



Health Share of Oregon  
CAHPS® 5.0 Medicaid Survey

Banner Book Report

June 2015



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## METHODOLOGY

### Introduction

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

### Survey Milestones

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

### Sampling

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

### Questionnaires

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

### Selection of Cases for Analysis

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

## Composites, Overall Ratings, and Measures for Reporting

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

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

### Composite: Getting Needed Care

- Q14/15. Got care, tests or treatment you thought you needed
- Q25/46. Getting appointments with specialists

### Composite: Getting Care Quickly

- Q4/4. Got care for illness/injury/condition as soon as you thought you/child needed
- Q6/6. Got an appt. for routine care as soon as you thought you/child needed

### Composite: How Well Doctors Communicate

- Q17/32. Personal doctor explained things in a way that was easy to understand
- Q18/33. Personal doctor listened carefully to you
- Q29/34. Personal doctor showed respect for what you had to say
- Q20/37. Personal doctor spent enough time with you

### Composite: Customer Service

- Q31/50. Health plan's customer service gave needed information or help
- Q32/51. Treated with courtesy and respect by health plan's customer service staff

### Composite: Shared Decision Making

- Q10/11. Doctor talked about reasons you might want to take a medicine
- Q11/12. Doctor talked about reasons you might not want to take a medicine
- Q12/13. Doctor talked about what you thought was best for you when discussing a medication

### Rating Questions

- Q13/14. Rating of all health care
- Q23/41. Rating of personal doctor
- Q27/47. Rating of specialist doctor
- Q35/54. Rating of health plan

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

- Q--/20. Getting special medical equipment or devices for your child
- Q--/23. Getting special therapy (physical, occupational, speech) for your child
- Q--/26. Getting treatment or counseling for your child

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

- Q--/38. Child's personal doctor talked with you about how child is feeling, growing, behaving
- Q--/43. Child's personal doctor understands how child's health conditions affect child's day-to-day life
- Q--/44. Child's personal doctor understands how child's health conditions affect family's day-to-day life

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

- Q--/18. Got help contacting school and daycare from someone at health plan or doctor's office
- Q--/29. Got help coordinating care among providers from someone at health plan or doctor's office

## Comparisons, Statistical Testing, Scoring, and Weighting

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

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

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

## Sample Disposition

Category	Adult		Child	
	Health Share of Oregon	Overall	Health Share of Oregon	Overall
<b>**First mailing - sent</b>	900	15300	900	15300
<b>*First mailing - usable survey returned</b>	152	3240	108	2377
<b>Second mailing - sent</b>	730	12007	759	12648
<b>*Second mailing - usable survey returned</b>	64	979	60	987
<b>*Phone - usable surveys</b>	73	1234	140	1999
<b>Total - usable surveys</b>	289	5453	308	5363
<b>†Ineligible: According to population criteria‡</b>	8	261	13	158
<b>†Ineligible: Deceased</b>	2	39	0	1
<b>†Ineligible: Mentally or physically unable to complete survey</b>	11	207	0	0
<b>†Ineligible: Language barrier</b>	20	52	20	40
<b>Incorrect address AND incorrect phone number</b>	70	1173	76	1296
<b>Refusal/Returned survey blank</b>	39	667	38	729
<b>Nonresponse - Unavailable by mail or phone</b>	461	7448	445	7713
<b>Adjusted Response Rate</b>	<b>33.6%</b>	<b>37.0%</b>	<b>35.5%</b>	<b>35.5%</b>

\*Included in response rate numerator

†Excluded from adjusted response rate denominator

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

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

## Response/Non-Response Comparison

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

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

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

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

### Adult

Gender / Age	Non-Respondents	Respondents	Difference
Male	211 42.2%	120 41.5%	-0.68%
Female	289 57.8%	169 58.5%	0.68%
18-24	102 20.4%	32 11.1%	-9.33%
25-34	128 25.6%	40 13.8%	-11.76%
35-44	97 19.4%	46 15.9%	-3.48%
45-54	79 15.8%	63 21.8%	6.00%
55-64	65 13.0%	72 24.9%	11.91%
65-74	17 3.4%	23 8.0%	4.56%
75 or Older	12 2.4%	13 4.5%	2.10%

### Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	240 49.7%	158 51.3%	1.61%
Female	243 50.3%	150 48.7%	-1.61%
<3	81 16.8%	58 18.8%	2.06%
4-7	124 25.7%	80 26.0%	0.30%
8-12	155 32.1%	90 29.2%	-2.87%
13 or older	123 25.5%	80 26.0%	0.51%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE	
Q1 YES	283 100%	5345 100%	28 100%	34 100%	41 100%	51 100%	66 100%	33 100%	184 100%	11 100%	20 100%	3 100%	15 100%	15 100%	32 100%	216 100%	182 100%	75 100%	96 100%	160 100%
NOT ANSWERED	6	108			2		3	1	4	1	1				5	3	2	4	2	
VALID CASES	283	5345	28	34	41	51	66	33	184	11	20	3	15	15	32	216	182	75	96	160
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%	3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%



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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE			
Q3 YES	103 38%	2233 43%*	7 25%~	13 38%~	18 42%~	23 47%~	22 33%	13 38%~	66 35%	6 55%~	11 52%~	2 ~	4 67%~	5 29%~	36%~	12 39%~	80 37%	61 33%*	35 47%*	27 27%*	70 44%*
NO	171 62%	2997 57%*	21 75%~	21 62%~	25 58%~	26 53%~	45 67%	21 62%~	121 65%	5 45%~	10 48%~	1 ~	10 33%~	9 71%~	64%~	19 61%~	139 63%	123 67%*	39 53%*	72 73%*	89 56%*
NOT ANSWERED	15	223				2	2		1	1			1	1	1	2	1	3	1	3	
VALID CASES	274	5230	28	34	43	49	67	34	187	11	21	3	14	14	31	219	184	74	99	159	
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%	3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%	

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q4 NEVER	3 3%	63 3%	~	~	~	~	11%~ 9%~	2%~	~	~	~	50%~	~	~	2 3%~	2 4%~	~	~	3 5%~		
SOMETIMES	11 12%	285 14%	~	31%~	13%~	14%~	5%~ 9%~	8%~	40%~	13%~	~	~	~	40%~	30%~	10%~	9%~	12%~	9%~ 14%~		
USUALLY	34 37%	563 28%*	60%~	38%~	50%~	32%~	37%~ 27%~	42%~	20%~	25%~	~	50%~	50%~	40%~	30%~	42%~	35%~	45%~	35%~ 41%~		
ALWAYS	45 48%	1115 55%	40%~	31%~	38%~	55%~	47%~ 55%~	48%~	40%~	63%~	~	~	50%~	20%~	40%~	45%~	53%~	42%~	57%~ 41%~		
#ALWAYS + USUALLY (NET)	79 85%	1678 83%	100%~	69%~	88%~	86%~	84%~ 82%~	90%~	60%~	88%~	~	50%~	100%~	60%~	70%~	88%~	87%~	88%~	91%~ 81%~		
TOP BOX SCORE	45 48%	1115 55%	40%~	31%~	38%~	55%~	47%~ 55%~	48%~	40%~	63%~	~	~	50%~	20%~	40%~	45%~	53%~	42%~	57%~ 41%~		
NOT ANSWERED	10	220	2		2	1	3 2	6	1	3					2	7	6	2	4 6		
VALID CASES	93	2026	5	13	16	22	19 11	60	5	8		2	4	5	10	73	55	33	23 64		
NUMBER OF RESPONDENTS	103 100%	2246 100%	7 100%	13 100%	18 100%	23 100%	22 100%	13 100%	66 100%	6 100%	11 100%		2 100%	4 100%	5 100%	12 100%	80 100%	61 100%	35 100%	27 100%	70 100%

[ASKED IF Q3 = YES]

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV ILND	AMER PAC	IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	FE- MALE	MALE	
Q5	HTS TOT ADLT																					
YES	198 73%	3616 70%	13 48%~	30 88%~	25 60%~	43 86%*	50 76%	25 76%~	136 73%	11 92%~	16 84%~	2 ~	7 67%~	9 54%~	60%~	19 66%~	160 74%	129 71%	56 77%	72 74%	114 72%	
NO	73 27%	1586 30%	14 52%~	4 12%~	17 40%~	7 14%*	16 24%	8 24%~	50 27%	1 8%~	3 16%~	1 ~	6 33%~	6 46%~	6 40%~	10 34%~	57 26%	53 29%	17 23%	25 26%	44 28%	
NOT ANSWERED	18	251	1		1	1	3	1	2		2			2		3	4	3	4	3	4	
VALID CASES	271	5202	27	34	42	50	66	33	186	12	19		3	13	15	29	217	182	73	97	158	
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%		3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%	

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER					
	HTS TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q6 NEVER	4 2%	100 3%	~	~	~	3%	5%	0.8%	11%	~	~	~	~	~	~	2%	2%	2%	2%			
SOMETIMES	23 13%	562 17%*	4 33%	6 21%	1 5%	4 11%	6 14%	2 9%	13 11%	3 33%	3 25%	~	~	1 14%	1 13%	3 17%	17 12%	14 12%	8 16%	11 17%	12 12%	
USUALLY	40 23%	870 27%	3 25%	6 21%	7 32%	7 19%	7 16%	6 26%	27 22%	2 22%	1 8%	~	~	1 50%	3 43%	1 13%	6 33%	31 22%	26 23%	10 20%	9 14%*	27 26%
ALWAYS	109 62%	1715 53%*	5 42%	16 57%	14 64%	25 68%	28 65%	15 65%	81 66%	3 33%	8 67%	~	~	1 50%	3 43%	6 75%	9 50%	91 65%	72 63%	32 64%	42 67%	61 60%
#ALWAYS + USUALLY (NET)	149 85%	2585 80%*	8 67%	22 79%	21 95%	32 86%	35 81%	21 91%	108 89%	5 56%	9 75%	~	~	2 100%	6 86%	7 88%	15 83%	122 87%	98 86%	42 84%	51 81%	88 86%
TOP BOX SCORE	109 62%	1715 53%*	5 42%	16 57%	14 64%	25 68%	28 65%	15 65%	81 66%	3 33%	8 67%	~	~	1 50%	3 43%	6 75%	9 50%	91 65%	72 63%	32 64%	42 67%	61 60%
NOT ANSWERED	22	326	1	2	3	6	7	2	14	2	4			1	1	19	15	6	9	12		
VALID CASES	176	3247	12	28	22	37	43	23	122	9	12			2	7	8	18	141	114	50	63	102
NUMBER OF RESPONDENTS	198	3573	13	30	25	43	50	25	136	11	16			2	7	9	19	160	129	56	72	114
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q5 = YES]

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
	HTS TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q7 NONE	58 21%	1271 25%	12 43%~	4 12%~	15 35%~	6 12%*	11 16%	6 18%~	43 23%	2 18%~	3 14%~	~	~	3 20%~	4 29%~	9 29%~	46 21%	44 24%	13 17%	27 28%	30 19%	
1 TIME	57 21%	975 19%	6 21%~	9 26%~	5 12%~	9 18%	18 27%	6 18%~	40 22%	2 18%~	3 14%~	~	33%~	1 27%~	4 7%~	1 10%~	3 22%	48 25%*	9 12%*	24 25%	29 18%	
2	52 19%	973 19%	5 18%~	11 32%~	8 19%~	9 18%	11 16%	6 18%~	29 16%*	3 27%~	8 38%~	~	~	3 20%~	5 36%~	6 19%~	41 19%	35 19%	14 19%	20 21%	30 19%	
3	33 12%	600 12%	2 7%~	4 12%~	5 12%~	8 16%	5 7%	6 18%~	22 12%	2 18%~	4 19%~	~	~	1 7%~	~	3 10%~	26 12%	19 10%	11 15%	9 9%	21 13%	
4	24 9%	448 9%	2 7%~	2 6%~	2 5%~	8 16%	5 7%	3 9%~	16 9%	1 9%~	1 5%~	~	33%~	1 7%~	1 7%~	1 16%~	17 8%	14 8%	8 11%	6 6%	16 10%	
5 TO 9	31 11%	631 12%	1 4%~	2 6%~	5 12%~	8 16%	10 15%	4 12%~	22 12%	1 9%~	1 5%~	~	~	2 13%~	3 21%~	5 16%~	25 11%	18 10%	12 16%	7 7%	23 14%	
10 OR MORE TIMES	17 6%	265 5%	~	2 6%~	3 7%~	2 4%	7 10%	2 6%~	13 7%	~	1 5%~	~	33%~	1 7%~	1 ~	~	16 7%*	7 4%*	8 11%	4 4%	11 7%	
NOT ANSWERED	17	290				1	2	1	3	1				1	1	2	3	2	3	2		
VALID CASES	272	5163	28	34	43	50	67	33	185	11	21			3	15	14	31	219	182	75	97	160
NUMBER OF RESPONDENTS	289	5453	28	34	43	51	69	34	188	12	21			3	15	15	32	221	185	77	100	162
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	HTS TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q8 #YES	154 74%	2683 71%	10 63%~	17 61%~	19 68%~	33 77%~	45 82%	22 81%~	107 78%	6 67%~	11 61%~	2 ~	9 67%~	8 80%~	20 91%~	122 72%~	96 71%	50 82%	51 75%	94 73%
NO	55 26%	1081 29%	6 38%~	11 39%~	9 32%~	10 23%~	10 18%	5 19%~	31 22%	3 33%~	7 39%~	1 ~	3 33%~	2 20%~	2 9%~	47 28%~	39 29%	11 18%	17 25%	34 27%
NOT ANSWERED	5	79	2		1		1	4						4		3	1	2	2	
VALID CASES	209	3764	16	28	28	43	55	27	138	9	18	3	12	10	22	169	135	61	68	128
NUMBER OF RESPONDENTS	214 100%	3843 100%	16 100%	30 100%	28 100%	44 100%	56 100%	27 100%	142 100%	9 100%	18 100%	3 100%	12 100%	10 100%	22 100%	173 100%	138 100%	62 100%	70 100%	130 100%

[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?

	HTS TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILLND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q9 YES	114 56%	2125 57%	6 38%~	14 50%~	15 54%~	27 64%~	31 56% 58%~	15 58%	80 58%	5 56%~	8 44%~	3 ~100%~	5 45%~	4 40%~	11 52%~	94 56%~	66 50%*	41 66%*	35 51%	72 57%	
NO	91 44%	1611 43%	10 63%~	14 50%~	13 46%~	15 36%~	24 44% 42%~	11 42%	57 42%	4 44%~	10 56%~	6 ~	6 ~	6 55%~	6 60%~	10 48%~	74 44%~	65 50%*	21 34%*	33 49%	54 43%
NOT ANSWERED	9	107	2			2 1	1 1	5					1		1	5	7		2	4	
VALID CASES	205	3736	16	28	28	42	55	26	137	9	18		3	11	10	21	168	131	62	68	126
NUMBER OF RESPONDENTS	214 100%	3843 100%	16 100%	30 100%	28 100%	44 100%	56 100%	27 100%	142 100%	9 100%	18 100%		3 100%	12 100%	10 100%	22 100%	173 100%	138 100%	62 100%	70 100%	130 100%

[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?

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHTE	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q10 #YES	HTS TOT ADLT 107 94%	1887 92%	4 67%	12 86%	13 87%	27 100%	31 100%	15 100%	75 94%	5 100%	8 100%	3 ~	4 80%	4 100%	10 91%	89 95%	61 92%	40 98%	32 91%	69 96%
NO	7 6%	166 8%	2 33%	2 14%	2 13%	~	~	~	5 6%	~	~	~	1 20%	1 ~	5 9%	5 8%	1 2%	3 9%	3 4%	
NOT ANSWERED	26	436	2	2	3	3	2	8	1	1	1	1	2	7	10	2	5	6		
VALID CASES	114	2053	6	14	15	27	31	15	80	5	8	3	5	4	11	94	66	41	35	72
NUMBER OF RESPONDENTS	140	2489	6	16	15	30	34	17	88	6	8	3	6	5	13	101	76	43	40	78
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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



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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q11 #YES	HTS TOT ADLT 83 73%	1488 73%	3 50%~	10 71%~	14 93%~	19 73%~	21 68%~	11 73%~	58 72%~	5 100%~	4 57%~	2 ~ 67%~	3 60%~	3 75%~	7 64%~	69 74%~	43 66%~	34 83%~	27 79%~	50 69%~
NO	30 27%	562 27%	3 50%~	4 29%~	1 7%~	7 27%~	10 32%~	4 27%~	22 28%~	3 ~ 43%~	1 ~ 33%~	2 40%~	1 25%~	4 36%~	24 26%~	22 34%~	7 17%~	7 21%~	22 31%~	
NOT ANSWERED	1	44			1					1					1	1		1		
VALID CASES	113	2050	6 100%	14 100%	15 100%	26 100%	31 100%	15 100%	80 100%	5 100%	7 100%	3 100%	5 100%	4 100%	11 100%	93 100%	65 100%	41 100%	34 100%	72 100%
NUMBER OF RESPONDENTS	114 100%	2094 100%	6 100%	14 100%	15 100%	27 100%	31 100%	15 100%	80 100%	5 100%	8 100%	3 100%	5 100%	4 100%	11 100%	94 100%	66 100%	41 100%	35 100%	72 100%

[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?

	HTS TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE		
Q12 #YES	80 71%	1534 75%	3 50%~	9 64%~	10 67%~	22 85%~	21 68%~	10 67%~	51 65%~	5 100%~	7 88%~	2 ~ 67%~	4 80%~	3 75%~	11 100%~	62 67%~	47 71%~	27 67%~	27 77%~	48 68%~
NO	33 29%	511 25%	3 50%~	5 36%~	5 33%~	4 15%~	10 32%~	5 33%~	28 35%~	1 ~ 12%~	1 ~ 33%~	1 20%~	1 25%~	1 ~ 33%~	31 ~ 33%~	19 29%~	13 33%~	8 23%~	23 32%~	
NOT ANSWERED	1	49				1			1						1		1		1	
VALID CASES	113	2045	6	14	15	26	31	15	79	5	8	3	5	4	11	93	66	40	35	71
NUMBER OF RESPONDENTS	114 100%	2094 100%	6 100%	14 100%	15 100%	27 100%	31 100%	15 100%	80 100%	5 100%	8 100%	3 100%	5 100%	4 100%	11 100%	94 100%	66 100%	41 100%	35 100%	72 100%

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

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER						
	HTS TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE				
Q13 WORST HEALTH CARE POSSIBLE	21%	29% 0.8%	~	~	~	~	2%	4%	0.7%	~	~	~	33%	~	~	2%	1%	1%	2%			
01	31%	27% 0.7%	~	~	~	2%	2%	~	~	~	~	~	~	~	1%	~	2%	1%	1%			
02	391%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~			
03	21%	70% 2%	~	4%	~	~	~	4%	0.7%	~	6%	~	~	~	2%	1%	2%	~	2%			
04	42%	85% 2%	~	4%	~	2%	4%	~	2%	~	~	~	~	11%	3%	1%	5%	3%	1%	3%		
05	115%	285% 8%	20%	4%	~	2%	10%	~	5%	29%	~	~	~	11%	1%	9%	5%	5%	6%	5%		
06	84%	223% 6%	7%	4%	4%	5%	6%	~	4%	~	6%	~	~	8%	1%	7%	4%	3%	4%	3%	5%	
07	3015%	493% 13%	13%	14%	18%	16%	12%	15%	15%	~	6%	~	~	25%	2%	26%	10%	15%	12%	18%	6%	21%
08	4522%	772% 21%	20%	25%	29%	20%	15%	15%	21%	14%	31%	~	~	33%	2%	36%	10%	21%	24%	15%	16%	23%
09	3818%	616% 16%	13%	18%	18%	25%	15%	23%	19%	29%	13%	~	~	33%	3%	32%	24%	19%	19%	18%	18%	19%
BEST HEALTH CARE POSSIBLE	6331%	1096% 29%	27%	29%	32%	27%	35%	38%	32%	29%	38%	~	~	42%	10%	50%	48%	30%	36%*	25%	18%	43%
#8-10 (NET)	14671%	2485% 66%	60%	71%	79%	73%	65%	77%	72%	71%	81%	~	~	67%	17%	118%	81%	70%	79%*	57%*	52%	85%

Continued

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

	AGE							RACE					ETHNICITY		HEALTH STATUS		GENDER				
	HTS 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/ IND/ PAC ALSK	AMER ILND NATV OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
9-10 (NET)	101 49%	1712 46%	6 40%~	13 46%~	14 50%~	23 52%~	26 50%	16 62%~	71 51%	4 57%~	8 50%~	1 ~	6 33%~	4 50%~	15 71%~	82 49%~	72 55%*	26 43%	36 54%	62 50%	
NOT ANSWERED	8	106	1	2			4	1	3	2	2			1	1	5	6	1	3	5	
VALID CASES	206	3737	15	28	28	44	52	26	139	7	16		3	12	9	21	168	132	61	67	125
NUMBER OF RESPONDENTS	214 100%	3843 100%	16 100%	30 100%	28 100%	44 100%	56 100%	27 100%	142 100%	9 100%	18 100%		3 100%	12 100%	10 100%	22 100%	173 100%	138 100%	62 100%	70 100%	130 100%
MEAN	8.11	7.91	7.80	8.11	8.57	8.23	7.88	8.35	8.27	8.00	8.38		5.67	8.50	7.56	8.86	8.12	8.47	7.59	8.28	8.09
p stat_(*=Sig @ p<=.05)		.092	~	~	~	~	.415	~	.141	~	~	~	~	~	~	~	~	.002*	.030*	.352	.865

[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?

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER					
	HTS TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q14 NEVER	6 3%	104 3%	~	1 4%	1 4%	1 2%	2 4%	1 4%	4 3%	~	~	~	1 33%	~	~	5 3%	4 3%	1 2%	1 1%	5 4%		
SOMETIMES	24 12%	575 15%*	~	7 25%	3 11%	2 5%	7 13%	3 12%	11 8%*	3 33%	5 31%	~	1 10%	2 22%	2 11%	18 11%	17 13%	7 12%	8 11%	14 11%		
USUALLY	73 35%	1243 33%	47%	7 29%	8 39%	11 48%	21 32%	17 23%	6 38%	2 22%	5 31%	~	1 33%	5 50%	3 33%	3 16%	67 39%	42 31%	27 45%	25 36%	44 36%	
ALWAYS	104 50%	1797 48%	53%	8 43%	12 46%	13 46%	20 45%	27 51%	16 62%	72 51%	4 44%	6 38%	~	1 33%	4 40%	4 44%	14 74%	80 47%	71 53%	25 42%	36 51%	60 49%
#ALWAYS + USUALLY (NET)	177 86%	3040 82%	100%	15 71%	20 86%	24 93%	41 83%	44 85%	22 89%*	6 67%	11 69%	~	2 67%	9 90%	7 78%	17 89%	147 86%	113 84%	52 87%	61 87%	104 85%	
TOP BOX SCORE	104 50%	1797 48%	53%	8 43%	12 46%	13 46%	20 45%	27 51%	16 62%	72 51%	4 44%	6 38%	~	1 33%	4 40%	4 44%	14 74%	80 47%	71 53%	25 42%	36 51%	60 49%
NOT ANSWERED	7	124	1	2			3	1	2	2			2	1	3	3	4	2		7		
VALID CASES	207	3719	15	28	28	44	53	26	140	9	16		3	10	9	19	170	134	60	70	123	
NUMBER OF RESPONDENTS	214 100%	3843 100%	16 100%	30 100%	28 100%	44 100%	56 100%	27 100%	142 100%	9 100%	18 100%		3 100%	12 100%	10 100%	22 100%	173 100%	138 100%	62 100%	70 100%	130 100%	

[ASKED IF Q7 >= 1 TIME]

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE	
Q15 YES	225 82%	4201 81%	17 63%~	25 74%~	32 74%~	44 88%	59 88%	31 94%~	153 83%	6 50%~	18 90%~	2 ~	12 67%~	12 80%~	12 80%~	25 78%~	177 82%	145 80%	65 86%	75 77%	135 85%
NO	48 18%	995 19%	10 37%~	9 26%~	11 26%~	6 12%	8 12%	2 6%~	31 17%	6 50%~	2 10%~	1 ~	3 33%~	3 20%~	3 20%~	7 22%~	40 18%	36 20%	11 14%	23 23%	24 15%
NOT ANSWERED	16	257	1			1	2	1	4		1					4	4	1	2	3	
VALID CASES	273	5196	27	34	43	50	67	33	184	12	20		3	15	15	32	217	181	76	98	159
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%		3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q16 NONE	30 14%	713 18%*	6 35%~	1 4%~	6 19%~	3 7%~	7 13%	6 20%~	22 15%	2 ~	12%~	~	~	2 17%~	2 17%~	4 17%~	25 15%~	21 15%	8 12%	10 14%	20 15%
1 TIME	60 28%	973 24%	6 35%~	6 26%~	10 31%~	10 23%~	17 32%	9 30%~	42 29%	2 33%~	5 29%~	~	~	5 42%~	2 17%~	5 21%~	50 29%~	44 32%	15 23%	24 34%	34 26%
2	54 25%	1005 25%	5 29%~	7 30%~	7 22%~	12 27%~	10 19%	7 23%~	31 22%	1 17%~	6 35%~	~	~	4 33%~	5 42%~	8 33%~	41 24%~	36 26%	13 20%	16 23%	32 25%
3	29 14%	534 13%	~	4 17%~	5 16%~	8 18%~	5 9%	4 13%~	17 12%	3 50%~	2 12%~	~	1 50%~	1 ~	1 8%~	4 17%~	21 12%~	16 12%	10 15%	7 10%	19 15%
4	15 7%	322 8%	~	3 13%~	1 3%~	3 7%~	4 8%	3 10%~	14 10%*	~	~	~	~	~	~	1 4%~	13 8%~	8 6%	6 9%	3 4%	11 8%
5 TO 9	25 12%	403 10%	~	2 9%~	3 9%~	8 18%~	10 19%	1 3%~	18 13%	2 ~	12%~	~	1 50%~	1 8%~	2 17%~	2 8%~	20 12%~	11 8%*	13 20%*	10 14%	14 11%
10 OR MORE TIMES	1 0.5%	75 2%*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	11	238		2			6	1	9	1						1	7	9		5	5
VALID CASES	214	4026	17	23	32	44	53	30	144	6	17		2	12	12	24	170	136	65	70	130
NUMBER OF RESPONDENTS	225	4264	17	25	32	44	59	31	153	6	18		2	12	12	25	177	145	65	75	135
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q15 = YES]

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q17 NEVER	2 1%	47 1%	~	~	~	2%	~	~0.8%	~	~	~	~	~	~	~0.7%	~0.9%	2%	~0.9%	1		
SOMETIMES	8 4%	196 6%	18%~	5%~	~	5%~	4%~	4%~	5%	~	13%~	~	~	~	~	6%~	6%	2%	3%	5%	
USUALLY	42 23%	719 22%	27%~	18%~	31%~	22%~	16%~	25%~	21%	33%~	27%~	~	50%~	20%~	10%~	25%~	22%~	17%*	33%*	20%	24%
ALWAYS	131 72%	2245 70%	55%~	77%~	69%~	71%~	80%~	71%~	74%	67%~	60%~	~	50%~	80%~	90%~	75%~	72%~	76%	63%	45%	77%
#ALWAYS + USUALLY (NET)	173 95%	2963 92%	82%~	95%~	100%~	93%~	96%~	96%~	94%	100%~	87%~	~	100%~	100%~	100%~	100%~	94%~	93%	96%	57%	103%
TOP BOX SCORE	131 72%	2245 70%	55%~	77%~	69%~	71%~	80%~	71%~	74%	67%~	60%~	~	50%~	80%~	90%~	75%~	72%~	76%	63%	45%	77%
NOT ANSWERED	1	22					1		1							1			1		
VALID CASES	183	3206	11	22	26	41	45	24	121	6	15		2	10	10	20	144	115	57	59	110
NUMBER OF RESPONDENTS	184	3228	11	22	26	41	46	24	122	6	15		2	10	10	20	145	115	57	60	110
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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



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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS 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/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q18 NEVER	4 2%	67 2%	~	~	1 4%	2 5%	1 2%	~	3 2%	~	~	~	~	~	~	~	4 3%	1 0.9%	3 5%	1 2%	3 3%
SOMETIMES	11 6%	251 8%	~	2 9%	2 8%	4 10%	1 2%	2 8%	8 7%	~	2 13%	~	~	~	1 10%	1 5%	10 7%	6 5%	4 7%	4 7%	7 6%
USUALLY	36 20%	665 21%	5 45%	5 23%	4 15%	9 22%	7 15%	3 13%	24 20%	2 33%	3 20%	~	1 50%	2 20%	1 10%	3 15%	30 21%	19 17%	15 26%	10 17%	24 22%
ALWAYS	132 72%	2214 69%	6 55%	15 68%	19 73%	26 63%	37 80%	19 79%	87 71%	4 67%	10 67%	~	1 50%	8 80%	8 80%	16 80%	101 70%	89 77%*	35 61%*	45 75%	76 69%
#ALWAYS + USUALLY (NET)	168 92%	2879 90%	11 100%	20 91%	23 88%	35 85%	44 96%	22 92%	111 91%	6 100%	13 87%	~	2 100%	10 100%	9 90%	19 95%	131 90%	108 94%	50 88%	55 92%	100 91%
TOP BOX SCORE	132 72%	2214 69%	6 55%	15 68%	19 73%	26 63%	37 80%	19 79%	87 71%	4 67%	10 67%	~	1 50%	8 80%	8 80%	16 80%	101 70%	89 77%*	35 61%*	45 75%	76 69%
NOT ANSWERED	1	31																			
VALID CASES	183	3197	11	22	26	41	46	24	122	6	15		2	10	10	20	145	115	57	60	110
NUMBER OF RESPONDENTS	184	3228	11	22	26	41	46	24	122	6	15		2	10	10	20	145	115	57	60	110
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q19 NEVER	3 2%	85 3%	~	~	4%~	2%~	2%~	~	2%	~	~	~	~	~	~	3	1	2	1	2	
SOMETIMES	11 6%	193 6%	9%~	5%~	4%~	5%~	9%~	8%~	7%	17%~	13%~	~	~	~	~	11	5	5	4	7	
USUALLY	31 17%	575 18%	9%~	23%~	19%~	24%~	7%~	17%~	16%	~	33%~	~	~	22%~	20%~	5	24	17	12	6	23
ALWAYS	137 75%	2339 73%	82%~	73%~	73%~	68%~	82%~	75%~	93	5	8	~	2	7	8	14	107	92	37	49	77
#ALWAYS + USUALLY (NET)	168 92%	2915 91%	91%~	95%~	92%~	93%~	89%~	92%~	112	5	13	~	2	9	10	19	131	109	49	55	100
TOP BOX SCORE	137 75%	2339 73%	82%~	73%~	73%~	68%~	82%~	75%~	93	5	8	~	2	7	8	14	107	92	37	49	77
NOT ANSWERED	2	35					1						1			1		1		1	
VALID CASES	182	3193	11	22	26	41	45	24	122	6	15		2	9	10	19	145	115	56	60	109
NUMBER OF RESPONDENTS	184	3228	11	22	26	41	46	24	122	6	15		2	10	10	20	145	115	57	60	110
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV ILND	AMER PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q20 NEVER	6 3%	95 3%	1 ~	5%~	3 ~	7%~	1 2%~	3 2%	~	~	~	~	~	1 10%~	~	5 3%~	2 2%	3 5%	2 3%	3 3%	
SOMETIMES	16 9%	295 9%	3 27%~	1 5%~	4 15%~	~	4 9%~	2 8%~	9 7%	1 17%~	2 13%~	~	~	2 20%~	1 5%~	13 9%~	5 4%*	10 18%*	3 5%	11 10%	
USUALLY	50 27%	856 27%	3 27%~	6 27%~	7 27%~	15 37%~	10 22%~	5 21%~	33 27%	2 33%~	6 40%~	~	~	5 50%~	6 30%~	40 28%~	30 26%	16 28%	17 28%	29 26%	
ALWAYS	111 61%	1950 61%	5 45%~	14 64%~	15 58%~	23 56%~	31 67%~	17 71%~	77 63%	3 50%~	7 47%~	~	2 ~100%~	5 50%~	7 70%~	13 65%~	87 60%~	78 68%*	28 49%*	38 63%	67 61%
#ALWAYS + USUALLY (NET)	161 88%	2806 88%	8 73%~	20 91%~	22 85%~	38 93%~	41 89%~	22 92%~	110 90%	5 83%~	13 87%~	~	2 ~100%~	10 100%~	7 70%~	19 95%~	127 88%~	108 94%*	44 77%*	55 92%	96 87%
TOP BOX SCORE	111 61%	1950 61%	5 45%~	14 64%~	15 58%~	23 56%~	31 67%~	17 71%~	77 63%	3 50%~	7 47%~	~	2 ~100%~	5 50%~	7 70%~	13 65%~	87 60%~	78 68%*	28 49%*	38 63%	67 61%
NOT ANSWERED	1	31																			
VALID CASES	183	3197	11	22	26	41	46	24	122	6	15		2	10	10	20	145	115	57	60	110
NUMBER OF RESPONDENTS	184	3228	11	22	26	41	46	24	122	6	15		2	10	10	20	145	115	57	60	110
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q21	HTS TOT ADLT																				
YES	107 60%	1943 61%	6 55%	10 48%	16 64%	26 63%	31 72%	12 50%	72 61%	2 33%	11 73%	2 ~100%	5 56%	6 60%	12 63%	87 61%	64 58%	37 65%	27 49%*	73 66%*	
NO	71 40%	1222 39%	5 45%	11 52%	9 36%	15 37%	12 28%	12 50%	47 39%	4 67%	4 27%	4 ~	4 ~	4 44%	4 40%	7 37%	55 39%	46 42%	20 35%	28 51%*	37 34%*
NOT ANSWERED	6	62	1	1		3		3				1		1	3	5		5			
VALID CASES	178	3166	11	21	25	41	43	24	119	6	15	2	9	10	19	142	110	57	55	110	
NUMBER OF RESPONDENTS	184	3228	11	22	26	41	46	24	122	6	15	2	10	10	20	145	115	57	60	110	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

			AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER			
	HTS TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q22 NEVER	6 6%	119 6%	1 17%	1 ~	2 7%	1 8%	1 3%	4 6%	1 ~	1 9%	~	~	~	~	5 6%	5 8%	1 3%	1 4%	4 6%		
SOMETIMES	16 16%	265 14%	2 33%	1 10%	2 13%	4 17%	4 13%	2 17%	9 13%	1 50%	2 18%	~	1 50%	1 ~	2 17%	13 15%	7 11%	9 25%	2 8%	13 18%	
USUALLY	32 31%	545 29%	2 33%	5 50%	6 40%	7 29%	8 26%	2 17%	23 33%	~	4 36%	~	1 ~	2 20%	2 33%	28 31%	19 31%	11 31%	7 27%	23 32%	
ALWAYS	49 48%	927 50%	1 17%	4 40%	6 40%	11 46%	18 58%	8 67%	33 48%	1 50%	4 36%	~	1 50%	4 80%	3 50%	8 67%	38 45%	31 50%	15 42%	16 62%	31 44%
#ALWAYS + USUALLY (NET)	81 79%	1472 79%	3 50%	9 90%	12 80%	18 75%	26 84%	10 83%	56 81%	1 50%	8 73%	~	1 50%	5 100%	5 83%	10 83%	66 79%	26 81%	26 72%	23 88%	54 76%
TOP BOX SCORE	49 48%	927 50%	1 17%	4 40%	6 40%	11 46%	18 58%	8 67%	33 48%	1 50%	4 36%	~	1 50%	4 80%	3 50%	8 67%	38 45%	31 50%	15 42%	16 62%	31 44%
NOT ANSWERED	4	61			1	2			3						3	2	1	1	2		
VALID CASES	103	1856	6	10	15	24	31	12	69	2	11	2	5	6	12	84	62	36	26	71	
NUMBER OF RESPONDENTS	107	1917	6	10	16	26	31	12	72	2	11	2	5	6	12	87	64	37	27	73	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER					
	HTS TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q23 WORST PERSONAL DOCTOR POSSIBLE	6 3%	60 2%	~	~	1 3%	2 5%	1 2%	~	3 2%	~	~	~	~	~	1 8%	5 3%	4 3%	2 3%	1 1%	4 3%	
01	1 0.5%	30 0.7%	~	~	~	~	1 2%	~	~	~	~	~	~	~	~	~	~	~	~	1 ~0.8%	
02		27 0.7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
03	3 1%	71 2%	~	1 4%	~	~	2 4%	~	3 2%	~	~	~	~	~	~	3 2%	2 1%	~	~	3 2%	
04	4 2%	80 2%	2 13%	~	~	~	2 4%	~	4 3%*	~	~	~	~	~	~	4 2%	2 1%	1 2%	3 4%	1 0.8%	
05	10 5%	203 5%	~	~	2 6%	~	4 8%	3 10%	6 4%	1 17%	1 6%	~	~	~	~	1 4%	7 4%	4 3%	5 8%	3 4%	6 5%
06	11 5%	153 4%	~	1 4%	2 6%	5 11%	~	2 7%	8 6%	~	1 6%	~	1 8%	~	~	1 4%	10 6%	6 4%	5 8%	2 3%	9 7%
07	12 6%	289 7%	2 13%	1 4%	1 3%	1 2%	4 8%	2 7%	10 7%	~	~	~	~	~	1 8%	1 4%	10 6%	5 4%	6 10%	2 3%	9 7%
08	39 18%	720 18%	4 25%	9 38%	7 23%	8 18%	6 11%	3 10%	24 17%	1 17%	5 28%	~	~	3 25%	2 17%	5 21%	32 19%	27 20%	11 17%	13 18%	24 19%
09	34 16%	743 19%	3 19%	2 8%	7 23%	4 9%	10 19%	5 17%	22 15%	~	4 22%	~	1 50%	3 25%	1 8%	4 17%	26 15%	24 17%	8 13%	14 19%	16 13%
BEST PERSONAL DOCTOR POSSIBLE	93 44%	1623 41%	5 31%	10 42%	11 35%	24 55%	23 43%	15 50%	63 44%	4 67%	7 39%	~	1 50%	5 42%	7 58%	12 50%	71 42%	64 46%	25 40%	34 47%	55 43%
#8-10 (NET)	166 78%	3087 77%	12 75%	21 88%	25 81%	36 82%	39 74%	23 77%	109 76%	5 83%	16 89%	~	2 100%	11 92%	10 83%	21 88%	129 77%	115 83%*	44 70%	61 85%	95 74%

Continued

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

	AGE							RACE					ETHNICITY		HEALTH STATUS		GENDER			
	HTS TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE		
9-10 (NET)	127 60%	2366 59%	8 50%~	12 50%~	18 58%~	28 64%~	33 62%	20 67%~	85 59%	4 67%~	11 61%~	2 ~100%~	8 67%~	8 67%~	16 67%~	97 58%~	88 64%	33 52%	48 67%	71 55%
NOT ANSWERED	12	265	1	1	1		6	1	10						1	9	7	2	3	7
VALID CASES	213	3999	16	24	31	44	53	30	143	6	18	2	12	12	24	168	138	63	72	128
NUMBER OF RESPONDENTS	225 100%	4264 100%	17 100%	25 100%	32 100%	44 100%	59 100%	31 100%	153 100%	6 100%	18 100%	2 100%	12 100%	12 100%	25 100%	177 100%	145 100%	65 100%	75 100%	135 100%
MEAN	8.33	8.32	8.19	8.58	8.32	8.57	8.13	8.67	8.34	8.83	8.72	9.50	8.92	8.50	8.92	8.27	8.53	8.11	8.65	8.18
p stat_(*=Sig @ p<=.05)		.907	~	~	~	~.504	~	~.898	~	~	~	~	~	~	~	~	~.092	.367	.112	.242

[ASKED IF Q15 = YES]

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

	AGE							RACE					ETHNICITY		HEALTH STATUS		GENDER				
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ IND/ PAC ALSK	AMER ILND NATV OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE		
Q24 YES	113 41%	2074 40%	5 19%~	7 21%~	13 30%~	30 59%*	38 55%*	16 47%~	77 41%	5 42%~	13 65%~	2 ~	4 67%~	5 29%~	33%~	10 32%~	96 43%	63 34%*	48 62%*	40 40%	69 43%
NO	160 59%	3119 60%	22 81%~	26 79%~	30 70%~	21 41%*	31 45%*	18 53%~	111 59%	7 58%~	7 35%~	1 ~	10 33%~	10 71%~	67%~	21 68%~	125 57%	120 66%*	29 38%*	59 60%	92 57%
NOT ANSWERED	16	260	1	1						1		1		1		2			1	1	
VALID CASES	273	5193	27	33	43	51	69	34	188	12	20	3	14	15	31	221	183	77	99	161	
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%	3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%	



