



Jackson Care Connect  
CAHPS® 5.0 Medicaid Survey

Banner Book Report

June 2015



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## METHODOLOGY

### Introduction

This banner book report summarizes the results of the 2015 CAHPS® Medicaid survey of Jackson Care Connect members. Jackson Care Connect is one of 17 CCOs that participated in the survey. It was administered over a 10-week period using a mixed-mode (mail and telephone) five-wave protocol. This protocol consisted of a pre-notification letter, an initial survey mailing and reminder postcard to all respondents, followed by a second survey mailing and reminder postcard to non-respondents. Phone follow-up was conducted for members who had not responded to the mailings. Respondents were surveyed in English and Spanish. DataStat administered the survey under contract with the State of Oregon Department of Human Services.

### Survey Milestones

Pre-notification letters mailed:	February 19, 2015
1st mailing of survey packets:	February 26, 2015
1st mailing of reminder postcards:	March 5, 2015
2nd mailing of survey packets:	March 24, 2015
2nd mailing of reminder postcards:	April 2, 2015
Phone follow-up start:	April 9, 2015
Mail and phone field terminated:	May 4, 2015

### Sampling

The sampling plan for the adult and child surveys called for a random sample of 900 eligible members per CCO in each age group. Adults were defined as members aged 18 years or older and children as 17 years old or younger, both as of December 31, 2014. To be eligible, members had to have been enrolled in Oregon Health Plan for at least six months as of December 31, 2014. The final selected sample consisted of 15,300 adult OHP enrollees and 15,300 child OHP enrollees.

### Questionnaires

The instruments selected for the survey were adaptations of the CAHPS® 5.0 adult and child core questionnaires for use in assessing the performance of CCOs. CAHPS® supplemental questions as well as OHP-specific items were added to the instruments.

### Selection of Cases for Analysis

Surveys were considered complete if respondents did not say 'No' to Q1 and if they provided a valid response to at least one non OHP-specific question.

## Composites, Overall Ratings, and Measures for Reporting

In addition to responses by individual question, the CAHPS® 5.0 questionnaire yields several types of results for reporting. *Composite scores* summarize responses in key areas of member experience. Four composites are calculated for the adult and child instruments: *Getting Needed Care*, *Getting Care Quickly*, *How Well Doctors Communicate*, and *Health Plan Customer Service*, and *Shared Decision Making*. Global or overall ratings measure respondents' assessments, using a scale of 0 to 10, of their health plan, health care, personal doctor, and specialist. In the child questionnaire, an additional set of six *Reporting Measures* are possible. These measures cover topics called *Access to Specialized Services*, *Family Centered Care*, and *Coordination of Care*.

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

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

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

Q25/46. Getting appointments with specialists

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

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

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

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

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

Q18/33. Personal doctor listened carefully to you

Q29/34. Personal doctor showed respect for what you had to say

Q20/37. Personal doctor spent enough time with you

### **Composite: Customer Service**

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

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

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

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

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

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

### **Rating Questions**

Q13/14. Rating of all health care

Q23/41. Rating of personal doctor

Q27/47. Rating of specialist doctor

Q35/54. Rating of health plan

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

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

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

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

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

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

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

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

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

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

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

## Comparisons, Statistical Testing, Scoring, and Weighting

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

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

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

## Sample Disposition

Category	Adult		Child	
	Jackson Care Connect	Overall	Jackson Care Connect	Overall
<b>**First mailing - sent</b>	900	15300	900	15300
<b>*First mailing - usable survey returned</b>	187	3240	129	2377
<b>Second mailing - sent</b>	715	12007	745	12648
<b>*Second mailing - usable survey returned</b>	46	979	51	987
<b>*Phone - usable surveys</b>	76	1234	120	1999
<b>Total - usable surveys</b>	309	5453	300	5363
<b>†Ineligible: According to population criteria‡</b>	5	261	7	158
<b>†Ineligible: Deceased</b>	4	39	0	1
<b>†Ineligible: Mentally or physically unable to complete survey</b>	7	207	0	0
<b>†Ineligible: Language barrier</b>	0	52	0	40
<b>Incorrect address AND incorrect phone number</b>	83	1173	95	1296
<b>Refusal/Returned survey blank</b>	43	667	48	729
<b>Nonresponse - Unavailable by mail or phone</b>	449	7448	450	7713
<b>Adjusted Response Rate</b>	<b>35.0%</b>	<b>37.0%</b>	<b>33.6%</b>	<b>35.5%</b>

\*Included in response rate numerator

†Excluded from adjusted response rate denominator

‡Population criteria: The designated respondent must be enrolled in the health plan and meet the age requirements of the survey methodology.

Note: *Adjusted Response Rate = Total Usable Surveys / Total Eligible Cases*

## Response/Non-Response Comparison

Presented below is a comparison, by age and gender within each age category, of respondents and non-respondents, all of whom were part of the random sample for the Oregon CAHPS© 2015 survey.

**Non-Respondents** are members or member proxys who decided not to participate in the study by mail or phone. This group includes two types of non-respondents:

- 1) Members who passively refused by not returning the questionnaire mailed to their household and/or not answering questions over the phone.
- 2) Members who actively refused, either by contacting DataStat or by declining to participate when DataStat attempted to reach them by phone.

The category labeled **Respondents** includes members or member proxys who completed the questionnaire either by mail or phone.

### Adult

Gender / Age	Non-Respondents	Respondents	Difference
Male	215 43.7%	121 39.2%	-4.54%
Female	277 56.3%	188 60.8%	4.54%
18-24	113 23.0%	29 9.4%	-13.58%
25-34	124 25.2%	56 18.1%	-7.08%
35-44	106 21.5%	51 16.5%	-5.04%
45-54	78 15.9%	69 22.3%	6.48%
55-64	56 11.4%	78 25.2%	13.86%
65-74	10 2.0%	17 5.5%	3.47%
75 or Older	5 1.0%	9 2.9%	1.90%

### Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	237 47.6%	158 52.7%	5.08%
Female	261 52.4%	142 47.3%	-5.08%
<3	92 18.5%	48 16.0%	-2.47%
4-7	145 29.1%	65 21.7%	-7.45%
8-12	145 29.1%	94 31.3%	2.22%
13 or older	116 23.3%	93 31.0%	7.71%

Q1 OUR RECORDS SHOW THAT YOU ARE NOW IN <JACKSON CARE CONNECT>. IS THAT RIGHT?

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
Q1 YES	307 100%	5345 100%	24 100%	45 100%	48 100%	62 100%	80 100%	26 100%	244 100%	2 100%	1 100%	1 100%	6 100%	16 100%	31 100%	248 100%	195 100%	90 100%	110 100%	176 100%
NOT ANSWERED	2	108			1	1		2							2	2		2		
VALID CASES	307	5345	24	45	48	62	80	26	244	2	1	1	6	16	31	248	195	90	110	176
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%	1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%



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?

	JCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q3 YES	125 42%	2233 43%	6 25%~	16 36%~	19 39%~	25 41%	38 48%	13 50%~	101 41%	1 50%~	~	~	~	3 60%~	7 44%~	10 33%~	104 42%~	63 32%*	54 61%*	44 40%	74 43%
Q3 NO	170 58%	2997 57%	18 75%~	28 64%~	30 61%~	36 59%	41 52%	13 50%~	143 59%	1 50%~	1 100%~	~	1 ~100%~	2 40%~	9 56%~	20 67%~	144 58%~	131 68%*	35 39%*	66 60%	100 57%
NOT ANSWERED	14	223		1		1	2		2				1		1	2	3	1	2	2	
VALID CASES	295	5230	24	44	49	61	79	26	244	2	1		1	5	16	30	248	194	89	110	174
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%		1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	JCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q4 NEVER	2 2%	63 3%	~	~	1 6%	1 4%	~	1 1%	~	~	~	~	~	~	1 1%	1 2%	1 2%	1 3%	1 2%		
SOMETIMES	14 13%	285 14%	2 50%	~	1 6%	5 22%	5 17%	1 9%	11 13%	~	~	~	~	2 33%	2 25%	11 13%	7 14%	7 15%	7 18%	7 12%	
USUALLY	31 30%	563 28%	1 25%	5 38%	4 25%	7 30%	9 30%	4 36%	25 30%	~	~	~	~	2 100%	2 33%	28 25%	13 33%	15 27%	10 31%	20 33%	
ALWAYS	57 55%	1115 55%	1 25%	8 62%	10 63%	10 43%	16 53%	6 55%	47 56%	1 100%	~	~	~	2 33%	4 50%	46 53%	28 57%	25 52%	20 53%	32 53%	
#ALWAYS + USUALLY (NET)	88 85%	1678 83%	2 50%	13 100%	14 88%	17 74%	25 83%	10 91%	72 86%	1 100%	~	~	~	2 100%	4 67%	74 75%	41 86%	40 83%	30 79%	52 87%	
TOP BOX SCORE	57 55%	1115 55%	1 25%	8 62%	10 63%	10 43%	16 53%	6 55%	47 56%	1 100%	~	~	~	2 33%	4 50%	46 53%	28 57%	25 52%	20 53%	32 53%	
NOT ANSWERED	21	220	2	3	3	2	8	2	17					1	1	2	18	14	6	6	14
VALID CASES	104	2026	4	13	16	23	30	11	84	1				2	6	8	86	49	48	38	60
NUMBER OF RESPONDENTS	125	2246	6	16	19	25	38	13	101	1				3	7	10	104	63	54	44	74
	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?

	JCC TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
Q5 YES	193 67%	3616 70%	9 39%~	31 70%~	28 58%~	42 70%	57 73%	19 73%~	163 68%~	1 50%~	1 100%~	1 ~100%~	1 17%~	13 81%~	18 60%~	166 68%~	119 63%*	65 74%	63 58%*	124 73%*
NO	95 33%	1586 30%	14 61%~	13 30%~	20 42%~	18 30%	21 27%	7 27%~	76 32%~	1 50%~	~	~	5 ~83%~	3 19%~	12 40%~	79 32%~	71 37%*	23 26%	45 42%*	47 27%*
NOT ANSWERED	21	251	1	1	1	2	3		7						1	5	7	2	4	5
VALID CASES	288	5202	23	44	48	60	78	26	239	2	1	1	6	16	30	245	190	88	108	171
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%	1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%

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?

	JCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	OTH-	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q6 NEVER	5 3%	100 3%	1 11%	1 4%	1 ~	2 3%	2 4%	4 3%	~	~	~	~	~	1 9%	5 ~	3 3%	2 3%	2 4%	3 3%		
SOMETIMES	32 19%	562 17%	4 44%	8 30%	4 15%	4 12%	8 16%	3 20%	27 19%	~	~	~	~	4 36%	4 25%	27 19%	19 19%	13 22%	14 27%	17 15%	
USUALLY	48 29%	870 27%	7 ~	6 26%	13 23%	16 38%	3 32%	41 20%	29%	~	~	~	~	3 27%	4 25%	42 29%	27 27%	18 31%	15 29%	31 28%	
ALWAYS	83 49%	1715 53%	4 44%	11 41%	16 62%	16 47%	24 48%	9 60%	69 49%	1 100%	1 100%	1 ~	1 ~	3 27%	8 50%	69 48%	52 51%	25 43%	21 40%	59 54%	
#ALWAYS + USUALLY (NET)	131 78%	2585 80%	4 44%	18 67%	22 85%	29 85%	40 80%	12 80%	110 78%	1 100%	1 100%	1 ~	1 ~	6 55%	12 75%	111 78%	79 78%	43 74%	36 69%	90 82%	
TOP BOX SCORE	83 49%	1715 53%	4 44%	11 41%	16 62%	16 47%	24 48%	9 60%	69 49%	1 100%	1 100%	1 ~	1 ~	3 27%	8 50%	69 48%	52 51%	25 43%	21 40%	59 54%	
NOT ANSWERED	25	326	4	2	8	7	4	22						1	2	2	23	18	7	11	14
VALID CASES	168	3247	9	27	26	34	50	15	141	1	1	1	11	16	143	101	58	52	110		
NUMBER OF RESPONDENTS	193	3573	9	31	28	42	57	19	163	1	1	1	1	13	18	166	119	65	63	124	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q5 = YES]

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

	JCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE			
Q7 NONE	72 25%	1271 25%	13 54%~	11 24%~	9 18%~	15 24%	16 21%	6 24%~	58 24%~	1 ~100%~	~	~	2 ~33%~	2 13%~	10 34%~	57 23%~	55 28%*	16 18%	33 30%	36 21%	
1 TIME	52 18%	975 19%	3 13%~	7 16%~	10 20%~	12 19%	16 21%	3 12%~	40 17%~	2 100%~	~	~	1 ~100%~	2 33%~	4 25%~	7 24%~	43 17%~	39 20%	11 13%	19 17%	33 19%
2	46 16%	973 19%	2 8%~	8 18%~	7 14%~	9 15%	12 15%	5 20%~	39 16%~	~	~	~	1 ~17%~	3 19%~	5 17%~	38 15%~	31 16%	11 13%	15 14%	28 16%	
3	41 14%	600 12%	4 17%~	10 22%~	4 8%~	6 10%	13 17%	4 16%~	35 14%~	~	~	~	~	3 19%~	5 17%~	35 14%~	26 13%	15 17%	17 15%	24 14%	
4	26 9%	448 9%	1 4%~	4 9%~	3 6%~	8 13%	7 9%	2 8%~	23 10%~	~	~	~	1 ~17%~	1 6%~	~	24 10%~	17 9%	8 9%	9 8%	16 9%	
5 TO 9	41 14%	631 12%	1 4%~	3 7%~	14 29%~	11 18%	10 13%	2 8%~	37 15%~	~	~	~	~	2 13%~	1 3%~	39 16%~	22 11%	19 22%*	12 11%	29 17%	
10 OR MORE TIMES	12 4%	265 5%	~	2 4%~	2 4%~	1 2%	4 5%	3 12%~	10 4%~	~	~	~	~	1 6%~	1 3%~	11 4%~	4 2%*	8 9%*	5 5%	7 4%	
NOT ANSWERED	19	290					3	1	4						2	3	3	2	2	3	
VALID CASES	290	5163	24	45	49	62	78	25	242	2	1	1	6	16	29	247	194	88	110	173	
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%	1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%	

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?

	JCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q8 #YES	150 70%	2683 71%	7 64%	25 76%	22 56%	32 73%	47 76%	14 74%	130 72%	1 50%	~	1 ~100%	2 67%	9 69%	12 63%	133 72%	96 71%	50 71%	54 72%	94 70%
NO	63 30%	1081 29%	4 36%	8 24%	17 44%	12 27%	15 24%	5 26%	51 28%	1 50%	~	~	1 ~33%	4 31%	7 37%	52 28%	40 29%	20 29%	21 28%	40 30%
NOT ANSWERED	5	79		1	1	3			3				1	1		5	3	2	2	3
VALID CASES	213	3764	11	33	39	44	62	19	181	2		1	3	13	19	185	136	70	75	134
NUMBER OF RESPONDENTS	218 100%	3843 100%	11 100%	34 100%	40 100%	47 100%	62 100%	19 100%	184 100%	2 100%		1 100%	4 100%	14 100%	19 100%	190 100%	139 100%	72 100%	77 100%	137 100%

[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?

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q9 YES	108 51%	2125 57%	4 36%~	11 33%~	18 47%~	26 59%~	32 52%	14 74%~	95 53%~	~	~	~	~	2 67%~	6 46%~	5 26%~	98 53%~	54 40%*	49 69%*	35 47%	70 53%
NO	104 49%	1611 43%	7 64%~	22 67%~	20 53%~	18 41%~	30 48%	5 26%~	85 47%~	2 100%~	~	~	1 100%~	1 33%~	7 54%~	14 74%~	86 47%~	80 60%*	22 31%*	40 53%	63 47%
NOT ANSWERED	6	107	1	2	3				4					1	1		6	5	1	2	4
VALID CASES	212	3736	11	33	38	44	62	19	180	2			1	3	13	19	184	134	71	75	133
NUMBER OF RESPONDENTS	218	3843	11	34	40	47	62	19	184	2			1	4	14	19	190	139	72	77	137
	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?

	JCC TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q10 #YES	102 96%	1887 92%*	3 75%~	11 100%~	18 100%~	24 96%~	30 97%~	13 93%~	89 96%~	~	~	~	~	2 ~100%~	6 100%~	3 75%~	94 97%~	51 96%	46 96%~	34 97%~	65 96%~
NO	4 4%	166 8%*	1 25%~	~	~	4 4%~	1 3%~	1 7%~	4 4%~	~	~	~	~	~	~	1 25%~	3 3%~	2 4%	2 4%~	1 3%~	3 4%~
NOT ANSWERED	27	436		1	2	4	4	1	10					1	1	3	10	9	4	4	9
VALID CASES	106	2053	4	11	18	25	31	14	93					2	6	4	97	53	48	35	68
NUMBER OF RESPONDENTS	133 100%	2489 100%	4 100%	12 100%	20 100%	29 100%	35 100%	15 100%	103 100%					3 100%	7 100%	7 100%	107 100%	62 100%	52 100%	39 100%	77 100%

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



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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
JCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN AMER	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE			
Q11 #YES	80 75%	1488 73%	2 50%~	9 82%~	14 78%~	19 79%~	23 72%~	11 79%~	71 76%~	~	~	~	~	2 ~100%~	4 67%~	3 75%~	74 76%~	40 75%	36 75%	24 71%~	54 78%~
NO	26 25%	562 27%	2 50%~	2 18%~	4 22%~	5 21%~	9 28%~	3 21%~	23 24%~	~	~	~	~	2 ~33%~	1 25%~	24 24%~	13 25%	12 25%	10 29%~	15 22%~	
NOT ANSWERED	2	44				2		1							1		1	1	1	1	
VALID CASES	106	2050	4	11	18	24	32	14	94					2	6	4	98	53	48	34	69
NUMBER OF RESPONDENTS	108	2094	4	11	18	26	32	14	95					2	6	5	98	54	49	35	70
	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?

	JCC TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ AS- PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q12 #YES	87 82%	1534 75%	3 75%~	10 91%~	14 82%~	21 84%~	26 81%~	10 71%~	76 81%~	~	~	~	1 ~100%~	5 83%~	4 100%~	78 80%~	47 90%*	35 71%~	29 83%~	55 81%~
NO	19 18%	511 25%	1 25%~	1 9%~	3 18%~	4 16%~	6 19%~	4 29%~	18 19%~	~	~	~	~	1 ~17%~	19 ~20%~	5 10%*	14 29%~	6 17%~	13 19%~	
NOT ANSWERED	2	49			1	1			1				1		1	1	2			2
VALID CASES	106	2045	4	11	17	25	32	14	94				1	6	4	97	52	49	35	68
NUMBER OF RESPONDENTS	108	2094	4	11	18	26	32	14	95				2	6	5	98	54	49	35	70
	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?

	JCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE	
Q13 WORST HEALTH CARE POSSIBLE	29	0.8%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
01	27	0.7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
02	1	0.5%	~	~	1	2%	~	~	~	~	~	~	~	~	~	~	1	1%	1	
03	6	3%	1	9%	1	3%	1	2%	1	3%	5%	6	3%	~	~	6	3%	2	1%	
04	6	3%	1	9%	1	3%	1	2%	1	3%	11%	5	3%	~	~	1	5%	1	0.7%*	
05	12	6%	~	~	4	10%	3	7%	4	6%	5%	11	6%	~	~	1	12%	7	5%	
06	14	7%	~	3	9%	10%	4	7%	3	3%	5%	9	5%	~	~	1	12%	6	4%	
07	34	16%	1	9%	6	18%	4	10%	9	20%	18%	2	17%	~	~	2	11%	31	17%	
08	48	22%	3	27%	8	24%	8	21%	9	20%	26%	3	21%	~	~	1	100%	1	33%	
09	33	15%	1	9%	2	6%	15%	11	24%	15%	16%	3	16%	~	~	2	15%	1	50%	
BEST HEALTH CARE POSSIBLE	60	28%	4	36%	14	42%	11	28%	7	16%	27%	6	32%	~	~	1	29%	52	1	
#8-10 (NET)	141	66%	8	73%	24	73%	25	64%	27	60%	68%	12	63%	~	~	2	66%	120	2	

Continued

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

	AGE							RACE					ETHNICITY		HEALTH STATUS		GENDER				
	JCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE			
9-10 (NET)	93 43%	1712 46%	5 45%~	16 48%~	17 44%~	18 40%~	26 42%	9 47%~	81 45%~	2 100%~	~	~	~	3 23%~	12 63%~	78 42%~	74 54%*	17 24%*	30 39%	62 46%	
NOT ANSWERED	4	106		1	1	2			2			1	1		4	3	1	1	3		
VALID CASES	214	3737	11	33	39	45	62	19	182	2		1	3	13	19	186	136	71	76	134	
NUMBER OF RESPONDENTS	218 100%	3843 100%	11 100%	34 100%	40 100%	47 100%	62 100%	19 100%	184 100%	2 100%		1 100%	4 100%	14 100%	19 100%	190 100%	139 100%	72 100%	77 100%	137 100%	
MEAN	7.98	7.91	7.91	8.55	7.87	7.69	8.03	7.74	8.01	9.50		8.00	6.33	7.54	8.89	7.91	8.46	7.17	7.93	8.01	
p stat_(*=Sig @ p<=.05)		.615	~	~	~	~	.778	~	~	~	~	~	~	~	~	~	~	.000*	.000*	.808	.702

[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?

	JCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV ILND	AMER PAC	IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q14 NEVER	5 2%	104 3%	1 9%~	~	~	3 7%~	1 2%	~	4 2%~	~	~	~	~	~	~	~	4 2%~	3 2%	2 3%	4 6%	1 0.8%
SOMETIMES	31 15%	575 15%	3 27%~	5 15%~	6 16%~	4 10%~	8 13%	4 21%~	24 14%~	~	~	~	~	2 67%~	4 31%~	3 16%~	26 14%~	17 13%	13 19%	6 8%*	24 18%
USUALLY	78 38%	1243 33%	1 9%~	15 45%~	14 37%~	16 38%~	25 42%	6 32%~	68 39%~	~	~	~	~	1 33%~	6 46%~	4 21%~	73 41%~	46 35%	30 43%	28 39%	49 37%
ALWAYS	94 45%	1797 48%	6 55%~	13 39%~	18 47%~	19 45%~	26 43%	9 47%~	80 45%~	2 100%~	~	~	1 100%~	3 23%~	12 63%~	77 43%~	67 50%*	24 35%*	34 47%	58 44%	
#ALWAYS + USUALLY (NET)	172 83%	3040 82%	7 64%~	28 85%~	32 84%~	35 83%~	51 85%	15 79%~	148 84%~	2 100%~	~	~	1 100%~	1 33%~	9 69%~	16 84%~	150 83%~	113 85%	54 78%	62 86%	107 81%
TOP BOX SCORE	94 45%	1797 48%	6 55%~	13 39%~	18 47%~	19 45%~	26 43%	9 47%~	80 45%~	2 100%~	~	~	1 100%~	3 23%~	12 63%~	77 43%~	67 50%*	24 35%*	34 47%	58 44%	
NOT ANSWERED	10	124	~	1	2	5	2	~	8	~	~	~	~	1	1	10	6	3	5	5	
VALID CASES	208	3719	11	33	38	42	60	19	176	2	~	~	1	3	13	19	180	133	69	72	132
NUMBER OF RESPONDENTS	218 100%	3843 100%	11 100%	34 100%	40 100%	47 100%	62 100%	19 100%	184 100%	2 100%	~	~	1 100%	4 100%	14 100%	19 100%	190 100%	139 100%	72 100%	77 100%	137 100%

[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?

	JCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q15 YES	234 80%	4201 81%	13 54%~	29 64%~	41 85%~	53 85%	67 85%	23 88%~	198 81%~	1 50%~	1 100%~	1 ~100%~	5 83%~	12 75%~	22 71%~	199 81%~	147 76%*	80 89%*	82 75%	145 83%
NO	59 20%	995 19%	11 46%~	16 36%~	7 15%~	9 15%	12 15%	3 12%~	45 19%~	1 50%~	~	~	1 ~17%~	4 25%~	9 29%~	48 19%~	47 24%*	10 11%*	28 25%	30 17%
NOT ANSWERED	16	257			1		2		3						3	3	3		2	1
VALID CASES	293	5196	24	45	48	62	79	26	243	2	1	1	6	16	31	247	194	90	110	175
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%	1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%

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

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q16 NONE	34 16%	713 18%	5 38%	4 15%	7 18%	9 18%	7 12%	1 5%	30 16%	~	~	~	~	3 60%	~	3 14%	29 16%	24 18%	10 14%	14 19%	18 13%	
1 TIME	53 25%	973 24%	2 15%	11 41%	9 24%	14 29%	12 20%	5 25%	43 24%	1 100%	1 100%	~	~	1 20%	5 56%	3 14%	48 27%	36 26%	16 22%	13 18%	40 30%*	
2	46 22%	1005 25%	3 23%	4 15%	6 16%	8 16%	18 30%	5 25%	40 22%	~	~	~	~	1 100%	1 20%	2 22%	9 43%	35 19%	34 25%	10 14%*	20 28%	24 18%
3	33 15%	534 13%	3 23%	3 11%	7 18%	5 10%	9 15%	5 25%	27 15%	~	~	~	~	~	1 11%	3 14%	27 15%	18 13%	14 19%	11 15%	21 16%	
4	16 8%	322 8%	~	1 4%	~	7 14%	5 8%	3 15%	15 8%	~	~	~	~	~	~	~	1 5%	14 8%	11 8%	5 7%	6 8%	10 7%
5 TO 9	26 12%	403 10%	~	4 15%	8 21%	6 12%	7 12%	1 5%	24 13%	~	~	~	~	~	1 11%	1 5%	25 14%	13 10%	13 18%	5 7%	21 16%*	
10 OR MORE TIMES	5 2%	75 2%	~	~	1 3%	~	2 3%	~	3 2%	~	~	~	~	~	~	~	1 5%	3 2%	~	4 6%	3 4%	1 0.7%
NOT ANSWERED	21	238	~	2	3	4	7	3	16	~	~	~	~	~	3	1	18	11	8	10	10	
VALID CASES	213	4026	13	27	38	49	60	20	182	1	1	~	~	1	5	9	21	181	136	72	72	135
NUMBER OF RESPONDENTS	234	4264	13	29	41	53	67	23	198	1	1	~	~	1	5	12	22	199	147	80	82	145
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q15 = YES]

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	JCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q17 NEVER	2 1%	47 1%	~	~	3%	~	2%	~	1%	~	~	~	~	~	~	1%	~	3%	2%	0.9%	
SOMETIMES	10 6%	196 6%	13%	4%	3%	3%	4%	16%	6%	~	~	~	~	~	~	5%	4%	8%	5%	5%	
USUALLY	36 20%	719 22%	~	17%	19%	18%	26%	26%	23%	~	~	~	~	22%	6%	23%	18%	26%	19%	22%	
ALWAYS	129 73%	2245 70%	88%	78%	74%	79%	68%	58%	70%	100%	100%	~	100%	100%	78%	94%	70%	78%*	63%*	74%	72%
#ALWAYS + USUALLY (NET)	165 93%	2963 92%	88%	96%	94%	97%	94%	84%	93%	100%	100%	~	100%	100%	100%	93%	96%	89%	93%	94%	
TOP BOX SCORE	129 73%	2245 70%	88%	78%	74%	79%	68%	58%	70%	100%	100%	~	100%	100%	78%	94%	70%	78%*	63%*	74%	72%
NOT ANSWERED	2	22				1			1						1	1				1	
VALID CASES	177	3206	8	23	31	39	53	19	151	1	1		1	2	9	18	151	111	62	58	116
NUMBER OF RESPONDENTS	179	3228	8	23	31	40	53	19	152	1	1		1	2	9	18	152	112	62	58	117
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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



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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	JCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q18 NEVER	2 1%	67 2%	~	~	~	~	4%~	~	~	~	~	~	~	~	~	2 1%	~	1 2%	~	2 2%~	
SOMETIMES	13 7%	251 8%	1 13%~	3 14%~	3 10%~	2 5%~	2 4%~	2 11%~	12 8%~	~	~	~	~	1 13%~	12 8%~	5 5%	8 13%	3 5%	10 9%		
USUALLY	30 17%	665 21%	~	3 14%~	5 16%~	7 18%~	13 25%~	2 11%~	28 19%~	~	~	~	~	1 13%~	2 11%~	27 18%~	17 16%	13 21%	13 22%	17 15%	
ALWAYS	130 74%	2214 69%	7 88%~	16 73%~	23 74%~	29 76%~	36 68%~	15 79%~	109 72%~	1 100%~	1 100%~	~	1 ~100%~	2 ~100%~	6 75%~	16 89%~	109 73%~	87 80%*	40 65%*	42 72%	85 75%
#ALWAYS + USUALLY (NET)	160 91%	2879 90%	7 88%~	19 86%~	28 90%~	36 95%~	49 92%~	17 89%~	137 91%~	1 100%~	1 100%~	~	1 ~100%~	2 ~100%~	7 87%~	18 100%~	136 91%~	104 95%*	53 85%	55 95%	102 89%
TOP BOX SCORE	130 74%	2214 69%	7 88%~	16 73%~	23 74%~	29 76%~	36 68%~	15 79%~	109 72%~	1 100%~	1 100%~	~	1 ~100%~	2 ~100%~	6 75%~	16 89%~	109 73%~	87 80%*	40 65%*	42 72%	85 75%
NOT ANSWERED	4	31	~	1	~	2	~	~	1	~	~	~	~	1	2	3	~	~	~	3	
VALID CASES	175	3197	8	22	31	38	53	19	151	1	1	~	1	2	8	18	150	109	62	58	114
NUMBER OF RESPONDENTS	179	3228	8	23	31	40	53	19	152	1	1	~	1	2	9	18	152	112	62	58	117
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	~	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	JCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q19 NEVER	4 2%	85 3%	~	~	~	~	4% 11%	3%~	~	~	~	~	~	~	~	3%~	~	5%	~	3%~
SOMETIMES	10 6%	193 6%	13%~	13%~	6%~	3%~	4% 5%	6%~	~	~	~	~	~	11%~	~	6%~	5%	8%	5%	6%
USUALLY	25 14%	575 18%	~	4%~	19%~	16%~	21% 5%	16%~	~	~	~	~	~	11%~	3 17%~	22 15%~	15 14%	10 16%	10 17%	15 13%
ALWAYS	137 78%	2339 73%	88%~	83%~	74%~	82%~	72% 79%	75%~	100%~	100%~	~	100%~	100%~	78%~	83%~	77%~	82% 82%	71% 71%	45 78%	89 77%
#ALWAYS + USUALLY (NET)	162 92%	2915 91%	88%~	87%~	94%~	97%~	92% 84%	91%~	100%~	100%~	~	100%~	100%~	89%~	100%~	91%~	95% 95%	87% 87%	55 95%	104 90%
TOP BOX SCORE	137 78%	2339 73%	88%~	83%~	74%~	82%~	72% 79%	75%~	100%~	100%~	~	100%~	100%~	78%~	83%~	77%~	82% 82%	71% 71%	45 78%	89 77%
NOT ANSWERED	3	35				2		1							1	2				2
VALID CASES	176	3193	8	23	31	38	53	19	151	1	1	1	2	9	18	151	110	62	58	115
NUMBER OF RESPONDENTS	179	3228	8	23	31	40	53	19	152	1	1	1	2	9	18	152	112	62	58	117
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q20 NEVER	2 1%	95 3%*	~	1 4%~	~	~	1 2%	~	2 1%~	~	~	~	~	~	~	~	2 1%~	1 0.9%	~	~	2 2%~
SOMETIMES	14 8%	295 9%	~	1 4%~	3 10%~	2 5%~	5 9%	2 11%~	13 9%~	~	~	~	~	~	~	~	12 8%~	5 5%	9 15%*	6 10%	7 6%
USUALLY	40 23%	856 27%	1 13%~	5 22%~	7 23%~	9 24%~	15 28%	3 16%~	37 25%~	~	~	~	~	~	2 22%~	3 17%~	37 25%~	22 20%	18 29%	12 21%	28 25%
ALWAYS	119 68%	1950 61%*	7 88%~	16 70%~	20 67%~	27 71%~	32 60%	14 74%~	98 65%~	1 100%~	1 100%~	~	1 100%~	2 100%~	7 78%~	15 83%~	99 66%~	81 74%*	35 56%*	40 69%	77 68%
#ALWAYS + USUALLY (NET)	159 91%	2806 88%	8 100%~	21 91%~	27 90%~	36 95%~	47 89%	17 89%~	135 90%~	1 100%~	1 100%~	~	1 100%~	2 100%~	9 100%~	18 100%~	136 91%~	103 94%	53 85%	52 90%	105 92%
TOP BOX SCORE	119 68%	1950 61%*	7 88%~	16 70%~	20 67%~	27 71%~	32 60%	14 74%~	98 65%~	1 100%~	1 100%~	~	1 100%~	2 100%~	7 78%~	15 83%~	99 66%~	81 74%*	35 56%*	40 69%	77 68%
NOT ANSWERED	4	31			1	2			2								2	3			3
VALID CASES	175	3197	8	23	30	38	53	19	150	1	1		1	2	9	18	150	109	62	58	114
NUMBER OF RESPONDENTS	179	3228	8	23	31	40	53	19	152	1	1		1	2	9	18	152	112	62	58	117
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLACK OR AFR-	ASIAN IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q21	JCC TOT ADLT																				
YES	99 56%	1943 61%	3 38%	8 35%	19 61%	22 56%	33 62%	12 63%	86 57%	1 100%			1 50%	5 56%	8 44%	87 58%	51 46%*	46 74%*	34 59%	64 55%	
NO	78 44%	1222 39%	5 63%	15 65%	12 39%	17 44%	20 38%	7 37%	65 43%	1 100%		1 100%	1 50%	4 44%	10 56%	64 42%	60 54%*	16 26%*	24 41%	52 45%	
NOT ANSWERED	2	62				1		1								1	1			1	
VALID CASES	177	3166	8 100%	23 100%	31 100%	39 100%	53 100%	19 100%	151 100%	1 100%	1 100%		1 100%	2 100%	9 100%	18 100%	151 100%	111 100%	62 100%	58 100%	116 100%
NUMBER OF RESPONDENTS	179 100%	3228 100%	8 100%	23 100%	31 100%	40 100%	53 100%	19 100%	152 100%	1 100%	1 100%		1 100%	2 100%	9 100%	18 100%	152 100%	112 100%	62 100%	58 100%	117 100%

[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?

	JCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	OTH-	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q22 NEVER	7 7%	119 6%	1 33%	2 25%	2 11%	1 5%	1 3%	6 7%	~	~	~	~	~	1 20%	7 8%	2 4%	5 11%	2 6%	5 8%		
SOMETIMES	10 11%	265 14%	~	~	1 5%	3 15%	2 6%	4 36%	10 12%	~	~	~	~	~	1 13%	9 11%	6 12%	4 9%	2 6%	8 13%	
USUALLY	25 26%	545 29%	1 33%	1 13%	6 32%	5 25%	12 38%	24 29%	~	~	~	~	~	1 20%	2 25%	23 27%	12 24%	13 30%	10 30%	15 25%	
ALWAYS	53 56%	927 50%	1 33%	5 63%	10 53%	11 55%	17 53%	7 64%	43 52%	1 100%	~	~	~	1 100%	3 60%	5 63%	45 54%	29 59%	22 50%	19 58%	33 54%
#ALWAYS + USUALLY (NET)	78 82%	1472 79%	2 67%	6 75%	16 84%	16 80%	29 91%	7 64%	67 81%	1 100%	~	~	~	1 100%	4 80%	7 88%	68 81%	41 84%	35 80%	29 88%	48 79%
TOP BOX SCORE	53 56%	927 50%	1 33%	5 63%	10 53%	11 55%	17 53%	7 64%	43 52%	1 100%	~	~	~	1 100%	3 60%	5 63%	45 54%	29 59%	22 50%	19 58%	33 54%
NOT ANSWERED	4	61				2	1	1	3							3	2	2	1	3	
VALID CASES	95	1856	3	8	19	20	32	11	83	1				1	5	8	84	49	44	33	61
NUMBER OF RESPONDENTS	99	1917	3	8	19	22	33	12	86	1				1	5	8	87	51	46	34	64
	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?

	JCC TOT ADULT	OHP TOT ADULT	AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE					
Q23 WORST PERSONAL DOCTOR POSSIBLE	1 0.5%	60 2%*	~	~	~	2%~	~	~	~	~	~	~	~	~	~	~	~	1	1	1%	~		
01	2 0.9%	30 0.7%	1 8%~	~	~	~	2%	~	2	1%~	~	~	~	~	~	~	2	1	1	1	1	1	
02	1 0.5%	27 0.7%	1 8%~	~	~	~	~	~	1	~0.6%~	~	~	~	~	~	~	1	1	~	~	~	1	
03	1 0.5%	71 2%*	~	4%~	~	~	~	~	~	~	~	~	~	11%~	~	~	1	~	~	1%	~	1	
04	6 3%	80 2%	~	~	3%~	1	2%	3%	2	10%~	2	6	3%~	~	~	~	6	~	~	7%*	5	1	5
05	9 4%	203 5%	1 8%~	1 4%~	3 8%~	2 4%	1 2%	1 5%~	1	8	4%~	~	~	~	~	~	1	8	5	4	4	4	5
06	4 2%	153 4%*	~	4%~	1 3%~	1 4%	2	~	3	2%~	~	~	~	~	~	~	4	3	1	~	4	3%*	
07	21 10%	289 7%	2 15%~	2 7%~	4 11%~	3 6%	8 14%	1 5%~	19	11%~	~	~	~	~	11%~	1	18	13	7	10	10	10	10
08	24 11%	720 18%*	2 15%~	1 4%~	5 14%~	8 16%	5 8%	3 15%~	22	12%~	~	~	~	~	11%~	1	20	12	12	9%	17%	12	11
09	32 15%	743 19%	~	5 19%~	5 14%~	7 14%	11 19%	3 15%~	28	16%~	~	~	~	~	33%~	3	29	22	9	10	16%	21	
BEST PERSONAL DOCTOR POSSIBLE	110 52%	1623 41%*	6 46%~	16 59%~	18 49%~	26 52%	31 53%	10 50%~	91	51%~	1	1	~	1	~100%~	3	90	77	31	43%	33	75	
#8-10 (NET)	166 79%	3087 77%	8 62%~	22 81%~	28 76%~	41 82%	47 80%	16 80%~	141	78%~	1	1	~	1	~100%~	7	139	111	52	76%	107	80%	

Continued

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

	AGE							RACE					ETHNICITY		HEALTH STATUS		GENDER			
	JCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ IND/ PAC ALSK	AMER ILND NATV OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE			
9-10 (NET)	142 67%	2366 59%*	6 46%~	21 78%~	23 62%~	33 66%	42 71%	13 65%~	119 66%~	1 100%	1 100%	1 ~100%	5 100%	6 67%~	16 76%~	119 66%~	99 74%*	40 56%*	43 60%	96 72%
NOT ANSWERED	23	265		2	4	3	8	3	18					3	1	20	13	8	10	11
VALID CASES	211	3999	13	27	37	50	59	20	180	1	1	1	5	9	21	179	134	72	72	134
NUMBER OF RESPONDENTS	234 100%	4264 100%	13 100%	29 100%	41 100%	53 100%	67 100%	23 100%	198 100%	1 100%	1 100%	1 100%	5 100%	12 100%	22 100%	199 100%	147 100%	80 100%	82 100%	145 100%
MEAN	8.66	8.32	7.54	8.93	8.59	8.68	8.80	8.55	8.65	10.0	10.0	10.0	10.0	8.33	9.29	8.61	8.96	8.14	8.49	8.75
p stat_(*=Sig @ p<=.05)		.022*	~	~	~.931	.530	~	~	~	~	~	~	~	~	~	~	~.008*	.006*	.363	.404

[ASKED IF Q15 = YES]

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
JCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q24 YES	128 44%	2074 40%	7 29%	16 36%	15 31%	29 48%	43 54%*	14 54%	112 46%	2 100%	~	~	~	8 50%	8 27%	113 45%	72 37%*	53 59%*	45 40%	81 47%	
NO	163 56%	3119 60%	17 71%	29 64%	33 69%	32 52%	37 46%*	12 46%	133 54%	1 100%	~	1 100%	6 100%	8 50%	22 73%	136 55%	123 63%*	37 41%*	67 60%	92 53%	
NOT ANSWERED	18	260			1	1	1		1						1	1	2			3	
VALID CASES	291	5193	24	45	48	61	80	26	245	2	1		1	6	16	30	249	195	90	112	173
NUMBER OF RESPONDENTS	309	5453	24	45	49	62	81	26	246	2	1		1	6	16	31	250	197	90	112	176
	100%	100%	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?

