



FamilyCare Health  
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 FamilyCare Health members. FamilyCare Health 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	
	FamilyCare	Overall	FamilyCare	Overall
<b>**First mailing - sent</b>	900	16200	900	16200
<b>*First mailing - usable survey returned</b>	116	2801	113	2168
<b>Second mailing - sent</b>	760	13319	758	13616
<b>*Second mailing - usable survey returned</b>	55	978	50	886
<b>*Phone - usable surveys</b>	64	1303	131	2255
<b>Total - usable surveys</b>	235	5082	294	5309
<b>†Ineligible: According to population criteria‡</b>	26	346	17	200
<b>†Ineligible: Deceased</b>	0	31	0	0
<b>†Ineligible: Mentally or physically unable to complete survey</b>	7	195	0	0
<b>†Ineligible: Language barrier</b>	11	64	13	59
<b>Incorrect address AND incorrect phone number</b>	50	848	38	710
<b>Refusal/Returned survey blank</b>	31	672	51	829
<b>Nonresponse - Unavailable by mail or phone</b>	540	8962	487	9093
<b>Adjusted Response Rate</b>	<b>27.5%</b>	<b>32.7%</b>	<b>33.8%</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	261 49.1%	93 39.6%	-9.49%
Female	271 50.9%	142 60.4%	9.49%
18-24	99 18.6%	21 8.9%	-9.67%
25-34	182 34.2%	52 22.1%	-12.08%
35-44	112 21.1%	45 19.1%	-1.90%
45-54	74 13.9%	51 21.7%	7.79%
55-64	55 10.3%	57 24.3%	13.92%
65-74	5 0.9%	7 3.0%	2.04%
75 or Older	5 0.9%	2 0.9%	-0.09%

### Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	247 50.7%	153 52.0%	1.32%
Female	240 49.3%	141 48.0%	-1.32%
<3	119 24.4%	66 22.4%	-1.99%
4-7	118 24.2%	85 28.9%	4.68%
8-12	135 27.7%	77 26.2%	-1.53%
13 or older	115 23.6%	66 22.4%	-1.16%

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					
	FMCA	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-	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									WHTE	AMER	IAN	#	##	##	TI	IC	IC	&		
																		FAIR		
																		&		
																		POOR		
																		MALE		
																		MALE		
Q1																				
YES	233	5060	17	41	45	44	54	12	138	12	16			11	30	182	162	51	83	133
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	~	~	~100%	100%	100%	100%	100%	100%	100%
NOT ANSWERED	2	22																1		
VALID CASES	233	5060	17	41	45	44	54	12	138	12	16			11	30	182	162	51	83	133
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%



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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY				HEALTH STATUS		GENDER	
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE		
Q3 YES	89 39%	2017 41%	5 29%~	16 39%~	17 38%~	18 42%~	19 36%	7 58%~	57 42%	4 33%~	5 31%~			4 ~ 36%~	7 23%~	76 42%~	49 30%*	31 61%*	32 40%	52 39%		
NO	138 61%	2921 59%	12 71%~	25 61%~	28 62%~	25 58%~	34 64%	5 42%~	79 58%	8 67%~	11 69%~			7 ~ 64%~	23 77%~	105 58%~	113 70%*	20 39%*	49 60%	81 61%		
NOT ANSWERED	8	144				1	1		2							1	1		2			
VALID CASES	227	4938	17	41	45	43	53	12	136	12	16			11	30	181	162	51	81	133		
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%		

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	FMCA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV ILND #	AMER PAC ALSK #	OTHER ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q4 NEVER	2 2%	42 2%	1 20%	~	~	~	1 6%	~	1 2%	~	~	~	~	~	~	2 3%	1 2%	1 3%	2 7%	~
SOMETIMES	14 17%	268 15%	1 20%	4 27%	2 13%	2 13%	3 43%	6 11%	1 25%	2 40%	~	~	~	~	2 33%	10 14%	5 12%	7 23%	2 7%	10 20%
USUALLY	18 22%	466 26%	1 20%	3 20%	4 25%	6 38%	3 19%	14 26%	~	2 40%	~	~	~	1 33%	~	17 24%	13 30%	4 13%	5 18%	13 27%
ALWAYS	47 58%	1045 57%	2 40%	8 53%	10 63%	8 50%	12 75%	4 57%	32 60%	3 75%	1 20%	~	~	2 67%	4 67%	41 59%	24 56%	18 60%	19 68%	26 53%
#ALWAYS + USUALLY (NET)	65 80%	1511 83%	3 60%	11 73%	14 88%	14 88%	15 94%	4 57%	46 87%	3 75%	3 60%	~	~	3 100%	4 67%	58 83%	37 86%	22 73%	24 86%	39 80%
TOP BOX SCORE	47 58%	1045 57%	2 40%	8 53%	10 63%	8 50%	12 75%	4 57%	32 60%	3 75%	1 20%	~	~	2 67%	4 67%	41 59%	24 56%	18 60%	19 68%	26 53%
NOT ANSWERED	8	196	1	1	2	3		4						1	1	6	6	1	4	3
VALID CASES	81	1821	5	15	16	16	16	7	53	4	5			3	6	70	43	30	28	49
NUMBER OF RESPONDENTS	89	2017	5	16	17	18	19	7	57	4	5			4	7	76	49	31	32	52
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q3 = YES]

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH	GENDER		
	OT1	OT2													ITY	STATUS					
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	PAN-	PAN-	&	&	FE-		
									WHTE	AMER	IAN	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q5																					
YES	155	3365	10	25	28	34	40	9	97	7	10			9	18	128	100	44	53	95	
	69%	68%	59%~	64%~	62%~	79%~	75%	75%~	71%	58%~	67%~	~	~	~ 82%~	60%~	72%~	62%*	88%*	66%	72%	
NO	69	1561	7	14	17	9	13	3	39	5	5			2	12	51	61	6	27	37	
	31%	32%	41%~	36%~	38%~	21%~	25%	25%~	29%	42%~	33%~	~	~	~ 18%~	40%~	28%~	38%*	12%*	34%	28%	
NOT ANSWERED	11	156		2		1	1		2		1				3	2	1		3	1	
VALID CASES	224	4926	17	39	45	43	53	12	136	12	15			11	30	179	161	50	80	132	
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133	
	100%	100%	100%	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						ETHNICITY	HEALTH STATUS		GENDER		
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE
Q6 NEVER	2 1%	83 3%	1 ~	4%~	~	~	~	~	~	~	~	~	~	~	1 7%~	1 1%~	1 2%~	~	~	
SOMETIMES	34 25%	590 19%	3 30%~	8 35%~	7 27%~	4 13%~	6 19%~	3 38%~	18 21%	1 17%~	5 56%~	~	~	2 25%~	3 20%~	28 25%~	25 28%~	6 15%~	9 20%~	22 26%
USUALLY	38 28%	884 29%	2 20%~	8 35%~	8 31%~	10 33%~	8 26%~	~	24 28%	3 50%~	1 11%~	~	~	2 25%~	2 13%~	32 28%~	21 24%~	14 36%~	12 27%~	24 28%
ALWAYS	62 46%	1472 49%	5 50%~	6 26%~	11 42%~	16 53%~	17 55%~	5 63%~	43 51%	2 33%~	3 33%~	~	~	4 50%~	9 60%~	53 47%~	41 47%~	19 49%~	22 50%~	40 47%
#ALWAYS + USUALLY (NET)	100 74%	2356 78%	7 70%~	14 61%~	19 73%~	26 87%~	25 81%~	5 63%~	67 79%	5 83%~	4 44%~	~	~	6 75%~	11 73%~	85 75%~	62 70%~	33 85%~	34 77%~	64 74%
TOP BOX SCORE	62 46%	1472 49%	5 50%~	6 26%~	11 42%~	16 53%~	17 55%~	5 63%~	43 51%	2 33%~	3 33%~	~	~	4 50%~	9 60%~	53 47%~	41 47%~	19 49%~	22 50%~	40 47%
NOT ANSWERED	19	336	2	2	4	9	1	12	1	1			1	3	15	12	5	9	9	
VALID CASES	136	3029	10	23	26	30	31	8	85	6	9			8	15	113	88	39	44	86
NUMBER OF RESPONDENTS	155	3365	10	25	28	34	40	9	97	7	10			9	18	128	100	44	53	95
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q5 = YES]

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER				
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE			
Q7 NONE	56 25%	1242 26%	4 24%~	13 32%~	17 39%~	5 11%~	10 19%	3 25%	32 24%	4 33%~	2 13%~	~	~	~	27%~	3 34%~	10 23%~	41 30%*	49 30%*	5 10%*	23 28%	29 22%	
1 TIME	49 22%	927 19%	5 29%~	7 17%~	8 18%~	11 25%~	13 25%	2 17%~	27 20%	2 17%~	7 44%~	~	~	~	18%~	2 24%~	7 22%~	39 25%*	41 25%*	6 12%*	14 17%	32 24%	
2	43 19%	878 18%	1 6%~	6 15%~	7 16%~	13 30%~	10 19%	4 33%~	26 19%	4 33%~	3 19%~	~	~	~	9%~	1 14%~	4 20%~	36 20%	7 14%	33 20%	7 14%	16 20%	25 19%
3	22 10%	581 12%	1 6%~	6 15%~	3 7%~	6 14%~	3 6%	2 17%~	16 12%	~	1 6%~	~	~	~	9%~	1 14%~	4 10%~	18 10%~	13 8%	9 18%	8 10%	14 11%	
4	19 9%	402 8%	2 12%~	5 12%~	4 9%~	3 7%~	4 8%	~	15 11%	~	1 6%~	~	~	~	9%~	~	19 10%~	11 7%	8 16%	11 7%	8 16%	9 11%	10 8%
5 TO 9	21 9%	571 12%	3 18%~	3 7%~	3 7%~	3 7%~	6 12%	1 8%~	12 9%	1 8%~	2 13%~	~	~	~	~	3 10%~	16 9%~	12 7%	7 14%	12 7%	7 14%	6 7%	14 11%
10 OR MORE TIMES	13 6%	248 5%	1 6%~	1 2%~	2 5%~	3 7%~	6 12%	~	8 6%	1 8%~	~	~	~	~	27%~	3 3%~	12 7%~	4 2%*	8 16%*	5 2%*	8 16%*	5 6%	8 6%
NOT ANSWERED	12	233			1		2		2							1	1		1	2	1		
VALID CASES	223	4849	17	41	44	44	52	12	136	12	16			11	29	181	163	50	81	132			
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133			
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q8 #YES	121 75%	2535 72%	9 69%~	22 79%~	20 74%~	28 76%~	27 71%~	7 78%~	75 74%	6 75%~	6 46%~	~	~	~	6 86%~	17 94%~	97 72%~	77 71%*	37 84%~	42 75%	74 75%
NO	40 25%	984 28%	4 31%~	6 21%~	7 26%~	9 24%~	11 29%~	2 22%~	26 26%	2 25%~	7 54%~	~	~	~	1 14%~	1 6%~	38 28%~	32 29%*	7 16%~	14 25%	25 25%
NOT ANSWERED	6	88				2	4		3		1			1	1	5	5	1	2	4	
VALID CASES	161	3519	13	28	27	37	38	9	101	8	13			7	18	135	109	44	56	99	
NUMBER OF RESPONDENTS	167	3607	13	28	27	39	42	9	104	8	14			8	19	140	114	45	58	103	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q7 >= 1 TIME]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	PAN-	PAN-	GOOD	FAIR		
									WHTE	AMER	IAN	#	##	##	TI	IC	IC	&	&	
																	GOOD	POOR	MALE	MALE
Q9																				
YES	81	1857	4	16	13	22	18	3	53	5	5			3	7	70	53	23	30	48
	50%	53%	31%~	57%~	48%~	59%~	47%~	33%~	52%	63%~	38%~	~	~	~ 50%~	39%~	52%~	49%	52%~	54%	48%
NO	80	1655	9	12	14	15	20	6	49	3	8			3	11	65	56	21	26	51
	50%	47%	69%~	43%~	52%~	41%~	53%~	67%~	48%	38%~	62%~	~	~	~ 50%~	61%~	48%~	51%	48%~	46%	52%
NOT ANSWERED	6	95				2	4		2		1			2	1	5	5	1	2	4
VALID CASES	161	3512	13	28	27	37	38	9	102	8	13			6	18	135	109	44	56	99
NUMBER OF RESPONDENTS	167	3607	13	28	27	39	42	9	104	8	14			8	19	140	114	45	58	103
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									WHTE	AMER	IAN	#	##	##	TI	IC	IC	&		
																		FAIR		
																		&		
																		POOR		
																		MALE		
																		MALE		
Q10																				
#YES	77	1690	3	15	13	20	18	3	51	4	5			3	7	66	49	23	27	47
	96%	93%	75%~	94%~	100%~	95%~	100%~	100%~	98%~	80%~	100%~	~	~	~100%~	100%~	96%~	94%~	100%~	90%~	100%~
NO	3	121	1	1		1			1	1					3	3			3	
	4%	7%	25%~	6%~	~	5%~	~	~	2%~	20%~	~	~	~	~	~	4%~	6%~	~	10%~	~
NOT ANSWERED	1	46				1			1						1	1				1
VALID CASES	80	1811	4	16	13	21	18	3	52	5	5			3	7	69	52	23	30	47
NUMBER OF RESPONDENTS	81	1857	4	16	13	22	18	3	53	5	5			3	7	70	53	23	30	48
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

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



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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2													ITY	STATUS				
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	PAN-	PAN-	&	&		
									WHTE	AMER	IAN	#	##	##	IC	IC	GOOD	POOR		
																	MALE	MALE		
Q11																				
#YES	63	1346	4	11	11	18	13	1	43	3	1			3	6	53	41	17	23	37
	80%	74%	100%~	73%~	85%~	86%~	72%~	33%~	83%~	60%~	20%~	~	~	~100%~	86%~	78%~	80%~	74%~	79%~	79%~
NO	16	462		4	2	3	5	2	9	2	4				1	15	10	6	6	10
	20%	26%	~	27%~	15%~	14%~	28%~	67%~	17%~	40%~	80%~	~	~	~	~14%~	22%~	20%~	26%~	21%~	21%~
NOT ANSWERED	2	49		1		1			1							2	2		1	1
VALID CASES	79	1808	4	15	13	21	18	3	52	5	5			3	7	68	51	23	29	47
NUMBER OF RESPONDENTS	81	1857	4	16	13	22	18	3	53	5	5			3	7	70	53	23	30	48
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE
Q12 #YES	67 84%	1378 77%	3 75%~	12 75%~	12 92%~	17 81%~	17 94%~	2 67%~	43 83%~	4 80%~	4 80%~			3 ~100%	7 ~100%	57 83%~	43 83%~	20 87%~	24 80%~	41 87%~
NO	13 16%	420 23%	1 25%~	4 25%~	1 8%~	4 19%~	1 6%~	1 33%~	9 17%~	1 20%~	1 20%~					12 ~17%	9 17%~	3 13%~	6 20%~	6 13%~
NOT ANSWERED	1	59				1			1							1	1			1
VALID CASES	80	1798	4	16	13	21	18	3	52	5	5			3	7	69	52	23	30	47
NUMBER OF RESPONDENTS	81	1857	4	16	13	22	18	3	53	5	5			3	7	70	53	23	30	48
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE					RACE					ETHNIC-ITY	HEALTH STATUS		GENDER				
	FMCA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q13 WORST HEALTH CARE POSSIBLE		19 0.5%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
01		22 0.6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
02	1 0.6%	39 1%	~	~	~	~	3%	~	1%	~	~	~	~	~	~	1	1	~	1	
03		2 1%	~	~	~	5%	~	~	2%	~	~	~	~	~	2	1	1	2	~	
04	1 0.6%	95 3%*	~	~	4%	~	~	~	1%	~	~	~	~	~	1	~	1	~	1	
05	11 7%	234 7%	~	3	1	2	3	~	7	~	1	~	~	~	9	5	5	3	6	
06	14 9%	215 6%	1	5	5	2	1	~	11	1	~	~	~	~	2	12	9	5	2	12
07	15 9%	442 13%	1	2	2	5	3	1	9	1	1	~	~	~	1	13	8	6	8	6
08	42 26%	779 22%	3	8	7	7	12	3	31	~	5	~	~	2	1	39	32	8	12	29
09	18 11%	592 17%*	2	4	2	3	6	1	11	1	2	~	~	1	1	16	14	4	5	13
BEST HEALTH CARE POSSIBLE	57 35%	1011 29%	6	6	8	16	13	4	28	5	4	~	~	4	13	42	38	15	23	32
#8-10 (NET)	117 73%	2382 68%	11	18	17	26	31	8	70	6	11	~	~	7	15	97	84	27	40	74

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			
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
9-10 (NET)	75 47%	1603 46%	8 62%~	10 36%~	10 38%~	19 51%~	19 49%~	5 56%~	39 39%*	6 75%~	6 46%~		5 71%~	14 78%~	58 43%~	52 48%	19 42%~	28 51%	45 45%
NOT ANSWERED	6	96			1	2	3		3		1		1	5	6		3	3	
VALID CASES	161	3511	13	28	26	37	39	9	101	8	13		7	18	135	108	45	55	100
NUMBER OF RESPONDENTS	167	3607	13	28	27	39	42	9	104	8	14		8	19	140	114	45	58	103
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%
MEAN	8.22	7.94	8.85	7.82	7.96	8.27	8.31	8.89	7.95	9.00	8.46		9.29	9.22	8.12	8.35	7.87	8.36	8.19
p stat_(*=Sig @ p<=.05)		.045*	~	~	~	~	~	~	.009*	~	~	~	~	~	~	.220	~	.475	.761

[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												ITY	STATUS						
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD				
									AMER	IAN	#	##	##	TI	IC	IC	&				
									WHTE								FAIR				
																	&				
																	POOR				
																	MALE				
																	MALE				
Q14																					
NEVER	3	90	1			1			1	1					2	3	2				
	2%	3%	8%~	~	~	3%~	~	~	1%	~	8%~	~	~	~	~	1%	3%	4%			
SOMETIMES	23	539	3	6	3	2	7	1	15	4				2	22	13	9	7	15		
	14%	15%	23%~	21%~	11%~	6%~	18%~	11%~	15%	~	31%~	~	~	~	29%~	~	16%~	12%	20%~	13%	15%
USUALLY	47	1150	4	9	14	8	7	1	25	4	2			3	5	37	32	11	14	30	
	29%	33%	31%~	32%~	52%~	22%~	18%~	11%~	25%	50%~	15%~	~	~	~	43%~	28%~	27%~	30%	24%~	25%	30%
ALWAYS	88	1722	5	13	10	25	25	7	60	4	6			2	13	74	60	25	33	54	
	55%	49%	38%~	46%~	37%~	69%~	64%~	78%~	59%	50%~	46%~	~	~	~	29%~	72%~	55%~	56%	56%~	59%	55%
#ALWAYS + USUALLY (NET)	135	2872	9	22	24	33	32	8	85	8	8			5	18	111	92	36	47	84	
	84%	82%	69%~	79%~	89%~	92%~	82%~	89%~	84%	100%~	62%~	~	~	~	71%~	100%~	82%~	85%	80%~	84%	85%
TOP BOX SCORE	88	1722	5	13	10	25	25	7	60	4	6			2	13	74	60	25	33	54	
	55%	49%	38%~	46%~	37%~	69%~	64%~	78%~	59%	50%~	46%~	~	~	~	29%~	72%~	55%~	56%	56%~	59%	55%
NOT ANSWERED	6	106				3	3		3	1				1	1	5	6		2	4	
VALID CASES	161	3501	13	28	27	36	39	9	101	8	13			7	18	135	108	45	56	99	
NUMBER OF RESPONDENTS	167	3607	13	28	27	39	42	9	104	8	14			8	19	140	114	45	58	103	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV #	AMER IND/ PAC ALSK	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q15 YES	176 79%	3993 82%	13 76%~	29 71%~	35 78%~	38 86%~	42 82%	9 75%~	112 82%	7 58%~	10 63%~	~	~	~	90%~	9 77%~	144 80%~	120 74%*	45 90%*	60 73%	109 83%
NO	48 21%	904 18%	4 24%~	12 29%~	10 22%~	6 14%~	9 18%	3 25%~	24 18%	5 42%~	6 38%~	~	~	~	10%~	1 23%~	36 20%~	42 26%*	5 10%*	22 27%	22 17%
NOT ANSWERED	11	185					3		2					1		2		1	1	1	2
VALID CASES	224	4897	17	41	45	44	51	12	136	12	16			10	30	180	162	50	82	131	
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133	
	100%	100%	100%	100%	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						ETHNICITY			HEALTH STATUS		GENDER		
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER PAC ALSK ##	OTHER ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q16 NONE	32 19%	792 21%	4 33%	5 17%	8 24%	6 16%	6 16%	2 22%	19 18%	2 29%	2 22%	~	~	~	33%	3 14%	28 20%	27 24%*	5 11%	12 21%	19 18%	
1 TIME	57 34%	995 27%*	5 42%	10 34%	9 27%	12 32%	16 42%	2 22%	35 33%	2 29%	3 33%	~	~	~	33%	3 43%	44 32%	43 38%	9 20%	12 21%*	42 40%*	
2	31 19%	792 21%	1 8%	3 10%	7 21%	9 24%	6 16%	3 33%	20 19%	2 29%	1 11%	~	~	~	~	5 24%	24 17%	25 22%	4 9%	16 28%*	14 13%*	
3	14 8%	483 13%*	~	17%	2 6%	5 14%	~	11%	9 8%	~	1 11%	~	~	~	11%	1 5%	13 9%	7 6%	7 16%	6 11%	8 8%	
4	8 5%	279 7%	~	7%	2 9%	3 9%	~	8%	8 7%*	~	~	~	~	~	~	~	8 6%	4 4%	4 9%	3 5%	5 5%	
5 TO 9	19 11%	312 8%	2 17%	4 14%	3 9%	3 8%	5 13%	1 11%	14 13%	~	2 22%	~	~	~	11%	1 10%	2 12%	17 12%	7 6%*	11 25%	7 12%	12 12%
10 OR MORE TIMES	5 3%	88 2%	~	~	1 3%	2 5%	2 5%	~	2 2%	1 14%	~	~	~	~	11%	1 5%	4 3%	1 0.9%	4 9%	1 2%	4 4%	
NOT ANSWERED	10	252	1		2	1	4		5		1					2	6	6	1	3	5	
VALID CASES	166	3741	12	29	33	37	38	9	107	7	9			9	21	138	114	44	57	104		
NUMBER OF RESPONDENTS	176	3993	13	29	35	38	42	9	112	7	10			9	23	144	120	45	60	109		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q15 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER									
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				NOT	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									WHTE	AMER	IAN	#	##	##	TI	IC	IC	&		
																		FAIR		
																		&		
																		POOR		
																		MALE		
																		MALE		
Q17																				
NEVER	3	51		1			2		3							3		3	2	1
	2%	2%		~ 4%	~	~	6%	~	3%	~	~	~	~	~	~	3%	~	8%	4%	1%
SOMETIMES	7	190		2	2	2	1		5	1	1					7	4	3	1	6
	5%	6%		~ 8%	8%	6%	3%	~	6%	20%	14%	~	~	~	~	6%	5%	8%	2%	7%
USUALLY	26	579		1	3	7	6	1	16	1	1					4	20	16	8	7
	19%	20%		13%	13%	28%	19%	14%	18%	20%	14%	~	~	~	~	22%	18%	18%	21%	16%
ALWAYS	98	2109		7	18	16	23	23	64	3	5				6	14	80	67	25	35
	73%	72%		88%	75%	64%	74%	72%	73%	60%	71%	~	~	~100%	78%	73%	77%	64%	78%	72%
#ALWAYS + USUALLY (NET)	124	2688		8	21	23	29	29	80	4	6				6	18	100	83	33	42
	93%	92%		100%	88%	92%	94%	91%	91%	80%	86%	~	~	~100%	100%	91%	95%	85%	93%	92%
TOP BOX SCORE	98	2109		7	18	16	23	23	64	3	5				6	14	80	67	25	35
	73%	72%		88%	75%	64%	74%	72%	73%	60%	71%	~	~	~100%	78%	73%	77%	64%	78%	72%
NOT ANSWERED		20																		
VALID CASES	134	2929		8	24	25	31	32	88	5	7				6	18	110	87	39	45
NUMBER OF RESPONDENTS	134	2949		8	24	25	31	32	88	5	7				6	18	110	87	39	45
	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

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



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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER									
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	ILND	NATV	OTHR	MUL-	HIS-	HIS-	NOT			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	#	##	##	TI	PAN-	PAN-	VERY			
									WHTE	AMER	IAN	#	##	##	IC	IC	GOOD			
																	FAIR			
																	&			
																	POOR			
																	MALE			
																	MALE			
Q18																				
NEVER	4	63		1		1	2		4						4	2	2	2	2	
	3%	2%		~ 4%		~ 3%	6%		5%						~ 4%	2%	5%	4%	2%	
SOMETIMES	9	222		3	2	2	2		7	1					1	8	4	4	2	7
	7%	8%		~ 13%	8%	6%	6%		8%	~ 14%					6%	7%	5%	10%	4%	8%
USUALLY	24	572	1	5	8	1	7		14	3	2				2	20	16	6	5	17
	18%	20%	13%	21%	32%	3%	22%		16%	60%	29%				~ 11%	18%	18%	15%	11%	20%
ALWAYS	97	2066	7	15	15	27	21	7	63	2	4			6	15	78	65	27	36	59
	72%	71%	88%	63%	60%	87%	66%	100%	72%	40%	57%			~ 100%	83%	71%	75%	69%	80%	69%
#ALWAYS + USUALLY (NET)	121	2638	8	20	23	28	28	7	77	5	6			6	17	98	81	33	41	76
	90%	90%	100%	83%	92%	90%	88%	100%	88%	100%	86%			~ 100%	94%	89%	93%	85%	91%	89%
TOP BOX SCORE	97	2066	7	15	15	27	21	7	63	2	4			6	15	78	65	27	36	59
	72%	71%	88%	63%	60%	87%	66%	100%	72%	40%	57%			~ 100%	83%	71%	75%	69%	80%	69%
NOT ANSWERED		26																		
VALID CASES	134	2923	8	24	25	31	32	7	88	5	7			6	18	110	87	39	45	85
NUMBER OF RESPONDENTS	134	2949	8	24	25	31	32	7	88	5	7			6	18	110	87	39	45	85
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

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

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	18	25	35	45	55	65	AND	BLCK	AS-	NATV	AMER	IND/	NOT	VERY	FE-				
	FMCA	OHP	TO	TO	TO	TO	TO	AND	AFR-	IAN	ILND	PAC	ALSK	OTH	MUL-	HIS-	HIS-	GOOD	FAIR	MALE	MALE
	TOT	TOT	24	34	44	54	64	OVER	WHTE	AMER	IAN	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
	ADLT	ADLT																			
Q19																					
NEVER	3	55		1		1	1		3							3	2	1	2	1	
	2%	2%	~	4%~	~	3%~	3%~	~	3%~	~	~	~	~	~	~	~	3%~	2%~	3%~	4%~	1%~
SOMETIMES	6	211		1	2	1	2		5							1	5	3	2	1	5
	4%	7%	~	4%~	8%~	3%~	6%~	~	6%~	~	~	~	~	~	~	6%~	5%~	3%~	5%~	2%~	6%~
USUALLY	19	437		6	6	2	4		10	3	3					2	16	12	6	3	15
	14%	15%	~	25%~	24%~	6%~	13%~	~	11%~	60%~	43%~	~	~	~	~	11%~	15%~	14%~	15%~	7%~	18%~
ALWAYS	106	2221	8	16	17	27	25	7	70	2	4				6	15	86	70	30	39	64
	79%	76%	100%~	67%~	68%~	87%~	78%~	100%~	80%~	40%~	57%~	~	~	~	100%~	83%~	78%~	80%~	77%~	87%~	75%~
#ALWAYS + USUALLY (NET)	125	2658	8	22	23	29	29	7	80	5	7				6	17	102	82	36	42	79
	93%	91%	100%~	92%~	92%~	94%~	91%~	100%~	91%~	100%~	100%~	~	~	~	100%~	94%~	93%~	94%~	92%~	93%~	93%~
TOP BOX SCORE	106	2221	8	16	17	27	25	7	70	2	4				6	15	86	70	30	39	64
	79%	76%	100%~	67%~	68%~	87%~	78%~	100%~	80%~	40%~	57%~	~	~	~	100%~	83%~	78%~	80%~	77%~	87%~	75%~
NOT ANSWERED		25																			
VALID CASES	134	2924	8	24	25	31	32	7	88	5	7				6	18	110	87	39	45	85
NUMBER OF RESPONDENTS	134	2949	8	24	25	31	32	7	88	5	7				6	18	110	87	39	45	85
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER				
	OT1	OT2												ITY	STATUS						
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER										
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD				
									WHTE	AMER	IAN	#	##	##	TI	IC	IC				
																	EX &				
																	GOOD				
																	FAIR				
																	&				
																	POOR				
																	MALE				
																	FE-				
																	MALE				
Q20																					
NEVER	3	87		1			2		3						3	2	1	1	2		
	2%	3%		~ 4%~			~ 6%~		3%~						~ 3%~	2%~	3%~	2%~	2%~		
SOMETIMES	9	259		3	3	2	1		5	1	1				2	7	3	5	3	6	
	7%	9%		~ 13%~	12%~	6%~	3%~		6%~	20%~	14%~				~ 11%~	6%~	3%~	13%~	7%~	7%~	
USUALLY	25	721		2	4	5	6	6	19	1	1				3	21	19	5	7	17	
	19%	25%		25%~	17%~	20%~	19%~	19%~	~ 22%~	20%~	14%~				~ 17%~	19%~	22%~	13%~	16%~	20%~	
ALWAYS	97	1860		6	16	17	23	23	7	61	3	5			6	13	79	63	28	34	60
	72%	64%*		75%~	67%~	68%~	74%~	72%~	~100%~	69%~	60%~	71%~			~100%~	72%~	72%~	72%~	72%~	76%~	71%~
#ALWAYS + USUALLY (NET)	122	2581		8	20	22	29	29	7	80	4	6			6	16	100	82	33	41	77
	91%	88%		100%~	83%~	88%~	94%~	91%~	~100%~	91%~	80%~	86%~			~100%~	89%~	91%~	94%~	85%~	91%~	91%~
TOP BOX SCORE	97	1860		6	16	17	23	23	7	61	3	5			6	13	79	63	28	34	60
	72%	64%*		75%~	67%~	68%~	74%~	72%~	~100%~	69%~	60%~	71%~			~100%~	72%~	72%~	72%~	72%~	76%~	71%~
NOT ANSWERED		22																			
VALID CASES	134	2927		8	24	25	31	32	7	88	5	7			6	18	110	87	39	45	85
NUMBER OF RESPONDENTS	134	2949		8	24	25	31	32	7	88	5	7			6	18	110	87	39	45	85
	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

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

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					
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									WHTE	AMER	IAN	#	##	##	IC	IC	&	&		
																GOOD	POOR	MALE	MALE	
Q21																				
YES	84	1800	4	18	19	14	21	3	56	2	3			4	11	68	47	31	28	53
	64%	62%	50%~	78%~	76%~	45%~	66%~	43%~	64%~	40%~	43%~	~	~	~ 67%~	69%~	62%~	55%~	79%~	65%~	62%~
NO	48	1107	4	5	6	17	11	4	32	3	4			2	5	42	39	8	15	32
	36%	38%	50%~	22%~	24%~	55%~	34%~	57%~	36%~	60%~	57%~	~	~	~ 33%~	31%~	38%~	45%~	21%~	35%~	38%~
NOT ANSWERED	2	42		1											2		1			2
VALID CASES	132	2907	8	23	25	31	32	7	88	5	7			6	16	110	86	39	43	85
NUMBER OF RESPONDENTS	134	2949	8	24	25	31	32	7	88	5	7			6	18	110	87	39	45	85
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE
Q22 NEVER	7 9%	108 6%	2 ~ 11%	3 ~ 16%	1 ~ 7%	1 ~ 5%		6 ~ 11%							7 ~ 11%	5 11%	2 6%	4 15%	3 6%	
SOMETIMES	14 17%	264 15%	1 25%	3 17%	1 5%	2 14%	6 32%	11 20%							2 20%	11 17%	3 7%	10 32%	3 11%	10 20%
USUALLY	19 23%	517 30%	5 ~ 28%	4 21%	3 21%	5 26%		16 30%	1 ~ 33%						1 10%	17 26%	12 27%	6 19%	5 19%	13 25%
ALWAYS	41 51%	861 49%	3 75%	8 44%	11 58%	8 57%	7 37%	2 100%	21 39%	2 100%	2 67%			4 ~ 100%	7 70%	31 47%	25 56%	13 42%	15 56%	25 49%
#ALWAYS + USUALLY (NET)	60 74%	1378 79%	3 75%	13 72%	15 79%	11 79%	12 63%	2 100%	37 69%	2 100%	3 100%			4 ~ 100%	8 80%	48 73%	37 82%	19 61%	20 74%	38 75%
TOP BOX SCORE	41 51%	861 49%	3 75%	8 44%	11 58%	8 57%	7 37%	2 100%	21 39%	2 100%	2 67%			4 ~ 100%	7 70%	31 47%	25 56%	13 42%	15 56%	25 49%
NOT ANSWERED	3	50				2	1	2						1	2	2		1	2	
VALID CASES	81	1750	4	18	19	14	19	2	54	2	3			4	10	66	45	31	27	51
NUMBER OF RESPONDENTS	84	1800	4	18	19	14	21	3	56	2	3			4	11	68	47	31	28	53
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE					RACE					ETHNICITY				HEALTH STATUS		GENDER		
	FMCA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q23 WORST PERSONAL DOCTOR POSSIBLE	2 1%	23 0.6%	1 9%~	~	~	~	1 3%~	~	~	~	~	~	~	~	1 5%~	1 0.7%~	~	1 0.9%~	2%~	1 2%	1 1%
01	1 0.6%	32 0.9%	~	~	~	~	1 3%~	~	~	~	~	~	~	~	1 0.7%~	~	~	1 2%~	~	1 1%	
02	3 2%	39 1%	~	2 7%~	~	~	1 3%~	~	~	~	~	~	~	~	3 2%~	2 2%	2 2%~	1 2%~	~	3 3%	
03	3 2%	60 2%	~	1 4%~	~	2 5%~	~	3 3%	~	~	~	~	~	~	3 2%~	3 3%	~	2 4%	1 1%		
04	4 2%	72 2%	~	1 4%~	3 9%~	~	~	3 3%	1 14%~	~	~	~	~	~	4 3%~	2 2%	2 5%~	2 5%~	~	4 4%*	
05	6 4%	188 5%	1 9%~	2 7%~	1 3%~	1 3%~	1 3%~	5 5%	~	1 11%~	~	~	~	~	6 4%~	4 4%	2 5%~	2 4%	2 4%	4 4%	
06	9 5%	158 4%	1 9%~	1 4%~	2 6%~	1 3%~	2 5%~	1 11%~	3 3%	2 29%~	~	~	~	~	2 10%~	6 4%~	4 4%	4 9%~	2 4%	6 6%	
07	17 10%	327 9%	1 9%~	1 4%~	5 15%~	4 11%~	6 16%~	~	12 11%	2 29%~	~	~	~	1 11%~	17 12%~	14 12%	3 7%~	8 15%	9 9%		
08	30 18%	632 17%	~	6 21%~	9 27%~	6 16%~	6 16%~	~	19 18%	1 14%~	3 33%~	~	~	~	2 22%~	2 10%~	26 19%~	23 20%	6 14%~	8 15%	20 19%
09	25 15%	691 19%	2 18%~	5 18%~	2 6%~	6 16%~	7 18%~	3 33%~	19 18%	1 14%~	1 11%~	~	~	~	2 10%~	23 17%~	20 18%	5 11%~	8 15%	17 16%	
BEST PERSONAL DOCTOR POSSIBLE	65 39%	1506 40%	5 45%~	9 32%~	11 33%~	17 46%~	13 34%~	5 56%~	37 35%	4 44%~	~	~	~	6 67%~	13 65%~	47 34%~	40 35%	19 43%~	24 44%	38 37%	
#8-10 (NET)	120 73%	2829 76%	7 64%~	20 71%~	22 67%~	29 78%~	26 68%~	8 89%~	75 71%	2 29%~	8 89%~	~	~	8 89%~	17 85%~	96 70%~	83 73%	30 68%~	40 73%	75 72%	

