



All Care Health Plan  
CAHPS® 5.0 Medicaid Survey

Banner Book Report

June 2014



## **Methodology**

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

## **Sample Disposition**

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

## **Banner Tables**

- Adult Tables
- Child Tables

## **Appendix**

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

## METHODOLOGY

### Introduction

This banner book report summarizes the results of the 2014 CAHPS® Medicaid survey of All Care Health Plan members. All Care Health Plan is one of 17 CCOs that participated in the survey. It was administered over a 10-week period using a mixed-mode (mail and telephone) five-wave protocol. This protocol consisted of a pre-notification letter, an initial survey mailing and reminder postcard to all respondents, followed by a second survey mailing and reminder postcard to non-respondents. Phone follow-up was conducted for members who had not responded to the mailings. Respondents were surveyed in English and Spanish. DataStat administered the survey under contract with the State of Oregon Department of Human Services.

### Survey Milestones

Pre-notification letters mailed:	February 12, 2014
1st mailing of survey packets:	February 18, 2014
1st mailing of reminder postcards:	February 25, 2014
2nd mailing of survey packets:	March 25, 2014
2nd mailing of reminder postcards:	April 1, 2014
Phone follow-up start:	April 8, 2014
Mail and phone field terminated:	May 5, 2014

### 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, 2013. To be eligible, members had to have been enrolled in Oregon Health Plan for at least six months as of December 31, 2013. 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**

Q14/14. Got care, tests or treatment you thought you needed

Q25/28. 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**

Q17/17. Personal doctor explained things in a way that was easy to understand

Q18/18. Personal doctor listened carefully to you

Q29/19. Personal doctor showed respect for what you had to say

Q20/22. Personal doctor spent enough time with you

### **Composite: Customer Service**

Q31/32. Health plan's customer service gave needed information or help

Q32/33. Treated with courtesy and respect by health plan's customer service staff

### **Composite: Shared Decision Making**

Q10/10. Doctor talked about reasons you might want to take a medicine

Q11/11. Doctor talked about reasons you might not want to take a medicine

Q12/12. Doctor talked about what you thought was best for you when discussing a medication

### **Rating Questions**

Q13/13. Rating of all health care

Q23/26. Rating of personal doctor

Q27/30. Rating of specialist doctor

Q42/36. Rating of health plan

### **Composite: Access to Specialized Services (Child only)**

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

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

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

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

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

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

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

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

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

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

## Comparisons, Statistical Testing, Scoring, and Weighting

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

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

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

## Sample Disposition

Category	Adult		Child	
	All Care Health Plan	Overall	All Care Health Plan	Overall
<b>**First mailing - sent</b>	900	15300	900	15300
<b>*First mailing - usable survey returned</b>	186	3059	157	2459
<b>Second mailing - sent</b>	690	11718	738	12459
<b>*Second mailing - usable survey returned</b>	74	1039	67	1057
<b>*Phone - usable surveys</b>	86	1456	147	2502
<b>Total - usable surveys</b>	346	5554	371	6018
<b>†Ineligible: According to population criteria‡</b>	24	348	19	362
<b>†Ineligible: Deceased</b>	9	78	0	3
<b>†Ineligible: Mentally or physically unable to complete survey</b>	17	301	0	0
<b>†Ineligible: Language barrier</b>	1	77	0	39
<b>Incorrect address AND incorrect phone number</b>	52	1065	49	991
<b>Refusal/Returned survey blank</b>	46	720	41	783
<b>Nonresponse - Unavailable by mail or phone</b>	405	7157	420	7104
<b>Adjusted Response Rate</b>	<b>40.8%</b>	<b>38.3%</b>	<b>42.1%</b>	<b>40.4%</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© 2014 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	174 38.6%	122 35.3%	-3.32%
Female	277 61.4%	224 64.7%	3.32%
18-24	113 25.1%	49 14.2%	-10.89%
25-34	120 26.6%	68 19.7%	-6.95%
35-44	95 21.1%	43 12.4%	-8.64%
45-54	53 11.8%	76 22.0%	10.21%
55-64	35 7.8%	81 23.4%	15.65%
65-74	17 3.8%	18 5.2%	1.43%
75 or Older	18 4.0%	11 3.2%	-0.81%

### Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	230 49.9%	195 52.6%	2.67%
Female	231 50.1%	176 47.4%	-2.67%
<1, 1-3	111 24.1%	83 22.4%	-1.71%
4-7	130 28.2%	103 27.8%	-0.44%
8-12	121 26.2%	105 28.3%	2.05%
13 or older	99 21.5%	80 21.6%	0.09%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLACK OR AFR-	ASIAN	NATV ILND	AMER IND/ NATV	OTHER	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q1																						
YES	AHP TOT ADLT	339	5403	42	62	42	70	82	23	267	3	3	1	1	5	32	23	291	201	118	114	207
	OHP TOT ADLT	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
NOT ANSWERED		7	151			1	1	2	2	6							1	6	3	4	2	5
VALID CASES		339	5403	42	62	42	70	82	23	267	3	3	1	1	5	32	23	291	201	118	114	207
NUMBER OF RESPONDENTS		346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%



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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER				
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	FE- MALE	MALE			
Q3 YES	134 40%	2419 45%*	9 21%~	25 40%	17 40%~	29 41%	32 39%	13 52%~	108 40%	2 67%~	1 50%~			1 ~	10 ~	20%~	32%~	7 29%~	117 40%~	58 29%*	67 56%*	36 31%*	88 42%
NO	202 60%	2914 55%*	33 79%~	37 60%	25 60%~	42 59%	50 61%	12 48%~	162 60%	1 33%~	1 50%~	1 100%~	1 100%~	4 80%~	21 68%~	17 71%~	177 60%~	144 71%*	52 44%*	79 69%*	120 58%		
NOT ANSWERED	10	220			1		2		3		1			1		3	2	3		1	4		
VALID CASES	336	5334	42	62	42	71	82	25	270	3	2	1	1	5	31	24	294	202	119	115	208		
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%		

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q4 NEVER	2 2%	72 3%	1 ~	4%~	1 ~	4%~	~	1 1%~	~	~	~	~	1 10%~	2 ~	2%~	1 ~	2%~	1 ~	1%~	
SOMETIMES	23 19%	310 15%	1 14%~	7 28%~	3 19%~	7 27%~	3 10%~	1 8%~	18 18%~	~	~	~	1 ~100%~	2 20%~	2 29%~	20 19%~	8 15%	15 25%	6 17%~	16 20%~
USUALLY	33 27%	531 26%	8 ~	32%~	8 50%~	9 35%~	4 14%~	3 25%~	26 26%~	1 50%~	1 100%~	~	~	3 30%~	3 43%~	29 27%~	15 28%	15 25%	8 23%~	24 30%~
ALWAYS	66 53%	1161 56%	6 86%~	9 36%~	5 31%~	9 35%~	22 76%~	8 67%~	54 55%~	1 50%~	~	~	~	4 40%~	2 29%~	56 52%~	31 57%	30 49%	21 60%~	38 48%~
#ALWAYS + USUALLY (NET)	99 80%	1692 82%	6 86%~	17 68%~	13 81%~	18 69%~	26 90%~	11 92%~	80 81%~	2 100%~	1 100%~	~	~	7 70%~	5 71%~	85 79%~	46 85%	45 74%	29 83%~	62 78%~
TOP BOX SCORE	66 53%	1161 56%	6 86%~	9 36%~	5 31%~	9 35%~	22 76%~	8 67%~	54 55%~	1 50%~	~	~	~	4 40%~	2 29%~	56 52%~	31 57%	30 49%	21 60%~	38 48%~
NOT ANSWERED	10	322	2		1	3	3	1	9						10	4	6	1	9	
VALID CASES	124	2074	7	25	16	26	29	12	99	2	1		1	10	7	107	54	61	35	79
NUMBER OF RESPONDENTS	134	2396	9	25	17	29	32	13	108	2	1		1	10	7	117	58	67	36	88
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q3 = YES]

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q5 YES	230 69%	3840 72%	21 50%	38 62%	28 67%	49 69%	64 78%*	20 80%	187 70%	2 67%	1 33%	1 100%	1 100%	4 80%	21 66%	12 52%	203 69%	122 60%*	98 82%*	69 60%*	151 73%
NO	104 31%	1468 28%	21 50%	23 38%	14 33%	22 31%	18 22%*	5 20%	81 30%	1 33%	2 67%	~	~	1 20%	11 34%	11 48%	90 31%	80 40%*	21 18%*	46 40%*	57 27%
NOT ANSWERED	12	246		1	1		2		5							1	4	2	3	1	4
VALID CASES	334	5308	42	61	42	71	82	25	268	3	3	1	1	5	32	23	293	202	119	115	208
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR	AMER ASIAN	NATV ILND	AMER IND/ALSK	MUL-TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE	
Q6 NEVER	4 2%	83 2%	~	5%~	~	4%~	~	2%~	~	~100%~	1	~	~	~	4	1	2	2	1	
SOMETIMES	34 16%	655 19%	22%~	24%~	33%~	13%~	5%* 12%~	15%~	~	~	~	1	5	4	27	20	12	12	20	
USUALLY	56 27%	957 28%	22%~	10 27%~	7 29%~	12 26%~	16 28% 41%~	50 30% 50%~	~	~100%~	1	~	3	2	53	28	28	16	40	
ALWAYS	114 55%	1742 51%	56%~	43%~	38%~	57%~	67%* 47%~	91 54%~	1 50%~	1 100%~	~	3 75%~	12 60%~	5 45%~	99 54%~	61 55%	48 53%	35 54%	73 54%	
#ALWAYS + USUALLY (NET)	170 82%	2699 79%	78%~	70%~	67%~	83%~	95%* 88%~	141 83%~	2 100%~	1 100%~	1 ~100%~	3 75%~	15 75%~	7 64%~	152 83%~	89 81%	76 84%	51 78%	113 84%	
TOP BOX SCORE	114 55%	1742 51%	56%~	43%~	38%~	57%~	67%* 47%~	91 54%~	1 50%~	1 100%~	~	3 75%~	12 60%~	5 45%~	99 54%~	61 55%	48 53%	35 54%	73 54%	
NOT ANSWERED	22	401	3	1	4	3	7 3	18					1	1	20	12	8	4	17	
VALID CASES	208	3437	18	37	24	46	57 17	169	2	1	1	1	4 20	11	183	110	90	65	134	
NUMBER OF RESPONDENTS	230 100%	3838 100%	21 100%	38 100%	28 100%	49 100%	64 100% 100%	187 100%	2 100%	1 100%	1 100%	1 100%	4 100% 100%	21 100%	12 100%	203 100%	122 100%	98 100%	69 100%	151 100%

[ASKED IF Q5 = YES]

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

			AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER	
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ IND/ PAC ALSK	AMER ILND NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE MALE	
Q7 NONE	85 26%	1217 23%	20 49%~	17 27%	10 24%~	18 26%	14 17%*	5 20%~	66 25%	1 33%~	1 33%~	1 100%~	1 ~	9 20%~	9 28%~	73 41%~	18 25%~	43 33%*	41 15%*
1 TIME	50 15%	847 16%	7 17%~	10 16%	8 19%~	12 17%	8 10%	4 16%~	36 13%	~	~	~	~	3 60%~	7 22%~	40 32%~	8 14%~	18 20%*	30 7%*
2	59 18%	1010 19%	2 5%~	9 15%	9 21%~	21 30%*	14 17%	2 8%~	49 18%	~	1 33%~	~	~	1 20%~	7 22%~	3 14%~	55 19%~	24 15%	41 20%
3	44 13%	647 12%	3 7%~	9 15%	6 14%~	5 7%*	15 19%	4 16%~	42 16%*	~	~	~	~	1 3%~	42 ~	~	42 14%~	15 14%	31 13%
4	33 10%	427 8%	4 10%~	7 11%	5 12%~	2 3%*	9 11%	4 16%~	26 10%	~	1 33%~	~	~	4 12%~	4 5%~	30 10%~	9 4%*	24 20%*	25 6%
5 TO 9	37 11%	719 14%	5 12%~	6 10%	3 7%~	7 10%	13 16%	3 12%~	29 11%	2 67%~	~	~	~	4 12%~	2 9%~	33 11%~	20 8%	27 17%*	10 9%
10 OR MORE TIMES	21 6%	356 7%	~	4 6%	1 2%~	4 6%	8 10%	3 12%~	19 7%	~	~	~	1 100%~	~	~	19 7%~	9 4%	10 8%	13 6%
NOT ANSWERED	17	330	1		1	2	3		6						2	5	3	3	2
VALID CASES	329	5224	41	62	42	69	81	25	267	3	3	1	1	5	32	22	292	201	119
NUMBER OF RESPONDENTS	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q8 A HEALTH PROVIDER IS THE PERSON YOU WOULD SEE IF YOU NEED A CHECK-UP, WANT ADVICE ABOUT A HEALTH PROBLEM, OR GET SICK OR HURT. IN THE LAST 6 MONTHS, DID YOU AND A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT SPECIFIC THINGS YOU COULD DO TO PREVENT ILLNESS?

	AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE
Q8 #YES	170 71%	2839 72%	11 52%~	29 64%~	19 59%~	40 82%~	49 75%	16 84%~	139 71%~	2 100%~	2 100%~	1 ~100%~	1 25%~	17 74%~	7 54%~	153 71%~	89 66%	74 76%	55 80%*	110 67%*
NO	69 29%	1080 28%	10 48%~	16 36%~	13 41%~	9 18%~	16 25%	3 16%~	57 29%~	~	~	~	3 75%~	6 26%~	6 46%~	61 29%~	45 34%	24 24%	14 20%*	54 33%*
NOT ANSWERED	5	109				2	2	1	5						5	1	3	2	3	
VALID CASES	239	3919	21	45	32	49	65	19	196	2	2	1	4	23	13	214	134	98	69	164
NUMBER OF RESPONDENTS	244	4028	21	45	32	51	67	20	201	2	2	1	4	23	13	219	135	101	71	167
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTE	AS- IAN AMER	NATV HAW/ PAC LLND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC PAN-	NOT HIS- IC PAN-	EX & VERY GOOD & POOR	FAIR & POOR	FE- MALE	MALE	
Q9 YES	135 56%	2140 54%	6 30%	25 56%	15 47%	28 56%	44 66%	13 68%	110 56%	2 100%	1 50%	1 ~	15 25%	4 31%	124 57%	64 48%*	67 68%*	40 57%	93 56%	
Q9 NO	105 44%	1796 46%	14 70%	20 44%	17 53%	22 44%	23 34%	6 32%	88 44%	1 ~	1 50%	3 ~	8 75%	9 69%	92 43%	70 52%*	31 32%*	30 43%	72 44%	
NOT ANSWERED	4	92	1			1	1	3						3	1	3		1	2	
VALID CASES	240	3936	20	45	32	50	67	19	198	2	2	1	4	23	13	216	134	98	70	165
NUMBER OF RESPONDENTS	244	4028	21	45	32	51	67	20	201	2	2	1	4	23	13	219	135	101	71	167
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

Q10 WHEN YOU TALKED ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT WANT TO TAKE A MEDICINE?

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS		GENDER			
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ ALSK	MUL- TI	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
Q10 NOT AT ALL	8 6%	93 4%	1 ~	4%~	2 ~	7%~	4 10%~	6 6%~	~	~	~	1 ~100%~	7 ~	6%~	2 3%	5 8%	2 5%~	5 5%~	
A LITTLE	19 14%	327 16%	1 17%~	5 20%~	6 40%~	4 14%~	2 5%~	1 8%~	16 15%~	~	~	~	2 ~14%~	1 25%~	18 15%~	8 13%	11 17%	5 13%~	14 15%~
SOME	49 37%	758 36%	2 33%~	9 36%~	6 40%~	12 43%~	12 29%~	7 54%~	38 35%~	1 ~100%~	~	~	7 ~50%~	3 75%~	43 36%~	25 40%	24 36%	16 42%~	33 36%~
#A LOT	56 42%	898 43%	3 50%~	10 40%~	3 20%~	10 36%~	23 56%~	5 38%~	48 44%~	2 100%~	~	~	5 ~36%~	53 ~44%~	27 44%	26 39%	15 39%~	40 43%~	
NOT ANSWERED	3	95					3	2				1	3	2	1	2	1		
VALID CASES	132	2076	6	25	15	28	41	13	108	2	1	1	14	4	121	62	66	38	92
NUMBER OF RESPONDENTS	135	2171	6	25	15	28	44	13	110	2	1	1	15	4	124	64	67	40	93
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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



Q11 WHEN YOU TALKED ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT NOT WANT TO TAKE A MEDICINE?

			AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR	AMER ASIAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q11 NOT AT ALL	23 17%	407 20%	1 17%	3 12%	3 20%	5 18%	7 17%	3 23%	17 16%	1 50%	~	~	~	4 29%	22 ~	18%	9 14%	13 20%	7 18%	15 16%
A LITTLE	30 23%	411 20%	4 67%	6 24%	7 47%	7 25%	5 12%	~	24 22%	1 ~	100%	~	1 ~	3 21%	2 50%	27 22%	14 22%	16 24%	8 21%	22 24%
SOME	48 36%	704 34%	1 17%	10 40%	3 20%	10 36%	17 40%	6 46%	41 38%	~	~	~	~	5 36%	2 50%	44 36%	24 38%	24 36%	12 32%	36 39%
#A LOT	32 24%	554 27%	~	6 24%	2 13%	6 21%	13 31%	4 31%	27 25%	1 50%	~	~	~	2 14%	29 ~	24 24%	16 25%	13 20%	11 29%	20 22%
NOT ANSWERED	2	95					2		1					1	2		1	1		2
VALID CASES	133	2076	6	25	15	28	42	13	109	2	1		1	14	4	122	63	66	38	93
NUMBER OF RESPONDENTS	135	2171	6	25	15	28	44	13	110	2	1		1	15	4	124	64	67	40	93
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTH- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q12 #YES	92 69%	1495 72%	5 83%~	16 64%~	8 53%~	18 64%~	30 70%~	12 92%~	75 69%~	1 50%~	1 100%~	~	1 ~100%~	9 60%~	3 75%~	85 69%~	43 67%	46 70%	28 72%~	63 68%~
NO	42 31%	577 28%	1 17%~	9 36%~	7 47%~	10 36%~	13 30%~	1 8%~	34 31%~	1 50%~	~	~	~	6 40%~	1 25%~	38 31%~	21 33%	20 30%	11 28%~	30 32%~
NOT ANSWERED	1	99					1		1						1		1		1	
VALID CASES	134	2072	6	25	15	28	43	13	109	2	1		1	15	4	123	64	66	39	93
NUMBER OF RESPONDENTS	135 100%	2171 100%	6 100%	25 100%	15 100%	28 100%	44 100%	13 100%	110 100%	2 100%	1 100%		1 100%	15 100%	4 100%	124 100%	64 100%	67 100%	40 100%	93 100%

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

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

	AGE							RACE						ETHNICITY	HEALTH STATUS		GENDER				
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE			
Q13 WORST HEALTH CARE POSSIBLE	4 2%	27 0.7%	2 ~	5%~	~	~	2 3%	2 1%~	~	~	~	~	2 9%~	4 ~	2%~	1 0.8%	3 3%	~	4 2%*		
01	4 2%	36 0.9%	2 10%~	1 2%~	1 3%~	~	~	4 2%~	~	~	~	~	~	4 ~	2%~	2 2%	2 2%	2 3%	2 1%		
02		49 1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
03	4 2%	75 2%	~	~	2 6%~	2 4%~	~	4 2%~	~	~	~	~	~	4 ~	2%~	~	4 4%*	~	4 2%*		
04	6 3%	144 4%	2 ~	2 5%~	1 6%~	1 2%	~	5 3%~	~	~	~	~	1 8%~	5 2%~	2 2%	4 4%	3 4%	3 2%			
05	15 6%	268 7%	1 5%~	3 7%~	3 10%~	3 6%~	5 8%	10 5%~	1 ~100%~	~	1 ~	1 25%~	1 4%~	1 8%~	11 5%~	3 2%*	11 11%*	8 12%	7 4%		
06	12 5%	223 6%	1 5%~	1 2%~	1 3%~	4 8%~	3 5%	2 10%~	12 6%~	~	~	~	~	12 ~	6%~	4 3%	8 8%	3 4%	9 6%		
07	35 15%	446 11%	3 14%~	9 20%~	5 16%~	7 14%~	9 14%	1 5%~	30 15%~	~	~	~	1 ~	3 25%~	3 13%~	1 8%~	32 15%~	25 19%*	8 8%*	7 10%	27 17%
08	44 19%	874 22%	4 19%~	11 25%~	6 19%~	11 22%~	9 14%	2 10%~	35 18%~	~	~	~	~	8 ~	35%~	3 23%~	41 19%~	27 20%	17 18%	14 20%	30 19%
09	37 16%	633 16%	3 14%~	7 16%~	4 13%~	7 14%~	12 18%	4 20%~	32 16%~	~	~	1 ~100%~	4 ~	1 8%~	35 16%~	21 16%	15 16%	15 22%	22 14%		
BEST HEALTH CARE POSSIBLE	76 32%	1114 29%	7 33%~	8 18%~	7 23%~	14 29%~	24 37%	11 55%~	62 32%~	1 100%~	~	~	2 ~	5 50%~	6 22%~	65 46%~	48 31%~	24 36%	17 25%*	54 33%	
#8-10 (NET)	157 66%	2622 67%	14 67%~	26 59%~	17 55%~	32 65%~	45 69%	17 85%~	129 66%~	1 100%~	~	1 ~100%~	2 50%~	17 74%~	10 77%~	141 66%~	96 72%*	56 58%*	46 67%	106 65%	

Continued

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

	AGE							RACE					ETHNICITY		HEALTH STATUS		GENDER				
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AMR AS-	NATV HAW/ PAC	AMR IND/ ALSK	MUL-	TI	HIS- IC	NOT HIS- PAN-	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
9-10 (NET)	113 48%	1747 45%	10 48%~	15 34%~	11 35%~	21 43%~	36 55%	15 75%~	94 48%~	1 100%~		1 ~	2 ~	9 100%~	7 54%~	100 47%~	69 52%	39 41%	32 46%	76 47%	
NOT ANSWERED	7	139		1	1	2	2		5	1	1					6	2	5	2	5	
VALID CASES	237	3889	21	44	31	49	65	20	196	1	1		1	4	23	13	213	133	96	69	162
NUMBER OF RESPONDENTS	244 100%	4028 100%	21 100%	45 100%	32 100%	51 100%	67 100%	20 100%	201 100%	2 100%	2 100%		1 100%	4 100%	23 100%	13 100%	219 100%	135 100%	101 100%	71 100%	167 100%
MEAN	7.92	7.86	7.76	7.36	7.26	7.94	8.15	9.05	7.94	10.0	5.00		9.00	8.00	7.65	8.38	7.89	8.34	7.29	7.80	7.91
p stat_(*=Sig @ p<=.05)		.662	~	~	~	~	.328	~	~	~	~	~	~	~	~	~	~	.001*	.000*	.593	.950

[ASKED IF Q7 >= 1 TIME]

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

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q14 NEVER	7 3%	106 3%	1 5%	2 4%	2 6%	~	2 3%	5 2%	~	~	~	~	1 25%	1 4%	~	7 3%	1 0.7%*	6 6%*	1 1%	6 4%	
SOMETIMES	37 15%	606 16%	1 5%	11 24%	7 22%	11 22%	5 7%*	1 5%	30 15%	1 50%	~	~	~	3 13%	2 15%	33 15%	16 12%	19 19%	9 13%	27 16%	
USUALLY	77 32%	1251 32%	7 33%	15 33%	13 41%	16 32%	19 28%	5 25%	63 31%	2 100%	~	~	1 100%	7 30%	3 23%	69 32%	43 32%	32 32%	20 28%	55 33%	
ALWAYS	122 50%	1927 50%	12 57%	17 38%	10 31%	23 46%	41 61%*	14 70%	102 51%	1 50%	~	~	3 75%	12 52%	8 62%	109 50%	75 56%	43 43%	41 58%	78 47%	
#ALWAYS + USUALLY (NET)	199 82%	3178 82%	19 90%	32 71%	23 72%	39 78%	60 90%*	19 95%	165 83%	2 100%	1 50%	~	1 100%	3 75%	19 83%	11 85%	178 82%	118 87%*	75 75%*	133 86%	
TOP BOX SCORE	122 50%	1927 50%	12 57%	17 38%	10 31%	23 46%	41 61%*	14 70%	102 51%	1 50%	~	~	3 75%	12 52%	8 62%	109 50%	75 56%	43 43%	41 58%	78 47%	
NOT ANSWERED	1	138				1			1							1		1		1	
VALID CASES	243	3890	21	45	32	50	67	20	200	2	2		1	4	23	13	218	135	100	71	166
NUMBER OF RESPONDENTS	244	4028	21	45	32	51	67	20	201	2	2		1	4	23	13	219	135	101	71	167
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q15 YES	296 89%	4471 84%*	29 69%~	53 85%	40 95%~	61 88%	77 93%	25 100%~	241 90%	3 100%~	2 67%~	1 ~100%~	4 80%~	29 91%~	17 71%~	263 90%~	175 86%	111 93%	96 83%*	191 91%	
NO	38 11%	824 16%*	13 31%~	9 15%	2 5%~	8 12%	6 7%	28 10%	1 ~	1 33%~	1 100%~	1 ~	3 20%~	3 9%~	7 29%~	30 10%~	28 14%	9 7%	19 17%*	19 9%	
NOT ANSWERED	12	259			1	2	1	4							4	1	2	1	2		
VALID CASES	334	5295	42	62	42	69	83	25	269	3	3	1	1	5	32	24	293	203	120	115	210
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%

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

	AHP TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q16 NONE	64 23%	737 18%*	11 41%~	16 31%	7 18%~	18 31%	11 15%*	1 5%~	53 23%	1 33%~	1 50%~	~	~	~	9 31%~	2 12%~	61 24%~	49 29%*	14 13%*	24 26%	40 22%
1 TIME	68 24%	904 22%	9 33%~	10 19%	14 35%~	16 27%	12 16%*	5 24%~	52 23%	~	~	~	~	3 75%~	7 24%~	7 41%~	57 23%~	54 32%*	13 12%*	26 28%	39 21%
2	49 17%	921 22%*	2 7%~	8 15%	6 15%~	10 17%	18 24%	5 24%~	43 19%	1 33%~	~	~	~	1 25%~	4 14%~	3 18%~	45 18%~	21 13%*	26 25%*	13 14%	36 20%
3	30 11%	552 13%	3 11%~	4 8%	4 10%~	5 8%	11 15%	2 10%~	27 12%	~	~	~	~	~	1 3%~	2 12%~	27 11%~	18 11%	11 10%	11 12%	18 10%
4	29 10%	381 9%	2 7%~	9 17%	5 12%~	2 3%*	8 11%	1 5%~	21 9%	~	1 50%~	~	~	~	4 14%~	2 12%~	25 10%~	10 6%*	18 17%*	4 4%*	24 13%*
5 TO 9	30 11%	484 12%	~	4 8%	3 8%~	4 7%	10 14%	6 29%~	23 10%	1 33%~	~	~	~	~	3 10%~	1 6%~	25 10%~	11 7%*	18 17%*	11 12%	17 9%
10 OR MORE TIMES	11 4%	164 4%	~	1 2%	1 2%~	4 7%	4 5%	1 5%~	9 4%	~	~	~	1 ~100%~	1 ~	~	11 4%~	~	4 2%	6 6%	3 3%	8 4%
NOT ANSWERED	15	311	2	1	~	2	3	4	13	~	~	~	~	~	~	12	~	8	5	4	9
VALID CASES	281	4143	27	52	40	59	74	21	228	3	2	~	1	4	29	17	251	167	106	92	182
NUMBER OF RESPONDENTS	296	4454	29	53	40	61	77	25	241	3	2	~	1	4	29	17	263	175	111	96	191
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	~	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q15 = YES]

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE			
Q17 NEVER	5 2%	64 2%	1 6%	2 6%	1 3%	~	1 2%	~	4 2%	~	~	~	~	~	1 5%	~	3 0.9%	1 4%	4 1%	4 3%		
SOMETIMES	15 7%	221 7%	1 6%	3 8%	3 9%	2 5%	5 8%	~	11 6%	~	~	~	~	~	2 10%	~	13 7%	5 4%	9 10%	5 7%	9 6%	
USUALLY	46 21%	788 23%	1 6%	9 25%	6 18%	12 29%	13 21%	4 20%	37 21%	1 50%	~	~	~	~	1 25%	4 20%	2 13%	41 22%	18 15%*	27 29%*	14 21%	31 22%
ALWAYS	150 69%	2286 68%	13 81%	22 61%	23 70%	27 66%	43 69%	16 80%	122 70%	1 50%	1 100%	~	1 ~100%	3 75%	13 65%	13 87%	130 69%	93 79%*	52 57%*	48 71%	97 69%	
#ALWAYS + USUALLY (NET)	196 91%	3074 92%	14 88%	31 86%	29 88%	39 95%	56 90%	20 100%	159 91%	2 100%	1 100%	~	1 ~100%	4 100%	17 85%	15 100%	171 90%	111 95%*	79 86%*	62 91%	128 91%	
TOP BOX SCORE	150 69%	2286 68%	13 81%	22 61%	23 70%	27 66%	43 69%	16 80%	122 70%	1 50%	1 100%	~	1 ~100%	3 75%	13 65%	13 87%	130 69%	93 79%*	52 57%*	48 71%	97 69%	
NOT ANSWERED	1	36					1		1							1	1				1	
VALID CASES	216	3360	16	36	33	41	62	20	174	2	1		1	4	20	15	189	117	92	68	141	
NUMBER OF RESPONDENTS	217	3396	16	36	33	41	63	20	175	2	1		1	4	20	15	190	118	92	68	142	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

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



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q18 NEVER	9 4%	80 2%	1 6%	3 8%	1 3%	1 2%	2 3%		5 3%					3 15%	8 4%	3 3%	5 5%	1 1%	7 5%	
SOMETIMES	21 10%	289 9%		3 8%	5 15%	6 15%	6 10%	1 5%	18 10%				1 25%		1 7%	19 10%	5 4%*	16 17%*	8 12%	13 9%
USUALLY	48 22%	705 21%	3 19%	5 14%	7 21%	12 29%	18 29%	3 15%	41 24%			1 100%		5 25%	2 13%	44 23%	25 21%	23 25%	14 21%	34 24%
ALWAYS	138 64%	2267 68%	12 75%	25 69%	20 61%	22 54%	36 58%	16 80%	110 63%	2 100%	1 100%		3 75%	12 60%	12 80%	118 62%	84 72%*	48 52%*	45 66%	87 62%
#ALWAYS + USUALLY (NET)	186 86%	2972 89%	15 94%	30 83%	27 82%	34 83%	54 87%	19 95%	151 87%	2 100%	1 100%	1 100%	3 75%	17 85%	14 93%	162 86%	109 93%*	71 77%*	59 87%	121 86%
TOP BOX SCORE	138 64%	2267 68%	12 75%	25 69%	20 61%	22 54%	36 58%	16 80%	110 63%	2 100%	1 100%		3 75%	12 60%	12 80%	118 62%	84 72%*	48 52%*	45 66%	87 62%
NOT ANSWERED	1	55					1		1						1	1			1	
VALID CASES	216	3341	16	36	33	41	62	20	174	2	1	1	4	20	15	189	117	92	68	141
NUMBER OF RESPONDENTS	217 100%	3396 100%	16 100%	36 100%	33 100%	41 100%	63 100%	20 100%	175 100%	2 100%	1 100%		4 100%	20 100%	15 100%	190 100%	118 100%	92 100%	68 100%	142 100%

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

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT 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 PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q19 NEVER	10 5%	70 2%	1 6%	4 11%	1 3%	1 3%	2 3%	7 4%	~	~	~	~	~	2 11%	9 5%	2 2%*	7 8%	2 3%	7 5%		
SOMETIMES	17 8%	242 7%	1 6%	4 11%	4 12%	3 8%	4 6%	1 5%	16 9%	~	~	~	1 25%	~	17 9%	7 6%	10 11%	7 10%	10 7%		
USUALLY	36 17%	541 16%	3 19%	3 8%	3 9%	9 23%	16 26%*	1 5%	31 18%	~	~	1 100%	~	2 11%	32 17%	16 14%	19 21%	9 13%	26 18%		
ALWAYS	152 71%	2489 74%	11 69%	25 69%	25 76%	27 67%	40 65%	18 90%	120 69%	2 100%	1 100%	~	3 75%	15 79%	15 100%	130 69%	91 78%*	56 61%*	49 73%	98 70%	
#ALWAYS + USUALLY (NET)	188 87%	3030 91%	14 88%	28 78%	28 85%	36 90%	56 90%	19 95%	151 87%	2 100%	1 100%	~	1 100%	3 75%	17 89%	15 100%	162 86%	107 92%*	75 82%*	58 87%	124 88%
TOP BOX SCORE	152 71%	2489 74%	11 69%	25 69%	25 76%	27 67%	40 65%	18 90%	120 69%	2 100%	1 100%	~	3 75%	15 79%	15 100%	130 69%	91 78%*	56 61%*	49 73%	98 70%	
NOT ANSWERED	2	53				1	1	1						1	2	2		1	1		
VALID CASES	215	3343	16	36	33	40	62	20	174	2	1	1	4	19	15	188	116	92	67	141	
NUMBER OF RESPONDENTS	217	3396	16	36	33	41	63	20	175	2	1	1	4	20	15	190	118	92	68	142	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q20 NEVER	6 3%	102 3%	1 6%	2 6%	1 3%	~	2 3%	~	5 3%	~	~	~	~	~	1 5%	~	6 3%	2 2%	4 4%	~	6 4%
SOMETIMES	26 12%	343 11%	1 6%	5 14%	4 13%	7 17%	7 12%	1 6%	20 12%	~	~	~	~	~	2 10%	2 13%	22 12%	8 7%*	18 20%*	8 12%	17 12%
USUALLY	54 26%	852 27%	3 19%	11 31%	8 26%	8 20%	18 30%	5 28%	45 27%	1 50%	~	~	1 100%	2 50%	3 15%	1 7%	50 27%	24 21%	30 34%*	14 21%	39 28%
ALWAYS	123 59%	1905 60%	11 69%	18 50%	18 58%	26 63%	33 55%	12 67%	98 58%	1 50%	1 100%	~	~	2 50%	14 70%	12 80%	106 58%	80 70%*	37 42%*	44 67%	75 55%
#ALWAYS + USUALLY (NET)	177 85%	2757 86%	14 88%	29 81%	26 84%	34 83%	51 85%	17 94%	143 85%	2 100%	1 100%	~	1 100%	4 100%	17 85%	13 87%	156 85%	104 91%*	67 75%*	58 88%	114 83%
TOP BOX SCORE	123 59%	1905 60%	11 69%	18 50%	18 58%	26 63%	33 55%	12 67%	98 58%	1 50%	1 100%	~	~	2 50%	14 70%	12 80%	106 58%	80 70%*	37 42%*	44 67%	75 55%
NOT ANSWERED	8	195			2		3	2	7							6	4	3	2	5	
VALID CASES	209	3201	16	36	31	41	60	18	168	2	1		1	4	20	15	184	114	89	66	137
NUMBER OF RESPONDENTS	217 100%	3396 100%	16 100%	36 100%	33 100%	41 100%	63 100%	20 100%	175 100%	2 100%	1 100%		1 100%	4 100%	20 100%	15 100%	190 100%	118 100%	92 100%	68 100%	142 100%

[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?

