



PacificSource - Columbia Gorge  
CAHPS® 5.0 Medicaid Survey

Banner Book Report

June 2017  
Measurement Year 2016



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## METHODOLOGY

### Introduction

This banner book report summarizes the results of the 2017 CAHPS® Medicaid survey of PacificSource - Columbia Gorge members. PacificSource - Columbia Gorge is one of 16 health plans that participated in the survey. The survey was administered over a twelve-week period using a mixed-mode (mail and telephone) six-wave protocol. This protocol consisted of a pre-notification letter, an initial survey mailing and reminder postcard to all respondents, followed by a second survey mailing and reminder postcard to non-respondents. Phone follow-up was conducted for members who had not responded to the mailings. Respondents were surveyed in English and Spanish. DataStat administered the survey under contract with the Oregon Health Authority.

### Survey Milestones

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

### Sampling

The sampling plan for the adult and child surveys called for a random sample of 900 eligible members per CCO in each age group. The state elected to sample 1800 members from each age group of the Open Card population. Adults were defined as members aged 18 years or older and children as 17 years old or younger, both as of November 30, 2016. To be eligible, members had to have been enrolled in Oregon Health Plan for at least six months as of November 30, 2016. The final selected sample consisted of 16,200 adult OHP enrollees and 16,200 child OHP enrollees.

### Questionnaires

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

### Selection of Cases for Analysis

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

## Composites, Overall Ratings, and Measures for Reporting

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

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

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

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

Q25/46. Getting appointments with specialists

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

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

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

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

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

Q18/33. Personal doctor listened carefully to you

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

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

### **Composite: Customer Service**

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

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

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

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

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

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

### **Rating Questions**

Q13/14. Rating of all health care

Q23/41. Rating of personal doctor

Q27/47. Rating of specialist doctor

Q35/54. Rating of health plan

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

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

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

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

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

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

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

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

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

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

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

## Comparisons, Statistical Testing, Scoring, and Weighting

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

Significance testing was conducted between the CCO results and the overall OHP results, and the plan demographic subgroup results. Statistically significant differences were determined with binomial and t-tests, using a significance level of .05 or less. Tests were considered valid when the number of cases used to compute the score was 50 or greater and there was non-zero variation in the tested groups. The symbol '~' is used to indicate the test was not valid. For comparisons with statistically significant differences, a star (\*) is found to the right of the relevant percentage in the table.

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

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

## Sample Disposition

Category	Adult		Child	
	PacificSource Gorge	Overall	PacificSource Gorge	Overall
<b>**First mailing - sent</b>	900	16200	900	16200
<b>*First mailing - usable survey returned</b>	166	2801	155	2168
<b>Second mailing - sent</b>	751	13319	766	13616
<b>*Second mailing - usable survey returned</b>	54	978	51	886
<b>*Phone - usable surveys</b>	90	1303	151	2255
<b>Total - usable surveys</b>	310	5082	357	5309
<b>†Ineligible: According to population criteria‡</b>	22	346	10	200
<b>†Ineligible: Deceased</b>	3	31	0	0
<b>†Ineligible: Mentally or physically unable to complete survey</b>	7	195	0	0
<b>†Ineligible: Language barrier</b>	0	64	2	59
<b>Incorrect address AND incorrect phone number</b>	36	848	33	710
<b>Refusal/Returned survey blank</b>	27	672	24	829
<b>Nonresponse - Unavailable by mail or phone</b>	495	8962	474	9093
<b>Adjusted Response Rate</b>	<b>35.7%</b>	<b>32.7%</b>	<b>40.2%</b>	<b>33.3%</b>

\*Included in response rate numerator

†Excluded from adjusted response rate denominator

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

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

## Response/Non-Response Comparison

Presented below is a comparison, by age and gender within each age category, of respondents and non-respondents, all of whom were part of the random sample for the Oregon CAHPS© 2017 survey.

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

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

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

### Adult

Gender / Age	Non-Respondents	Respondents	Difference
Male	217 44.2%	131 42.3%	-1.94%
Female	274 55.8%	179 57.7%	1.94%
18-24	106 21.6%	40 12.9%	-8.69%
25-34	143 29.1%	49 15.8%	-13.32%
35-44	84 17.1%	52 16.8%	-0.33%
45-54	78 15.9%	77 24.8%	8.95%
55-64	69 14.1%	83 26.8%	12.72%
65-74	6 1.2%	6 1.9%	0.71%
75 or Older	5 1.0%	3 1.0%	-0.05%

### Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	251 52.4%	179 50.1%	-2.26%
Female	228 47.6%	178 49.9%	2.26%
<3	102 21.3%	67 18.8%	-2.53%
4-7	127 26.5%	74 20.7%	-5.79%
8-12	147 30.7%	100 28.0%	-2.68%
13 or older	103 21.5%	116 32.5%	10.99%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER			
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR		FE- MALE			
Q1 YES	308 100%	5060 100%	38 100%	46 100%	42 100%	72 100%	78 100%	11 100%	164 100%	~	~	~	~	~	~	107 100%	183 100%	205 100%	83 100%	121 100%	169 100%
NOT ANSWERED	2	22			2										1	1	1	1	1	1	
VALID CASES	308	5060	38	46	42	72	78	11	164						107	183	205	83	121	169	
NUMBER OF RESPONDENTS	310 100%	5082 100%	38 100%	46 100%	44 100%	72 100%	78 100%	11 100%	164 100%						108 100%	184 100%	206 100%	84 100%	122 100%	170 100%	



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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER	AS- IAN	NATV ILND	AMER HAW/ IND/ PAC ALSK	OTHR	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE	
Q3 YES	107 36%	2017 41%	11 30%~	11 24%~	16 36%~	27 38%	33 42%	4 40%~	65 40%	~	~	~	~	~	~	32 30%	71 39%	63 31%*	39 48%*	41 34%	62 36%
NO	193 64%	2921 59%	26 70%~	35 76%~	28 64%~	44 62%	45 58%	6 60%~	97 60%	~	~	~	~	~	~	75 70%	111 61%	142 69%*	43 52%*	78 66%	108 64%
NOT ANSWERED	10	144	1			1		1	2							1	2	1	2	3	
VALID CASES	300	4938	37	46	44	71	78	10	162							107	182	205	82	119	170
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164							108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2																		
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER									
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/								
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	HIS-	HIS-	NOT	VERY		
									AMER		ILND	NATV		TI##	PAN-	PAN-	GOOD	FAIR		
									##	##	##	##	##		IC	IC	&	&		
																	GOOD	POOR		
																	MALE	MALE		
Q4																				
NEVER	1	42		1					1						1	1			1	
	1%	2%		~ 11%	~	~	~	~	2%	~	~	~	~	~	~ 2%	2%	~	~	2%	
SOMETIMES	21	268	3	1		11	5		14						4	16	13	7	8	12
	22%	15%	27%	11%	~	48%	18%	~	25%	~	~	~	~	~	13%	27%	24%	21%	23%	22%
USUALLY	19	466	3	3	4	3	5		11						5	13	12	6	9	9
	20%	26%	27%	33%	29%	13%	18%	~	20%	~	~	~	~	~	17%	22%	22%	18%	26%	16%
ALWAYS	53	1045	5	4	10	9	18	4	29						21	30	29	21	18	33
	56%	57%	45%	44%	71%	39%	64%	100%	53%	~	~	~	~	~	70%	50%	53%	62%	51%	60%
#ALWAYS + USUALLY (NET)	72	1511	8	7	14	12	23	4	40						26	43	41	27	27	42
	77%	83%	73%	78%	100%	52%	82%	100%	73%	~	~	~	~	~	87%	72%	75%	79%	77%	76%
TOP BOX SCORE	53	1045	5	4	10	9	18	4	29						21	30	29	21	18	33
	56%	57%	45%	44%	71%	39%	64%	100%	53%	~	~	~	~	~	70%	50%	53%	62%	51%	60%
NOT ANSWERED	13	196		2	2	4	5		10						2	11	8	5	6	7
VALID CASES	94	1821	11	9	14	23	28	4	55						30	60	55	34	35	55
NUMBER OF RESPONDENTS	107	2017	11	11	16	27	33	4	65						32	71	63	39	41	62
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q3 = YES]

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2																			
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER										
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/										
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK									
									AMER	ILLND	NATV	OTHR	MUL-	HIS-	HIS-	NOT	EX &	VERY	GOOD		
									WHTE	##	##	##	##	##	TI##	IC	IC	GOOD	FAIR		
																	&	&	POOR		
																	MALE	MALE	FE-		
																	MALE	MALE	MALE		
Q5																					
YES	190	3365	22	22	27	49	55	9	112							61	125	123	62	68	118
	64%	68%	58%~	48%~	61%~	70%	71%	82%~	69%*	~	~	~	~	~	~	57%	69%*	60%	75%*	56%*	70%*
NO	109	1561	16	24	17	21	22	2	50							46	57	81	21	53	50
	36%	32%	42%~	52%~	39%~	30%	29%	18%~	31%*	~	~	~	~	~	~	43%	31%*	40%	25%*	44%*	30%*
NOT ANSWERED	11	156				2	1		2							1	2	2	1	1	2
VALID CASES	299	4926	38	46	44	70	77	11	162							107	182	204	83	121	168
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164							108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	PCG 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##	OTHR##	MULTI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	MALE	FEMALE
Q6 NEVER	7 4%	83 3%	1 ~	1 5%~	3 4%~	2 7%~	2 4%~	5 5%	~	~	~	~	~	~	7 6%~	7 6%~	~	4 7%	3 3%	
SOMETIMES	37 22%	590 19%	8 36%~	6 29%~	5 22%~	8 19%~	9 19%~	1 14%~	19 19%	~	~	~	~	~	14 26%	23 21%	23 20%	14 27%	16 27%	21 20%
USUALLY	50 30%	884 29%	7 32%~	6 29%~	8 35%~	14 33%~	13 28%~	1 14%~	37 37%*	~	~	~	~	~	9 17%*	40 36%*	34 30%	15 29%	15 25%	34 32%
ALWAYS	75 44%	1472 49%	7 32%~	8 38%~	9 39%~	18 42%~	23 49%~	5 71%~	38 38%	~	~	~	~	~	31 57%*	41 37%*	49 43%	22 43%	24 41%	48 45%
#ALWAYS + USUALLY (NET)	125 74%	2356 78%	14 64%~	14 67%~	17 74%~	32 74%~	36 77%~	6 86%~	75 76%	~	~	~	~	~	40 74%	81 73%	83 73%	37 73%	39 66%	82 77%
TOP BOX SCORE	75 44%	1472 49%	7 32%~	8 38%~	9 39%~	18 42%~	23 49%~	5 71%~	38 38%	~	~	~	~	~	31 57%*	41 37%*	49 43%	22 43%	24 41%	48 45%
NOT ANSWERED	21	336	1	4	6	8	2	13						7	14	10	11	9	12	
VALID CASES	169	3029	22	21	23	43	47	7	99					54	111	113	51	59	106	
NUMBER OF RESPONDENTS	190	3365	22	22	27	49	55	9	112					61	125	123	62	68	118	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	

[ASKED IF Q5 = YES]

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q7 NONE	89 30%	1242 26%	10 28%~	16 36%~	17 40%~	15 21%*	25 32%	2 20%~	42 26%	~	~	~	~	~	~	35 34%	50 28%	65 32%	19 23%	44 38%*	41 25%*
1 TIME	57 19%	927 19%	12 33%~	6 14%~	5 12%~	7 10%*	20 26%	4 40%~	26 16%	~	~	~	~	~	~	24 23%	31 17%	44 22%	11 14%	28 24%	27 16%
2	53 18%	878 18%	2 6%~	11 25%~	6 14%~	17 24%	12 15%	4 40%~	38 23%*	~	~	~	~	~	~	13 13%	39 22%*	36 18%	16 20%	18 15%	34 20%
3	30 10%	581 12%	3 8%~	3 7%~	6 14%~	12 17%	4 5%*	~	14 9%	~	~	~	~	~	~	13 13%	16 9%	17 8%	12 15%	9 8%	20 12%
4	30 10%	402 8%	6 17%~	1 2%~	6 14%~	5 7%	11 14%	~	19 12%	~	~	~	~	~	~	9 9%	20 11%	22 11%	6 7%	7 6%*	22 13%*
5 TO 9	21 7%	571 12%*	2 6%~	3 7%~	2 5%~	9 13%	4 5%	~	14 9%	~	~	~	~	~	~	6 6%	15 8%	12 6%	9 11%	6 5%	15 9%
10 OR MORE TIMES	13 4%	248 5%	1 3%~	4 9%~	1 2%~	5 7%	2 3%	~	9 6%	~	~	~	~	~	~	3 3%	10 6%	5 2%*	8 10%*	5 4%	8 5%
NOT ANSWERED	17	233	2	2	1	2	1	1	2							5	3	5	3	5	3
VALID CASES	293	4849	36	44	43	70	78	10	162							103	181	201	81	117	167
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164							108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE					RACE					ETHNIC-ITY	HEALTH STATUS		GENDER				
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL-TI ##	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & FAIR	EX & VERY GOOD & FAIR & POOR	MALE	FE-MALE
Q8 #YES	141 71%	2535 72%	14 54%~	13 46%~	22 88%~	37 69%	44 85%*	7 88%~	91 77%*	~	~	~	~	~	40 60%*	99 77%*	92 69%	46 75%	53 75%	86 69%
NO	58 29%	984 28%	12 46%~	15 54%~	3 12%~	17 31%	8 15%*	1 13%~	27 23%*	~	~	~	~	~	27 40%*	30 23%*	42 31%	15 25%	18 25%	39 31%
NOT ANSWERED	5	88			1	1	1		2						1	2	2	1	2	1
VALID CASES	199	3519	26	28	25	54	52	8	118						67	129	134	61	71	125
NUMBER OF RESPONDENTS	204	3607	26	28	26	55	53	8	120						68	131	136	62	73	126
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			PAN-	PAN-	&	&		
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
Q9																				
YES	94	1857	6	9	15	29	30	3	67						21	71	53	39	30	62
	48%	53%	23%~	33%~	63%~	55%	58%	38%~	57%*	~	~	~	~	~	32%*	55%*	40%*	66%*	42%	51%
NO	102	1655	20	18	9	24	22	5	50						44	57	80	20	41	60
	52%	47%	77%~	67%~	38%~	45%	42%	63%~	43%*	~	~	~	~	~	68%*	45%*	60%*	34%*	58%	49%
NOT ANSWERED	8	95		1	2	2	1		3						3	3	3	3	2	4
VALID CASES	196	3512							117						65	128	133	59	71	122
NUMBER OF RESPONDENTS	204	3607							120						68	131	136	62	73	126
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2													ITY	STATUS				
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			HIS-	HIS-	&	&		
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
Q10																				
#YES	81	1690	5	7	13	22	29	3	64						13	66	47	32	26	53
	90%	93%	83%~	88%~	93%~	81%~	97%~	100%~	98%~	~	~	~	~	~	65%~	97%~	92%~	86%~	93%~	88%~
NO	9	121	1	1	1	5	1		1						7	2	4	5	2	7
	10%	7%	17%~	13%~	7%~	19%~	3%~		2%~	~	~	~	~	~	35%~	3%~	8%~	14%~	7%~	12%~
NOT ANSWERED	4	46		1	1	2			2						1	3	2	2	2	2
VALID CASES	90	1811	6	8	14	27	30	3	65						20	68	51	37	28	60
NUMBER OF RESPONDENTS	94	1857	6	9	15	29	30	3	67						21	71	53	39	30	62
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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



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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									##	##	##	##	##	TI##	IC	IC	&			
																	&			
																	POOR			
																	MALE			
																	MALE			
Q11																				
#YES	68	1346	5	8	10	19	23	2	55						10	57	39	28	23	44
	76%	74%	83%~	100%~	71%~	70%~	77%~	67%~	85%~	~	~	~	~	~	50%~	84%~	76%~	76%~	82%~	73%~
NO	21	462	1		4	8	7	1	10						10	11	12	9	5	16
	24%	26%	17%~	~	29%~	30%~	23%~	33%~	15%~	~	~	~	~	~	50%~	16%~	24%~	24%~	18%~	27%~
NOT ANSWERED	5	49		1	1	2			2						1	3	2	2	2	2
VALID CASES	89	1808	6	8	14	27	30	3	65						20	68	51	37	28	60
NUMBER OF RESPONDENTS	94	1857	6	9	15	29	30	3	67						21	71	53	39	30	62
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	PCG 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 ##	NATV AS- IAN ##	AMER HAW/ IND/ PAC ALSK ##	OTHER NATV ##	MULTI- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q12 #YES	78 87%	1378 77%*	4 67%	8 100%	10 71%	23 85%	29 97%	2 67%	58 89%	~	~	~	~	~	17 85%	59 87%	43 84%	33 89%	23 82%	53 88%
NO	12 13%	420 23%*	2 33%	~	4 29%	4 15%	1 3%	1 33%	7 11%	~	~	~	~	~	3 15%	9 13%	8 16%	4 11%	5 18%	7 12%
NOT ANSWERED	4	59		1	1	2			2						1	3	2	2	2	2
VALID CASES	90	1798	6	8	14	27	30	3	65						20	68	51	37	28	60
NUMBER OF RESPONDENTS	94	1857	6	9	15	29	30	3	67						21	71	53	39	30	62
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE					RACE					ETHNIC-ITY	HEALTH STATUS		GENDER				
	PCG TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	MALE	FE-MALE
Q13 WORST HEALTH CARE POSSIBLE		19 0.5%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01	1 0.5%	22 0.6%	~	~	~	~	2%	~	~	~	~	~	~	1%	~	1	0.7%	1%	~	
02	4 2%	39 1%	~	~	4%	5%	~	3%	~	~	~	~	~	~	4	1	3	2	2	
03		63 2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
04	4 2%	95 3%	~	4%	4%	4%	~	3%	~	~	~	~	~	~	4	1	3	2	2	
05	11 6%	234 7%	2 8%	4 15%	~	5 9%	~	4 3%	~	~	~	~	~	5 7%	6 5%	6 4%	5 8%	5 7%	6 5%	
06	7 4%	215 6%	~	4%	~	5 9%	1 2%	7 6%	~	~	~	~	~	~	7 6%	5 4%	2 3%	~	7 6%	
07	18 9%	442 13%	2 8%	5 19%	4 16%	3 5%	3 6%	10 9%	~	~	~	~	~	6 9%	12 9%	13 10%	5 8%	8 11%	10 8%	
08	36 18%	779 22%	8 31%	2 7%	5 20%	7 13%	13 25%	1 13%	25 22%	~	~	~	~	9 13%	27 21%	27 20%	9 15%	16 23%	20 16%	
09	44 22%	592 17%	6 23%	4 15%	7 28%	14 25%	10 20%	2 25%	26 22%	~	~	~	~	15 22%	28 22%	30 22%	13 22%	16 23%	27 22%	
BEST HEALTH CARE POSSIBLE	73 37%	1011 29%*	8 31%	10 37%	7 28%	16 29%	23 45%	5 63%	37 32%	~	~	~	~	32 47%*	39 31%*	50 37%	20 33%	20 29%	51 41%	
#8-10 (NET)	153 77%	2382 68%*	22 85%	16 59%	19 76%	37 67%	46 90%*	8 100%	88 76%	~	~	~	~	56 82%	94 74%	107 80%	42 70%	52 74%	98 78%	

Continued

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE	
9-10 (NET)	117 59%	1603 46%*	14 54%~	14 52%~	14 56%~	30 55%	33 65%	7 88%~	63 54%	~	~	~	~	~	~	47 69%*	67 53%*	80 60%	33 55%	36 51%	78 62%
NOT ANSWERED	6	96		1	1		2		4							4	2	2	3	1	
VALID CASES	198	3511	26	27	25	55	51	8	116							68	127	134	60	70	125
NUMBER OF RESPONDENTS	204	3607	26	28	26	55	53	8	120							68	131	136	62	73	126
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%
MEAN	8.39	7.94	8.54	8.04	8.28	7.85	8.86	9.50	8.26							8.75	8.17	8.54	7.98	8.09	8.54
p stat_(*=Sig @ p<=.05)		.002*	~	~	~	.031*	.022*		~.233	~	~	~	~	~	~	~.048*	.023*	.165	.075	.108	.186

[ASKED IF Q7 >= 1 TIME]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	VERY	FAIR				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	POOR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR		
									##	##	##	##	##	TI##			MALE	MALE		
Q14																				
NEVER	4	90		1		2	1		3						1	3	2	2	3	1
	2%	3%		~ 4%		~ 4%	2%		3%						2%	2%	1%	4%	4%	0.8%
SOMETIMES	24	539	2	4	1	13	4		14						7	17	13	11	9	15
	12%	15%	8%	14%	4%	25%*	8%		12%						11%	13%	10%	20%	13%	12%
USUALLY	85	1150	16	16	14	19	17	1	52						28	56	62	22	29	55
	44%	33%*	62%	57%	61%	36%	33%	14%	45%						43%	44%	46%	39%	41%	45%
ALWAYS	81	1722	8	7	8	19	29	6	47						29	50	57	21	29	50
	42%	49%*	31%	25%	35%	36%	57%*	86%	41%						45%	40%	43%	38%	41%	41%
#ALWAYS + USUALLY (NET)	166	2872	24	23	22	38	46	7	99						57	106	119	43	58	105
	86%	82%	92%	82%	96%	72%*	90%	100%	85%						88%	84%	89%	77%*	83%	87%
TOP BOX SCORE	81	1722	8	7	8	19	29	6	47						29	50	57	21	29	50
	42%	49%*	31%	25%	35%	36%	57%*	86%	41%						45%	40%	43%	38%	41%	41%
NOT ANSWERED	10	106			3	2	2	1	4						3	5	2	6	3	5
VALID CASES	194	3501	26	28	23	53	51	7	116						65	126	134	56	70	121
NUMBER OF RESPONDENTS	204	3607	26	28	26	55	53	8	120						68	131	136	62	73	126
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER			
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER IND/ PAC ALSK	OTHR	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q15 YES	244 82%	3993 82%	31 82%~	35 76%~	33 75%~	60 83%	68 88%*	9 90%~	136 84%	~	~	~	~	~	~	90 83%	149 82%	165 80%	73 88%	96 80%	143 84%
NO	55 18%	904 18%	7 18%~	11 24%~	11 25%~	12 17%	9 12%*	1 10%~	26 16%	~	~	~	~	~	~	18 17%	33 18%	40 20%	10 12%	24 20%	27 16%
NOT ANSWERED	11	185					1	1	2							2	1	1		2	
VALID CASES	299	4897	38	46	44	72	77	10	162							108	182	205	83	120	170
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164							108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	FE- MALE	MALE	
Q16 NONE	53 23%	792 21%	6 20%	14 40%	8 27%	5 9%*	17 27%	2 22%	27 21%	~	~	~	~	~	~	23 26%	29 21%	38 24%	14 20%	26 28%	26 19%
1 TIME	64 28%	995 27%	9 30%	10 29%	5 17%	13 23%	20 31%	4 44%	31 24%	~	~	~	~	~	~	27 30%	35 25%	48 30%	14 20%	30 32%	32 24%
2	47 20%	792 21%	3 10%	7 20%	7 23%	17 30%	11 17%	2 22%	28 22%	~	~	~	~	~	~	15 17%	32 23%	34 22%	13 19%	17 18%	30 22%
3	32 14%	483 13%	8 27%	1 3%	4 13%	9 16%	7 11%	1 11%	18 14%	~	~	~	~	~	~	12 13%	19 14%	18 11%	13 19%	10 11%	21 16%
4	19 8%	279 7%	2 7%	~	4 13%	6 11%	6 9%	~	12 9%	~	~	~	~	~	~	7 8%	12 9%	10 6%	9 13%	6 6%	13 10%
5 TO 9	13 6%	312 8%	2 7%	2 6%	2 7%	4 7%	3 5%	~	9 7%	~	~	~	~	~	~	4 4%	9 6%	9 6%	4 6%	4 4%	9 7%
10 OR MORE TIMES	4 2%	88 2%	~	1 3%	~	3 5%	~	~	2 2%	~	~	~	~	~	~	1 1%	3 2%	1 0.6%	3 4%	~	4 3%*
NOT ANSWERED	12	252	1	~	3	3	4	~	9	~	~	~	~	~	~	1	10	7	3	3	8
VALID CASES	232	3741	30	35	30	57	64	9	127	~	~	~	~	~	~	89	139	158	70	93	135
NUMBER OF RESPONDENTS	244	3993	31	35	33	60	68	9	136	~	~	~	~	~	~	90	149	165	73	96	143
	100%	100%	100%	100%	100%	100%	100%	100%	100%	~	~	~	~	~	~	100%	100%	100%	100%	100%	100%

[ASKED IF Q15 = YES]





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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS	MALE	MALE			
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	##	##	##	##	##	TI##		GOOD	POOR	FE-	
																		MALE	MALE	
Q18																				
NEVER	2	63				2			2						2		2	1	1	
	1%	2%	~	~	~	4%	~	~	2%	~	~	~	~	~	~	~	4%	2%	0.9%	
SOMETIMES	8	222	1	2		4			5						3	5	5	3	5	3
	5%	8%	4%~	10%~	~	8%	~	~	5%	~	~	~	~	~	5%	5%	4%	6%	8%	3%
USUALLY	31	572	6	3	5	10	7		14						16	15	18	13	12	19
	18%	20%	25%~	14%~	25%~	20%	15%~	~	14%	~	~	~	~	~	25%	14%	15%	24%	19%	17%
ALWAYS	134	2066	17	16	15	35	39	7	76						46	85	95	36	45	86
	77%	71%	71%~	76%~	75%~	69%	85%~	100%~	78%	~	~	~	~	~	71%	79%	81%	67%	71%	79%
#ALWAYS + USUALLY (NET)	165	2638	23	19	20	45	46	7	90						62	100	113	49	57	105
	94%	90%*	96%~	90%~	100%~	88%	100%~	100%~	93%	~	~	~	~	~	95%	93%	96%	91%	90%	96%
TOP BOX SCORE	134	2066	17	16	15	35	39	7	76						46	85	95	36	45	86
	77%	71%	71%~	76%~	75%~	69%	85%~	100%~	78%	~	~	~	~	~	71%	79%	81%	67%	71%	79%
NOT ANSWERED	4	26			2	1	1		3						1	3	2	2		4
VALID CASES	175	2923	24	21	20	51	46	7	97						65	107	118	54	63	109
NUMBER OF RESPONDENTS	179	2949	24	21	22	52	47	7	100						66	110	120	56	67	109
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2	18	25	35	45	55	65	AND	BLCK	AS-	NATV	AMER					EX &	VERY		
	PCG	OHP	18	25	35	45	55	65		BLCK	AS-	NATV	AMER				EX &	VERY			
	TOT	TOT	TO	TO	TO	TO	TO	AND	AFR-	IAN	ILND	NATV	ALSK				GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	##	##	##	##	##	TI##	HIS-	HIS-	GOOD	FAIR		
																IC	IC	&	&	FE-	
																	GOOD	POOR	MALE	MALE	
Q19																					
NEVER	2	55	1			1			1							2		2		2	
	1%	2%	4%~	~	~	2%	~	~	1%	~	~	~	~	~	~	~	2%	~	4%~	3%~	~
SOMETIMES	6	211	1			3	2		3							3	3	4	2	5	1
	3%	7%*	4%~	~	~	6%	4%~	~	3%	~	~	~	~	~	~	5%	3%	3%	4%	8%*	0.9%
USUALLY	24	437	2	5	1	12	3		10							13	11	11	13	10	14
	14%	15%	8%~	24%~	5%~	23%*	7%~	~	10%	~	~	~	~	~	~	20%	10%	9%*	23%*	15%	13%
ALWAYS	145	2221	20	16	21	36	41	7	85							50	93	104	39	49	94
	82%	76%*	83%~	76%~	95%~	69%*	89%~	100%~	86%	~	~	~	~	~	~	76%	85%	87%*	70%*	74%	86%
#ALWAYS + USUALLY (NET)	169	2658	22	21	22	48	44	7	95							63	104	115	52	59	108
	95%	91%*	92%~	100%~	100%~	92%	96%~	100%~	96%	~	~	~	~	~	~	95%	95%	97%	93%	89%*	99%*
TOP BOX SCORE	145	2221	20	16	21	36	41	7	85							50	93	104	39	49	94
	82%	76%*	83%~	76%~	95%~	69%*	89%~	100%~	86%	~	~	~	~	~	~	76%	85%	87%*	70%*	74%	86%
NOT ANSWERED	2	25					1		1								1			1	
VALID CASES	177	2924	24	21	22	52	46	7	99							66	109	119	56	66	109
NUMBER OF RESPONDENTS	179	2949	24	21	22	52	47	7	100							66	110	120	56	67	109
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/		NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK		HIS-	HIS-	GOOD	FAIR			
									AMER		ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	##	##	##	##	##	TI##		GOOD	POOR	MALE	MALE
Q20																				
NEVER	2	87				1	1		2						2	2			1	1
	1%	3%*	~	~	~	2%	2%~	~	2%	~	~	~	~	~	~	2%~	2%~	~	2%	0.9%
SOMETIMES	14	259	3	3		8			6						8	6	6	8	9	5
	8%	9%	13%~	14%~	~	15%*	~	~	6%	~	~	~	~	~	12%	6%	5%	14%	14%	5%
USUALLY	40	721	8	2	8	14	6		18						19	21	20	20	14	26
	22%	25%	33%~	10%~	36%~	27%	13%~	~	18%	~	~	~	~	~	29%	19%	17%*	36%*	21%	24%
ALWAYS	122	1860	13	16	14	29	39	7	73						39	80	91	28	42	77
	69%	64%	54%~	76%~	64%~	56%*	85%~100%~	~	74%	~	~	~	~	~	59%*	73%	76%*	50%*	64%	71%
#ALWAYS + USUALLY (NET)	162	2581	21	18	22	43	45	7	91						58	101	111	48	56	103
	91%	88%	88%~	86%~100%~	~	83%*	98%~100%~	~	92%	~	~	~	~	~	88%	93%	93%	86%	85%*	94%
TOP BOX SCORE	122	1860	13	16	14	29	39	7	73						39	80	91	28	42	77
	69%	64%	54%~	76%~	64%~	56%*	85%~100%~	~	74%	~	~	~	~	~	59%*	73%	76%*	50%*	64%	71%
NOT ANSWERED	1	22					1		1							1			1	
VALID CASES	178	2927						7	99						66	109	119	56	66	109
NUMBER OF RESPONDENTS	179	2949	24	21	22	52	47	7	100						66	110	120	56	67	109
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILLND	AMER IND/ ALSK	OTHR	MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
Q21 YES	107 60%	1800 62%	14 58%~	12 57%~	15 68%~	37 71%*	24 52%~	2 29%~	59 60%	~	~	~	~	~	~	40 61%	65 60%	70 59%	35 63%	35 53%	70 64%
NO	71 40%	1107 38%	10 42%~	9 43%~	7 32%~	15 29%*	22 48%~	5 71%~	40 40%	~	~	~	~	~	~	26 39%	44 40%	49 41%	21 38%	31 47%	39 36%
NOT ANSWERED	1	42					1	1								1	1			1	
VALID CASES	178	2907	24	21	22	52	46	7	99							66	109	119	56	66	109
NUMBER OF RESPONDENTS	179	2949	24	21	22	52	47	7	100							66	110	120	56	67	109
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	PCG 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-AMER ##	AS-IAN ##	NATV ILND ##	AMER HAW/IND/PAC ALSK ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE-MALE
Q22 NEVER	4 4%	108 6%	1 7%	2 17%	~	~	1 4%	~	2 3%	~	~	~	~	~	~	2 5%	2 3%	3 4%	1 3%	1 3%	3 4%
SOMETIMES	11 11%	264 15%	2 14%	1 8%	~	8 22%	~	~	4 7%	~	~	~	~	~	~	6 15%	5 8%	5 7%	6 18%	5 15%	6 9%
USUALLY	32 31%	517 30%	3 21%	4 33%	6 43%	13 36%	6 25%	~	19 33%	~	~	~	~	~	~	12 31%	20 32%	18 26%	14 41%	11 32%	21 31%
ALWAYS	56 54%	861 49%	8 57%	5 42%	8 57%	15 42%	17 71%	2 100%	33 57%	~	~	~	~	~	~	19 49%	36 57%	42 62%	13 38%	17 50%	38 56%
#ALWAYS + USUALLY (NET)	88 85%	1378 79%	11 79%	9 75%	14 100%	28 78%	23 96%	2 100%	52 90%	~	~	~	~	~	~	31 79%	56 89%	60 88%	27 79%	28 82%	59 87%
TOP BOX SCORE	56 54%	861 49%	8 57%	5 42%	8 57%	15 42%	17 71%	2 100%	33 57%	~	~	~	~	~	~	19 49%	36 57%	42 62%	13 38%	17 50%	38 56%
NOT ANSWERED	4	50			1	1		1								1	2	2	1	1	2
VALID CASES	103	1750	14	12	14	36	24	2	58							39	63	68	34	34	68
NUMBER OF RESPONDENTS	107	1800	14	12	15	37	24	2	59							40	65	70	35	35	70
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE					RACE					ETHNIC-ITY	HEALTH STATUS		GENDER				
	PCG TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL-TI ##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q23 WORST PERSONAL DOCTOR POSSIBLE		23 0.6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01	2 0.9%	32 0.9%	~	~	~	2%	2%	~0.8%	~	~	~	~	~	~	1% 0.7%	1% 0.7%	1% 1%	1% 0.8%	1% 0.8%	
02	1 0.4%	39 1%	~	~	~	2%	~	~0.8%	~	~	~	~	~	~	~0.7%	~	1%	1%	~	
03	2 0.9%	60 2%	~	3%	~	~	2%	~	2%	~	~	~	~	~	~	1%	0.7%	1%	1% 0.8%	
04	2 0.9%	72 2%	~	~	~	4%	~	~0.8%	~	~	~	~	~	~	1% 0.7%	1%	2%	1%	1% 0.8%	
05	10 4%	188 5%	2% 7%	1% 3%	1% 3%	3% 5%	2% 3%	1% 11%	5% 4%	~	~	~	~	~	3% 5%	7% 5%	5% 3%	5% 7%	7% 8%	3% 2%
06	10 4%	158 4%	3% 3%	1% 9%	1% 3%	1% 2%	4% 6%	~	7% 6%	~	~	~	~	~	2% 6%	8% 6%	6% 4%	4% 6%	5% 5%	4% 4%
07	12 5%	327 9%*	3% 10%	3% 9%	~	4% 7%	2% 3%	~	7% 6%	~	~	~	~	~	5% 6%	7% 5%	8% 5%	4% 6%	7% 8%	5% 4%
08	34 15%	632 17%	20% 20%	6% 18%	6% 27%	8% 13%	7% 10%	6% 10%	17% 14%	~	~	~	~	~	17% 20%	17% 13%	24% 16%	10% 14%	14% 15%	20% 15%
09	41 18%	691 19%	5% 17%	6% 18%	7% 23%	12% 22%	9% 14%	2% 22%	23% 19%	~	~	~	~	~	14% 16%	27% 20%	28% 18%	13% 19%	10% 11%*	31% 24%*
BEST PERSONAL DOCTOR POSSIBLE	110 49%	1506 40%*	43% 43%	13% 39%	13% 43%	24% 44%	38% 60%*	6% 67%	59% 48%	~	~	~	~	~	44% 51%	64% 47%	78% 51%	30% 43%	45% 49%	63% 48%
#8-10 (NET)	185 83%	2829 76%*	24% 80%	25% 76%	28% 93%	43% 78%	53% 84%	8% 89%	99% 80%	~	~	~	~	~	75% 86%	108% 80%	130% 85%	53% 77%	69% 75%*	114% 88%*

Continued

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER	AS- IAN	NATV ILND	AMER IND/ PAC ALSK	OTH- MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	FE- MALE	MALE	
9-10 (NET)	151 67%	2197 59%*	18 60%~	19 58%~	20 67%~	36 65%	47 75%	8 89%~	82 67%	~	~	~	~	~	58 67%	91 67%	106 69%	43 62%	55 60%*	94 72%
NOT ANSWERED	20	265	1	2	3	5	5		13						3	14	12	4	4	13
VALID CASES	224	3728	30	33	30	55	63	9	123						87	135	153	69	92	130
NUMBER OF RESPONDENTS	244	3993	31	35	33	60	68	9	136						90	149	165	73	96	143
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%
MEAN	8.72	8.34	8.67	8.45	8.93	8.44	8.90	9.22	8.63						8.84	8.62	8.84	8.41	8.43	8.90
p stat_(*=Sig @ p<=.05)		.001*	~	~	~.241	.349			~.433	~	~	~	~	~	.413	.310	.164	.114	.061	.090

[ASKED IF Q15 = YES]

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER ##	AS- IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q24 YES	98 33%	1933 40%*	10 26%~	8 17%~	14 32%~	34 47%*	27 35%	4 36%~	64 39%*	~	~	~	~	~	~	26 24%*	71 39%*	58 28%*	39 47%*	39 32%	58 34%
NO	199 67%	2928 60%*	28 74%~	38 83%~	30 68%~	38 53%*	51 65%	7 64%~	100 61%*	~	~	~	~	~	~	81 76%*	113 61%*	148 72%*	44 53%*	83 68%	111 66%
NOT ANSWERED	13	221														1		1		1	
VALID CASES	297	4861	38	46	44	72	78	11	164							107	184	206	83	122	169
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164							108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%



