



Western Oregon Advanced Health  
CAHPS® 5.0 Medicaid Survey

Banner Book Report

June 2015



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## METHODOLOGY

### Introduction

This banner book report summarizes the results of the 2015 CAHPS® Medicaid survey of Western Oregon Advanced Health members. Western Oregon Advanced Health 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	
	Western Oregon Advanced Health	Overall	Western Oregon Advanced Health	Overall
<b>**First mailing - sent</b>	900	15300	900	15300
<b>*First mailing - usable survey returned</b>	224	3240	149	2377
<b>Second mailing - sent</b>	655	12007	733	12648
<b>*Second mailing - usable survey returned</b>	66	979	63	987
<b>*Phone - usable surveys</b>	71	1234	93	1999
<b>Total - usable surveys</b>	361	5453	305	5363
<b>†Ineligible: According to population criteria‡</b>	13	261	7	158
<b>†Ineligible: Deceased</b>	3	39	1	1
<b>†Ineligible: Mentally or physically unable to complete survey</b>	9	207	0	0
<b>†Ineligible: Language barrier</b>	0	52	0	40
<b>Incorrect address AND incorrect phone number</b>	80	1173	77	1296
<b>Refusal/Returned survey blank</b>	27	667	46	729
<b>Nonresponse - Unavailable by mail or phone</b>	407	7448	464	7713
<b>Adjusted Response Rate</b>	<b>41.3%</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	183 42.2%	149 41.3%	-0.89%
Female	251 57.8%	212 58.7%	0.89%
18-24	74 17.1%	32 8.9%	-8.19%
25-34	117 27.0%	46 12.7%	-14.22%
35-44	83 19.1%	52 14.4%	-4.72%
45-54	84 19.4%	75 20.8%	1.42%
55-64	57 13.1%	115 31.9%	18.72%
65-74	16 3.7%	27 7.5%	3.79%
75 or Older	3 0.7%	14 3.9%	3.19%

### Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	256 50.2%	160 52.5%	2.26%
Female	254 49.8%	145 47.5%	-2.26%
<3	104 20.4%	53 17.4%	-3.02%
4-7	142 27.8%	68 22.3%	-5.55%
8-12	143 28.0%	88 28.9%	0.81%
13 or older	121 23.7%	96 31.5%	7.75%

Q1 OUR RECORDS SHOW THAT YOU ARE NOW IN <WESTERN OREGON ADVANCED HEALTH>. IS THAT RIGHT?

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
Q1 YES	357 100%	5345 100%	29 100%	42 100%	51 100%	68 100%	109 100%	41 100%	289 100%	1 100%	1 100%	6 100%	7 100%	30 100%	22 100%	311 100%	197 100%	137 100%	134 100%	207 100%
NOT ANSWERED	4	108	1	1	1	1	4								4	2	2	1	3	
VALID CASES	357	5345	29	42	51	68	109	41	289	1	1	6	7	30	22	311	197	137	134	207
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%



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?

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
Q3 YES	155 45%	2233 43%	11 39%~	12 28%~	32 63%*	28 41%	54 50%	15 38%~	129 45%	1 ~100%~	3 ~ 50%~	1 14%~	14 47%~	7 33%~	141 45%~	76 39%*	73 53%*	56 41%	96 47%	
NO	191 55%	2997 57%	17 61%~	31 72%~	19 37%*	41 59%	54 50%	25 63%~	158 55%	1 100%~	3 ~ 50%~	6 86%~	16 53%~	14 67%~	169 55%~	118 61%*	65 47%*	79 59%	108 53%	
NOT ANSWERED	15	223	1				2	2	6					1	5	5	1		6	
VALID CASES	346	5230	28	43	51	69	108	40	287	1	1	6	7	30	21	310	194	138	135	204
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%

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				
	WORA 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		
Q4 NEVER	6 4%	63 3%	~	~	~	8%	8%	~	5%	~	~	~	~	7%	~	5%	5%	5%	5%	2%	6%
SOMETIMES	19 14%	285 14%	3 27%	3 27%	4 17%	4 17%	5 10%	~	13 12%	~	~	~	~	29%	17%	12%	18%	8%	17%	13%	
USUALLY	40 30%	563 28%	2 18%	3 27%	6 25%	6 25%	16 33%	5 38%	35 32%	~	~	1 50%	~	7%	33%	30%	30%	29%	32%	27%	
ALWAYS	69 51%	1115 55%	6 55%	5 45%	14 58%	12 50%	23 48%	8 62%	58 52%	~	~	1 50%	~	8%	50%	65%	47%	58%	49%	54%	
#ALWAYS + USUALLY (NET)	109 81%	1678 83%	8 73%	8 73%	20 83%	18 75%	39 81%	13 100%	93 84%	~	~	2 100%	~	9%	83%	101%	77%	87%	81%	81%	
TOP BOX SCORE	69 51%	1115 55%	6 55%	5 45%	14 58%	12 50%	23 48%	8 62%	58 52%	~	~	1 50%	~	8%	50%	65%	47%	58%	49%	54%	
NOT ANSWERED	21	220		1	8	4	6	2	18		1	1	1		1	19	10	11	9	12	
VALID CASES	134	2026	11	11	24	24	48	13	111			2		14	6	122	66	62	47	84	
NUMBER OF RESPONDENTS	155 100%	2246 100%	11 100%	12 100%	32 100%	28 100%	54 100%	15 100%	129 100%	1		3 100%	1	14 100%	7 100%	141 100%	76 100%	73 100%	56 100%	96 100%	

[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?

	WORA 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
Q5 YES	239 70%	3616 70%	19 66%~	18 42%~	35 70%	53 78%	79 75%	29 73%~	197 69%	1 100%	1 100%~	4 ~	4 67%~	23 57%~	12 60%~	215 70%~	119 62%*	109 80%*	80 61%*	153 75%*
NO	104 30%	1586 30%	10 34%~	25 58%~	15 30%	15 22%	26 25%	11 28%~	88 31%	~	~	2 ~	3 33%~	6 43%~	8 21%~	93 40%~	74 38%*	27 20%*	51 39%*	52 25%*
NOT ANSWERED	18	251			1	1	5	2	8					1	2	7	6	3	4	5
VALID CASES	343	5202	29	43	50	68	105	40	285	1	1	6	7	29	20	308	193	136	131	205
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%

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?

	WORA TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE	
Q6 NEVER	6 3%	100 3%			2 7%		3 4%		3 2%	1 100%				1 25%		1 8%	4 2%	3 3%	2 2%		5 4%
SOMETIMES	40 19%	562 17%	6 33%	7 39%	5 17%	7 15%	10 14%	5 23%	31 18%					1 25%	7 32%	2 17%	37 20%	15 14%	23 24%	14 20%	26 19%
USUALLY	59 28%	870 27%	6 33%	3 17%	7 23%	13 28%	22 31%	5 23%	49 28%				1 50%		5 23%	2 17%	54 29%	29 28%	26 27%	16 23%	40 29%
ALWAYS	106 50%	1715 53%	6 33%	8 44%	16 53%	26 57%	37 51%	12 55%	90 52%	1 100%			1 50%	2 50%	10 45%	7 58%	94 50%	58 55%	45 47%	40 57%	65 48%
#ALWAYS + USUALLY (NET)	165 78%	2585 80%	12 67%	11 61%	23 77%	39 85%	59 82%	17 77%	139 80%	1 100%			2 100%	2 50%	15 68%	9 75%	148 78%	87 83%	71 74%	56 80%	105 77%
TOP BOX SCORE	106 50%	1715 53%	6 33%	8 44%	16 53%	26 57%	37 51%	12 55%	90 52%	1 100%			1 50%	2 50%	10 45%	7 58%	94 50%	58 55%	45 47%	40 57%	65 48%
NOT ANSWERED	28	326	1		5	7	7	7	24				2		1		26	14	13	10	17
VALID CASES	211	3247	18	18	30	46	72	22	173	1	1		2	4	22	12	189	105	96	70	136
NUMBER OF RESPONDENTS	239	3573	19	18	35	53	79	29	197	1	1		4	4	23	12	215	119	109	80	153
	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?

	WORA TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- 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	
Q7 NONE	78 23%	1271 25%	6 21%	21 50%	6 12%*	16 23%	21 20%	6 15%	66 23%	~	~	2 33%	3 43%	3 10%	5 24%	70 23%	57 29%*	19 14%*	40 30%*	37 18%*
1 TIME	64 19%	975 19%	5 18%	6 14%	12 24%	8 12%	17 16%	14 35%	51 18%	~100%	1	1 ~17%	1 14%	8 28%	6 29%	55 18%	43 22%	17 13%*	23 17%	39 19%
2	69 20%	973 19%	5 18%	5 12%	13 25%	18 26%	23 22%	5 13%	57 20%	~	~	1 ~17%	1 14%	10 34%	4 19%	65 21%	28 14%*	39 29%*	21 16%	48 24%
3	43 13%	600 12%	3 11%	3 7%	6 12%	13 19%	15 14%	3 8%	39 14%	1 100%	~	1 ~17%	~	2 7%	42 ~14%	26 13%	16 12%	19 14%	24 12%	
4	31 9%	448 9%	4 14%	3 7%	6 12%	3 4%	11 10%	3 8%	24 8%	~	~	1 ~17%	1 14%	1 3%	4 19%	25 8%	14 7%	16 12%	10 8%	20 10%
5 TO 9	40 12%	631 12%	4 14%	2 5%	4 8%	9 13%	13 12%	7 18%	37 13%*	~	~	~	~	1 3%	1 5%	37 12%	20 10%	18 13%	12 9%	27 13%
10 OR MORE TIMES	17 5%	265 5%	1 4%	2 5%	4 8%	2 3%	6 6%	2 5%	12 4%	~	~	~	1 ~14%	4 14%	1 5%	15 5%	7 4%	10 7%	8 6%	9 4%
NOT ANSWERED	19	290	1	1			4	2	7					1	1	6	4	4	2	6
VALID CASES	342	5163	28	42	51	69	106	40	286	1	1	6	7	29	21	309	195	135	133	204
NUMBER OF RESPONDENTS	361	5453	29	43	51	69	110	42	293	1	1	6	7	30	22	315	199	139	135	210
	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?

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE	
Q8 #YES	173 68%	2683 71%	11 50%~	13 65%~	33 75%~	36 68%	60 75%	18 56%~	147 70%~	1 100%~	~	4 ~100%~	17 ~ 65%~	8 50%~	161 70%~	88 66%	79 71%	62 69%	109 68%	
NO	82 32%	1081 29%	11 50%~	7 35%~	11 25%~	17 32%	20 25%	14 44%~	64 30%~	1 ~100%~	~	4 ~100%~	9 35%~	8 50%~	69 30%~	45 34%	33 29%	28 31%	52 32%	
NOT ANSWERED	9	79		1	1		5	2	9						9	5	4	3	6	
VALID CASES	255	3764	22	20	44	53	80	32	211	1	1	4	4	26	16	230	133	112	90	161
NUMBER OF RESPONDENTS	264 100%	3843 100%	22 100%	21 100%	45 100%	53 100%	85 100%	34 100%	220 100%	1 100%	1 100%	4 100%	4 100%	26 100%	16 100%	239 100%	138 100%	116 100%	93 100%	167 100%

[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?

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q9 YES	157 62%	2125 57%	10 45%~	11 55%~	30 70%~	36 68%	48 60%	19 59%~	131 62%~	~	~	~	3 75%~	3 75%~	17 68%~	6 38%~	146 64%~	76 58%	74 66%	57 64%	97 60%
NO	97 38%	1611 43%	12 55%~	9 45%~	13 30%~	17 32%	32 40%	13 41%~	80 38%~	1 100%~	1 100%~	~	1 25%~	1 25%~	8 32%~	10 63%~	83 36%~	56 42%	38 34%	32 36%	64 40%
NOT ANSWERED	10	107	1	2			5	2	9						1	10	6	4	4	6	
VALID CASES	254	3736	22	20	43	53	80	32	211	1	1		4	4	25	16	229	132	112	89	161
NUMBER OF RESPONDENTS	264 100%	3843 100%	22 100%	21 100%	45 100%	53 100%	85 100%	34 100%	220 100%	1 100%	1 100%		4 100%	4 100%	26 100%	16 100%	239 100%	138 100%	116 100%	93 100%	167 100%

[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?

		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/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q10 #YES	135 89%	1887 92%	8 80%~	9 82%~	27 93%~	33 94%~	43 91%~	12 71%~	116 91%~	~	~	~	100%~	2 67%~	2 75%~	12 83%~	5 89%~	126 91%~	67 91%	63 89%	52 91%	80 87%
NO	17 11%	166 8%	2 20%~	2 18%~	2 7%~	2 6%~	4 9%~	5 29%~	12 9%~	~	~	~	~	1 33%~	4 25%~	1 17%~	15 11%~	7 9%	8 11%	5 9%	12 13%	
NOT ANSWERED	34	436	1	2	3	1	10	6	19					1		3	1	21	12	11	6	17
VALID CASES	152	2053	10	11	29	35	47	17	128					2	3	16	6	141	74	71	57	92
NUMBER OF RESPONDENTS	186	2489	11	13	32	36	57	23	147					3	3	19	7	162	86	82	63	109
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%	100%

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



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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q11 #YES	109 71%	1488 73%	4 40%	7 64%	23 79%	28 78%	32 68%	13 72%	93 72%	~	~	~	2 ~100%	12 ~75%	3 50%	102 71%	53 71%	51 71%	42 74%	65 69%
NO	45 29%	562 27%	6 60%	4 36%	6 21%	8 22%	15 32%	5 28%	37 28%	~	~	~	3 ~100%	4 25%	3 50%	41 29%	22 29%	21 29%	15 26%	29 31%
NOT ANSWERED	3	44			1		1	1	1				1		3	1	2			3
VALID CASES	154	2050	10	11	29	36	47	18	130				2	3	6	143	75	72	57	94
NUMBER OF RESPONDENTS	157	2094	10	11	30	36	48	19	131				3	3	6	146	76	74	57	97
	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?

	WORA 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 & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q12 #YES	106 70%	1534 75%	5 56%	9 82%	20 71%	26 74%	30 64%	14 78%	86 68%	~	~	2 ~100%	3 ~100%	13 81%	4 67%	98 70%	51 70%	52 73%	43 75%	61 67%
NO	45 30%	511 25%	4 44%	2 18%	8 29%	9 26%	17 36%	4 22%	41 32%	~	~	~	~	3 ~19%	2 33%	42 30%	22 30%	19 27%	14 25%	30 33%
NOT ANSWERED	6	49	1		2	1	1	1	4			1		1		6	3	3		6
VALID CASES	151	2045	9	11	28	35	47	18	127			2	3	16	6	140	73	71	57	91
NUMBER OF RESPONDENTS	157 100%	2094 100%	10 100%	11 100%	30 100%	36 100%	48 100%	19 100%	131 100%			3 100%	3 100%	17 100%	6 100%	146 100%	76 100%	74 100%	57 100%	97 100%

[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?

	WORA 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-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE			
Q13 WORST HEALTH CARE POSSIBLE	4 2%	29 0.8%	1 5%	~	1 2%	~	2 3%	~	2 1%	~	~	~	~	~	~	1 4%	~	3 1%	0.8%	3 3%	1 1%	3 2%
01	4 2%	27 0.7%	1 5%	~	~	2 4%	1 1%	~	3 1%	~	~	~	~	~	~	1 4%	~	4 2%	0.9%	3 2%	1 1%	3 2%
02	7 3%	39 1%	~	~	1 2%	2 4%	4 5%	~	6 3%	~	~	~	~	~	~	1 4%	~	7 3%	3%	4 3%	3 1%	6 4%
03	8 3%	70 2%	~	~	3 7%	3 6%	1 1%	1 3%	8 4%	~	~	~	~	~	~	~	~	8 4%	2%	2 5%	5 3%	5 3%
04	9 4%	85 2%	3 14%	1 5%	1 2%	~	4 5%	~	8 4%	~	~	~	1 25%	~	~	~	1 6%	8 4%	3%	4 5%	5 6%	4 3%
05	31 12%	285 8%*	4 18%	4 20%	7 16%	5 9%	7 9%	3 10%	22 11%	~	~	~	~	1 25%	6 23%	3 19%	27 12%	11 8%*	18 17%	9 10%	21 13%	
06	14 6%	223 6%	~	1 5%	4 9%	4 8%	4 5%	~	12 6%	~	~	~	~	~	~	~	1 6%	12 5%	5 4%	7 6%	5 6%	8 5%
07	26 10%	493 13%	3 14%	4 20%	4 9%	6 11%	6 8%	2 6%	17 8%	~	1 100%	~	~	1 25%	6 23%	2 13%	23 10%	15 11%	9 8%	9 10%	16 10%	
08	59 23%	772 21%	2 9%	5 25%	8 18%	13 25%	21 27%	9 29%	55 26%	~	~	~	~	~	~	3 12%	4 25%	51 22%	32 24%	25 23%	21 24%	37 23%
09	38 15%	616 16%	4 18%	2 10%	5 11%	8 15%	11 14%	8 26%	34 16%	~	~	~	1 25%	2 8%	1 6%	37 16%	24 18%	14 13%	15 17%	23 14%		
BEST HEALTH CARE POSSIBLE	52 21%	1096 29%*	4 18%	3 15%	10 23%	10 19%	17 22%	8 26%	41 20%	1 100%	~	~	2 50%	2 50%	6 23%	4 25%	47 21%	32 24%	19 17%	19 21%	33 21%	
#8-10 (NET)	149 59%	2485 66%*	10 45%	10 50%	23 52%	31 58%	49 63%	25 81%	130 63%	1 100%	~	~	3 75%	2 50%	11 42%	9 56%	135 59%	88 66%*	58 53%	55 62%	93 58%	

Continued

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		WORA 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/ 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)	90 36%	1712 46%*	8 36%~	5 25%~	15 34%~	18 34%	28 36%	16 52%~	75 36%~	1 100%~	~	~	3 75%~	2 50%~	8 31%~	5 31%~	84 37%~	56 42%*	33 30%	34 38%	56 35%
NOT ANSWERED	12	106		1	1		7	3	12							12	5	7	4	8	
VALID CASES	252	3737	22	20	44	53	78	31	208	1	1		4	4	26	16	227	133	109	89	159
NUMBER OF RESPONDENTS	264 100%	3843 100%	22 100%	21 100%	45 100%	53 100%	85 100%	34 100%	220 100%	1 100%	1 100%		4 100%	4 100%	26 100%	16 100%	239 100%	138 100%	116 100%	93 100%	167 100%
MEAN	7.27	7.91	6.64	7.30	7.07	7.21	7.26	8.26	7.35	10.0	7.00		8.25	8.00	6.81	7.50	7.28	7.63	6.91	7.45	7.19
p stat_(*=Sig @ p<=.05)		.000*	~	~	~.827	.943	~	~	~	~	~	~	~	~	~	~	~	~.015*	.043*	.394	.499

[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		
	WORA 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	20 8%	104 3%*	2 9%~	7 ~	6 16%~	5 12%	5 6%	16 ~	~	~	~	~	1 25%~	1 4%~	2 13%~	17 8%~	8 6%	11 10%	8 9%	12 8%	
SOMETIMES	38 15%	575 15%	5 23%~	4 20%~	12 27%~	5 10%	8 10%	4 13%~	29 14%~	~	~	~	1 25%~	1 25%~	7 27%~	3 19%~	34 15%~	13 10%*	24 22%*	11 13%	27 17%
USUALLY	83 33%	1243 33%	6 27%~	6 30%~	8 18%~	24 46%*	27 34%	10 33%~	74 36%~	1 ~100%~	~	1 ~	1 25%~	4 15%~	2 13%~	78 35%~	46 35%	33 30%	24 27%	57 36%	
ALWAYS	110 44%	1797 48%	9 41%~	10 50%~	17 39%~	17 33%	39 49%	16 53%~	88 43%~	1 100%~	~	~	2 50%~	1 25%~	14 54%~	9 56%~	97 43%~	65 49%	41 38%	45 51%	63 40%
#ALWAYS + USUALLY (NET)	193 77%	3040 82%	15 68%~	16 80%~	25 57%~	41 79%	66 84%	26 87%~	162 78%~	1 100%~	1 100%~	~	3 75%~	2 50%~	18 69%~	11 69%~	175 77%~	111 84%*	74 68%*	69 78%	120 75%
TOP BOX SCORE	110 44%	1797 48%	9 41%~	10 50%~	17 39%~	17 33%	39 49%	16 53%~	88 43%~	1 100%~	~	~	2 50%~	1 25%~	14 54%~	9 56%~	97 43%~	65 49%	41 38%	45 51%	63 40%
NOT ANSWERED	13	124		1	1	1	6	4	13							13	6	7	5	8	
VALID CASES	251	3719	22	20	44	52	79	30	207	1	1		4	4	26	16	226	132	109	88	159
NUMBER OF RESPONDENTS	264 100%	3843 100%	22 100%	21 100%	45 100%	53 100%	85 100%	34 100%	220 100%	1 100%	1 100%		4 100%	4 100%	26 100%	16 100%	239 100%	138 100%	116 100%	93 100%	167 100%

[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?

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
Q15 YES	293 84%	4201 81%	26 90%~	29 67%~	46 90%	59 86%	93 86%	36 88%~	247 85%	1 100%	1 100%	4 ~	5 67%~	26 71%~	20 87%~	263 91%~	159 81%*	124 90%*	111 82%	178 86%
NO	54 16%	995 19%	3 10%~	14 33%~	5 10%	10 14%	15 14%	5 12%~	43 15%	~	~	2 ~	2 33%~	4 29%~	4 13%~	49 9%~	38 19%*	14 10%*	24 18%	29 14%
NOT ANSWERED	14	257					2	1	3						3	2	1		3	
VALID CASES	347	5196	29	43	51	69	108	41	290	1	1	6	7	30	22	312	197	138	135	207
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%

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

	WORA 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- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	MALE	FE- MALE		
Q16 NONE	46 17%	713 18%	7 30%~	11 39%~	4 9%~	9 16%	12 13%	3 9%~	38 16%~	~	~	~	1 25%~	1 25%~	5 20%~	4 24%~	41 16%~	35 23%*	11 9%*	19 18%	27 16%
1 TIME	77 28%	973 24%	7 30%~	6 21%~	18 42%~	9 16%*	23 26%	13 41%~	65 28%~	~	1 100%~	~	1 25%~	2 50%~	6 24%~	6 35%~	67 27%~	46 31%	28 24%	29 28%	47 28%
2	64 23%	1005 25%	5 22%~	3 11%~	7 16%~	17 29%	24 27%	8 25%~	52 22%~	~	~	~	1 25%~	~	10 40%~	3 18%~	61 24%~	27 18%*	35 30%*	22 21%	42 25%
3	31 11%	534 13%	~	4%~	5 12%~	11 19%	12 13%	2 6%~	28 12%~	1 100%~	~	~	~	~	2 8%~	1 6%~	30 12%~	15 10%	15 13%	14 14%	17 10%
4	26 9%	322 8%	3 13%~	2 7%~	5 12%~	4 7%	8 9%	3 9%~	23 10%~	~	~	~	1 25%~	1 25%~	~	1 6%~	23 9%~	12 8%	12 10%	10 10%	15 9%
5 TO 9	27 10%	403 10%	1 4%~	3 11%~	3 7%~	7 12%	10 11%	2 6%~	23 10%~	~	~	~	~	~	1 4%~	2 12%~	23 9%~	11 7%	15 13%	7 7%	19 11%
10 OR MORE TIMES	5 2%	75 2%	~	7%~	2 2%~	1 2%	1 2%	~	3%~	1 2%~	~	~	~	~	1 4%~	~	5 2%~	3 2%	2 2%	2 2%	3 2%
NOT ANSWERED	17	238	3	1	3	1	4	4	14					1	1	3	13	10	6	8	8
VALID CASES	276	4026	23	28	43	58	89	32	233	1	1		4	4	25	17	250	149	118	103	170
NUMBER OF RESPONDENTS	293	4264	26	29	46	59	93	36	247	1	1		4	5	26	20	263	159	124	111	178
	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		
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q17 NEVER	8 4%	47 1%	1 6%~	2 ~	1 5%~	3 2%~	1 4%	1 3%~	4 2%~	~	~	~	~	~	3 15%~	2 15%~	6 3%~	1 0.9%*	7 7%*	2 2%	6 4%
SOMETIMES	15 7%	196 6%	2 13%~	2 ~	5 5%~	5 10%~	1 7%	1 3%~	12 6%~	1 ~100%~	~	~	~	1 5%~	14 ~	6 7%~	9 5%	5 8%	5 6%	10 7%	
USUALLY	62 27%	719 22%	7 44%~	7 41%~	11 28%~	13 27%~	17 22%	6 21%~	52 27%~	~	~	1 ~	3 ~	5 25%~	5 38%~	53 25%~	33 29%	26 25%	24 29%	37 26%	
ALWAYS	143 63%	2245 70%*	6 38%~	10 59%~	24 62%~	30 61%~	51 67%	21 72%~	126 65%~	1 ~100%~	~	2 ~	11 ~	11 55%~	6 46%~	135 65%~	74 65%	64 60%	53 63%	89 63%	
#ALWAYS + USUALLY (NET)	205 90%	2963 92%	13 81%~	17 100%~	35 90%~	43 88%~	68 89%	27 93%~	178 92%~	1 ~100%~	~	3 ~100%~	3 ~100%~	16 80%~	11 85%~	188 90%~	107 94%*	90 85%*	77 92%	126 89%	
TOP BOX SCORE	143 63%	2245 70%*	6 38%~	10 59%~	24 62%~	30 61%~	51 67%	21 72%~	126 65%~	1 ~100%~	~	2 ~	11 ~	11 55%~	6 46%~	135 65%~	74 65%	64 60%	53 63%	89 63%	
NOT ANSWERED	2	22					1		1						1		1		1		
VALID CASES	228	3206	16	17	39	49	76	29	194	1	1	3	3	20	13	208	114	106	84	142	
NUMBER OF RESPONDENTS	230 100%	3228 100%	16 100%	17 100%	39 100%	49 100%	77 100%	29 100%	195 100%	1 100%	1 100%	3 100%	3 100%	20 100%	13 100%	209 100%	114 100%	107 100%	84 100%	143 100%	

[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			
	WORA 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 PAC ILND	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q18 NEVER	6 3%	67 2%	~	~	3%~	4%~	4%	~	2%~	~	~	~	~	~	5%~	8%~	2%~	0.9%	5%	1%	4%	
SOMETIMES	36 16%	251 8%*	25%~	29%~	18%~	16%~	13%	7%~	15%~	~	~	~	~	33%~	25%~	15%~	16%~	12%	19%	12%	18%	
USUALLY	48 21%	665 21%	19%~	18%~	18%~	35%~	18%	14%~	23%~	~100%~	~	~	33%~	~	5%~	15%~	22%~	18%	25%	20%	22%	
ALWAYS	137 60%	2214 69%*	56%~	53%~	62%~	45%~	64%	79%~	60%~	100%~	~	~	67%~	67%~	65%~	62%~	60%~	68%*	51%*	67%	56%	
#ALWAYS + USUALLY (NET)	185 81%	2879 90%*	75%~	71%~	79%~	80%~	83%	93%~	83%~	100%~	100%~	~	~	100%~	67%~	70%~	77%~	82%~	87%*	76%	87%	78%
TOP BOX SCORE	137 60%	2214 69%*	56%~	53%~	62%~	45%~	64%	79%~	60%~	100%~	~	~	67%~	67%~	65%~	62%~	60%~	68%*	51%*	67%	56%	
NOT ANSWERED	3	31					1	1	2							2		1		2		
VALID CASES	227	3197	16	17	39	49	76	28	193	1	1		3	3	20	13	207	114	106	84	141	
NUMBER OF RESPONDENTS	230 100%	3228 100%	16 100%	17 100%	39 100%	49 100%	77 100%	29 100%	195 100%	1 100%	1 100%		3 100%	3 100%	20 100%	13 100%	209 100%	114 100%	107 100%	84 100%	143 100%	

[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?

	WORA 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	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q19 NEVER	10 4%	85 3%	1 ~	2 6%~	2 5%~	5 4%~	7 7%	8 4%~	~	~	~	~	~	~	1 5%~	1 8%~	8 4%~	2 2%	8 8%*	2 2%	8 6%
SOMETIMES	21 9%	193 6%	2 13%~	3 18%~	4 10%~	4 8%~	6 8%	2 7%~	16 8%~	~	~	~	~	~	4 20%~	1 8%~	19 9%~	6 5%*	13 12%	6 7%	15 11%
USUALLY	46 20%	575 18%	3 19%~	4 24%~	10 26%~	14 29%~	12 16%	3 10%~	40 21%~	1 ~100%~	~	1 ~33%~	1 33%~	3 15%~	2 15%~	44 21%~	27 24%	18 17%	19 23%	27 19%	
ALWAYS	150 66%	2339 73%*	11 69%~	9 53%~	23 59%~	29 59%~	52 69%	24 83%~	129 67%~	1 100%~	~	2 ~67%~	2 67%~	12 60%~	9 69%~	136 66%~	79 69%	66 63%	57 68%	91 65%	
#ALWAYS + USUALLY (NET)	196 86%	2915 91%*	14 88%~	13 76%~	33 85%~	43 88%~	64 85%	27 93%~	169 88%~	1 100%~	1 100%~	~	3 ~100%~	3 100%~	15 75%~	11 85%~	180 87%~	106 93%*	84 80%*	76 90%	118 84%
TOP BOX SCORE	150 66%	2339 73%*	11 69%~	9 53%~	23 59%~	29 59%~	52 69%	24 83%~	129 67%~	1 100%~	~	2 ~67%~	2 67%~	12 60%~	9 69%~	136 66%~	79 69%	66 63%	57 68%	91 65%	
NOT ANSWERED	3	35					2	2	2						2		2			2	
VALID CASES	227	3193	16	17	39	49	75	29	193	1	1		3	3	20	13	207	114	105	84	141
NUMBER OF RESPONDENTS	230 100%	3228 100%	16 100%	17 100%	39 100%	49 100%	77 100%	29 100%	195 100%	1 100%	1 100%		3 100%	3 100%	20 100%	13 100%	209 100%	114 100%	107 100%	84 100%	143 100%

[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		
	WORA 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	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q20 NEVER	9 4%	95 3%	1 6%	1 6%	2 5%	2 4%	3 4%	6 3%	~	~	~	~	~	~	2 10%	2 15%	6 3%	~	9 9%*	2 2%	7 5%
SOMETIMES	21 9%	295 9%	2 13%	2 12%	4 10%	4 8%	8 11%	1 3%	16 8%	~	~	~	~	1 33%	3 15%	1 8%	19 9%	8 7%	11 10%	5 6%	16 11%
USUALLY	59 26%	856 27%	2 13%	7 41%	10 26%	15 31%	19 25%	6 21%	55 28%	1 100%	~	~	~	1 33%	2 10%	1 8%	56 27%	33 29%	26 25%	22 26%	37 26%
ALWAYS	138 61%	1950 61%	11 69%	7 41%	23 59%	27 56%	46 61%	22 76%	116 60%	1 100%	~	~	3 100%	1 33%	13 65%	9 69%	126 61%	73 64%	59 56%	55 65%	81 57%
#ALWAYS + USUALLY (NET)	197 87%	2806 88%	13 81%	14 82%	33 85%	42 87%	65 86%	28 97%	171 89%	1 100%	1 100%	~	3 100%	2 67%	15 75%	10 77%	182 88%	106 93%*	85 81%*	77 92%	118 84%
TOP BOX SCORE	138 61%	1950 61%	11 69%	7 41%	23 59%	27 56%	46 61%	22 76%	116 60%	1 100%	~	~	3 100%	1 33%	13 65%	9 69%	126 61%	73 64%	59 56%	55 65%	81 57%
NOT ANSWERED	3	31				1	1	2								2		2		2	
VALID CASES	227	3197	16	17	39	48	76	29	193	1	1		3	3	20	13	207	114	105	84	141
NUMBER OF RESPONDENTS	230 100%	3228 100%	16 100%	17 100%	39 100%	49 100%	77 100%	29 100%	195 100%	1 100%	1 100%		3 100%	3 100%	20 100%	13 100%	209 100%	114 100%	107 100%	84 100%	143 100%

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

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLACK OR AFR-	ASIAN	NATV HAW/ PAC	AMER IND/ ALSK	MULTI	HIS-IC	NOT HIS-IC	EX & VERY GOOD &	FAIR & POOR	MALE	FEMALE	
Q21																				
YES	129 58%	1943 61%	7 44%	8 47%	22 59%	26 54%	49 64%	15 54%	109 57%	1 100%		1 33%	3 100%	9 47%	6 46%	117 57%	57 51%*	68 65%*	40 50%	87 61%
NO	95 42%	1222 39%	9 56%	9 53%	15 41%	22 46%	27 36%	13 46%	82 43%	1 100%		2 67%	10 53%	7 54%	87 43%	55 49%*	37 35%*	40 50%	55 39%	
NOT ANSWERED	6	62			2	1	1	1	4				1		5	2	2	4	1	
VALID CASES	224	3166	16	17	37	48	76	28	191	1	1	3	3	19	13	204	112	105	80	142
NUMBER OF RESPONDENTS	230	3228	16	17	39	49	77	29	195	1	1	3	3	20	13	209	114	107	84	143
	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]

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?

	WORA 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- IC	EX & VERY GOOD & FAIR	POOR	MALE	FE- MALE		
Q22 NEVER	108	119	1	1	4	4	5	~	~	~	~	1	2	1	6	2	8	5	5		
	8%	6%	14%~	~	5%~	15%~	8%~	5%~	~	~	~	~	33%~	22%~	17%~	5%~	4%	12%	13%~	6%~	
SOMETIMES	1411	265	1	3	3	6	13	~	~	~	~	1	1	13	7	7	2	12			
	11%	14%	14%~	~	14%~	12%~	13%~	12%~	~	~	~	~	11%~	17%~	11%~	12%	11%	5%~	14%~		
USUALLY	3830	545	3	5	6	8	11	31	~	~	~	1	4	1	36	17	20	12	25		
	30%	29%	43%~	71%~	27%~	31%~	23%~	29%~	~	~	~	~	33%~	44%~	17%~	32%~	30%	31%	30%~	30%~	
ALWAYS	6451	927	2	2	12	11	27	58	1	~	~	1	2	3	59	31	30	21	42		
	51%	50%	29%~	29%~	55%~	42%~	56%~	64%~	54%~	100%~	~	~	~	33%~	22%~	50%~	52%~	54%	46%	53%~	50%~
#ALWAYS + USUALLY (NET)	10281	1472	5	7	18	19	38	89	1	~	~	2	6	4	95	48	50	33	67		
	81%	79%	71%~	100%~	82%~	73%~	79%~	93%~	83%~	100%~	~	~	~	67%~	67%~	67%~	83%~	84%	77%	83%~	80%~
TOP BOX SCORE	6451	927	2	2	12	11	27	58	1	~	~	1	2	3	59	31	30	21	42		
	51%	50%	29%~	29%~	55%~	42%~	56%~	64%~	54%~	100%~	~	~	~	33%~	22%~	50%~	52%~	54%	46%	53%~	50%~
NOT ANSWERED	3	61	1				1	2			1			3		3			3		
VALID CASES	126	1856	7	7	22	26	48	107	1			3	9	6	114	57	65	40	84		
NUMBER OF RESPONDENTS	129	1917	7	8	22	26	49	109	1		1	3	9	6	117	57	68	40	87		
	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?

	WORA 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 & POOR	FE- MALE	MALE		
Q23 WORST PERSONAL DOCTOR POSSIBLE	7 3%	60 2%	2 9%	1 4%	1 2%	2 4%	1 3%	6 3%	~	~	~	~	~	~	6 2%	3 2%	4 3%	2 2%	5 3%		
01	4 2%	30 0.7%	~	~	~	4 5%	1 0.4%	~	~	~	1 25%	1 4%	1 6%	3 1%	2 1%	2 2%	2 2%	2 2%	2 1%		
02	3 1%	27 0.7%	5%	~	~	1 2%	1 1%	~	~	~	~	~	2 8%	1 6%	1 0.4%	1 0.7%	2 2%	~	3 2%		
03	6 2%	71 2%	5%	~	2 5%	1 2%	~	2 6%	6 3%	~	~	~	~	~	6 2%	2 1%	3 3%	1 1%	5 3%		
04	6 2%	80 2%	2 9%	2 8%	~	~	1 1%	1 3%	4 2%	~	~	~	~	2 8%	6 2%	4 3%	2 2%	2 2%	4 2%		
05	21 8%	203 5%	1 5%	5 19%	5 12%	3 5%	6 7%	~	18 8%	~	~	~	1 25%	~	2 12%	18 7%	10 7%	9 8%	5 5%	15 9%	
06	9 3%	153 4%	~	~	1 2%	3 5%	5 6%	~	9 4%	~	~	~	~	~	9 4%	4 3%	5 4%	4 4%	5 3%		
07	28 11%	289 7%	3 14%	4 15%	4 10%	6 11%	10 12%	1 3%	22 10%	~	~	~	~	6 24%	2 12%	25 10%	16 11%	12 10%	12 12%	16 10%	
08	45 17%	720 18%	5 23%	4 15%	2 5%	14 25%	16 19%	4 13%	38 17%	~	1 100%	~	~	~	5 20%	2 12%	42 17%	20 14%	25 22%	17 17%	28 17%
09	46 17%	743 19%	2 9%	4 15%	9 21%	10 18%	13 15%	7 22%	39 17%	~	~	~	~	1 25%	5 20%	3 18%	42 17%	25 18%	20 17%	19 19%	26 16%
BEST PERSONAL DOCTOR POSSIBLE	91 34%	1623 41%	5 23%	6 23%	18 43%	16 29%	30 35%	16 50%	80 36%	1 100%	~	4 100%	1 25%	4 16%	6 35%	83 34%	55 39%	32 28%	36 36%	55 34%	
#8-10 (NET)	182 68%	3087 77%	12 55%	14 54%	29 69%	40 71%	59 69%	27 84%	157 70%	1 100%	1 100%	~	4 100%	2 50%	14 56%	11 65%	167 69%	100 70%	77 66%	72 72%	109 66%

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?

