	.466	~	~	
COMPOSITE	2.60	2.60	2.83	2.61	2.74	2.61	2.56	2.33	2.61	3.00	2.33	3.00	2.00	1.67	3.00	2.40	2.62	2.55	2.66	2.46	2.70
p stat_(*=Sig @ p<=.05)		.993	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.628	.624	~	.222	

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	TCH 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-	NATV HAW/ PAC	AMER IND/ ALSK	MUL-	HIS-	NOT HIS-	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE		
PRBSEE4 Q25	78%	78%	80%	75%	76%	73%	77%	100%	78%	50%	50%	100%	100%	71%	90%	77%	82%	72%	86%	72%	
CARNES4 Q14	77%	82%	81%	72%	69%	73%	81%	100%	77%	75%	50%	50%	100%	67%	80%	84%	77%	80%	72%	85%	74%
AVERAGE	77.56	80.02	80.62	73.75	72.52	73.40	78.67	100.0	77.71	62.50	50.00	50.00	100.0	83.33	75.71	87.11	76.98	80.78	72.19	85.35	72.79

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

	TCH 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	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE	
CARSN4 Q4	82%	83%	80%	71%	58%	87%	90%	92%	83%	67%		100%	100%	67%	50%	80%	82%	87%	78%	88%	80%
APGET4 Q6	73%	80%	58%	72%	62%	73%	76%	89%	75%	50%	67%	0%	0%	83%	78%	72%	73%	72%	73%	70%	75%
AVERAGE	77.38	81.23	69.17	71.65	60.20	79.79	83.20	90.89	79.01	58.33	66.67	50.00	50.00	75.00	63.89	76.11	77.77	79.33	75.32	79.34	77.40

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

	TCH 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 MALE				
DREXPL4 Q17	90%	92%	77%	82%	90%	86%	97%	100%	90%	75%	100%	100%	100%	100%	91%	94%	90%	94%	86%	93%	89%
DRLSTN4 Q18	90%	90%	85%	86%	90%	88%	94%	95%	90%	100%	100%	100%	100%	100%	91%	88%	90%	92%	89%	93%	89%
DRESPU4 Q19	90%	91%	85%	82%	86%	90%	95%	95%	90%	100%	100%	100%	100%	100%	91%	88%	90%	91%	88%	91%	90%
DRTMEN4 Q20	89%	88%	85%	71%	93%	86%	94%	95%	88%	75%	100%	100%	100%	100%	91%	88%	88%	91%	85%	91%	86%
AVERAGE	89.6	90.4	82.7	80.4	89.7	87.5	94.9	96.4	89.5	87.5	100	100	100	100	90.9	89.7	89.8	92.1	87.0	92.1	88.4

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

	TCH 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	
PBCLCS4 Q31	80%	76%	82%	73%	67%	90%	78%	80%	80%	100%	100%		50%	100%	80%	67%	80%	82%	75%	84%	77%
CSRESP Q32	94%	92%	100%	100%	92%	81%	97%	100%	96%	100%	100%		100%	100%	60%	89%	94%	96%	90%	90%	95%
AVERAGE	86.56	84.03	90.91	86.36	79.17	85.71	87.50	90.00	88.00	100.0	100.0	x	75.00	100.0	70.00	77.78	87.20	89.00	82.50	87.10	85.83

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	TCH 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 NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NRXWHY Q10	95%	92%	100%	96%	100%	94%	97%	82%	95%	100%	100%	100%	100%	50%	100%	90%	96%	93%	98%	95%	96%
NRXWYNT Q11	74%	73%	88%	87%	72%	77%	66%	55%	73%	100%	0%	100%	50%	0%	100%	80%	73%	66%	84%	61%	81%
RXBST Q12	70%	75%	88%	59%	89%	71%	71%	64%	73%	100%	100%	100%	0%	50%	100%	40%	75%	74%	67%	63%	77%
AVERAGE	79.8	79.8	91.7	80.6	87.0	80.6	78.1	66.7	80.7	100	66.7	100	50.0	33.3	100	70.0	81.2	77.5	83.0	73.2	84.8

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

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
	TCH 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		
Q1 YES	302 100%	5304 100%	1 100%	55 100%	82 100%	85 100%	79 100%	187 100%	4 100%	3 100%	4 100%	12 100%	40 100%	84 100%	193 100%	275 100%	10 100%	240 100%	62 100%
NOT ANSWERED		1 59			1		1							1	1		1		
VALID CASES	302	5304	1	55	82	85	79	187	4	3	4	12	40	84	193	275	10	240	62
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%	4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%

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			
	TCH 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	
Q3 YES	103 34%	1687 32%		19 ~ 35%	28 34%	25 30%	31 39%	67 36%	1 25%~	1 33%~		1 ~ 25%~	2 17%~	13 32%~	26 31%	71 37%	91 33%~	6 60%~	70 29%*	33 53%*
NO	197 66%	3541 68%	1 100%~	35 65%~	54 66%	59 70%	48 61%	121 64%	3 75%~	2 67%~		3 ~ 75%~	10 83%~	27 68%~	58 69%	123 63%	185 67%~	4 40%~	168 71%*	29 47%*
NOT ANSWERED	3	135		1	1	1														3
VALID CASES	300	5228	1	54	82	84	79	188	4	3		4	12	40	84	194	276	10	238	62
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%		4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%

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			
	TCH 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	
Q4 NEVER	2 2%	18 1%	~	5%~	1 5%~	~	~	~	~	~	~	~	~	1 4%~	~	1 1%~	~	2 3%~	~	
SOMETIMES	8 9%	148 9%	~	~	2 9%~	~	6 21%~	4 7%~	~	~	~	~	1 8%~	3 12%~	5 8%~	7 9%~	1 20%~	4 7%~	4 13%~	
USUALLY	19 21%	323 20%	~	5 26%~	5 23%~	4 17%~	5 18%~	16 27%~	~	~	~	~	2 17%~	3 12%~	16 26%~	16 20%~	3 60%~	12 20%~	7 23%~	
ALWAYS	63 68%	1151 70%	~	13 68%~	14 64%~	19 83%~	17 61%~	39 66%~	1 100%~	1 100%~	~	1 100%~	2 100%~	9 75%~	17 71%~	41 66%~	57 70%~	1 20%~	43 70%~	20 65%~
#ALWAYS + USUALLY (NET)	82 89%	1475 90%	~	18 95%~	19 86%~	23 100%~	22 79%~	55 93%~	1 100%~	1 100%~	~	1 100%~	2 100%~	11 92%~	20 83%~	57 92%~	73 90%~	4 80%~	55 90%~	27 87%~
TOP BOX SCORE	63 68%	1151 70%	~	13 68%~	14 64%~	19 83%~	17 61%~	39 66%~	1 100%~	1 100%~	~	1 100%~	2 100%~	9 75%~	17 71%~	41 66%~	57 70%~	1 20%~	43 70%~	20 65%~
NOT ANSWERED	11	142			6	2	3	8					1	2	9	10	1	9	2	
VALID CASES	92	1641		19	22	23	28	59	1	1		1	2	12	24	62	81	5	61	31
NUMBER OF RESPONDENTS	103	1783		19	28	25	31	67	1	1		1	2	13	26	71	91	6	70	33
	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			
	TCH 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
Q5 YES	191 65%	3345 65%	1 100%~	42 78%*	59 73%	49 60%	40 51%*	123 66%	2 50%~	2 67%~	4 ~100%~	6 50%~	25 63%~	54 65%	125 65%	175 64%~	8 80%~	144 62%*	47 76%*	
Q5 NO	105 35%	1824 35%	~	12 22%*	22 27%	33 40%	38 49%*	63 34%	2 50%~	1 33%~	~	~	6 50%~	15 38%~	29 35%	67 35%	98 36%~	2 20%~	90 38%*	15 24%*
NOT ANSWERED	7	194		1	2	3	1	2						1	2	3		7		
VALID CASES	296	5169	1	54	81	82	78	186	4	3	4	12	40	83	192	273	10	234	62	
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%	4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%	

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			
	TCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK 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	
Q6 NEVER	4 2%	35 1%		2 5%~	2 4%			3 3%						2 4%	2 2%	4 2%~		3 2%~	1 2%~	
SOMETIMES	23 13%	451 14%		4 10%~	10 18%	6 13%~	3 8%~	14 12%	1 50%~				2 9%	11 9%	18 11%~	3 38%~	19 14%~	4 9%~		
USUALLY	49 27%	814 26%		8 21%~	11 20%	13 28%~	17 44%~	26 23%	1 50%~			3 75%~	3 50%~	7 30%~	16 31%	29 25%	43 26%~	3 38%~	16 24%~	37%~
ALWAYS	105 58%	1829 58%	1 100%	25 64%~	32 58%	28 60%~	19 49%~	72 63%	1 50%~	1 50%~		1 25%~	3 50%~	14 61%~	24 47%	76 64%*	100 61%~	2 25%~	83 60%~	22 51%~
#ALWAYS + USUALLY (NET)	154 85%	2643 84%	1 100%	33 85%~	43 78%	41 87%~	36 92%~	98 85%	2 100%	1 50%~		4 ~100%	6 ~100%	21 91%~	40 78%	105 89%	143 87%~	5 63%~	116 84%~	38 88%~
TOP BOX SCORE	105 58%	1829 58%	1 100%	25 64%~	32 58%	28 60%~	19 49%~	72 63%	1 50%~	1 50%~		1 25%~	3 50%~	14 61%~	24 47%	76 64%*	100 61%~	2 25%~	83 60%~	22 51%~
NOT ANSWERED	10	215		3	4	2	1	8					2	3	7	10		6	4	
VALID CASES	181	3129	1	39	55	47	39	115	2	2		4	6	23	51	118	165	8	138	43
NUMBER OF RESPONDENTS	191	3344	1	42	59	49	40	123	2	2		4	6	25	54	125	175	8	144	47
	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			
	TCH 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- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC	
Q7 NONE	89 30%	1553 31%	~ 19%*	10 33%	27 28%	23 28%	29 38%	58 31%	1 25%~	1 33%~	1 ~ 25%~	3 27%~	12 30%~	27 33%	58 30%	88 32%~	1 10%~	78 33%*	11 18%*	
1 TIME	99 33%	1446 28%	~ 35%	19 38%	31 39%	32 39%	17 22%*	65 35%	1 25%~	1 33%~	2 ~ 50%~	7 64%~	8 20%~	26 32%	61 32%	90 33%~	~	85 36%*	14 23%*	
2	57 19%	1007 20%	~ 28%	15 16%	13 16%	13 16%	16 21%	33 18%	1 25%~	1 33%~	~	~	10 ~ 25%~	15 19%	38 20%	51 19%~	3 30%~	43 18%	14 23%	
3	25 8%	534 11%	~ 9%	5 5%	4 10%	8 10%	8 10%	17 9%	~	~	~ 25%~	1 9%~	2 5%~	7 9%	17 9%	22 8%~	2 20%~	14 6%*	11 18%*	
4	11 4%	260 5%	~ 2%	1 2%	4 5%	2 2%	4 5%	5 3%	~	~	~	~	4 ~ 10%~	6 7%	5 3%	8 3%~	3 30%~	6 3%	5 8%	
5 TO 9	12 4%	196 4%	~ 6%	3 4%	3 4%	3 4%	3 4%	7 4%	1 25%~	~	~	~	3 ~ 8%~	11 ~ 6%*	11 4%~	~	7 3%	5 8%		
10 OR MORE TIMES	3 1%	87 2%	100%~	1 2%	1 ~	1 1%	~	2 1%	~	~	~	~	1 ~ 2%~	3 ~ 2%	2 0.7%~	1 10%~	1 0.4%	2 3%		
NOT ANSWERED	7	280		1	1	3	2	1				1		3	1	4		7		
VALID CASES	296	5083	1	54	82	82	77	187	4	3		4	11	40	81	193	272	10	234	62
NUMBER OF RESPONDENTS	303	5363	1	55	83	85	79	188	4	3		4	12	40	84	194	276	10	241	62
	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		
	TCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 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	GOOD & POOR	NO CCC	CCC	
Q8 #YES	144 72%	2386 68%	1 100%	32 74%	42 78%	36 63%	33 73%	87 70%	2 67%	1 50%	3 100%	5 63%	21 78%	38 72%	94 72%	128 72%	7 78%	106 71%	38 76%
NO	56 28%	1113 32%		11 26%	12 22%	21 37%	12 27%	37 30%	1 33%	1 50%		3 38%	6 22%	15 28%	36 28%	50 28%	2 22%	44 29%	12 24%
NOT ANSWERED	7	69		1	1	2	3	5				1	1	5	6		6	1	
VALID CASES	200	3499	1	43	54	57	45	124	3	2	3	8	27	53	130	178	9	150	50
NUMBER OF RESPONDENTS	207 100%	3568 100%	1 100%	44 100%	55 100%	59 100%	48 100%	129 100%	3 100%	2 100%	3 100%	8 100%	28 100%	54 100%	135 100%	184 100%	9 100%	156 100%	51 100%

[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			
	TCH 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	
Q9 NEVER	3 1%	78 2%	~	~	~	5%	~	2%	50%	~	~	~	~	~	3%	3%	2%	~	~	
SOMETIMES	21 10%	344 10%	~	12%	9%	4%*	20%	9%	~	~	~	33%	13%	14%	15%	8%	9%	44%	7%*	20%*
USUALLY	29 14%	768 22%*	~	21%	9%	12%	17%	10%*	~	50%	~	~	25%	21%	13%	12%	12%	22%	13%	18%
ALWAYS	148 74%	2292 66%*	100%	67%	82%	79%	63%	80%*	50%	50%	~	67%	63%	64%	72%	77%	78%	33%	77%	63%
#ALWAYS + USUALLY (NET)	177 88%	3059 88%	100%	88%	91%	91%	80%	90%	50%	100%	~	67%	88%	86%	85%	89%	89%	56%	91%	80%
TOP BOX SCORE	148 74%	2292 66%*	100%	67%	82%	79%	63%	80%*	50%	50%	~	67%	63%	64%	72%	77%	78%	33%	77%	63%
NOT ANSWERED	6	87		2		2	2	4	1						4	5		6		
VALID CASES	201	3481	1	42	55	57	46	125	2	2		3	8	28	54	131	179	9	150	51
NUMBER OF RESPONDENTS	207	3568	1	44	55	59	48	129	3	2		3	8	28	54	135	184	9	156	51
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	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			
	TCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK 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	GOOD & POOR	NO CCC	CCC		
Q10 YES	63 31%	1122 32%		15 ~ 35%	18 33%	15 26%	15 33%	38 31%	1 33%		1 ~ 33%	3 38%	12 44%	12 23%	47 36%	55 31%	4 44%	38 25%*	25 50%*	
NO	137 69%	2348 68%	1 100%	28 65%	36 67%	42 74%	30 67%	86 69%	2 67%	2 100%		2 ~ 67%	5 63%	15 56%	40 77%	84 64%	123 69%	5 56%	112 75%*	25 50%*
NOT ANSWERED	7	97		1	1	2	3	5					1	2	4	6		6	1	
VALID CASES	200	3471	1	43	54	57	45	124	3	2		3	8	27	52	131	178	9	150	50
NUMBER OF RESPONDENTS	207	3568	1	44	55	59	48	129	3	2		3	8	28	54	135	184	9	156	51
	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		
	TCH 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
Q11 #YES	55 93%	947 94%	~	11 92%	15 88%	14 93%	15 100%	36 100%	1 100%	~	1 100%	2 67%	10 83%	7 70%	45 98%	48 92%	4 100%	30 88%	25 100%
NO	4 7%	63 6%	~	1 8%	2 12%	1 7%	~	~	~	~	~	1 33%	2 17%	3 30%	1 2%	4 8%	~	4 12%	~
NOT ANSWERED	18	450	5	3	5	5	8					1	1	7	6	13		17	1
VALID CASES	59	1010	12	17	15	15	36	1			1	3	12	10	46	52	4	34	25
NUMBER OF RESPONDENTS	77 100%	1460 100%	17 100%	20 100%	20 100%	20 100%	44 100%	1 100%			1 100%	4 100%	13 100%	17 100%	52 100%	65 100%	4 100%	51 100%	26 100%

[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		
	TCH 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
Q12 #YES	44 76%	718 70%	9 ~ 82%~	14 82%~	9 60%~	12 80%~	25 71%~	1 100%~	~	~	1 ~100%~	2 67%~	9 75%~	8 80%~	33 73%~	37 73%~	4 100%~	23 70%~	21 84%~
NO	14 24%	305 30%	2 ~ 18%~	3 18%~	6 40%~	3 20%~	10 29%~	~	~	~	1 ~ 33%~	3 25%~	2 20%~	12 27%~	14 27%~	~	10 30%~	4 16%~	
NOT ANSWERED	5	87	4	1			3							2	2	4		5	
VALID CASES	58	1023	11	17	15	15	35	1			1	3	12	10	45	51	4	33	25
NUMBER OF RESPONDENTS	63 100%	1110 100%	15 100%	18 100%	15 100%	15 100%	38 100%	1 100%			1 100%	3 100%	12 100%	12 100%	47 100%	55 100%	4 100%	38 100%	25 100%