Continued

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER				
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE- MALE	
9-10 (NET)	90 55%	2197 59%	7 64%~	14 50%~	13 39%~	23 62%~	20 53%~	8 89%~	56 53%	1 14%~	5 56%~			6 67%~	15 75%~	70 51%~	60 53%	24 55%~			32 58%	55 53%	
NOT ANSWERED	11	265	2	1	2	1	4		6		1				3	7	7	1			5	5	
VALID CASES	165	3728	11	28	33	37	38	9	106	7	9			9	20	137	113	44			55	104	
NUMBER OF RESPONDENTS	176	3993	13	29	35	38	42	9	112	7	10			9	23	144	120	45			60	109	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%			100%	100%	
MEAN	8.18	8.34	7.82	7.75	8.00	8.57	7.97	9.22	8.00	6.71	8.67			9.22	8.80	8.04	8.20	7.93			8.36	8.06	
p stat_(*=Sig @ p<=.05)		.318	~	~	~	~	~	~	.160	~	~	~	~	~	~	~	~	~	~	~	.854	.459	.351

[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		
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV #	AMER IND/ PAC ALSK	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE
Q24 YES	87 39%	1933 40%	6 38%~	13 32%~	12 27%~	19 43%~	27 52%*	5 42%~	60 44%*	4 33%~	3 19%~			4 ~ 36%~	8 27%~	74 41%~	50 31%*	31 62%*	33 40%	51 39%
NO	137 61%	2928 60%	10 63%~	28 68%~	33 73%~	25 57%~	25 48%*	7 58%~	75 56%*	8 67%~	13 81%~			7 ~ 64%~	22 73%~	106 59%~	112 69%*	19 38%*	49 60%	80 61%
NOT ANSWERED	11	221	1				2		3							2	1	1	1	2
VALID CASES	224	4861	16	41	45	44	52	12	135	12	16			11	30	180	162	50	82	131
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
	100%	100%	100%	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					
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									WHTE	AMER	IAN	#	##	##	TI	IC	IC	&	&	
																	GOOD	POOR	MALE	MALE
Q25																				
NEVER	6	110		2	1	1	2		5					1		6	3	3	3	3
	7%	6%		~ 15%~	8%~	6%~	8%~		8%~	~	~	~	~	~ 25%~	~	8%~	6%~	10%~	9%~	6%~
SOMETIMES	15	323		2	3	3	5	1	9		2			1	1	13	6	8	1	13
	18%	17%		~ 15%~	25%~	17%~	19%~	20%~	15%~	~	67%~	~	~	~ 25%~	14%~	18%~	12%~	26%~	3%~	26%~
USUALLY	21	543		1	1	5	6	6	15		2				1	17	11	8	8	12
	25%	29%		17%~	8%~	42%~	33%~	23%~	~ 25%~	50%~	~	~	~	~	~ 14%~	23%~	22%~	26%~	25%~	24%~
ALWAYS	43	893		5	8	3	8	13	30		2	1		2	5	37	29	12	20	22
	51%	48%		83%~	62%~	25%~	44%~	50%~	51%~	50%~	33%~	~	~	~ 50%~	71%~	51%~	59%~	39%~	63%~	44%~
#ALWAYS + USUALLY (NET)	64	1436		6	9	8	14	19	45		4	1		2	6	54	40	20	28	34
	75%	77%		100%~	69%~	67%~	78%~	73%~	76%~	100%~	33%~	~	~	~ 50%~	86%~	74%~	82%~	65%~	88%~	68%~
TOP BOX SCORE	43	893		5	8	3	8	13	30		2	1		2	5	37	29	12	20	22
	51%	48%		83%~	62%~	25%~	44%~	50%~	51%~	50%~	33%~	~	~	~ 50%~	71%~	51%~	59%~	39%~	63%~	44%~
NOT ANSWERED	2	64				1	1		1						1	1	1		1	1
VALID CASES	85	1869		6	13	12	18	26	59		4	3		4	7	73	49	31	32	50
NUMBER OF RESPONDENTS	87	1933		6	13	12	19	27	60		4	3		4	8	74	50	31	33	51
	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER				
	OT1	OT2												ITY	STATUS						
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER										
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AFR-	AS-	ILND	NATV	OTHR	MUL-	HIS-	HIS-				
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	AMER	IAN	#	##	##	TI	IC	IC				
																NOT	VERY				
																GOOD	FAIR				
																&	&				
																GOOD	POOR				
																MALE	MALE				
Q26																					
NONE	4	77		1			3		3		1					4	3	1	1	3	
	5%	4%		~ 8%~			~ 12%~		5%~		~ 33%~					~ 6%~	6%~	3%~	3%~	6%~	
1 SPECIALIST	39	991	3	6	6	8	10	4	28	2	1				1	3	34	25	12	13	25
	46%	53%	50%~	46%~	50%~	47%~	38%~	80%~	48%~	50%~	33%~			~ 25%~	43%~	47%~	51%~	40%~	41%~	51%~	
2	29	498	2	6	6	6	6	1	21	1	1				2	2	26	18	9	14	14
	35%	27%	33%~	46%~	50%~	35%~	23%~	20%~	36%~	25%~	33%~			~ 50%~	29%~	36%~	37%~	30%~	44%~	29%~	
3	10	191	1			3	5		4	1					1	2	6	3	6	3	6
	12%	10%	17%~			~ 18%~	19%~		7%~	25%~				~ 25%~	29%~	8%~	6%~	20%~	9%~	12%~	
4	2	64					2		2							2		2	1	1	
	2%	3%					8%~		3%~							3%~		7%~	3%~	2%~	
5 OR MORE SPECIALISTS		45																			
		2%~																			
NOT ANSWERED	3	67				2	1		2							1	2	1	1	1	2
VALID CASES	84	1866	6	13	12	17	26	5	58	4	3				4	7	72	49	30	32	49
NUMBER OF RESPONDENTS	87	1933	6	13	12	19	27	5	60	4	3				4	8	74	50	31	33	51
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

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

	BANT OT1	BANT OT2	AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER				
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q27 WORST SPECIALIST POSSIBLE		13 0.7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
01	2 3%	14 0.8%	~	~	~	1 6%	1 4%	~	2 4%	~	~	~	~	~	2 3%	2 4%	~	1 3%	1 2%	
02		12 0.7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
03	2 3%	27 2%	~	~	~	1 6%	1 4%	~	2 4%	~	~	~	~	~	2 3%	2 7%	~	~	2 4%	
04		22 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
05	3 4%	83 5%	~	~	~	1 6%	2 9%	~	1 2%	1 50%	~	~	~	~	1 14%	2 3%	1 2%	2 7%	2 6%	1 2%
06	4 5%	68 4%	~	1 8%	~	~	1 4%	1 20%	2 4%	~	~	~	~	1 25%	3 4%	3 10%	~	2 6%	1 2%	
07	6 8%	157 9%	~	3 25%	~	1 6%	2 9%	~	6 11%	~	~	~	~	~	6 9%	4 9%	2 7%	1 3%	5 11%	
08	17 21%	318 18%	1 17%	3 25%	5 42%	3 18%	1 4%	2 40%	15 27%	~	~	~	~	~	16 24%	9 20%	7 24%	8 26%	8 17%	
09	13 16%	315 18%	2 33%	1 8%	1 8%	3 18%	6 26%	~	10 18%	~	~	~	~	2 50%	1 14%	12 18%	8 17%	4 14%	9 13%	
BEST SPECIALIST POSSIBLE	33 41%	742 42%	3 50%	4 33%	6 50%	7 41%	9 39%	2 40%	17 31%	4 100%	1 50%	~	~	1 25%	5 71%	25 37%	22 48%	9 31%	13 42%	19 41%
#8-10 (NET)	63 79%	1375 78%	6 100%	8 67%	12 100%	13 76%	16 70%	4 80%	42 76%	4 100%	1 50%	~	~	3 75%	6 86%	53 78%	39 85%	20 69%	25 81%	36 78%

Continued

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE
9-10 (NET)	46 58%	1057 60%	5 83%~	5 42%~	7 58%~	10 59%~	15 65%~	2 40%~	27 49%~	4 100%~	1 50%~			3 75%~	6 86%~	37 54%~	30 65%~	13 45%~	17 55%~	28 61%~
NOT ANSWERED		18																		
VALID CASES	80	1771	6	12	12	17	23	5	55	4	2			4	7	68	46	29	31	46
NUMBER OF RESPONDENTS	80	1789	6	12	12	17	23	5	55	4	2			4	7	68	46	29	31	46
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%
MEAN	8.40	8.43	9.33	8.33	9.08	8.06	8.09	8.40	8.13	10.0	7.50			8.50	9.14	8.29	8.67	7.93	8.39	8.43
p stat_(*=Sig @ p<=.05)		.896	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

[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							ETHNICITY				HEALTH STATUS		GENDER	
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE				
Q28 YES	56 25%	886 18%*	5 29%~	9 22%~	14 31%~	9 20%~	13 25%	1 8%~	37 27%	1 8%~	3 20%~			3 27%~	5 17%~	46 26%~	44 27%	7 14%*	21 25%	31 24%				
NO	169 75%	3943 82%*	12 71%~	32 78%~	31 69%~	35 80%~	39 75%	11 92%~	100 73%	11 92%~	12 80%~			8 73%~	25 83%~	134 74%~	118 73%	43 86%*	62 75%	100 76%				
NOT ANSWERED	10	253					2		1		1					2	1	1		2				
VALID CASES	225	4829	17	41	45	44	52	12	137	12	15			11	30	180	162	50	83	131				
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133				
	100%	100%	100%	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	
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	POOR	MALE
Q29 NEVER	7 13%	78 9%	1 ~ 11%	2 ~ 14%	1 ~ 11%		1 ~ 100%	3 8%	1 ~ 33%						5 ~ 11%	5 12%		3 15%	2 7%
SOMETIMES	20 37%	290 33%	2 50%	2 22%	6 43%	5 56%	3 25%	14 39%	1 100%	1 33%			2 67%	1 25%	18 40%	16 37%	4 57%	8 40%	11 37%
USUALLY	16 30%	294 34%	1 25%	3 33%	5 36%	2 22%	4 33%	11 31%						3 75%	11 24%	13 30%	1 14%	4 20%	11 37%
ALWAYS	11 20%	204 24%	1 25%	3 33%	1 7%	1 11%	5 42%	8 22%	1 33%				1 33%		11 24%	9 21%	2 29%	5 25%	6 20%
#ALWAYS + USUALLY (NET)	27 50%	498 58%	2 50%	6 67%	6 43%	3 33%	9 75%	19 53%	1 33%				1 33%	3 75%	22 49%	22 51%	3 43%	9 45%	17 57%
TOP BOX SCORE	11 20%	204 24%	1 25%	3 33%	1 7%	1 11%	5 42%	8 22%	1 33%				1 33%		11 24%	9 21%	2 29%	5 25%	6 20%
NOT ANSWERED	2	20	1				1	1						1	1	1		1	1
VALID CASES	54	866	4	9	14	9	12	1	36	1	3		3	4	45	43	7	20	30
NUMBER OF RESPONDENTS	56	886	5	9	14	9	13	1	37	1	3		3	5	46	44	7	21	31
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH	GENDER				
	OT1	OT2							AND	BLCK	AS-	NATV	AMER					NOT	EX &	VERY	FAIR		
	FMCA	OHP	18	25	35	45	55	65	OR	AFR-	ILND	NATV	ALSK	OTHR	MUL-	HIS-	HIS-	GOOD	GOOD	&	&	FE-	FE-
	TOT	TOT	TO	TO	TO	TO	TO	OVER	WHTE	AMER	IAN	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE	MALE	MALE
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	AMER	IAN	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE	MALE	MALE
Q30																							
YES	74	1269	5	12	18	11	19	4	40	5	3				7	9	59	52	17	25	45	30%	34%
	33%	26%*	29%~	29%~	40%~	25%~	36%	33%~	29%	42%~	19%~	~	~	~	64%~	31%~	33%~	32%	34%	30%	34%		
NO	151	3524	12	29	27	33	34	8	97	7	13				4	20	122	110	33	57	87	70%	66%
	67%	74%*	71%~	71%~	60%~	75%~	64%	67%~	71%	58%~	81%~	~	~	~	36%~	69%~	67%~	68%	66%	70%	66%		
NOT ANSWERED	10	289						1	1							1	1	1	1	1	1		
VALID CASES	225	4793	17	41	45	44	53	12	137	12	16				11	29	181	162	50	82	132		
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16				11	30	182	163	51	83	133		
	100%	100%	100%	100%	100%	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						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV ILND #	AMER PAC ALSK	AMER NATV OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	VERY GOOD & FAIR	EX & FAIR & POOR	FE- MALE	MALE	
Q31 NEVER	3 4%	39 3%	~	~	6%~	10%~	6%~	~	5%~	~	~	~	~	~	14%~	~	5%~	4%~	6%~	~	7%~
SOMETIMES	11 15%	212 17%	1 20%~	1 8%~	3 17%~	2 20%~	1 6%~	1 25%~	5 13%~	2 40%~	~	~	~	~	14%~	1 17%~	9 15%~	10 20%~	1 6%~	3 13%~	7 16%~
USUALLY	20 28%	361 29%	1 20%~	4 33%~	3 17%~	4 40%~	5 29%~	1 25%~	10 25%~	2 40%~	1 33%~	~	~	~	14%~	2 33%~	15 25%~	11 22%~	7 41%~	7 29%~	11 26%~
ALWAYS	37 52%	619 50%	3 60%~	7 58%~	11 61%~	3 30%~	10 59%~	2 50%~	23 58%~	1 20%~	2 67%~	~	~	~	57%~	3 50%~	32 54%~	27 54%~	8 47%~	14 58%~	22 51%~
#ALWAYS + USUALLY (NET)	57 80%	980 80%	4 80%~	11 92%~	14 78%~	7 70%~	15 88%~	3 75%~	33 83%~	3 60%~	3 100%~	~	~	~	71%~	5 83%~	47 80%~	38 76%~	15 88%~	21 88%~	33 77%~
TOP BOX SCORE	37 52%	619 50%	3 60%~	7 58%~	11 61%~	3 30%~	10 59%~	2 50%~	23 58%~	1 20%~	2 67%~	~	~	~	57%~	3 50%~	32 54%~	27 54%~	8 47%~	14 58%~	22 51%~
NOT ANSWERED	3	38				1	2									3		2		1	2
VALID CASES	71	1231	5	12	18	10	17	4	40	5	3			7	6	59	50	17	24	43	
NUMBER OF RESPONDENTS	74	1269	5	12	18	11	19	4	40	5	3			7	9	59	52	17	25	45	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]



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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER		
	OT1	OT2												ITY	STATUS				
	FMCA	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-	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD		
									WHTE	AMER	IAN	#	##	##	TI	IC	IC	&	
																		FAIR	
																		&	
																		POOR	
																		MALE	
																		MALE	
Q32																			
NEVER		16																	
		1%																	
SOMETIMES	4	61	1		1		1	1	3		1				4	4		1	3
	6%	5%	20%		6%		6%	25%	8%		33%				7%	8%		4%	7%
USUALLY	12	224	1	2	3		3		7	2					1	9	8	3	7
	17%	18%	20%	17%	17%		17%		18%	40%					14%	15%	16%	18%	12%
ALWAYS	56	929	3	10	14	10	14	3	30	3	2			7	6	46	38	14	21
	78%	76%	60%	83%	78%	100%	78%	75%	75%	60%	67%			~100%	86%	78%	76%	82%	84%
#ALWAYS + USUALLY (NET)	68	1153	4	12	17	10	17	3	37	5	2			7	7	55	46	17	24
	94%	94%	80%	100%	94%	100%	94%	75%	93%	100%	67%			~100%	100%	93%	92%	100%	96%
TOP BOX SCORE	56	929	3	10	14	10	14	3	30	3	2			7	6	46	38	14	21
	78%	76%	60%	83%	78%	100%	78%	75%	75%	60%	67%			~100%	86%	78%	76%	82%	84%
NOT ANSWERED	2	39				1	1								2		2		2
VALID CASES	72	1230	5	12	18	10	18	4	40	5	3			7	7	59	50	17	25
NUMBER OF RESPONDENTS	74	1269	5	12	18	11	19	4	40	5	3			7	9	59	52	17	25
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH	GENDER		
	OT1	OT2													ITY	STATUS					
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	PAN-	PAN-	&	&	FE-		
									WHTE	AMER	IAN	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q33																					
YES	65	1787	7	14	13	10	12	4	41	3	2			2	9	52	43	17	25	37	
	29%	37%	44%~	34%~	30%~	23%~	23%	33%~	30%	27%~	13%~	~	~	~ 18%~	30%~	29%~	27%	34%	31%	28%	
NO	157	2987	9	27	31	33	41	8	94	8	14			9	21	126	117	33	56	94	
	71%	63%	56%~	66%~	70%~	77%~	77%	67%~	70%	73%~	88%~	~	~	~ 82%~	70%~	71%~	73%	66%	69%	72%	
NOT ANSWERED	13	308	1		1	1	1		3	1					4	3	1		2	2	
VALID CASES	222	4774	16	41	44	43	53	12	135	11	16			11	30	178	160	50	81	131	
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133	
	100%	100%	100%	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						ETHNICITY		HEALTH STATUS		GENDER			
	OT1	OT2																				
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	ILND	PAC	ALSK			HIS-	HIS-	VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-					PAN-	PAN-	&	&				
									WHTE	AMER	IAN	#	##	##	TI	IC	IC	GOOD	POOR	MALE	FE-	
																					MALE	
PQ34																						
NEVER	3	91			1		1		1						1	1	1			1	1	
	1%	2%	~	~	2%~	~	2%	~	0.7%	~	~	~	~	~	4%~	0.6%~	0.6%	~	~	1%	0.8%	
SOMETIMES	10	301	2	1	2	3	1	1	7		1				1	9	7	3	4	6	6	
	5%	6%	13%~	3%~	5%~	7%~	2%	8%~	5%	~	6%~	~	~	~	9%~	4%~	5%~	4%	6%~	5%	5%	
USUALLY	25	677	2	8	6	3	3	1	17		2				3	20	15	9	10	14	14	
	11%	14%	13%~	20%~	14%~	7%~	6%	8%~	13%	18%~	~	~	~	~	11%~	11%~	10%	18%~	12%	11%	11%	
ALWAYS	180	3637	12	31	34	36	47	10	109	9	15				10	22	147	134	37	66	106	
	83%	77%*	75%~	78%~	79%~	86%~	90%*	83%~	81%	82%~	94%~	~	~	~	91%~	81%~	83%~	85%	76%~	81%	83%	
#ALWAYS + USUALLY (NET)	205	4314	14	39	40	39	50	11	126	11	15				10	25	167	149	46	76	120	
	94%	92%	88%~	98%~	93%~	93%~	96%	92%~	94%	100%~	94%~	~	~	~	91%~	93%~	94%~	95%	94%~	94%	94%	
TOP BOX SCORE	180	3637	12	31	34	36	47	10	109	9	15				10	22	147	134	37	66	106	
	83%	77%*	75%~	78%~	79%~	86%~	90%*	83%~	81%	82%~	94%~	~	~	~	91%~	81%~	83%~	85%	76%~	81%	83%	
NOT ANSWERED	4	68		1	1	1	1		1						3	1	3	1			4	
VALID CASES	218	4706	16	40	43	42	52	12	134	11	16				11	27	177	157	49	81	127	
NUMBER OF RESPONDENTS	222	4774	16	41	44	43	53	12	135	11	16				11	30	178	160	50	81	131	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER					
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE	
Q35 WORST HEALTH PLAN POSSIBLE	1 0.5%	33 0.7%	~	1 3%	~	~	~	~	0.8%	~	~	~	~	~	~	1 0.6%	1 0.7%	~	1 1%	~	
01		31 0.7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
02	1 0.5%	51 1%	~	~	~	~	1 8%	1 0.8%	~	~	~	~	~	~	~	1 0.6%	1 0.7%	~	~	1 0.8%	
03	5 2%	61 1%	~	1 3%	2 5%	1 2%	1 2%	~	4 3%	1 7%	~	~	~	~	~	5 3%	2 1%	3 6%	2 3%	3 2%	
04	3 1%	105 2%	~	~	~	~	3 7%	~	2 2%	~	~	~	~	1 10%	~	3 2%	~	3 6%	~	3 2%	
05	11 5%	381 8%	2 13%	3 8%	1 2%	3 7%	2 4%	~	6 5%	1 7%	~	~	~	~	3 11%	8 5%	8 5%	3 6%	6 8%	5 4%	
06	14 7%	291 6%	~	4 11%	3 7%	3 7%	2 4%	~	10 8%	1 7%	~	~	~	~	~	1 4%	12 7%	10 7%	4 8%	4 5%	9 7%
07	25 12%	602 13%	2 13%	4 11%	6 14%	5 12%	5 11%	1 8%	12 9%	3 27%	2 14%	~	~	~	~	6 22%	17 10%	17 11%	5 10%	12 16%	11 9%
08	48 23%	920 20%	2 13%	8 21%	16 37%	7 17%	11 24%	3 25%	31 24%	5 45%	3 21%	~	~	~	5 50%	1 4%	46 27%	35 23%	12 24%	14 18%	33 27%
09	34 16%	736 16%	3 19%	7 18%	5 12%	7 17%	9 20%	1 8%	25 19%	2 14%	~	~	~	1 10%	2 7%	28 16%	24 16%	8 16%	13 17%	19 16%	
BEST HEALTH PLAN POSSIBLE	67 32%	1385 30%	7 44%	10 26%	10 23%	15 37%	13 28%	6 50%	37 29%	3 27%	4 29%	~	~	~	3 30%	14 52%	49 29%	51 34%	12 24%	25 32%	38 31%
#8-10 (NET)	149 71%	3041 66%	12 75%	25 66%	31 72%	29 71%	33 72%	10 83%	93 72%	8 73%	9 64%	~	~	~	9 90%	17 63%	123 72%	110 74%	32 64%	52 68%	90 74%

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						ETHNICITY		HEALTH STATUS		GENDER			
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE- MALE
9-10 (NET)	101 48%	2121 46%	10 63%~	17 45%~	15 35%~	22 54%~	22 48%~	7 58%~	62 48%	3 27%~	6 43%~			4 40%~	16 59%~	77 45%~	75 50%	20 40%	38 49%	57 47%		
NOT ANSWERED	26	486	1	3	2	3	8		9	1	2			1	3	12	14	1	6	11		
VALID CASES	209	4596	16	38	43	41	46	12	129	11	14			10	27	170	149	50	77	122		
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%
MEAN	8.15	7.93	8.56	7.82	8.00	8.29	8.07	8.50	8.05	8.27	7.86			8.30	8.48	8.06	8.28	7.66	8.09	8.15		
p stat_(*=Sig @ p<=.05)		.118	~	~	~	~	~	~	.349	~	~	~	~	~	~	~	.129	.037*	.746	.994		

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		
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK AFR-	OR AMER	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	FE- MALE	MALE
Q35A YES	22 10%	599 12%	2 12%~	2 5%~	5 11%~	4 9%~	7 14%	2 17%~	16 12%	1 ~	7%~	~	~	~	1 9%~	20 ~	11%~	9 6%*	12 24%*	9 11%	13 10%
NO	201 90%	4210 88%	15 88%~	39 95%~	40 89%~	39 91%~	44 86%	10 83%~	121 88%	12 100%~	14 93%~	~	~	~	10 91%~	28 100%~	161 89%~	152 94%*	39 76%*	71 89%	119 90%
NOT ANSWERED	12	273				1	3		1		1					2	1	2		3	1
VALID CASES	223	4809	17	41	45	43	51	12	137	12	15			11	28	181	161	51	80	132	
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133	
	100%	100%	100%	100%	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												ITY	STATUS			
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &		
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	ILND	PAC	ALSK			HIS-	VERY		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	IAN	#	##	##	IC	GOOD	FAIR	
															GOOD	POOR	MALE	
																	MALE	
Q35B																		
NEVER	6	90		2	1	2	1		4		1			1	6	6	1	5
	29%	16%		~100%	20%	50%	17%		27%		~100%			~100%	~32%	~55%	11%	42%
SOMETIMES	3	83			1		2		2						2	1	1	2
	14%	15%		~	~20%		~33%		13%		~	~	~	~	~11%	11%	9%	11%
USUALLY	4	129			1	1	2		4						4	2	2	2
	19%	23%		~	~20%	25%	33%		27%		~	~	~	~	~21%	22%	18%	22%
ALWAYS	8	262		2		2	1	2	5						7	6	2	5
	38%	46%		~100%	~	40%	25%	17%	33%		~	~	~	~	~37%	67%	18%	56%
#ALWAYS + USUALLY (NET)	12	391		2		3	2	3	9						11	8	4	7
	57%	69%		~100%	~	60%	50%	50%	60%		~	~	~	~	~58%	89%	36%	78%
TOP BOX SCORE	8	262		2		2	1	2	5						7	6	2	5
	38%	46%		~100%	~	40%	25%	17%	33%		~	~	~	~	~37%	67%	18%	56%
NOT ANSWERED	1	35					1		1						1	1		1
VALID CASES	21	564		2	2	5	4	6	15		1			1	19	9	11	9
NUMBER OF RESPONDENTS	22	599		2	2	5	4	7	16		1			1	20	9	12	9
	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						ETHNICITY		HEALTH STATUS		GENDER		
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE	
Q35C YES	36 16%	759 16%	4 24%~	4 10%~	6 13%~	9 21%~	9 17%	3 25%~	20 15%	1 8%~	3 19%~	~	~	~	4 36%~	2 7%~	31 17%~	17 10%*	16 32%*	15 18%	20 15%
NO	188 84%	3989 84%	13 76%~	36 90%~	39 87%~	34 79%~	44 83%	9 75%~	115 85%	11 92%~	13 81%~	~	~	~	7 64%~	28 93%~	149 83%~	145 90%*	34 68%*	67 82%	111 85%
NOT ANSWERED	11	334	1			1	1		3							2	1	1	1	2	
VALID CASES	224	4748	17	40	45	43	53	12	135	12	16			11	30	180	162	50	82	131	
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%



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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV ILND #	AMER PAC ALSK ##	OTHER ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q35D NEVER	4 11%	121 17%	1 ~ 25%	2 ~ 22%	1 13%	2 10%	1 ~ 33%	2 10%	1 ~ 33%	~	~	~	1 ~ 25%	4 ~ 13%	4 ~ 13%	4 ~ 25%	4 ~ 25%	1 7%	3 15%	
SOMETIMES	5 14%	129 18%	~	2 33%	2 22%	~	3 15%	~	~	~	~	~	1 ~ 25%	4 ~ 13%	3 18%	1 6%	1 6%	1 7%	3 15%	
USUALLY	8 23%	170 23%	1 25%	1 25%	1 17%	1 11%	4 50%	6 30%	~	~	~	~	1 ~ 25%	8 ~ 26%	6 35%	2 13%	4 29%	4 20%		
ALWAYS	18 51%	308 42%	3 75%	2 50%	3 50%	4 44%	3 38%	3 100%	9 45%	1 100%	2 67%	~	~	1 ~ 25%	15 100%	8 48%	9 47%	8 56%	10 57%	
#ALWAYS + USUALLY (NET)	26 74%	478 66%	4 100%	3 75%	4 67%	5 56%	7 88%	3 100%	15 75%	1 100%	2 67%	~	~	2 50%	1 100%	23 74%	14 82%	11 69%	12 86%	14 70%
TOP BOX SCORE	18 51%	308 42%	3 75%	2 50%	3 50%	4 44%	3 38%	3 100%	9 45%	1 100%	2 67%	~	~	1 ~ 25%	15 100%	8 48%	9 47%	8 56%	10 57%	
NOT ANSWERED	1	31				1								1					1	
VALID CASES	35	728	4	4	6	9	8	3	20	1	3		4	1	31	17	16	14	20	
NUMBER OF RESPONDENTS	36	759	4	4	6	9	9	3	20	1	3		4	2	31	17	16	15	20	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q35C = YES]

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER				
	OT1	OT2																					
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER												
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AFR-	AS-	ILND	NATV	OTHR	MUL-	HIS-	HIS-	NOT	VERY	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	AMER	IAN	#	##	##	TI	IC	IC	GOOD	GOOD	POOR	POOR	MALE	MALE
Q35E																							
ALWAYS	7	178	1		1	3	1		3		1					3	4		EX &	4	3	2	5
	3%	4%	6%~	~	2%~	7%~	2%	~	2%	~	6%~	~	~	~	~	11%~	2%~	~	VERY	3%	6%	3%	4%
USUALLY	7	193	1		3	2	1		4	1						1	6		EX &	5	2	3	4
	3%	4%	6%~	~	7%~	5%~	2%	~	3%	8%~	~	~	~	~	~	4%~	3%~	~	VERY	3%	4%	4%	3%
SOMETIMES	31	804	3	8	6	2	7	2	18	2	2				2	2	26		EX &	22	7	11	17
	14%	17%	19%~	21%~	13%~	5%~	13%	18%~	14%	17%~	13%~	~	~	~	18%~	7%~	15%~	~	VERY	14%	14%	14%	13%
NEVER	171	3575	11	30	35	35	43	9	106	9	13				9	22	140		EX &	125	38	61	104
	79%	75%	69%~	79%~	78%~	83%~	83%	82%~	81%	75%~	81%~	~	~	~	82%~	79%~	80%~	~	VERY	80%	76%	79%	80%
#NEVER + SOMETIMES (NET)	202	4379	14	38	41	37	50	11	124	11	15				11	24	166		EX &	147	45	72	121
	94%	92%	88%~	100%~	91%~	88%~	96%	100%~	95%	92%~	94%~	~	~	~	100%~	86%~	94%~	~	VERY	94%	90%	94%	93%
TOP BOX SCORE	171	3575	11	30	35	35	43	9	106	9	13				9	22	140		EX &	125	38	61	104
	79%	75%	69%~	79%~	78%~	83%~	83%	82%~	81%	75%~	81%~	~	~	~	82%~	79%~	80%~	~	VERY	80%	76%	79%	80%
NOT ANSWERED	19	332	1	3		2	2	1	7							2	6		EX &	7	1	6	3
VALID CASES	216	4750	16	38	45	42	52	11	131	12	16				11	28	176		EX &	156	50	77	130
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16				11	30	182		EX &	163	51	83	133
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%		EX &	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					
	FMCA	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-	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									WHTE	AMER	IAN	#	##	##	TI	IC	IC	&		
																		FAIR		
																		&		
																		POOR		
																		MALE		
																		MALE		
Q35F																				
ALWAYS		66																		
		1%																		
USUALLY	4	106			1		2		3						3	2	1		3	
	2%	2%			2%		4%		2%						2%	1%	2%		2%	
SOMETIMES	22	672	1	5	3	6	4		14	1	1			1	2	17	15	5	7	12
	10%	14%*	6%	13%	7%	14%	8%		11%	8%	6%			9%	7%	10%	9%	10%	9%	9%
NEVER	191	3911	15	33	41	37	45	11	114	11	15			10	26	156	141	43	69	116
	88%	82%*	94%	87%	91%	86%	88%	100%	87%	92%	94%			91%	93%	89%	89%	88%	91%	89%
#NEVER + SOMETIMES (NET)	213	4583	16	38	44	43	49	11	128	12	16			11	28	173	156	48	76	128
	98%	96%	100%	100%	98%	100%	96%	100%	98%	100%	100%			100%	100%	98%	99%	98%	100%	98%
TOP BOX SCORE	191	3911	15	33	41	37	45	11	114	11	15			10	26	156	141	43	69	116
	88%	82%*	94%	87%	91%	86%	88%	100%	87%	92%	94%			91%	93%	89%	89%	88%	91%	89%
NOT ANSWERED	18	327	1	3		1	3	1	7						2	6	5	2	7	2
VALID CASES	217	4755	16	38	45	43	51	11	131	12	16			11	28	176	158	49	76	131
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
	100%	100%	100%	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				
	FMCA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE
Q35G ALWAYS	3 1%	55 1%	~	~	~	2%	4%	~	2%	~	~	~	~	~	1 3%	2 1%	1 0.6%	~	2 3%	1 0.8%
USUALLY	1 0.5%	67 1%*	~	~	~	~	2%	~	0.8%	~	~	~	~	~	1 ~0.6%	1 0.6%	~	~	1 ~0.8%	
SOMETIMES	24 11%	487 10%	2 13%	4 10%	5 11%	5 12%	6 12%	~	19 14%*	~	~	~	~	1 9%	1 3%	21 12%	15 9%	8 16%	6 8%	16 12%
NEVER	191 87%	4149 87%	14 88%	35 90%	40 89%	37 86%	43 83%	11 100%	110 83%*	12 100%	16 ~	~	~	10 91%	27 93%	153 86%	141 89%	42 84%	69 90%	114 86%
#NEVER + SOMETIMES (NET)	215 98%	4636 97%	16 100%	39 100%	45 100%	42 98%	49 94%	11 100%	129 98%	12 100%	16 100%	~	~	11 100%	28 97%	174 98%	156 99%	50 100%	75 97%	130 98%
TOP BOX SCORE	191 87%	4149 87%	14 88%	35 90%	40 89%	37 86%	43 83%	11 100%	110 83%*	12 100%	16 ~	~	~	10 91%	27 93%	153 86%	141 89%	42 84%	69 90%	114 86%
NOT ANSWERED	16	324	1	2		1	2	1	6						1	5	5	1	6	1
VALID CASES	219	4758	16	39	45	43	52	11	132	12	16			11	29	177	158	50	77	132
NUMBER OF RESPONDENTS	235 100%	5082 100%	17 100%	41 100%	45 100%	44 100%	54 100%	12 100%	138 100%	12 100%	16 100%			11 100%	30 100%	182 100%	163 100%	51 100%	83 100%	133 100%

