



PacificSource - Central Oregon
CAHPS® 5.0 Medicaid Survey

Banner Book Report

June 2017
Measurement Year 2016



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METHODOLOGY

Introduction

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

Survey Milestones

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

Sampling

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

Questionnaires

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

Selection of Cases for Analysis

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

Composites, Overall Ratings, and Measures for Reporting

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

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

Composite: Getting Needed Care

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

Composite: Getting Care Quickly

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

Composite: How Well Doctors Communicate

- Q17/32. Personal doctor explained things in a way that was easy to understand
- Q18/33. Personal doctor listened carefully to you
- Q19/34. Personal doctor showed respect for what you had to say
- Q20/37. Personal doctor spent enough time with you/your child

Composite: Customer Service

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

Composite: Shared Decision Making

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

Rating Questions

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

Composite: Access to Specialized Services (Child only)

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

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

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

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

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

Comparisons, Statistical Testing, Scoring, and Weighting

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

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

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

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

Sample Disposition

Category	Adult		Child	
	PacificSource Community Solutions	Overall	PacificSource Community Solutions	Overall
**First mailing - sent	900	16200	900	16200
*First mailing - usable survey returned	153	2801	116	2168
Second mailing - sent	767	13319	766	13616
*Second mailing - usable survey returned	42	978	44	886
*Phone - usable surveys	70	1303	101	2255
Total - usable surveys	265	5082	261	5309
†Ineligible: According to population criteria‡	18	346	11	200
†Ineligible: Deceased	1	31	0	0
†Ineligible: Mentally or physically unable to complete survey	10	195	0	0
†Ineligible: Language barrier	1	64	0	59
Incorrect address AND incorrect phone number	37	848	37	710
Refusal/Returned survey blank	35	672	61	829
Nonresponse - Unavailable by mail or phone	533	8962	530	9093
Adjusted Response Rate	30.5%	32.7%	29.4%	33.3%

*Included in response rate numerator

†Excluded from adjusted response rate denominator

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

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

Response/Non-Response Comparison

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

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

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

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

Adult

Gender / Age	Non-Respondents	Respondents	Difference
Male	251 46.2%	95 35.8%	-10.38%
Female	292 53.8%	170 64.2%	10.38%
18-24	103 19.0%	26 9.8%	-9.16%
25-34	169 31.1%	33 12.5%	-18.67%
35-44	111 20.4%	51 19.2%	-1.20%
45-54	92 16.9%	53 20.0%	3.06%
55-64	55 10.1%	84 31.7%	21.57%
65-74	8 1.5%	13 4.9%	3.43%
75 or Older	5 0.9%	5 1.9%	0.97%

Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	283 51.2%	131 50.2%	-0.98%
Female	270 48.8%	130 49.8%	0.98%
<3	104 18.8%	57 21.8%	3.03%
4-7	126 22.8%	57 21.8%	-0.95%
8-12	170 30.7%	81 31.0%	0.29%
13 or older	153 27.7%	66 25.3%	-2.38%

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH	GENDER	
	OT1	OT2													ITY	STATUS				
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									##	##	#	##	##	TI	IC	IC	&	&		
																	GOOD	POOR		
																	POOR	MALE		
																	MALE	MALE		
Q1																				
YES	265	5060	22	31	47	51	82	15	191					21	24	223	172	77	91	161
	100%	100%	100%	100%	100%	100%	100%	100%	100%	~	~	~	~	~100%	100%	100%	100%	100%	100%	100%
NOT ANSWERED		22																		
VALID CASES	265	5060	22	31	47	51	82	15	191					21	24	223	172	77	91	161
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE ##	BLCK OR AFR- AMER ##	AS- IAN ##	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q3 YES	123 47%	2017 41%*	8 36%~	20 65%~	23 49%~	25 49%	33 41%	7 50%~	88 47%	~	~	~	~	~	12 57%~	11 46%~	104 47%~	73 43%*	43 57%*	34 38%*	82 52%
NO	136 53%	2921 59%*	14 64%~	11 35%~	24 51%~	26 51%	47 59%	7 50%~	101 53%	~	~	~	~	~	9 43%~	13 54%~	117 53%~	98 57%*	32 43%*	56 62%*	77 48%
NOT ANSWERED	6	144					2	1	2							2	1	2	1	2	
VALID CASES	259	4938	22	31	47	51	80	14	189						21	24	221	171	75	90	159
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191						21	24	223	172	77	91	161
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER	
	OT1	OT2												ITY	STATUS			
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				EX &			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/		NOT	VERY			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	GOOD	FAIR		
									AMER		ILND	NATV		TI	IC	IC	&	
									IC						GOOD	POOR	&	
									IC						POOR		MALE	
									IC						MALE		MALE	
Q4																		
NEVER	3	42			1		1		1					2	3	2	3	
	3%	2%	~	~	5%~	~	3%~	~	1%~	~	~	~	~	17%~	~	3%~	~	
SOMETIMES	24	268		3	5	2	9	2	16					4	1	19	11	
	22%	15%	~	16%~	24%~	10%~	29%~	40%~	21%~	~	~	~	~	33%~	10%~	21%~	17%~	
USUALLY	35	466	4	5	8	9	7		24					3	3	30	19	
	32%	26%	57%~	26%~	38%~	45%~	23%~	~	31%~	~	~	~	~	25%~	30%~	33%~	29%~	
ALWAYS	48	1045	3	11	7	9	14	3	36					3	6	40	36	
	44%	57%*	43%~	58%~	33%~	45%~	45%~	60%~	47%~	~	~	~	~	25%~	60%~	43%~	55%~	
#ALWAYS + USUALLY (NET)	83	1511	7	16	15	18	21	3	60					6	9	70	55	
	75%	83%	100%~	84%~	71%~	90%~	68%~	60%~	78%~	~	~	~	~	50%~	90%~	76%~	83%~	
TOP BOX SCORE	48	1045	3	11	7	9	14	3	36					3	6	40	36	
	44%	57%*	43%~	58%~	33%~	45%~	45%~	60%~	47%~	~	~	~	~	25%~	60%~	43%~	55%~	
NOT ANSWERED	13	196	1	1	2	5	2	2	11						1	12	7	
VALID CASES	110	1821	7	19	21	20	31	5	77					12	10	92	66	
NUMBER OF RESPONDENTS	123	2017	8	20	23	25	33	7	88					12	11	104	73	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	

[ASKED IF Q3 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	&			
									##	##	#	##	##	TI	IC	IC	&			
									WHTE						GOOD	POOR	MALE			
																	MALE			
Q5																				
YES	187	3365	13	17	31	42	62	11	134					15	18	156	112	64	56	123
	71%	68%	59%~	55%~	66%~	82%*	77%	73%~	71%	~	~	~	~	~ 71%~	75%~	70%~	65%*	84%*	62%*	76%*
NO	75	1561	9	14	16	9	19	4	56					6	6	66	60	12	34	38
	29%	32%	41%~	45%~	34%~	18%*	23%	27%~	29%	~	~	~	~	~ 29%~	25%~	30%~	35%*	16%*	38%*	24%*
NOT ANSWERED	3	156						1	1						1		1		1	
VALID CASES	262	4926	22	31	47	51	81	15	190					21	24	222	172	76	90	161
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161
	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	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV ILND #	AMER IND/ALSK ##	OTHR ##	MULTI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	MALE	FE-MALE
Q6 NEVER	6 3%	83 3%	~	~	~	8%	2%	~	~	~	~	~	~	13%	~	4%	2%	3%	2%	4%
SOMETIMES	30 17%	590 19%	30%	13%	25%	18%	13%	22%	~	~	~	~	~	33%	17%	18%	20%	10%	19%	17%
USUALLY	59 34%	884 29%	50%	44%	32%	29%	32%	33%	~	~	~	~	~	33%	28%	33%	32%	37%	36%	32%
ALWAYS	77 45%	1472 49%	20%	44%	43%	45%	53%	44%	~	~	~	~	~	20%	56%	46%	46%	49%	43%	47%
#ALWAYS + USUALLY (NET)	136 79%	2356 78%	70%	88%	75%	74%	85%	78%	~	~	~	~	~	53%	83%	79%	78%	86%	79%	79%
TOP BOX SCORE	77 45%	1472 49%	20%	44%	43%	45%	53%	44%	~	~	~	~	~	20%	56%	46%	46%	49%	43%	47%
NOT ANSWERED	15	336	3	1	3	4	2	2	14						14	10	5	3	12	
VALID CASES	172	3029	10	16	28	38	60	9	120					15	18	142	102	59	53	111
NUMBER OF RESPONDENTS	187	3365	13	17	31	42	62	11	134					15	18	156	112	64	56	123
	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	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-##	AS-IAN##	NATV ILND#	AMER IND/ALSK##	OTHR##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	MALE	FE-MALE
Q7 NONE	60 24%	1242 26%	6 30%~	8 27%~	15 34%~	6 12%*	19 24%	2 13%~	43 23%	~	~	~	~	4 21%~	5 22%~	51 24%~	48 29%*	9 13%*	29 33%*	27 18%*
1 TIME	45 18%	927 19%	4 20%~	4 13%~	8 18%~	9 18%	15 19%	3 20%~	31 17%	~	~	~	~	5 26%~	5 22%~	39 18%~	32 19%	11 16%	16 18%	29 19%
2	44 18%	878 18%	6 30%~	7 23%~	7 16%~	6 12%	13 17%	4 27%~	34 18%	~	~	~	~	4 21%~	5 22%~	38 18%~	34 20%	10 14%	18 20%	26 17%
3	41 17%	581 12%*	~	4 13%~	6 14%~	13 26%	12 15%	3 20%~	31 17%	~	~	~	~	1 5%~	4 17%~	34 16%~	23 14%	15 21%	11 13%	27 18%
4	19 8%	402 8%	1 5%~	~	1 2%~	7 14%	9 12%	1 7%~	14 8%	~	~	~	~	1 5%~	2 9%~	17 8%~	7 4%*	12 17%*	4 5%	15 10%
5 TO 9	30 12%	571 12%	2 10%~	6 20%~	5 11%~	7 14%	7 9%	2 13%~	23 13%	~	~	~	~	3 16%~	2 9%~	27 13%~	17 10%	11 16%	8 9%	22 14%
10 OR MORE TIMES	9 4%	248 5%	1 5%~	1 3%~	2 5%~	2 4%	3 4%	~	8 4%	~	~	~	~	1 5%~	~	9 4%~	7 4%	2 3%	2 2%	7 5%
NOT ANSWERED	17	233	2	1	3	1	4		7					2	1	8	4	7	3	8
VALID CASES	248	4849	20	30	44	50	78	15	184					19	23	215	168	70	88	153
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV ILND #	AMER IND/ PAC ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE
Q8 #YES	128 70%	2535 72%	8 57%~	10 48%~	19 66%~	33 80%~	45 76%	9 75%~	102 74%~	~	~	~	~	~	8 53%~	12 67%~	112 70%~	79 68%	43 74%	40 71%	86 70%
NO	54 30%	984 28%	6 43%~	11 52%~	10 34%~	8 20%~	14 24%	3 25%~	35 26%~	~	~	~	~	~	7 47%~	6 33%~	47 30%~	38 32%	15 26%	16 29%	37 30%
NOT ANSWERED	6	88	1		3		1	4								5	3	3	3	3	
VALID CASES	182	3519	14	21	29	41	59	12	137					15	18	159	117	58	56	123	
NUMBER OF RESPONDENTS	188	3607	14	22	29	44	59	13	141					15	18	164	120	61	59	126	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			HIS-	HIS-	&	&		
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	
									WHTE	##	##	#	##	##	TI				FE-	
																			MALE	
Q9																				
YES	91	1857	3	9	17	17	32	7	66					9	8	79	53	34	29	59
	49%	53%	21%~	41%~	59%~	41%~	54%	58%~	48%~	~	~	~	~	~ 60%~	44%~	49%~	45%	58%	50%	48%
NO	93	1655	11	13	12	24	27	5	72					6	10	81	65	25	29	64
	51%	47%	79%~	59%~	41%~	59%~	46%	42%~	52%~	~	~	~	~	~ 40%~	56%~	51%~	55%	42%	50%	52%
NOT ANSWERED	4	95				3		1	3						4	2	2		1	3
VALID CASES	184	3512	14	22	29	41	59	12	138					15	18	160	118	59	58	123
NUMBER OF RESPONDENTS	188	3607	14	22	29	44	59	13	141					15	18	164	120	61	59	126
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER			
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
Q10 #YES	77 88%	1690 93%	2 67%	8 89%	16 94%	14 82%	27 87%	6 100%	56 88%	~	~	~	~	~	8 89%	8 100%	66 86%	47 89%	28 88%	25 89%	50 86%
NO	11 13%	121 7%	1 33%	1 11%	1 6%	3 18%	4 13%	8 13%	~	~	~	~	~	1 11%	11 14%	6 11%	4 13%	3 11%	8 14%		
NOT ANSWERED	3	46					1	1	2						2		2	1	1		
VALID CASES	88	1811	3	9	17	17	31	6	64					9	8	77	53	32	28	58	
NUMBER OF RESPONDENTS	91 100%	1857 100%	3 100%	9 100%	17 100%	17 100%	32 100%	7 100%	66 100%					9 100%	8 100%	79 100%	53 100%	34 100%	29 100%	59 100%	

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			&	&				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									##	##	#	##	##	TI	IC	IC	GOOD	POOR		
									WHTE								MALE	MALE		
Q11																				
#YES	67	1346	2	8	13	13	24	5	52					5	4	61	41	25	19	47
	77%	74%	67%~	89%~	76%~	81%~	77%~	83%~	81%~	~	~	~	~	~ 63%~	50%~	80%~	79%~	78%~	70%~	81%~
NO	20	462	1	1	4	3	7	1	12					3	4	15	11	7	8	11
	23%	26%	33%~	11%~	24%~	19%~	23%~	17%~	19%~	~	~	~	~	~ 38%~	50%~	20%~	21%~	22%~	30%~	19%~
NOT ANSWERED	4	49				1	1	1	2					1	3	1	2		2	1
VALID CASES	87	1808	3	9	17	16	31	6	64					8	8	76	52	32	27	58
NUMBER OF RESPONDENTS	91	1857	3	9	17	17	32	7	66					9	8	79	53	34	29	59
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER ##	AS- IAN ##	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q12 #YES	60 70%	1378 77%	3 100%~	8 89%~	12 71%~	11 69%~	21 68%~	3 50%~	46 72%~	~	~	~	~	~	5 63%~	6 75%~	53 70%~	39 74%~	21 70%~	21 75%~	38 68%~
NO	26 30%	420 23%	~	1 11%~	5 29%~	5 31%~	10 32%~	3 50%~	18 28%~	~	~	~	~	~	3 38%~	2 25%~	23 30%~	14 26%~	9 30%~	7 25%~	18 32%~
NOT ANSWERED	5	59				1	1	1	2					1		3		4	1	3	
VALID CASES	86	1798	3	9	17	16	31	6	64					8	8	76	53	30	28	56	
NUMBER OF RESPONDENTS	91	1857	3	9	17	17	32	7	66					9	8	79	53	34	29	59	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER					
	PSCS TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	MALE	FE- MALE	
Q13 WORST HEALTH CARE POSSIBLE	3 2%	19 0.5%	~	~	~	1 3%	1 2%	~	2 1%	~	~	~	~	~	1 8%	3 2%	~	1 2%	1 2%	2 2%	
01	1 0.6%	22 0.6%	~	~	1 4%	~	~	~	~	~	~	~	~	~	1 8%	1 ~0.6%	~	1 2%	~	1 ~0.8%	
02	2 1%	39 1%	~	~	~	~	1 2%	~	~	~	~	~	~	~	1 8%	1 6%	1 0.6%	1 0.9%	1 2%	1 2%	
03	3 2%	63 2%	~	~	1 4%	1 3%	1 2%	~	2 1%	~	~	~	~	~	1 8%	3 2%	1 0.9%	2 3%	2 3%	1 0.8%	
04	3 2%	95 3%	~	~	1 4%	1 3%	~	~	2 1%	~	~	~	~	~	~	2 1%	1 0.9%	2 3%	1 2%	2 2%	
05	8 4%	234 7%	~	2 9%	2 7%	2 5%	2 3%	~	7 5%	~	~	~	~	~	~	1 6%	7 4%	4 3%	3 5%	6 5%	
06	11 6%	215 6%	1 7%	1 5%	1 4%	1 3%	3 5%	2 17%	10 7%	~	~	~	~	~	~	~	9 6%	6 5%	4 7%	6 5%	
07	32 18%	442 13%	1 7%	6 27%	4 14%	8 20%	12 20%	1 8%	29 21%	~	~	~	~	~	3 23%	32 20%	23 20%	9 16%	7 12%	25 21%	
08	39 22%	779 22%	6 43%	5 23%	4 14%	13 33%	9 15%	2 17%	27 20%	~	~	~	~	~	1 8%	7 39%	32 20%	30 26%	8 14%	12 21%	27 22%
09	35 19%	592 17%	3 21%	2 9%	4 14%	6 15%	16 27%	4 33%	28 20%	~	~	~	~	~	~	5 28%	30 19%	20 17%	14 24%	13 22%	22 18%
BEST HEALTH CARE POSSIBLE	44 24%	1011 29%	3 21%	6 27%	10 36%	7 18%	14 24%	3 25%	31 22%	~	~	~	~	~	5 38%	4 22%	38 24%	31 26%	13 22%	16 28%	28 23%
#8-10 (NET)	118 65%	2382 68%	12 86%	13 59%	18 64%	26 65%	39 66%	9 75%	86 62%	~	~	~	~	~	6 46%	16 89%	100 63%	81 69%	35 60%	41 71%	77 64%

Continued

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	FE- MALE	MALE		
9-10 (NET)	79 44%	1603 46%	6 43%~	8 36%~	14 50%~	13 33%~	30 51%	7 58%~	59 43%~	~	~	~	~	~	5 38%~	9 50%~	68 43%~	51 44%	27 47%	29 50%	50 41%	
NOT ANSWERED	7	96			1	4		1	3						2		6	3	3	1	5	
VALID CASES	181	3511	14	22	28	40	59	12	138						13	18	158	117	58	58	121	
NUMBER OF RESPONDENTS	188	3607	14	22	29	44	59	13	141						15	18	164	120	61	59	126	
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%	
MEAN	7.86	7.94	8.43	8.00	7.86	7.68	8.02	8.42	7.90						6.54	8.22	7.84	8.17	7.57	7.97	7.84	
p stat_(*=Sig @ p<=.05)		.579	~	~	~	~	.491	~	~	~	~	~	~	~	~	~	~	~	.020*	.198	.649	.864

