



Columbia Pacific CCO  
CAHPS® 5.0 Medicaid Survey

Banner Book Report

June 2017  
Measurement Year 2016



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## METHODOLOGY

### Introduction

This banner book report summarizes the results of the 2017 CAHPS® Medicaid survey of Cascade Health Alliance members. Cascade Health Alliance is one of 16 health plans that participated in the survey. The survey was administered over a twelve-week period using a mixed-mode (mail and telephone) six-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 Oregon Health Authority.

### Survey Milestones

Pre-notification letters mailed:	January 5, 2017
1st mailing of survey packets:	January 12, 2017
1st mailing of reminder postcards:	January 19, 2017
2nd mailing of survey packets:	February 9, 2017
2nd mailing of reminder postcards:	February 16, 2017
Phone follow-up start:	March 8, 2017
Mail and phone field terminated:	April 6, 2017

### 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. The state elected to sample 1800 members from each age group of the Open Card population. Adults were defined as members aged 18 years or older and children as 17 years old or younger, both as of November 30, 2016. To be eligible, members had to have been enrolled in Oregon Health Plan for at least six months as of November 30, 2016. The final selected sample consisted of 16,200 adult OHP enrollees and 16,200 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. Five 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 three *Reporting Measures* are possible. These measures cover topics called *Access to Specialized Services*, *Family Centered Care*, and *Coordination of Care*.

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

### **Composite: Getting Needed Care**

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

Q25/46. Getting appointments with specialists

### **Composite: Getting Care Quickly**

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

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

### **Composite: How Well Doctors Communicate**

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

Q18/33. Personal doctor listened carefully to you

Q19/34. Personal doctor showed respect for what you had to say

Q20/37. Personal doctor spent enough time with you/your child

### **Composite: Customer Service**

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

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

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

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

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

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

### **Rating Questions**

Q13/14. Rating of all health care

Q23/41. Rating of personal doctor

Q27/47. Rating of specialist doctor

Q35/54. Rating of health plan

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

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

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

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

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

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

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

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

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

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

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

## Comparisons, Statistical Testing, Scoring, and Weighting

In the tables, results are presented for all questionnaire items, reporting measures, and composites, by OHP overall, age category, race/ethnicity, health status, and gender. If any demographic subgroup has fewer than 11 respondents then the data in that demographic subgroup are suppressed, no cases will be presented in the column. Suppressed banner points are marked with a '###' on the banner point label. Some banner points have zero respondents, these banner points are marked with a '#' on the banner point label.

Significance testing was conducted between the CCO results and the overall OHP results, and the plan 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. The symbol '~' is used to indicate the test was not valid. 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	
	Columbia Pacific CCO	Overall	Columbia Pacific CCO	Overall
<b>**First mailing - sent</b>	900	16200	900	16200
<b>*First mailing - usable survey returned</b>	144	2801	104	2168
<b>Second mailing - sent</b>	751	13319	747	13616
<b>*Second mailing - usable survey returned</b>	50	978	38	886
<b>*Phone - usable surveys</b>	63	1303	122	2255
<b>Total - usable surveys</b>	257	5082	264	5309
<b>†Ineligible: According to population criteria‡</b>	20	346	9	200
<b>†Ineligible: Deceased</b>	0	31	0	0
<b>†Ineligible: Mentally or physically unable to complete survey</b>	2	195	0	0
<b>†Ineligible: Language barrier</b>	0	64	0	59
<b>Incorrect address AND incorrect phone number</b>	45	848	47	710
<b>Refusal/Returned survey blank</b>	38	672	46	829
<b>Nonresponse - Unavailable by mail or phone</b>	538	8962	534	9093
<b>Adjusted Response Rate</b>	<b>29.3%</b>	<b>32.7%</b>	<b>29.6%</b>	<b>33.3%</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© 2017 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	239 44.0%	104 40.5%	-3.55%
Female	304 56.0%	153 59.5%	3.55%
18-24	100 18.4%	15 5.8%	-12.58%
25-34	149 27.4%	39 15.2%	-12.27%
35-44	116 21.4%	35 13.6%	-7.74%
45-54	88 16.2%	67 26.1%	9.86%
55-64	80 14.7%	87 33.9%	19.12%
65-74	7 1.3%	12 4.7%	3.38%
75 or Older	3 0.6%	2 0.8%	0.23%

### Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	255 46.9%	148 56.1%	9.19%
Female	289 53.1%	116 43.9%	-9.19%
<3	104 19.1%	53 20.1%	0.96%
4-7	137 25.2%	65 24.6%	-0.56%
8-12	161 29.6%	72 27.3%	-2.32%
13 or older	142 26.1%	74 28.0%	1.93%

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH	GENDER	
	OT1	OT2													ITY	STATUS				
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									#	##	#	##	##	TI	IC##	IC	GOOD	POOR	MALE	MALE
Q1																				
YES	257	5060	13	38	33	67	83	14	215					14	239	161	88	100	151	
	100%	100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%	~100%
NOT ANSWERED		22																		
VALID CASES	257	5060	13	38	33	67	83	14	215					14	239	161	88	100	151	
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151	
	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?

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER	
	COPA 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 ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC#	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE
Q3 YES	106 42%	2017 41%	5 38%~	11 29%~	14 42%~	31 46%	36 43%	7 50%~	88 41%~	~	~	~	~	7 50%~	101 42%~	52 32%*	51 58%*	36 36%	68 45%
Q3 NO	149 58%	2921 59%	8 62%~	27 71%~	19 58%~	36 54%	47 57%	7 50%~	127 59%~	~	~	~	~	7 50%~	138 58%~	109 68%*	37 42%*	64 64%	83 55%
NOT ANSWERED	2	144																	
VALID CASES	255	4938	13	38	33	67	83	14	215					14	239	161	88	100	151
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER		
	OT1	OT2												ITY	STATUS	MALE	MALE		
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/			NOT	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR	
									AMER		ILND	NATV		TI	PAN-	PAN-	&	&	
									IC##						IC		GOOD	POOR	
																	MALE	MALE	
Q4																			
NEVER	2	42	1			1			2						2	1	1	1	1
	2%	2%	20%~	~	~	4%~	~	~	3%~	~	~	~	~	~	~ 2%~	2%~	2%~	3%~	2%~
SOMETIMES	11	268		1	3	2	4		9					1	10	1	9	4	6
	12%	15%	~	10%~	23%~	8%~	12%~	~	11%~	~	~	~	~	~ 14%~	~ 11%~	2%~	19%~	12%~	10%~
USUALLY	21	466	3	3	6	4	5		20						21	14	7	10	11
	22%	26%	60%~	30%~	46%~	16%~	15%~	~	25%~	~	~	~	~	~	~ 23%~	31%~	15%~	30%~	18%~
ALWAYS	61	1045	1	6	4	18	24	7	48					6	57	29	30	18	42
	64%	57%	20%~	60%~	31%~	72%~	73%~	100%~	61%~	~	~	~	~	~ 86%~	~ 63%~	64%~	64%~	55%~	70%~
#ALWAYS + USUALLY (NET)	82	1511	4	9	10	22	29	7	68					6	78	43	37	28	53
	86%	83%	80%~	90%~	77%~	88%~	88%~	100%~	86%~	~	~	~	~	~ 86%~	~ 87%~	96%~	79%~	85%~	88%~
TOP BOX SCORE	61	1045	1	6	4	18	24	7	48					6	57	29	30	18	42
	64%	57%	20%~	60%~	31%~	72%~	73%~	100%~	61%~	~	~	~	~	~ 86%~	~ 63%~	64%~	64%~	55%~	70%~
NOT ANSWERED	11	196		1	1	6	3		9						11	7	4	3	8
VALID CASES	95	1821	5	10	13	25	33	7	79					7	90	45	47	33	60
NUMBER OF RESPONDENTS	106	2017	5	11	14	31	36	7	88					7	101	52	51	36	68
	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?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/			HIS-	HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	PAN-	PAN-	GOOD	FAIR		
									AMER					TI	IC##	IC	GOOD	POOR	MALE	MALE
Q5																				
YES	170	3365	5	23	22	54	52	10	145					9	163	100	68	63	106	
	67%	68%	38%~	61%~	67%~	81%*	63%	71%~	68%~	~	~	~	~	~ 64%~	~ 68%~	63%*	77%*	64%	70%	
NO	82	1561	8	15	11	13	30	4	69					5	75	60	20	36	45	
	33%	32%	62%~	39%~	33%~	19%*	37%	29%~	32%~	~	~	~	~	~ 36%~	~ 32%~	38%*	23%*	36%	30%	
NOT ANSWERED	5	156						1	1						1	1		1		
VALID CASES	252	4926	13	38	33	67	82	14	214					14	238	160	88	99	151	
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	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?

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS			GENDER	
	COPA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC #	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE-MALE
Q6 NEVER	3 2%	83 3%	1 ~	1 5%~	1 5%~	1 2%	~	3 2%~	~	~	~	~	~	~	3 2%~	2 2%	1 2%	1 2%	1 2%	2 2%
SOMETIMES	29 18%	590 19%	1 20%~	2 10%~	6 29%~	11 22%	7 15%~	1 13%~	26 19%~	~	~	~	~	2 22%~	29 19%~	14 15%	15 24%	13 23%	16 16%	
USUALLY	43 27%	884 29%	2 40%~	5 24%~	8 38%~	14 27%	12 26%~	2 25%~	35 26%~	~	~	~	~	3 33%~	40 27%~	26 28%	17 27%	14 25%	29 29%	
ALWAYS	82 52%	1472 49%	2 40%~	13 62%~	6 29%~	25 49%	28 60%~	5 63%~	71 53%~	~	~	~	~	4 44%~	78 52%~	50 54%	30 48%	29 51%	52 53%	
#ALWAYS + USUALLY (NET)	125 80%	2356 78%	4 80%~	18 86%~	14 67%~	39 76%	40 85%~	7 88%~	106 79%~	~	~	~	~	7 78%~	118 79%~	76 83%	47 75%	43 75%	81 82%	
TOP BOX SCORE	82 52%	1472 49%	2 40%~	13 62%~	6 29%~	25 49%	28 60%~	5 63%~	71 53%~	~	~	~	~	4 44%~	78 52%~	50 54%	30 48%	29 51%	52 53%	
NOT ANSWERED	13	336	2	1	3	5	2	10							13	8	5	6	7	
VALID CASES	157	3029	5	21	21	51	47	8	135					9	150	92	63	57	99	
NUMBER OF RESPONDENTS	170	3365	5	23	22	54	52	10	145					9	163	100	68	63	106	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	

[ASKED IF Q5 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2	18	25	35	45	55	65	BLCK	NATV	AMER	HAW/	IND/			EX &				
	COPA	OHP	TO	TO	TO	TO	TO	AND	OR	AS-	PAC	ALSK	OTH	MUL-	NOT	VERY	GOOD	FAIR	FE-	
	TOT	TOT	24	34	44	54	64	OVER	AMER	IAN	ILND	NATV	OTH	TI	PAN-	PAN-	&	&	MALE	MALE
	ADLT	ADLT	%	%	%	%	%	%	#	##	#	##	##	TI	IC##	IC	GOOD	POOR	MALE	MALE
Q7																				
NONE	61	1242	8	12	9	10	20	2	54					3	57	50	11	33	28	
	24%	26%	62%~	32%~	27%~	15%*	25%	14%~	25%~	~	~	~	~	21%~	~	24%~	31%*	13%*	33%*	19%*
1 TIME	42	927	2	3	6	11	14	4	33					4	38	26	14	17	24	
	17%	19%	15%~	8%~	18%~	16%	17%	29%~	15%~	~	~	~	~	29%~	~	16%~	16%	16%	17%	16%
2	44	878	2	3	5	17	12	3	34					3	40	28	14	15	28	
	18%	18%	15%~	8%~	15%~	25%	15%	21%~	16%~	~	~	~	~	21%~	~	17%~	18%	16%	15%	19%
3	32	581	1	5	4	6	13	3	29					2	32	18	14	10	22	
	13%	12%	8%~	13%~	12%~	9%	16%	21%~	14%~	~	~	~	~	14%~	~	14%~	11%	16%	10%	15%
4	18	402		2	1	7	6	1	16						18	12	6	3	15	
	7%	8%	~	5%~	3%~	10%	7%	7%~	8%~	~	~	~	~	~	8%~	8%	7%	3%*	10%*	
5 TO 9	42	571		10	6	12	14		37					2	40	20	22	16	26	
	17%	12%*	~	26%~	18%~	18%	17%	~	17%~	~	~	~	~	14%~	~	17%~	13%*	25%*	16%	17%
10 OR MORE TIMES	12	248		3	2	4	2	1	10						12	6	6	6	6	
	5%	5%	~	8%~	6%~	6%	2%	7%~	5%~	~	~	~	~	~	5%~	4%	7%	6%	4%	
NOT ANSWERED	6	233					2		2						2	1	1		2	
VALID CASES	251	4849	13	38	33	67	81	14	213					14	237	160	87	100	149	
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER	
	COPA 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 ##	OTHR ##	MUL- TI	HIS- PAN- IC##	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE
Q8 #YES	133 71%	2535 72%	3 60%~	21 81%~	17 71%~	46 82%*	38 63%	8 67%~	117 75%~	~	~	~	~	6 55%~	127 ~ 71%~	82 75%	51 69%	51 77%	82 68%
NO	54 29%	984 28%	2 40%~	5 19%~	7 29%~	10 18%*	22 37%	4 33%~	40 25%~	~	~	~	~	5 45%~	51 ~ 29%~	28 25%	23 31%	15 23%	38 32%
NOT ANSWERED	3	88				1	1		2						2		2	1	1
VALID CASES	187	3519	5	26	24	56	60	12	157					11	178	110	74	66	120
NUMBER OF RESPONDENTS	190	3607	5	26	24	57	61	12	159					11	180	110	76	67	121
	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?

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER	
	COPA 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	OTHR	MUL- TI	HIS- IC##	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE
Q9 YES	109 57%	1857 53%	3 60%~	18 69%~	17 71%~	29 51%	33 54%	7 58%	95 60%~	~	~	~	~	4 ~ 36%~	104 ~ 58%~	60 55%	47 62%	38 57%	70 58%
NO	81 43%	1655 47%	2 40%~	8 31%~	7 29%~	28 49%	28 46%	5 42%~	64 40%~	~	~	~	~	7 ~ 64%~	76 ~ 42%~	50 45%	29 38%	29 43%	51 42%
NOT ANSWERED		95																	
VALID CASES	190	3512	5	26	24	57	61	12	159					11	180	110	76	67	121
NUMBER OF RESPONDENTS	190	3607	5	26	24	57	61	12	159					11	180	110	76	67	121
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS		GENDER			
	COPA 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	OTHR	MUL- TI	HIS- IC##	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE
Q10 #YES	97 93%	1690 93%	3 100%	17 100%	15 88%	25 93%	29 94%	6 86%	84 93%	~	~	~	~	~	4 ~100%	92 ~93%	53 95%	42 91%	32 94%	64 93%
NO	7 7%	121 7%	~	~	2 12%	2 7%	2 6%	1 14%	6 7%	~	~	~	~	~	~	7 ~7%	3 5%	4 9%	2 6%	5 7%
NOT ANSWERED	5	46	1			2	2		5							5	4	1	4	1
VALID CASES	104	1811	3	17	17	27	31	7	90					4	99	56	46	34	69	
NUMBER OF RESPONDENTS	109 100%	1857 100%	3 100%	18 100%	17 100%	29 100%	33 100%	7 100%	95 100%					4 100%	104 100%	60 100%	47 100%	38 100%	70 100%	

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



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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/			HIS-	HIS-	VERY	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	IC##	IC	GOOD	POOR	MALE	MALE
Q11																				
#YES	77	1346	2	13	15	19	20	6	68					3	73	43	33	28	48	
	74%	74%	67%~	81%~	88%~	70%~	63%~	86%~	76%~	~	~	~	~	~ 75%~	~ 74%~	78%~	70%~	80%~	71%~	
NO	27	462	1	3	2	8	12	1	22					1	26	12	14	7	20	
	26%	26%	33%~	19%~	12%~	30%~	38%~	14%~	24%~	~	~	~	~	~ 25%~	~ 26%~	22%~	30%~	20%~	29%~	
NOT ANSWERED	5	49		2		2	1		5						5	5		3	2	
VALID CASES	104	1808	3	16	17	27	32	7	90					4	99	55	47	35	68	
NUMBER OF RESPONDENTS	109	1857	3	18	17	29	33	7	95					4	104	60	47	38	70	
	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?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2	18	25	35	45	55	65	BLCK	NATV	AMER	AFR-	AS-	HAW/	IND/	ETHNIC-	EX &	VERY	FE-		
	COPA	OHP	TO	TO	TO	TO	TO	AND	WHTE	#	##	#	##	##	TI	HIS-	HIS-	GOOD	FAIR	MALE	MALE
	TOT	TOT	24	34	44	54	64	OVER								IC##	IC	GOOD	POOR		
Q12 #YES	79	1378	3	14	12	21	22	7	71						2	76	42	36	28	51	
	76%	77%	100%~	82%~	71%~	78%~	69%~	100%~	78%~	~	~	~	~	~	50%~	~	76%~	75%~	77%~	80%~	74%~
NO	25	420		3	5	6	10		20						2	24	14	11	7	18	
	24%	23%	~	18%~	29%~	22%~	31%~	~	22%~	~	~	~	~	~	50%~	~	24%~	25%~	23%~	20%~	26%~
NOT ANSWERED	5	59		1		2	1		4							4	4		3	1	
VALID CASES	104	1798	3	17	17	27	32	7	91						4	100	56	47	35	69	
NUMBER OF RESPONDENTS	109	1857	3	18	17	29	33	7	95						4	104	60	47	38	70	
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	

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

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

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC-ITY	HEALTH STATUS		GENDER				
	COPA TOT ADLTL	OHP TOT ADLTL	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 ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC##	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	MALE	FE-MALE		
Q13 WORST HEALTH CARE POSSIBLE	1 0.5%	19 0.5%	~	~	~	~	2%	~	~	~	~	~	~	~	~	1 ~0.6%	~	1 1%	~		
01	1 0.5%	22 0.6%	~	~	4%	~	~	~	~	~	~	~	~	~	~	1 ~0.6%	~	1 1%	~0.8%		
02	2 1%	39 1%	~	~	9%	~	~	~	~	~	~	~	~	~	~	2 1%	~	2 3%	~	2 2%	
03	4 2%	63 2%	1 20%	2 8%	~	1 2%	~	~	~	~	~	~	~	~	~	4 3%	~	2 2%	2 3%	2 2%	
04	9 5%	95 3%	~	1 4%	1 4%	~	6 10%	~	~	~	~	~	~	~	~	7 4%	~	3 3%	6 8%	2 3%	7 6%
05	13 7%	234 7%	1 20%	1 4%	3 13%	8 14%*	~	~	~	~	~	~	~	1 9%	~	10 6%	~	6 6%	6 8%	6 9%	7 6%
06	14 8%	215 6%	~	6 24%	2 9%	2 4%	1 2%*	2 17%	~	~	~	~	~	~	~	11 7%	~	11 10%	3 4%	4 6%	10 8%
07	18 10%	442 13%	1 20%	2 8%	4 17%	5 9%	5 8%	1 8%	~	~	~	~	~	2 18%	~	14 9%	~	5 5%*	13 18%*	5 7%	13 11%
08	46 25%	779 22%	1 20%	5 20%	5 22%	18 32%	12 20%	4 33%	~	~	~	~	~	4 36%	~	41 26%	~	28 26%	17 23%	17 25%	29 25%
09	23 12%	592 17%	1 20%	1 4%	1 4%	8 14%	10 16%	2 17%	~	~	~	~	~	1 9%	~	18 12%	~	15 14%	8 11%	10 15%	13 11%
BEST HEALTH CARE POSSIBLE	55 30%	1011 29%	~	7 28%	4 17%	14 25%	26 43%*	3 25%	~	~	~	~	~	3 27%	~	47 30%	~	39 36%*	15 20%*	20 30%	34 29%
#8-10 (NET)	124 67%	2382 68%	2 40%	13 52%	10 43%	40 71%	48 79%*	9 75%	~	~	~	~	~	8 73%	~	106 68%	~	82 75%*	40 54%*	47 70%	76 64%

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?

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER		
	COPA 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/ PAC ILND #	AMER IND/ ALSK #	OTH R #	MUL- TI #	HIS- PAN- IC#	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE MALE	FE- MALE
9-10 (NET)	78 42%	1603 46%	1 20%~	8 32%~	5 22%~	22 39%	36 59%*	5 42%~	65 42%~	~	~	~	~	4 ~ 36%~	75 ~ 42%~	54 50%*	23 31%*	30 45%	47 40%	
NOT ANSWERED	4	96		1	1	1		3							3	1	2		3	
VALID CASES	186	3511	5	25	23	56	61	12	156					11	177	109	74	67	118	
NUMBER OF RESPONDENTS	190	3607	5	26	24	57	61	12	159					11	180	110	76	67	121	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	
MEAN	7.81	7.94	6.40	7.36	6.65	7.96	8.38	8.25	7.81					8.18	7.83	8.24	7.19	7.90	7.75	
p stat_(*=Sig @ p<=.05)		.366	~	~	~.485	.012*	~	~	~	~	~	~	~	~	~	~.002*	.002*	.692	.583	

[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?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2																		
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				NOT	VERY	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									AMER					TI	IC##	IC	GOOD	POOR	MALE	MALE
Q14																				
NEVER	3	90		1	1		1		3						3	1	2	1	2	
	2%	3%		~ 4%	~ 4%		~ 2%		2%						~ 2%	0.9%	3%	1%	2%	
SOMETIMES	27	539	2	6	5	4	7		23					2	26	9	17	8	18	
	14%	15%	40%	24%	21%	7%*	11%		15%					~ 18%	~ 15%	8%*	23%*	12%	15%	
USUALLY	59	1150	1	11	12	18	14	3	49					3	56	38	20	24	35	
	32%	33%	20%	44%	50%	32%	23%	25%	31%					~ 27%	~ 31%	35%	27%	36%	29%	
ALWAYS	98	1722	2	7	6	34	39	9	82					6	93	61	36	34	64	
	52%	49%	40%	28%	25%	61%	64%*	75%	52%					~ 55%	~ 52%	56%	48%	51%	54%	
#ALWAYS + USUALLY (NET)	157	2872	3	18	18	52	53	12	131					9	149	99	56	58	99	
	84%	82%	60%	72%	75%	93%*	87%	100%	83%					~ 82%	~ 84%	91%*	75%*	87%	83%	
TOP BOX SCORE	98	1722	2	7	6	34	39	9	82					6	93	61	36	34	64	
	52%	49%	40%	28%	25%	61%	64%*	75%	52%					~ 55%	~ 52%	56%	48%	51%	54%	
NOT ANSWERED	3	106		1		1			2						2	1	1		2	
VALID CASES	187	3501	5	25	24	56	61	12	157					11	178	109	75	67	119	
NUMBER OF RESPONDENTS	190	3607	5	26	24	57	61	12	159					11	180	110	76	67	121	
	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?

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER		
	COPA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC##	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q15 YES	199 79%	3993 82%	8 62%~	27 71%~	26 79%~	56 85%	68 82%	11 79%~	173 80%~	~	~	~	~	~	11 79%~	189 ~ 79%~	122 76%	74 85%	72 73%*	126 83%
NO	52 21%	904 18%	5 38%~	11 29%~	7 21%~	10 15%	15 18%	3 21%~	42 20%~	~	~	~	~	3 21%~	50 ~ 21%~	39 24%	13 15%	27 27%*	25 17%	
NOT ANSWERED	6	185				1												1	1	
VALID CASES	251	4897	13	38	33	66	83	14	215					14	239	161	87	99	151	
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2																		
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &	FAIR			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				VERY	&				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	NOT	GOOD	POOR	FE-		
									#	##	#	##	##	TI	HIS-	HIS-	GOOD	POOR	MALE	MALE
									WHTE						IC##	IC	GOOD	POOR	MALE	MALE
Q16																				
NONE	40	792	2	8	6	9	13	2	34					4	38	33	7	18	22	
	21%	21%	29%~	30%~	25%~	17%	21%	18%~	21%~	~	~	~	~	~ 36%~	~ 21%~	28%*	10%*	27%	18%	
1 TIME	35	995	1	1	10	7	15		28					4	32	21	12	14	20	
	19%	27%*	14%~	4%~	42%~	13%	24%		17%~	~	~	~	~	~ 36%~	~ 18%~	18%	17%	21%	17%	
2	47	792	2	6	3	17	14	5	41					1	44	24	23	14	33	
	25%	21%	29%~	22%~	13%~	31%	22%	45%~	25%~	~	~	~	~	~ 9%~	~ 24%~	21%	33%*	21%	27%	
3	27	483	2	3	1	5	15	1	25					1	27	18	9	10	17	
	14%	13%	29%~	11%~	4%~	9%	24%*	9%~	15%~	~	~	~	~	~ 9%~	~ 15%~	15%	13%	15%	14%	
4	15	279		4		5	3	2	15						15	9	6	7	8	
	8%	7%	~	15%~	~	9%	5%	18%~	9%~	~	~	~	~	~	~ 8%~	8%	9%	10%	7%	
5 TO 9	20	312		4	2	10	3		18					1	19	10	9	3	17	
	11%	8%	~	15%~	8%~	19%	5%*	~	11%~	~	~	~	~	~ 9%~	~ 11%~	9%	13%	4%*	14%*	
10 OR MORE TIMES	5	88		1	2	1		1	3						5	2	3	1	4	
	3%	2%	~	4%~	8%~	2%	~	9%~	2%~	~	~	~	~	~	~ 3%~	2%	4%	1%	3%	
NOT ANSWERED	10	252	1		2	2	5		9						9	5	5	5	5	
VALID CASES	189	3741	7	27	24	54	63	11	164					11	180	117	69	67	121	
NUMBER OF RESPONDENTS	199	3993	8	27	26	56	68	11	173					11	189	122	74	72	126	
	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?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			PAN-	PAN-	&	&	FE-		
									WHTE	#	##	#	##	##	TI	IC##	IC	GOOD	POOR	MALE	MALE
Q17																					
NEVER	1	51					1		1						1		1		1		
	0.7%	2%	~	~	~	~	2%~	~	0.8%~	~	~	~	~	~	~	~	~	~	2%~	~	~
SOMETIMES	10	190		1	3	4			8						9	3	5	3	6		
	7%	6%	~	5%~	17%~	9%~	~	~	6%~	~	~	~	~	~	~	6%~	4%~	8%~	6%~	6%~	
USUALLY	34	579	3	5	3	12	9	2	29						30	19	15	15	19		
	23%	20%	60%~	26%~	17%~	27%~	19%~	22%~	23%~	~	~	~	~	~	~	22%~	23%~	25%~	31%~	20%~	
ALWAYS	101	2109	2	13	12	29	37	7	89					7	99	60	40	29	72		
	69%	72%	40%~	68%~	67%~	64%~	79%~	78%~	70%~	~	~	~	~	~100%~	~	71%~	73%~	66%~	60%~	74%~	
#ALWAYS + USUALLY (NET)	135	2688	5	18	15	41	46	9	118					7	129	79	55	44	91		
	92%	92%	100%~	95%~	83%~	91%~	98%~	100%~	93%~	~	~	~	~	~100%~	~	93%~	96%~	90%~	92%~	94%~	
TOP BOX SCORE	101	2109	2	13	12	29	37	7	89					7	99	60	40	29	72		
	69%	72%	40%~	68%~	67%~	64%~	79%~	78%~	70%~	~	~	~	~	~100%~	~	71%~	73%~	66%~	60%~	74%~	
NOT ANSWERED	3	20					3		3						3	2	1	1	2		
VALID CASES	146	2929	5	19	18	45	47	9	127					7	139	82	61	48	97		
NUMBER OF RESPONDENTS	149	2949	5	19	18	45	50	9	130					7	142	84	62	49	99		
	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?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2	18	25	35	45	55	65	AND	BLCK	NATV	AMER								
	COPA	OHP	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			NOT	EX &				
	TOT	TOT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT							AMER		ILND	NATV	OTHR	MUL-	IC##	IC	GOOD	POOR	MALE	MALE
Q18																				
NEVER	2	63			1		1		2						2		2		1	1
	1%	2%	~	~	6%	~	2%	~	2%	~	~	~	~	~	~	1%	~	3%	2%	1%
SOMETIMES	12	222		3	1	3	4		11						12	6	5	3	9	
	8%	8%	~	16%	6%	7%	8%	~	9%	~	~	~	~	~	~	9%	7%	8%	6%	9%
USUALLY	31	572	3	4	5	9	8	1	24					2	27	18	12	14	17	
	21%	20%	60%	21%	28%	20%	17%	11%	19%	~	~	~	~	29%	~	19%	22%	20%	29%	17%
ALWAYS	102	2066	2	12	11	33	35	8	91					5	99	59	42	30	71	
	69%	71%	40%	63%	61%	73%	73%	89%	71%	~	~	~	~	71%	~	71%	71%	69%	63%	72%
#ALWAYS + USUALLY (NET)	133	2638	5	16	16	42	43	9	115					7	126	77	54	44	88	
	90%	90%	100%	84%	89%	93%	90%	100%	90%	~	~	~	~	100%	~	90%	93%	89%	92%	90%
TOP BOX SCORE	102	2066	2	12	11	33	35	8	91					5	99	59	42	30	71	
	69%	71%	40%	63%	61%	73%	73%	89%	71%	~	~	~	~	71%	~	71%	71%	69%	63%	72%
NOT ANSWERED	2	26					2		2						2	1	1	1	1	
VALID CASES	147	2923	5	19	18	45	48	9	128					7	140	83	61	48	98	
NUMBER OF RESPONDENTS	149	2949	5	19	18	45	50	9	130					7	142	84	62	49	99	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			NOT	VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR	FE-		
									WHTE	#	##	#	##	##	TI	IC##	IC	GOOD	POOR	MALE	MALE
Q19																					
NEVER	2	55					2		2						2	1	1	1	1		
	1%	2%	~	~	~	~	4%~	~	2%~	~	~	~	~	~	~	1%~	1%	2%	2%~	1%~	
SOMETIMES	11	211	1	3	2	1	2		8						10	4	5	3	7		
	7%	7%	20%~	16%~	11%~	2%~	4%~	~	6%~	~	~	~	~	~	~	7%~	5%	8%	6%~	7%~	
USUALLY	31	437	2	2	5	12	8	1	23					3	26	19	11	11	20		
	21%	15%	40%~	11%~	28%~	27%~	16%~	11%~	18%~	~	~	~	~	43%~	~	18%~	23%	18%	23%~	20%~	
ALWAYS	104	2221	2	14	11	32	37	8	96					4	103	59	45	33	71		
	70%	76%	40%~	74%~	61%~	71%~	76%~	89%~	74%~	~	~	~	~	57%~	~	73%~	71%	73%	69%~	72%~	
#ALWAYS + USUALLY (NET)	135	2658	4	16	16	44	45	9	119					7	129	78	56	44	91		
	91%	91%	80%~	84%~	89%~	98%~	92%~	100%~	92%~	~	~	~	~	100%~	~	91%~	94%	90%	92%~	92%~	
TOP BOX SCORE	104	2221	2	14	11	32	37	8	96					4	103	59	45	33	71		
	70%	76%	40%~	74%~	61%~	71%~	76%~	89%~	74%~	~	~	~	~	57%~	~	73%~	71%	73%	69%~	72%~	
NOT ANSWERED	1	25					1		1						1	1			1		
VALID CASES	148	2924	5	19	18	45	49	9	129					7	141	83	62	48	99		
NUMBER OF RESPONDENTS	149	2949	5	19	18	45	50	9	130					7	142	84	62	49	99		
	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?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2																		
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			PAN-	PAN-	&	&		
									WHTE	#	##	#	##	##	TI	IC##	IC	GOOD	POOR	
																			MALE	FE-
																			MALE	
Q20																				
NEVER	5	87		2		1	2		4							5	2	2	2	3
	3%	3%		~ 11%		~ 2%	4%		3%							~ 4%	2%	3%	4%	3%
SOMETIMES	9	259	3	1	2	1	1		8							8	4	4	3	5
	6%	9%	60%	5%	11%	2%	2%		6%							~ 6%	5%	6%	6%	5%
USUALLY	33	721	1	3	6	10	11	2	27					1		29	18	15	13	20
	22%	25%	20%	16%	33%	22%	22%	22%	21%					~ 14%		~ 21%	22%	24%	27%	20%
ALWAYS	101	1860	1	13	10	33	35	7	90					6		99	59	41	30	71
	68%	64%	20%	68%	56%	73%	71%	78%	70%					~ 86%		~ 70%	71%	66%	63%	72%
#ALWAYS + USUALLY (NET)	134	2581	2	16	16	43	46	9	117					7		128	77	56	43	91
	91%	88%	40%	84%	89%	96%	94%	~100%	91%					~100%		~ 91%	93%	90%	90%	92%
TOP BOX SCORE	101	1860	1	13	10	33	35	7	90					6		99	59	41	30	71
	68%	64%	20%	68%	56%	73%	71%	78%	70%					~ 86%		~ 70%	71%	66%	63%	72%
NOT ANSWERED	1	22					1		1							1	1		1	
VALID CASES	148	2927	5	19	18	45	49	9	129					7		141	83	62	48	99
NUMBER OF RESPONDENTS	149	2949	5	19	18	45	50	9	130					7		142	84	62	49	99
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%		100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	&	&	FE-	
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC##	IC	GOOD	POOR	MALE	MALE
Q21																				
YES	96	1800	3	16	10	32	30	5	87					2	94	50	45	28	68	
	66%	62%	60%~	84%~	56%~	71%~	63%~	63%~	68%~	~	~	~	~	~ 29%~	~ 68%~	62%	73%	58%~	70%~	
NO	50	1107	2	3	8	13	18	3	41					5	45	31	17	20	29	
	34%	38%	40%~	16%~	44%~	29%~	38%~	38%~	32%~	~	~	~	~	~ 71%~	~ 32%~	38%	27%	42%~	30%~	
NOT ANSWERED	3	42						2	2						3	3		1	2	
VALID CASES	146	2907	5	19	18	45	48	8	128					7	139	81	62	48	97	
NUMBER OF RESPONDENTS	149	2949	5	19	18	45	50	9	130					7	142	84	62	49	99	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	

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

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS			GENDER	
	COPA TOT ADLTT	OHP TOT ADLTT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC##	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE
Q22 NEVER	6 6%	108 6%	1 ~	2 7%~	1 20%~	2 3%~	2 7%~	5 6%~	~	~	~	~	~	~	~	6 7%~	2 4%~	3 7%~	3 11%~	3 5%~
SOMETIMES	10 11%	264 15%	1 33%~	1 7%~	1 10%~	4 13%~	3 10%~	9 11%~	~	~	~	~	~	~	~	10 11%~	7 14%~	3 7%~	6 21%~	4 6%~
USUALLY	29 31%	517 30%	5 ~	4 33%~	10 40%~	8 32%~	2 28%~	24 29%~	~	~	~	~	1 50%~	1	28 31%~	16 33%~	13 30%~	7 25%~	22 34%~	
ALWAYS	48 52%	861 49%	2 67%~	8 53%~	3 30%~	16 52%~	16 55%~	3 60%~	46 55%~	~	~	~	~	1 50%~	47 52%~	24 49%~	24 56%~	12 43%~	36 55%~	
#ALWAYS + USUALLY (NET)	77 83%	1378 79%	2 67%~	13 87%~	7 70%~	26 84%~	5 83%~	70 83%~	~	~	~	~	2 100%~	2	75 82%~	40 82%~	37 86%~	19 68%~	58 89%~	
TOP BOX SCORE	48 52%	861 49%	2 67%~	8 53%~	3 30%~	16 52%~	16 55%~	3 60%~	46 55%~	~	~	~	~	1 50%~	47 52%~	24 49%~	24 56%~	12 43%~	36 55%~	
NOT ANSWERED	3	50	1		1	1		3							3	1	2		3	
VALID CASES	93	1750	3	15	10	31	29	5	84					2	91	49	43	28	65	
NUMBER OF RESPONDENTS	96 100%	1800 100%	3 100%	16 100%	10 100%	32 100%	30 100%	5 100%	87 100%					2 100%	94 100%	50 100%	45 100%	28 100%	68 100%	

[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?

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC-ITY	HEALTH STATUS		GENDER				
	COPA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER IND/ALSK ##	OTHR ##	MUL-TI TI	NOT HIS-PAN-IC##	HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	MALE	FE-MALE		
Q23 WORST PERSONAL DOCTOR POSSIBLE	21%	230.6%	~	~	~	2%	2%	~	21%	~	~	~	~	~	~	21%	10.9%	1%	23%	~	
01		320.9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
02	21%	391%	~	~	~	2%	2%	~	21%	~	~	~	~	~	~	21%	10.9%	1%	~	2%	
03	10.5%	602%*	~	~	~	2%	~	~	~	~	~	~	~	~	~	10.6%	~	~	~	10.8%	
04	53%	722%	~	4%	15%	12%	2%	~	2%	~	~	~	~	~	~	3%	10.9%	6%	~	4%*	
05	147%	1885%	114%	311%	29%	12%*	711%	~	138%	~	~	~	~	~	10%	137%	87%	69%	710%	76%	
06	74%	1584%	114%	27%	~	2%	3%	~	64%	~	~	~	~	~	~	3%	3%	3%	34%	43%	
07	169%	3279%	114%	519%	15%	59%	46%	~	149%	~	~	~	~	~	~	158%	98%	710%	34%	1311%	
08	3418%	63217%	229%	27%	627%	1019%	914%	436%	2515%	~	~	~	~	~	440%	~	16%	21%	913%	1522%	
09	3519%	69119%	229%	311%	523%	1324%	1016%	218%	3119%	~	~	~	~	~	10%	~	19%	19%	1319%	1120%	
BEST PERSONAL DOCTOR POSSIBLE	7238%	150640%	~	41%	732%	2037%	2945%	545%	6741%	~	~	~	~	~	40%	~	40%	39%	2739%	2638%	
#8-10 (NET)	14175%	282976%	457%	1659%	1882%	4380%	4875%	11100%	12375%	~	~	~	~	~	90%	~	75%	79%	4970%	5278%	8873%

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?

