



Oregon Health Plan: Special Populations 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 Oregon Health Plan: Special Populations members. A total of 16 health plans participated in the survey; 15 Coordinated Care Organizations (CCOs) and the state-administered OHP Open Card plan or fee-for-service (FFS) plan. 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 an initial 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.

To achieve sufficient cases in each race/ethnicity category for analysis, adult and child oversamples of 300 eligible members were drawn for the African-American, Asian, and American Indian race/ethnicity subgroups identified in the sample frame. Adults were defined as members aged 18 years or older and children as 17 years old or younger, both as of November 31, 2016. To be eligible, members had to have been enrolled in Oregon Health Plan for at least six months as of November 31, 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 overall OHP results and plan or demographic subgroup results. Statistically significant differences were determined with binomial and t-tests, using a significance level of .05 or less. Tests were considered valid when the number of cases used to compute the score was 50 or greater and there was non-zero variation in the tested groups. 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 race/ethnicity subgroup's actual distribution in the total eligible population. A weight unique to each race/ethnicity subgroup (White, Unknown, Black/African-American, Asian, Pacific Islander, and American Indian or Alaska Native) and age category (adults and children) was constructed by applying the percentage of members by race/ethnicity subgroup in the population to the corresponding percentages in the completed cases.

Sample Disposition

Special Populations

Category	Adult	Child
**First mailing - sent	17100	17100
*First mailing - usable survey returned	2951	2289
Second mailing - sent	14054	14357
*Second mailing - usable survey returned	1030	950
*Phone - usable surveys	1367	2358
Total - usable surveys	5348	5597
†Ineligible: According to population criteria‡	356	218
†Ineligible: Deceased	31	0
†Ineligible: Mentally or physically unable to complete survey	207	0
†Ineligible: Language barrier	97	108
Incorrect address AND incorrect phone number	910	763
Refusal/Returned survey blank	697	868
Nonresponse - Unavailable by mail or phone	9454	9546
Adjusted Response Rate	32.6%	33.4%

*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	4238 44.2%	2170 40.6%	-3.63%
Female	5350 55.8%	3178 59.4%	3.63%
18-24	1855 19.3%	527 9.9%	-9.49%
25-34	2694 28.1%	897 16.8%	-11.32%
35-44	1883 19.6%	837 15.7%	-3.99%
45-54	1493 15.6%	1098 20.5%	4.96%
55-64	1154 12.0%	1502 28.1%	16.05%
65-74	281 2.9%	313 5.9%	2.92%
75 or Older	228 2.4%	174 3.3%	0.88%

Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	4979 51.3%	2881 51.5%	0.14%
Female	4721 48.7%	2716 48.5%	-0.14%
<3	1917 19.8%	1005 18.0%	-1.81%
4-7	2374 24.5%	1305 23.3%	-1.16%
8-12	2861 29.5%	1741 31.1%	1.61%
13 or older	2548 26.3%	1546 27.6%	1.35%

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER				
		BLCK	NATV	AMER	HIS-	HIS-	EX &													
OHP	18	25	35	45	55	65	OR	HAW/	IND/	HIS-	HIS-	GOOD	FAIR							
TOT	TO	TO	TO	TO	TO	AND	AFR-	AS-	PAC	ALSK	MUL-	PAN-	PAN-	&	&	FE-				
ADLT	24	34	44	54	64	OVER	WHT	AMER	IAN	ILND	NATV	OTHR	TI	IC	IC	GOOD	POOR	MALE	MALE	
Q1																				
YES	5323	466	812	764	1029	1439	479	3532	93	197	21	112	73	349	584	4349	3423	1566	2019	3008
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
NOT ANSWERED		25	1	4	3	3	4	4	12	3	1	1	1	1	4	15	14	8	9	13
VALID CASES	5323	466	812	764	1029	1439	479	3532	93	197	21	112	73	349	584	4349	3423	1566	2019	3008
NUMBER OF RESPONDENTS	5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK WHTC AFR- AMER	NATV OR AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	VERY FAIR & POOR	EX & GOOD FE- MALE	VERY FAIR & POOR	EX & GOOD FE- MALE	
Q3	YES	2121 41%	139 30%*	300 37%*	316 42%	457 45%*	605 42%	197 42%	1436 41%	39 41%	52 27%*	7 31%~	60 54%*	37 51%	175 51%*	196 34%*	1793 42%*	1164 34%*	843 54%*	714 36%*	1316 44%*
	NO	3070 59%	319 70%*	509 63%*	446 58%	561 55%*	825 58%	270 58%	2066 59%	56 59%	141 73%*	14 69%~	51 46%*	36 49%	168 49%*	380 66%*	2516 58%*	2235 66%*	709 46%*	1283 64%*	1670 56%*
	NOT ANSWERED	157	9	7	5	14	14	16	43	1	5		2		6	12	54	38	22	31	35
VALID CASES		5191	458	809	762	1018	1429	467	3501	95	193	21	111	73	344	576	4310	3399	1552	1997	2986
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE							RACE							ETHNIC- ITY	HEALTH STATUS	GENDER			
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTH TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	FE- MALE MALE		
Q4	NEVER	46 2%	3 2%	10 4%	6 2%	10 2%	12 2%	1 0.5%*	27 2%	1 3%~	1 2%~	~ ~	1 3%	5 18%~	7 5%	1 0.6%*	43 3%*	22 2%	21 3%	20 3%	25 2%
	SOMETIMES	287 15%	20 15%	50 18%	44 15%	60 15%	69 13%	21 11%	180 14%	8 22%~	14 28%~	~ ~	6 12%	5 16%~	23 14%	26 14%	236 15%	129 12%*	134 18%*	85 13%	180 15%
	USUALLY	496 26%	48 36%*	72 26%	78 27%	116 29%	121 23%*	41 22%	341 26%	11 31%~	13 26%~	2 32%~	11 20%	5 16%~	41 25%	45 25%	425 26%	296 28%*	178 23%*	168 26%	308 26%
	ALWAYS	1091 57%	63 47%*	145 52%	164 56%	220 54%	331 62%*	120 66%*	744 58%	16 44%~	22 44%~	4 68%~	34 65%	15 50%~	92 56%	111 61%	918 57%	609 58%	427 56%	366 57%	687 57%
	#ALWAYS + USUALLY (NET)	1587 83%	111 83%	217 78%	242 83%	336 83%	451 85%	161 88%*	1085 84%*	27 75%~	34 70%~	6 100%~	45 86%	20 66%~	133 81%	156 85%	1343 83%	905 86%*	605 80%*	534 84%	995 83%
	TOP BOX SCORE	1091 57%	63 47%*	145 52%	164 56%	220 54%	331 62%*	120 66%*	744 58%	16 44%~	22 44%~	4 68%~	34 65%	15 50%~	92 56%	111 61%	918 57%	609 58%	427 56%	366 57%	687 57%
	NOT ANSWERED	205	6	22	24	50	72	17	144	3	3	1	7	7	11	14	173	112	83	76	118
VALID CASES	1920	134	278	292	407	533	183	1293	36	49	6	52	30	164	183	1622	1056	759	639	1200	
NUMBER OF RESPONDENTS	2125	140	300	316	457	605	200	1437	39	52	7	59	37	175	197	1795	1168	842	715	1318	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q3 = YES]

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	AMER ILND	ALSK NATV	MUL- OTH TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD GOOD	EX & VERY & POOR	FE- MALE		
Q5	YES	3539 68%	249 54%*	505 63%*	492 65%*	755 74%*	1035 72%*	358 76%*	2417 69%	69 73%	134 69%	13 61%~	74 67%	50 70%	248 71%	371 64%*	2987 69%*	2152 64%*	1233 79%*	1247 62%*	2169 73%*
	NO	1636 32%	213 46%*	300 37%*	266 35%*	264 26%*	393 28%*	114 24%*	1079 31%	26 27%	60 31%	8 39%~	36 33%	21 30%	100 29%	208 36%*	1318 31%*	1237 36%*	323 21%*	750 38%*	812 27%*
	NOT ANSWERED	173	5	11	9	13	16	11	48	1	4		2	2	2	8	60	47	18	31	40
VALID CASES		5175	462	805	758	1019	1427	472	3496	95	194	21	111	71	348	580	4304	3390	1556	1997	2981
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR WHTE	NATV HAW/ AMER AMER	AMER	PAC IAN	ALSK ILND	IND/ NATV	MUL- TI OTHR	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY FAIR & POOR	FE- MALE	FE- MALE
Q6	NEVER	88 3%	5 2%	17 4%	15 3%	19 3%	25 3%	1 0.2%*	55 3%	2 3%	5 4%	1 5%~	1 1%	1 7%~	10 4%	5 1%	76 3%	56 3%	25 2%	30 3%	52 3%
	SOMETIMES	644 20%	80 34%*	113 24%*	101 22%	123 18%	144 16%*	52 17%	385 18%*	12 19%	61 48%*	4 29%~	14 20%	9 19%~	46 20%	86 26%*	521 19%*	411 21%	199 18%*	228 20%	388 20%
	USUALLY	926 29%	68 29%	142 30%	124 27%	217 32%*	250 27%	85 27%	639 30%	18 29%	31 24%	1 7%~	18 26%	18 37%~	66 28%	81 24%*	787 29%	539 28%*	347 31%*	307 27%	580 30%
	ALWAYS	1539 48%	85 35%*	195 42%*	216 47%	317 47%	495 54%*	173 56%*	1081 50%*	30 48%	30 24%*	8 59%~	37 52%	17 37%~	112 48%	164 49%	1314 49%	944 48%	541 49%	556 50%	943 48%
	#ALWAYS + USUALLY (NET)	2465 77%	153 64%*	337 72%*	340 75%	535 79%	746 82%*	258 83%*	1720 80%*	48 77%	61 48%*	9 66%~	55 79%	35 74%~	178 76%	245 73%	2101 78%*	1483 76%	888 80%*	863 77%	1524 78%
	TOP BOX SCORE	1539 48%	85 35%*	195 42%*	216 47%	317 47%	495 54%*	173 56%*	1081 50%*	30 48%	30 24%*	8 59%~	37 52%	17 37%~	112 48%	164 49%	1314 49%	944 48%	541 49%	556 50%	943 48%
	NOT ANSWERED	351	12	39	36	80	121	48	260	7	8	1	7	3	13	36	295	209	120	127	212
	VALID CASES	3197	238	467	457	677	914	311	2160	62	127	13	70	47	234	336	2698	1950	1113	1121	1964
	NUMBER OF RESPONDENTS	3548	250	506	493	757	1035	359	2420	69	135	14	77	50	247	372	2993	2159	1233	1248	2176
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q5 = YES]

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

	BANT OT1	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTC AFR- AMER	BLCK OR AMER	NATV HAW/ IAN	AMER PAC ILND	IND/ ALSK NATV	MUL- OTHR	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY FAIR & POOR	FE- MALE	FE- MALE	
Q7	NONE	1309 26%	168 37%*	248 31%*	231 31%*	218 22%*	300 21%*	92 20%*	871 25%	25 26%	59 31%	6 31%~	25 22%	16 22%	69 20%*	173 31%*	1057 25%*	1021 30%*	240 16%*	641 32%*	624 21%*
	1 TIME	969 19%	91 20%	149 19%	122 16%*	170 17%*	295 21%*	92 20%	638 18%	13 14%	54 28%*	3 14%~	17 15%	12 16%	69 20%	119 21%	799 19%	710 21%	218 14%*	416 21%*	517 18%*
	2	924 18%	82 18%	144 18%	131 17%	192 19%	252 18%	100 21%	650 19%	18 19%	39 20%	5 23%~	15 13%	12 17%	63 18%	94 17%	796 19%*	617 18%	272 18%	341 17%	567 19%*
	3	612 12%	37 8%*	79 10%*	87 12%	151 15%*	166 12%	68 15%	414 12%	10 11%	18 9%	1 7%~	19 17%	15 16%	47 14%	67 12%	521 12%	368 11%*	218 14%*	203 10%*	389 13%*
	4	429 8%	31 7%	54 7%*	62 8%	92 9%	132 9%	45 10%	299 9%	9 9%	12 6%	3 15%~	16 15%	7 9%	26 8%	40 7%	370 9%	245 7%*	172 11%*	142 7%*	273 9%*
	5 TO 9	596 12%	40 9%*	86 11%*	86 11%	121 12%	198 14%*	41 9%*	424 12%	15 16%	9 5%*	2 11%~	17 15%	10 14%	34 10%	51 9%*	508 12%	294 9%*	275 18%*	166 9%*	407 14%*
	10 OR MORE TIMES	254 5%	9 2%*	36 5%*	33 4%	67 7%*	68 5%	27 6%	171 5%	5 5%	2 1%*	~ ~	3 3%	4 6%	34 10%*	18 3%*	221 5%	111 3%*	133 9%*	76 4%*	167 6%*
	NOT ANSWERED	255	10	19	15	22	33	17	76	1	6	1	2		8	25	93	70	45	44	77
VALID CASES		5093	457	797	752	1010	1410	466	3468	95	192	20	111	73	342	563	4271	3367	1529	1984	2944
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE						RACE								ETHNIC- ITY		HEALTH STATUS		GENDER		
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTC	NATV HAW/ AS- AMER	AMER IND/ PAC	ALSK IAN	MUL- ILND NATV	TI OTHR	HIS- PAN- IC	HIS- PAN- IC	EX & NOT GOOD & GOOD	VERY GOOD & POOR	FAIR & POOR		FE- MALE	FE- MALE
Q8 #YES		2668 72%	179 62%*	351 64%*	365 71%	586 76%*	825 76%*	273 75%	1878 74%*	50 73%	84 64%*	12 83%~	63 72%	40 72%	184 69%	255 67%*	2298 73%*	1634 71%*	942 75%*	971 74%	1625 71%	
NO		1030 28%	109 38%*	193 36%*	150 29%	184 24%*	256 24%*	92 25%	665 26%*	19 27%	48 36%*	3 17%~	24 28%	15 28%	83 31%	124 33%*	854 27%*	669 29%*	319 25%*	342 26%	651 29%	
NOT ANSWERED		91	3	5	5	22	29	9	55	1	2		1	1	5	10	66	48	24	31	47	
VALID CASES NUMBER OF RESPONDENTS		3698 3789 100%	287 290 100%	545 550 100%	516 521 100%	770 792 100%	1081 1110 100%	365 374 100%	2544 2599 100%	69 70 100%	132 134 100%	15 15 100%	87 88 100%	56 57 100%	267 272 100%	379 389 100%	3152 3218 100%	2304 2352 100%	1262 1286 100%	1313 1344 100%	2276 2323 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	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK WHTC AFR- AMER	NATV OR AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	FAIR & POOR	FE- MALE MALE	
Q9 YES	1940 53%	122 42%*	258 47%*	270 53%	437 57%*	599 55%*	190 52%	1384 54%*	36 53%	52 39%*	7 48%~	50 58%	25 46%	153 57%	155 42%*	1706 54%*	1092 47%*	777 62%*	663 51%	1221 54%
NO	1750 47%	165 58%*	286 53%*	241 47%	331 43%*	484 45%*	172 48%	1158 46%*	32 47%	81 61%*	8 52%~	36 42%	30 54%	114 43%	217 58%*	1442 46%*	1208 53%*	478 38%*	645 49%	1049 46%
NOT ANSWERED	98	3	6	9	25	27	12	57	2	1		2	2	5	17	71	52	30	35	53
VALID CASES NUMBER OF RESPONDENTS	3691 3789 100%	287 290 100%	544 550 100%	512 521 100%	767 792 100%	1083 1110 100%	362 374 100%	2542 2599 100%	68 70 100%	133 134 100%	15 15 100%	86 88 100%	55 57 100%	267 272 100%	372 389 100%	3147 3218 100%	2300 2352 100%	1256 1286 100%	1309 1344 100%	2270 2323 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	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	IND/ PAC ILND	ALSK NATV	MUL- OTH TI	HIS- PAN- IC	NOT GOOD PAN- IC	EX & VERY & GOOD POOR	FE- & & POOR	MALE MALE		
Q10 #YES		1759 93%	110 92%	236 94%	246 94%	384 91%	550 94%	175 94%	1266 94%~	33 94%~	45 94%~100%~	7 90%~	42 87%~	22 93%	139 89%	133 94%	1553 94%	998 94%	696 92%	606 94%	1103 93%
NO		126 7%	9 8%	16 6%	17 6%	36 9%	33 6%	11 6%	83 6%~	2 6%~	3 6%~		4 ~ 10%~	3 13%~	11 7%	17 11%	104 6%	64 6%	59 8%	36 6%	86 7%
NOT ANSWERED		50	1	6	7	14	15	4	37	1	3		1	1	1	3	44	28	19	17	30
VALID CASES NUMBER OF RESPONDENTS		1885 1935 100%	119 120 100%	252 258 100%	263 270 100%	420 434 100%	584 599 100%	186 190 100%	1349 1386 100%	35 36 100%	48 51 100%	7 7 100%	46 47 100%	25 26 100%	150 153 100%	1657 1701 100%	1062 1090 100%	755 774 100%	643 660 1189 1219		

[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 OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTH	TI	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FE- HIS- PAN- IC	MALE MALE		
Q11 #YES		1392 74%	87 73%	191 77%	208 79%*	309 74%	414 71%*	137 73%	1022 76%*	23 66%~	24 49%~	5 76%~	36 78%~	20 83%~	114 77%	94 62%*	1246 75%*	794 75%	545 72%	471 74%	883 74%
NO		490 26%	32 27%	57 23%	56 21%*	111 26%	171 29%*	50 27%	325 24%*	12 34%~	25 51%~	2 24%~	10 22%~	4 17%~	34 23%	57 38%*	408 25%*	263 25%	213 28%	169 16%	307 26%
NOT ANSWERED		53	1	10	6	15	14	3	38	1	2		1	2	3	2	47	33	16	20	30
VALID CASES NUMBER OF RESPONDENTS		1882 1935 100%	119 120 100%	248 258 100%	264 270 100%	419 434 100%	585 599 100%	187 190 100%	1348 1386 100%	35 36 100%	49 51 100%	7 7 100%	46 47 100%	24 26 100%	148 151 100%	151 153 100%	1654 1701 100%	1057 1090 100%	758 774 100%	640 660 100%	1189 1219 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	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ AS-	AMER AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY FAIR & POOR	FE- MALE MALE	
Q12 #YES	1441 77%	93 79%	211 83%*	198 75%	314 75%	431 74%	147 80%	1036 77%	30 88%~	38 78%~	6 84%~	33 72%~	14 58%~	112 76%	115 78%	1267 77%	832 79%*	554 74%*	499 78%	899 76%
NO	431 23%	25 21%	42 17%*	65 25%	104 25%	148 26%	37 20%	311 23%	4 12%~	11 22%~	1 16%~	13 28%~	11 42%~	36 24%	32 22%	384 23%	224 21%*	196 26%*	138 22%	285 24%
NOT ANSWERED	63	2	5	7	16	20	6	40	2	2		1	1	3	6	50	34	24	22	35
VALID CASES NUMBER OF RESPONDENTS	1872 1935 100%	118 120 100%	253 258 100%	263 270 100%	418 434 100%	579 599 100%	184 190	1346 1386	34 36	49 51	7 7	46 47	25 26	148 151	147 153	1651 1701	1056 1090	750 774	638 660	1184 1219 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	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTC AFR- AMER	BLCK OR AMER	NATV HAW/ IAN	AMER PAC ILND	IND/ NATV	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	FE- MALE	FE- MALE
Q13 WORST HEALTH CARE POSSIBLE	19 0.5%	3 ~0.5%	3 0.6%	6 0.8%	5 0.5%	1 0.3%	14 0.5%	14 ~0.5%	~ ~	~ ~	~ ~	~ ~	~ ~	4 2%	19 ~0.6%*	4 0.2%*	14 1%*	6 0.5%	13 0.6%	
01	22 0.6%	1 0.3%	3 0.5%	3 0.6%	5 0.6%	6 0.6%	2 0.5%	13 0.5%	~ ~	~ ~	1 4%~	~ ~	1 2%	2 0.8%	3 0.8%	17 0.5%	7 0.3%*	12 0.9%	8 0.6%	12 0.5%
02	40 1%	3 ~0.6%	11 2%	10 1%	11 1%	1 0.3%*	27 1%	1 ~0.7%	~ ~	2 2%	2 3%	2 2%	5 0.5%	2 1%	36 0.6%*	15 2%*	21 0.9%	12 1%	26 3%	
03	63 2%	2 0.7%	8 2%	11 2%	21 3%*	16 1%	4 1%	49 2%	1 ~0.7%	~ ~	2 4%	2 3%	7 0.5%*	2 2%	60 1%*	25 1%*	37 3%*	28 2%	34 1%	
04	99 3%	11 4%	15 3%	12 2%	22 3%	27 2%	5 1%*	68 3%	2 3%	2 2%	2 15%~	7 8%	2 4%	6 2%	5 1%*	88 3%	42 2%*	51 4%*	28 2%	67 3%
05	248 7%	18 6%	43 8%	34 7%	67 9%*	55 5%*	24 7%	164 6%	4 6%	7 6%	~ ~	6 7%	8 13%	19 7%	28 7%	207 7%	126 5%*	112 9%*	77 6%	164 7%
06	223 6%	23 8%	36 7%	35 7%	39 5%	58 5%	21 6%	162 6%	4 6%	5 4%	~ ~	5 6%	6 10%	18 7%	11 3%*	197 6%	129 6%	86 7%	64 5%*	151 7%*
07	460 12%	37 13%	90 17%*	68 13%	91 12%	126 12%	33 9%*	326 13%	8 12%	21 16%	~ ~	12 14%	10 18%	34 13%	32 9%*	412 13%*	282 12%	168 13%	168 13%	279 12%
08	816 22%	68 24%	121 22%	126 25%	165 21%	235 22%	73 20%	576 23%	13 19%	30 23%	~ ~	18 21%	5 9%*	59 22%	81 21%	699 22%	543 24%*	241 19%*	282 22%	509 22%
09	622 17%	56 20%	86 16%	78 15%	126 16%	182 17%	73 20%	429 17%	9 13%	23 17%	4 27%~	9 10%*	10 18%	41 16%	72 19%	521 17%	412 18%*	189 15%*	227 17%	378 17%
BEST HEALTH CARE POSSIBLE	1075 29%	70 24%	137 25%*	128 25%*	220 29%	361 33%*	122 34%*	710 28%*	28 41%*	41 31%	8 54%~	29 33%	12 20%	68 26%	141 37%*	887 28%*	717 31%*	323 26%*	410 31%*	636 28%
#8-10 (NET)	2512 68%	193 68%	344 63%*	332 65%	511 66%	778 72%*	268 74%*	1715 68%	50 73%	95 72%	12 81%~	56 64%	27 47%*	169 64%	294 78%*	2107 67%*	1671 73%*	753 60%*	919 70%*	1523 67%

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	AGE						RACE								ETHNIC- ITY	HEALTH STATUS	GENDER		
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR WHTC AMER	NATV HAW/ AMER	AMER	AS- IAN	PAC ILND	ALSK NATV	MUL- OTHR	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	VERY FAIR & POOR	EX & GOOD FE- MALE
9-10 (NET)	1696 46%	126 44%	224 41%*	206 41%*	347 45%	543 50%*	195 54%*	1139 45%*	37 54%	64 49%	12 81%~	38 44%	22 38%	109 41%	213 56%*	1408 45%*	1128 49%*	512 41%*	637 49%*	1014 45%*
NOT ANSWERED	102	5	5	12	19	28	14	61	2	2	1			7	12	75	51	31	34	54
VALID CASES NUMBER OF RESPONDENTS	3687 3789 100%	285 290 100%	545 550 100%	509 521 100%	773 792 100%	1082 1110 100%	360 374 100%	2538 2599 100%	68 70 100%	132 134 100%	15 15 100%	87 88 100%	57 57 100%	265 272 100%	377 389 100%	3143 3218 100%	2301 2352 100%	1255 1286 100%	1310 1344 100%	2269 2323 100%
MEAN	7.96	7.99	7.84	7.77	7.82	8.15	8.28	7.93	8.42	8.25	8.47	7.90	7.18	7.67	8.40	7.91	8.20	7.56	8.07	7.91
p stat_(*=Sig @ p<=.05)		.782	.120	.020*	.042*	.000*	.001*	.186	.060	.055		~.766	.015*	.031*	.000*	.001*	.000*	.000*	.017*	.050

[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 OT1	AGE							RACE							ETHNIC- ITY	HEALTH STATUS	GENDER			
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	FE- MALE MALE		
Q14	NEVER	93 3%	4 1%	17 3%	12 2%	24 3%	21 2%	5 1%*	57 2%	3 4%	2 2%	2 12%~0.9%	1 8%	1 4%	10 4%	7 2%	79 3%	41 2%*	42 3%*	35 3%	52 2%
	SOMETIMES	568 15%	47 16%	95 18%	85 17%	133 17%	141 13%*	39 11%*	376 15%	8 12%	33 25%*	1 8%~20%	17 24%	13 19%	50 19%	44 12%*	495 16%	283 12%*	258 21%*	174 13%*	369 16%
	USUALLY	1208 33%	114 40%*	205 38%*	179 35%*	254 33%	313 29%*	110 31%	833 33%	20 29%	41 31%	1 6%~24%	21 30%	17 30%	81 30%	145 39%*	1013 32%	772 34%	403 32%	408 31%	769 34%
	ALWAYS	1808 49%	121 42%*	224 41%*	235 46%*	355 46%	606 56%*	206 57%*	1266 50%	37 54%	56 42%	11 74%~55%	48 39%	22 47%	127 47%	175 47%	1553 49%	1195 52%*	552 44%*	690 53%*	1072 47%*
	#ALWAYS + USUALLY (NET)	3015 82%	235 82%	429 79%	414 81%	610 80%	918 85%*	317 88%*	2099 83%*	57 84%	98 74%*	12 80%~	69 79%	38 68%*	208 78%	320 86%*	2567 82%	1966 86%*	955 76%*	1098 84%*	1841 81%
	TOP BOX SCORE	1808 49%	121 42%*	224 41%*	235 46%*	355 46%	606 56%*	206 57%*	1266 50%	37 54%	56 42%	11 74%~	48 55%	22 39%	127 47%	175 47%	1553 49%	1195 52%*	552 44%*	690 53%*	1072 47%*
	NOT ANSWERED	113	5	10	10	25	30	13	67	2	1	1	1	1	4	18	77	62	32	37	60
VALID CASES	3676	285	540	511	767	1080	361	2532	68	133	14	87	56	268	371	3141	2290	1254	1307	2263	
NUMBER OF RESPONDENTS	3789	290	550	521	792	1110	374	2599	70	134	15	88	57	272	389	3218	2352	1286	1344	2323	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q7 >= 1 TIME]

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	AGE						RACE								ETHNIC- ITY		HEALTH STATUS		GENDER	
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTC AMER	NATV HAW/ AS- IAN	AMER IND/ PAC ILND	ALSK NATV OTHR	MUL- TI TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY FAIR & POOR	FE- MALE MALE			
Q15	YES	4188 81%	327 71%*	609 75%*	600 79%	855 83%	1224 86%*	427 91%*	2909 83%*	78 83%	143 74%*	16 78%~	85 75%	57 78%	281 82%	443 77%*	3549 82%*	2678 79%*	1350 87%*	1526 76%*	2539 85%*
	NO	957 19%	132 29%*	200 25%*	162 21%	171 17%	200 14%*	43 9%*	597 17%*	16 17%	51 26%*	4 22%~	28 25%	16 22%	60 18%	135 23%*	763 18%*	721 21%*	203 13%*	471 24%*	446 15%*
	NOT ANSWERED	203	7	7	6	6	19	13	38	2	4	1		9	10	52	38	21	31	36	
VALID CASES		5145	460	809	761	1026	1424	470	3506	94	194	20	113	73	341	578	4312	3399	1553	1997	2985
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER						
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT/E	NATV HAW/ AMER AS- AMER	AMER IND/ PAC	ALSK IAN	MUL- ILND	TI NATV OTHR	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	FE- MALE MALE				
Q16	NONE	829 21%	100 32%*	163 28%*	148 26%*	121 15%*	213 19%*	60 15%*	584 21%	17 24%	31 23%	2 16%~	11 15%	13 25%	50 19%	86 21%	707 21%	638 25%*	168 13%*	350 24%*	457 19%*	
	1 TIME	1042 27%	97 31%	150 26%	150 27%	183 23%*	321 28%	102 26%	728 27%	17 24%	47 34%	3 23%~	16 21%	10 18%	64 24%	117 29%	877 26%	756 30%*	249 20%*	407 28%	608 26%	
	2	832 21%	54 17%*	110 19%	109 19%	193 24%*	239 21%	102 26%*	595 22%	17 24%	26 19%	6 40%~	14 19%	17 31%	50 19%	79 19%	720 22%	516 20%	289 23%	302 21%	508 21%	
	3	506 13%	27 9%*	66 11%	62 11%	135 17%*	144 13%	56 14%	344 13%	6 8%	20 15%	~ 15%	11 14%	7 18%*	47 13%	53 13%	434 13%	280 11%*	207 16%*	172 12%	320 14%	
	4	292 7%	17 5%	31 5%*	38 7%	64 8%	96 8%	35 9%	211 8%	2 3%*	4 3%*	2 12%~	10 14%	3 5%	17 6%	28 7%	248 7%	144 7%	136 6%*	97 11%*	183 7%	8%
	5 TO 9	327 8%	16 5%*	53 9%	40 7%	71 9%	98 9%	38 10%	221 8%	10 14%	5 4%*	1 9%~	9 12%	1 2%*	24 9%	36 9%	273 8%	153 6%*	161 13%*	84 6%*	232 10%*	
	10 OR MORE TIMES	89 2%	2 0.7%*	15 3%	14 3%	22 3%	22 2%	5 1%	49 2%*	2 3%	4 3%	~ 4%	3 6%	3 4%	10 4%	10 3%	71 2%	35 1%*	48 4%*	21 1%*	62 3%	
	NOT ANSWERED	269	13	20	38	64	91	29	180	7	6	1	11	3	16	34	216	152	92	91	167	
VALID CASES	NUMBER OF RESPONDENTS	3918 4187	312 325	588 608	561 599	790 854	1133 1224	398 427	2731 2911	71 78	137 143	15 16	74 85	54 57	263 279	409 443	3329 3545	2523 2675	1259 1351	1434 1525	2371 2538	
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q15 = YES]

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

	BANT OT1	AGE							RACE							ETHNIC- ITY	HEALTH STATUS	GENDER			
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IND/ PAC IAN	ALSK ILND	MUL- NATV OTHr	TI	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FE- MALE	FE- MALE			
Q17	NEVER	53 2%	3 1%	8 2%	7 2%	10 2%	13 1%	3 1%	33 2%	1 2%	1 0.9%	1 4%~	1 ~	1 3%~	4 2%	6 2%	22 1%*	23 2%	19 2%	28 1%	
	SOMETIMES	199 6%	9 4%	29 7%	34 8%	43 6%	51 6%	22 7%	127 6%	4 8%	14 13%*	1 11%~	1 2%*	1 2%~	18 8%	19 6%	165 6%	97 5%*	94 9%*	53 5%*	137 7%*
	USUALLY	609 20%	50 23%	79 19%	72 18%	146 22%	166 18%	75 22%	412 19%	7 13%	31 29%*	3 25%~	10 16%	9 21%~	39 18%	70 22%	509 19%	348 19%*	236 22%*	213 20%	375 20%
	ALWAYS	2211 72%	150 71%	310 73%	297 72%	466 70%	684 75%*	233 70%	1565 73%*	41 77%	60 56%*	8 60%~	52 82%*	30 74%~	150 71%	224 70%	1896 73%	1411 75%*	727 67%*	793 74%	1362 72%
	#ALWAYS + USUALLY (NET)	2820 92%	200 94%	389 91%	369 90%	612 92%	850 93%	307 92%	1977 93%*	48 91%	91 86%	11 85%~	63 98%*	39 95%~	189 90%	294 92%	2405 92%	1759 94%*	963 89%*	1006 93%*	1738 91%
	TOP BOX SCORE	2211 72%	150 71%	310 73%	297 72%	466 70%	684 75%*	233 70%	1565 73%*	41 77%	60 56%*	8 60%~	52 82%*	30 74%~	150 71%	224 70%	1896 73%	1411 75%*	727 67%*	793 74%	1362 72%
	NOT ANSWERED	21	1	3	4	7	5	13	1						1	3	18	12	9	8	13
VALID CASES	3072	212	426	410	665	914	333	2137	53	106	13	64	41	211	319	2609	1878	1080	1077	1903	
NUMBER OF RESPONDENTS	3093	213	426	413	669	921	338	2150	54	106	13	64	41	212	322	2627	1890	1089	1085	1916	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

	BANT OT1	AGE							RACE							ETHNIC- ITY	HEALTH STATUS	GENDER			
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AS- AMER	AMER IND/ PAC	ALSK ILND	MUL- NATV OTHr	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	FE- MALE		
Q18	NEVER	64 2%	2 0.9%	12 3%	8 2%	14 2%	17 2%	3 0.9%*	44 2%	1 2%	2 ~ 13%~	14 13%	4 ~ 6%	2 5%~	16 7%	53 2%	24 1%*	33 3%*	16 1%	41 2%	
	SOMETIMES	237 8%	16 8%	36 8%	24 6%	60 9%	66 7%	21 6%	167 8%	5 9%	14 13%	4 ~ 6%	2 5%~	16 7%	19 6%	205 8%	126 7%*	100 9%*	62 6%*	168 9%*	
	USUALLY	601 20%	45 21%	79 18%	97 24%*	117 18%	172 19%	66 20%	400 19%	10 19%	29 27%	3 26%~	14 22%	10 23%~	46 22%	61 19%	506 19%	350 19%	222 21%	194 18%	383 20%
	ALWAYS	2165 71%	150 70%	300 68%	279 71%	470 72%	659 73%	243 71%	1523 70%	38 60%*	63 62%~	8 73%	47 69%~	28 68%	144 74%	235 71%	1844 73%*	1381 67%*	719 75%*	799 69%*	1315 69%*
	#ALWAYS + USUALLY (NET)	2766 90%	195 91%	379 89%	376 92%	588 89%	831 91%	309 93%	1923 90%	48 89%	92 87%	11 87%~	60 94%	38 92%~	189 90%	296 93%*	2350 90%	1731 92%*	941 88%*	992 93%*	1698 89%*
	TOP BOX SCORE	2165 71%	150 70%	300 68%	279 71%	470 72%	659 73%	243 71%	1523 70%	38 60%*	63 62%~	8 73%	47 69%~	28 68%	144 74%	235 71%	1844 73%*	1381 67%*	719 75%*	799 69%*	1315 69%*
	NOT ANSWERED	26			5	7	7	4	16						2	4	19	9	14	15	9
VALID CASES	3067	213	426	408	662	914	334	2134	54	106	13	64	41	210	318	2608	1881	1075	1070	1907	
NUMBER OF RESPONDENTS	3093	213	426	413	669	921	338	2150	54	106	13	64	41	212	322	2627	1890	1089	1085	1916	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

	BANT OT1	AGE							RACE							ETHNIC- ITY	HEALTH STATUS	GENDER			
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AS- AMER	AMER IND/ PAC	ALSK ILND	MUL- NATV OTHR	TI	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	FE- MALE MALE			
Q19	NEVER	56 2%	2 0.7%	5 1%	6 1%	15 2%	23 3%	1 0.3%*	43 2%	1 ~0.9%	1 ~	1 1%	1 3%~	3 1%	3 1%	49 2%	22 1%*	30 3%*	11 1%*	41 2%	
	SOMETIMES	225 7%	14 6%	33 8%	26 6%	46 7%	67 7%	27 8%	153 7%	4 7%	8 7%	2 13%~	5 9%	3 8%~	20 10%	17 5%	193 7%	107 6%*	106 10%*	63 6%*	154 8%*
	USUALLY	461 15%	27 13%	67 16%	69 17%	111 17%	113 12%*	56 17%	316 15%	6 11%	24 22%	2 15%~	7 11%	7 16%~	30 14%	51 16%	386 15%	278 15%	165 15%	155 14%	292 15%
	ALWAYS	2326 76%	170 80%	320 75%	311 75%	493 74%	709 78%	248 75%	1623 76%	44 82%	74 69%	9 73%~	51 80%	30 74%~	157 75%	250 78%	1979 76%	1474 78%*	778 72%*	844 79%*	1421 74%*
	#ALWAYS + USUALLY (NET)	2787 91%	198 93%	388 91%	380 92%	604 91%	823 90%	304 92%	1939 91%	50 93%	97 92%	11 87%~	58 90%	37 90%~	187 89%	301 94%*	2365 91%	1752 93%*	943 87%*	999 93%*	1712 90%*
	TOP BOX SCORE	2326 76%	170 80%	320 75%	311 75%	493 74%	709 78%	248 75%	1623 76%	44 82%	74 69%	9 73%~	51 80%	30 74%~	157 75%	250 78%	1979 76%	1474 78%*	778 72%*	844 79%*	1421 74%*
	NOT ANSWERED	25			1	4	8	6	15						2	1	19	10	10	11	9
VALID CASES	3068	213	426	412	665	913	332	2135	54	106	13	64	41	210	321	2608	1880	1079	1074	1907	
NUMBER OF RESPONDENTS	3093	213	426	413	669	921	338	2150	54	106	13	64	41	212	322	2627	1890	1089	1085	1916	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	FE- MALE MALE		
Q20	NEVER	90 3%	5 3%	17 4%	8 2%	19 3%	27 3%	6 2%	64 3%	1 2%	1 0.9%*	1 4%~	1 ~	7 3%~	7 3%	75 2%*	37 4%*	45 2%*	21 3%	64	
	SOMETIMES	279 9%	26 12%	44 10%	38 9%	63 10%	62 7%*	28 8%	176 8%*	5 9%	13 12%	1 8%~	5 7%	2 4%~	24 11%	34 11%	223 9%*	141 7%*	123 11%*	95 9%	171
	USUALLY	755 25%	61 29%	93 22%	113 27%	161 24%	222 24%	82 25%	518 24%	11 20%	35 33%	3 23%~	16 24%	12 29%~	43 20%	94 29%*	628 24%	439 23%*	289 27%*	256 24%	479 25%
	ALWAYS	1949 63%	119 56%*	272 64%	253 61%	423 63%	605 66%*	217 65%	1380 65%	37 69%	57 54%*	8 64%~	44 68%	26 65%~	137 65%	185 58%*	1688 65%*	1269 67%*	623 58%*	705 65%	1196 63%
	#ALWAYS + USUALLY (NET)	2703 88%	180 85%	365 86%	366 89%	584 88%	827 90%*	299 90%	1898 89%	48 89%	92 87%	11 87%~	59 93%	38 93%~	180 85%	280 87%	2316 89%*	1708 91%*	911 84%*	962 89%	1675 88%
	TOP BOX SCORE	1949 63%	119 56%*	272 64%	253 61%	423 63%	605 66%*	217 65%	1380 65%	37 69%	57 54%*	8 64%~	44 68%	26 65%~	137 65%	185 58%*	1688 65%*	1269 67%*	623 58%*	705 65%	1196 63%
	NOT ANSWERED	21	1	1	2	5	4	12							1	1	13	5	10	8	6
VALID CASES	3072	212	426	412	667	916	334	2138	54	106	13	64	41	211	321	2614	1885	1079	1077	1910	
NUMBER OF RESPONDENTS	3093	213	426	413	669	921	338	2150	54	106	13	64	41	212	322	2627	1890	1089	1085	1916	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	IND/ PAC ILND	ALSK NATV	MUL- OTH TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	FE- MALE MALE		
Q21	YES	1890 62%	121 57%	248 59%	255 63%	428 65%	581 64%	198 61%	1347 63%*	33 65%	47 45%*	7 51%~	36 58%	32 78%~	128 61%	187 59%	1635 63%*	1071 57%*	754 70%*	601 56%*	1241 66%*
	NO	1157 38%	92 43%	175 41%	151 37%	235 35%	331 36%	128 39%	779 37%*	18 35%	57 55%*	6 49%~	26 42%	9 22%~	82 39%	132 41%	960 37%*	795 43%*	321 30%*	469 44%*	651 34%*
	NOT ANSWERED	45		2	7	6	9	12	23	3	2		2		2	3	32	23	13	15	24
VALID CASES	NUMBER OF RESPONDENTS	3048 3093 100%	213 213 100%	424 426 100%	406 413 100%	663 669 100%	912 921 100%	326 338 100%	2127 2150 100%	51 54 100%	104 106 100%	13 13 100%	62 64 100%	41 41 100%	210 212 100%	319 322 100%	2595 2627 100%	1867 1890 100%	1076 1089 100%	1070 1085 100%	1892 1916 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	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTE	NATV HAW/ AS- AMER	AMER IAN	IND/ PAC ILND	ALSK NATV	MUL- OTHR	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY FAIR & POOR	FE- MALE MALE			
Q22	NEVER	111 6%	6 5%	23 9%	19 8%	18 4%	30 5%	7 4%	75 6%	1 3%~	~ ~	1 9%~	~ ~	1 4%~	12 10%	15 8%	92 6%	57 5%	47 6%		
	SOMETIMES	276 15%	18 16%	41 17%	36 14%	68 16%	73 13%	25 13%	204 16%	3 9%~	8 17%~	1 16%~	5 15%~	4 12%~	18 15%	16 9%*	244 15%	141 14%*	121 17%		
	USUALLY	536 29%	36 31%	68 28%	76 30%	134 32%	164 29%	52 27%	396 30%	6 19%~	16 34%~	1 21%~	9 25%~	13 41%~	25 21%*	57 32%	470 30%	318 31%	209 28%		
	ALWAYS	910 50%	58 49%	114 47%	118 47%	197 47%	295 53%	106 56%	639 49%	22 69%~	23 49%~	4 54%~	22 60%~	14 44%~	68 55%	91 51%	785 49%	524 50%	358 49%		
	#ALWAYS + USUALLY (NET)	1446 79%	94 79%	182 74%	194 78%	331 79%	459 82*	158 83%	1035 79%	28 88%~	38 83%~	5 75%~	31 85%~	26 85%~	93 76%	148 82%	1254 79%	842 81%*	566 77%		
	TOP BOX SCORE	910 50%	58 49%	114 47%	118 47%	197 47%	295 53%	106 56%	639 49%	22 69%~	23 49%~	4 54%~	22 60%~	14 44%~	68 55%	91 51%	785 49%	524 50%	358 49%		
	NOT ANSWERED	52	2	3	6	10	19	7	35	1	1			1	4	6	42	28	18		
VALID CASES	NUMBER OF RESPONDENTS	1834 1886 100%	118 120 100%	245 248 100%	249 255 100%	417 427 100%	562 581 100%	190 197 100%	1313 1348 100%	32 33 100%	46 47 100%	7 7 100%	36 36 100%	31 32 100%	123 127 100%	179 185 100%	1590 1632 100%	1040 1068 100%	735 753 100%	593 601 100%	1198 1237 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	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
		OHP TOT ADLT	18	25	35	45	55	65	BLCK OR AFR- AS- WHTC AMER	NATV HAW/ IAN	AMER IND/ PAC ILND	ALSK NATV	MUL- OTH TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY FAIR & POOR	FE- MALE	FE- MALE		
			TO	TO	TO	TO	TO	AND OVER	AMER	ILND	NATV	OTHR	TI	PAN- IC	PAN- IC	GOOD	POOR	MALE	MALE		
Q23 WORST PERSONAL DOCTOR POSSIBLE		23	3	4	6	5	3		20		2		1	21	8	13	9	13			
		0.6%	0.9%	0.7%	1%	0.6%	0.3%*		~0.7%*		~	~	~	0.2%	0.6%	0.3%*	1%*	0.6%	0.5%		
01		33	1	4	5	6	10	6	22		1		1	4	4	28	14	19	6	26	
		0.8%	0.3%	0.7%	0.9%	0.8%	0.9%	1%	0.8%		~0.7%		~	~	1%	0.8%	0.6%*	1%*	0.4%*	1%*	
02		40	1	8	2	12	14	2	32		1	1	1	2	4	35	15	23	10	30	
		1%	0.3%*	1%	0.4%*	2%	1%	0.4%	1%		~	~	4%~	1%	~0.7%	1%	1%	0.6%*	2%*	0.7%	1%
03		60	3	10	5	17	16	6	44		1		1	9	2	54	22	32	18	39	
		2%	1%	2%	0.8%	2%	1%	2%	2%		~	~	~	1%	~	3%	0.5%*	2%	0.9%*	2%*	1% 2%
04		74	6	13	13	9	23	6	50	2	1		2	2	7	4	65	34	39	18	54
		2%	2%	2%	2%	1%*	2%	1%	2%	3%	0.7%		~	3%	4%	2%	1%	2%	1%*	3%*	1%* 2%*
05		202	18	34	27	45	55	17	149	3	5	1	1	2	17	15	176	128	68	81	116
		5%	6%	6%	5%	6%	5%	4%	5%	4%	4%	8%~	1%*	4%	6%	4%	5%	5%	5%	6%	5%
06		164	17	33	23	22	46	15	112	4	4		4	3	14	13	141	96	61	59	98
		4%	5%	6%	4%	3%*	4%	4%	4%	6%	3%		~	5%	6%	5%	3%	4%	4%	5%	4% 4%
07		343	30	63	51	75	93	19	255	4	13		9	6	19	25	308	232	102	132	204
		9%	10%	11%	9%	9%	8%	5%*	9%	6%	10%		~	12%	11%	7%	6%*	9%*	9%	8%	9% 9%
08		661	61	117	108	112	176	60	470	12	28		6	8	45	62	561	462	176	243	392
		17%	20%	20%*	19%	14%*	16%	15%	17%	17%	21%		~	9%*	15%	17%	15%	17%	18%*	14%*	17% 17%
09		721	64	104	89	159	217	74	522	8	32	1	15	8	40	77	625	463	241	267	442
		18%	21%	18%	16%	20%	19%	19%	19%	11%	23%	4%~	20%	14%	15%	19%	19%	18%	19%	19%	19%
BEST PERSONAL DOCTOR POSSIBLE		1584	104	191	227	336	481	194	1052	37	52	12	35	24	110	200	1311	1027	503	582	960
		41%	34%*	33%*	41%	42%	42%	49%*	39%*	53%*	38%	84%~	47%	45%	41%	49%*	39%*	41%	39%	41%	40%
#8-10 (NET)		2965	229	412	424	607	874	328	2043	57	112	13	56	40	196	340	2496	1952	920	1092	1794
		76%	74%	71%*	76%	76%	77%	82%*	75%*	81%	82%	88%~	75%	74%	73%	83%*	75%*	78%*	72%*	77%	76%

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	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR WHTE	NATV HAW/ AMER	AMER	AFR- AS- IAN	PAC ILND	ALSK NATV	MUL- OTH TI	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	FEE- MALE MALE		
9-10 (NET)	2304	168 55%	295 51%*	316 57%	495 62%*	55 61%*	65 67%*	OVER	1574 58%*	45 64%	84 61%	13 88%~	49 66%	32 59%	151 56%	277 68%*	1936 58%*	1490 60%	744 58%	849 60%	1402 59%
NOT ANSWERED	282	17	27	42	56	90	28		184	8	7	2	11	3	11	35	221	174	74	100	165
VALID CASES NUMBER OF RESPONDENTS	3905 4187	308 325	581 599	557 854	798 1224	1134 427	399 2911	2727 78	70 143	136 16	14 85	74 57	54 279	268 443	408 3545	3324 2675	2501 1351	1277 1351	1425 1525	2373 2538	
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
MEAN	8.35	8.26	8.08	8.34	8.38	8.42	8.64		8.28	8.76	8.64	9.26	8.49	8.42	8.19	8.72	8.31	8.48	8.10	8.42	8.31
p stat_(*=Sig @ p<=.05)		.427	.001*	.943	.615	.151	.003*	.003*	.044*	.029*		~.576	.801	.212		.000*	.005*	.000*	.000*	.077	.184

[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	AGE						RACE								ETHNIC- ITY		HEALTH STATUS		GENDER	
	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK WHTC AMER	NATV OR AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	FAIR & POOR	FE- MALE MALE		
Q24 YES	2026 40%	106 23%*	229 28%*	259 34%*	458 45%*	55 49%*	65 48%*	1436 41%*	39 42%	59 30%*	9 45%~	56 50%*	37 52%*	153 45%	167 29%*	1786 42%*	1092 32%*	873 57%*	708 35%*	1274 43%*	
NO	3082 60%	354 77%*	583 72%*	502 66%*	564 55%*	724 51%*	244 52%*	2062 59%*	54 58%	138 70%*	11 55%~	55 50%*	35 48%*	189 55%	413 71%*	2517 58%*	2307 68%*	668 43%*	1299 65%*	1694 57%*	
NOT ANSWERED	241	7	4	6	10	25	16	46	3	1	1	2	1	8	8	61	38	33	21	53	
VALID CASES NUMBER OF RESPONDENTS	5107 5348 100%	460 467 100%	812 816 100%	761 767 100%	1022 1032 100%	1418 1443 100%	467 483 100%	3498 3544 100%	93 96 100%	197 198 100%	20 21 100%	111 113 100%	72 73 100%	342 350 100%	580 588 100%	4303 4364 100%	3399 3437 100%	1541 1574 100%	2007 2028 100%	2968 3021 100%	

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AS- AMER	AMER IND/ PAC	ALSK ILND	MUL- NATV OTHr	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FE- & POOR	MALE MALE		
Q25	NEVER	114 6%	2 2%*	15 7%	19 8%	27 6%	43 7%	3 1%*	86 6%	1 3%~	~ 6%~	1 2%*	1 3%~	13 9%	7 4%	103 6%	55 5%	55 6%	40 6%	70 6%	
	SOMETIMES	346 18%	20 19%	42 18%	51 20%	101 22%*	84 13%*	30 14%	211 15%*	10 26%~	27 45%*	1 12%~	11 22%	9 26%~	31 21%	28 18%	300 17%	166 16%	165 20%	129 19%	207 17%
	USUALLY	565 29%	35 33%	59 26%	62 25%	137 31%	189 28%	71 33%	421 30%*	6 16%~	13 22%	2 23%~	11 21%	11 31%~	32 22%*	48 30%	497 29%	296 28%	252 30%	173 25%*	381 31%*
	ALWAYS	941 48%	47 46%	110 49%	120 48%	183 41%*	352 53%*	110 51%	673 48%	21 55%~	20 34%*	6 59%~	28 55%	14 41%~	73 49%	79 48%	834 48%	546 51%*	374 44%*	352 51%	573 47%
	#ALWAYS + USUALLY (NET)	1506 77%	82 79%	169 75%	182 72%	320 71%*	540 81%*	180 85%*	1094 79%*	27 71%~	32 55%*	8 82%~	39 76%	25 71%~	105 70%	127 78%	1331 77%	842 79%*	626 74%*	525 76%	953 77%
	TOP BOX SCORE	941 48%	47 46%	110 49%	120 48%	183 41%*	352 53%*	110 51%	673 48%	21 55%~	20 34%*	6 59%~	28 55%	14 41%~	73 49%	79 48%	834 48%	546 51%*	374 44%*	352 51%	573 47%
	NOT ANSWERED	66	1	5	8	10	26	10	49	1			5	2	2	4	55	31	27	15	47
VALID CASES	1966	104	226	252	448	668	213	1391	38	59	10	51	35	149	162	1734	1063	846	693	1231	
NUMBER OF RESPONDENTS	2032	105	231	260	458	694	223	1440	39	59	10	56	37	151	166	1789	1094	873	708	1278	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q24 = YES]