[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	
	TCH 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
Q13 #YES	44 73%	830 78%	11 ~ 92%~	13 72%~	8 53%~	12 80%~	26 72%~	1 100%~	~	1 ~100%~	3 100%~	6 50%~	10 83%~	31 69%~	37 70%~	4 100%~	28 80%~	16 64%~
NO	16 27%	241 22%	1 ~ 8%~	5 28%~	7 47%~	3 20%~	10 28%~	~	~	~	~	6 50%~	2 17%~	14 31%~	16 30%~	7 20%~	9 36%~	
NOT ANSWERED	3	39	3				2						2		2	3		
VALID CASES	60	1071	12	18	15	15	36	1		1	3	12	12	45	53	4	35	25
NUMBER OF RESPONDENTS	63 100%	1110 100%	15 100%	18 100%	15 100%	15 100%	38 100%	1 100%		1 100%	3 100%	12 100%	12 100%	47 100%	55 100%	4 100%	38 100%	25 100%

[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		
	TCH 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- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC
Q14 WORST HEALTH CARE POSSIBLE	1	3				1		1						1	1	1		1	
	0.5%	0.1%	~	~	~	2%	~	~ 33%	~	~	~	~	~	~ 0.8%	~ 0.6%	~	~ 0.7%	~	~
01		7																	
		0.2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02	1	9		1														1	
	0.5%	0.3%	~	2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~ 0.7%	~
03	2	25			2								1	2	1	1			2
	1%	0.7%	~	~	4%	~	~	~	~	~	~	~ 4%	~ 4%	~ 0.6%	~ 11%	~	~ 4%	~	
04		47																	
		1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
05	4	121			1	1	2	1					3	4	4	4		1	3
	2%	3%	~	~	2%	2%	4%	~ 0.8%	~	~	~	~ 12%	~ 3%	~ 3%	~ 2%	~	~ 0.7%	~ 6%	
06	5	116		1	2		2	4					1	1	4	5		4	1
	3%	3%	~	2%	4%	~	4%	~ 3%	~	~	~	~ 4%	~ 2%	~ 3%	~ 3%	~	~ 3%	~ 2%	
07	22	300		3	6	5	8	11	1			1	2	6	12	16	2	13	9
	11%	9%	~	7%	11%	9%	18%	~ 9%	~ 33%	~	~	~ 13%	~ 8%	~ 11%	~ 9%	~ 22%	~ 9%	~ 18%	
08	41	813	1	11	12	11	6	28		1		1	2	6	12	27	37	2	31
	21%	23%	~ 100%	~ 26%	~ 22%	~ 20%	~ 13%	~ 23%	~ 50%	~	~	~ 33%	~ 25%	~ 23%	~ 22%	~ 21%	~ 21%	~ 22%	~ 21%
09	41	704		8	13	10	10	30				1	3	5	8	32	38	2	29
	21%	20%	~	~ 19%	~ 24%	~ 18%	~ 22%	~ 24%	~	~	~	~ 33%	~ 38%	~ 19%	~ 15%	~ 25%	~ 21%	~ 22%	~ 20%
BEST HEALTH CARE POSSIBLE	81	1323		18	18	28	17	50	1	1		1	2	8	25	49	75	2	67
	41%	38%	~	~ 43%	~ 33%	~ 50%	~ 38%	~ 40%	~ 33%	~ 50%	~	~ 33%	~ 25%	~ 31%	~ 46%	~ 38%	~ 42%	~ 22%	~ 46%*
#8-10 (NET)	163	2841	1	37	43	49	33	108	1	2		3	7	19	45	108	150	6	127
	82%	82%	~ 100%	~ 88%	~ 80%	~ 87%	~ 73%	~ 87%*	~ 33%	~ 100%	~	~ 100%	~ 88%	~ 73%	~ 83%	~ 84%	~ 85%	~ 67%	~ 86%*

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		
	TCH 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	
9-10 (NET)	122 62%	2027 58%	~	26 62%	31 57%	38 68%	27 60%	80 65%	1 33%	1 50%	2 67%	5 63%	13 50%	33 61%	81 63%	113 64%	4 44%	96 65%	26 51%
NOT ANSWERED	9	98	2	1	3	3	5					2		6	7		9		
VALID CASES	198	3470	1	42	54	56	45	124	3	2	3	8	26	54	129	177	9	147	51
NUMBER OF RESPONDENTS	207 100%	3568 100%	1 100%	44 100%	55 100%	59 100%	48 100%	129 100%	3 100%	2 100%	3 100%	8 100%	28 100%	54 100%	135 100%	184 100%	9 100%	156 100%	51 100%
MEAN	8.68	8.58	8.00	8.79	8.48	8.89	8.58	8.87	5.67	9.00	9.00	8.75	8.12	8.74	8.70	8.77	7.89	8.85	8.20
p stat_(*=Sig @ p<=.05)		.340	~	~.280	.243		~.058	~	~	~	~	~	~.751	.855	~	~	~.020*	.021*	

[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			
	TCH 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	
Q15 NEVER	6 3%	64 2%	~	2%~	3 6%	~	2 4%~	3 2%	~	~	~	~	~	~	4 7%	~	4 2%~	1 11%~	5 3%	1 2%	
SOMETIMES	18 9%	353 10%	~	5%~	2 4%*	6 11%	8 17%~	8 6%	1 33%~	~	~	~	1 13%~	5 19%~	6 11%	12 9%	15 8%~	3 33%~	9 6%*	9 18%*	
USUALLY	53 27%	1112 32%	~	24%~	10 30%	16 25%	13 28%~	33 26%	1 33%~	~	~	1 33%~	2 25%~	7 27%~	12 22%	36 28%	45 25%~	3 33%~	36 24%	17 33%	
ALWAYS	121 61%	1922 56%	100%~	68%~	1 68%~	28 61%	33 64%	23 50%~	81 65%	1 33%~	2 100%~	~	2 67%~	5 63%~	14 54%~	32 59%	81 63%	114 64%~	2 22%~	97 66%*	24 47%*
#ALWAYS + USUALLY (NET)	174 88%	3034 88%	100%~	93%~	1 93%~	38 91%	49 89%	50 78%~	36 91%	2 67%~	2 100%~	~	3 100%~	7 88%~	21 81%~	44 81%	117 91%	159 89%~	5 56%~	133 90%	41 80%
TOP BOX SCORE	121 61%	1922 56%	100%~	68%~	1 68%~	28 61%	33 64%	23 50%~	81 65%	1 33%~	2 100%~	~	2 67%~	5 63%~	14 54%~	32 59%	81 63%	114 64%~	2 22%~	97 66%*	24 47%*
NOT ANSWERED	9	117		3	1	3	2	4						2		6	6		9		
VALID CASES	198	3451	1	41	54	56	46	125	3	2		3	8	26	54	129	178	9	147	51	
NUMBER OF RESPONDENTS	207 100%	3568 100%	1 100%	44 100%	55 100%	59 100%	48 100%	129 100%	3 100%	2 100%		3 100%	8 100%	28 100%	54 100%	135 100%	184 100%	9 100%	156 100%	51 100%	

[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		
	TCH 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
Q16 YES	216 74%	3643 71%	1 100%~	14 27%*	62 78%	76 93%*	63 81%	137 74%	4 100%~	2 67%~	4 ~100%~	7 58%~	32 80%~	56 67%	146 76%	199 73%~	8 80%~	162 70%*	54 89%*
NO	77 26%	1481 29%		38 ~ 73%*	18 22%	6 7%*	15 19%	47 26%		1 ~ 33%~		5 ~ 42%~	8 20%~	27 33%	46 24%	73 27%~	2 20%~	70 30%*	7 11%*
NOT ANSWERED	10	239		3	3	3	1	4						1	2	4		9	1
VALID CASES	293	5124	1	52	80	82	78	184	4	3	4	12	40	83	192	272	10	232	61
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%	4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%

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					
	TCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 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	GOOD & POOR	NO CCC	CCC				
Q17 YES	17 8%	403 11%	~	8%~	5 8%	8 11%	3 5%	8 6%	1 25%~	~	~	~	~	~	9%~	13%	7 6%	8 6%	11 6%~	4 50%~	6 4%*	11 20%*
NO	189 92%	3143 89%	100%~	92%~	56 92%	64 89%	56 95%	120 94%	3 75%~	2 100%~	~	4 ~100%~	7 ~100%~	29 91%~	46 87%	131 94%	178 94%~	4 50%~	146 96%*	43 80%*		
NOT ANSWERED	10	226		1	1	4	4	9						3	7	10		10				
VALID CASES	206	3545	1	13	61	72	59	128	4	2		4	7	32	53	139	189	8	152	54		
NUMBER OF RESPONDENTS	216 100%	3771 100%	1 100%	14 100%	62 100%	76 100%	63 100%	137 100%	4 100%	2 100%		4 100%	7 100%	32 100%	56 100%	146 100%	199 100%	8 100%	162 100%	54 100%		

[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		
	TCH 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
Q18 #YES	15 88%	349 94%	~100%	1 80%	4 88%	7 100%	3 100%	8 100%	1 100%	~	~	~	~100%	3 71%	8 100%	11 100%	2 50%	6 100%	9 82%
NO	2 12%	22 6%	~	1 20%	1 13%	~	~	~	~	~	~	~	~	2 29%	~	2 50%	~	2 18%	~
NOT ANSWERED		7																	
VALID CASES	17	371	1	5	8	3	8	1					3	7	8	11	4	6	11
NUMBER OF RESPONDENTS	17	378	1	5	8	3	8	1					3	7	8	11	4	6	11
	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	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					
	TCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	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			
Q19 YES	10 3%	175 3%	1 100%~	2 4%	4 5%	1 1%	2 3%	6 3%	~	~	~	~	~	4 10%~	1 1%	9 5%*	9 3%~	1 10%~	5 2%	5 8%		
NO	285 97%	4948 97%	~	51 96%	77 95%	82 99%	75 97%	181 97%	4 100%	3 100%	~	~	~	4 100%	11 100%	36 90%~	82 99%	185 95%*	265 97%~	9 90%~	228 98%	57 92%
NOT ANSWERED	8	240		2	2	2	2	1					1				2		8			
VALID CASES	295	5123	1	53	81	83	77	187	4	3			4	11	40	83	194	274	10	233	62	
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%			4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%	

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	TCH 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/PAC/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q20 NEVER	1	23		1				1							1	1			1	
	10%	12%	~	50%~	~	~	~	17%~	~	~	~	~	~	~	11%~	11%~	~	~	20%~	
SOMETIMES		35																		
		18%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
USUALLY	4	49		1	1	1	1	2					2		4	4	4		3	1
	40%	25%	~	50%~	25%~	100%~	50%~	33%~	~	~	~	~	50%~	~	44%~	44%~	44%~	~	60%~	20%~
ALWAYS	5	87	1		3		1	3					2	1	4	4	1		2	3
	50%	45%	100%~	~	75%~	~	50%~	50%~	~	~	~	~	50%~	100%~	44%~	44%~	100%~	40%~	60%~	
#ALWAYS + USUALLY (NET)	9	135	1	1	4	1	2	5					4	1	8	8	1		5	4
	90%	70%	100%~	50%~	100%~	100%~	100%~	83%~	~	~	~	~	100%~	100%~	89%~	89%~	100%~	100%~	100%~	80%~
TOP BOX SCORE	5	87	1		3		1	3					2	1	4	4	1		2	3
	50%	45%	100%~	~	75%~	~	50%~	50%~	~	~	~	~	50%~	100%~	44%~	44%~	100%~	40%~	60%~	
NOT ANSWERED		3																		
VALID CASES	10	193	1	2	4	1	2	6					4	1	9	9	1		5	5
NUMBER OF RESPONDENTS	10	196	1	2	4	1	2	6					4	1	9	9	1		5	5
	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			
	TCH 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	8	157		1	4	1	2	5					3	1	7	7	1	4	4	
	80%	84%~	~	50%~	100%~	100%~	100%~	83%~	~	~	~	~	~	75%~	100%~	78%~	78%~	100%~	80%~	80%~
NO	2	31	1	1				1					1	2	2			1	1	
	20%	16%~	100%~	50%~	~	~	~	17%~	~	~	~	~	25%~	~	22%~	22%~	~	20%~	20%~	
NOT ANSWERED		8																		
VALID CASES	10	188	1	2	4	1	2	6					4	1	9	9	1	5	5	
NUMBER OF RESPONDENTS	10	196	1	2	4	1	2	6					4	1	9	9	1	5	5	
	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	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		
	TCH 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	GOOD & POOR	NO CCC	CCC
Q22 YES	22 7%	446 9%	~	4%	12%	6%	6%	~	~	~	~	17%	10%	6%	7%	15% 5%	4% 40%	9% 4%*	13% 21%*
NO	274 93%	4656 91%	100%	96%	88%	94%	94%	100%	100%	~	100%	83%	90%	94%	93%	260% 95%	6% 60%	225% 96%*	49% 79%*
NOT ANSWERED	7	261		2	2	2	1	1								1		7	
VALID CASES	296	5102	1	53	81	83	78	187	4	3	4	12	40	84	194	275	10	234	62
NUMBER OF RESPONDENTS	303 100%	5363 100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	276% 100%	10% 100%	241% 100%	62% 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			
	TCH 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/PAC/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q23 NEVER	4 18%	62 15%	~	~	20%	20%	20%	1 9%	~	~	~	~	~	~	20%	1 8%	~	2 50%	2 22%	2 15%
SOMETIMES	4 18%	96 24%	~	50%	20%	20%	~	2 18%	~	~	~	~	~	2 50%	3 23%	3 20%	~	1 11%	3 23%	
USUALLY	5 23%	112 28%	~	~	20%	40%	20%	4 36%	~	~	~	~	1 50%	1 20%	4 31%	3 20%	2 50%	2 22%	3 23%	
ALWAYS	9 41%	135 33%	~	50%	40%	20%	60%	4 36%	~	~	~	~	1 50%	2 50%	3 60%	5 38%	9 60%	4 44%	5 38%	
#ALWAYS + USUALLY (NET)	14 64%	247 61%	~	50%	60%	60%	80%	8 73%	~	~	~	~	2 100%	2 50%	4 80%	9 69%	12 80%	2 50%	6 67%	8 62%
TOP BOX SCORE	9 41%	135 33%	~	50%	40%	20%	60%	4 36%	~	~	~	~	1 50%	2 50%	3 60%	5 38%	9 60%	~	4 44%	5 38%
NOT ANSWERED		14																		
VALID CASES	22	405		2	10	5	5	11					2	4	5	13	15	4	9	13
NUMBER OF RESPONDENTS	22	419		2	10	5	5	11					2	4	5	13	15	4	9	13
	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				
	TCH 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	GOOD & FAIR & POOR	NO CCC	CCC		
Q24 #YES	12 55%	260 64%~	~	50%~	50%~	40%~	80%~	55%~	~	~	~	~	50%~	50%~	60%~	54%~	67%~	25%~	56%~	54%~
NO	10 45%	143 36%~	~	50%~	50%~	60%~	20%~	45%~	~	~	~	~	50%~	50%~	40%~	46%~	33%~	75%~	44%~	46%~
NOT ANSWERED		16																		
VALID CASES	22	403		2	10	5	5	11					2	4	5	13	15	4	9	13
NUMBER OF RESPONDENTS	22	419		2	10	5	5	11					2	4	5	13	15	4	9	13
	100%	100%		100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	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				
	TCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMR AS-	NATV HAW/ PAC	AMR IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC			
Q25 YES	40 14%	666 13%	~	2 4%*	9 11%	12 14%	17 22%*	25 13%	~	~	~	~	2 17%	7 17%	8 10%	28 14%	30 11%	6 60%	18 8%*	22 35%*	
NO	256 86%	4441 87%	100%~	1 96%*	51 89%	72 86%	71 78%*	61 87%	162 87%	4 100%	3 100%	~	4 100%	10 83%~	33 83%~	76 90%	166 86%	245 89%~	4 40%~	216 92%*	40 65%*
NOT ANSWERED	7	256		2	2	2	1	1									1		7		
VALID CASES	296	5107	1	53	81	83	78	187	4	3		4	12	40	84	194	275	10	234	62	
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%		4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%	

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				
	TCH 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/ PAC ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q26 NEVER	5 13%	92 14%	~	~	22%~	8%~	13%~	4%~	~	~	~	~	~	~	13%~	4%~	4%~	17%~	19%~	9%~
SOMETIMES	7 18%	116 18%	~	~	22%~	8%~	27%~	26%~	~	~	~	~	~	14%~	~	23%~	18%~	17%~	6%~	27%~
USUALLY	7 18%	171 27%	~	~	~	33%~	20%~	17%~	~	~	~	~	100%~	14%~	25%~	19%~	14%~	50%~	13%~	23%~
ALWAYS	19 50%	258 41%	~	100%~	56%~	50%~	40%~	52%~	~	~	~	~	~	71%~	63%~	54%~	64%~	17%~	63%~	41%~
#ALWAYS + USUALLY (NET)	26 68%	429 67%	~	100%~	56%~	83%~	60%~	70%~	~	~	~	~	100%~	86%~	88%~	73%~	79%~	67%~	75%~	64%~
TOP BOX SCORE	19 50%	258 41%	~	100%~	56%~	50%~	40%~	52%~	~	~	~	~	~	71%~	63%~	54%~	64%~	17%~	63%~	41%~
NOT ANSWERED	2	17					2	2							2	2			2	
VALID CASES	38	636		2	9	12	15	23					2	7	8	26	28	6	16	22
NUMBER OF RESPONDENTS	40	653		2	9	12	17	25					2	7	8	28	30	6	18	22
	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		
	TCH 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
Q27 #YES	17 45%	311 49%~	2 ~100%~	5 63%~	4 33%~	6 38%~	12 50%~	~	~	~	~	2 ~100%~	2 29%~	4 50%~	12 44%~	13 45%~	3 50%~	7 44%~	10 45%~
NO	21 55%	326 51%~	~	3 38%~	8 67%~	10 63%~	12 50%~	~	~	~	~	~	5 71%~	4 50%~	15 56%~	16 55%~	3 50%~	9 56%~	12 55%~
NOT ANSWERED	2	17		1		1	1								1	1		2	
VALID CASES	38	636		2	8	12	16	24				2	7	8	27	29	6	16	22
NUMBER OF RESPONDENTS	40 100%	653 100%		2 100%	9 100%	12 100%	17 100%	25 100%				2 100%	7 100%	8 100%	28 100%	30 100%	6 100%	18 100%	22 100%