	BANT OT1	BANT OT2	AGE					RACE					ETHNIC- ITY	HEALTH STATUS		GENDER				
	COPA 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/ PAC ALSK ##	OTHR #	MUL- TI	HIS- PAN- IC#	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE
9-10 (NET)	107 57%	2197 59%	2 29%~	14 52%~	12 55%~	33 61%	39 61%	7 64%~	98 60%~	~	~	~	~	5 ~ 50%~	106 ~ 59%~	67 58%~	40 57%	37 55%	70 58%	
NOT ANSWERED	11	265	1		4	2	4		9				1		10	7	4	5	6	
VALID CASES	188	3728	7	27	22	54	64	11	164				10		179	115	70	67	120	
NUMBER OF RESPONDENTS	199 100%	3993 100%	8 100%	27 100%	26 100%	56 100%	68 100%	11 100%	173 100%				11 100%		189 100%	122 100%	74 100%	72 100%	126 100%	
MEAN	8.29	8.34	7.43	8.11	8.36	8.37	8.33	9.09	8.34				8.60		8.33	8.46	8.11	8.25	8.31	
p stat_(*=Sig @ p<=.05)		.722	~	~	~.725	.851	~	~	~	~	~	~	~	~	~	~.165	.394	.872	.855	

[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?

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER	
	COPA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER #	AS- IAN ##	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC##	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE
Q24 YES	103 41%	1933 40%	2 17%	11 29%	11 33%	34 51%	39 48%	5 36%	87 41%	~	~	~	~	4 29%	99 42%	53 33%*	48 55%*	41 41%	62 42%
NO	146 59%	2928 60%	10 83%	27 71%	22 67%	33 49%	43 52%	9 64%	126 59%	~	~	~	~	10 71%	138 58%	106 67%*	40 45%*	59 59%	87 58%
NOT ANSWERED	8	221	1				1		2						2	2			2
VALID CASES	249	4861	12	38	33	67	82	14	213					14	237	159	88	100	149
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%



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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			PAN-	&	POOR	&	FE-		
									WHTE	#	##	#	##	##	TI	IC##	IC	GOOD	POOR	MALE	MALE
Q25																					
NEVER	5	110		1	1	1	2		5						5	2	3	3	2		
	5%	6%		~ 9%~	9%~	3%~	5%~		6%~						~ 5%~	4%~	6%~	8%~	3%~		
SOMETIMES	20	323	1	3	4	9	3		18						20	9	10	8	12		
	20%	17%	50%~	27%~	36%~	27%~	8%~		21%~						~ 21%~	17%~	21%~	20%~	20%~		
USUALLY	18	543		2	1	5	8	2	15						18	12	6	8	10		
	18%	29%*		~ 18%~	9%~	15%~	21%~	40%~	17%~						~ 19%~	23%~	13%~	20%~	16%~		
ALWAYS	58	893	1	5	5	18	25	3	49						54	29	28	21	37		
	57%	48%*	50%~	45%~	45%~	55%~	66%~	60%~	56%~						~ 56%~	56%~	60%~	53%~	61%~		
#ALWAYS + USUALLY (NET)	76	1436	1	7	6	23	33	5	64						72	41	34	29	47		
	75%	77%	50%~	64%~	55%~	70%~	87%~	100%~	74%~						~ 74%~	79%~	72%~	73%~	77%~		
TOP BOX SCORE	58	893	1	5	5	18	25	3	49						54	29	28	21	37		
	57%	48%*	50%~	45%~	45%~	55%~	66%~	60%~	56%~						~ 56%~	56%~	60%~	53%~	61%~		
NOT ANSWERED	2	64				1	1								2	1	1	1	1		
VALID CASES	101	1869	2	11	11	33	38	5	87						97	52	47	40	61		
NUMBER OF RESPONDENTS	103	1933	2	11	11	34	39	5	87						99	53	48	41	62		
	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?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2																			
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	AFR-	AS-	HAW/	IND/			HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	#	##	#	##	##	TI	IC##	IC	GOOD	POOR		
Q26																					
NONE	3	77				1	2		3						3		1	2	2	1	
	3%	4%	~	~	~	3%	5%	~	3%	~	~	~	~	~	~	3%	2%	4%	5%	2%	
1 SPECIALIST	55	991	2	7	6	16	21	2	46					2	53	35	18	22	33		
	55%	53%	100%	64%	55%	50%	55%	40%	53%	~	~	~	~	~	50%	~	55%	69%	38%	56%	54%
2	22	498		2		10	9	1	21						21	8	14	8	14		
	22%	27%	~	18%	~	31%	24%	20%	24%	~	~	~	~	~	~	22%	16%	30%	21%	23%	
3	13	191		2	2	3	5	1	12					1	13	3	10	5	8		
	13%	10%	~	18%	18%	9%	13%	20%	14%	~	~	~	~	~	~	14%	6%	21%	13%	13%	
4	3	64			1	1	1		2					1	3	2	1		3		
	3%	3%	~	~	9%	3%	3%	~	2%	~	~	~	~	~	~	3%	4%	2%	~	5%	
5 OR MORE SPECIALISTS	4	45			2	1		1	2						3	2	2	2	2		
	4%	2%	~	~	18%	3%	~	20%	2%	~	~	~	~	~	~	3%	4%	4%	5%	3%	
NOT ANSWERED	3	67				2	1		1						3	2	1	2	1		
VALID CASES	100	1866	2	11	11	32	38	5	86					4	96	51	47	39	61		
NUMBER OF RESPONDENTS	103	1933	2	11	11	34	39	5	87					4	99	53	48	41	62		
	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?

	BANT OT1	BANT OT2	AGE					RACE						ETHNICITY	HEALTH STATUS		GENDER			
	COPA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC##	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q27 WORST SPECIALIST POSSIBLE	1 1%	13 0.7%	~	~	~	~	1 3%	~	~	~	~	~	~	~	~	1 1%	~	1 2%	1 3%	~
01	1 1%	14 0.8%	~	1 9%	~	~	~	~	~	~	~	~	~	~	~	1 1%	1 2%	~	1 3%	~
02		12 0.7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03	1 1%	27 2%	~	~	1 9%	~	~	~	~	~	~	~	~	~	~	1 1%	1 2%	~	~	1 2%
04	2 2%	22 1%	~	1 9%	~	1 3%	~	~	~	~	~	~	~	~	~	2 2%	~	2 4%	1 3%	1 2%
05	8 8%	83 5%	1 50%	~	2 18%	1 3%	4 11%	~	~	~	~	~	~	~	~	8 9%	6 12%	2 4%	3 8%	5 8%
06	4 4%	68 4%	~	~	1 9%	3 10%	~	~	~	~	~	~	~	~	~	4 4%	1 2%	3 7%	~	4 7%
07	7 7%	157 9%	~	1 9%	2 18%	4 13%	~	~	~	~	~	~	1 25%	~	~	7 8%	4 8%	3 7%	2 5%	5 8%
08	21 22%	318 18%	~	3 27%	2 18%	8 26%	4 11%	3 60%	~	~	~	~	~	1 25%	~	18 19%	11 22%	8 18%	10 27%	11 18%
09	17 18%	315 18%	1 50%	1 9%	2 18%	6 19%	7 19%	~	~	~	~	~	~	~	~	16 17%	10 20%	7 16%	8 22%	9 15%
BEST SPECIALIST POSSIBLE	35 36%	742 42%	~	4 36%	1 9%	8 26%	20 56%	2 40%	~	~	~	~	~	2 50%	~	35 38%	16 32%	19 42%	11 30%	24 40%
#8-10 (NET)	73 75%	1375 78%	1 50%	8 73%	5 45%	22 71%	31 86%	5 100%	~	~	~	~	~	3 75%	~	69 74%	37 74%	34 76%	29 78%	44 73%

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?

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER			
	COPA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER PAC ALSK ##	OTH MUL-TI ##	HIS-PAN-IC##	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE-MALE
9-10 (NET)	52 54%	1057 60%	1 50%~	5 45%~	3 27%~	14 45%~	27 75%~	2 40%~	47 57%~	~	~	~	~	~	2 50%~	51 ~ 55%~	26 52%~	26 58%~	19 51%~	33 55%~	
NOT ANSWERED		18																			
VALID CASES	97	1771	2	11	11	31	36	5	83				4		93	50	45		37	60	
NUMBER OF RESPONDENTS	97 100%	1789 100%	2 100%	11 100%	11 100%	31 100%	36 100%	5 100%	83 100%				4 100%		93 100%	50 100%	45 100%		37 100%	60 100%	
MEAN	8.21	8.43	7.00	7.73	7.00	8.16	8.75	8.80	8.18				8.75		8.20	8.12	8.31		8.00	8.33	
p stat_(*=Sig @ p<=.05)		.280	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

[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?

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER		
	COPA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE #	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER HAW/ IND/ PAC ALSK #	OTHR #	MUL-TI #	HIS-IC#	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE
Q28 YES	47 19%	886 18%	3 25%~	10 26%~	8 24%~	10 15%	15 18%	1 7%~	40 19%~	~	~	~	~	~	4 29%~	45 19%~	30 19%	17 19%	19 19%	28 19%
NO	202 81%	3943 82%	9 75%~	28 74%~	25 76%~	57 85%	67 82%	13 93%~	173 81%~	~	~	~	~	~	10 71%~	192 81%~	129 81%	71 81%	80 81%	122 81%
NOT ANSWERED	8	253	1				1		2							2	2		1	1
VALID CASES	249	4829	12	38	33	67	82	14	213					14	237	159	88	99	150	
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	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?

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	COPA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-#	AS-IAN##	NATV ILND#	AMER IND/PAC ALSK##	OTHR##	MUL-TI	HIS-PAN-IC##	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE-MALE
Q29 NEVER	5 11%	78 9%	1 ~10%	1 13%	1 10%	2 14%		3 8%						2 50%		5 11%	4 13%	1 6%	3 17%	2 7%	
SOMETIMES	12 26%	290 33%	2 67%	3 30%	3 38%	2 20%	1 7%	1 100%	9 23%					1 25%		11 25%	8 27%	4 25%	3 17%	9 32%	
USUALLY	18 39%	294 34%	1 33%	6 60%	2 25%	5 50%	4 29%	17 44%						1 25%		17 39%	9 30%	9 56%	8 44%	10 36%	
ALWAYS	11 24%	204 24%			2 25%	2 20%	7 50%	10 26%								11 25%	9 30%	2 13%	4 22%	7 25%	
#ALWAYS + USUALLY (NET)	29 63%	498 58%	1 33%	6 60%	4 50%	7 70%	11 79%	27 69%						1 25%		28 64%	18 60%	11 69%	12 67%	17 61%	
TOP BOX SCORE	11 24%	204 24%			2 25%	2 20%	7 50%	10 26%								11 25%	9 30%	2 13%	4 22%	7 25%	
NOT ANSWERED	1	20					1	1								1		1	1		
VALID CASES	46	866	3	10	8	10	14	1	39					4		44	30	16	18	28	
NUMBER OF RESPONDENTS	47	886	3	10	8	10	15	1	40					4		45	30	17	19	28	
	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?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			&	&	FE-			
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	POOR	MALE	MALE
									#	##	#	##	##	TI	IC##	IC	GOOD	POOR	MALE	MALE
Q30																				
YES	61	1269	3	13	7	21	15	2	58					1	59	40	21	28	33	
	25%	26%	23%~	35%~	21%~	32%	18%	15%~	27%~	~	~	~	~	8%~	~ 25%~	25%	24%	28%	22%	
NO	186	3524	10	24	26	45	67	11	155					12	176	118	66	72	114	
	75%	74%	77%~	65%~	79%~	68%	82%	85%~	73%~	~	~	~	~	92%~	~ 75%~	75%	76%	72%	78%	
NOT ANSWERED	10	289		1		1	1	1	2					1	4	3	1		4	
VALID CASES	247	4793	13	37	33	66	82	13	213					13	235	158	87	100	147	
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER		
	OT1	OT2												ITY	STATUS				
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/		NOT	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	HIS-	HIS-	GOOD		
									AMER		ILND	NATV		TI	PAN-	PAN-	&		
									WHTE	#	##	#	##	#	IC##	IC	&		
																	GOOD		
																	POOR		
																	MALE		
																	MALE		
Q31																			
NEVER	3	39		1		2			2					1	3	3	2	1	
	5%	3%		~ 8%~		~ 10%~			4%~					~100%~	~ 5%~	8%~	~ 7%~	3%~	
SOMETIMES	13	212		5	2	3	2	1	13						13	10	3	4	9
	22%	17%		~ 38%~	29%~	15%~	13%~	50%~	23%~						~ 22%~	26%~	14%~	14%~	28%~
USUALLY	18	361		1	3	3	5	6	18						18	10	8	7	11
	30%	29%		33%~	23%~	43%~	25%~	40%~	32%~						~ 31%~	26%~	38%~	25%~	34%~
ALWAYS	26	619		2	4	2	10	7	24						24	16	10	15	11
	43%	50%		67%~	31%~	29%~	50%~	47%~	42%~						~ 41%~	41%~	48%~	54%~	34%~
#ALWAYS + USUALLY (NET)	44	980		3	7	5	15	13	42						42	26	18	22	22
	73%	80%		100%~	54%~	71%~	75%~	87%~	74%~						~ 72%~	67%~	86%~	79%~	69%~
TOP BOX SCORE	26	619		2	4	2	10	7	24						24	16	10	15	11
	43%	50%		67%~	31%~	29%~	50%~	47%~	42%~						~ 41%~	41%~	48%~	54%~	34%~
NOT ANSWERED	1	38				1			1						1	1			1
VALID CASES	60	1231		3	13	7	20	15	57					1	58	39	21	28	32
NUMBER OF RESPONDENTS	61	1269		3	13	7	21	15	58					1	59	40	21	28	33
	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?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2																		
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	AFR-	AS-	HAW/	IND/			HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	#	##	#	##	##	TI	IC##	IC	GOOD	POOR	
																			MALE	MALE
Q32																				
NEVER		16																		
		1%																		
SOMETIMES	3	61		1	1	1			2					1		3	2	1	2	1
	5%	5%		~ 8%	~ 14%	~ 5%			~ 4%					~ 100%		~ 5%	~ 5%	~ 5%	~ 7%	~ 3%
USUALLY	11	224		5	2	3	1		11							11	9	2	4	7
	19%	18%		~ 38%	~ 29%	~ 15%	~ 7%		~ 20%							~ 19%	~ 24%	~ 10%	~ 15%	~ 22%
ALWAYS	45	929	3	7	4	16	13	2	43							43	27	18	21	24
	76%	76%	100%	~ 54%	~ 57%	~ 80%	~ 93%	~ 100%	~ 77%							~ 75%	~ 71%	~ 86%	~ 78%	~ 75%
#ALWAYS + USUALLY (NET)	56	1153	3	12	6	19	14	2	54							54	36	20	25	31
	95%	94%	100%	~ 92%	~ 86%	~ 95%	~ 100%	~ 100%	~ 96%							~ 95%	~ 95%	~ 95%	~ 93%	~ 97%
TOP BOX SCORE	45	929	3	7	4	16	13	2	43							43	27	18	21	24
	76%	76%	100%	~ 54%	~ 57%	~ 80%	~ 93%	~ 100%	~ 77%							~ 75%	~ 71%	~ 86%	~ 78%	~ 75%
NOT ANSWERED	2	39				1	1		2							2	2		1	1
VALID CASES	59	1230	3	13	7	20	14	2	56					1		57	38	21	27	32
NUMBER OF RESPONDENTS	61	1269	3	13	7	21	15	2	58					1		59	40	21	28	33
	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?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER		
	OT1	OT2												ITY	STATUS				
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER								
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	EX &				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR		
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC##	IC	&	&	
									WHTE	#	##	#	##	##	TI		GOOD	POOR	
																	MALE	MALE	
Q33																			
YES	93	1787	4	18	10	25	30	4	76					7	86	64	28	42	51
	38%	37%	36%~	47%~	31%~	38%	37%	29%~	36%~	~	~	~	~	~ 50%~	~ 37%~	41%	32%	43%	35%
NO	152	2987	7	20	22	41	51	10	134					7	148	91	60	56	96
	62%	63%	64%~	53%~	69%~	62%	63%	71%~	64%~	~	~	~	~	~ 50%~	~ 63%~	59%	68%	57%	65%
NOT ANSWERED	12	308	2		1	1	2		5						5	6		2	4
VALID CASES	245	4774	11	38	32	66	81	14	210					14	234	155	88	98	147
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2																		
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/				HIS-	HIS-	GOOD	FAIR	
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	TI	PAN-	PAN-	&	&	
									WHTE	#	##	#	##	##	TI	IC##	IC	GOOD	POOR	
																			MALE	
																			MALE	
PQ34																				
NEVER	9	91		1		6	2		6					2		8	6	3	5	4
	4%	2%		~ 3%		~ 9%*	2%		3%					~ 14%		~ 3%	4%	3%	5%	3%
SOMETIMES	17	301		3	5	3	4	1	13					1		16	10	7	7	10
	7%	6%		~ 8%	~ 16%	~ 5%	5%	7%	6%					~ 7%		~ 7%	6%	8%	7%	7%
USUALLY	34	677		2	11	2	4	13	27					3		31	24	9	11	23
	14%	14%		18%	~ 29%	~ 6%	6%*	16%	7%	13%				~ 21%		~ 13%	~ 16%	10%	11%	16%
ALWAYS	184	3637		9	23	25	52	62	12	163				8		178	114	69	74	110
	75%	77%		82%	~ 61%	~ 78%	~ 80%	77%	86%	78%				~ 57%		~ 76%	74%	78%	76%	75%
#ALWAYS + USUALLY (NET)	218	4314		11	34	27	56	75	13	190				11		209	138	78	85	133
	89%	92%		100%	~ 89%	~ 84%	~ 86%	93%	93%	91%				~ 79%		~ 90%	~ 90%	89%	88%	90%
TOP BOX SCORE	184	3637		9	23	25	52	62	12	163				8		178	114	69	74	110
	75%	77%		82%	~ 61%	~ 78%	~ 80%	77%	86%	78%				~ 57%		~ 76%	74%	78%	76%	75%
NOT ANSWERED	1	68				1			1							1	1		1	
VALID CASES	244	4706		11	38	32	65	81	14	209				14		233	154	88	97	147
NUMBER OF RESPONDENTS	245	4774		11	38	32	66	81	14	210				14		234	155	88	98	147
	100%	100%		100%	100%	100%	100%	100%	100%	100%				100%		100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC-ITY	HEALTH STATUS		GENDER			
	COPA TOT ADLTT	OHP TOT ADLTT	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 ILND #	AMER IND/ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC##	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	MALE	FE-MALE
Q35 WORST HEALTH PLAN POSSIBLE	1 0.4%	33 0.7%	~	~	~	1 2%	~	~	~	~	~	~	~	~	~	1 ~0.4%	1 ~0.7%	~	1 1%	~
01	2 0.9%	31 0.7%	~	1 3%	1 3%	~	~	1 ~0.5%	~	~	~	~	~	1 7%	~	2 ~0.9%	1 ~0.7%	1 1%	1 1%	1 0.7%
02	3 1%	51 1%	1 8%	1 3%	1 3%	~	~	3 2%	~	~	~	~	~	~	~	3 1%	2 1%	1 1%	~	3 2%
03	2 0.9%	61 1%	~	1 3%	~	~	~	1 ~0.5%	~	~	~	~	~	~	~	1 ~0.4%	1 ~0.7%	1 1%	~	2 1%
04	6 3%	105 2%	1 8%	~	~	~	3 4%	5 3%	~	~	~	~	~	~	~	6 3%	2 1%	4 5%	2 2%	4 3%
05	19 8%	381 8%	1 8%	4 11%	3 10%	6 9%	4 5%	1 8%	15 8%	~	~	~	~	1 7%	~	17 8%	5 3%	14 17%	7 7%	12 9%
06	15 6%	291 6%	1 8%	4 11%	3 10%	5 8%	2 3%	~	13 7%	~	~	~	~	1 7%	~	14 6%	10 7%	5 6%	6 6%	9 6%
07	27 11%	602 13%	1 8%	7 19%	5 16%	7 11%	6 8%	1 8%	23 12%	~	~	~	~	1 7%	~	25 11%	19 13%	7 8%	9 10%	18 13%
08	40 17%	920 20%	2 15%	7 19%	5 16%	14 22%	9 12%	3 25%	34 17%	~	~	~	~	2 14%	~	38 17%	28 19%	12 14%	21 22%	19 13%
09	47 20%	736 16%	3 23%	6 17%	4 13%	13 20%	18 24%	2 17%	41 21%	~	~	~	~	3 21%	~	46 21%	34 23%	12 14%	18 19%	29 21%
BEST HEALTH PLAN POSSIBLE	73 31%	1385 30%	3 23%	5 14%	9 29%	18 28%	34 45%*	4 33%	64 32%	~	~	~	~	5 36%	~	71 32%	46 31%	27 32%	29 31%	44 31%
#8-10 (NET)	160 68%	3041 66%	8 62%	18 50%	18 58%	45 70%	61 80%*	9 75%	139 70%	~	~	~	~	10 71%	~	155 69%	108 72%	51 61%	68 72%	92 65%

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?

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER		
	COPA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER IND/ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC##	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
9-10 (NET)	120 51%	2121 46%	6 46%~	11 31%~	13 42%~	31 48%	52 68%*	6 50%~	105 53%~	~	~	~	~	~	8 57%~	117 ~ 52%~	80 54%	39 46%	47 50%	73 52%
NOT ANSWERED	22	486		2	2	3	7	2	15						15	15	12	4	6	10
VALID CASES	235	4596	13	36	31	64	76	12	200					14	224	149	84	94	141	
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	
MEAN	8.02	7.93	7.46	7.19	7.65	8.09	8.68	8.08	8.13					8.00	8.07	8.21	7.68	8.12	7.96	
p stat_(*=Sig @ p<=.05)	.481		~	~	~.731	.000*	~	~	~	~	~	~	~	~	~	~.060	.060	.561	.561	

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?

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER	
	COPA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER #	AS- IAN ##	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC##	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE
Q35A YES	28 11%	599 12%	1 ~	1 3%	11 3%	11 17%	3 14%	23 11%	~	~	~	~	~	1 7%	27 ~	14 9%	13 15%	11 11%	17 12%
NO	217 89%	4210 88%	13 100%	37 97%	32 97%	54 83%	70 86%	9 75%	188 89%	~	~	~	~	13 93%	208 ~	143 91%	73 85%	88 89%	129 88%
NOT ANSWERED	12	273				2	2	2	4						4	4	2	1	5
VALID CASES	245	4809	13	38	33	65	81	12	211					14	235	157	86	99	146
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER						
	OT1	OT2	18	25	35	45	55	65	BLCK	AS-	NATV	AMER				EX &								
	COPA	OHP	TO	TO	TO	TO	TO	AND	OR	AFR-	IAN	ILND	NATV	ALSK	OTH	MUL-	HIS-	HIS-	NOT	VERY	GOOD	FAIR	FE-	
	TOT	TOT	24	34	44	54	64	OVER	WHTE	#	##	#	##	##	##	TI	IC##	IC	GOOD	&	POOR	POOR	MALE	MALE
Q35B NEVER	6	90				4	1	1	4								6		3	3	4	2		
	24%	16%	~	~	~	36%	10%	50%	19%	~	~	~	~	~	~	~	~	25%	25%	25%	40%	13%	~	~
SOMETIMES		83																						
		15%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
USUALLY	3	129				2	1		2						1		3		2	1	1	2		
	12%	23%	~	~	~	20%	50%		10%	~	~	~	~	~	~100%		~	13%	17%	8%	10%	13%	~	~
ALWAYS	16	262		1		7	7		15								15		7	8	5	11		
	64%	46%	~	100%	~	64%	70%	~	71%	~	~	~	~	~	~	~	~	63%	58%	67%	50%	73%	~	~
#ALWAYS + USUALLY (NET)	19	391		1		7	9	1	17						1		18		9	9	6	13		
	76%	69%	~	100%	~	64%	90%	50%	81%	~	~	~	~	~	~100%		~	75%	75%	75%	60%	87%	~	~
TOP BOX SCORE	16	262		1		7	7		15								15		7	8	5	11		
	64%	46%	~	100%	~	64%	70%	~	71%	~	~	~	~	~	~	~	~	63%	58%	67%	50%	73%	~	~
NOT ANSWERED	3	35			1		1	1	2								3		2	1	1	2		
VALID CASES	25	564		1		11	10	2	21						1		24		12	12	10	15		
NUMBER OF RESPONDENTS	28	599		1	1	11	11	3	23						1		27		14	13	11	17		
	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?

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER		
	COPA 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 ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC#	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q35C YES	39 16%	759 16%	2 15%~	3 8%~	5 15%~	15 23%	10 13%	2 17%~	36 17%~	~	~	~	~	~	~	38 ~ 16%~	13 8%*	25 29%*	13 13%	26 18%
NO	206 84%	3989 84%	11 85%~	35 92%~	28 85%~	51 77%	70 88%	10 83%~	175 83%~	~	~	~	~	14 ~100%~	197 ~ 84%~	145 92%*	60 71%*	85 87%	121 82%	
NOT ANSWERED	12	334				1	3	2	4						4	3	3	2	4	
VALID CASES	245	4748	13	38	33	66	80	12	211					14	235	158	85	98	147	
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151	
	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?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER	
	OT1	OT2																	
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &			
	TOT	TOT	TO	TO	TO	TO	TO	AND	AFR-	AS-	HAW/	IND/			NOT	VERY	GOOD	FAIR	
	ADLT	ADLT	24	34	44	54	64	OVER	AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR	
									#	##	#	##	##	TI	IC##	IC	GOOD	POOR	
									WHTE									MALE	
																		MALE	
Q35D																			
NEVER	6	121			2	2	1		5						6	2	4	2	4
	17%	17%	~	~	40%	14%	11%	~	15%	~	~	~	~	~	~	18%	17%	18%	18%
SOMETIMES	4	129		1	1	2			4						4		4		4
	11%	18%	~	50%	20%	14%	~	~	12%	~	~	~	~	~	~	12%	~	18%	~
USUALLY	8	170	1	1	1	3	2		8						8	3	5	3	5
	23%	23%	50%	50%	20%	21%	22%	~	24%	~	~	~	~	~	~	24%	25%	23%	27%
ALWAYS	17	308	1		1	7	6	1	16						16	7	9	6	11
	49%	42%	50%	~	20%	50%	67%	100%	48%	~	~	~	~	~	~	47%	58%	41%	55%
#ALWAYS + USUALLY (NET)	25	478	2	1	2	10	8	1	24						24	10	14	9	16
	71%	66%	100%	50%	40%	71%	89%	100%	73%	~	~	~	~	~	~	71%	83%	64%	82%
TOP BOX SCORE	17	308	1		1	7	6	1	16						16	7	9	6	11
	49%	42%	50%	~	20%	50%	67%	100%	48%	~	~	~	~	~	~	47%	58%	41%	55%
NOT ANSWERED	4	31		1		1	1	1	3						4	1	3	2	2
VALID CASES	35	728	2	2	5	14	9	1	33						34	12	22	11	24
NUMBER OF RESPONDENTS	39	759	2	3	5	15	10	2	36						38	13	25	13	26
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%

[ASKED IF Q35C = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	PAN-	PAN-	&	&	FE-		
									WHTE	#	##	#	##	##	TI	IC##	IC	GOOD	POOR	MALE	MALE
Q35E																					
ALWAYS	10 4%	178 4%	1 ~	1 3%~	4 3%~	4 6%	4 5%	8 ~	4%~	~	~	~	~	~	7%~	9 ~	3 4%~	7 2%	5 8%*	5 5%	3 3%
USUALLY	4 2%	193 4%*	3 ~	1 8%~	1 3%~	~	~	3 ~	1%~	~	~	~	~	~	~	3 ~	3 2%	1 1%	2 2%	2 1%	1 1%
SOMETIMES	47 19%	804 17%	3 23%~	5 14%~	9 27%~	12 18%	14 18%	3 21%~	38 18%~	~	~	~	~	~	2 14%~	44 ~	29 19%~	18 18%	19 21%	28 19%	19 19%
NEVER	184 75%	3575 75%	10 77%~	28 76%~	22 67%~	50 76%	62 78%	11 79%~	161 77%~	~	~	~	~	~	11 79%~	178 ~	122 76%~	61 78%	73 70%	111 74%	111 76%
#NEVER + SOMETIMES (NET)	231 94%	4379 92%	13 100%~	33 89%~	31 94%~	62 94%	76 95%	14 100%~	199 95%~	~	~	~	~	~	13 93%~	222 ~	151 95%~	79 96%	139 91%	139 93%	139 95%
TOP BOX SCORE	184 75%	3575 75%	10 77%~	28 76%~	22 67%~	50 76%	62 78%	11 79%~	161 77%~	~	~	~	~	~	11 79%~	178 ~	122 76%~	61 78%	73 70%	111 74%	111 76%
NOT ANSWERED	12	332	1		1	3		5							5	4	1		1	5	
VALID CASES	245	4750	13	37	33	66	80	14	210					14	234	157	87		99	146	
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88		100	151	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%		100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			PAN-	PAN-	&	&			
									WHT	#	##	#	##	##	TI	IC##	IC	GOOD	POOR	MALE	MALE
Q35F																					
ALWAYS	6	66		3		3			5							5	2	4	3	3	
	2%	1%		~ 8%		~ 5%			2%							~ 2%	1%	5%	3%	2%	
USUALLY	4	106			2		2		3					1		4	1	3	2	2	
	2%	2%			~ 6%		~ 2%		1%					~ 7%		~ 2%	0.6%	3%	2%	1%	
SOMETIMES	29	672	4	4	4	5	11	1	25					1		27	16	13	10	19	
	12%	14%	31%	11%	12%	8%	14%	7%	12%					~ 7%		~ 11%	10%	15%	10%	13%	
NEVER	207	3911	9	31	27	58	68	13	178					12		199	138	68	84	123	
	84%	82%	69%	82%	82%	88%	84%	93%	84%					~ 86%		~ 85%	88%*	77%*	85%	84%	
#NEVER + SOMETIMES (NET)	236	4583	13	35	31	63	79	14	203					13		226	154	81	94	142	
	96%	96%	100%	92%	94%	95%	98%	100%	96%					~ 93%		~ 96%	98%	92%	95%	97%	
TOP BOX SCORE	207	3911	9	31	27	58	68	13	178					12		199	138	68	84	123	
	84%	82%	69%	82%	82%	88%	84%	93%	84%					~ 86%		~ 85%	88%*	77%*	85%	84%	
NOT ANSWERED	11	327				1	2		4							4	4		1	4	
VALID CASES	246	4755	13	38	33	66	81	14	211					14		235	157	88	99	147	
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14		239	161	88	100	151	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%		100%	100%	100%	100%	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?

	BANT OT1	BANT OT2	AGE					RACE						ETHNICITY	HEALTH STATUS		GENDER		
	COPA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER IND/ALSK ##	OTHR ##	MULTI TI	HIS-PAN-IC #	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	MALE
Q35G ALWAYS	3 1%	55 1%	1 ~	3 3%	1 ~	1 2%	1 1%	3 1%	~	~	~	~	~	~	3 1%	1 0.6%	2 2%	~	3 2%
USUALLY	2 0.8%	67 1%	1 ~	3 3%	~	~	1 1%	2 1%	~	~	~	~	~	~	2 0.9%	1 0.6%	1 1%	2 2%	~
SOMETIMES	24 10%	487 10%	2 15%	4 11%	5 15%	7 11%	6 8%	21 10%	~	~	~	~	2 14%	23 10%	11 7%	13 15%	7 7%	17 12%	
NEVER	215 88%	4149 87%	11 85%	32 84%	28 85%	57 88%	72 90%	14 100%	183 88%	~	~	~	~	12 86%	205 88%	143 92%*	71 82%*	89 91%	126 86%
#NEVER + SOMETIMES (NET)	239 98%	4636 97%	13 100%	36 95%	33 100%	64 98%	78 98%	14 100%	204 98%	~	~	~	~	14 100%	228 98%	154 99%	84 97%	96 98%	143 98%
TOP BOX SCORE	215 88%	4149 87%	11 85%	32 84%	28 85%	57 88%	72 90%	14 100%	183 88%	~	~	~	~	12 86%	205 88%	143 92%*	71 82%*	89 91%	126 86%
NOT ANSWERED	13	324				2	3	6							6	5	1	2	5
VALID CASES	244	4758	13	38	33	65	80	14	209					14	233	156	87	98	146
NUMBER OF RESPONDENTS	257 100%	5082 100%	13 100%	38 100%	33 100%	67 100%	83 100%	14 100%	215 100%					14 100%	239 100%	161 100%	88 100%	100 100%	151 100%

Q35H IN THE LAST 6 MONTHS, DID YOU FEEL YOU COULD TRUST A DOCTOR OR OTHER HEALTH PROVIDER WITH YOUR MEDICAL CARE?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	VERY	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	PAN-	PAN-	&	&	FE-	
									AMER					TI	IC##	IC	GOOD	POOR	MALE	MALE
Q35H																				
#YES DEFINITELY	169	3305	6	23	20	54	54	12	145					9	164	115	53	64	105	
	69%	70%	46%~	61%~	65%~	82%*	67%	86%~	69%~	~	~	~	~	~ 64%~	~ 70%~	74%	61%*	65%	72%	
YES SOMEWHAT	54	1110	5	10	9	9	18	2	47					4	51	31	23	25	29	
	22%	24%	38%~	26%~	29%~	14%*	22%	14%~	22%~	~	~	~	~	~ 29%~	~ 22%~	20%	26%	26%	20%	
NO	21	300	2	5	2	3	9		18					1	19	10	11	9	12	
	9%	6%	15%~	13%~	6%~	5%	11%	~	9%~	~	~	~	~	~ 7%~	~ 8%~	6%	13%	9%	8%	
NOT ANSWERED	13	367			2	1	2		5						5	5	1	2	5	
VALID CASES	244	4715	13	38	31	66	81	14	210					14	234	156	87	98	146	
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	

Q35I A REGULAR DENTIST IS ONE YOU WOULD GO TO FOR CHECK-UPS AND CLEANINGS OR WHEN YOU HAVE A CAVITY OR TOOTH PAIN. DO YOU HAVE A REGULAR DENTIST?

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER			
	COPA 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 ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC#	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE
Q35I YES	154 62%	2797 58%	7 54%~	25 66%~	20 63%~	44 66%	48 59%	7 54%~	133 62%~	~	~	~	~	7 50%~	146 ~ 62%~	106 67%*	46 53%*	55 56%	99 67%		
NO	93 38%	1986 42%	6 46%~	13 34%~	12 38%~	23 34%	33 41%	6 46%~	80 38%~	~	~	~	~	7 50%~	90 ~ 38%~	52 33%*	41 47%*	44 44%	49 33%		
NOT ANSWERED	10	299			1		2	1	2						3	3	1	1	3		
VALID CASES	247	4783	13	38	32	67	81	13	213					14	236	158	87	99	148		
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%		

Q35J IN THE LAST 6 MONTHS, DID YOU GO TO A DENTIST'S OFFICE OR CLINIC FOR CARE?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK				&	&			
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	POOR	FE-	
									#	##	#	##	##	TI	IC##	IC	GOOD	POOR	MALE	MALE
Q35J																				
YES	104	1919	2	14	13	34	35	4	88					7	99	71	32	37	67	
	42%	40%	15%~	37%~	39%~	51%	42%	31%~	41%~	~	~	~	~	~ 50%~	~ 42%~	44%	36%	37%	45%	
NO	145	2885	11	24	20	33	48	9	127					7	139	89	56	63	82	
	58%	60%	85%~	63%~	61%~	49%	58%	69%~	59%~	~	~	~	~	~ 50%~	~ 58%~	56%	64%	63%	55%	
NOT ANSWERED	8	278						1							1	1			2	
VALID CASES	249	4804	13	38	33	67	83	13	215					14	238	160	88	100	149	
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	

Q35K IN THE LAST 6 MONTHS, HOW OFTEN DID THE DENTISTS OR DENTAL STAFF EXPLAIN WHAT THEY WERE DOING WHILE TREATING YOU?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER		
	OT1	OT2												ITY	STATUS	MALE	MALE		
	COPA	OHP	18	25	35	45	55	65	BLCK	AS-	NATV	AMER		NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	IAN	HAW/	IND/		HIS-	VERY	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-		PAC	ALSK		PAN-	&	POOR			
									AMER		ILND	NATV	OTHR	MUL-	GOOD	POOR	MALE	MALE	
									WHTE	#	##	#	##	##	TI	IC##	IC		
Q35K																			
NEVER	3	40		1		1	1		2					1	3	2	1	1	2
	3%	2%		~ 7%		~ 3%	3%		2%					~ 14%	~ 3%	3%	3%	3%	3%
SOMETIMES	10	150		2	3	2	1	1	6					2	9	8	2	3	7
	10%	8%		~ 14%	23%	6%	3%	33%	7%					~ 29%	~ 9%	11%	6%	8%	11%
USUALLY	19	356		2	10	6			18						18	11	7	8	11
	18%	19%		~ 15%	29%	17%			20%						~ 18%	16%	22%	22%	17%
ALWAYS	71	1310		2	11	8	21	27	2	62				4	68	49	22	25	46
	69%	71%		100%	79%	62%	62%	77%	67%	70%				~ 57%	~ 69%	70%	69%	68%	70%
#ALWAYS + USUALLY (NET)	90	1666		2	11	10	31	33	2	80				4	86	60	29	33	57
	87%	90%		100%	79%	77%	91%	94%	67%	91%				~ 57%	~ 88%	86%	91%	89%	86%
TOP BOX SCORE	71	1310		2	11	8	21	27	2	62				4	68	49	22	25	46
	69%	71%		100%	79%	62%	62%	77%	67%	70%				~ 57%	~ 69%	70%	69%	68%	70%
NOT ANSWERED	1	63						1							1	1			1
VALID CASES	103	1856		2	14	13	34	35	3	88				7	98	70	32	37	66
NUMBER OF RESPONDENTS	104	1919		2	14	13	34	35	4	88				7	99	71	32	37	67
	100%	100%		100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%



Q35L IF YOU TRIED TO GET AN APPOINTMENT FOR YOURSELF WITH A DENTIST WHO SPECIALIZES IN A PARTICULAR TYPE OF DENTAL CARE (SUCH AS ROOT CANALS OR GUM DISEASE) IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT AS SOON AS YOU WANTED?