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q25 NEVER	7 6%	135 7%	1 14%~	1 7%~	1 8%~	2 7%~	2 5%~	6 6%~	~	~	~	~	~	~	6 6%~	4 6%	3 6%~	2 5%~	5 7%~	
SOMETIMES	20 17%	292 15%	2 29%~	2 13%~	6 ~	6 21%~	3 15%~	18 17%~	~	~	~	~	~	1 ~	3 38%~	15 14%~	7 10%*	12 24%~	9 21%~	10 13%~
USUALLY	39 33%	614 31%	1 14%~	4 27%~	5 38%~	9 32%~	14 35%~	4 33%~	31 30%~	1 50%~	~	~	~	5 83%~	2 25%~	34 33%~	21 31%	17 35%~	14 33%~	24 32%~
ALWAYS	53 45%	926 47%	3 43%~	8 53%~	7 54%~	11 39%~	18 45%~	5 42%~	50 48%~	1 50%~	~	~	~	~	3 38%~	49 47%~	35 52%	17 35%~	17 40%~	36 48%~
#ALWAYS + USUALLY (NET)	92 77%	1540 78%	4 57%~	12 80%~	12 92%~	20 71%~	32 80%~	9 75%~	81 77%~	2 100%~	~	~	~	5 83%~	5 63%~	83 80%~	56 84%	34 69%~	31 74%~	60 80%~
TOP BOX SCORE	53 45%	926 47%	3 43%~	8 53%~	7 54%~	11 39%~	18 45%~	5 42%~	50 48%~	1 50%~	~	~	~	~	3 38%~	49 47%~	35 52%	17 35%~	17 40%~	36 48%~
NOT ANSWERED	9	78	1	2	1	3	2	7						2	9	5	4	3	6	
VALID CASES	119	1967	7	15	13	28	40	12	105	2				6	8	104	67	49	42	75
NUMBER OF RESPONDENTS	128	2045	7	16	15	29	43	14	112	2				8	8	113	72	53	45	81
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	JCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q26 NONE	6 5%	93 5%	1 14%~	1 7%~	~	1 4%~	3 8%~	~	5 5%~	~	~	~	~	~	~	4 4%~	2 3%	4 9%~	3 7%~	3 4%~	
1 SPECIALIST	52 44%	1033 52%	3 43%~	7 47%~	10 71%~	13 48%~	15 38%~	2 17%~	44 42%~	1 50%~	~	~	~	~	4 67%~	3 43%~	45 44%~	31 46%	19 40%~	17 40%~	34 47%~
2	40 34%	522 26%	2 29%~	5 33%~	2 14%~	10 37%~	15 38%~	5 42%~	38 37%~	1 50%~	~	~	~	~	~	3 43%~	36 35%~	25 37%	14 30%~	15 36%~	24 33%~
3	15 13%	217 11%	1 14%~	1 7%~	2 14%~	3 11%~	6 15%~	2 17%~	14 13%~	~	~	~	~	~	1 17%~	1 14%~	14 14%~	7 10%	8 17%~	6 14%~	9 12%~
4	2 2%	74 4%	~	1 7%~	~	~	~	1 8%~	2 2%~	~	~	~	~	~	~	2 2%~	1 1%	1 2%~	1 2%~	1 2%~	1 1%~
5 OR MORE SPECIALISTS	2 2%	41 2%	~	~	~	~	~	2 17%~	1 1%~	~	~	~	~	~	1 17%~	2 2%~	1 1%	1 2%~	~	~	2 3%~
NOT ANSWERED	11	66	~	1	1	2	4	2	8	~	~	~	~	2	1	10	5	6	3	8	
VALID CASES	117	1979	7	15	14	27	39	12	104	2	~	~	~	6	7	103	67	47	42	73	
NUMBER OF RESPONDENTS	128	2045	7	16	15	29	43	14	112	2	~	~	~	8	8	113	72	53	45	81	
	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?

	JCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV ILND	AMER PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	MALE	FE- MALE	
Q27 WORST SPECIALIST POSSIBLE	1 0.9%	21 1%	~	~	~	~	3%~	1 1%~	~	~	~	~	~	~	1 1%~	1 2%~	1 3%~	~			
01	1 0.9%	7 0.4%	~	~	~	4%~	~	1 1%~	~	~	~	~	~	~	1 1%~	1 2%~	~	1 1%~			
02	2 2%	19 1%	~	~	~	4%~	3%~	2 2%~	~	~	~	~	~	~	2 2%~	2 5%~	1 3%~	1 1%~			
03	2 2%	28 2%	~	~	~	3%~	8%~	2 2%~	~	~	~	~	~	~	2 2%~	2 5%~	~	2 3%~			
04	4 4%	18 1%	~	1 7%~	~	1 4%~	1 3%~	1 8%~	4 4%~	~	~	~	~	~	1 14%~	2 2%~	2 3%~	2 5%~	1 3%~	3 4%~	
05	1 0.9%	88 5%*	~	~	~	~	3%~	1 1%~	~	~	~	~	~	~	1 1%~	1 2%~	~	1 3%~	~		
06	4 4%	76 4%	~	~	1 7%~	2 8%~	1 3%~	~	4 4%~	~	~	~	~	~	4 4%~	2 3%~	2 5%~	3 8%~	1 1%~		
07	7 6%	154 8%	1 17%~	~	3 21%~	1 4%~	2 6%~	~	7 7%~	~	~	~	~	~	7 7%~	5 8%~	2 5%~	3 8%~	4 6%~		
08	16 14%	272 15%	2 33%~	2 14%~	3 21%~	4 15%~	4 11%~	1 8%~	16 16%~	~	~	~	~	~	1 14%~	15 15%~	9 14%~	7 16%~	8 21%~	8 11%~	
09	23 21%	345 19%	1 17%~	2 14%~	2 14%~	7 27%~	6 17%~	3 25%~	18 18%~	~	~	~	~	~	3 50%~	4 57%~	17 17%~	15 23%~	7 16%~	7 18%~	15 21%~
BEST SPECIALIST POSSIBLE	50 45%	812 44%	2 33%~	9 64%~	5 36%~	9 35%~	18 50%~	6 50%~	43 43%~	2 100%~	~	~	~	~	3 50%~	1 14%~	47 47%~	30 46%~	18 42%~	14 36%~	35 50%~
#8-10 (NET)	89 80%	1429 78%	5 83%~	13 93%~	10 71%~	20 77%~	28 78%~	10 83%~	77 78%~	2 100%~	~	~	~	~	6 86%~	6 80%~	79 83%~	54 74%~	32 74%~	29 74%~	58 83%~

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?

	JCC TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ AS- PAC	AMER IND/ ALSK	MUL- TI	OTH-	NOT HIS- PAN-	HIS- PAN-	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE		
9-10 (NET)	73 66%	1157 63%	3 50%~	11 79%~	7 50%~	16 62%~	24 67%~	9 75%~	61 62%~	2 100%~	~	~	~	~	6 100%~	5 71%~	64 65%~	45 69%~	25 58%~	21 54%~	50 71%~
NOT ANSWERED		34																			
VALID CASES	111	1838	6	14	14	26	36	12	99	2				6	7	99	65	43	39	70	
NUMBER OF RESPONDENTS	111 100%	1872 100%	6 100%	14 100%	14 100%	26 100%	36 100%	12 100%	99 100%	2 100%				6 100%	7 100%	99 100%	65 100%	43 100%	39 100%	70 100%	
MEAN	8.47	8.47	8.67	9.14	8.50	8.12	8.33	8.50	8.33	10.0				9.50	8.29	8.48	8.74	7.98	8.13	8.63	
p stat_(*=Sig @ p<=.05)		1.00	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

[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?

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE				
Q28 YES	62 21%	1182 23%	5 21%~	12 27%~	15 31%~	10 16%	13 19%~	5 20%~						1 ~	6 ~	17%~	40%~	7 23%~	50 20%~	48 24%*	12 13%*	21 19%	39 22%
NO	230 79%	3968 77%	19 79%~	32 73%~	34 69%~	51 84%	68 84%	21 81%~	195 80%~	2 100%~	1 100%~			1 ~	5 ~	9 60%~	83%~	24 77%~	198 80%~	148 76%*	77 87%*	91 81%	135 78%
NOT ANSWERED	17	303		1		1			1						1			2		1	1		2
VALID CASES	292	5150	24	44	49	61	81	26	245	2	1			1	6	15		31	248	196	89	112	174
NUMBER OF RESPONDENTS	309	5453	24	45	49	62	81	26	246	2	1			1	6	16		31	250	197	90	112	176
	100%	100%	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?

	JCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	OTH- R	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE
Q29 NEVER	6 10%	119 12%			3 ~ 21%	2 ~ 22%	1 ~ 8%	6 ~ 13%							6 ~ 13%	3 7%	3 27%	1 5%	5 14%	
SOMETIMES	21 36%	339 34%	1 20%	5 50%	6 43%	4 44%	4 31%	17 35%				1 ~ 100%	1 20%	1 14%	18 38%	17 38%	3 27%	8 40%	12 33%	
USUALLY	23 40%	332 33%	1 20%	5 50%	5 36%	2 22%	7 54%	2 40%	18 38%					4 ~ 80%	2 29%	20 43%	19 42%	3 27%	8 40%	14 39%
ALWAYS	8 14%	213 21%	3 60%			1 ~ 11%	1 8%	3 60%	7 15%						4 57%	3 6%	6 13%	2 18%	3 15%	5 14%
#ALWAYS + USUALLY (NET)	31 53%	545 54%	4 80%	5 50%	5 36%	3 33%	8 62%	5 100%	25 52%					4 ~ 80%	6 86%	23 49%	25 56%	5 45%	11 55%	19 53%
TOP BOX SCORE	8 14%	213 21%	3 60%			1 ~ 11%	1 8%	3 60%	7 15%						4 57%	3 6%	6 13%	2 18%	3 15%	5 14%
NOT ANSWERED	4	19		2	1	1			2					1		3	3	1	1	3
VALID CASES	58	1003	5	10	14	9	13	5	48			1	5	7	47	45	11	20	36	
NUMBER OF RESPONDENTS	62	1022	5	12	15	10	13	5	50			1	6	7	50	48	12	21	39	
	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q28 = YES]

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

	JCC TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q30 YES	74 26%	1525 30%	3 13%~	12 27%~	22 45%~	10 17%	18 22%	7 28%~	56 23%~	1 50%~	~	~	~	4 67%~	6 40%~	14 45%~	55 22%~	49 25%	24 28%	23 21%	49 28%
NO	213 74%	3584 70%	20 87%~	33 73%~	27 55%~	49 83%	62 78%	18 72%~	186 77%~	1 50%~	1 100%~	~	1 100%~	2 33%~	9 60%~	17 55%~	190 78%~	146 75%	62 72%	87 79%	123 72%
NOT ANSWERED	22	344	1			3	1	1	4						1		5	2	4	2	4
VALID CASES	287	5109	23	45	49	59	80	25	242	2	1		1	6	15	31	245	195	86	110	172
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%		1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%

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

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q31 NEVER	5 7%	51 4%	2 ~ 18%	3 ~ 14%	~	~	~	4 8%	~	~	~	~	~	1 20%	1 8%	4 8%	3 7%	2 10%	~	5 12%	
SOMETIMES	10 15%	295 21%	3 ~ 27%	2 10%	2 25%	3 19%	~	9 17%	~	~	~	~	~	1 20%	~	9 18%	5 11%	5 24%	4 18%	6 14%	
USUALLY	21 31%	400 28%	1 33%	2 18%	7 33%	2 25%	6 38%	1 17%	16 31%	~	~	~	~	~	~	4 31%	14 29%	15 33%	5 24%	7 32%	12 28%
ALWAYS	31 46%	670 47%	2 67%	4 36%	9 43%	4 50%	7 44%	5 83%	23 44%	1 100%	~	~	~	2 100%	3 60%	8 62%	22 45%	22 49%	9 43%	11 50%	20 47%
#ALWAYS + USUALLY (NET)	52 78%	1070 76%	3 100%	6 55%	16 76%	6 75%	13 81%	6 100%	39 75%	1 100%	~	~	~	2 100%	3 60%	12 92%	36 73%	37 82%	14 67%	18 82%	32 74%
TOP BOX SCORE	31 46%	670 47%	2 67%	4 36%	9 43%	4 50%	7 44%	5 83%	23 44%	1 100%	~	~	~	2 100%	3 60%	8 62%	22 45%	22 49%	9 43%	11 50%	20 47%
NOT ANSWERED	7	26	1	1	2	2	1	4						2	1	1	6	4	3	1	6
VALID CASES	67	1415	3	11	21	8	16	6	52	1				2	5	13	49	45	21	22	43
NUMBER OF RESPONDENTS	74	1441	3	12	22	10	18	7	56	1				4	6	14	55	49	24	23	49
	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?

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE			
Q32 NEVER	1 2%	24 2%	~	~	5%~	~	~	~	2%~	~	~	~	~	~	~	~	1 2%~	~	1 5%~	~	1 2%~	
SOMETIMES	6 9%	83 6%	~	18%~	~	13%~	19%~	~	12%~	~	~	~	~	~	~	~	1 8%~	4 8%~	2 5%~	4 19%~	2 9%~	4 9%~
USUALLY	13 20%	312 22%	~	45%~	~	14%~	~	25%~	17%~	11 21%~	~	~	~	~	~	~	1 8%~	12 24%~	9 20%~	4 19%~	4 18%~	9 21%~
ALWAYS	46 70%	995 70%	100%~	36%~	81%~	88%~	56%~	83%~	65%~	34 65%~	1 100%~	~	~	~	2 100%~	3 60%~	11 85%~	32 65%~	33 75%~	12 57%~	16 73%~	29 67%~
#ALWAYS + USUALLY (NET)	59 89%	1307 92%	100%~	82%~	95%~	88%~	81%~	100%~	87%~	45 87%~	1 100%~	~	~	~	2 100%~	5 100%~	12 92%~	44 90%~	42 95%~	16 76%~	20 91%~	38 88%~
TOP BOX SCORE	46 70%	995 70%	100%~	36%~	81%~	88%~	56%~	83%~	65%~	34 65%~	1 100%~	~	~	~	2 100%~	3 60%~	11 85%~	32 65%~	33 75%~	12 57%~	16 73%~	29 67%~
NOT ANSWERED	8	27			1	1	2	2	1	4					2	1	1	6	5	3	1	6
VALID CASES	66	1414	3	11	21	8	16	6	52	1					2	5	13	49	44	21	22	43
NUMBER OF RESPONDENTS	74	1441	3	12	22	10	18	7	56	1					4	6	14	55	49	24	23	49
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q33 YES	102 35%	1804 36%	8 33%~	20 44%~	19 39%~	23 38%	19 24%*	9 36%~	80 33%~	~	~	~	100%~	83%~	38%~	16	77	69	29	34	64
																52%~	31%~	35%	33%	31%	37%
NO	188 65%	3261 64%	16 67%~	25 56%~	30 61%~	38 62%	60 76%*	16 64%~	162 67%~	2 100%~	1 100%~	~	~	17%~	63%~	15	169	126	59	77	109
																48%~	69%~	65%	67%	69%	63%
NOT ANSWERED	19	388				1	2	1	4								4	2	2	1	3
VALID CASES	290	5065	24	45	49	61	79	25	242	2	1		1	6	16	31	246	195	88	111	173
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%		1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%

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

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
PQ34 NEVER	6 2%	97 2%	1 ~	2 2%	2 ~	2 3%	2 3%	4 2%	~	~	~	~	~	~	1 6%	3 ~	6 3%*	~	1 0.9%	4 2%	
SOMETIMES	17 6%	322 6%	3 13%	1 2%	2 4%	6 10%	3 4%	14 6%	~	~	~	~	~	~	~	14 6%	10 5%	5 6%	5 5%	10 6%	
USUALLY	42 15%	697 14%	2 8%	11 24%	9 19%	5 8%	9 12%	5 20%	14 14%	~	~	1 ~100%	2 33%	1 6%	11 35%	29 12%	28 15%	13 15%	16 14%	25 15%	
ALWAYS	223 77%	3891 78%	19 79%	32 71%	37 77%	48 79%	64 82%	20 80%	188 78%	2 100%	1 100%	~	4 67%	14 88%	20 65%	198 81%	149 77%	70 80%	89 80%	132 77%	
#ALWAYS + USUALLY (NET)	265 92%	4589 92%	21 88%	43 96%	46 96%	53 87%	73 94%	25 100%	222 93%	2 100%	1 100%	~	1 100%	6 100%	15 94%	31 100%	227 93%	177 92%	83 94%	105 95%	157 92%
TOP BOX SCORE	223 77%	3891 78%	19 79%	32 71%	37 77%	48 79%	64 82%	20 80%	188 78%	2 100%	1 100%	~	4 67%	14 88%	20 65%	198 81%	149 77%	70 80%	89 80%	132 77%	
NOT ANSWERED	2	87			1		1		2							2	2			2	
VALID CASES	288	5008	24	45	48	61	78	25	240	2	1		1	6	16	31	244	193	88	111	171
NUMBER OF RESPONDENTS	290 100%	5095 100%	24 100%	45 100%	49 100%	61 100%	79 100%	25 100%	242 100%	2 100%	1 100%		1 100%	6 100%	16 100%	31 100%	246 100%	195 100%	88 100%	111 100%	173 100%

[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?

	JCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q35 WORST HEALTH PLAN POSSIBLE	2 0.7%	59 1%	1 ~ 2%	~	~	~	~	~	~	~	~	~	~	~	1 ~0.4%	2 1%	1 ~0.9%	~			
01	3 1%	31 0.6%	~	~	2 4%	1 1%	2 0.9%	~	~	~	~	~	~	~	2 ~0.9%	3 4%	2 2%	1 0.6%			
02	2 0.7%	40 0.8%	1 ~ 2%	1 2%	~	~	2 0.9%	~	~	~	~	~	~	~	2 ~0.9%	2 1%	~	2 1%			
03	4 1%	85 2%	1 ~ 2%	1 2%	2 4%	~	3 1%	~	~	~	~	1 ~17%	~	~	4 ~2%	3 2%	1 1%	3 0.9%			
04	7 3%	121 2%	2 ~ 5%	3 7%	1 2%	1 1%	6 3%	~	~	~	~	~	1 7%	1 3%	6 3%	4 2%	3 4%	2 2%	5 3%		
05	19 7%	451 9%	4 18%	2 5%	3 7%	5 9%	4 5%	1 4%	18 8%	~	~	~	1 ~17%	~	19 8%	15 8%	4 5%	8 7%	10 6%		
06	25 9%	332 7%	2 9%	5 12%	4 9%	3 5%	9 12%	2 8%	23 10%	~	~	~	~	~	1 3%	23 10%	16 9%	9 11%	10 9%	15 9%	
07	31 11%	632 13%	3 14%	5 12%	4 9%	5 9%	11 14%	1 4%	28 12%	~	~	~	~	~	1 7%	4 13%	25 11%	19 10%	10 12%	12 11%	18 11%
08	54 20%	921 19%	4 18%	5 12%	8 19%	13 23%	20 26%	4 16%	46 20%	1 50%	~	~	~	1 ~17%	4 27%	48 21%	34 18%	18 22%	20 19%	34 21%	
09	53 19%	768 16%	2 9%	8 19%	8 19%	13 23%	15 19%	7 28%	47 21%	1 50%	~	~	1 ~100%	~	4 27%	47 20%	35 19%	18 22%	21 20%	32 20%	
BEST HEALTH PLAN POSSIBLE	74 27%	1430 29%	7 32%	13 30%	11 26%	13 23%	17 22%	10 40%	53 23%	1 ~100%	~	~	3 ~50%	4 27%	16 53%	55 24%	56 30%	17 20%	30 28%	42 26%	
#8-10 (NET)	181 66%	3119 64%	13 59%	26 60%	27 63%	39 68%	52 67%	21 84%	146 64%	2 100%	1 100%	~	1 ~100%	4 67%	12 80%	24 80%	150 65%	53 67%	71 66%	108 67%	

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?

	JCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE		
9-10 (NET)	127 46%	2198 45%	9 41%	21 49%	19 44%	26 46%	32 41%	17 68%	100 44%	1 50%	1 100%	1 ~100%	3 50%	8 53%	20 67%	102 44%	91 49%	35 42%	51 48%	74 46%
NOT ANSWERED	35	583	2	2	6	5	3	1	18					1	1	18	11	7	5	14
VALID CASES	274	4870	22	43	43	57	78	25	228	2	1	1	6	15	30	232	186	83	107	162
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%	1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%
MEAN	7.88	7.82	7.86	7.67	7.67	7.74	7.96	8.76	7.82	8.50	10.0	9.00	7.67	7.93	8.87	7.79	7.96	7.69	7.91	7.90
p stat_(*=Sig @ p<=.05)		.697	~	~	~.597	.637	~	~	~	~	~	~	~	~	~	~	~.358	.335	.848	.816

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?

	JCC TOT ADLT	OHP TOT ADLT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ ALSK	MUL- TI	WHTE	NOT HIS- IC	HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE			
Q35A YES	32 11%	736 14%	1 4%	1 2%	4 8%	6 10%	13 16%	6 23%	28 11%	~	~	~	~	~	1 6%	2 6%	27 11%	15 8%*	16 18%*	6 5%*	25 14%*	
NO	259 89%	4378 86%	22 96%	44 98%	45 92%	55 90%	68 84%	20 77%	217 89%	2 100%	1 100%	~	1 100%	6 100%	15 94%	29 94%	222 89%	181 92%*	73 82%*	105 95%*	150 86%*	
NOT ANSWERED	18	339	1			1			1							1	1	1	1	1	1	
VALID CASES	291	5114	23	45	49	61	81	26	245	2	1		1	6	16	31	249	196	89	111	175	
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%		1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%	

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

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q35B NEVER	5 16%	123 19%	1 100%	~	~	1 17%	3 23%	4 14%	~	~	~	~	~	1 50%	3 11%	2 13%	3 19%	2 33%	3 12%	
SOMETIMES	3 9%	72 11%	~	~	1 25%	1 8%	1 17%	2 7%	~	~	~	~	1 100%	3 11%	1 7%	2 13%	~	3 12%		
USUALLY	12 38%	177 27%	~	~	1 25%	2 33%	5 38%	4 67%	12 43%	~	~	~	~	12 44%	4 27%	8 50%	3 17%	9 36%		
ALWAYS	12 38%	279 43%	~	1 100%	2 50%	3 50%	4 31%	1 17%	10 36%	~	~	~	~	1 50%	9 33%	8 53%	3 19%	1 17%	10 40%	
#ALWAYS + USUALLY (NET)	24 75%	456 70%	~	1 100%	3 75%	5 83%	9 69%	5 83%	22 79%	~	~	~	~	1 50%	21 78%	12 80%	11 69%	4 67%	19 76%	
TOP BOX SCORE	12 38%	279 43%	~	1 100%	2 50%	3 50%	4 31%	1 17%	10 36%	~	~	~	~	1 50%	9 33%	8 53%	3 19%	1 17%	10 40%	
NOT ANSWERED		24																		
VALID CASES	32	651	1	1	4	6	13	6	28					1	2	27	15	16	6	25
NUMBER OF RESPONDENTS	32 100%	675 100%	1 100%	1 100%	4 100%	6 100%	13 100%	6 100%	28 100%					1 100%	2 100%	27 100%	15 100%	16 100%	6 100%	25 100%

[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?

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ AS- PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE			
Q35C YES	46 16%	760 15%	2 9%~	3 7%~	4 8%~	8 14%	23 29%*	5 22%~	40 17%~	~	~	~	~	~	3 19%~	4 13%~	40 17%~	24 13%*	22 26%*	14 13%	32 19%
NO	234 84%	4319 85%	21 91%~	39 93%~	44 92%~	50 86%	57 71%*	18 78%~	195 83%~	2 100%~	1 100%~	~	1 100%~	5 100%~	13 81%~	27 87%~	199 83%~	164 87%*	64 74%*	95 87%	135 81%
NOT ANSWERED	29	373	1	3	1	4	1	3	11					1		11	9	4	3	9	
VALID CASES	280	5080	23	42	48	58	80	23	235	2	1		1	5	16	31	239	188	86	109	167
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%		1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%



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

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q35D NEVER	18 43%	165 23%~	1 50%~	2 67%~	2 50%~	3 50%~	9 43%~	15 41%~	~	~	~	~	~	~	2 50%~	15 42%~	10 50%~	8 36%~	3 23%~	15 52%~
SOMETIMES	5 12%	141 19%~	~	~	1 25%~	3 14%~	1 20%~	5 14%~	~	~	~	~	~	~	4 11%~	2 10%~	3 14%~	4 31%~	1 3%~	
USUALLY	7 17%	179 25%~	~	~	1 25%~	1 17%~	5 24%~	7 19%~	~	~	~	~	~	~	7 19%~	1 5%~	6 27%~	2 15%~	5 17%~	
ALWAYS	12 29%	239 33%~	1 50%~	1 33%~	2 25%~	4 50%~	4 43%~	10 27%~	~	~	~	~	~	2 100%~	2 50%~	10 28%~	7 35%~	5 23%~	4 31%~	8 28%~
#ALWAYS + USUALLY (NET)	19 45%	418 58%~	1 50%~	1 33%~	1 25%~	3 50%~	9 43%~	4 80%~	17 46%~	~	~	~	~	2 100%~	2 50%~	17 47%~	8 40%~	11 50%~	6 46%~	13 45%~
TOP BOX SCORE	12 29%	239 33%~	1 50%~	1 33%~	2 25%~	4 50%~	4 43%~	10 27%~	~	~	~	~	~	2 100%~	2 50%~	10 28%~	7 35%~	5 23%~	4 31%~	8 28%~
NOT ANSWERED	4	20			2	2	3							1	4	4		1	3	
VALID CASES	42	725	2	3	4	6	21	5	37					2	4	36	20	22	13	29
NUMBER OF RESPONDENTS	46	745	2	3	4	8	23	5	40					3	4	40	24	22	14	32
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35C = YES]

Q35E IN THE LAST 6 MONTHS, DID YOU VISIT A PROVIDER FOR A SPECIFIC HEALTH ISSUE?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
JCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHTE	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q35E YES	168 58%	2872 56%	7 29%	22 49%	30 61%	40 65%	48 60%	18 72%	144 59%	1 50%	~	1 100%	1 17%	11 69%	13 42%	148 60%	99 51%*	65 73%*	50 45%*	117 67%*	
NO	123 42%	2261 44%	17 71%	23 51%	19 39%	22 35%	32 40%	7 28%	100 41%	1 50%	1 100%	~	5 83%	5 31%	18 58%	100 40%	97 49%*	24 27%*	62 55%*	57 33%*	
NOT ANSWERED	18	320					1	1	2						2	1	1		2		
VALID CASES	291	5133	24	45	49	62	80	25	244	2	1	1	6	16	31	248	196	89	112	174	
NUMBER OF RESPONDENTS	309	5453	24	45	49	62	81	26	246	2	1	1	6	16	31	250	197	90	112	176	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35F NO EFFORT AT ALL	7 4%	94 3%	~	~	4%~	2 5%~	2 4%~	1 6%~	5 4%~	~	~	~	~	~	~	1 8%~	5 4%~	1 1%*	6 9%*	3 6%	4 4%
A LITTLE EFFORT WAS MADE	7 4%	213 8%*	~	5%~	1 7%~	2 5%~	2 ~	2 11%~	7 5%~	~	~	~	~	~	~	~	7 5%~	4 4%	2 3%	~	7 6%*
SOME EFFORT WAS MADE	38 24%	662 24%	2 29%~	5 23%~	6 22%~	10 26%~	15 33%~	~	33 24%~	~	~	1 ~100%~	1 ~100%~	3 27%~	2 15%~	35 25%~	18 19%	19 30%	13 26%	25 23%	
A LOT OF EFFORT WAS MADE	109 68%	1793 65%	5 71%~	16 73%~	18 67%~	24 63%~	29 63%~	15 83%~	93 67%~	1 100%~	~	~	~	8 73%~	10 77%~	95 67%~	70 75%*	37 58%*	34 68%	74 67%	
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	147 91%	2455 89%	7 100%~	21 95%~	24 89%~	34 89%~	44 96%~	15 83%~	126 91%~	1 100%~	~	1 ~100%~	1 ~100%~	11 100%~	12 92%~	130 92%~	88 95%	56 88%	47 94%	99 90%	
TOP BOX SCORE	109 68%	1793 65%	5 71%~	16 73%~	18 67%~	24 63%~	29 63%~	15 83%~	93 67%~	1 100%~	~	~	~	8 73%~	10 77%~	95 67%~	70 75%*	37 58%*	34 68%	74 67%	
NOT ANSWERED	7	95			3	2	2		6							6	6	1		7	
VALID CASES	161	2763	7	22	27	38	46	18	138	1		1	1	11	13	142	93	64	50	110	
NUMBER OF RESPONDENTS	168	2858	7	22	30	40	48	18	144	1		1	1	11	13	148	99	65	50	117	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q35E = YES]

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

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE			
Q35G																						
NO EFFORT AT ALL	7 4%	135 5%	~	~	4%~	8%~	4%~	~	3%~	~	~	~	~	~	100%~	~	8%~	4%~	~	9%*	2%	5%
A LITTLE EFFORT WAS MADE	8 5%	226 8%	14%~	~	7%~	5%~	2%~	11%~	6%~	~	~	~	~	~	~	~	~	6%~	4%	5%	2%	6%
SOME EFFORT WAS MADE	38 24%	652 24%	29%~	23%~	21%~	18%~	31%~	22%~	25%~	~	~	~	~	~	27%~	15%~	25%~	17%*	34%*	26%	23%	
A LOT OF EFFORT WAS MADE	108 67%	1759 63%	57%~	77%~	68%~	68%~	62%~	67%~	66%~	100%~	~	~	100%~	~	73%~	77%~	66%~	79%*	52%*	70%	65%	
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	146 91%	2411 87%	86%~	100%~	89%~	87%~	93%~	89%~	91%~	100%~	~	~	100%~	~	100%~	92%~	91%~	96%*	86%	96%	88%	
TOP BOX SCORE	108 67%	1759 63%	57%~	77%~	68%~	68%~	62%~	67%~	66%~	100%~	~	~	100%~	~	73%~	77%~	66%~	79%*	52%*	70%	65%	
NOT ANSWERED	7	87			2	2	3		6								6	5	1		7	
VALID CASES	161	2771	7	22	28	38	45	18	138	1			1	1	11	13	142	94	64	50	110	
NUMBER OF RESPONDENTS	168	2858	7	22	30	40	48	18	144	1			1	1	11	13	148	99	65	50	117	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q35E = YES]

Q35H HOW MUCH EFFORT WAS MADE TO INCLUDE WHAT MATTERS MOST TO YOU IN CHOOSING WHAT TO DO NEXT?

	JCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHTE	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE	
Q35H NO EFFORT AT ALL	8 5%	191 7%	~	~	4%~	3 8%~	3 7%~	5 4%~	~	~	~	~	~	1 ~100%~	1 8%~	6 4%~	7 ~ 11%*	2 4%	6 6%	
A LITTLE EFFORT WAS MADE	12 8%	242 9%	1 14%~	3 ~ 11%~	4 11%~	1 2%~	3 17%~	10 7%~	~	~	~	~	~	2 ~ 18%~	12 ~ 9%~	5 5%	6 9%	~	12 ~ 11%*	
SOME EFFORT WAS MADE	45 28%	781 28%	3 43%~	5 23%~	9 32%~	7 19%~	18 40%~	3 17%~	43 31%~	~	~	1 ~100%~	~	1 ~ 9%~	3 23%~	41 29%~	22 24%	23 36%	21 42%*	24 22%*
A LOT OF EFFORT WAS MADE	94 59%	1558 56%	3 43%~	17 77%~	15 54%~	23 62%~	23 51%~	12 67%~	79 58%~	1 100%~	~	~	~	8 ~ 73%~	9 69%~	82 58%~	66 71%*	28 44%*	27 54%	67 61%
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	139 87%	2339 84%	6 86%~	22 100%~	24 86%~	30 81%~	41 91%~	15 83%~	122 89%~	1 100%~	~	1 ~100%~	~	9 ~ 82%~	12 92%~	123 87%~	88 95%*	51 80%*	48 96%*	91 83%*
TOP BOX SCORE	94 59%	1558 56%	3 43%~	17 77%~	15 54%~	23 62%~	23 51%~	12 67%~	79 58%~	1 100%~	~	~	~	8 ~ 73%~	9 69%~	82 58%~	66 71%*	28 44%*	27 54%	67 61%
NOT ANSWERED	9	85			2	3	3		7							7	6	1		8
VALID CASES	159	2773	7	22	28	37	45	18	137	1		1	1	11	13	141	93	64	50	109
NUMBER OF RESPONDENTS	168	2858	7	22	30	40	48	18	144	1		1	1	11	13	148	99	65	50	117
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35E = YES]

Q35I CHOICES FOR YOUR TREATMENT OR HEALTH CARE CAN INCLUDE CHOICES ABOUT MEDICINE, SURGERY, OR OTHER TREATMENT. IN THE LAST 6 MONTHS, DID THIS PROVIDER TELL YOU THERE WAS MORE THAN ONE CHOICE FOR YOUR TREATMENT OR HEALTH CARE?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	JCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	MALE	
Q35I YES	111 38%	1866 37%	5 21%	19 43%	25 51%	20 33%	27 34%	12 46%	94 39%	1 50%	1 100%	1 ~	6 ~	17% 38%	14 45%	91 37%	76 39%	34 38%	39 35%	71 41%
NO	178 62%	3186 63%	19 79%	25 57%	24 49%	41 67%	53 66%	14 54%	149 61%	1 50%	~	1 ~100%	5 83%	10 63%	17 55%	157 63%	119 61%	56 62%	73 65%	102 59%
NOT ANSWERED	20	400		1		1	1		3						2	2			3	
VALID CASES	289	5053	24	44	49	61	80	26	243	2	1	1	6	16	31	248	195	90	112	173
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%	1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%

Q35J IN THE LAST 6 MONTHS, DID YOUR PROVIDER TALK WITH YOU ABOUT THE PROS AND CONS OF EACH CHOICE FOR YOUR TREATMENT OR HEALTH CARE?

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q35J #YES	94 92%	1483 85%*	5 100%~	17 94%~	18 90%~	17 94%~	25 96%~	10 83%~	79 93%~	1 100%~	1 100%~			1 ~100%~	6 100%~	12 92%~	77 93%~	62 93%~	31 91%~	31 86%~	63 97%~
NO	8 8%	254 15%*		1 6%~	2 10%~	1 6%~	1 4%~	2 17%~	6 7%~							1 8%~	6 7%~	5 7%~	3 9%~	5 14%~	2 3%~
NOT ANSWERED	9	58		1	5	2	1		9							1	8	9		3	6
VALID CASES	102	1737	5	18	20	18	26	12	85	1	1			1	6	13	83	67	34	36	65
NUMBER OF RESPONDENTS	111 100%	1795 100%	5 100%	19 100%	25 100%	20 100%	27 100%	12 100%	94 100%	1 100%	1 100%			1 100%	6 100%	14 100%	91 100%	76 100%	34 100%	39 100%	71 100%

[ASKED IF Q35I = YES]

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

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q35K #YES	88 86%	1402 81%	3 60%~	14 78%~	19 90%~	18 95%~	24 92%~	9 82%~	76 88%~	1 100%~	~	~	~	~	5 83%~	11 85%~	72 87%~	61 90%~	26 79%~	29 81%~	59 91%~
NO	14 14%	326 19%	2 40%~	4 22%~	2 10%~	1 5%~	2 8%~	2 18%~	10 12%~	1 ~100%~	~	~	~	1 ~100%~	1 17%~	2 15%~	11 13%~	7 10%~	7 21%~	7 19%~	6 9%~
NOT ANSWERED	9	67		1	4	1	1	1	8							1	8	8	1	3	6
VALID CASES	102	1728	5	18	21	19	26	11	86	1	1			1	6	13	83	68	33	36	65
NUMBER OF RESPONDENTS	111	1795	5	19	25	20	27	12	94	1	1			1	6	14	91	76	34	39	71
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35I = YES]



Q35L IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PROVIDER MAKE IT EASY FOR YOU TO ASK QUESTIONS OR RAISE CONCERNS?

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35L NEVER	38 13%	654 13%	4 17%~	5 11%~	3 7%~	9 15%	10 13%	4 15%~	28 12%~	1 50%~	~	~	~	1 17%~	1 6%~	5 16%~	29 12%~	28 15%	10 11%	14 13%	22 13%
SOMETIMES	34 12%	567 11%	6 25%~	8 18%~	3 7%~	6 10%	9 12%	2 8%~	27 11%~	~	~	~	~	2 33%~	3 19%~	5 16%~	27 11%~	17 9%*	16 18%	11 10%	23 13%
USUALLY	61 22%	1126 23%	4 17%~	8 18%~	14 30%~	7 12%*	18 23%	9 35%~	56 24%~	~	~	~	~	3 19%~	3 29%~	52 21%~	39 21%	21 24%	27 25%	33 19%	
ALWAYS	149 53%	2613 53%	10 42%~	23 52%~	26 57%~	38 63%	41 53%	11 42%~	127 53%~	1 50%~	1 100%~	~	1 100%~	3 50%~	9 56%~	12 39%~	134 55%~	105 56%	42 47%	54 51%	95 55%
#ALWAYS + USUALLY (NET)	210 74%	3739 75%	14 58%~	31 70%~	40 87%~	45 75%	59 76%	20 77%~	183 77%~	1 50%~	1 100%~	~	1 100%~	3 50%~	12 75%~	21 68%~	186 77%~	144 76%	63 71%	81 76%	128 74%
TOP BOX SCORE	149 53%	2613 53%	10 42%~	23 52%~	26 57%~	38 63%	41 53%	11 42%~	127 53%~	1 50%~	1 100%~	~	1 100%~	3 50%~	9 56%~	12 39%~	134 55%~	105 56%	42 47%	54 51%	95 55%
NOT ANSWERED	27	493		1	3	2	3		8							8	8	1	6	3	
VALID CASES	282	4960	24	44	46	60	78	26	238	2	1		1	6	16	31	242	189	89	106	173
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%		1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%

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

	JCC TOT ADLT	OHP TOT ADLT	AGE							RACE							ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE			
Q35M ALWAYS	21 7%	387 8%	4 ~	5 9%~	5 11%~	4 9%	3 5%	20 8%~	~	~	~	~	1 ~	17%~	3 ~	18 7%~	13 7%	7 8%	5 5%	16 9%		
USUALLY	18 6%	258 5%	2 8%~	2 5%~	4 9%~	5 9%	3 4%	1 4%~	15 6%~	~	~	~	1 ~	17%~	~	15 6%~	6 3%*	10 11%*	8 7%	8 5%		
SOMETIMES	53 19%	881 18%	6 25%~	4 9%~	9 19%~	9 16%	18 23%	7 28%~	47 20%~	~	~	~	1 ~	100%~	1 17%~	3 20%~	6 19%~	45 19%~	32 17%	20 23%	18 17%	35 21%
NEVER	189 67%	3452 69%	16 67%~	34 77%~	29 62%~	39 67%	53 68%	14 56%~	155 65%~	2 100%~	1 100%~	~	~	3 50%~	12 80%~	22 71%~	162 68%~	138 73%*	50 57%*	77 71%	110 65%	
#NEVER + SOMETIMES (NET)	242 86%	4333 87%	22 92%~	38 86%~	38 81%~	48 83%	71 91%	21 84%~	202 85%~	2 100%~	1 100%~	~	1 ~	4 67%~	15 100%~	28 90%~	207 86%~	170 90%*	70 80%	95 88%	145 86%	
TOP BOX SCORE	189 67%	3452 69%	16 67%~	34 77%~	29 62%~	39 67%	53 68%	14 56%~	155 65%~	2 100%~	1 100%~	~	~	3 50%~	12 80%~	22 71%~	162 68%~	138 73%*	50 57%*	77 71%	110 65%	
NOT ANSWERED	28	476	1	2	4	3	1	9							1	10	8	3	4	7		
VALID CASES	281	4977	24	44	47	58	78	25	237	2	1		1	6	15	31	240	189	87	108	169	
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%		1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%	

Q35N IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER INTERRUPT YOU WHEN YOU WERE TALKING?