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER			
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK WHT	NATV AMER	OR AFR- AMER	AMER IAN	IND/ PAC ILND	ALSK NATV	MUL- OTH	TI	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FE- MALE
Q26	NONE	80 4%	5 5%	10 5%	10 4%	16 4%	33 5%	3 1%*	54 4%	1 ~	2 2%	~	2 5%	3 9%~	11 7%	5 3%	69 4%	45 4%	34 4%
	1 SPECIALIST	1045 53%	70 68%*	153 67%*	128 51%	229 52%	336 50%*	104 49%	761 55%*	14 38%~	39 67%*	7 67%~	27 53%	16 47%~	59 40%*	88 55%	925 53%	651 61%*	369 44%*
	2	525 27%	22 21%	52 23%	71 28%	129 29%	190 28%	53 25%	376 27%	14 38%~	9 16%*	2 15%~	11 21%	10 28%~	48 32%	37 23%	471 27%	264 25%*	247 29%*
	3	199 10%	4 4%*	9 4%*	25 10%	46 10%	72 11%	32 15%*	128 9%*	7 19%~	5 8%	2 18%~	8 15%	4 10%~	16 11%	21 13%	170 10%	76 7%*	115 14%*
	4	65 3%	1 1%*	2 0.9%*	9 3%	11 3%	25 4%	10 5%	41 3%	1 ~	3 2%	~	6 6%~	1 3%~	8 5%	7 4%	52 3%	21 2%*	41 5%*
	5 OR MORE SPECIALISTS	48 2%	2 2%	2 0.9%*	8 3%	9 2%	16 2%	11 5%	32 2%	2 5%~	3 5%	~	1 2%	1 3%~	6 4%	3 2%	45 3%	9 0.9%*	36 4%*
	NOT ANSWERED	69	1	3	9	17	23	10	49	2			5	2	3	5	57	28	32
VALID CASES	1963	104	228	251	441	671	213	1391	37	59	10	51	35	148	161	1732	1066	841	692 1228
NUMBER OF RESPONDENTS	2032	105	231	260	458	694	223	1440	39	59	10	56	37	151	166	1789	1094	873	708 1278
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER			
		18 OHP TOT ADLT	25 TO 24	35 TO 34	45 TO 54	55 TO 64	65 AND OVER	BLCK WHT/E AFR- AMER	NATV OR AS- IAN	AMER HAW/ ILND	IND/ PAC	ALSK NATV	MUL- OTH/R	HIS- PAN- IC	HIS- PAN- IC	EX & NOT VERY GOOD & GOOD	FAIR & POOR	FE- MALE	
Q27 WORST SPECIALIST POSSIBLE	14 0.7%	1 ~0.4%	2 0.8%	5 1%	4 0.6%	8 ~0.6%	~0.6%	1 ~	1 2%	~	~	1 3%~	3 2%	1 0.7%	13 0.8%	3 0.3%*	9 1%	4 0.6%	10 0.8%
01	14 0.8%	1 ~0.5%	3 1%	4 1%	4 0.6%	10 ~0.8%	~0.8%	~ ~	~ ~	~ ~	~ ~	1 3%~0.7%	1 ~	12 ~0.7%	7 0.7%	6 0.8%	6 0.9%	6 0.5%	
02	14 0.8%	1 1%	3 ~	3 1%	5 0.7%	1 0.8%	1 0.6%	12 0.9%	1 3%~	1 2%	~	~ ~	~ ~	13 ~0.8%	5 0.5%	9 1%	3 0.5%	11 0.9%	
03	29 2%	1 1%	2 0.9%	6 2%	9 2%	9 1%	2 1%	22 2%	1 3%~	1 2%	~	3 6%~	2 ~	28 1%	10 2%*	18 1%*	8 2%	21 1%	
04	22 1%	1 1%	3 1%	3 1%	6 1%	5 0.8%	3 1%	14 1%	1 ~	1 2%	12%~	~ ~	2 2%	3 1%	18 1%	13 1%	9 1%	7 1%	
05	83 4%	5 5%	11 5%	12 4%	18 4%	25 4%	8 4%	65 5%	2 5%~	3 5%	~	2 3%~	4 ~	6 3%	75 4%	42 5%	40 5%	31 5%	
06	70 4%	8 8%	9 4%	9 4%	17 4%	19 3%	4 2%	49 4%	1 ~	1 2%	~	3 5%~	2 6%~	7 5%	5 3%	62 4%	30 3%*	37 5%	23 4%
07	168 9%	11 11%	22 10%	22 9%	48 11%	52 8%	11 5%*	115 9%	2 5%~	5 10%	32%~	3 13%~	6 10%~	18 14%	11 7%	153 9%	96 10%	69 9%	61 9%
08	333 18%	15 15%	60 28%*	37 15%	73 17%	97 15%*	42 20%	242 18%	7 19%~	9 16%	12%~	1 13%~	6 33%~	16 12%*	28 18%	295 18%	182 18%	139 17%	114 17%
09	332 18%	22 22%	31 14%	43 18%	74 18%	123 19%	34 16%	250 19%*	7 19%~	9 16%	~	5 11%~	2 6%~	27 20%	24 15%	300 18%	192 19%	130 16%	124 19%
BEST SPECIALIST POSSIBLE	783 42%	35 35%	76 35%*	99 41%	163 39%	289 46%*	101 49%*	539 41%	17 46%~	26 45%	44%~	4 49%~	24 38%~	12 40%	54 40%	77 50%*	676 41%*	435 43%	332 42%

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	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER				
		18 OHP TOT ADLT	25 TO TO	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK WHT	NATV OR AFR- AMER	AMER IAN	IND/ PAC ILND	ALSK NATV	MUL- OTHER TI	HIS- PAN- IC	HIS- PAN- IC	EX & NOT GOOD FAIR & GOOD POOR	FE- MALE MALE			
#8-10 (NET)	1447 78%	72 73%	167 77%	180 75%	311 74%*	509 81%*	177 85%*	1031 78%	31 84%~	44 77%	6 56%~	35 73%~	25 78%~	97 72%	129 83%	1272 77%	809 80%*	601 75%*	510 78%	911 78%
9-10 (NET)	1115 60%	57 57%	107 50%*	143 60%	238 57%	412 65%*	135 65%	789 60%	24 65%~	35 61%	4 44%~	29 60%~	14 45%~	81 60%	101 65%	977 59%	627 62%	463 58%	396 60%	701 60%
NOT ANSWERED	18		1	1	4	6	3	12		1				3	1	15	8	6	4	12
VALID CASES NUMBER OF RESPONDENTS	1862 1880 100%	99 99 100%	216 217 100%	240 241 100%	420 424 100%	632 638 100%	207 210 100%	1325 1337 100%	37 37 100%	57 58 100%	10 48 100%	48 32 100%	32 137 100%	134 137 100%	155 156 100%	1646 1661 100%	1014 1022 100%	798 804 100%	655 659 100%	1171 1183 100%
MEAN	8.44	8.35	8.35	8.28	8.27	8.60	8.78	8.42	8.59	8.39	8.10	8.46	8.10	8.30	8.77	8.41	8.57	8.30	8.47	8.43
p stat_(*=Sig @ p<=.05)		.676	.451	.251	.065	.010*	.002*	.496		~.882	~	~	~	.418	.013*	.123	.002*	.011*	.639	.852

[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	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTC AMER	BLCK OR AFR-	NATV HAW/ AS- IAN	AMER PAC ILND	ALSK NATV	MUL- OTHR	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY GOOD & POOR	FAIR & POOR	FE- MALE MALE	
Q28	YES	940 19%	84 18%	184 23%*	147 19%	191 19%	248 18%	55 12%*	643 18%	19 20%	34 18%	7 33%~	8 7%*	16 22%	79 23%*	87 15%*	810 19%	628 19%	279 18%	340 17%*	573 19%
	NO	4130 81%	373 82%	624 77%*	611 81%	833 81%	1162 82%	410 88%*	2840 82%	74 80%	158 82%	14 67%~	102 93%*	55 78%	266 77%*	490 85%*	3482 81%	2759 81%	1258 82%	1655 83%*	2390 81%
	NOT ANSWERED	277	10	8	8	8	33	18	60	3	6	1	2	2	5	12	72	50	37	33	58
VALID CASES		5071	457	808	759	1024	1410	465	3484	93	192	20	111	71	345	576	4292	3387	1537	1995	2963
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE							RACE							ETHNIC- ITY	HEALTH STATUS	GENDER			
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	NATV HAW/ AS- AMER	AMER IAN	IND/ PAC ILND	ALSK NATV	MUL- OTH	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY GOOD & POOR	FE- MALE		
Q29	NEVER	81 9%	4 4%*	13 7%	17 12%	19 10%	17 7%	5 10%	45 7%*	2 ~	2 6%~	1 ~	5 ~	17 34%~	2 22%*	72 9%	50 8%	25 9%	32 10%	43 8%	
	SOMETIMES	308 34%	27 33%	65 36%	44 31%	65 35%	80 33%	17 31%	213 34%	7 37%~	11 32%~	1 20%~	5 55%~	2 13%~	26 33%	29 34%	265 34%	202 33%	97 37%	98 29%*	202 36%*
	USUALLY	308 34%	33 40%	68 37%	54 38%	57 31%	70 29%	17 32%	220 35%	5 26%~	10 28%~	2 36%~	2 19%~	3 19%~	23 29%	32 37%	263 33%	207 33%	92 35%	107 32%	193 35%
	ALWAYS	219 24%	19 23%	36 20%	28 20%	45 24%	71 30%*	15 27%	147 24%	7 37%~	12 35%~	3 44%~	2 26%~	6 35%~	13 17%	22 26%	189 24%	161 24%	52 20%	94 28%*	120 22%*
	#ALWAYS + USUALLY (NET)	527 58%	51 63%	104 57%	82 58%	102 55%	141 59%	32 59%	367 59%	12 63%~	22 63%~	5 80%~	4 45%~	9 54%~	36 45%*	54 63%	452 57%	368 59%	143 54%	201 61%	314 56%
	TOP BOX SCORE	219 24%	19 23%	36 20%	28 20%	45 24%	71 30%*	15 27%	147 24%	7 37%~	12 35%~	3 44%~	2 26%~	6 35%~	13 17%	22 26%	189 24%	161 24%	52 20%	94 28%*	120 22%*
	NOT ANSWERED	21	1	1	4	4	8	2	17					1	1	18	8	10	6	14	
VALID CASES	NUMBER OF RESPONDENTS	916 937 100%	82 83 100%	182 183 100%	143 147 100%	187 191 100%	238 246 100%	54 56 100%	625 642 100%	19 19 100%	35 35 100%	6 6 100%	9 9 100%	16 16 100%	79 80 100%	85 86 100%	789 807 100%	620 628 100%	265 275 100%	331 337 100%	558 572 100%

[ASKED IF Q28 = YES]

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IND/ PAC IAN	ALSK ILND	MUL- NATV OTHR	TI	HIS- PAN- IC	NOT GOOD POOR	EX & VERY & GOOD FAIR & POOR	FE- MALE	MALE			
Q30	YES	1355 27%	119 26%	220 27%	196 26%	282 28%	373 27%	116 25%	866 25%*	38 41%*	52 27%	6 29%~	26 24%	23 34%	96 28%	192 34%*	1106 26%*	868 26%*	446 29%*	483 24%*	840 29%*
	NO	3679 73%	341 74%	581 73%	560 74%	728 72%	1030 73%	342 75%*	2600 75%*	55 59%*	140 73%	14 71%~	83 76%	45 66%	246 72%	381 66%*	3158 74%*	2504 74%*	1075 71%*	1510 76%*	2094 71%*
	NOT ANSWERED	314	7	15	11	22	39	25	78	3	6	1	4	5	8	15	100	65	53	35	87
VALID CASES	NUMBER OF RESPONDENTS	5034 5348 100%	460 467 100%	801 816 100%	756 767 100%	1010 1032 100%	1404 1443 100%	458 483 100%	3466 3544 100%	93 96 100%	192 198 100%	20 21 100%	109 113 100%	68 73 100%	342 350 100%	573 588 100%	4264 4364 100%	3372 3437 100%	1521 1574 100%	1993 2028 100%	2934 3021 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 OT1	AGE							RACE							ETHNIC- ITY	HEALTH STATUS	GENDER			
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	IND/ PAC ILND	ALSK NATV	MUL- OTH TI	HIS- PAN- IC	NOT GOOD IC	EX & VERY & GOOD POOR	FE- MALE MALE			
Q31	NEVER	40 3%	2 2%	6 3%	8 4%	12 4%	7 2%	3 3%	26 3%	~	~	~	9%~ 14%~	5 6%	2 1%*	37 3%*	27 3%	13 3%	17 4%	21 3%	
	SOMETIMES	235 18%	29 25%	30 14%	40 21%	51 19%	56 16%	19 18%	141 17%	7 20%~	20 40%*	2 27%~	4 16%~	2 7%~	21 22%	31 17%	195 18%	143 17%	87 20%	76 16%	153 19%
	USUALLY	385 29%	36 32%	73 34%	56 29%	78 29%	97 27%	25 23%	235 28%	13 37%~	9 18%*	3 37%~	8 30%~	4 17%~	21 23%	70 39%*	291 27%*	232 28%	135 32%	118 25%	254 31%*
	ALWAYS	648 50%	48 42%	105 49%	88 46%	130 48%	201 56%*	60 56%	438 52%*	15 43%~	21 42%	3 36%~	11 45%~	15 62%~	47 50%	78 43%	551 51%*	436 52%*	194 45%*	256 55%*	381 47%*
	#ALWAYS + USUALLY (NET)	1034 79%	84 73%	178 83%	144 75%	209 77%	298 83%*	84 79%	673 80%	28 80%~	31 60%*	5 73%~	19 75%~	19 79%~	69 72%	147 82%	842 78%	669 80%	329 77%	374 80%	635 79%
	TOP BOX SCORE	648 50%	48 42%	105 49%	88 46%	130 48%	201 56%*	60 56%	438 52%*	15 43%~	21 42%	3 36%~	11 45%~	15 62%~	47 50%	78 43%	551 51%*	436 52%*	194 45%*	256 55%*	381 47%*
	NOT ANSWERED	45	2	4	5	11	12	9	23	3	1	2	1	1	12	32	29	13	15	29	
VALID CASES	1308	115	215	192	272	361	106	841	35	51	7	25	24	95	180	1073	838	430	467	809	
NUMBER OF RESPONDENTS	1353	117	219	197	283	373	115	864	38	52	7	27	24	96	192	1105	867	443	482	838	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q30 = YES]

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IND/ PAC IAN	ALSK ILND	MUL- NATV OTHr	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FE- MALE			
Q32	NEVER	17 1%	1 0.9%	2 1%	4 2%	3 1%	6 2%	1 0.9%	12 1%	1 3%~	2 4%	~	~	1 5%~	~	15 1%	11 1%	6 1%	7 2%	9 1%	
	SOMETIMES	67 5%	6 5%	15 7%	9 5%	15 6%	16 4%	6 6%	38 5%	2 6%~	6 12%	~	~	~	10%	9 11 6%	54 44 5%	23 23 5%	31 7%	36 4%	
	USUALLY	238 18%	29 26%	43 20%	43 23%	43 16%	56 15%	13 12%	147 17%	9 26%~	9 17%	2 32%~	4 15%~	4 15%~	10 11%*	46 25%*	185 17%	148 18%	83 19%	68 15%*	165 20%*
	ALWAYS	986 75%	78 68%	154 72%	136 71%	211 77%	284 79%	87 81%	644 77%	23 66%~	34 67%	5 68%~	21 85%~	19 80%~	75 79%	125 68%*	817 76%	633 76%	316 74%	360 77%	601 74%
	#ALWAYS + USUALLY (NET)	1224 94%	107 94%	197 92%	179 93%	255 93%	340 94%	100 93%	790 94%	32 91%~	43 84%	7 100%~	25 100%~	23 95%~	85 90%	171 94%	1002 93%	781 93%	400 93%	428 92%	766 94%
	TOP BOX SCORE	986 75%	78 68%	154 72%	136 71%	211 77%	284 79%	87 81%	644 77%	23 66%~	34 67%	5 68%~	21 85%~	19 80%~	75 79%	125 68%*	817 76%	633 76%	316 74%	360 77%	601 74%
	NOT ANSWERED	45	3	5	5	10	11	8	24	3	1	2	2	2	10	33	31	15	17	27	
VALID CASES	1308	114	214	192	273	362	107	840	35	51	7	25	24	94	182	1072	836	428	465	811	
NUMBER OF RESPONDENTS	1353	117	219	197	283	373	115	864	38	52	7	27	24	96	192	1105	867	443	482	838	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q30 = YES]

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER		
OHP	18	25	35	45	55	65	OR	HAW/	IND/	MUL-	PAN-	PAN-	&	&	FE-			
TOT	TO	TO	TO	TO	TO	AND	AFR-	AS-	PAC	ALSK	MUL-	PAN-	&	&	FE-			
ADLT	24	34	44	54	64	OVER	WHT	AMER	IAN	ILND	NATV	OTHR	TI	IC	IC	MALE	MALE	
Q33	YES	1892	189	304	283	383	550	124	1262	43	55	7	31	28	164	222	1592	1252 579 758 1094
		38%	42%	38%	38%	38%	40%	26%*	36%*	47%	29%*	39%~	28%*	41%	49%*	40%	37%	37% 38% 38% 37%
	NO	3118	262	498	461	632	843	343	2206	48	139	12	80	41	172	339	2668	2098 943 1217 1839
		62%	58%	62%	62%	62%	60%	74%*	64%*	53%	71%*	61%~	72%*	59%	51%*	60%	63%	63% 62% 62% 63%
	NOT ANSWERED	338	16	14	22	17	50	16	77	5	4	2	2	4	13	28	104	87 52 53 88
VALID CASES	NUMBER OF RESPONDENTS	5010	451	802	745	1015	1393	467	3467	91	194	19	111	69	337	560	4260	3350 1522 1975 2933
		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437 1574 2028 3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100% 100% 100% 100%

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

	BANT OT1	AGE							RACE							ETHNIC- ITY	HEALTH STATUS	GENDER			
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IND/ PAC IAN	ALSK ILND	MUL- NATV OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	FE- MALE MALE		
PQ34	NEVER	101 2%	4 0.9%*	15 2%	15 3%	27 2%	26 2%	8 2%	55 2%*	3 3%	6 3%	1 ~0.7%	3 5%	15 5%*	10 2%	84 2%	58 2%*	38 3%	45 2%	53 2%	
	SOMETIMES	319 6%	51 11%*	58 7%	44 6%	61 6%	77 6%	22 5%	192 6%*	6 7%	13 7%	1 7%~	6 5%	2 3%	37 11%*	51 9%*	254 6%*	198 6%*	114 8%*	134 7%	179 6%
	USUALLY	712 14%	66 15%	119 15%	110 15%	152 15%	205 15%	40 9%*	501 15%	17 19%	22 11%	3 17%~	12 11%	8 12%	47 14%	74 13%	613 15%	482 15%	213 14%	285 15%	416 14%
	ALWAYS	3808 77%	326 73%*	607 76%	566 77%	761 76%	1059 77%	386 84%*	2671 78%*	63 71%	151 79%	14 75%~	92 84%	54 80%	236 70%*	414 75%	3253 77%	2579 78%	1125 75%	1482 76%	2245 78%
	#ALWAYS + USUALLY (NET)	4520 91%	392 88%*	726 91%	676 92%	913 91%	1264 92%	426 93%	3172 93%*	80 90%	174 90%	18 93%~	104 94%	62 92%	283 85%*	487 89%*	3865 92%*	3060 92%*	1338 90%*	1767 91%	2661 92%
	TOP BOX SCORE	3808 77%	326 73%*	607 76%	566 77%	761 76%	1059 77%	386 84%*	2671 78%*	63 71%	151 79%	14 75%~	92 84%	54 80%	236 70%*	414 75%	3253 77%	2579 78%	1125 75%	1482 76%	2245 78%
	NOT ANSWERED	73	4	3	10	14	27	9	48	2	2		1	2	1	11	56	35	30	28	41
VALID CASES	4940	447	799	735	1001	1366	457	3419	89	192	19	110	67	335	549	4204	3316	1490	1947	2892	
NUMBER OF RESPONDENTS	5013	451	802	745	1015	1393	466	3467	91	194	19	111	69	336	560	4260	3351	1520	1975	2933	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

	BANT OT1	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTC AFR- AMER	BLCK OR AMER	NATV HAW/ IAN	AMER PAC ILND	IND/ ALSK NATV	MUL- OTH TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY FAIR & POOR	FE- MALE	FE- MALE	
Q35																					
WORST HEALTH PLAN POSSIBLE		34 0.7%	2 0.4%	5 0.7%	5 0.7%	12 1%	5 0.4%*	2 0.5%	23 0.7%	1 1%	~ ~	2 10%~0.8%	1 3%~	2 2%	3 2%	3 0.9%	30 ~0.7%	12 0.4%*	20 1%*0.9%	18 0.5%	15 0.5%
01		34 0.7%	3 0.6%	4 0.5%	8 1%	7 0.8%	10 0.8%		21 ~0.6%		~	1 3%~	~	1 2%	6 2%	3 2%	29 0.6% 0.7%	15 0.5%*	19 1%*0.7%	13 0.7%	19 0.7%
02		53 1%	4 0.9%	10 1%	7 0.9%	14 1%	14 1%	2 0.5%*	42 1%		~	~ ~	~ 2%	2 2%	5 2%	52 ~1%*	33 1%	16 1%	15 0.8%	36 1%	
03		65 1%	2 0.4%*	8 1%	15 2%	21 2%*	10 0.7%*	5 1%	41 1%	2 2%	3 2%	~ ~0.8%	1 4%	3 2%	6 2%	1 0.2%*	56 1%	28 0.9%*	31 2%*	20 1%	42 1%
04		109 2%	6 1%	23 3%	15 2%	26 3%	31 2%	4 0.9%*	87 3%*		~	2 1%	1 6%~0.8%	1 5%	7 2%	3 0.6%*	103 3%*	50 2%*	58 4%*	48 3%	58 2%
05		391 8%	33 7%	75 10%	61 9%	89 9%	98 7%	20 4%*	279 8%	2 2%*	5 3%*	1 7%~	9 9%	4 6%	34 10%	42 8%	334 8%	240 7%*	143 10%*	148 8%	234 8%
06		309 6%	32 7%	60 8%	50 7%	73 8%	70 5%*	17 4%*	222 7%	4 5%	11 6%	1 6%~	6 11%	7 8%	28 4%*	21 7%*	279 6%	195 7%	107 7%	125 7%	177 6%
07		627 13%	67 15%	129 17%*	103 14%	106 11%*	153 11%*	46 10%	447 13%	11 13%	24 13%	~ ~12%	12 14%	9 15%	50 9%*	551 13%*	422 13%	184 12%	232 12%	378 13%	
08		962 20%	86 19%	166 22%	153 21%	186 19%	249 19%	101 23%	694 21%*	17 20%	36 20%	2 10%~	18 17%	7 10%*	65 19%	96 18%	835 20%	672 21%*	268 18%*	376 20%	568 20%
09		777 16%	90 20%*	109 14%	112 16%	159 16%	229 17%	62 14%	528 16%	17 20%	30 17%	1 7%~	12 12%	8 11%	49 15%	103 19%	647 16%	537 17%	222 15%	310 16%	454 16%
BEST HEALTH PLAN POSSIBLE		1463 30%	120 27%	181 24%*	185 26%*	280 29%	474 35%*	186 42%*	945 28%*	33 38%	68 38%*	10 51%~	42 40%*	42 33%	81 24%*	225 41%*	1182 29%*	1018 32%*	410 28%*	606 32%	833 30%
#8-10 (NET)		3202 66%	296 67%	456 59%*	450 63%*	625 64%	952 71%*	348 78%*	2166 65%*	67 77%*	133 75%*	13 68%~	73 69%	37 54%*	196 58%*	424 78%*	2665 65%*	2226 69%*	900 61%*	1292 68%*	1855 66%

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	AGE						RACE										ETHNIC- ITY	HEALTH STATUS	GENDER
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER PAC IAN	ALSK ILND	MUL- NATV OTH	HIS- PAN- TI	HIS- PAN- TI	EX & NOT GOOD & GOOD	VERY GOOD & POOR	FE- MALE MALE		
9-10 (NET)	2240	210 47%	289 38%*	297 42%*	439 45%	703 52%*	247 56%*	1472 44%*	50 57%*	98 55%*	11 58%~	54 52%	30 44%	130 39%*	328 60%*	1829 45%*	1554 48%*	632 43%*	916 48%	1287 46%
NOT ANSWERED	524	22	47	54	59	100	39	215	9	20	2	8	6	14	44	266	216	95	117	208
VALID CASES NUMBER OF RESPONDENTS	4824 5348	445 467	769 816	713 767	973 1032	1343 1443	444 483	3329 3544	87 96	178 198	19 21	105 113	67 73	336 350	544 588	4098 4364	3221 3437	1479 1574	1911 2028	2813 3021
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
MEAN	7.94	8.02	7.66	7.76	7.75	8.16	8.51	7.86	8.46	8.46	7.49	8.16	7.38	7.53	8.54	7.87	8.09	7.62	7.99	7.92
p stat_(*=Sig @ p<=.05)		.333	.000*	.012*	.004*	.000*	.000*	.000*	.019*	.000*										.512

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	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ AS-	AMER AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY FAIR & POOR	FE- MALE MALE		
Q35A	YES	623 12%	17 4%*	37 5%*	67 9%*	129 13%	227 16%*	123 26%*	439 13%	15 16%	14 7%*	3 14%~	14 13%	13 19%	65 19%*	32 6%*	559 13%*	228 7%*	366 24%*	235 12%	373 13%
	NO	4429 88%	442 96%*	769 95%*	691 91%*	881 87%	1183 84%*	343 74%*	3040 87%	79 84%	179 93%*	17 86%~	96 87%	57 81%	279 81%*	539 94%*	3726 87%*	3149 93%*	1172 76%*	1762 88%	2579 87%
	NOT ANSWERED	296	7	10	8	22	33	17	65	2	5	2	2	2	6	16	80	60	35	31	69
VALID CASES		5052	460	806	759	1010	1410	466	3479	94	193	19	111	71	344	572	4284	3377	1539	1997	2952
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AS- AMER	AMER IND/ PAC	ALSK ILND	MUL- NATV OTHR	TI	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FE- HIS- PAN- IC	MALE MALE			
Q35B NEVER		93 16%	2 13%~	4 10%~	14 22%~	29 23%*	25 12%*	15 13%	63 15%	1 7%~	3 24%~	2 ~ 12%~	5 38%~	12 19%	2 6%~	85 16%	24 11%*	65 19%*	35 16%	54 15%	
SOMETIMES		87 15%	3 19%~	10 28%~	8 13%~	17 14%	23 11%*	18 16%	48 12%*	3 20%~	2 15%~	1 40%~	1 6%~	3 23%~	13 21%	8 27%~	70 13%*	29 13%	54 15%	31 14%	53 15%
USUALLY		137 23%	7 43%~	6 16%~	11 18%~	21 17%*	50 23%	38 33%*	98 23%	4 27%~	3 24%~	1 ~ 34%~	3 20%~	12 19%	6 20%~	123 23%	53 24%	76 22%	45 20%	88 25%	
ALWAYS		277 47%	4 25%~	16 46%~	30 48%~	59 47%	116 54%*	44 38%*	206 50%*	7 47%~	5 37%~	2 60%~	7 49%~	3 20%~	25 40%	14 46%~	255 48%	112 52%	152 44%	114 51%	160 45%
#ALWAYS + USUALLY (NET)		414 70%	11 68%~	22 62%~	42 65%~	80 64%	165 77%*	82 71%	304 73%*	11 73%~	8 61%~	2 60%~	12 82%~	6 39%~	37 59%	20 67%~	378 71%	165 76%*	228 66%*	158 71%	247 70%
TOP BOX SCORE		277 47%	4 25%~	16 46%~	30 48%~	59 47%	116 54%*	44 38%*	206 50%*	7 47%~	5 37%~	2 60%~	7 49%~	3 20%~	25 40%	14 46%~	255 48%	112 52%	152 44%	114 51%	160 45%
NOT ANSWERED		36	1	1	4	5	15	8	28	1	1	1	2	2	2	31	13	22	13	22	
VALID CASES NUMBER OF RESPONDENTS		594 630 100%	16 17 100%	36 37 100%	64 68 100%	125 130 100%	214 229 100%	115 123 100%	415 443 100%	15 15 100%	13 14 100%	3 3 100%	14 15 100%	14 15 100%	63 65 100%	30 32 100%	532 563 100%	217 230 100%	347 369 100%	224 237 100%	354 376 100%

[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	AGE						RACE										ETHNIC- ITY	HEALTH STATUS	GENDER	
		18 OHP TOT ADLT	25 TO TO	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTH	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY FAIR & POOR	FE- MALE MALE		
Q35C	YES	804 16%	38 8%*	85 11%*	110 14%	195 20%*	248 18%*	99 22%*	555 16%	20 22%	23 12%	4 24%~	16 15%	16 24%	72 21%*	63 11%*	703 17%*	373 11%*	397 26%*	257 13%*	530 18%*
	NO	4180 84%	416 92%*	718 89%*	647 86%	798 80%*	1140 82%*	355 78%*	2884 84%	70 78%	169 88%	13 76%~	91 85%	52 76%	271 79%*	500 89%*	3531 83%*	2966 89%*	1113 74%*	1716 87%*	2381 82%*
	NOT ANSWERED	364	13	13	11	40	55	29	105	6	6	3	6	5	6	25	130	98	65	55	110
VALID CASES		4984	454	803	756	992	1388	454	3439	90	192	18	107	68	344	563	4234	3339	1509	1973	2911
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AS- AMER	AMER IND/ PAC	ALSK IAN	MUL- ILND NATV	TI OTHR	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FE- MALE				
Q35D	NEVER	126 16%	3 8%~	18 22%~	20 20%	43 23%*	28 11%*	6 7%*	83 16%	1 5%~	4 18%~	3 ~ 18%~	4 34%~	16 23%	7 12%	110 16%	58 16%	63 17%			
	SOMETIMES	136 18%	6 16%~	12 15%~	29 28%*	36 19%~	38 15%~	11 11%	92 17%	3 15%~	4 17%~	1 28%~	3 18%~	2 17%~	14 19%	15 25%	117 17%	54 15%	75 20%		
	USUALLY	182 23%	12 33%~	24 29%~	20 20%	37 20%~	58 24%~	22 24%	128 24%	4 20%~	5 21%~	1 28%~	2 15%~	3 26%~	19 27%	9 16%	163 24%	87 24%	86 23%		
	ALWAYS	333 43%	16 42%~	28 34%~	34 33%*	70 38%~	119 49%*	54 57%*	233 43%	12 60%~	10 44%~	2 43%~	8 49%~	3 23%~	22 31%*	28 47%	287 42%	166 45%	154 41%		
	#ALWAYS + USUALLY (NET)	514 66%	28 75%~	52 63%	54 52%*	106 57%*	177 73%*	76 82%*	362 67%	16 80%~	15 65%~	3 72%~	10 64%~	6 49%~	41 58%	37 64%	451 66%	252 69%	240 64%		
	TOP BOX SCORE	333 43%	16 42%~	28 34%~	34 33%*	70 38%~	119 49%*	54 57%*	233 43%	12 60%~	10 44%~	2 43%~	8 49%~	3 23%~	22 31%*	28 47%	287 42%	166 45%	154 41%	110 45%	216 42%
	NOT ANSWERED	32	1	3	6	7	7	7	21			1		4	1	4	27	13	18	13	18
VALID CASES		776	37	82	104	186	243	93	537	20	23	4	16	12	71	59	678	364	377	247	512
NUMBER OF RESPONDENTS		808	38	85	110	193	250	100	558	20	23	5	16	16	72	63	705	377	395	260	530
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35C = YES]

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

	BANT OT1	AGE							RACE							ETHNIC- ITY	HEALTH STATUS	GENDER			
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK	NATV	AMER	HAW/	IND/	MUL-	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR	FE- MALE			
									OR	AS-	PAC	ALSK	ILND	NATV	OTHR	TI					
Q35E	ALWAYS	188	8 4%	26 2%*	27 3%	37 4%	53 4%	20 4%	106 3%*	4 4%	4 2%	~	4 4%	2 3%	16 5%	36 6%*	134 3%*	99 3%*	77 5%*	63 3%	113 4%
	USUALLY	208	16 4%	39 4%	31 5%	46 4%	47 5%	21 5%	114 3%*	3 3%	10 5%	2 10%~	8 8%	3 4%	20 6%	37 7%*	157 4%*	106 3%*	99 6%*	74 4%	127 4%
	SOMETIMES	849	92 17%	145 20%	127 18%	156 17%	199 16%	104 14%*	562 22%*	14 16%*	39 15%	4 20%	27 17%~	12 25%	70 18%	98 21%	722 17%	505 17%	308 20%*	297 15%*	535 18%*
	NEVER	3747	339 75%	588 74%	559 75%	759 76%	1108 79%*	320 69%*	2671 77%*	74 78%	140 73%	15 72%~	70 64%*	51 74%	230 68%*	394 70%*	3232 76%*	2631 79%*	1046 68%*	1532 79%*	2161 74%*
# NEVER + SOMETIMES (NET)		4596	431 92%	733 95%*	685 92%	915 92%	1307 93%	425 91%	3232 94%*	88 93%	179 93%	18 90%~	97 89%	64 93%	300 89%	492 87%*	3955 93%*	3136 94%*	1355 89%*	1829 93%*	2696 92%
TOP BOX SCORE		3747	339 75%	588 74%	559 75%	759 76%	1108 79%*	320 69%*	2671 77%*	74 78%	140 73%	15 72%~	70 64%*	51 74%	230 68%*	394 70%*	3232 76%*	2631 79%*	1046 68%*	1532 78%*	2161 74%*
NOT ANSWERED		357	11	18	24	34	36	17	92	1	5	1	4	4	14	23	118	97	43	63	84
VALID CASES		4991	456	798	743	998	1407	466	3452	95	193	20	109	69	336	565	4246	3340	1531	1965	2937
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	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 OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AS- AMER	AMER IND/ PAC	ALSK ILND	MUL- NATV OTHr	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FE- MALE MALE			
Q35F ALWAYS		68 1%	2 0.3%*	9 1%	8 1%	24 2%*	16 1%	6 1%	38 1%*	2 2%	4 2%	1 ~0.7%	2 3%	8 2%	7 1%	57 1%	29 0.9%*	36 2%*	28 1%	37 1%	
USUALLY		110 2%	11 2%	20 2%	18 2%	19 2%	29 2%	9 2%	76 2%	1 ~0.5%*	1 ~0.7%	1 1%	15 4%*	8 1%	93 2%	47 1%*	57 4%*	24 1%*	80 3%*		
SOMETIMES		703 14%	70 15%	126 16%	96 13%	149 15%	177 13%*	74 16%	498 14%	11 12%	16 8%*	1 5%~	15 13%	13 18%	64 19%*	67 12%	612 14%	385 12%*	294 19%*	225 11%*	468 16%*
NEVER		4114 82%	373 82%	646 81%	623 84%	813 81%	1183 84%*	377 81%	2836 82%	82 86%	172 89%*	19 95%~	94 85%	54 78%	252 74%*	491 86%*	3484 82%	2882 86%*	1144 75%*	1693 86%*	2351 80%*
#NEVER + SOMETIMES (NET)		4818 96%	443 97%	772 96%	719 97%	962 96%	1360 97%	451 97%	3335 97%	93 98%	188 98%	20 100%~	108 99%	67 96%	316 93%*	558 97%	4096 96%	3267 98%*	1438 94%*	1918 97%*	2819 96%*
TOP BOX SCORE		4114 82%	373 82%	646 81%	623 84%	813 81%	1183 84%*	377 81%	2836 82%	82 86%	172 89%*	19 95%~	94 85%	54 78%	252 74%*	491 86%*	3484 82%	2882 86%*	1144 75%*	1693 86%*	2351 80%*
NOT ANSWERED		353	11	16	22	27	38	18	95	1	5	1	3	3	11	16	118	95	43	57	84
VALID CASES NUMBER OF RESPONDENTS		4995 5348 100%	456 467 100%	800 816 100%	745 767 100%	1005 1032 100%	1405 1443 100%	465 483 100%	3449 3544 100%	95 96 100%	193 198 100%	20 21 100%	110 113 100%	70 73 100%	339 350 100%	572 588 100%	4246 4364 100%	3342 3437 100%	1531 1574 100%	1971 2028 100%	2937 3021 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	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTC AFR- AMER	1	BLCK OR AFR- AMER	NATV HAW/ AS- IAN	AMER IND/ PAC ILND	ALSK NATV	MUL- TI OTHR	HIS- PAN- IC	NOT GOOD & GOOD	HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR
Q35G ALWAYS	56 1%	1 0.2%*	4 0.5%*	7 0.9%	19 2%*	17 1%	7 1%	33 1%	1 1%	1 0.5%	1 ~0.7%	1 6%	4 2%	6 1%	9 1%	46 0.7%*	25 2%	25 0.8%	16 1%	39 1%
USUALLY	69 1%	3 0.7%	11 1%	15 2%	14 1%	15 1%	6 1%	51 1%	1 ~0.5%	1 ~	1 ~	1 ~	9 3%	3 0.5%*	61 1%	30 0.9%*	37 2%*	21 1%	44 1%	
SOMETIMES	502 10%	46 10%	110 14%*	82 11%	92 9%	126 9%	35 7%*	368 11%*	4 4%*	6 3%*	1 3%~	8 8%	10 15%	43 13%	38 7%*	445 10%*	280 8%*	207 13%*	147 7%*	347 12%*
NEVER	4371 87%	408 89%	677 84%*	643 86%	883 88%	1245 89%	417 90%	3004 87%	90 95%*	184 96%*	20 97%~	102 92%	56 80%	276 83%*	527 91%*	3698 87%*	3010 90%*	1269 83%*	1790 91%*	2512 85%*
#NEVER + SOMETIMES (NET)	4874 97%	455 99%*	787 98%	725 97%	975 97%	1371 98%	452 97%	3372 98%	94 99%	189 99%*	21 100%~	111 99%*	67 94%	319 95%	565 98%	4143 97%	3291 98%*	1476 96%*	1937 98%*	2859 97%
TOP BOX SCORE	4371 87%	408 89%	677 84%*	643 86%	883 88%	1245 89%	417 90%	3004 87%	90 95%*	184 96%*	20 97%~	102 92%	56 80%	276 83%*	527 91%*	3698 87%*	3010 90%*	1269 83%*	1790 91%*	2512 85%*
NOT ANSWERED	349	8	13	20	24	41	18	88	1	7	2	2	16	11	114	91	36	54	79	
VALID CASES NUMBER OF RESPONDENTS	4999 5348 100%	459 467 100%	803 816 100%	747 767 100%	1008 1032 100%	1402 1443 100%	465 483 100%	3456 3544 100%	95 96 100%	191 198 100%	21 21 100%	111 113 100%	71 73 100%	334 350 100%	577 588 100%	4250 4364 100%	3346 3437 100%	1538 1574 100%	1974 2028 100%	2942 3021 100%

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER				
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AS- AMER	AMER IAN	IND/ PAC ILND	ALSK NATV	MUL- OTH TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	FE- MALE MALE	
Q35H #YES DEFINITELY	3475 70%	316 70%	529 66%*	500 67%	713 72%	1012 72%*	347 75%*	2415 70%	65 69%	148 77%*	15 75%~	78 73%	42 59%*	218 65%*	419 75%*	2968 70%	2425 73%*	983 64%*	1371 70%	2071 71%
YES SOMEWHAT	1163 23%	119 26%	221 27%*	191 26%	207 21%*	306 22%	85 18%*	810 24%	22 23%	34 18%*	1 4%~	23 21%	23 33%	92 27%	115 21%	999 24%	729 22%*	407 27%*	460 24%	677 23%
NO	318 6%	19 4%*	53 7%	50 7%	72 6%	79 6%	30 6%	220 6%	7 7%	11 6%	4 22%~	7 6%	6 9%	25 7%	22 4%*	273 6%	160 5%*	145 9%*	121 6%	183 6%
NOT ANSWERED	392	13	14	26	40	46	22	99	2	5	1	5	1	15	32	124	123	39	77	90
VALID CASES NUMBER OF RESPONDENTS	4956 5348 100%	454 467 100%	802 816 100%	741 767 100%	992 1032 100%	1397 1443 100%	461 483 100%	3445 3544 100%	94 96 100%	193 198 100%	20 21 100%	108 113 100%	72 73 100%	335 350 100%	556 588 100%	4240 4364 100%	3314 3437 100%	1535 1574 100%	1951 2028 100%	2931 3021 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	AGE						RACE										ETHNIC- ITY	HEALTH STATUS	GENDER	
		18 OHP TOT ADLT	25 TO 24	35 TO 34	45 TO 44	55 TO 54	65 AND OVER	BLCK OR AFR- WHTC AMER	NATV HAW/ AS- AMER	AMER PAC IAN	IND/ PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY FAIR & POOR	FE- MALE MALE		
Q35I	YES	2936 58%	284 62%	493 61%	483 64%*	589 58%	795 56%*	233 50%*	2042 59%	53 57%	110 57%	7 39%~	68 61%	39 54%	192 57%	355 62%	2501 58%	2073 61%*	796 52%*	1033 52%*	1867 63%*
	NO	2084 42%	174 38%	320 39%	272 36%*	419 42%	617 44%*	233 50%*	1440 41%	40 43%	84 43%	11 61%~	43 39%	34 46%	147 43%	221 38%	1786 42%	1312 39%*	730 48%*	958 48%*	1091 37%*
	NOT ANSWERED	328	9	3	12	24	31	17	63	3	4	2	2	11	12	77	52	49	37	63	
VALID CASES		5020	458	813	755	1008	1412	466	3481	93	194	19	111	73	339	576	4287	3385	1525	1991	2958
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
								BLCK OR	NATV HAW/	AMER IND/											
	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	AFR- WHT	AS- AMER	PAC IAN	ALSK ILND	MUL- NATV	TI OTHR	HIS- IC	EX & NOT GOOD PAN- IC	FE- MALE					
Q35J	YES	2023 40%	177 38%	331 41%	331 43%*	422 41%	554 39%	173 36%	1384 40%	43 47%	82 42%	5 25%~	40 37%	30 41%	135 39%	1420 42%*	560 36%*	734 37%*	1266 43%*		
	NO	3019 60%	284 62%	480 59%	432 57%*	595 59%	867 61%	302 64%	2113 60%	49 53%	112 58%	15 75%~	67 63%	43 59%	210 61%	325 56%*	2591 60%	1979 58%*	992 64%*	1273 63%*	1697 57%*
	NOT ANSWERED	306	6	5	4	15	22	8	47	4	4	1	5	6	8	63	38	22	21	58	
VALID CASES	NUMBER OF RESPONDENTS	5042 5348 100%	461 467 100%	811 816 100%	763 767 100%	1017 1032 100%	1421 1443 100%	475 483 100%	3497 3544 100%	92 96 100%	194 198 100%	20 21 100%	108 113 100%	73 73 100%	344 350 100%	580 588 100%	4301 4364 100%	3399 3437 100%	1552 1574 100%	2007 2028 100%	2963 3021 100%

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

	BANT OT1	AGE							RACE							ETHNIC- ITY	HEALTH STATUS	GENDER		
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AS- AMER	AMER IND/ PAC	ALSK ILND	MUL- NATV OTHr	TI	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	FE- MALE MALE		
Q35K	NEVER	43 2%	3 2%	10 3%	6 2%	10 2%	10 2%	3 2%	24 2%	2 5%~	3 4%	~	2 4%~	1 2%~	4 3%	7 3%	33 2%	21 2%*	21 4%*	15 2%
	SOMETIMES	160 8%	20 12%	20 6%	31 10%	37 9%	34 6%	13 8%	105 8%	2 5%~	11 14%	~	2 4%~	1 3%~	10 7%	24 10%	130 8%	111 8%	46 9%	51 7%
	USUALLY	378 19%	34 20%	60 18%	66 21%	93 22%	89 17%	29 18%	252 19%	7 16%~	22 27%	1 21%~	3 8%~	9 33%~	24 18%	52 21%	315 19%	258 19%	108 20%	141 20%
	ALWAYS	1369 70%	117 67%	235 72%	216 68%	273 66%*	391 75%*	118 72%	954 71%	31 74%~	44 55%*	4 79%~	32 84%~	18 62%~	95 72%	161 66%	1174 71%	985 72%*	359 67%	503 71%
	#ALWAYS + USUALLY (NET)	1747 90%	151 87%	295 91%	282 88%	366 89%	479 92%	147 90%	1206 90%	38 90%~	66 82%	5 100%~	35 92%~	27 94%~	119 90%	212 87%	1489 90%	1243 90%	468 87%	644 91%
	TOP BOX SCORE	1369 70%	117 67%	235 72%	216 68%	273 66%*	391 75%*	118 72%	954 71%	31 74%~	44 55%*	4 79%~	32 84%~	18 62%~	95 72%	161 66%	1174 71%	985 72%*	359 67%	503 71%
	NOT ANSWERED	66	3	4	10	8	30	8	46	1	1		2	2	1	10	53	40	22	20
VALID CASES	1950	174	325	320	414	523	163	1335	42	80	5	38	29	133	243	1652	1375	535	710	
NUMBER OF RESPONDENTS	2016	177	329	330	422	553	171	1381	43	81	5	40	31	134	253	1705	1415	557	730	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

	BANT OT1	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTC AMER	NATV HAW/ AS- IAN	AMER PAC ILND	IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY FAIR & POOR	FE- MALE	FE- MALE	
Q35L ALWAYS	453 22%	33 15%*	72 21%	69 22%	94 23%	132 25%	45 25%	280 22%	19 38%*	13 15%*	2 21%~	12 27%~	5 20%~	35 20%	75 25%	364 22%	305 23%	138 20%	180 22%	268 23%
USUALLY	399 20%	57 26%*	66 20%	59 19%	72 18%	93 18%	43 24%	244 19%	8 16%	17 19%		8 ~ 19%~	5 19%~	31 17%	74 24%*	313 19%	271 21%*	118 17%	162 20%	231 20%
SOMETIMES	401 20%	56 26%*	71 21%	71 23%	77 19%	89 17%	21 12%*	229 18%*	7 14%	23 25%	2 18%~	4 10%~	9 32%~	32 18%~	73 24%*	303 18%*	271 21%	120 17%	143 18%*	243 21%
NEVER	785 39%	72 33%	129 38%	114 36%	166 41%	212 40%	70 39%	510 40%*	16 32%	37 41%	7 62%~	19 43%~	8 30%~	79 45%	80 27%*	668 41%*	452 35%*	310 45%*	329 40%	439 37%
#NEVER + SOMETIMES (NET)	1186 58%	128 59%	200 59%	185 59%	243 59%	301 57%	91 51%*	739 58%	23 46%	60 66%	8 79%~	23 54%~	17 62%~	111 63%	153 51%*	970 59%	723 56%*	430 63%*	472 58%	683 58%
TOP BOX SCORE	785 39%	72 33%	129 38%	114 36%	166 41%	212 40%	70 39%	510 40%*	16 32%	37 41%	7 62%~	19 43%~	8 30%~	79 45%	80 27%*	668 41%*	452 35%*	310 45%*	329 40%	439 37%
5	2856	239	459	433	576	850	269	2139	40	100	8	63	42	160	257	2542	2019	807	1147	1687
NOT ANSWERED	454	10	19	21	47	67	36	142	6	8	3	7	4	14	30	175	118	80	67	152
VALID CASES NUMBER OF RESPONDENTS	2038 5348 100%	218 467 100%	338 816 100%	313 767 100%	409 1032 100%	526 1443 100%	179 483 100%	1264 3544 100%	50 96 100%	90 198 100%	11 21 100%	43 113 100%	27 73 100%	177 350 100%	301 588 100%	1648 4364 100%	1299 3437 100%	686 1574 100%	814 2028 100%	1182 3021 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	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTC AMER	BLCK OR AFR-	NATV AMER HAW/ IND/ AS- PAC IAN	AMER PAC ILND	ALSK NATV	MUL- TI OTHR	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY FAIR & POOR	FE- MALE	FE- MALE
Q35M NEVER	740 37%	65 31%	119 34%	122 37%	166 38%	192 39%	59 36%	471 37%	18 35%	46 55%*	4 49%~	19 44%~	9 38%~	69 38%	80 29%*	625 38%*	442 34%*	288 41%*	329 41%*	402 34%*
SOMETIMES	378 19%	47 22%	62 18%	59 18%	88 20%	87 18%	25 15%	226 18%	11 22%	15 18%	1 9%~	8 18%~	4 17%~	41 22%	61 22%	301 18%	233 18%	133 19%	133 17%*	237 20%
USUALLY	368 18%	45 22%	69 20%	56 17%	78 18%	74 15%*	34 20%	229 18%	4 8%*	11 13%	2 19%~	6 13%~	4 17%~	29 16%	67 24%*	287 17%*	234 18%	126 18%	133 16%	226 19%
ALWAYS	542 27%	51 25%	99 28%	91 28%	104 24%	137 28%	47 28%	360 28%	18 35%	12 14%*	2 23%~	11 25%~	7 28%~	45 25%	72 26%	451 27%	379 29%*	153 22%*	210 26%	323 27%
#ALWAYS + USUALLY (NET)	909 45%	96 46%	168 48%	147 45%	182 42%	211 43%	80 49%	589 46%	22 43%	22 27%*	4 42%~	17 38%~	11 45%~	74 40%	138 50%	738 44%	613 48%*	279 40%*	343 43%	549 46%
TOP BOX SCORE	542 27%	51 25%	99 28%	91 28%	104 24%	137 28%	47 28%	360 28%	18 35%	12 14%*	2 23%~	11 25%~	7 28%~	45 25%	72 26%	451 27%	379 29%*	153 22%*	210 26%	323 27%
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	2876	250	452	421	553	882	290	2122	40	106	11	62	45	156	283	2537	2039	803	1156	1696
NOT ANSWERED	444	9	14	19	42	71	28	136	5	9	1	7	4	10	25	164	111	70	67	137
VALID CASES NUMBER OF RESPONDENTS	2028 5348 100%	208 467 100%	349 816 100%	328 767 100%	436 1032 100%	490 1443 100%	164 483 100%	1286 3544 100%	51 96 100%	83 198 100%	9 21 100%	44 113 100%	24 73 100%	184 350 100%	279 588 100%	1664 4364 100%	1287 3437 100%	701 1574 100%	805 2028 1187 3021	