[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				
	TCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 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	GOOD & POOR	NO CCC	CCC		
Q28 YES	48 16%	978 19%	~	17%	17%	16%	16%	31 17%	1 25%	~	~	~	~	8%	28%	12 14%	34 18%	42 15%	4 40%	21 9%*	27 44%*
NO	246 84%	4103 81%	100%	~ 83%	83%	84%	84%	156 83%	3 75%	3 100%	~	~	4 ~100%	11 92%	28 72%	72 86%	159 82%	232 85%	6 60%	212 91%*	34 56%*
NOT ANSWERED	9	281		2	2	3	2	1					1		1	2			8	1	
VALID CASES	294	5082	1	53	81	82	77	187	4	3			4	12	39	84	193	274	10	233	61
NUMBER OF RESPONDENTS	303	5363	1	55	83	85	79	188	4	3			4	12	40	84	194	276	10	241	62
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	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			
	TCH 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	
Q29 #YES	29 60%	594 60%~	~	6 67%~	9 64%~	8 62%~	6 50%~	20 65%~	1 100%~	~	~	~	1 ~100%~	6 55%~	7 58%~	22 65%~	26 62%~	3 75%~	14 67%~	15 56%~
NO	19 40%	403 40%~	~	3 33%~	5 36%~	5 38%~	6 50%~	11 35%~	~	~	~	~	5 ~45%~	5 42%~	12 35%~	16 38%~	1 25%~	7 33%~	12 44%~	
NOT ANSWERED		32																		
VALID CASES	48	998		9	14	13	12	31	1				1	11	12	34	42	4	21	27
NUMBER OF RESPONDENTS	48 100%	1030 100%		9 100%	14 100%	13 100%	12 100%	31 100%	1 100%				1 100%	11 100%	12 100%	34 100%	42 100%	4 100%	21 100%	27 100%

[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		
	TCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 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	GOOD & POOR	NO CCC	CCC	
Q30 YES	267 93%	4410 88%*	1 100%~	46 92%	77 97%*	77 94%	66 87%	172 95%	4 100%	3 100%	3 ~100%	10 91%~	37 93%~	74 89%	179 95%*	249 93%~	10 100%~	209 92%	58 97%
NO	21 7%	622 12%*	~	4 8%	2 3%*	5 6%	10 13%	10 5%	~	~	~	1 9%~	3 7%~	9 11%	9 5%*	19 7%~	~	19 8%	2 3%
NOT ANSWERED	15	331		5	4	3	3	6			1	1		1	6	8		13	2
VALID CASES	288	5032	1	50	79	82	76	182	4	3	3	11	40	83	188	268	10	228	60
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%	4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%

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				
	TCH 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	82 32%	1163 27%		6 ~ 13%	26 ~ 35%	25 33%	25 40%	53 32%	2 50%	1 33%			3 30%	13 35%	25 34%	54 31%	80 33%	1 10%	72 36%*	10 17%*	
1 TIME	94 36%	1470 34%		19 ~ 42%	29 ~ 39%	30 40%	16 25%*	66 40%		1 33%			1 33%	6 60%	8 22%	29 40%	62 36%	88 36%	4 40%	76 38%	18 31%
2	46 18%	817 19%		11 ~ 24%	13 ~ 17%	8 11%*	14 22%	24 15%	1 25%	1 33%			2 67%	10 27%	12 16%	30 17%	44 18%		32 16%	14 24%	
3	22 8%	450 11%		5 ~ 11%	4 5%	9 12%	4 6%	13 8%					1 10%	2 5%	6 8%	14 8%	17 7%	4 40%	13 6%	9 16%	
4	7 3%	180 4%		2 ~ 4%	2 3%	1 1%	2 3%	5 3%	1 25%					1 3%	1 1%	6 3%	6 2%	1 10%	3 1%	4 7%	
5 TO 9	7 3%	146 3%		2 ~ 4%	1 1%	2 3%	2 3%	4 2%						2 5%		6 3%	6 2%		4 2%	3 5%	
10 OR MORE TIMES	1 0.4%	40 0.9%	1 100%	~	~	~	~	~	~	~	~	~	~	1 3%	1 ~0.6%	1 0.4%	~	1 ~0.5%	~	~	
NOT ANSWERED	8	203		1	2	2	3	7							1	6	7		8		
VALID CASES	259	4266	1	45	75	75	63	165	4	3			3	10	37	73	173	242	10	201	58
NUMBER OF RESPONDENTS	267	4469	1	46	77	77	66	172	4	3			3	10	37	74	179	249	10	209	58
	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				
	TCH 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		
Q31A ALWAYS	8 5%	82 3%	~	2 5%~	2 4%~	3 6%~	1 3%~	2 2%	~	~	~	~	~	2 8%~	5 11%~	2 2%*	6 4%~	1 11%~	7 5%~	1 2%~	
USUALLY	1 0.6%	49 2%	~	~	~	~	1 3%~	~	~	~	~	~	~	1 2%~	~	~	1 0.6%~	~	1 0.8%~	~	
SOMETIMES	8 5%	229 8%	~	4 10%~	~	3 6%~	1 3%~	2 2%	~	1 50%~	~	~	~	2 8%~	3 6%~	4 3%	6 4%~	1 11%~	5 4%~	3 6%~	
NEVER	158 90%	2671 88%	100%~	33 85%~	47 96%~	42 88%~	35 92%~	107 96%*	2 100%~	1 50%~	~	~	3 100%~	7 100%~	20 83%~	38 81%~	112 95%*	147 92%~	7 78%~	115 90%~	43 91%~
#NEVER + SOMETIMES (NET)	166 95%	2900 96%	100%~	37 95%~	47 96%~	45 94%~	36 95%~	109 98%*	2 100%~	2 100%~	~	~	3 100%~	7 100%~	22 92%~	41 87%~	116 98%*	153 96%~	8 89%~	120 94%~	46 98%~
TOP BOX SCORE	158 90%	2671 88%	100%~	33 85%~	47 96%~	42 88%~	35 92%~	107 96%*	2 100%~	1 50%~	~	~	3 100%~	7 100%~	20 83%~	38 81%~	112 95%*	147 92%~	7 78%~	115 90%~	43 91%~
NOT ANSWERED	2	30				2	1						1	1			2		1	1	
VALID CASES	175	3030	1	39	49	48	38	111	2	2			3	7	24	47	118	160	9	128	47
NUMBER OF RESPONDENTS	177	3060	100%	100%	100%	100%	100%	112	2	2			3	7	24	48	119	162	9	129	48
	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			
	TCH 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	GOOD & POOR	NO CCC	CCC		
Q32 NEVER	2 1%	80 3%	~	~	~	~	2 5%	2 2%	~	~	~	~	~	1 ~0.9%	1	1	1	1		
SOMETIMES	6 3%	145 5%	~	1 3%	2 4%	2 4%	1 3%	2 2%	~	~	~	1 4%	3 6%	2 2%	4 3%	1 11%	4 3%	2 4%		
USUALLY	22 13%	478 16%	~	4 10%	4 8%	6 13%	8 21%	14 13%	1 50%	~	~	2 29%	3 12%	4 9%	17 15%	18 11%	3 33%	10 8%	12 26%	
ALWAYS	144 83%	2312 77%	1 100%	34 87%	43 88%	39 83%	27 71%	92 84%	1 50%	2 100%	~	3 100%	5 71%	20 83%	40 85%	97 83%	136 86%	4 44%	112 88%	32 68%
#ALWAYS + USUALLY (NET)	166 95%	2790 93%	1 100%	38 97%	47 96%	45 96%	35 92%	106 96%	2 100%	2 100%	~	3 100%	7 100%	23 96%	44 94%	114 97%	154 97%	7 78%	122 96%	44 94%
TOP BOX SCORE	144 83%	2312 77%	1 100%	34 87%	43 88%	39 83%	27 71%	92 84%	1 50%	2 100%	~	3 100%	5 71%	20 83%	40 85%	97 83%	136 86%	4 44%	112 88%	32 68%
NOT ANSWERED	3	44				3	2							1	2	3		2	1	
VALID CASES	174	3016	1	39	49	47	38	110	2	2	3	7	24	47	117	159	9	127	47	
NUMBER OF RESPONDENTS	177	3060	1	39	49	50	38	112	2	2	3	7	24	48	119	162	9	129	48	
	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			
	TCH 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	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC	
Q33 NEVER	3 2%	40 1%	~	1 3%	1 2%	~	1 3%	2 2%	~	~	~	~	~	~	1 2%	2 2%	2 1%	1 11%	0.8 0.8%	1 4%	2 4%
SOMETIMES	6 3%	145 5%	~	1 3%	~	3 6%	2 5%	3 3%	~	~	~	~	~	1 4%	2 4%	3 3%	4 2%	1 11%	~	4 3%	2 4%
USUALLY	31 18%	494 16%	~	10 26%	8 17%	6 12%	7 18%	18 16%	1 50%	1 50%	~	1 33%	3 43%	3 12%	7 15%	21 18%	27 17%	2 22%	~	22 17%	9 19%
ALWAYS	135 77%	2341 77%	100%	1 69%	27 81%	39 82%	40 74%	28 79%	1 50%	1 50%	~	2 67%	4 57%	20 83%	38 79%	92 78%	128 80%	5 56%	~	101 79%	34 72%
#ALWAYS + USUALLY (NET)	166 95%	2835 94%	100%	1 95%	37 98%	47 94%	46 92%	35 95%	2 100%	2 100%	~	3 100%	7 100%	23 96%	45 94%	113 96%	155 96%	7 78%	~	123 96%	43 91%
TOP BOX SCORE	135 77%	2341 77%	100%	1 69%	27 81%	39 82%	40 74%	28 79%	1 50%	1 50%	~	2 67%	4 57%	20 83%	38 79%	92 78%	128 80%	5 56%	~	101 79%	34 72%
NOT ANSWERED	2	39			1	1		1							1		1			1	1
VALID CASES	175	3021	100%	1 39	48 49	49 50	38 38	111 112	2 2	2 2		3 3	7 7	24 24	48 48	118 119	161 162	9 9		128 129	47 48
NUMBER OF RESPONDENTS	177	3060	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%		100%	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		
	TCH 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	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q34 NEVER	2 1%	28 0.9%	~	~	4%~	~	~	~	~	~	~	~	~	4%~	4%~	~	2	1	1
SOMETIMES	6 3%	114 4%	~	3%~	~	8%~	3%~	4%	~	~	~	~	~	8%~	2%~	4%~	4	2	5
USUALLY	22 13%	407 14%	~	13%~	8%~	8%~	24%~	13%	~	~	~	1	2	2	5	14	19	1	6
ALWAYS	144 83%	2460 82%	100%~	84%~	88%~	84%~	74%~	94	2	2	~	2	5	19	40	99	136	6	35
#ALWAYS + USUALLY (NET)	166 95%	2867 95%	100%~	97%~	96%~	92%~	97%~	107	2	2	~	3	7	21	45	113	155	7	41
TOP BOX SCORE	144 83%	2460 82%	100%~	84%~	88%~	84%~	74%~	94	2	2	~	2	5	19	40	99	136	6	35
NOT ANSWERED	3	51		1	1	1		1							1		1	2	1
VALID CASES	174	3009	1	38	48	49	38	111	2	2		3	7	24	48	118	161	9	47
NUMBER OF RESPONDENTS	177	3060	1	39	49	50	38	112	2	2		3	7	24	48	119	162	9	48
	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]

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	TCH 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	
Q35 YES	113 66%	2050 69%	6 ~ 16%	29 62%	43 88%	35 97%	68 63%	1 100%	1 50%		3 ~ 100%	4 57%	18 75%	34 71%	76 66%	105 67%	6 67%	81 65%	32 71%	
NO	57 34%	942 31%	1 100%	31 84%	18 38%	6 12%	1 3%	40 37%	1 ~ 50%			3 ~ 43%	6 25%	14 29%	40 34%	52 33%	3 33%	44 35%	13 29%	
NOT ANSWERED	7	67		2	2	1	2	4	1							3	5	4	3	
VALID CASES	170	2993	1	37	47	49	36	108	1	2		3	7	24	48	116	157	9	125	45
NUMBER OF RESPONDENTS	177	3060	1	39	49	50	38	112	2	2		3	7	24	48	119	162	9	129	48
	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																	
	TCH 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															
Q36 NEVER	1 0.9%	19 1%	~	~	4%~	~	~	~	~	~	~	~	6%~	3%~	~	1	1%~	~	1	3%~														
SOMETIMES	8 7%	119 6%	~	17%~	11%~	7%~	3%~	5	8%~	~	~	~	11%~	2	6%~	8%~	6	6%~	2	33%~	4%~	5	16%~											
USUALLY	27 25%	466 23%	~	50%~	6	21%~	7	17%~	11	31%~	15	100%~	~	2	67%~	2	50%~	22%~	4	27%~	22%~	9	23%~	16	50%~	23%~	3	22%~	10	32%~				
ALWAYS	74 67%	1408 70%	~	33%~	2	18	31	76%~	23	66%~	46	70%~	1	~	100%~	~	33%~	1	2	50%~	61%~	21	64%~	52	70%~	72	71%~	1	17%~	59	75%~	15	48%~	
#ALWAYS + USUALLY (NET)	101 92%	1874 93%	~	83%~	5	24	38	93%~	34	97%~	61	100%~	1	~	100%~	~	100%~	3	4	15	83%~	30	91%~	68	92%~	95	93%~	4	67%~	76	96%~	25	81%~	
TOP BOX SCORE	74 67%	1408 70%	~	33%~	2	18	31	76%~	23	66%~	46	70%~	1	~	100%~	~	33%~	1	2	50%~	61%~	21	64%~	52	70%~	72	71%~	1	17%~	59	75%~	15	48%~	
NOT ANSWERED	3	36			1	2		2										1	2			1	2		3				2		1			
VALID CASES	110	2013			6	28	41	35	66	1	1			3	4	18	33	74	102	6	79	31			105	6	81	32						
NUMBER OF RESPONDENTS	113 100%	2049 100%			6	29	43	35	68	1	1			3	4	18	34	76	105	6	81	32			105	6	81	32						
					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 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				
	TCH 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- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q37 NEVER	5 3%	89 3%	~	2 5%~	2 4%~	1 2%~	~	3 3%	~	~	~	~	~	~	2 4%~	3 3%	5 3%~	~	4 3%~	1 2%~	
SOMETIMES	16 9%	318 11%	~	4 11%~	5 10%~	4 9%~	3 8%~	9 8%	~	1 50%~	~	~	1 14%~	2 8%~	5 11%~	9 8%	13 8%~	2 22%~	9 7%~	7 15%~	
USUALLY	41 24%	708 24%	~	9 24%~	12 25%~	11 23%~	9 24%~	23 21%	1 50%~	~	~	1 33%~	3 43%~	8 33%~	13 28%~	27 23%	35 22%~	5 56%~	29 23%~	12 26%~	
ALWAYS	110 64%	1876 63%	100%~	1 61%~	23 60%~	29 66%~	31 68%~	26 68%	75 50%~	1 50%~	1 50%~	~	2 67%~	3 43%~	14 58%~	27 57%~	78 67%	106 67%~	2 22%~	83 66%~	27 57%~
#ALWAYS + USUALLY (NET)	151 88%	2584 86%	100%~	1 84%~	32 85%~	41 89%~	42 92%~	35 92%~	98 89%	2 100%~	1 50%~	~	3 100%~	6 86%~	22 92%~	40 85%~	105 90%	141 89%~	7 78%~	112 90%~	39 83%~
TOP BOX SCORE	110 64%	1876 63%	100%~	1 61%~	23 60%~	29 66%~	31 68%~	26 68%	75 50%~	1 50%~	1 50%~	~	2 67%~	3 43%~	14 58%~	27 57%~	78 67%	106 67%~	2 22%~	83 66%~	27 57%~
NOT ANSWERED	5	70		1	1	3		2							1	2	3		4	1	
VALID CASES	172	2990	1	38	48	47	38	110	2	2		3	7	24	47	117	159	9	125	47	
NUMBER OF RESPONDENTS	177	3060	1	39	49	50	38	112	2	2		3	7	24	48	119	162	9	129	48	
	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			
	TCH 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	GOOD & POOR	NO CCC	CCC	
Q38 #YES	146 84%	2520 84%	1 100%	35 92%	42 88%	36 73%	32 84%	92 83%	2 100%	2 100%	2 ~	7 67%	21 100%	36 75%	103 87%	135 84%	7 78%	106 83%	40 85%	
NO	28 16%	484 16%	~	3 8%	6 12%	13 27%	6 16%	19 17%	~	~	~	1 33%	3 12%	12 25%	15 13%	26 16%	2 22%	21 17%	7 15%	
NOT ANSWERED	3	56		1	1	1	1							1		1		2	1	
VALID CASES	174	3004	1	38	48	49	38	111	2	2		3	7	24	48	118	161	9	127	47
NUMBER OF RESPONDENTS	177	3060	1	39	49	50	38	112	2	2		3	7	24	48	119	162	9	129	48
	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]