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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			PAN-	GOOD	FAIR			
									AMER	ILLND	NATV	OTHR	MUL-	IC	IC	&	&			
									WHTE	##	##	##	##	##	TI##	GOOD	POOR	MALE		
																		MALE		
Q25																				
NEVER	5	110			1	3	1		3						5	3	2	3	2	
	5%	6%	~	~	8%~	9%~	4%~	~	5%~	~	~	~	~	~	7%~	5%~	5%~	8%~	4%~	
SOMETIMES	23	323	3		2	10	6	1	13						9	13	7	15	13	9
	24%	17%	30%~	~	17%~	30%~	22%~	25%~	21%~	~	~	~	~	~	35%~	19%~	13%~	39%~	33%~	16%~
USUALLY	26	543	2	4	4	11	5		20						3	23	20	6	11	15
	27%	29%	20%~	50%~	33%~	33%~	19%~	~	33%~	~	~	~	~	~	12%~	34%~	36%~	16%~	28%~	27%~
ALWAYS	41	893	5	4	5	9	15	3	25						14	27	26	15	12	29
	43%	48%	50%~	50%~	42%~	27%~	56%~	75%~	41%~	~	~	~	~	~	54%~	40%~	46%~	39%~	31%~	53%~
#ALWAYS + USUALLY (NET)	67	1436	7	8	9	20	20	3	45						17	50	46	21	23	44
	71%	77%	70%~	100%~	75%~	61%~	74%~	75%~	74%~	~	~	~	~	~	65%~	74%~	82%~	55%~	59%~	80%~
TOP BOX SCORE	41	893	5	4	5	9	15	3	25						14	27	26	15	12	29
	43%	48%	50%~	50%~	42%~	27%~	56%~	75%~	41%~	~	~	~	~	~	54%~	40%~	46%~	39%~	31%~	53%~
NOT ANSWERED	3	64			2	1			3						3	2	1			3
VALID CASES	95	1869	10	8	12	33	27	4	61						26	68	56	38	39	55
NUMBER OF RESPONDENTS	98	1933	10	8	14	34	27	4	64						26	71	58	39	39	58
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER				
	OT1	OT2												ITY	STATUS	MALE	MALE				
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	AFR-	AS-	HAW/	IND/			HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	##	##	##	##	##	TI##	IC	IC	&	&		
																GOOD	POOR	MALE	FE-		
Q26																					
NONE	4	77	1		1	1	1		3						4	3	1	2	2		
	4%	4%	10%~	~	8%~	3%~	4%~	~	5%~	~	~	~	~	~	~	6%~	5%~	3%~	5%~	4%~	
1 SPECIALIST	61	991	9	7	6	18	17	3	38						18	42	41	19	28	32	
	65%	53%*	90%~	88%~	50%~	56%~	63%~	75%~	63%~	~	~	~	~	~	~	69%~	63%~	73%~	51%~	72%~	59%~
2	17	498		1	2	6	7	1	10						6	11	11	6	8	9	
	18%	27%*	~	13%~	17%~	19%~	26%~	25%~	17%~	~	~	~	~	~	~	23%~	16%~	20%~	16%~	21%~	17%~
3	8	191			2	4	2		6						2	6	1	7	1	7	
	9%	10%	~	~	17%~	13%~	7%~	~	10%~	~	~	~	~	~	~	8%~	9%~	2%~	19%~	3%~	13%~
4	3	64			1	2			2							3		3		3	
	3%	3%	~	~	8%~	6%~	~	~	3%~	~	~	~	~	~	~	~	4%~	~	8%~	~	6%~
5 OR MORE SPECIALISTS	1	45				1			1							1		1		1	
	1%	2%	~	~	~	3%~	~	~	2%~	~	~	~	~	~	~	~	1%~	~	3%~	~	2%~
NOT ANSWERED	4	67			2	2			4							4	2	2		4	
VALID CASES	94	1866	10	8	12	32	27	4	60						26	67	56	37	39	54	
NUMBER OF RESPONDENTS	98	1933	10	8	14	34	27	4	64						26	71	58	39	39	58	
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	

[ASKED IF Q24 = YES]

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

	BANT OT1	BANT OT2	AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER				
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q27 WORST SPECIALIST POSSIBLE		13 0.7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
01	2 2%	14 0.8%	~	~	~	1 3%	1 4%	2 4%	~	~	~	~	~	~	2 3%	2 4%	1 3%	1 2%	~	
02	2 2%	12 0.7%	~	~	1 9%	~	1 4%	2 4%	~	~	~	~	~	~	2 3%	2 6%	1 3%	1 2%	~	
03		27 2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
04		22 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
05	4 4%	83 5%	~	~	~	1 3%	3 12%	3 5%	~	~	~	~	~	~	1 4%	3 5%	1 2%	3 8%	3 8%	1 2%
06	5 6%	68 4%	1 11%	1 13%	1 9%	2 6%	~	3 5%	~	~	~	~	~	~	1 4%	4 6%	4 8%	1 3%	2 5%	3 6%
07	6 7%	157 9%	~	1 13%	~	3 10%	2 8%	3 5%	~	~	~	~	~	~	2 8%	4 6%	3 6%	3 8%	4 11%	2 4%
08	14 16%	318 18%	1 11%	2 25%	4 36%	5 16%	1 4%	1 25%	8 14%	~	~	~	~	~	4 15%	10 16%	6 11%	8 22%	3 8%	11 21%
09	19 21%	315 18%	1 11%	1 13%	2 18%	9 29%	6 23%	~	15 26%	~	~	~	~	~	4 15%	15 24%	11 21%	8 22%	9 24%	10 19%
BEST SPECIALIST POSSIBLE	38 42%	742 42%	6 67%	3 38%	3 27%	10 32%	12 46%	3 75%	21 37%	~	~	~	~	~	14 54%	23 37%	26 49%	11 31%	14 38%	23 44%
#8-10 (NET)	71 79%	1375 78%	8 89%	6 75%	9 82%	24 77%	19 73%	4 100%	44 77%	~	~	~	~	~	22 85%	48 76%	43 81%	27 75%	26 70%	44 85%

Continued

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER ##	AS- IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
9-10 (NET)	57 63%	1057 60%	7 24	4 34	5 44	19 54	18 64	3 OVER	36 63%~	~	~	~	~	~	18 69%~	38 60%~	37 70%~	19 53%~	23 62%~	33 63%~
NOT ANSWERED		18																		
VALID CASES	90	1771	9	8	11	31	26	4	57						26	63	53	36	37	52
NUMBER OF RESPONDENTS	90	1789	9	8	11	31	26	4	57						26	63	53	36	37	52
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%
MEAN	8.46	8.43	9.22	8.50	8.00	8.39	8.23	9.50	8.23						8.96	8.22	8.66	8.11	8.19	8.62
p stat_(*=Sig @ p<=.05)		.902	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	VERY GOOD & POOR	MALE	FE-MALE	
Q28 YES	64 22%	886 18%	6 16%~	6 13%~	15 34%~	13 18%	23 29%	1 9%~	42 26%	~	~	~	~	~	~	16 15%*	48 26%*	46 22%	17 20%	27 22%	37 22%
NO	231 78%	3943 82%	32 84%~	39 87%~	29 66%~	59 82%	55 71%	10 91%~	121 74%	~	~	~	~	~	~	91 85%*	135 74%*	159 78%	66 80%	94 78%	132 78%
NOT ANSWERED	15	253	1						1						1	1	1	1	1	1	
VALID CASES	295	4829	38	45	44	72	78	11	163							107	183	205	83	121	169
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164							108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR AMER ##	AS- IAN ##	NATV ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	MALE	FE- MALE
Q29 NEVER	8 13%	78 9%	2 ~ 33%	1 7%	2 15%	3 14%	4 ~ 10%	4 10%	~	~	~	~	~	~	1 6%	7 15%	5 11%	3 18%	6 22%	2 6%
SOMETIMES	20 32%	290 33%	1 17%	1 17%	5 33%	6 46%	7 32%	15 37%	~	~	~	~	~	~	4 25%	16 34%	15 33%	5 29%	6 22%	14 39%
USUALLY	22 35%	294 34%	2 33%	2 33%	7 47%	5 38%	6 27%	14 34%	~	~	~	~	~	~	7 44%	15 32%	17 38%	5 29%	12 44%	10 28%
ALWAYS	13 21%	204 24%	3 50%	1 17%	2 13%	6 27%	1 100%	8 20%	~	~	~	~	~	~	4 25%	9 19%	8 18%	4 24%	3 11%	10 28%
#ALWAYS + USUALLY (NET)	35 56%	498 58%	5 83%	3 50%	9 60%	5 38%	12 55%	1 100%	22 54%	~	~	~	~	~	11 69%	24 51%	25 56%	9 53%	15 56%	20 56%
TOP BOX SCORE	13 21%	204 24%	3 50%	1 17%	2 13%	6 27%	1 100%	8 20%	~	~	~	~	~	~	4 25%	9 19%	8 18%	4 24%	3 11%	10 28%
NOT ANSWERED	1	20				1		1							1	1				1
VALID CASES	63	866	6	6	15	13	22	1	41						16	47	45	17	27	36
NUMBER OF RESPONDENTS	64	886	6	6	15	13	23	1	42						16	48	46	17	27	37
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2																			
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER						NOT	EX &			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/				HIS-	HIS-	VERY			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK				PAN-	PAN-	&	&		
									AMER		ILND	NATV	OTHR	MUL-	IC	IC	GOOD	FAIR			
									WHTE	##	##	##	##	##	TI##			GOOD	POOR		
																			MALE		
																			MALE		
Q30																					
YES	87	1269	12	14	16	23	19	1	35							45	41	60	25	33	53
	30%	26%	32%~	31%~	36%~	33%	24%	11%~	22%*	~	~	~	~	~	~	42%*	23%*	30%	31%	28%	32%
NO	203	3524	26	31	28	47	59	8	126							61	139	143	56	86	114
	70%	74%	68%~	69%~	64%~	67%	76%	89%~	78%*	~	~	~	~	~	~	58%*	77%*	70%	69%	72%	68%
NOT ANSWERED	20	289		1		2		2	3							2	4	3	3	3	3
VALID CASES	290	4793	38	45	44	70	78	9	161							106	180	203	81	119	167
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164							108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q31 NEVER	1 1%	39 3%	~	~	~	5%	~	~	~	~	~	~	~	~	~	1 3%	1 4%	~	~	1 2%
SOMETIMES	17 20%	212 17%	3 25%	1 7%	4 25%	6 27%	3 18%	6 18%	~	~	~	~	~	11 25%	6 15%	8 14%	9 38%	8 24%	9 18%	
USUALLY	29 35%	361 29%	4 33%	6 43%	4 25%	9 41%	4 24%	10 30%	~	~	~	~	~	17 39%	11 28%	20 34%	7 29%	12 36%	16 32%	
ALWAYS	37 44%	619 50%	5 42%	7 50%	8 50%	6 27%	10 59%	1 52%	~	~	~	~	~	16 36%	21 54%	30 52%	7 29%	13 39%	24 48%	
#ALWAYS + USUALLY (NET)	66 79%	980 80%	9 75%	13 93%	12 75%	15 68%	14 82%	1 82%	~	~	~	~	~	33 75%	32 82%	50 86%	14 58%	25 76%	40 80%	
TOP BOX SCORE	37 44%	619 50%	5 42%	7 50%	8 50%	6 27%	10 59%	1 52%	~	~	~	~	~	16 36%	21 54%	30 52%	7 29%	13 39%	24 48%	
NOT ANSWERED	3	38				1	2	2						1	2	2	1			3
VALID CASES	84	1231	12	14	16	22	17	1	33					44	39	58	24	33	50	
NUMBER OF RESPONDENTS	87	1269	12	14	16	23	19	1	35					45	41	60	25	33	53	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	

[ASKED IF Q30 = YES]



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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER										
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/		NOT	VERY						
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK		HIS-	HIS-	GOOD	FAIR				
									AMER		ILND	NATV	OTHR	MUL-	IC	IC	&	&	FE-		
									WHTE	##	##	##	##	##	TI##			GOOD	POOR	MALE	MALE
Q32																					
NEVER		16																			
		1%																			
SOMETIMES	5	61			1	3	1		1							4	1	2	3	2	3
	6%	5%			6%	14%	6%		3%							9%	3%	3%	13%	6%	6%
USUALLY	17	224	4	2	4	3	3		8							9	8	12	5	8	9
	20%	18%	33%	14%	25%	14%	18%		24%							21%	21%	21%	22%	25%	18%
ALWAYS	61	929	8	12	11	15	13	1	24							30	30	44	15	22	38
	73%	76%	67%	86%	69%	71%	76%	100%	73%							70%	77%	76%	65%	69%	76%
#ALWAYS + USUALLY (NET)	78	1153	12	14	15	18	16	1	32							39	38	56	20	30	47
	94%	94%	100%	100%	94%	86%	94%	100%	97%							91%	97%	97%	87%	94%	94%
TOP BOX SCORE	61	929	8	12	11	15	13	1	24							30	30	44	15	22	38
	73%	76%	67%	86%	69%	71%	76%	100%	73%							70%	77%	76%	65%	69%	76%
NOT ANSWERED	4	39			2	2			2							2	2	2	2	1	3
VALID CASES	83	1230	12	14	16	21	17	1	33							43	39	58	23	32	50
NUMBER OF RESPONDENTS	87	1269	12	14	16	23	19	1	35							45	41	60	25	33	53
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/			HIS-	HIS-	VERY	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	PAN-	PAN-	&	&		
									AMER					IC	IC	GOOD	POOR	MALE	MALE	
Q33																				
YES	96	1787	12	15	17	18	28	3	45						42	52	65	28	41	53
	34%	37%	35%~	34%~	39%~	26%	37%	27%~	28%*	~	~	~	~	~	42%*	29%*	33%	34%	35%	33%
NO	188	2987	22	29	27	51	48	8	114						59	127	131	54	77	109
	66%	63%	65%~	66%~	61%~	74%	63%	73%~	72%*	~	~	~	~	~	58%*	71%*	67%	66%	65%	67%
NOT ANSWERED	26	308	4	2		3	2		5						7	5	10	2	4	8
VALID CASES	284	4774	34	44	44	69	76	11	159						101	179	196	82	118	162
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
	OT1	OT2	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 PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI ##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE		
PQ34	PCG	OHP	18	25	35	45	55	65														
NEVER	TOT	TOT	24	34	44	54	64	OVER	WHTE	##	##	##	##	##	TI##	IC	IC	GOOD	FAIR	POOR	MALE	MALE
NEVER	5	91		1		2	2		2						2	3	2	3		1	4	
	2%	2%		~ 2%	~	3%	3%		1%	~	~	~	~	~	~ 2%	2%	1%	4%		0.9%	3%	
SOMETIMES	17	301	2	4	4	3	3		9						7	9	11	5		9	7	
	6%	6%	6%~	9%~	9%~	4%	4%		6%	~	~	~	~	~	7%	5%	6%	6%		8%	4%	
USUALLY	34	677	4	5	7	8	7	2	17						14	20	22	12		17	17	
	12%	14%	12%~	11%~	16%~	12%	9%	20%~	11%	~	~	~	~	~	14%	11%	11%	15%		15%	11%	
ALWAYS	222	3637	28	34	32	55	62	8	128						76	144	158	60		89	131	
	80%	77%	82%~	77%~	74%~	81%	84%	80%~	82%	~	~	~	~	~	77%	82%	82%	75%		77%	82%	
#ALWAYS + USUALLY (NET)	256	4314	32	39	39	63	69	10	145						90	164	180	72		106	148	
	92%	92%	94%~	89%~	91%~	93%	93%	100%~	93%	~	~	~	~	~	91%	93%	93%	90%		91%	93%	
TOP BOX SCORE	222	3637	28	34	32	55	62	8	128						76	144	158	60		89	131	
	80%	77%	82%~	77%~	74%~	81%	84%	80%~	82%	~	~	~	~	~	77%	82%	82%	75%		77%	82%	
NOT ANSWERED	6	68			1	1	2	1	3						2	3	3	2		2	3	
VALID CASES	278	4706	34	44	43	68	74	10	156						99	176	193	80		116	159	
NUMBER OF RESPONDENTS	284	4774	34	44	44	69	76	11	159						101	179	196	82		118	162	
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%		100%	100%	

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

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

	BANT OT1	BANT OT2	AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER				
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	MALE	FE- MALE
Q35 WORST HEALTH PLAN POSSIBLE	1 0.4%	33 0.7%	~	~	~	1%	~	~	~	~	~	~	~	~	~	1	1	~	1	~
01	3 1%	31 0.7%	~	~	2	~	1	~	~	~	~	~	~	~	2	1	2	1	2	1
02	2 0.7%	51 1%	1	~	~	~	1	~	~	~	~	~	~	~	2	1	1	1	1	1
03	2 0.7%	61 1%	~	~	2	1	~	~	~	~	~	~	~	~	2	1	1	1	1	1
04	8 3%	105 2%	~	3	1	2	1	1	~	~	~	~	~	~	8	5	3	4	4	4
05	19 7%	381 8%	2	4	~	7	6	~	~	~	~	~	~	~	6	13	11	8	10	9
06	12 4%	291 6%	1	3	2	4	2	~	~	~	~	~	~	~	1	11	7	5	4	8
07	19 7%	602 13%*	3	5	2	5	3	~	~	~	~	~	~	~	5	13	14	4	8	10
08	58 21%	920 20%	6	5	14	11	16	4	~	~	~	~	~	~	14	43	45	12	20	37
09	42 15%	736 16%	11	5	6	10	9	1	~	~	~	~	~	~	16	26	30	12	18	24
BEST HEALTH PLAN POSSIBLE	112 40%	1385 30%*	13	15	15	26	35	5	~	~	~	~	~	~	59	51	77	31	43	67
#8-10 (NET)	212 76%	3041 66%*	30	25	35	47	60	10	~	~	~	~	~	~	89	120	152	55	81	128

Continued

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER ##	AS- IAN ##	NATV ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
9-10 (NET)	154 55%	2121 46%*	24 65%~	20 50%~	21 49%~	36 54%	44 59%	6 55%~	69 45%*	~	~	~	~	~	75 73%*	77 45%*	107 55%	43 55%	61 54%	91 56%
NOT ANSWERED	32	486	1	6	1	5	4		11						5	13	12	6	10	8
VALID CASES	278	4596	37	40	43	67	74	11	153						103	171	194	78	112	162
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%
MEAN	8.30	7.93	8.54	8.00	8.16	8.10	8.50	8.64	7.94						8.92	7.91	8.36	8.08	8.08	8.44
p stat_(*=Sig @ p<=.05)		.002*	~	~	~.399	.320		~.001*	~	~	~	~	~	~.000*	.000*	.463	.290	.163	.195	

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35A YES	15 5%	599 12%*	~	~	7%~	7%	6%	9%~	10 6%	~	~	~	~	~	~	3 3%	11 6%	3 1%*	11 14%*	7 6%	7 4%
NO	276 95%	4210 88%*	100%~	100%~	93%~	93%	94%	91%~	153 94%	~	~	~	~	~	~	101 97%	171 94%	200 99%*	70 86%*	112 94%	160 96%
NOT ANSWERED	19	273		2	2	1			1							4	2	3	3	3	3
VALID CASES	291	4809	38	44	42	71	78	11	163							104	182	203	81	119	167
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164							108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER								
	OT1	OT2	18	25	35	45	55	65	AND	BLCK	AS-	NATV	AMER												
	PCG	OHP	TO	TO	TO	TO	TO	AND	OR	AFR-	IAN	ILND	NATV	ALSK	OTHR	MUL-	HIS-	HIS-	NOT	VERY	GOOD	FAIR	FE-		
	TOT	TOT	TO	TO	TO	TO	TO	AND	AMER	IAN	ILND	NATV	ALSK	OTHR	MUL-	IC	IC	PAN-	PAN-	&	&	GOOD	POOR	MALE	MALE
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	##	##	##	##	##	TI##	IC	IC	IC	IC	GOOD	POOR	MALE	MALE	MALE	MALE
Q35B																									
NEVER	3	90			1	2			3								3			1	2	1	2		
	20%	16%	~	~	33%	40%	~	~	30%	~	~	~	~	~	~	~	~	~	27%	33%	18%	14%	29%	~	~
SOMETIMES	1	83			1												1			1			1		
	7%	15%	~	~	~	20%	~	~	~	~	~	~	~	~	~	~	~	~	9%	~	9%	~	14%	~	~
USUALLY	2	129			1	1			1								1	1		2		1	1		
	13%	23%	~	~	33%	~	20%	~	10%	~	~	~	~	~	~	~	33%	9%	~	18%	~	14%	14%	~	~
ALWAYS	9	262			1	2	4	1	6								2	6		2	6	5	3		
	60%	46%	~	~	33%	40%	80%	100%	60%	~	~	~	~	~	~	~	67%	55%	~	67%	55%	71%	43%	~	~
#ALWAYS + USUALLY (NET)	11	391			2	2	5	1	7								3	7		2	8	6	4		
	73%	69%	~	~	67%	40%	100%	100%	70%	~	~	~	~	~	~	~	100%	64%	~	67%	73%	86%	57%	~	~
TOP BOX SCORE	9	262			1	2	4	1	6								2	6		2	6	5	3		
	60%	46%	~	~	33%	40%	80%	100%	60%	~	~	~	~	~	~	~	67%	55%	~	67%	55%	71%	43%	~	~
NOT ANSWERED		35																							
VALID CASES	15	564			3	5	5	1	10								3	11		3	11	7	7		
NUMBER OF RESPONDENTS	15	599			3	5	5	1	10								3	11		3	11	7	7		
	100%	100%			100%	100%	100%	100%	100%								100%	100%		100%	100%	100%	100%		

[ASKED IF Q35A = YES]

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

	BANT OT1	BANT OT2	AGE					RACE					ETHNIC-ITY	HEALTH STATUS		GENDER				
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL-TI ##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	FE-MALE MALE		
Q35C YES	37 13%	759 16%	2 6%~	2 4%~	7 16%~	13 19%	11 15%	24 15%	~	~	~	~	~	~	8 8%*	28 16%	19 10%*	17 22%*	10 9%	26 16%
NO	247 87%	3989 84%	34 94%~	43 96%~	36 84%~	56 81%	63 85%	10 100%~	136 85%	~	~	~	~	~	92 92%*	151 84%	180 90%*	61 78%*	106 91%	137 84%
NOT ANSWERED	26	334	2	1	1	3	4	1	4						8	5	7	6	6	7
VALID CASES	284	4748	36	45	43	69	74	10	160						100	179	199	78	116	163
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%



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

	BANT	BANT	AGE					RACE					ETHNIC-	HEALTH	GENDER					
	OT1	OT2										ITY	STATUS							
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER		NOT	EX &						
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/		VERY							
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									##	##	##	##	##	TI##	IC	IC	&	&	MALE	MALE
Q35D																				
NEVER	3	121				2	1		3						3	1	2		3	
	9%	17%	~	~	~	17%	9%	~	13%	~	~	~	~	~	~	12%	6%	13%	~	13%
SOMETIMES	10	129			3	4	3		5						2	8	6	4	2	8
	29%	18%	~	~	50%	33%	27%	~	22%	~	~	~	~	~	29%	31%	33%	27%	20%	35%
USUALLY	12	170	2		3	3	3		9						3	9	5	7	6	6
	35%	23%	~100%	~	50%	25%	27%	~	39%	~	~	~	~	~	43%	35%	28%	47%	60%	26%
ALWAYS	9	308		1		3	4		6						2	6	6	2	2	6
	26%	42%	~	100%	~	25%	36%	~	26%	~	~	~	~	~	29%	23%	33%	13%	20%	26%
#ALWAYS + USUALLY (NET)	21	478	2	1	3	6	7		15						5	15	11	9	8	12
	62%	66%	~100%	~100%	50%	50%	64%	~	65%	~	~	~	~	~	71%	58%	61%	60%	80%	52%
TOP BOX SCORE	9	308		1		3	4		6						2	6	6	2	2	6
	26%	42%	~	100%	~	25%	36%	~	26%	~	~	~	~	~	29%	23%	33%	13%	20%	26%
NOT ANSWERED	3	31		1	1	1			1						1	2	1	2		3
VALID CASES	34	728	2	1	6	12	11		23						7	26	18	15	10	23
NUMBER OF RESPONDENTS	37	759	2	2	7	13	11		24						8	28	19	17	10	26
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q35C = YES]

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI ##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE	
Q35E	PCG TOT ADULT	OHP TOT ADULT	18	25	35	45	55	65													
ALWAYS	10 4%	178 4%	~	5%~	2%~	3%	5%	~0.6%*	~	~	~	~	~	~	~	7%	1%*	4%	1%	4%	2%
USUALLY	13 5%	193 4%	9%~	2%~	5%~	6%	4%	~	~	~	~	~	~	~	~	7%	3%	2%*	11%*	5%	4%
SOMETIMES	37 13%	804 17%	17%~	18%~	21%~	13%	5%*	9%~	~	~	~	~	~	~	~	19%*	10%	13%	14%	14%	13%
NEVER	221 79%	3575 75%	74%~	75%~	71%~	78%	86%	91%~	~	~	~	~	~	~	~	67%*	85%*	81%	73%	77%	80%
#NEVER + SOMETIMES (NET)	258 92%	4379 92%	91%~	93%~	93%~	91%	91%	100%~	~	~	~	~	~	~	~	86%*	96%*	94%*	87%	90%	93%
TOP BOX SCORE	221 79%	3575 75%	74%~	75%~	71%~	78%	86%	91%~	~	~	~	~	~	~	~	67%*	85%*	81%	73%	77%	80%
NOT ANSWERED	29	332	3	2	2	4	2	3								8	6	9	5	7	7
VALID CASES	281	4750	35	44	42	68	76	11	161							100	178	197	79	115	163
NUMBER OF RESPONDENTS	310 100%	5082 100%	38 100%	46 100%	44 100%	72 100%	78 100%	11 100%	164 100%							108 100%	184 100%	206 100%	84 100%	122 100%	170 100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	PAN-	PAN-	&	&	FE-		
									WHTE	##	##	##	##	##	TI##	IC	IC	GOOD	POOR	MALE	MALE
Q35F																					
ALWAYS	5	66	1			2	2		3						1	4	2	3	4	1	
	2%	1%	3%~	~	~	3%	3%	~	2%	~	~	~	~	~	1%	2%	1%	4%	3%	0.6%	
USUALLY	4	106			1	1	2		2						1	3	1	3		4	
	1%	2%	~	~	2%~	1%	3%	~	1%	~	~	~	~	~	1%	2%	0.5%	4%	~	2%*	
SOMETIMES	27	672	2	9	7	7	1	1	18						8	19	19	8	7	20	
	10%	14%*	6%~	20%~	17%~	10%	1%*	9%~	11%	~	~	~	~	~	8%	11%	10%	10%	6%	12%	
NEVER	245	3911	32	35	33	58	72	10	138						90	152	174	66	105	137	
	87%	82%*	91%~	80%~	80%~	85%	94%*	91%~	86%	~	~	~	~	~	90%	85%	89%	83%	91%	85%	
#NEVER + SOMETIMES (NET)	272	4583	34	44	40	65	73	11	156						98	171	193	74	112	157	
	97%	96%	97%~	100%~	98%~	96%	95%	100%~	97%	~	~	~	~	~	98%	96%	98%	93%	97%	97%	
TOP BOX SCORE	245	3911	32	35	33	58	72	10	138						90	152	174	66	105	137	
	87%	82%*	91%~	80%~	80%~	85%	94%*	91%~	86%	~	~	~	~	~	90%	85%	89%	83%	91%	85%	
NOT ANSWERED	29	327	3	2	3	4	1		3						8	6	10	4	6	8	
VALID CASES	281	4755	35	44	41	68	77	11	161						100	178	196	80	116	162	
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170	
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	

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

	BANT OT1	BANT OT2	AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER	
	PCG TOT ADLDT	OHP TOT ADLDT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-##	NATV AS-IAN##	AMER HAW/ IND/ PAC ALSK ILND NATV##	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q35G ALWAYS	5 2%	55 1%	~	~	2%~	3%	3%	~0.6%	~	~	~	~	~	3% 2%	3% 2%	4% 1%	3% 0.6%	
USUALLY	4 1%	67 1%	~	2%~	5%~	1%	~	~	~	~	~	~	~	1% 2%	0.5% 4%	3% 1%	3% 0.6%	
SOMETIMES	21 7%	487 10%	~	11%~	12%~	12%	3%*	~	~	~	~	~	~	1%* 11%*	7% 9%	7% 13%	6% 8%	
NEVER	253 89%	4149 87%	100%~	87%~	81%~	84%	95%*100%~	89%	~	~	~	~	~	95%* 87%*	91% 85%	103% 149%	88% 91%	
#NEVER + SOMETIMES (NET)	274 97%	4636 97%	100%~	98%~	93%~	96%	97% 100%~	98%	~	~	~	~	~	96% 97%	98% 94%	110% 162%	94%* 99%*	
TOP BOX SCORE	253 89%	4149 87%	100%~	87%~	81%~	84%	95%*100%~	89%	~	~	~	~	~	95%* 87%*	91% 85%	103% 149%	88% 91%	
NOT ANSWERED	27	324	1	1	1	4	3	4						5 6	8 2	5 6		
VALID CASES	283	4758	37	45	43	68	75	11	160					103 178	198 82	117 164		
NUMBER OF RESPONDENTS	310 100%	5082 100%	38 100%	46 100%	44 100%	72 100%	78 100%	11 100%	164 100%					108 184 100% 100%	206 84 100% 100%	122 170 100% 100%		

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/			HIS-	HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK		PAN-	PAN-	GOOD	FAIR			
									AMER		ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	##	##	##	##	##	TI##		GOOD	POOR	MALE	MALE
Q35H																				
#YES DEFINITELY	216	3305	29	31	34	46	64	9	121						83	132	159	55	85	130
	77%	70%*	76%~	70%~	79%~	71%	84%	82%~	76%	~	~	~	~	~	82%	74%	81%*	67%*	73%	80%
YES SOMEWHAT	53	1110	9	12	7	13	10	2	32						14	39	32	21	28	25
	19%	24%*	24%~	27%~	16%~	20%	13%	18%~	20%	~	~	~	~	~	14%	22%	16%	26%	24%	15%
NO	11	300		1	2	6	2		6						4	7	5	6	4	7
	4%	6%*	~	2%~	5%~	9%	3%	~	4%	~	~	~	~	~	4%	4%	3%	7%	3%	4%
NOT ANSWERED	30	367		2	1	7	2		5						7	6	10	2	5	8
VALID CASES	280	4715	38	44	43	65	76	11	159						101	178	196	82	117	162
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE
Q35I YES	173 60%	2797 58%	27 71%	27 59%	27 63%	37 55%	48 62%	5 45%	90 56%	~	~	~	~	~	69 67%	103 57%	128 63%	42 53%	60 51%*	112 67%*
NO	113 40%	1986 42%	11 29%	19 41%	16 37%	30 45%	30 38%	6 55%	71 44%	~	~	~	~	~	34 33%	78 43%	75 37%	37 47%	58 49%*	54 33%*
NOT ANSWERED	24	299			1	5			3						5	3	3	5	4	4
VALID CASES	286	4783	38	46	43	67	78	11	161						103	181	203	79	118	166
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	FE-	
									WHTE	##	##	##	##	##	TI##					MALE	
Q35J																					
YES	118	1919	14	17	20	32	31	2	60						51	66	83	33	48	69	
	41%	40%	37%~	37%~	45%~	46%	40%	18%~	37%	~	~	~	~	~	48%	36%*	41%	40%	40%	41%	
NO	172	2885	24	29	24	37	46	9	102						55	116	121	49	73	98	
	59%	60%	63%~	63%~	55%~	54%	60%	82%~	63%	~	~	~	~	~	52%	64%*	59%	60%	60%	59%	
NOT ANSWERED	20	278				3	1		2						2	2	2	2	1	3	
VALID CASES	290	4804	38	46	44	69	77	11	162						106	182	204	82	121	167	
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170	
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI ##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q35K NEVER	3 3%	40 2%	1 7%	~	~	2 6%	~	1 2%	~	~	~	~	~	~	2 4%	1 2%	3 ~	9%	2 4%	1 1%
SOMETIMES	10 9%	150 8%	4 29%	~	1 5%	4 13%	1 3%	5 9%	~	~	~	~	~	~	5 10%	5 8%	6 7%	4 13%	3 6%	7 10%
USUALLY	31 27%	356 19%	1 7%	4 24%	6 30%	11 34%	8 28%	13 22%	~	~	~	~	~	~	16 31%	15 23%	19 23%	11 34%	11 23%	20 29%
ALWAYS	72 62%	1310 71%	8 57%	13 76%	13 65%	15 47%	20 69%	2 100%	39 67%	~	~	~	~	~	28 55%	43 67%	57 70%	14 44%	31 66%	40 59%
#ALWAYS + USUALLY (NET)	103 89%	1666 90%	9 64%	17 100%	19 95%	26 81%	28 97%	2 100%	52 90%	~	~	~	~	~	44 86%	58 91%	76 93%	25 78%	42 89%	60 88%
TOP BOX SCORE	72 62%	1310 71%	8 57%	13 76%	13 65%	15 47%	20 69%	2 100%	39 67%	~	~	~	~	~	28 55%	43 67%	57 70%	14 44%	31 66%	40 59%
NOT ANSWERED	2	63					2	2								2	1	1	1	1
VALID CASES	116	1856	14	17	20	32	29	2	58						51	64	82	32	47	68
NUMBER OF RESPONDENTS	118	1919	14	17	20	32	31	2	60						51	66	83	33	48	69
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%