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER			
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q25 NEVER	9 8%	135 7%	1 ~	2 14%	2 17%	2 7%	2 5%	5 7%	2 40%	~	~	~	~	7 7%	6 10%	2 4%	2 5%	5 8%		
SOMETIMES	15 14%	292 15%	1 20%	1 14%	2 17%	2 7%	6 16%	3 19%	7 9%	1 20%	4 33%	1 50%	1 25%	1 11%	13 14%	8 13%	7 15%	4 10%	11 17%	
USUALLY	39 36%	614 31%	1 20%	4 57%	4 33%	13 46%	13 35%	4 25%	30 40%	5 42%	~	1 25%	2 50%	2 50%	1 11%	38 40%	24 39%	15 33%	21 54%	18 27%
ALWAYS	46 42%	926 47%	3 60%	1 14%	4 33%	11 39%	16 43%	9 56%	33 44%	2 40%	3 25%	1 50%	2 50%	2 50%	7 78%	36 38%	23 38%	22 48%	12 31%	32 48%
#ALWAYS + USUALLY (NET)	85 78%	1540 78%	4 80%	5 71%	8 67%	24 86%	29 78%	13 81%	63 84%	2 40%	8 67%	1 50%	3 75%	4 100%	8 89%	74 79%	47 77%	37 80%	33 85%	50 76%
TOP BOX SCORE	46 42%	926 47%	3 60%	1 14%	4 33%	11 39%	16 43%	9 56%	33 44%	2 40%	3 25%	1 50%	2 50%	2 50%	7 78%	36 38%	23 38%	22 48%	12 31%	32 48%
NOT ANSWERED	4	78			1	2	1		2	1				1	2	2	2	1	3	
VALID CASES	109	1967	5	7	12	28	37	16	75	5	12	2	4	4	9	94	61	46	39	66
NUMBER OF RESPONDENTS	113	2045	5	7	13	30	38	16	77	5	13	2	4	5	10	96	63	48	40	69
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q26 NONE	6 5%	93 5%	~	14%~	2 15%~	1 3%~	2 5%~	~	4 5%~	2 40%~	~	~	~	~	~	1 11%~	5 5%~	3 5%~	2 4%~	2 5%~	4 6%~	
1 SPECIALIST	64 58%	1033 52%	3 60%~	4 57%~	7 54%~	21 72%~	16 43%~	10 63%~	45 60%~	8 ~	1 ~	3 75%~	3 60%~	4 44%~	57 60%~	39 63%~	24 51%~	18 46%~	43 63%~			
2	25 23%	522 26%	2 40%~	1 14%~	4 31%~	3 10%~	10 27%~	5 31%~	16 21%~	2 40%~	4 31%~	~	~	1 20%~	3 33%~	22 23%~	11 18%~	14 30%~	10 26%~	15 22%~		
3	10 9%	217 11%	~	14%~	~	3 10%~	6 16%~	~	5 7%~	1 20%~	1 8%~	~	1 ~	1 50%~	1 25%~	1 20%~	1 11%~	7 7%~	5 8%~	5 11%~	6 15%~	4 6%~
4	5 5%	74 4%	~	~	~	3%~	2 5%~	1 6%~	4 5%~	~	~	~	~	~	~	3 ~	3 5%~	2 4%~	2 5%~	2 3%~		
5 OR MORE SPECIALISTS	1 0.9%	41 2%	~	~	~	~	3%~	~	1 1%~	~	~	~	~	~	~	1 1%~	1 2%~	~	1 3%~	~		
NOT ANSWERED	2	66				1	1		2					1	1	1	1	1	1	1		
VALID CASES	111	1979	5	7	13	29	37	16	75	5	13	2	4	5	9	95	62	47	39	68		
NUMBER OF RESPONDENTS	113	2045	5	7	13	30	38	16	77	5	13	2	4	5	10	96	63	48	40	69		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		

[ASKED IF Q24 = YES]

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER					
	HTS TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE				
Q27 WORST SPECIALIST POSSIBLE	1 1%	21 1%	~	~	~	4%	~	~	~	~	~	~	~	1 1%	~	1 2%	~	1 3%			
01		7 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~			
02	2 2%	19 1%	~	~	~	4%	~	~	1 33%	~	~	~	~	1 13%	~	2 4%	~	1 2%			
03	2 2%	28 2%	1 20%	1 17%	~	~	~	~	2 3%	~	~	~	~	2 2%	2 4%	~	1 3%	1 2%			
04	1 1%	18 1%	~	~	~	~	3%	~	1 1%	~	~	~	~	1 1%	1 2%	~	~	1 2%			
05	5 5%	88 5%	1 20%	~	~	~	3 9%	1 7%	2 3%	1 33%	1 8%	~	~	1 13%	3 3%	2 4%	3 7%	2 5%	3 5%		
06	5 5%	76 4%	~	~	~	2 7%	2 6%	1 7%	3 4%	~	1 8%	~	1 25%	~	5 6%	1 2%	4 9%	1 3%	4 7%		
07	8 8%	154 8%	~	1 17%	1 9%	2 7%	3 9%	1 7%	6 9%	~	2 15%	~	~	~	8 9%	6 11%	2 5%	4 11%	4 7%		
08	14 14%	272 15%	~	1 17%	1 9%	3 11%	7 21%	1 7%	9 13%	~	3 23%	1 50%	~	~	12 14%	4 7%	10 23%	6 16%	7 11%		
09	19 19%	345 19%	1 20%	2 33%	2 18%	7 26%	5 15%	2 13%	15 22%	1 8%	~	1 50%	1 25%	2 25%	17 19%	11 20%	8 18%	8 22%	11 18%		
BEST SPECIALIST POSSIBLE	44 44%	812 44%	2 40%	1 17%	7 64%	11 41%	13 38%	9 60%	31 45%	1 33%	5 38%	~	3 75%	3 75%	4 50%	39 44%	27 48%	16 36%	14 38%	29 48%	
#8-10 (NET)	77 76%	1429 78%	3 60%	4 67%	10 91%	21 78%	25 74%	12 80%	55 80%	1 33%	9 69%	~	2 100%	3 75%	4 100%	6 75%	68 77%	42 75%	34 77%	28 76%	47 77%

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	HTS TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ IND/ PAC ALSK	AMER ILND NATV OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
9-10 (NET)	63 62%	1157 63%	3 60%~	3 50%~	9 82%~	18 67%~	18 53%~	11 73%~	46 67%~	1 33%~	6 46%~	1 ~	3 50%~	4 75%~	4 100%~	6 75%~	56 64%~	38 68%~	24 55%~	22 59%~	40 66%~
NOT ANSWERED	4	34				1	1	1	2				1		2	3	1			3	
VALID CASES	101	1838	5	6	11	27	34	15	69	3	13		2	4	4	8	88	56	44	37	61
NUMBER OF RESPONDENTS	105 100%	1872 100%	5 100%	6 100%	11 100%	28 100%	35 100%	16 100%	71 100%	3 100%	13 100%		2 100%	4 100%	5 100%	8 100%	90 100%	59 100%	45 100%	37 100%	64 100%
MEAN	8.40	8.47	7.40	7.67	9.36	8.33	8.32	8.93	8.65	5.67	8.31		8.50	9.00	9.75	8.12	8.52	8.45	8.30	8.30	8.54
p stat_(*=Sig @ p<=.05)		.645	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

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

			AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
	HTS 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	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q28 YES	71 26%	1182 23%	4 15%~	13 41%~	9 21%~	14 27%	19 28%	7 21%~	49 26%	2 17%~	~	2 ~	5 36%~	6 40%~	8 26%~	58 26%	50 28%	19 25%	22 22%	45 28%	
NO	200 74%	3968 77%	23 85%~	19 59%~	33 79%~	37 73%	50 72%	27 79%~	137 74%	10 83%~	20 100%~	~	1 33%~	9 64%~	9 60%~	23 74%~	162 74%	131 72%	58 75%	76 78%	115 72%
NOT ANSWERED	18	303	1	2	1				2	1			1		1	1	4		2	2	
VALID CASES	271	5150	27	32	42	51	69	34	186	12	20		3	14	15	31	220	181	77	98	160
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%		3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%

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

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS		GENDER				
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE	
Q29 NEVER	9 13%	119 12%	2 ~ 15%	1 ~ 11%	1 ~ 7%	4 ~ 22%	3 ~ 6%	~	~	~	1 ~ 50%	3 ~ 60%	2 ~ 40%	~	9 ~ 16%	7 ~ 14%	2 ~ 11%	~	9 ~ 20%	
SOMETIMES	19 27%	339 34%	3 75%	3 23%	3 33%	4 29%	4 22%	1 14%	16 33%	~	~	1 ~ 50%	~	1 ~ 13%	17 30%	13 26%	5 28%	7 32%	11 25%	
USUALLY	24 34%	332 33%	6 ~ 46%	1 ~ 11%	7 50%	6 33%	4 57%	20 41%	1 50%	~	~	1 ~ 20%	3 ~ 60%	3 ~ 38%	21 37%	18 36%	6 33%	10 45%	14 32%	
ALWAYS	18 26%	213 21%	1 25%	2 15%	4 44%	2 14%	4 22%	2 29%	10 20%	1 50%	~	~	1 ~ 20%	3 60%	4 50%	10 18%	12 24%	5 28%	5 23%	10 23%
#ALWAYS + USUALLY (NET)	42 60%	545 54%	1 25%	8 62%	5 56%	9 64%	10 56%	6 86%	30 61%	2 100%	~	~	2 ~ 40%	3 60%	7 88%	31 54%	30 60%	11 61%	15 68%	24 55%
TOP BOX SCORE	18 26%	213 21%	1 25%	2 15%	4 44%	2 14%	4 22%	2 29%	10 20%	1 50%	~	~	1 ~ 20%	3 60%	4 50%	10 18%	12 24%	5 28%	5 23%	10 23%
NOT ANSWERED	1	19				1							1		1		1		1	
VALID CASES	70	1003	4	13	9	14	18	7	49	2		2	5	5	8	57	50	18	22	44
NUMBER OF RESPONDENTS	71	1022	4	13	9	14	19	7	49	2		2	5	6	8	58	50	19	22	45
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q30	HTS TOT ADLT																				
YES	80 30%	1525 30%	6 22%	8 25%	15 36%	19 39%	21 31%	8 24%	57 31%	4 36%	1 5%	1 33%	7 50%	4 27%	11 35%	63 29%	55 31%	23 30%	24 25%	53 34%	
NO	186 70%	3584 70%	21 78%	24 75%	27 64%	30 61%	46 69%	26 76%	127 69%	7 64%	18 95%	2 67%	7 50%	11 73%	20 65%	153 71%	123 69%	53 70%	73 75%	104 66%	
NOT ANSWERED	23	344	1	2	1	2	2	4	1	2			1			1	5	7	1	3	5
VALID CASES	266	5109	27	32	42	49	67	34	184	11	19		3	14	15	31	216	178	76	97	157
NUMBER OF RESPONDENTS	289	5453	28	34	43	51	69	34	188	12	21		3	15	15	32	221	185	77	100	162
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	HTS TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q31 NEVER		51 4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	10 13%	295 21%*	2 33%~	1 13%~	3 20%~	3 16%~	1 ~ 13%~	8 14%~	~	~	1 ~100%~	~	1 ~	9 ~	1 9%~	9 14%~	7 13%~	3 13%~	3 12%~	7 13%~	
USUALLY	28 35%	400 28%	2 33%~	4 50%~	2 13%~	7 37%~	10 48%~	2 25%~	18 32%~	2 50%~	1 ~100%~	~	2 ~ 29%~	2 50%~	3 27%~	23 37%~	19 35%~	7 30%~	4 17%~	23 43%~	
ALWAYS	42 52%	670 47%	2 33%~	3 38%~	10 67%~	9 47%~	11 52%~	5 63%~	31 54%~	2 50%~	~	~	5 ~ 71%~	2 50%~	7 64%~	31 49%~	29 53%~	13 57%~	17 71%~	23 43%~	
#ALWAYS + USUALLY (NET)	70 88%	1070 76%*	4 67%~	7 88%~	12 80%~	16 84%~	21 100%~	7 88%~	49 86%~	4 100%~	1 ~100%~	~	7 ~100%~	4 100%~	10 91%~	54 86%~	48 87%~	20 87%~	21 87%~	46 87%~	
TOP BOX SCORE	42 52%	670 47%	2 33%~	3 38%~	10 67%~	9 47%~	11 52%~	5 63%~	31 54%~	2 50%~	~	~	5 ~ 71%~	2 50%~	7 64%~	31 49%~	29 53%~	13 57%~	17 71%~	23 43%~	
NOT ANSWERED		26																			
VALID CASES	80	1415	6	8	15	19	21	8	57	4	1		1	7	4	11	63	55	23	24	53
NUMBER OF RESPONDENTS	80	1441	6	8	15	19	21	8	57	4	1		1	7	4	11	63	55	23	24	53
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]



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

	HTS TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q32 NEVER		24 2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	5 6%	83 6%	3 50%~	1 ~	1 7%~	1 5%~	~	3 5%~	~	~	~	~	~	1 25%~	2 18%~	3 5%~	5 9%~	~	1 4%~	4 8%~	~	~
USUALLY	18 23%	312 22%	1 17%~	3 38%~	1 7%~	8 42%~	4 19%~	1 12%~	9 16%~	3 75%~	1 100%~	~	1 ~	3 43%~	~	3 27%~	14 22%~	12 22%~	5 22%~	5 21%~	13 25%~	~
ALWAYS	57 71%	995 70%	2 33%~	5 63%~	13 87%~	10 53%~	17 81%~	7 88%~	45 79%~	1 25%~	~	~	~	4 57%~	3 75%~	6 55%~	46 73%~	38 69%~	18 78%~	18 75%~	36 68%~	~
#ALWAYS + USUALLY (NET)	75 94%	1307 92%	3 50%~	8 100%~	14 93%~	18 95%~	21 100%~	8 100%~	54 95%~	4 100%~	1 100%~	~	~	1 ~	7 75%~	3 82%~	9 95%~	60 91%~	23 100%~	23 96%~	49 92%~	~
TOP BOX SCORE	57 71%	995 70%	2 33%~	5 63%~	13 87%~	10 53%~	17 81%~	7 88%~	45 79%~	1 25%~	~	~	~	4 57%~	3 75%~	6 55%~	46 73%~	38 69%~	18 78%~	18 75%~	36 68%~	~
NOT ANSWERED		27																				
VALID CASES	80	1414	6	8	15	19	21	8	57	4	1		1	7	4	11	63	55	23	24	53	
NUMBER OF RESPONDENTS	80	1441	6	8	15	19	21	8	57	4	1		1	7	4	11	63	55	23	24	53	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q30 = YES]

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q33																					
YES	HTS TOT ADLT	1804	9	13	9	18	26	10	62	3	6		2	6	6	9	75	59	25	34	52
		34%	35%~	39%~	23%~	36%	39%	30%~	34%	25%~	35%~		~ 67%~	43%~	43%~	30%~	35%	34%	33%	35%	34%
NO	HTS TOT ADLT	3261	17	20	31	32	40	23	121	9	11		1	8	8	21	139	117	50	62	103
		66%	65%~	61%~	77%~	64%	61%	70%~	66%	75%~	65%~		~ 33%~	57%~	57%~	70%~	65%	66%	67%	65%	66%
NOT ANSWERED	HTS TOT ADLT	388	2	1	3	1	3	1	5		4			1	1	2	7	9	2	4	7
VALID CASES	HTS TOT ADLT	5065	26	33	40	50	66	33	183	12	17		3	14	14	30	214	176	75	96	155
NUMBER OF RESPONDENTS	HTS TOT ADLT	5453	28	34	43	51	69	34	188	12	21		3	15	15	32	221	185	77	100	162
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV ILND	AMER PAC ALSK	OTH	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
PQ34 NEVER	5 2%	97 2%	~	~	2%~	2%~	1%~	~	2%	~	~	~	33%~	8%~	~	~	2%~	3%~	1%	3%	
SOMETIMES	14 5%	322 6%	12%~	3%~	5%~	6%~	5%~	3%~	4%	8%~	12%~	~	~	8%~	8%~	4%~	6%~	6%	3%	6%	5%
USUALLY	38 15%	697 14%	20%~	24%~	3%~	15%~	18%~	15%~	15%	17%~	24%~	~	33%~	15%~	8%~	14%~	16%~	15%	17%	14%	17%
ALWAYS	200 78%	3891 78%	68%~	73%~	88%~	75%~	76%~	82%~	79%	75%~	65%~	~	33%~	69%~	83%~	82%~	76%~	77%	77%	79%	76%
#ALWAYS + USUALLY (NET)	238 93%	4589 92%	88%~	97%~	90%~	90%~	94%~	97%~	94%	92%~	88%~	~	67%~	85%~	92%~	96%~	92%~	92%	94%	93%	93%
TOP BOX SCORE	200 78%	3891 78%	68%~	73%~	88%~	75%~	76%~	82%~	79%	75%~	65%~	~	33%~	69%~	83%~	82%~	76%~	77%	77%	79%	76%
NOT ANSWERED	7	87	1			2	4		4					1	2	2	4	3	4	2	5
VALID CASES	257	5008	25	33	40	48	62	33	179	12	17		3	13	12	28	210	173	71	94	150
NUMBER OF RESPONDENTS	264 100%	5095 100%	26 100%	33 100%	40 100%	50 100%	66 100%	33 100%	183 100%	12 100%	17 100%		3 100%	14 100%	14 100%	30 100%	214 100%	176 100%	75 100%	96 100%	155 100%

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

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER					
	HTS TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE				
Q35 WORST HEALTH PLAN POSSIBLE	5 2%	59 1%	~	~	~	2%	3%	~	~	~	~	33%~	7%~	3%~	1%	3%	2%	3%			
01	2 0.8%	31 0.6%	~	~	2%~	~	2%	~	~	~	~	~	~	3%~	0.5%	0.6%	1%	1%			
02		40 0.8%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~			
03	1 0.4%	85 2%*	~	~	~	~	2%	~	~	~	~	~	7%~	~	0.5%	~	1%	~			
04	5 2%	121 2%	1 4%~	~	1 2%~	~	3 5%	~	2 1%	2 17%~	1 6%~	~	~	~	2%	4 3%*	5 3%*	1 1%	4 3%		
05	20 8%	451 9%	2 8%~	3 9%~	5 12%~	2 4%	6 10%	1 3%~	13 7%	2 17%~	~	1 33%~	1 7%~	3 20%~	2 6%~	18 9%	9 5%*	11 15%*	6 6%	14 9%	
06	13 5%	332 7%	1 4%~	4 12%~	2 5%~	2 4%	4 6%	~	12 7%*	1 8%~	~	~	~	~	~	12 6%	9 5%	3 4%	4 4%	9 6%	
07	32 13%	632 13%	4 17%~	4 12%~	3 7%~	7 14%	8 13%	4 14%~	26 15%	1 8%~	~	~	~	2 14%~	1 7%~	3 6%~	27 13%	22 13%	9 10%	20 13%	
08	53 21%	921 19%	7 29%~	7 21%~	11 26%~	11 22%	12 19%	3 10%~	34 20%	3 25%~	8 44%~	~	1 33%~	2 14%~	3 20%~	4 13%~	46 22%	36 21%	15 21%	22 23%	29 19%
09	40 16%	768 16%	3 12%~	4 12%~	4 10%~	10 20%	9 15%	7 24%~	28 16%	3 ~	3 17%~	~	~	1 7%~	3 20%~	7 23%~	30 15%	29 17%	10 14%	20 21%	17 11%*
BEST HEALTH PLAN POSSIBLE	84 33%	1430 29%	6 25%~	11 33%~	15 36%~	18 35%	16 26%	14 48%~	57 33%	3 25%~	6 33%~	~	~	8 57%~	3 20%~	14 45%~	63 31%	60 35%	20 28%	29 31%	51 34%
#8-10 (NET)	177 69%	3119 64%*	16 67%~	22 67%~	30 71%~	39 76%	37 60%	24 83%~	119 68%	6 50%~	17 94%~	~	1 33%~	11 79%~	9 60%~	25 81%~	139 68%	125 72%	45 63%	71 76%	97 65%

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	HTS TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
9-10 (NET)	124 49%	2198 45%	9 38%~	15 45%~	19 45%~	28 55%	25 40%	21 72%~	85 49%	3 25%~	9 50%~	~	~	9 64%~	6 40%~	21 68%~	93 45%*	89 51%	30 42%	49 52%	68 46%
NOT ANSWERED	34	583	4	1	1		7	5	14		3			1	1	16	12	5	6	13	
VALID CASES	255	4870	24	33	42	51	62	29	174	12	18		3	14	15	31	205	173	72	94	149
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%		3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%
MEAN	8.04	7.82	7.96	8.15	8.02	8.41	7.47	8.97	8.18	7.08	8.61		4.33	8.86	7.07	8.39	8.00	8.23	7.64	8.17	7.91
p stat_(*=Sig @ p<=.05)		.044*	~	~	~	.169	.015*	~	.198	~	~	~	~	~	~	~	.468	.048*	.058	.465	.241

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS 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	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	MALE		
Q35A YES	41 15%	736 14%	1 4%~	2 6%~	2 5%~	9 18%	18 27%*	9 26%~	32 17%	2 17%~	1 5%~	1 ~	3 33%~	1 21%~	1 7%~	2 6%~	37 17%*	16 9%*	24 32%*	15 16%	25 16%
NO	228 85%	4378 86%	26 96%~	31 94%~	41 95%~	42 82%	48 73%*	25 74%~	153 83%	10 83%~	19 95%~	2 ~	11 67%~	14 79%~	14 93%~	29 94%~	181 83%*	166 91%*	52 68%*	81 84%	136 84%
NOT ANSWERED	20	339	1	1			3		3	1			1		1	3	3	1	4	1	
VALID CASES	269	5114	27	33	43	51	66	34	185	12	20	3	14	15	31	218	182	76	96	161	
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%	3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%	

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35B NEVER	6 15%	123 19%	1 100%	1 50%	1 ~	3 13%	3 17%	5 16%	~	~	~	~	~	~	5 14%	3 21%	2 8%	2 15%	4 16%		
SOMETIMES	6 15%	72 11%	~	1 50%	1 50%	2 ~	2 11%	6 19%	~	~	~	~	~	~	6 17%	3 21%	3 12%	1 8%	5 20%		
USUALLY	12 31%	177 27%	~	~	4 50%	6 33%	2 25%	7 23%	1 50%	~	1 100%	2 67%	1 100%	1 50%	11 31%	3 21%	9 38%	3 23%	8 32%		
ALWAYS	15 38%	279 43%	~	~	1 50%	3 38%	7 39%	4 50%	13 42%	1 50%	~	~	1 33%	1 50%	14 39%	5 36%	10 42%	7 54%	8 32%		
#ALWAYS + USUALLY (NET)	27 69%	456 70%	~	~	1 50%	7 88%	13 72%	6 75%	20 65%	2 100%	~	1 100%	3 100%	1 100%	25 69%	8 57%	19 79%	10 77%	16 64%		
TOP BOX SCORE	15 38%	279 43%	~	~	1 50%	3 38%	7 39%	4 50%	13 42%	1 50%	~	~	1 33%	1 50%	14 39%	5 36%	10 42%	7 54%	8 32%		
NOT ANSWERED	2	24				1	1	1		1					1	2		2			
VALID CASES	39	651	1	2	2	8	18	8	31	2			1	3	1	2	36	14	24	13	25
NUMBER OF RESPONDENTS	41	675	1	2	2	9	18	9	32	2	1		1	3	1	2	37	16	24	15	25
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35A = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER			
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q35C YES	40 15%	760 15%	4 ~ 12%	6 ~ 15%	10 ~ 21%	17 ~ 25%*	2 6%	32 17%	1 9%	~	2 ~ 67%	2 15%	1 7%	1 3%	35 16%	22 12%	17 22%	11 11%	28 18%	
NO	226 85%	4319 85%	27 100%	29 88%	35 85%	38 79%	51 75%*	32 94%	154 83%	10 91%	19 100%	1 ~ 33%	11 85%	14 93%	28 97%	181 84%	157 88%	59 78%	86 89%	129 82%
NOT ANSWERED	23	373	1	1	2	3	1	2	1	2		2		3	5	6	1	3	5	
VALID CASES	266	5080	27	33	41	48	68	34	186	11	19	3	13	15	29	216	179	76	97	157
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%	3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q35D NEVER	9 23%	165 23%	1 ~ 25%	3 50%	1 10%	3 18%	5 ~ 16%	~	~	1 50%	1 ~ 100%	~	7 ~ 20%	7 ~ 20%	5 23%	3 18%	1 9%	7 25%	
SOMETIMES	9 23%	141 19%	3 ~ 75%	1 17%	4 40%	1 6%	7 ~ 22%	~	~	1 50%	1 50%	~	1 ~ 100%	7 20%	7 32%	2 12%	3 27%	6 21%	
USUALLY	7 18%	179 25%	~	1 17%	3 30%	3 18%	6 ~ 19%	~	~	~	1 50%	~	~	7 20%	3 14%	4 24%	2 18%	5 18%	
ALWAYS	15 38%	239 33%	~	1 17%	2 20%	10 59%	2 100%	14 44%	1 100%	~	~	~	~	14 40%	7 32%	8 47%	5 45%	10 36%	
#ALWAYS + USUALLY (NET)	22 55%	418 58%	~	2 33%	5 50%	13 76%	2 100%	20 63%	1 100%	~	~	1 50%	~	21 60%	10 45%	12 71%	7 64%	15 54%	
TOP BOX SCORE	15 38%	239 33%	~	1 17%	2 20%	10 59%	2 100%	14 44%	1 100%	~	~	~	~	14 40%	7 32%	8 47%	5 45%	10 36%	
NOT ANSWERED		20																	
VALID CASES	40	725	4	6	10	17	2	32	1		2	2	1	1	35	22	17	11	28
NUMBER OF RESPONDENTS	40	745	4	6	10	17	2	32	1		2	2	1	1	35	22	17	11	28
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35C = YES]

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE			
Q35E YES	149 56%	2872 56%	9 33%~	20 61%~	17 40%~	34 68%*	43 63%	18 53%~	107 57%	3 27%~	8 38%~	3 ~100%~	7 54%~	7 47%~	12 41%~	123 56%~	94 52%	46 61%	43 44%*	97 61%*	
NO	119 44%	2261 44%	18 67%~	13 39%~	26 60%~	16 32%*	25 37%	16 47%~	80 43%	8 73%~	13 62%~	6 ~	8 ~	46%~	53%~	17 59%~	96 44%~	87 48%	30 39%	54 56%*	63 39%*
NOT ANSWERED	21	320	1	1	1	1			1	1			2		3	2	4	1	3	2	
VALID CASES	268	5133	27	33	43	50	68	34	187	11	21	3	13	15	29	219	181	76	97	160	
NUMBER OF RESPONDENTS	289	5453	28	34	43	51	69	34	188	12	21	3	15	15	32	221	185	77	100	162	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q35F NO EFFORT AT ALL	4 3%	94 3%	~	~	~	3%	5%	6%	0.9%	67%	~	~	33%	~	~	3%	2%	4%	5%	2%	
A LITTLE EFFORT WAS MADE	8 6%	213 8%	~	5%	18%	~	2%	11%	3%	~	29%	~	~	14%	8%	4%	5%	4%	~	7%	
SOME EFFORT WAS MADE	35 24%	662 24%	40%	20%	12%	21%	30%	17%	22%	~	29%	~	57%	14%	50%	22%	22%	28%	30%	20%	
A LOT OF EFFORT WAS MADE	98 68%	1793 65%	40%	75%	12%	71%	25%	63%	80%	1%	3%	~	2%	3%	5%	5%	86%	65%	29%	67%	
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	133 92%	2455 89%	100%	95%	82%	97%	93%	83%	102%	1%	5%	~	2%	7%	6%	11%	113%	92%	91%	86%	
TOP BOX SCORE	98 68%	1793 65%	40%	75%	12%	71%	25%	63%	80%	1%	3%	~	2%	3%	5%	5%	86%	65%	29%	67%	
NOT ANSWERED	4	95	1			1			1	1					1	2				2	
VALID CASES	145	2763	8	20	17	33	43	18	106	3	7		3	7	7	12	122	92	46	43	95
NUMBER OF RESPONDENTS	149 100%	2858 100%	9 100%	20 100%	17 100%	34 100%	43 100%	18 100%	107 100%	3 100%	8 100%		3 100%	7 100%	7 100%	12 100%	123 100%	94 100%	46 100%	43 100%	97 100%

[ASKED IF Q35E = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q35G																					
NO EFFORT AT ALL	4 3%	135 5%	1 11%~	~	~	~	2 5%~	1 6%~	1 0.9%~	1 33%~	1 13%~	~	1 33%~	~	3 2%~	3 3%	1 2%~	1 2%~	3 3%~		
A LITTLE EFFORT WAS MADE	14 10%	226 8%	~	3 15%~	2 12%~	2 6%~	4 10%~	2 11%~	8 8%~	2 25%~	~	~	1 17%~	1 8%~	11 9%~	9 10%	3 7%~	4 9%~	9 9%~		
SOME EFFORT WAS MADE	31 22%	652 24%	2 22%~	6 30%~	4 24%~	10 30%~	6 14%~	3 17%~	21 20%~	1 33%~	2 25%~	~	1 33%~	3 43%~	1 17%~	4 33%~	27 22%~	17 18%	13 30%~	10 23%~	20 21%~
A LOT OF EFFORT WAS MADE	95 66%	1759 63%	6 67%~	11 55%~	11 65%~	21 64%~	30 71%~	12 67%~	76 72%~	1 33%~	3 38%~	~	1 33%~	4 57%~	4 67%~	7 58%~	81 66%~	64 69%	27 61%~	28 65%~	63 66%~
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	126 87%	2411 87%	8 89%~	17 85%~	15 88%~	31 94%~	36 86%~	15 83%~	97 92%~	2 67%~	5 63%~	~	2 67%~	7 100%~	5 83%~	11 92%~	108 89%~	81 87%	40 91%~	38 88%~	83 87%~
TOP BOX SCORE	95 66%	1759 63%	6 67%~	11 55%~	11 65%~	21 64%~	30 71%~	12 67%~	76 72%~	1 33%~	3 38%~	~	1 33%~	4 57%~	4 67%~	7 58%~	81 66%~	64 69%	27 61%~	28 65%~	63 66%~
NOT ANSWERED	5	87				1	1		1					1		1	1	2		2	
VALID CASES	144	2771	9	20	17	33	42	18	106	3	8		3	7	6	12	122	93	44	43	95
NUMBER OF RESPONDENTS	149	2858	9	20	17	34	43	18	107	3	8		3	7	7	12	123	94	46	43	97
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35E = YES]

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

	HTS TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35H NO EFFORT AT ALL	9 6%	191 7%	1 ~	1 5%~	1 6%~	5 3%~	1 12%~	5 6%~	1 33%~	~	~	1 33%~	~	~	~	8 7%~	4 4%	4 9%	2 5%~	7 7%	
A LITTLE EFFORT WAS MADE	12 8%	242 9%	1 13%~	2 10%~	1 6%~	2 6%~	3 7%~	2 11%~	8 8%~	1 33%~	2 29%~	~	~	~	1 8%~	9 7%~	8 9%	3 7%~	5 12%~	6 6%	
SOME EFFORT WAS MADE	40 28%	781 28%	2 25%~	6 30%~	5 29%~	12 35%~	10 24%~	3 17%~	26 25%~	2 ~	2 29%~	1 ~	4 ~	3 43%~	5 42%~	33 27%~	23 25%	15 33%~	14 33%~	23 24%	
A LOT OF EFFORT WAS MADE	83 58%	1558 56%	5 63%~	11 55%~	10 59%~	19 56%~	23 56%~	12 67%~	66 63%~	1 33%~	3 43%~	~	1 33%~	3 43%~	4 57%~	6 50%~	71 59%~	57 62%	23 51%~	22 51%~	58 62%
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	123 85%	2339 84%	7 88%~	17 85%~	15 88%~	31 91%~	33 80%~	15 83%~	92 88%~	1 33%~	5 71%~	~	2 67%~	7 100%~	7 100%~	11 92%~	104 86%~	80 87%	38 84%~	36 84%~	81 86%
TOP BOX SCORE	83 58%	1558 56%	5 63%~	11 55%~	10 59%~	19 56%~	23 56%~	12 67%~	66 63%~	1 33%~	3 43%~	~	1 33%~	3 43%~	4 57%~	6 50%~	71 59%~	57 62%	23 51%~	22 51%~	58 62%
NOT ANSWERED	5	85	1				2		2		1					2	2	1		3	
VALID CASES	144	2773	8	20	17	34	41	18	105	3	7		3	7	7	12	121	92	45	43	94
NUMBER OF RESPONDENTS	149	2858	9	20	17	34	43	18	107	3	8		3	7	7	12	123	94	46	43	97
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35E = YES]

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE	
Q35I YES	105 40%	1866 37%	8 30%~	14 42%~	13 31%~	27 53%*	28 42%	11 32%~	79 43%	5 42%~	4 20%~	1 ~	5 33%~	5 36%~	5 33%~	11 35%~	89 41%~	70 39%	31 41%	35 36%	66 42%
NO	160 60%	3186 63%	19 70%~	19 58%~	29 69%~	24 47%*	38 58%	23 68%~	105 57%	7 58%~	16 80%~	2 ~	9 67%~	10 64%~	10 67%~	20 65%~	129 59%~	111 61%	44 59%	63 64%	92 58%
NOT ANSWERED	24	400	1	1	1		3		4		1		1		1	3	4	2	2	4	
VALID CASES	265	5053	27	33	42	51	66	34	184	12	20		3	14	15	31	218	181	75	98	158
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%		3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%

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

	HTS TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE		
Q35J #YES	87 83%	1483 85%	6 75%~	13 93%~	9 69%~	23 85%~	27 96%~	7 64%~	68 86%~	4 80%~	2 50%~	1 ~100%~	5 ~100%~	4 80%~	9 82%~	76 85%~	56 80%~	27 87%~	30 86%~	55 83%~
NO	18 17%	254 15%	2 25%~	1 7%~	4 31%~	4 15%~	1 4%~	4 36%~	11 14%~	1 20%~	2 50%~	~	~	1 ~20%~	2 18%~	13 15%~	14 20%~	4 13%~	5 14%~	11 17%~
NOT ANSWERED		58																		
VALID CASES	105	1737	8	14	13	27	28	11	79	5	4	1	5	5	11	89	70	31	35	66
NUMBER OF RESPONDENTS	105 100%	1795 100%	8 100%	14 100%	13 100%	27 100%	28 100%	11 100%	79 100%	5 100%	4 100%	1 100%	5 100%	5 100%	11 100%	89 100%	70 100%	31 100%	35 100%	66 100%

[ASKED IF Q35I = YES]

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	HTS TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE
Q35K #YES	85 83%	1402 81%	8 100%~	12 86%~	10 83%~	21 81%~	22 79%~	10 91%~	65 84%~	3 60%~	3 75%~	1 ~100%~	4 80%~	5 100%~	9 82%~	73 84%~	54 78%~	27 90%~	28 82%~	55 85%~
NO	18 17%	326 19%		2 ~ 14%~	2 17%~	5 19%~	6 21%~	1 9%~	12 16%~	2 40%~	1 25%~		1 ~ 20%~		2 ~ 18%~	14 16%~	15 22%~	3 10%~	6 18%~	10 15%~
NOT ANSWERED	2	67			1	1			2						2		1	1	1	1
VALID CASES	103	1728	8	14	12	26	28	11	77	5	4	1	5	5	11	87	69	30	34	65
NUMBER OF RESPONDENTS	105	1795	8	14	13	27	28	11	79	5	4	1	5	5	11	89	70	31	35	66
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35I = YES]



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

	HTS TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q35L NEVER	35 14%	654 13%	6 22%~	4 12%~	7 18%~	5 10%	8 12%	2 6%~	19 11%	7 ~ 33%~	1 ~ 33%~	1 7%~	4 27%~	5 17%~	26 12%~	23 13%	10 14%	12 13%	23 15%	
SOMETIMES	30 12%	567 11%	4 15%~	5 15%~	2 5%~	5 10%	7 11%	4 12%~	14 8%*	6 50%~	3 14%~	1 ~	2 ~	5 17%~	21 10%~	16 9%	13 18%	11 12%	15 10%	
USUALLY	59 23%	1126 23%	6 22%~	6 18%~	9 24%~	11 22%	16 24%	8 24%~	43 24%	2 17%~	5 24%~	1 ~ 33%~	4 27%~	1 7%~	51 24%~	41 23%	15 21%	23 24%	34 22%	
ALWAYS	134 52%	2613 53%	11 41%~	18 55%~	20 53%~	29 58%	35 53%	19 58%~	100 57%*	4 33%~	6 29%~	1 ~ 33%~	9 60%~	8 53%~	14 48%~	114 54%~	97 55%	35 48%	49 52%	83 54%
#ALWAYS + USUALLY (NET)	193 75%	3739 75%	17 63%~	24 73%~	29 76%~	40 80%	51 77%	27 82%~	143 81%*	6 50%~	11 52%~	2 ~ 67%~	13 87%~	9 60%~	19 66%~	165 78%~	138 78%	50 68%	72 76%	117 75%
TOP BOX SCORE	134 52%	2613 53%	11 41%~	18 55%~	20 53%~	29 58%	35 53%	19 58%~	100 57%*	4 33%~	6 29%~	1 ~ 33%~	9 60%~	8 53%~	14 48%~	114 54%~	97 55%	35 48%	49 52%	83 54%
NOT ANSWERED	31	493	1	1	5	1	3	1	12					3	9	8	4	5	7	
VALID CASES	258	4960	27	33	38	50	66	33	176	12	21	3	15	15	29	212	177	73	95	155
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%	3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV ILND	AMER PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q35M ALWAYS	24 9%	387 8%	1 4%	4 12%	3 8%	4 8%	9 14%	3 9%	20 11%	~	~	~	1 33%	1 7%	1 7%	2 6%	21 10%	15 8%	8 11%	5 5%	19 12%*
USUALLY	13 5%	258 5%	2 7%	~	3 8%	2 4%	1 2%*	5 15%	7 4%	1 9%	4 19%	~	~	1 7%	~	1 3%	12 6%	8 4%	5 7%	3 3%	9 6%
SOMETIMES	48 19%	881 18%	5 19%	11 33%	7 18%	5 10%*	12 18%	5 15%	32 18%	3 27%	4 19%	~	~	3 20%	3 21%	9 29%	34 16%	30 17%	15 21%	20 22%	26 16%
NEVER	173 67%	3452 69%	19 70%	18 55%	25 66%	40 78%*	43 66%	21 62%	120 67%	7 64%	13 62%	~	2 67%	10 67%	10 71%	19 61%	144 68%	125 70%	45 62%	65 70%	104 66%
#NEVER + SOMETIMES (NET)	221 86%	4333 87%	24 89%	29 88%	32 84%	45 88%	55 85%	26 76%	152 85%	10 91%	17 81%	~	2 67%	13 87%	13 93%	28 90%	178 84%	155 87%	60 82%	85 91%*	130 82%*
TOP BOX SCORE	173 67%	3452 69%	19 70%	18 55%	25 66%	40 78%*	43 66%	21 62%	120 67%	7 64%	13 62%	~	2 67%	10 67%	10 71%	19 61%	144 68%	125 70%	45 62%	65 70%	104 66%
NOT ANSWERED	31	476	1	1	5		4		9	1				1	1	10	7	4	7	4	
VALID CASES	258	4977	27	33	38	51	65	34	179	11	21		3	15	14	31	211	178	73	93	158
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%		3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%

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

			AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	HTS TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV ILND	AMER PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35N ALWAYS	8 3%	113 2%		4 ~ 13%~	3 8%~		1 ~ 1%		7 4%	1 8%~						1 3%~	7 3%~	8 4%~		3 3%	5 3%	
USUALLY	6 2%	124 2%	1 4%~	1 3%~			3 4%	1 3%~	3 2%	1 5%~		1 33%~	1 7%~				5 2%~	4 2%	2 3%	1 1%	4 3%	
SOMETIMES	43 16%	728 15%	3 11%~	9 29%~	4 10%~	11 22%	10 15%	3 9%~	29 16%	3 25%~	3 14%~	1 33%~		4 29%~		2 6%~	37 17%~	25 14%	16 22%	8 8%*	34 22%*	
NEVER	204 78%	4037 81%	23 85%~	17 55%~	33 82%~	40 78%	54 79%	30 88%~	142 78%	8 67%~	17 81%~	1 33%~	14 93%~	10 71%~	29 91%~	164 77%~	146 80%	55 75%	86 88%*	113 72%*		
#NEVER + SOMETIMES (NET)	247 95%	4765 95%	26 96%~	26 84%~	37 92%~	51 100%~	64 94%	33 97%~	171 94%	11 92%~	20 95%~	2 67%~	14 93%~	14 100%~	31 97%~	201 94%~	171 93%	71 97%	94 96%	147 94%		
TOP BOX SCORE	204 78%	4037 81%	23 85%~	17 55%~	33 82%~	40 78%	54 79%	30 88%~	142 78%	8 67%~	17 81%~	1 33%~	14 93%~	10 71%~	29 91%~	164 77%~	146 80%	55 75%	86 88%*	113 72%*		
NOT ANSWERED	28	451	1	3	3		1		7					1		8	2	4	2	6		
VALID CASES	261	5002	27	31	40	51	68	34	181	12	21	3	15	14	32	213	183	73	98	156		
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%	3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%		

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

			AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	HTS TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q350 ALWAYS	11 4%	98 2%*	2 ~	3 6%~	1 8%~	3 2%	2 5%	2 6%~	9 5%	1 9%~	~	1 ~	33%~	~	~	11 ~	8 4%	3 4%	3 3%	8 5%
USUALLY	5 2%	112 2%	1 4%~	1 ~	1 3%~	1 ~	1 2%	1 3%~	1 0.6%	1 9%~	~	2 ~	13%~	~	1 3%~	2 0.9%~	3 2%	2 3%	2 2%	1 0.6%
SOMETIMES	31 12%	493 10%	2 8%~	6 18%~	7 18%~	6 12%	8 12%	1 3%~	24 13%	1 9%~	2 10%~	~	~	2 ~	27 13%~	18 10%	9 13%	9 9%	22 14%	
NEVER	212 82%	4278 86%*	23 88%~	25 76%~	29 72%~	44 86%	54 82%	29 88%~	147 81%	8 73%~	18 90%~	2 ~	13 67%~	13 87%~	29 91%~	174 81%~	152 84%	58 81%	83 86%	124 80%
#NEVER + SOMETIMES (NET)	243 94%	4771 96%	25 96%~	31 94%~	36 90%~	50 98%*	62 94%	30 91%~	171 94%	9 82%~	20 100%~	2 ~	13 67%~	15 87%~	31 97%~	201 94%~	170 94%	67 93%	92 95%	146 94%
TOP BOX SCORE	212 82%	4278 86%*	23 88%~	25 76%~	29 72%~	44 86%	54 82%	29 88%~	147 81%	8 73%~	18 90%~	2 ~	13 67%~	13 87%~	29 91%~	174 81%~	152 84%	58 81%	83 86%	124 80%
NOT ANSWERED	30	472	2	1	3		3	1	7	1	1				7	4	5	3	7	
VALID CASES	259	4981	26	33	40	51	66	33	181	11	20	3	15	15	32	214	181	72	97	155
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%	3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%