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	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTC AFR- AMER	BLCK OR AMER	NATV HAW/ IAN	AMER IND/ ILND	ALSK NATV	MUL- OTH	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	FE- MALE	FE- MALE
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTC AFR- AMER	BLCK OR AMER	NATV HAW/ IAN	AMER IND/ ILND	ALSK NATV	MUL- OTH	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	FE- MALE	FE- MALE
Q35N EXTREMELY DIFFICULT	294 6%	16 4%*	41 5%	51 7%	70 8%	79 6%	29 8%	216 7%*	4 5%	8 5%	3 15%~	6 6%	3 6%	20 7%	22 4%*	257 7%*	152 5%*	136 10%*	103 6%	184 7%*
01	120 3%	5 1%*	24 3%	20 3%	28 3%	30 2%	10 3%	84 3%	1 1%	7 4%	1 3%~	~ ~	2 4%	8 3%	12 2%	103 3%	69 2%	49 4%*	37 2%	80 3%*
02	134 3%	6 1%*	35 5%*	21 3%	30 3%	35 3%	6 2%*	100 3%*	2 2%	3 2%	~ ~	3 3%	~ ~	12 4%	10 2%	119 3%*	84 3%	48 4%	49 3%	86 3%
03	169 4%	17 4%	25 3%	34 5%	37 4%	42 3%	11 3%	122 4%	3 3%	3 2%	2 12%~	3 3%	1 2%	14 5%	15 3%	146 4%	109 4%	56 4%	63 4%	104 4%
04	142 3%	15 3%	33 4%	23 3%	26 3%	32 3%	12 3%	106 3%*	2 2%	3 2%	~ ~	3 3%	2 3%	14 5%	11 2%	130 3%*	89 3%	54 4%	52 3%	87 3%
05	573 12%	59 14%	98 13%	90 13%	122 13%	154 13%	45 12%	407 13%*	11 13%	29 16%	3 17%~	15 15%	2 3%	35 11%	63 12%	495 13%*	374 12%	196 15%*	245 14%*	326 12%
06	238 5%	40 9%*	42 6%	44 6%	37 4%	56 5%	16 4%	156 5%	1 1%	12 7%	1 3%~	6 6%	2 3%	16 5%	35 7%	194 5%	165 5%	68 5%	100 6%	135 5%
07	395 8%	46 11%	73 10%	61 9%	85 9%	89 7%	35 9%	260 8%	7 8%	23 13%	2 10%~	6 6%	6 9%	31 10%	54 11%	335 9%	296 10%*	94 7%*	163 9%	230 9%
09	1234 26%	114 26%	155 21%*	158 23%*	216 24%	264 21%*	84 22%	706 23%*	15 17%*	49 28%	2 10%~	16 16%*	16 26%	51 17%*	125 24%	857 22%*	726 24%*	269 20%*	400 23%*	590 22%*
EXTREMELY EASY	1387 30%	118 27%	229 30%	190 27%	255 28%	444 36%*	128 34%	939 30%	40 46%*	40 23%*	5 29%~	41 41%*	41 45%*	28 34%	166 32%	1183 31%*	994 33%*	372 28%	551 31%*	824 31%*
#8-10 (NET)	2621 56%	232 53%	385 51%*	348 50%*	471 52%*	708 58%	212 56%	1646 53%*	55 64%	89 50%	7 39%~	58 57%	44 71%*	154 51%	291 56%	2040 53%*	1721 56%	641 48%*	951 54%*	1414 53%*
9-10 (NET)	2621 56%	232 53%	385 51%*	348 50%*	471 52%*	708 58%	212 56%	1646 53%*	55 64%	89 50%	7 39%~	58 57%	44 71%*	154 51%	291 56%	2040 53%*	1721 56%	641 48%*	951 54%*	1414 53%*

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	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
		18 TO ADLT	25 TO 24	35 TO 34	45 TO 44	55 TO 54	65 AND OVER	BLCK WHTC	OR AMER	NATV AS- IAN	AMER PAC	IND/ ILND	ALSK NATV	MUL- OTHR	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD IC	EX & VERY GOOD POOR	FAIR & POOR	FE- MALE	MALE
88	7	1	3	2	1			4		1						1	4	4	2	2	5
NOT ANSWERED	654	31	61	73	125	215	107	444	10	20	3	13	11	45	73	541	374	230	263	370	
VALID CASES NUMBER OF RESPONDENTS	4687 5348	436 467	754 816	691 767	905 1032	1227 1443	376 483	3095 3544	86 96	177 198	18 21	100 113	62 73	305 350	514 588	3819 4364	3059 3437	1342 1574	1762 2028	2646 3021	
100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
MEAN	7.15	7.32	6.94	6.82	6.87	7.26	7.20	6.98	7.75	7.07	5.97	7.39	8.00	6.92	7.41	7.02	7.30	6.50	7.15	7.00	
p stat_(*=Sig @ p<=.05)		.173	.051	.003*	.005*	.147	.749	.000*	.070	.744		~.434	.031*	.183	.029*	.000*	.000*	.000*	.975	.000*	

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER				
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTH TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD FAIR & GOOD POOR	EX & VERY GOOD & GOOD POOR	FE- MALE MALE	
Q36	EXCELLENT	476 10%	89 19%*	112 14%*	79 10%	76 7%*	94 7%*	16 3%*	291 8%*	15 16%	32 17%*	2 9%~	9 8%	5 8%	31 9%	77 13%*	384 9%*	475 14%*	219 ~ 11%*	254 9%*
	VERY GOOD	1201 24%	150 32%*	262 32%*	205 27%*	203 20%*	296 21%*	70 15%*	865 25%*	17 18%	50 26%	4 17%~	24 22%	13 18%	77 22%	122 21%	1051 24%*	1200 35%*	492 ~ 25%	696 24%
	GOOD	1764 35%	159 34%	293 36%	282 37%	367 36%	480 34%	161 34%	1245 36%	34 37%	74 38%	7 31%~	34 30%	23 32%	115 33%	201 35%	1516 35%	1762 51%~	708 ~ 35%	1041 35%
	FAIR	1155 23%	59 13%*	120 15%*	142 19%*	270 27%*	396 28%*	156 33%*	807 23%	18 20%	31 16%*	7 34%~	31 28%	18 26%	70 20%	150 26%	971 23%	1161 ~ 74%~	437 22%	708 24%
	POOR	411 8%	8 2%*	20 3%*	48 6%*	100 10%*	155 11%*	68 14%*	282 8%	8 9%	7 4%*	2 9%~	13 12%	12 16%	51 15%*	25 4%*	369 9%*	413 ~ 26%*	143 7%*	261 9%
	#EXCELLENT + VERY GOOD + GOOD (NET)	3440 69%	397 85%*	668 83%*	566 75%*	646 64%*	870 61%*	247 52%*	2401 69%	66 72%	156 80%*	12 57%~	67 60%	41 58%	222 65%	401 70%	2952 69%	3437 100%~	1419 ~ 71%*	1991 67%*
	NOT ANSWERED	342	2	8	11	16	22	11	54	4	4		2	2	7	12	72		28	62
VALID CASES NUMBER OF RESPONDENTS	5006 5348 100%	465 467 100%	808 816 100%	756 767 100%	1016 1032 100%	1421 1443 100%	472 483 100%	3490 3544 100%	92 96 100%	194 198 100%	21 21 100%	111 113 100%	71 73 100%	343 350 100%	576 588 100%	4292 4364 100%	3437 3437 100%	1574 1574 100%	2000 2028 100%	2959 3021 100%

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK WHT/E	OR AMER	NATV HAW/ IAN	AMER PAC	ALSK ILND	MUL- NATV OTH/R	TI	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	FE- MALE MALE		
Q37	EXCELLENT	911 18%	111 24%*	171 21%*	133 17%	166 16%	249 17%	69 15%*	602 17%*	17 18%	40 21%	3 16%~	17 15%	10 14%	65 19%	132 23%*	752 18%*	808 24%*	96 6%*	429 21%*	474 16%*
	VERY GOOD	1253 25%	119 26%	208 26%	206 27%	222 22%*	377 26%	106 23%	893 26%	23 25%	51 27%	5 22%~	32 28%	16 22%	73 22%	135 23%	1090 25%	1059 31%*	189 12%*	519 26%	725 24%
	GOOD	1548 31%	138 30%	252 31%	239 31%	328 32%	417 29%	151 32%	1071 31%	26 28%	66 34%	8 40%~	30 27%	24 34%	97 29%	194 34%	1307 30%	1089 32%*	447 29%*	587 29%	950 32%*
	FAIR	984 20%	77 17%	142 18%	135 18%	222 22%	291 20%	108 23%	709 20%	19 21%	27 14%*	3 15%~	24 21%	12 17%	71 21%	103 18%	861 20%	392 11%*	585 38%*	353 18%*	618 21%*
	POOR	310 6%	18 4%*	35 4%*	47 6%	78 8%*	92 6%	37 8%	224 6%	7 8%	9 5%	1 7%~	8 7%	9 13%	32 10%*	13 2%*	288 7%*	69 2%*	236 15%*	109 5%	197 7%
	#EXCELLENT + VERY GOOD + GOOD (NET)	3711 74%	368 80%*	631 78%*	578 76%	716 70%*	1043 73%	327 69%*	2567 73%*	66 72%	156 81%*	16 79%~	79 71%	50 71%	236 70%	461 80%*	3149 73%*	2955 86%*	731 47%*	1535 77%*	2149 72%*
	NOT ANSWERED	344	4	8	7	16	17	12	44	4	6	1	2	2	11	11	66	21	22	30	57
VALID CASES NUMBER OF RESPONDENTS	5004 5348 100%	463 467 100%	808 816 100%	760 767 100%	1016 1032 100%	1426 1443 100%	471 483 100%	3500 3544 100%	92 96 100%	192 198 100%	20 21 100%	111 113 100%	71 73 100%	339 350 100%	577 588 100%	4298 4364 100%	3416 3437 100%	1552 1574 100%	1998 2028 100%	2964 3021 100%	

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER				
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER AND IAN	ALSK ILND	MUL- NATV OTHr	TI	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FE- HIS- PAN- IC	MALE MALE		
Q38 #YES	1791 36%	131 30%*	194 24%*	223 30%*	373 37%	581 41%*	266 58%*	1218 35%*	30 33%	85 46%*	11 53%~	45 41%	20 28%	117 34%	236 43%*	1507 35%*	1094 33%*	677 45%*	622 32%*	1151 39%*
NO	3138 64%	305 70%*	601 76%*	523 70%*	640 63%	829 59%*	196 42%*	2244 65%*	62 67%	100 54%*	10 47%~	64 59%	52 72%	222 66%	311 57%*	2741 65%*	2261 67%*	839 55%*	1341 68%*	1772 61%*
DON'T KNOW	110	27	15	15	15	25	12	56	1	12		4	2	4	29	76	65	43	44	64
NOT ANSWERED	310	4	6	6	4	8	8	26	3	1	1	1		7	13	40	17	15	21	34
VALID CASES NUMBER OF RESPONDENTS	4928 5348 100%	436 467 100%	795 816 100%	747 767 100%	1013 1032 100%	1410 1443 100%	462 483 100%	3461 3544 100%	92 96 100%	185 198 100%	20 21 100%	108 113 100%	71 73 100%	339 350 100%	546 588 100%	4248 4364 100%	3355 3437 100%	1516 1574 100%	1964 2028 100%	2923 3021 100%

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IND/ PAC	ALSK ILND	MUL- NATV OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	FE- MALE MALE		
Q39	EVERY DAY	973 19%	42 9%*	145 18%	167 22%	248 24%*	291 20%	63 13%*	774 22%*	13 14%	8 4%*	6 27%~	28 26%	8 11%*	84 25%*	34 6%*	915 21%*	585 17%*	379 25%*	451 23%*	512 17%*
	SOME DAYS	464 9%	34 7%	79 10%	76 10%	111 11%	136 10%	20 4%*	326 9%	16 17%*	6 3%*	1 3%~	14 13%	8 12%	39 11%	42 7%	407 9%	289 8%*	170 11%*	212 11%*	245 8%*
	NOT AT ALL	3565 71%	383 83%*	583 72%	512 68%*	659 65%*	1001 70%	390 82%*	2396 69%*	64 69%	181 93%*	14 70%~	67 62%*	55 77%	220 64%*	494 87%*	2974 69%*	2527 74%*	996 64%*	1327 67%*	2214 75%*
	DON'T KNOW	35	6	2	8	7	6	3	20		1		2	2	2	9	26	17	16	18	17
	NOT ANSWERED	310	1	6	5	6	9	6	29	3	2	1	3		5	8	43	20	13	20	33
VALID CASES	NUMBER OF RESPONDENTS	5003 5348	460 467	808 816	754 767	1019 1032	1428 1443	474 483	3496 3544	93 96	195 198	20 21	108 113	71 73	343 350	570 588	4296 4364	3400 3437	1545 1574	1990 2028	2971 3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK WHT	NATV OR AFR- AMER	AMER AS- IAN	PAC ILND	ALSK NATV	MUL- OTH	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY FAIR & POOR	FE- MALE MALE		
Q40	NEVER	383 27%	30 41%*	71 32%	76 31%	92 26%	90 21%*	14 17%*	296 27%	10 36%~	3 23%~	1 23%~	9 23%~	5 33%~	26 22%	22 30%	347 27%	276 32%*	97 18%*	214 33%*	163 22%*
	SOMETIMES	345 24%	19 25%	47 21%	60 25%	95 27%	99 23%	22 27%	262 24%	7 25%~	4 27%~	1 9%~	11 27%~	3 18%~	29 24%	18 24%	316 24%	202 23%	141 26%	159 24%	182 24%
	USUALLY	216 15%	8 11%	30 14%	38 16%	61 17%	61 15%	14 17%	166 15%	1 4%~	4 27%~	1 9%~	5 14%~	6 37%~	17 14%	11 15%	196 15%	114 13%*	99 18%*	91 14%	121 16%
	ALWAYS	477 34%	17 22%*	75 34%	69 28%	105 30%	171 41%*	33 40%	364 33%	10 36%~	3 23%~	4 59%~	14 37%~	2 12%~	49 41%	23 31%	441 34%	272 31%*	200 37%*	189 29%*	283 38%*
	#ALWAYS + USUALLY (NET)	693 49%	25 34%*	106 47%	107 44%	167 47%	232 55%*	46 57%	530 49%	11 39%~	7 50%~	4 68%~	19 50%~	8 49%~	66 54%	35 46%	637 49%	387 45%*	300 56%*	280 43%*	404 54%*
	TOP BOX SCORE	477 34%	17 22%*	75 34%	69 28%	105 30%	171 41%*	33 40%	364 33%	10 36%~	3 23%~	4 59%~	14 37%~	2 12%~	49 41%	23 31%	441 34%	272 31%*	200 37%*	189 29%*	283 38%*
	NOT ANSWERED	21	2	1	1	6	7	1	13	1			2	2	2	2	18	9	12	12	8
VALID CASES	1420	74	224	242	354	421	82	1088	28	14	6	39	16	121	75	1300	865	538	652	749	
NUMBER OF RESPONDENTS	1441	76	225	243	360	428	83	1101	29	14	6	41	16	123	77	1318	874	550	664	757	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		18 OHP TOT ADLT	25 TO 24	35 TO 34	45 TO 54	55 TO 64	65 AND OVER	BLCK WHT/E AMER	NATV OR AFR- IAN	AMER AS- ILND	PAC ILND	IND/ ALSK NATV	MUL- OTH/R TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & GOOD	FAIR & POOR	FE- MALE MALE		
Q41	NEVER	713 50%	52 69%*	133 60%*	126 52%	175 49%	174 41%*	38 46%	547 50%	13 46%~	8 57%~	2 41%~	22 56%~	6 39%~	55 45%	44 59%	645 50%	475 55%*	226 42%*	363 56%*	339 45%*
	SOMETIMES	319 22%	9 12%*	41 18%*	52 22%	93 26%*	100 24%	19 23%	238 22%	7 25%~	3 20%~	1 23%~	7 18%~	3 19%~	36 30%	12 17%	296 23%	169 20%*	148 27%*	131 20%*	184 24%*
	USUALLY	155 11%	6 8%	19 9%	31 13%	29 8%*	55 13%	13 16%	121 11%	2 7%~	1 7%~	~ 11%~	4 18%~	3 10%	12 11%	8 10%	144 11%	88 10%	66 12%	67 10%	87 12%
	ALWAYS	234 16%	8 10%	30 13%	32 13%	56 16%	94 22%*	12 15%	182 17%	6 21%~	2 16%~	2 36%~	6 14%~	4 25%~	18 15%	10 14%	217 17%	131 15%	100 18%	92 14%	140 19%*
	#ALWAYS + USUALLY (NET)	389 27%	14 19%*	49 22%*	63 26%	85 24%	148 35%*	26 31%	303 28%	8 29%~	3 23%~	2 36%~	10 26%~	7 42%~	30 25%	19 25%	360 28%	219 25%*	166 31%*	159 24%*	227 30%*
	TOP BOX SCORE	234 16%	8 10%	30 13%	32 13%	56 16%	94 22%*	12 15%	182 17%	6 21%~	2 16%~	2 36%~	6 14%~	4 25%~	18 15%	10 14%	217 17%	131 15%	100 18%	92 14%	140 19%*
	NOT ANSWERED	20	1	1	2	6	6	1	13	1			1		1	2	16	11	9	11	7
VALID CASES		1421	75	224	241	354	422	82	1088	28	14	6	40	16	122	75	1302	863	541	653	750
NUMBER OF RESPONDENTS		1441	76	225	243	360	428	83	1101	29	14	6	41	16	123	77	1318	874	550	664	757
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK WHT/E AMER	NATV OR AFR- IAN	AMER HAW/ AS- ILND	IND/ PAC ALSK	MUL- NATV OTHr	TI	HIS- PAN- IC	HIS- PAN- IC	EX & NOT GOOD & GOOD	VERY FAIR & POOR	FE- MALE MALE		
Q42	NEVER	807	50 57%	128 66%	144 57%	199 61%	233 57%	42 51%	619 57%	13 46%~	7 50%~	4 64%~	25 63%~	9 58%~	73 60%	42 58%	743 57%	511 60%*	285 53%*	408 63%*	390 53%*
	SOMETIMES	272	16 19%	44 22%	40 20%	74 17%	78 21%	18 19%	209 19%	6 21%~	4 27%~		6 ~ 14%~	3 18%~	23 19%	13 18%	251 19%	150 18%*	120 22%*	104 16%*	164 22%*
	USUALLY	145	4 10%	25 5%	24 11%	29 10%	52 8%	8 12%	109 10%	3 11%~	2 14%~		4 ~ 10%~	4 25%~	13 11%	8 10%	132 11%	95 11%	49 9%	72 11%	71 10%
	ALWAYS	184	5 13%	27 7%*	30 12%	50 13%	57 14%	14 14%	146 14%	6 21%~	1 9%~	2 36%~	5 13%~		12 ~ 10%	9 13%	172 13%	99 12%*	83 15%*	67 10%*	117 16%*
	#ALWAYS + USUALLY (NET)	330	9 23%	52 12%*	54 23%	79 22%	110 26%	22 27%	256 24%	9 32%~	3 23%~	2 36%~	9 22%~	4 25%~	25 21%	17 24%	303 23%	194 23%	132 25%	139 21%	188 25%
	TOP BOX SCORE	184	5 13%	27 7%*	30 12%	50 13%	57 14%	14 14%	146 14%	6 21%~	1 9%~	2 36%~	5 13%~		12 ~ 10%	9 13%	172 13%	99 12%*	83 15%*	67 10%*	117 16%*
	NOT ANSWERED	33	1	1	5	9	7	2	18	1			1		2	5	20	19	14	12	14
VALID CASES	NUMBER OF RESPONDENTS	1408	75	224	238	351	421	81	1083	28	14	6	40	16	121	72	1298	855	536	652	743
		1441	76	225	243	360	428	83	1101	29	14	6	41	16	123	77	1318	874	550	664	757
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

Q43 DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTH TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD GOOD	EX & VERY & POOR	FE- MALE MALE		
Q43	YES	1055 21%	20 4%*	49 6%*	67 9%*	213 21%	476 33%*	228 48%*	758 22%	28 30%	44 23%	4 20%~	37 34%*	13 18%	72 21%	88 15%*	940 22%*	559 16%*	478 31%*	441 22%	611 21%
	NO	3934 79%	444 96%*	759 94%*	688 91%*	800 79%	951 67%*	246 52%*	2731 78%	65 70%	147 77%	16 80%~	73 66%*	58 82%	275 79%	486 85%*	3354 78%*	2830 84%*	1056 69%*	1550 78%	2360 79%
	DON'T KNOW	48	2	5	8	9	11	8	24	2	8		2	2	1	6	37	28	17	21	23
	NOT ANSWERED	311	1	3	4	10	5	1	30	1		1	1		2	8	34	20	22	16	27
VALID CASES		4989	464	808	755	1013	1427	474	3489	93	190	20	111	71	347	574	4293	3389	1535	1991	2971
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	ALSK ILND	MUL- NATV OTH	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	FE- MALE MALE		
Q44	YES	465 10%	7 2%*	35 5%*	44 6%*	114 12%*	190 15%*	66 15%*	322 10%	9 10%	14 8%	2 10%~	15 14%	10 16%	48 15%*	36 7%*	414 10%*	189 6%*	274 20%*	151 8%*	310 11%*
	NO	4161 90%	441 98%*	739 95%*	658 94%*	810 88%*	1116 85%*	360 85%*	2910 90%	78 90%	157 92%	17 90%~	92 86%	55 84%	269 85%*	503 93%*	3556 90%*	3038 94%*	1068 80%*	1716 92%*	2420 89%*
	DON'T KNOW	396	15	37	55	102	127	56	272	7	24	1	6	7	29	41	346	180	207	140	253
	NOT ANSWERED	326	4	5	10	6	10	2	40	2	3	1	1	3	7	48	30	25	20	38	
VALID CASES	NUMBER OF RESPONDENTS	4626 5348 100%	448 467 100%	774 816 100%	701 767 100%	924 1032 100%	1306 1443 100%	425 483 100%	3232 3544 100%	87 96 100%	171 198 100%	19 21 100%	107 113 100%	66 73 100%	318 350 100%	540 588 100%	3970 4364 100%	3227 3437 100%	1342 1574 100%	1868 2028 100%	2730 3021 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 OT1	AGE						RACE								ETHNIC- ITY		HEALTH STATUS		GENDER	
	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK WHTC	NATV OR AMER	AMER AS- IAN	PAC ILND	ALSK NATV	MUL- OTHR	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY FAIR & POOR	FE- MALE MALE			
Q45																					
YES	1798 36%	78 17%*	133 16%*	177 23%*	375 37%	723 51%*	301 63%*	1262 36%	49 51%*	62 31%	7 33%~	60 54%*	28 39%	133 39%	171 30%*	1590 37%*	1021 30%*	743 48%*	758 38%*	1033 35%*	
NO	3206 64%	385 83%*	677 84%*	586 77%*	638 63%	702 49%*	179 37%*	2230 64%	47 49%*	134 69%	14 67%~	51 46%*	43 61%	212 61%	408 70%*	2713 63%*	2374 70%*	798 52%*	1244 62%*	1939 65%*	
NOT ANSWERED	345	4	6	4	18	18	3	52		2	1	2	2	5	10	61	42	33	26	49	
VALID CASES	5003	463	810	763	1014	1425	480	3492	96	196	20	111	71	345	578	4303	3395	1541	2002	2972	
NUMBER OF RESPONDENTS	5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP	18	25	35	45	55	65	BLCK	NATV	AMER	OR	HAW/	IND/	HIS-	HIS-	EX & VERY				
		TOT	TO	TO	TO	TO	TO	AND	AFR-	AS-	PAC	ALSK	MUL-	PAN-	PAN-	&	GOOD	FAIR			
		ADLT	24	34	44	54	64	OVER	WHTC	AMER	IAN	ILND	NATV	OTHR	TI	IC	IC	GOOD	POOR	FE-	
																		MALE	MALE		
Q46.1	YES	1159	12	46	115	285	495	196	818	18	64	5	32	19	70	115	1007	602	546	465	691
		22%	3%*	6%*	15%*	28%*	34%*	41%*	23%*	19%	32%*	25%~	29%	26%	20%	20%	23%*	18%*	35%*	23%	23%*
	NO	4189	455	770	652	747	948	287	2726	78	134	16	81	54	280	473	3357	2835	1028	1563	2330
		78%	97%*	94%*	85%*	72%*	66%*	59%*	77%*	81%	68%*	75%~	71%	74%	80%	80%	77%*	82%*	65%*	77%	77%*
VALID CASES		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AS- AMER	IND/ PAC	ALSK IAN	MUL- ILND	NATV NATV	OTHR TI	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD POOR	EX & VERY & FAIR	FE- MALE MALE	
Q46.2	YES	1529 29%	21 4%*	88 11%*	167 22%*	340 33%*	637 44%*	266 55%*	1084 31%*	42 44%*	68 34%	8 39%~	48 43%*	30 41%*	103 30%	124 21%*	1361 31%*	780 23%*	733 47%*	669 33%*	856 28%
	NO	3819 71%	446 96%*	728 89%*	600 78%*	692 67%*	806 56%*	217 45%*	2460 69%*	54 56%*	130 66%	13 61%~	65 57%*	43 59%*	247 70%	464 79%*	3003 69%*	2657 77%*	841 53%*	1359 67%*	2165 72%
VALID CASES		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTC AMER	NATV HAW/ AS- AMER	AMER PAC IAN	IND/ PAC ILND	ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	FAIR & POOR	FE- MALE MALE	
Q46.3	YES	855 16%	39 8%*	88 11%*	115 15%	220 21%*	301 21%*	86 18%	636 18%*	10 10%	13 7%*	5 26%~	26 23%	16 22%	77 22%*	59 10%*	773 18%*	424 12%*	421 27%*	317 16%	537 18%*
	NO	4493 84%	428 92%*	728 89%*	652 85%	812 79%*	1142 79%*	397 82%	2908 82%*	86 90%	185 93%*	16 74%~	87 77%	57 78%	273 78%*	529 90%*	3591 82%*	3013 88%*	1153 73%*	1711 84%	2484 82%*
VALID CASES		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD POOR	EX & VERY FAIR & FE-	MALE MALE	
Q47.1	YES	223	3 4%	7 0.6%*	11 0.9%*	48 1%*	100 5%	54 7%*	148 11%*	6 4%	9 6%	4 4%	7 17%~	4 6%	32 5%	12 9%*	201 2%*	85 5%*	134 2%*	111 9%*	112 4%
	NO	5125	464 96%	809 99%*	756 99%*	984 99%*	1343 95%	429 93%*	3396 89%*	90 96%	189 94%	17 83%~	106 94%	69 95%	318 91%*	576 98%*	4163 95%*	3352 98%*	1440 91%*	1917 95%*	2909 96%
VALID CASES		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD POOR	EX & VERY FAIR	FE- MALE	
Q47.2	YES	223	2 4%	9 0.4%*	17 1%*	43 2%*	97 4%	56 7%*	153 12%*	8 4%	8 8%	1 4%~	8 7%	4 5%	24 7%*	13 2%*	199 5%*	65 2%*	153 10%*	95 5%	125 4%
	NO	5125	465 96%	807 100%*	750 99%*	989 98%*	1346 96%	427 93%*	3391 88%*	88 96%	190 92%	20 96%	105 96%~	69 93%	326 95%	575 93%*	4165 98%*	3372 95%*	1421 90%*	1933 95%	2896 96%
VALID CASES		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN ILND	AMER PAC NATV	ALSK MUL- OTH	MUL- TI	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD POOR	EX & VERY FAIR	FE- & MALE		
Q47.3	YES	204	1 4%	9 0.2%*	17 1%*	40 2%*	80 4%	57 6%*	141 12%*	3 4%	11 3%	2 5%	8 9%~	3 7%	24 4%	11 7%*	187 2%*	72 4%*	129 8%*	77 4%	128 4%
	NO	5144	466 96%	807 100%*	750 99%*	992 98%*	1363 96%	426 94%*	3403 88%*	93 96%	187 97%	19 95%	105 91%~	70 93%	326 96%	577 93%*	4177 98%*	3365 96%*	1445 98%*	1951 92%*	2893 96%
VALID CASES		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK WHTC AMER	NATV OR AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	FAIR & POOR	FE- MALE MALE	
Q47.4	YES	975 18%	18 4%*	61 8%*	99 13%*	243 24%*	390 27%*	154 32%*	641 18%	27 28%*	54 27%*	4 19%~	36 32%*	15 20%	74 21%	114 19%	834 19%*	458 13%*	498 32%*	404 20%*	570 19%
	NO	4373 82%	449 96%*	755 92%*	668 87%*	789 76%*	1053 73%*	329 68%*	2903 82%	69 72%*	144 73%*	17 81%~	77 68%*	58 80%	276 79%	474 81%	3530 81%*	2979 87%*	1076 68%*	1624 80%*	2451 81%
VALID CASES		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER				
		BLCK	NATV	AMER	HIS-	HIS-	EX &													
OHP	18	25	35	45	55	65	OR	HAW/	IND/	HIS-	HIS-	GOOD	FAIR							
TOT	TO	TO	TO	TO	TO	AND	AFR-	AS-	PAC	ALSK	MUL-	PAN-	PAN-	&	&	FE-				
ADLT	24	34	44	54	64	OVER	WHT	AMER	IAN	ILND	NATV	OTHR	TI	IC	IC	MALE	MALE			
Q48																				
YES	1469	79	176	203	351	484	161	1061	37	30	2	40	21	128	124	1311	712	728	485	978
	30%	17%*	22%*	27%	34%*	34%*	34%*	30%*	40%*	15%*	11%~	37%	30%	37%*	22%*	31%*	21%*	47%*	24%*	33%*
NO	3507	382	627	557	669	938	308	2430	56	165	17	70	48	216	449	2982	2654	812	1508	1987
	70%	83%*	78%*	73%	66%*	66%*	66%*	70%*	60%*	85%*	89%~	63%	70%	63%*	78%*	69%*	79%*	53%*	76%*	67%*
NOT ANSWERED	372	6	13	7	12	21	14	52	3	4	1	3	4	6	16	71	70	33	35	55
VALID CASES	4976	461	803	760	1020	1422	469	3492	93	194	20	110	69	344	572	4293	3367	1541	1993	2966
NUMBER OF RESPONDENTS	5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AS- AMER	AMER IND/ PAC	ALSK ILND	MUL- NATV OTHR	TI IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FE- MALE				
Q49	YES	1237 87%	60 77%*	148 85%	171 85%	294 88%	417 90%*	136 88%	923 90%*	23 64%~	21 74%~	2 74%~	36 89%~	17 84%~	115 91%	76 67%*	1129 89%*	573 83%*	638 91%*	410 89%	822 86%
	NO	185 13%	18 23%*	26 15%	29 15%	41 12%	48 10%*	18 12%	105 10%*	13 36%~	7 26%~	1 26%~	4 11%~	3 16%~	11 9%	38 33%*	143 11%*	118 17%*	63 9%*	53 11%	132 14%
	NOT ANSWERED	55		2	6	16	22	7	37	1	1		2	1	2	10	44	25	27	23	31
VALID CASES	NUMBER OF RESPONDENTS	1422 1477 100%	78 78 100%	175 177 100%	200 206 100%	335 351 100%	465 487 100%	154 161 100%	1028 1065 100%	36 37 100%	28 29 100%	3 3 100%	41 43 100%	20 21 100%	126 128 100%	114 124 100%	1272 1316 100%	692 717 100%	701 728 100%	462 485 100%	954 985 100%

[ASKED IF Q48 = YES]

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IND/ PAC	ALSK IAN	MUL- ILND	NATV NATV	OTHR TI	EX & NOT HIS- PAN- IC	VERY GOOD & GOOD	FAIR & POOR	FE- MALE MALE		
Q50	YES	3115 62%	144 31%*	337 42%*	417 55%*	708 70%*	1088 76%*	404 86%*	2297 66%*	53 56%	97 50%*	11 53%~	79 71%	44 62%	221 64%	271 48%*	2790 65%*	1780 53%*	1290 83%*	1165 58%*	1944 66%*
	NO	1871 38%	315 69%*	466 58%*	343 45%*	309 30%*	348 24%*	68 14%*	1198 34%*	42 44%	96 50%*	10 47%~	33 29%	28 38%	126 36%	299 52%*	1517 35%*	1596 47%*	255 17%*	834 42%*	1024 34%*
	NOT ANSWERED	363	7	12	6	15	7	11	49	1	5	1	1	1	3	18	58	62	29	28	53
VALID CASES		4985	460	804	761	1017	1436	472	3495	95	193	20	112	72	347	570	4306	3375	1545	2000	2968
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AS- AMER	AMER IND/ PAC	ALSK ILND	MUL- NATV OTHR	TI	HIS- PAN- IC	NOT GOOD POOR	EX & VERY & GOOD FAIR POOR	FE- MALE MALE			
Q51	YES	2850 94%	124 89%*	300 91%*	394 95%	649 95%	999 96%*	367 95%	2126 96%*	51 98%	79 83%*	11 100%~	74 96%	42 95%~	206 96%	217 86%*	2578 95%*	1600 93%*	1204 97%*	1081 96%*	1762 94%*
	NO	167 6%	15 11%*	30 9%*	22 5%	36 5%	43 4%*	19 5%	99 4%*	1 2%	17 17%*	~	3 4%	2 5%~	8 4%	36 14%*	129 5%*	121 7%*	43 3%*	48 4%*	119 6%*
	NOT ANSWERED	113	5	8	4	24	49	19	80	1	2		4	1	5	19	91	68	45	43	70
VALID CASES	NUMBER OF RESPONDENTS	3017 3130 100%	139 144 100%	329 337 100%	416 420 100%	685 709 100%	1042 1091 100%	386 405 100%	2225 2305 100%	52 53 100%	96 98 100%	11 11 100%	77 81 100%	44 45 100%	214 219 100%	253 272 100%	2707 2798 100%	1720 1788 100%	1246 1291 100%	1129 1172 100%	1880 1950 100%

[ASKED IF Q50 = YES]

NQ52 WHAT IS YOUR AGE?

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER						
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER PAC IAN	ALSK ILND	MUL- NATV OTH	TI	HIS- PAN- IC	NOT GOOD PAN- IC	EX & VERY & GOOD FAIR & POOR	FE- MALE MALE				
NQ52																						
18 TO 24		517 10%	467 100%~	816 ~100%~	767 ~100%~	1032 ~100%~	1443 ~100%~	311 ~64%*	268 8%*	5 5%	15 8%	4 ~	2 4%*	39 3%*	131 22%*	335 8%*	403 12%*	70 4%*	206 10%	266 9%*		
25 TO 34		895 17%							586 ~17%~	12 12%	26 13%	4 20%~	15 13%	9 12%	61 17%	97 17%	712 16%	678 20%*	143 9%*	289 14%*	527 17%	
35 TO 44		848 16%							528 ~15%*	23 24%	25 13%	5 22%~	16 14%	7 9%	69 20%	91 15%	674 15%	574 17%*	200 13%*	313 15%	466 15%	
45 TO 54		1101 21%							737 ~21%~	14 15%	36 18%	2 10%~	23 20%	14 19%	63 18%	143 24%*	882 20%	661 19%*	380 24%*	431 21%	619 21%	
55 TO 64		1497 28%							1110 ~31%*	30 31%	37 19%*	8 36%~	41 37%	33 45%*	96 27%	87 15%*	1340 31%*	880 26%*	562 36%*	634 31%*	826 27%	
65 TO 74		320 6%							311 ~64%*	210 6%	7 7%	23 12%*	2 8%~	10 8%	7 9%	18 5%	28 5%	267 6%	169 5%*	133 8%*	116 6%	188 6%
75 OR OLDER		171 3%							172 ~36%*	105 3%	5 5%	35 18%*	1 4%~	4 4%	2 3%	4 1%*	11 2%*	153 4%*	73 2%*	87 6%*	39 2%*	129 4%*
VALID CASES		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021	
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021	
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

NQ53 ARE YOU MALE OR FEMALE?

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER				
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTH TI	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD POOR	EX & VERY FAIR & GOOD POOR	FE- MALE MALE	
NQ53																				
MALE		2157 40%	206 44%	292 36%*	309 40%	425 41%	628 44%*	158 33%*	1416 40%	41 43%	78 40%	13 64%~	48 42%	24 33%	154 44%	232 39%	1760 40%	1434 42%*	589 37%*	2028 100%~
FEMALE		3191 60%	261 56%	524 64%*	458 60%	607 59%	815 56%*	325 67%*	2128 60%	55 57%	120 60%	8 36%~	65 58%	49 67%	196 56%	356 61%	2604 60%	2003 58%*	985 63%*	3021 ~100%~
VALID CASES NUMBER OF RESPONDENTS		5348 5348 100%	467 467 100%	816 816 100%	767 767 100%	1032 1032 100%	1443 1443 100%	483 483 100%	3544 3544 100%	96 96 100%	198 198 100%	21 21 100%	113 113 100%	73 73 100%	350 350 100%	588 588 100%	4364 4364 100%	3437 3437 100%	1574 1574 100%	2028 2028 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 OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER						
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR WHT	NATV HAW/ AMER	AMER AS- IAN	PAC ILND	ALSK NATV	MUL- OTH TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	FE- MALE	MALE		
Q54	8TH GRADE OR LESS	296	4 6%	22 0.9%*	35 3%*	88 5%	79 9%*	63 6%	90 13%*	4 3%*	45 4%	23%*	~ ~	7 6%	2 3%	12 3%*	136 24%*	151 3%*	153 5%*	137 9%*	130 7%*	164 5%
	SOME HIGH SCHOOL BUT DID NOT GRADUATE	631	74 13%	95 16%*	91 12%	130 12%	162 13%	67 11%	413 14%	13 12%*	33 14%	4 17%	14 20%~	14 13%	4 5%*	46 13%	94 17%*	522 12%*	361 11%*	256 17%*	287 14%*	345 12%*
	HIGH SCHOOL GRADUATE OR GED	1721	209 35%	267 45%*	231 33%	384 31%*	477 38%*	136 33%	1306 29%*	30 37%*	32 31%	8 17%*	45 37~	18 40%	88 26%	179 25%*	1514 32%	1165 35%	535 35%	747 35%	973 33%*	
	SOME COLLEGE OR 2-YEAR DEGREE	1746	156 35%	296 34%	294 37%	301 39%*	549 30%*	137 38%*	1278 29%*	35 36%*	38 37%	9 20%*	40 42%~	40 36%	30 42%	162 47%*	126 22%*	1594 37%*	1215 36%*	502 33%*	621 31%*	1122 38%*
	4-YEAR COLLEGE GRADUATE	369	17 7%	94 4%*	66 12%*	67 9%	90 7%	32 6%	277 7%	7 8%*	26 7%	14%*	~ ~	5 4%	10 14%	21 6%	21 4%*	343 8%*	302 9%*	58 4%*	126 6%*	244 8%*
	MORE THAN 4-YEAR COLLEGE DEGREE	217	2 4%	33 0.4%*	38 4%	42 5%	69 4%	32 5%	158 7%*	7 4%	18 9%*	2 7%*	8 1%*	18 11%	18 5%	7 1%*	208 5%*	175 5%*	36 2%*	79 4%	139 5%	
	NOT ANSWERED	368	4	8	11	20	16	16	23		6	1		1	3	24	32	65	50	38	34	
VALID CASES NUMBER OF RESPONDENTS	4980 5348	463 467	808 816	756 767	1012 1032	1427 1443	467 483	3521 3544	96 96	192 198	20 21	113 113	72 73	347 350	564 588	4332 4364	3372 3437	1524 1574	1990 2028	2987 3021		
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q55 ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTH	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD POOR	EX & VERY & GOOD POOR	FE- MALE MALE	
Q55	YES HISPANIC OR LATINO	608 12%	134 29%*	99 12%	90 12%	143 14%	85 6%*	39 8%*	~	~	~	~	~	~	~	588 ~100%~	414 ~12%~	182 12%	240 12%	367 12%	
	NO NOT HISPANIC OR LATINO	4340 88%	328 71%*	703 88%	658 88%	864 86%	1320 94%*	431 92%*	3508 100%~	90 100%~	191 100%~	18 100%~	106 100%~	68 100%~	344 100%~	4364 ~100%~	2933 88%	1340 88%	1747 88%	2591 88%	
	NOT ANSWERED	400	5	13	18	26	38	12	36	6	7	3	7	5	6		91	52	42	64	
VALID CASES	NUMBER OF RESPONDENTS	4948 5348 100%	462 467 100%	803 816 100%	749 767 100%	1006 1032 100%	1405 1443 100%	471 483 100%	3508 3544 100%	90 96 100%	191 198 100%	18 21 100%	106 113 100%	68 73 100%	344 350 100%	588 588 100%	4364 4364 100%	3346 3437 100%	1522 1574 100%	1986 2028 100%	2957 3021 100%

Q56.1 WHAT IS YOUR RACE? RESPONSE: WHITE

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN ILND	AMER PAC NATV	ALSK MUL- OTH	MUL- TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD POOR	EX & VERY & GOOD POOR	FE- MALE MALE		
Q56.1	YES	4181	364 78%	699 86%*	631 82%*	851 82%*	1231 85%*	365 76%	3544 100%~	96 ~	198 ~	21 ~	113 ~	73 ~	333 ~	275 95%*	3876 47%*	2814 89%*	1303 82%*	1677 83%*	2502 83%*
	NO		1167 22%	103 22%	117 14%*	136 18%*	181 18%*	212 15%*	118 24%	96 ~100%~	198 ~100%~	21 ~100%~	113 ~100%~	73 ~100%~	17 ~100%~	313 5%*	488 53%*	623 11%*	271 18%*	351 17%*	519 17%*
VALID CASES		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN ILND	AMER PAC ILND	ALSK NATV	MUL- OTH TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD GOOD	EX & VERY & GOOD	FE- & POOR	MALE MALE	
Q56.2	YES	160 3%	23 5%*	20 2%	32 4%	26 2%	41 3%	14 3%	96 ~100%~	~	~	~	~	43 ~ 12%*	10 2%*	141 3%*	109 3%	46 3%	68 3%	92 3%	
	NO	5188 97%	444 95%*	796 98%	735 96%	1006 98%	1402 97%	469 97%	3544 100%~	198 ~100%~	21 ~100%~	113 ~100%~	73 ~100%~	307 88%*	578 98%*	4223 97%*	3328 97%	1528 97%	1960 97%	2929 97%	
VALID CASES		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q56.3 WHAT IS YOUR RACE? RESPONSE: ASIAN

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN ILND	AMER PAC NATV	ALSK MUL- OTH	MUL- TI	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD PAN- IC	EX & VERY GOOD POOR	FE- & & GOOD POOR	MALE MALE	
Q56.3	YES	208 4%	23 5%	28 3%	30 4%	36 3%	38 3%*	54 11%*		198 ~					31 ~	6 9%*	194 0.9%*	166 4%*	39 5%*	81 2%*	126 4%
	NO	5140 96%	444 95%	788 97%	737 96%	996 97%	1405 97%*	429 89%*	3544 100%~100%~100%~	96 ~100%~		21 ~100%~	113 ~100%~	73 ~100%~	319 ~100%~	582 91%*	4170 99%*	3271 96%*	1535 95%*	1947 98%*	2895 96%
VALID CASES		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE							RACE							ETHNIC- ITY	HEALTH STATUS	GENDER			
		OHP TOT	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND	BLCK OR	NATV HAW/ IND/	AMER PAC ALSK	MUL-	HIS- PAN-	HIS- PAN-	NOT & GOOD POOR	EX & VERY FAIR	FE-				
		ADLT	24	34	44	54	64	OVER	WHT	AMER	IAN	ILND	NATV	OTHR	TI	IC	IC	MALE	MALE		
Q56.4	YES		52 1%	5 1%	10 1%	13 2%	8 0.7%	13 0.9%	3 0.7%		21		26	5 7%*	43 0.8%	37 1%	15 1%	25 1%	26 0.9%		
	NO		5296 99%	462 99%	806 99%	754 98%	1024 99%	1430 99%	480 99%	3544 100%~	96 100%~	198 100%~	113 100%~	73 100%~	324 93%*	583 99%	4321 99%	3400 99%	1559 99%	2003 99%	2995 99%
VALID CASES		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE							RACE							ETHNIC- ITY	HEALTH STATUS	GENDER			
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN ILND	AMER PAC NATV	ALSK MUL- OTH	TI	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD POOR	EX & VERY & GOOD FAIR	FE- MALE MALE		
Q56.5	YES	336 6%	29 6%	56 7%	52 7%	63 6%	104 7%	28 6%	~	~	~	113 ~100%~	225 ~64%*	32 5%	294 7%*	198 6%*	133 8%*	148 7%*	188 6%		
	NO	5012 94%	438 94%	760 93%	715 93%	969 94%	1339 93%	455 94%	3544 100%~	96 100%~	198 100%~	21 100%~	73 100%~	125 36%*	556 95%	4070 93%*	3239 94%*	1441 92%*	1880 93%*	2833 94%	
VALID CASES		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q56.6 WHAT IS YOUR RACE? RESPONSE: OTHER

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER PAC IAN	MUL- NATV OTHr	TI	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD POOR	EX & VERY & FAIR	FE- MALE MALE			
Q56.6	YES	293 5%	35 7%	44 5%	52 7%	59 6%	74 5%	26 5%	~	~	~	~	73 ~100%~	103 29%*	115 20%*	167 4%*	180 5%	106 7%*	118 6%	176 6%	
	NO	5055 95%	432 93%	772 95%	715 93%	973 94%	1369 95%	457 95%	3544 100%~	96 100%~	198 100%~	21 100%~	113 100%~	247 ~100%~	473 71%*	4197 80%*	3257 96%*	1468 95%	1910 93%*	2845 94%	
VALID CASES		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
NUMBER OF RESPONDENTS		5348	467	816	767	1032	1443	483	3544	96	198	21	113	73	350	588	4364	3437	1574	2028	3021
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q57 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER AND IAN	ALSK ILND	MUL- NATV OTHr	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD POOR	EX & VERY & GOOD POOR	FE- MALE MALE		
Q57	YES	502 13%	56 20%*	70 13%	62 11%	73 9%*	91 7%*	146 35%*	314 11%*	8 12%	76 43%*	2 9%~	9 9%	7 10%	17 11%	68 17%*	423 12%*	297 11%*	196 16%*	260 16%*	239 10%*
	NO	3423 87%	231 80%*	466 87%	500 89%	757 91%*	1137 93%*	278 65%*	2578 89%*	60 88%	102 57%*	16 91%~	84 91%	62 90%	143 89%	323 83%*	3025 88%*	2346 89%*	1003 84%*	1319 84%*	2095 90%*
	NOT ANSWERED	56	4	7	4	8	7	5	11	4	1	1	1	1	7	16	25	18	11	17	
VALID CASES	NUMBER OF RESPONDENTS	3925 3981 100%	287 291 100%	535 542 100%	561 565 100%	831 839 100%	1229 1236 100%	424 429 100%	2892 2903 100%	68 68 100%	178 182 100%	17 18 100%	93 93 100%	69 70 100%	160 161 100%	391 398 100%	3447 3463 100%	2643 2668 100%	1199 1217 100%	1579 1590 100%	2334 2351 100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD IC	EX & VERY FAIR POOR	FE- & MALE MALE	
Q58.1	YES	260 50%	22 39%	35 49%	26 42%	39 53%	67 70%*	66 44%	156 49%	2 25%~	36 47%	2 100%~	5 61%~	4 57%~	10 57%~	42 62%*	211 48%*	150 49%	104 52%	132 49%	128 52%
	NO	256 50%	35 61%	36 51%	37 58%	36 47%	28 30%*	82 56%	164 51%	6 75%~	41 53%	4 ~ 39%~	3 43%~	7 43%~	26 38%*	226 52%*	155 51%	97 48%	134 51%	119 48%	
VALID CASES NUMBER OF RESPONDENTS		516 516 100%	57 71 100%	71 63 100%	63 75 100%	75 95 100%	95 148 100%	148 100%	320 320 100%	8 8 100%	77 77 100%	2 2 100%	9 9 100%	7 7 100%	17 17 100%	68 68 100%	437 437 100%	305 305 100%	201 201 100%	266 266 100%	247 247 100%

[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 OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AS- AMER	AMER IND/ PAC IAN	ALSK ILND	MUL- NATV OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD POOR	EX & VERY FAIR	FE- & MALE MALE			
Q58.2	YES	202 39%	22 38%	28 40%	22 35%	20 27%*	49 51%*	58 39%	131 41%	1 13%~	24 31%	1 50%~	5 51%~	1 14%~	8 50%~	26 38%	172 39%	121 40%	76 38%	122 46%*	79 32%*
	NO	314 61%	35 62%	43 60%	41 65%	55 73%*	46 49%*	90 61%	189 59%	7 87%~	53 69%	1 50%~	4 49%~	6 86%~	9 50%~	42 62%	265 61%	184 60%	125 62%	144 54%*	168 68%*
VALID CASES NUMBER OF RESPONDENTS		516 516 100%	57 57 100%	71 71 100%	63 63 100%	75 75 100%	95 95 100%	148 148 100%	320 320 100%	8 8 100%	77 77 100%	2 2 100%	9 9 100%	7 7 100%	17 17 100%	68 68 100%	437 437 100%	305 305 100%	201 201 100%	266 266 100%	247 247 100%

