



Intercommunity Health Network CCO
CAHPS® 5.0 Medicaid Survey

Banner Book Report

June 2017
Measurement Year 2016



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METHODOLOGY

Introduction

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

Survey Milestones

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

Sampling

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

Questionnaires

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

Selection of Cases for Analysis

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

Composites, Overall Ratings, and Measures for Reporting

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

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

Composite: Getting Needed Care

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

Q25/46. Getting appointments with specialists

Composite: Getting Care Quickly

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

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

Composite: How Well Doctors Communicate

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

Q18/33. Personal doctor listened carefully to you

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

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

Composite: Customer Service

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

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

Composite: Shared Decision Making

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

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

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

Rating Questions

Q13/14. Rating of all health care

Q23/41. Rating of personal doctor

Q27/47. Rating of specialist doctor

Q35/54. Rating of health plan

Composite: Access to Specialized Services (Child only)

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

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

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

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

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

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

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

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

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

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

Comparisons, Statistical Testing, Scoring, and Weighting

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

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

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

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

Sample Disposition

Category	Adult		Child	
	Intercommunity Health Network	Overall	Intercommunity Health Network	Overall
**First mailing - sent	900	16200	900	16200
*First mailing - usable survey returned	172	2801	122	2168
Second mailing - sent	720	13319	765	13616
*Second mailing - usable survey returned	57	978	49	886
*Phone - usable surveys	76	1303	146	2255
Total - usable surveys	305	5082	317	5309
†Ineligible: According to population criteria‡	20	346	11	200
†Ineligible: Deceased	1	31	0	0
†Ineligible: Mentally or physically unable to complete survey	7	195	0	0
†Ineligible: Language barrier	1	64	3	59
Incorrect address AND incorrect phone number	55	848	40	710
Refusal/Returned survey blank	28	672	53	829
Nonresponse - Unavailable by mail or phone	483	8962	476	9093
Adjusted Response Rate	35.0%	32.7%	35.8%	33.3%

*Included in response rate numerator

†Excluded from adjusted response rate denominator

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

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

Response/Non-Response Comparison

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

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

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

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

Adult

Gender / Age	Non-Respondents	Respondents	Difference
Male	214 44.9%	129 42.3%	-2.57%
Female	263 55.1%	176 57.7%	2.57%
18-24	96 20.1%	24 7.9%	-12.26%
25-34	140 29.4%	59 19.3%	-10.01%
35-44	102 21.4%	46 15.1%	-6.30%
45-54	75 15.7%	61 20.0%	4.28%
55-64	49 10.3%	95 31.1%	20.88%
65-74	7 1.5%	14 4.6%	3.12%
75 or Older	8 1.7%	6 2.0%	0.29%

Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	252 50.6%	165 52.1%	1.45%
Female	246 49.4%	152 47.9%	-1.45%
<3	99 19.9%	58 18.3%	-1.58%
4-7	123 24.7%	78 24.6%	-0.09%
8-12	146 29.3%	102 32.2%	2.86%
13 or older	130 26.1%	79 24.9%	-1.18%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER									
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	EX &					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	##	##	##	##	##	TI		GOOD	POOR	MALE	MALE
Q1																				
YES	305	5060	24	55	42	61	89	19	247					11	16	271	206	82	118	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%	~	~	~	~	~100%	100%	100%	100%	100%	100%	100%
NOT ANSWERED		22																		
VALID CASES	305	5060	24	55	42	61	89	19	247					11	16	271	206	82	118	174
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q3 YES	130 44%	2017 41%	9 39%	30 56%	16 39%	24 40%	38 43%	7 37%	107 44%	~	~	~	~	~	7 70%	5 31%	118 44%	76 38%*	47 57%*	40 35%*	85 49%*
NO	166 56%	2921 59%	14 61%	24 44%	25 61%	36 60%	51 57%	12 63%	137 56%	~	~	~	~	~	3 30%	11 69%	149 56%	126 62%*	35 43%*	75 65%*	88 51%*
NOT ANSWERED		9	1	1	1	1			3						1		4	4		3	1
VALID CASES	296	4938	23	54	41	60	89	19	244						10	16	267	202	82	115	173
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247						11	16	271	206	82	118	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	GOOD	POOR	MALE	MALE		
									##	##	##	##	##	TI	IC	IC	&	&		
Q4 NEVER	1 0.8%	42 2%				1 5%			1 1%						1 ~0.9%	1 ~2%		1 ~1%		
SOMETIMES	15 12%	268 15%		6 ~21%	3 19%	3 14%	2 6%		12 12%						1 20%	13 12%	8 11%	5 11%	4 11%	10 13%
USUALLY	29 24%	466 26%	3 38%	7 24%	1 6%	4 19%	10 29%	2 29%	27 28%						27 ~25%	20 29%	7 16%	7 19%	21 27%	
ALWAYS	76 63%	1045 57%	5 63%	16 55%	12 75%	13 62%	22 65%	5 71%	58 59%					7 ~100%	4 80%	68 62%	42 60%	31 70%	26 70%	47 59%
#ALWAYS + USUALLY (NET)	105 87%	1511 83%	8 100%	23 79%	13 81%	17 81%	32 94%	7 100%	85 87%					7 ~100%	4 80%	95 87%	62 89%	38 86%	33 89%	68 86%
TOP BOX SCORE	76 63%	1045 57%	5 63%	16 55%	12 75%	13 62%	22 65%	5 71%	58 59%					7 ~100%	4 80%	68 62%	42 60%	31 70%	26 70%	47 59%
NOT ANSWERED	9	196	1	1		3	4		9						9	6	3	3	6	
VALID CASES	121	1821	8	29	16	21	34	7	98					7	5	109	70	44	37	79
NUMBER OF RESPONDENTS	130	2017	9	30	16	24	38	7	107					7	5	118	76	47	40	85
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q3 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			PAN-	PAN-	&	&	FE-	
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
Q5																				
YES	187 63%	3365 68%*	10 45%~	34 63%	26 62%~	34 56%	64 72%*	13 68%~	155 64%	~	~	~	~	7 ~ 64%	11 69%~	169 63%~	116 57%*	64 78%*	68 59%	115 66%
NO	110 37%	1561 32%*	12 55%~	20 37%	16 38%~	27 44%	25 28%*	6 32%~	89 36%	~	~	~	~	4 ~ 36%	5 31%~	99 37%~	87 43%*	18 22%*	47 41%	59 34%
NOT ANSWERED	8	156	2	1					3						3	3	3			3
VALID CASES	297	4926	22	54	42	61	89	19	244					11	16	268	203	82	115	174
NUMBER OF RESPONDENTS	305 100%	5082 100%	24 100%	55 100%	42 100%	61 100%	89 100%	19 100%	247 100%					11 100%	16 100%	271 100%	206 100%	82 100%	118 100%	174 100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER				
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER ##	AS- IAN ##	NATV ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE- MALE
Q6 NEVER	1 0.6%	83 3%*	~	~	~	1 3%~	~	1 0.7%~	~	~	~	~	~	~	~	1 0.6%~	1 1%~	~	~	~	~	1 0.9%~
SOMETIMES	42 24%	590 19%	6 67%~	9 30%~	4 16%~	6 20%~	14 24%	1 8%~	34 24%~	~	~	~	~	~	4 40%~	35 23%~	25 24%	15 25%	15 25%	25 23%	15 25%	25 23%
USUALLY	41 24%	884 29%	1 11%~	9 30%~	7 28%~	7 23%~	14 24%	2 15%~	35 25%~	~	~	~	~	4 57%~	1 10%~	40 26%~	20 19%	20 33%*	9 15%*	32 30%*	9 15%*	32 30%*
ALWAYS	88 51%	1472 49%	2 22%~	12 40%~	14 56%~	16 53%~	31 53%	10 77%~	71 50%~	~	~	~	~	3 43%~	5 50%~	79 51%~	59 56%	25 42%	37 61%	49 46%	37 61%	49 46%
#ALWAYS + USUALLY (NET)	129 75%	2356 78%	3 33%~	21 70%~	21 84%~	23 77%~	45 76%	12 92%~	106 75%~	~	~	~	~	7 100%~	6 60%~	119 77%~	79 75%	45 75%	46 75%	81 76%	46 75%	81 76%
TOP BOX SCORE	88 51%	1472 49%	2 22%~	12 40%~	14 56%~	16 53%~	31 53%	10 77%~	71 50%~	~	~	~	~	3 43%~	5 50%~	79 51%~	59 56%	25 42%	37 61%	49 46%	37 61%	49 46%
NOT ANSWERED	15	336	1	4	1	4	5		14						1	14	11	4	7	8	7	8
VALID CASES	172	3029	9	30	25	30	59	13	141					7	10	155	105	60	61	107	61	107
NUMBER OF RESPONDENTS	187 100%	3365 100%	10 100%	34 100%	26 100%	34 100%	64 100%	13 100%	155 100%					7 100%	11 100%	169 100%	116 100%	64 100%	68 100%	115 100%	68 100%	115 100%

[ASKED IF Q5 = YES]

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-##	AS- IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q7 NONE	75 25%	1242 26%	7 30%	12 22%	10 24%	22 37%*	18 20%	4 21%	58 24%	~	~	~	~	~	18%~	31%~	66%~	63% 31%*	8% 10%*	36% 31%	37% 22%
1 TIME	67 23%	927 19%	4 17%	14 25%	8 19%	9 15%	23 26%	6 32%~	55 23%	~	~	~	~	~	18%~	31%~	60%~	49% 24%	15% 19%	28% 24%	37% 22%
2	52 18%	878 18%	3 13%	13 24%	7 17%	7 12%	16 18%	5 26%~	41 17%	~	~	~	~	~	36%~	25%~	47%~	35% 17%	16% 20%	17% 15%	34% 20%
3	29 10%	581 12%	3 13%	5 9%	4 10%	5 8%	6 7%	3 16%~	22 9%	~	~	~	~	~	9%~	13%~	24%~	20% 10%	7% 9%	9% 8%	17% 10%
4	26 9%	402 8%	3 13%	5 9%	3 7%	7 12%	8 9%	~ 10%	24 10%	~	~	~	~	~	9%~	~	26%~	17% 8%	9% 11%	11% 9%	15% 9%
5 TO 9	34 11%	571 12%	3 13%	2 4%*	8 19%	6 10%	13 15%	1 5%~	31 13%	~	~	~	~	~	~	~	31%~	15% 7%*	17% 21%*	11% 9%	23% 13%
10 OR MORE TIMES	13 4%	248 5%	~	4 7%	2 5%	3 5%	4 5%	~ 5%	12 5%	~	~	~	~	~	9%~	~	13%~	4% 2%*	9% 11%*	4% 3%	9% 5%
NOT ANSWERED	9	233	1				2 1		4								4	3	1	2	2
VALID CASES	296	4849	23	55	42	59	88	19	243						11	16	267	203	81	116	172
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247						11	16	271	206	82	118	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE
Q8 #YES	156 71%	2535 72%	10 63%~	21 49%~	20 63%~	25 68%~	59 87%*	13 87%~	131 72%~	~	~	~	~	~	6 67%~	5 45%~	143 72%~	100 72%	49 68%	60 76%	90 67%
NO	63 29%	984 28%	6 38%~	22 51%~	12 38%~	12 32%~	9 13%*	2 13%~	52 28%~	~	~	~	~	~	3 33%~	6 55%~	56 28%~	39 28%	23 32%	19 24%	44 33%
NOT ANSWERED	2	88					2	2								2	1	1	1	1	
VALID CASES	219	3519	16	43	32	37	68	15	183					9	11	199	139	72	79	134	
NUMBER OF RESPONDENTS	221	3607	16	43	32	37	70	15	185					9	11	201	140	73	80	135	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER				
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND PAC ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE		
Q9 YES	115 53%	1857 53%	8 50%~	20 48%~	15 47%~	24 65%~	36 52%	7 47%~	99 54%~	~	~	~	~	5 ~ 56%~	3 27%~	108 54%~	65 46%*	44 62%*	44 56%	68 51%		
Q9 NO	104 47%	1655 47%	8 50%~	22 52%~	17 53%~	13 35%~	33 48%	8 53%~	84 46%~	~	~	~	~	4 ~ 44%~	8 73%~	91 46%~	75 54%*	27 38%*	35 44%	66 49%		
NOT ANSWERED	2	95	1		1			2						2		2		1 1				
VALID CASES	219	3512	16	42	32	37	69	15	183							9	11	199	140	71	79	134
NUMBER OF RESPONDENTS	221	3607	16	43	32	37	70	15	185							9	11	201	140	73	80	135
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
Q10 #YES	102 91%	1690 93%	7 88%~	19 95%~	12 92%~	21 88%~	32 91%~	7 100%~	88 92%~	~	~	~	~	~	5 ~100%~	3 100%~	96 91%~	59 91%~	37 90%~	39 91%~	61 92%~
NO	10 9%	121 7%	1 13%~	1 5%~	1 8%~	3 13%~	3 9%~	8 8%~	~	~	~	~	~	~	~	9 9%~	6 9%~	4 10%~	4 9%~	5 8%~	
NOT ANSWERED	3	46			2		1	3								3		3		1	2
VALID CASES	112	1811	8	20	13	24	35	7	96					5	3	105	65	41	43	66	
NUMBER OF RESPONDENTS	115 100%	1857 100%	8 100%	20 100%	15 100%	24 100%	36 100%	7 100%	99 100%					5 100%	3 100%	108 100%	65 100%	44 100%	44 100%	68 100%	

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			&	&				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	POOR		
									WHTE	##	##	##	##	##	TI	IC	IC	GOOD	POOR	
																		MALE	MALE	
Q11																				
#YES	81	1346	4	15	10	14	29	5	71					4	1	78	46	29	29	50
	72%	74%	50%~	75%~	71%~	58%~	83%~	71%~	73%~	~	~	~	~	~ 80%~	33%~	74%~	71%~	69%~	67%~	75%~
NO	32	462	4	5	4	10	6	2	26					1	2	28	19	13	14	17
	28%	26%	50%~	25%~	29%~	42%~	17%~	29%~	27%~	~	~	~	~	~ 20%~	67%~	26%~	29%~	31%~	33%~	25%~
NOT ANSWERED	2	49			1		1		2						2		2		1	1
VALID CASES	113	1808	8	20	14	24	35	7	97					5	3	106	65	42	43	67
NUMBER OF RESPONDENTS	115	1857	8	20	15	24	36	7	99					5	3	108	65	44	44	68
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER ##	AS- IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q12 #YES	88 79%	1378 77%	7 88%~	17 85%~	12 86%~	15 63%~	27 79%~	5 71%~	75 78%~	~	~	~	~	~	5 ~100%~	3 ~100%~	82 78%~	54 83%~	28 68%~	32 76%~	53 79%~
NO	24 21%	420 23%	1 13%~	3 15%~	2 14%~	9 38%~	7 21%~	2 29%~	21 22%~	~	~	~	~	~	~	23 ~22%~	11 17%~	13 32%~	10 24%~	14 21%~	
NOT ANSWERED	3	59			1		2		3							3		3		2	1
VALID CASES	112	1798	8	20	14	24	34	7	96					5	3	105	65	41	42	67	
NUMBER OF RESPONDENTS	115	1857	8	20	15	24	36	7	99					5	3	108	65	44	44	68	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE					RACE						ETHNICITY	HEALTH STATUS		GENDER					
	INHE TOT ADLTL	OHP TOT ADLTL	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE		
Q13 WORST HEALTH CARE POSSIBLE	1 0.5%	19 0.5%	~	~	~	~	1%~	~	~	~	~	~	~	~	~	1 ~0.5%	~	1 1%	~	1 ~0.7%		
01		22 0.6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
02	1 0.5%	39 1%	~	~	3%~	~	~	~	~	~	~	~	~	~	~	1 ~0.5%	1 0.7%~	~	1 1%~	~		
03	3 1%	63 2%	~	~	3%~	3%~	1%	~	~	~	~	~	~	~	~	3 2%~	2 1%	1 1%	1 1%	2 1%		
04	7 3%	95 3%	1 6%~	1 2%~	~	2 5%~	3 4%	~	~	~	~	~	~	~	~	7 4%~	2 1%	5 7%	2 3%	5 4%		
05	20 9%	234 7%	1 6%~	3 7%~	2 6%~	6 16%~	6 9%	2 13%~	~	~	~	~	~	~	~	17 9%~	1 9%~	19 10%~	8 6%*	12 17%*	7 9%	13 10%
06	7 3%	215 6%*	2 13%~	1 2%~	1 3%~	~	3 4%	~	~	~	~	~	~	~	~	7 4%~	2 1%	5 7%	2 3%	5 4%		
07	27 12%	442 13%	3 19%~	8 19%~	5 16%~	1 3%~	8 12%	2 13%~	~	~	~	~	~	~	~	26 14%~	~	19 13%~	8 14%	8 10%	19 14%	
08	62 28%	779 22%*	3 19%~	13 30%~	11 34%~	8 22%~	20 29%	2 13%~	~	~	~	~	~	4 ~44%~	4 36%~	56 28%~	40 29%	18 25%	27 34%	32 24%		
09	34 16%	592 17%	1 6%~	5 12%~	5 16%~	6 16%~	10 15%	6 40%~	~	~	~	~	~	2 22%~	3 27%~	29 15%~	22 16%	10 14%	8 10%	25 19%		
BEST HEALTH CARE POSSIBLE	57 26%	1011 29%	5 31%~	12 28%~	6 19%~	13 35%~	16 24%	3 20%~	~	~	~	~	~	3 ~33%~	3 27%~	50 25%~	44 31%*	12 17%*	23 29%	32 24%		
#8-10 (NET)	153 70%	2382 68%	9 56%~	30 70%~	22 69%~	27 73%~	46 68%	11 73%~	~	~	~	~	~	9 ~100%~	10 91%~	135 68%~	106 76%*	40 56%*	58 73%	89 66%		

Continued

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER				
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE-MALE
9-10 (NET)	91 42%	1603 46%	6 38%~	17 40%~	11 34%~	19 51%~	26 38%	9 60%~	73 40%~	~	~	~	~	5 ~ 56%~	6 55%~	79 40%~	66 47%*	22 31%*			31 39%	57 43%
NOT ANSWERED		2 96					2		2							2		1			1	1
VALID CASES	219	3511	16	43	32	37	68	15	183					9	11	199	140	72			79	134
NUMBER OF RESPONDENTS	221	3607	16	43	32	37	70	15	185					9	11	201	140	73			80	135
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%			100%	100%
MEAN	7.95	7.94	7.81	8.14	7.78	8.00	7.78	8.27	7.84					8.89	8.55	7.87	8.28	7.26			8.03	7.87
p stat_(*=Sig @ p<=.05)		.941	~	~	~	~.361	~	~	~	~	~	~	~	~	~	~	~.001*	.000*			.678	.427

[ASKED IF Q7 >= 1 TIME]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2																		
	INHE	OHP	18	25	35	45	55	65	BLCK	AS-	NATV	AMER								
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	IAN	HAW/	IND/								
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AMER	ILND	NATV	OTHR	MUL-	HIS-	HIS-	NOT	VERY		
									##	##	##	##	##	TI	IC	IC	GOOD	FAIR		
																	GOOD	POOR		
																	GOOD	POOR		
																	MALE	MALE		
Q14																				
NEVER	3	90		2	1				2							3	1	2	1	2
	1%	3%		~ 5%	3%	~	~	~	1%	~	~	~	~	~	~	2%	0.7%	3%	1%	1%
SOMETIMES	30	539		5	3	7	11	2	25					1	1	27	13	15	8	20
	14%	15%		~ 12%	9%	~ 19%	16%	13%	14%	~	~	~	~	~ 11%	9%	14%	9%*	21%	10%	15%
USUALLY	68	1150		8	13	10	10	22	57					2	4	60	38	29	22	45
	31%	33%		50%	31%	~ 31%	27%	32%	20%	~ 31%	~	~	~	~ 22%	36%	30%	27%	40%*	28%	33%
ALWAYS	118	1722		8	22	18	20	36	99					6	6	109	87	26	47	68
	54%	49%		50%	52%	~ 56%	54%	52%	67%	~ 54%	~	~	~	~ 67%	55%	55%	63%*	36%*	60%	50%
#ALWAYS + USUALLY (NET)	186	2872		16	35	28	30	58	156					8	10	169	125	55	69	113
	85%	82%		100%	83%	~ 88%	81%	84%	87%	~ 85%	~	~	~	~ 89%	91%	85%	90%*	76%*	88%	84%
TOP BOX SCORE	118	1722		8	22	18	20	36	99					6	6	109	87	26	47	68
	54%	49%		50%	52%	~ 56%	54%	52%	67%	~ 54%	~	~	~	~ 67%	55%	55%	63%*	36%*	60%	50%
NOT ANSWERED	2	106		1			1		2						2	1	1		2	
VALID CASES	219	3501		16	42	32	37	69	183					9	11	199	139	72	78	135
NUMBER OF RESPONDENTS	221	3607		16	43	32	37	70	185					9	11	201	140	73	80	135
	100%	100%		100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER			
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL-TI TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE-MALE
Q15 YES	240 81%	3993 82%	18 75%~	41 76%	33 79%~	50 82%	74 84%	16 89%~	198 81%	~	~	~	~	~	10 91%~	12 75%~	218 81%~	158 77%*	72 90%*	88 75%	146 85%*
NO	57 19%	904 18%	6 25%~	13 24%	9 21%~	11 18%	14 16%	2 11%~	46 19%	~	~	~	~	~	1 9%~	4 25%~	50 19%~	47 23%*	8 10%*	29 25%	26 15%*
NOT ANSWERED	8	185		1			1	1	3								3	1	2	1	2
VALID CASES	297	4897	24	54	42	61	88	18	244						11	16	268	205	80	117	172
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247						11	16	271	206	82	118	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE		
Q16 NONE	50 22%	792 21%	5 29%	7 18%	8 26%	14 30%	13 19%	1 8%	41 22%	~	~	~	~	~	11%	3 27%	45 22%	36 25%	11 16%	23 28%	26 19%	
1 TIME	67 30%	995 27%	6 35%	13 33%	14 45%	9 20%	20 29%	4 31%	57 31%	~	~	~	~	~	22%	2 18%	63 31%	52 36%*	13 19%*	27 33%	39 29%	
2	39 17%	792 21%	3 18%	8 21%	2 6%	6 13%	13 19%	5 38%	31 17%	~	~	~	~	~	33%	3 36%	4 17%	34 17%	26 18%	12 18%	14 17%	23 17%
3	22 10%	483 13%	~	4 10%	1 3%	6 13%	8 12%	1 8%	16 9%	~	~	~	~	~	22%	~	20 10%	12 8%	8 12%	8 10%	12 9%	
4	23 10%	279 7%	2 12%	1 3%	3 10%	8 17%	8 12%	~	22 12%	~	~	~	~	~	~	1 9%	22 11%	8 6%*	14 21%*	5 6%	18 13%*	
5 TO 9	17 8%	312 8%	1 6%	4 10%	1 3%	3 7%	6 9%	2 15%	14 8%	~	~	~	~	~	~	1 9%	15 7%	8 6%	8 12%	6 7%	11 8%	
10 OR MORE TIMES	5 2%	88 2%	~	2 5%	2 6%	~	1 1%	~	3 2%	~	~	~	~	~	11%	~	5 2%	3 2%	2 3%	~	5 4%~	
NOT ANSWERED	17	252	1	2	2	4	5	3	14					1	1	14	13	4	5	12		
VALID CASES	223	3741	17	39	31	46	69	13	184					9	11	204	145	68	83	134		
NUMBER OF RESPONDENTS	240	3993	18	41	33	50	74	16	198					10	12	218	158	72	88	146		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%		

[ASKED IF Q15 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2																		
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									AMER		ALSK			TI			GOOD	POOR	MALE	MALE
Q17																				
NEVER	2 1%	51 2%			1 4%		1 2%		2 1%							2 1%	2 2%		1 2%	1 0.9%
SOMETIMES	9 5%	190 6%	1 9%	2 6%	1 4%	2 6%	3 5%		8 6%						1 14%	8 5%	6 6%	3 5%	2 3%	7 7%
USUALLY	32 19%	579 20%	3 27%	4 13%	3 13%	7 22%	12 21%	2 17%	28 20%					1 13%		31 19%	19 18%	11 19%	9 15%	23 21%
ALWAYS	129 75%	2109 72%	7 64%	26 81%	18 78%	23 72%	40 71%	10 83%	105 73%					7 88%	6 86%	118 74%	81 75%	43 75%	48 80%	76 71%
#ALWAYS + USUALLY (NET)	161 94%	2688 92%	10 91%	30 94%	21 91%	30 94%	52 93%	12 100%	133 93%					8 100%	6 86%	149 94%	100 93%	54 95%	57 95%	99 93%
TOP BOX SCORE	129 75%	2109 72%	7 64%	26 81%	18 78%	23 72%	40 71%	10 83%	105 73%					7 88%	6 86%	118 74%	81 75%	43 75%	48 80%	76 71%
NOT ANSWERED	1	20	1												1		1			1
VALID CASES	172	2929	11	32	23	32	56	12	143					8	7	159	108	57	60	107
NUMBER OF RESPONDENTS	173	2949	12	32	23	32	56	12	143					8	8	159	109	57	60	108
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2																		
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									AMER					TI			GOOD	POOR		
									##	##	##	##	##				GOOD	POOR		
									WHTE								MALE	FE-		
																	MALE			
Q18																				
NEVER	4 2%	63 2%		1 3%	1 4%		2 4%		4 3%							4 3%	3 3%	1 2%	2 3%	2 2%
SOMETIMES	11 6%	222 8%	3 25%	1 3%	1 4%	4 13%	2 4%		10 7%						1 13%	10 6%	7 6%	4 7%	2 3%	9 8%
USUALLY	31 18%	572 20%	3 25%	5 16%	3 13%	5 16%	13 23%	2 17%	27 19%					1 13%	1 13%	29 18%	18 17%	12 21%	9 15%	22 20%
ALWAYS	127 73%	2066 71%	6 50%	25 78%	18 78%	23 72%	39 70%	10 83%	102 71%					7 88%	6 75%	116 73%	81 74%	40 70%	47 78%	75 69%
#ALWAYS + USUALLY (NET)	158 91%	2638 90%	9 75%	30 94%	21 91%	28 88%	52 93%	12 100%	129 90%					8 100%	7 88%	145 91%	99 91%	52 91%	56 93%	97 90%
TOP BOX SCORE	127 73%	2066 71%	6 50%	25 78%	18 78%	23 72%	39 70%	10 83%	102 71%					7 88%	6 75%	116 73%	81 74%	40 70%	47 78%	75 69%
NOT ANSWERED		26																		
VALID CASES	173	2923	12	32	23	32	56	12	143					8	8	159	109	57	60	108
NUMBER OF RESPONDENTS	173	2949	12	32	23	32	56	12	143					8	8	159	109	57	60	108
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2																			
	INHE	OHP	18	25	35	45	55	65	BLCK	AS-	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	IAN	HAW/	IND/				HIS-	VERY	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-		ILND	ALSK	OTHR	MUL-	HIS-	PAN-	GOOD	FAIR			
									AMER					TI	IC	IC	&	&	FE-		
									##	##	##	##	##				GOOD	POOR	MALE	MALE	
Q19																					
NEVER	3	55			1	1	1		3							3	2	1	1	2	
	2%	2%	~	~	4%~	3%~	2%	~	2%~	~	~	~	~	~	~	2%~	2%	2%	2%	2%	
SOMETIMES	8	211		2	1		5		8							8	4	4	3	5	
	5%	7%	~	6%~	4%~	~	9%	~	6%~	~	~	~	~	~	~	5%~	4%	7%	5%	5%	
USUALLY	26	437	4	2	3	7	7	3	25					1		26	17	9	6	20	
	15%	15%	33%~	6%~	13%~	23%~	13%	25%~	18%~	~	~	~	~	~	13%~	~	16%~	16%	10%	19%	
ALWAYS	135	2221	8	28	18	23	43	9	106					7	8	121	85	43	50	80	
	78%	76%	67%~	88%~	78%~	74%~	77%	75%~	75%~	~	~	~	~	~	88%~	100%~	77%~	79%	75%	83%	75%
#ALWAYS + USUALLY (NET)	161	2658	12	30	21	30	50	12	131					8	8	147	102	52	56	100	
	94%	91%	100%~	94%~	91%~	97%~	89%	100%~	92%~	~	~	~	~	~	100%~	100%~	93%~	94%	91%	93%	93%
TOP BOX SCORE	135	2221	8	28	18	23	43	9	106					7	8	121	85	43	50	80	
	78%	76%	67%~	88%~	78%~	74%~	77%	75%~	75%~	~	~	~	~	~	88%~	100%~	77%~	79%	75%	83%	75%
NOT ANSWERED	1	25					1		1							1	1			1	
VALID CASES	172	2924	12	32	23	31	56	12	142					8	8	158	108	57	60	107	
NUMBER OF RESPONDENTS	173	2949	12	32	23	32	56	12	143					8	8	159	109	57	60	108	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2	18	25	35	45	55	65	BLCK	AS-	NATV	AMER				EX &				
	INHE	OHP	TO	TO	TO	TO	TO	AND	OR	IAN	ILND	ALSK			NOT	VERY	FAIR			
	TOT	TOT	24	34	44	54	64	OVER	AFR-	AMER					HIS-	HIS-	GOOD	POOR	FE-	
	ADLT	ADLT							##	##	##	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q20																				
NEVER	5	87		1	1	1	2		5						5	4	1	2	3	
	3%	3%		~ 3%	4%	3%	4%		3%						~ 3%	4%	2%	3%	3%	
SOMETIMES	12	259		1	2	4	4	1	11						12	7	5	4	8	
	7%	9%		~ 3%	9%	13%	7%	8%	8%						~ 8%	6%	9%	7%	7%	
USUALLY	42	721		6	8	3	7	16	2	37				1	2	39	26	15	10	32
	24%	25%		50%	25%	13%	22%	29%	17%	26%				~ 13%	25%	25%	24%	26%	17%	30%*
ALWAYS	114	1860		6	22	17	20	34	9	90				7	6	103	72	36	44	65
	66%	64%		50%	69%	74%	63%	61%	75%	63%				~ 88%	75%	65%	66%	63%	73%	60%*
#ALWAYS + USUALLY (NET)	156	2581		12	30	20	27	50	11	127				8	8	142	98	51	54	97
	90%	88%		100%	94%	87%	84%	89%	92%	89%				~ 100%	100%	89%	90%	89%	90%	90%
TOP BOX SCORE	114	1860		6	22	17	20	34	9	90				7	6	103	72	36	44	65
	66%	64%		50%	69%	74%	63%	61%	75%	63%				~ 88%	75%	65%	66%	63%	73%	60%*
NOT ANSWERED		22																		
VALID CASES	173	2927		12	32	23	32	56	12	143				8	8	159	109	57	60	108
NUMBER OF RESPONDENTS	173	2949		12	32	23	32	56	12	143				8	8	159	109	57	60	108
	100%	100%		100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH	GENDER		
	OT1	OT2														ITY	STATUS				
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				VERY						
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			HIS-	HIS-	GOOD	FAIR			
									AMER		ILLND	NATV	OTHR	MUL-	IC	IC	&	&			
									WHTE	##	##	##	##	##	TI		GOOD	POOR	MALE	MALE	
Q21																					
YES	112 65%	1800 62%	9 75%~	21 66%~	16 70%~	19 61%~	38 68%	6 55%~	99 70%~	~	~	~	~	~ 50%~	4 38%~	3 68%~	106 59%*	63 75%*	43 67%	40 66%	70
NO	59 35%	1107 38%	3 25%~	11 34%~	7 30%~	12 39%~	18 32%	5 45%~	42 30%~	~	~	~	~	~ 50%~	4 63%~	5 32%~	51 41%*	44 25%*	14 33%	20 34%	36
NOT ANSWERED	2	42					1	1	2							2	2				2
VALID CASES	171	2907	12	32	23	31	56	11	141					8	8	157	107	57	60	106	
NUMBER OF RESPONDENTS	173	2949	12	32	23	32	56	12	143					8	8	159	109	57	60	108	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER ##	NATV AS- IAN ##	AMER HAW/ IND/ PAC ALSK ##	OTH MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE- MALE
Q22 NEVER	7 6%	108 6%	1 11%~	1 5%~	2 13%~	1 5%~	2 5%~	7 7%~	~	~	~	~	~	~	7 7%~	6 10%~	1 2%~	1 1%~	2 5%~	5 7%~
SOMETIMES	15 14%	264 15%	2 22%~	~	3 20%~	3 16%~	5 13%~	1 14%~	~	~	~	~	~	~	1 33%~	14 13%~	5 8%~	9 21%~	6 15%~	9 13%~
USUALLY	33 30%	517 30%	4 44%~	5 24%~	6 40%~	5 26%~	9 24%~	4 30%~	~	~	~	~	1 25%~	1 33%~	32 30%~	21 34%~	11 26%~	9 23%~	24 35%~	
ALWAYS	56 50%	861 49%	2 22%~	15 71%~	4 27%~	10 53%~	22 58%~	1 17%~	48 48%~	~	~	~	~	3 75%~	1 33%~	52 50%~	30 48%~	22 51%~	23 58%~	31 45%~
#ALWAYS + USUALLY (NET)	89 80%	1378 79%	6 67%~	20 95%~	10 67%~	15 79%~	31 82%~	5 83%~	78 79%~	~	~	~	~	4 100%~	2 67%~	84 80%~	51 82%~	33 77%~	32 80%~	55 80%~
TOP BOX SCORE	56 50%	861 49%	2 22%~	15 71%~	4 27%~	10 53%~	22 58%~	1 17%~	48 48%~	~	~	~	~	3 75%~	1 33%~	52 50%~	30 48%~	22 51%~	23 58%~	31 45%~
NOT ANSWERED	1	50			1										1	1			1	
VALID CASES	111	1750	9	21	15	19	38	6	99					4	3	105	62	43	40	69
NUMBER OF RESPONDENTS	112	1800	9	21	16	19	38	6	99					4	3	106	63	43	40	70
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE					RACE						ETHNICITY	HEALTH STATUS		GENDER			
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q23 WORST PERSONAL DOCTOR POSSIBLE	2 0.9%	23 0.6%	~	3%~	1 3%~	1 3%~	~	~	2 1%~	~	~	~	~	~	~	2 1%~	2 1%~	~	2 2%~	~
01	3 1%	32 0.9%	~	~	1 3%~	1 2%~	1 1%	~	3 2%~	~	~	~	~	~	~	3 1%~	~	3 4%	1 1%	2 1%
02		39 1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03	4 2%	60 2%	~	~	1 3%~	1 2%~	2 3%	~	4 2%~	~	~	~	~	~	~	4 2%~	2 1%	2 3%	~	4 3%~
04	4 2%	72 2%	1 6%~	1 3%~	~	1 2%~	1 1%	~	4 2%~	~	~	~	~	~	~	4 2%~	2 1%	2 3%	2 2%	2 1%
05	13 6%	188 5%	1 6%~	1 3%~	1 3%~	7 16%~	2 3%	1 8%~	12 7%~	~	~	~	~	1 11%~	~	12 6%~	11 8%	2 3%	8 10%	5 4%
06	9 4%	158 4%	1 6%~	2 5%~	1 3%~	1 2%~	4 6%	~	9 5%~	~	~	~	~	~	~	9 4%~	4 3%	5 7%	3 4%	6 4%
07	16 7%	327 9%	2 11%~	2 5%~	~	3 7%~	8 11%	~	15 8%~	~	~	~	~	~	~	16 8%~	9 6%	6 9%	6 7%	10 7%
08	35 16%	632 17%	3 17%~	8 21%~	4 13%~	7 16%~	9 13%	3 23%~	26 14%~	~	~	~	~	2 22%~	2 18%~	31 15%~	22 15%	11 16%	11 13%	23 17%
09	42 19%	691 19%	4 22%~	9 24%~	4 13%~	4 9%~	16 23%	3 23%~	38 21%~	~	~	~	~	2 22%~	1 9%~	40 20%~	26 18%	13 19%	17 21%	23 17%
BEST PERSONAL DOCTOR POSSIBLE	95 43%	1506 40%	6 33%~	14 37%~	18 58%~	20 44%~	27 39%	6 46%~	71 39%~	~	~	~	~	4 44%~	8 73%~	83 41%~	68 47%	24 35%	32 39%	60 44%
#8-10 (NET)	172 77%	2829 76%	13 72%~	31 82%~	26 84%~	31 69%~	52 74%	12 92%~	135 73%~	~	~	~	~	8 89%~	11 100%~	154 75%~	116 79%	48 71%	60 73%	106 79%