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

	AGE								RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE	
Q35P																					
#YES DEFINITELY	174 66%	3312 67%	17 63%~	21 64%~	26 62%~	37 74%	45 67%	24 73%~	127 70%	6 50%~	16 76%~	2 ~	9 60%~	8 53%~	21 66%~	145 67%~	128 71%*	43 57%	69 70%	102 65%	
YES SOMEWHAT	68 26%	1213 25%	6 22%~	11 33%~	12 29%~	10 20%	17 25%	8 24%~	47 26%	3 25%~	5 24%~	~	4 ~	3 27%~	7 22%~	56 26%~	41 23%	26 35%	23 23%	42 27%	
NO	20 8%	418 8%	4 15%~	1 3%~	4 10%~	3 6%	5 7%	1 3%~	8 4%*	3 25%~	~	1 ~	2 33%~	4 13%~	4 13%~	14 7%~	12 7%	6 8%	6 6%	13 8%	
NOT ANSWERED	27	511	1	1	1	1	2	1	6						6	4	2	2	5		
VALID CASES	262	4942	27	33	42	50	67	33	182	12	21		3	15	15	32	215	181	75	98	157
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%		3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%

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

	HTS TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE			
Q35Q YES	131 50%	2643 53%	18 67%~	19 56%~	24 56%~	22 44%	28 43%	16 48%~	89 49%	5 42%~	11 55%~	1 ~	9 33%~	8 60%~	53%~	17 53%~	105 49%~	91 50%	35 47%	48 48%	80 51%
NO	130 50%	2382 47%	9 33%~	15 44%~	19 44%~	28 56%	37 57%	17 52%~	93 51%	7 58%~	9 45%~	2 ~	6 67%~	7 40%~	47%~	15 47%~	110 51%~	91 50%	39 53%	51 52%	76 49%
NOT ANSWERED	28	428	1			1	4	1	6		1					6	3	3	1	6	
VALID CASES	261	5025	27	34	43	50	65	33	182	12	20	3	15	15	32	215	182	74	99	156	
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%	3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%	

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

	HTS TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE MALE			
Q35R NEVER	34 30%	799 36%	3 18%~	3 23%~	6 30%~	6 35%~	12 41%~	3 27%~	28 38%~	1 14%~	2 22%~		1 ~100%~	1 13%~	1 10%~	5 23%~	28 33%~	22 27%~	12 38%~	16 39%~	18 26%~
SOMETIMES	28 25%	439 20%	9 53%~	5 38%~	6 30%~	2 12%~	3 10%~	2 18%~	11 15%~	3 43%~	3 33%~			4 ~	5 50%~	8 36%~	18 21%~	23 29%~	4 12%~	6 15%~	21 30%~
USUALLY	23 20%	421 19%	3 18%~	2 15%~	2 10%~	5 29%~	8 28%~	2 18%~	12 16%~	2 29%~	3 33%~			2 ~	3 25%~	5 30%~	16 23%~	19 19%~	8 18%~	13 25%~	10 32%~
ALWAYS	29 25%	564 25%	2 12%~	3 23%~	6 30%~	4 24%~	6 21%~	4 36%~	22 30%~	1 14%~	1 11%~			1 ~	1 13%~	4 10%~	22 18%~	21 26%~	8 25%~	6 15%~	20 29%~
#ALWAYS + USUALLY (NET)	52 46%	985 44%	5 29%~	5 38%~	8 40%~	9 53%~	14 48%~	6 55%~	34 47%~	3 43%~	4 44%~			3 ~	4 38%~	9 40%~	38 41%~	35 45%~	16 44%~	19 50%~	30 46%~
TOP BOX SCORE	29 25%	564 25%	2 12%~	3 23%~	6 30%~	4 24%~	6 21%~	4 36%~	22 30%~	1 14%~	1 11%~			1 ~	1 13%~	4 10%~	22 18%~	21 26%~	8 25%~	6 15%~	20 29%~
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	142	2730	11	20	22	33	34	20	104	5	12		2	7	5	10	127	98	41	54	86
NOT ANSWERED	33	500		1	1	1	6	3	11								10	7	4	5	7
VALID CASES	114	2223	17	13	20	17	29	11	73	7	9		1	8	10	22	84	80	32	41	69
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%		3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%

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

	AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE	
Q36																					
EXCELLENT	29 11%	477 9%	4 14%~	6 19%~	7 16%~	4 8%	5 8%	3 9%~	21 11%	3 25%~	2 10%~		1 7%~	2 14%~	4 12%~	24 11%~	29 16%~		15 15%	14 9%	
VERY GOOD	58 22%	1176 23%	7 25%~	12 38%~	12 28%~	11 22%	7 11%*	5 15%~	42 23%	7 ~ 33%~		1 ~ 33%~	3 20%~	2 14%~	5 16%~	49 23%~	58 31%~		24 ~ 24%	32 20%	
GOOD	98 37%	1761 35%	15 54%~	11 34%~	18 42%~	15 30%	25 38%	11 32%~	70 38%	4 33%~	7 33%~		1 ~ 33%~	5 33%~	5 36%~	14 44%~	79 37%~	98 53%*		31 ~ 31%	65 41%
FAIR	56 21%	1244 25%	1 4%~	2 6%~	4 9%~	11 22%	25 38%*	11 32%~	35 19%	4 33%~	5 24%~		6 ~ 40%~	4 29%~	8 25%~	44 20%~		56 ~ 73%*	22 22%	32 20%	
POOR	21 8%	405 8%	1 4%~	1 3%~	2 5%~	9 18%*	4 6%	4 12%~	16 9%	1 8%~			1 ~ 33%~	1 ~ 7%~	1 3%~	20 9%~		21 ~ 27%~	7 7%	14 9%	
#EXCELLENT + VERY GOOD + GOOD (NET)	185 71%	3415 67%	26 93%~	29 91%~	37 86%~	30 60%	37 56%*	19 56%~	133 72%	7 58%~	16 76%~		2 ~ 67%~	9 60%~	9 64%~	23 72%~	152 70%~	185 100%~		70 ~ 71%	111 71%
NOT ANSWERED	27	389		2		1	3		4					1		5			1	5	
VALID CASES	262	5064	28	32	43	50	66	34	184	12	21		3	15	14	32	216	185	77	99	157
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%		3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%



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

	HTS TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE	
Q37																					
EXCELLENT	44 17%	895 18%	5 18%~	11 34%~	11 26%~	6 12%	7 10%	4 12%~	31 17%	3 25%~	3 14%~		1 ~ 33%~	5 33%~	1 7%~	5 16%~	39 18%~	40 22%*	4 5%*	18 18%	25 16%
VERY GOOD	61 23%	1258 25%	11 39%~	6 19%~	10 23%~	10 20%	13 19%	8 24%~	48 26%		7 ~ 33%~			4 ~ 27%~	1 7%~	6 19%~	53 24%~	50 27%*	10 13%*	24 24%	37 23%
GOOD	78 30%	1533 30%	6 21%~	7 22%~	14 33%~	18 35%	22 32%	9 27%~	56 30%	3 25%~	5 24%~			3 ~ 20%~	7 50%~	11 35%~	65 30%~	54 30%	22 29%	25 25%	52 33%
FAIR	61 23%	1027 20%	5 18%~	6 19%~	6 14%~	9 18%	22 32%	11 33%~	40 22%	3 25%~	4 19%~		1 ~ 33%~	3 20%~	4 29%~	7 23%~	45 21%~	32 18%*	28 36%*	23 23%	36 23%
POOR	19 7%	363 7%	1 4%~	2 6%~	2 5%~	8 16%	5 7%	1 3%~	11 6%	3 25%~	2 10%~		1 ~ 33%~		1 ~ 7%~	2 6%~	17 8%~	6 3%*	13 17%*	10 10%	9 6%
#EXCELLENT + VERY GOOD + GOOD (NET)	183 70%	3685 73%	22 79%~	24 75%~	35 81%~	34 67%	42 61%	21 64%~	135 73%	6 50%~	15 71%~		1 ~ 33%~	12 80%~	9 64%~	22 71%~	157 72%~	144 79%*	36 47%*	67 67%	114 72%
NOT ANSWERED	26	378		2			1	2						1	1	2	3			3	
VALID CASES	263	5075	28	32	43	51	69	33	186	12	21		3	15	14	31	219	182	77	100	159
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%		3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%

Q38 HAVE YOU HAD EITHER A FLU SHOT OR FLU SPRAY IN THE NOSE SINCE JULY 1, 2014?

	AGE							RACE					ETHNICITY		HEALTH STATUS		GENDER				
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE			
Q38 #YES	131 51%	2160 44%*	10 38%~	17 50%~	10 24%~	28 57%~	38 57%~	25 76%~	94 52%	3 25%~	12 67%~	1 ~	8 33%~	5 33%~	15 47%~	108 51%~	82 47%*	45 61%*	47 49%	82 53%	
NO	125 49%	2803 56%*	16 62%~	17 50%~	31 76%~	21 43%~	29 43%~	8 24%~	87 48%	9 75%~	6 33%~	2 ~	7 47%~	10 67%~	17 53%~	105 49%~	94 53%*	29 39%*	49 51%	74 47%	
DON'T KNOW	7	112	1		2	1	1	1	5		2				6	5	2	3	4		
NOT ANSWERED	26	379	1			1	1		2		1				2	4	1	1	2		
VALID CASES	256	4963	26	34	41	49	67	33	181	12	18		3	15	15	32	213	176	74	96	156
NUMBER OF RESPONDENTS	289	5453	28	34	43	51	69	34	188	12	21		3	15	15	32	221	185	77	100	162
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q39 EVERY DAY	53 21%	1063 21%	2 7%	6 18%	8 19%	15 31%	17 25%	2 6%	43 23%*	1 8%	~	~	~	1 7%	2 13%	3 9%	44 21%	30 17%*	20 27%	19 19%	31 20%
SOME DAYS	21 8%	463 9%	2 7%	2 6%	5 12%	6 12%	5 7%	1 3%	13 7%	1 8%	2 10%	~	1 50%	2 14%	1 7%	3 9%	18 8%	14 8%	7 9%	11 11%	10 6%
NOT AT ALL	184 71%	3502 70%	23 85%	26 76%	29 69%	28 57%	45 67%	30 91%	127 69%	10 83%	18 90%	~	1 50%	11 79%	12 80%	26 81%	152 71%	134 75%*	47 64%	69 70%	115 74%
DON'T KNOW	4	42			1		1	1	2				1	1			4	3	1		3
NOT ANSWERED	27	383	1			2	1		3		1						3	4	2	1	3
VALID CASES	258	5028	27	34	42	49	67	33	183	12	20		2	14	15	32	214	178	74	99	156
NUMBER OF RESPONDENTS	289	5453	28	34	43	51	69	34	188	12	21		3	15	15	32	221	185	77	100	162
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	HTS TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q40 NEVER	15 21%	435 26%	1 25%	1 13%	2 15%	3 14%	5 24%	8 15%	1 50%	~	~	~	~	1 33%	10 16%	8 18%	5 19%	5 17%	7 17%	
SOMETIMES	13 18%	355 21%	1 25%	2 25%	2 15%	6 29%	1 5%	1 33%	9 16%	2 100%	~	~	1 33%	1 33%	2 33%	11 18%	12 27%	1 4%	6 21%	7 17%
USUALLY	15 21%	280 17%	~	3 38%	1 8%	5 24%	5 24%	1 33%	13 24%	1 50%	~	~	~	~	2 33%	13 21%	8 18%	6 23%	7 24%	8 20%
ALWAYS	30 41%	589 35%	2 50%	2 25%	8 62%	7 33%	10 48%	1 33%	25 45%	~	~	1 100%	2 67%	1 33%	2 33%	27 44%	16 36%	14 54%	11 38%	19 46%
#ALWAYS + USUALLY (NET)	45 62%	869 52%	2 50%	5 63%	9 69%	12 57%	15 71%	2 67%	38 69%	1 50%	~	1 100%	2 67%	1 33%	4 67%	40 66%	24 55%	20 77%	18 62%	27 66%
TOP BOX SCORE	30 41%	589 35%	2 50%	2 25%	8 62%	7 33%	10 48%	1 33%	25 45%	~	~	1 100%	2 67%	1 33%	2 33%	27 44%	16 36%	14 54%	11 38%	19 46%
NOT ANSWERED	1	31					1	1							1		1	1		
VALID CASES	73	1659	4	8	13	21	21	3	55	2	2	1	3	3	6	61	44	26	29	41
NUMBER OF RESPONDENTS	74	1690	4	8	13	21	22	3	56	2	2	1	3	3	6	62	44	27	30	41
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	HTS TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR	MALE	FE- MALE	
Q41 NEVER	19 27%	750 46%*	2 50%~	2 25%~	2 18%~	3 14%~	7 35%~	1 33%~	12 23%~	1 50%~	1 50%~	~	~	~	33%~	1 20%~	14 24%~	10 23%~	7 29%~	7 24%~	10 26%~
SOMETIMES	22 31%	380 23%	2 50%~	2 25%~	5 45%~	8 38%~	4 20%~	1 33%~	17 32%~	1 50%~	1 50%~	~	~	50%~	33%~	4 80%~	18 31%~	17 40%~	5 21%~	10 34%~	12 32%~
USUALLY	16 23%	243 15%*	~	25%~	3 27%~	7 33%~	4 20%~	~	13 25%~	~	~	~	100%~	~	33%~	~	16 27%~	8 19%~	7 29%~	6 21%~	10 26%~
ALWAYS	13 19%	267 16%	~	25%~	2 9%~	1 14%~	3 25%~	5 33%~	11 21%~	~	~	~	~	50%~	~	~	11 19%~	8 19%~	5 21%~	6 21%~	6 16%~
#ALWAYS + USUALLY (NET)	29 41%	510 31%*	~	50%~	4 36%~	4 48%~	10 45%~	9 33%~	24 45%~	~	~	~	100%~	50%~	33%~	~	27 46%~	16 37%~	12 50%~	12 41%~	16 42%~
TOP BOX SCORE	13 19%	267 16%	~	25%~	2 9%~	1 14%~	3 25%~	5 33%~	11 21%~	~	~	~	~	50%~	~	~	11 19%~	8 19%~	5 21%~	6 21%~	6 16%~
NOT ANSWERED	4	51			2		2		3							1	3	1	3	1	3
VALID CASES	70	1639	4	8	11	21	20	3	53	2	2		1	2	3	5	59	43	24	29	38
NUMBER OF RESPONDENTS	74	1690	4	8	13	21	22	3	56	2	2		1	3	3	6	62	44	27	30	41
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER					
	HTS TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE		
Q42 NEVER	27 39%	864 53%*	2 50%~	4 50%~	5 45%~	3 14%~	8 40%~	2 67%~	18 34%~	1 50%~	1 50%~	~	~	1 50%~	1 33%~	~	21 36%~	17 40%~	8 33%~	7 24%~	17 45%~
SOMETIMES	19 27%	340 21%	2 50%~	2 25%~	3 27%~	10 48%~	2 10%~	~	15 28%~	1 50%~	~	~	~	1 50%~	1 33%~	5 100%~	14 24%~	14 33%~	5 21%~	11 38%~	8 21%~
USUALLY	14 20%	207 13%	~	2 25%~	2 18%~	3 14%~	7 35%~	~	11 21%~	1 50%~	~	~	~	1 33%~	~	14 24%~	6 14%~	7 29%~	7 24%~	7 18%~	
ALWAYS	10 14%	215 13%	~	~	1 9%~	5 24%~	3 15%~	1 33%~	9 17%~	~	~	~	1 100%~	~	~	10 17%~	6 14%~	4 17%~	4 14%~	6 16%~	
#ALWAYS + USUALLY (NET)	24 34%	422 26%	~	2 25%~	3 27%~	8 38%~	10 50%~	1 33%~	20 38%~	1 50%~	~	~	1 100%~	~	1 33%~	24 41%~	12 28%~	11 46%~	11 38%~	13 34%~	
TOP BOX SCORE	10 14%	215 13%	~	~	1 9%~	5 24%~	3 15%~	1 33%~	9 17%~	~	~	~	1 100%~	~	~	10 17%~	6 14%~	4 17%~	4 14%~	6 16%~	
NOT ANSWERED	4	64	~	~	2	~	2	~	3	~	~	~	~	~	1	3	1	3	1	3	
VALID CASES	70	1626	4	8	11	21	20	3	53	2	2	~	1	2	3	5	59	43	24	29	38
NUMBER OF RESPONDENTS	74	1690	4	8	13	21	22	3	56	2	2	~	1	3	3	6	62	44	27	30	41
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

Q43 DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHER	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q43	HTS TOT ADLT																				
YES	65 25%	1180 23%	2 7%~	1 3%~	4 10%~	11 22%	31 46%*	14 44%~	49 26%	6 50%~	3 16%~		1 7%~	2 13%~	10 32%~	49 22%~	40 22%	25 33%	31 32%	33 21%*	
NO	195 75%	3848 77%	26 93%~	33 97%~	38 90%~	39 78%	54%* 56%~	18 74%	137 74%	6 50%~	16 84%~		3 100%~	14 93%~	13 87%~	21 68%~	169 78%~	139 78%	50 67%	66 68%	127 79%*
DON'T KNOW	4	55			1	1	1	1	2		2					1	3	2	2	3	1
NOT ANSWERED	25	370					1										4			1	
VALID CASES	260	5028	28	34	42	50	68	32	186	12	19		3	15	15	31	218	179	75	97	160
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%		3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLACK OR AFR-	ASIAN	NATV ILND	AMER PAC	IND/ ALSK	OTHER	MULTI	HIS-IC	NOT HIS-IC	EX & VERY GOOD &	FAIR & POOR	FE-MALE	MALE
Q44																					
YES	HTS TOT ADLT	209%	46010%	13%	613%	712%	519%	148%	18%	16%	13%	150%	18%	18%	14%	168%	85%*	1015%	33%*	1511%	
NO	HTS TOT ADLT	21391%	415490%	27100%	32100%	3797%	4187%	5088%	2281%	15392%	1192%	1794%	150%	1292%	1192%	2796%	17892%	15395%*	5685%	8797%*	12589%
DON'T KNOW	HTS TOT ADLT	30	459	1	2	5	312	6	20	3	1	2	3	4	26	19	11	9	21		
NOT ANSWERED	HTS TOT ADLT	26	380			1	1	1								1	5	1	1		
VALID CASES	HTS TOT ADLT	233	4614	27	32	38	47	57	27	167	12	18	2	13	12	28	194	161	66	90	140
NUMBER OF RESPONDENTS	HTS TOT ADLT	289	5453	28	34	43	51	69	34	188	12	21	3	15	15	32	221	185	77	100	162
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%



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

	HTS TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q45 YES	92 36%	1742 35%	6 22%~	7 21%~	5 12%~	13 26%	40 58%*	19 59%~	66 36%	5 42%~	5 25%~	1 ~	6 33%~	4 27%~	15 47%~	71 33%~	56 32%	35 46%*	35 36%	56 35%
NO	167 64%	3293 65%	21 78%~	26 79%~	37 88%~	37 74%	29 42%*	13 41%~	118 64%	7 58%~	15 75%~	2 ~	9 60%~	11 73%~	17 53%~	146 67%~	121 68%	41 54%*	63 64%	102 65%
NOT ANSWERED	30	417	1	1	1	1	2	4	4	1					4	8	1	2	4	
VALID CASES	259	5036	27	33	42	50	69	32	184	12	20	3	15	15	32	217	177	76	98	158
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%	3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q46.1																					
YES	HTS TOT ADLT	1316	2	2	7	20	27	12	50	3	6		1	4	4	7	59	39	29	29	41
	OHP TOT ADLT	24%	7%~	6%~	16%~	39%*	39%*	35%~	27%	25%~	29%~		~ 33%~	27%~	27%~	22%~	27%	21%	38%*	29%	25%
NO	HTS TOT ADLT	4137	26	32	36	31	42	22	138	9	15		2	11	11	25	162	146	48	71	121
	OHP TOT ADLT	76%	93%~	94%~	84%~	61%*	61%*	65%~	73%	75%~	71%~		~ 67%~	73%~	73%~	78%~	73%	79%	62%*	71%	75%
VALID CASES	HTS TOT ADLT	5453	28	34	43	51	69	34	188	12	21		3	15	15	32	221	185	77	100	162
NUMBER OF RESPONDENTS	OHP TOT ADLT	289	28	34	43	51	69	34	188	12	21		3	15	15	32	221	185	77	100	162
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV ILND	AMER PAC	IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q46.2	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV ILND	AMER PAC	IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
YES	82 28%	1635 30%	3 11%	3 9%	5 12%	20 39%	34 49%*	16 47%	54 29%	6 50%	11 52%		1 33%	3 20%	4 27%	9 28%	67 30%	46 25%	34 44%*	35 35%	47 29%	
NO	207 72%	3818 70%	25 89%	31 91%	38 88%	31 61%	35 51%*	18 53%	134 71%	6 50%	10 48%		2 67%	12 80%	11 73%	23 72%	154 70%	139 75%	43 56%*	65 65%	115 71%	
VALID CASES	289	5453	28	34	43	51	69	34	188	12	21		3	15	15	32	221	185	77	100	162	
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%		3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%	

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	HIS- IC	NOT VERY GOOD & FAIR & POOR	EX & FAIR & POOR	FE- MALE	MALE	
Q46.3 YES	37 13%	862 16%	4 14%~	2 ~	10 5%~	15 20%	5 22%*	5 15%~	32 17%*	1 ~	5 5%~	1 ~	1 33%~	1 7%~	1 7%~	3 9%~	32 14%	19 10%	16 21%*	14 14%	23 14%
Q46.3 NO	252 87%	4591 84%	24 86%~	34 100%~	41 95%~	41 80%	54 78%*	29 85%~	156 83%*	12 100%~	20 95%~	2 ~	14 67%~	14 93%~	14 93%~	29 91%~	189 86%	166 90%	61 79%*	86 86%	139 86%
VALID CASES	289	5453	28	34	43	51	69	34	188	12	21	3	15	15	32	221	185	77	100	162	
NUMBER OF RESPONDENTS	289	5453	28	34	43	51	69	34	188	12	21	3	15	15	32	221	185	77	100	162	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE			
Q47.1	HTS TOT ADLT																				
YES	15 5%	281 5%		2 5%		8 12%*	5 15%	10 5%	2 17%			1 33%~	1 7%~	1 7%~	2 6%~	13 6%	6 3%	8 10%	6 6%	9 6%	
NO	274 95%	5172 95%	28 100%~	34 100%~	41 95%~	51 100%~	61 88%*	29 85%~	178 95%	10 83%~	21 100%~		2 67%~	14 93%~	14 93%~	30 94%~	208 94%~	179 97%	69 90%	94 94%	153 94%
VALID CASES	289	5453	28	34	43	51	69	34	188	12	21		3	15	15	32	221	185	77	100	162
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%		3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLACK OR AFR-	ASIAN	NATV ILND	AMER PAC	IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q47.2	HTS TOT ADLT	18	25	35	45	55	65														
YES	OHP TOT ADLT	284																			
		5%																			
		~	~	2%~	4%	13%*	9%~	5%	25%~	~	~	33%~	~	7%~	6%~	5%	3%*	13%*	8%	4%	
NO	OHP TOT ADLT	5169																			
		95%																			
		100%~	100%~	98%~	96%	87%*	91%~	95%	75%~	100%~	~	67%~	100%~	93%~	94%~	95%	97%*	87%*	92%	96%	
VALID CASES	OHP TOT ADLT	5453																			
NUMBER OF RESPONDENTS		289																			
		100%																			
		100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER PAC	IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q47.3	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER PAC	IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE
YES	6 2%	221 4%*	~	~	2%~	3%~	1%~	3%~	5	~	~	~	~	~	7%~	1	2	4	2	4	3	3
NO	283 98%	5232 96%*	100%~	100%~	98%~	94%~	99%~	97%~	183	12	21	3	15	14	30	217	183	73	99%	95%	97%	98%
VALID CASES	289	5453	28	34	43	51	69	34	188	12	21	3	15	15	32	221	185	77	100%	100%	100%	100%
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%	3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100%	100%	100%	100%

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q47.4	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	AMER	IAN	ILND	NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE
YES	51 18%	1002 18%	2 7%	2 6%	4 9%	11 22%	20 29%*	10 29%	30 16%	2 17%	6 29%		2 ~ 67%	1 7%	5 33%	7 22%	41 19%	29 16%	20 26%*	23 23%	27 17%
NO	238 82%	4451 82%	26 93%	32 94%	39 91%	40 78%	49 71%*	24 71%	158 84%	10 83%	15 71%		1 ~ 33%	14 93%	10 67%	25 78%	180 81%	156 84%	57 74%*	77 77%	135 83%
VALID CASES	289	5453	28	34	43	51	69	34	188	12	21		3	15	15	32	221	185	77	100	162
NUMBER OF RESPONDENTS	289	5453	28	34	43	51	69	34	188	12	21		3	15	15	32	221	185	77	100	162
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%



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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q48																				
YES	HTS TOT ADLT	1692	3	9	13	26	23	13	63	4	6	3	5	4	9	78	47	38	29	57
		34%	11%~	26%~	30%~	53%~	35% 41%~	35%	33%~	30%~	~100%~	33%~	29%~	29%~	36%~	27%*	51%*	29%	37%	
NO	HTS TOT ADLT	3335	24	25	30	23	43	19	119	8	14	10	10	22	139	128	36	70	97	
		66%	89%~	74%~	70%~	47%~	65% 59%~	65%	67%~	70%~	~	~	67%~	71%~	71%~	64%~	73%*	49%*	71%	63%
NOT ANSWERED	HTS TOT ADLT	426	1		2	3	2	6		1			1	1	4	10	3	1	8	
VALID CASES	HTS TOT ADLT	5027	27	34	43	49	66	32	182	12	20	3	15	14	31	217	175	74	99	154
NUMBER OF RESPONDENTS	HTS TOT ADLT	5453	28	34	43	51	69	34	188	12	21	3	15	15	32	221	185	77	100	162
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE		
Q49	HTS TOT ADLT																				
YES	73 89%	1394 85%	2 67%	9 100%	10 77%	21 88%	19 95%	12 92%	51 88%	2 50%	6 100%	3 ~	5 ~	4 ~	8 100%	65 88%	37 82%	34 97%	22 81%	50 93%	
NO	9 11%	240 15%	1 33%	~	3 23%	3 13%	1 5%	1 8%	7 12%	2 50%	~	~	~	~	9 ~	8 18%	1 3%	5 19%	4 7%		
NOT ANSWERED	5	62				2	3	5							1	4	2	3	2	3	
VALID CASES	82	1633	3	9	13	24	20	13	58	4	6	3	5	4	8	74	45	35	27	54	
NUMBER OF RESPONDENTS	87	1695	3	9	13	26	23	13	63	4	6	3	5	4	9	78	47	38	29	57	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q48 = YES]

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q50	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	AMER	IAN	ILND	NATV	OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
YES	164 64%	3255 65%	4 15%~	18 53%~	22 51%~	40 78%*	51 80%*	27 79%~	123 66%	7 70%~	12 60%~		2 ~ 67%~	7 50%~	6 40%~	16 52%~	142 65%~	100 56%*	59 82%*	59 61%	104 65%
NO	93 36%	1781 35%	23 85%~	16 47%~	21 49%~	11 22%*	13 20%*	7 21%~	63 34%	3 30%~	8 40%~		1 ~ 33%~	7 50%~	9 60%~	15 48%~	77 35%~	79 44%*	13 18%*	38 39%	55 35%
NOT ANSWERED	32	417	1				5		2	2	1			1		1	2	6	5	3	3
VALID CASES	257	5036	27	34	43	51	64	34	186	10	20		3	14	15	31	219	179	72	97	159
NUMBER OF RESPONDENTS	289	5453	28	34	43	51	69	34	188	12	21		3	15	15	32	221	185	77	100	162
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
Q51 YES	147 94%	2975 94%	4 100%	16 94%	19 86%	39 100%	45 92%	24 92%	111 94%	5 71%	12 100%	2 ~	7 ~	6 ~	13 87%	130 94%	90 94%	53 93%	50 88%*	96 97%
NO	10 6%	176 6%	~	1 6%	3 14%	~	4 8%	2 8%	7 6%	2 29%	~	~	~	~	2 13%	8 6%	6 6%	4 7%	7 12%*	3 3%
NOT ANSWERED	7	127	1	1	1	2	1	5							1	4	4	2	2	5
VALID CASES	157	3151	4	17	22	39	49	26	118	7	12	2	7	6	15	138	96	57	57	99
NUMBER OF RESPONDENTS	164 100%	3278 100%	4 100%	18 100%	22 100%	40 100%	51 100%	27 100%	123 100%	7 100%	12 100%	2 100%	7 100%	6 100%	16 100%	142 100%	100 100%	59 100%	59 100%	104 100%

[ASKED IF Q50 = YES]

NQ52 WHAT IS YOUR AGE?

	AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
NQ52																				
18 TO 24	30 10%	547 10%	28 100%~	~	~	~	~	14 7%*	1 8%~	4 19%~	~	~	3 20%~	4 27%~	7 22%~	20 9%	26 14%*	2 3%*	11 11%	17 10%
25 TO 34	41 14%	870 16%	~100%~	34 ~	~	~	~	30 16%	1 8%~	~	~	~	1 7%~	3 20%~	2 6%~	32 14%	32 17%*	3 4%*	12 12%	23 14%
35 TO 44	46 16%	802 15%	~	43 ~100%~	~	~	~	34 18%	3 25%~	3 14%~	~	~	2 13%~	1 7%~	5 16%~	38 17%	37 20%*	6 8%*	15 15%	28 17%
45 TO 54	61 21%	1153 21%	~	~	51 ~100%~	~	~	36 19%	2 17%~	3 14%~	~	1 33%~	5 33%~	2 13%~	8 25%~	42 19%	31 17%*	21 27%	19 19%	32 20%
55 TO 64	74 26%	1412 26%	~	~	~	69 ~100%~	~	52 28%	5 42%~	2 10%~	~	2 67%~	3 20%~	4 27%~	6 19%~	60 27%	38 21%*	30 39%*	34 34%*	37 23%
65 TO 74	25 9%	405 7%	~	~	~	~	22 65%~	13 7%	~	6 29%~	~	~	1 7%~	1 7%~	4 12%~	18 8%	14 8%	10 13%	6 6%	16 10%
75 OR OLDER	12 4%	264 5%	~	~	~	~	12 35%~	9 5%	~	3 14%~	~	~	~	~	11 5%	7 4%	5 6%	3 3%	9 6%	
VALID CASES	289	5453	28	34	43	51	69	34	188	12	21	3	15	15	32	221	185	77	100	162
NUMBER OF RESPONDENTS	289	5453	28	34	43	51	69	34	188	12	21	3	15	15	32	221	185	77	100	162
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

NQ53 ARE YOU MALE OR FEMALE?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
NQ53	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
MALE	116 40%	2159 40%	11 39%	12 35%	15 35%	19 37%	33 48%	10 29%	73 39%	6 50%	10 48%			5 33%	3 20%	13 41%	83 38%	72 39%	30 39%	100	~
FEMALE	173 60%	3294 60%	17 61%	22 65%	28 65%	32 63%	36 52%	24 71%	115 61%	6 50%	11 52%		3 ~100%	10 67%	12 80%	19 59%	138 62%	113 61%	47 61%	162	~100%
VALID CASES	289	5453	28	34	43	51	69	34	188	12	21		3	15	15	32	221	185	77	100	162
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%		3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100	162

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER					
	HTS TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	HIS- NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE			
Q54																						
8TH GRADE OR LESS	14 5%	312 6%	~	2 6%	1 2%	3 6%	4 6%	4 12%	7 4%	2 10%	~	~	3 20%	2 13%	4 13%	9 4%	4 2%*	9 12%*	6 6%	8 5%		
SOME HIGH SCHOOL BUT DID NOT GRADUATE	40 15%	755 15%	29%	8 9%	3 12%	5 14%	7 17%	12 12%	4 12%*	22 25%	3 35%	7 ~	~	3 20%	2 13%	6 19%	29 13%	28 16%	11 15%	21 22%*	19 12%*	
HIGH SCHOOL GRADUATE OR GED	77 30%	1615 32%	36%	10 32%	11 32%	14 33%	13 26%	20 29%	9 27%	61 33%	3 25%	2 10%	~	5 33%	2 13%	13 42%	62 28%	57 32%	19 26%	27 28%	50 31%	
SOME COLLEGE OR 2-YEAR DEGREE	88 34%	1732 34%	36%	10 32%	11 32%	15 35%	17 34%	22 32%	11 33%	63 34%	5 42%	9 45%	~	3 100%	1 7%	6 40%	5 16%	82 37%	58 32%	27 36%	29 30%	59 36%
4-YEAR COLLEGE GRADUATE	27 10%	415 8%	~	6 18%	6 14%	7 14%	5 7%	3 9%	24 13%*	~	~	~	~	~	3 20%	2 6%	25 11%	22 12%	5 7%	11 11%	16 10%	
MORE THAN 4-YEAR COLLEGE DEGREE	14 5%	214 4%	~	1 3%	2 5%	3 6%	6 9%	2 6%	10 5%	1 8%	~	~	~	3 20%	~	1 3%	12 5%	11 6%	3 4%	3 3%	10 6%	
NOT ANSWERED	29	410				1	1	1	1	1					1	2	5	3	3			
VALID CASES	260	5043	28	34	43	50	69	33	187	12	20		3	15	15	31	219	180	74	97	162	
NUMBER OF RESPONDENTS	289	5453	28	34	43	51	69	34	188	12	21		3	15	15	32	221	185	77	100	162	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q55 ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE			
Q55																					
YES HISPANIC OR LATINO	32 13%	610 12%	7 26%~	2 6%~	5 12%~	8 16%	5 8%	4 13%~	11 6%*	1 9%~	2 11%~		10 ~	3 ~	32 100%~	23 ~	9 12%	13 14%	19 12%		
NO NOT HISPANIC OR LATINO	221 87%	4367 88%	20 74%~	31 94%~	38 88%~	42 84%	60 92%	28 88%~	174 94%*	10 91%~	17 89%~		3 ~100%~	5 33%~	11 79%~	221 ~100%~	152 87%	64 88%	82 86%	138 88%	
NOT ANSWERED	36	476	1	1		1	4	2	3	1	2			1		10	4	5	5		
VALID CASES	253	4977	27	33	43	50	65	32	185	11	19		3	15	14	32	221	175	73	95	157
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%		3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%



Q56.1 WHAT IS YOUR RACE? RESPONSE: WHITE

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q56.1	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE
YES	201 70%	4262 78%*	18 64%~	32 94%~	35 81%~	38 75%	54 78%	22 65%~	188 100%~	~	~	~	~	~	13 87%~	13 41%~	184 83%*	140 76%*	56 73%	76 76%	125 77%*
NO	88 30%	1191 22%*	10 36%~	2 6%~	8 19%~	13 25%	15 22%	12 35%~	12 ~100%~	21 100%~	~	3 ~100%~	15 100%~	2 13%~	19 59%~	37 17%*	45 24%*	21 27%	24 24%	37 23%*	
VALID CASES	289	5453	28	34	43	51	69	34	188	12	21	3	15	15	32	221	185	77	100	162	
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%	3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%	

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/ALSK	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE-MALE		
Q56.2																				
YES	HTS TOT ADLT 15 5%	OHP TOT ADLT 133 2%*	1 4%~	3 9%~	3 7%~	2 4%	5 7%	12 ~100%~	~	~	~	~	3 20%~	1 3%~	13 6%	8 4%	6 8%	6 6%	9 6%	
NO	274 95%	5320 98%*	27 96%~	31 91%~	40 93%~	49 96%	64 93%	34 100%~	188 100%~	21 ~100%~	3 ~100%~	15 100%~	12 80%~	31 97%~	208 94%	177 96%	71 92%	94 94%	153 94%	
VALID CASES	289	5453	28	34	43	51	69	34	188	12	21	3	15	15	32	221	185	77	100	162
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%	3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%

Q56.3 WHAT IS YOUR RACE? RESPONSE: ASIAN

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV ILND	AMER PAC	IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q56.3	HTS TOT ADLT																					
YES	24 8%	225 4%*	6 21%~	3 ~	3 7%~	3 6%	9 26%~	~	~	21 100%~	~	~	~	3 20%~	3 9%~	19 9%	19 10%	5 6%	10 10%	14 9%		
NO	265 92%	5228 96%*	22 79%~	34 100%~	40 93%~	48 94%	66 96%	25 74%~	188 100%	12 100%~	~	3 100%	15 100%	12 80%~	29 91%~	202 91%	166 90%	72 94%	90 90%	148 91%		
VALID CASES	289	5453	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%	3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%		
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%	3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%		

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q56.4	HTS TOT ADLT																			
YES	1 0.3%	41 0.7%	~	~	~	~	1% ~	~	~	~	~	~	7% ~	1 3% ~	1 ~	1 ~0.5% ~	1 ~	1 ~0.6% ~	1 ~	1 ~
NO	288 100%	5412 99%	28 100%	34 100%	43 100%	51 100%	68 99%	34 100%	188 100%	12 100%	21 100%	3 100%	15 100%	14 93% ~	31 97% ~	221 100% ~	184 99% ~	77 100% ~	100 100% ~	161 99% ~
VALID CASES	289	5453	28	34	43	51	69	34	188	12	21	3	15	15	32	221	185	77	100	162
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%	3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q56.5	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	AMER	IAN	ILND	NATV	OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE
YES	12 4%	314 6%	1 4%	2 6%	3 ~	5 6%	7%	~	~	~	~	~	3 ~100%	9 ~	60%	1 3%	10 5%	7 4%	5 6%	2 2%	10 6%*
NO	277 96%	5139 94%	27 96%	32 94%	43 ~100%	48 94%	64 93%	34 100%	188 100%	12 100%	21 100%	~	~	15 ~100%	6 40%	31 97%	211 95%	178 96%	72 94%	98 98%	152 94%*
VALID CASES	289	5453	28	34	43	51	69	34	188	12	21		3	15	15	32	221	185	77	100	162
NUMBER OF RESPONDENTS	289 100%	5453 100%	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%		3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%

Q56.6 WHAT IS YOUR RACE? RESPONSE: OTHER

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q56.6	HTS TOT ADLT																			
YES	19 7%	300 5%	4 14%~	1 3%~	3 7%~	5 10%	5 7%	1 3%~					15 100%~	4 27%~	13 41%~	6 3%*	12 6%	7 9%	5 5%	13 8%
NO	270 93%	5153 95%	24 86%~	33 97%~	40 93%~	46 90%	64 93%	33 97%~	188 100%~	12 100%~	21 100%~	3 ~	11 73%~	19 59%~	215 97%*	173 94%	70 91%	95 95%	149 92%	
VALID CASES	289	5453	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%	3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%
NUMBER OF RESPONDENTS	289	5453	28 100%	34 100%	43 100%	51 100%	69 100%	34 100%	188 100%	12 100%	21 100%	3 100%	15 100%	15 100%	32 100%	221 100%	185 100%	77 100%	100 100%	162 100%

Q57 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLACK OR AFR-	ASIAN	NATV PAC ILND	AMER IND/ ALSK	OTHER	MULTI	HIS-IC	NOT HIS-IC	EX & VERY GOOD	FAIR & POOR	MALE	FEMALE	
HTS TOT ADULT	OHP TOT ADULT																				
Q57 YES	45 21%	652 16%*	6 33%~	4 19%~	4 11%~	4 9%~	12 20%	15 47%~	24 16%*	2 22%~	13 68%~	~	~	3 25%~	1 17%~	6 25%~	36 20%~	25 17%	19 30%	22 26%	23 18%
NO	167 79%	3488 84%*	12 67%~	17 81%~	31 89%~	39 91%~	49 80%	17 53%~	130 84%*	7 78%~	6 32%~	~	3 ~100%~	9 75%~	5 83%~	18 75%~	146 80%~	118 83%	45 70%	63 74%	103 82%
NOT ANSWERED	4	78	1			1			1		1					1	3			1	1
VALID CASES	212	4141	18	21	35	43	61	32	154	9	19		3	12	6	24	182	143	64	85	126
NUMBER OF RESPONDENTS	216 100%	4219 100%	19 100%	21 100%	35 100%	44 100%	61 100%	32 100%	155 100%	9 100%	20 100%		3 100%	12 100%	6 100%	24 100%	183 100%	146 100%	64 100%	86 100%	127 100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

	HTS TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q58.1 YES	21 47%	253 47%	3 50%	2 ~	1 50%	9 25%	6 75%	40%	12 50%	2 100%	4 31%	~	~	1 33%	~	4 67%	15 42%	10 40%	11 58%	13 59%	8 35%
NO	24 53%	289 53%	3 50%	4 100%	2 50%	3 75%	3 25%	9 60%	12 50%	~	9 69%	~	~	2 67%	1 100%	2 33%	21 58%	15 60%	8 42%	9 41%	15 65%
VALID CASES	45	542	6	4	4	4	12	15	24	2	13			3	1	6	36	25	19	22	23
NUMBER OF RESPONDENTS	45 100%	542 100%	6 100%	4 100%	4 100%	4 100%	12 100%	15 100%	24 100%	2 100%	13 100%			3 100%	1 100%	6 100%	36 100%	25 100%	19 100%	22 100%	23 100%

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



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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q58.2	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	AMER	IAN	LLND	NATV	OTHR	TI	HIS- IC	HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
YES	11 24%	188 35%	1 17%	~	~	2 50%	4 33%	4 27%	6 25%	2 100%	1 8%	~	~	1 33%	~	1 17%	8 22%	4 16%	7 37%	4 18%	7 30%
NO	34 76%	354 65%	5 83%	4 100%	4 100%	2 50%	8 67%	11 73%	18 75%	12 ~	~	~	2 ~	1 67%	1 100%	5 83%	28 78%	21 84%	12 63%	18 82%	16 70%
VALID CASES	45	542	6	4	4	4	12	15	24	2	13			3	1	6	36	25	19	22	23
NUMBER OF RESPONDENTS	45	542	6	4	4	4	12	15	24	2	13			3	1	6	36	25	19	22	23
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

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

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

	HTS TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q58.3 YES	14 31%	197 36%	2 33%	4 100%	1 ~ 25%	2 17%	5 33%	9 38%	3 ~ 23%			2 ~ 67%		2 ~ 33%	12 33%	8 32%	6 32%	6 27%	8 35%	
NO	31 69%	345 64%	4 67%	4 ~ 100%	3 75%	10 83%	10 67%	15 63%	2 100%	10 77%		1 ~ 33%	1 100%	4 67%	24 67%	17 68%	13 68%	16 73%	15 65%	
VALID CASES	45	542	6	4	4	4	12	15	24	2	13		3	1	6	36	25	19	22	23
NUMBER OF RESPONDENTS	45 100%	542 100%	6 100%	4 100%	4 100%	4 100%	12 100%	15 100%	24 100%	2 100%	13 100%		3 100%	1 100%	6 100%	36 100%	25 100%	19 100%	22 100%	23 100%

