



Umpqua Health Alliance  
CAHPS® 5.0 Medicaid Survey

Banner Book Report

June 2015



## **Methodology**

- Introduction
- Survey Milestones
- Sampling
- Questionnaires
- Selection of Cases for Analysis
- Composites, Overall Ratings, and Measures for Reporting
- Comparisons, Statistical Testing, Scoring, and Weighting

## **Sample Disposition**

## **Response/Non-Response Comparison**

## **Banner Tables**

- Adult Tables
- Child Tables

## **Appendix**

- Index of Tables
- Questionnaires
  - Adult English
  - Child English
  - Adult Spanish
  - Child Spanish
- Telephone script

## METHODOLOGY

### Introduction

This banner book report summarizes the results of the 2015 CAHPS® Medicaid survey of Umpqua Health Alliance members. Umpqua Health Alliance 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	
	Umpqua Health Alliance	Overall	Umpqua Health Alliance	Overall
<b>**First mailing - sent</b>	900	15300	900	15300
<b>*First mailing - usable survey returned</b>	222	3240	144	2377
<b>Second mailing - sent</b>	698	12007	710	12648
<b>*Second mailing - usable survey returned</b>	64	979	62	987
<b>*Phone - usable surveys</b>	70	1234	101	1999
<b>Total - usable surveys</b>	356	5453	307	5363
<b>†Ineligible: According to population criteria‡</b>	15	261	3	158
<b>†Ineligible: Deceased</b>	3	39	0	1
<b>†Ineligible: Mentally or physically unable to complete survey</b>	15	207	0	0
<b>†Ineligible: Language barrier</b>	0	52	0	40
<b>Incorrect address AND incorrect phone number</b>	57	1173	95	1296
<b>Refusal/Returned survey blank</b>	41	667	67	729
<b>Nonresponse - Unavailable by mail or phone</b>	413	7448	428	7713
<b>Adjusted Response Rate</b>	<b>41.1%</b>	<b>37.0%</b>	<b>34.2%</b>	<b>35.5%</b>

\*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	198 43.6%	135 37.9%	-5.69%
Female	256 56.4%	221 62.1%	5.69%
18-24	83 18.3%	37 10.4%	-7.89%
25-34	126 27.8%	63 17.7%	-10.06%
35-44	101 22.2%	49 13.8%	-8.48%
45-54	77 17.0%	82 23.0%	6.07%
55-64	53 11.7%	101 28.4%	16.70%
65-74	7 1.5%	16 4.5%	2.95%
75 or Older	7 1.5%	8 2.2%	0.71%

### Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	266 53.7%	159 51.8%	-1.95%
Female	229 46.3%	148 48.2%	1.95%
<3	102 20.6%	54 17.6%	-3.02%
4-7	129 26.1%	83 27.0%	0.98%
8-12	136 27.5%	90 29.3%	1.84%
13 or older	128 25.9%	80 26.1%	0.20%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	UHAL 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- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE	
Q1 YES	345 100%	5345 100%	32 100%	55 100%	50 100%	75 100%	94 100%	23 100%	278 100%	1 ~100%	1 100%	4 100%	6 100%	29 100%	13 100%	303 100%	206 100%	116 100%	121 100%	208 100%
NOT ANSWERED	11	108	3		4		3	11						1	9	6	5	4	6	
VALID CASES	345	5345	32	55	50	75	94	23	278	1	1	4	6	29	13	303	206	116	121	208
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%	1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%



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?

	UHAL 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	OTH-	NOT HIS- PAN-	HIS- PAN-	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE		
Q3 YES	135 39%	2233 43%	4 13%~	26 46%	22 44%	30 41%	42 43%	9 36%~	112 39%				3 75%~	2 33%~	11 38%~	4 31%~	124 40%~	72 34%*	59 50%*	50 40%	83 40%
NO	210 61%	2997 57%	27 87%~	31 54%	28 56%	44 59%	55 57%	16 64%~	172 61%		1 ~100%	1 ~100%	1 25%~	4 67%~	18 62%~	9 69%~	184 60%~	139 66%*	59 50%*	74 60%	127 60%
NOT ANSWERED	11	223	1	1		1	1	1	5							1	4	1	3	1	4
VALID CASES	345	5230	31	57	50	74	97	25	284		1	1	4	6	29	13	308	211	118	124	210
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%		1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%

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	
	UHAL TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- AMER IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q4 NEVER	3 2%	63 3%	1 ~	4%~	1 ~	4%~	1 3%~	3 ~	~	~	~	~	~	~	3 3%~	1 2%	2 3%	~	4%~	
SOMETIMES	23 19%	285 14%	1 25%~	7 29%~	2 9%~	7 26%~	5 13%~	16 ~	~	~	~	1 50%~	3 27%~	1 33%~	20 18%~	10 16%	12 21%	8 19%~	14 18%~	
USUALLY	34 27%	563 28%	1 25%~	5 21%~	8 36%~	6 22%~	11 29%~	3 43%~	30 29%~	~	~	2 ~100%~	2 ~	~	34 30%~	15 24%	19 33%	10 23%~	24 30%~	
ALWAYS	64 52%	1115 55%	2 50%~	11 46%~	12 55%~	13 48%~	21 55%~	4 57%~	53 52%~	~	~	~	1 50%~	6 55%~	2 67%~	57 50%~	37 59%	25 43%	25 58%~	38 48%~
#ALWAYS + USUALLY (NET)	98 79%	1678 83%	3 75%~	16 67%~	20 91%~	19 70%~	32 84%~	7 100%~	83 81%~	~	~	2 ~100%~	1 50%~	8 73%~	2 67%~	91 80%~	52 83%	44 76%	35 81%~	62 78%~
TOP BOX SCORE	64 52%	1115 55%	2 50%~	11 46%~	12 55%~	13 48%~	21 55%~	4 57%~	53 52%~	~	~	~	1 50%~	6 55%~	2 67%~	57 50%~	37 59%	25 43%	25 58%~	38 48%~
NOT ANSWERED	11	220	2		3	4	2	10				1		1	10	9	1	7	4	
VALID CASES	124	2026	4	24	22	27	38	7	102			2	2	11	3	114	63	58	43	79
NUMBER OF RESPONDENTS	135	2246	4	26	22	30	42	9	112			3	2	11	4	124	72	59	50	83
	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?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	UHAL 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 HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE		
Q5 YES	246 72%	3616 70%	18 58%~	42 75%	36 72%	48 65%	76 80%*	20 80%~	205 73%	1 ~100%	1 ~100%	4 ~100%	6 ~100%	18 64%~	8 57%~	222 73%~	141 68%*	95 81%*	79 66%	161 76%*
NO	95 28%	1586 30%	13 42%~	14 25%	14 28%	26 35%	19 20%*	5 20%~	77 27%	~	~	~	~	10 ~36%~	6 43%~	83 27%~	66 32%*	23 19%*	40 34%	51 24%*
NOT ANSWERED	15	251	1	2		1	3	1	7					1		7	5	3	6	2
VALID CASES	341	5202	31	56	50	74	95	25	282	1	1	4	6	28	14	305	207	118	119	212
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%	1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%

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					
	UHAL TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q6 NEVER	8 4%	100 3%	3 ~	1 8%	1 3%	3 2%	5 5%	6 3%	~	~	~	~	~	2 15%	8 ~	4 4%	6 5%	2 2%	2 3%	6 4%	
SOMETIMES	32 15%	562 17%	5 29%	7 19%	6 18%	6 15%	8 13%	26 15%	~	~	1 ~100%	~	1 ~	2 20%	2 15%	1 17%	29 15%	22 18%	9 11%	21 15%	
USUALLY	60 29%	870 27%	4 24%	13 36%	9 26%	18 45%	13 21%	3 19%	55 31%	1 ~100%	~	~	1 20%	3 23%	1 17%	57 30%	33 28%	27 33%	18 27%	42 30%	
ALWAYS	109 52%	1715 53%	8 47%	13 36%	18 53%	15 38%	38 61%	13 81%	91 51%	~	~	~	2 ~100%	3 60%	6 46%	4 67%	98 51%	58 49%	44 54%	35 53%	70 50%
#ALWAYS + USUALLY (NET)	169 81%	2585 80%	12 71%	26 72%	27 79%	33 83%	51 82%	16 100%	146 82%	1 ~100%	~	~	2 ~100%	4 80%	9 69%	5 83%	155 81%	91 76%	71 87%	53 80%	112 81%
TOP BOX SCORE	109 52%	1715 53%	8 47%	13 36%	18 53%	15 38%	38 61%	13 81%	91 51%	~	~	~	2 ~100%	3 60%	6 46%	4 67%	98 51%	58 49%	44 54%	35 53%	70 50%
NOT ANSWERED	37	326	1	6	2	8	14	4	27				2	1	5	2	30	22	13	22	
VALID CASES	209	3247	17	36	34	40	62	16	178	1	1	2	5	13	6	192	119	82	66	139	
NUMBER OF RESPONDENTS	246	3573	18	42	36	48	76	20	205	1	1	4	6	18	8	222	141	95	79	161	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q5 = YES]

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

	UHAL 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 & GOOD POOR	FE- MALE MALE					
Q7 NONE	82 24%	1271 25%	14 47%~	15 26%	10 20%~	20 27%	17 18%	3 12%~	67 24%	~	~	~	1 ~ 17%~	9 32%~	3 21%~	72 24%~	62 30%*	17 15%*	36 29%	43 21%	
1 TIME	69 20%	975 19%	5 17%~	13 23%	12 24%~	11 15%	17 18%	8 31%~	54 19%	~100%~	~	1 ~ 25%~	1 17%~	6 21%~	4 29%~	59 19%~	48 23%	17 15%*	28 23%	38 18%	
2	65 19%	973 19%	2 7%~	10 18%	8 16%~	14 19%	22 23%	9 35%~	55 20%	~	~	~	~	8 ~ 29%~	3 21%~	60 20%~	40 19%	22 19%	28 23%	37 18%	
3	46 14%	600 12%	3 10%~	4 7%	10 20%~	13 18%	13 14%	2 8%~	40 14%	~	~	~	2 ~ 50%~	2 33%~	1 4%~	43 14%~	25 12%	20 17%	12 10%	33 16%	
4	25 7%	448 9%	2 7%~	6 11%	3 6%~	8 11%	6 6%	~	22 8%	~	~	~	1 ~ 17%~	~	1 7%~	23 8%~	16 8%	9 8%	3 2%*	22 11%*	
5 TO 9	37 11%	631 12%	3 10%~	7 12%	4 8%~	5 7%	15 16%	2 8%~	32 11%	~	~	1 ~ 100%~	~	3 ~ 11%~	1 7%~	34 11%~	16 8%*	20 17%*	12 10%	24 11%	
10 OR MORE TIMES	16 5%	265 5%	1 3%~	2 4%	2 4%~	3 4%	6 6%	2 8%~	12 4%	~	~	~	1 ~ 25%~	1 17%~	1 4%~	15 ~ 5%~	3 1%*	12 10%*	4 3%	12 6%	
NOT ANSWERED	16	290	2	1	1	1	2		7					1		6	2	4	2	5	
VALID CASES	340	5163	30	57	49	74	96	26	282		1	1	4	6	28	14	306	210	117	123	209
NUMBER OF RESPONDENTS	356	5453	32	58	50	75	98	26	289		1	1	4	6	29	14	312	212	121	125	214
	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?

	UHAL 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		
Q8 #YES	182 72%	2683 71%	14 88%~	26 63%~	18 47%~	41 77%	64 82%*	16 76%~	155 74%~	~	1 ~100%	3 ~100%	4 80%~	12 63%~	8 73%~	168 73%~	110 76%	67 68%	59 69%	120 74%
NO	70 28%	1081 29%	2 12%~	15 37%~	20 53%~	12 23%	14 18%*	5 24%~	55 26%~	1 ~100%	~	~	1 20%~	7 37%~	3 27%~	61 27%~	34 24%	31 32%	26 31%	42 26%
NOT ANSWERED	6	79		1	1	1	1	2	5			1			5	4	2	2	4	
VALID CASES	252	3764	16	41	38	53	78	21	210	1	1	3	5	19	11	229	144	98	85	162
NUMBER OF RESPONDENTS	258 100%	3843 100%	16 100%	42 100%	39 100%	54 100%	79 100%	23 100%	215 100%	1 100%	1 100%	4 100%	5 100%	19 100%	11 100%	234 100%	148 100%	100 100%	87 100%	166 100%

[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?

	UHAL 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	FE- MALE	MALE	
Q9 YES	136 54%	2125 57%	8 50%~	22 52%~	21 55%~	33 63%	40 52%	8 38%~	115 55%~	~	1 ~100%~	1 33%~	3 60%~	10 53%~	4 36%~	125 55%~	73 51%	57 58%	38 45%*	94 58%
NO	115 46%	1611 43%	8 50%~	20 48%~	17 45%~	19 37%	37 48%	13 62%~	94 45%~	1 ~100%~	2 ~67%~	2 40%~	9 47%~	7 64%~	104 45%~	70 49%	41 42%	47 55%*	67 42%	
NOT ANSWERED	7	107			1	2	2	2	6			1			5	5	2	2	5	
VALID CASES	251	3736	16	42	38	52	77	21	209	1	1	3	5	19	11	229	143	98	85	161
NUMBER OF RESPONDENTS	258 100%	3843 100%	16 100%	42 100%	39 100%	54 100%	79 100%	23 100%	215 100%	1 100%	1 100%	4 100%	5 100%	19 100%	11 100%	234 100%	148 100%	100 100%	87 100%	166 100%

[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?

	UHAL 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 PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q10 #YES	119 91%	1887 92%	8 100%	21 95%	21 100%	28 85%	33 89%	5 71%	102 92%	~	~	1 100%	1 100%	2 67%	9 90%	3 75%	111 92%	64 89%	51 94%	32 86%	84 92%
NO	12 9%	166 8%	~	1 5%	~	5 15%	4 11%	2 29%	9 8%	~	~	~	~	1 33%	1 10%	1 25%	10 8%	8 11%	3 6%	5 14%	7 8%
NOT ANSWERED	28	436	2	1	2	3	7	3	17					1		15	8	9	5	13	
VALID CASES	131	2053	8	22	21	33	37	7	111			1	1	3	10	4	121	72	54	37	91
NUMBER OF RESPONDENTS	159 100%	2489 100%	10 100%	23 100%	23 100%	36 100%	44 100%	10 100%	128 100%			1 100%	2 100%	3 100%	11 100%	4 100%	136 100%	80 100%	63 100%	42 100%	104 100%

[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		
		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		
Q11 #YES	83 63%	1488 73%*	7 88%~	18 82%~	8 38%~	21 64%~	23 62%~	3 43%~	68 61%~	~	~	1 100%~	1 100%~	1 33%~	7 70%~	2 50%~	78 64%~	48 67%	31 57%	23 62%~	57 63%~
NO	48 37%	562 27%*	1 13%~	4 18%~	13 62%~	12 36%~	14 38%~	4 57%~	43 39%~	~	~	~	~	2 67%~	3 30%~	2 50%~	43 36%~	24 33%	23 43%	14 38%~	34 37%~
NOT ANSWERED	5	44				3	1	4							4	1	3	1	3		
VALID CASES	131	2050	8	22	21	33	37	7	111		1	1	3	10	4	121	72	54	37	91	
NUMBER OF RESPONDENTS	136	2094	8	22	21	33	40	8	115		1	1	3	10	4	125	73	57	38	94	
	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 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	
	UHAL TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE	
Q12 #YES	91 69%	1534 75%	8 100%	17 77%	11 52%	22 67%	26 68%	4 57%	80 71%	~	1 ~100%	1 100%	2 67%	3 30%	4 100%	83 68%	53 74%	34 62%	25 68%	63 68%
NO	41 31%	511 25%	~	5 23%	10 48%	11 33%	12 32%	3 43%	32 29%	~	~	~	1 33%	7 70%	39 32%	19 26%	21 38%	12 32%	29 32%	
NOT ANSWERED	4	49					2	1	3						3	1	2	1	2	
VALID CASES	132	2045	8	22	21	33	38	7	112		1	1	3	10	4	122	72	55	37	92
NUMBER OF RESPONDENTS	136	2094	8	22	21	33	40	8	115		1	1	3	10	4	125	73	57	38	94
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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?

	UHAL 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	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE	FE- MALE			
Q13 WORST HEALTH CARE POSSIBLE		29 0.8%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
01	3 1%	27 0.7%	~	~	~	2 4%	1 1%	3 1%	~	~	~	~	~	3 1%	3 2%	2 2%	1 0.6%			
02	7 3%	39 1%	~	~	2 5%	1 2%	4 5%	4 2%	~	~	~	~	2 11%	7 3%	2 1%	5 5%	3 2%			
03	4 2%	70 2%	1 6%	1 2%	~	2 4%	~	4 2%	~	~	~	~	~	4 2%	~	4 4%*	~	4 2%*		
04	8 3%	85 2%	~	2 5%	2 5%	2 4%	2 3%	6 3%	~	~	1 33%	1 5%	8 3%	1 0.7%*	7 7%*	1 1%	7 4%			
05	26 10%	285 8%	1 6%	6 14%	1 3%	4 8%	11 14%	3 14%	24 11%	1 ~100%	~	~	1 5%	26 11%	12 8%	14 14%	6 7%	20 12%		
06	16 6%	223 6%	~	4 10%	5 13%	3 6%	2 3%*	2 10%	14 7%	~	~	~	1 20%	1 5%	1 9%	14 6%	7 5%	7 7%	6 7%	10 6%
07	38 15%	493 13%	4 25%	3 7%	11 29%	10 19%	9 12%	33 16%	~	~	1 ~100%	1 33%	1 20%	1 5%	36 16%	27 19%*	9 9%*	10 12%	27 17%	
08	40 16%	772 21%*	1 6%	4 10%	7 18%	11 21%	15 19%	2 10%	35 17%	~	~	~	1 20%	3 16%	1 9%	39 17%	15 10%*	25 25%*	15 18%	25 15%
09	38 15%	616 16%	8 50%	9 21%	3 8%	6 11%	11 14%	1 5%	31 15%	~	~	1 33%	4 21%	3 27%	34 15%	30 21%*	8 8%*	13 15%	25 15%	
BEST HEALTH CARE POSSIBLE	71 28%	1096 29%	1 6%	13 31%	7 18%	12 23%	22 29%	13 62%	57 27%	~	~	~	2 40%	6 32%	6 55%	59 26%	46 32%	20 20%*	27 32%	41 25%
#8-10 (NET)	149 59%	2485 66%*	10 63%	26 62%	17 45%	29 55%	48 62%	16 76%	123 58%	~	~	1 33%	3 60%	13 68%	10 91%	132 57%	91 64%	53 54%	55 65%	91 56%

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				
	UHAL 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/ IND/ PAC ALSK	AMER ILND NATV OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE		
9-10 (NET)	109 43%	1712 46%	9 56%~	22 52%~	10 26%~	18 34%	33 43%	14 67%~	88 42%~	~	~	~	1 33%~	2 40%~	10 53%~	9 82%~	93 40%~	76 53%*	28 28%*	40 48%	66 40%
NOT ANSWERED	7	106			1	1	2	2	4			1				4	5	1	3	3	
VALID CASES	251	3737	16	42	38	53	77	21	211	1	1	3	5	19	11	230	143	99	84	163	
NUMBER OF RESPONDENTS	258 100%	3843 100%	16 100%	42 100%	39 100%	54 100%	79 100%	23 100%	215 100%	1 100%	1 100%	4 100%	5 100%	19 100%	11 100%	234 100%	148 100%	100 100%	87 100%	166 100%	
MEAN	7.67	7.91	7.87	7.83	7.29	7.32	7.61	8.67	7.64	5.00	7.00	6.67	8.20	7.68	9.18	7.54	8.06	7.04	7.82	7.55	
p stat_(*=Sig @ p<=.05)		.073	~	~	~.232	.790	~	~	~	~	~	~	~	~	~	~	~.002*	.000*	.448	.263	

[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?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	UHAL TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q14 NEVER	10 4%	104 3%	1 6%~	2 ~	4 5%~	3 8%	3 4%	5 ~	2%~	~	~	~	~	20%~	21%~	1 9%~	4 4%~	5 6%	5 3%		
SOMETIMES	41 16%	575 15%	1 6%~	8 19%~	7 18%~	8 15%	17 22%	37 ~	18%~	~	~	~	~	40%~	5%~	1 9%~	38 17%~	16 11%*	24 24%*	14 17%	27 17%
USUALLY	87 35%	1243 33%	2 12%~	16 38%~	19 50%~	21 40%	24 31%	5 23%~	78 37%~	1 ~100%~	3 ~100%~	5 ~	5 26%~	1 9%~	86 38%~	53 37%	32 32%	22 26%*	65 40%*		
ALWAYS	113 45%	1797 48%	12 75%~	18 43%~	10 26%~	19 37%	33 43%	17 77%~	91 43%~	~	1 ~100%~	2 ~	9 47%~	8 73%~	96 42%~	70 49%	37 37%*	43 51%	66 40%		
#ALWAYS + USUALLY (NET)	200 80%	3040 82%	14 88%~	34 81%~	29 76%~	40 77%	57 74%	22 100%~	169 80%~	1 ~100%~	1 ~100%~	3 ~100%~	2 40%~	14 74%~	9 82%~	182 79%~	123 86%*	69 70%*	65 77%	131 80%	
TOP BOX SCORE	113 45%	1797 48%	12 75%~	18 43%~	10 26%~	19 37%	33 43%	17 77%~	91 43%~	~	1 ~100%~	2 ~	9 47%~	8 73%~	96 42%~	70 49%	37 37%*	43 51%	66 40%		
NOT ANSWERED	7	124			1	2	2	1	4			1			5	5	1	3	3		
VALID CASES	251	3719	16	42	38	52	77	22	211	1	1	3	5	19	11	229	143	99	84	163	
NUMBER OF RESPONDENTS	258 100%	3843 100%	16 100%	42 100%	39 100%	54 100%	79 100%	23 100%	215 100%	1 100%	1 100%	4 100%	5 100%	19 100%	11 100%	234 100%	148 100%	100 100%	87 100%	166 100%	

[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?

	UHAL 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			
Q15 YES	274 80%	4201 81%	23 74%~	45 78%	35 70%	62 83%	79 82%	25 96%~	229 80%	1 ~100%	1 ~100%	4 ~100%	4 67%~	23 79%~	8 62%~	249 80%~	160 75%*	106 88%*	95 77%	174 82%	
NO	69 20%	995 19%	8 26%~	13 22%	15 30%	13 17%	17 18%	1 4%~	57 20%	~	~	~	~	2 33%~	6 21%~	5 38%~	61 20%~	52 25%*	14 12%*	29 23%	38 18%
NOT ANSWERED	13	257	1				2		3						1	2		1	1	2	
VALID CASES	343	5196	31	58	50	75	96	26	286	1	1	4	6	29	13	310	212	120	124	212	
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%	1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%	

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	UHAL 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- AMER IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q16 NONE	33 13%	713 18%*	9 39%~	5 12%~	2 6%~	8 14%	7 10%	1 5%	26 12%~	~	~	~	~	6 29%~	30 ~ 13%~	26 18%*	7 7%*	15 17%	17 11%	
1 TIME	74 29%	973 24%	6 26%~	14 33%~	11 33%~	15 26%	17 23%	9 43%~	65 30%~	1 ~100%~	1 ~ 33%~	~	2 ~ 10%~	2 29%~	67 29%~	52 35%*	19 19%*	27 30%	45 28%	
2	61 24%	1005 25%	2 9%~	11 26%~	7 21%~	10 18%	23 32%	8 38%~	50 23%~	~	~	~	1 ~ 25%~	8 38%~	2 29%~	55 24%~	33 22%	27 27%	25 28%	36 22%
3	29 11%	534 13%	1 4%~	4 9%~	5 15%~	9 16%	8 11%	1 5%~	25 12%~	~	~	1 ~ 33%~	1 25%~	1 5%~	2 29%~	26 11%~	14 9%	14 14%	8 9%	20 12%
4	23 9%	322 8%	3 13%~	4 9%~	4 12%~	7 12%	5 7%	~	20 9%~	~	1 ~100%~	~	1 ~ 25%~	1 5%~	1 14%~	22 10%~	13 9%	10 10%	2 2%*	21 13%*
5 TO 9	26 10%	403 10%	2 9%~	3 7%~	2 6%~	3 5%	13 18%*	2 10%~	21 10%~	~	~	~	1 ~ 25%~	3 14%~	22 ~ 10%~	9 6%*	16 16%*	9 10%	16 10%	
10 OR MORE TIMES	9 4%	75 2%	~	2 5%~	2 6%~	5 9%	~	~	7 3%~	~	~	1 ~ 33%~	~	~	9 4%~	1 0.7%*	7 7%*	3 3%	6 4%	
NOT ANSWERED	19	238		2	2	5	6	4	15			1	2	1	18	12	6	6	13	
VALID CASES	255	4026	23	43	33	57	73	21	214	1	1	3	4	21	7	231	148	100	89	161
NUMBER OF RESPONDENTS	274	4264	23	45	35	62	79	25	229	1	1	4	4	23	8	249	160	106	95	174
	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		
	UHAL TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q17 NEVER	2 0.9%	47 1%	~	~	~	2%	~	5%	1%	~	~	~	~	~	~	2	1	1	1	1	
SOMETIMES	18 8%	196 6%	21%	5%	13%	8%	6%	5%	7%	~100%	~100%	~	~	20%	~	17	7	11	6	12	
USUALLY	56 26%	719 22%	14%	18%	23%	25%	36%*	25%	26%	~	~	~	33%	50%	27%	2	51	23	32	24	32
ALWAYS	143 65%	2245 70%	64%	76%	65%	65%	58%	65%	66%	~	~	~	67%	50%	53%	5	130	89	48	41	98
#ALWAYS + USUALLY (NET)	199 91%	2963 92%	79%	95%	87%	90%	94%	90%	92%	~	~	~	100%	100%	80%	7	181	112	80	65	130
TOP BOX SCORE	143 65%	2245 70%	64%	76%	65%	65%	58%	65%	66%	~	~	~	67%	50%	53%	5	130	89	48	41	98
NOT ANSWERED	3	22				1	2		2							1	2	1	2	1	
VALID CASES	219	3206	14	38	31	48	64	20	186	1	1	3	4	15	7	200	120	92	72	143	
NUMBER OF RESPONDENTS	222 100%	3228 100%	14 100%	38 100%	31 100%	49 100%	66 100%	20 100%	188 100%	1 100%	1 100%	3 100%	4 100%	15 100%	7 100%	201 100%	122 100%	93 100%	74 100%	144 100%	

[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		
	UHAL 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	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FEMALE		
Q18 NEVER	5 2%	67 2%	~	2 5%~	1 3%~	1 2%~	1 2%	4 2%~	~	~	~	~	~	1 7%~	~	5 2%~	3 3%	2 2%	2 3%	3 2%	
SOMETIMES	25 11%	251 8%	14%~	2 13%~	5 19%~	6 8%~	4 11%	7 5%~	1 12%~	~	~	~	~	2 13%~	~	24 12%~	12 10%	12 13%	6 8%	19 13%	
USUALLY	57 26%	665 21%	29%~	4 18%~	7 32%~	10 27%~	13 31%	20 15%~	3 25%~	46 ~100%~	1 ~100%~	3 ~100%~	3 75%~	3 20%~	2 29%~	53 26%~	24 20%*	33 35%*	22 30%	35 24%	
ALWAYS	133 60%	2214 69%*	57%~	8 63%~	24 45%~	14 62%~	30 57%	37 80%~	16 61%~	114 ~	1 ~100%~	1 ~25%~	9 60%~	9 71%~	5 59%~	119 67%*	81 49%*	46 49%*	43 59%	86 60%	
#ALWAYS + USUALLY (NET)	190 86%	2879 90%	86%~	12 82%~	31 77%~	24 90%~	43 88%	57 95%~	19 86%~	160 ~100%~	1 ~100%~	1 ~100%~	3 ~100%~	4 80%~	12 100%~	7 86%~	172 87%	105 85%	79 89%	121 85%	
TOP BOX SCORE	133 60%	2214 69%*	57%~	8 63%~	24 45%~	14 62%~	30 57%	37 80%~	16 61%~	114 ~	1 ~100%~	1 ~25%~	9 60%~	9 71%~	5 59%~	119 67%*	81 49%*	46 49%*	43 59%	86 60%	
NOT ANSWERED	2	31				1	1		1							2		1	1		
VALID CASES	220	3197	100%	14 100%	38 100%	31 100%	48 100%	65 100%	20 100%	187 100%	1 100%	1 100%	3 100%	4 100%	15 100%	7 100%	201 100%	120 100%	93 100%	73 100%	143 100%
NUMBER OF RESPONDENTS	222 100%	3228 100%	100%	14 100%	38 100%	31 100%	49 100%	66 100%	20 100%	188 100%	1 100%	1 100%	3 100%	4 100%	15 100%	7 100%	201 100%	122 100%	93 100%	74 100%	144 100%

[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	
	UHAL 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	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q19 NEVER	3 1%	85 3%	~	1 3%	~	1 2%	1 2%	~	3 2%	~	~	~	~	~	~	3 2%	2 2%	1 1%	1 1%	2 1%
SOMETIMES	18 8%	193 6%	1 7%	3 8%	2 6%	5 11%	6 9%	1 6%	17 9%	~	~	~	~	1 7%	17 9%	9 8%	8 9%	3 4%	15 11%*	
USUALLY	50 23%	575 18%	3 21%	7 18%	11 35%	9 19%	20 31%	~	39 21%	1 ~100%	2 ~67%	2 50%	5 33%	1 14%	47 24%	21 18%*	28 31%*	21 29%	29 21%	
ALWAYS	146 67%	2339 73%	10 71%	27 71%	18 58%	32 68%	38 58%	17 94%	125 68%	~	1 ~100%	1 33%	2 50%	9 60%	6 86%	132 66%	87 73%*	54 59%*	48 66%	94 67%
#ALWAYS + USUALLY (NET)	196 90%	2915 91%	13 93%	34 89%	29 94%	41 87%	58 89%	17 94%	164 89%	1 ~100%	1 ~100%	3 ~100%	4 ~100%	14 93%	179 100%	108 91%	82 90%	69 95%	123 88%	
TOP BOX SCORE	146 67%	2339 73%	10 71%	27 71%	18 58%	32 68%	38 58%	17 94%	125 68%	~	1 ~100%	1 33%	2 50%	9 60%	6 86%	132 66%	87 73%*	54 59%*	48 66%	94 67%
NOT ANSWERED	5	35				2	1	2	4						2	3	2	1	4	
VALID CASES	217	3193	14	38	31	47	65	18	184	1	1	3	4	15	7	199	119	91	73	140
NUMBER OF RESPONDENTS	222 100%	3228 100%	14 100%	38 100%	31 100%	49 100%	66 100%	20 100%	188 100%	1 100%	1 100%	3 100%	4 100%	15 100%	7 100%	201 100%	122 100%	93 100%	74 100%	144 100%

[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		
	UHAL 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 ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE			
Q20 NEVER	5 2%	95 3%	~	~	3%~	2%~	5%	~	2%~	~	~	~	~	7%~	~	2%~	~	5%*	5% 0.7%		
SOMETIMES	28 13%	295 9%	21%~	21%~	16%~	10%~	11%	~	12%~	~	~	33%~	25%~	20%~	~	13%~	13%	14%	8% 15%		
USUALLY	66 30%	856 27%	29%~	21%~	39%~	29%~	31%	35%~	30%~	~	100%~	~	33%~	50%~	20%~	29%~	30%~	27%	34%	33% 29%	
ALWAYS	120 55%	1950 61%	50%~	58%~	42%~	58%~	54%	65%~	55%~	~	100%~	33%~	25%~	53%~	71%~	54%~	61%*	46%*	53% 55%		
#ALWAYS + USUALLY (NET)	186 85%	2806 88%	79%~	79%~	81%~	88%~	85%	100%~	86%~	~	100%~	100%~	67%~	75%~	73%~	100%~	84%~	87%	81%	86% 84%	
TOP BOX SCORE	120 55%	1950 61%	50%~	58%~	42%~	58%~	54%	65%~	55%~	~	100%~	33%~	25%~	53%~	71%~	54%~	61%*	46%*	53% 55%		
NOT ANSWERED	3	31				1	1		1										2	1 1	
VALID CASES	219	3197	14	38	31	48	65	20	187		1	1	3	4	15	7	201	120	93	73 143	
NUMBER OF RESPONDENTS	222 100%	3228 100%	14 100%	38 100%	31 100%	49 100%	66 100%	20 100%	188 100%		1 100%	1 100%	3 100%	4 100%	15 100%	7 100%	201 100%	122 100%	93 100%	74 100%	144 100%

[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?