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS			GENDER	
	COPA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC#	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE
Q35L ALWAYS	32 32%	423 22%*	1 13%~	7 39%~	3 25%~	7 24%~	12 41%~	1 33%~	30 38%~	~	~	~	~	~	~	31 33%~	22 33%~	10 30%~	11 31%~	21 32%~
USUALLY	21 21%	375 20%	1 13%~	5 28%~	4 33%~	5 17%~	1 17%~	13 33%~	16%~	~	~	~	~	3 43%~	~	17 18%~	17 25%~	4 12%~	9 26%~	12 18%~
SOMETIMES	18 18%	377 20%	3 38%~	3 17%~	~	9 31%~	2 7%~	1 33%~	15 19%~	~	~	~	~	~	~	16 17%~	10 15%~	8 24%~	6 17%~	12 18%~
NEVER	29 29%	744 39%*	3 38%~	3 17%~	5 42%~	8 28%~	10 34%~	~	22 28%~	~	~	~	~	4 57%~	~	29 31%~	18 27%~	11 33%~	9 26%~	20 31%~
#NEVER + SOMETIMES (NET)	47 47%	1121 58%*	6 75%~	6 33%~	5 42%~	17 59%~	12 41%~	1 33%~	37 46%~	~	~	~	~	4 57%~	~	45 48%~	28 42%~	19 58%~	15 43%~	32 49%~
TOP BOX SCORE	29 29%	744 39%*	3 38%~	3 17%~	5 42%~	8 28%~	10 34%~	~	22 28%~	~	~	~	~	4 57%~	~	29 31%~	18 27%~	11 33%~	9 26%~	20 31%~
5	137	2747	5	20	19	36	50	6	123					7		134	85	51	59	78
NOT ANSWERED	20	416			2	2	4	5	12							12	9	4	6	8
VALID CASES	100	1919	8	18	12	29	29	3	80					7		93	67	33	35	65
NUMBER OF RESPONDENTS	257 100%	5082 100%	13 100%	38 100%	33 100%	67 100%	83 100%	14 100%	215 100%					14 100%		239 100%	161 100%	88 100%	100 100%	151 100%

Q35M IN THE LAST 6 MONTHS, IF YOU NEEDED TO SEE A DENTIST RIGHT AWAY BECAUSE OF A DENTAL EMERGENCY, DID YOU GET TO SEE A DENTIST AS SOON AS YOU WANTED?

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER		
	COPA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER HAW/ IND/ PAC ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC##	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	MALE	FE-MALE
Q35M NEVER	26 25%	695 36%*	1 14%~	2 11%~	6 38%~	8 27%~	8 30%~	20 24%~	~	~	~	~	~	3 50%~	~	26 27%~	16 22%~	10 32%~	10 25%~	16 25%~
SOMETIMES	26 25%	351 18%	3 43%~	6 33%~	3 19%~	8 27%~	4 15%~	1 33%~	20 24%~	~	~	~	~	3 50%~	~	24 25%~	16 22%~	10 32%~	9 23%~	17 27%~
USUALLY	17 17%	351 18%	2 29%~	4 22%~	1 6%~	2 7%~	6 22%~	2 67%~	15 18%~	~	~	~	~	~	~	15 16%~	14 19%~	3 10%~	8 20%~	9 14%~
ALWAYS	34 33%	514 27%	1 14%~	6 33%~	6 38%~	12 40%~	9 33%~	~	30 35%~	~	~	~	~	~	~	31 32%~	26 36%~	8 26%~	13 33%~	21 33%~
#ALWAYS + USUALLY (NET)	51 50%	865 45%	3 43%~	10 56%~	7 44%~	14 47%~	15 56%~	2 67%~	45 53%~	~	~	~	~	~	~	46 48%~	40 56%~	11 35%~	21 53%~	30 48%~
TOP BOX SCORE	34 33%	514 27%	1 14%~	6 33%~	6 38%~	12 40%~	9 33%~	~	30 35%~	~	~	~	~	~	~	31 32%~	26 36%~	8 26%~	13 33%~	21 33%~
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	136	2765	6	20	16	35	50	9	122					7	133	82	53	57	79	
NOT ANSWERED	18	406			1	2	6	2	8					1	10	7	4	3	9	
VALID CASES	103	1911	7	18	16	30	27	3	85					6	96	72	31	40	63	
NUMBER OF RESPONDENTS	257 100%	5082 100%	13 100%	38 100%	33 100%	67 100%	83 100%	14 100%	215 100%					14 100%	239 100%	161 100%	88 100%	100 100%	151 100%	

Q35N USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS EXTREMELY DIFFICULT AND 10 IS EXTREMELY EASY, WHAT NUMBER WOULD YOU USE TO RATE HOW EASY IT WAS FOR YOU TO FIND A DENTIST?

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER			
	COPA TOT ADLTT	OHP TOT ADLTT	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 ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC##	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE	
Q35N EXTREMELY DIFFICULT	20 9%	281 6%	1 8%	6 17%	2 7%	4 6%	5 7%	2 17%	17 9%	~	~	~	~	~	1 8%	~	19 9%	11 7%	9 12%	6 7%	14 10%
01	6 3%	112 3%	1 8%	~	~	3 5%	2 3%	~	6 3%	~	~	~	~	~	~	6 3%	2 1%	4 5%	3 3%	3 2%	
02	5 2%	129 3%	~	~	2 7%	2 3%	1 1%	~	3 2%	~	~	~	~	1 8%	~	5 2%	4 3%	1 1%	2 2%	3 2%	
03	8 3%	164 4%	3 25%	1 3%	1 3%	1 2%	1 1%	~	8 4%	~	~	~	~	~	~	8 4%	5 3%	3 4%	3 3%	5 4%	
04	4 2%	138 3%	~	~	1 3%	1 2%	2 3%	~	4 2%	~	~	~	~	~	~	4 2%	3 2%	1 1%	1 1%	3 2%	
05	28 12%	547 12%	3 25%	3 9%	4 14%	10 16%	8 11%	~	24 12%	~	~	~	~	2 15%	~	25 12%	14 9%	14 18%	13 14%	15 11%	
06	14 6%	230 5%	1 8%	4 11%	3 10%	4 6%	2 3%	~	11 6%	~	~	~	~	1 8%	~	12 6%	10 7%	4 5%	5 5%	9 7%	
07	18 8%	375 8%	~	2 6%	1 3%	7 11%	5 7%	3 25%	14 7%	~	~	~	~	2 15%	~	18 8%	12 8%	6 8%	7 8%	11 8%	
09	52 22%	1161 26%	1 8%	7 20%	4 14%	16 25%	15 20%	4 33%	42 22%	~	~	~	~	1 8%	~	43 20%	32 22%	15 19%	22 24%	25 18%	
EXTREMELY EASY	77 33%	1320 30%	2 17%	12 34%	11 38%	15 24%*	33 45%*	3 25%	66 34%	~	~	~	~	5 38%	~	77 35%	55 37%	21 27%	29 32%	48 35%	
#8-10 (NET)	129 56%	2481 56%	3 25%	19 54%	15 52%	31 49%	48 65%*	7 58%	108 55%	~	~	~	~	6 46%	~	120 55%	87 59%	36 46%*	51 56%	73 54%	
9-10 (NET)	129 56%	2481 56%	3 25%	19 54%	15 52%	31 49%	48 65%*	7 58%	108 55%	~	~	~	~	6 46%	~	120 55%	87 59%	36 46%*	51 56%	73 54%	

Continued

Q35N USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS EXTREMELY DIFFICULT AND 10 IS EXTREMELY EASY, WHAT NUMBER WOULD YOU USE TO RATE HOW EASY IT WAS FOR YOU TO FIND A DENTIST?

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER					
	COPA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER IND/ALSK ##	OTH #	MUL-TI TI	HIS-PAN-IC##	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	FE-MALE	MALE	
88		6																					
NOT ANSWERED	25	619	1	3	4	4	9	2	20					1		22	13	10				9	15
VALID CASES	232	4457	12	35	29	63	74	12	195					13		217	148	78				91	136
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14		239	161	88				100	151
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%		100%	100%	100%				100%	100%
MEAN	7.09	7.14	5.00	6.83	6.97	6.84	7.66	7.25	7.05					7.00		7.08	7.36	6.41				7.16	6.96
p stat_(*=Sig @ p<=.05)		.806	~	~	~.480	.064	~	~	~	~	~	~	~	~	~	~.104	.032*				.768	.493	

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH		GENDER		
	OT1	OT2								BLCK	AS-	NATV	AMER				NOT	EX &	VERY	FE-		
	COPA	OHP	18	25	35	45	55	65	AFR-	IAN	ILND	PAC	ALSK	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR	MALE	MALE	
	TOT	TOT	TO	TO	TO	TO	TO	AND	AMER						TI	IC##	IC	&	&			
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	#	##	#	##	##				GOOD	POOR			
Q36																						
EXCELLENT	26 10%	447 9%	2 15%	3 8%	3 9%	9 14%	8 10%	1 7%	24 11%	~	~	~	~	~	2 14%	26 ~ 11%	26 16%	12 ~ 12%	14 9%			
VERY GOOD	58 23%	1140 24%	4 31%	14 37%	7 21%	14 21%	17 20%	2 14%	51 24%	~	~	~	~	~	2 14%	55 ~ 23%	58 36%	26 ~ 26%	32 21%			
GOOD	77 31%	1676 35%	2 15%	11 29%	15 45%	19 29%	22 27%	7 50%	63 29%	~	~	~	~	~	6 43%	74 ~ 31%	77 48%	31 ~ 31%	46 31%			
FAIR	69 28%	1110 23%	4 31%	9 24%	6 18%	17 26%	30 36%*	2 14%	61 28%	~	~	~	~	~	3 21%	65 ~ 27%	69 ~ 78%*	22 22%	47 32%			
POOR	19 8%	395 8%	1 8%	1 3%	2 6%	7 11%	6 7%	2 14%	16 7%	~	~	~	~	~	1 7%	18 ~ 8%	19 ~ 22%	9 9%	10 7%			
#EXCELLENT + VERY GOOD + GOOD (NET)	161 65%	3263 68%	8 62%	28 74%	25 76%	42 64%	47 57%	10 71%	138 64%	~	~	~	~	~	10 71%	155 ~ 65%	161 100%	69 ~ 69%	92 62%			
NOT ANSWERED	8	314				1										1					2	
VALID CASES	249	4768	13	38	33	66	83	14	215						14	238	161	88	100	149		
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215						14	239	161	88	100	151		
	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?

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH		GENDER	
	OT1	OT2																			
	COPA	OHP	18	25	35	45	55	65	BLCK	AS-	NATV	AMER			NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	IAN	HAW/	IND/			HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-		PAC	ALSK			PAN-	PAN-	&	&			
									AMER		ILND	NATV	OTHR	MUL-	IC##	IC	GOOD	POOR	MALE	MALE	
Q37																					
EXCELLENT	43 17%	870 18%	2 15%~	5 13%~	4 12%~	10 15%	20 24%	1 7%~	38 18%~	~	~	~	~	~	21%~	43 ~ 18%~	38 24%*	4 5%*	20 20%	23 15%	
VERY GOOD	55 22%	1189 25%	3 23%~	6 16%~	8 24%~	19 28%	15 18%	4 29%~	51 24%~	~	~	~	~	~	14%~	54 ~ 23%~	48 30%*	7 8%*	25 25%	30 20%	
GOOD	65 26%	1480 31%	1 8%~	13 34%~	11 33%~	16 24%	18 22%	6 43%~	50 23%~	~	~	~	~	~	36%~	61 ~ 26%~	48 30%	17 20%	22 22%	43 29%	
FAIR	65 26%	937 20%*	5 38%~	11 29%~	9 27%~	14 21%	23 28%	2 14%~	55 26%~	~	~	~	~	~	21%~	60 ~ 25%~	23 14%*	42 48%*	26 26%	39 26%	
POOR	21 8%	296 6%	2 15%~	3 8%~	1 3%~	8 12%	6 7%	1 7%~	20 9%~	~	~	~	~	~	7%~	21 ~ 9%~	4 2%*	17 20%*	7 7%	14 9%	
#EXCELLENT + VERY GOOD + GOOD (NET)	163 65%	3539 74%*	6 46%~	24 63%~	23 70%~	45 67%	53 65%	11 79%~	139 65%~	~	~	~	~	~	71%~	158 ~ 66%~	134 83%*	28 32%*	67 67%	96 64%	
NOT ANSWERED	8	310					1		1									1		2	
VALID CASES	249	4772	13	38	33	67	82	14	214					14	239	161	87	100	149		
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

Q38 HAVE YOU HAD EITHER A FLU SHOT OR FLU SPRAY IN THE NOSE SINCE JULY 1, 2017?

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH		GENDER	
	OT1	OT2													ITY	STATUS					
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY	GOOD	FAIR				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			HIS-	HIS-	&	&			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC##	IC	GOOD	POOR	MALE	MALE	
Q38																					
#YES	69	1705	4	9	11	18	20	5	58					4	64	41	28	17	52		
	28%	36%*	33%~	24%~	33%~	27%	25%	38%~	27%~	~	~	~	~	~ 29%~	~ 27%~	26%	33%	17%*	36%*		
NO	175	2994	8	28	22	48	61	8	153					10	170	117	57	81	94		
	72%	64%*	67%~	76%~	67%~	73%	75%	62%~	73%~	~	~	~	~	~ 71%~	~ 73%~	74%	67%	83%*	64%*		
DON'T KNOW	5	99	1	1		1	2		4						4	2	3	2	3		
NOT ANSWERED	8	284						1							1	1				2	
VALID CASES	244	4699	12	37	33	66	81	13	211					14	234	158	85	98	146		
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151		
	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?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				NOT	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			HIS-	HIS-	GOOD	FAIR		
									#	##	#	##	##	TI	IC##	IC	GOOD	POOR	MALE	FE-
									WHTE										MALE	
Q39																				
EVERY DAY	56	949	1	9	8	15	21	2	52					1	55	27	29	25	31	
	23%	20%	8%~	24%~	24%~	23%	25%	17%~	24%~	~	~	~	~	7%~	~ 23%~	17%*	33%*	25%	21%	
SOME DAYS	36	436	2	4	7	10	12	1	33						34	26	10	17	19	
	15%	9%*	15%~	11%~	21%~	15%	14%	8%~	15%~	~	~	~	~	~	~ 14%~	16%	11%	17%	13%	
NOT AT ALL	155	3380	10	25	18	41	50	9	128					13	147	105	49	57	98	
	63%	71%*	77%~	66%~	55%~	62%	60%	75%~	60%~	~	~	~	~	93%~	~ 62%~	66%	56%	58%	66%	
DON'T KNOW	1	34				1			1						1	1			1	
NOT ANSWERED	9	283						2	1						2	2		1	2	
VALID CASES	247	4765	13	38	33	66	83	12	213				14	236	158	88	99	148		
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215				14	239	161	88	100	151		
	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?

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	COPA TOT ADLTL	OHP TOT ADLTL	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 ##	OTHR ##	MUL- TI	HIS- PAN- IC#	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	MALE	FE- MALE
Q40 NEVER	26 29%	367 27%	1 33%~	5 38%~	5 33%~	4 17%~	10 31%~	1 33%~	24 29%~	~	~	~	~	~	1 ~100%~	25 ~29%~	18 35%~	8 21%~	11 27%~	15 31%~
SOMETIMES	16 18%	331 24%	1 33%~	~	2 13%~	6 25%~	5 16%~	2 67%~	16 19%~	~	~	~	~	~	~	16 ~18%~	10 19%~	6 16%~	9 22%~	7 14%~
USUALLY	17 19%	212 16%	~	2 15%~	2 13%~	6 25%~	7 22%~	~	15 18%~	~	~	~	~	~	~	16 ~18%~	6 12%~	11 29%~	10 24%~	7 14%~
ALWAYS	31 34%	455 33%	1 33%~	6 46%~	6 40%~	8 33%~	10 31%~	~	29 35%~	~	~	~	~	~	~	30 ~34%~	18 35%~	13 34%~	11 27%~	20 41%~
#ALWAYS + USUALLY (NET)	48 53%	667 49%	1 33%~	8 62%~	8 53%~	14 58%~	17 53%~	~	44 52%~	~	~	~	~	~	~	46 ~53%~	24 46%~	24 63%~	21 51%~	27 55%~
TOP BOX SCORE	31 34%	455 33%	1 33%~	6 46%~	6 40%~	8 33%~	10 31%~	~	29 35%~	~	~	~	~	~	~	30 ~34%~	18 35%~	13 34%~	11 27%~	20 41%~
NOT ANSWERED	2	20				1	1		1							2	1	1	1	1
VALID CASES	90	1365	3	13	15	24	32	3	84						1	87	52	38	41	49
NUMBER OF RESPONDENTS	92 100%	1385 100%	3 100%	13 100%	15 100%	24 100%	32 100%	3 100%	84 100%					1 100%	87 100%	52 100%	38 100%	41 100%	49 100%	

[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.

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2	18	25	35	45	55	65	BLCK	AS-	NATV	AMER	NOT	EX &	GOOD	FAIR	MALE	FE-			
	COPA	OHP	TO	TO	TO	TO	TO	AND	OR	IAN	ILND	ALSK	HAW/	IND/	VERY	&	POOR	MALE	MALE		
	TOT	TOT	24	34	44	54	64	OVER	AFR-	AMER	ILND	NATV	OTH	MUL-	PAN-	PAN-	IC	GOOD	POOR	MALE	MALE
	ADLT	ADLT							#	##	#	##	##	TI	IC#	IC					
Q41																					
NEVER	43	687	2	8	8	9	14	2	39					1	41	28	15	19	24		
	48%	50%	67%~	62%~	53%~	38%~	44%~	67%~	46%~	~	~	~	~	~100%~	~ 47%~	55%~	38%~	48%~	48%~		
SOMETIMES	17	305		3	2	6	5	1	17						17	8	9	9	8		
	19%	22%	~ 23%~	13%~	25%~	16%~	33%~	~	20%~	~	~	~	~	~	~ 20%~	16%~	23%~	23%~	16%~		
USUALLY	13	152		2	2	4	5		11						13	8	5	5	8		
	14%	11%	~ 15%~	13%~	17%~	16%~	~	~	13%~	~	~	~	~	~	~ 15%~	16%~	13%~	13%~	16%~		
ALWAYS	17	223	1		3	5	8		17						16	7	10	7	10		
	19%	16%	33%~	~ 20%~	21%~	25%~	~	~	20%~	~	~	~	~	~	~ 18%~	14%~	26%~	18%~	20%~		
#ALWAYS + USUALLY (NET)	30	375	1	2	5	9	13		28						29	15	15	12	18		
	33%	27%	33%~	15%~	33%~	38%~	41%~	~	33%~	~	~	~	~	~	~ 33%~	29%~	38%~	30%~	36%~		
TOP BOX SCORE	17	223	1		3	5	8		17						16	7	10	7	10		
	19%	16%	33%~	~ 20%~	21%~	25%~	~	~	20%~	~	~	~	~	~	~ 18%~	14%~	26%~	18%~	20%~		
NOT ANSWERED	2	18				1	1		1						2	2		2			
VALID CASES	90	1367	3	13	15	24	32	3	84					1	87	51	39	40	50		
NUMBER OF RESPONDENTS	92	1385	3	13	15	25	33	3	85					1	89	53	39	42	50		
	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.

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2	18	25	35	45	55	65	BLCK	NATV	AMER	AS-	IND/	OTH	MUL-	NOT	EX &	FAIR	FE-	
	COPA	OHP	TO	TO	TO	TO	TO	AND	WHTE	AFR-	IAN	ILND	NATV	ALSK	IC#	HIS-	GOOD	GOOD	MALE	
	TOT	TOT	ADLT	ADLT	ADLT	ADLT	ADLT	ADLT	#	#	#	#	#	#	#	#	&	&	MALE	
Q42																				
NEVER	50	778	2	8	8	13	17	2	45						1	47	32	18	21	29
	56%	57%	67%~	62%~	53%~	54%~	55%~	67%~	54%~	~	~	~	~	~	~100%~	~ 55%~	63%~	47%~	53%~	59%~
SOMETIMES	20	261	1	3	2	6	7	1	20							20	7	13	10	10
	22%	19%	33%~	23%~	13%~	25%~	23%~	33%~	24%~	~	~	~	~	~	~	~ 23%~	14%~	34%~	25%~	20%~
USUALLY	9	141		1	1	3	4		9							9	7	2	4	5
	10%	10%	~	8%~	7%~	13%~	13%~	~	11%~	~	~	~	~	~	~	~ 10%~	14%~	5%~	10%~	10%~
ALWAYS	10	175		1	4	2	3		9							10	5	5	5	5
	11%	13%	~	8%~	27%~	8%~	10%~	~	11%~	~	~	~	~	~	~	~ 12%~	10%~	13%~	13%~	10%~
#ALWAYS + USUALLY (NET)	19	316		2	5	5	7		18							19	12	7	9	10
	21%	23%	~	15%~	33%~	21%~	23%~	~	22%~	~	~	~	~	~	~	~ 22%~	24%~	18%~	23%~	20%~
TOP BOX SCORE	10	175		1	4	2	3		9							10	5	5	5	5
	11%	13%	~	8%~	27%~	8%~	10%~	~	11%~	~	~	~	~	~	~	~ 12%~	10%~	13%~	13%~	10%~
NOT ANSWERED	3	30				1	2		2							3	2	1	2	1
VALID CASES	89	1355	3	13	15	24	31	3	83						1	86	51	38	40	49
NUMBER OF RESPONDENTS	92	1385	3	13	15	25	33	3	85						1	89	53	39	42	50
	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?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER		
	OT1	OT2												ITY	STATUS				
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR		
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC##	IC	GOOD	POOR	
									WHTE	#	##	#	##	##	TI		MALE	MALE	
Q43																			
YES	45	997	1	1	2	11	25	5	39					1	42	21	24	19	26
	18%	21%	8%~	3%~	6%~	17%	30%*	36%~	18%~	~	~	~	~	7%~	~ 18%~	13%*	28%*	20%	17%
NO	201	3756	11	37	31	53	58	9	173					13	194	137	63	78	123
	82%	79%	92%~	97%~	94%~	83%	70%*	64%~	82%~	~	~	~	~	93%~	~ 82%~	87%*	72%*	80%	83%
DON'T KNOW	1	42	1													1		1	
NOT ANSWERED	10	287				3			3						3	2	1	2	2
VALID CASES	246	4753	12	38	33	64	83	14	212					14	236	158	87	97	149
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151
	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?

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH	GENDER		
	OT1	OT2								BLCK	NATV	AMER					NOT	EX &			
	COPA	OHP	18	25	35	45	55	65	AFR-	AS-	HAW/	IND/				HIS-	HIS-	GOOD	FAIR		
	TOT	TOT	TO	TO	TO	TO	TO	AND	AMER	IAN	ILND	NATV	OTHR	MUL-	PAN-	PAN-	&	&	MALE	MALE	
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	#	##	#	##	##	TI	IC##	IC	GOOD	POOR		
Q44																					
YES	26	448	1	1	2	5	13	3	22					2	26	12	14	6	20		
	12%	10%	9%~	3%~	7%~	9%	17%	27%~	12%~	~	~	~	~	~ 15%~	~ 12%~			8%*	19%*	7%	15%
NO	196	3956	10	34	28	53	62	8	169					11	187	134	61	81	115		
	88%	90%	91%~	97%~	93%~	91%	83%	73%~	88%~	~	~	~	~	~ 85%~	~ 88%~			92%*	81%*	93%	85%
DON'T KNOW	27	377	2	3	3	9	8	2	23					1	25	14	13	13	14		
NOT ANSWERED	8	301						1	1						1	1					2
VALID CASES	222	4404	11	35	30	58	75	11	191					13	213	146	75	87	135		
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK				&	&			
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	POOR		
									#	##	#	##	##	TI	IC##	IC	GOOD	POOR	MALE	MALE
Q45																				
YES	86	1716	1	8	6	26	36	8	72					5	82	48	38	37	49	
	35%	36%	8%~	21%~	18%~	39%	44%*	57%~	34%~	~	~	~	~	~ 36%~	~ 35%~	30%*	44%*	37%	33%	
NO	162	3045	12	30	27	41	45	6	141					9	155	113	48	62	100	
	65%	64%	92%~	79%~	82%~	61%	56%*	43%~	66%~	~	~	~	~	~ 64%~	~ 65%~	70%*	56%*	63%	67%	
NOT ANSWERED	9	321						2	2						2		2	1	2	
VALID CASES	248	4761	13	38	33	67	81	14	213					14	237	161	86	99	149	
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			HIS-	GOOD	FAIR			
									AMER		ILND	NATV	OTHR	MUL-	IC##	IC	GOOD	POOR	MALE	FE-
									WHTE	#	##	#	##	##	TI				MALE	MALE
Q46.1																				
YES	69	1102	1	3	7	19	33	6	62					2	67	34	35	25	44	
	27%	22%	8%~	8%~	21%~	28%	40%*	43%~	29%~	~	~	~	~	~ 14%~	~ 28%~	21%*	40%*	25%	29%	
NO	188	3980	12	35	26	48	50	8	153					12	172	127	53	75	107	
	73%	78%	92%~	92%~	79%~	72%	60%*	57%~	71%~	~	~	~	~	~ 86%~	~ 72%~	79%*	60%*	75%	71%	
VALID CASES	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151	
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151	
	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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2																			
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC##	IC	GOOD	POOR	MALE	FE-	
									WHTE	#	##	#	##	##	TI					MALE	MALE
Q46.2																					
YES	80	1444	1	4	6	25	37	7	69					2	78	46	34	36	44		
	31%	28%	8%~	11%~	18%~	37%	45%*	50%~	32%~	~	~	~	~	~ 14%~	~ 33%~	29%	39%	36%	29%		
NO	177	3638	12	34	27	42	46	7	146					12	161	115	54	64	107		
	69%	72%	92%~	89%~	82%~	63%	55%*	50%~	68%~	~	~	~	~	~ 86%~	~ 67%~	71%	61%	64%	71%		
VALID CASES	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151		
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	COPA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE #	BLCK OR AFR- #	AS- IAN ##	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC##	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE	
Q46.3 YES	48 19%	826 16%	2 15%~	6 16%~	4 12%~	18 27%	14 17%	4 29%	43 20%~	~	~	~	~	~	3 21%~	47 20%~	22 14%*	26 30%*	17 17%	31 21%
NO	209 81%	4256 84%	11 85%~	32 84%~	29 88%~	49 73%	69 83%	10 71%~	172 80%~	~	~	~	~	~	11 79%~	192 80%~	139 86%*	62 70%*	83 83%	120 79%
VALID CASES	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151	
NUMBER OF RESPONDENTS	257 100%	5082 100%	13 100%	38 100%	33 100%	67 100%	83 100%	14 100%	215 100%					14 100%	239 100%	161 100%	88 100%	100 100%	151 100%	

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			GOOD	FAIR				
									AMER	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR			
									#	##	#	##	##	TI	IC##	IC	GOOD	POOR	MALE	FE-
									WHTE										MALE	
Q47.1																				
YES	8	211				2	5	1	7					1	8	2	6	3	5	
	3%	4%	~	~	~	3%	6%	7%~	3%~	~	~	~	~	7%~	~	3%~	1%	7%*	3%	3%
NO	249	4871	13	38	33	65	78	13	208					13	231	159	82	97	146	
	97%	96%	100%~	100%~	100%~	97%	94%	93%~	97%~	~	~	~	~	93%~	~	97%~	99%	93%*	97%	97%
VALID CASES	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151	
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	PAN-	PAN-	&	&	FE-		
									WHTE	#	##	#	##	##	TI	IC##	IC	GOOD	POOR	MALE	MALE
Q47.2																					
YES	8	212				2	4	2	7							8	5	3	4	4	
	3%	4%	~	~	~	3%	5%	14%~	3%~	~	~	~	~	~	~	~	3%~	3%	3%	4%	3%
NO	249	4870	13	38	33	65	79	12	208					14	231	156	85	96	147		
	97%	96%	100%~	100%~	100%~	97%	95%	86%~	97%~	~	~	~	~	~100%~	~	97%~	97%	97%	96%	97%	
VALID CASES	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151		
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									#	##	#	##	##	TI	PAN-	PAN-	&			
									WHTE						IC##	IC	POOR			
																	MALE			
																	MALE			
Q47.3																				
YES	8	195				3	4	1	8						8	3	5	5	3	
	3%	4%	~	~	~	4%	5%	7%	4%	~	~	~	~	~	~	3%	2%	6%	5%	2%
NO	249	4887	13	38	33	64	79	13	207					14	231	158	83	95	148	
	97%	96%	100%	~100%	~100%	~96%	95%	93%	96%	~	~	~	~	~100%	~97%	~98%	94%	95%	98%	
VALID CASES	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151	
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151	
	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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER	
	COPA 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 ##	OTHR #	MUL- TI	HIS- PAN- IC##	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE
Q47.4 YES	44 17%	916 18%	1 8%~	4 11%~	4 12%~	12 18%	20 24%	3 21%~	34 16%~	~	~	~	~	2 ~ 14%~	40 ~ 17%~	24 15%	20 23%	16 16%	28 19%
NO	213 83%	4166 82%	12 92%~	34 89%~	29 88%~	55 82%	63 76%	11 79%~	181 84%~	~	~	~	~	12 ~ 86%~	199 ~ 83%~	137 85%	68 77%	84 84%	123 81%
VALID CASES	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151
NUMBER OF RESPONDENTS	257 100%	5082 100%	13 100%	38 100%	33 100%	67 100%	83 100%	14 100%	215 100%					14 100%	239 100%	161 100%	88 100%	100 100%	151 100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER		
	OT1	OT2												ITY	STATUS				
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK	OTHR	MUL-	HIS-	HIS-	&		
									AMER	IAN	ILND	NATV		TI	IC##	IC	GOOD	POOR	
									WHTE	#	##	#	##	##			MALE	MALE	
Q48																			
YES	80	1408	3	10	8	28	25	5	72					3	79	41	39	27	53
	32%	30%	23%~	27%~	24%~	42%	30%	36%~	34%~	~	~	~	~	~ 21%~	~ 33%~	26%*	45%*	28%	36%
NO	167	3330	10	27	25	38	57	9	140					11	158	119	47	71	96
	68%	70%	77%~	73%~	76%~	58%	70%	64%~	66%~	~	~	~	~	~ 79%~	~ 67%~	74%*	55%*	72%	64%
NOT ANSWERED	10	344		1		1	1		3						2	1	2	2	2
VALID CASES	247	4738	13	37	33	66	82	14	212					14	237	160	86	98	149
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH	GENDER	
	OT1	OT2													ITY	STATUS				
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK	OTHR	MUL-	HIS-	HIS-	&	&		
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC##	IC	GOOD	POOR	MALE	MALE
Q49																				
YES	68	1187	3	9	8	22	21	4	63					1	67	32	36	22	46	
	89%	88%	100%~	90%~	100%~	85%~	88%~	100%~	91%~	~	~	~	~	~ 33%~	~ 89%~	84%~	95%~	88%~	90%~	
NO	8	167		1		4	3		6					2	8	6	2	3	5	
	11%	12%	~ 10%~		~ 15%~	13%~			9%~	~	~	~	~	~ 67%~	~ 11%~	16%~	5%~	12%~	10%~	
NOT ANSWERED	4	54				2	1	1	3						4	3	1	2	2	
VALID CASES	76	1354	3	10	8	26	24	4	69					3	75	38	38	25	51	
NUMBER OF RESPONDENTS	80	1408	3	10	8	28	25	5	72					3	79	41	39	27	53	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	

[ASKED IF Q48 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER		
	OT1	OT2												ITY	STATUS				
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR		
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC##	IC	GOOD	POOR	
									WHTE	#	##	#	##	##	TI			MALE	MALE
Q50																			
YES	177	2988	6	23	20	51	65	11	154					8	171	100	77	64	113
	73%	63%*	55%~	61%~	61%~	80%	78%	85%~	73%~	~	~	~	~	~ 57%~	~ 73%~	64%*	89%*	65%*	77%*
NO	67	1758	5	15	13	13	18	2	57					6	64	56	10	34	33
	27%	37%*	45%~	39%~	39%~	20%	22%	15%~	27%~	~	~	~	~	~ 43%~	~ 27%~	36%*	11%*	35%*	23%*
NOT ANSWERED	13	336	2			3		1	4						4	5	1	2	5
VALID CASES	244	4746	11	38	33	64	83	13	211					14	235	156	87	98	146
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151
	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.

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER		
	COPA 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/ PAC #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC##	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE
Q51 YES	160 94%	2723 95%	5 83%~	19 86%~	19 95%~	46 92%	59 97%	11 100%~	141 95%~	~	~	~	~	~	8 ~100%~	157 ~95%~	94 95%	66 92%	56 92%	104 95%
NO	11 6%	155 5%	1 17%~	3 14%~	1 5%~	4 8%	2 3%	7 5%~	~	~	~	~	~	~	8 ~5%~	5 5%	6 8%	5 8%	6 5%	
NOT ANSWERED	6	110		1		1	4	6							6	1	5	3	3	
VALID CASES	171	2878	6	22	20	50	61	11	148					8	165	99	72	61	110	
NUMBER OF RESPONDENTS	177 100%	2988 100%	6 100%	23 100%	20 100%	51 100%	65 100%	11 100%	154 100%					8 100%	171 100%	100 100%	77 100%	64 100%	113 100%	

[ASKED IF Q50 = YES]

NQ52 WHAT IS YOUR AGE?

	BANT	BANT	AGE							RACE						ETHNIC-	HEALTH		GENDER	
	OT1	OT2																		
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	IC##	IC	&	&	FE-	
									WHTE	#	##	#	##	##	TI		GOOD	POOR	MALE	MALE
NQ52																				
18 TO 24	14	485	13						12						12	9	5	5	9	
	5%	10%*	100%	~	~	~	~	~	6%	~	~	~	~	~	~	5%	6%	6%	5%	6%
25 TO 34	40	853		38					34					2	36	28	10	8	30	
	16%	17%	~100%	~	~	~	~	~	16%	~	~	~	~	~14%	~15%	~17%	~11%	8%*	20%*	
35 TO 44	34	805			33				25					4	31	25	8	14	19	
	13%	16%	~	~100%	~	~	~	~	12%	~	~	~	~	~29%	~13%	~16%	~9%	14%	13%	
45 TO 54	69	1048				67			58					4	65	42	25	32	36	
	27%	21%*	~	~	~100%	~	~	~	27%	~	~	~	~	~29%	~27%	~26%	~28%	32%	24%	
55 TO 64	85	1437					83		76					4	82	47	36	37	47	
	33%	28%	~	~	~	~100%	~	~	35%	~	~	~	~	~29%	~34%	~29%	~41%	37%	31%	
65 TO 74	13	302					13		10						12	9	4	4	9	
	5%	6%	~	~	~	~	~93%	~	5%	~	~	~	~	~	~5%	~6%	~5%	4%	6%	
75 OR OLDER	2	152					1								1	1			1	
	0.8%	3%*	~	~	~	~	~7%	~	~	~	~	~	~	~	~0.4%	~0.6%	~	~	~0.7%	
VALID CASES	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151	
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	

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

NQ53 ARE YOU MALE OR FEMALE?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER				
	OT1	OT2												ITY	STATUS						
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY						
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR					
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD				
									WHTE	#	##	#	##	##	TI	IC##	IC	GOOD			
																	POOR	MALE			
																	MALE	FE-			
																	MALE	MALE			
NQ53																					
MALE	101	2039	5	8	14	32	37	4	87					8	95	69	31	100			
	39%	40%	38%~	21%~	42%~	48%	45%	29%~	40%~	~	~	~	~	~	57%~	~	40%~	43%	35%	100%~	~
FEMALE	156	3043	8	30	19	35	46	10	128					6	144	92	57	151			
	61%	60%	62%~	79%~	58%~	52%	55%	71%~	60%~	~	~	~	~	~	43%~	~	60%~	57%	65%	~100%~	
VALID CASES	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151		
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%		

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2																		
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	AFR-	AS-	HAW/	IND/			NOT	VERY	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	#	##	#	##	##	TI	IC##	IC	GOOD	POOR	
																			MALE	MALE
Q54																				
8TH GRADE OR LESS	9	267		1	2	3	3		7					1		8	1	8	5	4
	4%	6%		~ 3%	~ 6%	~ 4%	4%		3%					7%		3%	0.6%*	9%*	5%	3%
SOME HIGH SCHOOL BUT DID NOT GRADUATE	35	599	2	6	4	10	10	2	29					4		33	21	14	19	16
	14%	13%	15%	16%	12%	15%	12%	14%	13%					29%		14%	13%	16%	19%	11%
HIGH SCHOOL GRADUATE OR GED	97	1663	6	13	9	25	37	6	90					3		94	63	34	39	58
	39%	35%	46%	34%	27%	37%	45%	43%	42%					21%		39%	39%	39%	39%	39%
SOME COLLEGE OR 2-YEAR DEGREE	90	1668	5	16	18	23	24	4	74					5		86	61	29	32	58
	36%	35%	38%	42%	55%	34%	29%	29%	34%					36%		36%	38%	33%	32%	39%
4-YEAR COLLEGE GRADUATE	12	348		2		3	5	2	9							11	9	2	3	9
	5%	7%		~ 5%		~ 4%	6%	14%	4%							5%	6%	2%	3%	6%
MORE THAN 4-YEAR COLLEGE DEGREE	7	201				3	4		6					1		7	6	1	2	5
	3%	4%		~	~	~ 4%	5%		3%					7%		3%	4%	1%	2%	3%
NOT ANSWERED	7	336																		1
VALID CASES	250	4746	13	38	33	67	83	14	215					14		239	161	88	100	150
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14		239	161	88	100	151
	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?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER		
	OT1	OT2												ITY	STATUS				
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR		
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC##	IC	GOOD	POOR	
									WHTE	#	##	#	##	##	TI			FE-	
																		MALE	
																		MALE	
Q55																			
YES HISPANIC OR LATINO	7	571	2	1	2	2										5	2	4	3
	3%	12%*	15%~	3%~	6%~	3%	~	~	~	~	~	~	~	~	~	3%	2%	4%	2%
NO NOT HISPANIC OR LATINO	239	4145	11	36	31	64	82	13	213					14	239	155	83	95	144
	97%	88%*	85%~	97%~	94%~	97%	100%~	100%~	100%~	~	~	~	~	~100%~	~100%~	97%	98%	96%	98%
NOT ANSWERED	11	366		1		1	1	1	2							1	3	1	4
VALID CASES	246	4716	13	37	33	66	82	13	213					14	239	160	85	99	147
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%

Q56.1 WHAT IS YOUR RACE? RESPONSE: WHITE

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									WHTE	#	##	#	##	##	TI	IC##	IC	GOOD		
																	POOR			
																	MALE			
																	MALE			
Q56.1																				
YES	233	4120	12	37	31	61	80	10	215					14	227	151	82	98	135	
	91%	81%*	92%~	97%~	94%~	91%	96%*	71%~	100%~	~	~	~	~	~100%~	~	95%~	94%*	93%	98%*	89%
NO	24	962	1	1	2	6	3	4							12	10	6	2	16	
	9%	19%*	8%~	3%~	6%~	9%	4%*	29%~	~	~	~	~	~	~	5%~	6%*	7%	2%*	11%	
VALID CASES	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151	
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151	
	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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER		
	OT1	OT2												ITY	STATUS				
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR		
									AMER	IAN	ILND	NATV	OTHR	MUL-	GOOD	POOR	MALE	MALE	
									WHTE	#	##	#	##	##	TI	IC##	IC		
Q56.2																			
YES		85	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
		2%																	
NO	257	4997	13	38	33	67	83	14	215					14	239	161	88	100	151
	100%	98%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%
VALID CASES	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%