[ASKED IF Q7 >= 1 TIME]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			PAN-	PAN-	&	&		
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	FE-
									WHTE	##	##	#	##	##	TI					MALE
Q14																				
NEVER	7 4%	90 3%			1 3%	1 2%	2 3%		3 2%					3 20%	1 6%	6 4%	3 3%	3 5%	3 5%	4 3%
SOMETIMES	31 17%	539 15%	2 15%	3 14%	6 21%	8 19%	9 16%	2 17%	25 18%					2 13%	3 18%	27 17%	17 15%	12 20%	9 16%	21 17%
USUALLY	61 34%	1150 33%	5 38%	9 41%	7 24%	18 43%	15 26%	6 50%	50 36%					3 20%	1 6%	58 36%	42 36%	18 30%	15 26%	45 37%
ALWAYS	83 46%	1722 49%	6 46%	10 45%	15 52%	15 36%	32 55%	4 33%	60 43%					7 47%	12 71%	69 43%	54 47%	27 45%	31 53%	52 43%
#ALWAYS + USUALLY (NET)	144 79%	2872 82%	11 85%	19 86%	22 76%	33 79%	47 81%	10 83%	110 80%					10 67%	13 76%	127 79%	96 83%	45 75%	46 79%	97 80%
TOP BOX SCORE	83 46%	1722 49%	6 46%	10 45%	15 52%	15 36%	32 55%	4 33%	60 43%					7 47%	12 71%	69 43%	54 47%	27 45%	31 53%	52 43%
NOT ANSWERED	6	106	1			2	1	1	3						1	4	4	1	1	4
VALID CASES	182	3501	13	22	29	42	58	12	138					15	17	160	116	60	58	122
NUMBER OF RESPONDENTS	188	3607	14	22	29	44	59	13	141					15	18	164	120	61	59	126
	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	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER			
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV ILND #	AMER IND/ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE	
Q15 YES	207 81%	3993 82%	14 70%~	22 71%~	38 83%~	43 84%	70 86%	13 87%~	161 85%*	~	~	~	~	~	14 70%~	15 65%~	183 83%~	134 79%	64 85%	68 78%	133 83%
NO	48 19%	904 18%	6 30%~	9 29%~	8 17%~	8 16%	11 14%	2 13%~	28 15%*	~	~	~	~	~	6 30%~	8 35%~	37 17%~	35 21%	11 15%	19 22%	27 17%
NOT ANSWERED	10	185	2		1		1		2					1	1	3	3	2	4	1	
VALID CASES	255	4897	20	31	46	51	81	15	189					20	23	220	169	75	87	160	
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNICITY			HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE	
Q16 NONE	40 21%	792 21%	5 38%~	7 33%~	10 29%~	5 13%~	9 14%~	2 18%~	34 23%~	~	~	~	~	2 17%~	2 13%~	37 22%~	33 26%*	5 9%*	19 31%*	19 15%*	
1 TIME	46 24%	995 27%	4 31%~	5 24%~	8 24%~	7 18%~	22 33%*	~	35 23%~	~	~	~	~	4 33%~	4 27%~	41 24%~	32 25%	13 23%	18 29%	28 23%	
2	45 24%	792 21%	3 23%~	5 24%~	6 18%~	9 23%~	15 23%	5 45%~	35 23%~	~	~	~	~	1 8%~	3 20%~	40 24%~	30 24%	13 23%	11 18%	33 27%	
3	33 17%	483 13%	~	2 10%~	7 21%~	11 28%~	10 15%	2 18%~	25 17%~	~	~	~	~	2 17%~	3 20%~	28 17%~	18 14%	14 25%	9 15%	23 19%	
4	11 6%	279 7%	1 8%~	~	1 3%~	2 5%~	6 9%	~	8 5%~	~	~	~	~	1 8%~	1 7%~	9 5%~	6 5%	4 7%	1 2%*	9 7%	
5 TO 9	12 6%	312 8%	~	2 10%~	2 6%~	4 10%~	3 5%	1 9%~	9 6%~	~	~	~	~	1 8%~	2 13%~	9 5%~	6 5%	6 11%	2 3%	10 8%	
10 OR MORE TIMES	4 2%	88 2%	~	~	~	2 5%~	1 2%	1 9%~	3 2%~	~	~	~	~	1 8%~	~	4 2%~	2 2%	2 4%	2 3%	2 2%	
NOT ANSWERED	16	252	1	1	4	3	4	2	12					2		15	7	7	6	9	
VALID CASES	191	3741	13	21	34	40	66	11	149					12	15	168	127	57	62	124	
NUMBER OF RESPONDENTS	207	3993	14	22	38	43	70	13	161					14	15	183	134	64	68	133	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q15 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			NOT	VERY	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR	FE-	
									AMER		ILND	NATV		TI	IC	IC	&	&	MALE	
									##	##	#	##	##			GOOD	POOR	MALE	MALE	
Q17																				
NEVER	2	51				1	1		2						2	1	1		2	
	1%	2%	~	~	~	3%	2%	~	2%	~	~	~	~	~	~	2%	1%	2%	~	2%
SOMETIMES	10	190		1	1	2	4	1	8					1	9	4	4		7	
	7%	6%	~	7%	4%	6%	7%	11%	7%	~	~	~	~	10%	7%	4%	8%	5%	7%	
USUALLY	28	579	1	4	3	7	10	1	22					1	2	24	14	12	19	
	19%	20%	13%	29%	13%	20%	18%	11%	19%	~	~	~	~	10%	17%	18%	15%	23%	18%	
ALWAYS	110	2109	7	9	19	25	42	7	83					8	10	96	74	35	76	
	73%	72%	88%	64%	83%	71%	74%	78%	72%	~	~	~	~	80%	83%	73%	80%*	67%	73%	
#ALWAYS + USUALLY (NET)	138	2688	8	13	22	32	52	8	105					9	12	120	88	47	95	
	92%	92%	100%	93%	96%	91%	91%	89%	91%	~	~	~	~	90%	100%	92%	95%	90%	91%	
TOP BOX SCORE	110	2109	7	9	19	25	42	7	83					8	10	96	74	35	76	
	73%	72%	88%	64%	83%	71%	74%	78%	72%	~	~	~	~	80%	83%	73%	80%*	67%	73%	
NOT ANSWERED	1	20			1										1				1	
VALID CASES	150	2929	8	14	23	35	57	9	115					10	12	131	93	52	104	
NUMBER OF RESPONDENTS	151	2949	8	14	24	35	57	9	115					10	13	131	94	52	105	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2																		
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			GOOD	FAIR				
									AMER		ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									IC					TI	IC	PAN-	PAN-	&		
									WHTE	##	##	#	##	##		NOT	VERY	&		
															IC	IC	GOOD	FAIR		
																	GOOD	POOR		
																	MALE	MALE		
Q18																				
NEVER	3	63					3		3						3	1	2	1	2	
	2%	2%	~	~	~	~	5%	~	3%~	~	~	~	~	~	~	2%~	1%	4%	2%~	2%~
SOMETIMES	10	222		2		2	1	2	7					1	7	5	3	1	7	
	7%	8%	~	14%~	~	6%~	2%*	22%~	6%~	~	~	~	~	10%~	~	5%~	5%	6%	2%~	7%~
USUALLY	31	572	1	1	7	5	15	1	22					4	1	28	16	13	8	22
	21%	20%	13%~	7%~	30%~	14%~	26%	11%~	19%~	~	~	~	~	40%~	8%~	21%~	17%	25%	19%~	21%~
ALWAYS	106	2066	7	11	16	28	38	6	83					5	11	93	71	34	33	73
	71%	71%	88%~	79%~	70%~	80%~	67%	67%~	72%~	~	~	~	~	50%~	92%~	71%~	76%	65%	77%~	70%~
#ALWAYS + USUALLY (NET)	137	2638	8	12	23	33	53	7	105					9	12	121	87	47	41	95
	91%	90%	100%~	86%~	100%~	94%~	93%	78%~	91%~	~	~	~	~	90%~	100%~	92%~	94%	90%	95%~	91%~
TOP BOX SCORE	106	2066	7	11	16	28	38	6	83					5	11	93	71	34	33	73
	71%	71%	88%~	79%~	70%~	80%~	67%	67%~	72%~	~	~	~	~	50%~	92%~	71%~	76%	65%	77%~	70%~
NOT ANSWERED	1	26			1										1					1
VALID CASES	150	2923	8	14	23	35	57	9	115					10	12	131	93	52	43	104
NUMBER OF RESPONDENTS	151	2949	8	14	24	35	57	9	115					10	13	131	94	52	43	105
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2																			
	PSCS	OHP	18	25	35	45	55	65	BLK	NATV	AMER					EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			NOT	VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			HIS-	HIS-	GOOD	FAIR			
									AMER		ILND	NATV	OTHR	MUL-	IC	IC	&	&			
									WHTE	##	##	#	##	##	TI		GOOD	POOR			
																	MALE	MALE			
Q19																					
NEVER	3	55						3	2						1	2	1	2	1	2	
	2%	2%	~	~	~	~	~	5%	2%~	~	~	~	~	~	8%~	2%~	1%	4%	2%~	2%~	
SOMETIMES	9	211		2		2	2	2	8							8	4	4	1	7	
	6%	7%	~	14%~	~	6%~	4%	22%~	7%~	~	~	~	~	~	~	6%~	4%	8%	2%~	7%~	
USUALLY	20	437	1	1	5	4	7	1	15					4		18	10	8	6	14	
	13%	15%	13%~	7%~	21%~	11%~	12%	11%~	13%~	~	~	~	~	~	40%~	~	14%~	11%	15%	14%~	13%~
ALWAYS	119	2221	7	11	19	29	45	6	90					6	12	103	79	38	35	82	
	79%	76%	88%~	79%~	79%~	83%~	79%	67%~	78%~	~	~	~	~	~	60%~	92%~	79%~	84%	73%	81%~	78%~
#ALWAYS + USUALLY (NET)	139	2658	8	12	24	33	52	7	105					10	12	121	89	46	41	96	
	92%	91%	100%~	86%~	100%~	94%~	91%	78%~	91%~	~	~	~	~	~	100%~	92%~	92%~	95%	88%	95%~	91%~
TOP BOX SCORE	119	2221	7	11	19	29	45	6	90					6	12	103	79	38	35	82	
	79%	76%	88%~	79%~	79%~	83%~	79%	67%~	78%~	~	~	~	~	~	60%~	92%~	79%~	84%	73%	81%~	78%~
NOT ANSWERED		25																			
VALID CASES	151	2924	8	14	24	35	57	9	115					10	13	131	94	52	43	105	
NUMBER OF RESPONDENTS	151	2949	8	14	24	35	57	9	115					10	13	131	94	52	43	105	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2	18	25	35	45	55	65	BLCK	AS-	NATV	AMER								
	PSCS	OHP	TO	TO	TO	TO	TO	AND	OR	IAN	HAW/	IND/		NOT	VERY					
	TOT	TOT	TO	TO	TO	TO	TO	AND	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR		
									WHTE	##	##	#	##	##	TI	IC	IC	&	&	
																		MALE	MALE	
Q20																				
NEVER	5	87			1	2	2		5						5	1	3		5	
	3%	3%	~	~	4%~	6%~	4%		4%~	~	~	~	~	~	~	4%~	1%	6%	~	5%~
SOMETIMES	9	259	1	1	1	1	4		7					1	8	3	5	2	6	
	6%	9%	13%~	7%~	4%~	3%~	7%		6%~	~	~	~	~	10%~	~	6%~	3%	10%	5%~	6%~
USUALLY	40	721	3	2	9	8	13	3	30					4	1	35	25	13	9	30
	27%	25%	38%~	14%~	38%~	24%~	23%	33%~	26%~	~	~	~	~	40%~	8%~	27%~	27%	26%	21%~	29%~
ALWAYS	95	1860	4	11	13	23	38	6	73					5	11	83	65	29	32	63
	64%	64%	50%~	79%~	54%~	68%~	67%	67%~	63%~	~	~	~	~	50%~	92%~	63%~	69%	58%	74%~	61%~
#ALWAYS + USUALLY (NET)	135	2581	7	13	22	31	51	9	103					9	12	118	90	42	41	93
	91%	88%	88%~	93%~	92%~	91%~	89%	100%~	90%~	~	~	~	~	90%~	100%~	90%~	96%*	84%	95%~	89%~
TOP BOX SCORE	95	1860	4	11	13	23	38	6	73					5	11	83	65	29	32	63
	64%	64%	50%~	79%~	54%~	68%~	67%	67%~	63%~	~	~	~	~	50%~	92%~	63%~	69%	58%	74%~	61%~
NOT ANSWERED	2	22				1									1			2		1
VALID CASES	149	2927	8	14	24	34	57	9	115					10	12	131	94	50	43	104
NUMBER OF RESPONDENTS	151	2949	8	14	24	35	57	9	115					10	13	131	94	52	43	105
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-AMER	AS-IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL-TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE			
Q21																							
YES	104 69%	1800 62%*	4 50%~	8 62%~	16 67%~	30 86%~	38 67%	4 44%~	77 67%~	~	~	~	~	~	60%~	11 85%~	87 67%~	61 66%	39 75%	29 67%~	72 69%~		
NO	46 31%	1107 38%*	4 50%~	5 38%~	8 33%~	5 14%~	19 33%	5 56%~	38 33%~	~	~	~	~	~	40%~	4 15%~	43 33%~	32 34%	13 25%	14 33%~	32 31%~		
NOT ANSWERED	1	42	1														1	1	1				
VALID CASES	150	2907	8	13	24	35	57	9	115								10	13	130	93	52	43	104
NUMBER OF RESPONDENTS	151	2949	8	14	24	35	57	9	115								10	13	131	94	52	43	105
	100%	100%	100%	100%	100%	100%	100%	100%	100%								100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER		
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK ##	OTHR ##	MUL-TI TI	HIS-IC	NOT HIS-IC	EX & VERY GOOD & FAIR	POOR	MALE	FE-MALE
Q22 NEVER	5 5%	108 6%	1 ~ 13%~				4 ~ 11%~	4 ~ 5%~							1 9%~	4 5%~	1 2%~	4 10%~	2 7%~	3 4%~
SOMETIMES	23 23%	264 15%	1 25%~	5 63%~	3 20%~	5 18%~	6 16%~	17 ~ 23%~						1 ~ 20%~	20 ~ 24%~	12 21%~	8 21%~	3 10%~	17 25%~	
USUALLY	37 37%	517 30%	3 75%~		4 ~ 27%~	14 50%~	13 35%~	2 50%~						1 ~ 20%~	3 27%~	33 40%~	25 43%~	12 31%~	13 45%~	24 35%~
ALWAYS	35 35%	861 49%*	2 ~ 25%~	8 53%~	9 32%~	14 38%~	2 50%~	22 30%~						3 ~ 60%~	7 64%~	26 31%~	20 34%~	15 38%~	11 38%~	24 35%~
#ALWAYS + USUALLY (NET)	72 72%	1378 79%	3 75%~	2 25%~	12 80%~	23 82%~	27 73%~	4 100%~						4 ~ 80%~	10 91%~	59 71%~	45 78%~	27 69%~	24 83%~	48 71%~
TOP BOX SCORE	35 35%	861 49%*	2 ~ 25%~	8 53%~	9 32%~	14 38%~	2 50%~	22 30%~						3 ~ 60%~	7 64%~	26 31%~	20 34%~	15 38%~	11 38%~	24 35%~
NOT ANSWERED	4	50			1	2	1	3						1	4	3				4
VALID CASES	100	1750	4	8	15	28	37	4	74					5	11	83	58	39	29	68
NUMBER OF RESPONDENTS	104 100%	1800 100%	4 100%	8 100%	16 100%	30 100%	38 100%	4 100%	77 100%					6 100%	11 100%	87 100%	61 100%	39 100%	29 100%	72 100%

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

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

	BANT OT1	BANT OT2	AGE					RACE						ETHNICITY	HEALTH STATUS		GENDER			
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q23 WORST PERSONAL DOCTOR POSSIBLE	1 0.5%	23 0.6%	~	~	~	1 3%	~	~	~	~	~	~	~	~	~	1 ~0.6%	~	1 2%	~	1 ~0.8%
01	2 1%	32 0.9%	~	1 5%	~	~	1 2%	~	~	~	~	~	~	~	~	2 1%	2 2%	~	1 2%	1 0.8%
02		39 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03	2 1%	60 2%	~	1 5%	~	1 3%	~	~	~	~	~	~	~	~	~	2 1%	1 0.8%	~	~	2 2%
04	2 1%	72 2%	~	~	~	~	1 2%	~	~	~	~	~	~	~	~	1 ~0.6%	~	2 3%	~	1 ~0.8%
05	9 5%	188 5%	~	2 10%	1 3%	~	4 6%	~	~	~	~	~	~	~	~	7 4%	4 3%	3 5%	5 8%	3 2%
06	9 5%	158 4%	~	2 10%	1 3%	1 3%	2 3%	2 18%	~	~	~	~	~	1 7%	2 13%	6 4%	6 5%	2 3%	~	8 6%
07	14 7%	327 9%	1 7%	3 15%	4 11%	2 5%	4 6%	~	~	~	~	~	~	2 14%	~	14 8%	10 8%	3 5%	4 6%	10 8%
08	40 21%	632 17%	4 29%	2 10%	7 19%	11 28%	13 20%	2 18%	~	~	~	~	~	5 36%	3 20%	34 20%	28 22%	11 19%	14 23%	24 19%
09	40 21%	691 19%	4 29%	3 15%	6 17%	11 28%	15 23%	1 9%	~	~	~	~	~	3 21%	2 13%	38 22%	28 22%	12 20%	13 21%	27 21%
BEST PERSONAL DOCTOR POSSIBLE	75 39%	1506 40%	5 36%	6 30%	17 47%	13 33%	26 39%	6 55%	~	~	~	~	~	3 21%	8 53%	65 38%	48 38%	25 42%	25 40%	49 39%
#8-10 (NET)	155 80%	2829 76%	13 93%	11 55%	30 83%	35 88%	54 82%	9 82%	~	~	~	~	~	11 79%	13 87%	137 81%	104 82%	48 81%	52 84%	100 79%

Continued

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER ##	AS- IAN ##	NATV ILND #	AMER IND/ PAC ALSK #	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE	
9-10 (NET)	115 59%	2197 59%	9 64%~	9 45%~	23 64%~	24 60%~	41 62%	7 64%~	93 62%~	~	~	~	~	~	6 43%~	10 67%~	103 61%~	76 60%	37 63%	38 61%	76 60%
NOT ANSWERED	13	265		2	2	3	4	2	11							13	7	5	6	7	
VALID CASES	194	3728	14	20	36	40	66	11	150					14	15	170	127	59	62	126	
NUMBER OF RESPONDENTS	207 100%	3993 100%	14 100%	22 100%	38 100%	43 100%	70 100%	13 100%	161 100%					14 100%	15 100%	183 100%	134 100%	64 100%	68 100%	133 100%	
MEAN	8.47	8.34	8.93	7.50	8.86	8.50	8.55	8.82	8.48					8.36	8.93	8.50	8.56	8.51	8.60	8.48	
p stat_(*=Sig @ p<=.05)		.325	~	~	~	~	.679	~	~	~	~	~	~	~	~	~	.388	.852	.502	.879	

[ASKED IF Q15 = YES]

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q24 YES	107 42%	1933 40%	6 27%~	5 16%~	19 40%~	26 52%	41 51%	5 38%~	80 43%	~	~	~	~	~	11 52%~	8 35%~	93 43%~	57 34%*	45 60%*	31 35%	74 47%*
NO	146 58%	2928 60%	16 73%~	26 84%~	28 60%~	24 48%	39 49%	8 62%~	107 57%	~	~	~	~	~	10 48%~	15 65%~	125 57%~	111 66%*	30 40%*	58 65%	83 53%*
NOT ANSWERED		12				1	2	2	4							1	5	4	2	2	4
VALID CASES	253	4861	22	31	47	50	80	13	187						21	23	218	168	75	89	157
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191						21	24	223	172	77	91	161
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2	18	25	35	45	55	65	BLCK	AS-	NATV	AMER				EX &				
	PSCS	OHP	TO	TO	TO	TO	TO	AND	OR	AFR-	IAN	HAW/	IND/	MUL-	NOT	VERY	GOOD	FAIR		
	TOT	TOT	24	34	44	54	64	OVER	WHTE	AMER		PAC	ALSK	TI	HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT							##	##	#	##	##	##	IC	IC	&	&		
																	GOOD	POOR		
																	MALE	MALE		
Q25																				
NEVER	7	110			2	1	3		4					3	7	2	3	1	6	
	7%	6%	~	~	11%~	4%~	7%~	~	5%~	~	~	~	~	27%~	~	8%~	4%~	7%~	3%~	8%~
SOMETIMES	13	323	1	1	2	6	1	1	8					4	1	11	5	8	4	9
	12%	17%	20%~	20%~	11%~	23%~	2%~	25%~	10%~	~	~	~	~	36%~	13%~	12%~	9%~	18%~	13%~	12%~
USUALLY	38	543	2	1	4	11	14	3	31					1	2	33	20	16	12	24
	36%	29%	40%~	20%~	21%~	42%~	34%~	75%~	40%~	~	~	~	~	9%~	25%~	36%~	36%~	36%~	40%~	33%~
ALWAYS	47	893	2	3	11	8	23		35					3	5	40	29	17	13	34
	45%	48%	40%~	60%~	58%~	31%~	56%~	~	45%~	~	~	~	~	27%~	63%~	44%~	52%~	39%~	43%~	47%~
#ALWAYS + USUALLY (NET)	85	1436	4	4	15	19	37	3	66					4	7	73	49	33	25	58
	81%	77%	80%~	80%~	79%~	73%~	90%~	75%~	85%~	~	~	~	~	36%~	88%~	80%~	88%~	75%~	83%~	79%~
TOP BOX SCORE	47	893	2	3	11	8	23		35					3	5	40	29	17	13	34
	45%	48%	40%~	60%~	58%~	31%~	56%~	~	45%~	~	~	~	~	27%~	63%~	44%~	52%~	39%~	43%~	47%~
NOT ANSWERED	2	64	1					1	2						2	1	1	1	1	1
VALID CASES	105	1869	5	5	19	26	41	4	78					11	8	91	56	44	30	73
NUMBER OF RESPONDENTS	107	1933	6	5	19	26	41	5	80					11	8	93	57	45	31	74
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ILND #	AMER IND/PAC ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE	
Q26 NONE		77 4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
1 SPECIALIST	50 48%	991 53%	2 40%	4 80%	11 61%	12 46%	18 44%	2 50%	39 50%	~	~	~	~	7 64%	3 43%	47 52%	29 53%	19 43%	13 43%	37 51%	
2	40 38%	498 27%*	1 20%	1 20%	6 33%	12 46%	18 44%	1 25%	29 37%	~	~	~	~	3 27%	3 43%	34 37%	19 35%	19 43%	11 37%	28 39%	
3	10 10%	191 10%	1 20%	~	1 6%	2 8%	3 7%	~	8 10%	~	~	~	~	~	~	7 8%	5 9%	4 9%	4 13%	5 7%	
4	3 3%	64 3%	~	~	~	~	2 5%	1 25%	2 3%	~	~	~	~	~	1 14%	2 2%	2 4%	1 2%	2 7%	1 1%	
5 OR MORE SPECIALISTS	1 1%	45 2%	1 20%	~	~	~	~	~	~	~	~	~	~	1 9%	~	1 1%	~	1 2%	~	1 1%	
NOT ANSWERED	3	67	1	~	1	~	~	1	2	~	~	~	~	~	~	1	2	2	1	1	2
VALID CASES	104	1866	5	5	18	26	41	4	78	~	~	~	~	11	7	91	55	44	30	72	
NUMBER OF RESPONDENTS	107	1933	6	5	19	26	41	5	80	~	~	~	~	11	8	93	57	45	31	74	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	~	~	~	~	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q24 = YES]

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

	BANT OT1	BANT OT2	AGE					RACE						ETHNICITY	HEALTH STATUS		GENDER				
	PSCS TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q27 WORST SPECIALIST POSSIBLE	4 4%	13 0.7%	~	~	1 6%	1 4%	1 3%	~	3 4%	~	~	~	~	~	1 10%	~	4 4%	~	2 5%	~	4 6%
01		14 0.8%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02	2 2%	12 0.7%	~	~	~	~	1 3%	~	2 3%	~	~	~	~	~	~	1 1%	1 2%	1 2%	1 3%	1 1%	1 1%
03	1 1%	27 2%	~	~	1 6%	~	~	~	~	~	~	~	~	~	1 10%	~	1 1%	~	1 2%	~	1 1%
04		22 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
05	3 3%	83 5%	~	~	~	~	3 8%	~	3 4%	~	~	~	~	~	~	~	3 3%	2 4%	1 2%	3 10%	~
06	5 5%	68 4%	2 40%	~	~	~	2 5%	~	2 3%	~	~	~	~	~	1 10%	1 14%	3 3%	1 2%	4 9%	1 3%	3 4%
07	11 11%	157 9%	~	1 20%	2 11%	4 16%	2 5%	1 25%	5 6%	~	~	~	~	~	3 30%	1 14%	8 9%	5 9%	4 9%	2 7%	8 11%
08	18 18%	318 18%	~	1 20%	1 6%	8 32%	8 20%	~	13 17%	~	~	~	~	~	~	4 57%	14 16%	11 20%	6 14%	4 14%	14 20%
09	25 25%	315 18%	3 60%	~	5 28%	5 20%	10 25%	2 50%	21 27%	~	~	~	~	~	3 30%	~	24 27%	14 26%	11 26%	11 38%	14 20%
BEST SPECIALIST POSSIBLE	33 32%	742 42%*	~	3 60%	8 44%	7 28%	13 33%	1 25%	28 36%	~	~	~	~	~	1 10%	1 14%	31 35%	20 37%	13 30%	7 24%	26 37%
#8-10 (NET)	76 75%	1375 78%	3 60%	4 80%	14 78%	20 80%	31 78%	3 75%	62 81%	~	~	~	~	~	4 40%	5 71%	69 78%	45 83%	30 70%	22 76%	54 76%

Continued

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ IND/ PAC ALSK #	AMER ILND NATV OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	VERY GOOD & POOR	FAIR & POOR	MALE	FE- MALE		
9-10 (NET)	58 57%	1057 60%	3 60%~	3 60%~	13 72%~	12 48%~	23 58%~	3 75%~	49 64%~	~	~	~	~	~	4 40%~	1 14%~	55 62%~	34 63%~	24 56%~	18 62%~	40 56%~
NOT ANSWERED	2	18				1	1		1				1		2	1	1		1	1	
VALID CASES	102	1771	5	5	18	25	40	4	77				10	7	89	54	43	29	71		
NUMBER OF RESPONDENTS	104	1789	5	5	18	26	41	4	78				11	7	91	55	44	30	72		
	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%		
MEAN	8.12	8.43	7.80	9.00	8.33	8.28	8.18	8.75	8.30				6.70	7.86	8.22	8.65	7.88	8.21	8.13		
p stat_(*=Sig @ p<=.05)		.170	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		