	UHAL 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	FE- MALE	MALE
Q21 YES	113 52%	1943 61%*	6 43%~	20 53%~	16 52%~	24 49%~	35 56%	10 56%~	95 52%~	1 ~100%	1 ~100%	2 67%~	2 50%~	7 47%~	3 43%~	103 52%~	60 50%	50 56%	35 48%	76 54%
NO	103 48%	1222 39%*	8 57%~	18 47%~	15 48%~	25 51%~	28 44%	8 44%~	88 48%~	~	~	1 ~33%	2 50%~	8 53%~	4 57%~	95 48%~	61 50%	39 44%	38 52%	64 46%
NOT ANSWERED	6	62					3	2	5						3		1	4	1	4
VALID CASES	216	3166	14	38	31	49	63	18	183	1	1	3	4	15	7	198	121	89	73	140
NUMBER OF RESPONDENTS	222 100%	3228 100%	14 100%	38 100%	31 100%	49 100%	66 100%	20 100%	188 100%	1 100%	1 100%	3 100%	4 100%	15 100%	7 100%	201 100%	122 100%	93 100%	74 100%	144 100%

[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				
	UHAL TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q22 NEVER	6 6%	119 6%	~	~	1 6%	3 13%	2 6%	6 7%	~	~	~	~	~	~	6 6%	3 5%	3 7%	2 7%	4 5%	
SOMETIMES	19 18%	265 14%	~	5 26%	2 13%	6 26%	6 19%	16 18%	~	~	~	~	2 29%	1 33%	17 18%	13 23%	5 11%	3 10%	16 21%	
USUALLY	26 25%	545 29%	3 50%	3 16%	7 44%	6 26%	5 16%	2 22%	21 24%	1 100%	~	2 100%	1 50%	1 14%	24 25%	15 26%	11 24%	5 17%	21 28%	
ALWAYS	54 51%	927 50%	3 50%	11 58%	6 38%	8 35%	18 58%	7 78%	46 52%	~	1 100%	~	1 50%	4 57%	2 67%	50 52%	26 46%	27 59%	19 66%	34 45%
#ALWAYS + USUALLY (NET)	80 76%	1472 79%	6 100%	14 74%	13 81%	14 61%	23 74%	9 100%	67 75%	1 100%	1 100%	2 100%	2 100%	5 71%	2 67%	74 76%	41 72%	38 83%	24 83%	55 73%
TOP BOX SCORE	54 51%	927 50%	3 50%	11 58%	6 38%	8 35%	18 58%	7 78%	46 52%	~	1 100%	~	1 50%	4 57%	2 67%	50 52%	26 46%	27 59%	19 66%	34 45%
NOT ANSWERED	8	61	1	1	4	1	6							6	3	4	6	1		
VALID CASES	105	1856	6	19	16	23	31	9	89	1	1	2	2	7	3	97	57	46	29	75
NUMBER OF RESPONDENTS	113	1917	6	20	16	24	35	10	95	1	1	2	2	7	3	103	60	50	35	76
	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 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				
	UHAL TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q23 WORST PERSONAL DOCTOR POSSIBLE	2 0.8%	60 2%	~	1 2%	~	~	1 1%	~	0.9%	~	~	~	~	~	2 ~0.9%	2 1%	~	1 1%	1 0.6%	
01	5 2%	30 0.7%	~	1 2%	~	3 5%	1 1%	~	1%	~	~	~	~	5 2%	3 2%	2 2%	~	4 5%	1 0.6%	
02	1 0.4%	27 0.7%	~	~	~	1 2%	~	~	0.5%	~	~	~	~	~	1 ~0.4%	~	1 1%	~	1 ~0.6%	
03	6 2%	71 2%	1 4%	1 2%	1 3%	1 2%	2 3%	~	2%	~	~	1 33%	1 5%	~	6 3%	~	6 6%	1 1%	5 3%	
04	10 4%	80 2%	~	~	4 13%	3 5%	3 4%	~	4%	~	~	~	~	2 9%	10 4%	6 4%	3 3%	2 2%	8 5%	
05	17 7%	203 5%	1 4%	4 9%	1 3%	4 7%	5 7%	2 9%	16 7%	~	~	~	~	1 5%	16 7%	7 5%	10 10%	2 2%*	15 9%*	
06	9 4%	153 4%	~	2 5%	1 3%	2 3%	2 3%	1 5%	7 3%	~	~	~	~	~	7 3%	7 5%	2 2%	3 3%	5 3%	
07	19 7%	289 7%	3 13%	4 9%	2 6%	2 3%	8 11%	~	15 7%	1 ~100%	1 ~100%	~	~	2 9%	17 7%	12 8%	7 7%	9 10%	10 6%	
08	42 16%	720 18%	5 22%	5 12%	5 16%	11 19%	14 19%	1 5%	31 14%	~	~	1 33%	3 75%	5 23%	1 14%	38 16%	23 15%	18 18%	20 23%	21 13%*
09	48 19%	743 19%	5 22%	9 21%	8 25%	9 16%	10 14%	7 32%	43 20%	~	~	~	~	4 18%	2 29%	45 19%	26 17%	21 21%	15 17%	33 20%
BEST PERSONAL DOCTOR POSSIBLE	96 38%	1623 41%	8 35%	16 37%	10 31%	22 38%	28 38%	11 50%	85 40%	~	~	1 33%	1 25%	6 27%	4 57%	87 37%	63 42%	31 31%	29 34%	66 40%
#8-10 (NET)	186 73%	3087 77%	18 78%	30 70%	23 72%	42 72%	52 70%	19 86%	159 74%	~	~	2 67%	4 100%	15 68%	7 100%	170 73%	112 75%	70 69%	64 74%	120 72%

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		
	UHAL TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
9-10 (NET)	144 56%	2366 59%	13 57%~	25 58%~	18 56%~	31 53%	38 51%	18 82%~	128 60%~	~	~	~	1 33%~	1 25%~	10 45%~	6 86%~	132 56%~	89 60%	52 51%	44 51%	99 60%
NOT ANSWERED	19	265	2	3	4	5	3	14					1		1	1	15	11	5	9	8
VALID CASES	255	3999	23	43	32	58	74	22	215	1	1	3	4	22	7	234	149	101	86	166	
NUMBER OF RESPONDENTS	274 100%	4264 100%	23 100%	45 100%	35 100%	62 100%	79 100%	25 100%	229 100%	1 100%	1 100%	4 100%	4 100%	23 100%	8 100%	249 100%	160 100%	106 100%	95 100%	174 100%	
MEAN	8.10	8.32	8.43	8.02	8.00	7.84	8.03	8.95	8.19	7.00	7.00	7.00	8.50	7.59	9.43	8.06	8.30	7.80	8.03	8.13	
p stat_(*=Sig @ p<=.05)		.114	~	~	~.345	.755	~	~	~	~	~	~	~	~	~	~	~.107	.104	.757	.750	

[ASKED IF Q15 = YES]

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

	AGE							RACE					ETHNICITY		HEALTH STATUS		GENDER			
	UHAL 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 HAW/ AS- PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE		
Q24 YES	128 38%	2074 40%	8 25%~	13 23%*	17 34%	30 42%	46 49%*	14 56%~	108 38%			2 50%~	2 33%~	10 34%~	3 25%~	118 39%~	65 31%*	61 53%*	41 34%	87 42%
NO	206 62%	3119 60%	24 75%~	44 77%*	33 66%	42 58%	48 51%*	11 44%~	173 62%	1 ~100%	1 ~100%	2 50%~	4 67%~	19 66%~	9 75%~	187 61%~	144 69%*	55 47%*	81 66%	121 58%
NOT ANSWERED	22	260		1		3	4	1	8					2	7	3	5	3	6	
VALID CASES	334	5193	32	57	50	72	94	25	281	1	1	4	6	29	12	305	209	116	122	208
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%	1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%



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	
	UHAL TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q25 NEVER	5 4%	135 7%	~	~	24%~	~	2%~	~	3%~	~	~	~	50%~	10%~	~	4%~	3% 5%	2 3	2 3	5%~ 4%~
SOMETIMES	22 18%	292 15%	13%~	23%~	29%~	24%~	12%~	8%~	17%~	~	~	~	50%~	30%~	~	18%~	15% 22%	9 13	7 15	19%~ 18%~
USUALLY	37 30%	614 31%	63%~	31%~	29%~	28%~	31%~	15%~	30%~	~	~	~100%~	~	30%~	~	30%~	39%* 21%*	24 12	10 27	27%~ 32%~
ALWAYS	58 48%	926 47%	25%~	46%~	18%~	48%~	55%~	77%~	50%~	~	~	~	~	30%~	100%~	48%~	44% 52%	27 30	18 40	49%~ 47%~
#ALWAYS + USUALLY (NET)	95 78%	1540 78%	88%~	77%~	47%~	76%~	86%~	92%~	80%~	~	~	~100%~	~	60%~	100%~	78%~	82% 72%	51 42	28 67	76%~ 79%~
TOP BOX SCORE	58 48%	926 47%	25%~	46%~	18%~	48%~	55%~	77%~	50%~	~	~	~	~	30%~	100%~	48%~	44% 52%	27 30	18 40	49%~ 47%~
NOT ANSWERED	6	78				1	4	1	4			1				5	3 3	3 3	4 2	
VALID CASES	122	1967	8	13	17	29	42	13	104			1	2	10	3	113	62 58	58 58	37 85	
NUMBER OF RESPONDENTS	128	2045	8	13	17	30	46	14	108			2	2	10	3	118	65 61	61 61	41 87	
	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				
	UHAL 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	7 6%	93 5%	1 13%~	2 ~ 12%~	3 10%~	1 2%~	~	6 6%~	~	~	~	~	~	1 10%~	7 ~ 6%~	3 5%~	4 7%~	2 5%~	5 6%~		
1 SPECIALIST	71 58%	1033 52%	4 50%~	10 77%~	12 71%~	16 55%~	22 51%~	7 54%~	60 58%~	~	~	~	~	6 60%~	3 100%~	63 56%~	41 65%~	29 50%~	18 47%~	53 62%~	
2	25 20%	522 26%	3 38%~	~	3 18%~	6 21%~	10 23%~	3 23%~	22 21%~	~	~	~	1 ~100%~	1 50%~	~	25 ~ 22%~	12 19%~	12 21%~	10 26%~	15 18%~	
3	10 8%	217 11%	~	2 ~ 15%~	~	2 7%~	6 14%~	~	8 8%~	~	~	~	~	2 ~ 20%~	10 ~ 9%~	3 5%~	7 12%~	3 8%~	7 8%~		
4	6 5%	74 4%	~	~	~	~	4 9%~	2 15%~	4 4%~	~	~	~	~	1 ~ 50%~	1 10%~	4 ~ 4%~	2 3%~	4 7%~	2 5%~	4 5%~	
5 OR MORE SPECIALISTS	4 3%	41 2%	~	1 8%~	~	2 7%~	~	1 8%~	4 4%~	~	~	~	~	~	~	4 ~ 4%~	2 3%~	2 3%~	3 8%~	1 1%~	
NOT ANSWERED	5	66	~	~	~	1	3	1	4	~	~	~	1	~	~	5	2	3	3	2	
VALID CASES	123	1979	8	13	17	29	43	13	104	~	~	~	1	2	10	3	113	63	58	38	85
NUMBER OF RESPONDENTS	128	2045	8	13	17	30	46	14	108	~	~	~	2	2	10	3	118	65	61	41	87
	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				
	UHAL 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- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q27 WORST SPECIALIST POSSIBLE	5 4%	21 1%	~	2 15%~	3 20%~	~	~	~	3 3%~	~	~	~	1 50%~	1 11%~	~	4 4%~	3 5%	2 4%	2 6%~	3 4%~
01	1 0.9%	7 0.4%	~	~	~	1 4%~	~	~	~	~	~	~	~	1 11%~	~	1 0.9%~	1 2%~	~	1 1%~	
02	1 0.9%	19 1%	~	~	~	1 4%~	~	~	1 1%~	~	~	~	~	~	~	1 0.9%~	~	1 2%~	~	1 1%~
03		28 2%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
04	1 0.9%	18 1%	~	1 8%~	~	~	~	~	1 1%~	~	~	~	~	~	~	1 0.9%~	1 2%~	~	1 3%~	~
05	2 2%	88 5%*	~	~	1 7%~	1 4%~	~	~	1 1%~	~	~	~	~	1 11%~	~	2 2%~	2 3%~	~	~	2 3%~
06	3 3%	76 4%	~	~	~	1 4%~	2 5%~	~	2 2%~	~	~	~	1 50%~	~	1 33%~	1 0.9%~	2 3%	1 2%	~	3 4%~
07	11 10%	154 8%	3 43%~	1 8%~	~	4 15%~	3 7%~	~	11 11%~	~	~	~	~	~	~	11 10%~	5 8%	6 11%	4 11%~	7 9%~
08	21 18%	272 15%	1 14%~	1 8%~	6 40%~	4 15%~	8 20%~	1 8%~	17 18%~	~	~	~	~	2 22%~	1 33%~	19 18%~	11 19%	8 15%	7 20%~	14 18%~
09	17 15%	345 19%	1 14%~	2 15%~	1 7%~	3 12%~	8 20%~	2 17%~	14 14%~	~	~	~	~	1 11%~	~	15 14%~	7 12%	10 19%	7 20%~	10 13%~
BEST SPECIALIST POSSIBLE	52 46%	812 44%	2 29%~	6 46%~	4 27%~	11 42%~	20 49%~	9 75%~	47 48%~	~	~	1 100%~	3 33%~	3 33%~	51 48%~	27 46%	25 47%	14 40%~	38 48%~	
#8-10 (NET)	90 79%	1429 78%	4 57%~	9 69%~	11 73%~	18 69%~	36 88%~	12 100%~	78 80%~	~	~	1 100%~	6 67%~	2 67%~	85 80%~	45 76%	43 81%	28 80%~	62 78%~	

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			
	UHAL 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		
9-10 (NET)	69 61%	1157 63%	3 43%~	8 62%~	5 33%~	14 54%~	28 68%~	11 92%~	61 63%~	~	~	~	1 ~100%~	4 ~ 44%~	1 33%~	66 62%~	34 58%	35 66%	21 60%~	48 61%~
NOT ANSWERED	2	34					1	1	1							1	1	1	1	
VALID CASES	114	1838	7	13	15	26	41	12	97		1	2	9	3	106	59	53	35	79	
NUMBER OF RESPONDENTS	116 100%	1872 100%	7 100%	13 100%	15 100%	26 100%	42 100%	13 100%	98 100%		1 100%	2 100%	9 100%	3 100%	106 100%	60 100%	54 100%	36 100%	80 100%	
MEAN	8.36	8.47	8.29	7.46	6.80	8.12	9.00	9.67	8.58		10.0	3.00	6.78	8.00	8.46	8.19	8.57	8.31	8.38	
p stat_(*=Sig @ p<=.05)		.631	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.437	.406	~	~

[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?

	UHAL 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				
Q28 YES	47 14%	1182 23%*	1 3%~	6 11%	10 20%	16 22%	11 12%	2 9%~	39 14%	~	~	~	~	1 17%~	5 17%~	1 8%~	45 15%~	28 13%	18 16%	7 6%*	39 19%*	
NO	286 86%	3968 77%*	31 97%~	51 89%	40 80%	57 78%	83 88%	21 91%~	241 86%	~100%	~100%	~100%	~	4 83%~	5 83%~	24 92%~	11 85%~	260 87%	182 84%	96 84%	117 94%*	166 81%*
NOT ANSWERED	23	303		1		2	4	3	9							2	7	2	7	1	9	
VALID CASES	333	5150	32	57	50	73	94	23	280	1	1	4	6	29	12	305	210	114	124	205		
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%	1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%		

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?

	UHAL 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	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE MALE			
Q29 NEVER	5 11%	119 12%	1 100%	3 ~30%	1 ~9%	3 ~8%	~	~	~	~	~	2 40%	5 ~11%	2 7%	3 17%	1 14%	4 11%			
SOMETIMES	21 46%	339 34%	4 ~80%	4 40%	6 38%	6 55%	18 47%	~	~	~	1 ~100%	1 20%	20 ~45%	10 37%	10 56%	4 57%	16 42%			
USUALLY	11 24%	332 33%	1 20%	3 30%	6 38%	1 9%	9 24%	~	~	~	~	2 40%	11 ~25%	9 33%	2 11%	1 14%	10 26%			
ALWAYS	9 20%	213 21%	~	~	4 25%	3 27%	2 100%	8 21%	~	~	~	~	1 100%	8 18%	6 22%	3 17%	1 14%	8 21%		
#ALWAYS + USUALLY (NET)	20 43%	545 54%	1 20%	3 30%	10 63%	4 36%	2 100%	17 45%	~	~	~	2 40%	1 100%	19 43%	15 56%	5 28%	2 29%	18 47%		
TOP BOX SCORE	9 20%	213 21%	~	~	4 25%	3 27%	2 100%	8 21%	~	~	~	~	1 100%	8 18%	6 22%	3 17%	1 14%	8 21%		
NOT ANSWERED	1	19	1				1						1	1			1			
VALID CASES	46	1003	1	5	10	16	11	2	38		1	5	1	44	27	18	7	38		
NUMBER OF RESPONDENTS	47	1022	1	6	10	16	11	2	39		1	5	1	45	28	18	7	39		
	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?

	UHAL 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	GOOD & POOR	MALE	FE- MALE		
Q30 YES	74 22%	1525 30%*	5 16%~	12 21%	9 18%	18 25%	23 25%	6 26%~	60 22%	~	~	~	3 75%~	1 20%~	7 24%~	2 17%~	71 23%~	40 19%	33 29%*	23 19%	50 25%
NO	256 78%	3584 70%*	27 84%~	45 79%	41 82%	53 75%	70 75%	17 74%~	218 78%	~100%~	1 100%~	1 100%~	1 25%~	4 80%~	22 76%~	10 83%~	233 77%~	168 81%	80 71%*	100 81%	153 75%
NOT ANSWERED	26	344	1		4	5	3	11					1		2	8	4	8	2	11	
VALID CASES	330	5109	32	57	50	71	93	23	278		1	1	4	5	29	12	304	208	113	123	203
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%		1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%

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				
	UHAL 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	MUL- TI	OTHR	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q31 NEVER	4 6%	51 4%	~	~	11%~	~	10%~	17%~	3 5%~	~	~	~	~	~	14%~	~	4 6%~	1 3%~	3 10%~	3 14%~	1 2%~
SOMETIMES	17 24%	295 21%	1 20%~	4 33%~	1 11%~	3 17%~	7 35%~	1 17%~	16 28%~	~	~	~	~	~	14%~	~	17 25%~	8 21%~	9 29%~	5 23%~	12 25%~
USUALLY	20 28%	400 28%	1 20%~	3 25%~	4 44%~	7 39%~	5 25%~	~	15 26%~	~	~	~	1 33%~	1 100%~	2 29%~	1 50%~	19 28%~	12 31%~	8 26%~	5 23%~	15 31%~
ALWAYS	30 42%	670 47%	3 60%~	5 42%~	3 33%~	8 44%~	6 30%~	4 67%~	23 40%~	~	~	~	2 67%~	~	3 43%~	1 50%~	28 41%~	18 46%~	11 35%~	9 41%~	20 42%~
#ALWAYS + USUALLY (NET)	50 70%	1070 76%	4 80%~	8 67%~	7 78%~	15 83%~	11 55%~	4 67%~	38 67%~	~	~	~	3 100%~	1 100%~	5 71%~	2 100%~	47 69%~	30 77%~	19 61%~	14 64%~	35 73%~
TOP BOX SCORE	30 42%	670 47%	3 60%~	5 42%~	3 33%~	8 44%~	6 30%~	4 67%~	23 40%~	~	~	~	2 67%~	~	3 43%~	1 50%~	28 41%~	18 46%~	11 35%~	9 41%~	20 42%~
NOT ANSWERED	3	26					3		3							3	1	2	1	2	
VALID CASES	71	1415	5	12	9	18	20	6	57				3	1	7	2	68	39	31	22	48
NUMBER OF RESPONDENTS	74	1441	5	12	9	18	23	6	60				3	1	7	2	71	40	33	23	50
	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	UHAL 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	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q32 NEVER	2 3%	24 2%	~	~	11%~	~	5%~	~	2%~	~	~	~	~	14%~	~	3%~	~	6%~	9%~	~	
SOMETIMES	4 6%	83 6%	~	8%~	11%~	~	10%~	~	7%~	~	~	~	~	~	~	6%~	5%~	6%~	~	8%~	
USUALLY	17 24%	312 22%	60%~	17%~	22%~	33%~	10%~	33%~	25%~	~	~	~	33%~	~	29%~	~	25%~	21%~	29%~	27%~	23%~
ALWAYS	48 68%	995 70%	40%~	75%~	56%~	67%~	75%~	67%~	67%~	~	~	~	67%~	100%~	57%~	100%~	66%~	74%~	58%~	64%~	69%~
#ALWAYS + USUALLY (NET)	65 92%	1307 92%	100%~	92%~	78%~	100%~	85%~	100%~	91%~	~	~	~	100%~	100%~	86%~	100%~	91%~	95%~	87%~	91%~	92%~
TOP BOX SCORE	48 68%	995 70%	40%~	75%~	56%~	67%~	75%~	67%~	67%~	~	~	~	67%~	100%~	57%~	100%~	66%~	74%~	58%~	64%~	69%~
NOT ANSWERED	3	27					3		3							3	1	2	1	2	
VALID CASES	71	1414	5	12	9	18	20	6	57			3	1	7	2	68	39	31	22	48	
NUMBER OF RESPONDENTS	74	1441	5	12	9	18	23	6	60			3	1	7	2	71	40	33	23	50	
	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q30 = YES]

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

	UHAL 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	
Q33 YES	133 41%	1804 36%	11 34%~	27 47%	17 35%~	32 46%	42 46%	4 17%~	109 40%		1 ~100%	1 ~100%	2 50%~	2 33%~	15 54%~	3 25%~	126 42%~	84 41%	47 42%	51 42%	82 41%
NO	192 59%	3261 64%	21 66%~	30 53%	32 65%~	38 54%	49 54%	19 83%~	166 60%				2 50%~	4 67%~	13 46%~	9 75%~	174 58%~	120 59%	66 58%	70 58%	119 59%
NOT ANSWERED	31	388		1	1	5	7	3	14						1	2	12	8	8	4	13
VALID CASES	325	5065	32	57	49	70	91	23	275		1	1	4	6	28	12	300	204	113	121	201
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%		1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%

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	
	UHAL 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 ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
PQ34 NEVER	5 2%	97 2%	1 ~	1 2%	1 ~	2 1%	1 2%	1 5%	4 1%	~	~	~	~	~	1 4%	5 ~	3 2%	2 1%	3 3%	2 1%
SOMETIMES	32 10%	322 6%	4 13%	6 11%	5 10%	9 13%	8 9%	~	25 9%	1 ~100%	~	~	~	5 19%	1 8%	31 10%	17 8%	15 13%	11 9%	21 10%
USUALLY	47 15%	697 14%	5 16%	9 16%	8 16%	9 13%	16 18%	~	38 14%	~	1 ~100%	2 50%	2 33%	3 11%	45 ~	27 13%	18 16%	16 14%	31 15%	
ALWAYS	237 74%	3891 78%	23 72%	41 72%	36 73%	51 73%	62 70%	21 95%	206 75%	~	~	2 50%	4 67%	18 67%	11 92%	217 73%	154 77%	77 69%	88 75%	146 73%
#ALWAYS + USUALLY (NET)	284 88%	4589 92%	28 88%	50 88%	44 90%	60 86%	78 89%	21 95%	244 89%	~	1 ~100%	4 100%	6 100%	21 78%	11 92%	262 88%	181 90%	95 85%	104 88%	177 89%
TOP BOX SCORE	237 74%	3891 78%	23 72%	41 72%	36 73%	51 73%	62 70%	21 95%	206 75%	~	~	2 50%	4 67%	18 67%	11 92%	217 73%	154 77%	77 69%	88 75%	146 73%
NOT ANSWERED	4	87					3	1	2					1	2	3	1	3	1	
VALID CASES	321	5008	32	57	49	70	88	22	273	1	1	4	6	27	12	298	201	112	118	200
NUMBER OF RESPONDENTS	325	5095	32	57	49	70	91	23	275	1	1	4	6	28	12	300	204	113	121	201
	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				
	UHAL 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- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q35 WORST HEALTH PLAN POSSIBLE	4 1%	59 1%	~	~	1 2%	2 3%	1 1%	~	4 2%	~	~	~	~	~	3 1%	1 0.5%	2 2%	~	4 2%	
01	6 2%	31 0.6%	~	~	1 2%	3 4%	2 2%	~	5 2%	~	~	~	~	1 4%	6 2%	2 1%	4 4%	4 4%	2 1%	
02	2 0.6%	40 0.8%	~	~	~	2 3%	~	~	2 0.8%	~	~	~	~	~	2 0.7%	1 0.5%	1 0.9%	1 0.9%	1 0.5%	
03	11 4%	85 2%	2 7%	1 2%	3 6%	3 4%	2 2%	~	6 2%	~	~	~	1 20%	4 14%	10 3%	6 3%	4 4%	2 2%	9 5%	
04	11 4%	121 2%	~	2 4%	2 4%	2 3%	3 3%	1 5%	9 3%	~	~	~	~	~	9 3%	6 3%	5 5%	3 3%	7 4%	
05	45 14%	451 9%*	7 24%	4 8%	5 11%	10 14%	17 19%	2 9%	38 14%	~	~	2 50%	1 20%	4 14%	2 15%	43 15%	18 9%*	26 24%*	21 19%	24 12%
06	24 8%	332 7%	1 3%	7 13%	6 13%	3 4%	6 7%	1 5%	23 9%	~	~	~	~	1 4%	1 8%	23 8%	14 7%	9 8%	6 5%	18 9%
07	41 13%	632 13%	1 3%	7 13%	12 26%	10 14%	10 11%	1 5%	35 13%	~	1 100%	1 25%	1 20%	3 11%	40 14%	27 14%	14 13%	14 13%	27 14%	
08	56 18%	921 19%	7 24%	11 21%	3 6%	13 19%	18 20%	4 18%	47 18%	~	1 100%	~	~	7 25%	3 23%	52 18%	39 20%	15 14%	22 20%	34 17%
09	47 15%	768 16%	3 10%	11 21%	6 13%	10 14%	13 14%	4 18%	41 15%	~	~	1 25%	1 20%	1 4%	4 31%	40 14%	36 18%*	11 10%	14 13%	33 17%
BEST HEALTH PLAN POSSIBLE	67 21%	1430 29%*	8 28%	10 19%	8 17%	12 17%	18 20%	9 41%	56 21%	~	~	~	1 20%	7 25%	3 23%	58 20%	47 24%	18 17%	25 22%	40 20%
#8-10 (NET)	170 54%	3119 64%*	18 62%	32 60%	17 36%	35 50%	49 54%	17 77%	144 54%	~	1 100%	1 25%	2 40%	15 54%	10 77%	150 52%	122 62%*	44 40%*	61 54%	107 54%

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				
	UHAL TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AMER AS-	NATV PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE				
9-10 (NET)	114 36%	2198 45%*	11 38%~	21 40%	14 30%~	22 31%	31 34%	13 59%~	97 36%~	~	~	~	1 25%~	2 40%~	8 29%~	7 54%~	98 34%~	83 42%*	29 27%*	39 35%	73 37%
NOT ANSWERED	42	583	3	5	3	5	8	4	23				1	1	1	26	15	12	13	15	
VALID CASES	314	4870	29	53	47	70	90	22	266	1	1	4	5	28	13	286	197	109	112	199	
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%	1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%	
MEAN	7.27	7.82	7.48	7.72	6.83	6.80	7.24	8.41	7.30	7.00	8.00	6.50	6.80	6.96	8.15	7.22	7.69	6.60	7.28	7.26	
p stat_(*=Sig @ p<=.05)		.000*	~.074		~.093	.888	~	~	~	~	~	~	~	~	~	~	~.000*	.000*	.987	.902	

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	
	UHAL 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 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		
Q35A YES	47 14%	736 14%	2 6%~	2 4%*	8 16%~	9 12%	21 22%*	5 22%~	41 15%	~	~	1 ~ 25%~	5 ~ 17%~	1 8%~	43 14%~	18 9%*	29 25%*	18 15%	29 14%	
NO	285 86%	4378 86%	29 94%~	55 96%*	41 84%~	64 88%	75 78%*	18 78%~	241 85%	1 ~100%~	1 ~100%~	3 75%~	5 ~100%~	24 83%~	11 92%~	261 86%~	190 91%*	87 75%*	104 85%	178 86%
NOT ANSWERED	24	339	1	1	1	2	2	3	7			1		2	8	4	5	3	7	
VALID CASES	332	5114	31	57	49	73	96	23	282	1	1	4	5	29	12	304	208	116	122	207
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%	1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%

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	
	UHAL 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- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q35B NEVER	9 21%	123 19%	~	~	3 38%	1 13%	5 26%	9 24%	~	~	~	~	~	~	9 23%	5 31%	4 15%	4 24%	5 20%	
SOMETIMES	8 19%	72 11%	~	~	1 13%	2 25%	5 26%	6 16%	~	~	~	~	2 50%	~	8 21%	1 6%	7 27%	2 12%	6 24%	
USUALLY	9 21%	177 27%	1 50%	~	2 25%	1 13%	5 26%	8 22%	~	~	~	~	1 25%	~	8 21%	3 19%	6 23%	5 29%	4 16%	
ALWAYS	16 38%	279 43%	1 50%	1 100%	2 25%	4 50%	4 21%	4 100%	14 38%	~	~	1 100%	1 25%	14 36%	7 44%	9 35%	6 35%	10 40%		
#ALWAYS + USUALLY (NET)	25 60%	456 70%	2 100%	1 100%	4 50%	5 63%	9 47%	4 100%	22 59%	~	~	1 100%	2 50%	22 56%	10 62%	15 58%	11 65%	14 56%		
TOP BOX SCORE	16 38%	279 43%	1 50%	1 100%	2 25%	4 50%	4 21%	4 100%	14 38%	~	~	1 100%	1 25%	14 36%	7 44%	9 35%	6 35%	10 40%		
NOT ANSWERED	5	24		1		1	2	1	4				1	1	4	2	3	1	4	
VALID CASES	42	651	2	1	8	8	19	4	37			1	4	39	16	26	17	25		
NUMBER OF RESPONDENTS	47 100%	675 100%	2 100%	2 100%	8 100%	9 100%	21 100%	5 100%	41 100%			1 100%	5 100%	1 100%	43 100%	18 100%	29 100%	18 100%	29 100%	

[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?

	UHAL 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	MALE			
Q35C YES	35 11%	760 15%*	3 10%~	3 5%	7 14%~	9 13%	11 12%	2 9%~	27 10%					1 20%~	7 24%~	1 8%~	33 11%~	15 7%*	20 18%*	11 9%	24 12%
NO	288 89%	4319 85%*	28 90%~	53 95%	42 86%~	63 87%	79 88%	20 91%~	246 90%		1 ~100%	1 ~100%	4 ~100%	4 80%~	22 76%~	11 92%~	263 89%~	188 93%*	93 82%*	106 91%	179 88%
NOT ANSWERED	33	373	1	2	1	3	8	4	16					1		2	16	9	8	8	11
VALID CASES	323	5080	31	56	49	72	90	22	273		1	1	4	5	29	12	296	203	113	117	203
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%		1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%



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

	UHAL 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	GOOD & POOR	MALE	FE- MALE
Q35D NEVER	10 29%	165 23%~	2 ~100%~	3 43%~	3 33%~	2 18%~	7 ~26%~	~	~	~	~	~	3 ~50%~	10 ~31%~	3 20%~	7 37%~	4 40%~	6 25%~		
SOMETIMES	9 26%	141 19%~	1 33%~	3 ~43%~	4 ~36%~	1 50%~	7 26%~	~	~	~	~	1 ~100%~	1 17%~	9 ~28%~	4 27%~	5 26%~	2 20%~	7 29%~		
USUALLY	7 21%	179 25%~	1 33%~	1 ~14%~	1 11%~	4 36%~	7 ~26%~	~	~	~	~	~	~	1 ~100%~	6 19%~	5 33%~	2 11%~	6 10%~	6 25%~	
ALWAYS	8 24%	239 33%~	1 33%~	~	5 ~56%~	1 9%~	1 50%~	6 22%~	~	~	~	~	2 ~33%~	7 ~22%~	3 20%~	5 26%~	3 30%~	5 21%~		
#ALWAYS + USUALLY (NET)	15 44%	418 58%~	2 67%~	1 ~14%~	6 67%~	5 45%~	1 50%~	13 48%~	~	~	~	~	2 ~33%~	1 100%~	13 41%~	8 53%~	7 37%~	4 40%~	11 46%~	
TOP BOX SCORE	8 24%	239 33%~	1 33%~	~	5 ~56%~	1 9%~	1 50%~	6 22%~	~	~	~	~	2 ~33%~	7 ~22%~	3 20%~	5 26%~	3 30%~	5 21%~		
NOT ANSWERED	1	20	1										1	1	1	1	1			
VALID CASES	34	725	3	2	7	9	11	2	27				1	6	1	32	15	19	10	24
NUMBER OF RESPONDENTS	35	745	3	3	7	9	11	2	27				1	7	1	33	15	20	11	24
	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	
UHAL 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	GOOD & POOR	FE- MALE	MALE		
Q35E YES	190 57%	2872 56%	11 35%~	34 60%	28 56%	44 60%	62 65%	10 43%~	162 58%	1 ~100%~	4 ~100%~	2 33%~	14 48%~	6 50%~	174 57%~	106 51%*	81 70%*	70 57%	119 58%	
NO	142 43%	2261 44%	20 65%~	23 40%	22 44%	29 40%	33 35%	13 57%~	118 42%	1 ~100%~	1 ~100%~	4 ~67%~	15 52%~	6 50%~	131 43%~	103 49%*	35 30%*	53 43%	87 42%	
NOT ANSWERED	24	320	1	1		2	3	3	9					2	7	3	5	2	8	
VALID CASES	332	5133	31	57	50	73	95	23	280	1	1	4	6	29	12	305	209	116	123	206
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%	1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%

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

	UHAL 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	
Q35F																					
NO EFFORT AT ALL	8 4%	94 3%	~	~	7%~	10%~	3%	~	4%~	~	~	~	~	~	7%~	~	4%~	3%	5%	4%	4%
A LITTLE EFFORT WAS MADE	18 10%	213 8%	9%~	15%~	7%~	10%~	8%	13%~	11%~	~	~	~	~	~	7%~	~	11%~	8%	13%	9%	10%
SOME EFFORT WAS MADE	57 31%	662 24%*	36%~	35%~	39%~	19%~	33%	25%~	30%~	~100%~	~	~100%~	50%~	29%~	33%~	31%~	29%	35%	29%	32%	
A LOT OF EFFORT WAS MADE	101 55%	1793 65%*	55%~	50%~	46%~	62%~	55%	63%~	55%~	~	~	~	50%~	57%~	67%~	54%~	60%	47%	57%	53%	
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	158 86%	2455 89%	91%~	85%~	86%~	81%~	88%	88%~	85%~	~100%~	1	~100%~	100%~	86%~	100%~	85%~	89%	82%	87%	85%	
TOP BOX SCORE	101 55%	1793 65%*	55%~	50%~	46%~	62%~	55%	63%~	55%~	~	~	~	50%~	57%~	67%~	54%~	60%	47%	57%	53%	
NOT ANSWERED	6	95			2	2	2	5				1			5		5	1	2	4	
VALID CASES	184	2763	11	34	28	42	60	8	157	1		3	2	14	6	169	101	80	68	115	
NUMBER OF RESPONDENTS	190 100%	2858 100%	11 100%	34 100%	28 100%	44 100%	62 100%	10 100%	162 100%	1 100%		4 100%	2 100%	14 100%	6 100%	174 100%	106 100%	81 100%	70 100%	119 100%	

[ASKED IF Q35E = YES]

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

	UHAL 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- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q35G NO EFFORT AT ALL	10 5%	135 5%	1 ~	3 3%~	2 11%~	4 5%~	7 7%	10 6%~	~	~	~	~	~	~	9 5%~	2 2%*	7 9%	3 4%	7 6%	
A LITTLE EFFORT WAS MADE	25 14%	226 8%*	1 9%~	8 24%~	4 14%~	4 10%~	7 12%	11 11%~	20 13%~	~	~	1 33%~	4 29%~	~	24 14%~	15 15%	10 13%	8 12%	17 15%	
SOME EFFORT WAS MADE	55 30%	652 24%	4 36%~	8 24%~	10 36%~	13 31%~	17 29%	33 33%~	47 30%~	1 100%~	~	1 33%~	1 50%~	4 29%~	1 17%~	53 31%~	28 28%	27 34%	21 31%	34 30%
A LOT OF EFFORT WAS MADE	94 51%	1759 63%*	6 55%~	17 50%~	11 39%~	23 55%~	31 53%	56 56%~	81 51%~	~	~	1 33%~	1 50%~	6 43%~	5 83%~	84 49%~	56 55%	36 45%	36 53%	57 50%
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	149 81%	2411 87%*	10 91%~	25 74%~	21 75%~	36 86%~	48 81%	89 89%~	128 81%~	1 100%~	~	2 67%~	2 100%~	10 71%~	6 100%~	137 81%~	84 83%	63 79%	57 84%	91 79%
TOP BOX SCORE	94 51%	1759 63%*	6 55%~	17 50%~	11 39%~	23 55%~	31 53%	56 56%~	81 51%~	~	~	1 33%~	1 50%~	6 43%~	5 83%~	84 49%~	56 55%	36 45%	36 53%	57 50%
NOT ANSWERED	6	87				2	3	1	4				1		4	5	1	2	4	
VALID CASES	184	2771	11	34	28	42	59	9	158	1		3	2	14	6	170	101	80	68	115
NUMBER OF RESPONDENTS	190	2858	11	34	28	44	62	10	162	1		4	2	14	6	174	106	81	70	119
	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?

	UHAL 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/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35H NO EFFORT AT ALL	15 8%	191 7%	5 ~ 15%	4 ~ 14%	2 ~ 5%	4 ~ 7%	13 8%	~	~	~	~	~	1 7%	~	13 8%	6 6%	8 10%	7 10%	8 7%	
A LITTLE EFFORT WAS MADE	22 12%	242 9%	1 9%	2 6%	5 18%	6 14%	7 12%	1 11%	~	~	1 33%	~	2 14%	~	21 12%	9 9%	13 16%	7 10%	15 13%	
SOME EFFORT WAS MADE	59 32%	781 28%	4 36%	10 29%	10 36%	11 26%	20 34%	4 44%	50 32%	1 100%	1 33%	1 50%	5 36%	2 33%	56 33%	30 29%	28 35%	22 33%	37 32%	
A LOT OF EFFORT WAS MADE	88 48%	1558 56%	6 55%	17 50%	9 32%	24 56%	27 47%	4 44%	77 49%	~	~	1 33%	1 50%	6 43%	4 67%	79 47%	57 56%	30 38%	31 46%	56 48%
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	147 80%	2339 84%	10 91%	27 79%	19 68%	35 81%	47 81%	8 89%	127 80%	1 100%	2 67%	2 100%	11 79%	6 100%	135 80%	87 85%	58 73%	53 79%	93 80%	
TOP BOX SCORE	88 48%	1558 56%	6 55%	17 50%	9 32%	24 56%	27 47%	4 44%	77 49%	~	~	1 33%	1 50%	6 43%	4 67%	79 47%	57 56%	30 38%	31 46%	56 48%
NOT ANSWERED	6	85			1	4	1	4			1				5	4	2	3	3	
VALID CASES	184	2773	11	34	28	43	58	9	158	1	3	2	14	6	169	102	79	67	116	
NUMBER OF RESPONDENTS	190	2858	11	34	28	44	62	10	162	1	4	2	14	6	174	106	81	70	119	
	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	
	UHAL 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	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q35I YES	94 28%	1866 37%*	9 28%~	17 31%	10 20%	21 29%	28 29%	9 37%~	83 29%		1 ~100%~	1 25%~	1 17%~	7 25%~	2 17%~	89 29%~	61 29%	30 26%	23 19%*	71 34%*
NO	238 72%	3186 63%*	23 72%~	38 69%	40 80%	52 71%	68 71%	15 63%~	199 71%	1 ~100%~	3 ~ 75%~	5 83%~	21 75%~	10 83%~	217 71%~	148 71%	86 74%	100 81%*	136 66%*	
NOT ANSWERED	24	400		3		2	2	2	7					1	2	6	3	5	2	7
VALID CASES	332	5053	32	55	50	73	96	24	282	1	1	4	6	28	12	306	209	116	123	207
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%	1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%

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?