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							AND	BLCK	AS-	NATV	AMER					NOT	VERY	FAIR			
	FMCA	OHP	18	25	35	45	55	65	OR	AFR-	ILND	PAC	ALSK	OTHR	MUL-	HIS-	HIS-	GOOD	GOOD	&	&	FE-	
	TOT	TOT	TO	TO	TO	TO	TO	AND	WHTE	AMER	IAN	#	##	##	TI	IC	IC	GOOD	POOR			MALE	MALE
	ADLT	ADLT	24	34	44	54	64	OVER															
Q35H																							
#YES DEFINITELY	167	3305	14	31	25	38	44	9	104	7	12				9	24	137	121	39	65	98		
	78%	70%*	93%~	79%~	57%~	88%~	86%	82%~	79%	58%~	75%~	~	~	~	82%~	92%~	77%~	78%	78%	87%*	75%		
YES SOMEWHAT	37	1110		7	17	4	4	1	22	4	3				2	1	32	27	9	9	25		
	17%	24%*	~	18%~	39%~	9%~	8%*	9%~	17%	33%~	19%~	~	~	~	18%~	4%~	18%~	17%	18%	12%	19%		
NO	11	300	1	1	2	1	3	1	6	1	1				~	1	8	8	2	1	8		
	5%	6%	7%~	3%~	5%~	2%~	6%	9%~	5%	8%~	6%~	~	~	~	~	4%~	5%~	5%	4%	1%*	6%		
NOT ANSWERED	20	367	2	2	1	1	3	1	6							4	5	7	1	8	2		
VALID CASES	215	4715	15	39	44	43	51	11	132	12	16				11	26	177	156	50	75	131		
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16				11	30	182	163	51	83	133		
	100%	100%	100%	100%	100%	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						ETHNICITY	HEALTH STATUS		GENDER			
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	POOR	MALE	FE- MALE	
Q35I YES	119 54%	2797 58%	7 41%~	19 46%~	30 67%~	22 51%~	33 62%	4 33%~	72 53%	7 58%~	8 50%~	~	~	~	8 73%~	14 47%~	100 55%~	85 52%	27 53%	40 49%	76 58%
NO	103 46%	1986 42%	10 59%~	22 54%~	15 33%~	21 49%~	20 38%	8 67%~	64 47%	5 42%~	8 50%~	~	~	~	3 27%~	16 53%~	81 45%~	77 48%	24 47%	42 51%	56 42%
NOT ANSWERED	13	299				1	1		2							1	1			1	1
VALID CASES	222	4783	17	41	45	43	53	12	136	12	16			11	30	181	162	51	82	132	
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133	
	100%	100%	100%	100%	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						
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY						
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	NOT	GOOD	FAIR				
									WHTE	AMER	IAN	#	##	##	TI	IC	IC	&	&	FE-	
																GOOD	POOR	MALE	MALE		
Q35J																					
YES	94	1919	5	14	22	18	29	2	58	6	9			6	9	79	68	20	35	56	
	43%	40%	29%~	35%~	49%~	41%~	55%*	18%~	42%	50%~	56%~	~	~	~	55%~	32%~	44%~	42%	39%	43%	43%
NO	127	2885	12	26	23	26	24	9	79	6	7			5	19	101	93	31	46	75	
	57%	60%	71%~	65%~	51%~	59%~	45%*	82%~	58%	50%~	44%~	~	~	~	45%~	68%~	56%~	58%	61%	57%	57%
NOT ANSWERED	14	278		1			1	1	1						2	2	2		2	2	
VALID CASES	221	4804	17	40	45	44	53	11	137	12	16			11	28	180	161	51	81	131	
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133	
	100%	100%	100%	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 OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	FMCA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER PAC ALSK ##	OTHER ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q35K NEVER	1 1%	40 2%	~	7%~	~	~	~	2%~	~	~	~	~	~	~	1%~	1 2%~	~	2%~	~	2%~	
SOMETIMES	8 9%	150 8%	~	7%~	~	22%~	7%~	9%~	~	11%~	~	~	~	17%~	~	7 9%~	6 9%~	2 10%~	1 3%~	6 11%~	
USUALLY	17 19%	356 19%	~	7%~	41%~	11%~	15%~	10 18%~	1 17%~	3 33%~	~	~	~	17%~	~	15 19%~	13 20%~	2 10%~	5 15%~	11 20%~	
ALWAYS	65 71%	1310 71%	100%~	79%~	59%~	67%~	78%~100%~	41 72%~	5 83%~	5 56%~	~	~	~	67%~100%~	4 71%~	7 70%~	55 80%~	46 82%~	16 86%~	28 82%~	36 67%~
#ALWAYS + USUALLY (NET)	82 90%	1666 90%	100%~	86%~	100%~	78%~	93%~100%~	51 89%~	6 100%~	8 89%~	~	~	~	83%~100%~	5 90%~	7 89%~	70 90%~	59 89%~	18 90%~	33 97%~	47 87%~
TOP BOX SCORE	65 71%	1310 71%	100%~	79%~	59%~	67%~	78%~100%~	41 72%~	5 83%~	5 56%~	~	~	~	67%~100%~	4 71%~	7 70%~	55 80%~	46 82%~	16 86%~	28 82%~	36 67%~
NOT ANSWERED	3	63				2		1							2	1	2			1	2
VALID CASES	91	1856	5	14	22	18	27	2	57	6	9			6	7	78	66	20	34	54	
NUMBER OF RESPONDENTS	94	1919	5	14	22	18	29	2	58	6	9			6	9	79	68	20	35	56	
	100%	100%	100%	100%	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	
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	MALE	FE- MALE
Q35L ALWAYS	20 27%	423 22%	1 14%	4 44%	8 42%	2 14%	4 22%	9 23%	3 43%	2 22%				2 67%	2 20%	17 28%	15 32%	4 17%	6 23%	13 28%
USUALLY	16 21%	375 20%	2 29%	2 22%	3 16%	5 36%	3 17%	10 26%	2 29%	1 11%					1 10%	14 23%	10 21%	5 21%	6 23%	9 20%
SOMETIMES	18 24%	377 20%	2 29%	2 22%	3 16%	3 21%	6 33%	7 18%	1 14%	3 33%					6 60%	12 20%	13 28%	5 21%	7 27%	11 24%
NEVER	21 28%	744 39%	2 29%	1 11%	5 26%	4 29%	5 28%	13 33%	1 14%	3 33%				1 33%	1 10%	18 30%	9 19%	10 42%	7 27%	13 28%
#NEVER + SOMETIMES (NET)	39 52%	1121 58%	4 57%	3 33%	8 42%	7 50%	11 61%	20 51%	2 29%	6 67%				1 33%	7 70%	30 49%	22 47%	15 63%	14 54%	24 52%
TOP BOX SCORE	21 28%	744 39%	2 29%	1 11%	5 26%	4 29%	5 28%	13 33%	1 14%	3 33%				1 33%	1 10%	18 30%	9 19%	10 42%	7 27%	13 28%
5	140	2747	10	29	26	29	33	6	94	5	7			8	16	115	111	25	51	83
NOT ANSWERED	20	416		3		1	3	1	5						4	6	5	2	6	4
VALID CASES	75	1919	7	9	19	14	18	5	39	7	9			3	10	61	47	24	26	46
NUMBER OF RESPONDENTS	235 100%	5082 100%	17 100%	41 100%	45 100%	44 100%	54 100%	12 100%	138 100%	12 100%	16 100%			11 100%	30 100%	182 100%	163 100%	51 100%	83 100%	133 100%

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						ETHNICITY		HEALTH STATUS		GENDER		
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q35M NEVER	27 32%	695 36%	2 33%~	4 36%~	6 27%~	5 31%~	6 29%~	3 50%~	15 31%~	3 50%~	5 71%~	~	~	~	~	3 27%~	23 32%~	14 27%~	12 39%~	11 42%~	16 28%~
SOMETIMES	15 18%	351 18%	2 33%~	~	3 14%~	3 19%~	5 24%~	1 17%~	7 14%~	1 17%~	~	~	~	~	2 29%~	3 27%~	11 15%~	10 19%~	4 13%~	3 12%~	11 19%~
USUALLY	19 22%	351 18%	1 17%~	3 27%~	4 18%~	5 31%~	5 24%~	1 17%~	14 29%~	~	~	~	~	~	2 29%~	3 27%~	16 22%~	11 21%~	8 26%~	4 15%~	15 26%~
ALWAYS	24 28%	514 27%	1 17%~	4 36%~	9 41%~	3 19%~	5 24%~	1 17%~	13 27%~	2 33%~	2 29%~	~	~	~	3 43%~	2 18%~	22 31%~	17 33%~	7 23%~	8 31%~	16 28%~
#ALWAYS + USUALLY (NET)	43 51%	865 45%	2 33%~	7 64%~	13 59%~	8 50%~	10 48%~	2 33%~	27 55%~	2 33%~	2 29%~	~	~	~	5 71%~	5 45%~	38 53%~	28 54%~	15 48%~	12 46%~	31 53%~
TOP BOX SCORE	24 28%	514 27%	1 17%~	4 36%~	9 41%~	3 19%~	5 24%~	1 17%~	13 27%~	2 33%~	2 29%~	~	~	~	3 43%~	2 18%~	22 31%~	17 33%~	7 23%~	8 31%~	16 28%~
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	127	2765	11	28	23	27	29	5	85	6	8			4	16	104	107	18	52	71	
NOT ANSWERED	23	406		2		1	4	1	4		1				3	6	4	2	5	4	
VALID CASES	85	1911	6	11	22	16	21	6	49	6	7			7	11	72	52	31	26	58	
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	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					ETHNICITY		HEALTH STATUS		GENDER				
	FMCA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q35N EXTREMELY DIFFICULT	9 4%	281 6%	1 7%	4 11%	2 5%	1 3%	1 2%	6 5%	~	~	~	~	~	~	2 9%	6 4%	4 3%	4 9%	2 3%	7 6%	
01	6 3%	112 3%	~	2 5%	3 7%	1 3%	~	4 3%	~	2 14%	~	~	~	~	~	6 4%	5 3%	1 2%	1 1%	5 4%	
02	5 2%	129 3%	~	1 3%	2 5%	1 3%	1 2%	3 2%	1 8%	~	~	~	~	~	1 5%	4 2%	4 3%	1 2%	2 3%	3 3%	
03	12 6%	164 4%	~	3 8%	4 9%	1 3%	1 14%	9 7%	1 8%	1 7%	~	~	~	~	1 5%	11 7%	10 7%	2 4%	3 4%	9 8%	
04	8 4%	138 3%	~	4 11%	~	3 8%	1 2%	8 6%*	~	~	~	~	~	~	~	8 5%	6 4%	2 4%	3 4%	5 4%	
05	26 13%	547 12%	2 13%	5 13%	5 11%	5 14%	7 15%	1 14%	18 15%	2 17%	~	~	~	2 22%	3 14%	22 13%	18 13%	7 15%	9 13%	16 13%	
06	11 5%	230 5%	3 20%	3 8%	2 5%	1 3%	1 2%	5 4%	~	1 7%	~	~	~	1 11%	1 5%	8 5%	10 7%*	1 2%	3 4%	7 6%	
07	18 9%	375 8%	2 13%	2 5%	4 9%	4 11%	6 13%	10 8%	1 8%	2 14%	~	~	~	1 11%	4 18%	14 9%	13 9%	5 11%	7 10%	11 9%	
09	55 27%	1161 26%	4 27%	3 8%	9 20%	10 27%	11 23%	3 43%	27 22%	1 8%	4 29%	~	~	~	2 22%	3 14%	37 23%	29 20%*	11 24%	24 23%	24 20%*
EXTREMELY EASY	57 28%	1320 30%	3 20%	11 29%	13 30%	10 27%	17 35%	2 29%	34 27%	6 50%	4 29%	~	~	~	3 33%	7 32%	47 29%	44 31%	12 26%	23 33%	33 28%
#8-10 (NET)	112 54%	2481 56%	7 47%	14 37%	22 50%	20 54%	28 58%	5 71%	61 49%	7 58%	8 57%	~	~	~	5 56%	10 45%	84 52%	73 51%	23 50%	39 57%	57 48%*
9-10 (NET)	112 54%	2481 56%	7 47%	14 37%	22 50%	20 54%	28 58%	5 71%	61 49%	7 58%	8 57%	~	~	~	5 56%	10 45%	84 52%	73 51%	23 50%	39 57%	57 48%*

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						ETHNICITY		HEALTH STATUS		GENDER			
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
88		6																				
NOT ANSWERED	28	619	2	3	1	7	6	5	14			2				2	8	19	20	5	14	13
VALID CASES	207	4457	15	38	44	37	48	7	124	12	14			9	22	163	143	46	69	120		
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%		
MEAN	7.11	7.14	7.20	5.87	6.70	7.22	7.65	7.86	6.79	7.58	7.21			7.89	6.86	6.98	7.06	6.78	7.42	6.69		
p stat_(*=Sig @ p<=.05)		.891	~	~	~	~	~	~	.067	~	~	~	~	~	~	~	~.722	~	~.293	.020*		

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

	BANT	BANT	AGE							RACE							ETHNICITY			HEALTH STATUS		GENDER	
	OT1	OT2	18	25	35	45	55	65	AND	BLCK	AS-	NATV	AMER	IND/	MUL-	HIS-	NOT	VERY	FAIR	FE-			
	FMCA	OHP	TO	TO	TO	TO	TO	AND	OR	AFR-	ILND	PAC	ALSK	OTHR	PAN-	PAN-	GOOD	&	MALE				
	TOT	TOT	24	34	44	54	64	OVER	WHTE	AMER	IAN	#	##	##	TI	IC	IC	GOOD	POOR	MALE			
	ADLT	ADLT																					
Q36																							
EXCELLENT	34 16%	447 9%	6 35%	10 25%	5 11%	5 11%	5 10%	1 8%	18 13%	2 17%	5 31%	~	~	~	6 22%	27 15%	34 21%	~	17 22%	16 12%			
VERY GOOD	61 29%	1140 24%	5 29%	10 25%	14 32%	14 32%	14 27%	2 17%	43 32%	3 25%	4 25%	~	~	3 27%	6 22%	54 30%	61 37%	~	22 28%	38 29%			
GOOD	68 32%	1676 35%	5 29%	9 23%	18 41%	14 32%	15 29%	5 42%	40 29%	5 42%	3 19%	~	~	5 45%	10 37%	54 30%	68 42%	~	24 31%	42 32%			
FAIR	36 17%	1110 23%	1 6%	10 25%	4 9%	7 16%	12 24%	2 17%	24 18%	2 17%	3 19%	~	~	1 9%	5 19%	31 17%	~	36 71%	13 17%	23 17%			
POOR	15 7%	395 8%	~	3 3%	4 7%	5 9%	2 10%	2 17%	11 8%	~	1 6%	~	~	2 18%	15 8%	~	15 29%	~	2 3%	13 10%			
#EXCELLENT + VERY GOOD + GOOD (NET)	163 76%	3263 68%	16 94%	29 73%	37 84%	33 75%	34 67%	8 67%	101 74%	10 83%	12 75%	~	~	8 73%	22 81%	135 75%	163 100%	~	63 81%	96 73%			
NOT ANSWERED	21	314	1	1			3		2						3	1			5	1			
VALID CASES	214	4768	17	40	44	44	51	12	136	12	16			11	27	181	163	51	78	132			
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133			
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%			

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
	OT1	OT2	18	25	35	45	55	65	BLCK	AS-	NATV	AMER	IND/	MUL-	HIS-	NOT	EX &	VERY	FE-			
	FMCA	OHP	TO	TO	TO	TO	TO	AND	OR	AFR-	IAN	HAW/	PAC	ALSK	OTH	IC	PAN-	PAN-	GOOD	FAIR	MALE	MALE
	TOT	TOT	24	34	44	54	64	OVER	WHTE	AMER	IAN	#	##	##	TI	IC	IC	&	&	MALE	MALE	
	ADLT	ADLT																				
Q37																						
EXCELLENT	50	870	5	9	7	9	15	3	31	2	4				3	8	41	48	2	19	30	
	23%	18%	29%~	23%~	16%~	20%~	29%	25%~	23%	17%~	25%~	~	~	~	27%~	30%~	23%~	30%*	4%*	25%	23%	
VERY GOOD	44	1189	4	6	12	12	6	3	28	3	4					6	37	41	3	14	29	
	21%	25%	24%~	15%~	28%~	27%~	12%*	25%~	21%	25%~	25%~	~	~	~	~	22%~	21%~	25%*	6%*	18%	22%	
GOOD	64	1480	6	11	11	13	17	3	36	3	6				5	9	51	54	10	25	37	
	30%	31%	35%~	28%~	26%~	30%~	33%	25%~	27%	25%~	38%~	~	~	~	45%~	33%~	28%~	33%*	20%*	32%	28%	
FAIR	45	937	1	11	11	8	12	2	32	3	2				3	4	41	14	31	16	29	
	21%	20%	6%~	28%~	26%~	18%~	24%	17%~	24%	25%~	13%~	~	~	~	27%~	15%~	23%~	9%*	61%*	21%	22%	
POOR	10	296	1	3	2	2	1	1	8	1							10	5	5	3	7	
	5%	6%	6%~	8%~	5%~	5%~	2%	8%~	6%	8%~	~	~	~	~	~	~	6%~	3%	10%	4%	5%	
#EXCELLENT + VERY GOOD + GOOD (NET)	158	3539	15	26	30	34	38	9	95	8	14				8	23	129	143	15	58	96	
	74%	74%	88%~	65%~	70%~	77%~	75%	75%~	70%	67%~	88%~	~	~	~	73%~	85%~	72%~	88%*	29%*	75%	73%	
NOT ANSWERED	22	310		1	2		3		3							3	2	1		6	1	
VALID CASES	213	4772	17	40	43	44	51	12	135	12	16				11	27	180	162	51	77	132	
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16				11	30	182	163	51	83	133	
	100%	100%	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					
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	PAN-	HIS-	GOOD	FAIR		
									WHTE	AMER	IAN	#	##	##	IC	IC	GOOD	POOR	MALE	MALE
Q38																				
#YES	86	1705	5	12	13	24	27	3	58	2	6			6	12	72	56	29	33	52
	40%	36%	29%~	30%~	29%~	55%~	51%	33%~	42%	17%~	38%~	~	~	~ 55%~	46%~	40%~	35%*	59%~	41%	40%
NO	128	2994	12	28	32	20	26	6	79	10	10			5	14	108	105	20	47	78
	60%	64%	71%~	70%~	71%~	45%~	49%	67%~	58%	83%~	63%~	~	~	~ 45%~	54%~	60%~	65%*	41%~	59%	60%
DON'T KNOW	5	99						1	1						2	2	2	2	1	3
NOT ANSWERED	16	284		1											2					2
VALID CASES	214	4699	17	40	45	44	53	9	137	12	16			11	26	180	161	49	80	130
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	FMCA	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-	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									WHTE	AMER	IAN	#	##	##	IC	IC	&	&		
																GOOD	POOR	MALE	MALE	
Q39																				
EVERY DAY	38	949	1	7	8	11	7	3	30	2	1			2	2	35	24	14	16	21
	18%	20%	6%~	18%~	18%~	25%~	13%	25%~	22%*	17%~	6%~	~	~	~ 18%~	7%~	19%~	15%	28%	20%	16%
SOME DAYS	22	436	1	2	6	5	5	2	15	2					1	20	13	9	7	14
	10%	9%	6%~	5%~	14%~	11%~	9%	17%~	11%	17%~	~	~	~	~	4%~	11%~	8%	18%	9%	11%
NOT AT ALL	157	3380	15	31	30	28	41	7	91	8	15			9	25	125	125	27	57	97
	72%	71%	88%~	78%~	68%~	64%~	77%	58%~	67%*	67%~	94%~	~	~	~ 82%~	89%~	69%~	77%*	54%*	71%	73%
DON'T KNOW	2	34			1		1		2							2	1	1	1	1
NOT ANSWERED	16	283		1											2					2
VALID CASES	217	4765	17	40	44	44	53	12	136	12	16			11	28	180	162	50	80	132
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%



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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE
Q40 NEVER	15 26%	367 27%	1 50%	3 33%	3 21%	5 33%	3 27%	9 21%	2 50%	1 100%					3 100%	12 23%	11 31%	4 18%	8 38%	7 20%
SOMETIMES	15 26%	331 24%		1 11%	5 36%	4 27%	3 27%	2 40%	12 28%	1 25%				1 50%	15 28%	8 22%	7 32%	5 24%	10 29%	
USUALLY	7 12%	212 16%	1 50%	1 11%	3 21%	2 13%		5 12%							7 13%	4 11%	3 14%	2 10%	5 14%	
ALWAYS	21 36%	455 33%		4 44%	3 21%	4 27%	5 45%	3 60%	17 40%	1 25%				1 50%	19 36%	13 36%	8 36%	6 29%	13 37%	
#ALWAYS + USUALLY (NET)	28 48%	667 49%	1 50%	5 56%	6 43%	6 40%	5 45%	3 60%	22 51%	1 25%				1 50%	26 49%	17 47%	11 50%	8 38%	18 51%	
TOP BOX SCORE	21 36%	455 33%		4 44%	3 21%	4 27%	5 45%	3 60%	17 40%	1 25%				1 50%	19 36%	13 36%	8 36%	6 29%	13 37%	
NOT ANSWERED		2				1	1		2						2	1	1		2	
VALID CASES	58	1365	2	9	14	15	11	5	43	4	1			2	3	53	36	22	21	35
NUMBER OF RESPONDENTS	60	1385	2	9	14	16	12	5	45	4	1			2	3	55	37	23	23	35
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2	18	25	35	45	55	65	BLCK	NATV	AMER	HAW/	IND/	OTH	MUL-	HIS-	HIS-	EX &	FAIR	FE-
	FMCA	OHP	TO	TO	TO	TO	AND	OR	AFR-	AS-	ILND	NATV	ALSK	OTH	PAN-	PAN-	VERY	&	MALE	MALE
	TOT	TOT	TO	TO	TO	TO	OVER	WHTE	AMER	IAN	#	##	##	TI	IC	IC	GOOD	GOOD	POOR	POOR
Q41 NEVER	34	687	2	6	9	8	6	2	24	3	1				3	30	23	11	13	20
	58%	50%	100%~	67%~	64%~	53%~	50%~	40%~	55%~	75%~	100%~	~	~	~	~100%~	56%~	64%~	48%~	59%~	57%~
SOMETIMES	11	305		1	2	5	2	1	9	1				1		11	5	6	4	7
	19%	22%	~	11%~	14%~	33%~	17%~	20%~	20%~	25%~	~	~	~	~50%~	~	20%~	14%~	26%~	18%~	20%~
USUALLY	7	152		1	1	1	3	1	6							7	3	4	2	5
	12%	11%	~	11%~	7%~	7%~	25%~	20%~	14%~	~	~	~	~	~	~	13%~	8%~	17%~	9%~	14%~
ALWAYS	7	223		1	2	1	1	1	5					1		6	5	2	3	3
	12%	16%	~	11%~	14%~	7%~	8%~	20%~	11%~	~	~	~	~	~50%~	~	11%~	14%~	9%~	14%~	9%~
#ALWAYS + USUALLY (NET)	14	375		2	3	2	4	2	11					1		13	8	6	5	8
	24%	27%	~	22%~	21%~	13%~	33%~	40%~	25%~	~	~	~	~	~50%~	~	24%~	22%~	26%~	23%~	23%~
TOP BOX SCORE	7	223		1	2	1	1	1	5					1		6	5	2	3	3
	12%	16%	~	11%~	14%~	7%~	8%~	20%~	11%~	~	~	~	~	~50%~	~	11%~	14%~	9%~	14%~	9%~
NOT ANSWERED	1	18				1			1							1	1		1	
VALID CASES	59	1367	2	9	14	15	12	5	44	4	1			2	3	54	36	23	22	35
NUMBER OF RESPONDENTS	60	1385	2	9	14	16	12	5	45	4	1			2	3	55	37	23	23	35
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	BANT	BANT	AGE						RACE						ETHNIC-ITY		HEALTH STATUS		GENDER		
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND #	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q42 NEVER	31 53%	778 57%	2 100%~	5 56%~	7 50%~	8 57%~	8 67%~	1 20%~	23 53%~	2 50%~	1 100%~	~	~	~	~	3 100%~	28 53%~	21 60%~	10 43%~	12 57%~	19 54%~
SOMETIMES	10 17%	261 19%	~	~	2 14%~	3 21%~	2 17%~	2 40%~	8 19%~	1 25%~	~	~	~	~	~	9 17%~	4 11%~	6 26%~	3 14%~	6 17%~	
USUALLY	7 12%	141 10%	~	1 11%~	2 14%~	1 7%~	2 17%~	1 20%~	5 12%~	~	~	~	~	1 50%~	~	7 13%~	3 9%~	4 17%~	2 10%~	5 14%~	
ALWAYS	10 17%	175 13%	~	3 33%~	3 21%~	2 14%~	~	1 20%~	7 16%~	1 25%~	~	~	~	1 50%~	~	9 17%~	7 20%~	3 13%~	4 19%~	5 14%~	
#ALWAYS + USUALLY (NET)	17 29%	316 23%	~	4 44%~	5 36%~	3 21%~	2 17%~	2 40%~	12 28%~	1 25%~	~	~	~	2 100%~	~	16 30%~	10 29%~	7 30%~	6 29%~	10 29%~	
TOP BOX SCORE	10 17%	175 13%	~	3 33%~	3 21%~	2 14%~	~	1 20%~	7 16%~	1 25%~	~	~	~	1 50%~	~	9 17%~	7 20%~	3 13%~	4 19%~	5 14%~	
NOT ANSWERED	2	30				2			2							2	2		2		
VALID CASES	58	1355	2	9	14	14	12	5	43	4	1			2	3	53	35	23	21	35	
NUMBER OF RESPONDENTS	60	1385	2	9	14	16	12	5	45	4	1			2	3	55	37	23	23	35	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

Q43 DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q43																					
YES	33 15%	997 21%*	1 6%~	2 5%~	5 11%~	7 16%~	14 28%*	4 33%~	19 14%	1 8%~	4 27%~	~	~	~	3 27%~	4 14%~	28 16%~	21 13%	11 22%	13 16%	20 15%
NO	180 85%	3756 79%*	16 94%~	39 95%~	40 89%~	37 84%~	36 72%*	8 67%~	117 86%	11 92%~	11 73%~	~	~	~	8 73%~	24 86%~	151 84%~	138 87%	39 78%	66 84%	112 85%
DON'T KNOW	4	42					3		1		1					1	2	2	1	2	1
NOT ANSWERED	18	287					1		1							1	1	2			2
VALID CASES	213	4753	17	41	45	44	50	12	136	12	15			11	28	179	159	50	79	132	
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER	
	OT1	OT2													ITY	STATUS		
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &		
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY	GOOD	FAIR
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	PAN-	GOOD	&	POOR
									WHTE	AMER	IAN	#	##	##	IC	IC	GOOD	POOR
Q44																		
YES	17	448		2	2	5	8		11	1	1			2	2	15	8	9
	9%	10%		~	5%~	5%~	13%~	16%	9%	9%~	8%~			~	18%~	7%~	9%~	5%~
NO	181	3956	16	35	40	34	42	10	116	10	11			9	26	150	142	33
	91%	90%	100%~	95%~	95%~	87%~	84%~	100%~	91%	91%~	92%~			~	82%~	93%~	91%~	95%~
DON'T KNOW	19	377	1	4	3	5	3	2	11	1	3				1	16	10	9
NOT ANSWERED	18	301					1				1				1	1	3	
																		2
VALID CASES	198	4404	16	37	42	39	50	10	127	11	12			11	28	165	150	42
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51
	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		
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &		
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY	GOOD	FAIR
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	PAN-	GOOD	&	POOR
									WHTE	AMER	IAN	#	##	##	IC	IC	GOOD	POOR
Q45																		
YES	69	1716	6	7	7	16	22	9	43	4	3			4	10	56	43	22
	32%	36%	35%~	18%~	16%~	36%~	41%	75%~	31%	33%~	19%~	~	~	~ 36%~	34%~	31%~	27%*	43%
NO	148	3045	11	33	38	28	32	3	95	8	13			7	19	125	117	29
	68%	64%	65%~	83%~	84%~	64%~	59%	25%~	69%	67%~	81%~	~	~	~ 64%~	66%~	69%~	73%*	57%
NOT ANSWERED	18	321		1											1	1	3	
VALID CASES	217	4761	17	40	45	44	54	12	138	12	16			11	29	181	160	51
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51
	100%	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				
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	PAN-	PAN-	&	&		
									WHTE	AMER	IAN	#	##	##	TI	IC	IC	GOOD	POOR	
																			MALE	MALE
Q46.1																				
YES	42	1102		4	6	12	16	4	28		5			3	4	38	22	20	16	26
	18%	22%		~ 10%	~ 13%	~ 27%	~ 30%*	33%~	20%		~ 31%	~	~	~ 27%	13%	21%*	13%*	39%*	19%	20%
NO	193	3980	17	37	39	32	38	8	110	12	11			8	26	144	141	31	67	107
	82%	78%	100%	~ 90%	~ 87%	~ 73%	~ 70%*	67%~	80%	100%	~ 69%	~	~	~ 73%	87%	79%*	87%*	61%*	81%	80%
VALID CASES	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN-	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE				
Q46.2	FMCA	OHP	18	25	35	45	55	65														
YES	TOT	TOT	24	34	44	54	64	OVER	WHTE	AMER	IAN	#	##	##	TI	IC	IC	GOOD	FAIR	POOR	MALE	MALE
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	AMER	IAN	#	##	##	TI	IC	IC	GOOD	FAIR	POOR	MALE	MALE
	57	1444	1	3	8	15	22	7	40	2	6			3	3	54	40	16		27	30	
	24%	28%	6%~	7%~	18%~	34%~	41%*	58%~	29%*	17%~	38%~	~	~	~ 27%~	10%~	30%*	25%	31%		33%*	23%	
NO	178	3638	16	38	37	29	32	5	98	10	10			8	27	128	123	35		56	103	
	76%	72%	94%~	93%~	82%~	66%~	59%*	42%~	71%*	83%~	63%~	~	~	~ 73%~	90%~	70%*	75%	69%		67%*	77%	
VALID CASES	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51		83	133	
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51		83	133	
	100%	100%	100%	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		
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q46.3 YES	27 11%	826 16%*	2 12%~	4 10%~	3 7%~	5 11%~	12 22%*	1 8%~	20 14%	1 8%~	1 6%~	~	~	~	1 9%~	4 13%~	22 12%	14 9%	11 22%*	10 12%	17 13%
NO	208 89%	4256 84%*	15 88%~	37 90%~	42 93%~	39 89%~	42 78%*	11 92%~	118 86%	11 92%~	15 94%~	~	~	~	10 91%~	26 87%~	160 88%	149 91%	40 78%*	73 88%	116 87%
VALID CASES	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133	
NUMBER OF RESPONDENTS	235 100%	5082 100%	17 100%	41 100%	45 100%	44 100%	54 100%	12 100%	138 100%	12 100%	16 100%			11 100%	30 100%	182 100%	163 100%	51 100%	83 100%	133 100%	