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

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

	HTS TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q58.4 YES	11 24%	81 15%	~	~	2 50%	2 50%	2 17%	5 33%	3 13%	7 ~	~	~	1 33%	1 ~	9 25%	8 32%	3 16%	5 23%	6 26%		
NO	34 76%	461 85%	6 100%	4 100%	2 50%	2 50%	10 83%	10 67%	21 88%	2 100%	6 46%	~	~	2 67%	1 100%	5 83%	27 75%	17 68%	16 84%	17 77%	17 74%
VALID CASES	45	542	6	4	4	4	12	15	24	2	13			3	1	6	36	25	19	22	23
NUMBER OF RESPONDENTS	45 100%	542 100%	6 100%	4 100%	4 100%	4 100%	12 100%	15 100%	24 100%	2 100%	13 100%			3 100%	1 100%	6 100%	36 100%	25 100%	19 100%	22 100%	23 100%

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

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q58.5	HTS TOT ADLT																			
YES	3 7%	44 8%	2 33%	~	1 25%	~	~	1 4%	1 8%	~	~	1 100%	~	3 8%	2 8%	1 5%	~	3 13%		
NO	42 93%	498 92%	4 67%	4 100%	4 100%	3 75%	12 100%	15 100%	23 96%	2 92%	12 ~	3 100%	~	6 100%	33 92%	23 92%	18 95%	22 100%	20 87%	
VALID CASES	45	542	6	4	4	4	12	15	24	2	13	3	1	6	36	25	19	22	23	
NUMBER OF RESPONDENTS	45 100%	542 100%	6 100%	4 100%	4 100%	4 100%	12 100%	15 100%	24 100%	2 100%	13 100%	3 100%	1 100%	6 100%	36 100%	25 100%	19 100%	22 100%	23 100%	

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

NQ13 RATING OF ALL HEALTH CARE

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
NQ13 0-6	30 15%	759 20%*	4 27%~	4 14%~	1 4%~	5 11%~	12 23%	2 8%~	18 13%	2 29%~	2 13%~	1 ~ 33%~	1 8%~	2 22%~	2 10%~	24 14%~	12 9%*	15 25%*	9 13%	19 15%
7-8	75 36%	1267 34%	5 33%~	11 39%~	13 46%~	16 36%~	14 27%	8 31%~	50 36%	1 14%~	6 38%~	1 ~ 33%~	5 42%~	3 33%~	4 19%~	62 37%~	48 36%	20 33%	22 33%	44 35%
9-10	101 49%	1714 46%	6 40%~	13 46%~	14 50%~	23 52%~	26 50%	16 62%~	71 51%	4 57%~	8 50%~	1 ~ 33%~	6 50%~	4 44%~	15 71%~	82 49%~	72 55%*	26 43%	36 54%	62 50%
VALID CASES	206	3741	15	28	28	44	52	26	139	7	16	3	12	9	21	168	132	61	67	125
NUMBER OF RESPONDENTS	206 100%	3741 100%	15 100%	28 100%	28 100%	44 100%	52 100%	26 100%	139 100%	7 100%	16 100%	3 100%	12 100%	9 100%	21 100%	168 100%	132 100%	61 100%	67 100%	125 100%
MEAN	2.34	2.26	2.13	2.32	2.46	2.41	2.27	2.54	2.38	2.29	2.38	2.00	2.42	2.22	2.62	2.35	2.45	2.18	2.40	2.34
p stat_(*=Sig @ p<=.05)		.037*	~	~	~	~	.427	~	.304	~	~	~	~	~	~	~	.005*	.049*	.421	.987

[ASKED IF Q7 >= 1 TIME]

NQ23 RATING OF PERSONAL DOCTOR

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
NQ23 0-6	35 16%	617 16%	2 13%~	2 8%~	5 16%~	7 16%~	10 19%	5 17%~	24 17%	1 17%~	2 11%~	~	~	1 8%~	1 8%~	2 8%~	29 17%~	18 13%	13 21%	9 13%	24 19%
7-8	51 24%	999 25%	6 38%~	10 42%~	8 26%~	9 20%~	10 19%	5 17%~	34 24%	1 17%~	5 28%~	~	~	3 25%~	3 25%~	6 25%~	42 25%~	32 23%	17 27%	15 21%	33 26%
9-10	127 60%	2342 59%	8 50%~	12 50%~	18 58%~	28 64%~	33 62%	20 67%~	85 59%	4 67%~	11 61%~	~	2 100%~	8 67%~	8 67%~	16 67%~	97 58%~	88 64%	33 52%	48 67%	71 55%
VALID CASES	213	3959	16	24	31	44	53	30	143	6	18	~	2	12	12	24	168	138	63	72	128
NUMBER OF RESPONDENTS	213 100%	3959 100%	16 100%	24 100%	31 100%	44 100%	53 100%	30 100%	143 100%	6 100%	18 100%	~	2 100%	12 100%	12 100%	24 100%	168 100%	138 100%	63 100%	72 100%	128 100%
MEAN	2.43	2.44	2.38	2.42	2.42	2.48	2.43	2.50	2.43	2.50	2.50	~	3.00	2.58	2.58	2.58	2.40	2.51	2.32	2.54	2.37
p stat_(*=Sig @ p<=.05)		.924	~	~	~	~.982	~	.883	~	~	~	~	~	~	~	~	~.058	.169	.121	.127	

[ASKED IF Q15 = YES]

NQ27 RATING OF SPECIALIST SEEN MOST OFTEN

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER			
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
NQ27 0-6	16 16%	257 14%	2 40%	1 17%	4 ~ 15%	6 18%	2 13%	8 12%	2 67%	2 15%	1 ~ 25%	1 ~ 25%	2 14%	12 14%	8 14%	8 18%	5 14%	10 16%		
7-8	22 22%	429 23%	2 ~ 33%	2 18%	5 19%	10 29%	2 13%	15 22%	5 ~ 38%	1 ~ 50%	1 ~ 50%	1 ~ 50%	20 ~ 23%	10 18%	12 27%	10 27%	11 18%			
9-10	63 62%	1164 63%	3 60%	3 50%	9 82%	18 67%	11 53%	46 67%	1 33%	6 46%	1 ~ 50%	3 75%	4 100%	6 75%	56 64%	38 68%	24 55%	22 59%	40 66%	
VALID CASES	101	1850	5	6	11	27	34	15	69	3	13	2	4	4	8	88	56	44	37	61
NUMBER OF RESPONDENTS	101 100%	1850 100%	5 100%	6 100%	11 100%	27 100%	34 100%	15 100%	69 100%	3 100%	13 100%	2 100%	4 100%	4 100%	8 100%	88 100%	56 100%	44 100%	37 100%	61 100%
MEAN	2.47	2.49	2.20	2.33	2.82	2.52	2.35	2.60	2.55	1.67	2.31	2.50	2.50	3.00	2.50	2.50	2.54	2.36	2.46	2.49
p stat_(*=Sig @ p<=.05)		.661	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

NQ35 RATING OF HEALTH PLAN

	HTS TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
NQ35 0-6	46 18%	1116 23%*	4 17%~	7 21%~	9 21%~	5 10%*	17 27%*	1 3%~	29 17%	5 42%~	1 6%~	2 ~	1 67%~	5 7%~	33%~	4 13%~	39 19%	26 15%	18 25%	14 15%	32 21%
7-8	85 33%	1551 32%	11 46%~	11 33%~	14 33%~	18 35%	20 32%	7 24%~	60 34%	4 33%~	8 44%~	1 ~	4 33%~	4 29%~	4 27%~	6 19%~	73 36%	58 34%	24 33%	31 33%	49 33%
9-10	124 49%	2193 45%	9 38%~	15 45%~	19 45%~	28 55%	25 40%	21 72%~	85 49%	3 25%~	9 50%~	~	~	9 64%~	6 40%~	21 68%~	93 45%*	89 51%	30 42%	49 52%	68 46%
VALID CASES	255	4860	24	33	42	51	62	29	174	12	18	3	14	15	31	205	173	72	94	149	
NUMBER OF RESPONDENTS	255 100%	4860 100%	24 100%	33 100%	42 100%	51 100%	62 100%	29 100%	174 100%	12 100%	18 100%	3 100%	14 100%	15 100%	31 100%	205 100%	173 100%	72 100%	94 100%	149 100%	
MEAN	2.31	2.22	2.21	2.24	2.24	2.45	2.13	2.69	2.32	1.83	2.44	1.33	2.57	2.07	2.55	2.26	2.36	2.17	2.37	2.24	
p stat_(*=Sig @ p<=.05)		.034*	~	~	~	.126	.034*	~	.630	~	~	~	~	~	~	.066	.074	.066	.279	.103	



GETTING NEEDED CARE

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NPRBSEE4 NQ25	2.20	2.25	2.40	1.86	2.00	2.25	2.22	2.37	2.28	1.80	1.92	2.00	2.25	2.50	2.67	2.17	2.15	2.28	2.15	2.24	
p stat_(*=Sig @ p<=.05)		.380	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCARNES4 NQ14	2.36	2.30	2.53	2.14	2.32	2.39	2.34	2.46	2.41	2.11	2.06	2.00	2.30	2.22	2.63	2.34	2.37	2.28	2.39	2.33	
p stat_(*=Sig @ p<=.05)		.172	~	~	~	~.835	~	.178	~	~	~	~	~	~	~	~	.673	.335	.686	.559	
COMPOSITE	2.28	2.28	2.47	2.00	2.16	2.32	2.28	2.42	2.34	1.96	1.99	x	2.00	2.27	2.36	2.65	2.25	2.26	2.28	2.27	2.29
p stat_(*=Sig @ p<=.05)		.991	~	~	~	~1.00	~	.666	~	~	~	~	~	~	~	~	~.907	.992	.973	.963	

GETTING CARE QUICKLY

	AGE							RACE					ETHNICITY		HEALTH STATUS		GENDER				
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE		
NCARSN4 NQ4	2.33	2.38	2.40	2.00	2.25	2.41	2.32	2.36	2.38	2.00	2.50	1.50	2.50	1.80	2.10	2.33	2.40	2.30	2.48	2.22	
p stat_(*=Sig @ p<=.05)		.485	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NAPGET4 NQ6	2.47	2.32	2.08	2.36	2.59	2.54	2.47	2.57	2.55	1.89	2.42	2.50	2.29	2.62	2.33	2.51	2.49	2.48	2.48	2.46	
p stat_(*=Sig @ p<=.05)		.003*	~	~	~	~	~	~	.026*	~	~	~	~	~	~	~	.543	.875	.895	.916	
COMPOSITE	2.40	2.35	2.24	2.18	2.42	2.47	2.39	2.46	2.47	1.94	2.46	x	2.00	2.39	2.21	2.22	2.42	2.45	2.39	2.48	2.34
p stat_(*=Sig @ p<=.05)		.833	~	~	~	~	~	~	.683	~	~	~	~	~	~	~	.791	.983	.809	.757	

HOW WELL DOCTORS COMMUNICATE

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHER	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE
NDREXPL4 NQ17	2.66	2.62	2.36	2.73	2.69	2.63	2.76	2.67	2.68	2.67	2.47	2.50	2.80	2.90	2.75	2.65	2.69	2.60	2.73	2.64
p stat_(*=Sig @ p<=.05)		.310	~	~	~	~	~	~	.590	~	~	~	~	~	~	~	.423	.309	.276	.477
NDRLSTN4 NQ18	2.64	2.59	2.55	2.59	2.62	2.49	2.76	2.71	2.62	2.67	2.53	2.50	2.80	2.70	2.75	2.60	2.71	2.49	2.67	2.60
p stat_(*=Sig @ p<=.05)		.227	~	~	~	~	~	~	.619	~	~	~	~	~	~	~	.039*	.048*	.682	.300
NDRESPU4 NQ19	2.68	2.65	2.73	2.68	2.65	2.61	2.71	2.67	2.68	2.67	2.40	3.00	2.78	2.80	2.74	2.64	2.75	2.54	2.73	2.62
p stat_(*=Sig @ p<=.05)		.414	~	~	~	~	~	~	.886	~	~	~	~	~	~	~	.051	.062	.373	.153
NDRTMEN4 NQ20	2.49	2.49	2.18	2.55	2.42	2.49	2.57	2.63	2.53	2.33	2.33	3.00	2.50	2.40	2.60	2.48	2.62	2.26	2.55	2.48
p stat_(*=Sig @ p<=.05)		.966	~	~	~	~	~	~	.224	~	~	~	~	~	~	~	.002*	.009*	.374	.915
COMPOSITE	2.62	2.59	2.45	2.64	2.60	2.55	2.70	2.67	2.63	2.58	2.43	x 2.75	2.72	2.70	2.71	2.59	2.69	2.47	2.67	2.59
p stat_(*=Sig @ p<=.05)		.927	~	~	~	~	~	~	.955	~	~	~	~	~	~	~	.756	.758	.907	.909

CUSTOMER SERVICE

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NPBCLCS4 NQ31	2.40	2.23	2.00	2.25	2.47	2.32	2.52	2.50	2.40	2.50	2.00	1.00	2.71	2.50	2.55	2.35	2.40	2.43	2.58	2.30
p stat_(*=Sig @ p<=.05)		.021*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ32	2.65	2.63	1.83	2.62	2.80	2.47	2.81	2.87	2.74	2.25	2.00	2.00	2.57	2.50	2.36	2.68	2.60	2.78	2.71	2.60
p stat_(*=Sig @ p<=.05)		.693	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.53	2.43	1.92	2.44	2.63	2.39	2.67	2.69	2.57	2.38	2.00	x 1.50	2.64	2.50	2.45	2.52	2.50	2.61	2.65	2.45
p stat_(*=Sig @ p<=.05)		.835	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHER	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NNRXWHY NQ10	2.88	2.84	2.33	2.71	2.73	3.00	3.00	3.00	3.00	3.00	3.00	2.60	3.00	2.82	2.89	2.85	2.95	2.83	2.92		
p stat_(*=Sig @ p<=.05)		.275	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NNRXWYNT NQ11	2.47	2.45	2.00	2.43	2.87	2.46	2.35	2.47	2.45	3.00	2.14	2.33	2.20	2.50	2.27	2.48	2.32	2.66	2.59	2.39	
p stat_(*=Sig @ p<=.05)		.791	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NRXBST NQ12	2.42	2.50	2.00	2.29	2.33	2.69	2.35	2.33	2.29	3.00	2.75	2.33	2.60	2.50	3.00	2.33	2.42	2.35	2.54	2.35	
p stat_(*=Sig @ p<=.05)		.185	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
COMPOSITE	2.59	2.60	2.11	2.48	2.64	2.72	2.57	2.60	2.54	3.00	2.63	x	2.56	2.47	2.67	2.70	2.57	2.53	2.65	2.65	2.55
p stat_(*=Sig @ p<=.05)		.981	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL-	HIS-	NOT HIS-	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE	
PRBSEE4 Q25	78%	78%	80%	71%	67%	86%	78%	81%	84%	40%	67%	50%	75%	100%	89%	79%	77%	80%	85%	76%
CARNES4 Q14	86%	82%	100%	71%	86%	93%	83%	85%	89%	67%	69%	67%	90%	78%	89%	86%	84%	87%	87%	85%
AVERAGE	81.74	80.02	90.00	71.43	76.19	89.45	80.70	82.93	86.64	53.33	67.71	x 58.33	82.50	88.89	89.18	82.60	80.69	83.55	85.88	80.16

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE	
CARSN4 Q4	85%	83%	100%	69%	88%	86%	84%	82%	90%	60%	88%	50%	100%	60%	70%	88%	87%	88%	91%	81%	
APGET4 Q6	85%	80%	67%	79%	95%	86%	81%	91%	89%	56%	75%	100%	86%	88%	83%	87%	86%	84%	81%	86%	
AVERAGE	84.80	81.23	83.33	73.90	91.48	86.43	82.80	86.56	89.26	57.78	81.25	x	75.00	92.86	73.75	76.67	87.10	86.62	85.94	86.13	83.76

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE			
DREXPL4 Q17	95%	92%	82%	95%	100%	93%	96%	96%	94%	100%	87%	100%	100%	100%	100%	94%	93%	96%	97%	94%	
DRLSTN4 Q18	92%	90%	100%	91%	88%	85%	96%	92%	91%	100%	87%	100%	100%	90%	95%	90%	94%	88%	92%	91%	
DRESPU4 Q19	92%	91%	91%	95%	92%	93%	89%	92%	92%	83%	87%	100%	100%	100%	100%	90%	95%	88%	92%	92%	
DRTMEN4 Q20	88%	88%	73%	91%	85%	93%	89%	92%	90%	83%	87%	100%	100%	70%	95%	88%	94%	77%	92%	87%	
AVERAGE	91.7	90.4	86.4	93.2	91.3	90.9	92.3	92.7	91.8	91.7	86.7	x	100	100	90.0	97.5	90.5	93.9	87.2	92.9	90.9



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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- TI	OTH	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE	
PBCLCS4 Q31	88%	76%	67%	88%	80%	84%	100%	88%	86%	100%	100%	0%	100%	100%	91%	86%	87%	87%	87%	87%	
CSRESP Q32	94%	92%	50%	100%	93%	95%	100%	100%	95%	100%	100%	100%	100%	75%	82%	95%	91%	100%	96%	92%	
AVERAGE	90.63	84.03	58.33	93.75	86.67	89.47	100.0	93.75	90.35	100.0	100.0	x	50.00	100.0	87.50	86.36	90.48	89.09	93.48	91.67	89.62

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	HTS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
NRXWHY Q10	94%	92%	67%	86%	87%	100%	100%	100%	100%		100%	80%	100%	91%	95%	92%	98%	91%	96%	
NRXWYNT Q11	73%	73%	50%	71%	93%	73%	68%	73%	72%	100%	57%	67%	60%	75%	64%	74%	66%	83%	79%	69%
RXBST Q12	71%	75%	50%	64%	67%	85%	68%	67%	65%	100%	88%	67%	80%	75%	100%	67%	71%	67%	77%	68%
AVERAGE	79.4	79.8	55.6	73.8	82.2	85.9	78.5	80.0	76.9	100	81.5	x 77.8	73.3	83.3	84.8	78.5	76.6	82.7	82.7	77.6

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q1 YES	306	5304	2	52	75	93	84	147	11	16	2	2	24	26	142	136	250	29	239	67
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
NOT ANSWERED	2	59				1	1					1			2		2		2	
VALID CASES	306	5304	2	52	75	93	84	147	11	16	2	2	24	26	142	136	250	29	239	67
NUMBER OF RESPONDENTS	308	5363	2	52	75	94	85	147	11	16	2	2	25	26	144	136	252	29	241	67
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q3 YES	87 29%	1687 32%		14 ~ 28%	28 38%*	20 21%*	25 30%	45 31%	1 10%~	4 25%~	2 ~100%~	8 32%~	9 35%~	42 29%	41 30%	75 30%	8 28%~	66 28%	21 31%	
NO	215 71%	3541 68%	2 100%~	36 72%	45 62%*	74 79%*	58 70%	102 69%	9 90%~	12 75%~	2 ~100%~	17 ~ 68%~	17 65%~	101 71%	94 70%	175 70%	21 72%~	169 72%	46 69%	
NOT ANSWERED	6	135		2	2	2		1						1	1	2		6		
VALID CASES	302	5228	2	50	73	94	83	147	10	16	2	2	25	26	143	135	250	29	235	67
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q4 NEVER	1 1%	18 1%	~	~	~	~	4%~	~	~	~	~	13%~	~	2%~	~	1%~	~	2%~	~	
SOMETIMES	8 10%	148 9%	~	1 7%~	2 8%~	2 11%~	3 13%~	5 12%~	~	~	~	~	~	5 12%~	3 8%~	7 10%~	1 14%~	7 11%~	1 5%~	
USUALLY	19 23%	323 20%	~	1 7%~	5 19%~	7 37%~	6 26%~	6 14%~	~	3 7%~	~	~	3 38%~	2 22%~	11 27%~	7 18%~	16 22%~	2 29%~	15 24%~	4 21%~
ALWAYS	54 66%	1151 70%	~	12 86%~	19 73%~	10 53%~	13 57%~	31 74%~	1 100%~	1 25%~	~	1 100%~	4 50%~	7 78%~	24 59%~	28 74%~	48 67%~	4 57%~	40 63%~	14 74%~
#ALWAYS + USUALLY (NET)	73 89%	1475 90%	~	13 93%~	24 92%~	17 89%~	19 83%~	37 88%~	1 100%~	4 100%~	~	1 100%~	7 88%~	9 100%~	35 85%~	35 92%~	64 89%~	6 86%~	55 87%~	18 95%~
TOP BOX SCORE	54 66%	1151 70%	~	12 86%~	19 73%~	10 53%~	13 57%~	31 74%~	1 100%~	1 25%~	~	1 100%~	4 50%~	7 78%~	24 59%~	28 74%~	48 67%~	4 57%~	40 63%~	14 74%~
NOT ANSWERED	5	142			2	1	2	3				1		3		3	1	3	2	
VALID CASES	82	1641		14	26	19	23	42	1	4		1	8	9	41	38	72	7	63	19
NUMBER OF RESPONDENTS	87	1783		14	28	20	25	45	1	4		2	8	9	42	41	75	8	66	21
	100%	100%		100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q3 = YES]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
Q5 YES	193 66%	3345 65%	2 100%	37 76%	50 69%	58 63%	46 58%	96 66%	8 73%	8 50%	2 100%	1 50%	17 68%	17 77%	91 65%	89 67%	158 64%	23 79%	138 61%*	55 82%*
Q5 NO	101 34%	1824 35%		12 ~ 24%	22 31%	34 37%	33 42%	49 34%	3 27%	8 50%		1 ~ 50%	8 32%	5 23%	49 35%	44 33%	87 36%	6 21%	89 39%*	12 18%*
NOT ANSWERED	14	194		3	3	2	6	2					4	4	3	7		14		
VALID CASES	294	5169	2	49	72	92	79	145	11	16	2	2	25	22	140	133	245	29	227	67
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q6 NEVER		351%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
SOMETIMES	2916%	45114%	~	26%~	819%~	1119%~	819%~	1213%	117%~	450%~	2100%~		318%~	16%~	1215%	2316%~	314%~	2318%	612%		
USUALLY	4425%	81426%	~	720%~	819%~	2239%*	716%~	1719%	117%~	338%~			529%~	847%~	2428%	1923%	3725%~	523%~	3024%	1427%	
ALWAYS	10659%	182958%	100%~	274%~	2662%~	2442%*	2865%~	6067%*	467%~	113%~			953%~	847%~	4856%	5162%	8659%~	1464%~	7458%	3262%	
#ALWAYS + USUALLY (NET)	15084%	264384%	100%~	3394%~	3481%~	4681%	3581%~	7787%	583%~	450%~			1482%~	1694%~	7285%	7085%	12384%~	1986%~	10482%	4688%	
TOP BOX SCORE	10659%	182958%	100%~	274%~	2662%~	2442%*	2865%~	6067%*	467%~	113%~			953%~	847%~	4856%	5162%	8659%~	1464%~	7458%	3262%	
NOT ANSWERED	14	215		2	8	1	3	7	2				1		6	7	12	1	11	3	
VALID CASES	179	3129	2	35	42	57	43	89	6	8	2		17	17	85	82	146	22	127	52	
NUMBER OF RESPONDENTS	193100%	3344100%	2100%	37100%	50100%	58100%	46100%	96100%	8100%	8100%	2100%		1100%	17100%	17100%	91100%	89100%	158100%	23100%	138100%	55100%

[ASKED IF Q5 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q7 NONE	86 30%	1553 31%		10 ~ 21%	17 24%	30 33%	29 36%	41 28%	2 20%	6 40%	1 50%	1 50%	5 20%	5 20%	41 29%	38 29%	72 30%	7 24%	79 35%*	7 11%*
1 TIME	84 29%	1446 28%		12 ~ 25%	23 33%	32 35%	17 21%	40 28%	4 40%	3 20%	1 50%	1 50%	10 40%	7 28%	41 29%	37 28%	75 31%	4 14%	67 30%	17 26%
2	63 22%	1007 20%		14 ~ 29%	19 27%	17 19%	13 16%	36 25%	1 10%	2 13%			5 ~ 20%	6 24%	33 24%	28 21%	56 23%	6 21%	45 20%	18 28%
3	28 10%	534 11%	100%	2 ~ 12%	6 9%	6 8%	7 9%	13 9%	3 30%	2 13%				4 ~ 16%	11 8%	14 11%	21 9%	3 10%	20 9%	8 12%
4	16 5%	260 5%		3 ~ 6%	1 1%	3 3%	9 11%*	7 5%		1 7%			4 ~ 16%	1 4%	7 5%	8 6%	11 5%	4 14%	10 4%	6 9%
5 TO 9	6 2%	196 4%*		1 ~ 2%	1 1%	1 1%	3 4%	2 1%		1 7%			1 ~ 4%	1 4%	2 1%	4 3%	5 2%	1 3%	0.4%*	5 8%*
10 OR MORE TIMES	8 3%	87 2%		2 ~ 4%	3 4%	1 1%	2 3%	6 4%						1 4%	4 3%	4 3%	4 2%	4 14%	4 2%	4 6%
NOT ANSWERED	17	280		4	5	3	5	2	1	1			1	5	3		8		15	2
VALID CASES	291	5083	2	48	70	91	80	145	10	15	2	2	25	25	139	133	244	29	226	65
NUMBER OF RESPONDENTS	308	5363	2	52	75	94	85	147	11	16	2	2	25	26	144	136	252	29	241	67
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%



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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q8 #YES	136 67%	2386 68%	2 100%	30 79%	34 65%	40 66%	30 60%	71 69%	7 87%	4 44%	~	~	11 55%	14 70%	66 68%	62 66%	110 65%	17 77%	97 67%	39 67%
NO	67 33%	1113 32%	~	8 21%	18 35%	21 34%	20 40%	32 31%	1 13%	5 56%	~100%	~100%	1 45%	1 30%	6 32%	32 34%	60 35%	5 23%	48 33%	19 33%
NOT ANSWERED	2	69			1	1	1							1	1	2			2	
VALID CASES	203	3499	2	38	52	61	50	103	8	9	1	1	20	20	97	94	170	22	145	58
NUMBER OF RESPONDENTS	205 100%	3568 100%	2 100%	38 100%	53 100%	61 100%	51 100%	104 100%	8 100%	9 100%	1 100%	1 100%	20 100%	20 100%	98 100%	95 100%	172 100%	22 100%	147 100%	58 100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q9 NEVER	5 2%	78 2%	~	~	3 6%	~	2 4%	2 2%	~	1 11%	~	~	2 10%	~	4 4%	1 1%	5 3%	~	5 3%*	~	
SOMETIMES	23 11%	344 10%	~	3 8%	8 15%	7 12%	5 10%	12 12%	1 13%	1 11%	1 100%	~	3 15%	2 10%	10 11%	11 12%	19 11%	4 18%	18 13%	5 9%	
USUALLY	38 19%	768 22%	~	5 13%	8 15%	13 22%	12 24%	19 18%	1 13%	2 22%	~	~	3 15%	4 20%	20 21%	17 18%	28 17%	8 36%	26 18%	12 21%	
ALWAYS	134 67%	2292 66%	100%	2 79%	30 79%	33 63%	38 66%	31 62%	70 68%	6 75%	5 56%	~	1 100%	12 60%	14 70%	60 64%	65 69%	115 69%	10 45%	94 66%	40 70%
#ALWAYS + USUALLY (NET)	172 86%	3059 88%	100%	2 92%	35 92%	41 79%	51 88%	43 86%	89 86%	7 87%	7 78%	~	1 100%	15 75%	18 90%	80 85%	82 87%	143 86%	18 82%	120 84%	52 91%
TOP BOX SCORE	134 67%	2292 66%	100%	2 79%	30 79%	33 63%	38 66%	31 62%	70 68%	6 75%	5 56%	~	1 100%	12 60%	14 70%	60 64%	65 69%	115 69%	10 45%	94 66%	40 70%
NOT ANSWERED	5	87			1	3	1	1							4	1	5		4	1	
VALID CASES	200	3481	2	38	52	58	50	103	8	9	1	1	20	20	94	94	167	22	143	57	
NUMBER OF RESPONDENTS	205 100%	3568 100%	2 100%	38 100%	53 100%	61 100%	51 100%	104 100%	8 100%	9 100%	1 100%	1 100%	20 100%	20 100%	98 100%	95 100%	172 100%	22 100%	147 100%	58 100%	

[ASKED IF Q7 >= 1 TIME]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q10 YES	65 32%	1122 32%	1 50%~	8 22%~	12 23%	21 34%	23 46%*	34 34%	3 38%~	4 44%~	1 ~100%~	6 30%~	5 25%~	27 28%	34 37%	53 31%~	8 36%~	40 28%*	25 43%*	
NO	136 68%	2348 68%	1 50%~	28 78%~	40 77%	40 66%	27 54%*	67 66%	5 63%~	5 56%~	1 100%~	14 ~ 70%~	15 75%~	70 72%	59 63%	116 69%~	14 64%~	103 72%*	33 57%*	
NOT ANSWERED	4	97		2	1		1	3						1	2	3		4		
VALID CASES	201	3471	2	36	52	61	50	101	8	9	1	1	20	20	97	93	169	22	143	58
NUMBER OF RESPONDENTS	205	3568	2	38	53	61	51	104	8	9	1	1	20	20	98	95	172	22	147	58
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q11 #YES	53 93%	947 94%		8 ~100%	8 89%	17 94%	20 95%	29 94%	3 100%	4 100%		4 ~100%	5 100%	19 86%	31 97%	43 91%	7 100%	30 91%	23 96%	
NO	4 7%	63 6%	1 100%		1 ~11%	1 6%	1 5%	2 6%						3 14%	1 3%	4 9%		3 9%	1 4%	
NOT ANSWERED	29	450		6	9	6	8	8	1	1		1	2	1	11	7	17	1	26	3
VALID CASES	57	1010	1	8	9	18	21	31	3	4		4	5	22	32	47	7	33	24	
NUMBER OF RESPONDENTS	86 100%	1460 100%	1 100%	14 100%	18 100%	24 100%	29 100%	39 100%	4 100%	5 100%		1 100%	6 100%	6 100%	33 100%	39 100%	64 100%	8 100%	59 100%	27 100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC		
Q12 #YES	42 74%	718 70%	1 100%	7 87%	3 33%	16 89%	15 71%	26 84%	2 67%	2 50%	~	3 75%	3 60%	16 73%	23 72%	35 74%	4 57%	24 73%	18 75%	
NO	15 26%	305 30%	~	1 13%	6 67%	2 11%	6 29%	5 16%	1 33%	2 50%	~	1 25%	2 40%	6 27%	9 28%	12 26%	3 43%	9 27%	6 25%	
NOT ANSWERED	8	87			3	3	2	3				1	2	5	2	6	1	7	1	
VALID CASES	57	1023	1	8	9	18	21	31	3	4		4	5	22	32	47	7	33	24	
NUMBER OF RESPONDENTS	65 100%	1110 100%	1 100%	8 100%	12 100%	21 100%	23 100%	34 100%	3 100%	4 100%		1 100%	6 100%	5 100%	27 100%	34 100%	53 100%	8 100%	40 100%	25 100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC		
Q13 #YES	49 82%	830 78%	1 100%	8 100%	7 64%	16 80%	17 85%	28 87%	2 67%	3 75%	~	5 83%	2 40%	19 73%	28 90%	42 84%	4 57%	30 81%	19 83%	
NO	11 18%	241 22%	~	~	4 36%	4 20%	3 15%	4 13%	1 33%	1 25%	~	1 17%	3 60%	7 27%	3 10%	8 16%	3 43%	7 19%	4 17%	
NOT ANSWERED	5	39			1	1	3	2				1		1	3	3	1	3	2	
VALID CASES	60	1071	1	8	11	20	20	32	3	4		6	5	26	31	50	7	37	23	
NUMBER OF RESPONDENTS	65 100%	1110 100%	1 100%	8 100%	12 100%	21 100%	23 100%	34 100%	3 100%	4 100%		1 100%	6 100%	5 100%	27 100%	34 100%	53 100%	8 100%	40 100%	25 100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC	
Q14 WORST HEALTH CARE POSSIBLE	3	0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
01	7	0.2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
02	9	0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
03	1	0.5%	~	~	~	~	2%	1%	~	~	~	~	~	1%	0.6%	~	0.7%	~	
04	4	2%	~	~	4%	2%	2%	2%	~	~	~	~	5%	3%	1%	2%	1%	3%	1%
05	7	3%	1	~	4	2	~	5	~	~	~	~	5%	3%	3%	6	1	5	2
06	6	3%	~	1	3	1	1	~	1	1	~	~	10%	2	3	4	1	5	1
07	14	7%	~	~	4	6	6	5	~	3	~	~	5%	1	2	6	7	9	4
08	54	27%	1	14	14	13	12	31	2	2	~	~	30%	6	6	26	27	45	8
09	40	20%	~	9	9	17	5	20	1	2	~	~	30%	6	2	25	12	35	2
BEST HEALTH CARE POSSIBLE	74	37%	~	14	17	20	23	38	4	1	1	1	6	7	32	39	67	5	52
#8-10 (NET)	168	84%	50%	37%	40%	50%	40%	89%	7%	5%	1%	1%	18%	15%	83%	78%	147	15	122
			~	97%	78%	83%	82%	87%	88%	56%	100%	100%	90%	75%	86%	84%	87%	68%	86%

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC		
9-10 (NET)	114 57%	2027 58%	~	23 61%	26 51%	37 62%	28 57%	58 57%	5 63%	3 33%	1 100%	1 100%	12 60%	9 45%	57 59%	51 55%	102 60%	7 32%	87 61%	27 47%
NOT ANSWERED	5	98			2	1	2	2						1	2	3		5		
VALID CASES	200	3470	2	38	51	60	49	102	8	9	1	1	20	20	97	93	169	22	142	58
NUMBER OF RESPONDENTS	205 100%	3568 100%	2 100%	38 100%	53 100%	61 100%	51 100%	104 100%	8 100%	9 100%	1 100%	1 100%	20 100%	20 100%	98 100%	95 100%	172 100%	22 100%	147 100%	58 100%
MEAN	8.60	8.58	6.50	8.92	8.29	8.65	8.69	8.62	8.88	7.89	10.0	10.0	8.65	8.35	8.60	8.63	8.72	7.95	8.64	8.50
p stat_(*=Sig @ p<=.05)		.810	~	~	.135	.750	~	.866	~	~	~	~	~	~	.985	.765	~	~	.544	.546

[ASKED IF Q7 >= 1]



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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q15 NEVER	4 2%	64 2%	~	1 3%~	2 4%	~	1 2%	2 2%	~	~	~	~	1 5%~	~	4 4%*	~	4 2%~	~	4 3%*	~
SOMETIMES	21 11%	353 10%	~	2 6%~	6 12%	6 10%	7 15%~	5 5%*	2 25%~	~	1 ~100%~	~	3 ~ 15%~	4 20%~	13 14%	7 8%	16 10%~	4 18%~	12 9%	9 16%
USUALLY	64 32%	1112 32%	1 50%~	8 22%~	18 35%	23 38%	14 30%~	33 32%	1 13%~	4 50%~	~	~	6 ~ 30%~	7 35%~	32 33%	28 30%	50 30%~	11 50%~	48 35%	16 28%
ALWAYS	108 55%	1922 56%	1 50%~	25 69%~	26 50%	32 52%	24 52%~	63 61%	5 63%~	4 50%~	~	1 ~100%~	10 50%~	9 45%~	47 49%	58 62%*	98 58%~	7 32%~	75 54%	33 57%
#ALWAYS + USUALLY (NET)	172 87%	3034 88%	2 100%~	33 92%~	44 85%	55 90%	38 83%~	96 93%*	6 75%~	8 100%~	~	1 ~100%~	16 80%~	16 80%~	79 82%*	86 92%*	148 88%~	18 82%~	123 88%	49 84%
TOP BOX SCORE	108 55%	1922 56%	1 50%~	25 69%~	26 50%	32 52%	24 52%~	63 61%	5 63%~	4 50%~	~	1 ~100%~	10 50%~	9 45%~	47 49%	58 62%*	98 58%~	7 32%~	75 54%	33 57%
NOT ANSWERED	8	117		2	1		5	1		1					2	2	4		8	
VALID CASES	197	3451	2	36	52	61	46	103	8	8	1	1	20	20	96	93	168	22	139	58
NUMBER OF RESPONDENTS	205 100%	3568 100%	2 100%	38 100%	53 100%	61 100%	51 100%	104 100%	8 100%	9 100%	1 100%	1 100%	20 100%	20 100%	98 100%	95 100%	172 100%	22 100%	147 100%	58 100%

[ASKED IF Q7 >= 1 TIME]

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q16 YES	198 68%	3643 71%	11 ~ 23%	56 78%*	77 84%*	54 69%	101 69%	10 91%~	10 63%~	2 100%~	2 100%~	16 67%~	18 69%~	90 64%	98 72%	168 67%~	21 72%~	143 64%*	55 82%*	
NO	94 32%	1481 29%	2 100%~	37 77%~	16 22%*	15 16%*	24 31%	1 9%~	6 38%~	~	~	8 33%~	8 31%~	51 36%	38 28%	81 33%~	8 28%~	82 36%*	12 18%*	
NOT ANSWERED	16	239	4	3	2	7	1				1		3		3		16			
VALID CASES	292	5124	2	48	72	92	78	146	11	16	2	2	24	26	141	136	249	29	225	67
NUMBER OF RESPONDENTS	308	5363	2	52	75	94	85	147	11	16	2	2	25	26	144	136	252	29	241	67
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q17 YES	23 12%	403 11%	~	18%~	13%	15%	6%*	14%	11%~	~	~	~	7%~	6%~	15%	11%	19	4	11	12
NO	167 88%	3143 89%	~	82%~	87%	85%	94%*	83	8	10	2	2	14	17	74	84	143	16	126	41
NOT ANSWERED	8	226			4	2	2	4	1				1		3	4	6	1	6	2
VALID CASES	190	3545		11	52	75	52	97	9	10	2	2	15	18	87	94	162	20	137	53
NUMBER OF RESPONDENTS	198 100%	3771 100%		11 100%	56 100%	77 100%	54 100%	101 100%	10 100%	10 100%	2 100%	2 100%	16 100%	18 100%	90 100%	98 100%	168 100%	21 100%	143 100%	55 100%

[ASKED IF Q16 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q18 #YES	22 96%	349 94%~	~100%~	2 86%~	6 100%~	11 100%~	3 100%~	13 93%~	1 100%~	~	~	~100%~	1 100%~	1 100%~	13 100%~	9 90%~	18 95%~	4 100%~	10 91%~	12 100%~
NO	1 4%	22 6%~	~	~	1 14%~	~	~	1 7%~	~	~	~	~	~	~	1 10%~	1 5%~	~	1 9%~	~	
NOT ANSWERED		7																		
VALID CASES	23	371		2	7	11	3	14	1			1	1	13	10	19	4	11	12	
NUMBER OF RESPONDENTS	23	378		2	7	11	3	14	1			1	1	13	10	19	4	11	12	
	100%	100%		100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q16 = YES AND Q17 = YES]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q19 YES	8 3%	175 3%	~	1 2%	2 3%	3 3%	2 3%	6 4%	1 9%	~	~	~	~	~	3 2%	5 4%	5 2%	3 10%	1 0.4%	7 11%*	
NO	284 97%	4948 97%	100%	2 98%	46 97%	71 97%	88 97%	77 97%	141 96%	10 91%	16 100%	2 100%	2 100%	24 100%	26 100%	139 98%	131 96%	245 98%	26 90%	225 100%*	59 89%*
NOT ANSWERED	16	240		5	2	3	6					1		2		2		15	1		
VALID CASES	292	5123	2	47	73	91	79	147	11	16	2	2	24	26	142	136	250	29	226	66	
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%	

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q20 NEVER		23 12%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	2 25%	35 18%	~100%	1 ~	1 33%	1 33%	2 33%	~	~	~	~	~	~	1 33%	1 20%	1 20%	1 33%	~	2 29%	~
USUALLY	1 13%	49 25%	~	~50%	1 ~	~	1 17%	~	~	~	~	~	~	~	1 20%	1 20%	~	~	1 14%	~
ALWAYS	5 63%	87 45%	~	~50%	1 67%	2 100%	2 100%	3 50%	1 100%	~	~	~	~	~	2 67%	3 60%	3 60%	2 67%	1 100%	4 57%
#ALWAYS + USUALLY (NET)	6 75%	135 70%	~	~100%	2 67%	2 100%	2 100%	4 67%	1 100%	~	~	~	~	~	2 67%	4 80%	4 80%	2 67%	1 100%	5 71%
TOP BOX SCORE	5 63%	87 45%	~	~50%	1 67%	2 100%	2 100%	3 50%	1 100%	~	~	~	~	~	2 67%	3 60%	3 60%	2 67%	1 100%	4 57%
NOT ANSWERED		3																		
VALID CASES	8	193		1	2	3	2	6	1					3	5	5	3	1	7	
NUMBER OF RESPONDENTS	8	196		1	2	3	2	6	1					3	5	5	3	1	7	
	100%	100%		100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	

[ASKED IF Q19 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
Q21 #YES	6 86%	157 84%	~	~100%	~100%	~100%	~	80%	~100%	~	~	~	~	~	67%	~100%	~100%	~50%	~100%	~83%
NO	1 14%	31 16%	~100%	~	~	~	~	20%	~	~	~	~	~	33%	~	~50%	~	~17%	~	
NOT ANSWERED	1	8		1			1							1		1		1		
VALID CASES	7	188	1	1	3	2	5	1						3	4	5	2	1	6	
NUMBER OF RESPONDENTS	8	196	1	2	3	2	6	1						3	5	5	3	1	7	
	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	

[ASKED IF Q19 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
Q22 YES	33 11%	446 9%		5 ~ 11%	12 ~ 17%	9 10%	7 9%	15 10%	3 ~ 19%			2 ~ 8%	3 12%	17 12%	14 10%	20 8%	12 43%	12 5%*	21 32%*	
NO	256 89%	4656 91%	2 100%	41 89%	59 83%	82 90%	72 91%	131 90%	10 100%	13 81%	2 100%	2 100%	22 92%	23 88%	124 88%	121 90%	229 92%	16 57%	211 95%*	45 68%*
NOT ANSWERED	19	261		6	4	3	6	1	1			1		3	1	3	1	18	1	
VALID CASES	289	5102	2	46	71	91	79	146	10	16	2	2	24	26	141	135	249	28	223	66
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%