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

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER			
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	MALE	FE-MALE	
Q28 YES	53 21%	886 18%	1 5%	5 16%	10 21%	9 18%	21 26%	3 23%	37 20%	~	~	~	~	~	5 25%	8 33%	43 20%	32 19%	17 23%	19 21%	33 21%
NO	198 79%	3943 82%	20 95%	26 84%	37 79%	40 82%	59 74%	10 77%	149 80%	~	~	~	~	~	15 75%	16 67%	173 80%	137 81%	56 77%	71 79%	121 79%
NOT ANSWERED	14	253	1			2	2	2	5						1		7	3	4	1	7
VALID CASES	251	4829	21	31	47	49	80	13	186						20	24	216	169	73	90	154
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191						21	24	223	172	77	91	161
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	MALE	FE- MALE
Q29 NEVER	6 13%	78 9%	1 ~ 20%	2 ~ 25%	1 ~ 13%	1 ~ 5%	4 ~ 13%	4 ~ 13%	~	~	~	~	~	2 ~ 40%	6 ~ 16%	3 10%	2 14%	1 6%	5 17%	
SOMETIMES	20 42%	290 33%	1 ~ 100%	3 ~ 60%	1 ~ 13%	4 ~ 50%	10 ~ 53%	1 ~ 33%	13 ~ 41%	~	~	~	~	3 ~ 60%	3 38%	17 45%	13 42%	6 43%	7 39%	13 45%
USUALLY	14 29%	294 34%	1 ~ 20%	3 ~ 38%	2 ~ 25%	4 ~ 21%	2 ~ 67%	10 ~ 31%	~	~	~	~	~	3 ~ 38%	9 ~ 24%	9 29%	4 29%	5 28%	8 28%	
ALWAYS	8 17%	204 24%	~	~ 25%	2 ~ 13%	1 ~ 21%	4 ~ 21%	5 ~ 16%	~	~	~	~	~	~	2 ~ 25%	6 ~ 16%	6 19%	2 14%	5 28%	3 10%
#ALWAYS + USUALLY (NET)	22 46%	498 58%	1 ~ 20%	5 ~ 63%	3 ~ 38%	8 ~ 42%	2 ~ 67%	15 ~ 47%	~	~	~	~	~	5 ~ 63%	15 ~ 39%	15 48%	6 43%	10 56%	11 38%	
TOP BOX SCORE	8 17%	204 24%	~	~ 25%	2 ~ 13%	1 ~ 21%	4 ~ 21%	5 ~ 16%	~	~	~	~	~	2 ~ 25%	6 ~ 16%	6 19%	2 14%	5 28%	3 10%	
NOT ANSWERED	5	20			2	1	2	5							5	1	3	1	4	
VALID CASES	48	866	1	5	8	8	19	3	32					5	8	38	31	14	18	29
NUMBER OF RESPONDENTS	53	886	1	5	10	9	21	3	37					5	8	43	32	17	19	33
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH	GENDER	
	OT1	OT2													ITY	STATUS				
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&	FE-	
									WHTE	##	##	#	##	##	TI	GOOD	POOR	MALE	MALE	
Q30																				
YES	88	1269	7	9	12	22	28	7	62					10	9	77	58	26	30	58
	35%	26%*	32%~	31%~	26%~	45%~	35%	54%~	34%	~	~	~	~	~ 48%	38%	36%	35%	35%	33%	38%
NO	163	3524	15	20	35	27	52	6	122					11	15	138	109	48	60	96
	65%	74%*	68%~	69%~	74%~	55%~	65%	46%~	66%	~	~	~	~	~ 52%	63%	64%	65%	65%	67%	62%
NOT ANSWERED	14	289		2		2	2	2	7						8	5	3		1	7
VALID CASES	251	4793							184					21	24	215	167	74	90	154
NUMBER OF RESPONDENTS	265	5082							191					21	24	223	172	77	91	161
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER	
	OT1	OT2	18	25	35	45	55	65	BLCK	AS-	NATV	AMER				EX &			
	PSCS	OHP	TO	TO	TO	TO	TO	AND	OR	IAN	ILND	ALSK			NOT	VERY			
	TOT	TOT	TO	TO	TO	TO	TO	AND	AFR-	AS-	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR	
	ADLT	ADLT	24	34	44	54	64	OVER	AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE
									WHTE	##	##	#	##	##	TI	IC	IC	&	&
Q31																			
NEVER	2	39			1	1			1						2	2			2
	2%	3%	~	~	9%~	5%~	~	~	2%~	~	~	~	~	~	3%~	4%~	~	~	4%~
SOMETIMES	16	212	1	2	2	4	5	1	11					3	1	15	11	4	4
	19%	17%	14%~	22%~	18%~	20%~	18%~	17%~	18%~	~	~	~	~	33%~	11%~	21%~	20%~	17%~	15%~
USUALLY	25	361	4	3	2	8	6	1	16					5	3	21	16	7	5
	30%	29%	57%~	33%~	18%~	40%~	21%~	17%~	27%~	~	~	~	~	56%~	33%~	29%~	29%~	29%~	19%~
ALWAYS	41	619	2	4	6	7	17	4	32					1	5	35	27	13	18
	49%	50%	29%~	44%~	55%~	35%~	61%~	67%~	53%~	~	~	~	~	11%~	56%~	48%~	48%~	54%~	67%~
#ALWAYS + USUALLY (NET)	66	980	6	7	8	15	23	5	48					6	8	56	43	20	23
	79%	80%	86%~	78%~	73%~	75%~	82%~	83%~	80%~	~	~	~	~	67%~	89%~	77%~	77%~	83%~	85%~
TOP BOX SCORE	41	619	2	4	6	7	17	4	32					1	5	35	27	13	18
	49%	50%	29%~	44%~	55%~	35%~	61%~	67%~	53%~	~	~	~	~	11%~	56%~	48%~	48%~	54%~	67%~
NOT ANSWERED	4	38			1	2		1	2					1		4	2	2	3
VALID CASES	84	1231	7	9	11	20	28	6	60					9	9	73	56	24	27
NUMBER OF RESPONDENTS	88	1269	7	9	12	22	28	7	62					10	9	77	58	26	30
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2																		
	PSCS	OHP	18	25	35	45	55	65	BLCK	AS-	NATV	AMER				NOT	EX &			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AFR-	IAN	HAW/	IND/		HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	##	##	#	##	##	TI	IC	IC	&	&	
																	GOOD	POOR	MALE	MALE
Q32																				
NEVER	1	16					1		1						1		1			1
	1%	1%	~	~	~	~	4%~		2%~	~	~	~	~	~	~	1%~	~	4%~	~	2%~
SOMETIMES	4	61		2	1		1		2					2		4	3	1		4
	5%	5%	~	22%~	9%~		4%~		3%~	~	~	~	~	22%~	~	5%~	5%~	4%~	~	7%~
USUALLY	15	224	3	2	2	3	4		11					2	2	12	9	5	5	10
	18%	18%	43%~	22%~	18%~	15%~	14%~		18%~	~	~	~	~	22%~	22%~	16%~	16%~	21%~	19%~	18%~
ALWAYS	64	929	4	5	8	17	22	6	46					5	7	56	44	17	22	42
	76%	76%	57%~	56%~	73%~	85%~	79%~	100%~	77%~	~	~	~	~	56%~	78%~	77%~	79%~	71%~	81%~	74%~
#ALWAYS + USUALLY (NET)	79	1153	7	7	10	20	26	6	57					7	9	68	53	22	27	52
	94%	94%	100%~	78%~	91%~	100%~	93%~	100%~	95%~	~	~	~	~	78%~	100%~	93%~	95%~	92%~	100%~	91%~
TOP BOX SCORE	64	929	4	5	8	17	22	6	46					5	7	56	44	17	22	42
	76%	76%	57%~	56%~	73%~	85%~	79%~	100%~	77%~	~	~	~	~	56%~	78%~	77%~	79%~	71%~	81%~	74%~
NOT ANSWERED	4	39			1	2		1	2					1		4	2	2	3	1
VALID CASES	84	1230	7	9	11	20	28	6	60					9	9	73	56	24	27	57
NUMBER OF RESPONDENTS	88	1269	7	9	12	22	28	7	62					10	9	77	58	26	30	58
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	BANT	BANT	AGE							RACE							ETHNIC- ITY		HEALTH STATUS		GENDER		
	OT1	OT2																					
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	69 WHTE	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	10	9 HIS- IC	81 HIS- IC	NOT VERY GOOD & FAIR & GOOD POOR	61 & 30	34 MALE	60 MALE	
Q33 YES	97 39%	1787 37%	9 41%	10 32%	18 40%	22 46%	28 35%	4 31%	69 37%	~	~	~	~	~	56%	38%	38%	37%	42%	34 38%	60 39%		
NO	152 61%	2987 63%	13 59%	21 68%	27 60%	26 54%	51 65%	9 69%	116 63%	~	~	~	~	~	44%	63%	62%	63%	58%	55 62%	93 61%		
NOT ANSWERED	16	308			2	3	3	2	6						3		10		5	5	2	8	
VALID CASES	249	4774	22	31	45	48	79	13	185						18	24	213	167	72	89	153		
NUMBER OF RESPONDENTS	265 100%	5082 100%	22 100%	31 100%	47 100%	51 100%	82 100%	15 100%	191 100%						21 100%	24 100%	223 100%	172 100%	77 100%	91 100%	161 100%		

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			PAN-	&	POOR				
									AMER		ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	FE-	
									##	##	#	##	##	TI					MALE	MALE	
PQ34																					
NEVER	6	91		1	2		3		4					1	6	3	2	3	3	3	3
	2%	2%		~ 3%	5%		~ 4%		2%					6%	~ 3%	2%	3%	4%	2%	4%	2%
SOMETIMES	13	301	2	1	2	4	4		10					3	13	9	4	2	11	2	11
	5%	6%	9%	3%	5%	9%	5%		6%					17%	~ 6%	5%	6%	2%	7%	2%	7%
USUALLY	37	677	4	4	5	11	8	2	24					4	6	27	25	10	13	23	23
	15%	14%	18%	13%	11%	23%	11%	17%	13%					22%	25%	13%	15%	15%	15%	15%	15%
ALWAYS	187	3637	16	25	35	32	61	10	142					10	18	162	128	52	67	114	114
	77%	77%	73%	81%	80%	68%	80%	83%	79%					56%	75%	78%	78%	76%	79%	75%	75%
#ALWAYS + USUALLY (NET)	224	4314	20	29	40	43	69	12	166					14	24	189	153	62	80	137	137
	92%	92%	91%	94%	91%	91%	91%	100%	92%					78%	100%	91%	93%	91%	94%	91%	91%
TOP BOX SCORE	187	3637	16	25	35	32	61	10	142					10	18	162	128	52	67	114	114
	77%	77%	73%	81%	80%	68%	80%	83%	79%					56%	75%	78%	78%	76%	79%	75%	75%
NOT ANSWERED	6	68		1	1	3	1		5						5	2	4	4	2	2	2
VALID CASES	243	4706	22	31	44	47	76	12	180					18	24	208	165	68	85	151	151
NUMBER OF RESPONDENTS	249	4774	22	31	45	48	79	13	185					18	24	213	167	72	89	153	153
	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	BANT OT2	AGE					RACE						ETHNICITY	HEALTH STATUS		GENDER						
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND#	AMER IND/ALSK##	OTHR##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE-MALE
Q35 WORST HEALTH PLAN POSSIBLE	3 1%	33 0.7%	~	~	~	2%	1%	~	2 1%	~	~	~	~	~	5%	~	3 1%	~	1	1	~	1	2
01	3 1%	31 0.7%	~	~	2 5%	~	~	~	1 0.6%	~	~	~	~	~	5%	~	2 1%	1 0.6%	2	3	~	1	1
02	4 2%	51 1%	~	~	~	2%	3 4%	~	3 2%	~	~	~	~	~	~	~	4 2%	1 0.6%	2	3	~	1	3
03	2 0.8%	61 1%	~	~	~	~	2 3%	~	2 1%	~	~	~	~	~	~	~	2 1%	2 1%	~	~	~	1	1
04	5 2%	105 2%	~	1 3%	2 5%	1 2%	~	~	2 1%	~	~	~	~	~	5%	1 5%	3 1%	3 2%	2	3	~	1	4
05	28 12%	381 8%	~	6 20%	7 16%	4 9%	8 10%	~	21 12%	~	~	~	~	~	20%	4 5%	1 12%	24 11%	18 11%	8	8	9	18
06	11 5%	291 6%	3 14%	4 13%	1 2%	1 2%	1 1%*	1 8%	10 6%	~	~	~	~	~	5%	1 5%	11 5%	8 5%	3	4	~	3	8
07	28 12%	602 13%	1 5%	3 10%	4 9%	5 11%	10 13%	3 25%	23 13%	~	~	~	~	~	15%	3 12%	25 11%	18 12%	9	12	~	10	16
08	56 23%	920 20%	8 36%	9 30%	10 23%	16 34%	11 14%*	2 17%	40 22%	~	~	~	~	~	15%	3 41%	9 23%	47 24%	38 23%	17	23	22	36
09	47 20%	736 16%	5 23%	4 13%	4 9%	11 23%	19 25%	3 25%	33 18%	~	~	~	~	~	25%	5 23%	5 19%	39 21%	33 16%	12	16	19	27
BEST HEALTH PLAN POSSIBLE	54 22%	1385 30%*	5 23%	3 10%	13 30%	7 15%	22 29%	3 25%	42 23%	~	~	~	~	~	5%	1 27%	6 23%	47 23%	36 23%	17	23	21	33
#8-10 (NET)	157 65%	3041 66%	18 82%	16 53%	27 63%	34 72%	52 68%	8 67%	115 64%	~	~	~	~	~	45%	9 91%	20 64%	133 68%	107 63%	46	63	59	96

Continued

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER IND/ PAC ALSK	OTH R	MUL- TI	HIS- IC	HIS- IC	NOT VERY GOOD & FAIR & POOR	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE	
9-10 (NET)	101 42%	2121 46%	10 45%~	7 23%~	17 40%~	18 38%~	41 53%*	6 50%~	75 42%	~	~	~	~	~	30%~	11 50%~	86 42%~	69 44%	29 40%	40 47%	60 40%
NOT ANSWERED	24	486		1	4	4	5	3	12					1	2	16	14	4	6	12	
VALID CASES	241	4596	22	30	43	47	77	12	179					20	22	207	158	73	85	149	
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	
MEAN	7.68	7.93	8.36	7.23	7.56	7.74	7.88	8.33	7.73					6.55	8.45	7.66	7.89	7.52	7.89	7.63	
p stat_(*=Sig @ p<=.05)		.056	~	~	~	~	.336	~	.509	~	~	~	~	~	~	~	~	.067	.496	.260	.686

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER			
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE	
Q35A YES	37 15%	599 12%	2 9%~	1 3%~	8 17%~	6 12%	14 18%	2 15%~	23 12%	~	~	~	~	~	7 35%~	2 9%~	31 14%~	11 7%*	22 30%*	14 16%	21 14%
NO	214 85%	4210 88%	20 91%~	30 97%~	39 83%~	44 88%	64 82%	11 85%~	163 88%	~	~	~	~	~	13 65%~	21 91%~	186 86%~	156 93%*	52 70%*	75 84%	134 86%
NOT ANSWERED	14	273				1	4	2	5						1	1	6	5	3	2	6
VALID CASES	251	4809	22	31	47	50	78	13	186						20	23	217	167	74	89	155
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191						21	24	223	172	77	91	161
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q35B NEVER	8 23%	90 16%	~	~	4 57%	2 40%	1 7%	3 14%	~	~	~	~	~	4 57%	1 50%	6 21%	1 9%	5 25%	3 23%	5 25%
SOMETIMES	3 9%	83 15%	~100%	1 14%	1 14%	~	~	1 5%	~	~	~	~	~	1 14%	2 7%	1 9%	2 10%	1 8%	2 10%	
USUALLY	9 26%	129 23%	2 100%	1 14%	1 20%	2 14%	2 100%	6 29%	~	~	~	~	~	~	8 28%	3 27%	4 20%	2 15%	6 30%	
ALWAYS	15 43%	262 46%	~	1 14%	2 40%	11 79%	~	11 52%	~	~	~	~	~	2 29%	1 50%	13 45%	6 55%	9 45%	7 54%	7 35%
#ALWAYS + USUALLY (NET)	24 69%	391 69%	2 100%	2 29%	3 60%	13 93%	2 100%	17 81%	~	~	~	~	~	2 29%	1 50%	21 72%	9 82%	13 65%	9 69%	13 65%
TOP BOX SCORE	15 43%	262 46%	~	1 14%	2 40%	11 79%	~	11 52%	~	~	~	~	~	2 29%	1 50%	13 45%	6 55%	9 45%	7 54%	7 35%
NOT ANSWERED	2	35		1	1			2							2		2		1	1
VALID CASES	35	564	2	1	7	5	14	2	21				7	2	29	11	20	13	20	
NUMBER OF RESPONDENTS	37	599	2	1	8	6	14	2	23				7	2	31	11	22	14	21	
	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35A = YES]

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE ##	BLCK OR AFR- AMER ##	AS- IAN ##	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q35C YES	57 23%	759 16%*	2 9%~	4 13%~	10 22%~	18 38%~	17 22%	2 15%~	39 21%	~	~	~	~	~	9 43%~	5 23%~	48 22%~	26 16%*	25 35%*	21 24%	35 23%
NO	189 77%	3989 84%*	20 91%~	27 87%~	36 78%~	29 62%~	59 78%	11 85%~	144 79%	~	~	~	~	~	12 57%~	17 77%~	166 78%~	139 84%*	46 65%*	67 76%	116 77%
NOT ANSWERED	19	334			1	4	6	2	8							2	9	7	6	3	10
VALID CASES	246	4748	22	31	46	47	76	13	183						21	22	214	165	71	88	151
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191						21	24	223	172	77	91	161
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/		NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	GOOD	FAIR				
									AMER		ILND	NATV		TI	IC	IC	&			
									WHTE	##	##	#	##	#	IC	IC	&			
																	FE-			
																	MALE			
																	MALE			
Q35D																				
NEVER	16	121		3	5	4	3		9					6	15	10	4	5	11	
	30%	17%		~ 75%	~ 56%	~ 22%	~ 18%		~ 25%					~ 67%	~ 33%	~ 40%	~ 17%	~ 28%	~ 31%	
SOMETIMES	10	129	1		1	5	2		6					2	1	8	1	8	4	6
	19%	18%	50%	~	~ 11%	~ 28%	~ 12%		~ 17%					~ 22%	~ 20%	~ 17%	~ 4%	~ 35%	~ 22%	~ 17%
USUALLY	11	170	1		2	2	5		10						10	3	5	5	5	
	20%	23%	50%	~	~ 22%	~ 11%	~ 29%		~ 28%						~ 22%	~ 12%	~ 22%	~ 28%	~ 14%	
ALWAYS	17	308		1	1	7	7	1	11					1	4	13	11	6	4	13
	31%	42%		~ 25%	~ 11%	~ 39%	~ 41%	~ 100%	~ 31%					~ 11%	~ 80%	~ 28%	~ 44%	~ 26%	~ 22%	~ 37%
#ALWAYS + USUALLY (NET)	28	478	1	1	3	9	12	1	21					1	4	23	14	11	9	18
	52%	66%	50%	~ 25%	~ 33%	~ 50%	~ 71%	~ 100%	~ 58%					~ 11%	~ 80%	~ 50%	~ 56%	~ 48%	~ 50%	~ 51%
TOP BOX SCORE	17	308		1	1	7	7	1	11					1	4	13	11	6	4	13
	31%	42%		~ 25%	~ 11%	~ 39%	~ 41%	~ 100%	~ 31%					~ 11%	~ 80%	~ 28%	~ 44%	~ 26%	~ 22%	~ 37%
NOT ANSWERED	3	31			1			1	3						2	1	2		3	
VALID CASES	54	728	2	4	9	18	17	1	36					9	5	46	25	23	18	35
NUMBER OF RESPONDENTS	57	759	2	4	10	18	17	2	39					9	5	48	26	25	21	35
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35C = YES]

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

	BANT	BANT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ILND #	AMER IND/PAC ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE-MALE	MALE		
Q35E ALWAYS	11 4%	178 4%	1 ~ 3%	2 ~ 4%	6 8%	7 ~ 4%	7 ~ 4%	~	~	~	~	~	~	3 13%~	7 3%~	5 3%	6 8%	2 2%	8 5%			
USUALLY	9 4%	193 4%	2 ~ 7%	1 2%~	2 4%~	3 4%	4 ~ 2%	~	~	~	~	~	~ 11%	2 4%~	1 3%~	7 4%	6 3%	2 4%	5 3%			
SOMETIMES	46 18%	804 17%	7 32%~	7 23%~	10 22%~	8 16%~	9 11%*	1 7%~	30 16%	~	~	~	~	8 42%~	4 17%~	38 18%~	24 14%*	17 23%	8 9%*	36 23%*		
NEVER	185 74%	3575 75%	15 68%~	20 67%~	34 76%~	37 76%~	62 78%	13 93%~	145 78%*	~	~	~	~	9 47%~	16 67%~	163 76%~	133 79%*	48 66%	74 84%*	107 69%*		
#NEVER + SOMETIMES (NET)	231 92%	4379 92%	22 100%~	27 90%~	44 98%~	45 92%~	71 89%	14 100%~	175 94%	~	~	~	~	17 89%~	20 83%~	201 93%~	157 93%	65 89%	82 93%	143 92%		
TOP BOX SCORE	185 74%	3575 75%	15 68%~	20 67%~	34 76%~	37 76%~	62 78%	13 93%~	145 78%*	~	~	~	~	9 47%~	16 67%~	163 76%~	133 79%*	48 66%	74 84%*	107 69%*		
NOT ANSWERED	14	332	1	2	2	2	1	5					2		8	4	4	3	5			
VALID CASES	251	4750	22	30	45	49	80	14	186				19	24	215	168	73	88	156			
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191				21	24	223	172	77	91	161			
	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%			

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			PAN-	&	POOR	&	FE-		
									WHTE	##	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q35F																					
ALWAYS	3	66				2			2						2	1	2	2	2		
	1%	1%	~	~	~	4%	~	~	1%	~	~	~	~	~	~	0.9%	0.6%	3%	2%	~	
USUALLY	6	106				1	3	1	4					2	6	1	3	6			
	2%	2%	~	~	~	2%	4%	8%	2%	~	~	~	~	11%	~	3%	0.6%*	4%	~	4%*	
SOMETIMES	34	672	2	3	9	6	11	2	26					6	1	31	22	11	14	20	
	14%	14%	9%	10%	20%	12%	14%	15%	14%	~	~	~	~	32%	4%	14%	13%	15%	16%	13%	
NEVER	205	3911	20	27	36	40	66	10	153					11	23	175	143	56	72	128	
	83%	82%	91%	90%	80%	82%	83%	77%	83%	~	~	~	~	58%	96%	82%	86%	78%	82%	83%	
#NEVER + SOMETIMES (NET)	239	4583	22	30	45	46	77	12	179					17	24	206	165	67	86	148	
	96%	96%	100%	100%	100%	94%	96%	92%	97%	~	~	~	~	89%	100%	96%	99%*	93%	98%	96%	
TOP BOX SCORE	205	3911	20	27	36	40	66	10	153					11	23	175	143	56	72	128	
	83%	82%	91%	90%	80%	82%	83%	77%	83%	~	~	~	~	58%	96%	82%	86%	78%	82%	83%	
NOT ANSWERED	17	327		1	2	2	2	2	6					2		9	5	5	3	7	
VALID CASES	248	4755	22	30	45	49	80	13	185					19	24	214	167	72	88	154	
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT OT1	BANT OT2	AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER					
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-##	AS-IAN##	NATV ILND#	AMER IND/ALSK##	OTHR##	MULTI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	MALE	FEMALE	
Q35G ALWAYS	3 1%	55 1%	~	~	~	2%	1%	~	2 1%	~	~	~	~	~	5%	~	3 1%	~	2 3%	1 1%	2 1%
USUALLY	3 1%	67 1%	~	3%	~	~	1%	~	3 2%	~	~	~	~	~	~	~	2 ~0.9%	2 1%	1 1%	1 1%	2 1%
SOMETIMES	24 10%	487 10%	14%	10%	16%	8%	8%	~	14 8%	~	~	~	~	~	26%	8%	21 10%	10 6%*	12 16%*	2 2%*	21 14%*
NEVER	217 88%	4149 87%	86%	87%	84%	90%	90%	100%	165 90%	~	~	~	~	~	68%	92%	187 88%	154 93%*	59 80%*	84 95%*	129 84%*
#NEVER + SOMETIMES (NET)	241 98%	4636 97%	100%	97%	100%	98%	98%	100%	179 97%	~	~	~	~	~	95%	100%	208 98%	164 99%	71 96%	86 98%	150 97%
TOP BOX SCORE	217 88%	4149 87%	86%	87%	84%	90%	90%	100%	165 90%	~	~	~	~	~	68%	92%	187 88%	154 93%*	59 80%*	84 95%*	129 84%*
NOT ANSWERED	18	324	~	1	2	2	2	3	7	~	~	~	~	~	2	~	10	6	3	3	7
VALID CASES	247	4758	22	30	45	49	80	12	184	~	~	~	~	~	19	24	213	166	74	88	154
NUMBER OF RESPONDENTS	265 100%	5082 100%	22 100%	31 100%	47 100%	51 100%	82 100%	15 100%	191 100%	~	~	~	~	~	21 100%	24 100%	223 100%	172 100%	77 100%	91 100%	161 100%

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH		GENDER	
	OT1	OT2													ITY	STATUS					
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY						
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE	
Q35H																					
#YES DEFINITELY	175	3305	18	19	27	43	56	11	136					9	17	154	126	47	62	113	
	71%	70%	82%~	63%~	60%~	86%*	70%	85%~	74%	~	~	~	~	~ 45%~	71%~	72%~	76%*	64%	70%	73%	
YES SOMEWHAT	57	1110	4	10	16	5	17	2	38					9	6	48	33	22	22	33	
	23%	24%	18%~	33%~	36%~	10%*	21%	15%~	21%	~	~	~	~	~ 45%~	25%~	22%~	20%	30%	25%	21%	
NO	14	300		1	2	2	7		11					2	1	13	7	5	5	9	
	6%	6%	~	3%~	4%~	4%	9%	~	6%	~	~	~	~	~ 10%~	4%~	6%~	4%	7%	6%	6%	
NOT ANSWERED	19	367		1	2	1	2	2	6					1		8	6	3	2	6	
VALID CASES	246	4715																			
NUMBER OF RESPONDENTS	265	5082	22	30	45	50	80	13	185					20	24	215	166	74	89	155	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER				
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL-TI TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE-MALE
Q35I YES	148 59%	2797 58%	11 52%~	23 74%~	28 61%~	31 62%	47 58%	6 46%~	115 62%	~	~	~	~	8 ~ 38%~	17 71%~	127 59%~	104 62%	41 55%	40 44%*	107 69%*		
NO	101 41%	1986 42%	10 48%~	8 26%~	18 39%~	19 38%	34 42%	7 54%~	71 38%	~	~	~	~	13 ~ 62%~	7 29%~	90 41%~	64 38%	34 45%	50 56%*	49 31%*		
NOT ANSWERED	16	299	1		1	1	1	2	5							6	4	2	1	5		
VALID CASES	249	4783	21	31	46	50	81	13	186					21	24	217	168	75	90	156		
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%		