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			
	TCH 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- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q39 YES	66 38%	1156 39%	1 100%~	14 37%~	17 35%~	19 39%~	15 39%~	45 41%	1 50%~	~	~	~	1 14%~	14 58%~	19 40%~	47 40%~	60 37%~	6 67%~	36 28%~	30 64%~
NO	108 62%	1846 61%	~	24 63%~	31 65%~	30 61%~	23 61%~	66 59%	1 50%~	2 100%~	~	3 ~100%~	6 86%~	10 42%~	29 60%~	71 60%~	101 63%~	3 33%~	91 72%~	17 36%~
NOT ANSWERED	3	59		1	1	1		1							1		1		2	1
VALID CASES	174	3001	1	38	48	49	38	111	2	2		3	7	24	48	118	161	9	127	47
NUMBER OF RESPONDENTS	177	3060	1	39	49	50	38	112	2	2		3	7	24	48	119	162	9	129	48
	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			
	TCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHTE	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	
Q40 NEVER	5 8%	80 7%		1 ~ 7%	1 6%	1 6%	2 13%	3 7%					1 ~ 7%	3 16%	2 4%	5 9%		2 6%	3 11%	
SOMETIMES	10 16%	163 14%		2 ~ 14%	4 25%	1 6%	3 20%	8 19%					1 ~ 7%	2 11%	8 18%	9 16%	1 17%	4 11%	6 21%	
USUALLY	13 20%	320 28%		1 ~ 7%	3 19%	6 33%	3 20%	9 21%					2 ~ 14%	5 26%	8 18%	10 17%	3 50%	5 14%	8 29%	
ALWAYS	36 56%	595 51%	1 100%	10 71%	8 50%	10 56%	7 47%	23 53%	1 100%				1 ~ 100%	10 71%	9 47%	27 60%	34 59%	2 33%	25 69%	11 39%
#ALWAYS + USUALLY (NET)	49 77%	915 79%	1 100%	11 79%	11 69%	16 89%	10 67%	32 74%	1 100%				1 ~ 100%	12 86%	14 74%	35 78%	44 76%	5 83%	30 83%	19 68%
TOP BOX SCORE	36 56%	595 51%	1 100%	10 71%	8 50%	10 56%	7 47%	23 53%	1 100%				1 ~ 100%	10 71%	9 47%	27 60%	34 59%	2 33%	25 69%	11 39%
NOT ANSWERED	2	33			1	1		2							2	2			2	
VALID CASES	64	1158	1	14	16	18	15	43	1				1	14	19	45	58	6	36	28
NUMBER OF RESPONDENTS	66	1191	1	14	17	19	15	45	1				1	14	19	47	60	6	36	30
	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				
	TCH 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	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC		
Q41 WORST PERSONAL DOCTOR POSSIBLE	9	0.2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
01	6	0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
02	17	0.4%	~	~	1%	~	~	~	~	~	~	~	1%	~	1%	~0.4%	~	1%	~0.5%		
03	214	0.8%	~	~	~	1%	2%	0.6%	~	~	~	~	3%	~	1%	~0.4%	10%	~	4%		
04	145	0.4%	~	~	~	1%	~	0.6%	~	~	~	~	~	~	1%	~0.6%	~0.4%	~	1%		
05	135	5%	~	~	2%	5%	6%	7%	1%	25%	~	~	~	3%	5%	8%	11%	2%	8%	5%	
06	6112	2%	~	~	4%	~	3%	5%	~	~	~	~	3%	1%	4%	6%	3%	~	4%	2%	
07	18293	7%	~	6%	4%	5%	3%	10%	~	~	~	1%	6%	5%	13%	16%	2%	13%	5%		
08	38690	15%	~	10%	10%	8%	10%	27%	2%	1%	~	1%	4%	7%	29%	35%	1%	27%	11%		
09	46810	18%	~	8%	15%	13%	10%	34%	~	~	~	1%	2%	5%	11%	35%	46%	~	41%	5%	
BEST PERSONAL DOCTOR POSSIBLE	12851	51%	100%	45%	37%	51%	55%	48%	80%	1%	2%	~	1%	5%	19%	39%	82%	121%	4%	101%	27%
#8-10 (NET)	2123628	84%	100%	86%	62%	62%	49%	85%	3%	3%	~	3%	8%	28%	57%	146%	202%	5%	169%	43%	

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			
	TCH 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- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
9-10 (NET)	174 69%	2937 69%	1 100%	28 64%	52 71%	54 73%	39 64%	114 69%	1 25%	2 67%	2 67%	7 78%	24 65%	50 72%	117 67%	167 70%	4 40%	142 72%*	32 56%*	
NOT ANSWERED	14	228		2	4	3	5	7				1		5	5	11		13	1	
VALID CASES	253	4241	1	44	73	74	61	165	4	3		3	9	37	69	174	238	10	196	57
NUMBER OF RESPONDENTS	267 100%	4469 100%	1 100%	46 100%	77 100%	77 100%	66 100%	172 100%	4 100%	3 100%		3 100%	10 100%	37 100%	74 100%	179 100%	249 100%	10 100%	209 100%	58 100%
MEAN	8.84	8.89	10.0	8.95	8.89	8.89	8.62	8.87	7.75	9.33		9.00	9.22	8.73	8.88	8.80	8.89	7.50	8.96	8.44
p stat_(*=Sig @ p<=.05)		.627	~	~	.758	.749	.259	.674	~	~	~	~	~	~	.807	.593	~	~	.064	.064

[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				
	TCH 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	52 20%	1024 24%		7 ~ 16%	14 ~ 19%	16 21%	15 25%	32 19%	1 25%				1 10%	14 39%	11 15%	39 23%	42 18%	8 89%	15 8%*	37 65%*	
NO	202 80%	3250 76%	1 100%	37 ~ 84%	59 ~ 81%	59 79%	46 75%	134 81%	3 75%	3 ~ 100%			3 ~ 100%	9 90%	22 61%	60 85%	134 77%	198 82%	1 11%	182 92%*	20 35%*
NOT ANSWERED	13	195		2	4	2	5	6					1	3	6	9	1	12	1		
VALID CASES	254	4274	1	44	73	75	61	166	4	3			3	10	36	71	173	240	9	197	57
NUMBER OF RESPONDENTS	267 100%	4469 100%	1 100%	46 100%	77 100%	77 100%	66 100%	172 100%	4 100%	3 100%			3 100%	10 100%	37 100%	74 100%	179 100%	249 100%	10 100%	209 100%	58 100%

[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			
	TCH 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- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q43 #YES	41 82%	896 89%	~	4 57%	12 86%	13 87%	12 86%	23 77%	1 100%	~	~	~	1 100%	13 93%	9 82%	30 81%	34 85%	5 63%	12 86%	29 81%
NO	9 18%	110 11%	~	3 43%	2 14%	2 13%	2 14%	7 23%	~	~	~	~	1 7%	2 18%	7 19%	6 15%	3 38%	2 14%	7 19%	
NOT ANSWERED	2	35				1	1	2							2	2			1	1
VALID CASES	50	1006		7	14	15	14	30	1				1	14	11	37	40	8	14	36
NUMBER OF RESPONDENTS	52	1041		7	14	16	15	32	1				1	14	11	39	42	8	15	37
	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		
	TCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK 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	GOOD & POOR	NO CCC	CCC	
Q44 #YES	39 76%	836 84%	4 ~ 57%	12 ~ 86%	10 ~ 67%	13 ~ 87%	23 74%	1 100%	~	~	~	1 ~ 100%	11 79%	8 73%	29 76%	33 80%	4 50%	11 79%	28 76%
NO	12 24%	163 16%	3 ~ 43%	2 ~ 14%	5 ~ 33%	2 ~ 13%	8 26%	~	~	~	~	3 ~ 21%	3 27%	9 24%	8 20%	4 50%	3 21%	9 24%	
NOT ANSWERED	1	41			1		1							1	1		1		
VALID CASES	51	1000	7	14	15	15	31	1			1	14	11	38	41	8	14	37	
NUMBER OF RESPONDENTS	52	1041	7	14	16	15	32	1			1	14	11	39	42	8	15	37	
	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				
	TCH 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		
Q45																					
YES	38 13%	774 15%	~	18%	12%	13%	12%	25 14%	1 25%~	~	~	~	1 8%~	9 24%~	10 12%	27 14%	34 13%~	3 30%~	20 9%*	18 31%*	
NO	247 87%	4257 85%	100%~	82%	88%	87%	88%	160 86%	3 75%~	3 100%~	~	~	4 ~100%~	11 92%~	29 76%~	72 88%	165 86%	237 87%~	7 70%~	206 91%*	41 69%*
NOT ANSWERED	18	332		5	3	6	4	3					2	2	2	5		15	3		
VALID CASES	285	5031	1	50	80	79	75	185	4	3			4	12	38	82	192	271	10	226	59
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%			4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%

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				
	TCH 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- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q46 NEVER	3 8%	73 10%	~	~	20%~	10%~	~	4%~	~	~	~	~	~	22%~	10%~	8%~	6%~	33%~	~	17%~
SOMETIMES	6 17%	115 16%	~	25%~	~	30%~	13%~	4 17%~	~	~	~	~	~	22%~	20%~	12%~	16%~	~	22%~	11%~
USUALLY	8 22%	209 28%	~	25%~	20%~	20%~	25%~	5 22%~	1 100%~	~	~	~	~	11%~	10%~	28%~	22%~	33%~	17%~	28%~
ALWAYS	19 53%	340 46%	~	50%~	60%~	40%~	63%~	13 57%~	~	~	~	~	100%~	44%~	60%~	52%~	56%~	33%~	61%~	44%~
#ALWAYS + USUALLY (NET)	27 75%	549 75%	~	75%~	80%~	60%~	88%~	18 78%~	1 100%~	~	~	~	100%~	56%~	70%~	80%~	78%~	67%~	78%~	72%~
TOP BOX SCORE	19 53%	340 46%	~	50%~	60%~	40%~	63%~	13 57%~	~	~	~	~	100%~	44%~	60%~	52%~	56%~	33%~	61%~	44%~
NOT ANSWERED	2	29	1				1	2							2	2			2	
VALID CASES	36	737	8	10	10	8	23	1				1	9	10	25	32	3	18	18	
NUMBER OF RESPONDENTS	38	766	9	10	10	9	25	1				1	9	10	27	34	3	20	18	
	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		
	TCH 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	
Q47 NONE	2 6%	67 9%	~	~	10%~	10%~	~	2 9%~	~	~	~	~	~	1 10%~	1 4%~	2 6%~	~	1 6%~	1 6%~
1 SPECIALIST	27 75%	450 61%~	~	6 75%~	7 70%~	6 60%~	8 100%~	18 78%~	~	~	~	~	7 78%~	8 80%~	19 76%~	24 75%~	3 100%~	14 78%~	13 72%~
2	5 14%	144 19%~	~	2 25%~	1 10%~	2 20%~	~	2 9%~	~	~	~	1 100%~	2 22%~	1 10%~	3 12%~	4 12%~	~	3 17%~	2 11%~
3	2 6%	48 6%~	~	~	1 10%~	1 10%~	~	1 4%~	1 100%~	~	~	~	~	~	2 8%~	2 6%~	~	~	2 11%~
4		10 1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
5 OR MORE SPECIALISTS		23 3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	2	25	~	1	~	1	~	2	~	~	~	~	~	~	2	2	~	2	~
VALID CASES	36	741	~	8	10	10	8	23	1	~	~	1	9	10	25	32	3	18	18
NUMBER OF RESPONDENTS	38	766	~	9	10	10	9	25	1	~	~	1	9	10	27	34	3	20	18
	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?

	TCH TOT CHLD	OHP TOT CHLD	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/ ILND	AMER IND/ NATV	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q48 WORST SPECIALIST POSSIBLE		1 0.1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
01		2 0.3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
02		1 0.2%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
03		8 1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
04		17 3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
05		11 2%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
06		29 4%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
07	5 15%	71 11%~	~ 37%~	1 11%~	1 11%~	~	3 14%~	~	~	~	~	~	2 22%~	1 11%~	3 13%~	4 13%~	3 18%~	2 12%~	
08	4 12%	106 16%~	~	2 22%~	2 22%~	~	2 10%~	1 100%~	~	~	~	~	~	1 11%~	3 13%~	4 13%~	1 6%~	3 18%~	
09	10 29%	148 22%~	~ 25%~	2 22%~	3 33%~	3 38%~	6 29%~	~	~	~	~	1 100%~	3 33%~	4 44%~	6 25%~	9 30%~	1 33%~	4 24%~	6 35%~
BEST SPECIALIST POSSIBLE	15 44%	278 41%~	~ 37%~	4 44%~	3 33%~	5 63%~	10 48%~	~	~	~	~	~	4 44%~	3 33%~	12 50%~	13 43%~	2 67%~	9 53%~	6 35%~

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				
	TCH 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/ NATV	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
#8-10 (NET)	29 85%	532 79%	~	5 62%	8 89%	8 89%	8 100%	18 86%	1 100%	~	~	~	~	1 100%	7 78%	8 89%	21 88%	26 87%	3 100%	14 82%	15 88%
9-10 (NET)	25 74%	426 63%	~	5 62%	6 67%	6 67%	8 100%	16 76%	~	~	~	~	~	1 100%	7 78%	7 78%	18 75%	22 73%	3 100%	13 76%	12 71%
NOT ANSWERED		10																			
VALID CASES	34	672		8	9	9	8	21	1					1	9	9	24	30	3	17	17
NUMBER OF RESPONDENTS	34	682		8	9	9	8	21	1					1	9	9	24	30	3	17	17
	100%	100%		100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%
MEAN	9.03	8.61		8.63	9.00	8.89	9.63	9.10	8.00					9.00	9.00	9.00	9.12	9.03	9.67	9.12	8.94
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?

	TCH TOT CHLD	OHP TOT CHLD	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 ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q49 YES	60 21%	1285 26%*	13 ~ 26%	20 25%	20 25%	7 9%*	37 20%	1 25%~	1 33%~	1 ~ 25%~	3 25%~	6 16%~	25 30%*	34 18%	56 21%~	4 40%~	48 21%	12 20%	
NO	225 79%	3691 74%*	1 100%~	37 74%	59 75%	59 75%	69 91%*	148 80%	3 75%~	2 67%~	3 ~ 75%~	9 75%~	32 84%~	57 70%*	158 82%	215 79%~	6 60%~	177 79%	48 80%
NOT ANSWERED	18	387	5	4	6	3	3					2	2	2	5		16	2	
VALID CASES	285	4976	1	50	79	79	76	185	4	3	4	12	38	82	192	271	10	225	60
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%	4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%

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		
	TCH 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		
Q50 NEVER	3 5%	37 3%	~	1 8%	1 5%	1 5%	3 9%	~	~	~	~	~	~	3 10%	3 6%	~	2 4%	1 8%	
SOMETIMES	10 18%	235 20%	~	3 25%	5 26%	1 5%	1 17%	6 18%	1 100%	~	~	1 33%	1 17%	1 4%	8 26%	10 19%	9 20%	1 8%	
USUALLY	22 39%	343 30%	~	6 50%	5 26%	9 45%	2 33%	14 41%	~	~	1 100%	1 33%	1 17%	12 48%	10 32%	3 36%	16 36%	6 50%	
ALWAYS	22 39%	547 47%	~	2 17%	8 42%	9 45%	3 50%	11 32%	1 100%	~	~	1 33%	4 67%	12 48%	10 32%	1 40%	18 40%	4 33%	
#ALWAYS + USUALLY (NET)	44 77%	890 77%	~	8 67%	13 68%	18 90%	5 83%	25 74%	1 100%	~	~	1 100%	2 67%	5 83%	24 96%	20 65%	4 75%	34 76%	10 83%
TOP BOX SCORE	22 39%	547 47%	~	2 17%	8 42%	9 45%	3 50%	11 32%	1 100%	~	~	1 33%	4 67%	12 48%	10 32%	1 40%	18 40%	4 33%	
NOT ANSWERED	3	42	1	1		1	3							3	3	3			
VALID CASES	57	1162	12	19	20	6	34	1	1	1	3	6	25	31	53	4	45	12	
NUMBER OF RESPONDENTS	60	1204	13	20	20	7	37	1	1	1	3	6	25	34	56	4	48	12	
	100%	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			
	TCH 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		
Q51 NEVER		21 2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
SOMETIMES	3 5%	81 7%	~	~	1 5%	2 11%	2 6%	~	~	~	~	~	1 4%	1 3%	3 6%	~	2 5%	1 8%		
USUALLY	17 30%	289 25%	~	5 42%	5 26%	5 26%	2 33%	12 35%	1 100%	~	~	1 ~100%	1 50%	1 17%	6 25%	11 35%	16 31%	1 25%	13 30%	4 33%
ALWAYS	36 64%	768 66%	~	7 58%	13 68%	12 63%	4 67%	20 59%	1 ~100%	~	~	1 ~50%	5 83%	17 71%	19 61%	33 63%	3 75%	29 66%	7 58%	
#ALWAYS + USUALLY (NET)	53 95%	1057 91%	~	12 ~100%	18 95%	17 89%	6 100%	32 94%	1 100%	1 ~100%	~	1 ~100%	2 100%	6 ~100%	23 96%	30 97%	49 94%	4 100%	42 95%	11 92%
TOP BOX SCORE	36 64%	768 66%	~	7 58%	13 68%	12 63%	4 67%	20 59%	1 ~100%	~	~	1 ~50%	5 83%	17 71%	19 61%	33 63%	3 75%	29 66%	7 58%	
NOT ANSWERED	4	44		1	1	1	1	3				1		1	3	4		4		
VALID CASES	56	1160		12	19	19	6	34	1	1		1	2	6	24	31	52	4	44	12
NUMBER OF RESPONDENTS	60	1204		13	20	20	7	37	1	1		1	3	6	25	34	56	4	48	12
	100%	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			
	TCH 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 & POOR	FAIR & POOR	NO CCC	CCC		
Q52 YES	98 35%	1790 36%		15 ~ 31%	32 41%	27 34%	24 32%	64 35%		1 ~ 33%		3 ~ 27%	17 43%	33 41%	64 34%	94 35%	4 40%	78 35%	20 33%	
NO	183 65%	3138 64%	1 100%	34 69%	46 59%	52 66%	50 68%	119 65%	4 100%	2 67%		4 ~ 100%	8 73%	23 58%	48 59%	127 66%	175 65%	6 60%	142 65%	41 67%
NOT ANSWERED	22	435		6	5	6	5	5				1		3	3	7		21	1	
VALID CASES	281	4928	1	49	78	79	74	183	4	3		4	11	40	81	191	269	10	220	61
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%		4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%