Continued

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE	
9-10 (NET)	137 61%	2197 59%	10 56%~	23 61%~	22 71%~	24 53%~	43 61%	9 69%~	109 59%~	~	~	~	~	~	6 67%~	9 82%~	123 60%~	94 64%	37 54%	49 60%	83 61%
NOT ANSWERED	17	265		3	2	5	4	3	14					1	1	14	12	4	6	11	
VALID CASES	223	3728	18	38	31	45	70	13	184					9	11	204	146	68	82	135	
NUMBER OF RESPONDENTS	240	3993	18	41	33	50	74	16	198					10	12	218	158	72	88	146	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	
MEAN	8.39	8.34	8.28	8.42	8.48	8.04	8.39	8.92	8.21					8.78	9.55	8.31	8.53	8.00	8.17	8.47	
p stat_(*=Sig @ p<=.05)		.732	~	~	~	~1.00	~	~	~	~	~	~	~	~	~	~	~.167	.072	.249	.442	

[ASKED IF Q15 = YES]

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE		
Q24 YES	113 38%	1933 40%	7 32%	19 35%	18 43%	18 31%	40 45%	7 37%	97 40%	~	~	~	~	~	5 45%	5 31%	103 39%	56 28%*	52 63%*	44 38%	66 39%
NO	181 62%	2928 60%	15 68%	36 65%	24 57%	40 69%	49 55%	12 63%	146 60%	~	~	~	~	~	6 55%	11 69%	164 61%	145 72%*	30 37%*	72 62%	105 61%
NOT ANSWERED	11	221	2			3			4							4	5			2	3
VALID CASES	294	4861	22	55	42	58	89	19	243					11	16	267	201	82	116	171	
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			HIS-	&	FAIR			
									AMER		ILND	NATV	OTHR	MUL-	IC	GOOD	POOR	MALE		
									##	##	##	##	##	TI	IC	GOOD	POOR	MALE		
Q25																				
NEVER	7 6%	110 6%	1 ~	5%~	1 ~	6%~	5 13%~	7 ~							7 ~	4 7%	3 6%	2 5%~	5 8%~	
SOMETIMES	18 16%	323 17%	2 29%~	1 5%~	3 18%~	4 22%~	6 15%~	1 14%~	18 19%~						18 ~	6 11%	11 22%	7 17%~	11 17%~	
USUALLY	35 32%	543 29%	3 43%~	6 32%~	4 24%~	5 28%~	11 28%~	5 71%~	31 33%~					1 ~	1 20%~	32 32%~	19 34%	14 28%	9 21%~	25 38%~
ALWAYS	51 46%	893 48%	2 29%~	11 58%~	10 59%~	8 44%~	17 44%~	1 14%~	39 41%~					4 ~	4 80%~	44 44%~	27 48%	22 44%	24 57%~	25 38%~
#ALWAYS + USUALLY (NET)	86 77%	1436 77%	5 71%~	17 89%~	14 82%~	13 72%~	28 72%~	6 86%~	70 74%~					5 ~	5 100%~	76 75%~	46 82%	36 72%	33 79%~	50 76%~
TOP BOX SCORE	51 46%	893 48%	2 29%~	11 58%~	10 59%~	8 44%~	17 44%~	1 14%~	39 41%~					4 ~	4 80%~	44 44%~	27 48%	22 44%	24 57%~	25 38%~
NOT ANSWERED	2	64			1		1		2						2		2		2	
VALID CASES	111	1869	7	19	17	18	39	7	95					5	5	101	56	50	42	66
NUMBER OF RESPONDENTS	113	1933	7	19	18	18	40	7	97					5	5	103	56	52	44	66
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2	18	25	35	45	55	65	BLCK	AS-	NATV	AMER				EX &	FAIR	MALE	MALE		
	INHE	OHP	TO	TO	TO	TO	TO	AND	AFR-	IAN	ILND	ALSK	OTHR	MUL-	HIS-	HIS-	GOOD	POOR	FE-		
	TOT	TOT	ADLT	ADLT	ADLT	ADLT	ADLT	ADLT	WHTE	##	##	##	##	##	IC	IC	GOOD	POOR	MALE	MALE	
Q26																					
NONE	7 6%	77 4%	1 ~	2 5%~	1 12%~	2 6%~	2 5%~	5 ~	5%~	~	~	~	~	1 ~	20%~	6 ~	6%~	4 7%	3 6%	2 5%~	4 6%~
1 SPECIALIST	61 55%	991 53%	4 57%~	11 58%~	8 47%~	12 67%~	18 46%~	6 86%~	52 55%~	~	~	~	~	2 ~	40%~	3 60%~	55 54%~	35 63%	25 50%	23 53%~	36 55%~
2	23 21%	498 27%	2 29%~	4 21%~	5 29%~	3 17%~	8 21%~	1 14%~	19 20%~	~	~	~	~	2 ~	40%~	2 40%~	20 20%~	14 25%	7 14%	9 21%~	14 22%~
3	11 10%	191 10%	2 ~	1 11%~	2 6%~	5 11%~	5 13%~	10 ~	11%~	~	~	~	~	~	~	11 ~	11%~	3 5%	6 12%	4 9%~	7 11%~
4	4 4%	64 3%	~	~	~	~	4 10%~	4 ~	4%~	~	~	~	~	~	~	4 ~	4%~	~	4 8%~	2 5%~	2 3%~
5 OR MORE SPECIALISTS	5 5%	45 2%	1 14%~	1 5%~	1 6%~	~	2 5%~	5 ~	5%~	~	~	~	~	~	~	5 ~	5%~	~	5 10%*	3 7%~	2 3%~
NOT ANSWERED	2	67			1		1	2								2		2		1	1
VALID CASES	111	1866	7	19	17	18	39	7	95					5	5	101	56	50	43	65	
NUMBER OF RESPONDENTS	113	1933	7	19	18	18	40	7	97					5	5	103	56	52	44	66	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

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

	BANT OT1	BANT OT2	AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER			
	INHE TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE
Q27 WORST SPECIALIST POSSIBLE		13 0.7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01		14 0.8%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02	1 1%	12 0.7%	~	~	~	~	3%	~	1%	~	~	~	~	~	1%	~	2%	2%	~
03	3 3%	27 2%	~	~	~	12%	3%	~	3%	~	~	~	~	~	3%	~	7%	2%	2%
04	1 1%	22 1%	~	~	~	6%	~	~	1%	~	~	~	~	~	1%	2%	~	2%	~
05	4 4%	83 5%	~	6%	7%	~	3%	14%	4%	~	~	~	~	~	4%	4%	4%	2%	5%
06	4 4%	68 4%	~	~	7%	~	9%	~	3%	~	~	~	25%	~	4%	4%	4%	7%	2%
07	13 13%	157 9%	43%	11%	7%	12%	14%	~	13%	~	~	~	~	~	13%	4%	9%	1%	12%
08	26 26%	318 18%	29%	33%	27%	18%	26%	29%	23%	~	~	~	~	50%	20%	27%	27%	26%	24%
09	16 16%	315 18%	~	22%	7%	12%	17%	43%	12%	~	~	~	~	25%	40%	15%	17%	11%	20%
BEST SPECIALIST POSSIBLE	32 32%	742 42%	29%	28%	47%	41%	26%	14%	27%	~	~	~	~	~	40%	29%	38%	26%	37%
#8-10 (NET)	74 74%	1375 78%	57%	83%	80%	71%	69%	86%	62%	~	~	~	~	75%	100%	72%	83%	63%	80%

Continued

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER	AS- IAN	NATV ILND	AMER IND/ PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	VERY GOOD & POOR	FE- MALE	MALE	
9-10 (NET)	48 48%	1057 60%	2 29%	9 50%	8 53%	9 53%	15 43%	4 57%	39 45%	~	~	~	~	~	25%	4 80%	41 45%	29 56%	17 37%	23 56%	24 41%
NOT ANSWERED	4	18					2	3								3		1		3	
VALID CASES	100	1771	7	18	15	17	35	7	87					4	5	92	52	46	41	58	
NUMBER OF RESPONDENTS	104	1789	7	18	15	17	37	7	90					4	5	95	52	47	41	61	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	
MEAN	8.22	8.43	8.14	8.50	8.60	8.00	7.97	8.29	8.11					7.75	9.20	8.11	8.60	7.76	8.32	8.12	
p stat_(*=Sig @ p<=.05)		.283	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

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

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER					
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE-MALE
Q28 YES	53 18%	886 18%	3 14%	11 20%	10 24%	9 15%	16 18%	2 11%	43 18%	~	~	~	~	~	2 18%	2 13%	47 18%	37 18%	12 15%	16 14%	35 20%		
NO	240 82%	3943 82%	19 86%	43 80%	31 76%	52 85%	72 82%	17 89%	199 82%	~	~	~	~	~	9 82%	14 88%	219 82%	165 82%	69 85%	99 86%	137 80%		
NOT ANSWERED	12	253	2	1	1		1		5							5	4	1		3	2		
VALID CASES	293	4829	22	54	41	61	88	19	242					11	16	266	202	81	115	172			
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174			
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%		

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER	AS- IAN	NATV ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	MALE	FE- MALE
Q29 NEVER	4 8%	78 9%	~	~	20%~	22%~	~	~	~	~	~	~	~	~	~	4 9%~	4 11%~	~	~	4 11%~
SOMETIMES	12 23%	290 33%	~	18%~	20%~	11%~	44%~	~	~	~	~	~	~	~	~	11 23%~	9 24%~	2 17%~	3 19%~	9 26%~
USUALLY	18 34%	294 34%	33%~	55%~	20%~	33%~	25%~	50%~	~	~	~	~	~	50%~	~	17 36%~	11 30%~	5 42%~	5 31%~	12 34%~
ALWAYS	19 36%	204 24%	67%~	27%~	40%~	33%~	31%~	50%~	~	~	~	~	~	50%~	100%~	15 32%~	13 35%~	5 42%~	8 50%~	10 29%~
#ALWAYS + USUALLY (NET)	37 70%	498 58%*	100%~	82%~	60%~	67%~	56%~	100%~	~	~	~	~	~	100%~	100%~	32 68%~	24 65%~	10 83%~	13 81%~	22 63%~
TOP BOX SCORE	19 36%	204 24%	67%~	27%~	40%~	33%~	31%~	50%~	~	~	~	~	~	50%~	100%~	15 32%~	13 35%~	5 42%~	8 50%~	10 29%~
NOT ANSWERED		20																		
VALID CASES	53	866	3	11	10	9	16	2	43					2	2	47	37	12	16	35
NUMBER OF RESPONDENTS	53	886	3	11	10	9	16	2	43					2	2	47	37	12	16	35
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH		GENDER	
	OT1	OT2														ITY	STATUS				
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY	GOOD	FAIR				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			HIS-	HIS-	&	&			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE	
Q30																					
YES	65	1269	4	12	6	15	23	4	54					3	5	59	41	21	20	44	
	22%	26%	19%~	22%	14%~	25%	26%	21%~	22%~	~	~	~	~	~ 27%~	31%~	22%~	20%	26%	17%	26%	
NO	226	3524	17	42	36	45	65	15	189					8	11	207	160	60	97	125	
	78%	74%	81%~	78%	86%~	75%	74%	79%~	78%~	~	~	~	~	~ 73%~	69%~	78%~	80%	74%	83%	74%	
NOT ANSWERED	14	289	3	1		1	1		4						5	5	1		1	5	
VALID CASES	291	4793	21	54	42	60	88	19	243					11	16	266	201	81	117	169	
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	INHE	OHP	18	25	35	45	55	65	BLCK	AS-	NATV	AMER			NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	IAN	ILND	IND/	ALSK		HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	##	##	##	##	##	TI	IC	IC	&	&	FE-	
																	GOOD	POOR	MALE	MALE	
Q31																					
NEVER	4 6%	39 3%	1 25%	~	~	3 20%	~	~	4 8%	~	~	~	~	~	~	4 7%	3 8%	1 5%	2 10%	2 5%	
SOMETIMES	6 10%	212 17%	1 25%	1 9%	1 17%	2 13%	1 5%	~	6 12%	~	~	~	~	~	~	6 11%	5 13%	1 5%	2 10%	4 10%	
USUALLY	20 32%	361 29%	~	6 55%	3 50%	4 27%	5 24%	2 50%	16 31%	~	~	~	~	~	2 67%	2 40%	18 32%	6 33%	4 30%	16 20%	16 39%
ALWAYS	32 52%	619 50%	2 50%	4 36%	2 33%	6 40%	15 71%	2 50%	25 49%	~	~	~	~	~	1 33%	3 60%	28 50%	18 46%	12 60%	12 60%	19 46%
#ALWAYS + USUALLY (NET)	52 84%	980 80%	2 50%	10 91%	5 83%	10 67%	20 95%	4 100%	41 80%	~	~	~	~	~	3 100%	5 100%	46 82%	31 79%	18 90%	16 80%	35 85%
TOP BOX SCORE	32 52%	619 50%	2 50%	4 36%	2 33%	6 40%	15 71%	2 50%	25 49%	~	~	~	~	~	1 33%	3 60%	28 50%	18 46%	12 60%	12 60%	19 46%
NOT ANSWERED	3	38		1			2		3							3	2	1		3	
VALID CASES	62	1231	4	11	6	15	21	4	51					3	5	56	39	20	20	41	
NUMBER OF RESPONDENTS	65	1269	4	12	6	15	23	4	54					3	5	59	41	21	20	44	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q30 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER				
	OT1	OT2													ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	AS-	NATV	AMER			NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AFR-	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	##	##	##	##	##	TI	IC	IC	&	&		
																	VERY	POOR	MALE	MALE	
																	GOOD	POOR	MALE	MALE	
Q32																					
NEVER	2	16	1			1			2							2	2		1	1	
	3%	1%	25%~	~	~	7%~	~	~	4%~	~	~	~	~	~	~	4%~	5%~	~	5%~	2%~	
SOMETIMES	1	61		1					1							1	1		1		
	2%	5%*	~	9%~	~	~	~	~	2%~	~	~	~	~	~	~	2%~	3%~	~	5%~	~	
USUALLY	14	224	1	2	1	6	3	1	12							1	13	9	3	2	12
	23%	18%	25%~	18%~	17%~	40%~	14%~	25%~	24%~	~	~	~	~	~	~	20%~	23%~	23%~	15%~	10%~	29%~
ALWAYS	45	929	2	8	5	8	18	3	36						3	4	40	27	17	16	28
	73%	76%	50%~	73%~	83%~	53%~	86%~	75%~	71%~	~	~	~	~	~100%~	80%~	71%~	69%~	85%~	80%~	68%~	
#ALWAYS + USUALLY (NET)	59	1153	3	10	6	14	21	4	48						3	5	53	36	20	18	40
	95%	94%	75%~	91%~	100%~	93%~	100%~	100%~	94%~	~	~	~	~	~100%~	100%~	95%~	92%~	100%~	90%~	98%~	
TOP BOX SCORE	45	929	2	8	5	8	18	3	36						3	4	40	27	17	16	28
	73%	76%	50%~	73%~	83%~	53%~	86%~	75%~	71%~	~	~	~	~	~100%~	80%~	71%~	69%~	85%~	80%~	68%~	
NOT ANSWERED	3	39		1			2		3							3	2	1		3	
VALID CASES	62	1230	4	11	6	15	21	4	51						3	5	56	39	20	20	41
NUMBER OF RESPONDENTS	65	1269	4	12	6	15	23	4	54						3	5	59	41	21	20	44
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH		GENDER	
	OT1	OT2																			
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			PAN-	PAN-	&	&			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	FAIR			
									WHTE	##	##	##	##	##	TI		GOOD	POOR	MALE	MALE	
Q33																					
YES	122	1787	11	29	19	22	35	4	99					8	6	111	88	31	54	66	
	42%	37%	50%~	54%*	46%~	36%	39%	21%~	40%~	~	~	~	~	~ 73%~	40%~	41%~	43%	39%	46%	39%	
NO	171	2987	11	25	22	39	54	15	146					3	9	157	116	49	63	105	
	58%	63%	50%~	46%*	54%~	64%	61%	79%~	60%~	~	~	~	~	~ 27%~	60%~	59%~	57%	61%	54%	61%	
NOT ANSWERED	12	308	2	1	1				2						1	3	2	2	1	3	
VALID CASES	293	4774	22	54	41	61	89	19	245					11	15	268	204	80	117	171	
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
	OT1	OT2	18	25	35	45	55	65	BLK	AS-	NATV	AMER					EX &					
	INHE	OHP	TO	TO	TO	TO	TO	AND	OR	AFR-	IAN	ILND	NATV	ALSK	MUL-	NOT	VERY	GOOD	FAIR			
	TOT	TOT	TO	TO	TO	TO	TO	AND	AFR-	AMER	IAN	ILND	NATV	ALSK	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	##	##	##	##	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
PQ34																						
NEVER	8	91		3	1	2	2		5						1	1	7	7	1	6	2	
	3%	2%		~ 6%	2%~	3%	2%		2%~						9%~	7%~	3%~	3%	1%	5%	1%	
SOMETIMES	22	301	4	5	2	3	6	2	21						1		21	14	8	8	14	
	8%	6%	18%~	9%	5%~	5%	7%	11%~	9%~						9%~		8%~	7%	10%	7%	8%	
USUALLY	51	677	4	13	9	10	13	2	43						3	1	48	38	12	23	28	
	17%	14%	18%~	24%	22%~	17%	15%	11%~	18%~						27%~	7%~	18%~	19%	15%	20%	16%	
ALWAYS	211	3637	14	33	29	45	68	15	175						6	13	191	144	59	79	127	
	72%	77%*	64%~	61%	71%~	75%	76%	79%~	72%~						55%~	87%~	72%~	71%	74%	68%	74%	
#ALWAYS + USUALLY (NET)	262	4314	18	46	38	55	81	17	218						9	14	239	182	71	102	155	
	90%	92%	82%~	85%	93%~	92%	91%	89%~	89%~						82%~	93%~	90%~	90%	89%	88%	91%	
TOP BOX SCORE	211	3637	14	33	29	45	68	15	175						6	13	191	144	59	79	127	
	72%	77%*	64%~	61%	71%~	75%	76%	79%~	72%~						55%~	87%~	72%~	71%	74%	68%	74%	
NOT ANSWERED	1	68				1			1								1	1		1		
VALID CASES	292	4706	22	54	41	60	89	19	244						11	15	267	203	80	116	171	
NUMBER OF RESPONDENTS	293	4774	22	54	41	61	89	19	245						11	15	268	204	80	117	171	
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%	

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

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

	BANT OT1	BANT OT2	AGE					RACE						ETHNICITY	HEALTH STATUS		GENDER			
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q35 WORST HEALTH PLAN POSSIBLE	4 1%	33 0.7%	~	~	1 3%	1 2%	2 2%	~	4 2%	~	~	~	~	~	~	4 2%	1 0.5%	3 4%	1 0.9%	3 2%
01		31 0.7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02		51 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03	2 0.7%	61 1%	~	1 2%	1 3%	~	~	~	2 0.9%	~	~	~	~	~	~	2 0.8%	1 0.5%	1 1%	~	2 1%
04	8 3%	105 2%	~	2 4%	~	3 5%	3 4%	~	6 3%	~	~	~	~	~	~	8 3%	4 2%	4 5%	6 5%	2 1%
05	23 8%	381 8%	1 5%	5 10%	3 8%	6 10%	6 7%	2 11%	21 9%	~	~	~	~	1 9%	1 7%	22 9%	18 10%	5 6%	9 8%	14 9%
06	13 5%	291 6%	~	2 4%	2 5%	3 5%	6 7%	~	13 6%	~	~	~	~	~	~	13 5%	6 3%	7 9%	3 3%	10 6%
07	48 17%	602 13%*	27%~	11 22%	8 21%	6 10%	13 16%	3 16%	39 17%	~	~	~	~	3 27%	1 7%	45 18%	35 19%	12 15%	14 12%	33 21%
08	60 22%	920 20%	36%~	8 20%	10 26%	10 17%	17 21%	1 5%	51 22%	~	~	~	~	1 9%	4 29%	54 21%	40 21%	16 20%	25 22%	33 21%
09	37 13%	736 16%	5%~	1 14%	7 18%	9 16%	6 7%*	7 37%	28 12%	~	~	~	~	2 18%	4 29%	32 13%	23 12%	13 16%	16 14%	21 13%
BEST HEALTH PLAN POSSIBLE	80 29%	1385 30%	27%~	6 24%	12 16%	6 34%	20 35%	29 32%	65 28%	~	~	~	~	4 36%	4 29%	73 29%	61 32%	18 23%	39 35%	40 25%
#8-10 (NET)	177 64%	3041 66%	68%~	15 58%	29 61%	23 67%	39 63%	52 74%	144 63%	~	~	~	~	7 64%	12 86%	159 63%	124 66%	47 59%	80 71%	94 59%*

Continued

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE	
9-10 (NET)	117 43%	2121 46%	7 32%	19 38%	13 34%	29 50%	35 43%	13 68%	93 41%	~	~	~	~	~	6 55%	8 57%	105 42%	84 44%	31 39%	55 49%	61 39%
NOT ANSWERED	30	486	2	5	4	3	7	18							2	18	17	3	5	16	
VALID CASES	275	4596	22	50	38	58	82	19	229					11	14	253	189	79	113	158	
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	
MEAN	7.93	7.93	8.18	7.76	7.61	7.98	7.91	8.53	7.84					8.36	8.57	7.87	8.08	7.53	8.13	7.77	
p stat_(*=Sig @ p<=.05)		1.00	~.495		~.813	.946		~	~	~	~	~	~	~	~	~	~.062	.063	.155	.135	

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER				
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-##	AS- IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE
Q35A YES	32 11%	599 12%	3 ~	4 5%	6 10%	17 ~	1 10%	1 19%*	29 5%~	12%	~	~	~	~	~	1 9%~	1 6%~	30 11%~	11 5%*	18 22%*	14 12%	18 10%
NO	262 89%	4210 88%	22 100%~	52 95%	37 90%	55 ~	72 90%	18 81%*	18 95%~	215 88%	~	~	~	~	~	10 91%~	15 94%~	238 89%~	192 95%*	64 78%*	103 88%	154 90%
NOT ANSWERED	11	273	2		1												3	3			1	2
VALID CASES	294	4809	22	55	41	61	89	19	244						11	16	268	203	82	117	172	
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247						11	16	271	206	82	118	174	
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER					
	OT1	OT2	18	25	35	45	55	65	BLCK	AS-	NATV	AMER				NOT	EX &						
	INHE	OHP	TO	TO	TO	TO	TO	AND	OR	AFR-	IAN	ILND	NATV	ALSK	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR			
	TOT	TOT	TO	TO	TO	TO	TO	AND	AFR-	AMER	IAN	ILND	NATV	ALSK	OTHR	MUL-	IC	IC	GOOD	FAIR	&	&	FE-
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	##	##	##	##	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE	
Q35B NEVER	5 17%	90 16%	~	~	25%~	~	27%~	~	5 19%~	~	~	~	~	~	~	~	~	5 19%~	1 9%~	4 25%~	~	1 8%~	4 25%~
SOMETIMES	6 21%	83 15%	~	2 67%~	~	3 50%~	1 100%~	~	5 19%~	~	~	~	~	~	~	~	~	5 19%~	3 27%~	3 19%~	~	1 8%~	5 31%~
USUALLY	2 7%	129 23%	~	~	25%~	~	7%~	~	1 4%~	~	~	~	~	~	~	~	~	1 100%~	1 4%~	1 9%~	1 6%~	~	2 13%~
ALWAYS	16 55%	262 46%	~	1 33%~	2 50%~	3 50%~	10 67%~	~	15 58%~	~	~	~	~	~	1 100%~	~	16 59%~	6 55%~	8 50%~	~	11 85%~	5 31%~	
#ALWAYS + USUALLY (NET)	18 62%	391 69%	~	1 33%~	3 75%~	3 50%~	11 73%~	~	16 62%~	~	~	~	~	~	1 100%~	1 100%~	17 63%~	7 64%~	9 56%~	~	11 85%~	7 44%~	
TOP BOX SCORE	16 55%	262 46%	~	1 33%~	2 50%~	3 50%~	10 67%~	~	15 58%~	~	~	~	~	~	1 100%~	~	16 59%~	6 55%~	8 50%~	~	11 85%~	5 31%~	
NOT ANSWERED	3	35					2		3								3		2		1	2	
VALID CASES	29	564		3	4	6	15	1	26						1	1	27	11	16		13	16	
NUMBER OF RESPONDENTS	32	599		3	4	6	17	1	29						1	1	30	11	18		14	18	
	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?

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER ##	AS- IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q35C YES	44 15%	759 16%	2 9%	7 13%	9 21%	6 10%	17 19%	2 11%	39 16%	~	~	~	~	~	1 9%	3 20%	40 15%	24 12%*	18 23%	20 17%	24 14%
NO	246 85%	3989 84%	20 91%	47 87%	33 79%	54 90%	71 81%	16 89%	202 84%	~	~	~	~	~	10 91%	12 80%	225 85%	178 88%*	62 78%	97 83%	145 86%
NOT ANSWERED	15	334	2	1		1	1	1	6							1	6	4	2	1	5
VALID CASES	290	4748	22	54	42	60	88	18	241					11	15	265	202	80	117	169	
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2																			
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			NOT	VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR			
									##	##	##	##	##	TI	IC	IC	&	&			
									WHTE							GOOD	POOR	MALE	MALE		
Q35D																					
NEVER	2	121		1			1		2						2	1	1	1	1		
	5%	17%	~	14%	~	~	6%	~	5%	~	~	~	~	~	~	5%	4%	6%	5%	4%	
SOMETIMES	7	129			1	1	3	1	7						7	3	3	2	5		
	16%	18%	~	~	11%	17%	18%	50%	18%	~	~	~	~	~	~	18%	13%	17%	10%	21%	
USUALLY	12	170	1	3	2	2	3	1	12						12	5	7	5	7		
	27%	23%	50%	43%	22%	33%	18%	50%	31%	~	~	~	~	~	~	30%	21%	39%	25%	29%	
ALWAYS	23	308	1	3	6	3	10		18					1	3	19	15	7	12	11	
	52%	42%	50%	43%	67%	50%	59%	~	46%	~	~	~	~	~	100%	100%	48%	63%	39%	60%	46%
#ALWAYS + USUALLY (NET)	35	478	2	6	8	5	13	1	30					1	3	31	20	14	17	18	
	80%	66%	100%	86%	89%	83%	76%	50%	77%	~	~	~	~	~	100%	100%	78%	83%	78%	85%	75%
TOP BOX SCORE	23	308	1	3	6	3	10		18					1	3	19	15	7	12	11	
	52%	42%	50%	43%	67%	50%	59%	~	46%	~	~	~	~	~	100%	100%	48%	63%	39%	60%	46%
NOT ANSWERED		31																			
VALID CASES	44	728	2	7	9	6	17	2	39					1	3	40	24	18	20	24	
NUMBER OF RESPONDENTS	44	759	2	7	9	6	17	2	39					1	3	40	24	18	20	24	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q35C = YES]

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	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/ILLND ##	AMER IND/PAC/ALSK ##	OTHR ##	MULTI TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q35E ALWAYS	14 5%	178 4%	1 ~	2 2%	4 10%~	2 3%	5 6%	9 4%~	~	~	~	~	~	1 9%~	3 19%~	9 3%~	8 4%	5 6%	6 5%	6 4%
USUALLY	13 5%	193 4%	1 4%~	2 4%	2 5%~	3 5%	5 6%	11 5%~	~	~	~	~	~	~	1 6%~	12 5%~	6 3%	7 9%	3 3%	10 6%
SOMETIMES	43 15%	804 17%	4 17%~	11 21%	5 12%~	6 10%	15 17%	2 11%~	37 15%~	~	~	~	~	~	3 19%~	39 15%~	25 13%	15 19%	17 15%	26 15%
NEVER	218 76%	3575 75%	18 78%~	39 74%	31 74%~	48 81%	62 71%	16 89%~	183 76%~	~	~	~	~	10 91%~	9 56%~	204 77%~	161 81%*	53 66%*	88 77%	128 75%
#NEVER + SOMETIMES (NET)	261 91%	4379 92%	22 96%~	50 94%	36 86%~	54 92%	77 89%	18 100%~	220 92%~	~	~	~	~	10 91%~	12 75%~	243 92%~	186 93%	68 85%	105 92%	154 91%
TOP BOX SCORE	218 76%	3575 75%	18 78%~	39 74%	31 74%~	48 81%	62 71%	16 89%~	183 76%~	~	~	~	~	10 91%~	9 56%~	204 77%~	161 81%*	53 66%*	88 77%	128 75%
NOT ANSWERED	17	332	1	2		2	2	1	7							7	6	2	4	4
VALID CASES	288	4750	23	53	42	59	87	18	240					11	16	264	200	80	114	170
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ILND ##	AMER IND/PAC/ALSK ##	OTHR ##	MUL-TI TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE	
Q35F ALWAYS	4 1%	66 1%	~	~	~	2%	3%	~	~	~	~	~	~	~	~	1 6%	3 1%	3 2%	1 1%	1 0.9%	3 2%
USUALLY	7 2%	106 2%	1 5%	1 2%	2 5%	2 3%	~	~	~	~	~	~	~	~	~	6 2%	5 3%	2 2%	4 3%	2 1%	
SOMETIMES	42 15%	672 14%	3 14%	13 25%	2 5%	9 15%	13 15%	1 6%	~	~	~	~	~	~	~	41 16%	22 11%	19 11%*	13 11%	28 17%	
NEVER	233 81%	3911 82%	18 82%	39 74%	37 90%	48 80%	71 82%	17 94%	~	~	~	~	~	11 ~100%	15 94%	213 81%	168 85%*	59 73%*	97 84%	135 80%	
#NEVER + SOMETIMES (NET)	275 96%	4583 96%	21 95%	52 98%	39 95%	57 95%	84 97%	18 100%	~	~	~	~	~	11 ~100%	15 94%	254 97%	190 96%	78 96%	110 96%	163 97%	
TOP BOX SCORE	233 81%	3911 82%	18 82%	39 74%	37 90%	48 80%	71 82%	17 94%	~	~	~	~	~	11 ~100%	15 94%	213 81%	168 85%*	59 73%*	97 84%	135 80%	
NOT ANSWERED	19	327	2	2	1	1	2	1	~	~	~	~	~	~	~	8	8	1	3	6	
VALID CASES	286	4755	22	53	41	60	87	18	~	~	~	~	~	11	16	263	198	81	115	168	
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	~	~	~	~	~	11	16	271	206	82	118	174	
	100%	100%	100%	100%	100%	100%	100%	100%	~	~	~	~	~	100%	100%	100%	100%	100%	100%	100%	

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	INHE TOT ADLDT	OHP TOT ADLDT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER	AS- IAN	NATV ILND	AMER PAC ALSK	IND/ OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q35G ALWAYS	2 0.7%	55 1%	~	~	~	2 3%	~	1 ~0.4%	~	~	~	~	~	~	1 6%	1 0.4%	2 1%	~	~	2 1%
USUALLY	5 2%	67 1%	1 4%	~	1 2%	2 3%	1 1%	5 2%	~	~	~	~	~	~	~	5 2%	3 1%	2 2%	1 0.9%	4 2%
SOMETIMES	48 17%	487 10%*	3 13%	14 26%	9 22%	7 11%	13 15%	1 5%	44 18%	~	~	~	~	~	1 6%	45 17%	27 13%*	20 25%*	19 16%	28 16%
NEVER	234 81%	4149 87%*	19 83%	40 74%	31 76%	50 82%	72 84%	18 95%	191 79%	~	~	~	~	11 ~100%	14 88%	214 81%	169 84%	59 73%*	96 83%	136 80%
#NEVER + SOMETIMES (NET)	282 98%	4636 97%	22 96%	54 ~100%	40 98%	57 93%	85 99%	19 100%	235 98%	~	~	~	~	11 ~100%	15 94%	259 98%	196 98%	79 98%	115 99%	164 96%
TOP BOX SCORE	234 81%	4149 87%*	19 83%	40 74%	31 76%	50 82%	72 84%	18 95%	191 79%	~	~	~	~	11 ~100%	14 88%	214 81%	169 84%	59 73%*	96 83%	136 80%
NOT ANSWERED	16	324	1	1	1		3	6							6	5	1	2	4	
VALID CASES	289	4758	23	54	41	61	86	19	241					11	16	265	201	81	116	170
NUMBER OF RESPONDENTS	305 100%	5082 100%	24 100%	55 100%	42 100%	61 100%	89 100%	19 100%	247 100%					11 100%	16 100%	271 100%	206 100%	82 100%	118 100%	174 100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER									
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	##	##	##	##	##	TI	IC	IC	GOOD	POOR	
																		MALE	MALE	
Q35H																				
#YES DEFINITELY	201	3305	18	37	24	43	61	13	164					8	13	183	148	46	81	117
	70%	70%	78%~	71%	57%~	74%	69%	72%~	68%~	~	~	~	~	~ 80%~	81%~	69%~	75%*	56%*	72%	69%
YES SOMEWHAT	68	1110	5	12	17	11	20	3	62					2	2	65	41	27	25	43
	24%	24%	22%~	23%	40%~	19%	23%	17%~	26%~	~	~	~	~	~ 20%~	13%~	25%~	21%	33%*	22%	25%
NO	17	300		3	1	4	7	2	15						1	16	8	9	7	10
	6%	6%	~	6%	2%~	7%	8%	11%~	6%~	~	~	~	~	~	6%~	6%~	4%	11%	6%	6%
NOT ANSWERED	19	367	1	3		3	1	1	6					1		7	9		5	4
VALID CASES	286	4715	23	52	42	58	88	18	241					10	16	264	197	82	113	170
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER IND/ PAC ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q35I YES	143 49%	2797 58%*	16 70%~	32 58%	22 52%~	28 47%	37 42%	5 26%~	120 49%~	~	~	~	~	~	5 45%~	10 63%~	130 48%~	100 49%	38 47%	57 48%	85 50%
NO	149 51%	1986 42%*	7 30%~	23 42%	20 48%~	32 53%	51 58%	14 74%~	125 51%~	~	~	~	~	~	6 55%~	6 38%~	139 52%~	104 51%	43 53%	61 52%	86 50%
NOT ANSWERED	13	299	1			1	1		2							2	2	1		3	
VALID CASES	292	4783	23	55	42	60	88	19	245					11	16	269	204	81	118	171	
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH		GENDER	
	OT1	OT2														ITY	STATUS				
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				VERY						
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			HIS-	HIS-	GOOD	FAIR			
									AMER		ILND	NATV	OTHR	MUL-	IC	IC	&	&			
									WHTE	##	##	##	##	##	TI		GOOD	POOR	MALE	MALE	
Q35J																					
YES	96	1919	11	21	16	15	28	4	80					3	7	87	68	25	40	56	
	33%	40%*	48%~	38%	38%~	25%	31%	21%~	33%~	~	~	~	~	~ 27%~	44%~	32%~	33%	30%	34%	33%	
NO	195	2885	12	34	26	45	61	15	164					8	9	181	136	57	77	116	
	67%	60%*	52%~	62%	62%~	75%	69%	79%~	67%~	~	~	~	~	~ 73%~	56%~	68%~	67%	70%	66%	67%	
NOT ANSWERED	14	278	1				1		3						3	2			1	2	
VALID CASES	291	4804	23	55	42	60	89	19	244					11	16	268	204	82	117	172	
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q35K NEVER	2 2%	40 2%	~	~	1 7%	1 7%	~	2 3%	~	~	~	~	~	~	2 2%	1 2%	1 4%	~	2 4%	
SOMETIMES	4 4%	150 8%	~	2 10%	~	1 7%	1 4%	2 3%	~	~	~	~	~	1 14%	2 2%	4 6%	~	1 3%	3 6%	
USUALLY	19 21%	356 19%	3 27%	4 19%	3 21%	2 13%	6 22%	1 33%	14 18%	~	~	~	~	3 43%	15 18%	15 23%	4 17%	9 24%	10 19%	
ALWAYS	67 73%	1310 71%	8 73%	15 71%	10 71%	11 73%	20 74%	2 67%	58 76%	~	~	~	~	3 ~100%	3 43%	64 77%	46 70%	18 78%	28 74%	39 72%
#ALWAYS + USUALLY (NET)	86 93%	1666 90%	11 100%	19 90%	13 93%	13 87%	26 96%	3 100%	72 95%	~	~	~	~	3 ~100%	6 86%	79 95%	61 92%	22 96%	37 97%	49 91%
TOP BOX SCORE	67 73%	1310 71%	8 73%	15 71%	10 71%	11 73%	20 74%	2 67%	58 76%	~	~	~	~	3 ~100%	3 43%	64 77%	46 70%	18 78%	28 74%	39 72%
NOT ANSWERED	4	63			2		1	1	4						4	2	2	2	2	
VALID CASES	92	1856	11	21	14	15	27	3	76					3	7	83	66	23	38	54
NUMBER OF RESPONDENTS	96	1919	11	21	16	15	28	4	80					3	7	87	68	25	40	56
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER ##	NATV AS- IAN ##	AMER HAW/ IND/ PAC ALSK ILND NATV ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE		
Q35L ALWAYS	21 20%	423 22%	1 8%	7 37%	1 9%	6 24%	5 18%	1 14%	15 18%	~	~	~	~	~	2 67%	2 17%	19 21%	17 23%	4 14%	6 16%	15 22%
USUALLY	23 22%	375 20%	2 15%	5 26%	3 27%	7 28%	4 14%	1 14%	19 23%	~	~	~	~	~	3 25%	20 22%	17 23%	5 18%	10 27%	13 19%	
SOMETIMES	17 16%	377 20%	4 31%	3 16%	3 27%	1 4%	4 14%	1 14%	14 17%	~	~	~	~	~	2 17%	14 16%	12 16%	5 18%	7 19%	9 13%	
NEVER	44 42%	744 39%	6 46%	4 21%	4 36%	11 44%	15 54%	4 57%	34 41%	~	~	~	~	1 33%	5 42%	36 40%	29 39%	14 50%	14 38%	30 45%	
#NEVER + SOMETIMES (NET)	61 58%	1121 58%	10 77%	7 37%	7 64%	12 48%	19 68%	5 71%	48 59%	~	~	~	~	1 33%	7 58%	50 56%	41 55%	19 68%	21 57%	39 58%	
TOP BOX SCORE	44 42%	744 39%	6 46%	4 21%	4 36%	11 44%	15 54%	4 57%	34 41%	~	~	~	~	1 33%	5 42%	36 40%	29 39%	14 50%	14 38%	30 45%	
5	178	2747	11	34	28	34	59	11	154					8	4	171	122	53	76	101	
NOT ANSWERED	22	416		2	3	2	2	1	11							11	9	1	5	6	
VALID CASES	105	1919	13	19	11	25	28	7	82					3	12	89	75	28	37	67	
NUMBER OF RESPONDENTS	305 100%	5082 100%	24 100%	55 100%	42 100%	61 100%	89 100%	19 100%	247 100%					11 100%	16 100%	271 100%	206 100%	82 100%	118 100%	174 100%	