Q56.3 WHAT IS YOUR RACE? RESPONSE: ASIAN

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER		
	OT1	OT2												ITY	STATUS				
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD		
									#	##	#	##	##	TI	IC##	IC	GOOD		
									WHTE								POOR		
																	MALE		
																	MALE		
Q56.3																			
YES	3	136		1	1			1						1	3	3		3	
	1%	3%		~ 3%	~ 3%			~ 7%						~ 7%	~ 1%	~ 2%		~ 2%	
NO	254	4946	13	37	32	67	83	13	215					13	236	158	88	100	148
	99%	97%	100%	~ 97%	~ 97%	~ 100%	~ 100%	~ 93%	~ 100%					~ 93%	~ 99%	~ 98%	100%	~ 100%	~ 98%
VALID CASES	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%



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

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS		GENDER			
	COPA 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/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC##	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE
Q56.4 YES	1 0.4%	40 0.8%	~	~	3%	~	~	~	~	~	~	~	~	7%	~	1 ~0.4%	1 ~0.6%	~	1 ~0.7%	~
NO	256 100%	5042 99%	13 100%	38 100%	32 97%	67 100%	83 100%	14 100%	215 ~	~	~	~	~	13 93%	238 ~100%	160 99%	88 100%	100 100%	150 99%	~
VALID CASES	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151	
NUMBER OF RESPONDENTS	257 100%	5082 100%	13 100%	38 100%	33 100%	67 100%	83 100%	14 100%	215 100%					14 100%	239 100%	161 100%	88 100%	100 100%	151 100%	

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY						
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR					
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR			
									#	##	#	##	##	TI	IC##	IC	GOOD	POOR	MALE	FE-	
									WHTE										MALE		
Q56.5																					
YES	13	313		1	1	6	5							9	13	8	5	6	7		
	5%	6%		~	3%~	3%~	9%	6%	~	~	~	~	~	~	64%~	~	5%~	5%	6%	6%	5%
NO	244	4769	13	37	32	61	78	14	215					5	226	153	83	94	144		
	95%	94%	100%~	97%~	97%~	91%	94%	100%~	100%~	~	~	~	~	~	36%~	~	95%~	95%	94%	94%	95%
VALID CASES	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151		
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%		

Q56.6 WHAT IS YOUR RACE? RESPONSE: OTHER

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC##	IC	GOOD	POOR	MALE	FE-	
									WHTE	#	##	#	##	##	TI				MALE	MALE	
Q56.6																					
YES	11	278		1	3	2	3	2						4	7	5	6	5	6		
	4%	5%		~ 3%	~ 9%	~ 3%	~ 4%	~ 14%	~	~	~	~	~	~ 29%	~ 3%	~ 3%	~ 7%	~ 5%	~ 4%		
NO	246	4804	13	37	30	65	80	12	215					10	232	156	82	95	145		
	96%	95%	100%	~ 97%	~ 91%	~ 97%	~ 96%	~ 86%	~ 100%	~	~	~	~	~ 71%	~ 97%	~ 97%	~ 93%	~ 95%	~ 96%		
VALID CASES	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151		
NUMBER OF RESPONDENTS	257	5082	13	38	33	67	83	14	215					14	239	161	88	100	151		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%		

Q57 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER				
	OT1	OT2												ITY	STATUS						
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY	GOOD	FAIR				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			&	&	FE-				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	POOR	MALE	MALE	
									WHTE	#	##	#	##	##	TI	IC##	IC	GOOD	POOR	MALE	MALE
Q57																					
YES	8	466	1	1	1	2	1	2	7						8	1	7	3	5		
	4%	12%*	11%~	4%~	5%~	4%	1%	14%~	4%~	~	~	~	~	~	~	4%~	0.8%*	11%*	4%	4%	
NO	184	3267	8	25	21	49	68	12	164					7	176	124	59	74	110		
	96%	88%*	89%~	96%~	95%~	96%	99%	86%~	96%~	~	~	~	~	~100%~	~	96%~	99%*	89%*	96%	96%	
NOT ANSWERED	2	46																			1
VALID CASES	192	3733	9	26	22	51	69	14	171					7	184	125	66	77	115		
NUMBER OF RESPONDENTS	194	3779	9	26	22	51	69	14	171					7	184	125	66	77	116		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			GOOD	FAIR				
									AMER		ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									WHTE	#	##	#	##	##	TI	IC##	IC	GOOD		
																	POOR			
																	MALE			
																	MALE			
Q58.1																				
YES	3	238	1	1			1		3						3		3	1	2	
	38%	51%	~100%	~100%	~		~100%	~	43%	~	~	~	~	~	~	38%	~	43%	33%	40%
NO	5	228			1	2		2	4						5	1	4	2	3	
	63%	49%	~		~100%	~100%	~	~100%	57%	~	~	~	~	~	~	63%	~100%	57%	67%	60%
VALID CASES	8	466	1	1	1	2	1	2	7						8	1	7	3	5	
NUMBER OF RESPONDENTS	8	466	1	1	1	2	1	2	7						8	1	7	3	5	
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	

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

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH	GENDER	
	OT1	OT2													ITY	STATUS				
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				HIS-	HIS-	VERY			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	PAN-	PAN-	GOOD	FAIR		
									AMER	##	##	##	##	##	TI	IC##	IC	&	&	
									WHTE	#	##	##	##	##	TI	IC##	IC	GOOD	POOR	
																	GOOD	POOR	MALE	
																	GOOD	POOR	MALE	
Q58.2																				
YES	5	182	1	1		1		2	4							5	1	4	1	4
	63%	39%	~100%	~100%	~	50%	~	~100%	57%	~	~	~	~	~	~	~63%	~100%	~57%	~33%	~80%
NO	3	284			1	1	1		3							3		3	2	1
	38%	61%	~	~	~100%	50%	~100%	~	43%	~	~	~	~	~	~	~38%	~	~43%	~67%	~20%
VALID CASES	8	466	1	1	1	2	1	2	7							8	1	7	3	5
NUMBER OF RESPONDENTS	8	466	1	1	1	2	1	2	7							8	1	7	3	5
	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.

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER									
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	EX &					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC##	IC	&	&		
									WHTE	#	##	#	##	##	TI		GOOD	POOR	MALE	MALE
Q58.3																				
YES	2	156			1	1			2						2		2		1	1
	25%	33%			~100%	~50%			29%						~25%		~29%		33%	20%
NO	6	310	1	1		1	1	2	5						6	1	5		2	4
	75%	67%	~100%	~100%		~50%	~100%	~100%	71%						~75%	~100%	~71%		67%	80%
VALID CASES	8	466	1	1	1	2	1	2	7						8	1	7		3	5
NUMBER OF RESPONDENTS	8	466	1	1	1	2	1	2	7						8	1	7		3	5
	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.

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER		
	OT1	OT2												ITY	STATUS				
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER								
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	EX &				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR		
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC##	IC	&	&	
									WHTE	#	##	#	##	##	TI		GOOD	POOR	
																	MALE	MALE	
Q58.4																			
YES		56																	
		12%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	8	410	1	1	1	2	1	2	7						8	1	7	3	5
	100%	88%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~	~	~	~	~	~100%	~100%	~100%	~100%	~100%
VALID CASES	8	466	1	1	1	2	1	2	7						8	1	7	3	5
NUMBER OF RESPONDENTS	8	466	1	1	1	2	1	2	7						8	1	7	3	5
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%

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



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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER	
	OT1	OT2												ITY	STATUS	MALE	MALE	
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &		
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR		
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	
									#	##	#	##	##	TI	IC##	IC	GOOD	
																	POOR	
																	MALE	
																	MALE	
Q58.5																		
YES	1	39			1				1						1	1	1	
	13%	8%	~	~	~100%	~	~	~	14%	~	~	~	~	~	~ 13%	~ 14%	~ 20%	
NO	7	427	1	1		2	1	2	6						7	1	6	
	88%	92%	~100%	~100%	~	~100%	~100%	~100%	86%	~	~	~	~	~	~ 88%	~100%	86%	
VALID CASES	8	466	1	1	1	2	1	2	7						8	1	7	
NUMBER OF RESPONDENTS	8	466	1	1	1	2	1	2	7						8	1	7	
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	

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

NQ13 RATING OF ALL HEALTH CARE

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	PAN-	PAN-	&	&	FE-		
									WHTE	#	##	#	##	##	TI	IC##	IC	GOOD	POOR	MALE	MALE
NQ13																					
0-6	44	687	2	10	9	11	8	2	36					1	41	22	21	15	29		
	24%	20%	40%~	40%~	39%~	20%	13%*	17%~	23%~	~	~	~	~	~	9%~	~	23%~	20%	28%	22%	25%
7-8	64	1221	2	7	9	23	17	5	55					6	61	33	30	22	42		
	34%	35%	40%~	28%~	39%~	41%	28%	42%~	35%~	~	~	~	~	~	55%~	~	34%~	30%	41%	33%	36%
9-10	78	1603	1	8	5	22	36	5	65					4	75	54	23	30	47		
	42%	46%	20%~	32%~	22%~	39%	59%*	42%~	42%~	~	~	~	~	~	36%~	~	42%~	50%*	31%*	45%	40%
VALID CASES	186	3511	5	25	23	56	61	12	156					11	177	109	74	67	118		
NUMBER OF RESPONDENTS	186	3511	5	25	23	56	61	12	156					11	177	109	74	67	118		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%
MEAN	2.18	2.26	1.80	1.92	1.83	2.20	2.46	2.25	2.19					2.27	2.19	2.29	2.03	2.22	2.15		
p stat_(*=Sig @ p<=.05)		.152	~	~	~.874	.001*	~	~	~	~	~	~	~	~	~	~.023*	.028*	.596	.494		

[ASKED IF Q7 >= 1 TIME]

NQ23 RATING OF PERSONAL DOCTOR

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2																		
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									#	##	#	##	##	TI	IC##	IC	GOOD	POOR	MALE	MALE
NQ23																				
0-6	31	572	2	6	3	6	12		27					1	29	15	14	12	19	
	16%	15%	29%~	22%~	14%~	11%	19%	~	16%~	~	~	~	~	10%~	~	16%~	13%	20%	18%	16%
7-8	50	959	3	7	7	15	13	4	39					4	44	33	16	18	31	
	27%	26%	43%~	26%~	32%~	28%	20%	36%~	24%~	~	~	~	~	40%~	~	25%~	29%	23%	27%	26%
9-10	107	2197	2	14	12	33	39	7	98					5	106	67	40	37	70	
	57%	59%	29%~	52%~	55%~	61%	61%	64%~	60%~	~	~	~	~	50%~	~	59%~	58%	57%	55%	58%
VALID CASES	188	3728	7	27	22	54	64	11	164					10	179	115	70	67	120	
NUMBER OF RESPONDENTS	188	3728	7	27	22	54	64	11	164					10	179	115	70	67	120	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%
MEAN	2.40	2.44	2.00	2.30	2.41	2.50	2.42	2.64	2.43					2.40	2.43	2.45	2.37	2.37	2.42	
p stat_(*=Sig @ p<=.05)		.549	~	~	~.249	.819	~	~	~	~	~	~	~	~	~	~.292	.656	.679	.619	

[ASKED IF Q15 = YES]

NQ27 RATING OF SPECIALIST SEEN MOST OFTEN

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC##	IC	GOOD	POOR		
									WHTE	#	##	#	##	##	TI		GOOD	POOR		
																MALE	MALE			
NQ27																				
0-6	17	239	1	2	4	5	5		16						17	9	8	6	11	
	18%	13%	50%~	18%~	36%~	16%~	14%~	~	19%~	~	~	~	~	~	~	18%~	18%~	18%~	16%~	18%~
7-8	28	475		4	4	12	4	3	20					2	25	15	11	12	16	
	29%	27%	~	36%~	36%~	39%~	11%~	60%~	24%~	~	~	~	~	~	~	27%~	30%~	24%~	32%~	27%~
9-10	52	1057	1	5	3	14	27	2	47					2	51	26	26	19	33	
	54%	60%	50%~	45%~	27%~	45%~	75%~	40%~	57%~	~	~	~	~	~	~	55%~	52%~	58%~	51%~	55%~
VALID CASES	97	1771	2	11	11	31	36	5	83					4	93	50	45	37	60	
NUMBER OF RESPONDENTS	97	1771	2	11	11	31	36	5	83					4	93	50	45	37	60	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	
MEAN	2.36	2.46	2.00	2.27	1.91	2.29	2.61	2.40	2.37					2.50	2.37	2.34	2.40	2.35	2.37	
p stat_(*=Sig @ p<=.05)		.183	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

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

NQ35 RATING OF HEALTH PLAN

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER		
	OT1	OT2												ITY	STATUS				
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/		NOT	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK		HIS-	HIS-	GOOD	FAIR		
									AMER		ILND	NATV	OTHR	MUL-	IC##	IC	GOOD	POOR	
									WHTE	#	##	#	##	##	TI		GOOD	POOR	
																	MALE	MALE	
NQ35																			
0-6	48	953	4	11	8	12	9	2	38					3	44	22	26	17	31
	20%	21%	31%~	31%~	26%~	19%	12%*	17%~	19%~	~	~	~	~	~ 21%~	~ 20%~	15%*	31%*	18%	22%
7-8	67	1522	3	14	10	21	15	4	57					3	63	47	19	30	37
	29%	33%	23%~	39%~	32%~	33%	20%*	33%~	29%~	~	~	~	~	~ 21%~	~ 28%~	32%	23%	32%	26%
9-10	120	2121	6	11	13	31	52	6	105					8	117	80	39	47	73
	51%	46%	46%~	31%~	42%~	48%	68%*	50%~	53%~	~	~	~	~	~ 57%~	~ 52%~	54%	46%	50%	52%
VALID CASES	235	4596	13	36	31	64	76	12	200					14	224	149	84	94	141
NUMBER OF RESPONDENTS	235	4596	13	36	31	64	76	12	200					14	224	149	84	94	141
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%
MEAN	2.31	2.25	2.15	2.00	2.16	2.30	2.57	2.33	2.34					2.36	2.33	2.39	2.15	2.32	2.30
p stat_(*=Sig @ p<=.05)		.290	~	~	~.909	.000*	~	~	~	~	~	~	~	~	~	~.034*	.028*	.838	.838

GETTING NEEDED CARE

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS		GENDER				
	COPA 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/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC##	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
NPRBSEE4 NQ46	2.33	2.25	2.00	2.09	2.00	2.24	2.53	2.60	2.30					2.50	2.30	2.35	2.32	2.25	2.38		
p stat_(*=Sig @ p<=.05)	.301		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NCARNES4 NQ15	2.36	2.31	2.00	2.00	2.00	2.54	2.51	2.75	2.36					2.36	2.36	2.47	2.23	2.37	2.37		
p stat_(*=Sig @ p<=.05)	.340		~	~	~	.025*	.065	~	~	~	~	~	~	~	~	~	.023*	.049*	.897	.881	
COMPOSITE	2.35	2.28	2.00	2.05	2.00	2.39	2.52	2.67	2.33	x	x	x	x	x	2.43	x	2.33	2.41	2.27	2.31	2.37
p stat_(*=Sig @ p<=.05)	.086		~	~	~	.505	.003*	~	~	~	~	~	~	~	~	~	~	.101	.186	.559	.393

GETTING CARE QUICKLY

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS		GENDER				
	COPA 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	OTHR	MUL- TI	HIS- IC##	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
NCARSN4 NQ4	2.51	2.40	2.00	2.50	2.08	2.60	2.61	3.00	2.47						2.71	2.50	2.60	2.43	2.39	2.58	
p stat_(*=Sig @ p<=.05)	.182		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NAPGET4 NQ6	2.32	2.26	2.20	2.48	1.95	2.25	2.45	2.50	2.31					2.22	2.31	2.37	2.22	2.26	2.34		
p stat_(*=Sig @ p<=.05)	.379		~	~	~.488	~	~	~	~	~	~	~	~	~	~	~.345	.222	.511	.608		
COMPOSITE	2.41	2.33	2.10	2.49	2.01	2.43	2.53	2.75	2.39	x	x	x	x	x	2.47	x	2.40	2.48	2.32	2.33	2.46
p stat_(*=Sig @ p<=.05)	.056		~	~	~.785	.065	~	~	~	~	~	~	~	~	~	~	~.048*	.098	.117	.101	

HOW WELL DOCTORS COMMUNICATE

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS		GENDER		
	COPA 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/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC##	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE MALE
NDREXPL4 NQ32	2.62	2.64	2.40	2.63	2.50	2.56	2.77	2.78	2.63					3.00	2.64	2.70	2.56	2.52	2.68
p stat_(*=Sig @ p<=.05)	.674		~	~	~	~	~	~	~	~	~	~	~	~	~	.096	.345	~	~
NDRLSTN4 NQ33	2.60	2.61	2.40	2.47	2.50	2.67	2.63	2.89	2.61					2.71	2.61	2.64	2.57	2.54	2.62
p stat_(*=Sig @ p<=.05)	.840		~	~	~	~	~	~	~	~	~	~	~	~	~	.405	.701	~	~
NDRESPU4 NQ34	2.61	2.67	2.20	2.58	2.50	2.69	2.67	2.89	2.67					2.57	2.65	2.65	2.63	2.60	2.64
p stat_(*=Sig @ p<=.05)	.291		~	~	~	~	~	~	~	~	~	~	~	~	~	.457	.821	~	~
NDRTMEN4 NQ37	2.59	2.52	1.60	2.53	2.44	2.69	2.65	2.78	2.60					2.86	2.61	2.64	2.56	2.52	2.64
p stat_(*=Sig @ p<=.05)	.206		~	~	~	~	~	~	~	~	~	~	~	~	~	.300	.716	~	~
COMPOSITE	2.60	2.61	2.15	2.55	2.49	2.65	2.68	2.83	2.63	x	x	x	x	x 2.79	x 2.63	2.66	2.58	2.55	2.64
p stat_(*=Sig @ p<=.05)	.934		~	~	~	~	~	~	~	~	~	~	~	~	~	.206	.661	~	~



CUSTOMER SERVICE

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS		GENDER			
	COPA 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/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC##	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE
NPBCLCS4 NQ50	2.17	2.30	2.67	1.85	2.00	2.25	2.33	2.00	2.16					1.00	2.14	2.08	2.33	2.32	2.03	
p stat_(*=Sig @ p<=.05)	.207		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCSRESP NQ51	2.71	2.69	3.00	2.46	2.43	2.75	2.93	3.00	2.73					1.00	2.70	2.66	2.81	2.70	2.72	
p stat_(*=Sig @ p<=.05)	.795		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.44	2.50	2.83	2.15	2.21	2.50	2.63	2.50	2.45	x	x	x	x	x 1.00	x 2.42	2.37	2.57	2.51	2.38	
p stat_(*=Sig @ p<=.05)	.492		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

SHARED DECISION MAKING

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS		GENDER			
	COPA 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/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC##	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE
NNRXWHY NQ11	2.87	2.87	3.00	3.00	2.76	2.85	2.87	2.71	2.87					3.00		2.86	2.89	2.83	2.88	2.86
p stat_(*=Sig @ p<=.05)	.983		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NNRXWYNT NQ12	2.48	2.49	2.33	2.63	2.76	2.41	2.25	2.71	2.51					2.50	2.47	2.56	2.40	2.60	2.41	
p stat_(*=Sig @ p<=.05)	.922		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NRXBST NQ13	2.52	2.53	3.00	2.65	2.41	2.56	2.38	3.00	2.56					2.00	2.52	2.50	2.53	2.60	2.48	
p stat_(*=Sig @ p<=.05)	.866		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.62	2.63	2.78	2.76	2.65	2.60	2.50	2.81	2.65	x	x	x	x	x 2.50	x 2.62	2.65	2.59	2.69	2.58	
p stat_(*=Sig @ p<=.05)	.887		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

	BANTO	BANTO	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	T1	T2												ITY	STATUS						
	COPA	OHP	18	25	35	45	55	65	BLCK	AS-	NATV	AMER				EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	IAN	HAW/	IND/			VERY						
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-		PAC	ALSK			GOOD	FAIR					
									#	##	#	##	##	##	TI	IC##	IC	GOOD	POOR	MALE	FE-
									WHT											MALE	MALE
PRBSEE4 Q25	75%	77%	50%	64%	55%	70%	87%	100%	74%					100%		74%	79%	72%	73%	77%	
CARNES4 Q14	84%	82%	60%	72%	75%	93%	87%	100%	83%					82%		84%	91%	75%	87%	83%	
AVERAGE	79.60	79.43	55.00	67.82	64.77	81.28	86.86	100.0	78.50	x	x	x	x	x	90.91	x	78.97	84.84	73.50	79.53	80.12

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

	BANTO	BANTO	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	T1	T2												ITY	STATUS					
	COPA	OHP	18	25	35	45	55	65	BLCK	AS-	NATV	AMER								
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	IAN	HAW/	IND/		HIS-	NOT	EX &				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-		PAC	ALSK		PAN-	PAN-	VERY				
									#	##	#	##	##	IC##	IC	GOOD	FAIR	FE-		
									WHT							GOOD	POOR	MALE	MALE	
CARSN4 Q4	86%	83%	80%	90%	77%	88%	88%	100%	86%						86%	87%	96%	79%	85%	88%
APGET4 Q6	80%	78%	80%	86%	67%	76%	85%	88%	79%						78%	79%	83%	75%	75%	82%
AVERAGE	82.97	80.38	80.00	87.86	71.79	82.24	86.49	93.75	82.30	x	x	x	x	x	81.75	x 82.67	89.08	76.66	80.14	85.08

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER				
	OT1	OT2												ITY	STATUS						
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY						
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR					
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD				
									#	##	#	##	##	TI	PAN-	PAN-	&				
									WHTE						IC##	IC	POOR				
																	MALE				
																	MALE				
DREXPL4 Q17	92%	92%	100%	95%	83%	91%	98%	100%	93%					100%	93%	96%	90%	92%	94%		
DRLSTN4 Q18	90%	90%	100%	84%	89%	93%	90%	100%	90%					100%	90%	93%	89%	92%	90%		
DRESPU4 Q19	91%	91%	80%	84%	89%	98%	92%	100%	92%					100%	91%	94%	90%	92%	92%		
DRTMEN4 Q20	91%	88%	40%	84%	89%	96%	94%	100%	91%					100%	91%	93%	90%	90%	92%		
AVERAGE	91.2	90.3	80.0	86.8	87.5	94.4	93.3	100	91.4	x	x	x	x	x	100	x	91.3	94.0	89.8	91.1	91.9

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

	BANTO	BANTO	AGE						RACE						ETHNIC-	HEALTH		GENDER	
	T1	T2												ITY	GOOD	FAIR	MALE	MALE	
	COPA	OHP	18	25	35	45	55	65	BLCK	AS-	NATV	AMER			EX &	VERY			
	TOT	TOT	TO	TO	TO	TO	TO	AND	AFR-	IAN	HAW/	IND/		HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AMER	ILND	PAC	ALSK	OTHR	MUL-	IC##	IC	GOOD	POOR	FE-
									WHT	#	##	#	##	##	TI			MALE	MALE
PBCLCS4 Q31	73%	80%	100%	54%	71%	75%	87%	50%	74%					0%	72%	67%	86%	79%	69%
CSRESP Q32	95%	94%	100%	92%	86%	95%	100%	100%	96%					0%	95%	95%	95%	93%	97%
AVERAGE	84.12	86.67	100.0	73.08	78.57	85.00	93.33	75.00	85.06	x	x	x	x	x	x 83.58	80.70	90.48	85.58	82.81

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER		
	OT1	OT2												ITY	STATUS				
	COPA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR		
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC##	IC	GOOD	POOR	
									WHTE	#	##	#	##	##	TI		MALE	MALE	
NRXWHY Q10	93%	93%	100%	100%	88%	93%	94%	86%	93%					100%	93%	95%	91%	94%	93%
NRXWYNT Q11	74%	74%	67%	81%	88%	70%	63%	86%	76%					75%	74%	78%	70%	80%	71%
RXBST Q12	76%	77%	100%	82%	71%	78%	69%	100%	78%					50%	76%	75%	77%	80%	74%
AVERAGE	81.1	81.5	88.9	87.9	82.4	80.2	74.9	90.5	82.3	x	x	x	x	x 75.0	x 80.9	82.6	79.4	84.7	79.1

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER PAC	ALSK NATV	OTHR MUL- TI	HIS- IC	HIS- IC	NOT VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q1 YES	262 100%	5277 100%	50 100%	66 100%	71 100%	75 100%	140 100%	~	~	~	~	23 ~100%	73 100%	171 100%	234 100%	12 100%	197 100%	65 100%
NOT ANSWERED	2	32		1		1	2							2	2		2	
VALID CASES	262	5277	50	66	71	75	140					23	73	171	234	12	197	65
NUMBER OF RESPONDENTS	264 100%	5309 100%	50 100%	67 100%	71 100%	76 100%	142 100%					23 100%	73 100%	173 100%	236 100%	12 100%	197 100%	67 100%



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?

	BANT OT1	BANT OT2	AGE				RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-#	AS-IAN##	NATV ILND#	AMER IND/PAC ALSK#	OTHR##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q3 YES	82 31%	1639 32%	16 33%	23 34%	22 31%	21 28%	46 32%	~	~	~	~	~	5 22%	23 32%	52 30%	71 30%	5 42%	54 28%*	28 42%
NO	181 69%	3549 68%	33 67%	44 66%	49 69%	55 72%	96 68%	~	~	~	~	~	18 78%	50 68%	121 70%	165 70%	7 58%	142 72%*	39 58%
NOT ANSWERED	1	121	1															1	
VALID CASES	263	5188	49	67	71	76	142						23	73	173	236	12	196	67
NUMBER OF RESPONDENTS	264	5309	50	67	71	76	142						23	73	173	236	12	197	67
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q4 NEVER		19 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	9 12%	114 7%	~ 18%	~ 10%	~ 14%	~ 9%	~	~	~	~	~	~	~ 14%	~ 8%	~ 10%	~	~ 10%	~ 15%
USUALLY	15 19%	272 18%	~ 23%	~ 15%	~ 33%	~ 25%	~	~	~	~	~	~ 20%	~ 14%	~ 24%	~ 22%	~	~ 14%	~ 30%
ALWAYS	53 69%	1135 74%	100%~	59%~	75%~	52%~	66%~	~	~	~	~	~ 80%	~ 73%	~ 67%	~ 67%~	100%~	~ 76%	~ 56%
#ALWAYS + USUALLY (NET)	68 88%	1407 91%	100%~	82%~	90%~	86%~	91%~	~	~	~	~	~ 100%	~ 86%	~ 92%	~ 90%~	100%~	~ 90%	~ 85%
TOP BOX SCORE	53 69%	1135 74%	100%~	59%~	75%~	52%~	66%~	~	~	~	~	~ 80%	~ 73%	~ 67%	~ 67%~	100%~	~ 76%	~ 56%
NOT ANSWERED	5	99	2	1	2		2						1	3	4	1	4	1
VALID CASES	77	1540	14	22	20	21	44					5	22	49	67	4	50	27
NUMBER OF RESPONDENTS	82 100%	1639 100%	16 100%	23 100%	22 100%	21 100%	46 100%					5 100%	23 100%	52 100%	71 100%	5 100%	54 100%	28 100%

[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?

	BANT OT1	BANT OT2	AGE				RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC
Q5 YES	169 66%	3464 67%	36 73%	46 72%	41 59%	46 62%	97 70%	~	~	~	~	~	17 74%	45 63%	118 69%	156 67%	6 55%	118 62%*	51 78%
Q5 NO	87 34%	1672 33%	13 27%	18 28%	28 41%	28 38%	42 30%	~	~	~	~	~	6 26%	27 38%	52 31%	77 33%	5 45%	73 38%*	14 22%
NOT ANSWERED	8	173	1	3	2	2	3							1	3	3	1	6	2
VALID CASES	256	5136	49	64	69	74	139						23	72	170	233	11	191	65
NUMBER OF RESPONDENTS	264	5309	50	67	71	76	142						23	73	173	236	12	197	67
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	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?

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q6 NEVER	3 2%	57 2%		3 ~ 7%			1 1%	~	~	~	~	~	1 6%	1 2%	2 2%	2 1%~	1 17%	2 2%	1 2%
SOMETIMES	17 11%	393 12%	3 9%	5 11%	4 11%	5 12%	8 9%	~	~	~	~	~	1 6%	7 16%	10 9%	16 11%~	1 17%	9 8%	8 16%
USUALLY	36 23%	850 26%		10 ~ 22%	11 30%	15 35%	16 18%	~	~	~	~	~	6 38%	9 21%	24 22%	32 22%~	1 17%	23 21%	13 25%
ALWAYS	104 65%	1954 60%	31 91%	28 61%	22 59%	23 53%	66 73%*	~	~	~	~	~	8 50%	26 60%	75 68%	97 66%~	3 50%	75 69%	29 57%
#ALWAYS + USUALLY (NET)	140 88%	2804 86%	31 91%	38 83%	33 89%	38 88%	82 90%	~	~	~	~	~	14 88%	35 81%	99 89%	129 88%~	4 67%	98 90%	42 82%
TOP BOX SCORE	104 65%	1954 60%	31 91%	28 61%	22 59%	23 53%	66 73%*	~	~	~	~	~	8 50%	26 60%	75 68%	97 66%~	3 50%	75 69%	29 57%
NOT ANSWERED	9	210	2		4	3	6						1	2	7	9		9	
VALID CASES	160	3254	34	46	37	43	91						16	43	111	147	6	109	51
NUMBER OF RESPONDENTS	169 100%	3464 100%	36 100%	46 100%	41 100%	46 100%	97 100%						17 100%	45 100%	118 100%	156 100%	6 100%	118 100%	51 100%

[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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC
Q7 NONE	77 30%	1484 30%	11 23%	15 23%	25 38%	26 35%	35 25%	~	~	~	~	~	6 26%	29 41%*	45 27%	72 31%	4 36%	63 34%*	14 21%
1 TIME	72 28%	1437 29%	15 32%	20 31%	18 27%	19 25%	45 33%	~	~	~	~	~	10 43%	12 17%*	56 33%*	67 29%	1 9%	60 32%*	12 18%
2	47 19%	1045 21%	9 19%	14 22%	10 15%	14 19%	26 19%	~	~	~	~	~	4 17%	12 17%	32 19%	40 17%	4 36%	29 16%	18 27%
3	27 11%	518 10%	6 13%	5 8%	8 12%	8 11%	12 9%	~	~	~	~	~	3 13%	8 11%	16 9%	24 10%	~	17 9%	10 15%
4	9 4%	229 5%	2 4%	4 6%	1 2%	2 3%	7 5%	~	~	~	~	~	~	2 3%	7 4%	9 4%	~	4 2%	5 7%
5 TO 9	18 7%	232 5%	4 9%	5 8%	3 5%	6 8%	11 8%	~	~	~	~	~	~	6 9%	11 7%	16 7%	1 9%	12 6%	6 9%
10 OR MORE TIMES	3 1%	79 2%	~	2 3%	1 2%	~	2 1%	~	~	~	~	~	~	1 1%	2 1%	2 0.9%	1 9%	1 0.5%	2 3%
NOT ANSWERED	11	285	3	2	5	1	4							3	4	6	1	11	
VALID CASES	253	5024	47	65	66	75	138						23	70	169	230	11	186	67
NUMBER OF RESPONDENTS	264	5309	50	67	71	76	142						23	73	173	236	12	197	67
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q8 #YES	126 74%	2500 72%	29 83%~	35 71%~	27 68%~	35 74%~	75 73%	~	~	~	~	~	12 75%~	31 79%~	89 73%~	116 75%~	3 60%~	85 71%	41 80%
NO	45 26%	975 28%	6 17%~	14 29%~	13 33%~	12 26%~	28 27%	~	~	~	~	~	4 25%~	8 21%~	33 27%~	39 25%~	2 40%~	35 29%	10 20%
NOT ANSWERED	5	65	1	1	1	2							1	2	2	3	2	3	2
VALID CASES	171	3475	35	49	40	47	103						16	39	122	155	5	120	51
NUMBER OF RESPONDENTS	176	3540	36	50	41	49	103						17	41	124	158	7	123	53
	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, HOW OFTEN DID YOU HAVE YOUR QUESTIONS ANSWERED BY YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER?

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	NO CCC	CCC	
Q9 NEVER	5 3%	83 2%	1 3%	1 2%	1 3%	2 4%	3 3%	~	~	~	~	~	1 6%	1 3%	4 3%	4 3%	1 17%	4 3%	1 2%
SOMETIMES	10 6%	254 7%	2 6%	2 4%	1 3%	5 10%	3 3%	~	~	~	~	~	2 12%	3 8%	6 5%	9 6%	~	9 7%	1 2%
USUALLY	38 22%	708 20%	7 20%	10 20%	10 25%	11 23%	26 25%	~	~	~	~	~	3 18%	7 18%	29 24%	33 21%	2 33%	21 17%*	17 33%
ALWAYS	120 69%	2421 70%	25 71%	37 74%	28 70%	30 63%	71 69%	~	~	~	~	~	11 65%	29 73%	84 68%	110 71%	3 50%	87 72%	33 63%
#ALWAYS + USUALLY (NET)	158 91%	3129 90%	32 91%	47 94%	38 95%	41 85%	97 94%	~	~	~	~	~	14 82%	36 90%	113 92%	143 92%	5 83%	108 89%	50 96%
TOP BOX SCORE	120 69%	2421 70%	25 71%	37 74%	28 70%	30 63%	71 69%	~	~	~	~	~	11 65%	29 73%	84 68%	110 71%	3 50%	87 72%	33 63%
NOT ANSWERED	3	74	1		1	1								1	1	2	1	2	1
VALID CASES	173	3466	35	50	40	48	103						17	40	123	156	6	121	52
NUMBER OF RESPONDENTS	176 100%	3540 100%	36 100%	50 100%	41 100%	49 100%	103 100%						17 100%	41 100%	124 100%	158 100%	7 100%	123 100%	53 100%

[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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER PAC ALSK #	OTH#	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q10 YES	54 32%	1023 30%	10 29%~	19 39%~	7 18%~	18 39%~	32 32%	~	~	~	~	~	5 31%~	14 36%~	37 31%~	47 31%~	4 67%~	30 25%*	24 48%
NO	115 68%	2434 70%	25 71%~	30 61%~	32 82%~	28 61%~	69 68%	~	~	~	~	~	11 69%~	25 64%~	83 69%~	105 69%~	2 33%~	89 75%*	26 52%
NOT ANSWERED	7	83	1	1	2	3	2						1	2	4	6	1	4	3
VALID CASES	169	3457	35	49	39	46	101						16	39	120	152	6	119	50
NUMBER OF RESPONDENTS	176	3540	36	50	41	49	103						17	41	124	158	7	123	53
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]



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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q11 #YES	52 98%	937 94%*	10 100%	18 100%	7 100%	17 94%	30 97%	~	~	~	~	~	5 ~100%	14 ~100%	35 97%	45 98%	4 100%	28 97%	24 100%
NO	1 2%	63 6%*	~	~	~	1 6%	1 3%	~	~	~	~	~	~	~	1 3%	1 2%	~	1 3%	~
NOT ANSWERED	1	23		1			1								1	1		1	
VALID CASES	53	1000	10	18	7	18	31						5	14	36	46	4	29	24
NUMBER OF RESPONDENTS	54	1023	10	19	7	18	32						5	14	37	47	4	30	24
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q12 #YES	42 79%	709 71%	9 90%~	14 78%~	6 86%~	13 72%~	24 75%~	~	~	~	~	~	5 ~100%~	11 85%~	29 78%~	37 80%~	3 75%~	23 79%~	19 79%
NO	11 21%	290 29%	1 10%~	4 22%~	1 14%~	5 28%~	8 25%~	~	~	~	~	~	~	2 ~15%~	8 22%~	9 20%~	1 25%~	6 21%~	5 21%
NOT ANSWERED	1	24	1											1		1		1	
VALID CASES	53	999	10	18	7	18	32						5	13	37	46	4	29	24
NUMBER OF RESPONDENTS	54	1023	10	19	7	18	32						5	14	37	47	4	30	24
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV ILND #	AMER IND/ ALSK #	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q13 #YES	40 75%	780 79%	9 90%~	14 78%~	6 86%~	11 61%~	22 69%~	~	~	~	~	~	5 ~100%~	12 92%~	27 73%~	35 76%~	4 100%~	24 83%~	16 67%
NO	13 25%	209 21%	1 10%~	4 22%~	1 14%~	7 39%~	10 31%~	~	~	~	~	~	~	1 8%~	10 27%~	11 24%~	~	5 17%~	8 33%
NOT ANSWERED	1	34	1											1	1		1		
VALID CASES	53	989	10	18	7	18	32					5	13	37	46	4	29	24	
NUMBER OF RESPONDENTS	54	1023	10	19	7	18	32					5	14	37	47	4	30	24	
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER				
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER PAC ALSK #	IND/ OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q14 WORST HEALTH CARE POSSIBLE		12 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
01		10 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
02		13 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
03	2 1%	13 0.4%	~	~	1 3%	1 2%	1 1%	~	~	~	~	~	~	1 3%	1 0.8%	1 0.6%	1 20%	~	2 4%	
04	2 1%	22 0.6%	~	1 2%	~	1 2%	2 2%	~	~	~	~	~	~	~	2 2%	2 1%	~	2 2%		
05	2 1%	111 3%	~	~	1 3%	1 2%	1 1%	~	~	~	~	~	~	1 0.8%	1 0.6%	~	~	2 2%		
06	7 4%	105 3%	1 3%	2 4%	2 5%	2 4%	6 6%	~	~	~	~	~	~	1 3%	6 5%	7 4%	~	5 4%	2 4%	
07	19 11%	269 8%	4 11%	6 12%	3 8%	6 13%	13 13%	~	~	~	~	~	~	4 10%	14 11%	18 12%	~	11 9%	8 15%	
08	33 19%	725 21%	7 20%	8 16%	7 18%	11 23%	20 19%	~	~	~	~	~	3 18%	6 15%	23 19%	27 17%	1 20%	22 18%	11 21%	
09	41 24%	742 21%	7 20%	10 20%	8 21%	16 33%	27 26%	~	~	~	~	~	~	5 29%	8 21%	33 27%	40 26%	1 20%	30 25%	11 21%
BEST HEALTH CARE POSSIBLE	65 38%	1438 42%	16 46%	22 45%	17 44%	10 21%	33 32%*	~	~	~	~	~	~	9 53%	19 49%	43 35%	60 38%	2 40%	47 39%	18 35%
#8-10 (NET)	139 81%	2905 84%	30 86%	40 82%	32 82%	37 77%	80 78%	~	~	~	~	~	~	17 100%	33 85%	99 80%	127 81%	4 80%	99 83%	40 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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC	
9-10 (NET)	106 62%	2180 63%	23 66%~	32 65%~	25 64%~	26 54%~	60 58%	~	~	~	~	~	14 82%~	27 69%~	76 62%~	100 64%~	3 60%~	77 65%	29 56%
NOT ANSWERED	5	80	1	1	2	1								2	1	2	2	4	1
VALID CASES	171	3460	35	49	39	48	103					17	39	123	156	5	119	52	
NUMBER OF RESPONDENTS	176 100%	3540 100%	36 100%	50 100%	41 100%	49 100%	103 100%					17 100%	41 100%	124 100%	158 100%	7 100%	123 100%	53 100%	
MEAN	8.67	8.70	8.94	8.82	8.69	8.29	8.50					9.35	8.90	8.63	8.72	8.00	8.75	8.48	
p stat_(*=Sig @ p<=.05)		.805	~	~	~	~	.073	~	~	~	~	~	~	~	~	~	~	.279	