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			
	TCH 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	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
PQ53 NEVER	4 1%	64 1%	~	2%~	3%	~	1%	~	~	~	~	9%~	~	~	2%	4	3	1		
SOMETIMES	20 7%	317 6%	~	4%~	9%	9%	5%	8%	~	~	~	9%~	8%~	7%	8%	18	2	16	4	
USUALLY	31 11%	629 13%	~	10%~	11%	13%	11%	12%	~	~	~	9%~	5%~	17%	9%	30	1	25	6	
ALWAYS	220 80%	3884 79%	100%~	83%~	78%	78%	82%	141	4	3	~	4	8	33	60	152	211	7	170	50
#ALWAYS + USUALLY (NET)	251 91%	4513 92%	100%~	94%~	88%	91%	93%	163	4	3	~	4	9	35	74	169	241	8	195	56
TOP BOX SCORE	220 80%	3884 79%	100%~	83%~	78%	78%	82%	141	4	3	~	4	8	33	60	152	211	7	170	50
NOT ANSWERED	6	91		1	2	2	1	4					2	1	5	6		6		
VALID CASES	275	4894	100%	100%	100%	100%	100%	179	4	3		4	11	38	80	186	263	10	214	61
NUMBER OF RESPONDENTS	281 100%	4985 100%	100%	100%	100%	100%	100%	183	4	3		4	11	40	81	191	269	10	220	61

[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			
	TCH 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- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC		
Q54 WORST HEALTH PLAN POSSIBLE	3 1%	24 0.5%	~	~	1% 1	3% 2	~0.6% 1	25% 1	~	~	~	~	2% 1	1% 2	3% 1%~	~	1% 3	~		
01	1 0.4%	11 0.2%	~	1% 2%~	~	~	~0.6% 1	~	~	~	~	~	~	1% ~0.5%	1% 0.4%~	~	1% ~0.5%	~		
02	1 0.4%	31 0.6%	~	~	1% 1	~	~	~	~	~	~	2% 1	~0.5% 1	1% 0.4%~	~	1% ~0.5%	~			
03	1 0.4%	38 0.8%	~	~	1% 1	~	~	~	~	~	~	~	1% ~	~	10% ~	~	2% 1			
04	4 1%	60 1%	~	~	3% 2	~3% 2	1% 2	~	~	25% 1	~	~	1% 3	2% 2%	4% 2%~	~	3% 1%	1% 2%		
05	15 5%	233 5%	~	2% 1	5% 4	3% 2	11% 8	7% 12	~	~	~	2% 1	3% 11	6% 13	10% 1	5% 11	7% 4			
06	12 4%	215 4%	~	~	7% 5	4% 3	5% 4	4% 7	~	~	~	10% 1	10% 4	3% 2	5% 10	5% 12	~	4% 8	7% 4	
07	31 11%	490 10%	100% ~	10% 5	11% 8	10% 8	12% 9	12% 22	~	~	25% 1	10% 1	15% 6	10% 8	12% 22	11% 30	10% 1	9% 20	18% 11	
08	53 19%	940 19%	~	22% 11	13% 10	21% 16	22% 16	21% 37	25% 1	33% 1	~	~	20% 2	22% 9	15% 12	22% 41	19% 51	20% 2	18% 39	23% 14
09	42 15%	878 18%	~	14% 7	24% 18	14% 11	8% 6	14% 25	~	~	25% 1	20% 2	15% 6	19% 15	14% 26	15% 40	20% 2	16% 35	12% 7	
BEST HEALTH PLAN POSSIBLE	113 41%	2014 41%	~	49% 24	33% 25	45% 35	39% 29	41% 73	50% 2	67% 2	~	25% 1	40% 4	30% 12	47% 37	38% 71	41% 109	30% 3	44% 95	30% 18
#8-10 (NET)	208 75%	3832 78%	~	86% 42	71% 53	81% 62	69% 51	75% 135	75% 3	100% 3	~	50% 2	80% 8	67% 27	81% 64	73% 138	76% 200	70% 7	78% 169	65% 39

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		
	TCH 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- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC
9-10 (NET)	155 56%	2892 59%	31 ~	43 63%	46 57%	35 60%	47%	98 54%	2 50%	2 67%	2 ~	6 50%	18 45%	52 66%*	97 52%*	149 56%~	5 50%~	130 60%*	25 42%*
NOT ANSWERED	27	430	6	8	8	5	8				2		5	6	12		25	2	
VALID CASES	276	4933	1	49	75	77	74	180	4	3	4	10	40	79	188	264	10	216	60
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%	4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%
MEAN	8.40	8.49	7.00	8.82	8.15	8.58	8.20	8.42	7.00	9.33	7.50	8.70	7.97	8.68	8.28	8.42	7.90	8.50	8.05
p stat_(*=Sig @ p<=.05)		.388	~	~.217	.326	.296	.793	~	~	~	~	~	~.113	.120	~	~.094	.095		

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	TCH 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	115 40%	2010 40%	1 100%~	24 48%	31 39%	33 42%	26 34%	76 41%	2 50%~	1 33%~	2 ~ 50%~	2 17%~	18 45%~	33 39%	79 41%	108 40%~	6 60%~	70 31%*	45 73%*
NO	170 60%	2973 60%		26 ~ 52%	48 61%	46 58%	50 66%	109 59%	2 50%~	2 67%~	2 ~ 50%~	10 83%~	22 55%~	51 61%	113 59%	165 60%~	4 40%~	153 69%*	17 27%*
NOT ANSWERED	18	380		5	4	6	3	3							2	3		18	
VALID CASES	285	4983	1	50	79	79	76	185	4	3	4	12	40	84	192	273	10	223	62
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%	4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%

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

	TCH TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC	
Q56 NEVER		30 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	1 0.9%	187 9%	~	~	~	1 4%	~	~	~	~	~	1 6%	1 3%	~	1 1%	~	1 1%	~	~	
USUALLY	22 20%	459 23%	~	6 25%	4 13%	5 15%	7 29%	13 18%	~	~	~	1 50%	6 33%	7 22%	15 19%	20 19%	2 33%	7 10%	15 33%	
ALWAYS	89 79%	1338 66%	1 100%	18 75%	26 87%	28 85%	16 67%	61 82%	2 100%	1 100%	~	2 100%	1 50%	11 61%	24 75%	62 81%	84 80%	4 67%	59 88%	30 67%
#ALWAYS + USUALLY (NET)	111 99%	1797 89%	1 100%	24 100%	30 100%	33 100%	23 96%	74 100%	2 100%	1 100%	~	2 100%	2 100%	17 94%	31 97%	77 100%	104 99%	6 100%	66 99%	45 100%
TOP BOX SCORE	89 79%	1338 66%	1 100%	18 75%	26 87%	28 85%	16 67%	61 82%	2 100%	1 100%	~	2 100%	1 50%	11 61%	24 75%	62 81%	84 80%	4 67%	59 88%	30 67%
NOT ANSWERED	3	42			1		2	2						1	2	3		3		
VALID CASES	112	2014	1	24	30	33	24	74	2	1		2	2	18	32	77	105	6	67	45
NUMBER OF RESPONDENTS	115	2056	1	24	31	33	26	76	2	1		2	2	18	33	79	108	6	70	45
	100%	100%	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				
	TCH 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	61 56%	1193 60%		17 ~ 74%~	14 47%~	16 48%~	14 67%~	41 58%~	2 100%~	1 100%~			1 ~ 100%~	9 53%~	16 52%~	42 57%~	54 53%~	6 100%~	34 52%~	27 64%~	
NO	47 44%	793 40%	1 100%~	6 26%~	16 53%~	17 52%~	7 33%~	30 42%~					2 ~ 100%~	8 ~ 47%~	15 48%~	32 43%~	47 47%~		32 48%~	15 36%~	
NOT ANSWERED	7	70		1	1		5	5					1	1	2	5	7		4	3	
VALID CASES	108	1986	1	23	30	33	21	71	2	1			2	1	17	31	74	101	6	66	42
NUMBER OF RESPONDENTS	115	2056	1	24	31	33	26	76	2	1			2	2	18	33	79	108	6	70	45
	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			
	TCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK 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	
Q57A YES	214 76%	3840 79%	1 100%~	24 48%*	60 76%	67 86%*	62 84%*	142 77%	2 50%~	3 100%~	4 ~100%~	7 70%~	29 73%~	64 78%	145 76%	205 76%~	8 80%~	161 73%*	53 85%*	
NO	68 24%	1039 21%		26 ~ 52%*	19 24%	11 14%*	12 16%*	42 23%	2 50%~				3 ~ 30%~	11 27%~	18 22%	47 24%	65 24%~	2 20%~	59 27%*	9 15%*
NOT ANSWERED	21	484		5	4	7	5	4				2		2	2	6		21		
VALID CASES	282	4879	1	50	79	78	74	184	4	3	4	10	40	82	192	270	10	220	62	
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%	4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%	

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			
	TCH 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	
Q57B NEVER	30 29%	674 30%		2 ~ 13%	7 27%	7 23%	14 44%	16 28%	1 33%	1 100%		2 ~ 50%	3 17%	16 38%	14 24%	28 29%	2 29%	23 28%	7 29%	
SOMETIMES	14 13%	430 19%		4 ~ 25%	5 19%	2 7%	3 9%	7 12%			1 ~ 100%		1 6%	6 14%	6 10%	12 12%	2 29%	12 15%	2 8%	
USUALLY	24 23%	488 22%		2 ~ 13%	6 23%	10 33%	6 19%	15 26%				2 ~ 50%	3 17%	8 19%	16 27%	24 24%		18 ~ 22%	6 25%	
ALWAYS	37 35%	667 30%	1 100%	8 50%	8 31%	11 37%	9 28%	19 33%	2 67%				11 61%	12 29%	23 39%	34 35%	3 43%	28 35%	9 38%	
#ALWAYS + USUALLY (NET)	61 58%	1154 51%	1 100%	10 63%	14 54%	21 70%	15 47%	34 60%	2 67%			2 ~ 50%	14 78%	20 48%	39 66%	58 59%	3 43%	46 57%	15 63%	
TOP BOX SCORE	37 35%	667 30%	1 100%	8 50%	8 31%	11 37%	9 28%	19 33%	2 67%				11 61%	12 29%	23 39%	34 35%	3 43%	28 35%	9 38%	
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	173	2651		33	50	48	42	125	1	2	3	7	21	40	130	169	3	135	38	
NOT ANSWERED	25	454		6	7	7	5	6				1	1	2	5	9		25		
VALID CASES	105	2258	1	16	26	30	32	57	3	1	1	4	18	42	59	98	7	81	24	
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%		4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%

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			
	TCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q57C YES	58 21%	1026 21%		15 ~ 32%	16 21%	17 22%	10 14%*	37 21%	1 25%	1 33%		3 25%	11 30%	18 22%	38 21%	54 21%	4 40%	38 18%*	20 33%*	
NO	215 79%	3791 79%	1 100%	32 68%	60 79%	60 78%	62 86%*	142 79%	3 75%	2 67%		4 ~100%	9 75%	26 70%	63 78%	147 79%	209 79%	6 60%	175 82%*	40 67%*
NOT ANSWERED	30	546		8	7	8	7	9					3	3	9	13		28	2	
VALID CASES	273	4817	1	47	76	77	72	179	4	3		4	12	37	81	185	263	10	213	60
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%		4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%

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			
	TCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER 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	50 88%	865 87%	15 ~100%	13 81%	15 88%	7 78%	31 86%	1 100%	1 100%				3 ~100%	11 100%	17 94%	32 86%	47 89%	3 75%	33 89%	17 85%
NO	7 12%	124 13%		3 ~19%	2 12%	2 22%	5 14%								1 6%	5 14%	6 11%	1 25%	4 11%	3 15%
NOT ANSWERED	1	6				1	1								1	1			1	
VALID CASES	57	990	15	16	17	9	36	1	1				3	11	18	37	53	4	37	20
NUMBER OF RESPONDENTS	58 100%	996 100%	15 100%	16 100%	17 100%	10 100%	37 100%	1 100%	1 100%				3 100%	11 100%	18 100%	38 100%	54 100%	4 100%	38 100%	20 100%

[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			
	TCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER 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	
Q57E #YES	49 84%	853 87%	15 ~100%	14 88%	13 76%	7 70%	31 84%	1 100%	1 100%				3 ~100%	10 91%	14 78%	33 87%	47 87%	2 50%	34 89%	15 75%
NO	9 16%	127 13%		2 ~12%	4 24%	3 30%	6 16%							1 9%	4 22%	5 13%	7 13%	2 50%	4 11%	5 25%
NOT ANSWERED		15																		
VALID CASES	58	981	15	16	17	10	37	1	1				3	11	18	38	54	4	38	20
NUMBER OF RESPONDENTS	58 100%	996 100%	15 100%	16 100%	17 100%	10 100%	37 100%	1 100%	1 100%				3 100%	11 100%	18 100%	38 100%	54 100%	4 100%	38 100%	20 100%

[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			
	TCH 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- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q57F NEVER	2 3%	20 2%	~	~	~	1 6%	1 10%	1 3%	~	~	~	~	~	1 6%	1 10%	1 2%	1 25%	1 3%	1 5%	
SOMETIMES	1 2%	89 9%*	~	~	~	1 10%	~	~	~	~	~	~	1 9%	1 3%	1 2%	~	~	~	1 5%	
USUALLY	13 22%	244 25%	~	3 20%	4 25%	3 18%	3 30%	8 22%	~	~	~	~	2 67%	1 9%	4 22%	8 21%	12 22%	1 25%	11 29%	2 10%
ALWAYS	42 72%	624 64%	~	12 80%	12 75%	13 76%	5 50%	28 76%	1 100%	1 100%	~	~	1 33%	9 82%	13 72%	28 74%	40 74%	2 50%	26 68%	16 80%
#ALWAYS + USUALLY (NET)	55 95%	868 89%*	~	15 100%	16 100%	16 94%	8 80%	36 97%	1 100%	1 100%	~	~	3 100%	10 91%	17 94%	36 95%	52 96%	3 75%	37 97%	18 90%
TOP BOX SCORE	42 72%	624 64%	~	12 80%	12 75%	13 76%	5 50%	28 76%	1 100%	1 100%	~	~	1 33%	9 82%	13 72%	28 74%	40 74%	2 50%	26 68%	16 80%
NOT ANSWERED		20																		
VALID CASES	58	976		15	16	17	10	37	1	1			3	11	18	38	54	4	38	20
NUMBER OF RESPONDENTS	58	996		15	16	17	10	37	1	1			3	11	18	38	54	4	38	20
	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					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	TCH 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	GOOD & POOR	NO CCC	CCC
Q57G NEVER	3 5%	39 4%	~	~	1 6%	~	2 20%	2 5%	~	~	~	~	~	~	1 6%	1 3%	3 6%	~	3 8%	~
SOMETIMES	6 10%	87 9%	~	2 13%	1 6%	1 6%	2 20%	2 5%	~	~	~	~	~	3 27%	2 11%	4 11%	5 9%	1 25%	2 5%	4 20%
USUALLY	11 19%	248 25%	~	3 20%	3 19%	4 24%	1 10%	7 19%	1 100%	~	~	~	1 33%	2 18%	5 28%	6 16%	11 20%	~	8 21%	3 15%
ALWAYS	38 66%	607 62%	~	10 67%	11 69%	12 71%	5 50%	26 70%	1 100%	~	~	~	2 67%	6 55%	10 56%	27 71%	35 65%	3 75%	25 66%	13 65%
#ALWAYS + USUALLY (NET)	49 84%	855 87%	~	13 87%	14 88%	16 94%	6 60%	33 89%	1 100%	1 100%	~	~	3 100%	8 73%	15 83%	33 87%	46 85%	3 75%	33 87%	16 80%
TOP BOX SCORE	38 66%	607 62%	~	10 67%	11 69%	12 71%	5 50%	26 70%	1 100%	~	~	~	2 67%	6 55%	10 56%	27 71%	35 65%	3 75%	25 66%	13 65%
NOT ANSWERED		16																		
VALID CASES	58	980		15	16	17	10	37	1	1			3	11	18	38	54	4	38	20
NUMBER OF RESPONDENTS	58 100%	996 100%		15 100%	16 100%	17 100%	10 100%	37 100%	1 100%	1 100%			3 100%	11 100%	18 100%	38 100%	54 100%	4 100%	38 100%	20 100%