	WORA 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 TO 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)	137 52%	2366 59%*	7 32%~	10 38%~	27 64%~	26 46%	43 50%	23 72%~	119 53%~	1 100%~	~	4 ~100%~	2 50%~	9 36%~	9 53%~	125 52%~	80 56%	52 45%	55 55%	81 49%
NOT ANSWERED	27	265	4	3	4	3	7	4	23				1	1	3	22	17	8	11	14
VALID CASES	266	3999	22	26	42	56	86	32	224	1	1	4	4	25	17	241	142	116	100	164
NUMBER OF RESPONDENTS	293 100%	4264 100%	26 100%	29 100%	46 100%	59 100%	93 100%	36 100%	247 100%	1 100%	1 100%	4 100%	5 100%	26 100%	20 100%	263 100%	159 100%	124 100%	111 100%	178 100%
MEAN	7.86	8.32	6.68	7.27	8.14	7.89	7.97	8.50	7.99	10.0	8.00	10.0	6.25	7.20	7.65	7.93	8.08	7.60	8.13	7.71
p stat_(*=Sig @ p<=.05)		.004*	~	~	~.911	.629	~	~	~	~	~	~	~	~	~	~	~.135	.145	.161	.194

[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		
WORA 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-	NATV AS- IAN	AMER HAW/ IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE			
Q24 YES	134 40%	2074 40%	11 39%~	12 28%~	17 35%~	23 34%	52 48%*	18 46%~	111 39%	~	~	2 ~ 33%~	4 57%~	13 43%~	9 41%~	121 40%~	63 32%*	69 51%*	44 33%	89 44%
NO	205 60%	3119 60%	17 61%~	31 72%~	32 65%~	44 66%	57 52%*	21 54%~	173 61%	1 100%~	1 100%~	4 ~ 67%~	3 43%~	17 57%~	13 59%~	185 60%~	131 68%*	67 49%*	88 67%	115 56%
NOT ANSWERED	22	260	1		2	2	1	3	9						9	5	3	3	6	
VALID CASES	339	5193	28	43	49	67	109	39	284	1	1	6	7	30	22	306	194	136	132	204
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%



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		
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-AMER	AS-IAN	NATV ILND	AMER PAC ALSK	IND/ NATV	OTHR	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE
Q25 NEVER	11 8%	135 7%	1 9%~	1 8%~	2 12%~	2 9%~	5 10%	9 ~	~	~	~	~	~	1 ~ 25%~	1 8%~	2 22%~	9 8%~	4 6%	7 10%	1 2%~	10 12%~
SOMETIMES	24 18%	292 15%	2 18%~	4 33%~	2 12%~	5 22%~	8 16%	2 13%~	17 16%~	~	~	~	~	1 ~ 25%~	4 31%~	2 22%~	21 18%~	10 16%	13 19%	7 16%~	16 19%~
USUALLY	29 22%	614 31%*	4 36%~	2 17%~	5 29%~	6 26%~	10 20%	2 13%~	25 23%~	~	~	~	~	~	3 23%~	2 22%~	27 23%~	15 24%	14 21%	11 25%~	18 21%~
ALWAYS	67 51%	926 47%	4 36%~	5 42%~	8 47%~	10 43%~	28 55%	12 75%~	58 53%~	~	~	~	1 ~100%~	2 50%~	5 38%~	3 33%~	62 52%~	33 53%	33 49%	25 57%~	42 49%~
#ALWAYS + USUALLY (NET)	96 73%	1540 78%	8 73%~	7 58%~	13 76%~	16 70%~	38 75%	14 88%~	83 76%~	~	~	~	1 ~100%~	2 50%~	8 62%~	5 56%~	89 75%~	48 77%	47 70%	36 82%~	60 70%~
TOP BOX SCORE	67 51%	926 47%	4 36%~	5 42%~	8 47%~	10 43%~	28 55%	12 75%~	58 53%~	~	~	~	1 ~100%~	2 50%~	5 38%~	3 33%~	62 52%~	33 53%	33 49%	25 57%~	42 49%~
NOT ANSWERED	3	78					1	2	2					1			2	1	2		3
VALID CASES	131	1967	11	12	17	23	51	16	109				1	4	13	9	119	62	67	44	86
NUMBER OF RESPONDENTS	134	2045	11	12	17	23	52	18	111				2	4	13	9	121	63	69	44	89
	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			
	WORA 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	
Q26 NONE	10 8%	93 5%	2 18%	2 17%	5 ~ 23%	1 2%*	~	8 7%	~	~	~	~	~	2 15%	2 22%	8 7%	4 7%	6 9%	1 2%	9 10%
1 SPECIALIST	72 55%	1033 52%	5 45%	7 58%	10 59%	10 45%	30 59%	10 63%	64 59%	~	~	1 ~100%	4 ~100%	1 8%	5 56%	66 56%	36 59%	36 54%	20 47%	52 60%
2	31 24%	522 26%	3 27%	2 17%	4 24%	4 18%	11 22%	6 38%	24 22%	~	~	~	~	5 38%	1 11%	28 24%	16 26%	13 19%	16 37%	14 16%
3	11 8%	217 11%	1 9%	~	1 6%	3 14%	6 12%	~	7 6%	~	~	~	~	4 31%	1 11%	10 8%	3 5%	8 12%	4 9%	7 8%
4	3 2%	74 4%	~	1 8%	~	~	2 4%	~	3 3%	~	~	~	~	~	~	3 3%	2 3%	1 1%	1 2%	2 2%
5 OR MORE SPECIALISTS	3 2%	41 2%	~	~	2 12%	~	1 2%	~	2 2%	~	~	~	~	1 8%	~	3 3%	~	3 4%	1 2%	2 2%
NOT ANSWERED	4	66				1	1	2	3			1				3	2	2	1	3
VALID CASES	130	1979	11	12	17	22	51	16	108			1	4	13	9	118	61	67	43	86
NUMBER OF RESPONDENTS	134	2045	11	12	17	23	52	18	111			2	4	13	9	121	63	69	44	89
	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

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

	WORA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE		
Q27 WORST SPECIALIST POSSIBLE	2 2%	21 1%	~	~	1 6%	~	1 2%	~	2 2%	~	~	~	~	~	~	2 2%	1 2%	1 2%	~	2 3%	
01	2 2%	7 0.4%	1 11%	~	~	1 6%	~	2 2%	~	~	~	~	~	~	~	2 2%	2 4%	~	~	2 3%	
02	1 0.8%	19 1%	~	~	~	~	1 2%	~	1 1%	~	~	~	~	~	~	1 0.9%	1 2%	~	~	1 1%	
03	2 2%	28 2%	1 11%	~	~	~	1 2%	~	2 2%	~	~	~	~	~	~	2 2%	2 4%	~	~	2 5%	
04	3 3%	18 1%	~	1 10%	1 6%	~	1 2%	~	2 2%	~	~	~	~	~	1 9%	3 3%	1 2%	2 3%	~	3 4%	
05	4 3%	88 5%	~	~	1 6%	1 6%	1 2%	1 6%	2 2%	~	~	~	~	~	1 9%	4 4%	2 4%	2 3%	~	4 5%	
06	5 4%	76 4%	1 11%	1 10%	~	~	1 2%	2 13%	4 4%	~	~	~	~	~	1 9%	5 5%	2 4%	3 5%	2 5%	3 4%	
07	10 8%	154 8%	2 22%	1 10%	1 6%	~	5 10%	1 6%	9 9%	~	~	~	~	~	~	2 29%	8 7%	5 9%	5 8%	3 7%	7 9%
08	21 18%	272 15%	1 11%	1 10%	3 18%	2 12%	11 22%	3 19%	20 20%	~	~	~	~	~	1 9%	1 14%	20 18%	5 9%*	16 26%*	6 14%	15 19%
09	21 18%	345 19%	1 11%	~	6 35%	2 12%	11 22%	1 6%	16 16%	~	~	~	~	2 50%	2 18%	1 14%	20 18%	11 19%	10 16%	9 21%	12 16%
BEST SPECIALIST POSSIBLE	49 41%	812 44%	2 22%	6 60%	4 24%	11 65%	17 34%	8 50%	40 40%	~	~	1 100%	2 50%	5 45%	3 43%	43 39%	25 44%	22 36%	20 48%	28 36%	
#8-10 (NET)	91 76%	1429 78%	4 44%	7 70%	13 76%	15 88%	39 78%	12 75%	76 76%	~	~	1 100%	4 100%	8 73%	5 71%	83 75%	41 72%	48 79%	35 83%	55 71%	

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	
		WORA 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 IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHER	HIS- IC	NOT HIS- PAN- IC	VERY GOOD & FAIR	GOOD & POOR	FE- MALE	MALE
9-10 (NET)	70 58%	1157 63%	3 33%~	6 60%~	10 59%~	13 76%~	28 56%	9 56%~	56 56%~	~	~	~	1 ~100%	4 ~100%	7 64%~	4 57%~	63 57%~	36 63%	32 52%	29 69%~	40 52%~
NOT ANSWERED		34																			
VALID CASES	120	1838	9	10	17	17	50	16	100				1	4	11	7	110	57	61	42	77
NUMBER OF RESPONDENTS	120 100%	1872 100%	9 100%	10 100%	17 100%	17 100%	50 100%	16 100%	100 100%				1 100%	4 100%	11 100%	7 100%	110 100%	57 100%	61 100%	42 100%	77 100%
MEAN	8.24	8.47	6.78	8.50	7.88	8.82	8.24	8.56	8.19				10.0	9.50	8.27	8.71	8.16	8.07	8.34	8.76	7.94
p stat_(*=Sig @ p<=.05)		.234	~	~	~	~	.995	~	~	~	~	~	~	~	~	~	~	.453	.630	~	~

[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?

	WORA 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	FE- MALE		
Q28 YES	67 19%	1182 23%	4 14%	12 28%	8 16%	19 28%	17 15%	7 18%	53 18%	~	~	~	1 17%	1 14%	10 33%	3 14%	63 20%	37 19%	29 21%	27 20%	40 19%
NO	277 81%	3968 77%	25 86%	31 72%	42 84%	49 72%	93 85%	33 83%	236 82%	1 100%	1 100%	~	5 83%	6 86%	20 67%	19 86%	248 80%	160 81%	108 79%	108 80%	166 81%
NOT ANSWERED	17	303			1	1	2	4								4	2	2		4	
VALID CASES	344	5150	29	43	50	68	110	40	289	1	1		6	7	30	22	311	197	137	135	206
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%		6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%

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?

	WORA 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	OTH- R	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	POOR	MALE	FE- MALE
Q29 NEVER	5	119	1	1	1	2	5							5	2	3	1	4		
	8%	12%	33%~	~ 13%~	5%~ 13%~	~ 10%~	~	~	~	~	~	~	~	8%~	6%~ 10%~	4%~ 11%~				
SOMETIMES	22	339	2	1	3	8	5	3	15		1	4	1	20	14	8	11	11		
	34%	34%	67%~	8%~ 38%~	42%~ 33%~	43%~ 30%~	~	~	~100%~	~ 40%~	33%~ 33%~	41%~ 28%~	42%~ 29%~							
USUALLY	26	332	9	2	8	5	2	20					6	26	10	15	8	18		
	41%	33%	~ 75%~	25%~ 42%~	33%~ 29%~	40%~	~	~	~	~ 60%~	~ 43%~	29%~ 52%~	31%~ 47%~							
ALWAYS	11	213	2	2	2	3	2	10		1			2	9	8	3	6	5		
	17%	21%	~ 17%~	25%~ 11%~	20%~ 29%~	20%~	~	~	~	~100%~	~ 67%~	15%~ 24%~	10%~ 23%~	13%~						
#ALWAYS + USUALLY (NET)	37	545	11	4	10	8	4	30		1	6	2	35	18	18	14	23			
	58%	54%	~ 92%~	50%~ 53%~	53%~ 57%~	60%~	~	~	~	~100%~	60%~	67%~ 58%~	53%~ 62%~	54%~ 61%~						
TOP BOX SCORE	11	213	2	2	2	3	2	10		1		2	9	8	3	6	5			
	17%	21%	~ 17%~	25%~ 11%~	20%~ 29%~	20%~	~	~	~	~100%~	~ 67%~	15%~ 24%~	10%~ 23%~	13%~						
NOT ANSWERED	3	19	1			2		3					3	3		1	2			
VALID CASES	64	1003	3	12	8	19	15	7	50		1	1	10	3	60	34	29	26	38	
NUMBER OF RESPONDENTS	67	1022	4	12	8	19	17	7	53		1	1	10	3	63	37	29	27	40	
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q28 = YES]

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
		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	MALE	FE- MALE
Q30																				
YES	85 25%	1525 30%	5 18%	13 32%	13 26%	16 24%	31 28%	7 18%	72 26%	1 100%		2 33%	2 29%	6 21%	4 18%	78 26%	53 28%	31 23%	30 23%	55 27%
NO	251 75%	3584 70%	23 82%	28 68%	37 74%	50 76%	79 72%	31 82%	210 74%	1 100%		4 67%	5 71%	23 79%	18 82%	225 74%	138 72%	105 77%	102 77%	146 73%
NOT ANSWERED	25	344	1	2	1	3	4	11						1	12	8	3	3	9	
VALID CASES	336	5109	28	41	50	66	110	38	282	1	1	6	7	29	22	303	191	136	132	201
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%

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	
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q31 NEVER	7 9%	51 4%	4 80%~	~	~	1 6%~	2 7%~	~	7 10%~	~	~	~	~	~	1 33%~	6 8%~	3 6%~	4 13%~	2 7%~	5 9%~
SOMETIMES	16 20%	295 21%	~	3 23%~	~	3 19%~	10 33%~	~	11 16%~	~	~	1 50%~	~	3 50%~	~	15 20%~	8 16%~	7 23%~	5 18%~	11 21%~
USUALLY	21 26%	400 28%	1 20%~	6 46%~	4 33%~	6 38%~	4 13%~	~	18 26%~	~	~	~	1 50%~	1 17%~	~	19 25%~	10 20%~	11 37%~	8 29%~	13 25%~
ALWAYS	37 46%	670 47%	~	4 31%~	8 67%~	6 38%~	14 47%~	5 100%~	32 47%~	1 100%~	~	1 50%~	1 50%~	2 33%~	2 67%~	35 47%~	29 58%~	8 27%~	13 46%~	24 45%~
#ALWAYS + USUALLY (NET)	58 72%	1070 76%	1 20%~	10 77%~	12 100%~	12 75%~	18 60%~	5 100%~	50 74%~	1 100%~	~	1 50%~	2 100%~	3 50%~	2 67%~	54 72%~	39 78%~	19 63%~	21 75%~	37 70%~
TOP BOX SCORE	37 46%	670 47%	~	4 31%~	8 67%~	6 38%~	14 47%~	5 100%~	32 47%~	1 100%~	~	1 50%~	1 50%~	2 33%~	2 67%~	35 47%~	29 58%~	8 27%~	13 46%~	24 45%~
NOT ANSWERED	4	26			1		1 2	2	4						1	3	3	1	2	2
VALID CASES	81	1415	5	13	12	16	30	5	68	1		2	2	6	3	75	50	30	28	53
NUMBER OF RESPONDENTS	85	1441	5	13	13	16	31	7	72	1		2	2	6	4	78	53	31	30	55
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]



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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	WORA 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 2%	24 2%	1 20%~	~	~	1 6%~	~	2 3%~	~	~	~	~	~	~	2 3%~	2 7%~	2 4%~	2 4%~			
SOMETIMES	7 9%	83 6%	2 40%~	~	1 8%~	~	4 14%~	7 10%~	~	~	~	~	~	~	7 9%~	5 10%~	2 7%~	1 4%~	6 11%~		
USUALLY	13 16%	312 22%	1 20%~	3 23%~	1 8%~	4 25%~	4 14%~	8 12%~	~	~	~	~	1 50%~	2 33%~	10 14%~	4 8%~	8 27%~	5 19%~	8 15%~		
ALWAYS	58 73%	995 70%	1 20%~	10 77%~	10 83%~	11 69%~	21 72%~	5 100%~	50 75%~	1 100%~	~	~	2 100%~	1 50%~	4 67%~	3 74%~	55 82%~	40 60%~	18 78%~	21 70%~	37 70%~
#ALWAYS + USUALLY (NET)	71 89%	1307 92%	2 40%~	13 100%~	11 92%~	15 94%~	25 86%~	5 100%~	58 87%~	1 100%~	~	~	2 100%~	2 100%~	6 100%~	3 88%~	65 90%~	44 87%~	26 96%~	26 85%~	45 85%~
TOP BOX SCORE	58 73%	995 70%	1 20%~	10 77%~	10 83%~	11 69%~	21 72%~	5 100%~	50 75%~	1 100%~	~	~	2 100%~	1 50%~	4 67%~	3 74%~	55 82%~	40 60%~	18 78%~	21 70%~	37 70%~
NOT ANSWERED	5	27			1		2	2	5						1	4	4	1	3	2	
VALID CASES	80	1414	5	13	12	16	29	5	67	1			2	2	6	3	74	49	30	27	53
NUMBER OF RESPONDENTS	85	1441	5	13	13	16	31	7	72	1			2	2	6	4	78	53	31	30	55
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	WORA 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		
Q33 YES	114 33%	1804 36%	11 38%~	15 35%~	18 37%~	23 34%	35 32%	9 23%~	90 31%	1 ~100%~		4 ~	14 ~	11 50%~	99 32%~	73 37%	38 28%	44 33%	68 33%		
NO	228 67%	3261 64%	18 62%~	28 65%~	31 63%~	45 66%	75 68%	30 77%~	197 69%	1 100%~		6 ~	3 ~100%~	16 43%~	11 50%~	210 68%~	123 63%	99 72%	90 67%	137 67%	
NOT ANSWERED	19	388			2	1		3	6						6	3	2	1	5		
VALID CASES	342	5065	29	43	49	68	110	39	287	1	1		6	7	30	22	309	196	137	134	205
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%		6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%

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	
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
PQ34 NEVER	8 2%	97 2%	2 7%	1 ~	5 2%	5 ~	6 5%	6 ~	~	~	~	1 ~	14%~	~	2 10%	6 2%	3 2%	5 4%	4 3%	4 2%
SOMETIMES	25 7%	322 6%	2 7%	3 7%	4 8%	5 7%	9 8%	2 5%	21 7%	1 ~100%	~	~	~	3 10%	2 10%	23 7%	16 8%	9 7%	12 9%	13 6%
USUALLY	45 13%	697 14%	2 7%	9 21%	7 14%	13 19%	12 11%	2 5%	35 12%	~	~	~	2 ~	7 23%	1 5%	42 14%	30 16%	15 11%	18 14%	27 13%
ALWAYS	260 77%	3891 78%	23 79%	31 72%	37 76%	50 74%	82 76%	34 89%	221 78%	1 100%	~	6 ~100%	4 57%	20 67%	15 75%	236 77%	144 75%	107 79%	99 74%	158 78%
#ALWAYS + USUALLY (NET)	305 90%	4589 92%	25 86%	40 93%	44 90%	63 93%	94 87%	36 95%	256 90%	1 100%	~	6 ~100%	6 86%	27 90%	16 80%	278 91%	174 90%	122 90%	117 88%	185 92%
TOP BOX SCORE	260 77%	3891 78%	23 79%	31 72%	37 76%	50 74%	82 76%	34 89%	221 78%	1 100%	~	6 ~100%	4 57%	20 67%	15 75%	236 77%	144 75%	107 79%	99 74%	158 78%
NOT ANSWERED	4	87					2	1	4						2	2	3	1	1	3
VALID CASES	338	5008	29	43	49	68	108	38	283	1	1	6	7	30	20	307	193	136	133	202
NUMBER OF RESPONDENTS	342	5095	29	43	49	68	110	39	287	1	1	6	7	30	22	309	196	137	134	205
	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?

	WORA 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 & POOR	MALE	FE- MALE		
Q35 WORST HEALTH PLAN POSSIBLE	8 3%	59 1%	1 4%~	2 ~	2 4%~	3 3%	3 3%	6 2%	~	~	~	~	~	~	6 2%	5 3%	3 2%	3 3%	5 3%		
01	7 2%	31 0.6%	1 4%~	~	1 ~	5 2%	5 5%	6 2%	~	~	~	~	1 4%~	7 2%	4 2%	3 2%	1 0.9%	6 3%			
02	3 1%	40 0.8%	1 4%~	~	2 ~	~	2 ~0.8%	~	~	~	~	1 4%~	3 1%	3 0.6%	1 2%	2 0.9%	1 1%	2 1%			
03	10 3%	85 2%	~	1 3%~	2 4%~	4 6%	1 3%	1 3%	7 3%	~	~	~	~	2 7%~	9 3%	6 3%	3 2%	2 2%	7 4%		
04	8 3%	121 2%	1 4%~	2 5%~	2 4%~	2 3%	1 1%	7 3%	~	~	~	~	1 4%~	8 3%	4 2%	4 3%	3 3%	5 3%			
05	36 12%	451 9%	4 16%~	5 13%~	5 10%~	8 13%	12 12%	1 3%	33 13%	~	~	~	~	2 7%	3 15%~	32 11%~	17 9%	16 13%	14 12%	21 11%	
06	30 10%	332 7%	3 12%~	5 13%~	6 13%~	8 13%	6 6%	2 6%~	22 8%	1 ~100%~	~	~	1 ~14%~	5 18%~	3 15%~	26 9%~	18 10%	12 10%	11 9%	19 10%	
07	39 13%	632 13%	2 8%~	10 25%~	6 13%~	6 10%	11 11%	4 12%~	37 14%*	~	~	~	~	2 7%~	1 5%~	38 13%~	25 14%	14 12%	15 13%	24 13%	
08	53 17%	921 19%	3 12%~	4 10%~	5 10%~	13 21%	24 24%*	4 12%~	44 17%	~	~	~	1 ~17%~	1 14%~	5 18%~	2 10%~	51 18%~	30 17%	21 17%	21 18%	32 17%
09	39 13%	768 16%	2 8%~	7 18%~	7 15%~	7 11%	9 9%	7 21%~	35 14%	~	~	~	1 ~17%~	1 14%~	2 7%~	3 15%~	35 12%~	19 11%	19 16%	16 14%	23 12%
BEST HEALTH PLAN POSSIBLE	77 25%	1430 29%	7 28%~	6 15%~	13 27%~	9 15%*	26 27%	15 44%~	60 23%	~	~	~	4 ~67%~	4 57%~	7 25%~	8 40%~	67 24%~	50 28%	24 20%	30 26%	46 24%
#8-10 (NET)	169 55%	3119 64%*	12 48%~	17 43%~	25 52%~	29 47%	59 60%	26 76%~	139 54%	~	~	~	6 ~100%~	6 86%~	14 50%~	13 65%~	153 54%~	99 55%	64 53%	67 57%	101 53%

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	
	WORA 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 & POOR	FE- MALE	MALE		
9-10 (NET)	116 37%	2198 45%*	9 36%~	13 33%~	20 42%~	16 26%*	35 36%	22 65%~	95 37%	~	~	5 ~ 83%~	5 71%~	9 32%~	11 55%~	102 36%~	69 39%	43 36%	46 39%	69 36%
NOT ANSWERED	51	583	4	3	3	7	12	8	34	1				2	2	33	20	18	18	20
VALID CASES	310	4870	25	40	48	62	98	34	259	1	6	7	28	20	282	179	121	117	190	
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%	
MEAN	7.27	7.82	6.84	7.28	7.29	6.65	7.33	8.62	7.27	6.00	9.50	9.00	6.96	8.15	7.26	7.37	7.12	7.47	7.16	
p stat_(*=Sig @ p<=.05)		.000*	~	~	~.038*	.788	~	.985	~	~	~	~	~	~	~	~.418	.402	.267	.358	

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?

	WORA 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 IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q35A YES	50 15%	736 14%	2 7%	3 7%	4 8%	10 15%	22 21%	9 23%	41 14%	~	~	~	~	~	8 27%	1 5%	46 15%	16 8%*	34 25%*	21 16%	29 15%
NO	286 85%	4378 86%	27 93%~	40 93%~	45 92%~	56 85%	84 79%	31 78%~	242 86%	~100%~	1	6	7	22	21 73%~	258 95%~	85%~	176 92%*	100 75%*	112 84%	171 85%
NOT ANSWERED	25	339			2	3	4	2	10	1						11	7	5	2	10	
VALID CASES	336	5114	29	43	49	66	106	40	283	1	6	7	30	22	304	192	134	133	200		
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%	

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

	WORA 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- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35B NEVER	20 42%	123 19%	2 100%	1 33%	1 25%	5 56%	8 38%	3 33%	13 33%	~	~	~	~	~	6 75%	18 40%	6 38%	14 44%	10 48%	10 37%	
SOMETIMES	4 8%	72 11%	~	~	~	~	4 19%	~	2 5%	~	~	~	~	~	2 25%	4 9%	2 13%	2 6%	2 10%	2 7%	
USUALLY	5 10%	177 27%	~	1 33%	1 25%	1 11%	1 5%	1 11%	5 13%	~	~	~	~	~	~	5 11%	2 13%	3 9%	2 10%	3 11%	
ALWAYS	19 40%	279 43%	~	1 33%	2 50%	3 33%	8 38%	5 56%	19 49%	~	~	~	~	~	~	1 100%	18 40%	6 38%	13 41%	7 33%	12 44%
#ALWAYS + USUALLY (NET)	24 50%	456 70%	~	2 67%	3 75%	4 44%	9 43%	6 67%	24 62%	~	~	~	~	~	~	1 100%	23 51%	8 50%	16 50%	9 43%	15 56%
TOP BOX SCORE	19 40%	279 43%	~	1 33%	2 50%	3 33%	8 38%	5 56%	19 49%	~	~	~	~	~	~	1 100%	18 40%	6 38%	13 41%	7 33%	12 44%
NOT ANSWERED	2	24				1	1		2							1		2		2	
VALID CASES	48	651	2	3	4	9	21	9	39						8	1	45	16	32	21	27
NUMBER OF RESPONDENTS	50	675	2	3	4	10	22	9	41						8	1	46	16	34	21	29
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35A = YES]

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

		AGE							RACE					ETHNICITY		HEALTH STATUS		GENDER			
WORA 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 & FAIR & POOR	FE- MALE	MALE			
Q35C YES	55 16%	760 15%	3 10%~	3 7%~	6 12%~	17 25%*	20 19%	6 14%~	46 16%	~	~	~	~	1 14%~	7 24%~	2 9%~	50 16%~	25 13%	29 21%*	17 13%	38 19%
NO	287 84%	4319 85%	26 90%~	40 93%~	43 88%~	50 75%*	88 81%	36 86%~	242 84%	1 100%~	1 100%~	~	6 ~100%~	6 86%~	22 76%~	20 91%~	259 84%~	172 87%	106 79%*	117 87%	167 81%
NOT ANSWERED	19	373			2	2	2		5				1		6	2	4		1	5	
VALID CASES	342	5080	29	43	49	67	108	42	288	1	1		6	7	29	22	309	197	135	134	205
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%		6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%



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

	WORA 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- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35D NEVER	19 36%	165 23%	1 33%~	1 33%~	1 20%~	9 56%~	7 35%~	15 34%~	~	~	~	~	~	3 43%~	17 35%~	7 28%~	11 41%~	6 38%~	13 35%~		
SOMETIMES	10 19%	141 19%	1 33%~	~	2 40%~	2 13%~	4 20%~	1 17%~	7 16%~	~	~	~	~	3 43%~	2 100%~	8 17%~	5 20%~	5 19%~	3 19%~	7 19%~	
USUALLY	10 19%	179 25%	1 33%~	1 33%~	2 40%~	4 25%~	2 10%~	10 23%~	~	~	~	~	~	~	10 21%~	8 32%~	2 7%~	4 25%~	6 16%~		
ALWAYS	14 26%	239 33%	~	1 33%~	~	1 6%~	7 35%~	5 83%~	12 27%~	~	~	~	~	1 100%~	1 14%~	13 27%~	5 20%~	9 33%~	3 19%~	11 30%~	
#ALWAYS + USUALLY (NET)	24 45%	418 58%	1 33%~	2 67%~	2 40%~	5 31%~	9 45%~	5 83%~	22 50%~	~	~	~	~	1 100%~	1 14%~	23 48%~	13 52%~	11 41%~	7 44%~	17 46%~	
TOP BOX SCORE	14 26%	239 33%	~	1 33%~	~	1 6%~	7 35%~	5 83%~	12 27%~	~	~	~	~	1 100%~	1 14%~	13 27%~	5 20%~	9 33%~	3 19%~	11 30%~	
NOT ANSWERED	2	20			1	1		2							2		2	1	1		
VALID CASES	53	725	3	3	5	16	20	6	44					1	7	2	48	25	27	16	37
NUMBER OF RESPONDENTS	55	745	3	3	6	17	20	6	46					1	7	2	50	25	29	17	38
	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	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q35E	WORA TOT ADLT																			
YES	195 57%	2872 56%	15 54%~	14 33%~	28 58%~	44 66%	71 65%*	22 52%~	164 57%	~	~	3 50%~	4 57%~	18 62%~	13 59%~	175 57%~	89 45%*	102 75%*	68 52%	126 61%
NO	147 43%	2261 44%	13 46%~	29 67%~	20 42%~	23 34%	39 35%*	20 48%~	124 43%	1 100%	1 100%~	3 50%~	3 43%~	11 38%~	9 41%~	134 43%~	107 55%*	34 25%*	64 48%	81 39%
NOT ANSWERED	19	320	1		3	2			5					1		6	3	3	3	3
VALID CASES	342	5133	28	43	48	67	110	42	288	1	1	6	7	29	22	309	196	136	132	207
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q35F																					
NO EFFORT AT ALL	13 7%	94 3%	1 ~	1 7%	5 4%	5 11%	1 7%	11 5%	11 7%	~	~	~	1 25%	1 ~	10 6%	4 5%	9 9%	6 9%	7 6%		
A LITTLE EFFORT WAS MADE	27 14%	213 8%*	4 27%	1 7%	5 20%	6 14%	8 11%	3 14%	19 12%	~	~	~	1 25%	6 33%	2 15%	24 14%	11 13%	16 16%	9 14%	18 15%	
SOME EFFORT WAS MADE	45 24%	662 24%	4 27%	6 43%	5 20%	9 20%	17 24%	4 19%	40 25%	~	~	~	1 25%	3 17%	2 15%	41 24%	17 20%	27 27%	14 22%	31 25%	
A LOT OF EFFORT WAS MADE	105 55%	1793 65%*	7 47%	6 43%	14 56%	24 55%	40 57%	13 62%	89 56%	~	~	~	3 100%	1 25%	9 50%	8 62%	95 56%	53 62%	49 49%*	36 55%	68 55%
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	150 79%	2455 89%*	11 73%	12 86%	19 76%	33 75%	57 81%	17 81%	129 81%	~	~	~	3 100%	2 50%	12 67%	10 77%	136 80%	70 82%	76 75%	50 77%	99 80%
TOP BOX SCORE	105 55%	1793 65%*	7 47%	6 43%	14 56%	24 55%	40 57%	13 62%	89 56%	~	~	~	3 100%	1 25%	9 50%	8 62%	95 56%	53 62%	49 49%*	36 55%	68 55%
NOT ANSWERED	5	95			3		1	1	5							5	4	1	3	2	
VALID CASES	190	2763	15	14	25	44	70	21	159				3	4	18	13	170	85	101	65	124
NUMBER OF RESPONDENTS	195	2858	15	14	28	44	71	22	164				3	4	18	13	175	89	102	68	126
	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35E = YES]

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

	WORA 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	
Q35G NO EFFORT AT ALL	15 8%	135 5%	1 7%~	1 ~	5 4%~	8 11%~	12%~	11 7%~	~	~	~	~	1 25%~	2 11%~	1 8%~	13 8%~	4 5%	11 11%	7 11%	8 6%	
A LITTLE EFFORT WAS MADE	22 12%	226 8%	4 27%~	1 7%~	2 8%~	7 16%~	6 9%	2 10%~	15 9%~	~	~	~	~	5 28%~	2 15%~	17 10%~	11 13%	11 11%	7 11%	15 12%	
SOME EFFORT WAS MADE	47 25%	652 24%	4 27%~	5 36%~	8 31%~	7 16%~	18 26%	5 24%~	41 26%~	~	~	~	2 50%~	3 17%~	4 31%~	41 24%~	16 19%	29 29%	16 25%	31 25%	
A LOT OF EFFORT WAS MADE	106 56%	1759 63%*	6 40%~	8 57%~	15 58%~	25 57%~	37 54%	14 67%~	92 58%~	~	~	~	3 100%~	1 25%~	8 44%~	6 46%~	99 58%~	55 64%*	49 49%*	35 54%	70 56%
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	153 81%	2411 87%*	10 67%~	13 93%~	23 88%~	32 73%~	55 80%	19 90%~	133 84%~	~	~	~	3 100%~	3 75%~	11 61%~	10 77%~	140 82%~	71 83%	78 78%	51 78%	101 81%
TOP BOX SCORE	106 56%	1759 63%*	6 40%~	8 57%~	15 58%~	25 57%~	37 54%	14 67%~	92 58%~	~	~	~	3 100%~	1 25%~	8 44%~	6 46%~	99 58%~	55 64%*	49 49%*	35 54%	70 56%
NOT ANSWERED	5	87			2		2	1	5							5	3	2	3	2	
VALID CASES	190	2771	15	14	26	44	69	21	159				3	4	18	13	170	86	100	65	124
NUMBER OF RESPONDENTS	195	2858	15	14	28	44	71	22	164				3	4	18	13	175	89	102	68	126
	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?

	WORA 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- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35H																					
NO EFFORT AT ALL	25 13%	191 7%*	1 7%~	1 7%~	3 12%~	10 23%~	9 13%	1 5%	18 11%~	~	~	~	~	1 25%~	3 18%~	1 8%~	20 12%~	9 11%	16 16%	9 14%	16 13%
A LITTLE EFFORT WAS MADE	19 10%	242 9%	3 20%~	2 14%~	1 4%~	5 11%~	5 7%	3 14%~	16 10%~	~	~	~	~	1 25%~	2 12%~	1 8%~	18 11%~	5 6%	14 14%	9 14%	10 8%
SOME EFFORT WAS MADE	49 26%	781 28%	5 33%~	3 21%~	8 32%~	7 16%~	22 31%	4 19%~	42 26%~	~	~	~	~	1 25%~	5 29%~	5 38%~	43 25%~	22 26%	25 25%	19 29%	30 24%
A LOT OF EFFORT WAS MADE	97 51%	1558 56%	6 40%~	8 57%~	13 52%~	22 50%~	34 49%	13 62%~	84 53%~	~	~	~	3 100%~	1 25%~	7 41%~	6 46%~	89 52%~	49 58%	46 46%	28 43%	68 55%
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	146 77%	2339 84%*	11 73%~	11 79%~	21 84%~	29 66%~	56 80%	17 81%~	126 79%~	~	~	~	3 100%~	2 50%~	12 71%~	11 85%~	132 78%~	71 84%*	71 70%*	47 72%	98 79%
TOP BOX SCORE	97 51%	1558 56%	6 40%~	8 57%~	13 52%~	22 50%~	34 49%	13 62%~	84 53%~	~	~	~	3 100%~	1 25%~	7 41%~	6 46%~	89 52%~	49 58%	46 46%	28 43%	68 55%
NOT ANSWERED	5	85			3		1	1	4						1		5	4	1	3	2
VALID CASES	190	2773	15	14	25	44	70	21	160				3	4	17	13	170	85	101	65	124
NUMBER OF RESPONDENTS	195	2858	15	14	28	44	71	22	164				3	4	18	13	175	89	102	68	126
	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?

	WORA 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			
Q35I YES	109 32%	1866 37%	9 31%~	13 31%~	23 47%~	21 31%	31 29%	12 29%~	94 33%	~	~	~	2 33%~	3 43%~	9 32%~	7 32%~	101 33%~	55 29%	53 39%*	40 31%	69 34%
NO	229 68%	3186 63%	20 69%~	29 69%~	26 53%~	46 69%	75 71%	29 71%~	191 67%	1 100%~	1 100%~	~	4 67%~	4 57%~	19 68%~	15 68%~	205 67%~	137 71%	84 61%*	91 69%	135 66%
NOT ANSWERED	23	400		1	2	2	4	1	8						2		9	7	2	4	6
VALID CASES	338	5053	29	42	49	67	106	41	285	1	1		6	7	28	22	306	192	137	131	204
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%		6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%

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?

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE			
Q35J #YES	95 90%	1483 85%	8 89%~	11 85%~	19 86%~	20 95%~	29 97%~	8 80%~	82 91%~	~	~	2 ~100%~	2 67%~	8 89%~	6 100%~	88 90%~	52 95%	43 86%	35 92%~	60 90%~
NO	10 10%	254 15%	1 11%~	2 15%~	3 14%~	1 5%~	1 3%~	2 20%~	8 9%~	~	~	~	1 ~33%~	1 11%~	~	10 ~10%~	3 5%	7 14%	3 8%~	7 10%~
NOT ANSWERED	4	58			1		1	2	4						1	3		3	2	2
VALID CASES	105	1737	9	13	22	21	30	10	90			2	3	9	6	98	55	50	38	67
NUMBER OF RESPONDENTS	109	1795	9	13	23	21	31	12	94			2	3	9	7	101	55	53	40	69
	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?

	WORA 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 & FAIR & POOR	FE- MALE	MALE		
Q35K #YES	87 84%	1402 81%	7 78%~	9 69%~	19 86%~	16 80%~	27 90%~	9 100%~	76 86%~	~	~	~	2 ~100%~	1 33%~	7 78%~	5 83%~	81 84%~	45 85%	42 84%	30 79%~	57 88%~
NO	16 16%	326 19%	2 22%~	4 31%~	3 14%~	4 20%~	3 10%~	12 ~	14%~	~	~	~	2 ~	2 67%~	2 22%~	1 17%~	15 16%~	8 15%	8 16%	8 21%~	8 12%~
NOT ANSWERED	6	67			1	1	1	3	6							1	5	2	3	2	4
VALID CASES	103	1728	9	13	22	20	30	9	88				2	3	9	6	96	53	50	38	65
NUMBER OF RESPONDENTS	109	1795	9	13	23	21	31	12	94				2	3	9	7	101	55	53	40	69
	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35I = YES]





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

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35M ALWAYS	20 6%	387 8%	2 7%	3 7%	4 8%	2 3%	7 7%	2 5%	14 5%	~	~	~	1 17%	1 14%	3 11%	4 20%	15 5%	14 7%	5 4%	9 7%	11 5%
USUALLY	15 5%	258 5%	1 3%	2 5%	5 10%	2 3%	5 5%	~	14 5%	~	~	~	~	~	1 4%	~	14 5%	4 2%*	11 8%*	7 5%	8 4%
SOMETIMES	73 22%	881 18%	9 31%	11 26%	9 18%	16 24%	20 19%	7 18%	59 21%	1 100%	~	1 17%	2 29%	6 21%	4 20%	66 22%	36 19%	35 26%	25 19%	48 24%	
NEVER	223 67%	3452 69%	17 59%	26 62%	32 64%	46 70%	71 69%	31 78%	194 69%	1 100%	~	4 67%	4 57%	18 64%	12 60%	208 69%	137 72%	83 62%	89 68%	134 67%	
#NEVER + SOMETIMES (NET)	296 89%	4333 87%	26 90%	37 88%	41 82%	62 94%	91 88%	38 95%	253 90%	1 100%	1 100%	~	5 83%	6 86%	24 86%	16 80%	274 90%	173 91%	118 88%	114 88%	182 91%
TOP BOX SCORE	223 67%	3452 69%	17 59%	26 62%	32 64%	46 70%	71 69%	31 78%	194 69%	1 100%	~	4 67%	4 57%	18 64%	12 60%	208 69%	137 72%	83 62%	89 68%	134 67%	
NOT ANSWERED	30	476		1	1	3	7	2	12						2	2	12	8	5	5	9
VALID CASES	331	4977	29	42	50	66	103	40	281	1	1		6	7	28	20	303	191	134	130	201
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%		6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%

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			
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q35N ALWAYS	8 2%	113 2%	~	~	4%	~	6%*	~	3%	~	~	~	~	~	3%	~	2%	3%	2%	3%		
USUALLY	12 4%	124 2%	7%~	5%~	2%	5%	3%	3%~	3%	~	~	~	~	10%~	5%~	4%~	3%	5%	4%	4%		
SOMETIMES	67 20%	728 15%*	18%~	22%~	28%	20%	19%	18%~	18%*	~100%~	~	~	33%~	29%~	21%~	25%~	20%~	16%*	25%	18%	22%	
NEVER	241 73%	4037 81%*	75%~	73%~	66%	76%	73%	80%~	76%*	100%~	~	~	67%~	71%~	66%~	70%~	74%~	79%*	66%*	76%	72%	
#NEVER + SOMETIMES (NET)	308 94%	4765 95%	93%~	95%~	94%	95%	91%	98%~	94%	100%~	100%~	~	~	100%~	100%~	86%~	95%~	94%~	96%	92%	94%	94%
TOP BOX SCORE	241 73%	4037 81%*	75%~	73%~	66%	76%	73%	80%~	76%*	100%~	~	~	67%~	71%~	66%~	70%~	74%~	79%*	66%*	76%	72%	
NOT ANSWERED	33	451	1	2	1	3	8	2	16					1	2	14	10	5	6	11		
VALID CASES	328	5002	28	41	50	66	102	40	277	1	1		6	7	29	20	301	189	134	129	199	
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%		6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%	

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?