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35N ALWAYS	6 2%	113 2%	~	1 2%	1 2%	1 2%	2 3%	1 4%	6 3%	~	~	~	~	~	~	~	6 2%	1 0.5%*	4 4%	1 0.9%	5 3%
USUALLY	7 2%	124 2%	~	~	4 4%	2 3%	2 1%	1 8%	2 2%	~	~	~	~	1 17%	1 6%	~	6 2%	1 0.5%*	5 6%	2 2%	5 3%
SOMETIMES	40 14%	728 15%	6 25%	5 11%	2 4%	9 15%	11 14%	7 27%	34 14%	~	~	~	~	1 17%	4 25%	4 13%	34 14%	23 12%	16 18%	15 14%	24 14%
NEVER	231 81%	4037 81%	18 75%	38 86%	42 89%	48 80%	64 82%	16 62%	194 82%	2 100%	1 100%	~	1 100%	4 67%	11 69%	27 87%	197 81%	165 87%*	64 72%*	90 83%	138 80%
#NEVER + SOMETIMES (NET)	271 95%	4765 95%	24 100%	43 98%	44 94%	57 95%	75 96%	23 88%	228 96%	2 100%	1 100%	~	1 100%	5 83%	15 94%	31 100%	231 95%	188 99%*	80 90%*	105 97%	162 94%
TOP BOX SCORE	231 81%	4037 81%	18 75%	38 86%	42 89%	48 80%	64 82%	16 62%	194 82%	2 100%	1 100%	~	1 100%	4 67%	11 69%	27 87%	197 81%	165 87%*	64 72%*	90 83%	138 80%
NOT ANSWERED	25	451		1	2	2	3		8							7	7	1	4	4	
VALID CASES	284	5002	24	44	47	60	78	26	238	2	1		1	6	16	31	243	190	89	108	172
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%		1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%

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

	JCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR	AS- IAN	NATV ILND	AMER PAC ALSK	OTH	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q350 ALWAYS	6 2%	98 2%	1 4%	1 2%	~	~	1 1%	3 12%	5 2%	~	~	~	~	~	1 6%	~	6 2%	2 1%	4 4%	1 0.9%	5 3%
USUALLY	5 2%	112 2%	~	~	2 4%	1 2%	2 3%	~	4 2%	~	~	~	~	1 17%	~	~	5 2%	1 0.5%	3 3%	1 0.9%	4 2%
SOMETIMES	31 11%	493 10%	4 17%	3 7%	4 8%	8 14%	8 10%	4 15%	27 11%	~	~	~	~	~	3 19%	1 3%	26 11%	15 8%*	16 18%*	11 10%	20 12%
NEVER	240 85%	4278 86%	19 79%	39 91%	42 88%	50 85%	66 86%	19 73%	201 85%	2 100%	1 100%	~	1 100%	5 83%	12 75%	30 97%	204 85%	172 91%*	66 74%*	95 88%	141 83%
#NEVER + SOMETIMES (NET)	271 96%	4771 96%	23 96%	42 98%	46 96%	58 98%	74 96%	23 88%	228 96%	2 100%	1 100%	~	1 100%	5 83%	15 94%	31 100%	230 95%	187 98%*	82 92%	106 98%	161 95%
TOP BOX SCORE	240 85%	4278 86%	19 79%	39 91%	42 88%	50 85%	66 86%	19 73%	201 85%	2 100%	1 100%	~	1 100%	5 83%	12 75%	30 97%	204 85%	172 91%*	66 74%*	95 88%	141 83%
NOT ANSWERED	27	472	~	2	1	3	4	~	9	~	~	~	~	~	~	9	7	1	~	4	6
VALID CASES	282	4981	24	43	48	59	77	26	237	2	1	~	1	6	16	31	241	190	89	108	170
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%	~	1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%

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

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35P #YES DEFINITELY	193 68%	3312 67%	14 58%~	33 77%~	36 75%~	35 59%	54 70%	18 69%~	163 69%~	2 100%~	1 100%~	1 ~100%~	4 67%~	11 69%~	23 77%~	164 68%~	136 72%	54 62%	74 69%	117 68%	
YES SOMEWHAT	61 22%	1213 25%	5 21%~	6 14%~	10 21%~	20 34%*	15 19%	5 19%~	51 22%~	~	~	~	~	2 33%~	3 19%~	6 20%~	52 21%~	37 19%	23 26%	21 20%	39 23%
NO	28 10%	418 8%	5 21%~	4 9%~	2 4%~	4 7%	8 10%	3 12%~	23 10%~	~	~	~	~	2 13%~	1 3%~	26 11%~	17 9%	10 11%	12 11%	15 9%	
NOT ANSWERED	27	511		2	1	3	4		9						1	8	7	3	5	5	
VALID CASES	282	4942	24	43	48	59	77	26	237	2	1		1	6	16	30	242	190	87	107	171
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%		1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%

Q35Q A REGULAR DENTIST IS ONE YOU WOULD GO TO FOR CHECK-UPS AND CLEANINGS OR WHEN YOU HAVE A CAVITY OR TOOTH PAIN. DO YOU HAVE A REGULAR DENTIST?

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
JCC 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 ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE				
Q35Q YES	149 51%	2643 53%	15 63%~	27 60%~	30 61%~	29 47%	35 44%	10 38%~	126 51%~	1 50%~	~	~	~	4 67%~	4 25%~	19 61%~	123 49%~	110 56%*	36 40%*	46 41%*	101 57%*
NO	142 49%	2382 47%	9 38%~	18 40%~	19 39%~	33 53%	45 56%	16 62%~	119 49%~	1 50%~	1 100%~	~	1 ~100%~	2 33%~	12 75%~	12 39%~	126 51%~	86 44%*	54 60%*	65 59%*	75 43%*
NOT ANSWERED	18	428					1		1						1	1				1	
VALID CASES	291	5025	24	45	49	62	80	26	245	2	1		1	6	16	31	249	196	90	111	176
NUMBER OF RESPONDENTS	309	5453	24	45	49	62	81	26	246	2	1		1	6	16	31	250	197	90	112	176
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

Q35R IN THE LAST 6 MONTHS, IF YOU NEEDED TO SEE A DENTIST RIGHT AWAY BECAUSE OF A DENTAL EMERGENCY, DID YOU GET TO SEE A DENTIST AS SOON AS YOU WANTED?

	JCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE		
Q35R NEVER	57 42%	799 36%	5 45%	9 38%	10 42%	13 38%	11 39%	6 46%	45 39%	~	~	~	~	2 50%	3 60%	7 44%	45 39%	36 40%	20 45%	23 45%	31 37%	
SOMETIMES	35 26%	439 20%	2 18%	9 38%	8 33%	6 18%	6 21%	4 31%	31 27%	1 100%	~	~	~	1 25%	~	4 25%	29 25%	26 29%	8 18%	11 22%	24 29%	
USUALLY	19 14%	421 19%	2 18%	3 13%	1 4%	4 12%	8 29%	1 8%	19 17%	~	~	~	~	~	~	~	19 17%	11 12%	8 18%	9 18%	10 12%	
ALWAYS	26 19%	564 25%	2 18%	3 13%	5 21%	11 32%	3 11%	2 15%	20 17%	~	~	~	~	1 25%	2 40%	5 31%	21 18%	17 19%	8 18%	8 16%	18 22%	
#ALWAYS + USUALLY (NET)	45 33%	985 44%	4 36%	6 25%	6 25%	15 44%	11 39%	3 23%	39 34%	~	~	~	~	1 25%	2 40%	5 31%	40 35%	28 31%	16 36%	17 33%	28 34%	
TOP BOX SCORE	26 19%	564 25%	2 18%	3 13%	5 21%	11 32%	3 11%	2 15%	20 17%	~	~	~	~	1 25%	2 40%	5 31%	21 18%	17 19%	8 18%	8 16%	18 22%	
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	150	2730	12	21	25	27	51	13	129	1	1		1	2	11	14	134	104	46	60	90	
NOT ANSWERED	22	500	1			1	2		2							1	2	3		1	3	
VALID CASES	137	2223	11	24	24	34	28	13	115	1				4	5	16	114	90	44	51	83	
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%			1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%

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

	JCC TOT ADLT	OHP TOT ADLT	AGE							RACE							ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q36																						
EXCELLENT	27 9%	477 9%	4 17%~	3 7%~	6 13%~	9 15%	4 5%	1 4%~	25 10%~	1 50%~	~	~	~	~	1 6%~	2 6%~	23 9%~	27 14%*	11 10%	16 9%		
VERY GOOD	69 24%	1176 23%	7 29%~	19 42%~	13 27%~	7 11%*	18 23%	3 12%~	59 24%~	~	~	~	~	1 17%~	3 19%~	6 19%~	62 25%~	69 35%*	25 23%	43 25%		
GOOD	101 35%	1761 35%	9 38%~	16 36%~	19 40%~	20 33%	25 32%	11 42%~	81 33%~	1 50%~	1 100%~	~	1 100%~	2 33%~	5 31%~	16 52%~	80 33%~	101 51%*	39 35%	61 35%		
FAIR	62 22%	1244 25%	4 17%~	5 11%~	8 17%~	14 23%	21 27%	9 35%~	53 22%~	~	~	~	~	3 50%~	4 25%~	7 23%~	54 22%~	62 ~	25 23%	36 21%		
POOR	28 10%	405 8%	~	2 4%~	2 4%~	11 18%*	11 14%	2 8%~	24 10%~	~	~	~	~	3 19%~	3 ~	27 11%~	27 ~	28 31%~	11 10%	17 10%		
#EXCELLENT + VERY GOOD + GOOD (NET)	197 69%	3415 67%	20 83%~	38 84%~	38 79%~	36 59%	47 59%*	15 58%~	165 68%~	2 100%~	1 100%~	~	1 100%~	3 50%~	9 56%~	24 77%~	165 67%~	197 100%~	75 68%	120 69%		
NOT ANSWERED	22	389			1	1	2		4							4			1	3		
VALID CASES	287	5064	24	45	48	61	79	26	242	2	1		1	6	16	31	246	197	90	111	173	
NUMBER OF RESPONDENTS	309	5453	24	45	49	62	81	26	246	2	1		1	6	16	31	250	197	90	112	176	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	



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

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE	
Q37 EXCELLENT	57 20%	895 18%	8 33%~	11 24%~	7 14%~	11 18%	14 18%	5 19%	48 20%~	1 50%~	1 100%~	~	~	~	3 19%~	6 19%~	49 20%~	54 27%*	3 3%*	27 24%	30 17%
VERY GOOD	73 25%	1258 25%	4 17%~	18 40%~	14 29%~	12 19%	17 22%	8 31%~	60 25%~	~	~	~	~	1 17%~	8 50%~	6 19%~	66 27%~	58 29%*	15 17%*	25 22%	47 27%
GOOD	89 31%	1533 30%	9 38%~	9 20%~	14 29%~	18 29%	30 38%	8 31%~	77 32%~	~	~	~	~	3 50%~	3 19%~	12 39%~	73 30%~	57 29%	31 35%	35 31%	53 31%
FAIR	46 16%	1027 20%	3 13%~	5 11%~	11 22%~	13 21%	8 10%	4 15%~	38 16%~	1 50%~	~	~	1 100%~	2 33%~	~	6 19%~	38 15%~	23 12%*	22 25%*	16 14%	29 17%
POOR	23 8%	363 7%	~	2 4%~	3 6%~	8 13%	9 12%	1 4%~	20 8%~	~	~	~	~	2 13%~	2 3%~	1 9%~	21 9%~	5 3%*	17 19%*	9 8%	14 8%
#EXCELLENT + VERY GOOD + GOOD (NET)	219 76%	3685 73%	21 88%~	38 84%~	35 71%~	41 66%	61 78%	21 81%~	185 76%~	1 50%~	1 100%~	~	~	4 67%~	14 88%~	24 77%~	188 76%~	169 86%*	49 56%*	87 78%	130 75%
NOT ANSWERED	21	378					3		3								3		2		3
VALID CASES	288	5075	24	45	49	62	78	26	243	2	1		1	6	16	31	247	197	88	112	173
NUMBER OF RESPONDENTS	309	5453	24	45	49	62	81	26	246	2	1		1	6	16	31	250	197	90	112	176
	100%	100%	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, 2014?

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q38 #YES	101 36%	2160 44%*	3 14%~	11 26%~	18 37%~	22 36%	31 40%	12 48%~	85 36%~	1 50%~	~	1 ~100%~	2 33%~	5 36%~	14 45%~	83 35%~	59 31%*	40 46%*	34 32%	65 38%	
NO	179 64%	2803 56%*	19 86%~	32 74%~	30 63%~	39 64%	46 60%	13 52%~	152 64%~	1 50%~	1 100%~	~	4 ~ 67%~	9 64%~	17 55%~	156 65%~	131 69%*	47 54%*	73 68%	106 62%	
DON'T KNOW	4	112	2	1		1			4							4	4		3	1	
NOT ANSWERED	25	379		1	1		4	1	5					2		7	3	3	2	4	
VALID CASES	280	4963	22	43	48	61	77	25	237	2	1		1	6	14	31	239	190	87	107	171
NUMBER OF RESPONDENTS	309	5453	24	45	49	62	81	26	246	2	1		1	6	16	31	250	197	90	112	176
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTA	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q39 EVERY DAY	68 24%	1063 21%	1 4%	14 33%	10 21%	18 31%	21 27%	3 12%	61 25%	1 50%	~	~	~	~	4 27%	63 26%	38 20%*	28 32%*	26 24%	40 23%	
SOME DAYS	30 11%	463 9%	3 13%	3 7%	6 12%	6 10%	8 15%	4 15%	23 10%	~	~	~	~	2 33%	2 13%	7 23%	22 9%	16 8%	14 16%	18 17%*	12 7%*
NOT AT ALL	185 65%	3502 70%	20 83%	26 60%	32 67%	35 59%	50 63%	19 73%	156 65%	1 50%	1 100%	~	1 100%	4 67%	9 60%	24 77%	158 65%	138 72%*	45 52%*	65 60%	119 70%
DON'T KNOW	4	42		2		2			3						1		4	3	1	2	2
NOT ANSWERED	22	383			1	1	2		3								3	2	2	1	3
VALID CASES	283	5028	24	43	48	59	79	26	240	2	1		1	6	15	31	243	192	87	109	171
NUMBER OF RESPONDENTS	309	5453	24	45	49	62	81	26	246	2	1		1	6	16	31	250	197	90	112	176
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	JCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER PAC ALSK	OTH	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE	
Q40 NEVER	29 30%	435 26%	1 25%~	8 47%~	6 38%~	5 21%~	6 21%~	3 43%~	22 26%~	~	~	~	~	2 ~100%~	2 33%~	4 57%~	23 27%~	22 41%~	6 14%~	16 36%~	12 23%~
SOMETIMES	18 18%	355 21%	1 25%~	4 24%~	4 25%~	3 13%~	6 21%~	~	17 20%~	~	~	~	~	~	~	1 14%~	16 19%~	5 9%~	13 31%~	8 18%~	10 19%~
USUALLY	23 23%	280 17%	2 50%~	2 12%~	3 19%~	6 25%~	8 28%~	2 29%~	22 26%~	~	~	~	~	~	1 17%~	2 29%~	21 25%~	15 28%~	8 19%~	9 20%~	14 27%~
ALWAYS	28 29%	589 35%	~	3 18%~	3 19%~	10 42%~	9 31%~	2 29%~	23 27%~	1 100%~	~	~	~	~	3 50%~	~	25 29%~	12 22%~	15 36%~	11 25%~	16 31%~
#ALWAYS + USUALLY (NET)	51 52%	869 52%	2 50%~	5 29%~	6 38%~	16 67%~	17 59%~	4 57%~	45 54%~	1 100%~	~	~	~	~	4 67%~	2 29%~	46 54%~	27 50%~	23 55%~	20 45%~	30 58%~
TOP BOX SCORE	28 29%	589 35%	~	3 18%~	3 19%~	10 42%~	9 31%~	2 29%~	23 27%~	1 100%~	~	~	~	~	3 50%~	~	25 29%~	12 22%~	15 36%~	11 25%~	16 31%~
NOT ANSWERED		31																			
VALID CASES	98	1659	4	17	16	24	29	7	84	1				2	6	7	85	54	42	44	52
NUMBER OF RESPONDENTS	98	1690	4	17	16	24	29	7	84	1				2	6	7	85	54	42	44	52
	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.

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE		
Q41 NEVER	50 52%	750 46%	2 50%~	11 65%~	9 56%~	9 39%~	13 46%~	5 71%~	40 49%~						2 ~100%~	3 50%~	5 71%~	40 48%~	35 66%~	14 34%~	23 53%~	25 49%~
SOMETIMES	20 21%	380 23%	2 50%~	3 18%~	3 19%~	6 26%~	5 18%~	1 14%~	20 24%~								1 14%~	18 22%~	8 15%~	12 29%~	7 16%~	13 25%~
USUALLY	12 12%	243 15%		1 6%~	2 13%~	3 13%~	6 21%~		11 13%~						1 ~17%~		1 14%~	11 13%~	4 8%~	8 20%~	6 14%~	6 12%~
ALWAYS	14 15%	267 16%		2 ~12%~	2 13%~	5 22%~	4 14%~	1 14%~	11 13%~	1 100%~					2 ~33%~		14 ~17%~		6 11%~	7 17%~	7 16%~	7 14%~
#ALWAYS + USUALLY (NET)	26 27%	510 31%		3 ~18%~	4 25%~	8 35%~	10 36%~	1 14%~	22 27%~	1 100%~					3 ~50%~		1 14%~	25 30%~	10 19%~	15 37%~	13 30%~	13 25%~
TOP BOX SCORE	14 15%	267 16%		2 ~12%~	2 13%~	5 22%~	4 14%~	1 14%~	11 13%~	1 100%~					2 ~33%~		14 ~17%~		6 11%~	7 17%~	7 16%~	7 14%~
NOT ANSWERED		2 51				1 1	1 1		2								2		1 1	1 1	1 1	1 1
VALID CASES	96	1639	4	17	16	23	28	7	82	1					2	6	7	83	53	41	43	51
NUMBER OF RESPONDENTS	98	1690	4	17	16	24	29	7	84	1					2	6	7	85	54	42	44	52
	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.

	JCC TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER					
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE			
Q42 NEVER	53 56%	864 53%	2 50%~	11 69%~	9 60%~	11 46%~	14 52%~	5 71%~	41 51%~	1 100%~					2 ~100%~	4 80%~	5 71%~	45 55%~	37 74%~	15 36%~	24 56%~	27 55%~
SOMETIMES	18 19%	340 21%	1 25%~	3 19%~	2 13%~	6 25%~	5 19%~	1 14%~	18 22%~								2 29%~	14 17%~	6 12%~	12 29%~	7 16%~	11 22%~
USUALLY	10 11%	207 13%	1 25%~	1 6%~	1 7%~	3 13%~	4 15%~		10 12%~									10 12%~	4 8%~	6 14%~	7 16%~	3 6%~
ALWAYS	13 14%	215 13%		1 6%~	3 20%~	4 17%~	4 15%~	1 14%~	12 15%~								1 20%~	13 16%~	3 6%~	9 21%~	5 12%~	8 16%~
#ALWAYS + USUALLY (NET)	23 24%	422 26%	1 25%~	2 13%~	4 27%~	7 29%~	8 30%~	1 14%~	22 27%~								1 20%~	23 28%~	7 14%~	15 36%~	12 28%~	11 22%~
TOP BOX SCORE	13 14%	215 13%		1 6%~	3 20%~	4 17%~	4 15%~	1 14%~	12 15%~								1 20%~	13 16%~	3 6%~	9 21%~	5 12%~	8 16%~
NOT ANSWERED	4	64		1	1		2		3							1		3	4		1	3
VALID CASES	94	1626	4	16	15	24	27	7	81	1					2	5	7	82	50	42	43	49
NUMBER OF RESPONDENTS	98 100%	1690 100%	4 100%	17 100%	16 100%	24 100%	29 100%	7 100%	84 100%	1 100%					2 100%	6 100%	7 100%	85 100%	54 100%	42 100%	44 100%	52 100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

Q43 DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
JCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTE	AS- IAN AMER	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	HIS- IC	NOT VERY GOOD & FAIR & POOR	EX & VERY GOOD & POOR	FE- MALE	MALE		
Q43 YES	60 21%	1180 23%	1 ~	5 2%	8 10%	30 13%*	14 38%*	54 22%~	~	~	1 ~100%~	3 ~ 20%~	7 23%~	51 21%~	30 15%*	29 33%*	25 23%	34 19%		
NO	228 79%	3848 77%	24 100%~	43 98%~	44 90%~	54 87%*	49 62%*	12 46%~	190 78%~	2 100%~	1 100%~	6 ~	12 ~100%~	24 80%~	196 77%~	59 79%~	85 85%*	141 67%*	81%~	
DON'T KNOW		55																		
NOT ANSWERED	21	370		1		2		2				1		3	1	2	2	1		
VALID CASES	288	5028	24	44	49	62	79	26	244	2	1	1	6	15	31	247	196	88	110	175
NUMBER OF RESPONDENTS	309	5453	24	45	49	62	81	26	246	2	1	1	6	16	31	250	197	90	112	176
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	JCC TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE			
Q44 YES	26 10%	460 10%	2 ~	4 5%	7 8%	10 12%	3 14%	23 10%	~	~	~	~	~	2 17%	24 ~	13 7%*	12 16%	9 9%	17 10%			
NO	243 90%	4154 90%	24 100%	40 95%	44 92%	51 88%	62 86%	19 86%	209 90%	2 100%	1 100%	~	~	6 100%	10 83%	27 100%	210 90%	177 93%*	64 84%	95 91%	145 90%	
DON'T KNOW	17	459	1	1	3	8	3	12					1	2	4	12	4	12	6	11		
NOT ANSWERED	23	380	2		1	1	1	2						2		4	3	2	2	3		
VALID CASES	269	4614	24	42	48	58	72	22	232	2	1			6	12	27	234	190	76	104	162	
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%			1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%



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

	JCC TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q45 YES	108 38%	1742 35%	5 21%	12 27%	13 27%	24 39%	38 48%*	13 52%	97 40%	~	~	~	1 100%	2 33%	3 20%	8 26%	94 38%	57 29%*	48 55%*	40 36%	67 39%
NO	178 62%	3293 65%	19 79%	33 73%	35 73%	37 61%	41 52%*	12 48%	146 60%	2 100%	1 100%	~	~	4 67%	12 80%	23 74%	152 62%	137 71%*	40 45%*	71 64%	105 61%
NOT ANSWERED	23	417			1	1	2	1	3						1		4	3	2	1	4
VALID CASES	286	5036	24	45	48	61	79	25	243	2	1		1	6	15	31	246	194	88	111	172
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%		1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
JCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q46.1 YES	68 22%	1316 24%	1 4%	2 4%	7 14%	15 24%	29 36%*	12 46%	64 26%*	1 ~100%	~	~	~	6%	4 13%	62 25%*	32 16%*	34 38%*	23 21%	43 24%
NO	241 78%	4137 76%	23 96%	43 96%	42 86%	47 76%	52 64%*	14 54%	182 74%*	2 100%	~	1 ~100%	6 100%	15 94%	27 87%	188 75%*	165 84%*	56 62%*	89 79%	133 76%
VALID CASES	309	5453	24	45	49	62	81	26	246	2	1	1	6	16	31	250	197	90	112	176
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%	1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
JCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q46.2 YES	81 26%	1635 30%	1 4%	5 11%	7 14%	17 27%	35 43%*	15 58%~	72 29%*	~	~	~	1 100%~	1 17%~	4 25%~	6 19%~	73 29%*	38 19%*	40 44%*	31 28%	49 28%
NO	228 74%	3818 70%	23 96%~	40 89%~	42 86%~	45 73%	46 57%*	11 42%~	174 71%*	2 100%~	1 100%~	~	~	5 83%~	12 75%~	25 81%~	177 71%*	159 81%*	50 56%*	81 72%	127 72%
VALID CASES	309	5453	24	45	49	62	81	26	246	2	1	1	6	16	31	250	197	90	112	176	
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%	1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%	

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
JCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR	AS- IAN	NATV ILND	AMER HAW/ IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE			
Q46.3																					
YES	53 17%	862 16%	3 13%~	7 16%~	9 18%~	13 21%	15 19%	4 15%~	47 19%*	~	~	~	~	3 19%~	7 23%~	44 18%	34 17%	18 20%	17 15%	35 20%	
NO	256 83%	4591 84%	21 88%~	38 84%~	40 82%~	49 79%	66 81%	22 85%~	199 81%*	2 100%~	1 100%~	~	1 ~100%	6 100%~	13 81%~	24 77%~	206 82%	163 83%	72 80%	95 85%	141 80%
VALID CASES	309	5453	24	45	49	62	81	26	246	2	1		1	6	16	31	250	197	90	112	176
NUMBER OF RESPONDENTS	309	5453	24	45	49	62	81	26	246	2	1		1	6	16	31	250	197	90	112	176
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
JCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q47.1 YES	13 4%	281 5%	~	~	1 2%	2 3%	7 9%	2 8%	10 4%	~	~	~	~	~	1 6%	3 10%	9 4%	5 3%	8 9%*	5 4%	7 4%
NO	296 96%	5172 95%	24 100%	45 100%	48 98%	60 97%	74 91%	24 92%	236 96%	2 100%	1 100%	~	1 ~100%	6 ~100%	15 94%	28 90%	241 96%	192 97%	82 91%*	107 96%	169 96%
VALID CASES	309	5453	24	45	49	62	81	26	246	2	1	~	1	6	16	31	250	197	90	112	176
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%	~	1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
JCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q47.2 YES	9 3%	284 5%*	~	~	~	2%	5% 8%~	7 3%	~	~	~	~	1 6%~	2 6%~	7 3%	2 1%*	6 7%	4 4%	5 3%		
NO	300 97%	5169 95%*	100%~	100%~	100%~	98% 94%	92%~	239 97%	2 100%	1 100%	~	1 ~100%	6 ~100%	15 94%~	29 94%~	243 97%	195 99%*	84 93%	108 96%	171 97%	
VALID CASES	309	5453	24	45	49	62	81	26	246	2	1	~	1	6	16	31	250	197	90	112	176
NUMBER OF RESPONDENTS	309 100%	5453 100%	100%	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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
JCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q47.3 YES	14 5%	221 4%	~	~	1 2%	2 3%	7 9%	4 15%	11 4%	~	~	~	~	~	1 6%	~	12 5%	6 3%	7 8%	6 5%	8 5%
NO	295 95%	5232 96%	24 100%	45 100%	48 98%	60 97%	74 91%	22 85%	235 96%	2 100%	1 100%	~	1 ~100%	6 ~100%	15 ~100%	31 94%	238 100%	191 97%	83 92%	106 95%	168 95%
VALID CASES	309	5453	24	45	49	62	81	26	246	2	1	~	1	6	16	31	250	197	90	112	176
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%	~	1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
JCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q47.4																				
YES	54 17%	1002 18%	1 4%~	2 4%~	5 10%~	14 23%	21 26%*	9 35%~	49 20%*	~	~	~100%~	1 17%~	1 ~	6 19%~	45 18%	25 13%*	28 31%*	21 19%	32 18%
NO	255 83%	4451 82%	23 96%~	43 96%~	44 90%~	48 77%	60 74%*	17 65%~	197 80%*	2 100%~	1 100%~	~	5 83%~	16 100%~	25 81%~	205 82%	172 87%*	62 69%*	91 81%	144 82%
VALID CASES	309	5453	24	45	49	62	81	26	246	2	1	1	6	16	31	250	197	90	112	176
NUMBER OF RESPONDENTS	309	5453	24	45	49	62	81	26	246	2	1	1	6	16	31	250	197	90	112	176
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%



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

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE			
Q48 YES	98 34%	1692 34%	2 8%~	13 30%~	17 35%~	25 40%	28 35%	12 46%~	86 35%~	~	~	~	~	1 17%~	7 47%~	5 16%~	88 35%~	48 25%*	49 54%*	30 27%*	68 39%*	
NO	191 66%	3335 66%	22 92%~	31 70%~	32 65%~	37 60%	53 65%	14 54%~	160 65%~	2 100%~	1 100%~	~	~	1 ~100%~	5 83%~	8 53%~	26 84%~	161 65%~	147 75%*	41 46%*	82 73%*	107 61%*
NOT ANSWERED	20	426	1												1	1	2	1				
VALID CASES	289	5027	24	44	49	62	81	26	246	2	1			1	6	15	31	249	195	90	112	175
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%			1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%

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

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q49 YES	81 87%	1394 85%	2 100%	12 92%	12 80%	21 88%	24 89%	10 83%	72 88%	~	~	~	~	~	7 ~100%	3 75%	75 88%	38 84%	42 89%	23 79%	58 91%
NO	12 13%	240 15%	~	1 8%	3 20%	3 13%	3 11%	2 17%	10 12%	~	~	~	~	1 ~100%	1 ~25%	10 12%	7 16%	5 11%	6 21%	6 9%	
NOT ANSWERED	5	62			2	1	1		4							1	3	3	2	1	4
VALID CASES	93	1633	2	13	15	24	27	12	82					1	7	4	85	45	47	29	64
NUMBER OF RESPONDENTS	98	1695	2	13	17	25	28	12	86					1	7	5	88	48	49	30	68
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q48 = YES]

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
JCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q50 YES	181 63%	3255 65%	7 30%~	17 38%~	27 55%~	44 71%	62 77%*	21 81%~	159 65%~	1 ~100%~	1 ~100%~	1 17%~	10 63%~	11 35%~	163 65%~	101 52%*	77 86%*	64 57%	115 66%	
NO	108 37%	1781 35%	16 70%~	28 62%~	22 45%~	18 29%	19 23%*	5 19%~	86 35%~	2 100%~	~	~	5 ~83%~	6 38%~	20 65%~	86 35%~	94 48%*	13 14%*	48 43%	60 34%
NOT ANSWERED	20	417	1						1						1	2			1	
VALID CASES	289	5036	23	45	49	62	81	26	245	2	1	1	6	16	31	249	195	90	112	175
NUMBER OF RESPONDENTS	309	5453	24	45	49	62	81	26	246	2	1	1	6	16	31	250	197	90	112	176
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
Q51 YES	173 98%	2975 94%*	6 86%~	15 94%~	25 96%~	42 98%~	62 100%~	21 100%~	153 97%~	1 ~100%~	1 ~100%~	1 ~100%~	9 ~100%~	11 ~100%~	156 98%~	96 98%	74 97%	59 95%	113 99%	
NO	4 2%	176 6%*	1 14%~	1 6%~	1 4%~	1 2%~	~	~	4 3%~	~	~	~	~	~	4 2%~	2 2%	2 3%	3 5%	1 0.9%	
NOT ANSWERED	4	127		1	1	1			2				1		3	3	1	2	1	
VALID CASES	177	3151	7	16	26	43	62	21	157	1		1	1	9	11	160	98	76	62	114
NUMBER OF RESPONDENTS	181 100%	3278 100%	7 100%	17 100%	27 100%	44 100%	62 100%	21 100%	159 100%	1 100%		1 100%	1 100%	10 100%	11 100%	163 100%	101 100%	77 100%	64 100%	115 100%

[ASKED IF Q50 = YES]

NQ52 WHAT IS YOUR AGE?

	AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
	JCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
NQ52																				
18 TO 24	27 9%	547 10%	24 100%	~	~	~	~	~	19 8%	~	~	~	~	~	9 29%	15 6%*	20 10%	4 4%*	13 12%	11 6%
25 TO 34	51 17%	870 16%	~	45 ~100%	~	~	~	~	36 15%	~	~	~	1 ~17%	7 44%	4 13%	41 16%	38 19%	7 8%*	18 16%	27 15%
35 TO 44	52 17%	802 15%	~	~	49 ~100%	~	~	~	42 17%	~	~	~	2 ~33%	~	8 26%	40 16%	38 19%	10 11%	18 16%	31 18%
45 TO 54	66 21%	1153 21%	~	~	~	62 ~100%	~	~	53 22%	2 100%	~	~	3 ~50%	1 6%	2 6%	55 22%	38 19%	25 28%	23 21%	39 22%
55 TO 64	85 28%	1412 26%	~	~	~	~	81 ~100%	~	74 30%*	~	~	1 ~100%	~	6 ~38%	4 13%	76 30%*	48 24%	32 36%	32 29%	50 28%
65 TO 74	18 6%	405 7%	~	~	~	~	16 62%	~	13 5%	1 ~100%	~	~	~	1 6%	2 6%	15 6%	9 5%	8 9%	5 4%	11 6%
75 OR OLDER	10 3%	264 5%	~	~	~	~	10 38%	~	9 4%	~	~	~	~	1 6%	2 6%	8 3%	6 3%	4 4%	3 3%	7 4%
VALID CASES	309	5453	24	45	49	62	81	26	246	2	1	1	6	16	31	250	197	90	112	176
NUMBER OF RESPONDENTS	309	5453	24	45	49	62	81	26	246	2	1	1	6	16	31	250	197	90	112	176
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

NQ53 ARE YOU MALE OR FEMALE?

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
JCC 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 HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
NQ53 MALE	122 39%	2159 40%	13 54%~	18 40%~	18 37%~	23 37%	31 38%	8 31%~	95 39%	1 50%~	~	~	~	2 33%~	7 44%~	13 42%~	95 38%	77 39%	36 40%	112 100%~	~
FEMALE	187 61%	3294 60%	11 46%~	27 60%~	31 63%~	39 63%	50 62%	18 69%~	151 61%	1 50%~	1 100%~	~	1 100%~	4 67%~	9 56%~	18 58%~	155 62%	120 61%	54 60%	176 ~100%~	~
VALID CASES	309	5453	24	45	49	62	81	26	246	2	1	~	1	6	16	31	250	197	90	112	176
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%	~	1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%

[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?

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q54 8TH GRADE OR LESS	9 3%	312 6%*	~	~	4%~	1%~	1%~	3%~	7	~	~	~	~	~	~	6	3	6	3	5	4	
SOME HIGH SCHOOL BUT DID NOT GRADUATE	51 18%	755 15%	22%~	16%~	19%~	18%~	21%~	8%~	46	~	~	~	~	40%~	6%~	17%~	18%~	13%*	29%*	24%*	14%*	
HIGH SCHOOL GRADUATE OR GED	95 34%	1615 32%	43%~	32%~	27%~	32%~	33%~	48%~	82	~100%~	1	~100%~	1	~31%~	5	8	86	62	31	38	57	
SOME COLLEGE OR 2-YEAR DEGREE	88 31%	1732 34%	30%~	36%~	33%~	28%~	33%~	20%~	73	1	~	~	~	20%~	50%~	8	9	76	66	22	28	59
4-YEAR COLLEGE GRADUATE	27 10%	415 8%	4%~	14%~	8%~	12%~	9%~	8%~	23	1	~	~	~	40%~	2	1	26	22	5	5	22	
MORE THAN 4-YEAR COLLEGE DEGREE	12 4%	214 4%	~	2%~	4%~	8%~	4%~	4%~	10	~	~	~	~	13%~	2	1	11	11	1	5	7	
NOT ANSWERED	27	410	1	1	1	2	1	1	5					1	1	5	5	3	5	2		
VALID CASES	282	5043	23	44	48	60	80	25	241	2	1	1	5	16	30	245	192	87	107	174		
NUMBER OF RESPONDENTS	309	5453	24	45	49	62	81	26	246	2	1	1	6	16	31	250	197	90	112	176		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q55 ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE			
Q55 YES HISPANIC OR LATINO	31 11%	610 12%	9 38%~	4 9%~	8 17%~	2 4%*	3 4%*	3 12%~	16 7%~	~	~	~	1 ~100%~	3 50%~	31 ~100%~	~	24 ~13%	7 8%	13 12%	18 10%	
NO NOT HISPANIC OR LATINO	250 89%	4367 88%	15 63%~	41 91%~	40 83%~	55 96%*	76 96%*	23 88%~	226 93%~	2 100%~	1 100%~	~	~	3 50%~	16 100%~	250 ~100%~	165 87%	81 92%	95 88%	154 90%	
NOT ANSWERED	28	476			1	5	2		4								8	2	4	4	
VALID CASES	281	4977	24	45	48	57	79	26	242	2	1		1	6	16	31	250	189	88	108	172
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%		1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%



Q56.1 WHAT IS YOUR RACE? RESPONSE: WHITE

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE			
Q56.1 YES	262 85%	4262 78%*	19 79%~	43 96%~	42 86%~	54 87%	79 98%*	24 92%~	246 100%~					16 ~100%~	16 52%~	242 97%*	174 88%*	84 93%*	102 91%*	159 90%*	
NO	47 15%	1191 22%*	5 21%~	2 4%~	7 14%~	8 13%	2 2%*	2 8%~	2 ~100%~	1 ~100%~			1 ~100%~	6 ~100%~	15 ~48%~	8 3%*	23 12%*	6 7%*	10 9%*	17 10%*	
VALID CASES	309	5453	24	45	49	62	81	26	246	2	1		1	6	16	31	250	197	90	112	176
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%		1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
JCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	HIS- IC	NOT VERY GOOD & FAIR & POOR	EX & VERY GOOD & POOR	FE- MALE	MALE	
Q56.2 YES	4 1%	133 2%	2 ~ 4%	2 ~ 3%	2 ~ 3%	2 ~ 3%	2 ~ 3%	2 ~ 100%	~	~	~	~	2 ~ 13%	~	4 ~ 2%	4 2%	2 2%	2 1%		
NO	305 99%	5320 98%	24 100%	43 96%	49 100%	60 97%	81 100%	26 100%	246 100%	1 ~ 100%	1 ~ 100%	6 ~ 100%	14 88%	31 100%	246 98%*	193 98%*	90 100%	110 98%	174 99%	
VALID CASES	309	5453	24	45	49	62	81	26	246	2	1	1	6	16	31	250	197	90	112	176
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%	1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%

Q56.3 WHAT IS YOUR RACE? RESPONSE: ASIAN

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
JCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHTE	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q56.3 YES	3 1%	225 4%*	1 ~	2 2%~	~	1 ~	1 4%~	~	1 ~100%~	~	~	~	2 ~13%~	~	3 ~1%~	3 2%~	~	1 ~0.9%	2 1%	
NO	306 99%	5228 96%*	24 100%~	44 98%~	49 100%~	62 100%~	80 99%	246 96%~	2 100%~	~	1 ~100%~	6 100%~	14 88%~	31 100%~	247 99%	194 98%	90 100%~	111 99%	174 99%	
VALID CASES	309	5453	24	45	49	62	81	246	2	1	1	6	16	31	250	197	90	112	176	
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	246 100%	2 100%	1 100%	1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%	

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
JCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q56.4 YES	3 1%	41 0.7%	2 ~	4 4%	~	1 ~	1 1%	~	~	~	~	~	3 19%	~	3 1%	1 0.5%	2 2%	2 2%	1 0.6%	
NO	306 99%	5412 99%	24 100%	43 96%	49 100%	62 100%	80 99%	26 100%	246 100%	2 100%	1 100%	1 ~	6 100%	13 81%	31 100%	247 99%	196 99%	88 98%	110 98%	175 99%
VALID CASES	309	5453	24	45	49	62	81	26	246	2	1	1	6	16	31	250	197	90	112	176
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%	1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
JCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q56.5 YES	14 5%	314 6%	6 ~ 13%	1 ~	5 2%	2 6%	8 8%	~	~	~	1 ~100%	13 ~	1 3%	13 5%	8 4%	6 7%	6 5%	8 5%		
NO	295 95%	5139 94%	24 100%	39 87%	49 100%	61 98%	76 94%	24 92%	246 100%	2 100%	1 100%	6 ~	3 ~100%	30 97%	237 95%	189 96%	84 93%	106 95%	168 95%	
VALID CASES	309	5453	24	45	49	62	81	26	246	2	1	1	6	16	31	250	197	90	112	176
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%	1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%

Q56.6 WHAT IS YOUR RACE? RESPONSE: OTHER

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
JCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q56.6 YES	10 3%	300 5%*	4 ~	2 9%~	3 4%~	1 5%	1 1%	~	~	~	~	~	6 ~100%~	4 25%~	3 10%~	7 3%	6 3%	4 4%	4 4%	6 3%
NO	299 97%	5153 95%*	24 100%~	41 91%~	47 96%~	59 95%	80 99%	26 100%	246 100%~	2 100%~	1 100%~	1 ~	12 ~75%~	28 90%~	243 97%	191 97%	86 96%	108 96%	170 97%	
VALID CASES	309	5453	24	45	49	62	81	26	246	2	1	1	6	16	31	250	197	90	112	176
NUMBER OF RESPONDENTS	309 100%	5453 100%	24 100%	45 100%	49 100%	62 100%	81 100%	26 100%	246 100%	2 100%	1 100%	1 100%	6 100%	16 100%	31 100%	250 100%	197 100%	90 100%	112 100%	176 100%

Q57 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
JCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q57 YES	27 12%	652 16%	2 11%~	4 12%~	4 11%~	3 7%~	7 10% 33%~	23 11%~	1 100%~	1 100%~	~	~	~	2 10%~	24 12%~	14 9%	12 17%	17 20%*	10 7%*		
NO	202 88%	3488 84%	16 89%~	29 88%~	34 89%~	41 93%~	66 90% 67%~	182 89%~	~	~	1 ~100%~	4 100%~	8 100%~	18 90%~	181 88%~	142 91%	57 83%	68 80%*	133 93%*		
NOT ANSWERED	4	78			1	1		1						1	4				2		
VALID CASES	229	4141	18	33	38	44	73	205	1	1	1	4	8	20	205	156	69	85	143		
NUMBER OF RESPONDENTS	233 100%	4219 100%	18 100%	33 100%	39 100%	45 100%	73 100%	206 100%	1 100%	1 100%	1 100%	4 100%	8 100%	20 100%	206 100%	160 100%	69 100%	85 100%	145 100%		

[ASKED IF SURVEY COMPLETED BY MAIL]

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

	JCC TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q58.1 YES	14 52%	253 47%	2 ~50%	3 ~75%	2 ~67%	2 ~29%	5 ~71%	11 48%	1 ~100%	~	~	~	1 ~50%	12 ~50%	8 ~57%	6 ~50%	10 ~59%	4 ~40%		
NO	13 48%	289 53%	2 ~100%	2 ~50%	1 ~25%	1 ~33%	5 ~71%	2 ~29%	12 52%	1 100%	~	~	~	~	1 ~50%	12 ~50%	6 43%	6 50%	7 41%	6 60%
VALID CASES	27	542	2	4	4	3	7	7	23	1	1				2	24	14	12	17	10
NUMBER OF RESPONDENTS	27 100%	542 100%	2 100%	4 100%	4 100%	3 100%	7 100%	7 100%	23 100%	1 100%	1 100%				2 100%	24 100%	14 100%	12 100%	17 100%	10 100%

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



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

	JCC TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE
Q58.2 YES	15 56%	188 35%	1 ~ 25%	3 75%	3 100%	6 86%	2 29%	12 52%	1 100%	~	~	~	~	2 100%	12 50%	6 43%	9 75%	8 47%	7 70%
NO	12 44%	354 65%	2 100%	3 75%	1 25%	1 ~ 14%	5 71%	11 48%	1 100%	~	~	~	~	12 ~ 50%	8 57%	3 25%	9 53%	3 30%	
VALID CASES	27	542	2	4	4	3	7	7	23	1	1			2	24	14	12	17	10
NUMBER OF RESPONDENTS	27 100%	542 100%	2 100%	4 100%	4 100%	3 100%	7 100%	7 100%	23 100%	1 100%	1 100%			2 100%	24 100%	14 100%	12 100%	17 100%	10 100%