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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER	AS- IAN	NATV ILND	AMER PAC ALSK	OTH	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE	
Q35L ALWAYS	34 27%	423 22%	4 21%	5 29%	6 32%	6 17%	12 44%	1 25%	16 27%	~	~	~	~	~	~	17 28%	17 27%	29 34%	4 11%	14 25%	20 30%
USUALLY	27 22%	375 20%	6 32%	3 18%	5 26%	5 14%	7 26%	~	12 20%	~	~	~	~	~	~	15 25%	12 19%	17 20%	10 28%	11 20%	16 24%
SOMETIMES	21 17%	377 20%	6 32%	2 12%	3 16%	9 25%	1 4%	~	6 10%	~	~	~	~	~	~	15 25%*	6 10%*	14 16%	7 19%	10 18%	11 16%
NEVER	42 34%	744 39%	3 16%	7 41%	5 26%	16 44%	7 26%	3 75%	25 42%	~	~	~	~	~	~	13 22%*	28 44%*	26 30%	15 42%	21 38%	20 30%
#NEVER + SOMETIMES (NET)	63 51%	1121 58%	9 47%	9 53%	8 42%	25 69%	8 30%	3 75%	31 53%	~	~	~	~	~	~	28 47%	34 54%	40 47%	22 61%	31 55%	31 46%
TOP BOX SCORE	42 34%	744 39%	3 16%	7 41%	5 26%	16 44%	7 26%	3 75%	25 42%	~	~	~	~	~	~	13 22%*	28 44%*	26 30%	15 42%	21 38%	20 30%
5	161	2747	19	27	25	33	49	7	102							43	118	117	43	63	98
NOT ANSWERED	25	416		2		3	2		3							5	3	3	5	3	5
VALID CASES	124	1919	19	17	19	36	27	4	59							60	63	86	36	56	67
NUMBER OF RESPONDENTS	310 100%	5082 100%	38 100%	46 100%	44 100%	72 100%	78 100%	11 100%	164 100%							108 100%	184 100%	206 100%	84 100%	122 100%	170 100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV ILND ##	AMER HAW/ IND/ PAC ALSK ##	OTHR ##	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q35M NEVER	39 32%	695 36%	5 25%~	6 38%~	2 13%~	13 43%~	12 40%~	1 17%~	20 32%	~	~	~	~	~	~	15 29%	24 35%	23 27%~	16 47%~	19 32%	20 33%
SOMETIMES	24 20%	351 18%	5 25%~	2 13%~	4 25%~	8 27%~	4 13%~	~	10 16%	~	~	~	~	~	~	14 27%	10 14%	17 20%~	7 21%~	10 17%	14 23%
USUALLY	24 20%	351 18%	6 30%~	3 19%~	3 19%~	4 13%~	5 17%~	2 33%~	12 19%	~	~	~	~	~	~	10 20%	14 20%	17 20%~	7 21%~	15 25%	9 15%
ALWAYS	34 28%	514 27%	4 20%~	5 31%~	7 44%~	5 17%~	9 30%~	3 50%~	20 32%	~	~	~	~	~	~	12 24%	21 30%	29 34%~	4 12%~	16 27%	17 28%
#ALWAYS + USUALLY (NET)	58 48%	865 45%	10 50%~	8 50%~	10 63%~	9 30%~	14 47%~	5 83%~	32 52%	~	~	~	~	~	~	22 43%	35 51%	46 53%~	11 32%~	31 52%	26 43%
TOP BOX SCORE	34 28%	514 27%	4 20%~	5 31%~	7 44%~	5 17%~	9 30%~	3 50%~	20 32%	~	~	~	~	~	~	12 24%	21 30%	29 34%~	4 12%~	16 27%	17 28%
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	165	2765	18	30	26	38	47	5	100							51	113	119	44	60	104
NOT ANSWERED	24	406			2	4	1		2							6	2	1	6	2	6
VALID CASES	121	1911	20	16	16	30	30	6	62							51	69	86	34	60	60
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164							108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER			
	PCG 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/PAC ALSK##	OTHR##	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	MALE	FE-MALE
Q35N																				
EXTREMELY DIFFICULT	13 5%	281 6%	2 ~ 5%	1 ~ 2%	6 ~ 11%	4 6%	~	10 7%	~	~	~	~	~	~	3 3%	10 6%	6 3%	7 11%	4 4%	9 6%
01	8 3%	112 3%	1 ~ 2%	1 ~ 2%	4 ~ 7%	2 3%	~	6 4%	~	~	~	~	~	~	1 1%	7 4%	6 3%	2 3%	4 4%	4 3%
02	5 2%	129 3%	2 ~ 5%	~	1 ~ 2%	2 3%	~	5 3%~	~	~	~	~	~	~	~	5 3%*	5 3%*	~	2 2%	3 2%
03	9 3%	164 4%	~	~	2 ~ 5%	4 ~ 7%	1 2%	1 10%~	5 3%	~	~	~	~	~	2 2%	6 4%	6 3%	2 3%	4 4%	4 3%
04	6 2%	138 3%	~	3 ~ 7%	1 ~ 2%	2 4%	~	~	3 2%	~	~	~	~	~	3 3%	3 2%	4 2%	2 3%	1 1%	5 3%
05	32 12%	547 12%	4 11%~	5 12%~	6 15%~	8 14%	7 11%	2 20%~	17 12%	~	~	~	~	~	13 14%	19 12%	23 13%	9 14%	12 12%	20 14%
06	22 8%	230 5%	6 17%~	1 2%~	7 17%~	4 7%	3 5%	1 10%~	12 8%	~	~	~	~	~	9 10%	13 8%	14 8%	8 12%	5 5%	17 12%*
07	17 6%	375 8%	2 6%~	~	3 ~ 7%	3 5%	5 8%	2 20%~	7 5%	~	~	~	~	~	8 9%	8 5%	8 4%	8 12%	8 8%	8 5%
09	78 29%	1161 26%	11 31%~	13 32%~	10 24%~	14 25%	14 22%	~	37 26%	~	~	~	~	~	21 23%	41 26%	49 27%	13 20%*	30 29%	32 22%*
EXTREMELY EASY	77 29%	1320 30%	12 34%~	14 34%~	10 24%~	10 18%*	26 41%*	4 40%~	41 29%	~	~	~	~	~	30 33%	47 30%	62 34%*	15 23%	33 32%	44 30%
#8-10 (NET)	155 58%	2481 56%	23 66%~	27 66%~	20 49%~	24 43%*	40 63%	4 40%~	78 55%	~	~	~	~	~	51 57%	88 55%	111 61%	28 42%*	63 61%	76 52%*
9-10 (NET)	155 58%	2481 56%	23 66%~	27 66%~	20 49%~	24 43%*	40 63%	4 40%~	78 55%	~	~	~	~	~	51 57%	88 55%	111 61%	28 42%*	63 61%	76 52%*

Continued

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER			
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL-TI ##	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & FAIR	EX & VERY GOOD & FAIR	POOR	FE-MALE	MALE
88	1	6			1			1							1		1		1		
NOT ANSWERED	42	619	3	5	3	15	14	1	20						18	24	23	17	18	24	
VALID CASES	267	4457	35	41	41	56	64	10	143						90	159	183	66	103	146	
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170	
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	
MEAN	7.31	7.14	8.26	7.44	7.17	6.02	7.55	7.30	6.94						7.59	7.01	7.46	6.55	7.48	7.04	
p stat_(*=Sig @ p<=.05)	.346		~	~	~.000*	.470		~.025*	~	~	~	~	~	~.253	.038*	.216	.016*	.476	.105		

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER				
	OT1	OT2	18	25	35	45	55	65	BLCK	AS-	NATV	AMER					EX &	VERY					
	PCG	OHP	TO	TO	TO	TO	TO	AND	OR	AFR-	IAN	ILND	NATV	ALSK	OTHR	MUL-	HIS-	HIS-	NOT	GOOD	FAIR		FE-
	TOT	TOT	TO	TO	TO	TO	TO	AND	AFR-	AMER	IAN	ILND	NATV	ALSK	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE	
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	##	##	##	##	##	##	TI##	IC	IC	GOOD	POOR	MALE	MALE	
Q36																							
EXCELLENT	34 12%	447 9%	3 8%	8 17%	10 23%	2 3%	10 13%		13 8%*	~	~	~	~	~	~	~	19 18%*	15 8%*	34 17%*		15 12%	19 11%	
VERY GOOD	83 29%	1140 24%	14 37%	16 35%	13 30%	16 22%	22 29%	2 18%	50 30%	~	~	~	~	~	~	~	25 24%	58 32%	83 40%	~	32 26%	51 30%	
GOOD	89 31%	1676 35%	16 42%	17 37%	9 21%	22 31%	22 29%	3 27%	55 34%	~	~	~	~	~	~	~	29 27%	60 33%	89 43%	~	40 33%	49 29%	
FAIR	63 22%	1110 23%	4 11%	5 11%	8 19%	26 36%*	13 17%	5 45%	30 18%	~	~	~	~	~	~	~	31 29%*	32 17%*		63 75%*	28 23%	35 21%	
POOR	21 7%	395 8%	1 3%	~	3 7%	6 8%	10 13%	1 9%	16 10%*	~	~	~	~	~	~	~	2 2%*	19 10%*		21 25%	7 6%	14 8%	
#EXCELLENT + VERY GOOD + GOOD (NET)	206 71%	3263 68%	33 87%	41 89%	32 74%	40 56%*	54 70%	5 45%	118 72%	~	~	~	~	~	~	~	73 69%	133 72%	206 100%	~	87 71%	119 71%	
NOT ANSWERED	20	314			1		1										2					2	
VALID CASES	290	4768	38	46	43	72	77	11	164								106	184	206	84	122	168	
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164								108	184	206	84	122	170	
	100%	100%	100%	100%	100%	100%	100%	100%	100%								100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI ##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	MALE	FE-MALE	
Q37	PCG TOT ADLT	OHP TOT ADLT	18	25	35	45	55	65													
EXCELLENT	52 18%	870 18%	7 19%~	13 28%~	8 18%~	8 11%*	13 17%	3 27%~	24 15%	~	~	~	~	~	~	21 20%	31 17%	43 21%*	7 8%*	27 22%	25 15%
VERY GOOD	76 26%	1189 25%	10 27%~	14 30%~	13 30%~	16 22%	22 28%	1 9%~	47 29%	~	~	~	~	~	~	24 23%	52 28%	70 34%*	6 7%*	35 29%	41 24%
GOOD	94 32%	1480 31%	14 38%~	12 26%~	16 36%~	30 42%	19 24%	2 18%~	51 31%	~	~	~	~	~	~	41 39%	53 29%	66 32%	28 34%	37 30%	57 34%
FAIR	51 18%	937 20%	5 14%~	5 11%~	4 9%~	13 18%	20 26%*	3 27%~	32 20%	~	~	~	~	~	~	18 17%	33 18%	20 10%*	31 37%*	19 16%	32 19%
POOR	17 6%	296 6%	1 3%~	2 4%~	3 7%~	5 7%	4 5%	2 18%~	10 6%	~	~	~	~	~	~	2 2%*	15 8%*	6 3%*	11 13%*	4 3%	13 8%
#EXCELLENT + VERY GOOD + GOOD (NET)	222 77%	3539 74%	31 84%~	39 85%~	37 84%~	54 75%	54 69%	6 55%~	122 74%	~	~	~	~	~	~	86 81%	136 74%	179 87%*	41 49%*	99 81%	123 73%
NOT ANSWERED	20	310	1												2		1	1			2
VALID CASES	290	4772	37	46	44	72	78	11	164							106	184	205	83	122	168
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164							108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				NOT	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			HIS-	HIS-	GOOD	FAIR		
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
Q38																				
#YES	109	1705	12	11	15	27	35	8	61						43	66	72	36	46	63
	39%	36%	36%	24%	36%	38%	45%	73%	38%	~	~	~	~	~	43%	36%	36%	44%	38%	39%
NO	173	2994	21	35	27	44	42	3	101						57	116	127	45	74	99
	61%	64%	64%	76%	64%	62%	55%	27%	62%	~	~	~	~	~	57%	64%	64%	56%	62%	61%
DON'T KNOW	7	99	4		2	1			2						5	2	5	2	2	5
NOT ANSWERED	21	284	1					1							3		2	1		3
VALID CASES	282	4699	33	46	42	71	77	11	162						100	182	199	81	120	162
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND PAC ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	VERY GOOD & FAIR & POOR	FE-MALE	FE-MALE	
Q39 EVERY DAY	40 14%	949 20%*	2 6%	6 13%~	3 7%~	15 21%	14 18%	37 23%*	~	~	~	~	~	~	1 1%*	39 21%*	28 14%	12 15%	18 15%	22 13%	
SOME DAYS	17 6%	436 9%*	1 3%~	2 4%~	4 10%~	4 6%	5 6%	1 9%~	11 7%	~	~	~	~	~	5 5%	12 7%	5 2%*	12 15%*	9 8%	8 5%	
NOT AT ALL	229 80%	3380 71%*	33 92%~	37 82%~	35 83%~	53 74%	59 76%	10 91%~	115 71%*	~	~	~	~	~	98 94%*	131 72%*	171 84%*	56 70%*	92 77%	137 82%	
DON'T KNOW	3	34	1		2				1						1	2	1	2	2	1	
NOT ANSWERED	21	283	1	1											3		1	2	1	2	
VALID CASES	286	4765	36	45	42	72	78	11	163						104	182	204	80	119	167	
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170	
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	



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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	PCG TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	MALE	FE-MALE	
Q40 NEVER	14 25%	367 27%		3 ~ 43%	5 71%	1 5%	5 26%	11 ~ 23%							2 33%	12 24%	10 31%	4 17%	8 30%	6 21%	
SOMETIMES	21 38%	331 24%	1 33%	2 29%	2 29%	10 53%	5 26%	1 100%	16 34%						4 67%	17 34%	9 28%	12 50%	11 41%	10 34%	
USUALLY	7 13%	212 16%				3 ~ 16%	4 21%	7 ~ 15%								7 ~ 14%	4 13%	3 13%	3 11%	4 14%	
ALWAYS	14 25%	455 33%	2 67%	2 29%		5 ~ 26%	5 26%	13 ~ 28%								14 ~ 28%	9 28%	5 21%	5 19%	9 31%	
#ALWAYS + USUALLY (NET)	21 38%	667 49%	2 67%	2 29%		8 ~ 42%	9 47%	20 ~ 43%								21 ~ 42%	13 41%	8 33%	8 30%	13 45%	
TOP BOX SCORE	14 25%	455 33%	2 67%	2 29%		5 ~ 26%	5 26%	13 ~ 28%								14 ~ 28%	9 28%	5 21%	5 19%	9 31%	
NOT ANSWERED		1 20		1				1								1	1			1	
VALID CASES	56	1365	3	7	7	19	19	1	47							6	50	32	24	27	29
NUMBER OF RESPONDENTS	57	1385	3	8	7	19	19	1	48							6	51	33	24	27	30
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q41 NEVER	25 44%	687 50%	1 33%	4 50%	5 71%	9 47%	6 32%	20 42%	~	~	~	~	~	~	3 50%	22 43%	16 48%	9 38%	15 56%	10 33%
SOMETIMES	17 30%	305 22%	~	2 25%	1 14%	5 26%	8 42%	1 29%	~	~	~	~	~	~	3 50%	14 27%	7 21%	10 42%	7 26%	10 33%
USUALLY	5 9%	152 11%	1 33%	1 13%	1 14%	2 11%	~	4 8%	~	~	~	~	~	~	~	5 10%	5 15%	~	2 7%	3 10%
ALWAYS	10 18%	223 16%	1 33%	1 13%	~	3 16%	5 26%	10 21%	~	~	~	~	~	~	10 20%	5 15%	5 21%	3 11%	7 23%	
#ALWAYS + USUALLY (NET)	15 26%	375 27%	2 67%	2 25%	1 14%	5 26%	5 26%	14 29%	~	~	~	~	~	~	15 29%	10 30%	5 21%	5 19%	10 33%	
TOP BOX SCORE	10 18%	223 16%	1 33%	1 13%	~	3 16%	5 26%	10 21%	~	~	~	~	~	~	10 20%	5 15%	5 21%	3 11%	7 23%	
NOT ANSWERED		18																		
VALID CASES	57	1367	3	8	7	19	19	1	48						6	51	33	24	27	30
NUMBER OF RESPONDENTS	57	1385	3	8	7	19	19	1	48						6	51	33	24	27	30
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	BANT	BANT	AGE						RACE						ETHNIC-ITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AMER	AS-IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL-TI	HIS-IC	NOT PAN-IC	EX & VERY GOOD	FAIR & POOR	MALE	FE-MALE
Q42 NEVER	32 56%	778 57%	1 33%~	4 50%~	4 57%~	14 74%~	9 47%~	27 56%~	~	~	~	~	~	~	3 50%~	29 57%~	18 55%~	14 58%~	17 63%~	15 50%~
SOMETIMES	11 19%	261 19%	~	2 25%~	2 29%~	2 11%~	5 26%~	8 17%~	~	~	~	~	~	~	3 50%~	8 16%~	6 18%~	5 21%~	4 15%~	7 23%~
USUALLY	7 12%	141 10%	~	2 25%~	1 14%~	2 11%~	1 5%~	7 15%~	~	~	~	~	~	~	~	7 14%~	4 12%~	3 13%~	3 11%~	4 13%~
ALWAYS	7 12%	175 13%	2 67%~	~	~	1 5%~	4 21%~	6 13%~	~	~	~	~	~	~	~	7 14%~	5 15%~	2 8%~	3 11%~	4 13%~
#ALWAYS + USUALLY (NET)	14 25%	316 23%	2 67%~	2 25%~	1 14%~	3 16%~	5 26%~	13 27%~	~	~	~	~	~	~	14 27%~	9 27%~	5 21%~	6 22%~	8 27%~	
TOP BOX SCORE	7 12%	175 13%	2 67%~	~	~	1 5%~	4 21%~	6 13%~	~	~	~	~	~	~	~	7 14%~	5 15%~	2 8%~	3 11%~	4 13%~
NOT ANSWERED		30																		
VALID CASES	57	1355	3	8	7	19	19	1	48						6	51	33	24	27	30
NUMBER OF RESPONDENTS	57	1385	3	8	7	19	19	1	48						6	51	33	24	27	30
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

Q43 DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER									
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	##	##	##	##	##	TI##			GOOD	POOR	
																		MALE	MALE	
Q43																				
YES	42	997	2	1	3	12	18	4	26						14	28	25	17	22	20
	15%	21%*	5%~	2%~	7%~	17%	23%*	36%~	16%	~	~	~	~	~	13%	15%	12%	20%	18%	12%
NO	247	3756	36	44	40	59	60	7	137						92	155	179	66	100	147
	85%	79%*	95%~	98%~	93%~	83%	77%*	64%~	84%	~	~	~	~	~	87%	85%	88%	80%	82%	88%
DON'T KNOW	2	42		1		1									2		2			2
NOT ANSWERED	19	287				1			1							1		1		1
VALID CASES	289	4753	38	45	43	71	78	11	163						106	183	204	83	122	167
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC/ALSK	OTHR	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE-MALE	
Q44	PCG	OHP	18	25	35	45	55	65													
YES	TOT	TOT	24	34	44	54	64	OVER	WHTE	##	##	##	##	##	TI##	IC	IC	GOOD	POOR	MALE	MALE
	ADLT	ADLT																			
YES	20	448			3	10	6	1	13						5	15	7	13	6	14	
	7%	10%	~	~	8%	15%*	8%	10%	8%	~	~	~	~	~	5%	9%	4%*	18%*	5%	9%	
NO	253	3956	36	44	37	57	67	9	141						95	158	191	60	110	143	
	93%	90%	100%	100%	93%	85%*	92%	90%	92%	~	~	~	~	~	95%	91%	96%*	82%*	95%	91%	
DON'T KNOW	17	377	1	1	4	5	5	1	10						6	11	7	10	4	13	
NOT ANSWERED	20	301	1	1											2		1	1	2		
VALID CASES	273	4404	36	44	40	67	73	10	154						100	173	198	73	116	157	
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170	
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			PAN-	PAN-	&	&		
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
Q45																				
YES	98	1716	6	11	10	24	40	5	61						28	70	67	30	46	52
	34%	36%	16%~	24%~	23%~	35%	51%*	45%~	37%	~	~	~	~	~	27%*	38%*	33%	38%	38%	31%
NO	190	3045	32	35	34	45	38	6	102						77	113	139	50	74	116
	66%	64%	84%~	76%~	77%~	65%	49%*	55%~	63%	~	~	~	~	~	73%*	62%*	67%	63%	62%	69%
NOT ANSWERED	22	321				3			1						3	1		4	2	2
VALID CASES	288	4761	38	46	44	69	78	11	163						105	183	206	80	120	168
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									WHTE	##	##	##	##	##	TI##	IC	IC	GOOD		
																		POOR		
																		MALE		
																		MALE		
Q46.1																				
YES	49	1102	1	2	3	17	21	4	27						19	30	29	20	17	32
	16%	22%*	3%~	4%~	7%~	24%	27%*	36%~	16%	~	~	~	~	~	18%	16%	14%	24%*	14%	19%
NO	261	3980	37	44	41	55	57	7	137						89	154	177	64	105	138
	84%	78%*	97%~	96%~	93%~	76%	73%*	64%~	84%	~	~	~	~	~	82%	84%	86%	76%*	86%	81%
VALID CASES	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	PAN-	PAN-	&	&			
									WHTE	##	##	##	##	##	TI##	IC	IC	GOOD	POOR	MALE	MALE
Q46.2																					
YES	57	1444	1	2	5	15	27	6	38						14	43	31	26	26	31	
	18%	28%*	3%~	4%~	11%~	21%	35%*	55%~	23%*	~	~	~	~	~	13%	23%*	15%*	31%*	21%	18%	
NO	253	3638	37	44	39	57	51	5	126						94	141	175	58	96	139	
	82%	72%*	97%~	96%~	89%~	79%	65%*	45%~	77%*	~	~	~	~	~	87%	77%*	85%*	69%*	79%	82%	
VALID CASES	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170	
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170	
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	



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

	BANT OT1	BANT OT2	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE		
Q46.3 YES	42 14%	826 16%	1 3%	5 11%	5 11%	15 21%	14 18%	1 9%	30 18%*	~	~	~	~	~	6 6%*	36 20%*	22 11%	20 24%*	17 14%	25 15%		
NO	268 86%	4256 84%	37 97%	41 89%	39 89%	57 79%	64 82%	10 91%	134 82%*	~	~	~	~	~	102 94%*	148 80%*	184 89%	64 76%*	105 86%	145 85%		
VALID CASES	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170		
NUMBER OF RESPONDENTS	310 100%	5082 100%	38 100%	46 100%	44 100%	72 100%	78 100%	11 100%	164 100%						108 100%	184 100%	206 100%	84 100%	122 100%	170 100%		

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									WHTE	##	##	##	##	##	TI##	IC	IC	GOOD		
																		POOR		
																		MALE		
																		MALE		
Q47.1																				
YES	7	211		1		4	2		3						1	6	5	2	3	4
	2%	4%	~	2%	~	6%	3%	~	2%	~	~	~	~	~	0.9%	3%	2%	2%	2%	2%
NO	303	4871	38	45	44	68	76	11	161						107	178	201	82	119	166
	98%	96%	100%	98%	100%	94%	97%	100%	98%	~	~	~	~	~	99%	97%	98%	98%	98%	98%
VALID CASES	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER				
	OT1	OT2												ITY	STATUS						
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY						
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR					
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD				
									WHTE	##	##	##	##	##	TI##	IC	IC	&			
																		&			
																		POOR			
																		MALE			
																		MALE			
Q47.2																					
YES	7	212		1	1	1	4		6						1	6	5	2	4	3	
	2%	4%		~	2%	2%	1%	5%	~	4%	~	~	~	~	~	0.9%	3%	2%	2%	3%	2%
NO	303	4870	38	45	43	71	74	11	158						107	178	201	82	118	167	
	98%	96%	100%	~	98%	~	98%	~	99%	95%	100%	~	96%	~	99%	97%	98%	98%	97%	98%	
VALID CASES	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170	
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170	
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									WHTE	##	##	##	##	##	TI##	IC	IC	&		
																		&		
																		POOR		
																		MALE		
																		MALE		
Q47.3																				
YES	6	195		1		3	1	1	3						2	4	5	1	1	5
	2%	4%*		~ 2%		~ 4%	1%	9%	2%						~ 2%	2%	2%	1%	0.8%	3%
NO	304	4887	38	45	44	69	77	10	161						106	180	201	83	121	165
	98%	96%*	100%	~ 98%	~ 100%	~ 96%	99%	91%	98%						~ 98%	98%	98%	99%	99%	97%
VALID CASES	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD POOR	MALE	FE- MALE
Q47.4 YES	48 15%	916 18%	2 5%~	3 7%~	4 9%~	22 31%*	12 15%	3 27%~	20 12%	~	~	~	~	~	~	24 22%*	24 13%	24 12%*	23 27%*	22 18%	26 15%
NO	262 85%	4166 82%	36 95%~	43 93%~	40 91%~	50 69%*	66 85%	8 73%~	144 88%	~	~	~	~	~	~	84 78%*	160 87%	182 88%*	61 73%*	100 82%	144 85%
VALID CASES	310	5082	38	46	44	72	78	11	164							108	184	206	84	122	170
NUMBER OF RESPONDENTS	310 100%	5082 100%	38 100%	46 100%	44 100%	72 100%	78 100%	11 100%	164 100%							108 100%	184 100%	206 100%	84 100%	122 100%	170 100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER									
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	EX &					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	##	##	##	##	##	TI##		GOOD	POOR	MALE	MALE
Q48																				
YES	74	1408	7	8	12	24	19	3	48						21	53	39	34	25	49
	26%	30%	19%~	18%~	28%~	33%	25%	27%~	29%	~	~	~	~	~	20%	29%	19%*	41%*	21%	29%
NO	212	3330	30	37	31	48	57	8	115						82	130	162	49	94	118
	74%	70%	81%~	82%~	72%~	67%	75%	73%~	71%	~	~	~	~	~	80%	71%	81%*	59%*	79%	71%
NOT ANSWERED	24	344	1	1	1		2		1						5	1	5	1	3	3
VALID CASES	286	4738	37	45	43	72	76	11	163						103	183	201	83	119	167
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2													ITY	STATUS				
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &	VERY			
	TOT	TOT	TO	TO	TO	TO	TO	AND	AFR-	AS-	HAW/	IND/			HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
Q49																				
YES	55	1187	3	8	10	20	12	2	41						9	46	29	26	18	37
	79%	88%	43%~	100%~	83%~	91%~	71%~	67%~	89%~	~	~	~	~	~	47%~	90%~	78%~	81%~	75%~	80%~
NO	15	167	4		2	2	5	1	5						10	5	8	6	6	9
	21%	12%	57%~		~ 17%~	9%~	29%~	33%~	11%~	~	~	~	~	~	53%~	10%~	22%~	19%~	25%~	20%~
NOT ANSWERED	4	54				2	2		2						2	2	2	2	1	3
VALID CASES	70	1354	7	8	12	22	17	3	46						19	51	37	32	24	46
NUMBER OF RESPONDENTS	74	1408	7	8	12	24	19	3	48						21	53	39	34	25	49
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q48 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER									
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	##	##	##	##	##	TI##		GOOD	POOR	MALE	MALE
Q50																				
YES	155	2988	11	16	18	44	55	9	111						40	115	86	69	59	96
	54%	63%*	30%~	36%~	42%~	61%	71%*	82%~	68%*	~	~	~	~	~	38%*	63%*	42%*	83%*	49%	57%
NO	133	1758	26	29	25	28	23	2	53						65	68	117	14	61	72
	46%	37%*	70%~	64%~	58%~	39%	29%*	18%~	32%*	~	~	~	~	~	62%*	37%*	58%*	17%*	51%	43%
NOT ANSWERED	22	336	1	1	1										3	1	3	1	2	2
VALID CASES	288	4746	37	45	43	72	78	11	164						105	183	203	83	120	168
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%



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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER		
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILLND	AMER IND/ ALSK	OTHR	MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE
Q51 YES	134 93%	2723 95%	7 78%~	13 87%~	16 89%~	36 95%~	53 98%*	8 89%~	99 93%~	~	~	~	~	~	31 94%~	103 93%~	73 89%*	61 98%*	51 96%	83 91%
NO	10 7%	155 5%	2 22%~	2 13%~	2 11%~	2 5%~	1 2%*	1 11%~	8 7%~	~	~	~	~	~	2 6%~	8 7%~	9 11%*	1 2%*	2 4%	8 9%
NOT ANSWERED	11	110	2	1		6	1		4						7	4	4	7	6	5
VALID CASES	144	2878	9	15	18	38	54	9	107						33	111	82	62	53	91
NUMBER OF RESPONDENTS	155 100%	2988 100%	11 100%	16 100%	18 100%	44 100%	55 100%	9 100%	111 100%						40 100%	115 100%	86 100%	69 100%	59 100%	96 100%

[ASKED IF Q50 = YES]

NQ52 WHAT IS YOUR AGE?

	BANT	BANT	AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLK OR AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/ALSK	OTHR	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD	FAIR & POOR	MALE	FE-MALE	
NQ52	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	##	##	##	##	##	TI##	IC	IC	GOOD	POOR	MALE	MALE
18 TO 24	42 14%	485 10%*	38 100%	~	~	~	~	~	10 6%*	~	~	~	~	~	~	26 24%*	12 7%*	33 16%	5 6%*	16 13%	22 13%
25 TO 34	49 16%	853 17%	~	46 ~100%	~	~	~	~	23 14%	~	~	~	~	~	~	20 19%	26 14%	41 20%*	5 6%*	16 13%	30 18%
35 TO 44	49 16%	805 16%	~	~	44 ~100%	~	~	~	23 14%	~	~	~	~	~	~	16 15%	29 16%	32 16%	12 14%	17 14%	28 16%
45 TO 54	80 26%	1048 21%*	~	~	~	72 ~100%	~	~	37 23%	~	~	~	~	~	~	28 26%	45 24%	41 20%*	32 38%*	29 24%	44 26%
55 TO 64	79 25%	1437 28%	~	~	~	~	78 ~100%	~	63 38%*	~	~	~	~	~	~	15 14%*	64 35%*	54 26%	24 29%	38 31%	41 24%
65 TO 74	8 3%	302 6%*	~	~	~	~	8 ~73%	~	7 4%*	~	~	~	~	~	~	1 0.9%	7 4%	4 2%	4 5%	5 4%	3 2%
75 OR OLDER	3 1%	152 3%*	~	~	~	~	3 ~27%	~	1 0.6%	~	~	~	~	~	~	2 2%	1 0.5%	1 0.5%	2 2%	1 0.8%	2 1%
VALID CASES	310	5082	38	46	44	72	78	11	164							108	184	206	84	122	170
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164							108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

NQ53 ARE YOU MALE OR FEMALE?

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH	GENDER	
	OT1	OT2													ITY	STATUS				
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			HIS-	HIS-	GOOD	FAIR		
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
NQ53																				
MALE	132	2039	16	16	17	28	37	6	66						46	76	87	35	122	
	43%	40%	42%~	35%~	39%~	39%	47%	55%~	40%	~	~	~	~	~	43%	41%	42%	42%	100%~	~
FEMALE	178	3043	22	30	27	44	41	5	98						62	108	119	49	170	
	57%	60%	58%~	65%~	61%~	61%	53%	45%~	60%	~	~	~	~	~	57%	59%	58%	58%	~100%~	
VALID CASES	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2																				
	PCG	OHP	18	25	35	45	55	65	BLK	NATV	AMER											
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/										
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	HIS-	HIS-	NOT	VERY	FAIR			
									AMER		ILND	NATV		TI##	IC	IC	GOOD	GOOD	POOR	MALE	MALE	
Q54																						
8TH GRADE OR LESS	42 15%	267 6%*	1 3%~	1 2%~	5 11%~	15 21%	13 17%	4 36%~	4 2%*	~	~	~	~	~	38 36%*	4 2%*	22 11%*	19 23%*	21 17%	21 13%		
SOME HIGH SCHOOL BUT DID NOT GRADUATE	24 8%	599 13%*	7 18%~	6 13%~	4 9%~	3 4%	3 4%*	1 9%~	10 6%	~	~	~	~	~	12 11%	12 7%	13 6%	11 14%	12 10%	12 7%		
HIGH SCHOOL GRADUATE OR GED	104 36%	1663 35%	15 39%~	18 39%~	10 23%~	31 44%	26 34%	4 36%~	68 41%*	~	~	~	~	~	32 30%	72 39%	70 34%	34 42%	50 41%	54 32%		
SOME COLLEGE OR 2-YEAR DEGREE	86 30%	1668 35%*	12 32%~	14 30%~	15 34%~	17 24%	26 34%	2 18%~	56 34%	~	~	~	~	~	21 20%*	65 35%*	69 33%*	16 20%*	29 24%	57 34%		
4-YEAR COLLEGE GRADUATE	27 9%	348 7%	3 8%~	6 13%~	9 20%~	3 4%*	6 8%	~	21 13%*	~	~	~	~	~	2 2%*	25 14%*	26 13%*	1 1%*	8 7%	19 11%		
MORE THAN 4-YEAR COLLEGE DEGREE	6 2%	201 4%*	~	1 2%~	1 2%~	1 1%	3 4%	~	5 3%	~	~	~	~	~	~	6 3%*	6 3%*	~	0.8%	1 3%	5	
NOT ANSWERED	21	336				2	1								3			3	1	2		
VALID CASES	289	4746	38	46	44	70	77	11	164						105	184	206	81	121	168		
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170		
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%		

Q55 ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/			HIS-	HIS-	VERY	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									AMER					TI##			GOOD	POOR	MALE	MALE
Q55																				
YES HISPANIC OR LATINO	108	571	26	20	15	27	14	3							108		73	33	46	62
	37%	12%*	68%~	43%~	34%~	38%	18%*	27%~	~	~	~	~	~	~	~100%~	~	35%	39%	38%	36%
NO NOT HISPANIC OR LATINO	184	4145	12	26	29	45	64	8	164						184		133	51	76	108
	63%	88%*	32%~	57%~	66%~	63%	82%*	73%~	~100%~	~	~	~	~	~	~100%~	~	65%	61%	62%	64%
NOT ANSWERED	18	366																		
VALID CASES	292	4716	38	46	44	72	78	11	164						108	184	206	84	122	170
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

Q56.1 WHAT IS YOUR RACE? RESPONSE: WHITE

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									WHTE	##	##	##	##	##	TI##	IC	IC	GOOD		
																		POOR		
																		MALE		
																		MALE		
Q56.1																				
YES	231	4120	30	34	32	54	70	9	164						60	171	169	61	97	134
	75%	81%*	79%~	74%~	73%~	75%	90%*	82%~	100%~	~	~	~	~	~	56%*	93%*	82%*	73%	80%	79%
NO	79	962	8	12	12	18	8	2							48	13	37	23	25	36
	25%	19%*	21%~	26%~	27%~	25%	10%*	18%~	~	~	~	~	~	~	44%*	7%*	18%*	27%	20%	21%
VALID CASES	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER	
	OT1	OT2												ITY	STATUS			
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &		
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR		
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	
									WHTE	##	##	##	##	##	TI##	IC	IC	GOOD
																	POOR	MALE
																	POOR	MALE
Q56.2																		
YES	2	85				1	1								2	2		2
	0.6%	2%	~	~	~	1%	1%	~	~	~	~	~	~	~	~	1%	1%	2%
NO	308	4997	38	46	44	71	77	11	164						108	182	204	84
	99%	98%	100%	100%	100%	99%	99%	100%	100%	~	~	~	~	~	100%	99%	99%	100%
VALID CASES	310	5082	38	46	44	72	78	11	164						108	184	206	84
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q56.3 WHAT IS YOUR RACE? RESPONSE: ASIAN

	BANT	BANT	AGE					RACE					ETHNIC-	HEALTH	GENDER				
	OT1	OT2										ITY	STATUS						
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER		NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/		VERY						
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK	HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	GOOD	POOR	MALE	MALE	
									WHTE	##	##	##	##	##	TI##	IC	IC		
Q56.3																			
YES	4	136			1	3								4	4		2	2	
	1%	3%	~	~	2%	4%	~	~	~	~	~	~	~	2%	2%	~	2%	1%	
NO	306	4946	38	46	43	69	78	11	164					108	180	202	84	120	168
	99%	97%	100%	100%	98%	96%	100%	100%	100%	~	~	~	~	100%	98%	98%	100%	98%	99%
VALID CASES	310	5082	38	46	44	72	78	11	164					108	184	206	84	122	170
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164					108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%



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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									##	##	##	##	##	TI##	IC	IC	&			
																	&			
																	POOR			
																	MALE			
																	MALE			
Q56.4																				
YES	3	40		1	1	1									1	2	3	1	2	
	1%	0.8%		~	2%~	2%~	1%								~0.9%	1%	1%	~0.8%	1%	
NO	307	5042	38	45	43	71	78	11	164						107	182	203	84	121	168
	99%	99%	100%~	98%~	98%~	99%	100%~	100%~	100%~						~99%	99%	99%~	100%~	99%	99%
VALID CASES	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER									
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	EX &					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	PAN-	PAN-	&	&		
									WHTE	##	##	##	##	##	TI##	IC	IC	GOOD	POOR	
																		MALE	MALE	
Q56.5																				
YES	9	313	2	1	2	4									2	7	6	3	6	3
	3%	6%*	5%~	2%~	5%~	6%	~	~	~	~	~	~	~	~	2%	4%	3%	4%	5%	2%
NO	301	4769	36	45	42	68	78	11	164						106	177	200	81	116	167
	97%	94%*	95%~	98%~	95%~	94%	100%	~100%	~100%	~	~	~	~	~	98%	96%	97%	96%	95%	98%
VALID CASES	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

Q56.6 WHAT IS YOUR RACE? RESPONSE: OTHER

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									WHTE	##	##	##	##	##	TI##	IC	IC	&	&	
																	GOOD	POOR	MALE	MALE
Q56.6																				
YES	18	278	4	5	3	5	1								10	8	13	5	8	10
	6%	5%	11%~	11%~	7%~	7%	1%*		~	~	~	~	~	~	9%	4%	6%	6%	7%	6%
NO	292	4804	34	41	41	67	77	11	164						98	176	193	79	114	160
	94%	95%	89%~	89%~	93%~	93%	99%*100%~	100%~	~	~	~	~	~	~	91%	96%	94%	94%	93%	94%
VALID CASES	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
NUMBER OF RESPONDENTS	310	5082	38	46	44	72	78	11	164						108	184	206	84	122	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

Q57 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	##	##	##	##	##	TI##		GOOD	POOR	MALE	MALE
Q57																				
YES	23	466	3	1	4	7	5	2	15						7	16	14	9	16	7
	10%	12%	13%~	3%~	13%~	13%	8%	25%~	11%	~	~	~	~	~	10%	11%	9%	13%	17%*	6%*
NO	197	3267	21	31	28	49	60	6	118						65	132	137	59	77	120
	90%	88%	88%~	97%~	88%~	88%	92%	75%~	89%	~	~	~	~	~	90%	89%	91%	87%	83%*	94%*
NOT ANSWERED		46																		
VALID CASES	220	3733	24	32	32	56	65	8	133						72	148	151	68	93	127
NUMBER OF RESPONDENTS	220	3779	24	32	32	56	65	8	133						72	148	151	68	93	127
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER		
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE
Q58.1 YES	16 70%	238 51%~	2 67%~	2 ~	6 50%~	5 86%~	1 100%~	10 67%~	~	~	~	~	~	~	5 71%~	11 69%~	8 57%~	8 89%~	12 75%~	4 57%~
NO	7 30%	228 49%~	1 33%~	1 100%~	2 50%~	1 14%~	1 ~	5 33%~	~	~	~	~	~	~	2 29%~	5 31%~	6 43%~	1 11%~	4 25%~	3 43%~
VALID CASES	23	466	3	1	4	7	5	2	15						7	16	14	9	16	7
NUMBER OF RESPONDENTS	23 100%	466 100%	3 100%	1 100%	4 100%	7 100%	5 100%	2 100%	15 100%						7 100%	16 100%	14 100%	9 100%	16 100%	7 100%