[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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q15 NEVER	2 1%	57 2%	~	~	5%~	2	~	~	~	~	~	~	~	~	~	~	~	2 2%
SOMETIMES	12 7%	311 9%	~	11%~	10%~	6%~	8%	~	~	~	~	~	2 5%~	8 7%~	9 6%~	1 17%~	7 6%	5 10%
USUALLY	46 27%	1019 29%	7 20%~	10 21%~	10 26%~	19 40%~	30 29%	~	~	~	~	7 41%~	7 19%~	39 32%~	43 28%~	2 33%~	26 22%*	20 38%
ALWAYS	108 64%	2073 60%	28 80%~	32 68%~	23 59%~	25 53%~	64 63%	~	~	~	~	10 59%~	28 76%~	75 61%~	100 66%~	3 50%~	81 70%*	27 52%
#ALWAYS + USUALLY (NET)	154 92%	3092 89%	35 100%~	42 89%~	33 85%~	44 94%~	94 92%	~	~	~	~	17 100%~	35 95%~	114 93%~	143 94%~	5 83%~	107 92%	47 90%
TOP BOX SCORE	108 64%	2073 60%	28 80%~	32 68%~	23 59%~	25 53%~	64 63%	~	~	~	~	10 59%~	28 76%~	75 61%~	100 66%~	3 50%~	81 70%*	27 52%
NOT ANSWERED	8	80	1	3	2	2	1						4	2	6	1	7	1
VALID CASES	168	3460	35	47	39	47	102					17	37	122	152	6	116	52
NUMBER OF RESPONDENTS	176	3540	36	50	41	49	103					17	41	124	158	7	123	53
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q16 YES	179 70%	3801 75%	7 15%	52 79%	57 84%*	63 85%*	101 72%	~	~	~	~	17 ~ 74%	43 61%	123 72%	158 68%	10 91%	121 64%*	58 87%
NO	77 30%	1296 25%	41 85%	14 21%	11 16%*	11 15%*	40 28%	~	~	~	~	6 ~ 26%	28 39%	48 28%	75 32%	1 9%	68 36%*	9 13%
NOT ANSWERED	8	212	2	1	3	2	1						2	2	3	1	8	
VALID CASES	256	5097	48	66	68	74	141					23	71	171	233	11	189	67
NUMBER OF RESPONDENTS	264 100%	5309 100%	50 100%	67 100%	71 100%	76 100%	142 100%					23 100%	73 100%	173 100%	236 100%	12 100%	197 100%	67 100%

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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q17 YES	27 17%	409 11%	~	16 31%*	6 12%	5 9%*	14 15%	~	~	~	~	~	4 27%~	7 18%~	18 16%~	21 15%~	4 44%~	14 13%	13 24%
NO	135 83%	3206 89%	100%~	5 69%*	35 88%	45 91%*	50 85%	80	~	~	~	~	11 73%~	31 82%~	95 84%~	122 85%~	5 56%~	93 87%	42 76%
NOT ANSWERED	17	186	2	1	6	8	7						2	5	10	15	1	14	3
VALID CASES	162	3615	5	51	51	55	94						15	38	113	143	9	107	55
NUMBER OF RESPONDENTS	179	3801	7	52	57	63	101						17	43	123	158	10	121	58
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q16 = YES]



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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q18 #YES	27	369	16	6	5	14							4	7	18	21	4	14	13
	100%	92%	~100%	~100%	~100%	~100%	~	~	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%	~100%
NO		30																	
		8%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		10																	
VALID CASES	27	399	16	6	5	14							4	7	18	21	4	14	13
NUMBER OF RESPONDENTS	27	409	16	6	5	14							4	7	18	21	4	14	13
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q19 YES	9 4%	214 4%	1 2%	1 2%	4 6%	3 4%	4 3%	~	~	~	~	~	1 4%	2 3%	5 3%	6 3%	2 17%	1 0.5%*	8 12%
NO	248 96%	4864 96%	46 98%	65 98%	65 94%	72 96%	137 97%	~	~	~	~	~	22 96%	70 97%	167 97%	228 97%	10 83%	189 99%*	59 88%
NOT ANSWERED	7	231	3	1	2	1	1							1	1	2		7	
VALID CASES	257	5078	47	66	69	75	141						23	72	172	234	12	190	67
NUMBER OF RESPONDENTS	264	5309	50	67	71	76	142						23	73	173	236	12	197	67
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER					
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q20 NEVER		21 10%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	1 13%	30 14%	~	~	~	1 33%	~	~	~	~	~	~	~	~	~	~	~	~	1 ~100%	~	
USUALLY	1 13%	46 22%	~	~	~	1 33%	1 25%	~	~	~	~	~	~	~	1 20%	1 17%	~	~	~	1 ~14%	
ALWAYS	6 75%	113 54%	~	1 100%	4 100%	1 33%	3 75%	~	~	~	~	~	1 100%	2 100%	4 80%	5 83%	1 100%	~	~	6 ~86%	
#ALWAYS + USUALLY (NET)	7 88%	159 76%	~	1 100%	4 100%	2 67%	4 100%	~	~	~	~	~	1 100%	2 100%	5 100%	6 100%	1 100%	~	~	7 ~100%	
TOP BOX SCORE	6 75%	113 54%	~	1 100%	4 100%	1 33%	3 75%	~	~	~	~	~	1 100%	2 100%	4 80%	5 83%	1 100%	~	~	6 ~86%	
NOT ANSWERED	1	4	1																1	1	
VALID CASES	8	210		1	4	3	4						1	2	5	6	1			1	7
NUMBER OF RESPONDENTS	9	214	1	1	4	3	4						1	2	5	6	2			1	8
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q21 #YES	7 88%	170 83%	1 ~100%	4 ~100%	2 ~67%	3 75%	~	~	~	~	~100%	1 ~100%	2 ~100%	4 ~80%	5 83%	1 ~100%	1 ~100%	6 86%
NO	1 13%	36 17%	~	~	1 ~33%	1 25%	~	~	~	~	~	~	1 ~20%	1 ~17%	~	~	1 ~14%	
NOT ANSWERED	1	8	1												1		1	
VALID CASES	8	206	1	4	3	4					1	2	5	6	1	1	7	
NUMBER OF RESPONDENTS	9	214	1	1	4	3	4				1	2	5	6	2	1	8	
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q22 YES	28 11%	522 10%	6 13%	10 15%	6 9%	6 8%	15 11%	~	~	~	~	~	3 13%	8 11%	18 10%	24 10%	3 25%	10 5%*	18 27%
NO	230 89%	4555 90%	41 87%	56 85%	64 91%	69 92%	126 89%	~	~	~	~	~	20 87%	65 89%	154 90%	211 90%	9 75%	181 95%*	49 73%
NOT ANSWERED	6	232	3	1	1	1	1							1	1	1		6	
VALID CASES	258	5077	47	66	70	75	141						23	73	172	235	12	191	67
NUMBER OF RESPONDENTS	264	5309	50	67	71	76	142						23	73	173	236	12	197	67
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE				RACE					ETHNIC-	HEALTH		CCC				
	OT1	OT2				13	BLCK	AS-	NATV	AMER		HIS-	HIS-	EX &	FAIR	NO	CCC		
	COPA	OHP	<4	4-7	8-12	AND	OR	AFR-	IAN	ILND	NATV	ALSK	MUL-	NOT	VERY	GOOD	POOR	CCC	CCC
	TOT	TOT					WHTE	#	##	#	#	##	TI	IC	IC	GOOD	POOR	CCC	CCC
	CHLD	CHLD																	
Q23																			
NEVER	4	63	1			3	1						1	2	2	4		1	3
	16%	13%	20%	~	~	60%	8%	~	~	~	~	~	33%	25%	13%	18%	~	11%	19%
SOMETIMES	2	78			2		2							2	1	1			2
	8%	16%	~	~	33%	~	15%	~	~	~	~	~	~	13%	5%	50%	~	~	13%
USUALLY	3	122		2		1	3							3	3				3
	12%	24%	~	22%	~	20%	23%	~	~	~	~	~	~	19%	14%	~	~	~	19%
ALWAYS	16	236	4	7	4	1	7						2	6	9	14	1	8	8
	64%	47%	80%	78%	67%	20%	54%	~	~	~	~	~	67%	75%	56%	64%	50%	89%	50%
#ALWAYS + USUALLY (NET)	19	358	4	9	4	2	10						2	6	12	17	1	8	11
	76%	72%	80%	100%	67%	40%	77%	~	~	~	~	~	67%	75%	75%	77%	50%	89%	69%
TOP BOX SCORE	16	236	4	7	4	1	7						2	6	9	14	1	8	8
	64%	47%	80%	78%	67%	20%	54%	~	~	~	~	~	67%	75%	56%	64%	50%	89%	50%
NOT ANSWERED	3	23	1	1		1	2							2	2	1		1	2
VALID CASES	25	499	5	9	6	5	13						3	8	16	22	2	9	16
NUMBER OF RESPONDENTS	28	522	6	10	6	6	15						3	8	18	24	3	10	18
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q22 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q24 #YES	20 80%	347 69%	4 80%	7 78%	6 100%	3 60%	12 92%	~	~	~	~	~	2 67%	5 63%	14 88%	17 77%	2 100%	8 89%	12 75%
NO	5 20%	153 31%	1 20%	2 22%	~	2 40%	1 8%	~	~	~	~	~	1 33%	3 38%	2 13%	5 23%	~	1 11%	4 25%
NOT ANSWERED	3	22	1	1		1	2								2	2	1	1	2
VALID CASES	25	500	5	9	6	5	13						3	8	16	22	2	9	16
NUMBER OF RESPONDENTS	28 100%	522 100%	6 100%	10 100%	6 100%	6 100%	15 100%						3 100%	8 100%	18 100%	24 100%	3 100%	10 100%	18 100%

[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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q25 YES	37 14%	769 15%	2 4%	11 17%	9 13%	15 20%	20 14%	~	~	~	~	~	6 26%	8 11%	27 16%	32 14%	4 33%	8 4%*	29 44%
NO	219 86%	4303 85%	45 96%	54 83%	60 87%	60 80%	120 86%	~	~	~	~	~	17 74%	64 89%	144 84%	201 86%	8 67%	182 96%*	37 56%
NOT ANSWERED	8	237	3	2	2	1	2							1	2	3		7	1
VALID CASES	256	5072	47	65	69	75	140						23	72	171	233	12	190	66
NUMBER OF RESPONDENTS	264	5309	50	67	71	76	142						23	73	173	236	12	197	67
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%



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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER PAC ALSK #	MUL-OTHR ##	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & GOOD	EX & FAIR & POOR	NO CCC	CCC	
Q26 NEVER	8 22%	94 13%	~	18%~	33%~	20%~	4 20%	~	~	~	~	~	2 33%	1 13%	6 22%	4 13%	3 100%	2 25%	6 21%
SOMETIMES	5 14%	122 16%	~	~	33%~	13%~	5 25%	~	~	~	~	~	~	~	5 19%	5 16%	~	~	5 18%
USUALLY	7 19%	178 24%	1 100%	4 36%	1 11%	1 7%	4 20%	~	~	~	~	~	2 33%	1 13%	6 22%	7 22%	~	2 25%	5 18%
ALWAYS	16 44%	353 47%	~	45%~	22%~	60%~	7 35%	~	~	~	~	~	2 33%	6 75%	10 37%	16 50%	~	4 50%	12 43%
#ALWAYS + USUALLY (NET)	23 64%	531 71%	1 100%	9 82%	3 33%	10 67%	11 55%	~	~	~	~	~	4 67%	7 88%	16 59%	23 72%	~	6 75%	17 61%
TOP BOX SCORE	16 44%	353 47%	~	45%~	22%~	60%~	7 35%	~	~	~	~	~	2 33%	6 75%	10 37%	16 50%	~	4 50%	12 43%
NOT ANSWERED	1	22	1														1		1
VALID CASES	36	747	1	11	9	15	20						6	8	27	32	3	8	28
NUMBER OF RESPONDENTS	37	769	2	11	9	15	20						6	8	27	32	4	8	29
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q27 #YES	23 64%	428 57%	9 ~	5 82%	9 56%	60%	12 60%	~	~	~	~	~	4 67%	5 63%	17 63%	20 63%	2 67%	5 63%	18 64%
NO	13 36%	317 43%	1 100%	2 18%	4 44%	6 40%	8 40%	~	~	~	~	~	2 33%	3 38%	10 37%	12 38%	1 33%	3 38%	10 36%
NOT ANSWERED	1	24	1														1		1
VALID CASES	36	745	1	11	9	15	20						6	8	27	32	3	8	28
NUMBER OF RESPONDENTS	37	769	2	11	9	15	20						6	8	27	32	4	8	29
	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?

	BANT OT1	BANT OT2	AGE				RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q28 YES	57 22%	1124 22%	6 13%	17 26%	14 20%	20 27%	33 23%	~	~	~	~	~	6 26%	13 18%	39 23%	49 21%	4 33%	25 13%*	32 48%
NO	198 78%	3915 78%	41 87%	48 74%	55 80%	54 73%	108 77%	~	~	~	~	~	17 74%	58 82%	133 77%	184 79%	8 67%	164 87%*	34 52%
NOT ANSWERED	9	270	3	2	2	2	1							2	1	3		8	1
VALID CASES	255	5039	47	65	69	74	141						23	71	172	233	12	189	66
NUMBER OF RESPONDENTS	264	5309	50	67	71	76	142						23	73	173	236	12	197	67
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNICITY	HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q29 #YES	39 72%	673 62%	4 80%~	14 88%~	10 71%~	11 58%~	22 71%~	~	~	~	~	~	5 ~ 83%~	8 62%~	27 73%~	32 68%~	3 100%~	16 70%~	23 74%
NO	15 28%	416 38%	1 20%~	2 13%~	4 29%~	8 42%~	9 29%~	~	~	~	~	~	1 ~ 17%~	5 38%~	10 27%~	15 32%~	~	7 30%~	8 26%
NOT ANSWERED	3	35	1	1		1	2								2	2	1	2	1
VALID CASES	54	1089	5	16	14	19	31						6	13	37	47	3	23	31
NUMBER OF RESPONDENTS	57	1124	6	17	14	20	33						6	13	39	49	4	25	32
	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?

	BANT OT1	BANT OT2	AGE				RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC
Q30 YES	211 84%	4437 89%*	41 87%~	57 88%	52 78%	61 84%	119 86%	~	~	~	~	~	21 91%~	58 81%	144 86%	194 84%~	8 67%~	154 83%	57 86%
NO	41 16%	550 11%*	6 13%~	8 12%	15 22%	12 16%	20 14%	~	~	~	~	~	2 9%~	14 19%	24 14%	36 16%~	4 33%~	32 17%	9 14%
NOT ANSWERED	12	322	3	2	4	3	3							1	5	6		11	1
VALID CASES	252	4987	47	65	67	73	139						23	72	168	230	12	186	66
NUMBER OF RESPONDENTS	264	5309	50	67	71	76	142						23	73	173	236	12	197	67
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR MUL- TI ##	HIS- IC IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q31 NONE	50 25%	1154 27%	7 18%~	12 22%	17 34%	14 24%	26 22%	~	~	~	~	~	4 19%~	17 30%	31 22%	47 25%~	2 25%~	43 29%*	7 12%
1 TIME	77 38%	1496 35%	11 28%~	21 38%	19 38%	26 45%	45 39%	~	~	~	~	~	10 48%~	17 30%	56 40%	72 39%~	1 13%~	58 40%	19 33%
2	36 18%	893 21%	10 25%~	9 16%	10 20%	7 12%	21 18%	~	~	~	~	~	4 19%~	10 18%	25 18%	32 17%~	2 25%~	22 15%	14 25%
3	23 11%	389 9%	7 18%~	8 15%	1 2%*	7 12%	13 11%	~	~	~	~	~	3 14%~	6 11%	16 12%	21 11%~	1 13%~	12 8%	11 19%
4	6 3%	157 4%	1 3%~	1 2%	1 2%	3 5%	5 4%	~	~	~	~	~	~	1 2%	5 4%	6 3%~	~	5 3%	1 2%
5 TO 9	10 5%	138 3%	3 8%~	4 7%	2 4%	1 2%	6 5%	~	~	~	~	~	~	4 7%	6 4%	8 4%~	2 25%~	6 4%	4 7%
10 OR MORE TIMES	1 0.5%	34 0.8%	1 3%~	~	~	~	~	~	~	~	~	~	~	1 2%	~	1 0.5%~	~	~	1 2%
NOT ANSWERED	8	176	1	2	2	3	3							2	5	7		8	
VALID CASES	203	4261	40	55	50	58	116						21	56	139	187	8	146	57
NUMBER OF RESPONDENTS	211	4437	41	57	52	61	119						21	58	144	194	8	154	57
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q31A ALWAYS	6 4%	65 2%	3 9%~	2 ~	2 6%~	1 2%~	~	~	~	~	~	~	1 6%~	5 13%~	1 0.9%~	6 4%~	~	5 5%	1 2%
USUALLY	4 3%	49 2%	1 3%~	2 5%~	~	1 2%~	~	~	~	~	~	~	~	4 10%~	~	3 2%~	1 17%~	3 3%	1 2%
SOMETIMES	12 8%	202 7%	2 6%~	3 7%~	5 15%~	2 5%~	4 4%	~	~	~	~	~	1 6%~	6 15%~	5 5%~	11 8%~	5 ~	10 10%	2 4%
NEVER	131 86%	2765 90%	27 82%~	38 88%~	26 79%~	40 91%~	86 96%*	~	~	~	~	~	15 88%~	24 62%~	102 94%~	120 86%~	5 83%~	85 83%	46 92%
#NEVER + SOMETIMES (NET)	143 93%	2967 96%	29 88%~	41 95%~	31 94%~	42 95%~	90 100%~	~	~	~	~	~	16 94%~	30 77%~	107 99%~	131 94%~	5 83%~	95 92%	48 96%
TOP BOX SCORE	131 86%	2765 90%	27 82%~	38 88%~	26 79%~	40 91%~	86 96%*	~	~	~	~	~	15 88%~	24 62%~	102 94%~	120 86%~	5 83%~	85 83%	46 92%
NOT ANSWERED		26																	
VALID CASES	153	3081	33	43	33	44	90						17	39	108	140	6	103	50
NUMBER OF RESPONDENTS	153 100%	3107 100%	33 100%	43 100%	33 100%	44 100%	90 100%						17 100%	39 100%	108 100%	140 100%	6 100%	103 100%	50 100%

[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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q32 NEVER	1 0.7%	64 2%*	1 3%~	~	~	~	~	~	~	~	~	~	~	1 3%~	~	1 0.7%~	~	1 1%	
SOMETIMES	6 4%	100 3%	1 3%~	2 5%~	2 6%~	1 2%~	4 4%	~	~	~	~	~	~	1 3%~	4 4%~	5 4%~	~	6 6%*	
USUALLY	21 14%	428 14%	4 12%~	2 5%~	7 21%~	8 18%~	11 12%	~	~	~	~	~	1 6%~	7 18%~	13 12%~	18 13%~	1 17%~	12 12%	9 18%
ALWAYS	125 82%	2486 81%	27 82%~	39 91%~	24 73%~	35 80%~	75 83%	~	~	~	~	~	16 94%~	30 77%~	91 84%~	116 83%~	5 83%~	84 82%	41 82%
#ALWAYS + USUALLY (NET)	146 95%	2914 95%	31 94%~	41 95%~	31 94%~	43 98%~	86 96%	~	~	~	~	~	17 100%~	37 95%~	104 96%~	134 96%~	6 100%~	96 93%~	50 100%
TOP BOX SCORE	125 82%	2486 81%	27 82%~	39 91%~	24 73%~	35 80%~	75 83%	~	~	~	~	~	16 94%~	30 77%~	91 84%~	116 83%~	5 83%~	84 82%	41 82%
NOT ANSWERED		29																	
VALID CASES	153	3078	33	43	33	44	90						17	39	108	140	6	103	50
NUMBER OF RESPONDENTS	153 100%	3107 100%	33 100%	43 100%	33 100%	44 100%	90 100%						17 100%	39 100%	108 100%	140 100%	6 100%	103 100%	50 100%

[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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q33 NEVER	2 1%	29 0.9%	~	2%	~	2%	1 1%	~	~	~	~	~	1 3%	1 0.9%	2 1%	~	2 2%	
SOMETIMES	5 3%	120 4%	3%	2%	6%	2%	3 3%	~	~	~	~	~	1 3%	4 4%	5 4%	~	4 4%	1 2%
USUALLY	22 14%	422 14%	3%	6%	18%	16%	11 12%	~	~	~	~	2 12%	8 21%	13 12%	19 14%	1 17%	13 13%	9 18%
ALWAYS	124 81%	2505 81%	29 88%	35 81%	25 76%	35 80%	75 83%	~	~	~	~	15 88%	29 74%	90 83%	114 81%	5 83%	84 82%	40 80%
#ALWAYS + USUALLY (NET)	146 95%	2927 95%	32 97%	41 95%	31 94%	42 95%	86 96%	~	~	~	~	17 100%	37 95%	103 95%	133 95%	6 100%	97 94%	49 98%
TOP BOX SCORE	124 81%	2505 81%	29 88%	35 81%	25 76%	35 80%	75 83%	~	~	~	~	15 88%	29 74%	90 83%	114 81%	5 83%	84 82%	40 80%
NOT ANSWERED		31																
VALID CASES	153	3076	33	43	33	44	90					17	39	108	140	6	103	50
NUMBER OF RESPONDENTS	153	3107	33	43	33	44	90					17	39	108	140	6	103	50
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND #	AMER ALSK NATV ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & GOOD POOR	EX & FAIR & POOR	NO CCC	CCC	
Q34 NEVER	1 0.7%	30 1%	~	~	~	2%~	1 1%	~	~	~	~	~	~	1 ~0.9%	1 ~0.7%	~	1 1%	~	
SOMETIMES	6 4%	85 3%	1 3%~	2 5%~	1 3%~	2 5%~	2 2%	~	~	~	~	~	1 6%~	2 5%~	4 4%~	6 4%~	~	5 5%	1 2%
USUALLY	17 11%	368 12%	2 6%~	4 9%~	6 19%~	5 11%~	13 14%	~	~	~	~	~	1 6%~	3 8%~	14 13%~	15 11%~	1 17%~	11 11%	6 12%
ALWAYS	127 84%	2589 84%	30 91%~	37 86%~	24 77%~	36 82%~	74 82%	~	~	~	~	~	15 88%~	34 87%~	89 82%~	118 84%~	5 83%~	84 83%	43 86%
#ALWAYS + USUALLY (NET)	144 95%	2957 96%	32 97%~	41 95%~	30 97%~	41 93%~	87 97%	~	~	~	~	~	16 94%~	37 95%~	103 95%~	133 95%~	6 100%~	95 94%	49 98%
TOP BOX SCORE	127 84%	2589 84%	30 91%~	37 86%~	24 77%~	36 82%~	74 82%	~	~	~	~	~	15 88%~	34 87%~	89 82%~	118 84%~	5 83%~	84 83%	43 86%
NOT ANSWERED	2	35			2													2	
VALID CASES	151	3072	33	43	31	44	90						17	39	108	140	6	101	50
NUMBER OF RESPONDENTS	153	3107	33	43	33	44	90						17	39	108	140	6	103	50
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALS #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q35 YES	104 69%	2086 68%	5 15%~	30 70%~	28 93%~	41 93%~	68 76%*	~	~	~	~	~	12 ~ 71%~	22 56%~	80 74%~	97 69%~	5 83%~	63 63%*	41 82%
NO	46 31%	964 32%	28 85%~	13 30%~	2 7%~	3 7%~	22 24%*	~	~	~	~	~	5 ~ 29%~	17 44%~	28 26%~	43 31%~	1 17%~	37 37%*	9 18%
NOT ANSWERED	3	57				3													3
VALID CASES	150	3050	33	43	30	44	90						17	39	108	140	6	100	50
NUMBER OF RESPONDENTS	153 100%	3107 100%	33 100%	43 100%	33 100%	44 100%	90 100%						17 100%	39 100%	108 100%	140 100%	6 100%	103 100%	50 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	NO CCC	CCC	
Q36 NEVER	2 2%	25 1%		1 3%~	1 4%~		2 3%~								2 3%~	2 2%~	1 2%~	1 2%~	
SOMETIMES	6 6%	112 5%		2 7%~	3 11%~	1 2%~	5 7%~							1 5%~	5 6%~	4 4%~	2 40%~	4 6%~	2 5%
USUALLY	21 20%	405 20%	1 20%~	5 17%~	5 18%~	10 24%~	11 16%~						5 42%~	4 18%~	16 20%~	18 19%~	2 40%~	12 19%~	9 22%
ALWAYS	75 72%	1518 74%	4 80%~	22 73%~	19 68%~	30 73%~	50 74%~						7 58%~	17 77%~	57 71%~	73 75%~	1 20%~	46 73%~	29 71%
#ALWAYS + USUALLY (NET)	96 92%	1923 93%	5 100%~	27 90%~	24 86%~	40 98%~	61 90%~						12 100%~	21 95%~	73 91%~	91 94%~	3 60%~	58 92%~	38 93%
TOP BOX SCORE	75 72%	1518 74%	4 80%~	22 73%~	19 68%~	30 73%~	50 74%~						7 58%~	17 77%~	57 71%~	73 75%~	1 20%~	46 73%~	29 71%
NOT ANSWERED		26																	
VALID CASES	104	2060	5	30	28	41	68						12	22	80	97	5	63	41
NUMBER OF RESPONDENTS	104 100%	2086 100%	5 100%	30 100%	28 100%	41 100%	68 100%						12 100%	22 100%	80 100%	97 100%	5 100%	63 100%	41 100%

[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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q37 NEVER	2 1%	72 2%	1 3%	~	~	1 2%	1 1%	~	~	~	~	~	~	1 3%	1 0.9%	2 1%	~	2 2%	
SOMETIMES	8 5%	238 8%	1 3%	~	4 13%	3 7%	6 7%	~	~	~	~	~	~	1 3%	7 6%	8 6%	~	5 5%	3 6%
USUALLY	35 23%	692 23%	5 15%	13 30%	9 30%	8 19%	18 20%	~	~	~	~	~	5 29%	11 29%	23 21%	31 22%	2 33%	20 20%	15 31%
ALWAYS	104 70%	2035 67%	26 79%	30 70%	17 57%	31 72%	65 72%	~	~	~	~	~	12 71%	25 66%	77 71%	98 71%	4 67%	73 73%	31 63%
#ALWAYS + USUALLY (NET)	139 93%	2727 90%	31 94%	43 100%	26 87%	39 91%	83 92%	~	~	~	~	~	17 100%	36 95%	100 93%	129 93%	6 100%	93 93%	46 94%
TOP BOX SCORE	104 70%	2035 67%	26 79%	30 70%	17 57%	31 72%	65 72%	~	~	~	~	~	12 71%	25 66%	77 71%	98 71%	4 67%	73 73%	31 63%
NOT ANSWERED	4	70			3	1								1		1		3	1
VALID CASES	149	3037	33	43	30	43	90						17	38	108	139	6	100	49
NUMBER OF RESPONDENTS	153	3107	33	43	33	44	90						17	39	108	140	6	103	50
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR- #	AS- IAN ##	NATV ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q38 #YES	137 92%	2662 87%*	33 100%~	41 95%~	26 90%~	37 84%~	82 91%	~	~	~	~	~	16 94%~	37 95%~	98 91%~	130 93%~	4 67%~	89 90%	48 96%
NO	12 8%	384 13%*	~	2 5%~	3 10%~	7 16%~	8 9%	~	~	~	~	~	1 6%~	2 5%~	10 9%~	10 7%~	2 33%~	10 10%	2 4%
NOT ANSWERED	4	61				4													4
VALID CASES	149	3046	33	43	29	44	90						17	39	108	140	6	99	50
NUMBER OF RESPONDENTS	153	3107	33	43	33	44	90						17	39	108	140	6	103	50
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q39 YES	68 46%	1240 41%	12 38%~	20 47%~	12 41%~	24 55%~	42 47%	~	~	~	~	~	7 41%~	19 49%~	49 45%~	64 46%~	4 67%~	34 35%*	34 68%
NO	80 54%	1789 59%	20 63%~	23 53%~	17 59%~	20 45%~	48 53%	~	~	~	~	~	10 59%~	20 51%~	59 55%~	76 54%~	2 33%~	64 65%*	16 32%
NOT ANSWERED	5	78	1		4													5	
VALID CASES	148	3029	32	43	29	44	90						17	39	108	140	6	98	50
NUMBER OF RESPONDENTS	153	3107	33	43	33	44	90						17	39	108	140	6	103	50
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND #	AMER IND/PAC ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q40 NEVER	5 7%	81 7%	~	~	18%~	13%~	3 7%~	~	~	~	~	~	~	2 11%~	3 6%~	5 8%~	~	3 9%~	2 6%
SOMETIMES	8 12%	139 12%	2 17%~	1 5%~	1 9%~	4 17%~	5 12%~	~	~	~	~	~	1 14%~	2 11%~	6 12%~	7 11%~	1 25%~	4 12%~	4 12%
USUALLY	14 21%	342 28%	1 8%~	4 20%~	1 9%~	8 33%~	10 24%~	~	~	~	~	~	~	4 22%~	10 20%~	14 22%~	~	6 18%~	8 24%
ALWAYS	40 60%	645 53%	9 75%~	15 75%~	7 64%~	9 38%~	24 57%~	~	~	~	~	~	6 86%~	10 56%~	30 61%~	37 59%~	3 75%~	20 61%~	20 59%
#ALWAYS + USUALLY (NET)	54 81%	987 82%	10 83%~	19 95%~	8 73%~	17 71%~	34 81%~	~	~	~	~	~	6 86%~	14 78%~	40 82%~	51 81%~	3 75%~	26 79%~	28 82%
TOP BOX SCORE	40 60%	645 53%	9 75%~	15 75%~	7 64%~	9 38%~	24 57%~	~	~	~	~	~	6 86%~	10 56%~	30 61%~	37 59%~	3 75%~	20 61%~	20 59%
NOT ANSWERED	1	33			1									1		1		1	
VALID CASES	67	1207	12	20	11	24	42						7	18	49	63	4	33	34
NUMBER OF RESPONDENTS	68	1240	12	20	12	24	42						7	19	49	64	4	34	34
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER				
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q41 WORST PERSONAL DOCTOR POSSIBLE	1 0.5%	6 0.1%	~	~	~	2%	1 0.9%	~	~	~	~	~	~	~	1 ~0.7%	1 ~0.5%	~	~	1 ~0.7%	
01	1 0.5%	4 0.1%	~	~	2%	~	1 ~0.9%	~	~	~	~	~	~	~	1 ~0.7%	1 ~0.5%	~	~	1 ~0.7%	
02		12 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03	1 0.5%	23 0.5%	~	2%	~	~	1 ~0.9%	~	~	~	~	~	~	~	1 ~0.7%	1 ~0.5%	~	~	1 ~0.7%	
04		19 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
05	6 3%	105 2%	~	2 4%	3 6%	1 2%	4 3%	~	~	~	~	~	1 5%	~	5 4%	6 3%	~	~	5 3%	1 2%
06	3 2%	97 2%	1 3%	2 4%	~	~	2 2%	~	~	~	~	~	~	1 2%	2 1%	3 2%	~	~	3 2%	
07	13 7%	261 6%	3 8%	1 2%*	2 4%	7 12%	9 8%	~	~	~	~	~	1 5%	2 3%	11 8%	12 6%	1 13%	~	10 7%	3 5%
08	34 17%	672 16%	4 10%	6 11%	10 21%	14 25%	19 17%	~	~	~	~	~	4 ~19%	11 19%	23 17%	32 17%	1 13%	~	22 15%	12 21%
09	42 21%	839 20%	5 13%	11 20%	10 21%	16 28%	27 23%	~	~	~	~	~	5 ~24%	10 17%	32 23%	39 21%	3 38%	~	27 19%	15 27%
BEST PERSONAL DOCTOR POSSIBLE	99 50%	2208 52%	27 68%	33 59%	21 45%	18 32%*	51 44%	~	~	~	~	~	10 ~48%	34 59%	63 45%	94 50%	3 38%	~	74 51%	25 45%
#8-10 (NET)	175 88%	3719 88%	36 90%	50 89%	41 87%	48 84%	97 84%	~	~	~	~	~	19 ~90%	55 95%*	118 85%	165 87%	7 88%	~	123 85%	52 93%

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?

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	HIS- PAN- IC	NOT VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
9-10 (NET)	141 71%	3047 72%	32 80%	44 79%	31 66%	34 60%	78 68%	~	~	~	~	~	15 71%	44 76%	95 68%	133 70%	6 75%	101 70%	40 71%
NOT ANSWERED	11	191	1	1	5	4	4							5	5			10	1
VALID CASES	200	4246	40	56	47	57	115					21	58	139	189	8		144	56
NUMBER OF RESPONDENTS	211 100%	4437 100%	41 100%	57 100%	52 100%	61 100%	119 100%					21 100%	58 100%	144 100%	194 100%	8 100%		154 100%	57 100%
MEAN	8.91	8.98	9.35	9.09	8.72	8.60	8.73					9.00	9.28	8.78	8.90	9.00		8.86	9.05
p stat_(*=Sig @ p<=.05)		.543		~.322		~.069	.040*	~	~	~	~	~	~.010*	.028*	~	~		~.346	

[ASKED IF Q30 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALS #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q42 YES	48 24%	1096 26%	3 8%	14 25%	11 23%	20 35%*	34 30%*	~	~	~	~	~	7 33%	7 12%*	41 29%*	44 23%~	4 57%~	7 5%*	41 73%
NO	151 76%	3160 74%	37 93%~	41 75%	36 77%~	37 65%*	81 70%*	~	~	~	~	~	14 67%~	50 88%*	98 71%*	145 77%~	3 43%~	136 95%*	15 27%
NOT ANSWERED	12	181	1	2	5	4	4							1	5	5	1	11	1
VALID CASES	199	4256	40	55	47	57	115						21	57	139	189	7	143	56
NUMBER OF RESPONDENTS	211 100%	4437 100%	41 100%	57 100%	52 100%	61 100%	119 100%						21 100%	58 100%	144 100%	194 100%	8 100%	154 100%	57 100%

[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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q43 #YES	42 89%	955 90%	3 100%	13 93%	8 80%	18 90%	30 88%	~	~	~	~	~	5 83%	7 100%	35 88%	38 88%	4 100%	7 100%	35 88%
NO	5 11%	109 10%	~	1 7%	2 20%	2 10%	4 12%	~	~	~	~	~	1 17%	~	5 13%	5 12%	~	~	5 13%
NOT ANSWERED	1	32				1							1		1	1			1
VALID CASES	47	1064	3	14	10	20	34						6	7	40	43	4	7	40
NUMBER OF RESPONDENTS	48	1096	3	14	11	20	34						7	7	41	44	4	7	41
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q44 #YES	40 85%	906 85%~100%	3 86%~	12 80%~	8 85%~	17 85%~	29 85%~	~	~	~	~	~	4 67%~	7 100%~	33 83%~	37 86%~	3 75%~	6 86%~	34 85%
NO	7 15%	155 15%~	~	2 14%~	2 20%~	3 15%~	5 15%~	~	~	~	~	~	2 33%~	7 ~	7 18%~	6 14%~	1 25%~	1 14%~	6 15%
NOT ANSWERED	1	35				1							1	1	1				1
VALID CASES	47	1061	3	14	10	20	34						6	7	40	43	4	7	40
NUMBER OF RESPONDENTS	48	1096	3	14	11	20	34						7	7	41	44	4	7	41
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALS #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q45 YES	39 16%	856 17%	4 9%	12 18%	7 11%	16 22%	21 15%	~	~	~	~	5 22%	13 18%	26 15%	36 15%	3 25%	14 8%*	25 38%
NO	210 84%	4125 83%	43 91%	53 82%	56 89%	58 78%	120 85%	~	~	~	~	18 78%	59 82%	146 85%	198 85%	9 75%	169 92%*	41 62%
NOT ANSWERED	15	328	3	2	8	2	1						1	1	2		14	1
VALID CASES	249	4981	47	65	63	74	141					23	72	172	234	12	183	66
NUMBER OF RESPONDENTS	264 100%	5309 100%	50 100%	67 100%	71 100%	76 100%	142 100%					23 100%	73 100%	173 100%	236 100%	12 100%	197 100%	67 100%

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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q46 NEVER	1 3%	59 7%	~	~	~	1 7%	~	~	~	~	~	~	~	1 8%	~	1 3%	~	1 8%	
SOMETIMES	4 11%	127 15%	~	1 8%	2 29%	1 7%	2 10%	~	~	~	~	~	~	2 15%	2 8%	2 6%	2 67%	2 15%	2 8%
USUALLY	14 37%	239 29%	~	5 42%	4 57%	5 33%	7 35%	~	~	~	~	~	3 60%	4 31%	10 40%	14 40%	~	3 23%	11 44%
ALWAYS	19 50%	410 49%	4 100%	6 50%	1 14%	8 53%	11 55%	~	~	~	~	~	2 40%	6 46%	13 52%	18 51%	1 33%	7 54%	12 48%
#ALWAYS + USUALLY (NET)	33 87%	649 78%	4 100%	11 92%	5 71%	13 87%	18 90%	~	~	~	~	~	5 100%	10 77%	23 92%	32 91%	1 33%	10 77%	23 92%
TOP BOX SCORE	19 50%	410 49%	4 100%	6 50%	1 14%	8 53%	11 55%	~	~	~	~	~	2 40%	6 46%	13 52%	18 51%	1 33%	7 54%	12 48%
NOT ANSWERED	1	21				1	1								1	1		1	
VALID CASES	38	835	4	12	7	15	20						5	13	25	35	3	13	25
NUMBER OF RESPONDENTS	39	856	4	12	7	16	21						5	13	26	36	3	14	25
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q47 NONE	1 3%	48 6%	~	~	14%	~	5%	~	~	~	~	~	~	4%	3%	~	~	4%
1 SPECIALIST	21 55%	509 61%	75% 33%	33% 43%	43% 73%	11 73%	12 60%	~	~	~	~	2 40%	7 54%	14 56%	20 57%	1 33%	12 92%	9 36%
2	10 26%	170 20%	~	58%	~	20%	4 20%	~	~	~	~	2 40%	4 31%	6 24%	10 29%	~	1 8%	9 36%
3	3 8%	53 6%	25% 8%	8% 14%	14% ~	1 ~	1 5%	~	~	~	~	1 20%	1 8%	2 8%	2 6%	1 33%	~	3 12%
4	1 3%	27 3%	~	~	14%	~	1 5%	~	~	~	~	~	~	1 4%	~	1 33%	~	1 4%
5 OR MORE SPECIALISTS	2 5%	25 3%	~	~	14%	7% 7%	1 5%	~	~	~	~	~	1 8%	1 4%	2 6%	~	~	2 8%
NOT ANSWERED	1	24				1	1							1	1		1	
VALID CASES	38	832	4	12	7	15	20					5	13	25	35	3	13	25
NUMBER OF RESPONDENTS	39	856	4	12	7	16	21					5	13	26	36	3	14	25
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q48 WORST SPECIALIST POSSIBLE		7 0.9%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01		1 0.1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02		5 0.6%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03		7 0.9%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
04		5 0.6%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
05		20 3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
06		24 3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
07	3 8%	51 7%~	~	~	17%~	14%~	16%~	~	~	~	~	~	~	3 13%~	2 6%~	1 33%~	1 8%~	2 8%
08	5 14%	135 17%~	~	8%~	33%~	14%~	5%~	~	~	~	~	1 20%~	3 25%~	2 8%~	5 15%~	~	2 17%~	3 13%
09	8 22%	171 22%~	~	33%~	~	29%~	11%~	~	~	~	~	1 20%~	5 42%~	3 13%~	7 21%~	1 33%~	3 25%~	5 21%
BEST SPECIALIST POSSIBLE	20 56%	353 45%~	4 100%~	7 58%~	3 50%~	6 43%~	13 68%~	~	~	~	~	3 60%~	4 33%~	16 67%~	19 58%~	1 33%~	6 50%~	14 58%

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?