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

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHTE	NATV HAW/ AMER AS- AMER	AMER PAC IAN	ALSK ILND	MUL- NATV OTHR	TI TI	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD POOR	EX & VERY FAIR & GOOD POOR	FE- MALE MALE		
Q58.3	YES	167 32%	19 33%	26 37%	24 39%	20 27%	18 19%*	58 39%*	118 37%*	4 49%~	14 18%*		4 ~ 49%~	2 29%~	5 27%~	18 27%	145 33%	108 35%	55 27%*	90 34%	76 31%
	NO	349 68%	38 67%	45 63%	39 61%	55 73%	77 81%*	90 61%*	202 63%*	4 51%~	63 82%*	63 100%~	2 51%~	5 71%~	5 73%~	12 73%	50 67%	292 65%	197 73%*	146 66%	176 69%
VALID CASES NUMBER OF RESPONDENTS		516 516 100%	57 57 100%	71 71 100%	63 63 100%	75 75 100%	95 95 100%	148 148 100%	320 320 100%	8 8 100%	77 77 100%	2 2 100%	9 9 100%	7 7 100%	17 17 100%	68 68 100%	437 437 100%	305 305 100%	201 201 100%	266 266 100%	247 247 100%

[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 OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN ILND	AMER PAC NATV	ALSK MUL- OTH	MUL- TI	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD PAN- IC	EX & VERY GOOD & GOOD POOR	FE- & & MALE MALE		
Q58.4	YES	73 14%	4 7%*	3 4%*	4 6%*	11 15%	19 20%	32 22%*	14 4%*	1 13%~	46 60%*	~	~	~	2 9%~	14 20%	58 13%	44 14%	28 14%	24 9%*	49 20%*
	NO	443 86%	53 93%*	68 96%*	59 94%*	64 85%	76 80%	116 78%*	306 96%*	7 87%~	31 40%~	2 100%~	9 100%~	7 100%~	15 91%~	54 80%	379 87%	261 86%	173 86%	242 91%*	198 80%*
VALID CASES NUMBER OF RESPONDENTS		516 516 100%	57 57 100%	71 71 100%	63 63 100%	75 75 100%	95 95 100%	148 148 100%	320 320 100%	8 77 100%	77 2 100%	2 9 100%	9 7 100%	7 17 100%	17 17 100%	68 68 100%	437 437 100%	305 305 100%	201 201 100%	266 266 100%	247 247 100%

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

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

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD IC	EX & VERY FAIR POOR	FE- MALE MALE	
Q58.5	YES	41 8%	7 12%	6 8%	5 8%	9 12%	7 8%	7 5%	30 9%	3 ~	1 4%	1 ~	1 ~	1 14%~	1 ~	7 10%	35 8%	20 7%	20 10%	23 8%	19 8%
	NO	475 92%	50 88%	65 92%	58 92%	66 88%	88 92%	141 95%	290 91%	8 100%~	74 96%	2 100%~	9 100%~	6 100%~	17 86%~100%~	61 90%	402 92%	285 93%	181 90%	243 92%	228 92%
VALID CASES NUMBER OF RESPONDENTS		516 516 100%	57 57 100%	71 71 100%	63 63 100%	75 75 100%	95 95 100%	148 148 100%	320 320 100%	8 100%	77 100%	2 100%	9 100%	7 100%	17 100%	68 68 100%	437 437 100%	305 305 100%	201 201 100%	266 266 100%	247 247 100%

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

NQ13 RATING OF ALL HEALTH CARE

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR WHT	NATV HAW/ AMER	AMER AS- IAN	PAC ILND	ALSK NATV	MUL- OTH TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	FE- MALE MALE		
NQ13 0-6		688 20%	53 20%	104 21%	104 22%	163 17%	176 17%*	54 17%	496 20%	8 23%~	10 15%	2 28%~	9 17%	19 36%*	56 23%	50 14%*	600 20%	331 15%*	325 27%*	213 17%*	451 21%*
7-8		1220 35%	99 37%	204 39%*	186 38%	248 34%	347 33%	94 29%*	901 36%	11 32%~	27 41%		21 ~ 39%	15 28%	86 35%	112 30%*	1059 36%*	782 36%*	397 33%	432 35%	751 35%
9-10		1603 46%	117 43%	210 40%*	196 40%*	328 44%	522 50%*	175 54%*	1139 45%	16 46%~	29 44%	7 72%~	24 44%	20 36%	101 42%	207 56%*	1323 44%*	1060 49%*	489 40%*	596 48%*	963 44%
VALID CASES NUMBER OF RESPONDENTS	3511 3511 100%	269 269 100%	518 518 100%	486 486 100%	739 739 100%	1044 1044 100%	323 323 100%	2536 2536 100%	35 35	66 66	9 9	54 54	54 54	242 242	369 369	2982 2982	2174 2174	1210 1210	1240 1240	2165 2165	
MEAN	2.26	2.24 .566	2.20 .064	2.19 .023*	2.22 .131	2.33 .000*	2.37 .005*	2.25 .376	2.23 ~.692	2.30 ~.936	2.45 .033*	2.27 .114	2.01 ~.219	2.19 .006*	2.43 .001*	2.24 .000*	2.34 .000*	2.14 .000*	2.31 .006*	2.24 .017*	
p stat_(*=Sig @ p<=.05)																					

[ASKED IF Q7 >= 1 TIME]

NQ23 RATING OF PERSONAL DOCTOR

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR WHT	NATV HAW/ AMER	AMER AS- IAN	PAC ILND	ALSK NATV	MUL- OTH TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD GOOD	EX & VERY & POOR	FE- MALE		
NQ23	0-6	573 15%	48 16%	102 18%*	79 15%	112 15%	163 15%	46 13%	429 16%	5 15%~	6 8%*	1 15%~	7 14%~	8 16%	45 18%	43 11%*	499 16%	307 13%*	242 20%*	194 14%	360 16%
	7-8	960 26%	87 30%	172 31%*	154 29%	179 23%	263 24%	70 20%*	723 27%	8 24%~	20 29%	~ ~	8 17%~	14 27%	61 25%	86 21%*	827 26%	660 28%*	269 22%*	358 26%	571 25%
	9-10	2195 59%	160 54%	281 51%*	303 57%	479 62%*	670 61%	241 68%*	1574 58%*	21 62%~	44 63%	9 85%~	31 68%~	29 57%	140 57%	272 68%*	1840 58%*	1416 59%	712 59%	804 59%	1342 59%
VALID CASES	3728	296	554	536	769	1096	356	2726	34	70	10	46	51	246	401	3167	2383	1223	1355	2273	
NUMBER OF RESPONDENTS	3728	296	554	536	769	1096	356	2726	34	70	10	46	51	246	401	3167	2383	1223	1355	2273	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
MEAN		2.44	2.38	2.32	2.42	2.48	2.46	2.55	2.42	2.47	2.55	2.71	2.54	2.42	2.39	2.57	2.42	2.47	2.38	2.45	2.43
p stat_(*=Sig @ p<=.05)		.162	.000*	.597	.077	.141	.003*	.039*	~.185	~	~	~.851	.282	.000*	.023*	.001*	.005*	.359	.742		

[ASKED IF Q15 = YES]

NQ27 RATING OF SPECIALIST SEEN MOST OFTEN

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR WHT	NATV HAW/ AMER	AMER AS- IAN	ALSK PAC ILND	MUL- NATV OTHr	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	FE- MALE MALE		
NQ27																					
0-6		238 13%	16 17%	25 12%	38 17%	59 14%	71 12%	16 9%*	180 14%	3 19%~	4 14%~	1 17%~	4 14%~	4 14%~	19 15%	15 10%	213 14%	105 11%*	125 16%*	80 13%	151 14%
7-8		474 27%	25 27%	77 38%*	56 25%	118 29%	141 23%*	47 25%	356 27%	4 25%~	7 28%~	3 43%~	5 18%~	13 43%~	31 25%	38 25%	424 27%	260 27%	200 26%	165 27%	298 27%
9-10		1058 60%	54 57%	103 50%*	134 59%	229 57%	394 65%*	123 66%	789 60%	9 56%~	15 57%~	2 39%~	21 69%~	13 44%~	75 60%	99 65%	923 59%	592 62%	443 58%	375 60%	665 60%
VALID CASES	1771	95 95	205 205	228 228	406 406	605 605	185 185	1324 1324	16 16	26 26	6 6	30 30	30 30	125 125	152 152	1559 1559	958 958	768 768	620 620	1115 1115	
NUMBER OF RESPONDENTS	1771 100%	95 100%	205 100%	228 100%	406 100%	605 100%	185 100%	1324 100%	16 100%	26 100%	6 100%	30 100%	30 100%	125 100%	152 100%	1559 100%	958 100%	768 100%	620 100%	1115 100%	
MEAN	2.46	2.40 .411	2.38 .079	2.42 .346	2.42 .179	2.53 .003*	2.58 .014*	2.46 .760	2.37 ~	2.43 ~	2.22 ~	2.55 ~	2.30 ~	2.45 ~	2.55 .805	2.46 .103	2.46 .239	2.51 .005*	2.41 .014*	2.48 .592	2.46 .881
p stat_(*=Sig @ p<=.05)																					

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

NQ35 RATING OF HEALTH PLAN

	BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
		OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 OVER	BLCK OR WHT	NATV HAW/ AMER	AMER AS- IAN	PAC ILND	ALSK NATV	MUL- OTH	TI	HIS- PAN- IC	NOT GOOD POOR	EX & VERY & GOOD FAIR POOR	FE- MALE MALE		
NQ35		955	76	178	157	233	232	42	715	3	10	5	13	20	82	68	849	552	378	374	556
0-6		21%	18%	24%*	23%	25%*	18%*	11%*	21%*	7%~	11%*	39%~	19%	32%	27%*	13%*	22%*	18%*	27%*	21%	21%
7-8		1520	146	285	245	281	390	130	1140	20	31	1	19	15	104	141	1325	1043	436	575	910
		33%	35%	39%*	36%	30%*	30%*	33%	34%*	46%~	33%	8%~	28%	24%	34%	27%*	34%*	34%*	31%*	32%	34%
9-10		2122	200	273	284	416	673	221	1471	21	51	6	36	28	121	319	1721	1468	600	862	1220
		46%	47%	37%*	41%*	45%	52%*	56%*	44%*	48%~	56%	53%~	53%	44%	39%*	61%*	44%*	48%*	42%*	48%	45%
VALID CASES	4596	422	736	686	930	1295	394	3326	44	92	12	67	63	307	528	3894	3063	1414	1812	2686	
NUMBER OF RESPONDENTS	4596	422	736	686	930	1295	394	3326	44	92	12	67	63	307	528	3894	3063	1414	1812	2686	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
MEAN		2.25	2.29	2.13	2.18	2.20	2.34	2.45	2.23	2.41	2.45	2.14	2.34	2.12	2.12	2.48	2.22	2.30	2.16	2.27	2.25
p stat_(*=Sig @ p<=.05)		.274	.000*	.012*	.016*	.000*	.000*	.000*	~.017*	~.377	.232	.003*	.000*	.000*	.000*	.277	.498				

GETTING NEEDED CARE

BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER		
OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX & VERY			
TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/	AFR-	AS-	PAC	HIS- PAN-	GOOD	FAIR		
ADLT	24	34	44	54	64	OVER	WHT	AMER	IAN	ILND	NATV	ALSK	MUL- PAN-	&	&		
NPRBSEE4 NQ46	2.25	2.25	2.25	2.19	2.13	2.33	2.37	2.27	1.94	1.80	2.13	2.47	OTHR	TI	IC	FE- MALE	
p stat_(*=Sig @ p<=.05)	1.00	.895	.254	.001*	.001*	.020*	.034*	~	~	~	~	~	.346	.620	.711	.000*.001*.335 .614	
NCARNES4 NQ15	2.31	2.25	2.21	2.26	2.26	2.41	2.46	2.33	2.28	2.09	2.45	2.44	2.04	2.25	2.33	2.31	2.38 2.19 2.37 2.29
p stat_(*=Sig @ p<=.05)	.181	.001*	.091	.040*	.000*	.000*	.032*	~.037*	~.222	.023*	.178	.584	.846	.000*	.000*	.001*.017*	
COMPOSITE	2.28	2.25	2.23	2.23	2.20	2.37	2.41	2.30	2.11	1.94	2.29	2.45	2.10	2.22	2.31	2.28	2.35 2.18 2.32 2.26
p stat_(*=Sig @ p<=.05)	.309	.022*	.020*	.000*	.000*	.000*	.001*	~.000*	~.134	.071	.110	.359	.843	.000*	.000*	.002*.037*	

GETTING CARE QUICKLY

BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER		
OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX & VERY			
TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/	AFR-	AS-	PAC	ALSK	HIS-	GOOD	FAIR	
ADLT	24	34	44	54	64	OVER	WHT	AMER	IAN	ILND	NATV	MUL-	MUL-	PAN-	&	FE-	
NCARSN4 NQ4	2.40	2.31	2.31	2.39	2.38	2.46	2.57	2.41	2.06	2.33	2.72	2.53	2.22	2.36	IC	GOOD	POOR
p stat_(*=Sig @ p<=.05)	.172	.031*	.822	.569	.025*	.003*	.217	~	~	~	~	~	.492	.218	.875	.013*	.073
NAPGET4 NQ6	2.26	2.02	2.15	2.22	2.28	2.36	2.44	2.30	2.24	1.80	1.93	2.42	2.13	2.24	2.22	2.28	2.26
p stat_(*=Sig @ p<=.05)	.000*	.001*	.197	.610	.000*	.000*	.000*	~.000*	~	~	~	~.621	.285	.043*	.808	.231	.306
COMPOSITE	2.33	2.16	2.23	2.30	2.33	2.41	2.51	2.36	2.15	2.07	2.32	2.48	2.17	2.30	2.34	2.35	2.32
p stat_(*=Sig @ p<=.05)	.000*	.000*	.257	.890	.000*	.000*	.001*	~.000*	~.218	.107	.400	.695	.178	.024*	.556	.304	.502

HOW WELL DOCTORS COMMUNICATE

BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX & VERY						
TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	GOOD	FAIR					
ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK	MUL-		PAN-	&	&					
NDREXPL4 NQ32	2.64	2.65	2.65	2.63	2.62	2.68	2.62	WHT	AMER	IAN	ILND	NATV	OTH	TI	IC	GOOD	POOR			
p stat_(*=Sig @ p<=.05)	.839	.716	.643	.446	.026*	.632	.012*	~.021*	~	~	~	~.898	.553	.040*	.000*	.000*	.020*	.203		
NDRLSTN4 NQ33	2.61	2.61	2.60	2.61	2.60	2.63	2.67	2.61	2.52	2.49	2.33	2.72	2.59	2.60	2.67	2.61	2.66	2.55	2.68	2.58
p stat_(*=Sig @ p<=.05)	1.00	.826	.897	.588	.272	.082	.537	~.198	~	~	~	~.764	.057	.895	.000*	.000*	.000*	.004*		
NDRESPU4 NQ34	2.67	2.73	2.67	2.68	2.65	2.68	2.68	2.67	2.72	2.72	2.48	2.76	2.61	2.66	2.72	2.67	2.72	2.60	2.72	2.65
p stat_(*=Sig @ p<=.05)	.160	.976	.741	.394	.643	.771	.832	~.543	~	~	~	~.816	.129	.947	.000*	.000*	.001*	.007*		
NDRTMEN4 NQ37	2.52	2.41	2.51	2.50	2.52	2.56	2.56	2.53	2.56	2.47	2.37	2.65	2.58	2.52	2.45	2.54	2.59	2.42	2.55	2.51
p stat_(*=Sig @ p<=.05)	.025*	.746	.577	.950	.019*	.314	.043*	~.589	~	~	~	~.966	.064	.002*	.000*	.000*	.059	.251		
COMPOSITE	2.61	2.60	2.61	2.60	2.60	2.64	2.63	2.62	2.59	2.52	2.36	2.73	2.61	2.60	2.61	2.62	2.67	2.53	2.66	2.59
p stat_(*=Sig @ p<=.05)	.823	.948	.875	.562	.104	.501	.197	~.301	~	~	~	~.852	.878	.137	.000*	.000*	.002*	.034*		

CUSTOMER SERVICE

BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER			
OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX & VERY				
TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/	AFR-	AS-	PAC	ALSK	HIS-	GOOD	FAIR		
ADLT	24	34	44	54	64	OVER	WHT	AMER	IAN	ILND	NATV	MUL-	MUL-	PAN-	&	&		
NPBCLCS4 NQ50	2.30	2.17	2.31	2.22	2.27	2.38	2.39	2.32	2.00	2.13	1.46	2.44	2.45	2.24	IC	GOOD	POOR	
p stat_(*=Sig @ p<=.05)	.071	.749	.173	.589	.016*	.267	.079	~	~	~	~	~	.521	.472	.261	.025*	.016*	
NCRESP NQ51	2.69	2.62	2.63	2.64	2.71	2.73	2.75	2.71	2.40	2.43	2.35	2.91	2.77	2.69	2.62	2.70	2.69	2.67
p stat_(*=Sig @ p<=.05)	.196	.120	.192	.495	.144	.301	.161	~	~	~	~	~	.987	.076	.339	.694	.331	.917
COMPOSITE	2.49	2.39	2.47	2.43	2.49	2.55	2.57	2.51	2.20	2.28	1.91	2.67	2.61	2.46	2.44	2.50	2.51	2.44
p stat_(*=Sig @ p<=.05)	.101	.619	.166	.979	.033*	.256	.091	~	~	~	~	~	.704	.227	.264	.137	.060	.240

SHARED DECISION MAKING

BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX & VERY						
TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	GOOD	FAIR					
ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK	MUL-		PAN-	&	&					
NNRXWHY NQ11	2.86	2.84	2.88	2.87	2.83	2.88	2.88	2.89	2.92	3.00	2.76	2.73	2.84	IC	GOOD	POOR				
p stat_(*=Sig @ p<=.05)	.567	.645	.837	.107	.315	.752	.092	~	~	~	~	~	.574	.071	.149	.180	.108	.155	.144	
NNRXWYNT NQ12	2.48	2.46	2.56	2.57	2.48	2.41	2.50	2.52	2.11	1.92	3.00	2.58	2.65	2.54	2.25	2.51	2.51	2.45	2.48	2.49
p stat_(*=Sig @ p<=.05)	.762	.162	.074	.906	.017*	.832	.007*	~	~	~	~	~	.449	.002*	.002*	.201	.117	.986	.905	
NRXBST NQ13	2.53	2.56	2.66	2.50	2.49	2.48	2.60	2.54	2.65	2.59	2.53	2.42	2.18	2.49	2.56	2.53	2.57	2.47	2.57	2.51
p stat_(*=Sig @ p<=.05)	.735	.005*	.535	.268	.079	.266	.601	~	~	~	~	~	.509	.681	.675	.027*	.007*	.247	.116	
COMPOSITE	2.63	2.62	2.70	2.65	2.60	2.59	2.66	2.64	2.55	2.48	2.84	2.59	2.52	2.62	2.53	2.64	2.65	2.58	2.65	2.62
p stat_(*=Sig @ p<=.05)	.882	.022*	.519	.277	.092	.464	.046*	~	~	~	~	~	.919	.034*	.041*	.040*	.012*	.341	.272	

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

BANTO T1	AGE							RACE							ETHNIC- ITY	HEALTH STATUS	GENDER
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	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- TI OTHR	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY & GOOD FAIR & GOOD POOR	FE- MALE MALE			
PRBSEE4 Q25	77%	79%	75%	72%	71%	81%	85%	79%	71%	55%	82%	76%	71%	70%	78%	77%	79% 74% 76% 77%
CARNES4 Q14	82%	82%	79%	81%	80%	85%	88%	83%	84%	74%	80%	79%	68%	78%	86%	82%	86% 76% 84% 81%
AVERAGE	79.32	80.49	77.09	76.61	75.48	82.93	86.25	80.78	77.44	64.32	81.20	77.88	69.85	73.90	82.15	79.23	82.51 75.06 79.84 79.43

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

BANTO T1	AGE							RACE							ETHNIC- ITY	HEALTH STATUS	GENDER
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	NATV HAW/ PAC ILND	AMER IND/ PAC ALSK NATV	MUL- TI OTHR	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY & GOOD GOOD	FAIR & POOR	FE- MALE		
CARSN4 Q4	83%	83%	78%	83%	83%	85%	88%	84%	75%	70%	100%	86%	66%	81%	85%	83%	86% 80% 84% 83%
APGET4 Q6	77%	64%	72%	75%	79%	82%	83%	80%	77%	48%	66%	79%	74%	76%	73%	78%	76% 80% 77% 78%
AVERAGE	79.89	73.49	75.23	78.69	80.86	83.17	85.54	81.80	76.19	59.11	82.93	82.27	70.28	78.66	79.18	80.34	80.87 79.74 80.31 80.24

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

BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
OHP	18	25	35	45	55	65	BLCK	NATV	AMER	HAW/	IND/	MUL-	PAN-	PAN-	&	&	GOOD	FAIR		
TOT	TO	TO	TO	TO	TO	AND	AFR-	AS-	PAC	ALSK		IC	IC	IC	IC	GOOD	POOR	FE-		
ADLT	24	34	44	54	64	OVER	WHT	AMER	IAN	ILND	NATV	OTHR	TI					MALE	MALE	
DREXPL4 Q17	92%	94%	91%	90%	92%	93%	92%	93%	91%	86%	85%	98%	95%	90%	92%	92%	94%	89%	93%	91%
DRLSTN4 Q18	90%	91%	89%	92%	89%	91%	93%	90%	89%	87%	87%	94%	92%	90%	93%	90%	92%	88%	93%	89%
DRESPU4 Q19	91%	93%	91%	92%	91%	90%	92%	91%	93%	92%	87%	90%	90%	89%	94%	91%	93%	87%	93%	90%
DRTMEN4 Q20	88%	85%	86%	89%	88%	90%	90%	89%	89%	87%	87%	93%	93%	85%	87%	89%	91%	84%	89%	88%
AVERAGE	90.2	90.9	89.2	90.8	89.8	91.1	91.6	90.6	90.2	87.8	86.6	93.8	92.5	88.5	91.5	90.4	92.4	87.2	92.1	89.5

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

BANTO T1	AGE							RACE							ETHNIC- ITY	HEALTH STATUS	GENDER
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	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- TI OTHR	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	FE- MALE		
PBCLCS4 Q31	79%	73%	83%	75%	77%	83%	79%	80%	80%	60%	73%	75%	79%	72%	82%	78%	80% 77% 80% 79%
CSRESP Q32	94%	94%	92%	93%	93%	94%	93%	94%	91%	84%	100%	100%	95%	90%	94%	93%	93% 93% 92% 94%
AVERAGE	86.29	83.53	87.52	84.13	84.97	88.26	86.32	87.07	85.73	71.88	86.41	87.38	87.32	81.25	87.76	85.96	86.61 84.94 85.98 86.46

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

BANT OT1	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER		
OHP	18	25	35	45	55	65	BLCK	NATV	AMER	HAW/	IND/		HIS-	HIS-	EX & VERY		
TOT	TO	TO	TO	TO	TO	AND	OR						PAN-	PAN-	GOOD FAIR		
ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK	MUL-		PAN-	PAN-	& &		
							WHT	AMER	IAN	ILND	NATV	OTH	TI	IC	IC	GOOD POOR	
NRXWHY Q10	93%	92%	94%	94%	91%	94%	94%	94%	94%	100%	90%	87%	93%	89%	94%	94% 92%	
NRXWYNT Q11	74%	73%	77%	79%	74%	71%	73%	76%	66%	49%	76%	78%	83%	77%	62%	75%	75% 72%
RXBST Q12	77%	79%	83%	75%	75%	74%	80%	77%	88%	78%	84%	72%	58%	76%	78%	77%	79% 74%
AVERAGE	81.4	81.5	84.7	82.5	80.1	79.8	82.3	82.2	82.8	73.7	86.8	80.2	75.9	81.8	76.5	81.9	82.6 79.3
																	82.1 81.0

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

	BANT OT1	AGE	RACE								ETHNIC- ITY	HEALTH STATUS	CCC SCREENER	
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD FAIR & GOOD POOR	NO CCC	CCC
Q1 YES			5563 100%	951 1290 1732 1590 100%~100%~100%~100%	2494 94 177 14 70 37 447 100%~100%~100%~100%~100%~100%~100%	1753 3340 100%~100%	4919 230 100%~100%	4241 1322 100%~100%~100%~100%						
NOT ANSWERED		34	3 6 11 14	11	3	3	1	1	15 19	32 2	23 11			
VALID CASES NUMBER OF RESPONDENTS	5563 5597	951 1290 1732 1590 954 1296 1743 1604	2494 2505	94 177 14 70 37 447 94 180 14 73 38 448	1753 3340 1768 3359	4919 230 4951 232	4241 1322 4264 1333	100% 100% 100% 100% 100% 100% 100% 100% 100% 100% 100% 100% 100% 100% 100% 100%						

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

	BANT OT1	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER					
	OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND	BLCK OR	NATV HAW/	AMER IND/	AFR- WHTC	AS- AMER	PAC IAN	ALSK ILND	MUL- NATV	PAN- OTHR	PAN- TI	HIS- IC	HIS- IC	NOT GOOD	EX & VERY FAIR	GOOD & POOR	NO CCC	CCC
Q3 YES	1709 31%	350 38%*	427 34%*	481 28%*	450 29%*		841 34%*	22 24%	31 18%*	7 51%~	24 33%~	10 26%~	169 38%*	478 27%*	1116 33%*	1493 30%*	115 50%*	1142 28%*	568 43%*				
NO	3760 69%	580 62%*	832 66%*	1229 72%*	1119 71%*		1648 66%*	71 76%	147 82%*	7 49%~	48 67%~	28 74%~	278 62%*	1271 73%*	2221 67%*	3423 70%*	113 50%*	3004 72%*	756 57%*				
NOT ANSWERED	128	24	37	32	34		16	1	2		1		1	19	22	34	4	118	9				
VALID CASES NUMBER OF RESPONDENTS	5469 5597 100%	930 954 100%	1259 1296 100%	1711 1743 100%	1570 1604 100%		2489 2505 100%	93 94 100%	178 180 100%	14 14 100%	72 73 100%	38 38 100%	447 448 100%	1749 1768 100%	3337 3359 100%	4917 4951 100%	228 232 100%	4146 4264 100%	1324 1333 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	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
		OHP TOT CHLD	13 AND				BLCK OR	NATV HAW/	AMER IND/	HIS- PAN-		HIS- PAN-	NOT GOOD	EX & VERY GOOD	FAIR	NO CCC		NO CCC	
			<4	4-7	8-12	OVER	WHTC AFR- IAN	AS- ILND	PAC NATV	ALSK OTHr	MUL- TI	IC	IC	& POOR	14 4%	15 4%	14 1%	7 1%	
Q4 NEVER		21 1%	5 2%	4 0.9%	7 2%	5 1%	10 1%	~	~	~	12%~	3% 0.7%	3 1%	14 1%	15 1%	4 4%	14 1%	7 1%	
SOMETIMES		119 7%	21 6%	25 6%	34 8%	39 9%	47 6%*	1 5%~	5 18%~	3 39%~	1 12%~	9 5%	37 8%	67 6%	95 7%*	12 12%	80 7%	40 7%	
USUALLY		280 17%	50 15%	64 16%	78 17%	88 21%*	140 18%	2 9%~	6 21%~	2 ~ 10%~	2 24%~	22 14%	88 19%	173 17%	243 17%	24 23%	165 15%*	116 22%*	
ALWAYS		1182 74%	256 77%	308 77%	336 74%	282 68%*	593 75%	19 86%~	17 62%~	4 61%~	20 90%~	5 52%~	124 78%	328 72%	786 76%*	1056 75%*	61 61%	807 76%*	375 70%*
#ALWAYS + USUALLY (NET)		1463 91%	306 92%	372 93%	415 91%	370 89%	733 93%*	21 95%~	23 82%~	4 61%~	23 100%~	7 76%~	146 92%	416 91%	958 92%	1299 92%*	85 84%*	972 91%	490 91%
TOP BOX SCORE		1182 74%	256 77%	308 77%	336 74%	282 68%*	593 75%	19 86%~	17 62%~	4 61%~	20 90%~	5 52%~	124 78%	328 72%	786 76%*	1056 75%*	61 61%	807 76%*	375 70%*
NOT ANSWERED		100	20	24	21	35	51		2		1	1	11	22	68	78	13	70	30
VALID CASES NUMBER OF RESPONDENTS		1603 1703 100%	332 352 100%	401 425 100%	456 477 100%	414 449 100%	790 841 100%	22 22 100%	28 30 100%	7 7 100%	23 24 100%	9 10 100%	159 170 100%	456 478 100%	1039 1107 100%	1409 1487 100%	101 114 100%	1066 1136 100%	537 567 100%

[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	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND	BLCK OR	NATV HAW/ IND/ AFR- AMER	AMER	PAC	ALSK	MUL- ILND	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD	EX & VERY FAIR	NO & GOOD	CCC POOR	CCC NO CCC
Q5 YES	3648 67%	745 81%*	868 70%	1037 61%*	998 64%*	13 AND	1665 67%	67 71%	120 67%	10 70%~	43 60%	29 77%~	311 70%	1159 67%	2254 68%	3267 67%*	174 76%*	2608 64%*	1041 79%*
NO	1767 33%	177 19%*	380 30%	655 39%*	555 36%*		814 33%	27 29%	59 33%	4 30%~	29 40%	8 23%~	135 30%	574 33%	1073 32%	1619 33%*	56 24%*	1486 36%*	280 21%*
NOT ANSWERED	182	32	48	51	51		26		2		1	1	2	35	32	65	2	171	11
VALID CASES NUMBER OF RESPONDENTS	5415 5597 100%	922 954 100%	1248 1296 100%	1692 1743 100%	1553 1604 100%		2479 2505 100%	94 94 100%	178 180 100%	14 14 100%	72 73 100%	37 38 100%	446 448 100%	1733 1768 100%	3327 3359 100%	4886 4951 100%	230 232 100%	4093 4264 100%	1322 1333 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	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER					
		OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND	BLCK	NATV	AMER	OR	HAW/	IND/	MUL-	HIS-	HIS-	NOT	EX &	VERY	GOOD	FAIR	NO CCC	CCC
								AFR-	AS-	PAC	ALSK	ILND	NATV	OTHR	TI	PAN-	PAN-	&	&	GOOD	POOR		
Q6	NEVER	60	5 2%	16 0.7%*	21 2%	18 2%	26 2%	1 2%	2 2%	1 5%~	2 5%~	3 12%~	5 2%	16 1%	40 2%	52 2%	4 2%	37 1%	23 2%				
	SOMETIMES	419	69 12%	115 10%*	116 14%	119 12%	149 13%	13 10%*	32 20%	4 29%*	1 33%~	2 4%~	2 8%~	26 9%*	164 15%*	223 11%*	368 12%	26 16%	315 13%	104 11%			
	USUALLY	893	152 26%	212 21%*	256 26%	273 30%*	404 26%	11 17%*	35 31%	1 13%~	15 35%~	7 29%~	84 28%	285 26%	550 26%	797 26%	49 30%	612 25%*	281 28%*				
	ALWAYS	2061	484 60%	482 68%*	587 58%	508 60%	981 55%*	41 63%*	42 62%	5 38%*	23 49%~	13 56%~	183 51%~	633 58%*	1307 62%*	1868 61%	85 52%*	1483 61%	578 59%				
	#ALWAYS + USUALLY (NET)	2954	636 86%	694 90%*	844 84%	781 86%	1384 85%	52 89%*	77 79%	7 70%*	38 62%~	20 91%~	267 80%~	919 90%*	1857 84%*	2665 88%*	134 86%	2096 82%	858 86%				
	TOP BOX SCORE	2061	484 60%	482 68%*	587 58%	508 60%	981 55%*	41 63%*	42 62%	5 38%*	23 49%~	13 56%~	183 51%~	633 58%*	1307 62%*	1868 61%	85 52%*	1483 61%	578 59%				
	NOT ANSWERED	220	38	49	56	77	108	1	8		1	3	15	60	138	186	10	162	58				
VALID CASES	NUMBER OF RESPONDENTS	3433	710	824	981	918	1559	66	111	11	42	25	298	1099	2120	3084	164	2447	986				
		3653	748	873	1037	995	1667	67	119	11	43	28	313	1159	2258	3270	174	2609	1044				
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%				

[ASKED IF Q5 = YES]

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

	BANT OT1	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
		OHP TOT CHLD	<4	4-7	8-12	OVER	BLCK OR		NATV AMER HAW/ IND/ PAC ALSK		MUL- AFR- AS- WHTC AMER IAN ILND NATV OTHR		NOT HIS- HIS- PAN- PAN- IC IC		EX & VERY GOOD FAIR & GOOD POOR		NO CCC CCC			
							13 AND	WHTC AMER	IAN	ILND	NATV	OTHR	TI							
Q7	NONE	1568	154 30%	307 17%*	571 25%*	538 34%*	691 35%*	27 28%*	75 29%	1 42%*	19 9%~	11 26%	120 31%~	554 33%*	929 28%*	1464 30%*	47 22%*	1338 33%*	230 18%*	
	1 TIME	1519	264 29%	384 30%	468 32%*	402 28%	728 26%*	25 29%	58 27%	9 32%	25 62%~	11 35%	119 31%~	465 28%	979 30%	1417 29%*	40 19%*	1209 30%*	310 24%*	
	2	1109	240 21%	274 27%*	323 22%*	273 19%*	513 18%*	22 21%	29 24%	3 16%	14 22%~	10 20%	107 28%~	333 20%	706 21%	1006 21%	38 18%	810 21%	299 23%*	
	3	540	119 10%	132 13%*	147 11%	142 9%*	261 9%	9 11%	14 10%	~ 8%	6 ~	4 8%~	53 10%~	158 9%	345 10%	480 10%	28 13%	357 9%*	182 14%*	
	4	239	53 5%	52 6%*	60 4%	74 4%*	109 5%	5 4%	2 5%	1 1%*	4 6%~	4 6%	~ ~	19 4%	80 5%	143 4%	210 4%	15 7%	141 4%*	98 8%*
	5 TO 9	238	51 4%	51 6%	65 4%	70 5%	114 5%	3 3%	2 0.9%*	~ ~	3 4%	~ 4%	19 4%	71 4%	146 4%	189 4%	30 14%*	116 3%*	122 9%*	
	10 OR MORE TIMES	83	11 2%	21 1%	29 2%	23 1%	53 2%*	1 1%	~ ~	~ ~	2 ~0.5%*	~ 1%	18 1%*	58 2%	60 1%	17 2%	30 8%*	54 0.7%*	38 4%*	
	NOT ANSWERED	302	61	77	80	83	36	2			1	1	9	89	52	127	17	264	38	
VALID CASES		5295	893	1219	1663	1521	2469	92	180	14	72	37	439	1679	3307	4824	215	4000	1295	
NUMBER OF RESPONDENTS		5597	954	1296	1743	1604	2505	94	180	14	73	38	448	1768	3359	4951	232	4264	1333	
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

	BANT OT1	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- WHTC AMER	NATV HAW/ AS- IAN	AMER PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD IC	EX & VERY GOOD POOR	FAIR & POOR	NO CCC	NO CCC	
Q8 #YES	2629 72%	542 75%	646 72%	765 71%	676 71%	1295 74%*	46 73%	67 65%	8 68%~	34 64%	16 73%~	215 68%	800 72%	1688 72%	2392 72%	121 74%	1806 69%*	823 78%*	
NO	1023 28%	183 25%	251 28%	309 29%	280 29%	462 26%*	17 27%	37 35%	4 32%~	19 36%	6 27%~	103 32%	304 28%	653 28%	915 28%	43 26%	794 31%*	228 22%*	
NOT ANSWERED	72	13	17	15	26	22	2	1				3	3	20	32	49	4	56	16
VALID CASES NUMBER OF RESPONDENTS	3651 3723 100%	725 738 100%	897 914 100%	1075 1090 100%	955 981 100%	1757 1779 100%	63 65 100%	104 105 100%	12 12 100%	53 53 100%	22 25 100%	319 322 100%	1104 1124 100%	2341 2373 100%	3307 3356 100%	164 168 100%	2600 2656 100%	1051 1067 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	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
		OHP TOT CHLD	13 AND				BLCK OR	NATV HAW/	AMER IND/	HIS- PAN-		HIS- PAN-	NOT & GOOD	EX & VERY GOOD	FAIR	NO CCC		CCC CCC	
			<4	4-7	8-12	OVER	WHTC AMER	IAN	PAC	ALSK	MUL-	TI	IC	IC	& POOR	CCC	CCC		
Q9	NEVER	88 2%	17 2%	19 2%	27 2%	25 3%	36 2%	1 1%	10 10%*	~	4 7%	2 9%~	13 4%	19 2%*	62 3%	75 2%	7 4%	67 3%	21 2%
	SOMETIMES	267 7%	48 7%	62 7%	80 8%	77 6%*	106 8%	5 8%	16 15%*	3 29%~	2 4%	2 9%~	18 6%	100 9%*	147 6%*	231 7%*	23 14%*	193 7%	74 7%
	USUALLY	748 21%	123 17%*	182 21%	224 23%*	219 20%	356 17%	11 25%	26 15%~	2 21%	11 28%~	6 18%	58 20%	226 20%	467 20%	654 20%*	40 25%	503 19%*	245 23%*
	ALWAYS	2541 70%	539 74%*	624 70%	740 69%	637 66%*	1260 72%*	48 74%	52 50%*	7 57%~	35 67%	12 53%~	230 72%	759 69%	1666 71%*	2346 71%*	94 57%*	1829 71%	711 68%
	#ALWAYS + USUALLY (NET)	3288 90%	661 91%	807 91%	964 90%	856 89%	1616 92%*	59 91%	77 75%*	9 71%~	46 89%	18 82%~	288 90%	985 89%	2133 91%*	3001 91%*	134 82%*	2333 90%	956 91%
	TOP BOX SCORE	2541 70%	539 74%*	624 70%	740 69%	637 66%*	1260 72%*	48 74%	52 50%*	7 57%~	35 67%	12 53%~	230 72%	759 69%	1666 71%*	2346 71%*	94 57%*	1829 71%	711 68%
	NOT ANSWERED	79	12	26	19	22	21		2		1	3	3	20	31	49	4	63	17
VALID CASES	NUMBER OF RESPONDENTS	3644 3723 100%	726 738 100%	888 914 100%	1071 1090 100%	959 981 100%	1758 1779 100%	65 65 100%	103 105 100%	12 12 100%	52 53 100%	22 25 100%	319 322 100%	1104 1124 100%	2342 2373 100%	3307 3356 100%	164 168 100%	2593 2656 1050	1005 1067 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	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
	OHP TOT CHLD					13 AND	BLCK OR	NATV HAW/ IND/	AMER	AFR- WHTC	AS- AMER	PAC	ALSK	MUL- ILND	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD	EX & VERY GOOD	FAIR & POOR	NO CCC	NO CCC
Q10																					
YES	1068 29%	177 24%*	234 26%*	326 31%	331 35%*		542 31%	13 21%	32 32%	1 10%~	14 27%	7 28%~	93 29%	310 28%	701 30%	945 29%*	70 43%*	575 22%*	494 47%*		
NO	2566 71%	546 76%*	654 74%*	738 69%	628 65%*		1214 69%	50 79%	69 68%	11 90%~	37 73%	17 72%~	228 71%	786 72%	1640 70%	2353 71%*	93 57%*	2010 78%*	555 53%*		
NOT ANSWERED	89	15	26	26	22		24	2	3		2	1	2	28	32	58	5	71	18		
VALID CASES	3634	723	888	1064	959		1755	63	102	12	51	24	320	1096	2341	3298	163	2585	1049		
NUMBER OF RESPONDENTS	3723	738	914	1090	981		1779	65	105	12	53	25	322	1124	2373	3356	168	2656	1067		
	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
	OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND	BLCK OR	NATV HAW/ IND/	AMER	AFR- WHT	AS- AMER	PAC	ALSK	MUL- ILND	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD 90%*	EX & VERY GOOD 94%*	FAIR 96%*	NO CCC	NO CCC
Q11 #YES	981 94%	163 92%	219 95%	292 92%	308 96%		506 96%*	13 100%~	24 86%~	2 100%~	12 100%~	6 85%~	90 99%*	276 90%*	655 96%*	868 94%	66 98%*	520 92%*	461 96%*		
NO	63 6%	14 8%	11 5%	25 8%	13 4%		23 4%*	4 ~ 14%~		1 ~	1 ~ 15%~	1 1%*	1 10%*	30 4%*	28 4%*	57 6%	2 2%*	45 8%*	18 4%*		
NOT ANSWERED	24	1	6	10	8		12	3		1		2		4	18	21	2	11	13		
VALID CASES NUMBER OF RESPONDENTS	1044 1068 100%	176 177 100%	230 236 100%	316 326 100%	321 329 100%		529 541	13 13	28 31	2 2	12 13	7 7	91 93	306 310	683 701	924 945	68 70	565 576	479 492 100%		

[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	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	OHP TOT CHLD	13 AND				BLCK OR AFR- WHTC	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY FAIR & POOR	NO CCC	NO CCC	
Q12 #YES	744 71%	117 67%	161 70%	220 69%	245 77%*	391 74%	9 69%~	20 71%~100%~	2 73%~	9 46%~	3 80%*	74 64%*	196 74%*	509 71%	659 69%	47 31%	373 67%*	371 77%*	
NO	298 29%	58 33%	69 30%	97 31%	74 23%*	137 26%	4 31%~	8 29%~	3 ~ 27%~	4 54%~	18 20%*	108 36%*	175 26%*	264 29%	21 31%	186 33%*	112 23%*		
NOT ANSWERED	26	2	6	9	10	13		3		1		1	6	17	22	2	17	9	
VALID CASES NUMBER OF RESPONDENTS	1042 1068 100%	175 177 100%	230 236 100%	317 326 100%	319 329 100%	528 541 100%	13 13 100%	28 31 100%	2 2 100%	12 13 100%	7 7 100%	92 93 100%	304 310 100%	684 701 100%	923 945 100%	68 70 100%	559 576 100%	483 492 100%	

[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	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	OHP TOT CHLD					13 AND	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY FAIR & POOR	NO CCC	NO CCC
Q13 #YES	817 79%	123 72%*	174 76%	265 84%*	256 81%		413 79%	10 77%~	19 66%~	1 36%~	8 67%~	5 70%~	70 81%	247 81%	530 79%	719 78%	59 88%*	418 75%*	399 84%*
NO	215 21%	49 28%*	55 24%	50 16%*	61 19%		112 21%	3 23%~	10 34%~	1 64%~	4 33%~	2 30%~	16 19%	58 19%	145 21%	197 22%	8 12%*	140 25%*	76 16%*
NOT ANSWERED	35	5	8	11	12		16		3		1		7	5	26	29	3	18	17
VALID CASES NUMBER OF RESPONDENTS	1033 1068 100%	172 177 100%	228 236 100%	315 326 100%	317 329 100%		525 541	13 13	28 31	2 2	12 13	7 7	86 93	305 310	675 701	916 945	67 70	558 576	475 492 100%

[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	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER					
		OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND	BLCK OR AFR- WHTC AMER	NATV HAW/ AS- IAN	AMER PAC ILND	IND/ ALSK NATV	MUL- OTHR	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
Q14 WORST HEALTH CARE POSSIBLE		12 0.3%	1 0.1%	4 0.5%	4 0.4%	3 0.3%		5 0.3%		~	~	~	~	2 0.2%	2 0.2%	7 0.3%	8 0.2%	1 0.6%	10 0.4%	2 0.2%	
01		11 0.3%	5 ~0.6%	5 0.5%	1 0.1%	4 0.2%	1 2%		1 ~	6%~	~	~	~	1 ~0.3%	1 0.3%	3 0.3%	8 0.3%	9 0.3%	1 0.6%	1 0.1%*0.9%*	
02		14 0.4%	1 0.1%	4 0.4%	2 0.2%	7 0.8%	6 0.3%		~	~	~	~	~	3 ~0.9%	3 0.3%	3 0.3%	8 0.3%	11 0.3%	2 1%	11 0.4% 0.3%	
03		14 0.4%	1 0.1%	3 0.3%	4 0.3%	6 0.7%	5 0.3%		~	~	~	4%	~	2 ~0.5%	2 0.3%	5 0.3%	7 0.3%	9 0.3%	3 2%	6 0.2% 0.7%	
04		23 0.6%	3 0.4%	7 0.8%	5 0.4%	8 0.9%	12 0.7%		~	~	~	1%	~	1 ~0.5%	2 0.7%	8 0.6%	14 0.6%	20 1%	2 0.6% 1%	19 0.7% 0.4%	
05		116 3%	19 3%	17 2%*	35 3%	45 5%*	58 3%		3 ~	2%~	~	13%*	4%~	1 3%	10 3%	30 3%	77 3%	97 3%*	12 7%*	80 3%	36 3%
06		108 3%	24 3%	21 2%	30 3%	33 3%	55 3%	4 6%	5 5%	~	~	9%~	2%*	2 2%	5 3%	27 3%	72 3%	92 3%	8 5%	75 3%	33 3%
07		277 8%	52 7%	73 8%	68 6%	84 9%	154 9%*	3 5%	13 13%	1 3%~	3 6%	4 18%~	30 9%	53 5%*	209 9%*	247 7%	18 11%	180 7%*	18 9%*	97 9%*	
08		764 21%	148 21%	174 20%	227 21%	215 22%	399 23%*	9 14%	26 25%	2 15%~	11 21%	5 23%~	66 21%	198 18%*	523 22%*	679 21%*	39 24%	521 20%	243 23%		
09		777 21%	149 21%	181 20%	230 22%	218 23%	371 21%	12 19%	25 25%	4 36%~	6 12%	4 18%~	68 21%	256 23%	489 22%*	722 21%	27 17%	556 22%	221 21%		
BEST HEALTH CARE POSSIBLE		1520 42%	324 45%	400 45%*	458 43%	337 35%*	688 39%*	34 54%	31 30%*	5 40%~	22 42%	7 28%~	134 42%	518 47%*	929 40%*	1411 43%*	51 31%*	1123 43%*	396 38%*		
#8-10 (NET)		3061 84%	621 86%	755 85%	915 86%	770 80%*	1458 83%	55 87%	82 80%	11 90%~	39 76%	16 69%~	267 83%	972 88%*	1941 83%*	2812 85%*	118 72%*	2200 85%*	860 82%*		

Continued

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

	BANT OT1	AGE				RACE								ETHNIC- ITY	HEALTH STATUS	CCC SCREENER		
	OHP TOT CHLD	13 AND OVER				BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTH	PAN- TI	HIS- PAN- IC	NOT GOOD PAN- IC	EX & VERY & GOOD POOR			
9-10 (NET)	2297 63%	473 65%	581 65%	688 64%	555 58%*	1059 60%*	46 73%	56 55%	9 75%~	28 55%	11 46%~	201 63%	773 70%*	1417 61%*	2133 65%*	79 48%*	1679 65%*	617 59%*
NOT ANSWERED	86	16	25	22	23	21	2	3		1	2	2	22	31	50	3	71	14
VALID CASES NUMBER OF RESPONDENTS	3637 3723 100%	722 738 100%	889 914 100%	1068 1090 100%	958 981 100%	1758 1779 100%	63 65 100%	102 105 100%	12 12 100%	52 53 100%	23 25 100%	320 322 100%	1102 1124 100%	2342 2373 100%	3306 3356 100%	165 168 100%	2585 2656 1053 1067	
MEAN	8.70	8.84	8.77	8.74	8.48	8.64	8.99	8.55	8.67	8.26	8.26	8.67	8.89	8.65	8.76	8.07	8.76	8.56
p stat_(*=Sig @ p<=.05)		.004*	.148	.304	.000*	.035*	.156	.246		~.134		~.739	.000*	.006*	.000*	.000*	.001*	.001*

[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	AGE					RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
		OHP TOT CHLD	13 AND OVER				BLCK OR AFR- MER	NATV HAW/ AS- AMER	AMER IND/ PAC	ALSK	MUL- TI	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	19 2%			
			<4	4-7	8-12	OVER	WHT	AMER	IAN	ILND	NATV	OTHR	IC	18 2%	36 2%	49 1%	5 3%	41 2%	
Q15	NEVER	60 2%	9 1%	14 2%	19 2%	18 2%	21 1%*	6 ~	1 6%	8 ~	1 3%	8 ~	18 2%	36 2%	49 1%	5 3%	41 2%	19 2%	
	SOMETIMES	331 9%	55 8%	75 8%	100 9%	100 10%	143 8%	6 9%	22 22%*	3 29%~	4 7%	1 4%~	25 8%	102 9%	201 9%	274 8%*	35 21%*	209 8%*	122 12%*
	USUALLY	1068 29%	167 23%*	260 29%	323 30%	319 33%*	507 29%	11 17%*	41 40%*	3 21%~	16 31%	10 43%~	81 25%	351 32%*	665 28%	955 29%*	64 39%*	712 28%*	357 34%*
	ALWAYS	2176 60%	493 68%*	537 61%	625 59%	521 54%*	1086 62%*	48 74%*	33 32%*	6 50%~	30 59%	13 53%~	208 65%	635 57%*	1444 62%*	2033 61%*	61 37%*	1618 63%*	558 53%*
	#ALWAYS + USUALLY (NET)	3245 89%	659 91%	797 90%	948 89%	840 88%	1593 91%*	59 91%	74 72%*	9 71%~	47 90%	23 96%~	289 90%	986 89%	2109 90%	2989 90%*	125 76%*	2330 90%*	915 87%*
	TOP BOX SCORE	2176 60%	493 68%*	537 61%	625 59%	521 54%*	1086 62%*	48 74%*	33 32%*	6 50%~	30 59%	13 53%~	208 65%	635 57%*	1444 62%*	2033 61%*	61 37%*	1618 63%*	558 53%*
	NOT ANSWERED	87	14	28	22	22	22		3		1	1	1	19	27	45	3	76	11
VALID CASES	3636	724	886	1068	959	1757	65	102	12	52	24	321	1105	2346	3311	165	2580	1056	
NUMBER OF RESPONDENTS	3723	738	914	1090	981	1779	65	105	12	53	25	322	1124	2373	3356	168	2656	1067	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
	OHP TOT CHLD					BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR			
		<4	4-7	8-12	OVER														
Q16	YES	3996 74%	246 27%*	1019 83%*	1467 88%*	1265 81%*	1923 77%*	70 75%	112 63%*	9 65%~	61 86%*	31 81%~	348 78%	1205 69%*	2570 77%*	3635 74%*	180 78%	2846 70%*	1150 86%*
	NO	1376 26%	663 73%*	212 17%*	209 12%*	290 19%*	572 23%*	23 25%	66 37%*	5 35%~	10 14%*	7 19%~	98 22%	538 31%*	773 23%*	1277 26%*	49 22%	1195 30%*	180 14%*
	NOT ANSWERED	226	45	66	66	49	11	1	2	1	1	3	25	15	39	3	223	3	
VALID CASES		5371	909	1230	1677	1555	2494	93	178	14	72	38	445	1743	3344	4912	229	4041	1330
NUMBER OF RESPONDENTS		5597	954	1296	1743	1604	2505	94	180	14	73	38	448	1768	3359	4951	232	4264	1333
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE				RACE								ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
	OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND	BLCK OR AFR- WHT	NATV HAW/ AMER AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD POOR	EX & VERY GOOD FAIR & POOR	NO CCC	NO CCC
Q17																			
YES		433 11%	29 12%	130 13%*	153 11%	121 10%	181 10%*	10 15%	7 7%	5 ~	2 9%	37 7%~	154 11%	244 10%*	357 10%*	52 30%*	212 8%*	221 20%*	
NO		3362 89%	210 88%	851 87%*	1250 89%	1050 90%	1637 90%*	56 85%	92 93%	9 100%~	53 91%	27 93%~	292 89%	1005 87%*	2176 90%*	3093 90%*	118 70%*	2493 92%*	868 80%*
NOT ANSWERED		196	5	40	62	89	104	4	11	1	4	2	17	45	139	178	10	138	58
VALID CASES		3795	239	982	1403	1171	1819	66	99	9	58	29	329	1159	2421	3449	170	2706	1089
NUMBER OF RESPONDENTS		3991	244	1022	1465	1260	1923	70	110	9	62	31	346	1204	2560	3627	180	2844	1147
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q16 = YES]