	UHAL 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		
Q35J #YES	72 78%	1483 85%	6 75%~	14 82%~	9 90%~	17 81%~	20 71%~	6 75%~	64 79%~	~	~	1 ~100%~	1 100%~	1 100%~	5 71%~	2 100%~	68 78%~	47 78%~	23 77%~	16 73%~	56 80%~
NO	20 22%	254 15%	2 25%~	3 18%~	1 10%~	4 19%~	8 29%~	2 25%~	17 21%~	~	~	~	~	~	2 29%~	19 ~22%~	13 22%~	7 23%~	6 27%~	14 20%~	
NOT ANSWERED	2	58	1				1	2							2	1		1	1	1	
VALID CASES	92	1737	8	17	10	21	28	8	81			1	1	1	7	2	87	60	30	22	70
NUMBER OF RESPONDENTS	94	1795	9	17	10	21	28	9	83			1	1	1	7	2	89	61	30	23	71
	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35I = YES]

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

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS		GENDER				
	UHAL TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE	
Q35K #YES	74 82%	1402 81%	6 75%~	14 82%~	9 90%~	18 86%~	20 77%~	7 88%~	68 84%~	~	1 ~100%~	1 100%~	4 ~ 80%~	1 50%~	72 85%~	50 83%~	22 79%~	18 86%~	56 81%~	
NO	16 18%	326 19%	2 25%~	3 18%~	1 10%~	3 14%~	6 23%~	1 13%~	13 16%~	~	~	~	1 ~100%~	1 20%~	1 50%~	13 15%~	10 17%~	6 21%~	3 14%~	13 19%~
NOT ANSWERED	4	67	1				2	1	2				2		4	1	2	2	2	
VALID CASES	90	1728	8	17	10	21	26	8	81		1	1	1	5	2	85	60	28	21	69
NUMBER OF RESPONDENTS	94 100%	1795 100%	9 100%	17 100%	10 100%	21 100%	28 100%	9 100%	83 100%		1 100%	1 100%	1 100%	7 100%	2 100%	89 100%	61 100%	30 100%	23 100%	71 100%

[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?

	UHAL 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	OTHR	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35L NEVER	48 15%	654 13%	4 13%~	7 13%	8 17%~	14 19%	12 13%	2 8%~	41 15%~	~	~	~	~	1 17%~	5 19%~	1 8%~	43 14%~	28 14%	18 15%	23 20%	24 12%*
SOMETIMES	47 14%	567 11%	6 20%~	7 13%	8 17%~	12 16%	12 13%	2 8%~	39 14%~	~	1 100%~	~	~	~	5 19%~	1 8%~	45 15%~	25 12%	22 19%	13 11%	34 17%
USUALLY	74 23%	1126 23%	8 27%~	8 15%	14 29%~	13 18%	24 26%	6 25%~	57 21%~	~	~	~	2 50%~	2 33%~	11 41%~	1 8%~	69 23%~	41 20%	32 27%	28 24%	45 22%
ALWAYS	156 48%	2613 53%	12 40%~	33 60%*	18 38%~	34 47%	45 48%	14 58%~	140 51%~	~	~	1 100%~	2 50%~	3 50%~	6 22%~	10 77%~	143 48%~	108 53%*	46 39%*	53 45%	103 50%
#ALWAYS + USUALLY (NET)	230 71%	3739 75%	20 67%~	41 75%	32 67%~	47 64%	69 74%	20 83%~	197 71%~	~	~	1 100%~	4 100%~	5 83%~	17 63%~	11 85%~	212 71%~	149 74%	78 66%	81 69%	148 72%
TOP BOX SCORE	156 48%	2613 53%	12 40%~	33 60%*	18 38%~	34 47%	45 48%	14 58%~	140 51%~	~	~	1 100%~	2 50%~	3 50%~	6 22%~	10 77%~	143 48%~	108 53%*	46 39%*	53 45%	103 50%
NOT ANSWERED	31	493	2	3	2	2	5	2	12						2	1	12	10	3	8	8
VALID CASES	325	4960	30	55	48	73	93	24	277		1	1	4	6	27	13	300	202	118	117	206
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%		1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%

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

	UHAL 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	OTHR	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35M ALWAYS	28 9%	387 8%	2 6%~	5 9%	3 6%~	4 6%	9 10%	5 21%~	26 9%~	~	~	~	~	~	2 7%~	1 8%~	27 9%~	14 7%	14 12%	11 9%	17 8%
USUALLY	21 6%	258 5%	3 10%~	2 4%	4 8%~	5 7%	6 6%	1 4%~	13 5%~	~	~	~	~	~	6 21%~	~	20 7%~	8 4%*	12 10%	8 7%	13 6%
SOMETIMES	58 18%	881 18%	4 13%~	8 14%	9 18%~	10 14%	20 22%	7 29%~	44 16%~	~	~	~	1 25%~	2 33%~	9 32%~	1 8%~	50 17%~	28 14%*	29 25%*	18 15%	40 19%
NEVER	220 67%	3452 69%	22 71%~	41 73%	33 67%~	53 74%	58 62%	11 46%~	195 70%~	~100%~	1 100%~	1 100%~	3 75%~	4 67%~	11 39%~	11 85%~	204 68%~	155 76%*	62 53%*	81 69%	137 66%
#NEVER + SOMETIMES (NET)	278 85%	4333 87%	26 84%~	49 88%	42 86%~	63 87%	78 84%	18 75%~	239 86%~	~100%~	1 100%~	1 100%~	4 100%~	6 100%~	20 71%~	12 92%~	254 84%~	183 89%*	91 78%*	99 84%	177 86%
TOP BOX SCORE	220 67%	3452 69%	22 71%~	41 73%	33 67%~	53 74%	58 62%	11 46%~	195 70%~	~100%~	1 100%~	1 100%~	3 75%~	4 67%~	11 39%~	11 85%~	204 68%~	155 76%*	62 53%*	81 69%	137 66%
NOT ANSWERED	29	476	1	2	1	3	5	2	11						1	1	11	7	4	7	7
VALID CASES	327	4977	31	56	49	72	93	24	278		1	1	4	6	28	13	301	205	117	118	207
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%		1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%

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	
	UHAL 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- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q35N																				
ALWAYS	10 3%	113 2%	1 3%	3 5%	2 4%	1 1%	3 3%	6 2%	~	~	~	~	~	3 11%	10 3%	3 1%	7 6%	5 4%	5 2%	
USUALLY	9 3%	124 2%	1 3%	2 4%	1 2%	1 1%	4 4%	7 3%	~	~	~	~	~	2 7%	8 3%	3 1%	6 5%	3 3%	6 3%	
SOMETIMES	53 16%	728 15%	5 16%	6 11%	11 22%	7 10%	18 19%	6 25%	41 15%	~	~	3 75%	1 17%	7 26%	48 16%	23 11%*	29 25%*	13 11%*	40 19%*	
NEVER	255 78%	4037 81%	24 77%	45 80%	35 71%	63 88%*	68 73%	18 75%	225 81%	1 ~100%	1 ~100%	1 25%	5 83%	15 56%	13 100%	236 78%	175 86%*	76 64%*	98 82%	155 75%
#NEVER + SOMETIMES (NET)	308 94%	4765 95%	29 94%	51 91%	46 94%	70 97%	86 92%	24 100%	266 95%	1 ~100%	1 ~100%	4 100%	6 100%	22 81%	13 100%	284 94%	198 97%*	105 89%*	111 93%	195 95%
TOP BOX SCORE	255 78%	4037 81%	24 77%	45 80%	35 71%	63 88%*	68 73%	18 75%	225 81%	1 ~100%	1 ~100%	1 25%	5 83%	15 56%	13 100%	236 78%	175 86%*	76 64%*	98 82%	155 75%
NOT ANSWERED	29	451	1	2	1	3	5	2	10					2	1	10	8	3	6	8
VALID CASES	327	5002	31	56	49	72	93	24	279	1	1	4	6	27	13	302	204	118	119	206
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%	1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%

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

			AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	UHAL TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER HAW/ IND/ PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q350 ALWAYS	6 2%	98 2%	1 3%	2 4%	1 2%	1 1%	~	~	3 1%	~	~	~	~	~	2 8%	5 2%	4 2%	2 2%	2 2%	3 1%
USUALLY	8 2%	112 2%	~	1 2%	~	2 3%	4 4%	1 4%	8 3%	~	~	~	~	~	~	7 2%	2 1%	5 4%	4 3%	4 2%
SOMETIMES	37 11%	493 10%	1 3%	5 9%	9 19%	6 8%	13 14%	3 12%	26 9%	~	1 ~100%	1 25%	2 33%	5 19%	~	34 11%	19 9%	17 15%	5 4%*	32 16%*
NEVER	275 84%	4278 86%	29 94%	48 86%	38 79%	63 88%	76 82%	20 83%	242 87%	1 ~100%	3 ~75%	4 67%	19 73%	13 100%	254 85%	180 88%*	93 79%	107 91%*	167 81%*	
#NEVER + SOMETIMES (NET)	312 96%	4771 96%	30 97%	53 95%	47 98%	69 96%	89 96%	23 96%	268 96%	1 ~100%	1 ~100%	4 ~100%	6 ~100%	24 92%	13 ~100%	288 96%	199 97%	110 94%	112 95%	199 97%
TOP BOX SCORE	275 84%	4278 86%	29 94%	48 86%	38 79%	63 88%	76 82%	20 83%	242 87%	1 ~100%	3 ~75%	4 67%	19 73%	13 100%	254 85%	180 88%*	93 79%	107 91%*	167 81%*	
NOT ANSWERED	30	472	1	2	2	3	5	2	10					3	1	12	7	4	7	8
VALID CASES	326	4981	31	56	48	72	93	24	279	1	1	4	6	26	13	300	205	117	118	206
NUMBER OF RESPONDENTS	356	5453	32	58	50	75	98	26	289	1	1	4	6	29	14	312	212	121	125	214
	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	
	UHAL 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- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q35P																				
#YES DEFINITELY	198 61%	3312 67%*	21 70%~	37 66%	29 60%~	41 58%	54 59%	16 70%~	174 64%~	~	1 ~100%~	2 50%~	2 33%~	13 46%~	11 85%~	184 62%~	139 69%*	56 48%*	70 60%	128 63%
YES SOMEWHAT	84 26%	1213 25%	8 27%~	12 21%	11 23%~	23 32%	24 26%	5 22%~	67 25%~	1 ~100%~	1 ~25%~	4 67%~	11 39%~	1 8%~	77 26%~	42 21%*	41 35%*	36 31%	47 23%	
NO	40 12%	418 8%*	1 3%~	7 13%	8 17%~	7 10%	14 15%	2 9%~	32 12%~	~	~	1 ~25%~	4 ~14%~	1 8%~	36 12%~	20 10%	19 16%	10 9%	29 14%	
NOT ANSWERED	34	511	2	2	2	4	6	3	16					1	15	11	5	9	10	
VALID CASES	322	4942	30	56	48	71	92	23	273	1	1	4	6	28	13	297	201	116	116	204
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%	1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%

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?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	UHAL TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q35Q YES	176 53%	2643 53%	17 55%	34 60%	26 53%	43 57%	44 47%	11 44%	151 54%	~	~	~100%	4 33%	2 52%	15 23%	3 55%	169 57%	119 46%	54 46%	54 45%*	121 58%*
NO	157 47%	2382 47%	14 45%	23 40%	23 47%	32 43%	50 53%	14 56%	131 46%	~100%	1 100%	1 ~	4 67%	14 48%	10 77%	136 45%	91 43%	64 54%	67 55%*	89 42%*	
NOT ANSWERED	23	428	1	1	1		4	1	7						1	7	2	3	4	4	
VALID CASES	333	5025	31	57	49	75	94	25	282	1	1	4	6	29	13	305	210	118	121	210	
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%	1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%	

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?

	UHAL 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 ILND	AMER HAW/ IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE MALE			
Q35R NEVER	59 41%	799 36%	4 25%~	10 43%~	13 54%~	13 38%~	15 41%~	3 43%~	47 41%~	1 ~100%~	~	1 ~ 50%~	6 43%~	5 71%~	49 38%~	38 38%~	19 45%~	25 51%~	33 36%	
SOMETIMES	24 17%	439 20%	5 31%~	4 17%~	3 13%~	6 18%~	4 11%~	2 29%~	19 16%~	~	~100%~	1 ~ 50%~	3 21%~	23 ~ 18%~	18 18%~	6 14%~	5 10%~	19 21%		
USUALLY	28 20%	421 19%	4 25%~	4 17%~	5 21%~	6 18%~	8 22%~	1 14%~	22 19%~	~	~	1 ~ 50%~	3 ~ 21%~	2 29%~	25 19%~	20 20%~	8 19%~	9 18%~	19 21%	
ALWAYS	32 22%	564 25%	3 19%~	5 22%~	3 13%~	9 26%~	10 27%~	1 14%~	28 24%~	~	~	1 ~ 50%~	2 ~ 14%~	32 ~ 25%~	23 23%~	9 21%~	10 20%~	21 23%		
#ALWAYS + USUALLY (NET)	60 42%	985 44%	7 44%~	9 39%~	8 33%~	15 44%~	18 49%~	2 29%~	50 43%~	~	~	2 ~100%~	5 ~ 36%~	2 29%~	57 44%~	43 43%~	17 40%~	19 39%~	40 43%	
TOP BOX SCORE	32 22%	564 25%	3 19%~	5 22%~	3 13%~	9 26%~	10 27%~	1 14%~	28 24%~	~	~	1 ~ 50%~	2 ~ 14%~	32 ~ 25%~	23 23%~	9 21%~	10 20%~	21 23%		
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	185	2730	15	34	24	41	53	18	165			2	4	11	6	173	112	70	70	115
NOT ANSWERED	28	500	1	1	2		8	1	8					4	1	10	1	9	6	7
VALID CASES	143	2223	16	23	24	34	37	7	116	1	1	2	2	14	7	129	99	42	49	92
NUMBER OF RESPONDENTS	356	5453	32	58	50	75	98	26	289	1	1	4	6	29	14	312	212	121	125	214
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
	UHAL 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	
Q36																					
EXCELLENT	19 6%	477 9%*	2 6%~	5 9%	4 8%~	2 3%	2 2%*	3 12%~	14 5%	~	~	~	25%~	~	~	1 8%~	16 5%~	19 9%~	~	7 6%	11 5%
VERY GOOD	81 24%	1176 23%	13 42%~	22 38%*	7 15%~	17 23%	19 20%	3 12%~	70 25%	~	~	~	17%~	1 29%~	8 23%~	3 24%~	74 38%*	81 38%*	~	33 27%	48 23%
GOOD	112 34%	1761 35%	11 35%~	22 38%	17 35%~	32 43%	22 23%*	8 32%~	96 34%	~	1 100%~	1 100%~	1 25%~	3 50%~	8 29%~	8 62%~	100 33%~	112 53%*	~	39 32%	73 35%
FAIR	86 26%	1244 25%	4 13%~	5 9%*	18 38%~	13 18%*	35 37%*	10 40%~	74 26%	~	~	~	50%~	2 17%~	1 29%~	8 8%~	83 27%~	86 71%~	~	27 22%	58 28%
POOR	35 11%	405 8%	1 3%~	4 7%	2 4%~	10 14%	17 18%*	1 4%~	29 10%	~	~	~	17%~	1 14%~	4 ~	33 ~	33 11%~	35 29%~	~	17 14%	18 9%
#EXCELLENT + VERY GOOD + GOOD (NET)	212 64%	3415 67%	26 84%~	49 84%*	28 58%~	51 69%	43 45%*	14 56%~	180 64%	~	1 100%~	1 100%~	2 50%~	4 67%~	16 57%~	12 92%~	190 62%~	212 100%~	~	79 64%	132 63%
NOT ANSWERED	23	389	1		2	1	3	1	6					1	1	6			2	6	
VALID CASES	333	5064	31	58	48	74	95	25	283		1	1	4	6	28	13	306	212	121	123	208
NUMBER OF RESPONDENTS	356	5453	32	58	50	75	98	26	289		1	1	4	6	29	14	312	212	121	125	214
	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?

	UHAL 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- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q37																						
EXCELLENT	58 17%	895 18%	7 23%~	11 19%	7 14%~	12 16%	14 15%	6 24%~	52 18%	~	~	~	~	~	2 7%~	2 14%~	53 17%~	54 26%*	3 2%*	23 19%	34 16%	
VERY GOOD	82 24%	1258 25%	7 23%~	16 28%	14 29%~	22 29%	18 19%	5 20%~	68 24%	~	~	1 25%~	1 17%~	9 31%~	5 36%~	76 25%~	67 32%*	14 12%*	29 24%	53 25%		
GOOD	101 30%	1533 30%	11 35%~	16 28%	17 35%~	18 24%	31 32%~	8 32%~	84 29%	~	100%~	100%~	1 25%~	1 67%~	4 31%~	9 36%~	5 30%~	92 30%~	63 30%	36 30%	33 27%	68 32%
FAIR	66 20%	1027 20%	5 16%~	12 21%	6 12%~	15 20%	21 22%	6 24%~	56 20%	~	~	1 25%~	1 17%~	7 24%~	1 7%~	63 20%~	19 9%*	47 39%*	24 20%	41 19%		
POOR	29 9%	363 7%	1 3%~	3 5%	5 10%~	8 11%	12 13%	~	25 9%	~	~	1 25%~	~	2 7%~	1 7%~	25 8%~	7 3%*	21 17%*	14 11%	15 7%		
#EXCELLENT + VERY GOOD + GOOD (NET)	241 72%	3685 73%	25 81%~	43 74%	38 78%~	52 69%	63 66%	19 76%~	204 72%	~	100%~	100%~	2 50%~	5 83%~	20 69%~	12 86%~	221 72%~	184 88%*	53 44%*	85 69%	155 73%	
NOT ANSWERED	20	378	1		1		2	1	4							3	2		2	3		
VALID CASES	336	5075	31	58	49	75	96	25	285		1	1	4	6	29	14	309	210	121	123	211	
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%		1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%	

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q38																				
#YES	107 33%	2160 44%*	7 23%~	15 28%	9 19%~	20 27%	40 42%*	15 58%~	90 32%	1 ~100%	1 ~100%	1 ~20%	9 31%~	5 38%~	97 32%~	63 31%	42 35%	31 26%*	75 36%	
NO	221 67%	2803 56%*	23 77%~	38 72%	39 81%~	53 73%	56 58%*	11 42%~	188 68%	~	~	4 ~100%	4 80%	20 69%~	8 62%~	206 68%~	139 69%	78 65%	89 74%*	131 64%
DON'T KNOW	10	112	1	4	1	2	2		8				1		1	6	9	1	4	6
NOT ANSWERED	18	379	1	1	1				3						3		1		1	2
VALID CASES	328	4963	30	53	48	73	96	26	278	1	1	4	5	29	13	303	202	120	120	206
NUMBER OF RESPONDENTS	356	5453	32	58	50	75	98	26	289	1	1	4	6	29	14	312	212	121	125	214
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
UHAL 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 HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE				
Q39 EVERY DAY	76 23%	1063 21%	7 23%~	13 23%	9 19%~	19 25%	25 26%	3 12%~	64 23%	~	~	1 25%~	1 17%~	9 31%~	3 21%~	70 23%~	40 19%*	35 30%*	39 32%*	37 18%*	
SOME DAYS	24 7%	463 9%	2 6%~	9 16%*	4 8%~	5 7%	3 3%*	1 4%~	22 8%	~	~	1 25%~	1 ~	1 3%~	1 7%~	22 7%~	16 8%	8 7%	8 7%	16 8%	
NOT AT ALL	232 70%	3502 70%	22 71%~	35 61%	35 73%~	51 68%	67 71%	21 84%~	195 69%	1 ~100%	1 ~100%	2 50%~	5 83%~	19 66%~	10 71%~	213 70%~	154 73%	73 63%*	75 61%*	156 75%*	
DON'T KNOW	2	42	1	1					2						2	1	1			2	
NOT ANSWERED	22	383	1		1		3	1	6						5	1	4			3	3
VALID CASES	332	5028	31	57	48	75	95	25	281	1	1	4	6	29	14	305	210	116	122	209	
NUMBER OF RESPONDENTS	356	5453	32	58	50	75	98	26	289	1	1	4	6	29	14	312	212	121	125	214	
	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?

	UHAL 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 PAC ALSK	OTH	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q40 NEVER	32 32%	435 26%	5 56%	6 27%	4 31%	10 43%	5 18%	2 50%	26 31%	~	~	~	1 50%	5 50%	~	29 32%	21 38%	10 23%	14 30%	18 34%	
SOMETIMES	25 25%	355 21%	1 11%	7 32%	5 38%	5 22%	7 25%	~	21 25%	~	~	~	~	3 30%	1 25%	24 26%	14 25%	11 26%	11 24%	14 26%	
USUALLY	14 14%	280 17%	2 22%	4 18%	2 15%	1 4%	5 18%	~	14 16%	~	~	~	~	~	1 25%	12 13%	8 15%	6 14%	8 17%	6 11%	
ALWAYS	28 28%	589 35%	1 11%	5 23%	2 15%	7 30%	11 39%	2 50%	24 28%	~	~	~	1 50%	1 100%	2 20%	2 50%	26 29%	12 22%	16 37%	13 28%	15 28%
#ALWAYS + USUALLY (NET)	42 42%	869 52%	3 33%	9 41%	4 31%	8 35%	16 57%	2 50%	38 45%	~	~	~	1 50%	1 100%	2 20%	3 75%	38 42%	20 36%	22 51%	21 46%	21 40%
TOP BOX SCORE	28 28%	589 35%	1 11%	5 23%	2 15%	7 30%	11 39%	2 50%	24 28%	~	~	~	1 50%	1 100%	2 20%	2 50%	26 29%	12 22%	16 37%	13 28%	15 28%
NOT ANSWERED	1	31				1			1							1	1		1		
VALID CASES	99	1659	9	22	13	23	28	4	85			2	1	10	4	91	55	43	46	53	
NUMBER OF RESPONDENTS	100	1690	9	22	13	24	28	4	86			2	1	10	4	92	56	43	47	53	
	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.

	UHAL 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	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE	
Q41 NEVER	56 57%	750 46%*	8 89%~	11 52%~	10 77%~	13 54%~	12 43%~	2 50%~	47 55%~	~	~	~	2 ~100%~	7 ~70%~	1 25%~	51 56%~	34 62%~	21 49%~	26 55%~	30 58%~	
SOMETIMES	24 24%	380 23%	~	9 43%~	2 15%~	5 21%~	8 29%~	~	21 25%~	~	~	~	~	2 ~20%~	1 25%~	23 25%~	13 24%~	11 26%~	12 26%~	12 23%~	
USUALLY	10 10%	243 15%	1 11%~	1 5%~	~	4 17%~	4 14%~	~	10 12%~	~	~	~	~	~	1 25%~	9 10%~	6 11%~	4 9%~	3 6%~	7 13%~	
ALWAYS	9 9%	267 16%*	~	~	1 8%~	2 8%~	4 14%~	2 50%~	7 8%~	~	~	~	~	1 ~100%~	1 10%~	1 25%~	8 9%~	2 4%~	7 16%~	6 13%~	3 6%~
#ALWAYS + USUALLY (NET)	19 19%	510 31%*	1 11%~	1 5%~	1 8%~	6 25%~	8 29%~	2 50%~	17 20%~	~	~	~	~	1 ~100%~	1 10%~	2 50%~	17 19%~	8 15%~	11 26%~	9 19%~	10 19%~
TOP BOX SCORE	9 9%	267 16%*	~	~	1 8%~	2 8%~	4 14%~	2 50%~	7 8%~	~	~	~	~	1 ~100%~	1 10%~	1 25%~	8 9%~	2 4%~	7 16%~	6 13%~	3 6%~
NOT ANSWERED	1	51	~	1	~	~	~	~	1	~	~	~	~	~	1	1	~	~	~	1	~
VALID CASES	99	1639	9	21	13	24	28	4	85	~	~	~	2	1	10	4	91	55	43	47	52
NUMBER OF RESPONDENTS	100	1690	9	22	13	24	28	4	86	~	~	~	2	1	10	4	92	56	43	47	53
	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.

	UHAL 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/ ILND	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	POOR	MALE	FE- MALE	
Q42 NEVER	54 56%	864 53%	8 89%~	11 50%~	8 62%~	11 50%~	14 52%~	2 50%~	44 53%~	~	~	~	2 ~100%~	8 ~ 80%~	1 25%~	49 55%~	32 59%~	21 50%~	24 51%~	30 60%~	
SOMETIMES	31 32%	340 21%*	~	10 45%~	4 31%~	5 23%~	10 37%~	2 50%~	28 34%~	~	~	~	~	2 ~ 20%~	1 25%~	30 34%~	16 30%~	15 36%~	18 38%~	13 26%~	
USUALLY	9 9%	207 13%	1 11%~	1 5%~	~	4 18%~	3 11%~	~	9 11%~	~	~	~	~	~	1 25%~	8 9%~	6 11%~	3 7%~	3 6%~	6 12%~	
ALWAYS	3 3%	215 13%*	~	~	1 8%~	2 9%~	~	~	2 2%~	~	~	~	1 ~100%~	~	1 25%~	2 2%~	~	3 7%~	2 4%~	1 2%~	
#ALWAYS + USUALLY (NET)	12 12%	422 26%*	1 11%~	1 5%~	1 8%~	6 27%~	3 11%~	~	11 13%~	~	~	~	1 ~100%~	~	2 50%~	10 11%~	6 11%~	6 14%~	5 11%~	7 14%~	
TOP BOX SCORE	3 3%	215 13%*	~	~	1 8%~	2 9%~	~	~	2 2%~	~	~	~	1 ~100%~	~	1 25%~	2 2%~	~	3 7%~	2 4%~	1 2%~	
NOT ANSWERED	3	64				2	1		3							3	2	1		3	
VALID CASES	97	1626	9	22	13	22	27	4	83				2	1	10	4	89	54	42	47	50
NUMBER OF RESPONDENTS	100	1690	9	22	13	24	28	4	86				2	1	10	4	92	56	43	47	53
	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

Q43 DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
UHAL 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- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE	
Q43 YES	71 21%	1180 23%	7 23%~	5 9%*	4 8%~	11 15%	32 33%*	11 42%~	59 21%		1 ~100%~	1 25%~	8 ~29%~	3 21%~	65 21%~	33 16%*	36 30%*	18 15%*	52 25%*	
NO	262 79%	3848 77%	24 77%~	53 91%*	44 92%~	61 85%	64 67%*	15 58%~	224 79%	1 ~100%~	3 ~75%~	6 100%~	20 71%~	11 79%~	239 79%~	175 84%*	83 70%*	103 85%*	158 75%*	
DON'T KNOW	2	55			2				2						2	2		1	1	
NOT ANSWERED	21	370	1		2	1	2		4				1		6	2	2	3	3	
VALID CASES	333	5028	31	58	48	72	96	26	283	1	1	4	6	28	14	304	208	119	121	210
NUMBER OF RESPONDENTS	356	5453	32	58	50	75	98	26	289	1	1	4	6	29	14	312	212	121	125	214
	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?

	UHAL 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	GOOD & POOR	MALE	FE- MALE				
Q44 YES	29 10%	460 10%	5 ~	7 9%	11 ~	5 10%	24 13%	24 21%	9%	~	~	~	~	~	3 11%	28 ~	10%~	11 6%*	17 17%*	10 9%	18 10%		
NO	274 90%	4154 90%	27 100%	50 ~	46 91%	60 100%	71 ~	19 90%	229 87%	19 79%	229 91%	1 ~	1 100%	4 ~	6 100%	24 ~	89%~	13 100%	250 90%	187 94%*	82 83%*	105 91%	168 90%
DON'T KNOW	34	459	4	3	2	8	16	1	33						1	1	31	14	20	8	26		
NOT ANSWERED	19	380	1		2			1	3						1		3		2	2	2		
VALID CASES	303	4614	27	55	46	67	82	24	253			1	1	4	6	27	13	278	198	99	115	186	
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%			1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%	



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

	UHAL 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- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q45 YES	97 29%	1742 35%*	1 3%~	10 17%*	9 19%~	16 22%	47 48%*	13 54%~	83 29%			1 ~100%~	2 50%~	2 33%~	6 21%~	7 50%~	89 29%~	53 25%	42 35%	38 31%	58 28%
NO	237 71%	3293 65%*	30 97%~	48 83%*	39 81%~	57 78%	51 52%*	11 46%~	200 71%		1 ~100%~	2 ~50%~	4 67%~	22 79%~	7 50%~	217 71%~	156 75%	77 65%	84 69%	152 72%	
NOT ANSWERED	22	417	1		2	2		2	6							6	3	2	3	4	
VALID CASES	334	5036	31	58	48	73	98	24	283		1	1	4	6	28	14	306	209	119	122	210
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%		1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLACK OR AFR-	ASIAN	NATV ILND	AMER ALSK	OTHER	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE-MALE		
Q46.1	YES	70 20%	1316 24%*	3 9%~	5 9%*	3 6%*	18 24%	30 31%*	10 38%~	56 19%		1 ~100%~	1 25%~	1 17%~	9 31%~	3 21%~	63 20%~	38 18%	31 26%	19 15%	50 23%*	
	NO	286 80%	4137 76%*	29 91%~	53 91%*	47 94%*	57 76%	68 69%*	16 62%~	233 81%		1 ~100%~	3 ~75%~	5 83%~	20 69%~	11 79%~	249 80%~	174 82%	90 74%	106 85%	164 77%*	
VALID CASES		356	5453	32	58	50	75	98	26	289		1	1	4	6	29	14	312	212	121	125	214
NUMBER OF RESPONDENTS		356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%		1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
UHAL 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	
Q46.2 YES	121 34%	1635 30%	5 16%~	2 3%*	15 30%	26 35%	54 55%*	18 69%~	95 33%	~	~	3 75%~	1 17%~	19 66%~	3 21%~	112 36%~	52 25%*	65 54%*	44 35%	76 36%
NO	235 66%	3818 70%	27 84%~	56 97%*	35 70%	49 65%	44 45%*	8 31%~	194 67%	1 ~100%	1 ~100%	1 25%~	5 83%~	10 34%~	11 79%~	200 64%~	160 75%*	56 46%*	81 65%	138 64%
VALID CASES	356	5453	32	58	50	75	98	26	289	1	1	4	6	29	14	312	212	121	125	214
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%	1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%

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

	UHAL 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	OTH R	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE			
Q46.3 YES	64 18%	862 16%	3 9%	8 14%	5 10%	17 23%	22 22%	8 31%	48 17%			3 75%	1 17%	10 34%	1 7%	60 19%	29 14%*	32 26%*	24 19%	39 18%	
NO	292 82%	4591 84%	29 91%	50 86%	45 90%	58 77%	76 78%	18 69%	241 83%		1 ~100%	1 ~100%	1 25%	5 83%	19 66%	13 93%	252 81%	183 86%*	89 74%*	101 81%	175 82%
VALID CASES	356	5453	32	58	50	75	98	26	289		1	1	4	6	29	14	312	212	121	125	214
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%		1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%

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	
	UHAL TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE
Q47.1 YES	103%	2815%*	~	~	~	~	4% 19%~	93%	~	~	~	~	~	13%~	~	103%	10.5%*	76%*	3%	2%
NO	34697%	517295%*	100%~	100%~	100%~	100%~	96% 81%~	28097%	~100%	~100%	~100%	~100%	~97%	~100%	~97%	~100%*	94%*	97%	98%	
VALID CASES	356	5453	32	58	50	75	98 26	289	1	1	4	6	29	14	312	212	121	125	214	
NUMBER OF RESPONDENTS	356	5453	32	58	50	75	98 26	289	1	1	4	6	29	14	312	212	121	125	214	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	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	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q47.2	UHAL TOT ADLT	18	25	35	45	55	65													
	OHP TOT ADLT	24	34	44	54	64	OVER	WHTE	AMER	IAN	ILND	NATV	OTHR	TI	HIS- IC	HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE
YES	13 4%	284 5%	~	~	~	2 3%	6 6%	4 15%	11 4%	~	~	~	~	1 3%	13 ~	1 0.5%*	12 10%*	4 3%	8 4%	
NO	343 96%	5169 95%	100%	100%	100%	97%	94%	85%	96%	~100%	~100%	~100%	~100%	97%	~100%	~96%	~100%*	90%*	97%	96%
VALID CASES	356	5453	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%	1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%

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	
		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/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q47.3	UHAL TOT ADLT	18	25	35	45	55	65														
	OHP TOT ADLT																				
YES	19 5%		1 ~ 2%		1 ~ 1%*	10 23%*	6 ~ 23%*	18 6%*						1 3%*	1 7%*	18 6%*	5 2%*	14 12%*	5 4%	13 6%	
NO	337 95%	5232 96%	32 ~ 100%	57 ~ 98%	50 ~ 100%	74 ~ 99%*	88 ~ 90%*	20 ~ 77%*	271 94%*	1 ~ 100%	1 ~ 100%	4 ~ 100%	6 ~ 100%	28 ~ 97%*	13 93%*	294 94%*	207 98%*	107 88%*	120 96%	201 94%	
VALID CASES	356	5453	32	58	50	75	98	26	289	1	1	4	6	29	14	312	212	121	125	214	
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%	1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%	

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

	UHAL 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	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q47.4 YES	63 18%	1002 18%		5 ~ 9%*	6 12%	14 19%	26 27%*	11 42%~	53 18%			1 ~ 25%~	1 17%~	5 17%~	4 29%~	57 18%~	25 12%*	36 30%*	17 14%	45 21%*	
NO	293 82%	4451 82%	32 100%~	53 91%*	44 88%	61 81%	72 73%*	15 58%~	236 82%		1 ~100%~	1 ~100%~	3 75%~	5 83%~	24 83%~	10 71%~	255 82%~	187 88%*	85 70%*	108 86%	169 79%*
VALID CASES	356	5453	32	58	50	75	98	26	289		1	1	4	6	29	14	312	212	121	125	214
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%		1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%



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

	UHAL 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			
Q48 YES	104 31%	1692 34%	4 13%	15 26%	17 34%	27 36%	37 39%	4 17%	91 32%	~	~	~	1 25%	1 17%	8 28%	2 14%	99 32%	39 18%*	60 52%*	34 27%	70 33%		
NO	231 69%	3335 66%	28 88%	43 74%	33 66%	48 64%	59 61%	20 83%	193 68%	~100%	~100%	~	1 75%	1 83%	3 72%	5 86%	21 68%	12 82%*	210 48%*	172 82%*	56 48%*	90 73%	141 67%
NOT ANSWERED	21	426					2	2	5								3	1	5	1	3		
VALID CASES	335	5027	32	58	50	75	96	24	284		1	1	4	6	29	14	309	211	116	124	211		
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	96 100%	24 100%	289 100%		1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%		

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

	UHAL 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	83 85%	1394 85%	4 100%	10 67%	16 100%	19 83%	30 83%	4 100%	71 84%	~	~	~	1 100%	1 100%	7 88%	2 100%	78 84%	32 84%	46 84%	31 91%	52 81%
NO	15 15%	240 15%	~	5 33%	~	4 17%	6 17%	~	14 16%	~	~	~	~	~	1 13%	~	15 16%	6 16%	9 16%	3 9%	12 19%
NOT ANSWERED	6	62			1	4	1		6							6	1	5		6	
VALID CASES	98	1633	4	15	16	23	36	4	85				1	1	8	2	93	38	55	34	64
NUMBER OF RESPONDENTS	104	1695	4	15	17	27	37	4	91				1	1	8	2	99	39	60	34	70
	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q48 = YES]

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
UHAL 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		
Q50 YES	225 67%	3255 65%	12 38%~	29 50%*	31 65%~	50 68%	79 81%*	24 96%~	190 67%	1 ~100%	1 ~100%	3 75%~	5 83%~	20 69%~	10 71%~	206 67%~	114 54%*	104 89%*	78 62%	147 70%	
NO	110 33%	1781 35%	20 63%~	29 50%*	17 35%~	24 32%	19 19%*	1 4%~	94 33%	~	~	1 ~25%	1 17%~	9 31%~	4 29%~	102 33%~	96 46%*	13 11%*	47 38%	63 30%	
NOT ANSWERED	21	417			2	1	1	5							4	2	4		4		
VALID CASES	335	5036	32	58	48	74	98	25	284	1	1	4	6	29	14	308	210	117	125	210	
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%	1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%	

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

	UHAL 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/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE		
Q51 YES	207 95%	2975 94%	12 100%	26 93%	30 97%	47 96%	73 96%	19 90%	173 95%	1 ~100%	1 ~100%	3 ~100%	5 ~100%	20 ~100%	10 ~100%	189 95%	101 94%	99 97%	72 99%*	135 94%*
NO	10 5%	176 6%	~	2 7%	1 3%	2 4%	3 4%	2 10%	10 5%	~	~	~	~	~	~	10 5%	7 6%	3 3%	1 1%*	9 6%*
NOT ANSWERED	8	127		1		1	3	3	7							7	6	2	5	3
VALID CASES	217	3151	12	28	31	49	76	21	183	1	1	3	5	20	10	199	108	102	73	144
NUMBER OF RESPONDENTS	225 100%	3278 100%	12 100%	29 100%	31 100%	50 100%	79 100%	24 100%	190 100%	1 100%	1 100%	3 100%	5 100%	20 100%	10 100%	206 100%	114 100%	104 100%	78 100%	147 100%

[ASKED IF Q50 = YES]

NQ52 WHAT IS YOUR AGE?

	AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
	UHAL 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- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
NQ52																				
18 TO 24	35 10%	547 10%	32 100%~	~	~	~	~	26 9%	~	1 ~100%~	1 ~	1 ~	4 14%~	1 7%~	30 10%~	26 12%*	5 4%*	13 10%	19 9%	
25 TO 34	64 18%	870 16%	~100%~	58 ~	~	~	~	52 18%	~	~	1 ~	1 ~	3 10%~	4 29%~	54 17%~	49 23%*	9 7%*	19 15%	39 18%	
35 TO 44	50 14%	802 15%	~	50 ~100%~	~	~	~	41 14%	~	~	2 ~	2 ~	4 14%~	1 7%~	47 15%~	28 13%	20 17%	20 16%	30 14%	
45 TO 54	77 22%	1153 21%	~	~	75 ~100%~	~	~	61 21%	1 ~100%~	1 ~	1 ~	9 31%~	3 21%~	71 23%~	52 25%	23 19%	30 24%	45 21%		
55 TO 64	104 29%	1412 26%	~	~	~	98 ~100%~	~	84 29%	~	~	~	1 ~	8 28%~	5 36%~	86 28%~	43 20%*	53 44%*	36 29%	62 29%	
65 TO 74	17 5%	405 7%*	~	~	~	~	17 65%~	16 6%*	~	~	~	~	1 3%~	~	16 5%~	10 5%	6 5%	4 3%	13 6%	
75 OR OLDER	9 3%	264 5%*	~	~	~	~	9 35%~	9 3%*	~	~	~	~	~	8 3%~	4 2%	5 4%	3 2%	6 3%		
VALID CASES	356	5453	32	58	50	75	98	26	289	1	1	4	6	29	14	312	212	121	125	214
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%	1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%

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

NQ53 ARE YOU MALE OR FEMALE?

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
UHAL 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- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NQ53																				
MALE	132 37%	2159 40%	13 41%~	19 33%	20 40%	30 40%	36 37%	7 27%~	101 35%	1 ~100%~	3 ~75%~	3 50%~	14 48%~	5 36%~	117 37%~	79 37%	45 37%	125 100%~	~	
FEMALE	224 63%	3294 60%	19 59%~	39 67%	30 60%	45 60%	62 63%	19 73%~	188 65%	~	1 ~100%~	1 25%~	3 50%~	15 52%~	9 64%~	195 63%~	133 63%	76 63%	214 ~100%~	
VALID CASES	356	5453	32	58	50	75	98	26	289	1	1	4	6	29	14	312	212	121	125	214
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%	1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%

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

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
	UHAL TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-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
Q54																						
8TH GRADE OR LESS	16 5%	312 6%	1 3%	~	~	4 5%	4 4%	6 24%	15 5%	~	~	~	~	~	~	2 14%	13 4%	4 2%*	11 9%*	8 7%	7 3%	
SOME HIGH SCHOOL BUT DID NOT GRADUATE	49 15%	755 15%	3 9%	8 14%	9 18%	8 11%	16 16%	5 20%	42 15%	~	~100%	1 25%	1 33%	2 33%	3 10%	3 21%	43 14%	28 13%	19 16%	23 19%	26 12%	
HIGH SCHOOL GRADUATE OR GED	125 37%	1615 32%	17 53%	23 40%	14 29%	27 36%	37 38%	7 28%	107 37%	~	~	~	~	1 17%	13 45%	5 36%	116 37%	77 37%	45 37%	57 46%*	68 32%*	
SOME COLLEGE OR 2-YEAR DEGREE	127 38%	1732 34%	10 31%	22 38%	22 45%	31 41%	36 37%	6 24%	106 37%	~100%	~	1 75%	3 33%	2 33%	12 41%	4 29%	121 39%	83 40%	43 36%	31 25%*	96 45%*	
4-YEAR COLLEGE GRADUATE	11 3%	415 8%*	1 3%	3 5%	2 4%	3 4%	2 2%	~	10 3%	~	~	~	~	~	1 3%	~	11 4%	10 5%*	1 0.8%*	3 2%	8 4%	
MORE THAN 4-YEAR COLLEGE DEGREE	9 3%	214 4%	~	2 3%	2 4%	2 3%	2 2%	1 4%	8 3%	~	~	~	~	1 17%	~	~	8 3%	7 3%	1 0.8%	1 0.8%	8 4%	
NOT ANSWERED	19	410			1		1	1	1									3	1	2	1	
VALID CASES	337	5043	32	58	49	75	97	25	288	1	1	4	6	29	14	312	209	120	123	213		
NUMBER OF RESPONDENTS	356	5453	32	58	50	75	98	26	289	1	1	4	6	29	14	312	212	121	125	214		
	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?

	UHAL 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
Q55																				
YES HISPANIC OR LATINO	14	610	1	4	1	3	5	6					3	1	14		12	1	5	9
	4%	12%*	3%~	7%	2%~	4%	6%	2%~	~	~	~	~	60%~	4%~	100%~	~	6%*	0.9%*	4%	4%
NO NOT HISPANIC OR LATINO	312	4367	30	54	47	71	85	24	275	1	1	4	2	26	312	190	116	116	195	
	96%	88%*	97%~	93%	98%~	96%	94%	100%~	98%~	~100%~	~100%~	~100%~	40%~	96%~	~100%~	94%*	99%*	96%	96%	
NOT ANSWERED	30	476	1		2	1	8	2	8				1	2		10	4	4	10	
VALID CASES	326	4977	31	58	48	74	90	24	281	1	1	4	5	27	14	312	202	117	121	204
NUMBER OF RESPONDENTS	356	5453	32	58	50	75	98	26	289	1	1	4	6	29	14	312	212	121	125	214
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%



Q56.1 WHAT IS YOUR RACE? RESPONSE: WHITE

		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/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q56.1	YES	317 89%	4262 78%*	29 91%~	55 95%*	45 90%	70 93%	91 93%	26 100%~	289 100%~	~	~	~	~	~	28 97%~	7 50%~	300 96%~	195 92%*	115 95%*	114 91%	202 94%*
	NO	39 11%	1191 22%*	3 9%~	3 5%*	5 10%	5 7%	7 7%	~	~	1 ~100%~	1 ~100%~	4 ~100%~	6 ~100%~	1 3%~	7 50%~	12 4%~	17 8%*	6 5%*	11 9%	12 6%*	
VALID CASES		356	5453	32	58	50	75	98	26	289	1	1	4	6	29	14	312	212	121	125	214	
NUMBER OF RESPONDENTS		356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%	1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%	

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	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	MALE	FE-MALE	
Q56.2	UHAL 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	2	133	1				1							2	2	1			2	
	0.6%	2%*	3%~	~	~	~	1%	~	~	~	~	~	~	7%~	~0.6%	~0.5%	~	~	~0.9%	
NO	354	5320	31	58	50	75	97	26	289	1	1	4	6	27	14	310	211	121	125	212
	99%	98%*	97%~	100%~	100%~	100%~	99%	100%~	100%~	~100%	~100%	~100%	~100%	~93%	~100%	~99%	~100%	100%	~100%	~99%
VALID CASES	356	5453	32	58	50	75	98	26	289	1	1	4	6	29	14	312	212	121	125	214
NUMBER OF RESPONDENTS	356	5453	32	58	50	75	98	26	289	1	1	4	6	29	14	312	212	121	125	214
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q56.3 WHAT IS YOUR RACE? RESPONSE: ASIAN

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	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	UHAL TOT ADLT	18	25	35	45	55	65													
	OHP TOT ADLT	24	34	44	54	64	OVER	WHTE	AMER	IAN	ILND	NATV	OTHR	TI	HIS- IC	HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE
YES	2	225			1	1				1				1		2	1	1	1	1
	0.6%	4%*	~	~	2%	1%	~	~	~100%	~	~	~	~	3%	~	~0.6%	~0.5%	0.8%	0.8%	0.5%
NO	354	5228	32	58	49	74	98	26	289		1	4	6	28	14	310	211	120	124	213
	99%	96%*	100%	100%	98%	99%	100%	100%	100%	~	~100%	~100%	~100%	97%	~100%	~99%	~100%	99%	99%	100%
VALID CASES	356	5453	32	58	50	75	98	26	289	1	1	4	6	29	14	312	212	121	125	214
NUMBER OF RESPONDENTS	356	5453	32	58	50	75	98	26	289	1	1	4	6	29	14	312	212	121	125	214
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	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	FE- MALE	MALE		
Q56.4	UHAL TOT ADLT	4	41	1	1	2	~	~	~	1	~	3	~	4	3	1	2	2			
YES	OHP TOT ADLT	1%	0.7%	3%	2%	~	~	~	~	~100%	~	~	10%	~	1%	0.8%	2%	0.9%			
NO	UHAL TOT ADLT	352	5412	31	57	50	73	98	26	289	1	4	6	26	14	308	209	120	123	212	
	OHP TOT ADLT	99%	99%	97%	98%	100%	97%	100%	100%	100%	~100%	~	100%	90%	100%	99%	99%	98%	99%		
VALID CASES	UHAL TOT ADLT	356	5453	32	58	50	75	98	26	289	1	1	4	6	29	14	312	212	121	125	214
NUMBER OF RESPONDENTS	OHP TOT ADLT	356	5453	32	58	50	75	98	26	289	1	1	4	6	29	14	312	212	121	125	214
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
UHAL 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	GOOD & POOR	FE- MALE	MALE	
Q56.5 YES	27 8%	314 6%	3 9%	3 5%	5 10%	8 11%	7 7%	1 4%	~	~	~	~	4 ~100%	23 ~79%	1 7%	24 8%	15 7%	11 9%	15 12%*	12 6%
NO	329 92%	5139 94%	29 91%	55 95%	45 90%	67 89%	91 93%	25 96%	289 ~100%	1 ~100%	1 ~100%	6 ~100%	6 21%	13 93%	288 92%	197 93%	110 91%	110 88%*	202 94%	
VALID CASES	356	5453	32	58	50	75	98	26	289	1	1	4	6	29	14	312	212	121	125	214
NUMBER OF RESPONDENTS	356 100%	5453 100%	32 100%	58 100%	50 100%	75 100%	98 100%	26 100%	289 100%	1 100%	1 100%	4 100%	6 100%	29 100%	14 100%	312 100%	212 100%	121 100%	125 100%	214 100%

Q56.6 WHAT IS YOUR RACE? RESPONSE: OTHER

		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- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q56.6	UHAL TOT ADLT	18	25	35	45	55	65													
YES	OHP TOT ADLT	3	1	3	3	2						6	6	4	7	8	4	5	7	
		3%	5%*	9%~	2%	6%	4%	2%	~	~	~	~	~100%~	21%~	29%~	2%~	4%	3%	4%	3%
NO	OHP TOT ADLT	29	57	47	72	96	26	289	1	1	4	23	10	305	204	117	120	207		
		97%	95%*	91%~	98%	94%	96%	98%	100%~	100%~	~	79%~	71%~	98%~	96%	97%	96%	97%		
VALID CASES	OHP TOT ADLT	32	58	50	75	98	26	289	1	1	4	6	29	14	312	212	121	125	214	
NUMBER OF RESPONDENTS	OHP TOT ADLT	32	58	50	75	98	26	289	1	1	4	6	29	14	312	212	121	125	214	
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q57 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q57																					
YES	39 14%	652 16%	4 17%~	6 14%~	3 8%~	8 12%	14 16%	4 17%~	32 13%~	~	~	~	1 25%~	1 20%~	1 7%~	2 17%~	33 13%~	21 12%	17 17%	25 24%*	14 8%*
NO	243 86%	3488 84%	19 83%~	37 86%~	35 92%~	57 88%	75 84%	19 83%~	217 87%~	1 ~100%~			3 ~ 75%~	4 80%~	14 93%~	10 83%~	227 87%~	153 88%	83 83%	78 76%*	164 92%*
NOT ANSWERED	4	78						2	2							1		2	1	1	
VALID CASES	282	4141	23	43	38	65	89	23	249	1			4	5	15	12	260	174	100	103	178
NUMBER OF RESPONDENTS	286	4219	23	43	38	65	89	25	251	1			4	5	15	12	261	174	102	104	179
	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		
		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	
Q58.1	UHAL TOT ADLT	18	25	35	45	55	65														
YES	OHP TOT ADLT	21	253	3	2	4	10	2	19				1		2	17	9	12	14	7	
		54%	47%	~50%	67%	50%	71%	50%	59%	~	~	~	~100%	~100%	52%	43%	71%	56%	50%		
NO	OHP TOT ADLT	18	289	4	3	1	4	4	2	13			1	1	16	12	5	11	7		
		46%	53%	~100%	50%	33%	50%	29%	50%	41%	~	~	~100%	~100%	~48%	57%	29%	44%	50%		
VALID CASES	OHP TOT ADLT	39	542	4	6	3	8	14	4	32			1	1	1	2	33	21	17	25	14
NUMBER OF RESPONDENTS		39	542	4	6	3	8	14	4	32			1	1	1	2	33	21	17	25	14
		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]



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

		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 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
Q58.2																				
YES	16 41%	188 35%	2 50%	2 33%	2 67%	1 13%	7 50%	2 50%	14 44%	~	~	~	1 100%	1 100%	1 50%	14 42%	7 33%	9 53%	11 44%	5 36%
NO	23 59%	354 65%	2 50%	4 67%	1 33%	7 88%	7 50%	2 50%	18 56%	~	~	1 100%	~	~	1 50%	19 58%	14 67%	8 47%	14 56%	9 64%
VALID CASES	39	542	4	6	3	8	14	4	32			1	1	1	2	33	21	17	25	14
NUMBER OF RESPONDENTS	39 100%	542 100%	4 100%	6 100%	3 100%	8 100%	14 100%	4 100%	32 100%			1 100%	1 100%	1 100%	2 100%	33 100%	21 100%	17 100%	25 100%	14 100%

[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			
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE			
Q58.3	YES	15 38%	197 36%	2 50%	3 50%	1 33%	4 50%	4 29%	1 25%	12 38%	~	~	~	1 100%	~	~	12 36%	12 57%	2 12%	9 36%	6 43%	
	NO	24 62%	345 64%	2 50%	3 50%	2 67%	4 50%	10 71%	3 75%	20 63%	~	~	~	1 100%	1 100%	2 100%	21 64%	9 43%	15 88%	16 64%	8 57%	
VALID CASES		39	542	4	6	3	8	14	4	32				1	1	1	2	33	21	17	25	14
NUMBER OF RESPONDENTS		39 100%	542 100%	4 100%	6 100%	3 100%	8 100%	14 100%	4 100%	32 100%				1 100%	1 100%	1 100%	2 100%	33 100%	21 100%	17 100%	25 100%	14 100%

[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	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	MALE	FE- MALE	
Q58.4	YES	81	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
		15%																		
	NO	39	4	6	3	8	14	4	32		1	1	1	2	33	21	17	25	14	
		100%	85%	100%	100%	100%	100%	100%	100%	~	100%	100%	100%	100%	100%	100%	100%	100%	100%	
VALID CASES		39	4	6	3	8	14	4	32		1	1	1	2	33	21	17	25	14	
NUMBER OF RESPONDENTS		39	4	6	3	8	14	4	32		1	1	1	2	33	21	17	25	14	
		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	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
Q58.5	YES	3	44			1	1	1	2							3	1	2	1	2
		8%	8%	~	~	~ 13%	7%	25%	6%	~	~	~	~	~	~	9%	5%	12%	4%	14%
	NO	36	498	4	6	3	7	13	3	30		1	1	1	2	30	20	15	24	12
		92%	92%	~100%	~100%	~100%	88%	93%	75%	94%	~	~100%	~100%	~100%	~100%	91%	95%	88%	96%	86%
	VALID CASES	39	542	4	6	3	8	14	4	32		1	1	1	2	33	21	17	25	14
	NUMBER OF RESPONDENTS	39	542	4	6	3	8	14	4	32		1	1	1	2	33	21	17	25	14
		100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

NQ13 RATING OF ALL HEALTH CARE

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	UHAL 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	
NQ13 0-6	64 25%	759 20%	2 13%	13 31%	10 26%	14 26%	20 26%	5 24%	55 26%	1 ~100%	1 ~33%	1 20%	5 26%	1 9%	62 27%	25 17%*	37 37%*	19 23%	45 28%	
7-8	78 31%	1267 34%	5 31%	7 17%	18 47%	21 40%	24 31%	2 10%	68 32%	~	1 ~100%	1 33%	2 40%	4 21%	1 9%	75 33%	42 29%	34 34%	25 30%	52 32%
9-10	109 43%	1714 46%	9 56%	22 52%	10 26%	18 34%	33 43%	14 67%	88 42%	~	~	1 ~33%	2 40%	10 53%	9 82%	93 40%	76 53%*	28 28%*	40 48%	66 40%
VALID CASES	251	3741	16	42	38	53	77	21	211	1	1	3	5	19	11	230	143	99	84	163
NUMBER OF RESPONDENTS	251 100%	3741 100%	16 100%	42 100%	38 100%	53 100%	77 100%	21 100%	211 100%	1	1	3	5	19	11 100%	230 100%	143 100%	99 100%	84 100%	163 100%
MEAN	2.18	2.26	2.44	2.21	2.00	2.08	2.17	2.43	2.16	1.00	2.00	2.00	2.20	2.26	2.73	2.13	2.36	1.91	2.25	2.13
p stat_(*=Sig @ p<=.05)	.123		~	~	~.297	.893	~	~	~	~	~	~	~	~	~	~.000*	.000*	.328	.181	

[ASKED IF Q7 >= 1 TIME]

NQ23 RATING OF PERSONAL DOCTOR

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	UHAL 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	MALE	FE- MALE
NQ23 0-6	50 20%	617 16%	2 9%	9 21%	7 22%	14 24%	14 19%	3 14%	41 19%	~	~	1 33%	5 23%	~	47 20%	25 17%	24 24%	13 15%	36 22%	
7-8	61 24%	999 25%	8 35%	9 21%	7 22%	13 22%	22 30%	1 5%	46 21%	1 100%	1 100%	1 33%	3 75%	7 32%	1 14%	55 24%	35 23%	25 25%	29 34%*	31 19%*
9-10	144 56%	2342 59%	13 57%	25 58%	18 56%	31 53%	38 51%	18 82%	128 60%	~	~	1 33%	1 25%	10 45%	6 86%	132 56%	89 60%	52 51%	44 51%	99 60%
VALID CASES	255	3959	23	43	32	58	74	22	215	1	1	3	4	22	7	234	149	101	86	166
NUMBER OF RESPONDENTS	255 100%	3959 100%	23 100%	43 100%	32 100%	58 100%	74 100%	22 100%	215 100%	1 100%	1 100%	3 100%	4 100%	22 100%	7 100%	234 100%	149 100%	101 100%	86 100%	166 100%
MEAN	2.37	2.44	2.48	2.37	2.34	2.29	2.32	2.68	2.40	2.00	2.00	2.00	2.25	2.23	2.86	2.36	2.43	2.28	2.36	2.38
p stat_(*=Sig @ p<=.05)		.155	~	~	~.411	.566	~	~	~	~	~	~	~	~	~	~.147	.143	.904	.765	

[ASKED IF Q15 = YES]

NQ27 RATING OF SPECIALIST SEEN MOST OFTEN

	UHAL TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
NQ27 0-6	13 11%	257 14%	3 ~ 23%	4 27%	4 15%	2 5%	8 ~ 8%	~	~	~	~	2 ~ 100%	3 33%	1 33%	10 9%	9 15%	4 8%	3 9%	10 13%	
7-8	32 28%	429 23%	4 57%	2 15%	6 40%	8 31%	11 27%	1 8%	28 29%	~	~	~	~	2 ~ 22%	1 33%	30 28%	16 27%	14 26%	11 31%	21 27%
9-10	69 61%	1164 63%	3 43%	8 62%	5 33%	14 54%	28 68%	11 92%	61 63%	~	~	1 ~ 100%	4 ~ 44%	1 33%	66 62%	34 58%	35 66%	21 60%	48 61%	
VALID CASES	114	1850	7	13	15	26	41	12	97			1	2	9	3	106	59	53	35	79
NUMBER OF RESPONDENTS	114 100%	1850 100%	7 100%	13 100%	15 100%	26 100%	41 100%	12 100%	97 100%			1 100%	2 100%	9 100%	3 100%	106 100%	59 100%	53 100%	35 100%	79 100%
MEAN	2.49	2.49	2.43	2.38	2.07	2.38	2.63	2.92	2.55			3.00	1.00	2.11	2.00	2.53	2.42	2.58	2.51	2.48
p stat_(*=Sig @ p<=.05)		.987	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.287	.184	~	~

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

NQ35 RATING OF HEALTH PLAN

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
UHAL 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 PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
NQ35 0-6	103 33%	1116 23%*	10 34%~	14 26%	18 38%~	25 36%	31 34%	4 18%~	87 33%~	~	~	~	2 50%~	2 40%~	10 36%~	3 23%~	96 34%~	48 24%*	51 47%*	37 33%	65 33%
7-8	97 31%	1551 32%	8 28%~	18 34%	15 32%~	23 33%	28 31%	5 23%~	82 31%~	~100%	~100%	~25%	~20%	~36%	3 23%~	92 32%~	66 34%	29 27%	36 32%	61 31%	
9-10	114 36%	2193 45%*	11 38%~	21 40%	14 30%~	22 31%	13 34%	97 59%~	97 36%~	~	~	~	1 25%~	2 40%~	8 29%~	7 54%~	98 34%~	83 42%*	29 27%*	39 35%	73 37%
VALID CASES	314	4860	29	53	47	70	90	22	266	1	1	4	5	28	13	286	197	109	112	199	
NUMBER OF RESPONDENTS	314 100%	4860 100%	29 100%	53 100%	47 100%	70 100%	90 100%	22 100%	266 100%	1 100%	1 100%	4 100%	5 100%	28 100%	13 100%	286 100%	197 100%	109 100%	112 100%	199 100%	
MEAN	2.04	2.22	2.03	2.13	1.91	1.96	2.00	2.41	2.04	2.00	2.00	1.75	2.00	1.93	2.31	2.01	2.18	1.80	2.02	2.04	
p stat_(*=Sig @ p<=.05)		.000*	~.344		~.373	.638		~	~	~	~	~	~	~	~	~	~.000*	.000*	.786	.885	



GETTING NEEDED CARE

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
	UHAL 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- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NPRBSEE4 NQ25	2.25	2.25	2.13	2.23	1.65	2.24	2.40	2.69	2.30			2.00	1.00	1.90	3.00	2.26	2.26	2.24	2.26	
p stat_(*=Sig @ p<=.05)	1.00		~	~	~	~	~	~	~	~	~	~	~	~	~	~	.956	.869	~	~
NCARNES4 NQ14	2.25	2.30	2.62	2.24	2.03	2.13	2.17	2.77	2.23	2.00	3.00	2.00	1.80	2.21	2.55	2.21	2.35	2.07	2.29	2.21
p stat_(*=Sig @ p<=.05)	.268		~	~	~.240	.304	~	~	~	~	~	~	~	~	~	~	.015*	.004*	.575	.285
COMPOSITE	2.25	2.28	2.37	2.23	1.84	2.19	2.29	2.73	2.27	x 2.00	3.00	2.00	1.40	2.06	2.77	2.24	2.30	2.16	2.26	2.23
p stat_(*=Sig @ p<=.05)	.799		~	~	~.764	.834	~	~	~	~	~	~	~	~	~	~	.564	.476	.926	.824

GETTING CARE QUICKLY

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	UHAL 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- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE		
NCARSN4 NQ4	2.31	2.38	2.25	2.13	2.45	2.19	2.39	2.57	2.33			2.00	2.00	2.27	2.33	2.30	2.41	2.19	2.40	2.27	
p stat_(*=Sig @ p<=.05)		.294	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.135	.130	~	~	
NAPGET4 NQ6	2.33	2.32	2.18	2.08	2.32	2.20	2.44	2.81	2.33	2.00	1.00	3.00	2.40	2.15	2.50	2.32	2.25	2.40	2.33	2.31	
p stat_(*=Sig @ p<=.05)		.917	~	~	~	~	.207	~	~	~	~	~	~	~	~	~	.092	.270	.968	.589	
COMPOSITE	2.32	2.35	2.21	2.10	2.39	2.19	2.42	2.69	2.33	x	2.00	1.00	2.50	2.20	2.21	2.42	2.31	2.33	2.30	2.36	2.29
p stat_(*=Sig @ p<=.05)		.768	~	~	~	.554	.593	~	~	~	~	~	~	~	~	~	.887	.875	.777	.719	

HOW WELL DOCTORS COMMUNICATE

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	UHAL 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	GOOD & POOR	FE- MALE	FE- MALE
NDREXPL4 NQ17	2.56	2.62	2.43	2.71	2.52	2.54	2.52	2.55	2.58	1.00	1.00	2.67	2.50	2.33	2.71	2.55	2.67	2.39	2.47	2.59
p stat_(*=Sig @ p<=.05)		.139	~	~	~	~	.492	~	~	~	~	~	~	~	~	~	.006*	.001*	.160	.314
NDRLSTN4 NQ18	2.47	2.59	2.43	2.45	2.23	2.52	2.45	2.75	2.47	2.00	3.00	2.00	2.25	2.40	2.71	2.45	2.55	2.34	2.48	2.45
p stat_(*=Sig @ p<=.05)		.006*	~	~	~	~	.768	~	~	~	~	~	~	~	~	~	.068	.031*	.868	.558
NDRESPU4 NQ19	2.58	2.65	2.64	2.61	2.52	2.55	2.48	2.89	2.57	2.00	3.00	2.33	2.50	2.53	2.86	2.56	2.64	2.49	2.60	2.55
p stat_(*=Sig @ p<=.05)		.110	~	~	~	~	.161	~	~	~	~	~	~	~	~	~	.127	.127	.675	.438
NDRTMEN4 NQ20	2.40	2.49	2.29	2.37	2.23	2.46	2.38	2.65	2.41	2.00	3.00	2.00	2.00	2.27	2.71	2.38	2.48	2.27	2.40	2.39
p stat_(*=Sig @ p<=.05)		.059	~	~	~	~	.870	~	~	~	~	~	~	~	~	~	.060	.029*	1.00	.876
COMPOSITE	2.50	2.59	2.45	2.53	2.37	2.52	2.46	2.71	2.51	x 1.75	2.50	2.25	2.31	2.38	2.75	2.49	2.59	2.37	2.49	2.50
p stat_(*=Sig @ p<=.05)		.606	~	~	~	~	.864	~	~	~	~	~	~	~	~	~	.578	.520	.957	.968

CUSTOMER SERVICE

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
	UHAL 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- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE		
NPBCLCS4 NQ31	2.13	2.23	2.40	2.08	2.11	2.28	1.85	2.33	2.07			2.67	2.00	2.14	2.50	2.10	2.23	1.97	2.05	2.15	
p stat_(*=Sig @ p<=.05)		.311	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCSRESP NQ32	2.59	2.63	2.40	2.67	2.33	2.67	2.60	2.67	2.58			2.67	3.00	2.43	3.00	2.57	2.69	2.45	2.55	2.60	
p stat_(*=Sig @ p<=.05)		.636	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.36	2.43	2.40	2.38	2.22	2.47	2.22	2.50	2.32	x	x	x	2.67	2.50	2.29	2.75	2.34	2.46	2.21	2.30	2.38
p stat_(*=Sig @ p<=.05)		.767	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

SHARED DECISION MAKING

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
	UHAL 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	OTHR	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NNRXWHY NQ10	2.82	2.84	3.00	2.91	3.00	2.70	2.78	2.43	2.84		3.00	3.00	2.33	2.80	2.50	2.83	2.78	2.89	2.73	2.85	
p stat_(*=Sig @ p<=.05)	.662		~	~	~	~	~	~	~	~	~	~	~	~	~	~	.399	.211	~	~	
NNRXWYNT NQ11	2.27	2.45	2.75	2.64	1.76	2.27	2.24	1.86	2.23		3.00	3.00	1.67	2.40	2.00	2.29	2.33	2.15	2.24	2.25	
p stat_(*=Sig @ p<=.05)	.020*		~	~	~	~	~	~	~	~	~	~	~	~	~	~	.392	.242	~	~	
NRXBST NQ12	2.38	2.50	3.00	2.55	2.05	2.33	2.37	2.14	2.43		3.00	3.00	2.33	1.60	3.00	2.36	2.47	2.24	2.35	2.37	
p stat_(*=Sig @ p<=.05)	.112		~	~	~	~	~	~	~	~	~	~	~	~	~	~	.210	.139	~	~	
COMPOSITE	2.49	2.60	2.92	2.70	2.27	2.43	2.47	2.14	2.50	x	x	3.00	3.00	2.11	2.27	2.50	2.49	2.53	2.42	2.44	2.49
p stat_(*=Sig @ p<=.05)	.681		~	~	~	~	~	~	~	~	~	~	~	~	~	~	.864	.836	~	~	

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	UHAL TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- TI	OTH	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE	
PRBSEE4 Q25	78%	78%	88%	77%	47%	76%	86%	92%	80%			100%	0%	60%	100%	78%	82%	72%	76%	79%	
CARNES4 Q14	80%	82%	88%	81%	76%	77%	74%	100%		100%	100%	100%	40%	74%	82%	79%	86%	70%	77%	80%	
AVERAGE	78.78	80.02	87.50	78.94	61.69	76.39	79.87	96.15	79.95	x	x	x	100.0	40.00	66.84	90.91	78.68	84.14	71.06	76.53	79.60

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	UHAL TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- TI	OTH	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE	
CARSN4 Q4	79%	83%	75%	67%	91%	70%	84%	100%				100%	50%	73%	67%	80%	83%	76%	81%	78%	
APGET4 Q6	81%	80%	71%	72%	79%	83%	82%	100%		100%	0%	100%	80%	69%	83%	81%	76%	87%	80%	81%	
AVERAGE	79.95	81.23	72.79	69.44	85.16	76.44	83.23	100.0	81.70	x	x	x	x	80.00	70.98	75.00	80.28	79.51	81.22	80.85	79.53

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	UHAL 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- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE			
DREXPL4 Q17	91%	92%	79%	95%	87%	90%	94%	90%	92%		0%	0%	100%	100%	80%	100%	91%	93%	87%	90%	91%
DRLSTN4 Q18	86%	90%	86%	82%	77%	90%	88%	95%	86%		100%	100%	100%	100%	80%	100%	86%	87%	85%	89%	85%
DRESPU4 Q19	90%	91%	93%	89%	94%	87%	89%	94%	89%		100%	100%	100%	100%	93%	100%	90%	91%	90%	95%	88%
DRTMEN4 Q20	85%	88%	79%	79%	81%	88%	85%	100%	86%		100%	100%	67%	75%	73%	100%	84%	87%	81%	86%	84%
AVERAGE	88.1	90.4	83.9	86.2	84.7	88.5	88.8	94.9	88.0	x	x	x	91.7	93.8	81.7	100	87.5	89.8	85.7	90.0	86.8



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

	UHAL 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- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE	
PBCLCS4 Q31	70%	76%	80%	67%	78%	83%	55%	67%				100%	100%	71%	100%	69%	77%	61%	64%	73%	
CSRESP Q32	92%	92%	100%	92%	78%	100%	85%	100%				100%	100%	86%	100%	91%	95%	87%	91%	92%	
AVERAGE	80.99	84.03	90.00	79.17	77.78	91.67	70.00	83.33	78.95	x	x	x	100.0	x	78.57	x	80.15	85.90	74.19	77.27	82.29

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	UHAL 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- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE		
NRXWHY Q10	91%	92%	100%	95%	100%	85%	89%	71%	92%		100%	100%	67%	90%	75%	92%	89%	94%	86%	92%	
NRXWYNT Q11	63%	73%	88%	82%	38%	64%	62%	43%	61%		100%	100%	33%	70%	50%	64%	67%	57%	62%	63%	
RXBST Q12	69%	75%	100%	77%	52%	67%	68%	57%	71%		100%	100%	67%	30%	100%	68%	74%	62%	68%	68%	
AVERAGE	74.4	79.8	95.8	84.8	63.5	71.7	73.3	57.1	74.9	x	x	x	x	55.6	63.3	75.0	74.7	76.4	71.2	72.1	74.5

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV ILND	AMER ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q1 YES	303	5304	47	84	93	79	224	2	5	1	3	8	37	34	249	271	15	236	67
	100%	100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%
NOT ANSWERED	4	59	2		1	1	3						1		4	4		3	1
VALID CASES	303	5304	47	84	93	79	224	2	5	1	3	8	37	34	249	271	15	236	67
NUMBER OF RESPONDENTS	307	5363	49	84	94	80	227	2	5	1	3	8	38	34	253	275	15	239	68
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	UHAL 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
Q3 YES	122 41%	1687 32%*	~	42%~	42%	33%	48%	92 41%	1 50%~	~	~	33%~	25%~	54%~	6 18%~	110 44%*	108 40%~	9 60%~	85 36%*	37 58%*
Q3 NO	177 59%	3541 68%*	~	58%~	58%	67%	52%	131 59%	1 50%~	5 100%~	1 100%~	2 67%~	6 75%~	17 46%~	27 82%~	138 56%*	161 60%~	6 40%~	150 64%*	27 42%*
NOT ANSWERED	8	135	1	1	5	1	4						1	1	5	6		4	4	
VALID CASES	299	5228	48	83	89	79	223	2	5	1	3	8	37	33	248	269	15	235	64	
NUMBER OF RESPONDENTS	307	5363	49	84	94	80	227	2	5	1	3	8	38	34	253	275	15	239	68	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	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			
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC	
Q4 NEVER	1 0.9%	18 1%	~	~	1 3%	~	~	~	~	~	~	~	~	1 5%	1 1%	1 1%	~	~	1 3%	
SOMETIMES	10 9%	148 9%	~	2 11%	2 6%	3 11%	3 9%	8 10%	~	~	~	~	~	2 11%	2 33%	7 7%	9 9%	1 11%	5 6%	5 15%
USUALLY	17 15%	323 20%	~	2 11%	3 9%	3 11%	9 26%	11 13%	~	~	1 ~100%	~	~	4 21%	~	16 16%	14 14%	2 22%	11 14%	6 18%
ALWAYS	84 75%	1151 70%	~	15 79%	26 81%	21 78%	22 65%	65 77%	1 100%	~	~	~	2 ~100%	12 63%	4 67%	76 76%	74 76%	6 67%	63 80%	21 64%
#ALWAYS + USUALLY (NET)	101 90%	1475 90%	~	17 89%	29 91%	24 89%	31 91%	76 90%	1 100%	~	~	1 ~100%	2 100%	16 84%	4 67%	92 92%	88 90%	8 89%	74 94%	27 82%
TOP BOX SCORE	84 75%	1151 70%	~	15 79%	26 81%	21 78%	22 65%	65 77%	1 100%	~	~	~	2 ~100%	12 63%	4 67%	76 76%	74 76%	6 67%	63 80%	21 64%
NOT ANSWERED	10	142		1	3	2	4	8					1		10	10		6	4	
VALID CASES	112	1641		19	32	27	34	84	1			1	2	19	6	100	98	9	79	33
NUMBER OF RESPONDENTS	122	1783		20	35	29	38	92	1			1	2	20	6	110	108	9	85	37
	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	
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLK 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
Q5 YES	196 65%	3345 65%	33 ~ 69%~	55 65%	53 59%	55 69%	145 65%	1 50%~	4 80%~		2 ~ 67%~	6 75%~	23 61%~	21 64%~	162 65%	172 63%~	13 93%~	138 59%*	58 87%*
NO	106 35%	1824 35%	15 ~ 31%~	29 35%	37 41%	25 31%	79 35%	1 50%~	1 20%~	1 100%~	1 33%~	2 25%~	15 39%~	12 36%~	89 35%	101 37%~	1 7%~	97 41%*	9 13%*
NOT ANSWERED	5	194	1		4		3							1	2	2	1	4	1
VALID CASES	302	5169	48	84	90	80	224	2	5	1	3	8	38	33	251	273	14	235	67
NUMBER OF RESPONDENTS	307 100%	5363 100%	49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%