[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					ETHNIC-ITY	HEALTH STATUS		CCC SCREENER				
	TCH 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/PAC/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q57H NEVER	1 2%	18 2%	~	~	~	~	10%~	1 3%~	~	~	~	~	~	~	~	1 3%~	1 2%~	~	1 3%~	~
SOMETIMES	2 3%	71 7%	~	~	~	6%~	10%~	~	~	~	~	~	~	1 9%~	1 6%~	1 3%~	1 2%~	1 25%~	~	2 10%~
USUALLY	12 21%	202 21%	~	3 20%~	4 25%~	3 18%~	2 20%~	10 27%~	~	~	~	~	1 33%~	~	5 28%~	7 18%~	10 19%~	2 50%~	9 24%~	3 15%~
ALWAYS	43 74%	690 70%	~	12 80%~	12 75%~	13 76%~	6 60%~	26 70%~	1 100%~	1 100%~	~	~	2 67%~	10 91%~	12 67%~	29 76%~	42 78%~	1 25%~	28 74%~	15 75%~
#ALWAYS + USUALLY (NET)	55 95%	892 91%	~	15 100%~	16 100%~	16 94%~	8 80%~	36 97%~	1 100%~	1 100%~	~	~	3 100%~	10 91%~	17 94%~	36 95%~	52 96%~	3 75%~	37 97%~	18 90%~
TOP BOX SCORE	43 74%	690 70%	~	12 80%~	12 75%~	13 76%~	6 60%~	26 70%~	1 100%~	1 100%~	~	~	2 67%~	10 91%~	12 67%~	29 76%~	42 78%~	1 25%~	28 74%~	15 75%~
NOT ANSWERED		16																		
VALID CASES	58	980		15	16	17	10	37	1	1			3	11	18	38	54	4	38	20
NUMBER OF RESPONDENTS	58	996		15	16	17	10	37	1	1			3	11	18	38	54	4	38	20
	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		
	TCH 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 & POOR	FAIR & POOR	NO CCC	CCC
Q58 EXCELLENT	131 46%	1951 39%*	~ 25	~ 37	~ 39	~ 30	88 47%	3 75%~	2 67%~	2 ~ 50%~	7 58%~	18 46%~	32 38%	94 48%	131 47%~	121 ~ 54%*	10 16%*		
VERY GOOD	100 35%	1732 35%	1 100%~	17 35%~	27 34%	26 33%	29 38%	67 36%	1 25%~	1 33%~	2 ~ 50%~	2 17%~	15 38%~	25 30%	72 37%	100 36%~	71 ~ 32%*	29 47%*	
GOOD	45 16%	973 20%	~ 6	~ 14	~ 10	~ 15	29 15%	~	~	~	~	2 ~ 17%~	5 13%~	22 26%*	23 12%*	45 16%~	30 ~ 13%	15 24%	
FAIR	10 3%	308 6%*	~ 1	~ 2	~ 4	~ 3	4 2%	~	~	~	~	1 ~ 8%~	1 3%~	5 6%	5 3%	10 ~ 100%~	2 ~ 0.9%*	8 13%*	
POOR		13 0.3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
#EXCELLENT + VERY GOOD + GOOD (NET)	276 97%	4656 94%*	1 100%~	48 98%~	78 98%	75 95%	74 96%	184 98%	4 100%~	3 100%~	4 ~ 100%~	11 92%~	38 97%~	79 94%	189 97%	276 100%~	222 ~ 99%*	54 87%*	
NOT ANSWERED	17	386	6	3	6	2							1					17	
VALID CASES	286	4977	1	49	80	79	77	188	4	3	4	12	39	84	194	276	10	224	62
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%	4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	TCH 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
Q59 EXCELLENT	136 48%	2270 46%	33 ~ 67%	44 ~ 55%	32 41%	27 35%*	87 46%	4 100%	2 ~ 67%		2 ~ 50%	6 ~ 50%	20 51%	38 45%	92 47%	135 49%	1 10%	118 53%*	18 29%*	
VERY GOOD	84 29%	1311 26%	12 ~ 24%	19 ~ 24%	25 32%	28 36%	57 30%		1 ~ 33%		2 ~ 50%	3 25%	10 26%	23 27%	59 30%	83 30%	1 10%	68 30%	16 26%	
GOOD	44 15%	923 19%	1 100%	3 6%	12 15%	17 22%	11 14%	29 15%				2 ~ 17%	5 13%	18 21%	26 13%	43 16%	1 10%	30 13%	14 23%	
FAIR	19 7%	400 8%	1 ~ 2%	4 ~ 5%	4 5%	10 13%*	12 6%					1 ~ 8%	4 10%	5 6%	14 7%	12 4%	7 70%	6 3%*	13 21%*	
POOR	3 1%	72 1%		1 ~ 1%	1 1%	1 1%	3 2%								3 ~ 2%	3 1%		2 -0.9%	1 2%	
#EXCELLENT + VERY GOOD + GOOD (NET)	264 92%	4503 91%	1 100%	48 98%	75 94%	74 94%	66 86%*	173 92%	4 100%	3 ~ 100%		4 ~ 100%	11 92%	35 90%	79 94%	177 91%	261 95%	3 30%	216 96%*	48 77%*
NOT ANSWERED	17	387		6	3	6	2						1						17	
VALID CASES	286	4976	1	49	80	79	77	188	4	3		4	12	39	84	194	276	10	224	62
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%		4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	TCH 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		
Q60 YES	62 22%	1132 23%		10 ~ 20%	13 ~ 16%	19 24%	20 26%	39 21%	1 25%			1 ~ 25%	3 ~ 25%	14 36%	19 23%	42 22%	56 20%	6 60%	19 8%*	43 69%*
NO	224 78%	3829 77%	1 100%	39 80%	67 84%	60 76%	57 74%	149 79%	3 75%	3 100%		3 ~ 75%	9 ~ 75%	25 64%	65 77%	152 78%	220 80%	4 40%	205 92%*	19 31%*
NOT ANSWERED	17	401		6	3	6	2						1							17
VALID CASES	286	4962	1	49	80	79	77	188	4	3		4	12	39	84	194	276	10	224	62
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%		4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	TCH 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
Q61 YES	45 74%	857 79%	6 ~ 60%	8 ~ 62%	16 ~ 84%	15 ~ 79%	28 74%	1 100%	~	1 ~ 100%	2 67%	9 64%	13 68%	32 78%	39 71%	6 100%	4 22%	41 95%
NO	16 26%	234 21%	4 ~ 40%	5 ~ 38%	3 ~ 16%	4 ~ 21%	10 26%	~	~	~	1 ~ 33%	5 36%	6 32%	9 22%	16 29%	~	14 78%	2 5%
NOT ANSWERED	1	30				1	1							1	1		1	
VALID CASES	61	1091	10	13	19	19	38	1		1	3	14	19	41	55	6	18	43
NUMBER OF RESPONDENTS	62	1121	10	13	19	20	39	1		1	3	14	19	42	56	6	19	43
	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			
	TCH 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	
Q62 YES	40 91%	763 90%	~ 80%	4 75%	6 94%	15 100%	15 89%	24 100%	1 ~	~	1 ~100%	2 ~100%	9 ~100%	12 92%	28 90%	34 89%	6 100%	40 ~ 98%	
NO	4 9%	83 10%	~ 20%	1 25%	2 6%	1 6%	3 ~ 11%	~	~	~	~	~	~	1 8%	3 10%	4 11%	~ 100%	1 2%	
NOT ANSWERED	1	20		1			1							1		1		1	
VALID CASES	44	846		5	8	16	15	27	1		1	2	9	13	31	38	6	3	41
NUMBER OF RESPONDENTS	45	866		6	8	16	15	28	1		1	2	9	13	32	39	6	4	41
	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			
	TCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 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	GOOD & POOR	NO CCC	CCC		
Q63 YES	32 11%	727 15%		4 ~ 8%	10 ~ 12%	9 12%	9 12%	23 12%					9 ~ 24%	4 5%*	27 14%*	27 10%~	5 50%~	7 3%*	25 41%*	
NO	252 89%	4197 85%	1 100%~	45 92%~	70 88%	69 88%	67 88%	165 88%	4 100%	3 ~100%		4 ~100%	12 ~100%	29 76%~	78 95%*	167 86%*	247 90%~	5 50%~	216 97%*	36 59%*
NOT ANSWERED	19	439		6	3	7	3					2	2		2		18	1		
VALID CASES	284	4924	1	49	80	78	76	188	4	3		4	12	38	82	194	274	10	223	61
NUMBER OF RESPONDENTS	303	5363	1	55	83	85	79	188	4	3		4	12	40	84	194	276	10	241	62
	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			
	TCH 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	22	620	4	7	4	7	14					8	4	17	18	4	22	
	73%	86%	~100%	~70%	~50%	~88%	~67%	~	~	~	~	~89%	~100%	~68%	~72%	~80%	~92%	
NO	8	103		3	4	1	7					1		8	7	1	6	2
	27%	14%	~	~30%	~50%	~13%	~33%	~	~	~	~	~11%	~	~32%	~28%	~20%	~100%	~8%
NOT ANSWERED	2	18				1	1	2						2	2		1	1
VALID CASES	30	723	4	10	8	8	21					9	4	25	25	5	6	24
NUMBER OF RESPONDENTS	32	741	4	10	9	9	23					9	4	27	27	5	7	25
	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			
	TCH 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	22	581	4	7	4	7	14					8	4	17	18	4	22	
	100%	97%	~100%	~100%	~100%	~100%	~100%	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%	~
NO		18																
		3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		12																
VALID CASES	22	600	4	7	4	7	14					8	4	17	18	4	22	
NUMBER OF RESPONDENTS	22	612	4	7	4	7	14					8	4	17	18	4	22	
	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			
	TCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 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	NO CCC	CCC			
Q66 YES	30 11%	575 12%		4 ~ 8%	10 ~ 12%	7 9%	9 12%	22 12%					8 ~ 21%	5 6%	24 12%	26 9%	4 40%	4 2%*	26 42%*	
NO	254 89%	4353 88%	1 100%	45 ~ 92%	70 ~ 88%	71 91%	67 88%	166 88%	4 100%	3 ~ 100%		4 ~ 100%	12 ~ 100%	31 79%	78 94%	170 88%	248 91%	6 60%	218 98%*	36 58%*
NOT ANSWERED	19	435		6	3	7	3					1	1		2		19			
VALID CASES	284	4928	1	49	80	78	76	188	4	3		4	12	39	83	194	274	10	222	62
NUMBER OF RESPONDENTS	303	5363	1	55	83	85	79	188	4	3		4	12	40	84	194	276	10	241	62
	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			
	TCH 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	
Q67 YES	23	448		3	8	4	8	17					6	3	19	19	4	23	
	82%	80%	~	75%	89%	57%	100%	85%	~	~	~	~	75%	75%	83%	79%	100%	~	92%
NO	5	112		1	1	3		3					2	1	4	5		3	2
	18%	20%	~	25%	11%	43%	~	15%	~	~	~	~	25%	25%	17%	21%	~	100%	8%
NOT ANSWERED	2	21			1		1	2						1	1	2		1	1
VALID CASES	28	560		4	9	7	8	20					8	4	23	24	4	3	25
NUMBER OF RESPONDENTS	30	581		4	10	7	9	22					8	5	24	26	4	4	26
	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			
	TCH 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
Q68 YES	22	439	3	8	3	8	16					6	3	18	18	4	22	
	100%	97%	~100%	~100%	~100%	~100%	~100%	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%	~
NO		14																
		3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	1	3				1	1							1	1		1	
VALID CASES	22	453	3	8	3	8	16					6	3	18	18	4	22	
NUMBER OF RESPONDENTS	23	456	3	8	4	8	17					6	3	19	19	4	23	
	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					
	TCH 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	22 8%	459 9%	~	1 2%~	12 15%*	7 9%	2 3%*	17 9%	~	~	~	~	~	4 10%~	1 1%*	20 10%*	18 7%~	4 40%~	6 3%*	16 26%*		
NO	262 92%	4495 91%	100%~	1 98%~	48 85%*	68 91%	72 97%*	73 91%	4 100%	3 100%	~	~	~	4 100%~	12 100%~	35 90%~	82 99%*	174 90%*	256 93%~	6 60%~	216 97%*	46 74%*
NOT ANSWERED	19	409		6	3	6	4						1	1		2			19			
VALID CASES	284	4954	1	49	80	79	75	188	4	3				4	12	39	83	194	274	10	222	62
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%				4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	TCH 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	11	314		1	7	2	1	8					3		10	7	4	11	
	55%	71%	~100%	~64%	~33%	~50%	~53%	~	~	~	~	~75%	~	~53%	~44%	~100%	~79%		
NO	9	129			4	4	1	7					1		9	9	6	3	
	45%	29%	~	~	~36%	~67%	~50%	~47%	~	~	~	~	~25%	~	~47%	~56%	~100%	~21%	
NOT ANSWERED	2	20			1	1		2							1	1	2	2	
VALID CASES	20	442		1	11	6	2	15					4		19	16	4	6	14
NUMBER OF RESPONDENTS	22	462		1	12	7	2	17					4	1	20	18	4	6	16
	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			
	TCH 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
Q71 YES	11	260	1	7	2	1	8	~	~	~	~	3	10	7	4	11	~
	100%	95%	~100%	~100%	~100%	~100%	~100%	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~
NO		14	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
		5%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		7															
VALID CASES	11	274	1	7	2	1	8					3	10	7	4	11	
NUMBER OF RESPONDENTS	11	281	1	7	2	1	8					3	10	7	4	11	
	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				
	TCH 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			
Q72 YES	35 12%	722 15%	~	1 2%	9 11%	10 13%	15 20%*	25 13%	~	~	~	~	1 8%	7 18%	6 7%	28 14%	28 10%	7 70%	7 3%*	28 45%*	
NO	248 88%	4209 85%	100%~	1 98%~	48 89%	71 87%	69 80%*	59 87%	163 87%	4 100%	3 100%	~	4 100%	11 92%~	32 82%~	76 93%	166 86%	245 90%~	3 30%~	214 97%*	34 55%*
NOT ANSWERED	20	432		6	3	6	5					1	2		3		20				
VALID CASES	283	4931	1	49	80	79	74	188	4	3		4	12	39	82	194	273	10	221	62	
NUMBER OF RESPONDENTS	303	5363	1	55	83	85	79	188	4	3		4	12	40	84	194	276	10	241	62	
	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			
	TCH 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	
Q73 YES	26	612	~	~	7	9	10	18	~	~	~	~	7	5	21	21	5	26	
	81%	90%	~	~	78%	100%	71%	82%	~	~	~	~	100%	83%	84%	84%	71%	~	93%
NO	6	68	~	~	2	4	4	4	~	~	~	1	1	4	4	2	4	2	
	19%	10%	~	~	22%	~	29%	18%	~	~	~	100%	~	17%	16%	16%	29%	100%	7%
NOT ANSWERED	3	39		1		1	1	3						3	3		3		
VALID CASES	32	680			9	9	14	22				1	7	6	25	25	7	4	28
NUMBER OF RESPONDENTS	35	719		1	9	10	15	25				1	7	6	28	28	7	7	28
	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				
	TCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- AMER 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			
NQ74 LESS THAN 1 YEAR OLD	1 0.3%	27 0.5%	1 100%	~	~	~	~	~	~	~	~	~	1 2%	1 ~0.5%	1 0.4%	~	1 0.4%	~			
1 TO 3 YEARS OLD	55 18%	890 17%	~	55 ~100%	~	~	~	35 19%	2 50%	1 33%	~	~	3 25%	4 10%	10 12%	37 19%	48 17%	1 10%	49 20%*	6 10%*	
4 TO 7 YEARS OLD	83 27%	1394 26%	~	~	83 ~100%	~	~	53 28%	~	1 33%	~	~	3 75%	3 25%	10 25%	32 38%*	45 23%*	78 28%	2 20%	68 28%	15 24%
8 TO 12 YEARS OLD	85 28%	1563 29%	~	~	~	85 ~100%	~	47 25%	2 50%	~	~	~	1 25%	3 25%	16 40%	23 27%	56 29%	75 27%	4 40%	65 27%	20 32%
13 OR OLDER	79 26%	1489 28%	~	~	~	79 ~100%	~	53 28%	~	1 33%	~	~	3 25%	9 22%	19 23%	55 28%	74 27%	3 30%	58 24%	21 34%	
VALID CASES	303	5363	1	55	83	85	79	188	4	3			4	12	40	84	194	276	10	241	62
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%			4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%

[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			
	TCH 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		
NQ75 MALE	151 50%	2755 51%		27 ~ 49%	46 55%	45 53%	33 42%	92 49%	1 25%	3 100%		3 75%	7 58%	17 43%	43 51%	98 51%	139 50%	5 50%	123 51%	28 45%
FEMALE	152 50%	2608 49%	1 100%	28 ~ 51%	37 45%	40 47%	46 58%	96 51%	3 75%			1 25%	5 42%	23 58%	41 49%	96 49%	137 50%	5 50%	118 49%	34 55%
VALID CASES	303	5363	1	55	83	85	79	188	4	3		4	12	40	84	194	276	10	241	62
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%		4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%