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & POOR	FAIR & POOR	MALE	FE- MALE		
Q21 YES	120 57%	1971 62%	5 31%	22 61%	21 68%	21 53%	33 55%	12 67%	97 58%	2 100%	1 100%			3 75%	10 50%	6 40%	108 59%	58 51%*	59 67%*	31 47%*	85 63%*	
NO	89 43%	1225 38%	11 69%	14 39%	10 32%	19 48%	27 45%	6 33%	70 42%					1 100%	1 25%	10 50%	9 60%	75 41%	56 49%*	29 33%*	35 53%*	51 37%*
NOT ANSWERED	8	201			2	1	3	2	8								7	4	4	2	6	
VALID CASES	209	3195	16	36	31	40	60	18	167	2	1			1	4	20	15	183	114	88	66	136
NUMBER OF RESPONDENTS	217 100%	3396 100%	16 100%	36 100%	33 100%	41 100%	63 100%	20 100%	175 100%	2 100%	1 100%			1 100%	4 100%	20 100%	15 100%	190 100%	118 100%	92 100%	68 100%	142 100%

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

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

			AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ IND/ PAC ALSK	AMER ILND NATV OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE MALE			
Q22 NEVER	10 9%	127 7%	2 50%~	4 18%~	2 10%~		2 6%~	8 9%~					2 20%~	10 10%~	4 7%	6 10%	10 ~	12%~		
SOMETIMES	23 20%	264 14%	1 25%~	2 9%~	4 20%~	7 33%~	8 25%~	18 19%~					1 33%~	2 20%~	1 17%~	21 20%~	9 16%	13 22%	10 33%~	12 14%~
USUALLY	24 21%	545 29%*		5 ~	4 23%~	3 20%~	8 14%~	3 25%~	18 19%~	1 50%~			1 33%~	3 30%~	2 33%~	21 20%~	7 13%*	17 29%*	3 10%~	20 24%~
ALWAYS	60 51%	930 50%	1 25%~	11 50%~	10 50%~	11 52%~	14 44%~	9 75%~	50 53%~	1 50%~	1 100%~		1 33%~	3 30%~	3 50%~	53 50%~	36 64%*	22 38%*	17 57%~	41 49%~
#ALWAYS + USUALLY (NET)	84 72%	1474 79%	1 25%~	16 73%~	14 70%~	14 67%~	22 69%~	12 100%~	68 72%~	2 100%~	1 100%~		2 67%~	6 60%~	5 83%~	74 70%~	43 77%	39 67%	20 67%~	61 73%~
TOP BOX SCORE	60 51%	930 50%	1 25%~	11 50%~	10 50%~	11 52%~	14 44%~	9 75%~	50 53%~	1 50%~	1 100%~		1 33%~	3 30%~	3 50%~	53 50%~	36 64%*	22 38%*	17 57%~	41 49%~
NOT ANSWERED	3	57	1		1		1	3						3	2	1	1	2		
VALID CASES	117	1865	4	22	20	21	32	12	94	2	1		3	10	6	105	56	58	30	83
NUMBER OF RESPONDENTS	120	1922	5	22	21	21	33	12	97	2	1		3	10	6	108	58	59	31	85
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER					
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE				
Q23 WORST PERSONAL DOCTOR POSSIBLE	7 3%	44 1%	1 4%	3 6%	2 ~ 3%	1 ~ 5%	1 5%	5 2%	~	~	~	~	~	2 7%	7 ~ 3%	1 0.6%*	6 6%*	1 1%	6 3%		
01	2 0.7%	31 0.8%	1 4%	~	~	1 ~ 1%	1 ~ 1%	2 ~ 0.9%	~	~	~	~	~	2 ~ 0.8%	2 1%	~	~	1 1%	1 0.6%		
02	2 0.7%	33 0.8%	~	1 2%	1 3%	~	~	2 ~ 0.9%	~	~	~	~	~	2 ~ 0.8%	~	2 ~ 2%	~	1 1%	1 0.6%		
03	4 1%	49 1%	~	~	1 3%	1 2%	2 3%	4 2%*	~	~	~	~	~	4 ~ 2%	~	4 4%*	~	2 2%	2 1%		
04	9 3%	91 2%	1 4%	4 8%	2 6%	1 2%	~	8 4%	~	~	~	~	~	8 ~ 3%	4 2%	4 4%	~	8 5%			
05	14 5%	232 6%	2 8%	1 2%	3 8%	3 5%	5 7%	12 5%	~	~	~	~	~	1 6%	11 4%	5 3%	9 9%	5 5%	9 5%		
06	17 6%	158 4%	1 4%	3 6%	~	7 12%	2 3%	4 19%	14 6%	~	~	~	1 ~ 25%	2 7%	1 6%	16 7%	12 7%	5 5%	12 7%		
07	27 10%	284 7%	2 8%	3 6%	3 8%	11 18%*	8 11%	23 10%	~	~	~	~	~	3 ~ 11%	2 12%	25 10%	17 10%	10 10%	12 13%	15 9%	
08	41 15%	633 16%	5 19%	12 24%	3 8%	7 12%	11 15%	1 5%	29 13%	1 33%	1 50%	~	~	7 ~ 26%	3 18%	36 15%	30 19%*	9 9%*	13 14%	26 15%	
09	47 17%	737 19%	6 23%	5 10%	10 28%	8 13%	14 19%	4 19%	40 18%	~	~	~	~	1 ~ 25%	6 22%	4 24%	43 18%	28 17%	18 17%	20 22%	27 15%
BEST PERSONAL DOCTOR POSSIBLE	104 38%	1651 42%	7 27%	18 36%	13 36%	20 33%	29 40%	11 52%	84 38%	2 67%	1 50%	~	1 ~ 100%	2 50%	7 26%	6 35%	91 37%	63 39%	36 35%	31 34%	69 39%
#8-10 (NET)	192 70%	3021 77%*	18 69%	35 70%	26 72%	35 58%*	54 75%	16 76%	153 69%	3 100%	2 100%	~	1 ~ 100%	3 75%	20 74%	13 76%	170 69%	121 75%*	63 61%*	64 70%	122 69%

Continued

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

	AGE							RACE					ETHNICITY		HEALTH STATUS		GENDER			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
9-10 (NET)	151 55%	2388 61%	13 50%	23 46%	23 64%	28 47%	43 60%	15 71%	124 56%	2 67%	1 50%	1 ~100%	3 75%	13 48%	10 59%	134 55%	91 56%	54 52%	51 56%	96 55%
NOT ANSWERED	22	511	3	3	4	1	5	4	18					2	18	13	8	5	15	
VALID CASES	274	3943	26	50	36	60	72	21	223	3	2	1	4	27	17	245	162	103	91	176
NUMBER OF RESPONDENTS	296 100%	4454 100%	29 100%	53 100%	40 100%	61 100%	77 100%	25 100%	241 100%	3 100%	2 100%	1 100%	4 100%	29 100%	17 100%	263 100%	175 100%	111 100%	96 100%	191 100%
MEAN	8.05	8.35	7.65	7.66	8.14	7.82	8.39	8.48	8.01	9.33	9.00	10.0	8.75	7.89	8.53	8.00	8.37	7.49	8.15	7.98
p stat_(*=Sig @ p<=.05)		.036*	~.265		~.383	.119		~.576	~	~	~	~	~	~	~	~	~.013*	.006*	.598	.474

[ASKED IF Q15 = YES]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		GENDER			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q24 YES	131 40%	2057 40%	6 14%	19 31%	13 33%	33 48%	43 53%*	13 59%~	108 41%	2 67%~	1 33%~	~	~	1 20%~	14 44%~	6 25%~	121 42%~	57 29%*	69 59%*	39 34%	89 44%
NO	193 60%	3041 60%	36 86%~	43 69%	27 67%~	36 52%	38 47%*	9 41%~	154 59%	1 33%~	2 67%~	1 100%~	1 100%~	4 80%~	18 56%~	18 75%~	166 58%~	142 71%*	48 41%*	75 66%	115 56%
NOT ANSWERED	22	457			3	2	3	3	11							10	5	5	2	8	
VALID CASES	324	5097	42	62	40	69	81	22	262	3	3	1	1	5	32	24	287	199	117	114	204
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%



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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	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	GOOD & POOR	MALE	FE- MALE
Q25 NEVER	8 6%	91 5%	3 ~16%	1 8%	1 3%	3 7%		4 4%	1 50%				1 100%	2 15%	1 17%	7 6%	1 2%*	6 9%	2 5%	6 7%
SOMETIMES	26 20%	329 17%	2 33%	3 16%	5 38%	10 30%	4 10%	1 8%	20 19%	1 100%				4 31%	2 33%	23 19%	12 21%	11 16%	7 18%	18 20%
USUALLY	29 22%	546 29%	1 17%	4 21%	2 15%	8 24%	9 22%	4 31%	23 21%					4 31%	1 17%	27 22%	9 16%	20 30%*	5 13%	23 26%
ALWAYS	66 51%	927 49%	3 50%	9 47%	5 38%	14 42%	25 61%	8 62%	60 56%	1 50%				3 23%	2 33%	63 53%	35 61%*	30 45%	24 63%	41 47%
#ALWAYS + USUALLY (NET)	95 74%	1473 78%	4 67%	13 68%	7 54%	22 67%	34 83%	12 92%	83 78%	1 50%				7 54%	3 50%	90 75%	44 77%	50 75%	29 76%	64 73%
TOP BOX SCORE	66 51%	927 49%	3 50%	9 47%	5 38%	14 42%	25 61%	8 62%	60 56%	1 50%				3 23%	2 33%	63 53%	35 61%*	30 45%	24 63%	41 47%
NOT ANSWERED	2	107				2		1						1	1		2		1	1
VALID CASES	129	1893	6	19	13	33	41	13	107	2	1		1	13	6	120	57	67	38	88
NUMBER OF RESPONDENTS	131	2000	6	19	13	33	43	13	108	2	1		1	14	6	121	57	69	39	89
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE		
Q26 NONE	6 5%	66 3%	~	1 6%	~	4 12%	~	1 8%	2 2%	~	~	~	~	4 29%	1 17%	5 4%	4 7%	1 1%	4 11%	2 2%	
1 SPECIALIST	70 54%	967 51%	4 67%	12 67%	8 62%	16 48%	23 55%	3 23%	58 55%	2 100%	1 100%	~	~	1 100%	5 36%	3 50%	64 54%	32 56%	35 51%	20 53%	47 53%
2	32 25%	501 26%	1 17%	5 28%	4 31%	7 21%	14 33%	1 8%	29 27%	~	~	~	~	3 21%	1 17%	30 25%	13 23%	19 28%	6 16%	26 30%	
3	17 13%	222 12%	~	~	1 8%	6 18%	3 7%	7 54%	13 12%	~	~	~	~	2 14%	1 17%	16 13%	7 12%	10 15%	7 18%	10 11%	
4	3 2%	72 4%	1 17%	~	~	~	2 5%	~	3 3%	~	~	~	~	~	~	3 3%	1 2%	2 3%	~	3 3%	
5 OR MORE SPECIALISTS	1 0.8%	70 4%	~	~	~	~	1 8%	1 0.9%	~	~	~	~	~	~	1 0.8%	~	1 1%	~	1 3%	~	
NOT ANSWERED	2	103	~	1	~	~	1	~	2	~	~	~	~	~	2	~	1	~	1	1	
VALID CASES	129	1897	6	18	13	33	42	13	106	2	1	~	~	1	14	6	119	57	68	38	88
NUMBER OF RESPONDENTS	131	2000	6	19	13	33	43	13	108	2	1	~	~	1	14	6	121	57	69	39	89
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	~	~	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER					
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE				
Q27 WORST SPECIALIST POSSIBLE	1 0.8%	10 0.6%	~	~	~	~	2%~	~	1%~	~	~	~	~	~	1 -0.9%	~	2%~	~	1%~		
01	1 0.8%	12 0.7%	~	~	~	~	2%~	~	1%~	~	~	~	~	~	1 -0.9%	~	2%~	~	1%~		
02	2 2%	19 1%	~	1 6%~	~	1 3%~	~	~	2%~	~	~	~	~	~	2 2%	1 2%	1 2%	1 3%~	1 1%~		
03	1 0.8%	29 2%	~	~	~	1 3%~	~	~	1%~	~	~	~	~	~	1 -0.9%	~	2%~	~	1%~		
04	4 3%	30 2%	~	~	1 8%~	1 3%~	2 5%~	~	4%~	~	~	~	~	~	4 4%	3 6%	1 2%	~	4 5%~		
05	3 2%	55 3%	1 17%~	~	1 8%~	1 3%~	~	~	3%~	~	~	~	~	~	3 3%	~	3 5%~	~	3 4%~		
06	8 7%	75 4%	~	1 6%~	3 23%~	4 14%~	~	~	7%~	~	~	~	~	1 10%	1 20%	7 6%	3 6%	5 8%	4 12%~	4 5%~	
07	5 4%	144 8%*	~	2 12%~	1 8%~	~	2 5%~	~	5%~	~	~	~	~	~	5 4%	2 4%	3 5%	1 3%~	4 5%~		
08	18 15%	332 19%	~	3 18%~	~	6 21%~	6 15%~	1 8%~	13 13%~	1 ~100%~	~	~	~	3 30%	1 20%	15 13%	7 13%	9 14%	4 12%~	13 15%~	
09	33 27%	332 19%*	2 33%~	7 41%~	5 38%~	6 21%~	10 24%~	3 25%~	27 26%~	~	~	~	1 ~100%~	4 40%	2 40%	31 27%	16 30%	17 26%	13 38%~	20 24%~	
BEST SPECIALIST POSSIBLE	46 38%	747 42%	3 50%~	3 18%~	2 15%~	9 31%~	19 46%~	8 67%~	39 38%~	2 100%~	~	~	~	2 20%	1 20%	43 38%	21 40%	24 36%	11 32%~	33 39%~	
#8-10 (NET)	97 80%	1411 79%	5 83%~	13 76%~	7 54%~	21 72%~	35 85%~	12 100%~	79 77%~	2 100%~	1 100%~	~	~	1 ~100%~	9 90%	4 80%	89 79%	44 83%	50 76%	28 82%~	66 78%~

Continued

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

	AGE							RACE					ETHNICITY		HEALTH STATUS		GENDER				
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AMR AS-	NATV PAC ILND	AMR IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
9-10 (NET)	79 65%	1080 60%	5 83%	10 59%	7 54%	15 52%	29 71%	11 92%	66 64%	2 100%			1 100%	6 60%	3 60%	74 65%	37 70%	41 62%	24 71%	53 62%	
NOT ANSWERED	1	31					1		1						1		1		1		
VALID CASES	122	1786	6	17	13	29	41	12	103	2	1			1	10	5	113	53	66	34	85
NUMBER OF RESPONDENTS	123 100%	1817 100%	6 100%	17 100%	13 100%	29 100%	42 100%	12 100%	104 100%	2 100%	1 100%			1 100%	10 100%	5 100%	114 100%	53 100%	67 100%	34 100%	86 100%
MEAN	8.39	8.46	8.83	8.18	7.62	7.93	8.56	9.58	8.28	10.0	8.00			9.00	8.60	8.40	8.36	8.60	8.20	8.59	8.27
p stat_(*=Sig @ p<=.05)		.663	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.305	.286	~	~

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

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER HAW/ IND/ ALSK	OTH	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q28 YES	60 18%	1016 20%	5 12%	14 23%	4 10%	15 21%	17 21%	4 17%	51 19%	1 ~	33 ~	~	~	3 ~	10%	3 12%	56 19%	33 16%	24 21%	24 21%	34 16%
NO	267 82%	4109 80%	37 88%	48 77%	37 90%	56 79%	63 79%	19 83%	215 81%	3 100%	2 67%	1 100%	1 100%	5 100%	28 90%	21 88%	234 81%	168 84%	93 79%	89 79%	173 84%
NOT ANSWERED	19	429			2		4	2	7					1		7	3	5	3	5	
VALID CASES	327	5125	42	62	41	71	80	23	266	3	3	1	1	5	31	24	290	201	117	113	207
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER	
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	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	MALE	FE- MALE
Q29 NEVER	3 5%	95 10%		2 ~ 14%		1 ~ 7%		3 6%						3 6%	1 3%	1 4%	1 5%	1 3%
SOMETIMES	13 24%	336 35%*	1 25%	5 36%	6 ~ 43%	1 7%		11 22%	1 ~ 100%			1 50%	13 ~ 25%	8 27%	4 17%	4 21%	9 26%	
USUALLY	20 36%	299 31%	1 25%	5 36%	1 25%	3 21%	6 43%	3 75%					19 36%	8 27%	12 52%	7 37%	12 35%	
ALWAYS	19 35%	228 24%	2 50%	2 14%	3 75%	4 29%	7 50%	1 25%				1 50%	1 100%	18 34%	13 43%	6 26%	7 37%	12 35%
#ALWAYS + USUALLY (NET)	39 71%	526 55%*	3 75%	7 50%	4 100%	7 50%	13 93%	4 100%				1 50%	1 100%	37 70%	21 70%	18 78%	14 74%	24 71%
TOP BOX SCORE	19 35%	228 24%	2 50%	2 14%	3 75%	4 29%	7 50%	1 25%				1 50%	1 100%	18 34%	13 43%	6 26%	7 37%	12 35%
NOT ANSWERED	5	45	1			1	3					1	2	3	3	1	5	
VALID CASES	55	957	4	14	4	14	14	4	49	1		2	1	53	30	23	19	34
NUMBER OF RESPONDENTS	60	1002	5	14	4	15	17	4	51	1		3	3	56	33	24	24	34
	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?

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	MALE	FE- MALE	
Q30 YES	82 25%	1357 27%	6 14%	14 23%	6 15%	23 33%	25 31%	5 22%	71 27%	1 3%	~	~	~	~	4 13%	3 12%	74 26%	44 22%	36 31%	25 22%	54 26%
NO	243 75%	3728 73%	36 86%	48 77%	34 85%	47 67%	55 69%	18 78%	193 73%	2 6%	3 10%	1 10%	1 10%	5 10%	27 87%	21 88%	214 74%	156 78%	81 69%	88 78%	152 74%
NOT ANSWERED	21	469			3	1	4	2	9						1		9	4	5	3	6
VALID CASES	325	5085	42	62	40	70	80	23	264	3	3	1	1	5	31	24	288	200	117	113	206
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%

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

	AHP TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q31 NEVER	1 1%	46 4%		1 ~ 7%				1 ~ 1%							1 ~ 1%	1 ~ 3%	1 ~ 4%			
SOMETIMES	12 15%	289 23%*		2 ~ 14%	6 ~ 26%	4 ~ 17%		11 ~ 16%						1 ~ 25%	11 ~ 15%	4 9%	7 20%	5 20%	7 13%	
USUALLY	29 36%	401 32%	4 67%	6 43%	1 17%	9 39%	6 25%	2 40%	23 33%					2 ~ 50%	2 67%	26 36%	14 32%	15 43%	9 36%	19 36%
ALWAYS	39 48%	508 41%	2 33%	5 36%	5 83%	8 35%	14 58%	3 60%	35 50%	1 100%				1 ~ 25%	1 33%	35 48%	26 59%	12 34%	10 40%	27 51%
#ALWAYS + USUALLY (NET)	68 84%	909 73%*	6 100%	11 79%	6 100%	17 74%	20 83%	5 100%	58 83%	1 100%				3 ~ 75%	3 100%	61 84%	40 91%	27 77%	19 76%	46 87%
TOP BOX SCORE	39 48%	508 41%	2 33%	5 36%	5 83%	8 35%	14 58%	3 60%	35 50%	1 100%				1 ~ 25%	1 33%	35 48%	26 59%	12 34%	10 40%	27 51%
NOT ANSWERED	1	75					1		1						1		1		1	
VALID CASES	81	1245	6	14	6	23	24	5	70	1				4	3	73	44	35	25	53
NUMBER OF RESPONDENTS	82	1320	6	14	6	23	25	5	71	1				4	3	74	44	36	25	54
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]



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

	AHP TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q32 NEVER		18 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	3 4%	93 7%	~	~	~	1 4%	2 8%	~	2 3%	~	~	~	~	~	1 25%	~	3 4%	1 2%	1 3%	2 8%	1 2%
USUALLY	19 23%	288 23%	1 17%	6 43%	~	8 35%	4 16%	~	19 27%	~	~	~	~	~	~	18 24%	9 20%	10 28%	6 24%	13 24%	
ALWAYS	59 73%	849 68%	5 83%	8 57%	6 100%	14 61%	19 76%	5 100%	50 70%	1 100%	~	~	~	~	3 75%	3 100%	53 72%	34 77%	25 69%	17 68%	40 74%
#ALWAYS + USUALLY (NET)	78 96%	1137 91%	6 100%	14 100%	6 100%	22 96%	23 92%	5 100%	69 97%	1 100%	~	~	~	~	3 75%	3 100%	71 96%	43 98%	35 97%	23 92%	53 98%
TOP BOX SCORE	59 73%	849 68%	5 83%	8 57%	6 100%	14 61%	19 76%	5 100%	50 70%	1 100%	~	~	~	~	3 75%	3 100%	53 72%	34 77%	25 69%	17 68%	40 74%
NOT ANSWERED	1	73																			
VALID CASES	81	1247	6	14	6	23	25	5	71	1					4	3	74	44	36	25	54
NUMBER OF RESPONDENTS	82	1320	6	14	6	23	25	5	71	1					4	3	74	44	36	25	54
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q33 YES	103 32%	1535 30%	14 34%	23 38%	14 34%	25 35%	20 24%	5 24%	84 32%	1 33%	1 ~100%	1 ~100%	2 40%	9 30%	10 42%	89 31%	61 31%	39 34%	34 30%	67 33%	
NO	219 68%	3528 70%	27 66%	38 62%	27 66%	46 65%	60 75%	16 76%	179 68%	2 67%	3 ~100%	~	3 ~	21 60%	14 58%	197 69%	137 69%	77 66%	78 70%	137 67%	
NOT ANSWERED	24	491	1	1	2		4	4	10					2		11	6	6	4	8	
VALID CASES	322	5063	41	61	41	71	80	21	263	3	3	1	1	5	30	24	286	198	116	112	204
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	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	
PQ34 NEVER	5 2%	53 1%	1 2%	2 3%	2 ~	3 3%	~	3 1%	~	~	1 ~100%	1 ~	1 ~20%	~	1 4%	4 1%	3 2%	2 2%	2 2%	3 1%	
SOMETIMES	19 6%	302 6%	2 5%	4 7%	2 5%	7 10%	1 1%*	2 10%	16 6%	~	~	~	~	1 ~20%	1 3%	15 12%	11 6%	7 6%	6 5%	12 6%	
USUALLY	42 13%	589 12%	6 15%	9 15%	5 12%	7 10%	11 14%	3 14%	35 13%	1 33%	~	1 ~100%	~	2 7%	2 8%	37 13%	20 10%	20 17%	13 12%	28 14%	
ALWAYS	254 79%	4094 81%	32 78%	46 75%	34 83%	53 77%	68 85%	16 76%	208 79%	2 67%	3 100%	~	3 ~60%	26 90%	18 75%	228 80%	163 83%	86 75%	90 81%	160 79%	
#ALWAYS + USUALLY (NET)	296 93%	4682 93%	38 93%	55 90%	39 95%	60 87%	79 99%*	19 90%	243 93%	3 100%	3 100%	~	1 ~100%	3 60%	28 97%	20 83%	265 93%	183 93%	106 92%	103 93%	188 93%
TOP BOX SCORE	254 79%	4094 81%	32 78%	46 75%	34 83%	53 77%	68 85%	16 76%	208 79%	2 67%	3 100%	~	3 ~60%	26 90%	18 75%	228 80%	163 83%	86 75%	90 81%	160 79%	
NOT ANSWERED	2	97			2				1					1	2	1	1	1	1	1	
VALID CASES	320	5037	41	61	41	69	80	21	262	3	3	1	1	5	29	24	284	197	115	111	203
NUMBER OF RESPONDENTS	322 100%	5134 100%	41 100%	61 100%	41 100%	71 100%	80 100%	21 100%	263 100%	3 100%	3 100%	1 100%	1 100%	5 100%	30 100%	24 100%	286 100%	198 100%	116 100%	112 100%	204 100%

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

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER				
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q35 WORST HEALTH PLAN POSSIBLE	3 1%	48 1%	1 ~	2 2%	~	~	2 3%	2 ~0.8%	~	~	~	~	1 3%	3 ~	1 1%	2 2%	1 0.9%	2 1%		
01	1 0.3%	36 0.7%	~	~	1 ~	1 ~	1 ~	1 ~0.4%	~	~	~	~	~	1 ~0.4%	1 ~0.9%	~	1 ~0.5%	~		
02	4 1%	58 1%	1 2%	~	1 3%	1 1%	1 1%	4 2%*	~	~	~	~	~	4 ~	1 0.5%	2 2%	2 2%	1 0.5%		
03	3 1%	85 2%	1 ~	2 2%	1 3%	1 ~	1 1%	3 1%	~	~	~	~	~	3 ~	2 1%	1 0.9%	~	3 2%		
04	6 2%	108 2%	3 ~	5 5%	1 ~	2 1%	3 3%	5 2%	~	~	~	~	1 3%	6 ~	1 0.5%	5 4%	1 0.9%	5 3%		
05	33 11%	486 10%	3 8%	6 10%	5 13%	11 16%	6 8%	2 9%	27 11%	~	~	~	3 10%	3 14%	28 10%	13 7%*	19 17%*	11 10%	22 11%	
06	23 7%	314 6%	2 5%	7 12%	2 5%	8 12%	3 4%	1 4%	19 7%	~	~	~	4 13%	1 5%	21 8%	17 9%	6 5%	9 8%	14 7%	
07	50 16%	595 12%	7 18%	11 18%	11 28%	9 13%	9 12%	2 9%	42 16%	1 50%	~	~	6 19%	2 9%	47 17%	34 18%	15 13%	17 16%	32 16%	
08	60 19%	978 20%	7 18%	14 23%	5 13%	12 18%	18 23%	2 9%	48 19%	1 50%	~	1 ~100%	2 50%	7 23%	5 23%	52 19%	37 19%	22 20%	23 21%	36 18%
09	48 15%	825 17%	7 18%	9 15%	7 18%	13 19%	5 6%*	6 26%	38 15%	~	~	~	1 ~25%	5 16%	43 23%	32 15%	16 17%	14 14%	34 17%	
BEST HEALTH PLAN POSSIBLE	81 26%	1331 27%	13 33%	8 13%*	7 18%	11 16%*	30 39%*	10 43%	68 26%	1 ~100%	1 ~100%	~	1 ~25%	4 13%	6 27%	71 25%	55 28%	23 21%	48 28%	48 24%
#8-10 (NET)	189 61%	3134 64%	27 68%	31 52%	19 49%	36 54%	53 69%	18 78%	154 60%	1 50%	1 100%	1 100%	1 100%	4 52%	16 73%	166 59%	124 64%	61 54%	68 62%	118 60%

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					ETHNIC- ITY	HEALTH STATUS		GENDER					
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE			
9-10 (NET)	129 41%	2156 44%	20 50%	17 28%*	14 36%	24 36%	35 45%	16 70%	106 41%	1 ~100%	1 ~100%	2 ~50%	9 29%	11 50%	114 41%	87 45%	39 35%	45 41%	82 41%		
NOT ANSWERED	34	689	2	2	4	4	7	2	16	1	2	1	1	2	18	11	10	7	14		
VALID CASES	312	4865	40	60	39	67	77	23	257	2	1	1	4	31	22	279	193	112	109	198	
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%
MEAN	7.75	7.79	8.18	7.28	7.49	7.40	7.96	8.70	7.73	7.50	10.0	10.0	8.00	8.75	7.29	8.18	7.71	8.04	7.27	7.85	7.70
p stat_(*=Sig @ p<=.05)		.742		~.052		~.124	.342		~.775	~	~	~	~	~	~	~	~	~.003*	.004*	.503	.578

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q35A YES	58 18%	908 18%	1 2%	7 11%	4 10%	14 20%	21 27%*	10 43%	47 18%	1 33%	~	~	~	~	8 25%	2 8%	55 19%	19 9%*	38 33%*	17 15%	39 19%
NO	266 82%	4189 82%	41 98%	55 89%	37 90%	56 80%	58 73%*	13 57%	216 82%	2 67%	3 100%	1 100%	1 100%	5 100%	24 75%	22 92%	234 81%	181 91%*	78 67%*	95 85%	167 81%
NOT ANSWERED	22	458			2	1	5	2	10							8	4	6	4	6	
VALID CASES	324	5096	42	62	41	70	79	23	263	3	3	1	1	5	32	24	289	200	116	112	206
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%

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

	AHP TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q35B NEVER	12 21%	172 22%	1 100%	1 14%	1 25%	5 38%	3 14%	1 11%	8 17%	1 100%	~	~	~	~	3 38%	2 100%	10 19%	2 11%	9 24%	3 19%	8 21%
SOMETIMES	9 16%	131 17%	~	1 14%	1 25%	4 31%	2 10%	1 11%	8 17%	~	~	~	~	1 13%	~	9 17%	4 22%	5 14%	2 13%	7 18%	
USUALLY	14 25%	173 22%	~	3 43%	2 50%	2 15%	3 14%	4 44%	12 26%	~	~	~	~	2 25%	~	14 26%	3 17%	11 30%	4 25%	10 26%	
ALWAYS	21 38%	296 38%	~	2 29%	~	2 15%	13 62%	3 33%	18 39%	~	~	~	~	2 25%	~	20 38%	9 50%	12 32%	7 44%	13 34%	
#ALWAYS + USUALLY (NET)	35 63%	470 61%	~	5 71%	2 50%	4 31%	16 76%	7 78%	30 65%	~	~	~	~	4 50%	~	34 64%	12 67%	23 62%	11 69%	23 61%	
TOP BOX SCORE	21 38%	296 38%	~	2 29%	~	2 15%	13 62%	3 33%	18 39%	~	~	~	~	2 25%	~	20 38%	9 50%	12 32%	7 44%	13 34%	
NOT ANSWERED	2	58				1		1	1							2	1	1	1	1	
VALID CASES	56	773	1	7	4	13	21	9	46	1				8	2	53	18	37	16	38	
NUMBER OF RESPONDENTS	58	831	1	7	4	14	21	10	47	1				8	2	55	19	38	17	39	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q35A = YES]

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q35C YES	59 18%	876 17%	3 7%	7 11%	7 17%	15 22%	21 27%*	5 20%~	48 18%	1 3%	1 3%	~	~	~	6 19%	3 12%	54 19%	24 12%*	34 29%*	11 10%*	48 23%*
NO	265 82%	4320 83%	38 93%~	55 89%	34 83%~	54 78%	58 73%*	20 80%~	217 82%	2 67%~	2 67%~	1 100%~	1 100%~	4 100%~	25 81%~	21 88%~	234 81%~	176 88%*	82 71%*	100 90%*	159 77%*
NOT ANSWERED	22	357	1		2	2	5		8				1	1		9	4	6	5	5	
VALID CASES	324	5197	41	62	41	69	79	25	265	3	3	1	1	4	31	24	288	200	116	111	207
NUMBER OF RESPONDENTS	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%



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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35D NEVER	20 37%	245 32%		3 ~ 50%	2 ~ 50%	6 ~ 40%	9 ~ 45%		17 ~ 40%	1 ~ 100%				2 ~ 33%		19 ~ 39%	7 32%	13 41%	3 30%	17 39%	
SOMETIMES	3 6%	126 16%*		1 ~ 17%		2 ~ 13%			2 5%					1 ~ 17%	1 33%	2 4%	2 9%	1 3%	1 10%	2 5%	
USUALLY	13 24%	150 20%		2 ~ 33%	1 25%	4 27%	5 25%	1 20%	9 21%					3 50%	1 33%	12 24%	4 18%	9 28%	2 20%	11 25%	
ALWAYS	18 33%	244 32%	3 100%		1 ~ 25%	3 20%	6 30%	4 80%	15 35%	1 ~ 100%						1 33%	16 33%	9 41%	9 28%	4 40%	14 32%
#ALWAYS + USUALLY (NET)	31 57%	393 51%	3 100%	2 33%	2 50%	7 47%	11 55%	5 100%	24 56%	1 ~ 100%				3 50%	2 67%	28 57%	13 59%	18 56%	6 60%	25 57%	
TOP BOX SCORE	18 33%	244 32%	3 100%		1 ~ 25%	3 20%	6 30%	4 80%	15 35%	1 ~ 100%						1 33%	16 33%	9 41%	9 28%	4 40%	14 32%
NOT ANSWERED	5	42		1	3		1		5							5	2	2	1	4	
VALID CASES	54	765	3	6	4	15	20	5	43	1	1			6	3	49	22	32	10	44	
NUMBER OF RESPONDENTS	59	807	3	7	7	15	21	5	48	1	1			6	3	54	24	34	11	48	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q35C = YES]

Q35E 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. IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER TALK TOO FAST WHEN TALKING TO YOU?

	AHP TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR	AS- IAN	NATV PAC ILND	AMER ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	POOR	MALE	FE- MALE	
Q35E ALWAYS	15 5%	186 4%	6 15%	2 3%	1 2%	2 3%	4 5%	9 3%	~	~	~	~	~	~	5 17%	2 9%	13 5%	10 5%	5 4%	7 6%	8 4%
USUALLY	14 4%	261 5%	3 8%	6 10%	~	2 3%	1 1%*	1 4%	12 5%	~	50%	~	~	~	1 3%	~	13 5%	7 4%	6 5%	3 3%	11 5%
SOMETIMES	61 19%	993 19%	4 10%	13 22%	4 10%	16 24%	16 20%	7 28%	55 21%*	~	~	~	~	~	3 10%	2 9%	55 19%	32 16%	28 24%	19 17%	41 20%
NEVER	230 72%	3697 72%	27 67%	39 65%	36 88%	48 71%	58 73%	17 68%	188 71%	3 100%	1 50%	1 100%	1 100%	4 100%	21 70%	19 83%	204 72%	148 75%	76 66%	80 73%	145 71%
#NEVER + SOMETIMES (NET)	291 91%	4690 91%	31 78%	52 87%	40 98%	64 94%	74 94%	24 96%	243 92%	3 100%	1 50%	1 100%	1 100%	4 80%	24 80%	21 91%	259 91%	180 91%	104 90%	99 91%	186 91%
TOP BOX SCORE	230 72%	3697 72%	27 67%	39 65%	36 88%	48 71%	58 73%	17 68%	188 71%	3 100%	1 50%	1 100%	1 100%	4 100%	21 70%	19 83%	204 72%	148 75%	76 66%	80 73%	145 71%
NOT ANSWERED	26	417	2	2	2	3	5	9	9	1				1	2	1	12	7	7	7	7
VALID CASES	320	5137	40	60	41	68	79	25	264	3	2	1	1	4	30	23	285	197	115	109	205
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%

Q35F 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		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35F ALWAYS	5 2%	87 2%	1 3%	1 2%	1 ~	1 1%	2 3%	5 2%	~	~	~	~	~	~	5 2%	2 1%	3 3%	2 2%	3 1%		
USUALLY	14 4%	142 3%	2 5%	4 7%	3 7%	1 1%	4 5%	13 5%	~	~	~	~	~	1 3%	14 5%	4 2%*	9 8%*	2 2%	12 6%*		
SOMETIMES	60 19%	912 18%	7 18%	11 18%	2 5%	17 25%	16 20%	53 20%	~	~	~	~	1 20%	3 10%	2 9%	55 19%	35 18%	23 20%	22 20%	36 18%	
NEVER	242 75%	4005 78%	30 75%	44 73%	38 88%	48 72%	57 72%	20 80%	191 73%*	3 100%	3 100%	1 100%	1 100%	4 80%	27 87%	21 91%	211 74%	157 79%*	80 70%	84 76%	154 75%
#NEVER + SOMETIMES (NET)	302 94%	4917 96%	37 93%	55 92%	40 93%	65 97%	73 92%	25 100%	244 93%*	3 100%	3 100%	1 100%	1 100%	5 97%	30 100%	23 93%	266 93%	192 97%*	103 90%*	106 96%	190 93%
TOP BOX SCORE	242 75%	4005 78%	30 75%	44 73%	38 88%	48 72%	57 72%	20 80%	191 73%*	3 100%	3 100%	1 100%	1 100%	4 80%	27 87%	21 91%	211 74%	157 79%*	80 70%	84 76%	154 75%
NOT ANSWERED	25	408	2	2		4	5	11						1	1	12	6	7	6	7	
VALID CASES	321	5146	40	60	43	67	79	25	262	3	3	1	1	5	31	23	285	198	115	110	205
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%

Q35G IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER USE A CONDESCENDING, SARCASTIC OR RUDE TONE OR MANNER WITH YOU?

			AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL-	TI	HIS- IC	NOT HIS- PAN- IC	VERY GOOD & POOR	FAIR & POOR	MALE	FE-MALE	
Q35G ALWAYS	5 2%	75 1%	2 5%	1 2%	1 2%	~	1 1%	~	4 2%	~	~	~	~	~	1 3%	~	5 2%	2 1%	3 3%	2 2%	3 1%
USUALLY	10 3%	99 2%	1 3%	4 7%	1 2%	3 4%	1 1%	~	10 4%*	~	~	~	~	~	~	~	10 4%	2 1%*	7 6%	2 2%	8 4%
SOMETIMES	43 13%	596 12%	4 10%	6 10%	3 7%	14 21%	12 15%	2 8%	37 14%	~	~	~	1 20%	3 10%	1 4%	39 14%	17 9%*	25 22%*	12 11%	29 14%	
NEVER	263 82%	4397 85%	33 82%	49 82%	38 88%	51 75%	65 82%	23 92%	211 81%	3 100%	3 100%	1 100%	1 100%	4 80%	27 87%	22 96%	231 81%	177 89%*	80 70%*	94 85%	165 80%
#NEVER + SOMETIMES (NET)	306 95%	4993 97%	37 93%	55 92%	41 95%	65 96%	77 97%	25 100%	248 95%	3 100%	3 100%	1 100%	1 100%	5 97%	30 100%	23 95%	270 95%	194 98%*	105 91%*	106 96%	194 95%
TOP BOX SCORE	263 82%	4397 85%	33 82%	49 82%	38 88%	51 75%	65 82%	23 92%	211 81%	3 100%	3 100%	1 100%	1 100%	4 80%	27 87%	22 96%	231 81%	177 89%*	80 70%*	94 85%	165 80%
NOT ANSWERED	25	387	2	2		3	5		11					1	1	12	6	7	6	7	
VALID CASES	321	5167	40	60	43	68	79	25	262	3	3	1	1	5	31	23	285	198	115	110	205
NUMBER OF RESPONDENTS	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q35H IN THE LAST 6 MONTHS, DID YOU FEEL YOU COULD TELL A DOCTOR OR OTHER HEALTH PROVIDER ANYTHING, EVEN THINGS THAT YOU MIGHT NOT TELL ANYONE ELSE?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AMER AS-	NATV PAC ILND	AMER IND/ ALSK	OTHER	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q35H #YES DEFINITELY	142 45%	2206 43%	12 31%	23 38%	19 45%	20 30%*	50 62%*	14 56%	119 45%	2 67%	1 33%	1 ~100%	2 40%	13 43%	5 23%	132 46%	87 45%	51 44%	46 43%	93 45%	
YES SOMEWHAT	109 34%	1724 34%	18 46%	18 30%	18 43%	27 40%	17 21%*	10 40%	89 34%	1 33%	~	~	~	2 40%	11 37%	13 59%	90 32%	69 35%	39 34%	37 34%	70 34%
NO	68 21%	1181 23%	9 23%	19 32%	5 12%	20 30%	13 16%	1 4%	54 21%	2 ~	1 67%	1 ~100%	1 ~	6 20%	6 20%	4 18%	62 22%	39 20%	26 22%	25 23%	42 20%
NOT ANSWERED	27	443	3	2	1	4	4		11					2	2	13	9	6	8	7	
VALID CASES	319	5111	39	60	42	67	80	25	262	3	3	1	1	5	30	22	284	195	116	108	205
NUMBER OF RESPONDENTS	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q35I IN THE LAST 6 MONTHS, DID YOU FEEL YOU COULD TRUST A DOCTOR OR OTHER HEALTH PROVIDER WITH YOUR MEDICAL CARE?

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHER	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q35I #YES DEFINITELY	211 66%	3431 67%	27 69%	39 65%	26 60%	33 50%*	60 75%*	21 84%	167 64%	2 67%	2 67%	1 100%	1 100%	5 77%	24 77%	16 73%	186 65%	136 69%	71 61%	73 68%	134 65%
YES SOMEWHAT	84 26%	1348 26%	10 26%	16 27%	12 28%	26 39%*	15 19%	4 16%	74 28%	1 33%	1 33%	~	~	~	4 13%	6 27%	76 27%	52 27%	30 26%	27 25%	56 27%
NO	24 8%	341 7%	2 5%	5 8%	5 12%	7 11%	5 6%	~	20 8%	~	~	~	~	~	3 10%	~	22 8%	8 4%*	15 13%*	8 7%	16 8%
NOT ANSWERED	27	434	3	2	5	4	~	12	~	~	~	~	~	1	2	13	8	6	8	6	~
VALID CASES	319	5120	39	60	43	66	80	25	261	3	3	1	1	5	31	22	284	196	116	108	206
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%

Q35J IN THE LAST 6 MONTHS, DID YOU FEEL A DOCTOR OR OTHER HEALTH PROVIDER ALWAYS TOLD YOU THE TRUTH ABOUT YOUR HEALTH, EVEN IF THERE WAS BAD NEWS?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q35J #YES DEFINITELY	255 80%	3907 76%	34 87%	49 82%	34 81%	45 66%*	68 85%	19 83%	207 80%	3 100%	2 67%	1 ~100%	3 75%	27 87%	20 87%	225 80%	165 85%*	84 73%*	92 84%	158 78%	
YES SOMEWHAT	46 14%	870 17%	3 8%	5 8%	7 17%	18 26%*	11 14%	2 9%	39 15%	1 ~33%	~	~	1 ~25%	2 6%	2 9%	42 15%	23 12%	22 19%	14 13%	31 15%	
NO	17 5%	334 7%	2 5%	6 10%	1 2%	5 7%	1 1%*	2 9%	14 5%	~	1 ~100%	~	~	2 6%	1 4%	16 6%	7 4%	9 8%	4 4%	13 6%	
NOT ANSWERED	28	443	3	2	1	3	4	2	13				1	1	1	14	9	7	6	10	
VALID CASES	318	5111	39	60	42	68	80	23	260	3	3	1	1	4	31	23	283	195	115	110	202
NUMBER OF RESPONDENTS	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q35K IN THE LAST 6 MONTHS, DID YOU FEEL THIS PROVIDER CARED AS MUCH AS YOU DO ABOUT YOUR HEALTH?

	AHP TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTE	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	
Q35K #YES DEFINITELY	196 62%	3274 64%	22 56%~	34 58%	32 74%~	30 44%*	54 68%	19 79%~	155 59%	3 100%~	2 67%~	1 ~100%~	3 60%~	24 77%~	13 62%~	175 62%~	129 66%*	63 55%	66 61%	126 62%	
YES SOMEWHAT	84 26%	1308 25%	12 31%~	17 29%	5 12%~	24 35%	20 25%	5 21%~	75 29%*	1 ~33%~	1 ~	2 ~40%~	3 10%~	6 29%~	75 26%~	54 28%	28 24%	30 28%	53 26%		
NO	38 12%	554 11%	5 13%~	8 14%	6 14%~	14 21%*	5 6%*	1 ~	31 12%	1 ~100%~	1 ~	4 ~	4 13%~	2 10%~	34 12%~	12 6%*	24 21%*	13 12%	24 12%		
NOT ANSWERED	28	417	3	3	3	5	1	12	12				1	3	13	9	7	7	9		
VALID CASES	318	5137	39	59	43	68	79	24	261	3	3	1	1	5	31	21	284	195	115	109	203
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%



Q35L IN THE LAST 6 MONTHS, DID YOU FEEL THIS PROVIDER REALLY CARED ABOUT YOU AS A PERSON?

	AHP TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV PAC ILND	AMER ALSK	OTHER	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q35L NEVER	23 7%	281 6%	4 10%	5 9%	2 5%	9 13%	3 4%	20 8%	~	1 ~100%	~	~	2 7%	23 ~	8 8%	15 13%	7 4%	15 13%	8 8%	14 7%	
SOMETIMES	49 16%	704 14%	5 13%	9 16%	10 24%	14 21%	9 12%	1 4%	40 16%	1 ~	~	~	1 20%	3 10%	6 27%	39 14%	26 13%	21 18%	16 15%	32 16%	
USUALLY	63 20%	1231 24%	9 23%	9 16%	4 10%	20 30%	16 21%	5 21%	57 22%	~	~	~	1 100%	1 20%	3 10%	5 23%	57 20%	39 20%	24 21%	22 21%	41 20%
ALWAYS	179 57%	2878 56%	21 54%	34 60%	26 62%	24 36%	50 64%	18 75%	141 55%	3 100%	2 67%	~	~	3 60%	21 72%	11 50%	160 57%	121 63%	54 47%	60 57%	115 57%
#ALWAYS + USUALLY (NET)	242 77%	4109 81%	30 77%	43 75%	30 71%	44 66%	66 85%	23 96%	198 77%	3 100%	2 67%	~	~	1 100%	4 80%	24 83%	16 73%	217 78%	160 83%	78 68%	156 77%
TOP BOX SCORE	179 57%	2878 56%	21 54%	34 60%	26 62%	24 36%	50 64%	18 75%	141 55%	3 100%	2 67%	~	~	3 60%	21 72%	11 50%	160 57%	121 63%	54 47%	60 57%	115 57%
NOT ANSWERED	32	461	3	5	1	4	6	1	15					3	2	18	11	8	10	10	
VALID CASES	314	5093	39	57	42	67	78	24	258	3	3	1	1	5	29	22	279	193	114	106	202
NUMBER OF RESPONDENTS	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q35M IN THE LAST 6 MONTHS, HOW OFTEN HAVE YOU BEEN TREATED UNFAIRLY AT A DOCTOR OR OTHER HEALTH PROVIDER'S OFFICE BECAUSE OF YOUR RACE OR ETHNICITY?

			AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q35M ALWAYS	3 0.9%	72 1%	~	1 2%	1 2%	~	1 1%	~	2 0.8%	~	~	~	~	~	1 3%	~	3 1%	2 1%	1 0.9%	~	3 1%
USUALLY	6 2%	48 0.9%	1 3%	2 3%	2 5%	~	1 1%	~	3 1%	~	~	~	~	~	2 7%	~	4 1%	5 3%	1 0.9%	2 2%	4 2%
SOMETIMES	6 2%	187 4%*	~	~	1 2%	2 3%	2 2%	~	4 2%	~	~	~	~	~	1 3%	~	4 1%	~	6 5%	~	5 2%
NEVER	305 95%	4818 94%	39 98%	57 95%	39 91%	63 97%	77 95%	24 100%	254 97%	3 100%	2 100%	1 100%	1 100%	5 100%	26 87%	23 100%	273 96%	190 96%	109 93%	107 98%*	194 94%
#NEVER + SOMETIMES (NET)	311 97%	5005 98%	39 98%	57 95%	40 93%	65 100%	79 98%	24 100%	258 98%	3 100%	2 100%	1 100%	1 100%	5 100%	27 90%	23 100%	277 98%	190 96%	115 98%	107 98%	199 97%
TOP BOX SCORE	305 95%	4818 94%	39 98%	57 95%	39 91%	63 97%	77 95%	24 100%	254 97%	3 100%	2 100%	1 100%	1 100%	5 100%	26 87%	23 100%	273 96%	190 96%	109 93%	107 98%*	194 94%
NOT ANSWERED	26	430	2	2		6	3	1	10		1			2	1	13	7	5	7	6	
VALID CASES	320	5124	40	60	43	65	81	24	263	3	2	1	1	5	30	23	284	197	117	109	206
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%

Q35N IN THE LAST 6 MONTHS, HOW OFTEN HAVE YOU BEEN TREATED UNFAIRLY AT A DOCTOR OR OTHER HEALTH PROVIDER'S OFFICE BECAUSE OF THE TYPE OF HEALTH INSURANCE YOU HAVE OR BECAUSE YOU DO NOT HAVE HEALTH INSURANCE?

			AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER HAW/ IND/ PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE		
Q35N ALWAYS	10 3%	130 3%	1 3%	3 5%	3 7%	1 2%	2 2%	9 3%	~	~	~	~	~	~	9 3%	1 0.5%*	8 7%*	4 4%	6 3%		
USUALLY	12 4%	191 4%	~	3 5%	5 8%	3 4%	1 4%	11 4%	~	~	~	~	1 3%	~	12 4%	3 2%*	9 8%*	1 0.9%*	11 5%*		
SOMETIMES	43 13%	664 13%	5 13%	8 13%	9 21%	8 12%	11 14%	35 13%	~	~	~	1 20%	3 10%	~	2 9%	38 13%	22 11%	20 17%	9 8%*	32 15%	
NEVER	256 80%	4121 81%	34 85%	46 77%	31 72%	51 78%	65 80%	24 96%	209 79%	3 100%	2 100%	1 100%	1 100%	4 80%	26 87%	21 91%	226 79%	171 87%*	80 68%*	94 87%*	158 76%*
#NEVER + SOMETIMES (NET)	299 93%	4786 94%	39 98%	54 90%	40 93%	59 91%	76 94%	24 96%	244 92%	3 100%	2 100%	1 100%	1 100%	5 97%	29 100%	23 93%	264 98%*	193 85%*	100 95%	103 92%	190 92%
TOP BOX SCORE	256 80%	4121 81%	34 85%	46 77%	31 72%	51 78%	65 80%	24 96%	209 79%	3 100%	2 100%	1 100%	1 100%	4 80%	26 87%	21 91%	226 79%	171 87%*	80 68%*	94 87%*	158 76%*
NOT ANSWERED	25	448	2	2		6	3	9		1			2	1	12	7	5	8	5		
VALID CASES	321	5106	40	60	43	65	81	25	264	3	2	1	1	5	30	23	285	197	117	108	207
NUMBER OF RESPONDENTS	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q350 IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER GIVE YOU ALL THE INFORMATION YOU WANTED ABOUT YOUR HEALTH?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE		
Q350 NEVER	15 5%	298 6%	4 10%	2 3%	2 5%	3 4%	3 4%	1 4%	13 5%	~	~	~	~	20%~	3%~	3 13%	12 4%	9 5%	6 5%	7 6%	8 4%
SOMETIMES	49 15%	693 14%	4 10%	8 13%	5 12%	17 25%*	12 15%	2 8%	39 15%	~	~	~	~	20%~	6 20%	4 17%	42 15%	20 10%*	26 23%*	14 13%	34 17%
USUALLY	78 24%	1328 26%	11 28%	20 33%	10 23%	18 27%	12 15%*	5 20%~	69 26%	~	1 33%~	~	1 100%~	2 40%~	3 10%	4 17%	70 25%	46 23%	31 27%	24 22%	53 26%
ALWAYS	177 55%	2777 55%	20 51%	30 50%	26 60%	29 43%*	52 66%*	17 68%	141 54%	3 100%	2 67%	1 100%	~	2 40%~	20 67%	12 52%	160 56%	123 62%*	52 45%*	64 59%	111 54%
#ALWAYS + USUALLY (NET)	255 80%	4105 81%	31 79%	50 83%	36 84%	47 70%*	64 81%	22 88%	210 80%	3 100%	3 100%	1 100%	1 100%	4 80%	23 77%	16 70%	230 81%	169 85%*	83 72%*	88 81%	164 80%
TOP BOX SCORE	177 55%	2777 55%	20 51%	30 50%	26 60%	29 43%*	52 66%*	17 68%	141 54%	3 100%	2 67%	1 100%	~	2 40%~	20 67%	12 52%	160 56%	123 62%*	52 45%*	64 59%	111 54%
NOT ANSWERED	27	459	3	2		4	5		11					2	1	13	6	7	7	6	
VALID CASES	319	5095	39	60	43	67	79	25	262	3	3	1	1	5	30	23	284	198	115	109	206
NUMBER OF RESPONDENTS	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q35P IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER ENCOURAGE YOU TO TALK ABOUT ALL YOUR HEALTH QUESTIONS OR CONCERNS?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR	ASIAN	NATV HAW/ ILND	AMER IND/ ALSK	MULTI	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE		
Q35P NEVER	40 13%	592 12%	7 18%	8 13%	5 12%	9 13%	8 10%	2 8%	34 13%	~	~	~	~	1 20%	3 10%	5 22%	33 12%	23 12%	15 13%	17 15%	22 11%
SOMETIMES	58 18%	825 16%	6 16%	9 15%	7 17%	19 28%*	13 16%	2 8%	46 18%	~	~	~	~	2 40%	5 16%	6 26%	48 17%	26 13%*	31 27%*	18 16%	37 18%
USUALLY	71 22%	1308 26%	8 21%	14 23%	6 14%	16 24%	19 23%	8 33%	60 23%	~	1 33%	~	1 100%	~	7 23%	1 4%	69 24%	45 23%	25 22%	28 25%	43 21%
ALWAYS	150 47%	2353 46%	17 45%	29 48%	24 57%	24 35%*	41 51%	12 50%	122 47%	3 100%	2 67%	1 100%	~	2 40%	16 52%	11 48%	135 47%	102 52%*	45 39%*	47 43%	102 50%
#ALWAYS + USUALLY (NET)	221 69%	3661 72%	25 66%	43 72%	30 71%	40 59%*	60 74%	20 83%	182 69%	3 100%	3 100%	1 100%	1 100%	2 40%	23 74%	12 52%	204 72%	147 75%*	70 60%*	75 68%	145 71%
TOP BOX SCORE	150 47%	2353 46%	17 45%	29 48%	24 57%	24 35%*	41 51%	12 50%	122 47%	3 100%	2 67%	1 100%	~	2 40%	16 52%	11 48%	135 47%	102 52%*	45 39%*	47 43%	102 50%
NOT ANSWERED	27	477	4	2	1	3	3	1	11					1		1	12	8	6	6	8
VALID CASES	319	5077	38	60	42	68	81	24	262	3	3	1	1	5	31	23	285	196	116	110	204
NUMBER OF RESPONDENTS	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q35Q IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER USE MEDICAL WORDS YOU DID NOT UNDERSTAND?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	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	
Q35Q ALWAYS	186%	1874%	513%~	35%	410%~	57%	11%*	156%	1~	33%~	~	~	~	13%~	14%~	176%~	137%	33%*	87%	94%	
USUALLY	144%	2154%	13%~	35%	25%~	46%	34%~	114%	~	~	~	~	120%~	13%~	29%~	124%~	32%*	119%*	22%	126%*	
SOMETIMES	11336%	197339%	1642%~	2643%~	819%~	2537%	1131%~	9235%	133%~	267%~	~	~	360%~	1445%~	939%~	9734%~	6232%~	4942%~	3633%	7738%	
NEVER	17354%	269553%	1642%~	2847%	2867%~	3349%	5264%*	1250%~	255%	~	1100%~	1100%~	120%~	1548%~	1148%~	15856%~	11860%*	5346%*	6358%	10652%	
#NEVER + SOMETIMES (NET)	28690%	466892%	3284%~	5490%	3686%~	5887%	7795%*	2396%~	390%	267%~	1100%~	1100%~	480%~	2994%~	2087%~	25590%~	18092%	10288%	9991%	18390%	
TOP BOX SCORE	17354%	269553%	1642%~	2847%	2867%~	3349%	5264%*	1250%~	255%	~	1100%~	1100%~	120%~	1548%~	1148%~	15856%~	11860%*	5346%*	6358%	10652%	
NOT ANSWERED	28	484	4	2	1	4	3	1	12					1	1	13	8	6	7	8	
VALID CASES	318	5070	38	60	42	67	81	24	261	3	3	1	1	5	31	23	284	196	116	109	204
NUMBER OF RESPONDENTS	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q35R WHAT IS YOUR PREFERRED LANGUAGE?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTE	AS- IAN AMER	NATV HAW/ PAC LLND	AMER IND/ ALSK NATV	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q35R ENGLISH	315 98%	4755 93%*	40 98%	62 100%	40 93%	66 97%	79 100%	23 92%	262 99%*	3 100%	2 67%	1 100%	1 100%	5 100%	32 100%	19 83%	285 99%	198 99%	113 97%	109 97%	203 98%
SPANISH	4 1%	169 3%*	1 2%	~	2 5%	~	1 4%	~	~	~	~	~	~	~	4 17%	~	1 0.5%	3 3%	2 2%	2 1%	
SOME OTHER LANGUAGE	4 1%	191 4%*	~	~	1 2%	2 3%	1 4%	3 1%	~	1 33%	~	~	~	~	~	4 1%	1 0.5%	1 0.9%	1 0.9%	2 1%	
NOT ANSWERED	23	438	1			3	5	8							1	8	4	5	4	5	
VALID CASES	323	5116	41	62	43	68	79	25	265	3	3	1	1	5	32	23	289	200	117	112	207
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%

Q35S HOW WELL DO YOU SPEAK ENGLISH?

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	
Q35S VERY WELL	1 14%	11 4%	1 100%	~	~	~	~	~	~	~	~	~	~	1 25%	~	1 50%	1 33%	~	
WELL		41 17%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NOT WELL	4 57%	119 49%	~	~	3 100%	1 100%	~	1 50%	1 100%	~	~	~	~	2 50%	2 67%	1 50%	2 50%	1 33%	3 75%
NOT AT ALL	2 29%	71 30%	~	~	~	~	2 100%	1 50%	~	~	~	~	~	1 25%	1 33%	~	2 50%	1 33%	1 25%
NOT ANSWERED	1	8				1		1								1			
VALID CASES	7	242	1		3	1	2	2		1				4	3	2	4	3	4
NUMBER OF RESPONDENTS	8	250	1		3	2	2	3		1				4	4	2	4	3	4
	100%	100%	100%		100%	100%	100%	100%		100%				100%	100%	100%	100%	100%	100%

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE]



Q35T IN THE LAST 6 MONTHS, WHEN YOU CALLED OR SPOKE TO SOMEONE FROM YOUR HEALTH PLAN, HOW OFTEN DID THEY SPEAK TO YOU IN YOUR PREFERRED LANGUAGE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER	
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q35T NEVER	3 43%	52 22%	~	~	1 33%	1 50%	1 ~100%	1 33%	1 ~100%	~	~	~	1 33%	2 50%	2 ~67%	3 ~75%		
SOMETIMES	3 43%	51 22%	~	~	2 67%	1 50%	~	2 67%	~	~	~	~	1 33%	2 50%	1 50%	1 33%	1 50%	1 25%
USUALLY		50 22%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
ALWAYS	1 14%	77 34%	1 ~100%	~	~	~	~	~	~	~	~	~	1 33%	1 ~50%	1 ~50%	1 ~50%	~	
#ALWAYS + USUALLY (NET)	1 14%	128 55%	1 ~100%	~	~	~	~	~	~	~	~	~	1 33%	1 ~50%	1 ~50%	1 ~50%	~	
TOP BOX SCORE	1 14%	77 34%	1 ~100%	~	~	~	~	~	~	~	~	~	1 33%	1 ~50%	1 ~50%	1 ~50%	~	
NOT ANSWERED	1	20					1						1		1	1		
VALID CASES	7	230	1		3	2	1	3	1				3	4	2	3	2	4
NUMBER OF RESPONDENTS	8	250	1		3	2	2	3	1				4	4	2	4	3	4
	100%	100%	100%		100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE]

Q35U AN INTERPRETER IS SOMEONE WHO HELPS YOU TALK WITH OTHERS WHO DO NOT SPEAK YOUR LANGUAGE. INTERPRETERS CAN INCLUDE STAFF FROM THE HEALTH PLAN OR TELEPHONE INTERPRETERS. IN THE LAST 6 MONTHS, WAS THERE ANY TIME WHEN YOU NEEDED AN INTERPRETER TO TALK WITH SOMEONE FROM YOUR HEALTH PLAN?

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR	ASIAN	NATV HAW/ ILND	AMER IND/ ALSK NATV	MULTI	HIS-IC	NOT HIS-IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE-MALE
Q35U YES	1 12%	134 58%	~	~	~	50%	~	1 33%	~	~	~	~	~	~	1 25%	~	~	~	~
NO	7 88%	98 42%	1 100%	3 100%	1 50%	2 100%	2 100%	2 67%	1 100%	~	~	~	~	4 100%	3 75%	2 100%	4 100%	3 100%	4 100%
NOT ANSWERED		19																	
VALID CASES	8	231	1	3	2	2	3	1					4	4	2	4	3	4	
NUMBER OF RESPONDENTS	8	250	1	3	2	2	3	1					4	4	2	4	3	4	
	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE]

Q35V IN THE LAST 6 MONTHS, DID ANYONE FROM THE HEALTH PLAN LET YOU KNOW THAT AN INTERPRETER WAS AVAILABLE FREE OF CHARGE?

	AHP TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE
Q35V NEVER		21 21%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES		13 13%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
USUALLY		16 16%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
ALWAYS		50 50%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
#ALWAYS + USUALLY (NET)		66 66%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
TOP BOX SCORE		50 50%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	1	7				1		1							1				
VALID CASES NUMBER OF RESPONDENTS	1	100 107 100%				1		1							1				

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES]

Q35W IN THE LAST 6 MONTHS, HOW OFTEN DID YOU USE AN INTERPRETER PROVIDED BY YOUR HEALTH PLAN TO HELP YOU TALK WITH SOMEONE FROM THE PLAN?

	AHP TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AMR AS-	NATV PAC ILND	AMR IND/ ALSK	MUL-	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE
Q35W NEVER		16 16%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES		27 27%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
USUALLY		21 21%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
ALWAYS		37 36%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	1	6				1		1							1				
VALID CASES NUMBER OF RESPONDENTS	1	101 107 100%				1		1							1				

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES]

Q35X IN THE LAST 6 MONTHS, WHEN YOU USED AN INTERPRETER PROVIDED BY YOUR HEALTH PLAN, WHO WAS THE INTERPRETER YOU USED MOST OFTEN?

	AHP TOT ADULT	OHP TOT ADULT	AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE MALE	
Q35X A STAFF MEMBER FROM THE HEALTH PLAN	7	9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
AN INTERPRETER PROVIDED IN-PERSON BY THE HEALTH PLAN	16	21%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
A TELEPHONE INTERPRETER PROVIDED BY THE HEALTH PLAN	22	28%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMEONE ELSE PROVIDED BY THE HEALTH PLAN	7	9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
DON'T KNOW OR UNSURE	25	33%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	8																	
VALID CASES NUMBER OF RESPONDENTS	77	85																
		100%																

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND 35W = SOMETIMES OR USUALLY OR ALWAYS]

Q35Y IN THE LAST 6 MONTHS, HOW OFTEN DID THIS INTERPRETER TREAT YOU WITH COURTESY AND RESPECT?

	AHP TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE
Q35Y NEVER		1 0.9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES		6 7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
USUALLY		22 26%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
ALWAYS		56 66%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
#ALWAYS + USUALLY (NET)		78 92%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
TOP BOX SCORE		56 66%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
VALID CASES NUMBER OF RESPONDENTS		85 85 100%																

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND Q35W = SOMETIMES OR USUALLY OR ALWAYS]

Q35Z USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST INTERPRETER POSSIBLE AND 10 IS THE BEST INTERPRETER POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE THIS INTERPRETER?

	AHP TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	OTH	NOT HIS- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE	
Q35Z WORST INTERPRETER POSSIBLE	1	0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
05	5	6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
06	1	1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
07	7	9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
08	19	22%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
09	15	18%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
BEST INTERPRETER POSSIBLE	37	44%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
#8-10 (NET)	71	84%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
9-10 (NET)	52	62%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
VALID CASES NUMBER OF RESPONDENTS	85	85																
MEAN	8.74																	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND 35W = SOMETIMES OR USUALLY OR ALWAYS]

Q35AA IN THE LAST 6 MONTHS, HOW OFTEN DID YOU USE A FRIEND OR FAMILY MEMBER AS AN INTERPRETER WHEN YOU TALKED WITH SOMEONE FROM YOUR HEALTH PLAN?

	AHP TOT ADULT	OHP TOT ADULT	AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE		
Q35AA NEVER		48 48%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES		22 22%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
USUALLY		7 7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
ALWAYS	1 100%	23 23%	~	~	~100%	~	~100%	~	~	~	~	~	~	~100%	~	~	~	~
NOT ANSWERED		7																
VALID CASES	1	100			1		1							1				
NUMBER OF RESPONDENTS	1 100%	107 100%			1 100%		1 100%							1 100%				

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES]



Q35AB IN THE LAST 6 MONTHS, DID YOU USE FRIENDS OR FAMILY MEMBERS AS INTERPRETERS BECAUSE THAT WAS WHAT YOU PREFERRED?

	AHP TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE	
Q35AB NEVER		4 8%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES		18 36%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
USUALLY		14 27%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
ALWAYS		15 30%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	1	1				1		1							1			
VALID CASES NUMBER OF RESPONDENTS	1	52 100%				1		1							1			

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND Q35AA = SOMETIMES OR USUALLY OR ALWAYS]

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- AMER IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q36																					
EXCELLENT	25 8%	446 9%	5 12%	7 11%	5 12%	2 3%*	5 6%	1 4%	18 7%	1 ~ 50%	~	~	1 ~ 20%	2 6%	7 29%	18 6%	25 12%	~	8 7%	16 8%	
VERY GOOD	63 19%	1044 20%	15 36%	17 28%	9 21%	13 20%	7 8%*	1 4%	57 21%*	~	~	~	1 ~ 20%	3 10%	5 21%	56 19%	63 31%	~	26 23%	37 18%	
GOOD	116 36%	1716 34%	18 43%	19 31%	17 40%	27 41%	25 30%	10 40%	98 36%	1 33%	~	~	2 ~ 40%	13 42%	6 25%	107 37%	116 57%	~	43 38%	73 35%	
FAIR	99 30%	1325 26%	4 10%	15 25%	9 21%	17 26%	40 48%*	12 48%	77 29%	2 67%	~	1 ~ 100%	1 ~ 100%	1 20%	11 35%	5 21%	90 31%	~	99 81%*	33 29%	65 31%
POOR	23 7%	590 12%*	~	3 5%	3 7%	7 11%	7 8%	1 4%	19 7%	1 ~ 50%	~	~	~	2 6%	1 4%	20 7%	~	23 19%	3 3%*	19 9%*	
#EXCELLENT + VERY GOOD + GOOD (NET)	204 63%	3206 63%	38 90%	43 70%	31 72%	42 64%	37 44%*	12 48%	173 64%	1 33%	1 50%	~	~	4 80%	18 58%	181 75%	204 62%	~	77 68%	126 60%	
NOT ANSWERED	20	432		1		5			4	1				1		6			3	2	
VALID CASES	326	5122	42	61	43	66	84	25	269	3	2	1	1	5	31	24	291	204	122	113	210
NUMBER OF RESPONDENTS	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- AMER IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE				
Q37 EXCELLENT	53 16%	724 14%	10 24%	15 25%	6 15%	6 9%*	12 14%	3 12%	43 16%	1 ~	1 50%~100%	1 ~	3 ~	20%~	9%~	7 29%~	44 15%~	39 19%*	13 11%*	20 17%	33 16%	
VERY GOOD	69 21%	1207 24%	10 24%	16 27%	12 29%	11 16%	15 18%	5 20%	58 22%	1 33%	~	~	3 ~	60%~	5 16%	6 25%~	62 21%~	57 28%*	11 9%*	26 22%	43 21%	
GOOD	110 34%	1578 31%	14 34%	16 27%	9 22%	33 48%*	28 34%	8 32%	91 34%	1 ~	50%~	~	1 ~	20%~	15 47%	7 29%~	98 34%~	73 37%	36 30%	48 41%*	60 29%*	
FAIR	74 23%	1184 23%	7 17%	10 17%	10 24%	15 22%	21 25%	9 36%	60 23%	2 67%	~	1 ~	100%~	~	6 19%	4 17%~	69 24%~	27 13%*	46 38%*	19 16%*	54 26%*	
POOR	18 6%	395 8%	~	3 5%	4 10%	4 6%	7 8%	~	14 5%	~	~	~	~	~	3 9%	16 ~	6%~	4 2%*	14 12%*	3 3%*	15 7%*	
#EXCELLENT + VERY GOOD + GOOD (NET)	232 72%	3509 69%	34 83%	47 78%	27 66%	50 72%	55 66%	16 64%	192 72%	1 33%	2 100%	1 100%	~	~	5 ~	23 72%	20 83%	204 71%	169 85%*	60 50%*	94 81%*	136 66%*
NOT ANSWERED	22	466	1	2	2	2	1		7	1						8	4	2		7		
VALID CASES	324	5088	41	60	41	69	83	25	266	3	2	1	1	5	32	24	289	200	120	116	205	
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%	

Q38 HAVE YOU HAD EITHER A FLU SHOT OR FLU SPRAY IN THE NOSE SINCE JULY 1, 2013?

	AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q38 #YES	114 35%	2344 47%*	7 17%~	19 31%	12 29%~	21 30%	37 44%*	15 65%~	99 37%	~	~	~100%~	1 40%~	2 26%~	8 32%~	7 31%*	104 35%~	62 31%*	50 42%*	33 28%	78 38%
NO	212 65%	2668 53%*	35 83%~	43 69%	30 71%~	48 70%	47 56%*	8 35%~	170 63%	3 100%	3 100%	1 100%	~	3 ~ 60%~	23 74%~	15 68%~	189 65%~	140 69%*	69 58%*	83 72%	129 62%
DON'T KNOW	4	137				2	1	4							1	3	1	2		3	
NOT ANSWERED	16	405			1		1						1		1	1	1	1		2	
VALID CASES	326	5013	42	62	42	69	84	23	269	3	3	1	1	5	31	22	293	202	119	116	207
NUMBER OF RESPONDENTS	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q39 EVERY DAY	76 23%	1219 24%	9 21%	21 34%*	5 12%	19 27%	19 23%	3 12%	63 23%	~	~	~	~	1 20%	11 34%	5 21%	70 24%	44 22%	32 27%	28 24%	47 22%
SOME DAYS	35 11%	519 10%	2 5%	4 7%	7 16%	9 13%	9 11%	3 12%	32 12%	~	~	1 100%	~	~	1 3%	~	33 11%	17 8%	16 13%	16 14%	18 9%
NOT AT ALL	218 66%	3357 66%	31 74%	36 59%	31 72%	42 60%	55 66%	19 76%	175 65%	3 100%	3 100%	1 ~	4 80%	20 63%	19 79%	191 65%	143 70%	72 60%	72 62%	145 69%	
DON'T KNOW		16																			
NOT ANSWERED	17	443		1		1	1		3							3		2		2	
VALID CASES	329	5095	42	61	43	70	83	25	270	3	3	1	1	5	32	24	294	204	120	116	210
NUMBER OF RESPONDENTS	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL-	TI	HIS- IC	NOT HIS- PAN-	VERY GOOD & POOR	FAIR & POOR	MALE	FE- MALE
Q40 NEVER	29 26%	387 21%	3 27%	7 28%	3 25%	7 25%	7 25%	1 20%	20 21%	~	~	~	~	8 67%	1 20%	27 26%	15 25%	14 29%	13 30%	14 22%
SOMETIMES	33 30%	442 24%	2 18%	12 48%	5 42%	3 11%	10 36%	1 20%	31 33%	~	~	~	1 100%	1 20%	30 29%	17 28%	16 33%	11 25%	22 34%	
USUALLY	20 18%	333 18%	2 18%	2 8%	1 8%	9 32%	6 21%	~	19 20%	~	~	~	~	1 8%	~	20 20%	11 18%	8 17%	12 18%	12 19%
ALWAYS	28 25%	687 37%*	4 36%	4 16%	3 25%	9 32%	5 18%	3 60%	24 26%	~	~	1 100%	~	3 25%	3 60%	25 25%	17 28%	10 21%	12 27%	16 25%
#ALWAYS + USUALLY (NET)	48 44%	1020 55%*	6 55%	6 24%	4 33%	18 64%	11 39%	3 60%	43 46%	~	~	1 100%	~	4 33%	3 60%	45 44%	28 47%	18 38%	20 45%	28 44%
TOP BOX SCORE	28 25%	687 37%*	4 36%	4 16%	3 25%	9 32%	5 18%	3 60%	24 26%	~	~	1 100%	~	3 25%	3 60%	25 25%	17 28%	10 21%	12 27%	16 25%
NOT ANSWERED	1	37						1	1						1	1				1
VALID CASES	110	1849	11	25	12	28	28	5	94		1		1	12	5	102	60	48	44	64
NUMBER OF RESPONDENTS	111	1886	11	25	12	28	28	6	95		1		1	12	5	103	61	48	44	65
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	AGE							RACE					ETHNICITY		HEALTH STATUS		GENDER			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE
Q41 NEVER	58 53%	839 45%	10 91%	16 64%	3 25%	13 48%	14 50%	2 40%	48 52%	~	~	~	~	10 83%	3 60%	54 53%	34 58%	24 50%	24 56%	33 52%
SOMETIMES	34 31%	418 23%*	~	8 32%	7 58%	6 22%	12 43%	1 20%	31 33%	~	~	~	1 100%	1 8%	2 40%	31 31%	18 31%	16 33%	11 26%	23 36%
USUALLY	7 6%	263 14%*	~	~	1 8%	5 19%	~	1 20%	6 6%	~	~	~	~	1 8%	~	7 7%	3 5%	3 6%	4 9%	3 5%
ALWAYS	10 9%	327 18%*	1 9%	1 4%	1 8%	3 11%	2 7%	1 20%	8 9%	~	~	1 100%	~	~	~	9 9%	4 7%	5 10%	4 9%	5 8%
#ALWAYS + USUALLY (NET)	17 16%	589 32%*	1 9%	1 4%	2 17%	8 30%	2 7%	2 40%	14 15%	~	~	1 100%	~	1 8%	16 16%	7 12%	8 17%	8 19%	8 13%	
TOP BOX SCORE	10 9%	327 18%*	1 9%	1 4%	1 8%	3 11%	2 7%	1 20%	8 9%	~	~	1 100%	~	~	~	9 9%	4 7%	5 10%	4 9%	5 8%
NOT ANSWERED	2	39				1		1	2						2	2			1	1
VALID CASES	109	1847	11	25	12	27	28	5	93		1		1	12	5	101	59	48	43	64
NUMBER OF RESPONDENTS	111	1886	11	25	12	28	28	6	95		1		1	12	5	103	61	48	44	65
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	AGE							RACE					ETHNICITY		HEALTH STATUS		GENDER			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	MALE	FE- MALE
Q42 NEVER	56 52%	965 52%	8 73%	13 52%	6 50%	12 44%	15 56%	2 40%	46 50%	~	1 ~100%	~	8 ~67%	3 60%	51 51%	28 47%	28 60%	23 53%	32 51%	
SOMETIMES	32 30%	401 22%	2 18%	11 44%	5 42%	6 22%	7 26%	1 20%	29 32%	~	~	~	1 ~100%	2 17%	2 40%	30 30%	20 34%	12 26%	9 21%	23 37%
USUALLY	8 7%	224 12%	~	1 4%	~	3 11%	3 11%	1 20%	7 8%	~	~	~	1 8%	~	8 8%	3 5%	4 9%	5 12%	3 5%	
ALWAYS	12 11%	255 14%	1 9%	~	1 8%	6 22%	2 7%	1 20%	10 11%	~	~	~	~	1 8%	11 ~11%	8 14%	3 6%	6 14%	5 8%	
#ALWAYS + USUALLY (NET)	20 19%	479 26%*	1 9%	1 4%	1 8%	9 33%	5 19%	2 40%	17 18%	~	~	~	~	2 17%	19 ~19%	11 19%	7 15%	11 26%	8 13%	
TOP BOX SCORE	12 11%	255 14%	1 9%	~	1 8%	6 22%	2 7%	1 20%	10 11%	~	~	~	~	1 8%	11 ~11%	8 14%	3 6%	6 14%	5 8%	
NOT ANSWERED	3	40				1	1	1	3						3	2	1	1	2	
VALID CASES	108	1846	11	25	12	27	27	5	92		1		1	12	5	100	59	47	43	63
NUMBER OF RESPONDENTS	111	1886	11	25	12	28	28	6	95		1		1	12	5	103	61	48	44	65
	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/LLND	AMER IND/PAC	OTHER	MULTI	HIS-IC	NOT HIS-IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE-MALE	
Q43																					
YES	AHP TOT ADLT 67 20%	OHP TOT ADLT 1277 25%*	1 2%~	3 5%*	4 10%~	22 32%*	24 29%*	11 44%~	56 21%	1 ~	33%~	~	~	8 ~	25%~	4 17%~	60 20%~	32 16%*	34 28%*	25 22%	41 20%
NO	261 80%	3806 75%*	40 98%~	59 95%*	38 90%~	47 68%*	60 71%*	14 56%~	213 79%	3 100%~	2 67%~	1 100%~	1 100%~	5 75%~	24 75%~	20 83%~	233 80%~	169 84%*	87 72%*	90 78%	168 80%
DON'T KNOW	2	62				2			2							2	1	1		2	
NOT ANSWERED	16	409	1		1				2							2	2			1	1
VALID CASES	328	5083	41	62	42	69	84	25	269	3	3	1	1	5	32	24	293	201	121	115	209
NUMBER OF RESPONDENTS	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	AHP TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q44 YES	40 13%	646 14%	6 ~ 10%	4 10%	11 18%	14 20%	4 18%	33 13%	1 50%	~	1 ~100%	4 ~ 13%	39 ~ 15%	11 6%*	27 28%*	17 16%	22 12%				
NO	259 87%	4029 86%	42 100%	53 90%	35 90%	51 82%	57 80%	18 82%	213 87%	1 50%	2 100%	1 100%	5 ~100%	27 87%	21 100%	229 85%	188 94%*	68 72%*	92 84%	165 88%	
DON'T KNOW	29	454	3	3	8	12	3	24	1			1	3	26	4	25	6	23			
NOT ANSWERED	18	424			1	1	1	3		1			3		1	2	1	2			
VALID CASES	299	4675	42	59	39	62	71	22	246	2	2	1	1	5	31	21	268	199	95	109	187
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%

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

	AHP TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNICITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE			
Q45 YES	132 40%	2037 40%	8 20%~	10 16%*	14 33%~	34 49%	45 54%*	18 72%~	108 40%	1 33%~	~	1 ~100%~	1 20%~	15 47%~	5 21%~	121 41%~	68 34%*	60 49%*	51 45%	78 37%	
NO	198 60%	3086 60%	33 80%~	52 84%*	29 67%~	36 51%	39 46%*	7 28%~	163 60%	2 67%~	3 100%~	1 100%~	4 ~ 80%~	17 53%~	19 79%~	174 59%~	134 66%*	62 51%*	63 55%	134 63%	
NOT ANSWERED	16	431	1			1			2						2	2		2		2	
VALID CASES	330	5123	41	62	43	70	84	25	271	3	3	1	1	5	32	24	295	202	122	114	212
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE			
Q46.1																						
YES	AHP TOT ADLT	92	1388	1	9	10	25	36	10	78	2			9	8	82	43	46	30	61		
		27%	25%	2%	15%*	23%~	35%	43%*	40%~	29%	67%~	~	~	~	28%~	33%~	28%~	21%*	38%*	26%	29%	
NO	AHP TOT ADLT	254	4166	41	53	33	46	48	15	195	1	3	1	1	5	23	16	215	161	76	86	151
		73%	75%	98%~	85%*	77%~	65%	57%*	60%~	71%	33%~	100%~	100%~	100%~	100%~	72%~	67%~	72%~	79%*	62%*	74%	71%
VALID CASES	AHP TOT ADLT	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
NUMBER OF RESPONDENTS		346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q46.2 YES	111 32%	1754 32%	2 5%	8 13%*	8 19%~	34 48%*	43 51%*	14 56%~	93 34%	2 67%~	1 33%~	1 ~100%~	11 ~ 34%~	6 25%~	101 34%~	47 23%*	62 51%*	38 33%	73 34%		
NO	235 68%	3800 68%	40 95%~	54 87%*	35 81%~	37 52%*	41 49%*	11 44%~	180 66%	1 33%~	2 67%~	1 100%~	5 ~100%~	21 66%~	18 75%~	196 66%~	157 77%*	60 49%*	78 67%	139 66%	
VALID CASES	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q46.3																					
YES	69 20%	899 16%	5 12%~	7 11%*	6 14%~	19 27%	29 35%*	2 8%~	57 21%	1 33%~	1 33%~	1 ~100%~	8 ~ 25%~	1 4%~	65 22%~	29 14%*	39 32%*	15 13%*	54 25%*		
NO	277 80%	4655 84%	37 88%~	55 89%*	37 86%~	52 73%	23 65%*	92%~	216 79%	2 67%~	2 67%~	1 ~100%~	5 ~100%~	24 75%~	23 96%~	232 78%~	175 86%*	83 68%*	101 87%*	158 75%*	
VALID CASES	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%

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	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q47.1	AHP TOT ADLT	18	25	35	45	55	65														
	OHP TOT ADLT	24	34	44	54	64	OVER	WHTE	AMER	IAN	LLND	NATV	OTHR	TI	HIS- IC	HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE		
YES	15 4%	300 5%	~	~	~	10%	6%	12 4%	~	~	~	~	~	9%~	1 4%~	13 4%~	3 1%*	12 10%*	6 5%	9 4%	
NO	331 96%	5254 95%	42 100%	62 100%	43 100%	64 90%	79 94%	22 88%	261 96%	3 100%	3 100%	1 100%	1 100%	5 91%	29 96%	23 96%	284 96%	201 99%*	110 90%*	110 95%	203 96%
VALID CASES	346	5554	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%

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	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	
Q47.2	AHP TOT ADLT	18	25	35	45	55	65														
	OHP TOT ADLT	24	34	44	54	64	OVER														
YES	16 5%	~	~	2%	11%*	4%	16%	14 5%	~	~	~	~	~	3%	1 4%	14 5%	5 2%*	11 9%*	5 4%	11 5%	
NO	330 95%	42 100%	62 100%	42 98%	63 89%*	81 96%	21 84%	259 95%	3 100%	3 100%	1 100%	1 100%	5 100%	31 97%	23 96%	283 95%	199 98%*	111 91%*	111 96%	201 95%	
VALID CASES	346	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212	
NUMBER OF RESPONDENTS	346 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%	



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	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE			
Q47.3	AHP TOT ADULT	16	295	3	3	7	3	14					2	1	15	8	8	4	12			
YES	OHP TOT ADULT	5%	5%	~	~	7%	4%	8%	12%	5%	~	~	~	~	6%	4%	5%	4%	7%			
		330	5259	42	62	40	68	77	22	259	3	3	1	1	5	30	23	282	196	114	112	200
NO		95%	95%	100%	100%	93%	96%	92%	88%	95%	100%	100%	100%	100%	100%	94%	96%	95%	96%	93%	97%	94%
VALID CASES		346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
NUMBER OF RESPONDENTS		346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
		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	
AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q47.4																					
YES	60 17%	1125 20%	2 5%	4 6%*	5 12%~	13 18%	30 36%*	6 24%~	43 16%	1 33%~	~	1 ~100%~	11 ~ 34%~	8 33%~	49 16%~	22 11%*	37 30%*	22 19%	38 18%		
NO	286 83%	4429 80%	40 95%~	58 94%*	38 88%~	58 82%	54 64%*	19 76%~	230 84%	2 67%~	3 100%~	1 ~100%~	5 ~100%~	21 66%~	16 67%~	248 84%~	182 89%*	85 70%*	94 81%	174 82%	
VALID CASES	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
NUMBER OF RESPONDENTS	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
	100%	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?

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q48 YES	126 39%	1783 35%	9 21%~	26 42%	15 36%~	25 36%	41 50%*	10 40%~	105 39%	1 33%~	~	1 ~100%~	1 20%~	14 44%~	8 33%~	115 40%~	49 24%*	74 63%*	36 31%*	89 43%*	
NO	198 61%	3302 65%	33 79%~	36 58%	27 64%~	44 64%	41 50%*	15 60%~	162 61%	2 67%~	3 100%~	1 100%~	4 ~ 80%~	18 56%~	16 67%~	176 60%~	152 76%*	43 37%*	79 69%*	118 57%*	
NOT ANSWERED	22	469			1	2	2		6						6	3	5	1	5		
VALID CASES	324	5085	42	62	42	69	82	25	267	3	3	1	1	5	32	24	291	201	117	115	207
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%

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

	AHP TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & POOR	FAIR & POOR	MALE	FE- MALE		
Q49 YES	107 88%	1476 87%	6 75%	18 72%	12 80%	23 96%	38 95%	10 100%	89 87%	1 100%			1 100%	1 100%	11 85%	6 75%	99 89%	37 79%	68 94%*	35 97%	72 85%
NO	15 12%	228 13%	2 25%	7 28%	3 20%	1 4%	2 5%		13 13%						2 15%	2 25%	12 11%	10 21%	4 6%*	1 3%	13 15%
NOT ANSWERED	4	88	1	1		1	1		3						1		4	2	2		4
VALID CASES	122	1703	8	25	15	24	40	10	102	1			1	1	13	8	111	47	72	36	85
NUMBER OF RESPONDENTS	126 100%	1791 100%	9 100%	26 100%	15 100%	25 100%	41 100%	10 100%	105 100%	1 100%			1 100%	1 100%	14 100%	8 100%	115 100%	49 100%	74 100%	36 100%	89 100%

[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	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q50																					
YES	AHP TOT ADLT	12	34	26	56	71	21	189	2		1	1	22	9	208	115	102	80	141		
	OHP TOT ADLT	29%	55%*	62%~	82%*	88%*	84%~	71%	67%~	~	~100%~	20%~	69%~	38%~	72%~	57%*	89%*	70%	68%		
NO	AHP TOT ADLT	30	28	16	12	10	4	77	1	2	1		4	10	15	82	86	13	34	65	
	OHP TOT ADLT	71%~	45%*	38%~	18%*	12%*	16%~	29%	33%~	100%~	100%~	~	80%~	31%~	63%~	28%~	43%*	11%*	30%	32%	
NOT ANSWERED	AHP TOT ADLT			1	3	3		7	1						7	3	7	2	6		
VALID CASES	AHP TOT ADLT	42	62	42	68	81	25	266	3	2	1	1	5	32	24	290	201	115	114	206	
NUMBER OF RESPONDENTS	OHP TOT ADLT	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212	
		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.

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE
Q51 YES	206 95%	3137 94%	11 92%~	30 91%~	22 88%~	55 100%~	68 97%	20 100%~	177 96%~	2 100%~		1 ~100%	1 ~100%	21 95%~	8 89%~	195 96%~	107 94%	95 97%	78 99%*	128 93%*
NO	10 5%	193 6%	1 8%~	3 9%~	3 12%~		2 ~3%		7 4%~					1 5%~	1 11%~	8 4%~	7 6%	3 3%	1 1%*	9 7%*
NOT ANSWERED	5	173		1	1	1	1	1	5							5	1	4	1	4
VALID CASES	216	3330	12	33	25	55	70	20	184	2		1	1	22	9	203	114	98	79	137
NUMBER OF RESPONDENTS	221 100%	3503 100%	12 100%	34 100%	26 100%	56 100%	71 100%	21 100%	189 100%	2 100%		1 100%	1 100%	22 100%	9 100%	208 100%	115 100%	102 100%	80 100%	141 100%

[ASKED IF Q50 = YES]

NQ52 WHAT IS YOUR AGE?

			AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE				
NQ52																						
18 TO 24	46 13%	872 16%	42 100%	~	~	~	~	~	32 12%	~	~	~	2 40%	7 22%	6 25%	36 12%	38 19%*	4 3%*	16 14%	26 12%		
25 TO 34	66 19%	867 16%	~	62 ~100%	~	~	~	~	55 20%	~	1 ~100%	~	1 ~20%	4 13%	5 21%	56 19%	44 22%	18 15%	16 14%	46 22%		
35 TO 44	46 13%	843 15%	~	~	43 ~100%	~	~	~	32 12%	1 33%	1 33%	~	1 ~20%	3 9%	4 17%	37 12%	31 15%	12 10%	8 7%*	35 17%*		
45 TO 54	75 22%	1055 19%	~	~	~	71 ~100%	~	~	60 22%	~	1 33%	~	~	10 31%	5 21%	66 22%	42 21%	26 21%	32 28%	38 18%*		
55 TO 64	84 24%	1061 19%*	~	~	~	~	84 ~100%	~	71 26%	2 67%	~	1 ~100%	1 20%	7 22%	2 8%	78 26%	37 18%*	47 39%*	35 30%	49 23%		
65 TO 74	18 5%	478 9%*	~	~	~	~	16 ~64%	~	15 5%	~	~	~	~	1 3%	1 4%	15 5%	9 4%	7 6%	6 5%	10 5%		
75 OR OLDER	11 3%	377 7%*	~	~	~	~	9 ~36%	~	8 3%	1 ~33%	~	~	~	~	1 4%	9 3%	3 1%*	8 7%*	3 3%	8 4%		
VALID CASES	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212	
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%	

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

NQ53 ARE YOU MALE OR FEMALE?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	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	
NQ53 MALE	123 36%	2022 36%	16 38%~	15 24%*	8 19%~	32 45%	35 42%	9 36%~	92 34%	1 33%~	~	~	~	2 40%~	16 50%~	8 33%~	104 35%~	77 38%	38 31%	116 100%~	~
FEMALE	223 64%	3532 64%	26 62%~	47 76%*	35 81%~	39 55%	49 58%	16 64%~	181 66%	2 67%~	3 100%~	1 100%~	1 100%~	3 60%~	16 50%~	16 67%~	193 65%~	127 62%	84 69%	212 ~100%~	~
VALID CASES	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%

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



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

			AGE					RACE						ETHNICITY		HEALTH STATUS		GENDER			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q54																					
8TH GRADE OR LESS	14 4%	280 5%	~	1 2%	1 2%	~	4 5%	7 30%	11 4%	~	~	~	~	2 6%	2 9%	12 4%	11 5%	3 3%	7 6%	6 3%	
SOME HIGH SCHOOL BUT DID NOT GRADUATE	56 17%	804 16%	11 26%	11 18%	7 16%	10 14%	15 18%	2 9%	48 18%	~	~	~	~	1 20%	5 16%	4 17%	50 17%	27 13%*	29 25%*	20 18%	36 17%
HIGH SCHOOL GRADUATE OR GED	130 40%	1985 39%	20 48%	33 53%*	15 35%	28 40%	26 31%	6 26%	101 37%	~	2 67%	1 100%	1 100%	3 60%	15 47%	12 52%	112 38%	80 39%	48 41%	40 35%	90 43%
SOME COLLEGE OR 2-YEAR DEGREE	99 30%	1653 32%	11 26%	15 24%	15 35%	24 34%	27 33%	7 30%	86 32%	1 33%	1 33%	~	~	1 20%	9 28%	5 22%	93 32%	67 33%	30 25%	36 32%	63 30%
4-YEAR COLLEGE GRADUATE	16 5%	237 5%	~	1 2%	2 5%	6 9%	6 7%	1 4%	13 5%	2 67%	~	~	~	1 3%	~	16 5%	9 4%	6 5%	7 6%	9 4%	
MORE THAN 4-YEAR COLLEGE DEGREE	11 3%	145 3%	~	1 2%	3 7%	2 3%	5 6%	~	11 4%*	~	~	~	~	~	~	11 4%	9 4%	2 2%	4 4%	7 3%	
NOT ANSWERED	20	450				1	1	2	3						1	3	1	4	2	1	
VALID CASES	326	5104	42	62	43	70	83	23	270	3	3	1	1	5	32	23	294	203	118	114	211
NUMBER OF RESPONDENTS	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q55 ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q55																					
YES HISPANIC OR LATINO	24 7%	549 11%*	6 14%~	5 8%	4 10%~	5 7%	2 2%*	2 8%~	7 3%*	~	~	~	~	3 75%~	5 16%~	24 100%~	18 9%	6 5%	8 7%	16 8%	
NO NOT HISPANIC OR LATINO	297 93%	4520 89%*	36 86%~	55 92%	37 90%~	66 93%	78 98%*	23 92%~	262 97%*	3 100%~	2 100%~	1 100%~	1 100%~	1 25%~	26 84%~	297 100%~	181 91%	110 95%	104 93%	191 92%	
NOT ANSWERED	25	485		2	2		4		4	1			1	1			5	6	4	5	
VALID CASES	321	5069	42	60	41	71	80	25	269	3	2	1	1	4	31	24	297	199	116	112	207
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%

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/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q56.1																					
YES	AHP TOT ADLT	39	58	35	69	78	23	273						31	11	288	191	108	108	194	
	OHP TOT ADLT	4288	77%*	93%~	94%	81%~	97%*	93%	92%~	100%~	~	~	~	~	97%~	46%~	97%~	94%*	89%	93%*	92%*
NO	AHP TOT ADLT	3	4	8	2	6	2		3	3	1	1	5	1	13	9	13	14	8	18	
	OHP TOT ADLT	1266	23%*	7%~	6%	19%~	3%*	7%	8%~	~100%~	~100%~	~100%~	~100%~	~100%~	3%~	54%~	3%~	6%*	11%	7%*	8%*
VALID CASES	AHP TOT ADLT	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212	
NUMBER OF RESPONDENTS	OHP TOT ADLT	5554	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- 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 YES	5 1%	207 4%*	1 2%~	1 2%	1 2%~	2 ~	2	3 ~100%~	~	~	~	~	2 6%~	5 ~	2 2%~	2 1%	3 2%	1 0.9%	4 2%		
NO	341 99%	5347 96%*	41 98%~	61 98%	42 98%~	71 100%~	82 98%	25 100%~	273 100%	3 100%	1 100%	1 100%	5 100%	30 94%~	24 100%~	292 98%~	202 99%	119 98%	115 99%	208 98%	
VALID CASES	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%

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	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q56.3		AHP TOT ADLT	OHP TOT ADLT																		
YES	3 0.9%	238 4%*	~	~	1 2%~	1 1%	~	~	3 ~100%~	~	~	~	~	2 ~0.7%~	1 ~0.5%	1 0.8%	~	3 ~1%~			
NO	343 99%	5316 96%*	100%~	100%~	98%~	99%~	100%~	100%~	100%~	100%~	100%~	100%~	100%~	100%~	99%~	100%~	99%~	100%~	99%~		
VALID CASES	346	5554	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		
NUMBER OF RESPONDENTS	346 100%	5554 100%	100%	100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q56.4 YES	4 1%	38 0.7%	2 5%	1 2%	1 ~	1 1%	~	~	~	1 ~100%	~	~	3 9%	2 8%	2 0.7%	2 1%	2 2%	~	4 2%		
NO	342 99%	5516 99%	40 95%	61 98%	43 100%	70 99%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	5 100%	29 91%	22 92%	295 99%	202 99%	120 98%	116 100%	208 98%*	
VALID CASES	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q56.5 YES	21 6%	410 7%	4 10%	2 3%	2 5%	7 10%	5 6%	1 4%	~	~	~	1 ~100%	20 ~63%	3 12%	17 6%	8 4%	12 10%	11 9%	9 4%		
NO	325 94%	5144 93%	38 90%	60 97%	41 95%	64 90%	79 94%	24 96%	273 100%	3 100%	3 100%	1 100%	5 ~100%	12 38%	21 88%	280 94%	196 96%	110 90%	105 91%	203 96%	
VALID CASES	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%

Q56.6 WHAT IS YOUR RACE? RESPONSE: OTHER

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q56.6 YES	22 6%	323 6%	4 10%	2 3%	3 7%	6 8%	6 7%	1 4%	~	~	~	~	5 ~100%	17 53%	7 29%	13 4%	14 7%	7 6%	10 9%	12 6%	
NO	324 94%	5231 94%	38 90%	60 97%	40 93%	65 92%	78 93%	24 96%	273 100%	3 100%	3 100%	1 100%	1 100%	15 ~47%	17 71%	284 96%	190 93%	115 94%	106 91%	200 94%	
VALID CASES	346	5554	42	62	43	71	84	25	273	3	3	1	1	5	32	24	297	204	122	116	212
NUMBER OF RESPONDENTS	346 100%	5554 100%	42 100%	62 100%	43 100%	71 100%	84 100%	25 100%	273 100%	3 100%	3 100%	1 100%	1 100%	5 100%	32 100%	24 100%	297 100%	204 100%	122 100%	116 100%	212 100%



Q57 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q57 YES	239%	77819%*	830%~	24%~	26%~	12%*	23%*	729%~	219%~	~	~	~	~	~	~	215%~	209%~	149%	88%	1113%	117%
NO	23291%	322181%*	1970%~	4596%~	3094%~	5498%*	6697%*	1771%~	20391%~	2100%~	1100%~	~100%~	1100%~	3100%~	14100%~	1185%~	21591%~	13791%	9092%	7587%	15693%
NOT ANSWERED	5	98					1	1	1							1	1	2	1	1	
VALID CASES	255	3999	27	47	32	55	68	24	224	2	1		1	3	14	13	235	151	98	86	167
NUMBER OF RESPONDENTS	260100%	4097100%	27100%	47100%	32100%	55100%	69100%	24100%	225100%	2100%	2100%		1100%	3100%	14100%	13100%	236100%	152100%	100100%	87100%	168100%

[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	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q58.1																				
YES	11 48%	312 49%	3 38%	1 ~	1 50%	2 ~	5 71%	9 43%	~	~	~	~	~	2 ~	8 40%	7 50%	4 50%	6 55%	5 45%	
NO	12 52%	325 51%	5 63%	2 100%	1 50%	1 100%	2 ~	12 57%	~	~	~	~	~	12 ~	12 60%	7 50%	4 50%	5 45%	6 55%	
VALID CASES	23	637	8	2	2	1	2	7	21					2	20	14	8	11	11	
NUMBER OF RESPONDENTS	23 100%	637 100%	8 100%	2 100%	2 100%	1 100%	2 100%	7 100%	21 100%					2 100%	20 100%	14 100%	8 100%	11 100%	11 100%	

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

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q58.2																					
YES	AHP TOT ADULT	5	277				2	3	5						1	4	3	2	2	3	
		22%	43%	~	~	~	~100%	43%	24%	~	~	~	~	~	~	50%	20%	21%	25%	18%	27%
NO	AHP TOT ADULT	18	360	8	2	2	1	4	16						1	16	11	6	9	8	
		78%	57%	~100%	~100%	~100%	~100%	~	57%	76%	~	~	~	~	~	50%	80%	79%	75%	82%	73%
VALID CASES		23	637	8	2	2	1	2	7	21					2	20	14	8	11	11	
NUMBER OF RESPONDENTS		23	637	8	2	2	1	2	7	21					2	20	14	8	11	11	
		100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	

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

Q58.3 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- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q58.3																			
YES	AHP TOT ADLT	9	225	5	1	1	2	9							9	5	3	4	4
	OHP TOT ADLT	39%	35%	63%	50%	~100%	~ 29%	43%	~	~	~	~	~	~	~ 45%	36%	38%	36%	36%
NO	AHP TOT ADLT	14	412	3	1	2	5	12							2	11	9	5	7
	OHP TOT ADLT	61%	65%	38%	50%	~100%	~ 71%	57%	~	~	~	~	~	~ 100%	55%	64%	63%	64%	64%
VALID CASES	AHP TOT ADLT	23	637	8	2	2	1	2	7	21					2	20	14	8	11
NUMBER OF RESPONDENTS	OHP TOT ADLT	23	637	8	2	2	1	2	7	21					2	20	14	8	11
		100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	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	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q58.4																				
YES	AHP TOT ADLT	1			1			1							1	1			1	
	OHP TOT ADLT	83			50%			5%							5%	7%			9%	
		4%																		
NO	AHP TOT ADLT	22	8	2	1	1	2	7	20						2	19	13	8	11	10
	OHP TOT ADLT	554	100%	100%	50%	100%	100%	100%	95%						100%	95%	93%	100%	100%	91%
		96%																		
VALID CASES	AHP TOT ADLT	23	8	2	2	1	2	7	21						2	20	14	8	11	11
NUMBER OF RESPONDENTS	OHP TOT ADLT	637	100%	100%	100%	100%	100%	100%	100%						2	20	14	8	11	11
		100%													100%	100%	100%	100%	100%	100%

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

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLACK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHER	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q58.5	YES	2 9%	59 9%	1 12%	~	~	~	~	2 10%	~	~	~	~	~	~	2 10%	2 14%	~	1 9%	1 9%	
	NO	21 91%	578 91%	7 88%	2 100%	2 100%	1 100%	2 100%	7 100%	19 90%	~	~	~	~	~	2 100%	18 90%	12 86%	8 100%	10 91%	10 91%
VALID CASES		23	637	8	2	2	1	2	7	21						2	20	14	8	11	11
NUMBER OF RESPONDENTS		23 100%	637 100%	8 100%	2 100%	2 100%	1 100%	2 100%	7 100%	21 100%						2 100%	20 100%	14 100%	8 100%	11 100%	11 100%

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

NQ13 RATING OF ALL HEALTH CARE

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
NQ13 0-6	45 19%	821 21%	4 19%	9 20%	9 29%	10 20%	11 17%	2 10%	37 19%	1 ~100%	~	~	1 25%	3 13%	2 15%	40 19%	12 9%*	32 33%*	16 23%	29 18%
7-8	79 33%	1319 34%	7 33%	20 45%	11 35%	18 37%	18 28%	3 15%	65 33%	~	~	~	1 25%	11 48%	4 31%	73 34%	52 39%*	25 26%*	21 30%	57 35%
9-10	113 48%	1746 45%	10 48%	15 34%	11 35%	21 43%	36 55%	15 75%	94 48%	1 100%	~	1 ~100%	2 50%	9 39%	7 54%	100 47%	69 52%	39 41%	32 46%	76 47%
VALID CASES	237	3886	21	44	31	49	65	20	196	1	1	1	4	23	13	213	133	96	69	162
NUMBER OF RESPONDENTS	237 100%	3886 100%	21 100%	44 100%	31 100%	49 100%	65 100%	20 100%	196 100%	1 100%	1 100%	1 100%	4 100%	23 100%	13 100%	213 100%	133 100%	96 100%	69 100%	162 100%
MEAN	2.29	2.24	2.29	2.14	2.06	2.22	2.38	2.65	2.29	3.00	1.00	3.00	2.25	2.26	2.38	2.28	2.43	2.07	2.23	2.29
p stat_(*=Sig @ p<=.05)		.325	~	~	~	~.229	~	~	~	~	~	~	~	~	~	~	~.001*	.000*	.494	.927

[ASKED IF Q7 >= 1 TIME]

NQ23 RATING OF PERSONAL DOCTOR

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN AMER	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC PAN-	NOT HIS- IC PAN-	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
NQ23 0-6	55 20%	644 16%	6 23%	12 24%	7 19%	14 23%	10 14%	5 24%	47 21%	~	~	~	1 25%	4 15%	2 12%	50 20%	24 15%*	30 29%*	15 16%	39 22%
7-8	68 25%	927 23%	7 27%	15 30%	6 17%	18 30%	19 26%	1 5%	52 23%	1 33%	1 50%	~	~	10 37%	5 29%	61 25%	47 29%*	19 18%*	25 27%	41 23%
9-10	151 55%	2413 61%	13 50%	23 46%	23 64%	28 47%	43 60%	15 71%	124 56%	2 67%	1 50%	1 ~100%	3 75%	13 48%	10 59%	134 55%	91 56%	54 52%	51 56%	96 55%
VALID CASES	274	3984	26	50	36	60	72	21	223	3	2	1	4	27	17	245	162	103	91	176
NUMBER OF RESPONDENTS	274 100%	3984 100%	26 100%	50 100%	36 100%	60 100%	72 100%	21 100%	223 100%	3 100%	2 100%	1 100%	4 100%	27 100%	17 100%	245 100%	162 100%	103 100%	91 100%	176 100%
MEAN	2.35	2.44	2.27	2.22	2.44	2.23	2.46	2.48	2.35	2.67	2.50	3.00	2.50	2.33	2.47	2.34	2.41	2.23	2.40	2.32
p stat_(*=Sig @ p<=.05)		.038*	~.200		~.198	.159		~.818	~	~	~	~	~	~	~	~	~.125	.070	.498	.451

[ASKED IF Q15 = YES]



NQ27 RATING OF SPECIALIST SEEN MOST OFTEN

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
NQ27 0-6	20 16%	230 13%	1 17%	2 12%	5 38%	8 28%	4 10%	19 18%	~	~	~	~	~	1 10%	1 20%	19 17%	7 13%	13 20%	5 15%	15 18%	
7-8	23 19%	475 27%*	~	5 29%	1 8%	6 21%	8 20%	1 8%	18 17%	1 100%	~	~	~	3 30%	1 20%	20 18%	9 17%	12 18%	5 15%	17 20%	
9-10	79 65%	1078 60%	5 83%	10 59%	7 54%	15 52%	29 71%	11 92%	66 64%	2 100%	~	~	~	1 100%	6 60%	6 65%	37 70%	41 62%	24 71%	53 62%	
VALID CASES	122	1782	6	17	13	29	41	12	103	2	1			1	10	5	113	53	66	34	85
NUMBER OF RESPONDENTS	122 100%	1782 100%	6 100%	17 100%	13 100%	29 100%	41 100%	12 100%	103 100%	2 100%	1 100%			1 100%	10 100%	5 100%	113 100%	53 100%	66 100%	34 100%	85 100%
MEAN	2.48	2.48	2.67	2.47	2.15	2.24	2.61	2.92	2.46	3.00	2.00			3.00	2.50	2.40	2.49	2.57	2.42	2.56	2.45
p stat_(*=Sig @ p<=.05)		.903	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.298	.354	~	~	~

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

NQ35 RATING OF HEALTH PLAN

	AHP TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & POOR	FAIR & POOR	MALE	FE- MALE	
NQ35 0-6	73 23%	1152 23%	6 15%	18 30%	9 23%	22 33%	15 19%	3 13%	61 24%	~	~	~	~	~	9 29%	4 18%	66 24%	35 18%*	36 32%*	24 22%	48 24%
7-8	110 35%	1595 32%	14 35%	25 42%	16 41%	21 31%	27 35%	4 17%	90 35%	2 100%	~	~	1 100%	2 50%	13 42%	7 32%	99 35%	71 37%	37 33%	40 37%	68 34%
9-10	129 41%	2187 44%	20 50%	17 28%*	14 36%	24 36%	35 45%	16 70%	106 41%	~	1 100%	1 100%	~	2 50%	9 29%	11 50%	114 41%	87 45%	39 35%	45 41%	82 41%
VALID CASES	312	4933	40	60	39	67	77	23	257	2	1	1	1	4	31	22	279	193	112	109	198
NUMBER OF RESPONDENTS	312 100%	4933 100%	40 100%	60 100%	39 100%	67 100%	77 100%	23 100%	257 100%	2 100%	1 100%	1 100%	1 100%	4 100%	31 100%	22 100%	279 100%	193 100%	112 100%	109 100%	198 100%
MEAN	2.18	2.21	2.35	1.98	2.13	2.03	2.26	2.57	2.18	2.00	3.00	3.00	2.00	2.50	2.00	2.32	2.17	2.27	2.03	2.19	2.17
p stat_(*=Sig @ p<=.05)		.494	~.031*		~.095	.296		~.831	~	~	~	~	~	~	~	~	~	~.012*	.012*	.828	.817

NQ35Z RATING OF INTERPRETER

	AHP TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE
NQ35Z 0-6		6 8%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
7-8		26 31%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
9-10		52 62%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
VALID CASES NUMBER OF RESPONDENTS		85 85 100%																
MEAN		2.54																
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND 35W = SOMETIMES OR USUALLY OR ALWAYS]

GETTING NEEDED CARE

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
NPRBSEE4 NQ25	2.25	2.27	2.17	2.16	1.92	2.09	2.44	2.54	2.34	2.00	1.00			1.00	1.77	1.83	2.28	2.39	2.19	2.39	2.19
p stat_(*=Sig @ p<=.05)		.771	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.101	.455	~	~	~
NCARNES4 NQ14	2.32	2.31	2.48	2.09	2.03	2.24	2.51	2.65	2.34	2.00	2.00		2.00	2.50	2.35	2.46	2.32	2.43	2.18	2.44	2.27
p stat_(*=Sig @ p<=.05)		.859	~	~	~.401	.019*	~	~	~	~	~	~	~	~	~	~	~.013*	.016*	.130	.135	~
COMPOSITE	2.28	2.29	2.32	2.12	1.98	2.17	2.47	2.59	2.34	2.00	1.50	x	2.00	1.75	2.06	2.15	2.30	2.41	2.19	2.42	2.23
p stat_(*=Sig @ p<=.05)		.912	~	~	~.159	.013*	~	~	~	~	~	~	~	~	~	~	~.002*	.086	.049*	.097	~

GETTING CARE QUICKLY

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
NCARSN4 NQ4	2.33	2.38	2.71	2.04	2.12	2.04	2.66	2.58	2.35	2.50	2.00		1.00	2.10	2.00	2.32	2.43	2.23	2.43	2.27	
p stat_(*=Sig @ p<=.05)		.513	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.242	.164	~	~	
NAPGET4 NQ6	2.37	2.29	2.33	2.14	2.04	2.39	2.61	2.35	2.37	2.50	3.00	1.00	2.00	2.50	2.35	2.09	2.37	2.36	2.38	2.32	2.39
p stat_(*=Sig @ p<=.05)		.177	~	~	~	~	.001*	~	~	~	~	~	~	~	~	~	.973	.839	.606	.584	
COMPOSITE	2.35	2.33	2.52	2.09	2.08	2.21	2.63	2.47	2.36	2.50	2.50	1.00	2.00	1.75	2.22	2.05	2.34	2.39	2.30	2.38	2.33
p stat_(*=Sig @ p<=.05)		.800	~	~	~	.110	.000*	~	~	~	~	~	~	~	~	~	.304	.417	.705	.572	

HOW WELL DOCTORS COMMUNICATE

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE
NDREXPL4 NQ17	2.60	2.60	2.69	2.47	2.58	2.61	2.60	2.80	2.61	2.50	3.00	3.00	2.75	2.50	2.87	2.59	2.74	2.42	2.62	2.60
p stat_(*=Sig @ p<=.05)		.882	~	~	~	~	.942	~	~	~	~	~	~	~	~	~	~.001*	.001*	.809	.851
NDRLSTN4 NQ18	2.50	2.57	2.69	2.53	2.42	2.37	2.45	2.75	2.50	3.00	3.00	2.00	2.50	2.45	2.73	2.48	2.65	2.29	2.53	2.48
p stat_(*=Sig @ p<=.05)		.137	~	~	~	~	.533	~	~	~	~	~	~	~	~	~	~.001*	.001*	.687	.492
NDRESPU4 NQ19	2.58	2.65	2.56	2.47	2.61	2.58	2.55	2.85	2.56	3.00	3.00	2.00	2.50	2.68	3.00	2.55	2.71	2.42	2.60	2.57
p stat_(*=Sig @ p<=.05)		.139	~	~	~	~	.654	~	~	~	~	~	~	~	~	~	~.005*	.004*	.829	.843
NDRTMEN4 NQ20	2.44	2.46	2.56	2.31	2.42	2.46	2.40	2.61	2.43	2.50	3.00	2.00	2.50	2.55	2.67	2.42	2.61	2.17	2.55	2.38
p stat_(*=Sig @ p<=.05)		.674	~	~	~	~	.663	~	~	~	~	~	~	~	~	~	~.000*	.000*	.137	.129
COMPOSITE	2.53	2.57	2.62	2.44	2.51	2.50	2.50	2.75	2.53	2.75	3.00	x 2.25	2.56	2.55	2.82	2.51	2.68	2.33	2.57	2.51
p stat_(*=Sig @ p<=.05)		.642	~	~	~	~	.779	~	~	~	~	~	~	~	~	~	~.018*	.012*	.672	.637

CUSTOMER SERVICE

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
NPBCLCS4 NQ31	2.32	2.14	2.33	2.14	2.83	2.09	2.42	2.60	2.33	3.00			2.00	2.33	2.32	2.50	2.11	2.16	2.38		
p stat_(*=Sig @ p<=.05)		.040*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCSRESP NQ32	2.69	2.59	2.83	2.57	3.00	2.57	2.68	3.00	2.68	3.00			2.50	3.00	2.68	2.75	2.67	2.60	2.72		
p stat_(*=Sig @ p<=.05)		.161	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.51	2.37	2.58	2.36	2.92	2.33	2.55	2.80	2.50	3.00	x	x	x	x	2.25	2.67	2.50	2.63	2.39	2.38	2.55
p stat_(*=Sig @ p<=.05)		.180	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
NRXWHY NQ10	2.22	2.23	2.33	2.16	1.80	2.14	2.41	2.31	2.24	3.00	2.00		1.00	2.21	1.75	2.23	2.27	2.15	2.21	2.23	
p stat_(*=Sig @ p<=.05)		.875	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.444	.308	~	~	
NRXWYNT NQ11	1.84	1.87	1.17	1.88	1.47	1.79	2.02	2.08	1.87	2.00	1.00		1.00	1.64	1.50	1.84	1.89	1.76	1.89	1.82	
p stat_(*=Sig @ p<=.05)		.653	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.518	.221	~	~	
NRXBST NQ12	2.37	2.44	2.67	2.28	2.07	2.29	2.40	2.85	2.38	2.00	3.00		3.00	2.20	2.50	2.38	2.34	2.39	2.44	2.35	
p stat_(*=Sig @ p<=.05)		.360	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.729	.800	~	~	
COMPOSITE	2.14	2.18	2.06	2.11	1.78	2.07	2.28	2.41	2.16	2.33	2.00	x	x	1.67	2.02	1.92	2.15	2.17	2.10	2.18	2.13
p stat_(*=Sig @ p<=.05)		.685	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.774	.588	~	~	



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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
PRBSEE4 Q25	74%	78%	67%	68%	54%	67%	83%	92%	78%	50%	0%		0%	54%	50%	75%	77%	75%	76%	73%	
CARNES4 Q14	82%	82%	90%	71%	72%	78%	90%	95%	83%	100%	50%		100%	75%	83%	85%	82%	87%	75%	86%	80%
AVERAGE	77.8	79.8	78.6	69.8	62.9	72.3	86.2	93.7	80.0	75.0	50.0	x	x	75.0	68.2	67.3	78.3	82.3	74.8	81.1	76.4

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
CARSN4 Q4	80%	82%	86%	68%	81%	69%	90%	92%	81%	100%	100%			0%	70%	71%	79%	85%	74%	83%	78%
APGET4 Q6	82%	79%	78%	70%	67%	83%	95%	88%	83%	100%	100%	0%	100%	75%	75%	64%	83%	81%	84%	78%	84%
AVERAGE	80.8	80.1	81.7	69.1	74.0	75.9	92.2	90.0	82.1	100	x	x	x	75.0	72.5	67.5	81.2	83.0	79.1	80.7	81.4

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
DREXPL4 Q17	91%	92%	88%	86%	88%	95%	90%	100%	91%	100%	100%	100%	100%	85%	100%	90%	95%	86%	91%	91%	
DRLSTN4 Q18	86%	89%	94%	83%	82%	83%	87%	95%	87%	100%	100%	100%	75%	85%	93%	86%	93%	77%	87%	86%	
DRESPU4 Q19	87%	91%	88%	78%	85%	90%	90%	95%	87%	100%	100%	100%	75%	89%	100%	86%	92%	82%	87%	88%	
DRTMEN4 Q20	85%	86%	88%	81%	84%	83%	85%	94%	85%	100%	100%	100%	100%	85%	87%	85%	91%	75%	88%	83%	
AVERAGE	87.2	89.3	89.1	81.9	84.6	87.7	88.2	96.1	87.5	100	x	x	x	87.5	86.1	95.0	86.8	92.9	80.0	88.1	86.9

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
PBCLCS4 Q31	84%	73%	100%	79%	100%	74%	83%	100%	83%	100%				75%	100%	84%	91%	77%	76%	87%	
CSRESP Q32	96%	91%	100%	100%	100%	96%	92%	100%	97%	100%				75%	100%	96%	98%	97%	92%	98%	
AVERAGE	90.1	82.1	100	89.3	100	84.8	87.7	100	90.0	x	x	x	x	x	75.0	100	89.8	94.3	87.2	84.0	92.5

SHARED DECISION MAKING (A LOT/YES + SOME) -- GLOBAL PROPORTION COMPOSITE

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
RXWHY Q10	80%	80%	83%	76%	60%	79%	85%	92%	80%	100%	100%			0%	86%	75%	79%	84%	76%	82%	79%
RXWYNT Q11	60%	61%	17%	64%	33%	57%	71%	77%	62%	50%	0%			0%	50%	50%	60%	63%	56%	61%	60%
FRXBST Q12	69%	72%	83%	64%	53%	64%	70%	92%	69%	50%	100%			100%	60%	75%	69%	67%	70%	72%	68%
AVERAGE	69.5	70.8	61.1	68.0	48.9	66.7	75.5	87.2	70.3	66.7	x	x	x	x	65.2	66.7	69.4	71.5	67.2	71.3	69.1

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q1 YES	364	5863	1	71	102	106	84	251	4	1	3	16	41	79	265	327	17	275	89
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
NOT ANSWERED	7	155	1	3	1	2	5							4	3	6		5	2
VALID CASES	364	5863	1	71	102	106	84	251	4	1	3	16	41	79	265	327	17	275	89
NUMBER OF RESPONDENTS	371	6018	1	72	105	107	86	256	4	1	3	16	41	83	268	333	17	280	91
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q3 YES	122 34%	1775 30%	1 100%	31 44%	39 38%	20 19%*	31 37%	79 31%	1 ~ 25%	1 ~ 100%	2 67%	9 56%	15 37%	28 34%	89 33%	108 33%	8 47%	79 29%*	43 48%*
NO	242 66%	4117 70%		40 ~ 56%	64 62%	85 81%*	53 63%	174 69%	3 ~ 75%		1 ~ 33%	7 44%	26 63%	54 66%	177 67%	222 67%	9 53%	195 71%*	47 52%*
NOT ANSWERED	7	126		1	2	2	2	3						1	2	3		6	1
VALID CASES	364	5892	1	71	103	105	84	253	4	1	3	16	41	82	266	330	17	274	90
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC	
Q4 NEVER	2 2%	28 2%	~	4%~	~	~	3%~	1%~	~	~	~	~	7%~	4%~	1%~	2%~	~	1%~	1%~	
SOMETIMES	9 8%	167 10%	~	7%~	3%~	16%~	10%~	4%~	~	~	~	33%~	7%~	15%~	5%~	5%~	38%~	6%~	12%~	
USUALLY	11 10%	270 16%*	~	~	5%~	14%~	11%~	13%~	9%~	~	~	~	13%~	11%~	10%~	10%~	13%~	8%~	12%~	
ALWAYS	92 81%	1252 73%*	100%~	89%~	83%~	74%~	73%~	86%~	~	~	100%~	100%~	67%~	73%~	70%~	85%~	83%~	50%~	85%~	74%~
#ALWAYS + USUALLY (NET)	103 90%	1522 89%	100%~	89%~	97%~	84%~	87%~	95%~	~	~	100%~	100%~	67%~	87%~	81%~	94%~	93%~	63%~	93%~	86%~
TOP BOX SCORE	92 81%	1252 73%*	100%~	89%~	83%~	74%~	73%~	86%~	~	~	100%~	100%~	67%~	73%~	70%~	85%~	83%~	50%~	85%~	74%~
NOT ANSWERED	8	136		3	3	1	1	3	1		1			1	5	6		8		
VALID CASES	114	1718	1	28	36	19	30	76			1	1	9	15	27	84	102	8	71	43
NUMBER OF RESPONDENTS	122	1854	1	31	39	20	31	79	1		1	2	9	15	28	89	108	8	79	43
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q3 = YES]



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q5																				
YES	222 61%	3764 65%	1 100%	51 72%*	65 63%	58 56%	47 57%	154 61%		3 ~ 75%	1 ~ 100%	2 67%	8 50%	25 63%	55 66%	158 60%	203 62%	10 59%	154 57%*	68 76%*
NO	139 39%	2063 35%		20 ~ 28%*	38 37%	46 44%	35 43%	98 39%		1 ~ 25%		1 ~ 33%	8 50%	15 38%	28 34%	105 40%	125 38%	7 41%	117 43%*	22 24%*
NOT ANSWERED	10	192		1	2	3	4	4					1		5		5		9	1
VALID CASES	361	5826	1	71	103	104	82	252		4	1	3	16	40	83	263	328	17	271	90
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%		4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q6 NEVER	2 1%	57 2%	~	2%~	~	~	2%~	0.7%	~	~	~	~	17%~	~	2% 0.7%	1%~	~	1%~	~
SOMETIMES	23 11%	442 13%	~	4%~	13%	13%	13%~	11%	~	~	~	~	17%~	8%~	9% 10%	10%~	11%~	10%~	12%
USUALLY	42 20%	870 25%	~	15%~	19%	20%	27%~	23%	~	50%~	100%~	~	17%~	4%~	19% 21%	20%~	22%~	20%~	20%
ALWAYS	143 68%	2092 60%*	100%~	78%~	68%	68%	58%~	65%	~	50%~	~	100%~	50%~	88%~	70% 68%	69%~	67%~	68%~	68%
#ALWAYS + USUALLY (NET)	185 88%	2961 86%	100%~	93%~	87%	88%	84%~	88%	~	100%~	100%~	~	67%~	92%~	89% 89%	89%~	89%~	88%~	88%
TOP BOX SCORE	143 68%	2092 60%*	100%~	78%~	68%	68%	58%~	65%	~	50%~	~	100%~	50%~	88%~	70% 68%	69%~	67%~	68%~	68%
NOT ANSWERED	12	259		5	3	2	2	6	1		1	2			2 9	10	1	9	3
VALID CASES	210	3460	1	46	62	56	45	148	2	1	1	6	25	53	149	193	9	145	65
NUMBER OF RESPONDENTS	222	3719	1	51	65	58	47	154	3	1	2	8	25	55	158	203	10	154	68
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q5 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q7 NONE	109 31%	1770 31%	13 ~ 19%*	31 31%	37 36%	28 34%	88 35%*	1 ~ 25%~	~	5 ~ 31%~	11 28%~	19 24%	90 34%*	102 31%~	6 38%~	89 34%*	20 22%*		
1 TIME	100 28%	1587 28%	21 ~ 30%	30 30%	30 29%	19 23%	67 27%	1 ~ 25%~	1 100%~	3 ~ 19%~	11 28%~	27 34%	68 26%	95 29%~	1 6%~	84 32%*	16 18%*		
2	74 21%	1212 21%	17 ~ 24%	21 21%	22 22%	14 17%	51 20%	2 ~ 50%~	1 ~ 33%~	3 19%~	8 20%~	15 19%	56 21%	67 21%~	4 25%~	55 21%	19 21%		
3	27 8%	601 10%*	5 ~ 7%	8 8%	5 5%	9 11%	17 7%	~	~	3 ~ 19%~	3 8%~	9 11%	17 6%	23 7%~	2 13%~	16 6%	11 12%		
4	24 7%	266 5%	10 ~ 14%*	6 6%	5 5%	3 4%	18 7%	~	~	1 ~ 33%~	2 13%~	1 3%~	4 5%	19 7%	23 7%~	12 5%*	12 13%*		
5 TO 9	11 3%	243 4%	3 ~ 4%	1 1%	1 1%	6 7%	6 2%	~	~	1 ~ 33%~	4 ~ 10%~	3 4%	8 3%	10 3%~	1 6%~	7 3%	4 4%		
10 OR MORE TIMES	8 2%	84 1%	1 ~ 1%	2 2%	2 2%	3 4%	4 2%	~	~	~	~	2 ~ 5%~	3 4%	5 2%	6 2%~	2 13%~	1 0.4%*	7 8%*	
NOT ANSWERED	18	255	1	2	6	5	4	5				1	3	5	7	1	16	2	
VALID CASES	353	5763	70	99	102	82	251	4	1	3	16	40	80	263	326	16	264	89	
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%

Q8 A HEALTH PROVIDER IS THE PERSON YOU WOULD SEE IF YOUR CHILD NEEDED A CHECK-UP, WANTED ADVICE ABOUT A HEALTH PROBLEM, OR GOT SICK OR HURT. IN THE LAST 6 MONTHS, DID YOU AND YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT SPECIFIC THINGS YOU COULD DO TO PREVENT ILLNESS IN YOUR CHILD?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12 AND OVER	BLCK OR AFR-	AMER IAN	NATV HAW/ ILND	AMER IND/ NATV	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q8 #YES	172 73%	2722 69%	40 ~ 73%	51 76%	45 74%	36 69%	116 74%	2 ~ 67%	1 ~ 100%	1 33%	9 82%	23 79%	45 76%	122 73%	159 74%	7 78%	119 71%	53 79%
NO	63 27%	1206 31%	15 ~ 27%	16 24%	16 26%	16 31%	40 26%	1 ~ 33%	2 ~ 67%	2 18%	6 21%	14 24%	44 27%	57 26%	2 22%	49 29%	14 21%	
NOT ANSWERED	9	97	2	1	4	2	7					2	7	8	1	7	2	
VALID CASES	235	3927	55	67	61	52	156	3	1	3	11	29	59	166	216	9	168	67
NUMBER OF RESPONDENTS	244 100%	4024 100%	57 100%	68 100%	65 100%	54 100%	163 100%	3 100%	1 100%	3 100%	11 100%	29 100%	61 100%	173 100%	224 100%	10 100%	175 100%	69 100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	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
Q9 NEVER	3 1%	99 3%	~	2%	~	~	4%	2 1%	~	~	~	~	~	~	2%	1%	3 1%~	~	3 2%~	~
SOMETIMES	21 9%	362 9%	~	5%	7%	10%	13%	12 8%	~	~	~	~	3 27%~	~	7 12%	11 7%	15 7%~	3 33%~	14 8%	7 10%
USUALLY	48 20%	854 22%	~	18%	28%	16%	17%	37 23%	~	~	1 100%~	~	3 27%~	4 14%~	12 20%	36 21%	44 20%~	3 33%~	34 20%	14 21%
ALWAYS	165 70%	2627 67%	~	75%	64%	74%	66%	107 68%	~	3 100%~	~	3 100%~	5 45%~	25 86%~	39 66%	119 71%	156 72%~	3 33%~	118 70%	47 69%
#ALWAYS + USUALLY (NET)	213 90%	3480 88%	~	93%	93%	90%	83%	144 91%	~	3 100%~	1 100%~	3 100%~	8 73%~	29 100%~	51 86%	155 92%	200 92%~	6 67%~	152 90%	61 90%
TOP BOX SCORE	165 70%	2627 67%	~	75%	64%	74%	66%	107 68%	~	3 100%~	~	3 100%~	5 45%~	25 86%~	39 66%	119 71%	156 72%~	3 33%~	118 70%	47 69%
NOT ANSWERED	7	83	~	2%	1%	3%	1%	5	~	~	~	~	~	2	5	6	1	6	1	
VALID CASES	237	3941	~	55%	67%	62%	53%	158	~	3	1	3	11	29	59	168	218	9	169	68
NUMBER OF RESPONDENTS	244 100%	4024 100%	~	57%	68%	65%	54%	163 100%	~	3 100%	1 100%	3 100%	11 100%	29 100%	61 100%	173 100%	224 100%	10 100%	175 100%	69 100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q10 YES	63 27%	1194 30%	~	17 31%	9 14%*	19 31%	18 34%	42 27%	~	~	~	1 33%~	3 27%~	8 28%~	15 26%	46 28%	58 27%~	3 33%~	33 20%*	30 45%*
Q10 NO	169 73%	2727 70%	~	37 69%	55 86%*	42 69%	35 66%	113 73%	~	3 100%~	1 100%~	2 67%~	8 73%~	21 72%~	42 74%	119 72%	155 73%~	6 67%~	132 80%*	37 55%*
NOT ANSWERED	12	102		3	4	4	1	8							4	8	11	1	10	2
VALID CASES	232	3922		54	64	61	53	155		3	1	3	11	29	57	165	213	9	165	67
NUMBER OF RESPONDENTS	244 100%	4024 100%		57 100%	68 100%	65 100%	54 100%	163 100%		3 100%	1 100%	3 100%	11 100%	29 100%	61 100%	173 100%	224 100%	10 100%	175 100%	69 100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q11 NOT AT ALL	2 3%	40 4%	~	1 6%	~	~	1 6%	2 5%	~	~	~	~	~	~	2 4%	2 3%	~	1 3%	1 3%
A LITTLE	8 13%	110 10%	~	2 12%	1 11%	2 11%	3 17%	5 12%	~	~	~	~	1 13%	4 27%	4 9%	8 14%	~	5 15%	3 10%
SOME	7 11%	287 26%*	~	1 6%	2 22%	3 16%	1 6%	3 7%	~	~	~	~	1 13%	1 7%	5 11%	6 10%	~	3 9%	4 13%
#A LOT	46 73%	660 60%*	~	13 76%	6 67%	14 74%	13 72%	32 76%	~	~	1 100%	3 100%	6 75%	10 67%	35 76%	42 72%	3 100%	24 73%	22 73%
NOT ANSWERED		40																	
VALID CASES	63	1098		17	9	19	18	42			1	3	8	15	46	58	3	33	30
NUMBER OF RESPONDENTS	63	1138		17	9	19	18	42			1	3	8	15	46	58	3	33	30
	100%	100%		100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q12 NOT AT ALL	11 18%	204 19%	5 ~ 29%	1 11%	4 22%	1 6%	8 20%	~	~	~	~	~	1 13%	1 7%	9 20%	9 16%	1 33%	9 27%	2 7%	
A LITTLE	15 25%	171 16%	1 6%	3 33%	3 17%	8 47%	10 25%	~	~	~	~	~	2 25%	4 27%	10 23%	14 25%	7 21%	8 29%		
SOME	10 16%	343 31%*	3 18%	2 22%	2 11%	3 18%	8 20%	~	~	~	~	~	1 13%	1 7%	9 20%	10 18%	5 15%	5 18%		
#A LOT	25 41%	374 34%	8 47%	3 33%	9 50%	5 29%	14 35%	~	~	1 100%	3 100%	4 100%	3 50%	9 60%	16 36%	23 41%	2 67%	12 36%	13 46%	
NOT ANSWERED	2	47			1	1	2								2	2			2	
VALID CASES	61	1091	17	9	18	17	40			1	3	8	15	44	56	3	33	28		
NUMBER OF RESPONDENTS	63	1138	17	9	19	18	42			1	3	8	15	46	58	3	33	30		
	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q13 #YES	53 85%	872 80%	16 ~ 94%	6 ~ 67%	16 ~ 89%	15 ~ 83%	33 80%	~	~	~	1 ~100%	3 ~100%	8 ~100%	14 93%	37 82%	48 84%	3 ~100%	29 88%	24 83%
NO	9 15%	225 20%	1 ~ 6%	3 ~ 33%	2 ~ 11%	3 ~ 17%	8 20%	~	~	~	~	~	~	1 7%	8 18%	9 16%	~	4 12%	5 17%
NOT ANSWERED	1	42			1		1							1		1			1
VALID CASES	62	1096	17	9	18	18	41				1	3	8	15	45	57	3	33	29
NUMBER OF RESPONDENTS	63 100%	1138 100%	17 100%	9 100%	19 100%	18 100%	42 100%				1 100%	3 100%	8 100%	15 100%	46 100%	58 100%	3 100%	33 100%	30 100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q14 WORST HEALTH CARE POSSIBLE	4	0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01	5	0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02	2	15	~	~	~	~	2	1	~	~	~	1	1	1	1	1	1	1
	0.9%	0.4%					0.6%				9%	2%	0.6%	0.5%	11%	0.6%	2%	
03	1	33	~	~	~	~	1	1	~	~	~	~	1	1	~	~	~	1
	0.4%	0.8%					0.6%					~	0.6%	0.5%				2%
04	3	53	~	1	~	~	2	3	~	~	~	~	3	3	~	~	3	~
	1%	1%		2%			4%	2%					2%	1%			2%	
05	11	141	~	~	3	4	4	8	~	~	~	1	2	7	9	~	8	3
	5%	4%			4%	7%	8%	5%				9%	3%	4%	4%		5%	5%
06	11	124	~	1	4	3	3	7	~	1	~	~	1	8	9	~	8	3
	5%	3%		2%	6%	5%	6%	4%		~100%			2%	5%	4%		5%	5%
07	19	316	~	6	5	2	6	12	~	~	~	1	3	14	16	1	12	7
	8%	8%		11%	7%	3%*	11%	8%				9%	10%	5%	8%	7%	11%	7%
08	36	886	~	7	13	9	7	24	~	1	~	1	2	5	10	3	25	11
	15%	23%*		13%	19%	15%	13%	15%		~33%		~33%	18%	17%	17%	16%	15%	17%
09	52	849	~	9	18	14	11	34	~	~	~	1	3	7	47	4	34	18
	22%	22%		16%	27%	23%	21%	22%				~33%	27%	24%	22%	22%	22%	27%
BEST HEALTH CARE POSSIBLE	100	1476	~	31	24	28	17	66	~	2	~	1	3	14	97	~	78	22
	43%	38%		56%*	36%	47%	32%	42%		~67%		~33%	27%	48%	45%		46%	33%
#8-10 (NET)	188	3211	~	47	55	51	35	124	~	3	~	3	8	26	177	7	137	51
	80%	82%		85%	82%	85%	66%*	79%		~100%		~100%	73%	90%	82%	78%	81%	77%