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					
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	HIS-	GOOD	FAIR			
									WHTE	AMER	IAN	#	##	##	IC	IC	&	&		
																GOOD	POOR	MALE	MALE	
Q47.1																				
YES	5	211	1	1		2	1		4		1				4	1	3	3	2	
	2%	4%*	6%~	2%~	~	5%~	2%	~	3%	~	6%~	~	~	~	~	2%	0.6%	6%	4%	2%
NO	230	4871	16	40	45	42	53	12	134	12	15			11	30	178	162	48	80	131
	98%	96%*	94%~	98%~	100%~	95%~	98%	100%~	97%	100%~	94%~	~	~	~100%	~100%	~98%	99%	94%	96%	98%
VALID CASES	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER				
	OT1	OT2												ITY	STATUS						
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	PAN-	HIS-	GOOD				
									WHTE	AMER	IAN	#	##	##	TI	IC	IC	&			
																		FAIR			
																		&			
																		POOR			
																		MALE			
																		MALE			
Q47.2																					
YES	6	212		2		2	1	1	4						1	1	5	1	4	5	1
	3%	4%		~	5%~	~	5%~	2%	8%~	3%	~	~	~	~	9%~	3%~	3%	0.6%*	8%	6%*	0.8%
NO	229	4870	17	39	45	42	53	11	134	12	16			10	29	177	162	47	78	132	
	97%	96%	100%~	95%~	100%~	95%~	98%	92%~	97%	100%~	100%~	~	~	~	91%~	97%~	97%	99%*	92%	94%*	99%
VALID CASES	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133	
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133	
	100%	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					
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	HIS-	GOOD	FAIR			
									WHTE	AMER	IAN	#	##	##	IC	IC	&	&		
																GOOD	POOR	MALE	MALE	
Q47.3																				
YES	8	195		2	2		2	2	6						7	2	5	5	3	
	3%	4%		~	5%~	4%~	~	4%	4%	~	~	~	~	~	~	4%	1%*	10%	6%	2%
NO	227	4887	17	39	43	44	52	10	132	12	16			11	30	175	161	46	78	130
	97%	96%	100%~	95%~	96%~	100%~	96%	83%~	96%	100%~	100%~	~	~	~100%	100%~	96%	99%*	90%	94%	98%
VALID CASES	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER IND/ PAC ALSK	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	GOOD & POOR	FE- MALE	MALE	
Q47.4 YES	42 18%	916 18%	3 ~	6 7%	12 13%	18 27%	2 33%*	17%~	23 17%	1 8%	10 63%	~	~	2 ~	18%~	5 17%	36 20%	21 13%*	19 37%*	19 23%	23 17%
NO	193 82%	4166 82%	17 100%	38 93%	39 87%	32 73%	36 67%*	10 83%	115 83%	11 92%	6 38%	~	~	9 ~	82%~	25 83%	146 80%	142 87%*	32 63%*	64 77%	110 83%
VALID CASES	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133	
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	FMCA	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-	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
																	FAIR			
									WHTE	AMER	IAN	#	##	##	TI	IC	IC	&		
																	POOR			
																	MALE			
																	MALE			
Q48																				
YES	63	1408	2	11	10	14	19	4	39	3	4			4	9	52	28	30	24	38
	29%	30%	12%~	27%~	22%~	32%~	36%	36%~	28%	27%~	25%~	~	~	~ 36%~	31%~	29%~	18%*	59%*	30%	29%
NO	152	3330	15	30	35	30	34	7	98	8	12			7	20	128	130	21	56	95
	71%	70%	88%~	73%~	78%~	68%~	64%	64%~	72%	73%~	75%~	~	~	~ 64%~	69%~	71%~	82%*	41%*	70%	71%
NOT ANSWERED	20	344						1	1	1					1	2	5		3	
VALID CASES	215	4738	17	41	45	44	53	11	137	11	16			11	29	180	158	51	80	133
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
	100%	100%	100%	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					
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	PAN-	PAN-	GOOD	FAIR		
									WHTE	AMER	IAN	#	##	##	TI	IC	IC	&	&	
																	GOOD	POOR	MALE	MALE
Q49																				
YES	50	1187	2	6	5	12	19	4	33	1	4			4	5	43	21	25	18	31
	85%	88%	100%~	60%~	56%~	92%~	100%~	100%~	89%~	33%~	100%~	~	~	~100%~	71%~	86%~	81%~	86%~	82%~	86%~
NO	9	167		4	4	1			4	2					2	7	5	4	4	5
	15%	12%	~	40%~	44%~	8%~	~	~	11%~	67%~	~	~	~	~	29%~	14%~	19%~	14%~	18%~	14%~
NOT ANSWERED	4	54		1	1	1			2						2	2	2	1	2	2
VALID CASES	59	1354	2	10	9	13	19	4	37	3	4			4	7	50	26	29	22	36
NUMBER OF RESPONDENTS	63	1408	2	11	10	14	19	4	39	3	4			4	9	52	28	30	24	38
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q48 = YES]

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

	BANT	BANT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV ILND #	AMER PAC ALSK	OTHER #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q50	FMCA	OHP	18	25	35	45	55	65														
YES	TOT	TOT	5	16	17	32	36	9	83	2	6			8	11	103	75	38	42	74		
	ADLT	ADLT	24	34	44	54	64	OVER	61%*	17%~	38%~	~	~	~ 80%~	39%~	57%~	47%*	75%*	53%	56%		
NO	TOT	TOT	11	24	27	12	18	3	54	10	10			2	17	77	83	13	37	59		
	ADLT	ADLT	69%~	60%~	61%~	27%~	33%*	25%~	39%*	83%~	63%~	~	~	~ 20%~	61%~	43%~	53%*	25%*	47%	44%		
NOT ANSWERED	TOT	TOT	1	1	1				1					1	2	2	5			4		
VALID CASES	TOT	TOT	16	40	44	44	54	12	137	12	16			10	28	180	158	51	79	133		
NUMBER OF RESPONDENTS	ADLT	ADLT	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133		
	TOT	TOT	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%		



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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	PAN-	PAN-	GOOD	FAIR		
									WHTE	AMER	IAN	#	##	##	TI	IC	IC	&	&	
																	GOOD	POOR	MALE	MALE
Q51																				
YES	106	2723	4	15	17	30	32	8	78	2	5			7	8	96	67	36	40	66
	96%	95%	80%~	94%~	100%~	97%~	97%~	100%~	98%~	100%~	83%~	~	~	~100%~	89%~	97%~	97%~	95%~	98%~	96%~
NO	4	155	1	1		1	1		2		1				1	3	2	2	1	3
	4%	5%	20%~	6%~	~	3%~	3%~	~	3%~	~	17%~	~	~	~	11%~	3%~	3%~	5%~	2%~	4%~
NOT ANSWERED	6	110				1	3	1	3					1	2	4	6		1	5
VALID CASES	110	2878	5	16	17	31	33	8	80	2	6			7	9	99	69	38	41	69
NUMBER OF RESPONDENTS	116	2988	5	16	17	32	36	9	83	2	6			8	11	103	75	38	42	74
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q50 = YES]

NQ52 WHAT IS YOUR AGE?

	BANT OT1	BANT OT2	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	FMCA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV ILND #	AMER PAC ALSK ##	OTHER ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
NQ52																						
18 TO 24	19 8%	485 10%	17 100%	~	~	~	~	~	7 5%	2 ~	13%~	~	~	~	6 20%~	10 5%*	16 10%	1 2%*	8 10%	9 7%		
25 TO 34	48 20%	853 17%	~	41 ~100%	~	~	~	~	26 19%	2 17%~	2 13%~	~	~	~	1 9%~	8 27%~	32 18%	31 19%	11 22%	14 17%	27 20%	
35 TO 44	50 21%	805 16%*	~	~	45 ~100%	~	~	~	25 18%	8 67%~	2 13%~	~	~	~	4 36%~	3 10%~	41 23%	38 23%	7 14%	11 13%*	34 26%	
45 TO 54	50 21%	1048 21%	~	~	44 ~100%	~	~	~	33 24%	3 ~	19%~	~	~	~	1 9%~	8 27%~	37 20%	35 21%	11 22%	23 28%	22 17%*	
55 TO 64	56 24%	1437 28%	~	~	~	54 ~100%	~	~	39 28%*	2 17%~	6 38%~	~	~	~	5 45%~	4 13%~	51 28%*	35 21%	17 33%	23 28%	33 25%	
65 TO 74	10 4%	302 6%	~	~	~	~	10 83%~	~	6 4%	1 ~	6%~	~	~	~	~	1 3%~	9 5%	7 4%	3 6%	2 2%	8 6%	
75 OR OLDER	2 0.9%	152 3%*	~	~	~	~	2 17%~	~	2 1%	~	~	~	~	~	~	2 1%~	1 0.6%	1 2%	1 2%	2 2%~	~	
VALID CASES	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133		
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%		

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

NQ53 ARE YOU MALE OR FEMALE?

		BANT OT1	BANT OT2	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV #	AMER IND/ PAC ALSK	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE		
NQ53	MALE	94	2039	8	14	11	23	21	4	52	5	6			3	13	68	64	15	83			
		40%	40%	47%~	34%~	24%~	52%~	39%	33%~	38%	42%~	38%~	~	~	~ 27%~	43%~	37%	39%	29%	100%~	~		
	FEMALE	141	3043	9	27	34	21	33	8	86	7	10			8	17	114	99	36	133			
		60%	60%	53%~	66%~	76%~	48%~	61%	67%~	62%	58%~	63%~	~	~	~ 73%~	57%~	63%	61%	71%	~100%~			
	VALID CASES	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133		
	NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133		
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%		

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

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2																			
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AFR-	AS-	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	AMER	IAN	#	##	##	TI	IC	IC	GOOD	POOR		
																	&	&	MALE		
																	VERY		MALE		
																	GOOD	POOR			
Q54																					
8TH GRADE OR LESS	17 8%	267 6%		3 7%~	3 7%~	5 12%~	3 6%	3 25%~	5 4%*	1 8%~	2 13%~				1 10%~	7 24%~	10 6%~	8 5%*	9 18%*	3 4%*	14 11%*
SOME HIGH SCHOOL BUT DID NOT GRADUATE	14 7%	599 13%*	1 6%~	1 2%~	5 11%~	2 5%~	2 4%	2 17%~	7 5%	1 8%~	2 13%~				1 10%~	3 10%~	11 6%~	6 4%*	5 10%	7 9%	7 5%
HIGH SCHOOL GRADUATE OR GED	57 27%	1663 35%*	6 35%~	11 27%~	5 11%~	16 38%~	15 28%	4 33%~	40 29%	4 33%~	2 13%~				1 10%~	9 31%~	48 27%~	38 24%	19 37%	24 30%	33 25%
SOME COLLEGE OR 2-YEAR DEGREE	69 32%	1668 35%	8 47%~	14 34%~	18 40%~	8 19%~	19 35%	1 8%~	49 36%	3 25%~	3 19%~				3 30%~	4 14%~	62 34%~	55 35%	13 25%	26 33%	43 32%
4-YEAR COLLEGE GRADUATE	36 17%	348 7%*	2 12%~	5 12%~	9 20%~	8 19%~	11 20%	1 8%~	23 17%	2 17%~	4 25%~				2 20%~	5 17%~	30 17%~	29 19%	5 10%	15 19%	21 16%
MORE THAN 4-YEAR COLLEGE DEGREE	20 9%	201 4%*		7 17%~	5 11%~	3 7%~	4 7%	1 8%~	13 9%	1 8%~	3 19%~				2 20%~	1 3%~	19 11%~	20 13%*		5 6%	15 11%
NOT ANSWERED	22	336				2			1						1	1	2	7		3	
VALID CASES	213	4746	17	41	45	42	54	12	137	12	16				10	29	180	156	51	80	133
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16				11	30	182	163	51	83	133
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

Q55 ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	FMCA	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-	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									IC	IAN	#	##	##	TI	IC	IC	FAIR			
									WHTE	AMER							&			
																	POOR			
																	MALE			
																	MALE			
Q55																				
YES HISPANIC OR LATINO	30	571	6	8	3	8	2	1							30	22	5	13	17	
	14%	12%	38%~	20%~	7%~	18%~	4%*	8%~	~	~	~	~	~	~	~100%~	~	14%	10%	16%	13%
NO NOT HISPANIC OR LATINO	182	4145	10	32	41	36	51	11	137	12	16			11	182	135	46	68	114	
	86%	88%	63%~	80%~	93%~	82%~	96%*	92%~	~100%~	~100%~	~100%~	~	~	~100%~	~100%~	86%	90%	84%	87%	
NOT ANSWERED	23	366	1	1	1		1		1							6		2	2	
VALID CASES	212	4716	16	40	44	44	53	12	137	12	16			11	30	182	157	51	81	131
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

Q56.1 WHAT IS YOUR RACE? RESPONSE: WHITE

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	PAN-	PAN-	&	&		
									WHTE	AMER	IAN	#	##	##	TI	IC	IC	GOOD	POOR	
																			MALE	MALE
Q56.1																				
YES	162	4120	9	33	30	36	45	8	138					11	13	148	116	43	60	102
	69%	81%*	53%~	80%~	67%~	82%~	83%*	67%~	100%~	~	~	~	~	~100%~	43%~	81%*	71%	84%*	72%	77%*
NO	73	962	8	8	15	8	9	4	12	16					17	34	47	8	23	31
	31%	19%*	47%~	20%~	33%~	18%~	17%*	33%~	~100%~	~100%~	~	~	~	~	57%~	19%*	29%	16%*	28%	23%*
VALID CASES	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	PAN-	HIS-	GOOD			
									WHTE	AMER	IAN	#	##	##	TI	IC	IC			
																	GOOD			
																	POOR			
																	MALE			
																	MALE			
Q56.2																				
YES	15	85	1	2	9	1	2		12					2	1	14	13	2	6	9
	6%	2%*	6%~	5%~	20%~	2%~	4%		~100%~	~	~	~	~	~18%~	3%~	8%*	8%	4%	7%	7%
NO	220	4997	16	39	36	43	52	12	138	16				9	29	168	150	49	77	124
	94%	98%*	94%~	95%~	80%~	98%~	96%	100%~	100%~	~100%~	~	~	~	~82%~	97%~	92%*	92%	96%	93%	93%
VALID CASES	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

Q56.3 WHAT IS YOUR RACE? RESPONSE: ASIAN

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2																			
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	VERY	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	PAN-	PAN-	GOOD	&	FE-		
									WHTE	AMER	IAN	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q56.3																					
YES	18	136	3	2	3	3	6	1			16			1	1	17	14	4	6	12	
	8%	3%*	18%~	5%~	7%~	7%~	11%	8%~	~	~100%~	~	~	~	9%~	3%~	9%*	9%	8%	7%	9%	
NO	217	4946	14	39	42	41	48	11	138	12				10	29	165	149	47	77	121	
	92%	97%*	82%~	95%~	93%~	93%~	89%	92%~	100%~	100%~	~	~	~	91%~	97%~	91%*	91%	92%	93%	91%	
VALID CASES	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133	
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	



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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	FMCA	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-	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									WHTE	AMER	IAN	#	##	##	TI	IC	IC	GOOD		
																		FAIR		
																		&		
																		&		
																		POOR		
																		MALE		
																		MALE		
Q56.4																				
YES		40																		
		0.8%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NO	235	5042	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
	100%	99%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~	~	~100%	~100%	~100%	~100%	~100%	~100%	~100%
VALID CASES	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	PAN-	PAN-	GOOD	FAIR		
									WHTE	AMER	IAN	#	##	##	TI	IC	IC	&	&	
																	GOOD	POOR	MALE	MALE
Q56.5																				
YES	6	313			2		3	1						4	6	3	3	1	5	
	3%	6%*	~	~	4%~	~	6%	8%~	~	~	~	~	~	~ 36%~	~ 3%~	2%	6%	1%	4%	
NO	229	4769	17	41	43	44	51	11	138	12	16			7	30	176	160	48	82	128
	97%	94%*	100%~	100%~	96%~	100%~	94%	92%~	100%~	100%~	100%~	~	~	~ 64%~	100%~	97%*	98%	94%	99%	96%
VALID CASES	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
	100%	100%	100%	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					
	FMCA	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-	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									WHTE	AMER	IAN	#	##	##	TI	IC	IC	&		
																		FAIR		
																		&		
																		GOOD		
																		POOR		
																		MALE		
																		MALE		
Q56.6																				
YES	11	278	3	3	2		2							4	5	6	9	1	6	5
	5%	5%	18%~	7%~	4%~		4%		~	~	~	~	~	36%~	17%~	3%	6%	2%	7%	4%
NO	224	4804	14	38	43	44	52	12	138	12	16			7	25	176	154	50	77	128
	95%	95%	82%~	93%~	96%~	100%~	96%	100%~	100%~	100%~	100%~	~	~	64%~	83%~	97%	94%	98%	93%	96%
VALID CASES	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
NUMBER OF RESPONDENTS	235	5082	17	41	45	44	54	12	138	12	16			11	30	182	163	51	83	133
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

Q57 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND #	AMER PAC ALSK	OTHER #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q57																					
YES	21 13%	466 12%	2 18%	5 16%	1 4%	5 14%	5 11%	2 17%	12 11%	5 ~ 33%	~	~	~ 14%	1	2 11%	19 13%	12 9%	9 24%	12 19%	9 9%	
NO	147 88%	3267 88%	9 82%	26 84%	27 96%	32 86%	40 89%	10 83%	102 89%	5 100%	10 67%	~	~	6 ~ 86%	17 89%	125 87%	115 91%	28 76%	52 81%	94 91%	
NOT ANSWERED	3	46	1												1	2	1				
VALID CASES	168	3733	11	31	28	37	45	12	114	5	15			7	19	144	127	37	64	103	
NUMBER OF RESPONDENTS	171	3779	11	32	28	37	45	12	114	5	15			7	20	144	129	37	65	103	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	HIS-	GOOD	FAIR			
									WHTE	AMER	IAN	#	##	##	IC	IC	&	POOR		
																		MALE	MALE	
Q58.1																				
YES	9	238	1	2		1	3	1	5	2					2	7	6	3	4	5
	43%	51%~	50%~	40%~		20%~	60%~	50%~	42%~	40%~					100%~	37%~	50%~	33%~	33%~	56%~
NO	12	228	1	3	1	4	2	1	7	3				1	12	6	6	8	4	4
	57%	49%~	50%~	60%~	100%~	80%~	40%~	50%~	58%~	60%~				100%~	63%~	50%~	67%~	67%~	44%~	
VALID CASES	21	466	2	5	1	5	5	2	12	5				1	2	19	12	9	12	9
NUMBER OF RESPONDENTS	21	466	2	5	1	5	5	2	12	5				1	2	19	12	9	12	9
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE					ETHNIC-	HEALTH	GENDER				
	OT1	OT2											ITY	STATUS						
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER			NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			HIS-	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	HIS-	GOOD				
															HIS-	FAIR				
									WHTE	AMER	IAN	#	##	##	IC	IC				
																GOOD				
																&				
																&				
																POOR				
																MALE				
																MALE				
Q58.2																				
YES	6	182	1	2		1	1	1	3	2				1	6	3	3	3	3	
	29%	39%	50%	40%		20%	20%	50%	25%	40%				100%	32%	25%	33%	25%	33%	
NO	15	284	1	3	1	4	4	1	9	3				2	13	9	6	9	6	
	71%	61%	50%	60%	100%	80%	80%	50%	75%	60%				100%	68%	75%	67%	75%	67%	
VALID CASES	21	466	2	5	1	5	5	2	12	5				1	2	19	12	9	12	9
NUMBER OF RESPONDENTS	21	466	2	5	1	5	5	2	12	5				1	2	19	12	9	12	9
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	

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

Q58.3 HOW DID THAT PERSON HELP YOU? RESPONSE: ANSWERED THE QUESTIONS FOR ME.

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	HIS-	GOOD	FAIR			
									WHTE	AMER	IAN	#	##	##	IC	IC	&	POOR		
																		MALE	MALE	
Q58.3																				
YES	3	156	1			2			3						3	2	1	2	1	
	14%	33%~	50%~	~	~	40%~	~	~	25%~	~	~	~	~	~	~ 16%~	17%~	11%~	17%~	11%~	
NO	18	310	1	5	1	3	5	2	9	5				1	2	16	10	8	10	8
	86%	67%~	50%~	100%~	100%~	60%~	100%~	100%~	75%~	~100%~	~	~	~	~100%~	100%~	84%~	83%~	89%~	83%~	89%~
VALID CASES	21	466	2	5	1	5	5	2	12	5				1	2	19	12	9	12	9
NUMBER OF RESPONDENTS	21	466	2	5	1	5	5	2	12	5				1	2	19	12	9	12	9
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

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

Q58.4 HOW DID THAT PERSON HELP YOU? RESPONSE: TRANSLATED THE QUESTIONS INTO MY LANGUAGE.

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	PAN-	HIS-	GOOD			
									WHTE	AMER	IAN	#	##	##	TI	IC	IC			
																	FAIR			
																	&			
																	POOR			
																	MALE			
																	MALE			
Q58.4																				
YES	8	56		1	1	1	4	1	2	5					8	4	4	3	5	
	38%	12%~		~ 20%	100%~	20%~	80%~	50%~	17%~	~100%~					~ 42%~	33%~	44%~	25%~	56%~	
NO	13	410	2	4		4	1	1	10					1	2	11	8	5	9	4
	62%	88%~	100%~	80%~		~ 80%~	20%~	50%~	83%~					~100%~	100%~	58%~	67%~	56%~	75%~	44%~
VALID CASES	21	466	2	5	1	5	5	2	12	5				1	2	19	12	9	12	9
NUMBER OF RESPONDENTS	21	466	2	5	1	5	5	2	12	5				1	2	19	12	9	12	9
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

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



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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	HIS-	GOOD	FAIR			
									WHTE	AMER	IAN	#	##	##	IC	IC	&	&		
																GOOD	POOR	MALE	MALE	
Q58.5																				
YES	3	39		2				1	3						3	1	2	1	2	
	14%	8%		~ 40%	~	~	~	~ 50%	25%	~	~	~	~	~	~ 16%	8%	22%	8%	22%	
NO	18	427	2	3	1	5	5	1	9	5				1	2	16	11	7	11	7
	86%	92%	~ 100%	~ 60%	~ 100%	~ 100%	~ 100%	~ 50%	75%	~ 100%	~	~	~	~ 100%	~ 100%	~ 84%	~ 92%	~ 78%	~ 92%	~ 78%
VALID CASES	21	466	2	5	1	5	5	2	12	5				1	2	19	12	9	12	9
NUMBER OF RESPONDENTS	21	466	2	5	1	5	5	2	12	5				1	2	19	12	9	12	9
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

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

NQ13 RATING OF ALL HEALTH CARE

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER				
	OT1	OT2																					
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &	VERY	GOOD	FAIR			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AFR-	AS-	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR	&	&	FE-	
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	AMER	IAN	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE		
NQ13																							
0-6	29	687	1	8	7	6	5		22	1	1					2	25	16	12	7	20		
	18%	20%	8%~	29%~	27%~	16%~	13%~		22%	13%~	8%~	~	~	~		11%~	19%~	15%	27%~	13%	20%		
7-8	57	1221	4	10	9	12	15	4	40	1	6				2	2	52	40	14	20	35		
	35%	35%	31%~	36%~	35%~	32%~	38%~	44%~	40%	13%~	46%~	~	~	~	29%~	11%~	39%~	37%	31%~	36%	35%		
9-10	75	1603	8	10	10	19	19	5	39	6	6				5	14	58	52	19	28	45		
	47%	46%	62%~	36%~	38%~	51%~	49%~	56%~	39%*	75%~	46%~	~	~	~	71%~	78%~	43%~	48%	42%~	51%	45%		
VALID CASES	161	3511	13	28	26	37	39	9	101	8	13				7	18	135	108	45	55	100		
NUMBER OF RESPONDENTS	161	3511	13	28	26	37	39	9	101	8	13				7	18	135	108	45	55	100		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%		
MEAN	2.29	2.26	2.54	2.07	2.12	2.35	2.36	2.56	2.17	2.63	2.38				2.71	2.67	2.24	2.33	2.16	2.38	2.25		
p stat_(*=Sig @ p<=.05)		.673	~	~	~	~	~	~	.009*	~	~	~	~	~	~	~	~	~	~	.254	~	.245	.443

[ASKED IF Q7 >= 1 TIME]

NQ23 RATING OF PERSONAL DOCTOR

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER				
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV ILND #	AMER PAC ALSK	OTHER ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE			
NQ23	FMCA	OHP	18	25	35	45	55	65															
0-6	TOT	TOT	24	34	44	54	64	OVER	WHTE	AMER	IAN	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE		
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	AMER	IAN	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE		
			28	572	3	7	6	4	6	1	19	3	1				3	24	16	11	7	20	
			17%	15%	27%~	25%~	18%~	11%~	16%~	11%~	18%	43%~	11%~	~	~	~	15%~	18%~	14%	25%~	13%	19%	
7-8			47	959	1	7	14	10	12		31	3	3			3	2	43	37	9	16	29	
			28%	26%	9%~	25%~	42%~	27%~	32%~	~	29%	43%~	33%~	~	~	~	33%~	10%~	31%~	33%	20%~	29%	28%
9-10			90	2197	7	14	13	23	20	8	56	1	5			6	15	70	60	24	32	55	
			55%	59%	64%~	50%~	39%~	62%~	53%~	89%~	53%	14%~	56%~	~	~	~	67%~	75%~	51%~	53%	55%~	58%	53%
VALID CASES			165	3728	11	28	33	37	38	9	106	7	9			9	20	137	113	44	55	104	
NUMBER OF RESPONDENTS			165	3728	11	28	33	37	38	9	106	7	9			9	20	137	113	44	55	104	
			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	
MEAN	2.38	2.44	2.36	2.25	2.21	2.51	2.37	2.78	2.35	1.71	2.44				2.67	2.60	2.34	2.39	2.30	2.45	2.34		
p stat_(*=Sig @ p<=.05)	.288		~	~	~	~	~	~	~	.547	~	~	~	~	~	~	~	~	.735	~	.348	.388	

[ASKED IF Q15 = YES]

NQ27 RATING OF SPECIALIST SEEN MOST OFTEN

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV ILND #	AMER PAC ALSK	IND/ OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
NQ27	FMCA	OHP	18	25	35	45	55	65													
0-6	TOT	TOT	24	34	44	54	64	OVER	WHTE	AMER	IAN	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
	11	239		1		3	5	1	7		1			1	1	9	3	7	5	5	
	14%	13%		~ 8%		~ 18%	22%	20%	13%		~ 50%			~ 25%	14%	13%	7%	24%	16%	11%	
7-8	23	475	1	6	5	4	3	2	21						22	13	9	9	13		
	29%	27%	17%	50%	42%	24%	13%	40%	38%						~ 32%	28%	31%	29%	28%		
9-10	46	1057	5	5	7	10	15	2	27	4	1			3	6	37	30	13	17	28	
	58%	60%	83%	42%	58%	59%	65%	40%	49%	100%	50%			~ 75%	86%	54%	65%	45%	55%	61%	
VALID CASES	80	1771	6	12	12	17	23	5	55	4	2			4	7	68	46	29	31	46	
NUMBER OF RESPONDENTS	80	1771	6	12	12	17	23	5	55	4	2			4	7	68	46	29	31	46	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	
MEAN	2.44	2.46	2.83	2.33	2.58	2.41	2.43	2.20	2.36	3.00	2.00			2.50	2.71	2.41	2.59	2.21	2.39	2.50	
p stat_(*=Sig @ p<=.05)		.759	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

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

NQ35 RATING OF HEALTH PLAN

	BANT	BANT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV ILND #	AMER PAC ALSK	IND/ OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
NQ35	FMCA	OHP	18	25	35	45	55	65														
0-6	TOT	TOT	24	34	44	54	64	OVER	WHTE	AMER	IAN	#	##	##	TI	IC	IC	GOOD	FAIR	MALE	MALE	
ADLT	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	AMER	IAN	#	##	##	TI	IC	IC	GOOD	FAIR	MALE	MALE	
	35	953	2	9	6	7	8	1	24		3				1	4	30	22	13	13	21	
	17%	21%	13%~	24%~	14%~	17%~	17%~	8%~	19%		~ 21%~	~	~	~ 10%~	15%~	18%~	15%	26%	17%	17%		
7-8	73	1522	4	12	22	12	16	4	43	8	5			5	7	63	52	17	26	44		
	35%	33%	25%~	32%~	51%~	29%~	35%~	33%~	33%	73%~	36%~	~	~	~ 50%~	26%~	37%~	35%	34%	34%	36%		
9-10	101	2121	10	17	15	22	22	7	62	3	6			4	16	77	75	20	38	57		
	48%	46%	63%~	45%~	35%~	54%~	48%~	58%~	48%	27%~	43%~	~	~	~ 40%~	59%~	45%~	50%	40%	49%	47%		
VALID CASES	209	4596	16	38	43	41	46	12	129	11	14			10	27	170	149	50	77	122		
NUMBER OF RESPONDENTS	209	4596	16	38	43	41	46	12	129	11	14			10	27	170	149	50	77	122		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%		
MEAN	2.32	2.25	2.50	2.21	2.21	2.37	2.30	2.50	2.29	2.27	2.21			2.30	2.44	2.28	2.36	2.14	2.32	2.30		
p stat_(*=Sig @ p<=.05)		.241	~	~	~	~	~	~	.596	~	~	~	~	~	~	~	.223	.055	.896	.635		

GETTING NEEDED CARE

	BANT OT1	BANT OT2	AGE					RACE					ETHNIC- ITY	HEALTH STATUS		GENDER					
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC #	AMER IND/ ALSK ##	OTHR MUL- ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
NPRBSEE4 NQ46	2.26	2.25	2.83	2.31	1.92	2.22	2.23	2.60	2.27	2.50	1.67		2.00	2.57	2.25	2.41	2.03	2.50	2.12		
p stat_(*=Sig @ p<=.05)	.886		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NCARNES4 NQ15	2.39	2.31	2.08	2.25	2.26	2.61	2.46	2.67	2.44	2.50	2.08		2.00	2.72	2.37	2.41	2.36	2.43	2.39		
p stat_(*=Sig @ p<=.05)	.211		~	~	~	~	~	~	.268	~	~	~	~	~	~	~	.592	~	.593	.851	
COMPOSITE	2.32	2.28	2.46	2.28	2.09	2.42	2.35	2.63	2.35	2.50	1.87	x	x	x	2.00	2.65	2.31	2.41	2.19	2.46	2.26
p stat_(*=Sig @ p<=.05)	.310		~	~	~	~	~	~	.347	~	~	~	~	~	~	~	.008*	~	.015*	.057	

GETTING CARE QUICKLY

	BANT OT1	BANT OT2	AGE					RACE					ETHNIC- ITY	HEALTH STATUS	GENDER						
	FMCA TOT ADLT	OHP TOT ADLT	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV #	AMER IND/ PAC ALSK	OTHR ##	MUL- TI	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE			
NCARSN4 NQ4	2.38	2.40	2.00	2.27	2.50	2.38	2.69	2.14	2.47	2.50	1.80		2.67	2.33	2.41	2.42	2.33	2.54	2.33		
p stat_(*=Sig @ p<=.05)	.810		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NAPGET4 NQ6	2.19	2.26	2.20	1.87	2.15	2.40	2.35	2.25	2.29	2.17	1.78		2.25	2.33	2.22	2.17	2.33	2.27	2.21		
p stat_(*=Sig @ p<=.05)	.278		~	~	~	~	~	~	.062	~	~	~	~	~	~	~	~	~	.740		
COMPOSITE	2.29	2.33	2.10	2.07	2.33	2.39	2.52	2.20	2.38	2.33	1.79	x	x	x	2.46	2.33	2.32	2.29	2.33	2.40	2.27
p stat_(*=Sig @ p<=.05)	.301		~	~	~	~	~	~	.013*	~	~	~	~	~	~	~	.839	~	.098	.634	

HOW WELL DOCTORS COMMUNICATE

	BANT OT1	BANT OT2	AGE					RACE					ETHNIC- ITY	HEALTH STATUS	GENDER				
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC #	AMER IND/ ALSK ##	OTHR MUL- ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE	
NDREXPL4 NQ32	2.66	2.64	2.88	2.63	2.56	2.68	2.63	2.86	2.64	2.40	2.57		3.00	2.78	2.64	2.72	2.49	2.71	2.64
p stat_(*=Sig @ p<=.05)		.721	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NDRLSTN4 NQ33	2.63	2.61	2.88	2.46	2.52	2.77	2.53	3.00	2.59	2.40	2.43		3.00	2.78	2.60	2.68	2.54	2.71	2.59
p stat_(*=Sig @ p<=.05)		.752	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NDRESPU4 NQ34	2.72	2.67	3.00	2.58	2.60	2.81	2.69	3.00	2.70	2.40	2.57		3.00	2.78	2.71	2.75	2.69	2.80	2.68
p stat_(*=Sig @ p<=.05)		.303	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NDRTMEN4 NQ37	2.63	2.52	2.75	2.50	2.56	2.68	2.63	3.00	2.60	2.40	2.57		3.00	2.61	2.63	2.67	2.56	2.67	2.61
p stat_(*=Sig @ p<=.05)		.047*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.66	2.61	2.88	2.54	2.56	2.73	2.62	2.96	2.63	2.40	2.54	x	x	x	3.00	2.74	2.64	2.70	2.63
p stat_(*=Sig @ p<=.05)		.275	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~



CUSTOMER SERVICE

	BANT OT1	BANT OT2	AGE					RACE					ETHNIC- ITY	HEALTH STATUS	GENDER						
	FMCA TOT ADLT	OHP TOT ADLT	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE			
NPBCLCS4 NQ50	2.32	2.30	2.40	2.50	2.39	2.00	2.47	2.25	2.40	1.80	2.67			2.29	2.33	2.34	2.30	2.35	2.46	2.28	
p stat_(*=Sig @ p<=.05)	.784		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCSRESP NQ51	2.72	2.69	2.40	2.83	2.72	3.00	2.72	2.50	2.67	2.60	2.33			3.00	2.86	2.71	2.68	2.82	2.80	2.70	
p stat_(*=Sig @ p<=.05)	.657		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.52	2.50	2.40	2.67	2.56	2.50	2.60	2.38	2.54	2.20	2.50	x	x	x	2.64	2.60	2.53	2.49	2.59	2.63	2.49
p stat_(*=Sig @ p<=.05)	.704		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