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q35M NEVER	40 39%	695 36%	3 21%	5 26%	6 46%	11 46%	13 48%	2 67%	33 40%	~	~	~	~	~	2 40%	2 29%	35 38%	28 38%	11 42%	16 41%	24 39%
SOMETIMES	15 15%	351 18%	5 36%	~	2 15%	4 17%	4 15%	~	10 12%	~	~	~	~	~	~	4 57%	11 12%	11 15%	4 15%	6 15%	9 15%
USUALLY	19 19%	351 18%	2 14%	6 32%	2 15%	3 13%	4 15%	1 33%	15 18%	~	~	~	~	~	2 40%	1 14%	18 20%	15 20%	3 12%	8 21%	11 18%
ALWAYS	28 27%	514 27%	4 29%	8 42%	3 23%	6 25%	6 22%	~	24 29%	~	~	~	~	~	1 20%	~	27 30%	20 27%	8 31%	9 23%	18 29%
#ALWAYS + USUALLY (NET)	47 46%	865 45%	6 43%	14 74%	5 38%	9 38%	10 37%	1 33%	39 48%	~	~	~	~	~	3 60%	1 14%	45 49%	35 47%	11 42%	17 44%	29 47%
TOP BOX SCORE	28 27%	514 27%	4 29%	8 42%	3 23%	6 25%	6 22%	~	24 29%	~	~	~	~	~	1 20%	~	27 30%	20 27%	8 31%	9 23%	18 29%
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	177	2765	10	33	27	34	58	14	149						6	9	164	120	55	74	102
NOT ANSWERED	26	406		3	2	3	4	2	16								16	12	1	5	10
VALID CASES	102	1911	14	19	13	24	27	3	82						5	7	91	74	26	39	62
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247						11	16	271	206	82	118	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER					
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR- ##	AS- IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE- MALE
Q35N																							
EXTREMELY DIFFICULT	16 6%	281 6%	1 4%	2 4%	4 11%	6 12%	2 3%	1 6%	14 7%	~	~	~	~	~	~	~	15 6%	9 5%	7 10%		6 6%	10 7%	
01	6 2%	112 3%	~	~	1 3%	2 4%	3 4%	~	4 2%	~	~	~	~	~	~	~	5 2%	3 2%	3 4%		2 2%	4 3%	
02	2 0.8%	129 3%*	~	1 2%	~	~	1 1%	~	1 0.5%	~	~	~	~	1 10%	~	2 0.9%	1 0.6%	1 1%				2 1%	~
03	9 3%	164 4%	~	~	3 8%	3 6%	3 4%	~	8 4%	~	~	~	~	~	~	~	9 4%	7 4%	1 1%		3 3%	6 4%	
04	10 4%	138 3%	~	1 2%	1 3%	2 4%	4 6%	2 13%	10 5%*	~	~	~	~	~	~	~	10 4%	5 3%	5 7%		2 2%	8 6%	
05	42 16%	547 12%	2 9%	11 22%	5 13%	8 16%	12 17%	4 25%	35 17%	~	~	~	~	2 20%	3 20%	38 16%	33 18%	9 13%				17 16%	25 17%
06	12 5%	230 5%	2 9%	2 4%	2 5%	2 4%	3 4%	1 6%	9 4%	~	~	~	~	~	~	~	1 7%	10 4%	9 5%	3 4%		8 7%	4 3%
07	22 8%	375 8%	5 22%	5 10%	~	6 12%	6 8%	~	21 10%*	~	~	~	~	~	~	~	1 7%	21 9%	16 9%	6 8%		13 12%	9 6%
09	73 28%	1161 26%	8 35%	12 24%	13 34%	8 16%*	17 24%	4 25%	55 26%	~	~	~	~	~	~	~	6 40%	57 25%	42 23%*	20 28%		28 26%	35 24%
EXTREMELY EASY	71 27%	1320 30%	5 22%	17 33%	9 24%	13 26%	21 29%	4 25%	54 26%	~	~	~	~	7 70%	4 27%	64 28%	54 30%	16 23%				29 27%	40 28%
#8-10 (NET)	144 55%	2481 56%	13 57%	29 57%	22 58%	21 42%*	38 53%	8 50%	109 52%*	~	~	~	~	7 70%	10 67%	121 52%	96 54%	36 51%				57 53%	75 52%
9-10 (NET)	144 55%	2481 56%	13 57%	29 57%	22 58%	21 42%*	38 53%	8 50%	109 52%*	~	~	~	~	7 70%	10 67%	121 52%	96 54%	36 51%				57 53%	75 52%

Continued

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER ##	AS- IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE
88		6																		
NOT ANSWERED	42	619	1	4	4	11	17	3	36					1	1	40	27	11	10	31
VALID CASES	263	4457	23	51	38	50	72	16	211					10	15	231	179	71	108	143
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%
MEAN	7.15	7.14	7.78	7.57	6.79	6.30	7.13	6.88	7.02					8.20	8.13	7.04	7.23	6.66	7.27	6.89
p stat_(*=Sig @ p<=.05)		.946	~.269		~.027*.938			~.158	~	~	~	~	~	~	~	~	~.500	.141	.585	.123

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/		NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	GOOD	FAIR				
									AMER		ILND	NATV		TI	IC	IC	&			
									WHTE	##	##	##	##	##	IC	IC	&			
															GOOD	POOR	MALE			
															POOR		MALE			
Q36																				
EXCELLENT	19 7%	447 9%	5 21%~	5 9%	3 7%~	2 3%	4 5%		13 5%~					3 27%~	2 13%~	17 6%~	19 9%*	9 8%	10 6%	
VERY GOOD	78 27%	1140 24%	8 33%~	21 38%	15 36%~	14 23%	17 20%	3 16%~	69 29%~					1 9%~	2 13%~	74 28%~	78 38%*	38 32%	40 24%	
GOOD	109 38%	1676 35%	9 38%~	17 31%	15 36%~	27 45%	34 40%	7 37%~	87 36%~					6 55%~	7 44%~	99 38%~	109 53%~	47 40%	62 37%	
FAIR	58 20%	1110 23%	1 4%~	11 20%	8 19%~	11 18%	21 24%	6 32%~	51 21%~					1 9%~	4 25%~	53 20%~	58 71%*	18 15%	40 24%	
POOR	24 8%	395 8%	1 4%~	1 2%*	1 2%~	6 10%	10 12%	3 16%~	21 9%~						1 6%~	21 8%~	24 29%~	6 5%	16 10%	
#EXCELLENT + VERY GOOD + GOOD (NET)	206 72%	3263 68%	22 92%~	43 78%	33 79%~	43 72%	55 64%	10 53%~	169 70%~					10 91%~	11 69%~	190 72%~	206 100%~	94 80%*	112 67%*	
NOT ANSWERED	17	314				1	3		6						7				6	
VALID CASES	288	4768	24	55	42	60	86	19	241					11	16	264	206	82	118	168
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE	
Q37																					
EXCELLENT	37 13%	870 18%*	4 17%~	8 15%	8 19%~	6 10%	8 9%	3 16%~	27 11%~	~	~	~	~	~	3 27%~	4 25%~	31 12%~	35 17%*	2 3%*	15 13%	22 13%
VERY GOOD	69 24%	1189 25%	7 29%~	13 24%	10 24%~	12 20%	19 22%	8 42%~	60 25%~	~	~	~	~	~	1 9%~	3 19%~	65 24%~	63 31%*	5 6%*	31 26%	38 22%
GOOD	105 36%	1480 31%	8 33%~	21 38%	16 38%~	23 38%	33 38%	3 16%~	89 37%~	~	~	~	~	~	3 27%~	5 31%~	98 37%~	78 38%	26 33%	44 37%	61 36%
FAIR	61 21%	937 20%	5 21%~	10 18%	6 14%~	14 23%	22 25%	4 21%~	52 21%~	~	~	~	~	~	4 36%~	4 25%~	57 21%~	26 13%*	34 43%*	24 20%	37 22%
POOR	17 6%	296 6%	~	3 5%	2 5%~	5 8%	5 6%	1 5%~	15 6%~	~	~	~	~	~	~	~	16 6%~	3 1%*	13 16%*	4 3%	12 7%
#EXCELLENT + VERY GOOD + GOOD (NET)	211 73%	3539 74%	19 79%~	42 76%	34 81%~	41 68%	60 69%	14 74%~	176 72%~	~	~	~	~	~	7 64%~	12 75%~	194 73%~	176 86%*	33 41%*	90 76%	121 71%
NOT ANSWERED	16	310				1	2		4								4	1	2		4
VALID CASES	289	4772	24	55	42	60	87	19	243					11	16	267	205	80	118	170	
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			PAN-	PAN-	&	&		
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
Q38																				
#YES	103	1705	8	14	10	22	36	12	88					3	4	97	65	35	38	65
	37%	36%	36%~	27%	24%~	37%	43%	67%~	37%~	~	~	~	~	~ 27%~	29%~	38%~	33%*	45%	34%	39%
NO	176	2994	14	37	32	38	48	6	147					8	10	161	132	43	75	100
	63%	64%	64%~	73%	76%~	63%	57%	33%~	63%~	~	~	~	~	~ 73%~	71%~	62%~	67%*	55%	66%	61%
DON'T KNOW	11	99	2	4		1	4		9						1	10	8	3	4	7
NOT ANSWERED	15	284						1	1						1	3	1	1	1	2
VALID CASES	279	4699	22	51	42	60	84	18	235					11	14	258	197	78	113	165
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE-MALE	MALE
Q39 EVERY DAY	70 24%	949 20%	4 17%	10 18%	17 40%	10 17%	25 28%	3 16%	61 25%	~	~	~	~	2 18%	1 6%	67 25%	53 26%	17 21%	40 34%*	29 17%*
SOME DAYS	30 10%	436 9%	2 8%	6 11%	3 7%	9 15%	9 10%	1 5%	26 11%	~	~	~	~	3 27%	1 6%	28 11%	23 11%	7 9%	11 9%	19 11%
NOT AT ALL	189 65%	3380 71%*	18 75%	39 71%	22 52%	40 68%	54 61%	15 79%	155 64%	~	~	~	~	6 55%	14 88%	171 64%	128 63%	56 70%	66 56%*	123 72%*
DON'T KNOW	1	34				1			1							1		1		1
NOT ANSWERED	15	283				1	1		4							4	2	1	1	2
VALID CASES	289	4765	24	55	42	59	88	19	242					11	16	266	204	80	117	171
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	INHE TOT ADLTL	OHP TOT ADLTL	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	MALE	FE-MALE	
Q40 NEVER	23 23%	367 27%	1 17%	5 31%	3 15%	7 37%	6 18%	1 25%	21 24%	~	~	~	~	~	1 20%	23 24%	21 28%	2 8%	18 35%	5 10%	
SOMETIMES	23 23%	331 24%	3 50%	2 13%	9 45%	3 16%	4 12%	1 25%	20 23%	~	~	~	~	~	1 50%	21 22%	18 24%	5 21%	10 20%	12 25%	
USUALLY	18 18%	212 16%	1 17%	5 31%	1 5%	1 5%	9 26%	1 25%	18 21%	~	~	~	~	~	~	18 19%	10 13%	8 33%	9 18%	9 19%	
ALWAYS	36 36%	455 33%	1 17%	4 25%	7 35%	8 42%	15 44%	1 25%	28 32%	~	~	~	~	~	4 80%	1 50%	33 35%	27 36%	9 38%	14 27%	22 46%
#ALWAYS + USUALLY (NET)	54 54%	667 49%	2 33%	9 56%	8 40%	9 47%	24 71%	2 50%	46 53%	~	~	~	~	~	4 80%	1 50%	51 54%	37 49%	17 71%	23 45%	31 65%
TOP BOX SCORE	36 36%	455 33%	1 17%	4 25%	7 35%	8 42%	15 44%	1 25%	28 32%	~	~	~	~	~	4 80%	1 50%	33 35%	27 36%	9 38%	14 27%	22 46%
NOT ANSWERED		20																			
VALID CASES	100	1365	6	16	20	19	34	4	87					5	2	95	76	24	51	48	
NUMBER OF RESPONDENTS	100	1385	6	16	20	19	34	4	87					5	2	95	76	24	51	48	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ NATV ##	MUL-OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	MALE	FE-MALE	
Q41 NEVER	46 46%	687 50%	4 67%	8 50%	7 35%	11 61%	13 38%	2 50%	40 47%	~	~	~	~	~	3 60%	43 46%	37 49%	9 38%	30 60%	15 31%	
SOMETIMES	33 33%	305 22%*	1 17%	5 31%	11 55%	6 33%	9 26%	1 25%	29 34%	~	~	~	~	~	1 20%	1 50%	32 34%	26 35%	7 29%	14 28%	19 40%
USUALLY	8 8%	152 11%	1 17%	2 13%	1 5%	~	3 9%	1 25%	8 9%	~	~	~	~	~	~	8 9%	7 9%	1 4%	3 6%	5 10%	
ALWAYS	12 12%	223 16%	~	1 6%	1 5%	1 6%	9 26%	~	9 10%	~	~	~	~	~	1 20%	1 50%	11 12%	5 7%	7 29%	3 6%	9 19%
#ALWAYS + USUALLY (NET)	20 20%	375 27%	1 17%	3 19%	2 10%	1 6%	12 35%	1 25%	17 20%	~	~	~	~	~	1 20%	1 50%	19 20%	12 16%	8 33%	6 12%	14 29%
TOP BOX SCORE	12 12%	223 16%	~	1 6%	1 5%	1 6%	9 26%	~	9 10%	~	~	~	~	~	1 20%	1 50%	11 12%	5 7%	7 29%	3 6%	9 19%
NOT ANSWERED	1	18				1		1								1	1		1		
VALID CASES	99	1367	6	16	20	18	34	4	86					5	2	94	75	24	50	48	
NUMBER OF RESPONDENTS	100	1385	6	16	20	19	34	4	87					5	2	95	76	24	51	48	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	BANT	BANT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND PAC ##	AMER IND/ ALSK NATV ##	MUL- OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	POOR	MALE	FE- MALE	
Q42																					
NEVER	63 63%	778 57%	4 67%	9 56%	14 70%	14 74%	17 50%	4 100%	55 63%	~	~	~	~	~	4 80%	1 50%	59 62%	50 66%	13 54%	38 75%	24 50%
SOMETIMES	21 21%	261 19%	2 33%	2 13%	5 25%	3 16%	9 26%	19 22%	~	~	~	~	~	~	~	21 22%	16 21%	5 21%	10 20%	11 23%	
USUALLY	6 6%	141 10%	~	2 13%	~	1 5%	3 9%	5 6%	~	~	~	~	~	~	~	6 6%	6 8%	~	2 4%	4 8%	
ALWAYS	10 10%	175 13%	~	3 19%	1 5%	1 5%	5 15%	8 9%	~	~	~	~	~	1 20%	1 50%	9 9%	4 5%	6 25%	1 2%	9 19%	
#ALWAYS + USUALLY (NET)	16 16%	316 23%*	~	5 31%	1 5%	2 11%	8 24%	13 15%	~	~	~	~	~	1 20%	1 50%	15 16%	10 13%	6 25%	3 6%	13 27%	
TOP BOX SCORE	10 10%	175 13%	~	3 19%	1 5%	1 5%	5 15%	8 9%	~	~	~	~	~	1 20%	1 50%	9 9%	4 5%	6 25%	1 2%	9 19%	
NOT ANSWERED		30																			
VALID CASES	100	1355	6	16	20	19	34	4	87					5	2	95	76	24	51	48	
NUMBER OF RESPONDENTS	100	1385	6	16	20	19	34	4	87					5	2	95	76	24	51	48	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

Q43 DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK				&	&			
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	POOR		
									##	##	##	##	##	TI	IC	IC	GOOD	POOR		
																	MALE	MALE		
Q43																				
YES	62	997	1	4	2	11	34	10	55					2	2	60	32	28	25	37
	21%	21%	4%~	7%*	5%~	18%	39%*	53%~	23%~	~	~	~	~	~ 18%~	13%~	22%~	16%*	35%*	21%	22%
NO	228	3756	23	51	40	49	54	9	189					9	14	208	172	53	92	135
	79%	79%	96%~	93%*	95%~	82%	61%*	47%~	77%~	~	~	~	~	~ 82%~	88%~	78%~	84%*	65%*	79%	78%
DON'T KNOW	2	42				1	1		1							1	2		1	1
NOT ANSWERED	13	287							2							2		1		1
VALID CASES	290	4753	24	55	42	60	88	19	244					11	16	268	204	81	117	172
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH		GENDER				
	OT1	OT2	18	25	35	45	55	65	AND	BLCK	OR	NATV	AMER	AFR-	AS-	HAW/	IND/	NOT	EX &	VERY	GOOD	FAIR	FE-	
	INHE	OHP	TO	TO	TO	TO	TO	AND	WHTE	##	##	##	##	##	##	TI	HIS-	HIS-	GOOD	FAIR	&	&	MALE	MALE
	TOT	TOT	TO	TO	TO	TO	TO	AND	WHTE	##	##	##	##	##	TI	IC	IC	GOOD	FAIR	&	&	MALE	MALE	
Q44																								
YES	26	448	1	4	3	5	10	2	25								25	9	17	10	15			
	10%	10%	4%~	7%	8%~	9%	13%	11%~	11%~	~	~	~	~	~	~	~	~ 10%~	5%*	24%*	9%	9%			
NO	240	3956	23	50	35	48	67	16	198						10	16	219	181	55	96	144			
	90%	90%	96%~	93%	92%~	91%	87%	89%~	89%~	~	~	~	~	~	~100%~	~100%~	~90%~	95%*	76%*	91%	91%			
DON'T KNOW	25	377		1	4	8	11	1	21						1		24	16	8	11	14			
NOT ANSWERED	14	301						1	3								3		2	1	1			
VALID CASES	266	4404	24	54	38	53	77	18	223						10	16	244	190	72	106	159			
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247						11	16	271	206	82	118	174			
	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?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				NOT	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			HIS-	HIS-	GOOD	FAIR		
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
Q45																				
YES	94 32%	1716 36%	5 21%~	5 9%*	6 14%~	24 41%	40 45%*	14 74%~	77 32%~	~	~	~	~	2 ~ 18%~	7 44%~	86 32%~	56 27%*	35 43%*	39 33%	55 32%
NO	196 68%	3045 64%	19 79%~	50 91%*	36 86%~	35 59%	49 55%*	5 26%~	167 68%~	~	~	~	~	9 ~ 82%~	9 56%~	182 68%~	148 73%*	46 57%*	79 67%	116 68%
NOT ANSWERED	15	321				2			3						3	2	1			3
VALID CASES	290	4761	24	55	42	59	89	19	244					11	16	268	204	81	118	171
NUMBER OF RESPONDENTS	305 100%	5082 100%	24 100%	55 100%	42 100%	61 100%	89 100%	19 100%	247 100%					11 100%	16 100%	271 100%	206 100%	82 100%	118 100%	174 100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER					
	OT1	OT2												ITY	STATUS							
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER											
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	EX &							
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR					
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&				
									WHTE	##	##	##	##	##	TI	IC	IC	GOOD	POOR			
																		MALE	MALE			
Q46.1																						
YES	54	1102		1	9	9	29	6	46					2	2	50	28	26	25	29		
	18%	22%		~	2%*	21%~	15%	33%*	32%~	19%	~	~	~	~	~	18%~	13%~	18%~	14%*	32%*	21%	17%
NO	251	3980	24	54	33	52	60	13	201					9	14	221	178	56	93	145		
	82%	78%	100%~	98%*	79%~	85%	67%*	68%~	81%	~	~	~	~	~	82%~	88%~	82%~	86%*	68%*	79%	83%	
VALID CASES	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174		
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%		

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			PAN-	GOOD	FAIR			
									AMER		ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	##	##	##	##	##	TI		GOOD	POOR	MALE	
																			FE-	
																			MALE	
Q46.2																				
YES	86	1444		10	7	15	42	11	74					4	1	82	44	40	38	47
	28%	28%		~ 18%*	17%~	25%	47%*	58%~	30%	~	~	~	~	~ 36%~	6%~	30%~	21%*	49%*	32%	27%
NO	219	3638	24	45	35	46	47	8	173					7	15	189	162	42	80	127
	72%	72%	100%~	82%*	83%~	75%	53%*	42%~	70%	~	~	~	~	~ 64%~	94%~	70%~	79%*	51%*	68%	73%
VALID CASES	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE					RACE						ETHNICITY		HEALTH STATUS		GENDER					
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER	AS- IAN	NATV ILND	AMER IND/ PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	FE- MALE	MALE	
Q46.3 YES	62 20%	826 16%	2 8%	8 15%	7 17%	16 26%	21 24%	7 37%	57 23%*	~	~	~	~	~	1 9%~	1 6%~	58 21%~	35 17%*	26 32%*	17%*	24%*	20 17%	42 24%
NO	243 80%	4256 84%	22 92%~	47 85%	35 83%~	45 74%	68 76%	12 63%~	190 77%*	~	~	~	~	~	10 91%~	15 94%~	213 79%~	171 83%*	56 68%*	83%*	98 83%	132 76%	
VALID CASES	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174			
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174			
	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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	PAN-	PAN-	&	&	FE-		
									WHTE	##	##	##	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q47.1																					
YES	11	211				2	5	4	8						1	10	5	5	4	7	
	4%	4%	~	~	~	3%	6%	21%~	3%	~	~	~	~	~	6%~	4%~	2%	6%	3%	4%	
NO	294	4871	24	55	42	59	84	15	239					11	15	261	201	77	114	167	
	96%	96%	100%~	100%~	100%~	97%	94%	79%~	97%	~	~	~	~	~100%~	94%~	96%~	98%	94%	97%	96%	
VALID CASES	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174	
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			PAN-	PAN-	&	&			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	FE-	
									WHTE	##	##	##	##	##	TI					MALE	
Q47.2																					
YES	9	212				3	5	1	8							9	2	6	4	5	
	3%	4%	~	~	~	5%	6%	5%	3%	~	~	~	~	~	~	3%	1%*	7%*	3%	3%	
NO	296	4870	24	55	42	58	84	18	239					11	16	262	204	76	114	169	
	97%	96%	100%	~100%	~100%	~95%	94%	95%	97%	~	~	~	~	~100%	~100%	~97%	~99%*	~93%*	97%	97%	
VALID CASES	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174	
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									WHTE	##	##	##	##	##	TI	IC	IC	&		
																		&		
																		POOR		
																		MALE		
																		MALE		
Q47.3																				
YES	12	195			1	2	5	4	12						12	4	7	4	8	
	4%	4%	~	~	2%~	3%	6%	21%~	5%~	~	~	~	~	~	~	4%~	2%*	9%	3%	5%
NO	293	4887	24	55	41	59	84	15	235					11	16	259	202	75	114	166
	96%	96%	100%~	100%~	98%~	97%	94%	79%~	95%~	~	~	~	~	~100%	~100%	~96%	~98%*	~91%	97%	95%
VALID CASES	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE
Q47.4 YES	58 19%	916 18%	1 ~ 2%*	7 17%*	17 ~ 28%	23 26%	9 47%*	48 19%	~	~	~	~	~	2 ~ 18%*	3 19%*	53 20%*	28 14%*	29 35%*	26 22%	32 18%
NO	247 81%	4166 82%	24 100%*	54 98%*	35 83%*	44 72%	66 74%	10 53%*	199 81%	~	~	~	~	9 ~ 82%*	13 81%*	218 80%*	178 86%*	53 65%*	92 78%	142 82%
VALID CASES	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK				&	&			
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	POOR		
									##	##	##	##	##	TI	IC	IC	GOOD	POOR		
																		MALE	MALE	
Q48																				
YES	83	1408	7	14	16	16	25	4	74					3	2	78	40	41	29	54
	29%	30%	30%~	25%	38%~	27%	29%	21%~	31%~	~	~	~	~	~ 27%~	13%~	29%~	20%*	52%*	25%	32%
NO	203	3330	16	41	26	43	62	15	167					8	14	187	162	38	86	117
	71%	70%	70%~	75%	62%~	73%	71%	79%~	69%~	~	~	~	~	~ 73%~	88%~	71%~	80%*	48%*	75%	68%
NOT ANSWERED	19	344	1			2	2		6						6	4	3		3	3
VALID CASES	286	4738	23	55	42	59	87	19	241					11	16	265	202	79	115	171
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	##	##	##	##	##	TI	IC	IC	GOOD	POOR	
																		MALE	MALE	
Q49																				
YES	73	1187	6	12	14	13	24	3	66					3	1	70	34	37	27	46
	90%	88%	86%~	86%~	93%~	81%~	100%~	75%~	92%~	~	~	~	~	~100%~	50%~	92%~	87%~	93%~	93%~	88%~
NO	8	167	1	2	1	3		1	6						1	6	5	3	2	6
	10%	12%	14%~	14%~	7%~	19%~		~ 25%~	8%~	~	~	~	~	~	50%~	8%~	13%~	8%~	7%~	12%~
NOT ANSWERED	2	54			1		1		2						2	1	1			2
VALID CASES	81	1354	7	14	15	16	24	4	72					3	2	76	39	40	29	52
NUMBER OF RESPONDENTS	83	1408	7	14	16	16	25	4	74					3	2	78	40	41	29	54
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q48 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER				
	OT1	OT2												ITY	STATUS						
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER										
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	EX &						
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR				
									AMER	IAN	LLND	NATV	OTHR	MUL-	IC	IC	&	&			
									WHTE	##	##	##	##	##	TI	IC	IC	GOOD	POOR		
																		MALE	MALE		
Q50																					
YES	172 60%	2988 63%	7 30%~	19 35%*	22 54%~	40 68%	68 76%*	15 79%~	149 62%~	~	~	~	~	~	8 73%~	7 47%~	162 61%~	104 52%*	64 80%*	60 51%*	112 66%*
NO	114 40%	1758 37%	16 70%~	35 65%*	19 46%~	19 32%	21 24%*	4 21%~	93 38%~	~	~	~	~	~	3 27%~	8 53%~	104 39%~	97 48%*	16 20%*	57 49%*	57 34%*
NOT ANSWERED	19	336	1	1	1	2			5							1	5	5	2	1	5
VALID CASES	286	4746	23	54	41	59	89	19	242						11	15	266	201	80	117	169
NUMBER OF RESPONDENTS	305 100%	5082 100%	24 100%	55 100%	42 100%	61 100%	89 100%	19 100%	247 100%						11 100%	16 100%	271 100%	206 100%	82 100%	118 100%	174 100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				HIS-	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			PAN-	GOOD	FAIR				
									AMER		ILLND	NATV	OTHR	MUL-	IC	IC	&	&			
									WHTE	##	##	##	##	##	TI		GOOD	POOR	MALE	MALE	
Q51																					
YES	152 94%	2723 95%	5 71%~	16 94%~	21 95%~	34 92%~	62 97%	13 100%~	135 96%~	~	~	~	~	~	~100%~	2 40%~	147 96%~	88 92%*	60 98%*	55 96%	97 93%
NO	9 6%	155 5%	2 29%~	1 6%~	1 5%~	3 8%~	2 3%	~	5 4%~	~	~	~	~	~	~	3 60%~	6 4%~	8 8%*	1 2%*	2 4%	7 7%
NOT ANSWERED	11	110		2		3	4	2	9							2	9	8	3	3	8
VALID CASES	161	2878	7	17	22	37	64	13	140					8	5	153	96	61	57	104	
NUMBER OF RESPONDENTS	172 100%	2988 100%	7 100%	19 100%	22 100%	40 100%	68 100%	15 100%	149 100%					8 100%	7 100%	162 100%	104 100%	64 100%	60 100%	112 100%	

[ASKED IF Q50 = YES]

NQ52 WHAT IS YOUR AGE?

	BANT	BANT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE		
NQ52																						
18 TO 24	25 8%	485 10%	24 100%	~	~	~	~	~	21 9%	~	~	~	~	~	3 19%	21 8%	22 11%*	2 2%*	11 9%	13 7%		
25 TO 34	57 19%	853 17%	~	55 ~100%	~	~	~	~	40 16%*	~	~	~	~	5 45%	5 31%	48 18%	43 21%	12 15%	18 15%	37 21%		
35 TO 44	49 16%	805 16%	~	~	42 ~100%	~	~	~	40 16%	~	~	~	~	1 9%	2 13%	42 15%	33 16%	9 11%	16 14%	28 16%		
45 TO 54	62 20%	1048 21%	~	~	~	61 ~100%	~	~	52 21%	~	~	~	~	1 9%	2 13%	57 21%	43 21%	18 22%	27 23%	34 20%		
55 TO 64	91 30%	1437 28%	~	~	~	~	89 ~100%	~	79 32%	~	~	~	~	3 27%	2 13%	86 32%	55 27%	32 39%*	38 32%	51 29%		
65 TO 74	16 5%	302 6%	~	~	~	~	14 ~74%	~	11 4%	~	~	~	~	1 9%	1 6%	13 5%	8 4%	6 7%	5 4%	9 5%		
75 OR OLDER	5 2%	152 3%	~	~	~	~	5 ~26%	~	4 2%	~	~	~	~	~	1 6%	4 1%	2 1%	3 4%	3 3%	2 1%		
VALID CASES	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174		
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%		

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

NQ53 ARE YOU MALE OR FEMALE?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	&			
									WHTE	##	##	##	##	##	IC	IC	GOOD	POOR		
																	MALE	MALE		
NQ53																				
MALE	125	2039	11	18	16	27	38	8	100					5	3	114	94	26	118	
	41%	40%	46%~	33%	38%~	44%	43%	42%~	40%	~	~	~	~	~ 45%~	19%~	42%~	46%*	32%*	100%~	~
FEMALE	180	3043	13	37	26	34	51	11	147					6	13	157	112	56	174	
	59%	60%	54%~	67%	62%~	56%	57%	58%~	60%	~	~	~	~	~ 55%~	81%~	58%~	54%*	68%*	~100%~	
VALID CASES	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2	18	25	35	45	55	65	BLCK	NATV	AMER					EX &		FE-		
	INHE	OHP	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			NOT	VERY		FE-		
	TOT	TOT	TO	TO	TO	TO	AND	AFR-	AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	##	##	##	##	##	TI	IC	IC	GOOD	POOR	
																		MALE	MALE	
Q54																				
8TH GRADE OR LESS	9	267		1		2	3	3	5						4	5	3	6	4	5
	3%	6%*		~ 2%		~ 3%	3%	16%~	2%~	~	~	~	~	~	27%~	2%~	1%	8%*	3%	3%
SOME HIGH SCHOOL BUT DID NOT GRADUATE	45	599	6	6	4	13	11	5	38					1	3	42	31	14	21	24
	16%	13%	25%~	11%	10%~	22%	12%	26%~	16%~	~	~	~	~	~	9%~	20%~	16%~	15%	18%	18%
HIGH SCHOOL GRADUATE OR GED	97	1663	12	15	14	23	31	2	86					1	7	89	76	20	43	54
	34%	35%	50%~	28%	34%~	38%	35%	11%~	35%~	~	~	~	~	~	9%~	47%~	33%~	37%*	25%	31%
SOME COLLEGE OR 2-YEAR DEGREE	102	1668	6	21	17	14	36	6	88					7	1	96	67	31	29	72
	35%	35%	25%~	40%	41%~	23%*	40%	32%~	36%~	~	~	~	~	~	64%~	7%~	36%~	33%	39%	25%*
4-YEAR COLLEGE GRADUATE	26	348		8	4	5	6	2	20					2		26	18	6	13	13
	9%	7%		~ 15%	10%~	8%	7%	11%~	8%~	~	~	~	~	~	18%~	~	10%~	9%	8%	11%
MORE THAN 4-YEAR COLLEGE DEGREE	10	201		2	2	3	2	1	8							10	8	2	6	4
	3%	4%		~ 4%	5%~	5%	2%	5%~	3%~	~	~	~	~	~	~	4%~	4%	3%	5%	2%
NOT ANSWERED	16	336		2	1	1			2						1	3	3	3	2	2
VALID CASES	289	4746	24	53	41	60	89	19	245					11	15	268	203	79	116	172
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

Q55 ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH		GENDER	
	OT1	OT2													ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			PAN-	PAN-	&	&			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	FE-		
									WHTE	##	##	##	##	##	TI				MALE	MALE	
Q55																					
YES HISPANIC OR LATINO	16 6%	571 12%*	3 13%~	5 9%	2 5%~	2 3%	2 2%*	2 11%~	~	~	~	~	~	~	~100%~	~	11 5%	5 6%	3 3%*	13 8%*	
NO NOT HISPANIC OR LATINO	271 94%	4145 88%*	21 88%~	48 91%	39 95%~	57 97%	86 98%*	17 89%~	246 100%~	~	~	~	~	~100%~	~100%~	271 95%	190 94%	74 94%	114 97%*	156 92%*	
NOT ANSWERED	18	366		2	1	2	1		1					1			5	3	1	5	
VALID CASES	287	4716	24	53	41	59	88	19	246					10	16	271	201	79	117	169	
NUMBER OF RESPONDENTS	305 100%	5082 100%	24 100%	55 100%	42 100%	61 100%	89 100%	19 100%	247 100%					11 100%	16 100%	271 100%	206 100%	82 100%	118 100%	174 100%	

Q56.1 WHAT IS YOUR RACE? RESPONSE: WHITE

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER				
	OT1	OT2												ITY	STATUS						
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY						
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR					
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD				
									WHTE	##	##	##	##	##	TI	IC	IC	&			
																		&			
																		POOR			
																		MALE			
																		MALE			
Q56.1																					
YES	262	4120	22	46	40	54	80	17	247					9	6	254	181	75	106	155	
	86%	81%*	92%~	84%	95%~	89%	90%	89%~	100%~	~	~	~	~	~	82%~	38%~	94%~	88%	91%	90%	89%
NO	43	962	2	9	2	7	9	2						2	10	17	25	7	12	19	
	14%	19%*	8%~	16%	5%~	11%	10%	11%~	~	~	~	~	~	18%~	63%~	6%~	12%	9%	10%	11%	
VALID CASES	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174	
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	PAN-	PAN-	&	&			
									WHTE	##	##	##	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q56.2																					
YES	4	85			1	2	1							1	2	4			1	3	
	1%	2%	~	~	2%	3%	1%	~	~	~	~	~	~	9%	~0.7%	2%*			~0.8%	2%	
NO	301	4997	24	55	41	59	88	19	247					10	16	269	202	82	117	171	
	99%	98%	100%	~100%	~98%	~97%	99%	100%	~100%	~	~	~	~	~91%	~100%	~99%	~98%	~100%	~99%	98%	
VALID CASES	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174	
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