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

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER				
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q23 NEVER	5 15%	62 15%	~	20%~	17%~	22%~	~	20%~	~	~	~	~	~	33%~	~	21%~	10%~	17%~	25%~	10%~
SOMETIMES	11 33%	96 24%	~	20%~	33%~	22%~	57%~	13%~	~	33%~	~	~	100%~	67%~	47%~	21%~	40%~	25%~	42%~	29%~
USUALLY	8 24%	112 28%	~	20%~	33%~	22%~	14%~	20%~	~	67%~	~	~	~	~	18%~	36%~	20%~	33%~	17%~	29%~
ALWAYS	9 27%	135 33%	~	40%~	17%~	33%~	29%~	47%~	~	~	~	~	~	~	35%~	21%~	30%~	25%~	17%~	33%~
#ALWAYS + USUALLY (NET)	17 52%	247 61%	~	60%~	50%~	56%~	43%~	67%~	~	67%~	~	~	~	~	53%~	57%~	50%~	58%~	33%~	62%~
TOP BOX SCORE	9 27%	135 33%	~	40%~	17%~	33%~	29%~	47%~	~	~	~	~	~	~	35%~	21%~	30%~	25%~	17%~	33%~
NOT ANSWERED		14																		
VALID CASES	33	405	5	12	9	7	15	3					2	3	17	14	20	12	12	21
NUMBER OF RESPONDENTS	33	419	5	12	9	7	15	3					2	3	17	14	20	12	12	21
	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q22 = YES]

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC
Q24 #YES	24 73%	260 64%	~ 80%	~ 67%	~ 67%	~ 86%	11 73%	3 ~100%	~	~	1 50%	3 100%	10 59%	13 93%	16 80%	7 58%	7 58%	17 81%
NO	9 27%	143 36%	~ 20%	~ 33%	~ 33%	~ 14%	4 27%	~	~	~	1 50%	~	7 41%	1 7%	4 20%	5 42%	5 42%	4 19%
NOT ANSWERED		16																
VALID CASES	33	403		5	12	9	7	15	3		2	3	17	14	20	12	12	21
NUMBER OF RESPONDENTS	33	419		5	12	9	7	15	3		2	3	17	14	20	12	12	21
	100%	100%		100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q22 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q25 YES	34 12%	666 13%	~	2%~	1 6%*	4 19%*	17 15%	19 13%	1 10%~	~	~	~	1 4%~	5 19%~	16 11%	18 13%	25 10%~	8 28%~	9 4%*	25 37%*
NO	256 88%	4441 87%	100%~	98%~	2 94%*	46 81%*	68 85%	74 87%	9 90%~	16 100%~	2 100%~	2 100%~	22 96%~	21 81%~	127 89%	116 87%	224 90%~	21 72%~	214 96%*	42 63%*
NOT ANSWERED	18	256		5	3	3	7		1				2		1	2	3		18	
VALID CASES	290	5107	2	47	72	91	78	147	10	16	2	2	23	26	143	134	249	29	223	67
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC	
Q26 NEVER	6 18%	92 14%	~	~	~	18%	25%	3 16%	~	~	~	~	~	2 40%	3 19%	3 17%	5 20%	1 13%	3 33%	3 12%	
SOMETIMES	6 18%	116 18%	~	~	1 25%	3 18%	2 17%	2 11%	1 100%	~	~	~	~	1 20%	4 25%	2 11%	4 16%	2 25%	1 11%	5 20%	
USUALLY	12 35%	171 27%	~	~	1 25%	7 41%	4 33%	9 47%	~	~	~	~	~	1 20%	2 13%	10 56%	11 44%	1 13%	3 33%	9 36%	
ALWAYS	10 29%	258 41%	~	1 100%	2 50%	4 24%	3 25%	5 26%	~	~	~	~	~	1 100%	1 20%	7 44%	3 17%	5 20%	4 50%	2 22%	8 32%
#ALWAYS + USUALLY (NET)	22 65%	429 67%	~	1 100%	3 75%	11 65%	7 58%	14 74%	~	~	~	~	~	1 100%	2 40%	9 56%	13 72%	16 64%	5 63%	5 56%	17 68%
TOP BOX SCORE	10 29%	258 41%	~	1 100%	2 50%	4 24%	3 25%	5 26%	~	~	~	~	~	1 100%	1 20%	7 44%	3 17%	5 20%	4 50%	2 22%	8 32%
NOT ANSWERED		17																			
VALID CASES	34	636		1	4	17	12	19	1					1	5	16	18	25	8	9	25
NUMBER OF RESPONDENTS	34	653		1	4	17	12	19	1					1	5	16	18	25	8	9	25
	100%	100%		100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q27 #YES	16 47%	311 49%~	~100%~	1 50%~	2 47%~	8 42%~	5 47%~	9 ~	~	~	~	1 ~100%~	3 60%~	8 50%~	8 44%~	11 44%~	4 50%~	3 33%~	13 52%~
NO	18 53%	326 51%~	~	~	2 50%~	9 53%~	7 58%~	10 53%~	1 100%~	~	~	~	2 40%~	8 50%~	10 56%~	14 56%~	4 50%~	6 67%~	12 48%~
NOT ANSWERED		17																	
VALID CASES	34	636		1	4	17	12	19	1			1	5	16	18	25	8	9	25
NUMBER OF RESPONDENTS	34	653		1	4	17	12	19	1			1	5	16	18	25	8	9	25
	100%	100%		100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q28 YES	46 16%	978 19%	1 50%~	12 26%~	10 14%	12 13%	11 15%	27 18%	2 ~	13%~	~	4 ~	5 17%~	25 18%	20 15%	33 13%~	11 39%~	23 10%*	23 35%*	
NO	241 84%	4103 81%	1 50%~	35 74%~	62 86%	79 87%	64 85%	119 82%	10 100%~	14 87%~	2 100%~	2 100%~	19 83%~	21 81%~	117 82%	113 85%	215 87%~	17 61%~	198 90%*	43 65%*
NOT ANSWERED	21	281		5	3	3	10	1	1			2		2	3	4	1	20	1	
VALID CASES	287	5082	2	47	72	91	75	146	10	16	2	2	23	26	142	133	248	28	221	66
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC
Q29 #YES	30 67%	594 60%~		10 ~ 83%~	5 50%~	8 67%~	7 70%~	18 69%~	2 ~100%~			2 ~ 50%~	2 40%~	15 63%~	14 70%~	21 66%~	7 64%~	16 70%~	14 64%~
NO	15 33%	403 40%~	1 100%~	2 17%~	5 50%~	4 33%~	3 30%~	8 31%~	~	~	~	2 ~ 50%~	3 60%~	9 38%~	6 30%~	11 34%~	4 36%~	7 30%~	8 36%~
NOT ANSWERED	1	32					1	1						1		1			1
VALID CASES	45	998	1	12	10	12	10	26	2			4	5	24	20	32	11	23	22
NUMBER OF RESPONDENTS	46 100%	1030 100%	1 100%	12 100%	10 100%	12 100%	11 100%	27 100%	2 100%			4 100%	5 100%	25 100%	20 100%	33 100%	11 100%	23 100%	23 100%

[ASKED IF Q28 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
Q30 YES	243 86%	4410 88%	2 100%	40 87%	60 87%	77 87%	64 84%	127 88%	9 100%	9 56%	2 100%	1 50%	17 85%	22 85%	127 90%	109 84%	212 87%	25 89%	181 83%*	62 95%*
NO	39 14%	622 12%		6 ~ 13%	9 13%	12 13%	12 16%	17 12%		7 ~ 44%		1 ~ 50%	3 15%	4 15%	14 10%	20 16%	31 13%	3 11%	36 17%*	3 5%*
NOT ANSWERED	26	331		6	6	5	9	3	2				5		3	7	9	1	24	2
VALID CASES	282	5032	2	46	69	89	76	144	9	16	2	2	20	26	141	129	243	28	217	65
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%



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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR- AMER	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q31 NONE	56 24%	1163 27%		7 ~ 17%	14 ~ 24%	17 23%	18 30%	28 23%	2 25%	4 ~ 44%			3 ~ 19%	3 ~ 14%	31 25%	22 21%	50 24%	4 ~ 16%	51 29%*	5 8%*
1 TIME	87 37%	1470 34%		15 ~ 37%	20 ~ 34%	36 48%*	16 27%*	45 37%	3 38%	1 ~ 11%	1 50%		8 ~ 50%	11 50%	49 40%	37 35%	80 39%	7 28%	67 38%	20 33%
2	45 19%	817 19%		8 ~ 20%	16 ~ 28%	13 17%	8 13%	24 20%	1 13%			1 ~ 100%	3 19%	3 14%	23 19%	20 19%	40 20%	3 12%	29 17%	16 27%
3	30 13%	450 11%	2 100%	8 ~ 20%	4 7%	5 7%*	11 18%	14 11%	2 25%	3 33%	1 50%		1 ~ 6%	4 18%	12 10%	18 17%	23 11%	6 24%	19 11%	11 18%
4	8 3%	180 4%		1 ~ 2%	1 2%	3 4%	3 5%	5 4%					1 ~ 6%	1 5%	5 4%	3 3%	7 3%	1 4%	6 3%	2 3%
5 TO 9	5 2%	146 3%			3 5%		2 3%	4 3%		1 ~ 11%					1 ~ 0.8%	4 4%	3 1%	2 8%	1 ~ 0.6%	4 7%
10 OR MORE TIMES	4 2%	40 0.9%		1 ~ 2%		1 1%	2 3%	3 2%							2 2%	2 2%	2 1%	2 8%	2 1%	2 3%
NOT ANSWERED	8	203			2	2	4	4	1				1		4	3	7		6	2
VALID CASES	235	4266	2	40	58	75	60	123	8	9	2	1	16	22	123	106	205	25	175	60
NUMBER OF RESPONDENTS	243	4469	2	40	60	77	64	127	9	9	2	1	17	22	127	109	212	25	181	62
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q31A ALWAYS	6 3%	82 3%	~	~	2 5%	2 3%	2 5%	1 1%	~	~	~	~	1 8%	~	4 4%	2 2%	4 3%	1 5%	5 4%	1 2%
USUALLY	6 3%	49 2%	~	1 3%	2 5%	3 5%	~	3 3%	~	~	~	~	1 5%	3 3%	3 4%	5 3%	1 5%	4 3%	2 4%	
SOMETIMES	18 10%	229 8%	~	4 12%	3 7%	7 12%	4 10%	7 7%	~	1 20%	~	~	2 15%	1 5%	11 12%	5 6%	12 8%	4 19%	13 11%	5 9%
NEVER	148 83%	2671 88%	2 100%	28 85%	37 84%	46 79%	35 85%	83 88%	6 100%	4 80%	2 100%	1 100%	10 77%	17 89%	73 80%	74 88%	133 86%	15 71%	101 82%	47 85%
#NEVER + SOMETIMES (NET)	166 93%	2900 96%	2 100%	32 97%	40 91%	53 91%	39 95%	90 96%	6 100%	5 100%	2 100%	1 100%	12 92%	18 95%	84 92%	79 94%	145 94%	19 90%	114 93%	52 95%
TOP BOX SCORE	148 83%	2671 88%	2 100%	28 85%	37 84%	46 79%	35 85%	83 88%	6 100%	4 80%	2 100%	1 100%	10 77%	17 89%	73 80%	74 88%	133 86%	15 71%	101 82%	47 85%
NOT ANSWERED	1	30					1	1						1			1		1	
VALID CASES	178	3030	2	33	44	58	41	94	6	5	2	1	13	19	91	84	154	21	123	55
NUMBER OF RESPONDENTS	179	3060	2	33	44	58	42	95	6	5	2	1	13	19	92	84	155	21	124	55
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC			
Q32 NEVER	5 3%	80 3%	~	1 3%~	~	2 4%	2 5%~	2 2%	~	~	1 50%~	~	~	3 3%	2 2%	4 3%~	1 5%~	5 4%*	~		
SOMETIMES	13 7%	145 5%	~	3 9%~	4 9%~	5 9%	1 2%~	6 6%	~	~	~	1 8%~	1 5%~	10 11%	2 2%*	9 6%~	4 19%~	10 8%	3 6%		
USUALLY	23 13%	478 16%	~	3 9%~	8 19%~	8 14%	4 10%~	14 15%	1 17%~	~	~	~	1 8%~	1 5%~	13 14%	10 12%	21 14%~	2 10%~	15 12%	8 15%	
ALWAYS	135 77%	2312 77%	100%~	2 79%~	26 72%~	31 74%	42 83%	34 77%	73 83%~	5 100%~	4 50%~	1 100%~	1 85%~	11 89%~	17 72%	66 78%~	69 67%~	120 75%	14 67%~	92 75%	43 80%
#ALWAYS + USUALLY (NET)	158 90%	2790 93%	100%~	2 88%~	29 91%~	39 88%	50 93%	38 92%	87 100%~	6 100%~	4 50%~	1 100%~	1 92%~	12 95%~	18 86%	79 95%*	79 92%~	141 76%~	16 88%	107 88%	51 94%
TOP BOX SCORE	135 77%	2312 77%	100%~	2 79%~	26 72%~	31 74%	42 83%	34 77%	73 83%~	5 100%~	4 50%~	1 100%~	1 85%~	11 89%~	17 72%	66 78%~	69 67%~	120 75%	14 67%~	92 75%	43 80%
NOT ANSWERED	3	44			1	1	1			1					1	1		2	1		
VALID CASES	176	3016	2	33	43	57	41	95	6	4	2	1	13	19	92	83	154	21	122	54	
NUMBER OF RESPONDENTS	179	3060	2	33	44	58	42	95	6	5	2	1	13	19	92	84	155	21	124	55	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q33 NEVER	2 1%	40 1%	~	3%~	1 2%~	~	~	2 2%~	~	~	~	~	~	~	2 2%~	~	1 ~0.6%~	1 5%~	1 0.8%~	1 2%
SOMETIMES	9 5%	145 5%	~	3%~	1 2%~	4 7%	3 7%~	7 7%	~	1 20%~	~	~	~	~	4 4%	5 6%	7 5%~	2 10%~	6 5%	3 5%
USUALLY	29 16%	494 16%	1 50%~	6 18%~	7 16%~	9 16%	6 14%~	17 18%	~	3 60%~	~	~	3 23%~	3 16%~	15 16%	14 17%	22 14%~	7 33%~	18 15%	11 20%
ALWAYS	137 77%	2341 77%	1 50%~	25 76%~	34 79%~	44 77%	33 79%~	69 73%	6 100%~	1 20%~	2 100%~	1 100%~	10 77%~	16 84%~	71 77%	65 77%	125 81%~	11 52%~	97 80%	40 73%
#ALWAYS + USUALLY (NET)	166 94%	2835 94%	2 100%~	31 94%~	41 95%~	53 93%	39 93%~	86 91%~	6 100%~	4 80%~	2 100%~	1 100%~	13 100%~	19 100%~	86 93%	79 94%	147 95%~	18 86%~	115 94%	51 93%
TOP BOX SCORE	137 77%	2341 77%	1 50%~	25 76%~	34 79%~	44 77%	33 79%~	69 73%	6 100%~	1 20%~	2 100%~	1 100%~	10 77%~	16 84%~	71 77%	65 77%	125 81%~	11 52%~	97 80%	40 73%
NOT ANSWERED	2	39			1	1														2
VALID CASES	177	3021	2	33	43	57	42	95	6	5	2	1	13	19	92	84	155	21	122	55
NUMBER OF RESPONDENTS	179	3060	2	33	44	58	42	95	6	5	2	1	13	19	92	84	155	21	124	55
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q34 NEVER	2 1%	28 0.9%	~	~	1 2%	~	1 2%	2 2%	~	~	~	~	~	~	2 2%	~	2 1%	~	2 2%	~	
SOMETIMES	7 4%	114 4%	~	2 6%	2 5%	2 4%	1 2%	5 5%	~	1 20%	~	~	~	~	3 3%	4 5%	5 3%	2 10%	4 3%	3 6%	
USUALLY	24 14%	407 14%	~	4 12%	5 12%	8 14%	7 17%	16 17%	~	3 60%	~	~	1 8%	2 11%	10 11%	14 17%	17 11%	7 35%	13 11%	11 20%	
ALWAYS	142 81%	2460 82%	100%	2 82%	27 81%	34 82%	46 82%	33 79%	71 76%	6 100%	1 20%	2 100%	1 100%	12 92%	16 89%	77 84%	64 78%	130 84%	11 55%	102 84%	40 74%
#ALWAYS + USUALLY (NET)	166 95%	2867 95%	100%	2 94%	31 93%	39 93%	54 96%	40 95%	87 93%	6 100%	4 80%	2 100%	1 100%	13 100%	18 100%	87 95%	78 95%	147 95%	18 90%	115 95%	51 94%
TOP BOX SCORE	142 81%	2460 82%	100%	2 82%	27 81%	34 82%	46 82%	33 79%	71 76%	6 100%	1 20%	2 100%	1 100%	12 92%	16 89%	77 84%	64 78%	130 84%	11 55%	102 84%	40 74%
NOT ANSWERED	4	51			2	2		1						1		2	1	1	3	1	
VALID CASES	175	3009	2	33	42	56	42	94	6	5	2	1	13	18	92	82	154	20	121	54	
NUMBER OF RESPONDENTS	179	3060	2	33	44	58	42	95	6	5	2	1	13	19	92	84	155	21	124	55	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12 AND OVER	BLCK OR AFR-	AMER 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		
Q35 YES	124 71%	2050 69%	8 ~ 25%	23 ~ 55%	53 93%*	40 95%~	58 62%*	4 67%~	5 100%~	2 100%~	1 100%~	10 83%~	17 89%~	66 73%	58 70%	109 71%~	15 75%~	80 66%*	44 81%*	
NO	51 29%	942 31%	2 100%~	24 75%~	19 45%~	4 7%*	2 5%~	36 38%*	2 33%~	~	~	~	2 17%~	2 11%~	25 27%	25 30%	45 29%~	5 25%~	41 34%*	10 19%*
NOT ANSWERED	4	67	1	2	1		1				1			1	1	1	1	3	1	
VALID CASES	175	2993	2	32	42	57	42	94	6	5	2	1	12	19	91	83	154	20	121	54
NUMBER OF RESPONDENTS	179	3060	2	33	44	58	42	95	6	5	2	1	13	19	92	84	155	21	124	55
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q36 NEVER	1 0.8%	19 1%	~	~	~	~	3%~	1 2%	~	~	~	~	~	1 2%	1 0.9%~	1 ~	1 1%~	~		
SOMETIMES	3 2%	119 6%*	~	~	~	2 4%	1 3%~	2 4%	~	~	~	~	~	1 2%	2 4%	2 2%~	1 7%~	1 1%~	2 5%~	
USUALLY	29 24%	466 23%	~	3 38%~	6 29%~	10 19%	10 25%~	9 16%	1 25%~	2 40%~	~	~	3 30%~	7 41%~	18 28%	11 19%	24 22%~	5 33%~	19 24%~	10 23%~
ALWAYS	89 73%	1408 70%	~	5 63%~	15 71%~	41 77%	28 70%~	44 79%	3 75%~	3 60%~	2 100%~	1 100%~	7 70%~	10 59%~	45 69%	44 77%	80 75%~	9 60%~	57 73%~	32 73%~
#ALWAYS + USUALLY (NET)	118 97%	1874 93%*	~	8 100%~	21 100%~	51 96%	38 95%~	53 95%	4 100%	5 100%	2 100%	1 100%	10 100%	17 100%	63 97%	55 96%	104 97%~	14 93%~	76 97%~	42 95%~
TOP BOX SCORE	89 73%	1408 70%	~	5 63%~	15 71%~	41 77%	28 70%~	44 79%	3 75%~	3 60%~	2 100%~	1 100%~	7 70%~	10 59%~	45 69%	44 77%	80 75%~	9 60%~	57 73%~	32 73%~
NOT ANSWERED	2	36			2		2							1	1	2		2		
VALID CASES	122	2013		8	21	53	40	56	4	5	2	1	10	17	65	57	107	15	78	44
NUMBER OF RESPONDENTS	124	2049		8	23	53	40	58	4	5	2	1	10	17	66	58	109	15	80	44
	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q37 NEVER	7 4%	89 3%	~	2 6%~	2 5%~	2 4%	1 2%~	5 5%	1 ~ 20%~	~	~	~	~	1 6%~	5 5%	2 2%	6 4%~	1 5%~	7 6%*	~
SOMETIMES	19 11%	318 11%	~	5 16%~	6 14%~	5 9%	3 7%~	11 12%	1 17%~	~	~	~	~	~	14 15%*	5 6%	12 8%~	6 30%~	14 12%	5 9%
USUALLY	37 21%	708 24%	1 50%~	5 16%~	8 19%~	14 25%	9 22%~	17 18%	2 33%~	3 60%~	~	~	5 38%~	3 18%~	22 24%	15 19%	31 20%~	6 30%~	25 21%	12 22%
ALWAYS	110 64%	1876 63%	1 50%~	20 63%~	26 62%~	35 63%	28 68%~	61 65%	3 50%~	1 20%~	2 100%~	1 100%~	8 62%~	13 76%~	50 55%*	59 73%*	103 68%~	7 35%~	73 61%	37 69%
#ALWAYS + USUALLY (NET)	147 85%	2584 86%	2 100%~	25 78%~	34 81%~	49 88%	37 90%~	78 83%	5 83%~	4 80%~	2 100%~	1 100%~	13 100%~	16 94%~	72 79%*	74 91%*	134 88%~	13 65%~	98 82%	49 91%
TOP BOX SCORE	110 64%	1876 63%	1 50%~	20 63%~	26 62%~	35 63%	28 68%~	61 65%	3 50%~	1 20%~	2 100%~	1 100%~	8 62%~	13 76%~	50 55%*	59 73%*	103 68%~	7 35%~	73 61%	37 69%
NOT ANSWERED	6	70		1	2	2	1	1						2	1	3	3	1	5	1
VALID CASES	173	2990	2	32	42	56	41	94	6	5	2	1	13	17	91	81	152	20	119	54
NUMBER OF RESPONDENTS	179 100%	3060 100%	2 100%	33 100%	44 100%	58 100%	42 100%	95 100%	6 100%	5 100%	2 100%	1 100%	13 100%	19 100%	92 100%	84 100%	155 100%	21 100%	124 100%	55 100%

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



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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
Q38 #YES	144 82%	2520 84%	1 100%	29 88%	33 77%	49 86%	32 76%	77 82%	6 100%	2 40%	2 100%	1 100%	11 85%	14 74%	76 83%	68 82%	127 82%	16 76%	100 83%	44 80%
NO	32 18%	484 16%		4 ~12%	10 23%	8 14%	10 24%	17 18%		3 ~60%			2 ~15%	5 26%	16 17%	15 18%	27 18%	5 24%	21 17%	11 20%
NOT ANSWERED	3	56	1		1	1		1							1		1		3	
VALID CASES	176	3004	1	33	43	57	42	94	6	5	2	1	13	19	92	83	154	21	121	55
NUMBER OF RESPONDENTS	179 100%	3060 100%	2 100%	33 100%	44 100%	58 100%	42 100%	95 100%	6 100%	5 100%	2 100%	1 100%	13 100%	19 100%	92 100%	84 100%	155 100%	21 100%	124 100%	55 100%

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

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
Q39 YES	60 34%	1156 39%	1 50%~	18 55%~	11 26%~	16 28%	14 34%~	39 41%*	1 17%~	1 20%~	~	~	4 31%~	4 21%~	36 40%	24 29%	49 32%~	10 48%~	34 28%*	26 47%*
NO	116 66%	1846 61%	1 50%~	15 45%~	32 74%~	41 72%	27 66%~	56 59%*	5 83%~	4 80%~	2 100%~	1 100%~	9 69%~	15 79%~	55 60%	60 71%	105 68%~	11 52%~	87 72%*	29 53%*
NOT ANSWERED	3	59			1	1	1								1		1		3	
VALID CASES	176	3001	2	33	43	57	41	95	6	5	2	1	13	19	91	84	154	21	121	55
NUMBER OF RESPONDENTS	179	3060	2	33	44	58	42	95	6	5	2	1	13	19	92	84	155	21	124	55
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q40 NEVER	3 5%	80 7%		1 6%	1 9%		1 8%	3 8%							2 6%	1 4%	3 6%		3 9%	
SOMETIMES	9 15%	163 14%		3 17%	2 18%	2 13%	2 15%	6 16%	1 100%						5 14%	4 17%	5 10%	4 40%	2 6%	7 27%
USUALLY	20 34%	320 28%	1 100%	4 22%	4 36%	6 38%	5 38%	16 42%	1 100%				1 25%	2 50%	10 28%	10 43%	17 35%	3 30%	10 30%	10 38%
ALWAYS	27 46%	595 51%		10 56%	4 36%	8 50%	5 38%	13 34%					3 75%	2 50%	19 53%	8 35%	23 48%	3 30%	18 55%	9 35%
#ALWAYS + USUALLY (NET)	47 80%	915 79%	1 100%	14 78%	8 73%	14 88%	10 77%	29 76%	1 100%				4 100%	4 100%	29 81%	18 78%	40 83%	6 60%	28 85%	19 73%
TOP BOX SCORE	27 46%	595 51%		10 56%	4 36%	8 50%	5 38%	13 34%					3 75%	2 50%	19 53%	8 35%	23 48%	3 30%	18 55%	9 35%
NOT ANSWERED	1	33					1	1							1	1		1		
VALID CASES	59	1158	1	18	11	16	13	38	1	1		4	4	36	23	48	10	33	26	
NUMBER OF RESPONDENTS	60	1191	1	18	11	16	14	39	1	1		4	4	36	24	49	10	34	26	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC			
Q41 WORST PERSONAL DOCTOR POSSIBLE	9	0.2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~			
01	6	0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~			
02	7	0.2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~			
03	14	0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~			
04	5	2%	~	~	1	2	2	3	~	~	~	~	~	2	2	3	5	~			
05	6	3%	~	~	3	2	1	2	~	1	~	~	~	4	2	6	3	3			
06	5	2%	~	2	3	~	~	3	~	~	~	1	1	2	3	2	3	4	1		
07	17	7%	~	2	3	6	6	8	1	1	~	~	1	3	9	8	13	4	10	7	
08	37	16%	50%	1	7	7	11	11	21	1	3	~	~	2	2	21	16	31	6	27	10
09	44	19%	50%	1	8	9	17	9	24	3	1	~	~	3	1	25	17	38	4	35	9
BEST PERSONAL DOCTOR POSSIBLE	121	51%	~	20	32	37	32	64	4	3	2	1	10	14	60	59	115	6	90	31	
#8-10 (NET)	202	86%	100%	2	35	48	65	52	109	8	7	2	1	15	17	106	92	184	16	152	50
				~	90%	83%	87%	85%	87%	89%	78%	100%	100%	88%	81%	86%	86%	88%	70%	87%	82%

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC		
9-10 (NET)	165 70%	2937 69%	1 50%~	28 72%~	41 71%	54 72%	41 67%	88 70%	7 78%~	4 44%~	2 100%~	1 100%~	13 76%~	15 71%~	85 69%	76 71%	153 74%~	10 43%~	125 72%	40 66%
NOT ANSWERED	8	228		1	2	2	3	2					1	4	2	4	2	7	1	
VALID CASES	235	4241	2	39	58	75	61	125	9	9	2	1	17	21	123	107	208	23	174	61
NUMBER OF RESPONDENTS	243 100%	4469 100%	2 100%	40 100%	60 100%	77 100%	64 100%	127 100%	9 100%	9 100%	2 100%	1 100%	17 100%	22 100%	127 100%	109 100%	212 100%	25 100%	181 100%	62 100%
MEAN	8.94	8.89	8.50	9.08	8.88	8.95	8.92	8.96	9.11	8.33	10.0	10.0	9.18	9.14	8.91	9.00	9.06	8.26	8.97	8.87
p stat_(*=Sig @ p<=.05)		.495	~	~	.712	.964	.891	.826	~	~	~	~	~	~	.741	.565	~	~	.654	.654

[ASKED IF Q30 = YES]

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12 13 AND OVER	BLCK OR AFR-	AMER IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q42 YES	54 23%	1024 24%	5 ~ 13%	13 ~ 22%	18 24%	18 29%	31 25%	3 33%	2 22%		2 ~ 13%	8 36%	22 18%*	32 30%*	42 20%~	12 48%~	13 7%*	41 67%*		
NO	184 77%	3250 76%	2 100%~	34 87%~	46 78%	58 76%	44 71%	95 75%	6 67%	7 78%	2 100%~	1 100%~	14 87%~	14 64%~	103 82%*	76 70%*	167 80%~	13 52%~	164 93%*	20 33%*
NOT ANSWERED	5	195	1	1	1	2	1				1		2	1	3		4	1		
VALID CASES	238	4274	2	39	59	76	62	126	9	9	2	1	16	22	125	108	209	25	177	61
NUMBER OF RESPONDENTS	243 100%	4469 100%	2 100%	40 100%	60 100%	77 100%	64 100%	127 100%	9 100%	9 100%	2 100%	1 100%	17 100%	22 100%	127 100%	109 100%	212 100%	25 100%	181 100%	62 100%

[ASKED IF Q30 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q43 #YES	48 91%	896 89%	3 ~ 60%	11 ~ 85%	17 ~ 100%	17 ~ 94%	26 84%	3 100%	2 100%			2 ~ 100%	8 ~ 100%	18 86%	30 94%	37 90%	11 92%	11 85%	37 93%
NO	5 9%	110 11%	2 ~ 40%	2 ~ 15%		1 ~ 6%	5 16%							3 14%	2 6%	4 10%	1 8%	2 15%	3 7%
NOT ANSWERED	1	35			1									1		1			1
VALID CASES	53	1006	5	13	17	18	31	3	2			2	8	21	32	41	12	13	40
NUMBER OF RESPONDENTS	54	1041	5	13	18	18	31	3	2			2	8	22	32	42	12	13	41
	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q44 #YES	42 81%	836 84%	3 ~ 60%~	7 54%~	16 100%~	16 89%~	21 70%~	3 100%~	1 50%~			2 ~ 100%~	8 100%~	16 80%~	26 81%~	35 88%~	7 58%~	9 75%~	33 83%~
NO	10 19%	163 16%	2 ~ 40%~	6 46%~		2 ~ 11%~	9 30%~	1 ~ 50%~						4 20%~	6 19%~	5 12%~	5 42%~	3 25%~	7 17%~
NOT ANSWERED	2	41				2	1							2		2		1	1
VALID CASES	52	1000	5	13	16	18	30	3	2			2	8	20	32	40	12	12	40
NUMBER OF RESPONDENTS	54	1041	5	13	18	18	31	3	2			2	8	22	32	42	12	13	41
	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]



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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q45 YES	45 16%	774 15%	1 50%~	8 17%~	10 14%	11 12%	15 19%	27 18%	4 ~ 25%~	~	4 ~ 17%~	4 15%~	21 15%	23 17%	34 14%~	10 34%~	25 11%*	20 30%*		
NO	240 84%	4257 85%	1 50%~	39 83%~	61 86%	77 88%	62 81%	120 82%	10 100%~	12 75%~	2 100%~	2 100%~	20 83%~	22 85%~	122 85%	112 83%	216 86%~	19 66%~	193 89%*	47 70%*
NOT ANSWERED	23	332		5	4	6	8	1				1		1	1	2		23		
VALID CASES	285	5031	2	47	71	88	77	147	10	16	2	2	24	26	143	135	250	29	218	67
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q46 NEVER	8 19%	73 10%	~ 25%	11%	1	1	4	5	1	~ 25%	~	~	~ 50%	2	2	6	8	~ 24%	6	2	11%
SOMETIMES	7 16%	115 16%	~ 13%	22%	2	2	2	4	~	~	~	~ 25%	1	2	5	5	2	16%	2	5	28%
USUALLY	12 28%	209 28%	~ 13%	22%	1	2	4	5	3	~ 75%	~	~ 50%	2	4	7	7	5	22%	5	7	39%
ALWAYS	16 37%	340 46%	100%	50%	4	4	3	10	~	~	~	~ 25%	1	2	4	12	3	38%	12	4	22%
#ALWAYS + USUALLY (NET)	28 65%	549 75%	100%	63%	5	6	8	16	3	~ 75%	~	~ 75%	3	2	11	19	8	59%	17	11	61%
TOP BOX SCORE	16 37%	340 46%	100%	50%	4	4	3	10	~	~	~	~ 25%	1	2	4	12	3	38%	12	4	22%
NOT ANSWERED	2	29			1		1	2						1	1	2					2
VALID CASES	43	737	1	8	9	11	14	25	4			4	4	20	22	32	10		25	18	
NUMBER OF RESPONDENTS	45	766	1	8	10	11	15	27	4			4	4	21	23	34	10		25	20	
	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%		100%	100%	

[ASKED IF Q45 = YES]

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q47 NONE	5 12%	67 9%	~	13%	11%	9%	14%	3 12%	~	~	~	~	25%	25%	10%	14%	4 13%	1 10%	4 16%	1 6%
1 SPECIALIST	21 49%	450 61%	100%	50%	56%	55%	36%	12 48%	~	2 50%	~	~	25%	50%	55%	41%	17 53%	4 40%	15 60%	6 33%
2	11 26%	144 19%	~	13%	22%	27%	36%	6 24%	~	1 25%	~	~	25%	25%	20%	32%	8 25%	2 20%	5 20%	6 33%
3	3 7%	48 6%	~	~	11%	9%	7%	2 8%	~	~	~	~	25%	~	10%	5%	1 3%	2 20%	~	3 17%
4	1 2%	10 1%	~	~	~	~	7%	~	~	1 25%	~	~	~	~	~	5%	~	1 10%	~	1 6%
5 OR MORE SPECIALISTS	2 5%	23 3%	~	25%	~	~	~	2 8%	~	~	~	~	~	~	5%	5%	2 6%	~	1 4%	1 6%
NOT ANSWERED	2	25			1	1	2							1	1		2			2
VALID CASES	43	741	1	8	9	11	14	25		4			4	4	20	22	32	10	25	18
NUMBER OF RESPONDENTS	45	766	1	8	10	11	15	27		4			4	4	21	23	34	10	25	20
	100%	100%	100%	100%	100%	100%	100%	100%		100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AMER AMER IAN	NATV HAW/ ILND	AMER IND/ NATV	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q48 WORST SPECIALIST POSSIBLE		1 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
01		2 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
02		1 0.2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
03	1 3%	8 1%	~	1 14%	~	~	~	1 5%	~	~	~	~	~	1 6%	1 4%	~	1 5%	~		
04	3 8%	17 3%	~	~	1 13%	1 10%	1 9%	2 9%	~	1 33%	~	~	~	2 11%	2 7%	1 11%	1 5%	2 12%		
05		11 2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
06	2 5%	29 4%	~	~	1 13%	1 10%	~	2 9%	~	~	~	~	~	2 11%	1 4%	1 11%	1 5%	1 6%		
07	5 14%	71 11%	~	1 14%	~	1 10%	3 27%	2 9%	~	1 33%	~	1 33%	~	1 6%	4 22%	3 11%	1 11%	2 10%	3 18%	
08	6 16%	106 16%	~	2 29%	2 25%	~	2 18%	3 14%	~	1 33%	~	~	1 33%	1 22%	4 18%	2 11%	3 33%	3 15%	3 18%	
09	8 22%	148 22%	1 22%	2 100%	~	2 29%	~	4 40%	1 9%	5 23%	~	~	~	8 44%	~	6 22%	2 22%	6 30%	2 12%	
BEST SPECIALIST POSSIBLE	12 32%	278 41%	~	1 14%	4 50%	3 30%	4 36%	7 32%	~	~	~	~	1 33%	2 67%	5 28%	7 39%	11 41%	1 11%	6 30%	6 35%

Continued

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

	AGE							RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR AFR-	AMER AS- IAN	NATV HAW/ ILND	AMER IND/ NATV	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
#8-10 (NET)	26 70%	532 79%	1 100%	5 71%	6 75%	7 70%	7 64%	15 68%	1 33%			2 67%	3 100%	17 94%	9 50%	20 74%	6 67%	15 75%	11 65%
9-10 (NET)	20 54%	426 63%	1 100%	3 43%	4 50%	7 70%	5 45%	12 55%				1 33%	2 67%	13 72%	7 39%	17 63%	3 33%	12 60%	8 47%
NOT ANSWERED	1	10					1		1					1	1		1		
VALID CASES	37	672	1	7	8	10	11	22	3			3	3	18	18	27	9	20	17
NUMBER OF RESPONDENTS	38	682	1	7	8	10	12	22	4			3	3	18	19	28	9	21	17
	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%
MEAN	8.16	8.61	9.00	7.71	8.25	8.30	8.18	8.00	6.33			8.33	9.33	8.94	7.61	8.37	7.67	8.25	8.06
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER PAC ALSK	IND/ OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q49 YES	81 29%	1285 26%	2 100%~	14 30%~	18 26%	28 32%	19 25%	40 28%	3 33%~	3 20%~	1 ~	11 50%~	6 44%~	23%~	47 33%	33 25%	74 30%~	6 21%~	63 29%	18 28%
NO	199 71%	3691 74%		33 ~ 70%~	51 74%	59 68%	56 75%	105 72%	6 67%~	12 80%~	2 100%~	1 50%~	14 56%~	20 77%~	95 67%	99 75%	171 70%~	23 79%~	152 71%	47 72%
NOT ANSWERED	28	387		5	6	7	10	2	2	1					2	4	7		26	2
VALID CASES	280	4976	2	47	69	87	75	145	9	15	2	2	25	26	142	132	245	29	215	65
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q50 NEVER	2 2%	37 3%	~	~	11%~	~	~	3%~	~	~	~	100%~	~	~	6%~	3%~	~	3%~	~	
SOMETIMES	19 24%	235 20%	100%~	14%~	22%~	21%~	28%~	23%~	33%~	67%~	~	27%~	33%~	20%~	27%~	21%~	67%~	24%~	22%~	
USUALLY	22 27%	343 30%	~	29%~	22%~	29%~	33%~	31%~	33%~	33%~	~	9%~	17%~	28%~	27%~	27%~	33%~	24%~	39%~	
ALWAYS	37 46%	547 47%	~	57%~	44%~	50%~	39%~	44%~	33%~	~	~	64%~	50%~	52%~	39%~	49%~	~	48%~	39%~	
#ALWAYS + USUALLY (NET)	59 74%	890 77%	~	86%~	67%~	79%~	72%~	74%~	67%~	33%~	~	73%~	67%~	80%~	67%~	77%~	33%~	73%~	78%~	
TOP BOX SCORE	37 46%	547 47%	~	57%~	44%~	50%~	39%~	44%~	33%~	~	~	64%~	50%~	52%~	39%~	49%~	~	48%~	39%~	
NOT ANSWERED	1	42					1	1						1				1		
VALID CASES	80	1162	2	14	18	28	18	39	3	3		1	11	6	46	33	73	6	62	18
NUMBER OF RESPONDENTS	81	1204	2	14	18	28	19	40	3	3		1	11	6	47	33	74	6	63	18
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q51 NEVER	1 1%	21 2%	~	~	1 6%	~	~	1 3%	~	~	~	~	~	~	~	1 17%	1 2%	~		
SOMETIMES	9 11%	81 7%	1 50%	1 7%	3 17%	2 7%	2 11%	3 8%	~	~	~	1 9%	3 50%	5 11%	4 12%	9 12%	7 11%	2 11%		
USUALLY	22 27%	289 25%	~	4 29%	2 11%	9 32%	7 39%	10 26%	2 67%	3 100%	~	~	1 9%	12 26%	10 30%	19 26%	3 50%	16 26%	6 33%	
ALWAYS	48 60%	768 66%	1 50%	9 64%	12 67%	17 61%	9 50%	25 64%	1 33%	~	~	1 100%	9 82%	3 50%	29 63%	19 58%	45 62%	2 33%	38 61%	10 56%
#ALWAYS + USUALLY (NET)	70 88%	1057 91%	1 50%	13 93%	14 78%	26 93%	16 89%	35 90%	3 100%	3 100%	~	1 100%	10 91%	3 50%	41 89%	29 88%	64 88%	5 83%	54 87%	16 89%
TOP BOX SCORE	48 60%	768 66%	1 50%	9 64%	12 67%	17 61%	9 50%	25 64%	1 33%	~	~	1 100%	9 82%	3 50%	29 63%	19 58%	45 62%	2 33%	38 61%	10 56%
NOT ANSWERED	1	44				1	1						1		1		1			
VALID CASES	80	1160	2	14	18	28	18	39	3	3		1	11	6	46	33	73	6	62	18
NUMBER OF RESPONDENTS	81	1204	2	14	18	28	19	40	3	3		1	11	6	47	33	74	6	63	18
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]