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

	BANT	BANT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER						
	OT1	OT2																									
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER								EX &								
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/							NOT	VERY								
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK						HIS-	HIS-	GOOD	FAIR						
									AMER	IAN	ILND	NATV	OTHR	MUL-	TI		IC	IC	&	&	GOOD	POOR			FE-	MALE	
Q35J																											
YES	100	1919	8	15	17	26	27	6	76						6	10	87	68	29	26	74						
	40%	40%	36%~	48%~	36%~	51%	34%	40%~	40%	~	~	~	~	~	30%~	42%~	40%~	40%	39%	29%*	47%*						
NO	151	2885	14	16	30	25	53	9	113						14	14	133	104	45	64	84						
	60%	60%	64%~	52%~	64%~	49%	66%	60%~	60%	~	~	~	~	~	70%~	58%~	60%~	60%	61%	71%*	53%*						
NOT ANSWERED	14	278						2	2						1		3		3	1	3						
VALID CASES	251	4804	22	31	47	51	80	15	189						20	24	220	172	74	90	158						
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191						21	24	223	172	77	91	161						
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%						

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	PSCS TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ILND #	AMER IND/PAC ALSK #	OTHR ##	MULTI TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q35K NEVER		402	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	88%	1508%	25%~	427%~	28%~	~	~	68%~	~	~	~	~	~	20%~	67%~	711%~	14%~	29%~	68%~	
USUALLY	1415%	35619%	113%~	213%~	320%~	415%~	416%~	811%~	~	~	~	~	~	33%~	330%~	1113%~	58%~	831%~	14%~	1318%~
ALWAYS	7377%	131071%	563%~	1387%~	853%~	2077%~	2184%~	5100%~	5780%~	~	~	~	~	67%~	450%~	565%~	6579%~	1782%~	2065%~	5374%~
#ALWAYS + USUALLY (NET)	8792%	166690%	675%~	15100%~	1173%~	2492%~	25100%~	5100%~	6592%~	~	~	~	~	100%~	680%~	893%~	5989%~	2596%~	2191%~	6692%~
TOP BOX SCORE	7377%	131071%	563%~	1387%~	853%~	2077%~	2184%~	5100%~	5780%~	~	~	~	~	67%~	450%~	565%~	6579%~	1782%~	2065%~	5374%~
NOT ANSWERED	5	63			2		2	1	5							5	2	3	3	2
VALID CASES	95	1856	8	15	15	26	25	5	71					6	10	82	66	26	23	72
NUMBER OF RESPONDENTS	100	1919	8	15	17	26	27	6	76					6	10	87	68	29	26	74
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR AMER ##	ASIAN ##	NATV ILND #	AMER HAW/ IND/ PAC ALSK ##	OTHR ##	MULTI TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE
Q35L ALWAYS	15 16%	423 22%	2 22%	2 20%	3 13%	3 14%	4 21%	1 20%	11 19%	~	~	~	~	~	3 27%	12 15%	9 16%	6 18%	2 7%	13 22%
USUALLY	12 13%	375 20%	2 22%	1 10%	1 4%	5 23%	2 11%	1 20%	6 10%	~	~	~	~	2 14%	4 36%	8 10%	8 14%	4 12%	5 17%	7 12%
SOMETIMES	24 26%	377 20%	4 44%	2 20%	9 39%	2 9%	5 26%	2 40%	16 27%	~	~	~	~	5 36%	2 18%	22 28%	15 26%	8 24%	7 23%	16 27%
NEVER	41 45%	744 39%	1 11%	5 50%	10 43%	12 55%	8 42%	1 20%	26 44%	~	~	~	~	7 50%	2 18%	36 46%	25 44%	15 45%	16 53%	24 40%
#NEVER + SOMETIMES (NET)	65 71%	1121 58%*	5 56%	7 70%	19 83%	14 64%	13 68%	3 60%	42 71%	~	~	~	~	12 86%	4 36%	58 74%	40 70%	23 70%	23 77%	40 67%
TOP BOX SCORE	41 45%	744 39%	1 11%	5 50%	10 43%	12 55%	8 42%	1 20%	26 44%	~	~	~	~	7 50%	2 18%	36 46%	25 44%	15 45%	16 53%	24 40%
5	151	2747	13	21	22	28	57	9	124					6	12	136	106	42	59	91
NOT ANSWERED	22	416			2	1	6	1	8					1	1	9	9	2	2	10
VALID CASES	92	1919	9	10	23	22	19	5	59					14	11	78	57	33	30	60
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q35M NEVER	35 38%	695 36%	2 29%~	4 29%~	9 50%~	10 37%~	6 33%~	1 25%~	22 35%~	~	~	~	~	~	7 50%~	1 14%~	31 38%~	22 39%~	13 39%~	11 41%~	22 35%~
SOMETIMES	22 24%	351 18%	2 29%~	6 43%~	3 17%~	7 26%~	3 17%~	~	16 25%~	~	~	~	~	~	4 29%~	2 29%~	19 23%~	11 19%~	10 30%~	5 19%~	16 26%~
USUALLY	14 15%	351 18%	~	1 7%~	4 22%~	4 15%~	4 22%~	1 25%~	12 19%~	~	~	~	~	~	1 7%~	~	14 17%~	9 16%~	4 12%~	4 15%~	10 16%~
ALWAYS	21 23%	514 27%	3 43%~	3 21%~	2 11%~	6 22%~	5 28%~	2 50%~	13 21%~	~	~	~	~	~	2 14%~	4 57%~	17 21%~	15 26%~	6 18%~	7 26%~	14 23%~
#ALWAYS + USUALLY (NET)	35 38%	865 45%	3 43%~	4 29%~	6 33%~	10 37%~	9 50%~	3 75%~	25 40%~	~	~	~	~	~	3 21%~	4 57%~	31 38%~	24 42%~	10 30%~	11 41%~	24 39%~
TOP BOX SCORE	21 23%	514 27%	3 43%~	3 21%~	2 11%~	6 22%~	5 28%~	2 50%~	13 21%~	~	~	~	~	~	2 14%~	4 57%~	17 21%~	15 26%~	6 18%~	7 26%~	14 23%~
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	150	2765	14	16	28	22	59	11	122						6	14	135	106	41	61	89
NOT ANSWERED	23	406	1	1	1	2	5		6						1	3	7	9	3	3	10
VALID CASES	92	1911	7	14	18	27	18	4	63						14	7	81	57	33	27	62
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191						21	24	223	172	77	91	161
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER					
	PSCS TOT ADLDT	OHP TOT ADLDT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR- ##	AS- IAN ##	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE- MALE
Q35N EXTREMELY DIFFICULT	17 7%	281 6%	1 5%~	1 3%~	3 8%~	2 4%~	5 7%	2 18%~	12 7%	~	~	~	~	~	1 6%~	1 6%~	15 8%~	12 8%	5 8%	7 9%	9 6%		
01	2 0.9%	112 3%*	~	~	~	2%~	1%~	~	2 1%~	~	~	~	~	~	~	~	2 1%~	~	1 2%	1 1%	1 0.7%		
02	13 6%	129 3%	~	3%~	6 15%~	3 7%~	2 3%	~	9 5%	~	~	~	~	~	3 19%~	~	12 6%~	9 6%	4 7%	3 4%	10 7%		
03	10 4%	164 4%	1 5%~	2 7%~	2 5%~	~	5 7%	~	7 4%	~	~	~	~	~	2 13%~	1 6%~	9 5%~	6 4%	3 5%	3 4%	7 5%		
04	4 2%	138 3%	~	3 10%~	~	1 2%~	~	~	3 2%	~	~	~	~	~	1 6%~	~	4 2%~	4 3%*	~	3 4%	1 0.7%		
05	21 9%	547 12%	5 26%~	3 10%~	5 13%~	2 4%~	4 6%	1 9%~	16 10%	~	~	~	~	~	2 13%~	2 11%~	18 9%~	12 8%	8 13%	10 14%	11 8%		
06	15 7%	230 5%	2 11%~	2 7%~	2 5%~	5 11%~	4 6%	~	11 7%	~	~	~	~	~	2 13%~	1 6%~	13 7%~	10 7%	5 8%	8 11%	7 5%		
07	17 7%	375 8%	2 11%~	1 3%~	4 10%~	2 4%~	7 10%	1 9%~	13 8%	~	~	~	~	~	~	1 6%~	16 8%~	9 6%	6 10%	3 4%	14 10%*		
09	71 31%	1161 26%	5 26%~	6 20%~	10 26%~	18 40%~	17 25%	5 45%~	50 30%	~	~	~	~	~	3 19%~	5 28%~	56 29%~	47 31%	14 23%	16 22%*	44 31%		
EXTREMELY EASY	57 25%	1320 30%	3 16%~	11 37%~	7 18%~	11 24%~	23 34%	2 18%~	43 26%	~	~	~	~	~	2 13%~	7 39%~	48 25%~	43 28%	14 23%	20 27%	37 26%		
#8-10 (NET)	128 56%	2481 56%	8 42%~	17 57%~	17 44%~	29 64%~	40 59%	7 64%~	93 56%	~	~	~	~	~	5 31%~	12 67%~	104 54%~	90 59%	28 47%	36 49%	81 57%		
9-10 (NET)	128 56%	2481 56%	8 42%~	17 57%~	17 44%~	29 64%~	40 59%	7 64%~	93 56%	~	~	~	~	~	5 31%~	12 67%~	104 54%~	90 59%	28 47%	36 49%	81 57%		

Continued

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER				
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL-TI TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE-MALE
88		6																				
NOT ANSWERED	38	619	3	1	8	6	14	4	25					5	6	30	20	17			17	20
VALID CASES	227	4457	19	30	39	45	68	11	166					16	18	193	152	60			74	141
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77			91	161
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%			100%	100%
MEAN	7.04	7.14	6.79	7.27	6.23	7.49	7.29	7.00	7.05					5.31	7.83	6.91	7.16	6.60			6.64	7.14
p stat_(*=Sig @ p<=.05)		.621	~	~	~	~	.427		~.920	~	~	~	~	~	~	~	~.413	.221			.192	.522

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

	BANT	BANT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE		
Q36																						
EXCELLENT	24 10%	447 9%	5 23%~	2 6%~	2 4%~	6 12%~	5 6%~	1 7%~	16 9%	~	~	~	~	~	~	4 17%~	19 9%~	24 14%*	~	8 9%	15 10%	
VERY GOOD	65 26%	1140 24%	6 27%~	16 52%~	13 28%~	9 18%~	18 23%	2 13%~	56 30%*	~	~	~	~	2 10%~	5 21%~	58 27%~	65 38%~	~	21 23%	44 28%		
GOOD	83 33%	1676 35%	4 18%~	8 26%~	18 39%~	19 39%~	27 34%	7 47%~	63 34%	~	~	~	~	6 30%~	6 25%~	75 35%~	83 48%~	~	36 40%	47 30%		
FAIR	50 20%	1110 23%	7 32%~	4 13%~	5 11%~	10 20%~	21 26%	2 13%~	35 19%	~	~	~	~	6 30%~	7 29%~	42 19%~	~	50 65%~	19 21%	29 19%		
POOR	27 11%	395 8%	~	1 3%~	8 17%~	5 10%~	9 11%	3 20%~	17 9%	~	~	~	~	6 30%~	2 8%~	23 11%~	~	27 35%*	7 8%	20 13%		
#EXCELLENT + VERY GOOD + GOOD (NET)	172 69%	3263 68%	15 68%~	26 84%~	33 72%~	34 69%~	50 63%	10 67%~	135 72%	~	~	~	~	8 40%~	15 63%~	152 70%~	172 100%~	~	65 71%	106 68%		
NOT ANSWERED	16	314			1	2	2		4					1		6				6		
VALID CASES	249	4768	22	31	46	49	80	15	187					20	24	217	172	77	91	155		
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%		

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

	BANT	BANT	AGE						RACE						ETHNICITY			HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ILND #	AMER IND/PAC ALSK ##	OTHR ##	MULTI TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	MALE	FE-MALE	
Q37																					
EXCELLENT	51 20%	870 18%	5 23%	4 13%	7 15%	14 28%	13 16%	6 40%	37 19%	~	~	~	~	~	1 6%	6 25%	45 21%	44 26%*	6 8%*	20 22%	31 20%
VERY GOOD	62 25%	1189 25%	7 32%	11 37%	13 28%	8 16%	21 26%	2 13%	53 28%*	~	~	~	~	~	1 6%	6 25%	55 25%	54 32%*	8 11%*	21 23%	41 26%
GOOD	78 31%	1480 31%	8 36%	8 27%	15 33%	15 30%	27 33%	3 20%	56 29%	~	~	~	~	~	7 39%	10 42%	64 29%	53 31%	24 32%	27 30%	50 32%
FAIR	41 16%	937 20%	1 5%	6 20%	8 17%	8 16%	13 16%	3 20%	31 16%	~	~	~	~	~	5 28%	1 4%	37 17%	19 11%*	22 29%*	19 21%	20 13%
POOR	18 7%	296 6%	1 5%	1 3%	3 7%	5 10%	7 9%	1 7%	13 7%	~	~	~	~	~	4 22%	1 4%	17 8%	1 0.6%*	15 20%*	3 3%*	15 10%*
#EXCELLENT + VERY GOOD + GOOD (NET)	191 76%	3539 74%	20 91%	23 77%	35 76%	37 74%	61 75%	11 73%	146 77%	~	~	~	~	~	9 50%	22 92%	164 75%	151 88%*	38 51%*	68 76%	122 78%
NOT ANSWERED	15	310		1	1	1	1		1					3		5	1	2	1	4	
VALID CASES	250	4772	22	30	46	50	81	15	190					18	24	218	171	75	90	157	
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC/ALSK	OTHR	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE-MALE	MALE
Q38 #YES	99 40%	1705 36%	6 32%~	6 19%~	16 34%~	20 39%	39 49%*	8 53%~	71 37%	~	~	~	~	10 50%~	9 45%~	85 38%~	59 35%*	37 49%*	32 36%	66 42%
NO	150 60%	2994 64%	13 68%~	25 81%~	31 66%~	31 61%	41 51%*	7 47%~	119 63%	~	~	~	~	10 50%~	11 55%~	136 62%~	110 65%*	38 51%*	58 64%	90 58%
DON'T KNOW	3	99	1				2		1						2	1	1	2	1	2
NOT ANSWERED	13	284	2											1	2	1	2			3
VALID CASES	249	4699	19	31	47	51	80	15	190					20	20	221	169	75	90	156
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	VERY	GOOD	FAIR			
	ADLT	ADLT	TO	TO	TO	TO	TO	OVER	AFR-	IAN	PAC	ALSK			PAN-	&	POOR	&	FE-		
			24	34	44	54	64		WHTE	##	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q39																					
EVERY DAY	54	949	3	6	12	15	13	2	42					9	2	50	32	20	21	32	
	22%	20%	14%~	19%~	26%~	29%	16%	13%~	22%	~	~	~	~	~	45%~	8%~	23%~	19%	27%	24%	20%
SOME DAYS	19	436	3	4	4	4	3	1	16						1	18	13	6	8	11	
	8%	9%	14%~	13%~	9%~	8%	4%	7%~	8%	~	~	~	~	~	4%~	8%~	8%	8%	9%	7%	
NOT AT ALL	178	3380	16	21	30	32	64	12	131					11	21	151	126	49	59	117	
	71%	71%	73%~	68%~	65%~	63%	80%*	80%~	69%	~	~	~	~	~	55%~	88%~	69%~	74%	65%	67%	73%
DON'T KNOW	3	34			1		2		2							3	1	2	3		
NOT ANSWERED	11	283												1		1				1	
VALID CASES	251	4765	22	31	46	51	80	15	189					20	24	219	171	75	88	160	
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR AMER	ASIAN	NATV ILND	AMER HAW/ PAC	IND/ ALSK	OTHR	MULTI	HIS-IC	NOT HIS-IC	EX & VERY GOOD & FAIR	POOR	MALE	FEMALE
Q40 NEVER	19 26%	367 27%	3 50%~	3 30%~	5 31%~	2 11%~	4 25%~	16 28%~	~	~	~	~	~	~	1 11%~	17 33%~	12 27%~	7 27%~	11 38%~	8 19%~	
SOMETIMES	23 32%	331 24%	1 17%~	5 50%~	4 25%~	5 26%~	7 44%~	1 33%~	15 26%~	~	~	~	~	~	6 67%~	22 33%~	17 38%~	6 23%~	8 28%~	15 35%~	
USUALLY	13 18%	212 16%	~	~	3 19%~	7 37%~	1 6%~	1 33%~	11 19%~	~	~	~	~	~	1 11%~	12 18%~	7 16%~	6 23%~	4 14%~	8 19%~	
ALWAYS	18 25%	455 33%	2 33%~	2 20%~	4 25%~	5 26%~	4 25%~	1 33%~	16 28%~	~	~	~	~	~	1 11%~	17 33%~	9 20%~	7 27%~	6 21%~	12 28%~	
#ALWAYS + USUALLY (NET)	31 42%	667 49%	2 33%~	2 20%~	7 44%~	12 63%~	5 31%~	2 67%~	27 47%~	~	~	~	~	~	2 22%~	29 43%~	16 36%~	13 50%~	10 34%~	20 47%~	
TOP BOX SCORE	18 25%	455 33%	2 33%~	2 20%~	4 25%~	5 26%~	4 25%~	1 33%~	16 28%~	~	~	~	~	~	1 11%~	17 33%~	9 20%~	7 27%~	6 21%~	12 28%~	
NOT ANSWERED		20																			
VALID CASES	73	1365	6	10	16	19	16	3	58						9	3	68	45	26	29	43
NUMBER OF RESPONDENTS	73	1385	6	10	16	19	16	3	58						9	3	68	45	26	29	43
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	BANT	BANT	AGE						RACE						ETHNICITY			HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	MALE	FE- MALE	
Q41 NEVER	36 50%	687 50%	4 67%	7 70%	7 44%	9 47%	7 47%	30 52%	~	~	~	~	~	3 38%	2 67%	33 49%	26 58%	10 40%	17 59%	19 45%	
SOMETIMES	19 26%	305 22%	1 17%	1 10%	5 31%	6 32%	5 33%	13 22%	~	~	~	~	~	4 50%	1 33%	17 25%	10 22%	9 36%	6 21%	12 29%	
USUALLY	8 11%	152 11%	~	~	3 19%	2 11%	2 13%	1 33%	6 10%	~	~	~	~	1 13%	~	8 12%	4 9%	4 16%	5 17%	3 7%	
ALWAYS	9 13%	223 16%	1 17%	2 20%	1 6%	2 11%	1 7%	2 67%	9 16%	~	~	~	~	~	~	9 13%	5 11%	2 8%	1 3%	8 19%	
#ALWAYS + USUALLY (NET)	17 24%	375 27%	1 17%	2 20%	4 25%	4 21%	3 20%	3 100%	15 26%	~	~	~	~	1 13%	~	17 25%	9 20%	6 24%	6 21%	11 26%	
TOP BOX SCORE	9 13%	223 16%	1 17%	2 20%	1 6%	2 11%	1 7%	2 67%	9 16%	~	~	~	~	~	~	9 13%	5 11%	2 8%	1 3%	8 19%	
NOT ANSWERED	1	18					1						1		1		1			1	
VALID CASES	72	1367	6	10	16	19	15	3	58					8	3	67	45	25	29	42	
NUMBER OF RESPONDENTS	73	1385	6	10	16	19	16	3	58					9	3	68	45	26	29	43	
	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	BANT	AGE						RACE						ETHNIC-ITY		HEALTH STATUS		GENDER		
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AMER WHTE	AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ NATV ##	ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	FE-MALE
Q42 NEVER	42 60%	778 57%	4 67%	6 67%	10 67%	8 42%	12 80%	1 33%	34 59%	~	~	~	~	~	5 63%	1 100%	41 61%	27 63%	15 60%	19 66%	23 58%
SOMETIMES	14 20%	261 19%	1 17%	2 22%	3 20%	6 32%	1 7%	1 33%	11 19%	~	~	~	~	~	3 38%	~	14 21%	9 21%	5 20%	5 17%	9 23%
USUALLY	9 13%	141 10%	1 17%	~	1 7%	3 16%	1 7%	1 33%	8 14%	~	~	~	~	~	~	~	7 10%	5 12%	4 16%	5 17%	3 8%
ALWAYS	5 7%	175 13%	~	1 11%	1 7%	2 11%	1 7%	~	5 9%	~	~	~	~	~	~	~	5 7%	2 5%	1 4%	~	5 13%
#ALWAYS + USUALLY (NET)	14 20%	316 23%	1 17%	1 11%	2 13%	5 26%	2 13%	1 33%	13 22%	~	~	~	~	~	~	~	12 18%	7 16%	5 20%	5 17%	8 20%
TOP BOX SCORE	5 7%	175 13%	~	1 11%	1 7%	2 11%	1 7%	~	5 9%	~	~	~	~	~	~	~	5 7%	2 5%	1 4%	~	5 13%
NOT ANSWERED	3	30	~	1	1	~	1	~	~	~	~	~	~	~	1	2	1	2	1	~	3
VALID CASES	70	1355	6	9	15	19	15	3	58	~	~	~	~	~	8	1	67	43	25	29	40
NUMBER OF RESPONDENTS	73	1385	6	10	16	19	16	3	58	~	~	~	~	~	9	3	68	45	26	29	43
	100%	100%	100%	100%	100%	100%	100%	100%	100%	~	~	~	~	~	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

Q43 DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?