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS	MALE	MALE			
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									##	##	##	##	##	TI##	IC	IC	GOOD			
																	POOR			
																	MALE			
																	MALE			
Q58.2																				
YES	11	182	2		3	1	5		7						3	8	6	5	10	1
	48%	39%	67%	~	75%	14%	100%	~	47%	~	~	~	~	~	43%	50%	43%	56%	63%	14%
NO	12	284	1	1	1	6	2		8						4	8	8	4	6	6
	52%	61%	33%	100%	25%	86%	~	100%	53%	~	~	~	~	~	57%	50%	57%	44%	38%	86%
VALID CASES	23	466	3	1	4	7	5	2	15						7	16	14	9	16	7
NUMBER OF RESPONDENTS	23	466	3	1	4	7	5	2	15						7	16	14	9	16	7
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2													ITY	STATUS				
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/			HIS-	HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK		PAN-	PAN-	GOOD	FAIR			
									AMER		ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	##	##	##	##	##	TI##	GOOD	POOR	MALE	MALE	
Q58.3																				
YES	9	156	1	1	1	2	1	2	6						3	6	7	2	6	3
	39%	33%	33%	100%	25%	29%	20%	100%	40%	~	~	~	~	~	43%	38%	50%	22%	38%	43%
NO	14	310	2		3	5	4		9						4	10	7	7	10	4
	61%	67%	67%	~	75%	71%	80%	~	60%	~	~	~	~	~	57%	63%	50%	78%	63%	57%
VALID CASES	23	466	3	1	4	7	5	2	15						7	16	14	9	16	7
NUMBER OF RESPONDENTS	23	466	3	1	4	7	5	2	15						7	16	14	9	16	7
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY	GOOD	FAIR				
	ADLT	ADLT	TO	TO	TO	TO	TO	OVER	AFR-	AS-	PAC	ALSK			&	&	FE-				
			24	34	44	54	64	OVER	AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	POOR	MALE	MALE	
									WHTE	##	##	##	##	##	TI##	IC	IC	GOOD	POOR	MALE	MALE
Q58.4																					
YES	2	56				2									2	1	1			2	
	9%	12%~	~	~	~	29%~	~	~	~	~	~	~	~	~	29%~	~	7%~	11%~	~	29%~	
NO	21	410	3	1	4	5	5	2	15						5	16	13	8	16	5	
	91%	88%~	100%~	100%~	100%~	71%~	100%~	100%~	100%~	~	~	~	~	~	~	71%~	100%~	93%~	89%~	100%~	71%~
VALID CASES	23	466	3	1	4	7	5	2	15						7	16	14	9	16	7	
NUMBER OF RESPONDENTS	23	466	3	1	4	7	5	2	15						7	16	14	9	16	7	
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	

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



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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PCG	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY	GOOD	FAIR			
	ADLT	ADLT	TO	TO	TO	TO	TO	OVER	AFR-	AS-	PAC	ALSK			&	&				
			24	34	44	54	64	OVER	AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	POOR		
									WHTE	##	##	##	##	##	TI##	IC	IC	GOOD	POOR	
Q58.5																				
YES	1	39			1				1						1	1			1	
	4%	8%	~	~	25%	~	~	~	7%	~	~	~	~	~	6%	7%	~	~	14%	
NO	22	427	3	1	3	7	5	2	14						7	15	13	9	16	6
	96%	92%	100%	100%	75%	100%	100%	100%	93%	~	~	~	~	~	100%	94%	93%	100%	100%	86%
VALID CASES	23	466	3	1	4	7	5	2	15						7	16	14	9	16	7
NUMBER OF RESPONDENTS	23	466	3	1	4	7	5	2	15						7	16	14	9	16	7
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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



NQ23 RATING OF PERSONAL DOCTOR

	BANT	BANT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC/ALSK	OTHR	MUL-TI##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE-MALE	MALE		
NQ23	PCG TOT ADLT	OHP TOT ADLT	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	WHTE	##	##	##	##	##	TI##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE-MALE	MALE	
0-6	27 12%	572 15%	3 10%	5 15%	2 7%	8 15%	8 13%	1 11%	17 14%	~	~	~	~	~	~	7 8%	20 15%	15 10%	12 17%	16 17%	11 8%	
7-8	46 21%	959 26%*	9 30%	9 27%	8 27%	11 20%	8 13%*	~	24 20%	~	~	~	~	~	~	22 25%	24 18%	32 21%	14 20%	21 23%	25 19%	
9-10	151 67%	2197 59%*	18 60%	19 58%	20 67%	36 65%	47 75%	8 89%	82 67%	~	~	~	~	~	~	58 67%	91 67%	106 69%	43 62%	55 60%*	94 72%	
VALID CASES	224	3728	30	33	30	55	63	9	123							87	135	153	69	92	130	
NUMBER OF RESPONDENTS	224 100%	3728 100%	30 100%	33 100%	30 100%	55 100%	63 100%	9 100%	123 100%							87 100%	135 100%	153 100%	69 100%	92 100%	130 100%	
MEAN	2.55	2.44	2.50	2.42	2.60	2.51	2.62	2.78	2.53							2.59	2.53	2.59	2.45	2.42	2.64	
p stat_(*=Sig @ p<=.05)		.015*	~	~	~	.589	.383	~	.551	~	~	~	~	~	~	.567	.454	.223	.164	.025*	.038*	

[ASKED IF Q15 = YES]



NQ35 RATING OF HEALTH PLAN

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	PCG 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 PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI ##	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE
NQ35																				
0-6	47 17%	953 21%	4 11%	10 25%	6 14%	15 22%	11 15%	1 9%	33 22%*	~	~	~	~	~	9 9%*	38 22%*	28 14%	19 24%	23 21%	24 15%
7-8	77 28%	1522 33%*	9 24%	10 25%	16 37%	16 24%	19 26%	4 36%	51 33%*	~	~	~	~	~	19 18%*	56 33%*	59 30%	16 21%	28 25%	47 29%
9-10	154 55%	2121 46%*	24 65%	20 50%	21 49%	36 54%	44 59%	6 55%	69 45%*	~	~	~	~	~	75 73%*	77 45%*	107 55%	43 55%	61 54%	91 56%
VALID CASES	278	4596	37	40	43	67	74	11	153						103	171	194	78	112	162
NUMBER OF RESPONDENTS	278 100%	4596 100%	37 100%	40 100%	43 100%	67 100%	74 100%	11 100%	153 100%						103 100%	171 100%	194 100%	78 100%	112 100%	162 100%
MEAN	2.38	2.25	2.54	2.25	2.35	2.31	2.45	2.45	2.24						2.64	2.23	2.41	2.31	2.34	2.41
p stat_(*=Sig @ p<=.05)		.004*	~	~	~.404	.415	~.000*	~	~	~	~	~	~	~.000*	.000*	.480	.324	.420	.463	

GETTING NEEDED CARE

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS		GENDER			
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NPRBSEE4 NQ46	2.14	2.25	2.20	2.50	2.17	1.88	2.30	2.50	2.15						2.19	2.13	2.29	1.95	1.90	2.33
p stat_(*=Sig @ p<=.05)		.198	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCARNES4 NQ15	2.27	2.31	2.23	2.07	2.30	2.08	2.47	2.86	2.26						2.32	2.24	2.31	2.14	2.24	2.28
p stat_(*=Sig @ p<=.05)		.461	~	~	~.030*	~.018*	~	~.725	~	~	~	~	~	~.479	.338	.260	.123	.657	.845	
COMPOSITE	2.21	2.28	2.22	2.29	2.24	1.98	2.38	2.68	2.20	x	x	x	x	x	2.26	2.19	2.30	2.05	2.07	2.30
p stat_(*=Sig @ p<=.05)		.044*	~	~	~.001*	~.003*	~	~.949	~	~	~	~	~	~.294	.455	.000*	.012*	.004*	.001*	

GETTING CARE QUICKLY

	BANT OT1	BANT OT2	AGE					RACE					ETHNIC- ITY	HEALTH STATUS		GENDER			
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE MALE	
NCARSN4 NQ4	2.33	2.40	2.18	2.22	2.71	1.91	2.46	3.00	2.25					2.57	2.22	2.27	2.41	2.29	2.36
p stat_(*=Sig @ p<=.05)	.378		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NAPGET4 NQ6	2.18	2.26	1.95	2.05	2.13	2.16	2.26	2.57	2.14					2.31	2.10	2.17	2.16	2.07	2.23
p stat_(*=Sig @ p<=.05)	.179		~	~	~	~	~	~	.431	~	~	~	~	.155	.065	.732	.783	.181	.389
COMPOSITE	2.26	2.33	2.07	2.13	2.42	2.04	2.36	2.79	2.20	x	x	x	x	2.44	2.16	2.22	2.28	2.18	2.30
p stat_(*=Sig @ p<=.05)	.055		~	~	~	~	~	~	.122	~	~	~	~	.002*	.002*	.242	.672	.150	.276

HOW WELL DOCTORS COMMUNICATE

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS		GENDER					
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI##	HIS- IC	HIS- IC	NOT VERY GOOD & FAIR & POOR	EX & GOOD & POOR	FE- MALE MALE			
NDREXPL4 NQ32	2.69	2.64	2.63	2.62	2.68	2.63	2.80	3.00	2.74								2.56	2.76	2.77	2.50	2.57	2.75
p stat_(*=Sig @ p<=.05)		.215	~	~	~.355	~	~	~.151	~	~	~	~	~	~.019*	.048*	.013*	.006*	.042*	.059			
NDRLSTN4 NQ33	2.71	2.61	2.67	2.67	2.75	2.57	2.85	3.00	2.71								2.66	2.73	2.76	2.57	2.62	2.75
p stat_(*=Sig @ p<=.05)		.019*	~	~	~.071	~	~	~.942	~	~	~	~	~	~.401	.550	.095	.059	.147	.192			
NDRESPU4 NQ34	2.77	2.67	2.75	2.76	2.95	2.62	2.85	3.00	2.82								2.71	2.81	2.84	2.63	2.64	2.85
p stat_(*=Sig @ p<=.05)		.006*	~	~	~.022*	~	~	~.201	~	~	~	~	~	~.220	.278	.028*	.021*	.017*	.022*			
NDRTMEN4 NQ37	2.60	2.52	2.42	2.62	2.64	2.38	2.83	3.00	2.66								2.47	2.66	2.70	2.36	2.48	2.65
p stat_(*=Sig @ p<=.05)		.122	~	~	~.014*	~	~	~.165	~	~	~	~	~	~.057	.104	.005*	.002*	.104	.173			
COMPOSITE	2.69	2.61	2.61	2.67	2.76	2.55	2.83	3.00	2.73	x	x	x	x	x	x		2.60	2.74	2.77	2.51	2.58	2.75
p stat_(*=Sig @ p<=.05)		.017*	~	~	~.025*	~	~	~.198	~	~	~	~	~	~.056	.102	.005*	.002*	.021*	.043*			



CUSTOMER SERVICE

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS		GENDER			
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE	
NPBCLCS4 NQ50	2.23	2.30	2.17	2.43	2.25	1.95	2.41	3.00	2.33						2.11	2.36	2.38	1.88	2.15	2.28
p stat_(*=Sig @ p<=.05)		.380	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ51	2.67	2.69	2.67	2.86	2.63	2.57	2.71	3.00	2.70						2.60	2.74	2.72	2.52	2.63	2.70
p stat_(*=Sig @ p<=.05)		.773	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.45	2.50	2.42	2.64	2.44	2.26	2.56	3.00	2.52	x	x	x	x	x	2.36	2.55	2.55	2.20	2.39	2.49
p stat_(*=Sig @ p<=.05)		.495	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

	BANT OT1	BANT OT2	AGE					RACE					ETHNIC- ITY	HEALTH STATUS	GENDER				
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE		
NNRXWHY NQ11	2.80	2.87	2.67	2.75	2.86	2.63	2.93	3.00	2.97					2.30	2.94	2.84	2.73	2.86	2.77
p stat_(*=Sig @ p<=.05)		.283	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NNRXWYNT NQ12	2.53	2.49	2.67	3.00	2.43	2.41	2.53	2.33	2.69					2.00	2.68	2.53	2.51	2.64	2.47
p stat_(*=Sig @ p<=.05)		.664	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NRXBST NQ13	2.73	2.53	2.33	3.00	2.43	2.70	2.93	2.33	2.78					2.70	2.74	2.69	2.78	2.64	2.77
p stat_(*=Sig @ p<=.05)		.021*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.69	2.63	2.56	2.92	2.57	2.58	2.80	2.56	2.82	x	x	x	x	2.33	2.78	2.69	2.68	2.71	2.67
p stat_(*=Sig @ p<=.05)		.318	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

	BANTO	BANTO	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	T1	T2												ITY	STATUS						
	PCG	OHP	18	25	35	45	55	65	BLCK	AS-	NATV	AMER									
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	IAN	HAW/	IND/									
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	PAC	ILND	ALSK	OTH	MUL-	HIS-	NOT	EX &	FAIR			
									AMER					TI##	PAN-	PAN-	GOOD	&	POOR	MALE	FE-
									##	##	##	##	##		IC	IC	GOOD	POOR	MALE	MALE	
PRBSEE4 Q25	71%	77%	70%	100%	75%	61%	74%	75%	74%						65%	74%	82%	55%	59%	80%	
CARNES4 Q14	86%	82%	92%	82%	96%	72%	90%	100%	85%						88%	84%	89%	77%	83%	87%	
AVERAGE	78.05	79.43	81.15	91.07	85.33	66.15	82.14	87.50	79.56	x	x	x	x	x	76.54	78.83	85.47	66.02	70.92	83.39	

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

	BANTO	BANTO	AGE						RACE							ETHNIC-	HEALTH		GENDER		
	T1	T2												ITY	STATUS						
	PCG	OHP	18	25	35	45	55	65	BLCK	AS-	NATV	AMER									
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	IAN	HAW/	IND/									
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-		PAC	ALSK	OTHR	MUL-	HIS-	NOT	EX &	FAIR			
									AMER	##	ILND	NATV	##	TI##	PAN-	PAN-	GOOD	&	POOR	MALE	FE-
									WHTE	##					IC	IC	GOOD	POOR	MALE	MALE	
CARSN4 Q4	77%	83%	73%	78%	100%	52%	82%	100%	73%						87%	72%	75%	79%	77%	76%	
APGET4 Q6	74%	78%	64%	67%	74%	74%	77%	86%	76%						74%	73%	73%	73%	66%	77%	
AVERAGE	75.28	80.38	68.18	72.22	86.96	63.30	79.37	92.86	74.24	x	x	x	x	x	80.37	72.32	74.00	75.98	71.62	76.86	

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2	18	25	35	45	55	65	BLCK	NATV	AMER	AS-	IND/	NOT	EX &	GOOD	FAIR	MALE	MALE		
PCG	OHP	18	25	35	45	55	65	OR	HAW/	IND/	PAC	ALSK	HIS-	HIS-	VERY	GOOD	FAIR	FE-	FE-		
TOT	TOT	TO	TO	TO	TO	TO	AND	AFR-	AS-	PAC	ALSK	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
ADLT	ADLT	24	34	44	54	64	OVER	AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE		
DREXPL4 Q17	95%	92%	96%	90%	95%	94%	98%	100%	96%						92%	96%	97%	91%	92%	96%	
DRLSTN4 Q18	94%	90%	96%	90%	100%	88%	100%	100%	93%						95%	93%	96%	91%	90%	96%	
DRESPU4 Q19	95%	91%	92%	100%	100%	92%	96%	100%	96%						95%	95%	97%	93%	89%	99%	
DRTMEN4 Q20	91%	88%	88%	86%	100%	83%	98%	100%	92%						88%	93%	93%	86%	85%	94%	
AVERAGE	93.9	90.3	92.7	91.7	98.9	89.3	97.8	100	94.1	x	x	x	x	x	x	92.8	94.5	95.6	90.1	89.3	96.6

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

	BANTO	BANTO	AGE						RACE							ETHNICITY		HEALTH STATUS		GENDER		
	T1	T2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	FE-MALE	MALE	
PBCLCS4 Q31	79%	80%	75%	93%	75%	68%	82%	100%	82%						75%	82%	86%	58%	76%	80%		
CSRESP Q32	94%	94%	100%	100%	94%	86%	94%	100%	97%						91%	97%	97%	87%	94%	94%		
AVERAGE	86.27	86.67	87.50	96.43	84.38	76.95	88.24	100.0	89.39	x	x	x	x	x	x	x	82.85	89.74	91.38	72.64	84.75	87.00

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
	PCG TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ PAC ALSK	OTHR	MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE
NRXWHY Q10	90%	93%	83%	88%	93%	81%	97%	100%	98%						65%	97%	92%	86%	93%	88%
NRXWYNT Q11	76%	74%	83%	100%	71%	70%	77%	67%	85%						50%	84%	76%	76%	82%	73%
RXBST Q12	87%	77%	67%	100%	71%	85%	97%	67%	89%						85%	87%	84%	89%	82%	88%
AVERAGE	84.4	81.5	77.8	95.8	78.6	79.0	90.0	77.8	90.8	x	x	x	x	x	66.7	89.2	84.3	83.8	85.7	83.3

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALSK OTHR #	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	68 CCC	
Q1 YES	356 100%	5277 100%	62 100%	72 100%	103 100%	119 100%	114 100%	~	~	~	~	~	210 100%	123 100%	314 100%	21 100%	288 100%	68 100%
NOT ANSWERED	1	32				1							1	1			1	
VALID CASES	356	5277	62	72	103	119	114						210	123	314	21	288	68
NUMBER OF RESPONDENTS	357 100%	5309 100%	62 100%	72 100%	103 100%	120 100%	114 100%						211 100%	123 100%	315 100%	21 100%	288 100%	69 100%



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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR #	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
Q3 YES	83 24%	1639 32%*	17 28%	21 31%	20 20%	25 21%	30 27%	~	~	~	~	~	~	47 22%	31 26%	72 23%~	6 29%~	62 22%	21 31%	
NO	267 76%	3549 68%*	44 72%	47 69%	82 80%	94 79%	82 73%	~	~	~	~	~	~	163 78%	90 74%	240 77%~	15 71%~	221 78%	46 69%	
NOT ANSWERED	7	121	1	4	1	1	2							1	2	3			5	2
VALID CASES	350	5188	61	68	102	119	112							210	121	312	21		283	67
NUMBER OF RESPONDENTS	357	5309	62	72	103	120	114							211	123	315	21		288	69
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%		100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	NO CCC	CCC	
Q4 NEVER	1 1%	19 1%	~	~	~	4%	1 3%	~	~	~	~	~	~	~	3%	1 1%	~	1 2%	
SOMETIMES	5 6%	114 7%	1 6%	~	1 5%	3 13%	2 7%	~	~	~	~	~	~	2 4%	3 10%	4 6%	1 17%	4 7%	1 5%
USUALLY	13 17%	272 18%	4 25%	2 11%	6 30%	1 4%	4 14%	~	~	~	~	~	~	9 20%	4 14%	12 17%	1 17%	9 16%	4 19%
ALWAYS	59 76%	1135 74%	11 69%	16 89%	13 65%	19 79%	22 76%	~	~	~	~	~	~	35 76%	21 72%	52 75%	4 67%	43 75%	16 76%
#ALWAYS + USUALLY (NET)	72 92%	1407 91%	15 94%	18 100%	19 95%	20 83%	26 90%	~	~	~	~	~	~	44 96%	25 86%	64 93%	5 83%	52 91%	20 95%
TOP BOX SCORE	59 76%	1135 74%	11 69%	16 89%	13 65%	19 79%	22 76%	~	~	~	~	~	~	35 76%	21 72%	52 75%	4 67%	43 75%	16 76%
NOT ANSWERED		5 99	1	3		1	1							1	2	3		5	
VALID CASES	78	1540	16	18	20	24	29							46	29	69	6	57	21
NUMBER OF RESPONDENTS	83 100%	1639 100%	17 100%	21 100%	20 100%	25 100%	30 100%							47 100%	31 100%	72 100%	6 100%	62 100%	21 100%

[ASKED IF Q3 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR- #	AS- IAN ##	NATV ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q5 YES	240 69%	3464 67%	51 84%*	52 76%	56 56%*	81 69%	75 67%	~	~	~	~	~	~	148 71%	80 66%	214 69%~	15 71%~	185 66%*	55 82%
NO	106 31%	1672 33%	10 16%*	16 24%	44 44%*	36 31%	37 33%	~	~	~	~	~	~	59 29%	41 34%	95 31%~	6 29%~	94 34%*	12 18%
NOT ANSWERED	11	173	1	4	3	3	2							4	2	6		9	2
VALID CASES	346	5136	61	68	100	117	112							207	121	309	21	279	67
NUMBER OF RESPONDENTS	357	5309	62	72	103	120	114							211	123	315	21	288	69
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER IND/ALSK #	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q6 NEVER	3 1%	57 2%	~	1 2%	2 4%	~	~	~	~	~	~	~	~	3 2%	~	2 1%	2 1%	1 2%	
SOMETIMES	33 15%	393 12%	2 4%	7 16%	13 25%*	11 15%	11 16%	~	~	~	~	~	~	21 16%	12 17%	31 16%	2 15%	24 14%	9 18%
USUALLY	68 31%	850 26%	13 28%	17 38%	16 31%	22 29%	25 37%	~	~	~	~	~	~	39 29%	26 36%	61 31%	5 38%	50 30%	18 35%
ALWAYS	114 52%	1954 60%*	31 67%	20 44%	21 40%*	42 56%	32 47%	~	~	~	~	~	~	72 53%	34 47%	101 52%	6 46%	91 54%	23 45%
#ALWAYS + USUALLY (NET)	182 83%	2804 86%	44 96%	37 82%	37 71%*	64 85%	57 84%	~	~	~	~	~	~	111 82%	60 83%	162 83%	11 85%	141 84%	41 80%
TOP BOX SCORE	114 52%	1954 60%*	31 67%	20 44%	21 40%*	42 56%	32 47%	~	~	~	~	~	~	72 53%	34 47%	101 52%	6 46%	91 54%	23 45%
NOT ANSWERED	22	210	5	7	4	6	7							13	8	19	2	18	4
VALID CASES	218	3254	46	45	52	75	68							135	72	195	13	167	51
NUMBER OF RESPONDENTS	240	3464	51	52	56	81	75							148	80	214	15	185	55
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-#	AS-IAN##	NATV ILND##	AMER IND/ALSK##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q7 NONE	111 34%	1484 30%	8 15%*	19 28%	44 45%*	40 36%	37 33%	~	~	~	~	~	~	68 35%	37 31%	100 34%~	6 30%~	95 36%	16 25%
1 TIME	96 29%	1437 29%	19 35%	17 25%	26 27%	34 31%	31 28%	~	~	~	~	~	~	59 30%	34 28%	89 30%~	4 20%~	79 30%	17 27%
2	67 20%	1045 21%	19 35%*	12 18%	14 14%	22 20%	26 23%	~	~	~	~	~	~	34 17%	30 25%	60 20%~	3 15%~	55 21%	12 19%
3	27 8%	518 10%	3 5%	11 16%*	8 8%	5 5%	9 8%	~	~	~	~	~	~	16 8%	9 8%	24 8%~	1 5%~	22 8%	5 8%
4	16 5%	229 5%	4 7%	3 4%	2 2%	7 6%	2 2%*	~	~	~	~	~	~	14 7%*	2 2%*	11 4%~	5 25%~	10 4%	6 10%
5 TO 9	10 3%	232 5%	2 4%	4 6%	2 2%	2 2%	4 4%	~	~	~	~	~	~	3 2%	6 5%	10 3%~	~	6 2%	4 6%
10 OR MORE TIMES	3 0.9%	79 2%	~	1 1%	1 1%	1 0.9%	2 2%	~	~	~	~	~	~	1 0.5%	2 2%	2 0.7%~	1 5%~	~	3 5%
NOT ANSWERED	27	285	7	5	6	9	3							16	3	19	1	21	6
VALID CASES	330	5024	55	67	97	111	111							195	120	296	20	267	63
NUMBER OF RESPONDENTS	357 100%	5309 100%	62 100%	72 100%	103 100%	120 100%	114 100%							211 100%	123 100%	315 100%	21 100%	288 100%	69 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q8 #YES	164 76%	2500 72%	40 85%	38 81%	38 73%	48 70%	53 73%	~	~	~	~	~	~	98 79%	57 70%	143 74%	13 93%	128 75%	36 80%
NO	51 24%	975 28%	7 15%	9 19%	14 27%	21 30%	20 27%	~	~	~	~	~	~	26 21%	25 30%	49 26%	1 7%	42 25%	9 20%
NOT ANSWERED	4	65		1	1	2	1							3	1	4		2	2
VALID CASES	215	3475	47	47	52	69	73							124	82	192	14	170	45
NUMBER OF RESPONDENTS	219	3540	47	48	53	71	74							127	83	196	14	172	47
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q9 NEVER	4 2%	83 2%	2 4%~	2 ~	2 4%	~	1 1%	~	~	~	~	~	~	1 0.8%	2 2%	4 2%~	3 ~	1 2%	
SOMETIMES	13 6%	254 7%	2 4%~	3 7%~	3 6%	5 7%	5 7%	~	~	~	~	~	~	7 6%	5 6%	8 4%~	3 21%~	5 5%~	5 11%
USUALLY	50 23%	708 20%	6 13%~	10 22%~	15 29%	19 27%	17 23%	~	~	~	~	~	~	27 22%	21 26%	44 23%~	4 29%~	13 22%~	13 28%
ALWAYS	148 69%	2421 70%	37 79%~	33 72%~	32 62%	46 66%	50 68%	~	~	~	~	~	~	90 72%	54 66%	137 71%~	7 50%~	27 72%~	27 59%
#ALWAYS + USUALLY (NET)	198 92%	3129 90%	43 91%~	43 93%~	47 90%	65 93%	67 92%	~	~	~	~	~	~	117 94%	75 91%	181 94%~	11 79%~	40 93%~	40 87%
TOP BOX SCORE	148 69%	2421 70%	37 79%~	33 72%~	32 62%	46 66%	50 68%	~	~	~	~	~	~	90 72%	54 66%	137 71%~	7 50%~	27 72%~	27 59%
NOT ANSWERED	4	74		2	1	1	1							2	1	3		3	1
VALID CASES	215	3466	47	46	52	70	73							125	82	193	14	169	46
NUMBER OF RESPONDENTS	219 100%	3540 100%	47 100%	48 100%	53 100%	71 100%	74 100%							127 100%	83 100%	196 100%	14 100%	172 100%	47 100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR #	MULTI-ETHNIC TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC
Q10 YES	57 27%	1023 30%	10 21%~	15 33%~	19 38%	13 18%*	20 27%	~	~	~	~	~	~	36 29%	21 25%	51 27%~	6 43%~	37 22%~	20 43%
Q10 NO	157 73%	2434 70%	37 79%~	31 67%~	31 62%	58 82%*	54 73%	~	~	~	~	~	~	87 71%	62 75%	141 73%~	8 57%~	131 78%~	26 57%
NOT ANSWERED	5	83		2	3									4		4		4	1
VALID CASES	214	3457	47	46	50	71	74							123	83	192	14	168	46
NUMBER OF RESPONDENTS	219	3540	47	48	53	71	74							127	83	196	14	172	47
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]



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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q11 #YES	52 91%	937 94%	9 90%~	13 87%~	17 89%~	13 100%~	18 90%~	~	~	~	~	~	~	33 92%~	19 90%~	47 92%~	5 83%~	34 92%~	18 90%~
NO	5 9%	63 6%	1 10%~	2 13%~	2 11%~	~	2 10%~	~	~	~	~	~	~	3 8%~	2 10%~	4 8%~	1 17%~	3 8%~	2 10%~
NOT ANSWERED		23																	
VALID CASES	57	1000	10	15	19	13	20							36	21	51	6	37	20
NUMBER OF RESPONDENTS	57	1023	10	15	19	13	20							36	21	51	6	37	20
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q12 #YES	32 57%	709 71%*	5 50%~	11 79%~	8 42%~	8 62%~	15 79%~	~	~	~	~	~	~	16 44%~	16 80%~	30 60%~	2 33%~	22 61%~	10 50%
NO	24 43%	290 29%*	5 50%~	3 21%~	11 58%~	5 38%~	4 21%~	~	~	~	~	~	~	20 56%~	4 20%~	20 40%~	4 67%~	14 39%~	10 50%
NOT ANSWERED	1	24		1			1								1	1		1	
VALID CASES	56	999	10	14	19	13	19							36	20	50	6	36	20
NUMBER OF RESPONDENTS	57	1023	10	15	19	13	20							36	21	51	6	37	20
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q13 #YES	47 82%	780 79%	8 80%~	12 80%~	15 79%~	12 92%~	16 80%~	~	~	~	~	~	~	30 83%~	17 81%~	41 80%~	6 100%~	28 76%~	19 95%
NO	10 18%	209 21%	2 20%~	3 20%~	4 21%~	1 8%~	4 20%~	~	~	~	~	~	~	6 17%~	4 19%~	10 20%~	~	9 24%~	1 5%
NOT ANSWERED		34																	
VALID CASES	57	989	10	15	19	13	20							36	21	51	6	37	20
NUMBER OF RESPONDENTS	57	1023	10	15	19	13	20							36	21	51	6	37	20
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER HAW/IND/PAC ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q14 WORST HEALTH CARE POSSIBLE		12 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
01	2 0.9%	10 0.3%	~	2 4%	~	~	1 1%	~	~	~	~	~	~	1 0.8%	1 1%	1 0.5%	~	2 4%	
02		13 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
03	1 0.5%	13 0.4%	1 2%	~	~	~	~	~	~	~	~	~	~	1 1%	1 0.5%	~	1 0.6%	~	
04		22 0.6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
05	7 3%	111 3%	2 4%	~	1 2%	4 6%	4 5%	~	~	~	~	~	~	3 2%	4 5%	5 3%	2 14%	4 2%	3 7%
06	9 4%	105 3%	2 4%	~	2 4%	5 7%	3 4%	~	~	~	~	~	~	5 4%	2 2%	7 4%	1 7%	7 4%	2 4%
07	11 5%	269 8%	4 9%	3 7%	3 6%	1 1%	6 8%	~	~	~	~	~	~	4 3%	6 7%	9 5%	1 7%	9 5%	2 4%
08	45 21%	725 21%	7 15%	9 20%	12 23%	17 24%	21 28%	~	~	~	~	~	~	18 15%*	26 31%*	41 21%	3 21%	33 20%	12 26%
09	50 23%	742 21%	8 17%	12 27%	17 32%	13 19%	14 19%	~	~	~	~	~	~	34 27%	15 18%	47 24%	2 14%	40 24%	10 22%
BEST HEALTH CARE POSSIBLE	90 42%	1438 42%	23 49%	19 42%	18 34%	30 43%	25 34%	~	~	~	~	~	~	59 48%*	28 34%	82 42%	5 36%	75 44%	15 33%
#8-10 (NET)	185 86%	2905 84%	38 81%	40 89%	47 89%	60 86%	60 81%	~	~	~	~	~	~	111 90%	69 83%	170 88%	10 71%	148 88%	37 80%

Continued

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC-ITY	HEALTH STATUS		CCC SCREENER			
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER PAC ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
9-10 (NET)	140 65%	2180 63%	31 66%~	31 69%~	35 66%	43 61%	39 53%*	~	~	~	~	~	~	93 75%*	43 52%*	129 67%~	7 50%~	115 68%~	25 54%
NOT ANSWERED	4	80		3		1								3		3		3	1
VALID CASES	215	3460	47	45	53	70	74							124	83	193	14	169	46
NUMBER OF RESPONDENTS	219 100%	3540 100%	47 100%	48 100%	53 100%	71 100%	74 100%							127 100%	83 100%	196 100%	14 100%	172 100%	47 100%
MEAN	8.75	8.70	8.74	8.73	8.81	8.71	8.45							8.98	8.45	8.83	8.21	8.89	8.24
p stat_(*=Sig @ p<=.05)		.620	~	~	.694	.818	.039*	~	~	~	~	~	~	~	.012*	.029*	~	~	~

[ASKED IF Q7 >= 1]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND NATV ###	AMER IND/ ALSK ##	OTHR #	MUL-TI##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q15 NEVER	4 2%	57 2%	1 2%~	2 ~	2 4%	1 1%	~	~	~	~	~	~	3 2%	1 1%	4 2%~	~	4 2%~	~
SOMETIMES	21 10%	311 9%	3 7%~	3 7%~	8 15%	7 10%	8 11%	~	~	~	~	~	10 8%	10 12%	16 8%~	4 29%~	11 6%~	10 22%
USUALLY	71 33%	1019 29%	10 22%~	21 46%~	20 38%	20 28%	25 34%	~	~	~	~	~	41 33%	27 33%	63 32%~	4 29%~	52 31%~	19 41%
ALWAYS	120 56%	2073 60%	32 70%~	22 48%~	23 43%*	43 61%	41 55%	~	~	~	~	~	71 57%	45 54%	111 57%~	6 43%~	103 61%~	17 37%
#ALWAYS + USUALLY (NET)	191 88%	3092 89%	42 91%~	43 93%~	43 81%	63 89%	66 89%	~	~	~	~	~	112 90%	72 87%	174 90%~	10 71%~	155 91%~	36 78%
TOP BOX SCORE	120 56%	2073 60%	32 70%~	22 48%~	23 43%*	43 61%	41 55%	~	~	~	~	~	71 57%	45 54%	111 57%~	6 43%~	103 61%~	17 37%
NOT ANSWERED	3	80	1	2									2		2		2	1
VALID CASES	216	3460	46	46	53	71	74						125	83	194	14	170	46
NUMBER OF RESPONDENTS	219 100%	3540 100%	47 100%	48 100%	53 100%	71 100%	74 100%						127 100%	83 100%	196 100%	14 100%	172 100%	47 100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ###	AMER IND/ ALSK ###	OTHR #	MUL- TI###	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q16 YES	266 77%	3801 75%	28 46%*	59 88%*	88 87%*	91 77%	91 81%	~	~	~	~	~	~	156 74%	97 80%	236 75%~	19 90%~	204 73%*	62 91%
NO	81 23%	1296 25%	33 54%*	8 12%*	13 13%*	27 23%	22 19%	~	~	~	~	~	~	55 26%	25 20%	77 25%~	2 10%~	75 27%*	6 9%
NOT ANSWERED	10	212	1	5	2	2	1								1	2		9	1
VALID CASES	347	5097	61	67	101	118	113							211	122	313	21	279	68
NUMBER OF RESPONDENTS	357 100%	5309 100%	62 100%	72 100%	103 100%	120 100%	114 100%							211 100%	123 100%	315 100%	21 100%	288 100%	69 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER ALSK #	OTH#	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q17 YES	37 15%	409 11%	5 18%	11 20%	7 9%*	14 16%	10 13%	~	~	~	~	~	~	25 17%	10 12%	29 13%	7 39%~	19 10%*	18 31%
NO	209 85%	3206 89%	23 82%~	43 80%	72 91%*	71 84%	70 88%	~	~	~	~	~	~	124 83%	76 88%	189 87%~	11 61%~	168 90%*	41 69%
NOT ANSWERED	20	186		5	9	6	11							7	11	18	1	17	3
VALID CASES	246	3615	28	54	79	85	80							149	86	218	18	187	59
NUMBER OF RESPONDENTS	266	3801	28	59	88	91	91							156	97	236	19	204	62
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q16 = YES]