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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q52 YES	95 34%	1790 36%	16 ~	22 35%~	34 31%	23 40%	32%	46 32%	4 44%~	1 7%~	1 100%~	1 50%~	9 38%~	8 31%~	58 41%*	35 27%*	86 35%~	6 21%~	75 35%	20 31%
NO	182 66%	3138 64%	2 100%~	30 65%~	48 69%	52 60%	68%	98 68%	5 56%~	14 93%~	1 ~	1 50%~	15 63%~	18 69%~	82 59%*	96 73%*	158 65%~	22 79%~	138 65%	44 69%
NOT ANSWERED	31	435	6	5	8	12	3	2	1	1		1		4	5	8	1	28	3	
VALID CASES	277	4928	2	46	70	86	73	144	9	15	1	2	24	26	140	131	244	28	213	64
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC	
PQ53 NEVER	1 0.4%	64 1%*	~	~	1%~	~	~	0.7%~	~	~	~	~	~	~	~	0.7%	~	0.4%~	~	0.5%~	~
SOMETIMES	17 6%	317 6%	~	3%~	5%~	5%~	4%~	4%~	1%~	1%~	~	1%~	1%~	3%~	10%~	6%~	15%~	1%~	14%~	3%~	5%~
USUALLY	32 12%	629 13%	~	11%~	8%~	14%~	5%~	18%~	~	~	~	~	3%~	2%~	21%~	11%~	28%~	3%~	25%~	7%~	11%~
ALWAYS	222 82%	3884 79%	100%~	82%~	54%~	66%~	63%~	119%~	7%~	14%~	1%~	1%~	20%~	20%~	105%~	113%~	196%~	24%~	169%~	53%~	84%~
#ALWAYS + USUALLY (NET)	254 93%	4513 92%	100%~	93%~	62%~	80%~	68%~	137%~	7%~	14%~	1%~	1%~	23%~	22%~	126%~	124%~	224%~	27%~	194%~	60%~	95%~
TOP BOX SCORE	222 82%	3884 79%	100%~	82%~	54%~	66%~	63%~	119%~	7%~	14%~	1%~	1%~	20%~	20%~	105%~	113%~	196%~	24%~	169%~	53%~	84%~
NOT ANSWERED	5	91	~	1	2	1	1	2	1	~	~	~	~	1	3	1	4	~	4	1	~
VALID CASES	272	4894	2	45	68	85	72	142	8	15	1	2	24	25	137	130	240	28	209	63	~
NUMBER OF RESPONDENTS	277 100%	4985 100%	2 100%	46 100%	70 100%	86 100%	73 100%	144 100%	9 100%	15 100%	1 100%	2 100%	24 100%	26 100%	140 100%	131 100%	244 100%	28 100%	213 100%	64 100%	~

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHTE	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q54 WORST HEALTH PLAN POSSIBLE	2	24			1	1				1		1	2		1	1	1	1		
	0.7%	0.5%	~	~	1%	1%	~	~	~	~ 50%	~	4%	~ 2%	~	0.4%	4%	0.5%	1%		
01		11	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
		0.2%																		
02	2	31			1	1	2						2	2			2			
	0.7%	0.6%	~	~	~ 1%	1%	1%	~	~	~	~	~	~ 2%	0.8%	~	~	0.9%	~		
03	3	38			2	1	1				1	1	1	3			2	1		
	1%	0.8%	~	~	3%	~ 1%	0.7%	~	~	~	4%	~	0.7%	0.8%	1%	~	0.9%	1%		
04	2	60				2	2						2	1	1			2		
	0.7%	1%	~	~	~	3%	1%	~	~	~	~	~	~ 2%	0.4%	4%	~	3%	~		
05	9	233			4	1	4	6	1			1	4	4	7	2	7	2		
	3%	5%	~	~	6%	1%	5%	4%	~ 7%	~	~	~ 4%	3%	3%	3%	7%	3%	3%		
06	9	215		1	4	3	1	2	1			3	6	3	6	3	3	6		
	3%	4%	~	2%	6%	3%	1%	1%	~ 7%	~	~	~ 12%	4%	2%	2%	11%	1%	9%		
07	22	490	2	3	2	10	5	13	2	2		2	7	15	19	3	13	9		
	8%	10%	100%	7%	3%	11%	7%	9%	22%	13%	~	~	8%	5%	11%	8%	11%	6%	13%	
08	50	940		6	10	17	17	19	3	5		8	9	22	28	42	6	35	15	
	18%	19%	~	14%	14%	20%	23%	13%	33%	33%	~	~ 33%	35%	16%	21%	17%	21%	17%	22%	
09	53	878		12	12	19	10	35	3			4	1	26	25	48	3	44	9	
	19%	18%	~	27%	17%	22%	13%	24%	~ 20%	~	~	~ 17%	4%	18%	19%	19%	11%	21%	13%	
BEST HEALTH PLAN POSSIBLE	127	2014		22	36	35	34	66	4	3	2	1	11	9	75	51	118	9	105	22
	46%	41%	~	50%	51%	40%	45%	45%	44%	20%	100%	50%	46%	35%	53%	38%	48%	32%	50%	33%
#8-10 (NET)	230	3832		40	58	71	61	120	7	11	2	1	23	19	123	104	208	18	184	46
	82%	78%	~	91%	82%	82%	81%	82%	78%	73%	100%	50%	96%	73%	87%	78%	84%	64%	87%	69%

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR AFR-	AMR AS-	NATV HAW/ PAC	AMR IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
9-10 (NET)	180 65%	2892 59%*	~	34 77%~	48 68%	54 62%	44 59%	101 69%	4 44%~	6 40%~	2 100%~	1 50%~	15 63%~	10 38%~	101 72%*	76 57%*	166 67%~	12 43%~	149 70%*	31 46%*
NOT ANSWERED	29	430		8	4	7	10	1	2	1			1		3	3	5	1	29	
VALID CASES	279	4933	2	44	71	87	75	146	9	15	2	2	24	26	141	133	247	28	212	67
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%
MEAN	8.68	8.49	7.00	9.16	8.62	8.64	8.53	8.73	8.67	8.13	10.0	5.00	8.88	8.00	8.99	8.40	8.78	7.79	8.87	8.07
p stat_(*=Sig @ p<=.05)		.025*	~	~	.775	.831	.431	.587	~	~	~	~	~	~	~.003*	.013*	~	~	~.004*	.004*

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC	
Q55 YES	113 41%	2010 40%	2 100%	18 40%	25 36%	34 39%	34 46%	64 44%	6 60%	5 33%	1 50%	1 50%	9 38%	8 31%	49 35%*	64 48%*	98 40%	15 54%	66 31%*	47 71%*
NO	166 59%	2973 60%		27 ~ 60%	45 64%	54 61%	40 54%	81 56%	4 40%	10 67%	1 50%	1 50%	15 63%	18 69%	92 65%*	69 52%*	149 60%	13 46%	147 69%*	19 29%*
NOT ANSWERED	29	380		7	5	6	11	2	1	1			1		3	3	5	1	28	1
VALID CASES	279	4983	2	45	70	88	74	145	10	15	2	2	24	26	141	133	247	28	213	66
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q56 NEVER	1 0.9%	30 1%		1 6%~									1 2%~		1 1%~		1 2%~			
SOMETIMES	11 10%	187 9%	1 50%~	1 6%~	3 12%~	4 12%~	2 6%~	6 9%~					2 16%~	3 5%~	8 8%~	3 20%~	6 9%~	5 11%~		
USUALLY	25 22%	459 23%		3 17%~	4 16%~	10 29%~	8 24%~	8 12%~	2 33%~	2 40%~			3 33%~	3 43%~	13 27%~	12 19%~	20 21%~	5 33%~	15 23%~	10 21%~
ALWAYS	75 67%	1338 66%	1 50%~	13 72%~	18 72%~	20 59%~	23 70%~	50 78%~	4 67%~	3 60%~	1 100%~	1 100%~	6 67%~	2 29%~	27 55%~	48 76%~	68 70%~	7 47%~	43 66%~	32 68%~
#ALWAYS + USUALLY (NET)	100 89%	1797 89%	1 50%~	16 89%~	22 88%~	30 88%~	31 94%~	58 91%~	6 100%~	5 100%~	1 100%~	1 100%~	9 100%~	5 71%~	40 82%~	60 95%~	88 91%~	12 80%~	58 89%~	42 89%~
TOP BOX SCORE	75 67%	1338 66%	1 50%~	13 72%~	18 72%~	20 59%~	23 70%~	50 78%~	4 67%~	3 60%~	1 100%~	1 100%~	6 67%~	2 29%~	27 55%~	48 76%~	68 70%~	7 47%~	43 66%~	32 68%~
NOT ANSWERED	1	42					1						1		1		1			
VALID CASES	112	2014	2	18	25	34	33	64	6	5	1	1	9	7	49	63	97	15	65	47
NUMBER OF RESPONDENTS	113	2056	2	18	25	34	34	64	6	5	1	1	9	8	49	64	98	15	66	47
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC			
Q57 #YES	73 68%	1193 60%*	1 100%~	11 61%~	16 70%~	22 65%~	23 72%~	42 67%~	3 60%~	3 75%~	1 100%~	5 ~ 63%~	6 75%~	34 72%~	39 64%~	62 66%~	11 79%~	39 62%~	34 76%~	
NO	35 32%	793 40%*		7 ~ 39%~	7 30%~	12 35%~	9 28%~	21 33%~	2 40%~	1 25%~		1 ~ 100%~	3 38%~	2 25%~	13 28%~	22 36%~	32 34%~	3 21%~	24 38%~	11 24%~
NOT ANSWERED	5	70	1		2		2	1	1	1			1		2	3	4	1	3	2
VALID CASES	108	1986	1	18	23	34	32	63	5	4	1	1	8	8	47	61	94	14	63	45
NUMBER OF RESPONDENTS	113	2056	2	18	25	34	34	64	6	5	1	1	9	8	49	64	98	15	66	47
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR	AS- IAN	NATV ILND	AMER PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
Q57A YES	208 76%	3840 79%	2 100%~	21 47%~	53 77%	73 85%*	59 81%	106 73%	8 89%~	13 87%~	1 50%~	2 100%~	17 74%~	19 73%~	109 78%	97 73%	183 75%~	22 79%~	158 76%	50 76%
NO	67 24%	1039 21%		24 ~ 53%~	16 23%	13 15%*	14 19%	39 27%	1 11%~	2 13%~	1 50%~		6 ~ 26%~	7 27%~	30 22%	35 27%	61 25%~	6 21%~	51 24%	16 24%
NOT ANSWERED	33	484		7	6	8	12	2	2	1			2		5	4	8	1	32	1
VALID CASES	275	4879	2	45	69	86	73	145	9	15	2	2	23	26	139	132	244	28	209	66
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q57B NEVER	47 33%	674 30%	1 100%	7 41%	13 28%	11 26%	15 41%	20 31%	1 20%	1 17%	1 50%	7 54%	5 29%	27 35%	19 31%	41 33%	6 33%	36 32%	11 34%	
SOMETIMES	26 18%	430 19%	~	1 6%	10 22%	8 19%	7 19%	11 17%	2 33%	1 100%	~	~	6 35%	14 18%	10 16%	21 17%	4 22%	21 19%	5 16%	
USUALLY	32 22%	488 22%	~	3 18%	11 24%	13 30%	5 14%	15 23%	1 20%	2 33%	~	5 38%	4 24%	16 21%	16 26%	29 24%	3 17%	26 23%	6 19%	
ALWAYS	39 27%	667 30%	~	6 35%	12 26%	11 26%	10 27%	19 29%	3 60%	1 17%	~	1 50%	1 8%	2 12%	21 27%	17 27%	32 26%	5 28%	29 26%	10 31%
#ALWAYS + USUALLY (NET)	71 49%	1154 51%	~	9 53%	23 50%	24 56%	15 41%	34 52%	4 80%	3 50%	~	1 50%	6 46%	6 35%	37 47%	33 53%	61 50%	8 44%	55 49%	16 50%
TOP BOX SCORE	39 27%	667 30%	~	6 35%	12 26%	11 26%	10 27%	19 29%	3 60%	1 17%	~	1 50%	1 8%	2 12%	21 27%	17 27%	32 26%	5 28%	29 26%	10 31%
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	136	2651	1	29	22	45	39	80	5	10	1	11	9	63	72	124	11	101	35	
NOT ANSWERED	28	454		6	7	6	9	2	1			1		3	2	5		28		
VALID CASES	144	2258	1	17	46	43	37	65	5	6	1	2	13	17	78	62	123	18	112	32
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q57C YES	64 24%	1026 21%	1 50%~	8 19%~	17 25%	25 29%	13 18%	35 24%	3 27%~	1 ~ 50%~	8 ~ 33%~	5 23%~	33 25%	30 23%	57 24%~	6 21%~	39 19%*	25 38%*		
NO	206 76%	3791 79%	1 50%~	35 81%~	52 75%	60 71%	58 82%	109 76%	8 73%~	15 100%~	1 50%~	2 100%~	16 67%~	17 77%~	101 75%	103 77%	183 76%~	22 79%~	165 81%*	41 62%*
NOT ANSWERED	38	546		9	6	9	14	3		1		1	4	10	3	12	1	37	1	
VALID CASES	270	4817	2	43	69	85	71	144	11	15	2	2	24	22	134	133	240	28	204	66
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q57D #YES	56 88%	865 87%	1 100%	7 87%	16 94%	20 80%	12 92%	30 86%	2 67%	1 ~100%		8 ~100%	5 ~100%	29 88%	26 87%	49 86%	6 100%	32 82%	24 96%
NO	8 12%	124 13%		1 ~13%	1 6%	5 20%	1 8%	5 14%	1 33%					4 12%	4 13%	8 14%		7 18%	1 4%
NOT ANSWERED		6																	
VALID CASES	64	990	1	8	17	25	13	35	3	1		8	5	33	30	57	6	39	25
NUMBER OF RESPONDENTS	64 100%	996 100%	1 100%	8 100%	17 100%	25 100%	13 100%	35 100%	3 100%	1 100%		8 100%	5 100%	33 100%	30 100%	57 100%	6 100%	39 100%	25 100%

[ASKED IF Q57C = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q57E #YES	56 88%	853 87%	1 100%	8 100%	14 82%	21 84%	12 92%	32 91%	2 67%	1 100%	8 100%	4 80%	30 91%	26 87%	50 88%	5 83%	32 82%	24 96%	
NO	8 12%	127 13%	~	~	3 18%	4 16%	1 8%	3 9%	1 33%	~	~	~	1 20%	3 9%	4 13%	7 12%	1 17%	7 18%	1 4%
NOT ANSWERED		15																	
VALID CASES	64	981	1	8	17	25	13	35	3	1	8	5	33	30	57	6	39	25	
NUMBER OF RESPONDENTS	64 100%	996 100%	1 100%	8 100%	17 100%	25 100%	13 100%	35 100%	3 100%	1 100%	8 100%	5 100%	33 100%	30 100%	57 100%	6 100%	39 100%	25 100%	

[ASKED IF Q57C = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q57F NEVER	1 2%	20 2%	~	~	~	~	8%~	3%~	~	~	~	~	~	~	3%~	1	2%~	~	4%~
SOMETIMES	7 11%	89 9%	~	~	2 12%~	3 13%~	2 17%~	4 11%~	~	~	~	~	1 25%~	3 9%~	3 10%~	4	3 50%~	5 14%~	2 8%~
USUALLY	17 27%	244 25%	~	~	3 18%~	9 38%~	5 42%~	8 23%~	1 33%~	~	~	5 63%~	~	11 34%~	6 21%~	16	1 17%~	10 27%~	7 28%~
ALWAYS	37 60%	624 64%	100%~	8 100%~	12 71%~	12 50%~	4 33%~	22 63%~	2 67%~	1 ~100%~	~	3 ~38%~	3 75%~	18 56%~	19 66%~	34	2 33%~	22 59%~	15 60%~
#ALWAYS + USUALLY (NET)	54 87%	868 89%	100%~	8 100%~	15 88%~	21 87%~	9 75%~	30 86%~	3 100%~	1 ~100%~	~	8 ~100%~	3 75%~	29 91%~	25 86%~	50	3 50%~	32 86%~	22 88%~
TOP BOX SCORE	37 60%	624 64%	100%~	8 100%~	12 71%~	12 50%~	4 33%~	22 63%~	2 67%~	1 ~100%~	~	3 ~38%~	3 75%~	18 56%~	19 66%~	34	2 33%~	22 59%~	15 60%~
NOT ANSWERED	2	20				1	1						1	1	1	2		2	
VALID CASES	62	976	1	8	17	24	12	35	3	1	8	4	32	29	55	6	37	25	
NUMBER OF RESPONDENTS	64	996	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q57C = YES]

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER							
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC			
Q57G NEVER	1 2%	39 4%	~	~	~	4%	~	~	~	~	~	~	~	~	3%	~	1	2%	~	1	3%	~	
SOMETIMES	4 6%	87 9%	~	25%	~	4%	8%	2	~	~	~	~	~	~	12%	~	1	3	50%	3	8%	1	4%
USUALLY	20 31%	248 25%	~	25%	35%	32%	31%	10	~	~	~	5	63%	~	33%	8	18	2	32%	33%	12	8	32%
ALWAYS	39 61%	607 62%	100%	50%	65%	60%	62%	23	3	~	1	3	5	17	22	37	1	65%	17%	23	16	59%	64%
#ALWAYS + USUALLY (NET)	59 92%	855 87%	100%	75%	100%	92%	92%	33	3	~	1	8	5	28	30	55	3	96%	50%	35	24	90%	96%
TOP BOX SCORE	39 61%	607 62%	100%	50%	65%	60%	62%	23	3	~	1	3	5	17	22	37	1	65%	17%	23	16	59%	64%
NOT ANSWERED		16																					
VALID CASES	64	980	1	8	17	25	13	35	3	~	1	8	5	33	30	57	6	100%	100%	39	25	100%	100%
NUMBER OF RESPONDENTS	64	996	1	8	17	25	13	35	3	~	1	8	5	33	30	57	6	100%	100%	39	25	100%	100%

[ASKED IF Q57C = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q57H NEVER	1 2%	18 2%		1 ~ 13%~											1 3%~		1 ~ 17%~		1 3%~	
SOMETIMES	5 8%	71 7%			2 ~ 12%~	2 8%~	1 8%~	2 6%~							4 12%~		2 4%~	3 50%~	4 10%~	1 4%~
USUALLY	13 20%	202 21%		2 ~ 25%~	3 18%~	6 24%~	2 15%~	6 17%~					3 ~ 38%~		8 24%~	5 17%~	12 21%~	1 17%~	7 18%~	6 24%~
ALWAYS	45 70%	690 70%	1 100%~	5 63%~	12 71%~	17 68%~	10 77%~	27 77%~	3 100%~		1 ~ 100%~		5 ~ 63%~	5 100%~	20 61%~	25 83%~	43 75%~	1 17%~	27 69%~	18 72%~
#ALWAYS + USUALLY (NET)	58 91%	892 91%	1 100%~	7 88%~	15 88%~	23 92%~	12 92%~	33 94%~	3 100%~		1 ~ 100%~		8 ~ 100%~	5 100%~	28 85%~	30 100%~	55 96%~	2 33%~	34 87%~	24 96%~
TOP BOX SCORE	45 70%	690 70%	1 100%~	5 63%~	12 71%~	17 68%~	10 77%~	27 77%~	3 100%~		1 ~ 100%~		5 ~ 63%~	5 100%~	20 61%~	25 83%~	43 75%~	1 17%~	27 69%~	18 72%~
NOT ANSWERED		16																		
VALID CASES	64	980	1	8	17	25	13	35	3		1		8	5	33	30	57	6	39	25
NUMBER OF RESPONDENTS	64	996	1	8	17	25	13	35	3		1		8	5	33	30	57	6	39	25
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q57C = YES]

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q58 EXCELLENT	102 36%	1951 39%	1 50%~	21 47%~	26 36%	27 31%	27 36%	54 37%	5 45%~	4 27%~	1 50%~	1 50%~	9 36%~	10 38%~	50 35%	51 38%	102 40%~	87 ~	15 22%*	
VERY GOOD	95 34%	1732 35%	1 50%~	15 33%~	23 32%	33 38%	23 31%	56 38%	4 36%~	6 40%~	1 50%~	1 50%~	8 32%~	7 27%~	44 31%	51 38%	95 38%~	77 ~	18 27%	
GOOD	55 20%	973 20%	~	5 11%~	15 21%	20 23%	15 20%	26 18%	2 18%~	2 13%~	~	~	6 24%~	5 19%~	29 20%	25 19%	55 22%~	38 ~	17 25%	
FAIR	29 10%	308 6%*	~	4 9%~	8 11%	7 8%	10 13%	11 7%	~	3 20%~	~	~	2 8%~	4 15%~	20 14%*	8 6%*	29 ~100%~	12 6%*	17 25%*	
POOR		13 0.3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
#EXCELLENT + VERY GOOD + GOOD (NET)	252 90%	4656 94%*	2 100%~	41 91%~	64 89%	80 92%	65 87%	136 93%	11 100%~	12 80%~	2 100%~	2 100%~	23 92%~	22 85%~	123 86%*	127 94%*	252 100%~	202 ~	50 75%*	
NOT ANSWERED	27	386		7	3	7	10			1					1	1		27		
VALID CASES	281	4977	2	45	72	87	75	147	11	15	2	2	25	26	143	135	252	29	214	67
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%



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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12 AND OVER	BLCK OR WHT	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	
Q59																				
EXCELLENT	130 46%	2270 46%	1 50%~	29 64%~	38 53%	32 36%*	30 40%	77 52%*	3 27%~	4 27%~	2 100%~	1 50%~	13 52%~	8 31%~	66 46%	62 46%	125 50%~	5 17%~	115 53%*	15 22%*
VERY GOOD	71 25%	1311 26%	1 50%~	11 24%~	16 22%	23 26%	20 27%	38 26%	4 36%~	5 33%~	~	1 50%~	6 24%~	6 23%~	33 23%	38 28%	68 27%~	3 10%~	55 26%	16 24%
GOOD	53 19%	923 19%	~	2 4%~	14 19%	22 25%	15 20%	19 13%*	3 27%~	6 40%~	~	~	3 12%~	8 31%~	28 19%	24 18%	42 17%~	10 34%~	36 17%	17 25%
FAIR	26 9%	400 8%	~	3 7%~	4 6%	11 13%	8 11%	12 8%	1 9%~	~	~	~	3 12%~	3 12%~	16 11%	10 7%	16 6%~	10 34%~	9 4%*	17 25%*
POOR	2 0.7%	72 1%	~	~	~	~	3 3%	1 0.7%	~	~	~	~	~	1 4%~	1 0.7%	1 0.7%	1 0.4%~	1 3%~	~	2 3%~
#EXCELLENT + VERY GOOD + GOOD (NET)	254 90%	4503 91%	2 100%~	42 93%~	68 94%	77 88%	65 87%	134 91%	10 91%~	15 100%~	2 100%~	2 100%~	22 88%~	22 85%~	127 88%	124 92%	235 93%~	18 62%~	206 96%*	48 72%*
NOT ANSWERED	26	387		7	3	6	10			1					1				26	
VALID CASES	282	4976	2	45	72	88	75	147	11	15	2	2	25	26	144	135	252	29	215	67
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC	
Q60 YES	65 23%	1132 23%		5 ~ 11%	16 ~ 23%	21 24%	23 31%	37 25%	4 36%	4 27%	1 ~ 50%	5 20%	5 19%	26 18%*	39 29%*	52 21%	13 46%	18 8%*	47 71%*	
NO	215 77%	3829 77%	2 100%	40 ~ 89%	55 ~ 77%	67 76%	51 69%	109 75%	7 64%	11 73%	2 ~ 100%	1 50%	20 80%	21 81%	116 82%*	96 71%*	199 79%	15 54%	196 92%*	19 29%*
NOT ANSWERED	28	401		7	4	6	11	1		1				2	1	1	1	27	1	
VALID CASES	280	4962	2	45	71	88	74	146	11	15	2	2	25	26	142	135	251	28	214	66
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q61 YES	49 77%	857 79%	2 ~ 40%~	10 63%~	17 85%~	20 87%~	29 78%~	4 100%~	3 75%~			3 ~ 75%~	5 100%~	15 60%~	34 87%~	40 78%~	9 69%~	5 29%~	44 94%~
NO	15 23%	234 21%	3 ~ 60%~	6 38%~	3 15%~	3 13%~	8 22%~	1 ~ 25%~		1 ~ 100%~	1 25%~			10 ~ 40%~	5 13%~	11 22%~	4 31%~	12 71%~	3 6%~
NOT ANSWERED	1	30			1						1			1		1		1	
VALID CASES	64	1091	5	16	20	23	37	4	4	1	4	5	25	39	51	13	17	47	
NUMBER OF RESPONDENTS	65	1121	5	16	21	23	37	4	4	1	5	5	26	39	52	13	18	47	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q60 = YES]

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q62 YES	44	763	1	8	15	20	27	3	3			2	4	12	32	35	9	44	
	94%	90%	~100%	80%	94%	100%	100%	75%	100%	~	~	67%	80%	86%	97%	92%	100%	~100%	
NO	3	83		2	1			1				1	1	2	1	3		3	
	6%	10%	~	20%	6%	~	~	25%	~	~	~	33%	20%	14%	3%	8%	~100%	~	
NOT ANSWERED	2	20	1		1		2							1	1	2		2	
VALID CASES	47	846	1	10	16	20	27	4	3			3	5	14	33	38	9	3	44
NUMBER OF RESPONDENTS	49	866	2	10	17	20	29	4	3			3	5	15	34	40	9	5	44
	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q60 = YES AND Q61 = YES]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHTA	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD POOR	NO CCC	CCC	
Q63 YES	36 13%	727 15%	~	2 5%~	8 11%	12 14%	14 19%	21 14%	1 10%~	2 13%~	~	~	2 9%~	5 20%~	11 8%*	25 19%*	23 9%~	13 45%~	2 0.9%*	34 53%*
NO	239 87%	4197 85%	100%~	2 95%~	42 89%	63 86%	73 81%	124 86%	9 90%~	13 87%~	2 100%~	2 100%~	20 91%~	20 80%~	128 92%*	108 81%*	221 91%~	16 55%~	209 99%*	30 47%*
NOT ANSWERED	33	439		8	4	9	12	2	1	1			3	1	5	3	8		30	3
VALID CASES	275	4924	2	44	71	85	73	145	10	15	2	2	22	25	139	133	244	29	211	64
NUMBER OF RESPONDENTS	308	5363	2	52	75	94	85	147	11	16	2	2	25	26	144	136	252	29	241	67
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q64 YES	32 89%	620 86%	2 ~100%	7 87%	12 100%	11 79%	18 86%	1 100%	2 100%	~	~	2 100%	5 100%	9 82%	23 92%	20 87%	12 92%	32 ~94%	
NO	4 11%	103 14%	~	1 13%	~	3 21%	3 14%	~	~	~	~	~	~	2 18%	2 8%	3 13%	1 8%	2 100%	2 6%
NOT ANSWERED		18																	
VALID CASES	36	723	2	8	12	14	21	1	2			2	5	11	25	23	13	2	34
NUMBER OF RESPONDENTS	36 100%	741 100%	2 100%	8 100%	12 100%	14 100%	21 100%	1 100%	2 100%			2 100%	5 100%	11 100%	25 100%	23 100%	13 100%	2 100%	34 100%

[ASKED IF Q63 = YES]

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q65 YES	31 100%	581 97%	2 ~100%	6 ~100%	12 ~100%	11 ~100%	18 ~100%	1 ~100%	2 ~100%			2 ~100%	5 ~100%	8 100%	23 100%	20 100%	11 ~100%		31 ~100%
NO		18 3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	1	12			1									1			1		1
VALID CASES	31	600		2	6	12	11	18	1	2			2	5	8	23	20	11	31
NUMBER OF RESPONDENTS	32	612		2	7	12	11	18	1	2			2	5	9	23	20	12	32
	100%	100%		100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q63 = YES AND Q64 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q66 YES	29 10%	575 12%		3 ~ 7%	8 11%	7 8%	11 15%	15 10%	2 ~ 13%			3 ~ 13%	5 19%	13 9%	16 12%	19 8%	10 36%	6 3%*	23 35%*	
NO	248 90%	4353 88%	2 100%	40 93%	63 89%	80 92%	63 85%	128 90%	11 100%	13 87%	2 100%	2 100%	21 88%	21 81%	128 91%	117 88%	229 92%	18 64%	205 97%*	43 65%*
NOT ANSWERED	31	435		9	4	7	11	4		1		1		3	3	4	1	30	1	
VALID CASES	277	4928	2	43	71	87	74	143	11	15	2	2	24	26	141	133	248	28	211	66
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%



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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q67 YES	21 75%	448 80%~	2 ~ 67%~	4 50%~	4 67%~	11 100%~	11 73%~	1 ~ 50%~			2 ~ 100%~	4 80%~	8 67%~	13 81%~	11 61%~	10 100%~		21 ~ 95%~
NO	7 25%	112 20%~	1 ~ 33%~	4 50%~	2 33%~		4 ~ 27%~	1 ~ 50%~				1 ~ 20%~	4 33%~	3 19%~	7 39%~		6 ~ 100%~	1 5%~
NOT ANSWERED	1	21			1					1			1		1			1
VALID CASES	28	560	3	8	6	11	15	2		2	5	12	16	18	10	6	22	
NUMBER OF RESPONDENTS	29	581	3	8	7	11	15	2		3	5	13	16	19	10	6	23	
	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q66 = YES]

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTH	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC
Q68 YES	21	439	2	4	4	11	11	1			2	4	8	13	11	10		21
	100%	97%	~100%	~100%	~100%	~100%	~100%	~100%	~	~	~100%	~100%	~100%	~100%	~100%	~100%	~	~100%
NO		14																
		3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		3																
VALID CASES	21	453	2	4	4	11	11	1			2	4	8	13	11	10		21
NUMBER OF RESPONDENTS	21	456	2	4	4	11	11	1			2	4	8	13	11	10		21
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%		100%

[ASKED IF Q66 = YES AND Q67 = YES]

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER				
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC			
Q69 YES	26 9%	459 9%	~	3 7%~	10 14%	7 8%	6 8%	12 8%	1 9%~	2 13%~	~	~	3 13%~	3 12%~	14 10%	12 9%	15 6%~	11 38%~	4 2%*	22 33%*	
NO	254 91%	4495 91%	100%~	2 93%~	42 86%	62 92%	80 92%	68 92%	135 92%	10 91%~	13 87%~	2 100%~	2 100%~	21 88%~	23 88%~	128 90%	123 91%	235 94%~	18 62%~	209 98%*	45 67%*
NOT ANSWERED	28	409		7	3	7	11			1			1		2	1	2			28	
VALID CASES	280	4954	2	45	72	87	74	147	11	15	2	2	24	26	142	135	250	29	213	67	
NUMBER OF RESPONDENTS	308	5363	2	52	75	94	85	147	11	16	2	2	25	26	144	136	252	29	241	67	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q70 YES	21 84%	314 71%	2 ~100%	7 70%	6 86%	6 100%	10 91%	1 100%	2 100%	~	~	2 67%	2 67%	10 77%	11 92%	12 86%	9 82%	21 95%	
NO	4 16%	129 29%	~	3 30%	1 14%	~	1 9%	~	~	~	~	1 33%	1 33%	3 23%	1 8%	2 14%	2 18%	3 100%	1 5%
NOT ANSWERED	1	20	1				1							1		1		1	
VALID CASES	25	442	2	10	7	6	11	1	2			3	3	13	12	14	11	3	22
NUMBER OF RESPONDENTS	26	462	3	10	7	6	12	1	2			3	3	14	12	15	11	4	22
	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q69 = YES]

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q71 YES	20 95%	260 95%	2 ~100%	7 ~100%	6 ~100%	5 83%	10 100%	1 100%	2 100%			1 50%	2 100%	10 100%	10 91%	11 92%	9 100%	20 ~95%	
NO	1 5%	14 5%	~	~	~	1 17%	~	~	~	~	~	1 50%	~	1 9%	1 8%	~	~	1 ~5%	
NOT ANSWERED		7																	
VALID CASES	21	274	2	7	6	6	10	1	2			2	2	10	11	12	9	21	
NUMBER OF RESPONDENTS	21 100%	281 100%	2 100%	7 100%	6 100%	6 100%	10 100%	1 100%	2 100%			2 100%	2 100%	10 100%	11 100%	12 100%	9 100%	21 100%	

[ASKED IF Q69 = YES AND Q70 = YES]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER				
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC				
Q72 YES	36 13%	722 15%		3 ~ 7%	3 4%*	16 19%	14 19%	18 12%	2 18%~						3 ~ 13%	6 23%~	16 11%	20 15%	25 10%~	11 38%~	4 2%*	32 48%*
NO	242 87%	4209 85%	2 100%~	42 93%~	68 96%*	70 81%	60 81%	129 88%	9 82%~	15 100%~	2 100%~	2 100%~	20 87%~	20 77%~	124 89%	115 85%	223 90%~	18 62%~	207 98%*	35 52%*		
NOT ANSWERED	30	432		7	4	8	11			1				2		4	1	4			30	
VALID CASES	278	4931	2	45	71	86	74	147	11	15	2	2	23	26	140	135	248	29	211	67		
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%		

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q73 YES	31	612	2	3	15	11	15	2				3	5	14	17	20	11	31	
	89%	90%	~ 67%	~ 100%	~ 100%	~ 79%	83%	~ 100%	~	~	~ 100%	83%	~ 93%	85%	~ 83%	~ 100%	~ 97%	~	
NO	4	68	1			3	3						1	1	3	4		3	1
	11%	10%	~ 33%	~	~	~ 21%	17%	~	~	~	~	~ 17%	7%	~ 15%	~ 17%	~ 100%	~ 3%	~	
NOT ANSWERED	1	39				1								1		1		1	
VALID CASES	35	680	3	3	15	14	18	2				3	6	15	20	24	11	3	32
NUMBER OF RESPONDENTS	36	719	3	3	16	14	18	2				3	6	16	20	25	11	4	32
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q72 = YES]

NQ74 WHAT IS YOUR CHILD'S AGE?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
NQ74 LESS THAN 1 YEAR OLD	2 0.6%	27 0.5%	2 100%	~	~	~	~	2 1%	~	~	~	~	~	~	1 0.7%	1 0.7%	2 0.8%	~	2 0.8%	~
1 TO 3 YEARS OLD	52 17%	890 17%	~	52 ~100%	~	~	~	25 17%	2 18%	3 19%	~	~	3 12%	4 15%	23 16%	22 16%	41 16%	4 14%	47 20%*	5 7%*
4 TO 7 YEARS OLD	75 24%	1394 26%	~	~	75 ~100%	~	~	45 31%*	3 27%	~	~	1 50%	6 24%	6 23%	39 27%	30 22%	64 25%	8 28%	62 26%	13 19%
8 TO 12 YEARS OLD	94 31%	1563 29%	~	~	~	94 ~100%	~	39 27%	4 36%	3 19%	1 50%	1 50%	7 28%	9 35%	48 33%	41 30%	80 32%	7 24%	71 29%	23 34%
13 OR OLDER	85 28%	1489 28%	~	~	~	85 ~100%	~	36 24%	2 18%	10 63%	1 50%	~	9 36%	7 27%	33 23%	42 31%	65 26%	10 34%	59 24%*	26 39%*
VALID CASES	308	5363	2	52	75	94	85	147	11	16	2	2	25	26	144	136	252	29	241	67
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%

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



NQ75 IS YOUR CHILD MALE OR FEMALE?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12 AND OVER	BLCK OR AFR-	AMER IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
NQ75																				
MALE	154 50%	2755 51%	1 50%	27 52%	35 47%	43 46%	48 56%	76 52%	9 82%	6 38%	2 100%	12 ~	10 48%	75 52%	67 49%	125 50%	18 62%	114 47%	40 60%	
FEMALE	154 50%	2608 49%	1 50%	25 48%	40 53%	51 54%	37 44%	71 48%	2 18%	10 63%	2 ~	13 100%	16 52%	69 48%	69 51%	127 50%	11 38%	127 53%	27 40%	
VALID CASES	308	5363	2	52	75	94	85	147	11	16	2	2	25	26	144	136	252	29	241	67
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%

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

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER				
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12 AND OVER	BLCK OR AFR-	AMER 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			
Q76																					
HISPANIC OR LATINO	144 51%	2091 42%*	1 50%~	23 51%~	39 57%	48 54%	33 44%	59 40%*	1 9%~	~	~	20 80%~	12 46%~	144 100%~	~	123 49%~	20 71%~	120 56%*	24 36%*		
NOT HISPANIC OR LATINO	136 49%	2832 58%*	1 50%~	22 49%~	30 43%	41 46%	42 56%	87 60%*	10 91%~	16 100%~	2 100%~	2 100%~	5 20%~	14 54%~	~	136 100%~	~	127 51%~	8 29%~	93 44%*	43 64%*
NOT ANSWERED	28	440		7	6	5	10	1								2	1	28			
VALID CASES	280	4923	2	45	69	89	75	146	11	16	2	2	25	26	144	136	250	28	213	67	
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%	

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

	AGE						RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q77.1 YES	170	3570	2	29	51	45	43	147					23	71	98	156	14	125	45	
	55%	67%*	100%~	56%	68%*	48%	51%	100%~	~	~	~	~	88%~	49%	72%*	62%*	48%~	52%*	67%*	
NO	138	1793		23	24	49	42		11	16	2	2	25	3	73	38	96	15	116	22
	45%	33%*	~	44%	32%*	52%	49%	~	100%~	100%~	100%~	100%~	100%~	12%~	51%	28%*	38%*	52%~	48%*	33%*
VALID CASES	308	5363	2	52	75	94	85	147	11	16	2	2	25	26	144	136	252	29	241	67
NUMBER OF RESPONDENTS	308	5363	2	52	75	94	85	147	11	16	2	2	25	26	144	136	252	29	241	67
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER				
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHTE	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
Q77.2 YES	22 7%	230 4%*	~	4 8%	4 5%	9 10%	5 6%	11 ~100%	~	~	~	~	11 ~ 42%	3 2%*	19 14%*	21 8%*	1 3%	14 6%	8 12%		
NO	286 93%	5133 96%*	100%~	2 92%	48 95%	71 90%	85 94%	147 100%	16 ~100%	2 100%	2 100%	25 100%	15 58%	141 98%*	117 86%*	231 92%*	28 97%	227 94%	59 88%		
VALID CASES	308	5363	2	52	75	94	85	147	11	16	2	2	25	26	144	136	252	29	241	67	
NUMBER OF RESPONDENTS	308 100%	5363 100%	100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%

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

	AGE							RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q77.3 YES	21 7%	201 4%*	~	4 8%	1 1%*	5 5%	11 13%*	~	16 ~100%~	~	~	~	5 ~19%~	2 1%*	19 14%*	16 6%	4 14%~	17 7%	4 6%	
NO	287 93%	5162 96%*	100%~	2 92%	48 99%*	74 95%	89 87%*	74 100%~	147 100%~	11 100%~	2 ~100%~	2 ~100%~	25 ~100%~	21 81%~	142 99%*	117 86%*	236 94%	25 86%~	224 93%	63 94%
VALID CASES	308	5363	2	52	75	94	85	147	11	16	2	2	25	26	144	136	252	29	241	67
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
Q77.4	HTS TOT CHLD																			
YES	3 1%	82 2%	~	~	~	1% 2%	~	~	~100%	~	~	4% 0.7%	1% 1%	2 0.8%	1 3%	0.8% 0.8%	2 99%	1 1%		
NO	305 99%	5281 98%	2 100%	52 100%	75 100%	93 99%	83 98%	147 100%	11 100%	16 100%	2 100%	25 100%	25 96%	143 99%	134 99%	250 99%	28 97%	239 99%	66 99%	
VALID CASES	308	5363	2	52	75	94	85	147	11	16	2	2	25	26	144	136	252	29	241	67
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV ILND	AMER ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q77.5 YES	7 2%	275 5%*	~	2%	1%	2%	4%	~	~	~	~100%	~	~19%	~0.7%	4%*	2%	3%~	2%	4%	
NO	301 98%	5088 95%*	100%~	98%~	99%	98%	96%	100%~	100%~	100%~	100%~	~	~100%	~81%	99%	96%*	98%	97%~	98%	96%
VALID CASES	308	5363	2	52	75	94	85	147	11	16	2	2	25	26	144	136	252	29	241	67
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV ILND	AMER PAC ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
Q77.6	HTS TOT CHLD																			
YES	35 11%	519 10%	4 ~	10 8%	11 13%	10 12%	~	~	~	~	25 ~100%	10 38%	28 19%*	7 5%*	31 12%	4 14%	28 12%	7 10%		
NO	273 89%	4844 90%	2 100%	48 92%	65 87%	83 88%	75 88%	147 100%	11 100%	16 100%	2 100%	2 100%	16 ~ 62%	116 81%*	129 95%*	221 88%	25 86%	213 88%	60 90%	
VALID CASES	308	5363	2	52	75	94	85	147	11	16	2	2	25	26	144	136	252	29	241	67
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%