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	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)	152 65%	2325 60%	40 ~ 73%	42 63%	42 70%	28 53%*	100 64%	2 ~ 67%~	2 ~ 67%~	6 55%~	21 72%~	42 71%	106 64%	144 67%~	4 44%~	112 66%	40 61%	
NOT ANSWERED	9	122	2	1	5	1	7					2	7	8	1	6	3	
VALID CASES	235	3902	55	67	60	53	156	3	1	3	11	29	59	166	216	9	169	66
NUMBER OF RESPONDENTS	244 100%	4024 100%	57 100%	68 100%	65 100%	54 100%	163 100%	3 100%	1 100%	3 100%	11 100%	29 100%	61 100%	173 100%	224 100%	10 100%	175 100%	69 100%
MEAN	8.63	8.59	9.07	8.66	8.83	7.92	8.60	9.33	6.00	9.00	7.91	9.10	8.92	8.61	8.73	7.67	8.71	8.44
p stat_(*=Sig @ p<=.05)		.639	~.011*	.886	.257	.007*	.630	~	~	~	~	~	.139	.720	~	~	.270	.270

[ASKED IF Q7 >= 1]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR 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	POOR	NO CCC	CCC
Q15 NEVER	2 0.9%	70 2%	~	2%	~	~	2%	~	~	~	~	~	9%	~	2%	0.6%	0.9%	~	0.6%	2%
SOMETIMES	18 8%	378 10%	~	4%	4%	7%	17%*	6%	~	33%	~	~	18%	3%	7%	7%	6%	33%	7%	11%
USUALLY	58 25%	1179 30%*	~	15%*	27%	30%	26%	22%	~	33%	100%	~	18%	41%	25%	24%	25%	11%	24%	27%
ALWAYS	157 67%	2256 58%*	~	80%*	69%	63%	55%*	72%*	~	33%	~	100%	55%	55%	66%	69%	69%	56%	69%	61%
#ALWAYS + USUALLY (NET)	215 91%	3435 88%	~	95%	96%	93%	81%*	94%	~	67%	100%	100%	73%	97%	92%	93%	94%	67%	93%	88%
TOP BOX SCORE	157 67%	2256 58%*	~	80%*	69%	63%	55%*	72%*	~	33%	~	100%	55%	55%	66%	69%	69%	56%	69%	61%
NOT ANSWERED	9	141	2	1	5	1	7							2	7	8	1	6	3	
VALID CASES	235	3883	55	67	60	53	156	3	1	3	11	29	59	166	216	9	169	66		
NUMBER OF RESPONDENTS	244 100%	4024 100%	57 100%	68 100%	65 100%	54 100%	163 100%	3 100%	1 100%	3 100%	11 100%	29 100%	61 100%	173 100%	224 100%	10 100%	175 100%	69 100%		

[ASKED IF Q7 >= 1 TIME]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- 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	
Q16 YES	251 70%	4005 69%	12 ~ 17%*	71 69%	92 92%*	76 92%*	180 71%	1 ~ 25%*	1 100%*	2 67%*	10 67%*	31 76%*	50 62%	191 72%	227 69%*	15 94%*	174 65%*	77 87%*	
NO	107 30%	1827 31%	1 100%*	59 83%*	32 31%	8 8%*	7 8%*	72 29%	3 ~ 75%*	1 ~ 33%*	5 33%*	10 24%*	31 38%	74 28%	103 31%*	1 6%*	95 35%*	12 13%*	
NOT ANSWERED	13	187	1	2	7	3	4				1		2	3	3	1	11	2	
VALID CASES	358	5831	1	71	103	100	83	252	4	1	3	15	41	81	265	330	16	269	89
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q17 YES	33 14%	460 12%	~ 18%	11 16%	10 12%	10 14%	20 12%	~	~	~ 50%	1	7 23%	8 18%	24 13%	25 12%	7 50%	13 8%*	20 26%*	
NO	204 86%	3425 88%	~ 82%	57 84%	76 88%	62 86%	152 88%	~100%	~100%	~ 50%	1 100%	9 100%	23 77%	37 82%	161 87%	192 88%	7 50%	148 92%*	56 74%*
NOT ANSWERED	14	235	1	3	6	4	8					1	1	5	6	10	1	13	1
VALID CASES	237	3885	11	68	86	72	172	1	1	2	9	30	45	185	217	14	161	76	
NUMBER OF RESPONDENTS	251 100%	4120 100%	12 100%	71 100%	92 100%	76 100%	180 100%	1 100%	1 100%	2 100%	10 100%	31 100%	50 100%	191 100%	227 100%	15 100%	174 100%	77 100%	

[ASKED IF Q16 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	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
Q18 #YES	31 97%	368 88%	2 ~100%	11 ~100%	9 90%	9 100%	19 95%	~	~	~	1 ~100%	6 ~100%	7 88%	23 100%	23 96%	7 100%	12 100%	19 95%		
NO	1 3%	51 12%	~	~	1 10%	~	1 5%	~	~	~	~	~	1 13%	~	1 4%	~	1 5%			
NOT ANSWERED	1	1				1						1		1		1		1		
VALID CASES	32	419	2	11	10	9	20				1	6	8	23	24	7	12	20		
NUMBER OF RESPONDENTS	33	420	2	11	10	10	20				1	7	8	24	25	7	13	20		
	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%		

[ASKED IF Q16 = YES AND Q17 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q19 YES	15 4%	202 3%	~	1%	7%	3%	4%	8%	~	~	~	~	13%	5%	4%	10%	13%	1%	4%	11%
NO	345 96%	5625 97%	100%	~99%	93%	97%	95%	247 97%	~100%	~100%	~100%	~88%	~95%	79 95%	257 96%	319 96%	16 94%	266 99%*	79 88%*	
NOT ANSWERED	11	191			3	5	3	1						1	1			10	1	
VALID CASES	360	5827	1	72	102	102	83	255	4	1	3	16	41	83	267	332	17	270	90	
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%	



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL-OTHR	TI	HIS-IC	NOT HIS-IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC
Q20 NEVER		22 11%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	5 33%	27 13%	~	~	2 29%	2 67%	1 25%	3 38%	~	~	~	~	~	2 100%	5 50%	4 31%	1 100%	2 50%	3 27%	
USUALLY	4 27%	51 24%	~	1 100%	~	1 33%	2 50%	2 25%	~	~	~	~	1 50%	1 25%	2 20%	3 23%	~	1 25%	3 27%	
ALWAYS	6 40%	109 52%	~	~	5 71%	~	1 25%	3 38%	~	~	~	~	1 50%	3 75%	3 30%	6 46%	~	1 25%	5 45%	
#ALWAYS + USUALLY (NET)	10 67%	160 76%	~	1 100%	5 71%	1 33%	3 75%	5 63%	~	~	~	~	2 100%	4 100%	5 50%	9 69%	~	2 50%	8 73%	
TOP BOX SCORE	6 40%	109 52%	~	~	5 71%	~	1 25%	3 38%	~	~	~	~	1 50%	3 75%	3 30%	6 46%	~	1 25%	5 45%	
NOT ANSWERED		12																		
VALID CASES	15	210		1	7	3	4	8					2	2	4	10	13	1	4	11
NUMBER OF RESPONDENTS	15	222		1	7	3	4	8					2	2	4	10	13	1	4	11
	100%	100%		100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q19 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q21 #YES	13 87%	178 86%	~100%	1 86%	6 67%	2 100%	4 100%	7 88%	~	~	~	~	1 50%	2 100%	3 75%	9 90%	12 92%	4 100%	9 82%	
NO	2 13%	30 14%	~	~	1 14%	1 33%	~	1 13%	~	~	~	~	1 50%	~	1 25%	1 10%	1 8%	1 100%	2 18%	
NOT ANSWERED		14																		
VALID CASES	15	208	1	7	3	4	8						2	2	4	10	13	1	4	11
NUMBER OF RESPONDENTS	15	222	1	7	3	4	8						2	2	4	10	13	1	4	11
	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			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q22																				
YES	30 8%	474 8%	~	8%	11%	7%	7%	24 9%	~	~	~	~	19%~	5%~	6%	25 9%	25 8%~	5 29%~	9 3%*	21 23%*
NO	329 92%	5319 92%	100%~	92%	89%	93%	93%	231 91%	~100%~	~100%~	~100%~	~	81%~	95%~	94%	242 91%	307 92%~	12 71%~	259 97%*	70 77%*
NOT ANSWERED	12	225			3	6	3	1							1	1		12		
VALID CASES	359	5793	1	72	102	101	83	255	4	1	3	16	41	83	267	332	17	268	91	
NUMBER OF RESPONDENTS	371 100%	6018 100%	100%	100%	100%	100%	100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%	

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			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL-OTHR	TI	HIS-IC	NOT HIS-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q23 NEVER	4 13%	60 14%	~	~	~	43%	17%	13%	~	~	~	~	33%	~	~	16%	12%	20%	~	19%
SOMETIMES	3 10%	71 17%	~	~	18%	~	17%	13%	~	~	~	~	~	~	20%	8%	8%	20%	11%	10%
USUALLY	9 30%	110 26%	~	2	4	2	1	8	~	~	~	~	33%	~	~	36%	36%	~	44%	24%
ALWAYS	14 47%	179 43%	~	4	5	2	3	10	~	~	~	~	33%	100%	80%	40%	44%	60%	44%	48%
#ALWAYS + USUALLY (NET)	23 77%	289 69%	~	6	9	4	4	18	~	~	~	~	67%	100%	80%	76%	80%	60%	89%	71%
TOP BOX SCORE	14 47%	179 43%	~	4	5	2	3	10	~	~	~	~	33%	100%	80%	40%	44%	60%	44%	48%
NOT ANSWERED		24																		
VALID CASES	30	420		6	11	7	6	24					3	2	5	25	25	5	9	21
NUMBER OF RESPONDENTS	30 100%	444 100%		6 100%	11 100%	7 100%	6 100%	24 100%					3 100%	2 100%	5 100%	25 100%	25 100%	5 100%	9 100%	21 100%

[ASKED IF Q22 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q24 #YES	20 67%	291 69%	~	5 83%	6 55%	5 71%	4 67%	16 67%	~	~	~	1 33%	2 100%	5 100%	15 60%	15 60%	5 100%	6 67%	14 67%
NO	10 33%	132 31%	~	1 17%	5 45%	2 29%	2 33%	8 33%	~	~	~	2 67%	~	10 40%	10 40%	~	3 33%	7 33%	
NOT ANSWERED		21																	
VALID CASES	30	423		6	11	7	6	24				3	2	5	25	25	5	9	21
NUMBER OF RESPONDENTS	30	444		6	11	7	6	24				3	2	5	25	25	5	9	21
	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			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q25 YES	35 10%	682 12%	~	4 6%	6 6%	15 15%	10 12%	29 11%	~	~	~	~	5 ~ 12%	5 6%	30 11%	30 9%	5 29%	5 2%*	30 33%*	
NO	322 90%	5109 88%	100%~	1 94%	67 94%	96 85%	86 88%	72 89%	~100%	4 ~100%	1 ~100%	3 ~100%	16 ~100%	36 88%	76 94%	237 89%	301 91%	12 71%	261 98%*	61 67%*
NOT ANSWERED	14	227		1	3	6	4	3						2	1	2		14		
VALID CASES	357	5791	1	71	102	101	82	253	4	1	3	16	41	81	267	331	17	266	91	
NUMBER OF RESPONDENTS	371 100%	6018 100%	100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL-OTHR	TI	HIS-IC	NOT HIS-IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC
Q26 NEVER	5 14%	90 14%	~	25%~	~	20%~	10%~	17%~	~	~	~	~	~	~	17%~	5	3	2	~	5
SOMETIMES	5 14%	121 19%	~	~	17%~	20%~	10%~	14%~	~	~	~	~	20%~	1	4	1	4	5	~	1 4
USUALLY	7 20%	156 24%	~	25%~	~	33%~	10%~	17%~	~	~	~	~	20%~	1	2	5	7	23%~	~	7
ALWAYS	18 51%	284 44%	~	50%~	83%~	27%~	70%~	52%~	~	~	~	~	60%~	3	2	16	15	3	4	14
#ALWAYS + USUALLY (NET)	25 71%	440 68%	~	75%~	83%~	60%~	80%~	69%~	~	~	~	~	80%~	4	4	21	22	3	4	21
TOP BOX SCORE	18 51%	284 44%	~	50%~	83%~	27%~	70%~	52%~	~	~	~	~	60%~	3	2	16	15	3	4	14
NOT ANSWERED		25																		
VALID CASES	35	651		4	6	15	10	29					5	5	30	30	5	5	5	30
NUMBER OF RESPONDENTS	35 100%	676 100%		4 100%	6 100%	15 100%	10 100%	29 100%					5 100%	5 100%	30 100%	30 100%	5 100%	5 100%	5 100%	30 100%

[ASKED IF Q25 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q27 #YES	14 40%	347 53%	~	1 25%	4 67%	5 33%	4 40%	12 41%	~	~	~	~	1 20%	3 60%	11 37%	11 37%	3 60%	~	14 47%
NO	21 60%	304 47%	~	3 75%	2 33%	10 67%	6 60%	17 59%	~	~	~	~	4 80%	2 40%	19 63%	19 63%	2 40%	5 100%	16 53%
NOT ANSWERED		25																	
VALID CASES	35	651		4	6	15	10	29					5	5	30	30	5	5	30
NUMBER OF RESPONDENTS	35	676		4	6	15	10	29					5	5	30	30	5	5	30
	100%	100%		100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q28 YES	75 21%	1072 19%		16 ~ 22%	15 15%*	18 18%	26 32%*	50 20%				2 ~ 67%	3 19%~	11 27%~	15 18%	58 22%	67 20%~	6 35%~	36 13%*	39 43%*
NO	284 79%	4688 81%	1 100%~	56 78%	87 85%*	84 82%	56 68%*	206 80%		4 ~100%~	1 ~100%~	1 33%~	13 81%~	30 73%~	68 82%	210 78%	266 80%~	11 65%~	232 87%*	52 57%*
NOT ANSWERED	12	257			3	5	4												12	
VALID CASES	359	5761	1	72	102	102	82	256		4	1	3	16	41	83	268	333	17	268	91
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%		4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q29 #YES	43 58%	609 56%	9 ~ 56%	8 ~ 53%	11 ~ 65%	15 ~ 58%	29 59%	~	~	~	1 ~ 50%	7 ~ 64%	9 64%	33 57%	37 56%	5 83%	19 54%	24 62%	
NO	31 42%	471 44%	7 ~ 44%	7 ~ 47%	6 ~ 35%	11 ~ 42%	20 41%	~	~	~	1 ~ 50%	3 ~ 100%	4 ~ 36%	5 36%	25 43%	29 44%	1 17%	16 46%	15 38%
NOT ANSWERED	1	35				1	1							1	1		1		
VALID CASES	74	1080	16	15	17	26	49				2	3	11	14	58	66	6	35	39
NUMBER OF RESPONDENTS	75	1115	16	15	18	26	50				2	3	11	15	58	67	6	36	39
	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q30																			
YES	329 93%	4998 86%*	1 100%	67 94%	92 90%	92 92%	77 95%	239 93%	3 ~100%	1 ~100%	3 ~100%	16 ~100%	35 88%	72 88%	250 94%	307 93%	14 82%	243 92%	86 96%
NO	26 7%	790 14%*	~	4 6%	10 10%	8 8%	4 5%	17 7%	~	~	~	~	5 ~13%	10 12%	16 6%	23 7%	3 18%	22 8%	4 4%
NOT ANSWERED	16	230		1	3	7	5			1			1	1	2	3		15	1
VALID CASES	355	5788	1	71	102	100	81	256	3	1	3	16	40	82	266	330	17	265	90
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV ILND	AMER IND/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q31 NONE	98 31%	1324 27%	~ 15%*	10 34%	30 32%	28 41%	30 41%	82 36%*	~ 33%*	~ 100%*	~ 50%*	~ 6%*	7 21%*	16 23%	82 34%*	91 31%*	5 36%*	81 35%*	17 20%*	
1 TIME	109 35%	1651 34%	~ 32%*	21 30%	27 45%*	39 30%	22 30%	77 34%	~ 33%*	~ 100%*	~ 50%*	1 6%*	14 41%*	28 40%	78 33%	106 36%*	1 7%*	86 37%	23 27%	
2	51 16%	1029 21%*	~ 29%*	19 21%	19 11%	10 11%	3 4%*	36 16%	~ 33%*	~ 100%*	~ 50%*	3 19%*	6 18%*	11 16%	40 17%	50 17%*	1 7%*	41 18%	10 12%	
3	23 7%	462 9%	~ 8%*	5 7%	6 7%	3 3%	9 12%	12 5%	~ 33%*	~ 100%*	~ 50%*	1 6%*	4 25%*	2 6%*	7 10%	15 6%	19 6%*	3 21%*	11 5%*	12 14%*
4	15 5%	201 4%	~ 6%*	4 4%	4 4%	3 3%	4 5%	12 5%	~ 33%*	~ 100%*	~ 50%*	~ 6%*	1 6%*	3 4%	11 5%	14 5%*	~ 7%*	5 2%*	10 12%*	
5 TO 9	14 4%	173 4%	~ 8%*	5 1%*	1 1%*	3 3%	5 7%	8 3%	~ 33%*	~ 100%*	~ 50%*	~ 6%*	3 9%*	4 6%	9 4%	10 3%*	3 21%*	7 3%	7 8%	
10 OR MORE TIMES	5 2%	32 0.6%	~ 2%*	1 2%	2 2%	1 1%	1 1%	2 0.9%	~ 33%*	~ 100%*	~ 50%*	~ 6%*	2 6%*	1 1%	4 2%	4 1%*	1 7%*	~ 6%*	5 6%*	
NOT ANSWERED	14	181	1	2	3	5	3	10	~ 33%*	~ 100%*	~ 50%*	1	1	2	11	13		12	2	
VALID CASES	315	4872		65	89	87	74	229	3	1	2	16	34	70	239	294	14	231	84	
NUMBER OF RESPONDENTS	329	5053	1	67	92	92	77	239	3	1	3	16	35	72	250	307	14	243	86	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q30 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC	
Q31A ALWAYS	2 0.9%	68 2%	~	~	1 2%	~	1 2%	1 0.7%	~	~	~	~	~	1 2%	1 0.6%	2 1%	~	~	2 3%	
USUALLY	3 1%	51 1%	~	1 2%	1 2%	1 2%	1 0.7%	~	~	~	~	1 10%	~	3 6%	~	3 1%	~	2 1%	1 1%	
SOMETIMES	10 5%	288 8%*	~	1 2%	2 3%	3 5%	4 9%	2 1%*	~	1 50%	~	~	2 20%	1 4%	8 15%*	2 1%*	8 4%	2 22%	9 6%	1 1%
NEVER	200 93%	3102 88%*	~	53 96%	54 93%	54 93%	39 89%	142 97%*	~	1 50%	1 100%	2 100%	7 70%	26 96%	41 77%*	153 98%*	188 94%	7 78%	137 93%	63 94%
#NEVER + SOMETIMES (NET)	210 98%	3390 97%	~	54 98%	56 97%	57 98%	43 98%	144 99%	~	2 100%	1 100%	2 100%	9 90%	27 100%	49 92%	155 99%	196 98%	9 100%	146 99%	64 96%
TOP BOX SCORE	200 93%	3102 88%*	~	53 96%	54 93%	54 93%	39 89%	142 97%*	~	1 50%	1 100%	2 100%	7 70%	26 96%	41 77%*	153 98%*	188 94%	7 78%	137 93%	63 94%
NOT ANSWERED	2	31			1	1		1						1	1	2			2	
VALID CASES	215	3509		55	58	58	44	146		2	1	2	10	27	53	156	201	9	148	67
NUMBER OF RESPONDENTS	217	3540		55	59	59	44	147		2	1	2	10	27	54	157	203	9	150	67
	100%	100%		100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q32 NEVER	4 2%	74 2%	~	2%	2%	2%	2%	~	~	~	~	~	4%	2%	2%	2%	~	2%	2%
SOMETIMES	7 3%	183 5%	~	2%	5%	2%	5%	~	~	~	~	20%	~	4%	3%	2%	22%	1%	7%
USUALLY	32 15%	573 16%	~	9%	20%	16%	14%	~	~	~	50%	20%	11%	13%	15%	14%	22%	14%	16%
ALWAYS	173 80%	2676 76%	~	87%	73%	81%	80%	~	100%	100%	50%	60%	85%	75%	82%	81%	56%	83%	73%
#ALWAYS + USUALLY (NET)	205 95%	3249 93%	~	96%	93%	97%	93%	~	100%	100%	100%	80%	96%	89%	97%	96%	78%	97%	90%
TOP BOX SCORE	173 80%	2676 76%	~	87%	73%	81%	80%	~	100%	100%	50%	60%	85%	75%	82%	81%	56%	83%	73%
NOT ANSWERED	1	33				1								1				1	
VALID CASES	216	3507		55	59	58	44	147	2	1	2	10	27	53	157	202	9	149	67
NUMBER OF RESPONDENTS	217	3540		55	59	59	44	147	2	1	2	10	27	54	157	203	9	150	67
	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	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	
Q33 NEVER	1 0.5%	29 0.8%	~	~	~	2%	1 0.7%	~	~	~	~	~	~	~	2%	1 0.5%	~	~	1 1%		
SOMETIMES	6 3%	199 6%*	~	2%	3%	2%	2 5%	5 3%	~	~	~	~	1 10%	~	2 3%	5 2%	1 11%	~	4 3%	2 3%	
USUALLY	38 18%	611 17%	~	8%	13%	22%	10 17%	7 16%	26 18%	~	~	~	1 50%	2 20%	4 15%	9 17%	29 18%	37 18%	1 11%	23 15%	15 22%
ALWAYS	171 79%	2666 76%	~	46%	44%	75%	46 79%	35 80%	115 78%	2 100%	1 100%	1 50%	7 70%	23 85%	42 79%	123 78%	159 79%	7 78%	122 82%	49 73%	
#ALWAYS + USUALLY (NET)	209 97%	3277 93%*	~	54%	57%	97%	56 95%	42 96%	141 96%	2 100%	1 100%	2 100%	9 90%	27 100%	51 96%	152 97%	196 97%	8 89%	145 97%	64 96%	
TOP BOX SCORE	171 79%	2666 76%	~	46%	44%	75%	46 80%	35 80%	115 78%	2 100%	1 100%	1 50%	7 70%	23 85%	42 79%	123 78%	159 79%	7 78%	122 82%	49 73%	
NOT ANSWERED	1	34					1									1			1		
VALID CASES	216	3506		55	59	58	44	147		2	1	2	10	27	53	157	202	9	149	67	
NUMBER OF RESPONDENTS	217 100%	3540 100%		55 100%	59 100%	59 100%	44 100%	147 100%		2 100%	1 100%	2 100%	10 100%	27 100%	54 100%	157 100%	203 100%	9 100%	150 100%	67 100%	

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q34 NEVER	2 0.9%	22 0.6%	~	~	~	2%	2%	1%	~	~	~	~	~	~	2%	0.6%	2 1%	~	~	1 0.7%	1 1%
SOMETIMES	8 4%	152 4%	~	4%	5%	2%	5%	5%	~	~	~	~	10%	~	2%	4%	7 3%	1 11%	~	5 3%	3 4%
USUALLY	24 11%	469 13%	~	11%	12%	10%	11%	12%	~	~	~	50%	10%	15%	8%	13%	22 11%	2 22%	~	16 11%	8 12%
ALWAYS	182 84%	2859 82%	~	85%	83%	86%	82%	82%	~	100%	100%	50%	80%	85%	89%	82%	171 85%	6 67%	~	127 85%	55 82%
#ALWAYS + USUALLY (NET)	206 95%	3328 95%	~	96%	95%	97%	93%	94%	~	100%	100%	100%	90%	100%	96%	95%	193 96%	8 89%	~	143 96%	63 94%
TOP BOX SCORE	182 84%	2859 82%	~	85%	83%	86%	82%	82%	~	100%	100%	50%	80%	85%	89%	82%	171 85%	6 67%	~	127 85%	55 82%
NOT ANSWERED	1	38				1									1		1			1	
VALID CASES	216	3502		55	59	58	44	147		2	1	2	10	27	53	157	202	9		149	67
NUMBER OF RESPONDENTS	217 100%	3540 100%		55 100%	59 100%	59 100%	44 100%	147 100%		2 100%	1 100%	2 100%	10 100%	27 100%	54 100%	157 100%	203 100%	9 100%		150 100%	67 100%

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



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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q35 YES	145 68%	2353 68%	9 ~ 16%*	45 76%	51 88%*	40 95%~	94 64%	2 ~100%	1 ~100%	1 50%~	8 80%~	22 85%~	35 69%	106 68%	137 69%~	5 56%~	98 66%	47 72%
NO	69 32%	1128 32%	46 ~ 84%*	14 24%	7 12%*	2 5%~	53 36%	~	~	1 50%~	2 20%~	4 15%~	16 31%	51 32%	63 31%~	4 44%~	51 34%	18 28%
NOT ANSWERED	3	60			1	2						1	3		3		1	2
VALID CASES	214	3480	55	59	58	42	147	2	1	2	10	26	51	157	200	9	149	65
NUMBER OF RESPONDENTS	217 100%	3540 100%	55 100%	59 100%	59 100%	44 100%	147 100%	2 100%	1 100%	2 100%	10 100%	27 100%	54 100%	157 100%	203 100%	9 100%	150 100%	67 100%

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

Q35A IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD HAVE A HARD TIME SPEAKING WITH OR UNDERSTANDING HIS OR HER PERSONAL DOCTOR BECAUSE THEY SPOKE DIFFERENT LANGUAGES?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	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	
Q35A ALWAYS	1 0.7%	43 2%	~	~	1 2%	~	~	~	~	~	~	~	~	1 5%	1 1%	1 0.7%	~	1 1%	~	
USUALLY	1 0.7%	47 2%	~	~	~	1 3%	1 1%	~	~	~	~	~	~	~	1 1%	1 0.7%	~	1 1%	2 2%	
SOMETIMES	8 6%	152 7%	~	~	5 11%	2 4%	1 3%	3 3%	~	1 50%	~	~	1 13%	1 5%	4 11%	4 4%	7 5%	1 20%	7 7%	1 2%
NEVER	133 93%	2045 89%	~	9 100%	38 86%	49 96%	37 95%	89 96%	~	1 50%	1 100%	1 100%	7 88%	19 90%	31 89%	98 94%	126 93%	4 80%	88 92%	45 96%
#NEVER + SOMETIMES (NET)	141 99%	2197 96%*	~	9 100%	43 98%	51 100%	38 97%	92 99%	~	2 100%	1 100%	1 100%	8 100%	20 95%	35 100%	102 98%	133 99%	5 100%	95 99%	46 98%
TOP BOX SCORE	133 93%	2045 89%	~	9 100%	38 86%	49 96%	37 95%	89 96%	~	1 50%	1 100%	1 100%	7 88%	19 90%	31 89%	98 94%	126 93%	4 80%	88 92%	45 96%
NOT ANSWERED	2	49			1	1	1						1		2	2		2		
VALID CASES	143	2287		9	44	51	39	93		2	1	1	8	21	35	104	135	5	96	47
NUMBER OF RESPONDENTS	145	2336		9	45	51	40	94		2	1	1	8	22	35	106	137	5	98	47
	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]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC	
Q36 NEVER	2 1%	72 3%	~	~	1 2%	~	1 3%	1 1%	~	~	~	~	~	1 5%	~	2 2%	2 1%	~	2 2%	~
SOMETIMES	12 8%	148 6%	~	~	10 22%	~	2 5%	10 11%	~	~	~	~	1 13%	1 5%	4 11%	8 8%	11 8%	1 20%	7 7%	5 11%
USUALLY	33 23%	454 20%	~	2 22%	12 27%	14 27%	5 13%	23 24%	~	~	~	1 100%	3 38%	3 14%	6 17%	27 26%	32 24%	1 20%	18 19%	15 32%
ALWAYS	97 67%	1606 70%	~	7 78%	22 49%	37 73%	31 79%	60 64%	~	2 100%	1 100%	~	4 50%	16 76%	25 71%	68 65%	91 67%	3 60%	70 72%	27 57%
#ALWAYS + USUALLY (NET)	130 90%	2060 90%	~	9 100%	34 76%	51 100%	36 92%	83 88%	~	2 100%	1 100%	1 100%	7 88%	19 90%	31 89%	95 90%	123 90%	4 80%	88 91%	42 89%
TOP BOX SCORE	97 67%	1606 70%	~	7 78%	22 49%	37 73%	31 79%	60 64%	~	2 100%	1 100%	~	4 50%	16 76%	25 71%	68 65%	91 67%	3 60%	70 72%	27 57%
NOT ANSWERED	1	56					1						1		1			1		
VALID CASES	144	2280		9	45	51	39	94		2	1	1	8	21	35	105	136	5	97	47
NUMBER OF RESPONDENTS	145	2336		9	45	51	40	94		2	1	1	8	22	35	106	137	5	98	47
	100%	100%		100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR 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 & POOR	FAIR & POOR	NO CCC	CCC
Q37 NEVER	4 2%	98 3%	~	2%	3%	~	2%	1%	~	~	~	~	~	4%	2%	2%	2%~	~	3%~	~
SOMETIMES	22 10%	385 11%	~	13%	12%	5%	12%	11%	~	~	~	~	20%	7%	25%*	6%*	9%~	33%~	10%	10%
USUALLY	44 21%	856 25%	~	11%*	25%	23%	23%	21%	~	~	~	50%	20%	19%	15%	23%	21%~	22%~	19%	24%
ALWAYS	143 67%	2135 61%	~	74%	59%	72%	63%	67%	~	100%	100%	50%	60%	70%	58%	69%	68%~	44%~	68%	66%
#ALWAYS + USUALLY (NET)	187 88%	2991 86%	~	85%	85%	95%*	86%	88%	~	100%	100%	100%	80%	89%	73%*	92%*	89%~	67%~	87%	90%
TOP BOX SCORE	143 67%	2135 61%	~	74%	59%	72%	63%	67%	~	100%	100%	50%	60%	70%	58%	69%	68%~	44%~	68%	66%
NOT ANSWERED	4	67	1			2	1								2		2		4	
VALID CASES	213	3473	54	59	57	43	147	147	2	1	2	10	27	52	157	201	9	146	67	
NUMBER OF RESPONDENTS	217 100%	3540 100%	55 100%	59 100%	59 100%	44 100%	147 100%	147 100%	2 100%	1 100%	2 100%	10 100%	27 100%	54 100%	157 100%	203 100%	9 100%	150 100%	67 100%	67 100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q38 #YES	173 82%	2956 85%	48 ~ 91%*	46 78%	48 84%	31 76%~	121 83%		1	1	1	8	23	41 79%	130 83%	164 82%~	8 89%~	116 81%	57 85%
NO	37 18%	518 15%	5 ~ 9%*	13 22%	9 16%	10 24%~	25 17%		1		1	2	4	11 21%	26 17%	36 18%~	1 11%~	27 19%	10 15%
NOT ANSWERED	7	66	2		2	3	1							2	1	3		7	
VALID CASES	210	3474	53	59	57	41	146		2	1	2	10	27	52	156	200	9	143	67
NUMBER OF RESPONDENTS	217 100%	3540 100%	55 100%	59 100%	59 100%	44 100%	147 100%		2 100%	1 100%	2 100%	10 100%	27 100%	54 100%	157 100%	203 100%	9 100%	150 100%	67 100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER													
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC											
Q39 YES	74 35%	1340 39%	~ 35%	18	15	25%	19	22	52%~	53	36%	~	100%~	1	2	2	2	9	19	55	36%	35%	69	5	34%~	56%~	24%*	58%*	35	39
Q39 NO	137 65%	2127 61%	~ 65%	34	44	75%	39	20	48%~	93	64%	~100%~	~	~	8	18	~ 80%~	67%~	34	101	64%	65%	132	4	66%~	44%~	76%*	42%*	109	28
NOT ANSWERED	6	73	3				1	2		1									1	1			2					6		
VALID CASES	211	3467	52	59	58	42	146			2	1	2	10	27	53	156			201	9			144	67				144	67	
NUMBER OF RESPONDENTS	217	3540	55	59	59	44	147			2	1	2	10	27	54	157			203	9			150	67				150	67	
	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]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC
Q40 NEVER	7 10%	102 8%	2 ~ 12%	2 13%	2 11%	1 5%	7 14%	~	~	~	~	~	~	1 6%	6 11%	7 11%	~	3 9%	4 11%
SOMETIMES	9 13%	189 15%	~	4 27%	5 24%	6 12%	~	~	~	1 50%	1 50%	~	2 11%	7 13%	8 12%	1 20%	3 9%	6 17%	
USUALLY	20 28%	353 28%	6 35%	5 33%	8 44%	1 5%	15 29%	~	~	~	~	1 50%	1 13%	8 44%	12 23%	18 27%	2 40%	9 26%	11 31%
ALWAYS	35 49%	630 49%	9 53%	4 27%	8 44%	14 67%	23 45%	~	~	1 100%	1 50%	~	7 88%	7 39%	28 53%	33 50%	2 40%	20 57%	15 42%
#ALWAYS + USUALLY (NET)	55 77%	983 77%	15 88%	9 60%	16 89%	15 71%	38 75%	~	~	1 100%	1 50%	1 50%	8 100%	15 83%	40 75%	51 77%	4 80%	29 83%	26 72%
TOP BOX SCORE	35 49%	630 49%	9 53%	4 27%	8 44%	14 67%	23 45%	~	~	1 100%	1 50%	~	7 88%	7 39%	28 53%	33 50%	2 40%	20 57%	15 42%
NOT ANSWERED	3	48	1		1	1	2						1	1	2	3			3
VALID CASES	71	1274	17	15	18	21	51			1	2	2	8	18	53	66	5	35	36
NUMBER OF RESPONDENTS	74	1322	18	15	19	22	53			1	2	2	9	19	55	69	5	35	39
	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC		
Q41 WORST PERSONAL DOCTOR POSSIBLE	7	0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
01	2	17	~	~	1	1	2	~	~	~	~	~	2	2	~	~	1	1		
	0.6%	0.4%	~	~	1%	1%	0.9%	~	~	~	~	~	~	0.8%	0.7%	~	0.4%	1%		
02	5	17	~	~	~	1	4	~	~	~	1	~	4	5	~	~	3	2		
	2%	0.3%	~	~	~	1%	5%	2%	~	~	6%	~	1%	2%	2%	~	1%	2%		
03	21	0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
04	5	41	~	1	~	~	4	5	~	~	~	~	~	5	5	~	5	~		
	2%	0.9%	~	2%	~	~	5%	2%*	~	~	~	~	~	2%*	2%	~	2%*	~		
05	9	139	~	1	2	1	5	8	~	~	~	1	9	9	~	~	7	2		
	3%	3%	~	2%	2%	1%	7%	4%	~	~	~	3%	~	4%	3%	~	3%	2%		
06	10	111	~	3	3	1	3	7	~	~	~	1	1	2	8	9	1	5	5	
	3%	2%	~	5%	3%	1%	4%	3%	~	~	~	6%	3%	3%	3%	3%	7%	2%	6%	
07	20	320	~	3	7	5	5	18	~	~	1	1	3	17	20	~	14	6		
	6%	7%	~	5%	8%	6%	7%	8%*	~	~	50%	~	3%	4%	7%	7%	6%	7%		
08	45	785	~	8	17	12	8	30	~	~	~	3	8	12	32	42	3	29	16	
	14%	16%	~	13%	20%	14%	11%	13%	~	~	~	19%	24%	17%	13%	14%	21%	13%	19%	
09	60	988	~	10	15	22	13	45	~	1	1	3	6	13	47	57	3	41	19	
	19%	21%	~	16%	17%	25%	18%	20%	~	33%	~	50%	19%	18%	18%	19%	21%	18%	23%	
BEST PERSONAL DOCTOR POSSIBLE	155	2358	100%	37	42	45	30	109	~	2	1	8	17	40	114	145	7	122	33	
	50%	49%	100%	59%	48%	52%	41%	48%	~	67%	100%	~	50%	50%	56%	49%	50%	54%*	39%*	
#8-10 (NET)	260	4130	100%	55	74	79	51	184	~	3	1	1	14	31	65	193	244	13	192	68
	84%	86%	100%	87%	85%	91%*	70%*	81%*	~	100%	100%	~	50%	88%	91%	92%*	83%	93%	85%	81%

Continued



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	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
9-10 (NET)	215 69%	3346 70%	1 100%	47 75%	57 66%	67 77%*	43 59%*	154 68%	3 ~100%	1 ~100%	1 50%	11 69%	23 68%	53 75%	161 68%	202 69%	10 71%	163 72%	52 62%
NOT ANSWERED	18	249		4	5	5	4	11			1		1	1	12	13		16	2
VALID CASES	311	4804	1	63	87	87	73	228	3	1	2	16	34	71	238	294	14	227	84
NUMBER OF RESPONDENTS	329 100%	5053 100%	1 100%	67 100%	92 100%	92 100%	77 100%	239 100%	3 100%	1 100%	3 100%	16 100%	35 100%	72 100%	250 100%	307 100%	14 100%	243 100%	86 100%
MEAN	8.77	8.87	10.0	9.08	8.84	9.10	8.00	8.65	9.67	10.0	8.00	8.69	9.00	9.13	8.66	8.74	9.07	8.86	8.52
p stat_(*=Sig @ p<=.05)		.289	~.072	.666	.016*	.002*	.032*	~	~	~	~	~	~	~.023*	.022*	~	~	~.144	.144

[ASKED IF Q30 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q42 YES	75 24%	1181 24%		6 ~ 10%*	21 24%	25 28%	23 32%	56 24%				4 ~ 25%*	12 35%*	12 17%	63 26%	68 23%*	7 54%*	10 4%*	65 77%*
NO	238 76%	3655 76%	1 100%*	57 90%*	67 76%	63 72%	50 68%	174 76%	3 ~100%*	1 ~100%*	2 ~100%*	12 75%*	22 65%*	58 83%	178 74%	229 77%*	6 46%*	219 96%*	19 23%*
NOT ANSWERED	16	217		4	4	4	4	9			1		1	2	9	10	1	14	2
VALID CASES	313	4836	1	63	88	88	73	230	3	1	2	16	34	70	241	297	13	229	84
NUMBER OF RESPONDENTS	329 100%	5053 100%	1 100%	67 100%	92 100%	92 100%	77 100%	239 100%	3 100%	1 100%	3 100%	16 100%	35 100%	72 100%	250 100%	307 100%	14 100%	243 100%	86 100%