SHARED DECISION MAKING

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE		
NNRXWHY NQ11	2.92	2.87	2.50	2.88	3.00	2.90	3.00	3.00	2.96	2.60	3.00		3.00	3.00	2.91	2.88	3.00	2.80	3.00		
p stat_(*=Sig @ p<=.05)		.283	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NNRXWYNT NQ12	2.59	2.49	3.00	2.47	2.69	2.71	2.44	1.67	2.65	2.20	1.40		3.00	2.71	2.56	2.61	2.48	2.59	2.57		
p stat_(*=Sig @ p<=.05)		.270	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NRXBST NQ13	2.67	2.53	2.50	2.50	2.85	2.62	2.89	2.33	2.65	2.60	2.60		3.00	3.00	2.65	2.65	2.74	2.60	2.74		
p stat_(*=Sig @ p<=.05)		.124	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
COMPOSITE	2.73	2.63	2.67	2.61	2.85	2.75	2.78	2.33	2.76	2.47	2.33	x	x	x	3.00	2.90	2.71	2.72	2.74	2.66	2.77
p stat_(*=Sig @ p<=.05)		.096	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		

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

	BANTO	BANTO	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	T1	T2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHT	BLK 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	FE-MALE	MALE
PRBSEE4 Q25	75%	77%	100%	69%	67%	78%	73%	80%	76%	100%	33%				50%	86%	74%	82%	65%	88%	68%
CARNES4 Q14	84%	82%	69%	79%	89%	92%	82%	89%	84%	100%	62%				71%	100%	82%	85%	80%	84%	85%
AVERAGE	79.57	79.43	84.62	73.90	77.78	84.72	77.56	84.44	80.21	100.0	47.44	x	x	x	60.71	92.86	78.10	83.41	72.26	85.71	76.42

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

	BANTO T1	BANTO T2	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHT	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	FE- MALE	MALE
CARSN4 Q4	80%	83%	60%	73%	88%	88%	94%	57%	87%	75%	60%				100%	67%	83%	86%	73%	86%	80%
APGET4 Q6	74%	78%	70%	61%	73%	87%	81%	63%	79%	83%	44%				75%	73%	75%	70%	85%	77%	74%
AVERAGE	76.89	80.38	65.00	67.10	80.29	87.08	87.20	59.82	82.81	79.17	52.22	x	x	x	87.50	70.00	79.04	78.25	78.97	81.49	77.01

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER				
	OT1	OT2												ITY	STATUS						
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	HIS-	GOOD	FAIR				
									WHTE	AMER	IAN	#	##	##	IC	IC	&	POOR			
																		MALE	MALE		
DREXPL4 Q17	93%	92%	100%	88%	92%	94%	91%	100%	91%	80%	86%			100%	100%	91%	95%	85%	93%	92%	
DRLSTN4 Q18	90%	90%	100%	83%	92%	90%	88%	100%	88%	100%	86%			100%	94%	89%	93%	85%	91%	89%	
DRESPU4 Q19	93%	91%	100%	92%	92%	94%	91%	100%	91%	100%	100%			100%	94%	93%	94%	92%	93%	93%	
DRTMEN4 Q20	91%	88%	100%	83%	88%	94%	91%	100%	91%	80%	86%			100%	89%	91%	94%	85%	91%	91%	
AVERAGE	91.8	90.3	100	86.5	91.0	92.7	89.8	100	90.1	90.0	89.3	x	x	x	100	94.4	90.9	94.3	86.5	92.2	91.2

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

	BANTO	BANTO	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	T1	T2	18	25	35	45	55	65	BLCK	NATV	AMER	HIS-	NOT	EX &	VERY	FE-					
FMCA	OHP	18	25	35	45	55	65	OR	HAW/	IND/	HIS-	HIS-	GOOD	FAIR	MALE						
TOT	TOT	TO	TO	TO	TO	TO	AND	AFR-	AS-	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE		
ADLT	ADLT	24	34	44	54	64	OVER	WHT	AMER	IAN	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE	
PBCLCS4 Q31	80%	80%	80%	92%	78%	70%	88%	75%	83%	60%	100%			71%	83%	80%	76%	88%	88%	77%	
CSRESP Q32	94%	94%	80%	100%	94%	100%	94%	75%	93%	100%	67%			100%	100%	93%	92%	100%	96%	93%	
AVERAGE	87.36	86.67	80.00	95.83	86.11	85.00	91.34	75.00	87.50	80.00	83.33	x	x	x	85.71	91.67	86.44	84.00	94.12	91.75	84.88

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER				
	OT1	OT2												ITY	STATUS						
	FMCA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR			
									WHTE	AMER	IAN	#	##	##	TI	IC	IC	&	&		
																	GOOD	POOR	MALE	MALE	
NRXWHY Q10	96%	93%	75%	94%	100%	95%	100%	100%	98%	80%	100%				100%	100%	96%	94%	100%	90%	100%
NRXWYNT Q11	80%	74%	100%	73%	85%	86%	72%	33%	83%	60%	20%				100%	86%	78%	80%	74%	79%	79%
RXBST Q12	84%	77%	75%	75%	92%	81%	94%	67%	83%	80%	80%				100%	100%	83%	83%	87%	80%	87%
AVERAGE	86.6	81.5	83.3	80.7	92.3	87.3	88.9	66.7	87.8	73.3	66.7	x	x	x	100	95.2	85.4	85.8	87.0	83.1	88.7

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	
	FMCA 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 & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q1 YES	292 100%	5277 100%	59 100%	84 100%	80 100%	69 100%	113 100%	10 ~100%	~	~	~100%	29 100%	97 100%	165 100%	258 100%	9 100%	232 100%	60 100%
NOT ANSWERED	2	32			1	1		1					1	1	2		2	
VALID CASES	292	5277	59	84	80	69	113	10			29	97	165	258	9	232	60	
NUMBER OF RESPONDENTS	294 100%	5309 100%	59 100%	84 100%	81 100%	70 100%	113 100%	11 100%			29 100%	98 100%	166 100%	260 100%	9 100%	234 100%	60 100%	



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	
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS- IAN	NATV ILND ##	AMER IND/ PAC ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q3 YES	84 29%	1639 32%	19 33%	29 36%	19 24%	17 25%	27 24%	4 ~ 36%	~	~	~	11 ~ 38%	32 33%	49 30%	77 30%	3 38%	67 30%	17 28%
NO	202 71%	3549 68%	38 67%	52 64%	60 76%	52 75%	85 76%	7 ~ 64%	~	~	~	18 ~ 62%	64 67%	116 70%	181 70%	5 63%	159 70%	43 72%
NOT ANSWERED	8	121	2	3	2	1	1						2	1	2	1	8	
VALID CASES	286	5188	57	81	79	69	112	11				29	96	165	258	8	226	60
NUMBER OF RESPONDENTS	294	5309	59	84	81	70	113	11				29	98	166	260	9	234	60
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN	NATV ILND ##	AMER IND/ALSK #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
Q4 NEVER	1 1%	19 1%	~	1 4%~	~	~	~	~	~	~	~	10%~	~	1 2%~	~	1 33%~	1 2%~		
SOMETIMES	5 6%	114 7%	1 6%~	2 7%~	1 5%~	1 6%~	1 4%~	~	~	~	~	~	10%~	3 4%~	2 7%~	5 7%~	4 6%~	1 6%	
USUALLY	10 12%	272 18%	2 11%~	3 11%~	1 5%~	4 25%~	1 4%~	~	2 50%~	~	~	~	10%~	4 13%~	5 11%~	8 11%~	1 33%~	6 9%~	4 24%
ALWAYS	65 80%	1135 74%	15 83%~	22 79%~	17 89%~	11 69%~	24 92%~	~	2 50%~	~	~	~	80%~	8 77%~	39 83%~	61 82%~	1 33%~	53 83%~	12 71%
#ALWAYS + USUALLY (NET)	75 93%	1407 91%	17 94%~	25 89%~	18 95%~	15 94%~	25 96%~	~	4 100%~	~	~	~	90%~	28 90%~	44 94%~	69 93%~	2 67%~	59 92%~	16 94%
TOP BOX SCORE	65 80%	1135 74%	15 83%~	22 79%~	17 89%~	11 69%~	24 92%~	~	2 50%~	~	~	~	80%~	8 77%~	39 83%~	61 82%~	1 33%~	53 83%~	12 71%
NOT ANSWERED	3	99	1	1		1	1					1	1	2	3		3		
VALID CASES	81	1540	18	28	19	16	26		4			10	31	47	74	3	64	17	
NUMBER OF RESPONDENTS	84	1639	19	29	19	17	27		4			11	32	49	77	3	67	17	
	100%	100%	100%	100%	100%	100%	100%		100%			100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q3 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	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
Q5 YES	206 73%	3464 67%*	45 79%	57 72%	57 71%	47 70%	77 69%	9 ~ 82%~					25 ~ 86%~	66 70%	124 76%	185 73%~	7 78%~	157 70%	49 82%
NO	77 27%	1672 33%*	12 21%	22 28%	23 29%	20 30%	34 31%	2 ~ 18%~					4 ~ 14%~	28 30%	40 24%	69 27%~	2 22%~	66 30%	11 18%
NOT ANSWERED	11	173	2	5	1	3	2							4	2	6		11	
VALID CASES	283	5136	57	79	80	67	111	11					29	94	164	254	9	223	60
NUMBER OF RESPONDENTS	294	5309	59	84	81	70	113	11					29	98	166	260	9	234	60
	100%	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			
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	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	
Q6 NEVER	2 1%	57 2%	~	2 4%~	~	~	~	~	~	~	~	1 4%~	~	2 2%	2 1%~	~	2 1%~	
SOMETIMES	21 11%	393 12%	5 12%~	6 11%	8 15%	2 5%~	9 13%	~	3 38%~	~	~	~	7 11%	12 11%	19 11%~	1 14%~	19 13%~	2 4%
USUALLY	43 22%	850 26%	8 20%~	14 25%	10 19%	11 25%~	9 13%*	~	3 38%~	~	~	8 33%~	16 25%	22 19%	37 21%~	1 14%~	29 20%~	14 30%
ALWAYS	127 66%	1954 60%	28 68%~	33 60%	35 66%	31 70%~	51 74%	~	2 25%~	~	~	15 63%~	41 64%	78 68%	116 67%~	5 71%~	97 66%~	30 65%
#ALWAYS + USUALLY (NET)	170 88%	2804 86%	36 88%~	47 85%	45 85%	42 95%~	60 87%	~	5 63%~	~	~	23 96%~	57 89%	100 88%	153 88%~	6 86%~	126 86%~	44 96%
TOP BOX SCORE	127 66%	1954 60%	28 68%~	33 60%	35 66%	31 70%~	51 74%	~	2 25%~	~	~	15 63%~	41 64%	78 68%	116 67%~	5 71%~	97 66%~	30 65%
NOT ANSWERED	13	210	4	2	4	3	8	1				1	2	10	11		10	3
VALID CASES	193	3254	41	55	53	44	69	8				24	64	114	174	7	147	46
NUMBER OF RESPONDENTS	206 100%	3464 100%	45 100%	57 100%	57 100%	47 100%	77 100%	9 100%				25 100%	66 100%	124 100%	185 100%	7 100%	157 100%	49 100%

[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	
	FMCA 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 OTH ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q7 NONE	72 26%	1484 30%	9 16%*	16 21%	22 29%	25 37%*	32 28%	2 ~ 18%~	~	~	~	3 ~ 10%~	26 28%	38 23%	66 26%~	2 22%~	60 27%	12 21%
1 TIME	88 32%	1437 29%	22 39%	31 40%	18 24%	17 25%	35 31%	6 ~ 55%~	~	~	~	15 ~ 52%~	21 23%*	60 37%*	80 32%~	2 22%~	74 34%	14 24%
2	60 22%	1045 21%	13 23%	13 17%	18 24%	16 24%	25 22%	2 ~ 18%~	~	~	~	5 ~ 17%~	22 24%	35 21%	55 22%~	2 22%~	47 21%	13 22%
3	29 10%	518 10%	6 11%	10 13%	10 13%	3 4%*	11 10%	1 ~ 9%~	~	~	~	4 ~ 14%~	10 11%	17 10%	26 10%~	1 11%~	20 9%	9 16%
4	17 6%	229 5%	3 5%	5 6%	6 8%	3 4%	6 5%	~	~	~	~	1 ~ 3%~	8 9%	8 5%	16 6%~	~	10 5%	7 12%
5 TO 9	8 3%	232 5%	3 5%	2 3%	1 1%	2 3%	3 3%	~	~	~	~	1 ~ 3%~	3 3%	5 3%	7 3%~	1 11%~	5 2%	3 5%
10 OR MORE TIMES	3 1%	79 2%	~	1 1%	1 1%	1 1%	1 0.9%	~	~	~	~	~	2 2%	1 0.6%	2 0.8%~	1 11%~	3 1%~	~
NOT ANSWERED	17	285	3	6	5	3							6	2	8		15	2
VALID CASES	277	5024	56	78	76	67	113	11				29	92	164	252	9	219	58
NUMBER OF RESPONDENTS	294	5309	59	84	81	70	113	11				29	98	166	260	9	234	60
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER	AS-IAN	NATV ILND	AMER HAW/ IND/ PAC ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q8 #YES	153 76%	2500 72%	35 74%	48 81%	36 67%	34 83%	62 78%	5 ~ 56%	~	~	~	20 ~ 77%	51 80%	95 76%	142 77%	5 83%	113 73%	40 87%
NO	48 24%	975 28%	12 26%	11 19%	18 33%	7 17%	18 23%	4 ~ 44%	~	~	~	6 ~ 23%	13 20%	30 24%	42 23%	1 17%	42 27%	6 13%
NOT ANSWERED	4	65		3		1	1						2	1	2	1	4	
VALID CASES	201	3475	47	59	54	41	80	9				26	64	125	184	6	155	46
NUMBER OF RESPONDENTS	205	3540	47	62	54	42	81	9				26	66	126	186	7	159	46
	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, 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		
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	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	NO CCC	CCC	
Q9 NEVER	7 4%	83 2%	2 4%~	2 3%	2 4%	1 2%~	3 4%	1 ~ 11%~	~	~	~	2 8%~	1 2%	6 5%	5 3%~	2 29%~	7 5%~	
SOMETIMES	14 7%	254 7%	1 2%~	5 8%	7 13%	1 2%~	4 5%	3 ~ 33%~	~	~	~	~	5 8%	9 7%	14 8%~	~	11 7%~	3 7%
USUALLY	36 18%	708 20%	5 11%~	14 24%	8 15%	9 22%~	13 16%	1 ~ 11%~	~	~	~	2 8%~	14 22%	19 15%	30 16%~	2 29%~	24 15%~	12 27%
ALWAYS	143 72%	2421 70%	39 83%~	38 64%	36 68%	30 73%~	60 75%	4 ~ 44%~	~	~	~	22 85%~	44 69%	91 73%	134 73%~	3 43%~	113 73%~	30 67%
#ALWAYS + USUALLY (NET)	179 90%	3129 90%	44 94%~	52 88%	44 83%	39 95%~	73 91%	5 ~ 56%~	~	~	~	24 92%~	58 91%	110 88%	164 90%~	5 71%~	137 88%~	42 93%
TOP BOX SCORE	143 72%	2421 70%	39 83%~	38 64%	36 68%	30 73%~	60 75%	4 ~ 44%~	~	~	~	22 85%~	44 69%	91 73%	134 73%~	3 43%~	113 73%~	30 67%
NOT ANSWERED		5 74		3	1	1	1						2	1	3		4	1
VALID CASES	200	3466	47	59	53	41	80	9				26	64	125	183	7	155	45
NUMBER OF RESPONDENTS	205 100%	3540 100%	47 100%	62 100%	54 100%	42 100%	81 100%	9 100%				26 100%	66 100%	126 100%	186 100%	7 100%	159 100%	46 100%

[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	
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	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	NO CCC	CCC
Q10 YES	61 30%	1023 30%	12 26%	17 28%	15 28%	17 41%	21 26%	4 ~ 44%				7 ~ 27%	22 34%	37 29%	56 30%	3 43%	41 26%	20 43%
NO	141 70%	2434 70%	35 74%	43 72%	39 72%	24 59%	60 74%	5 ~ 56%				19 ~ 73%	43 66%	89 71%	129 70%	4 57%	115 74%	26 57%
NOT ANSWERED	3	83		2		1							1		1		3	
VALID CASES	202	3457	47	60	54	41	81	9				26	65	126	185	7	156	46
NUMBER OF RESPONDENTS	205	3540	47	62	54	42	81	9				26	66	126	186	7	159	46
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]



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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER		
	FMCA 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 & FAIR	GOOD & POOR	NO CCC	CCC
Q11 #YES	55 93%	937 94%	12 100%	17 100%	10 71%	16 100%	19 95%	3 ~ 75%				7 ~ 100%	20 91%	33 94%	50 93%	3 100%	35 90%	20 100%
NO	4 7%	63 6%			4 ~ 29%		1 5%	1 ~ 25%					2 9%	2 6%	4 7%		4 10%	
NOT ANSWERED	2	23			1	1	1							2	2		2	
VALID CASES	59	1000	12	17	14	16	20	4			7	22	35	54	3	39	20	
NUMBER OF RESPONDENTS	61	1023	12	17	15	17	21	4			7	22	37	56	3	41	20	
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA 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 & FAIR	GOOD & POOR	NO CCC	CCC
Q12 #YES	43 74%	709 71%	9 75%~	12 71%~	10 71%~	12 80%~	12 63%~	3 ~ 75%~	~	~	~	7 ~100%~	17 77%~	24 71%~	38 72%~	3 100%~	27 71%~	16 80%
NO	15 26%	290 29%	3 25%~	5 29%~	4 29%~	3 20%~	7 37%~	1 ~ 25%~	~	~	~	~	5 ~ 23%~	10 29%~	15 28%~	~	11 ~ 29%~	4 20%
NOT ANSWERED	3	24			1	2	2							3	3		3	
VALID CASES	58	999	12	17	14	15	19	4				7	22	34	53	3	38	20
NUMBER OF RESPONDENTS	61	1023	12	17	15	17	21	4				7	22	37	56	3	41	20
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 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	NO CCC	CCC	
Q13 #YES	41 71%	780 79%	9 75%~	9 56%~	11 79%~	12 75%~	13 65%~	2 ~ 50%~				6 ~ 86%~	18 82%~	23 66%~	39 72%~	2 67%~	26 68%~	15 75%
NO	17 29%	209 21%	3 25%~	7 44%~	3 21%~	4 25%~	7 35%~	2 ~ 50%~				1 ~ 14%~	4 18%~	12 34%~	15 28%~	1 33%~	12 32%~	5 25%
NOT ANSWERED	3	34		1	1	1	1							2	2		3	
VALID CASES	58	989	12	16	14	16	20	4			7	22	35	54	3	38	20	
NUMBER OF RESPONDENTS	61	1023	12	17	15	17	21	4			7	22	37	56	3	41	20	
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	

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

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN	NATV ILND ##	AMER HAW/ 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	1 0.5%	10 0.3%	~	2%	~	~	~	~	~	~	~	~	1 ~0.8%	1 ~0.5%	~	~	1 2%		
02	1 0.5%	13 0.4%	~	2%	~	~	~	~	~	~	1 4%	~	1 ~0.8%	1 ~14%	1 ~0.6%	~	~		
03		13 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
04	1 0.5%	22 0.6%	~	2%	~	~	~	~	~	~	~	~	~	~	~	~	1 0.6%		
05	1 0.5%	111 3%	~	~	2%	~	~	~	~	~	~	~	1 2%	1 ~0.5%	~	~	1 0.6%		
06	2 1%	105 3%	~	2%	2%	~	~	~	~	~	~	~	2 3%	2 1%	~	~	1 0.6%	1 2%	
07	14 7%	269 8%	~	5%	9%	15% 6	8 10%	~	3 33%	~	~	~	1 4%	2 3%	12 10%*	13 7%	1 14%	9 6%	5 11%
08	48 24%	725 21%	10 22%	9 15%*	15 28%	14 34%	21 26%	~	1 11%	~	~	~	6 23%	11 17%	33 26%	41 22%	2 29%	34 22%	14 30%
09	44 22%	742 21%	10 22%	14 24%	11 20%	9 22%	20 25%	~	2 22%	~	~	~	4 15%	15 23%	27 21%	41 22%	1 14%	34 22%	10 22%
BEST HEALTH CARE POSSIBLE	88 44%	1438 42%	26 57%	29 49%	21 39%	12 29%	32 40%	~	3 33%	~	~	~	14 54%	33 52%	52 41%	85 46%	2 29%	73 47%	15 33%
#8-10 (NET)	180 90%	2905 84%*	46 100%	52 88%	47 87%	35 85%	73 90%	~	6 67%	~	~	~	24 92%	59 92%	112 89%	167 91%	5 71%	141 92%	39 85%

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						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA 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	HIS- IC	NOT VERY GOOD & FAIR	GOOD POOR	NO CCC	CCC
9-10 (NET)	132 66%	2180 63%	36 78%	43 73%	32 59%	21 51%	52 64%	5 ~ 56%				18 ~ 69%	48 75%	79 63%	126 68%	3 43%	107 69%	25 54%
NOT ANSWERED	5	80	1	3		1							2		2		5	
VALID CASES	200	3460	46	59	54	41	81	9				26	64	126	184	7	154	46
NUMBER OF RESPONDENTS	205 100%	3540 100%	47 100%	62 100%	54 100%	42 100%	81 100%	9 100%				26 100%	66 100%	126 100%	186 100%	7 100%	159 100%	46 100%
MEAN	8.91	8.70	9.35	8.85	8.80	8.66	8.94	8.56				8.96	9.13	8.84	9.00	7.71	9.01	8.57
p stat_(*=Sig @ p<=.05)		.024*		~.730	.443		~.793	~	~	~	~	~	~.098	.337		~	~	~

[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						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q15 NEVER	4 2%	57 2%	1 2%	1 2%	2 4%	~	1 1%	1 ~ 11%	~	~	~	1 4%	1 2%	3 2%	3 2%	1 14%	4 3%	
SOMETIMES	14 7%	311 9%	4 9%	2 3%	4 8%	4 10%	5 6%	~	~	~	~	~	8 12%	6 5%	12 7%	2 29%	11 7%	3 7%
USUALLY	67 34%	1019 29%	6 13%	21 36%	20 38%	20 49%	23 29%	7 ~ 78%	~	~	~	8 31%	22 34%	39 31%	58 32%	3 43%	41 27%	26 57%
ALWAYS	115 58%	2073 60%	36 77%	35 59%	27 51%	17 41%	51 64%	1 ~ 11%	~	~	~	17 65%	34 52%	77 62%	111 60%	1 14%	98 64%	17 37%
#ALWAYS + USUALLY (NET)	182 91%	3092 89%	42 89%	56 95%	47 89%	37 90%	74 93%	8 ~ 89%	~	~	~	25 96%	56 86%	116 93%	169 92%	4 57%	139 90%	43 93%
TOP BOX SCORE	115 58%	2073 60%	36 77%	35 59%	27 51%	17 41%	51 64%	1 ~ 11%	~	~	~	17 65%	34 52%	77 62%	111 60%	1 14%	98 64%	17 37%
NOT ANSWERED	5	80		3	1	1	1						1	1	2		5	
VALID CASES	200	3460	47	59	53	41	80	9				26	65	125	184	7	154	46
NUMBER OF RESPONDENTS	205	3540	47	62	54	42	81	9				26	66	126	186	7	159	46
	100%	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		
	FMCA 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
Q16 YES	200 71%	3801 75%	15 27%*	63 81%*	69 86%*	53 77%	78 69%	6 ~ 55%~	~	~	~	~	23 ~ 79%~	71 72%	118 71%	185 71%~	6 67%~	153 69%	47 78%
NO	82 29%	1296 25%	40 73%*	15 19%*	11 14%*	16 23%	35 31%	5 ~ 45%~	~	~	~	~	6 ~ 21%~	27 28%	48 29%	75 29%~	3 33%~	69 31%	13 22%
NOT ANSWERED	12	212	4	6	1	1													12
VALID CASES	282	5097	55	78	80	69	113	11					29	98	166	260	9	222	60
NUMBER OF RESPONDENTS	294	5309	59	84	81	70	113	11					29	98	166	260	9	234	60
	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER	AS-IAN	NATV ILND	AMER HAW/IND/PAC ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q17 YES	22 12%	409 11%	2 13%	7 11%	6 9%	7 15%	7 10%	~	~	~	~	~	2 9%	8 12%	11 10%	18 10%	1 17%	12 8%	10 23%
NO	166 88%	3206 89%	13 87%	54 89%	60 91%	39 85%	63 90%	~100%	6	~	~	~	20 91%	61 88%	97 90%	155 90%	5 83%	133 92%	33 77%
NOT ANSWERED	12	186		2	3	7	8						1	2	10	12		8	4
VALID CASES	188	3615	15	61	66	46	70		6				22	69	108	173	6	145	43
NUMBER OF RESPONDENTS	200	3801	15	63	69	53	78		6				23	71	118	185	6	153	47
	100%	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		
	FMCA 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- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q18 #YES	19 95%	369 92%~100%	2 86%~100%	6 100%~100%	4 100%~100%	7 100%~100%	7 100%~100%	~	~	~	~	~	2 ~100%	7 ~100%	9 90%~100%	15 94%~100%	1 100%~100%	9 90%~100%	10 100%
NO	1 5%	30 8%~	~	1 14%~	~	~	~	~	~	~	~	~	~	1 10%~	1 6%~	~	1 10%~	~	~
NOT ANSWERED	2	10			2									1	1	2		2	
VALID CASES	20	399	2	7	4	7	7						2	7	10	16	1	10	10
NUMBER OF RESPONDENTS	22	409	2	7	6	7	7						2	8	11	18	1	12	10
	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	
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q19 YES	5 2%	214 4%*	1 2%	1 1%	3 4%	1 ~0.9%	~	~	~	~	~	~	3 3%	2 1%	4 2%~	1 11%~	2 0.9%~	3 5%
NO	275 98%	4864 96%*	53 98%	77 99%	77 96%	68 100%~	112 99%	11 ~100%~	~	~	~	28 ~100%~	94 97%	163 99%	254 98%~	8 89%~	218 99%	57 95%
NOT ANSWERED	14	231	5	6	1	2						1	1	1	2		14	
VALID CASES	280	5078	54	78	80	68	113	11				28	97	165	258	9	220	60
NUMBER OF RESPONDENTS	294	5309	59	84	81	70	113	11				29	98	166	260	9	234	60
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN	NATV ILND ##	AMER PAC ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
Q20 NEVER		21 10%	~	~	~		~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES		30 14%	~	~	~		~	~	~	~	~	~	~	~	~	~	~	
USUALLY	3 60%	46 22%~100%	1 ~100%	2 ~67%		~	~	~	~	~	~	~	2 67%	1 50%	2 50%~100%	1 ~100%	3 ~100%	
ALWAYS	2 40%	113 54%	1 ~100%	1 33%		1 ~100%	~	~	~	~	~	~	1 33%	1 50%	2 50%	1 ~100%	2 ~100%	
#ALWAYS + USUALLY (NET)	5 100%	159 76%~100%	1 100%	1 100%	3 100%	1 100%	~	~	~	~	~	~	3 100%	2 100%	4 100%	1 100%	2 100%	3 100%
TOP BOX SCORE	2 40%	113 54%	1 ~100%	1 33%		1 ~100%	~	~	~	~	~	~	1 33%	1 50%	2 50%	1 ~100%	2 ~100%	
NOT ANSWERED		4																
VALID CASES	5	210	1	1	3	1							3	2	4	1	2	3
NUMBER OF RESPONDENTS	5	214	1	1	3	1							3	2	4	1	2	3
	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						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER	AS-IAN	NATV ILND	AMER HAW/ PAC	IND/ ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q21 #YES	5	170	1	1	3		1							3	2	4	1	2	3
	100%	83%	~100%	~100%	~100%	~	~100%	~	~	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%
NO		36																	
		17%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		8																	
VALID CASES	5	206	1	1	3		1							3	2	4	1	2	3
NUMBER OF RESPONDENTS	5	214	1	1	3		1							3	2	4	1	2	3
	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		
	FMCA 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	35 12%	522 10%	9 16%	15 19%	5 6%*	6 9%	14 12%	~	~	~	~	~	10%~	16% 16%	16%	30 12%~	2 22%~	16 7%*	19 32%
NO	247 88%	4555 90%	46 84%	63 81%	75 94%*	63 91%	99 88%	11 ~100%~	~	~	~	~	26 ~ 90%~	82 84%	150 90%	230 88%~	7 78%~	206 93%*	41 68%
NOT ANSWERED	12	232	4	6	1	1												12	
VALID CASES	282	5077	55	78	80	69	113	11				29	98	166	260	9	222	60	
NUMBER OF RESPONDENTS	294	5309	59	84	81	70	113	11				29	98	166	260	9	234	60	
	100%	100%	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 OT1	BANT OT2	AGE				RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	FMCA 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 & FAIR & POOR	GOOD & POOR	NO CCC	CCC	
Q23 NEVER	1 3%	63 13%~	~	~	~	20%~	1 8%~	~	~	~	~	~	1 7%~	1 4%~	~	~	1 6%	
SOMETIMES	4 12%	78 16%~	3 33%~	~	1 20%~	~	~	~	~	~	~	3 19%~	3 11%~	~	~	4 27%~	~	
USUALLY	10 30%	122 24%~	4 44%~	3 21%~	~	3 60%~	5 42%~	~	~	~	~	2 67%~	3 19%~	7 50%~	9 32%~	1 50%~	3 20%~	7 39%
ALWAYS	18 55%	236 47%~	2 22%~	11 79%~	4 80%~	1 20%~	6 50%~	~	~	~	~	1 33%~	10 63%~	6 43%~	15 54%~	1 50%~	8 53%~	10 56%
#ALWAYS + USUALLY (NET)	28 85%	358 72%~	6 67%~	14 100%~	4 80%~	4 80%~	11 92%~	~	~	~	~	3 100%~	13 81%~	13 93%~	24 86%~	2 100%~	11 73%~	17 94%
TOP BOX SCORE	18 55%	236 47%~	2 22%~	11 79%~	4 80%~	1 20%~	6 50%~	~	~	~	~	1 33%~	10 63%~	6 43%~	15 54%~	1 50%~	8 53%~	10 56%
NOT ANSWERED	2	23	~	1	~	1	2	~	~	~	~	~	2	2	~	1	1	
VALID CASES	33	499	9	14	5	5	12	~	~	~	~	3	16	14	28	2	15	18
NUMBER OF RESPONDENTS	35	522	9	15	5	6	14	~	~	~	~	3	16	16	30	2	16	19
	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	
	FMCA 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
Q24 #YES	21 68%	347 69%	5 63%	9 69%	5 100%	2 40%	5 45%	~	~	~	~	1 33%	14 88%	5 38%	18 67%	1 50%	12 86%	9 53%
NO	10 32%	153 31%	3 38%	4 31%	~	3 60%	6 55%	~	~	~	~	2 67%	2 13%	8 62%	9 33%	1 50%	2 14%	8 47%
NOT ANSWERED	4	22	1	2		1	3							3	3		2	2
VALID CASES	31	500	8	13	5	5	11					3	16	13	27	2	14	17
NUMBER OF RESPONDENTS	35	522	9	15	5	6	14					3	16	16	30	2	16	19
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q22 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN	ILND	NATV HAW/ PAC	AMER IND/ ALSK	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC
Q25 YES	41 15%	769 15%	3 5%*	15 19%	10 13%	13 19%	21 19%	~	~	~	~	~	7 24%~	8 8%*	30 18%*	37 14%~	2 22%~	16 7%*	25 42%
NO	240 85%	4303 85%	52 95%*	63 81%	70 88%	55 81%	91 81%	11 ~100%~	~	~	~	~	22 76%~	90 92%*	135 82%*	222 86%~	7 78%~	206 93%*	34 58%
NOT ANSWERED	13	237	4	6	1	2	1								1	1		12	1
VALID CASES	281	5072	55	78	80	68	112	11					29	98	165	259	9	222	59
NUMBER OF RESPONDENTS	294	5309	59	84	81	70	113	11					29	98	166	260	9	234	60
	100%	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					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	FMCA 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 & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q26 NEVER	3 8%	94 13%~	~	1 7%~	1 11%~	1 9%~	2 11%~	~	~	~	~	~	3 11%~	3 9%~	3 20%~		
SOMETIMES	4 11%	122 16%~	~	1 7%~	2 22%~	1 9%~	~	~	~	~	2 29%~	1 13%~	2 7%~	3 9%~	2 13%~	2 9%	
USUALLY	13 35%	178 24%~	2 67%~	5 36%~	2 22%~	4 36%~	7 39%~	~	~	~	3 43%~	3 38%~	10 37%~	12 35%~	1 50%~	5 33%~	8 36%
ALWAYS	17 46%	353 47%~	1 33%~	7 50%~	4 44%~	5 45%~	9 50%~	~	~	~	2 29%~	4 50%~	12 44%~	16 47%~	1 50%~	5 33%~	12 55%
#ALWAYS + USUALLY (NET)	30 81%	531 71%~	3 100%~	12 86%~	6 67%~	9 82%~	16 89%~	~	~	~	5 71%~	7 88%~	22 81%~	28 82%~	2 100%~	10 67%~	20 91%
TOP BOX SCORE	17 46%	353 47%~	1 33%~	7 50%~	4 44%~	5 45%~	9 50%~	~	~	~	2 29%~	4 50%~	12 44%~	16 47%~	1 50%~	5 33%~	12 55%
NOT ANSWERED	4	22		1	1	2	3						3	3	1	3	
VALID CASES	37	747	3	14	9	11	18				7	8	27	34	2	15	22
NUMBER OF RESPONDENTS	41	769	3	15	10	13	21				7	8	30	37	2	16	25
	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER	AS-IAN	NATV ILND	AMER HAW/ PAC	IND/ ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q27 #YES	19 51%	428 57%	1 33%	8 62%	5 56%	5 42%	8 42%	~	~	~	~	~	3 50%	5 63%	12 44%	16 47%	2 100%	8 53%	11 50%
NO	18 49%	317 43%	2 67%	5 38%	4 44%	7 58%	11 58%	~	~	~	~	~	3 50%	3 38%	15 56%	18 53%	~	7 47%	11 50%
NOT ANSWERED	4	24		2	1	1	2						1		3	3		1	3
VALID CASES	37	745	3	13	9	12	19						6	8	27	34	2	15	22
NUMBER OF RESPONDENTS	41	769	3	15	10	13	21						7	8	30	37	2	16	25
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA 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
Q28 YES	57 21%	1124 22%	10 19%	18 23%	15 19%	14 21%	26 23%	1 ~ 9%				6 ~ 21%	18 19%	36 22%	52 20%	3 38%	31 14%*	26 44%
NO	218 79%	3915 78%	43 81%	59 77%	63 81%	53 79%	85 77%	10 ~ 91%				23 ~ 79%	76 81%	128 78%	204 80%	5 63%	185 86%*	33 56%
NOT ANSWERED	19	270	6	7	3	3	2						4	2	4	1	18	1
VALID CASES	275	5039	53	77	78	67	111	11				29	94	164	256	8	216	59
NUMBER OF RESPONDENTS	294	5309	59	84	81	70	113	11				29	98	166	260	9	234	60
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 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	NO CCC	CCC	
Q29 #YES	34 61%	673 62%	8 80%~	10 56%~	11 73%~	5 38%~	12 48%~	1 ~100%~				4 ~ 67%~	12 67%~	20 57%~	31 61%~	2 67%~	19 63%~	15 58%~
NO	22 39%	416 38%	2 20%~	8 44%~	4 27%~	8 62%~	13 52%~					2 ~ 33%~	6 33%~	15 43%~	20 39%~	1 33%~	11 37%~	11 42%~
NOT ANSWERED	1	35				1	1							1	1		1	
VALID CASES	56	1089	10	18	15	13	25	1				6	18	35	51	3	30	26
NUMBER OF RESPONDENTS	57	1124	10	18	15	14	26	1				6	18	36	52	3	31	26
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS- IAN	NATV ILND ##	AMER IND/ PAC ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q30 YES	243 89%	4437 89%	50 94%	71 93%	70 89%	52 80%*	102 93%	8 ~ 73%~					26 ~ 93%~	85 89%	146 90%	230 91%~	5 56%~	191 89%	52 88%
NO	30 11%	550 11%	3 6%	5 7%	9 11%	13 20%*	8 7%	3 ~ 27%~					2 ~ 7%~	11 11%	16 10%	24 9%~	4 44%~	23 11%	7 12%
NOT ANSWERED	21	322	6	8	2	5	3						1	2	4	6		20	1
VALID CASES	273	4987	53	76	79	65	110	11					28	96	162	254	9	214	59
NUMBER OF RESPONDENTS	294	5309	59	84	81	70	113	11					29	98	166	260	9	234	60
	100%	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						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN	NATV ILND PAC ##	AMER ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC
Q31 NONE	52 22%	1154 27%	7 14%	15 22%	17 25%	13 25%	24 24%	~	~	~	~	~	5 19%	21 25%	29 20%	51 23%	2 ~	41 22%	11 22%
1 TIME	98 42%	1496 35%*	22 45%	33 49%	22 32%	21 41%	42 42%	~	5 71%	~	~	~	13 50%	29 35%	64 45%	93 41%	2 50%	78 42%	20 39%
2	46 19%	893 21%	12 24%	12 18%	14 21%	8 16%	17 17%	~	1 14%	~	~	~	6 23%	18 21%	26 18%	43 19%	1 25%	37 20%	9 18%
3	24 10%	389 9%	4 8%	4 6%	12 18%*	4 8%	13 13%	~	1 14%	~	~	~	~	8 10%	16 11%	23 10%	~	17 9%	7 14%
4	10 4%	157 4%	2 4%	2 3%	2 3%	4 8%	2 2%	~	~	~	~	~	2 8%	4 5%	5 4%	10 4%	~	6 3%	4 8%
5 TO 9	3 1%	138 3%*	1 2%	1 1%	~	1 2%	1 1%	~	~	~	~	~	~	2 2%	1 0.7%	3 1%	~	3 2%	~
10 OR MORE TIMES	3 1%	34 0.8%	1 2%	1 1%	1 1%	~	~	~	~	~	~	~	~	2 2%	1 0.7%	2 0.9%	1 25%	3 2%	~
NOT ANSWERED	7	176	1	3	2	1	3	1						1	4	5	1	6	1
VALID CASES	236	4261	49	68	68	51	99	7					26	84	142	225	4	185	51
NUMBER OF RESPONDENTS	243	4437	50	71	70	52	102	8					26	85	146	230	5	191	52
	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	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	
Q31A ALWAYS	1 0.5%	65 2%*	1 2%~	~	~	~	~	~	~	~	~	~	1 2%	~	1 0.6%~	~	1 0.7%~	
USUALLY	3 2%	49 2%	1 2%~	1 2%	1 2%	~	~	~	~	~	~	~	3 5%~	~	2 1%~	~	2 1%~ 1 3%	
SOMETIMES	11 6%	202 7%	4 10%~	4 8%	2 4%	1 3%~	1 1%*	~	~	~	~	~	9 15%*	1 0.9%*	10 6%~	~	10 7%~ 1 3%	
NEVER	168 92%	2765 90%	36 86%~	48 91%	48 94%	36 97%~	74 99%*	7 ~100%~	~	~	~	21 ~100%~	49 79%*	112 99%*	160 92%~	4 100%~	130 91%~ 38 95%	
#NEVER + SOMETIMES (NET)	179 98%	2967 96%	40 95%~	52 98%	50 98%	37 100%~	75 100%~	7 ~100%~	~	~	~	21 ~100%~	58 94%~	113 100%~	170 98%~	4 100%~	140 98%~ 39 98%	
TOP BOX SCORE	168 92%	2765 90%	36 86%~	48 91%	48 94%	36 97%~	74 99%*	7 ~100%~	~	~	~	21 ~100%~	49 79%*	112 99%*	160 92%~	4 100%~	130 91%~ 38 95%	
NOT ANSWERED	1	26				1							1		1		1	
VALID CASES	183	3081	42	53	51	37	75	7				21	62	113	173	4	143	40
NUMBER OF RESPONDENTS	184 100%	3107 100%	42 100%	53 100%	51 100%	38 100%	75 100%	7 100%				21 100%	63 100%	113 100%	174 100%	4 100%	144 100%	40 100%