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			
	UHAL 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		
Q6 NEVER	4 2%	35 1%	~	~	4%	2%	2%	~	~	~	~	~	4%	~	3%	3%	~	2%	2%	
SOMETIMES	31 17%	451 14%	~	20%	11%	16%	22%	15%	100%	~	~	~	17%	30%	24%	17%	16%	31%	16%	20%
USUALLY	57 31%	814 26%	~	30%	30%	33%	31%	32%	~	~	~	100%	50%	35%	29%	32%	33%	15%	31%	30%
ALWAYS	91 50%	1829 58%*	~	50%	55%	49%	45%	51%	~	~	~	33%	30%	48%	49%	48%	54%	51%	46%	
#ALWAYS + USUALLY (NET)	148 81%	2643 84%	~	80%	85%	82%	76%	83%	~	~	~	100%	83%	65%	76%	81%	81%	69%	83%	77%
TOP BOX SCORE	91 50%	1829 58%*	~	50%	55%	49%	45%	51%	~	~	~	33%	30%	48%	49%	48%	54%	51%	46%	
NOT ANSWERED	13	215	3	2	4	4	9	2	1				12		13		11	2		
VALID CASES	183	3129	30	53	49	51	136	1	2	1	6	23	21	150	159	13	127	56		
NUMBER OF RESPONDENTS	196	3344	33	55	53	55	145	1	4	2	6	23	21	162	172	13	138	58		
	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		
	UHAL 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
Q7 NONE	82 28%	1553 31%	14 ~ 30%	19 23%	26 29%	23 29%	62 28%	1 50%	1 20%	1 ~ 33%	1 13%	11 30%	9 27%	69 28%	78 29%	1 7%	73 31%*	9 14%*	
1 TIME	86 29%	1446 28%	10 ~ 21%	25 30%	30 34%	21 26%	68 31%	2 ~ 40%	1 100%	1 ~ 25%	2 16%	6 16%	9 27%	72 29%	77 29%	4 29%	73 31%	13 20%	
2	70 23%	1007 20%	14 ~ 30%	16 20%	21 24%	19 24%	50 23%	1 ~ 20%	1 ~ 33%	4 50%	11 30%	11 30%	10 30%	57 23%	63 23%	5 36%	52 22%	18 28%	
3	34 11%	534 11%	5 ~ 11%	14 17%	7 8%	8 10%	23 10%	1 ~ 20%	1 ~ 33%	1 13%	1 16%	6 16%	5 15%	26 11%	31 12%	1 7%	22 9%	12 18%	
4	11 4%	260 5%	2 ~ 4%	3 4%	2 2%	4 5%	8 4%	~	~	~	~	1 3%	9 4%	8 3%	1 7%	8 3%	3 5%		
5 TO 9	12 4%	196 4%	2 ~ 4%	4 5%	2 2%	4 5%	8 4%	~	~	~	~	2 5%	11 4%	9 3%	2 14%	5 2%*	7 11%*		
10 OR MORE TIMES	3 1%	87 2%	~	1 1%	1 1%	1 1%	2 0.9%	1 50%	~	~	~	~	3 1%	3 1%	~	~	3 5%		
NOT ANSWERED	9	280	2	2	5		6					1	1	6	6	1	6	3	
VALID CASES	298	5083	47	82	89	80	221	2	5	1	3	8	37	33	247	269	14	233	65
NUMBER OF RESPONDENTS	307	5363	49	84	94	80	227	2	5	1	3	8	38	34	253	275	15	239	68
	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		
	UHAL 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	
Q8 #YES	143 67%	2386 68%	23 ~ 70%	45 ~ 71%	39 62%	36 67%	113 71%*	1 100%	2 ~ 50%	1 100%	1 100%	3 43%	14 54%	17 71%	120 67%	129 68%	9 69%	101 64%	42 75%
NO	70 33%	1113 32%	10 ~ 30%	18 ~ 29%	24 38%	18 33%	46 29%*	2 ~ 50%	~	~	~	4 ~ 57%	12 46%	7 29%	58 33%	61 32%	4 31%	56 36%	14 25%
NOT ANSWERED	3	69				3					1				1		3		
VALID CASES	213	3499	33	63	63	54	159	1	4	1	1	7	26	24	178	190	13	157	56
NUMBER OF RESPONDENTS	216 100%	3568 100%	33 100%	63 100%	63 100%	57 100%	159 100%	1 100%	4 100%	1 100%	2 100%	7 100%	26 100%	24 100%	178 100%	191 100%	13 100%	160 100%	56 100%

[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			
	UHAL 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
Q9 NEVER	8 4%	78 2%	~	3%~	3%	2%	7%	5 3%	~	1 25%~	~	~	~	4%~	~	8 4%~	7 4%~	1 8%~	6 4%	2 4%
SOMETIMES	16 8%	344 10%	~	6%~	5%	10%	9%	9 6%	~	2 50%~	~	~	14%~	12%~	3 13%~	12 7%~	13 7%~	2 15%~	12 8%	4 7%
USUALLY	62 29%	768 22%*	~	18%~	29%	37%	28%	46 29%	~	~	~	100%~	57%~	31%~	8 29%~	4 30%~	53 29%~	4 31%~	43 27%	19 34%
ALWAYS	127 60%	2292 66%	~	73%~	63%	52%	56%	99 62%	1 100%~	1 25%~	1 100%~	1 100%~	2 29%~	14 54%~	14 58%~	105 59%~	114 60%~	6 46%~	96 61%	31 55%
#ALWAYS + USUALLY (NET)	189 89%	3059 88%	~	91%~	92%	89%	83%	145 91%	1 100%~	1 25%~	1 100%~	1 100%~	6 86%~	22 85%~	21 88%~	158 89%~	170 89%~	10 77%~	139 89%	50 89%
TOP BOX SCORE	127 60%	2292 66%	~	73%~	63%	52%	56%	99 62%	1 100%~	1 25%~	1 100%~	~	29%~	14 54%~	14 58%~	105 59%~	114 60%~	6 46%~	96 61%	31 55%
NOT ANSWERED	3	87					3					1				1			3	
VALID CASES	213	3481		33	63	63	54	159	1	4	1	1	7	26	24	178	190	13	157	56
NUMBER OF RESPONDENTS	216 100%	3568 100%		33 100%	63 100%	63 100%	57 100%	159 100%	1 100%	4 100%	1 100%	2 100%	7 100%	26 100%	24 100%	178 100%	191 100%	13 100%	160 100%	56 100%

[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		
	UHAL 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	
Q10 YES	75 35%	1122 32%	~ 39%	21 33%	20 32%	21 39%	54 34%	2 ~ 50%	1 ~ 100%	1 ~ 100%	1 14%	9 35%	9 38%	59 33%	63 33%	6 46%	47 30%*	28 50%*	
Q10 NO	138 65%	2348 68%	~ 61%	42 67%	43 68%	33 61%	105 66%	1 100%	2 ~ 50%	~	6 ~ 86%	17 65%	15 63%	119 67%	127 67%	7 54%	110 70%*	28 50%*	
NOT ANSWERED	3	97				3				1				1		3			
VALID CASES	213	3471	33	63	63	54	159	1	4	1	1	7	26	24	178	190	13	157	56
NUMBER OF RESPONDENTS	216	3568	33	63	63	57	159	1	4	1	2	7	26	24	178	191	13	160	56
	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		
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q11 #YES	70 95%	947 94%	12 ~ 92%~	20 95%~	18 90%~	20 100%~	49 92%~		2 ~100%~	1 100%~	1 100%~	1 100%~	9 100%~	9 100%~	54 93%~	58 94%~	6 100%~	42 91%~	28 100%~
NO	4 5%	63 6%	1 ~ 8%~	1 5%~	2 10%~		4 8%~							4 ~ 7%~	4 6%~		4 9%~		
NOT ANSWERED	13	450	2	2	5	4	7			1		1	1	7	8	1	10	3	
VALID CASES	74	1010	13	21	20	20	53		2	1	1	1	9	9	58	62	6	46	28
NUMBER OF RESPONDENTS	87 100%	1460 100%	15 100%	23 100%	25 100%	24 100%	60 100%		2 100%	1 100%	2 100%	1 100%	10 100%	10 100%	65 100%	70 100%	7 100%	56 100%	31 100%

[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		
	UHAL 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 & POOR	NO CCC	CCC
Q12 #YES	42 58%	718 70%*	7 ~ 54%~	9 45%~	12 60%~	14 70%~	28 53%~		2 ~100%~	1 100%~		1 ~100%~	7 78%~	33 57%~	37 60%~	3 50%~	22 49%~	20 71%~	
NO	31 42%	305 30%*	6 ~ 46%~	11 55%~	8 40%~	6 30%~	25 47%~		~	~	1 ~100%~	2 ~ 22%~	2 22%~	25 43%~	25 40%~	3 50%~	23 51%~	8 29%~	
NOT ANSWERED	2	87		1		1	1							1	1		2		
VALID CASES	73	1023	13	20	20	20	53		2	1	1	1	9	9	58	62	6	45	28
NUMBER OF RESPONDENTS	75	1110	13	21	20	21	54		2	1	1	1	9	9	59	63	6	47	28
	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	UHAL 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
Q13 #YES	51 71%	830 78%	6 ~ 46%	15 ~ 75%	14 ~ 70%	16 ~ 84%	36 68%		2 ~ 100%		1 ~ 100%	1 ~ 100%	6 67%	7 78%	39 67%	42 68%	5 83%	30 68%	21 75%
NO	21 29%	241 22%	7 ~ 54%	5 ~ 25%	6 ~ 30%	3 ~ 16%	17 32%			1 ~ 100%			3 ~ 33%	2 22%	19 33%	20 32%	1 17%	14 32%	7 25%
NOT ANSWERED	3	39		1		2	1							1	1			3	
VALID CASES	72	1071	13	20	20	19	53	2	1	1	1	9	9	58	62	6	44	28	
NUMBER OF RESPONDENTS	75	1110	13	21	20	21	54	2	1	1	1	9	9	59	63	6	47	28	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	UHAL 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- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q14 WORST HEALTH CARE POSSIBLE	1 0.5%	3 0.1%	~	~	~	2%	~	~	~	~	~	~	~	1 ~0.6%	1 ~0.5%	~	~	~	1 2%
01	1 0.5%	7 0.2%	~	~	~	2%	~	~	~	~	~	1 ~14%	~	1 4%	~	~	~	1 8%	1 0.6%
02		9 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03	1 0.5%	25 0.7%	~	~	~	2%	1 0.6%	~	~	~	~	~	~	1 ~0.6%	~	~	~	1 8%	1 2%
04	5 2%	47 1%	~	1 3%	1 2%	~	3 6%	4 3%	~	~	~	~	1 4%	1 4%	4 2%	4 2%	1 8%	3 2%	2 4%
05	12 6%	121 3%	~	2 6%	2 3%	5 8%	3 6%	6 4%	1 ~25%	~	~	~	5 ~19%	2 8%	10 6%	10 5%	2 15%	7 4%	5 9%
06	10 5%	116 3%	~	2 6%	1 2%	6 10%	1 2%	7 4%	1 100%	~	~	~	~	1 4%	7 4%	7 4%	1 8%	6 4%	4 7%
07	19 9%	300 9%	~	3 9%	5 8%	7 11%	4 7%	13 8%	~	~	1 ~100%	2 29%	3 12%	1 4%	17 10%	16 8%	2 15%	14 9%	5 9%
08	65 31%	813 23%*	~	6 18%	21 34%	17 27%	21 39%	53 33%	1 ~25%	1 ~100%	~	~	8 ~31%	1 4%	62 35%	63 33%	~	50 32%	15 27%
09	34 16%	704 20%	~	7 21%	13 21%	7 11%	7 13%	25 16%	1 ~25%	~	~	3 ~43%	3 12%	6 25%	27 15%	30 16%	3 23%	25 16%	9 16%
BEST HEALTH CARE POSSIBLE	64 30%	1323 38%*	~	12 36%	19 31%	19 30%	14 26%	50 31%	1 ~25%	~	~	1 ~14%	6 23%	11 46%	49 28%	59 31%	2 15%	50 32%	14 25%
#8-10 (NET)	163 77%	2841 82%	~	25 76%	53 85%*	43 68%	42 78%	128 81%*	3 ~75%	1 ~100%	~	4 ~57%	17 65%	18 75%	138 78%	152 80%	5 38%	125 80%	38 68%

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			
	UHAL 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)	98 46%	2027 58%*	~	19 58%~	32 52%	26 41%	21 39%	75 47%	2 ~	50%~	~	~	4 57%~	9 35%~	17 71%~	76 43%~	89 47%~	5 38%~	75 48%	23 41%
NOT ANSWERED	4	98			1	3					1					1		4		
VALID CASES	212	3470		33	62	63	54	159	1	4	1	1	7	26	24	178	190	13	156	56
NUMBER OF RESPONDENTS	216 100%	3568 100%		33 100%	63 100%	63 100%	57 100%	159 100%	1 100%	4 100%	1 100%	2 100%	7 100%	26 100%	24 100%	178 100%	191 100%	13 100%	160 100%	56 100%
MEAN	8.22	8.58		8.42	8.55	7.94	8.06	8.37	6.00	8.00	8.00	7.00	7.43	7.73	8.33	8.20	8.34	6.54	8.38	7.79
p stat_(*=Sig @ p<=.05)		.004*	~	~	.050*	.173	.428	.081	~	~	~	~	~	~	~	~	~	~	.064	.062

[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		
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q15 NEVER	3 1%	64 2%	~	3%~	2%	~	2%	2 1%	~	~	~	~	~	4%~	1 4%~	2 1%~	2 1%~	1 8%~	2 1%	1 2%
SOMETIMES	26 12%	353 10%	~	15%~	6%	15%	15%	20 13%	~	25%~	~	~	~	15%~	4 13%~	21 12%~	24 13%~	1 8%~	17 11%	9 16%
USUALLY	80 38%	1112 32%	~	42%~	34%	39%	39%	59 37%	~	50%~	100%~	100%~	1 57%~	4 31%~	8 38%~	68 38%~	74 39%~	3 23%~	58 37%	22 40%
ALWAYS	102 48%	1922 56%*	~	39%~	58%	47%	44%	78 49%	1 100%	1 25%~	~	~	3 43%~	13 50%~	11 46%~	86 49%~	89 47%~	8 62%~	79 51%	23 42%
#ALWAYS + USUALLY (NET)	182 86%	3034 88%	~	82%~	92%	85%	83%	137 86%	1 100%	3 75%~	1 100%	1 100%	7 100%	21 81%~	20 83%~	154 87%~	163 86%~	11 85%~	137 88%	45 82%
TOP BOX SCORE	102 48%	1922 56%*	~	39%~	58%	47%	44%	78 49%	1 100%	1 25%~	~	~	3 43%~	13 50%~	11 46%~	86 49%~	89 47%~	8 62%~	79 51%	23 42%
NOT ANSWERED	5	117			1	1	3					1			1		2		4	1
VALID CASES	211	3451		33	62	62	54	159	1	4	1	1	7	26	24	177	189	13	156	55
NUMBER OF RESPONDENTS	216 100%	3568 100%		33 100%	63 100%	63 100%	57 100%	159 100%	1 100%	4 100%	1 100%	2 100%	7 100%	26 100%	24 100%	178 100%	191 100%	13 100%	160 100%	56 100%

[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		
	UHAL 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 NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q16 YES	234 78%	3643 71%*	~ 12%	~ 25%	~ 78%	~ 95%*	~ 90%*	78%	100%	~ 80%	~ 100%	~ 100%	~ 75%	~ 74%	~ 70%	~ 79%	~ 77%	~ 87%	~ 76%	~ 84%
NO	67 22%	1481 29%*	~ 36%	~ 18%	~ 5%	~ 8%	~ 10%*	22%	~ 20%	~ 1%	~ 3%	~ 25%	~ 26%	~ 30%	~ 21%	~ 23%	~ 13%	~ 24%	~ 16%	
NOT ANSWERED	6	239	1	1	2	2	1							1	1		6			
VALID CASES	301	5124	48	83	92	78	226	2	5	1	3	8	38	33	253	274	15	233	68	
NUMBER OF RESPONDENTS	307 100%	5363 100%	49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%	

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			
	UHAL 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	19 9%	403 11%	~	~	4 6%	8 10%	7 10%	11 6%	1 ~	33%~	~	~	2 ~	5 19%~	4 19%~	15 8%~	14 7%~	5 38%~	8 5%*	11 19%*
NO	204 91%	3143 89%	~100%~	12 94%	58 90%	73 90%	61 90%	159 94%	2 100%~	2 67%~	1 100%~	3 100%~	4 67%~	22 81%~	17 81%~	175 92%~	187 93%~	8 62%~	158 95%*	46 81%*
NOT ANSWERED	11	226		3	6	2	7	1				1	2	9	11			11		
VALID CASES	223	3545		12	62	81	68	170	2	3	1	3	6	27	21	190	201	13	166	57
NUMBER OF RESPONDENTS	234 100%	3771 100%		12 100%	65 100%	87 100%	70 100%	177 100%	2 100%	4 100%	1 100%	3 100%	6 100%	28 100%	23 100%	199 100%	212 100%	13 100%	177 100%	57 100%

[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			
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q18 #YES	14 78%	349 94%~	~	~	2 67%~	7 88%~	5 71%~	10 91%~	~	~	~	~	2 ~100%~	2 40%~	3 75%~	11 79%~	10 77%~	4 80%~	6 86%~	8 73%~
NO	4 22%	22 6%~	~	~	1 33%~	1 13%~	2 29%~	1 9%~	~	~	~	~	3 ~60%~	1 25%~	3 21%~	3 23%~	1 20%~	1 14%~	3 27%~	
NOT ANSWERED	1	7			1				1						1	1		1		
VALID CASES	18	371			3	8	7	11					2	5	4	14	13	5	7	11
NUMBER OF RESPONDENTS	19	378			4	8	7	11	1				2	5	4	15	14	5	8	11
	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		
	UHAL 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 & POOR	NO CCC	CCC
Q19 YES	17 6%	175 3%	~	1 2%	6 7%	4 4%	6 8%	11 5%	~	~	~	~	~	11%	3 9%	14 6%	13 5%	4 27%	7 3%*	10 15%*
NO	284 94%	4948 97%	~	47 98%	77 93%	88 96%	72 92%	216 95%	2 100%	5 100%	1 100%	3 100%	8 100%	34 89%	31 91%	239 94%	262 95%	11 73%	226 97%*	58 85%*
NOT ANSWERED	6	240		1	1	2	2												6	
VALID CASES	301	5123		48	83	92	78	227	2	5	1	3	8	38	34	253	275	15	233	68
NUMBER OF RESPONDENTS	307 100%	5363 100%		49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%

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

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC
Q20 NEVER	1 6%	23 12%	~	~	~	25%	~	~	~	~	~	~	~	~	7%	1 8%	1 ~	~	1 10%
SOMETIMES	4 24%	35 18%	~	~	~	25%	3 18%	2 ~	~	~	~	~	1 25%	2 67%	2 14%	2 15%	2 50%	2 29%	2 20%
USUALLY	4 24%	49 25%	~	1 100%	1 17%	1 25%	1 17%	2 18%	~	~	~	~	2 50%	4 ~	4 29%	4 31%	~	4 57%	~
ALWAYS	8 47%	87 45%	~	~	5 83%	1 25%	2 33%	7 64%	~	~	~	~	1 25%	1 33%	7 50%	6 46%	2 50%	1 14%	7 70%
#ALWAYS + USUALLY (NET)	12 71%	135 70%	~	1 100%	6 100%	2 50%	3 50%	9 82%	~	~	~	~	3 75%	1 33%	11 79%	10 77%	2 50%	5 71%	7 70%
TOP BOX SCORE	8 47%	87 45%	~	~	5 83%	1 25%	2 33%	7 64%	~	~	~	~	1 25%	1 33%	7 50%	6 46%	2 50%	1 14%	7 70%
NOT ANSWERED		3																	
VALID CASES	17	193		1	6	4	6	11					4	3	14	13	4	7	10
NUMBER OF RESPONDENTS	17	196		1	6	4	6	11					4	3	14	13	4	7	10
	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		
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC
Q21 #YES	15 88%	157 84%~	~100%	1 83%	5 100%	4 83%	5 100%	11 100%	~	~	~	~	2 50%	3 100%	12 86%	11 85%	4 100%	6 86%	9 90%
NO	2 12%	31 16%~	~	1 17%	1 17%	1 17%	~	~	~	~	~	~	2 50%	2 14%	2 15%	2 15%	1 14%	1 10%	
NOT ANSWERED		8																	
VALID CASES	17	188		1	6	4	6	11					4	3	14	13	4	7	10
NUMBER OF RESPONDENTS	17 100%	196 100%		1 100%	6 100%	4 100%	6 100%	11 100%					4 100%	3 100%	14 100%	13 100%	4 100%	7 100%	10 100%

[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		
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	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	
Q22 YES	20 7%	446 9%	~	1 2%~	8 10%	5 5%	6 8%	13 6%	~	~	~	~	1 13%~	4 11%~	4 12%~	16 6%~	4 27%~	8 3%*	12 18%*	
NO	280 93%	4656 91%	~	47 98%~	74 90%	87 95%	72 92%	214 94%	2 100%	5 100%	1 100%	3 100%	7 88%~	33 89%~	29 88%~	237 94%~	258 94%~	11 73%~	224 97%*	56 82%*
NOT ANSWERED	7	261		1	2	2	2						1	1		1		7		
VALID CASES	300	5102		48	82	92	78	227	2	5	1	3	8	37	33	253	274	15	232	68
NUMBER OF RESPONDENTS	307 100%	5363 100%		49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%



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				
	UHAL 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 & GOOD	FAIR & POOR	NO CCC	CCC
Q23 NEVER	5 25%	62 15%	~	~	~	40%	50%	2 15%	~	~	~	~	~	2 50%	3 19%	4 25%	1 25%	1 13%	4 33%	
SOMETIMES	3 15%	96 24%	~	~	25%	20%	~	2 15%	~	~	~	~	1 100%	1 25%	2 13%	2 13%	1 25%	~	3 25%	
USUALLY	2 10%	112 28%	~	~	~	20%	17%	1 8%	~	~	~	~	~	1 25%	1 6%	1 6%	1 25%	1 13%	1 8%	
ALWAYS	10 50%	135 33%	~	100%	75%	20%	33%	2 62%	~	~	~	~	2 50%	10 63%	9 56%	1 25%	6 75%	4 33%		
#ALWAYS + USUALLY (NET)	12 60%	247 61%	~	100%	75%	40%	50%	3 69%	~	~	~	~	2 50%	11 69%	10 62%	2 50%	7 88%	5 42%		
TOP BOX SCORE	10 50%	135 33%	~	100%	75%	20%	33%	2 62%	~	~	~	~	2 50%	10 63%	9 56%	1 25%	6 75%	4 33%		
NOT ANSWERED		14																		
VALID CASES	20	405	1	8	5	6	13						1	4	4	16	16	4	8	12
NUMBER OF RESPONDENTS	20	419	1	8	5	6	13						1	4	4	16	16	4	8	12
	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		
	UHAL 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 & GOOD	FAIR & POOR	NO CCC	CCC	
Q24 #YES	7 37%	260 64%	~	~	3 38%	2 40%	2 33%	3 23%	~	~	~	~100%	1 33%	3 75%	4 27%	6 40%	1 25%	1 14%	6 50%
NO	12 63%	143 36%	~	~	5 63%	3 60%	4 67%	10 77%	~	~	~	~	2 67%	1 25%	11 73%	9 60%	3 75%	6 86%	6 50%
NOT ANSWERED	1	16		1									1	1	1			1	
VALID CASES	19	403			8	5	6	13				1	3	4	15	15	4	7	12
NUMBER OF RESPONDENTS	20	419		1	8	5	6	13				1	4	4	16	16	4	8	12
	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			
	UHAL 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	
Q25 YES	35 12%	666 13%	~	1 2%	10 12%	13 14%	11 14%	29 13%	~	~	~	~	2 25%	3 8%	4 12%	30 12%	30 11%	4 27%	10 4%*	25 38%*
NO	261 88%	4441 87%	~	47 98%	71 88%	77 86%	66 86%	195 87%	2 100%	5 100%	1 100%	2 100%	6 75%	35 92%	30 88%	218 88%	240 89%	11 73%	220 96%*	41 62%*
NOT ANSWERED	11	256		1	3	4	3	3				1			5	5		9	2	
VALID CASES	296	5107		48	81	90	77	224	2	5	1	2	8	38	34	248	270	15	230	66
NUMBER OF RESPONDENTS	307 100%	5363 100%		49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%

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				
	UHAL 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	6 18%	92 14%	~	~	10%~	18%~	27%~	15%~	~	~	~	~	~	2 67%~	1 25%~	5 18%~	6 21%~	~	3 33%~	3 13%~	
SOMETIMES	10 30%	116 18%	~	100%~	20%~	27%~	36%~	30%~	~	~	~	~	2 100%~	2 50%~	8 29%~	9 32%~	1 25%~	4 44%~	6 25%~		
USUALLY	6 18%	171 27%	~	~	20%~	18%~	18%~	19%~	~	~	~	~	1 33%~	1 25%~	5 18%~	6 21%~	~	~	6 25%~		
ALWAYS	11 33%	258 41%	~	~	50%~	36%~	18%~	37%~	~	~	~	~	~	~	10 36%~	7 25%~	3 75%~	2 22%~	9 38%~		
#ALWAYS + USUALLY (NET)	17 52%	429 67%	~	~	70%~	55%~	36%~	56%~	~	~	~	~	1 33%~	1 25%~	15 54%~	13 46%~	3 75%~	2 22%~	15 63%~		
TOP BOX SCORE	11 33%	258 41%	~	~	50%~	36%~	18%~	37%~	~	~	~	~	~	~	10 36%~	7 25%~	3 75%~	2 22%~	9 38%~		
NOT ANSWERED	2	17				2		2							2	2		1	1		
VALID CASES	33	636		1	10	11	11	27					2	3	4	28	4	28	4	9	24
NUMBER OF RESPONDENTS	35	653		1	10	13	11	29					2	3	4	30	4	30	4	10	25
	100%	100%		100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
Q27 #YES	14 41%	311 49%~	~	~	60%~	25%~	45%~	11 39%~	~	~	~	~	2 ~100%~	1 33%~	2 50%~	12 41%~	13 45%~	1 25%~	2 20%~	12 50%~
NO	20 59%	326 51%~	~100%~	1 40%~	4 75%~	9 55%~	6 61%~	17 61%~	~	~	~	~	2 ~67%~	2 50%~	17 59%~	16 55%~	3 75%~	8 80%~	12 50%~	
NOT ANSWERED	1	17				1	1								1	1			1	
VALID CASES	34	636		1	10	12	11	28					2	3	4	29	29	4	10	24
NUMBER OF RESPONDENTS	35	653		1	10	13	11	29					2	3	4	30	30	4	10	25
	100%	100%		100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLK 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
Q28 YES	64 21%	978 19%	~	19%~	16%	17%	33%*	22%	50%~	~	~	33%~	13%~	22%~	9%~	23%~	21%~	36%~	16%*	42%*
NO	234 79%	4103 81%	~	81%~	84%	83%	67%*	78%	50%~	100%~	100%~	67%~	88%~	78%~	91%~	77%~	79%~	64%~	84%*	58%*
NOT ANSWERED	9	281	1	4	2	2	2							1	1	2	2	1	8	1
VALID CASES	298	5082	48	80	92	78	225	2	5	1	3	8	37	33	251	273	14	231	67	
NUMBER OF RESPONDENTS	307 100%	5363 100%	49	84	94	80	227	2	5	1	3	8	38	34	253	275	15	239	68	
			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	
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC
Q29 #YES	34 55%	594 60%	5 ~ 56%~	6 46%~	6 40%~	17 68%~	28 58%~	~	~	~	1 ~100%~	4 50%~	2 67%~	30 55%~	29 54%~	3 60%~	18 50%~	16 62%~
NO	28 45%	403 40%	4 ~ 44%~	7 54%~	9 60%~	8 32%~	20 42%~	1 100%~	~	1 ~100%~	4 ~ 50%~	1 33%~	25 45%~	25 46%~	2 40%~	18 50%~	10 38%~	
NOT ANSWERED	2	32			1	1	2						2	2			2	
VALID CASES	62	998	9	13	15	25	48	1		1	1	8	3	55	54	5	36	26
NUMBER OF RESPONDENTS	64 100%	1030 100%	9 100%	13 100%	16 100%	26 100%	50 100%	1 100%		1 100%	1 100%	8 100%	3 100%	57 100%	56 100%	5 100%	36 100%	28 100%

[ASKED IF Q28 = YES]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q30 YES	270 92%	4410 88%*	~	46 96%~	76 95%	82 90%	66 88%	205 93%	1 50%~	2 40%~	1 100%~	3 100%~	7 88%~	36 97%~	30 91%~	227 92%~	245 91%~	15 100%~	204 90%*	66 97%*
NO	24 8%	622 12%*	~	2 4%~	4 5%	9 10%	9 12%	16 7%	1 50%~	3 60%~	~	~	1 13%~	1 3%~	3 9%~	20 8%~	23 9%~	~	22 10%*	2 3%*
NOT ANSWERED	13	331		1	4	3	5	6						1	1	6	7		13	
VALID CASES	294	5032		48	80	91	75	221	2	5	1	3	8	37	33	247	268	15	226	68
NUMBER OF RESPONDENTS	307 100%	5363 100%		49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%



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		
	UHAL 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 ALSK	OTH	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q31 NONE	67 26%	1163 27%	~ 24%	~ 22%	32%	23%	55 28%	1 100%	~	1 ~100%	1 50%	1 14%	6 17%	5 18%	60 27%	66 28%	5 18%	8 27%	59 30%*	8 13%*
1 TIME	97 37%	1470 34%	~ 30%	~ 31%	43%	42%	72 36%	~	1 50%	~	~	3 43%	13 37%	13 46%	78 35%	86 36%	5 36%	19 39%	78 31%	19 31%
2	52 20%	817 19%	~ 26%	~ 24%	14%	17%	39 20%	~	1 50%	~	~	1 14%	9 26%	3 11%	47 21%	46 19%	4 29%	16 18%	36 26%	16 26%
3	24 9%	450 11%	~ 13%	~ 14%	5%	6%	16 8%	~	~	~	1 50%	2 29%	4 11%	7 25%	16 7%	22 9%	2 14%	10 7%	14 7%	10 16%
4	11 4%	180 4%	~ 2%	~ 5%	3%	6%	9 5%	~	~	~	~	~	2 6%	~	11 5%	11 5%	~	3 4%	8 4%	3 5%
5 TO 9	7 3%	146 3%	~ 2%	~ 3%	3%	3%	5 3%	~	~	~	~	~	~	~	6 3%	3 1%	3 21%	3 2%	4 2%	4 6%
10 OR MORE TIMES	3 1%	40 0.9%	~ 2%	~ 1%	~	2%	2 1%	~	~	~	~	~	1 3%	~	3 1%	3 1%	~	1 0.5%	2 0.5%	2 3%
NOT ANSWERED	9	203			2	5	2	7			1		1	2	6	8	1	5	4	4
VALID CASES	261	4266	46	74	77	64	198	1	2	1	2	7	35	28	221	237	14	199	62	62
NUMBER OF RESPONDENTS	270	4469	46	76	82	66	205	1	2	1	3	7	36	30	227	245	15	204	66	66
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC
Q31A ALWAYS	1 0.5%	82 3%*	~	~	~	1 2%	~	~	~	~	~	1 17%	~	1 4%	~	~	1 7%	1 0.7%	~
USUALLY	1 0.5%	49 2%*	~	~	~	1 2%	~	~	~	~	~	~	1 3%	1 ~0.6%	1 0.6%	~	1 0.7%	~	
SOMETIMES	7 4%	229 8%*	~	~	4 7%	2 4%	1 2%	5 4%	~	~	1 ~100%	~	~	1 4%	5 3%	5 3%	1 7%	5 4%	2 4%
NEVER	184 95%	2671 88%*	~	35 100%	54 93%	48 94%	47 96%	137 96%	2 ~100%	~	~	5 ~83%	28 97%	21 91%	154 96%	164 96%	12 86%	132 95%	52 96%
#NEVER + SOMETIMES (NET)	191 99%	2900 96%*	~	35 100%	58 100%	50 98%	48 98%	142 100%	2 ~100%	~	1 ~100%	5 83%	28 97%	22 96%	159 99%	169 99%	13 93%	137 99%	54 100%
TOP BOX SCORE	184 95%	2671 88%*	~	35 100%	54 93%	48 94%	47 96%	137 96%	2 ~100%	~	~	5 ~83%	28 97%	21 91%	154 96%	164 96%	12 86%	132 95%	52 96%
NOT ANSWERED	1	30				1	1							1	1		1		
VALID CASES	193	3030		35	58	51	49	142	2		1	6	29	23	160	170	14	139	54
NUMBER OF RESPONDENTS	194	3060		35	58	52	49	143	2		1	6	29	23	161	171	14	140	54
	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			
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q32 NEVER	4 2%	80 3%	~	~	1 2%	2 4%	1 2%	2 1%	~	~	~	~	~	3 2%	3 2%	~	3 2%	1 2%		
SOMETIMES	10 5%	145 5%	~	2 6%	2 4%	3 6%	3 6%	6 4%	~	~	~	1 17%	3 10%	3 13%	7 4%	6 4%	4 29%	5 4%	5 9%	
USUALLY	27 14%	478 16%	~	4 11%	9 16%	8 16%	6 13%	18 13%	~	1 50%	~	1 100%	~	6 21%	4 17%	22 14%	24 14%	2 14%	17 12%	10 19%
ALWAYS	150 79%	2312 77%	~	29 83%	45 79%	38 75%	38 79%	116 82%	~	1 50%	~	~	5 83%	20 69%	16 70%	128 80%	137 81%	8 57%	112 82%	38 70%
#ALWAYS + USUALLY (NET)	177 93%	2790 93%	~	33 94%	54 95%	46 90%	44 92%	134 94%	~	2 100%	~	1 100%	5 83%	26 90%	20 87%	150 94%	161 95%	10 71%	129 94%	48 89%
TOP BOX SCORE	150 79%	2312 77%	~	29 83%	45 79%	38 75%	38 79%	116 82%	~	1 50%	~	~	5 83%	20 69%	16 70%	128 80%	137 81%	8 57%	112 82%	38 70%
NOT ANSWERED	3	44			1	1	1	1						1	1		3			
VALID CASES	191	3016		35	57	51	48	142		2		1	6	29	23	160	170	14	137	54
NUMBER OF RESPONDENTS	194	3060		35	58	52	49	143		2		1	6	29	23	161	171	14	140	54
	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					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	UHAL 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
Q33 NEVER	1 0.5%	40 1%	~	~	~	~	2% 0.7%	~	~	~	~	~	~	~	1 0.6%	1 0.6%	~	1 0.7%	~
SOMETIMES	15 8%	145 5%	~ 11%	~ 4%	~ 12%	~ 6%	9 6%	~ 50%	1	~	~	1	4	4	11	13	2	8	7
USUALLY	29 15%	494 16%	~ 14%	~ 19%	~ 10%	~ 17%	21 15%	~	~	~	~	1	7	3	25	25	3	19	10
ALWAYS	146 76%	2341 77%	~ 74%	~ 77%	~ 78%	~ 75%	111 78%	~ 50%	1	~	1	4	18	16	123	131	9	109	37
#ALWAYS + USUALLY (NET)	175 92%	2835 94%	~ 89%	~ 96%	~ 88%	~ 92%	132 93%	~ 50%	1	~	1	5	25	19	148	156	12	128	47
TOP BOX SCORE	146 76%	2341 77%	~ 74%	~ 77%	~ 78%	~ 75%	111 78%	~ 50%	1	~	1	4	18	16	123	131	9	109	37
NOT ANSWERED	3	39			1	1	1	1							1	1		3	
VALID CASES	191	3021	35	57	51	48	142	2			1	6	29	23	160	170	14	137	54
NUMBER OF RESPONDENTS	194 100%	3060 100%	35 100%	58 100%	52 100%	49 100%	143 100%	2 100%			1 100%	6 100%	29 100%	23 100%	161 100%	171 100%	14 100%	140 100%	54 100%

[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			
	UHAL 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	
Q34 NEVER	28	0.9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	14	114	~	3	1	5	5	8	1	~	~	1	3	3	10	10	3	8	6	
	7%	4%	~	9%	2%*	10%	10%	6%	~	50%	~	~	17%	10%	13%	6%	21%	6%	11%	
USUALLY	26	407	~	2	11	7	6	20	~	~	~	~	6	3	22	23	2	18	8	
	14%	14%	~	6%	19%	14%	13%	14%	~	~	~	~	21%	13%	14%	14%	14%	13%	15%	
ALWAYS	151	2460	~	30	45	39	37	114	1	~	1	5	20	17	128	137	9	111	40	
	79%	82%	~	86%	79%	76%	77%	80%	~	50%	~	100%	83%	69%	74%	80%	81%	64%	81%	74%
#ALWAYS + USUALLY (NET)	177	2867	~	32	56	46	43	134	1	~	1	5	26	20	150	160	11	129	48	
	93%	95%	~	91%	98%*	90%	90%	94%	~	50%	~	100%	83%	90%	87%	94%	94%	79%	94%	89%
TOP BOX SCORE	151	2460	~	30	45	39	37	114	1	~	1	5	20	17	128	137	9	111	40	
	79%	82%	~	86%	79%	76%	77%	80%	~	50%	~	100%	83%	69%	74%	80%	81%	64%	81%	74%
NOT ANSWERED	3	51			1	1	1	1							1	1		3		
VALID CASES	191	3009		35	57	51	48	142	2		1	6	29	23	160	170	14	137	54	
NUMBER OF RESPONDENTS	194	3060		35	58	52	49	143	2		1	6	29	23	161	171	14	140	54	
	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			
	UHAL 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 & GOOD	FAIR & POOR	NO CCC	CCC
Q35 YES	131 69%	2050 69%	3 ~ 9%	39 68%	46 90%*	43 90%~	101 71%~	1 ~ 50%~	1 ~ 100%~	3 50%~	17 59%~	14 61%~	111 69%~	116 68%~	10 71%~	92 67%	39 72%		
NO	60 31%	942 31%	32 ~ 91%	18 32%	5 10%*	5 10%~	41 29%~	1 ~ 50%~	~	3 ~ 50%~	12 41%~	9 39%~	49 31%~	54 32%~	4 29%~	45 33%	15 28%		
NOT ANSWERED	3	67		1	1	1	1							1	1		3		
VALID CASES	191	2993	35	57	51	48	142	2	1	6	29	23	160	170	14	137	54		
NUMBER OF RESPONDENTS	194 100%	3060 100%	35 100%	58 100%	52 100%	49 100%	143 100%	2 100%	1 100%	6 100%	29 100%	23 100%	161 100%	171 100%	14 100%	140 100%	54 100%		