[ASKED IF Q30 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q43 #YES	66 89%	1018 86%	6 ~100%	16 76%	23 92%	21 95%	51 91%	~	~	~	~	3 ~100%	10 83%	11 92%	55 89%	59 88%	7 100%	9 90%	57 89%
NO	8 11%	160 14%	~	5 24%	2 8%	1 5%	5 9%	~	~	~	~	~	2 17%	1 8%	7 11%	8 12%	~	1 10%	7 11%
NOT ANSWERED	1	36				1						1		1	1				1
VALID CASES	74	1178	6	21	25	22	56					3	12	12	62	67	7	10	64
NUMBER OF RESPONDENTS	75	1214	6	21	25	23	56					4	12	12	63	68	7	10	65
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q44 #YES	61 85%	992 85%	6 ~100%	13 68%	23 92%	19 86%	46 85%	~	~	~	~	2 67%	11 92%	10 83%	51 85%	55 85%	6 86%	9 90%	52 84%
NO	11 15%	179 15%	~	6 32%	2 8%	3 14%	8 15%	~	~	~	~	1 33%	1 8%	2 17%	9 15%	10 15%	1 14%	1 10%	10 16%
NOT ANSWERED	3	43		2		1	2					1		3	3			3	
VALID CASES	72	1171	6	19	25	22	54					3	12	12	60	65	7	10	62
NUMBER OF RESPONDENTS	75	1214	6	21	25	23	56					4	12	12	63	68	7	10	65
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER	AS-IAN	NATV ILND	AMER IND/ ALSK	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q45 YES	56 16%	817 14%		13 ~ 19%	13 13%	12 12%	18 23%	38 15%	1 ~ 25%		1 ~ 33%	3 20%	9 22%	12 15%	44 16%	47 14%	9 56%	22 8%*	34 37%*
NO	295 84%	4882 86%	1 100%	56 81%	87 87%	89 88%	62 78%	218 85%	3 ~ 75%	1 ~ 100%	2 67%	12 80%	32 78%	70 85%	224 84%	286 86%	7 44%	238 92%*	57 63%*
NOT ANSWERED	20	319		3	5	6	6					1		1		1		20	
VALID CASES	351	5699	1	69	100	101	80	256	4	1	3	15	41	82	268	333	16	260	91
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%

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			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV ILND	AMER IND/ PAC ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q46 NEVER	4 7%	42 5%	~	1 8%	1 8%	~	2 11%	3 8%	~	~	~	~	1 33%	~	1 8%	3 7%	3 6%	1 13%	3 14%	1 3%
SOMETIMES	8 15%	149 19%	~	2 15%	2 15%	2 18%	2 11%	6 16%	~	~	~	~	1 33%	1 11%	1 8%	7 16%	7 15%	1 13%	2 9%	6 18%
USUALLY	11 20%	195 25%	~	3 23%	3 23%	3 27%	2 11%	7 19%	~	~	~	1 100%	1 33%	1 11%	4 33%	7 16%	9 19%	2 25%	5 23%	6 18%
ALWAYS	32 58%	401 51%	~	7 54%	7 54%	6 55%	12 67%	21 57%	~	1 100%	~	~	~	7 78%	6 50%	26 60%	28 60%	4 50%	12 55%	20 61%
#ALWAYS + USUALLY (NET)	43 78%	596 76%	~	10 77%	10 77%	9 82%	14 78%	28 76%	~	1 100%	~	1 100%	1 33%	8 89%	10 83%	33 77%	37 79%	6 75%	17 77%	26 79%
TOP BOX SCORE	32 58%	401 51%	~	7 54%	7 54%	6 55%	12 67%	21 57%	~	1 100%	~	~	~	7 78%	6 50%	26 60%	28 60%	4 50%	12 55%	20 61%
NOT ANSWERED	1	26				1	1								1		1		1	
VALID CASES	55	787		13	13	11	18	37	1		1	3	9	12	43	47	8	22	33	
NUMBER OF RESPONDENTS	56	813		13	13	12	18	38	1		1	3	9	12	44	47	9	22	34	
	100%	100%		100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC
Q47 NONE	8 14%	60 8%	~ 15%~	2 15%~	2 17%~	2 11%~	2 16%~	6 ~	~	~	~	~	1 ~ 11%~	1 8%~	7 16%~	7 15%~	1 11%~	4 18%~	4 12%~
1 SPECIALIST	38 68%	510 64%	~ 54%~	7 77%~	10 83%~	10 61%~	11 61%~	23 ~100%~	1 ~100%~	1 ~100%~	2 67%~	8 89%~	9 75%~	29 66%~	33 70%~	5 56%~	17 77%~	21 62%~	
2	5 9%	153 19%*	~ 15%~	2 ~	~	3 ~ 17%~	4 11%~	~	~	~	1 ~ 33%~	~	2 ~ 17%~	3 7%~	3 6%~	2 22%~	1 5%~	4 12%~	
3	3 5%	36 5%	~ 8%~	1 8%~	1 ~	1 ~ 6%~	3 8%~	~	~	~	~	~	~	3 ~ 7%~	3 6%~	~	3 ~ 9%~		
4	1 2%	16 2%	~ 8%~	1 ~	~	~	1 3%~	~	~	~	~	~	~	1 ~ 2%~	1 2%~	~	1 ~ 3%~		
5 OR MORE SPECIALISTS	1 2%	17 2%	~	~	~	1 ~ 6%~	1 3%~	~	~	~	~	~	~	1 ~ 2%~	1 ~ 11%~	~	1 ~ 3%~		
NOT ANSWERED		21																	
VALID CASES	56	792	13	13	12	18	38	1			1	3	9	12	44	47	9	22	34
NUMBER OF RESPONDENTS	56	813	13	13	12	18	38	1			1	3	9	12	44	47	9	22	34
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFRI-AN	AMER IAN	NATV HAW/ILND	AMER IND/NATV	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q48 WORST SPECIALIST POSSIBLE		3 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
01		2 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
02		1 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
03		2 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
04	1 2%	5 0.6%	~	1 9%	~	~	~	1 3%	~	~	~	~	~	1 3%	1 3%	~	1 6%	~	
05	2 4%	22 3%	~	1 9%	1 9%	~	~	1 3%	~	~	1 33%	~	1 9%	1 3%	1 3%	1 13%	~	2 7%	
06	1 2%	34 5%	~	~	~	1 10%	~	1 3%	~	~	~	~	~	1 3%	1 3%	~	~	1 3%	
07	5 10%	53 8%	~	1 9%	3 27%	~	1 6%	4 13%	~	~	~	~	1 9%	4 11%	5 13%	~	2 11%	3 10%	
08	11 23%	121 17%	~	2 18%	2 18%	3 30%	4 25%	6 19%	~	~	1 ~100%	1 33%	2 25%	2 18%	9 24%	10 25%	1 13%	4 22%	7 23%
09	9 19%	144 20%	~	1 9%	2 18%	1 10%	5 31%	7 22%	~	~	~	~	1 13%	2 18%	7 19%	6 15%	3 38%	1 6%	8 27%
BEST SPECIALIST POSSIBLE	19 40%	324 45%	~	5 45%	3 27%	5 50%	6 38%	12 38%	1 ~100%	~	~	1 33%	5 63%	5 45%	14 38%	16 40%	3 38%	10 56%	9 30%

Continued



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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR AFR-	AMER AS- IAN	NATV HAW/ ILND	AMER IND/ NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
#8-10 (NET)	39 81%	589 83%	8 ~ 73%	7 64%	9 90%	15 94%	25 78%	1 ~100%	1 ~100%	2 67%	8 100%	9 82%	30 81%	32 80%	7 88%	15 83%	24 80%	
9-10 (NET)	28 58%	468 66%	6 ~ 55%	5 45%	6 60%	11 69%	19 59%	1 ~100%	~	1 ~ 33%	6 75%	7 64%	21 57%	22 55%	6 75%	11 61%	17 57%	
NOT ANSWERED		9																
VALID CASES	48	712	11	11	10	16	32	1	1	3	8	11	37	40	8	18	30	
NUMBER OF RESPONDENTS	48	721	11	11	10	16	32	1	1	3	8	11	37	40	8	18	30	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
MEAN	8.63	8.75	8.27	8.18	8.90	9.00	8.56	10.0	8.00	7.67	9.38	8.73	8.59	8.60	8.75	8.83	8.50	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q49 YES	82 23%	1474 26%		15 ~ 21%	23 23%	20 20%	24 30%	49 19%*	1 ~ 25%			7 ~ 44%	14 36%	24 29%	58 22%	75 23%	7 41%	53 20%*	29 33%*
NO	267 77%	4149 74%	1 100%~	55 79%	77 77%	78 80%	56 70%	206 81%*	3 ~ 75%	1 ~ 100%	3 ~ 100%	9 56%~	25 64%~	58 71%	208 78%	255 77%~	10 59%~	207 80%*	60 67%*
NOT ANSWERED	22	395		2	5	9	6	1					2	1	2	3		20	2
VALID CASES	349	5623	1	70	100	98	80	255	4	1	3	16	39	82	266	330	17	260	89
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC	
Q50 NEVER	5 6%	37 3%	~	~	1 4%	1 5%	3 13%	3 6%	~	~	~	~	1 14%	1 8%	~	5 9%	5 7%	~	3 6%	2 7%
SOMETIMES	16 20%	224 17%	~	4 29%	5 22%	5 25%	2 8%	12 24%	~	~	~	~	3 23%	1 4%	15 26%	14 19%	2 29%	~	8 15%	8 28%
USUALLY	21 26%	391 30%	~	3 21%	8 35%	5 25%	5 21%	12 24%	~	~	~	~	2 29%	6 46%	6 25%	15 26%	20 27%	1 14%	14 27%	7 24%
ALWAYS	39 48%	645 50%	~	7 50%	9 39%	9 45%	14 58%	22 45%	1 100%	~	~	~	4 57%	3 23%	17 71%	22 39%	35 47%	4 57%	27 52%	12 41%
#ALWAYS + USUALLY (NET)	60 74%	1037 80%	~	10 71%	17 74%	14 70%	19 79%	34 69%	1 100%	~	~	~	6 86%	9 69%	23 96%	37 65%	55 74%	5 71%	41 79%	19 66%
TOP BOX SCORE	39 48%	645 50%	~	7 50%	9 39%	9 45%	14 58%	22 45%	1 100%	~	~	~	4 57%	3 23%	17 71%	22 39%	35 47%	4 57%	27 52%	12 41%
NOT ANSWERED	1	44	~	1									1		1			1		
VALID CASES	81	1297		14	23	20	24	49	1				7	13	24	57	74	7	52	29
NUMBER OF RESPONDENTS	82	1341		15	23	20	24	49	1				7	14	24	58	75	7	53	29
	100%	100%		100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC	
Q51 NEVER	4 5%	31 2%	~	~	1 5%	1 5%	2 8%	3 6%	~	~	~	~	1 8%	~	4 7%	4 5%	~	3 6%	1 3%	
SOMETIMES	6 8%	120 9%	~	3 21%	1 5%	~	2 8%	5 10%	~	~	~	~	~	1 4%	5 9%	6 8%	~	4 8%	2 7%	
USUALLY	19 24%	278 21%	~	3 21%	4 18%	6 30%	6 25%	12 24%	~	~	~	~	1 14%	5 38%	2 9%	17 30%	18 25%	1 14%	10 20%	9 31%
ALWAYS	51 64%	871 67%	~	8 57%	16 73%	13 65%	14 58%	29 59%	1 100%	~	~	~	6 86%	7 54%	20 87%	31 54%	45 62%	6 86%	34 67%	17 59%
#ALWAYS + USUALLY (NET)	70 88%	1149 88%	~	11 79%	20 91%	19 95%	20 83%	41 84%	1 100%	~	~	~	7 100%	12 92%	22 96%	48 84%	63 86%	7 100%	44 86%	26 90%
TOP BOX SCORE	51 64%	871 67%	~	8 57%	16 73%	13 65%	14 58%	29 59%	1 100%	~	~	~	6 86%	7 54%	20 87%	31 54%	45 62%	6 86%	34 67%	17 59%
NOT ANSWERED	2	41	~	1	1	~	~	~	~	~	~	~	1	1	1	2	~	2	~	~
VALID CASES	80	1300	~	14	22	20	24	49	1	~	~	~	7	13	23	57	73	7	51	29
NUMBER OF RESPONDENTS	82	1341	~	15	23	20	24	49	1	~	~	~	7	14	24	58	75	7	53	29
	100%	100%	~	100%	100%	100%	100%	100%	100%	~	~	~	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q52 YES	106 31%	1596 29%	25 ~	32 37%	29 33%	20 30%	26% 75	30%	3 ~	75%~	~	4 ~	12 32%~	31 39%	74 28%	99 31%~	7 41%~	77 30%	29 33%
NO	236 69%	3983 71%	1 100%~	42 63%	66 67%	69 70%	58 74%	176 70%	1 ~	1 100%~	3 100%~	11 73%~	26 68%~	49 61%	187 72%	224 69%~	10 59%~	176 70%	60 67%
NOT ANSWERED	29	439	5	7	9	8	5				1	3	3	7	10		27	2	
VALID CASES	342	5579	1	67	98	98	78	251	4	1	3	15	38	80	261	323	17	253	89
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
PQ53 NEVER	7 2%	65 1%	~	1%	3%	1%	2%	5%	~	~	~	~	7%~	3%~	2%	5%	6%	1%	4%	3%
SOMETIMES	19 6%	282 5%	~	9%	3%	5%	6%	15%	~	1%	~	~	~	~	5%	14%	19%	~	13%	6%
USUALLY	38 11%	520 9%	~	10%	11%	13%	9%	27%	~	~	~	~	13%~	14%~	9%	28%	35%	3%	28%	10%
ALWAYS	274 81%	4656 84%	100%~	79%	82%	80%	82%	202%	~	3%	1%	3%	12%	31%	61%	213%	259%	13%	205%	69%
#ALWAYS + USUALLY (NET)	312 92%	5175 94%	100%~	90%	94%	94%	91%	229%	~	3%	1%	3%	14%	36%	70%	241%	294%	16%	233%	79%
TOP BOX SCORE	274 81%	4656 84%	100%~	79%	82%	80%	82%	202%	~	3%	1%	3%	12%	31%	61%	213%	259%	13%	205%	69%
NOT ANSWERED	4	67			2	1	1	2						1	3	1	4		3	1
VALID CASES	338	5523	1	67	96	97	77	249	4	1	3	15	37	77	260	319	17	250	88	
NUMBER OF RESPONDENTS	342 100%	5590 100%	1	67 100%	98 100%	98 100%	78 100%	251 100%	4 100%	1 100%	3 100%	15 100%	38 100%	80 100%	261 100%	323 100%	17 100%	253 100%	89 100%	

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q54 WORST HEALTH PLAN POSSIBLE	1	18	~	~	~	~	1	1	~	~	~	~	~	1	1	~	1	~		
	0.3%	0.3%					0.4%							0.4%	0.3%		0.4%			
01		11	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
		0.2%																		
02	3	27	~	2	~	~	1	2	~	~	~	1	3	3	~	2	1			
	0.9%	0.5%		3%			1%	0.8%				6%	1%	0.9%		0.8%	1%			
03	1	40	~	1	~	~	~	1	~	~	~	~	~	1	~	1	~			
	0.3%	0.7%		1%				0.4%						0.3%		0.4%				
04	4	53	~	~	1	1	2	3	~	~	~	1	4	4	~	3	1			
	1%	0.9%			1%	1%	3%	1%				3%	2%	1%		1%	1%			
05	26	288	~	2	2	13	9	24	~	1	~	1	3	23	24	2	16	10		
	8%	5%		3%*	2%*	13%*	12%	10%*		25%		3%	4%	9%	7%~	12%~	6%	11%		
06	19	265	~	~	9	3	7	16	~	~	~	2	1	3	16	18	1	11	8	
	6%	5%			9%	3%	9%	6%				13%	3%	4%	6%	6%~	6%~	4%	9%	
07	37	565	~	6	8	14	9	24	~	1	~	1	9	3	34	36	1	27	10	
	11%	10%		9%	8%	14%	12%	10%		100%		6%	23%	4%*	13%*	11%~	6%~	11%	11%	
08	64	980	~	9	26	17	12	50	~	1	~	1	9	14	49	60	3	51	13	
	19%	18%		13%	26%*	17%	15%	20%		25%		6%	23%	17%	19%	18%~	18%~	20%	15%	
09	63	1008	~	15	18	12	18	46	~	~	~	1	3	4	17	46	5	47	16	
	18%	18%		22%	18%	12%*	23%	18%				33%	19%	10%	20%	18%	18%~	29%~	18%	18%
BEST HEALTH PLAN POSSIBLE	127	2334	100%	34	35	38	19	85	~	2	~	2	8	14	43	84	5	97	30	
	37%	42%		49%*	35%	39%	24%*	34%		50%		67%	50%	36%	52%*	32%*	37%~	29%~	38%	34%
#8-10 (NET)	254	4322	100%	58	79	67	49	181	~	3	~	3	12	27	74	179	13	195	59	
	74%	77%		84%*	80%	68%	63%*	72%		75%		100%	75%	69%	89%*	69%*	73%~	76%~	76%	66%

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR POOR	NO CCC	CCC	
9-10 (NET)	190 55%	3342 60%	1 100%	49 71%*	53 54%	50 51%	37 47%	131 52%	2 ~ 50%	3 ~100%	11 69%	18 46%	60 72%*	130 50%*	179 55%	10 59%	144 56%	46 52%	
NOT ANSWERED	26	430		3	6	9	8	4				2		7	7		24	2	
VALID CASES	345	5588	1	69	99	98	78	252	4	1	3	16	39	83	261	326	17	256	89
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%
MEAN	8.34	8.52	10.0	8.78	8.53	8.26	7.79	8.20	8.25	7.00	9.67	8.50	8.36	9.02	8.12	8.33	8.35	8.42	8.11
p stat_(*=Sig @ p<=.05)		.050		~.027*	.229	.588	.003*	.021*	~	~	~	~	~	~.000*	.000*	~	~	.188	.187



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q55 YES	136 39%	2224 39%		30 ~ 43%	40 40%	34 35%	32 40%	103 41%			2 ~ 67%	8 50%	13 33%	33 40%	103 39%	126 38%	9 53%	73 28%*	63 69%*
NO	213 61%	3434 61%	1 100%	40 ~ 57%	60 60%	64 65%	48 60%	151 59%	4 ~100%	1 ~100%	1 33%	8 50%	27 68%	49 60%	163 61%	204 62%	8 47%	185 72%*	28 31%*
NOT ANSWERED	22	359		2	5	9	6	2					1	1	2	3		22	
VALID CASES	349	5659	1	70	100	98	80	254	4	1	3	16	40	82	266	330	17	258	91
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q56 NEVER	2 1%	36 2%	~	~	~	3%	3%	2%	~	~	~	~	~	~	2%	2%	2%	3%	~	
SOMETIMES	17 13%	208 9%	~	2 7%	3 8%	2 6%	10 31%	12 12%	~	~	~	2 29%	2 15%	4 13%	13 13%	15 12%	2 25%	4 6%*	13 21%*	
USUALLY	27 20%	522 24%	~	7 24%	6 15%	10 29%	4 13%	22 21%	~	~	~	~	2 15%	7 22%	20 19%	26 21%	1 13%	16 22%	11 17%	
ALWAYS	89 66%	1443 65%	~	20 69%	31 78%	21 62%	17 53%	67 65%	~	~	~	2 100%	5 71%	9 69%	21 66%	68 66%	83 66%	5 63%	50 69%	39 62%
#ALWAYS + USUALLY (NET)	116 86%	1964 89%	~	27 93%	37 93%	31 91%	21 66%	89 86%	~	~	~	2 100%	5 71%	11 85%	28 88%	88 85%	109 87%	6 75%	66 92%*	50 79%*
TOP BOX SCORE	89 66%	1443 65%	~	20 69%	31 78%	21 62%	17 53%	67 65%	~	~	~	2 100%	5 71%	9 69%	21 66%	68 66%	83 66%	5 63%	50 69%	39 62%
NOT ANSWERED	1	47	1									1		1			1	1		
VALID CASES	135	2208	29	40	34	32	103					2	7	13	32	103	126	8	72	63
NUMBER OF RESPONDENTS	136	2255	30	40	34	32	103					2	8	13	33	103	126	9	73	63
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q57 #YES	80 60%	1308 61%	16 ~ 55%	21 ~ 53%	21 ~ 64%	22 ~ 69%	57 56%	~	~	1 ~ 50%	7 ~ 88%	9 ~ 69%	20 61%	60 59%	73 59%	7 78%	33 46%*	47 76%*
NO	54 40%	853 39%	13 ~ 45%	19 ~ 48%	12 ~ 36%	10 ~ 31%	44 44%	~	~	1 ~ 50%	1 ~ 13%	4 ~ 31%	13 39%	41 41%	51 41%	2 22%	39 54%*	15 24%*
NOT ANSWERED	2	94	1		1		2							2	2		1	1
VALID CASES	134	2161	29	40	33	32	101			2	8	13	33	101	124	9	72	62
NUMBER OF RESPONDENTS	136	2255	30	40	34	32	103			2	8	13	33	103	126	9	73	63
	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q58																			
EXCELLENT	148 42%	2291 40%	1 100%~	42 60%*	36 36%	42 42%	27 34%	109 43%	2 ~ 50%~	1 ~ 33%~	4 25%~	21 51%~	25 30%*	123 46%*	148 44%~	133 ~ 51%*	15 16%*		
VERY GOOD	129 37%	2006 35%		16 ~ 23%*	39 39%	43 43%	31 39%	94 37%	1 ~ 25%~	1 ~ 100%~	2 67%~	6 38%~	15 37%~	30 37%	98 39%~	129 39%~	85 ~ 33%*	44 48%*	
GOOD	56 16%	1106 20%		10 ~ 14%	18 18%	12 12%	16 20%	39 15%	1 ~ 25%~			2 ~ 13%~	5 12%~	20 24%*	36 13%*	56 17%~	34 ~ 13%*	22 24%*	
FAIR	16 5%	239 4%		1 ~ 1%*	6 6%	4 4%	5 6%	12 5%				4 ~ 25%~		6 7%	10 4%	16 ~ 94%~	7 3%*	9 10%*	
POOR	1 0.3%	17 0.3%		1 ~ 1%~										1 1%~		1 ~ 6%~		1 ~ 1%~	
#EXCELLENT + VERY GOOD + GOOD (NET)	333 95%	5403 95%	1 100%~	68 97%	93 94%	97 96%	74 94%	242 95%	4 ~ 100%~	1 ~ 100%~	3 ~ 100%~	12 75%~	41 100%~	75 91%	257 96%	333 100%~	252 ~ 97%*	81 89%*	
NOT ANSWERED	21	359		2	6	6	7	2						1	1		21		
VALID CASES	350	5659	1	70	99	101	79	254	4	1	3	16	41	82	267	333	17	259	91
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q59 EXCELLENT	169 48%	2506 44%	1 100%	50 71%*	49 50%	35 35%*	34 43%	127 50%	3 ~100%	3 ~100%	6 38%	19 46%	37 45%	132 50%	165 50%	4 24%	150 58%*	19 21%*	
VERY GOOD	92 26%	1630 29%		10 ~14%*	29 30%	34 34%	19 24%	68 27%		1 ~100%		4 ~25%	7 17%	21 25%	70 26%	90 27%	1 6%	68 26%	24 26%
GOOD	60 17%	1044 18%		10 ~14%	12 12%	20 20%	18 23%	39 15%				4 ~25%	11 27%	19 23%	41 15%	55 17%	4 24%	32 12%*	28 31%*
FAIR	20 6%	420 7%			4 ~4%	9 9%	7 9%	13 5%				2 ~13%	3 7%	6 7%	14 5%	15 5%	5 29%	7 3%*	13 14%*
POOR	8 2%	74 1%			4 ~4%	2 2%	2 3%	7 3%					1 ~2%		8 ~3%	5 2%	3 18%	1 0.4%*	7 8%*
#EXCELLENT + VERY GOOD + GOOD (NET)	321 92%	5181 91%	1 100%	70 ~100%	90 ~92%	89 89%	71 89%	234 92%	3 ~100%	1 ~100%	3 ~100%	14 88%	37 90%	77 93%	243 92%	310 94%	9 53%	250 97%*	71 78%*
NOT ANSWERED	22	344		2	7	7	6	2	1					3	3		22		
VALID CASES	349	5674	1	70	98	100	80	254	3	1	3	16	41	83	265	330	17	258	91
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q60 YES	72 21%	1197 21%		8 ~ 12%*	18 18%	25 25%	21 26%	55 22%			1 ~ 33%	5 31%~	7 17%~	16 19%	56 21%	63 19%~	9 53%~	14 5%*	58 64%*
NO	278 79%	4478 79%	1 100%~	61 88%*	82 82%	75 75%	59 74%	199 78%	4 ~100%~	1 ~100%~	2 67%~	11 69%~	34 83%~	67 81%	210 79%	268 81%~	8 47%~	245 95%*	33 36%*
NOT ANSWERED	21	343		3	5	7	6	2						2	2		21		
VALID CASES	350	5675	1	69	100	100	80	254	4	1	3	16	41	83	266	331	17	259	91
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%

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

	AGE					RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC
Q61 YES	60	945	4	13	24	19	45			1	5	5	12	48	52	8	3	57
	83%	79%	~ 50%	~ 72%	~ 96%	~ 90%	82%	~	~	~ 100%	~ 100%	~ 71%	~ 75%	~ 86%	~ 83%	~ 89%	~ 21%	~ 98%
NO	12	248	4	5	1	2	10					2	4	8	11	1	11	1
	17%	21%	~ 50%	~ 28%	~ 4%	~ 10%	18%	~	~	~	~	~ 29%	~ 25%	~ 14%	~ 17%	~ 11%	~ 79%	~ 2%
NOT ANSWERED		41																
VALID CASES	72	1192	8	18	25	21	55			1	5	7	16	56	63	9	14	58
NUMBER OF RESPONDENTS	72	1233	8	18	25	21	55			1	5	7	16	56	63	9	14	58
	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q60 = YES]

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q62 YES	55 93%	867 92%	4 ~100%	11 85%	22 92%	18 100%	41 91%	~	~	1 ~100%	5 100%	4 100%	12 100%	43 91%	47 92%	8 100%	55 ~98%	
NO	4 7%	75 8%	~	2 15%	2 8%	~	4 9%	~	~	~	~	~	~	4 9%	4 8%	~100%	3 2%	1 ~
NOT ANSWERED	1	13				1						1		1	1			1
VALID CASES	59	942	4	13	24	18	45			1	5	4	12	47	51	8	3	56
NUMBER OF RESPONDENTS	60	955	4	13	24	19	45			1	5	5	12	48	52	8	3	57
	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q60 = YES AND Q61 = YES]



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q63																				
YES	63 18%	872 15%	~	13%	13%	28%*	16%	48 19%	~	~	~	33%~	5 31%~	7 18%~	9 11%*	54 20%*	54 16%~	9 53%~	6 2%*	57 63%*
NO	287 82%	4772 85%	100%~	87%	87%	72%*	84%	208 81%	~100%~	~100%~	1 67%~	2 69%~	11 82%~	32 89%*	73 80%*	213 84%~	277 47%~	8 98%*	254 37%*	33
NOT ANSWERED	21	374		2	5	7	7						2	1	1	2		20	1	
VALID CASES	350	5644	1	70	100	100	79	256	4	1	3	16	39	82	267	331	17	260	90	
NUMBER OF RESPONDENTS	371 100%	6018 100%	100%	100%	100%	100%	100%	256 100%	4 100%	1 100%	3 100%	16 100%	39 100%	82 100%	267 100%	331 100%	17 100%	260 100%	90 100%	

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q64 YES	53 87%	716 83%	7 ~ 78%	8 ~ 73%	27 ~ 96%	11 ~ 85%	42 ~ 89%	~	~	1 ~ 100%	3 ~ 60%	5 ~ 83%	7 ~ 78%	46 ~ 88%	45 ~ 87%	8 ~ 89%	1 ~ 20%	52 ~ 93%
NO	8 13%	150 17%	2 ~ 22%	3 ~ 27%	1 ~ 4%	2 ~ 15%	5 ~ 11%	~	~	~	2 ~ 40%	1 ~ 17%	2 ~ 22%	6 ~ 12%	7 ~ 13%	1 ~ 11%	4 ~ 80%	4 ~ 7%
NOT ANSWERED	2	15		2			1					1		2	2		1	1
VALID CASES	61	866	9	11	28	13	47			1	5	6	9	52	52	9	5	56
NUMBER OF RESPONDENTS	63	881	9	13	28	13	48			1	5	7	9	54	54	9	6	57
	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q63 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q65 YES	50 96%	679 96%	6 ~ 86%	8 ~100%	25 ~ 96%	11 ~100%	39 95%	~	~	1 ~100%	3 ~100%	5 ~100%	5 83%	45 98%	42 95%	8 ~100%	50 ~ 98%		
NO	2 4%	29 4%	1 ~ 14%	~	1 ~ 4%	~	2 5%	~	~	~	~	~	1 17%	1 2%	2 5%	~	1 ~100%	1 2%	
NOT ANSWERED	1	17			1		1						1		1			1	
VALID CASES	52	708	7	8	26	11	41			1	3	5	6	46	44	8	1	51	
NUMBER OF RESPONDENTS	53 100%	725 100%	7 100%	8 100%	27 100%	11 100%	42 100%			1 100%	3 100%	5 100%	7 100%	46 100%	45 100%	8 100%	1 100%	52 100%	

[ASKED IF Q63 = YES AND Q64 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ 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	39 11%	674 12%	~	7%	10%	18%*	8%	11%	~	~	~	33%~	31%~	10%~	7%	12%	34	5	4	35
NO	311 89%	4980 88%	100%~	93%	90%	82%*	93%	89%	~100%~	~100%~	67%~	69%~	90%~	93%	88%	297	12	256	55	
NOT ANSWERED	21	364		2	6	7	6	1						1	1	2		20	1	
VALID CASES	350	5654	1	70	99	100	80	255	4	1	3	16	41	82	267	331	17	260	90	
NUMBER OF RESPONDENTS	371 100%	6018 100%	100%	100%	100%	100%	100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%	

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q67 YES	32 84%	505 79%	~	4 80%	4 44%	18 100%	6 100%	25 89%	~	~	~	4 80%	3 75%	4 67%	28 88%	27 82%	5 100%	~	32 91%
NO	6 16%	133 21%	~	1 20%	5 56%	~	~	3 11%	~	~	1 100%	1 20%	1 25%	2 33%	4 13%	6 18%	~	3 100%	3 9%
NOT ANSWERED	1	30			1											1		1	
VALID CASES	38	638		5	9	18	6	28			1	5	4	6	32	33	5	3	35
NUMBER OF RESPONDENTS	39	668		5	10	18	6	28			1	5	4	6	32	34	5	4	35
	100%	100%		100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q66 = YES]

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q68 YES	32	510	4	4	18	6	25					4	3	4	28	27	5	32
	100%	96%	~100%	~100%	~100%	~100%	~100%	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%	~100%
NO		19																
		4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		5																
VALID CASES	32	529	4	4	18	6	25					4	3	4	28	27	5	32
NUMBER OF RESPONDENTS	32	534	4	4	18	6	25					4	3	4	28	27	5	32
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q66 = YES AND Q67 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- 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		
Q69 YES	38 11%	583 10%	~	6 9%	17 18%*	12 12%	3 4%*	30 12%	~	~	~	1 33%~	2 13%~	4 10%~	7 9%	31 12%	33 10%~	5 29%~	10 4%*	28 31%*
NO	309 89%	5081 90%	100%~	1 91%	64 82%*	80 88%	87 96%*	77 88%	223 88%	4 ~100%~	1 ~100%~	2 67%~	14 88%~	37 90%~	75 91%	234 88%	295 90%~	12 71%~	248 96%*	61 69%*
NOT ANSWERED	24	354		2	8	8	6	3							1	3	5		22	2
VALID CASES	347	5664	1	70	97	99	80	253	4	1	3	16	41	82	265	328	17	258	89	
NUMBER OF RESPONDENTS	371 100%	6018 100%	100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q70 YES	24 65%	317 61%	~	4 67%	7 44%	10 83%	3 100%	19 66%	~	~	~	2 100%	3 75%	3 50%	21 68%	19 59%	5 100%	~	24 86%
NO	13 35%	205 39%	~	2 33%	9 56%	2 17%	10 34%	~	~	1 100%	~	1 25%	1 50%	10 32%	13 41%	~	~	9 100%	4 14%
NOT ANSWERED	1	42		1			1							1		1		1	
VALID CASES	37	522		6	16	12	3	29		1	2	4	6	31	32	5	9	28	
NUMBER OF RESPONDENTS	38	564		6	17	12	3	30		1	2	4	7	31	33	5	10	28	
	100%	100%		100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q69 = YES]



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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q71 YES	24	315	4	7	10	3	19					2	3	3	21	19	5	24
	100%	96%	~100%	~100%	~100%	~100%	~100%	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%	~100%
NO		14																
		4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		6																
VALID CASES	24	330	4	7	10	3	19					2	3	3	21	19	5	24
NUMBER OF RESPONDENTS	24	336	4	7	10	3	19					2	3	3	21	19	5	24
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q69 = YES AND Q70 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	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	
Q72																				
YES	49 14%	799 14%	~	4 6%*	13 13%	20 20%	12 15%	36 14%	~	~	~	~	3 19%~	9 22%~	8 10%	41 15%	43 13%~	5 29%~	4 2%*	45 49%*
NO	300 86%	4843 86%	100%~	1 94%*	65 87%	85 80%	68 85%	219 86%	~100%~	4 100%~	1 100%~	3 100%~	13 81%~	32 78%~	73 90%	227 85%	287 87%~	12 71%~	254 98%*	46 51%*
NOT ANSWERED	22	376		3	7	6	6	1							2	3		22		
VALID CASES	349	5642	1	69	98	101	80	255	4	1	3	16	41	81	268	330	17	258	91	
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%	

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

	AGE					RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR 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	
Q73 YES	43	744	4	12	18	9	32	~	~	~	~	3	7	7	36	38	5	43	
	100%	94%	~100%	~100%	~100%	~100%	~100%	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%	~100%	
NO		48	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
		6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NOT ANSWERED	6	31		1	2	3	4						2	1	5	5		4	2
VALID CASES	43	793	4	12	18	9	32					3	7	7	36	38	5	43	
NUMBER OF RESPONDENTS	49	824	4	13	20	12	36					3	9	8	41	43	5	4	45
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q72 = YES]

NQ74 WHAT IS YOUR CHILD'S AGE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR 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 & POOR	FAIR & POOR	NO CCC	CCC
NQ74																				
LESS THAN 1 YEAR OLD	1 0.3%	27 0.4%	1 100%	~	~	~	~	1 0.4%	~	~	~	~	~	~	1 0.4%	1 0.3%	1 0.3%	~	1 0.4%	~
1 TO 3 YEARS OLD	72 19%	1125 19%	~	72 ~100%	~	~	~	49 19%	~	~	~	1 33%	3 19%	9 22%	20 24%	50 19%	68 20%	2 12%	64 23%*	8 9%*
4 TO 7 YEARS OLD	105 28%	1651 27%	~	~	105 ~100%	~	~	70 27%	2 50%	~	1 33%	6 38%	13 32%	22 27%	77 29%	93 28%	6 35%	81 29%	24 26%	
8 TO 12 YEARS OLD	107 29%	1813 30%	~	~	~	107 ~100%	~	75 29%	2 50%	~	1 33%	4 25%	12 29%	22 27%	79 29%	97 29%	4 24%	72 26%*	35 38%*	
13 OR OLDER	86 23%	1402 23%	~	~	~	86 ~100%	~	61 24%	~	~	1 ~100%	3 ~	7 19%	19 23%	61 23%	74 22%	5 29%	62 22%	24 26%	
VALID CASES	371	6018	1	72	105	107	86	256	4	1	3	16	41	83	268	333	17	280	91	
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%	

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

NQ75 IS YOUR CHILD MALE OR FEMALE?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR 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
NQ75 MALE	193 52%	3120 52%	1 100%	41 57%	59 56%	50 47%	42 49%	129 50%	2 ~ 50%	1 ~ 100%	3 ~ 100%	11 ~ 69%	22 ~ 54%	47 57%	138 51%	174 52%	12 71%	137 49%*	56 62%*
FEMALE	178 48%	2898 48%	~	31 43%	46 44%	57 53%	44 51%	127 50%	2 ~ 50%	~	~	5 ~ 31%	19 ~ 46%	36 43%	130 49%	159 48%	5 29%	143 51%*	35 38%*
VALID CASES	371	6018	1	72	105	107	86	256	4	1	3	16	41	83	268	333	17	280	91
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%

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

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q76																			
HISPANIC OR LATINO	83 24%	2443 43%*		20 ~ 29%	22 22%	22 22%	19 24%	30 12%*	~	~	~	~	13 81%~	13 32%~	83 100%~	75 23%~	7 41%~	66 25%	17 19%
NOT HISPANIC OR LATINO	268 76%	3183 57%*	1 100%~	50 71%	77 78%	79 78%	61 76%	226 88%*	4 ~100%~	1 100%~	3 100%~	3 19%~	28 68%~	268 100%~	257 77%~	10 59%~	194 75%	74 81%	
NOT ANSWERED	20	391		2	6	6	6								1		20		
VALID CASES	351	5627	1	70	99	101	80	256	4	1	3	16	41	83	268	332	17	260	91
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHITE	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & POOR	VERY FAIR & POOR	NO CCC	CCC		
Q77.1	AHP TOT CHLD																			
	OHP TOT CHLD																			
YES	297 80%	3921 65%*	1 100%	58 81%	83 79%	87 81%	68 79%	256 100%	~	~	~	~	~	41 ~100%	43 52%*	254 95%*	283 85%~	12 71%~	219 78%	78 86%
NO	74 20%	2097 35%*	~	14 19%	22 21%	20 19%	18 21%	~	4 ~100%	1 ~100%	3 ~100%	16 ~100%	~	40 ~48%*	14 5%*	50 15%~	5 29%~	61 22%	13 14%	
VALID CASES	371	6018	1	72	105	107	86	256	4	1	3	16	41	83	268	333	17	280	91	
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%	

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q77.2 YES	5 1%	320 5%*	~	1%	3%	~	1%	~	~	~	~	~	~	5 12%~	1% 1%	4 2%~	5 2%~	~	5 2%*	~
NO	366 99%	5698 95%*	100%~	99%	97%	100%~	99%	256 100%~	4 ~100%~	1 ~100%~	3 ~100%~	16 ~100%~	36 88%~	82 99%	264 99%	328 98%~	17 100%~	275 98%*	91 100%~	
VALID CASES	371	6018	1	72	105	107	86	256	4	1	3	16	41	83	268	333	17	280	91	
NUMBER OF RESPONDENTS	371 100%	6018 100%	100%	100%	100%	100%	100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%	



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

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & POOR	VERY FAIR & POOR	NO CCC	CCC	
Q77.3	AHP TOT CHLD																		
	OHP TOT CHLD																		
YES	11 3%	238 4%	1 ~	3 1%	6 3%	1 6%	~	4 ~100%	~	~	7 ~17%	2 2%	9 3%	11 3%	~	10 4%	1 1%		
NO	360 97%	5780 96%	1 100%	71 99%	102 97%	101 94%	85 99%	256 100%	~	1 ~100%	3 ~100%	16 ~100%	34 83%	81 98%	259 97%	322 97%	17 ~100%	270 96%	90 99%
VALID CASES	371	6018	1	72	105	107	86	256	4	1	3	16	41	83	268	333	17	280	91
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
Q77.4 YES	8 2%	104 2%		2 ~ 3%	2 2%	2 2%	2 2%			1 ~100%		7 ~ 17%	2 2%	6 2%	8 2%		7 2%	1 1%	
NO	363 98%	5914 98%	1 100%	70 ~ 97%	103 98%	105 98%	84 98%	256 100%	4 ~100%	3 ~100%	16 ~100%	34 ~ 83%	81 98%	262 98%	325 98%	17 ~100%	273 98%	90 99%	
VALID CASES	371	6018	1	72	105	107	86	256	4	1	3	16	41	83	268	333	17	280	91
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%

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	WHITE	BLCK OR 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	
Q77.5	AHP TOT CHLD																		
	OHP TOT CHLD																		
YES	18 5%	339 6%	4 ~6%	4 4%	6 6%	4 5%	~	~	~	3 ~100%	15 ~37%	3 4%	15 6%	18 5%	12 4%	6 7%			
NO	353 95%	5679 94%	1 100%	68 94%	101 96%	101 94%	82 95%	256 100%	4 ~100%	1 ~100%	16 ~100%	26 63%	80 96%	253 94%	315 95%	17 100%	268 96%	85 93%	
VALID CASES	371	6018	1	72	105	107	86	256	4	1	3	16	41	83	268	333	17	280	91
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%

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	HIS- PAN- IC	NOT GOOD & POOR	VERY FAIR & POOR	NO CCC	CCC	
Q77.6	AHP TOT CHLD																		
	OHP TOT CHLD																		
YES	33 9%	629 10%	7 ~10%	11 10%	8 7%	7 8%	~	~	~	~	16 ~100%	17 41%	22 27%*	11 4%*	29 9%~	4 24%~	17 6%*	16 18%*	
NO	338 91%	5389 90%	1 100%~	65 90%	94 90%	99 93%	79 92%	256 100%~	4 ~100%	1 ~100%	3 ~100%	24 ~59%	61 73%*	257 96%*	304 91%~	13 76%~	263 94%*	75 82%*	
VALID CASES	371	6018	1	72	105	107	86	256	4	1	3	16	41	83	268	333	17	280	91
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%