	BANT OT1	BANT OT2	AGE				RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
#8-10 (NET)	33 92%	659 85%	4 100%	12 100%	5 83%	12 86%	16 84%	~	~	~	~	5 100%	12 100%	21 88%	31 94%	2 67%	11 92%	22 92%
9-10 (NET)	28 78%	524 67%	4 100%	11 92%	3 50%	10 71%	15 79%	~	~	~	~	4 80%	9 75%	19 79%	26 79%	2 67%	9 75%	19 79%
NOT ANSWERED	1	5				1							1		1		1	
VALID CASES	36	779	4	12	6	14	19					5	12	24	33	3	12	24
NUMBER OF RESPONDENTS	37	784	4	12	6	15	19					5	13	24	34	3	13	24
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%
MEAN	9.25	8.73	10.0	9.50	8.83	9.00	9.32					9.40	9.08	9.33	9.30	8.67	9.17	9.29
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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q49 YES	62 25%	1241 25%	13 28%~	17 27%	18 29%	14 19%	27 19%*	~	~	~	~	6 ~ 27%~	27 38%*	34 20%*	57 24%~	4 33%~	37 21%*	25 37%
NO	185 75%	3699 75%	34 72%~	46 73%	45 71%	60 81%	115 81%*	~	~	~	~	16 ~ 73%~	44 62%*	138 80%*	176 76%~	8 67%~	143 79%*	42 63%
NOT ANSWERED	17	369	3	4	8	2						1	2	1	3		17	
VALID CASES	247	4940	47	63	63	74	142					22	71	172	233	12	180	67
NUMBER OF RESPONDENTS	264 100%	5309 100%	50 100%	67 100%	71 100%	76 100%	142 100%					23 100%	73 100%	173 100%	236 100%	12 100%	197 100%	67 100%

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?

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q50 NEVER	4 6%	36 3%		2 ~ 12%	1 ~ 6%	1 ~ 7%	2 7%	~	~	~	~	~	~	2 7%	2 6%	3 5%	1 25%	1 3%	3 12%
SOMETIMES	16 26%	228 19%	2 15%	2 12%	7 39%	5 36%	7 26%	~	~	~	~	~	2 33%	6 22%	10 29%	13 23%	3 75%	9 24%	7 28%
USUALLY	7 11%	350 29%	2 15%	1 6%	4 22%	~	3 11%	~	~	~	~	~	2 33%	2 7%	5 15%	7 12%	~	4 11%	3 12%
ALWAYS	35 56%	598 49%	9 69%	12 71%	6 33%	8 57%	15 56%	~	~	~	~	~	2 33%	17 63%	17 50%	34 60%	~	23 62%	12 48%
#ALWAYS + USUALLY (NET)	42 68%	948 78%	11 85%	13 76%	10 56%	8 57%	18 67%	~	~	~	~	~	4 67%	19 70%	22 65%	41 72%	~	27 73%	15 60%
TOP BOX SCORE	35 56%	598 49%	9 69%	12 71%	6 33%	8 57%	15 56%	~	~	~	~	~	2 33%	17 63%	17 50%	34 60%	~	23 62%	12 48%
NOT ANSWERED		29																	
VALID CASES	62	1212	13	17	18	14	27						6	27	34	57	4	37	25
NUMBER OF RESPONDENTS	62	1241	13	17	18	14	27						6	27	34	57	4	37	25
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q51 NEVER	2 3%	17 1%	2 ~ 12%~	1 ~	1 ~	3 ~	1 4%~	~	~	~	~	~	~	1 4%~	1 3%~	2 4%~	1 ~	4 ~	2 8%
SOMETIMES	6 10%	87 7%	1 8%~	1 6%~	1 6%~	3 21%~	2 7%~	~	~	~	~	~	~	3 11%~	3 9%~	5 9%~	1 25%~	4 11%~	2 8%
USUALLY	13 21%	274 23%	2 15%~	1 6%~	7 39%~	3 21%~	6 22%~	~	~	~	~	~	~	6 22%~	6 18%~	10 18%~	2 50%~	7 19%~	6 24%
ALWAYS	41 66%	831 69%	10 77%~	13 76%~	10 56%~	8 57%~	18 67%~	~	~	~	~	~	6 ~100%~	17 63%~	24 71%~	40 70%~	1 25%~	26 70%~	15 60%
#ALWAYS + USUALLY (NET)	54 87%	1105 91%	12 92%~	14 82%~	17 94%~	11 79%~	24 89%~	~	~	~	~	~	6 ~100%~	23 85%~	30 88%~	50 88%~	3 75%~	33 89%~	21 84%
TOP BOX SCORE	41 66%	831 69%	10 77%~	13 76%~	10 56%~	8 57%~	18 67%~	~	~	~	~	~	6 ~100%~	17 63%~	24 71%~	40 70%~	1 25%~	26 70%~	15 60%
NOT ANSWERED		32																	
VALID CASES	62	1209	13	17	18	14	27						6	27	34	57	4	37	25
NUMBER OF RESPONDENTS	62 100%	1241 100%	13 100%	17 100%	18 100%	14 100%	27 100%						6 100%	27 100%	34 100%	57 100%	4 100%	37 100%	25 100%

[ASKED IF Q49 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALS #	OTHR MUL- TI ##	HIS- IC IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q52 YES	100 40%	1806 37%	21 45%	27 42%	27 43%	25 34%	49 35%	~	~	~	~	~	11 48%	38 52%*	59 35%*	92 39%	5 42%	74 41%	26 39%
NO	148 60%	3092 63%	26 55%	38 58%	36 57%	48 66%	90 65%	~	~	~	~	~	12 52%	35 48%*	111 65%*	141 61%	7 58%	108 59%	40 61%
NOT ANSWERED	16	411	3	2	8	3	3							3	3			15	1
VALID CASES	248	4898	47	65	63	73	139						23	73	170	233	12	182	66
NUMBER OF RESPONDENTS	264 100%	5309 100%	50 100%	67 100%	71 100%	76 100%	142 100%						23 100%	73 100%	173 100%	236 100%	12 100%	197 100%	67 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
PQ53 NEVER	9 4%	83 2%	2 4%~	2 3%	4 7%	1 1%	7 5%	~	~	~	~	~	1 5%~	1 1%	8 5%	8 3%~	1 8%~	5 3%	4 6%
SOMETIMES	12 5%	357 7%	5 11%~	3 5%	3 5%	1 1%*	3 2%*	~	~	~	~	~	1 5%~	8 11%*	4 2%*	9 4%~	2 17%~	12 7%~	
USUALLY	33 14%	646 13%	6 13%~	6 10%	10 17%	11 15%	19 14%	~	~	~	~	~	5 23%~	9 13%	24 14%	32 14%~	1 8%~	22 13%	11 17%
ALWAYS	188 78%	3743 78%	34 72%~	52 83%	43 72%	59 82%	108 79%	~	~	~	~	~	15 68%~	54 75%	132 79%	180 79%~	8 67%~	137 78%	51 77%
#ALWAYS + USUALLY (NET)	221 91%	4389 91%	40 85%~	58 92%	53 88%	70 97%*	127 93%	~	~	~	~	~	20 91%~	63 88%	156 93%	212 93%~	9 75%~	159 90%	62 94%
TOP BOX SCORE	188 78%	3743 78%	34 72%~	52 83%	43 72%	59 82%	108 79%	~	~	~	~	~	15 68%~	54 75%	132 79%	180 79%~	8 67%~	137 78%	51 77%
NOT ANSWERED	6	69		2	3	1	2						1	1	2	4		6	
VALID CASES	242	4829	47	63	60	72	137						22	72	168	229	12	176	66
NUMBER OF RESPONDENTS	248	4898	47	65	63	73	139						23	73	170	233	12	182	66
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER				
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q54 WORST HEALTH PLAN POSSIBLE		17 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01	1 0.4%	14 0.3%	~	~	~	1%	1 0.7%	~	~	~	~	~	~	~	1 0.6%	~	1 8%	1 0.6%	~	~
02		21 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03	2 0.8%	35 0.7%	~	2%	2%	~	2 1%	~	~	~	~	~	~	~	2 1%	1 0.4%	1 8%	1 0.6%	1 1%	1
04	4 2%	62 1%	~	5%	2%	~	3 2%	~	~	~	~	~	1 4%	~	4 2%*	3 1%	1 8%	1 0.6%	1 4%	3
05	20 8%	266 5%	4 9%	4 6%	7 11%	5 7%	14 10%	~	~	~	~	~	2 9%	1 1%*	18 11%*	19 8%	1 8%	13 7%	7 10%	7
06	9 4%	237 5%	1 2%	1 2%	4 6%	3 4%	7 5%	~	~	~	~	~	~	~	2 3%	7 4%	9 4%	~	7 4%	2 3%
07	24 10%	471 10%	6 13%	4 6%	7 11%	7 9%	16 11%	~	~	~	~	~	~	4 17%	3 4%*	21 12%*	23 10%	1 8%	13 7%	11 16%
08	44 18%	939 19%	10 22%	2 3%*	14 22%	18 24%	28 20%	~	~	~	~	~	~	4 17%	11 15%	33 19%	40 17%	3 25%	31 17%	13 19%
09	38 15%	844 17%	5 11%	9 14%	8 13%	16 22%	23 16%	~	~	~	~	~	~	4 17%	9 12%	29 17%	38 16%	~	29 16%	9 13%
BEST HEALTH PLAN POSSIBLE	105 43%	1982 41%	20 43%	40 63%*	21 33%	24 32%*	46 33%*	~	~	~	~	~	~	8 35%	47 64%*	56 33%*	101 43%	4 33%	84 47%*	21 31%
#8-10 (NET)	187 76%	3765 77%	35 76%	51 80%	43 68%	58 78%	97 69%*	~	~	~	~	~	~	16 70%	67 92%*	118 69%*	179 76%	7 58%	144 80%*	43 64%

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?

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ PAC ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	HIS- PAN- IC	NOT VERY GOOD & FAIR & POOR	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
9-10 (NET)	143 58%	2826 58%	25 54%~	49 77%*	29 46%*	40 54%	69 49%*	~	~	~	~	~	12 52%~	56 77%*	85 50%*	139 59%~	4 33%~	113 63%*	30 45%
NOT ANSWERED	17	421	4	3	8	2	2							2	2			17	
VALID CASES	247	4888	46	64	63	74	140					23	73	171	234	12	180	67	
NUMBER OF RESPONDENTS	264 100%	5309 100%	50 100%	67 100%	71 100%	76 100%	142 100%					23 100%	73 100%	173 100%	236 100%	12 100%	197 100%	67 100%	
MEAN	8.46	8.47	8.54	8.84	8.08	8.39	8.10					8.26	9.27	8.11	8.53	7.00	8.64	7.97	
p stat_(*=Sig @ p<=.05)		.933	~.048*	.063	.702	.000*	~	~	~	~	~	~.000*	0.000*	~	~	~.015*			

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALS #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q55 YES	83 34%	1910 39%	15 32%~	31 48%*	15 25%	22 30%	52 37%	~	~	~	~	~	7 ~ 30%~	23 32%	60 35%	78 33%~	5 50%~	40 22%*	43 65%
NO	162 66%	3030 61%	32 68%~	33 52%*	46 75%	51 70%	88 63%	~	~	~	~	~	16 ~ 70%~	48 68%	111 65%	156 67%~	5 50%~	139 78%*	23 35%
NOT ANSWERED	19	369	3	3	10	3	2							2	2	2	2	18	1
VALID CASES	245	4940	47	64	61	73	140						23	71	171	234	10	179	66
NUMBER OF RESPONDENTS	264 100%	5309 100%	50 100%	67 100%	71 100%	76 100%	142 100%						23 100%	73 100%	173 100%	236 100%	12 100%	197 100%	67 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER				
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q56 NEVER		42 2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	3 4%	156 8%	~	1 3%	2 14%	~	2 4%	~	~	~	~	~	1 14%	~	3 5%	2 3%	1 20%	~	3 7%	~
USUALLY	26 32%	483 26%	2 13%	11 35%	3 21%	10 45%	20 39%	~	~	~	~	~	2 29%	4 17%	22 37%	25 32%	1 20%	10 26%	16 37%	~
ALWAYS	53 65%	1206 64%	13 87%	19 61%	9 64%	12 55%	29 57%	~	~	~	~	~	4 57%	19 83%	34 58%	50 65%	3 60%	29 74%	24 56%	~
#ALWAYS + USUALLY (NET)	79 96%	1689 90%	15 100%	30 97%	12 86%	22 100%	49 96%	~	~	~	~	~	6 86%	23 100%	56 95%	75 97%	4 80%	39 100%	40 93%	~
TOP BOX SCORE	53 65%	1206 64%	13 87%	19 61%	9 64%	12 55%	29 57%	~	~	~	~	~	4 57%	19 83%	34 58%	50 65%	3 60%	29 74%	24 56%	~
NOT ANSWERED	1	23			1		1								1	1		1		
VALID CASES	82	1887	15	31	14	22	51						7	23	59	77	5	39	43	
NUMBER OF RESPONDENTS	83 100%	1910 100%	15 100%	31 100%	15 100%	22 100%	52 100%						7 100%	23 100%	60 100%	78 100%	5 100%	40 100%	43 100%	

[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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q57 #YES	56 67%	1118 60%	6 40%~	21 68%~	11 73%~	18 82%~	32 62%~	~	~	~	~	~	4 57%~	19 83%~	37 62%~	53 68%~	3 60%~	24 60%~	32 74%
NO	27 33%	755 40%	9 60%~	10 32%~	4 27%~	4 18%~	20 38%~	~	~	~	~	~	3 43%~	4 17%~	23 38%~	25 32%~	2 40%~	16 40%~	11 26%
NOT ANSWERED		37																	
VALID CASES	83	1873	15	31	15	22	52						7	23	60	78	5	40	43
NUMBER OF RESPONDENTS	83	1910	15	31	15	22	52						7	23	60	78	5	40	43
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC
Q57A YES	182 76%	3983 82%*	20 45%~	49 79%	50 81%	63 88%*	100 73%	~	~	~	~	~	18 78%~	58 81%	122 73%	173 76%~	9 82%~	124 71%*	58 89%
NO	58 24%	876 18%*	24 55%~	13 21%	12 19%	9 13%*	37 27%	~	~	~	~	~	5 22%~	14 19%	44 27%	55 24%~	2 18%~	51 29%*	7 11%
NOT ANSWERED	24	450	6	5	9	4	5							1	7	8	1	22	2
VALID CASES	240	4859	44	62	62	72	137						23	72	166	228	11	175	65
NUMBER OF RESPONDENTS	264	5309	50	67	71	76	142						23	73	173	236	12	197	67
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

Q57B IN THE LAST 6 MONTHS, DID YOUR CHILD GO TO A DENTIST'S OFFICE OR CLINIC FOR CARE?

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q57B YES	129 54%	2993 61%*	15 33%~	37 59%	37 62%	40 55%	72 52%	~	~	~	~	~	14 ~ 61%~	36 51%	91 54%	124 54%~	5 45%~	85 48%*	44 68%
NO	112 46%	1901 39%*	30 67%~	26 41%	23 38%	33 45%	67 48%	~	~	~	~	~	9 ~ 39%~	34 49%	78 46%	105 46%~	6 55%~	91 52%*	21 32%
NOT ANSWERED	23	415	5	4	11	3	3							3	4	7	1	21	2
VALID CASES	241	4894	45	63	60	73	139						23	70	169	229	11	176	65
NUMBER OF RESPONDENTS	264 100%	5309 100%	50 100%	67 100%	71 100%	76 100%	142 100%						23 100%	73 100%	173 100%	236 100%	12 100%	197 100%	67 100%

Q57C IN THE LAST 6 MONTHS, HOW OFTEN DID THE DENTISTS OR DENTAL STAFF EXPLAIN WHAT THEY WERE DOING WHILE TREATING YOUR CHILD?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER				
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q57C NEVER	5 4%	52 2%	~	2 6%~	1 3%~	2 5%~	3 4%	~	~	~	~	~	~	1 8%~	1 3%~	4 5%~	3 3%~	2 40%~	2 2%~	3 7%
SOMETIMES	7 6%	168 6%	~	3 8%~	2 6%~	2 5%~	6 9%	~	~	~	~	~	~	~	1 3%~	6 7%~	7 6%~	~	2 2%~	5 11%
USUALLY	22 18%	532 18%	13%~	2 14%~	5 17%~	6 24%~	9 16%	~	~	~	~	~	2 15%~	9 25%~	13 15%~	21 18%~	1 20%~	14 17%~	8 18%	
ALWAYS	91 73%	2201 75%	87%~	13 72%~	26 75%~	27 66%~	25 66%~	50 71%	~	~	~	~	10 77%~	25 69%~	64 74%~	89 74%~	2 40%~	63 78%~	28 64%	
#ALWAYS + USUALLY (NET)	113 90%	2733 93%	100%~	15 86%~	31 92%~	33 89%~	34 89%~	61 87%	~	~	~	~	12 92%~	34 94%~	77 89%~	110 92%~	3 60%~	77 95%~	36 82%	
TOP BOX SCORE	91 73%	2201 75%	87%~	13 72%~	26 75%~	27 66%~	25 66%~	50 71%	~	~	~	~	10 77%~	25 69%~	64 74%~	89 74%~	2 40%~	63 78%~	28 64%	
NOT ANSWERED	4	40		1	1	2	2						1		4	4		4		
VALID CASES	125	2953	15	36	36	38	70						13	36	87	120	5	81	44	
NUMBER OF RESPONDENTS	129	2993	15	37	37	40	72						14	36	91	124	5	85	44	
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%	

Q57D IN THE LAST 6 MONTHS, IF YOUR CHILD NEEDED TO SEE A DENTIST RIGHT AWAY BECAUSE OF A DENTAL EMERGENCY, DID HE/SHE GET TO SEE A DENTIST AS SOON AS YOU WANTED?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q57D NEVER	30 25%	609 28%	6 29%	6 21%	7 21%	11 32%	17 27%	~	~	~	~	~	10 10%	20 26%	25 23%	5 45%	19 22%	11 33%	
SOMETIMES	20 17%	384 18%	2 10%	5 17%	8 24%	5 15%	9 14%	~	~	~	~	~	1 10%	11 14%	17 16%	3 27%	14 16%	6 18%	
USUALLY	26 22%	484 22%	5 24%	4 14%	7 21%	10 29%	15 24%	~	~	~	~	~	4 40%	19 25%	24 22%	2 18%	18 21%	8 24%	
ALWAYS	42 36%	716 33%	8 38%	14 48%	12 35%	8 24%	22 35%	~	~	~	~	~	4 40%	26 34%	41 38%	1 9%	34 40%	8 24%	
#ALWAYS + USUALLY (NET)	68 58%	1200 55%	13 62%	18 62%	19 56%	18 53%	37 59%	~	~	~	~	~	8 80%	45 59%	65 61%	3 27%	52 61%	16 48%	
TOP BOX SCORE	42 36%	716 33%	8 38%	14 48%	12 35%	8 24%	22 35%	~	~	~	~	~	4 40%	26 34%	41 38%	1 9%	34 40%	8 24%	
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	124	2639	26	31	30	37	78						10	30	92	122	1	93	31
NOT ANSWERED	22	477	3	7	7	5	1						3	2	5	7		19	3
VALID CASES	118	2193	21	29	34	34	63						10	41	76	107	11	85	33
NUMBER OF RESPONDENTS	264	5309	50	67	71	76	142						23	73	173	236	12	197	67
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%



Q57E USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS EXTREMELY DIFFICULT AND 10 IS EXTREMELY EASY, WHAT NUMBER WOULD YOU USE TO RATE HOW EASY IT WAS FOR YOU TO FIND A DENTIST FOR YOUR CHILD?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q57E EXTREMELY DIFFICULT	11 4%	164 3%	2 5%	1 2%	5 7%	3 4%	8 6%	~	~	~	~	~	2 9%	1 1%	10 6%*	8 4%	3 25%	6 3%	5 8%
01	9 4%	92 2%	3 7%	~	2 3%	4 5%	5 4%	~	~	~	~	~	3 14%	~	8 5%	8 4%	1 8%	4 2%	5 8%
02	7 3%	75 1%	~	3 5%	~	4 5%	4 3%	~	~	~	~	~	2 9%	1 1%	6 4%	7 3%	~	4 2%	3 5%
03	6 2%	133 3%	2 5%	2 3%	1 1%	1 1%	3 2%	~	~	~	~	~	1 5%	1 1%	5 3%	5 2%	1 8%	5 3%	1 2%
04	4 2%	87 2%	~	~	3 4%	1 1%	3 2%	~	~	~	~	~	~	1 1%	3 2%	4 2%	~	2 1%	2 3%
05	25 10%	371 7%	6 14%	6 9%	6 9%	7 9%	16 12%	~	~	~	~	~	2 9%	5 7%	20 12%	24 11%	1 8%	21 11%	4 6%
06	10 4%	203 4%	3 7%	1 2%	2 3%	4 5%	6 4%	~	~	~	~	~	~	3 4%	7 4%	10 4%	~	7 4%	3 5%
07	20 8%	375 7%	~	5 8%	5 7%	10 13%	10 7%	~	~	~	~	~	1 5%	7 10%	13 8%	19 8%	1 8%	15 8%	5 8%
09	70 28%	1657 33%	12 27%	13 20%	21 31%	24 32%	35 26%	~	~	~	~	~	4 18%	13 19%*	42 26%	52 23%	3 25%	49 26%	21 32%
EXTREMELY EASY	90 36%	1890 37%	16 36%	34 52%*	23 34%	17 23%*	44 33%	~	~	~	~	~	7 32%	38 54%*	50 30%*	88 39%	2 17%	74 40%*	16 25%
#8-10 (NET)	160 63%	3547 70%*	28 64%	47 72%	44 65%	41 55%	79 59%	~	~	~	~	~	11 50%	51 73%*	92 56%*	140 62%	5 42%	123 66%	37 57%
9-10 (NET)	160 63%	3547 70%*	28 64%	47 72%	44 65%	41 55%	79 59%	~	~	~	~	~	11 50%	51 73%*	92 56%*	140 62%	5 42%	123 66%	37 57%

Continued

Q57E USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS EXTREMELY DIFFICULT AND 10 IS EXTREMELY EASY, WHAT NUMBER WOULD YOU USE TO RATE HOW EASY IT WAS FOR YOU TO FIND A DENTIST FOR YOUR CHILD?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
88		1																	
NOT ANSWERED	12	261	6	2	3	1	8						1	3	9	11		10	2
VALID CASES	252	5047	44	65	68	75	134						22	70	164	225	12	187	65
NUMBER OF RESPONDENTS	264	5309	50	67	71	76	142						23	73	173	236	12	197	67
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%
MEAN	7.59	8.02	7.39	8.31	7.54	7.12	7.28						6.05	8.54	7.06	7.62	5.25	7.85	6.83
p stat_(*=Sig @ p<=.05)		.018*		~.015*	.893	.115	.078	~	~	~	~	~	~.000*	.000*	~	~	~.036*		

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q58 EXCELLENT	108 44%	2100 43%	22 48%	34 53%	26 41%	26 35%	61 43%	~	~	~	~	10 43%	33 46%	73 42%	108 46%	~	89 49%*	19 28%
VERY GOOD	92 37%	1734 35%	18 39%	18 28%	24 38%	32 43%	55 39%	~	~	~	~	10 43%	22 31%	70 40%	92 39%	~	64 35%	28 42%
GOOD	36 15%	854 17%	5 11%	8 13%	10 16%	13 18%	21 15%	~	~	~	~	2 9%	12 17%	24 14%	36 15%	~	21 12%	15 22%
FAIR	12 5%	210 4%	1 2%	4 6%	4 6%	3 4%	5 4%	~	~	~	~	1 4%	5 7%	6 3%	12 ~100%	~	7 4%	5 7%
POOR		17 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
#EXCELLENT + VERY GOOD + GOOD (NET)	236 95%	4688 95%	45 98%	60 94%	60 94%	71 96%	137 96%	~	~	~	~	22 96%	67 93%	167 97%	236 100%	~	174 96%	62 93%
NOT ANSWERED	16	394	4	3	7	2							1				16	
VALID CASES	248	4915	46	64	64	74	142					23	72	173	236	12	181	67
NUMBER OF RESPONDENTS	264	5309	50	67	71	76	142					23	73	173	236	12	197	67
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC
Q59 EXCELLENT	113 45%	2151 44%	30 64%~	35 55%	21 33%*	27 36%	58 41%	~	~	~	~	~	10 43%~	39 53%	72 42%	112 47%~	1 8%~	102 56%*	11 16%
VERY GOOD	63 25%	1382 28%	8 17%~	14 22%	20 31%	21 28%	41 29%	~	~	~	~	~	4 17%~	16 22%	47 27%	60 25%~	3 25%~	44 24%	19 28%
GOOD	51 20%	930 19%	8 17%~	10 16%	14 22%	19 26%	28 20%	~	~	~	~	~	5 22%~	16 22%	35 20%	48 20%~	2 17%~	29 16%*	22 33%
FAIR	18 7%	366 7%	1 2%~	5 8%	6 9%	6 8%	11 8%	~	~	~	~	~	4 17%~	2 3%*	15 9%	13 6%~	5 42%~	6 3%*	12 18%
POOR	4 2%	88 2%	~	~	3 5%	1 1%	4 3%*	~	~	~	~	~	~	~	4 2%*	3 1%~	1 8%~	1 0.5%	3 4%
#EXCELLENT + VERY GOOD + GOOD (NET)	227 91%	4463 91%	46 98%~	59 92%	55 86%	67 91%	127 89%	~	~	~	~	~	19 83%~	71 97%*	154 89%*	220 93%~	6 50%~	175 96%*	52 78%
NOT ANSWERED	15	392	3	3	7	2													15
VALID CASES	249	4917	47	64	64	74	142						23	73	173	236	12	182	67
NUMBER OF RESPONDENTS	264 100%	5309 100%	50 100%	67 100%	71 100%	76 100%	142 100%						23 100%	73 100%	173 100%	236 100%	12 100%	197 100%	67 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q60 YES	52 21%	1056 22%	6 13%	13 20%	14 22%	19 26%	29 20%	~	~	~	~	~	8 35%	13 18%	38 22%	47 20%	5 42%	11 6%*	41 61%
NO	197 79%	3853 78%	41 87%	51 80%	50 78%	55 74%	113 80%	~	~	~	~	~	15 65%	60 82%	135 78%	189 80%	7 58%	171 94%*	26 39%
NOT ANSWERED	15	400	3	3	7	2													15
VALID CASES	249	4909	47	64	64	74	142						23	73	173	236	12	182	67
NUMBER OF RESPONDENTS	264	5309	50	67	71	76	142						23	73	173	236	12	197	67
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q61 YES	39 75%	843 81%	5 83%~	8 62%~	9 64%~	17 89%~	23 79%~	~	~	~	~	~	6 75%~	9 69%~	29 76%~	36 77%~	3 60%~	1 9%~	38 93%
NO	13 25%	192 19%	1 17%~	5 38%~	5 36%~	2 11%~	6 21%~	~	~	~	~	~	2 25%~	4 31%~	9 24%~	11 23%~	2 40%~	10 91%~	3 7%
NOT ANSWERED		21																	
VALID CASES	52	1035	6	13	14	19	29						8	13	38	47	5	11	41
NUMBER OF RESPONDENTS	52	1056	6	13	14	19	29						8	13	38	47	5	11	41
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q62																		
YES	36 95%	748 91%	3 75%	8 100%	9 100%	16 94%	22 96%	~	~	~	~	~100%	8 89%	28 97%	34 94%	2 100%	36 ~	36 97%
NO	2 5%	77 9%	1 25%	~	~	1 6%	1 4%	~	~	~	~	~	1 11%	1 3%	2 6%	~	1 100%	1 3%
NOT ANSWERED	1	18	1												1			1
VALID CASES	38	825	4	8	9	17	23				6	9	29	36	2		1	37
NUMBER OF RESPONDENTS	39	843	5	8	9	17	23				6	9	29	36	3		1	38
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-#	AS-IAN##	NATV ILND#	AMER HAW/IND/PAC ALSK#	OTHR##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
Q63 YES	44 18%	832 17%	5 11%	13 20%	11 18%	15 20%	28 20%	~	~	~	~	~	7 30%	8 11%	35 20%	39 17%	5 42%	~	6 3%*	38 57%
NO	203 82%	4059 83%	42 89%	51 80%	51 82%	59 80%	114 80%	~	~	~	~	~	16 70%	63 89%	138 80%	195 83%	7 58%	~	174 97%*	29 43%
NOT ANSWERED	17	418	3	3	9	2								2		2			17	
VALID CASES	247	4891	47	64	62	74	142						23	71	173	234	12		180	67
NUMBER OF RESPONDENTS	264	5309	50	67	71	76	142						23	73	173	236	12		197	67
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%		100%	100%



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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q64 YES	36 86%	689 85%	3 75%	12 92%	9 82%	12 86%	25 93%	~	~	~	~	~	6 86%	5 63%	31 91%	33 87%	3 75%	36 97%	
NO	6 14%	123 15%	1 25%	1 8%	2 18%	2 14%	2 7%	~	~	~	~	~	1 14%	3 38%	3 9%	5 13%	1 25%	5 100%	1 3%
NOT ANSWERED	2	20	1			1	1							1	1	1	1	1	1
VALID CASES	42	812	4	13	11	14	27					7	8	34	38	4	5	37	
NUMBER OF RESPONDENTS	44	832	5	13	11	15	28					7	8	35	39	5	6	38	
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR MUL- TI ##	HIS- IC IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q65 YES	36 100%	662 97%	3 100%	12 100%	9 100%	12 100%	25 100%	~	~	~	~	~	6 100%	5 100%	31 100%	33 100%	3 100%	36 100%
NO		19 3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		8																
VALID CASES	36	681	3	12	9	12	25						6	5	31	33	3	36
NUMBER OF RESPONDENTS	36	689	3	12	9	12	25						6	5	31	33	3	36
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q63 = YES AND Q64 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q66 YES	28 11%	644 13%	2 4%	9 14%	9 14%	8 11%	18 13%	~	~	~	~	~	2 9%	7 10%	20 12%	23 10%	5 42%	7 4%*	21 32%
NO	217 89%	4243 87%	43 96%	55 86%	54 86%	65 89%	122 87%	~	~	~	~	~	21 91%	64 90%	151 88%	209 90%	7 58%	172 96%*	45 68%
NOT ANSWERED	19	422	5	3	8	3	2							2	2	4		18	1
VALID CASES	245	4887	45	64	63	73	140						23	71	171	232	12	179	66
NUMBER OF RESPONDENTS	264	5309	50	67	71	76	142						23	73	173	236	12	197	67
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q67 YES	19 76%	508 81%~	7 ~ 78%	7 88%	5 71%	14 82%	~	~	~	~	~100%	2 50%	3 84%	16 76%	3 75%	19 ~ 95%		
NO	6 24%	121 19%~100%	1 22%	2 13%	1 29%	2 18%	~	~	~	~	~	3 50%	3 16%	5 24%	1 25%	5 100%	1 5%	
NOT ANSWERED	3	15	1		1	1							1	1	2	1	2	1
VALID CASES	25	629	1	9	8	7	17				2	6	19	21	4	5	20	
NUMBER OF RESPONDENTS	28	644	2	9	9	8	18				2	7	20	23	5	7	21	
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q68 YES	19 100%	477 96%	7 ~100%	7 ~100%	5 ~100%	14 ~100%	~	~	~	~	~	2 ~100%	3 ~100%	16 ~100%	16 ~100%	3 ~100%	19 ~100%	
NO		22 4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		9																
VALID CASES	19	499	7	7	5	14						2	3	16	16	3	19	
NUMBER OF RESPONDENTS	19	508	7	7	5	14						2	3	16	16	3	19	
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q69 YES	31 12%	558 11%	5 11%	12 19%	9 14%	5 7%*	19 13%	~	~	~	~	~	2 9%	9 12%	21 12%	28 12%	3 25%	11 6%*	20 30%
NO	218 88%	4342 89%	42 89%	52 81%	55 86%	69 93%*	123 87%	~	~	~	~	~	21 91%	64 88%	152 88%	208 88%	9 75%	171 94%*	47 70%
NOT ANSWERED	15	409	3	3	7	2												15	
VALID CASES	249	4900	47	64	64	74	142						23	73	173	236	12	182	67
NUMBER OF RESPONDENTS	264 100%	5309 100%	50 100%	67 100%	71 100%	76 100%	142 100%						23 100%	73 100%	173 100%	236 100%	12 100%	197 100%	67 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALS #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q70 YES	20 74%	389 72%	2 67%	8 67%	6 75%	4 100%	13 76%	~	~	~	~	2 100%	5 63%	15 79%	19 76%	1 50%	2 25%	18 95%
NO	7 26%	149 28%	1 33%	4 33%	2 25%	~	4 24%	~	~	~	~	~	3 38%	4 21%	6 24%	1 50%	6 75%	1 5%
NOT ANSWERED	4	20	2		1	1	2						1	2	3	1	3	1
VALID CASES	27	538	3	12	8	4	17				2	8	19	25	2	8	19	
NUMBER OF RESPONDENTS	31	558	5	12	9	5	19				2	9	21	28	3	11	20	
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q71																		
YES	18 90%	357 93%	1 50%	8 100%	6 100%	3 75%	12 92%	~	~	~	~	~100%	4 80%	14 93%	17 89%	1 100%	18 ~100%	
NO	2 10%	27 7%	1 50%	~	~	1 25%	1 8%	~	~	~	~	~	1 20%	1 7%	2 11%	~	2 ~100%	
NOT ANSWERED		5																
VALID CASES	20	384	2	8	6	4	13					2	5	15	19	1	2	18
NUMBER OF RESPONDENTS	20	389	2	8	6	4	13					2	5	15	19	1	2	18
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q72 YES	37 15%	813 17%	2 4%	12 19%	8 13%	15 20%	22 16%	~	~	~	~	~	6 26%	8 11%	28 16%	34 15%	3 27%	1 0.6%*	36 55%
NO	209 85%	4085 83%	45 96%	52 81%	53 87%	59 80%	119 84%	~	~	~	~	~	17 74%	63 89%	144 84%	200 85%	8 73%	179 99%*	30 45%
NOT ANSWERED	18	411	3	3	10	2	1							2	1	2	1	17	1
VALID CASES	246	4898	47	64	61	74	141						23	71	172	234	11	180	66
NUMBER OF RESPONDENTS	264	5309	50	67	71	76	142						23	73	173	236	12	197	67
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q73 YES	34 94%	726 92%	2 100%	12 100%	8 100%	12 86%	20 95%	~	~	~	~	~	6 100%	7 88%	26 96%	31 94%	3 100%	34 94%
NO	2 6%	64 8%	~	~	~	14 5%	1 5%	~	~	~	~	~	1 13%	1 4%	2 6%	~	2 6%	
NOT ANSWERED	1	23				1	1							1	1		1	
VALID CASES	36	790	2	12	8	14	21						6	8	27	33	3	36
NUMBER OF RESPONDENTS	37	813	2	12	8	15	22						6	8	28	34	3	1 36
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q72 = YES]

NQ74 WHAT IS YOUR CHILD'S AGE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NQ74																		
3 YEARS OLD OR LESS	50 19%	908 17%	50 100%	~	~	~	28 20%	~	~	~	~	3 13%	13 18%	33 19%	45 19%	1 8%	45 23%*	5 7%
4 TO 7 YEARS OLD	67 25%	1228 23%	~	67 ~100%	~	~	31 22%	~	~	~	~	8 35%	24 33%	39 23%	60 25%	4 33%	49 25%	18 27%
8 TO 12 YEARS OLD	71 27%	1650 31%	~	~	71 ~100%	~	42 30%	~	~	~	~	6 26%	15 21%	48 28%	60 25%	4 33%	54 27%	17 25%
13 OR OLDER	76 29%	1523 29%	~	~	76 ~100%	~	41 29%	~	~	~	~	6 26%	21 29%	53 31%	71 30%	3 25%	49 25%*	27 40%
VALID CASES	264	5309	50	67	71	76	142					23	73	173	236	12	197	67
NUMBER OF RESPONDENTS	264	5309	50	67	71	76	142					23	73	173	236	12	197	67
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

NQ75 IS YOUR CHILD MALE OR FEMALE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NQ75																			
MALE	148 56%	2736 52%	27 54%	42 63%	39 55%	40 53%	78 55%	~	~	~	~	~ 70%	16 53%	39 57%	98 56%	132 58%	7 58%	106 54%	42 63%
FEMALE	116 44%	2573 48%	23 46%	25 37%	32 45%	36 47%	64 45%	~	~	~	~	~ 30%	7 47%	34 43%	75 44%	104 42%	5 42%	91 46%	25 37%
VALID CASES	264	5309	50	67	71	76	142					23	73	173	236	12	197	67	
NUMBER OF RESPONDENTS	264 100%	5309 100%	50 100%	67 100%	71 100%	76 100%	142 100%					23 100%	73 100%	173 100%	236 100%	12 100%	197 100%	67 100%	