[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	
	TCH 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		
Q76 HISPANIC OR LATINO	84 30%	2091 42%*	~	10 21%~	32 42%*	23 29%	19 26%	28 15%*	~	~	2 50%~	9 75%~	13 33%~	84 100%~	~	79 29%~	5 50%~	69 32%	15 25%
NOT HISPANIC OR LATINO	194 70%	2832 58%*	100%~	1 79%~	37 58%*	45 71%	56 74%	155 85%*	3 100%~	3 100%~	2 50%~	3 25%~	26 67%~	194 100%~	~	189 71%~	5 50%~	148 68%	46 75%
NOT ANSWERED	25	440		8	6	6	5	5	1				1		8		24	1	
VALID CASES	278	4923	1	47	77	79	74	183	3	3	4	12	39	84	194	268	10	217	61
NUMBER OF RESPONDENTS	303 100%	5363 100%	100%	1 100%	55 100%	83 100%	85 100%	188 100%	4 100%	3 100%	4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
TCH 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	
Q77.1 YES	226 75%	3570 67%*	1 100%~	38 69%	63 76%	62 78%	188 100%~	~	~	~	~	38 95%~	41 49%*	179 92%*	220 80%~	5 50%~	172 71%*	54 87%*	
NO	77 25%	1793 33%*	~	17 31%	20 24%	23 22%	4 ~100%	3 ~100%	4 ~100%	12 ~100%	2 ~5%	43 51%*	15 8%*	56 20%~	5 50%~	69 29%*	8 13%*		
VALID CASES	303	5363	1	55	83	85	188	4	3	4	12	40	84	194	276	10	241	62	
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	188 100%	4 100%	3 100%	4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%	

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	TCH 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	
Q77.2 YES	20 7%	230 4%	1 100%	4 7%	2 2%*	8 9%	5 6%	4 ~100%	~	~	~	~	16 40%	4 5%	15 8%	20 7%	~	11 5%*	9 15%*
NO	283 93%	5133 96%	~	51 93%	81 98%*	77 91%	74 94%	188 100%	3 ~100%	4 ~100%	12 100%	24 60%	80 95%	179 92%	256 93%	10 100%	230 95%*	53 85%*	
VALID CASES	303	5363	1	55	83	85	79	188	4	3	4	12	40	84	194	276	10	241	62
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%	4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%

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

		AGE						RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL-	HIS-	NOT HIS-	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
TCH TOT CHLD	OHP TOT CHLD						WHT	AMER	IAN	ILND	NATV	OTHR	TI	IC	IC	GOOD	POOR	NO CCC	CCC
Q77.3 YES	7 2%	201 4%	2 ~	2 4%	2 2%	1 1%	~	3 ~100%	~	~	~	4 ~ 10%	1 1%	6 3%	7 3%	~	6 2%	1 2%	
NO	296 98%	5162 96%	1 100%	53 96%	81 98%	78 99%	188 100%	4 100%	~	4 ~100%	12 100%	36 100%	83 99%	188 97%	269 97%	10 100%	235 98%	61 98%	
VALID CASES	303	5363	1	55	83	85	188	4	3	4	12	40	84	194	276	10	241	62	
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	188 100%	4 100%	3 100%	4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%	

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 PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC				
Q77.4	TCH TOT CHLD																			
YES	2 0.7%	82 2%	1 ~	2 2%	1 ~	1 1%	~	~	~	~	~	~	2 5%	1 ~0.5%	1 0.4%	2 ~0.8%				
NO	301 99%	5281 98%	1 100%	54 98%	83 100%	84 99%	79 100%	188 100%	4 100%	3 100%	~	4 ~100%	12 100%	38 95%	84 100%	193 99%	275 100%	10 100%	239 99%	62 100%
VALID CASES	303	5363	1	55	83	85	79	188	4	3		4	12	40	84	194	276	10	241	62
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%		4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%

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-	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		
Q77.5	TCH TOT CHLD																		
YES	23 8%	275 5%	2 ~ 4%	8 10%	8 9%	5 6%	~	~	~	4 ~100%	19 ~ 48%	6 7%	17 9%	22 8%	1 10%	16 7%	7 11%		
NO	280 92%	5088 95%	1 100%	53 96%	75 90%	77 91%	74 94%	188 100%	4 100%	3 100%	~	12 ~100%	21 53%	78 93%	177 91%	254 92%	9 90%	225 93%	55 89%
VALID CASES	303	5363	1	55	83	85	79	188	4	3	4	12	40	84	194	276	10	241	62
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%	4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%

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 & FAIR & POOR	NO CCC	CCC			
Q77.6	TCH TOT CHLD																			
YES	24 8%	519 10%	4 ~ 7%	8 10%	7 8%	5 6%	~	~	~	~	12 ~100%	12 30%	17 20%*	7 4%*	23 8%~	1 10%~	18 7%	6 10%		
NO	279 92%	4844 90%	1 100%~	51 93%	75 90%	78 92%	74 94%	188 100%~	4 100%	3 100%	~	4 ~100%	28 ~ 70%	67 80%*	187 96%*	253 92%~	9 90%~	223 93%	56 90%	
VALID CASES	303	5363	1	55	83	85	79	188	4	3		4	12	40	84	194	276	10	241	62
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%		4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%

Q78 WHAT IS YOUR AGE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	TCH 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 ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q78 UNDER 18	11 4%	223 5%	100%~	~	2 3%	5 6%	3 4%	9 5%	~	~	~	~	~	2 5%	~	9 5%	11 4%~	~	10 5%	1 2%
18 TO 24	18 6%	229 5%	~	12 24%~	4 5%	~	2 3%	13 7%	~	~	~	1 25%~	1 8%~	3 7%~	5 6%	12 6%	17 6%~	1 10%~	14 6%	4 6%
25 TO 34	98 35%	1610 33%	~	27 55%~	42 53%*	23 29%	6 8%*	66 35%	1 33%~	1 33%~	~	2 50%~	1 8%~	11 27%~	34 41%	63 33%	96 35%~	2 20%~	84 38%*	14 23%*
35 TO 44	104 37%	1842 37%	~	9 18%~	30 38%	34 43%	31 41%	61 33%*	2 67%~	1 33%~	~	1 25%~	9 75%~	17 43%~	35 42%	66 34%	98 36%~	5 50%~	73 33%*	31 50%*
45 TO 54	35 12%	718 15%	~	1 2%~	1 1%*	8 10%	25 33%*	25 13%	~	1 33%~	~	~	1 8%~	4 10%~	6 7%	29 15%*	34 12%~	1 10%~	27 12%	8 13%
55 TO 64	12 4%	213 4%	~	~	~	7 9%	5 7%	9 5%	~	~	~	~	~	2 5%~	2 2%	10 5%	11 4%~	1 10%~	9 4%	3 5%
65 TO 74	5 2%	77 2%	~	~	~	2 3%	3 4%	4 2%	~	~	~	~	~	1 2%~	1 1%	4 2%	5 2%~	~	4 2%	1 2%
75 OR OLDER		15 0.3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	20	436		6	4	6	4	1	1						1	1	4		20	
VALID CASES	283	4927	1	49	79	79	75	187	3	3		4	12	40	83	193	272	10	221	62
NUMBER OF RESPONDENTS	303	5363	1	55	83	85	79	188	4	3		4	12	40	84	194	276	10	241	62
	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			
	TCH 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		
Q79																				
MALE	39 14%	657 13%		4 ~ 8%	10 13%	13 16%	12 16%	22 12%	2 ~ 67%			3 ~ 25%	5 12%	9 11%	30 15%	38 14%	1 10%	33 15%	6 10%	
FEMALE	244 86%	4307 87%	1 100%	44 92%	69 87%	67 84%	63 84%	164 88%	4 100%	1 33%		4 ~ 100%	9 75%	35 88%	73 89%	164 85%	234 86%	9 90%	188 85%	56 90%
NOT ANSWERED	20	399		7	4	5	4	2						2		4		20		
VALID CASES	283	4964	1	48	79	80	75	186	4	3		4	12	40	82	194	272	10	221	62
NUMBER OF RESPONDENTS	303 100%	5363 100%	1 100%	55 100%	83 100%	85 100%	79 100%	188 100%	4 100%	3 100%		4 100%	12 100%	40 100%	84 100%	194 100%	276 100%	10 100%	241 100%	62 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	TCH 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		
Q80																					
8TH GRADE OR LESS	19 7%	618 13%*	~	4 8%~	5 6%	4 5%	6 8%	5 3%*	1 25%~	~	~	~	2 17%~	1 3%~	17 21%*	1 0.5%*	18 7%~	1 10%~	18 8%*	1 2%*	
SOME HIGH SCHOOL BUT DID NOT GRADUATE	28 10%	624 13%	100%~	1 6%~	3 13%	10 11%	9 7%	14 7%	~	~	~	25%~	1 17%~	2 11%~	4 21%*	11 6%*	25 9%~	3 30%~	23 11%	5 8%	
HIGH SCHOOL GRADUATE OR GED	66 23%	1385 28%*	~	11 22%~	17 22%	20 25%	18 24%	45 24%	~	~	~	25%~	1 25%~	3 25%~	7 18%~	24 30%	39 20%	63 23%~	3 30%~	50 23%	16 26%
SOME COLLEGE OR 2-YEAR DEGREE	117 42%	1555 32%*	~	25 51%~	30 38%	32 41%	30 41%	83 44%	2 50%~	2 67%~	~	25%~	1 17%~	2 61%~	23 20%*	16 51%*	98 51%*	114 42%~	2 20%~	91 42%	26 42%
4-YEAR COLLEGE GRADUATE	34 12%	470 10%	~	5 10%~	10 13%	10 13%	9 12%	29 16%*	~	1 33%~	~	~	1 8%~	1 3%~	3 4%*	31 16%*	33 12%~	1 10%~	26 12%	8 13%	
MORE THAN 4-YEAR COLLEGE DEGREE	17 6%	246 5%	~	1 2%~	6 8%	4 5%	6 8%	11 6%	1 25%~	~	~	25%~	1 17%~	2 5%~	2 5%	13 7%	17 6%~	~	11 5%	6 10%	
NOT ANSWERED	22	466		6	5	6	5	1						2	3	1	6		22		
VALID CASES	281	4897	1	49	78	79	74	187	4	3		4	12	38	81	193	270	10	219	62	
NUMBER OF RESPONDENTS	303	5363	1	55	83	85	79	188	4	3		4	12	40	84	194	276	10	241	62	
	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		
	TCH 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	GOOD & POOR	NO CCC	CCC
Q81																				
MOTHER OR FATHER	262 93%	4614 94%	1 100%	47 96%	77 97%*	73 91%	64 89%	170 92%	4 100%	3 100%	4 ~100%	11 92%	36 90%	80 96%	175 92%	253 94%	8 80%	209 95%*	53 85%*	
GRANDPARENT	10 4%	165 3%	~	2 2%	~	7 9%*	2 3%	9 5%*	~	~	~	~	~	1 2%	9 5%	9 3%	1 10%	6 3%	4 6%	
AUNT OR UNCLE		19 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
OLDER BROTHER OR SISTER		8 0.2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
OTHER RELATIVE	1 0.4%	3 0.1%	~	~	~	1 1%	1 ~	~	~	~	~	~	~	1 2%	1 1%	1 -0.4%	~	1 -0.5%	~	~
LEGAL GUARDIAN	5 2%	60 1%	~	~	1 1%	~	4 6%	2 1%	~	~	~	~	1 8%	2 5%	4 1%	5 2%	~	2 ~0.9%	3 5%	
SOMEONE ELSE	3 1%	41 0.8%	~	1 2%	1 1%	~	1 1%	3 2%	~	~	~	~	~	~	3 2%	2 0.7%	1 10%	1 -0.5%	2 3%	
NOT ANSWERED	22	454		6	4	5	7	4						1	3	6		22		
VALID CASES	281	4909	1	49	79	80	72	184	4	3	4	12	40	83	191	270	10	219	62	
NUMBER OF RESPONDENTS	303	5363	1	55	83	85	79	188	4	3	4	12	40	84	194	276	10	241	62	
	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				
	TCH 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	
Q82 YES	5 3%	96 3%	~	~	2 4%	~	3 6%	3 2%	~	~	~	~	~	~	3 6%	2 1%	5 3%	~	5 3%	~
NO	188 97%	3230 97%	~100%	~96%	53 100%	55 100%	48 94%	136 98%	3 100%	3 100%	~	2 100%	8 100%	21 100%	45 94%	138 99%	185 97%	2 100%	145 97%	43 100%
NOT ANSWERED	1	38				1	1								1	1	1	1		
VALID CASES	193	3326		32	55	55	51	139	3	3		2	8	21	48	140	190	2	150	43
NUMBER OF RESPONDENTS	194	3364		32	55	55	52	140	3	3		2	8	21	48	141	191	2	151	43
	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					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
	TCH 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 & GOOD	FAIR & POOR	NO CCC	CCC
Q83.1 YES	2 40%	45 50%	~	~	2 100%	~	~	1 33%	~	~	~	~	~	~	1 33%	1 50%	2 40%	~	2 40%	~
NO	3 60%	44 50%	~	~	~	3 100%	2 67%	~	~	~	~	~	~	~	2 67%	1 50%	3 60%	~	3 60%	~
VALID CASES	5	89			2	3	3								3	2	5		5	
NUMBER OF RESPONDENTS	5 100%	89 100%			2 100%	3 100%	3 100%								3 100%	2 100%	5 100%		5 100%	

[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					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- AMR	PAC IAN	HAW/ ILND	IND/ ALSK NATV	OTH R	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q83.2																		
YES	TCH TOT CHLD	2 40%	28 31%	2 ~100%	~	~	1 33%	~	~	~	~	~	~	1 33%	1 50%	2 40%	2 40%	~
NO	OHP TOT CHLD	3 60%	61 69%	~	~	3 ~100%	2 67%	~	~	~	~	~	~	2 67%	1 50%	3 60%	3 60%	~
VALID CASES		5	89	2	3	3	3							3	2	5	5	
NUMBER OF RESPONDENTS		5	89	2	3	3	3							3	2	5	5	
		100%	100%	100%	100%	100%	100%							100%	100%	100%	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					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
Q83.3	TCH TOT CHLD	OHP TOT CHLD													
YES	11 12%		~	~	~	~	~	~	~	~	~	~	~	~	~
NO	5 100%	78 88%	~	~100%	~100%	~100%	~	~	~	~	~	~100%	~100%	~100%	~100%
VALID CASES	5	89		2	3	3						3	2	5	5
NUMBER OF RESPONDENTS	5 100%	89 100%		2 100%	3 100%	3 100%						3 100%	2 100%	5 100%	5 100%

[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			
	TCH 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	
Q83.4 YES	1 20%	19 21%	~	~	~	~	1 33%	1 33%	~	~	~	~	~	~	1 33%	~	1 20%	~	1 20%	~
NO	4 80%	70 79%	~	~	100%	~	2 67%	2 67%	~	~	~	~	~	~	2 67%	2 100%	4 80%	~	4 80%	~
VALID CASES	5	89			2		3	3							3	2	5		5	
NUMBER OF RESPONDENTS	5 100%	89 100%			2 100%		3 100%	3 100%							3 100%	2 100%	5 100%		5 100%	

[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		
	TCH 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	
Q83.5 YES	1 20%	8 10%	~	~	~	~	1 33%	1 33%	~	~	~	~	~	1 50%	1 20%	1 20%	
NO	4 80%	81 90%	~	~	100%	~	2 67%	2 67%	~	~	~	~	~	3 100%	1 50%	4 80%	4 80%
VALID CASES	5	89			2	3	3	3						3	2	5	5
NUMBER OF RESPONDENTS	5 100%	89 100%			2 100%	3 100%	3 100%	3 100%						3 100%	2 100%	5 100%	5 100%

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

NQ14 RATING OF ALL CHILD'S HEALTH CARE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	TCH 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- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
NQ14 0-6	13 7%	329 10%	~	2 5%	5 9%	2 4%	4 9%	5 4%	1 33%	~	~	~	5 19%	3 6%	9 7%	11 6%	1 11%	7 5%	6 12%		
7-8	63 32%	1112 32%	100%	1 33%	14 33%	18 29%	14 31%	39 31%	1 33%	1 50%	~	1 33%	3 38%	8 31%	18 33%	39 30%	53 30%	4 44%	44 30%	19 37%	
9-10	122 62%	2025 58%	~	26 62%	31 57%	38 68%	27 60%	80 65%	1 33%	1 50%	~	2 67%	5 63%	13 50%	33 61%	81 63%	113 64%	4 44%	96 65%	26 51%	
VALID CASES	198	3466	1	42	54	56	45	124	3	2		3	8	26	54	129	177	9	147	51	
NUMBER OF RESPONDENTS	198 100%	3466 100%	100%	1 100%	42 100%	54 100%	56 100%	45 100%	124 100%	3 100%	2 100%		3 100%	8 100%	26 100%	54 100%	129 100%	177 100%	9 100%	147 100%	51 100%
MEAN	2.55	2.49	2.00	2.57	2.48	2.64	2.51	2.60	2.00	2.50		2.67	2.63	2.31	2.56	2.56	2.58	2.33	2.61	2.39	
p stat_(*=Sig @ p<=.05)		.170	~	~	.336	.161		~	.126	~	~	~	~	~	~	.943	.811	~	~	.052	.053

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	TCH 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	
NQ41 0-6	23 9%	319 8%	~	~	10%	9%	15%	14 8%	1 25%	~	~	~	~	3 8%	7 10%	15 9%	20 8%	3 30%	14 7%	9 16%
7-8	56 22%	980 23%	~	36%	19%	18%	21%	37 22%	2 50%	1 33%	~	33%	2 22%	10 27%	12 17%	42 24%	51 21%	3 30%	40 20%	16 28%
9-10	174 69%	2929 69%	100%	64%	71%	73%	64%	114 69%	1 25%	2 67%	~	67%	7 78%	24 65%	50 72%	117 67%	167 70%	4 40%	142 72%*	32 56%*
VALID CASES	253	4228	1	44	73	74	61	165	4	3		3	9	37	69	174	238	10	196	57
NUMBER OF RESPONDENTS	253 100%	4228 100%	1 100%	44 100%	73 100%	74 100%	61 100%	165 100%	4 100%	3 100%		3 100%	9 100%	37 100%	69 100%	174 100%	238 100%	10 100%	196 100%	57 100%
MEAN	2.60	2.62	3.00	2.64	2.62	2.64	2.49	2.61	2.00	2.67		2.67	2.78	2.57	2.62	2.59	2.62	2.10	2.65	2.40
p stat_(*=Sig @ p<=.05)		.581	~	~	.763	.548	.192	.758	~	~	~	~	~	~	.699	.704	~	~	.024*	.024*