Q78 WHAT IS YOUR AGE?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q78 UNDER 18	9 3%	209 4%	~	3 4%	1 1%	3 3%	2 3%	8 3%	~	~	~	~	1 6%	~	2 2%	7 3%	8 2%	1 6%	5 2%	4 4%
18 TO 24	24 7%	307 5%	~	18 26%*	5 5%	1 1%*	~	16 6%	~	~	~	~	1 6%	4 10%	6 7%	18 7%	24 7%	~	21 8%	3 3%
25 TO 34	144 41%	2087 37%	~	31 44%	59 60%*	35 35%	19 24%*	104 41%	~	1 25%	~	1 33%	9 56%	17 41%	43 52%*	101 38%*	134 40%	9 53%	110 42%	34 37%
35 TO 44	118 34%	2042 36%	100%	1 21%*	15 27%	27 37%	37 48%*	38 35%	~	1 25%	1 100%	1 33%	1 6%	13 32%	24 29%	94 35%	114 34%	3 18%	86 33%	32 35%
45 TO 54	34 10%	708 13%	~	1 1%*	5 5%*	13 13%	15 19%*	23 9%	~	1 25%	~	1 33%	3 19%	4 10%	4 5%*	30 11%*	31 9%	3 18%	26 10%	8 9%
55 TO 64	17 5%	233 4%	~	1 1%*	1 1%*	10 10%*	5 6%	13 5%	~	1 25%	~	~	1 6%	2 5%	2 2%	15 6%	16 5%	1 6%	9 3%	8 9%
65 TO 74	3 0.9%	39 0.7%	~	1 1%	1 1%	1 1%	~	2 0.8%	~	~	~	~	~	1 2%	1 1%	2 0.7%	3 0.9%	~	2 0.8%	1 1%
75 OR OLDER	1 0.3%	12 0.2%	~	~	~	1 1%	~	~	~	~	~	~	~	~	1 1%	~	1 0.3%	~	~	1 1%
NOT ANSWERED	21	382		2	6	6	7	1							1		2		21	
VALID CASES	350	5636	1	70	99	101	79	255	4	1	3	16	41	83	267	331	17	259	91	
NUMBER OF RESPONDENTS	371	6018	1	72	105	107	86	256	4	1	3	16	41	83	268	333	17	280	91	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q79 ARE YOU MALE OR FEMALE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- 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	
Q79																			
MALE	44 13%	691 12%		4 6%*	12 12%	15 15%	13 16%	32 13%	1 25%~	1 33%~	2 13%~	6 15%~	7 8%	37 14%	43 13%~	1 6%~	31 12%	13 14%	
FEMALE	306 87%	4976 88%	1 100%~	66 94%*	87 88%	85 85%	67 84%	223 87%	3 75%~	1 100%~	2 67%~	14 88%~	35 85%~	76 92%	230 86%	288 87%~	16 94%~	229 88%	77 86%
NOT ANSWERED	21	352		2	6	7	6	1						1	2		20	1	
VALID CASES	350	5666	1	70	99	100	80	255	4	1	3	16	41	83	267	331	17	260	90
NUMBER OF RESPONDENTS	371 100%	6018 100%	1 100%	72 100%	105 100%	107 100%	86 100%	256 100%	4 100%	1 100%	3 100%	16 100%	41 100%	83 100%	268 100%	333 100%	17 100%	280 100%	91 100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	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
Q80																				
8TH GRADE OR LESS	21 6%	729 13%*	~	4 6%	5 5%	6 6%	6 8%	11 4%	~	~	~	~	2 13%~	~	17 21%*	4 1%*	18 5%~	3 18%~	20 8%*	1 1%*
SOME HIGH SCHOOL BUT DID NOT GRADUATE	45 13%	659 12%	~	10 14%	12 12%	11 11%	12 15%	33 13%	~	~	~	~	2 13%~	3 7%~	15 19%	30 11%	42 13%~	3 18%~	32 12%	13 14%
HIGH SCHOOL GRADUATE OR GED	119 34%	1741 31%	~	25 36%	33 34%	36 36%	25 32%	85 33%	~	1 25%~	~	2 67%~	5 33%~	15 37%~	28 35%	91 34%	113 34%~	6 35%~	90 35%	29 32%
SOME COLLEGE OR 2-YEAR DEGREE	123 35%	1785 32%	100%~	1 37%	26 33%	32 34%	30 38%	94 37%	~	1 25%~	1 100%~	1 33%~	5 33%~	17 41%~	19 23%*	104 39%*	119 36%~	3 18%~	90 35%	33 37%
4-YEAR COLLEGE GRADUATE	23 7%	395 7%	~	4 6%	11 11%	6 6%	2 3%*	20 8%	~	1 25%~	~	~	~	2 5%~	2 2%*	21 8%*	23 7%~	~	16 6%	7 8%
MORE THAN 4-YEAR COLLEGE DEGREE	17 5%	239 4%	~	1 1%*	5 5%	8 8%	3 4%	11 4%	~	1 25%~	~	~	1 7%~	4 10%~	~	17 6%~	15 5%~	2 12%~	10 4%	7 8%
NOT ANSWERED	23	471		2	7	6	8	2					1		2	1	3		22	1
VALID CASES	348	5547	1	70	98	101	78	254		4	1	3	15	41	81	267	330	17	258	90
NUMBER OF RESPONDENTS	371	6018	1	72	105	107	86	256		4	1	3	16	41	83	268	333	17	280	91
	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q81 HOW ARE YOU RELATED TO THE CHILD?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV ILND	AMER IND/ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q81																				
MOTHER OR FATHER	329 95%	5300 95%	1 100%	67 96%	96 97%	87 90%*	78 98%	239 94%		4 ~100%	1 ~100%	3 ~100%	15 ~100%	38 93%	80 98%	249 94%	311 95%	16 94%	250 97%*	79 89%*
GRANDPARENT	9 3%	137 2%	~	3 4%	1 1%	5 5%	~	7 3%	~	~	~	~	~	2 5%	~	9 3%	8 2%	1 6%	5 2%	4 4%
AUNT OR UNCLE		36 0.6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
OLDER BROTHER OR SISTER		4 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
OTHER RELATIVE	3 0.9%	6 0.1%	~	~	1 1%	2 2%	~	2 0.8%	~	~	~	~	~	1 2%	~	3 1%	3 0.9%	~	1 0.4%	2 2%
LEGAL GUARDIAN	2 0.6%	77 1%	~	~	~	1 1%	1 1%	1 0.4%	~	~	~	~	~	~	1 1%	1 0.4%	2 0.6%	~	~	2 2%
SOMEONE ELSE	4 1%	44 0.8%	~	~	1 1%	2 2%	1 1%	4 2%*	~	~	~	~	~	~	1 1%	3 1%	4 1%	~	2 0.8%	2 2%
NOT ANSWERED	24	415		2	6	10	6	3					1		1	3	5		22	2
VALID CASES	347	5603	1	70	99	97	80	253	4	1	3	15	41	82	265	328	17	258	89	
NUMBER OF RESPONDENTS	371	6018	1	72	105	107	86	256	4	1	3	16	41	83	268	333	17	280	91	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%



Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
Q82 YES	3 1%	157 5%*	~	1 2%~	1 2%	~	1 2%	1 0.6%	~	~	~	~	1 9%~	~	2 4%	1 0.6%	~	2 0.9%	1 13%	3 2%	~
NO	219 99%	3319 95%*	1 100%~	40 98%~	63 98%	66 100%~	49 98%	167 99%	4 ~100%	1 ~100%	3 ~100%	10 91%~	16 100%	46 96%~	172 99%~	209 99%~	7 88%~	166 98%	53 100%~		
NOT ANSWERED	2	40				1	1	1							1	1				2	
VALID CASES	222	3476	1	41	64	66	50	168	4	1	3	11	16	48	173	211	8	169	53		
NUMBER OF RESPONDENTS	224 100%	3516 100%	1 100%	41 100%	64 100%	67 100%	51 100%	169 100%	4 100%	1 100%	3 100%	11 100%	16 100%	48 100%	174 100%	212 100%	8 100%	171 100%	53 100%		

[ASKED IF SURVEY COMPLETED BY MAIL]

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC
Q83.1 YES	1 33%	68 57%	~	~	~	~	1 ~100%	~	~	~	~	1 ~100%	~	1 50%	~	1 ~100%	1 33%	~
NO	2 67%	51 43%	~	1 ~100%	1 ~100%	~	1 ~100%	~	~	~	~	~	~	1 50%	1 100%	2 ~100%	2 67%	~
VALID CASES	3	119		1	1		1					1		2	1	2	1	3
NUMBER OF RESPONDENTS	3 100%	119 100%		1 100%	1 100%		1 100%					1 100%		2 100%	1 100%	2 100%	1 100%	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					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q83.2 YES	2 67%	52 44%	~	~100%	~	~100%	~	~	~	~	~100%	~	~100%	~	1 50%	1 100%	2 67%	~	~
NO	1 33%	67 56%	~100%	~	~	~100%	~	~	~	~	~	~	~100%	1 50%	1 50%	~	1 33%	~	~
VALID CASES	3	119	1	1	1	1	1				1		2	1	2	1	3		
NUMBER OF RESPONDENTS	3 100%	119 100%	1 100%	1 100%	1 100%	1 100%	1 100%				1 100%		2 100%	1 100%	2 100%	1 100%	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					ETHNICITY	HEALTH STATUS		CCC SCREENER				
		<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC
Q83.3	AHP TOT CHLD																		
	OHP TOT CHLD																		
YES	1 33%	9 7%	~	~	~	1 ~100%	~	~	~	~	~	1 ~100%	~	1 50%	~	1 ~100%	~	1 33%	~
NO	2 67%	110 93%	~	1 ~100%	1 ~100%	~	1 ~100%	~	~	~	~	~	~	1 50%	1 100%	2 ~100%	~	2 67%	~
VALID CASES	3	119		1	1	1	1					1		2	1	2	1	3	
NUMBER OF RESPONDENTS	3 100%	119 100%		1 100%	1 100%	1 100%	1 100%					1 100%		2 100%	1 100%	2 100%	1 100%	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					ETHNICITY	HEALTH STATUS		CCC SCREENER	
AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q83.4 YES	31 26%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	3 100%	88 74%	1 ~100%	1 ~100%	1 ~100%	1 ~100%	~	~	~	1 ~100%	~	2 ~100%	1 ~100%	2 ~100%	1 ~100%	3 ~100%
VALID CASES	3	119	1	1	1	1				1		2	1	2	1	3
NUMBER OF RESPONDENTS	3	119	1	1	1	1				1		2	1	2	1	3
	100%	100%	100%	100%	100%	100%				100%		100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER	
	AHP 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
Q83.5 YES	1 33%	11 9%	~100%	~	~	~	1 ~100%	~	~	~	~	~	1 ~100%	1 50%	1 ~	1 33%	~
NO	2 67%	108 91%	~	~100%	~100%	~100%	~	~	~	~	1 ~100%	~	2 ~100%	1 50%	1 100%	2 67%	~
VALID CASES	3	119	1	1	1	1	1				1		2	1	2	1	3
NUMBER OF RESPONDENTS	3 100%	119 100%	1 100%	1 100%	1 100%	1 100%	1 100%				1 100%		2 100%	1 100%	2 100%	1 100%	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		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
NQ14 0-6	28 12%	375 10%	~	2 4%*	7 10%	7 12%	12 23%*	20 13%	~	1 ~100%~	2 ~ 18%~	~	4 7%	20 12%	23 11%~	1 11%~	20 12%	8	
7-8	55 23%	1202 31%*	~	13 24%	18 27%	11 18%	13 25%	36 23%	1 ~ 33%~	1 ~ 33%~	3 27%~	8 28%~	13 22%	40 24%	49 23%~	4 44%~	37 22%	18 27%	
9-10	152 65%	2325 60%	~	40 73%	42 63%	42 70%	28 53%*	100 64%	2 ~ 67%~	2 ~ 67%~	6 55%~	21 72%~	42 71%	106 64%	144 67%~	4 44%~	112 66%	40 61%	
VALID CASES	235	3902		55	67	60	53	156	3	1	3	11	29	59	166	216	9	169	66
NUMBER OF RESPONDENTS	235 100%	3902 100%		55 100%	67 100%	60 100%	53 100%	156 100%	3 100%	1 100%	3 100%	11 100%	29 100%	59 100%	166 100%	216 100%	9 100%	169 100%	66 100%
MEAN	2.53	2.50		2.69	2.52	2.58	2.30	2.51	2.67	1.00	2.67	2.36	2.72	2.64	2.52	2.56	2.33	2.54	2.48
p stat_(*=Sig @ p<=.05)		.518		~.021*	.942	.475	.020*	.649	~	~	~	~	~	~.140	.746	~	~	~.559	.559

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
NQ41 0-6	31 10%	353 7%	~	5 8%	6 7%	3 3%*	17 23%*	26 11%	~	~	~	~	2 13%~	2 6%~	3 4%*	28 12%*	30 10%~	1 7%~	21 9%	10 12%
7-8	65 21%	1106 23%	~	11 17%	24 28%	17 20%	13 18%	48 21%	~	~	~	1 50%~	3 19%~	9 26%~	15 21%	49 21%	62 21%~	3 21%~	43 19%	22 26%
9-10	215 69%	3349 70%	100%~	1 75%	47 66%	57 77%*	67 59%*	43 68%	154 68%	3 ~100%~	1 ~100%~	1 50%~	11 69%~	23 68%~	53 75%	161 68%	202 69%~	10 71%~	163 72%	52 62%
VALID CASES	311	4809	1	63	87	87	73	228	3	1	2	16	34	71	238	294	14	227	84	
NUMBER OF RESPONDENTS	311 100%	4809 100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
MEAN	2.59	2.62	3.00	2.67	2.59	2.74	2.36	2.56	3.00	3.00	2.50	2.56	2.62	2.70	2.56	2.59	2.64	2.63	2.50	
p stat_(*=Sig @ p<=.05)	.366		~.317	.929	.007*	.004*	.185	~	~	~	~	~	~	.066	.076	~	~	.140	.140	

[ASKED IF Q30 = YES]



NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
NQ48 0-6	4 8%	69 10%	~	18%~	9%~	10%~	~	9%~	~	~	~	33%~	~	9%~	8%~	3 8%~	1 13%~	1 6%~	3 10%~
7-8	16 33%	173 25%	~	27%~	45%~	30%~	31%~	10 31%~	~	~	1 100%~	1 33%~	2 25%~	3 27%~	13 35%~	15 38%~	1 13%~	6 33%~	10 33%~
9-10	28 58%	464 66%	~	55%~	45%~	60%~	69%~	19 59%~	1 100%~	~	~	1 33%~	6 75%~	7 64%~	21 57%~	22 55%~	6 75%~	11 61%~	17 57%~
VALID CASES	48	706		11	11	10	16	32	1		1	3	8	11	37	40	8	18	30
NUMBER OF RESPONDENTS	48 100%	706 100%		11 100%	11 100%	10 100%	16 100%	32 100%	1 100%		1 100%	3 100%	8 100%	11 100%	37 100%	40 100%	8 100%	18 100%	30 100%
MEAN	2.50	2.56		2.36	2.36	2.50	2.69	2.50		3.00	2.00	2.00	2.75	2.55	2.49	2.48	2.63	2.56	2.47
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

NQ54 RATING OF CHILD'S HEALTH PLAN

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
NQ54 0-6	54 16%	702 13%	~	5 7%*	12 12%	17 17%	20 26%*	47 19%*	~	1 25%~	~	~	3 19%~	3 8%~	6 7%*	48 18%*	51 16%~	3 18%~	34 13%	20 22%
7-8	101 29%	1548 28%	~	15 22%	34 34%	31 32%	21 27%	74 29%	~	1 25%~	1 100%~	~	2 13%~	18 46%~	17 20%*	83 32%	96 29%~	4 24%~	78 30%	23 26%
9-10	190 55%	3348 60%	100%~	1 71%*	49 54%	53 51%	37 47%	131 52%	~	2 50%~	~	3 100%~	11 69%~	18 46%~	60 72%*	130 50%*	179 55%~	10 59%~	144 56%	46 52%
VALID CASES	345	5598	1	69	99	98	78	252	4	1	3	16	39	83	261	326	17	256	89	
NUMBER OF RESPONDENTS	345 100%	5598 100%	1 100%	69 100%	99 100%	98 100%	78 100%	252 100%	4 100%	1 100%	3 100%	16 100%	39 100%	83 100%	261 100%	326 100%	17 100%	256 100%	89 100%	
MEAN	2.39	2.47	3.00	2.64	2.41	2.34	2.22	2.33	2.25	2.00	3.00	2.50	2.38	2.65	2.31	2.39	2.41	2.43	2.29	
p stat_(*=Sig @ p<=.05)		.038*	~	.001*	.753	.367	.017*	.012*	~	~	~	~	~	~	.000*	.000*	~	~	.160	.160

GETTING NEEDED CARE

		AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER	AS-IAN	NATV HAW/ PAC ILND	AMER ALSK NATV	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
NPRBSEE4	NQ46	2.36	2.27	2.31	2.31	2.36	2.44	2.32	3.00	2.00	1.33	2.67	2.33	2.37	2.38	2.25	2.32	2.39	
p stat_(*=Sig @ p<=.05)		.378	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCARNES4	NQ15	2.58	2.47	2.75	2.64	2.57	2.36	2.65	2.00	2.00	3.00	2.27	2.52	2.58	2.61	2.62	2.22	2.62	2.48
p stat_(*=Sig @ p<=.05)		.009*	~.032*	.378	.817	.015*	.026*	~	~	~	~	~	~	.927	.272	~	~.145	.145	
COMPOSITE		2.47	2.37	x 2.53	2.47	2.47	2.40	2.49	x 2.50	2.00	2.50	1.80	2.59	2.45	2.49	2.50	2.24	2.47	2.44
p stat_(*=Sig @ p<=.05)		.023*	~.494	.983	.908	.374	.609	~	~	~	~	~	~	.808	.467	~	~.908	.653	

GETTING CARE QUICKLY

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER	AS-IAN	NATV ILND	AMER HAW/IND/PAC ALSK	MUL-OTHR TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NCARSN4 NQ4	2.71	2.61	3.00	2.79	2.81	2.58	2.60	2.80			3.00	3.00	2.33	2.60	2.52	2.79	2.76	2.13	2.77	2.60
p stat_(*=Sig @ p<=.05)		.128	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NAPGET4 NQ6	2.56	2.46	3.00	2.72	2.55	2.55	2.42	2.53	2.50	2.00	3.00	2.17	2.80	2.58	2.57	2.58	2.56	2.57	2.55	2.55
p stat_(*=Sig @ p<=.05)		.042*	~	~	.857	.917	~	.259	~	~	~	~	~	.781	.790	~	~	~	.912	.912
COMPOSITE	2.64	2.54	3.00	2.75	2.68	2.57	2.51	2.66	x 2.50	2.50	3.00	2.25	2.70	2.55	2.68	2.67	2.34	2.67	2.58	2.58
p stat_(*=Sig @ p<=.05)		.100	~	.281	.640	.436	.263	.436	~	~	~	~	~	.355	.214	~	~	~	.369	.518

HOW WELL DOCTORS COMMUNICATE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC
NDREXPL4 NQ32	2.75	2.69	2.84	2.66	2.78	2.73	2.76	3.00	3.00	2.50	2.40	2.81	2.64	2.79	2.77	2.33	2.81	2.63
p stat_(*=Sig @ p<=.05)	.100		~.132	.171	.655		~.843	~	~	~	~	~	~.159	.128	~	~	~.051	.051
NDRLSTN4 NQ33	2.76	2.70	2.82	2.71	2.76	2.75	2.74	3.00	3.00	2.50	2.60	2.85	2.75	2.75	2.76	2.67	2.79	2.69
p stat_(*=Sig @ p<=.05)	.060		~.271	.411	.991		~.418	~	~	~	~	~	~.940	.713	~	~	~.181	.180
NDRESPU4 NQ34	2.80	2.77	2.82	2.78	2.83	2.75	2.76	3.00	3.00	2.50	2.70	2.85	2.85	2.77	2.80	2.56	2.81	2.76
p stat_(*=Sig @ p<=.05)	.400		~.700	.774	.563		~.098	~	~	~	~	~	~.352	.188	~	~	~.518	.518
NDRTMEN4 NQ37	2.55	2.48	2.59	2.44	2.67	2.49	2.54	3.00	3.00	2.50	2.40	2.59	2.31	2.62	2.56	2.11	2.55	2.55
p stat_(*=Sig @ p<=.05)	.136		~.602	.183	.100		~.876	~	~	~	~	~	~.004*	.017*	~	~	~.967	.967
COMPOSITE	2.71	2.66	x 2.77	2.65	2.76	2.68	2.70	x 3.00	3.00	2.50	2.53	2.78	2.64	2.73	2.72	2.42	2.74	2.66
p stat_(*=Sig @ p<=.05)	.505		~.697	.603	.737		~.806	~	~	~	~	~	~.576	.688	~	~	~.612	.615

CUSTOMER SERVICE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC 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
NPBCLCS4 NQ50	2.22	2.30	2.21	2.13	2.15	2.38	2.14	3.00			2.43	1.92	2.67	2.04	2.22	2.29	2.31	2.07
p stat_(*=Sig @ p<=.05)	.420		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ51	2.51	2.55	2.36	2.64	2.60	2.42	2.43	3.00			2.86	2.46	2.83	2.39	2.48	2.86	2.53	2.48
p stat_(*=Sig @ p<=.05)	.606		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.37	2.43	x 2.29	2.38	2.38	2.40	2.29	x 3.00	x	x 2.64	2.19	2.75	2.21	2.35	2.57	2.42	2.28	
p stat_(*=Sig @ p<=.05)	.631		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
NRXWHY NQ11	2.57	2.46	2.59	2.56	2.63	2.50	2.60			3.00	3.00	2.63	2.40	2.63	2.55	3.00	2.55	2.60
p stat_(*=Sig @ p<=.05)		.261	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NRXWYNT NQ12	1.98	2.00	2.12	1.89	2.11	1.76	1.90			3.00	3.00	2.13	2.27	1.93	2.00	2.33	1.88	2.11
p stat_(*=Sig @ p<=.05)		.890	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NRXBST NQ13	2.71	2.59	2.88	2.33	2.78	2.67	2.61			3.00	3.00	3.00	2.87	2.64	2.68	3.00	2.76	2.66
p stat_(*=Sig @ p<=.05)		.239	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.42	2.35	x 2.53	2.26	2.51	2.31	2.37	x	x	x 3.00	3.00	2.58	2.51	2.40	2.41	2.78	2.39	2.45
p stat_(*=Sig @ p<=.05)		.666	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

ACCESS TO SPECIALIZED SERVICES

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
NEZMDEQ NQ20	2.07	2.28	2.00	2.43	1.33	2.00	2.00				2.50	1.00	2.75	1.80	2.15	1.00	1.75	2.18
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTHP NQ23	2.23	2.11	2.67	2.27	1.86	2.17	2.17				2.00	3.00	2.60	2.16	2.24	2.20	2.33	2.19
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTC NQ26	2.23	2.11	2.25	2.67	1.87	2.50	2.21				2.40		2.20	2.23	2.23	2.20	2.60	2.17
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.18	2.17	x 2.31	2.46	1.69	2.22	2.12	x	x	x	x 2.25	2.13	2.52	2.06	2.21	1.80	2.23	2.18
p stat_(*=Sig @ p<=.05)	.944		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
PRBSEE4 Q46	78%	76%	77%	77%	82%	78%	76%	100%	100%	33%	89%	83%	77%	79%	75%	77%	79%	
CARNES4 Q15	91%	88%	95%	96%	93%	81%	94%	67%	100%	100%	73%	97%	92%	93%	94%	67%	93%	88%
AVERAGE	84.8	82.1	x 85.7	86.2	87.6	79.5	84.6	x 66.7	x 100	53.0	92.7	87.4	84.8	86.1	70.8	85.1	83.3	

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
CARSN4 Q4	90%	89%	100%	89%	97%	84%	87%	95%		100%	100%	67%	87%	81%	94%	93%	63%	93%	86%	
APGET4 Q6	88%	86%	100%	93%	87%	88%	84%	88%	100%	100%	100%	67%	92%	89%	89%	89%	89%	88%	88%	
AVERAGE	89.2	87.1	x	91.4	92.2	85.9	85.6	91.3	x	100	x	x	66.7	89.3	85.1	91.7	91.1	75.7	90.6	86.9

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
DREXPL4 Q32	95%	93%	96%	93%	97%	93%	95%	100%	100%	100%	80%	96%	89%	97%	96%	78%	97%	90%	
DRLSTN4 Q33	97%	93%	98%	97%	97%	95%	96%	100%	100%	100%	90%	100%	96%	97%	97%	89%	97%	96%	
DRESPU4 Q34	95%	95%	96%	95%	97%	93%	94%	100%	100%	100%	90%	100%	96%	95%	96%	89%	96%	94%	
DRTMEN4 Q37	88%	86%	85%	85%	95%	86%	88%	100%	100%	100%	80%	89%	73%	92%	89%	67%	87%	90%	
AVERAGE	93.7	91.8	x 94.0	92.4	96.1	92.0	93.2	x 100	x 100	85.0	96.3	88.6	95.2	94.2	80.6	94.4	92.2		

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

		AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
PBCLCS4 Q50	74%	80%	71%	74%	70%	79%	69%	100%			86%	69%	96%	65%	74%	71%	79%	66%
CSRESP Q51	88%	88%	79%	91%	95%	83%	84%	100%			100%	92%	96%	84%	86%	100%	86%	90%
AVERAGE	80.8	84.1	x 75.0	82.4	82.5	81.3	76.5	x x	x	x	92.9	80.8	95.7	74.6	80.3	85.7	82.6	77.6

SHARED DECISION MAKING (A LOT/YES + SOME) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
RXWHY Q11	84%	86%	82%	89%	89%	78%	83%			100%	100%	88%	73%	87%	83%	100%	82%	87%		
RXWYNT Q12	57%	66%	65%	56%	61%	47%	55%			100%	100%	63%	67%	57%	59%	67%	52%	64%		
FRXBST Q13	85%	80%	94%	67%	89%	83%	80%			100%	100%	100%	93%	82%	84%	100%	88%	83%		
AVERAGE	75.7	77.2	x	80.4	70.4	79.8	69.4	72.9	x	x	x	x	100	83.3	77.8	75.3	75.3	88.9	73.7	77.9

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
EZMDEQ Q20	67%	76%	100%	71%	33%	75%	63%					100%	0%	100%	50%	69%	0%	50%	73%	
EZTHP Q23	77%	69%	100%	82%	57%	67%	75%					67%	100%	80%	76%	80%	60%	89%	71%	
EZTC Q26	71%	68%	75%	83%	60%	80%	69%					80%		80%	70%	73%	60%	80%	70%	
AVERAGE	71.6	70.9	x	87.5	78.9	50.2	73.9	68.8	x	x	x	x	83.3	60.0	86.7	65.3	74.2	60.0	73.0	71.4

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
DRTLKU Q38	82%	85%	91%	78%	84%	76%	83%	50%	100%	50%	80%	85%	79%	83%	82%	89%	81%	85%
DRUNCON Q43	89%	86%	100%	76%	92%	95%	91%				100%	83%	92%	89%	88%	100%	90%	89%
DRUNFAM Q44	85%	85%	100%	68%	92%	86%	85%				67%	92%	83%	85%	85%	86%	90%	84%
AVERAGE	85.4	85.4	x 96.9	74.2	89.4	85.8	86.4	x 50.0	x 50.0	82.2	86.7	84.6	85.7	84.9	91.5	87.0	86.0	

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- 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	
HELPCONT Q18	97%	88%	100%	100%	90%	100%	95%			100%		100%	88%	100%	96%	100%	100%	95%	
HLPCOORD Q29	58%	56%	56%	53%	65%	58%	59%			50%	0%	64%	64%	57%	56%	83%	54%	62%	
AVERAGE	77.5	72.1	x	78.1	76.7	77.4	78.8	77.1	x	x	x	50.0	81.8	75.9	78.4	75.9	91.7	77.1	78.3



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	A HEALTH PROVIDER IS THE PERSON YOU WOULD SEE IF YOU NEED A CHECK-UP, WANT ADVICE ABOUT A HEALTH PROBLEM, OR GET SICK OR HURT. 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	WHEN YOU TALKED ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID 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	WHEN YOU TALKED ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID 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]

39 Q35E 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. IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER TALK TOO FAST WHEN TALKING TO YOU?

40 Q35F IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER INTERRUPT YOU WHEN YOU WERE TALKING?

41 Q35G 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?

PAGE	QUESTION	TITLE
42	Q35H	IN THE LAST 6 MONTHS, DID YOU FEEL YOU COULD TELL A DOCTOR OR OTHER HEALTH PROVIDER ANYTHING, EVEN THINGS THAT YOU MIGHT NOT TELL ANYONE ELSE?
43	Q35I	IN THE LAST 6 MONTHS, DID YOU FEEL YOU COULD TRUST A DOCTOR OR OTHER HEALTH PROVIDER WITH YOUR MEDICAL CARE?
44	Q35J	IN THE LAST 6 MONTHS, DID YOU FEEL A DOCTOR OR OTHER HEALTH PROVIDER ALWAYS TOLD YOU THE TRUTH ABOUT YOUR HEALTH, EVEN IF THERE WAS BAD NEWS?
45	Q35K	IN THE LAST 6 MONTHS, DID YOU FEEL THIS PROVIDER CARED AS MUCH AS YOU DO ABOUT YOUR HEALTH?
46	Q35L	IN THE LAST 6 MONTHS, DID YOU FEEL THIS PROVIDER REALLY CARED ABOUT YOU AS A PERSON?
47	Q35M	IN THE LAST 6 MONTHS, HOW OFTEN HAVE YOU BEEN TREATED UNFAIRLY AT A DOCTOR OR OTHER HEALTH PROVIDER'S OFFICE BECAUSE OF YOUR RACE OR ETHNICITY?
48	Q35N	IN THE LAST 6 MONTHS, HOW OFTEN HAVE YOU BEEN TREATED UNFAIRLY AT A DOCTOR OR OTHER HEALTH PROVIDER'S OFFICE BECAUSE OF THE TYPE OF HEALTH INSURANCE YOU HAVE OR BECAUSE YOU DO NOT HAVE HEALTH INSURANCE?
49	Q35O	IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER GIVE YOU ALL THE INFORMATION YOU WANTED ABOUT YOUR HEALTH?
50	Q35P	IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER ENCOURAGE YOU TO TALK ABOUT ALL YOUR HEALTH QUESTIONS OR CONCERNS?
51	Q35Q	IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER USE MEDICAL WORDS YOU DID NOT UNDERSTAND?
52	Q35R	WHAT IS YOUR PREFERRED LANGUAGE?
53	Q35S	HOW WELL DO YOU SPEAK ENGLISH? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE]
54	Q35T	IN THE LAST 6 MONTHS, WHEN YOU CALLED OR SPOKE TO SOMEONE FROM YOUR HEALTH PLAN, HOW OFTEN DID THEY SPEAK TO YOU IN YOUR PREFERRED LANGUAGE? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE]
55	Q35U	AN INTERPRETER IS SOMEONE WHO HELPS YOU TALK WITH OTHERS WHO DO NOT SPEAK YOUR LANGUAGE. INTERPRETERS CAN INCLUDE STAFF FROM THE HEALTH PLAN OR TELEPHONE INTERPRETERS. IN THE LAST 6 MONTHS, WAS THERE ANY TIME WHEN YOU NEEDED AN INTERPRETER TO TALK WITH SOMEONE FROM YOUR HEALTH PLAN? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE]
56	Q35V	IN THE LAST 6 MONTHS, DID ANYONE FROM THE HEALTH PLAN LET YOU KNOW THAT AN INTERPRETER WAS AVAILABLE FREE OF CHARGE? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES]
57	Q35W	IN THE LAST 6 MONTHS, HOW OFTEN DID YOU USE AN INTERPRETER PROVIDED BY YOUR HEALTH PLAN TO HELP YOU TALK WITH SOMEONE FROM THE PLAN? ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES]
58	Q35X	IN THE LAST 6 MONTHS, WHEN YOU USED AN INTERPRETER PROVIDED BY YOUR HEALTH PLAN, WHO WAS THE INTERPRETER YOU USED MOST OFTEN? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND 35W = SOMETIMES OR USUALLY OR ALWAYS]
59	Q35Y	IN THE LAST 6 MONTHS, HOW OFTEN DID THIS INTERPRETER TREAT YOU WITH COURTESY AND RESPECT? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND Q35W = SOMETIMES OR USUALLY OR ALWAYS]
60	Q35Z	USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST INTERPRETER POSSIBLE AND 10 IS THE BEST INTERPRETER POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE THIS INTERPRETER? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND 35W = SOMETIMES OR USUALLY OR ALWAYS]

PAGE	QUESTION	TITLE
61	Q35AA	IN THE LAST 6 MONTHS, HOW OFTEN DID YOU USE A FRIEND OR FAMILY MEMBER AS AN INTERPRETER WHEN YOU TALKED WITH SOMEONE FROM YOUR HEALTH PLAN? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES]
62	Q35AB	IN THE LAST 6 MONTHS, DID YOU USE FRIENDS OR FAMILY MEMBERS AS INTERPRETERS BECAUSE THAT WAS WHAT YOU PREFERRED? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND Q35AA = SOMETIMES OR USUALLY OR ALWAYS]
6. ABOUT YOU		
63	Q36	IN GENERAL, HOW WOULD YOU RATE YOUR OVERALL HEALTH?
64	Q37	IN GENERAL, HOW WOULD YOU RATE YOUR OVERALL MENTAL OR EMOTIONAL HEALTH?
65	Q38	HAVE YOU HAD EITHER A FLU SHOT OR FLU SPRAY IN THE NOSE SINCE JULY 1, 2013?
66	Q39	DO YOU NOW SMOKE CIGARETTES OR USE TOBACCO EVERY DAY, SOME DAYS, OR NOT AT ALL?
67	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]
68	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]
69	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]
70	Q43	DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?
71	Q44	DO YOU HAVE A HEALTH PROBLEM OR TAKE MEDICATION THAT MAKES TAKING ASPIRIN UNSAFE FOR YOU?
72	Q45	HAS A DOCTOR OR HEALTH PROVIDER EVER DISCUSSED WITH YOU THE RISKS AND BENEFITS OF ASPIRIN TO PREVENT HEART ATTACK OR STROKE?
73	Q46.1	ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: HIGH CHOLESTEROL
74	Q46.2	ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: HIGH BLOOD PRESSURE
75	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
76	Q47.1	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: A HEART ATTACK
77	Q47.2	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: ANGINA OR CORONARY HEART DISEASE
78	Q47.3	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: A STROKE
79	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

PAGE	QUESTION	TITLE
80	Q48	IN THE LAST 6 MONTHS, DID YOU GET HEALTH CARE 3 OR MORE TIMES FOR THE SAME CONDITION OR PROBLEM?
81	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]
82	Q50	DO YOU NOW NEED OR TAKE MEDICINE PRESCRIBED BY A DOCTOR? DO NOT INCLUDE BIRTH CONTROL.
83	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]
84	NQ52	WHAT IS YOUR AGE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
85	NQ53	ARE YOU MALE OR FEMALE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
86	Q54	WHAT IS THE HIGHEST GRADE OR LEVEL OF SCHOOL THAT YOU HAVE COMPLETED?
87	Q55	ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?
88	Q56.1	WHAT IS YOUR RACE? RESPONSE: WHITE
89	Q56.2	WHAT IS YOUR RACE? RESPONSE: BLACK OR AFRICAN-AMERICAN
90	Q56.3	WHAT IS YOUR RACE? RESPONSE: ASIAN
91	Q56.4	WHAT IS YOUR RACE? RESPONSE: NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
92	Q56.5	WHAT IS YOUR RACE? RESPONSE: AMERICAN INDIAN OR ALASKA NATIVE
93	Q56.6	WHAT IS YOUR RACE? RESPONSE: OTHER
94	Q57	DID SOMEONE HELP YOU COMPLETE THIS SURVEY? [ASKED IF SURVEY COMPLETED BY MAIL]
95	Q58.1	HOW DID THAT PERSON HELP YOU? RESPONSE: READ THE QUESTIONS TO ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
96	Q58.2	HOW DID THAT PERSON HELP YOU? RESPONSE: WROTE DOWN THE ANSWERS I GAVE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
97	Q58.3	HOW DID THAT PERSON HELP YOU? RESPONSE: ANSWERED THE QUESTIONS FOR ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
98	Q58.4	HOW DID THAT PERSON HELP YOU? RESPONSE: TRANSLATED THE QUESTIONS INTO MY LANGUAGE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
99	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

100 NQ13 RATING OF ALL HEALTH CARE [ASKED IF Q7 >= 1 TIME]  
101 NQ23 RATING OF PERSONAL DOCTOR [ASKED IF Q15 = YES]  
102 NQ27 RATING OF SPECIALIST SEEN MOST OFTEN [ASKED IF Q24 = YES AND Q26 >= 1 SPECIALIST]  
103 NQ35 RATING OF HEALTH PLAN  
104 NQ35Z RATING OF INTERPRETER [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND 35W = SOMETIMES OR USUALLY OR ALWAYS]

9. COMPOSITES

105 GETTING NEEDED CARE  
106 GETTING CARE QUICKLY  
107 HOW WELL DOCTORS COMMUNICATE  
108 CUSTOMER SERVICE  
109 SHARED DECISION MAKING

10. GLOBAL PROPORTION COMPOSITES

110 GETTING NEEDED CARE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE  
111 GETTING CARE QUICKLY (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE  
112 HOW WELL DOCTORS COMMUNICATE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE  
113 CUSTOMER SERVICE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE  
114 SHARED DECISION MAKING (A LOT/YES + SOME) -- 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	A HEALTH PROVIDER IS THE PERSON YOU WOULD SEE IF YOUR CHILD NEEDED A CHECK-UP, WANTED ADVICE ABOUT A HEALTH PROBLEM, OR GOT SICK OR HURT. 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	Q35A	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD HAVE A HARD TIME SPEAKING WITH OR UNDERSTANDING HIS OR HER PERSONAL DOCTOR BECAUSE THEY SPOKE DIFFERENT LANGUAGES? [ASKED IF Q30 = YES AND Q31 >= 1 TIME AND Q35 = YES]
37	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]
38	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]
39	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]
40	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]
41	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]
42	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]
43	Q42	DOES YOUR CHILD HAVE ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITIONS THAT HAVE LASTED FOR MORE THAN 3 MONTHS? [ASKED IF Q30 = YES]
44	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]
45	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

46 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?

47 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]

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

49 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

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

51 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]

52 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]

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

54 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]

55 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

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

57 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]

58 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]

8. ABOUT YOUR CHILD AND YOU

- 59 Q58 IN GENERAL, HOW WOULD YOU RATE YOUR CHILD'S OVERALL HEALTH?
- 60 Q59 IN GENERAL, HOW WOULD YOU RATE YOUR CHILD'S OVERALL MENTAL OR EMOTIONAL HEALTH?
- 61 Q60 DOES YOUR CHILD CURRENTLY NEED OR USE MEDICINE PRESCRIBED BY A DOCTOR (OTHER THAN VITAMINS)?
- 62 Q61 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q60 = YES]
- 63 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]
- 64 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?
- 65 Q64 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q63 = YES]
- 66 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]
- 67 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?
- 68 Q67 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q66 = YES]
- 69 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]
- 70 Q69 DOES YOUR CHILD NEED OR GET SPECIAL THERAPY, SUCH AS PHYSICAL, OCCUPATIONAL, OR SPEECH THERAPY?
- 71 Q70 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q69 = YES]
- 72 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]
- 73 Q72 DOES YOUR CHILD HAVE ANY KIND OF EMOTIONAL, DEVELOPMENTAL, OR BEHAVIORAL PROBLEMS FOR WHICH HE OR SHE NEEDS OR GETS TREATMENT OR COUNSELING?
- 74 Q73 HAS THIS PROBLEM LASTED OR IS IT EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q72 = YES]
- 75 NQ74 WHAT IS YOUR CHILD'S AGE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
- 76 NQ75 IS YOUR CHILD MALE OR FEMALE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
- 77 Q76 IS YOUR CHILD OF HISPANIC OR LATINO ORIGIN OR DESCENT?
- 78 Q77.1 WHAT IS YOUR CHILD'S RACE? RESPONSE: WHITE
- 79 Q77.2 WHAT IS YOUR CHILD'S RACE? RESPONSE: BLACK OR AFRICAN-AMERICAN
- 80 Q77.3 WHAT IS YOUR CHILD'S RACE? RESPONSE: ASIAN
- 81 Q77.4 WHAT IS YOUR CHILD'S RACE? RESPONSE: NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
- 82 Q77.5 WHAT IS YOUR CHILD'S RACE? RESPONSE: AMERICAN INDIAN OR ALASKA NATIVE
- 83 Q77.6 WHAT IS YOUR CHILD'S RACE? RESPONSE: OTHER
- 84 Q78 WHAT IS YOUR AGE?
- 85 Q79 ARE YOU MALE OR FEMALE?