	BANT	BANT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/ALSK	OTHR	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD &	FAIR & POOR	FE-MALE	MALE		
Q43																						
YES	56 23%	997 21%	18 ~	25 10%	35 13%	45 26%	55 32%*	65 40%	44 24%	~	~	~	~	~	20%	4 17%	50 23%	34 20%	21 28%	26 29%	30 19%	
NO	191 77%	3756 79%	22 100%	27 90%	39 87%	37 74%	55 68%*	9 60%	143 76%	~	~	~	~	~	80%	16 83%	19 77%	168 80%	53 72%	64 71%	126 81%	
DON'T KNOW	4	42			2		1		3								3	3	1		3	
NOT ANSWERED	14	287		1		1			1					1	1	2	1	2	1	2	1	2
VALID CASES	247	4753	22	30	45	50	81	15	187					20	23	218	168	74	90	156		
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%		

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER				
	OT1	OT2	18	25	35	45	55	65	BLCK	NATV	AMER	AFR-	AS-	HAW/	IND/	NOT	EX &	GOOD	FAIR	FE-	
	PSCS	OHP	TO	TO	TO	TO	TO	AND	OR	ILND	PAC	ALSK	OTHR	MUL-	HIS-	HIS-	VERY	&	&	MALE	MALE
	TOT	TOT	ADLT	ADLT	ADLT	ADLT	ADLT	ADLT	AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE	
Q44																					
YES	17	448		1	4	2	7	2	11					4	14	7	10	3	13		
	7%	10%		~ 3%	~ 9%	~ 4%	~ 9%	~ 13%	6%	~	~	~	~	~ 20%	~ 7%	4%*	15%*	3%*	9%		
NO	217	3956	21	29	39	45	68	13	165					16	21	193	157	56	86	131	
	93%	90%	100%	~ 97%	~ 91%	~ 96%	~ 91%	~ 87%	94%	~	~	~	~	~ 80%	~ 100%	~ 93%	~ 96%*	~ 85%*	~ 97%*	~ 91%	
DON'T KNOW	18	377	1	1	4	4	7		15						3	15	7	10	2	16	
NOT ANSWERED	13	301												1	1	1	1			1	
VALID CASES	234	4404	21	30	43	47	75	15	176					20	21	207	164	66	89	144	
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									AMER					TI	IC	IC	&	&	FE-	
									WHTE	##	##	#	##	##			GOOD	POOR	MALE	
																			MALE	
Q45																				
YES	86	1716	5	3	13	16	38	10	64					7	7	77	51	32	36	50
	34%	36%	23%~	10%~	28%~	31%	46%*	71%~	34%	~	~	~	~	~ 35%~	29%~	35%~	30%*	43%	40%	31%
NO	165	3045	17	28	34	35	44	4	126					13	17	144	120	43	55	109
	66%	64%	77%~	90%~	72%~	69%	54%*	29%~	66%	~	~	~	~	~ 65%~	71%~	65%~	70%*	57%	60%	69%
NOT ANSWERED	14	321						1	1					1	2	1	2			2
VALID CASES	251	4761	22	31	47	51	82	14	190					20	24	221	171	75	91	159
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161
	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	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			PAN-	PAN-	&	&	FE-		
									WHTE	##	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q46.1																					
YES	59	1102			7	18	26	5	42					7	5	50	36	20	21	38	
	22%	22%		~	~	15%~	35%*	32%*	33%~	22%	~	~	~	~	33%~	21%~	22%~	21%	26%	23%	24%
NO	206	3980	22	31	40	33	56	10	149					14	19	173	136	57	70	123	
	78%	78%	100%~	100%~	85%~	65%*	68%*	67%~	78%	~	~	~	~	67%~	79%~	78%~	79%	74%	77%	76%	
VALID CASES	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161	
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2																			
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				HIS-	HIS-	VERY	FAIR			
	ADLT	ADLT	TO	TO	TO	TO	TO	OVER	AFR-	IAN	PAC	ALSK			PAN-	PAN-	GOOD	&	POOR		
			24	34	44	54	64	OVER	WHTE	##	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q46.2																					
YES	73	1444		2	13	12	35	9	52					7	7	64	37	33	26	47	
	28%	28%		~	6%~	28%~	24%	43%*	60%~	27%	~	~	~	~	33%~	29%~	29%~	22%*	43%*	29%	29%
NO	192	3638	22	29	34	39	47	6	139					14	17	159	135	44	65	114	
	72%	72%	100%~	94%~	72%~	76%	57%*	40%~	73%	~	~	~	~	67%~	71%~	71%~	78%*	57%*	71%	71%	
VALID CASES	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161	
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161	
	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	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-##	AS- IAN ##	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q46.3 YES	36 14%	826 16%	2 9%~	2 6%~	3 6%~	12 24%	14 17%	3 20%~	25 13%	~	~	~	~	~	4 19%~	5 21%~	31 14%~	22 13%	13 17%	13 14%	23 14%
NO	229 86%	4256 84%	20 91%~	29 94%~	44 94%~	39 76%	68 83%	12 80%~	166 87%	~	~	~	~	~	17 81%~	19 79%~	192 86%~	150 87%	64 83%	78 86%	138 86%
VALID CASES	265	5082	22	31	47	51	82	15	191						21	24	223	172	77	91	161
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191						21	24	223	172	77	91	161
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2																			
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			PAN-	PAN-	&	&			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	FE-	
									WHTE	##	##	#	##	##	TI					MALE	MALE
Q47.1																					
YES	8	211			2	1	3	2	5					1	1	6	4	4	6	2	
	3%	4%	~	~	4%~	2%	4%	13%~	3%	~	~	~	~	~	5%~	4%~	3%~	2%	5%	7%*	1%
NO	257	4871	22	31	45	50	79	13	186					20	23	217	168	73	85	159	
	97%	96%	100%~	100%~	96%~	98%	96%	87%~	97%	~	~	~	~	~	95%~	96%~	97%~	98%	95%	93%*	99%
VALID CASES	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161	
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161	
	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	BANT	AGE							RACE							ETHNIC-	HEALTH		GENDER	
	OT1	OT2																			
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			PAN-	PAN-	&	&			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	FE-	
									WHTE	##	##	#	##	##	TI						
Q47.2																					
YES	11	212			1	1	8	1	5						3	7	4	7	5	6	
	4%	4%	~	~	2%~	2%	10%*	7%~	3%	~	~	~	~	~	13%~	3%~	2%	9%*	5%	4%	
NO	254	4870	22	31	46	50	74	14	186					21	21	216	168	70	86	155	
	96%	96%	100%~	100%~	98%~	98%	90%*	93%~	97%	~	~	~	~	~100%~	88%~	97%~	98%	91%*	95%	96%	
VALID CASES	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161	
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									WHTE	##	##	#	##	##	TI	IC	IC	&	&	
																	GOOD	POOR	MALE	
																	POOR		MALE	
Q47.3																				
YES	10	195			1	2	6		6					2	8	4	6	3	7	
	4%	4%	~	~	2%	4%	7%	~	3%	~	~	~	~	10%	~	4%	2%	8%	3%	4%
NO	255	4887	22	31	46	49	76	15	185					19	24	215	168	71	88	154
	96%	96%	100%	100%	98%	96%	93%	100%	97%	~	~	~	~	90%	100%	96%	98%	92%	97%	96%
VALID CASES	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER			
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q47.4 YES	36 14%	916 18%*	~	~	4 9%~	7 14%	20 24%*	3 20%~	25 13%	~	~	~	~	~	5 24%~	1 4%~	31 14%~	17 10%*	18 23%*	9 10%	27 17%*
NO	229 86%	4166 82%*	100%~	100%~	22 91%~	31 86%	43 76%*	44 80%~	62 87%	12 ~	16 ~	16 ~	16 ~	16 ~	16 76%~	23 96%~	192 86%~	155 90%*	59 77%*	82 90%	134 83%*
VALID CASES	265	5082	22	31	47	51	82	15	191						21	24	223	172	77	91	161
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191						21	24	223	172	77	91	161
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH	GENDER	
	OT1	OT2													ITY	STATUS				
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&	FE-	
									WHTE	##	##	#	##	##	TI	GOOD	POOR	MALE	MALE	
Q48																				
YES	78	1408	4	5	18	20	24	6	56					10	6	69	39	36	19	59
	31%	30%	18%~	17%~	38%~	39%	30%	40%~	30%	~	~	~	~	~ 50%~	25%~	32%~	23%*	48%*	21%*	37%*
NO	171	3330	18	25	29	31	56	9	133					10	18	150	130	39	71	99
	69%	70%	82%~	83%~	62%~	61%	70%	60%~	70%	~	~	~	~	~ 50%~	75%~	68%~	77%*	52%*	79%*	63%*
NOT ANSWERED	16	344		1			2		2					1	4	3	2		1	3
VALID CASES	249	4738	22	30	47	51	80	15	189					20	24	219	169	75	90	158
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/			HIS-	HIS-	VERY	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									AMER					TI			GOOD	POOR	MALE	MALE
Q49																				
YES	73	1187	4	2	18	19	24	5	52					9	6	64	36	34	17	56
	95%	88%*	100%~	40%~	100%~	95%~	100%~	100%~	95%~	~	~	~	~	~ 90%	100%~	94%~	92%~	97%~	94%~	95%~
NO	4	167		3		1			3					1		4	3	1	1	3
	5%	12%*	~	60%~	~	5%~	~	~	5%~	~	~	~	~	10%~	~	6%~	8%~	3%~	6%~	5%~
NOT ANSWERED	1	54						1	1							1		1	1	
VALID CASES	77	1354	4	5	18	20	24	5	55					10	6	68	39	35	18	59
NUMBER OF RESPONDENTS	78	1408	4	5	18	20	24	6	56					10	6	69	39	36	19	59
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q48 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/		HIS-	HIS-	VERY	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									AMER					TI	IC	IC	GOOD	POOR	MALE	MALE
Q50																				
YES	157 63%	2988 63%	5 23%~	12 39%~	29 62%~	34 67%	62 77%*	13 87%~	120 63%	~	~	~	~	14 70%~	11 46%~	141 64%~	94 55%*	59 79%*	54 60%	103 64%
NO	94 37%	1758 37%	17 77%~	19 61%~	18 38%~	17 33%	19 23%*	2 13%~	70 37%	~	~	~	~	6 30%~	13 54%~	80 36%~	77 45%*	16 21%*	36 40%	57 36%
NOT ANSWERED	14	336					1		1					1	2	1	2		1	1
VALID CASES	251	4746	22	31	47	51	81	15	190					20	24	221	171	75	90	160
NUMBER OF RESPONDENTS	265 100%	5082 100%	22 100%	31 100%	47 100%	51 100%	82 100%	15 100%	191 100%					21 100%	24 100%	223 100%	172 100%	77 100%	91 100%	161 100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	NOT	GOOD	FAIR	
									WHTE	##	##	#	##	##	TI	IC	IC	&	&	
																		GOOD	POOR	
																		MALE	MALE	
Q51																				
YES	148	2723	5	9	28	34	59	11	113					13	11	133	88	56	52	96
	96%	95%	100%~	75%~	97%~	100%~	97%	100%~	96%~	~	~	~	~	~100%	~100%	96%~	95%	98%	98%	95%
NO	6	155		3	1		2		5							5	5	1	1	5
	4%	5%	~	25%~	3%~	~	3%	~	4%~	~	~	~	~	~	~	4%~	5%	2%	2%	5%
NOT ANSWERED	3	110					1	2	2					1		3	1	2	1	2
VALID CASES	154	2878	5	12	29	34	61	11	118					13	11	138	93	57	53	101
NUMBER OF RESPONDENTS	157	2988	5	12	29	34	62	13	120					14	11	141	94	59	54	103
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q50 = YES]

NQ52 WHAT IS YOUR AGE?

	BANT	BANT	AGE							RACE							ETHNICITY			HEALTH STATUS		GENDER	
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	WHITE	BLK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE-MALE		
NQ52																							
18 TO 24	24	485	22					15						1	6	16	15	7	8	14			
	9%	10%	100%~	~	~	~	~	8%	~	~	~	~	~	5%~	25%~	7%~	9%	9%	9%	9%			
25 TO 34	34	853		31				27						1	2	30	27	5	7	24			
	13%	17%*	~100%~	~	~	~	~	14%	~	~	~	~	~	5%~	8%~	13%~	16%*	6%*	8%*	15%			
35 TO 44	50	805			47			33						10	2	43	33	13	19	28			
	19%	16%	~	~100%~	~	~	~	17%	~	~	~	~	~	48%~	8%~	19%~	19%	17%	21%	17%			
45 TO 54	53	1048				51		40						4	4	48	34	15	17	35			
	20%	21%	~	~	~100%~	~	~	21%	~	~	~	~	~	19%~	17%~	22%~	20%	19%	19%	22%			
55 TO 64	86	1437					82	61						5	9	71	51	32	33	50			
	32%	28%	~	~	~	~100%~	~	32%	~	~	~	~	~	24%~	38%~	32%~	30%	42%	36%	31%			
65 TO 74	13	302					10	10							1	10	10	2	7	5			
	5%	6%	~	~	~	~	~67%~	5%	~	~	~	~	~	~	4%~	4%~	6%	3%	8%	3%			
75 OR OLDER	5	152					5	5								5	2	3		5			
	2%	3%	~	~	~	~	~33%~	3%*	~	~	~	~	~	~	~	2%~	1%	4%	~	3%~			
VALID CASES	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161			
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161			
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%			

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

NQ53 ARE YOU MALE OR FEMALE?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									##	##	#	##	##	TI	IC	IC	&			
									WHTE								&			
																	POOR			
																	MALE			
																	MALE			
NQ53																				
MALE	93	2039	8	6	19	17	33	6	66					9	10	79	65	26	91	
	35%	40%	36%~	19%~	40%~	33%	40%	40%~	35%	~	~	~	~	~	43%~	42%~	35%~	38%	34%	100%~
FEMALE	172	3043	14	25	28	34	49	9	125					12	14	144	107	51	161	
	65%	60%	64%~	81%~	60%~	67%	60%	60%~	65%	~	~	~	~	~	57%~	58%~	65%~	62%	66%	~100%~
VALID CASES	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2	18	25	35	45	55	65	BLCK	AS-	NATV	AMER									
	PSCS	OHP	TO	TO	TO	TO	TO	AND	OR	AFR-	AS-	HAW/	IND/		NOT	EX &	VERY				
	TOT	TOT	24	34	44	54	64	OVER	AMER	IAN	ILND	NATV	ALSK	MUL-	HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT							##	##	#	##	##	TI	IC	IC	&	&	FE-		
																GOOD	POOR	MALE	MALE		
Q54																					
8TH GRADE OR LESS	15 6%	267 6%		1 3%		5 10%	7 9%	1 7%	4 2%*	~	~	~	~	~	9 39%	5 2%	8 5%	7 9%	6 7%	9 6%	
SOME HIGH SCHOOL BUT DID NOT GRADUATE	30 12%	599 13%	6 27%	4 13%	5 11%	1 2%*	13 16%	1 7%	19 10%	~	~	~	~	~	4 19%	3 13%	27 12%	17 10%	13 18%	14 16%	16 10%
HIGH SCHOOL GRADUATE OR GED	82 33%	1663 35%	6 27%	10 32%	15 32%	24 47%*	23 29%	3 20%	64 34%	~	~	~	~	~	9 43%	6 26%	76 34%	55 32%	26 35%	28 31%	54 34%
SOME COLLEGE OR 2-YEAR DEGREE	91 36%	1668 35%	8 36%	11 35%	21 45%	14 27%	27 34%	9 60%	76 40%*	~	~	~	~	~	7 33%	4 17%	85 38%	62 36%	25 34%	32 36%	58 36%
4-YEAR COLLEGE GRADUATE	16 6%	348 7%	1 5%	3 10%	2 4%	3 6%	5 6%	1 7%	15 8%*	~	~	~	~	~	~	~	15 7%	1 9%*	3 1%*	13 3%	8 8%
MORE THAN 4-YEAR COLLEGE DEGREE	16 6%	201 4%	1 5%	2 6%	4 9%	4 8%	5 6%	~	13 7%	~	~	~	~	~	1 5%	1 4%	15 7%	13 8%	2 3%	7 8%	9 6%
NOT ANSWERED	15	336					2								1		2	3	1	2	
VALID CASES	250	4746	22	31	47	51	80	15	191					21	23	223	170	74	90	159	
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

Q55 ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH		GENDER	
	OT1	OT2														ITY	STATUS				
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&			
									WHTE	##	##	#	##	##	TI		GOOD	POOR	MALE	MALE	
Q55																					
YES HISPANIC OR LATINO	24	571	6	1	2	4	9	1							24	15	9	10	14		
	10%	12%	27%~	3%~	4%~	8%	11%	7%~	~	~	~	~	~	~	~100%~	~	9%	12%	11%	9%	
NO NOT HISPANIC OR LATINO	223	4145	16	30	43	47	71	14	189					20	223	152	65	79	143		
	90%	88%	73%~	97%~	96%~	92%	89%	93%~	~100%~	~	~	~	~	~100%~	~100%~	91%	88%	89%	91%		
NOT ANSWERED	18	366			2		2		2					1		5	3	2	4		
VALID CASES	247	4716	22	31	45	51	80	15	189					20	24	223	167	74	89	157	
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

Q56.1 WHAT IS YOUR RACE? RESPONSE: WHITE

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	&			
									WHTE	##	##	#	##	##	IC	IC	GOOD			
																	POOR			
																	MALE			
																	MALE			
Q56.1																				
YES	220	4120	17	29	44	45	69	13	191					21	8	209	150	65	79	140
	83%	81%	77%~	94%~	94%~	88%	84%	87%~	100%~	~	~	~	~	~100%~	33%~	94%~	87%*	84%	87%	87%*
NO	45	962	5	2	3	6	13	2							16	14	22	12	12	21
	17%	19%	23%~	6%~	6%~	12%	16%	13%~	~	~	~	~	~	~	67%~	6%~	13%*	16%	13%	13%*
VALID CASES	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	&			
									WHTE	##	##	#	##	##	IC	IC	GOOD			
																	POOR			
																	MALE			
																	MALE			
Q56.2																				
YES	3	85	1			1	1							2	3	2	1	2	1	
	1%	2%	5%	~	~	2%	1%	~	~	~	~	~	~	10%	~	1%	1%	2%	0.6%	
NO	262	4997	21	31	47	50	81	15	191					19	24	220	170	76	89	160
	99%	98%	95%	~100%	~100%	~98%	99%	100%	~100%	~	~	~	~	~90%	~100%	~99%	~99%	99%	98%	99%
VALID CASES	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

Q56.3 WHAT IS YOUR RACE? RESPONSE: ASIAN

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									WHTE	##	##	#	##	##	IC	IC	GOOD	POOR	MALE	MALE
Q56.3																				
YES	3	136		1	1		1							1	1	2	1		3	
	1%	3%		~ 3%	2%		~ 1%		~	~	~	~	~	5%	~0.4%	1%	1%		~ 2%	
NO	262	4946	22	30	46	51	81	15	191					20	24	222	170	76	91	158
	99%	97%	100%	97%	98%	100%	99%	100%	100%	~	~	~	~	95%	100%	100%	99%	99%	100%	98%
VALID CASES	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER	
	OT1	OT2												ITY	STATUS			
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER							
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	EX &			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD		
									AMER	IAN	ILND	NATV	OTHR	MUL-	PAN-	PAN-	&	
									WHTE	##	##	#	##	##	TI	IC	IC	&
																		FE-
																		MALE
																		MALE
Q56.4																		
YES	1	40			1									1	1			1
	0.4%	0.8%	~	~	2%	~	~	~	~	~	~	~	~	4%	~	~	0.6%	~
NO	264	5042	22	31	46	51	82	15	191					21	23	223	171	77
	100%	99%	100%	~100%	~98%	~100%	~100%	~100%	~100%	~	~	~	~	~100%	96%	~100%	99%	100%
VALID CASES	265	5082	22	31	47	51	82	15	191					21	24	223	172	77
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									##	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	
																			FE-	
																			MALE	
Q56.5																				
YES	23	313	1	2	7	4	8							16	2	20	11	11	8	15
	9%	6%	5%~	6%~	15%~	8%	10%		~	~	~	~	~	76%~	8%~	9%~	6%	14%	9%	9%
NO	242	4769	21	29	40	47	74	15	191					5	22	203	161	66	83	146
	91%	94%	95%~	94%~	85%~	92%	90%	100%~	100%~	~	~	~	~	24%~	92%~	91%~	94%	86%	91%	91%
VALID CASES	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

Q56.6 WHAT IS YOUR RACE? RESPONSE: OTHER

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2																			
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&			
									WHTE	##	##	#	##	##	TI		GOOD	POOR	MALE	FE-	
																				MALE	
Q56.6																					
YES	16	278	2		9	2	2	1						8	5	10	7	9	5	11	
	6%	5%	9%~		~ 19%~	4%	2%*	7%~	~	~	~	~	~	~ 38%~	21%~	4%~	4%	12%*	5%	7%	
NO	249	4804	20	31	38	49	80	14	191					13	19	213	165	68	86	150	
	94%	95%	91%~	100%~	81%~	96%	98%*	93%~	100%~	~	~	~	~	~ 62%~	79%~	96%~	96%	88%*	95%	93%	
VALID CASES	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161	
NUMBER OF RESPONDENTS	265	5082	22	31	47	51	82	15	191					21	24	223	172	77	91	161	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

Q57 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	&			
									WHTE	##	##	#	##	##	IC	IC	GOOD			
																	POOR			
																	MALE			
																	MALE			
Q57																				
YES	14	466			2	2	7	2	12						1	11	5	8	4	10
	7%	12%*		~	~	7%~	5%~	10%	8%~	~	~	~	~	~	7%~	6%~	4%*	15%*	6%	8%
NO	178	3267	14	24	26	37	63	10	146					7	14	162	128	45	63	114
	93%	88%*	100%~	100%~	93%~	95%~	90%	83%~	92%~	~	~	~	~	~100%~	93%~	94%~	96%*	85%*	94%	92%
NOT ANSWERED	3	46	1		1		1								1	1	2	1	2	1
VALID CASES	192	3733	14	24	28	39	70	12	158					7	15	173	133	53	67	124
NUMBER OF RESPONDENTS	195	3779	15	24	29	39	71	12	158					7	16	174	135	54	69	125
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS	MALE	MALE			
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	&			
									WHTE	##	##	#	##	##	IC	IC	GOOD			
																	POOR			
																	MALE			
																	MALE			
Q58.1																				
YES	9	238					7	1	7						1	7	3	6	4	5
	64%	51%	~	~	~		~100%	~50%	58%	~	~	~	~	~	~100%	~64%	~60%	~75%	~100%	~50%
NO	5	228			2	2		1	5							4	2	2		5
	36%	49%	~		~100%	~100%		~50%	42%	~	~	~	~	~	~	~36%	~40%	~25%		~50%
VALID CASES	14	466			2	2	7	2	12						1	11	5	8	4	10
NUMBER OF RESPONDENTS	14	466			2	2	7	2	12						1	11	5	8	4	10
	100%	100%			100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER									
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	EX &					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	##	##	#	##	##	TI	IC	IC	GOOD	POOR	
																		MALE	MALE	
Q58.2																				
YES	7	182					5	1	6						6	3	4	3	4	
	50%	39%	~	~	~	~	71%	50%	50%	~	~	~	~	~	~	55%	60%	50%	75%	40%
NO	7	284			2	2	2	1	6						1	5	2	4	1	6
	50%	61%	~	~	100%	100%	29%	50%	50%	~	~	~	~	~	100%	45%	40%	50%	25%	60%
VALID CASES	14	466			2	2	7	2	12						1	11	5	8	4	10
NUMBER OF RESPONDENTS	14	466			2	2	7	2	12						1	11	5	8	4	10
	100%	100%			100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE					RACE					ETHNIC-	HEALTH	GENDER					
	OT1	OT2										ITY	STATUS							
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER		NOT	EX &						
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/		VERY							
	ADLT	ADLT	TO	TO	TO	TO	TO	OVER	AFR-	AS-	PAC	ALSK	HIS-	HIS-	GOOD	FAIR				
			24	34	44	54	64	OVER	AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
Q58.3																				
YES	2	156			1			1	2					1	1	1			2	
	14%	33%	~	~	50%	~	~	50%	17%	~	~	~	~	~	9%	20%	13%	~	20%	~
NO	12	310			1	2	7	1	10					1	10	4	7		4	8
	86%	67%	~	~	50%	100%	100%	50%	83%	~	~	~	~	~	100%	91%	80%	88%	100%	80%
VALID CASES	14	466			2	2	7	2	12					1	11	5	8		4	10
NUMBER OF RESPONDENTS	14	466			2	2	7	2	12					1	11	5	8		4	10
	100%	100%			100%	100%	100%	100%	100%					100%	100%	100%	100%		100%	100%

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

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

	BANT	BANT	AGE					RACE					ETHNIC-	HEALTH	GENDER				
	OT1	OT2										ITY	STATUS						
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER		NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/		VERY						
	ADLT	ADLT	TO	TO	TO	TO	TO	OVER	AFR-	AS-	PAC	ALSK	HIS-	HIS-	GOOD	FAIR			
			24	34	44	54	64	OVER	AMER	IAN	ILND	NATV	OTHR	MUL-	GOOD	POOR	MALE	MALE	
									WHTE	##	##	#	##	##	TI	IC	IC	&	&
Q58.4																			
YES	1	56					1		1					1		1	1		
	7%	12%	~	~	~	~	14%	~	8%	~	~	~	~	~	9%	~	13%	~	25%
NO	13	410			2	2	6	2	11					1	10	5	7	3	10
	93%	88%	~	~	100%	100%	86%	100%	92%	~	~	~	~	100%	91%	100%	88%	75%	100%
VALID CASES	14	466			2	2	7	2	12					1	11	5	8	4	10
NUMBER OF RESPONDENTS	14	466			2	2	7	2	12					1	11	5	8	4	10
	100%	100%			100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER									
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	##	##	#	##	##	TI	IC	IC	GOOD	POOR	
																		MALE	MALE	
Q58.5																				
YES	4	39			1	2	1		4						4	1	2	1	3	
	29%	8%	~	~	50%~	100%~	14%~	~	33%~	~	~	~	~	~	~	36%~	20%~	25%~	25%~	30%~
NO	10	427			1		6	2	8						1	7	4	6	3	7
	71%	92%	~	~	50%~	~	86%~	100%~	67%~	~	~	~	~	~	100%~	64%~	80%~	75%~	75%~	70%~
VALID CASES	14	466			2	2	7	2	12						1	11	5	8	4	10
NUMBER OF RESPONDENTS	14	466			2	2	7	2	12						1	11	5	8	4	10
	100%	100%			100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