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

	BANT OT1	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- WHTC AMER	NATV HAW/ AS- IAN	AMER PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD 93%	EX & VERY GOOD 92%	FAIR 94%	NO & GOOD 92%	CCC POOR 98%*	CCC 92%
Q18 #YES	387 92%	26 93%~	122 94%	131 89%	107 94%	168 94%	9 90%~	4 62%~	4 ~100%~	1 50%~	34 94%~	139 93%	222 94%	318 92%	49 98%*	189 92%	198 92%		
NO	32 8%	2 7%~	8 6%	16 11%	7 6%	11 6%	1 10%~	3 38%~	~	~ 50%~	2 6%~	11 7%	15 6%	27 8%	1 2%*	16 8%	16 8%		
NOT ANSWERED	10	1		4	5	3						4	4	8	1	6	4		
VALID CASES NUMBER OF RESPONDENTS	419 429 100%	28 29 100%	130 130 100%	147 151 100%	114 119 100%	179 182 100%	10 10 100%	7 7 100%	4 4 100%	2 2 100%	36 36 100%	150 154 100%	237 241 100%	345 353 100%	50 51 100%	205 211 100%	214 218 100%		

[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	AGE				RACE								ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
		OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND WHT	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	PAN- TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD PAN- IC	EX & VERY & GOOD POOR	NO CCC
Q19	YES	220	45	54	75	46	107	5	3	1	1	3	17	65	141	179	31	87	134
		4%	5%	4%	4%	3%*	4%	6%	1%*	10%~	2%	8%~	4%	4%	4%	4%*	13%*	2%*	10%*
	NO	5128	857	1168	1603	1501	2382	85	173	13	69	34	428	1683	3188	4721	201	3938	1190
		96%	95%	96%	96%	97%*	96%	94%	99%*	90%~	98%	92%~	96%	96%	96%	96%*	87%*	98%*	90%*
	NOT ANSWERED	248	51	74	66	57	16	4	4		3	1	4	20	30	51	1	239	9
VALID CASES		5349	903	1222	1677	1547	2489	90	176	14	70	37	444	1748	3329	4900	231	4025	1324
NUMBER OF RESPONDENTS		5597	954	1296	1743	1604	2505	94	180	14	73	38	448	1768	3359	4951	232	4264	1333
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
	OHP TOT CHLD	13 AND CHLD				BLCK OR AFR- WHT MER	NATV HAW/ AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTH TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD FAIR & GOOD POOR	EX & VERY & GOOD POOR			
		<4	4-7	8-12	OVER													
Q20	NEVER	21 10%	1 2%~	5 9%~	11 15%~	4 9%~	13 12%~	1 20%~	~	~	~	~	6%~	15 11%	15 9%~	5 17%~		
	SOMETIMES	29 14%	4 8%~	10 19%~	9 12%~	7 15%~	12 11%	1 ~	1 33%~100%~	1 50%~	1 ~	3 19%~	8 13%	18 13%	22 13%~	4 14%~		
	USUALLY	48 23%	12 26%~	9 17%~	17 24%~	10 24%~	23 22%	1 20%~	~	~	~	1 35%~	5 26%~	18 28%	29 21%	38 22%~	9 31%~	
	ALWAYS	116 54%	29 64%~	30 55%~	34 49%~	23 52%~	59 55%	3 60%~	2 67%~	1 ~	2 50%~	10 65%~	34 55%~	78 53%~	101 55%~	11 38%~	54 65%~	62 47%*
	#ALWAYS + USUALLY (NET)	164 76%	40 90%~	39 72%~	52 73%~	33 76%~	82 77%~	4 80%~	2 67%~	1 ~	3 50%~	15 100%~	52 81%~	106 76%	139 79%~	20 70%~	66 80%	98 74%
	TOP BOX SCORE	116 54%	29 64%~	30 55%~	34 49%~	23 52%~	59 55%	3 60%~	2 67%~	1 ~	2 50%~	10 65%~	34 55%~	78 53%~	101 57%~	11 38%~	54 65%*	62 47%*
	NOT ANSWERED	5	1	1	3								1		2	1	3	2
VALID CASES	214	45	55	71	43	107	5	3	1	2	3	18	64	140	176	29	82	132
NUMBER OF RESPONDENTS	219	46	55	72	46	107	5	3	1	2	3	18	65	140	178	30	85	134
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q19 = YES]

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

	BANT OT1	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND	BLCK OR	NATV HAW/ IND/ AFR- AS- PAC ALSK MUL- WHTE AMER IAN ILND NATV OTHR TI	HIS- PAN- PAN- IC	HIS- PAN- PAN- IC	NOT GOOD & GOOD	EX & VERY FAIR POOR	NO CCC	NO CCC					
Q21 #YES	175 83%	39 88%~	45 84%~	57 81%~	34 80%~	87 83%	3 60%~100%~	2 ~ 50%~100%~	1 65%~	3 94%*	12 78%*	147 84%~	21 75%~	66 83%	109 83%				
NO	36 17%	5 12%~	9 16%~	14 19%~	9 20%~	18 17%	2 40%~	1 ~100%~	1 50%~	6 ~ 35%~	4 6%*	31 22%*	28 16%~	7 25%~	14 17%	23 17%			
NOT ANSWERED	8	2	2	1	3	2	1			1	3	3	2	5	3				
VALID CASES NUMBER OF RESPONDENTS	211 219 100%	44 46 100%	53 55 100%	71 72 100%	43 46 100%	105 107 100%	5 5 100%	2 3 100%	1 2 100%	2 3 100%	3 18 100%	18 140 100%	64 65 100%	137 140 100%	175 178 100%	28 30 100%	80 85 100%	131 134 100%	

[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	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	OHP TOT CHLD	13 AND				BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	IND/ PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	NO CCC	
Q22																				
YES	540 10%	78 9%	169 14%*	155 9%	137 9%	262 11%	8 9%	11 6%*	9 ~ 12%	2 6%~	40 9%	173 10%	334 10%	448 9%*	65 28%*	178 4%*	362 27%*			
NO	4810 90%	829 91%	1054 86%*	1520 91%	1407 91%	2224 89%	84 91%	166 94%*	14 100%~	61 88%	36 94%~	404 91%	1578 90%	2997 90%	4460 91%*	166 72%*	3849 96%*	960 73%*		
NOT ANSWERED	247	47	73	68	59	19	2	2	3	3	3	17	28	42	1	237	10			
VALID CASES	5350	907	1223	1675	1545	2486	92	178	14	70	38	445	1751	3331	4909	231	4027	1323		
NUMBER OF RESPONDENTS	5597	954	1296	1743	1604	2505	94	180	14	73	38	448	1768	3359	4951	232	4264	1333		
	100%	100%	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	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER	
		OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND	BLCK	NATV	AMER	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR		
								OR	AFR-	AS-					
Q23								WHT	AMER	IAN	ILND	NATV	OTHR	TI	
NEVER		64	9	18	20	18		38		2		1		5	13 48 53 7 19 45
		12%	11%	11%	14%	14%		15%		~ 16%~		~ 10%~		~ 11%~	8%* 15%* 12% 12% 11% 13%
SOMETIMES		81	11	26	22	22		35	1	2		3		7	29 47 61 16 25 56
		16%	15%	16%	15%	17%		14%	14%~	23%~		~ 40%~		~ 16%~	18% 15% 14% 26% 15% 16%
USUALLY		128	16	42	33	37		60	5	3		2		10	44 80 104 20 35 93
		25%	22%	25%	22%	29%		24%	73%~	23%~		~ 20%~		~ 23%~	26% 25% 24% 34% 21% 27%
ALWAYS		243	40	80	73	50		117	1	4		2		22	82 145 214 17 91 153
		47%	52%	48%	49%	40%		47%	14%~	38%~		~ 30%~100%~		50%~	49% 45% 49%* 28%* 53%* 44%*
#ALWAYS + USUALLY (NET)		371	56	122	106	88		177	6	7		4		31	126 225 317 37 126 245
		72%	74%	73%	72%	69%		71%	86%~	62%~		~ 50%~100%~		73%~	75% 70% 74% 62% 74% 71%
TOP BOX SCORE		243	40	80	73	50		117	1	4		2		22	82 145 214 17 91 153
		47%	52%	48%	49%	40%		47%	14%~	38%~		~ 30%~100%~		50%~	49% 45% 49%* 28%* 53%* 44%*
NOT ANSWERED		24	2	6	5	10		13	1			1			4 17 17 5 8 15
VALID CASES		516	76	166	148	127		250	7	11		8		43	168 319 432 60 170 347
NUMBER OF RESPONDENTS		540	78	172	153	137		263	8	11		9		43	172 336 449 65 178 362
		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	AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER					BLCK OR AFR- MER WHT	NATV HAW/ AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q24 #YES		358 69%	55 75%	108 64%	99 67%	96 74%	157 63%*	6 75%~	9 77%~	5 ~ 70%~	30 ~ 69%~	136 80%*	204 64%*	299 69%	43 70%	118 70%	240 69%	
NO		159 31%	18 25%	60 36%	48 33%	33 26%	91 37%*	2 25%~	2 23%~	2 ~ 30%~	13 100%~	34 31%~	115 20%*	133 36%*	19 31%	51 30%	109 31%	
NOT ANSWERED		22	5	4	6	7	15			1		2	16	17	3	9	13	
VALID CASES NUMBER OF RESPONDENTS		518 540 100%	73 78 100%	168 172 100%	147 153 100%	130 137 100%	248 263 100%	8 8 100%	11 11 100%	8 9 100%	2 2 100%	43 43 100%	170 172 100%	320 336 100%	432 449 100%	62 65 100%	169 178 100%	349 362 100%

[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	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	OHP TOT CHLD					BLCK OR AFR- WHTC AMER	NATV HAW/ AS- IAN	AMER IND/ PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD 11%*	EX & VERY GOOD 17%*	FAIR 14%*	NO GOOD 14%*	POOR 39%*	NO CCC 5%*	CCC 44%*
Q25			13	AND																
YES	794 15%	36 4%*	180 15%	273 16%*	306 20%*	428 17%*	9 10%	10 6%*	1 6%~	14 20%	4 11%~	84 19%*	192 11%*	562 17%*	667 14%*	89 39%*	217 5%*	578 44%*		
NO	4549 85%	871 96%*	1040 85%	1398 84%*	1240 80%*	2057 83%*	81 90%	167 94%*	13 94%~	55 80%	34 89%~	363 81%*	1558 89%*	2766 83%*	4237 86%*	140 61%*	3806 95%*	742 56%*		
NOT ANSWERED	253	47	76	72	58	20	4	3		4		2	18	31	46	3	241	12		
VALID CASES	5344	907	1220	1671	1546	2485	90	177	14	69	38	446	1750	3328	4905	229	4023	1321		
NUMBER OF RESPONDENTS	5597	954	1296	1743	1604	2505	94	180	14	73	38	448	1768	3359	4951	232	4264	1333		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
		OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND	BLCK	NATV	AMER	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC					
								OR	HAW/	IND/									
Q26	NEVER	99 13%	4 11%~	26 15%~	39 15%~	31 10%~	51 12%~	2 23%~	2 17%~	~	1 ~ 26%~	13 17%~	20 11%~	71 13%~	77 12%~	14 16%~	23 11%~	76 14%~	
	SOMETIMES	130 17%	8 25%~	31 18%~	44 17%~	47 16%~	62 15%~	5 56%~	2 25%~	~	2 11%~	2 49%~	17 22%~	91 16%~	106 17%~	15 16%~	39 17%~	92 16%~	
	USUALLY	185 24%	8 25%~	41 24%~	62 24%~	74 24%~	100 24%~	1 11%~	1 16%~	~	6 42%~	19 ~ 24%	49 26%~	130 24%~	146 23%~	30 34%~	45 22%~	140 25%~	
	ALWAYS	355 46%	13 40%~	75 43%~	116 45%~	150 50%~	205 49%~	1 11%~	4 42%~	1 100%~	7 47%~	1 26%~	29 37%~	89 47%~	251 46%~	316 49%~	28 32%~	101 49%~	253 45%~
	#ALWAYS + USUALLY (NET)	540 70%	21 65%~	116 67%~	178 68%~	225 74%~	305 73%~	2 21%~	5 58%~	1 100%~	13 89%~	1 26%~	49 61%~	138 73%~	380 70%~	462 72%~	58 67%~	146 70%~	394 70%~
	TOP BOX SCORE	355 46%	13 40%~	75 43%~	116 45%~	150 50%~	205 49%~	1 11%~	4 42%~	1 100%~	7 47%~	1 26%~	29 37%~	89 47%~	251 46%~	316 49%~	28 32%~	101 49%~	253 45%~
	NOT ANSWERED	22	2	8	8	4	10						4	4	14	19	1	7	15
VALID CASES	769	33	172	261	303	418	9	9	1	15	4	79	189	542	646	87	208	561	
NUMBER OF RESPONDENTS	791	35	180	269	307	428	9	9	1	15	4	83	193	556	665	88	215	576	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q25 = YES]

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

	BANT OT1	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
	OHP TOT CHLD	13 AND				BLCK OR AFR- WHTC	NATV HAW/ AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	PAN- TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD 65%*	EX & VERY GOOD 56%	FAIR 55% 56%	NO & GOOD 68%*	CCC 125 56%
Q27 #YES	438 57%	23 69%~	91 53%	149 57%	175 59%	239 57%	3 34%~	5 51%~	10 ~ 63%~	2 51%~	34 46%*	121 65%*	298 55%	362 56%	58 68%*	125 60%	313 56%		
NO	327 43%	10 31%~	80 47%	114 43%	122 41%	182 43%	6 66%~	4 49%~	1 100%~	5 37%~	2 49%~	40 54%*	65 35%*	242 45%	281 44%	28 32%*	83 40%	245 44%	
NOT ANSWERED	26	2	8	6	9	7						9	7	15	22	2	7	19	
VALID CASES NUMBER OF RESPONDENTS	765 791 100%	33 35 100%	172 180 100%	263 269 100%	298 307 100%	421 428 100%	9 9 100%	9 9 100%	1 1 100%	15 15 100%	4 4 100%	74 83 100%	186 193 100%	541 556 100%	643 665 100%	86 88 100%	208 215 100%	557 576 100%	

[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	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	OHP TOT CHLD					BLCK OR AFR- WHTC AMER	NATV HAW/ AS- AMER	AMER IAN	IND/ PAC ILND	ALSK NATV	MUL- OTHR	PAN- TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD 18%*	EX & VERY GOOD 24%*	FAIR 21%*	NO & GOOD 47%*	CCC 108	CCC 562
Q28			13	AND																
YES	1173 22%	169 19%*	275 23%	345 21%	384 25%*	625 25%*	15 16%	22 12%*	4 26%~	14 20%	3 7%~	121 27%*	304 18%*	812 24%*	1017 21%*	108 47%*	562 14%*	612 47%*		
NO	4135 78%	733 81%*	935 77%	1312 79%	1154 75%*	1855 75%*	76 84%	156 88%*	10 74%~	54 80%	34 93%~	323 73%*	1427 82%*	2508 76%*	3861 79%*	120 53%*	3433 86%*	700 53%*		
NOT ANSWERED	290	52	86	85	66	25	3	2		6	1	4	37	39	72	4	269	20		
VALID CASES	5307	902	1210	1658	1538	2480	91	178	14	67	37	444	1731	3320	4879	228	3995	1313		
NUMBER OF RESPONDENTS	5597	954	1296	1743	1604	2505	94	180	14	73	38	448	1768	3359	4951	232	4264	1333		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		

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

	BANT OT1	AGE				RACE								ETHNIC- ITY	HEALTH STATUS		CCC SCREENER	
	OHP TOT CHLD	13 AND				BLCK OR AFR- WHTC AMER	NATV HAW/ AS- IAN	AMER PAC ILND	ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD 68%*	EX & VERY GOOD 59%*	FAIR 61% 32%*	NO & GOOD 67% 41%*	CCC 69 34 39% 33%	CCC 317 378 217 218 20 15
Q29 #YES	694 61%	104 63%	159 60%	205 61%	226 62%	364 60%	7 47%~	12 67%~	8 ~ 61%~	2 60%~	71 59%	199 68%*	466 59%*	601 61%	69 67%	317 59%	378 63%	
NO	435 39%	61 37%	107 40%	130 39%	137 38%	243 40%	8 53%~	6 33%~	3 100%~	5 39%~	1 40%~	51 41%	95 32%*	318 41%*	384 39%	34 33%	217 41%	218 37%
NOT ANSWERED	36	5	8	7	16	19		1		1		7	21	25	4	20	15	
VALID CASES NUMBER OF RESPONDENTS	1129 1165 100%	165 170 100%	266 274 100%	335 342 100%	363 379 100%	607 626 100%	15 15 100%	19 20 100%	3 3 100%	13 14 100%	3 3 100%	122 122 100%	294 301 100%	783 804 100%	985 1010 100%	103 107 100%	534 554 100%	596 611 100%

[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	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND	BLCK OR AFR- WHTC AMER	NATV HAW/ AS- IAN	AMER IND/ PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD 86%*	EX & VERY GOOD 89%*	FAIR 89%*	NO GOOD 87%*	SCCC POOR 86%*	SCCC 193 86%*
Q30	YES	4653 89%	830 93%*	1095 91%*	1451 88%	1277 84%*	2229 91%*	73 84%	115 65%*	10 70%~	52 81%	28 74%~	403 91%	1495 86%*	2940 90%*	4286 89%	193 86%	3442 87%*	1212 93%*	
	NO	600 11%	64 7%*	106 9%*	193 12%	237 16%*	211 9%*	14 16%	61 35%*	4 30%~	12 19%	10 26%~	40 9%	246 14%*	332 10%*	553 11%	32 14%	505 13%*	95 7%*	
	NOT ANSWERED	344	61	95	99	90	65	7	3		9		5	28	87	112	7	317	26	
VALID CASES		5253	893	1201	1644	1514	2440	87	177	14	64	38	443	1740	3272	4839	225	3947	1307	
NUMBER OF RESPONDENTS		5597	954	1296	1743	1604	2505	94	180	14	73	38	448	1768	3359	4951	232	4264	1333	
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- PAN- WHT	NATV HAW/ AS- AMER IAN	AMER IND/ PAC ILND	ALSK NATV	MUL- OTH TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY FAIR & POOR	NO CCC	NO CCC		
Q31																		
NONE	1204 27%	115 14%*	267 25%	464 34%*	358 29%*	615 29%*	15 21%	19 17%*	1 9%~	16 30%	5 18%~	109 28%	376 26%	785 28%	1151 28%*	26 14%*	1003 31%*	201 17%*
1 TIME	1570 35%	286 36%	393 37%	472 34%	419 34%	743 35%	25 36%	58 53%*	7 64%~	22 41%	16 60%~	121 31%	504 35%	991 35%	1452 35%	58 32%	1185 36%*	384 33%*
2	935 21%	223 28%*	211 20%	254 18%*	246 20%	434 20%	16 23%	25 23%	2 19%~	7 14%	4 14%~	96 25%	300 21%	586 21%	848 21%	40 22%	663 20%*	272 23%*
3	405 9%	100 12%*	92 9%	99 7%*	114 9%	198 9%	5 7%	3 2%*		5 ~ 10%	1 4%~	34 9%	131 9%	251 9%	365 9%	20 11%	251 8%*	154 13%*
4	166 4%	36 5%	41 4%	40 3%*	49 4%	69 3%	6 9%	2 2%	1 9%~	2 4%	1 4%~	18 5%	55 4%	98 3%	143 3%*	16 9%*	90 3%*	77 7%*
5 TO 9	142 3%	32 4%	38 4%	45 3%	28 2%*	65 3%	2 3%	3 2%		~	~	8 2%	58 4%*	81 3%	122 3%*	17 9%*	72 2%*	71 6%*
10 OR MORE TIMES	35 0.8%	7 0.9%	7 0.7%	11 0.8%	9 0.8%	17 0.8%	1 1%		~	~	~	2 ~0.5%	9 0.6%	21 0.7%	24 0.6%*	7 4%*	18 0.5%*	17 1%*
NOT ANSWERED	182	29	46	60	47	88	3	7			2	12	59	112	162	10	151	31
VALID CASES NUMBER OF RESPONDENTS	4457 4639	799 828	1048 1094	1386 1446	1224 1271	2141 2229	70 73	109 116	11 11	52 52	26 28	390 402	1433 1492	2813 2925	4105 4267	183 193	3280 3431	1177 1208
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q30 = YES]

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

	BANT OT1	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
		OHP TOT CHLD	<4	4-7	8-12	OVER	BLCK OR		NATV AMER HAW/ IND/ AFR- AS- PAC ALSK MUL- WHTE AMER IAN ILND NATV OTHR TI		HIS- HIS- PAN- PAN- IC IC		NOT EX & VERY GOOD FAIR & GOOD POOR		NO CCC		CCC CCC		
							13 AND												
Q31A ALWAYS		71 2%	15 2%	16 2%	23 3%	17 2%	8 0.5%*	1 2%	1 1%	2 21%~	1 2%~	~ ~	4 2%	52 5%*0.8%*	17 2%	65 2%	4 2%	55 2%	16 2%
USUALLY		54 2%	11 2%	16 2%	16 2%	10 1%	3 0.2%*	3 6%	4 5%	~ ~	~ ~	~ ~0.4%*	1 4%*0.6%*	41 4%	11 5%	45 2%	5 3%	46 2%*0.8%*	8
SOMETIMES		214 7%	38 6%	55 7%	58 6%	63 7%	28 2%*	2 4%	15 17%*	1 5%~	1 2%~	2 10%~	5 2%*	150 14%*	51 2%*	179 6%*	23 15%*	171 8%*	43 4%*
NEVER		2890 89%	618 91%	693 89%	818 89%	762 89%	1481 97%*	48 89%	69 77%*	7 74%~	35 96%~	19 90%~	271 96%*	800 77%*	1946 96%*	2649 90%*	124 80%*	1988 88%*	902 93%*
#NEVER + SOMETIMES (NET)		3104 96%	657 96%	748 96%	875 97%	825 99%*	1509 93%	50 94%	84 79%~	8 98%~100%~	36 98%~	21 98%*	277 91%*	950 99%*	1997 96%*	2827 94%*	147 94%	2159 96%*	945 98%*
TOP BOX SCORE		2890 89%	618 91%	693 89%	818 89%	762 89%	1481 97%*	48 89%	69 77%*	7 74%~	35 96%~	19 90%~	271 96%*	800 77%*	1946 96%*	2649 90%*	124 80%*	1988 88%*	902 93%*
NOT ANSWERED		28	1	6	7	14	7	1						13	9	22	1	21	7
VALID CASES NUMBER OF RESPONDENTS		3230 3258 100%	683 684 100%	779 785 100%	915 922 100%	853 867 100%	1520 1527 100%	54 55 100%	89 89 100%	10 100%	37 37 100%	21 21 100%	282 282 100%	1043 1056 100%	2025 2034 100%	2937 2959 100%	156 157 100%	2261 2282 100%	969 976 100%

[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	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
		OHP TOT CHLD	13 AND				BLCK	NATV	AMER	HAW/	IND/	MUL-	HIS-	HIS-	NOT	EX &	VERY	GOOD	FAIR	NO CCC	CCC
			<4	4-7	8-12	OVER	WHTC	AFR-	AS-	PAC	ALSK	MUL-	PAN-	PAN-	&	&	GOOD	POOR			
Q32	NEVER	66 2%	10 2%	18 2%	18 2%	20 2%	19 1%*	1 2%	2 2%	~	1 2%~	1 5%~	6 2%	28 3%	31 2%*	53 2%*	7 4%	50 2%	16 2%		
	SOMETIMES	109 3%	17 2%	33 4%	30 3%	29 3%	39 3%*	4 7%	8 9%	~	1 2%~	~	4 2%*	46 4%*	54 3%*	86 3%*	14 9%*	77 3%	32 3%		
	USUALLY	446 14%	89 13%	99 13%	117 13%	141 17%*	170 11%*	7 13%	21 24%*	2 21%~	4 12%~	6 29%~	32 11%	182 17%*	241 12%*	398 14%	31 20%	309 14%	137 14%		
	ALWAYS	2606 81%	565 83%	629 81%	751 82%	661 78%*	1286 85%*	42 78%	57 65%*	8 79%~	31 84%~	14 66%~	238 85%*	795 76%*	1691 84%*	2402 82%*	104 82%*	1823 67%*	783 81%		
	#ALWAYS + USUALLY (NET)	3052 95%	654 96%*	728 93%	868 95%	802 94%	1456 96%*	49 91%	78 89%	10 100%~	35 96%~	20 95%~	270 96%	977 93%*	1932 96%*	2799 95%*	134 95%*	2132 87%*	920 94%		
	TOP BOX SCORE	2606 81%	565 83%	629 81%	751 82%	661 78%*	1286 85%*	42 78%	57 65%*	8 79%~	31 84%~	14 66%~	238 85%*	795 76%*	1691 84%*	2402 82%*	104 82%*	1823 67%*	783 81%		
	NOT ANSWERED	31	3	6	6	16	13	1	2				2	5	16	21	2	23	8		
VALID CASES	3227	681	779	916	851	1514	54	87	10	37	21	280	1051	2018	2938	155	2259	968			
NUMBER OF RESPONDENTS	3258	684	785	922	867	1527	55	89	10	37	21	282	1056	2034	2959	157	2282	976			
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		

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

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

	BANT OT1	AGE				RACE								ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
		OHP TOT CHLD	13 AND OVER			BLCK OR AFR- WHT AMER				NATV AMER HAW/ IND/ AS- PAC ALSK IAN ILND NATV OTHR TI				NOT HIS- PAN- IC	EX & VERY GOOD FAIR & GOOD POOR					
			<4	4-7	8-12	OVER	WHT	AMER	IAN	ILND	NATV	OTHR	TI		11	17	26	4	22	11
Q33	NEVER	33	4	6	6	16	10	1	1	1	9%~	~	~	4	11	17	26	4	22	11
		1%	0.6%	0.8%	0.7%	2%*	0.7%	2%	1%	9%~	~	~	1%	1%	0.8%	0.9%	3%	1%	1%	
	SOMETIMES	127	20	36	39	32	50	3	7	~	4%~	15%~	4%	45	74	102	21	78	49	
		4%	3%	5%	4%	4%	3%	6%	8%	~	4%~	15%~	4%	4%	4%	3%*	13%*	3%*	5%*	
	USUALLY	438	89	116	101	133	215	2	13	2	2	2	35	137	277	389	26	290	148	
		14%	13%	15%	11%*	16%	14%	4%*	15%	21%~	6%~	10%~	12%	13%	14%	13%	16%	13%	15%	
	ALWAYS	2627	568	618	767	675	1242	49	67	7	33	16	229	857	1654	2423	106	1866	761	
		81%	83%	80%	84%*	79%*	82%	89%	76%	70%~	90%~	76%~	82%	82%	82%	82%*	68%*	83%*	79%*	
	#ALWAYS + USUALLY (NET)	3065	657	733	867	808	1457	51	81	9	36	18	264	995	1931	2812	132	2156	909	
		95%	96%*	95%	95%	94%	96%*	93%	91%	91%~	96%~	85%~	94%	95%	96%	96%*	84%*	96%*	94%*	
	TOP BOX SCORE	2627	568	618	767	675	1242	49	67	7	33	16	229	857	1654	2423	106	1866	761	
		81%	83%	80%	84%*	79%*	82%	89%	76%	70%~	90%~	76%~	82%	82%	82%	82%*	68%*	83%*	79%*	
	NOT ANSWERED	33	3	9	9	11	10		1				2	5	13	19		26	7	
VALID CASES	NUMBER OF RESPONDENTS	3225	681	776	913	856	1517	55	88	10	37	21	280	1051	2021	2940	157	2256	969	
		3258	684	785	922	867	1527	55	89	10	37	21	282	1056	2034	2959	157	2282	976	
		100%	100%	100%	100%	100%	100%	100%	100%	100%~	100%~	100%~	100%	100%	100%	100%	100%	100%	100%	

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

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

	BANT OT1	AGE				RACE								ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
	OHP TOT CHLD					BLCK OR AFR- WHT	NATV HAW/ AS- AMER	AMER IND/ PAC	ALSK	MUL- ILND NATV	OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR			
		<4	4-7	8-12	OVER	13 AND											NO CCC	CCC	
Q34	NEVER	34 1%	6 0.9%	8 1%	4 0.5%*	16 2%*	12 0.8%	1 2%	3 3%	~	~	~	4 2%	10 1%	20 1%	28 0.9%	4 3%	25 1%	9 0.9%
	SOMETIMES	90 3%	11 2%*	21 3%	31 3%	28 3%	42 3%	2 4%	5 6%	1 9%~	3 8%~	2 10%~	7 3%	24 2%	60 3%	79 3%	10 7%*	54 2%	36 4%
	USUALLY	388 12%	78 11%	99 13%	97 11%	115 13%	178 12%	6 11%	17 19%	2 16%~	3 8%~	3 14%~	33 12%	124 12%	242 12%	340 12%*	27 17%	261 12%	127 13%
	ALWAYS	2708 84%	586 86%	650 84%	778 86%	694 81%*	1284 85%	46 83%	64 72%*	8 75%~	31 84%~	16 76%~	235 84%	893 85%	1699 84%	2493 85%*	115 73%*	1909 85%	799 82%
	#ALWAYS + USUALLY (NET)	3097 96%	664 97%*	748 96%	875 96%	809 95%*	1462 96%	52 94%	80 91%	9 91%~	34 92%~	19 90%~	268 96%	1016 97%	1941 96%	2833 96%	142 91%*	2171 96%	926 95%
	TOP BOX SCORE	2708 84%	586 86%	650 84%	778 86%	694 81%*	1284 85%	46 83%	64 72%*	8 75%~	31 84%~	16 76%~	235 84%	893 85%	1699 84%	2493 85%*	115 73%*	1909 85%	799 82%
	NOT ANSWERED	38	2	8	12	15	11		1				2	5	14	19		32	5
VALID CASES	3220	682	777	910	852	1516	55	88	10	37	21	280	1051	2020	2940	157	2250	971	
NUMBER OF RESPONDENTS	3258	684	785	922	867	1527	55	89	10	37	21	282	1056	2034	2959	157	2282	976	
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

	BANT OT1	AGE				RACE								ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
	OHP TOT CHLD					BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR			
		<4	4-7	8-12	OVER														
Q35	YES	2180	93 68%	500 14%*	786 87%*	802 94%*	1041	33	49	8	23	16	198	696 67%	1381 69%	1991 68%	101 65%	1478 66%*	702 73%*
	NO	1019	581 32%	265 86%*	121 35%	49 13%*	471 6%*	22 31%	39 40%	2	14 44%*	5 21%~	80 38%~	350 33%	632 31%	936 32%	56 35%	755 34%*	263 27%*
	NOT ANSWERED	59	10	20	14	15	15		2				4	11	21	32	49	10	
VALID CASES		3199	674	765	908	852	1512	55	87	10	37	21	278	1045 1056	2013 2034	2927 2959	157 157	2233 2282	966 976
NUMBER OF RESPONDENTS		3258	684	785	922	867	1527	55	89	10	37	21	282						
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

	BANT OT1	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
		OHP TOT CHLD	13 AND WHT				BLCK OR AFR- AS- WHT	NATV HAW/ PAC ILND	AMER IND/ IAN NATV	MUL- OTHR TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
			<4	4-7	8-12	OVER	AMER	IAN	PAC	ALSK	MUL-	OTHR	TI						
Q36	NEVER	25 1%	1 1%	13 3%*	6 0.8%	5 0.7%	14 1%	2 ~	4 4%	1 ~	1 ~	1 ~0.5%	1 1%	8 1%	17 1%	23 1%	2 2%	12 0.9%	13 2%
	SOMETIMES	116 5%	5 5%	41 8%*	32 4%*	39 5%	50 5%	4 12%~	4 7%	1 12%~	1 3%~	1 7%~	10 5%	41 6%	71 5%	99 5%	14 14%*	76 5%	40 6%
	USUALLY	420 20%	17 19%	105 21%	147 19%	150 19%	206 20%	4 12%~	8 17%	2 26%~	5 23%~	2 14%~	40 21%	130 19%	269 20%	382 19%	21 21%	286 20%	134 19%
	ALWAYS	1587 74%	67 75%	333 68%*	596 76%	591 75%	756 74%	25 76%~	36 72%	5 62%~	16 73%~	12 80%~	144 74%	511 74%	1000 74%	1457 74%	64 63%*	1086 74%	501 73%
	#ALWAYS + USUALLY (NET)	2007 93%	84 94%	438 89%*	743 95%*	741 94%	962 94%	29 88%~	45 89%	7 88%~	21 97%~	14 93%~	184 94%	641 93%	1269 93%	1839 94%	85 84%*	1373 94%	634 92%
	TOP BOX SCORE	1587 74%	67 75%	333 68%*	596 76%	591 75%	756 74%	25 76%~	36 72%	5 62%~	16 73%~	12 80%~	144 74%	511 74%	1000 74%	1457 74%	64 63%*	1086 74%	501 73%
	NOT ANSWERED	28	2	5	5	17	14			1	1	4	5	21	25	1	17	12	
VALID CASES	NUMBER OF RESPONDENTS	2149 2177 100%	90 92 100%	492 497 100%	781 786 100%	785 802 100%	1026 1040 100%	33 33 100%	50 50 100%	8 8 100%	22 23 100%	15 16 100%	195 199 100%	690 695 100%	1357 1378 100%	1962 1987 100%	101 102 100%	1461 1478 100%	687 699 100%

[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	AGE				RACE								ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
		OHP TOT CHLD	13 AND OVER				BLCK OR AFR- PAN- WHT				NATV HAW/ AS- IAN				NOT HIS- PAN- IC	EX & VERY GOOD FAIR & GOOD POOR	NO CCC		
			<4	4-7	8-12	OVER	AMER	IAN	ILND	NATV	OTHER	TI	34	38	67	8	62	14	
Q37	NEVER	77 2%	15 2%	22 3%	19 2%	20 2%	21 1%*	3 6%	3 4%	2 25%~	2 6%~	1 5%~	4 2%	34 3%*	38 2%*	67 2%	8 5%	62 3%*	14 1%*
	SOMETIMES	251 8%	49 7%	72 9%	66 7%	63 8%	82 5%*	7 13%	15 17%*	1 5%~	2 4%~	4 20%~	15 5%	110 11%*	124 6%*	213 7%*	25 16%*	177 8%	74 8%
	USUALLY	729 23%	151 22%	187 25%	188 21%	202 24%	321 21%*	10 19%	29 32%	2 21%~	6 16%~	5 26%~	50 18%*	276 27%*	423 21%*	667 23%	37 23%	507 23%	222 23%
	ALWAYS	2126 67%	462 68%	481 63%*	628 70%*	555 66%	1089 72%*	34 63%	41 47%*	5 49%~	27 74%~	10 49%~	208 75%*	619 60%*	1429 71%*	1974 68%*	86 55%*	1471 66%	655 68%
	#ALWAYS + USUALLY (NET)	2855 90%	613 91%	668 88%*	817 91%	757 90%	1410 93%*	44 81%	70 79%*	7 70%~	33 90%~	15 74%~	258 93%*	896 86%*	1852 92%*	2641 90%*	123 79%*	1979 89%	877 91%
	TOP BOX SCORE	2126 67%	462 68%	481 63%*	628 70%*	555 66%	1089 72%*	34 63%	41 47%*	5 49%~	27 74%~	10 49%~	208 75%*	619 60%*	1429 71%*	1974 68%*	86 55%*	1471 66%	655 68%
	NOT ANSWERED	75	7	22	20	26	14	1	1			1	4	17	20	38	1	64	11
VALID CASES	3183	677	763	902	841	1513	54	88	10	37	20	278	1039	2014	2921	156	2218	965	
NUMBER OF RESPONDENTS	3258	684	785	922	867	1527	55	89	10	37	21	282	1056	2034	2959	157	2282	976	
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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	AGE				RACE								ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	OHP TOT CHLD					BLCK OR AFR- WHTC 4-7 AND 8-12 OVER	NATV HAW/ AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD 88%	EX & VERY GOOD 88%	FAIR 87%	NO CCC	SCREENER CCC
Q38 #YES	2792 87%	633 94%*	672 88%	798 89%	688 81%*	1318 87%	46 84%	76 87%	7 70%~	31 84%~	19 90%~	251 89%	925 88%	1753 87%	2576 88%	126 81%*	1946 88%	846 87%	
NO	399 13%	44 6%*	94 12%	99 11%	162 19%*	194 13%	9 16%	12 13%	3 30%~	6 16%~	2 10%~	30 11%	122 12%	262 13%	357 12%	29 19%*	277 12%	122 13%	
NOT ANSWERED	67	7	19	24	17	15		1				1	9	18	26	2	59	8	
VALID CASES NUMBER OF RESPONDENTS	3191 3258 100%	677 684 100%	766 785 100%	898 922 100%	850 867 100%	1512 1527 100%	55 55 100%	88 89 100%	10 37 100%	37 21 100%	21 282 100%	281 282 100%	1047 1056 100%	2016 2034 100%	2933 2959 100%	155 157 100%	2223 2282 100%	968 976 100%	

[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	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND	BLCK OR	NATV HAW/ IND/ AFR- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD 38%*	EX & VERY GOOD 39%*	FAIR 42% 67%*	NO CCC	SCREENER CCC
Q39	YES	1295 41%	262 39%	300 39%	355 40%	378 45%*	644 43%*	21 40%	29 34%	2 20%~	15 42%~	6 27%~	125 45%	396 38%*	847 42%	1149 39%*	105 67%*	723 33%*	572 59%*	
	NO	1879 59%	412 61%	460 61%	543 60%	464 55%*	866 57%*	32 60%	56 66%	8 80%~	22 58%~	15 73%~	153 55%	648 62%*	1165 58%	1774 61%*	51 33%*	1485 67%*	393 41%*	
	NOT ANSWERED	85	10	26	24	25	17	2	3				4	12	22	36	2	73	11	
VALID CASES	NUMBER OF RESPONDENTS	3173 3258	674 684	759 785	898 922	842 867	1510 1527	53 55	86 89	10 10	37 37	21 21	278 282	1044 1056	2012 2034	2923 2959	155 157	2209 2282	965 976	
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

	BANT OT1	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
		OHP TOT CHLD	13 AND				BLCK	NATV	AMER	HAW/	IND/	MUL-	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC		
			<4	4-7	8-12	OVER	WHTC	AFR- AMER	AS- IAN	PAC	ALSK								
Q40	NEVER	85 7%	18 7%	17 6%	23 7%	26 7%	49 8%	2 10%~	2 6%~	~	~	~	10 8%	20 5%	63 8%	73 6%	11 11%	42 6%	43 8%
	SOMETIMES	146 12%	29 12%	34 12%	37 11%	46 13%	66 10%	1 5%~	7 23%~	~	~	2 36%~	16 13%	49 13%	91 11%	121 11%*	19 19%	84 12%	62 11%
	USUALLY	351 28%	53 21%*	84 29%	100 29%	114 31%	178 28%	6 30%~	4 14%~	2 74%~	3 25%~	3 46%~	22 18%*	113 30%	223 27%	311 28%	27 27%	185 27%	167 30%
	ALWAYS	672 54%	150 60%*	158 54%	183 53%	181 49%*	338 54%	11 55%~	17 57%~	1 26%~	10 75%~	1 18%~	76 62%	198 52%	449 54%	611 55%*	44 43%*	384 55%	288 51%
	#ALWAYS + USUALLY (NET)	1024 82%	203 81%	241 83%	284 82%	295 80%	516 82%	17 85%~	21 71%~	3 100%~	13 100%~	4 64%~	97 79%	311 82%	671 81%	922 83%*	71 70%*	569 82%	455 81%
	TOP BOX SCORE	672 54%	150 60%*	158 54%	183 53%	181 49%*	338 54%	11 55%~	17 57%~	1 26%~	10 75%~	1 18%~	76 62%	198 52%	449 54%	611 55%*	44 43%*	384 55%	288 51%
	NOT ANSWERED	36	10	5	9	11	13	1			1	2	13	18	29	3	26	9	
VALID CASES	NUMBER OF RESPONDENTS	1254 1290 100%	251 261 100%	292 297 100%	344 353 100%	368 379 100%	631 644 100%	20 21 100%	29 29 100%	3 3 100%	13 14 100%	6 6 100%	123 125 100%	380 393 100%	826 844 100%	1116 1145 100%	101 104 100%	695 721 560	560 569 100%

[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	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER				
		OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND	BLCK	NATV	AMER	HAW/	IND/	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY GOOD & POOR	FAIR	NO CCC	CCC	
								OR	AFR- IAN	AS- IAN	PAC	ALSK	OTHR	TI						
Q41 WORST PERSONAL DOCTOR POSSIBLE	8 0.2%		4 ~0.4%	1 0.1%	4 0.3%		4 0.2%		~	~	~	1% 1%	3 ~0.7%		8 ~0.3%*	6 0.1%	3 1%	7 0.2%	1 0.1%	
01	5 0.1%		1 ~0.1%	3 0.2%	1 0.1%		2 0.1%	1 1%		1 ~8%~	~	~	~	~	1 ~0.1%	4 0.1%	4 0.1%	1 0.5%	4 0.1%	1 0.1%
02	12 0.3%	1 0.1%	5 0.5%	3 0.2%	3 0.2%		7 0.3%		~	~	~	~	~	4 1%	1 0.1%*	11 0.4%	10 0.2%	2 1%	5 0.1%	7 0.6%
03	24 0.5%	3 0.4%	7 0.7%	3 0.2%*	11 0.9%		12 0.6%		~	~	~	~	~	4 1%	5 0.3%	15 0.5%	20 0.5%	3 2%	16 0.5%	8 0.7%
04	20 0.4%	3 0.4%	4 0.4%	6 0.4%	6 0.5%		11 0.5%		~	~	~	~	~	2 ~0.5%	4 0.3%	13 0.5%	17 0.4%	3 2%	12 0.4%	7 0.6%
05	107 2%	14 2%	25 2%	33 2%	35 3%		64 3%*	1 1%	3 2%		3 ~	3 6%		9 ~	24 2%*	82 3%*	101 2%	4 2%	73 2%	35 3%
06	101 2%	12 2%	19 2%	42 3%*	27 2%		55 3%		3 ~	2 14%~	2 4%		~	12 3%	23 2%*	74 3%*	96 2%	3 2%	66 2%	35 3%
07	274 6%	43 5%	61 6%	85 6%	85 7%		151 7%*	3 4%	11 10%		9 ~	4 17%*	21 15%~	61 5%	199 4%*	242 7%*	21 6%*	186 11%*	88 7%*	
08	702 16%	113 14%	167 16%	219 16%	203 17%		341 16%	10 14%	22 19%		1 4%~	6 11%	8 31%~	64 17%	222 15%	457 16%	653 16%	28 15%	528 16%	173 15%
09	874 20%	158 20%	189 18%	249 18%*	278 23%*		442 21%	8 11%*	30 27%		1 5%~	10 19%	6 23%~	72 19%	288 20%	563 20%	829 17%	31 20%	647 19%	227 19%
BEST PERSONAL DOCTOR POSSIBLE	2309 52%	459 57%*	556 53%	740 53%	553 46%*	1061 49%*	48 67%*	44 40%*	7 68%~	22 42%	8 30~	197 51%		820 57%*	1399 50%*	2157 52%	88 47%	1710 53%	599 51%	
#8-10 (NET)	3885 88%	730 91%*	913 88%	1208 87%	1034 86%*	1844 86%*	66 93%	95 85%	8 77%~	37 72%*	23 85%~	333 86%		1330 92%*	2419 86%*	3639 88%*	146 79%*	2886 89%*	1000 85%*	

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	AGE				RACE								ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
OHP TOT CHLD						BLCK OR AFR- WHTC AMER	NATV HAW/ AS- AMER	AMER IND/ IAN	PAC ILND	ALSK NATV	MUL- OTHr	PAN- TI	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD POOR	EX & VERY FAIR	NO CCC	NO CCC	
9-10 (NET)	3183 72%	<4 77%*	4-7 72%	8-12 71%	OVER 69%*	13 70%*	1503 79%	56 66%	74 66%	8 73%~	32 61%	14 54%~	269 70%	1108 76%*	1962 69%*	2986 72%*	119 64%*	2357 72%	826 70%
NOT ANSWERED	202	22	54	61	65	78	2	4			1	14	42	99	132	7	175	26	
VALID CASES NUMBER OF RESPONDENTS	4437 4639	806 828	1040 1094	1385 1446	1206 1271	2151 2229	71 73	112 116	11 11	52 52	27 28	388 402	1450 1492	2826 2925	4135 4267	186 193	3256 3431	1182 1208	
	100% 100%	100% 100%	100% 100%	100% 100%	100% 100%	100% 100%	100% 100%	100% 100%	100% 100%	100% 100%	100% 100%	100% 100%	100% 100%	100% 100%	100% 100%	100% 100%	100% 100%		
MEAN	8.97	9.16	8.97	8.99	8.84	8.89	9.28	8.84	8.54	8.49	8.69	8.83	9.17	8.88	8.99	8.53	9.01	8.88	
p stat_(*=Sig @ p<=.05)		.000*	.864	.632	.000*	.000*	.080	.279		~.064		~.090		.000*	.000*	.010*	.003*	.012*	.012*

[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	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
	OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND	BLCK OR AFR- WHTC AMER	NATV HAW/ AS- IAN	AMER	IND/ PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD 16%*	EX & VERY GOOD 23%*	FAIR 30%*	NO POOR 67%*	CCC 8%*	CCC 74%*
Q42	YES	1133 25%	98 12%*	233 22%*	414 30%*	389 32%*	674 31%*	14 20%	13 12%*	3 23%~	16 31%	3 11%~	117 30%	237 16%*	852 30%*	972 23%*	123 67%*	258 8%*	877 74%*		
	NO	3316 75%	709 88%*	805 78%*	974 70%*	828 68%*	1480 69%*	57 80%	95 88%*	8 77%~	36 69%	25 89%~	278 70%	1216 84%*	1983 70%*	3174 77%*	62 33%*	3010 92%*	304 26%*		
	NOT ANSWERED	190	21	57	58	54	75	2	8				7	39	91	121	8	163	27		
VALID CASES		4449	807	1037	1388	1217	2154	71	108	11	52	28	395	1453	2834	4146	185	3268	1181		
NUMBER OF RESPONDENTS		4639	828	1094	1446	1271	2229	73	116	11	52	28	402	1492	2925	4267	193	3431	1208		
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	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	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- WHTC	NATV HAW/ AMER IAN	AMER PAC ILND	ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	VERY FAIR & POOR	EX & GOOD & POOR	NO CCC	777 90%	
Q43 #YES	989 90%	87 92%	192 85%*	376 93%*	334 89%	602 91%	14 100%~	8 85%~	1 63%~	16 95%~100%~	3 84%	96 90%	209 90%	745 90%	865 91%*	97 82%*	213 88%	777 90%
NO	113 10%	7 8%	34 15%*	29 7%*	43 11%	63 9%		1 ~ 15%~	1 37%~	1 5%~	19 ~ 16%		22 10%	84 10%	87 9%*	21 18%*	30 12%	83 10%
NOT ANSWERED	33	5	7	8	13	12		2			7	6	21	23	5	13	20	
VALID CASES NUMBER OF RESPONDENTS	1102 1135	94 99	226 233	405 413	377 390	665 677	14 14	10 12	2 2	17 17	3 3	114 121	231 237	830 851	952 975	118 123	243 256	859 879
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q30 = YES AND Q42 = YES]

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

	BANT OT1	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	OHP TOT CHLD	<4 4-7 8-12 OVER				13 AND WHTC AMER				BLCK OR AFR- AS- WHTC AMER	NATV HAW/ PAC IAN ILND	AMER IND/ PAC ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD 85% 87%*	EX & VERY GOOD 86% 87%*	FAIR & POOR 86% 76%*	NO CCC	NO CCC
Q44 #YES	937 85%	83 89%	193 84%	351 87%	309 83%	575 87%	13 100%~	8 85%~	1 63%~	16 95%~100%~	3 76%*	88 85%	194 85%	709 86%	822 87%*	91 76%*	204 85%	733 86%		
NO	161 15%	10 11%	37 16%	50 13%	64 17%	89 13%	1 ~ 15%~	1 37%~	1 5%~	28 ~ 24%*	34 15%	119 14%	126 13%*	28 24%*	37 15%	124 14%				
NOT ANSWERED	37	5	3	12	17	13	1	2		6	9	22	27	4	15	22				
VALID CASES NUMBER OF RESPONDENTS	1098 1135 100%	94 99 100%	230 233 100%	401 413 100%	373 390 100%	664 677 100%	13 14 100%	10 12 100%	2 2 100%	17 17 100%	3 3 100%	115 121 100%	228 237 100%	829 851 100%	948 975 100%	119 123 100%	241 256 100%	857 879 100%		