Q56.3 WHAT IS YOUR RACE? RESPONSE: ASIAN

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									WHTE	##	##	##	##	##	TI	IC	IC	&		
																		&		
																		POOR		
																		MALE		
																		MALE		
Q56.3																				
YES	10	136		2	1	4	3							2	1	9	9		5	5
	3%	3%		~ 4%	2%~	7%	3%		~	~	~	~	~	~ 18%	6%~	3%~	4%		~ 4%	3%
NO	295	4946	24	53	41	57	86	19	247					9	15	262	197	82	113	169
	97%	97%	100%~	96%	98%~	93%	97%	100%~	100%~	~	~	~	~	~ 82%	94%~	97%~	96%	100%~	96%	97%
VALID CASES	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER									
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	EX &					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	PAN-	PAN-	&	&		
									WHTE	##	##	##	##	##	TI	IC	IC	GOOD	POOR	
																			MALE	MALE
Q56.4																				
YES	2	40						2						1	2	2	2	2	2	
	0.7%	0.8%	~	~	~	~	~	2%	~	~	~	~	~	9%	~0.7%	1%	~	~	2%	~
NO	303	5042	24	55	42	61	87	19	247					10	16	269	204	82	116	174
	99%	99%	100%	~100%	~100%	~100%	~98%	~100%	~100%	~	~	~	~	~91%	~100%	~99%	~99%	100%	~98%	~100%
VALID CASES	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER									
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	EX &					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	##	##	##	##	##	TI	IC	IC	GOOD	POOR	
																			MALE	MALE
Q56.5																				
YES	10	313		3	2	1	2	2						7	2	7	10		4	6
	3%	6%		~ 5%	5%~	2%	2%	11%~	~	~	~	~	~	~ 64%	13%~	3%~	5%~		~ 3%	3%
NO	295	4769	24	52	40	60	87	17	247					4	14	264	196	82	114	168
	97%	94%	100%~	95%	95%~	98%	98%	89%~	100%~	~	~	~	~	~ 36%	88%~	97%~	95%~	100%~	97%	97%
VALID CASES	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

Q56.6 WHAT IS YOUR RACE? RESPONSE: OTHER

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	##	##	##	##	##	TI	IC	IC	GOOD	POOR	
																		MALE	MALE	
Q56.6																				
YES	8	278	1	5			2							4	2	6	6	2	3	5
	3%	5%*	4%~	9%*	~	~	2%	~	~	~	~	~	~	36%~	13%~	2%~	3%	2%	3%	3%
NO	297	4804	23	50	42	61	87	19	247					7	14	265	200	80	115	169
	97%	95%*	96%~	91%*	100%~	100%~	98%	100%~	100%~	~	~	~	~	64%~	88%~	98%~	97%	98%	97%	97%
VALID CASES	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
NUMBER OF RESPONDENTS	305	5082	24	55	42	61	89	19	247					11	16	271	206	82	118	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

Q57 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&			
									WHTE	##	##	##	##	##	TI		GOOD	POOR	MALE		
																			FE-		
																			MALE		
Q57																					
YES	24 11%	466 12%	4 36%	4 11%	7 ~	6 14%	3 8%	3 18%	19 10%	~	~	~	~	~	~	2 20%	22 10%	17 11%	7 11%	17 18%*	7 5%*
NO	202 89%	3267 88%	7 64%	33 89%	32 100%	43 86%	70 92%	14 82%	177 90%	~	~	~	~	~	5 ~100%	8 80%	191 90%	139 89%	56 89%	77 82%*	124 95%*
NOT ANSWERED	3	46	1			1	1		2							2	2	1	2	1	
VALID CASES	226	3733	11	37	32	50	76	17	196					5	10	213	156	63	94	131	
NUMBER OF RESPONDENTS	229 100%	3779 100%	12 100%	37 100%	32 100%	51 100%	77 100%	17 100%	198 100%					5 100%	10 100%	215 100%	158 100%	64 100%	96 100%	132 100%	

[ASKED IF SURVEY COMPLETED BY MAIL]

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

	BANT	BANT	AGE					RACE						ETHNIC-	HEALTH	GENDER				
	OT1	OT2											ITY	STATUS						
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER		NOT	EX &						
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/		HIS-	VERY						
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK	HIS-	GOOD	FAIR					
									AMER	IAN	ILND	NATV	OTHR	MUL-	GOOD	POOR	MALE	FE-		
									WHTE	##	##	##	##	##	TI	IC	IC	MALE	MALE	
Q58.1																				
YES	16	238	3	4		4	4	1	13						2	14	12	4	10	6
	67%	51%~	75%~	100%~		~ 57%~	67%~	33%~	68%~	~	~	~	~	~	~100%~	64%~	71%~	57%~	59%~	86%~
NO	8	228	1			3	2	2	6						8	5	3	7	1	
	33%	49%~	25%~	~	~	~ 43%~	33%~	67%~	32%~	~	~	~	~	~	~ 36%~	29%~	43%~	41%~	14%~	
VALID CASES	24	466	4	4		7	6	3	19						2	22	17	7	17	7
NUMBER OF RESPONDENTS	24	466	4	4		7	6	3	19						2	22	17	7	17	7
	100%	100%	100%	100%		100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH	GENDER	
	OT1	OT2	18	25	35	45	55	65	AND	BLCK	AS-	NATV	AMER	IND/	ETHNIC-	NOT	EX &	FE-		
	INHE	OHP	TO	TO	TO	TO	TO	AND	WHTE	AFR-	IAN	ILND	NATV	ALSK	HIS-	HIS-	GOOD	FAIR		
	TOT	TOT	TO	TO	TO	TO	TO	AND	##	##	##	##	##	##	IC	IC	&	&		
	ADLT	ADLT	24	34	44	54	64	OVER									GOOD	POOR		
																	MALE	MALE		
Q58.2																				
YES	14	182	4	4		2	3	1	11						2	12	10	4	9	5
	58%	39%	100%	100%	~	29%	50%	33%	58%	~	~	~	~	~	100%	55%	59%	57%	53%	71%
NO	10	284				5	3	2	8							10	7	3	8	2
	42%	61%	~	~	~	71%	50%	67%	42%	~	~	~	~	~	~	45%	41%	43%	47%	29%
VALID CASES	24	466	4	4		7	6	3	19						2	22	17	7	17	7
NUMBER OF RESPONDENTS	24	466	4	4		7	6	3	19						2	22	17	7	17	7
	100%	100%	100%	100%		100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									WHTE	##	##	##	##	##	TI	IC	IC	&		
																		&		
																		POOR		
																		MALE		
																		MALE		
Q58.3																				
YES	7	156				4	1	2	6						7	4	3	6	1	
	29%	33%	~	~	~	57%	17%	67%	32%	~	~	~	~	~	~	32%	24%	43%	35%	14%
NO	17	310	4	4		3	5	1	13						2	15	13	4	11	6
	71%	67%	100%	100%	~	43%	83%	33%	68%	~	~	~	~	~	100%	68%	76%	57%	65%	86%
VALID CASES	24	466	4	4		7	6	3	19						2	22	17	7	17	7
NUMBER OF RESPONDENTS	24	466	4	4		7	6	3	19						2	22	17	7	17	7
	100%	100%	100%	100%		100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			&	&				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									WHTE	##	##	##	##	##	TI	IC	IC	GOOD		
																	POOR	MALE		
																	MALE			
Q58.4																				
YES	1	56				1									1	1	1			
	4%	12%	~	~	~	14%	~	~	~	~	~	~	~	~	5%	6%	6%	~	~	
NO	23	410	4	4		6	6	3	19						2	21	16	7	16	7
	96%	88%	100%	100%	~	86%	100%	100%	100%	~	~	~	~	~	100%	95%	94%	100%	94%	100%
VALID CASES	24	466	4	4		7	6	3	19						2	22	17	7	17	7
NUMBER OF RESPONDENTS	24	466	4	4		7	6	3	19						2	22	17	7	17	7
	100%	100%	100%	100%		100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER									
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	EX &					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	##	##	##	##	##	TI		GOOD	POOR	MALE	MALE
Q58.5																				
YES		39																		
		8%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	24	427	4	4		7	6	3	19						2	22	17	7	17	7
	100%	92%	~100%	~100%	~	~100%	~100%	~100%	~100%	~	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%
VALID CASES	24	466	4	4		7	6	3	19						2	22	17	7	17	7
NUMBER OF RESPONDENTS	24	466	4	4		7	6	3	19						2	22	17	7	17	7
	100%	100%	100%	100%		100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

NQ13 RATING OF ALL HEALTH CARE

	BANT	BANT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	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/ILLND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI ##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE		
NQ13																						
0-6	39 18%	687 20%	4 25%~	5 12%~	5 16%~	9 24%~	14 21%	2 13%~	36 20%~	~	~	~	~	~	1 9%~	38 19%~	15 11%*	24 33%*	13 16%	26 19%		
7-8	89 41%	1221 35%	6 38%~	21 49%~	16 50%~	9 24%~	28 41%	4 27%~	74 40%~	~	~	~	~	4 44%~	4 36%~	82 41%~	59 42%	26 36%	35 44%	51 38%		
9-10	91 42%	1603 46%	6 38%~	17 40%~	11 34%~	19 51%~	26 38%	9 60%~	73 40%~	~	~	~	~	5 56%~	6 55%~	79 40%~	66 47%*	22 31%*	31 39%	57 43%		
VALID CASES	219	3511	16	43	32	37	68	15	183					9	11	199	140	72	79	134		
NUMBER OF RESPONDENTS	219	3511	16	43	32	37	68	15	183					9	11	199	140	72	79	134		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%		
MEAN	2.24	2.26	2.13	2.28	2.19	2.27	2.18	2.47	2.20					2.56	2.45	2.21	2.36	1.97	2.23	2.23		
p stat_(*=Sig @ p<=.05)		.639	~	~	~	~	.411	~	~	~	~	~	~	~	~	~	~	.001*	.000*	.885	.878	

[ASKED IF Q7 >= 1 TIME]

NQ23 RATING OF PERSONAL DOCTOR

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH		GENDER	
	OT1	OT2														ITY	STATUS				
	INHE	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				HIS-	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	HIS-	GOOD	FAIR				
									##	##	##	##	##	TI	IC	IC	&	&			
									WHTE							GOOD	POOR	MALE	MALE		
NQ23																					
0-6	35 16%	572 15%	3 17%	5 13%	5 16%	11 24%	10 14%	1 8%	34 18%	~	~	~	~	1 11%	34 17%	21 14%	14 21%	16 20%	19 14%		
7-8	51 23%	959 26%	5 28%	10 26%	4 13%	10 22%	17 24%	3 23%	41 22%	~	~	~	~	2 22%	2 18%	47 23%	31 21%	17 25%	17 21%	33 24%	
9-10	137 61%	2197 59%	10 56%	23 61%	22 71%	24 53%	43 61%	9 69%	109 59%	~	~	~	~	6 67%	9 82%	123 60%	94 64%	37 54%	49 60%	83 61%	
VALID CASES	223	3728	18	38	31	45	70	13	184					9	11	204	146	68	82	135	
NUMBER OF RESPONDENTS	223	3728	18	38	31	45	70	13	184					9	11	204	146	68	82	135	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	
MEAN	2.46	2.44	2.39	2.47	2.55	2.29	2.47	2.62	2.41					2.56	2.82	2.44	2.50	2.34	2.40	2.47	
p stat_(*=Sig @ p<=.05)		.656	~	~	~	~	.849	~	~	~	~	~	~	~	~	~	.253	.117	.406	.682	

[ASKED IF Q15 = YES]

NQ27 RATING OF SPECIALIST SEEN MOST OFTEN

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE-MALE	MALE	
NQ27	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE ##	BLK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE-MALE	MALE
0-6	13 13%	239 13%	1 ~	2 6%~	3 13%~	6 18%~	1 17%~	1 14%~	12 14%~	~	~	~	~	1 ~ 25%~	13 ~ 14%~	5 10%~	8 17%~	7 17%~	6 10%~		
7-8	39 39%	475 27%*	5 71%~	8 44%~	5 33%~	5 29%~	14 40%~	2 29%~	36 41%~	~	~	~	~	2 ~ 50%~	1 20%~	38 41%~	18 35%~	21 46%~	11 27%~	28 48%~	
9-10	48 48%	1057 60%*	2 29%~	9 50%~	8 53%~	9 53%~	15 43%~	4 57%~	39 45%~	~	~	~	~	1 ~ 25%~	4 80%~	41 45%~	29 56%~	17 37%~	23 56%~	24 41%~	
VALID CASES	100	1771	7	18	15	17	35	7	87					4	5	92	52	46	41	58	
NUMBER OF RESPONDENTS	100	1771	7	18	15	17	35	7	87					4	5	92	52	46	41	58	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%
MEAN	2.35	2.46	2.29	2.44	2.40	2.35	2.26	2.43	2.31					2.00	2.80	2.30	2.46	2.20	2.39	2.31	
p stat_(*=Sig @ p<=.05)		.110	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

NQ35 RATING OF HEALTH PLAN

	BANT	BANT	AGE							RACE							ETHNICITY			HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ILLND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE			
NQ35																							
0-6	50 18%	953 21%	1 5%	10 20%	7 18%	13 22%	17 21%	2 11%	46 20%	~	~	~	~	~	1 9%	1 7%	49 19%	30 16%	20 25%	19 17%	31 20%		
7-8	108 39%	1522 33%*	14 64%	21 42%	18 47%	16 28%*	30 37%	4 21%	90 39%	~	~	~	~	~	4 36%	5 36%	99 39%	75 40%	28 35%	39 35%	66 42%		
9-10	117 43%	2121 46%	7 32%	19 38%	13 34%	29 50%	35 43%	13 68%	93 41%	~	~	~	~	~	6 55%	8 57%	105 42%	84 44%	31 39%	55 49%	61 39%		
VALID CASES	275	4596	22	50	38	58	82	19	229					11	14	253	189	79	113	158			
NUMBER OF RESPONDENTS	275 100%	4596 100%	22 100%	50 100%	38 100%	58 100%	82 100%	19 100%	229 100%					11 100%	14 100%	253 100%	189 100%	79 100%	113 100%	158 100%			
MEAN	2.24	2.25	2.27	2.18	2.16	2.28	2.22	2.58	2.21					2.45	2.50	2.22	2.29	2.14	2.32	2.19			
p stat_(*=Sig @ p<=.05)		.817	~.503		~.710	.726			~	~	~	~	~	~	~	~	~.163	.158	.163	.163			

GETTING NEEDED CARE

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS		GENDER				
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILLND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
NPRBSEE4 NQ46	2.23	2.25	2.00	2.47	2.41	2.17	2.15	2.00	2.15					2.80	2.80	2.19	2.30	2.16	2.36	2.14	
p stat_(*=Sig @ p<=.05)	.873		~	~	~	~	~	~	~	~	~	~	~	~	~	~	.358	.377	~	~	
NCARNES4 NQ15	2.39	2.31	2.50	2.36	2.44	2.35	2.36	2.53	2.39					2.56	2.45	2.40	2.53	2.13	2.49	2.34	
p stat_(*=Sig @ p<=.05)	.126		~	~	~	~	.728	~	~	~	~	~	~	~	~	~	.000*	.000*	.131	.224	
COMPOSITE	2.31	2.28	2.25	2.42	2.42	2.26	2.26	2.27	2.27	x	x	x	x	x	2.68	2.63	2.29	2.41	2.14	2.42	2.24
p stat_(*=Sig @ p<=.05)	.364		~	~	~	~	.293	~	~	~	~	~	~	~	~	~	.000*	.001*	.014*	.007*	

GETTING CARE QUICKLY

	BANT OT1	BANT OT2	AGE					RACE					ETHNIC- ITY	HEALTH STATUS	GENDER						
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR MUL- TI	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE MALE			
NCARSN4 NQ4	2.50	2.40	2.63	2.34	2.56	2.43	2.59	2.71	2.46				3.00	2.60	2.50	2.49	2.57	2.59	2.46		
p stat_(*=Sig @ p<=.05)	.169		~	~	~	~	~	~	~	~	~	~	~	~	~	~	.857	~	~		
NAPGET4 NQ6	2.26	2.26	1.56	2.10	2.40	2.30	2.29	2.69	2.26				2.43	2.10	2.28	2.31	2.17	2.36	2.21		
p stat_(*=Sig @ p<=.05)	.971		~	~	~	~	.764	~	~	~	~	~	~	~	~	~	.298	.269	.250	.357	
COMPOSITE	2.38	2.33	2.09	2.22	2.48	2.36	2.44	2.70	2.36	x	x	x	x	x	2.71	2.35	2.39	2.40	2.37	2.48	2.34
p stat_(*=Sig @ p<=.05)	.235		~	~	~	~	.263	~	~	~	~	~	~	~	~	~	~	.476	.838	.057	.142

HOW WELL DOCTORS COMMUNICATE

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER			
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
NDREXPL4 NQ32	2.69	2.64	2.55	2.75	2.70	2.66	2.64	2.83	2.66					2.88	2.71	2.68	2.68	2.70	2.75	2.64	
p stat_(*=Sig @ p<=.05)		.300	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.765	.802	.280	.132
NDRLSTN4 NQ33	2.65	2.61	2.25	2.72	2.70	2.59	2.63	2.83	2.62					2.88	2.63	2.64	2.65	2.61	2.72	2.59	
p stat_(*=Sig @ p<=.05)		.433	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.914	.630	.280	.144
NDRESPU4 NQ34	2.72	2.67	2.67	2.81	2.70	2.71	2.66	2.75	2.67					2.88	3.00	2.70	2.73	2.67	2.77	2.68	
p stat_(*=Sig @ p<=.05)		.266	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.756	.411	.443	.250
NDRTMEN4 NQ37	2.56	2.52	2.50	2.63	2.61	2.47	2.50	2.67	2.52					2.88	2.75	2.54	2.56	2.53	2.63	2.50	
p stat_(*=Sig @ p<=.05)		.398	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.978	.636	.297	.123
COMPOSITE	2.65	2.61	2.49	2.73	2.67	2.61	2.61	2.77	2.62	x	x	x	x	x	2.88	2.77	2.64	2.65	2.63	2.72	2.60
p stat_(*=Sig @ p<=.05)		.276	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.978	.641	.243	.097

CUSTOMER SERVICE

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS		GENDER				
	INHE TOT ADLT	OHP TOT ADLT	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
NPBCLCS4 NQ50	2.35	2.30	2.00	2.27	2.17	2.07	2.67	2.50	2.29					2.33	2.60	2.32	2.26	2.50	2.40	2.32	
p stat_(*=Sig @ p<=.05)	.566		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCSRESP NQ51	2.68	2.69	2.25	2.64	2.83	2.47	2.86	2.75	2.65					3.00	2.80	2.66	2.62	2.85	2.70	2.66	
p stat_(*=Sig @ p<=.05)	.832		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.52	2.50	2.13	2.45	2.50	2.27	2.76	2.63	2.47	x	x	x	x	x	2.67	2.70	2.49	2.44	2.67	2.55	2.49
p stat_(*=Sig @ p<=.05)	.793		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

SHARED DECISION MAKING

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS		GENDER				
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR NATV	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
NNRXWHY NQ11	2.82	2.87	2.75	2.90	2.85	2.75	2.83	3.00	2.83					3.00	3.00	2.83	2.82	2.80	2.81	2.85	
p stat_(*=Sig @ p<=.05)		.389	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NNRXWYNT NQ12	2.43	2.49	2.00	2.50	2.43	2.17	2.66	2.43	2.46					2.60	1.67	2.47	2.42	2.38	2.35	2.49	
p stat_(*=Sig @ p<=.05)		.487	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NRXBST NQ13	2.57	2.53	2.75	2.70	2.71	2.25	2.59	2.43	2.56					3.00	3.00	2.56	2.66	2.37	2.52	2.58	
p stat_(*=Sig @ p<=.05)		.618	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.61	2.63	2.50	2.70	2.66	2.39	2.69	2.62	2.62	x	x	x	x	x	2.87	2.56	2.62	2.63	2.52	2.56	2.64
p stat_(*=Sig @ p<=.05)		.689	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

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

	BANTO	BANTO	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	T1	T2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	FE-MALE	MALE
PRBSEE4 Q25	77%	77%	71%	89%	82%	72%	72%	86%	74%						100%	100%	75%	82%	72%	79%	76%
CARNES4 Q14	85%	82%	100%	83%	88%	81%	84%	87%	85%						89%	91%	85%	90%	76%	88%	84%
AVERAGE	81.20	79.43	85.71	86.40	84.93	76.65	77.93	86.19	79.47	x	x	x	x	x	94.44	95.45	80.09	86.04	74.19	83.52	79.73

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

	BANTO	BANTO	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	T1	T2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	FE-MALE	MALE
CARSN4 Q4	87%	83%	100%	79%	81%	81%	94%	100%	87%						100%	80%	87%	89%	86%	89%	86%
APGET4 Q6	75%	78%	33%	70%	84%	77%	76%	92%	75%						100%	60%	77%	75%	75%	75%	76%
AVERAGE	80.89	80.38	66.67	74.66	82.63	78.81	85.19	96.15	80.96	x	x	x	x	x	100.0	70.00	81.97	81.90	80.68	82.30	80.89

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND PAC ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE-MALE	MALE	
DREXPL4 Q17	94%	92%	91%	94%	91%	94%	93%	100%						100%	86%	94%	93%	95%	95%	93%	
DRLSTN4 Q18	91%	90%	75%	94%	91%	88%	93%	100%						100%	88%	91%	91%	91%	93%	90%	
DRESPU4 Q19	94%	91%	100%	94%	91%	97%	89%	100%						100%	100%	93%	94%	91%	93%	93%	
DRTMEN4 Q20	90%	88%	100%	94%	87%	84%	89%	92%						100%	100%	89%	90%	89%	90%	90%	
AVERAGE	92.2	90.3	91.5	93.8	90.2	90.6	91.1	97.9	91.1	x	x	x	x	x	100	93.3	91.8	91.9	91.7	92.9	91.4

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

	BANTO T1	BANTO T2	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHT	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	FE- MALE	MALE
PBCLCS4 Q31	84%	80%	50%	91%	83%	67%	95%	100%	80%						100%	100%	82%	79%	90%	80%	85%
CSRESP Q32	95%	94%	75%	91%	100%	93%	100%	100%	94%						100%	95%	92%	100%	90%	98%	
AVERAGE	89.52	86.67	62.50	90.91	91.67	80.00	97.62	100.0	87.25	x	x	x	x	x	100.0	100.0	88.39	85.90	95.00	85.00	91.46

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER			
	INHE TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
NRXWHY Q10	91%	93%	88%	95%	92%	88%	91%	100%	92%					100%	100%	91%	91%	90%	91%	92%	
NRXWYNT Q11	72%	74%	50%	75%	71%	58%	83%	71%	73%					80%	33%	74%	71%	69%	67%	75%	
RXBST Q12	79%	77%	88%	85%	86%	63%	79%	71%	78%					100%	100%	78%	83%	68%	76%	79%	
AVERAGE	80.4	81.5	75.0	85.0	83.2	69.4	84.6	81.0	81.0	x	x	x	x	x	93.3	77.8	81.0	81.5	75.9	78.1	82.1

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q1 YES	316 100%	5277 100%	56 100%	81 100%	94 100%	85 100%	154 100%	~	~	~	~	~	29 100%	84 100%	203 100%	276 100%	14 100%	239 100%	77 100%
NOT ANSWERED	1	32			1		1								1	1		1	
VALID CASES	316	5277	56	81	94	85	154						29	84	203	276	14	239	77
NUMBER OF RESPONDENTS	317 100%	5309 100%	56 100%	81 100%	95 100%	85 100%	155 100%						29 100%	84 100%	204 100%	277 100%	14 100%	239 100%	78 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS- IAN ##	NATV ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q3 YES	99 32%	1639 32%	19 35%	26 33%	31 33%	23 28%	51 33%	~	~	~	~	~	10 34%	21 25%	67 33%	81 29%	9 64%	68 29%	31 40%
NO	211 68%	3549 68%	36 65%	52 67%	64 67%	59 72%	103 67%	~	~	~	~	~	19 66%	63 75%	136 67%	195 71%	5 36%	164 71%	47 60%
NOT ANSWERED	7	121	1	3		3	1								1	1		7	
VALID CASES	310	5188	55	78	95	82	154						29	84	203	276	14	232	78
NUMBER OF RESPONDENTS	317	5309	56	81	95	85	155						29	84	204	277	14	239	78
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER			
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q4 NEVER	2 2%	19 1%	1 5%	1 4%	~	~	~	~	~	~	~	11%	1 5%	1 2%	1 1%	1 13%	1 2%	1 4%
SOMETIMES	10 11%	114 7%	3 16%	4 17%	2 7%	1 6%	4 9%	~	~	~	~	11%	5 24%	5 8%	8 11%	2 25%	9 14%	1 4%
USUALLY	19 21%	272 18%	3 16%	5 21%	7 23%	4 22%	9 20%	~	~	~	~	22%	4 19%	13 22%	17 23%	1 13%	14 22%	5 18%
ALWAYS	60 66%	1135 74%	12 63%	14 58%	21 70%	13 72%	32 71%	~	~	~	~	56%	11 52%	41 68%	49 65%	4 50%	39 62%	21 75%
#ALWAYS + USUALLY (NET)	79 87%	1407 91%	15 79%	19 79%	28 93%	17 94%	41 91%	~	~	~	~	78%	15 71%	54 90%	66 88%	5 63%	53 84%	26 93%
TOP BOX SCORE	60 66%	1135 74%	12 63%	14 58%	21 70%	13 72%	32 71%	~	~	~	~	56%	11 52%	41 68%	49 65%	4 50%	39 62%	21 75%
NOT ANSWERED	8	99		2	1	5	6					1		7	6	1	5	3
VALID CASES	91	1540	19	24	30	18	45					9	21	60	75	8	63	28
NUMBER OF RESPONDENTS	99 100%	1639 100%	19 100%	26 100%	31 100%	23 100%	51 100%					10 100%	21 100%	67 100%	81 100%	9 100%	68 100%	31 100%

[ASKED IF Q3 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q5 YES	203 67%	3464 67%	43 80%*	56 71%	52 56%*	52 66%	104 68%	~	~	~	~	~	18 62%~	53 64%	135 67%	178 65%~	11 79%~	144 63%*	59 76%
NO	102 33%	1672 33%	11 20%*	23 29%	41 44%*	27 34%	50 32%	~	~	~	~	~	11 38%~	30 36%	68 33%	97 35%~	3 21%~	83 37%*	19 24%
NOT ANSWERED	12	173	2	2	2	6	1							1	1	2		12	
VALID CASES	305	5136	54	79	93	79	154						29	83	203	275	14	227	78
NUMBER OF RESPONDENTS	317	5309	56	81	95	85	155						29	84	204	277	14	239	78
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q6 NEVER	3 2%	57 2%	2 5%	1 2%			1 1%	~	~	~	~	~	~	1 2%	2 2%	3 2%	~	3 2%	
SOMETIMES	30 16%	393 12%	6 15%	9 17%	7 14%	8 18%	8 8%*	~	~	~	~	~	3 18%	14 29%	12 9%*	24 14%	2 20%	24 18%	6 11%
USUALLY	58 31%	850 26%	16 39%	21 39%	9 18%	12 27%	35 36%	~	~	~	~	~	5 29%	10 20%	44 34%	51 30%	4 40%	41 31%	17 30%
ALWAYS	98 52%	1954 60%*	17 41%	23 43%	33 67%	25 56%	54 55%	~	~	~	~	~	9 53%	24 49%	70 55%	90 54%	4 40%	65 49%	33 59%
#ALWAYS + USUALLY (NET)	156 83%	2804 86%	33 80%	44 81%	42 86%	37 82%	89 91%*	~	~	~	~	~	14 82%	34 69%	114 89%*	141 84%	8 80%	106 80%	50 89%
TOP BOX SCORE	98 52%	1954 60%*	17 41%	23 43%	33 67%	25 56%	54 55%	~	~	~	~	~	9 53%	24 49%	70 55%	90 54%	4 40%	65 49%	33 59%
NOT ANSWERED	14	210	2	2	3	7	6						1	4	7	10	1	11	3
VALID CASES	189	3254	41	54	49	45	98						17	49	128	168	10	133	56
NUMBER OF RESPONDENTS	203 100%	3464 100%	43 100%	56 100%	52 100%	52 100%	104 100%						18 100%	53 100%	135 100%	178 100%	11 100%	144 100%	59 100%

[ASKED IF Q5 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-##	AS- IAN	NATV ILND	AMER PAC ALSK	IND/ OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q7 NONE	100 34%	1484 30%	12 23%	20 26%	39 42%*	29 38%	46 30%	~	~	~	~	~	11 38%	32 40%	63 31%	93 34%	4 31%	79 36%	21 27%
1 TIME	88 30%	1437 29%	20 38%	24 32%	20 22%*	24 32%	48 32%	~	~	~	~	~	7 24%	25 31%	61 30%	84 31%	2 15%	65 30%	23 30%
2	57 19%	1045 21%	10 19%	20 26%	18 19%	9 12%*	29 19%	~	~	~	~	~	5 17%	15 19%	38 19%	51 19%	3 23%	46 21%	11 14%
3	27 9%	518 10%	3 6%	9 12%	8 9%	7 9%	15 10%	~	~	~	~	~	2 7%	6 7%	19 9%	23 8%	2 15%	17 8%	10 13%
4	10 3%	229 5%	2 4%	2 3%	4 4%	2 3%	6 4%	~	~	~	~	~	2 7%	~	9 4%	9 3%	~	5 2%	5 6%
5 TO 9	11 4%	232 5%	5 10%	1 1%	3 3%	2 3%	5 3%	~	~	~	~	~	2 7%	2 2%	8 4%	9 3%	1 8%	6 3%	5 6%
10 OR MORE TIMES	4 1%	79 2%	~	~	1 1%	3 4%	3 2%	~	~	~	~	~	~	1 1%	3 1%	3 1%	1 8%	2 0.9%	2 3%
NOT ANSWERED	20	285	4	5	2	9	3							3	3	5	1	19	1
VALID CASES	297	5024	52	76	93	76	152						29	81	201	272	13	220	77
NUMBER OF RESPONDENTS	317	5309	56	81	95	85	155						29	84	204	277	14	239	78
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN	NATV ILND	AMER IND/ALSK	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q8 #YES	136 70%	2500 72%	26 65%	40 71%	39 74%	31 69%	78 75%	~	~	~	~	~	10 56%	33 69%	99 73%	127 72%	5 56%	97 70%	39 71%
NO	58 30%	975 28%	14 35%	16 29%	14 26%	14 31%	26 25%	~	~	~	~	~	8 44%	15 31%	37 27%	49 28%	4 44%	42 30%	16 29%
NOT ANSWERED	3	65			1	2	2							1	2	3		2	1
VALID CASES	194	3475	40	56	53	45	104						18	48	136	176	9	139	55
NUMBER OF RESPONDENTS	197	3540	40	56	54	47	106						18	49	138	179	9	141	56
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q9 NEVER	5 3%	83 2%	1 3%	2 ~	2 4%	2 4%	2 2%	~	~	~	~	~	1 6%	2 4%	3 2%	4 2%	1 13%	3 2%	2 4%
SOMETIMES	11 6%	254 7%	1 3%	3 6%	2 4%	5 11%	5 5%	~	~	~	~	~	3 17%	2 4%	9 7%	10 6%	1 13%	8 6%	3 5%
USUALLY	35 18%	708 20%	14 35%	9 17%	6 11%	6 13%	19 18%	~	~	~	~	~	3 17%	6 13%	25 18%	29 16%	2 25%	23 17%	12 22%
ALWAYS	143 74%	2421 70%	24 60%	42 78%	43 81%	34 72%	79 75%	~	~	~	~	~	11 61%	38 79%	100 73%	135 76%	4 50%	105 76%	38 69%
#ALWAYS + USUALLY (NET)	178 92%	3129 90%	38 95%	51 94%	49 92%	40 85%	98 93%	~	~	~	~	~	14 78%	44 92%	125 91%	164 92%	6 75%	128 92%	50 91%
TOP BOX SCORE	143 74%	2421 70%	24 60%	42 78%	43 81%	34 72%	79 75%	~	~	~	~	~	11 61%	38 79%	100 73%	135 76%	4 50%	105 76%	38 69%
NOT ANSWERED	3	74		2	1		1							1	1	1	1	2	1
VALID CASES	194	3466	40	54	53	47	105						18	48	137	178	8	139	55
NUMBER OF RESPONDENTS	197 100%	3540 100%	40 100%	56 100%	54 100%	47 100%	106 100%						18 100%	49 100%	138 100%	179 100%	9 100%	141 100%	56 100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN	NATV ILND	AMER IND/ ALSK	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q10 YES	62 32%	1023 30%	10 25%~	12 21%*	22 41%	18 39%~	37 35%	~	~	~	~	~	3 ~17%~	14 29%~	47 34%	57 32%~	4 44%~	32 23%*	30 54%
NO	134 68%	2434 70%	30 75%~	44 79%*	32 59%	28 61%~	69 65%	~	~	~	~	~	15 ~83%~	34 71%~	91 66%	121 68%~	5 56%~	108 77%*	26 46%
NOT ANSWERED	1	83				1								1		1		1	
VALID CASES	196	3457	40	56	54	46	106						18	48	138	178	9	140	56
NUMBER OF RESPONDENTS	197	3540	40	56	54	47	106						18	49	138	179	9	141	56
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN	NATV ILND	AMER ALSK	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q11 #YES	54 89%	937 94%	8 80%~	10 83%~	18 86%~	18 100%~	36 97%~	~	~	~	~	~	3 ~100%~	10 71%~	43 93%~	49 88%~	4 100%~	26 81%~	28 97%
NO	7 11%	63 6%	2 20%~	2 17%~	3 14%~	~	1 3%~	~	~	~	~	~	~	4 29%~	3 7%~	7 13%~	~	6 19%~	1 3%
NOT ANSWERED	1	23			1										1	1			1
VALID CASES	61	1000	10	12	21	18	37						3	14	46	56	4	32	29
NUMBER OF RESPONDENTS	62	1023	10	12	22	18	37						3	14	47	57	4	32	30
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-##	AS- IAN ##	NATV ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q12 #YES	46 74%	709 71%	7 70%~	7 58%~	17 77%~	15 83%~	30 81%~	~	~	~	~	~	2 67%~	8 57%~	37 79%~	43 75%~	2 50%~	21 66%~	25 83%
NO	16 26%	290 29%	3 30%~	5 42%~	5 23%~	3 17%~	7 19%~	~	~	~	~	~	1 33%~	6 43%~	10 21%~	14 25%~	2 50%~	11 34%~	5 17%
NOT ANSWERED		24																	
VALID CASES	62	999	10	12	22	18	37						3	14	47	57	4	32	30
NUMBER OF RESPONDENTS	62	1023	10	12	22	18	37						3	14	47	57	4	32	30
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-##	AS-IAN	NATV ILND	AMER ALSK	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC
Q13 #YES	47 77%	780 79%	8 89%~	8 67%~	18 82%~	13 72%~	33 89%~	~	~	~	~	~	1 50%~	6 43%~	40 87%~	43 77%~	3 75%~	23 74%~	24 80%~
NO	14 23%	209 21%	1 11%~	4 33%~	4 18%~	5 28%~	4 11%~	~	~	~	~	~	1 50%~	8 57%~	6 13%~	13 23%~	1 25%~	8 26%~	6 20%~
NOT ANSWERED	1	34	1										1	1	1				1
VALID CASES	61	989	9	12	22	18	37						2	14	46	56	4	31	30
NUMBER OF RESPONDENTS	62	1023	10	12	22	18	37						3	14	47	57	4	32	30
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER				
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q14 WORST HEALTH CARE POSSIBLE	1 0.5%	12 0.3%	~	2%	~	~	~	~	~	~	~	~	1 6%	~	1 ~0.7%	~	1 ~11%	~	1 ~2%	
01		10 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
02	1 0.5%	13 0.4%	~	2%	~	~	1 ~0.9%	~	~	~	~	~	~	~	1 ~0.7%	1 ~0.6%	~	1 ~0.7%	~	
03	1 0.5%	13 0.4%	~	~	2%	~	~	~	~	~	~	~	~	~	~	~	~	1 ~0.7%	~	
04	1 0.5%	22 0.6%	~	~	~	2%	1 ~0.9%	~	~	~	~	~	~	~	1 ~0.7%	1 ~0.6%	~	~	1 ~2%	
05	4 2%	111 3%	2 5%	~	1 2%	1 2%	2 2%	~	~	~	~	~	~	~	2 4%	2 1%	3 2%	1 11%	2 1%	2 4%
06	5 3%	105 3%	1 3%	1 2%	2 4%	1 2%	2 2%	~	~	~	~	~	~	~	1 2%	3 2%	3 2%	1 11%	4 3%	1 2%
07	15 8%	269 8%	5 13%	6 11%	3 6%	1 2%	7 7%	~	~	~	~	~	~	2 11%	1 2%	11 8%	11 6%	1 11%	11 8%	4 7%
08	43 22%	725 21%	8 20%	12 21%	9 17%	14 30%	22 21%	~	~	~	~	~	~	5 28%	12 24%	30 22%	41 23%	1 11%	33 23%	10 18%
09	43 22%	742 21%	8 20%	12 21%	14 26%	9 19%	23 22%	~	~	~	~	~	~	5 28%	9 18%	33 24%	41 23%	1 11%	30 21%	13 23%
BEST HEALTH CARE POSSIBLE	83 42%	1438 42%	16 40%	23 41%	24 44%	20 43%	48 45%	~	~	~	~	~	~	5 28%	24 49%	56 41%	78 44%	3 33%	59 42%	24 43%
#8-10 (NET)	169 86%	2905 84%	32 80%	47 84%	47 87%	43 91%	93 88%	~	~	~	~	~	~	15 83%	45 92%	119 86%	160 89%	5 56%	122 87%	47 84%