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q76 HISPANIC OR LATINO	73 30%	1726 35%*	13 28%~	24 38%	15 24%	21 28%	~	~	~	~	~	~	73 ~100%~	~	67 29%~	5 45%~	59 33%	14 21%
NOT HISPANIC OR LATINO	173 70%	3146 65%*	33 72%~	39 62%	48 76%	53 72%	141 100%~	~	~	~	~	23 ~100%~	173 ~100%~	167 71%~	6 55%~	121 67%	52 79%	
NOT ANSWERED	18	437	4	4	8	2	1							2	1	17	1	
VALID CASES	246	4872	46	63	63	74	141					23	73	173	234	11	180	66
NUMBER OF RESPONDENTS	264 100%	5309 100%	50 100%	67 100%	71 100%	76 100%	142 100%					23 100%	73 100%	173 100%	236 100%	12 100%	197 100%	67 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER PAC	IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.1 YES	197 75%	3787 71%	41 82%	47 70%	52 73%	57 75%	142 100%	~	~	~	~	~	21 91%	34 47%*	162 94%*	189 80%	7 58%	136 69%*	61 91%
NO	67 25%	1522 29%	9 18%	20 30%	19 27%	19 25%	~	~	~	~	~	~	2 9%	39 53%*	11 6%*	47 20%	5 42%	61 31%*	6 9%
VALID CASES	264	5309	50	67	71	76	142						23	73	173	236	12	197	67
NUMBER OF RESPONDENTS	264 100%	5309 100%	50 100%	67 100%	71 100%	76 100%	142 100%						23 100%	73 100%	173 100%	236 100%	12 100%	197 100%	67 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER PAC	IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.2 YES	11 4%	204 4%	3 6%	2 3%	2 3%	4 5%	~	~	~	~	~	~	10 43%	1 1%	10 6%*	11 5%	~	5 3%	6 9%
NO	253 96%	5105 96%	47 94%	65 97%	69 97%	72 95%	142 100%	~	~	~	~	~	13 57%	72 99%	163 94%*	225 95%	12 100%	192 97%	61 91%
VALID CASES	264	5309	50	67	71	76	142						23	73	173	236	12	197	67
NUMBER OF RESPONDENTS	264 100%	5309 100%	50 100%	67 100%	71 100%	76 100%	142 100%						23 100%	73 100%	173 100%	236 100%	12 100%	197 100%	67 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.3 YES	8 3%	184 3%	~	3%	1%	7%	~	~	~	~	~	2 9%	2 3%	6 3%	8 3%	~	6 3%	2 3%
NO	256 97%	5125 97%	50 100%	65 97%	70 99%	71 93%	142 100%	~	~	~	~	21 91%	71 97%	167 97%	228 97%	12 100%	191 97%	65 97%
VALID CASES	264	5309	50	67	71	76	142					23	73	173	236	12	197	67
NUMBER OF RESPONDENTS	264 100%	5309 100%	50 100%	67 100%	71 100%	76 100%	142 100%					23 100%	73 100%	173 100%	236 100%	12 100%	197 100%	67 100%



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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.4 YES	7 3%	83 2%	~	3%	6%	1%	~	~	~	~	~	26%	1%	3%	3%	8%	1%	7%
NO	257 97%	5226 98%	100%	97%	94%	99%	100%	~	~	~	~	74%	99%	97%	97%	92%	99%	93%
VALID CASES	264	5309	50	67	71	76	142					23	73	173	236	12	197	67
NUMBER OF RESPONDENTS	264 100%	5309 100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
							BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	#	##	#	#	##	TI	IC	IC	GOOD	POOR	NO CCC	CCC
Q77.5 YES	12 5%	335 6%	2 4%	3 4%	3 4%	4 5%	~	~	~	~	~	~	10 43%	2 3%	10 6%	11 5%	1 8%	8 4%	4 6%
NO	252 95%	4974 94%	48 96%	64 96%	68 96%	72 95%	142 100%	~	~	~	~	~	13 57%	71 97%	163 94%	225 95%	11 92%	189 96%	63 94%
VALID CASES	264	5309	50	67	71	76	142						23	73	173	236	12	197	67
NUMBER OF RESPONDENTS	264 100%	5309 100%	50 100%	67 100%	71 100%	76 100%	142 100%						23 100%	73 100%	173 100%	236 100%	12 100%	197 100%	67 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALS #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.6 YES	17 6%	374 7%	4 8%	3 4%	2 3%	8 11%	~	~	~	~	~	~	1 4%	13 18%*	4 2%*	17 7%~	~	15 8%	2 3%
NO	247 94%	4935 93%	46 92%	64 96%	69 97%	68 89%	142 100%~	~	~	~	~	~	22 96%~	60 82%*	169 98%*	219 93%~	12 100%~	182 92%	65 97%
VALID CASES	264	5309	50	67	71	76	142						23	73	173	236	12	197	67
NUMBER OF RESPONDENTS	264 100%	5309 100%	50 100%	67 100%	71 100%	76 100%	142 100%						23 100%	73 100%	173 100%	236 100%	12 100%	197 100%	67 100%

Q78 WHAT IS YOUR AGE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND #	AMER ALSK #	MUL-TI ##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q78 UNDER 18	10 4%	141 3%	3 7%	3 5%	2 3%	2 3%	6 4%	~	~	~	~	~	1 4%	2 3%	8 5%	10 4%	~	8 4%	2 3%
18 TO 24	11 4%	161 3%	8 17%	3 5%	~	~	7 5%	~	~	~	~	~	1 4%	3 4%	8 5%	11 5%	~	11 6%	~
25 TO 34	72 29%	1564 32%	20 43%	26 41%*	17 27%	9 12%*	42 30%	~	~	~	~	~	8 35%	18 25%	53 31%	66 28%	6 55%	55 31%	17 26%
35 TO 44	91 37%	1821 37%	10 22%	24 38%	28 44%	29 40%	47 34%	~	~	~	~	~	7 30%	36 50%*	54 32%*	87 37%	4 36%	64 36%	27 41%
45 TO 54	43 17%	797 16%	4 9%	4 6%*	13 20%	22 30%*	25 18%	~	~	~	~	~	4 17%	12 17%	30 18%	42 18%	~	32 18%	11 17%
55 TO 64	10 4%	266 5%	1 2%	1 2%	1 2%	7 10%*	7 5%	~	~	~	~	~	1 4%	~	10 6%	9 4%	1 9%	7 4%	3 5%
65 TO 74	8 3%	116 2%	~	3 3%	2 3%	4 5%	5 4%	~	~	~	~	~	1 4%	1 1%	7 4%	8 3%	~	3 2%	5 8%
75 OR OLDER	1 0.4%	16 0.3%	~	~	2 2%	~	1 0.7%	~	~	~	~	~	~	~	1 0.6%	1 0.4%	~	~	1 2%
NOT ANSWERED	18	427	4	4	7	3	2							1	2	2	1	17	1
VALID CASES	246	4882	46	63	64	73	140						23	72	171	234	11	180	66
NUMBER OF RESPONDENTS	264	5309	50	67	71	76	142						23	73	173	236	12	197	67
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

Q79 ARE YOU MALE OR FEMALE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALS #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q79 MALE	41 17%	702 14%	4 9%	5 8%*	15 23%	17 23%	20 14%	~	~	~	~	~	3 ~ 13%	13 18%	26 15%	37 16%	4 33%	31 17%	10 15%
FEMALE	207 83%	4191 86%	42 91%	59 92%*	49 77%	57 77%	121 86%	~	~	~	~	~	20 ~ 87%	60 82%	146 85%	198 84%	8 67%	150 83%	57 85%
NOT ANSWERED	16	416	4	3	7	2	1								1	1		16	
VALID CASES	248	4893	46	64	64	74	141						23	73	172	235	12	181	67
NUMBER OF RESPONDENTS	264 100%	5309 100%	50 100%	67 100%	71 100%	76 100%	142 100%						23 100%	73 100%	173 100%	236 100%	12 100%	197 100%	67 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q80																			
8TH GRADE OR LESS	25 10%	479 10%	2 4%	11 18%	6 10%	6 8%	1 0.7%*	~	~	~	~	~	1 5%	22 32%*	2 1%*	21 9%	4 36%	18 10%	7 11%
SOME HIGH SCHOOL BUT DID NOT GRADUATE	29 12%	480 10%	8 17%	7 11%	6 10%	8 11%	13 9%	~	~	~	~	~	3 14%	12 17%	17 10%	29 13%	~	23 13%	6 9%
HIGH SCHOOL GRADUATE OR GED	78 32%	1452 30%	20 43%	16 26%	18 29%	24 33%	48 34%	~	~	~	~	~	5 23%	23 33%	55 33%	73 32%	4 36%	61 35%	17 26%
SOME COLLEGE OR 2-YEAR DEGREE	75 31%	1752 36%	10 22%	23 38%	14 23%	28 39%	54 39%*	~	~	~	~	~	9 41%	10 14%*	64 38%*	72 31%	3 27%	47 27%*	28 42%
4-YEAR COLLEGE GRADUATE	23 10%	437 9%	4 9%	4 7%	10 16%	5 7%	16 11%	~	~	~	~	~	3 14%	1 1%*	21 12%*	23 10%	~	18 10%	5 8%
MORE THAN 4-YEAR COLLEGE DEGREE	11 5%	238 5%	2 4%	~	8 13%*	1 1%*	8 6%	~	~	~	~	~	1 5%	1 1%	10 6%*	11 5%	~	8 5%	3 5%
NOT ANSWERED	23	471	4	6	9	4	2						1	4	4	7	1	22	1
VALID CASES	241	4838	46	61	62	72	140						22	69	169	229	11	175	66
NUMBER OF RESPONDENTS	264	5309	50	67	71	76	142						23	73	173	236	12	197	67
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

Q81 HOW ARE YOU RELATED TO THE CHILD?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q81 MOTHER OR FATHER	224 92%	4466 93%	44 96%	59 95%	56 90%	65 89%	126 92%	~	~	~	~	18 82%	70 96%	151 90%	211 92%	12 100%	167 93%	57 89%
GRANDPARENT	10 4%	186 4%	2 4%	1 2%	3 5%	4 5%	7 5%	~	~	~	~	2 9%	1 1%	9 5%	10 4%	~	5 3%	5 8%
AUNT OR UNCLE	1 0.4%	33 0.7%	~	~	~	1 1%	~	~	~	~	~	~	~	1 0.6%	1 0.4%	~	1 0.6%	~
OLDER BROTHER OR SISTER	1 0.4%	12 0.2%	~	~	~	1 1%	~	~	~	~	~	~	~	1 0.6%	1 0.4%	~	1 0.6%	~
OTHER RELATIVE	~	6 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
LEGAL GUARDIAN	5 2%	73 2%	~	1 2%	2 3%	2 3%	2 1%	~	~	~	~	1 5%	2 3%	3 2%	5 2%	~	4 2%	1 2%
SOMEONE ELSE	2 0.8%	33 0.7%	~	1 2%	1 2%	~	1 0.7%	~	~	~	~	1 5%	~	2 1%	2 0.9%	~	1 0.6%	1 2%
NOT ANSWERED	21	500	4	5	9	3	5					1		6	6		18	3
VALID CASES	243	4809	46	62	62	73	137					22	73	167	230	12	179	64
NUMBER OF RESPONDENTS	264	5309	50	67	71	76	142					23	73	173	236	12	197	67
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q82 YES	5 4%	101 3%	~	2 6%~	~	3 7%~	1 1%	~	~	~	~	1 ~ 13%	3 8%~	2 2%~	4 3%~	1 20%~	4 4%~	1 3%
NO	133 96%	2894 97%	25 100%~	33 94%~	35 100%~	40 93%~	82 99%	~	~	~	~	7 ~ 88%	35 92%~	96 98%~	128 97%~	4 80%~	99 96%~	34 97%
NOT ANSWERED	4	59	1	1	1	1	2					1	1	3	4		4	
VALID CASES	138	2995	25	35	35	43	83					8	38	98	132	5	103	35
NUMBER OF RESPONDENTS	142	3054	26	36	36	44	85					9	39	101	136	5	107	35
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF SURVEY COMPLETED BY MAIL]



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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.1 YES	3 60%	53 52%	~	1 50%	~	2 67%	1 100%	~	~	~	~	~	1 33%	2 100%	2 50%	1 100%	2 50%	1 100%
NO	2 40%	48 48%	~	1 50%	~	1 33%	~	~	~	~	~	~	2 67%	2 50%	~	~	2 50%	~
VALID CASES	5	101		2		3	1					1	3	2	4	1	4	1
NUMBER OF RESPONDENTS	5	101		2		3	1					1	3	2	4	1	4	1
	100%	100%		100%		100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.2 YES	1 20%	31 31%~	~	~	~	33%~	~	~	~	~	~	~	~	1 33%~	1 25%~	1 25%~	1 25%~		
NO	4 80%	70 69%~	~100%~	2	2	67%~	100%~	~	~	~	~	~	1 ~100%~	2 67%~	2 100%~	3 75%~	1 100%~	3 75%~	1 100%~
VALID CASES	5	101		2	3		1						1	3	2	4	1	4	1
NUMBER OF RESPONDENTS	5	101		2	3		1						1	3	2	4	1	4	1
	100%	100%		100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR MUL- TI ##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q83.3 YES		13 13%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NO	5 100%	88 87%	~100%	2	3	1	100%	~	~	~	~	~100%	1	3	2	4	1	4	1
VALID CASES	5	101		2	3	1						1	3	2	4	1	4	1	
NUMBER OF RESPONDENTS	5 100%	101 100%		2 100%	3 100%	1 100%						100%	100%	100%	100%	100%	100%	100%	

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.4 YES	3 60%	43 43%	~	1 50%	~	2 67%	~	~	~	~	~	~	~	3 100%	3 75%	3 75%		
NO	2 40%	58 57%	~	1 50%	~	1 33%	1 100%	~	~	~	~	1 100%	2 100%	1 25%	1 100%	1 25%	1 100%	1 100%
VALID CASES	5	101		2		3	1					1	3	2	4	1	4	1
NUMBER OF RESPONDENTS	5	101		2		3	1					1	3	2	4	1	4	1
	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.

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.5 YES		6 6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	5 100%	95 94%	2 ~100%	3 ~100%	3 ~100%	1 100%	~	~	~	~	~	~	1 ~100%	3 100%	2 100%	4 100%	1 100%	4 100%	1 100%
VALID CASES	5	101	2	3	3	1							1	3	2	4	1	4	1
NUMBER OF RESPONDENTS	5 100%	101 100%	2 100%	3 100%	3 100%	1 100%							1 100%	3 100%	2 100%	4 100%	1 100%	4 100%	1 100%

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

NQ14 RATING OF ALL CHILD'S HEALTH CARE

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
NQ14 0-6	13 8%	286 8%	1 3%	3 6%	4 10%	5 10%	10 10%	~	~	~	~	~	2 5%	10 8%	11 7%	1 20%	9 8%	4 8%
7-8	52 30%	994 29%	11 31%	14 29%	10 26%	17 35%	33 32%	~	~	~	~	3 18%	10 26%	37 30%	45 29%	1 20%	33 28%	19 37%
9-10	106 62%	2180 63%	23 66%	32 65%	25 64%	26 54%	60 58%	~	~	~	~	14 82%	27 69%	76 62%	100 64%	3 60%	77 65%	29 56%
VALID CASES	171	3460	35	49	39	48	103					17	39	123	156	5	119	52
NUMBER OF RESPONDENTS	171 100%	3460 100%	35 100%	49 100%	39 100%	48 100%	103 100%					17 100%	39 100%	123 100%	156 100%	5 100%	119 100%	52 100%
MEAN	2.54	2.55	2.63	2.59	2.54	2.44	2.49					2.82	2.64	2.54	2.57	2.40	2.57	2.48
p stat_(*=Sig @ p<=.05)		.941	~	~	~	~	.126	~	~	~	~	~	~	~	~	~	~	.392

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND #	AMER IND/PAC ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC	
NQ41 0-6	12 6%	266 6%	1 3%	5 9%	4 9%	2 4%	9 8%	~	~	~	~	~	1 5%	1 2%*	10 7%	12 6%	~	11 8%*	1 2%
7-8	47 24%	933 22%	7 18%	7 13%*	12 26%	21 37%*	28 24%	~	~	~	~	~	5 24%	13 22%	34 24%	44 23%	2 25%	32 22%	15 27%
9-10	141 71%	3047 72%	32 80%	44 79%	31 66%	34 60%*	78 68%	~	~	~	~	~	15 71%	44 76%	95 68%	133 70%	6 75%	101 70%	40 71%
VALID CASES	200	4246	40	56	47	57	115						21	58	139	189	8	144	56
NUMBER OF RESPONDENTS	200 100%	4246 100%	40 100%	56 100%	47 100%	57 100%	115 100%						21 100%	58 100%	139 100%	189 100%	8 100%	144 100%	56 100%
MEAN	2.64	2.65	2.78	2.70	2.57	2.56	2.60						2.67	2.74	2.61	2.64	2.75	2.63	2.70
p stat_(*=Sig @ p<=.05)		.808	~.445		~.199		.200	~	~	~	~	~	~.101	.198		~	~.402		

[ASKED IF Q30 = YES]

NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR POOR	GOOD & FAIR & POOR	NO CCC	CCC
NQ48 0-6		69 9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
7-8	8 22%	186 24%	~	1 8%	3 50%	4 29%	4 21%	~	~	~	~	1 20%	3 25%	5 21%	7 21%	1 33%	3 25%	5 21%
9-10	28 78%	524 67%	4 67%	11 100%	3 92%	10 71%	15 79%	~	~	~	~	4 80%	9 75%	19 79%	26 79%	2 67%	9 75%	19 79%
VALID CASES	36	779	4	12	6	14	19					5	12	24	33	3	12	24
NUMBER OF RESPONDENTS	36	779	4	12	6	14	19					5	12	24	33	3	12	24
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%
MEAN	2.78	2.58	3.00	2.92	2.50	2.71	2.79					2.80	2.75	2.79	2.79	2.67	2.75	2.79
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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



NQ54 RATING OF CHILD'S HEALTH PLAN

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND #	AMER IND/PAC/ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
NQ54																			
0-6	36 15%	652 13%	5 11%	9 14%	13 21%	9 12%	27 19%*	~	~	~	~	~	3 13%	3 4%*	32 19%*	32 14%~	4 33%~	23 13%	13 19%
7-8	68 28%	1410 29%	16 35%	6 9%*	21 33%	25 34%	44 31%	~	~	~	~	~	8 35%	14 19%*	54 32%*	63 27%~	4 33%~	44 24%	24 36%
9-10	143 58%	2826 58%	25 54%	49 77%*	29 46%*	40 54%	69 49%*	~	~	~	~	~	12 52%~	56 77%*	85 50%*	139 59%~	4 33%~	113 63%*	30 45%
VALID CASES	247	4888	46	64	63	74	140						23	73	171	234	12	180	67
NUMBER OF RESPONDENTS	247 100%	4888 100%	46 100%	64 100%	63 100%	74 100%	140 100%						23 100%	73 100%	171 100%	234 100%	12 100%	180 100%	67 100%
MEAN	2.43	2.44	2.43	2.63	2.25	2.42	2.30						2.39	2.73	2.31	2.46	2.00	2.50	2.25
p stat_(*=Sig @ p<=.05)		.795		~.015*	.033*	.838	.001*	~	~	~	~	~	~.000*	.000*		~	~	~.024*	

GETTING NEEDED CARE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	ILND NATV	OTHR MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NPRBSEE4 NQ46	2.37	2.27	3.00	2.42	1.86	2.40	2.45					2.40	2.23	2.44	2.43	1.67	2.31	2.40	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCARNES4 NQ15	2.56	2.49	2.80	2.57	2.44	2.47	2.55					2.59	2.70	2.55	2.60	2.33	2.62	2.42	
p stat_(*=Sig @ p<=.05)	.192		~	~	~	~	.794	~	~	~	~	~	~	~	~	~	~	.066	
COMPOSITE	2.46	2.38	2.90	2.50	2.15	2.43	2.50	x	x	x	x	x	2.49	2.47	2.49	2.51	2.00	2.46	2.41
p stat_(*=Sig @ p<=.05)	.009*		~	~	~	~	.144	~	~	~	~	~	~	~	~	~	~	.992	

GETTING CARE QUICKLY

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER					
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	#	AS- IAN	##	NATV HAW/ ILND	AMER IND/ PAC	ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NCARSN4 NQ4	2.57	2.65	3.00	2.41	2.65	2.38	2.57							2.80	2.59	2.59	2.57	3.00	2.66	2.41	
p stat_(*=Sig @ p<=.05)	.307		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NAPGET4 NQ6	2.53	2.46	2.82	2.43	2.49	2.42	2.63							2.38	2.42	2.57	2.54	2.17	2.59	2.39	
p stat_(*=Sig @ p<=.05)	.261		~	~	~	~	~.041*	~	~	~	~	~	~	~	~	~	~	~	~	~.105	
COMPOSITE	2.55	2.56	2.91	2.42	2.57	2.40	2.60	x	x	x	x	x	x	2.59	2.50	2.58	2.55	2.58	2.62	2.40	
p stat_(*=Sig @ p<=.05)	.809		~.020*	~	~	~	~.100	~	~	~	~	~	~	~	~.167	~	~	~	~.001*		

HOW WELL DOCTORS COMMUNICATE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NDREXPL4 NQ32	2.77	2.75	2.76	2.86	2.67	2.77	2.79				2.94	2.72	2.81	2.79	2.83	2.75	2.82		
p stat_(*=Sig @ p<=.05)	.692		~	~	~		~.617	~	~	~	~	~	~	~	~	~	~.359		
NDRLSTN4 NQ33	2.76	2.77	2.85	2.77	2.70	2.75	2.79				2.88	2.69	2.79	2.76	2.83	2.76	2.78		
p stat_(*=Sig @ p<=.05)	.976		~	~	~		~.496	~	~	~	~	~	~	~	~	~	~.790		
NDRESPU4 NQ34	2.79	2.81	2.88	2.81	2.74	2.75	2.79				2.82	2.82	2.78	2.79	2.83	2.77	2.84		
p stat_(*=Sig @ p<=.05)	.781		~	~	~		~.868	~	~	~	~	~	~	~	~	~	~.403		
NDRTMEN4 NQ37	2.63	2.57	2.73	2.70	2.43	2.63	2.64				2.71	2.61	2.64	2.63	2.67	2.66	2.57		
p stat_(*=Sig @ p<=.05)	.241		~	~	~		~.738	~	~	~	~	~	~	~	~	~	~		
COMPOSITE	2.74	2.72	2.80	2.78	2.63	2.73	2.75	x	x	x	x	x	2.84	2.71	2.75	2.74	2.79	2.73	2.75
p stat_(*=Sig @ p<=.05)	.629		~	~	~		~.686	~	~	~	~	~	~	~	~	~	~.798		

CUSTOMER SERVICE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NPBCLCS4 NQ50	2.24	2.28	2.54	2.47	1.89	2.14	2.22					2.00	2.33	2.15	2.32	1.00	2.35	2.08	
p stat_(*=Sig @ p<=.05)	.766		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCSRESP NQ51	2.53	2.60	2.69	2.59	2.50	2.36	2.56					3.00	2.48	2.59	2.58	2.00	2.59	2.44	
p stat_(*=Sig @ p<=.05)	.437		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.39	2.44	2.62	2.53	2.19	2.25	2.39	x	x	x	x	x	2.50	2.41	2.37	2.45	1.50	2.47	2.26
p stat_(*=Sig @ p<=.05)	.583		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

SHARED DECISION MAKING

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	ILND NATV	OTHR MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NNRXWHY NQ11	2.96	2.87	3.00	3.00	3.00	2.89	2.94					3.00	3.00	2.94	2.96	3.00	2.93	3.00	
p stat_(*=Sig @ p<=.05)		.026*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NNRXWYNT NQ12	2.58	2.42	2.80	2.56	2.71	2.44	2.50					3.00	2.69	2.57	2.61	2.50	2.59	2.58	
p stat_(*=Sig @ p<=.05)		.173	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NRXBST NQ13	2.51	2.58	2.80	2.56	2.71	2.22	2.38					3.00	2.85	2.46	2.52	3.00	2.66	2.33	
p stat_(*=Sig @ p<=.05)		.560	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.69	2.62	2.87	2.70	2.81	2.52	2.60	x	x	x	x	x	3.00	2.85	2.66	2.70	2.83	2.72	2.64
p stat_(*=Sig @ p<=.05)		.390	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

ACCESS TO SPECIALIZED SERVICES

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	ILND NATV	OTHR MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NEZMDEQ NQ20	2.63	2.30	3.00	3.00	2.00	2.75					3.00	3.00	2.80	2.83	3.00	1.00	2.86		
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NEZTHP NQ23	2.40	2.19	2.60	2.78	2.33	1.60	2.31				2.33	2.50	2.31	2.41	2.00	2.78	2.19		
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NEZTC NQ26	2.08	2.18	2.00	2.27	1.56	2.27	1.90				2.00	2.63	1.96	2.22	1.00	2.25	2.04		
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
COMPOSITE	2.37	2.22	2.30	2.68	2.30	1.96	2.32	x	x	x	x	x	2.44	2.71	2.36	2.49	2.00	2.01	2.36
p stat_(*=Sig @ p<=.05)		.019*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		

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

	BANTO T1	BANTO T2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
PRBSEE4 Q46	87%	78%	100%	92%	71%	87%	90%						100%	77%	92%	91%	33%	77%	92%
CARNES4 Q15	92%	89%	100%	89%	85%	94%	92%						100%	95%	93%	94%	83%	92%	90%
AVERAGE	89.25	83.54	100.0	90.51	78.02	90.14	91.08	x	x	x	x	x	100.0	85.76	92.72	92.75	58.33	84.58	91.19



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

	BANTO T1	BANTO T2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
CARSN4 Q4	88%	91%	100%	82%	90%	86%	91%						100%	86%	92%	90%	100%	90%	85%
APGET4 Q6	88%	86%	91%	83%	89%	88%	90%						88%	81%	89%	88%	67%	90%	82%
AVERAGE	87.91	88.77	95.59	82.21	89.59	87.04	90.51	x	x	x	x	x	93.75	83.88	90.51	88.65	83.33	89.95	83.77

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
DREXPL4 Q32	95%	95%	94%	95%	94%	98%	96%					100%	95%	96%	96%	100%	93%	100%	
DRLSTN4 Q33	95%	95%	97%	95%	94%	95%	96%					100%	95%	95%	95%	100%	94%	98%	
DRESPU4 Q34	95%	96%	97%	95%	97%	93%	97%					94%	95%	95%	95%	100%	94%	98%	
DRTMEN4 Q37	93%	90%	94%	100%	87%	91%	92%					100%	95%	93%	93%	100%	93%	94%	
AVERAGE	94.9	94.0	95.5	96.5	92.8	94.3	95.0	x	x	x	x	x	98.5	94.8	94.9	94.6	100	93.6	97.5

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

	BANTO T1	BANTO T2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
PBCLCS4 Q50	68%	78%	85%	76%	56%	57%	67%						67%	70%	65%	72%	0%	73%	60%
CSRESP Q51	87%	91%	92%	82%	94%	79%	89%						100%	85%	88%	88%	75%	89%	84%
AVERAGE	77.42	84.81	88.46	79.41	75.00	67.86	77.78	x	x	x	x	x	83.33	77.78	76.47	79.82	37.50	81.08	72.00

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NRXWHY Q11	98%	94%	100%	100%	100%	94%	97%					100%	100%	97%	98%	100%	97%	100%	
NRXWYNT Q12	79%	71%	90%	78%	86%	72%	75%					100%	85%	78%	80%	75%	79%	79%	
RXBST Q13	75%	79%	90%	78%	86%	61%	69%					100%	92%	73%	76%	100%	83%	67%	
AVERAGE	84.3	81.2	93.3	85.2	90.5	75.9	80.2	x	x	x	x	x	100	92.3	82.9	84.8	91.7	86.2	81.9

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
EZMDEQ Q20	88%	76%	100%	100%	67%	100%					100%	100%	100%	100%	100%	0%	100%		
EZTHP Q23	76%	72%	80%	100%	67%	40%	77%				67%	75%	75%	77%	50%	89%	69%		
EZTC Q26	64%	71%	100%	82%	33%	67%	55%				67%	88%	59%	72%	0%	75%	61%		
AVERAGE	75.8	72.8	90.0	93.9	66.7	57.8	77.3	x	x	x	x	x	77.8	87.5	78.1	83.0	50.0	54.6	76.5

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
DRTLKU Q38	92%	87%	100%	95%	90%	84%	91%					94%	95%	91%	93%	67%	90%	96%	
DRUNCON Q43	89%	90%	100%	93%	80%	90%	88%					83%	100%	88%	88%	100%	100%	88%	
DRUNFAM Q44	85%	85%	100%	86%	80%	85%	85%					67%	100%	83%	86%	75%	86%	85%	
AVERAGE	88.8	87.5	100	91.3	83.2	86.4	88.2	x	x	x	x	x	81.4	98.3	86.9	89.1	80.6	91.9	89.5

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- IC	HIS- IC	NOT VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
HELPCONT Q18	100%	92%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%	
HLPCOORD Q29	72%	62%	80%	88%	71%	58%	71%					83%	62%	73%	68%	100%	70%	74%	
AVERAGE	86.1	77.1	80.0	93.8	85.7	78.9	85.5	x	x	x	x	x	91.7	80.8	86.5	84.0	100	84.8	87.1

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2. YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

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

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

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

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

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

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

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

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

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

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

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



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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]

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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]

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5. ADDITIONAL QUESTIONS

39 Q35E 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?

42 Q35H IN THE LAST 6 MONTHS, DID YOU FEEL YOU COULD TRUST A DOCTOR OR OTHER HEALTH PROVIDER WITH YOUR MEDICAL CARE?

5. ACCESS TO DENTAL CARE

43 Q35I A REGULAR DENTIST IS ONE YOU WOULD GO TO FOR CHECK-UPS AND CLEANINGS OR WHEN YOU HAVE A CAVITY OR TOOTH PAIN. DO YOU HAVE A REGULAR DENTIST?

44 Q35J IN THE LAST 6 MONTHS, DID YOU GO TO A DENTIST'S OFFICE OR CLINIC FOR CARE?

45 Q35K IN THE LAST 6 MONTHS, HOW OFTEN DID THE DENTISTS OR DENTAL STAFF EXPLAIN WHAT THEY WERE DOING WHILE TREATING YOU?

46 Q35L IF YOU TRIED TO GET AN APPOINTMENT FOR YOURSELF WITH A DENTIST WHO SPECIALIZES IN A PARTICULAR TYPE OF DENTAL CARE (SUCH AS ROOT CANALS OR GUM DISEASE) IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT AS SOON AS YOU WANTED?

47 Q35M IN THE LAST 6 MONTHS, IF YOU NEEDED TO SEE A DENTIST RIGHT AWAY BECAUSE OF A DENTAL EMERGENCY, DID YOU GET TO SEE A DENTIST AS SOON AS YOU WANTED?

48 Q35N USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS EXTREMELY DIFFICULT AND 10 IS EXTREMELY EASY, WHAT NUMBER WOULD YOU USE TO RATE HOW EASY IT WAS FOR YOU TO FIND A DENTIST?

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6. ABOUT YOU

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

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

51 Q38 HAVE YOU HAD EITHER A FLU SHOT OR FLU SPRAY IN THE NOSE SINCE JULY 1, 2017?

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

53 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]

54 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]

55 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]

56 Q43 DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?

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

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

PAGE	QUESTION	TITLE
59	Q46.1	ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: HIGH CHOLESTEROL
60	Q46.2	ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: HIGH BLOOD PRESSURE
61	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
62	Q47.1	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: A HEART ATTACK
63	Q47.2	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: ANGINA OR CORONARY HEART DISEASE
64	Q47.3	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: A STROKE
65	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
66	Q48	IN THE LAST 6 MONTHS, DID YOU GET HEALTH CARE 3 OR MORE TIMES FOR THE SAME CONDITION OR PROBLEM?
67	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]
68	Q50	DO YOU NOW NEED OR TAKE MEDICINE PRESCRIBED BY A DOCTOR? DO NOT INCLUDE BIRTH CONTROL.
69	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]
70	NQ52	WHAT IS YOUR AGE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
71	NQ53	ARE YOU MALE OR FEMALE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
72	Q54	WHAT IS THE HIGHEST GRADE OR LEVEL OF SCHOOL THAT YOU HAVE COMPLETED?
73	Q55	ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?
74	Q56.1	WHAT IS YOUR RACE? RESPONSE: WHITE
75	Q56.2	WHAT IS YOUR RACE? RESPONSE: BLACK OR AFRICAN-AMERICAN
76	Q56.3	WHAT IS YOUR RACE? RESPONSE: ASIAN
77	Q56.4	WHAT IS YOUR RACE? RESPONSE: NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
78	Q56.5	WHAT IS YOUR RACE? RESPONSE: AMERICAN INDIAN OR ALASKA NATIVE
79	Q56.6	WHAT IS YOUR RACE? RESPONSE: OTHER
80	Q57	DID SOMEONE HELP YOU COMPLETE THIS SURVEY? [ASKED IF SURVEY COMPLETED BY MAIL]
81	Q58.1	HOW DID THAT PERSON HELP YOU? RESPONSE: READ THE QUESTIONS TO ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
82	Q58.2	HOW DID THAT PERSON HELP YOU? RESPONSE: WROTE DOWN THE ANSWERS I GAVE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
83	Q58.3	HOW DID THAT PERSON HELP YOU? RESPONSE: ANSWERED THE QUESTIONS FOR ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
84	Q58.4	HOW DID THAT PERSON HELP YOU? RESPONSE: TRANSLATED THE QUESTIONS INTO MY LANGUAGE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
85	Q58.5	HOW DID THAT PERSON HELP YOU? RESPONSE: HELPED IN SOME OTHER WAY. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

3. SPECIALIZED SERVICES

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

19 Q20 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET SPECIAL MEDICAL EQUIPMENT OR DEVICES FOR YOUR CHILD? [ASKED IF Q19 = YES]

20 Q21 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE, OR CLINIC HELP YOU GET SPECIAL MEDICAL EQUIPMENT OR DEVICES FOR YOUR CHILD? [ASKED IF Q19 = YES]

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

22 Q23 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THIS THERAPY FOR YOUR CHILD? [ASKED IF Q22 = YES]

23 Q24 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE OR CLINIC HELP YOU GET THIS THERAPY FOR YOUR CHILD? [ASKED IF Q22 = YES]

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

25 Q26 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THIS TREATMENT OR COUNSELING FOR YOUR CHILD? [ASKED IF Q25 = YES]

26 Q27 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE OR CLINIC HELP YOU GET THIS TREATMENT OR COUNSELING FOR YOUR CHILD? [ASKED IF Q25 = YES]

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

28 Q29 IN THE LAST 6 MONTHS, DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE, OR CLINIC HELP COORDINATE YOUR CHILD'S CARE AMONG THESE DIFFERENT PROVIDERS OR SERVICES? [ASKED IF Q28 = YES]

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4. YOUR CHILD'S PERSONAL DOCTOR

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

30 Q31 IN THE LAST 6 MONTHS, HOW MANY TIMES DID YOUR CHILD VISIT HIS OR HER PERSONAL DOCTOR FOR CARE? [ASKED IF Q30 = YES]

31 Q31A IN THE LAST 6 MONTHS, HOW OFTEN DID YOU HAVE A HARD TIME SPEAKING WITH OR UNDERSTANDING YOUR CHILD'S PERSONAL DOCTOR BECAUSE YOU SPOKE DIFFERENT LANGUAGES? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]

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

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

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

5. GETTING HEALTH CARE FROM SPECIALISTS

- 45 Q45 SPECIALISTS ARE DOCTORS LIKE SURGEONS, HEART DOCTORS, ALLERGY DOCTORS, SKIN DOCTORS, AND OTHER DOCTORS WHO SPECIALIZE IN ONE AREA OF HEALTH CARE. IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS FOR YOUR CHILD TO SEE A SPECIALIST?
- 46 Q46 IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT FOR YOUR CHILD TO SEE A SPECIALIST AS SOON AS YOU NEEDED? [ASKED IF Q45 = YES]
- 47 Q47 HOW MANY SPECIALISTS HAS YOUR CHILD SEEN IN THE LAST 6 MONTHS? [ASKED IF Q45 = YES]
- 48 Q48 WE WANT TO KNOW YOUR RATING OF THE SPECIALIST YOUR CHILD SAW MOST OFTEN IN THE LAST 6 MONTHS. USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST SPECIALIST POSSIBLE AND 10 IS THE BEST SPECIALIST POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE THAT SPECIALIST? [ASKED IF Q45 = YES AND Q47 >= 1 SPECIALIST]

6. YOUR CHILD'S HEALTH PLAN

- 49 Q49 IN THE LAST 6 MONTHS, DID YOU GET INFORMATION OR HELP FROM CUSTOMER SERVICE AT YOUR CHILD'S HEALTH PLAN?
- 50 Q50 IN THE LAST 6 MONTHS, HOW OFTEN DID CUSTOMER SERVICE AT YOUR CHILD'S HEALTH PLAN GIVE YOU THE INFORMATION OR HELP YOU NEEDED? [ASKED IF Q49 = YES]
- 51 Q51 IN THE LAST 6 MONTHS, HOW OFTEN DID CUSTOMER SERVICE STAFF AT YOUR CHILD'S HEALTH PLAN TREAT YOU WITH COURTESY AND RESPECT? [ASKED IF Q49 = YES]
- 52 Q52 IN THE LAST 6 MONTHS, DID YOUR CHILD'S HEALTH PLAN GIVE YOU ANY FORMS TO FILL OUT?
- 53 PQ53 IN THE LAST 6 MONTHS, HOW OFTEN WERE THE FORMS FROM YOUR CHILD'S HEALTH PLAN EASY TO FILL OUT? [ASKED IF Q52 = YES. RESPONSE OF 'ALWAYS' PADDED WITH Q52 = NO]
- 54 Q54 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH PLAN POSSIBLE AND 10 IS THE BEST HEALTH PLAN POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR CHILD'S HEALTH PLAN?