NQ13 RATING OF ALL HEALTH CARE

	BANT	BANT	AGE							RACE							ETHNICITY			HEALTH STATUS		GENDER	
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC/ALSK	OTHR	MUL-TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE			
NQ13	PSCS	OHP	18	25	35	45	55	65															
0-6	TOT	TOT	24	34	44	54	64	OVER	WHTE	##	##	#	##	##	TI	IC	IC	GOOD	FAIR	FE-			
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	##	##	#	##	##	TI	IC	IC	GOOD	FAIR	FE-			
			17%	20%	7%~	14%~	21%~	15%~	14%	17%~	17%~	~	~	~	~	~	31%~	11%~	16%~	11%*	24%	17%	16%
7-8			39%	35%	50%~	50%~	29%~	53%~	36%	25%~	41%~	~	~	~	~	~	31%~	39%~	41%~	45%*	29%	33%	43%
9-10			44%	46%	43%~	36%~	50%~	33%~	51%	58%~	43%~	~	~	~	~	~	38%~	50%~	43%~	44%	47%	50%	41%
VALID CASES	181	3511	14	22	28	40	59	12	138					13	18	158	117	58	58	121			
NUMBER OF RESPONDENTS	181	3511	14	22	28	40	59	12	138					13	18	158	117	58	58	121			
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
MEAN	2.27	2.26	2.36	2.23	2.29	2.17	2.37	2.42	2.26					2.08	2.39	2.27	2.32	2.22	2.33	2.26			
p stat_(*=Sig @ p<=.05)		.938	~	~	~	~	.171	~	~	~	~	~	~	~	~	~	~	.141	.607	.435	.816		

[ASKED IF Q7 >= 1 TIME]

NQ23 RATING OF PERSONAL DOCTOR

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC/ALSK	OTHR	MUL-TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE
NQ23																				
0-6	25 13%	572 15%	18 ~	25 30%~	35 6%~	45 8%~	55 12%~	65 18%~	19 13%~	~	~	~	~	1 7%~	2 13%~	19 11%~	13 10%	8 14%	6 10%	16 13%
7-8	54 28%	959 26%	5 36%~	5 25%~	11 31%~	13 33%~	17 26%	2 18%~	38 25%~	~	~	~	~	7 50%~	3 20%~	48 28%~	38 30%	14 24%	18 29%	34 27%
9-10	115 59%	2197 59%	9 64%~	9 45%~	23 64%~	24 60%~	41 62%	7 64%~	93 62%~	~	~	~	~	6 43%~	10 67%~	103 61%~	76 60%	37 63%	38 61%	76 60%
VALID CASES	194	3728	14	20	36	40	66	11	150					14	15	170	127	59	62	126
NUMBER OF RESPONDENTS	194 100%	3728 100%	14 100%	20 100%	36 100%	40 100%	66 100%	11 100%	150 100%					14 100%	15 100%	170 100%	127 100%	59 100%	62 100%	126 100%
MEAN	2.46	2.44	2.64	2.15	2.58	2.53	2.50	2.45	2.49					2.36	2.53	2.49	2.50	2.49	2.52	2.48
p stat_(*=Sig @ p<=.05)		.590	~	~	~	~	.613	~	~	~	~	~	~	~	~	~	.410	.723	.473	.745

[ASKED IF Q15 = YES]

NQ27 RATING OF SPECIALIST SEEN MOST OFTEN

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLK OR AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC/ALSK	OTHR	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE-MALE	MALE	
NQ27	PSCS	OHP	18	25	35	45	55	65													
0-6	TOT	TOT	2		2	1	7	10						3	1	12	4	9	5	9	
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	##	##	#	##	##	TI	IC	IC	GOOD	FAIR	POOR	
			40%~	~	11%~	4%~	18%~	~	13%~	~	~	~	~	~	30%~	14%~	13%~	7%~	21%~	17%~	13%~
7-8				2	3	12	10	1	18					3	5	22	16	10	6	22	
			~	40%~	17%~	48%~	25%~	25%~	23%~	~	~	~	~	~	30%~	71%~	25%~	30%~	23%~	21%~	31%~
9-10			3	3	13	12	23	3	49					4	1	55	34	24	18	40	
			60%~	60%~	72%~	48%~	58%~	75%~	64%~	~	~	~	~	~	40%~	14%~	62%~	63%~	56%~	62%~	56%~
VALID CASES	102	1771	5	5	18	25	40	4	77					10	7	89	54	43	29	71	
NUMBER OF RESPONDENTS	102	1771	5	5	18	25	40	4	77					10	7	89	54	43	29	71	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%
MEAN	2.42	2.46	2.20	2.60	2.61	2.44	2.40	2.75	2.51					2.10	2.00	2.48	2.56	2.35	2.45	2.44	
p stat_(*=Sig @ p<=.05)	.560		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

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

NQ35 RATING OF HEALTH PLAN

	BANT	BANT	AGE							RACE							ETHNICITY			HEALTH STATUS		GENDER					
	OT1	OT2																									
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER								EX &								
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/							NOT	VERY								
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK						HIS-	HIS-	GOOD	FAIR					FE-	
									AMER	IAN	ILND	NATV	OTHR	MUL-	TI		IC	IC	GOOD	POOR					MALE	MALE	
NQ35																											
0-6	56	953	3	11	12	8	15	1	41						8	2	49	33	18	16	37						
	23%	21%	14%~	37%~	28%~	17%~	19%	8%~	23%	~	~	~	~	~	40%~	9%~	24%~	21%	25%	19%	25%						
7-8	84	1522	9	12	14	21	21	5	63						6	9	72	56	26	29	52						
	35%	33%	41%~	40%~	33%~	45%~	27%	42%~	35%	~	~	~	~	~	30%~	41%~	35%~	35%	36%	34%	35%						
9-10	101	2121	10	7	17	18	41	6	75						6	11	86	69	29	40	60						
	42%	46%	45%~	23%~	40%~	38%~	53%*	50%~	42%	~	~	~	~	~	30%~	50%~	42%~	44%	40%	47%	40%						
VALID CASES	241	4596	22	30	43	47	77	12	179						20	22	207	158	73	85	149						
NUMBER OF RESPONDENTS	241	4596	22	30	43	47	77	12	179						20	22	207	158	73	85	149						
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%						
MEAN	2.19	2.25	2.32	1.87	2.12	2.21	2.34	2.42	2.19						1.90	2.41	2.18	2.23	2.15	2.28	2.15						
p stat_(*=Sig @ p<=.05)		.167	~	~	~	~	.043*	~	.914	~	~	~	~	~	~	~	~	~	.272	.642	.164	.415					

GETTING NEEDED CARE

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS		GENDER			
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE
NPRBSEE4 NQ46	2.26	2.25	2.20	2.40	2.37	2.04	2.46	1.75	2.29					1.64	2.50	2.24	2.39	2.14	2.27	2.26
p stat_(*=Sig @ p<=.05)	.885		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCARNES4 NQ15	2.25	2.31	2.31	2.32	2.28	2.14	2.36	2.17	2.23					2.13	2.47	2.22	2.29	2.20	2.33	2.22
p stat_(*=Sig @ p<=.05)	.235		~	~	~	~	~.175	~	~	~	~	~	~	~	~	~	~.309	.568	.343	.523
COMPOSITE	2.25	2.28	2.25	2.36	2.32	2.09	2.41	1.96	2.26	x	x	x	x	x 1.88	2.49	2.23	2.34	2.17	2.30	2.24
p stat_(*=Sig @ p<=.05)	.487		~	~	~	~	~.009*	~	~.641	~	~	~	~	~	~	~	~.004*	.147	.442	.685

GETTING CARE QUICKLY

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER			
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	ILND NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE
NCARSN4 NQ4	2.19	2.40	2.43	2.42	2.05	2.35	2.13	2.20	2.25						1.75	2.50	2.20	2.38	2.00	2.30	2.21
p stat_(*=Sig @ p<=.05)		.003*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NAPGET4 NQ6	2.24	2.26	1.90	2.31	2.18	2.18	2.38	2.22	2.30						1.73	2.39	2.25	2.25	2.36	2.23	2.26
p stat_(*=Sig @ p<=.05)		.668	~	~	~	~	.068	~	.114	~	~	~	~	~	~	~	~	.891	.138	.893	.602
COMPOSITE	2.21	2.33	2.16	2.37	2.11	2.27	2.26	2.21	2.27	x	x	x	x	x	1.74	2.44	2.22	2.31	2.18	2.26	2.23
p stat_(*=Sig @ p<=.05)		.003*	~	~	~	~	.497	~	.044*	~	~	~	~	~	~	~	~	.006*	.554	.430	.569

HOW WELL DOCTORS COMMUNICATE

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE			
NDREXPL4 NQ32	2.65	2.64	2.88	2.57	2.78	2.63	2.65	2.67	2.63					2.70	2.83	2.65	2.74	2.58	2.74	2.64	
p stat_(*=Sig @ p<=.05)	.756		~	~	~	~	.949	~	~	~	~	~	~	~	~	~	.037*	.276	~	~	
NDRLSTN4 NQ33	2.62	2.61	2.88	2.64	2.70	2.74	2.60	2.44	2.63					2.40	2.92	2.63	2.70	2.56	2.72	2.62	
p stat_(*=Sig @ p<=.05)	.838		~	~	~	~	.723	~	~	~	~	~	~	~	~	~	.067	.388	~	~	
NDRESPU4 NQ34	2.71	2.67	2.88	2.64	2.79	2.77	2.70	2.44	2.70					2.60	2.85	2.71	2.79	2.62	2.77	2.70	
p stat_(*=Sig @ p<=.05)	.427		~	~	~	~	.914	~	~	~	~	~	~	~	~	~	.057	.172	~	~	
NDRTMEN4 NQ37	2.54	2.52	2.38	2.71	2.46	2.59	2.56	2.67	2.53					2.40	2.92	2.53	2.65	2.42	2.70	2.50	
p stat_(*=Sig @ p<=.05)	.636		~	~	~	~	.798	~	~	~	~	~	~	~	~	~	.020*	.106	~	~	
COMPOSITE	2.63	2.61	2.75	2.64	2.68	2.68	2.63	2.56	2.62	x	x	x	x	x	2.53	2.88	2.63	2.72	2.54	2.73	2.61
p stat_(*=Sig @ p<=.05)	.606		~	~	~	~	.940	~	~	~	~	~	~	~	~	~	.015*	.136	~	~	

CUSTOMER SERVICE

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS		GENDER					
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	ILND	NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE
NPBCLCS4 NQ50	2.27	2.30	2.14	2.22	2.27	2.10	2.43	2.50	2.33						1.78	2.44	2.25	2.25	2.38	2.52	2.16	
p stat_(*=Sig @ p<=.05)	.765		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ51	2.70	2.69	2.57	2.33	2.64	2.85	2.71	3.00	2.72						2.33	2.78	2.70	2.73	2.63	2.81	2.65	
p stat_(*=Sig @ p<=.05)	.874		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.49	2.50	2.36	2.28	2.45	2.47	2.57	2.75	2.53	x	x	x	x	x	2.06	2.61	2.47	2.49	2.50	2.67	2.40	
p stat_(*=Sig @ p<=.05)	.907		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS		GENDER			
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE
NNRXWHY NQ11	2.75	2.87	2.33	2.78	2.88	2.65	2.74	3.00	2.75					2.78	3.00	2.71	2.77	2.75	2.79	2.72
p stat_(*=Sig @ p<=.05)		.092	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NNRXWYNT NQ12	2.54	2.49	2.33	2.78	2.53	2.63	2.55	2.67	2.63					2.25	2.00	2.61	2.58	2.56	2.41	2.62
p stat_(*=Sig @ p<=.05)		.574	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NRXBST NQ13	2.40	2.53	3.00	2.78	2.41	2.38	2.35	2.00	2.44					2.25	2.50	2.39	2.47	2.40	2.50	2.36
p stat_(*=Sig @ p<=.05)		.159	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.56	2.63	2.56	2.78	2.61	2.55	2.55	2.56	2.60	x	x	x	x	x 2.43	2.50	2.57	2.61	2.57	2.56	2.57
p stat_(*=Sig @ p<=.05)		.286	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

	BANTO	BANTO	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	T1	T2												ITY	STATUS					
	PSCS	OHP	18	25	35	45	55	65	BLCK	AS-	NATV	AMER								
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	IAN	HAW/	IND/								
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-		PAC	ALSK								
									AMER	##	ILND	NATV	OTHR	MUL-	HIS-	NOT	EX &	FAIR		
									##		#	##	##	TI	PAN-	PAN-	VERY	&	POOR	FE-
															IC	IC	GOOD	GOOD	MALE	MALE
PRBSEE4 Q25	81%	77%	80%	80%	79%	73%	90%	75%	85%					36%	88%	80%	88%	75%	83%	79%
CARNES4 Q14	79%	82%	85%	86%	76%	79%	81%	83%	80%					67%	76%	79%	83%	75%	79%	80%
AVERAGE	80.04	79.43	82.31	83.18	77.40	75.82	85.64	79.17	82.16	x	x	x	x	x 51.52	81.99	79.80	85.13	75.00	81.32	79.48

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

	BANTO	BANTO	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	T1	T2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ILND #	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
CARSN4 Q4	75%	83%	100%	84%	71%	90%	68%	60%	78%					50%	90%	76%	83%	68%	83%	75%
APGET4 Q6	79%	78%	70%	88%	75%	74%	85%	78%	82%					53%	83%	79%	78%	86%	79%	79%
AVERAGE	77.26	80.38	85.00	85.86	73.21	81.84	76.37	68.89	79.79	x	x	x	x	x 51.67	86.67	77.48	80.88	77.00	81.29	77.31

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	PSCS	OHP	18	25	35	45	55	65	BLCK	AS-	NATV	AMER			NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	IAN	HAW/	IND/			HIS-	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-		PAC	ALSK			PAN-	GOOD	FAIR				
									AMER		ILND	NATV	OTHR	MUL-	IC	IC	&	&	FE-		
									WHTE	##	#	##	##	TI		GOOD	POOR	MALE	MALE		
DREXPL4 Q17	92%	92%	100%	93%	96%	91%	91%	89%	91%					90%	100%	92%	95%	90%	95%	91%	
DRLSTN4 Q18	91%	90%	100%	86%	100%	94%	93%	78%	91%					90%	100%	92%	94%	90%	95%	91%	
DRESPU4 Q19	92%	91%	100%	86%	100%	94%	91%	78%	91%					100%	92%	92%	95%	88%	95%	91%	
DRTMEN4 Q20	91%	88%	88%	93%	92%	91%	89%	100%	90%					90%	100%	90%	96%	84%	95%	89%	
AVERAGE	91.5	90.3	96.9	89.3	96.8	92.8	91.2	86.1	90.9	x	x	x	x	x	92.5	98.1	91.6	94.6	88.3	95.3	90.9

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

	BANTO	BANTO	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	T1	T2																		
	PSCS	OHP	18	25	35	45	55	65	BLCK	AS-	NATV	AMER								
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	IAN	HAW/	IND/								
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	PAC	ILND	ALSK	OTHR	MUL-	HIS-	NOT	EX &	FAIR		
									AMER	ILND	NATV	ALSK	OTHR	TI	IC	IC	VERY	&	FE-	
									##	##	#	##	##				GOOD	POOR	MALE	
									WHT								GOOD	POOR	MALE	
PBCLCS4 Q31	79%	80%	86%	78%	73%	75%	82%	83%	80%					67%	89%	77%	77%	83%	85%	75%
CSRESP Q32	94%	94%	100%	78%	91%	100%	93%	100%	95%					78%	100%	93%	95%	92%	100%	91%
AVERAGE	86.31	86.67	92.86	77.78	81.82	87.50	87.50	91.67	87.50	x	x	x	x	x 72.22	94.44	84.93	85.71	87.50	92.59	83.33

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY	HEALTH STATUS	GENDER				
	PSCS TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
NRXWHY Q10	88%	93%	67%	89%	94%	82%	87%	100%	88%					89%	100%	86%	89%	88%	89%	86%	
NRXWYNT Q11	77%	74%	67%	89%	76%	81%	77%	83%	81%					63%	50%	80%	79%	78%	70%	81%	
RXBST Q12	70%	77%	100%	89%	71%	69%	68%	50%	72%					63%	75%	70%	74%	70%	75%	68%	
AVERAGE	78.1	81.5	77.8	88.9	80.4	77.5	77.4	77.8	80.2	x	x	x	x	x	71.3	75.0	78.6	80.4	78.5	78.2	78.4

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q1 YES	258 100%	5277 100%	55 100%	53 100%	81 100%	69 100%	153 100%	~	~	~	~	~	16 ~100%	66 100%	170 100%	233 100%	5 100%	202 100%	56 100%
NOT ANSWERED	3	32	1		2		2							1	2	2	1	2	1
VALID CASES	258	5277	55	53	81	69	153						16	66	170	233	5	202	56
NUMBER OF RESPONDENTS	261 100%	5309 100%	56 100%	53 100%	83 100%	69 100%	155 100%						16 100%	67 100%	172 100%	235 100%	6 100%	204 100%	57 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q3 YES	76 30%	1639 32%	18 33%	12 24%	20 24%	26 39%	44 29%	~	~	~	~	~	7 44%	17 25%	51 30%	64 27%	3 50%	54 28%	22 39%
NO	177 70%	3549 68%	37 67%	37 76%	62 76%	41 61%	109 71%	~	~	~	~	~	9 56%	50 75%	119 70%	169 73%	3 50%	142 72%	35 61%
NOT ANSWERED	8	121	1	4	1	2	2							2	2			8	
VALID CASES	253	5188	55	49	82	67	153						16	67	170	233	6	196	57
NUMBER OF RESPONDENTS	261	5309	56	53	83	69	155						16	67	172	235	6	204	57
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	NO CCC	CCC	
Q4 NEVER	2 3%	19 1%	~	~	~	2 8%	2 5%	~	~	~	~	~	~	~	2 4%	1 2%	~	~	2 9%
SOMETIMES	8 11%	114 7%	2 11%	1 9%	2 10%	3 12%	5 12%	~	~	~	~	~	1 17%	~	6 12%	6 10%	~	6 12%	2 9%
USUALLY	12 16%	272 18%	1 6%	1 9%	3 15%	7 28%	7 16%	~	~	~	~	~	1 17%	2 12%	8 16%	9 15%	1 33%	8 15%	4 18%
ALWAYS	52 70%	1135 74%	15 83%	9 82%	15 75%	13 52%	29 67%	~	~	~	~	~	4 67%	15 88%	33 67%	46 74%	2 67%	38 73%	14 64%
#ALWAYS + USUALLY (NET)	64 86%	1407 91%	16 89%	10 91%	18 90%	20 80%	36 84%	~	~	~	~	~	5 83%	17 100%	41 84%	55 89%	3 100%	46 88%	18 82%
TOP BOX SCORE	52 70%	1135 74%	15 83%	9 82%	15 75%	13 52%	29 67%	~	~	~	~	~	4 67%	15 88%	33 67%	46 74%	2 67%	38 73%	14 64%
NOT ANSWERED	2	99		1		1	1						1		2	2		2	
VALID CASES	74	1540	18	11	20	25	43						6	17	49	62	3	52	22
NUMBER OF RESPONDENTS	76 100%	1639 100%	18 100%	12 100%	20 100%	26 100%	44 100%						7 100%	17 100%	51 100%	64 100%	3 100%	54 100%	22 100%

[ASKED IF Q3 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q5 YES	169 68%	3464 67%	42 79%*	32 65%~	51 63%	44 66%	108 71%	~	~	~	~	~	10 63%~	40 61%	119 70%	154 66%~	5 83%~	128 66%	41 72%
NO	81 32%	1672 33%	11 21%*	17 35%~	30 37%	23 34%	45 29%	~	~	~	~	~	6 38%~	26 39%	51 30%	78 34%~	1 17%~	65 34%	16 28%
NOT ANSWERED	11	173	3	4	2	2	2							1	2	3		11	
VALID CASES	250	5136	53	49	81	67	153						16	66	170	232	6	193	57
NUMBER OF RESPONDENTS	261	5309	56	53	83	69	155						16	67	172	235	6	204	57
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q6 NEVER	6 4%	57 2%	~	~	4%	10%	6%*	~	~	~	~	~	~	5%	3%	~	4	2
SOMETIMES	23 14%	393 12%	3 7%	5 17%	8 16%	7 17%	12 12%	~	~	~	~	1 10%	6 15%	14 12%	20 14%	~	21	2
USUALLY	47 29%	850 26%	6 15%	8 28%	18 35%	15 36%	29 28%	~	~	~	~	4 40%	11 28%	33 29%	41 28%	3 60%	31	16
ALWAYS	87 53%	1954 60%	32 78%	16 55%	23 45%	16 38%	56 54%	~	~	~	~	5 50%	22 56%	61 54%	82 55%	2 40%	68	19
#ALWAYS + USUALLY (NET)	134 82%	2804 86%	38 93%	24 83%	41 80%	31 74%	85 83%	~	~	~	~	9 90%	33 85%	94 82%	123 83%	5 100%	99	35
TOP BOX SCORE	87 53%	1954 60%	32 78%	16 55%	23 45%	16 38%	56 54%	~	~	~	~	5 50%	22 56%	61 54%	82 55%	2 40%	68	19
NOT ANSWERED	6	210	1	3		2	5						1	5	6		4	2
VALID CASES	163	3254	41	29	51	42	103					10	39	114	148	5	124	39
NUMBER OF RESPONDENTS	169 100%	3464 100%	42 100%	32 100%	51 100%	44 100%	108 100%					10 100%	40 100%	119 100%	154 100%	5 100%	128 100%	41 100%