[ASKED IF Q30 = YES]

NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	TCH 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	69	10%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
7-8	9	178	~	3	3	3	~	5	1	~	~	~	2	2	6	8	~	4	5
	26%	26%	~	38%	33%	33%	~	24%	100%	~	~	~	22%	22%	25%	27%	~	24%	29%
9-10	25	428	~	5	6	6	8	16	~	~	~	1	7	7	18	22	3	13	12
	74%	63%	~	63%	67%	67%	100%	76%	~	~	~	100%	78%	78%	75%	73%	100%	76%	71%
VALID CASES	34	675		8	9	9	8	21	1			1	9	9	24	30	3	17	17
NUMBER OF RESPONDENTS	34	675		8	9	9	8	21	1			1	9	9	24	30	3	17	17
	100%	100%		100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%
MEAN	2.74	2.53		2.63	2.67	2.67	3.00	2.76	2.00			3.00	2.78	2.78	2.75	2.73	3.00	2.76	2.71
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		
	TCH 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	37 13%	619 12%	~	2 4%~	14 19%	7 9%	14 19%	23 13%	1 25%~	~	1 25%~	1 10%~	7 17%~	7 9%	28 15%	34 13%~	2 20%~	27 12%	10 17%
7-8	84 30%	1448 29%	100%~	1 33%~	16 24%	18 31%	24 34%	59 33%	1 25%~	1 33%~	1 25%~	3 30%~	15 38%~	20 25%	63 34%	81 31%~	3 30%~	59 27%*	25 42%*
9-10	155 56%	2927 59%	~	31 63%~	43 57%	46 60%	35 47%	98 54%	2 50%~	2 67%~	2 50%~	6 60%~	18 45%~	52 66%*	97 52%*	149 56%~	5 50%~	130 60%*	25 42%*
VALID CASES	276	4994	1	49	75	77	74	180	4	3	4	10	40	79	188	264	10	216	60
NUMBER OF RESPONDENTS	276 100%	4994 100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
MEAN	2.43	2.46	2.00	2.59	2.39	2.51	2.28	2.42	2.25	2.67	2.25	2.50	2.27	2.57	2.37	2.44	2.30	2.48	2.25
p stat_(*=Sig @ p<=.05)		.387	~	~	.587	.234	.056	.734	~	~	~	~	~	~	.029*.035*	~	~	~	.030*.030*

GETTING NEEDED CARE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	TCH 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	2.28	2.21		2.25	2.40	2.00	2.50	2.35	2.00				3.00	2.00	2.30	2.32	2.34	2.00	2.39	2.17
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCARNES4 NQ15	2.49	2.44	3.00	2.61	2.52	2.54	2.28	2.56	2.00	3.00		2.67	2.50	2.35	2.41	2.53	2.53	1.78	2.56	2.27
p stat_(*=Sig @ p<=.05)		.251	~	~	.718	.561	~	.079	~	~	~	~	~	~	.351	.241	~	~	.019*	.020*
COMPOSITE	2.38	2.32	3.00	2.43	2.46	2.27	2.39	2.45	2.00	3.00	x	2.67	2.75	2.17	2.35	2.43	2.44	1.89	2.48	2.22
p stat_(*=Sig @ p<=.05)		.256	~	~	.346	.156	~	.071	~	~	~	~	~	~	.713	.249	~	~	.002*	.060

GETTING CARE QUICKLY

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	TCH 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	2.58	2.60	2.63	2.50	2.83	2.39	2.59	3.00	3.00		3.00	3.00	2.67	2.54	2.58	2.60	2.00	2.61	2.52	
p stat_(*=Sig @ p<=.05)		.718	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NAPGET4 NQ6	2.43	2.43	3.00	2.49	2.36	2.47	2.41	2.48	2.50	2.00		2.25	2.50	2.52	2.25	2.53	2.47	1.88	2.44	2.40
p stat_(*=Sig @ p<=.05)		.969	~	~.450	~	~	~.255	~	~	~	~	~	~	~.044*	.014*	~	~	~	~	
COMPOSITE	2.50	2.51	3.00	2.56	2.43	2.65	2.40	2.54	2.75	2.50	x	2.63	2.75	2.59	2.40	2.56	2.54	1.94	2.52	2.46
p stat_(*=Sig @ p<=.05)		.863	~	~.432	.135	.323	.460	~	~	~	~	~	~	~.277	.203	~	~	~.535	.665	

HOW WELL DOCTORS COMMUNICATE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	TCH 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	2.78	2.69	3.00	2.85	2.84	2.79	2.63	2.80	2.50	3.00		3.00	2.71	2.79	2.79	2.80	2.82	2.22	2.84	2.62
p stat_(*=Sig @ p<=.05)		.017*	~	~	~	~	~	.553	~	~	~	~	~	~	~	.469	~	~	~	~
NDRLSTN4 NQ33	2.72	2.71	3.00	2.64	2.79	2.76	2.66	2.75	2.50	2.50		2.67	2.57	2.79	2.73	2.74	2.76	2.33	2.75	2.64
p stat_(*=Sig @ p<=.05)		.871	~	~	~	~	~	.383	~	~	~	~	~	~	~	.571	~	~	~	~
NDRESPU4 NQ34	2.78	2.77	3.00	2.82	2.83	2.76	2.71	2.81	3.00	3.00		2.67	2.71	2.67	2.77	2.80	2.81	2.44	2.84	2.62
p stat_(*=Sig @ p<=.05)		.766	~	~	~	~	~	.346	~	~	~	~	~	~	~	.577	~	~	~	~
NDRTMEN4 NQ37	2.52	2.49	3.00	2.45	2.46	2.55	2.61	2.57	2.50	2.00		2.67	2.29	2.50	2.43	2.56	2.55	2.00	2.56	2.40
p stat_(*=Sig @ p<=.05)		.615	~	~	~	~	~	.171	~	~	~	~	~	~	~	.227	~	~	~	~
COMPOSITE	2.70	2.67	3.00	2.69	2.73	2.71	2.65	2.73	2.63	2.63	x	2.75	2.57	2.69	2.68	2.73	2.74	2.25	2.75	2.57
p stat_(*=Sig @ p<=.05)		.713	~	~	~	~	~	.596	~	~	~	~	~	~	~	.656	~	~	~	~

CUSTOMER SERVICE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	TCH 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
NPBCLCS4 NQ50	2.16	2.24	1.83	2.11	2.35	2.33	2.06	1.00	3.00		2.00	2.00	2.50	2.44	1.97	2.15	2.25	2.16	2.17
p stat_(*=Sig @ p<=.05)	.440		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ51	2.59	2.57	2.58	2.63	2.53	2.67	2.53	2.00	3.00		2.00	2.50	2.83	2.67	2.58	2.58	2.75	2.61	2.50
p stat_(*=Sig @ p<=.05)	.854		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.37	2.41	x 2.21	2.37	2.44	2.50	2.29	1.50	3.00	x 2.00	2.25	2.67	2.55	2.27	2.36	2.50	2.38	2.33	
p stat_(*=Sig @ p<=.05)	.856		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	TCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AMER IAN	NATV HAW/ PAC ILND	AMER ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
NNRXWHY NQ11	2.86	2.88	2.83	2.76	2.87	3.00	3.00	3.00		3.00	2.33	2.67	2.40	2.96	2.85	3.00	2.76	3.00
p stat_(*=Sig @ p<=.05)	.863		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NNRXWYNT NQ12	2.52	2.40	2.64	2.65	2.20	2.60	2.43	3.00		3.00	2.33	2.50	2.60	2.47	2.45	3.00	2.39	2.68
p stat_(*=Sig @ p<=.05)	.295		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NRXBST NQ13	2.47	2.55	2.83	2.44	2.07	2.60	2.44	3.00		3.00	3.00	2.00	2.67	2.38	2.40	3.00	2.60	2.28
p stat_(*=Sig @ p<=.05)	.445		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.62	2.61	x 2.77	2.62	2.38	2.73	2.62	3.00	x	x 3.00	2.56	2.39	2.56	2.60	2.56	3.00	2.59	2.65
p stat_(*=Sig @ p<=.05)	.963		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

ACCESS TO SPECIALIZED SERVICES

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	TCH 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	GOOD & FAIR & POOR	NO CCC	CCC		
NEZMDEQ NQ20	2.40	2.15	3.00	1.50	2.75	2.00	2.50	2.33				2.50	3.00	2.33	2.33	3.00	2.40	2.40		
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NEZTHP NQ23	2.05	1.94		2.00	2.00	1.80	2.40	2.09				2.50	2.00	2.40	2.08	2.40	1.50	2.11	2.00	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NEZTC NQ26	2.18	2.08		3.00	2.11	2.33	2.00	2.22				2.00	2.57	2.50	2.27	2.43	1.83	2.37	2.05	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
COMPOSITE	2.21	2.06	3.00	2.17	2.29	2.04	2.30	2.21	x	x	x	x	2.25	2.36	2.63	2.23	2.39	2.11	2.30	2.15
p stat_(*=Sig @ p<=.05)		.076	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	TCH 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	75%	75%		75%	80%	60%	88%	78%	100%				100%	56%	70%	80%	78%	67%	78%	72%
CARNES4 Q15	88%	88%	100%	93%	91%	89%	78%	91%	67%	100%		100%	88%	81%	81%	91%	89%	56%	90%	80%
AVERAGE	81.44	81.22	100.0	83.84	85.37	74.64	82.88	84.73	83.33	100.0	x	100.0	93.75	68.16	75.74	85.35	83.73	61.11	84.13	76.31

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	TCH 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		
CARSN4 Q4	89%	90%		95%	86%	100%	79%	93%	100%	100%		100%	100%	92%	83%	92%	90%	80%	90%	87%
APGET4 Q6	85%	84%	100%	85%	78%	87%	92%	85%	100%	50%		100%	100%	91%	78%	89%	87%	63%	84%	88%
AVERAGE	87.11	87.16	100.0	89.68	82.27	93.62	85.44	89.22	100.0	75.00	x	100.0	100.0	91.49	80.88	90.46	88.40	71.25	87.11	87.73

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

	TCH TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	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	NO CCC	CCC	
DREXPL4 Q32	95%	93%	100%	97%	96%	96%	92%	96%	100%	100%		100%	100%	96%	94%	97%	78%	96%	94%	
DRLSTN4 Q33	95%	94%	100%	95%	98%	94%	92%	95%	100%	100%		100%	100%	96%	94%	96%	78%	96%	91%	
DRESPU4 Q34	95%	95%	100%	97%	96%	92%	97%	96%	100%	100%		100%	100%	88%	94%	96%	78%	98%	87%	
DRTMEN4 Q37	88%	86%	100%	84%	85%	89%	92%	89%	100%	50%		100%	86%	92%	85%	90%	89%	78%	90%	83%
AVERAGE	93.4	92.0	100	93.5	93.8	92.7	93.4	94.3	100	87.5	x	100	96.4	92.7	91.6	94.7	94.5	77.8	95.0	88.8

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	TCH 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	77%	77%		67%	68%	90%	83%	74%	0%	100%		100%	67%	83%	96%	65%	75%	100%	76%	83%
CSRESP Q51	95%	91%		100%	95%	89%	100%	94%	100%	100%		100%	100%	100%	96%	97%	94%	100%	95%	92%
AVERAGE	85.92	83.89	x	83.33	81.58	89.74	91.67	83.82	50.00	100.0	x	100.0	83.33	91.67	95.92	80.65	84.85	100.0	85.51	87.50

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	TCH 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	93%	94%	92%	88%	93%	100%	100%	100%		100%	67%	83%	70%	98%	92%	100%	88%	100%		
NRXWYNT Q12	76%	70%	82%	82%	60%	80%	71%	100%		100%	67%	75%	80%	73%	73%	100%	70%	84%		
RXBST Q13	73%	78%	92%	72%	53%	80%	72%	100%		100%	100%	50%	83%	69%	70%	100%	80%	64%		
AVERAGE	80.8	80.5	x	88.4	80.9	68.9	86.7	81.2	100	x	x	100	77.8	69.4	77.8	80.0	78.2	100	79.3	82.7

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	TCH 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
EZMDEQ Q20	90%	70%	100%	50%	100%	100%	100%	83%					100%	100%	89%	89%	100%	100%	80%	80%
EZTHP Q23	64%	61%		50%	60%	60%	80%	73%					100%	50%	80%	69%	80%	50%	67%	62%
EZTC Q26	68%	67%		100%	56%	83%	60%	70%					100%	86%	88%	73%	79%	67%	75%	64%
AVERAGE	74.0	66.1	100	66.7	71.9	81.1	80.0	75.2	x	x	x	x	100	78.6	89.2	77.1	82.5	72.2	80.6	68.4

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	TCH 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	84%	84%	100%	92%	88%	73%	84%	83%	100%	100%	67%	100%	88%	75%	87%	84%	78%	83%	85%
DRUNCON Q43	82%	89%		57%	86%	87%	86%	77%	100%			100%	93%	82%	81%	85%	63%	86%	81%
DRUNFAM Q44	76%	84%		57%	86%	67%	87%	74%	100%			100%	79%	73%	76%	80%	50%	79%	76%
AVERAGE	80.8	85.5	100	68.8	86.3	75.6	85.5	77.9	100	100	x 66.7	100	86.3	76.5	81.6	83.1	63.4	82.6	80.4

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	TCH 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		
HELPCONT Q18	88%	94%	100%	80%	88%	100%	100%	100%				100%	71%	100%	100%	50%	100%	82%		
HLPCOORD Q29	60%	60%	67%	64%	62%	50%	65%	100%			100%	55%	58%	65%	62%	75%	67%	56%		
AVERAGE	74.3	76.8	x	83.3	72.1	74.5	75.0	82.3	100	x	x	x	100	77.3	64.9	82.4	81.0	62.5	83.3	68.7

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

- Please be sure to fill the response circle completely. Use only black or blue ink or dark pencil to complete the survey.

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?

- | | | | | | | | | | | |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <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 | | | | | | Best | | | | |
| Health Plan | | | | | | Health Plan | | | | |
| Possible | | | | | | 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



- 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** ↓

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.

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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

20. En los últimos 6 meses, ¿con qué frecuencia su doctor personal pasó suficiente tiempo con usted?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

21. En los últimos 6 meses, ¿lo atendió algún doctor u otro profesional médico además de su doctor personal?

- Sí
- No → *Pase a la pregunta 23*

22. En los últimos 6 meses, ¿con qué frecuencia parecía su doctor personal estar informado y al día acerca de la atención que usted había recibido de estos doctores u otros profesionales médicos?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

23. Usando un número del 0 al 10, el 0 siendo el peor doctor personal posible y el 10 el mejor doctor personal posible, ¿qué número usaría para calificar a su doctor personal?

- | | | | | | | | | | | |
|---------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <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 |
| El peor doctor personal posible | | | | | El mejor doctor personal posible | | | | | |

LA ATENCIÓN MÉDICA QUE RECIBÍÓ DE ESPECIALISTAS

Al contestar las siguientes preguntas no incluya las veces que fue a ver al dentista ni la atención que recibió cuando pasó la noche hospitalizado.

24. Los especialistas son doctores que se especializan en un área de la medicina. Pueden ser cirujanos, doctores especialistas en el corazón, las alergias, la piel y otras áreas. En los últimos 6 meses, ¿hizo alguna cita con un especialista?

- Sí
- No → *Pase a la pregunta 28*

25. En los últimos 6 meses, ¿con qué frecuencia consiguió una cita con un especialista tan pronto como usted la necesitaba?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

26. ¿Cuántos especialistas ha visto en los últimos 6 meses?

- Ninguno → *Pase a la pregunta 28*
- 1 especialista
- 2
- 3
- 4
- 5 especialistas o más

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

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

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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- 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?

-
- 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

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

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



37. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño pasó suficiente tiempo con su niño?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

38. En los últimos 6 meses, ¿habló el doctor personal de su niño con usted sobre cómo su niño se estaba sintiendo, estaba creciendo o se estaba comportando?

- Sí
- No

39. En los últimos 6 meses, ¿atendió a su niño algún doctor u otro profesional médico además de su doctor personal?

- Sí
- No → *Pase a la pregunta 41*

40. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño parecía estar informado y al día acerca de la atención que su niño había recibido de estos doctores u otros profesionales médicos?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

41. Usando un número del 0 al 10, el 0 siendo el peor doctor personal posible y el 10 el mejor doctor personal posible, ¿qué número usaría para calificar al doctor personal de su niño?

- | | | | | | | | | | | |
|---------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|-----------------------|-----------------------|-----------------------|
| <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 |
| El peor doctor personal posible | | | | | | | El mejor doctor personal posible | | | |

42. ¿Tiene su niño alguna condición médica, de comportamiento u otra condición de salud que ha durado por más de 3 meses?

- Sí
- No → *Pase a la pregunta 45*

43. ¿El doctor o enfermera personal de su niño entiende cómo estas condiciones médicas, de comportamiento u otras condiciones de salud afectan la vida cotidiana de su niño?

- Sí
- No

44. ¿El doctor o enfermera personal de su niño entiende cómo estas condiciones médicas, de comportamiento u otras condiciones de salud afectan la vida cotidiana de su familia?

- Sí
- No



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.