Continued

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND##	AMER ALSK	OTH#	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
9-10 (NET)	126 64%	2180 63%	24 60%	35 63%	38 70%	29 62%	71 67%	~	~	~	~	~	10 56%	33 67%	89 64%	119 66%	4 44%	89 63%	37 66%
NOT ANSWERED		80																	
VALID CASES	197	3460	40	56	54	47	106						18	49	138	179	9	141	56
NUMBER OF RESPONDENTS	197 100%	3540 100%	40 100%	56 100%	54 100%	47 100%	106 100%						18 100%	49 100%	138 100%	179 100%	9 100%	141 100%	56 100%
MEAN	8.76	8.70	8.68	8.64	8.87	8.83	8.87						8.28	8.98	8.75	8.90	7.22	8.79	8.66
p stat_(*=Sig @ p<=.05)		.588	~.520	.514			~.284	~	~	~	~	~	~	~.970		~		~.588	

[ASKED IF Q7 >= 1]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND NATV ##	AMER IND/ ALSK ##	OTHR #	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q15 NEVER	2 1%	57 2%	1 3%	~	1 2%	1 0.9%	~	~	~	~	~	~	~	2 1%	1 0.6%	1 11%	1 0.7%	1 2%
SOMETIMES	20 10%	311 9%	6 15%	6 11%	3 6%	5 11%	5 5%*	~	~	~	~	4 22%	7 14%	11 8%	15 8%	3 33%	15 11%	5 9%
USUALLY	63 32%	1019 29%	9 23%	20 36%	16 30%	18 38%	36 34%	~	~	~	~	4 22%	16 33%	42 30%	56 31%	3 33%	42 30%	21 38%
ALWAYS	112 57%	2073 60%	24 60%	30 54%	34 63%	24 51%	64 60%	~	~	~	~	10 56%	26 53%	83 60%	107 60%	2 22%	83 59%	29 52%
#ALWAYS + USUALLY (NET)	175 89%	3092 89%	33 83%	50 89%	50 93%	42 89%	100 94%*	~	~	~	~	14 78%	42 86%	125 91%	163 91%	5 56%	125 89%	50 89%
TOP BOX SCORE	112 57%	2073 60%	24 60%	30 54%	34 63%	24 51%	64 60%	~	~	~	~	10 56%	26 53%	83 60%	107 60%	2 22%	83 59%	29 52%
NOT ANSWERED		80																
VALID CASES	197	3460	40	56	54	47	106					18	49	138	179	9	141	56
NUMBER OF RESPONDENTS	197	3540	40	56	54	47	106					18	49	138	179	9	141	56
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q16 YES	219 72%	3801 75%	14 26%*	58 73%	85 92%*	62 79%	117 75%	~	~	~	~	~	21 ~ 72%~	54 65%	155 76%*	200 72%~	10 71%~	150 67%*	69 88%
NO	84 28%	1296 25%	40 74%*	21 27%	7 8%*	16 21%	38 25%	~	~	~	~	~	8 ~ 28%~	29 35%	49 24%*	76 28%~	4 29%~	75 33%*	9 12%
NOT ANSWERED	14	212	2	2	3	7								1		1		14	
VALID CASES	303	5097	54	79	92	78	155						29	83	204	276	14	225	78
NUMBER OF RESPONDENTS	317 100%	5309 100%	56 100%	81 100%	95 100%	85 100%	155 100%						29 100%	84 100%	204 100%	277 100%	14 100%	239 100%	78 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS- IAN ##	NATV ILND ##	AMER ALSK ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q17 YES	34 16%	409 11%	2 14%	14 24%	12 14%	6 11%	19 17%	~	~	~	~	~	1 5%	9 17%	23 15%	28 14%	4 40%	16 11%*	18 27%
NO	178 84%	3206 89%	12 86%	44 76%	71 86%	51 89%	93 83%	~	~	~	~	~	19 95%	45 83%	126 85%	166 86%	6 60%	129 89%*	49 73%
NOT ANSWERED	7	186			2	5	5						1		6	6		5	2
VALID CASES	212	3615	14	58	83	57	112						20	54	149	194	10	145	67
NUMBER OF RESPONDENTS	219	3801	14	58	85	62	117						21	54	155	200	10	150	69
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q16 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV HAW/ILND##	AMER IND/PAC ALSK##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q18 #YES	32 94%	369 92%	2 100%	14 100%	11 92%	5 83%	18 95%	~	~	~	~	~	1 100%	9 100%	22 96%	27 96%	4 100%	15 94%	17 94%
NO	2 6%	30 8%	~	~	1 8%	1 17%	1 5%	~	~	~	~	~	~	~	1 4%	1 4%	~	1 6%	1 6%
NOT ANSWERED		10																	
VALID CASES	34	399	2	14	12	6	19						1	9	23	28	4	16	18
NUMBER OF RESPONDENTS	34	409	2	14	12	6	19						1	9	23	28	4	16	18
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q16 = YES AND Q17 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND PAC ##	AMER ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q19 YES	4 1%	214 4%*	1 2%	~	3 3%	~	3 2%	~	~	~	~	~	~	~	3 1%	2 0.7%	1 7%	1 0.4%	3 4%
NO	297 99%	4864 96%*	52 98%	78 100%	90 97%	77 100%	151 98%	~	~	~	~	~	29 ~100%	82 ~100%	200 99%	272 99%	13 93%	222 ~100%	75 96%
NOT ANSWERED	16	231	3	3	2	8	1							2	1	3		16	
VALID CASES	301	5078	53	78	93	77	154						29	82	203	274	14	223	78
NUMBER OF RESPONDENTS	317	5309	56	81	95	85	155						29	84	204	277	14	239	78
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q20 NEVER	1 33%	21 10%	~	~	50%	~	33%	~	~	~	~	~	~	1 33%	1 50%	~	~	1 33%
SOMETIMES	1 33%	30 14%	~	~	50%	~	33%	~	~	~	~	~	~	1 33%	1 50%	~	~	1 33%
USUALLY	1 33%	46 22%	1 100%	~	~	~	33%	~	~	~	~	~	~	1 33%	1 100%	~	~	1 33%
ALWAYS		113 54%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
#ALWAYS + USUALLY (NET)	1 33%	159 76%	1 100%	~	~	~	33%	~	~	~	~	~	~	1 33%	1 100%	~	~	1 33%
TOP BOX SCORE		113 54%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	1	4			1													1
VALID CASES	3	210	1		2		3							3	2	1		3
NUMBER OF RESPONDENTS	4	214	1		3		3							3	2	1	1	3
	100%	100%	100%		100%		100%							100%	100%	100%		100%

[ASKED IF Q19 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN	NATV HAW/ILND	AMER IND/PAC ALSK	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q21 #YES	2 67%	170 83%~100%	1 ~	1 ~	1 50%	1 ~	2 67%	~	~	~	~	~	~	2 67%	1 50%	1 100%	~	2 67%
NO	1 33%	36 17%~	~	~	1 50%	~	1 33%	~	~	~	~	~	~	1 33%	1 50%	~	~	1 33%
NOT ANSWERED	1	8			1													1
VALID CASES	3	206	1		2		3							3	2	1		3
NUMBER OF RESPONDENTS	4	214	1		3		3							3	2	1	1	3
	100%	100%	100%		100%		100%							100%	100%	100%		100%

[ASKED IF Q19 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER				
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND##	AMER IND/ALSK##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC	
Q22																					
YES	28 9%	522 10%	3 6%	11 14%	6 7%	8 10%	17 11%	~	~	~	~	~	3 11%	5 6%	21 10%	22 8%	4 29%	12 5%*	16 21%		
NO	273 91%	4555 90%	51 94%	67 86%	85 93%	70 90%	138 89%	~	~	~	~	~	25 89%	77 94%	182 90%	252 92%	10 71%	211 95%*	62 79%		
NOT ANSWERED	16	232	2	3	4	7							1	2	1	3			16		
VALID CASES	301	5077	54	78	91	78	155						28	82	203	274	14	223	78		
NUMBER OF RESPONDENTS	317	5309	56	81	95	85	155						29	84	204	277	14	239	78		
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS- IAN ##	NATV HAW/ ILND NATV ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q23 NEVER	2 7%	63 13%	1 ~ 9%	1 ~ 13%	1 6%	1 6%	~	~	~	~	1 33%	~	2 10%	1 5%	1 25%	~	2 13%	
SOMETIMES	2 7%	78 16%	2 ~ 18%	~	2 12%	~	~	~	~	~	~	~	2 10%	2 10%	~	1 8%	1 7%	
USUALLY	8 30%	122 24%	4 ~ 36%	3 60%	1 13%	6 35%	~	~	~	~	~	~	2 40%	6 30%	5 24%	3 75%	4 33%	4 27%
ALWAYS	15 56%	236 47%	3 100%	4 36%	2 40%	6 75%	8 47%	~	~	~	~	2 67%	3 60%	10 50%	13 62%	~	7 58%	8 53%
#ALWAYS + USUALLY (NET)	23 85%	358 72%	3 100%	8 73%	5 100%	7 88%	14 82%	~	~	~	~	2 67%	5 100%	16 80%	18 86%	3 75%	11 92%	12 80%
TOP BOX SCORE	15 56%	236 47%	3 100%	4 36%	2 40%	6 75%	8 47%	~	~	~	~	2 67%	3 60%	10 50%	13 62%	~	7 58%	8 53%
NOT ANSWERED	1	23		1									1	1			1	
VALID CASES	27	499	3	11	5	8	17				3	5	20	21	4	12	15	
NUMBER OF RESPONDENTS	28	522	3	11	6	8	17				3	5	21	22	4	12	16	
	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q22 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q24 #YES	16 59%	347 69%	3 100%	4 40%	4 67%	5 63%	8 50%	~	~	~	~	~	2 67%	4 80%	11 55%	13 62%	2 50%	6 55%	10 63%
NO	11 41%	153 31%	~	6 60%	2 33%	3 38%	8 50%	~	~	~	~	~	1 33%	1 20%	9 45%	8 38%	2 50%	5 45%	6 38%
NOT ANSWERED	1	22		1			1								1	1		1	
VALID CASES	27	500	3	10	6	8	16						3	5	20	21	4	11	16
NUMBER OF RESPONDENTS	28	522	3	11	6	8	17						3	5	21	22	4	12	16
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q22 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND PAC ##	AMER ALSK ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q25 YES	42 14%	769 15%	2 4%*	8 10%	15 16%	17 22%*	22 14%	~	~	~	~	~	5 ~ 17%	10 12%	29 14%	32 12%~	7 50%~	11 5%*	31 40%
NO	259 86%	4303 85%	52 96%*	69 90%	77 84%	61 78%*	132 86%	~	~	~	~	~	24 ~ 83%	72 88%	174 86%	242 88%~	7 50%~	212 95%*	47 60%
NOT ANSWERED	16	237	2	4	3	7	1							2	1	3		16	
VALID CASES	301	5072	54	77	92	78	154						29	82	203	274	14	223	78
NUMBER OF RESPONDENTS	317	5309	56	81	95	85	155						29	84	204	277	14	239	78
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q26 NEVER	5 12%	94 13%	~	38%	~	12%	2 9%	~	~	~	~	2 40%	1 10%	4 14%	4 13%	1 14%	~	5 16%
SOMETIMES	8 19%	122 16%	50%	38%	13%	12%	6 27%	~	~	~	~	1 20%	7 24%	6 19%	1 14%	3 27%	5 16%	
USUALLY	9 21%	178 24%	~	~	33%	24%	4 14%	~	~	~	~	1 20%	2 20%	5 17%	6 19%	1 14%	3 27%	6 19%
ALWAYS	20 48%	353 47%	50%	25%	53%	53%	11 50%	~	~	~	~	1 20%	7 70%	13 45%	16 50%	4 57%	5 45%	15 48%
#ALWAYS + USUALLY (NET)	29 69%	531 71%	50%	25%	87%	76%	14 64%	~	~	~	~	2 40%	9 90%	18 62%	22 69%	5 71%	8 73%	21 68%
TOP BOX SCORE	20 48%	353 47%	50%	25%	53%	53%	11 50%	~	~	~	~	1 20%	7 70%	13 45%	16 50%	4 57%	5 45%	15 48%
NOT ANSWERED		22																
VALID CASES	42	747	2	8	15	17	22					5	10	29	32	7	11	31
NUMBER OF RESPONDENTS	42	769	2	8	15	17	22					5	10	29	32	7	11	31
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
Q27 #YES	24 57%	428 57%	2 100%	2 25%	7 47%	13 76%	15 68%	~	~	~	~	~	1 20%	4 40%	18 62%	19 59%	3 43%	8 73%	16 52%
NO	18 43%	317 43%	~	6 75%	8 53%	4 24%	7 32%	~	~	~	~	~	4 80%	6 60%	11 38%	13 41%	4 57%	3 27%	15 48%
NOT ANSWERED		24																	
VALID CASES	42	745	2	8	15	17	22						5	10	29	32	7	11	31
NUMBER OF RESPONDENTS	42	769	2	8	15	17	22						5	10	29	32	7	11	31
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q28 YES	67 22%	1124 22%	8 15%	19 25%	18 20%	22 28%	39 25%	~	~	~	~	~	9 31%	14 17%	50 25%	57 21%	7 50%	37 17%*	30 38%
NO	233 78%	3915 78%	46 85%	57 75%	74 80%	56 72%	114 75%	~	~	~	~	~	20 69%	68 83%	152 75%	216 79%	7 50%	185 83%*	48 62%
NOT ANSWERED	17	270	2	5	3	7	2							2	2	4		17	
VALID CASES	300	5039	54	76	92	78	153						29	82	202	273	14	222	78
NUMBER OF RESPONDENTS	317	5309	56	81	95	85	155						29	84	204	277	14	239	78
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND##	AMER IND/ALSK##	OTHR#	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q29 #YES	36 56%	673 62%	2 25%~	12 63%~	9 53%~	13 65%~	24 63%~	~	~	~	~	~	4 44%~	7 54%~	29 59%~	33 60%~	3 43%~	20 57%~	16 55%
NO	28 44%	416 38%	6 75%~	7 37%~	8 47%~	7 35%~	14 37%~	~	~	~	~	~	5 56%~	6 46%~	20 41%~	22 40%~	4 57%~	15 43%~	13 45%
NOT ANSWERED	3	35			1	2	1							1	1	2		2	1
VALID CASES	64	1089	8	19	17	20	38						9	13	49	55	7	35	29
NUMBER OF RESPONDENTS	67	1124	8	19	18	22	39						9	14	50	57	7	37	30
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC
Q30 YES	273 93%	4437 89%*	48 92%	73 95%	81 94%	71 92%	143 95%	~	~	~	~	~	27 96%~	74 90%	186 94%	251 93%~	12 92%~	200 93%	73 95%
NO	19 7%	550 11%*	4 8%	4 5%	5 6%	6 8%	8 5%	~	~	~	~	~	1 4%~	8 10%	11 6%	18 7%~	1 8%~	15 7%	4 5%
NOT ANSWERED	25	322	4	4	9	8	4						1	2	7	8	1	24	1
VALID CASES	292	4987	52	77	86	77	151						28	82	197	269	13	215	77
NUMBER OF RESPONDENTS	317	5309	56	81	95	85	155						29	84	204	277	14	239	78
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND NATV ##	AMER IND/ ALSK #	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q31 NONE	81 31%	1154 27%	10 22%	15 21%*	34 44%*	22 32%	44 32%	~	~	~	~	7 28%	20 28%	57 32%	79 33%	2 17%	69 36%*	12 17%
1 TIME	96 37%	1496 35%	17 38%	34 49%*	23 29%	22 32%	53 39%	~	~	~	~	7 28%	28 39%	67 38%	91 38%	4 33%	71 37%	25 36%
2	49 19%	893 21%	12 27%	12 17%	11 14%	14 21%	21 15%	~	~	~	~	8 32%	15 21%	29 16%	43 18%	1 8%	34 18%	15 21%
3	19 7%	389 9%	~	5 7%	6 8%	8 12%	10 7%	~	~	~	~	1 4%	6 8%	11 6%	14 6%	3 25%	9 5%*	10 14%
4	10 4%	157 4%	4 9%	4 6%	2 3%	~	5 4%	~	~	~	~	2 8%	1 1%	8 5%	8 3%	1 8%	5 3%	5 7%
5 TO 9	5 2%	138 3%	2 4%	~	2 3%	1 1%	3 2%	~	~	~	~	~	1 1%	4 2%	4 2%	1 8%	3 2%	2 3%
10 OR MORE TIMES	1 0.4%	34 0.8%	~	~	~	1 1%	1 0.7%	~	~	~	~	~	~	1 ~0.6%	1 ~0.4%	~	~	1 1%
NOT ANSWERED	12	176	3	3	3	3	6					2	3	9	11		9	3
VALID CASES	261	4261	45	70	78	68	137					25	71	177	240	12	191	70
NUMBER OF RESPONDENTS	273	4437	48	73	81	71	143					27	74	186	251	12	200	73
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD POOR	NO CCC	CCC
Q31A ALWAYS	3 2%	65 2%	1 3%~	1 ~	1 2%~	1 2%~	2 2%	~	~	~	~	~	~	1 2%	2 2%	3 2%~	~	1 0.8%	2 3%
USUALLY		49 2%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	9 5%	202 7%	2 6%~	3 5%	1 2%~	3 7%~	~	~	~	~	~	~	1 6%~	8 16%*	1 0.8%*	9 6%~	~	7 6%	2 3%
NEVER	167 93%	2765 90%	32 91%~	52 95%	42 95%~	41 91%~	91 98%*	~	~	~	~	~	17 94%~	41 82%*	117 98%*	148 93%~	10 100%~	113 93%	54 93%
#NEVER + SOMETIMES (NET)	176 98%	2967 96%*	34 97%~	55 100%~	43 98%~	44 98%~	91 98%	~	~	~	~	~	18 100%~	49 98%	118 98%	157 98%~	10 100%~	120 99%	56 97%
TOP BOX SCORE	167 93%	2765 90%	32 91%~	52 95%	42 95%~	41 91%~	91 98%*	~	~	~	~	~	17 94%~	41 82%*	117 98%*	148 93%~	10 100%~	113 93%	54 93%
NOT ANSWERED		1 26				1								1		1		1	
VALID CASES	179	3081	35	55	44	45	93						18	50	120	160	10	121	58
NUMBER OF RESPONDENTS	180 100%	3107 100%	35 100%	55 100%	44 100%	46 100%	93 100%						18 100%	51 100%	120 100%	161 100%	10 100%	122 100%	58 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q32 NEVER	5 3%	64 2%	2 6%~	2 ~	2 5%~	1 2%~	3 3%	~	~	~	~	~	1 6%~	1 2%	4 3%	3 2%~	2 20%~	3 2%	2 3%
SOMETIMES	2 1%	100 3%*	~	2%	~	2%~	1 1%	~	~	~	~	~	1 6%~	2 ~	2 1%~	2 1%~	1 ~	1 0.8%	1 2%
USUALLY	21 12%	428 14%	5 14%~	10 18%	2 5%~	4 9%~	9 10%	~	~	~	~	~	2 11%~	8 16%	12 10%	19 12%~	1 10%~	16 13%	5 9%
ALWAYS	151 84%	2486 81%	28 80%~	44 80%	40 91%~	39 87%~	80 86%	~	~	~	~	~	14 78%~	42 82%	102 85%	137 85%~	7 70%~	101 83%	50 86%
#ALWAYS + USUALLY (NET)	172 96%	2914 95%	33 94%~	54 98%	42 95%~	43 96%~	89 96%	~	~	~	~	~	16 89%~	50 98%	114 95%	156 97%~	8 80%~	117 97%	55 95%
TOP BOX SCORE	151 84%	2486 81%	28 80%~	44 80%	40 91%~	39 87%~	80 86%	~	~	~	~	~	14 78%~	42 82%	102 85%	137 85%~	7 70%~	101 83%	50 86%
NOT ANSWERED		1 29				1												1	
VALID CASES	179	3078	35	55	44	45	93						18	51	120	161	10	121	58
NUMBER OF RESPONDENTS	180	3107	35	55	44	46	93						18	51	120	161	10	122	58
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND NATV ##	AMER IND/ ALSK ##	OTHR #	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q33 NEVER	1 0.6%	29 0.9%	~	~	~	2%~	1%~	~	~	~	~	~	~	~	1 ~0.8%	1 ~0.6%	1 ~0.8%	1
SOMETIMES	6 3%	120 4%	1 3%~	2 4%	2 5%~	1 2%~	2 2%	~	~	~	~	2 ~11%	1 2%	4 3%	2 1%~	3 30%~	3 2%	3 5%
USUALLY	20 11%	422 14%	6 17%~	7 13%	3 7%~	4 9%~	9 10%	~	~	~	~	2 ~11%	7 14%	13 11%	20 12%~	~	17 ~14%*	3 5%
ALWAYS	152 85%	2505 81%	28 80%~	46 84%	39 89%~	39 87%~	81 87%	~	~	~	~	14 ~78%	43 84%	102 85%	138 86%~	7 70%~	100 83%	52 90%
#ALWAYS + USUALLY (NET)	172 96%	2927 95%	34 97%~	53 96%	42 95%~	43 96%~	90 97%	~	~	~	~	16 ~89%	50 98%	115 96%	158 98%~	7 70%~	117 97%	55 95%
TOP BOX SCORE	152 85%	2505 81%	28 80%~	46 84%	39 89%~	39 87%~	81 87%	~	~	~	~	14 ~78%	43 84%	102 85%	138 86%~	7 70%~	100 83%	52 90%
NOT ANSWERED	1	31				1												1
VALID CASES	179	3076	35	55	44	45	93					18	51	120	161	10	121	58
NUMBER OF RESPONDENTS	180	3107	35	55	44	46	93					18	51	120	161	10	122	58
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS- IAN ##	NATV HAW/ ILND NATV ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
Q34 NEVER	2 1%	30 1%	~	~	2%~	2%~	2	~	~	~	~	~	~	~	2	1	1	1	1
SOMETIMES		85 3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
USUALLY	22 12%	368 12%	5 14%~	6 11%~	5 11%~	6 13%~	7 8%*	~	~	~	~	~	4 22%~	8 16%~	12 10%~	17 11%~	3 30%~	16 13%~	6 10%~
ALWAYS	155 87%	2589 84%	30 86%~	49 89%~	38 86%~	38 84%~	84 90%~	~	~	~	~	~	14 78%~	43 84%~	106 88%~	143 89%~	6 60%~	104 86%~	51 88%~
#ALWAYS + USUALLY (NET)	177 99%	2957 96%*	35 100%~	55 100%~	43 98%~	44 98%~	91 98%~	~	~	~	~	~	18 100%~	51 100%~	118 98%~	160 99%~	9 90%~	120 99%~	57 98%~
TOP BOX SCORE	155 87%	2589 84%	30 86%~	49 89%~	38 86%~	38 84%~	84 90%~	~	~	~	~	~	14 78%~	43 84%~	106 88%~	143 89%~	6 60%~	104 86%~	51 88%~
NOT ANSWERED	1	35				1													1
VALID CASES	179	3072	35	55	44	45	93						18	51	120	161	10	121	58
NUMBER OF RESPONDENTS	180	3107	35	55	44	46	93						18	51	120	161	10	122	58
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS- IAN ##	NATV HAW/ ILND NATV ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q35 YES	127 71%	2086 68%	9 26%	36 65%	39 89%	43 98%	69 74%	~	~	~	~	~	13 72%	35 70%	88 73%	117 73%	6 60%	81 68%	46 79%
NO	51 29%	964 32%	26 74%	19 35%	5 11%	1 2%	24 26%	~	~	~	~	~	5 28%	15 30%	32 27%	43 27%	4 40%	39 33%	12 21%
NOT ANSWERED	2	57				2								1		1		2	
VALID CASES	178	3050	35	55	44	44	93						18	50	120	160	10	120	58
NUMBER OF RESPONDENTS	180 100%	3107 100%	35 100%	55 100%	44 100%	46 100%	93 100%						18 100%	51 100%	120 100%	161 100%	10 100%	122 100%	58 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q36 NEVER	1 0.8%	25 1%	~	1 3%	~	~	~	~	~	~	~	~	1 3%	~	1 0.9%	~	1 1%		
SOMETIMES	8 6%	112 5%	2 25%	2 6%	1 3%	3 7%	2 3%	~	~	~	~	~	3 23%	3 9%	5 6%	7 6%	1 17%	6 8%	2 4%
USUALLY	24 19%	405 20%	2 25%	11 31%	5 13%	6 14%	14 21%	~	~	~	~	~	1 8%	6 17%	17 20%	23 20%	~	19 24%	5 11%
ALWAYS	93 74%	1518 74%	4 50%	22 61%	33 85%	34 79%	52 76%	~	~	~	~	~	9 69%	25 71%	65 75%	85 73%	5 83%	54 68%	39 85%
#ALWAYS + USUALLY (NET)	117 93%	1923 93%	6 75%	33 92%	38 97%	40 93%	66 97%	~	~	~	~	~	10 77%	31 89%	82 94%	108 93%	5 83%	73 91%	44 96%
TOP BOX SCORE	93 74%	1518 74%	4 50%	22 61%	33 85%	34 79%	52 76%	~	~	~	~	~	9 69%	25 71%	65 75%	85 73%	5 83%	54 68%	39 85%
NOT ANSWERED	1	26	1				1							1	1		1		
VALID CASES	126	2060	8	36	39	43	68						13	35	87	116	6	80	46
NUMBER OF RESPONDENTS	127 100%	2086 100%	9 100%	36 100%	39 100%	43 100%	69 100%						13 100%	35 100%	88 100%	117 100%	6 100%	81 100%	46 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q37 NEVER	3 2%	72 2%	~	2%	1	2	1	~	~	~	~	~	2	1	2	1	2	1
					5%	~	1%	~	~	~	~	~	4%	0.8%	1%	10%	2%	2%
SOMETIMES	13 7%	238 8%	3 9%	5 9%	1 2%	4 9%	1 1%*	~	~	~	~	2 11%	7 14%	4 3%*	10 6%	1 10%	10 8%	3 5%
USUALLY	33 19%	692 23%	6 17%	13 24%	8 18%	6 14%	16 17%	~	~	~	~	3 17%	11 22%	20 17%	30 19%	1 10%	25 21%	8 14%
ALWAYS	128 72%	2035 67%	26 74%	35 65%	33 75%	34 77%	75 81%*	~	~	~	~	13 72%	30 60%*	95 79%*	118 74%	7 70%	82 69%	46 79%
#ALWAYS + USUALLY (NET)	161 91%	2727 90%	32 91%	48 89%	41 93%	40 91%	91 98%*	~	~	~	~	16 89%	41 82%*	115 96%*	148 93%	8 80%	107 90%	54 93%
TOP BOX SCORE	128 72%	2035 67%	26 74%	35 65%	33 75%	34 77%	75 81%*	~	~	~	~	13 72%	30 60%*	95 79%*	118 74%	7 70%	82 69%	46 79%
NOT ANSWERED	3	70	1		2								1		1		3	
VALID CASES	177	3037	35	54	44	44	93					18	50	120	160	10	119	58
NUMBER OF RESPONDENTS	180	3107	35	55	44	46	93					18	51	120	161	10	122	58
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN	NATV ILND	AMER IND/ALSK	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q38 #YES	151 86%	2662 87%	29 85%~	47 87%	39 91%~	36 82%~	83 90%	~	~	~	~	~	14 78%~	41 82%	105 88%	140 88%~	6 67%~	103 87%	48 84%
NO	24 14%	384 13%	5 15%~	7 13%	4 9%~	8 18%~	9 10%	~	~	~	~	~	4 22%~	9 18%	14 12%	20 13%~	3 33%~	15 13%	9 16%
NOT ANSWERED		5 61	1	1	1	2	1							1	1	1	1	4	1
VALID CASES	175	3046	34	54	43	44	92						18	50	119	160	9	118	57
NUMBER OF RESPONDENTS	180	3107	35	55	44	46	93						18	51	120	161	10	122	58
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q39 YES	76 43%	1240 41%	15 44%~	25 46%	18 41%~	18 40%~	40 43%	~	~	~	~	~	7 39%~	21 41%	51 43%	64 40%~	8 80%~	42 35%*	34 59%
NO	101 57%	1789 59%	19 56%~	29 54%	26 59%~	27 60%~	53 57%	~	~	~	~	~	11 61%~	30 59%	69 58%	97 60%~	2 20%~	77 65%*	24 41%
NOT ANSWERED	3	78	1	1		1												3	
VALID CASES	177	3029	34	54	44	45	93						18	51	120	161	10	119	58
NUMBER OF RESPONDENTS	180	3107	35	55	44	46	93						18	51	120	161	10	122	58
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q40 NEVER	5 7%	81 7%	1 7%	2 8%	1 6%	1 6%	1 3%	~	~	~	~	~	3 43%	1 5%	4 8%	2 3%	3 43%	~	5 16%	
SOMETIMES	5 7%	139 12%	2 13%	1 4%	~	2 11%	3 8%	~	~	~	~	~	1 14%	1 5%	4 8%	4 6%	1 14%	2 5%	3 9%	
USUALLY	23 31%	342 28%	5 33%	9 38%	6 35%	3 17%	11 28%	~	~	~	~	~	~	8 40%	13 26%	19 30%	2 29%	18 43%	5 16%	
ALWAYS	41 55%	645 53%	7 47%	12 50%	10 59%	12 67%	24 62%	~	~	~	~	~	3 43%	10 50%	29 58%	38 60%	1 14%	22 52%	19 59%	
#ALWAYS + USUALLY (NET)	64 86%	987 82%	12 80%	21 88%	16 94%	15 83%	35 90%	~	~	~	~	~	3 43%	18 90%	42 84%	57 90%	3 43%	40 95%	24 75%	
TOP BOX SCORE	41 55%	645 53%	7 47%	12 50%	10 59%	12 67%	24 62%	~	~	~	~	~	3 43%	10 50%	29 58%	38 60%	1 14%	22 52%	19 59%	
NOT ANSWERED	2	33	1	1		1								1	1	1	1		2	
VALID CASES	74	1207	15	24	17	18	39							7	20	50	63	7	42	32
NUMBER OF RESPONDENTS	76	1240	15	25	18	18	40							7	21	51	64	8	42	34
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q41 WORST PERSONAL DOCTOR POSSIBLE		6 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
01		4 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
02	2 0.8%	12 0.3%	~	1%	1%	~	1 0.7%	~	~	~	~	1 4%	~	2 1%	~	2 17%	~	2 3%	
03		23 0.5%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
04	2 0.8%	19 0.4%	~	~	1%	1%	~	~	~	~	~	~	1 1%	~	1 0.4%	1 8%	1 0.5%	1 1%	
05	6 2%	105 2%	~	3%	4%	1%	5 4%	~	~	~	~	~	1 1%	5 3%	6 2%	~	6 3%	~	
06	2 0.8%	97 2%	~	~	3%	~	2 1%	~	~	~	~	~	~	2 1%	2 0.8%	~	2 1%	~	
07	7 3%	261 6%	3 7%	3 4%	1 1%	~	3 2%	~	~	~	~	~	1 4%	1 1%	4 2%	6 2%	~	6 3%	1 1%
08	35 13%	672 16%	4 9%	13 19%	9 11%	9 13%	21 15%	~	~	~	~	~	4 16%	9 13%	26 15%	35 14%	~	26 14%	9 13%
09	52 20%	839 20%	10 22%	11 16%	13 16%	18 27%	26 19%	~	~	~	~	~	6 24%	15 21%	35 20%	49 20%	2 17%	40 21%	12 17%
BEST PERSONAL DOCTOR POSSIBLE	155 59%	2208 52%	28 62%	40 57%	49 62%	38 57%	80 58%	~	~	~	~	~	13 52%	45 63%	105 59%	144 59%	7 58%	109 57%	46 65%
#8-10 (NET)	242 93%	3719 88%	42 93%	64 91%	71 90%	65 97%	127 92%	~	~	~	~	~	23 92%	69 96%	166 93%	228 94%	9 75%	175 92%	67 94%

Continued

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
9-10 (NET)	207 79%	3047 72%*	38 84%~	51 73%	62 78%	56 84%	106 77%	~	~	~	~	~	19 ~76%~	60 83%	140 78%	193 79%~	9 75%~	149 78%	58 82%
NOT ANSWERED	12	191	3	3	2	4	5						2	2	7	8		10	2
VALID CASES	261	4246	45	70	79	67	138						25	72	179	243	12	190	71
NUMBER OF RESPONDENTS	273 100%	4437 100%	48 100%	73 100%	81 100%	71 100%	143 100%						27 100%	74 100%	186 100%	251 100%	12 100%	200 100%	73 100%
MEAN	9.20	8.98	9.40	9.09	9.10	9.30	9.14						9.00	9.35	9.17	9.26	8.00	9.19	9.23
p stat_(*=Sig @ p<=.05)		.011*	~.410	.488	.433	.490	~	~	~	~	~	~	~.226	.635		~		~.865	

[ASKED IF Q30 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE ##	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q42 YES	63 24%	1096 26%	2 4%	11 16%*	26 33%*	24 36%*	39 28%	~	~	~	~	~	8 32%	9 13%*	49 28%	51 21%	8 67%	10 5%*	53 75%
NO	197 76%	3160 74%	43 96%	58 84%*	53 67%*	43 64%*	98 72%	~	~	~	~	~	17 68%	63 88%*	129 72%	191 79%	4 33%	179 95%*	18 25%
NOT ANSWERED	13	181	3	4	2	4	6						2	2	8	9		11	2
VALID CASES	260	4256	45	69	79	67	137						25	72	178	242	12	189	71
NUMBER OF RESPONDENTS	273 100%	4437 100%	48 100%	73 100%	81 100%	71 100%	143 100%						27 100%	74 100%	186 100%	251 100%	12 100%	200 100%	73 100%

[ASKED IF Q30 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR- ##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
Q43 #YES	55 93%	955 90%	1 100%~	9 90%~	25 96%~	20 91%~	36 95%~	~	~	~	~	~	7 88%~	7 88%~	45 94%~	47 96%~	6 75%~	7 88%~	48 94%	
NO	4 7%	109 10%	~	10%~	4%~	9%~	2 5%~	~	~	~	~	~	1 13%~	1 13%~	3 6%~	2 4%~	2 25%~	1 13%~	3 6%	
NOT ANSWERED	4	32	1	1		2	1							1	1	2			2	2
VALID CASES	59	1064	1	10	26	22	38						8	8	48	49	8	8	8	51
NUMBER OF RESPONDENTS	63	1096	2	11	26	24	39						8	9	49	51	8	10	53	
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN	NATV ILND	AMER IND/ALSK	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q44 #YES	52 91%	906 85%		9 ~ 90%	24 ~ 96%	19 ~ 90%	36 95%	~	~	~	~	~	5 ~ 71%	6 86%	43 91%	45 94%	5 71%	6 86%	46 92%
NO	5 9%	155 15%	1 100%	1 ~ 10%	1 4%	2 10%	2 5%	~	~	~	~	~	2 ~ 29%	1 14%	4 9%	3 6%	2 29%	1 14%	4 8%
NOT ANSWERED	6	35	1	1	1	3	1						1	2	2	3	1	3	3
VALID CASES	57	1061	1	10	25	21	38						7	7	47	48	7	7	50
NUMBER OF RESPONDENTS	63	1096	2	11	26	24	39						8	9	49	51	8	10	53
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q45 YES	46 16%	856 17%	5 10%	14 18%	14 16%	13 17%	27 18%	~	~	~	~	~	5 17%	9 11%	36 18%	42 15%	3 23%	24 11%*	22 28%
NO	246 84%	4125 83%	45 90%	63 82%	76 84%	62 83%	126 82%	~	~	~	~	~	24 83%	74 89%	166 82%	233 85%	10 77%	190 89%*	56 72%
NOT ANSWERED	25	328	6	4	5	10	2							1	2	2	1	25	
VALID CASES	292	4981	50	77	90	75	153						29	83	202	275	13	214	78
NUMBER OF RESPONDENTS	317 100%	5309 100%	56 100%	81 100%	95 100%	85 100%	155 100%						29 100%	84 100%	204 100%	277 100%	14 100%	239 100%	78 100%