	WORA 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- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE		
Q350 ALWAYS	6 2%	98 2%	~	~	1 2%	1 2%	4 4%	~	4 1%	~	~	~	~	~	~	2 7%	~	4 1%	1 0.5%	4 3%	1 0.8%	5 3%
USUALLY	11 3%	112 2%	1 3%	2 5%	3 6%	~	3 3%	2 5%	9 3%	~	~	~	~	~	~	2 7%	~	10 3%	2 1%*	9 7%*	2 2%	9 5%
SOMETIMES	43 13%	493 10%	4 14%	8 19%	5 10%	11 17%	12 12%	3 8%	36 13%	~	~	~	~	2 29%	4 14%	6 30%	37 12%	21 11%	20 15%	13 10%	30 15%	
NEVER	266 82%	4278 86%*	24 83%	32 76%	39 81%	53 82%	83 81%	34 87%	226 82%	1 100%	1 100%	~	6 ~100%	5 71%	21 72%	14 70%	247 83%	162 87%*	101 75%*	111 87%*	155 78%*	
#NEVER + SOMETIMES (NET)	309 95%	4771 96%	28 97%	40 95%	44 92%	64 98%*	95 93%	37 95%	262 95%	1 100%	1 100%	~	6 ~100%	7 100%	25 86%	20 100%	284 95%	183 98%*	121 90%*	124 98%*	185 93%*	
TOP BOX SCORE	266 82%	4278 86%*	24 83%	32 76%	39 81%	53 82%	83 81%	34 87%	226 82%	1 100%	1 100%	~	6 ~100%	5 71%	21 72%	14 70%	247 83%	162 87%*	101 75%*	111 87%*	155 78%*	
NOT ANSWERED	35	472	1	3	4	8	3	18						1	2	17	13	5	8	11		
VALID CASES	326	4981	29	42	48	65	102	39	275	1	1	~	6	7	29	20	298	186	134	127	199	
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%	~	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%	

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

	WORA 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 LLND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q35P																					
#YES DEFINITELY	195 60%	3312 67%*	18 62%~	24 60%~	28 57%~	36 55%	65 64%	24 62%~	169 61%	1 100%~	~	5 83%~	3 43%~	15 52%~	12 60%~	181 61%~	124 66%*	68 51%*	76 60%	119 60%	
YES SOMEWHAT	91 28%	1213 25%	9 31%~	11 28%~	16 33%~	19 29%	23 23%	12 31%~	73 27%	1 100%~	~	1 17%~	2 29%~	11 38%~	5 25%~	83 28%~	47 25%	41 31%	38 30%	53 27%	
NO	40 12%	418 8%*	2 7%~	5 13%~	5 10%~	11 17%	14 14%	3 8%~	33 12%	~	~	~	2 29%~	3 10%~	3 15%~	34 11%~	16 9%*	24 18%*	13 10%	27 14%	
NOT ANSWERED	35	511		3	2	3	8	3	18					1	2	17	12	6	8	11	
VALID CASES	326	4942	29	40	49	66	102	39	275	1	1		6	7	29	20	298	187	133	127	199
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%		6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%

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?

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
Q35Q YES	173 51%	2643 53%	18 62%~	26 60%~	30 59%	34 49%	52 48%	12 30%~	146 51%	1 100%~	~	3 ~ 50%~	2 29%~	15 50%~	11 50%~	159 51%~	115 58%*	54 39%*	63 47%	110 53%
NO	168 49%	2382 47%	11 38%~	17 40%~	21 41%	35 51%	56 52%	28 70%~	143 49%	1 ~100%~	~	3 ~ 50%~	5 71%~	15 50%~	11 50%~	152 49%~	83 42%*	83 61%*	70 53%	98 47%
NOT ANSWERED	20	428					2	2	4						4	1	2	2	2	
VALID CASES	341	5025	29	43	51	69	108	40	289	1	1	6	7	30	22	311	198	137	133	208
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%

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?

	WORA 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	ASIAN	NATV ILND	AMER HAW/ IND/ PAC ALSK	OTHR	MULTI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	FE-MALE	MALE	
Q35R NEVER	61 44%	799 36%	6 50%	6 25%	7 37%	11 38%	25 53%	6 75%	53 44%	1 100%	~	~	~	1 50%	5 38%	5 45%	53 42%	30 38%	29 50%	18 36%	43 48%
SOMETIMES	26 19%	439 20%	4 33%	5 21%	3 16%	6 21%	5 11%	2 25%	19 16%	~	~	~	1 50%	5 38%	3 27%	23 18%	15 19%	11 19%	11 22%	15 17%	
USUALLY	22 16%	421 19%	~	9 38%	1 5%	7 24%	5 11%	~	21 18%	~	~	~	~	~	1 8%	1 9%	21 17%	14 18%	8 14%	11 22%	11 12%
ALWAYS	31 22%	564 25%	2 17%	4 17%	8 42%	5 17%	12 26%	~	27 22%	~	~	~	1 50%	1 50%	2 15%	2 18%	28 22%	20 25%	10 17%	10 20%	21 23%
#ALWAYS + USUALLY (NET)	53 38%	985 44%	2 17%	13 54%	9 47%	12 41%	17 36%	~	48 40%	~	~	~	1 50%	1 50%	3 23%	3 27%	49 39%	34 43%	18 31%	21 42%	32 36%
TOP BOX SCORE	31 22%	564 25%	2 17%	4 17%	8 42%	5 17%	12 26%	~	27 22%	~	~	~	1 50%	1 50%	2 15%	2 18%	28 22%	20 25%	10 17%	10 20%	21 23%
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	194	2730	17	19	30	39	58	31	162	1			4	5	17	10	180	114	77	80	114
NOT ANSWERED	27	500			2	1	5	3	11							1	10	6	4	5	6
VALID CASES	140	2223	12	24	19	29	47	8	120	1			2	2	13	11	125	79	58	50	90
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1		6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%

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

	AGE							RACE					ETHNICITY		HEALTH STATUS		GENDER			
	WORA 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- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q36																				
EXCELLENT	19 6%	477 9%*	5 17%~	3 7%~	1 ~	6 1%*	4 6%	15 5%	~	~	1 ~	1 14%~	2 7%~	3 14%~	16 5%~	19 10%*	~	8 6%	11 5%	
VERY GOOD	76 22%	1176 23%	9 31%~	10 24%~	13 27%~	16 23%	20 19%	8 20%~	63 22%	1 100%~	1 100%~	2 ~	1 14%~	6 20%~	4 18%~	70 23%~	76 38%*	~	29 22%	47 23%
GOOD	104 31%	1761 35%	10 34%~	15 36%~	21 43%~	19 28%	32 30%	6 15%~	94 33%*	~	~	2 ~	7 23%~	5 23%~	98 32%~	104 52%*	~	46 35%	58 28%	
FAIR	93 28%	1244 25%	5 17%~	11 26%~	9 18%~	18 26%	34 32%	16 39%~	75 26%	~	~	1 ~	4 57%~	10 33%~	8 36%~	83 27%~	93 ~	31 23%	62 30%	
POOR	46 14%	405 8%*	~	3 7%~	6 12%~	15 22%	15 14%	7 17%~	39 14%	~	~	~	1 ~	5 14%~	2 17%~	42 9%~	46 14%~	18 ~	28 14%	
#EXCELLENT + VERY GOOD + GOOD (NET)	199 59%	3415 67%*	24 83%~	28 67%~	34 69%~	36 52%	58 54%	18 44%~	172 60%	1 100%~	1 100%~	5 ~	2 29%~	15 50%~	12 55%~	184 60%~	199 100%~	~	83 63%	116 56%
NOT ANSWERED	23	389		1	2		3	1	7						6			3	4	
VALID CASES	338	5064	29	42	49	69	107	41	286	1	1	6	7	30	22	309	199	139	132	206
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%



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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	WORA 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/ ILND	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE	
Q37 EXCELLENT	59 17%	895 18%	11 38%~	10 24%~	5 10%*	7 10%*	16 15%	10 25%~	47 16%	1 100%~			2 ~	1 ~	7 33%~	6 27%~	52 17%~	46 23%*	13 9%*	27 20%	32 15%
VERY GOOD	89 26%	1258 25%	7 24%~	14 33%~	16 31%	16 23%	24 22%	12 30%~	77 27%	1 ~100%~			2 ~		7 ~	4 18%~	84 27%~	69 35%*	19 14%*	32 24%	57 28%
GOOD	94 28%	1533 30%	4 14%~	12 29%~	16 31%	19 28%	34 31%	8 20%~	81 28%				1 ~	3 ~	7 ~	3 14%~	88 28%~	62 31%	32 23%	40 30%	54 26%
FAIR	67 20%	1027 20%	5 17%~	3 7%~	9 18%	19 28%	22 20%	9 23%~	56 19%				1 ~	1 ~	8 ~	6 27%~	60 19%~	18 9%*	47 34%*	24 18%	43 21%
POOR	32 9%	363 7%	2 7%~	3 7%~	5 10%	8 12%	13 12%	1 3%~	28 10%				2 ~	1 ~	1 ~	3 14%~	28 9%~	4 2%*	27 20%*	11 8%	21 10%
#EXCELLENT + VERY GOOD + GOOD (NET)	242 71%	3685 73%	22 76%~	36 86%~	37 73%	42 61%	74 68%	30 75%~	205 71%	1 100%~	1 100%~		5 ~	4 ~	21 70%~	13 59%~	224 72%~	177 89%*	64 46%*	99 74%	143 69%
NOT ANSWERED	20	378		1			1	2	4							3		1	1	3	
VALID CASES	341	5075	29	42	51	69	109	40	289	1	1		6	7	30	22	312	199	138	134	207
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%		6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%

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/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q38																					
#YES	144 43%	2160 44%	10 37%	11 26%	17 34%	29 44%	55 51%	22 55%	128 45%	~	~	~	1 17%	2 29%	10 36%	8 40%	133 43%	72 37%*	71 53%*	49 38%	95 47%
NO	189 57%	2803 56%	17 63%	31 74%	33 66%	37 56%	53 49%	18 45%	156 55%	1 100%	~	~	5 83%	5 71%	18 64%	12 60%	173 57%	121 63%*	64 47%*	81 62%	108 53%
DON'T KNOW	7	112	2	1		3	1		5					2		2	5	4	3	4	3
NOT ANSWERED	21	379			1		1	2	4	1						4	2	1	1	4	
VALID CASES	333	4963	27	42	50	66	108	40	284	1			6	7	28	20	306	193	135	130	203
NUMBER OF RESPONDENTS	361	5453	29	43	51	69	110	42	293	1	1		6	7	30	22	315	199	139	135	210
	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	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q39																					
EVERY DAY	82 24%	1063 21%	3 11%~	6 14%~	12 24%	22 32%	32 29%	7 17%~	70 24%~	1 100%~		1 ~	9 ~	33%~	4 20%~	75 24%~	40 20%	42 30%*	32 24%	50 24%	
SOME DAYS	39 11%	463 9%	2 7%~	9 21%~	9 18%	11 16%	7 6%*	1 2%~	36 12%~			1 ~	2 ~	7%~	38 ~	12%~	20 10%	18 13%	14 11%	25 12%	
NOT AT ALL	219 64%	3502 70%*	22 81%~	28 65%~	29 58%	36 52%*	71 65%	33 80%~	185 64%~	1 ~100%~		5 ~	6 86%~	16 59%~	16 80%~	199 64%~	136 69%*	78 57%*	87 65%	132 64%	
DON'T KNOW	2	42	1		1								2	1	1	1	1	1	1	1	
NOT ANSWERED	19	383	1					1	2				1	1	2	2			1	2	
VALID CASES	340	5028	27	43	50	69	110	41	291	1	1		6	7	27	20	312	196	138	133	207
NUMBER OF RESPONDENTS	361	5453	29	43	51	69	110	42	293	1	1		6	7	30	22	315	199	139	135	210
	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?

	WORA TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q40 NEVER	25 21%	435 26%	2 40%	4 27%	3 14%	7 21%	6 17%	3 38%	21 20%	~	~	~	~	~	3 27%	2 50%	22 20%	13 22%	11 19%	11 24%	14 19%
SOMETIMES	30 25%	355 21%	~	6 40%	6 29%	9 27%	8 22%	1 13%	25 24%	~	~	1 ~100%	~	4 ~36%	1 25%	28 25%	14 24%	16 28%	11 24%	19 26%	
USUALLY	16 14%	280 17%	1 20%	2 13%	5 24%	3 9%	5 14%	~	15 15%	~	~	~	~	1 ~100%	~	16 ~14%	10 17%	6 10%	7 16%	9 12%	
ALWAYS	47 40%	589 35%	2 40%	3 20%	7 33%	14 42%	17 47%	4 50%	42 41%	1 100%	~	~	~	4 ~36%	1 25%	45 41%	22 37%	25 43%	16 36%	31 42%	
#ALWAYS + USUALLY (NET)	63 53%	869 52%	3 60%	5 33%	12 57%	17 52%	22 61%	4 50%	57 55%	1 100%	~	~	~	1 ~100%	4 36%	61 55%	32 54%	31 53%	23 51%	40 55%	
TOP BOX SCORE	47 40%	589 35%	2 40%	3 20%	7 33%	14 42%	17 47%	4 50%	42 41%	1 100%	~	~	~	4 ~36%	1 25%	45 41%	22 37%	25 43%	16 36%	31 42%	
NOT ANSWERED	3	31					3		3							2	1	2	1	2	
VALID CASES	118	1659	5	15	21	33	36	8	103	1		1	1	11	4	111	59	58	45	73	
NUMBER OF RESPONDENTS	121	1690	5	15	21	33	39	8	106	1		1	1	11	4	113	60	60	46	75	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	WORA 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	GOOD & POOR	MALE	FE- MALE	
Q41 NEVER	66 56%	750 46%*	3 60%~	8 53%~	9 43%~	18 56%~	23 64%~	5 63%~	56 55%~	~	~	~	1 ~100%~	1 ~100%~	8 73%~	2 50%~	63 57%~	34 58%	32 56%	24 55%~	42 58%~
SOMETIMES	26 22%	380 23%	1 20%~	6 40%~	6 29%~	7 22%~	4 11%~	2 25%~	23 23%~	~	~	~	~	~	2 18%~	1 25%~	23 21%~	15 25%	10 18%	8 18%~	18 25%~
USUALLY	10 9%	243 15%*	1 20%~	~	3 14%~	1 3%~	5 14%~	~	10 10%~	~	~	~	~	~	~	1 25%~	9 8%~	4 7%	6 11%	4 9%~	6 8%~
ALWAYS	15 13%	267 16%	~	1 7%~	3 14%~	6 19%~	4 11%~	1 13%~	13 13%~	1 100%~	~	~	~	~	1 9%~	15 ~14%~	6 10%	9 16%	8 18%~	7 10%~	
#ALWAYS + USUALLY (NET)	25 21%	510 31%*	1 20%~	1 7%~	6 29%~	7 22%~	9 25%~	1 13%~	23 23%~	1 100%~	~	~	~	~	1 9%~	1 25%~	24 22%~	10 17%	15 26%	12 27%~	13 18%~
TOP BOX SCORE	15 13%	267 16%	~	1 7%~	3 14%~	6 19%~	4 11%~	1 13%~	13 13%~	1 100%~	~	~	~	~	1 9%~	15 ~14%~	6 10%	9 16%	8 18%~	7 10%~	
NOT ANSWERED	4	51				1	3		4							3	1	3	2	2	
VALID CASES	117	1639	5	15	21	32	36	8	102	1			1	1	11	4	110	59	57	44	73
NUMBER OF RESPONDENTS	121	1690	5	15	21	33	39	8	106	1			1	1	11	4	113	60	60	46	75
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE		
Q42 NEVER	64 55%	864 53%	2 40%~	11 73%~	8 38%~	18 56%~	20 57%~	5 63%~	56 55%~				1 ~100%~		6 ~55%~	2 50%~	59 55%~	34 59%~	29 51%~	23 55%~	41 55%~	
SOMETIMES	18 16%	340 21%	1 20%~	1 7%~	6 29%~	3 9%~	6 17%~	1 13%~	14 14%~						1 ~100%~	3 27%~	1 25%~	16 15%~	10 17%~	8 14%~	7 17%~	11 15%~
USUALLY	15 13%	207 13%		2 ~13%~	3 14%~	3 9%~	5 14%~	2 25%~	14 14%~						1 ~9%~		15 ~14%~	6 10%~	9 16%~	6 14%~	9 12%~	
ALWAYS	19 16%	215 13%	2 40%~	1 7%~	4 19%~	8 25%~	4 11%~		17 17%~	1 100%~					1 ~9%~	1 25%~	18 17%~	8 14%~	11 19%~	6 14%~	13 18%~	
#ALWAYS + USUALLY (NET)	34 29%	422 26%	2 40%~	3 20%~	7 33%~	11 34%~	9 26%~	2 25%~	31 31%~	1 100%~					2 ~18%~	1 25%~	33 31%~	14 24%~	20 35%~	12 29%~	22 30%~	
TOP BOX SCORE	19 16%	215 13%	2 40%~	1 7%~	4 19%~	8 25%~	4 11%~		17 17%~	1 100%~					1 ~9%~	1 25%~	18 17%~	8 14%~	11 19%~	6 14%~	13 18%~	
NOT ANSWERED	5	64				1	4		5								5	2	3	4	1	
VALID CASES	116	1626	5	15	21	32	35	8	101	1			1	1	11	4	108	58	57	42	74	
NUMBER OF RESPONDENTS	121	1690	5	15	21	33	39	8	106	1			1	1	11	4	113	60	60	46	75	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

Q43 DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
		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	OTHER	MULTI	HIS-IC	NOT HIS-IC	EX & VERY GOOD &	FAIR & POOR	MALE	FEMALE
Q43																				
YES	84 25%	1180 23%	3 ~	6 7%~	15 12%*	35 22%	25 32%*	73 25%	~	~	1 ~	1 14%~	7 24%~	3 14%~	80 26%~	37 19%*	44 32%*	35 26%	49 24%	
NO	257 75%	3848 77%	29 100%~	39 93%~	45 88%*	53 78%	74 68%*	16 39%~	218 75%	1 100%~	1 100%~	5 ~	6 83%~	22 76%~	19 86%~	233 74%~	160 81%*	95 68%*	99 74%	158 76%
DON'T KNOW	2	55	1	1									1		1	2			2	
NOT ANSWERED	18	370				1	1	2							1			1	1	
VALID CASES	341	5028	29	42	51	68	109	41	291	1	1	6	7	29	22	313	197	139	134	207
NUMBER OF RESPONDENTS	361	5453	29	43	51	69	110	42	293	1	1	6	7	30	22	315	199	139	135	210
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
		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	MALE	FE- MALE		
Q44																						
YES	37 12%	460 10%	~	~	3 7%	13 22%*	14 15%	7 18%	34 13%	~	~	~	1 17%	~	2 8%	~	35 13%	8 4%*	29 25%*	10 8%	27 15%	
NO	268 88%	4154 90%	27 100%	39 100%	41 93%	47 78%*	82 85%	31 82%	223 87%	1 100%	1 100%	~	5 83%	7 100%	24 92%	~	20 100%	243 87%	176 96%*	88 75%*	113 92%	155 85%
DON'T KNOW	36	459	2	4	7	8	12	3	32					4		1	35	14	21	11	25	
NOT ANSWERED	20	380				1	2	1	4							1	2	1	1	1	3	
VALID CASES	305	4614	27	39	44	60	96	38	257	1	1		6	7	26	20	278	184	117	123	182	
NUMBER OF RESPONDENTS	361	5453	29	43	51	69	110	42	293	1	1		6	7	30	22	315	199	139	135	210	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	



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

		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	MALE	FE- MALE	
Q45																					
YES	125 37%	1742 35%	2 7%	13 30%	13 26%	22 33%	50 46%*	25 64%~	108 38%	~	~	4 ~	2 29%	9 30%	6 30%	118 38%	59 30%*	62 45%*	54 41%	71 35%	
NO	212 63%	3293 65%	27 93%~	30 70%~	37 74%	45 67%	59 54%*	14 36%~	177 62%	1 100%	1 100%~	2 ~	5 33%~	21 70%~	14 70%	191 62%	135 70%*	75 55%*	79 59%	133 65%	
NOT ANSWERED	24	417			1	2	1	3	8						2	6	5	2	2	6	
VALID CASES	337	5036	29	43	50	67	109	39	285	1	1	6	7	30	20	309	194	137	133	204	
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%	

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	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q46.1	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
YES	90 25%	1316 24%	3 ~	12 7%	25 24%	36 36%*	14 33%*	33%~	74 25%	~	~	1 ~	3 43%~	11 37%~	3 14%~	84 27%~	35 18%*	52 37%*	36 27%	54 26%	
NO	271 75%	4137 76%	29 100%~	40 93%~	39 76%	44 64%*	74 67%*	28 67%~	219 75%	1 100%	1 100%~	5 ~	4 83%~	19 57%~	19 63%~	231 86%~	164 82%*	87 63%*	99 73%	156 74%	
VALID CASES	361	5453	29	43	51	69	110	42	293	1	1	6	7	30	22	315	199	139	135	210	
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%	

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	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		
Q46.2	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	AMER	IAN	LLND	NATV	OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
YES	125 35%	1635 30%	1 3%	7 16%	14 27%	35 51%*	48 44%*	20 48%	106 36%				3 50%~	2 29%~	12 40%~	5 23%~	115 37%~	52 26%*	70 50%*	54 40%	71 34%
NO	236 65%	3818 70%	28 97%~	36 84%~	37 73%	34 49%*	62 56%*	22 52%~	187 64%	1 100%	1 100%		3 50%~	5 71%~	18 60%~	17 77%~	200 63%~	147 74%*	69 50%*	81 60%	139 66%
VALID CASES	361	5453	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%		6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%		6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q46.3 YES	74 20%	862 16%*	4 ~	10 9%~	25 20%	26 36%*	9 24%	21%~	62 21%	~	~	1 ~	1 17%~	8 14%~	27%~	3 14%~	69 22%~	29 15%*	43 31%*	25 19%	49 23%
NO	287 80%	4591 84%*	29 100%~	39 91%~	41 80%	44 64%*	84 76%	33 79%~	231 79%	1 100%~	1 100%~	5 ~	6 83%~	22 86%~	22 73%~	19 86%~	246 78%~	170 85%*	96 69%*	110 81%	161 77%
VALID CASES	361	5453	29	43	51	69	110	42	293	1	1	6	7	30	22	315	199	139	135	210	
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%	

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	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q47.1	WORA 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	28 8%	281 5%	~	~	3 6%	9 13%	10 9%	6 14%	23 8%	~	~	~	~	4 13%	2 9%	25 8%	8 4%*	19 14%*	12 9%	16 8%	
NO	333 92%	5172 95%	29 100%	43 100%	48 94%	60 87%	100 91%	36 86%	270 92%	1 100%	1 100%	6 100%	7 100%	26 87%	20 91%	290 92%	191 96%*	120 86%*	123 91%	194 92%	
VALID CASES	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%	
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%	

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q47.2	WORA TOT ADLT																				
YES	37 10%	284 5%*	~	~	10%	12%	12%	26%~	30 10%	~	~	~	17%~	~	13%~	2 9%~	35 11%~	6 3%*	30 22%*	16 12%	21 10%
NO	324 90%	5169 95%*	100%~	100%~	90%	88%	88%	74%~	263 90%	1 100%	1 100%	~	5 ~	7 100%	26 87%~	20 91%~	280 89%~	193 97%*	109 78%*	119 88%	189 90%
VALID CASES	361	5453	29	43	51	69	110	42	293	1	1	6	7	30	22	315	199	139	135	210	
NUMBER OF RESPONDENTS	361 100%	5453 100%	100%	100%	100%	100%	100%	100%	293 100%	1 100%	1 100%	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%	

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	BLK OR AFR-	AS- IAN	NATV ILND	AMER PAC	IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE
Q47.3	WORA TOT ADLT	18	25	35	45	55	65														
	OHP TOT ADLT	24	34	44	54	64	OVER														
YES	21	221			3	3	10	5	17						3	1	20	10	11	11	10
	6%	4%	~	~	6%	4%	9%	12%	6%	~	~	~	~	~	10%	5%	6%	5%	8%	8%	5%
NO	340	5232	29	43	48	66	100	37	276	1	1		6	7	27	21	295	189	128	124	200
	94%	96%	100%	100%	~	94%	96%	91%	88%	~	94%	100%	100%	~	~	100%	100%	90%	~	95%	94%
			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
VALID CASES	361	5453	29	43	51	69	110	42	293	1	1		6	7	30	22	315	199	139	135	210
NUMBER OF RESPONDENTS	361	5453	29	43	51	69	110	42	293	1	1		6	7	30	22	315	199	139	135	210
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE					ETHNICITY		HEALTH STATUS		GENDER			
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q47.4																					
YES	78 22%	1002 18%	1 3%	4 9%	10 20%	21 30%	28 25%	14 33%	66 23%	~	~	~	2 33%	2 29%	7 23%	4 18%	72 23%	24 12%*	51 37%*	25 19%	53 25%*
NO	283 78%	4451 82%	28 97%	39 91%	41 80%	48 70%	82 75%	28 67%	227 77%	1 100%	1 100%	~	4 67%	5 71%	23 77%	18 82%	243 77%	175 88%*	88 63%*	110 81%	157 75%*
VALID CASES	361	5453	29	43	51	69	110	42	293	1	1		6	7	30	22	315	199	139	135	210
NUMBER OF RESPONDENTS	361	5453	29	43	51	69	110	42	293	1	1		6	7	30	22	315	199	139	135	210
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%



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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q48																					
YES	134 39%	1692 34%*	10 36%~	12 28%~	16 31%	37 54%*	44 40%	15 36%~	114 39%	~	~	~	1 17%~	3 43%~	13 43%~	5 23%~	125 40%~	57 29%*	74 53%*	48 36%	86 41%
NO	210 61%	3335 66%*	18 64%~	31 72%~	35 69%	32 46%*	66 60%	27 64%~	178 61%	1 100%	1 100%~	~	5 83%~	4 57%~	17 57%~	17 77%~	189 60%~	141 71%*	65 47%*	86 64%	124 59%
NOT ANSWERED	17	426	1						1							1	1			1	
VALID CASES	344	5027	28	43	51	69	110	42	292	1	1		6	7	30	22	314	198	139	134	210
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%		6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%

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

	WORA 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	102 80%	1394 85%	6 24	8 34	14 44	30 54	34 64	10 77%	86 80%	~	~	~	~	2 67%	11 85%	4 80%	96 81%	40 74%	60 86%	36 77%	66 83%
NO	25 20%	240 15%	4 40%	4 33%	2 13%	5 14%	7 17%	3 23%	22 20%	~	~	~	~	1 33%	2 15%	1 20%	23 19%	14 26%	10 14%	11 23%	14 17%
NOT ANSWERED	7	62				2	3	2	6					1			6	3	4	1	6
VALID CASES	127	1633	10	12	16	35	41	13	108					3	13	5	119	54	70	47	80
NUMBER OF RESPONDENTS	134	1695	10	12	16	37	44	15	114					1	3	5	125	57	74	48	86
	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		
		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		
Q50																					
YES	WORA TOT ADLT	3255	6	18	37	54	81	37	200			4	4	22	12	216	108	120	85	148	
		68%	21%~	42%~	73%	78%*	74%	88%~	68%	~	~	~	67%~	57%~	73%~	55%~	69%~	55%*	86%*	63%	70%
NO		1781	22	25	14	15	29	5	92	1	1	2	3	8	10	98	90	19	49	62	
		32%	79%~	58%~	27%	22%*	26%	12%~	32%	100%~	100%~	~	33%~	43%~	27%~	45%~	31%~	45%*	14%*	37%	30%
NOT ANSWERED		417	1						1						1	1			1		
VALID CASES		5036	28	43	51	69	110	42	292	1	1	6	7	30	22	314	198	139	134	210	
NUMBER OF RESPONDENTS		5453	29	43	51	69	110	42	293	1	1	6	7	30	22	315	199	139	135	210	
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	WORA 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 LLND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q51 YES	210 93%	2975 94%	6 100%	15 83%	30 91%	52 96%	78 96%	29 85%	180 93%	~	~	~	4 100%	4 100%	19 90%	12 100%	195 93%	94 90%	111 95%	77 94%	133 92%
NO	16 7%	176 6%	~	3 17%	3 9%	2 4%	3 4%	5 15%	14 7%	~	~	~	~	~	2 10%	~	14 7%	10 10%	6 5%	5 6%	11 8%
NOT ANSWERED	7	127			4		3	6							1		7	4	3	3	4
VALID CASES	226	3151	6	18	33	54	81	34	194				4	4	21	12	209	104	117	82	144
NUMBER OF RESPONDENTS	233 100%	3278 100%	6 100%	18 100%	37 100%	54 100%	81 100%	37 100%	200 100%				4 100%	4 100%	22 100%	12 100%	216 100%	108 100%	120 100%	85 100%	148 100%

[ASKED IF Q50 = YES]

NQ52 WHAT IS YOUR AGE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER			
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
NQ52																				
18 TO 24	30 8%	547 10%	29 100%	~	~	~	~	~	24 8%	~	~	~	~	4 13%	8 36%	20 6%	24 12%*	5 4%*	13 10%	16 8%
25 TO 34	44 12%	870 16%*	~	43 ~100%	~	~	~	~	34 12%	~	~	1 ~17%	7 ~23%	1 5%	41 13%	28 14%	14 10%	17 13%	26 12%	
35 TO 44	54 15%	802 15%	~	~	51 ~100%	~	~	~	42 14%	1 ~100%	~	2 ~33%	2 29%	3 10%	1 5%	50 16%	34 17%	15 11%	18 13%	33 16%
45 TO 54	72 20%	1153 21%	~	~	~	69 ~100%	~	~	57 19%	~	~	1 ~17%	2 29%	8 27%	5 23%	62 20%	36 18%	33 24%	28 21%	41 20%
55 TO 64	116 32%	1412 26%*	~	~	~	~	110 ~100%	~	99 34%	1 100%	~	1 ~17%	3 43%	5 17%	5 23%	104 33%	59 30%	49 35%	48 36%	63 30%
65 TO 74	30 8%	405 7%	~	~	~	~	27 ~64%	~	23 8%	~	~	1 ~17%	2 ~7%	2 9%	23 7%	15 8%	12 9%	7 5%	20 10%	
75 OR OLDER	15 4%	264 5%	~	~	~	~	15 ~36%	~	14 5%	~	~	~	1 ~3%	~	15 5%	3 2%*	11 8%*	4 3%	11 5%	
VALID CASES	361	5453	29	43	51	69	110	42	293	1	1	6	7	30	22	315	199	139	135	210
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%

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

NQ53 ARE YOU MALE OR FEMALE?

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		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	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
NQ53																					
MALE	145 40%	2159 40%	13 45%~	17 40%~	18 35%	28 41%	48 44%	11 26%~	109 37%*	~	~	~	4 67%~	4 57%~	14 47%~	10 45%~	120 38%~	83 42%	49 35%	135 100%~	~
FEMALE	216 60%	3294 60%	16 55%~	26 60%~	33 65%	41 59%	62 56%	31 74%~	184 63%*	1 100%~	1 100%~	~	2 33%~	3 43%~	16 53%~	12 55%~	195 62%~	116 58%	90 65%	210 ~100%~	
VALID CASES	361	5453	29	43	51	69	110	42	293	1	1		6	7	30	22	315	199	139	135	210
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%		6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%

[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			
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE
Q54																					
8TH GRADE OR LESS	8 2%	312 6%*	~	1 2%~	~	4 6%	1 0.9%	2 5%~	6 2%	~	~	~	~	2 29%~	~	1 5%~	4 1%~	~	7 5%*	4 3%	4 2%
SOME HIGH SCHOOL BUT DID NOT GRADUATE	59 17%	755 15%	8 28%~	9 21%~	8 16%	12 17%	14 13%	8 19%~	47 16%	1 ~100%~	~	3 ~ 50%~	~	7 ~ 23%~	2 10%~	56 18%~	27 14%*	30 22%	25 19%	34 16%	
HIGH SCHOOL GRADUATE OR GED	129 38%	1615 32%*	13 45%~	20 47%~	26 51%*	18 26%*	39 36%	12 29%~	112 39%	~	~	1 ~ 17%~	3 43%~	10 33%~	10 48%~	117 37%~	83 42%	43 32%	53 40%	76 37%	
SOME COLLEGE OR 2-YEAR DEGREE	123 36%	1732 34%	8 28%~	9 21%~	16 31%	28 41%	46 43%	16 38%~	104 36%	1 100%~	~	1 ~ 17%~	2 29%~	12 40%~	6 29%~	116 37%~	76 38%	47 35%	46 34%	77 37%	
4-YEAR COLLEGE GRADUATE	14 4%	415 8%*	~	4 9%~	1 2%	3 4%	3 3%	3 7%~	12 4%	~	~	1 ~ 17%~	~	1 ~ 3%~	1 5%~	13 4%~	8 4%	5 4%	3 2%	11 5%	
MORE THAN 4-YEAR COLLEGE DEGREE	9 3%	214 4%	~	~	~	4 6%	4 4%	1 2%~	9 3%*	~	~	~	~	~	~	1 5%~	8 3%~	5 3%	4 3%	3 2%	6 3%
NOT ANSWERED	19	410					3		3						1	1		3	1	2	
VALID CASES	342	5043	29	43	51	69	107	42	290	1	1	6	7	30	21	314	199	136	134	208	
NUMBER OF RESPONDENTS	361	5453	29	43	51	69	110	42	293	1	1	6	7	30	22	315	199	139	135	210	
	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?

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q55																					
YES HISPANIC OR LATINO	22 7%	610 12%*	8 29%~	1 2%~	1 2%*	5 7%	5 5%	2 5%~	13 4%~	~	~	~	~	3 50%~	4 14%~	22 100%~	~	12 6%	10 7%	10 8%	12 6%
NO NOT HISPANIC OR LATINO	315 93%	4367 88%*	20 71%~	41 98%~	50 98%*	62 93%	103 95%	38 95%~	277 96%~	1 100%~	1 100%~	~	6 ~100%~	3 50%~	25 86%~	315 ~100%~	~	184 94%	125 93%	120 92%	195 94%
NOT ANSWERED	24	476	1	1		2	2	2	3					1	1			3	4	5	3
VALID CASES	337	4977	28	42	51	67	108	40	290	1	1		6	6	29	22	315	196	135	130	207
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%		6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%



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	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q56.1	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
YES	322 89%	4262 78%*	28 97%~	41 95%~	44 86%	65 94%	103 94%*	40 95%~	293 100%~	~	~	~	~	~	29 97%~	17 77%~	301 96%~	187 94%*	128 92%	123 91%	199 95%*
NO	39 11%	1191 22%*	1 3%~	2 5%~	7 14%	4 6%	7 6%*	2 5%~	1 ~100%~	1 ~100%~	~	6 ~100%~	7 ~100%~	1 3%~	5 23%~	14 4%~	12 6%*	11 8%	12 9%	11 5%*	
VALID CASES	361	5453	29	43	51	69	110	42	293	1	1	6	7	30	22	315	199	139	135	210	
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%	

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	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	AMER	IAN	ILND	NATV	OTHR	TI	HIS-IC	NOT HIS-IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE-MALE
YES	2	133	1	2	1	1	1	1	1	1	1	1	1	1	1	2	2	1	1	2	2
	0.6%	2%	~	2%	~	~	~0.9%	~	~100%	~	~	~	~	~	3%	~0.6%	1%	~	~	1%	~
NO	359	5320	29	42	51	69	109	42	293	1	6	7	29	22	313	197	139	135	208	135	208
	99%	98%	100%	98%	100%	100%	99%	100%	100%	~100%	~100%	~100%	~100%	97%	100%	99%	99%	100%	100%	100%	99%
VALID CASES	361	5453	29	43	51	69	110	42	293	1	1	6	7	30	22	315	199	139	135	210	210
NUMBER OF RESPONDENTS	361	5453	29	43	51	69	110	42	293	1	1	6	7	30	22	315	199	139	135	210	210
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q56.3 WHAT IS YOUR RACE? RESPONSE: ASIAN

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	HIS- IC	NOT VERY GOOD & POOR	EX & FAIR & POOR	FE- MALE	MALE		
Q56.3	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	AMER	IAN	ILND	NATV	OTHR	TI	HIS- IC	HIS- IC	NOT VERY GOOD & POOR	EX & FAIR & POOR	FE- MALE	MALE
YES	3 0.8%	225 4%*	~	~	4%	~	~	2%~	~	~	100%~	~	~	~	7%~	~	0.6%~	2 1%	1 0.7%	1 0.7%	2 1%
NO	358 99%	5228 96%*	29 100%	43 100%	49 96%	69 100%	110 100%	41 98%	293 100%	1 100%	~	~	6 100%	7 100%	28 93%	22 100%	313 99%	197 99%	138 99%	134 99%	208 99%
VALID CASES	361	5453	29	43	51	69	110	42	293	1	1	~	6	7	30	22	315	199	139	135	210
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%	~	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE			
Q56.4	WORA TOT ADLT	18	25	35	45	55	65															
	OHP TOT ADLT	41																				
YES		0.3%	0.7%	~	~	~	~	2%	~	~	~	~	~	3%	~	~	~	0.5%	~			
NO		360	5412	29	43	51	69	110	41	293	1	1	6	7	29	22	315	198	139	134	210	
		100%	99%	100%	100%	100%	100%	98%	100%	100%	100%	100%	~	100%	100%	97%	100%	100%	99%	100%	99%	100%
VALID CASES		361	5453	29	43	51	69	110	42	293	1	1	6	7	30	22	315	199	139	135	210	
NUMBER OF RESPONDENTS		361	5453	29	43	51	69	110	42	293	1	1	6	7	30	22	315	199	139	135	210	
		100%	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	
		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	
Q56.5	WORA 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	27 7%	314 6%	2 7%	6 14%	3 6%	9 13%	4 4%*	3 7%	~	~	~	6 ~100%	21 ~ 70%	2 9%	24 8%	17 9%	10 7%	16 12%*	11 5%	
NO	334 93%	5139 94%	27 93%	37 86%	48 94%	60 87%	106 96%*	39 93%	293 100%	1 100%	1 100%	7 ~	9 ~100%	20 91%	291 92%	182 91%	129 93%	119 88%*	199 95%	
VALID CASES	361	5453	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%

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	MALE	FE- MALE	
Q56.6	WORA TOT ADLT																			
YES	15 4%	300 5%	2 7%	1 2%	4 8%	2 3%	5 5%	1 2%				7 27%	8 23%	5 23%	9 3%	4 2%*	11 8%*	6 4%	9 4%	
NO	346 96%	5153 95%	27 93%	42 98%	47 92%	67 97%	105 95%	41 98%	293 100%	1 100%	1 100%	6 100%	22 73%	17 77%	306 97%	195 98%*	128 92%*	129 96%	201 96%	
VALID CASES	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%
NUMBER OF RESPONDENTS	361 100%	5453 100%	29 100%	43 100%	51 100%	69 100%	110 100%	42 100%	293 100%	1 100%	1 100%	6 100%	7 100%	30 100%	22 100%	315 100%	199 100%	139 100%	135 100%	210 100%

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	WHITE	BLACK OR AFR-	ASIAN	NATV HAW/ ILND	AMER IND/ ALSK	MULTI- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q57																					
YES	29 10%	652 16%*	5 20%~	4 14%~	2 4%~	5 9%	9 10%	4 10%~	23 9%~	1 ~100%~			4 ~25%~	5 26%~	22 8%~	16 9%	12 11%	16 15%	13 7%		
NO	258 90%	3488 84%*	20 80%~	25 86%~	44 96%~	48 91%	85 90%	35 90%~	229 91%~	1 100%~			5 ~100%~	6 100%~	12 75%~	14 74%~	242 92%~	153 91%	101 89%	92 85%	166 93%
NOT ANSWERED	3	78				1		1							1	1				1	
VALID CASES	287	4141	25	29	46	53	94	39	252	1	1		5	6	16	19	264	169	113	108	179
NUMBER OF RESPONDENTS	290 100%	4219 100%	25 100%	29 100%	46 100%	54 100%	94 100%	39 100%	253 100%	1 100%	1 100%		5 100%	6 100%	16 100%	19 100%	265 100%	170 100%	113 100%	109 100%	179 100%

[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	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q58.1	WORA TOT ADLT																			
YES	18 62%	253 47%	3 60%	2 50%	1 50%	3 60%	6 67%	3 75%	13 57%	1 ~100%	~	~	4 ~100%	4 80%	13 59%	10 63%	8 67%	9 56%	9 69%	
NO	11 38%	289 53%	2 40%	2 50%	1 50%	2 40%	3 33%	1 25%	10 43%	~	~	~	~	1 20%	9 41%	6 38%	4 33%	7 44%	4 31%	
VALID CASES	29	542	5	4	2	5	9	4	23	1			4	5	22	16	12	16	13	
NUMBER OF RESPONDENTS	29 100%	542 100%	5 100%	4 100%	2 100%	5 100%	9 100%	4 100%	23 100%	1 100%			4 100%	5 100%	22 100%	16 100%	12 100%	16 100%	13 100%	