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

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
JCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q58.3 YES	7 26%	197 36%	2 100%	1 25%	1 25%	~	3 43%	7 30%	~	~	~	~	~	1 50%	6 25%	4 29%	2 17%	5 29%	2 20%	
NO	20 74%	345 64%	~	3 75%	3 75%	3 100%	7 100%	4 57%	16 70%	1 100%	1 100%	~	~	~	1 50%	18 75%	10 71%	10 83%	12 71%	8 80%
VALID CASES	27	542	2	4	4	3	7	7	23	1	1			2	24	14	12	17	10	
NUMBER OF RESPONDENTS	27 100%	542 100%	2 100%	4 100%	4 100%	3 100%	7 100%	7 100%	23 100%	1 100%	1 100%			2 100%	24 100%	14 100%	12 100%	17 100%	10 100%	

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

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
JCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q58.4 YES	3 11%	81 15%	~	~	~	~	29% 14%	2 9%	~	~	~	~	~	2 100%	1 4%	1 7%	2 17%	2 12%	1 10%	
NO	24 89%	461 85%	2 100%	4 100%	4 100%	3 100%	5 71%	6 86%	21 91%	1 100%	1 100%	~	~	~	23 96%	13 93%	10 83%	15 88%	9 90%	
VALID CASES	27	542	2	4	4	3	7	7	23	1	1			2	24	14	12	17	10	
NUMBER OF RESPONDENTS	27 100%	542 100%	2 100%	4 100%	4 100%	3 100%	7 100%	7 100%	23 100%	1 100%	1 100%			2 100%	24 100%	14 100%	12 100%	17 100%	10 100%	

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

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

	JCC TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q58.5 YES	1 4%	44 8%	18 24	25 34	35 44	45 54	55 64	65 OVER	1 4%							1 4%	1 7%	1 6%			
NO	26 96%	498 92%	2 100%	3 100%	4 100%	3 100%	7 100%	7 100%	22 96%	1 100%	1 100%					2 100%	23 96%	13 93%	12 100%	16 94%	10 100%
VALID CASES	27	542	2	4	4	3	7	7	23	1	1					2	24	14	12	17	10
NUMBER OF RESPONDENTS	27 100%	542 100%	2 100%	4 100%	4 100%	3 100%	7 100%	7 100%	23 100%	1 100%	1 100%					2 100%	24 100%	14 100%	12 100%	17 100%	10 100%

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

NQ13 RATING OF ALL HEALTH CARE

	JCC TOT ADLT	OHP TOT ADLT	AGE							RACE							ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
NQ13 0-6	39 18%	759 20%	2 18%~	3 9%~	10 26%~	9 20%~	9 15%	5 26%~	31 17%~	~	~	~	~	2 67%~	3 23%~	1 5%~	35 19%~	16 12%*	20 28%*	11 14%	27 20%	
7-8	82 38%	1267 34%	4 36%~	14 42%~	12 31%~	18 40%~	27 44%	5 26%~	70 38%~	~	~	~	1 100%~	1 33%~	7 54%~	6 32%~	73 39%~	46 34%	34 48%*	35 46%	45 34%	
9-10	93 43%	1714 46%	5 45%~	16 48%~	17 44%~	18 40%~	26 42%	9 47%~	81 45%~	2 100%~	~	~	~	~	3 23%~	12 63%~	78 42%~	74 54%*	17 24%*	30 39%	62 46%	
VALID CASES	214	3741	11	33	39	45	62	19	182	2			1	3	13	19	186	136	71	76	134	
NUMBER OF RESPONDENTS	214 100%	3741 100%	11 100%	33 100%	39 100%	45 100%	62 100%	19 100%	182 100%	2 100%			1 100%	3 100%	13 100%	19 100%	186 100%	136 100%	71 100%	76 100%	134 100%	
MEAN	2.25	2.26	2.27	2.39	2.18	2.20	2.27	2.21	2.27	3.00			2.00	1.33	2.00	2.58	2.23	2.43	1.96	2.25	2.26	
p stat_(*=Sig @ p<=.05)		.955	~	~	~	~.778	~	~	~	~	~	~	~	~	~	~	~	~.000*	~.000*	~.972	~.819	

[ASKED IF Q7 >= 1 TIME]

NQ23 RATING OF PERSONAL DOCTOR

	JCC TOT ADLT	OHP TOT ADLT	AGE							RACE							ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE			
NQ23 0-6	24 11%	617 16%	3 23%	3 11%	5 14%	6 12%	4 7%	3 15%	20 11%	~	~	~	~	~	1 11%	1 5%	22 12%	10 7%*	13 18%*	7 10%	17 13%	
7-8	45 21%	999 25%	4 31%	3 11%	9 24%	11 22%	13 22%	4 20%	41 23%	~	~	~	~	~	2 22%	4 19%	38 21%	25 19%	19 26%	22 31%*	21 16%*	
9-10	142 67%	2342 59%*	6 46%	21 78%	23 62%	33 66%	42 71%	13 65%	119 66%	1 100%	1 100%	~	1 100%	5 100%	6 67%	16 76%	119 66%	99 74%*	40 56%*	43 60%	96 72%	
VALID CASES	211	3959	13	27	37	50	59	20	180	1	1	~	1	5	9	21	179	134	72	72	134	
NUMBER OF RESPONDENTS	211 100%	3959 100%	13 100%	27 100%	37 100%	50 100%	59 100%	20 100%	180 100%	1 100%	1 100%	~	1 100%	5 100%	9 100%	21 100%	179 100%	134 100%	72 100%	72 100%	134 100%	
MEAN	2.56	2.44	2.23	2.67	2.49	2.54	2.64	2.50	2.55	3.00	3.00	~	3.00	3.00	2.56	2.71	2.54	2.66	2.37	2.50	2.59	
p stat_(*=Sig @ p<=.05)		.017*	~	~	~.823	.269	~	~	~	~	~	~	~	~	~	~	~	~.007*	.005*	.366	.403	

[ASKED IF Q15 = YES]

NQ27 RATING OF SPECIALIST SEEN MOST OFTEN

	JCC TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
NQ27 0-6	15 14%	257 14%	1 ~	1 7%	5 7%	6 19%	2 17%	15 15%	~	~	~	~	~	1 ~	13 13%	6 9%	9 21%	7 18%	8 11%		
7-8	23 21%	429 23%	3 50%	2 14%	6 43%	5 19%	6 17%	1 8%	23 23%	~	~	~	~	~	~	1 14%	22 22%	14 22%	9 21%	11 28%	12 17%
9-10	73 66%	1164 63%	3 50%	11 79%	7 50%	16 62%	24 67%	9 75%	61 62%	2 100%	~	~	~	6 100%	5 71%	64 65%	45 69%	25 58%	21 54%	50 71%	
VALID CASES	111	1850	6	14	14	26	36	12	99	2				6	7	99	65	43	39	70	
NUMBER OF RESPONDENTS	111 100%	1850 100%	6 100%	14 100%	14 100%	26 100%	36 100%	12 100%	99 100%	2 100%				6 100%	7 100%	99 100%	65 100%	43 100%	39 100%	70 100%	
MEAN	2.52	2.49	2.50	2.71	2.43	2.42	2.50	2.58	2.46	3.00				3.00	2.57	2.52	2.60	2.37	2.36	2.60	
p stat_(*=Sig @ p<=.05)		.641	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

NQ35 RATING OF HEALTH PLAN

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
JCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE			
NQ35																					
0-6	62 23%	1116 23%	6 27%	12 28%	12 28%	13 23%	15 19%	3 12%	54 24%	~	~	~	~	2 33%	2 13%	2 7%	57 25%	42 23%	20 24%	24 22%	36 22%
7-8	85 31%	1551 32%	7 32%	10 23%	12 28%	18 32%	31 40%	5 20%	74 32%	1 50%	~	~	~	1 17%	5 33%	8 27%	73 31%	53 28%	28 34%	32 30%	52 32%
9-10	127 46%	2193 45%	9 41%	21 49%	19 44%	26 46%	32 41%	17 68%	100 44%	1 50%	1 100%	~	1 100%	3 50%	8 53%	20 67%	102 44%	91 49%	35 42%	51 48%	74 46%
VALID CASES	274	4860	22	43	43	57	78	25	228	2	1		1	6	15	30	232	186	83	107	162
NUMBER OF RESPONDENTS	274 100%	4860 100%	22 100%	43 100%	43 100%	57 100%	78 100%	25 100%	228 100%	2 100%	1 100%		1 100%	6 100%	15 100%	30 100%	232 100%	186 100%	83 100%	107 100%	162 100%
MEAN	2.24	2.22	2.14	2.21	2.16	2.23	2.22	2.56	2.20	2.50	3.00		3.00	2.17	2.40	2.60	2.19	2.26	2.18	2.25	2.23
p stat_(*=Sig @ p<=.05)		.747	~	~	~	.923	.794	~	~	~	~	~	~	~	~	~	~	.428	.442	.803	.947



GETTING NEEDED CARE

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE			
NPRBSEE4 NQ25	2.22	2.25	2.00	2.33	2.46	2.11	2.25	2.17	2.25	2.50						1.83	2.00	2.27	2.36	2.04	2.14	2.28	
p stat_(*=Sig @ p<=.05)		.625	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.030*	~	~	~	
NCARNES4 NQ14	2.28	2.30	2.18	2.24	2.32	2.29	2.28	2.26	2.30	3.00					3.00	1.33	1.92	2.47	2.26	2.35	2.13	2.33	2.25
p stat_(*=Sig @ p<=.05)		.682	~	~	~	~	.955	~	~	~	~	~	~	~	~	~	~	~	~	.057	.044*	.435	.458
COMPOSITE	2.25	2.28	2.09	2.29	2.39	2.20	2.27	2.21	2.27	2.75	x	x	3.00	1.33	1.88	2.24	2.27	2.36	2.09	2.24	2.26		
p stat_(*=Sig @ p<=.05)		.804	~	~	~	~	.921	~	~	~	~	~	~	~	~	~	~	~	~	.220	.327	.947	.852

GETTING CARE QUICKLY

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE			
NCARSN4 NQ4	2.39	2.38	1.75	2.62	2.50	2.17	2.37	2.45	2.42	3.00						2.00	2.00	2.25	2.40	2.41	2.35	2.32	2.40
p stat_(*=Sig @ p<=.05)		.837	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NAPGET4 NQ6	2.27	2.32	1.89	2.07	2.46	2.32	2.28	2.40	2.27	3.00	3.00				3.00	1.82	2.25	2.26	2.30	2.17	2.10	2.35	
p stat_(*=Sig @ p<=.05)		.410	~	~	~	~	.948	~	~	~	~	~	~	~	~	~	~	~	~	.648	.237	.055	.074
COMPOSITE	2.33	2.35	1.82	2.34	2.48	2.25	2.32	2.43	2.34	3.00	3.00	x	3.00	2.00	1.91	2.25	2.33	2.35	2.26	2.21	2.38		
p stat_(*=Sig @ p<=.05)		.889	~	~	~	~	.957	~	~	~	~	~	~	~	~	~	~	~	~	.864	.684	.480	.664

HOW WELL DOCTORS COMMUNICATE

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHER	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NDREXPL4 NQ17	2.66	2.62	2.75	2.74	2.68	2.77	2.62	2.42	2.63	3.00	3.00	3.00	3.00	3.00	2.78	2.94	2.64	2.75	2.52	2.67	2.66
p stat_(*=Sig @ p<=.05)		.436	~	~	~	~.582	~	~	~	~	~	~	~	~	~	~	~	~.023*	.030*	.861	.935
NDRLSTN4 NQ18	2.66	2.59	2.75	2.59	2.65	2.71	2.60	2.68	2.63	3.00	3.00	3.00	3.00	3.00	2.63	2.89	2.63	2.75	2.50	2.67	2.64
p stat_(*=Sig @ p<=.05)		.202	~	~	~	~.465	~	~	~	~	~	~	~	~	~	~	~	~.019*	.026*	.815	.633
NDRESPU4 NQ19	2.70	2.65	2.75	2.70	2.68	2.79	2.64	2.63	2.67	3.00	3.00	3.00	3.00	3.00	2.67	2.83	2.68	2.77	2.58	2.72	2.68
p stat_(*=Sig @ p<=.05)		.269	~	~	~	~.416	~	~	~	~	~	~	~	~	~	~	~	~.058	.082	.688	.522
NDRTMEN4 NQ20	2.59	2.49	2.88	2.61	2.57	2.66	2.49	2.63	2.55	3.00	3.00	3.00	3.00	3.00	2.78	2.83	2.57	2.69	2.42	2.59	2.60
p stat_(*=Sig @ p<=.05)		.060	~	~	~	~.194	~	~	~	~	~	~	~	~	~	~	~	~.016*	.011*	.973	.834
COMPOSITE	2.65	2.59	2.78	2.66	2.64	2.73	2.59	2.59	2.62	3.00	3.00	x 3.00	3.00	3.00	2.71	2.88	2.63	2.74	2.50	2.66	2.64
p stat_(*=Sig @ p<=.05)		.736	~	~	~	~.833	~	~	~	~	~	~	~	~	~	~	~	~.538	.564	.964	.962

CUSTOMER SERVICE

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE		
NPBCLCS4 NQ31	2.24	2.23	2.67	1.91	2.19	2.25	2.25	2.83	2.19	3.00					3.00	2.20	2.54	2.18	2.31	2.10	2.32	2.21
p stat_(*=Sig @ p<=.05)		.926	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ32	2.59	2.63	3.00	2.18	2.76	2.75	2.38	2.83	2.52	3.00					3.00	2.60	2.77	2.55	2.70	2.33	2.64	2.56
p stat_(*=Sig @ p<=.05)		.658	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.41	2.43	2.83	2.05	2.48	2.50	2.31	2.83	2.36	3.00	x	x	x	3.00	2.40	2.65	2.37	2.51	2.21	2.48	2.38	
p stat_(*=Sig @ p<=.05)		.956	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE		
NNRXWHY NQ10	2.92	2.84	2.50	3.00	3.00	2.92	2.94	2.86	2.91						3.00	3.00	2.50	2.94	2.92	2.92	2.94	2.91
p stat_(*=Sig @ p<=.05)		.026*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NNRXWYNT NQ11	2.51	2.45	2.00	2.64	2.56	2.58	2.44	2.57	2.51						3.00	2.33	2.50	2.51	2.51	2.50	2.41	2.57
p stat_(*=Sig @ p<=.05)		.506	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NRXBST NQ12	2.64	2.50	2.50	2.82	2.65	2.68	2.62	2.43	2.62						3.00	2.67	3.00	2.61	2.81	2.43	2.66	2.62
p stat_(*=Sig @ p<=.05)		.093	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.029*	~	~
COMPOSITE	2.69	2.60	2.33	2.82	2.73	2.73	2.67	2.62	2.68	x	x	x	x	3.00	2.67	2.67	2.69	2.75	2.62	2.67	2.70	
p stat_(*=Sig @ p<=.05)		.747	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.846	~	~

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

	JCC TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- IAN	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTH	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE	
PRBSEE4 Q25	77%	78%	57%	80%	92%	71%	80%	75%	77%	100%					83%	63%	80%	84%	69%	74%	80%
CARNES4 Q14	83%	82%	64%	85%	84%	83%	85%	79%	84%	100%			100%	33%	69%	84%	83%	85%	78%	86%	81%
AVERAGE	80.00	80.02	60.39	82.42	88.26	77.38	82.50	76.97	80.62	x	x	x	x	33.33	76.28	73.36	81.57	84.27	73.82	79.96	80.53

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

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- TI	OTH	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE		
CARSN4 Q4	85%	83%	50%	100%	88%	74%	83%	91%	86%	100%					100%	67%	75%	86%	84%	83%	79%	87%
APGET4 Q6	78%	80%	44%	67%	85%	85%	80%	80%	78%	100%	100%			100%		55%	75%	78%	78%	74%	69%	82%
AVERAGE	81.30	81.23	47.22	83.33	86.06	79.60	81.67	85.45	81.86	x	x	x	x	x	60.61		75.00	81.83	80.95	78.74	74.09	84.24

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

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE			
DREXPL4 Q17	93%	92%	88%	96%	94%	97%	94%	84%	93%	100%	100%		100%	100%	100%	100%	93%	96%	89%	93%	94%
DRLSTN4 Q18	91%	90%	88%	86%	90%	95%	92%	89%	91%	100%	100%		100%	100%	87%	100%	91%	95%	85%	95%	89%
DRESPU4 Q19	92%	91%	88%	87%	94%	97%	92%	84%	91%	100%	100%		100%	100%	89%	100%	91%	95%	87%	95%	90%
DRTMEN4 Q20	91%	88%	100%	91%	90%	95%	89%	89%	90%	100%	100%		100%	100%	100%	100%	91%	94%	85%	90%	92%
AVERAGE	91.9	90.4	90.6	90.1	91.9	96.1	92.0	86.8	91.2	x	x	x	x	x	94.1	100	91.5	95.4	86.7	93.1	91.5



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

	JCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE		
PBCLCS4 Q31	78%	76%	100%	55%	76%	75%	81%	100%	75%	100%					100%	60%	92%	73%	82%	67%	82%	74%
CSRESP Q32	89%	92%	100%	82%	95%	88%	81%	100%	87%	100%					100%	100%	92%	90%	95%	76%	91%	88%
AVERAGE	83.50	84.03	100.0	68.18	85.71	81.25	81.25	100.0	80.77	x	x	x	x	x	80.00		92.31	81.63	88.84	71.43	86.36	81.40

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	JCC TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- TI	OTHR	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE		
NRXWHY Q10	96%	92%	75%	100%	100%	96%	97%	93%	96%						100%	100%	75%	97%	96%	96%	97%	96%
NRXWYNT Q11	75%	73%	50%	82%	78%	79%	72%	79%	76%						100%	67%	75%	76%	75%	75%	71%	78%
RXBST Q12	82%	75%	75%	91%	82%	84%	81%	71%	81%						100%	83%	100%	80%	90%	71%	83%	81%
AVERAGE	84.6	79.8	66.7	90.9	86.7	86.4	83.3	81.0	84.0	x	x	x	x	x	83.3	83.3	84.3	87.4	80.8	83.5	84.9	

Q1 OUR RECORDS SHOW THAT YOUR CHILD IS NOW IN <JACKSON CARE CONNECT>. IS THAT RIGHT?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q1 YES	294	5304	1	43	66	93	91	188		3		4	12	27	109	162	260	12	227	67
	100%	100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%
NOT ANSWERED	6	59			3		3	3						1	4	2	6		5	1
VALID CASES	294	5304	1	43	66	93	91	188		3		4	12	27	109	162	260	12	227	67
NUMBER OF RESPONDENTS	300	5363	1	43	69	93	94	191		3		4	12	28	113	164	266	12	232	68
	100%	100%	100%	100%	100%	100%	100%	100%		100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC
Q3 YES	114 39%	1687 32%*		25 ~ 58%~	28 42%	30 33%	31 34%	79 41%	1 ~ 33%~	2 ~ 50%~	4 33%~	9 32%~	37 33%	71 43%	99 37%~	9 75%~	73 32%*	41 60%*	
NO	181 61%	3541 68%*	1 100%~	18 42%~	39 58%	62 67%	61 66%	112 59%	2 ~ 67%~	2 ~ 50%~	8 67%~	19 68%~	76 67%	93 57%	167 63%~	3 25%~	154 68%*	27 40%*	
NOT ANSWERED	5	135			2	1	2											5	
VALID CASES	295	5228	1	43	67	92	92	191	3	4	12	28	113	164	266	12	227	68	
NUMBER OF RESPONDENTS	300 100%	5363 100%	1 100%	43 100%	69 100%	93 100%	94 100%	191 100%	3 100%	4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%	

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q4 NEVER	2 2%	18 1%	~	~	~	~	2 8%	2 3%	~	~	~	~	~	2 3%	2 2%	~	2 3%	~		
SOMETIMES	8 8%	148 9%	~ 16%	4 8%	2 4%	1 4%	1 4%	3 4%	~ 100%	~	~ 25%	~	1 11%	3 5%	7 8%	~	7 11%	1 3%		
USUALLY	14 14%	323 20%	~ 20%	5 4%	1 21%	6 21%	2 8%	10 14%	~	~	~	~ 11%	1 20%	7 11%	7 16%	~	10 15%	4 11%		
ALWAYS	79 77%	1151 70%	~ 64%	16 88%	22 88%	21 75%	20 80%	54 78%	~	~	~ 100%	2 75%	3 89%	8 69%	24 81%	51 81%	67 74%	7 100%	47 71%	32 86%
#ALWAYS + USUALLY (NET)	93 90%	1475 90%	~ 84%	21 92%	23 92%	27 96%	22 88%	64 93%	~	~	~ 100%	2 75%	3 100%	9 89%	31 92%	58 92%	81 90%	7 100%	57 86%	36 97%
TOP BOX SCORE	79 77%	1151 70%	~ 64%	16 88%	22 88%	21 75%	20 80%	54 78%	~	~	~ 100%	2 75%	3 89%	8 69%	24 81%	51 81%	67 74%	7 100%	47 71%	32 86%
NOT ANSWERED	11	142			3	2	6	10						2	8	9	2	7	4	
VALID CASES	103	1641		25	25	28	25	69	1		2	4	9	35	63	90	7	66	37	
NUMBER OF RESPONDENTS	114	1783		25	28	30	31	79	1		2	4	9	37	71	99	9	73	41	
	100%	100%		100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q3 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC
Q5 YES	181 63%	3345 65%	1 100%~	36 86%~	38 58%	57 63%	49 54%	116 61%	1 ~ 33%~	3 ~ 75%~	7 58%~	18 67%~	69 62%	102 63%	160 61%~	10 91%~	127 57%*	54 81%*
NO	108 37%	1824 35%		6 ~ 14%~	28 42%	33 37%	41 46%	73 39%	2 ~ 67%~	1 ~ 25%~	5 42%~	9 33%~	43 38%	59 37%	103 39%~	1 9%~	95 43%*	13 19%*
NOT ANSWERED	11	194		1	3	3	4	2				1	1	3	3	1	10	1
VALID CASES	289	5169	1	42	66	90	90	189	3	4	12	27	112	161	263	11	222	67
NUMBER OF RESPONDENTS	300 100%	5363 100%	1 100%	43 100%	69 100%	93 100%	94 100%	191 100%	3 100%	4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q6 NEVER	3 2%	35 1%	~	~	3%~	2%	2%~	2%	~	~	~	~	~	2 3%	1 1%	3 2%~	~	2 2%	1 2%	
SOMETIMES	17 10%	451 14%	~	12%~	12%~	6%	13%~	10%	~	~	~	~	14%~	6%~	16%*	5%*	9%~	30%~	14 12%	3 6%
USUALLY	51 30%	814 26%	~	26%~	24%~	35%	33%~	33%	~	~	~	~	29%~	28%~	28%	32%	30%~	40%~	31 27%	20 38%
ALWAYS	97 58%	1829 58%	100%~	62%~	62%~	57%	51%~	55%	~100%~	1	3	4	12	35	57	88	30%~	3 59%	68 59%	29 55%
#ALWAYS + USUALLY (NET)	148 88%	2643 84%	100%~	88%~	85%~	93%	84%~	88%	~100%~	1	3	6	17	54	87	132	70%~	7 86%	99 86%	49 92%
TOP BOX SCORE	97 58%	1829 58%	100%~	62%~	62%~	57%	51%~	55%	~100%~	1	3	4	12	35	57	88	30%~	3 59%	68 59%	29 55%
NOT ANSWERED	13	215		2	4	3	4	10						2	9	11		12	1	
VALID CASES	168	3129	1	34	34	54	45	106	1		3	7	18	67	93	149	10	115	53	
NUMBER OF RESPONDENTS	181	3344	100%	100%	100%	100%	100%	100%	100%	1	3	7	18	69	102	160	10	127	54	
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q5 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q7 NONE	83 29%	1553 31%	1 100%	5 12%	18 28%	29 32%	30 34%	56 30%	1 ~ 33%	1 ~ 25%	4 33%	5 18%	37 34%	42 26%	77 29%	2 18%	75 34%*	8 12%*	
1 TIME	64 22%	1446 28%*		10 ~ 24%	16 25%	18 20%	20 23%	43 23%	~	~	1 ~ 25%	3 25%	7 25%	23 21%	41 25%	63 24%	1 9%	54 25%	10 15%
2	68 24%	1007 20%		9 ~ 21%	21 32%	21 23%	17 19%	42 22%	2 ~ 67%	2 ~ 50%	3 25%	8 29%	21 19%	42 26%	63 24%	1 9%	48 22%	20 29%	
3	31 11%	534 11%		5 ~ 12%	5 8%	13 14%	8 9%	20 11%	~	~	~	1 8%	4 14%	13 12%	16 10%	26 10%	3 27%	18 8%*	13 19%*
4	21 7%	260 5%		8 ~ 19%	3 5%	4 4%	6 7%	15 8%	~	~	~	1 8%	1 4%	8 7%	11 7%	17 6%	2 18%	15 7%	6 9%
5 TO 9	13 5%	196 4%		4 ~ 10%	1 2%	3 3%	5 6%	8 4%	~	~	~	~	2 7%	6 5%	7 4%	11 4%	1 9%	6 3%	7 10%
10 OR MORE TIMES	6 2%	87 2%		1 ~ 2%	1 2%	2 2%	2 2%	4 2%	~	~	~	~	1 4%	2 2%	4 2%	5 2%	1 9%	2 0.9%	4 6%
NOT ANSWERED	14	280		1	4	3	6	3					3	1	4	1	14		
VALID CASES	286	5083	1	42	65	90	88	188	3		4	12	28	110	163	262	11	218	68
NUMBER OF RESPONDENTS	300	5363	1	43	69	93	94	191	3		4	12	28	113	164	266	12	232	68
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q8 #YES	139 71%	2386 68%	24 ~ 69%~	33 72%~	47 78%	35 63%	92 71%	1 ~ 50%~	2 ~ 67%~	5 63%~	17 77%~	51 72%	82 70%	125 70%~	8 89%~	95 69%	44 73%		
NO	58 29%	1113 32%	11 ~ 31%~	13 28%~	13 22%	21 37%	37 29%	1 ~ 50%~	1 ~ 33%~	3 38%~	5 23%~	20 28%	35 30%	54 30%~	1 11%~	42 31%	16 27%		
NOT ANSWERED	6	69	2	1	1	2	3					1	2	4	6		6		
VALID CASES	197	3499	35	46	60	56	129	2	3	8	22	71	117	179	9	137	60		
NUMBER OF RESPONDENTS	203 100%	3568 100%	37 100%	47 100%	61 100%	58 100%	132 100%	2 100%	3 100%	8 100%	23 100%	73 100%	121 100%	185 100%	9 100%	143 100%	60 100%		

[ASKED IF Q7 >= 1 TIME]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q9 NEVER	5 2%	78 2%	~	~	1 2%~	1 2%	3 5%	5 4%~	~	~	~	~	~	~	~	5 4%*	5 3%~	~	3 2%	2 3%
SOMETIMES	22 11%	344 10%	~	6 16%~	6 13%~	3 5%*	7 12%	14 11%	~	1 50%~	~	~	1 13%~	4 17%~	7 10%	14 12%	18 10%~	3 33%~	17 12%	5 8%
USUALLY	42 21%	768 22%	~	7 19%~	8 17%~	14 23%	13 23%	26 20%	~	~	~	~	3 38%~	3 13%~	20 28%	21 17%	38 21%~	3 33%~	26 18%	16 27%
ALWAYS	132 66%	2292 66%	~	24 65%~	32 68%~	42 70%	34 60%	86 66%	~	1 50%~	~	3 100%~	4 50%~	16 70%~	45 63%	80 67%	122 67%~	3 33%~	95 67%	37 62%
#ALWAYS + USUALLY (NET)	174 87%	3059 88%	~	31 84%~	40 85%~	56 93%*	47 82%	112 85%	~	1 50%~	~	3 100%~	7 87%~	19 83%~	65 90%	101 84%	160 87%~	6 67%~	121 86%	53 88%
TOP BOX SCORE	132 66%	2292 66%	~	24 65%~	32 68%~	42 70%	34 60%	86 66%	~	1 50%~	~	3 100%~	4 50%~	16 70%~	45 63%	80 67%	122 67%~	3 33%~	95 67%	37 62%
NOT ANSWERED	2	87				1	1	1							1	1	2		2	
VALID CASES	201	3481		37	47	60	57	131		2		3	8	23	72	120	183	9	141	60
NUMBER OF RESPONDENTS	203	3568		37	47	61	58	132		2		3	8	23	73	121	185	9	143	60
	100%	100%		100%	100%	100%	100%	100%		100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q10 YES	72 36%	1122 32%	~ 19	~ 13	~ 19	~ 21	50 38%	~	~	~ 1	~ 3	~ 7	18 25%*	50 42%*	63 34%~	5 56%~	37 26%*	35 58%*
Q10 NO	129 64%	2348 68%	~ 18	~ 34	~ 41	~ 36	81 62%	~100%~	~ 2	~ 2	~ 5	~ 16	54 75%*	70 58%*	120 66%~	4 44%~	104 74%*	25 42%*
NOT ANSWERED	2	97			1	1	1						1	1	2		2	
VALID CASES	201	3471	37	47	60	57	131	2	3	8	23	72	120	183	9	141	60	
NUMBER OF RESPONDENTS	203	3568	37	47	61	58	132	2	3	8	23	73	121	185	9	143	60	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q7 >= 1 TIME]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q11 #YES	65 94%	947 94%	~	17 94%	12 92%	17 100%	19 90%	47 98%	~	~	~	1 100%	3 100%	6 86%	15 94%	47 96%	59 97%	3 75%	33 94%	32 94%
NO	4 6%	63 6%	~	1 6%	1 8%	~	2 10%	1 2%	~	~	~	~	~	1 14%	1 6%	2 4%	2 3%	1 25%	2 6%	2 6%
NOT ANSWERED	19	450		2	4	6	7	6							6	3	8	2	18	1
VALID CASES	69	1010		18	13	17	21	48				1	3	7	16	49	61	4	35	34
NUMBER OF RESPONDENTS	88	1460		20	17	23	28	54				1	3	7	22	52	69	6	53	35
	100%	100%		100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q12 #YES	42 62%	718 70%	8 ~ 44%	9 ~ 69%	11 ~ 65%	14 ~ 70%	32 68%	~	~	~	1 ~100%	3 ~100%	2 29%	7 44%	33 69%	38 63%	2 50%	20 59%	22 65%
NO	26 38%	305 30%	10 ~ 56%	4 ~ 31%	6 ~ 35%	6 ~ 30%	15 32%	~	~	~	~	~	5 ~ 71%	9 56%	15 31%	22 37%	2 50%	14 41%	12 35%
NOT ANSWERED	4	87	1		2	1	3							2	2	3	1	3	1
VALID CASES	68	1023	18	13	17	20	47				1	3	7	16	48	60	4	34	34
NUMBER OF RESPONDENTS	72 100%	1110 100%	19 100%	13 100%	19 100%	21 100%	50 100%				1 100%	3 100%	7 100%	18 100%	50 100%	63 100%	5 100%	37 100%	35 100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC
Q13 #YES	54 76%	830 78%	13 ~ 68%	10 ~ 77%	14 ~ 78%	17 ~ 81%	37 76%	~	~	1 ~100%	3 ~100%	6 ~ 86%	13 72%	38 78%	47 76%	4 80%	25 69%	29 83%
NO	17 24%	241 22%	6 ~ 32%	3 ~ 23%	4 ~ 22%	4 ~ 19%	12 24%	~	~	~	~	1 ~ 14%	5 28%	11 22%	15 24%	1 20%	11 31%	6 17%
NOT ANSWERED	1	39				1	1							1	1		1	
VALID CASES	71	1071	19	13	18	21	49			1	3	7	18	49	62	5	36	35
NUMBER OF RESPONDENTS	72	1110	19	13	19	21	50			1	3	7	18	50	63	5	37	35
	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q14 WORST HEALTH CARE POSSIBLE		3 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01		7 0.2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02	1 0.5%	9 0.3%	~	~	1 2%	~	~	1 0.8%	~	~	~	~	~	1 0.8%	~	1 0.5%	~	1 0.7%	~
03	1 0.5%	25 0.7%	~	~	~	~	1 2%	1 0.8%	~	~	~	~	~	1 0.8%	~	1 11%	~	1 0.7%	~
04	3 1%	47 1%	~	~	2 4%	~	1 2%	2 2%	~	~	~	~	~	1 1%	2 2%	3 2%	~	3 2%	~
05	7 3%	121 3%	~	2 5%	2 4%	1 2%	2 4%	6 5%	~	~	~	1 13%	~	3 4%	4 3%	6 3%	1 11%	4 3%	3 5%
06	6 3%	116 3%	~	3 8%	~	1 2%	2 4%	5 4%	~	~	~	~	~	1 1%	4 3%	3 2%	2 22%	4 3%	2 3%
07	14 7%	300 9%	~	3 8%	3 7%	5 8%	3 5%	11 8%	1 50%	~	~	~	1 4%	3 4%	10 8%	12 7%	1 11%	8 6%	6 10%
08	47 24%	813 23%	~	6 16%	9 20%	18 30%	14 25%	30 23%	1 50%	~	~	3 38%	6 26%	14 20%	30 25%	44 24%	~	27 19%*	20 33%*
09	43 21%	704 20%	~	6 16%	14 30%	12 20%	11 19%	23 18%	~	~	~	1 33%	7 30%	18 25%	24 20%	41 23%	1 11%	32 23%	11 18%
BEST HEALTH CARE POSSIBLE	78 39%	1323 38%	~	17 46%	15 33%	23 38%	23 40%	51 39%	~	~	2 67%	4 50%	9 39%	31 44%	44 37%	72 40%	3 33%	60 43%	18 30%
#8-10 (NET)	168 84%	2841 82%	~	29 78%	38 83%	53 88%	48 84%	104 80%*	1 50%	~	3 100%	7 87%	22 96%	63 89%	98 82%	157 86%	4 44%	119 85%	49 82%

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
9-10 (NET)	121 61%	2027 58%	23 ~	29 62%	35 63%	34 58%	60%	74 57%	~	~	3 ~100%	4 50%	16 70%	49 69%	68 57%	113 62%	4 44%	92 66%*	29 48%*
NOT ANSWERED	3	98		1	1	1	2						2	1	3		3		
VALID CASES	200	3470	37	46	60	57	130	2		3	8	23	71	120	182	9	140	60	
NUMBER OF RESPONDENTS	203 100%	3568 100%	37 100%	47 100%	61 100%	58 100%	132 100%	2 100%		3 100%	8 100%	23 100%	73 100%	121 100%	185 100%	9 100%	143 100%	60 100%	
MEAN	8.65	8.58	8.68	8.46	8.80	8.61	8.52	7.50	9.67	8.63	9.04	8.87	8.52	8.72	7.33	8.72	8.47		
p stat_(*=Sig @ p<=.05)		.558	~	~	~.293	.860	.079	~	~	~	~	~	.109	.170	~	~	.260	.258	

[ASKED IF Q7 >= 1]



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q15 NEVER	1 0.5%	64 2%*	~	~	~	~	2%	~	~	~	~	~	~	1%	~	~	11%	0.7%	~	
SOMETIMES	18 9%	353 10%	~	5 14%	6 13%	3 5%	4 7%	15 12%	~	1 50%	~	~	1 13%	~	6 9%	12 10%	15 8%	3 33%	14 10%	4 7%
USUALLY	68 35%	1112 32%	~	10 27%	16 36%	24 40%	18 33%	40 31%	~	~	~	2 25%	10 43%	28 41%	37 31%	62 34%	3 33%	41 30%*	27 45%*	
ALWAYS	110 56%	1922 56%	~	22 59%	23 51%	33 55%	32 58%	75 58%	~	1 50%	~	3 100%	5 63%	13 57%	34 49%	71 59%	103 57%	2 22%	81 59%	29 48%
#ALWAYS + USUALLY (NET)	178 90%	3034 88%	~	32 86%	39 87%	57 95%	50 91%	115 88%	~	1 50%	~	3 100%	7 88%	23 100%	62 90%	108 90%	165 92%	5 56%	122 89%	56 93%
TOP BOX SCORE	110 56%	1922 56%	~	22 59%	23 51%	33 55%	32 58%	75 58%	~	1 50%	~	3 100%	5 63%	13 57%	34 49%	71 59%	103 57%	2 22%	81 59%	29 48%
NOT ANSWERED	6	117			2	1	3	2						4	1	5		6		
VALID CASES	197	3451		37	45	60	55	130		2		3	8	23	69	120	180	9	137	60
NUMBER OF RESPONDENTS	203 100%	3568 100%		37 100%	47 100%	61 100%	58 100%	132 100%		2 100%		3 100%	8 100%	23 100%	73 100%	121 100%	185 100%	9 100%	143 100%	60 100%

[ASKED IF Q7 >= 1 TIME]

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
Q16 YES	225 78%	3643 71%*	16 ~ 38%	55 ~ 86%	85 93%*	69 78%	154 81%	~	~	~ 100%	4 ~ 83%	10 ~ 79%	22 ~ 70%*	79 ~ 84%*	136 ~ 84%*	207 78%~	9 75%~	169 77%	56 82%
NO	62 22%	1481 29%*	1 100%~	26 ~ 62%	9 ~ 14%	6 7%*	20 22%	35 19%	3 ~ 100%~	~	2 ~ 17%	6 ~ 21%	34 30%*	26 16%*	26 16%*	57 22%~	3 25%~	50 23%	12 18%
NOT ANSWERED	13	239	1	5	2	5	2							2	2			13	
VALID CASES	287	5124	1	42	64	91	89	189	3	4	12	28	113	162	264	12	219	68	
NUMBER OF RESPONDENTS	300 100%	5363 100%	1 100%	43 100%	69 100%	93 100%	94 100%	191 100%	3 100%	4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%	

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC		
Q17 YES	23 11%	403 11%	~	5 33%	6 11%	5 6%	7 11%	14 10%	~	~	~	3 30%	2 9%	10 13%	12 9%	21 11%	2 25%	11 7%*	12 22%*	
NO	193 89%	3143 89%	~	10 67%	49 89%	78 94%	56 89%	131 90%	~	~	~	4 100%	7 70%	20 91%	68 87%	116 91%	178 89%	6 75%	150 93%*	43 78%*
NOT ANSWERED	9	226	1			2	6	9						1	8	8	1	8	1	
VALID CASES	216	3545		15	55	83	63	145			4	10	22	78	128	199	8	161	55	
NUMBER OF RESPONDENTS	225 100%	3771 100%		16 100%	55 100%	85 100%	69 100%	154 100%			4 100%	10 100%	22 100%	79 100%	136 100%	207 100%	9 100%	169 100%	56 100%	

[ASKED IF Q16 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q18 #YES	21 95%	349 94%~	~	4 80%~	6 100%~	4 100%~	7 100%~	12 92%~	~	~	~	~	3 ~100%~	2 ~100%~	9 90%~	11 100%~	19 95%~	2 100%~	10 91%~	11 100%~
NO	1 5%	22 6%~	~	1 20%~	~	~	~	1 8%~	~	~	~	~	~	~	1 10%~	1 5%~	~	1 9%~	~	
NOT ANSWERED	1	7				1	1								1	1			1	
VALID CASES	22	371		5	6	4	7	13					3	2	10	11	20	2	11	11
NUMBER OF RESPONDENTS	23	378		5	6	5	7	14					3	2	10	12	21	2	11	12
	100%	100%		100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q16 = YES AND Q17 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q19 YES	18 6%	175 3%*		5 ~ 12%~	5 8%	3 3%	5 6%	13 7%				2 ~ 17%~		6 5%	11 7%	16 6%~	1 8%~	8 4%*	10 15%*
NO	266 94%	4948 97%*	1 100%~	37 88%~	61 92%	87 97%	80 94%	176 93%	3 ~100%~		4 ~100%~	10 83%~	28 100%~	105 95%	151 93%	246 94%~	11 92%~	208 96%*	58 85%*
NOT ANSWERED	16	240		1	3	3	9	2						2	2	4		16	
VALID CASES	284	5123	1	42	66	90	85	189	3		4	12	28	111	162	262	12	216	68
NUMBER OF RESPONDENTS	300	5363	1	43	69	93	94	191	3		4	12	28	113	164	266	12	232	68
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC
Q20 NEVER	4 22%	23 12%	~	~	2 40%	1 33%	1 20%	2 15%	~	~	~	~	1 50%	1 17%	2 18%	3 19%	~	2 25%	2 20%
SOMETIMES	1 6%	35 18%	~	~	~	~	1 20%	1 8%	~	~	~	~	~	~	1 9%	1 6%	~	~	1 10%
USUALLY	4 22%	49 25%	~	1 20%	2 40%	1 33%	3 23%	~	~	~	~	~	~	1 17%	3 27%	4 25%	~	1 13%	3 30%
ALWAYS	9 50%	87 45%	~	4 80%	1 20%	1 33%	3 60%	7 54%	~	~	~	1 50%	~	4 67%	5 45%	8 50%	1 100%	5 63%	4 40%
#ALWAYS + USUALLY (NET)	13 72%	135 70%	~	5 100%	3 60%	2 67%	3 60%	10 77%	~	~	~	1 50%	~	5 83%	8 73%	12 75%	1 100%	6 75%	7 70%
TOP BOX SCORE	9 50%	87 45%	~	4 80%	1 20%	1 33%	3 60%	7 54%	~	~	~	1 50%	~	4 67%	5 45%	8 50%	1 100%	5 63%	4 40%
NOT ANSWERED		3																	
VALID CASES	18	193		5	5	3	5	13					2	6	11	16	1	8	10
NUMBER OF RESPONDENTS	18	196		5	5	3	5	13					2	6	11	16	1	8	10
	100%	100%		100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q19 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q21 #YES	11 61%	157 84%~	~	4 80%~	3 60%~	1 33%~	3 60%~	9 69%~	~	~	~	1 50%~	~	4 67%~	7 64%~	10 62%~	1 100%~	6 75%~	5 50%~
NO	7 39%	31 16%~	~	1 20%~	2 40%~	2 67%~	2 40%~	4 31%~	~	~	~	1 50%~	~	2 33%~	4 36%~	6 38%~	~	2 25%~	5 50%~
NOT ANSWERED		8																	
VALID CASES	18	188		5	5	3	5	13				2		6	11	16	1	8	10
NUMBER OF RESPONDENTS	18	196		5	5	3	5	13				2		6	11	16	1	8	10
	100%	100%		100%	100%	100%	100%	100%				100%		100%	100%	100%	100%	100%	100%