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q46 NEVER	3 7%	59 7%		2 ~ 14%		1 ~ 8%	2 7%	~	~	~	~	~	20%	~	3 9%	2 5%	1 33%	1 4%	2 9%
SOMETIMES	6 13%	127 15%	1 20%	4 29%		1 ~ 8%	3 11%	~	~	~	~	~	20%	2 22%	4 11%	5 12%	1 33%	3 13%	3 14%
USUALLY	13 29%	239 29%		5 ~ 36%	3 21%	5 42%	8 30%	~	~	~	~	~	20%	3 33%	10 29%	13 32%		7 30%	6 27%
ALWAYS	23 51%	410 49%	4 80%	3 21%	11 79%	5 42%	14 52%	~	~	~	~	~	40%	4 44%	18 51%	21 51%	1 33%	12 52%	11 50%
#ALWAYS + USUALLY (NET)	36 80%	649 78%	4 80%	8 57%	14 100%	10 83%	22 81%	~	~	~	~	~	60%	7 78%	28 80%	34 83%	1 33%	19 83%	17 77%
TOP BOX SCORE	23 51%	410 49%	4 80%	3 21%	11 79%	5 42%	14 52%	~	~	~	~	~	40%	4 44%	18 51%	21 51%	1 33%	12 52%	11 50%
NOT ANSWERED	1	21				1									1	1		1	
VALID CASES	45	835	5	14	14	12	27						5	9	35	41	3	23	22
NUMBER OF RESPONDENTS	46	856	5	14	14	13	27						5	9	36	42	3	24	22
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS- IAN ##	NATV HAW/ ILND NATV ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q47 NONE	2 4%	48 6%	1 20%	1 7%	~	~	1 4%	~	~	~	~	1 20%	~	2 6%	2 5%	~	2 9%	~
1 SPECIALIST	29 64%	509 61%	2 40%	9 64%	7 50%	11 92%	18 67%	~	~	~	~	2 40%	6 67%	22 63%	28 68%	~	18 78%	11 50%
2	8 18%	170 20%	1 20%	2 14%	5 36%	~	5 19%	~	~	~	~	1 20%	2 22%	6 17%	6 15%	2 67%	3 13%	5 23%
3	1 2%	53 6%	~	~	~	1 8%	1 4%	~	~	~	~	~	~	1 3%	1 2%	~	~	1 5%
4	2 4%	27 3%	~	1 7%	1 7%	~	1 4%	~	~	~	~	~	1 11%	1 3%	1 2%	1 33%	~	2 9%
5 OR MORE SPECIALISTS	3 7%	25 3%	1 20%	1 7%	1 7%	~	1 4%	~	~	~	~	1 20%	~	3 9%	3 7%	~	~	3 14%
NOT ANSWERED	1	24				1								1	1		1	
VALID CASES	45	832	5	14	14	12	27					5	9	35	41	3	23	22
NUMBER OF RESPONDENTS	46	856	5	14	14	13	27					5	9	36	42	3	24	22
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q48 WORST SPECIALIST POSSIBLE	2 5%	7 0.9%	~	2 15%	~	~	1 4%	~	~	~	~	1 25%	~	2 6%	1 3%	1 33%	~	1 5%	1 5%
01		1 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02		5 0.6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03		7 0.9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
04		5 0.6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
05		20 3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
06	1 2%	24 3%	~	~	~	1 8%	1 4%	~	~	~	~	~	~	1 3%	1 3%	~	~	~	1 5%
07	4 9%	51 7%	~	3 23%	~	1 8%	2 8%	~	~	~	~	~	2 22%	2 6%	4 10%	~	~	3 14%	1 5%
08	5 12%	135 17%	~	2 15%	3 21%	~	2 8%	~	~	~	~	~	~	4 12%	4 10%	~	~	2 10%	3 14%
09	10 23%	171 22%	1 25%	2 15%	2 14%	5 42%	6 23%	~	~	~	~	1 25%	3 33%	7 21%	10 26%	~	~	6 29%	4 18%
BEST SPECIALIST POSSIBLE	21 49%	353 45%	3 75%	4 31%	9 64%	5 42%	14 54%	~	~	~	~	2 50%	4 44%	17 52%	19 49%	2 67%	~	9 43%	12 55%

Continued

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
#8-10 (NET)	36 84%	659 85%	4 100%	8 62%	14 100%	10 83%	22 85%	~	~	~	~	~	75%	7 78%	28 85%	33 85%	2 67%	17 81%	19 86%
9-10 (NET)	31 72%	524 67%	4 100%	6 46%	11 79%	10 83%	20 77%	~	~	~	~	~	75%	7 78%	24 73%	29 74%	2 67%	15 71%	16 73%
NOT ANSWERED		5																	
VALID CASES	43	779	4	13	14	12	26				4	9	33	39	3	21	22		
NUMBER OF RESPONDENTS	43	784	4	13	14	12	26				4	9	33	39	3	21	22		
	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%		
MEAN	8.70	8.73	9.75	7.31	9.43	9.00	8.85				7.25	9.00	8.64	8.87	6.67	8.62	8.77		
p_stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q49 YES	65 22%	1241 25%	10 21%	21 27%	16 18%	18 24%	31 20%	~	~	~	~	~	6 21%	19 23%	45 22%	61 22%	3 21%	42 20%	23 29%
NO	225 78%	3699 75%	38 79%	56 73%	74 82%	57 76%	122 80%	~	~	~	~	~	23 79%	63 77%	157 78%	212 78%	11 79%	170 80%	55 71%
NOT ANSWERED	27	369	8	4	5	10	2							2	2	4		27	
VALID CASES	290	4940	48	77	90	75	153						29	82	202	273	14	212	78
NUMBER OF RESPONDENTS	317 100%	5309 100%	56 100%	81 100%	95 100%	85 100%	155 100%						29 100%	84 100%	204 100%	277 100%	14 100%	239 100%	78 100%

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER			
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	NO CCC	CCC	
Q50 NEVER	2 3%	36 3%	~	~	~	11%~	1 3%~	~	~	~	~	17%~	~	2 5%~	2 3%~	1 3%~	1 4%	
SOMETIMES	13 21%	228 19%	4 44%~	6 30%~	3 ~	17%~	6 20%~	~	~	~	~	17%~	4 21%~	9 20%~	13 22%~	9 ~	4 17%	
USUALLY	20 32%	350 29%	3 33%~	6 30%~	9 56%~	11%~	8 27%~	~	~	~	~	17%~	7 37%~	13 30%~	18 30%~	2 67%~	4 17%	
ALWAYS	28 44%	598 49%	2 22%~	8 40%~	7 44%~	11%~	15 50%~	~	~	~	~	50%~	8 42%~	20 45%~	27 45%~	1 33%~	14 35%~	14 61%
#ALWAYS + USUALLY (NET)	48 76%	948 78%	5 56%~	14 70%~	16 100%~	13%~	23 77%~	~	~	~	~	67%~	15 79%~	33 75%~	45 75%~	3 100%~	30 75%~	18 78%
TOP BOX SCORE	28 44%	598 49%	2 22%~	8 40%~	7 44%~	11%~	15 50%~	~	~	~	~	50%~	8 42%~	20 45%~	27 45%~	1 33%~	14 35%~	14 61%
NOT ANSWERED	2	29	1	1			1						1	1		2		
VALID CASES	63	1212	9	20	16	18	30					6	19	44	60	3	40	23
NUMBER OF RESPONDENTS	65	1241	10	21	16	18	31					6	19	45	61	3	42	23
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q51 NEVER		17 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	6 10%	87 7%	3 33%	2 10%	1 ~	1 6%	2 7%	~	~	~	~	1 17%	2 11%	4 9%	6 10%	~	6 15%	
USUALLY	18 29%	274 23%	2 22%	6 30%	5 31%	5 28%	9 30%	~	~	~	~	2 33%	4 21%	14 32%	17 28%	1 33%	12 30%	6 26%
ALWAYS	39 62%	831 69%	4 44%	12 60%	11 69%	12 67%	19 63%	~	~	~	~	3 50%	13 68%	26 59%	37 62%	2 67%	22 55%	17 74%
#ALWAYS + USUALLY (NET)	57 90%	1105 91%	6 67%	18 90%	16 100%	17 94%	28 93%	~	~	~	~	5 83%	17 89%	40 91%	54 90%	3 100%	34 85%	23 100%
TOP BOX SCORE	39 62%	831 69%	4 44%	12 60%	11 69%	12 67%	19 63%	~	~	~	~	3 50%	13 68%	26 59%	37 62%	2 67%	22 55%	17 74%
NOT ANSWERED		2 32	1	1			1						1	1			2	
VALID CASES	63	1209	9	20	16	18	30					6	19	44	60	3	40	23
NUMBER OF RESPONDENTS	65 100%	1241 100%	10 100%	21 100%	16 100%	18 100%	31 100%					6 100%	19 100%	45 100%	61 100%	3 100%	42 100%	23 100%

[ASKED IF Q49 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q52 YES	125 44%	1806 37%*	22 45%~	40 53%	33 38%	30 39%	62 41%	~	~	~	~	~	13 ~ 45%~	40 48%	84 42%	120 44%~	5 38%~	92 44%	33 43%
NO	162 56%	3092 63%*	27 55%~	36 47%	53 62%	46 61%	89 59%	~	~	~	~	~	16 ~ 55%~	44 52%	115 58%	153 56%~	8 62%~	119 56%	43 57%
NOT ANSWERED	30	411	7	5	9	9	4								5	4	1	28	2
VALID CASES	287	4898	49	76	86	76	151						29	84	199	273	13	211	76
NUMBER OF RESPONDENTS	317 100%	5309 100%	56 100%	81 100%	95 100%	85 100%	155 100%						29 100%	84 100%	204 100%	277 100%	14 100%	239 100%	78 100%

FQ53 IN THE LAST 6 MONTHS, HOW OFTEN WERE THE FORMS FROM YOUR CHILD'S HEALTH PLAN EASY TO FILL OUT?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILLND ##	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
FQ53 NEVER	5 2%	83 2%	3 6%~	1 ~	1 1%	1 1%	2 1%	~	~	~	~	~	2 2%	3 2%	4 1%~	1 8%~	5 2%*	
SOMETIMES	21 7%	357 7%	2 4%~	6 8%	6 7%	7 9%	8 5%	~	~	~	~	3 10%~	9 11%	12 6%	20 7%~	1 8%~	15 7%	6 8%
USUALLY	47 16%	646 13%	7 14%~	17 23%	14 16%	9 12%	26 17%	~	~	~	~	5 17%~	14 17%	33 17%	46 17%~	1 8%~	37 18%	10 13%
ALWAYS	213 74%	3743 78%	37 76%~	52 69%	65 76%	59 78%	115 76%	~	~	~	~	21 72%~	58 70%	151 76%	202 74%~	10 77%~	153 73%	60 79%
#ALWAYS + USUALLY (NET)	260 91%	4389 91%	44 90%~	69 92%	79 92%	68 89%	141 93%	~	~	~	~	26 90%~	72 87%	184 92%	248 91%~	11 85%~	190 90%	70 92%
TOP BOX SCORE	213 74%	3743 78%	37 76%~	52 69%	65 76%	59 78%	115 76%	~	~	~	~	21 72%~	58 70%	151 76%	202 74%~	10 77%~	153 73%	60 79%
NOT ANSWERED	1	69	1										1		1		1	
VALID CASES	286	4829	49	75	86	76	151					29	83	199	272	13	210	76
NUMBER OF RESPONDENTS	287 100%	4898 100%	49 100%	76 100%	86 100%	76 100%	151 100%					29 100%	84 100%	199 100%	273 100%	13 100%	211 100%	76 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q54 WORST HEALTH PLAN POSSIBLE	1 0.3%	17 0.3%	~	1%	~	~	~	~	~	~	~	1 4%	~	1 ~0.5%	~	1 7%	~	1 1%	
01		14 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
02	1 0.3%	21 0.4%	1 2%	~	~	~	~	~	~	~	~	~	1 1%	~	1 ~0.4%	~	1 ~0.5%		
03	1 0.3%	35 0.7%	~	1%	~	~	1 ~0.6%	~	~	~	~	~	~	1 ~0.5%	1 0.4%	~	1 ~0.5%		
04	9 3%	62 1%	1 2%	1 1%	5 6%	2 3%	8 5%*	~	~	~	~	~	~	9 4%	8 3%	1 7%	5 2%	4 5%	
05	13 4%	266 5%	1 2%	4 5%	7 8%	1 1%*	8 5%	~	~	~	~	~	~	3 4%	9 4%	13 5%	~	10 5%	3 4%
06	18 6%	237 5%	4 8%	5 7%	5 6%	4 5%	10 6%	~	~	~	~	~	3 ~11%	4 5%	14 7%	17 6%	1 7%	16 8%	2 3%
07	33 11%	471 10%	6 12%	10 13%	9 10%	8 10%	19 12%	~	~	~	~	~	7 ~25%	3 4%*	30 15%*	31 11%	2 14%	21 10%	12 16%
08	51 18%	939 19%	8 16%	14 18%	10 11%*	19 25%	30 19%	~	~	~	~	~	4 ~14%	10 12%	40 20%	49 18%	2 14%	38 18%	13 17%
09	58 20%	844 17%	11 22%	16 21%	20 23%	11 14%	29 19%	~	~	~	~	~	6 ~21%	20 24%	38 19%	54 20%	3 21%	42 20%	16 21%
BEST HEALTH PLAN POSSIBLE	105 36%	1982 41%	17 35%	24 32%	32 36%	32 42%	49 32%	~	~	~	~	~	7 ~25%	43 51%*	60 30%*	101 37%	4 29%	79 37%	26 34%
#8-10 (NET)	214 74%	3765 77%	36 73%	54 71%	62 70%	62 81%	108 70%	~	~	~	~	~	17 ~61%	73 87%*	138 68%*	204 74%	9 64%	159 75%	55 71%

Continued

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER IND/ PAC ALSK	OTHR #	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	NO CCC	CCC	
9-10 (NET)	163 56%	2826 58%	28 57%	40 53%	52 59%	43 56%	78 51%*	~	~	~	~	~	13 46%	63 75%*	98 49%*	155 56%	7 50%	121 57%	42 55%
NOT ANSWERED		27	7	5	7	8	1					1		2	2		26	1	
VALID CASES	290	4888	49	76	88	77	154					28	84	202	275	14	213	77	
NUMBER OF RESPONDENTS	317 100%	5309 100%	56 100%	81 100%	95 100%	85 100%	155 100%					29 100%	84 100%	204 100%	277 100%	14 100%	239 100%	78 100%	
MEAN	8.36	8.47	8.37	8.20	8.27	8.62	8.18					7.96	8.95	8.12	8.40	7.64	8.40	8.25	
p stat_(*=Sig @ p<=.05)		.308	~.377	.589	.100	.059	~	~	~	~	~	~.000*	.000*	~	~	~.535			

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q55 YES	109 38%	1910 39%	17 35%	30 39%	33 38%	29 38%	64 42%	~	~	~	~	~	11 38%	26 32%	82 40%	100 36%	9 64%	56 27%*	53 68%
NO	180 62%	3030 61%	32 65%	46 61%	55 63%	47 62%	90 58%	~	~	~	~	~	18 62%	56 68%	121 60%	174 64%	5 36%	155 73%*	25 32%
NOT ANSWERED	28	369	7	5	7	9	1							2	1	3		28	
VALID CASES	289	4940	49	76	88	76	154						29	82	203	274	14	211	78
NUMBER OF RESPONDENTS	317 100%	5309 100%	56 100%	81 100%	95 100%	85 100%	155 100%						29 100%	84 100%	204 100%	277 100%	14 100%	239 100%	78 100%

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER			
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q56 NEVER	3 3%	42 2%	1 6%~	2 7%~	~	~	3 5%~	~	~	~	~	~	~	3 4%~	2 2%~	1 11%~	1 2%	2 4%
SOMETIMES	8 7%	156 8%	1 6%~	2 7%~	3 9%~	2 7%~	1 2%~	~	~	~	~	2 18%~	2 8%~	5 6%~	5 5%~	3 33%~	4 7%	4 8%
USUALLY	29 27%	483 26%	4 24%~	7 23%~	8 24%~	10 34%~	19 30%~	~	~	~	~	3 27%~	5 19%~	24 29%~	27 27%~	2 22%~	16 29%	13 25%
ALWAYS	69 63%	1206 64%	11 65%~	19 63%~	22 67%~	17 59%~	41 64%~	~	~	~	~	6 55%~	19 73%~	50 61%~	66 66%~	3 33%~	35 63%	34 64%
#ALWAYS + USUALLY (NET)	98 90%	1689 90%	15 88%~	26 87%~	30 91%~	27 93%~	60 94%~	~	~	~	~	9 82%~	24 92%~	74 90%~	93 93%~	5 56%~	51 91%	47 89%
TOP BOX SCORE	69 63%	1206 64%	11 65%~	19 63%~	22 67%~	17 59%~	41 64%~	~	~	~	~	6 55%~	19 73%~	50 61%~	66 66%~	3 33%~	35 63%	34 64%
NOT ANSWERED		23																
VALID CASES	109	1887	17	30	33	29	64					11	26	82	100	9	56	53
NUMBER OF RESPONDENTS	109 100%	1910 100%	17 100%	30 100%	33 100%	29 100%	64 100%					11 100%	26 100%	82 100%	100 100%	9 100%	56 100%	53 100%

[ASKED IF Q55 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND##	AMER IND/ALSK##	OTHR#	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q57 #YES	60 56%	1118 60%	9 56%~	17 59%~	19 58%~	15 52%~	34 53%~	~	~	~	~	~	8 ~ 80%~	14 56%~	46 57%~	56 57%~	4 44%~	30 55%	30 58%
NO	47 44%	755 40%	7 44%~	12 41%~	14 42%~	14 48%~	30 47%~	~	~	~	~	~	2 ~ 20%~	11 44%~	35 43%~	42 43%~	5 56%~	25 45%	22 42%
NOT ANSWERED	2	37	1	1									1	1	1	2		1	1
VALID CASES	107	1873	16	29	33	29	64						10	25	81	98	9	55	52
NUMBER OF RESPONDENTS	109	1910	17	30	33	29	64						11	26	82	100	9	56	53
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q57A YES	226 79%	3983 82%	21 43%	63 84%	78 89%*	64 85%	114 75%	~	~	~	~	~	24 83%	71 85%	154 77%	213 78%	12 86%	162 77%	64 83%
NO	61 21%	876 18%	28 57%	12 16%	10 11%*	11 15%	37 25%	~	~	~	~	~	5 17%	13 15%	46 23%	59 22%	2 14%	48 23%	13 17%
NOT ANSWERED	30	450	7	6	7	10	4								4	5		29	1
VALID CASES	287	4859	49	75	88	75	151						29	84	200	272	14	210	77
NUMBER OF RESPONDENTS	317	5309	56	81	95	85	155						29	84	204	277	14	239	78
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q57B YES	176 61%	2993 61%	13 27%	55 73%*	60 69%	48 63%	90 59%	~	~	~	~	~	19 66%	57 68%	118 59%	165 61%	11 79%	128 61%	48 63%
NO	111 39%	1901 39%	36 73%	20 27%*	27 31%	28 37%	62 41%	~	~	~	~	~	10 34%	27 32%	81 41%	107 39%	3 21%	83 39%	28 37%
NOT ANSWERED	30	415	7	6	8	9	3							5	5			28	2
VALID CASES	287	4894	49	75	87	76	152						29	84	199	272	14	211	76
NUMBER OF RESPONDENTS	317 100%	5309 100%	56 100%	81 100%	95 100%	85 100%	155 100%						29 100%	84 100%	204 100%	277 100%	14 100%	239 100%	78 100%

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q57C NEVER	4 2%	52 2%	1 8%	2 4%	~	1 2%	1 1%	~	~	~	~	~	1 5%	2 4%	2 2%	2 1%	2 20%	2 2%	2 4%
SOMETIMES	11 6%	168 6%	1 8%	2 4%	2 3%	6 13%	7 8%	~	~	~	~	~	1 5%	3 5%	8 7%	10 6%	1 10%	11 9%	
USUALLY	37 21%	532 18%	2 15%	11 20%	14 23%	10 22%	18 20%	~	~	~	~	~	3 16%	14 25%	23 19%	35 21%	2 20%	26 20%	11 23%
ALWAYS	122 70%	2201 75%	9 69%	40 73%	44 73%	29 63%	64 71%	~	~	~	~	~	14 74%	37 66%	85 72%	117 71%	5 50%	88 69%	34 72%
#ALWAYS + USUALLY (NET)	159 91%	2733 93%	11 85%	51 93%	58 97%*	39 85%	82 91%	~	~	~	~	~	17 89%	51 91%	108 92%	152 93%	7 70%	114 90%	45 96%
TOP BOX SCORE	122 70%	2201 75%	9 69%	40 73%	44 73%	29 63%	64 71%	~	~	~	~	~	14 74%	37 66%	85 72%	117 71%	5 50%	88 69%	34 72%
NOT ANSWERED		2				2								1		1	1	1	1
VALID CASES	174	2953	13	55	60	46	90						19	56	118	164	10	127	47
NUMBER OF RESPONDENTS	176 100%	2993 100%	13 100%	55 100%	60 100%	48 100%	90 100%						19 100%	57 100%	118 100%	165 100%	11 100%	128 100%	48 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q57D NEVER	43 33%	609 28%	10 50%~	9 30%~	14 29%~	10 29%~	19 31%	~	~	~	~	~	8 47%~	13 28%~	30 35%~	40 33%~	3 27%~	34 34%~	9 27%
SOMETIMES	22 17%	384 18%	3 15%~	8 27%~	5 10%~	6 18%~	8 13%	~	~	~	~	~	1 6%~	12 26%~	10 12%~	18 15%~	4 36%~	17 17%~	5 15%
USUALLY	36 27%	484 22%	2 10%~	9 30%~	12 25%~	13 38%~	16 26%	~	~	~	~	~	7 41%~	13 28%~	23 27%~	34 28%~	2 18%~	27 27%~	9 27%
ALWAYS	31 23%	716 33%*	5 25%~	4 13%~	17 35%~	5 15%~	18 30%	~	~	~	~	~	1 6%~	8 17%~	23 27%~	29 24%~	2 18%~	21 21%~	10 30%
#ALWAYS + USUALLY (NET)	67 51%	1200 55%	7 35%~	13 43%~	29 60%~	18 53%~	34 56%	~	~	~	~	~	8 47%~	21 46%~	46 53%~	63 52%~	4 36%~	48 48%~	19 58%
TOP BOX SCORE	31 23%	716 33%*	5 25%~	4 13%~	17 35%~	5 15%~	18 30%	~	~	~	~	~	1 6%~	8 17%~	23 27%~	29 24%~	2 18%~	21 21%~	10 30%
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	155	2639	27	45	41	42	93						12	34	117	151	3	111	44
NOT ANSWERED	30	477	9	6	6	9	1							4	1	5		29	1
VALID CASES	132	2193	20	30	48	34	61						17	46	86	121	11	99	33
NUMBER OF RESPONDENTS	317	5309	56	81	95	85	155						29	84	204	277	14	239	78
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q57E EXTREMELY DIFFICULT	9 3%	164 3%	3 6%~	3 4%	3 3%	~	5 3%	~	~	~	~	~	1 4%~	1 1%	8 4%	7 3%~	2 14%~	6 3%	3 4%
01	6 2%	92 2%	1 2%~	2 3%	1 1%	2 2%	5 3%	~	~	~	~	~	~	1 1%	5 3%	5 2%~	1 7%~	3 1%	3 4%
02	3 1%	75 1%	~	~	2 2%	1 1%	1 0.7%	~	~	~	~	~	~	2 3%	1 0.5%	2 0.8%~	1 7%~	2 0.9%	1 1%
03	8 3%	133 3%	1 2%~	1 1%	5 5%	1 1%	4 3%	~	~	~	~	~	~	3 4%	5 3%	7 3%~	1 7%~	5 2%	3 4%
04	9 3%	87 2%	2 4%~	1 1%	3 3%	3 4%	7 5%	~	~	~	~	~	~	1 1%	7 4%	9 4%~	~	6 3%	3 4%
05	26 9%	371 7%	4 8%~	5 7%	10 11%	7 9%	15 10%	~	~	~	~	~	3 11%~	5 6%	20 11%	23 9%~	3 21%~	22 10%	4 5%
06	14 5%	203 4%	2 4%~	5 7%	4 4%	3 4%	9 6%	~	~	~	~	~	1 4%~	3 4%	11 6%	14 6%~	~	9 4%	5 7%
07	25 9%	375 7%	3 6%~	9 13%	6 7%	7 9%	13 9%	~	~	~	~	~	4 15%~	7 9%	18 10%	25 10%~	~	16 7%	9 12%
09	94 32%	1657 33%	14 29%~	23 32%	26 28%	31 38%	34 24%*	~	~	~	~	~	7 26%~	22 28%	46 25%*	67 26%~	2 14%~	80 36%*	14 19%
EXTREMELY EASY	100 34%	1890 37%	18 38%~	23 32%	32 35%	27 33%	50 35%	~	~	~	~	~	11 41%~	34 43%	66 35%	95 37%~	4 29%~	72 33%	28 38%
#8-10 (NET)	194 66%	3547 70%	32 67%~	46 64%	58 63%	58 71%	84 59%*	~	~	~	~	~	18 67%~	56 71%	112 60%*	162 64%~	6 43%~	152 69%	42 58%
9-10 (NET)	194 66%	3547 70%	32 67%~	46 64%	58 63%	58 71%	84 59%*	~	~	~	~	~	18 67%~	56 71%	112 60%*	162 64%~	6 43%~	152 69%	42 58%

Continued

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- PAN- IC	HIS- PAN- IC	NOT VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
88		1																	
NOT ANSWERED	23	261	8	9	3	3	12						2	5	17	23		18	5
VALID CASES	294	5047	48	72	92	82	143						27	79	187	254	14	221	73
NUMBER OF RESPONDENTS	317	5309	56	81	95	85	155						29	84	204	277	14	239	78
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%
MEAN	7.85	8.02	7.73	7.83	7.63	8.17	7.50						8.22	8.20	7.57	7.85	5.64	7.97	7.47
p stat_(*=Sig @ p<=.05)		.241		~.961	.369	.161	.034*	~	~	~	~	~	~	~.154	.013*	~	~	~.203	

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND NATV ##	AMER IND/ ALSK ##	OTHR #	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q58 EXCELLENT	117 40%	2100 43%	26 52%	31 41%	36 40%	24 32%	59 38%	~	~	~	~	~	15 52%	33 40%	82 40%	117 42%	~	107 50%*	10 13%
VERY GOOD	115 40%	1734 35%	15 30%	32 42%	36 40%	32 42%	76 49%*	~	~	~	~	~	9 31%	21 25%*	94 46%*	115 42%	~	74 35%*	41 53%
GOOD	45 15%	854 17%	7 14%	11 14%	9 10%	18 24%*	14 9%*	~	~	~	~	~	3 10%	24 29%*	20 10%*	45 16%	~	28 13%	17 22%
FAIR	13 4%	210 4%	2 4%	1 1%*	8 9%*	2 3%	6 4%	~	~	~	~	~	2 7%	4 5%	8 4%	~	13 93%	5 2%*	8 10%
POOR	1 0.3%	17 0.3%	~	1 1%	~	~	~	~	~	~	~	~	~	1 1%	~	~	1 7%	~	1 1%
#EXCELLENT + VERY GOOD + GOOD (NET)	277 95%	4688 95%	48 96%	74 97%	81 91%	74 97%	149 96%	~	~	~	~	~	27 93%	78 94%	196 96%	277 100%	~	209 98%*	68 88%
NOT ANSWERED	26	394	6	5	6	9								1				25	1
VALID CASES	291	4915	50	76	89	76	155						29	83	204	277	14	214	77
NUMBER OF RESPONDENTS	317 100%	5309 100%	56 100%	81 100%	95 100%	85 100%	155 100%						29 100%	84 100%	204 100%	277 100%	14 100%	239 100%	78 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND NATV ##	AMER IND/ ALSK ##	OTHR #	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC	
Q59 EXCELLENT	128 44%	2151 44%	36 72%*	35 46%	36 40%	21 27%*	66 43%	~	~	~	~	~	14 48%~	39 46%	88 43%	125 45%~	3 21%~	119 56%*	9 12%
VERY GOOD	79 27%	1382 28%	10 20%	27 36%	26 29%	16 21%	42 27%	~	~	~	~	~	5 17%~	24 29%	54 26%	78 28%~	1 7%~	65 30%*	14 18%
GOOD	59 20%	930 19%	3 6%*	9 12%*	18 20%	29 38%*	35 23%	~	~	~	~	~	6 21%~	13 15%	44 22%	54 19%~	4 29%~	24 11%*	35 45%
FAIR	21 7%	366 7%	1 2%*	3 4%	8 9%	9 12%	11 7%	~	~	~	~	~	4 14%~	5 6%	16 8%	16 6%~	5 36%~	6 3%*	15 19%
POOR	5 2%	88 2%	~	2 3%	1 1%	2 3%	1 0.6%	~	~	~	~	~	~	3 4%	2 1%	4 1%~	1 7%~	~	5 6%
#EXCELLENT + VERY GOOD + GOOD (NET)	266 91%	4463 91%	49 98%*	71 93%	80 90%	66 86%	143 92%	~	~	~	~	~	25 86%~	76 90%	186 91%	257 93%~	8 57%~	208 97%*	58 74%
NOT ANSWERED	25	392	6	5	6	8												25	
VALID CASES	292	4917	50	76	89	77	155						29	84	204	277	14	214	78
NUMBER OF RESPONDENTS	317 100%	5309 100%	56 100%	81 100%	95 100%	85 100%	155 100%						29 100%	84 100%	204 100%	277 100%	14 100%	239 100%	78 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q60 YES	63 22%	1056 22%	5 10%*	13 17%	21 24%	24 32%*	40 26%	~	~	~	~	~	8 ~ 28%	10 12%*	52 25%*	59 21%~	4 29%~	13 6%*	50 64%
NO	227 78%	3853 78%	45 90%*	63 83%	68 76%	51 68%*	115 74%	~	~	~	~	~	21 ~ 72%	72 88%*	152 75%*	216 79%~	10 71%~	199 94%*	28 36%
NOT ANSWERED	27	400	6	5	6	10								2		2		27	
VALID CASES	290	4909	50	76	89	75	155						29	82	204	275	14	212	78
NUMBER OF RESPONDENTS	317	5309	56	81	95	85	155						29	84	204	277	14	239	78
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q61 YES	56 90%	843 81%*	4 80%~	10 77%~	21 100%~	21 91%~	34 87%~	~	~	~	~	7 88%~	10 100%~	45 88%~	52 90%~	4 100%~	8 62%~	48 98%
NO	6 10%	192 19%*	1 20%~	3 23%~	~	2 9%~	5 13%~	~	~	~	~	1 13%~	6 12%~	6 10%~	~	5 38%~	1 2%	
NOT ANSWERED	1	21				1	1						1	1			1	
VALID CASES	62	1035	5	13	21	23	39				8	10	51	58	4	13	49	
NUMBER OF RESPONDENTS	63	1056	5	13	21	24	40				8	10	52	59	4	13	50	
	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q60 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALS K ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q62 YES	47 84%	748 91%	2 50%~	6 60%~	18 86%~	21 100%~	28 82%~	~	~	~	~	~	7 ~100%~	7 70%~	39 87%~	43 83%~	4 100%~	47 ~ 98%	
NO	9 16%	77 9%	2 50%~	4 40%~	3 14%~	~	6 18%~	~	~	~	~	~	~	3 30%~	6 13%~	9 17%~	~	8 ~100%~	1 2%
NOT ANSWERED		18																	
VALID CASES	56	825	4	10	21	21	34						7	10	45	52	4	8	48
NUMBER OF RESPONDENTS	56 100%	843 100%	4 100%	10 100%	21 100%	21 100%	34 100%						7 100%	10 100%	45 100%	52 100%	4 100%	8 100%	48 100%

[ASKED IF Q60 = YES AND Q61 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND PAC ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q63 YES	45 16%	832 17%	2 4%*	9 12%	14 16%	20 26%*	23 15%	~	~	~	~	~	9 31%~	8 10%	36 18%	37 13%~	8 57%~	3 1%*	42 54%
NO	245 84%	4059 83%	48 96%*	66 88%	75 84%	56 74%*	131 85%	~	~	~	~	~	20 69%~	75 90%	167 82%	238 87%~	6 43%~	209 99%*	36 46%
NOT ANSWERED	27	418	6	6	6	9	1							1	1	2		27	
VALID CASES	290	4891	50	75	89	76	154						29	83	203	275	14	212	78
NUMBER OF RESPONDENTS	317	5309	56	81	95	85	155						29	84	204	277	14	239	78
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q64 YES	42 93%	689 85%	2 100%	9 100%	14 100%	17 85%	22 96%	~	~	~	~	~	8 89%	7 88%	34 94%	35 95%	7 88%	1 33%	41 98%
NO	3 7%	123 15%	~	~	~	3 15%	1 4%	~	~	~	~	1 11%	1 13%	2 6%	2 5%	1 13%	2 67%	1 2%	
NOT ANSWERED		20																	
VALID CASES	45	812	2	9	14	20	23					9	8	36	37	8	3	42	
NUMBER OF RESPONDENTS	45	832	2	9	14	20	23					9	8	36	37	8	3	42	
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q63 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND NATV ##	AMER IND/ ALSK ##	OTHR #	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q65 YES	41 98%	662 97%	2 100%	9 100%	13 93%	17 100%	21 95%	~	~	~	~	~	8 100%	7 100%	33 97%	35 100%	6 86%	41 100%	
NO	1 2%	19 3%	~	~	1 7%	~	1 5%	~	~	~	~	~	~	~	1 3%	~	1 14%	1 100%	~
NOT ANSWERED		8																	
VALID CASES	42	681	2	9	14	17	22						8	7	34	35	7	1	41
NUMBER OF RESPONDENTS	42	689	2	9	14	17	22						8	7	34	35	7	1	41
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q66 YES	36 12%	644 13%	1 2%*	7 9%	12 14%	16 21%*	19 12%	~	~	~	~	~	6 21%~	7 8%	29 14%	31 11%~	4 29%~	5 2%*	31 40%
NO	254 88%	4243 87%	49 98%*	69 91%	76 86%	60 79%*	135 88%	~	~	~	~	~	23 79%~	76 92%	174 86%	244 89%~	10 71%~	207 98%*	47 60%
NOT ANSWERED	27	422	6	5	7	9	1							1	1	2		27	
VALID CASES	290	4887	50	76	88	76	154						29	83	203	275	14	212	78
NUMBER OF RESPONDENTS	317	5309	56	81	95	85	155						29	84	204	277	14	239	78
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q67 YES	32 89%	508 81%	6 ~	11 86%	15 92%	17 94%	17 89%	~	~	~	~	6 ~100%	5 71%	27 93%	27 87%	4 100%	1 20%	31 100%
NO	4 11%	121 19%	1 100%	1 14%	1 8%	1 6%	2 11%	~	~	~	~	~	2 29%	2 7%	4 13%	~	4 80%	
NOT ANSWERED		15																
VALID CASES	36	629	1	7	12	16	19					6	7	29	31	4	5	31
NUMBER OF RESPONDENTS	36 100%	644 100%	1 100%	7 100%	12 100%	16 100%	19 100%					6 100%	7 100%	29 100%	31 100%	4 100%	5 100%	31 100%