[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		
	UHAL 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	
Q36 NEVER	2 2%	19 1%	~	~	~	2%~	2%~	1%~	~	~	~	~	~	~	1 ~0.9%~	1 ~ 10%~	1 1%~	1 3%~	
SOMETIMES	11 9%	119 6%	~	~	3 8%~	7 16%~	1 2%~	5 5%~	~	~	~	1 33%~	4 24%~	4 29%~	7 6%~	10 9%~	1 10%~	8 9%~	3 8%~
USUALLY	29 22%	466 23%	~	~	13 33%~	7 16%~	9 21%~	25 25%~	~	~	~	~	4 24%~	1 7%~	27 25%~	27 24%~	1 10%~	25 28%~	4 10%~
ALWAYS	87 67%	1408 70%	~	3 100%~	23 59%~	30 67%~	31 74%~	68 69%~	1 100%~	~	1 100%~	2 67%~	9 53%~	9 64%~	74 68%~	77 68%~	7 70%~	56 62%~	31 79%~
#ALWAYS + USUALLY (NET)	116 90%	1874 93%	~	3 100%~	36 92%~	37 82%~	40 95%~	93 94%~	1 100%~	~	1 100%~	2 67%~	13 76%~	10 71%~	101 93%~	104 91%~	8 80%~	81 90%~	35 90%~
TOP BOX SCORE	87 67%	1408 70%	~	3 100%~	23 59%~	30 67%~	31 74%~	68 69%~	1 100%~	~	1 100%~	2 67%~	9 53%~	9 64%~	74 68%~	77 68%~	7 70%~	56 62%~	31 79%~
NOT ANSWERED	2	36				1	1	2						2	2		2		
VALID CASES	129	2013		3	39	45	42	99	1		1	3	17	14	109	114	10	90	39
NUMBER OF RESPONDENTS	131	2049		3	39	46	43	101	1		1	3	17	14	111	116	10	92	39
	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			
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC ILND	AMER ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q37 NEVER	4 2%	89 3%	~	~	~	4%	2 4%~0.7%	1 ~	~	~	~	~	17%~	7%~	14%~0.6%	1 ~	2 1%~	2 14%~	1 0.7%~	3 6%
SOMETIMES	16 8%	318 11%	~	3 9%~	3 5%	6 12%	4 8%~	11 8%~	1 ~50%~	~	~	~	~	7%~	3 14%~	11 7%~	13 8%~	2 14%~	10 7%	6 11%
USUALLY	50 26%	708 24%	~	13 37%~	14 25%	12 24%	11 23%~	34 24%~	1 ~50%~	~	~	~	3 50%~	11 39%~	8 36%~	41 26%~	47 28%~	2 14%~	38 28%	12 22%
ALWAYS	120 63%	1876 63%	~	19 54%~	39 70%	31 61%	31 65%~	96 68%~	~	~	~	1 ~100%~	2 33%~	13 46%~	8 36%~	107 67%~	107 63%~	8 57%~	87 64%	33 61%
#ALWAYS + USUALLY (NET)	170 89%	2584 86%	~	32 91%~	53 95%	43 84%	42 88%~	130 92%~	1 ~50%~	~	~	1 ~100%~	5 83%~	24 86%~	16 73%~	148 92%~	154 91%~	10 71%~	125 92%	45 83%
TOP BOX SCORE	120 63%	1876 63%	~	19 54%~	39 70%	31 61%	31 65%~	96 68%~	~	~	~	1 ~100%~	2 33%~	13 46%~	8 36%~	107 67%~	107 63%~	8 57%~	87 64%	33 61%
NOT ANSWERED	4	70			2	1	1	1						1	1	1	2		4	
VALID CASES	190	2990		35	56	51	48	142	2		1	6	28	22	160	169	14	136	54	
NUMBER OF RESPONDENTS	194 100%	3060 100%		35 100%	58 100%	52 100%	49 100%	143 100%	2 100%		1 100%	6 100%	29 100%	23 100%	161 100%	171 100%	14 100%	140 100%	54 100%	

[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		
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q38 #YES	159 83%	2520 84%	33 ~ 94%~	48 84%	39 76%	39 81%	120 85%~		2 ~100%~		1 ~100%~	5 83%~	20 69%~	19 83%~	133 83%~	141 83%~	11 79%~	114 83%	45 83%
NO	32 17%	484 16%	2 ~ 6%~	9 16%	12 24%	9 19%	22 15%~		~	~	~	1 ~ 17%~	9 31%~	4 17%~	27 17%~	29 17%~	3 21%~	23 17%	9 17%
NOT ANSWERED	3	56		1	1	1	1							1	1			3	
VALID CASES	191	3004	35	57	51	48	142		2		1	6	29	23	160	170	14	137	54
NUMBER OF RESPONDENTS	194 100%	3060 100%	35 100%	58 100%	52 100%	49 100%	143 100%		2 100%		1 100%	6 100%	29 100%	23 100%	161 100%	171 100%	14 100%	140 100%	54 100%

[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		
	UHAL 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
Q39 YES	86 46%	1156 39%*	~	16 46%~	21 40%	18 35%	31 65%~	64 46%~	~	~	~	3 50%~	15 52%~	9 39%~	73 47%~	76 46%~	7 54%~	55 41%*	31 58%*
NO	101 54%	1846 61%*	~	19 54%~	32 60%	33 65%	17 35%~	75 54%~	2 ~100%~	~	~	3 50%~	14 48%~	14 61%~	83 53%~	91 54%~	6 46%~	79 59%*	22 42%*
NOT ANSWERED	7	59		5	1	1	4				1			5	4	1	6	1	
VALID CASES	187	3001		35	53	51	48	139	2			6	29	23	156	167	13	134	53
NUMBER OF RESPONDENTS	194 100%	3060 100%		35 100%	58 100%	52 100%	49 100%	143 100%	2 100%		1	6 100%	29 100%	23 100%	161 100%	171 100%	14 100%	140 100%	54 100%

[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			
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AMR AS- IAN	NATV HAW/ ILND	AMR IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q40 NEVER	10 12%	80 7%	~	~	4 20%	2 11%	4 13%	9 14%	~	~	~	~	1 7%	10 14%	8 11%	2 29%	6 11%	4 13%		
SOMETIMES	8 9%	163 14%	~	5 31%	1 5%	1 6%	1 3%	6 10%	~	~	~	~	2 13%	1 11%	7 10%	7 9%	1 14%	5 9%	3 10%	
USUALLY	22 26%	320 28%	~	5 31%	2 10%	7 39%	8 26%	15 24%	~	~	~	~	3 100%	3 20%	5 56%	14 19%	18 24%	2 29%	15 28%	7 23%
ALWAYS	45 53%	595 51%	~	6 38%	13 65%	8 44%	18 58%	33 52%	~	~	~	~	9 60%	3 33%	41 57%	42 56%	2 29%	28 52%	17 55%	
#ALWAYS + USUALLY (NET)	67 79%	915 79%	~	11 69%	15 75%	15 83%	26 84%	48 76%	~	~	~	~	3 100%	12 80%	8 89%	55 76%	60 80%	4 57%	43 80%	24 77%
TOP BOX SCORE	45 53%	595 51%	~	6 38%	13 65%	8 44%	18 58%	33 52%	~	~	~	~	9 60%	3 33%	41 57%	42 56%	2 29%	28 52%	17 55%	
NOT ANSWERED	1	33			1		1							1	1		1			
VALID CASES	85	1158		16	20	18	31	63				3	15	9	72	75	7	54	31	
NUMBER OF RESPONDENTS	86	1191		16	21	18	31	64				3	15	9	73	76	7	55	31	
	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			
	UHAL 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			
Q41 WORST PERSONAL DOCTOR POSSIBLE	1 0.4%	9 0.2%	~	~	~	~	1 2%	1 ~100%	~	~	~	~	~	1 ~0.5%	1 ~0.4%	~	1 ~2%			
01		6 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~			
02	1 0.4%	7 0.2%	~	~	~	~	1 0.5%	~	~	~	~	~	~	1 ~0.5%	1 ~7%	~	1 ~2%			
03		14 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~			
04	3 1%	45 1%	~	2 4%	~	1 1%	~	2 1%	~	1 ~100%	~	~	~	3 ~1%	3 1%	~	2 1%	1 2%		
05	16 6%	127 3%*	~	4 9%	1 1%*	5 6%	6 10%	12 6%	~	~	~	~	4 ~11%	1 4%	15 7%	15 6%	1 7%	13 7%	3 5%	
06	15 6%	112 3%*	~	3 7%	6 8%	5 6%	1 2%*	13 7%	~	1 ~50%	~	~	1 ~3%	~	14 6%	13 6%	1 7%	12 6%	3 5%	
07	25 10%	293 7%	~	1 2%	6 8%	10 13%	8 13%	20 10%	~	~	~	~	3 ~9%	5 18%	17 8%	21 9%	2 14%	18 9%	7 11%	
08	45 17%	690 16%	~	3 7%	16 22%	16 21%	10 16%	37 19%	~	~	~	~	8 ~23%	2 7%	43 20%	41 17%	4 29%	34 18%	11 17%	
09	41 16%	810 19%	~	10 22%	7 10%	17 22%	7 11%	28 14%	~	1 ~50%	~	~	2 ~33%	7 20%	34 18%	5 15%	38 16%	1 7%	34 18%	7 11%
BEST PERSONAL DOCTOR POSSIBLE	111 43%	2128 50%*	~	23 50%	37 51%	23 30%*	28 45%	85 43%	~	~	~	2 ~100%	4 67%	12 34%	15 54%	92 42%	104 44%	4 29%	81 42%	30 47%
#8-10 (NET)	197 76%	3628 86%*	~	36 78%	60 82%	56 73%	45 73%	150 76%	~	1 ~50%	~	2 ~100%	6 100%	27 77%	22 79%	169 77%	183 78%	9 64%	149 77%	48 75%

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		
	UHAL 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	
9-10 (NET)	152 59%	2937 69%*	33 ~ 72%~	44 60%	40 52%	35 56%	113 57%	1 ~ 50%~	2 ~ 100%~	6 100%~	19 54%~	20 71%~	126 57%~	142 60%~	5 36%~	115 59%	37 58%		
NOT ANSWERED	12	228		3	5	4	7		1	1	1	2	7	9	1	10	2		
VALID CASES	258	4241	46	73	77	62	198	1	2	1	2	6	35	28	220	236	14	194	64
NUMBER OF RESPONDENTS	270 100%	4469 100%	46 100%	76 100%	82 100%	66 100%	205 100%	1 100%	2 100%	1 100%	3 100%	7 100%	36 100%	30 100%	227 100%	245 100%	15 100%	204 100%	66 100%
MEAN	8.52	8.89	8.63	8.82	8.31	8.34	8.52	0.0	7.50	4.00	10.0	9.67	8.40	8.96	8.46	8.57	7.71	8.55	8.42
p stat_(*=Sig @ p<=.05)		.001*	~	~.052	.193	.422	.949	~	~	~	~	~	~	~	~	~	~	.656	.653

[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			
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC	
Q42 YES	75 29%	1024 24%	~	15%~	22 30%	22 28%	24 38%	55 28%	1 100%	1 50%	~	~	2 29%	13 37%	7 24%	65 29%	63 26%	9 60%	25 13%*	50 78%*
NO	186 71%	3250 76%	~	85%~	39 70%	52 72%	56 62%	39 72%	1 50%	1 100%	1 100%	2 71%	5 63%	22 76%	157 71%	175 74%	6 40%	172 87%*	14 22%*	
NOT ANSWERED	9	195			2	4	3	5				1	1	1	5	7		7	2	
VALID CASES	261	4274		46	74	78	63	200	1	2	1	2	7	35	29	222	238	15	197	64
NUMBER OF RESPONDENTS	270 100%	4469 100%		46 100%	76 100%	82 100%	66 100%	205 100%	1 100%	2 100%	1 100%	3 100%	7 100%	36 100%	30 100%	227 100%	245 100%	15 100%	204 100%	66 100%

[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		
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q43 #YES	68 92%	896 89%	6 ~ 86%	18 ~ 86%	21 95%	23 96%	50 93%	1 100%	1 100%			2 ~ 100%	12 92%	7 100%	59 92%	59 95%	7 78%	21 88%	47 94%
NO	6 8%	110 11%	1 ~ 14%	3 14%	1 5%	1 4%	4 7%						1 8%	5 ~ 8%	3 5%	2 22%	3 13%	3 6%	
NOT ANSWERED	1	35		1			1							1	1		1		
VALID CASES	74	1006	7	21	22	24	54	1	1			2	13	7	64	62	9	24	50
NUMBER OF RESPONDENTS	75	1041	7	22	22	24	55	1	1			2	13	7	65	63	9	25	50
	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q44 #YES	61 84%	836 84%	4 ~ 57%	17 ~ 81%	20 ~ 91%	20 ~ 87%	46 85%	1 100%	1 100%			2 ~ 100%	9 75%	4 67%	55 86%	54 87%	5 63%	19 79%	42 86%
NO	12 16%	163 16%	3 ~ 43%	4 ~ 19%	2 9%	3 13%	8 15%						3 ~ 25%	2 33%	9 14%	8 13%	3 38%	5 21%	7 14%
NOT ANSWERED	2	41		1		1	1						1	1	1	1	1	1	1
VALID CASES	73	1000	7	21	22	23	54	1	1			2	12	6	64	62	8	24	49
NUMBER OF RESPONDENTS	75	1041	7	22	22	24	55	1	1			2	13	7	65	63	9	25	50
	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER					
	UHAL 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- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC				
Q45 YES	35 12%	774 15%	~	11%~	11%	8%	18%	23 10%	~	~	~	~	38%~	18%~	12%~	11%~	29 11%~	4 27%~	12 5%*	23 34%*		
NO	262 88%	4257 85%	~	89%~	89%	92%	82%	204 90%	2 100%	5 100%	1 100%	3 100%	5 100%	31 100%	63%~	82%~	88%~	89%~	246 89%~	11 73%~	217 95%*	45 66%*
NOT ANSWERED	10	332	2	2	3	3															10	
VALID CASES	297	5031	47	82	91	77	227	2	5	1	3	8	38	34	253	275	15	229	68			
NUMBER OF RESPONDENTS	307 100%	5363 100%	49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%			

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					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	UHAL 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	
Q46 NEVER	8 24%	73 10%	~	2 40%	2 22%	2 29%	2 15%	4 18%	~	~	~	~	1 33%	1 14%	2 50%	5 18%	6 21%	1 25%	4 33%	4 18%
SOMETIMES	5 15%	115 16%	~	~	3 33%	~	2 15%	3 14%	~	~	~	~	1 33%	1 14%	1 25%	4 14%	5 18%	~	~	5 23%
USUALLY	8 24%	209 28%	~	1 20%	1 11%	1 14%	5 38%	5 23%	~	~	~	~	~	3 43%	~	8 29%	6 21%	2 50%	2 17%	6 27%
ALWAYS	13 38%	340 46%	~	2 40%	3 33%	4 57%	4 31%	10 45%	~	~	~	~	1 33%	2 29%	1 25%	11 39%	11 39%	1 25%	6 50%	7 32%
#ALWAYS + USUALLY (NET)	21 62%	549 75%	~	3 60%	4 44%	5 71%	9 69%	15 68%	~	~	~	~	1 33%	5 71%	1 25%	19 68%	17 61%	3 75%	8 67%	13 59%
TOP BOX SCORE	13 38%	340 46%	~	2 40%	3 33%	4 57%	4 31%	10 45%	~	~	~	~	1 33%	2 29%	1 25%	11 39%	11 39%	1 25%	6 50%	7 32%
NOT ANSWERED	1	29					1	1								1	1			1
VALID CASES	34	737		5	9	7	13	22					3	7	4	28	28	4	12	22
NUMBER OF RESPONDENTS	35	766		5	9	7	14	23					3	7	4	29	29	4	12	23
	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				
	UHAL 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	GOOD & POOR	NO CCC	CCC
Q47 NONE	7	67		1	3	1	2	4						2	1	5	6		3	4
	21%	9%	~	20%	33%	14%	15%	18%	~	~	~	~	~	29%	25%	18%	21%	~	25%	18%
1 SPECIALIST	21	450		4	3	5	9	13					2	5	2	18	17	3	9	12
	62%	61%	~	80%	33%	71%	69%	59%	~	~	~	~	67%	71%	50%	64%	61%	75%	75%	55%
2	5	144			2	1	2	4					1		1	4	5			5
	15%	19%	~	~	22%	14%	15%	18%	~	~	~	~	33%	~	25%	14%	18%	~	~	23%
3		48																		
		6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
4	1	10			1			1								1		1		1
	3%	1%	~	~	11%	~	~	5%	~	~	~	~	~	~	4%	~	25%	~	~	5%
5 OR MORE SPECIALISTS		23																		
		3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	1	25				1		1								1	1			1
VALID CASES	34	741		5	9	7	13	22					3	7	4	28	28	4	12	22
NUMBER OF RESPONDENTS	35	766		5	9	7	14	23					3	7	4	29	29	4	12	23
	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?

	UHAL 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- IC	NOT HIS- 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	1 4%	11 2%~	~	~	1 17%~	~	~	~	~	~	~	1 33%~	~	1 33%~	~	1 5%~	~	1 6%~		
06	1 4%	29 4%~	~	~	~	~	1 9%~	1 6%~	~	~	~	~	~	~	1 4%~	~	1 25%~	1 6%~		
07	2 7%	71 11%~	~	~	~	~	2 18%~	2 11%~	~	~	~	~	~	~	2 9%~	1 5%~	1 25%~	2 11%~		
08	5 19%	106 16%~	~	2 50%~	~	2 33%~	1 9%~	4 22%~	~	~	~	~	~	1 20%~	~	5 22%~	5 23%~	3 33%~	2 11%~	
09	5 19%	148 22%~	~	1 25%~	1 17%~	1 17%~	2 18%~	4 22%~	~	~	~	~	1 33%~	~	1 33%~	3 13%~	3 14%~	1 25%~	2 22%~	3 17%~
BEST SPECIALIST POSSIBLE	13 48%	278 41%~	~	1 25%~	4 67%~	3 50%~	5 45%~	7 39%~	~	~	~	~	1 33%~	4 80%~	1 33%~	12 52%~	12 55%~	1 25%~	4 44%~	9 50%~

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		
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR WHT	AMR IAN	NATV HAW/ ILND	AMR IND/ NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
#8-10 (NET)	23 85%	532 79%	4 ~100%	5 83%	6 100%	8 73%	15 83%	~	~	~	~	2 67%	5 100%	2 67%	20 87%	20 91%	2 50%	9 100%	14 78%
9-10 (NET)	18 67%	426 63%	2 ~50%	5 83%	4 67%	7 64%	11 61%	~	~	~	~	2 67%	4 80%	2 67%	15 65%	15 68%	2 50%	6 67%	12 67%
NOT ANSWERED		10																	
VALID CASES	27	672	4	6	6	11	18				3	5	3	23	22	4	9	18	
NUMBER OF RESPONDENTS	27 100%	682 100%	4 100%	6 100%	6 100%	11 100%	18 100%				3 100%	5 100%	3 100%	23 100%	22 100%	4 100%	9 100%	18 100%	
MEAN	8.89	8.61	8.75	9.00	9.17	8.73	8.78				8.00	9.60	8.00	9.00	9.05	8.00	9.11	8.78	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	UHAL 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 ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q49 YES	45 15%	1285 26%*	~	15%~	19%	12%	16%	34 15%	~	20%~	~	~	13%~	16%~	26%~	13%~	39 14%~	3 20%~	32 14%	13 19%
NO	249 85%	3691 74%*	~	85%~	81%	88%	84%	191 85%	2 100%~	4 80%~	1 100%~	3 100%~	7 88%~	32 84%~	25 74%~	218 87%~	234 86%~	12 80%~	194 86%	55 81%
NOT ANSWERED	13	387		3	3	3	4	2							2	2			13	
VALID CASES	294	4976		46	81	91	76	225	2	5	1	3	8	38	34	251	273	15	226	68
NUMBER OF RESPONDENTS	307 100%	5363 100%		49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%

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		
	UHAL 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	
Q50 NEVER	3 7%	37 3%	~	~	2 14%	1 9%	3 9%	~	~	~	~	~	~	3 9%	3 8%	~	3 10%	~	
SOMETIMES	5 11%	235 20%	~	1 14%	1 7%	1 9%	2 17%	3 9%	~	~	~	~	1 17%	2 25%	2 6%	3 8%	1 33%	2 6%	3 23%
USUALLY	12 27%	343 30%	~	3 43%	3 21%	4 36%	2 17%	10 30%	~	~	~	~	2 33%	3 38%	9 27%	11 29%	1 33%	10 32%	2 15%
ALWAYS	24 55%	547 47%	~	3 43%	8 57%	5 45%	8 67%	17 52%	1 100%	~	~	1 100%	3 50%	3 38%	19 58%	21 55%	1 33%	16 52%	8 62%
#ALWAYS + USUALLY (NET)	36 82%	890 77%	~	6 86%	11 79%	9 82%	10 83%	27 82%	1 100%	~	~	1 100%	5 83%	6 75%	28 85%	32 84%	2 67%	26 84%	10 77%
TOP BOX SCORE	24 55%	547 47%	~	3 43%	8 57%	5 45%	8 67%	17 52%	1 100%	~	~	1 100%	3 50%	3 38%	19 58%	21 55%	1 33%	16 52%	8 62%
NOT ANSWERED	1	42			1		1						1		1		1		
VALID CASES	44	1162		7	14	11	12	33	1			1	6	8	33	38	3	31	13
NUMBER OF RESPONDENTS	45	1204		7	15	11	12	34	1			1	6	9	33	39	3	32	13
	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		
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHTE	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
Q51 NEVER	2 5%	21 2%	~	~	2 14%	~	~	2 6%	~	~	~	~	~	~	2 6%	2 5%	~	2 6%	~
SOMETIMES	3 7%	81 7%	~	1 14%	~	1 9%	1 8%	3 9%	~	~	~	~	~	1 13%	2 6%	2 5%	1 33%	2 6%	1 8%
USUALLY	6 14%	289 25%	~	1 14%	2 14%	2 18%	1 8%	6 18%	~	~	~	~	~	1 13%	5 15%	4 11%	2 67%	4 13%	2 15%
ALWAYS	33 75%	768 66%	~	5 71%	10 71%	8 73%	10 83%	22 67%	1 100%	~	~	1 100%	6 100%	6 75%	24 73%	30 79%	~	23 74%	10 77%
#ALWAYS + USUALLY (NET)	39 89%	1057 91%	~	6 86%	12 86%	10 91%	11 92%	28 85%	1 100%	~	~	1 100%	6 100%	7 88%	29 88%	34 89%	2 67%	27 87%	12 92%
TOP BOX SCORE	33 75%	768 66%	~	5 71%	10 71%	8 73%	10 83%	22 67%	1 100%	~	~	1 100%	6 100%	6 75%	24 73%	30 79%	~	23 74%	10 77%
NOT ANSWERED	1	44			1		1							1		1		1	
VALID CASES	44	1160		7	14	11	12	33	1			1	6	8	33	38	3	31	13
NUMBER OF RESPONDENTS	45	1204		7	15	11	12	34	1			1	6	9	33	39	3	32	13
	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		
	UHAL 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	
Q52 YES	105 36%	1790 36%	19 ~ 42%	33 ~ 40%	27 30%	26 35%	77 35%	2 ~ 40%	2 ~ 67%	1 13%	18 49%	16 47%	85 34%	98 36%	4 29%	83 37%	22 34%		
NO	186 64%	3138 64%	26 ~ 58%	49 ~ 60%	62 70%	49 65%	146 65%	2 100%	3 ~ 60%	1 100%	1 33%	7 88%	19 51%	18 53%	163 66%	173 64%	10 71%	143 63%	43 66%
NOT ANSWERED	16	435	4	2	5	5	4					1		5	4	1	13	3	
VALID CASES	291	4928	45	82	89	75	223	2	5	1	3	8	37	34	248	271	14	226	65
NUMBER OF RESPONDENTS	307 100%	5363 100%	49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%

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			
	UHAL 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		
PQ53 NEVER	3 1%	64 1%	~	~	~	1%	3%	0.5%	~	~	~	~	~	5%	2	1	3	~	~	3	5%
SOMETIMES	15 5%	317 6%	~	3%	2%	3%	7%	5%	~	1%	~	~	~	8%	3	2	13	~	~	13	2%
USUALLY	40 14%	629 13%	~	8%	15%	9%	11%	14%	~	~	~	1%	1%	5%	5	35	38	2	~	31	9%
ALWAYS	226 80%	3884 79%	~	34%	62%	70%	81%	81%	80%	2%	4%	1%	2%	7%	27	23	195	209	12	175	51%
#ALWAYS + USUALLY (NET)	266 94%	4513 92%	~	42%	77%	79%	92%	92%	94%	2%	4%	1%	3%	8%	32	28	230	247	14	206	60%
TOP BOX SCORE	226 80%	3884 79%	~	34%	62%	70%	81%	81%	80%	2%	4%	1%	2%	7%	27	23	195	209	12	175	51%
NOT ANSWERED	7	91			3	3	1	6								2	4	6		7	
VALID CASES	284	4894		45	79	86	74	217	2	5	1	3	8	37	32	244	265	14	219	65	
NUMBER OF RESPONDENTS	291 100%	4985 100%		45 100%	82 100%	89 100%	75 100%	223 100%	2 100%	5 100%	1 100%	3 100%	8 100%	37 100%	34 100%	248 100%	271 100%	14 100%	226 100%	65 100%	

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

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER			
	UHAL 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
Q54 WORST HEALTH PLAN POSSIBLE	2	24			1		1	2							2	2		2	
	0.7%	0.5%	~	~	1%	~	1%	0.9%	~	~	~	~	~	~	~0.8%	~0.7%	~	~0.9%	~
01		11																	
		0.2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02	2	31					2	2							2	2		1	1
	0.7%	0.6%	~	~	~	~	3%	0.9%	~	~	~	~	~	~	~0.8%	~0.7%	~	~0.4%	2%
03	1	38		1				1							1	1		1	
	0.3%	0.8%	~	2%	~	~	~	~0.4%	~	~	~	~	~	~	~0.4%	~0.4%	~	~0.4%	~
04	5	60			2		3	2					3	2	3	4	1	2	3
	2%	1%	~	~	2%	~	4%	0.9%	~	~	~	~	8%	6%	1%	1%	7%	~0.9%	5%
05	26	233		5	3	11	7	18	1	1		2	3	3	23	23	3	17	9
	9%	5%*	~	11%	4%*	12%	9%	8%	50%	20%	~	25%	8%	9%	9%	9%	21%	8%	14%
06	18	215		3	6	3	6	14					4	2	16	18		11	7
	6%	4%	~	7%	7%	3%	8%	6%	~	~	~	~	11%	6%	6%	7%	~	5%	11%
07	53	490		8	13	19	13	39		1		1	10	3	46	45	5	42	11
	18%	10%*	~	18%	16%	21%	18%	17%	~	20%	~	13%	27%	9%	19%	17%	36%	19%	17%
08	64	940		11	22	12	19	50			1	1	10	3	60	62	1	52	12
	22%	19%	~	24%	27%	13%*	26%	22%	~	~100%	33%	13%	27%	9%	24%	23%	7%	23%	18%
09	41	878		4	11	18	8	36				1	1	5	35	39	2	31	10
	14%	18%	~	9%	14%	20%	11%	16%*	~	~	~	13%	3%	15%	14%	14%	14%	14%	15%
BEST HEALTH PLAN POSSIBLE	78	2014		13	23	27	15	59	1	3		2	3	6	16	59	74	2	65
	27%	41%*	~	29%	28%	30%	20%	26%	50%	60%	~	67%	38%	16%	47%	24%	27%	14%	29%
#8-10 (NET)	183	3832		28	56	57	42	145	1	3	1	3	5	17	24	154	175	5	148
	63%	78%*	~	62%	69%	63%	57%	65%	50%	60%	~100%	100%	63%	46%	71%	62%	65%	36%	66%

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			
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLK 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)	119 41%	2892 59%*	~	38%~	42%	50%*	31%*	43%	50%~	3	60%~	2	4	7	21	94	42%~	29%~	43%	23
NOT ANSWERED	17	430	4	3	4	6	4							1		6	5	1	15	2
VALID CASES	290	4933	45	81	90	74	223	2	5	1	3	8	37	34	247	270	14	224	66	
NUMBER OF RESPONDENTS	307 100%	5363 100%	49	84	94	80	227	2	5	1	3	8	38	34	253	275	15	239	68	
MEAN	7.92	8.49	7.91	8.09	8.16	7.46	7.96	7.50	8.40	8.00	9.33	8.00	7.30	8.38	7.84	7.96	7.14	8.05	7.48	
p stat_(*=Sig @ p<=.05)		.000*	~	~.340	.132	.026*	.474	~	~	~	~	~	~	~	~	~	~	~.041*	.039*	

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	UHAL 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 & GOOD	FAIR & POOR	NO CCC	CCC
Q55 YES	134 45%	2010 40%	22 ~ 48%~	41 50%	34 37%	37 48%	102 45%	3 ~ 60%~	1 ~ 33%~	3 38%~	21 55%~	13 38%~	118 47%~	123 45%~	9 60%~	82 36%*	52 76%*		
NO	162 55%	2973 60%	24 ~ 52%~	41 50%	57 63%	40 52%	125 55%	2 100%~	2 40%~	1 100%~	2 67%~	5 63%~	17 45%~	21 62%~	135 53%~	152 55%~	6 40%~	146 64%*	16 24%*
NOT ANSWERED	11	380	3	2	3	3												11	
VALID CASES	296	4983	46	82	91	77	227	2	5	1	3	8	38	34	253	275	15	228	68
NUMBER OF RESPONDENTS	307 100%	5363 100%	49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	UHAL 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	
Q56 NEVER	2 2%	30 1%	~	5%~	~	3%~	~	~	~	~	~	~	5%~	1 8%~	1 0.9%~	2 2%~	~	1 1%	1 2%	
SOMETIMES	17 13%	187 9%	~	18%~	3%~	12%~	23%~	11%~	~	2 67%~	~	~	2 100%~	2 10%~	3 25%~	13 11%~	15 13%~	2 25%~	8 10%	9 18%
USUALLY	32 25%	459 23%	~	36%~	8 28%~	11 15%~	5 23%~	8 25%~	~	~	~	~	7 35%~	~	32 28%~	29 24%~	3 38%~	20 25%	12 24%	
ALWAYS	78 60%	1338 66%	~	41%~	9 69%~	27 70%~	23 54%~	19 64%~	1 33%~	~	~	~	10 50%~	8 67%~	68 60%~	73 61%~	3 38%~	50 63%	28 56%	
#ALWAYS + USUALLY (NET)	110 85%	1797 89%	~	77%~	17 97%~	38 97%~	28 85%~	27 77%~	89 89%~	1 33%~	~	~	17 85%~	8 67%~	100 88%~	102 86%~	6 75%~	70 89%	40 80%	
TOP BOX SCORE	78 60%	1338 66%	~	41%~	9 69%~	27 70%~	23 54%~	19 64%~	1 33%~	~	~	~	10 50%~	8 67%~	68 60%~	73 61%~	3 38%~	50 63%	28 56%	
NOT ANSWERED	5	42			2	1	2	2					1	4	4	1	3	2		
VALID CASES	129	2014		22	39	33	35	100	3			2	20	12	114	119	8	79	50	
NUMBER OF RESPONDENTS	134	2056		22	41	34	37	102	3		1	3	21	13	118	123	9	82	52	
	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	
	UHAL 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 NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC
Q57 #YES	56 43%	1193 60%*	7 ~ 32%~	17 43%~	16 47%~	16 46%~	42 42%~	3 ~100%~	1 ~100%~	8 ~ 40%~	6 50%~	48 41%~	48 40%~	6 67%~	33 41%	23 46%	
NO	75 57%	793 40%*	15 ~ 68%~	23 58%~	18 53%~	19 54%~	58 58%~	~	~	3 ~100%~	12 60%~	6 50%~	68 59%~	72 60%~	3 33%~	48 59%	27 54%
NOT ANSWERED	3	70		1		2	2				1	1	2	3		1	2
VALID CASES	131	1986	22	40	34	35	100	3	1	3	20	12	116	120	9	81	50
NUMBER OF RESPONDENTS	134	2056	22	41	34	37	102	3	1	3	21	13	118	123	9	82	52
	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		
	UHAL 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	
Q57A YES	250 87%	3840 79%*	~	35 78%	71 89%	76 88%	68 91%	193 88%	2 100%	5 100%	1 100%	2 100%	5 63%	33 87%	29 88%	213 87%	232 87%	13 93%	190 86%	60 91%
NO	36 13%	1039 21%*	~	10 22%	9 11%	10 12%	7 9%	26 12%	~	~	~	~	3 38%	5 13%	4 12%	31 13%	34 13%	1 7%	30 14%	6 9%
NOT ANSWERED	21	484		4	4	8	5	8				1			1	9	9	1	19	2
VALID CASES	286	4879		45	80	86	75	219	2	5	1	2	8	38	33	244	266	14	220	66
NUMBER OF RESPONDENTS	307 100%	5363 100%		49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%



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			
	UHAL 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	OTH	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC
Q57B NEVER	36 29%	674 30%	8 ~ 42%	9 22%	10 28%	9 31%	19 22%	1 100%	2 67%				3 ~ 60%	7 41%	6 33%	28 28%	32 28%	2 33%	28 29%	8 28%
SOMETIMES	21 17%	430 19%		8 ~ 20%	6 17%	7 24%	15 17%		1 33%					3 ~ 18%	3 17%	16 16%	18 16%	2 33%	15 16%	6 21%
USUALLY	34 27%	488 22%		3 ~ 16%	12 29%	10 28%	9 31%	28 32%				1 ~ 100%	1 20%	3 18%	6 33%	28 28%	33 29%	1 17%	27 28%	7 24%
ALWAYS	34 27%	667 30%		8 ~ 42%	12 29%	10 28%	4 14%	26 30%			1 ~ 100%		1 ~ 20%	4 24%	3 17%	29 29%	32 28%	1 17%	26 27%	8 28%
#ALWAYS + USUALLY (NET)	68 54%	1154 51%		11 ~ 58%	24 59%	20 56%	13 45%	54 61%			1 ~ 100%	1 100%	2 40%	7 41%	9 50%	57 56%	65 57%	2 33%	53 55%	15 52%
TOP BOX SCORE	34 27%	667 30%		8 ~ 42%	12 29%	10 28%	4 14%	26 30%			1 ~ 100%		1 ~ 20%	4 24%	3 17%	29 29%	32 28%	1 17%	26 27%	8 28%
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	164	2651	26	36	54	48	133	1	2		2	3	21	15	147	154	9	126	38	
NOT ANSWERED	18	454	4	7	4	3	6							1	5	6		17	1	
VALID CASES	125	2258	19	41	36	29	88	1	3	1	1	5	17	18	101	115	6	96	29	
NUMBER OF RESPONDENTS	307 100%	5363 100%	49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%	

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		
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q57C YES	55 19%	1026 21%	~ 14%	17 21%	17 20%	15 19%	37 17%	2 ~ 40%	3	1 ~ 33%	2 25%	9 24%	7 21%	45 18%	51 19%	2 13%	34 15%*	21 31%*	
NO	233 81%	3791 79%	~ 86%	63 79%	70 80%	62 81%	185 83%	2 100%	3 60%	1 100%	2 67%	6 75%	29 76%	27 79%	204 82%	220 81%	13 87%	186 85%*	47 69%*
NOT ANSWERED	19	546	5	4	7	3	5							4	4		19		
VALID CASES	288	4817	44	80	87	77	222	2	5	1	3	8	38	34	249	271	15	220	68
NUMBER OF RESPONDENTS	307 100%	5363 100%	49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%

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		
	UHAL 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 & POOR	NO CCC	CCC
Q57D #YES	50 91%	865 87%	~	5 83%	15 88%	17 100%	13 87%	34 92%	2 ~100%		1 ~100%	2 100%	8 89%	6 86%	42 93%	48 94%	1 50%	32 94%	18 86%
NO	5 9%	124 13%	~	1 17%	2 12%	2 ~	3 13%	3 8%	~	~	~	~	1 11%	1 14%	3 7%	3 6%	1 50%	2 6%	3 14%
NOT ANSWERED		6																	
VALID CASES	55	990		6	17	17	15	37	2		1	2	9	7	45	51	2	34	21
NUMBER OF RESPONDENTS	55 100%	996 100%		6 100%	17 100%	17 100%	15 100%	37 100%	2 100%		1 100%	2 100%	9 100%	7 100%	45 100%	51 100%	2 100%	34 100%	21 100%