Q78 WHAT IS YOUR AGE?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC	ALSK	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC	
Q78 UNDER 18	12 4%	223 5%		3 7%~	1 1%	7 8%	1 1%	4 3%	2 18%~	1 6%~				1 4%~	1 4%~	5 4%	7 5%	11 4%~		10 5%	2 3%
18 TO 24	14 5%	229 5%		7 16%~	4 6%	2 2%	1 1%*	5 3%	1 9%~	2 13%~					3 12%~	7 5%	7 5%	11 4%~	3 11%~	11 5%	3 5%
25 TO 34	82 30%	1610 33%	2 100%~	17 40%~	36 51%*	24 28%	3 4%*	53 37%*	2 18%~		1 50%~			9 36%~	7 27%~	48 35%	33 24%	77 31%~	5 18%~	69 33%*	13 20%*
35 TO 44	113 41%	1842 37%		14 33%~	22 31%*	39 45%	38 51%*	53 37%	5 45%~	5 31%~		1 50%~	11 44%~	11 42%~	66 47%*	46 34%*	99 40%~	14 50%~	88 42%	25 38%	
45 TO 54	43 16%	718 15%		1 2%~	6 8%*	12 14%	24 32%*	22 15%	1 9%~	8 50%~	1 50%~	1 50%~	3 12%~	1 4%~	12 9%*	31 23%*	37 15%~	5 18%~	25 12%*	18 27%*	
55 TO 64	7 3%	213 4%*			1 1%	2 2%	4 5%	3 2%						3 12%~	1 0.7%	5 4%	7 3%~		5 2%	2 3%	
65 TO 74	5 2%	77 2%			1 1%	1 1%	3 4%	4 3%					1 4%~			5 4%~	4 2%~	1 4%~	2 0.9%	3 5%	
75 OR OLDER	1 0.4%	15 0.3%		1 2%~				1 0.7%								1 0.7%	1 0.4%~		1 0.5%		
NOT ANSWERED	31	436		9	4	7	11	2							5	1	5	1	30	1	
VALID CASES	277	4927	2	43	71	87	74	145	11	16	2	2	25	26	139	135	247	28	211	66	
NUMBER OF RESPONDENTS	308	5363	2	52	75	94	85	147	11	16	2	2	25	26	144	136	252	29	241	67	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q79 ARE YOU MALE OR FEMALE?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12 AND OVER	BLCK OR AFR-	AMER IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q79																				
MALE	42 15%	657 13%		4 ~ 9%	12 17%	14 16%	12 16%	21 14%	5 ~ 31%			6 ~ 24%	5 19%	17 12%	25 18%	40 16%	1 4%	38 18%*	4 6%*	
FEMALE	240 85%	4307 87%	2 100%	41 91%	60 83%	75 84%	62 84%	126 86%	11 100%	11 69%	2 100%	2 100%	19 76%	21 81%	126 88%	111 82%	212 84%	27 96%	178 82%*	62 94%*
NOT ANSWERED	26	399		7	3	5	11							1			1	25	1	
VALID CASES	282	4964	2	45	72	89	74	147	11	16	2	2	25	26	143	136	252	28	216	66
NUMBER OF RESPONDENTS	308 100%	5363 100%	2 100%	52 100%	75 100%	94 100%	85 100%	147 100%	11 100%	16 100%	2 100%	2 100%	25 100%	26 100%	144 100%	136 100%	252 100%	29 100%	241 100%	67 100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q80																				
8TH GRADE OR LESS	41 15%	618 13%	~ 14%	~ 10%	13	15%	20%	14 10%*	~ 13%	~	~	~ 24%	~ 8%	2 8%	35 25%*	5 4%*	33 13%	8 30%	34 16%	7 10%
SOME HIGH SCHOOL BUT DID NOT GRADUATE	41 15%	624 13%	~ 16%	~ 14%	7	10%	17%	18 12%	1 9%~	1 6%~	~	~ 20%	~ 12%	5 3	34 25%*	7 5%*	35 14%	5 19%	32 15%	9 13%
HIGH SCHOOL GRADUATE OR GED	73 26%	1385 28%	1 50%~	10 23%~	22	32%	28%	36 25%	3 27%~	6 38%~	1 50%~	1 50%~	8 32%~	5 19%~	40 29%	33 24%	67 27%~	5 19%~	63 30%*	10 15%*
SOME COLLEGE OR 2-YEAR DEGREE	67 24%	1555 32%*	1 50%~	10 23%~	18	26%	29%	39 27%	5 45%~	3 19%~	~	1 50%~	3 12%~	12 46%~	18 13%*	48 35%*	63 26%~	4 15%~	44 21%*	23 34%*
4-YEAR COLLEGE GRADUATE	32 12%	470 10%	~ 16%	~ 10%	7	7%	6%*	18 16%*	1 9%~	2 13%~	~	~	8 8%~	3 12%~	8 6%*	24 18%*	30 12%~	2 7%~	24 11%	8 12%
MORE THAN 4-YEAR COLLEGE DEGREE	22 8%	246 5%*	~ 9%	~ 7%	4	5%	6%	11 11%*	1 9%~	2 13%~	1 50%~	~	1 4%~	1 4%~	3 2%*	19 14%*	19 8%~	3 11%~	12 6%*	10 15%*
NOT ANSWERED	32	466	8	6	7	11	1	1							6		5	2	32	
VALID CASES	276	4897	2	44	69	87	74	146	11	16	2	2	25	26	138	136	247	27	209	67
NUMBER OF RESPONDENTS	308	5363	2	52	75	94	85	147	11	16	2	2	25	26	144	136	252	29	241	67
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q81 HOW ARE YOU RELATED TO THE CHILD?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV ILND	AMER PAC ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q81																				
MOTHER OR FATHER	265 95%	4614 94%	2 100%	44 98%	67 94%	84 94%	68 93%	139 95%	8 80%	15 94%	2 100%	2 100%	25 100%	22 85%	141 99%*	122 91%*	235 94%	28 97%	204 95%	61 94%
GRANDPARENT	11 4%	165 3%	~	2%~	3 4%	3 3%	4 5%	6 4%	1 10%	~	~	~	~	3 12%	1 0.7%*	9 7%*	10 4%	1 3%	8 4%	3 5%
AUNT OR UNCLE		19 0.4%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
OLDER BROTHER OR SISTER	1 0.4%	8 0.2%	~	~	~	1%~	~	1 0.7%~	~	~	~	~	~	~	~	1 0.7%~	1 0.4%~	~	1 0.5%	~
OTHER RELATIVE		3 0.1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
LEGAL GUARDIAN	2 0.7%	60 1%	~	~	1 1%	1 1%	~	~	1 10%	~	~	~	~	1 4%	1 0.7%	1 0.7%	2 0.8%	~	1 0.5%	1 2%
SOMEONE ELSE	1 0.4%	41 0.8%	~	~	~	~	1 1%~	~	~	1 6%~	~	~	~	~	~	1 0.7%~	1 0.4%~	~	1 0.5%	~
NOT ANSWERED	28	454		7	4	5	12	1	1						1	2	3		26	2
VALID CASES	280	4909	2	45	71	89	73	146	10	16	2	2	25	26	143	134	249	29	215	65
NUMBER OF RESPONDENTS	308	5363	2	52	75	94	85	147	11	16	2	2	25	26	144	136	252	29	241	67
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q82 YES	4	96			2	2		3							1	3	4		3	1
	2%	3%	~	~	5%~	4%	~	3%	~	~	~	~	~	~	1%	3%	3%~	~	2%~	2%~
NO	162	3230		26	41	49	46	98	8	14		2	15	6	67	94	146	14	122	40
	98%	97%	~100%~	95%~	96%	100%~	~	97%	100%	~100%~	~	~100%~	~100%~	~100%~	99%	97%	97%~100%~	~	98%~	98%~
NOT ANSWERED	2	38				2							1		2		2		2	
VALID CASES	166	3326		26	43	51	46	101	8	14		2	15	6	68	97	150	14	125	41
NUMBER OF RESPONDENTS	168	3364		26	43	53	46	101	8	14		2	16	6	70	97	152	14	127	41
	100%	100%		100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

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

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

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

		AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q83.2	HTS TOT CHLD															
YES	1 25%	28 31%	~	~	~	50%	~	~	~	~	~	~	1 25%	1 33%	1 ~	~
NO	3 75%	61 69%	~	~	100%	50%	~	~	~	~	~	3 100%	3 75%	2 67%	1 100%	~
VALID CASES	4	89		2	2		3					1	3	4	3	1
NUMBER OF RESPONDENTS	4 100%	89 100%		2 100%	2 100%		3 100%					1 100%	3 100%	4 100%	3 100%	1 100%

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

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

		AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.3 YES	HTS TOT CHLD	11 12%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	OHP TOT CHLD	4 100%	78 88%	2 ~	2 ~100%	2 ~100%	3 ~100%	~	~	~	~	~	1 ~100%	3 ~100%	4 ~100%	3 ~100%	1 ~100%
VALID CASES	HTS TOT CHLD	4 100%	89 100%	2 100%	2 100%	3 100%	3 100%	~	~	~	~	~	1 100%	3 100%	4 100%	3 100%	1 100%
NUMBER OF RESPONDENTS	OHP TOT CHLD	4 100%	89 100%	2 100%	2 100%	3 100%	3 100%	~	~	~	~	~	1 100%	3 100%	4 100%	3 100%	1 100%

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



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

		AGE					RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER	
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q83.4	HTS TOT CHLD															
YES	2 50%	19 21%	~	2 ~100%	~	2 67%	~	~	~	~	~	2 67%	2 50%	2 67%	~	
NO	2 50%	70 79%	~	~	2 ~100%	1 33%	~	~	~	~	~	1 100%	1 33%	2 50%	1 33%	1 100%
VALID CASES	4	89		2	2	3						1	3	4	3	1
NUMBER OF RESPONDENTS	4 100%	89 100%		2 100%	2 100%	3 100%						1 100%	3 100%	4 100%	3 100%	1 100%

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

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

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

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

NQ14 RATING OF ALL CHILD'S HEALTH CARE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
NQ14 0-6	189%	32910%	150%~	13%~	918%*	47%	36%~	88%	113%~	111%~	~	~	15%~	315%~	88%	89%	138%~	314%~	1410%	47%
7-8	6834%	111232%	150%~	1437%~	1631%	1932%	1837%~	3635%	225%~	556%~	~	~	735%~	840%~	3233%	3437%	5432%~	1255%~	4129%*	2747%*
9-10	11457%	202558%	~	2361%~	2651%	3762%	2857%~	5857%	563%~	333%~	1100%~	1100%~	1260%~	945%~	5759%	5155%	10260%~	732%~	8761%	2747%
VALID CASES	200	3466	2100%	38100%	51100%	60100%	49100%	102100%	8100%	9100%	1100%	1100%	20100%	20100%	97100%	93100%	169100%	22100%	142100%	58100%
NUMBER OF RESPONDENTS	200	3466	2100%	38100%	51100%	60100%	49100%	102100%	8100%	9100%	1100%	1100%	20100%	20100%	97100%	93100%	169100%	22100%	142100%	58100%
MEAN	2.48	2.49	1.50	2.58	2.33	2.55	2.51	2.49	2.50	2.22	3.00	3.00	2.55	2.30	2.51	2.46	2.53	2.18	2.51	2.40
p stat_(*=Sig @ p<=.05)		.799	~	~	.100	.311	~	.823	~	~	~	~	~	~	.600	.724	~	~	.235	.237

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NQ41 0-6	16 7%	319 8%	~	2 5%	7 12%	4 5%	3 5%	8 6%	~	1 11%	~	~	1 6%	1 5%	8 7%	7 7%	11 5%	3 13%	12 7%	4 7%	
7-8	54 23%	980 23%	50%~	1 23%	9 23%	10 17%	17 28%	29 23%	2 22%	4 44%	~	~	3 18%	5 24%	30 24%	24 22%	44 21%	10 43%	37 21%	17 28%	
9-10	165 70%	2929 69%	50%~	1 72%	28 71%	41 71%	54 72%	41 67%	88 70%	7 78%	4 44%	2 100%	1 100%	13 76%	15 71%	85 69%	76 71%	153 74%	10 43%	125 72%	40 66%
VALID CASES	235	4228	2	39	58	75	61	125	9	9	2	1	17	21	123	107	208	23	174	61	
NUMBER OF RESPONDENTS	235 100%	4228 100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
MEAN	2.63	2.62	2.50	2.67	2.59	2.67	2.62	2.64	2.78	2.33	3.00	3.00	2.71	2.67	2.63	2.64	2.68	2.30	2.65	2.59	
p stat_(*=Sig @ p<=.05)		.594	~	~	.491	.574	.869	.873	~	~	~	~	~	~	.832	.803	~	~	.513	.513	

[ASKED IF Q30 = YES]

NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
NQ48 0-6	6 16%	69 10%	~	14%~	25%~	20%~	9%~	5 23%~	1 33%~	~	~	~	~	5 28%~	4 15%~	2 22%~	3 15%~	3 18%~	
7-8	11 30%	178 26%	~	43%~	25%~	10%~	45%~	5 23%~	2 67%~	~	~	2 67%~	1 33%~	5 28%~	6 33%~	6 22%~	4 44%~	5 25%~	6 35%~
9-10	20 54%	428 63%	100%~	43%~	50%~	70%~	45%~	12 55%~	~	~	~	1 33%~	2 67%~	13 72%~	7 39%~	17 63%~	3 33%~	12 60%~	8 47%~
VALID CASES	37	675	1	7	8	10	11	22	3			3	3	18	18	27	9	20	17
NUMBER OF RESPONDENTS	37	675	1	7	8	10	11	22	3			3	3	18	18	27	9	20	17
	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%
MEAN	2.38	2.53	3.00	2.29	2.25	2.50	2.36	2.32	1.67			2.33	2.67	2.72	2.11	2.48	2.11	2.45	2.29
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

NQ54 RATING OF CHILD'S HEALTH PLAN

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
NQ54 0-6	27 10%	619 12%*	~	1 2%~	11 15%	6 7%	9 12%	13 9%	2 ~	13%~	1 ~	1 50%~	5 4%~	11 8%	14 11%	20 8%~	7 25%~	15 7%*	12 18%*	
7-8	72 26%	1448 29%	100%~	2 20%~	9 17%*	12 31%	27 29%	32 22%	5 56%~	7 47%~	~	~	8 33%~	11 42%~	29 21%*	43 32%*	61 25%~	9 32%~	48 23%*	24 36%*
9-10	180 65%	2927 59%*	~	34 77%~	48 68%	54 62%	44 59%	101 69%	4 44%~	6 40%~	2 100%~	1 50%~	15 63%~	10 38%~	101 72%*	76 57%*	166 67%~	12 43%~	149 70%*	31 46%*
VALID CASES	279	4994	2	44	71	87	75	146	9	15	2	2	24	26	141	133	247	28	212	67
NUMBER OF RESPONDENTS	279 100%	4994 100%	2 100%	44 100%	71 100%	87 100%	75 100%	146 100%	9 100%	15 100%	2 100%	2 100%	24 100%	26 100%	141 100%	133 100%	247 100%	28 100%	212 100%	67 100%
MEAN	2.55	2.46	2.00	2.75	2.52	2.55	2.47	2.60	2.44	2.27	3.00	2.00	2.58	2.19	2.64	2.47	2.59	2.18	2.63	2.28
p stat_(*=Sig @ p<=.05)		.009*	~	~	.714	.955	.232	.154	~	~	~	~	~	~	.022*	.049*	~	~	.001*	.001*

GETTING NEEDED CARE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
NPRBSEE4 NQ46	2.02	2.21	3.00	2.13	2.11	2.09	1.79	2.04		1.75			2.00	2.00	2.40	1.68	1.97	2.10	2.16	1.83
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCARNES4 NQ15	2.42	2.44	2.50	2.61	2.35	2.43	2.35	2.54	2.38	2.50	1.00	3.00	2.30	2.25	2.31	2.55	2.46	2.14	2.42	2.41
p stat_(*=Sig @ p<=.05)		.699	~	~	.372	.948	~	.010*	~	~	~	~	~	~	.035*	.016*	~	~	.923	.923
COMPOSITE	2.22	2.32	2.75	2.37	2.23	2.26	2.07	2.29	2.38	2.13	1.00	3.00	2.15	2.13	2.36	2.12	2.22	2.12	2.29	2.12
p stat_(*=Sig @ p<=.05)		.562	~	~	.983	.888	~	.688	~	~	~	~	~	~	.468	.570	~	~	.557	.734

GETTING CARE QUICKLY

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
NCARSN4 NQ4	2.55	2.60		2.79	2.65	2.42	2.39	2.62	3.00	2.25		3.00	2.38	2.78	2.44	2.66	2.56	2.43	2.51	2.68
p stat_(*=Sig @ p<=.05)		.391	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NAPGET4 NQ6	2.43	2.43	3.00	2.69	2.43	2.23	2.47	2.54	2.50	1.62	1.00		2.35	2.41	2.41	2.48	2.43	2.50	2.40	2.50
p stat_(*=Sig @ p<=.05)		.976	~	~	~.014*		~.054	~	~	~	~	~	~	~	.757	.459	~	~	.408	.410
COMPOSITE	2.49	2.51	3.00	2.74	2.54	2.32	2.43	2.58	2.75	1.94	1.00	3.00	2.36	2.59	2.43	2.57	2.49	2.46	2.45	2.59
p stat_(*=Sig @ p<=.05)		.905	~	~.891	.613	.873	.689	~	~	~	~	~	~	~	.783	.746	~	~	.802	.769



HOW WELL DOCTORS COMMUNICATE

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV ILND	AMER PAC	IND/ ALSK	MUL- OTHR	TI	HIS-IC	NOT HIS-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
NDREXPL4 NQ32	2.66	2.69	3.00	2.67	2.63	2.61	2.76	2.68	2.83	3.00	2.00	3.00	2.77	2.84	2.58	2.78	2.69	2.43	2.63	2.74
p stat_(*=Sig @ p<=.05)		.471	~	~	~.494		~.673	~	~	~	~	~	~	~	~.057	.020*	~	~	~.265	.267
NDRLSTN4 NQ33	2.71	2.71	2.50	2.70	2.74	2.70	2.71	2.63	3.00	2.00	3.00	3.00	2.77	2.84	2.71	2.71	2.75	2.38	2.74	2.65
p stat_(*=Sig @ p<=.05)		.964	~	~	~.872		~.040*	~	~	~	~	~	~	~	~.898	.958	~	~	~.374	.374
NDRESPU4 NQ34	2.76	2.77	3.00	2.76	2.74	2.79	2.74	2.68	3.00	2.00	3.00	3.00	2.92	2.89	2.78	2.73	2.80	2.45	2.79	2.69
p stat_(*=Sig @ p<=.05)		.727	~	~	~.651		~.030*	~	~	~	~	~	~	~	~.558	.512	~	~	~.217	.217
NDRTMEN4 NQ37	2.49	2.49	2.50	2.41	2.43	2.50	2.59	2.48	2.33	2.00	3.00	3.00	2.62	2.71	2.34	2.64	2.56	2.00	2.44	2.59
p stat_(*=Sig @ p<=.05)		.892	~	~	~.857		~.895	~	~	~	~	~	~	~	~.006*	.008*	~	~	~.175	.176
COMPOSITE	2.66	2.67	2.75	2.63	2.63	2.65	2.70	2.62	2.79	2.25	2.75	3.00	2.77	2.82	2.60	2.72	2.70	2.31	2.65	2.67
p stat_(*=Sig @ p<=.05)		.972	~	~	~.991		~.906	~	~	~	~	~	~	~	~.866	.860	~	~	~.980	.980

CUSTOMER SERVICE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
NPBCLCS4 NQ50	2.20	2.24	1.00	2.43	2.11	2.29	2.11	2.18	2.00	1.33		1.00	2.36	2.17	2.33	2.06	2.26	1.33	2.21	2.17
p stat_(*=Sig @ p<=.05)		.593	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ51	2.47	2.57	2.00	2.57	2.44	2.54	2.39	2.54	2.33	2.00		3.00	2.73	2.00	2.52	2.45	2.49	2.17	2.48	2.44
p stat_(*=Sig @ p<=.05)		.095	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.34	2.41	1.50	2.50	2.28	2.41	2.25	2.36	2.17	1.67	x	2.00	2.55	2.08	2.42	2.26	2.38	1.75	2.35	2.31
p stat_(*=Sig @ p<=.05)		.876	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
NNRXWHY NQ11	2.86	2.88	1.00	3.00	2.78	2.89	2.90	2.87	3.00	3.00			3.00	3.00	2.73	2.94	2.83	3.00	2.82	2.92
p stat_(*=Sig @ p<=.05)		.771	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NNRXWYNT NQ12	2.47	2.40	3.00	2.75	1.67	2.78	2.43	2.68	2.33	2.00			2.50	2.20	2.45	2.44	2.49	2.14	2.45	2.50
p stat_(*=Sig @ p<=.05)		.448	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NRXBST NQ13	2.63	2.55	3.00	3.00	2.27	2.60	2.70	2.75	2.33	2.50			2.67	1.80	2.46	2.81	2.68	2.14	2.62	2.65
p stat_(*=Sig @ p<=.05)		.328	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.66	2.61	2.33	2.92	2.24	2.76	2.68	2.77	2.56	2.50	x	x	2.72	2.33	2.55	2.73	2.67	2.43	2.63	2.69
p stat_(*=Sig @ p<=.05)		.929	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

ACCESS TO SPECIALIZED SERVICES

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AMER IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC
NEZMDEQ NQ20	2.38	2.15	1.00	2.50	2.33	3.00	2.17	3.00					2.33	2.40	2.40	2.33	3.00	2.29
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTHP NQ23	1.79	1.94	2.00	1.67	1.89	1.71	2.13	1.67			1.00	1.00	1.88	1.79	1.80	1.83	1.50	1.95
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTC NQ26	1.94	2.08	3.00	2.25	1.88	1.83	2.00	1.00			3.00	1.60	2.00	1.89	1.84	2.13	1.78	2.00
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.03	2.06	x 2.00	2.14	2.03	2.18	2.10	2.00	1.67	x	x 2.00	1.30	2.07	2.02	2.01	2.10	2.09	2.08
p stat_(*=Sig @ p<=.05)	.932		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	Whte	BLCK OR AFR-AMER	AS-IAN	NATV HAW/PAC ILND	AMER IND/ALSK NATV	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
PRBSEE4 Q46	65%	75%	100%	63%	67%	73%	57%	64%		75%			75%	50%	80%	50%	59%	80%	68%	61%
CARNES4 Q15	87%	88%	100%	92%	85%	90%	83%	93%	75%	100%	0%	100%	80%	80%	82%	92%	88%	82%	88%	84%
AVERAGE	76.21	81.22	100.0	77.08	75.64	81.45	69.88	78.60	75.00	87.50		100.0	77.50	65.00	81.15	71.24	73.74	80.91	78.24	72.80

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
CARSN4 Q4	89%	90%		93%	92%	89%	83%	88%	100%	100%		100%	88%	100%	85%	92%	89%	86%	87%	95%
APGET4 Q6	84%	84%	100%	94%	81%	81%	81%	87%	83%	50%	0%		82%	94%	85%	85%	84%	86%	82%	88%
AVERAGE	86.41	87.16	100.0	93.57	86.63	85.09	82.00	87.31	91.67	75.00		100.0	84.93	97.06	85.04	88.74	86.57	86.04	84.60	91.60

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

			AGE					RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
DREXPL4 Q32	90%	93%	100%	88%	91%	88%	93%	92%	100%	100%	50%	100%	92%	95%	86%	95%	92%	76%	88%	94%
DRLSTN4 Q33	94%	94%	100%	94%	95%	93%	93%	91%	100%	80%	100%	100%	100%	100%	93%	94%	95%	86%	94%	93%
DRESPU4 Q34	95%	95%	100%	94%	93%	96%	95%	93%	100%	80%	100%	100%	100%	100%	95%	95%	95%	90%	95%	94%
DRTMEN4 Q37	85%	86%	100%	78%	81%	88%	90%	83%	83%	80%	100%	100%	100%	94%	79%	91%	88%	65%	82%	91%
AVERAGE	90.8	92.0	100	88.5	90.0	91.2	92.8	89.4	95.8	85.0	87.5	100	98.1	97.2	88.3	93.9	92.5	79.2	89.8	93.1

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-AMER	AS-IAN	NATV HAW/PAC ILND	AMER IND/ALSK NATV	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
PBCLCS4 Q50	74%	77%	0%	86%	67%	79%	72%	74%	67%	33%		0%	73%	67%	80%	67%	77%	33%	73%	78%
CSRESP Q51	88%	91%	50%	93%	78%	93%	89%	90%	100%	100%		100%	91%	50%	89%	88%	88%	83%	87%	89%
AVERAGE	80.62	83.89	25.00	89.29	72.22	85.71	80.56	82.05	83.33	66.67	x	50.00	81.82	58.33	84.78	77.27	82.19	58.33	79.84	83.33



SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NRXWHY Q11	93%	94%	0%	100%	89%	94%	95%	94%	100%	100%		100%	100%	86%	97%	91%	100%	91%	96%	
NRXWYNT Q12	74%	70%	100%	87%	33%	89%	71%	84%	67%	50%		75%	60%	73%	72%	74%	57%	73%	75%	
RXBST Q13	82%	78%	100%	100%	64%	80%	85%	87%	67%	75%		83%	40%	73%	90%	84%	57%	81%	83%	
AVERAGE	82.8	80.5	66.7	95.8	62.0	87.8	83.9	88.3	77.8	75.0	x	x	86.1	66.7	77.4	86.4	83.3	71.4	81.6	84.5

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
EZMDEQ Q20	75%	70%	0%	100%	67%	100%	67%	100%						67%	80%	80%	67%	100%	71%	
EZTHP Q23	52%	61%	60%	50%	56%	43%	67%		67%			0%	0%	53%	57%	50%	58%	33%	62%	
EZTC Q26	65%	67%	100%	75%	65%	58%	74%	0%				100%	40%	56%	72%	64%	63%	56%	68%	
AVERAGE	63.7	66.1	x	53.3	75.0	62.3	67.1	69.0	50.0	66.7	x	x	50.0	20.0	58.6	69.8	64.7	62.5	63.0	67.1

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
DRTLKU Q38	82%	84%	100%	88%	77%	86%	76%	82%	100%	40%	100%	100%	85%	74%	83%	82%	82%	82%	76%	83%	80%
DRUNCON Q43	91%	89%		60%	85%	100%	94%	84%	100%	100%			100%	100%	86%	94%	90%	92%	85%	93%	
DRUNFAM Q44	81%	84%		60%	54%	100%	89%	70%	100%	50%			100%	100%	80%	81%	88%	58%	75%	83%	
AVERAGE	84.4	85.5	100	69.3	71.7	95.3	86.5	78.6	100	63.3	100	100	94.9	91.2	82.8	85.6	86.7	75.4	80.8	85.0	

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	HTS TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
HELPCONT Q18	96%	94%	100%	86%	100%	100%	93%	100%				100%	100%	100%	90%	95%	100%	91%	100%
HLPCOORD Q29	67%	60%	0%	83%	50%	67%	69%		100%			50%	40%	63%	70%	66%	64%	70%	64%
AVERAGE	81.2	76.8	91.7	67.9	83.3	85.0	81.0	100	100	x	x	75.0	70.0	81.3	80.0	80.2	81.8	80.2	81.8

INDEX OF ADULT TABLES

PAGE QUESTION TITLE

1. INTRODUCTION

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

2. YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

3. YOUR PERSONAL DOCTOR

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

4. GETTING HEALTH CARE FROM SPECIALISTS

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

PAGE QUESTION TITLE

5. YOUR HEALTH PLAN

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

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

5. ADDITIONAL QUESTIONS

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

5. ACCESS TO DENTAL CARE

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



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

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

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

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

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

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

PAGE QUESTION TITLE

8. RATINGS

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

9. COMPOSITES

94 GETTING NEEDED CARE  
95 GETTING CARE QUICKLY  
96 HOW WELL DOCTORS COMMUNICATE  
97 CUSTOMER SERVICE  
98 SHARED DECISION MAKING

10. GLOBAL PROPORTION COMPOSITES

99 GETTING NEEDED CARE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE  
100 GETTING CARE QUICKLY (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE  
101 HOW WELL DOCTORS COMMUNICATE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE  
102 CUSTOMER SERVICE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE  
103 SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

INDEX OF CHILD TABLES

PAGE QUESTION TITLE

1. INTRODUCTION

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

### 3. SPECIALIZED SERVICES

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

PAGE QUESTION TITLE

### 4. YOUR CHILD'S PERSONAL DOCTOR

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

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

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

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

5. GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

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

6. YOUR CHILD'S HEALTH PLAN

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

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

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

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

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

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

PAGE QUESTION TITLE

7. PRESCRIPTION MEDICINES

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

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

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

7. ACCESS TO DENTAL CARE

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

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

7. ADDITIONAL QUESTIONS

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



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

8. ABOUT YOUR CHILD AND YOU

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

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

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

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

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

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

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

91 Q78 WHAT IS YOUR AGE?

92 Q79 ARE YOU MALE OR FEMALE?

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

94 Q81 HOW ARE YOU RELATED TO THE CHILD?

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

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

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

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

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

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

PAGE QUESTION TITLE

9. RATINGS

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

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

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

104 NQ54 RATING OF CHILD'S HEALTH PLAN

10. COMPOSITES

105 GETTING NEEDED CARE

106 GETTING CARE QUICKLY

107 HOW WELL DOCTORS COMMUNICATE

108 CUSTOMER SERVICE

109 SHARED DECISION MAKING  
110 ACCESS TO SPECIALIZED SERVICES

11. GLOBAL PROPORTION COMPOSITES

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

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

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

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Correct  
Mark 

Incorrect  
Marks   

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

- Yes → *Go to Question 1*
- No

↓ **START HERE** ↓

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

- Yes → *Go to Question 3*
- No

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

\_\_\_\_\_

## YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

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

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

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

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

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

- Never  
 Sometimes  
 Usually  
 Always

### YOUR PERSONAL DOCTOR

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

- Yes  
 No → **Go to Question 24**

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

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

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

- Never  
 Sometimes  
 Usually  
 Always

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

- Never  
 Sometimes  
 Usually  
 Always

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

- Never  
 Sometimes  
 Usually  
 Always

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

- Never  
 Sometimes  
 Usually  
 Always

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

- Yes  
 No → **Go to Question 23**

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

- Never  
 Sometimes  
 Usually  
 Always

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

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



## GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

- Yes  
 No → *Go to Question 28*

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

- Never  
 Sometimes  
 Usually  
 Always

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

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

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

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

## YOUR HEALTH PLAN

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

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

- Yes  
 No → *Go to Question 30*

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

- Never  
 Sometimes  
 Usually  
 Always

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

- Yes  
 No → *Go to Question 33*

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

- Never  
 Sometimes  
 Usually  
 Always

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

- Never  
 Sometimes  
 Usually  
 Always

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

- Yes  
 No → *Go to Question 35*

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

- Never
- Sometimes
- Usually
- Always

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

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

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

- Yes
- No → *Go to Question 35c*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 35e*

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

- Never
- Sometimes
- Usually
- Always

## ADDITIONAL QUESTIONS

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

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

- Yes
- No → *Go to Question 35i*

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

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

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

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

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

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

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

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

- Yes
- No → *Go to Question 35l*



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

- Yes
- No

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

- Yes
- No

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

- Never
- Sometimes
- Usually
- Always

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes, definitely
- Yes, somewhat
- No

### ACCESS TO DENTAL CARE

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

- Yes
- No

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

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

### ABOUT YOU

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

- Excellent
- Very Good
- Good
- Fair
- Poor



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

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

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

- Yes
- No → **Go to Question 50**

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

- Yes
- No

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

- Yes
- No → **Go to Question 52**

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

- Yes
- No

52. What is your age?

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

53. Are you male or female?

- Male
- Female

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

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

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

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

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

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

57. Did someone help you complete this survey?

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

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

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

**THANK YOU**

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

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

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



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

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

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Correct  
Mark 

Incorrect  
Marks



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

- Yes ➔ *Go to Question 1*
- No

↓ **START HERE** ↓

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

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

\_\_\_\_\_

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

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

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

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



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

- Yes
- No

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

- Yes
- No

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No

**SPECIALIZED SERVICES**

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

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

- Yes
- No → *Go to Question 22*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 25*



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 28*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 30*

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

- Yes
- No

### YOUR CHILD'S PERSONAL DOCTOR

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

- Yes
- No → *Go to Question 45*

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

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

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

- Never
- Sometimes
- Usually
- Always



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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → Go to Question 37

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → Go to Question 41

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

- Never
- Sometimes
- Usually
- Always

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

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

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

- Yes
- No → Go to Question 45





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

- Yes
- No

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

- Yes
- No

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

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

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

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

**GETTING HEALTH CARE FROM SPECIALISTS**

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

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

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

- Yes
- No → **Go to Question 49**

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

- Never
- Sometimes
- Usually
- Always

**YOUR CHILD'S HEALTH PLAN**

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

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

- Yes
- No → **Go to Question 52**

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

- Never
- Sometimes
- Usually
- Always



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → **Go to Question 54**

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

- Never
- Sometimes
- Usually
- Always

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

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

**PRESCRIPTION MEDICINES**

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

- Yes
- No → **Go to Question 57a**

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

**ACCESS TO DENTAL CARE**

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

- Yes
- No

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

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



## ADDITIONAL QUESTIONS

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

- Yes
- No → *Go to Question 58*

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

- Yes
- No

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

- Yes
- No

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

## ABOUT YOUR CHILD AND YOU

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Yes
- No → *Go to Question 63*

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

- Yes
- No → *Go to Question 63*

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

- Yes
- No

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

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



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

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

78. What is your age?

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

79. Are you male or female?

- Male
- Female

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

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

81. How are you related to the child?

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

82. Did someone help you complete this survey?

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

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

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

**THANK YOU**

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

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

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





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

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

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

**INSTRUCCIONES PARA EL CUESTIONARIO**

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

Marca  
Correcta ●

Marca  
Incorrecta   

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

● Sí → *Pase a la Pregunta 1*  
○ No

↓ **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

13. 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 a toda la atención médica que ha recibido en los últimos 6 meses?

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

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

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

### SU DOCTOR PERSONAL

15. El doctor personal es aquel a quien usted va si necesita un chequeo, quiere pedir consejo sobre un problema de salud o si se enferma o lastima. ¿Tiene usted un doctor personal?

- Sí
- No → *Pase a la pregunta 24*

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

- Ninguna vez → *Pase a la pregunta 23*
- 1 vez
- 2
- 3
- 4
- 5 a 9
- 10 veces o más

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

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

18. En los últimos 6 meses, ¿con qué frecuencia su doctor personal le escuchó con atención?

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

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

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



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

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

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

- Sí
- No → *Pase a la pregunta 23*

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

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

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

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

## LA ATENCIÓN MÉDICA QUE RECIBÍÓ DE ESPECIALISTAS

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

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

- Sí
- No → *Pase a la pregunta 28*

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

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

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

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

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

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

### SU PLAN DE SALUD

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

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

- Sí  
 No → *Pase a la pregunta 30*

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

- Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

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

- Sí  
 No → *Pase a la pregunta 33*

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

- Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

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

- Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

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

- Sí  
 No → *Pase a la pregunta 35*

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

- Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

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

- 0 1 2 3 4 5 6 7 8 9 10  
El peor plan de salud posible El mejor plan de salud posible

## PREGUNTAS ADICIONALES

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

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

- Sí
- No → *Pase a la pregunta 35i*

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

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

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 35c*

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

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

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

- Sí
- No → *Pase a la pregunta 35e*

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

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

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

- Sí
- No → *Pase a la pregunta 35l*

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

- Sí
- No

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

- Sí
- No

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

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

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

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

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

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

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

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

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

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

- Sí, definitivamente
- Sí, algo
- No

## ACCESO A CUIDADO DENTAL

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

- Sí
- No

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

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

## ACERCA DE USTED

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Sí
- No
- No sé

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

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

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

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

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

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

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

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



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

- Sí
- No

52. ¿Qué edad tiene?

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

53. ¿Es usted hombre o mujer?

- Hombre
- Mujer

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

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

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

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

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

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

57. ¿Le ayudó alguien a completar esta encuesta?

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

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

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

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

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

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





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

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

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

**INSTRUCCIONES PARA EL CUESTIONARIO**

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

Marca  
Correcta



Marca  
Incorrecta



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

- Sí ➔ *Pase a la Pregunta 1*
- No



**COMIENCE AQUI**



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

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

- Sí ➔ *Pase a la pregunta 3*
- No

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

\_\_\_\_\_

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

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

3. En los últimos 6 meses, ¿tuvo su niño una enfermedad, lesión, o problema de salud para el cual necesitó atención inmediata en una clínica, en una sala de emergencia o en un consultorio médico?

Sí  
 No → *Pase a la pregunta 5*

4. En los últimos 6 meses, cuando su niño necesitó atención inmediata, ¿con qué frecuencia atendieron a su niño tan pronto como él o ella lo necesitaba?

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

5. En los últimos 6 meses, ¿hizo alguna cita para un chequeo o una consulta regular para su niño en un consultorio médico o en una clínica?

Sí  
 No → *Pase a la pregunta 7*

6. En los últimos 6 meses, ¿con qué frecuencia consiguió una cita para un chequeo o una consulta regular para su niño en un consultorio médico o en una clínica tan pronto como su niño la necesitaba?

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

7. En los últimos 6 meses, sin contar las veces en que su niño fue a una sala de emergencia, ¿cuántas veces fue su niño a un consultorio médico o a una clínica para que lo atendieran?

Ninguna vez → *Pase a la pregunta 16*  
 1 vez  
 2  
 3  
 4  
 5 a 9  
 10 veces o más

8. En los últimos 6 meses, ¿hablaron usted y el doctor u otro profesional médico de su niño sobre cosas específicas que usted podría hacer para prevenir que su niño se enferme?

Sí  
 No

9. En los últimos 6 meses, ¿con qué frecuencia le contestaron sus preguntas los doctores u otros profesionales médicos de su niño?

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

10. En los últimos 6 meses, ¿hablaron usted y el doctor u otro profesional médico de su niño sobre comenzar o suspender una medicina recetada?

- Sí
- No → *Pase a la pregunta 14*

11. ¿Hablaron usted y un doctor u otro profesional médico sobre las razones por las que tal vez usted quiera que su niño tome una medicina?

- Sí
- No

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

- Sí
- No

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

- Sí
- No

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 19*

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

- Sí
- No → *Pase a la pregunta 19*

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

- Sí
- No

## SERVICIOS ESPECIALIZADOS

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

- Sí
- No → *Pase a la pregunta 22*

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

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

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 25*

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

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

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 28*

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

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

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 30*

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

- Sí
- No

### EL DOCTOR PERSONAL DE SU NIÑO

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

- Sí
- No → *Pase a la pregunta 45*

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

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

31a. En los últimos 6 meses, ¿con qué frecuencia se le hizo difícil hablar o entender al doctor personal de su niño porque hablaban idiomas diferentes?

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

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

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

33. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño le escuchó a usted con atención?

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

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

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

35. ¿Su niño puede hablar con los doctores sobre su atención médica?

- Sí
- No → *Pase a la pregunta 37*

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

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





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

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

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 41*

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 45*

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

- Sí
- No

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

- Sí
- No



**LA ATENCIÓN MÉDICA QUE RECIBIÓ DE ESPECIALISTAS**

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

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

- Sí
- No → *Pase a la pregunta 49*

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

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

**47. ¿Cuántos especialistas ha visto su niño en los últimos 6 meses?**

- Ninguno → *Pase a la pregunta 49*
- 1 especialista
- 2
- 3
- 4
- 5 especialistas o más

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

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

**EL PLAN DE SALUD DE SU NIÑO**

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

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

- Sí
- No → *Pase a la pregunta 52*

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

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



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

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

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

- Sí
- No → *Pase a la pregunta 54*

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

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

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

- |                               |                       |                       |                       |                       |                       |                                |                       |                       |                       |                       |
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| 0                             | 1                     | 2                     | 3                     | 4                     | 5                     | 6                              | 7                     | 8                     | 9                     | 10                    |
| El peor plan de salud posible |                       |                       |                       |                       |                       | El mejor plan de salud posible |                       |                       |                       |                       |

### MEDICINAS RECETADAS

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

- Sí
- No → *Pase a la pregunta 57a*

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

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

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

- Sí
- No

### 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, 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

## PREGUNTAS ADICIONALES

57c. Las opciones de tratamiento o atención médica para su niño pueden incluir opciones sobre medicinas, cirugía u otro tratamiento.

En los últimos 6 meses, ¿le dijo su profesional médico que había más de una opción para el tratamiento o atención médica de su niño?

- Sí
- No → *Pase a la pregunta 58*

57d. En los últimos 6 meses, ¿le habló su profesional médico acerca de las cosas buenas y las cosas malas de cada opción de tratamiento o de atención médica de su niño?

- Sí
- No

57e. En los últimos 6 meses, cuando había más de una opción de tratamiento o de atención médica para su niño, ¿su profesional médico le preguntó cuál opción le convenía más a su niño?

- Sí
- No

57f. En los últimos 6 meses, ¿con qué frecuencia su profesional médico considero y respeto las opciones de atención médica que usted penso funcionarían mejor para su niño?

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

57g. En los últimos 6 meses, ¿con qué frecuencia el profesional médico de su niño le animo a usted a hacer preguntas y plantear inquietudes?

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

57h. En los últimos 6 meses, ¿con qué frecuencia el profesional médico de su niño le hizo fácil a usted el hacer preguntas y plantear inquietudes?

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

## ACERCA DE USTED Y DE SU NIÑO

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Sí
- No → *Pase a la pregunta 63*

61. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?
- Sí  
 No → *Pase a la pregunta 63*
62. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?
- Sí  
 No
63. ¿Necesita o usa su niño más servicios médicos, de salud mental o educativos de lo que es normal para la mayoría de los niños de la misma edad?
- Sí  
 No → *Pase a la pregunta 66*
64. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?
- Sí  
 No → *Pase a la pregunta 66*
65. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?
- Sí  
 No
66. ¿Está su niño limitado o impedido de alguna manera en su habilidad de hacer lo que pueden hacer la mayoría de los niños de la misma edad?
- Sí  
 No → *Pase a la pregunta 69*

67. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?
- Sí  
 No → *Pase a la pregunta 69*
68. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?
- Sí  
 No
69. ¿Necesita o recibe su niño terapia especial, tal como terapia física, ocupacional o del habla?
- Sí  
 No → *Pase a la pregunta 72*
70. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?
- Sí  
 No → *Pase a la pregunta 72*
71. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?
- Sí  
 No
72. ¿Tiene su niño algún problema emocional, de desarrollo o de comportamiento, para el cual necesita o recibe tratamiento o consejería?
- Sí  
 No → *Pase a la pregunta 74*
73. ¿Ha durado este problema o se espera que dure por lo menos 12 meses?
- Sí  
 No

74. ¿Qué edad tiene su niño?

Menos de un año

AÑOS (escriba la respuesta)

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

Masculino

Femenino

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

Sí, hispano o latino

No, ni hispano ni latino

77. ¿A qué raza pertenece su niño?  
Marque una o más.

Blanca

Negra o afroamericana

Asiática

Nativo de Hawái o de otras islas del Pacífico

Indígena americano o nativo de Alaska

Otra (Por favor escriba en letra de molde)

---

78. ¿Qué edad tiene usted?

Menos de 18 años

18 a 24

25 a 34

35 a 44

45 a 54

55 a 64

65 a 74

75 años o más

79. ¿Es usted hombre o mujer?

Hombre

Mujer

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

8 años de escuela o menos

9 a 12 años de escuela, pero sin graduarse

Graduado de la escuela secundaria (high school), Diploma de escuela secundaria, preparatoria, o su equivalente (o GED)

Algunos cursos universitarios o un título universitario de un programa de 2 años

Título universitario de 4 años

Título universitario de más de 4 años

81. ¿Qué relación tiene con el niño?

Madre o padre

Abuelo o abuela

Tía o tío

Hermano o hermana mayor

Otro familiar

Tutor legal del niño

Otra persona

82. ¿Le ayudó alguien a completar esta encuesta?

Sí → **Pase a la pregunta 83**

No → **Gracias. Por favor devuelva esta encuesta en el sobre con el porte o franqueo pagado.**

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

Me leyó las preguntas

Anotó las respuestas que le di

Contestó las preguntas por mí

Tradujo las preguntas a mi idioma

Me ayudó de otra forma (Por favor escriba en letra de molde)

---

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

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

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



DIAL.SCREEN

DS. INTERVIEWER: YOU MAY DO THE INTERVIEW WITH ONLY THE NAMED  
RESPONDENT.

PHONE NUMBER ---> [1 CELL PHONE - HAND DIAL ([AREA\$]) [FRST3\$] -  
[LAST4\$] /\*\*\* \*\*\*-\*\*\*\*]

(IWER: THIS IS NOT A PROXY INTERVIEW.)

Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may  
be monitored and recorded for quality control. May I please speak with  
[MEMBER FIRST NAME] [MEMBER LAST NAME]?

(IF NEEDED: "We are conducting an important study to find out how  
satisfied people are with Oregon Health Plan. The results of the  
study will help Oregon Health Plan improve the care they provide and will also  
help consumers when they choose health care plans.")

(IF NEEDED: "The interview is completely confidential and voluntary,  
and will not affect your health care or benefits in any way.")

(IF NEEDED: "This is purely a research study -- we are polling people  
about their health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD  
LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the  
deadline for mailing surveys has passed and we're now in the telephone  
phase of this study. May I continue?")

01. CONTINUE
02. ALREADY COMPLETED AND MAILED SURVEY BACK
03. NEW PHONE NUMBER
04. REFUSAL
05. APPOINTMENT
06. NEVER HEARD OF R
07. KNOWS R BUT HAS NO NEW NUMBER FOR R
08. RNA, ANS MACH, RETURN TO COVERSHEET
09. LANGUAGE PROBLEM -- SPEAKS SPANISH
10. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH

IF DIAL.SCREEN = 01, GO TO RE.INTRO

IF DIAL.SCREEN = 02, GO TO MAIL.SCREEN

IF DIAL.SCREEN = 03, ENTER NEW NUMBER ON COVERSHEET AND RE-DIAL

RETURN TO COVERSHEET



## RE.INTRO

RE.INTRO. (INTERVIEWER: READ PARENS TEXT IF R ISN'T PERSON WHO ANSWERED  
PHONE OR HAS NOT HEARD IT YET.)

(Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may  
be monitored and recorded for quality control.)

We are conducting an important study to find out how satisfied  
people are with Oregon Health Plan. The results of the study will help  
Oregon Health Plan improve the care they provide and will also help consumers  
when they choose health care plans.

The interview is completely confidential and voluntary, and will not  
affect your health care or benefits in any way.

(IF R ASKS: "How long will this take?", EXPLAIN: "The questions should  
take about 12-15 minutes to answer.")

(IF NEEDED: "This is purely a research study -- we are polling people  
about their health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD  
LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the  
deadline for mailing surveys has passed and we're now in the telephone  
phase of this study. May I continue?")

("DK" NOT ALLOWED)

1. CONTINUE
2. APPOINTMENT
3. REFUSAL
4. LANGUAGE PROBLEM -- SPEAKS SPANISH
5. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH
6. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)
7. RETURN TO CS

## SEX

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

1. MALE
2. FEMALE

## SPAN.VAR

(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

1. Spanish
2. English

MEMBER

Q1. / MEMBER

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

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

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

DK/REFUSAL/NOT ASCERTAINED

NPLNAME

Q2. / NPLNAME

What is the name of your health plan?

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS Oregon Health Plan]

[(ENTER 5 IF R SAYS: MEDICAID)]

(IF R SAYS SOMETHING CLOSE TO Oregon Health Plan, ENTER "2")

(IF R NOT SURE OF PLAN NAME, ENTER "2")

- 1. EXACT MATCH -----> CK.PLMSTCR
- 2. POSSIBLE MATCH -----> PLNAME
- 3. NOT A MATCH -----> PLNAME
- 4. RESPONDENT NO LONGER INSURED -----> NO.INSUR
- 5. RESPONDENT INSURED BY MEDICAID BUT DOESN'T -----> CK.PLMSTCR  
KNOW PLAN NAME
- 6. RESPONDENT INSURED BUT NOT BY MEDICAID -----> NO.INSUR

PLNAME

Q2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)

CK.PLMSTCR:

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

INTRO.INCARE

INTRO.INCARE

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

INCARE

Q3. / INCARE

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

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

DK/REFUSAL/NOT ASCERTAINED --> APMAKE4

CARSN4

Q4. / CARSN4

In the last 6 months, when you NEEDED CARE RIGHT AWAY, how often did you get care as soon as you needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

APMAKE4

Q5. / APMAKE4

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

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

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

APGET4

Q6. / APGET4

In the last 6 months, how often did you get an appointment for a CHECK-UP OR ROUTINE CARE at a doctor's office or clinic as soon as you needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

OFCTIM4

Q7. / OFCTIM4

In the last 6 months, NOT counting the times you went to an emergency room, how many times did you go to a doctor's office or clinic to get health care for yourself?

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

(IWER: IF NEEDED CLARIFY: "Please don't include dental care you received.")

(IWER: IF NEEDED CLARIFY, "Please include ALL doctor visits including those for routine, regular care and for an illness or injury.")

(READ LIST IF NEEDED: "Would you say...")

0. NONE,
1. 1 TIME,
2. 2,
3. 3,
4. 4,
5. 5 TO 9, OR
6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

IF OFCTIM4=0 OR DK/REFUSAL THEN GO TO PRSNLD4

PRVENT5

Q8. / PRVENT5

In the last 6 months, did you and a doctor or other health provider talk about specific things you could do to prevent illness?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RXSTP

9. / RXSTP

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

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

DK/REFUSAL/NOT ASCERTAINED --> RTALLCR

NRXWHY

10. / NRXWHY

Did you and a doctor or other health provider talk about the reasons you might want to take a medicine?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

NRXWYNT

11. / NRXWYNT

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RXBST

12. / RXBST

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RTALLCR

13. / RTALLCR

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

(IF NEEDED: "Please do not include any dental care you may have received.")

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

CARNES4

14. / CARNES4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PRSNLD4

15. / PRSNLD4

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

Do you have a personal doctor?

- 1. YES
- 2. NO -----> INTRO.SPDR

DK/REFUSAL/NOT ASCERTAINED --> INTRO.SPDR

DRTMS

16. / DRTMS

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

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

(READ LIST IF NEEDED: "Would you say...")

- 0. NONE, -----> RATEDR4
- 1. 1 TIME,
- 2. 2,
- 3. 3,
- 4. 4,
- 5. 5 TO 9, OR
- 6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> RATEDR4

DREXPL4

17. / DREXPL4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRLSTN4

18. / DRLSTN4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRESPU4

19. / DRESPU4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTMEN4

20. / DRTMEN4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DIFFDR

21. / DIFFDR

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

- 1. YES
- 2. NO -----> RATEDR4

DK/REFUSAL/NOT ASCERTAINED --> RATEDR4

DRINFO

22. / DRINFO

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)



RATEDR4

23. / RATEDR4

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

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

INTRO.SPDR

Now I'm going to ask you some questions about specialists. When you answer these questions, please do NOT include dental visits or care you got when you stayed overnight in a hospital

NDSPDR4

24. / NDSPDR4

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

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

(CLARIFY IF NEEDED: "Specialists are doctors who specialize in one area of health care. Please include all doctors you consider to be specialists, but do not include any dental visits.")

(IWER: IF RESPONDENT ASKS IF A PARTICULAR TYPE OF DOCTOR IS A SPECIALIST, CLARIFY, "I don't have any information about that, so please just interpret it however it seems best to you.")

(CLARIFY IF NEEDED: "You can interpret this question however it seems best to you.")

- 1. YES
- 2. NO -----> INTRO.PLAN

DK/REFUSAL/NOT ASCERTAINED --> INTRO.PLAN

PRBSEE4

25. / PRBSEE4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

SPDRS

26. / SPDRS

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

(CLARIFY IF NEEDED: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. Would you say you've seen...")

(READ LIST IF NEEDED: "Would you say...")

- 0. NONE, -----> INTRO.PLAN
- 1. 1 SPECIALIST,
- 2. 2,
- 3. 3,
- 4. 4, OR
- 5. 5 OR MORE SPECIALISTS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> INTRO.PLAN

RTSPDR4

27. / RTSPDR4

We want to know your rating of the specialist you saw most often in the last 6 months.

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

(Clarify if necessary: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.")

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN

Now I'm going to ask you some questions about your experience with your health plan.

LOOMAT4

28. / LOOMAT4

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

- 1. YES
- 2. NO -----> CLCSRV4

DK/REFUSAL/NOT ASCERTAINED --> CLCSRV4

UNDINF4

29. / UNDINF4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CLCSRV4

30. / CLCSRV4

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

- 1. YES
- 2. NO -----> PLPRWK4

DK/REFUSAL/NOT ASCERTAINED --> PLPRWK4

PBCLCS4

31. / PBCLCS4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CSRESP

32. / CSRESP

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLPRWK4

33. / PLPRWK4

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

- 1. YES
- 2. NO -----> RTPLEXP

DK/REFUSAL/NOT ASCERTAINED --> RTPLEXP

PBPLPW4

34. / PBPLPW4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTPLEXP

35. / RTPLEXP

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

00            01 02 03 04 05 06 07 08 09    10

DK/REFUSAL/NOT ASCERTAINED

HPMDEQ

35a. / HPMDEQ

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

- 1. YES
  - 2. NO -----> POSTHP
- DK/REFUSAL/NOT ASCERTAINED

EZMDHP

35b. / EZMDHP

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

- 1. NEVER
  - 2. SOMETIMES
  - 3. USUALLY
  - 4. ALWAYS
- DK/REFUSAL/NOT ASCERTAINED

POSTHP

35c. / POSTHP

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

- 1. YES
  - 2. NO -----> DTLKTF
- DK/REFUSAL/NOT ASCERTAINED

EZPOST

35d. / EZPOST

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

- 1. NEVER
  - 2. SOMETIMES
  - 3. USUALLY
  - 4. ALWAYS
- DK/REFUSAL/NOT ASCERTAINED

INTRO.SHLTHIS

INTRO.SHLTHIS

A health provider could be a general doctor, a specialist doctor, a nurse practitioner, a physician assistant, a nurse or anyone else you would see for health care. Please keep this in mind as you answer the following questions.

SHLTHIS

35e. / SHLTHIS

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

- 1. YES
- 2. NO -----> CHTREAT

DK/REFUSAL/NOT ASCERTAINED --> CHTREAT

EUNDER

35f. / EUNDER

How much effort was made to help you understand your health issue? Would you say...?

(READ LIST)

- 1. NO EFFORT AT ALL,
- 2. A LITTLE EFFORT WAS MADE,
- 3. SOME EFFORT WAS MADE, or
- 4. A LOT OF EFFORT WAS MADE

DK/REFUSAL/NOT ASCERTAINED

ELISTEN

35g. / ELISTEN

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

(READ LIST IF NECESSARY)

- 1. NO EFFORT AT ALL,
- 2. A LITTLE EFFORT WAS MADE,
- 3. SOME EFFORT WAS MADE, or
- 4. A LOT OF EFFORT WAS MADE

DK/REFUSAL/NOT ASCERTAINED

EINCLUD

35h. / EINCLUD

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

(READ LIST IF NECESSARY)

- 1. NO EFFORT AT ALL,
- 2. A LITTLE EFFORT WAS MADE,
- 3. SOME EFFORT WAS MADE, or
- 4. A LOT OF EFFORT WAS MADE

DK/REFUSAL/NOT ASCERTAINED

## CHTREAT

35i. / CHTREAT

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

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

1. YES
2. NO -----> RESPCHT

DK/REFUSAL/NOT ASCERTAINED --> RESPCHT

## PCTREAT

35j. / PCTREAT

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

1. YES
  2. NO
- DK/REFUSAL/NOT ASCERTAINED

## BSTREAT

35k. / BSTREAT

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

1. YES
  2. NO
- DK/REFUSAL/NOT ASCERTAINED

## EASYQC

35l. / EASYQC

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DTLKTF

35m. / DTLKTF

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DINTER

35n. / DINTER

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

(READ LIST IF NECESSARY)

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

DK/REFUSAL/NOT ASCERTAINED

DRRUDE

35o. / DRRUDE

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

(READ LIST IF NECESSARY)

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

DK/REFUSAL/NOT ASCERTAINED

TRUSTDR

35p. / TRUSTDR

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED



REGDENT

35q. / REGDENT

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

1. YES
  2. NO
- DK/REFUSAL/NOT ASCERTAINED

DNTASAP

35r.

In the last 6 months, if you needed to see a dentist right away because of a DENTAL EMERGENCY, did you get to see a dentist as soon as you wanted?

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?
5. I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS (DO NOT READ)

DK/REFUSAL/NOT ASCERTAINED

HLTSTA4

36. / HLTSTA4

In general, how would you rate your overall health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

MNTLSTAT

37. / MNTLSTAT

In general, how would you rate your overall MENTAL OR EMOTIONAL health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

FLUSHOTQ

38. / FLUSHOTQ

Have you had either a flu shot or flu spray in the nose since July 1, 2014?

- 1. YES
- 2. NO
- 3. DON'T KNOW
- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

NOWSMOK

39. / NOWSMOK

Do you now smoke cigarettes or use tobacco...

(READ LIST)

- 1. EVERY DAY,
- 2. SOME DAYS, OR
- 3. NOT AT ALL? -----> ASPDAY
- 4. DON'T KNOW (DO NOT READ) -----> ASPDAY
- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ) --> ASPDAY

ADVQUIT9

40. / ADVQUIT9

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PATCH9

41. / PATCH9

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

WILLPWR9

42. / WILLPWR9

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPDAY

43. / ASPDAY

Do you take aspirin daily or every other day?

(IF NEEDED: "Would you say YES or NO?")

(IWER: If the R asks about whether a particular medication or Brand name is considered aspirin, you may provide the following clarification:

Aspirin: Bayer and Bufferin

Not Aspirin: Tylenol, Motrin, Aleve, Advil, ibuprofen and acetaminophen)

1. YES
2. NO
3. DON'T KNOW
9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPUSF

44. / ASPUSF

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

(IF NEEDED: "Would you say YES or NO?")

1. YES
2. NO
3. DON'T KNOW

9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPPRV

45. / ASPPRV

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.AWCOND  
INTRO.AWCOND

When I read the following list, please tell me if you are aware that you have any of these conditions.

PHAWCD.(1-3)  
46.(1-3) / PHAWCD.(1-3)

[First,/(Next/How About...)]

1. "High cholesterol"
2. "High blood pressure"
3. "Parent or sibling who had a heart attack before the age of 60"

(IWER IF NECESSARY: "Are you aware if you have this condition?")

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.DRCOND  
INTRO.DRCOND

When I read the following list, please tell me if a doctor has ever told you that you have any of these conditions.

PHDRCD.(1-4)  
47.(1-4) / PHDRCD.(1-4)

[First,/(Next/How About...)]

1. "A heart attack"
2. "Angina or coronary heart disease"
3. "A stroke"
4. "Any kind of diabetes or high blood sugar"

(IWER IF NECESSARY: "Has a doctor ever told you that you have this condition?")

[FOR PHDRCD.2: (IWER IF NEEDED, CLARIFY: Angina pectoris (an-JYE-nuh or AN-jin-uh PECK-ter-iss) is severe pain in the chest associated with insufficient blood supply to the heart.)]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

SMPROB

48. / SMPROB

I have just a few more questions.

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

- 1. YES
- 2. NO -----> TKMED

DK/REFUSAL/NOT ASCERTAINED --> TKMED

PRBLST

49. / PRBLST

Is this a condition or problem that has lasted for at least 3 months? [Please do NOT include pregnancy or menopause.]

[(IWER IF NEEDED, CLARIFY: Menopause (men-ne-paws) is the time in a woman's life when she stops having menstrual periods. It is sometimes called 'the change of life' or 'the change'.)]

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

TKMED

50. / TKMED

Do you now need or take medicine prescribed by a doctor? [Please do NOT include birth control.]

- 1. YES
- 2. NO -----> QAGE4

DK/REFUSAL\NOT ASCERTAINED --> QAGE4

TRTCOND

51. / TRTCOND

Is this medicine to treat a condition that has lasted for at least three months? [Please do NOT include pregnancy or menopause.]

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

## QAGE4

52. / QAGE4

What is your age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your last birthday.")

(READ LIST IF NEEDED, "Are you...")

1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## QGENDER

53. / QGENDER

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

(ASK IF NECESSARY, "Are you male or female?")

1. MALE
2. FEMALE

## EDUCAT

54. / EDUCAT

What is the highest grade or level of school that you have COMPLETED?  
Did you complete...

(IWER: IF R SAYS HE/SHE HAD NON-ACADEMIC TRAINING, SUCH AS TRADE SCHOOL, PROBE: "Did you receive a high school diploma or GED?")

(IWER: ACADEMIC TRAINING BEYOND A HIGH SCHOOL DIPLOMA THAT DOES NOT LEAD TO A BACHELORS DEGREE, SHOULD BE CODED "4". IF R WENT TO BUSINESS SCHOOL OR GOT A 3-YEAR NURSING DEGREE, ENTER "4")

(IWER: IF R OFFERS MORE THAN ONE RESPONSE, FOR EXAMPLE: "SOME HIGH SCHOOL OR GED", ENTER THE HIGHEST NUMBER THAT APPLIES.)

(READ LIST)

1. 8TH GRADE OR LESS,
2. SOME HIGH SCHOOL, BUT DID NOT GRADUATE,
3. HIGH SCHOOL GRADUATE OR GED,
4. SOME COLLEGE OR 2-YEAR DEGREE,
5. 4-YEAR COLLEGE GRADUATE, OR
6. MORE THAN A 4-YEAR COLLEGE DEGREE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

LATINO

55. / LATINO

Are you of Hispanic or Latino origin or descent?

1. YES / HISPANIC OR LATINO
2. NO / NOT HISPANIC OR LATINO

DK/REFUSAL/NOT ASCERTAINED

INTRO.RACE

INTRO.RACE

I am going to read a list of race categories. For each category, please say YES or NO if it describes your race. I must ask you about all categories in case more than one applies.

PQRACE3.(1-6)

56.(1-6) / PQRACE3.(1-6)

[(Are you)]

1. "White"
2. "Black or African-American"
3. "Asian"
4. "Native Hawaiian or other Pacific Islander"
5. "American Indian or Alaska Native"
6. "Some other race"

(IWER: IF R REPLIES "WHY ARE YOU ASKING ABOUT MY RACE?" SAY "We ask about your race for demographic purposes only. We want to be sure that the people we survey accurately represent the racial diversity of managed care enrollees in this country.")

(IWER: If R answers with a category not listed here, such as "HISPANIC" or "AMERICAN" or "MIXED RACE", probe using the category "OTHER".)

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

ALL.DONE

THANKS.SCREEN.

Those are all the questions I have.

Thank you for taking part in this important interview.

Have a nice (day/evening). Good bye.

RETURN TO COVERSHEET

## DIAL.SCREEN

DS. INTERVIEWER: YOU MAY DO THE INTERVIEW WITH ONLY THE PARENT OR GUARDIAN WHO KNOWS MOST ABOUT FNAME LNAME'S HEALTH CARE.  
PHONE NUMBER ---> [1 CELL PHONE - HAND DIAL ([AREA\$]) [FRST3\$] - [LAST4\$] /\*\*\* \*\*\*-\*\*\*\*]

(IWER: THIS IS A PROXY INTERVIEW.)

Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may be monitored and recorded for quality control. May I please speak with the person who knows the most about [NAME OF CHILD]'s health care?

(IF NEEDED: "We are conducting an important study to find out how satisfied families are with Oregon Health Plan. The results of the study will help Oregon Health Plan improve the care they provide and will also help consumers when they choose health care plans.")

(IF NEEDED: "The interview is completely confidential and voluntary, and will not affect your child's health care or benefits in any way.")

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

01. CONTINUE
02. ALREADY COMPLETED AND MAILED SURVEY BACK
03. NEW PHONE NUMBER
04. REFUSAL
05. APPOINTMENT
06. NEVER HEARD OF R
07. KNOWS R BUT HAS NO NEW NUMBER FOR R
08. RNA, ANS MACH, RETURN TO COVERSHEET
09. LANGUAGE PROBLEM -- SPEAKS SPANISH
10. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH

IF DIAL.SCREEN = 01, GO TO RE.INTRO

IF DIAL.SCREEN = 02, GO TO MAIL.SCREEN

IF DIAL.SCREEN = 03, ENTER NEW NUMBER ON COVERSHEET AND RE-DIAL

RETURN TO COVERSHEET



## MAIL.SCREEN

MS. INTERVIEWER: WE STILL NEED TO CONDUCT A TELEPHONE INTERVIEW EVEN  
THOUGH R SAYS THEY'VE SENT BACK THE MAIL SURVEY.

I'm sorry, but we haven't received your survey back -- it may have been lost in the mail. And since the deadline for mailing surveys has passed, we're now in the telephone phase of this study. May I continue?

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

1. CONTINUE
2. REFUSAL BECAUSE ALREADY COMPLETED AND MAILED SURVEY BACK
3. REFUSAL
4. APPOINTMENT

IF MAIL.SCREEN = 1, GO TO RE.INTRO  
RETURN TO COVERSHEET

## RE.INTRO

RE.INTRO. (INTERVIEWER: READ PARENS TEXT IF R ISN'T PERSON WHO ANSWERED  
PHONE OR HAS NOT HEARD IT YET.)

(Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may be monitored and recorded for quality control.)

We are conducting an important study to find out how satisfied families are with Oregon Health Plan. The results of the study will help Oregon Health Plan improve the care they provide and will also help consumers when they choose health care plans.

The interview is completely confidential and voluntary, and will not affect your child's health care or benefits in any way.

(IF R ASKS: "How long will this take?", EXPLAIN: "The questions should take about 12-15 minutes to answer.")

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

("DK" NOT ALLOWED)

1. CONTINUE
2. APPOINTMENT
3. REFUSAL
4. LANGUAGE PROBLEM -- SPEAKS SPANISH
5. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH
6. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)
7. RETURN TO CS

## SEX

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

1. MALE
2. FEMALE

## SPAN.VAR

(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

1. Spanish
2. English

## MEMBER

Q1. / MEMBER

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

Our records show that your child is now in Oregon Health Plan. Is that right?

(IWER: IF R SAYS "LEFT PLAN" OR "SWITCHED PLANS" OR "NO LONGER INSURED" ENTER "2". IF R IS NOT SURE IF HE/SHE IS PART OF Oregon Health Plan, ENTER "2".)

1. YES --> CK.PLMSTCR
2. NO

DK/REFUSAL/NOT ASCERTAINED

## NPLNAME

Q2. / NPLNAME

What is the name of your child's health plan?

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS Oregon Health Plan]

[(ENTER 5 IF R SAYS: MEDICAID)]

(IF R SAYS SOMETHING CLOSE TO Oregon Health Plan, ENTER "2")

(IF R NOT SURE OF PLAN NAME, ENTER "2")

1. EXACT MATCH -----> CK.PLMSTCR
2. POSSIBLE MATCH -----> PLNAME
3. NOT A MATCH -----> PLNAME
4. CHILD NO LONGER INSURED -----> NO.INSUR
5. CHILD INSURED BY MEDICAID BUT DOESN'T -----> CK.PLMSTCR  
KNOW PLAN NAME
6. CHILD INSURED BUT NOT BY MEDICAID -----> NO.INSUR

PLNAME

Q2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)

CK.PLMSTCR:

-----

IF NPLNAME = NOT A MATCH (3), GO TO END.SCREEN

INTRO.INCARE

INTRO.INCARE

Now I'm going to ask you some questions about your child's health care. When you answer these questions, please do NOT include dental visits or care your child got when [he/she] stayed overnight in a hospital.

INCARE

Q3. / INCARE

In the last 6 months, did your child have an illness, injury, or condition that NEEDED CARE RIGHT AWAY in a clinic, emergency room, or doctor's office?

1. YES
2. NO -----> APMAKE4

DK/REFUSAL/NOT ASCERTAINED --&gt; APMAKE4

CARSN4

Q4. / CARSN4

In the last 6 months, when your child NEEDED CARE RIGHT AWAY, how often did your child get care as soon as [he/she] needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

APMAKE4

Q5. / APMAKE4

In the last 6 months, did you make any appointments for a CHECK-UP OR ROUTINE CARE for your child at a doctor's office or clinic?

1. YES
2. NO -----> OFCTIM4

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

APGET4

Q6. / APGET4

In the last 6 months, when you made an appointment for a CHECK-UP OR ROUTINE CARE for your child at a doctor's office or clinic, how often did you get an appointment as soon as your child needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

OFCTIM4

Q7. / OFCTIM4

In the last 6 months, NOT counting the times your child went to an emergency room, how many times did [he/she] go to a doctor's office or clinic to get health care?

(IWER: IF NECESSARY: "Your best estimate would be fine.")

(IWER: IF NEEDED CLARIFY: "Please don't include dental care your child received.")

(IWER: IF NEEDED CLARIFY, "Please include ALL doctor visits including those for routine, regular care and for an illness or injury.")

(READ LIST IF NEEDED: "Would you say...")

0. NONE,
1. 1 TIME,
2. 2,
3. 3,
4. 4,
5. 5 TO 9, OR
6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

IF OFCTIM4=0 OR DK/REFUSAL THEN GO TO CHSCHL

## PRVENT5

Q8. / PRVENT5

In the last 6 months, did you and your child's doctor or other health provider talk about specific things you could do to prevent illness in your child?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## OFTQUES

9. / OFTQUES

In the last 6 months, how often did you have your questions answered by your child's doctor or other health providers? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## RXSTP

10. / RXSTP

In the last 6 months, did you and your child's doctor or other health provider talk about starting or stopping a prescription medicine for your child?

1. YES
2. NO -----> RTALLCR

DK/REFUSAL/NOT ASCERTAINED --&gt; RTALLCR

## NRXWHY

11. / NRXWHY

Did you and a doctor or other health provider talk about the reasons you might want your child to take a medicine?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

NRXWYNT

12. / NRXWYNT

Did you and a doctor or other health provider talk about the reasons you might NOT want your child to take a medicine?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

RXBST

13. / RXBST

When you talked about your child starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for your child?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

RTALLCR

14. / RTALLCR

Using ANY NUMBER FROM 0 TO 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your child's health care in the last 6 months?

(IF NEEDED: "Please do not include any dental care your child may have received.")

00            01 02 03 04 05 06 07 08 09    10

DK/REFUSAL/NOT ASCERTAINED

CARNES4

15. / CARNES4

In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## CHSCHL

16. / CHSCHL

Is your child now enrolled in any kind of school or daycare?

1. YES
2. NO -----> MEDEQUIP

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

## CONTSCHL

17. / CONTSCHL

In the last 6 months, did you need your child's doctors or other health providers to contact a school or daycare center about your child's health or health care?

1. YES
2. NO -----> MEDEQUIP

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

## HELPCONT

18. / HELPCONT

In the last 6 months, did you get the help you needed from your child's doctors or other health providers in contacting your child's school or daycare?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## MEDEQUIP

19. / MEDEQUIP

Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment. In the last 6 months, did you get or try to get any special medical equipment or devices for your child?

1. YES
2. NO -----> SPCTHY

DK/REFUSAL/NOT ASCERTAINED --> SPCTHY

## EZMDEQ

20. / EZMDEQ

In the last 6 months, how often was it easy to get special medical equipment or devices for your child? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## HELPMDEQ

21. / HELPMDEQ

Did anyone from your child's health plan, doctor's office, or clinic help you get special medical equipment or devices for your child?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## SPCTHY

22. / SPCTHY

In the last 6 months, did you get or try to get special therapy such as physical, occupational, or speech therapy for your child?

1. YES
2. NO -----> TCPBLM

DK/REFUSAL/NOT ASCERTAINED --&gt; TCPBLM

## EZTHP

23. / EZTHP

In the last 6 months, how often was it easy to get this therapy for your child? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## HELPTHP

24. / HELPTHP

Did anyone from your child's health plan, doctor's office, or clinic help you get this therapy for your child?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## TCPBLM

25. / TCPBLM

In the last 6 months, did you get or try to get treatment or counseling for your child for an emotional, developmental, or behavioral problem?

1. YES
2. NO -----> PLUSCARE

DK/REFUSAL/NOT ASCERTAINED --&gt; PLUSCARE



EZTC

26. / EZTC

In the last 6 months, how often was it easy to get this treatment or counseling for your child? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTC

27. / HELPTC

Did anyone from your child's health plan, doctor's office, or clinic help you get this treatment or counseling for your child?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

PLUSCARE

28. / PLUSCARE

In the last 6 months, did your child get care from more than one kind of health care provider or use more than one kind of health care service?

1. YES
2. NO -----> PRSNLD4

DK/REFUSAL/NOT ASCERTAINED --&gt; PRSNLD4

HLPCOORD

29. / HLPCOORD

In the last 6 months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these different providers or services?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

PRSNLD4

30. / PRSNLD4

A personal doctor is the one your child would see if [he/she] needs a check-up, has a health problem or gets sick or hurt.

Does your child have a personal doctor?

1. YES
2. NO -----> INTRO.SPDR

DK/REFUSAL/NOT ASCERTAINED --&gt; INTRO.SPDR

DRTMS

31. / DRTMS

In the last 6 months, how many times did your child visit  
[his/her] personal doctor for care?

(IF NEEDED: "Your best estimate would be fine.")

(READ LIST IF NEEDED: "Would you say...")

0. NONE, -----> RATEDR4
1. 1 TIME,
2. 2,
3. 3,
4. 4,
5. 5 TO 9, OR
6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> RATEDR4

PBDRNG

31a. / PBDRNG

In the last 6 months, how often did you have a hard time speaking with  
or understanding your child's personal doctor because you spoke different  
languages? Would you say...?

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DREXPL4

32. / DREXPL4

In the last 6 months, how often did your child's personal  
doctor explain things about your child's health in a way that was  
easy to understand? Would you say...?

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRLSTN4

33. / DRLSTN4

In the last 6 months, how often did your child's personal doctor listen carefully to you? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRESPU4

34. / DRESPU4

In the last 6 months, how often did your child's personal doctor show respect for what you had to say? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CABLTLK

35. / CABLTLK

Is your child able to talk with doctors about [his/her] health care?

1. YES
2. NO -----> DRTMEN4

DK/REFUSAL/NOT ASCERTAINED --> DRTMEN4

CDREXPL

36. / CDREXPL

In the last 6 months, how often did your child's personal doctor explain things in a way that was easy for YOUR CHILD to understand? Would you say...

(READ LIST)

1. NEVER
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTMEN4

37. / DRTMEN4

In the last 6 months, how often did your child's personal doctor spend enough time with your child? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTLKU

38. / DRTLKU

In the last 6 months, did your child's personal doctor talk with you about how your child is feeling, growing, or behaving?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

DIFFDR

39. / DIFFDR

In the last 6 months, did your child get care from a doctor or other health provider besides [his/her] personal doctor?

1. YES
2. NO -----> RATEDR4

DK/REFUSAL/NOT ASCERTAINED --> RATEDR4

DRINFO

40. / DRINFO

In the last 6 months, how often did your child's personal doctor seem informed and up-to-date about the care your child got from these doctors or other health providers? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RATEDR4

41. / RATEDR4

Using ANY NUMBER FROM 0 TO 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your child's personal doctor?

00            01 02 03 04 05 06 07 08 09    10

DK/REFUSAL/NOT ASCERTAINED

COND3MO

42. / COND3MO

Does your child have any medical, behavioral, or other health conditions that have lasted for more than 3 MONTHS?

(IWER: "We are looking for a condition that the child CURRENTLY HAS that has lasted for more than 3 months." )

1. YES
2. NO -----> INTRO.SPDR

DK/REFUSAL/NOT ASCERTAINED --> INTRO.SPDR

DRUNCON

43. / DRUNCON

Does your child's personal doctor understand how these medical, behavioral, or other health conditions affect your child's day-to-day life?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

DRUNFAM

44. / DRUNFAM

Does your child's personal doctor understand how your child's medical, behavioral, or other health conditions affect your FAMILY'S day-to-day life?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.SPDR

INTRO.SPDR

Now I'm going to ask you some questions about specialists. When you answer these questions, please do NOT include dental visits or care your child got when (he/she) stayed overnight in a hospital.

NDSPDR4

45. / NDSPDR4

SPECIALISTS are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.

In the last 6 months, did you make any appointments for your child to see a specialist?

(CLARIFY IF NEEDED: "Specialists are doctors who specialize in one area of health care. Please include all doctors you consider to be specialists, but do not include any dental visits.")

(IWER: IF RESPONDENT ASKS IF A PARTICULAR TYPE OF DOCTOR IS A SPECIALIST, CLARIFY, "I don't have any information about that, so please just interpret it however it seems best to you.")

(CLARIFY IF NEEDED: "You can interpret this question however it seems best to you.")

1. YES
2. NO -----> INTRO.PLAN

DK/REFUSAL/NOT ASCERTAINED --> INTRO.PLAN

PRBSEE4

46. / PRBSEE4

In the last 6 months, how often did you get an appointment for your child to see a specialist as soon as you needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

SPDRS

47. / SPDRS

How many specialists has your child seen in the last 6 months?

(CLARIFY IF NEEDED: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. Would you say your child has seen...")

(READ LIST IF NEEDED: "Would you say...")

0. NONE, -----> INTRO.PLAN
1. 1 SPECIALIST,
2. 2,
3. 3,
4. 4, OR
5. 5 OR MORE SPECIALISTS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> INTRO.PLAN

RTSPDR4

48. / RTSPDR4

We want to know your rating of the specialist your child saw most often in the last 6 months.

Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

(Clarify if necessary: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.")

00            01 02 03 04 05 06 07 08 09    10

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN

INTRO.PLAN

Now I'm going to ask you some questions about your experience with your child's health plan.

CLCSR4

49. / CLCSR4

In the last 6 months, did you get information or help from customer service at your child's health plan?

1. YES
2. NO -----> PLPRWK4

DK/REFUSAL/NOT ASCERTAINED --> PLPRWK4

PBCLCS4

50. / PBCLCS4

In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CSRESP

51. / CSRESP

In the last 6 months, how often did customer service staff at your child's health plan treat you with courtesy and respect? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLPRWK4

52. / PLPRWK4

In the last 6 months, did your child's health plan give you any forms to fill out?

1. YES
2. NO -----> RTPLEXP

DK/REFUSAL/NOT ASCERTAINED --&gt; RTPLEXP

PBPLPW4

53. / PBPLPW4

In the last 6 months, how often were the forms from your child's health plan easy to fill out? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTPLEXP

54. / RTPLEXP

Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your child's health plan?

00            01 02 03 04 05 06 07 08 09    10

DK/REFUSAL/NOT ASCERTAINED

CHPRES

55. / CHPRES

In the last 6 months, did you get or refill any prescription medicines for your child?

1. YES
2. NO -----> REGDENT

DK/REFUSAL/NOT ASCERTAINED --&gt; REGDENT



## EZPRES

56. / EZPRES

In the last 6 months, how often was it easy to get prescription medicines for your child through [his/her] health plan? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## HELPPRES

57. / HELPPRES

Did anyone from your child's health plan, doctor's office, or clinic help you get your child's prescription medicines?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## REGDENT

57a. / REGDENT

A regular dentist is one you would go to for check-ups and cleanings or when [he/she] has a cavity or tooth pain.

Does your child have a regular dentist?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## DNTASAP

57b. / DNTASAP

In the last 6 months, if your child needed to see a dentist right away because of a DENTAL EMERGENCY, did [he/she] get to see a dentist as soon as you wanted? Would you say...?

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?
5. DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS (DO NOT READ)

DK/REFUSAL/NOT ASCERTAINED

## CHTREAT

57c. / CHTREAT

Choices for your child's treatment or health care can include choices about medicine, surgery, or other treatment.

In the last 6 months, did your provider tell you there was more than one choice for your child's treatment or health care?

1. YES
2. NO -----> RESPCHT

DK/REFUSAL/NOT ASCERTAINED --> RESPCHT

## PCTREAT

57d. / PCTREAT

In the last 6 months, did your provider talk with you about the pros and cons of each choice for your child's treatment or health care?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## BSTREAT

57e. / BSTREAT

In the last 6 months, when there was more than one choice for your child's treatment or health care, did your provider ask you which choice was best for your child?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## RESPCHT

57f. / RESPCHT

In the last 6 months, how often did your child's provider respect what health care and treatment choices you thought work best for your child? Would you say...?

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED

## ENCORQC

57g. / ENCORQC

In the last 6 months, how often did your child's provider encourage you to ask questions and raise concerns? Would you say...?

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED

## EASYQC

57h. / EASYQC

In the last 6 months, how often did your child's provider make it easy for you to ask questions and raise concerns? Would you say...?

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED

## HLTSTA4

58. / HLTSTA4

In general, how would you rate your child's overall health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## MNTLSTAT

59. / MNTLSTAT

In general, how would you rate your child's overall MENTAL OR EMOTIONAL health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## CUSEMED

60. / CUSEMED

Other than vitamins, does your child currently need or use medicine prescribed by a doctor?

1. YES
2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --&gt; MOREMED

## WHYMEDA

61. / WHYMEDA

Is this because of any medical, behavioral, or other health condition?

1. YES
2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

## WHYMEDB

62. / WHYMEDB

Is this a condition that has lasted or is expected to last for at least 12 months?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## MOREMED

63. / MOREMED

Does your child need or use more medical care, more mental health services, or more educational services than is usual for most children of the same age?

1. YES
2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

## WHYMOREA

64. / WHYMOREA

Is this because of any medical, behavioral, or other health condition?

1. YES
2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

## WHYMOREB

65. / WHYMOREB

Is this a condition that has lasted or is expected to last for at least 12 months?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## LIMITED

66. / LIMITED

Is your child limited or prevented in any way in [his/her] ability to do the things most children of the same age can do?

1. YES
2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --> SPECTHP

## WHYLIMA

67. / WHYLIMA

Is this because of any medical, behavioral, or other health condition?

1. YES
2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --&gt; SPECTHP

## WHYLIMB

68. / WHYLIMB

Is this a condition that has lasted or is expected to last for at least 12 months?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## SPECTHP

69. / SPECTHP

Does your child need or get special therapy such as physical, occupational, or speech therapy?

1. YES
2. NO -----> CHCOUNS

DK/REFUSAL/NOT ASCERTAINED --&gt; CHCOUNS

## WHYSTA

70. / WHYSTA

Is this because of any medical, behavioral, or other health condition?

1. YES
2. NO -----> CHCOUNS

DK/REFUSAL/NOT ASCERTAINED --&gt; CHCOUNS

## WHYSTB

71. / WHYSTB

Is this a condition that has lasted or is expected to last for at least 12 months?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## CHCOUNS

72. / CHCOUNS

Does your child have any kind of emotional, developmental, or behavioral problem for which [he/she] needs or gets treatment or counseling?

1. YES
2. NO -----> CAGE

DK/REFUSAL/NOT ASCERTAINED --&gt; CAGE

## TIMCOUNA

73. / TIMCOUNA

Has this problem lasted or is it expected to last for at least 12 months?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## CAGE

74. / CAGE

I have just a few more questions.

What is YOUR CHILD'S age?

(IWER: ENTER 00 IF LESS THAN 1 YEAR OLD)

(IWER: IF NEEDED CLARIFY, "Please answer based on your child's age as of their last birthday.")

\_\_\_ ENTER CHILD'S AGE

DK/REFUSAL/NOT ASCERTAINED

## CGENDER

75. / CGENDER

(IF NEEDED: "Is your child male or female?")

1. MALE
2. FEMALE

REFUSAL/NOT ASCERTAINED

## LATINO

76. / LATINO

Is your child of Hispanic or Latino origin or descent?

1. YES / HISPANIC OR LATINO
2. NO / NOT HISPANIC OR LATINO

DK/REFUSAL/NOT ASCERTAINED

## INTRO.RACE

INTRO.RACE

I am going to read a list of race categories. For each category, please say YES or NO if it describes your child's race. I must ask you about all categories in case more than one applies.

PQRACE3.(1-6)

77.1-6) / PQRACE3.(1-6)

[(Is your child)]

1. "White"
2. "Black or African-American"
3. "Asian"
4. "Native Hawaiian or other Pacific Islander"
5. "American Indian or Alaska Native"
6. "Some other race"

(IWER: IF R REPLIES "WHY ARE YOU ASKING ABOUT MY CHILD'S RACE?" SAY "We ask about your child's race for demographic purposes only. We want to be sure that the people we survey accurately represent the racial diversity of managed care enrollees in this country.")

(IWER: If R answers with a category not listed here, such as "HISPANIC" or "AMERICAN" or "MIXED RACE", probe using the category "OTHER".)

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

PAGE

78. / PAGE

Now I have a few questions about you. What is YOUR age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your last birthday.")

(READ IF NEEDED, "Are you...")

0. UNDER 18,
1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PGENDER

79. / PGENDER

(IWER: ENTER RESPONDENT'S SEX. "DK" NOT ALLOWED.)

(IWER: IF NECESSARY ASK, "Are you male or female?")

1. MALE
2. FEMALE

EDUCAT

80. / EDUCAT

What is the highest grade or level of school that you have COMPLETED?  
Did you complete...

(IWER: IF R SAYS HE/SHE HAD NON-ACADEMIC TRAINING, SUCH AS TRADE  
SCHOOL, PROBE: "Did you receive a high school diploma or GED?")

(IWER: ACADEMIC TRAINING BEYOND A HIGH SCHOOL DIPLOMA THAT DOES NOT  
LEAD TO A BACHELORS DEGREE, SHOULD BE CODED "4". IF R WENT TO BUSINESS  
SCHOOL OR GOT A 3-YEAR NURSING DEGREE, ENTER "4")

(IWER: IF R OFFERS MORE THAN ONE RESPONSE, FOR EXAMPLE: "SOME HIGH  
SCHOOL OR GED", ENTER THE HIGHEST NUMBER THAT APPLIES.)

(READ LIST)

1. 8TH GRADE OR LESS,
2. SOME HIGH SCHOOL, BUT DID NOT GRADUATE,
3. HIGH SCHOOL GRADUATE OR GED,
4. SOME COLLEGE OR 2-YEAR DEGREE,
5. 4-YEAR COLLEGE GRADUATE, OR
6. MORE THAN A 4-YEAR COLLEGE DEGREE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHRELT

81. / CHRELT

How are you related to the child?

(READ IF NEEDED: "Are you the ...")

1. MOTHER OR FATHER,
2. GRANDPARENT,
3. AUNT OR UNCLE,
4. OLDER BROTHER OR SISTER,
5. OTHER RELATIVE,
6. LEGAL GUARDIAN, OR
7. SOMEONE ELSE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ALL.DONE

THANKS.SCREEN.

Those are all the questions I have.

Thank you for taking part in this important interview.

Have a nice (day/evening). Good bye.