PAGE QUESTION TITLE

7. PRESCRIPTION MEDICINES

- 55 Q55 IN THE LAST 6 MONTHS, DID YOU GET OR REFILL ANY PRESCRIPTION MEDICINES FOR YOUR CHILD?
- 56 Q56 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET PRESCRIPTION MEDICINES FOR YOUR CHILD THROUGH HIS OR HER HEALTH PLAN? [ASKED IF Q55 = YES]
- 57 Q57 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE, OR CLINIC HELP YOU GET YOUR CHILD'S PRESCRIPTION MEDICINES? [ASKED IF Q55 = YES]

7. ACCESS TO DENTAL CARE

- 58 Q57A A REGULAR DENTIST IS ONE YOUR CHILD WOULD GO TO FOR CHECK-UPS AND CLEANINGS OR WHEN HE/SHE HAS A CAVITY OR TOOTH PAIN. DOES YOUR CHILD HAVE A REGULAR DENTIST?
- 59 Q57B IN THE LAST 6 MONTHS, DID YOUR CHILD GO TO A DENTIST'S OFFICE OR CLINIC FOR CARE?
- 60 Q57C IN THE LAST 6 MONTHS, HOW OFTEN DID THE DENTISTS OR DENTAL STAFF EXPLAIN WHAT THEY WERE DOING WHILE TREATING YOUR CHILD?
- 61 Q57D IN THE LAST 6 MONTHS, IF YOUR CHILD NEEDED TO SEE A DENTIST RIGHT AWAY BECAUSE OF A DENTAL EMERGENCY, DID HE/SHE GET TO SEE A DENTIST AS SOON AS YOU WANTED?
- 62 Q57E USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS EXTREMELY DIFFICULT AND 10 IS EXTREMELY EASY, WHAT NUMBER WOULD YOU USE TO RATE HOW EASY IT WAS FOR YOU TO FIND A DENTIST FOR YOUR CHILD?

8. ABOUT YOUR CHILD AND YOU

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



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

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

66 Q61 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q60 = YES]

67 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]

68 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?

69 Q64 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q63 = YES]

70 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]

71 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?

72 Q67 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q66 = YES]

73 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]

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

75 Q70 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q69 = YES]

76 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]

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

78 Q73 HAS THIS PROBLEM LASTED OR IS IT EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q72 = YES]

79 NQ74 WHAT IS YOUR CHILD'S AGE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]

80 NQ75 IS YOUR CHILD MALE OR FEMALE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]

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

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

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

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

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

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

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

88 Q78 WHAT IS YOUR AGE?

89 Q79 ARE YOU MALE OR FEMALE?

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

91 Q81 HOW ARE YOU RELATED TO THE CHILD?

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

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

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

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

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

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

9. RATINGS

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

10. COMPOSITES

102 GETTING NEEDED CARE  
103 GETTING CARE QUICKLY  
104 HOW WELL DOCTORS COMMUNICATE  
105 CUSTOMER SERVICE  
106 SHARED DECISION MAKING  
107 ACCESS TO SPECIALIZED SERVICES

11. GLOBAL PROPORTION COMPOSITES

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

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

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

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

**SURVEY INSTRUCTIONS**

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

Correct  
Mark 

Incorrect  
Marks   

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

Yes → *Go to Question 1*  
 No

↓ **START HERE** ↓

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

- Yes → *Go to Question 3*
- No

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

\_\_\_\_\_

## YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

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

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



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

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

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

- Never
- Sometimes
- Usually
- Always

**YOUR PERSONAL DOCTOR**

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

- Yes
- No → *Go to Question 24*

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 23*

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

- Never
- Sometimes
- Usually
- Always

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

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



## GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

- Yes  
 No → *Go to Question 28*

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

- Never  
 Sometimes  
 Usually  
 Always

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

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

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

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

## YOUR HEALTH PLAN

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

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

- Yes  
 No → *Go to Question 30*

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

- Never  
 Sometimes  
 Usually  
 Always

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

- Yes  
 No → *Go to Question 33*

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

- Never  
 Sometimes  
 Usually  
 Always

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

- Never  
 Sometimes  
 Usually  
 Always

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

- Yes  
 No → *Go to Question 35*







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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

43. Do you take aspirin daily or every other day?

- Yes
- No
- Don't know

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

- Yes
- No
- Don't know

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

- Yes
- No

46. Are you aware that you have any of the following conditions? Mark all that apply.

- High cholesterol
- High blood pressure
- Parent or sibling with heart attack before the age of 60

47. Has a doctor ever told you that you have any of the following conditions? Mark all that apply.

- A heart attack
- Angina or coronary heart disease
- A stroke
- Any kind of diabetes or high blood sugar

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

- Yes
- No → *Go to Question 50*

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

- Yes
- No

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

- Yes
- No → *Go to Question 52*

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

- Yes
- No

52. What is your age?

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



53. Are you male or female?

- Male
- Female

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

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

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

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

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

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

57. Did someone help you complete this survey?

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

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

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

**THANK YOU**

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

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

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



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

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

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Correct  
Mark 

Incorrect  
Marks



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

- Yes → *Go to Question 1*
- No

↓ **START HERE** ↓

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

1. Our records show that your child is now in the Oregon Health Plan. Is that right?

- Yes → *Go to Question 3*
- No

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

\_\_\_\_\_

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

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

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

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

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

- Yes
- No

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

- Yes
- No

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No

### SPECIALIZED SERVICES

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

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

- Yes
- No → *Go to Question 22*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 25*



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 28*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 30*

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

- Yes
- No

### YOUR CHILD'S PERSONAL DOCTOR

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

- Yes
- No → *Go to Question 45*

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

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

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

- Never
- Sometimes
- Usually
- Always

32. In the last 6 months, how often did your child's personal doctor explain things about your child's health in a way that was easy to understand?
- Never
  - Sometimes
  - Usually
  - Always
33. In the last 6 months, how often did your child's personal doctor listen carefully to you?
- Never
  - Sometimes
  - Usually
  - Always
34. In the last 6 months, how often did your child's personal doctor show respect for what you had to say?
- Never
  - Sometimes
  - Usually
  - Always
35. Is your child able to talk with doctors about his or her health care?
- Yes
  - No → *Go to Question 37*
36. In the last 6 months, how often did your child's personal doctor explain things in a way that was easy for your child to understand?
- Never
  - Sometimes
  - Usually
  - Always
37. In the last 6 months, how often did your child's personal doctor spend enough time with your child?
- Never
  - Sometimes
  - Usually
  - Always

38. In the last 6 months, did your child's personal doctor talk with you about how your child is feeling, growing, or behaving?
- Yes
  - No
39. In the last 6 months, did your child get care from a doctor or other health provider besides his or her personal doctor?
- Yes
  - No → *Go to Question 41*
40. In the last 6 months, how often did your child's personal doctor seem informed and up-to-date about the care your child got from these doctors or other health providers?
- Never
  - Sometimes
  - Usually
  - Always
41. Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your child's personal doctor?
- 
- 0 1 2 3 4 5 6 7 8 9 10
- Worst Personal Doctor Possible                      Best Personal Doctor Possible
42. Does your child have any medical, behavioral, or other health conditions that have lasted for more than 3 months?
- Yes
  - No → *Go to Question 45*



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

- Yes
- No

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

- Yes
- No

**GETTING HEALTH CARE FROM SPECIALISTS**

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

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

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

- Yes
- No → *Go to Question 49*

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

- Never
- Sometimes
- Usually
- Always

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

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

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

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

**YOUR CHILD'S HEALTH PLAN**

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

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

- Yes
- No → *Go to Question 52*

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

- Never
- Sometimes
- Usually
- Always





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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 54*

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

- Never
- Sometimes
- Usually
- Always

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

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

**PRESCRIPTION MEDICINES**

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

- Yes
- No → *Go to Question 57a*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

**ACCESS TO DENTAL CARE**

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

- Yes
- No

57b. In the last 6 months, did your child go to a dentist's office or clinic for care?

- Yes
- No → *Go to Question 57d*

57c. In the last 6 months, how often did the dentists or dental staff explain what they were doing while treating your child?

- Never
- Sometimes
- Usually
- Always



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

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

57e. Using any number from 0 to 10, where 0 is extremely difficult and 10 is extremely easy, what number would you use to rate how easy it was for you to find a dentist for your child?

- 
- 0 1 2 3 4 5 6 7 8 9 10
- Extremely Difficult Extremely Easy

**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







897-12



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CZPCE

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 la encuesta 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 (aquellos con impedimentos de audición, favor llamar al 1-888-631-2097).

**INSTRUCCIONES PARA EL CUESTIONARIO**

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

Marca  
Correcta

Marca  
Incorrecta

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

Sí ➔ *Pase a la Pregunta 1*  
 No

↓ **COMIENCE AQUI** ↓

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

Sí ➔ *Pase a la pregunta 3*  
 No

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

\_\_\_\_\_

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

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

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

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





## LA ATENCIÓN MÉDICA QUE RECIBIÓ 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 cómo funciona su plan de salud en materiales escritos o en la Internet?

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

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

Sí  
 No → *Pase a la pregunta 33*

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

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

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

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

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

Sí  
 No → *Pase a la pregunta 35*





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

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

42. En los últimos 6 meses, ¿qué tan seguido le ofreció o habló con su doctor o profesional médico sobre métodos y estrategias, aparte de medicamentos, para ayudarlo(a) a dejar de fumar o usar tabaco? Ejemplos de métodos y estrategias son: una línea telefónica de ayuda, consejería individual o terapia de grupo o un programa para dejar de fumar.

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

43. ¿Toma aspirina todos los días o un día sí y otro día no?

- Sí
- No
- No sé

44. ¿Tiene algún problema de salud o toma algún medicamento que hace que sea peligroso para usted tomar aspirina?

- Sí
- No
- No sé

45. ¿Ha hablado alguna vez un doctor o profesional médico con usted acerca de los riesgos y beneficios de la aspirina para prevenir un infarto o un derrame cerebral?

- Sí
- No

46. Que usted sepa, ¿tiene alguna de las siguientes enfermedades? Marque una o más.

- Colesterol alto
- Presión sanguínea alta (hipertensión arterial)
- Padres o hermanos que hayan tenido un infarto antes de los 60 años

47. ¿Alguna vez le ha dicho un doctor que usted tiene alguna de las siguientes enfermedades? Marque una o más.

- Un infarto
- Angina de pecho o cardiopatía coronaria
- Un derrame cerebral
- Algún tipo de diabetes o niveles altos de azúcar en la sangre

48. En los últimos 6 meses, ¿recibió usted atención médica 3 veces o más para la misma enfermedad o problema?

- Sí
- No → *Pase a la pregunta 50*

49. ¿Se trata de una enfermedad o problema que ha durado al menos 3 meses? No incluya el embarazo ni la menopausia.

- Sí
- No

50. ¿Necesita o toma ahora alguna medicina recetada por un doctor? No incluya anticonceptivos.

- Sí
- No → *Pase a la pregunta 52*

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

- Sí
- No

52. ¿Qué edad tiene?

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



53. ¿Es usted hombre o mujer?

- Hombre
- Mujer

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

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

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

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

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

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

57. ¿Le ayudó alguien a completar esta encuesta?

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

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

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

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

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

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



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

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**INSTRUCCIONES PARA EL CUESTIONARIO**

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

Marca  
Correcta ●

Marca  
Incorrecta



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

- Sí ➔ *Pase a la Pregunta 1*
- No

↓ **COMIENCE AQUI** ↓

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

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

- Sí ➔ *Pase a la pregunta 3*
- No

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

\_\_\_\_\_

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

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

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

7. En los últimos 6 meses, sin contar las veces en que su niño fue a una sala de emergencia, ¿cuántas veces fue su niño a un consultorio médico o a una clínica para que lo atendieran?
- Ninguna vez → *Pase a la pregunta 16*  
 1 vez  
 2  
 3  
 4  
 5 a 9  
 10 veces o más
8. En los últimos 6 meses, ¿hablaron usted y el doctor u otro profesional médico de su niño sobre cosas específicas que usted podría hacer para prevenir que su niño se enferme?
- Sí  
 No
9. En los últimos 6 meses, ¿con qué frecuencia le contestaron sus preguntas los doctores u otros profesionales médicos de su niño?
- Nunca  
 A veces  
 La mayoría de las veces  
 Siempre
10. En los últimos 6 meses, ¿hablaron usted y el doctor u otro profesional médico de su niño sobre comenzar o suspender una medicina recetada?
- Sí  
 No → *Pase a la pregunta 14*
11. ¿Hablaron usted y un doctor u otro profesional médico sobre las razones por las que tal vez usted quiera que su niño tome una medicina?
- Sí  
 No



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

- Sí
- No

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

- Sí
- No

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 19*

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

- Sí
- No → *Pase a la pregunta 19*

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

- Sí
- No

## SERVICIOS ESPECIALIZADOS

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

- Sí
- No → *Pase a la pregunta 22*

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

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

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 25*

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

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

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 28*

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

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

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 30*

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

- Sí
- No

### EL DOCTOR PERSONAL DE SU NIÑO

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

- Sí
- No → *Pase a la pregunta 45*

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

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



- 31a. En los últimos 6 meses, ¿con qué frecuencia se le hizo difícil hablar o entender al doctor personal de su niño porque hablaban idiomas diferentes?
- Nunca
  - A veces
  - La mayoría de las veces
  - Siempre
32. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño le explicó las cosas sobre la salud de su niño de una manera fácil de entender?
- Nunca
  - A veces
  - La mayoría de las veces
  - Siempre
33. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño le escuchó a usted con atención?
- Nunca
  - A veces
  - La mayoría de las veces
  - Siempre
34. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño demostró respeto por lo que usted tenía que decir?
- Nunca
  - A veces
  - La mayoría de las veces
  - Siempre
35. ¿Su niño puede hablar con los doctores sobre su atención médica?
- Sí
  - No → *Pase a la pregunta 37*

36. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño le explicó las cosas a su niño de una manera fácil de entender?
- Nunca
  - A veces
  - La mayoría de las veces
  - Siempre
37. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño pasó suficiente tiempo con su niño?
- Nunca
  - A veces
  - La mayoría de las veces
  - Siempre
38. En los últimos 6 meses, ¿habló el doctor personal de su niño con usted sobre cómo su niño se estaba sintiendo, estaba creciendo o se estaba comportando?
- Sí
  - No
39. En los últimos 6 meses, ¿atendió a su niño algún doctor u otro profesional médico además de su doctor personal?
- Sí
  - No → *Pase a la pregunta 41*
40. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño parecía estar informado y al día acerca de la atención que su niño había recibido de estos doctores u otros profesionales médicos?
- Nunca
  - A veces
  - La mayoría de las veces
  - Siempre





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

- Sí
- No

### ACCESO A CUIDADO DENTAL

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

- Sí
- No

57b. En los últimos 6 meses, ¿fué su niño a una oficina o clínica de un dentista para cuidado?

- Sí
- No → *Pase a la pregunta 57d*

57c. En los últimos 6 meses, ¿con qué frecuencia el personal dental o el dentista le explicaron lo que le hacían mientras trataron a su niño?

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

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

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

57e. Usando un número del 0 al 10, el 0 siendo extremadamente difícil y el 10 extremadamente fácil, ¿qué número usaría para calificar cuán fácil le fue encontrar un dentista para su niño?

- 
- 0 1 2 3 4 5 6 7 8 9 10
- Extremadamente difícil                      Extremadamente fácil

### ACERCA DE USTED Y DE SU NIÑO

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Sí
- No → *Pase a la pregunta 63*

61. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?

- Sí
- No → *Pase a la pregunta 63*

62. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?

- Sí
- No



63. ¿Necesita o usa su niño más servicios médicos, de salud mental o educativos de lo que es normal para la mayoría de los niños de la misma edad?

- Sí
- No → *Pase a la pregunta 66*

64. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?

- Sí
- No → *Pase a la pregunta 66*

65. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?

- Sí
- No

66. ¿Está su niño limitado o impedido de alguna manera en su habilidad de hacer lo que pueden hacer la mayoría de los niños de la misma edad?

- Sí
- No → *Pase a la pregunta 69*

67. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?

- Sí
- No → *Pase a la pregunta 69*

68. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?

- Sí
- No

69. ¿Necesita o recibe su niño terapia especial, tal como terapia física, ocupacional o del habla?

- Sí
- No → *Pase a la pregunta 72*

70. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?

- Sí
- No → *Pase a la pregunta 72*

71. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?

- Sí
- No

72. ¿Tiene su niño algún problema emocional, de desarrollo o de comportamiento, para el cual necesita o recibe tratamiento o consejería?

- Sí
- No → *Pase a la pregunta 74*

73. ¿Ha durado este problema o se espera que dure por lo menos 12 meses?

- Sí
- No

74. ¿Qué edad tiene su niño?

- Menos de un año

AÑOS (escriba la respuesta)

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

- Masculino
- Femenino

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

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



77. ¿A qué raza pertenece su niño?

Marque una o más.

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

78. ¿Qué edad tiene usted?

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

79. ¿Es usted hombre o mujer?

- Hombre
- Mujer

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

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

81. ¿Qué relación tiene con el niño?

- Madre o padre
- Abuelo o abuela
- Tía o tío
- Hermano o hermana mayor
- Otro familiar
- Tutor legal del niño
- Otra persona

82. ¿Le ayudó alguien a completar esta encuesta?

- Sí → *Pase a la pregunta 83*
- No → *Gracias. Por favor devuelva esta encuesta en el sobre con el porte o franqueo pagado.*

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

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

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

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

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







898-12



12

CZPCS

## DIAL.SCREEN

DS. INTERVIEWER: YOU MAY DO THE INTERVIEW WITH ONLY THE [NAMED  
RESPONDENT. NO PROXIES WILL BE ACCEPTED/PARENT/GUARDIAN/OR ADULT WHO  
KNOWS MOST ABOUT [MEMBER NAME] 'S HEALTH CARE] .

PHONE NUMBER ---> [ 1 CELL PHONE - HAND DIAL (###) ### - ##### /\*\*\*  
\*\*\*-\*\*\*\*]

Hello, I'm calling about a health care survey on behalf of  
[HEALTH PLAN NAME]. This call will be recorded and may be  
monitored for quality and  
training purposes. May I please speak with [[MEMBER FIRST NAME]  
[MEMBER LAST NAME]/the person who knows the most about [NAME OF  
CHILD]'s health care)?

We are conducting an important study to find out how satisfied  
[people/families] are with [HEALTH PLAN NAME]. The results of the  
study will help [HEALTH PLAN NAME] 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/your child's] health care or benefits in any way.

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
11. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)

IF DIAL.SCREEN = 01, GO TO START2

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/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
5. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)

IF MAIL.SCREEN = 1, GO TO START2  
RETURN TO COVERSHEET

## SEX

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

1. MALE
2. FEMALE

## SPAN.VAR

(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

1. Spanish
2. English

MEMBER

Q1. / MEMBER

[/I will be asking you about [NAME OF CHILD]'s health care. Please answer these questions based on the experiences you have had in getting health care for [NAME OF CHILD], and not on any experiences you may have had getting care for yourself or other members of your family.]

Our records show that [you/your child] [are/is] now in [HEALTH PLAN NAME]. Is that right?

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

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

DK/REFUSAL/NOT ASCERTAINED

NPLNAME

Q2. / NPLNAME

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

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS [HEALTH PLAN NAME]]

[(ENTER 5 IF R SAYS: MEDICAID)]

(IF R SAYS SOMETHING CLOSE TO [HEALTH PLAN NAME], 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/CHILD] NO LONGER INSURED (BY MEDICAID) ----> NO.INSUR
- 5. [RESPONDENT/CHILD] INSURED BY MEDICAID BUT DOESN'T ----> CK.PLMSTCR  
KNOW PLAN NAME

PLNAME

Q2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)

CK.PLMSTCR:

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

INTRO.INCARE

INTRO.INCARE

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

INCARE

Q3. / INCARE

In the last [12/6] months, did [you/your child] have an illness, injury, or condition that NEEDED CARE RIGHT AWAY in a clinic, emergency room, or doctor's office?

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

DK/REFUSAL/NOT ASCERTAINED --> APMAKE4

CARSN4

Q4. / CARSN4

In the last [12/6] months, when [you/your child] NEEDED CARE RIGHT AWAY, how often did [you/your child] get care as soon as [you/+[he/she]] needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

APMAKE4

Q5. / APMAKE4

In the last [12/6] months, did you make any appointments for a CHECK-UP OR ROUTINE CARE [/for your child] at a doctor's office or clinic?

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

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

APGET4

Q6. / APGET4

In the last [12/6] 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 [for a CHECK-UP OR ROUTINE CARE at a doctor's office or clinic/] as soon as [you/your child] needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

OFCTIM4

Q7. / OFCTIM4

In the last [12/6] months, NOT counting the times [you/your child] went to an emergency room, how many times did [you/+[he/she]] go to a doctor's office or clinic [to get health care for yourself/to get health care]

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

(IWER: IF NEEDED CLARIFY: "Please don't include dental care [you/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 &lt;05 THEN GO TO PRSNLD4

IF OFCTIM4=0 OR DK/REFUSAL AND QNAIRE &gt;05 THEN GO TO CHSCHL

PRVENT5

Q8. / PRVENT5

In the last [12/6] months, did you and [a/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

IF qnaire<5 then go to RXSTP

OFTQUES

[0/0/0/0/9/9]. / OFTQUES

In the last [12/6] months, how often did you have your questions answered by your child's doctor or other health providers? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXSTP

[9/9/9/9/10/10]. / RXSTP

In the last [12/6] months, did you and [a/your child's] doctor or other health provider talk about starting or stopping a prescription medicine [/for your child] ?

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

DK/REFUSAL/NOT ASCERTAINED --> RTALLCR

NRXWHY

[10/10/10/10/11/11]. / NRXWHY

Did you and a doctor or other health provider talk about the reasons you might want [/your child] to take a medicine?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED



NRXWYNT

[11/11/11/11/12/12]. / NRXWYNT

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RXBST

[12/12/12/12/13/13]. / 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 [you/your child]?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RTALLCR

[13/13/13/13/14/14]. / 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/your child's] health care in the last [12/6] months?

(IF NEEDED: "Please do not include any dental care [you/your child] may have received.")

00        01    02    03    04    05    06    07    08    09        10

DK/REFUSAL/NOT ASCERTAINED

CARNES4

[14/14/14/14/15/15]. / CARNES4

In the last [12/6] months, how often was it easy to get the care, tests, or treatment [you/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

[0/0/0/0/16/16]. / CHSCHL

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

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

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

CONTSCHL

[0/0/0/0/17/17]. / CONTSCHL

In the last [12/6] 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

[0/0/0/0/18/18]. / HELPCONT

In the last [12/6] 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

[0/0/0/0/19/19]. / MEDEQUIP

Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment. In the last [12/6] 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

[0/0/0/0/20/20]. / EZMDEQ

In the last [12/6] 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

[0/0/0/0/21/21]. / 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

[0/0/0/0/22/22]. / SPCTHY

In the last [12/6] 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

[0/0/0/0/23/23]. / EZTHP

In the last [12/6] 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

[0/0/0/0/24/24]. / 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

[0/0/0/0/25/25]. / TCPBLM

In the last [12/6] 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

[0/0/0/0/26/26]. / EZTC

In the last [12/6] 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

[0/0/0/0/27/27]. / HELPTC

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

PLUSCARE

[0/0/0/0/28/28]. / PLUSCARE

In the last [12/6] 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

[0/0/0/0/29/29]. / HLPCOORD

In the last [12/6] 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

[15/15/15/15/30/30]. / PRSNLD4

A personal doctor is the one [you/your child] would see if [you/+[he/she]] [need/needs] a check-up, [want advice about a health problem,/has a health problem,] or [get/gets] sick or hurt.

[Do you/Does your child] have a personal doctor?

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

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

DRTMS

[16/16/16/16/31/31]. / DRTMS

In the last [12/6] months, how many times did [you/your child] visit [your/[his/her]] personal doctor [to get care for yourself/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

IF QNAIRE= ADULT MEDICAID (02), GO TO DREXPL4

PBDRLNG

31a. / PBDRLANG

In the last [12/6] months, how often did you have a hard time speaking with or understanding your child's personal doctor because you spoke different languages? Would you say...?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DREXPL4

[17/17/17/17/32/32]. / DREXPL4

In the last [12/6] months, how often did [your/your child's] personal doctor explain things [/about your child's health] in a way that was easy to understand? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRLSTN4

[18/18/18/18/33/33]. / DRLSTN4

In the last [12/6] months, how often did [your/your child's] personal doctor listen carefully to you? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRESPU4

[19/19/19/19/34/34]. / DRESPU4

In the last [12/6] months, how often did [your/your child's] personal doctor show respect for what you had to say? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CABLTLK

[0/0/20/20/35/35]. / CABLTLK

Is your child able to talk with doctors about [your/+[his/her]] health care?

- 1. YES
- 2. NO -----> DRTMEN4

DK/REFUSAL/NOT ASCERTAINED --> DRTMEN4

## CDREXPL

[0/0/21/21/36/36]. / CDREXPL

In the last [12/6] 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

[20/20/22/22/37/37]. / DRTMEN4

In the last [12/6] months, how often did [your/your child's] personal doctor spend enough time with [you/your child] ? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## DRTLKU

[0/0/23/23/38/38]. / DRTLKU

In the last [12/6] months, did your child's personal doctor talk with you about how your child is feeling, growing, or behaving?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## DIFFDR

[21/21/24/24/39/39]. / DIFFDR

In the last [12/6] months, did [you/your child] get care from a doctor or other health provider besides [your/+[his/her]] personal doctor?

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

DK/REFUSAL/NOT ASCERTAINED --&gt; RATEDR4



DRINFO

[22/22/25/25/40/40]. / DRINFO

In the last [12/6] months, how often did [your/your child's] personal doctor seem informed and up-to-date about the care [you/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

[23/23/26/26/41/41]. / 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/your child's] personal doctor?

00            01    02    03    04    05    06    07    08    09            10

DK/REFUSAL/NOT ASCERTAINED

COND3MO

[0/0/0/0/42/42]. / COND3MO

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

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

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

DRUNCON

[0/0/0/0/43/43]. / 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

[0/0/0/0/44/44]. / 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 you got when you stayed overnight in a hospital. /dental visits or care your child got when (he/she) stayed overnight in a hospital.]

NDSPDR4

[24/24/27/27/45/45]. / 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 [12/6] months, did you make any appointments [/for your child] to see a specialist?

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

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

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

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

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

PRBSEE4

[25/25/28/28/46/46]. / PRBSEE4

In the last [12/6] 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

[26/26/29/29/47/47]. / SPDRS

How many specialists [have/has] [you/your child] seen in the last [12/6] 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/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

[27/27/30/30/48/48]. / RTSPDR4

We want to know your rating of the specialist [you/your child] saw most often in the last [12/6] months.

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

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

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN  
INTRO.PLAN

Now I'm going to ask you some questions about your experience with  
[your/your child's] health plan.

LOOMAT4  
[28/28/0/0/0/0]. / LOOMAT4

In the last [12/6] months, did you look for any information in written  
materials or on the Internet about how your health plan works?

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

DK/REFUSAL/NOT ASCERTAINED --> CK.LOOSVC

UNDINF4  
[29/29/0/0/0/0]. / UNDINF4

In the last [12/6] 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)

CK.LOOSVC  
IF qnaire=02 then go to CLCSRV4

LOOSVC  
[30/0/0/0/0/0]. / LOOSVC

Sometimes people need services or equipment beyond what is provided in a  
regular or routine office visit, such as care from a specialist,  
physical therapy, a hearing aid, or oxygen.

In the last 12 months, did you look for information from your health  
plan on how much you would have to pay for a health care service or  
equipment?

- 1. YES
- 2. NO -----> LOOMED

DK/REFUSAL/NOT ASCERTAINED --> LOOMED

FNDSVC

[31/0/0/0/0/0]. / FNDSVC

In the last 12 months, how often were you able to find out from your health plan how much you would have to pay for a health care service or equipment? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

LOOMED

[32/0/0/0/0/0]. / LOOMED

In some health plans the amount you pay for a prescription medicine can be different for different medicines, or can be different for prescriptions filled by mail instead of at the pharmacy.

In the last 12 months, did you look for information from your health plan on how much you would have to pay for specific prescription medicines?

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

DK/REFUSAL/NOT ASCERTAINED --> CLCSRV4

FNDMED

[33/0/0/0/0/0]. / FNDMED

In the last 12 months, how often were you able to find out from your health plan how much you would have to pay for specific prescription medicines? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CLCSRV4

[34/30/31/31/49/49]. / CLCSRV4

In the last [12/6] months, did you get information or help from [your health plan's customer service/customer service at your child's health plan] ?

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

DK/REFUSAL/NOT ASCERTAINED --> PLPRWK4

PBCLCS4

[35/31/32/32/50/50]. / PBCLCS4

In the last [12/6] months, how often did [your health plan's customer service/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

[36/32/33/33/51/51]. / CSRESP

In the last [12/6] months, how often did [your health plan's/] 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

[37/33/34/34/52/52]. / PLPRWK4

In the last [12/6] months, did [your/your child's] health plan give you any forms to fill out?

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

DK/REFUSAL/NOT ASCERTAINED --> CK.SNDCLMS

PBPLPW4

[38/34/35/35/53/53]. / PBPLPW4

In the last [12/6] months, how often were the forms from [your/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)

CK.SNDCLMS

SNDCLM4

[39/0/0/0/0/0]. / SNDCLM4

Claims are sent to a health plan for payment. You may send in the claims yourself, or doctors, hospitals, or others may do this for you.

In the last [12/6] months, did you or anyone else send in any claims for your care to your health plan?

- 1. YES
- 2. NO -----> RTPLEXP
- 3. DON'T KNOW (DO NOT PROBE) --> RTPLEXP
- 9. REFUSAL/NOT ASCERTAINED ----> RTPLEXP

CLMTMR4

[40/0/0/0/0/0]. / CLMTMR4

In the last [12/6] months, how often did your health plan handle your claims quickly? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?
- 5. DON'T KNOW (DO NOT READ) (DO NOT PROBE)
- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

CLMCRCT

[41/0/0/0/0/0]. / CLMCRCT

In the last [12/6] months, how often did your health plan handle [your/your child's] claims correctly? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?
  
- 5. DON'T KNOW (DO NOT READ) (DO NOT PROBE)
  
- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTPLEXP

[42/35/36/36/54/54]. / 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/your child's] health plan?

00            01    02    03    04    05    06    07    08    09        10

DK/REFUSAL/NOT ASCERTAINED

IF QNAIRE= CHILD MED W/CCC (07), GO TO CHPRES

HPMDEQ

[0/35.01/0/0/0/0]. / HPMDEQ

In the last [12/6] months, did you have a health problem for which you needed special medical equipment, such as a cane, a wheelchair, or oxygen equipment?

- 1. YES
- 2. NO -----> POSTHP

DK/REFUSAL/NOT ASCERTAINED --> POSTHP



## EZMDHP

[0/35.02/0/0/0/0]. / EZMDHP

In the last [12/6] months, how often was it easy to get the medical equipment you needed through your health plan? Would you say...?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## POSTHP

[0/35.03/0/0/0/0]. / POSTHP

In the last [12/6] months, did you have any health problems that needed special therapy, such as physical, occupational, or speech therapy?

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

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

## EZPOST

[0/35.04/0/0/0/0]. / EZPOST

In the last [12/6] months, how often was it easy to get the special therapy you needed through your health plan? Would you say...?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

INTRO.DTLK  
INTRO.DTLK

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

DTLKTF  
[0/35.5/0/0/0/0]. / DTLKTF

In the last [12/6] months, how often did a doctor or other health provider talk too fast when talking to you? Would you say...?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## DINTER

[0/35.6/0/0/0/0]. / DINTER

In the last [12/6] months, how often did a doctor or other health provider interrupt you when you were talking? Would you say...?

(READ LIST IF NECESSARY)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## DRRUDE

[0/35.7/0/0/0/0]. / DRRUDE

In the last [12/6] months, how often did a doctor or other health provider use a condescending, sarcastic or rude tone or manner with you? Would you say...?

(READ LIST IF NECESSARY)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## TRUSTDR

[0/35.8/0/0/0/0]. / TRUSTDR

In the last [12/6] months, did you feel you could trust a doctor or other health provider with your medical care?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## REGDENT

[0/35.9/0/0/0/57.01]. / REGDENT

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

[Do you/Does your child] have a regular dentist?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## GODENT

[0/35.10/0/0/0/57.02]. / GODENT

In the last 6 months, did [you/your child] go to a dentist's office or clinic for care?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

IF QNAIRE = ADULT MEDICAID (02) AND GODENT <> YES, GO TO CK.DENTSOON  
IF QNAIRE = CHILD MEDICAID W/CCC (07) AND GODENT <> YES, GO TO DNTASAP

## DENTEXPL

[0/35.11/0/0/0/57.03]. / DENTEXPL

In the last [12/6] months, how often did [your/your child's] dentist or dental staff explain what they were doing while treating [you/your child]? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CK.DENTSOON

IF QNAIRE = CHILD MEDICAID W/CCC (07), GO TO DNTASAP

DENTSOON

[0/35.12/0/0/0/0]. / DENTSOON

If you tried to get an appointment for yourself with a dentist who specializes in a particular type of dental care (such as root canals or gum disease) in the last 6 months, how often did you get an appointment as soon as you wanted?

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?
  
- 5. DID NOT TRY TO GET AN APPOINTMENT WITH A SPECIALIST DENTIST IN THE LAST 6 MONTHS (DO NOT READ)

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DNTASAP

[0/35.13/0/0/0/57.04]. / DNTASAP

In the last [12/6] months, if [you/your child] needed to see a dentist right away because of a DENTAL EMERGENCY, did [you/+[he/she]] get to see a dentist as soon as you wanted? Would you say...

(IWER: IF R RESPONDS WITH "YES/NO" PLEASE PROBE WITH RESPONSE OPTIONS)

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTDENT

[0/35.14/0/0/0/57.03]. / RTDENT

Using any number from 0 to 10, where 0 is extremely difficult and 10 is extremely easy, what number would you use to rate how easy it was for you to find a dentist [/for your child] ?

00            01    02    03    04    05    06    07    08    09        10

DK/REFUSAL/NOT ASCERTAINED

GO TO HLTSTA4

CHPRES

[0/0/0/0/55/55]. / CHPRES

In the last [12/6] months, did you get or refill any prescription medicines for your child?

1. YES
2. NO -----> REGDENT

DK/REFUSAL/NOT ASCERTAINED --> REGDENT

EZPRES

[0/0/0/0/56/56]. / EZPRES

In the last [12/6] months, how often was it easy to get prescription medicines for your child through [your/+[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

[0/0/0/0/57/57]. / 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

IF QNAIRE = CHILD MEDICAID W/CCC, GO TO REGDENT

HLTSTA4

[43/36/37/37/58/58]. / HLTSTA4

[/I have just a few more questions.]

In general, how would you rate [your/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

[44/37/38/38/59/59]. / MNTLSTAT

In general, how would you rate [your/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

[0/0/0/0/60/60]. / 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

[0/0/0/0/61/61]. / WHYMEDA

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

- 1. YES
- 2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

WHYMEDB

[0/0/0/0/62/62]. / 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

[0/0/0/0/63/63]. / 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

[0/0/0/0/64/64]. / WHYMOREA

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

- 1. YES
- 2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

WHYMOREB

[0/0/0/0/65/65]. / 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

[0/0/0/0/66/66]. / LIMITED

Is your child limited or prevented in any way in [your/+[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

[0/0/0/0/67/67]. / WHYLIMA

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

1. YES
2. NO -----> SPECTHP

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

## WHYLIMB

[0/0/0/0/68/68]. / 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

[0/0/0/0/69/69]. / SPECTHP

Does your child need or get special therapy such as physical, occupational, or speech therapy?

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

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

## WHYSTA

[0/0/0/0/70/70]. / WHYSTA

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

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

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

## WHYSTB

[0/0/0/0/71/71]. / 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

[0/0/0/0/72/72]. / CHCOUNS

Does your child have any kind of emotional, developmental, or behavioral problem for which [you/+[he/she]] needs or gets treatment or counseling?

- 1. YES
- 2. NO -----> CAGE

DK/REFUSAL/NOT ASCERTAINED --> CAGE

TIMCOUNA

[0/0/0/0/73/73]. / TIMCOUNA

Has this problem lasted or is it expected to last for at least 12 months?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

FLUSHOTQ

[45/38/0/0/0/0]. / FLUSHOTQ

Have you had either a flu shot or flu spray in the nose since July 1, 2015?

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

NOWSMOK

[46/39/0/0/0/0]. / 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

[47/40/0/0/0/0]. / ADVQUIT9

In the last [12/6] 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

[48/41/0/0/0/0]. / PATCH9

In the last [12/6] 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

[49/42/0/0/0/0]. / WILLPWR9

In the last [12/6] 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

[50/43/0/0/0/0]. / 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

[51/44/0/0/0/0]. / 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

[52/45/0/0/0/0]. / 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)

[53/46/0/0/0/0].(1-3) / PHAWCD.(1-3)

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

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

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.DRCOND

INTRO.DRCOND

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

PHDRCD.(1-4)

[54/47/0/0/0/0].(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

[55/48/0/0/0/0]. / SMPROB

[I have just a few more questions./]

In the last [12/6] months, did you get health care 3 or more times for the same condition or problem?

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

DK/REFUSAL/NOT ASCERTAINED --> TKMED

## PRBLST

[56/49/0/0/0/0]. / 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

[57/50/0/0/0/0]. / TKMED

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

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

DK/REFUSAL/NOT ASCERTAINED --> QAGE4

## TRTCOND

[58/51/0/0/0/0]. / 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

[59/52/0/0/0/0]. / 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

[60/53/0/0/0/0]. / QGENDER

(IWER: RECORD RESPONDENT'S SEX.)

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

1. MALE
2. FEMALE

DK/REFUSAL/NOT ASCERTAINED

CAGE

[0/0/39/39/74/74]. / CAGE

[/I have just a few more questions.]

What is YOUR CHILD'S age?

(IWER: ENTER 00 IF LESS THAN 1 YEAR OLD)

(IWER: DO NOT ROUND UP)

(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

[0/0/39/39/74/74]a. / 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

IF cage>18 and cage<>99 then go to ALL.DONE

CGENDER

[0/0/40/40/75/75]. / CGENDER

(IF NEEDED: "Is your child male or female?")

1. MALE
2. FEMALE

REFUSAL/NOT ASCERTAINED

LATINO

[62/55/41/41/76/76]. / LATINO

[Are/Is] [you/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/your child's] race. I must ask you about all categories in case more than one applies.



PQRACE3.(1-6)  
[63/56/42/42/77/77].(1-6) / PQRACE3.(1-6)

[(Are you)/(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/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/your child's] race?)

---

PAGE

[0/0/43/43/78/78]. / 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

[0/0/44/44/79/79]. / PGENDER

(IWER: ENTER RESPONDENT'S SEX.)

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

1. MALE
2. FEMALE

DK/REFUSAL/NOT ASCERTAINED

## EDUCAT

[61/54/45/45/80/80]. / 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

[0/0/46/46/81/81]. / 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?