[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		
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q57E #YES	49 89%	853 87%	6 ~100%	14 82%	16 94%	13 87%	34 92%		2 ~100%		1 ~100%	2 100%	7 78%	6 86%	41 91%	47 92%	1 50%	30 88%	19 90%
NO	6 11%	127 13%		3 ~18%	1 6%	2 13%	3 8%						2 22%	1 14%	4 9%	4 8%	1 50%	4 12%	2 10%
NOT ANSWERED		15																	
VALID CASES	55	981	6	17	17	15	37		2		1	2	9	7	45	51	2	34	21
NUMBER OF RESPONDENTS	55 100%	996 100%	6 100%	17 100%	17 100%	15 100%	37 100%		2 100%		1 100%	2 100%	9 100%	7 100%	45 100%	51 100%	2 100%	34 100%	21 100%

[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		
	UHAL 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
Q57F NEVER	1 2%	20 2%	~	~	~	6%~	~	~	~	~	~	~	~	1 2%~	1 2%~	~	~	1 5%~	
SOMETIMES	5 9%	89 9%	~ 17%~	1 6%~	1 12%~	2 7%~	1 8%~	3 ~	~	~	~	2 22%~	2 29%~	3 7%~	4 8%~	1 50%~	4 12%~	1 5%~	
USUALLY	14 26%	244 25%	~ 50%~	3 24%~	4 24%~	4 21%~	3 24%~	9 24%~	1 ~ 50%~	~	~	3 33%~	2 29%~	11 24%~	13 25%~	~	9 27%~	5 24%~	
ALWAYS	34 63%	624 64%	~ 33%~	2 71%~	12 59%~	10 71%~	10 68%~	25 68%~	1 ~ 50%~	1 ~100%~	2 100%~	4 44%~	3 43%~	30 67%~	33 65%~	1 50%~	20 61%~	14 67%~	
#ALWAYS + USUALLY (NET)	48 89%	868 89%	~ 83%~	5 94%~	16 82%~	14 93%~	13 92%~	34 92%~	2 ~100%~	1 ~100%~	2 100%~	7 78%~	5 71%~	41 91%~	46 90%~	1 50%~	29 88%~	19 90%~	
TOP BOX SCORE	34 63%	624 64%	~ 33%~	2 71%~	12 59%~	10 71%~	10 68%~	25 68%~	1 ~ 50%~	1 ~100%~	2 100%~	4 44%~	3 43%~	30 67%~	33 65%~	1 50%~	20 61%~	14 67%~	
NOT ANSWERED	1	20				1												1	
VALID CASES	54	976	6	17	17	14	37	2	1	2	9	7	45	51	2	33	21		
NUMBER OF RESPONDENTS	55	996	6	17	17	15	37	2	1	2	9	7	45	51	2	34	21		
	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		
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q57G NEVER	1 2%	39 4%	~	~	~	6%	1 3%	~	~	~	~	~	~	~	~	1 2%	1 2%	~	1 3%	~
SOMETIMES	8 15%	87 9%	~	~	2 12%	4 25%	2 14%	4 11%	~	~	~	~	1 50%	3 33%	3 43%	5 11%	7 14%	1 50%	5 16%	3 14%
USUALLY	6 11%	248 25%*	~	1 17%	2 12%	2 13%	1 7%	6 16%	~	~	~	~	~	~	~	6 13%	6 12%	~	4 13%	2 10%
ALWAYS	38 72%	607 62%	~	5 83%	13 76%	9 56%	11 79%	26 70%	2 100%	~	1 100%	1 50%	6 67%	4 57%	33 73%	37 73%	1 50%	22 69%	16 76%	
#ALWAYS + USUALLY (NET)	44 83%	855 87%	~	6 100%	15 88%	11 69%	12 86%	32 86%	2 100%	~	1 100%	1 50%	6 67%	4 57%	39 87%	43 84%	1 50%	26 81%	18 86%	
TOP BOX SCORE	38 72%	607 62%	~	5 83%	13 76%	9 56%	11 79%	26 70%	2 100%	~	1 100%	1 50%	6 67%	4 57%	33 73%	37 73%	1 50%	22 69%	16 76%	
NOT ANSWERED	2	16				1	1												2	
VALID CASES	53	980		6	17	16	14	37	2		1	2	9	7	45	51	2	32	21	
NUMBER OF RESPONDENTS	55	996		6	17	17	15	37	2		1	2	9	7	45	51	2	34	21	
	100%	100%		100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q57C = YES]

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	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
Q57H NEVER	1 2%	18 2%	~	~	~	6%	1 3%	~	~	~	~	~	~	~	~	1 2%	1 2%	~	1 3%	~
SOMETIMES	5 9%	71 7%	~	~	12%	6%	14%	2 5%	~	~	~	~	1 50%	2 22%	2 29%	3 7%	4 8%	1 50%	3 9%	2 10%
USUALLY	7 13%	202 21%	~	17%	12%	19%	7%	6 16%	1 50%	~	~	~	~	~	7 16%	7 14%	~	4 13%	3 14%	
ALWAYS	40 75%	690 70%	~	83%	76%	69%	79%	28 76%	1 50%	~	1 100%	1 50%	7 78%	5 71%	34 76%	39 76%	1 50%	24 75%	16 76%	
#ALWAYS + USUALLY (NET)	47 89%	892 91%	~	100%	88%	88%	86%	34 92%	2 100%	~	1 100%	1 50%	7 78%	5 71%	41 91%	46 90%	1 50%	28 88%	19 90%	
TOP BOX SCORE	40 75%	690 70%	~	83%	76%	69%	79%	28 76%	1 50%	~	1 100%	1 50%	7 78%	5 71%	34 76%	39 76%	1 50%	24 75%	16 76%	
NOT ANSWERED	2	16				1	1												2	
VALID CASES	53	980		6	17	16	14	37	2		1	2	9	7	45	51	2	32	21	
NUMBER OF RESPONDENTS	55	996		6	17	17	15	37	2		1	2	9	7	45	51	2	34	21	
	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	
	UHAL 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
Q58 EXCELLENT	100 34%	1951 39%	15 ~ 33%	26 ~ 32%	31 36%	28 37%	80 35%	1 50%	2 40%		1 ~ 33%	1 13%	10 26%	14 41%	85 34%	100 36%		90 ~ 41%*	10 15%*
VERY GOOD	129 44%	1732 35%*	23 ~ 51%	37 45%	42 48%	27 36%	101 45%		3 60%		1 ~ 33%	5 62%	17 45%	13 38%	116 46%	129 47%		103 ~ 46%	26 38%
GOOD	46 16%	973 20%	7 ~ 16%	15 18%	10 11%	14 18%	33 15%	1 50%		1 100%	1 33%	1 13%	9 24%	4 12%	40 16%	46 17%		25 ~ 11%*	21 31%*
FAIR	13 4%	308 6%		3 4%	4 5%	6 8%	10 4%					1 13%	2 5%	3 9%	10 4%		13 ~ 87%	4 2%*	9 13%*
POOR	2 0.7%	13 0.3%		1 ~ 1%		1 ~ 1%	2 0.9%								2 ~ 0.8%		2 ~ 13%		2 ~ 3%
#EXCELLENT + VERY GOOD + GOOD (NET)	275 95%	4656 94%	45 ~ 100%	78 95%	83 95%	69 91%	214 95%	2 100%	5 100%	1 100%	3 100%	7 88%	36 95%	31 91%	241 95%	275 100%		218 ~ 98%*	57 84%*
NOT ANSWERED	17	386	4	2	7	4	1											17	
VALID CASES	290	4977	45	82	87	76	226	2	5	1	3	8	38	34	253	275	15	222	68
NUMBER OF RESPONDENTS	307 100%	5363 100%	49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%



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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	UHAL 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	VERY GOOD & POOR	NO CCC	CCC
Q59																				
EXCELLENT	124 43%	2270 46%	~ 26	~ 36	~ 35	~ 27	98 44%	1 50%	3 60%	1 100%	1 33%	2 25%	15 39%	17 52%	106 42%	122 45%	2 13%	110 50%*	14 21%*	
VERY GOOD	90 31%	1311 26%	~ 15	~ 29	~ 28	~ 18	68 30%	~ 2	~ 40%	~ 2	~ 33%	1 50%	4 32%	12 24%	8 32%	81 32%	86 32%	4 27%	75 34%*	15 22%*
GOOD	40 14%	923 19%*	~ 2	~ 7	~ 14	~ 17	32 14%	1 50%	~	~	~	1 13%	5 13%	5 15%	35 14%	38 14%	2 13%	26 12%	14 21%	
FAIR	30 10%	400 8%	~ 1	~ 7	~ 9	~ 13	24 11%	~	~	~	1 33%	1 13%	4 11%	3 9%	26 10%	24 9%	6 40%	9 4%*	21 31%*	
POOR	4 1%	72 1%	~ 2	~ 1	~ 1	~ 1	2 0.9%	~	~	~	~	~	2 5%	~	4 2%	3 1%	1 7%	~	4 6%~	
#EXCELLENT + VERY GOOD + GOOD (NET)	254 88%	4503 91%	~ 43	~ 72	~ 77	~ 62	198 88%	2 100%	5 100%	1 100%	2 67%	7 88%	32 84%	30 91%	222 88%	246 90%	8 53%	211 96%*	43 63%*	
NOT ANSWERED	19	387	5	3	7	4	3							1	1	2		19		
VALID CASES	288	4976	44	81	87	76	224	2	5	1	3	8	38	33	252	273	15	220	68	
NUMBER OF RESPONDENTS	307	5363	49	84	94	80	227	2	5	1	3	8	38	34	253	275	15	239	68	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	UHAL 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 PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q60 YES	58 20%	1132 23%	~	13%~	21 26%	11 13%*	20 26%	46 20%	1 50%~	2 40%~	~	~	~	9 24%~	5 15%~	53 21%~	19%~	7 47%~	17 8%*	41 61%*
NO	231 80%	3829 77%	~	39 87%~	61 74%	75 87%*	56 74%	180 80%	1 50%~	3 60%~	1 100%~	3 100%~	8 100%~	29 76%~	29 85%~	199 79%~	81%~	8 53%~	205 92%*	26 39%*
NOT ANSWERED	18	401		4	2	8	4	1							1	1		17	1	
VALID CASES	289	4962		45	82	86	76	226	2	5	1	3	8	38	34	252	274	15	222	67
NUMBER OF RESPONDENTS	307 100%	5363 100%		49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	UHAL 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	857		5	14	10	16	35	1	1			8	3	42	38	7	5	40	
	78%	79%	~	83%~	67%~	91%~	80%~	76%~	100%~	50%~	~	~	~	89%~	60%~	79%~	75%~	100%~	29%~	98%~
NO	13	234		1	7	1	4	11		1			1	2	11	13		12	1	
	22%	21%	~	17%~	33%~	9%~	20%~	24%~		50%~	~	~	~	11%~	40%~	21%~	25%~	~	71%~	2%~
NOT ANSWERED		30																		
VALID CASES	58	1091		6	21	11	20	46	1	2			9	5	53	51	7	17	41	
NUMBER OF RESPONDENTS	58	1121		6	21	11	20	46	1	2			9	5	53	51	7	17	41	
	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		
	UHAL 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 & GOOD	FAIR & POOR	NO CCC	CCC
Q62 YES	39 93%	763 90%	~	40%	100%	100%	100%	29 91%	1 100%	1 100%	~	~	8 100%	3 100%	36 92%	32 91%	7 100%	39 98%	
NO	3 7%	83 10%	~	60%	~	~	~	3 9%	~	~	~	~	~	3 8%	3 9%	~	2 100%	1 3%	
NOT ANSWERED	3	20			2	1		3						3	3		3		
VALID CASES	42	846		5	12	9	16	32	1	1			8	3	39	35	7	2	40
NUMBER OF RESPONDENTS	45	866		5	14	10	16	35	1	1			8	3	42	38	7	5	40
	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			
	UHAL 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	
Q63 YES	41 14%	727 15%	~	2 4%	16 20%	9 10%	14 18%	29 13%	~	1 ~100%	2 ~ 25%	8 21%	5 15%	36 14%	35 13%	6 40%	3 1%*	38 56%*		
NO	248 86%	4197 85%	~	43 96%	65 80%	78 90%	62 82%	196 87%	2 100%	5 ~100%	3 ~100%	6 75%	30 79%	29 85%	216 86%	239 87%	9 60%	218 99%*	30 44%*	
NOT ANSWERED	18	439		4	3	7	4	2						1	1		18			
VALID CASES	289	4924		45	81	87	76	225	2	5	1	3	8	38	34	252	274	15	221	68
NUMBER OF RESPONDENTS	307 100%	5363 100%		49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	UHAL 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 & GOOD	FAIR & POOR	NO CCC	CCC	
Q64 YES	38 93%	620 86%	1 ~ 50%	16 ~ 100%	8 89%	13 93%	27 93%	~	~	~	~ 100%	2 ~ 100%	8 ~ 100%	5 100%	33 92%	32 91%	6 100%	1 33%	37 97%
NO	3 7%	103 14%	1 ~ 50%	~	1 ~ 11%	1 7%	2 7%	~	~	1 ~ 100%	~	~	~	3 8%	3 9%	~	2 67%	1 3%	
NOT ANSWERED		18																	
VALID CASES	41	723	2	16	9	14	29			1	2	8	5	36	35	6	3	38	
NUMBER OF RESPONDENTS	41	741	2	16	9	14	29			1	2	8	5	36	35	6	3	38	
	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q63 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	UHAL 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/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q65 YES	36 95%	581 97%	~100%	1 94%	15 88%	7 100%	13 93%	25 93%	~	~	~	~	2 100%	8 100%	5 100%	31 94%	31 97%	5 83%	36 97%	
NO	2 5%	18 3%	~	~	1 6%	1 13%	2 7%	~	~	~	~	~	~	~	2 6%	2 3%	1 17%	1 100%	1 3%	
NOT ANSWERED		12																		
VALID CASES	38	600		1	16	8	13	27					2	8	5	33	32	6	1	37
NUMBER OF RESPONDENTS	38	612		1	16	8	13	27					2	8	5	33	32	6	1	37
	100%	100%		100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q63 = YES AND Q64 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q66 YES	34 12%	575 12%	~	4 9%~	11 14%	6 7%	13 17%	24 11%	1 50%~		1 ~100%~		1 ~ 13%~	5 14%~	5 15%~	29 12%~	28 10%~	6 43%~	8 4%*	26 40%*
NO	253 88%	4353 88%	~	41 91%~	69 86%	80 93%	63 83%	200 89%	1 50%~	5 ~100%~		3 ~100%~	7 88%~	32 86%~	29 85%~	221 88%~	245 90%~	8 57%~	214 96%*	39 60%*
NOT ANSWERED	20	435		4	4	8	4	3						1		3	2	1	17	3
VALID CASES	287	4928		45	80	86	76	224	2	5	1	3	8	37	34	250	273	14	222	65
NUMBER OF RESPONDENTS	307 100%	5363 100%		49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%



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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	UHAL 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 & GOOD	FAIR & POOR	NO CCC	CCC	
Q67 YES	25 76%	448 80%~	1 ~ 25%~	9 90%~	5 83%~	10 77%~	18 78%~	~	~	~	~	1 ~100%~	5 100%~	3 75%~	22 76%~	20 74%~	5 83%~	25 ~ 96%~	
NO	8 24%	112 20%~	3 ~ 75%~	1 10%~	1 17%~	3 23%~	5 22%~	1 100%~	1 ~100%~	1 ~	~	~	~	1 ~ 25%~	7 24%~	7 26%~	1 17%~	7 100%~	1 4%~
NOT ANSWERED	1	21		1			1							1	1		1		
VALID CASES	33	560	4	10	6	13	23	1	1		1	5	4	29	27	6	7	26	
NUMBER OF RESPONDENTS	34	581	4	11	6	13	24	1	1		1	5	5	29	28	6	8	26	
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q66 = YES]

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	UHAL 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 & GOOD	FAIR & POOR	NO CCC	CCC
Q68 YES	25	439	1	9	5	10	18					1	5	3	22	20	5	25
	100%	97%	~100%	~100%	~100%	~100%	~100%	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%	~100%
NO		14																
		3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		3																
VALID CASES	25	453	1	9	5	10	18					1	5	3	22	20	5	25
NUMBER OF RESPONDENTS	25	456	1	9	5	10	18					1	5	3	22	20	5	25
	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		
	UHAL 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 NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q69 YES	22 8%	459 9%	~	3 7%~	11 13%*	4 5%	4 5%	16 7%	~	1 ~100%~	1 ~ 13%~	2 5%~	5 15%~	17 7%~	19 7%~	3 20%~	10 5%*	12 18%*		
NO	268 92%	4495 91%	~	42 93%~	71 87%*	83 95%	72 95%	210 93%	2 100%~	5 ~100%~	3 ~100%~	7 88%~	36 95%~	29 85%~	236 93%~	256 93%~	12 80%~	212 95%*	56 82%*	
NOT ANSWERED	17	409		4	2	7	4	1										17		
VALID CASES	290	4954		45	82	87	76	226	2	5	1	3	8	38	34	253	275	15	222	68
NUMBER OF RESPONDENTS	307 100%	5363 100%		49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	UHAL 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 & GOOD	FAIR & POOR	NO CCC	CCC
Q70 YES	8 38%	314 71%	~	~	30%	50%	75%	33%	~	~	~	~100%	50%	60%	31%	37%	50%	~	73%
NO	13 62%	129 29%	~100%	70%	50%	25%	67%	~	~100%	~	~	50%	40%	69%	63%	50%	100%	27%	
NOT ANSWERED	1	20		1			1							1		1		1	
VALID CASES	21	442		3	10	4	4	15		1		1	2	5	16	19	2	10	11
NUMBER OF RESPONDENTS	22	462		3	11	4	4	16		1		1	2	5	17	19	3	10	12
	100%	100%		100%	100%	100%	100%	100%		100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q69 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	UHAL 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 ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q71 YES	8	260			3	2	3	5					1	1	3	5	7	1		8
	100%	95%	~	~	~100%	~100%	~100%	~100%	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%	~	~100%
NO		14																		
		5%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		7																		
VALID CASES	8	274			3	2	3	5					1	1	3	5	7	1		8
NUMBER OF RESPONDENTS	8	281			3	2	3	5					1	1	3	5	7	1		8
	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		
	UHAL 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 & POOR	NO CCC	CCC
Q72 YES	36 13%	722 15%	~	~	12% 15%	10% 11%	14% 18%	27% 12%	1% 50%~	~	~	~	2% 25%~	5% 13%~	31% 15%~	33% 12%~	3% 21%~	2% 0.9%*	34% 51%*
NO	251 87%	4209 85%	~	100%~	45% 85%	67% 89%	77% 82%	62% 88%	1% 50%~	5% 100%~	1% 100%~	2% 100%~	6% 75%~	33% 87%~	29% 85%~	219% 88%~	11% 79%~	218% 99%*	33% 49%*
NOT ANSWERED	20	432	4	5	7	4	3				1			3	2	1	19	1	
VALID CASES	287	4931	45	79	87	76	224	2	5	1	2	8	38	34	250	273	14	220	67
NUMBER OF RESPONDENTS	307 100%	5363 100%	49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	UHAL 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 & GOOD	FAIR & POOR	NO CCC	CCC	
Q73 YES	32 91%	612 90%	~	~	11 92%	10 100%	11 85%	23 88%	1 100%	~	~	2 100%	5 100%	5 100%	27 90%	29 91%	3 100%	32 97%	
NO	3 9%	68 10%	~	~	1 8%	2 15%	3 12%	~	~	~	~	~	~	3 10%	3 9%	~	2 100%	1 3%	
NOT ANSWERED	1	39				1	1							1	1			1	
VALID CASES	35	680			12	10	13	26	1			2	5	5	30	32	3	2	33
NUMBER OF RESPONDENTS	36	719			12	10	14	27	1			2	5	5	31	33	3	2	34
	100%	100%			100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q72 = YES]

NQ74 WHAT IS YOUR CHILD'S AGE?

	AGE					RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER				
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
NQ74 LESS THAN 1 YEAR OLD	27	0.5%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
1 TO 3 YEARS OLD	49	890	16%	17%	49	~100%	~	~	~	~	~	~	~	~	~	~	~	~	~		
							32	1	1	2	8	6	39	45	4	45	4	19%*	6%*		
							14%	20%	100%	25%	21%	18%	15%	16%	~	~	~	~	~		
4 TO 7 YEARS OLD	84	1394	27%	26%	84	~100%	~	~	~	~	~	~	~	~	~	~	~	~	~		
							67	1	1	3	9	12	70	78	4	61	23	26%	34%		
							30%	20%	33%	38%	24%	35%	28%	28%	27%	~	~	~	~		
8 TO 12 YEARS OLD	94	1563	31%	29%	94	~100%	~	~	~	~	~	~	~	~	~	~	~	~	~		
							70	2	1	2	8	10	75	83	4	78	16	33%	24%		
							31%	40%	33%	25%	21%	29%	30%	30%	27%	~	~	~	~		
13 OR OLDER	80	1489	26%	28%	80	~100%	~	~	~	~	~	~	~	~	~	~	~	~	~		
							58	2	1	1	13	6	69	69	7	55	25	23%*	37%*		
							26%	100%	20%	33%	13%	34%	18%	27%	25%	47%	~	~	~		
VALID CASES	307	5363			49	84	94	80	227	2	5	1	3	8	38	34	253	275	15	239	68
NUMBER OF RESPONDENTS	307	5363	100%	100%	49	84	94	80	227	2	5	1	3	8	38	34	253	275	15	239	68

[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			
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV ILND	AMER PAC ALSK	OTH	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NQ75	UHAL TOT CHLD																			
MALE	OHP TOT CHLD	160 52%	2755 51%	25 ~ 51%	42 ~ 50%	51 54%	42 53%	114 50%	1 50%	3 60%	1 100%	1 33%	5 63%	20 53%	17 50%	130 51%	140 51%	9 60%	123 51%	37 54%
FEMALE		147 48%	2608 49%	24 ~ 49%	42 ~ 50%	43 46%	38 48%	113 50%	1 50%	2 40%		2 ~ 67%	3 38%	18 47%	17 50%	123 49%	135 49%	6 40%	116 49%	31 46%
VALID CASES		307	5363	49	84	94	80	227	2	5	1	3	8	38	34	253	275	15	239	68
NUMBER OF RESPONDENTS		307 100%	5363 100%	49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%

[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		
	UHAL 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 & GOOD	FAIR & POOR	NO CCC	CCC	
Q76 HISPANIC OR LATINO	34 12%	2091 42%*	~	13%~	15%	12%	8%	15 7%*	~	~	~	~	88%~	24%~	100%~	~	11%~	20%~	12%	12%
NOT HISPANIC OR LATINO	253 88%	2832 58%*	~	87%~	85%	88%	92%	210 93%*	2 100%	5 ~100%	1 ~100%	2 ~100%	1 13%~	29 76%~	~	100%~	89%~	80%~	88%	88%
NOT ANSWERED	20	440		4	2	9	5	2			1					3		20		
VALID CASES	287	4923		45	82	85	75	225	2	5	1	2	8	38	34	253	272	15	219	68
NUMBER OF RESPONDENTS	307 100%	5363 100%		49	84	94	80	227	2	5	1	3	8	38	34	253	275	15	239	68
				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	UHAL 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	
Q77.1 YES	264 86%	3570 67%*	39 ~ 80%	76 ~ 90%	78 83%	71 89%	227 100%	~	~	~	~	~	37 ~ 97%	23 68%	239 94%*	249 91%	14 93%	201 84%*	63 93%*
NO	43 14%	1793 33%*	10 ~ 20%	8 ~ 10%	16 17%	9 11%	2 ~ 100%	5 ~ 100%	1 ~ 100%	3 ~ 100%	8 ~ 100%	1 ~ 100%	1 3%	11 32%	14 6%*	26 9%	1 7%	38 16%*	5 7%*
VALID CASES	307	5363	49	84	94	80	227	2	5	1	3	8	38	34	253	275	15	239	68
NUMBER OF RESPONDENTS	307 100%	5363 100%	49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	UHAL 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	
Q77.2 YES	6 2%	230 4%*		1 ~ 2%	2 ~ 2%		3 ~ 4%	2 ~100%					4 ~ 11%	1 3%	5 2%	5 2%	1 7%	3 1%	3 4%	
NO	301 98%	5133 96%*		48 ~ 98%	82 ~ 98%	94 100%	77 ~ 96%	227 100%	5 ~100%	1 ~100%	3 ~100%	8 ~100%	34 ~ 89%	33 97%	248 98%	270 98%	14 93%	236 99%	65 96%	
VALID CASES	307	5363		49	84	94	80	227	2	5	1	3	8	38	34	253	275	15	239	68
NUMBER OF RESPONDENTS	307 100%	5363 100%		49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%

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

		AGE					RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR 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		
Q77.3	UHAL TOT CHLD																		
YES	10 3%	201 4%	3 ~6%	3 4%	2 2%	2 3%	~	5 ~100%	~	~	5 ~13%	1 3%	9 4%	10 4%	~	7 3%	3 4%		
NO	297 97%	5162 96%	46 ~94%	81 96%	92 98%	78 98%	227 100%	2 100%	1 ~100%	3 ~100%	8 ~100%	33 87%	33 97%	244 96%	265 96%	15 ~100%	232 97%	65 96%	
VALID CASES	307	5363	49	84	94	80	227	2	5	1	3	8	38	34	253	275	15	239	68
NUMBER OF RESPONDENTS	307 100%	5363 100%	49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%

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

		AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q77.4	UHAL TOT CHLD																		
YES	3 1%	82 2%	1 ~ 2%	1 1%	1 1%	~	~	~ 100%	1 ~	~	~ 5%	2 3%	2 0.8%	3 1%	~	3 1%	~		
NO	304 99%	5281 98%	48 ~ 98%	83 99%	93 99%	80 100%	227 100%	2 100%	5 100%	~	3 100%	8 100%	36 95%	33 97%	251 99%	272 99%	15 100%	236 99%	68 100%
VALID CASES	307	5363	49	84	94	80	227	2	5	1	3	8	38	34	253	275	15	239	68
NUMBER OF RESPONDENTS	307 100%	5363 100%	49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	UHAL 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	
Q77.5 YES	25 8%	275 5%	~	4 8%	7 8%	5 5%	9 11%	~	~	~	3 ~100%	22 ~ 58%	3 9%	21 8%	25 9%	15 ~	18 8%	7 10%		
NO	282 92%	5088 95%	~	45 92%	77 92%	89 95%	71 89%	227 100%	2 100%	5 100%	1 100%	8 ~100%	16 42%	31 91%	232 92%	250 91%	15 100%	221 92%	61 90%	
VALID CASES	307	5363		49	84	94	80	227	2	5	1	3	8	38	34	253	275	15	239	68
NUMBER OF RESPONDENTS	307 100%	5363 100%		49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%

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

			AGE					RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	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	
Q77.6 YES	19 6%	519 10%*		6 ~ 12%~	3 4%	5 5%	5 6%						8 ~ 100%~	11 29%~	13 38%~	6 2%*	17 6%~	2 13%~	14 6%	5 7%
NO	288 94%	4844 90%*		43 ~ 88%~	81 96%	89 95%	75 94%	227 100%~	2 100%~	5 100%~	1 100%~	3 100%~		27 ~ 71%~	21 62%~	247 98%*	258 94%~	13 87%~	225 94%	63 93%
VALID CASES	307	5363		49	84	94	80	227	2	5	1	3	8	38	34	253	275	15	239	68
NUMBER OF RESPONDENTS	307 100%	5363 100%		49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%



Q78 WHAT IS YOUR AGE?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR WHT	AFR-AMER	AS-IAN	NATV HAW/IND/PAC	AMER ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR & POOR	NO CCC	CCC
Q78 UNDER 18	14 5%	223 5%	~	5%~	1%* 1%	7% 7%	5% 7%	14 6%*	~	~	~	~	~	~	~	1 3%~	13 5%~	12 4%~	2 13%~	10 5%	4 6%
18 TO 24	18 6%	229 5%	~	30%~	4% 4%	1%* 1%	1%* 1%	14 6%	~	~	~	~	25%~	2 5%~	2 5%~	3 9%~	15 6%~	17 6%~	1 7%~	15 7%	3 5%
25 TO 34	98 34%	1610 33%	~	36%~	50%* 50%	34% 34%	16%* 16%	82 36%	~	1 20%~	1 100%~	~	1 13%~	11 30%~	7 21%~	91 37%~	94 35%~	4 27%~	79 36%	19 29%	
35 TO 44	88 31%	1842 37%*	~	20%~	27% 27%	38% 38%	34% 34%	66 29%	1 50%~	4 80%~	~	~	2 25%~	13 35%~	16 48%~	69 28%~	81 30%~	6 40%~	66 30%	22 33%	
45 TO 54	41 14%	718 15%	~	2%~	11% 11%	14% 14%	26%* 26%	30 13%	1 50%~	~	~	~	2 67%~	2 25%~	6 16%~	6 18%~	35 14%~	40 15%~	1 7%~	30 14%	11 17%
55 TO 64	18 6%	213 4%	~	5%~	5% 5%	4% 4%	12% 12%	9 5%	12 5%	~	~	~	1 33%~	1 13%~	4 11%~	17 ~	17 7%~	1 6%~	15 7%	3 5%	
65 TO 74	7 2%	77 2%	~	2%~	2% 2%	2% 2%	3% 3%	6 3%	~	~	~	~	~	1 3%~	7 ~	7 3%~	7 3%~	~	4 2%	3 5%	
75 OR OLDER	1 0.4%	15 0.3%	~	~	~	~	1%~	1 0.4%~	~	~	~	~	~	~	~	1 ~0.4%~	1 ~0.4%~	~	~	1 ~	2% 2%
NOT ANSWERED	22	436		5	2	9	6	2						1	1	5	6		20	2	
VALID CASES	285	4927		44	82	85	74	225	2	5	1	3	8	37	33	248	269	15	219	66	
NUMBER OF RESPONDENTS	307	5363		49	84	94	80	227	2	5	1	3	8	38	34	253	275	15	239	68	
	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		
	UHAL 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 & GOOD	FAIR & POOR	NO CCC	CCC	
Q79																				
MALE	44 15%	657 13%	~	3 7%	8 10%	15 17%	18 24%*	33 15%	2 ~	40 ~	~	~	3 ~	6 16%	5 15%	38 15%	42 16%	2 13%	36 16%	8 12%
FEMALE	242 85%	4307 87%	~	40 93%	73 90%	71 83%	58 76%*	193 85%	2 100%	3 60%	1 100%	3 100%	4 57%	32 84%	28 85%	211 85%	228 84%	13 87%	183 84%	59 88%
NOT ANSWERED	21	399		6	3	8	4	1				1		1	4	5		20	1	
VALID CASES	286	4964		43	81	86	76	226	2	5	1	3	7	38	33	249	270	15	219	67
NUMBER OF RESPONDENTS	307 100%	5363 100%		49 100%	84 100%	94 100%	80 100%	227 100%	2 100%	5 100%	1 100%	3 100%	8 100%	38 100%	34 100%	253 100%	275 100%	15 100%	239 100%	68 100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	UHAL 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		
Q80																					
8TH GRADE OR LESS	9 3%	618 13%*	~	~	6 7%	2 2%	1 1%	8 4%	~	~	~	~	~	~	5 15%~	4 2%~	8 3%~	1 7%~	7 3%	2 3%	
SOME HIGH SCHOOL BUT DID NOT GRADUATE	41 14%	624 13%	~	20%~	9 16%	13 9%	8 14%	11 14%	~	~	100%~	1 33%~	1 13%~	1 16%~	6 15%~	5 14%~	36 14%~	39 14%~	2 14%~	31 14%	10 15%
HIGH SCHOOL GRADUATE OR GED	85 30%	1385 28%	~	32%~	14 30%	25 29%	21 28%	64 28%	1 50%~	3 60%~	~	1 33%~	5 62%~	10 26%~	10 29%~	72 29%~	82 30%~	2 14%~	69 31%	16 24%	
SOME COLLEGE OR 2-YEAR DEGREE	121 42%	1555 32%*	~	39%~	17 38%	31 40%	34 51%	39 51%	95 42%	1 50%~	1 20%~	~	1 33%~	2 25%~	20 53%~	13 38%~	108 43%~	114 42%~	7 50%~	90 41%	31 47%
4-YEAR COLLEGE GRADUATE	19 7%	470 10%*	~	9%~	4 4%	3 12%	10 3%*	2 3%*	16 7%	1 20%~	~	~	~	2 5%~	~	19 8%~	19 7%~	~	14 6%	5 8%	
MORE THAN 4-YEAR COLLEGE DEGREE	12 4%	246 5%	~	~	4 5%	6 7%	2 3%	11 5%	~	~	~	~	~	~	1 3%~	10 4%~	10 4%~	2 14%~	10 5%	2 3%	
NOT ANSWERED	20	466			5	2	9	4	1							4	3	1	18	2	
VALID CASES	287	4897			44	82	85	76	226	2	5	1	3	8	38	34	249	272	14	221	66
NUMBER OF RESPONDENTS	307	5363			49	84	94	80	227	2	5	1	3	8	38	34	253	275	15	239	68
	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		
	UHAL 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	IND/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC
Q81 MOTHER OR FATHER	257 91%	4614 94%	40 ~ 95%	71 ~ 87%	81 95%*	65 88%	201 91%	2 100%	5 ~100%	1 ~100%	2 67%	8 ~100%	34 89%	33 97%	221 90%	244 91%	12 80%	201 93%	56 85%	
GRANDPARENT	11 4%	165 3%	5 ~ 6%	2 ~ 2%	4 5%	8 4%	~	~	~	1 ~ 33%	~	2 ~ 5%	10 ~ 4%	10 4%	1 7%	7 3%	4 6%			
AUNT OR UNCLE	19 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
OLDER BROTHER OR SISTER	1 0.4%	8 0.2%	~	~	~	1 1%	1 0.5%	~	~	~	~	~	~	~	1 ~ 0.4%	1 ~ 0.4%	~	1 ~ 0.5%	~	
OTHER RELATIVE	1 0.4%	3 0.1%	~	~	~	1 1%	1 0.5%	~	~	~	~	~	~	~	1 3%	1 ~ 0.4%	~	1 ~ 0.5%	~	
LEGAL GUARDIAN	8 3%	60 1%	1 ~ 2%	5 6%	1 1%	1 1%	8 4%*	~	~	~	~	~	~	~	8 3%	6 2%	2 13%	4 2%	4 6%	
SOMEONE ELSE	5 2%	41 0.8%	1 ~ 2%	1 1%	1 1%	2 3%	3 1%	~	~	~	~	~	2 5%	~	5 ~ 2%	5 2%	~	3 1%	2 3%	
NOT ANSWERED	24	454	7	2	9	6	5								8	8		22	2	
VALID CASES	283	4909	42	82	85	74	222	2	5	1	3	8	38	34	245	267	15	217	66	
NUMBER OF RESPONDENTS	307	5363	49	84	94	80	227	2	5	1	3	8	38	34	253	275	15	239	68	
	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				
	UHAL 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/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q82 YES	2 1%	96 3%*	~	1 4%~	~	~	1 2%	1 0.6%~	~	~	~	~	1 14%~	~	1 6%~	1 0.5%~	2 1%~	~	1 0.6%~	1 2%~	
NO	202 99%	3230 97%*	~	26 96%~	55 100%~	66 100%~	55 98%	166 99%~	1 100%~	4 100%~	~	~	3 100%~	6 86%~	19 100%~	17 94%~	182 99%~	192 99%~	9 100%~	162 99%~	40 98%~
NOT ANSWERED	2	38		1		1										2		2		2	
VALID CASES	204	3326		27	55	66	56	167	1	4			3	7	19	18	183	194	9	163	41
NUMBER OF RESPONDENTS	206 100%	3364 100%		28 100%	55 100%	67 100%	56 100%	167 100%	1 100%	4 100%			3 100%	7 100%	19 100%	18 100%	185 100%	196 100%	9 100%	165 100%	41 100%

[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	
	UHAL 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
Q83.1 YES	1 50%	45 50%	1 ~100%	~	~	~	~	~	~	~	1 ~100%	1 ~100%	1 ~	1 50%	1 ~100%	~
NO	1 50%	44 50%	~	~	~	1 ~100%	1 ~100%	~	~	~	~	~	1 ~100%	1 50%	~	1 ~100%
VALID CASES	2	89	1			1	1				1		1	2	1	1
NUMBER OF RESPONDENTS	2 100%	89 100%	1 100%			1 100%	1 100%				1 100%		1 100%	2 100%	1 100%	1 100%