[ASKED IF Q5 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN #	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q7 NONE	73 29%	1484 30%	11 20%	15 31%	26 32%	21 32%	41 27%	~	~	~	~	~	5 31%	22 33%	46 27%	69 29%	1 17%	62 32%	11 20%
1 TIME	84 34%	1437 29%	17 31%	16 33%	30 37%	21 32%	58 38%	~	~	~	~	~	5 31%	20 30%	63 37%	82 35%	2 33%	65 34%	19 34%
2	48 19%	1045 21%	12 22%	14 29%	15 19%	7 11%	29 19%	~	~	~	~	~	4 25%	12 18%	33 19%	44 19%	~	38 20%	10 18%
3	18 7%	518 10%	4 7%	3 6%	4 5%	7 11%	11 7%	~	~	~	~	~	1 6%	4 6%	13 8%	17 7%	~	13 7%	5 9%
4	11 4%	229 5%	4 7%	~	2 2%	5 8%	7 5%	~	~	~	~	~	1 6%	3 4%	8 5%	10 4%	1 17%	8 4%	3 5%
5 TO 9	7 3%	232 5%	3 5%	1 2%	1 1%	2 3%	3 2%	~	~	~	~	~	~	3 4%	3 2%	5 2%	1 17%	4 2%	3 5%
10 OR MORE TIMES	9 4%	79 2%	4 7%	~	3 4%	2 3%	5 3%	~	~	~	~	~	~	3 4%	5 3%	7 3%	1 17%	4 2%	5 9%
NOT ANSWERED	11	285	1	4	2	4	1								1	1		10	1
VALID CASES	250	5024	55	49	81	65	154						16	67	171	234	6	194	56
NUMBER OF RESPONDENTS	261	5309	56	53	83	69	155						16	67	172	235	6	204	57
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-#	AS-IAN	NATV ILND	AMER IND/ALSK	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q8 #YES	116 66%	2500 72%	35 80%~	19 56%~	40 73%	22 51%~	74 65%	~	~	~	~	~	10 91%~	26 59%~	85 68%	106 65%~	5 100%~	84 64%~	32 71%
NO	60 34%	975 28%	9 20%~	15 44%~	15 27%	21 49%~	39 35%	~	~	~	~	~	1 9%~	18 41%~	40 32%	58 35%~	~	47 36%~	13 29%
NOT ANSWERED	1	65				1								1		1		1	
VALID CASES	176	3475	44	34	55	43	113						11	44	125	164	5	131	45
NUMBER OF RESPONDENTS	177	3540	44	34	55	44	113						11	45	125	165	5	132	45
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC-ITY	HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q9 NEVER	5 3%	83 2%	1 2%~	~	1 2%	3 7%~	4 4%	~	~	~	~	~	~	~	4 3%	4 2%~	~	5 4%~	
SOMETIMES	11 6%	254 7%	3 7%~	2 6%~	4 7%	2 5%~	6 5%	~	~	~	~	~	~	4 9%~	6 5%	10 6%~	~	8 6%~	3 7%
USUALLY	44 25%	708 20%	8 18%~	7 21%~	12 22%	17 39%~	30 27%	~	~	~	~	~	3 27%~	8 18%~	33 26%	40 24%~	1 20%~	29 22%~	15 33%
ALWAYS	117 66%	2421 70%	32 73%~	25 74%~	38 69%	22 50%~	73 65%	~	~	~	~	~	8 73%~	33 73%~	82 66%	111 67%~	4 80%~	90 68%~	27 60%
#ALWAYS + USUALLY (NET)	161 91%	3129 90%	40 91%~	32 94%~	50 91%	39 89%~	103 91%	~	~	~	~	~	11 100%~	41 91%~	115 92%	151 92%~	5 100%~	119 90%~	42 93%
TOP BOX SCORE	117 66%	2421 70%	32 73%~	25 74%~	38 69%	22 50%~	73 65%	~	~	~	~	~	8 73%~	33 73%~	82 66%	111 67%~	4 80%~	90 68%~	27 60%
NOT ANSWERED		74																	
VALID CASES	177	3466	44	34	55	44	113						11	45	125	165	5	132	45
NUMBER OF RESPONDENTS	177 100%	3540 100%	44 100%	34 100%	55 100%	44 100%	113 100%						11 100%	45 100%	125 100%	165 100%	5 100%	132 100%	45 100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN #	NATV ILND #	AMER PAC ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q10 YES	51 29%	1023 30%	13 31%~	6 18%~	16 30%	16 36%~	28 25%	~	~	~	~	~	2 18%~	19 43%~	30 24%*	44 27%~	4 80%~	30 23%~	21 49%
NO	123 71%	2434 70%	29 69%~	28 82%~	38 70%	28 64%~	83 75%	~	~	~	~	~	9 82%~	25 57%~	93 76%*	118 73%~	1 20%~	101 77%~	22 51%
NOT ANSWERED	3	83	2		1		2							1	2	3		1	2
VALID CASES	174	3457	42	34	54	44	111						11	44	123	162	5	131	43
NUMBER OF RESPONDENTS	177	3540	44	34	55	44	113						11	45	125	165	5	132	45
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-#	AS-IAN	NATV ILND	AMER PAC ALSK	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q11 #YES	46 90%	937 94%	12 92%~	5 83%~	14 88%~	15 94%~	24 86%~	~	~	~	~	~	1 50%~	19 100%~	25 83%~	39 89%~	4 100%~	27 90%~	19 90%
NO	5 10%	63 6%	1 8%~	1 17%~	2 13%~	1 6%~	4 14%~	~	~	~	~	~	1 50%~	5 17%~	5 11%~	5 11%~	3 10%~	2 10%	
NOT ANSWERED		23																	
VALID CASES	51	1000	13	6	16	16	28						2	19	30	44	4	30	21
NUMBER OF RESPONDENTS	51	1023	13	6	16	16	28						2	19	30	44	4	30	21
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN #	NATV ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q12 #YES	33 65%	709 71%	7 54%~	5 83%~	10 63%~	11 69%~	18 64%~	~	~	~	~	~	1 50%~	13 68%~	19 63%~	29 66%~	2 50%~	18 60%~	15 71%
NO	18 35%	290 29%	6 46%~	1 17%~	6 38%~	5 31%~	10 36%~	~	~	~	~	~	1 50%~	6 32%~	11 37%~	15 34%~	2 50%~	12 40%~	6 29%
NOT ANSWERED		24																	
VALID CASES	51	999	13	6	16	16	28						2	19	30	44	4	30	21
NUMBER OF RESPONDENTS	51	1023	13	6	16	16	28						2	19	30	44	4	30	21
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER				
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q13 #YES	40 78%	780 79%	7 54%	6 100%	14 88%	13 81%	21 75%	~	~	~	~	~	1 50%	17 89%	22 73%	34 77%	4 100%	22 73%	18 86%	
NO	11 22%	209 21%	6 46%	~	2 13%	3 19%	7 25%	~	~	~	~	~	1 50%	2 11%	8 27%	10 23%	~	8 27%	3 14%	
NOT ANSWERED		34																		
VALID CASES	51	989	13	6	16	16	28						2	19	30	44	4	30	21	
NUMBER OF RESPONDENTS	51	1023	13	6	16	16	28						2	19	30	44	4	30	21	
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%	

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AMER #	AS- IAN #	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q14 WORST HEALTH CARE POSSIBLE	2 1%	12 0.3%	~	~	~	2 5%	2 2%	~	~	~	~	~	~	2 2%	2 1%	~	1 0.8%	1 2%
01		10 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02	1 0.6%	13 0.4%	~	~	~	1 2%	1 0.9%	~	~	~	~	~	1 0.8%	1 0.6%	1 0.6%	~	1 0.8%	~
03	1 0.6%	13 0.4%	~	~	~	1 2%	1 0.9%	~	~	~	~	~	1 0.8%	~	~	~	~	1 2%
04	2 1%	22 0.6%	~	2 6%	~	~	1 0.9%	~	~	~	~	~	1 2%	1 0.8%	2 1%	~	1 0.8%	1 2%
05	8 5%	111 3%	2 5%	~	4 7%	2 5%	4 4%	~	~	~	~	~	4 9%	4 3%	8 5%	~	7 5%	1 2%
06	8 5%	105 3%	2 5%	~	4 7%	2 5%	5 4%	~	~	~	~	2 18%	~	6 5%	6 4%	1 20%	5 4%	3 7%
07	13 7%	269 8%	5 12%	1 3%	1 2%	6 14%	12 11%*	~	~	~	~	~	~	12 10%*	12 7%	~	11 8%	2 4%
08	33 19%	725 21%	10 23%	8 24%	10 19%	5 11%	22 20%	~	~	~	~	1 9%	7 16%	24 19%	31 19%	~	21 16%	12 27%
09	39 22%	742 21%	5 12%	13 38%	7 13%*	14 32%	23 21%	~	~	~	~	6 55%	9 20%	29 23%	38 23%	~	32 25%	7 16%
BEST HEALTH CARE POSSIBLE	68 39%	1438 42%	19 44%	10 29%	28 52%*	11 25%	41 37%	~	~	~	~	2 18%	23 52%	44 35%	63 39%	4 80%	51 39%	17 38%
#8-10 (NET)	140 80%	2905 84%	34 79%	31 91%	45 83%	30 68%	86 77%	~	~	~	~	9 82%	39 89%	97 78%	132 81%	4 80%	104 80%	36 80%

Continued

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER PAC ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
9-10 (NET)	107 61%	2180 63%	24 56%~	23 68%~	35 65%	25 57%~	64 57%	~	~	~	~	~	8 73%~	32 73%~	73 59%	101 62%~	4 80%~	83 64%~	24 53%
NOT ANSWERED	2	80	1		1		1						1	1	2			2	
VALID CASES	175	3460	43	34	54	44	112					11	44	124	163	5	130	45	
NUMBER OF RESPONDENTS	177	3540	44	34	55	44	113					11	45	125	165	5	132	45	
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%
MEAN	8.50	8.70	8.65	8.71	8.78	7.84	8.36					8.55	8.89	8.40	8.53	9.20	8.57	8.29	
p stat_(*=Sig @ p<=.05)		.146	~	~	.155		~.158	~	~	~	~	~	~	~.300	~	~	~	~	

[ASKED IF Q7 >= 1]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ILND #	AMER ALSK #	OTHR #	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q15 NEVER	5 3%	57 2%	1 2%~	2 ~	2 4%	2 5%~	4 4%	~	~	~	~	~	~	1 2%~	4 3%	4 2%~	1 ~	3 2%~	2 5%
SOMETIMES	20 11%	311 9%	3 7%~	3 9%~	8 15%	6 14%~	13 12%	~	~	~	~	~	~	6 13%~	12 10%	18 11%~	1 20%~	14 11%~	6 14%
USUALLY	60 34%	1019 29%	12 27%~	11 32%~	16 29%	21 50%~	39 35%	~	~	~	~	~	5 45%~	12 27%~	45 37%	55 34%~	2 40%~	43 33%~	17 39%
ALWAYS	90 51%	2073 60%*	28 64%~	20 59%~	29 53%	13 31%~	55 50%	~	~	~	~	~	6 55%~	26 58%~	62 50%	86 53%~	2 40%~	71 54%~	19 43%
#ALWAYS + USUALLY (NET)	150 86%	3092 89%	40 91%~	31 91%~	45 82%	34 81%~	94 85%	~	~	~	~	~	11 ~100%~	38 84%~	107 87%	141 87%~	4 80%~	114 87%~	36 82%
TOP BOX SCORE	90 51%	2073 60%*	28 64%~	20 59%~	29 53%	13 31%~	55 50%	~	~	~	~	~	6 55%~	26 58%~	62 50%	86 53%~	2 40%~	71 54%~	19 43%
NOT ANSWERED	2	80				2	2								2	2		1	1
VALID CASES	175	3460	44	34	55	42	111						11	45	123	163	5	131	44
NUMBER OF RESPONDENTS	177	3540	44	34	55	44	113						11	45	125	165	5	132	45
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ PAC ILND #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q16 YES	190 75%	3801 75%	16 29%*	44 90%~	71 87%*	59 88%*	120 77%	~	~	~	~	~	13 ~ 81%~	44 66%	133 77%	174 74%~	5 83%~	140 71%*	50 88%
NO	63 25%	1296 25%	39 71%*	5 10%~	11 13%*	8 12%*	35 23%	~	~	~	~	~	3 ~ 19%~	23 34%	39 23%	61 26%~	1 17%~	56 29%*	7 12%
NOT ANSWERED	8	212	1	4	1	2												8	
VALID CASES	253	5097	55	49	82	67	155						16	67	172	235	6	196	57
NUMBER OF RESPONDENTS	261 100%	5309 100%	56 100%	53 100%	83 100%	69 100%	155 100%						16 100%	67 100%	172 100%	235 100%	6 100%	204 100%	57 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q17 YES	16 9%	409 11%	1 6%~	3 8%~	7 10%	5 9%	5 5%*	~	~	~	~	~	1 8%~	8 19%~	6 5%*	11 7%~	3 60%~	7 5%~	9 20%
NO	162 91%	3206 89%	15 94%~	34 92%~	63 90%	50 91%	104 95%*	~	~	~	~	~	12 92%~	35 81%~	116 95%*	151 93%~	2 40%~	125 95%~	37 80%
NOT ANSWERED	12	186		7	1	4	11							1	11	12		8	4
VALID CASES	178	3615	16	37	70	55	109						13	43	122	162	5	132	46
NUMBER OF RESPONDENTS	190	3801	16	44	71	59	120						13	44	133	174	5	140	50
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q16 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN #	NATV ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q18 #YES	15 94%	369 92%	1 100%	3 100%	6 86%	5 100%	4 80%	~	~	~	~	~	1 100%	8 100%	5 83%	10 91%	3 100%	7 100%	8 89%
NO	1 6%	30 8%	~	~	1 14%	~	1 20%	~	~	~	~	~	~	1 17%	~	1 9%	~	~	1 11%
NOT ANSWERED		10																	
VALID CASES	16	399	1	3	7	5	5						1	8	6	11	3	7	9
NUMBER OF RESPONDENTS	16	409	1	3	7	5	5						1	8	6	11	3	7	9
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q16 = YES AND Q17 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q19 YES	7 3%	214 4%	1 2%	2 4%	2 2%	2 3%	6 4%	~	~	~	~	~	~	1 2%	6 4%	6 3%	1 17%	3 2%	4 7%
NO	242 97%	4864 96%	52 98%	47 96%	80 98%	63 97%	148 96%	~	~	~	~	~	16 ~100%	65 98%	165 96%	227 97%	5 83%	189 98%	53 93%
NOT ANSWERED	12	231	3	4	1	4	1							1	1	2		12	
VALID CASES	249	5078	53	49	82	65	154						16	66	171	233	6	192	57
NUMBER OF RESPONDENTS	261	5309	56	53	83	69	155						16	67	172	235	6	204	57
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q20 NEVER	2 29%	21 10%	~	~	50%	50%	33%	~	~	~	~	~	~	2 33%	1 17%	1 100%	~	2 50%
SOMETIMES		30 14%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
USUALLY	1 14%	46 22%	~	~	50%	~	~	~	~	~	~	~	1 100%	1 17%	~	~	1 33%	~
ALWAYS	4 57%	113 54%	1 100%	2 100%	~	1 50%	4 67%	~	~	~	~	~	4 67%	4 67%	4 67%	~	2 67%	2 50%
#ALWAYS + USUALLY (NET)	5 71%	159 76%	1 100%	2 100%	1 50%	1 50%	4 67%	~	~	~	~	~	1 100%	4 67%	5 83%	~	3 100%	2 50%
TOP BOX SCORE	4 57%	113 54%	1 100%	2 100%	~	1 50%	4 67%	~	~	~	~	~	4 67%	4 67%	4 67%	~	2 67%	2 50%
NOT ANSWERED		4																
VALID CASES	7	210	1	2	2	2	6						1	6	6	1	3	4
NUMBER OF RESPONDENTS	7	214	1	2	2	2	6						1	6	6	1	3	4
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q19 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q21 #YES	4 67%	170 83%	100%	50%	50%	100%	3 60%	~	~	~	~	~	1 100%	3 60%	4 80%	1 100%	3 100%	1 33%
NO	2 33%	36 17%	~	50%	50%	~	2 40%	~	~	~	~	~	~	2 40%	1 20%	1 100%	~	2 67%
NOT ANSWERED	1	8				1	1							1	1			1
VALID CASES	6	206	1	2	2	1	5						1	5	5	1	3	3
NUMBER OF RESPONDENTS	7	214	1	2	2	2	6						1	6	6	1	3	4
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q19 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q22 YES	21 9%	522 10%	8 15%	1 2%	6 7%	6 10%	16 10%	~	~	~	~	~	~	4 6%	16 9%	17 7%	3 50%	9 5%*	12 22%
NO	226 91%	4555 90%	46 85%	48 98%	75 93%	57 90%	137 90%	~	~	~	~	~	15 ~100%	63 94%	153 91%	215 93%	3 50%	183 95%*	43 78%
NOT ANSWERED	14	232	2	4	2	6	2						1		3	3		12	2
VALID CASES	247	5077	54	49	81	63	153						15	67	169	232	6	192	55
NUMBER OF RESPONDENTS	261	5309	56	53	83	69	155						16	67	172	235	6	204	57
	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	BANT	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	OT1	OT2	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ILND #	AMER IND/PAC ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR POOR	GOOD & FAIR	NO CCC	CCC
Q23 NEVER	2 10%	63 13%	~	~	33%	~	13%	~	~	~	~	~	~	13%	2 12%	2 12%	1 11%	1 8%
SOMETIMES	6 29%	78 16%	25%	~	17%	50%	25%	~	~	~	~	~	50%	25%	4 24%	4 67%	2 22%	4 33%
USUALLY	2 10%	122 24%	~	~	17%	17%	13%	~	~	~	~	~	~	13%	2 6%	1 33%	1 ~	2 17%
ALWAYS	11 52%	236 47%	75%	100%	33%	33%	50%	~	~	~	~	~	50%	50%	8 59%	10 ~	6 67%	5 42%
#ALWAYS + USUALLY (NET)	13 62%	358 72%	75%	100%	50%	50%	63%	~	~	~	~	~	50%	63%	11 65%	1 33%	6 67%	7 58%
TOP BOX SCORE	11 52%	236 47%	75%	100%	33%	33%	50%	~	~	~	~	~	50%	50%	8 59%	10 ~	6 67%	5 42%
NOT ANSWERED		23																
VALID CASES	21	499	8	1	6	6	16						4	16	17	3	9	12
NUMBER OF RESPONDENTS	21	522	8	1	6	6	16						4	16	17	3	9	12
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q22 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ PAC ILND #	AMER IND/ ALS #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q24 #YES	16 76%	347 69%	7 88%	1 100%	3 50%	5 83%	12 75%	~	~	~	~	~	3 75%	12 75%	12 71%	3 100%	7 78%	9 75%
NO	5 24%	153 31%	1 13%	~	3 50%	1 17%	4 25%	~	~	~	~	~	1 25%	4 25%	5 29%	~	2 22%	3 25%
NOT ANSWERED		22																
VALID CASES	21	500	8	1	6	6	16						4	16	17	3	9	12
NUMBER OF RESPONDENTS	21	522	8	1	6	6	16						4	16	17	3	9	12
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q22 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q25 YES	42 17%	769 15%	4 7%*	6 12%~	11 14%	21 33%*	26 17%	~	~	~	~	~	3 19%~	9 13%	30 18%	38 16%~	1 17%~	15 8%*	27 48%
NO	206 83%	4303 85%	51 93%*	43 88%~	69 86%	43 67%*	127 83%	~	~	~	~	~	13 81%~	58 87%	140 82%	195 84%~	5 83%~	177 92%*	29 52%
NOT ANSWERED	13	237	1	4	3	5	2								2	2		12	1
VALID CASES	248	5072	55	49	80	64	153						16	67	170	233	6	192	56
NUMBER OF RESPONDENTS	261	5309	56	53	83	69	155						16	67	172	235	6	204	57
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q26 NEVER	5 12%	94 13%	1 ~17%	1 ~9%	3 14%	3 12%	~	~	~	~	~	~	2 22%	3 10%	5 14%	~	~	5 19%
SOMETIMES	5 12%	122 16%	2 67%	2 ~18%	1 5%	3 12%	~	~	~	~	~	~	1 11%	4 14%	5 14%	~	4 27%	1 4%
USUALLY	11 27%	178 24%	1 33%	2 33%	3 27%	5 24%	8 31%	~	~	~	~	2 ~100%	~	10 34%	10 27%	~	4 27%	7 27%
ALWAYS	20 49%	353 47%	3 50%	5 45%	12 57%	12 46%	~	~	~	~	~	~	6 67%	12 41%	17 46%	1 100%	7 47%	13 50%
#ALWAYS + USUALLY (NET)	31 76%	531 71%	1 33%	5 83%	8 73%	17 81%	20 77%	~	~	~	~	2 ~100%	6 67%	22 76%	27 73%	1 100%	11 73%	20 77%
TOP BOX SCORE	20 49%	353 47%	3 50%	5 45%	12 57%	12 46%	~	~	~	~	~	~	6 67%	12 41%	17 46%	1 100%	7 47%	13 50%
NOT ANSWERED	1	22	1									1	1	1				1
VALID CASES	41	747	3	6	11	21	26					2	9	29	37	1	15	26
NUMBER OF RESPONDENTS	42	769	4	6	11	21	26					3	9	30	38	1	15	27
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER IND/ALSK #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q27 #YES	23 56%	428 57%	3 100%	3 50%	5 45%	12 57%	13 50%	~	~	~	~	1 50%	6 67%	15 52%	19 51%	1 100%	9 60%	14 54%
NO	18 44%	317 43%	~	3 50%	6 55%	9 43%	13 50%	~	~	~	~	1 50%	3 33%	14 48%	18 49%	~	6 40%	12 46%
NOT ANSWERED	1	24	1									1	1	1				1
VALID CASES	41	745	3	6	11	21	26					2	9	29	37	1	15	26
NUMBER OF RESPONDENTS	42	769	4	6	11	21	26					3	9	30	38	1	15	27
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q28 YES	52 21%	1124 22%	10 18%	7 14%	16 20%	19 30%	33 22%	~	~	~	~	~	4 25%	11 17%	37 22%	42 18%	5 83%	30 16%*	22 39%
NO	195 79%	3915 78%	45 82%	42 86%	63 80%	45 70%	120 78%	~	~	~	~	~	12 75%	55 83%	133 78%	190 82%	1 17%	161 84%*	34 61%
NOT ANSWERED	14	270	1	4	4	5	2							1	2	3		13	1
VALID CASES	247	5039	55	49	79	64	153						16	66	170	232	6	191	56
NUMBER OF RESPONDENTS	261	5309	56	53	83	69	155						16	67	172	235	6	204	57
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER PAC ALSK #	OTH#	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q29 #YES	29 58%	673 62%	7 70%~	1 17%~	10 63%~	11 61%~	17 52%~	~	~	~	~	~	2 50%~	9 82%~	19 51%~	23 55%~	4 80%~	14 50%~	15 68%
NO	21 42%	416 38%	3 30%~	5 83%~	6 38%~	7 39%~	16 48%~	~	~	~	~	~	2 50%~	2 18%~	18 49%~	19 45%~	1 20%~	14 50%~	7 32%
NOT ANSWERED	2	35		1		1													2
VALID CASES	50	1089	10	6	16	18	33						4	11	37	42	5	28	22
NUMBER OF RESPONDENTS	52	1124	10	7	16	19	33						4	11	37	42	5	30	22
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
Q30 YES	210 86%	4437 89%	50 91%	43 88%	66 86%	51 82%	133 89%	~	~	~	~	~	15 94%	53 80%	149 89%	196 86%	6 100%	~	161 85%	49 92%
NO	33 14%	550 11%	5 9%	6 12%	11 14%	11 18%	17 11%	~	~	~	~	~	1 6%	13 20%	18 11%	33 14%	~	~	29 15%	4 8%
NOT ANSWERED	18	322	1	4	6	7	5							1	5	6			14	4
VALID CASES	243	4987	55	49	77	62	150						16	66	167	229	6		190	53
NUMBER OF RESPONDENTS	261	5309	56	53	83	69	155						16	67	172	235	6		204	57
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%		100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ILND #	AMER PAC ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC
Q31 NONE	54 26%	1154 27%	8 16%	13 33%	21 32%	12 24%	32 25%	~	~	~	~	~	4 27%	15 29%	36 25%	51 27%	1 17%	48 31%	6 13%
1 TIME	86 42%	1496 35%	25 51%	16 41%	22 34%	23 45%	58 45%	~	~	~	~	~	5 33%	21 41%	63 43%	82 43%	2 33%	67 43%	19 40%
2	35 17%	893 21%	10 20%	6 15%	12 18%	7 14%	24 19%	~	~	~	~	~	4 27%	6 12%	28 19%	33 17%	~	25 16%	10 21%
3	14 7%	389 9%	2 4%	3 8%	4 6%	5 10%	8 6%	~	~	~	~	~	2 13%	3 6%	10 7%	13 7%	~	8 5%	6 13%
4	5 2%	157 4%	2 4%	~	1 2%	2 4%	1 0.8%	~	~	~	~	~	~	3 6%	2 1%	5 3%	~	5 3%	~
5 TO 9	8 4%	138 3%	1 2%	1 3%	4 6%	2 4%	6 5%	~	~	~	~	~	~	2 4%	6 4%	5 3%	3 50%	2 1%	6 13%
10 OR MORE TIMES	2 1%	34 0.8%	1 2%	~	1 2%	~	~	~	~	~	~	~	~	1 2%	~	1 0.5%	~	1 0.6%	1 2%
NOT ANSWERED	6	176	1	4	1		4							2	4	6		5	1
VALID CASES	204	4261	49	39	65	51	129						15	51	145	190	6	156	48
NUMBER OF RESPONDENTS	210	4437	50	43	66	51	133						15	53	149	196	6	161	49
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNIC-ITY	HEALTH STATUS		CCC SCREENER				
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD POOR	NO CCC	CCC
Q31A ALWAYS	2 1%	65 2%	~	1 4%	1 2%	~	~	~	~	~	~	~	~	2 6%	~	2 1%	~	2 2%	~
USUALLY	2 1%	49 2%	~	~	1 2%	1 3%	~	~	~	~	~	~	~	2 6%	~	2 1%	~	2 2%	~
SOMETIMES	9 6%	202 7%	2 5%	3 12%	3 7%	1 3%	4 4%	~	~	~	~	~	~	4 11%	4 4%	7 5%	1 20%	5 5%	4 10%
NEVER	137 91%	2765 90%	39 95%	22 85%	39 89%	37 95%	93 96%*	~	~	~	~	~	11 ~100%	28 78%	105 96%	128 92%	4 80%	99 92%	38 90%
#NEVER + SOMETIMES (NET)	146 97%	2967 96%	41 100%	25 96%	42 95%	38 97%	97 100%	~	~	~	~	~	11 ~100%	32 89%	109 100%	135 97%	5 100%	104 96%	42 100%
TOP BOX SCORE	137 91%	2765 90%	39 95%	22 85%	39 89%	37 95%	93 96%*	~	~	~	~	~	11 ~100%	28 78%	105 96%	128 92%	4 80%	99 92%	38 90%
NOT ANSWERED		26																	
VALID CASES	150	3081	41	26	44	39	97						11	36	109	139	5	108	42
NUMBER OF RESPONDENTS	150 100%	3107 100%	41 100%	26 100%	44 100%	39 100%	97 100%						11 100%	36 100%	109 100%	139 100%	5 100%	108 100%	42 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER HAW/ IND/ PAC ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q32 NEVER	3 2%	64 2%	~	1 4%	1 2%	1 3%	2 2%	~	~	~	~	~	~	1 3%	2 2%	3 2%	~	2 2%	1 2%
SOMETIMES	3 2%	100 3%	~	1 4%	~	2 5%	3 3%	~	~	~	~	~	~	~	3 3%	3 2%	~	2 2%	1 2%
USUALLY	27 18%	428 14%	8 20%	2 8%	7 16%	10 26%	14 15%	~	~	~	~	~	1 9%	10 28%	16 15%	25 18%	1 20%	17 16%	10 24%
ALWAYS	115 78%	2486 81%	33 80%	22 85%	35 81%	25 66%	76 80%	~	~	~	~	~	10 91%	25 69%	86 80%	106 77%	4 80%	86 80%	29 71%
#ALWAYS + USUALLY (NET)	142 96%	2914 95%	41 100%	24 92%	42 98%	35 92%	90 95%	~	~	~	~	~	11 100%	35 97%	102 95%	131 96%	5 100%	103 96%	39 95%
TOP BOX SCORE	115 78%	2486 81%	33 80%	22 85%	35 81%	25 66%	76 80%	~	~	~	~	~	10 91%	25 69%	86 80%	106 77%	4 80%	86 80%	29 71%
NOT ANSWERED	2	29			1	1	2								2	2		1	1
VALID CASES	148	3078	41	26	43	38	95						11	36	107	137	5	107	41
NUMBER OF RESPONDENTS	150 100%	3107 100%	41 100%	26 100%	44 100%	39 100%	97 100%						11 100%	36 100%	109 100%	139 100%	5 100%	108 100%	42 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER PAC ALSK #	OTHR #	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q33 NEVER	2 1%	29 0.9%	~	~	~	2 5%	2 2%	~	~	~	~	~	~	~	2 2%	2 1%	~	1 0.9%	1 2%
SOMETIMES	2 1%	120 4%*	~	1 4%	~	1 3%	1 1%	~	~	~	~	~	~	~	1 0.9%	1 0.7%	~	1 0.9%	1 2%
USUALLY	28 19%	422 14%	11 27%	2 8%	4 9%	11 29%	20 21%	~	~	~	~	~	1 9%	5 14%	21 19%	26 19%	~	19 18%	9 22%
ALWAYS	117 79%	2505 81%	30 73%	23 88%	40 91%	24 63%	73 76%	~	~	~	~	~	10 91%	31 86%	84 78%	109 79%	5 100%	87 81%	30 73%
#ALWAYS + USUALLY (NET)	145 97%	2927 95%	41 100%	25 96%	44 100%	35 92%	93 97%	~	~	~	~	~	11 100%	36 100%	105 97%	135 98%	5 100%	106 98%	39 95%
TOP BOX SCORE	117 79%	2505 81%	30 73%	23 88%	40 91%	24 63%	73 76%	~	~	~	~	~	10 91%	31 86%	84 78%	109 79%	5 100%	87 81%	30 73%
NOT ANSWERED	1	31				1	1								1	1			1
VALID CASES	149	3076	41	26	44	38	96						11	36	108	138	5	108	41
NUMBER OF RESPONDENTS	150	3107	41	26	44	39	97						11	36	109	139	5	108	42
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ ILND #	AMER ALSK NATV #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q34 NEVER	1 0.7%	30 1%	~	~	~	3%	1 1%	~	~	~	~	~	~	1 ~0.9%	1 ~0.7%	~	~	1 ~0.9%	~
SOMETIMES	2 1%	85 3%	~	~	1 2%	1 3%	2 2%	~	~	~	~	~	~	2 ~2%	2 1%	~	~	2 ~5%	~
USUALLY	23 16%	368 12%	8 20%	4 16%	1 2%	10 26%	15 16%	~	~	~	~	~	~	5 ~14%	15 ~14%	20 ~14%	~	17 ~16%	6 ~15%
ALWAYS	122 82%	2589 84%	33 80%	21 84%	42 95%	26 68%	78 81%	~	~	~	~	~	11 ~100%	31 86%	90 83%	115 83%	5 ~100%	89 83%	33 80%
#ALWAYS + USUALLY (NET)	145 98%	2957 96%	41 100%	25 100%	43 98%	36 95%	93 97%	~	~	~	~	~	11 ~100%	36 ~100%	105 97%	135 98%	5 ~100%	106 99%	39 95%
TOP BOX SCORE	122 82%	2589 84%	33 80%	21 84%	42 95%	26 68%	78 81%	~	~	~	~	~	11 ~100%	31 86%	90 83%	115 83%	5 ~100%	89 83%	33 80%
NOT ANSWERED	2	35	1	1	1	1	1							1	1			1	1
VALID CASES	148	3072	41	25	44	38	96						11	36	108	138	5	107	41
NUMBER OF RESPONDENTS	150	3107	41	26	44	39	97						11	36	109	139	5	108	42
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC		
Q35 YES	103 69%	2086 68%	6 15%~	18 72%~	42 95%~	37 95%~	69 71%	~	~	~	~	7 ~ 64%	26 72%~	77 71%~	98 71%~	4 80%~	70 65%~	33 79%		
NO	46 31%	964 32%	35 85%~	7 28%~	2 5%~	2 5%~	28 29%	~	~	~	~	4 ~ 36%	10 28%~	32 29%~	41 29%~	1 20%~	37 35%~	9 21%		
NOT ANSWERED	1	57	1																	1
VALID CASES	149	3050	41	25	44	39	97							11	36	109	139	5	107	42
NUMBER OF RESPONDENTS	150	3107	41	26	44	39	97							11	36	109	139	5	108	42
	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	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q36 NEVER	3 3%	25 1%		2 ~ 11%	1 2%		2 3%							1 4%	2 3%	3 3%		1 1%	2 6%
SOMETIMES	2 2%	112 5%			2 5%		2 3%								2 3%	2 2%		1 1%	1 3%
USUALLY	20 20%	405 20%	1 17%	5 28%	4 10%	10 28%	14 21%						2 29%	4 15%	16 21%	19 20%	1 25%	11 16%	9 28%
ALWAYS	76 75%	1518 74%	5 83%	11 61%	34 83%	26 72%	49 73%						5 71%	21 81%	55 73%	72 75%	3 75%	56 81%	20 63%
#ALWAYS + USUALLY (NET)	96 95%	1923 93%	6 100%	16 89%	38 93%	36 100%	63 94%						7 100%	25 96%	71 95%	91 95%	4 100%	67 97%	29 91%
TOP BOX SCORE	76 75%	1518 74%	5 83%	11 61%	34 83%	26 72%	49 73%						5 71%	21 81%	55 73%	72 75%	3 75%	56 81%	20 63%
NOT ANSWERED		2			1	1	2								2	2		1	1
VALID CASES	101	2060	6	18	41	36	67						7	26	75	96	4	69	32
NUMBER OF RESPONDENTS	103 100%	2086 100%	6 100%	18 100%	41 100%	37 100%	69 100%						7 100%	26 100%	77 100%	98 100%	4 100%	70 100%	33 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ ILND #	AMER PAC ALSK #	OTHR #	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q37 NEVER	2 1%	72 2%	1 2%	~	~	1 3%	2 2%	~	~	~	~	~	~	~	2 2%	2 1%	~	1 0.9%	1 2%
SOMETIMES	12 8%	238 8%	2 5%	2 8%	5 11%	3 8%	8 8%	~	~	~	~	~	~	3 8%	8 7%	9 7%	1 20%	8 8%	4 10%
USUALLY	41 28%	692 23%	11 27%	9 36%	10 23%	11 29%	26 27%	~	~	~	~	~	2 18%	12 33%	28 26%	40 29%	~	27 25%	14 33%
ALWAYS	93 63%	2035 67%	27 66%	14 56%	29 66%	23 61%	60 63%	~	~	~	~	~	9 82%	21 58%	70 65%	87 63%	4 80%	70 66%	23 55%
#ALWAYS + USUALLY (NET)	134 91%	2727 90%	38 93%	23 92%	39 89%	34 89%	86 90%	~	~	~	~	~	11 100%	33 92%	98 91%	127 92%	4 80%	97 92%	37 88%
TOP BOX SCORE	93 63%	2035 67%	27 66%	14 56%	29 66%	23 61%	60 63%	~	~	~	~	~	9 82%	21 58%	70 65%	87 63%	4 80%	70 66%	23 55%
NOT ANSWERED	2	70	1			1	1								1	1		2	
VALID CASES	148	3037	41	25	44	38	96						11	36	108	138	5	106	42
NUMBER OF RESPONDENTS	150	3107	41	26	44	39	97						11	36	109	139	5	108	42
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-#	AS-IAN#	NATV ILND#	AMER PAC ALSK#	OTHR##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q38 #YES	124 84%	2662 87%	38 95%~	20 80%~	40 91%~	26 67%~	79 82%	~	~	~	~	~	11 ~100%~	31 86%~	90 83%~	115 83%~	5 100%~	89 84%~	35 83%
NO	24 16%	384 13%	2 5%~	5 20%~	4 9%~	13 33%~	17 18%	~	~	~	~	~	~	5 ~14%~	18 17%~	23 17%~	~	17 ~16%~	7 17%
NOT ANSWERED		2	1	1			1								1	1		2	
VALID CASES	148	3046	40	25	44	39	96						11	36	108	138	5	106	42
NUMBER OF RESPONDENTS	150	3107	41	26	44	39	97						11	36	109	139	5	108	42
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q39 YES	58 39%	1240 41%	14 34%~	7 29%~	17 39%~	20 51%~	34 35%	~	~	~	~	~	4 ~ 36%~	16 44%~	39 36%~	52 38%~	3 60%~	43 41%~	15 36%
NO	90 61%	1789 59%	27 66%~	17 71%~	27 61%~	19 49%~	62 65%	~	~	~	~	~	7 ~ 64%~	20 56%~	69 64%~	86 62%~	2 40%~	63 59%~	27 64%
NOT ANSWERED	2	78	2				1								1	1			2
VALID CASES	148	3029	41	24	44	39	96						11	36	108	138	5	106	42
NUMBER OF RESPONDENTS	150	3107	41	26	44	39	97						11	36	109	139	5	108	42
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q40 NEVER	1 2%	81 7%*	~	~	~	5%	1 3%	~	~	~	~	~	~	1 3%	1 2%	~	1 3%	~
SOMETIMES	9 16%	139 12%	3 25%	1 14%	2 12%	3 16%	7 21%	~	~	~	~	1 25%	~	8 21%	7 14%	1 33%	5 13%	4 27%
USUALLY	22 40%	342 28%	2 17%	2 29%	9 53%	9 47%	14 42%	~	~	~	~	2 50%	5 33%	17 45%	22 44%	~	16 40%	6 40%
ALWAYS	23 42%	645 53%	7 58%	4 57%	6 35%	6 32%	11 33%	~	~	~	~	1 25%	10 67%	12 32%	20 40%	2 67%	18 45%	5 33%
#ALWAYS + USUALLY (NET)	45 82%	987 82%	9 75%	6 86%	15 88%	15 79%	25 76%	~	~	~	~	3 75%	15 100%	29 76%	42 84%	2 67%	34 85%	11 73%
TOP BOX SCORE	23 42%	645 53%	7 58%	4 57%	6 35%	6 32%	11 33%	~	~	~	~	1 25%	10 67%	12 32%	20 40%	2 67%	18 45%	5 33%
NOT ANSWERED	3	33	2			1	1						1	1	2		3	
VALID CASES	55	1207	12	7	17	19	33					4	15	38	50	3	40	15
NUMBER OF RESPONDENTS	58 100%	1240 100%	14 100%	7 100%	17 100%	20 100%	34 100%					4 100%	16 100%	39 100%	52 100%	3 100%	43 100%	15 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q41 WORST PERSONAL DOCTOR POSSIBLE	1 0.5%	6 0.1%	~	~	~	1 2%	1 0.8%	~	~	~	~	~	~	1 ~0.7%	1 0.5%	~	1 ~0.7%	
01		4 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
02		12 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
03	1 0.5%	23 0.5%	~	~	~	1 2%	1 0.8%	~	~	~	~	~	~	1 ~0.7%	1 0.5%	~	1 ~2%	
04		19 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
05	7 3%	105 2%	~	1 3%	3 5%	3 6%	5 4%	~	~	~	~	~	~	2 4%	5 3%	7 4%	5 3%	2 4%
06	2 1%	97 2%	1 2%	~	~	1 2%	2 2%	~	~	~	~	~	~	~	2 1%	2 1%	1 ~0.7%	1 2%
07	11 5%	261 6%	1 2%	~	5 8%	5 10%	8 6%	~	~	~	~	~	~	1 2%	8 6%	8 4%	7 5%	4 8%
08	33 16%	672 16%	14 29%	6 15%	8 12%	5 10%	22 17%	~	~	~	~	5 33%	6 12%	26 18%	33 17%	~	22 14%	11 23%
09	47 23%	839 20%	12 25%	10 26%	9 14%*	16 33%	28 22%	~	~	~	~	6 40%	11 22%	35 24%	45 24%	1 20%	39 25%	8 17%
BEST PERSONAL DOCTOR POSSIBLE	99 49%	2208 52%	20 42%	22 56%	40 62%*	17 35%	61 48%	~	~	~	~	4 27%	31 61%	66 46%	93 49%	4 80%	78 51%	21 44%
#8-10 (NET)	179 89%	3719 88%	46 96%	38 97%	57 88%	38 78%	111 87%	~	~	~	~	15 ~100%	48 94%	127 88%	171 90%	5 100%	139 91%	40 83%