[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	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	
Q58.2	WORA TOT ADLT																			
YES	15 52%	188 35%	2 40%	1 25%	2 100%	2 40%	6 67%	2 50%	10 43%	1 100%	~	~	3 75%	2 40%	11 50%	7 44%	7 58%	8 50%	7 54%	
NO	14 48%	354 65%	3 60%	3 75%	~	3 60%	3 33%	2 50%	13 57%	~	~	~	1 25%	3 60%	11 50%	9 56%	5 42%	8 50%	6 46%	
VALID CASES	29	542	5	4	2	5	9	4	23	1			4	5	22	16	12	16	13	
NUMBER OF RESPONDENTS	29 100%	542 100%	5 100%	4 100%	2 100%	5 100%	9 100%	4 100%	23 100%	1 100%			4 100%	5 100%	22 100%	16 100%	12 100%	16 100%	13 100%	

[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	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE				
Q58.3	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	AMER	IAN	LLND	NATV	OTHR	TI	HIS- IC	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
YES	9 31%	197 36%	2 40%	2 50%	2 ~ 40%	2 22%	1 25%	7 30%	~	~	~	~	~	1 25%	1 20%	7 32%	6 38%	3 25%	7 44%	2 15%		
NO	20 69%	345 64%	3 60%	2 50%	2 100%	3 60%	7 78%	3 75%	16 70%	1 ~100%	~	~	~	3 75%	4 80%	15 68%	10 63%	9 75%	9 56%	11 85%		
VALID CASES	29	542	5	4	2	5	9	4	23	1				4	5	22	16	12	16	12	16	13
NUMBER OF RESPONDENTS	29 100%	542 100%	5 100%	4 100%	2 100%	5 100%	9 100%	4 100%	23 100%	1 100%				4 100%	5 100%	22 100%	16 100%	12 100%	16 100%	12 100%	16 100%	13 100%

[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	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q58.4	YES	1	81				1	1						1		1			1
		3%	15%	~	~	~	25%	4%	~	~	~	~	~	20%	~	6%	~	~	8%
	NO	28	461	5	4	2	5	9	3	22	1		4	4	22	15	12	16	12
		97%	85%	100%	100%	100%	100%	75%	96%	~	100%	~	100%	80%	100%	94%	100%	100%	92%
	VALID CASES	29	542	5	4	2	5	9	4	23	1		4	5	22	16	12	16	13
	NUMBER OF RESPONDENTS	29	542	5	4	2	5	9	4	23	1		4	5	22	16	12	16	13
		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	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	HIS- IC	NOT VERY GOOD & POOR	EX & FAIR & POOR	FE- MALE	MALE		
Q58.5	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	AMER	IAN	LLND	NATV	OTHR	TI	HIS- IC	HIS- IC	NOT VERY GOOD & POOR	EX & FAIR & POOR	FE- MALE	MALE
YES	2	44	1			1			2							2	1	1	1	1	
	7%	8%	20%	~	~	20%	~	~	9%	~	~	~	~	~	~	9%	6%	8%	6%	8%	
NO	27	498	4	4	2	4	9	4	21	1				4	5	20	15	11	15	12	
	93%	92%	80%	100%	100%	80%	100%	100%	91%	~100%	~	~	~	~100%	~100%	91%	94%	92%	94%	92%	
VALID CASES	29	542	5	4	2	5	9	4	23	1				4	5	22	16	12	16	13	
NUMBER OF RESPONDENTS	29	542	5	4	2	5	9	4	23	1				4	5	22	16	12	16	13	
	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			
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
NQ13 0-6	77 31%	759 20%*	9 41%~	6 30%~	17 39%~	16 30%	23 29%	4 13%~	61 29%~	~	~	~	25%~	1 25%~	1 35%~	9 31%~	5 30%~	69 30%~	30 23%*	42 39%*	25 28%	50 31%
7-8	85 34%	1267 34%	5 23%~	9 45%~	12 27%~	19 36%	27 35%	11 35%~	72 35%~	~	1 100%~	~	~	1 25%~	9 35%~	6 38%~	74 33%~	47 35%	34 31%	30 34%	53 33%	
9-10	90 36%	1714 46%*	8 36%~	5 25%~	15 34%~	18 34%	28 36%	16 52%~	75 36%~	1 100%~	~	~	3 75%~	2 50%~	8 31%~	5 31%~	84 37%~	56 42%*	33 30%	34 38%	56 35%	
VALID CASES	252	3741	22	20	44	53	78	31	208	1	1	4	4	26	16	227	133	109	89	159		
NUMBER OF RESPONDENTS	252 100%	3741 100%	22 100%	20 100%	44 100%	53 100%	78 100%	31 100%	208 100%	1 100%	1 100%	4 100%	4 100%	26 100%	16 100%	227 100%	133 100%	109 100%	89 100%	159 100%		
MEAN	2.05	2.26	1.95	1.95	1.95	2.04	2.06	2.39	2.07	3.00	2.00	2.50	2.25	1.96	2.00	2.07	2.20	1.92	2.10	2.04		
p stat_(*=Sig @ p<=.05)		.000*	~	~	~	.889	.871	~	~	~	~	~	~	~	~	~	~	.003*	.024*	.477	.726	

[ASKED IF Q7 >= 1 TIME]

NQ23 RATING OF PERSONAL DOCTOR

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	WORA 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 PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
NQ23 0-6	56 21%	617 16%*	7 32%~	8 31%~	9 21%~	10 18%	17 20%	4 13%~	45 20%~	~	~	~	~	2 50%~	5 20%~	4 24%~	49 20%~	26 18%	27 23%	16 16%	39 24%
7-8	73 27%	999 25%	8 36%~	8 31%~	6 14%~	20 36%	26 30%	5 16%~	60 27%~	1 ~100%~	~	~	~	11 44%~	4 24%~	67 28%~	36 25%	37 32%	29 29%	44 27%	
9-10	137 52%	2342 59%*	7 32%~	10 38%~	27 64%~	26 46%	43 50%	23 72%~	119 53%~	1 100%~	~	~	4 ~100%~	2 50%~	9 36%~	9 53%~	125 52%~	80 56%	52 45%	55 55%	81 49%
VALID CASES	266	3959	22	26	42	56	86	32	224	1	1	4	4	25	17	241	142	116	100	164	
NUMBER OF RESPONDENTS	266 100%	3959 100%	22 100%	26 100%	42 100%	56 100%	86 100%	32 100%	224 100%	1 100%	1 100%	4 100%	4 100%	25 100%	17 100%	241 100%	142 100%	116 100%	100 100%	164 100%	
MEAN	2.30	2.44	2.00	2.08	2.43	2.29	2.30	2.59	2.33	3.00	2.00	3.00	2.00	2.16	2.29	2.32	2.38	2.22	2.39	2.26	
p stat_(*=Sig @ p<=.05)		.005*	~	~	~.837	.975	~	~	~	~	~	~	~	~	~	~	.100	.111	.167	.205	

[ASKED IF Q15 = YES]

NQ27 RATING OF SPECIALIST SEEN MOST OFTEN

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
NQ27 0-6	19 16%	257 14%	3 33%	2 20%	3 18%	2 12%	6 12%	3 19%	15 15%	~	~	~	~	~	3 27%	19 17%	11 19%	8 13%	4 10%	15 19%	
7-8	31 26%	429 23%	3 33%	2 20%	4 24%	2 12%	16 32%	4 25%	29 29%	~	~	~	~	~	1 9%	3 43%	28 25%	10 18%*	21 34%*	9 21%	22 29%
9-10	70 58%	1164 63%	3 33%	6 60%	10 59%	13 76%	28 56%	9 56%	56 56%	~	~	~	1 100%	4 100%	7 64%	4 57%	63 57%	36 63%	32 52%	29 69%	40 52%
VALID CASES	120	1850	9	10	17	17	50	16	100			1	4	11	7	110	57	61	42	77	
NUMBER OF RESPONDENTS	120 100%	1850 100%	9 100%	10 100%	17 100%	17 100%	50 100%	16 100%	100 100%			1 100%	4 100%	11 100%	7 100%	110 100%	57 100%	61 100%	42 100%	77 100%	
MEAN	2.42	2.49	2.00	2.40	2.41	2.65	2.44	2.38	2.41			3.00	3.00	2.36	2.57	2.40	2.44	2.39	2.60	2.32	
p stat_(*=Sig @ p<=.05)		.335	~	~	~	~	.856	~	~	~	~	~	~	~	~	~	~	.853	.646	~	~

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

NQ35 RATING OF HEALTH PLAN

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
NQ35 0-6	102 33%	1116 23%*	11 44%~	13 33%~	17 35%~	27 44%	28 29%	4 12%~	83 32%	1 ~100%~	~	~	1 ~14%~	12 43%~	6 30%~	91 32%~	55 31%	43 36%	35 30%	65 34%	
7-8	92 30%	1551 32%	5 20%~	14 35%~	11 23%~	19 31%	35 36%	8 24%~	81 31%	~	~	~	1 ~17%~	1 14%~	7 25%~	3 15%~	89 32%~	55 31%	35 29%	36 31%	56 29%
9-10	116 37%	2193 45%*	9 36%~	13 33%~	20 42%~	16 26%*	35 36%	22 65%~	95 37%	~	~	~	5 ~83%~	5 71%~	9 32%~	11 55%~	102 36%~	69 39%	43 36%	46 39%	69 36%
VALID CASES	310	4860	25	40	48	62	98	34	259	1			6	7	28	20	282	179	121	117	190
NUMBER OF RESPONDENTS	310 100%	4860 100%	25 100%	40 100%	48 100%	62 100%	98 100%	34 100%	259 100%	1 100%			6 100%	7 100%	28 100%	20 100%	282 100%	179 100%	121 100%	117 100%	190 100%
MEAN	2.05	2.22	1.92	2.00	2.06	1.82	2.07	2.53	2.05	1.00			2.83	2.57	1.89	2.25	2.04	2.08	2.00	2.09	2.02
p stat_(*=Sig @ p<=.05)		.000*	~	~	~.019*	.702	~	.959	~	~	~	~	~	~	~	~	~.423	.452	.425	.527	



GETTING NEEDED CARE

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE			
NPRBSEE4	NQ25	2.24	2.25	2.09	2.00	2.24	2.13	2.29	2.63	2.29			3.00	2.00	2.00	1.89	2.27	2.31	2.19	2.39	2.19	
p stat_(*=Sig @ p<=.05)		.889	~	~	~	~	.598	~	~	~	~	~	~	~	~	~	.435	.496	~	~		
NCARNES4	NQ14	2.21	2.30	2.09	2.30	1.95	2.12	2.33	2.40	2.21	3.00	2.00		2.25	1.75	2.23	2.25	2.20	2.33	2.06	2.30	2.15
p stat_(*=Sig @ p<=.05)		.056	~	~	~	.324	.101	~	~	~	~	~	~	~	~	~	~	.008*	.009*	.198	.142	
COMPOSITE		2.23	2.28	2.09	2.15	2.09	2.12	2.31	2.51	2.25	3.00	2.00	x	2.63	1.88	2.12	2.07	2.24	2.32	2.12	2.34	2.17
p stat_(*=Sig @ p<=.05)		.701	~	~	~	.724	.687	~	~	~	~	~	~	~	~	~	~	~	.499	.545	.577	.607

GETTING CARE QUICKLY

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER			
	WORA 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	2.33	2.38	2.27	2.18	2.42	2.25	2.29	2.62	2.36			2.50	2.21	2.33	2.36	2.24	2.45	2.30	2.35	
p stat_(*=Sig @ p<=.05)	.450		~	~	~	~	~	~	~	~	~	~	~	~	~	.210	.090	~	.747	
NAPGET4 NQ6	2.28	2.32	2.00	2.06	2.30	2.41	2.33	2.32	2.32	3.00	1.00	2.50	2.00	2.14	2.33	2.28	2.38	2.21	2.37	2.25
p stat_(*=Sig @ p<=.05)	.470		~	~	~	~	.518	~	~	~	~	~	~	~	~	.083	.211	.270	.407	
COMPOSITE	2.31	2.35	2.14	2.12	2.36	2.33	2.31	2.47	2.34	3.00	1.00	x 2.50	2.00	2.18	2.33	2.32	2.31	2.33	2.33	2.30
p stat_(*=Sig @ p<=.05)	.759		~	~	~	.934	.979	~	~	~	~	~	~	~	~	~	.973	.897	.899	.943

HOW WELL DOCTORS COMMUNICATE

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	WORA 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
NDREXPL4 NQ17	2.53	2.62	2.19	2.59	2.51	2.49	2.57	2.66	2.57	3.00	1.00	2.67	2.00	2.35	2.31	2.55	2.59	2.45	2.55	2.51
p stat_(*=Sig @ p<=.05)		.020*	~	~	~	~	.536	~	~	~	~	~	~	~	~	~	.172	.132	.713	.723
NDRLSTN4 NQ18	2.42	2.59	2.31	2.24	2.41	2.24	2.47	2.71	2.43	3.00	2.00	2.67	2.33	2.35	2.38	2.43	2.55	2.27	2.54	2.34
p stat_(*=Sig @ p<=.05)		.001*	~	~	~	~	.452	~	~	~	~	~	~	~	~	~	.010*	.009*	.076	.049*
NDRESPU4 NQ19	2.52	2.65	2.56	2.29	2.44	2.47	2.55	2.76	2.54	3.00	2.00	2.67	2.67	2.35	2.54	2.53	2.62	2.43	2.58	2.48
p stat_(*=Sig @ p<=.05)		.013*	~	~	~	~	.747	~	~	~	~	~	~	~	~	~	.041*	.071	.332	.252
NDRTMEN4 NQ20	2.48	2.49	2.50	2.24	2.44	2.44	2.46	2.72	2.49	3.00	2.00	3.00	2.00	2.40	2.46	2.49	2.57	2.37	2.57	2.41
p stat_(*=Sig @ p<=.05)		.796	~	~	~	~	.822	~	~	~	~	~	~	~	~	~	.048*	.046*	.111	.074
COMPOSITE	2.49	2.59	2.39	2.34	2.45	2.41	2.51	2.71	2.51	3.00	1.75	x 2.75	2.25	2.36	2.42	2.50	2.58	2.38	2.56	2.44
p stat_(*=Sig @ p<=.05)		.615	~	~	~	~	.937	~	~	~	~	~	~	~	~	~	.666	.664	.804	.779

CUSTOMER SERVICE

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
	WORA 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	FE- MALE		
NPBCLCS4 NQ31	2.17	2.23	1.20	2.08	2.67	2.13	2.07	3.00	2.21	3.00		2.00	2.50	1.83	2.33	2.19	2.36	1.90	2.21	2.15	
p stat_(*=Sig @ p<=.05)		.554	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCSRESP NQ32	2.61	2.63	1.60	2.77	2.75	2.63	2.59	3.00	2.61	3.00		3.00	2.50	2.67	3.00	2.62	2.71	2.47	2.74	2.55	
p stat_(*=Sig @ p<=.05)		.840	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.39	2.43	1.40	2.42	2.71	2.38	2.33	3.00	2.41	3.00	x	x	2.50	2.50	2.25	2.67	2.40	2.54	2.18	2.48	2.35
p stat_(*=Sig @ p<=.05)		.910	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

SHARED DECISION MAKING

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHER	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE	
NNRXWHY NQ10	2.78	2.84	2.60	2.64	2.86	2.89	2.83	2.41	2.81			3.00	2.33	2.50	2.67	2.79	2.81	2.77	2.82	2.74	
p stat_(*=Sig @ p<=.05)		.236	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.517	.976	.453	.357	
NNRXWYNT NQ11	2.42	2.45	1.80	2.27	2.59	2.56	2.36	2.44	2.43			3.00	1.00	2.50	2.00	2.43	2.41	2.42	2.47	2.38	
p stat_(*=Sig @ p<=.05)		.625	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.976	.989	.544	.584	
NRXBST NQ12	2.40	2.50	2.11	2.64	2.43	2.49	2.28	2.56	2.35			3.00	3.00	2.63	2.33	2.40	2.40	2.46	2.51	2.34	
p stat_(*=Sig @ p<=.05)		.183	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.932	.449	.280	.296	
COMPOSITE	2.53	2.60	2.17	2.52	2.63	2.64	2.49	2.47	2.53	x	x	x	3.00	2.11	2.54	2.33	2.54	2.54	2.55	2.60	2.49
p stat_(*=Sig @ p<=.05)		.827	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.979	.952	.862	.858	

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

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE	
PRBSEE4 Q25	73%	78%	73%	58%	76%	70%	75%	88%	76%				100%	50%	62%	56%	75%	77%	70%	82%	70%
CARNES4 Q14	77%	82%	68%	80%	57%	79%	84%	87%	78%	100%	100%		75%	50%	69%	69%	77%	84%	68%	78%	75%
AVERAGE	75.09	80.02	70.45	69.17	66.64	74.21	79.03	87.08	77.20	x	x	x	75.00	50.00	65.38	62.15	76.11	80.76	69.02	80.11	72.62

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

	WORA 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- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE			
CARSN4 Q4	81%	83%	73%	73%	83%	75%	81%	100%	84%				100%		64%	83%	83%	77%	87%	81%	81%
APGET4 Q6	78%	80%	67%	61%	77%	85%	82%	77%	80%	100%	0%		100%	50%	68%	75%	78%	83%	74%	80%	77%
AVERAGE	79.77	81.23	69.70	66.92	80.00	79.89	81.60	88.64	82.07	x	x	x	x	50.00	66.23	79.17	80.55	80.06	80.53	80.43	79.08

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

	WORA 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	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
DREXPL4 Q17	90%	92%	81%	100%	90%	88%	89%	93%	92%	100%	0%	100%	100%	80%	85%	90%	94%	85%	92%	89%	
DRLSTN4 Q18	81%	90%	75%	71%	79%	80%	83%	93%	83%	100%	100%	100%	67%	70%	77%	82%	87%	76%	87%	78%	
DRESPU4 Q19	86%	91%	88%	76%	85%	88%	85%	93%	88%	100%	100%	100%	100%	75%	85%	87%	93%	80%	90%	84%	
DRTMEN4 Q20	87%	88%	81%	82%	85%	87%	86%	97%	89%	100%	100%	100%	67%	75%	77%	88%	93%	81%	92%	84%	
AVERAGE	86.1	90.4	81.3	82.4	84.6	85.7	85.8	93.9	87.7	x	x	x	x	x	75.0	80.8	86.8	91.7	80.6	90.2	83.5



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

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE	
PBCLCS4 Q31	72%	76%	20%	77%	100%	75%	60%	100%	74%	100%			50%	100%	50%	67%	72%	78%	63%	75%	70%
CSRESP Q32	89%	92%	40%	100%	92%	94%	86%	100%	87%	100%			100%	100%	100%	100%	88%	90%	87%	96%	85%
AVERAGE	80.18	84.03	30.00	88.46	95.83	84.38	73.10	100.0	80.05	x	x	x	x	x	75.00	x	79.92	83.90	75.00	85.65	77.36

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	WORA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE			
NRXWHY Q10	89%	92%	80%	82%	93%	94%	91%				100%	67%	75%	83%	89%	91%	89%	91%	87%		
NRXWYNT Q11	71%	73%	40%	64%	79%	78%	72%				100%	0%	75%	50%	71%	71%	71%	74%	69%		
RXBST Q12	70%	75%	56%	82%	71%	74%	68%				100%	100%	81%	67%	70%	70%	73%	75%	67%		
AVERAGE	76.6	79.8	58.5	75.8	81.3	82.1	74.5	73.5	76.6	x	x	x	x	x	77.1	66.7	76.9	77.0	77.6	80.1	74.4

Q1 OUR RECORDS SHOW THAT YOUR CHILD IS NOW IN <WESTER OREGON ADVANCED HEALTH>. IS THAT RIGHT?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA 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	2	46	67	90	98	218	2	3	2	5	11	34	40	239	270	13	211	92
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
NOT ANSWERED	2	59				1	1	2							2	2		2		
VALID CASES	303	5304	2	46	67	90	98	218	2	3	2	5	11	34	40	239	270	13	211	92
NUMBER OF RESPONDENTS	305	5363	2	46	67	91	99	220	2	3	2	5	11	34	40	241	272	13	213	92
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA 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	
Q3 YES	114 39%	1687 32%*	2 100%	19 41%	28 42%	30 36%	35 36%	85 39%	1 50%	1 50%	1 50%	1 20%	4 36%	14 44%	10 25%	94 40%	97 36%	8 62%	72 35%	42 47%
NO	182 61%	3541 68%*	~	27 59%	39 58%	54 64%	62 64%	134 61%	1 50%	1 50%	1 50%	4 80%	7 64%	18 56%	30 75%	142 60%	170 64%	5 38%	134 65%	48 53%
NOT ANSWERED	9	135				7	2	1		1				2		5	5		7	2
VALID CASES	296	5228	2	46	67	84	97	219	2	2	2	5	11	32	40	236	267	13	206	90
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%

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?

	WORA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER HAW/ IND/ PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR GOOD POOR	NO CCC	CCC	
Q4 NEVER		18 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	5 5%	148 9%	~	~	2 8%	3 11%	3 4%	~	~	~	~	1 33%	1 7%	1 11%	4 5%	4 5%	1 13%	2 3%	3 9%
USUALLY	19 19%	323 20%	~	3 18%	6 23%	8 31%	2 7%	17 23%	~	~	~	~	2 14%	3 33%	16 20%	19 23%	~	14 22%	5 15%
ALWAYS	75 76%	1151 70%	2 100%	14 82%	18 69%	18 69%	23 82%	53 73%	1 100%	1 100%	~	2 67%	11 79%	5 56%	61 75%	60 72%	7 88%	49 75%	26 76%
#ALWAYS + USUALLY (NET)	94 95%	1475 90%	2 100%	17 100%	24 92%	26 100%	25 89%	70 96%	1 100%	1 100%	~	2 67%	13 93%	8 89%	77 95%	79 95%	7 88%	63 97%	31 91%
TOP BOX SCORE	75 76%	1151 70%	2 100%	14 82%	18 69%	18 69%	23 82%	53 73%	1 100%	1 100%	~	2 67%	11 79%	5 56%	61 75%	60 72%	7 88%	49 75%	26 76%
NOT ANSWERED	15	142	2	2	4	7	12				1	1	1	1	13	14		7	8
VALID CASES	99	1641	2	17	26	26	28	73	1	1		3	14	9	81	83	8	65	34
NUMBER OF RESPONDENTS	114	1783	2	19	28	30	35	85	1	1	1	4	14	10	94	97	8	72	42
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q3 = YES]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA 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	CCC
Q5 YES	206 69%	3345 65%	2 100%~	37 80%~	46 69%	61 72%	60 61%*	147 67%	1 50%~	2 67%~	2 100%~	2 40%~	9 82%~	26 79%~	30 75%~	160 67%	185 69%~	8 62%~	134 65%*	72 79%*
NO	92 31%	1824 35%	~	9 20%~	21 31%	24 28%	38 39%*	72 33%	1 50%~	1 33%~	~	3 60%~	2 18%~	7 21%~	10 25%~	78 33%	84 31%~	5 38%~	73 35%*	19 21%*
NOT ANSWERED	7	194				6	1	1						1		3	3		6	1
VALID CASES	298	5169	2	46	67	85	98	219	2	3	2	5	11	33	40	238	269	13	207	91
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%

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				
	WORA 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	2 1%	35 1%		1 ~ 3%		1 ~ 2%	2 ~ 2%							2 ~ 1%	2 1%		1 ~ 0.8%	1 2%			
SOMETIMES	25 14%	451 14%		4 ~ 11%	6 ~ 15%	7 ~ 13%	8 16%	17 13%	1 100%					1 ~ 14%	2 8%	3 13%	20 14%	23 14%	1 13%	15 13%	10 15%
USUALLY	48 26%	814 26%		1 50%	7 19%	12 29%	13 24%	15 30%	34 27%					2 ~ 29%	8 31%	8 33%	38 26%	41 25%	4 50%	28 24%	20 30%
ALWAYS	109 59%	1829 58%		1 50%	24 67%	23 56%	34 62%	27 54%	75 59%		2 ~ 100%	1 ~ 100%	2 ~ 100%	4 57%	16 62%	13 54%	84 58%	97 60%	3 38%	74 63%	35 53%
#ALWAYS + USUALLY (NET)	157 85%	2643 84%		2 100%	31 86%	35 85%	47 85%	42 84%	109 85%		2 ~ 100%	1 ~ 100%	2 ~ 100%	6 86%	24 92%	21 88%	122 85%	138 85%	7 88%	102 86%	55 83%
TOP BOX SCORE	109 59%	1829 58%		1 50%	24 67%	23 56%	34 62%	27 54%	75 59%		2 ~ 100%	1 ~ 100%	2 ~ 100%	4 57%	16 62%	13 54%	84 58%	97 60%	3 38%	74 63%	35 53%
NOT ANSWERED	22	215		1	5	6	10	19		1		2		6	16	22		16	6		
VALID CASES	184	3129	2	36	41	55	50	128	1	2	1	2	7	26	24	144	163	8	118	66	
NUMBER OF RESPONDENTS	206	3344	2	37	46	61	60	147	1	2	2	2	9	26	30	160	185	8	134	72	
	100%	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 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	
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC
Q7 NONE	79 27%	1553 31%	10 ~ 22%	16 25%	23 27%	30 31%	63 29%	2 100%	1 33%	2 ~ 40%	2 18%	3 9%	11 28%	66 28%	75 28%	3 25%	63 31%*	16 18%*
1 TIME	74 25%	1446 28%	8 ~ 18%	19 29%	19 22%	28 29%	53 25%	1 ~ 33%	1 ~ 20%	4 36%	13 39%	11 28%	60 25%	69 26%	2 17%	56 27%	18 20%	
2	65 22%	1007 20%	11 ~ 24%	12 18%	21 25%	21 21%	49 23%	~	2 ~100%	3 ~ 27%	8 24%	10 26%	51 22%	59 22%	3 25%	40 19%	25 28%	
3	38 13%	534 11%	2 100%	5 11%	9 14%	10 12%	12 12%	27 12%	~	2 ~ 40%	4 ~ 12%	4 10%	31 13%	34 13%	1 8%	24 12%	14 16%	
4	20 7%	260 5%	6 ~ 13%	5 8%	6 7%	3 3%*	14 6%	~	~	1 ~ 9%	1 3%	2 5%	14 6%	17 6%	~	14 7%	6 7%	
5 TO 9	16 5%	196 4%	4 ~ 9%	3 5%	6 7%	3 3%	8 4%	1 ~ 33%	~	1 ~ 9%	3 9%	1 3%	11 5%	11 4%	2 17%	8 4%	8 9%	
10 OR MORE TIMES	3 1%	87 2%	1 ~ 2%	1 2%	~	1 1%	2 0.9%	~	~	~	~	1 3%	3 ~ 1%	2 0.7%	1 8%	1 0.5%	2 2%	
NOT ANSWERED	10	280	1	2	6	1	4					1	1	5	1	7	3	
VALID CASES	295	5083	2	45	65	85	98	216	2	3	2	5	11	33	39	236	206	89
NUMBER OF RESPONDENTS	305	5363	2	46	67	91	99	220	2	3	2	5	11	34	40	241	213	92
	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		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q8 #YES	134 65%	2386 68%	2 100%	21 66%	32 68%	39 64%	40 62%	99 66%	1 ~ 50%	2 ~ 100%	3 ~ 100%	3 38%	19 68%	14 52%	109 66%	118 64%	7 78%	84 62%	50 69%
NO	73 35%	1113 32%	~	11 34%	15 32%	22 36%	25 38%	50 34%	1 ~ 50%	~	~	5 ~ 63%	9 32%	13 48%	55 34%	67 36%	2 22%	51 38%	22 31%
NOT ANSWERED	9	69	3	2	1	3	4					1	2	1	6	7		8	1
VALID CASES	207	3499	2	32	47	61	65	149	2	2	3	8	28	27	164	185	9	135	72
NUMBER OF RESPONDENTS	216 100%	3568 100%	2 100%	35 100%	49 100%	62 100%	68 100%	153 100%	2 100%	2 100%	3 100%	9 100%	30 100%	28 100%	170 100%	192 100%	9 100%	143 100%	73 100%

[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			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q9 NEVER	2 0.9%	78 2%	~	~	~	2%	2%	1 0.7%	~	1 50%	~	~	~	~	~	2 1%	2 1%	~	1 0.7%	1 1%
SOMETIMES	13 6%	344 10%*	~	2 6%	2 4%	6 10%	3 5%	8 5%	~	~	~	1 33%	~	2 7%	3 11%	10 6%	11 6%	2 22%	7 5%	6 8%
USUALLY	53 25%	768 22%	~	9 26%	12 26%	16 26%	16 24%	37 25%	~	~	~	~	2 25%	8 27%	6 22%	40 24%	46 24%	2 22%	39 28%	14 19%
ALWAYS	143 68%	2292 66%	2 100%	24 69%	33 70%	38 62%	46 70%	104 69%	~	1 50%	2 100%	2 67%	6 75%	20 67%	18 67%	115 69%	129 69%	5 56%	91 66%	52 71%
#ALWAYS + USUALLY (NET)	196 93%	3059 88%*	2 100%	33 94%	45 96%	54 89%	62 94%	141 94%	~	1 50%	2 100%	2 67%	8 100%	28 93%	24 89%	155 93%	175 93%	7 78%	130 94%	66 90%
TOP BOX SCORE	143 68%	2292 66%	2 100%	24 69%	33 70%	38 62%	46 70%	104 69%	~	1 50%	2 100%	2 67%	6 75%	20 67%	18 67%	115 69%	129 69%	5 56%	91 66%	52 71%
NOT ANSWERED	5	87			2	1	2	3					1		1	3	4		5	
VALID CASES	211	3481	2	35	47	61	66	150	2	2	3	8	30	27	167	188	9	138	73	
NUMBER OF RESPONDENTS	216 100%	3568 100%	2 100%	35 100%	49 100%	62 100%	68 100%	153 100%	2 100%	2 100%	3 100%	9 100%	30 100%	30 100%	170 100%	170 100%	192 100%	9 100%	143 100%	73 100%

[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		
	WORA 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	
Q10 YES	68 33%	1122 32%	1 50%~	10 29%~	14 30%~	21 34%	22 35%	48 33%	1 ~ 50%~	1 50%~	1 33%~	2 25%~	9 31%~	7 26%~	55 34%~	56 30%~	6 67%~	32 24%*	36 50%*
Q10 NO	139 67%	2348 68%	1 50%~	25 71%~	33 70%~	40 66%	40 65%	99 67%	1 ~ 50%~	1 50%~	2 67%~	6 75%~	20 69%~	20 74%~	109 66%~	128 70%~	3 33%~	103 76%*	36 50%*
NOT ANSWERED	9	97			2	1	6	6				1	1	1	6	8		8	1
VALID CASES	207	3471	2	35	47	61	62	147	2	2	3	8	29	27	164	184	9	135	72
NUMBER OF RESPONDENTS	216 100%	3568 100%	2 100%	35 100%	49 100%	62 100%	68 100%	153 100%	2 100%	2 100%	3 100%	9 100%	30 100%	28 100%	170 100%	192 100%	9 100%	143 100%	73 100%

[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				
	WORA 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		
Q11 #YES	64 96%	947 94%	1 100%~	9 90%~	13 93%~	20 100%~	21 95%~	46 96%~		1 ~100%~	1 100%~		2 ~100%~	9 100%~	7 100%~	52 96%~	53 96%~	6 100%~	31 97%~	33 94%~	
NO	3 4%	63 6%		1 ~ 10%~	1 7%~		1 ~ 5%~	2 4%~							2 ~ 4%~	2 4%~		1 3%~	2 6%~		
NOT ANSWERED	20	450		1	4	8	7	10				1	1	2	2	12	14	1	15	5	
VALID CASES	67	1010	1	10	14	20	22	48		1	1		2	9	7	54	55	6	32	35	
NUMBER OF RESPONDENTS	87 100%	1460 100%	1 100%	11 100%	18 100%	28 100%	29 100%	58 100%		1 100%	1 100%		1 100%	3 100%	11 100%	9 100%	66 100%	69 100%	7 100%	47 100%	40 100%

[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		
	WORA 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
Q12 #YES	37 56%	718 70%*		6 ~ 60%~	8 57%~	11 55%~	12 57%~	27 57%~	1 ~100%~			1 ~ 50%~	4 44%~	4 57%~	29 55%~	30 56%~	3 50%~	16 52%~	21 60%~
NO	29 44%	305 30%*	1 100%~	4 40%~	6 43%~	9 45%~	9 43%~	20 43%~		1 ~100%~		1 ~ 50%~	5 56%~	3 43%~	24 45%~	24 44%~	3 50%~	15 48%~	14 40%~
NOT ANSWERED	2	87				1	1	1			1			2		2		1	1
VALID CASES	66	1023	1	10	14	20	21	47	1	1		2	9	7	53	54	6	31	35
NUMBER OF RESPONDENTS	68	1110	1	10	14	21	22	48	1	1	1	2	9	7	55	56	6	32	36
	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]

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			
	WORA 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		
Q13 #YES	50 77%	830 78%		7 ~ 70%	10 71%	16 84%	17 81%	36 77%		1 ~ 100%	1 100%		2 ~ 100%	6 67%	6 86%	40 75%	44 81%	2 33%	23 77%	27 77%
NO	15 23%	241 22%	1 100%	3 30%	4 29%	3 16%	4 19%	11 23%					3 33%	1 14%	13 25%	10 19%	4 67%	7 23%	8 23%	
NOT ANSWERED	3	39				2	1	1				1			2	2		2	1	
VALID CASES	65	1071	1	10	14	19	21	47	1	1		2	9	7	53	54	6	30	35	
NUMBER OF RESPONDENTS	68 100%	1110 100%	1 100%	10 100%	14 100%	21 100%	22 100%	48 100%	1 100%	1 100%	1 100%	2 100%	9 100%	7 100%	55 100%	56 100%	6 100%	32 100%	36 100%	

[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					
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC			
Q14 WORST HEALTH CARE POSSIBLE	3	0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~			
01	1	0.5%	~	~	~	~	1	0.7%	~	~	~	~	~	1	~0.6%	1	~0.5%	~	1	~0.7%		
02	1	0.5%	~	~	~	~	1	~	~	~	~	~	1	~0.6%	1	~0.5%	~	1	~0.7%			
03	1	0.5%	~	3%	~	~	~	~	~	~	~	~	~	~	1	~0.6%	1	~0.5%	~	1		
04	1	0.5%	~	~	2%	~	~	~	~	~	~	~	~	~	1	~0.6%	~	1	~11%	1		
05	16	8%	~	2	5	3	6	12	~	~	~	1	3	2	14	7%	9%	15	1	10	6	
06	11	5%	~	3	2	6	~	6	~	~	~	1	2	1	9	4%	5%	9	1	8	3	
07	17	8%	~	1	5	6	5	15	~	~	~	~	1	2	14	7%	9%	16	1	11	6	
08	53	25%	~	8	8	18	19	36	~	~	1	1	7	8	39	30%	24%	47	1	36	17	
09	35	17%	50%	1	10	8	11	5	~	~	~	~	1	2	29	7%	18%	29	2	23	12	
BEST HEALTH CARE POSSIBLE	72	35%	50%	1	10	17	16	28	~100%	2	1	2	5	10	12	55	44%	34%	66	2	47	25
#8-10 (NET)	160	77%	100%	2	28	33	45	52	~100%	2	2	3	6	23	22	123	81%	75%	142	5	106	54

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		
	WORA 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)	107 51%	2027 58%	2 100%	20 57%	25 54%	27 45%	33 51%	75 51%	2 ~100%	1 50%	2 67%	6 75%	16 53%	14 52%	84 51%	95 51%	4 44%	70 51%	37 52%
NOT ANSWERED	8	98			3	2	3	6				1		1	6	7		6	2
VALID CASES	208	3470	2	35	46	60	65	147	2	2	3	8	30	27	164	185	9	137	71
NUMBER OF RESPONDENTS	216 100%	3568 100%	2 100%	35 100%	49 100%	62 100%	68 100%	153 100%	2 100%	2 100%	3 100%	9 100%	30 100%	28 100%	170 100%	192 100%	9 100%	143 100%	73 100%
MEAN	8.34	8.58	9.50	8.34	8.30	8.27	8.38	8.31	10.0	9.00	9.33	8.75	8.20	8.59	8.26	8.35	7.56	8.34	8.32
p stat_(*=Sig @ p<=.05)		.033*	~	~	~.688	.805	.699	~	~	~	~	~	~	~	~	~	~	.942	.941

[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		
	WORA 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	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q15 NEVER	1 0.5%	64 2%*	~	~	~	~	1 2%	1 0.7%	~	~	~	~	~	~	1 ~0.6%	1 ~0.5%	1 ~	1 ~	1 ~0.7%	~
SOMETIMES	17 8%	353 10%	~	3 9%	4 9%	4 7%	6 9%	11 7%	~	~	~	~	2 25%	2 7%	2 7%	14 9%	14 8%	2 22%	8 6%	9 13%
USUALLY	70 34%	1112 32%	~	13 37%	15 33%	22 36%	20 31%	48 32%	~	~	1 50%	1 50%	~	13 43%	10 37%	53 32%	62 34%	3 33%	47 35%	23 32%
ALWAYS	120 58%	1922 56%	2 100%	19 54%	26 58%	35 57%	38 58%	88 59%	~	2 100%	1 50%	1 50%	6 75%	15 50%	15 56%	96 59%	108 58%	4 44%	80 59%	40 56%
#ALWAYS + USUALLY (NET)	190 91%	3034 88%	2 100%	32 91%	41 91%	57 93%	58 89%	136 92%	~	2 100%	2 100%	2 100%	6 75%	28 93%	25 93%	149 91%	170 92%	7 78%	127 93%	63 88%
TOP BOX SCORE	120 58%	1922 56%	2 100%	19 54%	26 58%	35 57%	38 58%	88 59%	~	2 100%	1 50%	1 50%	6 75%	15 50%	15 56%	96 59%	108 58%	4 44%	80 59%	40 56%
NOT ANSWERED	8	117			4	1	3	5					1	1	1	6	7		7	1
VALID CASES	208	3451	2	35	45	61	65	148	2	2	2	8	30	27	164	185	9	136	72	
NUMBER OF RESPONDENTS	216 100%	3568 100%	2 100%	35 100%	49 100%	62 100%	68 100%	153 100%	2 100%	2 100%	3 100%	9 100%	30 100%	30 100%	28 100%	170 100%	192 100%	9 100%	143 100%	73 100%

[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			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q16 YES	232	3643	1	12	51	81	87	179	2	1	4	7	24	32	186	209	12	148	84	
	79%	71%*	50%~	27%~	78%	95%*	92%*	83%*	100%~	50%~	~100%~	64%~	73%~	80%~	80%	79%~	92%~	73%*	93%*	
NO	60	1481	1	33	14	4	8	37		1	2	4	9	8	47	55	1	54	6	
	21%	29%*	50%~	73%~	22%	5%*	8%*	17%*		~ 50%~	~100%~	~ 36%~	27%~	20%~	20%	21%~	8%~	27%*	7%*	
NOT ANSWERED	13	239		1	2	6	4	4		1	1		1		8	8		11	2	
VALID CASES	292	5124	2	45	65	85	95	216	2	2	2	4	11	33	40	233	264	13	202	90
NUMBER OF RESPONDENTS	305	5363	2	46	67	91	99	220	2	3	2	5	11	34	40	241	272	13	213	92
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	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			
	WORA 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	
Q17 YES	22 10%	403 11%	~	~	13%~	9%	11%	15 9%~	~	~	~	~	1 ~	1 4%~	1 4%~	16 9%~	15 8%~	3 25%~	9 7%	13 15%
NO	191 90%	3143 89%	1 100%~	11 100%~	39 87%~	68 91%	72 89%	148 91%~	2 100%~	1 100%~	~	4 ~	5 83%~	22 96%~	27 96%~	155 91%~	175 92%~	9 75%~	120 93%	71 85%
NOT ANSWERED	19	226	1	6	6	6	16				1	1	4	15	19			19		
VALID CASES	213	3545	1	11	45	75	81	163	2	1	4	6	23	28	171	190	12	129	84	
NUMBER OF RESPONDENTS	232 100%	3771 100%	1 100%	12 100%	51 100%	81 100%	87 100%	179 100%	2 100%	1 100%	4 100%	7 100%	24 100%	32 100%	186 100%	209 100%	12 100%	148 100%	84 100%	

[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?