[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-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q83.2 YES	UHAL TOT CHLD	28 31%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	OHP TOT CHLD	2 100%	61 ~100%	1 ~	1 ~100%	1 ~100%	1 ~	~	~	1 ~100%	1 ~100%	1 ~100%	1 ~100%	2 ~100%	1 ~100%	1 ~100%
VALID CASES		2	89	1	1	1				1			2	1	1	
NUMBER OF RESPONDENTS		2	89	1	1	1				1			2	1	1	
		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			
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q83.3 YES	1	11					1	1						1	1			1
	50%	12%	~	~	~	~	100%	100%	~	~	~	~	~	100%	50%	~	~	100%
NO	1	78		1								1	1	1	1		1	
	50%	88%	~	100%	~	~	~	~	~	~	~	100%	100%	100%	50%	~	100%	~
VALID CASES	2	89		1			1					1	1	1	2		1	1
NUMBER OF RESPONDENTS	2	89		1			1					1	1	1	2		1	1
	100%	100%		100%			100%					100%	100%	100%	100%		100%	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					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q83.4 YES	UHAL TOT CHLD	19 21%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	OHP TOT CHLD	2 70 100%	1 ~100%~	~	1 ~100%~	1 ~100%~	~	~	~	1 ~100%~	1 ~100%~	1 ~100%~	2 ~100%~	1 ~100%~	1 ~100%~	
VALID CASES		2	1		1	1				1		1	2	1	1	
NUMBER OF RESPONDENTS		2	1		1	1				1		1	2	1	1	
		100%	100%		100%	100%				100%		100%	100%	100%	100%	

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

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

		AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- AMR	PAC IAN	NATV ILND	AMER ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q83.5	UHAL TOT CHLD																
YES	OHP TOT CHLD	8 10%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO		2 100%	81 90%~	1 ~100%~	~	1 ~100%~	1 ~100%~	~	~	~	1 ~100%~	~	1 ~100%~	1 ~100%~	2 ~100%~	1 ~100%~	1 ~100%~
VALID CASES		2	89	1		1					1		1	2		1	1
NUMBER OF RESPONDENTS		2	89	1		1					1		1	2		1	1
		100%	100%	100%		100%					100%		100%	100%	100%	100%	100%

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

NQ14 RATING OF ALL CHILD'S HEALTH CARE

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	UHAL 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 & GOOD	FAIR & POOR	NO CCC	CCC	
NQ14 0-6	30 14%	329 10%	5 ~ 15%~	4 6%*	13 21%	8 15%	18 11%	1 100%~	1 25%~	~	~	1 14%~	6 23%~	5 21%~	23 13%~	22 12%~	6 46%~	17 11%*	13 23%*
7-8	84 40%	1112 32%*	9 ~ 27%~	26 42%	24 38%	25 46%	66 42%	~	1 25%~	1 100%~	1 100%~	2 29%~	11 42%~	2 8%~	79 44%~	79 42%~	2 15%~	64 41%	20 36%
9-10	98 46%	2025 58%*	19 ~ 58%~	32 52%	26 41%	21 39%	75 47%	~	2 50%~	~	~	4 57%~	9 35%~	17 71%~	76 43%~	89 47%~	5 38%~	75 48%	23 41%
VALID CASES	212	3466	33	62	63	54	159	1	4	1	1	7	26	24	178	190	13	156	56
NUMBER OF RESPONDENTS	212 100%	3466 100%	33 100%	62 100%	63 100%	54 100%	159 100%	1 100%	4 100%	1 100%	1 100%	7 100%	26 100%	24 100%	178 100%	190 100%	13 100%	156 100%	56 100%
MEAN	2.32	2.49	2.42	2.45	2.21	2.24	2.36	1.00	2.25	2.00	2.00	2.43	2.12	2.50	2.30	2.35	1.92	2.37	2.18
p stat_(*=Sig @ p<=.05)		.000*	~	~.065	.147	.335	.223	~	~	~	~	~	~	~	~	~	~	.110	.107

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	UHAL 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		
NQ41 0-6	36 14%	319 8%*	~ 20%	~ 10%	14%	15%	28 14%	1 100%	1 50%	1 100%	~	~ 14%	5 14%	1 4%	34 15%	32 14%	3 21%	27 14%	9 14%	
7-8	70 27%	980 23%	~ 9%	~ 30%	34%	29%	57 29%	~	~	~	~	~ 31%	11 31%	7 25%	60 27%	62 26%	6 43%	52 27%	18 28%	
9-10	152 59%	2929 69%*	~ 72%	~ 60%	52%	56%	113 57%	~ 50%	1 50%	2 100%	6 100%	19 54%	20 71%	126 57%	142 60%	5 36%	115 59%	37 58%		
VALID CASES	258	4228	46	73	77	62	198	1	2	1	2	6	35	28	220	236	14	194	64	
NUMBER OF RESPONDENTS	258 100%	4228 100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
MEAN	2.45	2.62	2.52	2.51	2.38	2.42	2.43	1.00	2.00	1.00	3.00	3.00	2.40	2.68	2.42	2.47	2.14	2.45	2.44	
p stat_(*=Sig @ p<=.05)		.000*	~	~.406	.295	.709	.417	~	~	~	~	~	~	~	~	~	~	~.878	.879	

[ASKED IF Q30 = YES]

NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	UHAL 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	27%	69%	~	~	17%	~	9%	6%	~	~	~	33%	~	33%	4%	5%	25%	~	11%
7-8	26%	178%	~	50%	~	33%	27%	33%	~	~	~	20%	~	30%	27%	25%	33%	22%	
9-10	67%	428%	~	50%	83%	67%	64%	61%	~	~	~	67%	80%	67%	65%	68%	50%	67%	67%
VALID CASES	27	675	4	6	6	11	18				3	5	3	23	22	4	9	18	
NUMBER OF RESPONDENTS	27	675	4	6	6	11	18				3	5	3	23	22	4	9	18	
	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	
MEAN	2.59	2.53	2.50	2.67	2.67	2.55	2.56				2.33	2.80	2.33	2.61	2.64	2.25	2.67	2.56	
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		
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC	
NQ54 0-6	54 19%	619 12%*	~	20%~	15%	16%	26%	39 17%	1 50%~	1 20%~	~	~	2 25%~	10 27%~	7 21%~	47 19%~	50 19%~	4 29%~	34 15%*	20 30%*
7-8	117 40%	1448 29%*	~	42%~	43%	34%	43%	89 40%	~	1 20%~	1 100%~	1 33%~	2 25%~	20 54%~	6 18%~	106 43%~	107 40%~	6 43%~	94 42%	23 35%
9-10	119 41%	2927 59%*	~	38%~	42%	50%*	31%*	95 43%	1 50%~	3 60%~	~	2 67%~	4 50%~	7 19%~	21 62%~	94 38%~	113 42%~	4 29%~	96 43%	23 35%
VALID CASES	290	4994		45	81	90	74	223	2	5	1	3	8	37	34	247	270	14	224	66
NUMBER OF RESPONDENTS	290 100%	4994 100%		45 100%	81 100%	90 100%	74 100%	223 100%	2 100%	5 100%	1 100%	3 100%	8 100%	37 100%	34 100%	247 100%	270 100%	14 100%	224 100%	66 100%
MEAN	2.22	2.46		2.18	2.27	2.34	2.05	2.25	2.00	2.40	2.00	2.67	2.25	1.92	2.41	2.19	2.23	2.00	2.28	2.05
p stat_(*=Sig @ p<=.05)		.000*	~	~.486	.064	.026*	.271	~	~	~	~	~	~	~	~	~	~	~	~.041*	.039*

GETTING NEEDED CARE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NPRBSEE4 NQ46	2.00	2.21	2.00	1.78	2.29	2.00	2.14					1.67	2.00	1.50	2.07	2.00	2.00	2.17	1.91
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCARNES4 NQ15	2.35	2.44	2.21	2.50	2.32	2.28	2.35	3.00	2.00	2.00	2.00	2.43	2.31	2.29	2.36	2.33	2.46	2.38	2.24
p stat_(*=Sig @ p<=.05)	.063		~	~.034*	.759	.416	.825	~	~	~	~	~	~	~	~	~	~	.185	.185
COMPOSITE	2.17	2.32	x 2.11	2.14	2.30	2.14	2.24	3.00	2.00	2.00	2.00	2.05	2.15	1.90	2.21	2.17	2.23	2.28	2.07
p stat_(*=Sig @ p<=.05)	.071		~	~.786	.304	.812	.121	~	~	~	~	~	~	~	~	~	~	~.045*	.475

GETTING CARE QUICKLY

		AGE					RACE					ETHNICITY	HEALTH STATUS	CCC SCREENER						
	UHAL 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	2.65	2.60	2.68	2.72	2.67	2.56	2.68	3.00				2.00	3.00	2.47	2.33	2.68	2.65	2.56	2.73	2.45
p stat_(*=Sig @ p<=.05)		.416	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NAPGET4 NQ6	2.31	2.43	2.30	2.40	2.31	2.22	2.35	1.00	3.00			2.00	2.17	1.96	2.24	2.29	2.30	2.23	2.34	2.23
p stat_(*=Sig @ p<=.05)		.027*	~	~.317		~.329	~	~	~	~	~	~	~	~	~	~	~	~	~.394	.394
COMPOSITE	2.48	2.51	x 2.49	2.56	2.49	2.39	2.51	2.00	3.00		x 2.00	2.58	2.22		2.29	2.49	2.47	2.39	2.54	2.34
p stat_(*=Sig @ p<=.05)		.780	~	~.690	.972	.674	.677	~	~	~	~	~	~	~	~	~	~	~	~.491	.520



HOW WELL DOCTORS COMMUNICATE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	UHAL 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- OHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC
NDREXPL4 NQ32	2.71	2.69	2.77	2.74	2.65	2.71	2.76	2.50	2.00	2.67	2.59	2.57	2.74	2.75	2.29	2.76	2.59	
p stat_(*=Sig @ p<=.05)	.647		~	~.709	.365	~	~	~	~	~	~	~	~	~	~	~	.083	.082
NDRLSTN4 NQ33	2.68	2.71	2.63	2.74	2.67	2.67	2.71	2.00	3.00	2.50	2.48	2.52	2.69	2.69	2.50	2.73	2.56	
p stat_(*=Sig @ p<=.05)	.434		~	~.372	.853	~	~	~	~	~	~	~	~	~	~	~	.083	.082
NDRESPU4 NQ34	2.72	2.77	2.77	2.77	2.67	2.67	2.75	2.00	3.00	2.67	2.59	2.61	2.74	2.75	2.43	2.75	2.63	
p stat_(*=Sig @ p<=.05)	.215		~	~.348	.479	~	~	~	~	~	~	~	~	~	~	~	.203	.202
NDRTMEN4 NQ37	2.53	2.49	2.46	2.64	2.45	2.52	2.59	1.50	3.00	2.17	2.32	2.09	2.59	2.54	2.29	2.56	2.44	
p stat_(*=Sig @ p<=.05)	.505		~	~.100	.392	~	~	~	~	~	~	~	~	~	~	~	.341	.337
COMPOSITE	2.66	2.67	x 2.66	2.72	2.61	2.64	2.70	x 2.00	x 2.75	2.50	2.49	2.45	2.69	2.68	2.37	2.70	2.56	
p stat_(*=Sig @ p<=.05)	.968		~	~.823	.866	~	~	~	~	~	~	~	~	~	~	~	.716	.718

CUSTOMER SERVICE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	UHAL 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 & GOOD	FAIR & POOR	NO CCC	CCC
NPBCLCS4 NQ50	2.36	2.24		2.29	2.36	2.27	2.50	2.33	3.00			3.00	2.33	2.13	2.42	2.39	2.00	2.35	2.38
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ51	2.64	2.57		2.57	2.57	2.64	2.75	2.52	3.00			3.00	3.00	2.63	2.61	2.68	1.67	2.61	2.69
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.50	2.41	x	2.43	2.46	2.45	2.62	2.42	x 3.00	x	x	3.00	2.67	2.38	2.52	2.54	1.83	2.48	2.54
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	UHAL 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- OTH	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NNRXWHY NQ11	2.89	2.88	2.85	2.90	2.80	3.00	2.85	3.00	3.00	3.00	3.00	3.00	3.00	2.86	2.87	3.00	2.83	3.00	
p stat_(*=Sig @ p<=.05)		.755	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NNRXWYNT NQ12	2.15	2.40	2.08	1.90	2.20	2.40	2.06	3.00	3.00	1.00	3.00	2.56	2.56	2.14	2.19	2.00	1.98	2.43	
p stat_(*=Sig @ p<=.05)		.033*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NRXBST NQ13	2.42	2.55	1.92	2.50	2.40	2.68	2.36	3.00	1.00	3.00	3.00	2.33	2.56	2.34	2.35	2.67	2.36	2.50	
p stat_(*=Sig @ p<=.05)		.220	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.49	2.61	x 2.28	2.43	2.47	2.69	2.42	x 3.00	2.33	2.33	3.00	2.63	2.70	2.45	2.47	2.56	2.39	2.64	
p stat_(*=Sig @ p<=.05)		.708	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

ACCESS TO SPECIALIZED SERVICES

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	UHAL TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NEZMDEQ NQ20	2.18	2.15		2.00	2.83	1.75	1.83	2.45				2.00	1.67	2.29	2.23	2.00	1.86	2.40		
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NEZTHP NQ23	2.10	1.94		3.00	2.50	1.60	1.83	2.31				1.00	2.00	1.25	2.31	2.19	1.75	2.63	1.75	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NEZTC NQ26	1.85	2.08		1.00	2.20	1.91	1.55	1.93				1.00	1.33	1.25	1.89	1.71	2.50	1.44	2.00	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
COMPOSITE	2.04	2.06	x	2.00	2.51	1.75	1.74	2.23	x	x	x	x	1.00	1.78	1.39	2.16	2.04	2.08	1.98	2.05
p stat_(*=Sig @ p<=.05)		.919	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	UHAL 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	62%	75%		60%	44%	71%	69%	68%					33%	71%	25%	68%	61%	75%	67%	59%
CARNES4 Q15	86%	88%		82%	92%	85%	83%	86%	100%	75%	100%	100%	100%	81%	83%	87%	86%	85%	88%	82%
AVERAGE	74.01	81.22	x	70.91	68.19	78.46	76.28	77.17	x	75.00	x	x	66.67	76.10	54.17	77.43	73.48	79.81	77.24	70.45

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	UHAL 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	90%	90%		89%	91%	89%	91%	90%	100%			100%	100%	84%	67%	92%	90%	89%	94%	82%
APGET4 Q6	81%	84%		80%	85%	82%	76%	83%	0%	100%		100%	83%	65%	76%	81%	81%	69%	83%	77%
AVERAGE	85.53	87.16	x	84.74	87.77	85.26	83.82	86.78	x	x	x	x	83.33	74.71	71.43	86.33	85.46	79.06	88.17	79.30

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	UHAL 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 NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
DREXPL4 Q32	93%	93%	94%	95%	90%	92%	94%	100%	100%	83%	90%	87%	94%	95%	71%	94%	89%			
DRLSTN4 Q33	92%	94%	89%	96%	88%	92%	93%	50%	100%	83%	86%	83%	93%	92%	86%	93%	87%			
DRESPU4 Q34	93%	95%	91%	98%	90%	90%	94%	50%	100%	83%	90%	87%	94%	94%	79%	94%	89%			
DRTMEN4 Q37	89%	86%	91%	95%	84%	88%	92%	50%	100%	83%	86%	73%	92%	91%	71%	92%	83%			
AVERAGE	91.6	92.0	x	91.4	96.0	88.2	90.1	93.3	x	x	x	x	83.3	87.8	82.3	93.1	92.9	76.8	93.4	87.0

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	UHAL 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	82%	77%		86%	79%	82%	83%	82%		100%				100%	83%	75%	85%	84%	67%	84%	77%
CSRESP Q51	89%	91%		86%	86%	91%	92%	85%		100%				100%	100%	88%	88%	89%	67%	87%	92%
AVERAGE	85.23	83.89	x	85.71	82.14	86.36	87.50	83.33	x	x	x	x	x	x	91.67	81.25	86.36	86.84	66.67	85.48	84.62



SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	UHAL 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 NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NRXWHY Q11	95%	94%	92%	95%	90%	100%	92%	100%	100%	100%	100%	100%	93%	94%	100%	91%	100%		
NRXWYNT Q12	58%	70%	54%	45%	60%	70%	53%	100%	100%	0%	100%	78%	57%	60%	50%	49%	71%		
RXBST Q13	71%	78%	46%	75%	70%	84%	68%	100%	0%	100%	100%	67%	67%	68%	83%	68%	75%		
AVERAGE	74.3	80.5	x	64.1	71.7	73.3	84.7	71.1	x	x	x	x	81.5	85.2	72.4	73.7	77.8	69.5	82.1

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	UHAL 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 NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
EZMDEQ Q20	71%	70%	100%	100%	50%	50%	82%					75%	33%	79%	77%	50%	71%	70%		
EZTHP Q23	60%	61%	100%	75%	40%	50%	69%				0%	50%	25%	69%	62%	50%	88%	42%		
EZTC Q26	52%	67%	0%	70%	55%	36%	56%				0%	33%	25%	54%	46%	75%	22%	63%		
AVERAGE	60.7	66.1	x	x	81.7	48.2	45.5	68.9	x	x	x	x	x	52.8	27.8	67.0	62.0	58.3	60.4	58.1

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	UHAL 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 & GOOD	FAIR & POOR	NO CCC	CCC		
DRTLKU Q38	83%	84%	94%	84%	76%	81%	85%	100%	100%	83%	69%	83%	83%	83%	79%	83%	83%			
DRUNCON Q43	92%	89%	86%	86%	95%	96%	93%	100%	100%	100%	92%	100%	92%	95%	78%	88%	94%			
DRUNFAM Q44	84%	84%	57%	81%	91%	87%	85%	100%	100%	100%	75%	67%	86%	87%	63%	79%	86%			
AVERAGE	86.2	85.5	x	79.0	83.6	87.6	88.0	87.4	x	x	x	x	83.3	78.8	83.1	87.1	88.4	72.9	83.3	87.7

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	UHAL 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 & GOOD	FAIR & POOR	NO CCC	CCC	
HELPCONT Q18	78%	94%		67%	88%	71%	91%				100%	40%	75%	79%	77%	80%	86%	73%		
HLPCOORD Q29	55%	60%	56%	46%	40%	68%	58%	0%		0%	100%	50%	67%	55%	54%	60%	50%	62%		
AVERAGE	66.3	76.8	x	55.6	56.4	63.8	69.7	74.6	x	x	x	x	x	45.0	70.8	66.6	65.3	70.0	67.9	67.1

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

PAGE QUESTION TITLE

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*





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.

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** ↓

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

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

\_\_\_\_\_

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

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

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

- 7. In the last 6 months, not counting the times your child went to an emergency room, how many times did he or she go to a doctor's office or clinic to get health care?
  - None → *Go to Question 16*
  - 1 time
  - 2
  - 3
  - 4
  - 5 to 9
  - 10 or more times
  
- 8. In the last 6 months, did you and your child's doctor or other health provider talk about specific things you could do to prevent illness in your child?
  - Yes
  - No
  
- 9. In the last 6 months, how often did you have your questions answered by your child's doctors or other health providers?
  - Never
  - Sometimes
  - Usually
  - Always
  
- 10. In the last 6 months, did you and your child's doctor or other health provider talk about starting or stopping a prescription medicine for your child?
  - Yes
  - No → *Go to Question 14*
  
- 11. Did you and a doctor or other health provider talk about the reasons you might want your child to take a medicine?
  - Yes
  - No



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

- Yes
- No

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

- Yes
- No

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No

**SPECIALIZED SERVICES**

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

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

- Yes
- No → *Go to Question 22*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 25*



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 28*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 30*

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

- Yes
- No

### YOUR CHILD'S PERSONAL DOCTOR

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

- Yes
- No → *Go to Question 45*

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

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

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

- Never
- Sometimes
- Usually
- Always



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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 37*

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 41*

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

- Never
- Sometimes
- Usually
- Always

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

0 1 2 3 4 5 6 7 8 9 10

Worst Personal Doctor Possible Best Personal Doctor Possible

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

- Yes
- No → *Go to Question 45*





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

- Yes
- No

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

- Yes
- No

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

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

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

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

**GETTING HEALTH CARE FROM SPECIALISTS**

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

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

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

- Yes
- No → **Go to Question 49**

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

- Never
- Sometimes
- Usually
- Always

**YOUR CHILD'S HEALTH PLAN**

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

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

- Yes
- No → **Go to Question 52**

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

- Never
- Sometimes
- Usually
- Always



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → **Go to Question 54**

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

- Never
- Sometimes
- Usually
- Always

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

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

**PRESCRIPTION MEDICINES**

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

- Yes
- No → **Go to Question 57a**

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

**ACCESS TO DENTAL CARE**

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

- Yes
- No

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

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



## ADDITIONAL QUESTIONS

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

- Yes
- No → *Go to Question 58*

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

- Yes
- No

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

- Yes
- No

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

## ABOUT YOUR CHILD AND YOU

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Yes
- No → *Go to Question 63*

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

- Yes
- No → *Go to Question 63*

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

- Yes
- No

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

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



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

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

78. What is your age?

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

79. Are you male or female?

- Male
- Female

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

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

81. How are you related to the child?

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

82. Did someone help you complete this survey?

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

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

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

**THANK YOU**

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

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

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





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

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

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

**INSTRUCCIONES PARA EL CUESTIONARIO**

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

Marca  
Correcta ●

Marca  
Incorrecta   

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

● Sí → *Pase a la Pregunta 1*  
○ No

↓ **COMIENCE AQUI** ↓

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

- Sí → *Pase a la pregunta 3*
- No

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

\_\_\_\_\_



## LA ATENCIÓN MÉDICA QUE USTED RECIBIÓ EN LOS ÚLTIMOS 6 MESES

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

3. En los últimos 6 meses, ¿tuvo usted una enfermedad, lesión, o problema de salud para el cual necesitó atención inmediata en una clínica, en una sala de emergencia o en un consultorio médico?
- Sí  
 No → *Pase a la pregunta 5*
4. En los últimos 6 meses, cuando usted necesitó atención inmediata, ¿con qué frecuencia lo atendieron tan pronto como lo necesitaba?
- Nunca  
 A veces  
 La mayoría de las veces  
 Siempre
5. En los últimos 6 meses, ¿hizo alguna cita para un chequeo o una consulta regular en un consultorio médico o en una clínica?
- Sí  
 No → *Pase a la pregunta 7*
6. En los últimos 6 meses, ¿con qué frecuencia consiguió una cita para un chequeo o una consulta regular en un consultorio médico o en una clínica tan pronto como la necesitaba?
- Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

7. En los últimos 6 meses, sin contar las veces en que fue a una sala de emergencia, ¿cuántas veces fue a un consultorio médico o a una clínica para recibir atención médica para usted mismo?
- Ninguna vez → *Pase a la pregunta 15*  
 1 vez  
 2  
 3  
 4  
 5 a 9  
 10 veces o más
8. En los últimos 6 meses, ¿hablaron usted y un doctor u otro profesional médico sobre cosas específicas que usted podría hacer para prevenir enfermedades?
- Sí  
 No
9. En los últimos 6 meses, ¿hablaron usted y un doctor u otro profesional médico sobre comenzar o suspender una medicina recetada?
- Sí  
 No → *Pase a la pregunta 13*
10. ¿Hablaron usted y un doctor u otro profesional médico sobre las razones por las que tal vez quiera tomar una medicina?
- Sí  
 No
11. ¿Hablaron usted y un doctor u otro profesional médico sobre las razones por las que tal vez no quiera tomar una medicina?
- Sí  
 No

12. Cuando hablaron de comenzar o suspender una medicina recetada, ¿le preguntó un doctor u otro profesional médico sobre lo que usted creía que sería lo mejor para usted?

- Sí
- No

13. 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 a toda la atención médica que ha recibido en los últimos 6 meses?

- |                                 |                       |                       |                       |                       |                       |                                  |                       |                       |                       |                       |
|---------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/>           | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 0                               | 1                     | 2                     | 3                     | 4                     | 5                     | 6                                | 7                     | 8                     | 9                     | 10                    |
| La peor atención médica posible |                       |                       |                       |                       |                       | La mejor atención médica posible |                       |                       |                       |                       |

14. En los últimos 6 meses, ¿con qué frecuencia le fue fácil conseguir la atención médica, las pruebas o el tratamiento que usted necesitaba?

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

### SU DOCTOR PERSONAL

15. El doctor personal es aquel a quien usted va si necesita un chequeo, quiere pedir consejo sobre un problema de salud o si se enferma o lastima. ¿Tiene usted un doctor personal?

- Sí
- No → *Pase a la pregunta 24*

16. En los últimos 6 meses, ¿cuántas veces fue a ver a su doctor personal para recibir atención médica para usted mismo?

- Ninguna vez → *Pase a la pregunta 23*
- 1 vez
- 2
- 3
- 4
- 5 a 9
- 10 veces o más

17. En los últimos 6 meses, ¿con qué frecuencia su doctor personal le explicó las cosas de una manera fácil de entender?

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

18. En los últimos 6 meses, ¿con qué frecuencia su doctor personal le escuchó con atención?

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

19. En los últimos 6 meses, ¿con qué frecuencia su doctor personal demostró respeto por lo que usted tenía que decir?

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





27. Queremos saber cómo califica al especialista al que fue con más frecuencia en los últimos 6 meses. Usando un número del 0 al 10, el 0 siendo el peor especialista posible y el 10 el mejor especialista posible, ¿qué número usaría para calificar al especialista?

0 1 2 3 4 5 6 7 8 9 10

El peor especialista posible El mejor especialista posible

### SU PLAN DE SALUD

Las siguientes preguntas se refieren a su experiencia con su plan de salud.

28. En los últimos 6 meses, ¿buscó alguna información en materiales escritos o en la Internet sobre cómo funciona su plan de salud?

- Sí  
 No → *Pase a la pregunta 30*

29. En los últimos 6 meses, ¿con qué frecuencia encontró la información que usted necesitaba sobre cómo funciona su plan de salud en materiales escritos o en la Internet?

- Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

30. En los últimos 6 meses, ¿recibió información o ayuda de parte del servicio al cliente de su plan de salud?

- Sí  
 No → *Pase a la pregunta 33*

31. En los últimos 6 meses, ¿con qué frecuencia el servicio al cliente de su plan de salud le dio la información o ayuda que usted necesitaba?

- Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

32. En los últimos 6 meses, ¿con qué frecuencia el personal de servicio al cliente de su plan de salud le trató con cortesía y respeto?

- Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

33. En los últimos 6 meses, ¿le dio su plan de salud algún formulario para que lo llenara?

- Sí  
 No → *Pase a la pregunta 35*

34. En los últimos 6 meses, ¿con qué frecuencia fueron fáciles de llenar los formularios de su plan de salud?

- Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

35. Usando un número del 0 al 10, el 0 siendo el peor plan de salud posible y el 10 el mejor plan de salud posible, ¿qué número usaría para calificar su plan de salud?

0 1 2 3 4 5 6 7 8 9 10

El peor plan de salud posible El mejor plan de salud posible

## 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**





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

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

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

**INSTRUCCIONES PARA EL CUESTIONARIO**

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

Marca  
Correcta



Marca  
Incorrecta



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

- Sí ➔ *Pase a la Pregunta 1*
- No



**COMIENCE AQUI**



Por favor conteste las preguntas para el niño cuyo nombre está anotado en el sobre. No las conteste para ningún otro niño.

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

- Sí ➔ *Pase a la pregunta 3*
- No

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

\_\_\_\_\_

**LA ATENCIÓN MÉDICA QUE  
RECIBIÓ  
SU NIÑO EN LOS ÚLTIMOS 6 MESES**

Estas preguntas son acerca de la atención médica que ha recibido su niño. **No** incluya la atención que recibió su niño cuando pasó la noche hospitalizado. **No** incluya las consultas de su niño con el dentista.

3. En los últimos 6 meses, ¿tuvo su niño una enfermedad, lesión, o problema de salud para el cual necesitó atención inmediata en una clínica, en una sala de emergencia o en un consultorio médico?

Sí  
 No → *Pase a la pregunta 5*

4. En los últimos 6 meses, cuando su niño necesitó atención inmediata, ¿con qué frecuencia atendieron a su niño tan pronto como él o ella lo necesitaba?

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

5. En los últimos 6 meses, ¿hizo alguna cita para un chequeo o una consulta regular para su niño en un consultorio médico o en una clínica?

Sí  
 No → *Pase a la pregunta 7*

6. En los últimos 6 meses, ¿con qué frecuencia consiguió una cita para un chequeo o una consulta regular para su niño en un consultorio médico o en una clínica tan pronto como su niño la necesitaba?

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

7. En los últimos 6 meses, sin contar las veces en que su niño fue a una sala de emergencia, ¿cuántas veces fue su niño a un consultorio médico o a una clínica para que lo atendieran?

Ninguna vez → *Pase a la pregunta 16*  
 1 vez  
 2  
 3  
 4  
 5 a 9  
 10 veces o más

8. En los últimos 6 meses, ¿hablaron usted y el doctor u otro profesional médico de su niño sobre cosas específicas que usted podría hacer para prevenir que su niño se enferme?

Sí  
 No

9. En los últimos 6 meses, ¿con qué frecuencia le contestaron sus preguntas los doctores u otros profesionales médicos de su niño?

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

10. En los últimos 6 meses, ¿hablaron usted y el doctor u otro profesional médico de su niño sobre comenzar o suspender una medicina recetada?

- Sí
- No → *Pase a la pregunta 14*

11. ¿Hablaron usted y un doctor u otro profesional médico sobre las razones por las que tal vez usted quiera que su niño tome una medicina?

- Sí
- No

12. ¿Hablaron usted y un doctor u otro profesional médico sobre las razones por las que tal vez usted no quiera que su niño tome una medicina?

- Sí
- No

13. Cuando hablaron de comenzar o suspender una medicina recetada para su niño, ¿le preguntó un doctor u otro profesional médico sobre lo que usted creía que sería lo mejor para su niño?

- Sí
- No

14. Usando un número del 0 al 10, el 0 siendo la peor atención médica posible y el 10 la mejor atención médica posible, ¿qué número usaría para calificar toda la atención médica que su niño ha recibido en los últimos 6 meses?

- |                                 |                       |                       |                       |                       |                       |                                  |                       |                       |                       |                       |
|---------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/>           | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 0                               | 1                     | 2                     | 3                     | 4                     | 5                     | 6                                | 7                     | 8                     | 9                     | 10                    |
| La peor atención médica posible |                       |                       |                       |                       |                       | La mejor atención médica posible |                       |                       |                       |                       |

15. En los últimos 6 meses, ¿con qué frecuencia le fue fácil conseguir la atención, las pruebas o el tratamiento que su niño necesitaba?

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

16. ¿Está matriculado actualmente su niño en algún tipo de escuela o guardería/cuidado infantil?

- Sí
- No → *Pase a la pregunta 19*

17. En los últimos 6 meses, ¿necesitó que los doctores o los otros profesionales médicos de su niño se pusieran en contacto con una escuela o guardería acerca de la salud o la atención médica de su niño?

- Sí
- No → *Pase a la pregunta 19*

18. En los últimos 6 meses, ¿consiguió la ayuda de los doctores o los otros profesionales médicos de su niño que necesitaba para ponerse en contacto con la escuela o guardería de su niño?

- Sí
- No

## SERVICIOS ESPECIALIZADOS

19. En el equipo o dispositivo médico especial se incluye un andador, silla de ruedas, nebulizador, tubos de alimentación o equipo de oxígeno. En los últimos 6 meses, ¿consiguió o intentó conseguir algún equipo o dispositivo médico especial para su niño?

- Sí
- No → *Pase a la pregunta 22*

20. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir equipo o dispositivos médicos especiales para su niño?

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

21. ¿Alguien del plan de salud, del consultorio médico o clínica de su niño le ayudó a conseguir el equipo o dispositivos médicos especiales para su niño?

- Sí
- No

22. En los últimos 6 meses, ¿consiguió o intentó conseguir terapia especial para su niño tal como terapia física, ocupacional o del habla?

- Sí
- No → *Pase a la pregunta 25*

23. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir esta terapia para su niño?

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

24. ¿Alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a conseguir esta terapia para su niño?

- Sí
- No

25. En los últimos 6 meses, ¿consiguió o intentó conseguir tratamiento o consejería para su niño, para un problema emocional, de desarrollo o de comportamiento?

- Sí
- No → *Pase a la pregunta 28*

26. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir este tratamiento o consejería para su niño?

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

27. ¿Alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a conseguir este tratamiento o consejería para su niño?

- Sí
- No

28. En los últimos 6 meses, ¿recibió su niño atención de más de un tipo de profesional médico, o usó más de un tipo de servicio de salud?

- Sí
- No → *Pase a la pregunta 30*

29. En los últimos 6 meses, ¿alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a coordinar la atención médica de su niño entre estos profesionales o servicios diferentes?

- Sí
- No

### EL DOCTOR PERSONAL DE SU NIÑO

30. El doctor personal es aquel a quien su niño va si necesita un chequeo, tiene un problema de salud o si se enferma o lastima. ¿Tiene su niño un doctor personal?

- Sí
- No → *Pase a la pregunta 45*

31. En los últimos 6 meses, ¿cuántas veces fue su niño a ver a su doctor personal para recibir atención médica?

- Ninguna vez → *Pase a la pregunta 41*
- 1 vez
- 2
- 3
- 4
- 5 a 9
- 10 veces o más

31a. En los últimos 6 meses, ¿con qué frecuencia se le hizo difícil hablar o entender al doctor personal de su niño porque hablaban idiomas diferentes?

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

32. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño le explicó las cosas sobre la salud de su niño de una manera fácil de entender?

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

33. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño le escuchó a usted con atención?

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

34. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño demostró respeto por lo que usted tenía que decir?

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

35. ¿Su niño puede hablar con los doctores sobre su atención médica?

- Sí
- No → *Pase a la pregunta 37*

36. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño le explicó las cosas a su niño de una manera fácil de entender?

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





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



## LA ATENCIÓN MÉDICA QUE RECIBIÓ DE ESPECIALISTAS

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

45. 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 para su niño con un especialista?

- Sí
- No → *Pase a la pregunta 49*

46. En los últimos 6 meses, ¿con qué frecuencia consiguió una cita con un especialista para su niño tan pronto como él o ella la necesitaba?

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

47. ¿Cuántos especialistas ha visto su niño en los últimos 6 meses?

- Ninguno → *Pase a la pregunta 49*
- 1 especialista
- 2
- 3
- 4
- 5 especialistas o más

48. Queremos saber cómo califica al especialista al que su niño fue con más frecuencia en los últimos 6 meses. Usando un número del 0 al 10, el 0 siendo el peor especialista posible y el 10 el mejor especialista posible, ¿qué número usaría para calificar a ese especialista?

- |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <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               |                       |                       |                       |                       |                       |                       |                       | El mejor              |                       |                       |
| especialista          |                       |                       |                       |                       |                       |                       |                       | especialista          |                       |                       |
| posible               |                       |                       |                       |                       |                       |                       |                       | posible               |                       |                       |

## EL PLAN DE SALUD DE SU NIÑO

Las siguientes preguntas se refieren a su experiencia con el plan de salud de su niño.

49. En los últimos 6 meses, ¿recibió información o ayuda de parte del servicio al cliente del plan de salud de su niño?

- Sí
- No → *Pase a la pregunta 52*

50. En los últimos 6 meses, ¿con qué frecuencia el servicio al cliente del plan de salud de su niño le dio la información o ayuda que usted necesitaba?

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

51. En los últimos 6 meses, ¿con qué frecuencia el personal de servicio al cliente del plan de salud de su niño le trató con cortesía y respeto?

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

52. En los últimos 6 meses, ¿le dio el plan de salud de su niño algún formulario para llenar?

- Sí
- No → *Pase a la pregunta 54*

53. En los últimos 6 meses, ¿con qué frecuencia fueron fáciles de llenar los formularios del plan de salud de su niño?

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

54. Usando un número del 0 al 10, el 0 siendo el peor plan de salud posible y el 10 el mejor plan de salud posible, ¿qué número usaría para calificar al plan de salud 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 plan de salud posible |                       |                       |                       |                       |                       | El mejor plan de salud posible |                       |                       |                       |                       |

**MEDICINAS RECETADAS**

55. En los últimos 6 meses, ¿consiguió alguna medicina recetada o renovó una receta para una medicina recetada para su niño?

- Sí
- No → *Pase a la pregunta 57a*

56. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir medicinas recetadas para su niño a través de su plan de salud?

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

57. ¿Alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a conseguir las medicinas recetadas para su niño?

- Sí
- No

**ACCESO A CUIDADO DENTAL**

57a. Un dentista regular es a quien su niño va a ver para un chequeo y limpieza o cuando tiene una carie o un dolor de diente. ¿Su niño tiene un dentista regular?

- Sí
- No

57b. En los últimos 6 meses, si su niño necesitó ver a un dentista de inmediato por una emergencia dental, ¿el/ella pudo ver a un dentista tan pronto como usted quería?

- Nunca
- A veces
- La mayoría de las veces
- Siempre
- Mi niño no tuvo una emergencia dental en los últimos 6 meses



## 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 --&gt; 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 --&gt; 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 --&gt; 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 --&gt; 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 --&gt; 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 --&gt; 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 --&gt; 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 --&gt; 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 --&gt; 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 --&gt; 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 --&gt; CHCOUNS

## WHYSTA

70. / WHYSTA

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

1. YES
2. NO -----> CHCOUNS

DK/REFUSAL/NOT ASCERTAINED --&gt; 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 --&gt; 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.