[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	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
	OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND WHT	BLCK OR AFR- AS- WHT	NATV HAW/ IAN	AMER IND/ PAC ILND	ALSK NATV	MUL- PAN- OTHR	HIS- PAN- TI	HIS- PAN- IC	EX & NOT GOOD POOR	VERY FAIR & GOOD	NO CCC	CCC	
Q45																		
YES		884	97	202	257	328	476	13	18	9	2	82	245	604	755	101	386 498	
		17%	11%*	17%	16%	22%*	19%*	14%	10%*	~ 13%	6%~	18%	14%*	18%*	15%*	44%*	10%* 38%*	
NO		4363	792	991	1389	1191	2016	80	159	14	61	36	363	1505	2734	4162	128	3535 827
		83%	89%*	83%	84%	78%*	81%*	86%	90%*100%~	87%	94%~	82%	86%*	82%*	85%*	56%*	90%* 62%*	
NOT ANSWERED		351	65	103	97	86	13	1	3	3	3	18	21	34	3	343	8	
VALID CASES		5246	889	1193	1646	1518	2492	93	177	14	70	38	445	1750	3338	4917	229	3921 1325
NUMBER OF RESPONDENTS		5597	954	1296	1743	1604	2505	94	180	14	73	38	448	1768	3359	4951	232	4264 1333
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100% 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	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
		OHP TOT CHLD	13 AND				BLCK OR	NATV HAW/	AMER IND/	HIS- PAN- IC		HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY GOOD & POOR	NO CCC			
			<4	4-7	8-12	OVER	WHTC AMER	AS- IAN	PAC ILND	ALSK NATV	MUL- OTH	TI				CCC		
Q46	NEVER	61 7%	7 7%	14 7%	17 7%	23 7%	38 8%	~ ~	~ ~	1 8%~	1 51%~	10 12%	8 3%*	50 8%*	51 7%	9 9%	27 7%	35 7%
	SOMETIMES	132 15%	11 11%	35 18%	33 13%	52 17%	60 13%*	3 27%~	7 38%~	1 8%~	6 ~	49 7%*	75 20%*	106 13%*	21 14%	53 21%	78 16%	
	USUALLY	250 29%	31 33%	56 28%	73 29%	89 28%	130 28%	3 27%~	6 33%~	4 ~ 42%~	1 49%~	24 28%	76 32%	166 28%	214 29%	29 30%	104 28%	146 30%
	ALWAYS	419 49%	46 48%	94 47%	128 51%	151 48%	240 51%	5 45%~	5 29%~	4 ~ 42%~	4 ~	44 53%	106 44%	299 51%	371 50%*	38 40%	185 50%	234 47%
	#ALWAYS + USUALLY (NET)	669 78%	78 81%	150 76%	201 80%	240 76%	369 79%	8 73%~	11 62%~	8 ~ 83%~	1 49%~	67 81%	183 76%	466 79%	585 79%*	67 70%	289 78%	380 77%
	TOP BOX SCORE	419 49%	46 48%	94 47%	128 51%	151 48%	240 51%	5 45%~	5 29%~	4 ~ 42%~	4 ~	44 53%	106 44%	299 51%	371 50%*	38 40%	185 50%	234 47%
	NOT ANSWERED	23	2	3	5	13	9	2				7	12	17	3	16	7	
VALID CASES	862	96	199	252	315	468	11	18	10	2	83	240	590	741	96	369	493	
NUMBER OF RESPONDENTS	885	98	202	257	328	477	13	18	10	2	83	247	602	758	99	385	500	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q45 = YES]

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

	BANT OT1	AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
		OHP TOT CHLD	13 AND				BLCK OR AFR- WHT AMER				NATV AMER HAW/ IND/ AS- PAC ALSK							
			<4	4-7	8-12	OVER	IAN	ILND	NATV	OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD POOR				
Q47	NONE	53 6%	5 6%	11 6%	16 6%	20 6%	20 4%*	~	~	~	~	9 10%	21 9%	29 5%*	41 5%	9 9%	31 8%*	22 4%*
	1 SPECIALIST	526 61%	57 60%	122 61%	147 59%	200 64%	290 62%	6 55%~	15 81%~	6 ~ 58%~	1 49%~	49 58%	143 60%	360 61%	479 65%*	32 33%*	281 76%*	244 50%*
	2	172 20%	16 17%	40 20%	57 23%	59 19%	96 21%	3 27%~	2 10%~	3 ~ 34%~	17 ~ 21%	46 19%	125 21%	140 19%	30 32%*	45 12%*	128 26%*	
	3	54 6%	6 7%	14 7%	12 5%	22 7%	31 7%	1 9%~	2 9%~	~	~	4 5%	14 6%	37 6%	40 5%*	12 13%*	8 2%*	46 9%*
	4	28 3%	5 5%	5 3%	12 5%	6 2%	15 3%	1 9%~	~	~	1 8%~	1 51%~	2 2%	8 3%	20 3%	7 8%	2 0.6%*	26 5%*
	5 OR MORE SPECIALISTS	26 3%	6 6%	7 4%	5 2%	8 2%	14 3%	~	~	~	~	3 4%	8 3%	17 3%	20 3%	5 5%	2 0.6%*	24 5%*
	NOT ANSWERED	26	3	2	7	14	11	2					7	14	18	4	17	9
VALID CASES		859	95	200	250	314	466	11	18	10	2	83	240	588	740	95	368	491
NUMBER OF RESPONDENTS		885	98	202	257	328	477	13	18	10	2	83	247	602	758	99	385	500
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

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

	BANT OT1	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
		OHP TOT CHLD	13 AND OVER			BLCK	NATV	AMER	HAW/	IND/	MUL-	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & GOOD	POOR & POOR	NO CCC	CCC		
			<4	4-7	8-12	WHT	AFR-	AS-	PAC	ALSK	OTHR	TI	HIS- PAN- IC	1	6	5	2	3	4
Q48	WORST SPECIALIST POSSIBLE	7 0.9%	3 ~	2 2%	2 0.9%	4 0.9%	~	~	~	~	~	2% 0.5%	1% 0.7%	0.7% 2%	0.9% 0.9%				
01		1 0.1%	~	~	~	1 ~0.4%	~	~	~	~	~	1 ~0.5%	1 ~0.2%	1 ~0.3%	1 ~				
02		5 0.6%	1 ~0.5%	1 0.5%	3 1%	4 0.9%	~	~	~	~	~	1 ~0.5%	4 0.7%	4 0.6%	1 1%	2 0.6%	3 0.7%		
03		7 0.8%	1 1%	1 0.3%	1 0.4%	4 1%	3 0.7%	1 9%~	~	~	~	~	3 1%	4 0.7%	5 0.7%	2 2%	3 0.8%	4 0.9%	
04		5 0.6%	2 ~1%	1 0.4%	2 0.7%	4 0.9%	~	~	~	~	~	1 ~0.5%	4 0.7%	5 0.7%~	1 ~0.3%	4 0.9%			
05		21 3%	2 2%	3 2%	4 4%	11 2%	11 ~	~	~	~	~	2 3%	6 3%	13 2%	16 2%	4 5%	9 3%	11 2%	
06		24 3%	6 7%	5 2%	7 3%	6 2%	16 4%	2 ~9%~	~	~	~	~	1 ~0.8%*	5 2%	18 3%	20 3%	3 4%	9 3%	15 3%
07		54 7%	5 5%	14 8%	15 7%	20 7%	37 8%*	2 ~10%~	~	8%~	~	4 5%	8 4%*	41 7%	44 6%	7 8%	26 8%	28 6%	
08		138 17%	16 17%	28 15%	38 16%	57 20%	80 18%	1 9%~	5 28%~	~	2 17%~	16 49%~	26 22%	104 12%*	120 19%	15 17%	55 17%	83 16%	
09		175 22%	18 20%	42 22%	48 20%	69 24%	82 19%*	3 27%~	4 24%~	~	2 25%~	19 ~25%	63 29%*	110 20%*	158 23%	12 14%*	81 24%	95 20%	
BEST SPECIALIST POSSIBLE		365 46%	43 47%	91 48%	117 50%	115 40%*	202 45%	6 54%~	5 28%~	~	5 50%~	1 51%~	31 42%	102 47%	251 45%	318 46%	40 46%	145 43%	221 47%

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	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	OHP TOT CHLD			13 AND		BLCK OR AFR- WHT	NATV HAW/ AMER AMER	AMER	PAC IAN	ALSK ILND	MUL- NATV OTH	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & GOOD			
#8-10 (NET)	678 85%	76 84%	160 85%	202 86%	240 83%	364 82%*	10 91%~	15 81%~		9 ~ 92%~100%~	2 89%	66 88%	192 88%	466 84%	596 86%	67 78%	281 84%	398 85%
9-10 (NET)	541 67%	60 67%	133 70%	165 70%	183 63%	284 64%*	9 82%~	9 53%~		7 ~ 75%~	1 51%~	50 67%	166 76%*	361 65%*	476 68%	52 61%	226 67%	315 67%
NOT ANSWERED	5			5	3						1	1	4	4	1	4	1	
VALID CASES NUMBER OF RESPONDENTS	803 808 100%	90 90 100%	189 189 100%	234 234 100%	290 295 100%	443 446 100%	11 11 100%	18 18 100%		10 10 100%	2 2 100%	74 75 100%	218 219 100%	557 561 100%	696 700 100%	86 87 100%	335 339 100%	468 469 100%
MEAN	8.74	8.82	8.79	8.89	8.55	8.67	8.90	8.53		9.16	9.01	8.81	8.88	8.69	8.78	8.40	8.71	8.76
p stat_(*=Sig @ p<=.05)		.567	.639	.104	.025*	.206	~	~	~	~	~	.679	.144	.240	.108	.058	.696	.695

[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	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
	OHP TOT CHLD	13 AND CHLD				BLCK OR AFR- MER	NATV HAW/ AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & GOOD POOR	FAIR & POOR	NO CCC	CCC	
Q49	YES	1316 25%	230 26%	317 27%	412 25%	358 24%	535 22%*	26 29%	44 25%	4 32%~	11 15%*	10 27%~	115 26%	530 30%*	753 23%*	1221 25%*	74 32%*	944 24%*	372 28%*
	NO	3886 75%	650 74%	865 73%	1221 75%	1150 76%	1946 78%*	65 71%	135 75%	10 68%~	61 85%*	28 73%~	324 74%	1213 70%*	2569 77%*	3669 75%*	154 68%*	2939 76%*	948 72%*
	NOT ANSWERED	394	74	114	110	96	24	3	1	1		9	25	37	61	5	381	13	
VALID CASES	NUMBER OF RESPONDENTS	5203 5597 100%	880 954 100%	1182 1296 100%	1633 1743 100%	1508 1604 100%	2481 2505 100%	91 94 100%	179 180 100%	14 14 100%	72 73 100%	38 38 100%	439 448 100%	1743 1768 100%	3322 3359 100%	4890 4951 100%	227 232 100%	3883 4264 100%	1320 1333 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	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
		OHP TOT CHLD	13 AND				BLCK OR	NATV HAW/	AMER IND/	NOT GOOD				EX & VERY FAIR		NO CCC		CCC	
			<4	4-7	8-12	OVER	WHTC AFR-	AS- IAN	PAC ILND	ALSK NATV	MUL- OTHG	TI	HIS- PAN- IC	HIS- PAN- IC	& &	POOR	CCC	CCC	
Q50	NEVER	38 3%	3 1%*	9 3%	13 3%	12 4%	18 3%	2 ~	2 4%~	2 31%~	1 ~ 11%~	5 5%	10 2%	27 4%	36 3%	1 1%	24 3%	13 4%	
	SOMETIMES	243 19%	34 15%	64 21%	81 20%	64 19%	100 19%	1 4%~	13 30%~	1 19%~	2 20%~	1 11%~	18 16%	99 19%	136 18%	222 19%	17 24%	171 19%	71 20%
	USUALLY	370 29%	75 33%	79 26%	117 29%	99 29%	152 29%	7 28%~	12 28%~	3 49%~	5 46%~	5 56%~	34 30%	142 28%	221 30%	335 28%	28 40%	256 28%	114 31%
	ALWAYS	635 49%	117 51%	155 50%	193 48%	170 49%	256 49%	17 68%~	18 39%~	3 ~ 33%~	2 22%~	57 50%	263 51%	359 48%	599 50%*	25 35%*	469 51%	166 45%	
	#ALWAYS + USUALLY (NET)	1005 78%	192 84%*	234 76%	310 77%	269 78%	408 78%	24 96%~	30 67%~	3 49%~	8 80%~	7 78%~	91 80%	405 79%	580 78%	934 78%	53 75%	725 79%	280 77%
	TOP BOX SCORE	635 49%	117 51%	155 50%	193 48%	170 49%	256 49%	17 68%~	18 39%~	3 ~ 33%~	2 22%~	57 50%	263 51%	359 48%	599 50%*	25 35%*	469 51%	166 45%	
	NOT ANSWERED	31	3	10	7	10	10	1	1		1	1	13	14	28	2	26	5	
VALID CASES	NUMBER OF RESPONDENTS	1285 1316 100%	229 232 100%	307 317 100%	404 411 100%	346 356 100%	526 536 100%	25 26 100%	45 46 100%	6 10 100%	10 10 100%	9 10 100%	115 116 100%	514 527 100%	743 757 100%	1192 1220 100%	71 73 100%	920 946 100%	365 370 100%

[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	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
		OHP TOT CHLD	13 AND				BLCK OR	NATV HAW/	AMER IND/	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY FAIR POOR	NO CCC	CCC				
			<4	4-7	8-12	OVER	WHTC AMER	AFR- IAN	PAC ILND	ALSK NATV	MUL- OTH TI								
Q51	NEVER	19 1%	1 0.4%*	5 2%	10 2%	3 0.9%	8 2%	~ ~	1 2%~	2 31%~	~ ~	1 1%	7 1%	11 1%	17 1%	1 1%	15 2%	4 1%	
	SOMETIMES	93 7%	21 9%	19 6%	29 7%	24 7%	41 8%	4 ~ 10%~	1 ~ 13%~	7 ~ 6%	35 7%	55 7%	85 7%	6 8%	65 7%	28 8%			
	USUALLY	290 23%	49 21%	69 23%	89 22%	84 24%	110 21%	6 24%~	16 35%~	2 39%~	4 41%~	5 55%~	23 20%	117 23%	166 22%	256 22%*	29 40%*	204 22%	87 24%
	ALWAYS	880 69%	159 69%	213 70%	274 68%	235 68%	366 70%	19 76%~	24 53%~	2 29%~	5 46%~	4 45%~	83 73%	352 69%	509 69%	830 70%*	36 50%*	633 69%	247 68%
	#ALWAYS + USUALLY (NET)	1171 91%	207 91%	282 92%	364 90%	318 92%	476 91%	25 100%~	40 88%~	4 69%~	9 87%~	9 100%~	106 93%	469 92%	675 91%	1086 91%	65 90%	837 91%	334 91%
	TOP BOX SCORE	880 69%	159 69%	213 70%	274 68%	235 68%	366 70%	19 76%~	24 53%~	2 29%~	5 46%~	4 45%~	83 73%	352 69%	509 69%	830 70%*	36 50%*	633 69%	247 68%
	NOT ANSWERED	33	3	11	9	10	11	1	1		1	2	16	16	32	1	29	4	
VALID CASES	NUMBER OF RESPONDENTS	1283 1316 100%	229 232 100%	306 317 100%	402 411 100%	346 356 100%	525 536 100%	25 100%	45 100%	6 100%	10 100%	9 100%	114 116 100%	511 527 100%	741 757 100%	1188 1220 100%	72 73 100%	917 946 100%	366 370 100%

[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	AGE				RACE								ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD POOR	EX & VERY & GOOD POOR	NO CCC	CCC	
Q52	YES	1909 37%	348 40%	433 37%	597 37%	531 36%	827 33%*	37 41%	50 28%*	7 49%~	18 25%*	11 31%~	166 38%	728 42%*	1122 34%*	1768 36%*	107 48%*	1411 37%	498 38%
	NO	3249 63%	526 60%	743 63%	1021 63%	959 64%	1644 67%*	53 59%	126 72%*	7 51%~	54 75%*	24 69%~	270 62%	995 58%*	2178 66%*	3087 64%*	116 52%*	2434 63%	815 62%
	NOT ANSWERED	439	80	120	124	114	34	4	3		1	3	12	45	58	96	9	419	20
VALID CASES	5158	874	1176	1619	1490	2471	90	177	14	72	35	436	1723	3301	4855	223	3845	1313	
NUMBER OF RESPONDENTS	5597	954	1296	1743	1604	2505	94	180	14	73	38	448	1768	3359	4951	232	4264	1333	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
		OHP TOT CHLD	<4	4-7	8-12	OVER	BLCK		NATV AMER		NOT HIS- PAN- IC	EX & VERY GOOD FAIR & GOOD POOR	NO CCC						
							OR	AFR-	HAW/ AS-	IND/ PAC ALSK									
PQ53	NEVER	84 2%	14 2%	18 2%	26 2%	26 2%	44 2%	1 1%	2 1%	~ ~	2 3%	6 1%	28 2%	53 2%	75 2%	6 3%	66 2%	17 1%	
	SOMETIMES	382 7%	64 7%	73 6%	127 8%	117 8%	153 6%*	7 8%	13 7%	2 13%~	2 ~	3 9%~	21 5%*	170 10%*	198 6%*	347 7%*	28 13%*	275 7%	107 8%
	USUALLY	676 13%	118 14%	170 15%	221 14%	167 11%*	313 13%	10 11%	20 12%	3 22%~	9 13%	3 7%~	66 16%	229 14%	428 13%	632 13%	36 16%	487 13%	190 15%
	ALWAYS	3950 78%	668 77%	900 78%	1218 76%	1164 79%	1936 79%*	72 80%	139 80%	9 65%~	60 84%	29 84%~	334 78%	1266 75%*	2589 79%*	3740 78%*	149 68%*	2963 78%	987 76%
	#ALWAYS + USUALLY (NET)	4626 91%	786 91%	1070 92%	1439 90%	1331 90%	2249 92%*	82 91%	160 92%	12 87%~	70 97%*	32 91%~	400 94%*	1495 88%*	3018 92%*	4372 91%*	185 84%*	3449 91%	1177 90%
	TOP BOX SCORE	3950 78%	668 77%	900 78%	1218 76%	1164 79%	1936 79%*	72 80%	139 80%	9 65%~	60 84%	29 84%~	334 78%	1266 75%*	2589 79%*	3740 78%*	149 68%*	2963 78%	987 76%
	NOT ANSWERED	73	11	15	29	18	24		2			10	30	33	62	4	62	11	
VALID CASES	5092	865	1161	1592	1474	2447	90	175	14	72	35	426	1693	3269	4794	219	3791	1301	
NUMBER OF RESPONDENTS	5165	876	1176	1621	1492	2471	90	177	14	72	35	436	1723	3302	4856	223	3853	1312	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

	BANT OT1	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
		OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND WHTC	BLCK	NATV	AMER	IND/ HAW/	MUL- TI	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & GOOD	POOR & POOR	NO CCC	NO CCC		
								AFR- AMER	AS- IAN	PAC	ALSK		IC	IC	IC					
Q54	WORST HEALTH PLAN POSSIBLE	17 0.3%	3 ~0.3%	5 0.3%	9 0.6%	7 0.3%	1 ~	1 ~	1 10%~	1 1%	1 1%~0.5%	2 0.1%*0.4%	2 0.1%*0.4%	13 0.2%*	12 2%	4 0.4%	14 0.4%	3 0.2%		
01		15 0.3%	1 0.1%	1 0.1%*0.4%	6 0.4%	6 0.3%	7 ~	7 ~	7 ~	7 ~	1 ~0.2%	1 0.3%*0.3%	5 0.2%	8 0.2%	11 1%	3 0.2%	8 0.2%	6 0.5%		
02		22 0.4%	1 0.1%*0.4%	5 0.5%	8 0.5%	7 0.5%	13 ~	13 ~	13 ~	13 ~	1 ~0.2%	1 0.2%*0.5%	4 0.4%	17 0.4%	19 0.4%	1 0.2%*	8 1%	13 1%*		
03		36 0.7%	1 0.1%*	11 1%	11 0.7%	13 0.9%	22 0.9%	22 ~0.5%	22 ~	22 ~	1 ~0.7%	3 0.6%*0.8%	10 0.7%	25 0.7%	33 0.7%	3 1%	22 0.6%	14 1%		
04		63 1%	5 0.6%*0.8%*	9 1%	23 2%	26 2%	42 2%*	42 ~	42 1%	42 12%~	1 1%	7 ~2%	5 0.3%*	56 2%*	53 1%*	10 4%*	39 4%*	24 2%*		
05		278 5%	34 4%*	54 5%	86 5%	105 7%*	161 7%*	6 6%	7 4%	7 ~	9 14%*	5 14%~	29 7%	47 3%*	222 7%*	259 5%	16 7%	189 5%*	88 7%*	
06		243 5%	42 5%	55 5%	74 5%	72 5%	152 6%*	5 6%	3 2%*	3 ~	5 7%	2 6%~	23 5%	45 3%*	192 6%*	225 5%	14 6%	168 4%	75 6%	
07		486 9%	78 9%	112 10%	152 9%	143 10%	304 12%*	6 7%	15 8%	1 6%~	5 8%	5 8%~	54 12%	81 5%*	398 12%*	455 9%	22 10%	325 9%*	161 12%*	
08		993 19%	153 17%	202 17%*	307 19%	331 22%*	529 22%*	16 18%	42 18%	1 24%	1 19%~	17 25%*	7 15%*	110 15%*	258 22%*	721 19%*	935 19%	45 20%	702 18%*	291 22%*
09		894 17%	154 18%	204 17%*	297 18%	239 16%	429 17%	15 16%	40 22%	4 26%~	11 16%	7 19%~	62 14%	312 18%	568 17%	851 18%	33 14%	677 18%	217 16%	
BEST HEALTH PLAN POSSIBLE		2099 41%	407 46%*	520 44%*	645 40%	526 36%*	785 32%*	43 47%	67 38%	6 40%~	20 29%*	13 33%~	145 33%*	969 56%*	1068 32%*	1997 41%*	78 34%*	1674 44%*	425 32%*	
#8-10 (NET)		3986 77%	714 82%*	926 79%*	1249 77%*	1097 74%*	1743 71%*	74 81%	148 83%*	10 72%~	48 69%	27 71%~	317 73%*	1539 89%*	2356 72%*	3782 78%*	157 68%*	3053 80%*	933 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	AGE				RACE								ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
	OHP TOT CHLD					BLCK OR AFR- WHTC IAN	NATV HAW/ PAC ILND	AMER IND/ IAN NATV	MUL- OTH TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD 74%*	EX & VERY FAIR 50%*	GOOD POOR 59%*	NO CCC	CCC			
9-10 (NET)	2993 58%	561 64%*	724 62%*	942 58%*	765 52%*	13 AND	1214 50%*	58 64%	106 60%	9 66%~	31 45%*	20 52%~	207 47%*	1281 74%*	1635 50%*	2848 59%*	111 48%*	2350 61%*	643 49%*
NOT ANSWERED	451	78	120	128	126		53	3	3		4		11	29	72	102	2	437	14
VALID CASES NUMBER OF RESPONDENTS	5146 5597 100%	876 954 100%	1176 1296 100%	1615 1743 100%	1478 1604 100%		2452 2505 100%	91 94 100%	177 180 100%	14 14 100%	69 73 100%	38 38 100%	437 448 100%	1739 1768 100%	3287 3359 100%	4849 4951 100%	230 232 100%	3827 4264 100%	1319 1333 100%
MEAN	8.48	8.76	8.60	8.46	8.24		8.18	8.74	8.64	7.71	7.98	8.14	8.21	9.03	8.20	8.52	7.91	8.60	8.13
p stat_(*=Sig @ p<=.05)		.000*	.010*	.595	.000*	.000*	.171	.153		~.037*		~.001*	.000*	.000*	.000*	.000*	.000*		

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD FAIR & GOOD POOR	EX & VERY & GOOD POOR	NO CCC CCC		
Q55	YES	1999 38%	347 39%	461 39%	609 37%	583 39%	1035 42%*	43 48%	55 31%*	5 39%~	29 41%	11 29%~	174 39%	592 34%*	1362 41%*	1832 37%*	138 61%*	1084 28%*	917 69%*
	NO	3202 62%	538 61%	720 61%	1021 63%	924 61%	1454 58%*	47 52%	123 69%*	9 61%~	42 59%	27 71%~	271 61%	1152 66%*	1971 59%*	3077 63%*	88 39%*	2791 72%*	410 31%*
	NOT ANSWERED	396	70	115	113	97	16	4	2	2	3	24	26	43	6	389	6		
VALID CASES	NUMBER OF RESPONDENTS	5201 5597 100%	884 954 100%	1181 1296 100%	1630 1743 100%	1507 1604 100%	2489 2505 100%	90 94 100%	178 180 100%	14 14 100%	71 73 100%	38 38 100%	445 448 100%	1744 1768 100%	3333 3359 100%	4908 4951 100%	226 232 100%	3875 4264 100%	1327 1333 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	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
		OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND	BLCK	NATV	AMER	IND/	MUL-	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC			
								OR	AFR-	AS-	PAC									
Q56	NEVER	44	3	16	15	9		21	2	2			4	11	32	37	6	14	30	
		2%	0.9%*	4%	3%	2%		2%	5%~	3%			2%	2%	2%	2%	5%	1%*	3%*	
	SOMETIMES	163	20	42	52	48		73	3	8	1	1	22	52	107	135	27	76	86	
		8%	6%	9%	9%	8%		7%	7%~	15%	8%~	5%~	~ 12%	9%	8%	7%*	19%*	7%	9%	
	USUALLY	498	67	114	163	154		272	8	15	4	9	3	139	349	450	38	254	244	
		25%	20%*	25%	27%	27%		27%	19%~	28%	66%~	33%~	29%~	20%	24%	26%	25%	28%	24%	27%
	ALWAYS	1271	253	287	368	362		660	30	28	2	18	8	116	380	860	1187	66	720	550
		64%	74%*	62%	62%	63%		64%	70%~	53%	26%~	62%~	71%~	65%	65%	64%	66%*	48%*	68%*	60%*
	#ALWAYS + USUALLY (NET)	1769	321	401	531	516		933	38	42	5	28	11	152	519	1210	1637	104	975	794
		90%	93%*	87%	89%	90%		91%*	88%~	81%	92%~	95%~100%~	85%	89%	90%	91%*	76%*	91%*	87%*	
	TOP BOX SCORE	1271	253	287	368	362		660	30	28	2	18	8	116	380	860	1187	66	720	550
		64%	74%*	62%	62%	63%		64%	70%~	53%	26%~	62%~	71%~	65%	65%	64%	66%*	48%*	68%*	60%*
	NOT ANSWERED	25	5	4	10	6		9		1			1	10	10	22		19	6	
VALID CASES	NUMBER OF RESPONDENTS	1976	344	460	598	574	1027	43	52	6	29	11	178	582	1349	1809	137	1065	911	
		2001	349	464	608	580	1036	43	53	6	29	11	179	592	1359	1831	137	1084	917	
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q55 = YES]

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

	BANT OT1	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	OHP TOT CHLD					13 AND	BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD EX & VERY FAIR	GOOD & POOR	NO CCC	NO CCC
Q57 #YES	1182 60%	223 65%*	282 62%	360 60%	317 56%*	13 AND	549 54%*	30 70%~	36 72%~	4 66%~	17 60%~	9 85%~	104 59%	408 70%*	751 56%*	1087 60%	84 61%	630 59%	552 61%
NO	783 40%	120 35%*	175 38%	238 40%	250 44%*		469 46%*	13 30%~	14 28%~	2 34%~	12 40%~	2 15%~	72 41%	177 30%*	588 44%*	716 40%	53 39%	432 41%	352 39%
NOT ANSWERED	36	6	7	10	13		18		3	1			2	7	20	28		22	14
VALID CASES NUMBER OF RESPONDENTS	1965 2001 100%	343 349 100%	457 464 100%	598 608 100%	567 580 100%		1018 1036 100%	43 43 100%	50 53 100%	5 6 100%	29 29 100%	11 11 100%	177 179 100%	585 592 100%	1339 1359 100%	1803 1831 100%	137 137 100%	1062 1084 100%	903 917 100%

[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	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND	BLCK OR	NATV HAW/ IND/ AFR- AS- PAC ALSK MUL- WHTC AMER IAN ILND NATV OTHR TI	HIS- PAN- PAN- IC	HIS- PAN- PAN- IC	NOT & GOOD POOR	EX & VERY GOOD FAIR & GOOD POOR	NO CCC	NO CCC					
Q57A	YES	4187 82%	476 54%*	999 86%*	1464 91%*	1250 85%*	1953 80%*	74 80%	140 80%	14 100%~	58 84%	27 75%~	359 81%	1468 85%*	2631 80%*	3950 82%	195 86%	3075 81%*	1113 85%*
	NO	931 18%	398 46%*	161 14%*	150 9%*	220 15%*	496 20%*	18 20%	34 20%		11 ~ 16%	9 25%~	84 19%	254 15%*	660 20%*	891 18%	32 14%	728 19%*	202 15%*
	NOT ANSWERED	479	80	136	129	134	56	2	6		4	2	5	46	68	111	5	461	17
VALID CASES	5118	874	1160	1614	1470	2449	92	174	14	69	36	443	1722	3291	4840	227	3803	1316	
NUMBER OF RESPONDENTS	5597	954	1296	1743	1604	2505	94	180	14	73	38	448	1768	3359	4951	232	4264	1333	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
Q57B	OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND	BLCK	NATV	AMER	OR	HAW/	IND/	HIS- PAN-	HIS- PAN-	EX & VERY	GOOD & FAIR & POOR	NO CCC		
							AFR-	AS-	PAC	ALSK	MUL-	TI			GOOD				
YES	3152	317 61%	805 36%*	1128 69%*	904 70%*		1447 59%*	54 58%	114 65%	10 70%~	42 63%	25 67%~	267 60%	1123 65%*	1960 59%*	2980 61%	138 61%	2285 60%*	868 66%*
NO	2003	559 39%	365 64%*	488 31%*	591 30%*		1022 41%*	39 42%	62 35%	4 30%~	25 37%	13 33%~	179 40%	614 35%*	1352 41%*	1900 39%	89 39%	1553 40%*	450 34%*
NOT ANSWERED	441	78	126	127	110		37	1	4		7		2	31	48	71	6	426	15
VALID CASES NUMBER OF RESPONDENTS	5156 5597 100%	876 954 100%	1170 1296 100%	1616 1743 100%	1494 1604 100%		2468 2505 100%	93 94 100%	176 180 100%	14 14 100%	66 73 100%	38 38 100%	446 448 100%	1737 1768 100%	3311 3359 100%	4880 4951 100%	226 232 100%	3838 4264 100%	1318 1333 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	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
		OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND WHTC	BLCK	NATV	AMER	IND/	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD	EX & VERY GOOD	FAIR	& & GOOD POOR	NO CCC	CCC	
								OR	AFR-	AS-	PAC	ALSK								
Q57C NEVER		53 2%	3 1%	9 1%	14 1%	26 3%*	26 2%	2 ~	2 2%	1 ~ 2%~	9 ~ 3%	14 1%	37 2%	44 1%*	8 6%*	29 1%*	23 3%*			
SOMETIMES		176 6%	10 3%*	43 5%	53 5%	70 8%*	67 5%*	2 4%	16 14%*	1 ~ 4%~	1 4%~	14 5%	73 7%	100 5%	165 6%	11 8%	133 6%	43 5%		
USUALLY		562 18%	38 12%*	133 17%	197 18%	194 22%*	248 17%	10 19%	33 30%*	2 19%~	3 9%~	5 19%~	39 15%	213 19%	334 17%	517 18%*	36 27%*	398 18%	164 19%	
ALWAYS		2323 75%	261 84%*	618 77%	854 76%	589 67%*	1086 76%	40 77%	60 54%*	9 81%~	32 85%~	18 77%~	205 77%	813 73%	1466 76%	2224 75%*	77 58%*	1697 75%	626 73%	
#ALWAYS + USUALLY (NET)		2885 93%	299 96%*	750 94%	1052 94%*	783 89%*	1334 93%	50 96%	94 83%*	11 100%~	36 94%~	23 96%~	244 91%	1026 92%	1800 93%	2741 93%	112 86%*	2095 93%	789 92%	
TOP BOX SCORE		2323 75%	261 84%*	618 77%	854 76%	589 67%*	1086 76%	40 77%	60 54%*	9 81%~	32 85%~	18 77%~	205 77%	813 73%	1466 76%	2224 75%*	77 58%*	1697 75%	626 73%	
NOT ANSWERED		48	5	7	13	23	19	2	2	2	1	2	13	27	37	5	40	8		
VALID CASES NUMBER OF RESPONDENTS		3113 3161 100%	313 318 100%	802 809 100%	1118 1131 100%	880 903 100%	1427 1446 100%	52 54 100%	112 114 100%	11 40 100%	38 25 100%	24 25 100%	267 269 100%	1113 1126 100%	1936 1963 100%	2949 2986 100%	131 136 100%	2257 2297 100%	856 864 100%	

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	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER				
		OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND	BLCK	NATV	AMER	OR	HAW/	IND/	MUL-	HIS- PAN- IC	HIS- PAN- IC	EX & NOT GOOD	VERY GOOD	FAIR	& &	NO CCC	152 27%
								AFR- WHT	AS- AMER	PAC	ALSK	ILND	NATV				624 29%	36 29%	507 29%			
Q57D NEVER		659	123	156	170	210	13	247	15	44	1	4	12	62	270	377	624	36	507	152		
		28%	38%*	29%	21%*	31%	AND	28%	36%~	55%*	13%~	15%~	66%~	27%	27%	29%	29%	25%	29%	29%	27%	
SOMETIMES		406	33	89	160	124		126	9	13	1	4	1	36	199	191	363	40	315	91		
		17%	10%*	17%	20%*	18%		14%*	22%~	16%	13%~	15%~	6%~	16%	20%*	15%*	17%*	28%*	18%	16%		
USUALLY		505	57	123	172	154		205	4	13		4	2	48	220	277	475	27	368	137		
		22%	18%*	23%	22%	23%		23%	10%~	16%		~ 15%~	11%~	21%	22%	22%	22%	19%	21%	21%	24%	
ALWAYS		757	109	162	297	188		311	14	11	8	13	3	80	295	442	707	41	571	185		
		33%	34%	31%	37%*	28%*		35%*	33%~	14%*	73%~	54%~	17%~	36%	30%*	34%*	33%	28%	32%	32%	33%	
#ALWAYS + USUALLY (NET)		1262	166	285	469	341		515	18	24	8	17	5	129	515	719	1182	68	939	322		
		54%	51%	54%	59%*	51%*		58%*	43%~	30%*	73%~	69%~	28%~	57%	52%	56%	55%	47%	53%	57%		
TOP BOX SCORE		757	109	162	297	188		311	14	11	8	13	3	80	295	442	707	41	571	185		
		33%	34%	31%	37%*	28%*		35%*	33%~	14%*	73%~	54%~	17%~	36%	30%*	34%*	33%	28%	32%	32%	33%	
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS		2762	540	631	807	784		1548	50	91	4	46	20	215	739	1993	2669	79	2027	736		
NOT ANSWERED		508	92	135	137	144		69	2	8		3		7	45	80	114	9	476	32		
VALID CASES NUMBER OF RESPONDENTS		2327 5597 100%	322 954 100%	530 1296 100%	799 1743 100%	676 1604 100%		888 2505 100%	42 94 100%	81 180 100%	10 14 100%	24 73 100%	18 38 100%	226 448 100%	984 1768 100%	1286 3359 100%	2168 4951 100%	144 232 100%	1761 4264 100%	566 1333 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	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
		OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND	BLCK	NATV	AMER	HAW/	IND/	MUL-	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR	& &	NO CCC	CCC		
								OR	AMER	IAN	PAC	ALSK			PAN- IC	GOOD	POOR				
Q57E EXTREMELY DIFFICULT	169	42	28	53	45			84	4	4		1	6	25	36	125	156	13	108	61	
	3%	5%*	2%*	3%	3%			4%	5%	3%		~	2%	16%~	6%*	2%*	4%*	3%	6%	3%*	5%*
01	93	14	21	21	37			52							13	25	66	87	5	62	31
	2%	2%	2%	1%*	2%*			2%*		~		~		~	3%	1%	2%*	2%	2%	2%	2%
02	81	9	20	24	27			39	2	3	1	1	1	11	19	61	79	2	54	27	
	2%	1%	2%	1%	2%			2%	2%	2%	10%~	2%	3%~	3%	1%	2%*	2%*	0.9%	1%	2%	
03	137	25	31	33	49			72	1	5		4	2	8	43	93	126	11	89	48	
	3%	3%	2%	2%*	3%			3%	1%	3%		~	5%	5%~	2%	3%	3%*	3%	5%	2%*	4%*
04	95	19	20	27	29			52	3	3		1	1	13	20	75	88	6	63	32	
	2%	2%	2%	2%	2%			2%*	4%	2%		~	2%	3%~	3%	1%*	2%*	2%	3%	2%*	3%*
05	391	78	87	110	117			224	5	7		6	2	35	97	287	361	26	294	97	
	7%	9%*	7%	6%	8%			9%*	6%	4%*		~	8%	5%~	8%	6%*	9%*	8%*	12%*	7%	8%
06	213	30	49	63	72			120	5	8		4	1	16	54	156	204	8	150	64	
	4%	4%	4%	4%	5%			5%*	6%	5%		~	5%	3%~	4%	3%*	5%*	4%*	4%	4%	5%
07	399	62	87	136	113			189	8	24		8	5	36	127	269	378	17	291	108	
	7%	7%	7%	8%	7%			8%	9%	15%*		~	11%	14%~	8%	8%	8%*	8%*	8%	7%	8%
09	1754	265	417	543	530			626	30	66	3	15	10	97	534	843	1329	60	1406	348	
	33%	31%	33%	32%	35%			26%*	35%	40%	22%~	21%*	26%~	23%*	31%	27%*	28%*	28%	35%*	27%*	
EXTREMELY EASY	1987	308	490	679	510			909	28	44	9	30	9	173	742	1206	1908	69	1524	462	
	37%	36%	39%	40%*	33%*			38%	32%	27%*	68%~	43%	25%~	41%	44%*	38%	40%*	32%	38%	36%	
#8-10 (NET)	3741	573	907	1222	1039			1536	58	111	13	45	19	270	1276	2049	3237	130	2930	810	
	70%	67%*	73%*	72%*	68%*			65%*	67%	67%	90%~	64%	51%~	63%*	75%*	64%*	69%*	59%*	73%*	63%*	
9-10 (NET)	3741	573	907	1222	1039			1536	58	111	13	45	19	270	1276	2049	3237	130	2930	810	
	70%	67%*	73%*	72%*	68%*			65%*	67%	67%	90%~	64%	51%~	63%*	75%*	64%*	69%*	59%*	73%*	63%*	

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	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND	BLCK OR AFR- WHT	NATV HAW/ AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY FAIR & POOR	NO CCC	CCC
88		1	1				1								1	1		1	
NOT ANSWERED	278	100	47	55	75		135	8	15		3	1	22	70	177	234	13	224	54
VALID CASES	5318	853	1249	1688	1529		2369	86	165	14	70	37	426	1698	3181	4716	219	4040	1278
NUMBER OF RESPONDENTS	5597	954	1296	1743	1604		2505	94	180	14	73	38	448	1768	3359	4951	232	4264	1333
100%		100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
MEAN	8.03	7.80	8.18	8.19	7.87		7.79	7.90	8.05	8.97	7.97	6.59	7.59	8.37	7.75	7.99	7.32	8.17	7.62
p stat_(*=Sig @ p<=.05)		.009*	.020*	.002*	.003*	.000*	.642	.921		~.853		~.002*	.000*	.000*	.000*	.001*	.000*	.000*	

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

	BANT OT1	AGE				RACE								ETHNIC- ITY	HEALTH STATUS	CCC SCREENER		
						BLCK	NATV AMER				HIS-	HIS-	EX & VERY					
	OHP TOT CHLD	13 AND				OR	HAW/ IND/ AFR- AS- PAC ALSK				PAN-	PAN-	GOOD FAIR	&	&			
		<4	4-7	8-12	OVER	WHTC	AMER	IAN	ILND	NATV	OTHR	TI	HIS- IC	HIS- IC	EX & VERY			
Q58	EXCELLENT	2209	479	562	638	530	1130	46	53	6	29	15	198	677	1490	2213	1941 267	
		43%	54%*	48%*	39%*	35%*	45%*	49%	29%*	46%~	41%	41%~	44%	39%*	45%*	45%~	~ 50%* 20%*	
	VERY GOOD	1829	265	399	607	559	938	31	75	5	33	19	176	533	1283	1832	1287 543	
		35%	30%*	34%	37%*	37%	38%*	33%	42%	34%~	45%	50%~	40%	31%*	38%*	37%~	~ 33%* 41%*	
	GOOD	904	115	180	290	319	342	13	44	3	9	3	53	425	459	905	536 369	
		17%	13%*	15%*	18%	21%*	14%*	14%	24%*	20%~	12%	7%~	12%*	24%*	14%*	18%~	~ 14%* 28%*	
	FAIR	216	20	32	85	79	73	3	7		1	1	16	106	100	215	90 126	
		4%	2%*	3%*	5%*	5%*	3%*	3%	4%		1%*	3%~	4%	6%*	3%*	~ 93%*	2%* 10%*	
	POOR	17	1	4	4	8	6		2		1		2	6	11	17	3 14	
		0.3%	0.1%	0.3%	0.3%	0.5%	0.2%		~0.9%		~1%		~0.5%	0.4%	0.3%	~ 7%~0.1%*	1%*	
	#EXCELLENT + VERY GOOD + GOOD (NET)	4943	859	1141	1534	1409	2410	90	172	14	71	37	427	1636	3231	4951	3764 1179	
		95%	98%*	97%*	95%*	94%*	97%*	97%	95%	100%~	98%	97%~	96%	94%*	97%*	100%~	~ 98%* 89%*	
	NOT ANSWERED	421	74	119	119	108	16	1			1		2	20	16		407 14	
	VALID CASES NUMBER OF RESPONDENTS	5176 5597 100%	880 954 100%	1177 1296 100%	1624 1743 100%	1496 1604 100%	2489 2505 100%	93 94 100%	180 180 100%	14 14 100%	72 73 100%	38 38 100%	446 448 100%	1748 1768 100%	3343 3359 100%	4951 4951 100%	232 232 100%	3857 1319 4264 1333 100% 100%

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

	BANT OT1	AGE				RACE							ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
	OHP TOT CHLD					BLCK OR AFR- PAN-	NATV HAW/ AS- MER	AMER IND/ PAC	ALSK	MUL- TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD POOR	EX & VERY & GOOD	FAIR & POOR	NO CCC	CCC	
		<4	4-7	8-12	OVER	WHT	AMER	IAN	ILND	NATV	OTHR	TI						
Q59	EXCELLENT	2263	597	566	612	487	1089	38	84	7	21	17	196	779	1446	2227	30	2051 211
		44%	68%*	48%*	38%*	33%*	44%	41%	47%	48%~	30%*	44%~	44%	44%	43%	45%*	13%*	53%* 16%*
	VERY GOOD	1462	175	342	508	437	709	32	46	6	23	14	119	485	961	1423	36	1131 331
		28%	20%*	29%	31%*	29%	28%	35%	26%	42%~	33%	36%~	27%	28%	29%	29%*	15%*	29%* 25%*
	GOOD	981	88	189	331	374	437	18	38	1	17	7	87	360	601	927	49	563 419
		19%	10%*	16%*	20%	25%*	18%*	19%	21%	10%~	24%	18%~	19%	20%*	18%*	19%	21%	15%* 32%*
	FAIR	380	15	67	145	154	201	4	9		9	1	36	111	266	293	86	101 280
		7%	2%*	6%*	9%*	10%*	8%*	4%	5%	~ 13%	3%~	8%	6%*	8%*	6%*	37%*	3%*	21%*
	POOR	91	6	14	30	41	53	1	2		1		8	21	67	60	30	8 83
		2%	0.7%*	1%	2%	3%*	2%*	1%	0.9%	~	1%	~	2%	1%*	2%*	1%*	13%* 0.2%*	6%*
	#EXCELLENT + VERY GOOD + GOOD (NET)	4706	859	1097	1450	1298	2235	88	168	14	61	37	401	1624	3007	4577	115	3745 960
		91%	98%*	93%*	89%*	87%*	90%*	95%	94%	100%~	86%	97%~	90%	92%*	90%*	93%*	50%*	97%* 73%*
	NOT ANSWERED	420	74	118	118	111	16	1	1		3		3	11	19	21	1	410 10
	VALID CASES NUMBER OF RESPONDENTS	5177	880	1178	1625	1493	2489	93	179	14	70	38	445	1757	3340	4930	231	3854 1323
		5597	954	1296	1743	1604	2505	94	180	14	73	38	448	1768	3359	4951	232	4264 1333
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
	OHP TOT CHLD					BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	EX & GOOD FAIR & GOOD POOR	NO CCC	NO CCC		
		<4	4-7	8-12	OVER	13 AND													
Q60	YES	1100 21%	122 14%*	185 16%*	380 23%*	414 28%*	604 24%*	23 25%*	25 14%*	2 13%~	18 26%~	6 17%~	108 24%	289 16%*	796 24%*	985 20%*	107 47%*	264 7%*	838 63%*
	NO	4068 79%	757 86%*	988 84%*	1245 77%*	1077 72%*	1881 76%*	69 75%	152 86%*	12 87%~	51 74%	31 83%~	339 76%	1463 84%*	2541 76%*	3929 80%*	121 53%*	3578 93%*	488 37%*
	NOT ANSWERED	429	75	123	118	114	19	2	2	4	1	1	16	22	37	4	422	7	
VALID CASES	NUMBER OF RESPONDENTS	5168 5597 100%	879 954 100%	1173 1296 100%	1625 1743 100%	1490 1604 100%	2486 2505 100%	92 94 100%	178 180 100%	14 14 100%	69 73 100%	37 38 100%	447 448 100%	1752 1768 100%	3337 3359 100%	4914 4951 100%	228 232 100%	3842 4264 100%	1326 1333 100%

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- MER	NATV HAW/ AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHr	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	FAIR & POOR	NO CCC CCC	
Q61	YES	873 81%	76 64%*	142 77%	317 86%*	338 83%	509 85%*	17 77%~	14 54%~	1 24%~	15 88%~	4 67%~	91 85%	205 73%*	653 84%*	768 80%*	99 92%*	73 29%*	800 96%*
	NO	205 19%	42 36%*	42 23%	54 14%*	67 17%	89 15%*	5 23%~	12 46%~	2 76%~	2 12%~	2 33%~	17 15%	75 27%*	127 16%*	196 20%*	8 8%*	175 71%*	29 4%*
	NOT ANSWERED	22	3	3	9	6	6	1					2	9	10	20		16	6
VALID CASES	1077	118	184	371	405	598	22	26	2	17	6	108	280	781	963	107	248	829	
NUMBER OF RESPONDENTS	1099	121	187	380	411	604	23	26	2	17	6	110	289	791	983	107	264	835	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q60 = YES]

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & GOOD POOR	FAIR & POOR	NO CCC	CCC
Q62	YES	776 91%	58 78%*	119 85%*	292 94%*	307 93%	466 92%*	14 82%~	10 69%~100%~	1 86%~100%~	13 90%	4 80%	80 88%	175 91%	590 91%	685 91%	85 89%	776 ~ 98%~
	NO	79 9%	16 22%*	20 15%*	20 6%*	23 7%	38 8%*	3 18%~	5 31%~	2 ~ 14%~	9 ~ 10%	9 12%	24 12%	55 9%	68 9%	10 11%	62 100%~	17 2%*
	NOT ANSWERED	19	3	3	4	8	5				4	6	10	16	3	12	7	
VALID CASES	855	74	140	312	330	504	17	15	1	15	4	89	199	645	753	96	62	793
NUMBER OF RESPONDENTS	874	77	143	316	338	509	17	15	1	15	4	93	205	655	769	99	74	800
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q60 = YES AND Q61 = YES]

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

	BANT OT1	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
	OHP TOT CHLD	<4 4-7 8-12 OVER				13 AND WHT				BLCK OR AFR- AS- WHT	NATV HAW/ PAC IAN AMER	AMER IND/ ILND IAN	ALSK NATV OTHR	MUL- TI	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD IC	EX & VERY GOOD POOR	FAIR & POOR	NO CCC	NO CCC
Q63																					
YES	862	70	201	297	294	484	17	14	3	14	3	90	212	635	738	116	111	754			
	17%	8%*	17%	18%*	20%*	19%*	18%	8%*	23%~	20%	8%~	20%*	12%*	19%*	15%*	51%*	3%*	57%*			
NO	4287	806	968	1318	1194	2000	76	164	11	56	34	352	1532	2696	4161	110	3723	562			
	83%	92%*	83%	82%*	80%*	81%*	82%	92%*	77%~	80%	92%~	80%*	88%*	81%*	85%*	49%*	97%*	43%*			
NOT ANSWERED	448	78	126	127	116	21	1	2	2	1	5	24	29	52	6	430	17				
VALID CASES	5149	876	1170	1616	1488	2484	93	178	14	71	37	443	1744	3330	4899	226	3834	1316			
NUMBER OF RESPONDENTS	5597	954	1296	1743	1604	2505	94	180	14	73	38	448	1768	3359	4951	232	4264	1333			
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- MER	NATV HAW/ AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHr	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	FAIR & POOR	NO CCC CCC
Q64	YES	714 85%	59 87%	155 79%*	254 87%	246 85%	428 89%*	11 65%~	11 94%~	11 ~ 75%~	2 68%~	80 85%	158 77%*	546 87%*	606 84%*	103 90%*	18 18%*	698 94%*
	NO	130 15%	8 13%	40 21%*	38 13%	44 15%	51 11%*	6 35%~	1 6%~100%~	3 25%~	4 32%~	1 15%	47 23%*	79 13%*	119 16%*	11 10%*	82 82%*	47 6%*
	NOT ANSWERED	20	5	5	2	8	7					1	9	8	16	2	9	11
VALID CASES	845	67	196	292	290	479	17	12	3	15	3	94	205	625	725	114	100	745
NUMBER OF RESPONDENTS	865	72	201	294	298	486	17	12	3	15	3	95	214	633	741	116	109	756
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q63 = YES]