[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				
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	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	
Q32 NEVER	2 1%	64 2%	1 2%	1 2%	~	~	~	1 ~ 14%	~	~	~	1 5%	~	2 2%	1 0.6%	1 25%	~	1 0.7%	1 3%
SOMETIMES	6 3%	100 3%	1 2%	2 4%	3 6%	~	1 1%	~	~	~	~	~	4 6%	2 2%	5 3%	~	5 3%	1 3%	
USUALLY	22 12%	428 14%	8 20%	1 2%*	6 12%	7 18%	5 7%*	2 ~ 29%	~	~	~	2 10%	10 16%	11 10%	21 12%	~	19 13%	3 8%	
ALWAYS	153 84%	2486 81%	31 76%	49 92%*	42 82%	31 82%	69 92%*	4 ~ 57%	~	~	~	18 86%	49 78%	98 87%	147 84%	3 75%	118 83%	35 88%	
#ALWAYS + USUALLY (NET)	175 96%	2914 95%	39 95%	50 94%	48 94%	38 100%	74 99%	6 ~ 86%	~	~	~	20 95%	59 94%	109 96%	168 97%	3 75%	137 96%	38 95%	
TOP BOX SCORE	153 84%	2486 81%	31 76%	49 92%*	42 82%	31 82%	69 92%*	4 ~ 57%	~	~	~	18 86%	49 78%	98 87%	147 84%	3 75%	118 83%	35 88%	
NOT ANSWERED		1 29	1															1	
VALID CASES	183	3078	41	53	51	38	75	7				21	63	113	174	4	143	40	
NUMBER OF RESPONDENTS	184 100%	3107 100%	42 100%	53 100%	51 100%	38 100%	75 100%	7 100%				21 100%	63 100%	113 100%	174 100%	4 100%	144 100%	40 100%	

[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	BANT	AGE				RACE					ETHNIC-	HEALTH		CCC		
	OT1	OT2	<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
Q33	FMCA	OHP															
NEVER	2 1%	29 0.9%	~	4%	~	~	~	~	~	~	5%	~	2%	0.6%	25%	0.7%	3%
SOMETIMES	4 2%	120 4%	2%	2%	4%	~	~	14%	~	~	~	5%	0.9%	2%	~	1%	5%
USUALLY	29 16%	422 14%	20%	11%	12%	24%	13%	~	14%	~	~	19%	17%	15%	16%	~	16%
ALWAYS	148 81%	2505 81%	78%	83%	84%	76%	87%	~	71%	~	~	76%	78%	82%	82%	75%	82%
#ALWAYS + USUALLY (NET)	177 97%	2927 95%	98%	94%	96%	100%	100%	~	86%	~	~	95%	95%	97%	98%	75%	98%
TOP BOX SCORE	148 81%	2505 81%	78%	83%	84%	76%	87%	~	71%	~	~	76%	78%	82%	82%	75%	82%
NOT ANSWERED	1	31	1														1
VALID CASES	183	3076	41	53	51	38	75	7			21	63	113	174	4	143	40
NUMBER OF RESPONDENTS	184	3107	42	53	51	38	75	7			21	63	113	174	4	144	40
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN	NATV ILND PAC ##	AMER ALSK #	OTHR	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC	
Q34 NEVER	1 0.5%	30 1%	~	2%	~	~	~	~	~	~	~	5%	~	0.9%	~	25%	~	0.7%	~
SOMETIMES	5 3%	85 3%	2%~	2%	2%	5%~	1%	~	14%~	~	~	5%	2%	4%	3%~	~	2%~	5%	~
USUALLY	21 11%	368 12%	12%~	8%	16%	11%~	5%	~	14%~	~	~	19%~	13%	11%	11%~	~	12%~	10%	~
ALWAYS	156 85%	2589 84%	85%~	89%	82%	84%~	69% 92%*	~	71%~	~	~	71%~	86%	85%	86%~	75%~	85%~	85%	~
#ALWAYS + USUALLY (NET)	177 97%	2957 96%	98%~	96%	98%	95%~	74% 99%	~	86%~	~	~	90%~	98%	96%	97%~	75%~	97%~	95%	~
TOP BOX SCORE	156 85%	2589 84%	85%~	89%	82%	84%~	69% 92%*	~	71%~	~	~	71%~	86%	85%	86%~	75%~	85%~	85%	~
NOT ANSWERED	1	35	1															1	
VALID CASES	183	3072	41	53	51	38	75	7				21	63	113	174	4	143	40	
NUMBER OF RESPONDENTS	184	3107	42	53	51	38	75	7				21	63	113	174	4	144	40	
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	FMCA 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	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q35 YES	118 66%	2086 68%	5 13%	35 70%	44 86%*	34 89%~	49 65%	3 ~ 43%~	~	~	~	~	10 ~ 50%~	44 72%	70 63%	113 66%~	3 75%~	91 66%~	27 68%
NO	60 34%	964 32%	34 87%~	15 30%	7 14%*	4 11%~	26 35%	4 ~ 57%~	~	~	~	~	10 ~ 50%~	17 28%	42 38%	58 34%~	1 25%~	47 34%~	13 33%
NOT ANSWERED	6	57	3	3									1	2	1	3		6	
VALID CASES	178	3050	39	50	51	38	75	7					20	61	112	171	4	138	40
NUMBER OF RESPONDENTS	184 100%	3107 100%	42 100%	53 100%	51 100%	38 100%	75 100%	7 100%					21 100%	63 100%	113 100%	174 100%	4 100%	144 100%	40 100%

[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			
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	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
Q36 NEVER	1 0.9%	25 1%	~	1 3%	~	~	~	~	~	~	~	~	1 2%	~	1 0.9%	~	1 1%	~
SOMETIMES	5 4%	112 5%	~	2 6%	2 5%	1 3%	~	~	~	~	~	~	3 7%	2 3%	5 4%	~	2 2%	3 11%
USUALLY	24 21%	405 20%	1 25%	6 17%	10 23%	7 21%	8 17%	~	~	~	~	3 30%	9 20%	12 17%	22 20%	1 33%	16 18%	8 30%
ALWAYS	87 74%	1518 74%	3 75%	26 74%	32 73%	26 76%	40 83%	3 ~100%	~	~	~	7 70%	31 70%	55 80%	84 75%	2 67%	71 79%	16 59%
#ALWAYS + USUALLY (NET)	111 95%	1923 93%	4 100%	32 91%	42 95%	33 97%	48 100%	3 ~100%	~	~	~	10 ~100%	40 91%	67 97%	106 95%	3 100%	87 97%	24 89%
TOP BOX SCORE	87 74%	1518 74%	3 75%	26 74%	32 73%	26 76%	40 83%	3 ~100%	~	~	~	7 70%	31 70%	55 80%	84 75%	2 67%	71 79%	16 59%
NOT ANSWERED	1	26	1				1						1		1		1	
VALID CASES	117	2060	4	35	44	34	48	3			10	44	69	112	3	90	27	
NUMBER OF RESPONDENTS	118 100%	2086 100%	5 100%	35 100%	44 100%	34 100%	49 100%	3 100%			10 100%	44 100%	70 100%	113 100%	3 100%	91 100%	27 100%	

[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	BANT	AGE				RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	OT1	OT2	<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 & FAIR POOR	NO CCC	CCC		
Q37 NEVER	5 3%	72 2%	~	4%	2%	5%	~	~	14%	~	~	~	10%	2%	4%	2%	50%	3%	3%
SOMETIMES	13 7%	238 8%	5%	4%	8%	13%	4%	~	29%	~	~	~	13%	4%	6%	25%	7%	8%	
USUALLY	45 25%	692 23%	39%	18%	26%	18%	16%*	~	29%	~	~	~	29%	33%	20%*	25%	25%	26%	23%
ALWAYS	117 65%	2035 67%	56%	75%	64%	63%	80%*	~	29%	~	~	~	62%	52%*	72%*	67%	~	64%	68%
#ALWAYS + USUALLY (NET)	162 90%	2727 90%	95%	92%	90%	82%	96%*	~	57%	~	~	~	90%	86%	92%	92%	25%	90%	90%
TOP BOX SCORE	117 65%	2035 67%	56%	75%	64%	63%	80%*	~	29%	~	~	~	62%	52%*	72%*	67%	~	64%	68%
NOT ANSWERED	4	70	1	2	1									1	1			4	
VALID CASES	180	3037	41	51	50	38	75	7				21	63	112	173	4	140	40	
NUMBER OF RESPONDENTS	184	3107	42	53	51	38	75	7				21	63	113	174	4	144	40	
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER	AS-IAN	NATV ILND	AMER HAW/ IND/ PAC ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q38 #YES	164 91%	2662 87%	40 98%~	46 90%	43 86%	35 92%~	69 92%	6 ~ 86%~	~	~	~	20 ~ 95%~	58 92%	101 90%	161 93%~	4 ~	126 90%~	38 95%
NO	16 9%	384 13%	1 2%~	5 10%	7 14%	3 8%~	6 8%	1 ~ 14%~	~	~	~	1 ~ 5%~	5 8%	11 10%	12 7%~	4 100%~	14 10%~	2 5%
NOT ANSWERED	4	61	1	2	1								1	1			4	
VALID CASES	180	3046	41	51	50	38	75	7				21	63	112	173	4	140	40
NUMBER OF RESPONDENTS	184	3107	42	53	51	38	75	7				21	63	113	174	4	144	40
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER HAW/ IND/ PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q39 YES	72 40%	1240 41%	16 39%	21 42%	18 36%	17 46%	33 45%	1 ~ 14%				7 ~ 33%	25 41%	46 41%	67 39%	4 100%	48 35%	24 60%
NO	106 60%	1789 59%	25 61%	29 58%	32 64%	20 54%	41 55%	6 ~ 86%				14 ~ 67%	36 59%	66 59%	104 61%		90 65%	16 40%
NOT ANSWERED	6	78	1	3	1	1	1						2	1	3		6	
VALID CASES	178	3029	41	50	50	37	74	7				21	61	112	171	4	138	40
NUMBER OF RESPONDENTS	184	3107	42	53	51	38	75	7				21	63	113	174	4	144	40
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	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
Q40 NEVER	3 4%	81 7%	1 7%	2 10%	~	~	1 3%	~	~	~	~	1 14%	1 4%	2 4%	2 3%	1 25%	3 6%	
SOMETIMES	4 6%	139 12%	1 7%	~	1 6%	2 12%	1 3%	1 100%	~	~	~	~	2 8%	2 4%	3 5%	1 25%	4 9%	
USUALLY	24 34%	342 28%	2 13%	7 33%	5 28%	10 59%	12 38%	~	~	~	~	1 14%	8 32%	15 33%	22 33%	1 25%	13 28%	11 46%
ALWAYS	40 56%	645 53%	11 73%	12 57%	12 67%	5 29%	18 56%	~	~	~	~	5 71%	14 56%	26 58%	39 59%	1 25%	27 57%	13 54%
#ALWAYS + USUALLY (NET)	64 90%	987 82%	13 87%	19 90%	17 94%	15 88%	30 94%	~	~	~	~	6 86%	22 88%	41 91%	61 92%	2 50%	40 85%	24 100%
TOP BOX SCORE	40 56%	645 53%	11 73%	12 57%	12 67%	5 29%	18 56%	~	~	~	~	5 71%	14 56%	26 58%	39 59%	1 25%	27 57%	13 54%
NOT ANSWERED	1	33	1				1						1	1			1	
VALID CASES	71	1207	15	21	18	17	32	1				7	25	45	66	4	47	24
NUMBER OF RESPONDENTS	72	1240	16	21	18	17	33	1				7	25	46	67	4	48	24
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

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



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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN	NATV ILND ##	AMER HAW/ IND/ PAC 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 0.4%	6 0.1%	~	2%	~	~	~	~	~	~	~	~	4%	~	1 ~0.7%	1 ~25%	1 ~0.5%	1	
01	1 0.4%	4 0.1%	~	2%	~	~	~	~	~	~	~	~	~	~	1 ~0.7%	1 0.4%	~	1 ~2%	
02		12 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
03		23 0.5%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
04		19 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
05	3 1%	105 2%	1 2%	1 2%	~	1 2%	1 1%	~	1 ~14%	~	~	~	~	~	1 1%	2 1%	3 1%	1 ~0.5%	2 4%
06	5 2%	97 2%	~	~	4%	4%	2 2%	~	1 ~14%	~	~	~	~	~	1 1%	4 3%	5 2%	~	5 3%
07	10 4%	261 6%	2 4%	4 6%	1 1%	3 6%	4 4%	~	~	~	~	~	1 4%	4 5%	6 4%	10 4%	~	8 4%	2 4%
08	29 12%	672 16%	5 10%	6 9%	10 14%	8 15%	13 13%	~	1 ~14%	~	~	~	3 ~12%	8 10%	18 13%	25 11%	1 25%	25 ~14%	4 8%
09	51 22%	839 20%	11 22%	18 27%	12 17%	10 19%	20 20%	~	1 ~14%	~	~	~	6 ~23%	22 26%	27 19%	51 22%	~	38 21%	13 25%
BEST PERSONAL DOCTOR POSSIBLE	136 58%	2208 52%	30 61%	35 53%	43 62%	28 54%	61 60%	~	3 ~43%	~	~	~	15 ~58%	48 57%	85 59%	133 58%	2 50%	107 58%	29 57%
#8-10 (NET)	216 92%	3719 88%	46 94%	59 89%	65 94%	46 88%	94 93%	~	5 ~71%	~	~	~	24 ~92%	78 93%	130 90%	209 92%	3 75%	170 92%	46 90%

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	
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER WHTE ##	AS- IAN ##	NATV ILND ##	AMER HAW/ IND/ PAC ALSK #	OTHR ##	MUL- TI TI	HIS- PAN- IC	HIS- PAN- IC	NOT VERY GOOD & FAIR & POOR	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
9-10 (NET)	187 79%	3047 72%*	41 84%~	53 80%	55 80%	38 73%	81 80%	4 ~ 57%~				21 ~ 81%~	70 83%	112 78%	184 81%~	2 50%~	145 78%	42 82%
NOT ANSWERED	7	191	1	5	1		1	1					1	2	2	1	6	1
VALID CASES	236	4246	49	66	69	52	101	7			26	84	144	228	4	185	51	
NUMBER OF RESPONDENTS	243	4437	50	71	70	52	102	8			26	85	146	230	5	191	52	
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	
MEAN	9.18	8.98	9.35	9.00	9.32	9.08	9.30	8.29			9.04	9.30	9.13	9.23	7.00	9.21	9.10	
p stat_(*=Sig @ p<=.05)		.026*	~.298	.261	.508	.239	~	~	~	~	~	~.284	.381	~	~	~.668		

[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	
	FMCA 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
Q42 YES	58 25%	1096 26%	4 8%	20 30%	17 25%	17 33%	35 35%*	2 ~ 29%	~	~	~ 24%	6 12%*	10 32%*	46 24%	55 50%	2 ~	16 9%*	42 82%
NO	176 75%	3160 74%	44 92%	46 70%	51 75%	35 67%	66 65%*	5 ~ 71%	~	~	~ 76%	19 88%*	73 68%*	97 76%	171 50%	2 ~	167 91%*	9 18%
NOT ANSWERED	9	181	2	5	2		1	1			1	2	3	4	1	8	1	
VALID CASES	234	4256	48	66	68	52	101	7			25	83	143	226	4	183	51	
NUMBER OF RESPONDENTS	243 100%	4437 100%	50 100%	71 100%	70 100%	52 100%	102 100%	8 100%			26 100%	85 100%	146 100%	230 100%	5 100%	191 100%	52 100%	

[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	
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER	AS-IAN	NATV ILND	AMER HAW/ IND/ PAC ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q43 #YES	52 93%	955 90%	3 100%~	17 85%~	16 94%~	16 100%~	34 100%~	1 ~100%~				5 ~83%~	8 80%~	42 95%~	51 96%~	2	12 86%~	40 95%
NO	4 7%	109 10%		3 ~15%~	1 6%~							1 ~17%~	2 20%~	2 5%~	2 4%~	2 100%~	2 14%~	2 5%
NOT ANSWERED	2	32	1			1	1	1						2	2		2	
VALID CASES	56	1064	3	20	17	16	34	1			6	10	44	53	2	14	42	
NUMBER OF RESPONDENTS	58	1096	4	20	17	17	35	2			6	10	46	55	2	16	42	
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	FMCA 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	
Q44 #YES	49 86%	906 85%	3 100%~	17 85%~	15 88%~	14 82%~	32 91%~	1 ~100%~					5 ~ 83%~	7 70%~	40 89%~	48 89%~	2	12 80%~	37 88%
NO	8 14%	155 15%		3 ~ 15%~	2 12%~	3 18%~	3 9%~						1 ~ 17%~	3 30%~	5 11%~	6 11%~	2 100%~	3 20%~	5 12%
NOT ANSWERED	1	35	1					1						1	1			1	
VALID CASES	57	1061	3	20	17	17	35	1				6	10	45	54	2	15	42	
NUMBER OF RESPONDENTS	58	1096	4	20	17	17	35	2				6	10	46	55	2	16	42	
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q30 = YES AND Q42 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 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 & POOR	NO CCC	CCC
Q45 YES	46 17%	856 17%	7 13%	14 19%	13 16%	12 18%	18 16%	~	~	~	~	5 ~ 17%	20 21%	24 15%	41 16%	3 33%	26 12%*	20 33%
NO	226 83%	4125 83%	45 87%	59 81%	66 84%	56 82%	95 84%	10 ~100%	~	~	~	24 ~ 83%	76 79%	141 85%	216 84%	6 67%	186 88%*	40 67%
NOT ANSWERED	22	328	7	11	2	2		1					2	1	3		22	
VALID CASES	272	4981	52	73	79	68	113	10				29	96	165	257	9	212	60
NUMBER OF RESPONDENTS	294 100%	5309 100%	59 100%	84 100%	81 100%	70 100%	113 100%	11 100%				29 100%	98 100%	166 100%	260 100%	9 100%	234 100%	60 100%

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				
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	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	
Q46 NEVER	2 4%	59 7%	~	1 8%	~	1 8%	1 6%	~	~	~	~	~	20%	~	2 8%	1 3%	1 33%	2 8%	
SOMETIMES	7 16%	127 15%	1 14%	2 15%	2 15%	2 17%	3 17%	~	~	~	~	~	20%	11%	4 17%	6 15%	~	5 20%	2 10%
USUALLY	18 40%	239 29%	3 43%	4 31%	4 31%	7 58%	7 39%	~	~	~	~	~	20%	9 47%	9 38%	16 40%	1 33%	9 36%	9 45%
ALWAYS	18 40%	410 49%	3 43%	6 46%	7 54%	2 17%	7 39%	~	~	~	~	~	40%	8 42%	9 38%	17 43%	1 33%	9 36%	9 45%
#ALWAYS + USUALLY (NET)	36 80%	649 78%	6 86%	10 77%	11 85%	9 75%	14 78%	~	~	~	~	~	60%	17 89%	18 75%	33 83%	2 67%	18 72%	18 90%
TOP BOX SCORE	18 40%	410 49%	3 43%	6 46%	7 54%	2 17%	7 39%	~	~	~	~	~	40%	8 42%	9 38%	17 43%	1 33%	9 36%	9 45%
NOT ANSWERED	1	21		1										1		1		1	
VALID CASES	45	835	7	13	13	12	18						5	19	24	40	3	25	20
NUMBER OF RESPONDENTS	46	856	7	14	13	12	18						5	20	24	41	3	26	20
	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		
	FMCA 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 & POOR	FAIR & POOR	NO CCC	CCC
Q47 NONE	2 4%	48 6%		2 ~ 14%								1 ~ 20%	1 5%	1 4%	1 2%	1 33%	2 8%	
1 SPECIALIST	28 61%	509 61%	4 57%	6 43%	9 69%	9 75%	10 56%					2 ~ 40%	14 70%	13 54%	26 63%	1 33%	17 65%	11 55%
2	9 20%	170 20%	2 29%	1 7%	3 23%	3 25%	6 33%					1 ~ 20%	1 5%	8 33%	9 22%		5 19%	4 20%
3	6 13%	53 6%	1 14%	4 29%	1 8%		2 11%					1 ~ 20%	3 15%	2 8%	4 10%	1 33%	2 8%	4 20%
4	1 2%	27 3%		1 7%									1 5%		1 2%			1 5%
5 OR MORE SPECIALISTS		25 3%																
NOT ANSWERED		24																
VALID CASES	46	832	7	14	13	12	18					5	20	24	41	3	26	20
NUMBER OF RESPONDENTS	46	856	7	14	13	12	18					5	20	24	41	3	26	20
	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		
	FMCA 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	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	4 9%	20 3%~	1 14%~	~	1 8%~	2 17%~	1 6%~	~	~	~	~	1 25%~	1 5%~	2 9%~	3 8%~	~	3 13%~	1 5%
06	1 2%	24 3%~	~	1 8%~	~	~	1 6%~	~	~	~	~	~	~	1 4%~	1 3%~	~	~	1 5%
07	2 5%	51 7%~	~	~	1 8%~	1 8%~	1 6%~	~	~	~	~	~	1 5%~	1 4%~	2 5%~	~	2 8%~	~
08	7 16%	135 17%~	2 29%~	1 8%~	2 15%~	2 17%~	5 28%~	~	~	~	~	~	2 11%~	5 22%~	7 18%~	~	5 21%~	2 10%
09	15 34%	171 22%~	3 43%~	4 33%~	4 31%~	4 33%~	4 22%~	~	~	~	~	3 75%~	7 37%~	7 30%~	14 35%~	~	8 33%~	7 35%
BEST SPECIALIST POSSIBLE	15 34%	353 45%~	1 14%~	6 50%~	5 38%~	3 25%~	6 33%~	~	~	~	~	~	8 42%~	7 30%~	13 33%~	2 100%~	6 25%~	9 45%

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			
	FMCA 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	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
#8-10 (NET)	37 84%	659 85%~	6 86%~	11 92%~	11 85%~	9 75%~	15 83%~	~	~	~	~	3 75%~	17 89%~	19 83%~	34 85%~	2 100%~	19 79%~	18 90%
9-10 (NET)	30 68%	524 67%~	4 57%~	10 83%~	9 69%~	7 58%~	10 56%~	~	~	~	~	3 75%~	15 79%~	14 61%~	27 68%~	2 100%~	14 58%~	16 80%
NOT ANSWERED		5																
VALID CASES	44	779	7	12	13	12	18				4	19	23	40	2	24	20	
NUMBER OF RESPONDENTS	44	784	7	12	13	12	18				4	19	23	40	2	24	20	
	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	
MEAN	8.66	8.73	8.29	9.17	8.77	8.25	8.56				8.00	9.00	8.52	8.68	10.0	8.38	9.00	
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		
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE ##	BLCK OR AFR- AMER ##	IAN AS- IAN ##	NATV HAW/ PAC ##	AMER IND/ ALSK NATV #	MUL- OTHR ##	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q49 YES	71 26%	1241 25%	14 27%	21 29%	16 21%	20 29%	33 29%	~	~	~	~	~	9 ~ 31%	23 24%	45 27%	67 26%	3 33%	53 25%	18 31%
NO	198 74%	3699 75%	37 73%	52 71%	60 79%	49 71%	79 71%	~100%	~	~	~	~	20 ~ 69%	71 76%	120 73%	189 74%	6 67%	157 75%	41 69%
NOT ANSWERED	25	369	8	11	5	1	1							4	1	4		24	1
VALID CASES	269	4940	51	73	76	69	112	11					29	94	165	256	9	210	59
NUMBER OF RESPONDENTS	294	5309	59	84	81	70	113	11					29	98	166	260	9	234	60
	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	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	NO CCC	CCC	
Q50 NEVER	1 1%	36 3%	1 7%~	~	~	~	~	~	~	~	~	1 11%~	1 2%~	1 1%~	~	1 2%~	~	
SOMETIMES	10 14%	228 19%	2 14%~	1 5%~	2 13%~	5 25%~	6 18%~	~	~	~	~	1 11%~	3 13%~	7 16%~	10 15%~	~	6 11%~	4 22%
USUALLY	24 34%	350 29%	6 43%~	4 19%~	5 31%~	9 45%~	12 36%~	~	~	~	~	3 33%~	8 35%~	15 33%~	23 34%~	1 33%~	16 30%~	8 44%
ALWAYS	36 51%	598 49%	5 36%~	16 76%~	9 56%~	6 30%~	15 45%~	~	~	~	~	4 44%~	12 52%~	22 49%~	33 49%~	2 67%~	30 57%~	6 33%
#ALWAYS + USUALLY (NET)	60 85%	948 78%	11 79%~	20 95%~	14 88%~	15 75%~	27 82%~	~	~	~	~	7 78%~	20 87%~	37 82%~	56 84%~	3 100%~	46 87%~	14 78%
TOP BOX SCORE	36 51%	598 49%	5 36%~	16 76%~	9 56%~	6 30%~	15 45%~	~	~	~	~	4 44%~	12 52%~	22 49%~	33 49%~	2 67%~	30 57%~	6 33%
NOT ANSWERED		29																
VALID CASES	71	1212	14	21	16	20	33					9	23	45	67	3	53	18
NUMBER OF RESPONDENTS	71 100%	1241 100%	14 100%	21 100%	16 100%	20 100%	33 100%					9 100%	23 100%	45 100%	67 100%	3 100%	53 100%	18 100%

[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			
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	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	NO CCC	CCC	
Q51 NEVER	1 1%	17 1%	1 7%~	~	~	~	1 3%~	~	~	~	~	~	~	1 2%~	1 2%~	~	1 2%~	
SOMETIMES	6 9%	87 7%	3 21%~	1 5%~	2 13%~	~	3 9%~	~	~	~	~	1 11%~	2 9%~	4 9%~	6 9%~	~	5 9%~	1 6%
USUALLY	13 19%	274 23%	3 21%~	2 10%~	3 19%~	5 26%~	4 13%~	~	~	~	~	2 22%~	6 26%~	7 16%~	13 20%~	~	8 15%~	5 29%
ALWAYS	50 71%	831 69%	7 50%~	18 86%~	11 69%~	14 74%~	24 75%~	~	~	~	~	6 67%~	15 65%~	32 73%~	46 70%~	3 100%~	39 74%~	11 65%
#ALWAYS + USUALLY (NET)	63 90%	1105 91%	10 71%~	20 95%~	14 88%~	19 100%~	28 88%~	~	~	~	~	8 89%~	21 91%~	39 89%~	59 89%~	3 100%~	47 89%~	16 94%
TOP BOX SCORE	50 71%	831 69%	7 50%~	18 86%~	11 69%~	14 74%~	24 75%~	~	~	~	~	6 67%~	15 65%~	32 73%~	46 70%~	3 100%~	39 74%~	11 65%
NOT ANSWERED	1	32				1	1							1	1			1
VALID CASES	70	1209	14	21	16	19	32					9	23	44	66	3	53	17
NUMBER OF RESPONDENTS	71 100%	1241 100%	14 100%	21 100%	16 100%	20 100%	33 100%					9 100%	23 100%	45 100%	67 100%	3 100%	53 100%	18 100%

[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		
	FMCA 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	
Q52 YES	93 35%	1806 37%	19 39%	27 38%	25 32%	22 33%	33 29%	~	~	~	~	~	13 45%	40 44%*	50 30%*	89 35%	3 33%	73 36%	20 34%
NO	171 65%	3092 63%	30 61%	44 62%	53 68%	44 67%	79 71%	~100%	11 ~	~	~	16 55%	51 56%*	115 70%*	163 65%	6 67%	132 64%	39 66%	
NOT ANSWERED	30	411	10	13	3	4	1						7	1	8		29	1	
VALID CASES	264	4898	49	71	78	66	112	11				29	91	165	252	9	205	59	
NUMBER OF RESPONDENTS	294 100%	5309 100%	59 100%	84 100%	81 100%	70 100%	113 100%	11 100%				29 100%	98 100%	166 100%	260 100%	9 100%	234 100%	60 100%	