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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI##	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q18 #YES	33 97%	369 92%~100%	5 91%~100%	10 100%	7 100%	11 100%	9 100%	~	~	~	~	~	~	23 96%~100%	9 100%	25 96%~100%	7 100%	16 94%~100%	17 100%
NO	1 3%	30 8%~	~	1 9%~	~	~	~	~	~	~	~	~	~	1 4%~	~	1 4%~	~	1 6%~	~
NOT ANSWERED	3	10				3	1							1	1	3		2	1
VALID CASES	34	399	5	11	7	11	9							24	9	26	7	17	17
NUMBER OF RESPONDENTS	37	409	5	11	7	14	10							25	10	29	7	19	18
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q16 = YES AND Q17 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER PAC ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
Q19 YES	19 5%	214 4%	3 5%	5 7%	6 6%	5 4%	8 7%	~	~	~	~	~	~	9 4%	8 7%	14 4%	4 19%	~	6 2%*	13 19%
NO	327 95%	4864 96%	57 95%	63 93%	93 94%	114 96%	104 93%	~	~	~	~	~	~	201 96%	113 93%	298 96%	17 81%	~	271 98%*	56 81%
NOT ANSWERED	11	231	2	4	4	1	2							1	2	3			11	
VALID CASES	346	5078	60	68	99	119	112							210	121	312	21		277	69
NUMBER OF RESPONDENTS	357	5309	62	72	103	120	114							211	123	315	21		288	69
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%		100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND NATV ###	AMER IND/ ALSK #	MUL-TI##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q20 NEVER	1 6%	21 10%	~	~	~	25%	~	~	~	~	~	~	~	~	1 8%	~	~	1 8%
SOMETIMES	4 22%	30 14%	~	3 60%	~	25%	2 25%	~	~	~	~	~	2 22%	2 25%	2 15%	2 50%	3 50%	1 8%
USUALLY	6 33%	46 22%	1 33%	2 40%	3 50%	~	3 38%	~	~	~	~	~	3 33%	3 38%	4 31%	1 25%	1 17%	5 42%
ALWAYS	7 39%	113 54%	2 67%	~	3 50%	2 50%	3 38%	~	~	~	~	~	4 44%	3 38%	6 46%	1 25%	2 33%	5 42%
#ALWAYS + USUALLY (NET)	13 72%	159 76%	3 100%	2 40%	6 100%	2 50%	6 75%	~	~	~	~	~	7 78%	6 75%	10 77%	2 50%	3 50%	10 83%
TOP BOX SCORE	7 39%	113 54%	2 67%	~	3 50%	2 50%	3 38%	~	~	~	~	~	4 44%	3 38%	6 46%	1 25%	2 33%	5 42%
NOT ANSWERED	1	4				1									1			1
VALID CASES	18	210	3	5	6	4	8						9	8	13	4	6	12
NUMBER OF RESPONDENTS	19	214	3	5	6	5	8						9	8	14	4	6	13
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q19 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-#	AS-IAN##	NATV ILND##	AMER IND/ALSK##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q21 #YES	16 84%	170 83%	3 100%	4 80%	5 83%	4 80%	6 75%	~	~	~	~	~	~	9 100%	6 75%	11 79%	4 100%	6 100%	10 77%
NO	3 16%	36 17%	~	1 20%	1 17%	1 20%	2 25%	~	~	~	~	~	~	~	2 25%	3 21%	~	~	3 23%
NOT ANSWERED		8																	
VALID CASES	19	206	3	5	6	5	8							9	8	14	4	6	13
NUMBER OF RESPONDENTS	19	214	3	5	6	5	8							9	8	14	4	6	13
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q19 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR #	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
Q22 YES	40 12%	522 10%	6 10%	12 18%	7 7%	15 13%	13 12%	~	~	~	~	~	~	24 12%	13 11%	32 10%	7 33%	~	14 5%*	26 38%
NO	304 88%	4555 90%	55 90%	56 82%	91 93%	102 87%	100 88%	~	~	~	~	~	~	184 88%	109 89%	279 90%	14 67%	~	261 95%*	43 62%
NOT ANSWERED	13	232	1	4	5	3	1							3	1	4			13	
VALID CASES	344	5077	61	68	98	117	113							208	122	311	21		275	69
NUMBER OF RESPONDENTS	357	5309	62	72	103	120	114							211	123	315	21		288	69
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%		100%	100%

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

	BANT	BANT	AGE				RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	OT1	OT2	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK #	OTHR #	MUL-TI##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q23 NEVER	6 16%	63 13%	1 17%	1 9%	1 14%	3 21%	3 25%	~	~	~	~	~	2 9%	3 25%	6 20%	~	3 23%	3 12%
SOMETIMES	10 26%	78 16%	~	5 45%	1 14%	4 29%	3 25%	~	~	~	~	~	7 30%	3 25%	7 23%	2 29%	3 23%	7 28%
USUALLY	9 24%	122 24%	3 50%	1 9%	2 29%	3 21%	2 17%	~	~	~	~	~	7 30%	2 17%	5 17%	4 57%	2 15%	7 28%
ALWAYS	13 34%	236 47%	2 33%	4 36%	3 43%	4 29%	4 33%	~	~	~	~	~	7 30%	4 33%	12 40%	1 14%	5 38%	8 32%
#ALWAYS + USUALLY (NET)	22 58%	358 72%	5 83%	5 45%	5 71%	7 50%	6 50%	~	~	~	~	~	14 61%	6 50%	17 57%	5 71%	7 54%	15 60%
TOP BOX SCORE	13 34%	236 47%	2 33%	4 36%	3 43%	4 29%	4 33%	~	~	~	~	~	7 30%	4 33%	12 40%	1 14%	5 38%	8 32%
NOT ANSWERED	2	23	1			1	1						1	1	2		1	1
VALID CASES	38	499	6	11	7	14	12						23	12	30	7	13	25
NUMBER OF RESPONDENTS	40	522	6	12	7	15	13						24	13	32	7	14	26
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q22 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALSK ##	OTHR #	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q24 #YES	26 67%	347 69%	4 67%	6 50%	6 86%	10 71%	7 58%	~	~	~	~	~	17 71%	7 58%	18 58%	7 100%	8 57%	18 72%
NO	13 33%	153 31%	2 33%	6 50%	1 14%	4 29%	5 42%	~	~	~	~	~	7 29%	5 42%	13 42%	~	6 43%	7 28%
NOT ANSWERED	1	22				1	1							1	1			1
VALID CASES	39	500	6	12	7	14	12						24	12	31	7	14	25
NUMBER OF RESPONDENTS	40	522	6	12	7	15	13						24	13	32	7	14	26
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q22 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER ALSK #	OTH#	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC
Q25 YES	37 11%	769 15%*	2 3%*	8 12%	12 12%	15 13%	15 13%	~	~	~	~	~	~	21 10%	15 12%	30 10%~	6 29%~	14 5%*	23 33%
NO	308 89%	4303 85%*	59 97%*	60 88%	85 88%	104 87%	98 87%	~	~	~	~	~	~	188 90%	107 88%	282 90%~	15 71%~	262 95%*	46 67%
NOT ANSWERED	12	237	1	4	6	1	1							2	1	3			12
VALID CASES	345	5072	61	68	97	119	113							209	122	312	21	276	69
NUMBER OF RESPONDENTS	357	5309	62	72	103	120	114							211	123	315	21	288	69
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%



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

	BANT	BANT	AGE				RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	OT1	OT2	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK #	OTHR #	MUL-TI##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q26 NEVER	2 6%	94 13%~	1 ~ 14%~	1 ~ 7%~	1 ~ 7%~	1 27%~	~	~	~	~	~	~	2 11%~	1 ~ 4%~	1 17%~	1 8%~	1 5%	
SOMETIMES	11 31%	122 16%~100%~	2 29%~	2 33%~	5 43%~	2 27%~	4 27%~	~	~	~	~	~	7 37%~	4 27%~	10 36%~	~	5 38%~	6 27%
USUALLY	12 34%	178 24%~	2 29%~	4 33%~	6 43%~	6 40%~	~	~	~	~	~	~	6 32%~	6 40%~	9 32%~	3 50%~	2 15%~	10 45%
ALWAYS	10 29%	353 47%~	2 29%~	3 25%~	5 36%~	5 33%~	~	~	~	~	~	~	4 21%~	5 33%~	8 29%~	2 33%~	5 38%~	5 23%
#ALWAYS + USUALLY (NET)	22 63%	531 71%~	4 57%~	7 58%~	11 79%~	11 73%~	~	~	~	~	~	~	10 53%~	11 73%~	17 61%~	5 83%~	7 54%~	15 68%
TOP BOX SCORE	10 29%	353 47%~	2 29%~	3 25%~	5 36%~	5 33%~	~	~	~	~	~	~	4 21%~	5 33%~	8 29%~	2 33%~	5 38%~	5 23%
NOT ANSWERED	2	22	1		1								2		2		1	1
VALID CASES	35	747	2	7	12	14	15						19	15	28	6	13	22
NUMBER OF RESPONDENTS	37	769	2	8	12	15	15						21	15	30	6	14	23
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q27 #YES	26 74%	428 57%	2 100%	5 71%	8 67%	11 79%	11 73%	~	~	~	~	~	~	14 74%	11 73%	21 75%	5 83%	10 77%	16 73%
NO	9 26%	317 43%	~	2 29%	4 33%	3 21%	4 27%	~	~	~	~	~	~	5 26%	4 27%	7 25%	1 17%	3 23%	6 27%
NOT ANSWERED	2	24		1		1								2		2		1	1
VALID CASES	35	745	2	7	12	14	15							19	15	28	6	13	22
NUMBER OF RESPONDENTS	37	769	2	8	12	15	15							21	15	30	6	14	23
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER HAW/IND/ PAC ALSK ##	OTHR #	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
Q28 YES	66 19%	1124 22%	9 15%	16 24%	16 16%	25 21%	27 24%	~	~	~	~	~	~	36 17%	28 23%	53 17%	11 52%	~	37 13%*	29 43%
NO	277 81%	3915 78%	51 85%	52 76%	81 84%	93 79%	86 76%	~	~	~	~	~	~	172 83%	94 77%	257 83%	10 48%	~	239 87%*	38 57%
NOT ANSWERED	14	270	2	4	6	2	1							3	1	5			12	2
VALID CASES	343	5039	60	68	97	118	113							208	122	310	21		276	67
NUMBER OF RESPONDENTS	357	5309	62	72	103	120	114							211	123	315	21		288	69
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%		100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER PAC ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q29 #YES	47 77%	673 62%*	7 78%~	11 79%~	12 80%~	17 74%~	16 62%~	~	~	~	~	~	~	30 91%~	16 62%~	38 78%~	8 80%~	25 74%~	22 81%
NO	14 23%	416 38%*	2 22%~	3 21%~	3 20%~	6 26%~	10 38%~	~	~	~	~	~	~	3 9%~	10 38%~	11 22%~	2 20%~	9 26%~	5 19%
NOT ANSWERED	5	35		2	1	2	1							3	2	4	1	3	2
VALID CASES	61	1089	9	14	15	23	26							33	26	49	10	34	27
NUMBER OF RESPONDENTS	66	1124	9	16	16	25	27							36	28	53	11	37	29
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q30 YES	304 89%	4437 89%	60 98%*	64 94%	86 88%	94 81%*	102 91%	~	~	~	~	~	~	185 89%	108 89%	278 89%~	17 81%~	240 87%	64 94%
NO	39 11%	550 11%	1 2%*	4 6%	12 12%	22 19%*	10 9%	~	~	~	~	~	~	24 11%	13 11%	33 11%~	4 19%~	35 13%	4 6%
NOT ANSWERED	14	322	1	4	5	4	2							2	2	4		13	1
VALID CASES	343	4987	61	68	98	116	112							209	121	311	21	275	68
NUMBER OF RESPONDENTS	357	5309	62	72	103	120	114							211	123	315	21	288	69
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND ##	AMER PAC ALSK NATV ##	OTHR #	MUL-TI##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q31 NONE	84 29%	1154 27%	7 12%*	19 32%	34 41%*	24 27%	36 37%*	~	~	~	~	~	~	45 26%	39 38%*	78 30%~	4 25%~	71 31%	13 21%
1 TIME	94 33%	1496 35%	22 38%	14 23%	29 35%	29 33%	32 33%	~	~	~	~	~	~	57 33%	32 31%	88 33%~	3 19%~	73 32%	21 34%
2	66 23%	893 21%	22 38%*	13 22%	10 12%*	21 24%	22 22%	~	~	~	~	~	~	40 23%	24 23%	61 23%~	2 13%~	51 22%	15 24%
3	27 9%	389 9%	4 7%	9 15%	6 7%	8 9%	5 5%*	~	~	~	~	~	~	19 11%	6 6%	23 9%~	3 19%~	22 10%	5 8%
4	7 2%	157 4%	1 2%	2 3%	~	4 4%	1 1%	~	~	~	~	~	~	5 3%	1 1%	5 2%~	2 13%~	4 2%	3 5%
5 TO 9	9 3%	138 3%	2 3%	3 5%	2 2%	2 2%	1 1%	~	~	~	~	~	~	8 5%*	1 1%	8 3%~	1 6%~	6 3%	3 5%
10 OR MORE TIMES	2 0.7%	34 0.8%	~	~	1 1%	1 1%	1 1%	~	~	~	~	~	~	1 0.6%	1 1%	1 0.4%~	1 6%~	~	2 3%
NOT ANSWERED	15	176	2	4	4	5	4							10	4	14	1	13	2
VALID CASES	289	4261	58	60	82	89	98							175	104	264	16	227	62
NUMBER OF RESPONDENTS	304	4437	60	64	86	94	102							185	108	278	17	240	64
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q31A ALWAYS	8 4%	65 2%	1 2%	3 7%~	3 6%~	1 2%	~	~	~	~	~	~	~	7 5%	~	6 3%~	1 8%~	7 5%~	1 2%
USUALLY	5 2%	49 2%	1 2%	1 2%~	3 6%~	~	1 2%	~	~	~	~	~	~	4 3%	1 2%	5 3%~	~	4 3%~	1 2%
SOMETIMES	16 8%	202 7%	5 10%	3 7%~	5 11%~	3 5%	~	~	~	~	~	~	~	13 10%	1 2%*	10 5%~	5 42%~	11 7%~	5 10%
NEVER	172 86%	2765 90%	44 86%	34 83%~	36 77%~	58 94%*	61 98%*	~	~	~	~	~	~	104 81%*	63 97%*	162 89%~	6 50%~	131 86%~	41 85%
#NEVER + SOMETIMES (NET)	188 94%	2967 96%	49 96%	37 90%~	41 87%~	61 98%*	61 98%*	~	~	~	~	~	~	117 91%	64 98%*	172 94%~	11 92%~	142 93%~	46 96%
TOP BOX SCORE	172 86%	2765 90%	44 86%	34 83%~	36 77%~	58 94%*	61 98%*	~	~	~	~	~	~	104 81%*	63 97%*	162 89%~	6 50%~	131 86%~	41 85%
NOT ANSWERED	4	26			1	3								2		3		3	1
VALID CASES	201	3081	51	41	47	62	62							128	65	183	12	153	48
NUMBER OF RESPONDENTS	205 100%	3107 100%	51 100%	41 100%	48 100%	65 100%	62 100%							130 100%	65 100%	186 100%	12 100%	156 100%	49 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD POOR	NO CCC	CCC
Q32 NEVER	7 3%	64 2%	1 2%	~	2 4%	4 6%	2 3%	~	~	~	~	~	~	4 3%	2 3%	7 4%	~	5 3%	2 4%
SOMETIMES	3 1%	100 3%	~	2%	1 2%	1 2%	~	~	~	~	~	~	~	3 2%	~	3 2%	~	3 2%	~
USUALLY	33 16%	428 14%	6 12%	10 24%	7 15%	10 16%	10 16%	~	~	~	~	~	~	21 16%	11 17%	28 15%	4 33%	22 14%	11 22%
ALWAYS	161 79%	2486 81%	44 86%	30 73%	38 79%	49 77%	50 81%	~	~	~	~	~	~	102 78%	52 80%	148 80%	8 67%	125 81%	36 73%
#ALWAYS + USUALLY (NET)	194 95%	2914 95%	50 98%	40 98%	45 94%	59 92%	60 97%	~	~	~	~	~	~	123 95%	63 97%	176 95%	12 100%	147 95%	47 96%
TOP BOX SCORE	161 79%	2486 81%	44 86%	30 73%	38 79%	49 77%	50 81%	~	~	~	~	~	~	102 78%	52 80%	148 80%	8 67%	125 81%	36 73%
NOT ANSWERED		1 29				1													1
VALID CASES	204	3078	51	41	48	64	62							130	65	186	12	155	49
NUMBER OF RESPONDENTS	205 100%	3107 100%	51 100%	41 100%	48 100%	65 100%	62 100%							130 100%	65 100%	186 100%	12 100%	156 100%	49 100%

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



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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND NATV ###	AMER IND/ ALSK #	MUL-TI##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q33 NEVER	1 0.5%	29 0.9%	~	~	2%~	~	~	~	~	~	~	~	1 ~0.8%	1 ~0.5%	1 ~0.6%			
SOMETIMES	4 2%	120 4%*	~	2%~	3%~	3%	~	~	~	~	~	~	2 2%	2 3%	2 1%~	2 17%~	2 1%~	2 4%
USUALLY	38 19%	422 14%	8 16%	10 24%~	8 17%~	12 19%	21 34%*	~	~	~	~	~	14 ~11%*	22 34%*	35 19%~	2 17%~	25 16%~	13 27%
ALWAYS	161 79%	2505 81%	43 84%	30 73%~	36 75%~	52 81%	39 63%*	~	~	~	~	~	113 ~87%*	41 63%*	148 80%~	8 67%~	127 82%~	34 69%
#ALWAYS + USUALLY (NET)	199 98%	2927 95%*	51 100%~	40 98%~	44 92%~	64 100%~	60 97%	~	~	~	~	~	127 ~98%	63 97%	183 98%~	10 83%~	152 98%~	47 96%
TOP BOX SCORE	161 79%	2505 81%	43 84%	30 73%~	36 75%~	52 81%	39 63%*	~	~	~	~	~	113 ~87%*	41 63%*	148 80%~	8 67%~	127 82%~	34 69%
NOT ANSWERED	1	31				1												1
VALID CASES	204	3076	51	41	48	64	62						130	65	186	12	155	49
NUMBER OF RESPONDENTS	205	3107	51	41	48	65	62						130	65	186	12	156	49
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND ###	AMER IND/PAC ALSK ##	OTHR #	MUL-TI##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
Q34 NEVER	1 0.5%	30 1%	~	~	~	2%	~	~	~	~	~	~	1 ~0.8%	1 ~0.5%	1 ~0.6%			
SOMETIMES	5 2%	85 3%	~	2%~	4%~	3%	4 7%	~	~	~	~	~	1 ~0.8%	4 6%	5 3%~	2 1%~	3 6%	
USUALLY	28 14%	368 12%	5 10%	6 15%~	8 17%~	9 14%	15 25%*	~	~	~	~	~	12 ~9%*	15 23%*	27 15%~	1 8%~	20 13%~	8 16%
ALWAYS	169 83%	2589 84%	46 90%	34 83%~	37 79%~	52 81%	42 69%*	~	~	~	~	~	116 ~89%*	45 70%*	152 82%~	11 92%~	131 85%~	38 78%
#ALWAYS + USUALLY (NET)	197 97%	2957 96%	51 100%~	40 98%~	45 96%~	61 95%	57 93%	~	~	~	~	~	128 ~98%	60 94%	179 97%~	12 100%~	151 98%~	46 94%
TOP BOX SCORE	169 83%	2589 84%	46 90%	34 83%~	37 79%~	52 81%	42 69%*	~	~	~	~	~	116 ~89%*	45 70%*	152 82%~	11 92%~	131 85%~	38 78%
NOT ANSWERED	2	35			1	1	1							1	1		2	
VALID CASES	203	3072	51	41	47	64	61						130	64	185	12	154	49
NUMBER OF RESPONDENTS	205 100%	3107 100%	51 100%	41 100%	48 100%	65 100%	62 100%						130 100%	65 100%	186 100%	12 100%	156 100%	49 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ###	AMER IND/ ALSK ###	OTHR #	MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q35 YES	141 69%	2086 68%	10 20%*	27 66%~	42 88%~	62 97%*	46 74%	~	~	~	~	~	~	87 67%	49 75%	129 69%~	8 67%~	109 70%~	32 65%
NO	63 31%	964 32%	41 80%*	14 34%~	6 13%~	2 3%*	16 26%	~	~	~	~	~	~	43 33%	16 25%	57 31%~	4 33%~	46 30%~	17 35%
NOT ANSWERED	1	57				1													1
VALID CASES	204	3050	51	41	48	64	62							130	65	186	12	155	49
NUMBER OF RESPONDENTS	205 100%	3107 100%	51 100%	41 100%	48 100%	65 100%	62 100%							130 100%	65 100%	186 100%	12 100%	156 100%	49 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD POOR	NO CCC	CCC
Q36 NEVER	1 0.7%	25 1%	~	~	~	2%	~	~	~	~	~	~	~	1 1%	~	1 0.8%	~	1 0.9%	~
SOMETIMES	5 4%	112 5%	~	15%	~	2%	1 2%	~	~	~	~	~	~	3 3%	2 4%	5 4%	~	3 3%	2 6%
USUALLY	36 26%	405 20%	10%	37%	33%	18%	20 44%	~	~	~	~	~	~	16 19%*	20 42%	33 26%	2 25%	31 29%	5 16%
ALWAYS	97 70%	1518 74%	90%	48%	64%	80%*	24 53%	~	~	~	~	~	~	66 77%*	26 54%	88 69%	6 75%	73 68%	24 77%
#ALWAYS + USUALLY (NET)	133 96%	1923 93%	100%	85%	98%	98%	44 98%	~	~	~	~	~	~	82 95%	46 96%	121 95%	8 100%	104 96%	29 94%
TOP BOX SCORE	97 70%	1518 74%	90%	48%	64%	80%*	24 53%	~	~	~	~	~	~	66 77%*	26 54%	88 69%	6 75%	73 68%	24 77%
NOT ANSWERED	2	26				2	1							1	1	2		1	1
VALID CASES	139	2060	10	27	42	60	45							86	48	127	8	108	31
NUMBER OF RESPONDENTS	141 100%	2086 100%	10 100%	27 100%	42 100%	62 100%	46 100%							87 100%	49 100%	129 100%	8 100%	109 100%	32 100%

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

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

	BANT	BANT	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	OT1	OT2	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND ###	AMER IND/ ALSK ##	OTHR #	MUL-TI##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
Q37 NEVER	6 3%	72 2%	1 2%	1 2%	2 4%~	2 3%	~	~	~	~	~	~	6 5%*	~	5 3%~	1 8%~	5 3%~	1 2%
SOMETIMES	12 6%	238 8%	2 4%	3 7%~	3 7%~	4 6%	3 5%	~	~	~	~	~	8 6%	3 5%	10 5%~	2 17%~	9 6%~	3 6%
USUALLY	54 27%	692 23%	12 24%	14 34%~	17 38%~	11 18%*	20 32%	~	~	~	~	~	30 24%	21 32%	51 28%~	1 8%~	41 27%~	13 27%
ALWAYS	127 64%	2035 67%	36 71%	23 56%~	23 51%~	45 73%	39 63%	~	~	~	~	~	82 65%	41 63%	116 64%~	8 67%~	95 63%~	32 65%
#ALWAYS + USUALLY (NET)	181 91%	2727 90%	48 94%	37 90%~	40 89%~	56 90%	59 95%	~	~	~	~	~	112 89%	62 95%	167 92%~	9 75%~	136 91%~	45 92%
TOP BOX SCORE	127 64%	2035 67%	36 71%	23 56%~	23 51%~	45 73%	39 63%	~	~	~	~	~	82 65%	41 63%	116 64%~	8 67%~	95 63%~	32 65%
NOT ANSWERED	6	70			3	3							4		4		6	
VALID CASES	199	3037	51	41	45	62	62						126	65	182	12	150	49
NUMBER OF RESPONDENTS	205 100%	3107 100%	51 100%	41 100%	48 100%	65 100%	62 100%						130 100%	65 100%	186 100%	12 100%	156 100%	49 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q38 #YES	179 89%	2662 87%	48 94%	37 90%	40 85%	54 86%	52 84%	~	~	~	~	~	~	117 90%	55 85%	164 89%	10 83%	138 90%	41 85%
NO	23 11%	384 13%	3 6%	4 10%	7 15%	9 14%	10 16%	~	~	~	~	~	~	13 10%	10 15%	21 11%	2 17%	16 10%	7 15%
NOT ANSWERED	3	61				1 2										1		2	1
VALID CASES	202	3046	51	41	47	63	62							130	65	185	12	154	48
NUMBER OF RESPONDENTS	205	3107	51	41	48	65	62							130	65	186	12	156	49
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q39 YES	68 34%	1240 41%*	15 29%	20 50%~	15 33%~	18 28%	24 39%	~	~	~	~	~	~	42 33%	23 36%	61 33%~	7 58%~	42 28%~	26 53%
NO	132 66%	1789 59%*	36 71%	20 50%~	30 67%~	46 72%	38 61%	~	~	~	~	~	~	86 67%	41 64%	122 67%~	5 42%~	109 72%~	23 47%
NOT ANSWERED	5	78		1	3	1								2	1	3		5	
VALID CASES	200	3029	51	40	45	64	62							128	64	183	12	151	49
NUMBER OF RESPONDENTS	205	3107	51	41	48	65	62							130	65	186	12	156	49
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q40 NEVER	2 3%	81 7%	~	~	1 7%	1 6%	2 8%	~	~	~	~	~	~	2 9%	2 3%	~	1 3%	1 4%
SOMETIMES	11 17%	139 12%	1 7%	4 20%	~	6 35%	5 21%	~	~	~	~	~	5 13%	5 22%	10 17%	1 14%	9 23%	2 8%
USUALLY	18 28%	342 28%	3 21%	9 45%	4 29%	2 12%	7 29%	~	~	~	~	~	11 28%	7 30%	17 29%	1 14%	8 21%	10 38%
ALWAYS	34 52%	645 53%	10 71%	7 35%	9 64%	8 47%	10 42%	~	~	~	~	~	23 59%	9 39%	29 50%	5 71%	21 54%	13 50%
#ALWAYS + USUALLY (NET)	52 80%	987 82%	13 93%	16 80%	13 93%	10 59%	17 71%	~	~	~	~	~	34 87%	16 70%	46 79%	6 86%	29 74%	23 88%
TOP BOX SCORE	34 52%	645 53%	10 71%	7 35%	9 64%	8 47%	10 42%	~	~	~	~	~	23 59%	9 39%	29 50%	5 71%	21 54%	13 50%
NOT ANSWERED	3	33	1		1	1							3		3		3	
VALID CASES	65	1207	14	20	14	17	24						39	23	58	7	39	26
NUMBER OF RESPONDENTS	68 100%	1240 100%	15 100%	20 100%	15 100%	18 100%	24 100%						42 100%	23 100%	61 100%	7 100%	42 100%	26 100%

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



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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER					
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q41 WORST PERSONAL DOCTOR POSSIBLE		6 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
01		4 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
02	1 0.3%	12 0.3%	~	2%	~	~	1%	~	~	~	~	~	~	~	1 ~0.9%	1 0.4%	~	1 ~0.4%		
03	1 0.3%	23 0.5%	~	2%	~	~	1%	~	~	~	~	~	~	~	1 ~0.9%	1 0.4%	~	1 ~0.4%		
04	2 0.7%	19 0.4%	~	~	1%	1%	2%	~	~	~	~	~	~	~	2 2%	2 0.7%	~	2 ~0.9%		
05	4 1%	105 2%	1 2%	1 2%	1 1%	1 1%	2 2%	~	~	~	~	~	~	~	2 1%	2 2%	3 1%	1 6%	1 ~0.4%	3 5%
06	6 2%	97 2%	~	3%	2%	2%	2%	~	~	~	~	~	~	~	3 2%	2 2%	5 2%	1 6%	3 1%	3 5%
07	14 5%	261 6%	2 3%	4 6%	5 6%	3 3%	10 10%*	~	~	~	~	~	~	~	4 2%*	10 9%*	12 4%	2 12%	7 3%	7 11%
08	53 18%	672 16%	8 14%	7 11%	18 22%	20 22%	25 25%*	~	~	~	~	~	~	~	25 14%*	26 25%*	45 17%	5 29%	39 17%	14 22%
09	54 18%	839 20%	11 19%	13 21%	14 17%	16 18%	19 19%	~	~	~	~	~	~	~	33 18%	21 20%	53 20%	1 6%	45 20%	9 14%
BEST PERSONAL DOCTOR POSSIBLE	159 54%	2208 52%	37 63%	33 53%	42 51%	47 52%	38 38%*	~	~	~	~	~	~	~	113 63%*	41 39%*	148 55%	7 41%	131 57%	28 44%
#8-10 (NET)	266 90%	3719 88%	56 95%	53 85%	74 89%	83 92%	82 82%*	~	~	~	~	~	~	~	171 95%*	88 83%*	246 91%	13 76%	215 93%*	51 80%

Continued

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ PAC ALSK ##	OTHR #	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	NO CCC	CCC
9-10 (NET)	213 72%	3047 72%	48 81%	46 74%	56 67%	63 70%	57 57%*	~	~	~	~	~	146 81%*	62 58%*	201 74%~	8 47%~	176 77%*	37 58%
NOT ANSWERED	10	191	1	2	3	4	2						5	2	8		10	
VALID CASES	294	4246	59	62	83	90	100						180	106	270	17	230	64
NUMBER OF RESPONDENTS	304 100%	4437 100%	60 100%	64 100%	86 100%	94 100%	102 100%						185 100%	108 100%	278 100%	17 100%	240 100%	64 100%
MEAN	9.07	8.98	9.36	8.92	8.99	9.07	8.56						9.35	8.60	9.11	8.47	9.18	8.67
p stat_(*=Sig @ p<=.05)		.209	.030*	.403	.496	.966	.000*	~	~	~	~	~	~.000*	.000*	~	~	~.014*	

[ASKED IF Q30 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALS ##	OTHR #	MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q42 YES	59 20%	1096 26%*	12 21%	11 18%	16 19%	20 22%	28 28%*	~	~	~	~	~	29 16%*	29 28%*	50 19%~	8 50%~	18 8%*	41 65%
NO	233 80%	3160 74%*	46 79%	50 82%	67 81%	70 78%	72 72%*	~	~	~	~	~	150 84%*	75 72%*	219 81%~	8 50%~	211 92%*	22 35%
NOT ANSWERED	12	181	2	3	3	4	2						6	4	9	1	11	1
VALID CASES	292	4256	58	61	83	90	100						179	104	269	16	229	63
NUMBER OF RESPONDENTS	304 100%	4437 100%	60 100%	64 100%	86 100%	94 100%	102 100%						185 100%	108 100%	278 100%	17 100%	240 100%	64 100%

[ASKED IF Q30 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q43 #YES	52 88%	955 90%	11 92%~	8 73%~	16 100%~	17 85%~	25 89%~	~	~	~	~	~	~	26 90%~	26 90%~	43 86%~	8 100%~	15 83%~	37 90%
NO	7 12%	109 10%	1 8%~	3 27%~	~	3 15%~	3 11%~	~	~	~	~	~	~	3 10%~	3 10%~	7 14%~	~	3 17%~	4 10%
NOT ANSWERED		32																	
VALID CASES	59	1064	12	11	16	20	28							29	29	50	8	18	41
NUMBER OF RESPONDENTS	59	1096	12	11	16	20	28							29	29	50	8	18	41
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q44 #YES	53 90%	906 85%	11 92%~	9 82%~	16 100%~	17 85%~	25 89%~	~	~	~	~	~	~	27 93%~	26 90%~	44 88%~	8 100%~	15 83%~	38 93%
NO	6 10%	155 15%	1 8%~	2 18%~		3 15%~	3 11%~	~	~	~	~	~	~	2 7%~	3 10%~	6 12%~		3 17%~	3 7%
NOT ANSWERED		35																	
VALID CASES	59	1061	12	11	16	20	28							29	29	50	8	18	41
NUMBER OF RESPONDENTS	59	1096	12	11	16	20	28							29	29	50	8	18	41
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND ###	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q45 YES	53 16%	856 17%	7 12%	11 16%	13 13%	22 19%	23 20%	~	~	~	~	~	25 12%*	25 20%	40 13%~	11 52%~	20 7%*	33 48%
NO	288 84%	4125 83%	53 88%	56 84%	84 87%	95 81%	90 80%	~	~	~	~	~	183 88%*	97 80%	271 87%~	10 48%~	252 93%*	36 52%
NOT ANSWERED	16	328	2	5	6	3	1						3	1	4		16	
VALID CASES	341	4981	60	67	97	117	113						208	122	311	21	272	69
NUMBER OF RESPONDENTS	357 100%	5309 100%	62 100%	72 100%	103 100%	120 100%	114 100%						211 100%	123 100%	315 100%	21 100%	288 100%	69 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD POOR	NO CCC	CCC
Q46 NEVER	5 10%	59 7%	1 14%~	3 ~	1 8%~	3 14%~	2 9%~	~	~	~	~	~	~	2 8%~	3 12%~	4 10%~	1 10%~	4 20%~	1 3%
SOMETIMES	12 23%	127 15%	1 14%~	3 27%~	3 25%~	5 23%~	4 17%~	~	~	~	~	~	~	7 29%~	4 16%~	10 25%~	2 20%~	3 15%~	9 28%
USUALLY	20 38%	239 29%	3 43%~	5 45%~	3 25%~	9 41%~	11 48%~	~	~	~	~	~	~	9 38%~	11 44%~	13 33%~	6 60%~	7 35%~	13 41%
ALWAYS	15 29%	410 49%*	2 29%~	3 27%~	5 42%~	5 23%~	6 26%~	~	~	~	~	~	~	6 25%~	7 28%~	13 33%~	1 10%~	6 30%~	9 28%
#ALWAYS + USUALLY (NET)	35 67%	649 78%	5 71%~	8 73%~	8 67%~	14 64%~	17 74%~	~	~	~	~	~	~	15 63%~	18 72%~	26 65%~	7 70%~	13 65%~	22 69%
TOP BOX SCORE	15 29%	410 49%*	2 29%~	3 27%~	5 42%~	5 23%~	6 26%~	~	~	~	~	~	~	6 25%~	7 28%~	13 33%~	1 10%~	6 30%~	9 28%
NOT ANSWERED	1	21			1									1			1		1
VALID CASES	52	835	7	11	12	22	23							24	25	40	10	20	32
NUMBER OF RESPONDENTS	53 100%	856 100%	7 100%	11 100%	13 100%	22 100%	23 100%							25 100%	25 100%	40 100%	11 100%	20 100%	33 100%

[ASKED IF Q45 = YES]

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

	BANT	BANT	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	OT1	OT2																	
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ###	AMER IND/ ALSK ##	OTHR #	MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q47 NONE	8 16%	48 6%*	1 14%~	1 9%~	2 17%~	4 19%~	2 9%~	~	~	~	~	~	~	6 24%~	2 8%~	6 15%~	2 18%~	4 21%~	4 13%~
1 SPECIALIST	21 41%	509 61%*	3 43%~	4 36%~	4 33%~	10 48%~	11 48%~	~	~	~	~	~	~	9 36%~	12 48%~	19 49%~	2 18%~	12 63%~	9 28%~
2	16 31%	170 20%	3 43%~	2 18%~	6 50%~	5 24%~	8 35%~	~	~	~	~	~	~	8 32%~	8 32%~	10 26%~	6 55%~	3 16%~	13 41%~
3	1 2%	53 6%*	~	1 9%~	~	~	1 4%~	~	~	~	~	~	~	~	1 4%~	1 3%~	~	~	1 3%~
4	1 2%	27 3%	~	~	~	1 5%~	~	~	~	~	~	~	~	~	~	1 3%~	~	~	1 3%~
5 OR MORE SPECIALISTS	4 8%	25 3%	~	3 27%~	~	1 5%~	1 4%~	~	~	~	~	~	~	2 8%~	2 8%~	2 5%~	1 9%~	~	4 13%~
NOT ANSWERED	2	24			1	1										1		1	1
VALID CASES	51	832	7	11	12	21	23							25	25	39	11	19	32
NUMBER OF RESPONDENTS	53	856	7	11	13	22	23							25	25	40	11	20	33
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]



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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND ###	AMER IND/ NATV ###	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q48 WORST SPECIALIST POSSIBLE		7 0.9%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
01		1 0.1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
02	1 2%	5 0.6%~	~	~	~	1 6%~	1 5%~	~	~	~	~	~	~	1 4%~	1 3%~	~	1 7%~	~	
03		7 0.9%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
04		5 0.6%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
05	3 7%	20 3%~	~	1 10%~	~	2 12%~	1 5%~	~	~	~	~	~	~	2 11%~	1 4%~	2 6%~	1 11%~	3 20%~	
06		24 3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
07		51 7%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
08	8 19%	135 17%~	~	2 20%~	2 20%~	4 24%~	5 24%~	~	~	~	~	~	~	1 5%~	6 26%~	7 21%~	1 11%~	3 20%~	5 18%~
09	13 30%	171 22%~	1 17%~	4 40%~	5 50%~	3 18%~	8 38%~	~	~	~	~	~	~	5 26%~	8 35%~	9 27%~	3 33%~	5 33%~	8 29%~
BEST SPECIALIST POSSIBLE	18 42%	353 45%~	5 83%~	3 30%~	3 30%~	7 41%~	6 29%~	~	~	~	~	~	~	11 58%~	7 30%~	14 42%~	4 44%~	3 20%~	15 54%~

Continued

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
#8-10 (NET)	39 91%	659 85%~100%	6 90%	9 100%	10 82%	14 90%	19 ~	~	~	~	~	~	17 89%	21 91%	30 91%	8 89%	11 73%	28 100%
9-10 (NET)	31 72%	524 67%~100%	6 70%	7 80%	8 59%	10 67%	14 ~	~	~	~	~	~	16 84%	15 65%	23 70%	7 78%	8 53%	23 82%
NOT ANSWERED		5																
VALID CASES	43	779	6	10	10	17	21						19	23	33	9	15	28
NUMBER OF RESPONDENTS	43	784	6	10	10	17	21						19	23	33	9	15	28
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%
MEAN	8.79	8.73	9.83	8.70	9.10	8.29	8.52						9.11	8.57	8.76	8.89	7.73	9.36
p_stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ###	AMER IND/ ALSK ###	OTHR #	MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q49 YES	86 26%	1241 25%	15 26%	14 21%	28 29%	29 25%	16 14%*	~	~	~	~	~	~	66 32%*	20 17%*	75 24%~	11 55%~	66 25%	20 30%
NO	250 74%	3699 75%	42 74%	54 79%	69 71%	85 75%	96 86%*	~	~	~	~	~	~	142 68%*	101 83%*	234 76%~	9 45%~	203 75%	47 70%
NOT ANSWERED	21	369	5	4	6	6	2							3	2	6	1	19	2
VALID CASES	336	4940	57	68	97	114	112							208	121	309	20	269	67
NUMBER OF RESPONDENTS	357 100%	5309 100%	62 100%	72 100%	103 100%	120 100%	114 100%							211 100%	123 100%	315 100%	21 100%	288 100%	69 100%

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q50 NEVER	2 2%	36 3%	~	~	2 8%	~	~	~	~	~	~	~	~	1 2%	1 5%	2 3%	1 2%	1 5%	
SOMETIMES	17 20%	228 19%	2 13%	3 21%	8 31%	4 14%	3 20%	~	~	~	~	~	~	13 20%	4 21%	16 22%	1 9%	13 21%	4 20%
USUALLY	26 31%	350 29%	5 33%	5 36%	7 27%	9 32%	4 27%	~	~	~	~	~	~	22 34%	4 21%	21 29%	5 45%	20 32%	6 30%
ALWAYS	38 46%	598 49%	8 53%	6 43%	9 35%	15 54%	8 53%	~	~	~	~	~	~	28 44%	10 53%	33 46%	5 45%	29 46%	9 45%
#ALWAYS + USUALLY (NET)	64 77%	948 78%	13 87%	11 79%	16 62%	24 86%	12 80%	~	~	~	~	~	~	50 78%	14 74%	54 75%	10 91%	49 78%	15 75%
TOP BOX SCORE	38 46%	598 49%	8 53%	6 43%	9 35%	15 54%	8 53%	~	~	~	~	~	~	28 44%	10 53%	33 46%	5 45%	29 46%	9 45%
NOT ANSWERED	3	29			2	1	1							2	1	3		3	
VALID CASES	83	1212	15	14	26	28	15							64	19	72	11	63	20
NUMBER OF RESPONDENTS	86	1241	15	14	28	29	16							66	20	75	11	66	20
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q51 NEVER	4 5%	17 1%	~	~	4 15%	~	~	~	~	~	~	~	3 5%	1 5%	4 6%	~	3 5%	1 5%
SOMETIMES	3 4%	87 7%	~	~	2 8%	1 4%	~	~	~	~	~	~	3 5%	~	3 4%	~	3 5%	~
USUALLY	19 23%	274 23%	4 27%	5 36%	5 19%	5 18%	2 13%	~	~	~	~	~	16 25%	3 16%	14 19%	5 45%	12 19%	7 35%
ALWAYS	57 69%	831 69%	11 73%	9 64%	15 58%	22 79%	13 87%	~	~	~	~	~	42 66%	15 79%	51 71%	6 55%	45 71%	12 60%
#ALWAYS + USUALLY (NET)	76 92%	1105 91%	15 100%	14 100%	20 77%	27 96%	15 100%	~	~	~	~	~	58 91%	18 95%	65 90%	11 100%	57 90%	19 95%
TOP BOX SCORE	57 69%	831 69%	11 73%	9 64%	15 58%	22 79%	13 87%	~	~	~	~	~	42 66%	15 79%	51 71%	6 55%	45 71%	12 60%
NOT ANSWERED		3 32			2	1	1						2	1	3		3	
VALID CASES	83	1209	15	14	26	28	15						64	19	72	11	63	20
NUMBER OF RESPONDENTS	86 100%	1241 100%	15 100%	14 100%	28 100%	29 100%	16 100%						66 100%	20 100%	75 100%	11 100%	66 100%	20 100%

[ASKED IF Q49 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q52 YES	138 41%	1806 37%	26 46%	26 39%	40 41%	46 40%	39 35%	~	~	~	~	~	~	93 45%	40 33%*	125 41%~	10 53%~	108 40%	30 45%
NO	196 59%	3092 63%	30 54%	41 61%	57 59%	68 60%	72 65%	~	~	~	~	~	~	112 55%	80 67%*	183 59%~	9 47%~	160 60%	36 55%
NOT ANSWERED	23	411	6	5	6	6	3							6	3	7	2	20	3
VALID CASES	334	4898	56	67	97	114	111							205	120	308	19	268	66
NUMBER OF RESPONDENTS	357 100%	5309 100%	62 100%	72 100%	103 100%	120 100%	114 100%							211 100%	123 100%	315 100%	21 100%	288 100%	69 100%

Q53 IN THE LAST 6 MONTHS, HOW OFTEN WERE THE FORMS FROM YOUR CHILD'S HEALTH PLAN EASY TO FILL OUT?