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
	OHP TOT CHLD	13 AND CHLD				BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	
Q65	YES	687 97%	58 100%~	151 98%~	248 98%~	230 95%	418 98%	10 91%~	10 88%~	12 ~100%~	2 100%~	74 94%	148 97%	529 97%	586 98%	95 94%	687 ~ 99%~
	NO	21 3%	4 ~ 2%	6 2%	11 5%	8 2%	1 9%~	1 12%~	~	~	~	5 6%	5 3%	15 3%	15 2%	6 6%	16 100%~0.7%~
	NOT ANSWERED	8	1	2	1	4	2				1	5	3	6	2	2	6
VALID CASES	708	58	155	254	241	426	11	11	12	2	79	153	544	601	101	16	692
NUMBER OF RESPONDENTS	716	59	157	255	245	428	11	11	12	2	80	158	547	607	103	18	698
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q63 = YES AND Q64 = YES]

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

	BANT OT1	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	OHP TOT CHLD					BLCK OR AFR- WHTC AS- AMER	NATV HAW/ IAN	AMER PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD IC	EX & VERY GOOD POOR	FAIR & POOR	NO CCC	NO CCC	
Q66			13 AND																
YES	677 13%	62 7%*	145 12%	225 14%	245 17%*	337 14%	13 14%	29 17%	3 19%~	11 16%	5 14%~	64 14%	205 12%*	465 14%*	571 12%*	98 43%*	145 4%*	534 40%*	
NO	4468 87%	809 93%*	1030 88%	1393 86%	1237 83%*	2148 86%	80 86%	145 83%	11 81%~	59 84%	32 86%~	380 86%	1541 88%*	2867 86%*	4323 88%*	127 57%*	3682 96%*	785 60%*	
NOT ANSWERED	452	83	122	125	122	20	1	6		3	1	4	22	27	57	7	437	14	
VALID CASES	5145	871	1174	1618	1482	2485	93	174	14	70	37	444	1746	3332	4894	225	3827	1319	
NUMBER OF RESPONDENTS	5597	954	1296	1743	1604	2505	94	180	14	73	38	448	1768	3359	4951	232	4264	1333	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- MER	NATV HAW/ AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHr TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	FAIR & POOR	NO CCC CCC		
Q67	YES	528 79%	36 59%*	109 76%	180 84%	203 83%	305 91%*	7 58%~	12 42%~	1 30%~	8 74%~	1 21%~	55 87%	126 64%*	397 86%*	434 77%*	86 92%*	19 14%*	507 96%*
	NO	137 21%	25 41%*	35 24%	35 16%	42 17%	29 9%*	5 42%~	16 58%~	2 70%~	3 26%~	4 79%~	8 13%	71 36%*	64 14%*	130 23%*	7 8%*	117 86%*	21 4%*
	NOT ANSWERED	18	2	3	10	3	5	1	1				2	8	9	14	4	12	6
VALID CASES	665	61	145	215	244	334	12	28	3	11	5	63	197	460	564	93	137	528	
NUMBER OF RESPONDENTS	683	63	148	225	247	339	13	29	3	11	5	65	205	469	578	97	149	534	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q66 = YES]

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	EX & GOOD & GOOD POOR	VERY FAIR & POOR	NO CCC	CCC	
Q68	YES	494 96%	31 88%~	105 97%	169 97%	189 95%	295 98%*	7 100%~	8 72%~	1 100%~	9 100%~	1 100%~	53 98%	111 90%*	376 98%*	406 96%	81 95%	493 ~ 99%~	
	NO	22 4%	4 12%~	3 3%	5 3%	9 5%	6 2%*	3 ~ 28%~	~ ~	~ ~	~ ~	1 2%	1 10%*	12 2%*	9 4%	18 4%	4 5%	17 100%~	5 1%~
	NOT ANSWERED	9	1	1	4	3	4						1	3	6	7	1	2	7
VALID CASES	516	35	108	174	199	301	7	11	1	9	1	54	123	386	424	85	17	499	
NUMBER OF RESPONDENTS	525	36	109	178	202	305	7	11	1	9	1	55	126	392	431	86	19	506	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q66 = YES AND Q67 = YES]

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
	OHP TOT CHLD					BLCK OR AFR- MER	NATV HAW/ AMER	AMER AS- IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & GOOD POOR	FAIR & POOR	NO CCC	NO CCC	
Q69		<4	4-7	8-12	OVER	13	AND	WHT	AMER	IAN	ILND	NATV	OTHR	TI					
YES		578 11%	71 8%*	191 16%*	185 11%	131 9%*	300 12%	7 7%	15 9%	12 ~ 17%	2 6%~	50 11%	185 11%	388 12%	496 10%*	75 34%*	144 4%*	435 33%*	
NO		4580 89%	809 92%*	981 84%*	1436 89%	1354 91%*	2184 88%	85 93%	162 91%	14 100%~	58 83%	35 94%~	397 89%	1573 89%	2946 88%	4410 90%*	149 66%*	3698 96%*	881 67%*
NOT ANSWERED		438	74	124	122	119	22	2	2	2	1	1	10	25	45	8	422	16	
VALID CASES NUMBER OF RESPONDENTS		5159 5597 100%	880 954 100%	1172 1296 100%	1621 1743 100%	1485 1604 100%	2483 2505 100%	92 94 100%	178 180 100%	14 14 100%	71 73 100%	37 38 100%	447 448 100%	1758 1768 100%	3334 3359 100%	4906 4951 100%	224 232 100%	3842 4264 100%	1317 1333 100%

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
	OHP TOT CHLD	13 AND CHLD				BLCK OR AFR- MER	NATV HAW/ AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD GOOD	EX & VERY & POOR	FAIR & POOR	NO CCC CCC
Q70	YES	400 72%	44 70%	116 61%*	136 75%	105 83%*	221 76%*	6 86%~	9 61%~	5 ~ 41%~	38 ~ 76%~	113 64%*	281 75%*	330 69%*	64 90%*	20 15%*	380 89%*	
	NO	158 28%	19 30%	74 39%*	44 25%	21 17%*	70 24%*	1 14%~	6 39%~	7 ~ 59%~100%~	1 24%~	12 36%*	63 25%*	95 31%*	150 10%*	7 85%*	112 11%*	47
	NOT ANSWERED	22	8	4	4	5	9			1	2	8	12	16	5	13	8	
VALID CASES		558	63	190	180	126	291	7	15	12	1	50	176	377	481	71	132	427
NUMBER OF RESPONDENTS		580	71	194	184	131	300	7	15	12	2	52	184	389	497	76	145	435
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q69 = YES]

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	FAIR & POOR	NO CCC	CCC
Q71	YES	367 93%	38 88%~	108 94%~	130 97%*	91 88%~	207 95%	5 83%~	8 91%~	6 ~100%~	36 ~ 95%~	98 88%*	263 95%	301 92%	61 97%	367 ~ 97%~			
	NO	28 7%	5 12%~	6 6%	4 3%*	13 12%	11 5%	1 17%~	1 9%~	~ ~	~ ~	2 5%~	13 12%*	15 5%	25 8%	2 3%	18 100%~	10 3%~	
	NOT ANSWERED	5	1	2	1	1	3					2	3	5		2	3		
VALID CASES	395	43	114	134	104	218	6	9	6	38	111	278	326	63	18	377			
NUMBER OF RESPONDENTS	400	44	116	135	105	221	6	9	6	38	113	281	331	63	20	380			
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			

[ASKED IF Q69 = YES AND Q70 = YES]

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

	BANT OT1	AGE				RACE								ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	OHP TOT CHLD					BLCK OR AFR- WHTC AMER	NATV HAW/ AS- IAN	AMER IND/ PAC ILND	ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD IC	EX & VERY GOOD POOR	FAIR & POOR	NO CCC	NO CCC		
Q72			13 AND																
YES	844 16%	46 5%*	183 16%	292 18%*	324 22%*	500 20%*	15 17%	11 6%*	2 12%~	21 29%*	2 6%~	88 20%	187 11%*	651 20%*	733 15%*	103 46%*	67 2%*	779 59%*	
NO	4310 84%	832 95%*	992 84%	1321 82%*	1165 78%*	1988 80%*	75 83%	166 94%*	12 88%~	51 71%*	35 94%~	357 80%	1567 89%*	2686 80%*	4169 85%*	122 54%*	3765 98%*	544 41%*	
NOT ANSWERED	443	76	121	130	116	17	4	3		1	1	2	13	22	49	7	432	10	
VALID CASES NUMBER OF RESPONDENTS	5154 5597 100%	878 954 100%	1175 1296 100%	1613 1743 100%	1488 1604 100%	2488 2505 100%	90 94 100%	177 180 100%	14 14 100%	72 73 100%	37 38 100%	446 448 100%	1755 1768 100%	3337 3359 100%	4902 4951 100%	225 232 100%	3832 4264 100%	1323 1333 100%	

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHr TI	HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & GOOD POOR	FAIR & POOR	NO CCC	CCC		
Q73	YES	755 92%	36 85%~	171 95%	257 91%	291 92%	451 93%	13 86%~	9 92%~	1 49%~	20 93%~100%~	1 95%	164 89%	584 93%	648 91%*	98 96%*	753 ~ 98%~		
	NO	67 8%	6 15%~	10 5%	26 9%	25 8%	34 7%	2 14%~	1 8%~	1 51%~	1 7%~	1 ~	4 5%	21 11%	44 7%	63 9%*	4 4%*	56 100%~	12 2%~
	NOT ANSWERED	24	4	2	7	11	16				1	2	5	19	23	1	13	11	
VALID CASES		822	42	181	282	317	485	15	10	2	21	1	88	185	628	711	102	56	766
NUMBER OF RESPONDENTS		846	46	183	289	328	501	15	10	2	21	2	90	190	647	734	103	69	777
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q72 = YES]

NQ74 WHAT IS YOUR CHILD'S AGE?

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
		OHP TOT CHLD	13 AND OVER	BLCK OR AFR- MER	NATV HAW/ AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHr	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD GOOD	EX & VERY & POOR			
NQ74		<4	4-7	8-12	OVER	WHTC	AMER	IAN	ILND	NATV	OTHR	TI					
3 YEARS OLD OR LESS		958	954	442	19	30	7	3	76	294	581	864	21	850	107		
		17%	100%~	~	~	~	18%	20%	16%	~	9%*	8%~	17%	17%	9%*	20%*	
4 TO 7 YEARS OLD		1300	1296	555	22	42	6	14	11	120	403	768	1146	36	1029	271	
		23%	~100%~	~	~	~	22%	23%	23%	41%~	19%	29%~	27%	23%	23%	16%*	24%*
8 TO 12 YEARS OLD		1743	1743	751	30	52	7	25	13	136	588	1017	1537	89	1281	463	
		31%	~	~100%~	~	~30%	32%	29%	52%~	34%	34%~	30%	33%*	30%	31%	38%*	30%*
13 OR OLDER		1596	1604	758	23	57	1	28	11	116	483	993	1404	86	1104	492	
		29%	~	~	~100%~	30%*	24%	32%	7%~	39%	29%~	26%	27%	30%*	28%	37%*	26%*
VALID CASES		5597	954	1296	1743	1604	2505	94	180	14	73	38	448	1768	3359	4951	232
NUMBER OF RESPONDENTS		5597	954	1296	1743	1604	2505	94	180	14	73	38	448	1768	3359	4951	232
		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]

NQ75 IS YOUR CHILD MALE OR FEMALE?

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHr TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD FAIR & GOOD POOR	EX & VERY & GOOD POOR	NO CCC CCC			
NQ75																			
MALE		2885 52%	473 50%	671 52%	912 52%	830 52%	1302 52%	44 47%	85 47%	11 81%~	43 59%	18 48%~	227 51%	909 51%	1735 52%	2547 51%	125 54%	2113 50%*	773 58%*
FEMALE		2712 48%	481 50%	625 48%	831 48%	774 48%	1203 48%	50 53%	95 53%	3 19%~	30 41%	20 52%~	221 49%	859 49%	1624 48%	2404 49%	107 46%	2151 50%*	560 42%*
VALID CASES NUMBER OF RESPONDENTS		5597 5597 100%	954 954 100%	1296 1296 100%	1743 1743 100%	1604 1604 100%	2505 2505 100%	94 94 100%	180 180 100%	14 14 100%	73 73 100%	38 38 100%	448 448 100%	1768 1768 100%	3359 3359 100%	4951 4951 100%	232 232 100%	4264 4264 100%	1333 1333 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	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- MER	NATV HAW/ AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	FAIR & POOR	NO CCC CCC	
Q76	HISPANIC OR LATINO	1796 35%	297 34%	408 35%	598 37%*	493 33%							1768 ~100%~	1664 ~34%*	113 51%*	1476 39%*	320 24%*		
	NOT HISPANIC OR LATINO	3329 65%	573 66%	759 65%	1008 63%*	989 67%	2478 100%~	91 100%~	176 100%~	14 100%~	72 100%~	36 100%~	439 100%~	3359 ~100%~	3207 66%*	110 49%*	2335 61%*	994 76%*	
	NOT ANSWERED	473	84	128	138	123	27	3	4	1	2	9			79	9	453	19	
	VALID CASES NUMBER OF RESPONDENTS	5124 5597 100%	870 954 100%	1168 1296 100%	1605 1743 100%	1481 1604 100%	2478 2505 100%	91 94 100%	176 180 100%	14 14 100%	72 73 100%	36 38 100%	439 448 100%	1768 1768 100%	3359 3359 100%	4872 4951 100%	223 232 100%	3811 4264 100%	1314 1333 100%

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER						
	OHP TOT CHLD					BLCK OR AFR- WHT	NATV HAW/ AMER AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD GOOD	EX & VERY & POOR				
		<4	4-7	8-12	OVER	13 AND											NO CCC			
Q77.1	YES	3913 70%	698 73%*	888 69%	1193 68%	1134 71%	2505 100%~						425 ~ 95%*	928 53%*	2963 88%*	3750 76%*	141 61%*	2782 65%*	1131 85%*	
	NO	1684 30%	256 27%*	408 31%	550 32%	470 29%		94 ~100%~	180 100%~	14 100%~	73 100%~	38 100%~	23 100%~	840 5%*	396 47%*	1201 12%*	91 24%*	1482 39%*	202 35%*	15%*
VALID CASES NUMBER OF RESPONDENTS		5597 5597 100%	954 954 100%	1296 1296 100%	1743 1743 100%	1604 1604 100%	2505 2505 100%	94 94 100%	180 180 100%	14 14 100%	73 73 100%	38 38 100%	448 448 100%	1768 1768 100%	3359 3359 100%	4951 4951 100%	232 232 100%	4264 4264 100%	1333 1333 100%	

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- MER	NATV HAW/ AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD POOR	EX & VERY & GOOD POOR	NO CCC		
Q77.2	YES	281 5%	50 5%	68 5%	95 5%	67 4%	94 ~100%~					134 ~ 30%*	49 3%*	228 7%*	267 5%*	11 5%	190 4%*	91 7%*	
	NO	5316 95%	904 95%	1228 95%	1648 95%	1537 96%	2505 100%~	180 ~100%~	14 ~100%~	73 ~100%~	38 ~100%~	314 ~100%~	1719 70%*	3131 97%*	4684 93%*	221 95%*	4074 95%*	1242 93%*	
VALID CASES NUMBER OF RESPONDENTS		5597 5597 100%	954 954 100%	1296 1296 100%	1743 1743 100%	1604 1604 100%	2505 2505 100%	94 94 100%	180 180 100%	14 14 100%	73 73 100%	38 38 100%	448 448 100%	1768 1768 100%	3359 3359 100%	4951 4951 100%	232 232 100%	4264 4264 100%	1333 1333 100%

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- WHT	NATV HAW/ AMER AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD POOR	EX & VERY & FAIR	NO CCC		
Q77.3	YES	229 4%	41 4%	62 5%	64 4%	61 4%		180 ~			88 ~		26 1%*	199 6%*	220 4%*	10 4%*	188 4%*	41 3%*	
	NO	5368 96%	913 96%	1234 95%	1679 96%	1543 96%	2505 100%~100%~	94 ~100%~		14 ~100%~	73 ~100%~	38 ~100%~	360 80%*	1742 99%*	3160 94%*	4731 96%*	222 96%*	4076 96%*	1292 97%*
VALID CASES NUMBER OF RESPONDENTS		5597 5597 100%	954 954 100%	1296 1296 100%	1743 1743 100%	1604 1604 100%	2505 2505 100%	94 94 100%	180 180 100%	14 14 100%	73 73 100%	38 38 100%	448 448 100%	1768 1768 100%	3359 3359 100%	4951 4951 100%	232 232 100%	4264 4264 100%	1333 1333 100%

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD FAIR POOR	EX & VERY & GOOD POOR	NO CCC CCC		
Q77.4	YES	93 2%	13 1%	24 2%	37 2%	19 1%			14 ~		55 ~		22 1%	71 2%*	91 2%*0.9%	69 2%	23 2%		
	NO	5504 98%	941 99%	1272 98%	1706 98%	1585 99%	2505 100%~100%~100%~	94 ~100%~	180 ~100%~	73 ~100%~	38 88%*	393 99%	1746 99%	3288 98%*	4860 98%*	230 99%	4195 98%	1310 98%	
VALID CASES NUMBER OF RESPONDENTS		5597 5597 100%	954 954 100%	1296 1296 100%	1743 1743 100%	1604 1604 100%	2505 2505 100%	94 94 100%	180 180 100%	14 14 100%	73 73 100%	38 38 100%	448 448 100%	1768 1768 100%	3359 3359 100%	4951 4951 100%	232 232 100%	4264 4264 100%	1333 1333 100%

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD FAIR POOR	EX & VERY & GOOD POOR	NO CCC CCC		
Q77.5	YES	345 6%	52 5%	78 6%	113 6%	102 6%				73 ~	211 ~47%*	86 5%*	258 8%*	329 7%*	15 6%	227 5%*	118 9%*		
	NO	5252 94%	902 95%	1218 94%	1630 94%	1502 94%	2505 100%~	94 100%~	180 100%~	14 100%~	38 ~100%~	237 53%*	1682 95%*	3101 92%*	4622 93%*	217 94%	4037 95%*	1215 91%*	
VALID CASES		5597	954	1296	1743	1604	2505	94	180	14	73	38	448	1768	3359	4951	232	4264	1333
NUMBER OF RESPONDENTS		5597	954	1296	1743	1604	2505	94	180	14	73	38	448	1768	3359	4951	232	4264	1333
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- WHT	NATV HAW/ AMER AMER	AMER AS- IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD GOOD	EX & VERY & POOR	FAIR & POOR	NO CCC CCC	
Q77.6	YES	390 7%	58 6%	98 8%	119 7%	114 7%					38 ~	65 ~100%~	284 16%*	95 3%*	371 8%*	17 7%*	316 7%*	74 6%*	
	NO	5207 93%	896 94%	1198 92%	1624 93%	1490 93%	2505 100%~	94 100%~	180 100%~	14 100%~	73 100%~	383 ~100%~	1484 85%*	3264 84%*	4580 97%*	215 92%*	3948 93%*	1259 94%*	
VALID CASES NUMBER OF RESPONDENTS		5597 5597 100%	954 954 100%	1296 1296 100%	1743 1743 100%	1604 1604 100%	2505 2505 100%	94 94 100%	180 180 100%	14 14 100%	73 73 100%	38 38 100%	448 448 100%	1768 1768 100%	3359 3359 100%	4951 4951 100%	232 232 100%	4264 4264 100%	1333 1333 100%

Q78 WHAT IS YOUR AGE?

	BANT OT1	AGE				RACE								ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
		OHP TOT CHLD	<4	4-7	8-12	OVER	AND	BLCK		NATV AMER		HIS- PAN-	HIS- PAN-	EX & VERY		GOOD & GOOD	FAIR & POOR			
								WHT	AFR- AMER	AS- IAN	PAC	ALSK	MUL-	TI	IC	IC	NO CCC	CCC		
Q78	UNDER 18	150	20 3%	24 2%	40 2%*	66 3%*	13	76	3	7	~	1	3	9	50	97	143 3%	5 2%	117 3%	33 3%
	18 TO 24	166	113 3%	37 13%*	6 3%	10 0.4%*	0.7%*	84	3	3	~	1	16	57	109	164 3%*	2 1%*	151 4%*	15 1%*	
	25 TO 34	1649	485 32%	561 56%*	484 48%*	117 30%*	794 8%*	30 32%	27 33%	4 15%*	17 28%~	10 24%	141 28%~	594 34%*	1033 31%*	1583 32%*	61 28%	1307 34%*	342 26%*	
	35 TO 44	1916	213 37%	407 25%*	674 35%*	624 42%*	868 42%*	23 35%*	78 25%*	10 43%	23 68%~	15 32%	155 40%~	729 42%*	1162 35%*	1814 37%*	91 42%	1436 38%	480 37%	
	45 TO 54	838	27 16%	95 3%*	285 8%*	432 18%*	408 29%*	20 16%	52 22%	1 29%*	11 3%~	7 15%	87 20%~	247 20%	581 14%*	779 17%*	44 16%*	585 20%	253 15%*	
	55 TO 64	279	9 5%	31 1%*	77 3%*	163 5%	171 11%*	7 7%*	12 8%	~	14 6%	2 4%~	24 5%	48 3%*	227 7%*	261 5%	14 7%	154 4%*	125 10%*	
	65 TO 74	124	2 2%	17 0.2%*	44 1%*	61 3%	85 4%*	5 3%*	2 5%	~	4 1%	~	8 2%	18 1%*	105 3%*	123 3%*	1 0.5%*	67 2%*	56 4%*	
	75 OR OLDER	19	1 0.4%	2 0.1%*	7 0.2%	9 0.4%	10 0.6%	91 0.4%	180 ~	14 ~	73 ~	37 2%	447 ~	1743 2%*	3333 0.1%*	4886 0.5%*	219 0.4%*	11 ~0.3%	8 0.6%	
	NOT ANSWERED	456	85	123	126	122	8	3					1	1	25	26	65	13	435	21
VALID CASES		5141	869	1173	1617	1482	2497	91	180	14	73	37	447	1743	3333	4886	219	3829	1312	
NUMBER OF RESPONDENTS		5597	954	1296	1743	1604	2505	94	180	14	73	38	448	1768	3359	4951	232	4264	1333	
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q79 ARE YOU MALE OR FEMALE?

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
	OHP TOT CHLD					BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD GOOD	EX & VERY & POOR	FAIR & POOR	NO CCC CCC	
		<4	4-7	8-12	OVER														
Q79						13 AND													
MALE		750 15%	84 10%*	144 12%*	255 16%*	267 18%*	338 14%*	19 21%	62 35%*	1 10%~	9 12%	10 29%~	83 19%*	225 13%*	512 15%*	714 15%	31 14%	574 15%	176 13%
FEMALE		4402 85%	789 90%*	1032 88%*	1359 84%	1222 82%*	2161 86%*	73 79%	118 65%*	13 90%~	64 88%	25 71%~	362 81%*	1524 87%*	2823 85%*	4184 85%	191 86%	3261 85%	1141 87%
NOT ANSWERED		444	80	120	129	115	6	2		1	2	3	19	24	53	10	429	15	
VALID CASES		5153	874	1176	1614	1489	2499	92	180	14	72	36	445	1749	3335	4898	222	3835	1318
NUMBER OF RESPONDENTS		5597	954	1296	1743	1604	2505	94	180	14	73	38	448	1768	3359	4951	232	4264	1333
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

	BANT OT1	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
		OHP TOT CHLD	<4	4-7	8-12	OVER	13 AND	BLCK	NATV	AMER	HIS-	HIS-	NOT	EX &	VERY	&	&	NO	
								OR	AFR-	AS-	PAC	ALSK	MUL-	PAN-	PAN-	GOOD	FAIR		
Q80	8TH GRADE OR LESS	513	56	100	184	173	28	10	16	1	1	8	440	53	443	61	440	72	
		10%	7%*	9%	11%*	12%*	1%*	11%	9%	~	1%*	3%~	2%*	26%*	2%*	9%*	28%*	12%*	6%*
	SOME HIGH SCHOOL BUT DID NOT GRADUATE	505	94	101	147	163	154	1	24	10	2	20	288	207	481	24	399	106	
		10%	11%	9%	9%	11%	6%*	1%*	14%	~	14%	4%~	5%*	17%*	6%*	10%	11%	11%*	8%*
	HIGH SCHOOL GRADUATE OR GED	1523	285	349	481	407	720	33	46	4	20	5	111	562	937	1446	64	1172	351
		30%	33%*	30%	30%	28%*	29%	37%	26%	27%~	28%	13%~	25%*	33%*	28%*	30%	29%	31%*	27%*
	SOME COLLEGE OR 2-YEAR DEGREE	1837	303	432	558	544	1122	32	49	7	37	17	217	334	1489	1774	53	1277	560
		36%	35%	37%	35%	37%	45%*	36%	28%*	48%~	50%*	47%~	49%*	19%*	45%*	37%*	24%*	34%*	43%*
	4-YEAR COLLEGE GRADUATE	466	88	124	143	111	301	10	24	1	3	8	56	56	404	453	8	351	116
		9%	10%	11%*	9%	8%*	12%*	11%	14%	9%~	4%*	22%~	13%*	3%*	12%*	9%*	4%*	9%	9%
	MORE THAN 4-YEAR COLLEGE DEGREE	250	34	53	91	73	151	3	15	2	2	4	32	37	213	243	8	152	98
		5%	4%	5%	6%	5%	6%*	3%	9%	16%~	3%	11%~	7%	2%*	6%*	5%	4%	4%*	7%*
	NOT ANSWERED	503	93	137	139	133	30	5	6			1	5	51	56	111	15	472	30
	VALID CASES	5094	861	1159	1604	1471	2475	89	174	14	73	37	443	1717	3303	4840	217	3792	1303
	NUMBER OF RESPONDENTS	5597	954	1296	1743	1604	2505	94	180	14	73	38	448	1768	3359	4951	232	4264	1333
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q81 HOW ARE YOU RELATED TO THE CHILD?

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
				13 AND		BLCK OR	NATV HAW/	AMER IND/		HIS- PAN-	HIS- PAN-	EX & GOOD VERY & FAIR							
OHP TOT CHLD		<4	4-7	8-12	OVER	WHTC AFR- AS- ILND	AMER IAN	PAC ALSK	MUL- OTH TI	IC	IC	GOOD POOR	NO CCC	CCC					
Q81	MOTHER OR FATHER	4706 93%	838 97%*	1085 94%*	1461 92%	1321 90%*	2219 91%*	79 84%*	167 95%	13 90%~	55 78%*	36 98%~	392 91%	1669 96%*	2959 91%*	4469 93%	200 92%	3611 95%*	1095 87%*
	GRANDPARENT	196 4%	15 2%*	32 3%*	83 5%*	65 4%	124 5%*	5 5%	1 0.5%*	11 ~	22 16%*	22 ~	31 5%	164 2%*	185 5%*	8 4%	104 4%	92 4%	3%* 7%*
	AUNT OR UNCLE	35 0.7%	1 0.1%*	4 0.3%*	11 0.7%*	19 1%*	11 0.5%	2 2%	3 1%	~ ~	1 2%~	4 1%	14 0.8%	21 0.6%	31 0.6%	3 1%	18 0.5%*	17 1%*	
	OLDER BROTHER OR SISTER	12 0.2%	1 0.1%	3 0.2%	2 0.1%	7 0.5%	3 0.1%	2 2%	2 1%	1 10%~	~ ~	4 ~	8 0.2%	11 0.3%	1 0.2%	1 0.5%	11 0.3%	1 0.1%	
	OTHER RELATIVE	6 0.1%	3 ~0.3%	1 0.1%	2 0.1%	2 0.1%	2 ~	~ ~	~ ~	~ ~	1 ~0.2%	3 0.2%	3 0.1%	6 0.1%~	4 ~0.1%	2 0.2%		2 0.2%	
	LEGAL GUARDIAN	76 2%	6 0.7%*	11 0.9%*	27 2%	32 2%*	51 2%*	5 5%	~ ~	3 4%	7 ~	9 2%	68 0.5%*	72 2%*	5 1%	35 2%	41 0.9%*	3%*	
	SOMEONE ELSE	34 0.7%	3 0.3%*	13 1%	6 0.4%*	13 0.9%*	18 0.7%	1 1%	4 2%	1 ~	5 1%	6 0.4%*	29 0.9%*	35 0.7%*	18 ~0.5%*	16 1%*			
	NOT ANSWERED	531	90	146	152	144	77		3		2	1	15	33	107	143	15	462	69
VALID CASES		5066	864	1150	1591	1460	2428	94	177	14	71	37	433	1735	3252	4808	217	3802	1264
NUMBER OF RESPONDENTS		5597	954	1296	1743	1604	2505	94	180	14	73	38	448	1768	3359	4951	232	4264	1333
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- WHT MER	NATV HAW/ AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTH TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD EX & VERY FAIR & GOOD POOR	FAIR & GOOD POOR	NO CCC CCC			
Q82	YES	116 4%	10 2%*	25 3%	29 3%	52 5%*	21 1%*	6 9%	21 14%*	~	~	2 4%~	3 1%*	64 7%*	48 2%*	105 3%	7 7%	86 4%	30 4%
	NO	3061 96%	482 98%*	713 97%	933 97%	933 95%*	1670 99%*	58 91%	128 86%*100%~	9 100%~	57 100%~	33 96%~	197 99%*	866 93%*	2145 98%*	2927 97%	94 93%	2254 96%	807 96%
	NOT ANSWERED	63	11	15	19	17	23	1	6	1	4	17	35	47	4	45	18		
VALID CASES	NUMBER OF RESPONDENTS	3176 3239 100%	492 503 100%	738 753 100%	962 981 100%	985 1002 100%	1691 1714 100%	64 65 100%	149 155 100%	9 9 100%	57 58 100%	35 35 100%	200 204 100%	929 946 100%	2193 2228 100%	3032 3079 100%	101 105 100%	2340 2385 100%	836 854 100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- WHT AMER	NATV HAW/ AS- IAN	AMER PAC ILND	ALSK NATV	MUL- OTH TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	NO CCC CCC			
Q83.1	YES	61 52%	5 53%~	13 49%~	18 60%~	25 48%~	10 48%~	5 83%~	5 24%~	1 ~	1 ~	1 36%~	1 39%~	34 55% 47%	25 55%~ 57%~	46 52%~ 51%~	16	
	NO	58 48%	5 47%~	14 51%~	12 40%~	27 52%~	11 52%~	1 17%~	16 76%~	~	1 ~	2 64%~	2 61%~	28 45% 53%	29 54%~ 43%~	3 48%~ 49%~	15	
VALID CASES NUMBER OF RESPONDENTS		119 119 100%	10 10 100%	27 27 100%	30 30 100%	52 52 100%	21 21 100%	6 6 100%	21 21 100%		2 2 100%	3 3 100%	62 62 100%	54 54 100%	109 109 100%	7 7 100%	88 88 100%	31 31 100%

[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	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- WHT MER	NATV HAW/ AMER IAN	AMER PAC ILND	ALSK NATV	MUL- OTH TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	NO CCC CCC			
Q83.2	YES	36 30%	3 32%~	5 20%~	10 33%~	17 34%~	6 28%~	2 33%~	7 32%~	~	~	~	20 32%	16 29%	34 31%~	1 14%~	27 30%~	9 30%~
	NO	83 70%	7 68%~	22 80%~	20 67%~	35 66%~	15 72%~	4 67%~	14 68%~	~	2 ~100%~	3 100%~	42 68%	38 71%	75 69%~	6 86%~	61 70%~	22 70%~
VALID CASES NUMBER OF RESPONDENTS		119 119 100%	10 100%	27 100%	30 100%	52 100%	21 100%	6 100%	21 100%		2 100%	3 100%	62 100%	54 100%	109 100%	7 100%	88 100%	31 100%

[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	AGE				RACE				ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- WHT E AMER	NATV HAW/ AS- IAN	AMER ILND	PAC NATV	ALSK OTHR	MUL- TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD FAIR & GOOD POOR	EX & VERY & GOOD POOR	NO CCC CCC	
Q83.3	YES	17 14%	1 10%~	7 25%~	3 9%~	7 13%~	7 33%~	5 ~ 24%~	~ ~	2 ~ 61%~	4 6%*	14 26%*	15 14%~	1 14%~	8 9%~	9 28%~	
	NO	102 86%	9 90%~	20 75%~	27 91%~	45 87%~	14 67%~100%~	6 76%~	16 ~100%~	2 39%~	1 94%*	58 74%*	40 86%~	94 86%~	6 86%~	80 91%~	22 72%~
VALID CASES NUMBER OF RESPONDENTS		119 119 100%	10 100%	27 100%	30 100%	52 100%	21 100%	6 100%	21 100%	2 100%	3 100%	62 100%	54 100%	109 100%	7 100%	88 100%	31 100%

[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	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- CHLD	NATV HAW/ AS- WHTC	AMER IAN AMER	PAC ILND	ALSK NATV	MUL- OTHr TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD GOOD	EX & VERY & POOR	FAIR & POOR	NO CCC CCC
Q83.4	YES	51 43%	3 26%~	13 47%~	15 49%~	21 40%~	3 ~ 50%~	12 56%~	2 ~ 100%~	2 ~	33 ~ 53%*	15 29%*	50 46%~	1 14%~	43 49%~	8 25%~	
	NO	68 57%	7 74%~	14 53%~	15 51%~	31 60%~	21 100%~	3 50%~	9 44%~	~	3 ~ 100%~	29 47%*	39 71%*	59 54%~	6 86%~	45 51%~	23 75%~
VALID CASES NUMBER OF RESPONDENTS		119 119 100%	10 10 100%	27 27 100%	30 30 100%	52 52 100%	21 21 100%	6 6 100%	21 21 100%	2 2 100%	3 3 100%	62 62 100%	54 54 100%	109 109 100%	7 7 100%	88 88 100%	31 31 100%

[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	AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER					BLCK OR AFR- WHT E AMER	NATV HAW/ AS- IAN	AMER PAC ILND	ALSK NATV	MUL- OTH TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD FAIR & GOOD POOR	EX & VERY & GOOD POOR	NO CCC CCC		
Q83.5	YES	7 6%	1 10%~	1 2%~	2 7%~	3 6%	3 14%~	2 ~ 12%~	~	~	~	2 ~ 3%~	5 10%	5 4%~	1 14%~	4 4%~	3 10%~	
	NO	112 94%	9 90%~	26 98%~	28 93%~	49 94%	18 86%~100%~	6 88%~	19 ~100%~	~	2 ~100%~100%~	3 97%~	60 90%	49 90%	104 96%~	6 86%~	84 96%~	28 90%~
VALID CASES NUMBER OF RESPONDENTS		119 119 100%	10 100%	27 100%	30 100%	52 100%	21 100%	6 100%	21 100%	2 100%	3 100%	62 100%	54 100%	109 100%	7 100%	88 100%	31 100%	

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

NQ14 RATING OF ALL CHILD'S HEALTH CARE

	BANT OT1	AGE				RACE								ETHNIC- ITY	HEALTH STATUS	CCC SCREENER		
		OHP TOT CHLD	13 AND CHLD	<4	4-7	8-12	OVER	BLCK	NATV	AMER	OR	HAW/	IND/	HIS-	HIS-	NOT	EX &	VERY
								AFR-	AS-	PAC	ALSK	MUL-	PAN-	PAN-	PAN-	GOOD	FAIR	&
NQ14	0-6	288	48 56 81 103	145	3	4	1	7	3	22	77	184	237	28	196	92		
		8%	7% 7%* 8% 11%*	8%	9%~	9%~	7%~	18%~	14%~	8%	7%	8%	8%*	17%*	8%	9%		
	7-8	990	193 234 275 287	553	9	16	1	10	8	84	245	691	877	57	665	325		
		29%	28% 28% 27% 31%*	32%*	27%~	34%~	12%~	28%~	37%~	29%	23%*	31%*	28%*	35%	27%*	32%*		
	9-10	2183	444 552 655 531	1056	21	27	8	20	11	183	755	1332	2025	77	1590	592		
		63%	65% 66% 65% 58%*	60%*	64%~	57%~	81%~	54%~	49%~	63%	70%*	60%*	65%*	48%*	65%*	59%*		
VALID CASES	NUMBER OF RESPONDENTS	3460	685 842 1012 921	1754	33	47	10	36	22	289	1076	2207	3139	162	2451	1009		
		3460	685 842 1012 921	1754	33	47	10	36	22	289	1076	2207	3139	162	2451	1009		
		100%	100% 100% 100% 100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
MEAN		2.55	2.58 2.59 2.57 2.47	2.52	2.55	2.48	2.74	2.36	2.35	2.56	2.63	2.52	2.57	2.30	2.57	2.50		
p stat_(*=Sig @ p<=.05)		.156 .030*.252 .000*.008*	~ ~ ~ ~	~	~	~	~	~	~	.754	.000*.001*	0.000*.000*	.002*.002*					

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

	BANT OT1	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD GOOD	EX & VERY & POOR	FAIR & POOR	NO CCC CCC
NQ41																		
0-6	268 6%	33 4%*	65 7%	88 7%	82 7%	155 7%*	1 3%~	4 9%	2 25%~	3 7%~	30 ~	58 8%*	198 7%*	244 6%	19 10%	176 6%*	92 8%*	
7-8	931 22%	148 19%*	217 22%	289 22%	276 24%	490 23%	7 18%~	10 20%		11 ~ 31%~	11 45%~	79 23%	279 20%*	619 23%*	852 22%*	48 26%	678 22%	252 22%
9-10	3047 72%	590 77%*	711 72%	946 72%	800 69%*	1500 70%*	32 80%~	37 72%	7 75%~	22 62%~	13 55%~	243 69%	1085 76%*	1859 69%*	2858 72%*	115 63%*	2254 73%	793 70%
VALID CASES NUMBER OF RESPONDENTS	4246 4246 100%	771 771 100%	993 993 100%	1323 1323 100%	1159 1159 100%	2146 2146 100%	40 50%~	51 70%~	9 72%	36 62%~	24 55%~	352 69%	1422 1422 100%	2676 2676 100%	3954 3954 100%	182 182 100%	3109 3109 100%	1137 1137 100%
MEAN	2.65	2.72	2.65	2.65	2.62	2.63	2.77	2.63	2.50	2.55	2.55	2.61	2.72	2.62	2.66	2.53	2.67	2.62
p stat_(*=Sig @ p<=.05)		.000*	.794	.665	.020*	.002*		~.790		~	~	~.138	.000*	.000*	.015*	.010*	.016*	.016*

[ASKED IF Q30 = YES]

NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

	BANT OT1	AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER					
	OHP TOT CHLD	13 AND <4 4-7 8-12 OVER					BLCK OR AFR- WHT E AMER	NATV HAW/ AS- IAN	AMER PAC ILND	ALSK NATV	MUL- TI OTHR	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD GOOD	EX & VERY & POOR	FAIR & POOR	NO CCC	CCC	
NQ48																			
0-6		69 9%	9 11%	14 8%	16 7%	30 11%	42 9%	1 10%~	1 15%~	~	~	~	6%	18 8%	50 9%	55 8%	12 14%	27 8%	42 9%
7-8		184 24%	19 22%	41 22%	51 23%	73 26%	117 27%*	1 10%~	3 31%~	~	2 22%~	1 100%~	18 26%	33 16%*	141 26%*	157 23%	22 25%	78 24%	107 23%
9-10		525 67%	58 67%	129 70%	160 70%	177 63%	284 64%*	8 80%~	5 54%~	~	78%~	~	48 68%	161 76%*	351 65%*	460 69%	52 61%	219 68%	307 67%
VALID CASES	779	87	184	228	280	443	10	10	7	1	70	212	542	672	86	324	455		
NUMBER OF RESPONDENTS	779	87	184	228	280	443	10	10	7	1	70	212	542	672	86	324	455		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		
MEAN		2.59	2.56	2.63	2.63	2.53	2.55	2.70	2.40	2.78	2.00	2.63	2.67	2.56	2.60	2.47	2.59	2.58	
p stat_(*=Sig @ p<=.05)		.756	.329	.184	.063	.043*	~	~	~	~	~	.534	.016*	.066	.085	.068	.854	.854	

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

NQ54 RATING OF CHILD'S HEALTH PLAN

	BANT OT1	AGE				RACE								ETHNIC- ITY	HEALTH STATUS	CCC SCREENER	
	OHP TOT CHLD					BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD EX & VERY FAIR & POOR	HEALTH STATUS	CCC NO CCC
		<4	4-7	8-12	OVER												
NQ54		651	81	134	205	231	404	9	9	3	12	8	60	116	512	589	51
0-6		13%	10%*	12%	13%	16%*	17%*	17%	12%	24%~	24%~	22%~	15%	7%*	17%*	13%*	23%*
7-8		1406	221	299	433	454	831	12	24	2	17	10	147	333	1055	1318	67
		29%	27%	27%	28%	32%*	34%*	22%	31%	13%~	34%~	29%~	38%*	20%*	34%*	29%	30%
9-10		2831	531	685	891	723	1210	33	45	8	21	17	184	1249	1514	2688	108
		58%	64%*	61%*	58%	51%*	49%*	61%	57%	64%~	42%~	49%~	47%*	74%*	49%*	59%*	48%*
VALID CASES	NUMBER OF RESPONDENTS	4888	833	1118	1529	1408	2445	54	78	12	49	35	391	1698	3081	4595	225
		4888	833	1118	1529	1408	2445	54	78	12	49	35	391	1698	3081	4595	225
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
MEAN		2.45	2.54	2.49	2.45	2.35	2.33	2.44	2.46	2.40	2.18	2.26	2.32	2.67	2.33	2.46	2.25
p stat_(*=Sig @ p<=.05)			.000*	.014*	.839	.000*	.000*	.976	.904	~	~	~	~.000*	.000*	.000*	.000*	.000*

GETTING NEEDED CARE

BANT OT1	AGE				RACE				ETHNIC- ITY	HEALTH STATUS	CCC SCREENER							
OHP TOT CHLD					BLCK OR AFR- CHLD	NATV HAW/ AS- WHTC	AMER IND/ AMER IAN	PAC ALSK ILND	MUL- NATV OTHR TI	HIS- PAN- IC	NOT GOOD FAIR & GOOD POOR	EX & VERY & GOOD POOR						
NPRBSEE4 NQ46	2.27	<4	4-7	8-12	13 AND OVER	2.30	2.09	2.02	2.44	2.00	2.35	2.20	2.30	2.29	2.09	2.29	2.25	
p stat_(*=Sig @ p<=.05)		.611	.509	.251	.406	.145	~	~	~	~	.326	.124	.055	.021*	.023*	.496	.497	
NCARNES4 NQ15	2.49	2.59	2.51	2.48	2.42	2.52	2.56	2.03	2.19	2.51	2.51	2.46	2.52	2.52	2.13	2.53	2.39	
p stat_(*=Sig @ p<=.05)		.000*	.287	.466	.000*	.005*	~	~	~	~	.071	.084	.002*	.000*	.000*	.000*	.000*	
COMPOSITE	2.38	2.45	2.37	2.40	2.33	2.41	2.33	2.02	2.19	2.48	2.26	2.46	2.33	2.41	2.41	2.11	2.41	2.32
p stat_(*=Sig @ p<=.05)		.000*	.655	.125	.000*	.000*	~.000*	~	~	~.006*	.000*	.000*	.000*	.000*	.000*	.000*	.000*	

GETTING CARE QUICKLY

BANT OT1	AGE	RACE	ETHNIC- ITY	HEALTH STATUS	CCC SCREENER
OHP TOT CHLD	13 AND <4 4-7 8-12 OVER	BLCK NATV AMER OR HAW/ IND/ AFR- AS- PAC ALSK MUL- WHT AMER IAN ILND NATV OTHR TI	HIS- NOT PAN- HIS- GOOD FAIR IC IC & & GOOD POOR	EX & VERY	
NCARSN4 NQ4	2.65	2.69 2.69 2.65 2.57	2.68 2.66 2.37 2.17	2.88 2.46 2.71	2.63 2.68 2.67 2.45
p stat_(*=Sig @ p<=.05)	.249 .101 .867 .006*	.060 ~ ~ ~ ~	.259	.444 .023*	.002* .007*.109 .109
NAPGET4 NQ6	2.46	2.57 2.43 2.46 2.41	2.52 2.41 1.96 2.17	2.51 2.33 2.51	2.41 2.50 2.47 2.34
p stat_(*=Sig @ p<=.05)	.000*.166 .969 .007*	.000* ~.000* ~ ~ ~	.265	.004*.001*	.024*.027*.835 .835
COMPOSITE	2.56	2.63 2.56 2.56 2.49	2.60 2.54 2.16 2.17	2.69 2.40 2.61	2.52 2.59 2.57 2.40
p stat_(*=Sig @ p<=.05)	.000*.628 .894 .000*	.000* ~.001* ~ ~ ~	.095	.003*.000*	.000*.000*.059 .121

HOW WELL DOCTORS COMMUNICATE

BANT OT1	AGE				RACE				ETHNIC- ITY	HEALTH STATUS	CCC SCREENER											
OHP TOT CHLD			13 AND		BLCK OR AFR- WHTE	NATV HAW/ AS- AMER	AMER IND/ PAC IAN	MUL- ILND NATV	HIS- PAN- IC	EX & NOT GOOD FAIR & GOOD POOR												
NDREXPL4 NQ32	2.76	<4	4-7	8-12	OVER	2.79	2.75	2.77	2.72	2.81	2.78	2.48	2.82	2.85	2.59	2.81	2.68	2.80	2.77	2.54	2.75	2.76
p stat_(*=Sig @ p<=.05)		.046*	.748	.306	.017*	.000*	~	~	~	~	~.091	.000*	.000*	.000*	.000*	.795	.796					
NDRLSTN4 NQ33	2.77	2.80	2.75	2.80	2.73	2.78	2.83	2.66	2.62	2.87	2.70	2.77	2.76	2.77	2.78	2.52	2.78	2.72				
p stat_(*=Sig @ p<=.05)		.085	.220	.048*	.024*	.189	~	~	~	~	~.925	.655	.252	.000*	.000*	.006*	.006*					
NDRESPU4 NQ34	2.81	2.83	2.81	2.82	2.76	2.81	2.86	2.67	2.62	2.75	2.75	2.80	2.81	2.81	2.81	2.64	2.82	2.78				
p stat_(*=Sig @ p<=.05)		.062	.899	.220	.005*	.519	~	~	~	~	~.933	.478	.933	.004*	.001*	.045*	.044*					
NDRTMEN4 NQ37	2.57	2.59	2.52	2.60	2.56	2.65	2.46	2.17	2.27	2.65	2.30	2.68	2.46	2.64	2.58	2.35	2.56	2.59				
p stat_(*=Sig @ p<=.05)		.373	.020*	.058	.655	.000*	~	~	~	~	~.002*	.000*	.000*	.000*	.001*	.230	.230					
COMPOSITE	2.72	2.75	2.70	2.75	2.69	2.76	2.73	2.50	2.58	2.78	2.58	2.76	2.68	2.75	2.74	2.51	2.73	2.71				
p stat_(*=Sig @ p<=.05)		.096	.248	.093	.036*	.000*	~	~	~	~	~.283	.001*	.000*	.000*	.000*	.446	.442					

CUSTOMER SERVICE

BANT OT1	AGE	RACE	ETHNIC- ITY	HEALTH STATUS	CCC SCREENER
OHP TOT CHLD	13 AND <4 4-7 8-12 OVER	BLCK NATV AMER OR HAW/ IND/ AFR- AS- PAC ALSK MUL- WHT AMER IAN ILND NATV OTHR TI	HIS- NOT HIS- PAN- PAN- & & PAN- IC IC GOOD POOR	EX & VERY GOOD FAIR NO CCC CCC	
NPBCLCS4 NQ50	2.28	2.34 2.26 2.25 2.28	2.26 2.61 2.10 1.37 2.25 2.00 2.28	2.30 2.26	2.29 2.10
p stat_(*=Sig @ p<=.05)	.163 .632 .506 .978	.638 ~ ~ ~ ~ .963	.303 .474	.088 .051	.189 .190
NCRESP NQ51	2.60	2.59 2.62 2.59 2.61	2.60 2.61 2.45 1.97 2.41 2.45 2.65	2.61 2.60	2.62 2.40
p stat_(*=Sig @ p<=.05)	.809 .618 .700 .880	.854 ~ ~ ~ ~ .400	.663 .876	.008*.011*.680 .681	
COMPOSITE	2.44	2.47 2.44 2.42 2.44	2.43 2.61 2.27 1.67 2.33 2.22 2.47	2.46 2.43	2.45 2.25
p stat_(*=Sig @ p<=.05)	.524 .959 .577 .933	.855 ~ ~ ~ ~ .679	.437 .631	.038*.039*.352 .350	

SHARED DECISION MAKING

BANT OT1	AGE				RACE				ETHNIC- ITY	HEALTH STATUS	CCC SCREENER							
OHP TOT CHLD			13 AND		BLCK OR AFR- WHTE	NATV HAW/ AS- AMER	AMER IND/ PAC IAN	MUL- ILND NATV	HIS- PAN- IC	EX & VERY GOOD FAIR & GOOD POOR	NO NO CCC CCC							
NNRXWHY NQ11	2.88	2.84	2.90	2.84	2.92	2.91	3.00	2.58	3.00	3.00	2.70	2.97	2.80	2.91	2.87	2.95	2.84	2.92
p stat_(*=Sig @ p<=.05)	.326	.446	.146	.049*	.009*	~	~	~	~	~.001*	.007*	.002*	.825	.039*	.005*	.004*		
NNRXWYNT NQ12	2.42	2.32	2.40	2.38	2.53	2.48	2.32	2.24	3.00	2.38	1.93	2.63	2.28	2.49	2.42	2.38	2.33	2.53
p stat_(*=Sig @ p<=.05)	.126	.671	.387	.009*	.028*	~	~	~	~	~.017*	.001*	.002*	.936	.681	.000*	.000*		
NRXBST NQ13	2.58	2.42	2.51	2.69	2.61	2.57	2.55	2.16	1.00	2.37	2.39	2.64	2.61	2.57	2.57	2.76	2.50	2.68
p stat_(*=Sig @ p<=.05)	.006*	.161	.007*	.431	.734	~	~	~	~	~.488	.421	.658	.134	.023*	.000*	.000*		
COMPOSITE	2.63	2.53	2.60	2.64	2.69	2.66	2.62	2.33	2.33	2.58	2.34	2.75	2.56	2.66	2.62	2.70	2.55	2.71
p stat_(*=Sig @ p<=.05)	.022*	.527	.713	.033*	.104	~	~	~	~	~.063	.036*	.025*	.497	.336	.000*	.000*		