86	Q80	WHAT IS THE HIGHEST GRADE OR LEVEL OF SCHOOL THAT YOU HAVE COMPLETED?
87	Q81	HOW ARE YOU RELATED TO THE CHILD?
88	Q82	DID SOMEONE HELP YOU COMPLETE THIS SURVEY? [ASKED IF SURVEY COMPLETED BY MAIL]
89	Q83.1	HOW DID THAT PERSON HELP YOU? RESPONSE: READ THE QUESTIONS TO ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]
90	Q83.2	HOW DID THAT PERSON HELP YOU? RESPONSE: WROTE DOWN THE ANSWERS I GAVE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]
91	Q83.3	HOW DID THAT PERSON HELP YOU? RESPONSE: ANSWERED THE QUESTIONS FOR ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]
92	Q83.4	HOW DID THAT PERSON HELP YOU? RESPONSE: TRANSLATED THE QUESTIONS INTO MY LANGUAGE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]
93	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

94	NQ14	RATING OF ALL CHILD'S HEALTH CARE [ASKED IF Q7 >= 1 TIME]
95	NQ41	RATING OF CHILD'S PERSONAL DOCTOR [ASKED IF Q30 = YES]
96	NQ48	RATING OF SPECIALIST CHILD SAW MOST OFTEN [ASKED IF Q45 = YES AND Q47 >= 1 SPECIALIST]
97	NQ54	RATING OF CHILD'S HEALTH PLAN

10. COMPOSITES

98	GETTING NEEDED CARE
99	GETTING CARE QUICKLY
100	HOW WELL DOCTORS COMMUNICATE
101	CUSTOMER SERVICE
102	SHARED DECISION MAKING
103	ACCESS TO SPECIALIZED SERVICES

11. GLOBAL PROPORTION COMPOSITES

104	GETTING NEEDED CARE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
105	GETTING CARE QUICKLY (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
106	HOW WELL DOCTORS COMMUNICATE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
107	CUSTOMER SERVICE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

108 SHARED DECISION MAKING (A LOT/YES + SOME) -- GLOBAL PROPORTION COMPOSITE  
109 ACCESS TO SPECIALIZED SERVICES (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE  
110 PERSONAL DOCTOR WHO KNOWS CHILD (YES) -- GLOBAL PROPORTION COMPOSITE  
111 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. When you talked about starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might want to take a medicine?

- Not at all
- A little
- Some
- A lot



11. When you talked about starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might not want to take a medicine?

- Not at all
- A little
- Some
- A lot

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 Best  
Health Care Health Care  
Possible Possible

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

- Never
- Sometimes
- Usually
- Always

## YOUR PERSONAL DOCTOR

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

- Yes
- No → *Go to Question 24*

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 23*

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

- Never
- Sometimes
- Usually
- Always

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

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

## GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

- Yes
- No → *Go to Question 28*

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

- Never
- Sometimes
- Usually
- Always

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

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

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

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



## YOUR HEALTH PLAN

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

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

- Yes
- No → *Go to Question 30*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 33*

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 35*

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

- Never
- Sometimes
- Usually
- Always

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

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

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

- Yes
- No → *Go to Question 35c*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 35e*

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

- Never
- Sometimes
- Usually
- Always

### CULTURAL COMPETENCY

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

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, how often did a doctor or other health provider talk too fast when talking to you?**

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

**35g. 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

**35h. In the last 6 months, did you feel you could tell a doctor or other health provider anything, even things that you might not tell anyone else?**

- Yes, definitely
- Yes, somewhat
- No

**35i. 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

**35j. In the last 6 months, did you feel a doctor or other health provider always told you the truth about your health, even if there was bad news?**

- Yes, definitely
- Yes, somewhat
- No

**35k. In the last 6 months, did you feel this provider cared as much as you do about your health?**

- Yes, definitely
- Yes, somewhat
- No

35l. In the last 6 months, did you feel this provider really cared about you as a person?

- Never
- Sometimes
- Usually
- Always

35m. In the last 6 months, how often have you been treated unfairly at a doctor or other health provider's office because of your race or ethnicity?

- Never
- Sometimes
- Usually
- Always

35n. In the last 6 months, how often have you been treated unfairly at a doctor or other health provider's office because of the type of health insurance you have or because you do not have health insurance?

- Never
- Sometimes
- Usually
- Always

### HEALTH LITERACY

The following questions ask about how much you think your doctor or other health provider helps you understand the information and services you need to make decisions about your health.

35o. In the last 6 months, how often did a doctor or other health provider give you all the information you wanted about your health?

- Never
- Sometimes
- Usually
- Always

35p. In the last 6 months, how often did a doctor or other health provider encourage you to talk about all your health questions or concerns?

- Never
- Sometimes
- Usually
- Always

35q. In the last 6 months, how often did a doctor or other health provider use medical words you did not understand?

- Never
- Sometimes
- Usually
- Always

### INTERPRETER SERVICES

35r. What is your preferred language?

- English → *Go to Question 36*
- Spanish
- Some other language

35s. How well do you speak English?

- Very well
- Well
- Not well
- Not at all

35t. In the last 6 months, when you called or spoke to someone from your health plan, how often did they speak to you in your preferred language?

- Never
- Sometimes
- Usually
- Always



**35u. An interpreter is someone who helps you talk with others who do not speak your language. Interpreters can include staff from the health plan or telephone interpreters.**

**In the last 6 months, was there any time when you needed an interpreter to talk with someone from your health plan?**

- Yes
- No → **Go to Question 36**

**35v. In the last 6 months, did anyone from the health plan let you know that an interpreter was available free of charge?**

- Never
- Sometimes
- Usually
- Always

**35w. In the last 6 months, how often did you use an interpreter provided by your health plan to help you talk with someone from the plan?**

- Never → **Go to Question 35aa**
- Sometimes
- Usually
- Always

**35x. In the last 6 months, when you used an interpreter provided by your health plan, who was the interpreter you used most often?**

- A staff member from the health plan
- An interpreter provided in-person by the health plan
- A telephone interpreter provided by the health plan
- Someone else provided by the health plan
- Don't know or unsure

**35y. In the last 6 months, how often did this interpreter treat you with courtesy and respect?**

- Never
- Sometimes
- Usually
- Always

**35z. Using any number from 0 to 10, where 0 is the worst interpreter possible and 10 is the best interpreter possible, what number would you use to rate this interpreter?**

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

**35aa. In the last 6 months, how often did you use a friend or family member as an interpreter when you talked with someone from your health plan?**

- Never → **Go to Question 36**
- Sometimes
- Usually
- Always

**35ab. In the last 6 months, did you use friends or family members as interpreters because that was what you preferred?**

- Never
- Sometimes
- Usually
- Always

## 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, 2013?

- 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**





448-12



12

CTYAD

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

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

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

**SURVEY INSTRUCTIONS**

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

Correct  
Mark 

Incorrect  
Marks



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

- Yes → *Go to Question 1*
- No

↓ **START HERE** ↓

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

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

\_\_\_\_\_

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

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

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

- 7. In the last 6 months, not counting the times your child went to an emergency room, how many times did he or she go to a doctor's office or clinic to get health care?
  - None → *Go to Question 16*
  - 1 time
  - 2
  - 3
  - 4
  - 5 to 9
  - 10 or more times
  
- 8. In the last 6 months, did you and your child's doctor or other health provider talk about specific things you could do to prevent illness in your child?
  - Yes
  - No
  
- 9. In the last 6 months, how often did you have your questions answered by your child's doctor or other health provider?
  - 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. 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?
  - Not at all
  - A little
  - Some
  - A lot



12. 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?
- Not at all
  - A little
  - Some
  - A lot
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**

35a. In the last 6 months, how often did your child have a hard time speaking with or understanding his or her personal doctor because they spoke different languages?

- Never
- Sometimes
- Usually
- Always

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?

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 Plan Possible                      Best Health 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 58*

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

**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. El personal de investigación 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 (o, para personas con problemas de audición, llame al 1-888-631-2097).

**INSTRUCCIONES PARA EL CUESTIONARIO**

- ▶ Por favor llene el círculo de su respuesta completamente. Use solamente tinta NEGRA o AZUL 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. Cuando hablaron de comenzar o suspender una medicina recetada, ¿qué tanto habló un doctor u otro profesional médico sobre las razones por las que tal vez quiera tomar una medicina?
- Para nada  
 Un poco  
 Algo  
 Mucho





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

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

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

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

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

- Sí
- No → *Pase a la pregunta 23*

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

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

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

- 
- 0 1 2 3 4 5 6 7 8 9 10
- El peor doctor personal posible                      El mejor doctor personal posible

## LA ATENCIÓN MÉDICA QUE RECIBÍ DE ESPECIALISTAS

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

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

- Sí
- No → *Pase a la pregunta 28*

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

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

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

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

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

0 1 2 3 4 5 6 7 8 9 10

El peor especialista posible El mejor especialista posible

### SU PLAN DE SALUD

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

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

- Sí
- No → *Pase a la pregunta 30*

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

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

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

- Sí
- No → *Pase a la pregunta 33*

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 35*

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

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

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

0 1 2 3 4 5 6 7 8 9 10

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



## CAPACIDAD CULTURAL

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

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, ¿con qué frecuencia un doctor u otro proveedor de salud habló muy rápido cuando le habló a usted?**

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

**35f. 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

**35g. 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

**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 facil 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 facil 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

35h. En los últimos 6 meses, ¿sintió usted que le podía decir a su doctor u otro proveedor de salud cualquier cosa, hasta cosas que tal vez no le diría a otra persona?

- Sí, definitivamente
- Sí, algo
- No

35i. 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

35j. En los últimos 6 meses, ¿sintió usted que un doctor u otro proveedor de salud siempre le decía la verdad sobre su salud, aun si fueran malas noticias?

- Sí, definitivamente
- Sí, algo
- No

35k. En los últimos 6 meses, ¿sintió usted que este proveedor se preocupó tanto por usted como se preocupa usted de su propia salud?

- Sí, definitivamente
- Sí, algo
- No

35l. En los últimos 6 meses, ¿sintió usted que a este proveedor realmente le preocupaba usted como persona?

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

35m. En los últimos 6 meses, ¿con qué frecuencia le trataron injustamente en el consultorio de un doctor u otro proveedor de salud por su raza o etnicidad?

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

35n. En los últimos 6 meses, ¿con qué frecuencia le trataron injustamente en el consultorio de un doctor u otro proveedor de salud por el tipo de seguro de salud que tiene o porque no tiene seguro de salud?

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

### COMPRESIÓN DE INFORMACIÓN DE SALUD

Las siguientes preguntas son sobre cuanto piensa usted que su doctor u otro proveedores de salud le ayudan a entender la información y servicios que usted necesita para tomar decisiones sobre su salud.

35o. En los últimos 6 meses, ¿con qué frecuencia un doctor u otro proveedor de salud le dieron toda la información que usted quería sobre su salud?

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



35p. En los últimos 6 meses, ¿con qué frecuencia un doctor u otro proveedor de salud le animó a usted a hablar sobre todas sus preguntas o inquietudes de su salud?

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

35q. En los últimos 6 meses, ¿con qué frecuencia un doctor u otro proveedor de salud uso palabras médicas que usted no entendió?

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

### SERVICIOS DE INTÉRPRETE

35r. ¿Qué idioma prefiere hablar usted?

- Inglés → *Pase a la Pregunta 36*
- Español
- Otro idioma

35s. ¿Qué tan bien habla inglés?

- Muy bien
- Bien
- No muy bien
- Para nada

35t. En los últimos 6 meses, cuando llamó o habló con alguien de su plan de salud, ¿con qué frecuencia hablaban con usted en su idioma de preferencia?

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

35u. Un intérprete es una persona que le ayuda a hablar con otras personas que no hablan su idioma. Los intérpretes pueden ser empleados del plan de salud o intérpretes por teléfono.

Durante los últimos 6 meses, ¿necesitó alguna vez a un intérprete para hablar con alguien de su plan de salud?

- Sí
- No → *Pase a la Pregunta 36*

35v. En los últimos 6 meses, ¿le dijo alguna persona de su plan de salud que un intérprete estaba disponible de forma gratuita?

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

35w. En los últimos 6 meses, ¿con qué frecuencia usó un intérprete del plan de salud para que le ayudara a hablar con alguien del plan?

- Nunca → *Pase a la Pregunta 35aa*
- A veces
- La mayoría de las veces
- Siempre

35x. En los últimos 6 meses, cuando usó un intérprete que le ofreció su plan de salud, ¿quién fue el intérprete que usó con más frecuencia?

- Un empleado o personal del plan de salud
- Un intérprete que me ofreció el plan de salud que me ayudó en persona
- Un intérprete que me ofreció el plan de salud que me ayudó por teléfono
- Otra persona que me ofreció el plan de salud
- No sé o no estoy seguro

35y. En los últimos 6 meses, ¿con qué frecuencia le trataba con cortesía y respeto este intérprete?

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

35z. Usando cualquier número del 0 al 10, donde 0 siendo el peor intérprete posible y el 10 el mejor intérprete posible, ¿qué número usaría para calificar a este intérprete?

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

35aa. En los últimos 6 meses, ¿con qué frecuencia usó a un amigo o familiar como intérprete cuando habló con alguien de su plan de salud?

- Nunca → *Pase a la Pregunta 36*
- A veces
- La mayoría de las veces
- Siempre

35ab. En los últimos 6 meses, ¿usó a amigos o familiares como intérpretes porque usted lo prefería así?

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

### 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 2013, ¿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 médico u otro proveedor de cuidado 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 con, un médico o proveedor de cuidado 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 médico o proveedor de cuidado 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 médico o proveedor de cuidado 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 todas las que aplican.

- 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 médico que usted tiene alguna de las siguientes enfermedades? Marque todas las que aplican.

- 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, ¿ha ido a ver a un doctor o a otro profesional médico 3 veces o más por 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. ¿Esta medicina es 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 use 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 use letra de molde)

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

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

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



Sus respuestas a esta encuesta son completamente confidenciales. Toda información que pueda identificarle a usted o a su familia se mantendrá privada. El personal de investigación 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 (o, para personas con problemas de audición, llame al 1-888-631-2097).

**INSTRUCCIONES PARA EL CUESTIONARIO**

- Por favor llene el círculo de su respuesta completamente. Use solamente tinta NEGRA o AZUL 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. Cuando hablaron de comenzar o suspender una medicina recetada para su niño, ¿qué tanto habló un doctor u otro profesional médico sobre las razones por las que tal vez usted quiera que su niño tome una medicina?

- Para nada
- Un poco
- Algo
- Mucho

12. Cuando hablaron de comenzar o suspender una medicina recetada para su niño, ¿qué tanto habló un doctor u otro profesional médico sobre las razones por las que tal vez usted no quiera que su niño tome una medicina?

- Para nada
- Un poco
- Algo
- Mucho

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

- Sí
- No

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 19*

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

- Sí
- No → *Pase a la pregunta 19*

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

- Sí
- No

**SERVICIOS ESPECIALIZADOS**

19. En el equipo o dispositivo médico especial se incluye un andador, silla de ruedas, nebulizador, tubos de alimentación o equipo de oxígeno.

En los últimos 6 meses, ¿consiguió o intentó conseguir algún equipo o dispositivo médico especial para su niño?

- Sí
- No → *Pase a la pregunta 22*



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

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

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 25*

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

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

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 28*

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

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

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 30*

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

- Sí
- No

### **EL DOCTOR PERSONAL DE SU NIÑO**

30. El doctor personal es aquel a quien su niño va si necesita un chequeo, quiere pedir consejo sobre un problema de salud, está enfermo o lastimado. ¿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**

35a. En los últimos 6 meses, ¿con qué frecuencia se le hizo difícil a su niño hablar o entender a su doctor personal porque ellos hablaban idiomas diferentes?

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

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

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

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

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



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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 41*

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

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

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

- 
- 0 1 2 3 4 5 6 7 8 9 10
- El peor doctor personal posible                      El mejor doctor personal posible

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

- Sí
- No → *Pase a la pregunta 45*

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

- Sí
- No

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

- Sí
- No

### LA ATENCIÓN MÉDICA QUE RECIBIÓ DE ESPECIALISTAS

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

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

- Sí
- No → *Pase a la pregunta 49*

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

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



47. ¿Cuántos especialistas ha visto su niño en los últimos 6 meses?
- Ninguno → *Pase a la pregunta 49*
  - 1 especialista
  - 2
  - 3
  - 4
  - 5 especialistas o más

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

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
0	1	2	3	4	5	6	7	8	9	10
El peor especialista posible					El mejor especialista posible					

### EL PLAN DE SALUD DE SU NIÑO

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

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

- Sí
- No → *Pase a la pregunta 52*

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 54*

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

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

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

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
0	1	2	3	4	5	6	7	8	9	10
El peor plan de salud posible					El mejor plan de salud posible					

### MEDICINAS RECETADAS

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

- Sí
- No → *Pase a la pregunta 58*



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

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

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

- Sí
- No

### 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 use 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.**

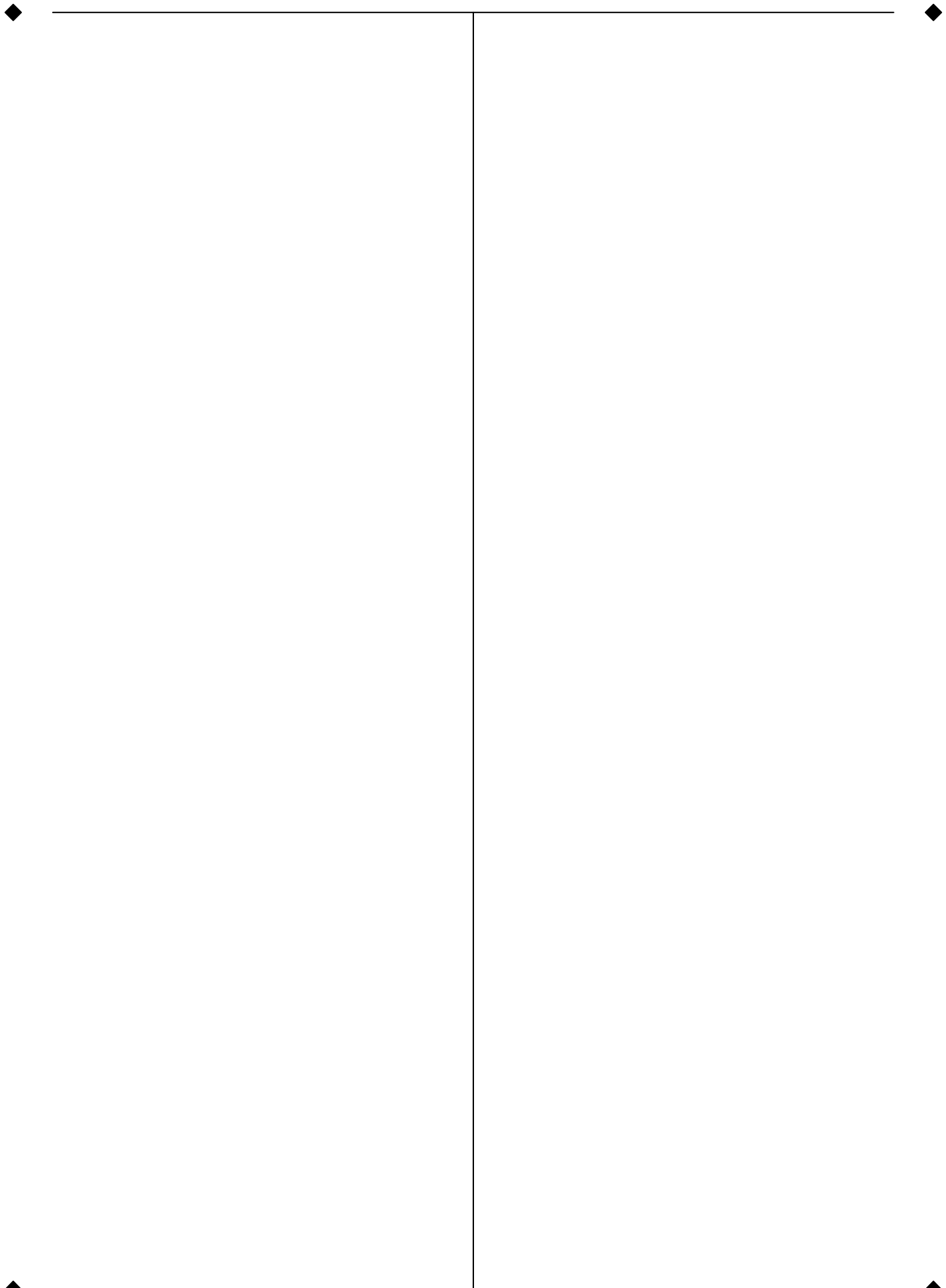
- Me leyó las preguntas
- Anotó las respuestas que le di
- Contestó las preguntas por mí
- Tradujo las preguntas a mi idioma
- Me ayudó de otra forma (Por favor use letra de molde)

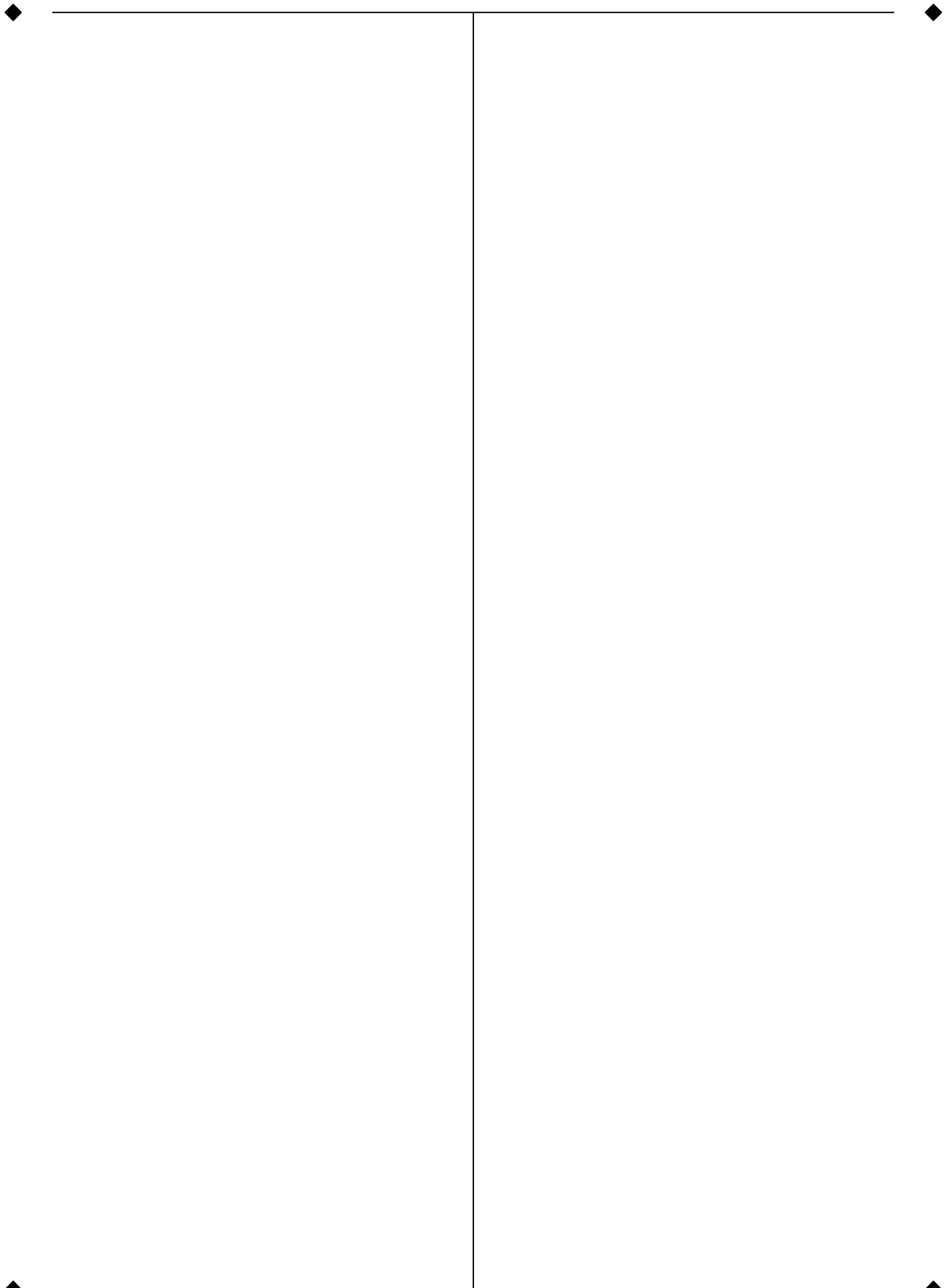
---

**¡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 ---> (###) ### - ####

(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

## 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 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 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

1. / MEMBER

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

("DK" NOT ALLOWED)

(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

NPLNAME

2. / NPLNAME

What is the name of your health plan?

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS Oregon Health Plan]

(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

2a. / 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

3. / 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

4. / 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

5. / 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

6. / APGET4

In the last 6 months, when you made an appointment for a CHECK-UP OR ROUTINE CARE at a doctor's office or clinic, how often did you get an appointment 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

7. / 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 AND QNAIRE <05 THEN GO TO PRSNLD4  
IF OFCTIM4=0 OR DK/REFUSAL AND QNAIRE >05 THEN GO TO CHSCHL

PRVENT5

8. / PRVENT5

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

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

RXWHY

10. / RXWHY

When you talked about starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might want to take a medicine? Would you say...

(READ LIST)

- 1. NOT AT ALL,
- 2. A LITTLE,
- 3. SOME, OR
- 4. A LOT?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXWYNT

11. / RXWYNT

When you talked about starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might NOT want to take a medicine? Would you say...

(READ LIST)

- 1. NOT AT ALL,
- 2. A LITTLE,
- 3. SOME, OR
- 4. A LOT?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

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
WORST										BEST
HEALTH CARE										HEALTH CARE
POSSIBLE										POSSIBLE

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 (DO NOT READ) --> 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
WORST										BEST
PERSONAL										PERSONAL
DOCTOR POSSIBLE										DOCTOR POSSIBLE

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 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, "Does my (type of specialist) count?", 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         |
| WORST      |    |    |    |    |    |    |    |    |    | BEST       |
| SPECIALIST |    |    |    |    |    |    |    |    |    | SPECIALIST |
| POSSIBLE   |    |    |    |    |    |    |    |    |    | POSSIBLE   |

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN

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 -----> CLCSR4

DK/REFUSAL/NOT ASCERTAINED --> CLCSR4

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)

CLCSR4

30. / CLCSR4

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

- 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
WORST										BEST
HEALTH PLAN										HEALTH PLAN
POSSIBLE										POSSIBLE

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

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?

(READ LIST)

- 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?

(READ LIST)

- 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?

(READ LIST)

- 1. YES
- 2. NO -----> INTRO.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? Would you say...

- 1. NEVER
- 2. SOMETIMES
- 3. USUALLY
- 4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

INTRO.DTLKTF

INTRO.DTLKTF

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

DTLKTF

35e. / DTLKTF

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.

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,
4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

DINTER

35f. / DINTER

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DRRUDE

35g. / 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?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DRTELL

35h. / DRTELL

In the last 6 months, did you feel you could tell a doctor or other health provider anything, even things that you might not tell anyone else? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DTRUST

35i. / DTRUST

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DTRUTH

35j. / DTRUTH

In the last 6 months, did you feel a doctor or other health provider always told you the truth about your health, even if there was bad news? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DCAREH

35k. / DCAREH

In the last 6 months, did you feel this provider cared as much as you do about your health? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DCAREP

35l. / DCAREP

In the last 6 months, did you feel this provider cared about you as a person? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

UNFETH

35m. / UNFETH

In the last 6 months, how often have you been treated unfairly at a doctor or other health provider's office because of your race or ethnicity? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

UNFINS

35n. / UNFINS

In the last 6 months, how often have you been treated unfairly at a doctor or other health provider's office because of the type of health insurance you have or because you do not have health insurance? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

INTRO.ALLINF

INTRO.ALLINF

The following questions ask about how much you think your doctor or other health provider helps you understand the information and services you need to make decisions about your health.

## ALLINF

35o. / ALLINF

In the last 6 months, how often did a doctor or other health provider give you all the information you wanted about your health? Would you say..

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

## TLKQS

35p. / TLKQS

In the last 6 months, how often did a doctor or other health provider encourage you to talk about all your health questions or concerns? Would you say..

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

## DMEDW

35q. / DMEDW

In the last 6 months, how often did a doctor or other health provider use medical words you did not understand? Would you say..

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

## PRFLANG

35r. / PRFLANG

What is your preferred language? Would you say..

(READ LIST)

1. ENGLISH, -----> HLTSTA4
2. SPANISH, or
3. SOME OTHER LANGUAGE

DK/REFUSAL/NOT ASCERTAINED



SPKENG

35s. / SPKENG

How well do you speak English? Would you say...

(READ LIST)

- 1. VERY WELL,
- 2. WELL,
- 3. NOT WELL, or
- 4. NOT AT ALL

DK/REFUSAL/NOT ASCERTAINED

DSPKPRF

35t. / DSPKPRF

In the last 6 months, when you called or spoke to someone from your health plan, how often did they speak your preferred language? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

NDINTRP

35u. / NDINTRP

An interpreter is someone who helps you talk with others who do not speak your language. Interpreters can include staff from the health plan or telephone interpreters.

In the last 6 months, was there any time when you needed an interpreter to talk with someone from your health plan?

- 1. YES
- 2. NO -----> HLTSTA4

DK/REFUSAL/NOT ASCERTAINED

FRTRAN

35v. / FRTRAN

In the last 6 months, did anyone from the health plan let you know that an interpreter was available free of charge? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

INTROFC

35w. / INTROFC

In the last 6 months, how often did you use an interpreter provided by your health plan to help you talk with someone from the plan? Would you say..

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

MOTRAN

35x. / MOTRAN

In the last 6 months, when you used an interpreter provided by your health plan, who was it? Was it..

(READ LIST)

- 1. A STAFF MEMBER FROM THE HEALTH PLAN
- 2. AN INTERPRETER PROVIDED IN-PERSON BY THE HEALTH PLAN
- 3. A TELEPHONE INTERPRETER PROVIDED BY THE HEALTH PLAN
- 4. SOMEONE ELSE PROVIDED BY THE HEALTH PLAN
- 5. DON'T KNOW OR UNSURE

REFUSAL/NOT ASCERTAINED

CRTRAN

35y. / CRTRAN

In the last 6 months, how often did this interpreter treat you with courtesy and respect? Would you say..

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

RATEINT

35z. / RATEINT

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

00	01	02	03	04	05	06	07	08	09	10
WORST										BEST
INTERPRETER										INTERPRETER
POSSIBLE										POSSIBLE

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## INTRFRD

35aa. / INTRFRD

In the last 6 months, how often did you use a friend or family member as an interpreter when you talked with someone from your health plan? Would you say...

(READ LIST)

1. NEVER, -----> HLTSTA4
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

## FRDPREF

35ab. / FRDPREF

In the last 6 months, did you use friends or family members as interpreters because that was what you preferred? Would you say...

(READ LIST)

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

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, 2013?

- 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 that 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

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

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

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

QRACE3.OTH / QRACE3.OTH  
 (What is your race?)

---

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

EDIT.FLG  
 (IWER: DO YOU NEED TO TYPE AN EDIT?)

1. YES
2. NO

IF EDIT.FLG = 2 THEN GO TO CK.END.EDIT

EDIT.OTH  
 EDIT.OTH. (IWER: PLEASE TYPE YOUR EDIT-BE SPECIFIC-INCLUDE:

- 1) QUESTION NUMBER(S)
  - 2) WHAT WAS ENTERED
  - 3) WHAT NEEDS TO BE CHANGED
- 

CK.END.EDIT  
 LANG.DID

LANG.DID. IWER: DID YOU DO THIS INTERVIEW IN...

1. ENGLISH,
2. SPANISH OR
3. BOTH?

END.SCREEN

COVERSHEET NOT NEEDED

I may need to contact you again later, but today we are only interviewing members of Oregon Health Plan, so those are all the questions I have. Thank you very much for your help.

( RC = [RC%] )

RETURN TO COVERSHEET

TRANS.SCRN

INTERVIEWER: YOU HAVE INDICATED THAT YOU HAVE A SPANISH SPEAKER OR A HOUSEHOLD WITH A LANGUAGE PROBLEM.

1. IF THIS COVERSHEET SHOULD BE MOVED TO THE SPANISH PROJECT ENTER "1"
2. IF THIS WAS AN ERROR, TYPE "2" TO GO BACK

WHAT.LANG

INTERVIEWER: WHAT LANGUAGE DO YOU THINK THEY SPEAK IN THIS HOUSEHOLD?

---

DK

GOOD.BYE

INTERVIEWER: [THIS ID HAS BEEN TRANSFERRED TO THE SPANISH PROJECT/THIS ID IS NOT ELIGIBLE FOR TRANSFER TO THE SPANISH PROJECT. THIS ID WILL BE CODED AS A LANGUAGE PROBLEM]

[( RC = 80 )/( RC = 63 )]

## DIAL.SCREEN

DS. INTERVIEWER: YOU MAY DO THE INTERVIEW WITH ONLY THE PARENT OR GUARDIAN WHO KNOWS MOST ABOUT [MEMBER NAME]'S HEALTH CARE]

PHONE NUMBER ---> (###) ### - ####

(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

1. / 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?

("DK" NOT ALLOWED)

(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

NPLNAME

2. / NPLNAME

What is the name of your child's health plan?

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS OREGON HEALTH PLAN]

(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

2a. / 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

3. / INCARE

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

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

DK/REFUSAL/NOT ASCERTAINED --> APMAKE4

CARSN4

4. / 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

5. / APMAKE4

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

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

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

APGET4

6. / 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

7. / 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 AND QNAIRE <05 THEN GO TO PRSNLD4  
IF OFCTIM4=0 OR DK/REFUSAL AND QNAIRE >05 THEN GO TO CHSCHL



PRVENT5

8. / 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 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)

RXSTP

10. / RXSTP

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

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

DK/REFUSAL/NOT ASCERTAINED --> RTALLCR

RXWHY

11. / RXWHY

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? Would you say...

(READ LIST)

- 1. NOT AT ALL,
- 2. A LITTLE,
- 3. SOME, OR
- 4. A LOT?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXWYNT

12. / RXWYNT

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? Would you say...

(READ LIST)

- 1. NOT AT ALL,
- 2. A LITTLE,
- 3. SOME, OR
- 4. A LOT?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

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
WORST										BEST
HEALTH CARE										HEALTH CARE
POSSIBLE										POSSIBLE

DK/REFUSAL/NOT ASCERTAINED

CARNES4

15. / CARNES4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHSCHL

16. / CHSCHL

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

- 1. YES
- 2. NO -----> MEDEQUIP

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

CONTSCHL

17. / CONTSCHL

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

- 1. YES
- 2. NO -----> MEDEQUIP

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

HELPCONT

18. / HELPCONT

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

MEDEQUIP

19. / MEDEQUIP

Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment. In the last 6 months, did you get or try to get any special medical equipment or devices for your child?

- 1. YES
- 2. NO -----> SPCTHY

DK/REFUSAL/NOT ASCERTAINED --> SPCTHY

EZMDEQ

20. / EZMDEQ

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPMDEQ

21. / HELPMDEQ

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

SPCTHY

22. / SPCTHY

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

- 1. YES
- 2. NO -----> TCPBLM

DK/REFUSAL/NOT ASCERTAINED --> TCPBLM

EZTHP

23. / EZTHP

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTHP

24. / HELPTHP

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

TCPBLM

25. / TCPBLM

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

- 1. YES
- 2. NO -----> PLUSCARE

DK/REFUSAL/NOT ASCERTAINED --> PLUSCARE

EZTC

26. / EZTC

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTC

27. / HELPTC

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLUSCARE

28. / PLUSCARE

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

- 1. YES
- 2. NO -----> PRSNLD4

DK/REFUSAL/NOT ASCERTAINED --> PRSNLD4

HLPCOORD

29. / HLPCOORD

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

PRSNLD4

30. / PRSNLD4

A personal doctor is the one your child would see if [he/she] needs a check-up, has a health problem, or gets sick or hurt.

Does your child have a personal doctor?

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

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

DRTMS

31. / DRTMS

In the last 6 months, how many times did your child visit [his/her] personal doctor for care ?

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

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

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

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

PBDRNG

31a. /PBDRNG

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

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?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

DRLSTN4

33. / DRLSTN4

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

DRESPU4

34. / DRESPU4

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

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

CPBDRLN

35a. / CPBDRLN

In the last 6 months, how often did your child have a hard time speaking with or understanding his or her personal doctor because they spoke different languages? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

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 (DO NOT READ)



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 (DO NOT READ) --> 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
WORST										BEST
PERSONAL										PERSONAL
DOCTOR POSSIBLE										DOCTOR POSSIBLE

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, "Does a (type of specialist) count?", 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         |
| WORST      |    |    |    |    |    |    |    |    |    | BEST       |
| SPECIALIST |    |    |    |    |    |    |    |    |    | SPECIALIST |
| POSSIBLE   |    |    |    |    |    |    |    |    |    | POSSIBLE   |

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.

CLCSR4  
49. / CLCSR4

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

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

DK/REFUSAL/NOT ASCERTAINED --> PLPRWK4

PBCLCS4  
50. / PBCLCS4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CSRESP  
51. / CSRESP

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLPRWK4  
52. / PLPRWK4

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

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

DK/REFUSAL/NOT ASCERTAINED --> RTPLEXP

PBPLPW4

53. / PBPLPW4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTPLEXP

54. / RTPLEXP

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

00	01	02	03	04	05	06	07	08	09	10
WORST										BEST
HEALTH PLAN										HEALTH PLAN
POSSIBLE										POSSIBLE

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHPRES

55. / CHPRES

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

- 1. YES
- 2. NO -----> HLTSTA4

DK/REFUSAL/NOT ASCERTAINED --> HLTSTA4

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

HLTSTA4

58. / HLTSTA4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

MNTLSTAT

59. / MNTLSTAT

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CUSEMED

60. / CUSEMED

Other than vitamins, does your child currently need or use medicine prescribed by a doctor?

- 1. YES
- 2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

WHYMEDA

61. / WHYMEDA

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

- 1. YES
- 2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

WHYMEDB

62. / WHYMEDB

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

MOREMED

63. / MOREMED

Does your child need or use more medical care, more mental health services, or more educational services than is usual for most children of the same age?

- 1. YES
- 2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

WHYMOREA

64. / WHYMOREA

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

- 1. YES
- 2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

WHYMOREB

65. / WHYMOREB

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

LIMITED

66. / LIMITED

Is your child limited or prevented in any way in [his/her] ability to do the things most children of the same age can do?

- 1. YES
- 2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --> SPECTHP

WHYLIMA

67. / WHYLIMA

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

- 1. YES
- 2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --> SPECTHP

WHYLIMB

68. / WHYLIMB

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

SPECTHP

69. / SPECTHP

Does your child need or get special therapy such as physical, occupational, or speech therapy?

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

DK/REFUSAL/NOT ASCERTAINED --> CHCOUNS

WHYSTA

70. / WHYSTA

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

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

DK/REFUSAL/NOT ASCERTAINED --> CHCOUNS



WHYSTB

71. / WHYSTB

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

CHCOUNS

72. / CHCOUNS

Does your child have any kind of emotional, developmental, or behavioral problem for which [he/she] needs or gets treatment or counseling?

- 1. YES
- 2. NO -----> CAGE

DK/REFUSAL/NOT ASCERTAINED --> CAGE

TIMCOUNA

73. / TIMCOUNA

Has this problem lasted or is it expected to last for at least 12 months?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

CAGE

74. / CAGE

I have just a few more questions.

What is YOUR CHILD'S age?

(IWER: ENTER 00 IF LESS THAN 1 YEAR OLD)

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

\_\_\_ ENTER CHILD'S AGE

DK/REFUSAL/NOT ASCERTAINED

IF CAGE<19 THEN GO TO CGENDER

CAGE.CK

74a. / CAGE.CK

I have entered that [NAME OF CHILD] is [CAGE]. Is that correct?

("DK" NOT ALLOWED)

- 1. YES-AGE ENTERED CORRECTLY
- 2. NO-CORRECT AGE -----> CAGE

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

QRACE3.OTH / QRACE3.OTH  
(What is your child's race?)

---

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.

RETURN TO COVERSHEET

EDIT.FLG

(IWER: DO YOU NEED TO TYPE AN EDIT?)

1. YES
2. NO

IF EDIT.FLG = 2 THEN GO TO CK.END.EDIT

EDIT.OTH

EDIT.OTH. (IWER: PLEASE TYPE YOUR EDIT-BE SPECIFIC-INCLUDE:

- 1) QUESTION NUMBER(S)
  - 2) WHAT WAS ENTERED
  - 3) WHAT NEEDS TO BE CHANGED
- 

CK.END.EDIT

LANG.DID

LANG.DID. IWER: DID YOU DO THIS INTERVIEW IN...

1. ENGLISH,
2. SPANISH OR
3. BOTH?

END.SCREEN

COVERSHEET NOT NEEDED

I may need to contact you again later, but today we are only interviewing members of Oregon Health Plan, so those are all the questions I have. Thank you very much for your help.

( RC = [RC%] )

RETURN TO COVERSHEET

TRANS.SCRN

INTERVIEWER: YOU HAVE INDICATED THAT YOU HAVE A SPANISH SPEAKER OR  
A HOUSEHOLD WITH A LANGUAGE PROBLEM.

1. IF THIS COVERSHEET SHOULD BE MOVED TO THE SPANISH PROJECT  
ENTER "1"
2. IF THIS WAS AN ERROR, TYPE "2" TO GO BACK

WHAT.LANG

INTERVIEWER: WHAT LANGUAGE DO YOU THINK THEY SPEAK IN THIS HOUSEHOLD?

---

DK

GOOD.BYE

INTERVIEWER: [THIS ID HAS BEEN TRANSFERRED TO THE SPANISH PROJECT/THIS ID IS  
NOT ELIGIBLE FOR TRANSFER TO THE SPANISH PROJECT. THIS ID WILL BE CODED AS  
A LANGUAGE PROBLEM]

[( RC = 80 )/( RC = 63 )]