	WORA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<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 & GOOD	FAIR & POOR	NO CCC	CCC
Q18 #YES	22 100%	349 94%~	~	~100%	~100%	~100%	~100%	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%
NO		22 6%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		7																	
VALID CASES	22	371		6	7	9	15				1	1	1	16	15	3	9	13	
NUMBER OF RESPONDENTS	22 100%	378 100%		6 100%	7 100%	9 100%	15 100%				1 100%	1 100%	1 100%	16 100%	15 100%	3 100%	9 100%	13 100%	

[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			
	WORA 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
Q19 YES	21 7%	175 3%*	1 50%~	5 11%~	5 7%	5 6%	5 5%	17 8%	~	~	~	2 40%~	1 9%~	~	3 7%~	17 7%	19 7%~	1 8%~	9 4%*	12 13%*
NO	276 93%	4948 97%*	1 50%~	41 89%~	62 93%	81 94%	91 95%	201 92%	2 100%	3 100%	2 100%	3 60%~	10 91%~	34 100%	37 93%~	221 93%	250 93%~	12 92%~	197 96%*	79 87%*
NOT ANSWERED	8	240				5 3	2								3	3		7	1	
VALID CASES	297	5123	2	46	67	86	96	218	2	3	2	5	11	34	40	238	269	13	206	91
NUMBER OF RESPONDENTS	305	5363	2	46	67	91	99	220	2	3	2	5	11	34	40	241	272	13	213	92
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	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				
	WORA 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	
Q20 NEVER	2 11%	23 12%	~	1 25%	1 20%	~	2 13%	~	~	~	~	~	~	2 13%	2 11%	~	1 13%	1 9%	
SOMETIMES	4 21%	35 18%	1 100%	~	1 20%	2 40%	3 20%	~	~	~	1 50%	~	~	4 27%	4 22%	~	1 13%	3 27%	
USUALLY	3 16%	49 25%	~	~	~	3 75%	3 20%	~	~	~	~	~	~	1 33%	2 13%	3 17%	~	3 27%	
ALWAYS	10 53%	87 45%	~	3 75%	3 60%	3 60%	1 25%	7 47%	~	~	1 50%	1 100%	~	2 67%	7 47%	9 50%	~	6 75%	4 36%
#ALWAYS + USUALLY (NET)	13 68%	135 70%	~	3 75%	3 60%	3 60%	4 100%	10 67%	~	~	1 50%	1 100%	~	3 100%	9 60%	12 67%	~	6 75%	7 64%
TOP BOX SCORE	10 53%	87 45%	~	3 75%	3 60%	3 60%	1 25%	7 47%	~	~	1 50%	1 100%	~	2 67%	7 47%	9 50%	~	6 75%	4 36%
NOT ANSWERED	2	3	~	1	~	1	2	~	~	~	~	~	~	2	1	1	1	1	1
VALID CASES	19	193	1	4	5	5	4	15	~	~	2	1	~	3	15	18	~	8	11
NUMBER OF RESPONDENTS	21	196	1	5	5	5	5	17	~	~	2	1	~	3	17	19	1	9	12
	100%	100%	100%	100%	100%	100%	100%	100%	~	~	100%	100%	~	100%	100%	100%	~	100%	100%

[ASKED IF Q19 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA 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
Q21 #YES	19 95%	157 84%	1 100%	4 100%	5 100%	4 80%	5 100%	15 94%	~	~	2 100%	1 100%	~	3 100%	15 94%	17 94%	1 100%	8 100%	11 92%	~
NO	1 5%	31 16%	~	~	~	1 20%	~	1 6%	~	~	~	~	~	~	1 6%	1 6%	~	~	1 8%	~
NOT ANSWERED	1	8		1			1							1	1	1			1	
VALID CASES	20	188	1	4	5	5	5	16			2	1		3	16	18	1	8	12	
NUMBER OF RESPONDENTS	21	196	1	5	5	5	5	17			2	1		3	17	19	1	9	12	
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%		100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q19 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA 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		
Q22 YES	27 9%	446 9%		5 ~ 11%	6 ~ 9%	8 ~ 9%	8 ~ 8%	17 8%	~	~	~	~	2 ~ 18%	5 ~ 15%	2 5%	22 9%	22 8%	2 15%	14 7%	13 14%
NO	265 91%	4656 91%	2 100%	41 ~ 89%	58 ~ 91%	77 ~ 91%	87 ~ 92%	197 92%	2 100%	3 ~ 100%	1 ~ 100%	5 ~ 100%	9 ~ 82%	29 ~ 85%	38 95%	211 91%	242 92%	11 85%	188 93%	77 86%
NOT ANSWERED	13	261			3	6	4	6		1				8	8		11	2		
VALID CASES	292	5102	2	46	64	85	95	214	2	3	1	5	11	34	40	233	264	13	202	90
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%



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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA 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	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC	
Q23 NEVER	2 8%	62 15%	~ 20%	~ 13%	~ 13%	~ 13%	~ 13%	~	~	~	~	~	~	~	~ 10%	2 5%	1 50%	1 50%	~ 17%	2	
SOMETIMES	5 19%	96 24%	~ 40%	~ 33%	~ 14%	~ 19%	~	~	~	~	~	~ 50%	~ 20%	~ 50%	~ 19%	1 24%	4 24%	5 24%	~ 21%	3 17%	2
USUALLY	7 27%	112 28%	~ 20%	~ 17%	~ 38%	~ 29%	~ 31%	~	~	~	~	~	~ 20%	~ 29%	~ 29%	6 29%	6 29%	~ 21%	3 21%	4 33%	
ALWAYS	12 46%	135 33%	~ 20%	~ 50%	~ 50%	~ 57%	~ 38%	~	~	~	~	~ 50%	~ 60%	~ 50%	~ 43%	1 43%	9 43%	9 43%	1 50%	8 57%	4 33%
#ALWAYS + USUALLY (NET)	19 73%	247 61%	~ 40%	~ 67%	~ 88%	~ 86%	~ 69%	~	~	~	~	~ 50%	~ 80%	~ 50%	~ 71%	1 71%	15 71%	1 50%	11 79%	8 67%	
TOP BOX SCORE	12 46%	135 33%	~ 20%	~ 50%	~ 50%	~ 57%	~ 38%	~	~	~	~	~ 50%	~ 60%	~ 50%	~ 43%	1 43%	9 43%	9 43%	1 50%	8 57%	4 33%
NOT ANSWERED	1	14				1	1									1	1			1	
VALID CASES	26	405	5	6	8	7	16						2	5	2	21	2	2	14	12	
NUMBER OF RESPONDENTS	27	419	5	6	8	8	17						2	5	2	22	2	2	14	13	
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q22 = YES]

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA 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	16 62%	260 64%~	4 ~ 80%~	2 33%~	5 63%~	5 71%~	7 44%~	~	~	~	~	1 50%~	5 100%~	1 50%~	12 57%~	11 52%~	2 100%~	10 71%~	6 50%~
NO	10 38%	143 36%~	1 ~ 20%~	4 67%~	3 38%~	2 29%~	9 56%~	~	~	~	~	1 50%~	~	1 50%~	9 43%~	10 48%~	~	4 29%~	6 50%~
NOT ANSWERED	1	16				1	1							1	1				1
VALID CASES	26	403	5	6	8	7	16					2	5	2	21	21	2	14	12
NUMBER OF RESPONDENTS	27	419	5	6	8	8	17					2	5	2	22	22	2	14	13
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q22 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q25 YES	37 13%	666 13%	~	~	10%	20%*	14%	25 12%	~	~	~	40%~	18%~	3%~	5 13%~	25 11%~	30 11%~	~	12 6%*	25 28%*
NO	259 87%	4441 87%	100%~	100%~	90%	80%*	86%	192 88%	2 100%	3 100%	2 100%	3 60%~	9 82%~	32 97%~	34 87%~	213 89%	238 89%~	13 100%~	194 94%*	65 72%*
NOT ANSWERED	9	256				6	3	3						1	1	3	4		7	2
VALID CASES	296	5107	2	46	67	85	96	217	2	3	2	5	11	33	39	238	268	13	206	90
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%

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				
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC	ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q26 NEVER	5 14%	92 14%	~	~	17%~	24%~	~	4 17%~	~	~	~	~	~	~	~	1 20%~	3 13%~	4 14%~	~	2 18%~	3 12%~
SOMETIMES	5 14%	116 18%	~	~	50%~	6%~	8%~	3 13%~	~	~	~	50%~	1 50%~	1 50%~	~	2 40%~	3 13%~	5 17%~	~	1 9%~	4 16%~
USUALLY	8 22%	171 27%	~	~	17%~	24%~	23%~	6 25%~	~	~	~	~	~	~	~	1 20%~	5 21%~	6 21%~	~	3 27%~	5 20%~
ALWAYS	18 50%	258 41%	~	~	17%~	47%~	69%~	11 46%~	~	~	~	50%~	1 50%~	1 50%~	1 100%~	1 20%~	13 54%~	14 48%~	~	5 45%~	13 52%~
#ALWAYS + USUALLY (NET)	26 72%	429 67%	~	~	33%~	71%~	92%~	17 71%~	~	~	~	50%~	1 50%~	1 50%~	1 100%~	2 40%~	18 75%~	20 69%~	~	8 73%~	18 72%~
TOP BOX SCORE	18 50%	258 41%	~	~	17%~	47%~	69%~	11 46%~	~	~	~	50%~	1 50%~	1 50%~	1 100%~	1 20%~	13 54%~	14 48%~	~	5 45%~	13 52%~
NOT ANSWERED	1	17			1			1									1	1		1	
VALID CASES	36	636			6	17	13	24				2	2	1	5	24	29			11	25
NUMBER OF RESPONDENTS	37	653			7	17	13	25				2	2	1	5	25	30			12	25
	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		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q27 #YES	20 57%	311 49%~	~	~	50%~	65%~	50%~	13 57%~	~	~	~	50%~	~100%~	2 40%~	12 52%~	14 50%~	~	8 73%~	12 50%~
NO	15 43%	326 51%~	~	~	50%~	35%~	50%~	10 43%~	~	~	~	50%~	100%~	3 60%~	11 48%~	14 50%~	~	3 27%~	12 50%~
NOT ANSWERED	2	17			1		1	2						2	2	2		1	1
VALID CASES	35	636			6	17	12	23			2	2	1	5	23	28		11	24
NUMBER OF RESPONDENTS	37	653			7	17	13	25			2	2	1	5	25	30		12	25
	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			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q28 YES	76 26%	978 19%*	2 100%~	10 22%~	18 27%	18 21%	28 29%	59 27%	~	~	1 50%~	2 40%~	1 9%~	5 15%~	6 15%~	62 26%	64 24%~	6 46%~	44 22%*	32 35%*
NO	220 74%	4103 81%*	~	36 78%~	48 73%	68 79%	68 71%	158 73%	2 100%	3 100%	1 50%~	3 60%~	10 91%~	28 85%~	34 85%~	175 74%	204 76%~	7 54%~	160 78%*	60 65%*
NOT ANSWERED	9	281			1	5	3	3						1	4	4		9		
VALID CASES	296	5082	2	46	66	86	96	217	2	3	2	5	11	33	40	237	268	13	204	92
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%

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		
	WORA 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
Q29 #YES	55 73%	594 60%*	1 50%~	8 80%~	11 65%~	14 78%~	21 75%~	42 72%~	~	1 ~100%~	1 50%~	3 ~ 60%~	3 50%~	45 74%~	46 73%~	3 50%~	33 77%~	22 69%~	
NO	20 27%	403 40%*	1 50%~	2 20%~	6 35%~	4 22%~	7 25%~	16 28%~	~	1 ~ 50%~	1 100%~	2 40%~	3 50%~	16 26%~	17 27%~	3 50%~	10 23%~	10 31%~	
NOT ANSWERED	1	32			1		1						1		1		1		
VALID CASES	75	998	2	10	17	18	28	58		1	2	1	5	6	61	63	6	43	32
NUMBER OF RESPONDENTS	76 100%	1030 100%	2 100%	10 100%	18 100%	18 100%	28 100%	59 100%		1 100%	2 100%	1 100%	5 100%	6 100%	62 100%	64 100%	6 100%	44 100%	32 100%

[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		
	WORA 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- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q30 YES	279 94%	4410 88%*	2 100%~	44 98%~	65 97%	82 95%	86 90%*	202 94%	2 100%	3 100%	2 100%	4 80%~	10 91%~	33 97%~	37 93%~	223 94%	252 94%~	12 92%~	192 94%	87 95%
NO	17 6%	622 12%*	~	1 2%~	2 3%	4 5%	10 10%*	14 6%	~	~	~	1 20%~	1 9%~	1 3%~	3 7%~	14 6%	16 6%~	1 8%~	12 6%	5 5%
NOT ANSWERED	9	331		1		5	3	4							4	4			9	
VALID CASES	296	5032	2	45	67	86	96	216	2	3	2	5	11	34	40	237	268	13	204	92
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%



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			
	WORA 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		
Q31 NONE	74 28%	1163 27%		12 ~ 28%	16 ~ 27%	20 25%	26 33%	58 31%	2 100%	2 67%	1 100%		1 ~ 11%	3 10%	9 26%	61 29%	68 29%	3 27%	62 35%*	12 14%*	
1 TIME	71 27%	1470 34%*		7 ~ 16%	17 ~ 29%	20 25%	27 34%	50 26%					2 ~ 50%	3 33%	12 39%	10 29%	57 27%	64 27%	3 27%	48 27%	23 27%
2	51 19%	817 19%		10 ~ 23%	11 ~ 19%	18 23%	12 15%	36 19%					1 ~ 25%	3 33%	9 29%	9 26%	39 19%	48 20%	1 9%	29 16%	22 26%
3	35 13%	450 11%	2 100%	5 ~ 12%	8 ~ 14%	12 15%	8 10%	25 13%					1 ~ 25%		3 ~ 10%	3 9%	27 13%	30 13%	1 9%	21 12%	14 17%
4	18 7%	180 4%		5 ~ 12%	4 ~ 7%	5 6%	4 5%	14 7%							2 ~ 6%	1 3%	15 7%	15 6%	2 18%	12 7%	6 7%
5 TO 9	11 4%	146 3%		3 ~ 7%	2 ~ 3%	4 5%	2 3%	6 3%		1 ~ 33%				2 ~ 22%	1 3%	2 6%	8 4%	9 4%	1 9%	5 3%	6 7%
10 OR MORE TIMES	2 0.8%	40 0.9%		1 ~ 2%	1 ~ 2%			1 ~ 0.5%							1 ~ 3%	2 ~ 1%	0.8%			1 ~ 0.6%	1 1%
NOT ANSWERED	17	203		1	6	3	7	12			1		1	2	3	14	16	1	14	3	
VALID CASES	262	4266	2	43	59	79	79	190	2	3	1	4	9	31	34	209	236	11	178	84	
NUMBER OF RESPONDENTS	279	4469	2	44	65	82	86	202	2	3	2	4	10	33	37	223	252	12	192	87	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q31A ALWAYS	2 1%	82 3%*	~	~	1 2%~	~	1 2%	0.8%	~	~	~	~	~	4%~	~	2 1%~	2 1%~	~	2 2%	~
USUALLY	2 1%	49 2%	~	~	1 2%~	1 2%	~	~	~	~	~	1 13%~	~	2 8%~	~	2 1%~	~	2 2%	~	~
SOMETIMES	4 2%	229 8%*	~	2 6%~	~	2 3%	~	2%	~	~	~	~	~	2 8%~	2 1%~	4 2%~	~	3 3%	1 1%	
NEVER	179 96%	2671 88%*	2 100%~	29 94%~	40 95%~	56 95%	52 98%	128 98%	1 ~100%~	~	4 ~100%~	7 88%~	27 96%~	21 84%~	144 97%~	160 95%~	8 100%~	108 94%	71 99%	
#NEVER + SOMETIMES (NET)	183 98%	2900 96%	2 100%~	31 100%~	40 95%~	58 98%	52 98%	130 99%	1 ~100%~	~	4 ~100%~	7 88%~	27 96%~	23 92%~	146 99%~	164 98%~	8 100%~	111 97%~	72 100%~	
TOP BOX SCORE	179 96%	2671 88%*	2 100%~	29 94%~	40 95%~	56 95%	52 98%	128 98%	1 ~100%~	~	4 ~100%~	7 88%~	27 96%~	21 84%~	144 97%~	160 95%~	8 100%~	108 94%	71 99%	
NOT ANSWERED	1	30			1		1											1		
VALID CASES	187	3030	2	31	42	59	53	131	1		4	8	28	25	148	168	8	115	72	
NUMBER OF RESPONDENTS	188	3060	2	31	43	59	53	132	1		4	8	28	25	148	168	8	116	72	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q32 NEVER	5 3%	80 3%	~	~	1 2%	1 2%	3 6%	3 2%	~	~	~	1 13%	1 4%	2 8%	2 1%	4 2%	1 13%	3 3%	2 3%
SOMETIMES	5 3%	145 5%	~	2 6%	~	3 5%	2 ~	~	~	~	~	~	~	3 12%	2 1%	5 3%	~	4 3%	1 1%
USUALLY	33 18%	478 16%	~	4 13%	5 12%	16 27%*	8 15%	21 16%	~	~	~	1 13%	8 29%	2 8%	27 18%	3 16%	3 38%	22 19%	11 15%
ALWAYS	143 77%	2312 77%	100%	2 81%	25 86%	36 86%	39 66%*	41 79%	104 80%	1 ~100%	4 ~100%	6 75%	19 68%	18 72%	116 79%	131 78%	4 50%	86 75%	57 80%
#ALWAYS + USUALLY (NET)	176 95%	2790 93%	100%	2 94%	29 94%	41 98%	55 93%	49 94%	125 96%	1 ~100%	4 ~100%	7 88%	27 96%	20 80%	143 97%	158 95%	7 88%	108 94%	68 96%
TOP BOX SCORE	143 77%	2312 77%	100%	2 81%	25 86%	36 86%	39 66%*	41 79%	104 80%	1 ~100%	4 ~100%	6 75%	19 68%	18 72%	116 79%	131 78%	4 50%	86 75%	57 80%
NOT ANSWERED	2	44			1		1	2						1	1		1	1	
VALID CASES	186	3016	2	31	42	59	52	130	1	4	8	28	25	147	167	8	115	71	
NUMBER OF RESPONDENTS	188	3060	2	31	43	59	53	132	1	4	8	28	25	148	168	8	116	72	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA 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
Q33 NEVER	2 1%	40 1%	~	1 3%	1 2%	~	~	2 2%	~	~	~	~	~	~	~	2 1%	1 0.6%	1 13%	1 0.9%	1 1%
SOMETIMES	7 4%	145 5%	~	1 3%	1 2%	3 5%	2 4%	5 4%	~	~	~	~	~	~	2 8%	5 3%	7 4%	~	4 3%	3 4%
USUALLY	37 20%	494 16%	~	4 13%	7 17%	17 29%	9 17%	20 15%*	~	~	~	~	4 50%	8 29%	6 24%	26 18%	30 18%	3 38%	26 23%	11 15%
ALWAYS	140 75%	2341 77%	100%	2 81%	25 79%	33 66%	39 79%	41 79%	103 79%	1 ~100%	~	4 ~100%	4 50%	20 71%	17 68%	114 78%	129 77%	4 50%	84 73%	56 79%
#ALWAYS + USUALLY (NET)	177 95%	2835 94%	100%	2 94%	29 95%	40 95%	56 96%	50 96%	123 95%	1 ~100%	~	4 ~100%	8 100%	28 100%	23 92%	140 95%	159 95%	7 88%	110 96%	67 94%
TOP BOX SCORE	140 75%	2341 77%	100%	2 81%	25 79%	33 66%	39 79%	41 79%	103 79%	1 ~100%	~	4 ~100%	4 50%	20 71%	17 68%	114 78%	129 77%	4 50%	84 73%	56 79%
NOT ANSWERED	2	39			1		1	2							1	1		1	1	
VALID CASES	186	3021	2	31	42	59	52	130	1		4	8	28	25	147	167	8	115	71	
NUMBER OF RESPONDENTS	188	3060	2	31	43	59	53	132	1		4	8	28	25	148	168	8	116	72	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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			
	WORA 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
Q34 NEVER	1 0.5%	28 0.9%	~	3%~	~	~	~	0.8%~	~	~	~	~	~	~	~	1 ~0.7%	1 ~0.6%	~	1 ~0.9%	~
SOMETIMES	7 4%	114 4%	~	~	3 7%~	2 3%	2 4%	6 5%	~	~	~	~	1 13%~	~	~	7 5%~	6 4%~	1 13%~	2 2%	5 7%
USUALLY	29 16%	407 14%	~	10%~	3 7%~	3 25%*	15 15%	8 14%	~	~	~	~	~	7 25%~	3 12%~	23 16%~	23 14%~	3 38%~	23 20%*	6 8%*
ALWAYS	149 80%	2460 82%	2 100%~	27 87%~	35 85%~	42 71%	43 81%	106 81%	~	1 ~100%~	~	4 ~100%~	7 88%~	21 75%~	22 88%~	117 79%~	138 82%~	4 50%~	88 77%	61 85%
#ALWAYS + USUALLY (NET)	178 96%	2867 95%	2 100%~	30 97%~	38 93%~	57 97%	51 96%	124 95%	~	1 ~100%~	~	4 ~100%~	7 88%~	28 100%~	25 100%~	140 95%~	161 96%~	7 88%~	111 97%	67 93%
TOP BOX SCORE	149 80%	2460 82%	2 100%~	27 87%~	35 85%~	42 71%	43 81%	106 81%	~	1 ~100%~	~	4 ~100%~	7 88%~	21 75%~	22 88%~	117 79%~	138 82%~	4 50%~	88 77%	61 85%
NOT ANSWERED	2	51			2		1												2	
VALID CASES	186	3009	2	31	41	59	53	131	1		4	8	28	25	148	168	8	114	72	
NUMBER OF RESPONDENTS	188	3060	2	31	43	59	53	132	1		4	8	28	25	148	168	8	116	72	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER PAC ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q35 YES	137 74%	2050 69%	6 ~ 19%	28 68%	50 85%	53 100%	102 78%		1 ~ 100%		2 ~ 50%	6 75%	18 64%	18 72%	109 74%	124 74%	5 63%	77 68%*	60 83%*
NO	49 26%	942 31%	2 100%	25 81%	13 32%	9 15%*	29 22%				2 ~ 50%	2 25%	10 36%	7 28%	39 26%	44 26%	3 38%	37 32%*	12 17%*
NOT ANSWERED	2	67			2		1												2
VALID CASES	186	2993	2	31	41	59	53	131	1		4	8	28	25	148	168	8	114	72
NUMBER OF RESPONDENTS	188	3060	2	31	43	59	53	132	1		4	8	28	25	148	168	8	116	72
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q36 NEVER	1 0.7%	19 1%	~	~	1 4%	~	~	~	~	~	~	~	1 6%	1 ~0.9%	1 ~20%	1 ~2%	1 ~2%	1 ~2%	1 ~2%
SOMETIMES	8 6%	119 6%	~	~	2 7%	3 6%	3 6%	5 5%	~	~	~	~	3 17%	1 6%	7 6%	7 6%	1 20%	5 6%	3 5%
USUALLY	30 22%	466 23%	~	~	3 11%	16 32%*	11 21%	24 24%	~	~	~	~	3 17%	4 22%	23 21%	28 23%	~	19 25%	11 18%
ALWAYS	98 72%	1408 70%	~100%	~79%	22 62%	31 62%	39 74%	73 72%	1 ~100%	~	2 ~100%	6 100%	11 61%	13 72%	78 72%	89 72%	3 60%	53 69%	45 75%
#ALWAYS + USUALLY (NET)	128 93%	1874 93%	~100%	~89%	6 89%	25 94%	47 94%	50 94%	97 95%	1 ~100%	2 ~100%	6 100%	14 78%	17 94%	101 93%	117 94%	3 60%	72 94%	56 93%
TOP BOX SCORE	98 72%	1408 70%	~100%	~79%	22 62%	31 62%	39 74%	73 72%	1 ~100%	~	2 ~100%	6 100%	11 61%	13 72%	78 72%	89 72%	3 60%	53 69%	45 75%
NOT ANSWERED		36																	
VALID CASES	137	2013	6	28	50	53	102	1	2	6	18	18	109	124	5	77	60		
NUMBER OF RESPONDENTS	137	2049	6	28	50	53	102	1	2	6	18	18	109	124	5	77	60		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q37 NEVER	2 1%	89 3%*	~	~	1 2%~	1 2%	~	2 2%	~	~	~	~	~	~	2 1%	1 0.6%~	1 13%~	1 0.9%~	1 1%	
SOMETIMES	13 7%	318 11%	~	4 13%~	3 7%~	5 8%	1 2%*	6 5%	~	~	~	2 25%~	1 4%~	4 16%~	7 5%~	11 7%~	~	9 8%	4 6%	
USUALLY	54 29%	708 24%	~	12 39%~	9 22%~	23 39%	10 19%*	31 24%*	~	~	~	1 25%~	2 25%~	14 50%~	7 28%~	42 28%~	48 29%~	3 38%~	39 34%*	15 21%*
ALWAYS	117 63%	1876 63%	2 100%~	15 48%~	28 68%~	30 51%*	42 79%*	92 70%*	1 ~100%~	~	3 ~75%~	4 50%~	13 46%~	14 56%~	97 66%~	108 64%~	4 50%~	65 57%*	52 72%*	
#ALWAYS + USUALLY (NET)	171 92%	2584 86%*	2 100%~	27 87%~	37 90%~	53 90%	52 98%*	123 94%	1 ~100%~	~	4 ~100%~	6 75%~	27 96%~	21 84%~	139 94%~	156 93%~	7 88%~	104 91%	67 93%	
TOP BOX SCORE	117 63%	1876 63%	2 100%~	15 48%~	28 68%~	30 51%*	42 79%*	92 70%*	1 ~100%~	~	3 ~75%~	4 50%~	13 46%~	14 56%~	97 66%~	108 64%~	4 50%~	65 57%*	52 72%*	
NOT ANSWERED	2	70			2			1										2		
VALID CASES	186	2990	2	31	41	59	53	131	1		4	8	28	25	148	168	8	114	72	
NUMBER OF RESPONDENTS	188	3060	2	31	43	59	53	132	1		4	8	28	25	148	168	8	116	72	
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

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



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

	WORA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	NO CCC	CCC	
Q38 #YES	147 79%	2520 84%	2 100%	27 87%	32 78%	47 81%	39 74%	102 78%	~	~	~	3 75%	6 75%	24 86%	23 92%	113 77%	133 80%	6 75%	89 78%	58 82%
NO	38 21%	484 16%	~	4 13%	9 22%	11 19%	14 26%	28 22%	~100%	~	~	1 25%	2 25%	4 14%	2 8%	34 23%	34 20%	2 25%	25 22%	13 18%
NOT ANSWERED	3	56			2	1		2							1		1		2	1
VALID CASES	185	3004	2	31	41	58	53	130	1			4	8	28	25	147	167	8	114	71
NUMBER OF RESPONDENTS	188 100%	3060 100%	2 100%	31 100%	43 100%	59 100%	53 100%	132 100%	1 100%			4 100%	8 100%	28 100%	25 100%	148 100%	168 100%	8 100%	116 100%	72 100%

[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		
	WORA 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
Q39 YES	82 44%	1156 39%	2 100%~	13 42%~	16 39%~	26 45%~	25 47%	63 48%	1 ~100%~	2 ~ 50%~	2 25%~	6 22%~	7 29%~	66 45%~	72 43%~	4 57%~	42 37%*	40 56%*	
NO	103 56%	1846 61%	~	18 58%~	25 61%~	32 55%	28 53%	68 52%	~	~	2 ~ 50%~	6 75%~	21 78%~	17 71%~	82 55%~	96 57%~	3 43%~	72 63%*	31 44%*
NOT ANSWERED	3	59			2	1		1					1			1	2	1	
VALID CASES	185	3001	2	31	41	58	53	131	1	4	8	27	24	148	168	7	114	71	
NUMBER OF RESPONDENTS	188	3060	2	31	43	59	53	132	1	4	8	28	25	148	168	8	116	72	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q40 NEVER	3 4%	80 7%		1 ~ 8%~	1 ~ 4%~	1 5%~	3 5%~	~	~	~	~	~	3 ~ 5%~	3 4%~	1 ~ 3%~	2 5%~			
SOMETIMES	7 9%	163 14%		1 ~ 8%~	1 6%~	2 8%~	3 14%~	5 8%~	~	~	~	1 ~ 17%~	6 ~ 10%~	6 9%~	5 ~ 13%~	2 5%~			
USUALLY	23 30%	320 28%		2 ~ 15%~	7 44%~	9 38%~	5 23%~	17 29%~	~	~	~	1 50%~	3 50%~	2 33%~	19 30%~	20 29%~	2 50%~	10 26%~	13 34%~
ALWAYS	44 57%	595 51%	2 100%~	9 69%~	8 50%~	12 50%~	13 59%~	34 58%~	1 ~100%~	2 ~100%~	1 50%~	2 33%~	4 67%~	35 56%~	39 57%~	2 50%~	23 59%~	21 55%~	
#ALWAYS + USUALLY (NET)	67 87%	915 79%~	2 100%~	11 85%~	15 94%~	21 88%~	18 82%~	51 86%~	1 ~100%~	2 ~100%~	2 100%~	5 83%~	6 100%~	54 86%~	59 87%~	4 100%~	33 85%~	34 89%~	
TOP BOX SCORE	44 57%	595 51%	2 100%~	9 69%~	8 50%~	12 50%~	13 59%~	34 58%~	1 ~100%~	2 ~100%~	1 50%~	2 33%~	4 67%~	35 56%~	39 57%~	2 50%~	23 59%~	21 55%~	
NOT ANSWERED	5	33			2	3	4					1	3	4		3	2		
VALID CASES	77	1158	2	13	16	24	22	59	1	2	2	6	6	63	68	4	39	38	
NUMBER OF RESPONDENTS	82	1191	2	13	16	26	25	63	1	2	2	6	7	66	72	4	42	40	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q30 = YES AND Q31 >= 1 TIME AND 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		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q41 WORST PERSONAL DOCTOR POSSIBLE	1	9				1	1							1		1			1
	0.4%	0.2%	~	~	~	1%	~0.5%	~	~	~	~	~	~	~0.5%	0.4%	~	~	~	1%
01		6	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
		0.1%																	
02		7	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
		0.2%																	
03	3	14	~	~	1	~	2	3	~	~	~	~	~	1	2	3	~	1	2
	1%	0.3%			2%	~	3%	2%	~	~	~	~	~	3%	0.9%	1%	~	0.6%	2%
04	6	45	~	~	2	2	2	4	~	~	~	1	1	6	4	2	1	5	
	2%	1%			3%	3%	3%	2%	~	~	~	11%	3%	~	3%	2%	17%	0.6%*	6%*
05	13	127	~	2	3	3	5	9	~	~	~	~	4	3	10	12	1	6	7
	5%	3%		5%	5%	4%	6%	5%	~	~	~	~	13%	9%	5%	5%	8%	3%	8%
06	7	112	~	3	1	2	1	5	~	~	~	1	~	2	5	6	1	5	2
	3%	3%		7%	2%	3%	1%	3%	~	~	~	11%	~	6%	2%	3%	8%	3%	2%
07	16	293	~	5	5	4	2	13	1	~	~	~	2	~	16	15	1	14	2
	6%	7%		12%	8%	5%	3%	7%	50%	~	~	~	6%	~	8%*	6%	8%	8%*	2%*
08	45	690	~	7	8	19	11	30	~	1	~	1	5	6	34	41	~	35	10
	17%	16%		17%	13%	24%	14%	16%	~	33%	~	25%	~	16%	18%	17%	~	20%	11%
09	44	810	50%	6	9	15	13	34	1	~	~	~	1	6	35	42	1	28	16
	17%	19%		14%	15%	19%	16%	18%	50%	~	~	~	11%	16%	18%	18%	8%	16%	18%
BEST PERSONAL DOCTOR POSSIBLE	129	2128	50%	1	19	32	34	43	~	2	1	3	6	15	16	104	6	87	42
	49%	50%		45%	52%	43%	54%	49%	~	67%	100%	75%	67%	47%	47%	49%	50%	49%	48%
#8-10 (NET)	218	3628	100%	2	32	49	68	67	~	1	3	1	4	7	25	173	7	150	68
	83%	86%		76%	80%	85%	85%	82%	50%	100%	100%	100%	78%	78%	82%	81%	58%	85%	78%

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA 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)	173 66%	2937 69%	2 100%	25 60%	41 67%	49 61%	56 71%	128 66%	1 50%	2 67%	1 100%	3 75%	7 78%	20 63%	22 65%	139 65%	157 66%	7 58%	115 65%	58 67%
NOT ANSWERED	15	228		2	4	2	7	9			1		1	1	3	10	13		15	
VALID CASES	264	4241	2	42	61	80	79	193	2	3	1	4	9	32	34	213	239	12	177	87
NUMBER OF RESPONDENTS	279 100%	4469 100%	2 100%	44 100%	65 100%	82 100%	86 100%	202 100%	2 100%	3 100%	2 100%	4 100%	10 100%	33 100%	37 100%	223 100%	252 100%	12 100%	192 100%	87 100%
MEAN	8.70	8.89	9.50	8.64	8.72	8.62	8.78	8.69	8.00	9.33	10.0	9.50	8.78	8.53	8.59	8.68	8.71	7.92	8.85	8.40
p stat_(*=Sig @ p<=.05)		.098	~	~	.934	.635	.642	.810	~	~	~	~	~	~	~	.646	~	~	.096	.092

[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		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
Q42 YES	91 34%	1024 24%*		5 ~ 12%~	18 30%	40 49%*	28 35%	67 35%	1 50%~	1 33%~	3 ~ 75%~	2 22%~	8 25%~	8 23%~	73 34%	72 30%~	10 83%~	24 13%*	67 77%*	
NO	177 66%	3250 76%*	2 100%~	38 88%~	43 70%	41 51%*	53 65%	127 65%	1 50%~	2 67%~	2 100%~	1 25%~	7 78%~	24 75%~	27 77%~	142 66%	170 70%~	2 17%~	157 87%*	20 23%*
NOT ANSWERED	11	195		1	4	1	5	8				1	1	2	8	10		11		
VALID CASES	268	4274	2	43	61	81	81	194	2	3	2	4	9	32	35	215	242	12	181	87
NUMBER OF RESPONDENTS	279 100%	4469 100%	2 100%	44 100%	65 100%	82 100%	86 100%	202 100%	2 100%	3 100%	2 100%	4 100%	10 100%	33 100%	37 100%	223 100%	252 100%	12 100%	192 100%	87 100%

[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			
	WORA 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- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q43 #YES	77 92%	896 89%		5 ~100%	13 81%	36 92%	23 96%	57 92%	1 ~100%		3 ~100%	2 100%	6 86%	7 100%	61 90%		64 94%	5 63%	22 100%	55 89%
NO	7 8%	110 11%			3 ~19%	3 8%	1 4%	5 8%	1 100%				1 14%		7 10%		4 6%	3 38%		7 11%
NOT ANSWERED	7	35			2	1	4	5					1	1	5		4	2	2	5
VALID CASES	84	1006		5	16	39	24	62	1	1	3	2	7	7	68		68	8	22	62
NUMBER OF RESPONDENTS	91 100%	1041 100%		5 100%	18 100%	40 100%	28 100%	67 100%	1 100%	1 100%	3 100%	2 100%	8 100%	8 100%	73 100%		72 100%	10 100%	24 100%	67 100%

[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			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q44 #YES	75 88%	836 84%		5 ~100%	13 81%	34 87%	23 92%	55 87%	1 100%	1 100%		3 ~100%	2 100%	6 75%	7 88%	60 87%	61 90%	7 70%	20 95%	55 86%
NO	10 12%	163 16%			3 ~19%	5 13%	2 8%	8 13%						2 25%	1 13%	9 13%	7 10%	3 30%	1 5%	9 14%
NOT ANSWERED	6	41			2	1	3	4							4	4			3	3
VALID CASES	85	1000		5	16	39	25	63	1	1		3	2	8	8	69	68	10	21	64
NUMBER OF RESPONDENTS	91 100%	1041 100%		5 100%	18 100%	40 100%	28 100%	67 100%	1 100%	1 100%		3 100%	2 100%	8 100%	8 100%	73 100%	72 100%	10 100%	24 100%	67 100%

[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			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q45																				
YES	61 21%	774 15%*		5 ~ 11%~	13 21%	20 24%	23 24%	41 19%		1 ~ 33%~		1 ~ 25%~	3 27%~	8 24%~	5 12%~	50 21%	49 18%~	7 54%~	29 15%*	32 36%*
NO	228 79%	4257 85%*	2 100%~	39 89%~	50 79%	63 76%	74 76%	175 81%	2 100%~	2 67%~	2 100%~	3 75%~	8 73%~	26 76%~	35 88%~	186 79%	218 82%~	6 46%~	170 85%*	58 64%*
NOT ANSWERED	16	332		2	4	8	2	4				1			5	5		14	2	
VALID CASES	289	5031	2	44	63	83	97	216	2	3	2	4	11	34	40	236	267	13	199	90
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%

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			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q46 NEVER	5 8%	73 10%	~	~	2 15%	2 10%	1 5%	3 8%	~	~	~	~	1 33%	~	~	4 8%	3 6%	1 14%	2 7%	3 9%
SOMETIMES	10 17%	115 16%	~	2 40%	1 8%	3 15%	4 18%	8 20%	~	~	~	~	1 13%	1 20%	9 18%	8 17%	2 29%	4 14%	6 19%	
USUALLY	14 23%	209 28%	~	1 20%	3 23%	6 30%	4 18%	10 25%	~	~	~	~	1 33%	1 13%	3 60%	10 20%	12 25%	1 14%	7 25%	7 22%
ALWAYS	31 52%	340 46%	~	2 40%	7 54%	9 45%	13 59%	19 47%	1 100%	~	1 100%	1 33%	1 75%	6 20%	1 53%	26 52%	25 43%	3 54%	15 50%	16 50%
#ALWAYS + USUALLY (NET)	45 75%	549 75%	~	3 60%	10 77%	15 75%	17 77%	29 73%	1 100%	~	1 100%	2 67%	7 88%	7 80%	36 73%	37 77%	4 57%	22 79%	23 72%	
TOP BOX SCORE	31 52%	340 46%	~	2 40%	7 54%	9 45%	13 59%	19 47%	1 100%	~	1 100%	1 33%	6 75%	6 20%	26 53%	25 52%	3 43%	15 54%	16 50%	
NOT ANSWERED	1	29					1	1							1	1		1		
VALID CASES	60	737		5	13	20	22	40	1		1	3	8	5	49	48	7	28	32	
NUMBER OF RESPONDENTS	61	766		5	13	20	23	41	1		1	3	8	5	50	49	7	29	32	
	100%	100%		100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q45 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV PAC ILND	AMER ALSK	OTH	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q47 NONE	4 7%	67 9%	~	1 20%~	~	1 5%~	2 10%~	2 5%~	~	~	~	~	1 33%~	1 13%~	~	4 8%~	3 6%~	1 17%~	2 8%~	2 6%~
1 SPECIALIST	42 74%	450 61%*	~	3 60%~	11 85%~	14 74%~	14 70%~	28 72%~	~	1 100%~	~	1 100%~	1 33%~	7 88%~	2 50%~	36 75%~	35 74%~	4 67%~	21 81%~	21 68%~
2	9 16%	144 19%	~	1 20%~	2 15%~	3 16%~	3 15%~	8 21%~	~	~	~	~	1 33%~	~	2 50%~	7 15%~	8 17%~	1 17%~	2 8%~	7 23%~
3	1 2%	48 6%*	~	~	~	~	1 5%~	1 3%~	~	~	~	~	~	~	~	1 2%~	1 2%~	~	~	1 3%~
4		10 1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
5 OR MORE SPECIALISTS	1 2%	23 3%	~	~	~	1 5%~	~	~	~	~	~	~	~	~	~	~	~	~	1 4%~	~
NOT ANSWERED	4	25				1	3	2							1	2	2	1	3	1
VALID CASES	57	741		5	13	19	20	39	1			1	3	8	4	48	47	6	26	31
NUMBER OF RESPONDENTS	61	766		5	13	20	23	41	1			1	3	8	5	50	49	7	29	32
	100%	100%		100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