	BANT	BANT	AGE				RACE					ETHNIC-	HEALTH		CCC				
	OT1	OT2				13	BLCK	AS-	NATV	AMER		HIS-	HIS-	EX &	FAIR	NO	CCC		
	PCG	OHP	<4	4-7	8-12	AND	OR	AFR-	IAN	ILND	NATV	OTHR	MUL-	NOT	VERY	GOOD	POOR	CCC	CCC
	TOT	TOT					AFR-	IAN	ILND	NATV	OTHR	MUL-	PAN-	PAN-	GOOD	POOR	CCC	CCC	
	CHLD	CHLD					WHTE	#	##	##	##	#	TI##	IC	IC	GOOD	POOR	CCC	CCC
Q53																			
NEVER	6	83		2	2	2	3	~	~	~	~	~	~	3	3	5		4	2
	2%	2%	~	3%	2%	2%	3%							2%	3%	2%~		2%	3%
SOMETIMES	30	357	5	3	8	14	6	~	~	~	~	~	~	24	6	28	2	22	8
	9%	7%	10%	5%	8%	13%	6%							12%*	5%*	9%~	11%~	8%	12%
USUALLY	46	646	5	13	16	12	18	~	~	~	~	~	~	27	17	44	2	35	11
	14%	13%	10%	20%	17%	11%	17%							14%	15%	15%~	11%~	14%	17%
ALWAYS	242	3743	42	47	70	83	82	~	~	~	~	~	~	144	91	221	15	198	44
	75%	78%	81%	72%	73%	75%	75%							73%	78%	74%~	79%~	76%	68%
#ALWAYS + USUALLY (NET)	288	4389	47	60	86	95	100	~	~	~	~	~	~	171	108	265	17	233	55
	89%	91%	90%	92%	90%	86%	92%							86%	92%	89%~	89%~	90%	85%
TOP BOX SCORE	242	3743	42	47	70	83	82	~	~	~	~	~	~	144	91	221	15	198	44
	75%	78%	81%	72%	73%	75%	75%							73%	78%	74%~	79%~	76%	68%
NOT ANSWERED	10	69	4	2	1	3	2							7	3	10		9	1
VALID CASES	324	4829	52	65	96	111	109							198	117	298	19	259	65
NUMBER OF RESPONDENTS	334	4898	56	67	97	114	111							205	120	308	19	268	66
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q54 WORST HEALTH PLAN POSSIBLE	1 0.3%	17 0.3%	~	~	1 1%	~	~	~	~	~	~	~	~	1 ~0.8%	1 0.3%	~	1 ~0.4%		
01	1 0.3%	14 0.3%	~	~	~	1 0.9%	~	~	~	~	~	~	~	1 ~0.8%	1 0.3%	~	1 ~0.4%		
02	1 0.3%	21 0.4%	~	1 1%	~	~	1 ~0.9%	~	~	~	~	~	~	1 ~0.8%	1 0.3%	~	1 ~1%		
03	1 0.3%	35 0.7%	~	~	~	1 ~0.9%	~	~	~	~	~	~	1 ~0.5%	1 ~0.3%	~	~	1 ~1%		
04	1 0.3%	62 1%*	~	~	1 1%	~	1 ~0.9%	~	~	~	~	~	~	1 ~0.8%	1 0.3%	~	1 ~1%		
05	13 4%	266 5%	3 5%	3 4%	2 2%	5 5%	7 6%	~	~	~	~	~	~	4 2%*	9 8%*	12 4%~	1 5%~	12 5%	1 1%
06	11 3%	237 5%	~	4 6%	4 4%	3 3%	5 5%	~	~	~	~	~	~	4 2%	5 4%	10 3%~	1 5%~	10 4%	1 1%
07	29 9%	471 10%	4 7%	5 7%	7 7%	13 12%	14 13%	~	~	~	~	~	~	13 6%	14 12%	23 8%~	3 14%~	20 8%	9 13%
08	46 14%	939 19%*	5 9%	10 15%	12 12%	19 17%	24 22%*	~	~	~	~	~	~	19 9%*	27 23%*	43 14%~	3 14%~	29 11%*	17 25%
09	55 17%	844 17%	9 16%	11 16%	21 21%	14 13%	18 17%	~	~	~	~	~	~	36 17%	19 16%	55 18%~	~	44 17%	11 16%
BEST HEALTH PLAN POSSIBLE	172 52%	1982 41%*	36 63%	33 49%	50 51%	53 49%	38 35%*	~	~	~	~	~	~	129 63%*	40 34%*	156 51%~	13 62%~	146 56%*	26 38%
#8-10 (NET)	273 82%	3765 77%*	50 88%	54 81%	83 85%	86 79%	80 73%*	~	~	~	~	~	~	184 89%*	86 73%*	254 84%~	16 76%~	219 83%	54 79%

Continued



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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
9-10 (NET)	227 69%	2826 58%*	45 79%*	44 66%	71 72%	67 61%	56 51%*	~	~	~	~	~	165 80%*	59 50%*	211 69%~	13 62%~	190 72%*	37 54%
NOT ANSWERED	26	421	5	5	5	11	5						5	5	11		25	1
VALID CASES	331	4888	57	67	98	109	109						206	118	304	21	263	68
NUMBER OF RESPONDENTS	357 100%	5309 100%	62 100%	72 100%	103 100%	120 100%	114 100%						211 100%	123 100%	315 100%	21 100%	288 100%	69 100%
MEAN	8.84	8.47	9.19	8.73	8.90	8.68	8.29						9.24	8.19	8.85	8.86	8.93	8.50
p stat_(*=Sig @ p<=.05)		.000*	.076	.546	.693	.215	.000*	~	~	~	~	~	~.000*	0.000*	~		~.053	

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q55 YES	115 34%	1910 39%*	26 44%	28 41%	28 28%	33 29%	46 40%	~	~	~	~	~	64 30%	49 40%	103 33%~	10 48%~	72 26%*	43 62%
NO	226 66%	3030 61%*	33 56%	40 59%	71 72%	82 71%	68 60%	~	~	~	~	~	146 70%	74 60%	211 67%~	11 52%~	200 74%*	26 38%
NOT ANSWERED	16	369	3	4	4	5							1		1		16	
VALID CASES	341	4940	59	68	99	115	114						210	123	314	21	272	69
NUMBER OF RESPONDENTS	357 100%	5309 100%	62 100%	72 100%	103 100%	120 100%	114 100%						211 100%	123 100%	315 100%	21 100%	288 100%	69 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	NO CCC	CCC	
Q56 NEVER	2 2%	42 2%	~	~	4%~	1 3%~	2 4%~	~	~	~	~	~	~	~	2 4%~	2 2%~	1 1%~	1 2%~	
SOMETIMES	9 8%	156 8%	1 4%~	5 18%~	1 4%~	2 6%~	2 4%~	~	~	~	~	~	~	5 8%	4 8%~	9 9%~	6 9%~	3 7%~	
USUALLY	29 26%	483 26%	6 24%~	8 29%~	10 36%~	5 16%~	13 29%~	~	~	~	~	~	~	16 26%	13 27%~	24 24%~	4 40%~	16 23%~	13 30%
ALWAYS	72 64%	1206 64%	18 72%~	15 54%~	16 57%~	23 74%~	28 62%~	~	~	~	~	~	~	41 66%	29 60%~	65 65%~	6 60%~	46 67%~	26 60%
#ALWAYS + USUALLY (NET)	101 90%	1689 90%	24 96%~	23 82%~	26 93%~	28 90%~	41 91%~	~	~	~	~	~	~	57 92%	42 88%~	89 89%~	10 100%~	62 90%~	39 91%
TOP BOX SCORE	72 64%	1206 64%	18 72%~	15 54%~	16 57%~	23 74%~	28 62%~	~	~	~	~	~	~	41 66%	29 60%~	65 65%~	6 60%~	46 67%~	26 60%
NOT ANSWERED	3	23	1			2	1							2	1	3		3	
VALID CASES	112	1887	25	28	28	31	45							62	48	100	10	69	43
NUMBER OF RESPONDENTS	115 100%	1910 100%	26 100%	28 100%	28 100%	33 100%	46 100%							64 100%	49 100%	103 100%	10 100%	72 100%	43 100%

[ASKED IF Q55 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC
Q57 #YES	81 72%	1118 60%*	20 77%~	19 68%~	18 69%~	24 73%~	24 53%~	~	~	~	~	~	~	52 83%*	28 57%~	73 72%~	8 80%~	48 69%~	33 77%
NO	32 28%	755 40%*	6 23%~	9 32%~	8 31%~	9 27%~	21 47%~	~	~	~	~	~	~	11 17%*	21 43%~	29 28%~	2 20%~	22 31%~	10 23%
NOT ANSWERED	2	37			2		1							1		1		2	
VALID CASES	113	1873	26	28	26	33	45							63	49	102	10	70	43
NUMBER OF RESPONDENTS	115	1910	26	28	28	33	46							64	49	103	10	72	43
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER HAW/ IND/ PAC ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC
Q57A YES	290 87%	3983 82%*	49 84%	59 89%	88 90%	94 84%	94 83%	~	~	~	~	~	~	181 88%	103 84%	270 87%~	17 81%~	233 88%	57 84%
NO	44 13%	876 18%*	9 16%	7 11%	10 10%	18 16%	19 17%	~	~	~	~	~	~	24 12%	20 16%	39 13%~	4 19%~	33 12%	11 16%
NOT ANSWERED	23	450	4	6	5	8	1							6		6		22	1
VALID CASES	334	4859	58	66	98	112	113							205	123	309	21	266	68
NUMBER OF RESPONDENTS	357	5309	62	72	103	120	114							211	123	315	21	288	69
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND NATV ###	AMER IND/ ALS K ###	OTHR #	MUL- TI###	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q57B YES	223 67%	2993 61%*	37 64%	44 65%	72 74%	70 64%	71 63%	~	~	~	~	~	~	142 70%	78 63%	207 67%~	13 65%~	183 69%	40 60%
NO	110 33%	1901 39%*	21 36%	24 35%	25 26%	40 36%	42 37%	~	~	~	~	~	~	61 30%	45 37%	101 33%~	7 35%~	83 31%	27 40%
NOT ANSWERED	24	415	4	4	6	10	1							8		7	1	22	2
VALID CASES	333	4894	58	68	97	110	113							203	123	308	20	266	67
NUMBER OF RESPONDENTS	357 100%	5309 100%	62 100%	72 100%	103 100%	120 100%	114 100%							211 100%	123 100%	315 100%	21 100%	288 100%	69 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER IND/ALSK #	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q57C NEVER	1 0.5%	52 2%*	~	~	1 1%	~	1 1%	~	~	~	~	~	~	~	1 1%	1 0.5%~	~	1 0.6%~	~
SOMETIMES	8 4%	168 6%	~	1 2%~	2 3%	5 7%	2 3%	~	~	~	~	~	~	5 4%	3 4%	7 3%~	1 8%~	5 3%~	3 8%
USUALLY	45 20%	532 18%	14%~	6 14%~	18 25%	16 23%	15 21%	~	~	~	~	~	~	28 20%	17 22%	41 20%~	4 31%~	37 21%~	8 20%
ALWAYS	166 75%	2201 75%	86%~	31 84%~	37 84%~	50 70%	48 70%	52 74%	~	~	~	~	~	107 76%	56 73%	155 76%~	8 62%~	137 76%~	29 73%
#ALWAYS + USUALLY (NET)	211 96%	2733 93%*	100%~	36 98%~	43 98%~	68 96%	64 93%	67 96%	~	~	~	~	~	135 96%	73 95%	196 96%~	12 92%~	174 97%~	37 93%
TOP BOX SCORE	166 75%	2201 75%	86%~	31 84%~	37 84%~	50 70%	48 70%	52 74%	~	~	~	~	~	107 76%	56 73%	155 76%~	8 62%~	137 76%~	29 73%
NOT ANSWERED	3	40	1		1	1	1							2	1	3		3	
VALID CASES	220	2953	36	44	71	69	70							140	77	204	13	180	40
NUMBER OF RESPONDENTS	223 100%	2993 100%	37 100%	44 100%	72 100%	70 100%	71 100%							142 100%	78 100%	207 100%	13 100%	183 100%	40 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q57D NEVER	46 25%	609 28%	8 25%	10 32%	12 20%	16 25%	11 23%	~	~	~	~	~	~	30 23%	15 28%	43 25%	3 21%	38 25%	8 22%
SOMETIMES	38 20%	384 18%	2 6%	4 13%	14 23%	18 29%	7 15%	~	~	~	~	~	~	29 23%	7 13%	33 19%	5 36%	33 22%	5 14%
USUALLY	48 26%	484 22%	7 22%	9 29%	20 33%	12 19%	18 38%	~	~	~	~	~	~	30 23%	18 33%	45 26%	3 21%	33 22%	15 41%
ALWAYS	55 29%	716 33%	15 47%	8 26%	15 25%	17 27%	11 23%	~	~	~	~	~	~	39 30%	14 26%	49 29%	3 21%	46 31%	9 24%
#ALWAYS + USUALLY (NET)	103 55%	1200 55%	22 69%	17 55%	35 57%	29 46%	29 62%	~	~	~	~	~	~	69 54%	32 59%	94 55%	6 43%	79 53%	24 65%
TOP BOX SCORE	55 29%	716 33%	15 47%	8 26%	15 25%	17 27%	11 23%	~	~	~	~	~	~	39 30%	14 26%	49 29%	3 21%	46 31%	9 24%
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	146	2639	26	37	34	49	64							78	67	139	6	115	31
NOT ANSWERED	24	477	4	4	8	8	3							5	2	6	1	23	1
VALID CASES	187	2193	32	31	61	63	47							128	54	170	14	150	37
NUMBER OF RESPONDENTS	357 100%	5309 100%	62 100%	72 100%	103 100%	120 100%	114 100%							211 100%	123 100%	315 100%	21 100%	288 100%	69 100%



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

	BANT OT1	BANT OT2	AGE				RACE					ETHNIC-ITY	HEALTH STATUS		CCC SCREENER				
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-#	AS-IAN##	NATV HAW/ILND##	AMER IND/PAC ALSK##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q57E EXTREMELY DIFFICULT	4 1%	164 3%*	~	~	2%	2%	1 0.9%	~	~	~	~	~	~	2 1%	1 0.8%	3 1%	1 5%	3 1%	1 2%
01	4 1%	92 2%	~	1%	1%	2%	1 0.9%	~	~	~	~	~	~	3 1%	1 0.8%	4 1%	~	4 1%	~
02	4 1%	75 1%	~	1%	1%	2%	3 3%	~	~	~	~	~	~	~	4 3%*	4 1%	~	4 1%	~
03	2 0.6%	133 3%*	~	~	~	2%	1 0.9%	~	~	~	~	~	~	1 0.5%	1 0.8%	2 0.7%	~	1 0.4%	1 2%
04	2 0.6%	87 2%*	~	1%	~	0.9%	1 0.9%	~	~	~	~	~	~	1 0.5%	1 0.8%	1 0.3%	1 5%	1 0.4%	1 2%
05	15 4%	371 7%*	3%	3%	3%	7%	9 8%*	~	~	~	~	~	~	6 3%	9 8%	11 4%	3 15%	12 4%	3 5%
06	17 5%	203 4%	3%	3%	3%	9%	8 7%	~	~	~	~	~	~	7 3%	9 8%	14 5%	3 15%	11 4%	6 10%
07	20 6%	375 7%	9%	6%	3%	7%	10 9%	~	~	~	~	~	~	10 5%	10 8%	20 7%	~	16 6%	4 6%
09	122 36%	1657 33%	34%	36%	38%	36%	32 29%	~	~	~	~	~	~	71 35%	35 30%	103 34%	5 25%	95 35%	27 43%
EXTREMELY EASY	148 44%	1890 37%*	50%	49%	49%	33%*	43 39%	~	~	~	~	~	~	100 50%*	47 40%	139 46%	7 35%	128 47%*	20 32%
#8-10 (NET)	270 80%	3547 70%*	84%	84%	86%*	69%*	75 69%*	~	~	~	~	~	~	171 85%*	82 69%*	242 80%	12 60%	223 81%	47 75%
9-10 (NET)	270 80%	3547 70%*	84%	84%	86%*	69%*	75 69%*	~	~	~	~	~	~	171 85%*	82 69%*	242 80%	12 60%	223 81%	47 75%

Continued

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER				
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE #	BLK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ PAC ALSK ##	OTHR #	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	NO CCC	CCC
88		1																	
NOT ANSWERED	19	261	4	2	7	6	5							10	5	14	1	13	6
VALID CASES	338	5047	58	70	96	114	109							201	118	301	20	275	63
NUMBER OF RESPONDENTS	357	5309	62	72	103	120	114							211	123	315	21	288	69
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%
MEAN	8.64	8.02	9.09	8.89	8.86	8.08	8.21							8.91	8.22	8.70	7.60	8.70	8.40
p stat_(*=Sig @ p<=.05)		0.000	*.015	*.235	.217	.001	*.014	~	~	~	~	~		~.006	*.011	*	~	~.295	

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND NATV ###	AMER IND/ ALSK ##	OTHR #	MUL-TI##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q58 EXCELLENT	132 39%	2100 43%	29 49%	28 42%	40 41%	35 31%*	54 48%*	~	~	~	~	~	72 34%*	57 47%*	132 42%~	~	121 45%*	11 16%
VERY GOOD	118 35%	1734 35%	16 27%	26 39%	35 36%	41 36%	49 44%*	~	~	~	~	~	63 30%*	55 45%*	118 37%~	~	90 33%	28 42%
GOOD	65 19%	854 17%	12 20%	10 15%	18 19%	25 22%	7 6%*	~	~	~	~	~	55 26%*	8 7%*	65 21%~	~	48 18%	17 25%
FAIR	19 6%	210 4%	2 3%	3 4%	4 4%	10 9%	1 0.9%*	~	~	~	~	~	18 9%*	1 0.8%*	~	19 90%~	9 3%*	10 15%
POOR	2 0.6%	17 0.3%	~	~	~	2 2%	1 0.9%	~	~	~	~	~	1 0.5%	1 0.8%	~	2 10%~	1 0.4%	1 1%
#EXCELLENT + VERY GOOD + GOOD (NET)	315 94%	4688 95%	57 97%	64 96%	93 96%	101 89%*	110 98%*	~	~	~	~	~	190 91%*	120 98%*	315 100%~	~	259 96%*	56 84%
NOT ANSWERED	21	394	3	5	6	7	2						2	1			19	2
VALID CASES	336	4915	59	67	97	113	112						209	122	315	21	269	67
NUMBER OF RESPONDENTS	357 100%	5309 100%	62 100%	72 100%	103 100%	120 100%	114 100%						211 100%	123 100%	315 100%	21 100%	288 100%	69 100%

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

	BANT	BANT	AGE				RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	OT1	OT2	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND NATV ###	AMER IND/ ALSK ##	OTHR #	MUL-TI##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q59	PCG TOT CHLD	OHP TOT CHLD																
EXCELLENT	145 43%	2151 44%	38 66%*	28 42%	41 42%	38 34%*	56 50%	~	~	~	~	~	83 40%	60 49%	141 45%~	3 14%~	132 49%*	13 19%
VERY GOOD	87 26%	1382 28%	7 12%*	24 36%	24 24%	32 28%	31 27%	~	~	~	~	~	52 25%	34 28%	85 27%~	2 10%~	75 28%	12 18%
GOOD	75 22%	930 19%	10 17%	10 15%	24 24%	31 27%	15 13%*	~	~	~	~	~	58 28%*	16 13%*	66 21%~	9 43%~	51 19%*	24 35%
FAIR	26 8%	366 7%	2 3%	4 6%	8 8%	12 11%	10 9%	~	~	~	~	~	14 7%	12 10%	20 6%~	6 29%~	10 4%*	16 24%
POOR	3 0.9%	88 2%	1 2%	1 1%	1 1%		1 0.9%	~	~	~	~	~	2 1%	1 0.8%	2 0.6%~	1 5%~		3 4%
#EXCELLENT + VERY GOOD + GOOD (NET)	307 91%	4463 91%	55 95%	62 93%	89 91%	101 89%	102 90%	~	~	~	~	~	193 92%	110 89%	292 93%~	14 67%~	258 96%*	49 72%
NOT ANSWERED	21	392	4	5	5	7	1						2		1		20	1
VALID CASES	336	4917	58	67	98	113	113						209	123	314	21	268	68
NUMBER OF RESPONDENTS	357 100%	5309 100%	62 100%	72 100%	103 100%	120 100%	114 100%						211 100%	123 100%	315 100%	21 100%	288 100%	69 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND NATV ###	AMER IND/ ALS K ###	OTHR #	MUL- TI###	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q60 YES	61 18%	1056 22%	10 17%	8 12%	18 18%	25 22%	27 24%	~	~	~	~	~	29 14%*	31 25%*	52 17%~	8 38%~	23 9%*	38 55%
NO	278 82%	3853 78%	48 83%	60 88%	80 82%	90 78%	86 76%	~	~	~	~	~	182 86%*	92 75%*	262 83%~	13 62%~	247 91%*	31 45%
NOT ANSWERED	18	400	4	4	5	5	1								1		18	
VALID CASES	339	4909	58	68	98	115	113						211	123	314	21	270	69
NUMBER OF RESPONDENTS	357 100%	5309 100%	62 100%	72 100%	103 100%	120 100%	114 100%						211 100%	123 100%	315 100%	21 100%	288 100%	69 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ###	AMER IND/ ALSK ###	OTHR #	MUL- TI###	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q61 YES	41 69%	843 81%*	4 40%~	6 75%~	14 82%~	17 71%~	20 77%~	~	~	~	~	~	~	18 64%~	22 73%~	32 64%~	8 100%~	4 19%~	37 97%
NO	18 31%	192 19%*	6 60%~	2 25%~	3 18%~	7 29%~	6 23%~	~	~	~	~	~	~	10 36%~	8 27%~	18 36%~	~	17 81%~	1 3%
NOT ANSWERED	2	21				1 1	1							1 1	1	2		2	
VALID CASES	59	1035	10	8	17	24	26							28 29	30 31	50 52	8 8	21 23	38 38
NUMBER OF RESPONDENTS	61 100%	1056 100%	10 100%	8 100%	18 100%	25 100%	27 100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q60 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER PAC ALSK NATV #	MUL-TI##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR POOR	GOOD & FAIR & POOR	NO CCC	CCC	
Q62 YES	35 88%	748 91%	3 100%	5 83%	14 100%	13 76%	18 90%	~	~	~	~	~	14 82%	20 91%	27 87%	7 88%	3 100%	2 5%	35 95%
Q62 NO	5 13%	77 9%	~	1 17%	~	4 24%	2 10%	~	~	~	~	~	3 18%	2 9%	4 13%	1 13%	3 100%	2 5%	5 5%
NOT ANSWERED	1	18	1										1		1		1		1
VALID CASES	40	825	3	6	14	17	20						17	22	31	8	3	37	
NUMBER OF RESPONDENTS	41	843	4	6	14	17	20						18	22	32	8	4	37	
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q60 = YES AND Q61 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER HAW/ PAC ALSK ##	IND/ OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC
Q63 YES	45 14%	832 17%	6 10%	12 18%	15 16%	12 11%	20 18%	~	~	~	~	~	~	21 10%*	23 19%*	37 12%~	7 35%~	6 2%*	39 59%
NO	288 86%	4059 83%	52 90%	56 82%	80 84%	100 89%	92 82%	~	~	~	~	~	~	186 90%*	99 81%*	272 88%~	13 65%~	261 98%*	27 41%
NOT ANSWERED	24	418	4	4	8	8	2							4	1	6	1	21	3
VALID CASES	333	4891	58	68	95	112	112							207	122	309	20	267	66
NUMBER OF RESPONDENTS	357	5309	62	72	103	120	114							211	123	315	21	288	69
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%



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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q64 YES	35 80%	689 85%	6 100%	9 75%	13 87%	7 64%	18 90%	~	~	~	~	~	~	14 70%	20 87%	28 78%	6 86%	1 17%	34 89%
NO	9 20%	123 15%	~	3 25%	2 13%	4 36%	2 10%	~	~	~	~	~	~	6 30%	3 13%	8 22%	1 14%	5 83%	4 11%
NOT ANSWERED	1	20				1								1		1			1
VALID CASES	44	812	6	12	15	11	20							20	23	36	7	6	38
NUMBER OF RESPONDENTS	45	832	6	12	15	12	20							21	23	37	7	6	39
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q63 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q65 YES	34 97%	662 97%	6 100%	8 89%	13 100%	7 100%	18 100%	~	~	~	~	~	14 100%	19 95%	27 96%	6 100%	34 100%	
NO	1 3%	19 3%	~	1 11%	~	~	~	~	~	~	~	~	1 5%	1 4%	~	1 100%		
NOT ANSWERED		8																
VALID CASES	35	681	6	9	13	7	18						14	20	28	6	1	34
NUMBER OF RESPONDENTS	35	689	6	9	13	7	18						14	20	28	6	1	34
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q63 = YES AND Q64 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR #	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q66 YES	45 14%	644 13%	8 14%	8 12%	9 9%	20 18%	9 8%*	~	~	~	~	~	~	32 16%	12 10%	35 11%~	9 45%~	14 5%*	31 47%
NO	285 86%	4243 87%	50 86%	57 88%	88 91%	90 82%	102 92%*	~	~	~	~	~	~	174 84%	108 90%	272 89%~	11 55%~	250 95%*	35 53%
NOT ANSWERED	27	422	4	7	6	10	3							5	3	8	1	24	3
VALID CASES	330	4887	58	65	97	110	111							206	120	307	20	264	66
NUMBER OF RESPONDENTS	357	5309	62	72	103	120	114							211	123	315	21	288	69
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND NATV ###	AMER IND/ ALSK #	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q67 YES	27 60%	508 81%	3 38%	7 88%	4 44%	13 65%	9 100%	~	~	~	~	~	15 47%	11 92%	18 51%	8 89%	~	27 87%
NO	18 40%	121 19%	5 63%	1 13%	5 56%	7 35%	~	~	~	~	~	~	17 53%	1 8%	17 49%	1 11%	14 100%	4 13%
NOT ANSWERED		15																
VALID CASES	45	629	8	8	9	20	9						32	12	35	9	14	31
NUMBER OF RESPONDENTS	45	644	8	8	9	20	9						32	12	35	9	14	31
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q66 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND NATV ###	AMER IND/ ALS K ###	OTHR #	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q68 YES	26 96%	477 96%	3 100%	7 100%	4 100%	12 92%	9 100%	~	~	~	~	~	14 93%	11 100%	18 100%	7 88%	~	26 96%
NO	1 4%	22 4%	~	~	~	1 8%	~	~	~	~	~	~	1 7%	~	~	1 13%	~	1 4%
NOT ANSWERED		9																
VALID CASES	27	499	3	7	4	13	9						15	11	18	8		27
NUMBER OF RESPONDENTS	27 100%	508 100%	3 100%	7 100%	4 100%	13 100%	9 100%						15 100%	11 100%	18 100%	8 100%		27 100%

[ASKED IF Q66 = YES AND Q67 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND NATV ###	AMER IND/ ALSK ###	OTHR #	MUL- TI###	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q69 YES	42 13%	558 11%	8 14%	13 19%	8 8%	13 12%	11 10%	~	~	~	~	~	~	28 13%	13 11%	33 11%~	8 40%~	12 4%*	30 45%
NO	293 87%	4342 89%	50 86%	55 81%	89 92%	99 88%	101 90%	~	~	~	~	~	~	181 87%	109 89%	278 89%~	12 60%~	256 96%*	37 55%
NOT ANSWERED	22	409	4	4	6	8	2							2	1	4	1	20	2
VALID CASES	335	4900	58	68	97	112	112							209	122	311	20	268	67
NUMBER OF RESPONDENTS	357 100%	5309 100%	62 100%	72 100%	103 100%	120 100%	114 100%							211 100%	123 100%	315 100%	21 100%	288 100%	69 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ###	AMER IND/ ALSK ###	OTHR #	MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q70 YES	30 75%	389 72%	5 71%	7 54%	7 88%	11 92%	8 73%	~	~	~	~	~	19 73%	10 77%	23 70%	6 100%	3 27%	27 93%
NO	10 25%	149 28%	2 29%	6 46%	1 13%	1 8%	3 27%	~	~	~	~	~	7 27%	3 23%	10 30%	~	8 73%	2 7%
NOT ANSWERED	2	20	1			1							2			2	1	1
VALID CASES	40	538	7	13	8	12	11						26	13	33	6	11	29
NUMBER OF RESPONDENTS	42	558	8	13	8	13	11						28	13	33	8	12	30
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q69 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALSK ##	OTHR #	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q71 YES	27 90%	357 93%	5 100%	7 100%	6 86%	9 82%	8 100%	~	~	~	~	~	16 84%	10 100%	20 87%	6 100%	27 100%	
NO	3 10%	27 7%	~	~	14 14%	2 18%	~	~	~	~	~	~	3 16%	3 13%	~	~	3 100%	
NOT ANSWERED		5																
VALID CASES	30	384	5	7	7	11	8						19	10	23	6	3	27
NUMBER OF RESPONDENTS	30 100%	389 100%	5 100%	7 100%	7 100%	11 100%	8 100%						19 100%	10 100%	23 100%	6 100%	3 100%	27 100%

[ASKED IF Q69 = YES AND Q70 = YES]



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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q72 YES	43 13%	813 17%*	2 3%*	9 13%	13 14%	19 17%	21 19%*	~	~	~	~	~	~	19 9%*	22 18%*	36 12%~	6 30%~	6 2%*	37 55%
NO	292 87%	4085 83%*	56 97%*	59 87%	83 86%	94 83%	91 81%*	~	~	~	~	~	~	190 91%*	100 82%*	275 88%~	14 70%~	262 98%*	30 45%
NOT ANSWERED	22	411	4	4	7	7	2							2	1	4	1	20	2
VALID CASES	335	4898	58	68	96	113	112							209	122	311	20	268	67
NUMBER OF RESPONDENTS	357	5309	62	72	103	120	114							211	123	315	21	288	69
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ###	AMER IND/ ALS ##	OTHR #	MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q73 YES	35 83%	726 92%	1 50%	9 100%	9 69%	16 89%	18 86%	~	~	~	~	~	14 78%	20 91%	28 80%	6 100%	35 95%	
NO	7 17%	64 8%	1 50%	~	4 31%	2 11%	3 14%	~	~	~	~	~	4 22%	2 9%	7 20%	~	5 100%	2 5%
NOT ANSWERED	1	23				1							1		1		1	
VALID CASES	42	790	2	9	13	18	21						18	22	35	6	5	37
NUMBER OF RESPONDENTS	43	813	2	9	13	19	21						19	22	36	6	6	37
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q72 = YES]

NQ74 WHAT IS YOUR CHILD'S AGE?