[ASKED IF Q19 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC		
Q22 YES	21 7%	446 9%	1 100%~	3 7%~	5 8%	6 7%	6 7%	10 5%	~	~	~	25%~	1 8%~	1 4%~	1 8%	9 6%~	11 17%~	2 17%~	10 5%*	11 16%*	
NO	264 93%	4656 91%	~	39 93%~	60 92%	84 93%	81 93%	181 95%	~	100%~	~	75%~	3 92%~	11 96%~	26 96%~	102 92%	152 93%	246 94%~	10 83%~	207 95%*	57 84%*
NOT ANSWERED	15	261		1	4	3	7						1	2	1	3			15		
VALID CASES	285	5102	1	42	65	90	87	191	3	4	12	27	111	163	263	12	217	68			
NUMBER OF RESPONDENTS	300 100%	5363 100%	1 100%	43 100%	69 100%	93 100%	94 100%	191 100%	3 100%	4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%	68 100%		



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

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER						
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTH	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
Q23 NEVER	1 5%	62 15%	~	33%	~	~	~	~	~	~	~	~	~	~	100%	~	9%	6%	~	11%	~	
SOMETIMES	2 10%	96 24%	~	~	20%	~	17%	10%	~	~	~	100%	~	~	18%	2	1	1	6%	50%	11%	9%
USUALLY	6 30%	112 28%	~	33%	20%	60%	17%	20%	~	~	~	100%	~	4	2	5	1	31%	50%	22%	36%	
ALWAYS	11 55%	135 33%	100%	33%	60%	40%	67%	70%	~	~	~	~	~	4	6	9	56%	~	56%	5	6	
#ALWAYS + USUALLY (NET)	17 85%	247 61%	100%	67%	80%	100%	83%	90%	~	~	~	100%	~	8	8	14	1	87%	50%	78%	91%	
TOP BOX SCORE	11 55%	135 33%	100%	33%	60%	40%	67%	70%	~	~	~	~	~	4	6	9	56%	~	56%	5	6	
NOT ANSWERED	1	14				1								1		1				1		
VALID CASES	20	405	1	3	5	5	6	10				1	1	1	8	11	16	2		9	11	
NUMBER OF RESPONDENTS	21	419	1	3	5	6	6	10				1	1	1	9	11	17	2		10	11	
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%		100%	100%	

[ASKED IF Q22 = YES]

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

	JCC TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q24 #YES	16 76%	260 64%	1 100%	2 67%	4 80%	3 50%	6 100%	8 80%	~	~	~	1 100%	1 100%	1 100%	5 56%	10 91%	12 71%	2 100%	7 70%	9 82%
NO	5 24%	143 36%	~	1 33%	1 20%	3 50%	2 20%	~	~	~	~	~	~	~	4 44%	1 9%	5 29%	~	3 30%	2 18%
NOT ANSWERED		16																		
VALID CASES	21	403	1	3	5	6	6	10			1	1	1	9	11	17	2	10	11	
NUMBER OF RESPONDENTS	21	419	1	3	5	6	6	10			1	1	1	9	11	17	2	10	11	
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q22 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q25																				
YES	30 11%	666 13%	1 100%~	4 10%~	5 8%	7 8%	13 15%	17 9%	~	~	~	~	25%~	11%~	11 10%	17 10%	24 9%~	4 33%~	10 5%*	20 29%*
NO	255 89%	4441 87%	~	38 90%~	61 92%	83 92%	73 85%	174 91%	~100%~	3	4	9	25	100 90%	147 90%	240 91%~	8 67%~	207 95%*	48 71%*	
NOT ANSWERED	15	256		1	3	3	8							2		2		15		
VALID CASES	285	5107	1	42	66	90	86	191	3	4	12	28	111	164	264	12	217	68		
NUMBER OF RESPONDENTS	300 100%	5363 100%	1 100%	43 100%	69 100%	93 100%	94 100%	191 100%	3 100%	4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%		

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

	JCC TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	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
Q26 NEVER	4 13%	92 14%	1 ~ 25%	2 ~ 29%	1 8%	2 12%	~	~	~	~	1 33%	1 33%	2 18%	2 12%	4 17%	~	4 ~ 20%		
SOMETIMES	4 13%	116 18%	1 ~ 25%	1 20%	2 ~ 15%	3 18%	~	~	~	~	~	~	1 9%	2 12%	2 8%	1 25%	2 20%	2 10%	
USUALLY	5 17%	171 27%	~	1 20%	3 43%	1 8%	2 12%	~	~	~	~	~	4 36%	~	2 8%	2 50%	3 30%	2 10%	
ALWAYS	17 57%	258 41%	1 100%	2 50%	3 60%	2 29%	9 69%	10 59%	~	~	~	2 67%	2 67%	4 36%	13 76%	16 67%	1 25%	5 50%	12 60%
#ALWAYS + USUALLY (NET)	22 73%	429 67%	1 100%	2 50%	4 80%	5 71%	10 77%	12 71%	~	~	~	2 67%	2 67%	8 73%	13 76%	18 75%	3 75%	8 80%	14 70%
TOP BOX SCORE	17 57%	258 41%	1 100%	2 50%	3 60%	2 29%	9 69%	10 59%	~	~	~	2 67%	2 67%	4 36%	13 76%	16 67%	1 25%	5 50%	12 60%
NOT ANSWERED		17																	
VALID CASES	30	636	1	4	5	7	13	17			3	3	11	17	24	4	10	20	
NUMBER OF RESPONDENTS	30	653	1	4	5	7	13	17			3	3	11	17	24	4	10	20	
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q25 = YES]

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

	JCC TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q27 #YES	19 63%	311 49%	1 100%	3 75%	2 40%	5 71%	8 62%	10 59%	~	~	~	~	2 67%	1 33%	4 36%	13 76%	13 54%	4 100%	5 50%	14 70%
NO	11 37%	326 51%	~	1 25%	3 60%	2 29%	5 38%	7 41%	~	~	~	~	1 33%	2 67%	7 64%	4 24%	11 46%	~	5 50%	6 30%
NOT ANSWERED		17																		
VALID CASES	30	636	1	4	5	7	13	17					3	3	11	17	24	4	10	20
NUMBER OF RESPONDENTS	30	653	1	4	5	7	13	17					3	3	11	17	24	4	10	20
	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC
Q28 YES	60 21%	978 19%		11 ~ 27%	14 ~ 21%	15 17%	20 24%	40 21%			1 ~ 25%	2 18%	8 29%	17 16%	39 24%	47 18%	8 67%	35 16%*	25 37%*
NO	222 79%	4103 81%	1 100%	30 73%	52 79%	74 83%	65 76%	149 79%	3 ~100%		3 ~ 75%	9 82%	20 71%	92 84%	124 76%	214 82%	4 33%	180 84%*	42 63%*
NOT ANSWERED	18	281		2	3	4	9	2			1		4	1	5		17	1	
VALID CASES	282	5082	1	41	66	89	85	189	3		4	11	28	109	163	261	12	215	67
NUMBER OF RESPONDENTS	300 100%	5363 100%	1 100%	43 100%	69 100%	93 100%	94 100%	191 100%	3 100%		4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q29 #YES	37 66%	594 60%	7 ~ 64%~	8 57%~	10 77%~	12 67%~	26 72%~	~	~	~	~	6 ~ 75%~	11 65%~	24 69%~	29 64%~	5 83%~	22 67%~	15 65%~
NO	19 34%	403 40%	4 ~ 36%~	6 43%~	3 23%~	6 33%~	10 28%~	~	~	1 ~100%~	2 100%~	2 25%~	6 35%~	11 31%~	16 36%~	1 17%~	11 33%~	8 35%~
NOT ANSWERED	4	32				2 2	4						4	2 2	2 2	2 2	2 2	
VALID CASES	56	998	11	14	13	18	36			1	2	8	17	35	45	6	33	23
NUMBER OF RESPONDENTS	60 100%	1030 100%	11 100%	14 100%	15 100%	20 100%	40 100%			1 100%	2 100%	8 100%	17 100%	39 100%	47 100%	8 100%	35 100%	25 100%

[ASKED IF Q28 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q30 YES	247 88%	4410 88%		40 ~ 95%	63 ~ 95%*	75 86%	69 80%*	167 89%		2 ~ 67%		4 ~ 100%	9 75%	28 100%	91 81%*	148 92%*	231 88%	8 67%	184 86%	63 93%
Q30 NO	35 12%	622 12%	1 100%	2 5%	3 5%*	12 14%	17 20%*	20 11%	1 ~ 33%			3 ~ 25%		21 19%*	13 8%*	31 12%	4 33%	30 14%	5 7%	
NOT ANSWERED	18	331		1	3	6	8	4						1	3	4		18		
VALID CASES	282	5032	1	42	66	87	86	187	3		4	12	28	112	161	262	12	214	68	
NUMBER OF RESPONDENTS	300 100%	5363 100%	1 100%	43 100%	69 100%	93 100%	94 100%	191 100%	3 100%		4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%	



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV ILND	AMER IND/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q31 NONE	56 24%	1163 27%	~	3 9%	16 27%	20 28%	17 25%	36 23%	~	~	~	1 25%	3 38%	6 21%	26 30%	29 21%	55 25%	1 17%	52 31%*	4 6%*
1 TIME	67 29%	1470 34%	~	11 31%	17 29%	18 25%	21 31%	46 29%	~	~	~	1 25%	2 25%	10 36%	25 29%	40 29%	65 30%	1 17%	55 32%*	12 19%*
2	55 24%	817 19%	~	4 11%	17 29%	17 24%	17 25%	36 23%	~	2 100%	~	2 50%	1 13%	5 18%	15 17%	38 27%	51 23%	2 33%	36 21%	19 31%
3	23 10%	450 11%	~	6 17%	1 2%*	12 17%*	4 6%	19 12%	~	~	~	~	1 13%	2 7%	7 8%	16 11%	21 10%	1 17%	11 6%*	12 19%*
4	16 7%	180 4%	~	7 20%	5 8%	2 3%*	2 3%	9 6%	~	~	~	~	1 13%	2 7%	8 9%	7 5%	14 6%	1 17%	9 5%	7 11%
5 TO 9	11 5%	146 3%	~	4 11%	2 3%	2 3%	3 4%	7 4%	~	~	~	~	~	2 7%	4 5%	7 5%	10 5%	~	5 3%	6 10%
10 OR MORE TIMES	4 2%	40 0.9%	~	~	1 2%	~	3 4%	3 2%	~	~	~	~	~	1 4%	1 1%	3 2%	4 2%	~	2 1%	2 3%
NOT ANSWERED	15	203		5	4	4	2	11					1		5	8	11	2	14	1
VALID CASES	232	4266		35	59	71	67	156		2		4	8	28	86	140	220	6	170	62
NUMBER OF RESPONDENTS	247	4469		40	63	75	69	167		2		4	9	28	91	148	231	8	184	63
	100%	100%		100%	100%	100%	100%	100%		100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q31A ALWAYS	3 2%	82 3%	~	1 3%	~	1 2%	1 2%	0.8%	~	1 50%	~	~	1 20%	~	2 3%	1 0.9%	3 2%	~	3 3%	~
USUALLY	1 0.6%	49 2%	~	~	1 2%	~	~	~	~	~	~	~	~	1 2%	~	0.6%	~	1 0.9%	~	~
SOMETIMES	7 4%	229 8%*	~	3 10%	2 5%	1 2%	1 2%	2%	~	~	~	~	1 20%	1 5%	6 10%	1 0.9%*	6 4%	~	6 5%	1 2%
NEVER	162 94%	2671 88%*	~	25 86%	40 93%	49 96%	48 96%	115 97%*	~	1 50%	~	3 100%	3 60%	21 95%	50 85%*	107 98%*	152 94%	5 100%	105 91%*	57 98%*
#NEVER + SOMETIMES (NET)	169 98%	2900 96%	~	28 97%	42 98%	50 98%	49 98%	117 99%	~	1 50%	~	3 100%	4 80%	22 100%	56 95%	108 99%	158 98%	5 100%	111 97%*	58 100%
TOP BOX SCORE	162 94%	2671 88%*	~	25 86%	40 93%	49 96%	48 96%	115 97%*	~	1 50%	~	3 100%	3 60%	21 95%	50 85%*	107 98%*	152 94%	5 100%	105 91%*	57 98%*
NOT ANSWERED	3	30	3					2						1	2	3		3		
VALID CASES	173	3030	29	43	51	50	118	2	3	5	22	59	109	162	5	115	58			
NUMBER OF RESPONDENTS	176 100%	3060 100%	32 100%	43 100%	51 100%	50 100%	120 100%	2 100%	3 100%	5 100%	22 100%	60 100%	111 100%	165 100%	5 100%	118 100%	58 100%			

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q32 NEVER	2 1%	80 3%	~	~	1 2%	~	1 2%	2 2%	~	~	~	~	~	2 2%	2 1%	~	1 0.9%	1 2%	
SOMETIMES	2 1%	145 5%*	~	~	1 2%	1 2%	1 0.8%	~	~	~	~	~	~	1 2%	1 0.9%	2 1%	~	1 0.9%	1 2%
USUALLY	22 13%	478 16%	~	5 17%	6 14%	7 14%	4 8%	12 10%	1 50%	~	~	~	3 14%	9 15%	13 12%	20 12%	1 20%	13 11%	9 16%
ALWAYS	148 85%	2312 77%*	~	25 83%	35 81%	43 84%	45 90%	103 87%	1 50%	~	3 100%	5 100%	19 86%	50 83%	93 85%	139 85%	4 80%	101 87%	47 81%
#ALWAYS + USUALLY (NET)	170 98%	2790 93%*	~	30 100%	41 95%	50 98%	49 98%	115 97%	2 100%	~	3 100%	5 100%	22 100%	59 98%	106 97%	159 98%	5 100%	114 98%	56 97%
TOP BOX SCORE	148 85%	2312 77%*	~	25 83%	35 81%	43 84%	45 90%	103 87%	1 50%	~	3 100%	5 100%	19 86%	50 83%	93 85%	139 85%	4 80%	101 87%	47 81%
NOT ANSWERED	2	44	2				2							2	2		2		
VALID CASES	174	3016	30	43	51	50	118	2	3	5	22	60	109	163	5	116	58		
NUMBER OF RESPONDENTS	176	3060	32	43	51	50	120	2	3	5	22	60	111	165	5	118	58		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q33 NEVER		40 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	5 3%	145 5%	~	~	3 7%	1 2%	1 2%	4 3%	~	~	~	~	~	1 5%	1 2%	4 4%	4 2%	1 20%	3 3%	2 3%
USUALLY	21 12%	494 16%	~	4 13%	6 14%	5 10%	6 12%	10 8%	~	~	~	~	~	4 18%	9 15%	12 11%	21 13%	~	11 10%	10 17%
ALWAYS	147 85%	2341 77%*	~	26 87%	34 79%	44 88%	43 86%	104 88%	~	2 100%	~	3 100%	5 100%	17 77%	50 83%	93 85%	138 85%	4 80%	101 88%	46 79%
#ALWAYS + USUALLY (NET)	168 97%	2835 94%*	~	30 100%	40 93%	49 98%	49 98%	114 97%	~	2 100%	~	3 100%	5 100%	21 95%	59 98%	105 96%	159 98%	4 80%	112 97%	56 97%
TOP BOX SCORE	147 85%	2341 77%*	~	26 87%	34 79%	44 88%	43 86%	104 88%	~	2 100%	~	3 100%	5 100%	17 77%	50 83%	93 85%	138 85%	4 80%	101 88%	46 79%
NOT ANSWERED	3	39	~	2	~	1	~	2	~	~	~	~	~	~	2	~	2	~	3	~
VALID CASES	173	3021	~	30	43	50	50	118	~	2	~	3	5	22	60	109	163	5	115	58
NUMBER OF RESPONDENTS	176 100%	3060 100%	~	32 100%	43 100%	51 100%	50 100%	120 100%	~	2 100%	~	3 100%	5 100%	22 100%	60 100%	111 100%	165 100%	5 100%	118 100%	58 100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV ILND	AMER IND/ALSK	OTH	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q34 NEVER	28	0.9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	214	1%	~	~	2%	2%	~	2%	~	~	~	~	~	~	2%	2%	1%	~	0.9%	2%
USUALLY	25407	14%	~	5%	8%	6%	6%	12%	~	1%	~	~	~	4%	11%	14%	24%	1%	13%	12%
ALWAYS	1462460	84%	~	25%	34%	43%	44%	104%	~	1%	~	3%	5%	18%	49%	93%	137%	4%	101%	45%
#ALWAYS + USUALLY (NET)	1712867	99%	~	30%	42%	49%	50%	116%	~	2%	~	3%	5%	22%	60%	107%	161%	5%	114%	57%
TOP BOX SCORE	1462460	84%	~	25%	34%	43%	44%	104%	~	1%	~	3%	5%	18%	49%	93%	137%	4%	101%	45%
NOT ANSWERED	351		2		1			2							2		2		3	
VALID CASES	1733009		30	43	50	50	118	2			3	5	22	60	109	163	5	115	58	
NUMBER OF RESPONDENTS	1763060	100%	32	43	51	50	120	2			3	5	22	60	111	165	5	118	58	
			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q35 YES	131 76%	2050 69%*	4 ~ 13%~	33 77%~	44 88%*	50 100%~	90 76%	1 ~ 50%~		3 ~ 100%~	4 80%~	15 68%~		41 68%	86 79%	122 75%~	4 80%~	87 76%	44 76%
NO	42 24%	942 31%*	26 ~ 87%~	10 23%~	6 12%*		28 ~ 24%	1 ~ 50%~				1 ~ 20%~	7 32%~	19 32%	23 21%	41 25%~	1 20%~	28 24%	14 24%
NOT ANSWERED	3	67	2		1		2								2	2		3	
VALID CASES	173	2993	30	43	50	50	118	2		3	5	22		60	109	163	5	115	58
NUMBER OF RESPONDENTS	176 100%	3060 100%	32 100%	43 100%	51 100%	50 100%	120 100%	2 100%		3 100%	5 100%	22 100%		60 100%	111 100%	165 100%	5 100%	118 100%	58 100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHTE	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q36 NEVER		19 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	5 4%	119 6%	~	~ 13%	4 2%	1 2%	4 5%	~	~	~	~	~	1 2%	4 5%	5 4%	~	4 5%	1 2%	~
USUALLY	31 24%	466 23%	~ 50%	2 25%	8 33%	14 33%	7 14%*	20 23%	~	~	~	1 25%	5 33%	11 27%	20 24%	30 25%	1 25%	19 22%	12 27%
ALWAYS	93 72%	1408 70%	~ 50%	2 62%	20 65%	28 65%	43 86%*	64 73%	1 ~100%	3 ~100%	3 75%	10 67%	29 71%	60 71%	85 71%	3 75%	62 73%	31 70%	~
#ALWAYS + USUALLY (NET)	124 96%	1874 93%	~100%	4 88%	28 98%	42 98%	50 100%	84 95%	1 ~100%	3 ~100%	4 100%	15 100%	40 98%	80 95%	115 96%	4 100%	81 95%	43 98%	~
TOP BOX SCORE	93 72%	1408 70%	~ 50%	2 62%	20 65%	28 65%	43 86%*	64 73%	1 ~100%	3 ~100%	3 75%	10 67%	29 71%	60 71%	85 71%	3 75%	62 73%	31 70%	~
NOT ANSWERED	2	36			1	1		2						2	2		2		
VALID CASES	129	2013		4	32	43	50	88	1		3	4	15	41	84	120	4	85	44
NUMBER OF RESPONDENTS	131	2049		4	33	44	50	90	1		3	4	15	41	86	122	4	87	44
	100%	100%		100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q37 NEVER	2 1%	89 3%*	~	~	~	2%	2%	~	~	~	~	~	~	2 3%	~	2 1%~	~	1 0.9%	1 2%	
SOMETIMES	12 7%	318 11%	~	4 13%~	3 7%~	2 4%	3 6%	7 6%	~	~	~	~	1 20%~	2 9%~	6 10%	6 6%	12 7%~	~	9 8%	3 5%
USUALLY	40 23%	708 24%	~	5 17%~	13 30%~	11 22%	11 22%	25 21%	~	1 50%~	~	~	1 20%~	3 14%~	18 30%	22 20%	37 23%~	2 40%~	22 19%	18 31%
ALWAYS	119 69%	1876 63%	~	21 70%~	27 63%~	36 72%	35 70%	84 71%	~	1 50%~	~	3 100%~	3 60%~	17 77%~	34 57%*	81 74%*	112 69%~	3 60%~	83 72%	36 62%
#ALWAYS + USUALLY (NET)	159 92%	2584 86%*	~	26 87%~	40 93%~	47 94%	46 92%	109 92%	~	2 100%~	~	3 100%~	4 80%~	20 91%~	52 87%	103 94%	149 91%~	5 100%~	105 91%	54 93%
TOP BOX SCORE	119 69%	1876 63%	~	21 70%~	27 63%~	36 72%	35 70%	84 71%	~	1 50%~	~	3 100%~	3 60%~	17 77%~	34 57%*	81 74%*	112 69%~	3 60%~	83 72%	36 62%
NOT ANSWERED	3	70	~	2	~	1	~	2	~	~	~	~	~	~	2	~	2	~	3	~
VALID CASES	173	2990	~	30	43	50	50	118	~	2	~	3	5	22	60	109	163	5	115	58
NUMBER OF RESPONDENTS	176 100%	3060 100%	~	32 100%	43 100%	51 100%	50 100%	120 100%	~	2 100%	~	3 100%	5 100%	22 100%	60 100%	111 100%	165 100%	5 100%	118 100%	58 100%

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



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q38 #YES	141 82%	2520 84%	28 ~ 93%	37 ~ 86%	43 ~ 86%	33 67%	99 84%	1 ~ 50%	3 ~ 100%	5 ~ 100%	18 82%	46 78%	92 84%	134 82%	4 80%	92 80%	49 86%	
NO	31 18%	484 16%	2 ~ 7%	6 ~ 14%	7 ~ 14%	16 33%	19 16%	1 ~ 50%	~	~	4 ~ 18%	13 22%	17 16%	29 18%	1 20%	23 20%	8 14%	
NOT ANSWERED	4	56	2		1	1	2					1	2	2		3	1	
VALID CASES	172	3004	30	43	50	49	118	2	3	5	22	59	109	163	5	115	57	
NUMBER OF RESPONDENTS	176 100%	3060 100%	32 100%	43 100%	51 100%	50 100%	120 100%	2 100%	3 100%	5 100%	22 100%	60 100%	111 100%	165 100%	5 100%	118 100%	58 100%	

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC
Q39 YES	53 31%	1156 39%*	~	13 43%~	4 10%~	18 37%~	18 36%	40 34%	~	~	1 33%~	5 23%~	15 26%	38 35%	48 30%~	3 60%~	26 23%*	27 47%*	
NO	117 69%	1846 61%*	~	17 57%~	37 90%~	31 63%~	32 64%	76 66%	~100%~	2	2 67%~	5 100%~	17 77%~	43 74%	70 65%	112 70%~	2 40%~	86 77%*	31 53%*
NOT ANSWERED	6	59		2	2	2		4						2	3	5		6	
VALID CASES	170	3001		30	41	49	50	116		2	3	5	22	58	108	160	5	112	58
NUMBER OF RESPONDENTS	176 100%	3060 100%		32 100%	43 100%	51 100%	50 100%	120 100%		2 100%	3 100%	5 100%	22 100%	60 100%	111 100%	165 100%	5 100%	118 100%	58 100%

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

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q40 NEVER	1 2%	80 7%	~	~	~	6%	~	~	~	~	~	~	1 7%	~	1 2%	~	~	1 4%	
SOMETIMES	9 18%	163 14%	~	8%	25%	11%	31%	18%	~	~	~	~	1 20%	2 13%	7 19%	8 17%	1 33%	4 16%	5 19%
USUALLY	17 33%	320 28%	~	31%	25%	44%	25%	34%	~	~	~	~	1 20%	7 47%	10 28%	14 30%	1 33%	10 40%	7 27%
ALWAYS	24 47%	595 51%	~	62%	50%	39%	44%	47%	~	~	~100%	~	3 60%	5 33%	19 53%	23 50%	1 33%	11 44%	13 50%
#ALWAYS + USUALLY (NET)	41 80%	915 79%	~	92%	75%	83%	69%	82%	~	~	~100%	~	4 80%	12 80%	29 81%	37 80%	2 67%	21 84%	20 77%
TOP BOX SCORE	24 47%	595 51%	~	62%	50%	39%	44%	47%	~	~	~100%	~	3 60%	5 33%	19 53%	23 50%	1 33%	11 44%	13 50%
NOT ANSWERED	2	33				2	2							2	2			1	1
VALID CASES	51	1158		13	4	18	16	38		1	5	15	36	46	3	25	26		
NUMBER OF RESPONDENTS	53	1191		13	4	18	18	40		1	5	15	38	48	3	26	27		
	100%	100%		100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC			
Q41 WORST PERSONAL DOCTOR POSSIBLE		9																			
		0.2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~			
01		6																			
		0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~			
02		7																			
		0.2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~			
03		14																			
		0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~			
04	1	45			1								1	1	1		1				
	0.4%	1%	~	~	2%	~	~	~	~	~	~	4%	~0.7%	~0.5%	~	~0.6%	~	~			
05	4	127		1	1	1	1	2					1	3	1	4	3	1			
	2%	3%	~	3%	2%	1%	2%	1%	~	~	~	4%	3%	0.7%	2%	~	2%	2%			
06	5	112				2	3	2		1				3	2	5		2	3		
	2%	3%	~	~	~	3%	5%	1%	~	50%	~	~	~	3%	1%	2%	~	1%	5%		
07	10	293		1	4	3	2	8					2	6	4	9	1	7	3		
	4%	7%	~	3%	7%	4%	3%	5%	~	~	~	~	7%	7%	3%	4%	14%	4%	5%		
08	37	690		7	7	16	7	24		1		1	1	4	14	23	36	1	26	11	
	16%	16%	~	20%	12%	23%	11%	15%	~	50%	~	~	25%	13%	14%	16%	17%	17%	14%	16%	17%
09	44	810		9	12	12	11	30				2	4	16	27	41	2	29	15		
	19%	19%	~	26%	20%	17%	17%	19%	~	~	~	~	25%	14%	18%	20%	19%	29%	17%	24%	
BEST PERSONAL DOCTOR POSSIBLE	128	2128		17	35	36	40	90				3	5	16	46	79	121	3	98	30	
	56%	50%	~	49%	58%	51%	63%	58%	~	~	~	75%	63%	57%	52%	58%	56%	43%	59%	48%	
#8-10 (NET)	209	3628		33	54	64	58	144		1		4	8	24	76	129	198	6	153	56	
	91%	86%*	~	94%	90%	91%	91%	92%	~	50%	~	~	100%	100%	86%	86%	91%	86%	92%	89%	

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC		
9-10 (NET)	172 75%	2937 69%*	~	26 74%~	47 78%	48 69%	51 80%	120 77%	~	~	~	3 75%~	7 88%~	20 71%~	62 70%	106 77%	162 75%~	5 71%~	127 77%	45 71%
NOT ANSWERED	18	228	5	3	5	5	11				1			3	11	14	1	18		
VALID CASES	229	4241	35	60	70	64	156	2		4	8	28		88	137	217	7	166	63	
NUMBER OF RESPONDENTS	247 100%	4469 100%	100%	40 100%	63 100%	75 100%	69 100%	167 100%	2 100%	4 100%	9 100%	28 100%		91 100%	148 100%	231 100%	8 100%	184 100%	63 100%	
MEAN	9.15	8.89	9.11	9.18	9.06	9.25	9.23	7.00	9.50	9.50	8.96	8.99	9.24	9.14	9.00	9.21	9.00	9.21	9.00	
p stat_(*=Sig @ p<=.05)		.001*	~	~	.821	.425	.451	.196	~	~	~	~	~	~	.105	.181	~	~	.252	.250

[ASKED IF Q30 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q42 YES	57 25%	1024 24%	~	15%~	11%~	19%~	22%~	42%~	~	~	~	25%~	38%~	35%~	17%~	40%~	51%~	5%~	10%~	47%~
NO	172 75%	3250 76%	~	85%~	81%~	73%~	67%~	116%~	~	2	~	75%~	63%~	65%~	71%~	97%~	166%~	2	157%~	15%~
NOT ANSWERED	18	195		6	4	5	3	9				1	2		3	11	14	1	17	1
VALID CASES	229	4274		34	59	70	66	158		2		4	8	26	88	137	217	7	167	62
NUMBER OF RESPONDENTS	247 100%	4469 100%		40 100%	63 100%	75 100%	69 100%	167 100%		2 100%		4 100%	9 100%	28 100%	91 100%	148 100%	231 100%	8 100%	184 100%	63 100%

[ASKED IF Q30 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q43 #YES	50 89%	896 89%	5 ~100%	10 ~91%	16 89%	19 86%	37 90%	~	~	~	1 ~100%	2 67%	9 100%	15 88%	35 90%	45 90%	4 80%	8 80%	42 91%
NO	6 11%	110 11%	~	~	1 9%	2 11%	3 14%	4 10%	~	~	~	1 33%	~	2 12%	4 10%	5 10%	1 20%	2 20%	4 9%
NOT ANSWERED	1	35				1	1							1	1				1
VALID CASES	56	1006	5	11	18	22	41				1	3	9	17	39	50	5	10	46
NUMBER OF RESPONDENTS	57	1041	5	11	19	22	42				1	3	9	17	40	51	5	10	47
	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q44 #YES	48 87%	836 84%	~ 80%~	4 10	16 18	86%~	35 85%~	~	~	1 2	9 100%~	67%~	100%~	14 88%~	34 87%~	45 90%~	3 60%~	8 80%~	40 89%~
NO	7 13%	163 16%	~ 20%~	1 9%	2 11%	3 14%~	6 15%~	~	~	1 33%~	~	~	2 13%~	5 13%~	5 10%~	2 40%~	2 20%~	5 11%~	
NOT ANSWERED	2	41			1	1	1						1	1	1			2	
VALID CASES	55	1000		5	11	18	21	41		1	3	9	16	39	50	5	10	45	
NUMBER OF RESPONDENTS	57	1041		5	11	19	22	42		1	3	9	17	40	51	5	10	47	
	100%	100%		100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q30 = YES AND Q42 = YES]



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC
Q45																			
YES	42 15%	774 15%		7 ~ 17%~	4 6%*	14 16%	17 20%	31 16%			1 ~ 25%~	1 8%~	4 15%~	11 10%*	31 19%*	35 13%~	5 42%~	20 9%*	22 32%*
NO	241 85%	4257 85%	1 100%~	34 83%~	60 94%*	76 84%	70 80%	160 84%	3 ~100%~		3 ~ 75%~	11 92%~	23 85%~	102 90%*	132 81%*	230 87%~	7 58%~	195 91%*	46 68%*
NOT ANSWERED	17	332		2	5	3	7						1	1	1			17	
VALID CASES	283	5031	1	41	64	90	87	191	3		4	12	27	113	163	265	12	215	68
NUMBER OF RESPONDENTS	300 100%	5363 100%	1 100%	43 100%	69 100%	93 100%	94 100%	191 100%	3 100%		4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%

Q46 IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT FOR YOUR CHILD TO SEE A SPECIALIST AS SOON AS YOU NEEDED?

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER				
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q46 NEVER	2 5%	73 10%	~	~	~	14%	2 7%	~	~	~	~	~	~	~	2 7%	1 3%	~	1 6%	1 5%	
SOMETIMES	7 18%	115 16%	~	14%	1 25%	2 14%	3 20%	4 14%	~	~	~	~	1 100%	2 50%	7 24%	5 15%	2 50%	3 17%	4 18%	
USUALLY	11 28%	209 28%	~	14%	1 43%	6 27%	4 28%	8 28%	~	~	~	~	~	~	4 36%	7 24%	10 29%	1 25%	5 28%	6 27%
ALWAYS	20 50%	340 46%	~	71%	5 75%	3 29%	4 53%	8 52%	15 52%	~	~	1 100%	2 50%	7 64%	13 45%	18 53%	1 25%	9 50%	11 50%	
#ALWAYS + USUALLY (NET)	31 77%	549 75%	~	86%	6 75%	3 71%	10 80%	12 79%	23 79%	~	~	1 100%	2 50%	11 100%	20 69%	28 82%	2 50%	14 78%	17 77%	
TOP BOX SCORE	20 50%	340 46%	~	71%	5 75%	3 29%	4 53%	8 52%	15 52%	~	~	1 100%	2 50%	7 64%	13 45%	18 53%	1 25%	9 50%	11 50%	
NOT ANSWERED	2	29					2	2						2	1	1	2			
VALID CASES	40	737		7	4	14	15	29			1	1	4	11	29	34	4	18	22	
NUMBER OF RESPONDENTS	42	766		7	4	14	17	31			1	1	4	11	31	35	5	20	22	
	100%	100%		100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q45 = YES]

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

	AGE					RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER					
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q47 NONE	1	67				1	1								1	1	1		1	
	3%	9%	~	~	~	8%	3%	~	~	~	~	~	~	~	3%	3%	3%	~	6%	~
1 SPECIALIST	26	450		6	3	7	10	21			1		4	7	19	26		15	11	
	70%	61%	~	86%	75%	58%	71%	72%	~	~	~100%	~	~100%	88%	66%	79%	~	88%	55%	~
2	7	144			1	4	2	4					1	1	6	4	2	1	6	
	19%	19%	~	~	25%	33%	14%	14%	~	~	~	~100%	~	13%	21%	12%	67%	6%	30%	~
3	1	48					1	1							1	1			1	
	3%	6%	~	~	~	~	7%	3%	~	~	~	~	~	~	3%	3%	~	~	5%	~
4		10																		
		1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
5 OR MORE SPECIALISTS	2	23		1			1	2							2	1	1		2	
	5%	3%	~	14%	~	~	7%	7%	~	~	~	~	~	~	7%	3%	33%	~	10%	~
NOT ANSWERED	5	25				2	3	2						3	2	2	2	3	2	
VALID CASES	37	741		7	4	12	14	29			1	1	4	8	29	33	3	17	20	
NUMBER OF RESPONDENTS	42	766		7	4	14	17	31			1	1	4	11	31	35	5	20	22	
	100%	100%		100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q45 = YES]

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

	JCC TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ NATV	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q48 WORST SPECIALIST POSSIBLE		1 0.1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
01		2 0.3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
02		1 0.2%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
03	1 3%	8 1%~	~	~	~	7%~	1 4%~	~	~	~	~	~	1 4%~	~	1 33%~	~	1 5%~	~		
04		17 3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
05	1 3%	11 2%~	~	1 14%~	~	~	1 4%~	~	~	~	~	~	1 13%~	~	1 3%~	~	1 6%~	~		
06	1 3%	29 4%~	~	~	~	9%~	1 4%~	~	~	~	~	~	~	1 4%~	~	1 33%~	~	1 5%~		
07	2 6%	71 11%~	~	~	~	14%~	2 4%~	1 4%~	~	~	~	~	1 100%~	~	2 7%~	2 6%~	1 6%~	1 5%~		
08	7 19%	106 16%~	~	1 14%~	~	5 45%~	1 7%~	7 25%~	~	~	~	~	~	2 25%~	5 18%~	7 22%~	3 19%~	4 20%~		
09	10 28%	148 22%~	~	1 14%~	3 75%~	1 9%~	5 36%~	8 29%~	~	~	~	~	~	1 25%~	1 13%~	9 32%~	9 28%~	1 33%~	4 25%~	6 30%~
BEST SPECIALIST POSSIBLE	14 39%	278 41%~	~	4 57%~	1 25%~	4 36%~	5 36%~	9 32%~	~	~	1 100%~	~	~	3 75%~	4 50%~	10 36%~	13 41%~	7 44%~	7 35%~	

Continued

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

	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ NATV	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
#8-10 (NET)	31 86%	532 79%	~	6 86%	4 100%	10 91%	11 79%	24 86%	~	~	1 ~100%	4 ~100%	7 87%	24 86%	29 91%	1 33%	14 87%	17 85%	
9-10 (NET)	24 67%	426 63%	~	5 71%	4 100%	5 45%	10 71%	17 61%	~	~	1 ~100%	4 ~100%	5 63%	19 68%	22 69%	1 33%	11 69%	13 65%	
NOT ANSWERED		10																	
VALID CASES	36	672		7	4	11	14	28			1	1	4	8	28	32	3	16	20
NUMBER OF RESPONDENTS	36 100%	682 100%		7 100%	4 100%	11 100%	14 100%	28 100%			1 100%	1 100%	4 100%	8 100%	28 100%	32 100%	3 100%	16 100%	20 100%
MEAN	8.72	8.61		8.86	9.25	8.64	8.57	8.54			10.0	7.00	9.75	8.75	8.71	8.94	6.00	8.88	8.60
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q49 YES	72 26%	1285 26%	~	11 27%	20 31%	18 20%	23 27%	45 24%	~	~	~	1 25%	6 50%	8 29%	33 29%	37 23%	64 24%	6 50%	52 24%	20 29%
NO	209 74%	3691 74%	100%	1 73%	30 69%	45 80%	71 73%	62 76%	146 76%	3 ~100%	3 ~	6 75%	20 50%	80 71%	127 77%	80 71%	201 76%	6 50%	161 76%	48 71%
NOT ANSWERED	19	387		2	4	4	9									1		19		
VALID CASES	281	4976	1	41	65	89	85	191	3	4	12	28	113	164	265	12	213	68		
NUMBER OF RESPONDENTS	300	5363	1	43	69	93	94	191	3	4	12	28	113	164	266	12	232	68		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q50 NEVER	1 1%	37 3%	~	~	1 5%	~	~	~	~	~	~	~	1 3%	~	1 2%	~	1 2%	~	
SOMETIMES	8 11%	235 20%*	~	~	4 20%	2 11%	2 9%	4 9%	~	~	~	1 17%	3 9%	4 11%	6 10%	1 17%	5 10%	3 15%	
USUALLY	25 35%	343 30%	~	2 18%	8 40%	7 39%	8 36%	18 40%	~	~	~	2 33%	2 25%	12 38%	13 35%	23 37%	2 33%	17 33%	8 40%
ALWAYS	37 52%	547 47%	~	9 82%	7 35%	9 50%	12 55%	23 51%	~	~	1 100%	3 50%	6 75%	16 50%	20 54%	33 52%	3 50%	28 55%	9 45%
#ALWAYS + USUALLY (NET)	62 87%	890 77%*	~	11 100%	15 75%	16 89%	20 91%	41 91%	~	~	1 100%	5 83%	8 100%	28 88%	33 89%	56 89%	5 83%	45 88%	17 85%
TOP BOX SCORE	37 52%	547 47%	~	9 82%	7 35%	9 50%	12 55%	23 51%	~	~	1 100%	3 50%	6 75%	16 50%	20 54%	33 52%	3 50%	28 55%	9 45%
NOT ANSWERED	1	42					1						1		1		1		
VALID CASES	71	1162		11	20	18	22	45			1	6	8	32	37	63	6	51	20
NUMBER OF RESPONDENTS	72	1204		11	20	18	23	45			1	6	8	33	37	64	6	52	20
	100%	100%		100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q51 NEVER		21 2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	4 6%	81 7%	~	~ 10%	2 6%	1 5%	1 7%	3 ~	~	~	~	~	~	2 6%	2 5%	4 6%	~	4 8%	~
USUALLY	16 23%	289 25%	~ 27%	3 15%	3 28%	5 23%	5 23%	13 29%	~	~	~	~	~	9 28%	7 19%	12 19%	3 50%	9 18%	7 35%
ALWAYS	51 72%	768 66%	~ 73%	8 75%	15 67%	12 67%	16 73%	29 64%	~	~	1 100%	6 100%	8 100%	21 66%	28 76%	47 75%	3 50%	38 75%	13 65%
#ALWAYS + USUALLY (NET)	67 94%	1057 91%	~ 100%	11 90%	18 94%	17 94%	21 95%	42 93%	~	~	1 100%	6 100%	8 100%	30 94%	35 95%	59 94%	6 100%	47 92%	20 100%
TOP BOX SCORE	51 72%	768 66%	~ 73%	8 75%	15 67%	12 67%	16 73%	29 64%	~	~	1 100%	6 100%	8 100%	21 66%	28 76%	47 75%	3 50%	38 75%	13 65%
NOT ANSWERED	1	44					1							1		1		1	
VALID CASES	71	1160		11	20	18	22	45			1	6	8	32	37	63	6	51	20
NUMBER OF RESPONDENTS	72	1204		11	20	18	23	45			1	6	8	33	37	64	6	52	20
	100%	100%		100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]