ACCESS TO SPECIALIZED SERVICES

BANT OT1	AGE				RACE				ETHNIC- ITY	HEALTH STATUS	CCC SCREENER
OHP TOT CHLD		13 AND	BLCK OR AFR- WHTE	NATV HAW/ AS- AMER	AMER IND/ PAC IAN	MUL- ILND NATV	ALSK OTHR	TI	HIS- PAN- IC	EX & VERY GOOD FAIR & GOOD POOR	NO CCC CCC
NEZMDEQ NQ20	2.30	<4 4-7 8-12 OVER	2.52 2.26 2.20 2.27	2.32 2.24 2.33	1.00 2.00	2.00 3.00	2.33	2.33 2.31	2.35 2.08	2.44 2.21	
p stat_(*=Sig @ p<=.05)			~.711 .250	~.679	~ ~ ~ ~	~ ~ ~ ~	~ ~ ~ ~	~.662 .795	~ ~.043*	.043*	
NEZTHP NQ23	2.19	2.26 2.23 2.20 2.09	2.17 2.00 2.00		1.87	3.00	2.25	2.24 2.16	2.23 1.91	2.28 2.15	
p stat_(*=Sig @ p<=.05)			.488 .457 .895 .127	.651	~ ~ ~ ~	~ ~ ~ ~	~ ~ ~ ~	~.403 .309	.018* .007* .107 .106		
NEZTC NQ26	2.18	2.05 2.12 2.15 2.25	2.22 1.48 2.35 3.00	2.53 1.69 2.00	2.21 2.18	2.22 2.00	2.22 2.17				
p stat_(*=Sig @ p<=.05)			~.350 .498 .061	.153	~ ~ ~ ~	~ ~ ~ ~	~ ~ ~ ~	~.062 .615 .844	.002* .035* .495 .495		
COMPOSITE	2.22	2.27 2.21 2.18 2.21	2.24 1.91 2.23 2.00	2.13 2.56 2.20	2.26 2.22	2.27 2.00	2.31 2.17				
p stat_(*=Sig @ p<=.05)			.408 .526 .050 .350	.245	~ ~ ~ ~	~ ~ ~ ~	~.575	.109 .590	.000* .000* .000* .000*		

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

BANTO T1	AGE					RACE							ETHNIC- ITY	HEALTH STATUS	CCC SCREENER		
OHP TOT CHLD	<4 4-7 8-12 13 AND OVER				WHT	BLCK OR AFR- AMER	NATV HAW/ IND/ PAC	AMER ILND	ALSK NATV	MUL- TI OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
PRBSEE4 Q46	78%	81%	76%	80%	76%	79%	73%	62%	83%	49%	81%	76%	79%	79%	70%	78% 77%	
CARNES4 Q15	89%	91%	90%	89%	88%	91%	91%	72%	71%	90%	96%	90%	89%	90%	76%	90% 87%	
AVERAGE	83.42	86.09	82.79	84.33	81.82	84.82	81.69	67.43	71.38	86.68	72.59	85.59	82.65	84.39	84.58	72.59	84.31 81.85

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

BANTO T1	AGE					RACE								ETHNIC- ITY	HEALTH STATUS	CCC SCREENER	
OHP TOT CHLD	<4 4-7 8-12 13 AND OVER				WHT	BLCK OR AFR- AMER	NATV HAW/ AS- IAN	AMER IND/ PAC ILND	ALSK NATV	MUL- TI OTHR	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & & POOR	NO CCC	CCC	
CARSN4 Q4	91%	92%	93%	91%	89%	93%	95%	82%	61%	100%	76%	92%	91%	92%	92%	91%	
APGET4 Q6	86%	90%	84%	86%	85%	89%	79%	70%	62%	91%	80%	90%	84%	88%	86%	86%	
AVERAGE	88.65	90.86	88.50	88.45	87.23	90.78	87.10	75.91	61.43	95.57	77.79	90.66	87.35	89.91	89.31	82.95	88.43
																	89.20

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

BANT OT1	AGE				RACE								ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
OHP TOT CHLD					BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	FAIR & POOR	NO CCC	CCC
	<4	4-7	8-12	OVER														
DREXPL4 Q32	95%	96%	93%	95%	94%	96%	91%	89%	100%	96%	95%	96%	93%	96%	95%	87%	94%	95%
DRLSTN4 Q33	95%	96%	95%	95%	94%	96%	93%	91%	91%	96%	85%	94%	95%	96%	96%	84%	96%	94%
DRESPU4 Q34	96%	97%	96%	96%	95%	96%	94%	91%	91%	92%	90%	96%	97%	96%	96%	91%	96%	95%
DRTMEN4 Q37	90%	91%	88%	91%	90%	93%	81%	79%	70%	90%	74%	93%	86%	92%	90%	79%	89%	91%
AVERAGE	93.9	95.1	93.0	94.1	93.4	95.5	89.8	87.8	88.0	93.5	86.3	94.9	92.6	94.8	94.4	85.0	93.9	93.8

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

BANTO T1	AGE					RACE								ETHNIC- ITY	HEALTH STATUS	CCC SCREENER		
OHP TOT CHLD	<4 4-7 8-12 13 AND OVER				WHT	BLCK OR AFR- AMER	NATV HAW/ IND/ PAC	AMER ILND	ALSK NATV	MUL- TI OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
PBCLCS4 Q50	78%	84%	76%	77%	78%	78%	96%	67%	49%	80%	78%	80%	79%	78%	78%	75%		
CSRESP Q51	91%	91%	92%	90%	92%	91%	100%	88%	69%	87%	100%	93%	92%	91%	91%	90%	91%	
AVERAGE	84.72	87.22	84.06	83.63	84.94	84.11	97.98	77.37	58.94	83.29	89.07	86.21	85.27	84.62	84.89	82.42	84.99	84.05

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

BANT OT1	AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER							
OHP TOT CHLD	13 AND CHLD				<4	4-7	8-12	OVER	BLCK OR AFR- WHT	NATV HAW/ AS- AMER	AMER IAN	ILND NATV	MUL- OTHR TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	FAIR & POOR	NO CCC	CCC
NRXWHY Q11	94%	92%	95%	92%	96%	96%	100%	86%	100%	100%	85%	99%	90%	96%	94%	98%	92%	96%		
NRXWYNT Q12	71%	67%	70%	69%	77%	74%	69%	71%	100%	73%	46%	80%	64%	74%	71%	69%	67%	77%		
RXBST Q13	79%	72%	76%	84%	81%	79%	77%	66%	36%	67%	70%	81%	81%	79%	78%	88%	75%	84%		
AVERAGE	81.5	76.9	80.4	81.9	84.4	82.8	81.9	74.3	78.6	79.7	67.1	86.8	78.6	83.0	81.2	85.0	77.9	85.7		

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

BANT OT1	AGE				RACE								ETHNIC- ITY	HEALTH STATUS	CCC SCREENER		
OHP TOT CHLD					BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHr	TI	HIS- PAN- IC	HIS- PAN- IC	NOT & GOOD	EX & VERY FAIR & POOR	NO CCC	CCC
	<4	4-7	8-12	OVER													
EZMDEQ Q20	76%	90%	72%	73%	76%	77%	80%	67%	0%	50%	100%	81%	81%	76%	79%	70%	80% 74%
EZTHP Q23	72%	74%	73%	72%	69%	71%	86%	62%		50%	100%	73%	75%	70%	74%	62%	74% 71%
EZTC Q26	70%	65%	67%	68%	74%	73%	21%	58%	100%	89%	26%	61%	73%	70%	72%	67%	70% 70%
AVERAGE	72.9	76.0	70.7	70.9	73.0	73.5	62.4	62.1	50.0	63.1	75.2	71.6	76.3	72.2	74.6	66.1	74.9 71.7

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

BANT OT1	AGE				RACE								ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
OHP TOT CHLD					BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHr	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & GOOD	EX & VERY & POOR	FAIR & POOR	NO CCC	CCC
	<4	4-7	8-12	OVER														
DRTLKU Q38	87%	94%	88%	89%	81%	87%	84%	87%	70%	84%	90%	89%	88%	87%	88%	81%	88%	87%
DRUNCON Q43	90%	92%	85%	93%	89%	91%	100%	85%	63%	95%	100%	84%	90%	90%	91%	82%	88%	90%
DRUNFAM Q44	85%	89%	84%	87%	83%	87%	100%	85%	63%	95%	100%	76%	85%	86%	87%	76%	85%	86%
AVERAGE	87.6	91.6	85.6	89.7	84.2	88.1	94.5	85.5	65.6	91.6	96.7	83.0	87.9	87.5	88.5	79.8	86.7	87.8

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

BANT OT1	AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
OHP TOT CHLD	13 AND <4 4-7 8-12 OVER				BLCK OR AFR- WHT	NATV HAW/ AMER AS- AMER	AMER IAN	PAC ILND	ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	EX & NOT GOOD FAIR & GOOD POOR	VERY & POOR	NO CCC CCC	
HELPCONT Q18	92%	93%	94%	89%	94%	94%	90%	62%		100%	50%	94%	93%	94%	92%	98%	92% 92%
HLPCOORD Q29	61%	63%	60%	61%	62%	60%	47%	67%	0%	61%	60%	59%	68%	59%	61%	67%	59% 63%
AVERAGE	76.9	77.8	76.8	75.3	78.2	77.0	68.5	64.5		80.7	54.9	76.4	80.3	76.6	76.5	82.3	75.8 77.9

INDEX OF ADULT TABLES

PAGE QUESTION TITLE

1. INTRODUCTION

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

2. YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

3. YOUR PERSONAL DOCTOR

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

4. GETTING HEALTH CARE FROM SPECIALISTS

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

5. YOUR HEALTH PLAN

- 27 Q28 IN THE LAST 6 MONTHS, DID YOU LOOK FOR ANY INFORMATION IN WRITTEN MATERIALS OR ON THE INTERNET ABOUT HOW YOUR HEALTH PLAN WORKS?
- 28 Q29 IN THE LAST 6 MONTHS, HOW OFTEN DID THE WRITTEN MATERIALS OR THE INTERNET PROVIDE THE INFORMATION YOU NEEDED ABOUT HOW YOUR HEALTH PLAN WORKS? [ASKED IF Q28 = YES]
- 29 Q30 IN THE LAST 6 MONTHS, DID YOU GET INFORMATION OR HELP FROM YOUR HEALTH PLAN'S CUSTOMER SERVICE?
- 30 Q31 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR HEALTH PLAN'S CUSTOMER SERVICE GIVE YOU THE INFORMATION OR HELP YOU NEEDED? [ASKED IF Q30 = YES]
- 31 Q32 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR HEALTH PLAN'S CUSTOMER SERVICE STAFF TREAT YOU WITH COURTESY AND RESPECT? [ASKED IF Q30 = YES]
- 32 Q33 IN THE LAST 6 MONTHS, DID YOUR HEALTH PLAN GIVE YOU ANY FORMS TO FILL OUT?
- 33 PQ34 IN THE LAST 6 MONTHS, HOW OFTEN WERE THE FORMS FROM YOUR HEALTH PLAN EASY TO FILL OUT? [ASKED IF Q33 = YES. RESPONSE OF 'ALWAYS' PADDED WITH Q33 = NO]
- 34 Q35 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH PLAN POSSIBLE AND 10 IS THE BEST HEALTH PLAN POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR HEALTH PLAN?
- 35 Q35A IN THE LAST 6 MONTHS, DID YOU HAVE A HEALTH PROBLEM FOR WHICH YOU NEEDED SPECIAL MEDICAL EQUIPMENT, SUCH AS A CANE, A WHEELCHAIR, OR OXYGEN EQUIPMENT?
- 36 Q35B IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THE MEDICAL EQUIPMENT YOU NEEDED THROUGH YOUR HEALTH PLAN? [ASKED IF Q35A = YES]
- 37 Q35C IN THE LAST 6 MONTHS, DID YOU HAVE ANY HEALTH PROBLEMS THAT NEEDED SPECIAL THERAPY, SUCH AS PHYSICAL, OCCUPATIONAL, OR SPEECH THERAPY?
- 38 Q35D IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THE SPECIAL THERAPY YOU NEEDED THROUGH YOUR HEALTH PLAN? [ASKED IF Q35C = YES]

PAGE QUESTION TITLE

5. ADDITIONAL QUESTIONS

- 39 Q35E IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER TALK TOO FAST WHEN TALKING TO YOU?
- 40 Q35F IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER INTERRUPT YOU WHEN YOU WERE TALKING?
- 41 Q35G IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER USE A CONDESCENDING, SARCASTIC, OR RUDE TONE OR MANNER WITH YOU?
- 42 Q35H IN THE LAST 6 MONTHS, DID YOU FEEL YOU COULD TRUST A DOCTOR OR OTHER HEALTH PROVIDER WITH YOUR MEDICAL CARE?

5. ACCESS TO DENTAL CARE

- 43 Q35I A REGULAR DENTIST IS ONE YOU WOULD GO TO FOR CHECK-UPS AND CLEANINGS OR WHEN YOU HAVE A CAVITY OR TOOTH PAIN. DO YOU HAVE A REGULAR DENTIST?
- 44 Q35J IN THE LAST 6 MONTHS, DID YOU GO TO A DENTIST'S OFFICE OR CLINIC FOR CARE?
- 45 Q35K IN THE LAST 6 MONTHS, HOW OFTEN DID THE DENTISTS OR DENTAL STAFF EXPLAIN WHAT THEY WERE DOING WHILE TREATING YOU?
- 46 Q35L IF YOU TRIED TO GET AN APPOINTMENT FOR YOURSELF WITH A DENTIST WHO SPECIALIZES IN A PARTICULAR TYPE OF DENTAL CARE (SUCH AS ROOT CANALS OR GUM DISEASE) IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT AS SOON AS YOU WANTED?
- 47 Q35M IN THE LAST 6 MONTHS, IF YOU NEEDED TO SEE A DENTIST RIGHT AWAY BECAUSE OF A DENTAL EMERGENCY, DID YOU GET TO SEE A DENTIST AS SOON AS YOU WANTED?
- 48 Q35N USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS EXTREMELY DIFFICULT AND 10 IS EXTREMELY EASY, WHAT NUMBER WOULD YOU USE TO RATE HOW EASY IT WAS FOR YOU TO FIND A DENTIST?

PAGE QUESTION TITLE

6. ABOUT YOU

- 49 Q36 IN GENERAL, HOW WOULD YOU RATE YOUR OVERALL HEALTH?
- 50 Q37 IN GENERAL, HOW WOULD YOU RATE YOUR OVERALL MENTAL OR EMOTIONAL HEALTH?
- 51 Q38 HAVE YOU HAD EITHER A FLU SHOT OR FLU SPRAY IN THE NOSE SINCE JULY 1, 2017?
- 52 Q39 DO YOU NOW SMOKE CIGARETTES OR USE TOBACCO EVERY DAY, SOME DAYS, OR NOT AT ALL?
- 53 Q40 IN THE LAST 6 MONTHS, HOW OFTEN WERE YOU ADVISED TO QUIT SMOKING OR USING TOBACCO BY A DOCTOR OR OTHER HEALTH PROVIDER IN YOUR PLAN? [ASKED IF Q39 = EVERY DAY OR SOME DAYS]
- 54 Q41 IN THE LAST 6 MONTHS, HOW OFTEN WAS MEDICATION RECOMMENDED OR DISCUSSED BY A DOCTOR OR HEALTH PROVIDER TO ASSIST YOU WITH QUITTING SMOKING OR USING TOBACCO? EXAMPLES OF MEDICATION ARE: NICOTINE GUM, PATCH, NASAL SPRAY, INHALER, OR PRESCRIPTION MEDICATION. [ASKED IF Q39 = EVERY DAY OR SOME DAYS]
- 55 Q42 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR DOCTOR OR HEALTH PROVIDER DISCUSS OR PROVIDE METHODS AND STRATEGIES OTHER THAN MEDICATION TO ASSIST YOU WITH QUITTING SMOKING OR USING TOBACCO? EXAMPLES OF METHODS AND STRATEGIES ARE: TELEPHONE HELPLINE, INDIVIDUAL OR GROUP COUNSELING, OR CESSION 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
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- 59 Q46.1 ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: HIGH CHOLESTEROL
- 60 Q46.2 ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: HIGH BLOOD PRESSURE
- 61 Q46.3 ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: PARENT OR SIBLING WITH HEART ATTACK BEFORE THE AGE OF 60
- 62 Q47.1 HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: A HEART ATTACK
- 63 Q47.2 HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: ANGINA OR CORONARY HEART DISEASE
- 64 Q47.3 HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: A STROKE
- 65 Q47.4 HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: ANY KIND OF DIABETES OR HIGH BLOOD SUGAR
- 66 Q48 IN THE LAST 6 MONTHS, DID YOU GET HEALTH CARE 3 OR MORE TIMES FOR THE SAME CONDITION OR PROBLEM?
- 67 Q49 IS THIS A CONDITION OR PROBLEM THAT HAS LASTED FOR AT LEAST 3 MONTHS? DO NOT INCLUDE PREGNANCY OR MENOPAUSE. [ASKED IF Q48 = YES]
- 68 Q50 DO YOU NOW NEED OR TAKE MEDICINE PRESCRIBED BY A DOCTOR? DO NOT INCLUDE BIRTH CONTROL.
- 69 Q51 IS THIS MEDICINE TO TREAT A CONDITION THAT HAS LASTED FOR AT LEAST 3 MONTHS? DO NOT INCLUDE PREGNANCY OR MENOPAUSE. [ASKED IF Q50 = YES]
- 70 NQ52 WHAT IS YOUR AGE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
- 71 NQ53 ARE YOU MALE OR FEMALE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
- 72 Q54 WHAT IS THE HIGHEST GRADE OR LEVEL OF SCHOOL THAT YOU HAVE COMPLETED?
- 73 Q55 ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?
- 74 Q56.1 WHAT IS YOUR RACE? RESPONSE: WHITE
- 75 Q56.2 WHAT IS YOUR RACE? RESPONSE: BLACK OR AFRICAN-AMERICAN
- 76 Q56.3 WHAT IS YOUR RACE? RESPONSE: ASIAN
- 77 Q56.4 WHAT IS YOUR RACE? RESPONSE: NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
- 78 Q56.5 WHAT IS YOUR RACE? RESPONSE: AMERICAN INDIAN OR ALASKA NATIVE
- 79 Q56.6 WHAT IS YOUR RACE? RESPONSE: OTHER
- 80 Q57 DID SOMEONE HELP YOU COMPLETE THIS SURVEY? [ASKED IF SURVEY COMPLETED BY MAIL]
- 81 Q58.1 HOW DID THAT PERSON HELP YOU? RESPONSE: READ THE QUESTIONS TO ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
- 82 Q58.2 HOW DID THAT PERSON HELP YOU? RESPONSE: WROTE DOWN THE ANSWERS I GAVE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
- 83 Q58.3 HOW DID THAT PERSON HELP YOU? RESPONSE: ANSWERED THE QUESTIONS FOR ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
- 84 Q58.4 HOW DID THAT PERSON HELP YOU? RESPONSE: TRANSLATED THE QUESTIONS INTO MY LANGUAGE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
- 85 Q58.5 HOW DID THAT PERSON HELP YOU? RESPONSE: HELPED IN SOME OTHER WAY. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]

PAGE QUESTION TITLE

8. RATINGS

86 NQ13 RATING OF ALL HEALTH CARE [ASKED IF Q7 >= 1 TIME]
87 NQ23 RATING OF PERSONAL DOCTOR [ASKED IF Q15 = YES]
88 NQ27 RATING OF SPECIALIST SEEN MOST OFTEN [ASKED IF Q24 = YES AND Q26 >= 1 SPECIALIST]
89 NQ35 RATING OF HEALTH PLAN

9. COMPOSITES

90 GETTING NEEDED CARE
91 GETTING CARE QUICKLY
92 HOW WELL DOCTORS COMMUNICATE
93 CUSTOMER SERVICE
94 SHARED DECISION MAKING

10. GLOBAL PROPORTION COMPOSITES

95 GETTING NEEDED CARE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
96 GETTING CARE QUICKLY (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
97 HOW WELL DOCTORS COMMUNICATE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
98 CUSTOMER SERVICE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
99 SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

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2. YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS		
2	Q3	IN THE LAST 6 MONTHS, DID YOUR CHILD HAVE AN ILLNESS, INJURY, OR CONDITION THAT NEEDED CARE RIGHT AWAY IN A CLINIC, EMERGENCY ROOM OR DOCTOR'S OFFICE?
3	Q4	IN THE LAST 6 MONTHS, WHEN YOUR CHILD NEEDED CARE RIGHT AWAY, HOW OFTEN DID YOUR CHILD GET CARE AS SOON AS HE OR SHE NEEDED? [ASKED IF Q3 = YES]
4	Q5	IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS FOR A CHECK UP OR ROUTINE CARE FOR YOUR CHILD AT A DOCTOR'S OFFICE OR CLINIC?
5	Q6	IN THE LAST 6 MONTHS, WHEN YOU MADE AN APPOINTMENT FOR A CHECK UP OR ROUTINE CARE FOR YOUR CHILD AT A DOCTOR'S OFFICE OR CLINIC, HOW OFTEN DID YOU GET AN APPOINTMENT AS SOON AS YOUR CHILD NEEDED? [ASKED IF Q5 = YES]
6	Q7	IN THE LAST 6 MONTHS, NOT COUNTING THE TIMES YOUR CHILD WENT TO AN EMERGENCY ROOM, HOW MANY TIMES DID HE OR SHE GO TO A DOCTOR'S OFFICE OR CLINIC TO GET HEALTH CARE?
7	Q8	IN THE LAST 6 MONTHS, DID YOU AND YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT SPECIFIC THINGS YOU COULD DO TO PREVENT ILLNESS IN YOUR CHILD? [ASKED IF Q7 >= 1 TIME]
8	Q9	IN THE LAST 6 MONTHS, HOW OFTEN DID YOU HAVE YOUR QUESTIONS ANSWERED BY YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER? [ASKED IF Q7 >= 1 TIME]
9	Q10	IN THE LAST 6 MONTHS, DID YOU AND YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE FOR YOUR CHILD? [ASKED IF Q7 >= 1 TIME]
10	Q11	WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT WANT YOUR CHILD TO TAKE A MEDICINE? [ASKED IF Q7 >= 1 TIME AND Q10 = YES]
11	Q12	WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT NOT WANT YOUR CHILD TO TAKE A MEDICINE? [ASKED IF Q7 >= 1 TIME AND Q10 = YES]
12	Q13	WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, DID A DOCTOR OR OTHER HEALTH PROVIDER ASK YOU WHAT YOU THOUGHT WAS BEST FOR YOUR CHILD? [ASKED IF Q7 >= 1 TIME AND Q10 = YES]
13	Q14	USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH CARE POSSIBLE AND 10 IS THE BEST HEALTH CARE POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE ALL YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS? [ASKED IF Q7 >= 1]
14	Q15	IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THE CARE, TESTS, OR TREATMENT YOUR CHILD NEEDED? [ASKED IF Q7 >= 1 TIME]
15	Q16	IS YOUR CHILD NOW ENROLLED IN ANY KIND OF SCHOOL OR DAYCARE?
16	Q17	IN THE LAST 6 MONTHS, DID YOU NEED YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TO CONTACT A SCHOOL OR DAYCARE CENTER ABOUT YOUR CHILD'S HEALTH OR HEALTH CARE? [ASKED IF Q16 = YES]
17	Q18	IN THE LAST 6 MONTHS, DID YOU GET THE HELP YOU NEEDED FROM YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER IN CONTACTING YOUR CHILD'S SCHOOL OR DAYCARE? [ASKED IF Q16 = YES AND Q17 = YES]
3. SPECIALIZED SERVICES		
18	Q19	SPECIAL MEDICAL EQUIPMENT OR DEVICES INCLUDE A WALKER, WHEELCHAIR, NEBULIZER, FEEDING TUBES, OR OXYGEN EQUIPMENT. IN THE LAST 6 MONTHS, DID YOU GET OR TRY TO GET ANY SPECIAL MEDICAL EQUIPMENT OR DEVICES FOR YOUR CHILD?

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

PAGE QUESTION TITLE

4. YOUR CHILD'S PERSONAL DOCTOR

29 Q30 A PERSONAL DOCTOR IS THE ONE YOUR CHILD WOULD SEE IF HE OR SHE NEEDS A CHECKUP, HAS A HEALTH PROBLEM, OR GETS SICK OR HURT. DOES YOUR CHILD HAVE A PERSONAL DOCTOR?
30 Q31 IN THE LAST 6 MONTHS, HOW MANY TIMES DID YOUR CHILD VISIT HIS OR HER PERSONAL DOCTOR FOR CARE? [ASKED IF Q30 = YES]
31 Q31A IN THE LAST 6 MONTHS, HOW OFTEN DID YOU HAVE A HARD TIME SPEAKING WITH OR UNDERSTANDING YOUR CHILD'S PERSONAL DOCTOR BECAUSE YOU SPOKE DIFFERENT LANGUAGES? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
32 Q32 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR EXPLAIN THINGS ABOUT YOUR CHILD'S HEALTH IN A WAY THAT WAS EASY TO UNDERSTAND? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
33 Q33 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR LISTEN CAREFULLY TO YOU? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
34 Q34 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR SHOW RESPECT FOR WHAT YOU HAD TO SAY? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
35 Q35 IS YOUR CHILD ABLE TO TALK WITH DOCTORS ABOUT HIS OR HER HEALTH CARE? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
36 Q36 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR EXPLAIN THINGS IN A WAY THAT WAS EASY FOR YOUR CHILD TO UNDERSTAND? [ASKED IF Q30 = YES AND Q31 >= 1 TIME AND Q35 = YES]
37 Q37 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR SPEND ENOUGH TIME WITH YOUR CHILD? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
38 Q38 IN THE LAST 6 MONTHS, DID YOUR CHILD'S PERSONAL DOCTOR TALK WITH YOU ABOUT HOW YOUR CHILD IS FEELING, GROWING, OR BEHAVING? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
39 Q39 IN THE LAST 6 MONTHS, DID YOUR CHILD GET CARE FROM A DOCTOR OR OTHER HEALTH PROVIDER BESIDES HIS OR HER PERSONAL DOCTOR? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
40 Q40 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR SEEM INFORMED AND UP-TO-DATE ABOUT THE CARE YOUR CHILD GOT FROM THESE DOCTORS OR OTHER HEALTH PROVIDERS? [ASKED IF Q30 = YES AND Q31 >= 1 TIME AND Q39 = YES]
41 Q41 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST PERSONAL DOCTOR POSSIBLE AND 10 IS THE BEST PERSONAL DOCTOR POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR CHILD'S PERSONAL DOCTOR? [ASKED IF Q30 = YES]
42 Q42 DOES YOUR CHILD HAVE ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITIONS THAT HAVE LASTED FOR MORE THAN 3 MONTHS? [ASKED IF Q30 = YES]
43 Q43 DOES YOUR CHILD'S PERSONAL DOCTOR UNDERSTAND HOW THESE MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITIONS AFFECT YOUR CHILD'S DAY-TO-DAY LIFE? [ASKED IF Q30 = YES AND Q42 = YES]
44 Q44 DOES YOUR CHILD'S PERSONAL DOCTOR UNDERSTAND HOW YOUR CHILD'S MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITIONS AFFECT YOUR FAMILY'S DAY-TO-DAY LIFE? [ASKED IF Q30 = YES AND Q42 = YES]

PAGE QUESTION TITLE

5. GETTING HEALTH CARE FROM SPECIALISTS

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

6. YOUR CHILD'S HEALTH PLAN

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

PAGE QUESTION TITLE

7. PRESCRIPTION MEDICINES

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

7. ACCESS TO DENTAL CARE

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

8. ABOUT YOUR CHILD AND YOU

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

88 Q78 WHAT IS YOUR AGE?

89 Q79 ARE YOU MALE OR FEMALE?

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

91 Q81 HOW ARE YOU RELATED TO THE CHILD?

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

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

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

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

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

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

9. RATINGS

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

10. COMPOSITES

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

11. GLOBAL PROPORTION COMPOSITES

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

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

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

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

SURVEY INSTRUCTIONS

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

Correct
Mark ●

Incorrect
Marks ✗ ✓ ✎

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

- Yes → Go to Question 1
○ No

↓ START HERE ↓

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

- Yes → Go to Question 3
○ No

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



YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

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

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

- ◆ _____ ◆
13. Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care in the last 6 months?
- 0 1 2 3 4 5 6 7 8 9 10
Worst Best
Health Care Health Care
Possible 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 Best
Personal Doctor Personal Doctor
Possible 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 Best Specialist
Possible 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

- 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

ABOUT YOU

- 36. In general, how would you rate your overall health?**
- Excellent
 Very Good
 Good
 Fair
 Poor
- 37. In general, how would you rate your overall mental or emotional health?**
- Excellent
 Very Good
 Good
 Fair
 Poor
- 38. Have you had either a flu shot or flu spray in the nose since July 1, 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

- | | |
|--|--|
| <p>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.</p> <p><input type="radio"/> Never
 <input type="radio"/> Sometimes
 <input type="radio"/> Usually
 <input type="radio"/> Always</p> <p>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.</p> <p><input type="radio"/> Never
 <input type="radio"/> Sometimes
 <input type="radio"/> Usually
 <input type="radio"/> Always</p> <p>43. Do you take aspirin daily or every other day?</p> <p><input type="radio"/> Yes
 <input type="radio"/> No
 <input type="radio"/> Don't know</p> <p>44. Do you have a health problem or take medication that makes taking aspirin unsafe for you?</p> <p><input type="radio"/> Yes
 <input type="radio"/> No
 <input type="radio"/> Don't know</p> <p>45. Has a doctor or health provider ever discussed with you the risks and benefits of aspirin to prevent heart attack or stroke?</p> <p><input type="radio"/> Yes
 <input type="radio"/> No</p> | <p>46. Are you aware that you have any of the following conditions? Mark all that apply.</p> <p><input type="radio"/> High cholesterol
 <input type="radio"/> High blood pressure
 <input type="radio"/> Parent or sibling with heart attack before the age of 60</p> <p>47. Has a doctor ever told you that you have any of the following conditions? Mark all that apply.</p> <p><input type="radio"/> A heart attack
 <input type="radio"/> Angina or coronary heart disease
 <input type="radio"/> A stroke
 <input type="radio"/> Any kind of diabetes or high blood sugar</p> <p>48. In the last 6 months, did you get health care 3 or more times for the same condition or problem?</p> <p><input type="radio"/> Yes
 <input type="radio"/> No → Go to Question 50</p> <p>49. Is this a condition or problem that has lasted for at least 3 months? Do <u>not</u> include pregnancy or menopause.</p> <p><input type="radio"/> Yes
 <input type="radio"/> No</p> <p>50. Do you now need or take medicine prescribed by a doctor? Do <u>not</u> include birth control.</p> <p><input type="radio"/> Yes
 <input type="radio"/> No → Go to Question 52</p> <p>51. Is this medicine to treat a condition that has lasted for at least 3 months? Do <u>not</u> include pregnancy or menopause.</p> <p><input type="radio"/> Yes
 <input type="radio"/> No</p> <p>52. What is your age?</p> <p><input type="radio"/> 18 to 24
 <input type="radio"/> 25 to 34
 <input type="radio"/> 35 to 44
 <input type="radio"/> 45 to 54
 <input type="radio"/> 55 to 64
 <input type="radio"/> 65 to 74
 <input type="radio"/> 75 or older</p> |
|--|--|

◆ _____ ◆

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

◆ _____ ◆

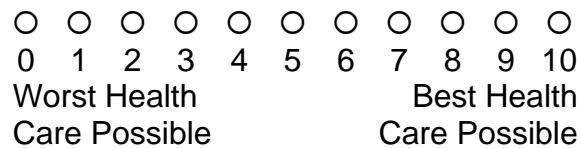
12. Did you and a doctor or other health provider talk about the reasons you might not want your child to take a medicine?

- 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?



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

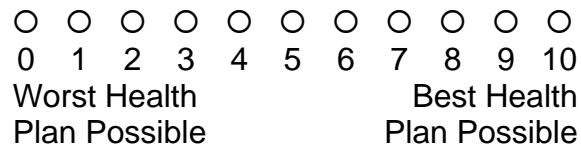
52. In the last 6 months, did your child's health plan give you any forms to fill out?

- 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?



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?**

<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
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





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 (aquejellos 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?

0 1 2 3 4 5 6 7 8 9 10

La peor
atención médica
possible

La mejor
atención médica
possible

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?

0 1 2 3 4 5 6 7 8 9 10

El peor
doctor personal
possible

El mejor
doctor personal
possible

LA ATENCIÓN MÉDICA QUE RECIBIÓ DE ESPECIALISTAS

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

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

- Sí
 No ➔ *Pase a la pregunta 28*

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

- Nunca
 A veces
 La mayoría de las veces
 Siempre

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

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

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

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

SU PLAN DE SALUD

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

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

- Sí
 No ➔ *Pase a la pregunta 30*

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

- Nunca
 A veces
 La mayoría de las veces
 Siempre

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

- Sí
 No ➔ *Pase a la pregunta 33*

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

- Nunca
 A veces
 La mayoría de las veces
 Siempre

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

- Nunca
 A veces
 La mayoría de las veces
 Siempre

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

- Sí
 No ➔ *Pase a la pregunta 35*

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

Nunca
 A veces
 La mayoría de las veces
 Siempre

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

0 1 2 3 4 5 6 7 8 9 10
El peor El mejor
plan de salud plan de salud
possible possible

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

Sí
 No → Pase a la pregunta 35c

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

Nunca
 A veces
 La mayoría de las veces
 Siempre

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

Sí
 No → Pase a la pregunta 35e

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

Nunca
 A veces
 La mayoría de las veces
 Siempre

PREGUNTAS ADICIONALES

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

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

Nunca
 A veces
 La mayoría de las veces
 Siempre

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

Nunca
 A veces
 La mayoría de las veces
 Siempre

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

Nunca
 A veces
 La mayoría de las veces
 Siempre

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

Sí, definitivamente
 Sí, algo
 No

ACCESO A CUIDADO DENTAL

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

Sí
 No

◆ _____ ◆

35j. En los últimos 6 meses, ¿fué usted a una oficina o clínica de un dentista para cuidado?

- Sí
- No → **Pase a la pregunta 35l**

35k. En los últimos 6 meses, ¿con qué frecuencia el personal dental o el dentista le explicaron lo que le hacían mientras lo/la trataron?

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

35l. Si usted trató de conseguir una cita para usted con un dentista que se especialice en un tipo de cuidado dental en particular (como una endodoncia (root canal) o enfermedad de las encías) en los últimos 6 meses, ¿con qué frecuencia le dieron una cita tan pronto la quería?

- Nunca
- A veces
- La mayoría de las veces
- Siempre
- No traté de conseguir una cita con un especialista dental para mí en los últimos 6 meses.

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

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

35n. 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?

-
- 0 1 2 3 4 5 6 7 8 9 10
- Extremadamente Extremadamente
difícil fácil

ACERCA DE USTED

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

38. Desde el 1 de julio del 2015, ¿le han puesto la vacuna para la influenza o gripe ya sea en inyección o con un rociador o espray nasal?

- Sí
- No
- No sé

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

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

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

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

41. En los últimos 6 meses, ¿qué tan seguido le recomendó, o habló un doctor o profesional médico sobre medicamentos para ayudarlo(a) a dejar de fumar o usar tabaco? Ejemplos de medicamentos son: chicle o goma de mascar con nicotina, parche, rociador o aerosol nasal, inhalador o medicamentos con receta.
- Nunca
 A veces
 La mayoría de las veces
 Siempre
42. En los últimos 6 meses, ¿qué tan seguido le ofreció o habló con su doctor o profesional médico sobre métodos y estrategias, aparte de medicamentos, para ayudarlo(a) a dejar de fumar o usar tabaco? Ejemplos de métodos y estrategias son: una línea telefónica de ayuda, consejería individual o terapia de grupo o un programa para dejar de fumar.
- Nunca
 A veces
 La mayoría de las veces
 Siempre
43. ¿Toma aspirina todos los días o un día sí y otro día no?
- Sí
 No
 No sé
44. ¿Tiene algún problema de salud o toma algún medicamento que hace que sea peligroso para usted tomar aspirina?
- Sí
 No
 No sé
45. ¿Ha hablado alguna vez un doctor o profesional médico con usted acerca de los riesgos y beneficios de la aspirina para prevenir un infarto o un derrame cerebral?
- Sí
 No
46. Que usted sepa, ¿tiene alguna de las siguientes enfermedades? Marque una o más.
- Colesterol alto
 Presión sanguínea alta (hipertensión arterial)
 Padres o hermanos que hayan tenido un infarto antes de los 60 años
47. ¿Alguna vez le ha dicho un doctor que usted tiene alguna de las siguientes enfermedades? Marque una o más.
- Un infarto
 Angina de pecho o cardiopatía coronaria
 Un derrame cerebral
 Algún tipo de diabetes o niveles altos de azúcar en la sangre
48. En los últimos 6 meses, ¿recibió usted atención médica 3 veces o más para la misma enfermedad o problema?
- Sí
 No → **Pase a la pregunta 50**
49. ¿Se trata de una enfermedad o problema que ha durado al menos 3 meses? No incluya el embarazo ni la menopausia.
- Sí
 No
50. ¿Necesita o toma ahora alguna medicina recetada por un doctor? No incluya anticonceptivos.
- Sí
 No → **Pase a la pregunta 52**
51. ¿Es esta medicina para tratar una enfermedad o problema que ha durado al menos 3 meses? No incluya el embarazo ni la menopausia.
- Sí
 No
52. ¿Qué edad tiene?
- 18 a 24 años
 25 a 34
 35 a 44
 45 a 54
 55 a 64
 65 a 74
 75 años o más

- ◆ _____ ◆
53. ¿Es usted hombre o mujer?
- Hombre
 Mujer
54. ¿Cuál es el grado o nivel escolar más alto que usted ha completado?
- 8 años de escuela o menos
 9 a 12 años de escuela, pero sin graduarse
 Graduado de la escuela secundaria (high school), Diploma de escuela secundaria, preparatoria, o su equivalente (o GED)
 Algunos cursos universitarios o un título universitario de un programa de 2 años
 Título universitario de 4 años
 Título universitario de más de 4 años
55. ¿Es usted de origen o ascendencia hispana o latina?
- Sí, hispano o latino
 No, ni hispano ni latino
56. ¿A qué raza pertenece? Marque una o más.
- Blanca
 Negra o afroamericana
 Asiática
 Nativo de Hawái o de otras islas del Pacífico
 Indígena americano o nativo de Alaska
 Otra (Por favor escriba en letra de molde)
-
57. ¿Le ayudó alguien a completar esta encuesta?
- Sí ➔ **Pase a la pregunta 58**
 No ➔ **Gracias. Por favor devuelva esta encuesta en el sobre con el porte o franqueo pagado.**
58. ¿Cómo le ayudó a usted esta persona? Marque una o más.
- Me leyó las preguntas
 Anotó las respuestas que le di
 Contestó las preguntas por mí
 Tradujo las preguntas a mi idioma
 Me ayudó de otra forma (Por favor escriba en letra de molde)
-

◆ _____ ◆

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

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

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

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

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

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

INSTRUCCIONES PARA EL CUESTIONARIO

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

Marca
Correcta 

Marca
Incorrecta   

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

- Sí → Pase a la Pregunta 1
- No

↓ COMIENCE AQUI ↓

Por favor conteste las preguntas para el niño cuyo nombre está anotado en el sobre. No las conteste para ningún otro niño.

1. Nuestros registros muestran que su niño está ahora con Oregon Health Plan. ¿Es correcta esta información?
 - Sí → Pase a la pregunta 3
 - No
2. ¿Cómo se llama el plan de salud de su niño? (Por favor escriba en letra de molde)

LA ATENCIÓN MÉDICA QUE RECIBIÓ SU NIÑO EN LOS ÚLTIMOS 6 MESES

Estas preguntas son acerca de la atención médica que ha recibido su niño. No incluya la atención que recibió su niño cuando pasó la noche hospitalizado. No incluya las consultas de su niño con el dentista.

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

7. En los últimos 6 meses, sin contar las veces en que su niño fue a una sala de emergencia, ¿cuántas veces fue su niño a un consultorio médico o a una clínica para que lo atendieran?
 Ninguna vez → **Pase a la pregunta 16**
 1 vez
 2
 3
 4
 5 a 9
 10 veces o más
8. En los últimos 6 meses, ¿hablaron usted y el doctor u otro profesional médico de su niño sobre cosas específicas que usted podría hacer para prevenir que su niño se enferme?
 Sí
 No
9. En los últimos 6 meses, ¿con qué frecuencia le contestaron sus preguntas los doctores u otros profesionales médicos de su niño?
 Nunca
 A veces
 La mayoría de las veces
 Siempre
10. En los últimos 6 meses, ¿hablaron usted y el doctor u otro profesional médico de su niño sobre comenzar o suspender una medicina recetada?
 Sí
 No → **Pase a la pregunta 14**
11. ¿Hablaron usted y un doctor u otro profesional médico sobre las razones por las que tal vez usted quiera que su niño tome una medicina?
 Sí
 No

- 12. ¿Hablaron usted y un doctor u otro profesional médico sobre las razones por las que tal vez usted no quiera que su niño tome una medicina?**
- Sí
 No
- 13. Cuando hablaron de comenzar o suspender una medicina recetada para su niño, ¿le preguntó un doctor u otro profesional médico sobre lo que usted creía que sería lo mejor para su niño?**
- Sí
 No
- 14. Usando un número del 0 al 10, el 0 siendo la peor atención médica posible y el 10 la mejor atención médica posible, ¿qué número usaría para calificar toda la atención médica que su niño ha recibido en los últimos 6 meses?**
- 0 1 2 3 4 5 6 7 8 9 10
- La peor La mejor
 atención médica atención médica
 posible possible
- 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

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

0 1 2 3 4 5 6 7 8 9 10

El peor
especialista
posible

El mejor
especialista
posible

EL PLAN DE SALUD DE SU NIÑO

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

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

Sí
 No → Pase a la pregunta 52

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

Nunca
 A veces
 La mayoría de las veces
 Siempre

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

Nunca
 A veces
 La mayoría de las veces
 Siempre

52. En los últimos 6 meses, ¿le dio el plan de salud de su niño algún formulario para llenar?
- Sí
 No → Pase a la pregunta 54
53. En los últimos 6 meses, ¿con qué frecuencia fueron fáciles de llenar los formularios del plan de salud de su niño?
- Nunca
 A veces
 La mayoría de las veces
 Siempre
54. Usando un número del 0 al 10, el 0 siendo el peor plan de salud posible y el 10 el mejor plan de salud posible, ¿qué número usaría para calificar al plan de salud de su niño?

0 1 2 3 4 5 6 7 8 9 10

El peor
plan de salud
posible

El mejor
plan de salud
posible

MEDICINAS RECETADAS

55. En los últimos 6 meses, ¿consiguió alguna medicina recetada o renovó una receta para una medicina recetada para su niño?

Sí
 No → Pase a la pregunta 57a

56. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir medicinas recetadas para su niño a través de su plan de salud?

Nunca
 A veces
 La mayoría de las veces
 Siempre

57. ¿Alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a conseguir las medicinas recetadas para su niño?

Sí
 No

ACCESO A CUIDADO DENTAL

- 57a. Un dentista regular es a quien su niño va a ver para un chequeo y limpieza o cuando tiene una carie o un dolor de diente. ¿Su niño tiene un dentista regular?

Sí
 No

- 57b. En los últimos 6 meses, ¿fué su niño a una oficina o clínica de un dentista para cuidado?

Sí
 No → *Pase a la pregunta 57d*

- 57c. En los últimos 6 meses, ¿con qué frecuencia el personal dental o el dentista le explicaron lo que le hacían mientras trataron a su niño?

Nunca
 A veces
 La mayoría de las veces
 Siempre

- 57d. En los últimos 6 meses, si su niño necesitó ver a un dentista de inmediato por una emergencia dental, ¿el/ella pudo ver a un dentista tan pronto como usted quería?

Nunca
 A veces
 La mayoría de las veces
 Siempre
 Mi niño no tuvo una emergencia dental en los últimos 6 meses

- 57e. Usando un número del 0 al 10, el 0 siendo extremadamente difícil y el 10 extremadamente fácil, ¿qué número usaría para calificar cuán fácil le fue encontrar un dentista para su niño?

○ ○ ○ ○ ○ ○ ○ ○ ○ ○
0 1 2 3 4 5 6 7 8 9 10
Extremadamente Extremadamente
difícil 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

- | | |
|---|---|
| <p>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?</p> <p><input type="radio"/> Sí
 <input type="radio"/> No → Pase a la pregunta 66</p> <p>64. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?</p> <p><input type="radio"/> Sí
 <input type="radio"/> No → Pase a la pregunta 66</p> <p>65. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?</p> <p><input type="radio"/> Sí
 <input type="radio"/> No</p> <p>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?</p> <p><input type="radio"/> Sí
 <input type="radio"/> No → Pase a la pregunta 69</p> <p>67. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?</p> <p><input type="radio"/> Sí
 <input type="radio"/> No → Pase a la pregunta 69</p> <p>68. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?</p> <p><input type="radio"/> Sí
 <input type="radio"/> No</p> <p>69. ¿Necesita o recibe su niño terapia especial, tal como terapia física, ocupacional o del habla?</p> <p><input type="radio"/> Sí
 <input type="radio"/> No → Pase a la pregunta 72</p> | <p>70. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?</p> <p><input type="radio"/> Sí
 <input type="radio"/> No → Pase a la pregunta 72</p> <p>71. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?</p> <p><input type="radio"/> Sí
 <input type="radio"/> No</p> <p>72. ¿Tiene su niño algún problema emocional, de desarrollo o de comportamiento, para el cual necesita o recibe tratamiento o consejería?</p> <p><input type="radio"/> Sí
 <input type="radio"/> No → Pase a la pregunta 74</p> <p>73. ¿Ha durado este problema o se espera que dure por lo menos 12 meses?</p> <p><input type="radio"/> Sí
 <input type="radio"/> No</p> <p>74. ¿Qué edad tiene <u>su niño</u>?</p> <p><input type="radio"/> Menos de un año
 <input type="checkbox"/> <input type="checkbox"/> AÑOS (escriba la respuesta)</p> <p>75. ¿Es su niño de sexo masculino o femenino?</p> <p><input type="radio"/> Masculino
 <input type="radio"/> Femenino</p> <p>76. ¿Es su niño de origen o ascendencia hispana o latina?</p> <p><input type="radio"/> Sí, hispano o latino
 <input type="radio"/> No, ni hispano ni latino</p> |
|---|---|

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 envie la encuesta en el sobre con el porte pagado a:

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





DIAL.SCREEN

DS. INTERVIEWER: YOU MAY DO THE INTERVIEW WITH ONLY THE [NAMED RESPONDENT. 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]. / HELPTHB

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)

HELPCTC

[0/0/0/0/27/27]. / HELPCTC

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

PLUSCARE

[0/0/0/0/28/28]. / PLUSCARE

In the last [12/6] months, did your child get care from more than one kind of health care provider or use more than one kind of health care service?

1. YES
2. NO -----> PRSNLD4

DK/REFUSAL/NOT ASCERTAINED --> PRSNLD4

HLPCOORD

[0/0/0/0/29/29]. / HLPCOORD

In the last [12/6] months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these different providers or services?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

PRSNLD4

[15/15/15/15/30/30]. / PRSNLD4

A personal doctor is the one [you/your child] would see if [you/+[he/she]] [need/needs] a check-up, [want advice about a health problem,/has a health problem,] or [get/gets] sick or hurt.

[Do you/Does your child] have a personal doctor?

1. YES
2. NO -----> INTRO.SPDR

DK/REFUSAL/NOT ASCERTAINED --> INTRO.SPDR

DRTMS

[16/16/16/16/31/31]. / DRTMS

In the last [12/6] months, how many times did [you/your child] visit [your/+[his/her]] personal doctor [to get care for yourself/for care] ?

(IF NEEDED: "Your best estimate would be fine.")

(READ LIST IF NEEDED: "Would you say...")

- 0. NONE, -----> RATEDR4
- 1. 1 TIME,
- 2. 2,
- 3. 3,
- 4. 4,
- 5. 5 TO 9, OR
- 6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> RATEDR4

IF QNAIRE= ADULT MEDICAID (02), GO TO DREXPL4

PBDRLNG

31a. / PBDRLANG

In the last [12/6] months, how often did you have a hard time speaking with or understanding your child's personal doctor because you spoke different languages? Would you say...?

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DREXPL4

[17/17/17/17/32/32]. / DREXPL4

In the last [12/6] months, how often did [your/your child's] personal doctor explain things [/about your child's health] in a way that was easy to understand? Would you say...?

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRLSTN4

[18/18/18/18/33/33]. / DRLSTN4

In the last [12/6] months, how often did [your/your child's] personal doctor listen carefully to you? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRESPU4

[19/19/19/19/34/34]. / DRESPU4

In the last [12/6] months, how often did [your/your child's] personal doctor show respect for what you had to say? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CABLTLK

[0/0/20/20/35/35]. / CABLTLK

Is your child able to talk with doctors about [your/+[his/her]] health care?

1. YES
2. NO -----> DRTMEN4

DK/REFUSAL/NOT ASCERTAINED --> DRTMEN4

CDREXPL

[0/0/21/21/36/36]. / CDREXPL

In the last [12/6] months, how often did your child's personal doctor explain things in a way that was easy for YOUR CHILD to understand? Would you say...

(READ LIST)

1. NEVER
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTMEN4

[20/20/22/22/37/37]. / DRTMEN4

In the last [12/6] months, how often did [your/your child's] personal doctor spend enough time with [you/your child] ? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTLKU

[0/0/23/23/38/38]. / DRTLKU

In the last [12/6] months, did your child's personal doctor talk with you about how your child is feeling, growing, or behaving?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

DIFFDR

[21/21/24/24/39/39]. / DIFFDR

In the last [12/6] months, did [you/your child] get care from a doctor or other health provider besides [your/+[his/her]] personal doctor?

1. YES
2. NO -----> RATEDR4

DK/REFUSAL/NOT ASCERTAINED --> RATEDR4

DRINFO

[22/22/25/40/40]. / 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

[23/23/26/41/41]. / 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.
- 3.
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?