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND ##	AMER IND/PAC/ALSK ##	OTHR #	MUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
NQ74																		
3 YEARS OLD OR LESS	62 17%	908 17%	62 100%	~	~	~	17 15%	~	~	~	~	~	39 18%	19 15%	57 18%	2 10%	53 18%	9 13%
4 TO 7 YEARS OLD	72 20%	1228 23%	~	72 ~100%	~	~	20 18%	~	~	~	~	~	45 21%	23 19%	64 20%	3 14%	60 21%	12 17%
8 TO 12 YEARS OLD	103 29%	1650 31%	~	~	103 ~100%	~	35 31%	~	~	~	~	~	61 29%	35 28%	93 30%	4 19%	84 29%	19 28%
13 OR OLDER	120 34%	1523 29%*	~	~	~	120 ~100%	42 37%	~	~	~	~	~	66 31%	46 37%	101 32%	12 57%	91 32%	29 42%
VALID CASES	357	5309	62	72	103	120	114						211	123	315	21	288	69
NUMBER OF RESPONDENTS	357	5309	62	72	103	120	114						211	123	315	21	288	69
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

NQ75 IS YOUR CHILD MALE OR FEMALE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND ###	AMER IND/ ALS ###	OTHR #	MUL- TI###	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NQ75 MALE	177 50%	2736 52%	28 45%	37 51%	54 52%	58 48%	57 50%	~	~	~	~	~	~	109 52%	61 50%	157 50%	12 57%	137 48%	40 58%
FEMALE	180 50%	2573 48%	34 55%	35 49%	49 48%	62 52%	57 50%	~	~	~	~	~	~	102 48%	62 50%	158 50%	9 43%	151 52%	29 42%
VALID CASES	357	5309	62	72	103	120	114							211	123	315	21	288	69
NUMBER OF RESPONDENTS	357 100%	5309 100%	62 100%	72 100%	103 100%	120 100%	114 100%							211 100%	123 100%	315 100%	21 100%	288 100%	69 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ###	AMER IND/ ALS K ###	OTHR #	MUL- TI###	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CC
Q76 HISPANIC OR LATINO	211 63%	1726 35%*	39 67%	45 66%	61 64%	66 59%	~	~	~	~	~	~	211 ~100%	123 ~	190 ~61%	19 90%	177 66%*	34 51%
NOT HISPANIC OR LATINO	123 37%	3146 65%*	19 33%	23 34%	35 36%	46 41%	111 100%	~	~	~	~	~	~	123 ~100%	120 39%	2 10%	90 34%*	33 49%
NOT ANSWERED	23	437	4	4	7	8	3								5		21	2
VALID CASES	334	4872	58	68	96	112	111						211	123	310	21	267	67
NUMBER OF RESPONDENTS	357 100%	5309 100%	62 100%	72 100%	103 100%	120 100%	114 100%						211 100%	123 100%	315 100%	21 100%	288 100%	69 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ###	AMER IND/ ALSK NATV ###	OTHR #	MUL- TI###	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.1 YES	276 77%	3787 71%*	49 79%	59 82%	79 77%	89 74%	114 100%~	~	~	~	~	~	155 ~73%*	118 96%*	258 82%~	15 71%~	214 74%*	62 90%
NO	81 23%	1522 29%*	13 21%	13 18%	24 23%	31 26%	~	~	~	~	~	~	56 ~27%*	5 4%*	57 18%~	6 29%~	74 26%*	7 10%
VALID CASES	357	5309	62	72	103	120	114						211	123	315	21	288	69
NUMBER OF RESPONDENTS	357 100%	5309 100%	62 100%	72 100%	103 100%	120 100%	114 100%						211 100%	123 100%	315 100%	21 100%	288 100%	69 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ PAC	ALSK NATV	OTHR	MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.2 YES	4 1%	204 4%	~	~	2%	2%	~	~	~	~	~	~	~	3 1%	1 0.8%	2 0.6%	2 10%	1 0.3%	3 4%
NO	353 99%	5105 96%	100%	100%	~98%	98%	100%	~	~	~	~	~	~	208 99%	122 99%	313 99%	19 90%	287 100%	66 96%
VALID CASES	357	5309	62	72	103	120	114							211	123	315	21	288	69
NUMBER OF RESPONDENTS	357 100%	5309 100%	62 100%	72 100%	103 100%	120 100%	114 100%							211 100%	123 100%	315 100%	21 100%	288 100%	69 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ###	AMER IND/ ALSK ###	OTHR #	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.3 YES	8 2%	184 3%	~	3%	2%	3%	~	~	~	~	~	~	3 1%	5 4%	7 2%~	1 5%~	6 2%	2 3%
NO	349 98%	5125 97%	100%~	97%	98%	97%	100%~	~	~	~	~	~	208 99%	118 96%	308 98%~	20 95%~	282 98%	67 97%
VALID CASES	357	5309	62	72	103	120	114						211	123	315	21	288	69
NUMBER OF RESPONDENTS	357 100%	5309 100%	100%	100%	100%	100%	100%						211 100%	123 100%	315 100%	21 100%	288 100%	69 100%



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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ###	AMER IND/ ALSK NATV ###	OTHR #	MUL- TI###	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.4 YES	4 1%	83 2%	1 2%	~	1 1%	2 2%	~	~	~	~	~	~	3 1%	1 0.8%	4 1%	~	4 1%*	
NO	353 99%	5226 98%	61 98%	72 100%	102 99%	118 98%	114 100%	~	~	~	~	~	208 99%	122 99%	311 99%	21 100%	284 99%	69 100%
VALID CASES	357	5309	62	72	103	120	114						211	123	315	21	288	69
NUMBER OF RESPONDENTS	357 100%	5309 100%	62 100%	72 100%	103 100%	120 100%	114 100%						211 100%	123 100%	315 100%	21 100%	288 100%	69 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND ###	AMER IND/ ALSK ###	OTHR #	MUL- TI###	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.5 YES	7 2%	335 6%*	4 6%	1 1%	~	2 2%	~	~	~	~	~	~	~	3 1%	4 3%	7 2%~	~	6 2%	1 1%
NO	350 98%	4974 94%*	58 94%	71 99%	103 100%~	118 98%	114 100%~	~	~	~	~	~	~	208 99%	119 97%	308 98%~	21 100%~	282 98%	68 99%
VALID CASES	357	5309	62	72	103	120	114							211	123	315	21	288	69
NUMBER OF RESPONDENTS	357 100%	5309 100%	62 100%	72 100%	103 100%	120 100%	114 100%							211 100%	123 100%	315 100%	21 100%	288 100%	69 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ PAC	ALSK NATV	OTHR	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.6 YES	22 6%	374 7%	7 11%	2 3%	4 4%	9 8%	~	~	~	~	~	~	~	22 10%*	~	21 7%~	1 5%~	18 6%	4 6%
NO	335 94%	4935 93%	55 89%	70 97%	99 96%	111 93%	114 100%~	~	~	~	~	~	~	189 90%*	123 100%~	294 93%~	20 95%~	270 94%	65 94%
VALID CASES	357	5309	62	72	103	120	114							211	123	315	21	288	69
NUMBER OF RESPONDENTS	357 100%	5309 100%	62 100%	72 100%	103 100%	120 100%	114 100%							211 100%	123 100%	315 100%	21 100%	288 100%	69 100%

Q78 WHAT IS YOUR AGE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND NATV ###	AMER IND/ ALSK ##	OTHR #	MUL-TI##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q78 UNDER 18	13 4%	141 3%	1 2%	1 1%	6 6%	5 5%	4 4%	~	~	~	~	~	~	9 4%	3 2%	10 3%~	1 5%~	10 4%	3 5%
18 TO 24	8 2%	161 3%	5 9%*	1 1%	~	2 2%	1 0.9%	~	~	~	~	~	~	7 3%	1 0.8%	8 3%~	~	7 3%	1 2%
25 TO 34	97 29%	1564 32%	27 47%*	34 50%*	25 25%	11 10%*	33 29%	~	~	~	~	~	~	63 30%	33 27%	90 29%~	6 30%~	76 28%	21 32%
35 TO 44	137 41%	1821 37%	22 38%	26 38%	43 43%	46 42%	39 34%	~	~	~	~	~	~	90 43%	46 38%	131 42%~	5 25%~	121 45%*	16 25%
45 TO 54	58 17%	797 16%	2 3%*	5 7%*	19 19%	32 29%*	23 20%	~	~	~	~	~	~	32 15%	24 20%	49 16%~	8 40%~	43 16%	15 23%
55 TO 64	14 4%	266 5%	1 2%	1 1%	4 4%	8 7%	9 8%*	~	~	~	~	~	~	4 2%*	10 8%*	14 5%~	~	8 3%	6 9%
65 TO 74	5 1%	116 2%	~	~	2 2%	3 3%	3 3%	~	~	~	~	~	~	2 1%	3 2%	5 2%~	~	2 0.7%	3 5%
75 OR OLDER	2 0.6%	16 0.3%	~	~	~	2 2%	2 2%~	~	~	~	~	~	~	~	2 2%	2 0.6%~	~	2 0.7%~	~
NOT ANSWERED	23	427	4	4	4	11								4	1	6	1	19	4
VALID CASES	334	4882	58	68	99	109	114							207	122	309	20	269	65
NUMBER OF RESPONDENTS	357	5309	62	72	103	120	114							211	123	315	21	288	69
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

Q79 ARE YOU MALE OR FEMALE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALS K ##	OTHR #	MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q79 MALE	45 13%	702 14%	7 12%	7 10%	16 16%	15 13%	9 8%*	~	~	~	~	~	32 15%	12 10%	41 13%~	3 14%~	37 14%	8 12%
FEMALE	294 87%	4191 86%	51 88%	61 90%	84 84%	98 87%	105 92%*	~	~	~	~	~	178 85%	111 90%	272 87%~	18 86%~	234 86%	60 88%
NOT ANSWERED	18	416	4	4	3	7							1		2		17	1
VALID CASES	339	4893	58	68	100	113	114						210	123	313	21	271	68
NUMBER OF RESPONDENTS	357 100%	5309 100%	62 100%	72 100%	103 100%	120 100%	114 100%						211 100%	123 100%	315 100%	21 100%	288 100%	69 100%

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

	BANT	BANT	AGE				RACE					ETHNIC-	HEALTH		CCC				
	OT1	OT2				13	BLCK	AS-	NATV	AMER		HIS-	HIS-	EX &	FAIR	NO	CCC		
	PCG	OHP	<4	4-7	8-12	AND	OR	AFR-	IAN	HAW/	IND/	NOT	PAN-	VERY	&	CCC	CCC		
	TOT	TOT				OVER	WHTE	#	##	PAC	ALSK	IC	PAN-	GOOD	POOR	CCC	CCC		
	CHLD	CHLD										IC	IC	GOOD	POOR				
Q80																			
8TH GRADE OR LESS	87 26%	479 10%*	8 15%*	14 21%	34 34%*	31 28%	2 2%*	~	~	~	~	~	~	83 40%*	1 0.9%*	70 23%~	14 67%~	75 28%	12 18%
SOME HIGH SCHOOL BUT DID NOT GRADUATE	41 12%	480 10%	12 22%	6 9%	10 10%	13 12%	4 4%*	~	~	~	~	~	~	36 17%*	5 4%*	39 13%~	2 10%~	31 12%	10 15%
HIGH SCHOOL GRADUATE OR GED	95 29%	1452 30%	20 36%	25 37%	22 22%	28 25%	30 27%	~	~	~	~	~	~	62 30%	31 26%	91 30%~	3 14%~	79 30%	16 24%
SOME COLLEGE OR 2-YEAR DEGREE	78 23%	1752 36%*	10 18%	14 21%	23 23%	31 28%	51 46%*	~	~	~	~	~	~	24 11%*	54 46%*	76 25%~	2 10%~	57 22%	21 31%
4-YEAR COLLEGE GRADUATE	25 8%	437 9%	3 5%	6 9%	9 9%	7 6%	17 15%*	~	~	~	~	~	~	4 2%*	20 17%*	24 8%~	~	18 7%	7 10%
MORE THAN 4-YEAR COLLEGE DEGREE	6 2%	238 5%*	2 4%	2 3%	1 1%	1 0.9%	6 5%~	~	~	~	~	~	~	~	6 5%~	6 2%~	~	5 2%	1 1%
NOT ANSWERED	25	471	7	5	4	9	4							2	6	9		23	2
VALID CASES	332	4838	55	67	99	111	110							209	117	306	21	265	67
NUMBER OF RESPONDENTS	357	5309	62	72	103	120	114							211	123	315	21	288	69
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

Q81 HOW ARE YOU RELATED TO THE CHILD?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND NATV ###	AMER IND/ ALSK ##	OTHR #	MUL-TI##	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	EX & FAIR &	NO CCC	CCC
Q81 MOTHER OR FATHER	312 94%	4466 93%	52 93%	66 100%	91 94%	103 92%	94 88%*	~	~	~	~	~	~	204 97%*	102 89%*	286 94%~	20 95%~	258 96%*	54 86%
GRANDPARENT	10 3%	186 4%	3 5%	~	3 3%	4 4%	8 7%*	~	~	~	~	~	~	2 1%*	8 7%*	9 3%~	1 5%~	5 2%	5 8%
AUNT OR UNCLE	1 0.3%	33 0.7%	~	~	~	1 0.9%	1 0.9%	~	~	~	~	~	~	~	1 0.9%	1 0.3%~	~	~	1 2%
OLDER BROTHER OR SISTER	2 0.6%	12 0.2%	~	~	~	2 2%	~	~	~	~	~	~	~	2 1%	~	2 0.7%~	~	2 0.7%	~
OTHER RELATIVE	~	6 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
LEGAL GUARDIAN	5 2%	73 2%	1 2%	~	2 2%	2 2%	4 4%	~	~	~	~	~	~	1 0.5%	4 3%	5 2%~	~	3 1%	2 3%
SOMEONE ELSE	1 0.3%	33 0.7%	~	~	1 1%	~	~	~	~	~	~	~	~	1 0.5%	~	1 0.3%~	~	~	1 2%
NOT ANSWERED	26	500	6	6	6	8	7							1	8	11		20	6
VALID CASES	331	4809	56	66	97	112	107							210	115	304	21	268	63
NUMBER OF RESPONDENTS	357 100%	5309 100%	62 100%	72 100%	103 100%	120 100%	114 100%							211 100%	123 100%	315 100%	21 100%	288 100%	69 100%

Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND ###	AMER IND/ ALSK ###	OTHR #	MUL- TI###	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q82 YES	14 7%	101 3%*	2 7%~	~	5 9%	7 10%	1 1%*	~	~	~	~	~	~	13 12%*	1 1%*	12 6%~	1 20%~	13 8%~	1 3%
NO	184 93%	2894 97%*	28 93%~	40 100%~	51 91%	65 90%	81 99%*	~	~	~	~	~	~	95 88%*	85 99%*	177 94%~	4 80%~	147 92%~	37 97%
NOT ANSWERED	8	59	2	1	4	1	3							2	4	5	1	6	2
VALID CASES	198	2995	30	40	56	72	82							108	86	189	5	160	38
NUMBER OF RESPONDENTS	206 100%	3054 100%	32 100%	41 100%	60 100%	73 100%	85 100%							110 100%	90 100%	194 100%	6 100%	166 100%	40 100%

[ASKED IF SURVEY COMPLETED BY MAIL]



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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER				
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI##	HIS- IC	NOT HIS- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q83.1 YES	6 43%	53 52%	~	~	40%	57%	~	~	~	~	~	~	~	46%	~	33%	100%	38%	100%	
NO	8 57%	48 48%	2 100%	~	3 60%	3 43%	1 100%	~	~	~	~	~	~	54%	100%	67%	~	62%	~	
VALID CASES	14	101	2	5	7	1	13	1	12	1	13	1	12	1	12	1	13	1	13	1
NUMBER OF RESPONDENTS	14	101	2	5	7	1	13	1	12	1	13	1	12	1	12	1	13	1	13	1
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.2 YES	2 14%	31 31%~	~	~	20%~	14%~	~	~	~	~	~	~	2 15%~	1 8%~	2 15%~			
NO	12 86%	70 69%~	2 100%~	4 ~	6 80%~	1 86%~	1 100%~	~	~	~	~	~	11 85%~	1 100%~	11 92%~	1 100%~	11 85%~	1 100%~
VALID CASES	14	101	2	5	7	1	13	1	12	1	13	1	13	1	12	1	13	1
NUMBER OF RESPONDENTS	14	101	2	5	7	1	13	1	12	1	13	1	13	1	12	1	13	1
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI##	HIS- IC	NOT HIS- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.3 YES	2 14%	13 13%~	1 50%~	~	~	1 14%~	1 100%~	~	~	~	~	~	1 8%~	1 100%~	1 8%~	1 ~	2 15%~	
NO	12 86%	88 87%~	1 50%~	~	5 ~100%~	6 86%~	~	~	~	~	~	~	12 92%~	11 ~	1 92%~100%~	1 ~	11 85%~100%	1
VALID CASES	14	101	2		5	7	1						13	1	12	1	13	1
NUMBER OF RESPONDENTS	14 100%	101 100%	2 100%		5 100%	7 100%	1 100%						13 100%	1 100%	12 100%	1 100%	13 100%	1 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALS	OTHR	MUL- TI##	HIS- IC	NOT HIS- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.4 YES	6 43%	43 43%	1 50%	3 ~ 60%	2 29%	2	~	~	~	~	~	~	6 46%	6 50%	6 46%			
NO	8 57%	58 57%	1 50%	2 ~ 40%	5 71%	1 100%	~	~	~	~	~	~	7 54%	1 100%	6 50%	1 100%	7 54%	1 100%
VALID CASES	14	101	2	5	7	1							13	1	12	1	13	1
NUMBER OF RESPONDENTS	14	101	2	5	7	1							13	1	12	1	13	1
	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.5 YES		6 6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	14 100%	95 94%	2 100%	5 ~100%	7 ~100%	1 100%	~	~	~	~	~	13 ~100%	1 100%	12 ~100%	1 100%	13 ~100%	1 100%	
VALID CASES	14	101	2	5	7	1						13	1	12	1	13	1	
NUMBER OF RESPONDENTS	14 100%	101 100%	2 100%	5 100%	7 100%	1 100%						13 100%	1 100%	12 100%	1 100%	13 100%	1 100%	

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

NQ14 RATING OF ALL CHILD'S HEALTH CARE

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ PAC ALSK #	OTHR #	MUL-TI##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
NQ14 0-6	19 9%	286 8%	5 11%	2 4%	3 6%	9 13%	8 11%	~	~	~	~	~	9 7%	8 10%	14 7%	3 21%	12 7%	7 15%
7-8	56 26%	994 29%	11 23%	12 27%	15 28%	18 26%	27 36%*	~	~	~	~	~	22 18%*	32 39%*	50 26%	4 29%	42 25%	14 30%
9-10	140 65%	2180 63%	31 66%	31 69%	35 66%	43 61%	39 53%*	~	~	~	~	~	93 75%*	43 52%*	129 67%	7 50%	115 68%	25 54%
VALID CASES	215	3460	47	45	53	70	74						124	83	193	14	169	46
NUMBER OF RESPONDENTS	215 100%	3460 100%	47 100%	45 100%	53 100%	70 100%	74 100%						124 100%	83 100%	193 100%	14 100%	169 100%	46 100%
MEAN	2.56	2.55	2.55	2.64	2.60	2.49	2.42						2.68	2.42	2.60	2.29	2.61	2.39
p stat_(*=Sig @ p<=.05)		.717	~	~	.599	.229	.019*	~	~	~	~	~	~	.003*	.013*	~	~	~

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ PAC ALSK ##	OTHR #	MUL-TI##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
NQ41 0-6	14 5%	266 6%	1 2%	5 8%	4 5%	4 4%	8 8%	~	~	~	~	~	5 3%	8 8%	12 4%	2 12%	8 3%	6 9%
7-8	67 23%	933 22%	10 17%	11 18%	23 28%	23 26%	35 35%*	~	~	~	~	~	29 16%*	36 34%*	57 21%~	7 41%~	46 20%*	21 33%
9-10	213 72%	3047 72%	48 81%	46 74%	56 67%	63 70%	57 57%*	~	~	~	~	~	146 81%*	62 58%*	201 74%~	8 47%~	176 77%*	37 58%
VALID CASES	294	4246	59	62	83	90	100						180	106	270	17	230	64
NUMBER OF RESPONDENTS	294 100%	4246 100%	59 100%	62 100%	83 100%	90 100%	100 100%						180 100%	106 100%	270 100%	17 100%	230 100%	64 100%
MEAN	2.68	2.65	2.80	2.66	2.63	2.66	2.49						2.78	2.51	2.70	2.35	2.73	2.48
p stat_(*=Sig @ p<=.05)		.511	.033*	.821	.345	.667	.000*	~	~	~	~	~	~.000*	.000*	~	~	~.008*	

[ASKED IF Q30 = YES]

NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND ##	AMER IND/PAC ALSK ##	OTHR #	MUL-TI##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC
NQ48 0-6	49%	69%	10%	10%	18%	10%	~	~	~	~	~	11%	9%	9%	11%	27%	
7-8	19%	24%	20%	20%	24%	24%	~	~	~	~	~	5%	26%	21%	11%	20%	18%
9-10	72%	100%	100%	70%	80%	59%	~	~	~	~	~	84%	65%	70%	78%	53%	82%
VALID CASES	43	779	6	10	10	17	21					19	23	33	9	15	28
NUMBER OF RESPONDENTS	43	779	6	10	10	17	21					19	23	33	9	15	28
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%
MEAN	2.63	2.58	3.00	2.60	2.80	2.41	2.57					2.74	2.57	2.61	2.67	2.27	2.82
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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



NQ54 RATING OF CHILD'S HEALTH PLAN

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND NATV ###	AMER IND/ ALSK #	OTHR #	MUL-TI##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
NQ54																			
0-6	29 9%	652 13%*	3 5%	8 12%	8 8%	10 9%	15 14%*	~	~	~	~	~	~	9 4%*	18 15%*	27 9%~	2 10%~	24 9%	5 7%
7-8	75 23%	1410 29%*	9 16%	15 22%	19 19%	32 29%	38 35%*	~	~	~	~	~	~	32 16%*	41 35%*	66 22%~	6 29%~	49 19%*	26 38%
9-10	227 69%	2826 58%*	45 79%*	44 66%	71 72%	67 61%	56 51%*	~	~	~	~	~	~	165 80%*	59 50%*	211 69%~	13 62%~	190 72%*	37 54%
VALID CASES	331	4888	57	67	98	109	109							206	118	304	21	263	68
NUMBER OF RESPONDENTS	331 100%	4888 100%	57 100%	67 100%	98 100%	109 100%	109 100%							206 100%	118 100%	304 100%	21 100%	263 100%	68 100%
MEAN	2.60	2.44	2.74	2.54	2.64	2.52	2.38							2.76	2.35	2.61	2.52	2.63	2.47
p stat_(*=Sig @ p<=.05)		.000*	.075	.420	.409	.143	.000*	~	~	~	~	~	~	.000*	0.000*	~		~.066	

GETTING NEEDED CARE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER				
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	ILND	NATV	OTHR	MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NPRBSEE4 NQ46	1.96	2.27	2.00	2.00	2.08	1.86	2.00								1.88	2.00	1.98	1.80	1.95	1.97
p stat_(*=Sig @ p<=.05)		.006*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCARNES4 NQ15	2.44	2.49	2.61	2.41	2.25	2.49	2.45								2.46	2.41	2.47	2.14	2.52	2.15
p stat_(*=Sig @ p<=.05)		.237	~	~	.029*	.432	.925	~	~	~	~	~	~	~	.552	.619	~	~	~	~
COMPOSITE	2.20	2.38	2.30	2.21	2.16	2.18	2.22	x	x	x	x	x	x	x	2.17	2.20	2.22	1.97	2.23	2.06
p stat_(*=Sig @ p<=.05)		.000*	.032*	~	.445	.582	.550	~	~	~	~	~	~	~	.188	.903	~	~	~	.072

GETTING CARE QUICKLY

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NCARSN4 NQ4	2.68	2.65	2.63	2.89	2.60	2.63	2.66						2.72	2.59	2.68	2.50	2.67	2.71
p stat_(*=Sig @ p<=.05)	.680		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NAPGET4 NQ6	2.36	2.46	2.63	2.27	2.12	2.41	2.31						2.36	2.31	2.35	2.31	2.39	2.25
p stat_(*=Sig @ p<=.05)	.028*		~	~	.015*	.426	.514	~	~	~	~	~	~	.955	.470	~	~	.264
COMPOSITE	2.52	2.56	2.63	2.58	2.36	2.52	2.48	x	x	x	x	x	2.54	2.45	2.51	2.40	2.53	2.48
p stat_(*=Sig @ p<=.05)	.201		~	~	.002*	.990	.400	~	~	~	~	~	~	.434	.083	~	~	.564

HOW WELL DOCTORS COMMUNICATE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI##	HIS- IC	HIS- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NDREXPL4 NQ32	2.74	2.75	2.84	2.71	2.73	2.69	2.77						2.73	2.77	2.74	2.67	2.75	2.69	
p stat_(*=Sig @ p<=.05)	.698	.068	~	~	~	.384	.534	~	~	~	~	~	~	.738	.583	~	~	~	
NDRLSTN4 NQ33	2.76	2.77	2.84	2.71	2.67	2.81	2.60						2.85	2.60	2.78	2.50	2.80	2.65	
p stat_(*=Sig @ p<=.05)	.973	.115	~	~	~	.290	.003*	~	~	~	~	~	~	.003*	.002*	~	~	~	
NDRESPU4 NQ34	2.80	2.81	2.90	2.80	2.74	2.77	2.62						2.88	2.64	2.79	2.92	2.83	2.71	
p stat_(*=Sig @ p<=.05)	.942	.026*	~	~	~	.441	.003*	~	~	~	~	~	~	.007*	.005*	~	~	~	
NDRTMEN4 NQ37	2.55	2.57	2.65	2.46	2.40	2.63	2.58						2.54	2.58	2.55	2.42	2.54	2.57	
p stat_(*=Sig @ p<=.05)	.659	.211	~	~	~	.241	.616	~	~	~	~	~	~	.821	.582	~	~	~	
COMPOSITE	2.71	2.72	2.81	2.67	2.64	2.72	2.64	x	x	x	x	x	x	2.75	2.65	2.72	2.63	2.73	2.66
p stat_(*=Sig @ p<=.05)	.728	.023*	~	~	~	.820	.146	~	~	~	~	~	~	.131	.155	~	~	~	

CUSTOMER SERVICE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NPBCLCS4 NQ50	2.23	2.28	2.40	2.21	1.96	2.39	2.33						2.22	2.26	2.21	2.36	2.24	2.20
p stat_(*=Sig @ p<=.05)	.584		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ51	2.60	2.60	2.73	2.64	2.35	2.75	2.87						2.56	2.74	2.61	2.55	2.62	2.55
p stat_(*=Sig @ p<=.05)	.987		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.42	2.44	2.57	2.43	2.15	2.57	2.60	x	x	x	x	x	2.39	2.50	2.41	2.45	2.43	2.38
p stat_(*=Sig @ p<=.05)	.741		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NNRXWHY NQ11	2.82	2.87	2.80	2.73	2.79	3.00	2.80						2.83	2.81	2.84	2.67	2.84	2.80
p stat_(*=Sig @ p<=.05)		.500	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NNRXWYNT NQ12	2.14	2.42	2.00	2.57	1.84	2.23	2.58						1.89	2.60	2.20	1.67	2.22	2.00
p stat_(*=Sig @ p<=.05)		.019*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NRXBST NQ13	2.65	2.58	2.60	2.60	2.58	2.85	2.60						2.67	2.62	2.61	3.00	2.51	2.90
p stat_(*=Sig @ p<=.05)		.495	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.54	2.62	2.47	2.63	2.40	2.69	2.66	x	x	x	x	x	2.46	2.68	2.55	2.44	2.52	2.57
p stat_(*=Sig @ p<=.05)		.257	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

ACCESS TO SPECIALIZED SERVICES

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ PAC	ALSK	OTHR	MUL- TI##	HIS- IC	NOT HIS- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NEZMDEQ NQ20	2.11	2.30	2.67	1.40	2.50	2.00	2.13							2.22	2.13	2.23	1.75	1.83	2.25
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTHP NQ23	1.92	2.19	2.17	1.82	2.14	1.79	1.83							1.91	1.83	1.97	1.86	1.92	1.92
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTC NQ26	1.91	2.18	1.00	1.86	1.83	2.14	2.07							1.74	2.07	1.89	2.17	1.92	1.91
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	1.98	2.22	1.94	1.69	2.16	1.98	2.01	x	x	x	x	x	x	1.96	2.01	2.03	1.92	1.89	2.03
p stat_(*=Sig @ p<=.05)		.000*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

	BANTO T1	BANTO T2	AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ###	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
PRBSEE4 Q46	67%	78%	71%	73%	67%	64%	74%							63%	72%	65%	70%	65%	69%
CARNES4 Q15	88%	89%	91%	93%	81%	89%	89%							90%	87%	90%	71%	91%	78%
AVERAGE	77.87	83.54	81.37	83.10	73.90	76.18	81.55	x	x	x	x	x	x	76.05	79.37	77.35	70.71	78.09	73.51



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

	BANTO T1	BANTO T2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ###	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
CARSN4 Q4	92%	91%	94%	100%	95%	83%	90%							96%	86%	93%	83%	91%	95%
APGET4 Q6	83%	86%	96%	82%	71%	85%	84%							82%	83%	83%	85%	84%	80%
AVERAGE	87.90	88.77	94.70	91.11	83.08	84.33	86.74	x	x	x	x	x	x	88.94	84.77	87.92	83.97	87.83	87.82

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ###	AMER IND/ ALSK NATV ###	OTHR #	MUL- TI###	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
DREXPL4 Q32	95%	95%	98%	98%	94%	92%	97%						95%	97%	95%	100%	95%	96%	
DRLSTN4 Q33	98%	95%	100%	98%	92%	100%	97%						98%	97%	98%	83%	98%	96%	
DRESPU4 Q34	97%	96%	100%	98%	96%	95%	93%						98%	94%	97%	100%	98%	94%	
DRTMEN4 Q37	91%	90%	94%	90%	89%	90%	95%						89%	95%	92%	75%	91%	92%	
AVERAGE	95.2	94.0	98.0	95.7	92.5	94.5	95.5	x	x	x	x	x	x	94.9	95.7	95.4	89.6	95.4	94.4

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

	BANTO T1	BANTO T2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ###	AMER IND/ ALSK NATV ###	OTHR #	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
PBCLCS4 Q50	77%	78%	87%	79%	62%	86%	80%							78%	74%	75%	91%	78%	75%
CSRESP Q51	92%	91%	100%	100%	77%	96%	100%							91%	95%	90%	100%	90%	95%
AVERAGE	84.34	84.81	93.33	89.29	69.23	91.07	90.00	x	x	x	x	x	x	84.38	84.21	82.64	95.45	84.13	85.00

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ###	AMER IND/ ALSK NATV ###	OTHR #	MUL- TI###	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NRXWHY Q11	91%	94%	90%	87%	89%	100%	90%							92%	90%	92%	83%	92%	90%
NRXWYNT Q12	57%	71%	50%	79%	42%	62%	79%							44%	80%	60%	33%	61%	50%
RXBST Q13	82%	79%	80%	80%	79%	92%	80%							83%	81%	80%	100%	76%	95%
AVERAGE	76.9	81.2	73.3	81.7	70.2	84.6	83.0	x	x	x	x	x	x	73.1	83.8	77.5	72.2	76.2	78.3

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ###	AMER IND/ ALSK NATV ###	OTHR #	MUL- TI###	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
EZMDEQ Q20	72%	76%	100%	40%	100%	50%	75%							78%	75%	77%	50%	50%	83%
EZTHP Q23	58%	72%	83%	45%	71%	50%	50%							61%	50%	57%	71%	54%	60%
EZTC Q26	63%	71%	0%	57%	58%	79%	73%							53%	73%	61%	83%	54%	68%
AVERAGE	64.3	72.8	61.1	47.5	76.6	59.5	66.1	x	x	x	x	x	x	63.8	66.1	64.8	68.3	52.6	70.5

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ###	AMER IND/ ALSK NATV ###	OTHR #	MUL- TI###	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
DRTLKU Q38	89%	87%	94%	90%	85%	86%	84%						90%	85%	89%	83%	90%	85%
DRUNCON Q43	88%	90%	92%	73%	100%	85%	89%						90%	90%	86%	100%	83%	90%
DRUNFAM Q44	90%	85%	92%	82%	100%	85%	89%						93%	90%	88%	100%	83%	93%
AVERAGE	88.9	87.5	92.5	81.6	95.0	85.2	87.5	x	x	x	x	x	90.9	88.0	87.5	94.4	85.4	89.4

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	PCG TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ###	AMER IND/ ALSK NATV ###	OTHR #	MUL- TI##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
HELPCONT Q18	97%	92%	100%	91%	100%	100%	100%						96%	100%	96%	100%	94%	100%
HLPCOORD Q29	77%	62%	78%	79%	80%	74%	62%						91%	62%	78%	80%	74%	81%
AVERAGE	87.1	77.1	88.9	84.7	90.0	87.0	80.8	x	x	x	x	x	93.4	80.8	86.9	90.0	83.8	90.7

INDEX OF ADULT TABLES

PAGE QUESTION TITLE

1. INTRODUCTION

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

2. YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

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

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

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

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

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

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

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

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

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

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

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



PAGE QUESTION TITLE

3. YOUR PERSONAL DOCTOR

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

4. GETTING HEALTH CARE FROM SPECIALISTS

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

PAGE QUESTION TITLE

5. YOUR HEALTH PLAN

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

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

5. ADDITIONAL QUESTIONS

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

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

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

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

5. ACCESS TO DENTAL CARE

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

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

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

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

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

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

PAGE QUESTION TITLE

6. ABOUT YOU

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

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

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

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

53 Q40 IN THE LAST 6 MONTHS, HOW OFTEN WERE YOU ADVISED TO QUIT SMOKING OR USING TOBACCO BY A DOCTOR OR OTHER HEALTH PROVIDER IN YOUR PLAN? [ASKED IF Q39 = EVERY DAY OR SOME DAYS]

54 Q41 IN THE LAST 6 MONTHS, HOW OFTEN WAS MEDICATION RECOMMENDED OR DISCUSSED BY A DOCTOR OR HEALTH PROVIDER TO ASSIST YOU WITH QUITTING SMOKING OR USING TOBACCO? EXAMPLES OF MEDICATION ARE: NICOTINE GUM, PATCH, NASAL SPRAY, INHALER, OR PRESCRIPTION MEDICATION. [ASKED IF Q39 = EVERY DAY OR SOME DAYS]

55 Q42 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR DOCTOR OR HEALTH PROVIDER DISCUSS OR PROVIDE METHODS AND STRATEGIES OTHER THAN MEDICATION TO ASSIST YOU WITH QUITTING SMOKING OR USING TOBACCO? EXAMPLES OF METHODS AND STRATEGIES ARE: TELEPHONE HELPLINE, INDIVIDUAL OR GROUP COUNSELING, OR CESSATION PROGRAM. [ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

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

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

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

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

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1. INTRODUCTION

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

3. SPECIALIZED SERVICES

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

4. YOUR CHILD'S PERSONAL DOCTOR

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

5. GETTING HEALTH CARE FROM SPECIALISTS

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

6. YOUR CHILD'S HEALTH PLAN

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

PAGE QUESTION TITLE

7. PRESCRIPTION MEDICINES

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

7. ACCESS TO DENTAL CARE

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

8. ABOUT YOUR CHILD AND YOU

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



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

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

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

67 Q62 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q60 = YES AND Q61 = YES]

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

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

70 Q65 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q63 = YES AND Q64 = YES]

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

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

73 Q68 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q66 = YES AND Q67 = YES]

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

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

76 Q71 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q69 = YES AND Q70 = YES]

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

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

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

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

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

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

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

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

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

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

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

88 Q78 WHAT IS YOUR AGE?

89 Q79 ARE YOU MALE OR FEMALE?

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

91 Q81 HOW ARE YOU RELATED TO THE CHILD?

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

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

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

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

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

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

9. RATINGS

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

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102 GETTING NEEDED CARE  
103 GETTING CARE QUICKLY  
104 HOW WELL DOCTORS COMMUNICATE  
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107 ACCESS TO SPECIALIZED SERVICES

11. GLOBAL PROPORTION COMPOSITES

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

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

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

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

**SURVEY INSTRUCTIONS**

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

Correct  
Mark 

Incorrect  
Marks 

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

Yes → *Go to Question 1*  
 No

↓ **START HERE** ↓

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

- Yes → *Go to Question 3*
- No

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

\_\_\_\_\_

## YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

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

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



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

0 1 2 3 4 5 6 7 8 9 10

Worst Health Care Possible Best Health Care Possible

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

- Never
- Sometimes
- Usually
- Always

### YOUR PERSONAL DOCTOR

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

- Yes
- No → *Go to Question 24*

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 23*

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

- Never
- Sometimes
- Usually
- Always

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

0 1 2 3 4 5 6 7 8 9 10

Worst Personal Doctor Possible Best Personal Doctor Possible



## GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

- Yes  
 No → *Go to Question 28*

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

- Never  
 Sometimes  
 Usually  
 Always

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

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

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

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

## YOUR HEALTH PLAN

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

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

- Yes  
 No → *Go to Question 30*

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

- Never  
 Sometimes  
 Usually  
 Always

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

- Yes  
 No → *Go to Question 33*

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

- Never  
 Sometimes  
 Usually  
 Always

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

- Never  
 Sometimes  
 Usually  
 Always

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

- Yes  
 No → *Go to Question 35*



**ABOUT YOU**

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

- Yes
- No → *Go to Question 35l*

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

- Never
- Sometimes
- Usually
- Always

35l. If you tried to get an appointment for yourself with a dentist who specializes in a particular type of dental care (such as root canals or gum disease) in the last 6 months, how often did you get an appointment as soon as you wanted?

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

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

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

35n. Using any number from 0 to 10, where 0 is extremely difficult and 10 is extremely easy, what number would you use to rate how easy it was for you to find a dentist?