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

	WORA 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 2%	1 0.2%	~	~	~	1 6%	1 3%	~	~	~	~	~	1 2%	1 2%	~	~	1 3%	~	
03		8 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
04		17 3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
05	2 4%	11 2%	~	1 25%	~	~	1 6%	2 5%	~	~	~	~	~	2 5%	2 5%	~	2 9%	~	
06		29 4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
07	2 4%	71 11%	~	~	~	1 6%	1 6%	1 3%	~	~	~	~	~	2 5%	2 5%	~	1 4%	1 3%	
08	11 21%	106 16%	~	1 25%	2 15%	5 29%	3 17%	5 14%	~	~	1 ~100%	3 ~43%	1 25%	8 18%	7 16%	2 40%	6 26%	5 17%	
09	7 13%	148 22%	~	1 25%	3 23%	2 12%	1 6%	5 14%	~	~	~	1 ~50%	1 14%	1 25%	6 14%	7 16%	~	3 13%	4 14%
BEST SPECIALIST POSSIBLE	29 56%	278 41%	~	1 25%	8 62%	8 47%	12 67%	23 62%	1 ~100%	~	~	1 ~50%	3 43%	2 50%	25 57%	25 57%	3 60%	11 48%	18 62%

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		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR AFR-	AMER IAN	NATV HAW/ ILND	AMER IND/ NATV	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
#8-10 (NET)	47 90%	532 79%*	3 ~ 75%	13 ~ 100%	15 ~ 88%	16 ~ 89%	33 89%~	1 ~ 100%	1 ~ 100%	2 ~ 100%	7 ~ 100%	4 100%	39 89%~	39 89%~	5 100%	20 87%~	27 93%~		
9-10 (NET)	36 69%	426 63%	2 ~ 50%	11 ~ 85%	10 ~ 59%	13 ~ 72%	28 76%~	1 ~ 100%	~	2 ~ 100%	4 57%~	3 75%~	31 70%~	32 73%~	3 60%~	14 61%~	22 76%~		
NOT ANSWERED	1	10				1												1	
VALID CASES	52	672	4	13	17	18	37	1	1	2	7	4	44	44	5	23	29		
NUMBER OF RESPONDENTS	53 100%	682 100%	4 100%	13 100%	18 100%	18 100%	37 100%	1 100%	1 100%	2 100%	7 100%	4 100%	44 100%	44 100%	5 100%	24 100%	29 100%		
MEAN	8.98	8.61	8.00	9.46	8.65	9.17	9.03	10.0	8.00	9.50	9.00	9.25	8.95	8.98	9.20	8.78	9.14		
p stat_(*=Sig @ p<=.05)	.102		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

[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			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC		
Q49 YES	56 19%	1285 26%*		11 ~ 24%~	12 19%	16 19%	17 18%	35 16%*	1 ~ 33%~	1 50%~	1 25%~	4 36%~	7 21%~	12 30%~	40 17%*	53 20%~	1 8%~	38 19%	18 20%	
NO	233 81%	3691 74%*	2 100%~	34 ~ 76%~	51 81%	67 81%	79 82%	183 84%*	2 100%~	2 67%~	1 50%~	3 75%~	7 64%~	27 79%~	28 70%~	198 83%*	216 80%~	12 92%~	161 81%	72 80%
NOT ANSWERED	16	387		1	4	8	3	2			1				3	3		14	2	
VALID CASES	289	4976	2	45	63	83	96	218	2	3	2	4	11	34	40	238	269	13	199	90
NUMBER OF RESPONDENTS	305	5363	2	46	67	91	99	220	2	3	2	5	11	34	40	241	272	13	213	92
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	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			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	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		
Q50 NEVER	1 2%	37 3%	~	~	~	~	7%~	~	~	~	~	25%~	~	9%~	~	2%~	~	3%~	~	
SOMETIMES	10 19%	235 20%	~	3 27%~	4 33%~	1 7%~	2 13%~	8 25%~	~	1 ~100%~	~	~	1 25%~	~	8 21%~	10 20%~	~	7 19%~	3 18%~	
USUALLY	23 43%	343 30%*	~	4 36%~	4 33%~	9 60%~	6 40%~	15 47%~	~	~	~	1 ~100%~	1 25%~	3 43%~	5 45%~	16 42%~	22 44%~	~	14 39%~	9 53%~
ALWAYS	19 36%	547 47%	~	4 36%~	4 33%~	5 33%~	6 40%~	9 28%~	~	~	1 ~100%~	1 25%~	4 57%~	4 36%~	14 37%~	17 34%~	1 100%~	14 39%~	5 29%~	
#ALWAYS + USUALLY (NET)	42 79%	890 77%	~	8 73%~	8 67%~	14 93%~	12 80%~	24 75%~	~	~	1 ~100%~	1 100%~	2 50%~	7 100%~	9 82%~	30 79%~	39 78%~	1 100%~	28 78%~	14 82%~
TOP BOX SCORE	19 36%	547 47%	~	4 36%~	4 33%~	5 33%~	6 40%~	9 28%~	~	~	1 ~100%~	1 25%~	4 57%~	4 36%~	14 37%~	17 34%~	1 100%~	14 39%~	5 29%~	
NOT ANSWERED	3	42				1	2	3						1	2	3		2	1	
VALID CASES	53	1162		11	12	15	15	32		1	1	1	4	7	11	38	50	1	36	17
NUMBER OF RESPONDENTS	56	1204		11	12	16	17	35		1	1	1	4	7	12	40	53	1	38	18
	100%	100%		100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]

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

	WORA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q51 NEVER	21	21	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
SOMETIMES	2 4%	81 7%	~	~	1 8%	1 7%	~	~	1 ~100%	~	1 ~25%	~	1 9%	1 3%	2 4%	~	1 3%	1 6%		
USUALLY	16 31%	289 25%	~	3 27%	3 25%	4 29%	6 40%	13 42%	~	1 ~100%	~	~	3 27%	11 30%	15 31%	~	12 33%	4 25%		
ALWAYS	34 65%	768 66%	~	8 73%	8 67%	9 64%	9 60%	18 58%	~	~	1 ~100%	3 75%	7 100%	25 64%	32 68%	1 65%	23 64%	11 69%		
#ALWAYS + USUALLY (NET)	50 96%	1057 91%	~	11 ~100%	11 92%	13 93%	15 100%	31 100%	~	1 ~100%	1 100%	3 75%	7 100%	36 91%	47 96%	1 97%	35 96%	15 94%		
TOP BOX SCORE	34 65%	768 66%	~	8 73%	8 67%	9 64%	9 60%	18 58%	~	~	1 ~100%	3 75%	7 100%	25 64%	32 68%	1 65%	23 64%	11 69%		
NOT ANSWERED	4	44				2	2	4					1	3	4		2	2		
VALID CASES	52	1160		11	12	14	15	31		1	1	1	4	7	11	37	49	1	36	16
NUMBER OF RESPONDENTS	56	1204		11	12	16	17	35		1	1	1	4	7	12	40	53	1	38	18
	100%	100%		100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA 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	87 31%	1790 36%*	1 50%~	13 30%~	19 30%	27 34%	27 28%	63 29%	~	2 ~100%~	1 25%~	3 27%~	11 32%~	16 41%~	66 28%~	79 30%~	5 42%~	62 32%	25 28%	
NO	198 69%	3138 64%*	1 50%~	31 70%~	45 70%	53 66%	68 72%	152 71%	2 100%~	3 ~100%~	3 ~75%~	8 73%~	23 68%~	23 59%~	169 72%~	187 70%~	7 58%~	133 68%	65 72%	
NOT ANSWERED	20	435		2	3	11	4	5			1			1	6	6	1	18	2	
VALID CASES	285	4928	2	44	64	80	95	215	2	3	2	4	11	34	39	235	266	12	195	90
NUMBER OF RESPONDENTS	305	5363	2	46	67	91	99	220	2	3	2	5	11	34	40	241	272	13	213	92
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	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		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AMR AFR-	AS- IAN	NATV HAW/ ILND	AMR IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
PQ53 NEVER	3 1%	64 1%	~	2%~	2%	1%	~	3 1%	~	~	~	~	~	~	~	3 1%	2 0.8%	1 0.5%	1 0.5%	2 2%
SOMETIMES	18 6%	317 6%	~	9%~	6%	8%	4%	11 5%	~	~	~	25%~	~	15%~	5 8%	12 5%	15 6%	1 9%	13 7%	5 6%
USUALLY	37 13%	629 13%	~	7%~	17%	12%	15%	31 15%	~	~	50%~	~	18%~	9%~	4 11%	33 14%	35 13%	2 18%	26 13%	11 12%
ALWAYS	224 79%	3884 79%	100%~	82%~	75%	79%	81%	168 79%	2 100%	3 100%	1 50%	3 75%	9 82%	25 76%	30 81%	186 79%	212 80%	7 64%	153 79%	71 80%
#ALWAYS + USUALLY (NET)	261 93%	4513 92%	100%~	89%~	92%	91%	96%	199 93%	2 100%	3 100%	2 100%	3 75%	11 100%	28 85%	34 92%	219 94%	247 94%	9 82%	179 93%	82 92%
TOP BOX SCORE	224 79%	3884 79%	100%~	82%~	75%	79%	81%	168 79%	2 100%	3 100%	1 50%	3 75%	9 82%	25 76%	30 81%	186 79%	212 80%	7 64%	153 79%	71 80%
NOT ANSWERED	3	91				2	1	2						1	2	1	2	1	2	1
VALID CASES	282	4894	2	44	64	78	94	213	2	3	2	4	11	33	37	234	264	11	193	89
NUMBER OF RESPONDENTS	285 100%	4985 100%	2 100%	44 100%	64 100%	80 100%	95 100%	215 100%	2 100%	3 100%	2 100%	4 100%	11 100%	34 100%	39 100%	235 100%	266 100%	12 100%	195 100%	90 100%

[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				
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q54 WORST HEALTH PLAN POSSIBLE	1 0.4%	24 0.5%	~	~	~	1%	~	0.5%	~	~	~	~	~	~	1	1	~	0.5%	~		
01	2 0.7%	11 0.2%	~	~	~	1%	1%	0.5%	~	~	~	~	3%	1	2	2	~	1%	~		
02	2 0.7%	31 0.6%	~	~	~	1%	1%	0.9%	~	~	~	~	~	2	2	~	~	2%	~		
03	1 0.4%	38 0.8%	~	~	1%	~	~	0.5%	~	~	~	~	~	1	1	~	~	0.5%	~		
04	1 0.4%	60 1%*	~	~	1%	~	~	0.5%	~	~	~	~	~	1	1	~	~	1%	~		
05	28 10%	233 5%*	~	2 5%~	6 10%	10 12%	10 11%	22 10%	1 ~	33%~	~	2 ~	2 6%~	4 10%~	23 10%~	23 9%~	4 31%~	13 7%*	15 17%*		
06	9 3%	215 4%	~	2 5%~	4 6%	1 1%	2 2%	8 4%	~	~	~	~	3%	1	9	9	~	4%	1%		
07	34 12%	490 10%	~	5 12%~	6 10%	9 11%	14 15%	28 13%	~	~	50%~	~	~	5	4	30	33	1	24 11%		
08	78 27%	940 19%*	~	13 30%~	16 26%	21 26%	28 29%	60 28%	1 50%~	~	~	2 50%~	2 18%~	7 21%~	8 21%~	66 28%~	74 28%~	3 23%~	55 28%	23 26%	
09	32 11%	878 18%*	50%~	1 12%~	5 8%	5 12%	10 12%	11 12%	25 12%	~	~	~	~	3 27%~	4 12%~	6 15%~	25 11%~	29 11%~	2 15%~	18 9%	14 16%
BEST HEALTH PLAN POSSIBLE	96 34%	2014 41%*	50%~	1 37%~	16 37%	23 34%	28 29%	66 31%	1 50%~	2 67%~	1 50%~	2 50%~	4 36%~	13 39%~	17 44%~	75 32%~	90 34%~	3 23%~	72 37%	24 27%	
#8-10 (NET)	206 73%	3832 78%	100%~	2 79%~	34 71%	44 72%	59 71%	67 71%	151 70%	2 100%~	2 67%~	1 50%~	4 100%~	9 82%~	24 73%~	31 79%~	166 71%~	193 73%~	8 62%~	145 75%	61 68%

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			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR AFR-	AMR AS-	NATV HAW/ PAC	AMR IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
9-10 (NET)	128 45%	2892 59%	2 100%	21 49%	28 45%	38 46%	39 41%	91 42%	1 50%	2 67%	1 50%	2 50%	7 64%	17 52%	23 59%	100 43%	119 45%	5 38%	90 46%	38 42%
NOT ANSWERED	21	430		3	5	9	4	5				1	1	1	6	7		19	2	
VALID CASES	284	4933	2	43	62	82	95	215	2	3	2	4	11	33	39	235	265	13	194	90
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%
MEAN	8.16	8.49	9.50	8.51	8.16	8.05	8.06	8.05	9.00	8.33	8.50	9.00	8.45	8.30	8.62	8.06	8.17	7.62	8.29	7.88
p stat_(*=Sig @ p<=.05)		.003*	~	~	.989	.566	.543	.088	~	~	~	~	~	~	~	~	~	~	.100	.097

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q55 YES	142 49%	2010 40%*	1 50%~	18 40%~	35 55%	41 50%	47 49%	104 47%	2 100%~	2 67%~	1 50%~	2 50%~	5 45%~	21 62%~	15 38%~	122 51%	127 47%~	11 85%~	71 36%*	71 78%*
NO	147 51%	2973 60%*	1 50%~	27 60%~	29 45%	41 50%	49 51%	115 53%		1 ~ 33%~	1 50%~	2 50%~	6 55%~	13 38%~	25 62%~	117 49%	143 53%~	2 15%~	127 64%*	20 22%*
NOT ANSWERED	16	380		1	3	9	3	1				1				2	2		15	1
VALID CASES	289	4983	2	45	64	82	96	219	2	3	2	4	11	34	40	239	270	13	198	91
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%

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		
	WORA 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
Q56 NEVER	3 2%	30 1%	~	~	~	5%~	2%~	1%~	~	50%~	~	~	~	~	2%~	2	2	2	1
SOMETIMES	10 7%	187 9%	~	11%~	3%~	10%~	7%~	7%~	~	~	~	~	14%~	8%~	8	2	3	7	
USUALLY	38 27%	459 23%	~	22%~	10	29%~	12	32	~	100%~	~	20%~	19%~	33%~	35	3	14	24	
ALWAYS	89 64%	1338 66%	100%~	67%~	68%~	56%~	65%~	61%~	100%~	50%~	~	100%~	80%~	67%~	81	5	51	38	
#ALWAYS + USUALLY (NET)	127 91%	1797 89%	100%~	89%~	97%~	85%~	91%~	92%~	100%~	50%~	100%~	100%~	100%~	86%~	116	8	65	62	
TOP BOX SCORE	89 64%	1338 66%	100%~	67%~	68%~	56%~	65%~	61%~	100%~	50%~	~	100%~	80%~	67%~	81	5	51	38	
NOT ANSWERED	2	42			1		1	2						2	1	1	1	1	
VALID CASES	140	2014	1	18	34	41	46	102	2	2	1	2	5	21	15	126	10	70	70
NUMBER OF RESPONDENTS	142	2056	1	18	35	41	47	104	2	2	1	2	5	21	15	127	11	71	71
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA 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	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q57 #YES	71 53%	1193 60%	1 100%	9 50%	17 57%	18 46%	26 55%	52 53%	1 50%	1 100%	1 50%	2 40%	12 60%	10 71%	60 51%	63 52%	7 64%	32 49%	39 56%	
NO	64 47%	793 40%		9 50%	13 43%	21 54%	21 45%	47 47%	1 50%	2 100%		1 50%	3 60%	8 40%	4 29%	57 49%	58 48%	4 36%	33 51%	31 44%
NOT ANSWERED	7	70			5	2	5						1	1	5	6		6	1	
VALID CASES	135	1986	1	18	30	39	47	99	2	2	1	2	5	20	14	117	121	11	65	70
NUMBER OF RESPONDENTS	142 100%	2056 100%	1 100%	18 100%	35 100%	41 100%	47 100%	104 100%	2 100%	2 100%	1 100%	2 100%	5 100%	21 100%	15 100%	122 100%	127 100%	11 100%	71 100%	71 100%

[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?

	WORA TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALS	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q57A YES	226 80%	3840 79%	1 50%~	28 62%~	51 82%	68 85%	78 84%	172 81%	2 100%	3 100%	1 50%~	3 75%~	10 100%	26 76%~	33 85%~	186 80%~	213 81%~	11 85%~	152 80%	74 81%
NO	56 20%	1039 21%	1 50%~	17 38%~	11 18%	12 15%	15 16%	41 19%			1 50%~	1 25%~		8 24%~	6 15%~	47 20%~	50 19%~	2 15%~	39 20%	17 19%
NOT ANSWERED	23	484		1	5	11	6	7				1	1		1	8	9		22	1
VALID CASES	282	4879	2	45	62	80	93	213	2	3	2	4	10	34	39	233	263	13	191	91
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%



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?

	WORA 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 ILND	AMER HAW/ IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
Q57B NEVER	43 41%	674 30%*	1 50%~	6 40%~	13 50%~	11 42%~	12 32%~	31 41%~	1 100%~	2 ~100%~	1 ~100%~	2 33%~	6 40%~	5 25%~	37 45%~	40 40%~	3 60%~	30 43%~	13 35%~	
SOMETIMES	21 20%	430 19%	1 50%~	5 33%~	3 12%~	4 15%~	8 22%~	16 21%~	~	~	~	1 ~17%~	2 13%~	4 20%~	17 20%~	20 20%~	1 20%~	14 20%~	7 19%~	
USUALLY	23 22%	488 22%	~	1 7%~	5 19%~	6 23%~	11 30%~	19 25%~	~	~	~	1 ~17%~	1 7%~	7 35%~	15 18%~	21 21%~	1 20%~	13 19%~	10 27%~	
ALWAYS	19 18%	667 30%*	~	3 20%~	5 19%~	5 19%~	6 16%~	9 12%~	~	~	~	2 ~33%~	6 40%~	4 20%~	14 17%~	18 18%~	~	12 17%~	7 19%~	
#ALWAYS + USUALLY (NET)	42 40%	1154 51%*	~	4 27%~	10 38%~	11 42%~	17 46%~	28 37%~	~	~	~	3 ~50%~	7 47%~	11 55%~	29 35%~	39 39%~	1 20%~	25 36%~	17 46%~	
TOP BOX SCORE	19 18%	667 30%*	~	3 20%~	5 19%~	5 19%~	6 16%~	9 12%~	~	~	~	2 ~33%~	6 40%~	4 20%~	14 17%~	18 18%~	~	12 17%~	7 19%~	
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	177	2651	30	39	52	56	140	1	3	3	5	19	20	151	166	8	124	53		
NOT ANSWERED	22	454	1	2	13	6	5			1				7	7		20	2		
VALID CASES	106	2258	2	15	26	26	37	75	1	2	1	6	15	20	83	99	5	69	37	
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%

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?

	WORA TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	WHTA	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALS	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q57C YES	52 19%	1026 21%	8 ~ 19%	11 ~ 18%	12 15%	21 23%	36 17%	1 50%	1 33%	1 ~ 25%	1 10%	8 24%	6 15%	45 19%	47 18%	4 31%	33 17%	19 21%		
NO	229 81%	3791 79%	2 100%	35 81%	51 82%	69 85%	72 77%	177 83%	1 50%	2 67%	1 100%	3 75%	9 90%	26 76%	33 85%	189 81%	218 82%	9 69%	158 83%	71 79%
NOT ANSWERED	24	546	3	5	10	6	7			1	1	1		1	7	7		22	2	
VALID CASES	281	4817	2	43	62	81	93	213	2	3	1	4	10	34	39	234	265	13	191	90
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%

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		
	WORA 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
Q57D #YES	49 94%	865 87%*	8 ~100%	8 73%	12 100%	21 100%	34 94%	1 100%	1 100%		1 100%	1 100%	7 88%	6 100%	42 93%	44 94%	4 100%	31 94%	18 95%
NO	3 6%	124 13%*		3 27%			2 6%						1 13%	3 7%	3 6%		2 6%	1 5%	
NOT ANSWERED		6																	
VALID CASES	52	990	8	11	12	21	36	1	1		1	1	8	6	45	47	4	33	19
NUMBER OF RESPONDENTS	52 100%	996 100%	8 100%	11 100%	12 100%	21 100%	36 100%	1 100%	1 100%		1 100%	1 100%	8 100%	6 100%	45 100%	47 100%	4 100%	33 100%	19 100%

[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			
	WORA 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- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q57E #YES	42 86%	853 87%~		7 ~100%~	5 50%~	11 92%~	19 95%~	30 83%~	1 100%~	1 100%~		1 ~100%~	1 100%~	5 83%~	6 100%~	36 84%~	38 84%~	4 100%~	26 87%~	16 84%~
NO	7 14%	127 13%~			5 ~ 50%~	1 8%~	1 5%~	6 17%~						1 ~ 17%~	7 ~ 16%~	7 16%~			4 ~ 13%~	3 16%~
NOT ANSWERED	3	15		1	1		1							2	2	2			3	
VALID CASES	49	981		7	10	12	20	36	1	1		1	1	6	6	43	45	4	30	19
NUMBER OF RESPONDENTS	52 100%	996 100%		8 100%	11 100%	12 100%	21 100%	36 100%	1 100%	1 100%		1 100%	1 100%	8 100%	6 100%	45 100%	47 100%	4 100%	33 100%	19 100%

[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			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q57F NEVER	1 2%	20 2%	~	~	~	~	5%	3%	~	~	~	~	~	1 2%	1 2%	~	3%	~	
SOMETIMES	5 10%	89 9%	~ 14%	~ 18%	~ 8%	~ 5%	11%	~	~	~	~	~	17%	4 9%	4 9%	1 25%	3 9%	2 11%	
USUALLY	11 22%	244 25%	~ 29%	~ 9%	~ 42%	~ 14%	7 19%	~	~	~	~ 100%	1 38%	3 50%	8 18%	11 23%	~	7 22%	4 21%	
ALWAYS	34 67%	624 64%	~ 57%	~ 73%	~ 50%	~ 76%	24 67%	1 100%	1 100%	1 100%	~ 100%	5 63%	2 33%	32 71%	31 66%	3 75%	21 66%	13 68%	
#ALWAYS + USUALLY (NET)	45 88%	868 89%	~ 86%	~ 82%	~ 92%	~ 90%	31 86%	1 100%	1 100%	1 100%	~ 100%	1 100%	8 83%	5 89%	40 89%	42 89%	3 75%	28 88%	17 89%
TOP BOX SCORE	34 67%	624 64%	~ 57%	~ 73%	~ 50%	~ 76%	24 67%	1 100%	1 100%	1 100%	~ 100%	5 63%	2 33%	32 71%	31 66%	3 75%	21 66%	13 68%	
NOT ANSWERED	1	20	1														1		
VALID CASES	51	976	7	11	12	21	36	1	1	1	1	8	6	45	47	4	32	19	
NUMBER OF RESPONDENTS	52	996	8	11	12	21	36	1	1	1	1	8	6	45	47	4	33	19	
	100%	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				
	WORA 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	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q57G NEVER	1 2%	39 4%	~	~	1 9%	~	~	1 3%	~	~	~	~	~	~	~	1 2%	1 2%	~	~	1 5%
SOMETIMES	6 12%	87 9%	~	~	3 27%	2 17%	1 5%	5 14%	~	~	~	~	~	~	1 17%	5 11%	5 11%	1 25%	3 9%	3 16%
USUALLY	17 33%	248 25%	~	3 43%	3 27%	6 50%	5 24%	11 31%	~	~	~	~	1 100%	4 50%	4 67%	13 29%	17 36%	~	12 38%	5 26%
ALWAYS	27 53%	607 62%	~	4 57%	4 36%	4 33%	15 71%	19 53%	1 100%	1 100%	~	1 100%	4 50%	4 17%	26 58%	24 51%	3 75%	17 53%	10 53%	
#ALWAYS + USUALLY (NET)	44 86%	855 87%	~	7 100%	7 64%	10 83%	20 95%	30 83%	1 100%	1 100%	~	1 100%	8 100%	8 83%	39 87%	41 87%	3 75%	29 91%	15 79%	
TOP BOX SCORE	27 53%	607 62%	~	4 57%	4 36%	4 33%	15 71%	19 53%	1 100%	1 100%	~	1 100%	4 50%	4 17%	26 58%	24 51%	3 75%	17 53%	10 53%	
NOT ANSWERED	1	16	~	1	~	~	~	~	~	~	~	~	~	~	~	~	~	~	1	~
VALID CASES	51	980	~	7	11	12	21	36	1	1	~	1	1	8	6	45	47	4	32	19
NUMBER OF RESPONDENTS	52	996	~	8	11	12	21	36	1	1	~	1	1	8	6	45	47	4	33	19
	100%	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			
	WORA 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	
Q57H NEVER	18	2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	4	71	~	~	2	1	1	4	~	~	~	~	~	~	1	3	3	1	2	2
	8%	7%	~	~	18%	8%	5%	11%	~	~	~	~	~	~	17%	7%	6%	25%	6%	11%
USUALLY	12	202	~	3	1	4	4	6	~	~	~	1	3	4	8	12	~	~	9	3
	24%	21%	~	43%	9%	33%	19%	17%	~	~	~	100%	38%	67%	18%	26%	~	~	28%	16%
ALWAYS	35	690	~	4	8	7	16	26	1	1	1	1	5	1	34	32	3	21	14	
	69%	70%	~	57%	73%	58%	76%	72%	100%	100%	~	100%	63%	17%	76%	68%	75%	66%	74%	
#ALWAYS + USUALLY (NET)	47	892	~	7	9	11	20	32	1	1	1	1	8	5	42	44	3	30	17	
	92%	91%	~	100%	82%	92%	95%	89%	100%	100%	~	100%	100%	83%	93%	94%	75%	94%	89%	
TOP BOX SCORE	35	690	~	4	8	7	16	26	1	1	1	1	5	1	34	32	3	21	14	
	69%	70%	~	57%	73%	58%	76%	72%	100%	100%	~	100%	63%	17%	76%	68%	75%	66%	74%	
NOT ANSWERED	1	16	~	1	~	~	~	~	~	~	~	~	~	~	~	~	~	~	1	
VALID CASES	51	980	~	7	11	12	21	36	1	1	1	1	8	6	45	47	4	32	19	
NUMBER OF RESPONDENTS	52	996	~	8	11	12	21	36	1	1	1	1	8	6	45	47	4	33	19	
	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			
	WORA 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	GOOD & POOR	NO CCC	CCC
Q58																				
EXCELLENT	101 35%	1951 39%	1 50%~	23 53%~	23 36%	28 35%	26 27%*	74 34%	1 ~ 33%~	1 50%~	2 40%~	5 45%~	14 41%~	14 35%~	85 35%~	101 37%~		91 ~ 47%*	10 11%*	
VERY GOOD	114 40%	1732 35%		15 ~ 35%~	24 37%	29 36%	46 48%*	96 44%*	1 50%~	1 33%~			3 ~ 27%~	10 29%~	18 45%~	94 39%~	114 42%~		76 ~ 39%	38 41%
GOOD	57 20%	973 20%	1 50%~	4 9%~	14 22%	21 26%	17 18%	40 18%	1 ~ 33%~	1 50%~	2 40%~	3 27%~	6 18%~	7 18%~	49 20%~	57 21%~		26 ~ 13%*	31 34%*	
FAIR	11 4%	308 6%*		1 ~ 2%~	2 3%	2 2%	6 6%	6 3%			1 ~ 20%~		4 ~ 12%~	1 3%~	10 4%~		11 ~ 85%~		11 ~ 12%*	
POOR	2 0.7%	13 0.3%			1 2%	1 1%		1 ~ 0.5%	1 50%~						2 ~ 0.8%~		2 ~ 15%~		2 ~ 2%~	
#EXCELLENT + VERY GOOD + GOOD (NET)	272 95%	4656 94%	2 100%~	42 98%~	61 95%	78 96%	89 94%	210 97%	1 50%~	3 100%~	2 100%~	4 80%~	11 100%~	30 88%~	39 98%~	228 95%~	272 100%~		193 ~ 100%~	79 86%*
NOT ANSWERED	20	386		3	3	10	4	3							1			20		
VALID CASES	285	4977	2	43	64	81	95	217	2	3	2	5	11	34	40	240	272	13	193	92
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%



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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q59 EXCELLENT	122 43%	2270 46%	1 50%~	31 74%~	30 47%	28 35%	32 34%*	91 42%	2 ~	1 67%~	1 50%~	6 ~	17 55%~	17 50%~	104 43%~	44%~	120 44%~	2 17%~	105 54%*	17 19%*
VERY GOOD	82 29%	1311 26%	7 ~	24 17%~	19 37%	32 23%	34%*	65 30%	1 50%~	1 ~	1 50%~	1 20%~	4 36%~	8 24%~	11 28%~	69 29%~	78 29%~	4 33%~	60 31%	22 24%
GOOD	53 19%	923 19%	1 50%~	3 7%~	9 14%	20 25%	20 21%	40 19%	1 ~	1 33%~	2 ~	1 40%~	1 9%~	7 21%~	9 23%~	42 18%~	52 19%~	1 8%~	24 12%*	29 32%*
FAIR	20 7%	400 8%	1 ~	1 2%~	10 2%*	8 12%	8%*	15 7%	1 50%~	~	1 ~	1 20%~	1 ~	1 3%~	2 5%~	18 8%~	16 6%~	4 33%~	4 2%*	16 18%*
POOR	7 2%	72 1%	~	~	~	4 5%	3 3%	5 2%	~	~	~	1 20%~	1 ~	1 3%~	1 3%~	6 3%~	6 2%~	1 8%~	~	7 8%*
#EXCELLENT + VERY GOOD + GOOD (NET)	257 90%	4503 91%	2 100%~	41 98%~	63 98%*	67 83%*	84 88%	196 91%	1 50%~	3 100%~	2 100%~	3 60%~	11 100%~	32 94%~	37 93%~	215 90%~	250 92%~	7 58%~	189 98%*	68 75%*
NOT ANSWERED	21	387	4	3	10	4	4	4							2		1	20	1	
VALID CASES	284	4976	2	42	64	81	95	216	2	3	2	5	11	34	40	239	272	12	193	91
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA 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	
Q60 YES	93 33%	1132 23%*		6 ~ 14%~	20 31%	34 42%*	33 35%	75 35%	1 50%~	1 33%~		2 ~ 40%~	3 27%~	10 29%~	12 30%~	80 33%~	82 30%~	11 85%~	19 10%*	74 80%*
NO	192 67%	3829 77%*	2 100%~	37 ~ 86%~	44 69%	47 58%*	62 65%	142 65%	1 50%~	2 67%~	2 100%~	3 60%~	8 73%~	24 71%~	28 70%~	160 67%~	190 70%~	2 15%~	174 90%*	18 20%*
NOT ANSWERED	20	401		3	3	10	4	3								1			20	
VALID CASES	285	4962	2	43	64	81	95	217	2	3	2	5	11	34	40	240	272	13	193	92
NUMBER OF RESPONDENTS	305	5363	2	46	67	91	99	220	2	3	2	5	11	34	40	241	272	13	213	92
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA 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	
Q61 YES	71	857		5	15	30	21	55	1	1		2	3	8	9	61	61	10	3	68
	78%	79%	~	83%~	75%~	94%~	64%~	74%~	100%~	100%~	~	100%~	100%~	89%~	75%~	78%~	76%~	91%~	17%~	93%~
NO	20	234		1	5	2	12	19						1	3	17	19	1	15	5
	22%	21%	~	17%~	25%~	6%~	36%~	26%~	~	~	~	~	~	11%~	25%~	22%~	24%~	9%~	83%~	7%~
NOT ANSWERED	2	30				2		1						1		2	2		1	1
VALID CASES	91	1091		6	20	32	33	74	1	1		2	3	9	12	78	80	11	18	73
NUMBER OF RESPONDENTS	93	1121		6	20	34	33	75	1	1		2	3	10	12	80	82	11	19	74
	100%	100%		100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q60 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER PAC ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q62 YES	67	763		4	14	29	20	52	1	1		2	3	7	8	58	57	10	67	
	96%	90%*	~ 80%~	93%~	100%~	95%~	96%~	100%~	100%~	~ 100%~	100%~	100%~	88%~	100%~	95%~	95%~	100%~	~ 99%~		
NO	3	83		1	1		1	2						1	3	3		2	1	
	4%	10%*	~ 20%~	7%~		5%~	4%~	~	~	~	~	~	13%~	~	5%~	5%~	~ 100%~	1%~		
NOT ANSWERED	1	20				1	1									1		1		
VALID CASES	70	846		5	15	29	21	54	1	1		2	3	8	8	61	60	10	2	68
NUMBER OF RESPONDENTS	71	866		5	15	30	21	55	1	1		2	3	8	9	61	61	10	3	68
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q60 = YES AND Q61 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL-	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q63 YES	52 18%	727 15%		3 ~ 7%	11 17%	18 22%	20 21%	40 19%	1 50%	1 33%		2 ~ 40%	1 9%	7 21%	6 15%	45 19%	43 16%	9 69%	5 3%*	47 52%*
NO	232 82%	4197 85%	2 100%	40 93%	53 83%	62 78%	75 79%	176 81%	1 50%	2 67%	2 100%	3 60%	10 91%	27 79%	34 85%	194 81%	227 84%	4 31%	188 97%*	44 48%*
NOT ANSWERED	21	439		3	3	11	4	4							2	2		20	1	
VALID CASES	284	4924	2	43	64	80	95	216	2	3	2	5	11	34	40	239	270	13	193	91
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA 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
Q64 YES	41 80%	620 86%	2 ~ 67%	11 ~ 100%	13 ~ 76%	15 ~ 75%	33 85%	1 100%	1 100%		1 50%	1 100%	4 57%	5 83%	35 80%	34 81%	7 78%	1 20%	40 87%
NO	10 20%	103 14%	1 ~ 33%		4 ~ 24%	5 25%	6 15%				1 50%		3 43%	1 17%	9 20%	8 19%	2 22%	4 80%	6 13%
NOT ANSWERED	1	18			1		1								1	1			1
VALID CASES	51	723	3	11	17	20	39	1	1		2	1	7	6	44	42	9	5	46
NUMBER OF RESPONDENTS	52 100%	741 100%	3 100%	11 100%	18 100%	20 100%	40 100%	1 100%	1 100%		2 100%	1 100%	7 100%	6 100%	45 100%	43 100%	9 100%	5 100%	47 100%

[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		
	WORA 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
Q65 YES	39	581		2	11	13	13	31	1	1		1	1	4	5	33	32	7	39
	98%	97%	~100%	~100%	~100%	~93%	97%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~97%	97%	~100%	~98%	
NO	1	18					1	1							1	1		1	
	2%	3%	~	~	~	~	3%	~	~	~	~	~	~	~	3%	3%	~	2%	
NOT ANSWERED	1	12					1	1							1	1		1	
VALID CASES	40	600		2	11	13	14	32	1	1		1	1	4	5	34	33	7	40
NUMBER OF RESPONDENTS	41	612		2	11	13	15	33	1	1		1	1	4	5	35	34	7	40
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q63 = YES AND Q64 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q66 YES	37 13%	575 12%	~	4 9%	6 10%	8 10%	19 20%*	26 12%	1 50%~	~	~	1 25%~	1 9%~	7 21%~	4 10%~	32 14%~	27 10%~	10 77%~	2 1%*	35 39%*
NO	244 87%	4353 88%	100%~	2 91%~	39 90%	57 90%	71 80%*	190 88%	1 50%~	3 100%~	1 100%~	3 75%~	10 91%~	26 79%~	36 90%~	204 86%~	240 90%~	3 23%~	189 99%*	55 61%*
NOT ANSWERED	24	435		3	4	12	5	4			1	1		1	5	5		22	2	
VALID CASES	281	4928	2	43	63	79	94	216	2	3	1	4	11	33	40	236	267	13	191	90
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%



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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA 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- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q67 YES	34 92%	448 80%~	2 ~ 50%~	6 100%~	8 100%~	18 95%~	26 100%~	1 100%~	~	~	~ 100%~	1 71%~	5 100%~	4 100%~	29 91%~	25 93%~	9 90%~	34 ~ 97%~	
NO	3 8%	112 20%~	2 ~ 50%~	~	~	1 5%~	~	~	~	1 ~ 100%~	~	2 29%~	~	3 9%~	2 7%~	1 10%~	2 100%~	1 3%~	
NOT ANSWERED		21																	
VALID CASES	37	560	4	6	8	19	26	1		1	1	7	4	32	27	10	2	35	
NUMBER OF RESPONDENTS	37 100%	581 100%	4 100%	6 100%	8 100%	19 100%	26 100%	1 100%		1 100%	1 100%	7 100%	4 100%	32 100%	27 100%	10 100%	2 100%	35 100%	

[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			
	WORA 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	34	439	2	6	8	18	26	1			1	5	4	29	25	9	34	
	100%	97%	~100%	~100%	~100%	~100%	~100%	~100%	~	~	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~
NO		14																
		3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		3																
VALID CASES	34	453	2	6	8	18	26	1			1	5	4	29	25	9	34	
NUMBER OF RESPONDENTS	34	456	2	6	8	18	26	1			1	5	4	29	25	9	34	
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q66 = YES AND Q67 = YES]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA 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	
Q69 YES	30 11%	459 9%		4 ~ 9%	8 13%	7 9%	11 12%	19 9%	1 50%~				2 18%~	7 21%~	6 15%~	23 10%~	25 9%~	4 31%~	11 6%*	19 21%*
NO	254 89%	4495 91%	2 100%~	39 91%~	55 87%	74 91%	84 88%	198 91%	1 50%~	3 100%~	2 100%~	4 100%~	9 82%~	27 79%~	34 85%~	216 90%~	245 91%~	9 69%~	182 94%*	72 79%*
NOT ANSWERED	21	409		3	4	10	4	3				1				2	2	20	1	
VALID CASES	284	4954	2	43	63	81	95	217	2	3	2	4	11	34	40	239	270	13	193	91
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA 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- OHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q70 YES	17 63%	314 71%~	1 ~ 25%~	3 38%~	7 100%~	6 75%~	11 65%~	1 100%~	~	~	~	1 50%~	3 50%~	5 83%~	11 55%~	13 59%~	4 100%~	17 ~ 94%~	
NO	10 37%	129 29%~	3 ~ 75%~	5 63%~	2 ~ 25%~	2 35%~	6 ~	~	~	~	1 ~ 50%~	3 50%~	1 17%~	9 45%~	9 41%~	9 ~ 100%~	1 6%~		
NOT ANSWERED	3	20				3	2					1		3	3		2	1	
VALID CASES	27	442	4	8	7	8	17	1			2	6	6	20	22	4	9	18	
NUMBER OF RESPONDENTS	30 100%	462 100%	4 100%	8 100%	7 100%	11 100%	19 100%	1 100%			2 100%	7 100%	6 100%	23 100%	25 100%	4 100%	11 100%	19 100%	

[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		
	WORA 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
Q71 YES	17	260	1	3	7	6	11	1				1	3	5	11	13	4	17
	100%	95%	~100%	~100%	~100%	~100%	~100%	~100%	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%	~100%
NO		14	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		7																
VALID CASES	17	274	1	3	7	6	11	1				1	3	5	11	13	4	17
NUMBER OF RESPONDENTS	17	281	1	3	7	6	11	1				1	3	5	11	13	4	17
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q69 = YES AND Q70 = YES]

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

	WORA TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-	AS-	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q72 YES	45 16%	722 15%	~	1 2%~	5 8%*	19 23%*	20 21%	35 16%	1 50%~	~	~	2 50%~	2 18%~	4 12%~	8 20%~	37 15%~	41 15%~	4 31%~	5 3%*	40 44%*
NO	240 84%	4209 85%	100%~	98%~	92%*	77%*	79%	183 84%	1 50%~	3 100%~	2 100%~	2 50%~	9 82%~	30 88%~	32 80%~	203 85%~	230 85%~	9 69%~	189 97%*	51 56%*
NOT ANSWERED	20	432		3	3	10	4	2				1			1	1		19	1	
VALID CASES	285	4931	2	43	64	81	95	218	2	3	2	4	11	34	40	240	271	13	194	91
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q73 YES	39	612	~	~	4	18	17	31	1	~	~	1	2	3	8	31	35	4	39	
	95%	90%	~	~	100%	95%	94%	97%	100%	~	~	50%	100%	100%	100%	94%	95%	100%	~	100%
NO	2	68	~	~	~	1	1	1	~	~	~	1	~	~	2	2	2	~	2	
	5%	10%	~	~	~	5%	6%	3%	~	~	~	50%	~	~	6%	5%	~	~	100%	~
NOT ANSWERED	4	39		1	1		2	3					1		4	4		3	1	
VALID CASES	41	680			4	19	18	32	1			2	2	3	8	33	37	4	2	39
NUMBER OF RESPONDENTS	45	719		1	5	19	20	35	1			2	2	4	8	37	41	4	5	40
	100%	100%			100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q72 = YES]

NQ74 WHAT IS YOUR CHILD'S AGE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA 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 & POOR	NO CCC	CCC
NQ74 LESS THAN 1 YEAR OLD	2 0.7%	27 0.5%	2 100%	~	~	~	~	2 0.9%	~	~	~	~	~	~	~	2 0.8%	2 0.7%	2 0.9%	~	~
1 TO 3 YEARS OLD	46 15%	890 17%	~	46 ~100%	~	~	~	30 14%	~	~	1 50%	1 26%	1 9%	9 26%	3 8%	39 16%	42 15%	1 8%	41 19%*	5 5%*
4 TO 7 YEARS OLD	67 22%	1394 26%	~	~	67 ~100%	~	~	49 22%	~	~	1 50%	1 20%	4 36%	9 26%	9 23%	54 22%	61 22%	3 23%	49 23%	18 20%
8 TO 12 YEARS OLD	91 30%	1563 29%	~	~	~	91 ~100%	~	58 26%*	1 50%	2 67%	~	1 20%	1 9%	12 35%	18 45%	62 26%*	78 29%	3 23%	53 25%*	38 41%*
13 OR OLDER	99 32%	1489 28%	~	~	~	99 ~100%	~	81 37%*	1 50%	1 33%	~	3 60%	5 45%	4 12%	10 25%	84 35%	89 33%	6 46%	68 32%	31 34%
VALID CASES	305	5363	2	46	67	91	99	220	2	3	2	5	11	34	40	241	272	13	213	92
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%

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



NQ75 IS YOUR CHILD MALE OR FEMALE?