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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q52 YES	103 38%	1790 36%	1 100%~	17 41%~	26 43%	35 41%	24 28%*	64 34%	~	~	~	3 75%~	5 42%~	16 64%~	46 42%	56 36%	100 39%~	2 18%~	79 39%	24 36%
NO	169 62%	3138 64%	~	24 59%~	34 57%	50 59%	61 72%*	123 66%	3 ~100%~	~	1 ~	7 25%~	9 58%~	9 36%~	64 58%	101 64%	157 61%~	9 82%~	126 61%	43 64%
NOT ANSWERED	28	435		2	9	8	9	4						3	3	7	9	1	27	1
VALID CASES	272	4928	1	41	60	85	85	187	3		4	12	25	110	157	257	11	205	67	
NUMBER OF RESPONDENTS	300	5363	1	43	69	93	94	191	3		4	12	28	113	164	266	12	232	68	
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER					
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
PQ53 NEVER	3 1%	64 1%	~	3%~	~	1%	1%	0.5%	~	~	~	~	~	4%~	3%	~	3	~	1%	~	3	~
SOMETIMES	13 5%	317 6%	100%~	1 8%~	3 7%	4 4%	3 2%	9 5%	~	~	~	~	1 8%~	1 4%~	7 6%	6 4%	12 5%~	1 9%~	10 5%	3 5%		
USUALLY	41 15%	629 13%	~	3 8%~	9 15%	16 19%	13 15%	26 14%	~	~	~	~	4 33%~	6 25%~	17 16%	23 15%	39 15%~	1 9%~	30 15%	11 17%		
ALWAYS	210 79%	3884 79%	~	31 82%~	46 78%	64 76%	69 81%	147 80%	~100%~	3	4	7 58%~	16 67%~	82 75%	124 81%	198 79%~	9 82%~	158 79%	52 79%			
#ALWAYS + USUALLY (NET)	251 94%	4513 92%	~	34 89%~	55 93%	80 95%	82 96%	173 95%	~100%~	3	4	11 92%~	22 92%~	99 91%	147 96%	237 94%~	10 91%~	188 94%	63 95%			
TOP BOX SCORE	210 79%	3884 79%	~	31 82%~	46 78%	64 76%	69 81%	147 80%	~100%~	3	4	7 58%~	16 67%~	82 75%	124 81%	198 79%~	9 82%~	158 79%	52 79%			
NOT ANSWERED	5	91		3	1	1		4					1	1	4	5		4	1			
VALID CASES	267	4894	1	38	59	84	85	183	3		4	12	24	109	153	252	11	201	66			
NUMBER OF RESPONDENTS	272 100%	4985 100%	1 100%	41 100%	60 100%	85 100%	85 100%	187 100%	3 100%		4 100%	12 100%	25 100%	110 100%	157 100%	257 100%	11 100%	205 100%	67 100%			

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q54 WORST HEALTH PLAN POSSIBLE	24	0.5%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01	1	11	~	~	~	1	~	~	~	~	~	~	~	1	~	1	~	~	1
	0.4%	0.2%	~	~	~	1%	~	~	~	~	~	~	~	0.9%	~	0.4%	~	~	1%
02	1	31	~	~	1	~	~	~	~	~	~	~	~	1	~	1	~	~	1
	0.4%	0.6%	~	~	2%	~	~	~	~	~	~	~	~	0.6%	~	0.4%	~	~	0.5%
03	1	38	~	~	1	~	~	~	~	~	~	~	~	1	~	1	~	~	1
	0.4%	0.8%	~	~	2%	~	~	~	~	~	~	~	~	0.6%	~	0.4%	~	~	0.5%
04	2	60	~	~	~	1	1	1	~	~	~	~	~	1	1	1	1	1	1
	0.7%	1%	~	~	~	1%	1%	0.5%	~	~	~	~	~	0.9%	0.6%	0.4%	8%	0.5%	1%
05	9	233	~	3	2	1	3	9	~	~	~	~	~	2	7	8	1	7	2
	3%	5%	~	7%	3%	1%	4%	5%	~	~	~	~	~	2%	4%	3%	8%	3%	3%
06	11	215	~	1	1	6	3	9	~	~	~	~	~	4	7	11	~	7	4
	4%	4%	~	2%	2%	7%	4%	5%	~	~	~	~	~	4%	4%	4%	~	3%	6%
07	25	490	~	2	7	8	8	17	~	1	~	~	~	4	5	20	24	1	17
	9%	10%	~	5%	11%	9%	10%	9%	~	33%	~	~	~	14%	5%*	12%*	9%	8%	8%
08	52	940	~	3	13	19	17	38	~	~	~	2	2	6	17	33	50	2	39
	19%	19%	~	7%	20%	22%	20%	20%	~	~	~	50%	18%	21%	15%	20%	19%	17%	19%
09	57	878	~	6	12	25	14	38	~	~	~	4	5	23	34	53	3	40	17
	21%	18%	~	15%	18%	29%*	17%	20%	~	~	~	36%	18%	21%	21%	20%	25%	19%	25%
BEST HEALTH PLAN POSSIBLE	118	2014	100%	1	26	28	25	38	~	2	~	2	5	13	58	58	112	4	96
	43%	41%	100%	63%	43%	29%*	45%	40%	~	67%	~	50%	45%	46%	52%*	36%*	43%	33%	46%*
#8-10 (NET)	227	3832	100%	1	35	53	69	69	~	2	~	4	11	24	98	125	215	9	175
	82%	78%	100%	85%	82%	80%	82%	80%	~	67%	~	100%	100%	86%	88%*	77%*	82%	75%	84%

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR AFR-	AMR AS-	NATV HAW/ PAC	AMR IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC
9-10 (NET)	175 63%	2892 59%	1 100%	32 78%	40 62%	50 58%	52 62%	113 60%	2 ~ 67%	2 ~ 50%	9 82%	18 64%	81 73%*	92 57%*	165 63%~	7 58%~	136 65%	39 57%	
NOT ANSWERED	23	430		2	4	7	10	2			1		2	2	4		23		
VALID CASES	277	4933	1	41	65	86	84	189	3	4	11	28	111	162	262	12	209	68	
NUMBER OF RESPONDENTS	300 100%	5363 100%	1 100%	43 100%	69 100%	93 100%	94 100%	191 100%	3 100%	4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%	
MEAN	8.70	8.49	10.0	9.10	8.65	8.48	8.75	8.59	9.00	9.00	9.27	8.96	8.98	8.49	8.71	8.25	8.79	8.41	
p stat_(*=Sig @ p<=.05)		.029*	~	~	.781	.120	.702	.084	~	~	~	~	~	.014*	.011*	~	~	.087	.087

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q55																		
YES	125 45%	2010 40%	21 ~ 51%	36 ~ 55%	39 45%	29 35%*	89 47%	1 ~ 33%	3 ~ 75%	3 25%	12 43%	49 44%	75 46%	115 43%	7 70%	75 35%*	50 76%*	
NO	153 55%	2973 60%	1 100%	20 49%	29 45%	48 55%	55 65%*	100 53%	2 ~ 67%	1 ~ 25%	9 75%	16 57%	62 54%	88 56%	150 57%	3 30%	137 65%*	16 24%*
NOT ANSWERED	22	380	2	4	6	10	2					2	1	1	2	20	2	
VALID CASES	278	4983	1	41	65	87	84	189	3	4	12	28	111	163	265	10	212	66
NUMBER OF RESPONDENTS	300 100%	5363 100%	1 100%	43 100%	69 100%	93 100%	94 100%	191 100%	3 100%	4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q56 NEVER	4 3%	30 1%	~	~	2 6%~	1 3%~	1 3%~	2 2%~	~	~	~	~	2 ~17%~	1 2%~	3 4%~	4 4%~	~	4 6%*	~
SOMETIMES	14 12%	187 9%	~	2 10%~	5 15%~	4 11%~	3 10%~	6 7%~	1 ~100%~	~	~	3 ~100%~	2 17%~	4 9%~	10 14%~	12 11%~	2 29%~	8 11%~	6 12%~
USUALLY	19 16%	459 23%*	~	3 14%~	4 12%~	8 22%~	4 14%~	15 17%~	~	~	~	~	1 ~8%~	9 20%~	10 14%~	17 15%~	1 14%~	9 13%~	10 20%~
ALWAYS	83 69%	1338 66%	~	16 76%~	23 68%~	23 64%~	21 72%~	64 74%~	~	~	3 ~100%~	7 ~58%~	32 70%~	50 68%~	77 70%~	4 57%~	49 70%~	34 68%~	
#ALWAYS + USUALLY (NET)	102 85%	1797 89%	~	19 90%~	27 79%~	31 86%~	25 86%~	79 91%~	~	~	3 ~100%~	8 ~67%~	41 89%~	60 82%~	94 85%~	5 71%~	58 83%~	44 88%~	
TOP BOX SCORE	83 69%	1338 66%	~	16 76%~	23 68%~	23 64%~	21 72%~	64 74%~	~	~	3 ~100%~	7 ~58%~	32 70%~	50 68%~	77 70%~	4 57%~	49 70%~	34 68%~	
NOT ANSWERED	5	42			2	3		2						3	2	5		5	
VALID CASES	120	2014		21	34	36	29	87	1		3	3	12	46	73	110	7	70	50
NUMBER OF RESPONDENTS	125	2056		21	36	39	29	89	1		3	3	12	49	75	115	7	75	50
	100%	100%		100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC
Q57 #YES	61	1193	9	24	17	11	40	1	2	1	8	28	32	53	6	37	24
	50%	60%*	~ 45%	~ 69%	~ 45%	~ 39%	47%~	~100%	~ 67%	33%	67%	60%	44%	47%	~100%	52%	48%
NO	60	793	11	11	21	17	46	~	~	1	2	4	19	41	59	34	26
	50%	40%*	~ 55%	~ 31%	~ 55%	~ 61%	53%~	~	~	~ 33%	67%	33%	40%	56%	53%~	~ 48%	52%
NOT ANSWERED	4	70	1	1	1	1	3						2	2	3	1	4
VALID CASES	121	1986	20	35	38	28	86	1	3	3	12	47	73	112	6	71	50
NUMBER OF RESPONDENTS	125	2056	21	36	39	29	89	1	3	3	12	49	75	115	7	75	50
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q57A YES	216 79%	3840 79%	1 100%~	24 60%~	54 83%	74 87%*	63 77%	151 81%	3 ~100%~	4 ~100%~	6 55%~	19 68%~	87 81%	126 78%	205 79%~	9 75%~	161 79%	55 81%	
NO	57 21%	1039 21%	~	16 40%~	11 17%	11 13%*	19 23%	36 19%	~	~	~	5 45%~	9 32%~	21 19%	35 22%	53 21%~	3 25%~	44 21%	13 19%
NOT ANSWERED	27	484		3	4	8	12	4			1		5	3	8		27		
VALID CASES	273	4879	1	40	65	85	82	187	3	4	11	28	108	161	258	12	205	68	
NUMBER OF RESPONDENTS	300 100%	5363 100%	1 100%	43 100%	69 100%	93 100%	94 100%	191 100%	3 100%	4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%	



Q57B IN THE LAST 6 MONTHS, IF YOUR CHILD NEEDED TO SEE A DENTIST RIGHT AWAY BECAUSE OF A DENTAL EMERGENCY, DID HE/SHE GET TO SEE A DENTIST AS SOON AS YOU WANTED?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q57B NEVER	33 29%	674 30%		4 ~ 31%	7 28%	10 27%	12 32%	16 25%	2 ~100%	1 ~ 50%	1 17%	2 18%	15 27%	17 31%	28 27%	3 43%	24 29%	9 30%	
SOMETIMES	20 18%	430 19%			6 ~ 24%	7 19%	7 18%	14 22%	~	~	~	1 ~ 17%	1 9%	9 16%	10 18%	18 17%	2 29%	14 17%	6 20%
USUALLY	24 21%	488 22%		4 ~ 31%	6 24%	4 11%	10 26%	17 27%	~	~	~	1 ~ 17%	3 27%	10 18%	14 25%	23 22%	1 14%	17 20%	7 23%
ALWAYS	37 32%	667 30%	1 100%	5 38%	6 24%	16 43%	9 24%	17 27%	~	~	~ 50%	3 50%	5 45%	22 39%	14 25%	36 34%	1 14%	29 35%	8 27%
#ALWAYS + USUALLY (NET)	61 54%	1154 51%	1 100%	9 69%	12 48%	20 54%	19 50%	34 53%	~	~	~ 50%	4 67%	8 73%	32 57%	28 51%	59 56%	2 29%	46 55%	15 50%
TOP BOX SCORE	37 32%	667 30%	1 100%	5 38%	6 24%	16 43%	9 24%	17 27%	~	~	~ 50%	3 50%	5 45%	22 39%	14 25%	36 34%	1 14%	29 35%	8 27%
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	155	2651		27	36	48	44	119	1		2	6	16	49	105	151	3	120	35
NOT ANSWERED	31	454		3	8	8	12	8					1	8	4	10	2	28	3
VALID CASES	114	2258	1	13	25	37	38	64	2		2	6	11	56	55	105	7	84	30
NUMBER OF RESPONDENTS	300 100%	5363 100%	1 100%	43 100%	69 100%	93 100%	94 100%	191 100%	3 100%		4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%

Q57C CHOICES FOR YOUR CHILD'S TREATMENT OR HEALTH CARE CAN INCLUDE CHOICES ABOUT MEDICINE, SURGERY, OR OTHER TREATMENT. IN THE LAST 6 MONTHS, DID YOUR PROVIDER TELL YOU THERE WAS MORE THAN ONE CHOICE FOR YOUR CHILD'S TREATMENT OR HEALTH CARE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q57C YES	54 20%	1026 21%		9 ~ 24%~	12 20%	17 20%	16 20%	30 16%*	~	~	1 ~ 25%~	1 8%~	11 44%~	24 22%	29 18%	49 19%~	4 36%~	34 17%*	20 29%*
NO	214 80%	3791 79%	1 100%~	29 76%~	49 80%	70 80%	65 80%	152 84%*	3 ~100%~	3 ~ 75%~	11 92%~	14 56%~	85 78%	128 82%	206 81%~	7 64%~	166 83%*	48 71%*	
NOT ANSWERED	32	546		5	8	6	13	9					3	4	7	11	1	32	
VALID CASES	268	4817	1	38	61	87	81	182	3	4	12	25	109	157	255	11	200	68	
NUMBER OF RESPONDENTS	300 100%	5363 100%	1 100%	43 100%	69 100%	93 100%	94 100%	191 100%	3 100%	4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%	

Q57D IN THE LAST 6 MONTHS, DID YOUR PROVIDER TALK WITH YOU ABOUT THE PROS AND CONS OF EACH CHOICE FOR YOUR CHILD'S TREATMENT OR HEALTH CARE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q57D #YES	50 93%	865 87%	8 ~ 89%~	11 92%~	16 94%~	15 94%~	27 90%~				1 ~100%~	1 100%~	11 100%~	23 96%~	27 93%~	45 92%~	4 100%~	31 91%~	19 95%~
NO	4 7%	124 13%	1 ~ 11%~	1 8%~	1 6%~	1 6%~	3 10%~							1 4%~	2 7%~	4 8%~		3 9%~	1 5%~
NOT ANSWERED		6																	
VALID CASES	54	990	9	12	17	16	30				1	1	11	24	29	49	4	34	20
NUMBER OF RESPONDENTS	54 100%	996 100%	9 100%	12 100%	17 100%	16 100%	30 100%				1 100%	1 100%	11 100%	24 100%	29 100%	49 100%	4 100%	34 100%	20 100%

[ASKED IF Q57C = YES]

Q57E IN THE LAST 6 MONTHS, WHEN THERE WAS MORE THAN ONE CHOICE FOR YOUR CHILD'S TREATMENT OR HEALTH CARE, DID YOUR PROVIDER ASK YOU WHICH CHOICE WAS BEST FOR YOUR CHILD?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC
Q57E #YES	45 90%	853 87%	8 ~ 89%	11 ~ 100%	13 ~ 93%	13 ~ 81%	24 89%	~	~	1 ~ 100%	1 ~ 100%	11 ~ 100%	20 91%	25 89%	42 91%	2 67%	27 87%	18 95%
NO	5 10%	127 13%	1 ~ 11%	~	1 ~ 7%	3 ~ 19%	3 11%	~	~	~	~	~	2 9%	3 11%	4 9%	1 33%	4 13%	1 5%
NOT ANSWERED	4	15			1	3	3						2	1	3	1	3	1
VALID CASES	50	981	9	11	14	16	27			1	1	11	22	28	46	3	31	19
NUMBER OF RESPONDENTS	54 100%	996 100%	9 100%	12 100%	17 100%	16 100%	30 100%			1 100%	1 100%	11 100%	24 100%	29 100%	49 100%	4 100%	34 100%	20 100%

[ASKED IF Q57C = YES]

Q57F IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PROVIDER CONSIDER AND RESPECT WHAT HEALTH CARE AND TREATMENT CHOICES YOU THOUGHT WORK BEST FOR YOUR CHILD?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q57F NEVER		20 2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	3 6%	89 9%	~	~	~	1 6%	2 13%	3 11%	~	~	~	~	~	1 4%	2 7%	2 4%	1 25%	2 6%	1 5%
USUALLY	11 22%	244 25%	~	2 22%	3 27%	5 31%	1 7%	3 11%	~	~	~	1 ~100%	2 18%	7 30%	4 14%	8 17%	2 50%	7 23%	4 20%
ALWAYS	37 73%	624 64%	~	7 78%	8 73%	10 62%	12 80%	22 79%	~	~	1 ~100%	9 ~82%	15 65%	22 79%	36 78%	1 25%	22 71%	15 75%	
#ALWAYS + USUALLY (NET)	48 94%	868 89%	~	9 ~100%	11 ~100%	15 94%	13 87%	25 89%	~	~	1 ~100%	1 ~100%	11 ~100%	22 96%	26 93%	44 96%	3 75%	29 94%	19 95%
TOP BOX SCORE	37 73%	624 64%	~	7 78%	8 73%	10 62%	12 80%	22 79%	~	~	1 ~100%	9 ~82%	15 65%	22 79%	36 78%	1 25%	22 71%	15 75%	
NOT ANSWERED	3	20			1	1	1	2						1	1	3		3	
VALID CASES	51	976		9	11	16	15	28			1	1	11	23	28	46	4	31	20
NUMBER OF RESPONDENTS	54	996		9	12	17	16	30			1	1	11	24	29	49	4	34	20
	100%	100%		100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q57C = YES]

Q57G IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PROVIDER ENCOURAGE YOU TO ASK QUESTIONS AND RAISE CONCERNS?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC	
Q57G NEVER	3 6%	39 4%	~	22%~	~	~	6%~	2 7%~	~	~	~	~	~	1 9%~	2 8%~	1 4%~	2 4%~	1 25%~	2 6%~	1 5%~	
SOMETIMES	2 4%	87 9%	~	~	~	13%~	2 4%~	1 4%~	~	~	~	~	~	~	1 4%~	1 4%~	1 2%~	~	~	2 10%~	
USUALLY	13 25%	248 25%	~	33%~	3 36%~	4 25%~	2 13%~	5 18%~	~	~	~	~	1 100%~	4 36%~	5 21%~	8 29%~	12 26%~	1 25%~	10 31%~	3 15%~	
ALWAYS	34 65%	607 62%	~	44%~	4 64%~	7 64%~	12 75%~	11 69%~	20 71%~	~	~	~	1 100%~	6 55%~	16 67%~	18 64%~	32 68%~	2 50%~	20 62%~	14 70%~	
#ALWAYS + USUALLY (NET)	47 90%	855 87%	~	78%~	7 100%~	11 100%~	16 100%~	13 81%~	25 89%~	~	~	~	1 100%~	1 100%~	10 91%~	21 88%~	26 93%~	44 94%~	3 75%~	30 94%~	17 85%~
TOP BOX SCORE	34 65%	607 62%	~	44%~	4 64%~	7 64%~	12 75%~	11 69%~	20 71%~	~	~	~	1 100%~	6 55%~	16 67%~	18 64%~	32 68%~	2 50%~	20 62%~	14 70%~	
NOT ANSWERED	2	16			1	1		2							1	2		2			
VALID CASES	52	980		9	11	16	16	28				1	1	11	24	28	47	4	32	20	
NUMBER OF RESPONDENTS	54	996		9	12	17	16	30				1	1	11	24	29	49	4	34	20	
	100%	100%		100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q57C = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q57H NEVER		18 2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES		71 7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
USUALLY	14 27%	202 21%	~ 33%	~ 36%	~ 25%	~ 19%	~ 14%	~	~	~	~ 100%	~ 27%	~ 38%	~ 18%	~ 26%	~ 25%	~ 25%	~ 30%	~	
ALWAYS	38 73%	690 70%	~ 67%	~ 64%	~ 75%	~ 81%	~ 86%	~	~	~ 100%	~ 73%	~ 62%	~ 82%	~ 74%	~ 75%	~ 75%	~ 70%	~	~	
#ALWAYS + USUALLY (NET)	52 100%	892 91%	~ 100%	~ 100%	~ 100%	~ 100%	~ 100%	~	~	~ 100%	~ 100%	~ 100%	~ 100%	~ 100%	~ 100%	~ 100%	~ 100%	~ 100%	~ 100%	
TOP BOX SCORE	38 73%	690 70%	~ 67%	~ 64%	~ 75%	~ 81%	~ 86%	~	~	~ 100%	~ 73%	~ 62%	~ 82%	~ 74%	~ 75%	~ 75%	~ 70%	~	~	
NOT ANSWERED	2	16			1	1	2							1	2		2			
VALID CASES	52	980		9	11	16	16	28			1	1	11	24	28	47	4	32	20	
NUMBER OF RESPONDENTS	54	996		9	12	17	16	30			1	1	11	24	29	49	4	34	20	
	100%	100%		100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q57C = YES]

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC	ALSK NATV	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q58																				
EXCELLENT	111 40%	1951 39%	1 100%	20 49%	30 47%	27 31%*	33 39%	79 42%	2 ~ 67%	1 ~ 25%	6 50%	11 39%	35 31%*	74 45%*	111 42%	11 ~ 46%*	13 20%*			
VERY GOOD	102 37%	1732 35%		13 ~ 32%	16 25%*	39 45%	34 40%	69 36%	1 ~ 33%	2 ~ 50%	4 33%	13 46%	38 34%	63 39%	102 38%	75 ~ 35%	27 41%			
GOOD	53 19%	973 20%		6 ~ 15%	15 23%	18 21%	14 16%	33 17%	~	1 ~ 25%	2 17%	4 14%	33 29%*	20 12%*	53 20%	35 ~ 17%	18 27%			
FAIR	11 4%	308 6%		2 ~ 5%	3 5%	3 3%	3 4%	8 4%	~	~	~	~	~	6 5%	5 3%	11 ~ 92%	4 2%*	7 11%*		
POOR	1 0.4%	13 0.3%		~	~	~	1 1%	1 0.5%	~	~	~	~	~	1 ~0.6%	1 ~ 8%	1 ~ 2%				
#EXCELLENT + VERY GOOD + GOOD (NET)	266 96%	4656 94%	1 100%	39 95%	61 95%	84 97%	81 95%	181 95%	3 ~100%	4 ~100%	12 100%	28 100%	106 95%	157 96%	266 100%	208 ~ 98%*	58 88%*			
NOT ANSWERED	22	386		2	5	6	9	1					1	1		20	2			
VALID CASES	278	4977	1	41	64	87	85	190	3	4	12	28	112	163	266	12	212	66		
NUMBER OF RESPONDENTS	300	5363	1	43	69	93	94	191	3	4	12	28	113	164	266	12	232	68		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		



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

	AGE							RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC
Q59 EXCELLENT	128 46%	2270 46%	25 ~ 61%~	31 48%	39 45%	33 38%	91 48%	2 ~ 67%~	1 ~ 25%~	8 67%~	14 50%~	55 49%	71 43%	126 48%~	1 8%~	111 53%*	17 25%*		
VERY GOOD	87 31%	1311 26%	11 ~ 27%~	20 31%	30 34%	26 30%	59 31%	1 ~ 33%~	2 ~ 50%~	2 17%~	9 32%~	29 26%	57 35%	84 32%~	2 17%~	64 30%	23 34%		
GOOD	40 14%	923 19%*	1 100%~	3 7%~	9 14%	13 15%	14 14%	~	1 ~ 25%~	4 ~ 14%~	21 19%	19 12%	35 13%~	5 42%~	26 12%	14 21%			
FAIR	21 8%	400 8%	2 ~ 5%~	4 6%	5 6%	10 12%	14 7%	~	~	2 ~ 17%~	1 4%~	5 4%	16 10%	19 7%~	2 17%~	8 4%*	13 19%*		
POOR	3 1%	72 1%	~	~	~	3 3%	1 0.5%	~	~	~	~	2 2%	1 0.6%	1 0.4%~	2 17%~	2 0.9%	1 1%		
#EXCELLENT + VERY GOOD + GOOD (NET)	255 91%	4503 91%	1 100%~	39 95%~	60 94%	73 85%*	176 92%	3 ~100%~	4 ~100%~	10 83%~	27 96%~	105 94%	147 90%	245 92%~	8 67%~	201 95%*	54 79%*		
NOT ANSWERED	21	387	2	5	6	8							1	1	21				
VALID CASES	279	4976	1	41	64	87	86	191	3	4	12	28	112	164	265	12	211	68	
NUMBER OF RESPONDENTS	300	5363	1	43	69	93	94	191	3	4	12	28	113	164	266	12	232	68	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q60 YES	66 24%	1132 23%	1 100%	11 27%	15 24%	23 26%	16 19%	51 27%	1 ~ 33%	1 ~ 25%	6 ~ 24%	22 19%	44 28%	59 23%	6 50%	19 9%*	47 71%*		
NO	209 76%	3829 77%		30 ~ 73%	47 ~ 76%	65 74%	67 81%	139 73%	2 ~ 67%	3 ~ 75%	11 ~ 100%	19 ~ 76%	91 81%	115 72%	202 77%	6 50%	190 91%*	19 29%*	
NOT ANSWERED	25	401		2	7	5	11	1			1	3		5			23	2	
VALID CASES	275	4962	1	41	62	88	83	190	3	4	11	25	113	159	261	12	209	66	
NUMBER OF RESPONDENTS	300	5363	1	43	69	93	94	191	3	4	12	28	113	164	266	12	232	68	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q61 YES	48	857		9	10	19	10	39	1	1		5	15	33	43	4	4	44
	76%	79%		~ 82%	~ 71%	~ 86%	~ 67%	~ 78%	~ 100%	~ 100%		~ 83%	~ 71%	~ 79%	~ 74%	~ 100%	~ 21%	~ 100%
NO	15	234	1	2	4	3	5	11				1	6	9	15		15	
	24%	21%	100%	~ 18%	~ 29%	~ 14%	~ 33%	~ 22%	~	~	~	~ 17%	~ 29%	~ 21%	~ 26%	~	~ 79%	~
NOT ANSWERED	3	30			1	1	1	1					1	2	1	2		3
VALID CASES	63	1091	1	11	14	22	15	50	1	1		6	21	42	58	4	19	44
NUMBER OF RESPONDENTS	66	1121	1	11	15	23	16	51	1	1		6	22	44	59	6	19	47
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q60 = YES]

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q62 YES	44	763	7	8	19	10	37				1		4	14	30	39	4	44	
	92%	90%	~ 78%	~ 80%	~ 100%	~ 100%	95%	~	~	~ 100%	~	~ 80%	~ 93%	~ 91%	~ 91%	~ 100%	~	~ 100%	~
NO	4	83	2	2			2		1				1	1	3	4		4	
	8%	10%	~ 22%	~ 20%	~	~	5%	~ 100%	~	~	~	~ 20%	~ 7%	~ 9%	~ 9%	~ 9%	~ 100%	~	~
NOT ANSWERED		20																	
VALID CASES	48	846	9	10	19	10	39		1		1		5	15	33	43	4	4	44
NUMBER OF RESPONDENTS	48	866	9	10	19	10	39		1		1		5	15	33	43	4	4	44
	100%	100%	100%	100%	100%	100%	100%		100%		100%		100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q60 = YES AND Q61 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
Q63 YES	36 13%	727 15%		6 ~ 15%~	6 9%	11 12%	13 15%	26 14%	~	~	~	2 ~ 17%~	1 4%~	10 9%	26 16%	29 11%~	6 50%~	7 3%*	29 43%*
NO	243 87%	4197 85%	1 100%~	35 85%~	58 91%	77 88%	72 85%	165 86%	3 ~100%~		4 ~100%~	10 83%~	27 96%~	103 91%	138 84%	236 89%~	6 50%~	204 97%*	39 57%*
NOT ANSWERED	21	439		2	5	5	9								1		21		
VALID CASES	279	4924	1	41	64	88	85	191	3		4	12	28	113	164	265	12	211	68
NUMBER OF RESPONDENTS	300 100%	5363 100%	1 100%	43 100%	69 100%	93 100%	94 100%	191 100%	3 100%		4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q64 YES	28 80%	620 86%	~	4 67%	5 83%	8 80%	11 85%	19 76%	~	~	~	1 50%	1 100%	7 70%	21 84%	21 75%	6 100%	2 29%	26 93%
NO	7 20%	103 14%	~	2 33%	1 17%	2 20%	2 15%	6 24%	~	~	~	1 50%	~	3 30%	4 16%	7 25%	~	5 71%	2 7%
NOT ANSWERED	1	18				1	1								1	1			1
VALID CASES	35	723		6	6	10	13	25				2	1	10	25	28	6	7	28
NUMBER OF RESPONDENTS	36	741		6	6	11	13	26				2	1	10	26	29	6	7	29
	100%	100%		100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q63 = YES]

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q65 YES	26 93%	581 97%	4 ~100%	4 80%	8 100%	10 91%	18 95%	~	~	~	~100%	1 100%	1 100%	6 86%	20 95%	20 95%	5 83%	26 ~100%
NO	2 7%	18 3%	~	1 20%	~	1 9%	1 5%	~	~	~	~	~	~	1 14%	1 5%	1 5%	1 17%	2 100%
NOT ANSWERED		12																
VALID CASES	28	600	4	5	8	11	19				1	1	7	21	21	6	2	26
NUMBER OF RESPONDENTS	28	612	4	5	8	11	19				1	1	7	21	21	6	2	26
	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q63 = YES AND Q64 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q66 YES	32 11%	575 12%		3 ~ 7%	4 6%	11 12%	14 16%	23 12%	1 ~ 33%			1 ~ 8%		7 6%*	25 15%*	26 10%	5 42%	6 3%*	26 38%*
NO	247 89%	4353 88%	1 100%	38 93%	60 94%	77 88%	71 84%	168 88%	2 ~ 67%		4 ~ 100%	11 92%	28 100%	106 94%*	139 85%*	239 90%	7 58%	205 97%*	42 62%*
NOT ANSWERED	21	435		2	5	5	9								1		21		
VALID CASES	279	4928	1	41	64	88	85	191	3		4	12	28	113	164	265	12	211	68
NUMBER OF RESPONDENTS	300	5363	1	43	69	93	94	191	3		4	12	28	113	164	266	12	232	68
	100%	100%	100%	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?

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q67 YES	23 77%	448 80%	1 ~ 33%	3 75%	8 80%	11 85%	19 86%	~	~	~	~	1 ~100%	3 ~ 50%	20 83%	19 76%	4 80%	1 17%	22 92%
NO	7 23%	112 20%	2 ~ 67%	1 25%	2 20%	2 15%	3 14%	~	1 ~100%	~	~	~	3 ~ 50%	4 17%	6 24%	1 20%	5 83%	2 8%
NOT ANSWERED	2	21			1	1	1						1	1	1			2
VALID CASES	30	560	3	4	10	13	22		1			1	6	24	25	5	6	24
NUMBER OF RESPONDENTS	32 100%	581 100%	3 100%	4 100%	11 100%	14 100%	23 100%		1 100%			1 100%	7 100%	25 100%	26 100%	5 100%	6 100%	26 100%

[ASKED IF Q66 = YES]

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q68 YES	22 96%	439 97%	1 ~100%	3 ~100%	8 ~100%	10 91%	18 95%	~	~	~	~	1 ~100%	~	3 ~100%	19 95%	18 95%	4 ~100%	22 ~100%	
NO	1 4%	14 3%	~	~	~	1 9%	1 5%	~	~	~	~	~	~	~	1 5%	1 5%	1 ~100%	1 ~	
NOT ANSWERED		3																	
VALID CASES	23	453	1	3	8	11	19					1		3	20	19	4	1	22
NUMBER OF RESPONDENTS	23 100%	456 100%	1 100%	3 100%	8 100%	11 100%	19 100%					1 100%		3 100%	20 100%	19 100%	4 100%	1 100%	22 100%

[ASKED IF Q66 = YES AND Q67 = YES]

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q69 YES	23 8%	459 9%	3 ~	5 7%~	9 8%	6 10%	7 7%	12 6%	1 ~	33%~	~	~	1 8%~	2 7%~	9 8%	14 9%	20 8%~	2 17%~	6 3%*	17 25%*
NO	256 92%	4495 91%	1 100%~	38 93%~	59 92%	79 90%	79 93%	179 94%	2 ~	67%~	4 ~	11 100%~	26 92%~	104 93%~	150 92%	245 92%~	10 83%~	205 97%*	51 75%*	
NOT ANSWERED	21	409		2	5	5	9									1		21		
VALID CASES	279	4954	1	41	64	88	85	191	3		4	12	28	113	164	265	12	211	68	
NUMBER OF RESPONDENTS	300	5363	1	43	69	93	94	191	3		4	12	28	113	164	266	12	232	68	
	100%	100%	100%	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?

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q70 YES	14	314	2	1	7	4	9					1	1	4	10	12	2	14	
	67%	71%	~ 67%	~ 20%	~ 88%	~ 80%	75%	~	~	~	~100%	~ 50%	~ 57%	~ 71%	63%	~100%	~ 88%		
NO	7	129	1	4	1	1	3	1					1	3	4	7		5	2
	33%	29%	~ 33%	~ 80%	~ 13%	~ 20%	25%	~100%	~	~	~	~ 50%	~ 43%	~ 29%	37%	~	~100%	~ 13%	
NOT ANSWERED	2	20			1	1								2		1		1	1
VALID CASES	21	442	3	5	8	5	12	1				1	2	7	14	19	2	5	16
NUMBER OF RESPONDENTS	23	462	3	5	9	6	12	1				1	2	9	14	20	2	6	17
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q69 = YES]

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q71 YES	14	260	2	1	7	4	9	~	~	~	~	1	1	4	10	12	2	14
	100%	95%	~100%	~100%	~100%	~100%	~100%	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%	~100%
NO		14	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
		5%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		7																
VALID CASES	14	274	2	1	7	4	9					1	1	4	10	12	2	14
NUMBER OF RESPONDENTS	14	281	2	1	7	4	9					1	1	4	10	12	2	14
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q69 = YES AND Q70 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q72 YES	35 13%	722 15%	~	2 5%	5 8%	12 14%	16 19%	24 13%	~	~	~	1 25%	3 25%	1 4%	9 8%*	26 16%*	29 11%	6 50%	4 2%*	31 46%*
NO	243 87%	4209 85%	100%	1 95%	39 92%	59 86%	76 81%	68 87%	~100%	3	3	9 75%	27 96%	104 92%*	137 84%*	235 89%	6 50%	206 98%*	37 54%*	
NOT ANSWERED	22	432		2	5	5	10	1						1		2		22		
VALID CASES	278	4931	1	41	64	88	84	190	3		4	12	28	113	163	264	12	210	68	
NUMBER OF RESPONDENTS	300 100%	5363 100%	100%	1 100%	43 100%	69 100%	93 100%	94 100%	191 100%	3 100%	4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%	

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q73 YES	30	612	2	4	11	13	21			1	3	1	5	25	26	4	30	
	88%	90%	~100%	~80%	~92%	~87%	91%	~	~	~100%	~100%	~100%	56%	~100%	93%	~67%	~100%	~
NO	4	68		1	1	2	2						4		2	2	4	
	12%	10%	~	~20%	~8%	~13%	9%	~	~	~	~	~	44%	~	7%	~33%	~100%	~
NOT ANSWERED	1	39				1	1							1	1		1	
VALID CASES	34	680	2	5	12	15	23			1	3	1	9	25	28	6	4	30
NUMBER OF RESPONDENTS	35	719	2	5	12	16	24			1	3	1	9	26	29	6	4	31
	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q72 = YES]

NQ74 WHAT IS YOUR CHILD'S AGE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC
NQ74 LESS THAN 1 YEAR OLD	1 0.3%	27 0.5%	1 100%	~	~	~	~	~	~	~	~	~	~	1 0.9%	1 0.4%	1 0.4%	~	~
1 TO 3 YEARS OLD	43 14%	890 17%	43 ~100%	~	~	~	28 15%	1 ~33%	~	~	2 ~17%	5 18%	17 15%	24 15%	39 15%	2 17%	35 15%	8 12%
4 TO 7 YEARS OLD	69 23%	1394 26%	~	~100%	~	~	41 21%	~	~	2 ~50%	~	12 43%	28 25%	36 22%	61 23%	3 25%	58 25%	11 16%
8 TO 12 YEARS OLD	93 31%	1563 29%	~	~	~100%	~	66 35%	~	~	2 ~50%	3 25%	4 14%	38 34%	49 30%	84 32%	3 25%	66 28%	27 40%
13 OR OLDER	94 31%	1489 28%	~	~	~	94 ~100%	56 29%	2 ~67%	~	~	7 ~58%	7 25%	29 26%	55 34%	81 30%	4 33%	72 31%	22 32%
VALID CASES	300	5363	1	43	69	93	94	191	3	4	12	28	113	164	266	12	232	68
NUMBER OF RESPONDENTS	300 100%	5363 100%	1 100%	43 100%	69 100%	93 100%	94 100%	191 100%	3 100%	4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%

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



NQ75 IS YOUR CHILD MALE OR FEMALE?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC
NQ75 MALE	155 52%	2755 51%	1 100%	20 47%	34 49%	50 54%	50 53%	101 53%	1 ~ 33%	1 ~ 25%	6 50%	13 46%	59 52%	82 50%	136 51%	5 42%	115 50%	40 59%
FEMALE	145 48%	2608 49%	~	23 53%	35 51%	43 46%	44 47%	90 47%	2 ~ 67%	3 ~ 75%	6 50%	15 54%	54 48%	82 50%	130 49%	7 58%	117 50%	28 41%
VALID CASES	300	5363	1	43	69	93	94	191	3	4	12	28	113	164	266	12	232	68
NUMBER OF RESPONDENTS	300 100%	5363 100%	1 100%	43 100%	69 100%	93 100%	94 100%	191 100%	3 100%	4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%

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

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

	JCC TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q76																				
HISPANIC OR LATINO	113 41%	2091 42%	1 100%~	17 41%~	28 44%	38 44%	29 35%	52 28%*	~	~	~	2 50%~	9 75%~	10 36%~	113 100%~	~	106 40%~	6 50%~	92 44%*	21 31%*
NOT HISPANIC OR LATINO	164 59%	2832 58%	~	24 59%~	36 56%	49 56%	55 65%	137 72%*	~100%~	3	~	2 50%~	3 25%~	18 64%~	164 ~100%~	~	157 60%~	6 50%~	117 56%*	47 69%*
NOT ANSWERED	23	440		2	5	6	10	2									3		23	
VALID CASES	277	4923	1	41	64	87	84	189		3		4	12	28	113	164	263	12	209	68
NUMBER OF RESPONDENTS	300 100%	5363 100%	1 100%	43 100%	69 100%	93 100%	94 100%	191 100%		3 100%		4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	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	
Q77.1	JCC TOT CHLD																		
YES	218 73%	3570 67%*	33 ~ 77%	53 ~ 77%	69 74%	63 67%	191 100%~	~	~	~	~	27 ~ 96%	61 54%*	155 95%*	208 78%~	9 75%~	162 70%*	56 82%*	
NO	82 27%	1793 33%*	1 100%~	10 23%~	16 23%	24 26%	31 33%	~	3 ~100%~	4 ~100%~	12 100%~	1 4%~	52 46%*	9 5%*	58 22%~	3 25%~	70 30%*	12 18%*	
VALID CASES	300	5363	1	43	69	93	94	191	3	4	12	28	113	164	266	12	232	68	
NUMBER OF RESPONDENTS	300 100%	5363 100%	1 100%	43 100%	69 100%	93 100%	94 100%	191 100%	3 100%	4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%	

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

	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
Q77.2 YES	6 2%	230 4%*	~	~	3 4%	2 2%	1 1%	~	~	~	~	~	6 21%~	2 2%	4 2%	6 2%~	~	5 2%	1 1%	
NO	294 98%	5133 96%*	1 100%	43 100%	66 96%	91 98%	93 99%	191 100%	~	3 100%	~	4 100%	12 100%	22 79%~	111 98%	160 98%	260 98%	12 100%	227 98%	67 99%
VALID CASES	300	5363	1	43	69	93	94	191	3	4	12	28	113	164	266	12	232	68		
NUMBER OF RESPONDENTS	300 100%	5363 100%	1 100%	43 100%	69 100%	93 100%	94 100%	191 100%	3 100%	4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%		