FQ53 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	
	FMCA 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 IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	NO CCC	CCC
FQ53 NEVER	2 0.8%	83 2%	~	1%	~	2%	0.9%	~	~	~	~	~	1% 0.6%	0.8%	~	~	1%
SOMETIMES	21 8%	357 7%	6%~	3 4%	7 9%	8 12%	7%	~	~	~	~	7%~	10 11% 10 6%	18 7%~	2 22%~	13 6%	8 14%
USUALLY	30 12%	646 13%	13%~	6 13%	9 9%	7 12%	8 10%	~	~	~	~	10%~	3 13 16 10%	30 12%~	~	24 12%	6 10%
ALWAYS	207 80%	3743 78%	81%~	39 81%	57 81%	63 82%	48 74%	90 82%	11 ~100%	~	~	24 83%~	65 73% 136 83%	198 80%~	7 78%~	163 81%	44 76%
#ALWAYS + USUALLY (NET)	237 91%	4389 91%	94%~	45 94%	66 94%	70 91%	56 86%	101 92%	11 ~100%	~	~	27 93%~	78 88% 152 93%	228 92%~	7 78%~	187 93%	50 86%
TOP BOX SCORE	207 80%	3743 78%	81%~	39 81%	57 81%	63 82%	48 74%	90 82%	11 ~100%	~	~	24 83%~	65 73% 136 83%	198 80%~	7 78%~	163 81%	44 76%
NOT ANSWERED	4	69	1	1	1	1	2					2	2	4		3	1
VALID CASES	260	4829	48	70	77	65	110	11			29	89	163	248	9	202	58
NUMBER OF RESPONDENTS	264	4898	49	71	78	66	112	11			29	91	165	252	9	205	59
	100%	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			
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN	NATV ILND ##	AMER HAW/ IND/ PAC ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q54 WORST HEALTH PLAN POSSIBLE		17 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
01		14 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
02		21 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
03		35 0.7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
04	2 0.8%	62 1%	~	1%	~	2%	0.9%	~	~	~	~	~	~	1%	2	2	~	3%
05	10 4%	266 5%	~	3%	2%	5%	4%	~	~	~	~	7%	2%	2	8	10	6	4
06	11 4%	237 5%	2%	5%	3%	2%	7%	~	1%	~	~	~	2%	2	9	11	5	6
07	18 7%	471 10%	4%	6%	8%	2%	8%	~	~	~	~	3%	6%	1	6	12	14	4
08	52 20%	939 19%	19%	10%	12%	20%	27%	~	1%	~	~	~	17%	5	16	35	49	3
09	52 20%	844 17%	15%	8%	12%	18%	21%	~	3%	~	~	~	21%	6	19	31	46	4
BEST HEALTH PLAN POSSIBLE	118 45%	1982 41%	60%*	31%	35%	33%	19%	40%	6%	~	~	~	52%	15	50	63	116	2
#8-10 (NET)	222 84%	3765 77%*	94%*	49%	57%	63%	53%	88%	10%	~	~	~	90%	26	85	129	211	9

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						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER	AS-IAN	NATV ILND	AMER HAW/ PAC	IND/ ALSK	OTHR #	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
9-10 (NET)	170 65%	2826 58%*	39 75%	47 65%	51 67%	33 52%*	61 56%*	9 ~ 82%~					21 ~ 72%~	69 73%*	94 59%*	162 64%~	6 67%~	143 70%*	27 47%
NOT ANSWERED	31	421	7	12	5	7	5							3	6	8		29	2
VALID CASES	263	4888	52	72	76	63	108	11					29	95	160	252	9	205	58
NUMBER OF RESPONDENTS	294	5309	59	84	81	70	113	11					29	98	166	260	9	234	60
	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%
MEAN	8.80	8.47	9.27	8.74	8.84	8.43	8.58	9.18					9.00	9.08	8.59	8.79	8.89	8.99	8.14
p stat_(*=Sig @ p<=.05)		.000*	.001*	.666	.744	.028*	.042*	~	~	~	~	~	~	.015*	.004*	~	~	~	.000*

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	
	FMCA 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
Q55																		
YES	118 44%	1910 39%	24 47%	30 42%	39 51%	25 37%	44 39%	6 ~ 55%	~	~	~	13 ~ 45%	42 44%	73 45%	110 43%	6 67%	80 38%*	38 63%
NO	150 56%	3030 61%	27 53%	42 58%	38 49%	43 63%	68 61%	5 ~ 45%	~	~	~	16 ~ 55%	54 56%	91 55%	146 57%	3 33%	128 62%*	22 37%
NOT ANSWERED	26	369	8	12	4	2	1						2	2	4		26	
VALID CASES	268	4940	51	72	77	68	112	11				29	96	164	256	9	208	60
NUMBER OF RESPONDENTS	294 100%	5309 100%	59 100%	84 100%	81 100%	70 100%	113 100%	11 100%				29 100%	98 100%	166 100%	260 100%	9 100%	234 100%	60 100%

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			
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	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	
Q56 NEVER		42 2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	11 9%	156 8%	2 9%	3 10%	3 8%	3 12%	3 7%	~	~	~	~	1 8%	7 17%	4 5%	10 9%	1 17%	5 6%	6 16%
USUALLY	22 19%	483 26%	2 9%	7 24%	8 21%	5 20%	4 9%	2 33%	~	~	~	2 15%	10 24%	12 16%	20 18%	1 17%	13 17%	9 24%
ALWAYS	83 72%	1206 64%	19 83%	19 66%	28 72%	17 68%	36 84%	4 67%	~	~	~	10 77%	24 59%	57 78%	79 72%	4 67%	60 77%	23 61%
#ALWAYS + USUALLY (NET)	105 91%	1689 90%	21 91%	26 90%	36 92%	22 88%	40 93%	6 100%	~	~	~	12 92%	34 83%	69 95%	99 91%	5 83%	73 94%	32 84%
TOP BOX SCORE	83 72%	1206 64%	19 83%	19 66%	28 72%	17 68%	36 84%	4 67%	~	~	~	10 77%	24 59%	57 78%	79 72%	4 67%	60 77%	23 61%
NOT ANSWERED		2 23	1	1			1						1		1		2	
VALID CASES	116	1887	23	29	39	25	43	6				13	41	73	109	6	78	38
NUMBER OF RESPONDENTS	118 100%	1910 100%	24 100%	30 100%	39 100%	25 100%	44 100%	6 100%				13 100%	42 100%	73 100%	110 100%	6 100%	80 100%	38 100%

[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	
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 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	NO CCC	CCC	
Q57 #YES	73 64%	1118 60%	15 68%~	21 70%~	25 64%~	12 52%~	23 56%~	5 ~ 83%~				8 ~ 62%~	27 66%~	45 64%~	69 64%~	3 50%~	54 70%~	19 51%
NO	41 36%	755 40%	7 32%~	9 30%~	14 36%~	11 48%~	18 44%~	1 ~ 17%~				5 ~ 38%~	14 34%~	25 36%~	38 36%~	3 50%~	23 30%~	18 49%
NOT ANSWERED	4	37	2			2	3						1	3	3		3	1
VALID CASES	114	1873	22	30	39	23	41	6				13	41	70	107	6	77	37
NUMBER OF RESPONDENTS	118	1910	24	30	39	25	44	6				13	42	73	110	6	80	38
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA 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	
Q57A YES	195 73%	3983 82%*	13 26%*	60 82%*	70 90%*	52 78%	80 71%	8 ~ 73%~					19 ~ 66%~	73 77%	118 72%	185 72%~	8 89%~	151 73%	44 73%
NO	73 27%	876 18%*	37 74%*	13 18%*	8 10%*	15 22%	32 29%	3 ~ 27%~					10 ~ 34%~	22 23%	47 28%	72 28%~	1 11%~	57 27%	16 27%
NOT ANSWERED	26	450	9	11	3	3	1							3	1	3		26	
VALID CASES	268	4859	50	73	78	67	112	11					29	95	165	257	9	208	60
NUMBER OF RESPONDENTS	294	5309	59	84	81	70	113	11					29	98	166	260	9	234	60
	100%	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	
	FMCA 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
Q57B YES	153 57%	2993 61%	10 20%*	45 62%	54 69%*	44 68%*	68 61%	6 ~ 55%~	~	~	~	14 ~ 48%~	52 55%	98 59%	148 58%~	3 38%~	115 55%	38 64%
NO	114 43%	1901 39%	41 80%*	28 38%	24 31%*	21 32%*	44 39%	5 ~ 45%~	~	~	~	15 ~ 52%~	42 45%	67 41%	109 42%~	5 63%~	93 45%	21 36%
NOT ANSWERED	27	415	8	11	3	5	1						4	1	3	1	26	1
VALID CASES	267	4894	51	73	78	65	112	11				29	94	165	257	8	208	59
NUMBER OF RESPONDENTS	294	5309	59	84	81	70	113	11				29	98	166	260	9	234	60
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	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				
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	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	NO CCC	CCC		
Q57C NEVER	1 0.7%	52 2%	~	1 2%	~	~	1 1%	~	~	~	~	~	~	1 1%	0.7%	~	1 3%		
SOMETIMES	9 6%	168 6%	~	~	3 6%	6 14%	3 4%	~	2 33%	~	~	~	~	3 6%	6 6%	8 5%	1 33%	7 6%	2 5%
USUALLY	24 16%	532 18%	~	6 13%	10 19%	8 18%	9 13%	~	1 17%	~	~	~	1 7%	12 23%	12 12%	22 15%	2 67%	18 16%	6 16%
ALWAYS	119 78%	2201 75%	100%	38 84%	41 76%	30 68%	55 81%	~	3 50%	~	~	~	13 93%	37 71%	79 81%	117 79%	~	90 78%	29 76%
#ALWAYS + USUALLY (NET)	143 93%	2733 93%	100%	44 98%	51 94%	38 86%	64 94%	~	4 67%	~	~	~	14 100%	49 94%	91 93%	139 94%	2 67%	108 94%	35 92%
TOP BOX SCORE	119 78%	2201 75%	100%	38 84%	41 76%	30 68%	55 81%	~	3 50%	~	~	~	13 93%	37 71%	79 81%	117 79%	~	90 78%	29 76%
NOT ANSWERED		40																	
VALID CASES	153	2953	10	45	54	44	68		6			14	52	98	148	3	115	38	
NUMBER OF RESPONDENTS	153 100%	2993 100%	10 100%	45 100%	54 100%	44 100%	68 100%		6 100%			14 100%	52 100%	98 100%	148 100%	3 100%	115 100%	38 100%	

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	
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	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	
Q57D NEVER	28 25%	609 28%	9 50%~	8 28%~	7 21%~	4 12%~	8 22%~	2 ~ 50%~	~	~	~	5 ~ 29%~	10 21%~	17 28%	26 24%~	2 50%~	25 27%~	3 14%
SOMETIMES	17 15%	384 18%	2 11%~	2 7%~	8 24%~	5 15%~	3 8%~	2 ~ 50%~	~	~	~	1 ~ 6%~	11 23%~	6 10%	16 15%~	1 25%~	13 14%~	4 19%
USUALLY	23 20%	484 22%	2 11%~	7 24%~	6 18%~	8 24%~	8 22%~	~	~	~	~	4 ~ 24%~	9 19%~	12 20%	22 20%~	~	18 19%~	5 24%
ALWAYS	46 40%	716 33%	5 28%~	12 41%~	13 38%~	16 48%~	17 47%~	~	~	~	~	7 ~ 41%~	18 38%~	26 43%	45 41%~	1 25%~	37 40%~	9 43%
#ALWAYS + USUALLY (NET)	69 61%	1200 55%	7 39%~	19 66%~	19 56%~	24 73%~	25 69%~	~	~	~	~	11 ~ 65%~	27 56%~	38 62%	67 61%~	1 25%~	55 59%~	14 67%
TOP BOX SCORE	46 40%	716 33%	5 28%~	12 41%~	13 38%~	16 48%~	17 47%~	~	~	~	~	7 ~ 41%~	18 38%~	26 43%	45 41%~	1 25%~	37 40%~	9 43%
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	150	2639	34	44	41	31	75	7				12	47	101	145	4	113	37
NOT ANSWERED	30	477	7	11	6	6	2						3	4	6	1	28	2
VALID CASES	114	2193	18	29	34	33	36	4				17	48	61	109	4	93	21
NUMBER OF RESPONDENTS	294 100%	5309 100%	59 100%	84 100%	81 100%	70 100%	113 100%	11 100%				29 100%	98 100%	166 100%	260 100%	9 100%	234 100%	60 100%



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			
	FMCA 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
Q57E EXTREMELY DIFFICULT	12 4%	164 3%	5 9%	3 4%	1 1%*	3 4%	4 4%	~	~	~	~	~	2 7%	4 4%	8 5%	11 4%	1 11%	8 4%	4 7%
01		92 2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02	1 0.4%	75 1%*	~	~	1 1%	~	~	~	~	~	~	~	~	1 1%	~	1 0.4%	~	1 0.5%	~
03	10 4%	133 3%	3 6%	1 1%	4 5%	2 3%	7 7%	~	1 9%	~	~	~	~	2 2%	8 5%	10 4%	~	6 3%	4 7%
04	7 3%	87 2%	1 2%	2 2%	3 4%	1 1%	4 4%	~	~	~	~	~	3 11%	~	7 4%*	7 3%	~	4 2%	3 5%
05	26 9%	371 7%	6 11%	8 10%	7 9%	5 7%	12 11%	~	~	~	~	~	5 18%	8 8%	17 11%	25 10%	1 11%	19 9%	7 12%
06	10 4%	203 4%	3 6%	2 2%	4 5%	1 1%	4 4%	~	1 9%	~	~	~	~	5 5%	5 3%	9 4%	1 11%	6 3%	4 7%
07	28 10%	375 7%	5 9%	7 9%	8 10%	8 12%	13 12%	~	2 18%	~	~	~	2 7%	8 8%	20 13%	26 11%	1 11%	19 9%	9 15%
09	97 35%	1657 33%	16 30%	29 36%	23 29%	29 43%	24 23%*	~	5 45%	~	~	~	4 14%	35 37%	39 25%*	71 29%	4 44%	79 36%	18 31%
EXTREMELY EASY	89 32%	1890 37%*	14 26%	29 36%	28 35%	18 27%	38 36%	~	2 18%	~	~	~	12 43%	32 34%	53 34%	87 35%	1 11%	79 36%*	10 17%
#8-10 (NET)	186 66%	3547 70%	30 57%	58 72%	51 65%	47 70%	62 58%*	~	7 64%	~	~	~	16 57%	67 71%	92 59%*	158 64%	5 56%	158 71%*	28 47%
9-10 (NET)	186 66%	3547 70%	30 57%	58 72%	51 65%	47 70%	62 58%*	~	7 64%	~	~	~	16 57%	67 71%	92 59%*	158 64%	5 56%	158 71%*	28 47%

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						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLK OR AFR-AMER ##	AS-IAN	ILND ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	HIS-PAN-IC	NOT VERY GOOD & FAIR & POOR	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
88		1																		
NOT ANSWERED	14	261	6	3	2	3	7						1	3	9	13		13	1	
VALID CASES	280	5047	53	81	79	67	106	11					28	95	157	247	9	221	59	
NUMBER OF RESPONDENTS	294	5309	59	84	81	70	113	11					29	98	166	260	9	234	60	
	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	
MEAN	7.89	8.02	7.17	8.19	7.95	8.03	7.62	8.00					7.39	8.09	7.57	7.81	7.11	8.15	6.92	
p stat_(*=Sig @ p<=.05)		.384	.060	.211	.803	.605	.194	~	~	~	~	~	~	~.341	.017*	~	~	~.004*		

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA 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
Q58 EXCELLENT	121 45%	2100 43%	32 62%*	34 47%	32 41%	23 34%*	58 51%	5 ~ 45%~	~	~	~	10 ~ 34%~	39 41%	78 47%	121 47%~	108 ~ 51%*	13 22%	
VERY GOOD	93 35%	1734 35%	13 25%	25 35%	29 37%	26 39%	38 34%	3 ~ 27%~	~	~	~	13 ~ 45%~	31 32%	60 36%	93 36%~	66 ~ 31%*	27 46%	
GOOD	46 17%	854 17%	6 12%	11 15%	15 19%	14 21%	16 14%	1 ~ 9%~	~	~	~	5 ~ 17%~	21 22%	24 14%	46 18%~	31 ~ 15%	15 25%	
FAIR	8 3%	210 4%	1 2%	2 3%	2 3%	3 4%	1 0.9%	1 ~ 9%~	~	~	~	1 ~ 3%~	5 5%	3 2%	8 ~ 89%~	4 2%	4 7%	
POOR	1 0.4%	17 0.3%	~	~	~	1 1%	~	1 ~ 9%~	~	~	~	~	~	1 ~ 0.6%~	1 ~ 11%~	1 0.5%	1	
#EXCELLENT + VERY GOOD + GOOD (NET)	260 97%	4688 95%	51 98%	70 97%	76 97%	63 94%	112 99%*	9 ~ 82%~	~	~	~	28 ~ 97%~	91 95%	162 98%	260 100%~	205 ~ 98%	55 93%	
NOT ANSWERED	25	394	7	12	3	3							2			24	1	
VALID CASES	269	4915	52	72	78	67	113	11				29	96	166	260	9	210	59
NUMBER OF RESPONDENTS	294 100%	5309 100%	59 100%	84 100%	81 100%	70 100%	113 100%	11 100%				29 100%	98 100%	166 100%	260 100%	9 100%	234 100%	60 100%

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		
	FMCA 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	FAIR & POOR	NO CCC	CCC
Q59 EXCELLENT	130 48%	2151 44%	36 68%*	38 52%	35 45%	21 31%*	55 49%	4 ~ 36%~	~	~	~	13 ~ 45%~	50 51%	75 45%	127 49%~	2 22%~	119 56%*	11 18%
VERY GOOD	78 29%	1382 28%	11 21%	15 21%	24 31%	28 42%*	27 24%	5 ~ 45%~	~	~	~	9 ~ 31%~	28 29%	49 30%	75 29%~	3 33%~	61 29%	17 28%
GOOD	41 15%	930 19%	4 8%*	15 21%	13 17%	9 13%	16 14%	1 ~ 9%~	~	~	~	6 ~ 21%~	16 16%	24 14%	40 15%~	~	25 12%*	16 27%
FAIR	20 7%	366 7%	1 2%*	5 7%	6 8%	8 12%	13 12%*	1 ~ 9%~	~	~	~	1 ~ 3%~	4 4%	16 10%*	16 6%~	4 44%~	6 3%*	14 23%
POOR	2 0.7%	88 2%*	1 2%	~	~	1 1%	2 2%~	~	~	~	~	~	~	2 1%~	2 0.8%~	~	~	2 3%
#EXCELLENT + VERY GOOD + GOOD (NET)	249 92%	4463 91%	51 96%	68 93%	72 92%	58 87%	98 87%*	10 ~ 91%~	~	~	~	28 ~ 97%~	94 96%*	148 89%*	242 93%~	5 56%~	205 97%*	44 73%
NOT ANSWERED	23	392	6	11	3	3											23	
VALID CASES	271	4917	53	73	78	67	113	11				29	98	166	260	9	211	60
NUMBER OF RESPONDENTS	294	5309	59	84	81	70	113	11				29	98	166	260	9	234	60
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	FMCA 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
Q60 YES	44 16%	1056 22%*	6 12%	8 11%	17 22%	13 19%	17 15%	2 ~ 18%~	~	~	~	7 ~ 24%~	14 14%	29 17%	40 15%~	2 22%~	15 7%*	29 48%
NO	226 84%	3853 78%*	46 88%	65 89%	61 78%	54 81%	96 85%	9 ~ 82%~	~	~	~	22 ~ 76%~	83 86%	137 83%	219 85%~	7 78%~	195 93%*	31 52%
NOT ANSWERED	24	400	7	11	3	3							1		1		24	
VALID CASES	270	4909	52	73	78	67	113	11				29	97	166	259	9	210	60
NUMBER OF RESPONDENTS	294	5309	59	84	81	70	113	11				29	98	166	260	9	234	60
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	FMCA 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
Q61 YES	34 79%	843 81%	2 40%	8 100%	13 76%	11 85%	14 82%	1 50%	~	~	~	5 71%	10 77%	23 79%	31 78%	2 100%	5 36%	29 100%
NO	9 21%	192 19%	3 60%	~	4 24%	2 15%	3 18%	1 50%	~	~	~	2 29%	3 23%	6 21%	9 23%	~	9 64%	~
NOT ANSWERED	1	21	1										1				1	
VALID CASES	43	1035	5	8	17	13	17	2			7	13	29	40	2	14	29	
NUMBER OF RESPONDENTS	44	1056	6	8	17	13	17	2			7	14	29	40	2	15	29	
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q60 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	FMCA 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
Q62 YES	28 85%	748 91%	2 100%	5 63%	12 100%	9 82%	12 86%	1 100%	~	~	~	4 80%	8 80%	19 86%	25 83%	2 100%	28 97%	
NO	5 15%	77 9%	~	3 38%	~	2 18%	2 14%	~	~	~	~	1 20%	2 20%	3 14%	5 17%	~	4 100%	1 3%
NOT ANSWERED	1	18			1									1	1		1	
VALID CASES	33	825	2	8	12	11	14	1			5	10	22	30	2	4	29	
NUMBER OF RESPONDENTS	34	843	2	8	13	11	14	1			5	10	23	31	2	5	29	
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q60 = YES AND Q61 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA 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- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q63 YES	35 13%	832 17%	3 6%*	15 21%*	8 10%	9 13%	21 19%*	~	~	~	~	~	4 ~ 14%~	9 9%	25 15%	34 13%~	9 ~	3 1%*	32 55%
NO	232 87%	4059 83%	49 94%*	56 79%*	69 90%	58 87%	92 81%*	11 ~100%~	~	~	~	~	25 ~ 86%~	86 91%	140 85%	222 87%~	9 100%~	206 99%*	26 45%
NOT ANSWERED	27	418	7	13	4	3								3	1	4		25	2
VALID CASES	267	4891	52	71	77	67	113	11				29	95	165	256	9	209	58	
NUMBER OF RESPONDENTS	294	5309	59	84	81	70	113	11				29	98	166	260	9	234	60	
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%



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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	FMCA 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 & FAIR & POOR	GOOD & POOR	NO CCC	CCC
Q64 YES	30 91%	689 85%	2 67%	13 93%	8 100%	7 88%	19 90%	~	~	~	~	~100%	6 86%	23 92%	30 91%	1 33%	29 97%	
NO	3 9%	123 15%	1 33%	1 7%	~	1 13%	2 10%	~	~	~	~	~	1 14%	2 8%	3 9%	2 67%	1 3%	
NOT ANSWERED	2	20		1		1							2		1		2	
VALID CASES	33	812	3	14	8	8	21				4	7	25	33		3	30	
NUMBER OF RESPONDENTS	35	832	3	15	8	9	21				4	9	25	34		3	32	
	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		
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE ##	BLCK OR AFR- AMER ##	IAN AS- ##	NATV HAW/ PAC ##	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q65 YES	28 100%	662 97%	2 ~100%	11 ~100%	8 ~100%	7 ~100%	19 100%	~	~	~	~	~	3 ~100%	5 ~100%	22 ~100%	28 ~100%	~	~	28 ~100%
NO		19 3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	2	8		2									1	1	1	2		1	1
VALID CASES	28	681	2	11	8	7	19						3	5	22	28			28
NUMBER OF RESPONDENTS	30	689	2	13	8	7	19						4	6	23	30		1	29
	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		
	FMCA 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
Q66 YES	33 12%	644 13%	4 8%	9 12%	10 13%	10 15%	14 13%	2 ~ 18%~					3 ~ 11%~	12 12%	20 12%	30 12%~	2 22%~	8 4%*	25 42%
NO	233 88%	4243 87%	46 92%	64 88%	67 87%	56 85%	97 87%	9 ~ 82%~					25 ~ 89%~	85 88%	143 88%	225 88%~	7 78%~	199 96%*	34 58%
NOT ANSWERED	28	422	9	11	4	4	2						1	1	3	5		27	1
VALID CASES	266	4887	50	73	77	66	111	11					28	97	163	255	9	207	59
NUMBER OF RESPONDENTS	294	5309	59	84	81	70	113	11					29	98	166	260	9	234	60
	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	FMCA 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	
Q67 YES	26 79%	508 81%	3 75%	8 89%	7 70%	8 80%	13 93%	~	~	~	~	~	2 67%	9 75%	16 80%	24 80%	1 50%	3 38%	23 92%
NO	7 21%	121 19%	1 25%	1 11%	3 30%	2 20%	1 7%	2 ~100%	~	~	~	1 33%	3 25%	4 20%	6 20%	1 50%	5 63%	2 8%	
NOT ANSWERED		15																	
VALID CASES	33	629	4	9	10	10	14	2			3	12	20	30	2	8	25		
NUMBER OF RESPONDENTS	33	644	4	9	10	10	14	2			3	12	20	30	2	8	25		
	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	
	FMCA 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
Q68 YES	22 92%	477 96%	2 67%	7 100%	6 100%	7 88%	13 100%	~	~	~	~	~100%	2 75%	6 100%	15 91%	21 100%	1 100%	22 ~100%
NO	2 8%	22 4%	1 33%	~	~	1 13%	~	~	~	~	~	~	2 25%	~	2 9%	~	2 100%	
NOT ANSWERED	2	9		1	1								1	1	1		1	1
VALID CASES	24	499	3	7	6	8	13					2	8	15	23	1	2	22
NUMBER OF RESPONDENTS	26	508	3	8	7	8	13					2	9	16	24	1	3	23
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q66 = YES AND Q67 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT#	BLCK OR AFR- AMER ##	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	29 11%	558 11%	7 13%	11 15%	4 5%*	7 11%	12 11%	~	~	~	~	~	2 7%	15 16%	13 8%	26 10%~	2 22%~	11 5%*	18 31%
NO	239 89%	4342 89%	46 87%	60 85%	74 95%*	59 89%	101 89%	~100%~	~	~	~	~	27 93%~	81 84%	153 92%	231 90%~	7 78%~	199 95%*	40 69%
NOT ANSWERED	26	409	6	13	3	4								2		3		24	2
VALID CASES	268	4900	53	71	78	66	113	11					29	96	166	257	9	210	58
NUMBER OF RESPONDENTS	294	5309	59	84	81	70	113	11					29	98	166	260	9	234	60
	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	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	
	FMCA 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
Q70 YES	19 68%	389 72%~	4 67%~	10 91%~	2 50%~	3 43%~	9 75%~	~	~	~	~	2 ~100%~	8 57%~	10 77%~	17 68%~	1 50%~	2 20%~	17 94%
NO	9 32%	149 28%~	2 33%~	1 9%~	2 50%~	4 57%~	3 25%~	~	~	~	~	~	6 43%~	3 23%~	8 32%~	1 50%~	8 80%~	1 6%
NOT ANSWERED	1	20	1										1		1		1	
VALID CASES	28	538	6	11	4	7	12					2	14	13	25	2	10	18
NUMBER OF RESPONDENTS	29	558	7	11	4	7	12					2	15	13	26	2	11	18
	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	
	FMCA 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
Q71 YES	17 89%	357 93%	3 75%	10 100%	1 50%	3 100%	9 100%	~	~	~	~	2 100%	6 75%	10 100%	15 88%	1 100%	17 100%	
NO	2 11%	27 7%	1 25%	~	1 50%	~	~	~	~	~	~	2 25%	~	2 12%	~	2 100%	~	
NOT ANSWERED		5																
VALID CASES	19	384	4	10	2	3	9				2	8	10	17	1	2	17	
NUMBER OF RESPONDENTS	19	389	4	10	2	3	9				2	8	10	17	1	2	17	
	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	
	FMCA 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- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q72 YES	38 14%	813 17%	4 8%	15 21%	9 12%	10 15%	25 22%*	1 ~ 9%~				4 ~ 14%~	7 7%*	30 18%*	35 14%~	3 33%~	1 0.5%*	37 63%
NO	231 86%	4085 83%	48 92%	58 79%	69 88%	56 85%	88 78%*	10 ~ 91%~				25 ~ 86%~	90 93%*	136 82%*	223 86%~	6 67%~	209 100%*	22 37%
NOT ANSWERED	25	411	7	11	3	4							1		2		24	1
VALID CASES	269	4898	52	73	78	66	113	11				29	97	166	258	9	210	59
NUMBER OF RESPONDENTS	294	5309	59	84	81	70	113	11				29	98	166	260	9	234	60
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	FMCA 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	36 97%	726 92%	3 ~100%	15 ~100%	9 ~100%	9 90%	24 96%	1 ~100%	~	~	~	4 ~100%	6 ~100%	29 97%	33 97%	3 ~100%	1 ~	36 97%
NO	1 3%	64 8%	~	~	~	1 10%	1 4%	~	~	~	~	~	~	1 3%	1 3%	~	1 ~	1 3%
NOT ANSWERED	1	23	1										1	1			1	
VALID CASES	37	790	3	15	9	10	25	1			4	6	30	34	3			37
NUMBER OF RESPONDENTS	38	813	4	15	9	10	25	1			4	7	30	35	3		1	37
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%			100%

[ASKED IF Q72 = YES]

NQ74 WHAT IS YOUR CHILD'S AGE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	FMCA 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
NQ74																			
3 YEARS OLD OR LESS	59 20%	908 17%	59 100%	~	~	~	26 23%	3 ~ 27%	~	~	~	~ 28%	8 14%	38 23%	51 20%	1 11%	55 24%*	4 7%	
4 TO 7 YEARS OLD	84 29%	1228 23%*	~	84 ~100%	~	~	28 25%	1 ~ 9%	~	~	~	~ 38%	11 29%	39 23%*	70 27%	2 22%	63 27%	21 35%	
8 TO 12 YEARS OLD	81 28%	1650 31%	~	~	81 ~100%	~	27 24%	4 ~ 36%	~	~	~	~ 17%	5 34%	45 27%	76 29%	2 22%	63 27%	18 30%	
13 OR OLDER	70 24%	1523 29%*	~	~	~	70 ~100%	32 28%	3 ~ 27%	~	~	~	~ 17%	5 22%	44 27%	63 24%	4 44%	53 23%	17 28%	
VALID CASES	294	5309	59	84	81	70	113	11				29	98	166	260	9	234	60	
NUMBER OF RESPONDENTS	294 100%	5309 100%	59 100%	84 100%	81 100%	70 100%	113 100%	11 100%				29 100%	98 100%	166 100%	260 100%	9 100%	234 100%	60 100%	

[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		
	FMCA 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	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NQ75																			
MALE	151 51%	2736 52%	31 53%	47 56%	40 49%	33 47%	65 58%	5 ~ 45%	~	~	~	14 ~ 48%	46 47%	89 54%	133 51%	4 44%	114 49%	37 62%	
FEMALE	143 49%	2573 48%	28 47%	37 44%	41 51%	37 53%	48 42%	6 ~ 55%	~	~	~	15 ~ 52%	52 53%	77 46%	127 49%	5 56%	120 51%	23 38%	
VALID CASES	294	5309	59	84	81	70	113	11				29	98	166	260	9	234	60	
NUMBER OF RESPONDENTS	294 100%	5309 100%	59 100%	84 100%	81 100%	70 100%	113 100%	11 100%				29 100%	98 100%	166 100%	260 100%	9 100%	234 100%	60 100%	

[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		
	FMCA 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
Q76 HISPANIC OR LATINO	98 37%	1726 35%	14 27%	29 43%	33 42%	22 33%	~	~	~	~	~	~	98 ~100%	~	91 36%	5 56%	84 41%*	14 24%
NOT HISPANIC OR LATINO	166 63%	3146 65%	38 73%	39 57%	45 58%	44 67%	110 100%	11 ~100%	~	~	27 ~100%	~	166 ~100%	162 64%	4 44%	122 59%*	44 76%	
NOT ANSWERED	30	437	7	16	3	4	3				2			7		28	2	
VALID CASES	264	4872	52	68	78	66	110	11			27	98	166	253	9	206	58	
NUMBER OF RESPONDENTS	294 100%	5309 100%	59 100%	84 100%	81 100%	70 100%	113 100%	11 100%			29 100%	98 100%	166 100%	260 100%	9 100%	234 100%	60 100%	

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER HAW/ PAC	IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q77.1 YES	180 61%	3787 71%*	39 66%	50 60%	47 58%	44 63%	113 100%~	~	~	~	~	~	25 86%~	42 43%*	133 80%*	176 68%~	4 44%~	131 56%*	49 82%
NO	114 39%	1522 29%*	20 34%	34 40%	34 42%	26 37%	~	~100%~	11 ~	~	~	~	4 14%~	56 57%*	33 20%*	84 32%~	5 56%~	103 44%*	11 18%
VALID CASES	294	5309	59	84	81	70	113		11				29	98	166	260	9	234	60
NUMBER OF RESPONDENTS	294 100%	5309 100%	59 100%	84 100%	81 100%	70 100%	113 100%		11 100%				29 100%	98 100%	166 100%	260 100%	9 100%	234 100%	60 100%

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	
	FMCA 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
Q77.2 YES	24 8%	204 4%*	4 7%	11 13%	5 6%	4 6%	~	~	~	~	~	11 38%	5 5%	19 11%*	24 9%	~	17 7%	7 12%
NO	270 92%	5105 96%*	55 93%	73 87%	76 94%	66 94%	113 100%~	11 ~100%~	~	~	~	18 62%~	93 95%	147 89%*	236 91%~	9 100%~	217 93%	53 88%
VALID CASES	294	5309	59	84	81	70	113	11				29	98	166	260	9	234	60
NUMBER OF RESPONDENTS	294 100%	5309 100%	59 100%	84 100%	81 100%	70 100%	113 100%	11 100%				29 100%	98 100%	166 100%	260 100%	9 100%	234 100%	60 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER HAW/ PAC	IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.3 YES	21 7%	184 3%*	5 8%	5 6%	7 9%	4 6%	~	~100%	~	~	~	~	10 34%	~	21 13%	18 7%	3 33%	17 7%	4 7%
NO	273 93%	5125 97%*	54 92%	79 94%	74 91%	66 94%	113 100%	~	~	~	~	~	19 66%	98 100%	145 87%*	242 93%	6 67%	217 93%	56 93%
VALID CASES	294	5309	59	84	81	70	113		11				29	98	166	260	9	234	60
NUMBER OF RESPONDENTS	294 100%	5309 100%	59 100%	84 100%	81 100%	70 100%	113 100%		11 100%				29 100%	98 100%	166 100%	260 100%	9 100%	234 100%	60 100%