[ASKED IF Q66 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALS K ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q68 YES	29 94%	477 96%	~	5 83%	9 90%	15 100%	15 94%	~	~	~	~	~	6 100%	5 100%	24 92%	24 92%	4 100%	1 100%	29 97%	
NO	2 6%	22 4%	~	1 17%	1 10%	~	1 6%	~	~	~	~	~	~	~	2 8%	2 8%	~	1 100%	1 3%	
NOT ANSWERED	1	9			1		1							1	1				1	
VALID CASES	31	499		6	10	15	16						6	5	26	26	4		1	30
NUMBER OF RESPONDENTS	32	508		6	11	15	17						6	5	27	27	4		1	31
	100%	100%		100%	100%	100%	100%						100%	100%	100%	100%	100%		100%	100%

[ASKED IF Q66 = YES AND Q67 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q69 YES	28 10%	558 11%	2 4%*	8 11%	10 11%	8 11%	16 10%	~	~	~	~	~	5 ~ 17%	5 6%	23 11%	23 8%~	5 36%~	8 4%*	20 26%
NO	262 90%	4342 89%	48 96%*	67 89%	79 89%	68 89%	138 90%	~	~	~	~	~	24 ~ 83%	78 94%	180 89%	252 92%~	9 64%~	204 96%*	58 74%
NOT ANSWERED	27	409	6	6	6	9	1							1	1	2		27	
VALID CASES	290	4900	50	75	89	76	154						29	83	203	275	14	212	78
NUMBER OF RESPONDENTS	317 100%	5309 100%	56 100%	81 100%	95 100%	85 100%	155 100%						29 100%	84 100%	204 100%	277 100%	14 100%	239 100%	78 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q70 YES	20 71%	389 72%	1 50%	4 50%	8 80%	7 88%	9 56%	~	~	~	~	5 ~100%	4 80%	16 70%	15 65%	5 100%	20 ~100%	
NO	8 29%	149 28%	1 50%	4 50%	2 20%	1 13%	7 44%	~	~	~	~	~	1 20%	7 30%	8 35%	~	8 ~100%	
NOT ANSWERED		20																
VALID CASES	28	538	2	8	10	8	16				5	5	23	23	5	8	20	
NUMBER OF RESPONDENTS	28	558	2	8	10	8	16				5	5	23	23	5	8	20	
	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q69 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q71 YES	20 100%	357 93%	1 100%	4 100%	8 100%	7 100%	9 100%	~	~	~	~	~	5 ~100%	4 100%	16 100%	15 100%	5 100%	20 ~100%	
NO		27 7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		5																	
VALID CASES	20	384	1	4	8	7	9						5	4	16	15	5	20	
NUMBER OF RESPONDENTS	20 100%	389 100%	1 100%	4 100%	8 100%	7 100%	9 100%						5 100%	4 100%	16 100%	15 100%	5 100%	20 100%	

[ASKED IF Q69 = YES AND Q70 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND PAC ##	AMER ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
Q72 YES	44 15%	813 17%		8 ~ 11%	16 18%	20 26%*	23 15%	~	~	~	~	~	6 ~ 21%	10 12%	34 17%	39 14%	4 29%	~	3 1%*	41 53%
NO	245 85%	4085 83%	50 100%	67 ~ 89%	72 82%	56 74%*	131 85%	~	~	~	~	~	22 ~ 79%	73 88%	168 83%	235 86%	10 71%	~	209 99%*	36 47%
NOT ANSWERED	28	411	6	6	7	9	1						1	1	2	3			27	1
VALID CASES	289	4898	50	75	88	76	154						28	83	202	274	14		212	77
NUMBER OF RESPONDENTS	317	5309	56	81	95	85	155						29	84	204	277	14		239	78
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%		100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q73 YES	41 93%	726 92%	8 ~100%	15 ~94%	18 ~90%	22 96%	~	~	~	~	~	5 ~83%	9 90%	32 94%	36 92%	4 100%	41 ~100%	
NO	3 7%	64 8%	~	~	1 6%	2 10%	1 4%	~	~	~	~	1 ~17%	1 10%	2 6%	3 8%	~100%	3	
NOT ANSWERED		23																
VALID CASES	44	790	8	16	20	23						6	10	34	39	4	3	41
NUMBER OF RESPONDENTS	44	813	8	16	20	23						6	10	34	39	4	3	41
	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q72 = YES]

NQ74 WHAT IS YOUR CHILD'S AGE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC LLND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NQ74																		
3 YEARS OLD OR LESS	56 18%	908 17%	56 100%~	~	~	~	24 15%	~	~	~	~	7 ~ 24%	16 19%	33 16%	48 17%~	2 14%~	53 22%*	3 4%
4 TO 7 YEARS OLD	81 26%	1228 23%	~100%~	81 ~	~	~	41 26%	~	~	~	~	7 ~ 24%	23 27%	53 26%	74 27%~	2 14%~	67 28%	14 18%
8 TO 12 YEARS OLD	95 30%	1650 31%	~	~100%~	95 ~	~	51 33%	~	~	~	~	7 ~ 24%	21 25%	67 33%	81 29%~	8 57%~	65 27%	30 38%
13 OR OLDER	85 27%	1523 29%	~	~	~100%~	85 ~	39 25%	~	~	~	~	8 ~ 28%	24 29%	51 25%	74 27%~	2 14%~	54 23%*	31 40%
VALID CASES	317	5309	56	81	95	85	155					29	84	204	277	14	239	78
NUMBER OF RESPONDENTS	317 100%	5309 100%	56 100%	81 100%	95 100%	85 100%	155 100%					29 100%	84 100%	204 100%	277 100%	14 100%	239 100%	78 100%

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

NQ75 IS YOUR CHILD MALE OR FEMALE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NQ75																				
MALE	162 51%	2736 52%	25 45%	41 51%	50 53%	46 54%	77 50%	~	~	~	~	~	12 ~ 41%	49 58%	97 48%	138 50%	9 64%	113 47%*	49 63%	
FEMALE	155 49%	2573 48%	31 55%	40 49%	45 47%	39 46%	78 50%	~	~	~	~	~	17 ~ 59%	35 42%	107 52%	139 50%	5 36%	126 53%*	29 37%	
VALID CASES	317	5309	56	81	95	85	155						29	84	204	277	14	239	78	
NUMBER OF RESPONDENTS	317 100%	5309 100%	56 100%	81 100%	95 100%	85 100%	155 100%							29 100%	84 100%	204 100%	277 100%	14 100%	239 100%	78 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q76 HISPANIC OR LATINO	84 29%	1726 35%*	16 33%~	23 30%	21 24%	24 32%	~	~	~	~	~	~	~	84 ~100%~	78 ~28%~	5 38%~	70 33%*	14 18%	
NOT HISPANIC OR LATINO	204 71%	3146 65%*	33 67%~	53 70%	67 76%	51 68%	155 100%~	~	~	~	~	~	29 ~100%~	204 ~100%~	196 72%~	8 62%~	141 67%*	63 82%	
NOT ANSWERED	29	437	7	5	7	10									3	1	28	1	
VALID CASES	288	4872	49	76	88	75	155						29	84	204	274	13	211	77
NUMBER OF RESPONDENTS	317	5309	56	81	95	85	155						29	84	204	277	14	239	78
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q77.1 YES	217 68%	3787 71%	38 68%	58 72%	66 69%	55 65%	155 100%~	~	~	~	~	~	26 ~ 90%~	36 43%*	181 89%*	207 75%~	9 64%~	154 64%*	63 81%
NO	100 32%	1522 29%	18 32%	23 28%	29 31%	30 35%	~	~	~	~	~	~ 10%~	3 57%*	48 11%*	23 25%~	70 36%~	5 36%*	85 19%	15
VALID CASES	317	5309	56	81	95	85	155						29	84	204	277	14	239	78
NUMBER OF RESPONDENTS	317 100%	5309 100%	56 100%	81 100%	95 100%	85 100%	155 100%						29 100%	84 100%	204 100%	277 100%	14 100%	239 100%	78 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q77.2 YES	10 3%	204 4%	1 2%	~	4 4%	5 6%	~	~	~	~	~	~ 14%	2 2%	8 4%	10 4%	~	7 3%	3 4%	
NO	307 97%	5105 96%	55 98%	81 100%	91 ~	80 94%	155 100%	~	~	~	~	~ 86%	25 98%	82 96%	196 96%	267 96%	14 100%	232 97%	75 96%
VALID CASES	317	5309	56	81	95	85	155					29	84	204	277	14	239	78	
NUMBER OF RESPONDENTS	317 100%	5309 100%	56 100%	81 100%	95 100%	85 100%	155 100%					29 100%	84 100%	204 100%	277 100%	14 100%	239 100%	78 100%	

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.3 YES	12 4%	184 3%	5 9%	3 4%	3 3%	1 1%	~	~	~	~	~	~	7 ~ 24%	12 ~ 6%	12 4%	10 4%	2 3%		
NO	305 96%	5125 97%	51 91%	78 96%	92 97%	84 99%	155 100%	~	~	~	~	~	22 ~ 76%	84 100%	192 94%*	265 96%	14 100%	229 96%	76 97%
VALID CASES	317	5309	56	81	95	85	155						29	84	204	277	14	239	78
NUMBER OF RESPONDENTS	317 100%	5309 100%	56 100%	81 100%	95 100%	85 100%	155 100%						29 100%	84 100%	204 100%	277 100%	14 100%	239 100%	78 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE ##	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.4 YES	6 2%	83 2%	2 4%	3 4%	~	1 1%	~	~	~	~	~	~	4 ~ 14%	1 1%	5 2%	5 2%	1 7%	3 1%	3 4%
NO	311 98%	5226 98%	54 96%	78 96%	95 100%	84 99%	155 100%	~	~	~	~	~	25 ~ 86%	83 99%	199 98%	272 98%	13 93%	236 99%	75 96%
VALID CASES	317	5309	56	81	95	85	155						29	84	204	277	14	239	78
NUMBER OF RESPONDENTS	317 100%	5309 100%	56 100%	81 100%	95 100%	85 100%	155 100%						29 100%	84 100%	204 100%	277 100%	14 100%	239 100%	78 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.5 YES	24 8%	335 6%	2 4%	6 7%	8 8%	8 9%	~	~	~	~	~	13 ~ 45%	7 8%	17 8%	21 8%	3 21%	13 5%*	11 14%
NO	293 92%	4974 94%	54 96%	75 93%	87 92%	77 91%	155 100%~	~	~	~	~	16 ~ 55%	77 92%	187 92%	256 92%~	11 79%~	226 95%*	67 86%
VALID CASES	317	5309	56	81	95	85	155					29	84	204	277	14	239	78
NUMBER OF RESPONDENTS	317 100%	5309 100%	56 100%	81 100%	95 100%	85 100%	155 100%					29 100%	84 100%	204 100%	277 100%	14 100%	239 100%	78 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE ##	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.6 YES	26 8%	374 7%	3 5%	9 11%	7 7%	7 8%	~	~	~	~	~	~	6 ~ 21%	20 24%*	6 3%*	24 9%~	1 7%~	18 8%	8 10%
NO	291 92%	4935 93%	53 95%	72 89%	88 93%	78 92%	155 100%~	~	~	~	~	~	23 ~ 79%	64 76%*	198 97%*	253 91%~	13 93%~	221 92%	70 90%
VALID CASES	317	5309	56	81	95	85	155						29	84	204	277	14	239	78
NUMBER OF RESPONDENTS	317 100%	5309 100%	56 100%	81 100%	95 100%	85 100%	155 100%						29 100%	84 100%	204 100%	277 100%	14 100%	239 100%	78 100%

Q78 WHAT IS YOUR AGE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND NATV ##	AMER IND/ ALSK #	OTHR #	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q78 UNDER 18	6 2%	141 3%	1 2%~	1 1%	1 1%	3 4%	2 1%	~	~	~	~	~	1 3%	3 4%	3 1%	6 2%~	~	6 3%~	
18 TO 24	6 2%	161 3%	6 12%~	~	~	~	4 3%	~	~	~	~	~	~	1 1%	5 2%	6 2%~	~	6 3%~	
25 TO 34	125 44%	1564 32%*	31 63%~	51 69%*	32 37%	11 14%*	72 46%	~	~	~	~	~	10 ~34%~	37 45%	88 44%	118 44%~	7 50%~	98 47%	27 35%
35 TO 44	98 34%	1821 37%	10 20%~	19 26%	39 45%*	30 39%	48 31%	~	~	~	~	~	10 ~34%~	32 39%	64 32%	92 34%~	6 43%~	66 32%	32 42%
45 TO 54	33 12%	797 16%*	1 2%~	2 3%*	11 13%	19 25%*	18 12%	~	~	~	~	~	7 ~24%~	5 6%*	28 14%*	32 12%~	1 7%~	24 11%	9 12%
55 TO 64	10 3%	266 5%	~	~	2 2%	8 11%*	6 4%	~	~	~	~	~	~	4 5%	6 3%	9 3%~	~	5 2%	5 6%
65 TO 74	8 3%	116 2%	~	1 1%	2 2%	5 7%	5 3%	~	~	~	~	~	1 ~3%~	1 1%	7 3%	8 3%~	~	4 2%	4 5%
75 OR OLDER		16 0.3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	31	427	7	7	8	9								1	3	6		30	1
VALID CASES	286	4882	49	74	87	76	155						29	83	201	271	14	209	77
NUMBER OF RESPONDENTS	317	5309	56	81	95	85	155						29	84	204	277	14	239	78
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

Q79 ARE YOU MALE OR FEMALE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q79 MALE	37 13%	702 14%	5 10%	7 9%	14 16%	11 14%	16 10%	~	~	~	~	~	5 ~ 18%	12 15%	25 12%	35 13%	2 14%	29 14%	8 10%
FEMALE	251 87%	4191 86%	45 90%	68 91%	73 84%	65 86%	139 90%	~	~	~	~	~	23 ~ 82%	70 85%	177 88%	238 87%	12 86%	182 86%	69 90%
NOT ANSWERED	29	416	6	6	8	9							1	2	2	4		28	1
VALID CASES	288	4893	50	75	87	76	155						28	82	202	273	14	211	77
NUMBER OF RESPONDENTS	317 100%	5309 100%	56 100%	81 100%	95 100%	85 100%	155 100%						29 100%	84 100%	204 100%	277 100%	14 100%	239 100%	78 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q80																		
8TH GRADE OR LESS	19 7%	479 10%*	5 10%~	3 4%	4 5%	7 9%	1 0.7%*	~	~	~	~	~	18 21%*	1 0.5%*	17 6%~	2 14%~	16 8%	3 4%
SOME HIGH SCHOOL BUT DID NOT GRADUATE	29 10%	480 10%	6 12%~	4 5%	9 10%	10 13%	14 9%	~	~	~	~	~	15 18%*	14 7%*	28 10%~	1 7%~	25 12%*	4 5%
HIGH SCHOOL GRADUATE OR GED	93 32%	1452 30%	14 29%~	24 33%	36 41%*	19 25%	48 31%	~	~	~	~	8 28%~	31 37%	61 31%	87 32%~	6 43%~	69 33%	24 31%
SOME COLLEGE OR 2-YEAR DEGREE	104 36%	1752 36%	13 27%~	32 44%	26 30%	33 43%	65 42%*	~	~	~	~	13 45%~	16 19%*	87 44%*	99 36%~	4 29%~	69 33%	35 45%
4-YEAR COLLEGE GRADUATE	28 10%	437 9%	7 14%~	7 10%	10 11%	4 5%	17 11%	~	~	~	~	7 24%~	3 4%*	25 13%*	27 10%~	1 7%~	22 10%	6 8%
MORE THAN 4-YEAR COLLEGE DEGREE	14 5%	238 5%	4 8%~	3 4%	3 3%	4 5%	8 5%	~	~	~	~	1 3%~	1 1%*	12 6%	14 5%~	~	9 4%	5 6%
NOT ANSWERED	30	471	7	8	7	8	2							4	5		29	1
VALID CASES	287	4838	49	73	88	77	153					29	84	200	272	14	210	77
NUMBER OF RESPONDENTS	317 100%	5309 100%	56 100%	81 100%	95 100%	85 100%	155 100%					29 100%	84 100%	204 100%	277 100%	14 100%	239 100%	78 100%

Q81 HOW ARE YOU RELATED TO THE CHILD?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER	AS-IAN	NATV HAW/ILND	AMER PAC ALSK	OTHR	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q81 MOTHER OR FATHER	269 95%	4466 93%	49 100%	72 97%	83 95%	65 88%*	139 92%*	~	~	~	~	~	27 96%	81 99%*	184 93%*	256 95%	13 93%	202 97%	67 89%
GRANDPARENT	9 3%	186 4%	~	1 1%	2 2%	6 8%*	7 5%	~	~	~	~	~	~	1 1%	8 4%	8 3%	~	5 2%	4 5%
AUNT OR UNCLE	2 0.7%	33 0.7%	~	~	1 1%	1 1%	1 0.7%	~	~	~	~	~	1 4%	~	2 1%	2 0.7%	~	~	2 3%
OLDER BROTHER OR SISTER	1 0.4%	12 0.2%	~	~	~	1 1%	1 0.7%	~	~	~	~	~	~	~	1 0.5%	~	1 7%	1 0.5%	~
OTHER RELATIVE		6 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
LEGAL GUARDIAN	3 1%	73 2%	~	1 1%	1 1%	1 1%	3 2%	~	~	~	~	~	~	~	3 2%	3 1%	~	1 0.5%	2 3%
SOMEONE ELSE		33 0.7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	33	500	7	7	8	11	4						1	2	6	8		30	3
VALID CASES	284	4809	49	74	87	74	151						28	82	198	269	14	209	75
NUMBER OF RESPONDENTS	317	5309	56	81	95	85	155						29	84	204	277	14	239	78
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE ##	BLCK OR AFR- AMER IAN ##	AS- IAN ##	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q82 YES	2 1%	101 3%	~	~	~	4%	1 1%	~	~	~	~	~	~	1 2%	1 0.8%	2 1%	~	~	2 4%
NO	166 99%	2894 97%	26 100%	42 100%	52 100%	46 96%	98 99%	~	~	~	~	~	13 ~100%	44 98%	119 99%	161 99%	4 100%	122 100%	44 96%
NOT ANSWERED	3	59	1	1		1	2							1	2	3			3
VALID CASES	168	2995	26	42	52	48	99						13	45	120	163	4	122	46
NUMBER OF RESPONDENTS	171	3054	27	43	52	49	101						13	46	122	166	4	125	46
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

NQ14 RATING OF ALL CHILD'S HEALTH CARE

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER	AS-IAN	NATV ILND	AMER PAC ALSK	OTHR	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC	
NQ14 0-6	13 7%	286 8%	3 8%	3 5%	4 7%	3 6%	6 6%	~	~	~	~	~	1 6%	3 6%	8 6%	8 4%	3 33%	8 6%	5 9%
7-8	58 29%	994 29%	13 33%	18 32%	12 22%	15 32%	29 27%	~	~	~	~	~	7 39%	13 27%	41 30%	52 29%	2 22%	44 31%	14 25%
9-10	126 64%	2180 63%	24 60%	35 63%	38 70%	29 62%	71 67%	~	~	~	~	~	10 56%	33 67%	89 64%	119 66%	4 44%	89 63%	37 66%
VALID CASES	197	3460	40	56	54	47	106						18	49	138	179	9	141	56
NUMBER OF RESPONDENTS	197 100%	3460 100%	40 100%	56 100%	54 100%	47 100%	106 100%						18 100%	49 100%	138 100%	179 100%	9 100%	141 100%	56 100%
MEAN	2.57	2.55	2.53	2.57	2.63	2.55	2.61						2.50	2.61	2.59	2.62	2.11	2.57	2.57
p stat_(*=Sig @ p<=.05)		.556	~	.975	.434		~.333	~	~	~	~	~	~	~.654	~	~	~.975		

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
NQ41 0-6	12 5%	266 6%	~	3 4%	7 9%	2 3%	8 6%	~	~	~	~	~	1 4%	2 3%	9 5%	9 4%	3 25%	9 5%	3 4%
7-8	42 16%	933 22%*	16%~	7 23%	16 13%	10 13%	9 17%	~	~	~	~	~	5 20%	10 14%	30 17%	41 17%~	~	32 17%	10 14%
9-10	207 79%	3047 72%*	38 84%~	51 73%	62 78%	56 84%	106 77%	~	~	~	~	~	19 76%~	60 83%	140 78%	193 79%~	9 75%~	149 78%	58 82%
VALID CASES	261	4246	45	70	79	67	138						25	72	179	243	12	190	71
NUMBER OF RESPONDENTS	261 100%	4246 100%	45 100%	70 100%	79 100%	67 100%	138 100%						25 100%	72 100%	179 100%	243 100%	12 100%	190 100%	71 100%
MEAN	2.75	2.65	2.84	2.69	2.70	2.81	2.71						2.72	2.81	2.73	2.76	2.50	2.74	2.77
p stat_(*=Sig @ p<=.05)		.004*	~.259	.358	.293	.234	~	~	~	~	~	~	~.237	.478	~	~	~.610		

[ASKED IF Q30 = YES]

NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR #	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
NQ48 0-6	37%	699%	~	15%~	~	8%~	28%~	~	~	~	~	25%~	~	9%~	5%~	33%~	5%~	9%
7-8	921%	18624%	~	38%~	21%~	8%~	15%~	~	~	~	~	22%~	18%~	21%~	~	24%~	18%	
9-10	3172%	52467%~	46%~	100%~	646%~	1179%~	1083%~	2077%~	~	~	~	75%~	78%~	73%~	74%~	67%~	71%~	73%
VALID CASES	43	779	4	13	14	12	26					4	9	33	39	3	21	22
NUMBER OF RESPONDENTS	43	779	4	13	14	12	26					4	9	33	39	3	21	22
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%
MEAN	2.65	2.58	3.00	2.31	2.79	2.75	2.69					2.50	2.78	2.64	2.69	2.33	2.67	2.64
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

NQ54 RATING OF CHILD'S HEALTH PLAN

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
NQ54																			
0-6	43 15%	652 13%	7 14%	12 16%	17 19%	7 9%	27 18%	~	~	~	~	~	4 14%	8 10%	34 17%	40 15%	3 21%	33 15%	10 13%
7-8	84 29%	1410 29%	14 29%	24 32%	19 22%	27 35%	49 32%	~	~	~	~	~	11 39%	13 15%*	70 35%*	80 29%	4 29%	59 28%	25 32%
9-10	163 56%	2826 58%	28 57%	40 53%	52 59%	43 56%	78 51%*	~	~	~	~	~	13 46%	63 75%*	98 49%*	155 56%	7 50%	121 57%	42 55%
VALID CASES	290	4888	49	76	88	77	154						28	84	202	275	14	213	77
NUMBER OF RESPONDENTS	290 100%	4888 100%	49 100%	76 100%	88 100%	77 100%	154 100%						28 100%	84 100%	202 100%	275 100%	14 100%	213 100%	77 100%
MEAN	2.41	2.44	2.43	2.37	2.40	2.47	2.33						2.32	2.65	2.32	2.42	2.29	2.41	2.42
p stat_(*=Sig @ p<=.05)		.448	~.536	.815	.426	.041*	~	~	~	~	~	~	~.000*	.000*	~	~	~.980		

GETTING NEEDED CARE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT#	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC LLND ##	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NPRBSEE4 NQ46	2.31	2.27	2.60	1.79	2.79	2.25	2.33						2.00	2.22	2.31	2.34	1.67	2.35	2.27
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCARNES4 NQ15	2.46	2.49	2.42	2.43	2.56	2.40	2.55						2.33	2.39	2.51	2.51	1.78	2.48	2.41
p stat_(*=Sig @ p<=.05)	.445		~.716	.196			~.051	~	~	~	~	~	~	~.133		~		~.553	
COMPOSITE	2.38	2.38	2.51	2.11	2.67	2.33	2.44	x	x	x	x	x	2.17	2.30	2.41	2.42	1.72	2.41	2.34
p stat_(*=Sig @ p<=.05)	.906		~0.000*	.000*			~.045*	~	~	~	~	~	~	~.125	.164	~		~.184	

GETTING CARE QUICKLY

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	ILND NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NCARSN4 NQ4	2.53	2.65	2.42	2.38	2.63	2.67	2.62						2.33	2.24	2.58	2.53	2.13	2.46	2.68
p stat_(*=Sig @ p<=.05)	.093		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NAPGET4 NQ6	2.34	2.46	2.22	2.24	2.53	2.38	2.46						2.35	2.18	2.44	2.38	2.20	2.29	2.48
p stat_(*=Sig @ p<=.05)	.021*		~.237		~		~.032*	~	~	~	~	~	~	~.025*		~		~.088	
COMPOSITE	2.44	2.56	2.32	2.31	2.58	2.52	2.54	x	x	x	x	x	2.34	2.21	2.51	2.45	2.16	2.37	2.58
p stat_(*=Sig @ p<=.05)	.000*		~.040*	.004*	.147		.002*	~	~	~	~	~	~.001*	.005*		~		~.002*	

HOW WELL DOCTORS COMMUNICATE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
NDREXPL4 NQ32	2.80	2.75	2.74	2.78	2.86	2.82	2.82						2.67	2.80	2.80	2.82	2.50	2.80	2.81
p stat_(*=Sig @ p<=.05)	.201		~.679		~		~.717	~	~	~	~	~	~	~.992	.861	~	~	~.911	
NDRLSTN4 NQ33	2.81	2.77	2.77	2.80	2.84	2.82	2.84						2.67	2.82	2.81	2.84	2.40	2.79	2.84
p stat_(*=Sig @ p<=.05)	.247		~.853		~		~.411	~	~	~	~	~	~	~.814	.946	~	~	~.506	
NDRESPU4 NQ34	2.85	2.81	2.86	2.89	2.84	2.82	2.88						2.78	2.84	2.87	2.88	2.50	2.85	2.86
p stat_(*=Sig @ p<=.05)	.083		~.355		~		~.329	~	~	~	~	~	~	~.799	.555	~	~	~.860	
NDRTMEN4 NQ37	2.63	2.57	2.66	2.54	2.68	2.68	2.78						2.61	2.42	2.75	2.66	2.50	2.59	2.72
p stat_(*=Sig @ p<=.05)	.185		~.191		~		~.001*	~	~	~	~	~	~	~.017*	.002*	~	~	~.170	
COMPOSITE	2.78	2.72	2.76	2.75	2.81	2.79	2.83	x	x	x	x	x	2.68	2.72	2.81	2.80	2.47	2.76	2.81
p stat_(*=Sig @ p<=.05)	.074		~.606		~		~.053	~	~	~	~	~	~	~.262	.140	~	~	~.413	

CUSTOMER SERVICE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NPBCLCS4 NQ50	2.21	2.28	1.78	2.10	2.44	2.33	2.27						2.17	2.21	2.20	2.20	2.33	2.10	2.39
p stat_(*=Sig @ p<=.05)	.486		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ51	2.52	2.60	2.11	2.50	2.69	2.61	2.57						2.33	2.58	2.50	2.52	2.67	2.40	2.74
p stat_(*=Sig @ p<=.05)	.347		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.37	2.44	1.94	2.30	2.56	2.47	2.42	x	x	x	x	x	2.25	2.39	2.35	2.36	2.50	2.25	2.57
p stat_(*=Sig @ p<=.05)	.365		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NNRXWHY NQ11	2.77	2.87	2.60	2.67	2.71	3.00	2.95					3.00	2.43	2.87	2.75	3.00	2.63	2.93	
p stat_(*=Sig @ p<=.05)	.193		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NNRXWYNT NQ12	2.48	2.42	2.40	2.17	2.55	2.67	2.62					2.33	2.14	2.57	2.51	2.00	2.31	2.67	
p stat_(*=Sig @ p<=.05)	.555		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NRXBST NQ13	2.54	2.58	2.78	2.33	2.64	2.44	2.78					2.00	1.86	2.74	2.54	2.50	2.48	2.60	
p stat_(*=Sig @ p<=.05)	.730		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.60	2.62	2.59	2.39	2.63	2.70	2.78	x	x	x	x	x	2.44	2.14	2.73	2.60	2.50	2.47	2.73
p stat_(*=Sig @ p<=.05)	.725		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

ACCESS TO SPECIALIZED SERVICES

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER				
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ PAC	ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NEZMDEQ NQ20	1.33	2.30	2.00		1.00		1.33								1.33	1.00	2.00		1.33	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTHP NQ23	2.41	2.19	3.00	2.09	2.40	2.63	2.29							2.33	2.60	2.30	2.48	1.75	2.50	2.33
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTC NQ26	2.17	2.18	2.00	1.50	2.40	2.29	2.14							1.60	2.60	2.07	2.19	2.29	2.18	2.16
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	1.97	2.22	2.33	1.80	1.93	2.46	1.92	x	x	x	x	x	x	1.97	2.60	1.90	1.89	2.01	2.34	1.94
p stat_(*=Sig @ p<=.05)		.000*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

	BANTO T1	BANTO T2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
PRBSEE4 Q46	80%	78%	80%	57%	100%	83%	81%						60%	78%	80%	83%	33%	83%	77%
CARNES4 Q15	89%	89%	83%	89%	93%	89%	94%						78%	86%	91%	91%	56%	89%	89%
AVERAGE	84.42	83.54	81.25	73.21	96.30	86.35	87.91	x	x	x	x	x	68.89	81.75	85.29	86.99	44.44	85.63	83.28

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

	BANTO T1	BANTO T2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
CARSN4 Q4	87%	91%	79%	79%	93%	94%	91%						78%	71%	90%	88%	63%	84%	93%
APGET4 Q6	83%	86%	80%	81%	86%	82%	91%						82%	69%	89%	84%	80%	80%	89%
AVERAGE	84.68	88.77	79.72	80.32	89.52	88.33	90.96	x	x	x	x	x	80.07	70.41	89.53	85.96	71.25	81.91	91.07

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALSK ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
DREXPL4 Q32	96%	95%	94%	98%	95%	96%	96%						89%	98%	95%	97%	80%	97%	95%
DRLSTN4 Q33	96%	95%	97%	96%	95%	96%	97%						89%	98%	96%	98%	70%	97%	95%
DRESPU4 Q34	99%	96%	100%	100%	98%	98%	98%						100%	100%	98%	99%	90%	99%	98%
DRTMEN4 Q37	91%	90%	91%	89%	93%	91%	98%						89%	82%	96%	93%	80%	90%	93%
AVERAGE	95.5	94.0	95.7	95.9	95.5	94.9	97.0	x	x	x	x	x	91.7	94.5	96.3	96.7	80.0	95.6	95.3

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

	BANTO T1	BANTO T2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
PBCLCS4 Q50	76%	78%	56%	70%	100%	72%	77%						67%	79%	75%	75%	100%	75%	78%
CSRESP Q51	90%	91%	67%	90%	100%	94%	93%						83%	89%	91%	90%	100%	85%	100%
AVERAGE	83.33	84.81	61.11	80.00	100.0	83.33	85.00	x	x	x	x	x	75.00	84.21	82.95	82.50	100.0	80.00	89.13

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NRXWHY Q11	89%	94%	80%	83%	86%	100%	97%						100%	71%	93%	88%	100%	81%	97%
NRXWYNT Q12	74%	71%	70%	58%	77%	83%	81%						67%	57%	79%	75%	50%	66%	83%
RXBST Q13	77%	79%	89%	67%	82%	72%	89%						50%	43%	87%	77%	75%	74%	80%
AVERAGE	79.9	81.2	79.6	69.4	81.6	85.2	89.2	x	x	x	x	x	72.2	57.1	86.4	79.9	75.0	73.7	86.6

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
EZMDEQ Q20	33%	76%	100%		0%		33%							33%	0%	100%		33%	
EZTHP Q23	85%	72%	100%	73%	100%	88%	82%						67%	100%	80%	86%	75%	92%	80%
EZTC Q26	69%	71%	50%	25%	87%	76%	64%						40%	90%	62%	69%	71%	73%	68%
AVERAGE	62.5	72.8	83.3	48.9	62.2	82.0	59.8	x	x	x	x	x	53.3	95.0	58.5	51.5	82.1	82.2	60.4

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
DRTLKU Q38	86%	87%	85%	87%	91%	82%	90%						78%	82%	88%	88%	67%	87%	84%
DRUNCON Q43	93%	90%	100%	90%	96%	91%	95%						88%	88%	94%	96%	75%	88%	94%
DRUNFAM Q44	91%	85%	0%	90%	96%	90%	95%						71%	86%	91%	94%	71%	86%	92%
AVERAGE	90.2	87.5	61.8	89.0	94.3	87.7	93.2	x	x	x	x	x	78.9	85.1	91.2	92.4	71.0	86.8	90.1

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER				
	INHE TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
HELPCONT Q18	94%	92%	100%	100%	92%	83%	95%						100%	100%	96%	100%	96%	100%	94%	94%
HLPCOORD Q29	56%	62%	25%	63%	53%	65%	63%						44%	54%	59%	60%	43%	57%	55%	
AVERAGE	75.2	77.1	62.5	81.6	72.3	74.2	78.9	x	x	x	x	x	72.2	76.9	77.4	78.2	71.4	75.4	74.8	

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2. YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

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

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

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

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

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

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

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

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

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

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

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

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3. YOUR PERSONAL DOCTOR

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

4. GETTING HEALTH CARE FROM SPECIALISTS

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

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5. YOUR HEALTH PLAN

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

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

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

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

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

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

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

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

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

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

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

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

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5. ADDITIONAL QUESTIONS

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

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

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

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

5. ACCESS TO DENTAL CARE

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

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

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

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

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

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

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6. ABOUT YOU

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

3. SPECIALIZED SERVICES

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

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

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

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

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

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

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

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

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

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

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

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4. YOUR CHILD'S PERSONAL DOCTOR

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

5. GETTING HEALTH CARE FROM SPECIALISTS

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

6. YOUR CHILD'S HEALTH PLAN

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

PAGE QUESTION TITLE

7. PRESCRIPTION MEDICINES

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

7. ACCESS TO DENTAL CARE

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

8. ABOUT YOUR CHILD AND YOU

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

88 Q78 WHAT IS YOUR AGE?

89 Q79 ARE YOU MALE OR FEMALE?

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

91 Q81 HOW ARE YOU RELATED TO THE CHILD?

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

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

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

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

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

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

9. RATINGS

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

10. COMPOSITES

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

11. GLOBAL PROPORTION COMPOSITES

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

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

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

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SURVEY INSTRUCTIONS

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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?

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

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

- Yes
- No → *Go to Question 35c*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 35e*

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

- Never
- Sometimes
- Usually
- Always

ADDITIONAL QUESTIONS

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes, definitely
- Yes, somewhat
- No

ACCESS TO DENTAL CARE

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

- Yes
- No



ABOUT YOU

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

- Yes
- No → *Go to Question 35l*

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

- Never
- Sometimes
- Usually
- Always

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

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

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

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

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

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

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

- Excellent
- Very Good
- Good
- Fair
- Poor

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

- Excellent
- Very Good
- Good
- Fair
- Poor

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

- Yes
- No
- Don't know

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

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

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

- Never
- Sometimes
- Usually
- Always



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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No
- Don't know

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

- Yes
- No
- Don't know

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

- Yes
- No

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

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

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

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

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

- Yes
- No → *Go to Question 50*

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

- Yes
- No

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

- Yes
- No → *Go to Question 52*

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

- Yes
- No

52. What is your age?

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



53. Are you male or female?

- Male
- Female

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

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

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

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

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

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

57. Did someone help you complete this survey?

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

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

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

THANK YOU

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

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

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



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

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

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Correct
Mark 

Incorrect
Marks



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

- Yes → *Go to Question 1*
- No

↓ **START HERE** ↓

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

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

- Yes → *Go to Question 3*
- No

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

YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS

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

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

Yes
 No → *Go to Question 5*

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

Never
 Sometimes
 Usually
 Always

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

Yes
 No → *Go to Question 7*

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

Never
 Sometimes
 Usually
 Always

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

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

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

Yes
 No

9. In the last 6 months, how often did you have your questions answered by your child's doctor or other health providers?