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

		AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV ILND	AMER ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q77.3	JCC TOT CHLD																	
YES	8 3%	201 4%	3 ~	1 7%~	1 1%	4 ~		3 ~100%~			5 ~	18%~	1 0.9%	7 4%*	8 3%~		8 3%~	
NO	292 97%	5162 96%	1 100%~	40 93%~	68 99%	93 100%~	90 96%	191 100%~		4 ~	12 ~	23 82%~	112 99%	157 96%*	258 97%~	12 100%~	224 97%*100%~	68 100%~
VALID CASES	300	5363	1	43	69	93	94	191	3	4	12	28	113	164	266	12	232	68
NUMBER OF RESPONDENTS	300 100%	5363 100%	1 100%	43 100%	69 100%	93 100%	94 100%	191 100%	3 100%	4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV ILND	AMER ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q77.4 YES	4 1%	82 2%	~	~	1 1%	1 1%	2 2%	~	~	~	~	~	~	4 14%	2 2%	2 1%	4 2%	~	3 1%	1 1%
NO	296 99%	5281 98%	1 100%	43 100%	68 99%	92 99%	92 98%	191 100%	3 ~100%	4 ~100%	12 100%	24 86%	111 98%	162 99%	262 98%	12 100%	229 99%	67 99%		
VALID CASES	300	5363	1	43	69	93	94	191	3	4	12	28	113	164	266	12	232	68		
NUMBER OF RESPONDENTS	300 100%	5363 100%	1 100%	43 100%	69 100%	93 100%	94 100%	191 100%	3 100%	4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%		

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q77.5 YES	15 5%	275 5%	1 ~	7 2%~	3 10%	4 3%			4 ~100%~		11 ~ 39%~		5 4%	10 6%	15 6%~		11 5%	4 6%	
NO	285 95%	5088 95%	1 100%~	42 98%~	62 90%	90 97%	191 100%~	3 ~100%~			12 ~ 100%~	17 61%~	108 96%	154 94%	251 94%~	12 100%~	221 95%	64 94%	
VALID CASES	300	5363	1	43	69	93	191	3	4	12	28	113	164	266	12	232	68		
NUMBER OF RESPONDENTS	300 100%	5363 100%	1 100%	43 100%	69 100%	93 100%	191 100%	3 100%	4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%		

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

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q77.6 YES	21 7%	519 10%		4 ~ 9%	4 6%	4 4%	9 10%					12 ~ 100%	9 32%	16 14%*	5 3%*	21 8%~		16 7%	5 7%
NO	279 93%	4844 90%	1 100%~	39 91%~	65 94%	89 96%	85 90%	191 100%~	3 ~100%~	4 ~100%~		19 ~ 68%	97 86%*	159 97%*	245 92%~	12 100%~	216 93%	63 93%	
VALID CASES	300	5363	1	43	69	93	94	191	3	4	12	28	113	164	266	12	232	68	
NUMBER OF RESPONDENTS	300 100%	5363 100%	1 100%	43 100%	69 100%	93 100%	94 100%	191 100%	3 100%	4 100%	12 100%	28 100%	113 100%	164 100%	266 100%	12 100%	232 100%	68 100%	



Q78 WHAT IS YOUR AGE?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR WHT	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	
Q78 UNDER 18	15 5%	223 5%	1 100%	2 ~	6 3%	6 7%	6 7%	12 6%	~	~	~	~	1 9%	~	4 4%	11 7%	13 5%	2 17%	11 5%	4 6%
18 TO 24	10 4%	229 5%	~	5 12%	4 6%	1 1%	~	6 3%	~	~	~	~	~	2 7%	7 6%	3 2%	10 4%	~	9 4%	1 1%
25 TO 34	86 31%	1610 33%	~	24 59%	31 49%*	25 29%	6 7%*	64 34%	~	~	~	2 50%	4 36%	10 36%	40 36%	45 28%	83 32%	2 17%	74 36%*	12 18%*
35 TO 44	108 39%	1842 37%	~	9 22%	20 32%	39 45%	40 48%	68 36%	~	3 100%	~	1 25%	3 27%	10 36%	47 43%	60 37%	101 39%	6 50%	72 35%*	36 54%*
45 TO 54	36 13%	718 15%	~	1 2%	3 5%*	9 10%	23 28%*	25 13%	~	~	~	~	2 18%	5 18%	9 8%*	27 17%*	35 13%	1 8%	29 14%	7 10%
55 TO 64	12 4%	213 4%	~	1 2%	1 2%	4 5%	6 7%	8 4%	~	~	~	1 25%	1 9%	~	3 3%	9 6%	11 4%	1 8%	6 3%	6 9%
65 TO 74	5 2%	77 2%	~	~	2 3%	2 2%	1 1%	4 2%	~	~	~	~	~	1 4%	~	5 3%*	5 2%	~	4 2%	1 1%
75 OR OLDER	2 0.7%	15 0.3%	~	1 2%	~	~	1 1%	2 1%	~	~	~	~	~	~	~	2 1%	2 0.8%	~	2 1%	~
NOT ANSWERED	26	436	~	2	6	7	11	2	~	~	~	~	~	~	3	2	6	~	25	1
VALID CASES	274	4927	1	41	63	86	83	189	3	~	~	4	11	28	110	162	260	12	207	67
NUMBER OF RESPONDENTS	300	5363	1	43	69	93	94	191	3	~	~	4	12	28	113	164	266	12	232	68
	100%	100%	100%	100%	100%	100%	100%	100%	100%	~	~	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q79 ARE YOU MALE OR FEMALE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q79																				
MALE	45 16%	657 13%	100%~	3 7%~	8 13%	16 18%	17 20%	28 15%	~	~	~	25%~	17%~	25%~	15%	17%	42 16%~	3 27%~	30 14%	15 22%
FEMALE	231 84%	4307 87%	~	37 93%~	55 87%	71 82%	68 80%	161 85%	~	3 100%~	~	3 75%~	10 83%~	21 75%~	94 85%	135 83%	221 84%~	8 73%~	179 86%	52 78%
NOT ANSWERED	24	399		3	6	6	9	2						2	1	3	1	23	1	
VALID CASES	276	4964	1	40	63	87	85	189		3		4	12	28	111	163	263	11	209	67
NUMBER OF RESPONDENTS	300	5363	1	43	69	93	94	191		3		4	12	28	113	164	266	12	232	68
	100%	100%	100%	100%	100%	100%	100%	100%		100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC	
Q80																					
8TH GRADE OR LESS	31 11%	618 13%	100%~	3 7%~	9 14%	6 7%	12 15%	13 7%*	~	~	~	~	27%~	4%~	29 26%*	2 1%*	27 10%~	3 25%~	23 11%	8 12%	
SOME HIGH SCHOOL BUT DID NOT GRADUATE	37 13%	624 13%	~	15%~	6 11%	7 15%	13 13%	16 8%*	~	33%~	~	~	27%~	7%~	26 24%*	10 6%*	34 13%~	3 25%~	31 15%	6 9%	
HIGH SCHOOL GRADUATE OR GED	84 31%	1385 28%	~	32%~	13 30%	19 34%	30 27%	22 36%*	~	~	~	25%~	9%~	21%~	35 32%	49 30%	80 31%~	3 25%~	64 31%	20 29%	
SOME COLLEGE OR 2-YEAR DEGREE	93 34%	1555 32%	~	34%~	14 33%	21 33%	29 35%	29 37%	~	67%~	~	75%~	9%~	50%~	17 15%*	75 46%*	90 34%~	3 25%~	68 33%	25 37%	
4-YEAR COLLEGE GRADUATE	21 8%	470 10%	~	10%~	4 6%	4 8%	7 7%	6 8%	~	~	~	~	18%~	11%~	2 2%*	3 12%*	2 8%~	19 ~	21 8%	17 8%	4 6%
MORE THAN 4-YEAR COLLEGE DEGREE	9 3%	246 5%	~	2%~	1 6%	4 2%	2 2%	2 3%	~	~	~	~	9%~	7%~	1 0.9%*	2 5%*	8 3%~	9 ~	4 2%	5 7%	
NOT ANSWERED	25	466			2	5	6	12	1				1		3	1	5		25		
VALID CASES	275	4897	1	41	64	87	82	190	3		4	11	28	110	163	261	12	207	68		
NUMBER OF RESPONDENTS	300	5363	1	43	69	93	94	191	3		4	12	28	113	164	266	12	232	68		
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q81 HOW ARE YOU RELATED TO THE CHILD?

	JCC TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC
Q81																			
MOTHER OR FATHER	257 93%	4614 94%	1 100%~	39 95%~	59 92%	81 92%	77 94%	178 94%	3 ~100%~	3 ~ 75%~	10 91%~	25 89%~	108 97%*	147 90%*	244 93%~	11 92%~	195 93%	62 93%	
GRANDPARENT	10 4%	165 3%	~	2 2%~	4 3%	3 5%	6 4%	3 3%	~	~	~	1 9%~	2 7%~	1 0.9%*	9 6%*	3 3%~	1 8%~	7 3%	3 4%
AUNT OR UNCLE	3 1%	19 0.4%	~	~	1 2%	2 2%	1 ~0.5%	~	~	~	1 25%~	~	1 4%~	2 0.9%	1 1%	3 1%~	~	3 1%	~
OLDER BROTHER OR SISTER		8 0.2%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
OTHER RELATIVE		3 0.1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
LEGAL GUARDIAN	4 1%	60 1%	~	~	2 3%	1 1%	1 1%	3 2%	~	~	~	~	~	1 0.9%	3 2%	4 2%~	~	2 1%	2 3%
SOMEONE ELSE	2 0.7%	41 0.8%	~	1 2%~	~	~	1 1%	2 1%~	~	~	~	~	~	2 1%~	2 0.8%~	~	~	2 1%~	~
NOT ANSWERED	24	454		2	5	5	12	1				1		2	1	4		23	1
VALID CASES	276	4909	1	41	64	88	82	190	3		4	11	28	111	163	262	12	209	67
NUMBER OF RESPONDENTS	300	5363	1	43	69	93	94	191	3		4	12	28	113	164	266	12	232	68
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q82 YES	7	96	1	2	1	3	3							4	3	6		6	1
	4%	3%	100%~	~	5%~	2%	5%	2%	~	~	~	~	~	6%	3%	4%~	~	5%~	2%~
NO	171	3230	25	35	57	54	125	3	2	7	13		62	109	164	6	127	44	
	96%	97%	~100%~	95%~	98%	95%	98%	~100%~	~100%~	100%~	100%~	100%~	94%	97%	96%~100%~	~	95%~	98%~	
NOT ANSWERED	2	38			1	1	1								2		2		
VALID CASES	178	3326	1	25	37	58	57	128	3	2	7	13	66	112	170	6	133	45	
NUMBER OF RESPONDENTS	180	3364	1	25	37	59	58	129	3	2	7	13	66	112	172	6	135	45	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF SURVEY COMPLETED BY MAIL]

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

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q83.1 YES	5 71%	45 50%	~	~	1 50%	1 100%	3 100%	2 67%	~	~	~	~	~	3 75%	2 67%	4 67%	4 67%	1 100%
NO	2 29%	44 50%	1 100%	~	1 50%	~	~	1 33%	~	~	~	~	~	1 25%	1 33%	2 33%	2 33%	~
VALID CASES	7	89	1		2	1	3	3						4	3	6	6	1
NUMBER OF RESPONDENTS	7 100%	89 100%	1 100%		2 100%	1 100%	3 100%	3 100%						4 100%	3 100%	6 100%	6 100%	1 100%

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

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

		AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q83.2	JCC TOT CHLD																
YES	1 14%	28 31%	~	~	~	1 33%	~	~	~	~	~	~	1 25%	1 17%	1 17%	~	
NO	6 86%	61 69%	1 100%	2 100%	1 100%	2 67%	3 100%	~	~	~	~	~	3 75%	3 100%	5 83%	1 100%	
VALID CASES	7	89	1	2	1	3	3						4	3	6	6	1
NUMBER OF RESPONDENTS	7 100%	89 100%	1 100%	2 100%	1 100%	3 100%	3 100%						4 100%	3 100%	6 100%	6 100%	1 100%

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

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

	AGE						RACE						ETHNICITY	HEALTH STATUS	CCC SCREENER				
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q83.3 YES	3 43%	11 12%	1 100%	~	~	~	2 67%	1 33%	~	~	~	~	~	2 50%	1 33%	3 50%	~	3 50%	~
NO	4 57%	78 88%	~	~	100%	100%	1 33%	2 67%	~	~	~	~	~	2 50%	2 67%	3 50%	~	3 50%	1 100%
VALID CASES	7	89	1	2	1	3	3							4	3	6		6	1
NUMBER OF RESPONDENTS	7 100%	89 100%	1 100%	2 100%	1 100%	3 100%	3 100%							4 100%	3 100%	6 100%		6 100%	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.

		AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q83.4 YES	JCC TOT CHLD	19 21%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NO	JCC TOT CHLD	7 70 100%	1 79%~100%	2 ~100%	1 ~100%	3 ~100%	3 ~100%	~	~	~	~	~	4 ~100%	3 ~100%	6 ~100%	6 ~100%	1 ~100%
VALID CASES	JCC TOT CHLD	7 89	1 100%	2 100%	1 100%	3 100%	3 100%						4 100%	3 100%	6 100%	6 100%	1 100%
NUMBER OF RESPONDENTS	JCC TOT CHLD	7 89 100%	1 100%	2 100%	1 100%	3 100%	3 100%						4 100%	3 100%	6 100%	6 100%	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.

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q83.5 YES	1 14%	8 10%	~	~	1 50%	~	1 33%	~	~	~	~	~	1 33%	1 17%	~	1 17%	~
NO	6 86%	81 90%	1 100%	1 50%	1 100%	3 100%	2 67%	~	~	~	~	~	4 100%	2 67%	5 83%	5 83%	1 100%
VALID CASES	7	89	1	2	1	3	3						4	3	6	6	1
NUMBER OF RESPONDENTS	7 100%	89 100%	1 100%	2 100%	1 100%	3 100%	3 100%						4 100%	3 100%	6 100%	6 100%	1 100%

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

NQ14 RATING OF ALL CHILD'S HEALTH CARE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC
NQ14 0-6	189%	32910%	5~14%	5~11%	2~3%*	6~11%	1512%	~	~	~	1~13%	~	57%	1210%	137%	444%	139%	58%
7-8	6131%	111232%	9~24%	12~26%	23~38%	1730%	4132%	~100%	2~	~	3~38%	730%	1724%	4033%	5631%	111%	3525%*	2643%*
9-10	12161%	202558%	23~62%	29~63%	35~58%	3460%	7457%	~	~	3~100%	4~50%	1670%	4969%	6857%	11362%	444%	9266%*	2948%*
VALID CASES	200	3466	37	46	60	57	130	2	2	3	8	23	71	120	182	9	140	60
NUMBER OF RESPONDENTS	200100%	3466100%	37100%	46100%	60100%	57100%	130100%	2100%	2100%	3100%	8100%	23100%	71100%	120100%	182100%	9100%	140100%	60100%
MEAN	2.52	2.49	2.49	2.52	2.55	2.49	2.45	2.00	3.00	2.38	2.70	2.62	2.47	2.55	2.00	2.56	2.40	
p stat_(*=Sig @ p<=.05)	.581		~	~	~.595	.748	.058	~	~	~	~	~	.087	.199	~	~	.105	.103

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
NQ41 0-6	10 4%	319 8%*	~	1 3%	2 3%	3 4%	4 6%	4 3%	1 ~ 50%	~	~	~	2 7%	6 7%	4 3%	10 5%	~	6 4%	4 6%
7-8	47 21%	980 23%	~	8 23%	11 18%	19 27%	9 14%	32 21%	1 ~ 50%	1 ~ 25%	1 13%	6 21%	20 23%	27 20%	45 21%	2 29%	33 20%	14 22%	
9-10	172 75%	2929 69%*	~	26 74%	47 78%	48 69%	51 80%	120 77%	~	~	3 ~ 75%	7 88%	20 71%	62 70%	106 77%	162 75%	5 71%	127 77%	45 71%
VALID CASES	229	4228		35	60	70	64	156	2		4	8	28	88	137	217	7	166	63
NUMBER OF RESPONDENTS	229 100%	4228 100%		35 100%	60 100%	70 100%	64 100%	156 100%	2 100%		4 100%	8 100%	28 100%	88 100%	137 100%	217 100%	7 100%	166 100%	63 100%
MEAN	2.71	2.62		2.71	2.75	2.64	2.73	2.74	1.50		2.75	2.88	2.64	2.64	2.74	2.70	2.71	2.73	2.65
p stat_(*=Sig @ p<=.05)		.013*	~	~.463	.235	.642		.182	~	~	~	~	~	.119	.209	~	~	.367	.364

[ASKED IF Q30 = YES]

NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC
NQ48 0-6	3 8%	69 10%	1 ~ 14%	1 ~ 9%	1 7%	3 11%	~	~	~	~	~	~	1 13%	2 7%	1 3%	2 67%	1 6%	2 10%
7-8	9 25%	178 26%	1 ~ 14%	5 ~ 45%	3 21%	8 29%	~	~	~	~	1 100%	~	2 25%	7 25%	9 28%	~	4 25%	5 25%
9-10	24 67%	428 63%	5 ~ 71%	4 100%	5 100%	10 71%	17 61%	~	~	1 100%	~	4 100%	5 63%	19 68%	22 69%	1 33%	11 69%	13 65%
VALID CASES	36	675	7	4	11	14	28			1	1	4	8	28	32	3	16	20
NUMBER OF RESPONDENTS	36 100%	675 100%	7 100%	4 100%	11 100%	14 100%	28 100%			1 100%	1 100%	4 100%	8 100%	28 100%	32 100%	3 100%	16 100%	20 100%
MEAN	2.58	2.53	2.57	3.00	2.36	2.64	2.50			3.00	2.00	3.00	2.50	2.61	2.66	1.67	2.63	2.55
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

NQ54 RATING OF CHILD'S HEALTH PLAN

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NQ54 0-6	25 9%	619 12%	~	10%~	4 8%	5 10%	9 8%	7 11%*	21	~	~	~	~	~	8 7%	17 10%	23 9%~	2 17%~	17 8%	8 12%
7-8	77 28%	1448 29%	~	12%~	5 31%	20 31%	27 30%	25 29%	55	~	1 33%~	2 50%~	2 18%~	10 36%~	22 20%*	53 33%*	74 28%~	3 25%~	56 27%	21 31%
9-10	175 63%	2927 59%	100%~	1 78%~	32 62%	40 58%	50 62%	52 60%	113	~	2 67%~	2 50%~	9 82%~	18 64%~	81 73%*	92 57%*	165 63%~	7 58%~	136 65%	39 57%
VALID CASES	277	4994	1	41	65	86	84	189		3	4	11	28	111	162	262	12	209	68	
NUMBER OF RESPONDENTS	277 100%	4994 100%	100%	100%	100%	100%	100%	100%		3 100%	4 100%	11 100%	28 100%	111 100%	162 100%	262 100%	12 100%	209 100%	68 100%	
MEAN	2.54	2.46	3.00	2.68	2.54	2.48	2.54	2.49		2.67	2.50	2.82	2.64	2.66	2.46	2.54	2.42	2.57	2.46	
p stat_(*=Sig @ p<=.05)		.060	~	~	.966	.272	.922	.029*	~	~	~	~	~	~	.016*	.018*	~	~	.217	.216

GETTING NEEDED CARE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NPRBSEE4 NQ46	2.27	2.21		2.57	2.50	2.00	2.33	2.31			3.00	1.00	2.00	2.64	2.14	2.35	1.75	2.28	2.27	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCARNES4 NQ15	2.46	2.44		2.46	2.38	2.50	2.49	2.46		2.00	3.00	2.50	2.57	2.39	2.49	2.49	1.78	2.48	2.42	
p stat_(*=Sig @ p<=.05)		.602	~	~	~	.575	.706	.991	~	~	~	~	~	.278	.436	~	~	.514	.513	
COMPOSITE	2.37	2.32	x	2.52	2.44	2.25	2.41	2.39	x	2.00	x	3.00	1.75	2.28	2.51	2.31	2.42	1.76	2.38	2.34
p stat_(*=Sig @ p<=.05)		.468	~	~	~	.196	.668	.690	~	~	~	~	~	.104	.288	~	~	.800	.814	

GETTING CARE QUICKLY

		AGE					RACE					ETHNICITY	HEALTH STATUS	CCC SCREENER					
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
NCARSN4 NQ4	2.67	2.60	2.48	2.80	2.71	2.68	2.71	1.00	3.00	2.50	2.89	2.57	2.73	2.64	3.00	2.58	2.84		
p stat_(*=Sig @ p<=.05)	.286	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NAPGET4 NQ6	2.46	2.43	3.00	2.50	2.47	2.50	2.36	2.42	3.00	3.00	2.43	2.61	2.33	2.55	2.48	2.00	2.45	2.47	
p stat_(*=Sig @ p<=.05)	.607	~	~	~	.579	~	.415	~	~	~	~	~	.061	.071	~	~	.861	.861	
COMPOSITE	2.56	2.51	3.00	2.49	2.64	2.61	2.52	2.57	x 2.00	x 3.00	2.46	2.75	2.45	2.64	2.56	2.50	2.51	2.65	
p stat_(*=Sig @ p<=.05)	.578	~	~	~	.756	.733	.960	~	~	~	~	~	.297	.324	~	~	.414	.558	



HOW WELL DOCTORS COMMUNICATE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
NDREXPL4 NQ32	2.83	2.69	2.83	2.77	2.82	2.88	2.85	2.50	3.00	3.00	2.86	2.82	2.83	2.83	2.80	2.83	2.80	2.85	2.78
p stat_(*=Sig @ p<=.05)		.000*	~	~	~.937	.283	.385	~	~	~	~	~	.810	.940	~	~	~	.307	.305
NDRLSTN4 NQ33	2.82	2.71	2.87	2.72	2.86	2.84	2.85	3.00	3.00	3.00	2.73	2.82	2.82	2.82	2.60	2.82	2.60	2.85	2.76
p stat_(*=Sig @ p<=.05)		.002*	~	~	~.442	.713	.261	~	~	~	~	~	.929	.868	~	~	~	.203	.203
NDRESPU4 NQ34	2.83	2.77	2.83	2.77	2.84	2.88	2.86	2.50	3.00	3.00	2.82	2.82	2.83	2.83	2.80	2.83	2.80	2.87	2.76
p stat_(*=Sig @ p<=.05)		.049*	~	~	~.875	.272	.128	~	~	~	~	~	.706	.915	~	~	~	.121	.119
NDRTMEN4 NQ37	2.61	2.49	2.57	2.56	2.66	2.62	2.64	2.50	3.00	2.40	2.68	2.43	2.69	2.69	2.60	2.60	2.60	2.63	2.55
p stat_(*=Sig @ p<=.05)		.018*	~	~	~.468	.864	.387	~	~	~	~	~	.015*	.028*	~	~	~	.417	.416
COMPOSITE	2.77	2.67	x 2.78	2.70	2.80	2.80	2.80	x 2.63	x 3.00	2.85	2.77	2.72	2.79	2.79	2.70	2.77	2.70	2.80	2.71
p stat_(*=Sig @ p<=.05)		.416	~	~	~.903	.869	.759	~	~	~	~	~	.770	.843	~	~	~	.732	.735

CUSTOMER SERVICE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC
NPBCLCS4 NQ50	2.39	2.24	2.82	2.10	2.39	2.45	2.42			3.00	2.33	2.75	2.38	2.43	2.41	2.33	2.43	2.30
p stat_(*=Sig @ p<=.05)	.098		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ51	2.66	2.57	2.73	2.65	2.61	2.68	2.58			3.00	3.00	3.00	2.59	2.70	2.68	2.50	2.67	2.65
p stat_(*=Sig @ p<=.05)	.252		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.53	2.41	x 2.77	2.38	2.50	2.57	2.50	x	x	x 3.00	2.67	2.88	2.48	2.57	2.55	2.42	2.55	2.48
p stat_(*=Sig @ p<=.05)	.460		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

		AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
NNRXWHY NQ11	2.88	2.88	2.89	2.85	3.00	2.81	2.96			3.00	3.00	2.71	2.88	2.92	2.93	2.50	2.89	2.88
p stat_(*=Sig @ p<=.05)		.875	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NNRXWYNT NQ12	2.24	2.40	1.89	2.38	2.29	2.40	2.36			3.00	3.00	1.57	1.88	2.37	2.27	2.00	2.18	2.29
p stat_(*=Sig @ p<=.05)		.157	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NRXBST NQ13	2.52	2.55	2.37	2.54	2.56	2.62	2.51			3.00	3.00	2.71	2.44	2.55	2.52	2.60	2.39	2.66
p stat_(*=Sig @ p<=.05)		.776	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.55	2.61	x 2.38	2.59	2.62	2.61	2.61	x	x	x 3.00	3.00	2.33	2.40	2.61	2.57	2.37	2.48	2.61
p stat_(*=Sig @ p<=.05)		.782	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

ACCESS TO SPECIALIZED SERVICES

	AGE							RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
NEZMDEQ NQ20	2.22	2.15	2.80	1.80	2.00	2.20	2.31					2.00		2.50	2.18	2.25	3.00	2.38	2.10	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NEZTHP NQ23	2.40	1.94	3.00	2.00	2.40	2.40	2.50	2.60			1.00	2.00	1.00	2.50	2.27	2.44	1.50	2.33	2.45	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NEZTC NQ26	2.30	2.08	3.00	2.00	2.40	2.00	2.46	2.29				2.33	2.33	2.09	2.53	2.42	2.00	2.30	2.30	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.31	2.06	3.00	2.27	2.20	2.13	2.39	2.40	x	x	x	1.00	2.11	1.67	2.36	2.33	2.37	2.17	2.34	2.28
p stat_(*=Sig @ p<=.05)		.040*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-AMER	AS-IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
PRBSEE4 Q46	77%	75%		86%	75%	71%	80%	79%				100%	0%	50%	100%	69%	82%	50%	78%	77%
CARNES4 Q15	90%	88%		86%	87%	95%	91%	88%		50%		100%	88%	100%	90%	90%	92%	56%	89%	93%
AVERAGE	83.93	81.22	x	86.10	80.83	83.21	85.45	83.89	x	50.00	x	100.0	87.50	75.00	94.93	79.48	87.01	52.78	83.41	85.30

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-AMER	AS-IAN	NATV HAW/PAC ILND	AMER IND/ALSK NATV	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
CARSN4 Q4	90%	90%		84%	92%	96%	88%	93%		0%		100%	75%	100%	89%	92%	90%	100%	86%	97%
APGET4 Q6	88%	84%	100%	88%	85%	93%	84%	88%		100%		100%	86%	94%	81%	94%	89%	70%	86%	92%
AVERAGE	89.19	87.16	x	86.12	88.65	94.51	86.22	90.24	x	x	x	100.0	80.36	97.22	84.58	92.81	89.30	85.00	86.23	94.88

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
DREXPL4 Q32	98%	93%	100%	95%	98%	98%	97%	100%	100%	100%	100%	100%	98%	97%	98%	100%	98%	97%
DRLSTN4 Q33	97%	94%	100%	93%	98%	98%	97%	100%	100%	100%	100%	95%	98%	96%	98%	80%	97%	97%
DRESPU4 Q34	99%	95%	100%	98%	98%	100%	98%	100%	100%	100%	100%	100%	100%	98%	99%	100%	99%	98%
DRTMEN4 Q37	92%	86%	87%	93%	94%	92%	92%	100%	100%	80%	91%	87%	94%	91%	100%	91%	93%	
AVERAGE	96.4	92.0	x 96.7	94.8	97.0	97.0	96.2	x 100	x 100	95.0	96.6	95.8	96.6	96.3	95.0	96.5	96.1	

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-AMER	AS-IAN	NATV HAW/PAC ILND	AMER IND/ALSK NATV	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
PBCLCS4 Q50	87%	77%	100%	75%	89%	91%	91%					100%	83%	100%	88%	89%	89%	83%	88%	85%
CSRESP Q51	94%	91%	100%	90%	94%	95%	93%					100%	100%	100%	94%	95%	94%	100%	92%	100%
AVERAGE	90.85	83.89	x 100.0	82.50	91.67	93.18	92.22	x	x	x	x	91.67	100.0	90.63	91.89	91.27	91.67	90.20	92.50	



SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NRXWHY Q11	94%	94%	94%	92%	100%	90%	98%			100%	100%	86%	94%	96%	97%	75%	94%	94%		
NRXWYNT Q12	62%	70%	44%	69%	65%	70%	68%			100%	100%	29%	44%	69%	63%	50%	59%	65%		
RXBST Q13	76%	78%	68%	77%	78%	81%	76%			100%	100%	86%	72%	78%	76%	80%	69%	83%		
AVERAGE	77.3	80.5	x	69.1	79.5	80.8	80.5	80.5	x	x	x	x	100	66.7	69.9	80.7	78.6	68.3	74.2	80.6

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
EZMDEQ Q20	72%	70%	100%	60%	67%	60%	77%					50%		83%	73%	75%	100%	75%	70%	
EZTHP Q23	85%	61%	100%	67%	80%	100%	83%	90%			0%	100%	0%	100%	73%	87%	50%	78%	91%	
EZTC Q26	73%	67%	100%	50%	80%	71%	77%	71%				67%	67%	73%	76%	75%	75%	80%	70%	
AVERAGE	76.9	66.1	x	72.2	73.3	79.4	73.4	79.2	x	x	x	x	58.3	66.7	85.4	74.0	79.2	62.5	77.6	77.0

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
DRTLKU Q38	82%	84%	93%	86%	86%	67%	84%	50%	100%	100%	82%	78%	84%	82%	80%	80%	86%	
DRUNCON Q43	89%	89%	100%	91%	89%	86%	90%		100%	67%	100%	88%	90%	90%	80%	80%	91%	
DRUNFAM Q44	87%	84%	80%	91%	89%	86%	85%		100%	67%	100%	88%	87%	90%	60%	80%	89%	
AVERAGE	86.2	85.5	x 91.1	89.3	87.9	79.8	86.5	x 50.0	x 100	77.8	93.9	84.6	87.1	87.4	73.3	80.0	88.7	

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
HELPCONT Q18	95%	94%	80%	100%	100%	100%	92%					100%	100%	90%	100%	95%	100%	91%	100%	
HLPCOORD Q29	66%	60%	64%	57%	77%	67%	72%				0%	0%	75%	65%	69%	64%	83%	67%	65%	
AVERAGE	80.8	76.8	x	71.8	78.6	88.5	83.3	82.3	x	x	x	x	50.0	87.5	77.4	84.3	79.7	91.7	78.8	82.6

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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]

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3. YOUR PERSONAL DOCTOR

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

4. GETTING HEALTH CARE FROM SPECIALISTS

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

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5. YOUR HEALTH PLAN

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

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

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

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

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

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

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

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

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

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

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

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

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5. ADDITIONAL QUESTIONS

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

5. ACCESS TO DENTAL CARE

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



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

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

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

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

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

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

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8. RATINGS

90 NQ13 RATING OF ALL HEALTH CARE [ASKED IF Q7 >= 1 TIME]  
91 NQ23 RATING OF PERSONAL DOCTOR [ASKED IF Q15 = YES]  
92 NQ27 RATING OF SPECIALIST SEEN MOST OFTEN [ASKED IF Q24 = YES AND Q26 >= 1 SPECIALIST]  
93 NQ35 RATING OF HEALTH PLAN

9. COMPOSITES

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

### 3. SPECIALIZED SERVICES

- 18 Q19 SPECIAL MEDICAL EQUIPMENT OR DEVICES INCLUDE A WALKER, WHEELCHAIR, NEBULIZER, FEEDING TUBES, OR OXYGEN EQUIPMENT. IN THE LAST 6 MONTHS, DID YOU GET OR TRY TO GET ANY SPECIAL MEDICAL EQUIPMENT OR DEVICES FOR YOUR CHILD?
- 19 Q20 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET SPECIAL MEDICAL EQUIPMENT OR DEVICES FOR YOUR CHILD? [ASKED IF Q19 = YES]
- 20 Q21 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE, OR CLINIC HELP YOU GET SPECIAL MEDICAL EQUIPMENT OR DEVICES FOR YOUR CHILD? [ASKED IF Q19 = YES]
- 21 Q22 IN THE LAST 6 MONTHS, DID YOU GET OR TRY TO GET SPECIAL THERAPY SUCH AS PHYSICAL, OCCUPATIONAL, OR SPEECH THERAPY FOR YOUR CHILD?
- 22 Q23 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THIS THERAPY FOR YOUR CHILD? [ASKED IF Q22 = YES]
- 23 Q24 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE OR CLINIC HELP YOU GET THIS THERAPY FOR YOUR CHILD? [ASKED IF Q22 = YES]
- 24 Q25 IN THE LAST 6 MONTHS, DID YOU GET OR TRY TO GET TREATMENT OR COUNSELING FOR YOUR CHILD FOR AN EMOTIONAL, DEVELOPMENTAL, OR BEHAVIORAL PROBLEM?
- 25 Q26 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THIS TREATMENT OR COUNSELING FOR YOUR CHILD? [ASKED IF Q25 = YES]
- 26 Q27 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE OR CLINIC HELP YOU GET THIS TREATMENT OR COUNSELING FOR YOUR CHILD? [ASKED IF Q25 = YES]
- 27 Q28 IN THE LAST 6 MONTHS, DID YOUR CHILD GET CARE FROM MORE THAN ONE KIND OF HEALTH CARE PROVIDER OR USE MORE THAN ONE KIND OF HEALTH CARE SERVICE?
- 28 Q29 IN THE LAST 6 MONTHS, DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE, OR CLINIC HELP COORDINATE YOUR CHILD'S CARE AMONG THESE DIFFERENT PROVIDERS OR SERVICES? [ASKED IF Q28 = YES]

PAGE QUESTION TITLE

### 4. YOUR CHILD'S PERSONAL DOCTOR

- 29 Q30 A PERSONAL DOCTOR IS THE ONE YOUR CHILD WOULD SEE IF HE OR SHE NEEDS A CHECKUP, HAS A HEALTH PROBLEM, OR GETS SICK OR HURT. DOES YOUR CHILD HAVE A PERSONAL DOCTOR?
- 30 Q31 IN THE LAST 6 MONTHS, HOW MANY TIMES DID YOUR CHILD VISIT HIS OR HER PERSONAL DOCTOR FOR CARE? [ASKED IF Q30 = YES]
- 31 Q31A IN THE LAST 6 MONTHS, HOW OFTEN DID YOU HAVE A HARD TIME SPEAKING WITH OR UNDERSTANDING YOUR CHILD'S PERSONAL DOCTOR BECAUSE YOU SPOKE DIFFERENT LANGUAGES? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]

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

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

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

5. GETTING HEALTH CARE FROM SPECIALISTS

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

46 Q46 IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT FOR YOUR CHILD TO SEE A SPECIALIST AS SOON AS YOU NEEDED? [ASKED IF Q45 = YES]

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

48 Q48 WE WANT TO KNOW YOUR RATING OF THE SPECIALIST YOUR CHILD SAW MOST OFTEN IN THE LAST 6 MONTHS. USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST SPECIALIST POSSIBLE AND 10 IS THE BEST SPECIALIST POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE THAT SPECIALIST? [ASKED IF Q45 = YES AND Q47 >= 1 SPECIALIST]

6. YOUR CHILD'S HEALTH PLAN

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

50 Q50 IN THE LAST 6 MONTHS, HOW OFTEN DID CUSTOMER SERVICE AT YOUR CHILD'S HEALTH PLAN GIVE YOU THE INFORMATION OR HELP YOU NEEDED? [ASKED IF Q49 = YES]

51 Q51 IN THE LAST 6 MONTHS, HOW OFTEN DID CUSTOMER SERVICE STAFF AT YOUR CHILD'S HEALTH PLAN TREAT YOU WITH COURTESY AND RESPECT? [ASKED IF Q49 = YES]

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

53 PQ53 IN THE LAST 6 MONTHS, HOW OFTEN WERE THE FORMS FROM YOUR CHILD'S HEALTH PLAN EASY TO FILL OUT? [ASKED IF Q52 = YES. RESPONSE OF 'ALWAYS' PADDED WITH Q52 = NO]

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

PAGE QUESTION TITLE

7. PRESCRIPTION MEDICINES

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

56 Q56 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET PRESCRIPTION MEDICINES FOR YOUR CHILD THROUGH HIS OR HER HEALTH PLAN? [ASKED IF Q55 = YES]

57 Q57 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE, OR CLINIC HELP YOU GET YOUR CHILD'S PRESCRIPTION MEDICINES? [ASKED IF Q55 = YES]

7. ACCESS TO DENTAL CARE

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

59 Q57B IN THE LAST 6 MONTHS, IF YOUR CHILD NEEDED TO SEE A DENTIST RIGHT AWAY BECAUSE OF A DENTAL EMERGENCY, DID HE/SHE GET TO SEE A DENTIST AS SOON AS YOU WANTED?

7. ADDITIONAL QUESTIONS

60 Q57C CHOICES FOR YOUR CHILD'S TREATMENT OR HEALTH CARE CAN INCLUDE CHOICES ABOUT MEDICINE, SURGERY, OR OTHER TREATMENT. IN THE LAST 6 MONTHS, DID YOUR PROVIDER TELL YOU THERE WAS MORE THAN ONE CHOICE FOR YOUR CHILD'S TREATMENT OR HEALTH CARE?



- 61 Q57D IN THE LAST 6 MONTHS, DID YOUR PROVIDER TALK WITH YOU ABOUT THE PROS AND CONS OF EACH CHOICE FOR YOUR CHILD'S TREATMENT OR HEALTH CARE? [ASKED IF Q57C = YES]
- 62 Q57E IN THE LAST 6 MONTHS, WHEN THERE WAS MORE THAN ONE CHOICE FOR YOUR CHILD'S TREATMENT OR HEALTH CARE, DID YOUR PROVIDER ASK YOU WHICH CHOICE WAS BEST FOR YOUR CHILD? [ASKED IF Q57C = YES]
- 63 Q57F IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PROVIDER CONSIDER AND RESPECT WHAT HEALTH CARE AND TREATMENT CHOICES YOU THOUGHT WORK BEST FOR YOUR CHILD? [ASKED IF Q57C = YES]
- 64 Q57G IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PROVIDER ENCOURAGE YOU TO ASK QUESTIONS AND RAISE CONCERNS? [ASKED IF Q57C = YES]
- 65 Q57H IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PROVIDER MAKE IT EASY FOR YOU TO ASK QUESTIONS AND RAISE CONCERNS? [ASKED IF Q57C = YES]

8. ABOUT YOUR CHILD AND YOU

- 66 Q58 IN GENERAL, HOW WOULD YOU RATE YOUR CHILD'S OVERALL HEALTH?
- 67 Q59 IN GENERAL, HOW WOULD YOU RATE YOUR CHILD'S OVERALL MENTAL OR EMOTIONAL HEALTH?
- 68 Q60 DOES YOUR CHILD CURRENTLY NEED OR USE MEDICINE PRESCRIBED BY A DOCTOR (OTHER THAN VITAMINS)?
- 69 Q61 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q60 = YES]
- 70 Q62 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q60 = YES AND Q61 = YES]
- 71 Q63 DOES YOUR CHILD NEED OR USE MORE MEDICAL CARE, MORE MENTAL HEALTH SERVICES, OR MORE EDUCATIONAL SERVICES THAN IS USUAL FOR MOST CHILDREN OF THE SAME AGE?
- 72 Q64 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q63 = YES]
- 73 Q65 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q63 = YES AND Q64 = YES]
- 74 Q66 IS YOUR CHILD LIMITED OR PREVENTED IN ANY WAY IN HIS OR HER ABILITY TO DO THE THINGS MOST CHILDREN OF THE SAME AGE CAN DO?
- 75 Q67 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q66 = YES]
- 76 Q68 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q66 = YES AND Q67 = YES]
- 77 Q69 DOES YOUR CHILD NEED OR GET SPECIAL THERAPY, SUCH AS PHYSICAL, OCCUPATIONAL, OR SPEECH THERAPY?
- 78 Q70 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q69 = YES]
- 79 Q71 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q69 = YES AND Q70 = YES]
- 80 Q72 DOES YOUR CHILD HAVE ANY KIND OF EMOTIONAL, DEVELOPMENTAL, OR BEHAVIORAL PROBLEMS FOR WHICH HE OR SHE NEEDS OR GETS TREATMENT OR COUNSELING?
- 81 Q73 HAS THIS PROBLEM LASTED OR IS IT EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q72 = YES]
- 82 NQ74 WHAT IS YOUR CHILD'S AGE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
- 83 NQ75 IS YOUR CHILD MALE OR FEMALE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
- 84 Q76 IS YOUR CHILD OF HISPANIC OR LATINO ORIGIN OR DESCENT?