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	
	FMCA 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
Q77.4 YES	12 4%	83 2%*	3 5%	4 5%	3 4%	2 3%	~	~	~	~	~	6 ~ 21%	2 2%	10 6%*	12 5%~	~	11 5%	1 2%
NO	282 96%	5226 98%*	56 95%	80 95%	78 96%	68 97%	113 100%~	11 ~100%~	~	~	23 ~ 79%	96 98%	156 94%*	248 95%~	9 100%~	223 95%	59 98%	
VALID CASES	294	5309	59	84	81	70	113	11			29	98	166	260	9	234	60	
NUMBER OF RESPONDENTS	294 100%	5309 100%	59 100%	84 100%	81 100%	70 100%	113 100%	11 100%			29 100%	98 100%	166 100%	260 100%	9 100%	234 100%	60 100%	

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	
	FMCA 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
Q77.5 YES	12 4%	335 6%	4 7%	3 4%	2 2%	3 4%	~	~	~	~	~	~ 28%	4 4%	8 5%	12 5%	~	8 3%	4 7%
NO	282 96%	4974 94%	55 93%	81 96%	79 98%	67 96%	113 100%	~	11 ~100%	~	~	~ 72%	94 96%	158 95%	248 95%	9 100%	226 97%	56 93%
VALID CASES	294	5309	59	84	81	70	113		11			29	98	166	260	9	234	60
NUMBER OF RESPONDENTS	294 100%	5309 100%	59 100%	84 100%	81 100%	70 100%	113 100%		11 100%			29 100%	98 100%	166 100%	260 100%	9 100%	234 100%	60 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	FMCA 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
Q77.6 YES	28 10%	374 7%	2 3%*	10 12%	12 15%	4 6%	~	~	~	~	~	5 ~ 17%	22 22%*	3 2%*	27 10%~	1 11%~	23 10%	5 8%
NO	266 90%	4935 93%	57 97%*	74 88%	69 85%	66 94%	113 100%~	11 ~100%~	~	~	24 ~ 83%	76 78%*	163 98%*	233 90%~	8 89%~	211 90%	55 92%	
VALID CASES	294	5309	59	84	81	70	113	11			29	98	166	260	9	234	60	
NUMBER OF RESPONDENTS	294 100%	5309 100%	59 100%	84 100%	81 100%	70 100%	113 100%	11 100%			29 100%	98 100%	166 100%	260 100%	9 100%	234 100%	60 100%	

Q78 WHAT IS YOUR AGE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN	NATV HAW/ PAC ILND ##	AMER ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q78 UNDER 18	7 3%	141 3%	~	2 3%	4 5%	1 2%	1 0.9%	~	1 9%	~	~	~	~	3 3%	4 2%	7 3%	~	6 3%	1 2%
18 TO 24	9 3%	161 3%	13%*	1 1%	~	1 2%	2 2%	~	1 9%	~	~	~	1 3%	5 5%	4 2%	9 4%	~	9 4%*	
25 TO 34	84 32%	1564 32%	64%*	34 41%*	30 41%*	16 21%*	4 6%*	39 35%	~	~	~	~	11 38%	30 31%	51 31%	82 32%	1 13%	68 33%	16 28%
35 TO 44	115 43%	1821 37%*	21%*	11 45%	33 53%	40 48%	31 48%	44 39%	~	6 55%	~	~	11 38%	48 49%	64 39%	108 42%	6 75%	93 45%	22 38%
45 TO 54	31 12%	797 16%*	2%*	1 7%	5 12%	9 25%*	16 25%*	13 12%	~	2 18%	~	~	4 14%	10 10%	21 13%	31 12%	~	24 12%	7 12%
55 TO 64	14 5%	266 5%	~	1 1%*	5 7%	8 13%*	8 7%	~	1 9%	~	~	~	2 7%	1 1%*	13 8%*	13 5%	1 13%	7 3%	7 12%
65 TO 74	6 2%	116 2%	~	1 1%	2 3%	3 5%	6 5%*	~	~	~	~	~	~	~	6 4%	6 2%	~	1 0.5%*	5 9%
75 OR OLDER		16 0.3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	28	427	6	11	5	6							1	3	4	1	26	2	
VALID CASES	266	4882	53	73	76	64	113	11				29	97	163	256	8	208	58	
NUMBER OF RESPONDENTS	294	5309	59	84	81	70	113	11				29	98	166	260	9	234	60	
	100%	100%	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	
	FMCA 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
Q79																		
MALE	43 16%	702 14%	7 13%	12 16%	11 14%	13 20%	13 12%	4 ~ 36%~	~	~	~	8 ~ 28%~	13 13%	29 18%	41 16%~	2 25%~	33 16%	10 18%
FEMALE	223 84%	4191 86%	46 87%	61 84%	65 86%	51 80%	98 88%	7 ~ 64%~	~	~	~	21 ~ 72%~	84 87%	134 82%	215 84%~	6 75%~	176 84%	47 82%
NOT ANSWERED	28	416	6	11	5	6	2						1	3	4	1	25	3
VALID CASES	266	4893	53	73	76	64	111	11				29	97	163	256	8	209	57
NUMBER OF RESPONDENTS	294 100%	5309 100%	59 100%	84 100%	81 100%	70 100%	113 100%	11 100%				29 100%	97 100%	166 100%	260 100%	9 100%	234 100%	60 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA 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 & POOR	FAIR & POOR	NO CCC	CCC	
Q80																			
8TH GRADE OR LESS	18 7%	479 10%*	3 6%	4 6%	4 5%	7 11%	1 0.9%*	~	~	~	~	~	17 18%*	~	16 6%~	2 29%~	16 8%	2 4%	
SOME HIGH SCHOOL BUT DID NOT GRADUATE	21 8%	480 10%	8 15%	3 4%	4 5%	6 10%	3 3%*	~	2 18%~	~	~	~	2 7%~	12 13%	8 5%*	19 7%~	1 14%~	19 9%	2 4%
HIGH SCHOOL GRADUATE OR GED	74 28%	1452 30%	15 28%	20 28%	26 34%	13 21%	30 27%	~	1 9%~	~	~	~	5 17%~	33 35%	38 23%*	71 28%~	1 14%~	64 31%*	10 18%
SOME COLLEGE OR 2-YEAR DEGREE	87 33%	1752 36%	17 32%	22 31%	27 36%	21 33%	43 38%	~	2 18%~	~	~	~	15 52%~	21 22%*	65 40%*	84 33%~	3 43%~	62 30%	25 44%
4-YEAR COLLEGE GRADUATE	41 16%	437 9%*	7 13%	16 22%	8 11%	10 16%	23 20%	~	4 36%~	~	~	~	5 17%~	6 6%*	34 21%*	41 16%~	~	30 14%	11 19%
MORE THAN 4-YEAR COLLEGE DEGREE	23 9%	238 5%*	3 6%	7 10%	7 9%	6 10%	13 12%	~	2 18%~	~	~	~	2 7%~	5 5%	18 11%	23 9%~	~	16 8%	7 12%
NOT ANSWERED	30	471	6	12	5	7							4	3	6	2	27	3	
VALID CASES	264	4838	53	72	76	63	113		11			29	94	163	254	7	207	57	
NUMBER OF RESPONDENTS	294	5309	59	84	81	70	113		11			29	98	166	260	9	234	60	
	100%	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						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN	NATV HAW/ PAC ILND ##	AMER ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q81 MOTHER OR FATHER	252 95%	4466 93%	52 98%	70 99%*	71 95%	59 89%	105 94%	10 ~ 91%~	~	~	~	26 ~ 96%~	93 97%	152 94%	241 95%~	8 100%~	205 97%*	47 87%
GRANDPARENT	4 2%	186 4%*	~	~	3 4%	1 2%	3 3%	~	~	~	~	~	~	4 2%*	4 2%~	~	2 ~0.9%	2 4%
AUNT OR UNCLE	2 0.8%	33 0.7%	~	~	~	2 3%	~	~	~	~	~	~	2 2%	~	2 ~0.8%~	~	2 ~0.9%	~
OLDER BROTHER OR SISTER	1 0.4%	12 0.2%	~	~	~	1 2%	~	~	1 9%~	~	~	~	~	1 ~0.6%	1 0.4%~	~	1 ~0.5%	~
OTHER RELATIVE	~	6 0.1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
LEGAL GUARDIAN	2 0.8%	73 2%	1 2%	~	~	1 2%	1 0.9%	~	~	~	~	1 4%~	~	2 ~ 1%	2 0.8%~	~	1 ~0.5%	1 2%
SOMEONE ELSE	4 2%	33 0.7%	~	1 1%	1 1%	2 3%	3 3%	~	~	~	~	~	1 1%	3 2%	4 2%~	~	~	4 7%
NOT ANSWERED	29	500	6	13	6	4	1					2	2	4	6	1	23	6
VALID CASES	265	4809	53	71	75	66	112	11				27	96	162	254	8	211	54
NUMBER OF RESPONDENTS	294 100%	5309 100%	59 100%	84 100%	81 100%	70 100%	113 100%	11 100%				29 100%	98 100%	166 100%	260 100%	9 100%	234 100%	60 100%

Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	FMCA 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
Q82 YES	2 1%	101 3%*	1 3%~	~	~	1 2%~	1 1%	1 ~ 10%~	~	~	~	~	2 ~ 2%	1 0.7%~	1 20%~	1 0.8%~	1 2%	1
NO	158 99%	2894 97%*	31 97%~	43 100%~	43 100%~	41 98%~	75 99%	9 ~ 90%~	~	~	14 ~100%~	50 100%~	105 98%	152 99%~	4 80%~	117 99%~	41 98%	
NOT ANSWERED	3	59	1	1		1							3	2	1	1	2	
VALID CASES	160	2995	32	43	43	42	76	10			14	50	107	153	5	118	42	
NUMBER OF RESPONDENTS	163 100%	3054 100%	33 100%	44 100%	43 100%	43 100%	76 100%	10 100%			14 100%	53 100%	107 100%	155 100%	6 100%	119 100%	44 100%	

[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		
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE ##	BLCK OR AFR- AMER ##	IAN AS- IAN	LLND ##	NATV IND/ PAC ALSK ##	AMER OTHR MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q83.1 YES		53 52%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	2 100%	48 48%	1 100%	~	~	1 100%	1 100%	1 100%	~	~	~	~	~	2 100%	1 100%	1 100%	1 100%	1 100%
VALID CASES	2	101	1			1	1	1					2	1	1	1	1	
NUMBER OF RESPONDENTS	2 100%	101 100%	1 100%			1 100%	1 100%	1 100%					2 100%	1 100%	1 100%	1 100%	1 100%	

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	FMCA 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
Q83.2 YES	1 50%	31 31%~	~	~	~	100%~	~	~	100%~	~	~	~	~	1 50%~	1 ~100%~	1 ~100%~	1 ~100%~	
NO	1 50%	70 69%~	1 100%~	~	~	100%~	~	~	~	~	~	~	1 50%~	1 100%~	~	~	1 ~100%~	
VALID CASES	2	101	1			1	1		1				2	1	1		1	1
NUMBER OF RESPONDENTS	2	101	1			1	1		1				2	1	1		1	1
	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		
	FMCA 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 NATV #	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	2 100%	88 87%	1 100%	~	~	1 100%	1 100%	1 100%	1 100%	~	~	~	~	2 100%	1 100%	1 100%	1 100%	1 100%
VALID CASES	2	101	1			1	1	1	1				2	1	1		1	1
NUMBER OF RESPONDENTS	2 100%	101 100%	1 100%			1 100%	1 100%	1 100%	1 100%				2 100%	1 100%	1 100%		1 100%	1 100%

[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		
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE ##	BLCK OR AFR- AMER ##	IAN AS- IAN ##	NATV HAW/ PAC ##	AMER IND/ ALSK NATV #	MUL- OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.4 YES		43 43%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	2 100%	58 57%	1 100%	~	~	1 100%	1 100%	1 100%	~	~	~	~	~	~	2 100%	1 100%	1 100%	1 100%	1 100%
VALID CASES	2	101	1			1	1	1						2	1	1		1	1
NUMBER OF RESPONDENTS	2 100%	101 100%	1 100%			1 100%	1 100%	1 100%						2 100%	1 100%	1 100%		1 100%	1 100%

[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			
	FMCA 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
Q83.5 YES	1 50%	6 6%~100%	1 ~	~	~	1 ~100%	~	~	~	~	~	~	1 ~ 50%	1 ~100%	~	~	1 ~100%	
NO	1 50%	95 94%	~	~	~100%	1 ~	1 ~100%	~	~	~	~	~	1 ~ 50%	1 ~100%	1 ~100%	1 ~100%		
VALID CASES	2	101	1			1	1	1					2	1	1		1	1
NUMBER OF RESPONDENTS	2	101	1			1	1	1					2	1	1		1	1
	100%	100%	100%			100%	100%						100%	100%	100%		100%	100%

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

NQ14 RATING OF ALL CHILD'S HEALTH CARE

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN	NATV ILND ##	AMER PAC ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC
NQ14 0-6	6 3%	286 8%*	~	4 7%	2 4%	~	~	~	~	~	~	1 4%	3 5%	2 2%	4 2%~	1 14%~	4 3%~	2 4%
7-8	62 31%	994 29%	10 22%~	12 20%*	20 37%	20 49%~	29 36%	~	4 44%~	~	~	7 27%~	13 20%*	45 36%	54 29%~	3 43%~	43 28%~	19 41%
9-10	132 66%	2180 63%	36 78%~	43 73%	32 59%	21 51%~	52 64%	~	5 56%~	~	~	18 69%~	48 75%	79 63%	126 68%~	3 43%~	107 69%~	25 54%
VALID CASES	200	3460	46	59	54	41	81		9			26	64	126	184	7	154	46
NUMBER OF RESPONDENTS	200 100%	3460 100%	46 100%	59 100%	54 100%	41 100%	81 100%		9 100%			26 100%	64 100%	126 100%	184 100%	7 100%	154 100%	46 100%
MEAN	2.63	2.55	2.78	2.66	2.56	2.51	2.64		2.56			2.65	2.70	2.61	2.66	2.29	2.67	2.50
p stat_(*=Sig @ p<=.05)		.029*	~	.626	.239	~	.790	~	~	~	~	~	.192	.534	~	~	~	~

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	FMCA 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
NQ41																		
0-6	10 4%	266 6%	1 2%	3 5%	3 4%	3 6%	3 3%	2 ~ 29%	~	~	~	1 4%	2 2%	8 6%	9 4%	1 25%	7 4%	3 6%
7-8	39 17%	933 22%*	7 14%	10 15%	11 16%	11 21%	17 17%	1 ~ 14%	~	~	~	4 15%	12 14%	24 17%	35 15%	1 25%	33 18%	6 12%
9-10	187 79%	3047 72%*	41 84%	53 80%	55 80%	38 73%	81 80%	4 ~ 57%	~	~	~	21 81%	70 83%	112 78%	184 81%	2 50%	145 78%	42 82%
VALID CASES	236	4246	49	66	69	52	101	7				26	84	144	228	4	185	51
NUMBER OF RESPONDENTS	236 100%	4246 100%	49 100%	66 100%	69 100%	52 100%	101 100%	7 100%				26 100%	84 100%	144 100%	228 100%	4 100%	185 100%	51 100%
MEAN	2.75	2.65	2.82	2.76	2.75	2.67	2.77	2.29				2.77	2.81	2.72	2.77	2.25	2.75	2.76
p stat_(*=Sig @ p<=.05)		.005*	~.890	.946	.231	.566	~	~	~	~	~	~.168	.287	~	~	~.821		

[ASKED IF Q30 = YES]

NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA 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 & POOR	FAIR & POOR	NO CCC	CCC	
NQ48 0-6	5 11%	69 9%	1 14%	1 8%	1 8%	2 17%	2 11%	~	~	~	~	~	1 25%	1 5%	3 13%	4 10%	3 13%	2 10%	
7-8	9 20%	186 24%	2 29%	1 8%	3 23%	3 25%	6 33%	~	~	~	~	~	3 16%	6 26%	9 23%	~	7 29%	2 10%	
9-10	30 68%	524 67%	4 57%	10 83%	9 69%	7 58%	10 56%	~	~	~	~	~	3 75%	15 79%	14 61%	27 68%	2 100%	14 58%	16 80%
VALID CASES	44	779	7	12	13	12	18					4	19	23	40	2	24	20	
NUMBER OF RESPONDENTS	44	779	7	12	13	12	18					4	19	23	40	2	24	20	
	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	
MEAN	2.57	2.58	2.43	2.75	2.62	2.42	2.44					2.50	2.74	2.48	2.58	3.00	2.46	2.70	
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						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	FMCA 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	
NQ54																			
0-6	23 9%	652 13%*	1 2%*	9 13%	5 7%	8 13%	12 11%	1 ~	9%~	~	~	~	2 7%~	4 4%*	19 12%*	23 9%~	~	11 5%*	12 21%
7-8	70 27%	1410 29%	12 23%	16 22%	20 26%	22 35%	35 32%	1 ~	9%~	~	~	~	6 21%~	22 23%	47 29%	67 27%~	3 33%~	51 25%	19 33%
9-10	170 65%	2826 58%*	39 75%	47 65%	51 67%	33 52%*	61 56%*	9 ~	82%~	~	~	~	21 72%~	69 73%*	94 59%*	162 64%~	6 67%~	143 70%*	27 47%
VALID CASES	263	4888	52	72	76	63	108	11				29	95	160	252	9	205	58	
NUMBER OF RESPONDENTS	263 100%	4888 100%	52 100%	72 100%	76 100%	63 100%	108 100%	11 100%				29 100%	95 100%	160 100%	252 100%	9 100%	205 100%	58 100%	
MEAN	2.56	2.44	2.73	2.53	2.61	2.40	2.45	2.73				2.66	2.68	2.47	2.55	2.67	2.64	2.26	
p stat_(*=Sig @ p<=.05)		.004*	.011*	.634	.447	.035*	.028*	~	~	~	~	~	.019*	.005*	~	~	.000*		

GETTING NEEDED CARE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER				
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR- AMER ##	AS- IAN	LLND ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NPRBSEE4 NQ46	2.20	2.27	2.29	2.23	2.38	1.92	2.17							2.00	2.32	2.13	2.25	2.00	2.08	2.35
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCARNES4 NQ15	2.48	2.49	2.66	2.54	2.40	2.32	2.56	2.00						2.62	2.38	2.54	2.52	1.71	2.54	2.30
p stat_(*=Sig @ p<=.05)	.868		~.401	.252			~.169	~	~	~	~	~	~	~.157	.111		~	~	~	~
COMPOSITE	2.34	2.38	2.47	2.39	2.39	2.12	2.36	x 2.00	x	x	x	x	2.31	2.35	2.33	2.39	1.86	2.31	2.33	
p stat_(*=Sig @ p<=.05)	.193		~.328	.322			~.526	~	~	~	~	~	~	~.861	.738		~	~	~	~

GETTING CARE QUICKLY

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	FMCA 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
NCARSN4 NQ4	2.73	2.65	2.78	2.68	2.84	2.63	2.88	2.50			2.70	2.68	2.77	2.76	2.00	2.75	2.65	
p stat_(*=Sig @ p<=.05)	.256		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NAPGET4 NQ6	2.54	2.46	2.56	2.45	2.51	2.66	2.61	1.88			2.58	2.53	2.56	2.55	2.57	2.52	2.61	
p stat_(*=Sig @ p<=.05)	.130		~.292	.720		~.306	~	~	~	~	~	~.915	.592	~	~	~	~	
COMPOSITE	2.63	2.56	2.67	2.57	2.68	2.64	2.75	x 2.19	x	x	x 2.64	2.60	2.66	2.65	2.29	2.63	2.63	
p stat_(*=Sig @ p<=.05)	.007*		~.168	.355		~.003*	~	~	~	~	~	~.495	.212	~	~	~	~	

HOW WELL DOCTORS COMMUNICATE

	BANT OT1	BANT OT2	AGE				RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	FMCA 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	HIS- PAN- IC	NOT VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NDREXPL4 NQ32	2.79	2.75	2.71	2.87	2.76	2.82	2.91	2.43			2.81	2.71	2.83	2.81	2.50	2.78	2.83	
p stat_(*=Sig @ p<=.05)	.327		~.195	.646		~.005*	~	~	~	~	~	~.160	.178	~	~	~	~	
NDRLSTN4 NQ33	2.78	2.77	2.76	2.77	2.80	2.76	2.87	2.57			2.71	2.73	2.80	2.79	2.50	2.80	2.70	
p stat_(*=Sig @ p<=.05)	.790		~.969	.633		~.023*	~	~	~	~	~	~.387	.474	~	~	~	~	
NDRESPU4 NQ34	2.82	2.81	2.83	2.85	2.80	2.79	2.91	2.57			2.62	2.84	2.81	2.83	2.50	2.83	2.80	
p stat_(*=Sig @ p<=.05)	.678		~.585	.776		~.022*	~	~	~	~	~	~.649	.577	~	~	~	~	
NDRTMEN4 NQ37	2.55	2.57	2.51	2.67	2.54	2.45	2.76	1.86			2.52	2.38	2.64	2.59	1.25	2.54	2.58	
p stat_(*=Sig @ p<=.05)	.711		~.128	.902		~.000*	~	~	~	~	~	~.018*	.021*	~	~	~	~	
COMPOSITE	2.73	2.72	2.70	2.79	2.73	2.70	2.86	x 2.36	x	x	x 2.67	2.67	2.77	2.76	2.19	2.74	2.72	
p stat_(*=Sig @ p<=.05)	.729		~.293	.906		~.001*	~	~	~	~	~	~.153	.185	~	~	~	~	

CUSTOMER SERVICE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT#	BLCK OR AFR- AMER	AS- IAN	LLND ##	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	2.35	2.28	2.14	2.71	2.44	2.05	2.27						2.22	2.39	2.31	2.33	2.67	2.43	2.11	
p stat_(*=Sig @ p<=.05)	.405		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCSRESP NQ51	2.61	2.60	2.21	2.81	2.56	2.74	2.63						2.56	2.57	2.61	2.59	3.00	2.62	2.59	
p stat_(*=Sig @ p<=.05)	.867		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.48	2.44	2.18	2.76	2.50	2.39	2.45	x	x	x	x	x	2.39	2.48	2.46	2.46	2.83	2.53	2.35	
p stat_(*=Sig @ p<=.05)	.551		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

SHARED DECISION MAKING

	BANT OT1	BANT OT2	AGE				RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER					
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	##	IAN	NATV HAW/ PAC	AMER IND/ ALSK	##	OTH R	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NNRXWHY NQ11	2.86	2.87	3.00	3.00	2.43	3.00	2.90	2.50					3.00	2.82	2.89	2.85	3.00	2.79	3.00	
p stat_(*=Sig @ p<=.05)	.881		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NNRXWYNT NQ12	2.48	2.42	2.50	2.41	2.43	2.60	2.26	2.50					3.00	2.55	2.41	2.43	3.00	2.42	2.60	
p stat_(*=Sig @ p<=.05)	.576		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NRXBST NQ13	2.41	2.58	2.50	2.13	2.57	2.50	2.30	2.00					2.71	2.64	2.31	2.44	2.33	2.37	2.50	
p stat_(*=Sig @ p<=.05)	.116		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.59	2.62	2.67	2.51	2.48	2.70	2.49	x 2.33	x	x	x	x	2.90	2.67	2.54	2.58	2.78	2.53	2.70	
p stat_(*=Sig @ p<=.05)	.649		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

ACCESS TO SPECIALIZED SERVICES

	BANT OT1	BANT OT2	AGE				RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER				
	FMCA 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		
NEZMDEQ NQ20	2.40	2.30	2.00	3.00	2.33		3.00					2.33	2.50	2.50	2.00	3.00	2.00		
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NEZTHP NQ23	2.39	2.19	1.89	2.79	2.60	2.00	2.42				2.33	2.44	2.36	2.39	2.50	2.27	2.50		
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NEZTC NQ26	2.27	2.18	2.33	2.36	2.11	2.27	2.39				2.00	2.38	2.26	2.29	2.50	2.00	2.45		
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
COMPOSITE	2.35	2.22	2.07	2.71	2.35	2.14	2.60	x	x	x	x	x	2.17	2.38	2.37	2.40	2.33	2.42	2.32
p stat_(*=Sig @ p<=.05)		.016*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		

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

	BANTO T1	BANTO T2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLK 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	80%	78%	86%	77%	85%	75%	78%						60%	89%	75%	83%	67%	72%	90%
CARNES4 Q15	91%	89%	89%	95%	89%	90%	93%	89%					96%	86%	93%	92%	57%	90%	93%
AVERAGE	85.50	83.54	87.54	85.92	86.65	82.62	85.14	x 88.89	x	x	x	78.08	87.81	83.90	87.17	61.90	81.13	91.74	



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

	BANTO T1	BANTO T2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLK 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	93%	91%	94%	89%	95%	94%	96%	100%					90%	90%	94%	93%	67%	92%	94%
APGET4 Q6	88%	86%	88%	85%	85%	95%	87%	63%					96%	89%	88%	88%	86%	86%	96%
AVERAGE	90.34	88.77	91.12	87.37	89.82	94.60	91.56	x 81.25	x	x	x	92.92	89.69	90.67	90.59	76.19	88.95	94.88	

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE ##	BLCK OR AFR- AMER ##	AS- IAN	ILND ##	NATV PAC #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
DREXPL4 Q32	96%	95%	95%	94%	94%	100%	99%	86%					95%	94%	96%	97%	75%	96%	95%	
DRLSTN4 Q33	97%	95%	98%	94%	96%	100%	100%	86%					95%	95%	97%	98%	75%	98%	93%	
DRESPU4 Q34	97%	96%	98%	96%	98%	95%	99%	86%					90%	98%	96%	97%	75%	97%	95%	
DRTMEN4 Q37	90%	90%	95%	92%	90%	82%	96%	57%					90%	86%	92%	92%	25%	90%	90%	
AVERAGE	94.8	94.0	96.3	94.3	94.6	94.1	98.3	x 78.6	x	x	x	x 92.9	93.3	95.3	95.8	62.5	95.2	93.1		

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

	BANTO T1	BANTO T2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLK 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	85%	78%	79%	95%	88%	75%	82%						78%	87%	82%	84%	100%	87%	78%
CSRESP Q51	90%	91%	71%	95%	88%	100%	88%						89%	91%	89%	89%	100%	89%	94%
AVERAGE	87.25	84.81	75.00	95.24	87.50	87.50	84.66	x	x	x	x	x	83.33	89.13	85.43	86.49	100.0	87.74	85.95

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	FMCA 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
NRXWHY Q11	93%	94%	100%	100%	71%	100%	95%	75%			100%	91%	94%	93%	100%	90%	100%	
NRXWYNT Q12	74%	71%	75%	71%	71%	80%	63%	75%			100%	77%	71%	72%	100%	71%	80%	
RXBST Q13	71%	79%	75%	56%	79%	75%	65%	50%			86%	82%	66%	72%	67%	68%	75%	
AVERAGE	79.3	81.2	83.3	75.6	73.8	85.0	74.4	x 66.7	x	x	x 95.2	83.3	76.9	78.8	88.9	76.4	85.0	

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN	ILND ##	NATV PAC #	AMER IND/ ALSK	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
EZMDEQ Q20	100%	76%	100%	100%	100%		100%							100%	100%	100%	100%	100%	100%	
EZTHP Q23	85%	72%	67%	100%	80%	80%	92%						100%	81%	93%	86%	100%	73%	94%	
EZTC Q26	81%	71%	100%	86%	67%	82%	89%						71%	88%	81%	82%	100%	67%	91%	
AVERAGE	88.6	72.8	88.9	95.2	82.2	80.9	93.5	x	x	x	x	x	85.7	89.6	91.4	89.4	100	80.0	95.1	

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	FMCA 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
DRTLKU Q38	91%	87%	98%	90%	86%	92%	86%				95%	92%	90%	93%	0%	90%	95%	
DRUNCON Q43	93%	90%	100%	85%	94%	100%	100%	100%			83%	80%	95%	96%	0%	86%	95%	
DRUNFAM Q44	86%	85%	100%	85%	88%	82%	91%	100%			83%	70%	89%	89%	0%	80%	88%	
AVERAGE	90.0	87.5	99.2	86.7	89.5	91.5	94.5	x 95.2	x	x	x 87.3	80.7	91.5	92.7		85.2	92.8	

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER					
	FMCA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	##	IAN	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	##	OTH R	MUL- TI	HIS- IC	HIS- IC	NOT VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
HELPCONT Q18	95%	92%	100%	86%	100%	100%	100%							100%	100%	90%	94%	100%	90%	100%	
HLPCOORD Q29	61%	62%	80%	56%	73%	38%	48%		100%					67%	67%	57%	61%	67%	63%	58%	
AVERAGE	77.9	77.1	90.0	70.6	86.7	69.2	74.0	x	100	x	x	x	x	83.3	83.3	73.6	77.3	83.3	76.7	78.8	

INDEX OF ADULT TABLES

PAGE QUESTION TITLE

1. INTRODUCTION

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

2. YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

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

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

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

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

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

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

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

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

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

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

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



PAGE QUESTION TITLE

3. YOUR PERSONAL DOCTOR

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

4. GETTING HEALTH CARE FROM SPECIALISTS

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

PAGE QUESTION TITLE

5. YOUR HEALTH PLAN

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

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

5. ADDITIONAL QUESTIONS

39 Q35E IN THE LAST 6 MONTHS, 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?

PAGE QUESTION TITLE

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]

PAGE	QUESTION	TITLE
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

INDEX OF CHILD TABLES

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1. INTRODUCTION

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

2. YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

3. SPECIALIZED SERVICES

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

4. YOUR CHILD'S PERSONAL DOCTOR

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

5. GETTING HEALTH CARE FROM SPECIALISTS

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

6. YOUR CHILD'S HEALTH PLAN

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

PAGE QUESTION TITLE

7. PRESCRIPTION MEDICINES

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

7. ACCESS TO DENTAL CARE

- 58 Q57A A REGULAR DENTIST IS ONE YOUR CHILD WOULD GO TO FOR CHECK-UPS AND CLEANINGS OR WHEN HE/SHE HAS A CAVITY OR TOOTH PAIN. DOES YOUR CHILD HAVE A REGULAR DENTIST?
- 59 Q57B IN THE LAST 6 MONTHS, 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*

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

- Never
- Sometimes
- Usually
- Always

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

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

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

- Yes
- No → Go to Question 35c

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → Go to Question 35e

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

- Never
- Sometimes
- Usually
- Always

## ADDITIONAL QUESTIONS

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes, definitely
- Yes, somewhat
- No

## ACCESS TO DENTAL CARE

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

- Yes
- No



**ABOUT YOU**

35j. In the last 6 months, did you go to a dentist's office or clinic for care?

- Yes
- No → *Go to Question 35l*

35k. In the last 6 months, how often did the dentists or dental staff explain what they were doing while treating you?

- Never
- Sometimes
- Usually
- Always

35l. 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?

- Never
- Sometimes
- Usually
- Always
- I did not try to get an appointment with a specialist dentist for myself in the last 6 months.

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

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

35n. 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?

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

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

- Excellent
- Very Good
- Good
- Fair
- Poor

37. In general, how would you rate your overall mental or emotional health?

- Excellent
- Very Good
- Good
- Fair
- Poor

38. Have you had either a flu shot or flu spray in the nose since July 1, 2016?

- Yes
- No
- Don't know

39. Do you now smoke cigarettes or use tobacco every day, some days, or not at all?

- Every day
- Some days
- Not at all → *Go to Question 43*
- Don't know → *Go to Question 43*

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

- Never
- Sometimes
- Usually
- Always





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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No
- Don't know

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

- Yes
- No
- Don't know

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

- Yes
- No

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

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

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

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

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

- Yes
- No → *Go to Question 50*

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

- Yes
- No

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

- Yes
- No → *Go to Question 52*

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

- Yes
- No

52. What is your age?

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



53. Are you male or female?

- Male
- Female

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

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

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

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

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

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

57. Did someone help you complete this survey?

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

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

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

**THANK YOU**

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

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

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



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

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

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

**SURVEY INSTRUCTIONS**

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

Correct  
Mark 

Incorrect  
Marks



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

- Yes → *Go to Question 1*
- No

↓ **START HERE** ↓

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

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

- Yes → *Go to Question 3*
- No

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

\_\_\_\_\_

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

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

3. In the last 6 months, did your child have an illness, injury, or condition that needed care right away in a clinic, emergency room, or doctor's office?

Yes  
 No → *Go to Question 5*

4. In the last 6 months, when your child needed care right away, how often did your child get care as soon as he or she needed?

Never  
 Sometimes  
 Usually  
 Always

5. In the last 6 months, did you make any appointments for a check-up or routine care for your child at a doctor's office or clinic?

Yes  
 No → *Go to Question 7*

6. In the last 6 months, when you made an appointment for a check-up or routine care for your child at a doctor's office or clinic, how often did you get an appointment as soon as your child needed?

Never  
 Sometimes  
 Usually  
 Always

7. In the last 6 months, not counting the times your child went to an emergency room, how many times did he or she go to a doctor's office or clinic to get health care?

None → *Go to Question 16*  
 1 time  
 2  
 3  
 4  
 5 to 9  
 10 or more times

8. In the last 6 months, did you and your child's doctor or other health provider talk about specific things you could do to prevent illness in your child?

Yes  
 No

9. In the last 6 months, how often did you have your questions answered by your child's 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



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*

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 35c*

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

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

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

- Sí
- No → *Pase a la pregunta 35e*

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

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

## PREGUNTAS ADICIONALES

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

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

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

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

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

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

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

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

- Sí, definitivamente
- Sí, algo
- No

## ACCESO A CUIDADO DENTAL

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

- Sí
- No





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.

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** ↓

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?