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
		<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 & POOR	NO CCC	CCC		
NQ75	WORA TOT CHLD																				
MALE	OHP TOT CHLD	1	22	35	50	52	114	2	1	1	4	8	17	23	128	147	6	111	49		
		52%	51%	50%~	48%~	52%	55%	53%	52%	100%~	33%~	50%~	80%~	73%~	50%~	57%~	53%	54%~	46%~	52%	53%
FEMALE		1	24	32	41	47	106		2	1	1	3	17	17	113	125	7	102	43		
		48%	49%	50%~	52%~	48%	45%	47%	48%	~	67%~	50%~	20%~	27%~	50%~	43%~	47%	46%~	54%~	48%	47%
VALID CASES		2	46	67	91	99	220	2	3	2	5	11	34	40	241	272	13	213	92		
NUMBER OF RESPONDENTS		305	5363	2	46	67	91	99	220	2	3	2	5	11	34	40	241	272	13	213	92
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

	WORA TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC			
Q76 HISPANIC OR LATINO	40 14%	2091 42%*	~	3 7%~	9 14%	18 22%*	10 11%	18 8%*	~	~	~	~	9 82%~	6 18%~	40 100%~	~	39 15%~	1 8%~	28 15%	12 13%	
NOT HISPANIC OR LATINO	241 86%	2832 58%*	100%~	2 93%~	39 86%	54 78%*	62 89%	84 92%*	2 100%~	3 100%~	2 100%~	5 100%~	2 18%~	28 82%~	~	241 100%~	~	228 85%~	12 92%~	162 85%	79 87%
NOT ANSWERED	24	440		4	4	11	5	5									5		23	1	
VALID CASES	281	4923	2	42	63	80	94	215	2	3	2	5	11	34	40	241	267	13	190	91	
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%	

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

		AGE						RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER PAC ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q77.1	WORA TOT CHLD																			
YES	254 83%	3570 67%*	2 100%~	39 85%~	58 87%	70 77%	85 86%	220 100%~	~	~	~	~	~	34 ~100%~	24 60%~	225 93%*	240 88%~	11 85%~	173 81%	81 88%
NO	51 17%	1793 33%*	~	15%~	13%~	23%~	14%~	2 ~100%~	3 ~100%~	2 ~100%~	5 ~100%~	11 ~100%~	~	16 40%~	16 7%*	32 12%~	2 15%~	40 19%	11 12%	
VALID CASES	305	5363	2	46	67	91	99	220	2	3	2	5	11	34	40	241	272	13	213	92
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%

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

		AGE						RACE						ETHNIC-ITY	HEALTH STATUS		CCC SCREENER			
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV ILND	AMER ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC			
Q77.2	WORA TOT CHLD																			
YES	4 1%	230 4%*	1 ~	2 2%	1 ~	1 1%	2 ~100%	~	~	~	~	2 6%	1 2%	3 1%	3 1%	1 0.9%	2 2%			
NO	301 99%	5133 96%*	2 100%	45 98%	67 100%	89 98%	98 99%	220 100%	3 ~100%	2 100%	5 100%	11 100%	32 94%	39 98%	238 99%	269 99%	12 92%	211 99%	90 98%	
VALID CASES	305	5363	2	46	67	91	99	220	2	3	2	5	11	34	40	241	272	13	213	92
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%

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

		AGE						RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC				
Q77.3 YES	WORA TOT CHLD	10 3%	201 4%	~	~	4 6%	4 4%	2 2%	~	~	~	~	~	7 21%	~	10 4%*	10 4%~	~	8 4%	2 2%	
NO	OHP TOT CHLD	295 97%	5162 96%	2 100%	46 100%	63 94%	87 96%	97 98%	220 100%	2 100%	~	2 100%	5 100%	11 100%	27 79%	40 100%	231 96%	262 96%	13 100%	205 96%	90 98%
VALID CASES		305	5363	2	46	67	91	99	220	2	3	2	5	11	34	40	241	272	13	213	92
NUMBER OF RESPONDENTS		305	5363	2	46	67	91	99	220	2	3	2	5	11	34	40	241	272	13	213	92
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE						RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q77.4	WORA TOT CHLD																		
YES	5 2%	82 2%	2 ~	1 4%~	1 1%	1 1%	~	2 ~100%~	3 ~	5 ~	3 9%~	5 ~	2 2%*	4 1%~	1 8%~	4 2%	1 1%		
NO	300 98%	5281 98%	2 100%~	44 96%~	66 99%	90 99%	220 100%~	2 100%~	3 100%~	5 ~100%~	11 100%~	31 91%~	40 100%~	236 98%*	268 99%~	12 92%~	209 98%	91 99%	
VALID CASES	305	5363	2	46	67	91	220	2	3	2	5	11	34	40	241	272	13	213	92
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%

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

		AGE						RACE						ETHNICITY	HEALTH STATUS	CCC SCREENER			
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q77.5	WORA TOT CHLD																		
YES	27 9%	275 5%*	7 ~ 15%~	6 9%	8 9%	6 6%	~	~	~	5 ~100%~	22 ~ 65%~	4 10%~	23 10%	22 8%~	5 38%~	18 8%	9 10%		
NO	278 91%	5088 95%*	2 100%~	39 85%~	61 91%	83 94%	220 100%~	2 100%~	3 100%~	2 100%~	11 ~100%~	12 35%~	36 90%~	218 90%	250 92%~	8 62%~	195 92%	83 90%	
VALID CASES	305	5363	2	46	67	91	220	2	3	2	5	11	34	40	241	272	13	213	92
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
Q77.6	WORA TOT CHLD																			
YES	17 6%	519 10%*	3 ~7%	5 7%	4 4%	5 5%	~	~	~	~	11 ~100%	6 18%	12 30%	5 2%*	17 6%~	~	12 6%	5 5%		
NO	288 94%	4844 90%*	2 100%~	43 93%~	62 93%	87 96%	94 95%	220 100%	2 100%	3 100%	2 100%	5 100%	~	28 82%~	28 70%~	236 98%*	255 94%~	13 100%~	201 94%	87 95%
VALID CASES	305	5363	2	46	67	91	99	220	2	3	2	5	11	34	40	241	272	13	213	92
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%



Q78 WHAT IS YOUR AGE?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV HAW/IND/PAC	AMER ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC	
Q78 UNDER 18	16 6%	223 5%	~	5%~	2%*	9%	6%	15 7%*	~	33%~	~	~	~	~	~	3 8%~	13 5%~	16 6%~	~	11 6%	5 5%
18 TO 24	11 4%	229 5%	~	16%~	6%	~	~	4 2%*	~	~	~	~	~	7 21%~	~	11 5%~	10 4%~	1 8%~	7 4%	4 4%	
25 TO 34	95 33%	1610 33%	100%~	52%~	50%*	39%	6%*	71 32%	~	33%~	1 50%~	1 ~	4 36%~	13 38%~	17 44%~	76 32%~	88 33%~	6 46%~	67 34%	28 31%	
35 TO 44	85 30%	1842 37%*	~	18%~	29%	25%	38 40%*	68 31%	~	~	1 50%~	2 40%~	5 45%~	6 18%~	10 26%~	72 30%~	81 30%~	3 23%~	61 31%	24 26%	
45 TO 54	44 15%	718 15%	~	2%~	6%*	16%	26 28%*	32 15%	2 100%~	1 33%~	~	2 40%~	~	6 18%~	4 10%~	40 17%~	42 16%~	2 15%~	32 16%	12 13%	
55 TO 64	26 9%	213 4%*	~	5%~	5%	8%	15 16%*	22 10%	~	~	~	1 20%~	2 18%~	~	4 10%~	22 9%~	26 10%~	~	11 6%*	15 16%*	
65 TO 74	6 2%	77 2%	~	2%~	2%	3%	2 2%	5 2%	~	~	~	~	~	1 3%~	1 3%~	4 2%~	6 2%~	~	4 2%	2 2%	
75 OR OLDER	3 1%	15 0.3%	~	~	2%	1%	1 1%	2 0.9%	~	~	~	~	~	1 3%~	~	2 ~0.8%~	1 ~0.4%~	1 8%~	2 1%	1 1%	
NOT ANSWERED	19	436		2	1	11	5	1							1	1	2		18	1	
VALID CASES	286	4927	2	44	66	80	94	219	2	3	2	5	11	34	39	240	270	13	195	91	
NUMBER OF RESPONDENTS	305	5363	2	46	67	91	99	220	2	3	2	5	11	34	40	241	272	13	213	92	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q79 ARE YOU MALE OR FEMALE?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA 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	
Q79																				
MALE	48 17%	657 13%		7 ~ 16%	7 ~ 11%	15 19%	19 20%	34 16%		1 ~ 33%		2 ~ 40%		8 ~ 24%	3 8%	43 18%	47 18%	1 8%	37 19%	11 12%
FEMALE	236 83%	4307 87%	2 100%	37 ~ 84%	59 ~ 89%	63 81%	75 80%	183 84%	2 100%	2 ~ 67%	2 ~ 100%	3 ~ 60%	11 ~ 100%	26 ~ 76%	36 92%	195 82%	221 82%	12 92%	157 81%	79 88%
NOT ANSWERED	21	399		2	1	13	5	3							1	3	4		19	2
VALID CASES	284	4964	2	44	66	78	94	217	2	3	2	5	11	34	39	238	268	13	194	90
NUMBER OF RESPONDENTS	305 100%	5363 100%	2 100%	46 100%	67 100%	91 100%	99 100%	220 100%	2 100%	3 100%	2 100%	5 100%	11 100%	34 100%	40 100%	241 100%	272 100%	13 100%	213 100%	92 100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC	
Q80																					
8TH GRADE OR LESS	176%	61813%*	~	25%~	23%	79%	66%	94%	150%~	133%~	~	120%~	218%~	~	718%~	94%	166%~	18%	147%	33%	
SOME HIGH SCHOOL BUT DID NOT GRADUATE	228%	62413%*	~	49%~	914%	45%	55%	157%	~	~	~	~	218%~	412%~	410%~	188%	207%~	215%~	168%	67%	
HIGH SCHOOL GRADUATE OR GED	11039%	138528%*	50%~	124%~	2132%	3139%	3335%	8238%	150%~	133%~	2100%~	~	655%~	1441%~	1743%~	9239%~	10539%~	431%~	7438%	3640%	
SOME COLLEGE OR 2-YEAR DEGREE	10437%	155532%	50%~	1920%~	2639%	2835%	4043%	8841%*	~	133%~	~	120%~	~	1338%~	1128%~	9138%~	9837%~	538%~	6835%	3640%	
4-YEAR COLLEGE GRADUATE	207%	47010%	~	49%~	46%	79%	55%	167%	~	~	~	~	240%~	1~	13%~	167%~	187%~	18%	158%	56%	
MORE THAN 4-YEAR COLLEGE DEGREE	114%	2465%	~	12%~	46%	23%	44%	73%	~	~	~	~	120%~	19%~	26%~	115%~	114%~	~	84%	33%	
NOT ANSWERED	21	466		2	1	12	6	3								4	4		18	3	
VALID CASES	284	4897		2	44	66	79	93	217	2	3	2	5	11	34	40	237	268	13	195	89
NUMBER OF RESPONDENTS	305	5363		2	46	67	91	99	220	2	3	2	5	11	34	40	241	272	13	213	92
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q81 HOW ARE YOU RELATED TO THE CHILD?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV ILND	AMER PAC ALSK	OTH	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q81																					
MOTHER OR FATHER	249	4614	2	38	60	71	78	189	2	3	2	3	11	30	37	207	235	12	172	77	
	89%	94%*	100%	86%~	94%	91%	84%	88%	100%	100%	100%	75%~	100%	88%	92%	88%	88%	92%	90%	87%	
GRANDPARENT	18	165		3	3	5	7	17						1	1	17	17	1	11	7	
	6%	3%*	~	7%~	5%	6%	8%	8%*	~	~	~	~	~	3%~	2%~	7%~	6%~	8%~	6%	8%	
AUNT OR UNCLE	2	19					2	1						1		2	2		2		
	0.7%	0.4%	~	~	~	~	2%~	0.5%	~	~	~	~	~	3%~	~	0.8%~	0.8%~	~	1%~	~	
OLDER BROTHER OR SISTER	1	8					1	1								1	1		1		
	0.4%	0.2%	~	~	~	~	1%~	0.5%~	~	~	~	~	~	~	~	0.4%~	0.4%~	~	0.5%~	~	
OTHER RELATIVE	1	3		1											1		1		1		
	0.4%	0.1%	~	2%~	~	~	~	~	~	~	~	~	~	~	2%~	~	0.4%~	~	0.5%~	~	
LEGAL GUARDIAN	5	60		1		1	3	2				1		2	1	4	5		3	2	
	2%	1%	~	2%~	~	1%	3%	0.9%	~	~	~	25%~	~	6%~	2%~	2%~	2%~	~	2%	2%	
SOMEONE ELSE	5	41		1	1	1	2	5								5	5		2	3	
	2%	0.8%	~	2%~	2%	1%	2%	2%~	~	~	~	~	~	~	~	2%~	2%~	~	1%	3%	
NOT ANSWERED	24	454		2	3	13	6	5				1				5	6		21	3	
VALID CASES	281	4909		2	44	64	78	93	215	2	3	2	4	11	34	40	236	266	13	192	89
NUMBER OF RESPONDENTS	305	5363		2	46	67	91	99	220	2	3	2	5	11	34	40	241	272	13	213	92
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA 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	
Q82 YES	5 2%	96 3%	~	~	1 2%	3 5%	1 1%	5 3%~	~	~	~	~	~	~	~	5 3%~	5 3%~	2 1%	3 5%	
NO	204 98%	3230 97%	~100%~	31 100%~	50 98%	54 95%	69 99%	163 97%~	2 100%~	2 100%~	2 100%~	4 100%~	8 100%~	17 100%~	27 100%~	172 97%~	194 97%~	7 100%~	142 99%	62 95%
NOT ANSWERED	3	38				2	1			1						2	2	2	1	
VALID CASES	209	3326		31	51	57	70	168	2	2	2	4	8	17	27	177	199	7	144	65
NUMBER OF RESPONDENTS	212 100%	3364 100%		31 100%	51 100%	59 100%	71 100%	168 100%	2 100%	3 100%	2 100%	4 100%	8 100%	17 100%	27 100%	179 100%	201 100%	7 100%	146 100%	66 100%

[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			
		<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- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	NO CCC	CCC	
Q83.1	WORA TOT CHLD	OHP TOT CHLD															
YES	2 40%	45 50%	~	~100%	~	~100%	2 40%	~	~	~	~	~	2 40%	2 40%	~	1 33%	1 33%
NO	3 60%	44 50%	~	~	~100%	~	3 60%	~	~	~	~	~	3 60%	3 60%	~	1 50%	2 67%
VALID CASES	5	89		1	3	1	5						5	5		2	3
NUMBER OF RESPONDENTS	5 100%	89 100%		1 100%	3 100%	1 100%	5 100%						5 100%	5 100%		2 100%	3 100%

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

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

		AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- AMR	PAC IAN	NATV ILND	AMR ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC CCC
Q83.2	WORA TOT CHLD															
YES	OHP TOT CHLD	28 31%	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO		5 100%	61 69%	1 ~	3 ~100%	1 ~100%	5 ~100%	~	~	~	~	~	5 ~100%	5 ~100%	2 ~100%	3 ~100%
VALID CASES		5	89	1	3	1	5						5	5	2	3
NUMBER OF RESPONDENTS		5 100%	89 100%	1 100%	3 100%	1 100%	5 100%						5 100%	5 100%	2 100%	3 100%

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

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

		AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.3	WORA TOT CHLD																
YES	2 40%	11 12%	~	~100%	1 33%	2 40%	~	~	~	~	~	2 40%	2 40%	~	~	2 67%	
NO	3 60%	78 88%	~	~	2 67%	1 100%	3 60%	~	~	~	~	3 60%	3 60%	~	~	2 100%	1 33%
VALID CASES	5	89			1 3	1 1	5					5	5			2	3
NUMBER OF RESPONDENTS	5 100%	89 100%			1 100%	3 100%	1 100%	5 100%				5 100%	5 100%			2 100%	3 100%

[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 ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.4	WORA TOT CHLD																
YES	OHP TOT CHLD	19 21%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO		5 100%	70 79%	1 ~	3 ~100%	1 ~100%	5 ~100%	~	~	~	~	~	5 ~100%	5 ~100%	2 ~100%	3 ~100%	
VALID CASES		5	89	1	3	1	5						5	5	2	3	
NUMBER OF RESPONDENTS		5 100%	89 100%	1 100%	3 100%	1 100%	5 100%						5 100%	5 100%	2 100%	3 100%	

[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		
	WORA 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- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q83.5 YES	1 20%	8 10%	~	~	~	33%	1 20%	~	~	~	~	~	1 20%	1 20%	~	1 33%	
NO	4 80%	81 90%	~	~	100%	67%	1 100%	4 80%	~	~	~	~	4 80%	4 80%	~	2 100%	2 67%
VALID CASES	5	89			1	3	1	5					5	5		2	3
NUMBER OF RESPONDENTS	5 100%	89 100%			1 100%	3 100%	1 100%	5 100%					5 100%	5 100%		2 100%	3 100%

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

NQ14 RATING OF ALL CHILD'S HEALTH CARE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	WORA 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			
NQ14 0-6	31 15%	329 10%*	~	17%~	17%~	15%~	12%~	21 14%	~	~	~	~	2 25%~	6 20%~	3 11%~	27 16%~	27 15%~	3 33%~	20 15%	11 15%	
7-8	70 34%	1112 32%	~	26%~	28%~	40%~	37%~	51 35%	~	~	1 50%~	1 33%~	~	8 27%~	10 37%~	53 32%~	63 34%~	2 22%~	47 34%	23 32%	
9-10	107 51%	2025 58%*	100%~	57%~	54%~	45%~	51%~	75 51%	~	2 100%~	1 50%~	2 67%~	6 75%~	16 53%~	14 52%~	84 51%~	95 51%~	4 44%~	70 51%	37 52%	
VALID CASES	208	3466	2	35	46	60	65	147		2	2	3	8	30	27	164	185	9	137	71	
NUMBER OF RESPONDENTS	208	3466	2	35	46	60	65	147		2	2	3	8	30	27	164	185	9	137	71	
	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
MEAN	2.37	2.49	3.00	2.40	2.37	2.30	2.38	2.37		3.00	2.50	2.67	2.50	2.33	2.41	2.35	2.37	2.11	2.36	2.37	
p stat_(*=Sig @ p<=.05)		.016*	~	~	~	.410	.795	.954	~	~	~	~	~	~	~	~	~	~	~	.991	.991

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA 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	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NQ41 0-6	30 11%	319 8%	~	12%~	11%	10%	13%	22 11%	~	~	~	~	22%~	16%~	18%~	11%	26 11%	4 33%~	13 7%*	17 20%*
7-8	61 23%	980 23%	~	29%~	21%	29%	16%	43 22%	1 50%~	1 33%~	~	25%~	~	22%~	18%~	23%	56 23%~	1 8%~	49 28%*	12 14%*
9-10	173 66%	2929 69%	100%~	60%~	67%	61%	71%	128 66%	1 50%~	2 67%~	1 100%~	3 75%~	7 78%~	20 63%~	22 65%~	139 65%	157 66%~	7 58%~	115 65%	58 67%
VALID CASES	264	4228	2	42	61	80	79	193	2	3	1	4	9	32	34	213	239	12	177	87
NUMBER OF RESPONDENTS	264 100%	4228 100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
MEAN	2.54	2.62	3.00	2.48	2.56	2.51	2.58	2.55	2.50	2.67	3.00	2.75	2.56	2.47	2.47	2.54	2.55	2.25	2.58	2.47
p stat_(*=Sig @ p<=.05)		.079	~	~.841	.648	.541		.774	~	~	~	~	~	~	~.933		~	~	.292	.288

[ASKED IF Q30 = YES]

NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
NQ48 0-6	3 6%	69 10%	1 ~ 25%	1 ~ 6%	1 6%	3 8%	3 8%	~	~	~	~	~	~	3 7%	3 7%	2 9%	1 3%	
7-8	13 25%	178 26%	1 ~ 25%	2 15%	6 35%	4 22%	6 16%	~	~	1 ~100%	~	3 43%	1 25%	10 23%	9 20%	2 40%	7 30%	6 21%
9-10	36 69%	428 63%	2 ~ 50%	11 85%	10 59%	13 72%	28 76%	1 ~100%	~	~	2 ~100%	4 57%	3 75%	31 70%	32 73%	3 60%	14 61%	22 76%
VALID CASES	52	675	4	13	17	18	37	1	~	1	2	7	4	44	44	5	23	29
NUMBER OF RESPONDENTS	52 100%	675 100%	4 100%	13 100%	17 100%	18 100%	37 100%	1 100%	~	1 100%	2 100%	7 100%	4 100%	44 100%	44 100%	5 100%	23 100%	29 100%
MEAN	2.63	2.53	2.25	2.85	2.53	2.67	2.68	3.00	2.00	3.00	2.57	2.75	2.64	2.66	2.60	2.52	2.72	
p stat_(*=Sig @ p<=.05)	.231		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

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

NQ54 RATING OF CHILD'S HEALTH PLAN

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA 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		
NQ54 0-6	44 15%	619 12%	~	4 9%	12 19%	14 17%	14 15%	36 17%	1 ~	33%~	~	~	2 18%	4 12%	4 10%	39 17%	39 15%	4 31%	25 13%	19 21%	
7-8	112 39%	1448 29%*	~	18 42%	22 35%	30 37%	42 44%	88 41%	1 50%	~	1 50%	2 50%	2 18%	12 36%	12 31%	96 41%	107 40%	4 31%	79 41%	33 37%	
9-10	128 45%	2927 59%*	100%	2 49%	21 45%	28 45%	38 46%	39 41%	91 42%	1 50%	2 67%	1 50%	2 50%	7 64%	17 52%	23 59%	100 43%	119 45%	5 38%	90 46%	38 42%
VALID CASES	284	4994	2	43	62	82	95	215	2	3	2	4	11	33	39	235	265	13	194	90	
NUMBER OF RESPONDENTS	284 100%	4994 100%	2 100%	43 100%	62 100%	82 100%	95 100%	215 100%	2 100%	3 100%	2 100%	4 100%	11 100%	33 100%	39 100%	235 100%	265 100%	13 100%	194 100%	90 100%	
MEAN	2.30	2.46	3.00	2.40	2.26	2.29	2.26	2.26	2.50	2.33	2.50	2.50	2.45	2.39	2.49	2.26	2.30	2.08	2.34	2.21	
p stat_(*=Sig @ p<=.05)		.000*	~	~	.658	.964	.586	.098	~	~	~	~	~	~	~	~	~	~	.200	.197	

GETTING NEEDED CARE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA 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
NPRBSEE4 NQ46	2.27	2.21	2.00	2.31	2.20	2.36	2.20	3.00	3.00	2.00	2.63	2.00	2.27	2.29	2.00	2.32	2.22		
p stat_(*=Sig @ p<=.05)	.587		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NCARNES4 NQ15	2.49	2.44	3.00	2.46	2.49	2.51	2.48	2.51	3.00	2.50	2.50	2.50	2.43	2.48	2.49	2.50	2.22	2.52	2.43
p stat_(*=Sig @ p<=.05)	.267		~	~	~.796	.846	.426	~	~	~	~	~	~	~	~	~	~	.363	.358
COMPOSITE	2.38	2.32	3.00	2.23	2.40	2.35	2.42	2.36	x 3.00	2.50	2.75	2.25	2.53	2.24	2.38	2.40	2.11	2.42	2.32
p stat_(*=Sig @ p<=.05)	.667		~	~	~.910	.846	.813	~	~	~	~	~	~	~	~	~	~	.685	.778

GETTING CARE QUICKLY

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA 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	
NCARSN4 NQ4	2.71	2.60	3.00	2.82	2.62	2.69	2.71	2.68	3.00	3.00		2.33	2.71	2.44	2.70	2.67	2.75	2.72	2.68	
p stat_(*=Sig @ p<=.05)		.113	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NAPGET4 NQ6	2.45	2.43	2.50	2.53	2.41	2.47	2.38	2.44	1.00	3.00	3.00	3.00	2.43	2.54	2.42	2.43	2.44	2.25	2.49	2.36
p stat_(*=Sig @ p<=.05)		.763	~	~	~.747	.465	.822	~	~	~	~	~	~	~	~	~	~	.264	.263	
COMPOSITE	2.58	2.51	2.75	2.68	2.52	2.58	2.55	2.56	2.00	3.00	3.00	3.00	2.38	2.63	2.43	2.57	2.56	2.50	2.61	2.52
p stat_(*=Sig @ p<=.05)		.726	~	~	~.983	.921	.898	~	~	~	~	~	~	~	~	~	~	.819	.822	



HOW WELL DOCTORS COMMUNICATE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	NO CCC	CCC
NDREXPL4 NQ32	2.72	2.69	3.00	2.74	2.83	2.59	2.73	2.76	3.00	3.00	2.63	2.64	2.52	2.76	2.73	2.38	2.69	2.76
p stat_(*=Sig @ p<=.05)	.605		~	~	~.058	.814	.125	~	~	~	~	~	~	~	~	~	.377	.374
NDRLSTN4 NQ33	2.70	2.71	3.00	2.74	2.74	2.61	2.75	2.74	3.00	3.00	2.50	2.71	2.60	2.73	2.72	2.38	2.69	2.73
p stat_(*=Sig @ p<=.05)	.831		~	~	~.130	.470	.204	~	~	~	~	~	~	~	~	~	.593	.591
NDRESPU4 NQ34	2.76	2.77	3.00	2.84	2.78	2.68	2.77	2.76	3.00	3.00	2.75	2.75	2.88	2.74	2.78	2.38	2.75	2.78
p stat_(*=Sig @ p<=.05)	.748		~	~	~.156	.795	.921	~	~	~	~	~	~	~	~	~	.694	.693
NDRTMEN4 NQ37	2.55	2.49	3.00	2.35	2.59	2.41	2.77	2.64	3.00	2.75	2.25	2.43	2.40	2.59	2.57	2.38	2.48	2.65
p stat_(*=Sig @ p<=.05)	.235		~	~	~.048*	.000*	.005*	~	~	~	~	~	~	~	~	~	.076	.074
COMPOSITE	2.68	2.67	3.00	2.67	2.73	2.57	2.76	2.72	x 3.00	x 2.94	2.53	2.63	2.60	2.71	2.70	2.38	2.65	2.73
p stat_(*=Sig @ p<=.05)	.952		~	~	~.773	.854	.795	~	~	~	~	~	~	~	~	~	.879	.879

CUSTOMER SERVICE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
NPBCLCS4 NQ50	2.15	2.24	2.09	2.00	2.27	2.20	2.03	1.00	3.00	2.00	1.75	2.57	2.18	2.16	2.12	3.00	2.17	2.12
p stat_(*=Sig @ p<=.05)	.440		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ51	2.62	2.57	2.73	2.58	2.57	2.60	2.58	1.00	2.00	3.00	2.50	3.00	2.55	2.65	2.61	3.00	2.61	2.63
p stat_(*=Sig @ p<=.05)	.648		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.38	2.41	x 2.41	2.29	2.42	2.40	2.31	x 1.00	2.50	2.50	2.13	2.79	2.36	2.40	2.37	3.00	2.39	2.37
p stat_(*=Sig @ p<=.05)	.951		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC	
NNRXWHY NQ11	2.91	2.88	3.00	2.80	2.86	3.00	2.91	2.92	3.00	3.00	3.00	3.00	3.00	2.93	2.93	3.00	2.94	2.89	
p stat_(*=Sig @ p<=.05)		.501	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NNRXWYNT NQ12	2.12	2.40	1.00	2.20	2.14	2.10	2.14	2.15	3.00	1.00	2.00	1.89	2.14	2.09	2.11	2.00	2.03	2.20	
p stat_(*=Sig @ p<=.05)		.026*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NRXBST NQ13	2.54	2.55	1.00	2.40	2.43	2.68	2.62	2.53	3.00	3.00	3.00	2.33	2.71	2.51	2.63	1.67	2.53	2.54	
p stat_(*=Sig @ p<=.05)		.914	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.52	2.61	1.67	2.47	2.48	2.59	2.56	2.53	x 3.00	2.33	x 2.67	2.41	2.62	2.51	2.56	2.22	2.50	2.54	
p stat_(*=Sig @ p<=.05)		.853	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

ACCESS TO SPECIALIZED SERVICES

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NEZMDEQ NQ20	2.21	2.15	1.00	2.50	2.20	2.20	2.25	2.13			2.00	3.00		2.67	2.07	2.17		2.50	2.00	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NEZTHP NQ23	2.19	1.94		1.60	2.17	2.38	2.43	2.06				2.00	2.40	2.00	2.14	2.14	2.00	2.36	2.00	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NEZTC NQ26	2.22	2.08			1.50	2.18	2.62	2.17			2.00	2.00	3.00	1.60	2.29	2.17		2.18	2.24	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.21	2.06	1.00	2.05	1.96	2.25	2.43	2.12	x	x	x	2.00	2.33	2.70	2.09	2.17	2.16	2.00	2.35	2.08
p stat_(*=Sig @ p<=.05)		.429	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
PRBSEE4 Q46	75%	75%		60%	77%	75%	77%	73%	100%		100%	67%	88%	80%	73%	77%	57%	79%	72%	
CARNES4 Q15	91%	88%	100%	91%	91%	93%	89%	92%	100%	100%	100%	75%	93%	93%	91%	92%	78%	93%	88%	
AVERAGE	83.17	81.22	x	75.71	84.02	84.22	83.25	82.20	x	x	x	x	75.00	90.42	86.30	82.16	84.49	67.46	85.98	79.69

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
CARSN4 Q4	95%	90%	100%	100%	92%	100%	89%	96%	100%	100%		67%	93%	89%	95%	95%	88%	97%	91%	
APGET4 Q6	85%	84%	100%	86%	85%	85%	84%	85%	0%	100%	100%	100%	86%	92%	88%	85%	88%	86%	83%	
AVERAGE	90.14	87.16	x	93.06	88.84	92.73	86.64	90.52	x	x	x	x	85.71	92.58	88.19	89.89	89.92	87.50	91.68	87.25

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA 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	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
DREXPL4 Q32	95%	93%	100%	94%	98%	93%	94%	96%	100%	100%	88%	96%	80%	97%	95%	88%	94%	96%		
DRLSTN4 Q33	95%	94%	100%	94%	95%	95%	96%	95%	100%	100%	100%	100%	92%	95%	95%	88%	96%	94%		
DRESPU4 Q34	96%	95%	100%	97%	93%	97%	96%	95%	100%	100%	88%	100%	100%	95%	96%	88%	97%	93%		
DRTMEN4 Q37	92%	86%	100%	87%	90%	90%	98%	94%	100%	100%	75%	96%	84%	94%	93%	88%	91%	93%		
AVERAGE	94.4	92.0	x	92.7	93.9	93.6	96.2	94.8	x	x	x	100	87.5	98.2	89.0	95.3	94.6	87.5	94.5	94.1

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA 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	79%	77%		73%	67%	93%	80%	75%		0%	100%	100%	50%	100%	82%	79%	78%	100%	78%	82%
CSRESP Q51	96%	91%		100%	92%	93%	100%	100%		0%	100%	100%	75%	100%	91%	97%	96%	100%	97%	94%
AVERAGE	87.70	83.89	x	86.36	79.17	93.10	90.00	87.50	x	x	x	x	62.50	100.0	86.36	88.12	86.96	x	87.50	88.05



SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NRXWHY Q11	96%	94%	100%	90%	93%	100%	95%	96%	100%	100%	100%	100%	100%	96%	96%	96%	100%	97%	94%	
NRXWYNT Q12	56%	70%	0%	60%	57%	55%	57%	57%	100%	0%	50%	44%	57%	55%	56%	50%	52%	60%		
RXBST Q13	77%	78%	0%	70%	71%	84%	81%	77%	100%	100%	100%	67%	86%	75%	81%	33%	77%	77%		
AVERAGE	76.2	80.5	x	73.3	73.8	79.7	77.8	76.6	x	x	x	x	x	70.4	81.0	75.5	77.8	61.1	75.1	77.1

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA 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	68%	70%	0%	75%	60%	60%	100%	67%			50%	100%		100%	60%	67%		75%	64%	
EZTHP Q23	73%	61%		40%	67%	88%	86%	69%				50%	80%	50%	71%	71%	50%	79%	67%	
EZTC Q26	72%	67%			33%	71%	92%	71%			50%	50%	100%	40%	75%	69%		73%	72%	
AVERAGE	71.2	66.1	x	57.5	53.3	72.7	92.7	68.8	x	x	x	x	x	80.0	40.0	68.8	69.0	x	75.4	67.4

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
DRTLKU Q38	79%	84%	100%	87%	78%	81%	74%	78%	0%	75%	75%	86%	92%	77%	80%	75%	78%	82%		
DRUNCON Q43	92%	89%		100%	81%	92%	96%	92%	0%	100%	100%	100%	86%	100%	90%	94%	63%	100%	89%	
DRUNFAM Q44	88%	84%		100%	81%	87%	92%	87%	100%	100%	100%	100%	75%	88%	87%	90%	70%	95%	86%	
AVERAGE	86.5	85.5	x	95.7	80.2	86.8	87.1	85.9	x	x	x	75.0	75.0	82.1	93.2	84.5	87.8	69.2	91.1	85.4

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA 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		
HELPCONT Q18	100%	94%		100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%		
HLPCOORD Q29	73%	60%	50%	80%	65%	78%	75%	72%		100%	50%	0%	60%	50%	74%	73%	50%	77%	69%	
AVERAGE	86.7	76.8	x	80.0	82.4	88.9	87.5	86.2	x	x	x	x	x	60.0	50.0	86.9	86.5	50.0	88.4	84.4

INDEX OF ADULT TABLES

PAGE QUESTION TITLE

1. INTRODUCTION

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

2. YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

3. YOUR PERSONAL DOCTOR

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

4. GETTING HEALTH CARE FROM SPECIALISTS

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

PAGE QUESTION TITLE

5. YOUR HEALTH PLAN

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

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

5. ADDITIONAL QUESTIONS

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

5. ACCESS TO DENTAL CARE

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



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

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

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

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

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

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

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

INDEX OF CHILD TABLES

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*

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

- Never
- Sometimes
- Usually
- Always

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

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

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

- Yes
- No → **Go to Question 35c**

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → **Go to Question 35e**

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

- Never
- Sometimes
- Usually
- Always

### ADDITIONAL QUESTIONS

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

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

- Yes
- No → **Go to Question 35i**

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

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

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

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

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

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

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

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

- Yes
- No → **Go to Question 35l**





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

- Yes
- No

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

- Yes
- No

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

- Never
- Sometimes
- Usually
- Always

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes, definitely
- Yes, somewhat
- No

### ACCESS TO DENTAL CARE

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

- Yes
- No

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

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

### ABOUT YOU

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

- Excellent
- Very Good
- Good
- Fair
- Poor

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

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

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

- Yes
- No → **Go to Question 50**

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

- Yes
- No

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

- Yes
- No → **Go to Question 52**

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

- Yes
- No

52. What is your age?

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

53. Are you male or female?

- Male
- Female

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

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

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

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

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

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

57. Did someone help you complete this survey?

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

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

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

**THANK YOU**

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

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

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



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

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

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Correct  
Mark 

Incorrect  
Marks



- 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

**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

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 |                       |                       |                       |                       |

**YOUR CHILD'S HEALTH PLAN**

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

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

- Yes
- No → *Go to Question 52*

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

- Never
- Sometimes
- Usually
- Always



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → **Go to Question 54**

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

- Never
- Sometimes
- Usually
- Always

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

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

**PRESCRIPTION MEDICINES**

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

- Yes
- No → **Go to Question 57a**

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

**ACCESS TO DENTAL CARE**

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

- Yes
- No

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

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



## ADDITIONAL QUESTIONS

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

- Yes
- No → *Go to Question 58*

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

- Yes
- No

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

- Yes
- No

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

## ABOUT YOUR CHILD AND YOU

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Yes
- No → *Go to Question 63*

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

- Yes
- No → *Go to Question 63*

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

- Yes
- No

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

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



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

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

78. What is your age?

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

79. Are you male or female?

- Male
- Female

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

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

81. How are you related to the child?

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

82. Did someone help you complete this survey?

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

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

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

**THANK YOU**

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

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

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





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

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

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

**INSTRUCCIONES PARA EL CUESTIONARIO**

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

Marca  
Correcta ●

Marca  
Incorrecta   

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

● Sí → *Pase a la Pregunta 1*  
○ No

↓ **COMIENCE AQUI** ↓

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

- Sí → *Pase a la pregunta 3*
- No

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

\_\_\_\_\_



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

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

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

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







35a. En los últimos 6 meses, ¿tuvo usted un problema de salud para el cuál necesitó equipo especial tal como un bastón, silla de rueda, o equipo de oxígeno?

- Sí
- No → *Pase a la pregunta 35c*

35b. En los últimos 6 meses, ¿con qué frecuencia fue fácil para usted conseguir el equipo médico que usted necesitaba a través de su plan de salud?

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

35c. En los últimos 6 meses, ¿tuvo usted un problema de salud para el cuál necesitó terapia especial, tal como terapia física, ocupacional o terapia del habla?

- Sí
- No → *Pase a la pregunta 35e*

35d. En los últimos 6 meses, ¿con qué frecuencia fue fácil para usted conseguir la terapia especial que usted necesitaba a través de su plan de salud?