Never
 Sometimes
 Usually
 Always

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

Yes
 No → *Go to Question 14*

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

Yes
 No

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

- Yes
- No

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

- Yes
- No

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No

SPECIALIZED SERVICES

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

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

- Yes
- No → *Go to Question 22*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 25*



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 28*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 30*

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

- Yes
- No

YOUR CHILD'S PERSONAL DOCTOR

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

- Yes
- No → *Go to Question 45*

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

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

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

- Never
- Sometimes
- Usually
- Always

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

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



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

- Yes
- No

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

- Yes
- No

GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

- Yes
- No → *Go to Question 49*

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

- Never
- Sometimes
- Usually
- Always

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

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

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

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

YOUR CHILD'S HEALTH PLAN

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

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

- Yes
- No → *Go to Question 52*

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

- Never
- Sometimes
- Usually
- Always



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → **Go to Question 54**

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

- Never
- Sometimes
- Usually
- Always

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

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

PRESCRIPTION MEDICINES

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

- Yes
- No → **Go to Question 57a**

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

ACCESS TO DENTAL CARE

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

- Yes
- No

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

- Yes
- No → **Go to Question 57d**

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

- Never
- Sometimes
- Usually
- Always



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

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

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

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

ABOUT YOUR CHILD AND YOU

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Yes
- No → **Go to Question 63**

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

- Yes
- No → **Go to Question 63**

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

- Yes
- No

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

- Yes
- No → **Go to Question 66**

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

- Yes
- No → **Go to Question 66**

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

- Yes
- No

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

- Yes
- No → **Go to Question 69**

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

- Yes
- No → **Go to Question 69**



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

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



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

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

81. How are you related to the child?

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

82. Did someone help you complete this survey?

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

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

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

THANK YOU

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

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

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







897-12



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

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

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

INSTRUCCIONES PARA EL CUESTIONARIO

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

Marca
Correcta 

Marca
Incorrecta   

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

- Sí ➔ *Pase a la Pregunta 1*
- No

↓ **COMIENCE AQUI** ↓

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

- Sí ➔ *Pase a la pregunta 3*
- No

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

LA ATENCIÓN MÉDICA QUE USTED RECIBIÓ EN LOS ÚLTIMOS 6 MESES

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

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

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

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 RECIBIÓ DE ESPECIALISTAS

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

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

Sí
 No → *Pase a la pregunta 28*

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

Nunca
 A veces
 La mayoría de las veces
 Siempre

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

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

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

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

SU PLAN DE SALUD

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

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

Sí
 No → *Pase a la pregunta 30*

29. En los últimos 6 meses, ¿con qué frecuencia encontró la información que usted necesitaba sobre cómo funciona su plan de salud en materiales escritos o en la Internet?

Nunca
 A veces
 La mayoría de las veces
 Siempre

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

Sí
 No → *Pase a la pregunta 33*

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

Nunca
 A veces
 La mayoría de las veces
 Siempre

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

Nunca
 A veces
 La mayoría de las veces
 Siempre

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

Sí
 No → *Pase a la pregunta 35*

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

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

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

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

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

- Sí
- No
- No sé

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

- Sí
- No
- No sé

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

- Sí
- No

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 50*

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 52*

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

- Sí
- No

52. ¿Qué edad tiene?

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



53. ¿Es usted hombre o mujer?

- Hombre
- Mujer

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

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

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

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

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

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

57. ¿Le ayudó alguien a completar esta encuesta?

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

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

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

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

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

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



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

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

INSTRUCCIONES PARA EL CUESTIONARIO

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

Marca
Correcta ●

Marca
Incorrecta



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

- Sí ➔ *Pase a la Pregunta 1*
- No

↓ **COMIENCE AQUI** ↓

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

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

- Sí ➔ *Pase a la pregunta 3*
- No

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

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

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

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

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

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

- Sí
- No

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

- Sí
- No

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 19*

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

- Sí
- No → *Pase a la pregunta 19*

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

- Sí
- No

SERVICIOS ESPECIALIZADOS

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

- Sí
- No → *Pase a la pregunta 22*

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

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

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 25*

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

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

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 28*

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

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

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 30*

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

- Sí
- No

EL DOCTOR PERSONAL DE SU NIÑO

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

- Sí
- No → *Pase a la pregunta 45*

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

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

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

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

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?

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

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

- Sí
- No

ACCESO A CUIDADO DENTAL

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 57d*

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

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

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

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

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

- | | | | | | | | | | | |
|------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <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 |
| Extremadamente difícil | | | | | | Extremadamente fácil | | | | |

ACERCA DE USTED Y DE SU NIÑO

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Sí
- No → *Pase a la pregunta 63*

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

- Sí
- No → *Pase a la pregunta 63*

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

- Sí
- No



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

- Sí
- No → *Pase a la pregunta 66*

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

- Sí
- No → *Pase a la pregunta 66*

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 69*

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

- Sí
- No → *Pase a la pregunta 69*

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 72*

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

- Sí
- No → *Pase a la pregunta 72*

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 74*

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

- Sí
- No

74. ¿Qué edad tiene su niño?

- Menos de un año

AÑOS (escriba la respuesta)

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

- Masculino
- Femenino

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

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



77. ¿A qué raza pertenece su niño?

Marque una o más.

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

78. ¿Qué edad tiene usted?

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

79. ¿Es usted hombre o mujer?

- Hombre
- Mujer

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

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

81. ¿Qué relación tiene con el niño?

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

82. ¿Le ayudó alguien a completar esta encuesta?

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

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

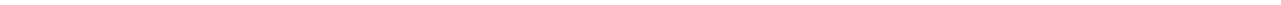
- Me leyó las preguntas
 - Anotó las respuestas que le di
 - Contestó las preguntas por mí
 - Tradujo las preguntas a mi idioma
 - Me ayudó de otra forma (Por favor escriba en letra de molde)
-

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

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

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





898-12



12

CZPCS

DIAL.SCREEN

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

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

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

We are conducting an important study to find out how satisfied
[people/families] are with [HEALTH PLAN NAME]. The results of the
study will help [HEALTH PLAN NAME] improve the care they provide
and will also help consumers when they choose health care plans.

The interview is completely confidential and voluntary, and will
not affect [your/your child's] health care or benefits in any way.

01. CONTINUE
02. ALREADY COMPLETED AND MAILED SURVEY BACK
03. NEW PHONE NUMBER
04. REFUSAL
05. APPOINTMENT
06. NEVER HEARD OF R
07. KNOWS R BUT HAS NO NEW NUMBER FOR R
08. RNA, ANS MACH, RETURN TO COVERSHEET
09. LANGUAGE PROBLEM -- SPEAKS SPANISH
10. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH
11. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)

IF DIAL.SCREEN = 01, GO TO START2

IF DIAL.SCREEN = 02, GO TO MAIL.SCREEN

IF DIAL.SCREEN = 03, ENTER NEW NUMBER ON COVERSHEET AND RE-DIAL

RETURN TO COVERSHEET

MAIL.SCREEN

MS. INTERVIEWER: WE STILL NEED TO CONDUCT A TELEPHONE INTERVIEW EVEN
THOUGH R SAYS THEY'VE SENT BACK THE MAIL SURVEY.

I'm sorry, but we haven't received your survey back -- it may have been
lost in the mail. And since the deadline for mailing surveys has passed,
we're now in the telephone phase of this study. May I continue?

(IF NEEDED: "This is purely a research study -- we are polling people
about [their/their child's] health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD
LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the
deadline for mailing surveys has passed and we're now in the telephone
phase of this study. May I continue?")

1. CONTINUE
2. REFUSAL BECAUSE ALREADY COMPLETED AND MAILED SURVEY BACK
3. REFUSAL
4. APPOINTMENT
5. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)

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

SEX

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

1. MALE
2. FEMALE

SPAN.VAR

(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

1. Spanish
2. English

MEMBER

Q1. / MEMBER

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

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

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

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

DK/REFUSAL/NOT ASCERTAINED

NPLNAME

Q2. / NPLNAME

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

("DK" NOT ALLOWED)

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

[(ENTER 5 IF R SAYS: MEDICAID)]

(IF R SAYS SOMETHING CLOSE TO [HEALTH PLAN NAME], ENTER "2")

(IF R NOT SURE OF PLAN NAME, ENTER "2")

- 1. EXACT MATCH -----> CK.PLMSTCR
- 2. POSSIBLE MATCH -----> PLNAME
- 3. NOT A MATCH -----> PLNAME
- 4. [RESPONDENT/CHILD] NO LONGER INSURED (BY MEDICAID) ----> NO.INSUR
- 5. [RESPONDENT/CHILD] INSURED BY MEDICAID BUT DOESN'T ----> CK.PLMSTCR
KNOW PLAN NAME

PLNAME

Q2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)

CK.PLMSTCR:

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

INTRO.INCARE

INTRO.INCARE

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

INCARE

Q3. / INCARE

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

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

DK/REFUSAL/NOT ASCERTAINED --> APMAKE4

CARSN4

Q4. / CARSN4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

APMAKE4

Q5. / APMAKE4

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

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

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

APGET4

Q6. / APGET4

In the last [12/6] months, [/when you made an appointment for a CHECK-UP OR ROUTINE CARE for your child at a doctor's office or clinic,] how often did you get an appointment [for a CHECK-UP OR ROUTINE CARE at a doctor's office or clinic/] as soon as [you/your child] needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

OFCTIM4

Q7. / OFCTIM4

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

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

(IWER: IF NEEDED CLARIFY: "Please don't include dental care [you/your child] received.")

(IWER: IF NEEDED CLARIFY, "Please include ALL doctor visits including those for routine, regular care and for an illness or injury.")

(READ LIST IF NEEDED: "Would you say...")

0. NONE,
1. 1 TIME,
2. 2,
3. 3,
4. 4,
5. 5 TO 9, OR
6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

IF OFCTIM4=0 OR DK/REFUSAL AND QNAIRE <05 THEN GO TO PRSNLD4

IF OFCTIM4=0 OR DK/REFUSAL AND QNAIRE >05 THEN GO TO CHSCHL

PRVENT5

Q8. / PRVENT5

In the last [12/6] months, did you and [a/your child's] doctor or other health provider talk about specific things you could do to prevent illness [/in your child?] ?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

IF qnaire<5 then go to RXSTP

OFTQUES

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

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXSTP

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

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

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

DK/REFUSAL/NOT ASCERTAINED --> RTALLCR

NRXWHY

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

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

NRXWYNT

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

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RXBST

[12/12/12/12/13/13]. / RXBST

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RTALLCR

[13/13/13/13/14/14]. / RTALLCR

Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all [your/your child's] health care in the last [12/6] months?

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

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

CARNES4

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

In the last [12/6] months, how often was it easy to get the care, tests, or treatment [you/your child] needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHSCHL

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

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

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

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

CONTSCHL

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

In the last [12/6] months, did you need your child's doctors or other health providers to contact a school or daycare center about your child's health or health care?

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

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

HELPCONT

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

In the last [12/6] months, did you get the help you needed from your child's doctors or other health providers in contacting your child's school or daycare?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

MEDEQUIP

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

Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment. In the last [12/6] months, did you get or try to get any special medical equipment or devices for your child?

- 1. YES
- 2. NO -----> SPCTHY

DK/REFUSAL/NOT ASCERTAINED --> SPCTHY

EZMDEQ

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

In the last [12/6] months, how often was it easy to get special medical equipment or devices for your child? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPMDEQ

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

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

SPCTHY

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

In the last [12/6] months, did you get or try to get special therapy such as physical, occupational, or speech therapy for your child?

- 1. YES
- 2. NO -----> TCPBLM

DK/REFUSAL/NOT ASCERTAINED --> TCPBLM

EZTHP

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

In the last [12/6] months, how often was it easy to get this therapy for your child? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTHP

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

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

TCPBLM

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

In the last [12/6] months, did you get or try to get treatment or counseling for your child for an emotional, developmental, or behavioral problem?

- 1. YES
- 2. NO -----> PLUSCARE

DK/REFUSAL/NOT ASCERTAINED --> PLUSCARE

EZTC

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

In the last [12/6] months, how often was it easy to get this treatment or counseling for your child? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTC

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

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

PLUSCARE

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

In the last [12/6] months, did your child get care from more than one kind of health care provider or use more than one kind of health care service?

- 1. YES
- 2. NO -----> PRSNLD4

DK/REFUSAL/NOT ASCERTAINED --> PRSNLD4

HLPCOORD

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

In the last [12/6] months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these different providers or services?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

PRSNLD4

[15/15/15/15/30/30]. / PRSNLD4

A personal doctor is the one [you/your child] would see if [you/+[he/she]] [need/needs] a check-up, [want advice about a health problem,/has a health problem,] or [get/gets] sick or hurt.

[Do you/Does your child] have a personal doctor?

- 1. YES
- 2. NO -----> INTRO.SPDR

DK/REFUSAL/NOT ASCERTAINED --> INTRO.SPDR

DRTMS

[16/16/16/16/31/31]. / DRTMS

In the last [12/6] months, how many times did [you/your child] visit [your/+[his/her]] personal doctor [to get care for yourself/for care] ?

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

(READ LIST IF NEEDED: "Would you say...")

- 0. NONE, -----> RATEDR4
- 1. 1 TIME,
- 2. 2,
- 3. 3,
- 4. 4,
- 5. 5 TO 9, OR
- 6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> RATEDR4

IF QNAIRE= ADULT MEDICAID (02), GO TO DREXPL4

PBDRNG

31a. / PBDRLANG

In the last [12/6] months, how often did you have a hard time speaking with or understanding your child's personal doctor because you spoke different languages? Would you say...?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DREXPL4

[17/17/17/17/32/32]. / DREXPL4

In the last [12/6] months, how often did [your/your child's] personal doctor explain things [/about your child's health] in a way that was easy to understand? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRLSTN4

[18/18/18/18/33/33]. / DRLSTN4

In the last [12/6] months, how often did [your/your child's] personal doctor listen carefully to you? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRESPU4

[19/19/19/19/34/34]. / DRESPU4

In the last [12/6] months, how often did [your/your child's] personal doctor show respect for what you had to say? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CABLTLK

[0/0/20/20/35/35]. / CABLTLK

Is your child able to talk with doctors about [your/+[his/her]] health care?

- 1. YES
- 2. NO -----> DRTMEN4

DK/REFUSAL/NOT ASCERTAINED --> DRTMEN4

CDREXPL

[0/0/21/21/36/36]. / CDREXPL

In the last [12/6] months, how often did your child's personal doctor explain things in a way that was easy for YOUR CHILD to understand? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTMEN4

[20/20/22/22/37/37]. / DRTMEN4

In the last [12/6] months, how often did [your/your child's] personal doctor spend enough time with [you/your child] ? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTLKU

[0/0/23/23/38/38]. / DRTLKU

In the last [12/6] months, did your child's personal doctor talk with you about how your child is feeling, growing, or behaving?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

DIFFDR

[21/21/24/24/39/39]. / DIFFDR

In the last [12/6] months, did [you/your child] get care from a doctor or other health provider besides [your/+[his/her]] personal doctor?

1. YES
2. NO -----> RATEDR4

DK/REFUSAL/NOT ASCERTAINED --> RATEDR4

DRINFO

[22/22/25/25/40/40]. / DRINFO

In the last [12/6] months, how often did [your/your child's] personal doctor seem informed and up-to-date about the care [you/your child] got from these doctors or other health providers? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RATEDR4

[23/23/26/26/41/41]. / RATEDR4

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

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

COND3MO

[0/0/0/0/42/42]. / COND3MO

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

- 1. YES
- 2. NO -----> INTRO.SPDR

DK/REFUSAL/NOT ASCERTAINED --> INTRO.SPDR

DRUNCON

[0/0/0/0/43/43]. / DRUNCON

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

DRUNFAM

[0/0/0/0/44/44]. / DRUNFAM

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.SPDR

INTRO.SPDR

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

NDSPDR4

[24/24/27/27/45/45]. / NDSPDR4

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

In the last [12/6] months, did you make any appointments [/for your child] to see a specialist?

(CLARIFY IF NEEDED: "Specialists are doctors who specialize in one area of health care. Please include all doctors you consider to be specialists, but do not include any dental visits.")

(IWER: IF RESPONDENT ASKS IF A PARTICULAR TYPE OF DOCTOR IS A SPECIALIST, CLARIFY, "I don't have any information about that, so please just interpret it however it seems best to you.")

(CLARIFY IF NEEDED: "You can interpret this question however it seems best to you.")

- 1. YES
- 2. NO -----> INTRO.PLAN

DK/REFUSAL/NOT ASCERTAINED --> INTRO.PLAN

PRBSEE4

[25/25/28/28/46/46]. / PRBSEE4

In the last [12/6] months, how often did you get an appointment [/for your child] to see a specialist as soon as you needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

SPDRS

[26/26/29/29/47/47]. / SPDRS

How many specialists [have/has] [you/your child] seen in the last [12/6] months?

(CLARIFY IF NEEDED: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. Would you say [you've/your child has] seen...")

(READ LIST IF NEEDED: "Would you say...")

- 0. NONE, -----> INTRO.PLAN
- 1. 1 SPECIALIST,
- 2. 2,
- 3. 3,
- 4. 4, OR
- 5. 5 OR MORE SPECIALISTS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> INTRO.PLAN

RTSPDR4

[27/27/30/30/48/48]. / RTSPDR4

We want to know your rating of the specialist [you/your child] saw most often in the last [12/6] months.

Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

(Clarify if necessary: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.")

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN
INTRO.PLAN

Now I'm going to ask you some questions about your experience with
[your/your child's] health plan.

LOOMAT4
[28/28/0/0/0/0]. / LOOMAT4

In the last [12/6] months, did you look for any information in written
materials or on the Internet about how your health plan works?

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

DK/REFUSAL/NOT ASCERTAINED --> CK.LOOSVC

UNDINF4
[29/29/0/0/0/0]. / UNDINF4

In the last [12/6] months, how often did the written materials OR the
Internet provide the information you needed about how your health plan
works? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CK.LOOSVC
IF qnaire=02 then go to CLCSRV4

LOOSVC
[30/0/0/0/0/0]. / LOOSVC

Sometimes people need services or equipment beyond what is provided in a
regular or routine office visit, such as care from a specialist,
physical therapy, a hearing aid, or oxygen.

In the last 12 months, did you look for information from your health
plan on how much you would have to pay for a health care service or
equipment?

- 1. YES
- 2. NO -----> LOOMED

DK/REFUSAL/NOT ASCERTAINED --> LOOMED

FNDSVC

[31/0/0/0/0/0]. / FNDSVC

In the last 12 months, how often were you able to find out from your health plan how much you would have to pay for a health care service or equipment? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

LOOMED

[32/0/0/0/0/0]. / LOOMED

In some health plans the amount you pay for a prescription medicine can be different for different medicines, or can be different for prescriptions filled by mail instead of at the pharmacy.

In the last 12 months, did you look for information from your health plan on how much you would have to pay for specific prescription medicines?

- 1. YES
- 2. NO -----> CLCSRV4

DK/REFUSAL/NOT ASCERTAINED --> CLCSRV4

FNDMED

[33/0/0/0/0/0]. / FNDMED

In the last 12 months, how often were you able to find out from your health plan how much you would have to pay for specific prescription medicines? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CLCSRV4

[34/30/31/31/49/49]. / CLCSRV4

In the last [12/6] months, did you get information or help from [your health plan's customer service/customer service at your child's health plan] ?

- 1. YES
- 2. NO -----> PLPRWK4

DK/REFUSAL/NOT ASCERTAINED --> PLPRWK4

PBCLCS4

[35/31/32/32/50/50]. / PBCLCS4

In the last [12/6] months, how often did [your health plan's customer service/customer service at your child's health plan] give you the information or help you needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CSRESP

[36/32/33/33/51/51]. / CSRESP

In the last [12/6] months, how often did [your health plan's/] customer service staff [/at your child's health plan] treat you with courtesy and respect? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLPRWK4

[37/33/34/34/52/52]. / PLPRWK4

In the last [12/6] months, did [your/your child's] health plan give you any forms to fill out?

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

DK/REFUSAL/NOT ASCERTAINED --> CK.SNDCLMS

PBPLPW4

[38/34/35/35/53/53]. / PBPLPW4

In the last [12/6] months, how often were the forms from [your/your child's] health plan easy to fill out? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CK.SNDCLMS

SNDCLM4

[39/0/0/0/0/0]. / SNDCLM4

Claims are sent to a health plan for payment. You may send in the claims yourself, or doctors, hospitals, or others may do this for you.

In the last [12/6] months, did you or anyone else send in any claims for your care to your health plan?

- 1. YES
- 2. NO -----> RTPLEXP
- 3. DON'T KNOW (DO NOT PROBE) --> RTPLEXP
- 9. REFUSAL/NOT ASCERTAINED ----> RTPLEXP

CLMTMR4

[40/0/0/0/0/0]. / CLMTMR4

In the last [12/6] months, how often did your health plan handle your claims quickly? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?
- 5. DON'T KNOW (DO NOT READ) (DO NOT PROBE)
- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

CLMCRCT

[41/0/0/0/0/0]. / CLMCRCT

In the last [12/6] months, how often did your health plan handle [your/your child's] claims correctly? Would you say...

(READ LIST)

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

- 5. DON'T KNOW (DO NOT READ) (DO NOT PROBE)

- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTPLEXP

[42/35/36/36/54/54]. / RTPLEXP

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

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

IF QNAIRE= CHILD MED W/CCC (07), GO TO CHPRES

HPMDEQ

[0/35.01/0/0/0/0]. / HPMDEQ

In the last [12/6] months, did you have a health problem for which you needed special medical equipment, such as a cane, a wheelchair, or oxygen equipment?

- 1. YES
- 2. NO -----> POSTHP

DK/REFUSAL/NOT ASCERTAINED --> POSTHP

EZMDHP

[0/35.02/0/0/0/0]. / EZMDHP

In the last [12/6] months, how often was it easy to get the medical equipment you needed through your health plan? Would you say...?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

POSTHP

[0/35.03/0/0/0/0]. / POSTHP

In the last [12/6] months, did you have any health problems that needed special therapy, such as physical, occupational, or speech therapy?

1. YES
2. NO -----> INTRO.DTLK

DK/REFUSAL/NOT ASCERTAINED --> INTRO.DTLK

EZPOST

[0/35.04/0/0/0/0]. / EZPOST

In the last [12/6] months, how often was it easy to get the special therapy you needed through your health plan? Would you say...?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

INTRO.DTLK
INTRO.DTLK

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

DTLKTF
[0/35.5/0/0/0/0]. / DTLKTF

In the last [12/6] months, how often did a doctor or other health provider talk too fast when talking to you? Would you say...?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DINTER

[0/35.6/0/0/0/0]. / DINTER

In the last [12/6] months, how often did a doctor or other health provider interrupt you when you were talking? Would you say...?

(READ LIST IF NECESSARY)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRRUDE

[0/35.7/0/0/0/0]. / DRRUDE

In the last [12/6] months, how often did a doctor or other health provider use a condescending, sarcastic or rude tone or manner with you? Would you say...?

(READ LIST IF NECESSARY)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

TRUSTDR

[0/35.8/0/0/0/0]. / TRUSTDR

In the last [12/6] months, did you feel you could trust a doctor or other health provider with your medical care?

(READ LIST)

1. YES DEFINITELY,
2. YES SOMEWHAT, OR
3. NO?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

REGDENT

[0/35.9/0/0/0/57.01]. / REGDENT

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

[Do you/Does your child] have a regular dentist?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

GODENT

[0/35.10/0/0/0/57.02]. / GODENT

In the last 6 months, did [you/your child] go to a dentist's office or clinic for care?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

IF QNAIRE = ADULT MEDICAID (02) AND GODENT <> YES, GO TO CK.DENTSOON
IF QNAIRE = CHILD MEDICAID W/CCC (07) AND GODENT <> YES, GO TO DNTASAP

DENTEXPL

[0/35.11/0/0/0/57.03]. / DENTEXPL

In the last [12/6] months, how often did [your/your child's] dentist or dental staff explain what they were doing while treating [you/your child]? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CK.DENTSOON

IF QNAIRE = CHILD MEDICAID W/CCC (07), GO TO DNTASAP

DENTSOON

[0/35.12/0/0/0/0]. / DENTSOON

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

(READ LIST)

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

- 5. DID NOT TRY TO GET AN APPOINTMENT WITH A SPECIALIST DENTIST IN THE LAST 6 MONTHS (DO NOT READ)

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DNTASAP

[0/35.13/0/0/0/57.04]. / DNTASAP

In the last [12/6] months, if [you/your child] needed to see a dentist right away because of a DENTAL EMERGENCY, did [you/+[he/she]] get to see a dentist as soon as you wanted? Would you say...

(IWER: IF R RESPONDS WITH "YES/NO" PLEASE PROBE WITH RESPONSE OPTIONS)

(READ LIST)

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

- 5. DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS (DO NOT READ)

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTDENT

[0/35.14/0/0/0/57.03]. / RTDENT

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

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

GO TO HLTSTA4

CHPRES

[0/0/0/0/55/55]. / CHPRES

In the last [12/6] months, did you get or refill any prescription medicines for your child?

1. YES
2. NO -----> REGDENT

DK/REFUSAL/NOT ASCERTAINED --> REGDENT

EZPRES

[0/0/0/0/56/56]. / EZPRES

In the last [12/6] months, how often was it easy to get prescription medicines for your child through [your/+[his/her]] health plan? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPPRES

[0/0/0/0/57/57]. / HELPPRES

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

IF QNAIRE = CHILD MEDICAID W/CCC, GO TO REGDENT

HLTSTA4

[43/36/37/37/58/58]. / HLTSTA4

[/I have just a few more questions.]

In general, how would you rate [your/your child's] overall health?
Would you say it is...

(READ LIST)

- 1. EXCELLENT,
- 2. VERY GOOD,
- 3. GOOD,
- 4. FAIR, OR
- 5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

MNTLSTAT

[44/37/38/38/59/59]. / MNTLSTAT

In general, how would you rate [your/your child's] overall MENTAL OR
EMOTIONAL health? Would you say it is...

(READ LIST)

- 1. EXCELLENT,
- 2. VERY GOOD,
- 3. GOOD,
- 4. FAIR, OR
- 5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CUSEMED

[0/0/0/0/60/60]. / CUSEMED

Other than vitamins, does your child currently need or use medicine
prescribed by a doctor?

- 1. YES
- 2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

WHYMEDA

[0/0/0/0/61/61]. / WHYMEDA

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

- 1. YES
- 2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

WHYMEDB

[0/0/0/0/62/62]. / WHYMEDB

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

MOREMED

[0/0/0/0/63/63]. / MOREMED

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

- 1. YES
- 2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

WHYMOREA

[0/0/0/0/64/64]. / WHYMOREA

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

- 1. YES
- 2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

WHYMOREB

[0/0/0/0/65/65]. / WHYMOREB

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

LIMITED

[0/0/0/0/66/66]. / LIMITED

Is your child limited or prevented in any way in [your/+[his/her]] ability to do the things most children of the same age can do?

- 1. YES
- 2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --> SPECTHP

WHYLIMA

[0/0/0/0/67/67]. / WHYLIMA

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

1. YES
2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --> SPECTHP

WHYLIMB

[0/0/0/0/68/68]. / WHYLIMB

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

SPECTHP

[0/0/0/0/69/69]. / SPECTHP

Does your child need or get special therapy such as physical, occupational, or speech therapy?

1. YES
2. NO -----> CHCOUNS

DK/REFUSAL/NOT ASCERTAINED --> CHCOUNS

WHYSTA

[0/0/0/0/70/70]. / WHYSTA

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

1. YES
2. NO -----> CHCOUNS

DK/REFUSAL/NOT ASCERTAINED --> CHCOUNS

WHYSTB

[0/0/0/0/71/71]. / WHYSTB

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

CHCOUNS

[0/0/0/0/72/72]. / CHCOUNS

Does your child have any kind of emotional, developmental, or behavioral problem for which [you/+[he/she]] needs or gets treatment or counseling?

- 1. YES
- 2. NO -----> CAGE

DK/REFUSAL/NOT ASCERTAINED --> CAGE

TIMCOUNA

[0/0/0/0/73/73]. / TIMCOUNA

Has this problem lasted or is it expected to last for at least 12 months?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

FLUSHOTQ

[45/38/0/0/0/0]. / FLUSHOTQ

Have you had either a flu shot or flu spray in the nose since July 1, 2015?

- 1. YES
- 2. NO
- 3. DON'T KNOW
- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

NOWSMOK

[46/39/0/0/0/0]. / NOWSMOK

Do you now smoke cigarettes or use tobacco...

(READ LIST)

- 1. EVERY DAY,
- 2. SOME DAYS, OR
- 3. NOT AT ALL? -----> ASPDAY
- 4. DON'T KNOW (DO NOT READ) -----> ASPDAY
- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ) --> ASPDAY

ADVQUIT9

[47/40/0/0/0/0]. / ADVQUIT9

In the last [12/6] months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PATCH9

[48/41/0/0/0/0]. / PATCH9

In the last [12/6] months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication. Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

WILLPWR9

[49/42/0/0/0/0]. / WILLPWR9

In the last [12/6] months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program. Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPDAY

[50/43/0/0/0/0]. / ASPDAY

Do you take aspirin daily or every other day?

(IF NEEDED: "Would you say YES or NO?")

(IWER: If the R asks about whether a particular medication or Brand name is considered aspirin, you may provide the following clarification:
Aspirin: Bayer and Bufferin

Not Aspirin: Tylenol, Motrin, Aleve, Advil, ibuprofen and acetaminophen)

1. YES
2. NO
3. DON'T KNOW

9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPUSF

[51/44/0/0/0/0]. / ASPUSF

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

(IF NEEDED: "Would you say YES or NO?")

1. YES
2. NO
3. DON'T KNOW

9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPPRV

[52/45/0/0/0/0]. / ASPPRV

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.AWCOND

INTRO.AWCOND

When I read the following list, please tell me if you are aware that you have any of these conditions.

PHAWCD.(1-3)

[53/46/0/0/0/0].(1-3) / PHAWCD.(1-3)

[First,/(Next/How About...)]

1. "High cholesterol"
2. "High blood pressure"
3. "Parent or sibling who had a heart attack before the age of 60"
- ?

(IWER IF NECESSARY: "Are you aware if you have this condition?")

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.DRCOND

INTRO.DRCOND

When I read the following list, please tell me if a doctor has ever told you that you have any of these conditions.

PHDRCD.(1-4)

[54/47/0/0/0/0].(1-4) / PHDRCD.(1-4)

[First,/(Next/How About...)]

1. "A heart attack"
2. "Angina or coronary heart disease"
3. "A stroke"
4. "Any kind of diabetes or high blood sugar"
- ?

(IWER IF NECESSARY: "Has a doctor ever told you that you have this condition?")

[FOR PHDRCD.2: (IWER IF NEEDED, CLARIFY: Angina pectoris (an-JYE-nuh or AN-jin-uh PECK-ter-iss) is severe pain in the chest associated with insufficient blood supply to the heart.)]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

SMPROB

[55/48/0/0/0/0]. / SMPROB

[I have just a few more questions./]

In the last [12/6] months, did you get health care 3 or more times for the same condition or problem?

1. YES
2. NO -----> TKMED

DK/REFUSAL/NOT ASCERTAINED --> TKMED

PRBLST

[56/49/0/0/0/0]. / PRBLST

Is this a condition or problem that has lasted for at least 3 months?
[/Please do NOT include pregnancy or menopause.]

[/ (IWER IF NEEDED, CLARIFY: Menopause (men-ne-paws) is the time in a woman's life when she stops having menstrual periods. It is sometimes called 'the change of life' or 'the change'.)]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

TKMED

[57/50/0/0/0/0]. / TKMED

Do you now need or take medicine prescribed by a doctor? [/Please do NOT include birth control.]

1. YES
2. NO -----> QAGE4

DK/REFUSAL/NOT ASCERTAINED --> QAGE4

TRTCOND

[58/51/0/0/0/0]. / TRTCOND

Is this medicine to treat a condition that has lasted for at least three months? [/Please do NOT include pregnancy or menopause.]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

[59/52/0/0/0/0]. / QAGE4

What is your age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your last birthday.")

(READ LIST IF NEEDED, "Are you...")

1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

QGENDER

[60/53/0/0/0/0]. / QGENDER

(IWER: RECORD RESPONDENT'S SEX.)

(ASK IF NECESSARY, "Are you male or female?")

1. MALE
2. FEMALE

DK/REFUSAL/NOT ASCERTAINED

CAGE

[0/0/39/39/74/74]. / CAGE

[/I have just a few more questions.]

What is YOUR CHILD'S age?

(IWER: ENTER 00 IF LESS THAN 1 YEAR OLD)

(IWER: DO NOT ROUND UP)

(IWER: IF NEEDED CLARIFY, "Please answer based on your child's age as of their last birthday.")

___ ENTER CHILD'S AGE

DK/REFUSAL/NOT ASCERTAINED

IF CAGE<19 THEN GO TO CGENDER

CAGE.CK

[0/0/39/39/74/74]a. / CAGE.CK

I have entered that [NAME OF CHILD] is [CAGE] . Is that correct?

("DK" NOT ALLOWED)

- 1. YES-AGE ENTERED CORRECTLY
- 2. NO-CORRECT AGE -----> CAGE

IF cage>18 and cage<>99 then go to ALL.DONE

CGENDER

[0/0/40/40/75/75]. / CGENDER

(IF NEEDED: "Is your child male or female?")

- 1. MALE
- 2. FEMALE

REFUSAL/NOT ASCERTAINED

LATINO

[62/55/41/41/76/76]. / LATINO

[Are/Is] [you/your child] of Hispanic or Latino origin or descent?

- 1. YES / HISPANIC OR LATINO
- 2. NO / NOT HISPANIC OR LATINO

DK/REFUSAL/NOT ASCERTAINED

INTRO.RACE

INTRO.RACE

I am going to read a list of race categories. For each category, please say YES or NO if it describes [your/your child's] race. I must ask you about all categories in case more than one applies.

PQRACE3.(1-6)
[63/56/42/42/77/77].(1-6) / PQRACE3.(1-6)

[(Are you)/(Is your child)]

1. "White"
2. "Black or African-American"
3. "Asian"
4. "Native Hawaiian or other Pacific Islander"
5. "American Indian or Alaska Native"
6. "Some other race"
- ?

(IWER: IF R REPLIES "WHY ARE YOU ASKING ABOUT MY [/CHILD'S] RACE?" SAY
"We ask about [your/your child's] race for demographic purposes only.
We want to be sure that the people we survey accurately represent the
racial diversity of managed care enrollees in this country.")

(IWER: If R answers with a category not listed here, such as "HISPANIC"
or "AMERICAN" or "MIXED RACE", probe using the category "OTHER".)

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

QRACE3.OTH / QRACE3.OTH
(What is [your/your child's] race?)

PAGE

[0/0/43/43/78/78]. / PAGE

Now I have a few questions about you. What is YOUR age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your last birthday.")

(READ IF NEEDED, "Are you...")

0. UNDER 18,
1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PGENDER

[0/0/44/44/79/79]. / PGENDER

(IWER: ENTER RESPONDENT'S SEX.)

(IWER: IF NECESSARY ASK, "Are you male or female?")

1. MALE
2. FEMALE

DK/REFUSAL/NOT ASCERTAINED

EDUCAT

[61/54/45/45/80/80]. / EDUCAT

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

(IWER: IF R SAYS HE/SHE HAD NON-ACADEMIC TRAINING, SUCH AS TRADE
SCHOOL, PROBE: "Did you receive a high school diploma or GED?")

(IWER: ACADEMIC TRAINING BEYOND A HIGH SCHOOL DIPLOMA THAT DOES NOT
LEAD TO A BACHELORS DEGREE, SHOULD BE CODED "4". IF R WENT TO BUSINESS
SCHOOL OR GOT A 3-YEAR NURSING DEGREE, ENTER "4")

(IWER: IF R OFFERS MORE THAN ONE RESPONSE, FOR EXAMPLE: "SOME HIGH
SCHOOL OR GED", ENTER THE HIGHEST NUMBER THAT APPLIES.)

(READ LIST)

1. 8TH GRADE OR LESS,
2. SOME HIGH SCHOOL, BUT DID NOT GRADUATE,
3. HIGH SCHOOL GRADUATE OR GED,
4. SOME COLLEGE OR 2-YEAR DEGREE,
5. 4-YEAR COLLEGE GRADUATE, OR
6. MORE THAN A 4-YEAR COLLEGE DEGREE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHRELT

[0/0/46/46/81/81]. / CHRELT

How are you related to the child?

(READ IF NEEDED: "Are you the ...")

1. MOTHER OR FATHER,
2. GRANDPARENT,
3. AUNT OR UNCLE,
4. OLDER BROTHER OR SISTER,
5. OTHER RELATIVE,
6. LEGAL GUARDIAN, OR
7. SOMEONE ELSE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ALL.DONE
THANKS.SCREEN.

Those are all the questions I have.

Thank you for taking part in this important interview.

Have a nice (day/evening). Good bye.

RETURN TO COVERSHEET

EDIT.FLG
(IWER: DO YOU NEED TO TYPE AN EDIT?)

1. YES
2. NO

IF EDIT.FLG = 2 THEN GO TO CK.END.EDIT

EDIT.OTH
EDIT.OTH. (IWER: PLEASE TYPE YOUR EDIT-BE SPECIFIC-INCLUDE:
1) QUESTION NUMBER(S)
2) WHAT WAS ENTERED
3) WHAT NEEDS TO BE CHANGED

CK.END.EDIT
LANG.DID

LANG.DID. IWER: DID YOU DO THIS INTERVIEW IN...

1. ENGLISH,
2. SPANISH OR
3. BOTH?