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

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

- Excellent
- Very Good
- Good
- Fair
- Poor

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

- Excellent
- Very Good
- Good
- Fair
- Poor

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

- Yes
- No
- Don't know

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

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

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

- Never
- Sometimes
- Usually
- Always





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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No
- Don't know

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

- Yes
- No
- Don't know

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

- Yes
- No

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

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

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

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

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

- Yes
- No → *Go to Question 50*

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

- Yes
- No

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

- Yes
- No → *Go to Question 52*

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

- Yes
- No

52. What is your age?

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



53. Are you male or female?

- Male
- Female

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

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

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

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

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

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

57. Did someone help you complete this survey?

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

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

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

**THANK YOU**

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

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

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



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

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

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

**SURVEY INSTRUCTIONS**

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

Correct  
Mark 

Incorrect  
Marks



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

- Yes → *Go to Question 1*
- No

↓ **START HERE** ↓

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

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

- Yes → *Go to Question 3*
- No

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

\_\_\_\_\_

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

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

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

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



12. Did you and a doctor or other health provider talk about the reasons you might not want your child to take a medicine?
- Yes  
 No
13. When you talked about your child starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for your child?
- Yes  
 No
14. Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your child's health care in the last 6 months?
- 
- 0 1 2 3 4 5 6 7 8 9 10  
Worst Health Best Health  
Care Possible Care Possible
15. In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed?
- Never  
 Sometimes  
 Usually  
 Always
16. Is your child now enrolled in any kind of school or daycare?
- Yes  
 No → *Go to Question 19*
17. In the last 6 months, did you need your child's doctor or other health provider to contact a school or daycare center about your child's health or health care?
- Yes  
 No → *Go to Question 19*

18. In the last 6 months, did you get the help you needed from your child's doctor or other health provider in contacting your child's school or daycare?
- Yes  
 No

### SPECIALIZED SERVICES

19. Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment.
- In the last 6 months, did you get or try to get any special medical equipment or devices for your child?
- Yes  
 No → *Go to Question 22*
20. In the last 6 months, how often was it easy to get special medical equipment or devices for your child?
- Never  
 Sometimes  
 Usually  
 Always
21. Did anyone from your child's health plan, doctor's office, or clinic help you get special medical equipment or devices for your child?
- Yes  
 No
22. In the last 6 months, did you get or try to get special therapy such as physical, occupational, or speech therapy for your child?
- Yes  
 No → *Go to Question 25*



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 28*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 30*

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

- Yes
- No

### YOUR CHILD'S PERSONAL DOCTOR

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

- Yes
- No → *Go to Question 45*

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

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

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

- Never
- Sometimes
- Usually
- Always

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

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



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

- Yes
- No

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

- Yes
- No

**GETTING HEALTH CARE FROM SPECIALISTS**

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

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

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

- Yes
- No → *Go to Question 49*

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

- Never
- Sometimes
- Usually
- Always

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

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

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

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

**YOUR CHILD'S HEALTH PLAN**

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

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

- Yes
- No → *Go to Question 52*

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

- Never
- Sometimes
- Usually
- Always





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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 54*

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

- Never
- Sometimes
- Usually
- Always

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

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

**PRESCRIPTION MEDICINES**

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

- Yes
- No → *Go to Question 57a*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

**ACCESS TO DENTAL CARE**

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

- Yes
- No

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

- Yes
- No → *Go to Question 57d*

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

- Never
- Sometimes
- Usually
- Always



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

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

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

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

**ABOUT YOUR CHILD AND YOU**

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Yes
- No → **Go to Question 63**

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

- Yes
- No → **Go to Question 63**

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

- Yes
- No

63. Does your child need or use more medical care, more mental health services, or more educational services than is usual for most children of the same age?

- Yes
- No → **Go to Question 66**

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

- Yes
- No → **Go to Question 66**

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

- Yes
- No

66. Is your child limited or prevented in any way in his or her ability to do the things most children of the same age can do?

- Yes
- No → **Go to Question 69**

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

- Yes
- No → **Go to Question 69**



68. Is this a condition that has lasted or is expected to last for at least 12 months?
- Yes
  - No
69. Does your child need or get special therapy such as physical, occupational, or speech therapy?
- Yes
  - No → *Go to Question 72*
70. Is this because of any medical, behavioral, or other health condition?
- Yes
  - No → *Go to Question 72*
71. Is this a condition that has lasted or is expected to last for at least 12 months?
- Yes
  - No
72. Does your child have any kind of emotional, developmental, or behavioral problem for which he or she needs or gets treatment or counseling?
- Yes
  - No → *Go to Question 74*
73. Has this problem lasted or is it expected to last for at least 12 months?
- Yes
  - No

74. What is your child's age?
- Less than 1 year old
  - YEARS OLD (write in)
75. Is your child male or female?
- Male
  - Female
76. Is your child of Hispanic or Latino origin or descent?
- Yes, Hispanic or Latino
  - No, Not Hispanic or Latino
77. What is your child's race? Mark one or more.
- White
  - Black or African-American
  - Asian
  - Native Hawaiian or other Pacific Islander
  - American Indian or Alaska Native
  - Other (Please print)
- 
78. What is your age?
- Under 18
  - 18 to 24
  - 25 to 34
  - 35 to 44
  - 45 to 54
  - 55 to 64
  - 65 to 74
  - 75 or older
79. Are you male or female?
- Male
  - Female

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

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

81. How are you related to the child?

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

82. Did someone help you complete this survey?

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

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

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

**THANK YOU**

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

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

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







897-12



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

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

Si quiere recibir más información acerca de este estudio, llame al 1-888-506-5136 (aquellos con impedimentos de audición, favor llamar al 1-888-631-2097).

**INSTRUCCIONES PARA EL CUESTIONARIO**

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

Marca  
Correcta

Marca  
Incorrecta

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

- Sí ➔ *Pase a la Pregunta 1*
- No

↓ **COMIENCE AQUI** ↓

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

- Sí ➔ *Pase a la pregunta 3*
- No

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

\_\_\_\_\_

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

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

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

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





## LA ATENCIÓN MÉDICA QUE RECIBIÓ DE ESPECIALISTAS

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

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

Sí  
 No → *Pase a la pregunta 28*

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

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

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

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

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

0 1 2 3 4 5 6 7 8 9 10  
El peor especialista posible El mejor especialista posible

## SU PLAN DE SALUD

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

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

Sí  
 No → *Pase a la pregunta 30*

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

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

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

Sí  
 No → *Pase a la pregunta 33*

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

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

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

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

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

Sí  
 No → *Pase a la pregunta 35*







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

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

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

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

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

- Sí
- No
- No sé

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

- Sí
- No
- No sé

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

- Sí
- No

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 50*

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 52*

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

- Sí
- No

52. ¿Qué edad tiene?

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



53. ¿Es usted hombre o mujer?

- Hombre
- Mujer

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

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

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

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

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

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

57. ¿Le ayudó alguien a completar esta encuesta?

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

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

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

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

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

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



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

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

Si quiere recibir más información acerca de este estudio, llame al 1-888-506-5136 (aquellos con impedimentos de audición, favor llamar al 1-888-631-2097).

**INSTRUCCIONES PARA EL CUESTIONARIO**

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

Marca  
Correcta ●

Marca  
Incorrecta



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

- Sí ➔ *Pase a la Pregunta 1*
- No

↓ **COMIENCE AQUI** ↓

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

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

- Sí ➔ *Pase a la pregunta 3*
- No

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

\_\_\_\_\_

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

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

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

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



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

- Sí
- No

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

- Sí
- No

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 19*

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

- Sí
- No → *Pase a la pregunta 19*

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

- Sí
- No

### SERVICIOS ESPECIALIZADOS

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

- Sí
- No → *Pase a la pregunta 22*

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

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



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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 25*

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

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

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 28*

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

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

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 30*

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

- Sí
- No

### **EL DOCTOR PERSONAL DE SU NIÑO**

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

- Sí
- No → *Pase a la pregunta 45*

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

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



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

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





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

- Sí
- No

### ACCESO A CUIDADO DENTAL

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 57d*

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

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

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

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

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

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

### ACERCA DE USTED Y DE SU NIÑO

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Sí
- No → *Pase a la pregunta 63*

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

- Sí
- No → *Pase a la pregunta 63*

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

- Sí
- No



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

- Sí
- No → *Pase a la pregunta 66*

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

- Sí
- No → *Pase a la pregunta 66*

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 69*

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

- Sí
- No → *Pase a la pregunta 69*

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 72*

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

- Sí
- No → *Pase a la pregunta 72*

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 74*

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

- Sí
- No

74. ¿Qué edad tiene su niño?

- Menos de un año

AÑOS (escriba la respuesta)

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

- Masculino
- Femenino

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

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



77. ¿A qué raza pertenece su niño?  
Marque una o más.
- Blanca
  - Negra o afroamericana
  - Asiática
  - Nativo de Hawái o de otras islas del Pacífico
  - Indígena americano o nativo de Alaska
  - Otra (Por favor escriba en letra de molde)
- 

78. ¿Qué edad tiene usted?

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

79. ¿Es usted hombre o mujer?

- Hombre
- Mujer

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

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

81. ¿Qué relación tiene con el niño?

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

82. ¿Le ayudó alguien a completar esta encuesta?

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

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

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

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

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

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







898-12



12

CZPCS

## DIAL.SCREEN

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

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

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

We are conducting an important study to find out how satisfied  
[people/families] are with [HEALTH PLAN NAME]. The results of the  
study will help [HEALTH PLAN NAME] improve the care they provide  
and will also help consumers when they choose health care plans.

The interview is completely confidential and voluntary, and will  
not affect [your/your child's] health care or benefits in any way.

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

IF DIAL.SCREEN = 01, GO TO START2

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

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

RETURN TO COVERSHEET

## MAIL.SCREEN

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

I'm sorry, but we haven't received your survey back -- it may have been  
lost in the mail. And since the deadline for mailing surveys has passed,  
we're now in the telephone phase of this study. May I continue?

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

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

1. CONTINUE
2. REFUSAL BECAUSE ALREADY COMPLETED AND MAILED SURVEY BACK
3. REFUSAL
4. APPOINTMENT
5. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)

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

## SEX

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

1. MALE
2. FEMALE

## SPAN.VAR

(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

1. Spanish
2. English

MEMBER

Q1. / MEMBER

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

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

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

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

DK/REFUSAL/NOT ASCERTAINED

NPLNAME

Q2. / NPLNAME

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

("DK" NOT ALLOWED)

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

[(ENTER 5 IF R SAYS: MEDICAID)]

(IF R SAYS SOMETHING CLOSE TO [HEALTH PLAN NAME], ENTER "2")

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

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

PLNAME

Q2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)

CK.PLMSTCR:

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

INTRO.INCARE

INTRO.INCARE

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

INCARE

Q3. / INCARE

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

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

DK/REFUSAL/NOT ASCERTAINED --> APMAKE4

CARSN4

Q4. / CARSN4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

APMAKE4

Q5. / APMAKE4

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

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

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

APGET4

Q6. / APGET4

In the last [12/6] months, [/when you made an appointment for a CHECK-UP OR ROUTINE CARE for your child at a doctor's office or clinic,] how often did you get an appointment [for a CHECK-UP OR ROUTINE CARE at a doctor's office or clinic/] as soon as [you/your child] needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

OFCTIM4

Q7. / OFCTIM4

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

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

(IWER: IF NEEDED CLARIFY: "Please don't include dental care [you/your child] received.")

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

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

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

IF OFCTIM4=0 OR DK/REFUSAL AND QNAIRE &lt;05 THEN GO TO PRSNLD4

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

PRVENT5

Q8. / PRVENT5

In the last [12/6] months, did you and [a/your child's] doctor or other health provider talk about specific things you could do to prevent illness [/in your child?] ?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

IF qnaire<5 then go to RXSTP

OFTQUES

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

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXSTP

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

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

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

DK/REFUSAL/NOT ASCERTAINED --> RTALLCR

NRXWHY

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

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED



NRXWYNT

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

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RXBST

[12/12/12/12/13/13]. / RXBST

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RTALLCR

[13/13/13/13/14/14]. / RTALLCR

Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all [your/your child's] health care in the last [12/6] months?

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

00        01    02    03    04    05    06    07    08    09        10

DK/REFUSAL/NOT ASCERTAINED

CARNES4

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

In the last [12/6] months, how often was it easy to get the care, tests, or treatment [you/your child] needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHSCHL

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

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

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

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

CONTSCHL

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

In the last [12/6] months, did you need your child's doctors or other health providers to contact a school or daycare center about your child's health or health care?

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

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

HELPCONT

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

In the last [12/6] months, did you get the help you needed from your child's doctors or other health providers in contacting your child's school or daycare?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

MEDEQUIP

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

Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment. In the last [12/6] months, did you get or try to get any special medical equipment or devices for your child?

- 1. YES
- 2. NO -----> SPCTHY

DK/REFUSAL/NOT ASCERTAINED --> SPCTHY

EZMDEQ

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

In the last [12/6] months, how often was it easy to get special medical equipment or devices for your child? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPMDEQ

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

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

SPCTHY

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

In the last [12/6] months, did you get or try to get special therapy such as physical, occupational, or speech therapy for your child?

- 1. YES
- 2. NO -----> TCPBLM

DK/REFUSAL/NOT ASCERTAINED --> TCPBLM

EZTHP

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

In the last [12/6] months, how often was it easy to get this therapy for your child? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTHP

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

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

TCPBLM

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

In the last [12/6] months, did you get or try to get treatment or counseling for your child for an emotional, developmental, or behavioral problem?

- 1. YES
- 2. NO -----> PLUSCARE

DK/REFUSAL/NOT ASCERTAINED --> PLUSCARE

EZTC

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

In the last [12/6] months, how often was it easy to get this treatment or counseling for your child? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTC

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

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

PLUSCARE

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

In the last [12/6] months, did your child get care from more than one kind of health care provider or use more than one kind of health care service?

- 1. YES
- 2. NO -----> PRSNLD4

DK/REFUSAL/NOT ASCERTAINED --> PRSNLD4

HLPCOORD

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

In the last [12/6] months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these different providers or services?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

PRSNLD4

[15/15/15/15/30/30]. / PRSNLD4

A personal doctor is the one [you/your child] would see if [you/+[he/she]] [need/needs] a check-up, [want advice about a health problem,/has a health problem,] or [get/gets] sick or hurt.

[Do you/Does your child] have a personal doctor?

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

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

DRTMS

[16/16/16/16/31/31]. / DRTMS

In the last [12/6] months, how many times did [you/your child] visit [your/+[his/her]] personal doctor [to get care for yourself/for care] ?

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

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

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

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

IF QNAIRE= ADULT MEDICAID (02), GO TO DREXPL4

PBDRNG

31a. / PBDRLANG

In the last [12/6] months, how often did you have a hard time speaking with or understanding your child's personal doctor because you spoke different languages? Would you say...?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DREXPL4

[17/17/17/17/32/32]. / DREXPL4

In the last [12/6] months, how often did [your/your child's] personal doctor explain things [/about your child's health] in a way that was easy to understand? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRLSTN4

[18/18/18/18/33/33]. / DRLSTN4

In the last [12/6] months, how often did [your/your child's] personal doctor listen carefully to you? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRESPU4

[19/19/19/19/34/34]. / DRESPU4

In the last [12/6] months, how often did [your/your child's] personal doctor show respect for what you had to say? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CABLTLK

[0/0/20/20/35/35]. / CABLTLK

Is your child able to talk with doctors about [your/+[his/her]] health care?

1. YES
2. NO -----> DRTMEN4

DK/REFUSAL/NOT ASCERTAINED --&gt; DRTMEN4

CDREXPL

[0/0/21/21/36/36]. / CDREXPL

In the last [12/6] months, how often did your child's personal doctor explain things in a way that was easy for YOUR CHILD to understand? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTMEN4

[20/20/22/22/37/37]. / DRTMEN4

In the last [12/6] months, how often did [your/your child's] personal doctor spend enough time with [you/your child] ? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTLKU

[0/0/23/23/38/38]. / DRTLKU

In the last [12/6] months, did your child's personal doctor talk with you about how your child is feeling, growing, or behaving?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

DIFFDR

[21/21/24/24/39/39]. / DIFFDR

In the last [12/6] months, did [you/your child] get care from a doctor or other health provider besides [your/+[his/her]] personal doctor?

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

DK/REFUSAL/NOT ASCERTAINED --> RATEDR4



DRINFO

[22/22/25/25/40/40]. / DRINFO

In the last [12/6] months, how often did [your/your child's] personal doctor seem informed and up-to-date about the care [you/your child] got from these doctors or other health providers? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RATEDR4

[23/23/26/26/41/41]. / RATEDR4

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

00            01    02    03    04    05    06    07    08    09            10

DK/REFUSAL/NOT ASCERTAINED

COND3MO

[0/0/0/0/42/42]. / COND3MO

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

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

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

DRUNCON

[0/0/0/0/43/43]. / DRUNCON

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

DRUNFAM

[0/0/0/0/44/44]. / DRUNFAM

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.SPDR

INTRO.SPDR

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

NDSPDR4

[24/24/27/27/45/45]. / NDSPDR4

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

In the last [12/6] months, did you make any appointments [/for your child] to see a specialist?

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

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

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

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

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

PRBSEE4

[25/25/28/28/46/46]. / PRBSEE4

In the last [12/6] months, how often did you get an appointment [/for your child] to see a specialist as soon as you needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

SPDRS

[26/26/29/29/47/47]. / SPDRS

How many specialists [have/has] [you/your child] seen in the last [12/6] months?

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

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

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

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

RTSPDR4

[27/27/30/30/48/48]. / RTSPDR4

We want to know your rating of the specialist [you/your child] saw most often in the last [12/6] months.

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

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

00      01   02   03   04   05   06   07   08   09      10

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN  
INTRO.PLAN

Now I'm going to ask you some questions about your experience with  
[your/your child's] health plan.

LOOMAT4  
[28/28/0/0/0/0]. / LOOMAT4

In the last [12/6] months, did you look for any information in written  
materials or on the Internet about how your health plan works?

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

DK/REFUSAL/NOT ASCERTAINED --> CK.LOOSVC

UNDINF4  
[29/29/0/0/0/0]. / UNDINF4

In the last [12/6] months, how often did the written materials OR the  
Internet provide the information you needed about how your health plan  
works? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CK.LOOSVC  
IF qnaire=02 then go to CLCSRV4

LOOSVC  
[30/0/0/0/0/0]. / LOOSVC

Sometimes people need services or equipment beyond what is provided in a  
regular or routine office visit, such as care from a specialist,  
physical therapy, a hearing aid, or oxygen.

In the last 12 months, did you look for information from your health  
plan on how much you would have to pay for a health care service or  
equipment?

- 1. YES
- 2. NO -----> LOOMED

DK/REFUSAL/NOT ASCERTAINED --> LOOMED

FNDSVC

[31/0/0/0/0/0]. / FNDSVC

In the last 12 months, how often were you able to find out from your health plan how much you would have to pay for a health care service or equipment? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

LOOMED

[32/0/0/0/0/0]. / LOOMED

In some health plans the amount you pay for a prescription medicine can be different for different medicines, or can be different for prescriptions filled by mail instead of at the pharmacy.

In the last 12 months, did you look for information from your health plan on how much you would have to pay for specific prescription medicines?

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

DK/REFUSAL/NOT ASCERTAINED --> CLCSRV4

FNDMED

[33/0/0/0/0/0]. / FNDMED

In the last 12 months, how often were you able to find out from your health plan how much you would have to pay for specific prescription medicines? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CLCSRV4

[34/30/31/31/49/49]. / CLCSRV4

In the last [12/6] months, did you get information or help from [your health plan's customer service/customer service at your child's health plan] ?

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

DK/REFUSAL/NOT ASCERTAINED --> PLPRWK4

PBCLCS4

[35/31/32/32/50/50]. / PBCLCS4

In the last [12/6] months, how often did [your health plan's customer service/customer service at your child's health plan] give you the information or help you needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CSRESP

[36/32/33/33/51/51]. / CSRESP

In the last [12/6] months, how often did [your health plan's/] customer service staff [/at your child's health plan] treat you with courtesy and respect? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLPRWK4

[37/33/34/34/52/52]. / PLPRWK4

In the last [12/6] months, did [your/your child's] health plan give you any forms to fill out?

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

DK/REFUSAL/NOT ASCERTAINED --> CK.SNDCLMS

PBPLPW4

[38/34/35/35/53/53]. / PBPLPW4

In the last [12/6] months, how often were the forms from [your/your child's] health plan easy to fill out? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CK.SNDCLMS

SNDCLM4

[39/0/0/0/0/0]. / SNDCLM4

Claims are sent to a health plan for payment. You may send in the claims yourself, or doctors, hospitals, or others may do this for you.

In the last [12/6] months, did you or anyone else send in any claims for your care to your health plan?

- 1. YES
- 2. NO -----> RTPLEXP
- 3. DON'T KNOW (DO NOT PROBE) --> RTPLEXP
- 9. REFUSAL/NOT ASCERTAINED ----> RTPLEXP

CLMTMR4

[40/0/0/0/0/0]. / CLMTMR4

In the last [12/6] months, how often did your health plan handle your claims quickly? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?
- 5. DON'T KNOW (DO NOT READ) (DO NOT PROBE)
- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

CLMCRCT

[41/0/0/0/0/0]. / CLMCRCT

In the last [12/6] months, how often did your health plan handle [your/your child's] claims correctly? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?
  
- 5. DON'T KNOW (DO NOT READ) (DO NOT PROBE)
  
- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTPLEXP

[42/35/36/36/54/54]. / RTPLEXP

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

00            01    02    03    04    05    06    07    08    09        10

DK/REFUSAL/NOT ASCERTAINED

IF QNAIRE= CHILD MED W/CCC (07), GO TO CHPRES

HPMDEQ

[0/35.01/0/0/0/0]. / HPMDEQ

In the last [12/6] months, did you have a health problem for which you needed special medical equipment, such as a cane, a wheelchair, or oxygen equipment?

- 1. YES
- 2. NO -----> POSTHP

DK/REFUSAL/NOT ASCERTAINED --> POSTHP



## EZMDHP

[0/35.02/0/0/0/0]. / EZMDHP

In the last [12/6] months, how often was it easy to get the medical equipment you needed through your health plan? Would you say...?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## POSTHP

[0/35.03/0/0/0/0]. / POSTHP

In the last [12/6] months, did you have any health problems that needed special therapy, such as physical, occupational, or speech therapy?

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

DK/REFUSAL/NOT ASCERTAINED --&gt; INTRO.DTLK

## EZPOST

[0/35.04/0/0/0/0]. / EZPOST

In the last [12/6] months, how often was it easy to get the special therapy you needed through your health plan? Would you say...?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

INTRO.DTLK  
INTRO.DTLK

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

DTLKTF  
[0/35.5/0/0/0/0]. / DTLKTF

In the last [12/6] months, how often did a doctor or other health provider talk too fast when talking to you? Would you say...?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## DINTER

[0/35.6/0/0/0/0]. / DINTER

In the last [12/6] months, how often did a doctor or other health provider interrupt you when you were talking? Would you say...?

(READ LIST IF NECESSARY)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## DRRUDE

[0/35.7/0/0/0/0]. / DRRUDE

In the last [12/6] months, how often did a doctor or other health provider use a condescending, sarcastic or rude tone or manner with you? Would you say...?

(READ LIST IF NECESSARY)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## TRUSTDR

[0/35.8/0/0/0/0]. / TRUSTDR

In the last [12/6] months, did you feel you could trust a doctor or other health provider with your medical care?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## REGDENT

[0/35.9/0/0/0/57.01]. / REGDENT

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

[Do you/Does your child] have a regular dentist?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## GODENT

[0/35.10/0/0/0/57.02]. / GODENT

In the last 6 months, did [you/your child] go to a dentist's office or clinic for care?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

IF QNAIRE = ADULT MEDICAID (02) AND GODENT <> YES, GO TO CK.DENTSOON  
IF QNAIRE = CHILD MEDICAID W/CCC (07) AND GODENT <> YES, GO TO DNTASAP

## DENTEXPL

[0/35.11/0/0/0/57.03]. / DENTEXPL

In the last [12/6] months, how often did [your/your child's] dentist or dental staff explain what they were doing while treating [you/your child]? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CK.DENTSOON

IF QNAIRE = CHILD MEDICAID W/CCC (07), GO TO DNTASAP

DENTSOON

[0/35.12/0/0/0/0]. / DENTSOON

If you tried to get an appointment for yourself with a dentist who specializes in a particular type of dental care (such as root canals or gum disease) in the last 6 months, how often did you get an appointment as soon as you wanted?

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?
  
- 5. DID NOT TRY TO GET AN APPOINTMENT WITH A SPECIALIST DENTIST IN THE LAST 6 MONTHS (DO NOT READ)

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DNTASAP

[0/35.13/0/0/0/57.04]. / DNTASAP

In the last [12/6] months, if [you/your child] needed to see a dentist right away because of a DENTAL EMERGENCY, did [you/+[he/she]] get to see a dentist as soon as you wanted? Would you say...

(IWER: IF R RESPONDS WITH "YES/NO" PLEASE PROBE WITH RESPONSE OPTIONS)

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTDENT

[0/35.14/0/0/0/57.03]. / RTDENT

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

00        01    02    03    04    05    06    07    08    09        10

DK/REFUSAL/NOT ASCERTAINED

GO TO HLTSTA4

CHPRES

[0/0/0/0/55/55]. / CHPRES

In the last [12/6] months, did you get or refill any prescription medicines for your child?

1. YES
2. NO -----> REGDENT

DK/REFUSAL/NOT ASCERTAINED --> REGDENT

EZPRES

[0/0/0/0/56/56]. / EZPRES

In the last [12/6] months, how often was it easy to get prescription medicines for your child through [your/+[his/her]] health plan? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPPRES

[0/0/0/0/57/57]. / HELPPRES

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

IF QNAIRE = CHILD MEDICAID W/CCC, GO TO REGDENT

HLTSTA4

[43/36/37/37/58/58]. / HLTSTA4

[/I have just a few more questions.]

In general, how would you rate [your/your child's] overall health?  
Would you say it is...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

MNTLSTAT

[44/37/38/38/59/59]. / MNTLSTAT

In general, how would you rate [your/your child's] overall MENTAL OR  
EMOTIONAL health? Would you say it is...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CUSEMED

[0/0/0/0/60/60]. / CUSEMED

Other than vitamins, does your child currently need or use medicine  
prescribed by a doctor?

- 1. YES
- 2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

WHYMEDA

[0/0/0/0/61/61]. / WHYMEDA

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

- 1. YES
- 2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

WHYMEDB

[0/0/0/0/62/62]. / WHYMEDB

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

MOREMED

[0/0/0/0/63/63]. / MOREMED

Does your child need or use more medical care, more mental health services, or more educational services than is usual for most children of the same age?

- 1. YES
- 2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

WHYMOREA

[0/0/0/0/64/64]. / WHYMOREA

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

- 1. YES
- 2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

WHYMOREB

[0/0/0/0/65/65]. / WHYMOREB

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

LIMITED

[0/0/0/0/66/66]. / LIMITED

Is your child limited or prevented in any way in [your/+[his/her]] ability to do the things most children of the same age can do?

- 1. YES
- 2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --> SPECTHP



## WHYLIMA

[0/0/0/0/67/67]. / WHYLIMA

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

1. YES
2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --&gt; SPECTHP

## WHYLIMB

[0/0/0/0/68/68]. / WHYLIMB

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## SPECTHP

[0/0/0/0/69/69]. / SPECTHP

Does your child need or get special therapy such as physical, occupational, or speech therapy?

1. YES
2. NO -----> CHCOUNS

DK/REFUSAL/NOT ASCERTAINED --&gt; CHCOUNS

## WHYSTA

[0/0/0/0/70/70]. / WHYSTA

Is this because of any medical, behavioral, or other health condition?

1. YES
2. NO -----> CHCOUNS

DK/REFUSAL/NOT ASCERTAINED --&gt; CHCOUNS

## WHYSTB

[0/0/0/0/71/71]. / WHYSTB

Is this a condition that has lasted or is expected to last for at least 12 months?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

CHCOUNS

[0/0/0/0/72/72]. / CHCOUNS

Does your child have any kind of emotional, developmental, or behavioral problem for which [you/+[he/she]] needs or gets treatment or counseling?

- 1. YES
- 2. NO -----> CAGE

DK/REFUSAL/NOT ASCERTAINED --> CAGE

TIMCOUNA

[0/0/0/0/73/73]. / TIMCOUNA

Has this problem lasted or is it expected to last for at least 12 months?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

FLUSHOTQ

[45/38/0/0/0/0]. / FLUSHOTQ

Have you had either a flu shot or flu spray in the nose since July 1, 2015?

- 1. YES
- 2. NO
- 3. DON'T KNOW
- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

NOWSMOK

[46/39/0/0/0/0]. / NOWSMOK

Do you now smoke cigarettes or use tobacco...

(READ LIST)

- 1. EVERY DAY,
- 2. SOME DAYS, OR
- 3. NOT AT ALL? -----> ASPDAY
- 4. DON'T KNOW (DO NOT READ) -----> ASPDAY
- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ) --> ASPDAY

## ADVQUIT9

[47/40/0/0/0/0]. / ADVQUIT9

In the last [12/6] months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## PATCH9

[48/41/0/0/0/0]. / PATCH9

In the last [12/6] months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication. Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## WILLPWR9

[49/42/0/0/0/0]. / WILLPWR9

In the last [12/6] months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program. Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## ASPDAY

[50/43/0/0/0/0]. / ASPDAY

Do you take aspirin daily or every other day?

(IF NEEDED: "Would you say YES or NO?")

(IWER: If the R asks about whether a particular medication or Brand name is considered aspirin, you may provide the following clarification:  
Aspirin: Bayer and Bufferin

Not Aspirin: Tylenol, Motrin, Aleve, Advil, ibuprofen and acetaminophen)

1. YES
2. NO
3. DON'T KNOW
  
9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

## ASPUSF

[51/44/0/0/0/0]. / ASPUSF

Do you have a health problem or take medication that makes taking aspirin unsafe for you?

(IF NEEDED: "Would you say YES or NO?")

1. YES
2. NO
3. DON'T KNOW
  
9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

## ASPPRV

[52/45/0/0/0/0]. / ASPPRV

Has a doctor or health provider ever discussed with you the risks and benefits of aspirin to prevent heart attack or stroke?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## INTRO.AWCOND

INTRO.AWCOND

When I read the following list, please tell me if you are aware that you have any of these conditions.

PHAWCD.(1-3)

[53/46/0/0/0/0].(1-3) / PHAWCD.(1-3)

[First,/(Next/How About...)]

1. "High cholesterol"
  2. "High blood pressure"
  3. "Parent or sibling who had a heart attack before the age of 60"
- ?

(IWER IF NECESSARY: "Are you aware if you have this condition?")

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.DRCOND

INTRO.DRCOND

When I read the following list, please tell me if a doctor has ever told you that you have any of these conditions.

PHDRCD.(1-4)

[54/47/0/0/0/0].(1-4) / PHDRCD.(1-4)

[First,/(Next/How About...)]

1. "A heart attack"
  2. "Angina or coronary heart disease"
  3. "A stroke"
  4. "Any kind of diabetes or high blood sugar"
- ?

(IWER IF NECESSARY: "Has a doctor ever told you that you have this condition?")

[FOR PHDRCD.2: (IWER IF NEEDED, CLARIFY: Angina pectoris (an-JYE-nuh or AN-jin-uh PECK-ter-iss) is severe pain in the chest associated with insufficient blood supply to the heart.)]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## SMPROB

[55/48/0/0/0/0]. / SMPROB

[I have just a few more questions./]

In the last [12/6] months, did you get health care 3 or more times for the same condition or problem?

1. YES
2. NO -----> TKMED

DK/REFUSAL/NOT ASCERTAINED --> TKMED

## PRBLST

[56/49/0/0/0/0]. / PRBLST

Is this a condition or problem that has lasted for at least 3 months?  
[/Please do NOT include pregnancy or menopause.]

[/ (IWER IF NEEDED, CLARIFY: Menopause (men-ne-paws) is the time in a woman's life when she stops having menstrual periods. It is sometimes called 'the change of life' or 'the change'.)]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## TKMED

[57/50/0/0/0/0]. / TKMED

Do you now need or take medicine prescribed by a doctor? [/Please do NOT include birth control.]

1. YES
2. NO -----> QAGE4

DK/REFUSAL/NOT ASCERTAINED --> QAGE4

## TRTCOND

[58/51/0/0/0/0]. / TRTCOND

Is this medicine to treat a condition that has lasted for at least three months? [/Please do NOT include pregnancy or menopause.]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

[59/52/0/0/0/0]. / QAGE4

What is your age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your last birthday.")

(READ LIST IF NEEDED, "Are you...")

1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

QGENDER

[60/53/0/0/0/0]. / QGENDER

(IWER: RECORD RESPONDENT'S SEX.)

(ASK IF NECESSARY, "Are you male or female?")

1. MALE
2. FEMALE

DK/REFUSAL/NOT ASCERTAINED

CAGE

[0/0/39/39/74/74]. / CAGE

[/I have just a few more questions.]

What is YOUR CHILD'S age?

(IWER: ENTER 00 IF LESS THAN 1 YEAR OLD)

(IWER: DO NOT ROUND UP)

(IWER: IF NEEDED CLARIFY, "Please answer based on your child's age as of their last birthday.")

\_\_\_ ENTER CHILD'S AGE

DK/REFUSAL/NOT ASCERTAINED

IF CAGE<19 THEN GO TO CGENDER

CAGE.CK

[0/0/39/39/74/74]a. / CAGE.CK

I have entered that [NAME OF CHILD] is [CAGE] . Is that correct?

("DK" NOT ALLOWED)

1. YES-AGE ENTERED CORRECTLY
2. NO-CORRECT AGE -----> CAGE

IF cage>18 and cage<>99 then go to ALL.DONE

CGENDER

[0/0/40/40/75/75]. / CGENDER

(IF NEEDED: "Is your child male or female?")

1. MALE
2. FEMALE

REFUSAL/NOT ASCERTAINED

LATINO

[62/55/41/41/76/76]. / LATINO

[Are/Is] [you/your child] of Hispanic or Latino origin or descent?

1. YES / HISPANIC OR LATINO
2. NO / NOT HISPANIC OR LATINO

DK/REFUSAL/NOT ASCERTAINED

INTRO.RACE

INTRO.RACE

I am going to read a list of race categories. For each category, please say YES or NO if it describes [your/your child's] race. I must ask you about all categories in case more than one applies.



PQRACE3.(1-6)  
[63/56/42/42/77/77].(1-6) / PQRACE3.(1-6)

[(Are you)/(Is your child)]

1. "White"
2. "Black or African-American"
3. "Asian"
4. "Native Hawaiian or other Pacific Islander"
5. "American Indian or Alaska Native"
6. "Some other race"
- ?

(IWER: IF R REPLIES "WHY ARE YOU ASKING ABOUT MY [/CHILD'S] RACE?" SAY "We ask about [your/your child's] race for demographic purposes only. We want to be sure that the people we survey accurately represent the racial diversity of managed care enrollees in this country.")

(IWER: If R answers with a category not listed here, such as "HISPANIC" or "AMERICAN" or "MIXED RACE", probe using the category "OTHER".)

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

QRACE3.OTH / QRACE3.OTH  
(What is [your/your child's] race?)

---

PAGE

[0/0/43/43/78/78]. / PAGE

Now I have a few questions about you. What is YOUR age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your last birthday.")

(READ IF NEEDED, "Are you...")

0. UNDER 18,
1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PGENDER

[0/0/44/44/79/79]. / PGENDER

(IWER: ENTER RESPONDENT'S SEX.)

(IWER: IF NECESSARY ASK, "Are you male or female?")

1. MALE
2. FEMALE

DK/REFUSAL/NOT ASCERTAINED

## EDUCAT

[61/54/45/45/80/80]. / EDUCAT

What is the highest grade or level of school that you have completed?  
Did you complete...

(IWER: IF R SAYS HE/SHE HAD NON-ACADEMIC TRAINING, SUCH AS TRADE  
SCHOOL, PROBE: "Did you receive a high school diploma or GED?")

(IWER: ACADEMIC TRAINING BEYOND A HIGH SCHOOL DIPLOMA THAT DOES NOT  
LEAD TO A BACHELORS DEGREE, SHOULD BE CODED "4". IF R WENT TO BUSINESS  
SCHOOL OR GOT A 3-YEAR NURSING DEGREE, ENTER "4")

(IWER: IF R OFFERS MORE THAN ONE RESPONSE, FOR EXAMPLE: "SOME HIGH  
SCHOOL OR GED", ENTER THE HIGHEST NUMBER THAT APPLIES.)

(READ LIST)

1. 8TH GRADE OR LESS,
2. SOME HIGH SCHOOL, BUT DID NOT GRADUATE,
3. HIGH SCHOOL GRADUATE OR GED,
4. SOME COLLEGE OR 2-YEAR DEGREE,
5. 4-YEAR COLLEGE GRADUATE, OR
6. MORE THAN A 4-YEAR COLLEGE DEGREE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## CHRELT

[0/0/46/46/81/81]. / CHRELT

How are you related to the child?

(READ IF NEEDED: "Are you the ...")

1. MOTHER OR FATHER,
2. GRANDPARENT,
3. AUNT OR UNCLE,
4. OLDER BROTHER OR SISTER,
5. OTHER RELATIVE,
6. LEGAL GUARDIAN, OR
7. SOMEONE ELSE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ALL.DONE  
THANKS.SCREEN.

Those are all the questions I have.

Thank you for taking part in this important interview.

Have a nice (day/evening). Good bye.

RETURN TO COVERSHEET

EDIT.FLG  
(IWER: DO YOU NEED TO TYPE AN EDIT?)

1. YES
2. NO

IF EDIT.FLG = 2 THEN GO TO CK.END.EDIT

EDIT.OTH  
EDIT.OTH. (IWER: PLEASE TYPE YOUR EDIT-BE SPECIFIC-INCLUDE:  
1) QUESTION NUMBER(S)  
2) WHAT WAS ENTERED  
3) WHAT NEEDS TO BE CHANGED

---

CK.END.EDIT  
LANG.DID

LANG.DID. IWER: DID YOU DO THIS INTERVIEW IN...

1. ENGLISH,
2. SPANISH OR
3. BOTH?