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

## PREGUNTAS ADICIONALES

Un proveedor de salud puede ser un doctor generalista, un doctor especialista, una enfermera practicante, un asistente médico, una enfermera o cualquiera que usted vería para cuidado de salud.

35e. En los últimos 6 meses, ¿visitó usted a un profesional médico para un problema de salud específico?

- Sí
- No → *Pase a la pregunta 35i*

35f. ¿Cuánto esfuerzo se hizo para ayudarlo/a a entender su problem de salud?

- Ningún esfuerzo en absoluto
- Se hizo un poco de esfuerzo
- Se hizo algún esfuerzo
- Se hizo un gran esfuerzo

35g. ¿Cuánto esfuerzo se hizo para escuchar las cosas que más le importan a usted sobre su problema de salud?

- Ningún esfuerzo en absoluto
- Se hizo un poco de esfuerzo
- Se hizo algún esfuerzo
- Se hizo un gran esfuerzo

35h. ¿Cuánto esfuerzo se hizo para incluir lo que más le importa a usted en escoger que hacer próximamente?

- Ningún esfuerzo en absoluto
- Se hizo un poco de esfuerzo
- Se hizo algún esfuerzo
- Se hizo un gran esfuerzo

35i. Opciones para su tratamiento o atención médica pueden ser opciones sobre medicinas, cirugías u otros tratamientos. En los últimos 6 meses, ¿le dijo este profesional médico que había más de una opción para su tratamiento o atención médica?

- Sí
- No → *Pase a la pregunta 35l*

35j. En los últimos 6 meses, ¿habló su profesional médico con usted acerca de las ventajas y desventajas de cada opción de tratamiento o atención médica?

- Sí
- No

35k. En los últimos 6 meses, cuando había más de una opción de tratamiento o atención médica, ¿su profesional médico le preguntó cuál opción le convenía más a usted?

- Sí
- No

35l. En los últimos 6 meses, ¿con qué frecuencia le hizo fácil su profesional médico el hacer preguntas o plantear inquietudes?

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

Las siguientes preguntas son sobre cuánto usted piensa que su doctor u otro proveedor de salud respeta sus creencias, actitudes, lenguaje y comportamiento.

35m. En los últimos 6 meses, ¿con qué frecuencia un doctor u otro proveedor de salud habló muy rápido cuando le habló usted?

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

35n. En los últimos 6 meses, ¿con qué frecuencia un doctor u otro proveedor de salud le interrumpió cuando usted estaba hablando?

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

35o. En los últimos 6 meses, ¿con qué frecuencia un doctor u otro proveedor de salud uso un tono condesendiente, sarcástico o grosero con usted?

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

35p. En los últimos 6 meses, ¿sintió usted que podría confiar en el doctor u otro proveedor de salud con su cuidado médico?

- Sí, definitivamente
- Sí, algo
- No

## ACCESO A CUIDADO DENTAL

35q. Un dentista regular es a quien usted va a ver para un chequeo y limpieza o tiene una carie o un dolor de diente. ¿Usted tiene un dentista regular?

- Sí
- No

35r. En los últimos 6 meses, si usted necesitó ver a un dentista de inmediato por una emergencia dental, ¿pudo ver usted a un dentista tan pronto como quería?

- Nunca
- A veces
- La mayoría de las veces
- Siempre
- Yo no tuve una emergencia dental en los últimos 6 meses

## ACERCA DE USTED

36. En general, ¿cómo calificaría toda su salud?

- Excelente
- Muy buena
- Buena
- Regular
- Mala

37. En general, ¿cómo calificaría toda su salud mental o emocional?

- Excelente
- Muy buena
- Buena
- Regular
- Mala

38. Desde el 1 de julio del 2014, ¿le han puesto la vacuna para la influenza o gripe ya sea en inyección o con un rociador o spray nasal?

- Sí
- No
- No sé

39. Actualmente, ¿fuma cigarrillos o usa tabaco todos los días, algunos días o nunca?

- Todos los días
- Algunos días
- No fumo en absoluto → **Pase a la pregunta 43**
- No sé → **Pase a la pregunta 43**

40. En los últimos 6 meses, ¿qué tan seguido le aconsejó un doctor u otro profesional médico de su seguro que dejara de fumar o usar tabaco?

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

41. En los últimos 6 meses, ¿qué tan seguido le recomendó, o habló un doctor o profesional médico sobre medicamentos para ayudarlo(a) a dejar de fumar o usar tabaco? Ejemplos de medicamentos son: chicle o goma de mascar con nicotina, parche, rociador o aerosol nasal, inhalador o medicamentos con receta.

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

42. En los últimos 6 meses, ¿qué tan seguido le ofreció o habló con su doctor o profesional médico sobre métodos y estrategias, aparte de medicamentos, para ayudarlo(a) a dejar de fumar o usar tabaco? Ejemplos de métodos y estrategias son: una línea telefónica de ayuda, consejería individual o terapia de grupo o un programa para dejar de fumar.
- Nunca
  - A veces
  - La mayoría de las veces
  - Siempre
43. ¿Toma aspirina todos los días o un día sí y otro día no?
- Sí
  - No
  - No sé
44. ¿Tiene algún problema de salud o toma algún medicamento que hace que sea peligroso para usted tomar aspirina?
- Sí
  - No
  - No sé
45. ¿Ha hablado alguna vez un doctor o profesional médico con usted acerca de los riesgos y beneficios de la aspirina para prevenir un infarto o un derrame cerebral?
- Sí
  - No

46. Que usted sepa, ¿tiene alguna de las siguientes enfermedades? Marque una o más.
- Colesterol alto
  - Presión sanguínea alta (hipertensión arterial)
  - Padres o hermanos que hayan tenido un infarto antes de los 60 años
47. ¿Alguna vez le ha dicho un doctor que usted tiene alguna de las siguientes enfermedades? Marque una o más.
- Un infarto
  - Angina de pecho o cardiopatía coronaria
  - Un derrame cerebral
  - Algún tipo de diabetes o niveles altos de azúcar en la sangre
48. En los últimos 6 meses, ¿recibió usted atención médica 3 veces o más para la misma enfermedad o problema?
- Sí
  - No → *Pase a la pregunta 50*
49. ¿Se trata de una enfermedad o problema que ha durado al menos 3 meses? No incluya el embarazo ni la menopausia.
- Sí
  - No
50. ¿Necesita o toma ahora alguna medicina recetada por un doctor? No incluya anticonceptivos.
- Sí
  - No → *Pase a la pregunta 52*



51. ¿Es esta medicina para tratar una enfermedad o problema que ha durado al menos 3 meses? **No** incluya el embarazo ni la menopausia.

- Sí
- No

52. ¿Qué edad tiene?

- 18 a 24 años
- 25 a 34
- 35 a 44
- 45 a 54
- 55 a 64
- 65 a 74
- 75 años o más

53. ¿Es usted hombre o mujer?

- Hombre
- Mujer

54. ¿Cuál es el grado o nivel escolar más alto que usted ha completado?

- 8 años de escuela o menos
- 9 a 12 años de escuela, pero sin graduarse
- Graduado de la escuela secundaria (high school), Diploma de escuela secundaria, preparatoria, o su equivalente (o GED)
- Algunos cursos universitarios o un título universitario de un programa de 2 años
- Título universitario de 4 años
- Título universitario de más de 4 años

55. ¿Es usted de origen o ascendencia hispana o latina?

- Sí, hispano o latino
- No, ni hispano ni latino

56. ¿A qué raza pertenece? Marque una o más.

- Blanca
  - Negra o afroamericana
  - Asiática
  - Nativo de Hawái o de otras islas del Pacífico
  - Indígena americano o nativo de Alaska
  - Otra (Por favor escriba en letra de molde)
- 

57. ¿Le ayudó alguien a completar esta encuesta?

- Sí → *Pase a la pregunta 58*
- No → *Gracias. Por favor devuelva esta encuesta en el sobre con el porte o franqueo pagado.*

58. ¿Cómo le ayudó a usted esta persona? Marque una o más.

- Me leyó las preguntas
  - Anotó las respuestas que le di
  - Contestó las preguntas por mí
  - Tradujo las preguntas a mi idioma
  - Me ayudó de otra forma (Por favor escriba en letra de molde)
- 

**Gracias nuevamente por tomar el tiempo de completar el cuestionario! Sus respuestas son sumamente apreciadas.**

**Cuando haya terminado, por favor envíe la encuesta en el sobre con el porte pagado a:**

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





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

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

**INSTRUCCIONES PARA EL CUESTIONARIO**

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

Marca  
Correcta



Marca  
Incorrecta



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

- Sí ➔ *Pase a la Pregunta 1*
- No



**COMIENCE AQUI**



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

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

- Sí ➔ *Pase a la pregunta 3*
- No

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

\_\_\_\_\_

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

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

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

Sí  
 No → *Pase a la pregunta 5*

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

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

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

Sí  
 No → *Pase a la pregunta 7*

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

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

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

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

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

Sí  
 No

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

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

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

- Sí
- No → *Pase a la pregunta 14*

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

- Sí
- No

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

- Sí
- No

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

- Sí
- No

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

- 
- 0 1 2 3 4 5 6 7 8 9 10
- La peor atención médica posible                      La mejor atención médica posible

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

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

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

- Sí
- No → *Pase a la pregunta 19*

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

- Sí
- No → *Pase a la pregunta 19*

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

- Sí
- No

## SERVICIOS ESPECIALIZADOS

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

- Sí
- No → *Pase a la pregunta 22*

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

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

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 25*

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

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

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 28*

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

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

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 30*

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

- Sí
- No

### EL DOCTOR PERSONAL DE SU NIÑO

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

- Sí
- No → *Pase a la pregunta 45*

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

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

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

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

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

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

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 37*

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

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











## PREGUNTAS ADICIONALES

57c. Las opciones de tratamiento o atención médica para su niño pueden incluir opciones sobre medicinas, cirugía u otro tratamiento.

En los últimos 6 meses, ¿le dijo su profesional médico que había más de una opción para el tratamiento o atención médica de su niño?

- Sí
- No → *Pase a la pregunta 58*

57d. En los últimos 6 meses, ¿le habló su profesional médico acerca de las cosas buenas y las cosas malas de cada opción de tratamiento o de atención médica de su niño?

- Sí
- No

57e. En los últimos 6 meses, cuando había más de una opción de tratamiento o de atención médica para su niño, ¿su profesional médico le preguntó cuál opción le convenía más a su niño?

- Sí
- No

57f. En los últimos 6 meses, ¿con qué frecuencia su profesional médico considero y respeto las opciones de atención médica que usted penso funcionarían mejor para su niño?

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

57g. En los últimos 6 meses, ¿con qué frecuencia el profesional médico de su niño le animo a usted a hacer preguntas y plantear inquietudes?

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

57h. En los últimos 6 meses, ¿con qué frecuencia el profesional médico de su niño le hizo fácil a usted el hacer preguntas y plantear inquietudes?

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

## ACERCA DE USTED Y DE SU NIÑO

58. En general, ¿cómo calificaría toda la salud de su niño?

- Excelente
- Muy buena
- Buena
- Regular
- Mala

59. En general, ¿cómo calificaría toda la salud mental o emocional de su niño?

- Excelente
- Muy buena
- Buena
- Regular
- Mala

60. ¿Actualmente necesita o usa su niño una medicina recetada por un doctor (aparte de vitaminas)?

- Sí
- No → *Pase a la pregunta 63*

61. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?
- Sí  
 No → *Pase a la pregunta 63*
62. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?
- Sí  
 No
63. ¿Necesita o usa su niño más servicios médicos, de salud mental o educativos de lo que es normal para la mayoría de los niños de la misma edad?
- Sí  
 No → *Pase a la pregunta 66*
64. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?
- Sí  
 No → *Pase a la pregunta 66*
65. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?
- Sí  
 No
66. ¿Está su niño limitado o impedido de alguna manera en su habilidad de hacer lo que pueden hacer la mayoría de los niños de la misma edad?
- Sí  
 No → *Pase a la pregunta 69*

67. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?
- Sí  
 No → *Pase a la pregunta 69*
68. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?
- Sí  
 No
69. ¿Necesita o recibe su niño terapia especial, tal como terapia física, ocupacional o del habla?
- Sí  
 No → *Pase a la pregunta 72*
70. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?
- Sí  
 No → *Pase a la pregunta 72*
71. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?
- Sí  
 No
72. ¿Tiene su niño algún problema emocional, de desarrollo o de comportamiento, para el cual necesita o recibe tratamiento o consejería?
- Sí  
 No → *Pase a la pregunta 74*
73. ¿Ha durado este problema o se espera que dure por lo menos 12 meses?
- Sí  
 No

74. ¿Qué edad tiene su niño?

Menos de un año

AÑOS (escriba la respuesta)

75. ¿Es su niño de sexo masculino o femenino?

Masculino

Femenino

76. ¿Es su niño de origen o ascendencia hispana o latina?

Sí, hispano o latino

No, ni hispano ni latino

77. ¿A qué raza pertenece su niño?  
Marque una o más.

Blanca

Negra o afroamericana

Asiática

Nativo de Hawái o de otras islas del Pacífico

Indígena americano o nativo de Alaska

Otra (Por favor escriba en letra de molde)

---

78. ¿Qué edad tiene usted?

Menos de 18 años

18 a 24

25 a 34

35 a 44

45 a 54

55 a 64

65 a 74

75 años o más

79. ¿Es usted hombre o mujer?

Hombre

Mujer

80. ¿Cuál es el grado o nivel escolar más alto que usted ha completado?

8 años de escuela o menos

9 a 12 años de escuela, pero sin graduarse

Graduado de la escuela secundaria (high school), Diploma de escuela secundaria, preparatoria, o su equivalente (o GED)

Algunos cursos universitarios o un título universitario de un programa de 2 años

Título universitario de 4 años

Título universitario de más de 4 años

81. ¿Qué relación tiene con el niño?

Madre o padre

Abuelo o abuela

Tía o tío

Hermano o hermana mayor

Otro familiar

Tutor legal del niño

Otra persona

82. ¿Le ayudó alguien a completar esta encuesta?

Sí → **Pase a la pregunta 83**

No → **Gracias. Por favor devuelva esta encuesta en el sobre con el porte o franqueo pagado.**

83. ¿Cómo le ayudó a usted esta persona? Marque una o más.

Me leyó las preguntas

Anotó las respuestas que le di

Contestó las preguntas por mí

Tradujo las preguntas a mi idioma

Me ayudó de otra forma (Por favor escriba en letra de molde)

---

**Gracias nuevamente por tomar el tiempo de completar el cuestionario! Sus respuestas son sumamente apreciadas.**

**Cuando haya terminado, por favor envíe la encuesta en el sobre con el porte pagado a:**

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



DIAL.SCREEN

DS. INTERVIEWER: YOU MAY DO THE INTERVIEW WITH ONLY THE NAMED  
RESPONDENT.

PHONE NUMBER ---> [1 CELL PHONE - HAND DIAL ([AREA\$]) [FRST3\$] -  
[LAST4\$] /\*\*\* \*\*\*-\*\*\*\*]

(IWER: THIS IS NOT A PROXY INTERVIEW.)

Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may  
be monitored and recorded for quality control. May I please speak with  
[MEMBER FIRST NAME] [MEMBER LAST NAME]?

(IF NEEDED: "We are conducting an important study to find out how  
satisfied people are with Oregon Health Plan. The results of the  
study will help Oregon Health Plan improve the care they provide and will also  
help consumers when they choose health care plans.")

(IF NEEDED: "The interview is completely confidential and voluntary,  
and will not affect your health care or benefits in any way.")

(IF NEEDED: "This is purely a research study -- we are polling people  
about their health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD  
LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the  
deadline for mailing surveys has passed and we're now in the telephone  
phase of this study. May I continue?")

01. CONTINUE
02. ALREADY COMPLETED AND MAILED SURVEY BACK
03. NEW PHONE NUMBER
04. REFUSAL
05. APPOINTMENT
06. NEVER HEARD OF R
07. KNOWS R BUT HAS NO NEW NUMBER FOR R
08. RNA, ANS MACH, RETURN TO COVERSHEET
09. LANGUAGE PROBLEM -- SPEAKS SPANISH
10. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH

IF DIAL.SCREEN = 01, GO TO RE.INTRO

IF DIAL.SCREEN = 02, GO TO MAIL.SCREEN

IF DIAL.SCREEN = 03, ENTER NEW NUMBER ON COVERSHEET AND RE-DIAL

RETURN TO COVERSHEET



## RE.INTRO

RE.INTRO. (INTERVIEWER: READ PARENS TEXT IF R ISN'T PERSON WHO ANSWERED  
PHONE OR HAS NOT HEARD IT YET.)

(Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may  
be monitored and recorded for quality control.)

We are conducting an important study to find out how satisfied  
people are with Oregon Health Plan. The results of the study will help  
Oregon Health Plan improve the care they provide and will also help consumers  
when they choose health care plans.

The interview is completely confidential and voluntary, and will not  
affect your health care or benefits in any way.

(IF R ASKS: "How long will this take?", EXPLAIN: "The questions should  
take about 12-15 minutes to answer.")

(IF NEEDED: "This is purely a research study -- we are polling people  
about their health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD  
LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the  
deadline for mailing surveys has passed and we're now in the telephone  
phase of this study. May I continue?")

("DK" NOT ALLOWED)

1. CONTINUE
2. APPOINTMENT
3. REFUSAL
4. LANGUAGE PROBLEM -- SPEAKS SPANISH
5. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH
  
6. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)
7. RETURN TO CS

## SEX

SEX. (IWER: RECORD RESPONDENT'S SEX, 'DK' NOT ALLOWED)

1. MALE
2. FEMALE

## SPAN.VAR

(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

1. Spanish
2. English

MEMBER

Q1. / MEMBER

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

(IWER: IF R SAYS "LEFT PLAN" OR "SWITCHED PLANS" OR "NO LONGER INSURED" ENTER "2". IF R IS NOT SURE IF HE/SHE IS PART OF Oregon Health Plan, ENTER "2".)

- 1. YES --> CK.PLMSTCR
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

NPLNAME

Q2. / NPLNAME

What is the name of your health plan?

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS Oregon Health Plan]

[(ENTER 5 IF R SAYS: MEDICAID)]

(IF R SAYS SOMETHING CLOSE TO Oregon Health Plan, ENTER "2")

(IF R NOT SURE OF PLAN NAME, ENTER "2")

- 1. EXACT MATCH -----> CK.PLMSTCR
- 2. POSSIBLE MATCH -----> PLNAME
- 3. NOT A MATCH -----> PLNAME
- 4. RESPONDENT NO LONGER INSURED -----> NO.INSUR
- 5. RESPONDENT INSURED BY MEDICAID BUT DOESN'T -----> CK.PLMSTCR  
KNOW PLAN NAME
- 6. RESPONDENT INSURED BUT NOT BY MEDICAID -----> NO.INSUR

PLNAME

Q2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)

CK.PLMSTCR:

-----  
IF NPLNAME = NOT A MATCH (3), GO TO END.SCREEN

INTRO.INCARE

INTRO.INCARE

Now I'm going to ask you some questions about your own health care. When you answer these questions, please do NOT include dental visits or care you got when you stayed overnight in a hospital.

INCARE

Q3. / INCARE

In the last 6 months, did you have an illness, injury, or condition that NEEDED CARE RIGHT AWAY in a clinic, emergency room, or doctor's office?

- 1. YES
- 2. NO -----> APMAKE4

DK/REFUSAL/NOT ASCERTAINED --> APMAKE4

CARSN4

Q4. / CARSN4

In the last 6 months, when you NEEDED CARE RIGHT AWAY, how often did you get care as soon as you needed? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

APMAKE4

Q5. / APMAKE4

In the last 6 months, did you make any appointments for a CHECK-UP OR ROUTINE CARE at a doctor's office or clinic?

- 1. YES
- 2. NO -----> OFCTIM4

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

APGET4

Q6. / APGET4

In the last 6 months, how often did you get an appointment for a CHECK-UP OR ROUTINE CARE at a doctor's office or clinic as soon as you needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

OFCTIM4

Q7. / OFCTIM4

In the last 6 months, NOT counting the times you went to an emergency room, how many times did you go to a doctor's office or clinic to get health care for yourself?

(IWER: IF NECESSARY: "Your best estimate would be fine.")

(IWER: IF NEEDED CLARIFY: "Please don't include dental care you received.")

(IWER: IF NEEDED CLARIFY, "Please include ALL doctor visits including those for routine, regular care and for an illness or injury.")

(READ LIST IF NEEDED: "Would you say...")

0. NONE,
1. 1 TIME,
2. 2,
3. 3,
4. 4,
5. 5 TO 9, OR
6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

IF OFCTIM4=0 OR DK/REFUSAL THEN GO TO PRSNLD4

PRVENT5

Q8. / PRVENT5

In the last 6 months, did you and a doctor or other health provider talk about specific things you could do to prevent illness?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RXSTP

9. / RXSTP

In the last 6 months, did you and a doctor or other health provider talk about starting or stopping a prescription medicine?

- 1. YES
- 2. NO -----> RTALLCR

DK/REFUSAL/NOT ASCERTAINED --> RTALLCR

NRXWHY

10. / NRXWHY

Did you and a doctor or other health provider talk about the reasons you might want to take a medicine?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

NRXWYNT

11. / NRXWYNT

Did you and a doctor or other health provider talk about the reasons you might NOT want to take a medicine?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RXBST

12. / RXBST

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RTALLCR

13. / RTALLCR

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

(IF NEEDED: "Please do not include any dental care you may have received.")

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

CARNES4

14. / CARNES4

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

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PRSNLD4

15. / PRSNLD4

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

Do you have a personal doctor?

- 1. YES
- 2. NO -----> INTRO.SPDR

DK/REFUSAL/NOT ASCERTAINED --> INTRO.SPDR

DRTMS

16. / DRTMS

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

(IF NEEDED: "Your best estimate would be fine.")

(READ LIST IF NEEDED: "Would you say...")

- 0. NONE, -----> RATEDR4
- 1. 1 TIME,
- 2. 2,
- 3. 3,
- 4. 4,
- 5. 5 TO 9, OR
- 6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> RATEDR4

DREXPL4

17. / DREXPL4

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

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRLSTN4

18. / DRLSTN4

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

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRESPU4

19. / DRESPU4

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

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTMEN4

20. / DRTMEN4

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

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DIFFDR

21. / DIFFDR

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

- 1. YES
- 2. NO -----> RATEDR4

DK/REFUSAL/NOT ASCERTAINED --> RATEDR4

DRINFO

22. / DRINFO

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

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)



RATEDR4

23. / RATEDR4

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

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

INTRO.SPDR

Now I'm going to ask you some questions about specialists. When you answer these questions, please do NOT include dental visits or care you got when you stayed overnight in a hospital

NDSPDR4

24. / NDSPDR4

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

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

(CLARIFY IF NEEDED: "Specialists are doctors who specialize in one area of health care. Please include all doctors you consider to be specialists, but do not include any dental visits.")

(IWER: IF RESPONDENT ASKS IF A PARTICULAR TYPE OF DOCTOR IS A SPECIALIST, CLARIFY, "I don't have any information about that, so please just interpret it however it seems best to you.")

(CLARIFY IF NEEDED: "You can interpret this question however it seems best to you.")

- 1. YES
- 2. NO -----> INTRO.PLAN

DK/REFUSAL/NOT ASCERTAINED --> INTRO.PLAN

PRBSEE4

25. / PRBSEE4

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

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

SPDRS

26. / SPDRS

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

(CLARIFY IF NEEDED: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. Would you say you've seen...")

(READ LIST IF NEEDED: "Would you say...")

- 0. NONE, -----> INTRO.PLAN
- 1. 1 SPECIALIST,
- 2. 2,
- 3. 3,
- 4. 4, OR
- 5. 5 OR MORE SPECIALISTS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> INTRO.PLAN

RTSPDR4

27. / RTSPDR4

We want to know your rating of the specialist you saw most often in the last 6 months.

Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

(Clarify if necessary: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.")

00            01 02 03 04 05 06 07 08 09    10

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN

Now I'm going to ask you some questions about your experience with your health plan.

LOOMAT4

28. / LOOMAT4

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

- 1. YES
- 2. NO -----> CLCSRV4

DK/REFUSAL/NOT ASCERTAINED --> CLCSRV4

UNDINF4

29. / UNDINF4

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

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CLCSRV4

30. / CLCSRV4

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

- 1. YES
- 2. NO -----> PLPRWK4

DK/REFUSAL/NOT ASCERTAINED --> PLPRWK4

PBCLCS4

31. / PBCLCS4

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

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CSRESP

32. / CSRESP

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

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLPRWK4

33. / PLPRWK4

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

- 1. YES
- 2. NO -----> RTPLEXP

DK/REFUSAL/NOT ASCERTAINED --> RTPLEXP

PBPLPW4

34. / PBPLPW4

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

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTPLEXP

35. / RTPLEXP

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

00            01 02 03 04 05 06 07 08 09    10

DK/REFUSAL/NOT ASCERTAINED

HPMDEQ

35a. / HPMDEQ

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

- 1. YES
  - 2. NO -----> POSTHP
- DK/REFUSAL/NOT ASCERTAINED

EZMDHP

35b. / EZMDHP

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

- 1. NEVER
  - 2. SOMETIMES
  - 3. USUALLY
  - 4. ALWAYS
- DK/REFUSAL/NOT ASCERTAINED

POSTHP

35c. / POSTHP

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

- 1. YES
  - 2. NO -----> DTLKTF
- DK/REFUSAL/NOT ASCERTAINED

EZPOST

35d. / EZPOST

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

- 1. NEVER
  - 2. SOMETIMES
  - 3. USUALLY
  - 4. ALWAYS
- DK/REFUSAL/NOT ASCERTAINED

INTRO.SHLTHIS

INTRO.SHLTHIS

A health provider could be a general doctor, a specialist doctor, a nurse practitioner, a physician assistant, a nurse or anyone else you would see for health care. Please keep this in mind as you answer the following questions.

SHLTHIS

35e. / SHLTHIS

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

- 1. YES
- 2. NO -----> CHTREAT

DK/REFUSAL/NOT ASCERTAINED --> CHTREAT

EUNDER

35f. / EUNDER

How much effort was made to help you understand your health issue? Would you say...?

(READ LIST)

- 1. NO EFFORT AT ALL,
- 2. A LITTLE EFFORT WAS MADE,
- 3. SOME EFFORT WAS MADE, or
- 4. A LOT OF EFFORT WAS MADE

DK/REFUSAL/NOT ASCERTAINED

ELISTEN

35g. / ELISTEN

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

(READ LIST IF NECESSARY)

- 1. NO EFFORT AT ALL,
- 2. A LITTLE EFFORT WAS MADE,
- 3. SOME EFFORT WAS MADE, or
- 4. A LOT OF EFFORT WAS MADE

DK/REFUSAL/NOT ASCERTAINED

EINCLUD

35h. / EINCLUD

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

(READ LIST IF NECESSARY)

- 1. NO EFFORT AT ALL,
- 2. A LITTLE EFFORT WAS MADE,
- 3. SOME EFFORT WAS MADE, or
- 4. A LOT OF EFFORT WAS MADE

DK/REFUSAL/NOT ASCERTAINED

CHTREAT

35i. / CHTREAT

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

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

- 1. YES
- 2. NO -----> RESPCHT

DK/REFUSAL/NOT ASCERTAINED --> RESPCHT

PCTREAT

35j. / PCTREAT

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

- 1. YES
  - 2. NO
- DK/REFUSAL/NOT ASCERTAINED

BSTREAT

35k. / BSTREAT

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

- 1. YES
  - 2. NO
- DK/REFUSAL/NOT ASCERTAINED

EASYQC

35l. / EASYQC

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

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED

DTLKTF

35m. / DTLKTF

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED

DINTER

35n. / DINTER

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

(READ LIST IF NECESSARY)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED

DRRUDE

35o. / DRRUDE

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

(READ LIST IF NECESSARY)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED

TRUSTDR

35p. / TRUSTDR

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

(READ LIST)

1. YES DEFINITELY,
2. YES SOMEWHAT, OR
3. NO?

DK/REFUSAL/NOT ASCERTAINED



REGDENT

35q. / REGDENT

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

1. YES
  2. NO
- DK/REFUSAL/NOT ASCERTAINED

DNTASAP

35r.

In the last 6 months, if you needed to see a dentist right away because of a DENTAL EMERGENCY, did you get to see a dentist as soon as you wanted?

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?
5. I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS (DO NOT READ)

DK/REFUSAL/NOT ASCERTAINED

HLTSTA4

36. / HLTSTA4

In general, how would you rate your overall health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

MNTLSTAT

37. / MNTLSTAT

In general, how would you rate your overall MENTAL OR EMOTIONAL health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## FLUSHOTQ

38. / FLUSHOTQ

Have you had either a flu shot or flu spray in the nose since July 1, 2014?

1. YES
2. NO
3. DON'T KNOW
9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

## NOWSMOK

39. / NOWSMOK

Do you now smoke cigarettes or use tobacco...

(READ LIST)

1. EVERY DAY,
2. SOME DAYS, OR
3. NOT AT ALL? -----> ASPDAY
4. DON'T KNOW (DO NOT READ) -----> ASPDAY
9. REFUSAL/NOT ASCERTAINED (DO NOT READ) --> ASPDAY

## ADVQUIT9

40. / ADVQUIT9

In the last 6 months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## PATCH9

41. / PATCH9

In the last 6 months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication. Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

WILLPWR9

42. / WILLPWR9

In the last 6 months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program. Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPDAY

43. / ASPDAY

Do you take aspirin daily or every other day?

(IF NEEDED: "Would you say YES or NO?")

(IWER: If the R asks about whether a particular medication or Brand name is considered aspirin, you may provide the following clarification:

Aspirin: Bayer and Bufferin

Not Aspirin: Tylenol, Motrin, Aleve, Advil, ibuprofen and acetaminophen)

1. YES
2. NO
3. DON'T KNOW
9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPUSF

44. / ASPUSF

Do you have a health problem or take medication that makes taking aspirin unsafe for you?

(IF NEEDED: "Would you say YES or NO?")

1. YES
2. NO
3. DON'T KNOW

9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPPRV

45. / ASPPRV

Has a doctor or health provider ever discussed with you the risks and benefits of aspirin to prevent heart attack or stroke?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.AWCOND  
INTRO.AWCOND

When I read the following list, please tell me if you are aware that you have any of these conditions.

PHAWCD.(1-3)  
46.(1-3) / PHAWCD.(1-3)

[First,/(Next/How About...)]

1. "High cholesterol"
2. "High blood pressure"
3. "Parent or sibling who had a heart attack before the age of 60"

(IWER IF NECESSARY: "Are you aware if you have this condition?")

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.DRCOND  
INTRO.DRCOND

When I read the following list, please tell me if a doctor has ever told you that you have any of these conditions.

PHDRCD.(1-4)  
47.(1-4) / PHDRCD.(1-4)

[First,/(Next/How About...)]

1. "A heart attack"
2. "Angina or coronary heart disease"
3. "A stroke"
4. "Any kind of diabetes or high blood sugar"

(IWER IF NECESSARY: "Has a doctor ever told you that you have this condition?")

[FOR PHDRCD.2: (IWER IF NEEDED, CLARIFY: Angina pectoris (an-JYE-nuh or AN-jin-uh PECK-ter-iss) is severe pain in the chest associated with insufficient blood supply to the heart.)]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## SMPROB

48. / SMPROB

I have just a few more questions.

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

1. YES
2. NO -----> TKMED

DK/REFUSAL/NOT ASCERTAINED --> TKMED

## PRBLST

49. / PRBLST

Is this a condition or problem that has lasted for at least 3 months? [Please do NOT include pregnancy or menopause.]

[(IWER IF NEEDED, CLARIFY: Menopause (men-ne-paws) is the time in a woman's life when she stops having menstrual periods. It is sometimes called 'the change of life' or 'the change'.)]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## TKMED

50. / TKMED

Do you now need or take medicine prescribed by a doctor? [Please do NOT include birth control.]

1. YES
2. NO -----> QAGE4

DK/REFUSAL\NOT ASCERTAINED --> QAGE4

## TRTCOND

51. / TRTCOND

Is this medicine to treat a condition that has lasted for at least three months? [Please do NOT include pregnancy or menopause.]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## QAGE4

52. / QAGE4

What is your age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your last birthday.")

(READ LIST IF NEEDED, "Are you...")

1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## QGENDER

53. / QGENDER

(IWER: RECORD RESPONDENT'S SEX, 'DK' NOT ALLOWED)

(ASK IF NECESSARY, "Are you male or female?")

1. MALE
2. FEMALE

## EDUCAT

54. / EDUCAT

What is the highest grade or level of school that you have COMPLETED?  
Did you complete...

(IWER: IF R SAYS HE/SHE HAD NON-ACADEMIC TRAINING, SUCH AS TRADE SCHOOL, PROBE: "Did you receive a high school diploma or GED?")

(IWER: ACADEMIC TRAINING BEYOND A HIGH SCHOOL DIPLOMA THAT DOES NOT LEAD TO A BACHELORS DEGREE, SHOULD BE CODED "4". IF R WENT TO BUSINESS SCHOOL OR GOT A 3-YEAR NURSING DEGREE, ENTER "4")

(IWER: IF R OFFERS MORE THAN ONE RESPONSE, FOR EXAMPLE: "SOME HIGH SCHOOL OR GED", ENTER THE HIGHEST NUMBER THAT APPLIES.)

(READ LIST)

1. 8TH GRADE OR LESS,
2. SOME HIGH SCHOOL, BUT DID NOT GRADUATE,
3. HIGH SCHOOL GRADUATE OR GED,
4. SOME COLLEGE OR 2-YEAR DEGREE,
5. 4-YEAR COLLEGE GRADUATE, OR
6. MORE THAN A 4-YEAR COLLEGE DEGREE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

LATINO

55. / LATINO

Are you of Hispanic or Latino origin or descent?

1. YES / HISPANIC OR LATINO
2. NO / NOT HISPANIC OR LATINO

DK/REFUSAL/NOT ASCERTAINED

INTRO.RACE

INTRO.RACE

I am going to read a list of race categories. For each category, please say YES or NO if it describes your race. I must ask you about all categories in case more than one applies.

PQRACE3.(1-6)

56.(1-6) / PQRACE3.(1-6)

[(Are you)]

1. "White"
2. "Black or African-American"
3. "Asian"
4. "Native Hawaiian or other Pacific Islander"
5. "American Indian or Alaska Native"
6. "Some other race"

(IWER: IF R REPLIES "WHY ARE YOU ASKING ABOUT MY RACE?" SAY "We ask about your race for demographic purposes only. We want to be sure that the people we survey accurately represent the racial diversity of managed care enrollees in this country.")

(IWER: If R answers with a category not listed here, such as "HISPANIC" or "AMERICAN" or "MIXED RACE", probe using the category "OTHER".)

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

ALL.DONE

THANKS.SCREEN.

Those are all the questions I have.

Thank you for taking part in this important interview.

Have a nice (day/evening). Good bye.

RETURN TO COVERSHEET

## DIAL.SCREEN

DS. INTERVIEWER: YOU MAY DO THE INTERVIEW WITH ONLY THE PARENT OR GUARDIAN WHO KNOWS MOST ABOUT FNAME LNAME'S HEALTH CARE.  
PHONE NUMBER ---> [1 CELL PHONE - HAND DIAL ([AREA\$]) [FRST3\$] - [LAST4\$] /\*\*\* \*\*\*-\*\*\*\*]

(IWER: THIS IS A PROXY INTERVIEW.)

Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may be monitored and recorded for quality control. May I please speak with the person who knows the most about [NAME OF CHILD]'s health care?

(IF NEEDED: "We are conducting an important study to find out how satisfied families are with Oregon Health Plan. The results of the study will help Oregon Health Plan improve the care they provide and will also help consumers when they choose health care plans.")

(IF NEEDED: "The interview is completely confidential and voluntary, and will not affect your child's health care or benefits in any way.")

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

01. CONTINUE
02. ALREADY COMPLETED AND MAILED SURVEY BACK
03. NEW PHONE NUMBER
04. REFUSAL
05. APPOINTMENT
06. NEVER HEARD OF R
07. KNOWS R BUT HAS NO NEW NUMBER FOR R
08. RNA, ANS MACH, RETURN TO COVERSHEET
09. LANGUAGE PROBLEM -- SPEAKS SPANISH
10. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH

IF DIAL.SCREEN = 01, GO TO RE.INTRO

IF DIAL.SCREEN = 02, GO TO MAIL.SCREEN

IF DIAL.SCREEN = 03, ENTER NEW NUMBER ON COVERSHEET AND RE-DIAL

RETURN TO COVERSHEET



## MAIL.SCREEN

MS. INTERVIEWER: WE STILL NEED TO CONDUCT A TELEPHONE INTERVIEW EVEN  
THOUGH R SAYS THEY'VE SENT BACK THE MAIL SURVEY.

I'm sorry, but we haven't received your survey back -- it may have been lost in the mail. And since the deadline for mailing surveys has passed, we're now in the telephone phase of this study. May I continue?

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

1. CONTINUE
2. REFUSAL BECAUSE ALREADY COMPLETED AND MAILED SURVEY BACK
3. REFUSAL
4. APPOINTMENT

IF MAIL.SCREEN = 1, GO TO RE.INTRO  
RETURN TO COVERSHEET

## RE.INTRO

RE.INTRO. (INTERVIEWER: READ PARENS TEXT IF R ISN'T PERSON WHO ANSWERED  
PHONE OR HAS NOT HEARD IT YET.)

(Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may be monitored and recorded for quality control.)

We are conducting an important study to find out how satisfied families are with Oregon Health Plan. The results of the study will help Oregon Health Plan improve the care they provide and will also help consumers when they choose health care plans.

The interview is completely confidential and voluntary, and will not affect your child's health care or benefits in any way.

(IF R ASKS: "How long will this take?", EXPLAIN: "The questions should take about 12-15 minutes to answer.")

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

("DK" NOT ALLOWED)

1. CONTINUE
2. APPOINTMENT
3. REFUSAL
4. LANGUAGE PROBLEM -- SPEAKS SPANISH
5. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH
6. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)
7. RETURN TO CS

## SEX

SEX. (IWER: RECORD RESPONDENT'S SEX, 'DK' NOT ALLOWED)

1. MALE
2. FEMALE

## SPAN.VAR

(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

1. Spanish
2. English

## MEMBER

Q1. / MEMBER

I will be asking you about [NAME OF CHILD]'s health care. Please answer these questions based on the experiences you have had in getting health care for [NAME OF CHILD], and not on any experiences you may have had getting care for yourself or other members of your family.

Our records show that your child is now in Oregon Health Plan. Is that right?

(IWER: IF R SAYS "LEFT PLAN" OR "SWITCHED PLANS" OR "NO LONGER INSURED" ENTER "2". IF R IS NOT SURE IF HE/SHE IS PART OF Oregon Health Plan, ENTER "2".)

1. YES --> CK.PLMSTCR
2. NO

DK/REFUSAL/NOT ASCERTAINED

## NPLNAME

Q2. / NPLNAME

What is the name of your child's health plan?

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS Oregon Health Plan]

[(ENTER 5 IF R SAYS: MEDICAID)]

(IF R SAYS SOMETHING CLOSE TO Oregon Health Plan, ENTER "2")

(IF R NOT SURE OF PLAN NAME, ENTER "2")

1. EXACT MATCH -----> CK.PLMSTCR
2. POSSIBLE MATCH -----> PLNAME
3. NOT A MATCH -----> PLNAME
4. CHILD NO LONGER INSURED -----> NO.INSUR
5. CHILD INSURED BY MEDICAID BUT DOESN'T -----> CK.PLMSTCR  
KNOW PLAN NAME
6. CHILD INSURED BUT NOT BY MEDICAID -----> NO.INSUR

PLNAME

Q2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)

CK.PLMSTCR:

-----

IF NPLNAME = NOT A MATCH (3), GO TO END.SCREEN

INTRO.INCARE

INTRO.INCARE

Now I'm going to ask you some questions about your child's health care. When you answer these questions, please do NOT include dental visits or care your child got when [he/she] stayed overnight in a hospital.

INCARE

Q3. / INCARE

In the last 6 months, did your child have an illness, injury, or condition that NEEDED CARE RIGHT AWAY in a clinic, emergency room, or doctor's office?

1. YES
2. NO -----> APMAKE4

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