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

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

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

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

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

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

91 Q78 WHAT IS YOUR AGE?

92 Q79 ARE YOU MALE OR FEMALE?

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

94 Q81 HOW ARE YOU RELATED TO THE CHILD?

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

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

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

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

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

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

PAGE QUESTION TITLE

9. RATINGS

101 NQ14 RATING OF ALL CHILD'S HEALTH CARE [ASKED IF Q7 >= 1 TIME]

102 NQ41 RATING OF CHILD'S PERSONAL DOCTOR [ASKED IF Q30 = YES]

103 NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN [ASKED IF Q45 = YES AND Q47 >= 1 SPECIALIST]

104 NQ54 RATING OF CHILD'S HEALTH PLAN

10. COMPOSITES

105 GETTING NEEDED CARE

106 GETTING CARE QUICKLY

107 HOW WELL DOCTORS COMMUNICATE

108 CUSTOMER SERVICE

109 SHARED DECISION MAKING  
110 ACCESS TO SPECIALIZED SERVICES

11. GLOBAL PROPORTION COMPOSITES

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

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

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

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

**SURVEY INSTRUCTIONS**

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

Correct  
Mark 

Incorrect  
Marks   

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

- Yes → *Go to Question 1*
- No

↓ **START HERE** ↓

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

- Yes → *Go to Question 3*
- No

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

\_\_\_\_\_

## YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

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

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

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

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

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

- Never  
 Sometimes  
 Usually  
 Always

### YOUR PERSONAL DOCTOR

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

- Yes  
 No → *Go to Question 24*

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

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

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

- Never  
 Sometimes  
 Usually  
 Always

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

- Never  
 Sometimes  
 Usually  
 Always

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

- Never  
 Sometimes  
 Usually  
 Always

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

- Never  
 Sometimes  
 Usually  
 Always

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

- Yes  
 No → *Go to Question 23*

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

- Never  
 Sometimes  
 Usually  
 Always

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

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



## GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

- Yes  
 No → *Go to Question 28*

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

- Never  
 Sometimes  
 Usually  
 Always

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

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

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

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

## YOUR HEALTH PLAN

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

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

- Yes  
 No → *Go to Question 30*

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

- Never  
 Sometimes  
 Usually  
 Always

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

- Yes  
 No → *Go to Question 33*

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

- Never  
 Sometimes  
 Usually  
 Always

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

- Never  
 Sometimes  
 Usually  
 Always

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

- Yes  
 No → *Go to Question 35*

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

- Never
- Sometimes
- Usually
- Always

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

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

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

- Yes
- No → **Go to Question 35c**

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → **Go to Question 35e**

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

- Never
- Sometimes
- Usually
- Always

## ADDITIONAL QUESTIONS

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

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

- Yes
- No → **Go to Question 35i**

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

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

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

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

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

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

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

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

- Yes
- No → **Go to Question 35l**





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

- Yes
- No

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

- Yes
- No

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

- Never
- Sometimes
- Usually
- Always

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes, definitely
- Yes, somewhat
- No

### ACCESS TO DENTAL CARE

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

- Yes
- No

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

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

### ABOUT YOU

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

- Excellent
- Very Good
- Good
- Fair
- Poor



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

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

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

- Yes
- No → **Go to Question 50**

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

- Yes
- No

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

- Yes
- No → **Go to Question 52**

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

- Yes
- No

52. What is your age?

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

53. Are you male or female?

- Male
- Female

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

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

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

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

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

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

57. Did someone help you complete this survey?

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

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

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

**THANK YOU**

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

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

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



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

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

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

**SURVEY INSTRUCTIONS**

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

Correct  
Mark 

Incorrect  
Marks



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

- Yes ➔ *Go to Question 1*
- No

↓ **START HERE** ↓

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

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

\_\_\_\_\_

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

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

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

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



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

- Yes
- No

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

- Yes
- No

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No

**SPECIALIZED SERVICES**

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

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

- Yes
- No → *Go to Question 22*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 25*



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 28*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 30*

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

- Yes
- No

### YOUR CHILD'S PERSONAL DOCTOR

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

- Yes
- No → *Go to Question 45*

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

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

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

- Never
- Sometimes
- Usually
- Always



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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 37*

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 41*

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

- Never
- Sometimes
- Usually
- Always

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

0 1 2 3 4 5 6 7 8 9 10

Worst Personal Doctor Possible Best Personal Doctor Possible

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

- Yes
- No → *Go to Question 45*





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

- Yes
- No

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

- Yes
- No

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

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

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

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

**GETTING HEALTH CARE FROM SPECIALISTS**

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

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

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

- Yes
- No → **Go to Question 49**

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

- Never
- Sometimes
- Usually
- Always

**YOUR CHILD'S HEALTH PLAN**

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

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

- Yes
- No → **Go to Question 52**

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

- Never
- Sometimes
- Usually
- Always



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → **Go to Question 54**

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

- Never
- Sometimes
- Usually
- Always

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

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

**PRESCRIPTION MEDICINES**

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

- Yes
- No → **Go to Question 57a**

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

**ACCESS TO DENTAL CARE**

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

- Yes
- No

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

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



## ADDITIONAL QUESTIONS

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

- Yes
- No → *Go to Question 58*

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

- Yes
- No

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

- Yes
- No

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

## ABOUT YOUR CHILD AND YOU

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Yes
- No → *Go to Question 63*

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

- Yes
- No → *Go to Question 63*

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

- Yes
- No

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

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



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

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

78. What is your age?

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

79. Are you male or female?

- Male
- Female

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

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

81. How are you related to the child?

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

82. Did someone help you complete this survey?

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

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

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

**THANK YOU**

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

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

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





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

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

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

**INSTRUCCIONES PARA EL CUESTIONARIO**

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

Marca  
Correcta ●

Marca  
Incorrecta   

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

● Sí → *Pase a la Pregunta 1*  
○ No

↓ **COMIENZE 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







## PREGUNTAS ADICIONALES

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

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

- Sí
- No → *Pase a la pregunta 35i*

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

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

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 35c*

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

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

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

- Sí
- No → *Pase a la pregunta 35e*

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

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

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

- Sí
- No → *Pase a la pregunta 35l*

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

- Sí
- No

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

- Sí
- No

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

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

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

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

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

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

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

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

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

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

- Sí, definitivamente
- Sí, algo
- No

## ACCESO A CUIDADO DENTAL

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

- Sí
- No

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

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

## ACERCA DE USTED

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Sí
- No
- No sé

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

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

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

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

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

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

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

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



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

- Sí
- No

52. ¿Qué edad tiene?

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

53. ¿Es usted hombre o mujer?

- Hombre
- Mujer

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

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

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

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

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

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

57. ¿Le ayudó alguien a completar esta encuesta?

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

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

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

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

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

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





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

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

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

**INSTRUCCIONES PARA EL CUESTIONARIO**

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

Marca  
Correcta



Marca  
Incorrecta



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

- Sí → *Pase a la Pregunta 1*
- No



**COMIENCE AQUI**



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

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

- Sí → *Pase a la pregunta 3*
- No

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

\_\_\_\_\_

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

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

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

Sí  
 No → *Pase a la pregunta 5*

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

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

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

Sí  
 No → *Pase a la pregunta 7*

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

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

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

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

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

Sí  
 No

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

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

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

- Sí
- No → *Pase a la pregunta 14*

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

- Sí
- No

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

- Sí
- No

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

- Sí
- No

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 19*

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

- Sí
- No → *Pase a la pregunta 19*

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

- Sí
- No

## SERVICIOS ESPECIALIZADOS

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

- Sí
- No → *Pase a la pregunta 22*

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

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

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 25*

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

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

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 28*

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

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

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 30*

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

- Sí
- No

### EL DOCTOR PERSONAL DE SU NIÑO

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

- Sí
- No → *Pase a la pregunta 45*

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

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

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

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

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

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

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 37*

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

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





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

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

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 41*

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 45*

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

- Sí
- No

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

- Sí
- No







## PREGUNTAS ADICIONALES

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

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

- Sí
- No → *Pase a la pregunta 58*

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

- Sí
- No

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

- Sí
- No

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

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

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

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

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

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

## ACERCA DE USTED Y DE SU NIÑO

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Sí
- No → *Pase a la pregunta 63*

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

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

74. ¿Qué edad tiene su niño?

Menos de un año

AÑOS (escriba la respuesta)

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

Masculino

Femenino

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

Sí, hispano o latino

No, ni hispano ni latino

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

Blanca

Negra o afroamericana

Asiática

Nativo de Hawái o de otras islas del Pacífico

Indígena americano o nativo de Alaska

Otra (Por favor escriba en letra de molde)

---

78. ¿Qué edad tiene usted?

Menos de 18 años

18 a 24

25 a 34

35 a 44

45 a 54

55 a 64

65 a 74

75 años o más

79. ¿Es usted hombre o mujer?

Hombre

Mujer

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

8 años de escuela o menos

9 a 12 años de escuela, pero sin graduarse

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

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

Título universitario de 4 años

Título universitario de más de 4 años

81. ¿Qué relación tiene con el niño?

Madre o padre

Abuelo o abuela

Tía o tío

Hermano o hermana mayor

Otro familiar

Tutor legal del niño

Otra persona

82. ¿Le ayudó alguien a completar esta encuesta?

Sí → **Pase a la pregunta 83**

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

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

Me leyó las preguntas

Anotó las respuestas que le di

Contestó las preguntas por mí

Tradujo las preguntas a mi idioma

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

---

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

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

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



## DIAL.SCREEN

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

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

(IWER: THIS IS NOT A PROXY INTERVIEW.)

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

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

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

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

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

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

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

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

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

RETURN TO COVERSHEET



## RE.INTRO

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

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

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

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

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

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

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

("DK" NOT ALLOWED)

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

## SEX

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

1. MALE
2. FEMALE

## SPAN.VAR

(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

1. Spanish
2. English

MEMBER

Q1. / MEMBER

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

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

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

DK/REFUSAL/NOT ASCERTAINED

NPLNAME

Q2. / NPLNAME

What is the name of your health plan?

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS Oregon Health Plan]

[(ENTER 5 IF R SAYS: MEDICAID)]

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

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

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

PLNAME

Q2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)

CK.PLMSTCR:

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

INTRO.INCARE

INTRO.INCARE

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

INCARE

Q3. / INCARE

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

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

DK/REFUSAL/NOT ASCERTAINED --> APMAKE4

CARSN4

Q4. / CARSN4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

APMAKE4

Q5. / APMAKE4

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

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

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

APGET4

Q6. / APGET4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

OFCTIM4

Q7. / OFCTIM4

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

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

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

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

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

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

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

PRVENT5

Q8. / PRVENT5

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RXSTP

9. / RXSTP

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

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

DK/REFUSAL/NOT ASCERTAINED --> RTALLCR

NRXWHY

10. / NRXWHY

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

NRXWYNT

11. / NRXWYNT

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RXBST

12. / RXBST

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RTALLCR

13. / RTALLCR

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

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

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

CARNES4

14. / CARNES4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PRSNLD4

15. / PRSNLD4

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

Do you have a personal doctor?

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

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

DRTMS

16. / DRTMS

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

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

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

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

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

DREXPL4

17. / DREXPL4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRLSTN4

18. / DRLSTN4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRESPU4

19. / DRESPU4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTMEN4

20. / DRTMEN4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DIFFDR

21. / DIFFDR

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

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

DK/REFUSAL/NOT ASCERTAINED --> RATEDR4

DRINFO

22. / DRINFO

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)



RATEDR4

23. / RATEDR4

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

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

INTRO.SPDR

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

NDSPDR4

24. / NDSPDR4

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

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

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

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

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

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

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

PRBSEE4

25. / PRBSEE4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

SPDRS

26. / SPDRS

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

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

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

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

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

RTSPDR4

27. / RTSPDR4

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

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

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

00            01 02 03 04 05 06 07 08 09    10

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN

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

LOOMAT4

28. / LOOMAT4

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

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

DK/REFUSAL/NOT ASCERTAINED --> CLCSRV4

UNDINF4

29. / UNDINF4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CLCSRV4

30. / CLCSRV4

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

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

DK/REFUSAL/NOT ASCERTAINED --> PLPRWK4

PBCLCS4

31. / PBCLCS4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CSRESP

32. / CSRESP

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLPRWK4

33. / PLPRWK4

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

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

DK/REFUSAL/NOT ASCERTAINED --> RTPLEXP

PBPLPW4

34. / PBPLPW4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTPLEXP

35. / RTPLEXP

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

00            01 02 03 04 05 06 07 08 09    10

DK/REFUSAL/NOT ASCERTAINED

HPMDEQ

35a. / HPMDEQ

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

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

EZMDHP

35b. / EZMDHP

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

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

POSTHP

35c. / POSTHP

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

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

EZPOST

35d. / EZPOST

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

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

INTRO.SHLTHIS

INTRO.SHLTHIS

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

SHLTHIS

35e. / SHLTHIS

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

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

DK/REFUSAL/NOT ASCERTAINED --> CHTREAT

EUNDER

35f. / EUNDER

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

ELISTEN

35g. / ELISTEN

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

(READ LIST IF NECESSARY)

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

DK/REFUSAL/NOT ASCERTAINED

EINCLUD

35h. / EINCLUD

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

(READ LIST IF NECESSARY)

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

DK/REFUSAL/NOT ASCERTAINED

## CHTREAT

35i. / CHTREAT

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

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

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

DK/REFUSAL/NOT ASCERTAINED --> RESPCHT

## PCTREAT

35j. / PCTREAT

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

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

## BSTREAT

35k. / BSTREAT

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

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

## EASYQC

35l. / EASYQC

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DTLKTF

35m. / DTLKTF

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DINTER

35n. / DINTER

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

(READ LIST IF NECESSARY)

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

DK/REFUSAL/NOT ASCERTAINED

DRRUDE

35o. / DRRUDE

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

(READ LIST IF NECESSARY)

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

DK/REFUSAL/NOT ASCERTAINED

TRUSTDR

35p. / TRUSTDR

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED



REGDENT

35q. / REGDENT

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

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

DNTASAP

35r.

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

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

DK/REFUSAL/NOT ASCERTAINED

HLTSTA4

36. / HLTSTA4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

MNTLSTAT

37. / MNTLSTAT

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

FLUSHOTQ

38. / FLUSHOTQ

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

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

NOWSMOK

39. / NOWSMOK

Do you now smoke cigarettes or use tobacco...

(READ LIST)

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

ADVQUIT9

40. / ADVQUIT9

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PATCH9

41. / PATCH9

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

WILLPWR9

42. / WILLPWR9

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPDAY

43. / ASPDAY

Do you take aspirin daily or every other day?

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

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

Aspirin: Bayer and Bufferin

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

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

ASPUSF

44. / ASPUSF

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

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

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

9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPPRV

45. / ASPPRV

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.AWCOND  
INTRO.AWCOND

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

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

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

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

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.DRCOND  
INTRO.DRCOND

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

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

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

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

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

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

SMPROB

48. / SMPROB

I have just a few more questions.

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

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

DK/REFUSAL/NOT ASCERTAINED --> TKMED

PRBLST

49. / PRBLST

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

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

TKMED

50. / TKMED

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

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

DK/REFUSAL\NOT ASCERTAINED --> QAGE4

TRTCOND

51. / TRTCOND

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

## QAGE4

52. / QAGE4

What is your age?

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

(READ LIST IF NEEDED, "Are you...")

1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## QGENDER

53. / QGENDER

(IWER: RECORD RESPONDENT'S SEX, 'DK' NOT ALLOWED)

(ASK IF NECESSARY, "Are you male or female?")

1. MALE
2. FEMALE

## EDUCAT

54. / EDUCAT

What is the highest grade or level of school that you have COMPLETED?  
Did you complete...

(IWER: IF R SAYS HE/SHE HAD NON-ACADEMIC TRAINING, SUCH AS TRADE SCHOOL, PROBE: "Did you receive a high school diploma or GED?")

(IWER: ACADEMIC TRAINING BEYOND A HIGH SCHOOL DIPLOMA THAT DOES NOT LEAD TO A BACHELORS DEGREE, SHOULD BE CODED "4". IF R WENT TO BUSINESS SCHOOL OR GOT A 3-YEAR NURSING DEGREE, ENTER "4")

(IWER: IF R OFFERS MORE THAN ONE RESPONSE, FOR EXAMPLE: "SOME HIGH SCHOOL OR GED", ENTER THE HIGHEST NUMBER THAT APPLIES.)

(READ LIST)

1. 8TH GRADE OR LESS,
2. SOME HIGH SCHOOL, BUT DID NOT GRADUATE,
3. HIGH SCHOOL GRADUATE OR GED,
4. SOME COLLEGE OR 2-YEAR DEGREE,
5. 4-YEAR COLLEGE GRADUATE, OR
6. MORE THAN A 4-YEAR COLLEGE DEGREE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

LATINO

55. / LATINO

Are you of Hispanic or Latino origin or descent?

1. YES / HISPANIC OR LATINO
2. NO / NOT HISPANIC OR LATINO

DK/REFUSAL/NOT ASCERTAINED

INTRO.RACE

INTRO.RACE

I am going to read a list of race categories. For each category, please say YES or NO if it describes your race. I must ask you about all categories in case more than one applies.

PQRACE3.(1-6)

56.(1-6) / PQRACE3.(1-6)

[(Are you)]

1. "White"
2. "Black or African-American"
3. "Asian"
4. "Native Hawaiian or other Pacific Islander"
5. "American Indian or Alaska Native"
6. "Some other race"

(IWER: IF R REPLIES "WHY ARE YOU ASKING ABOUT MY RACE?" SAY  
"We ask about your race for demographic purposes only.  
We want to be sure that the people we survey accurately represent the  
racial diversity of managed care enrollees in this country.")

(IWER: If R answers with a category not listed here, such as "HISPANIC"  
or "AMERICAN" or "MIXED RACE", probe using the category "OTHER".)

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

ALL.DONE

THANKS.SCREEN.

Those are all the questions I have.

Thank you for taking part in this important interview.

Have a nice (day/evening). Good bye.

RETURN TO COVERSHEET

## DIAL.SCREEN

DS. INTERVIEWER: YOU MAY DO THE INTERVIEW WITH ONLY THE PARENT OR GUARDIAN WHO KNOWS MOST ABOUT FNAME LNAME'S HEALTH CARE.  
PHONE NUMBER ---> [1 CELL PHONE - HAND DIAL ([AREA\$]) [FRST3\$] - [LAST4\$] /\*\*\* \*\*\*-\*\*\*\*]

(IWER: THIS IS A PROXY INTERVIEW.)

Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may be monitored and recorded for quality control. May I please speak with the person who knows the most about [NAME OF CHILD]'s health care?

(IF NEEDED: "We are conducting an important study to find out how satisfied families are with Oregon Health Plan. The results of the study will help Oregon Health Plan improve the care they provide and will also help consumers when they choose health care plans.")

(IF NEEDED: "The interview is completely confidential and voluntary, and will not affect your child's health care or benefits in any way.")

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

01. CONTINUE
02. ALREADY COMPLETED AND MAILED SURVEY BACK
03. NEW PHONE NUMBER
04. REFUSAL
05. APPOINTMENT
06. NEVER HEARD OF R
07. KNOWS R BUT HAS NO NEW NUMBER FOR R
08. RNA, ANS MACH, RETURN TO COVERSHEET
09. LANGUAGE PROBLEM -- SPEAKS SPANISH
10. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH

IF DIAL.SCREEN = 01, GO TO RE.INTRO

IF DIAL.SCREEN = 02, GO TO MAIL.SCREEN

IF DIAL.SCREEN = 03, ENTER NEW NUMBER ON COVERSHEET AND RE-DIAL

RETURN TO COVERSHEET



## MAIL.SCREEN

MS. INTERVIEWER: WE STILL NEED TO CONDUCT A TELEPHONE INTERVIEW EVEN  
THOUGH R SAYS THEY'VE SENT BACK THE MAIL SURVEY.

I'm sorry, but we haven't received your survey back -- it may have been lost in the mail. And since the deadline for mailing surveys has passed, we're now in the telephone phase of this study. May I continue?

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

1. CONTINUE
2. REFUSAL BECAUSE ALREADY COMPLETED AND MAILED SURVEY BACK
3. REFUSAL
4. APPOINTMENT

IF MAIL.SCREEN = 1, GO TO RE.INTRO  
RETURN TO COVERSHEET

## RE.INTRO

RE.INTRO. (INTERVIEWER: READ PARENS TEXT IF R ISN'T PERSON WHO ANSWERED  
PHONE OR HAS NOT HEARD IT YET.)

(Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may be monitored and recorded for quality control.)

We are conducting an important study to find out how satisfied families are with Oregon Health Plan. The results of the study will help Oregon Health Plan improve the care they provide and will also help consumers when they choose health care plans.

The interview is completely confidential and voluntary, and will not affect your child's health care or benefits in any way.

(IF R ASKS: "How long will this take?", EXPLAIN: "The questions should take about 12-15 minutes to answer.")

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

("DK" NOT ALLOWED)

1. CONTINUE
2. APPOINTMENT
3. REFUSAL
4. LANGUAGE PROBLEM -- SPEAKS SPANISH
5. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH
6. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)
7. RETURN TO CS

## SEX

SEX. (IWER: RECORD RESPONDENT'S SEX, 'DK' NOT ALLOWED)

1. MALE
2. FEMALE

## SPAN.VAR

(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

1. Spanish
2. English

## MEMBER

Q1. / MEMBER

I will be asking you about [NAME OF CHILD]'s health care. Please answer these questions based on the experiences you have had in getting health care for [NAME OF CHILD], and not on any experiences you may have had getting care for yourself or other members of your family.

Our records show that your child is now in Oregon Health Plan. Is that right?

(IWER: IF R SAYS "LEFT PLAN" OR "SWITCHED PLANS" OR "NO LONGER INSURED" ENTER "2". IF R IS NOT SURE IF HE/SHE IS PART OF Oregon Health Plan, ENTER "2".)

1. YES --> CK.PLMSTCR
2. NO

DK/REFUSAL/NOT ASCERTAINED

## NPLNAME

Q2. / NPLNAME

What is the name of your child's health plan?

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS Oregon Health Plan]

[(ENTER 5 IF R SAYS: MEDICAID)]

(IF R SAYS SOMETHING CLOSE TO Oregon Health Plan, ENTER "2")

(IF R NOT SURE OF PLAN NAME, ENTER "2")

1. EXACT MATCH -----> CK.PLMSTCR
2. POSSIBLE MATCH -----> PLNAME
3. NOT A MATCH -----> PLNAME
4. CHILD NO LONGER INSURED -----> NO.INSUR
5. CHILD INSURED BY MEDICAID BUT DOESN'T -----> CK.PLMSTCR  
KNOW PLAN NAME
6. CHILD INSURED BUT NOT BY MEDICAID -----> NO.INSUR

PLNAME

Q2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)

CK.PLMSTCR:

-----

IF NPLNAME = NOT A MATCH (3), GO TO END.SCREEN

INTRO.INCARE

INTRO.INCARE

Now I'm going to ask you some questions about your child's health care. When you answer these questions, please do NOT include dental visits or care your child got when [he/she] stayed overnight in a hospital.

INCARE

Q3. / INCARE

In the last 6 months, did your child have an illness, injury, or condition that NEEDED CARE RIGHT AWAY in a clinic, emergency room, or doctor's office?

1. YES
2. NO -----> APMAKE4

DK/REFUSAL/NOT ASCERTAINED --&gt; APMAKE4

CARSN4

Q4. / CARSN4

In the last 6 months, when your child NEEDED CARE RIGHT AWAY, how often did your child get care as soon as [he/she] needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

APMAKE4

Q5. / APMAKE4

In the last 6 months, did you make any appointments for a CHECK-UP  
OR ROUTINE CARE for your child at a doctor's office or clinic?

1. YES
2. NO -----> OFCTIM4

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

APGET4

Q6. / APGET4

In the last 6 months, when you made an appointment for a CHECK-UP  
OR ROUTINE CARE for your child at a doctor's office or clinic, how  
often did you get an appointment as soon as your child needed? Would  
you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

OFCTIM4

Q7. / OFCTIM4

In the last 6 months, NOT counting the times your child went  
to an emergency room, how many times did [he/she] go to a  
doctor's office or clinic to get health care?

(IWER: IF NECESSARY: "Your best estimate would be fine.")

(IWER: IF NEEDED CLARIFY: "Please don't include dental care your  
child received.")

(IWER: IF NEEDED CLARIFY, "Please include ALL doctor visits including  
those for routine, regular care and for an illness or injury.")

(READ LIST IF NEEDED: "Would you say...")

0. NONE,
1. 1 TIME,
2. 2,
3. 3,
4. 4,
5. 5 TO 9, OR
6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

IF OFCTIM4=0 OR DK/REFUSAL THEN GO TO CHSCHL

## PRVENT5

Q8. / PRVENT5

In the last 6 months, did you and your child's doctor or other health provider talk about specific things you could do to prevent illness in your child?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## OFTQUES

9. / OFTQUES

In the last 6 months, how often did you have your questions answered by your child's doctor or other health providers? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## RXSTP

10. / RXSTP

In the last 6 months, did you and your child's doctor or other health provider talk about starting or stopping a prescription medicine for your child?

1. YES
2. NO -----> RTALLCR

DK/REFUSAL/NOT ASCERTAINED --&gt; RTALLCR

## NRXWHY

11. / NRXWHY

Did you and a doctor or other health provider talk about the reasons you might want your child to take a medicine?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

NRXWYNT

12. / NRXWYNT

Did you and a doctor or other health provider talk about the reasons you might NOT want your child to take a medicine?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

RXBST

13. / RXBST

When you talked about your child starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for your child?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

RTALLCR

14. / RTALLCR

Using ANY NUMBER FROM 0 TO 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your child's health care in the last 6 months?

(IF NEEDED: "Please do not include any dental care your child may have received.")

00            01 02 03 04 05 06 07 08 09    10

DK/REFUSAL/NOT ASCERTAINED

CARNES4

15. / CARNES4

In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## CHSCHL

16. / CHSCHL

Is your child now enrolled in any kind of school or daycare?

1. YES
2. NO -----> MEDEQUIP

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

## CONTSCHL

17. / CONTSCHL

In the last 6 months, did you need your child's doctors or other health providers to contact a school or daycare center about your child's health or health care?

1. YES
2. NO -----> MEDEQUIP

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

## HELPCONT

18. / HELPCONT

In the last 6 months, did you get the help you needed from your child's doctors or other health providers in contacting your child's school or daycare?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## MEDEQUIP

19. / MEDEQUIP

Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment. In the last 6 months, did you get or try to get any special medical equipment or devices for your child?

1. YES
2. NO -----> SPCTHY

DK/REFUSAL/NOT ASCERTAINED --> SPCTHY

## EZMDEQ

20. / EZMDEQ

In the last 6 months, how often was it easy to get special medical equipment or devices for your child? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## HELPMDEQ

21. / HELPMDEQ

Did anyone from your child's health plan, doctor's office, or clinic help you get special medical equipment or devices for your child?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## SPCTHY

22. / SPCTHY

In the last 6 months, did you get or try to get special therapy such as physical, occupational, or speech therapy for your child?

1. YES
2. NO -----> TCPBLM

DK/REFUSAL/NOT ASCERTAINED --&gt; TCPBLM

## EZTHP

23. / EZTHP

In the last 6 months, how often was it easy to get this therapy for your child? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## HELPTHP

24. / HELPTHP

Did anyone from your child's health plan, doctor's office, or clinic help you get this therapy for your child?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## TCPBLM

25. / TCPBLM

In the last 6 months, did you get or try to get treatment or counseling for your child for an emotional, developmental, or behavioral problem?

1. YES
2. NO -----> PLUSCARE

DK/REFUSAL/NOT ASCERTAINED --&gt; PLUSCARE



EZTC

26. / EZTC

In the last 6 months, how often was it easy to get this treatment or counseling for your child? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTC

27. / HELPTC

Did anyone from your child's health plan, doctor's office, or clinic help you get this treatment or counseling for your child?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

PLUSCARE

28. / PLUSCARE

In the last 6 months, did your child get care from more than one kind of health care provider or use more than one kind of health care service?

1. YES
2. NO -----> PRSNLD4

DK/REFUSAL/NOT ASCERTAINED --&gt; PRSNLD4

HLPCOORD

29. / HLPCOORD

In the last 6 months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these different providers or services?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

PRSNLD4

30. / PRSNLD4

A personal doctor is the one your child would see if [he/she] needs a check-up, has a health problem or gets sick or hurt.

Does your child have a personal doctor?

1. YES
2. NO -----> INTRO.SPDR

DK/REFUSAL/NOT ASCERTAINED --&gt; INTRO.SPDR

DRTMS

31. / DRTMS

In the last 6 months, how many times did your child visit  
[his/her] personal doctor for care?

(IF NEEDED: "Your best estimate would be fine.")

(READ LIST IF NEEDED: "Would you say...")

- 0. NONE, -----> RATEDR4
- 1. 1 TIME,
- 2. 2,
- 3. 3,
- 4. 4,
- 5. 5 TO 9, OR
- 6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> RATEDR4

PBDRNG

31a. / PBDRNG

In the last 6 months, how often did you have a hard time speaking with  
or understanding your child's personal doctor because you spoke different  
languages? Would you say...?

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DREXPL4

32. / DREXPL4

In the last 6 months, how often did your child's personal  
doctor explain things about your child's health in a way that was  
easy to understand? Would you say...?

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRLSTN4

33. / DRLSTN4

In the last 6 months, how often did your child's personal doctor listen carefully to you? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRESPU4

34. / DRESPU4

In the last 6 months, how often did your child's personal doctor show respect for what you had to say? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CABLTLK

35. / CABLTLK

Is your child able to talk with doctors about [his/her] health care?

- 1. YES
- 2. NO -----> DRTMEN4

DK/REFUSAL/NOT ASCERTAINED --> DRTMEN4

CDREXPL

36. / CDREXPL

In the last 6 months, how often did your child's personal doctor explain things in a way that was easy for YOUR CHILD to understand? Would you say...

(READ LIST)

- 1. NEVER
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTMEN4

37. / DRTMEN4

In the last 6 months, how often did your child's personal doctor spend enough time with your child? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTLKU

38. / DRTLKU

In the last 6 months, did your child's personal doctor talk with you about how your child is feeling, growing, or behaving?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

DIFFDR

39. / DIFFDR

In the last 6 months, did your child get care from a doctor or other health provider besides [his/her] personal doctor?

1. YES
2. NO -----> RATEDR4

DK/REFUSAL/NOT ASCERTAINED --> RATEDR4

DRINFO

40. / DRINFO

In the last 6 months, how often did your child's personal doctor seem informed and up-to-date about the care your child got from these doctors or other health providers? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RATEDR4

41. / RATEDR4

Using ANY NUMBER FROM 0 TO 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your child's personal doctor?

00            01 02 03 04 05 06 07 08 09    10

DK/REFUSAL/NOT ASCERTAINED

COND3MO

42. / COND3MO

Does your child have any medical, behavioral, or other health conditions that have lasted for more than 3 MONTHS?

(IWER: "We are looking for a condition that the child CURRENTLY HAS that has lasted for more than 3 months." )

1. YES
2. NO -----> INTRO.SPDR

DK/REFUSAL/NOT ASCERTAINED --> INTRO.SPDR

DRUNCON

43. / DRUNCON

Does your child's personal doctor understand how these medical, behavioral, or other health conditions affect your child's day-to-day life?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

DRUNFAM

44. / DRUNFAM

Does your child's personal doctor understand how your child's medical, behavioral, or other health conditions affect your FAMILY'S day-to-day life?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.SPDR

INTRO.SPDR

Now I'm going to ask you some questions about specialists. When you answer these questions, please do NOT include dental visits or care your child got when (he/she) stayed overnight in a hospital.

NDSPDR4

45. / NDSPDR4

SPECIALISTS are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.

In the last 6 months, did you make any appointments for your child to see a specialist?

(CLARIFY IF NEEDED: "Specialists are doctors who specialize in one area of health care. Please include all doctors you consider to be specialists, but do not include any dental visits.")

(IWER: IF RESPONDENT ASKS IF A PARTICULAR TYPE OF DOCTOR IS A SPECIALIST, CLARIFY, "I don't have any information about that, so please just interpret it however it seems best to you.")

(CLARIFY IF NEEDED: "You can interpret this question however it seems best to you.")

1. YES
2. NO -----> INTRO.PLAN

DK/REFUSAL/NOT ASCERTAINED --> INTRO.PLAN

PRBSEE4

46. / PRBSEE4

In the last 6 months, how often did you get an appointment for your child to see a specialist as soon as you needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

SPDRS

47. / SPDRS

How many specialists has your child seen in the last 6 months?

(CLARIFY IF NEEDED: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. Would you say your child has seen...")

(READ LIST IF NEEDED: "Would you say...")

0. NONE, -----> INTRO.PLAN
1. 1 SPECIALIST,
2. 2,
3. 3,
4. 4, OR
5. 5 OR MORE SPECIALISTS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> INTRO.PLAN

RTSPDR4

48. / RTSPDR4

We want to know your rating of the specialist your child saw most often in the last 6 months.

Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

(Clarify if necessary: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.")

00            01 02 03 04 05 06 07 08 09    10

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN

INTRO.PLAN

Now I'm going to ask you some questions about your experience with your child's health plan.

CLCSRV4

49. / CLCSRV4

In the last 6 months, did you get information or help from customer service at your child's health plan?

1. YES
2. NO -----> PLPRWK4

DK/REFUSAL/NOT ASCERTAINED --> PLPRWK4

PBCLCS4

50. / PBCLCS4

In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CSRESP

51. / CSRESP

In the last 6 months, how often did customer service staff at your child's health plan treat you with courtesy and respect? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLPRWK4

52. / PLPRWK4

In the last 6 months, did your child's health plan give you any forms to fill out?

1. YES
2. NO -----> RTPLEXP

DK/REFUSAL/NOT ASCERTAINED --&gt; RTPLEXP

PBPLPW4

53. / PBPLPW4

In the last 6 months, how often were the forms from your child's health plan easy to fill out? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTPLEXP

54. / RTPLEXP

Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your child's health plan?

00            01 02 03 04 05 06 07 08 09    10

DK/REFUSAL/NOT ASCERTAINED

CHPRES

55. / CHPRES

In the last 6 months, did you get or refill any prescription medicines for your child?

1. YES
2. NO -----> REGDENT

DK/REFUSAL/NOT ASCERTAINED --&gt; REGDENT



## EZPRES

56. / EZPRES

In the last 6 months, how often was it easy to get prescription medicines for your child through [his/her] health plan? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## HELPPRES

57. / HELPPRES

Did anyone from your child's health plan, doctor's office, or clinic help you get your child's prescription medicines?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## REGDENT

57a. / REGDENT

A regular dentist is one you would go to for check-ups and cleanings or when [he/she] has a cavity or tooth pain.

Does your child have a regular dentist?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## DNTASAP

57b. / DNTASAP

In the last 6 months, if your child needed to see a dentist right away because of a DENTAL EMERGENCY, did [he/she] get to see a dentist as soon as you wanted? Would you say...?

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?
5. DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS (DO NOT READ)

DK/REFUSAL/NOT ASCERTAINED

## CHTREAT

57c. / CHTREAT

Choices for your child's treatment or health care can include choices about medicine, surgery, or other treatment.

In the last 6 months, did your provider tell you there was more than one choice for your child's treatment or health care?

1. YES
2. NO -----> RESPCHT

DK/REFUSAL/NOT ASCERTAINED --> RESPCHT

## PCTREAT

57d. / PCTREAT

In the last 6 months, did your provider talk with you about the pros and cons of each choice for your child's treatment or health care?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## BSTREAT

57e. / BSTREAT

In the last 6 months, when there was more than one choice for your child's treatment or health care, did your provider ask you which choice was best for your child?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## RESPCHT

57f. / RESPCHT

In the last 6 months, how often did your child's provider respect what health care and treatment choices you thought work best for your child? Would you say...?

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED

## ENCORQC

57g. / ENCORQC

In the last 6 months, how often did your child's provider encourage you to ask questions and raise concerns? Would you say...?

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED

## EASYQC

57h. / EASYQC

In the last 6 months, how often did your child's provider make it easy for you to ask questions and raise concerns? Would you say...?

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED

## HLTSTA4

58. / HLTSTA4

In general, how would you rate your child's overall health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## MNTLSTAT

59. / MNTLSTAT

In general, how would you rate your child's overall MENTAL OR EMOTIONAL health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## CUSEMED

60. / CUSEMED

Other than vitamins, does your child currently need or use medicine prescribed by a doctor?

1. YES
2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --&gt; MOREMED

## WHYMEDA

61. / WHYMEDA

Is this because of any medical, behavioral, or other health condition?

1. YES
2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

## WHYMEDB

62. / WHYMEDB

Is this a condition that has lasted or is expected to last for at least 12 months?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## MOREMED

63. / MOREMED

Does your child need or use more medical care, more mental health services, or more educational services than is usual for most children of the same age?

1. YES
2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

## WHYMOREA

64. / WHYMOREA

Is this because of any medical, behavioral, or other health condition?

1. YES
2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

## WHYMOREB

65. / WHYMOREB

Is this a condition that has lasted or is expected to last for at least 12 months?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## LIMITED

66. / LIMITED

Is your child limited or prevented in any way in [his/her] ability to do the things most children of the same age can do?

1. YES
2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --> SPECTHP

## WHYLIMA

67. / WHYLIMA

Is this because of any medical, behavioral, or other health condition?

1. YES
2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --&gt; SPECTHP

## WHYLIMB

68. / WHYLIMB

Is this a condition that has lasted or is expected to last for at least 12 months?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## SPECTHP

69. / SPECTHP

Does your child need or get special therapy such as physical, occupational, or speech therapy?

1. YES
2. NO -----> CHCOUNS

DK/REFUSAL/NOT ASCERTAINED --&gt; CHCOUNS

## WHYSTA

70. / WHYSTA

Is this because of any medical, behavioral, or other health condition?

1. YES
2. NO -----> CHCOUNS

DK/REFUSAL/NOT ASCERTAINED --&gt; CHCOUNS

## WHYSTB

71. / WHYSTB

Is this a condition that has lasted or is expected to last for at least 12 months?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## CHCOUNS

72. / CHCOUNS

Does your child have any kind of emotional, developmental, or behavioral problem for which [he/she] needs or gets treatment or counseling?

1. YES
2. NO -----> CAGE

DK/REFUSAL/NOT ASCERTAINED --&gt; CAGE

## TIMCOUNA

73. / TIMCOUNA

Has this problem lasted or is it expected to last for at least 12 months?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## CAGE

74. / CAGE

I have just a few more questions.

What is YOUR CHILD'S age?

(IWER: ENTER 00 IF LESS THAN 1 YEAR OLD)

(IWER: IF NEEDED CLARIFY, "Please answer based on your child's age as of their last birthday.")

\_\_\_ ENTER CHILD'S AGE

DK/REFUSAL/NOT ASCERTAINED

## CGENDER

75. / CGENDER

(IF NEEDED: "Is your child male or female?")

1. MALE
2. FEMALE

REFUSAL/NOT ASCERTAINED

## LATINO

76. / LATINO

Is your child of Hispanic or Latino origin or descent?

1. YES / HISPANIC OR LATINO
2. NO / NOT HISPANIC OR LATINO

DK/REFUSAL/NOT ASCERTAINED

## INTRO.RACE

INTRO.RACE

I am going to read a list of race categories. For each category, please say YES or NO if it describes your child's race. I must ask you about all categories in case more than one applies.

PQRACE3.(1-6)

77.1-6) / PQRACE3.(1-6)

[(Is your child)]

1. "White"
2. "Black or African-American"
3. "Asian"
4. "Native Hawaiian or other Pacific Islander"
5. "American Indian or Alaska Native"
6. "Some other race"

(IWER: IF R REPLIES "WHY ARE YOU ASKING ABOUT MY CHILD'S RACE?" SAY "We ask about your child's race for demographic purposes only. We want to be sure that the people we survey accurately represent the racial diversity of managed care enrollees in this country.")

(IWER: If R answers with a category not listed here, such as "HISPANIC" or "AMERICAN" or "MIXED RACE", probe using the category "OTHER".)

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

PAGE

78. / PAGE

Now I have a few questions about you. What is YOUR age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your last birthday.")

(READ IF NEEDED, "Are you...")

0. UNDER 18,
1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PGENDER

79. / PGENDER

(IWER: ENTER RESPONDENT'S SEX. "DK" NOT ALLOWED.)

(IWER: IF NECESSARY ASK, "Are you male or female?")

1. MALE
2. FEMALE

EDUCAT

80. / EDUCAT

What is the highest grade or level of school that you have COMPLETED?  
Did you complete...

(IWER: IF R SAYS HE/SHE HAD NON-ACADEMIC TRAINING, SUCH AS TRADE  
SCHOOL, PROBE: "Did you receive a high school diploma or GED?")

(IWER: ACADEMIC TRAINING BEYOND A HIGH SCHOOL DIPLOMA THAT DOES NOT  
LEAD TO A BACHELORS DEGREE, SHOULD BE CODED "4". IF R WENT TO BUSINESS  
SCHOOL OR GOT A 3-YEAR NURSING DEGREE, ENTER "4")

(IWER: IF R OFFERS MORE THAN ONE RESPONSE, FOR EXAMPLE: "SOME HIGH  
SCHOOL OR GED", ENTER THE HIGHEST NUMBER THAT APPLIES.)

(READ LIST)

1. 8TH GRADE OR LESS,
2. SOME HIGH SCHOOL, BUT DID NOT GRADUATE,
3. HIGH SCHOOL GRADUATE OR GED,
4. SOME COLLEGE OR 2-YEAR DEGREE,
5. 4-YEAR COLLEGE GRADUATE, OR
6. MORE THAN A 4-YEAR COLLEGE DEGREE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHRELT

81. / CHRELT

How are you related to the child?

(READ IF NEEDED: "Are you the ...")

1. MOTHER OR FATHER,
2. GRANDPARENT,
3. AUNT OR UNCLE,
4. OLDER BROTHER OR SISTER,
5. OTHER RELATIVE,
6. LEGAL GUARDIAN, OR
7. SOMEONE ELSE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ALL.DONE

THANKS.SCREEN.

Those are all the questions I have.

Thank you for taking part in this important interview.

Have a nice (day/evening). Good bye.