Continued

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ ILND #	AMER IND/ PAC ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
9-10 (NET)	146 73%	3047 72%	32 67%~	32 82%~	49 75%	33 67%~	89 70%	~	~	~	~	10 ~ 67%~	42 82%*	101 70%	138 73%~	5 100%~	117 76%~	29 60%
NOT ANSWERED	9	191	2	4	1	2	5						2	5	6	1	8	1
VALID CASES	201	4246	48	39	65	49	128				15	15	51	144	190	5	153	48
NUMBER OF RESPONDENTS	210	4437	50	43	66	51	133				100%	100%	100%	100%	100%	100%	100%	100%
MEAN	8.98	8.98	9.02	9.31	9.15	8.43	8.86				8.93	9.29	8.88	8.97	9.80	9.07	8.69	
p stat_(*=Sig @ p<=.05)	.990		~	~	.229		~.101	~	~	~	~	~	~.040*	.111	~	~	~	

[ASKED IF Q30 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q42 YES	46 23%	1096 26%	6 12%~	2 5%~	16 25%	22 45%~	35 27%*	~	~	~	~	~	2 ~ 13%	8 16%	38 26%*	41 21%~	4 80%~	13 8%~	33 69%
NO	157 77%	3160 74%	43 88%~	38 95%~	49 75%	27 55%~	95 73%*	~	~	~	~	~	13 ~ 87%	43 84%	108 74%*	151 79%~	1 20%~	142 92%~	15 31%
NOT ANSWERED	7	181	1	3	1	2	3							2	3	4	1	6	1
VALID CASES	203	4256	49	40	65	49	130						15	51	146	192	5	155	48
NUMBER OF RESPONDENTS	210 100%	4437 100%	50 100%	43 100%	66 100%	51 100%	133 100%						15 100%	53 100%	149 100%	196 100%	6 100%	161 100%	49 100%

[ASKED IF Q30 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN #	NATV ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q43 #YES	43 93%	955 90%	6 100%	1 50%	16 100%	20 91%	32 91%	~	~	~	~	~	2 100%	8 100%	35 92%	39 95%	4 100%	13 100%	30 91%
NO	3 7%	109 10%	~	1 50%	~	2 9%	3 9%	~	~	~	~	~	~	~	3 8%	2 5%	~	~	3 9%
NOT ANSWERED		32																	
VALID CASES	46	1064	6	2	16	22	35						2	8	38	41	4	13	33
NUMBER OF RESPONDENTS	46	1096	6	2	16	22	35						2	8	38	41	4	13	33
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER				
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q44 #YES	40 87%	906 85%	5 83%	1 50%	14 88%	20 91%	30 86%	~	~	~	~	~	~100%	7 88%	33 87%	36 88%	4 100%	11 85%	29 88%	
NO	6 13%	155 15%	1 17%	1 50%	2 13%	2 9%	5 14%	~	~	~	~	~	~	1 13%	5 13%	5 12%	~	2 15%	4 12%	
NOT ANSWERED		35																		
VALID CASES	46	1061	6	2	16	22	35						2	8	38	41	4	13	33	
NUMBER OF RESPONDENTS	46	1096	6	2	16	22	35						2	8	38	41	4	13	33	
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q30 = YES AND Q42 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ ILND #	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	NO CCC	CCC
Q45 YES	32 13%	856 17%*	6 11%	2 4%~	7 9%	17 28%*	23 15%	~	~	~	~	4 ~ 25%~	4 6%*	27 16%*	28 12%~	3 60%~	19 10%*	13 23%
NO	214 87%	4125 83%*	49 89%	46 96%~	75 91%	44 72%*	132 85%	~	~	~	~	12 ~ 75%~	61 94%*	145 84%*	206 88%~	2 40%~	170 90%*	44 77%
NOT ANSWERED	15	328	1	5	1	8							2		1	1	15	
VALID CASES	246	4981	55	48	82	61	155					16	65	172	234	5	189	57
NUMBER OF RESPONDENTS	261 100%	5309 100%	56 100%	53 100%	83 100%	69 100%	155 100%					16 100%	67 100%	172 100%	235 100%	6 100%	204 100%	57 100%

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q46 NEVER	6 19%	59 7%	1 20%	1 ~	1 14%	4 24%	6 26%	~	~	~	~	~	~	~	6 22%	5 18%	1 33%	4 22%	2 15%
SOMETIMES	4 13%	127 15%	1 20%	1 50%	1 ~	2 12%	3 13%	~	~	~	~	~	~	1 25%	3 11%	4 14%	~	2 11%	2 15%
USUALLY	6 19%	239 29%	~	~	~	6 35%	5 22%	~	~	~	~	~	1 25%	6 22%	6 21%	~	~	4 22%	2 15%
ALWAYS	15 48%	410 49%	3 60%	1 50%	6 86%	5 29%	9 39%	~	~	~	~	~	3 75%	3 75%	12 44%	13 46%	2 67%	8 44%	7 54%
#ALWAYS + USUALLY (NET)	21 68%	649 78%	3 60%	1 50%	6 86%	11 65%	14 61%	~	~	~	~	~	4 100%	3 75%	18 67%	19 68%	2 67%	12 67%	9 69%
TOP BOX SCORE	15 48%	410 49%	3 60%	1 50%	6 86%	5 29%	9 39%	~	~	~	~	~	3 75%	3 75%	12 44%	13 46%	2 67%	8 44%	7 54%
NOT ANSWERED	1	21	1															1	
VALID CASES	31	835	5	2	7	17	23						4	4	27	28	3	18	13
NUMBER OF RESPONDENTS	32	856	6	2	7	17	23						4	4	27	28	3	19	13
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ILND #	AMER IND/PAC/ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q47 NONE	1 3%	48 6%~	~	~	14%~	1 4%~	~	~	~	~	~	~	1 4%~	1 4%~	1 6%~			
1 SPECIALIST	21 68%	509 61%~	3 60%~	1 50%~	6 86%~	11 65%~	14 61%~	~	~	~	~	4 ~100%~	3 75%~	18 67%~	19 68%~	2 67%~	13 72%~	8 62%
2	6 19%	170 20%~	2 40%~	1 50%~	~	3 18%~	5 22%~	~	~	~	~	~	1 25%~	5 19%~	5 18%~	1 33%~	3 17%~	3 23%
3	3 10%	53 6%~	~	~	~	3 13%~	3 13%~	~	~	~	~	~	3 11%~	3 11%~	~	1 6%~	2 15%	
4		27 3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
5 OR MORE SPECIALISTS		25 3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	1	24	1														1	
VALID CASES	31	832	5	2	7	17	23					4	4	27	28	3	18	13
NUMBER OF RESPONDENTS	32	856	6	2	7	17	23					4	4	27	28	3	19	13
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ ILND #	AMER IND/ NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q48 WORST SPECIALIST POSSIBLE	2 7%	7 0.9%	~	~	~	2 12%	2 9%	~	~	~	~	~	~	2 8%	2 7%	~	1 6%	1 8%	
01		1 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
02	1 3%	5 0.6%	~	~	~	1 6%	1 5%	~	~	~	~	~	~	1 4%	1 4%	~	1 6%	~	
03		7 0.9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
04		5 0.6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
05	2 7%	20 3%	1 20%	~	~	1 6%	1 5%	~	~	~	~	1 25%	~	2 8%	1 4%	1 33%	1 6%	1 8%	
06		24 3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
07	3 10%	51 7%	1 20%	1 50%	~	1 6%	1 5%	~	~	~	~	1 25%	1 25%	2 8%	3 11%	~	2 12%	1 8%	
08	6 20%	135 17%	~	~	1 17%	5 29%	6 27%	~	~	~	~	~	~	6 23%	6 22%	~	4 24%	2 15%	
09	5 17%	171 22%	1 20%	~	1 17%	3 18%	3 14%	~	~	~	~	2 50%	~	5 19%	5 19%	~	~	5 29%	
BEST SPECIALIST POSSIBLE	11 37%	353 45%	2 40%	1 50%	4 67%	4 24%	8 36%	~	~	~	~	~	~	3 75%	8 31%	9 33%	2 67%	3 18%	8 62%

Continued

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER				
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
#8-10 (NET)	22 73%	659 85%	3 60%	1 50%	6 100%	12 71%	17 77%	~	~	~	~	~	2 50%	3 75%	19 73%	20 74%	2 67%	12 71%	10 77%
9-10 (NET)	16 53%	524 67%	3 60%	1 50%	5 83%	7 41%	11 50%	~	~	~	~	~	2 50%	3 75%	13 50%	14 52%	2 67%	8 47%	8 62%
NOT ANSWERED		5																	
VALID CASES	30	779	5	2	6	17	22					4	4	26	27	3	17	13	
NUMBER OF RESPONDENTS	30	784	5	2	6	17	22					4	4	26	27	3	17	13	
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	
MEAN	7.87	8.73	8.20	8.50	9.50	7.12	7.68					7.50	9.25	7.65	7.81	8.33	7.53	8.31	
p_stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q49 YES	66 27%	1241 25%	17 31%	9 19%	22 27%	18 29%	40 26%	~	~	~	~	~	4 25%	21 32%	44 26%	62 26%	3 60%	49 26%	17 30%
NO	180 73%	3699 75%	37 69%	39 81%	60 73%	44 71%	115 74%	~	~	~	~	~	12 75%	45 68%	128 74%	173 74%	2 40%	140 74%	40 70%
NOT ANSWERED	15	369	2	5	1	7								1		1		15	
VALID CASES	246	4940	54	48	82	62	155						16	66	172	235	5	189	57
NUMBER OF RESPONDENTS	261 100%	5309 100%	56 100%	53 100%	83 100%	69 100%	155 100%						16 100%	67 100%	172 100%	235 100%	6 100%	204 100%	57 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q50 NEVER		36 3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	9 14%	228 19%	2 12%	2 25%	2 9%	3 18%	5 13%	~	~	~	~	~	1 25%	3 16%	6 14%	8 13%	1 33%	6 13%	3 18%
USUALLY	23 36%	350 29%	7 41%	2 25%	9 41%	5 29%	13 33%	~	~	~	~	~	1 25%	8 42%	14 32%	20 33%	2 67%	18 38%	5 29%
ALWAYS	32 50%	598 49%	8 47%	4 50%	11 50%	9 53%	22 55%	~	~	~	~	~	2 50%	8 42%	24 55%	32 53%	~	23 49%	9 53%
#ALWAYS + USUALLY (NET)	55 86%	948 78%	15 88%	6 75%	20 91%	14 82%	35 88%	~	~	~	~	~	3 75%	16 84%	38 86%	52 87%	2 67%	41 87%	14 82%
TOP BOX SCORE	32 50%	598 49%	8 47%	4 50%	11 50%	9 53%	22 55%	~	~	~	~	~	2 50%	8 42%	24 55%	32 53%	~	23 49%	9 53%
NOT ANSWERED		2		1		1								2		2		2	
VALID CASES	64	1212	17	8	22	17	40						4	19	44	60	3	47	17
NUMBER OF RESPONDENTS	66 100%	1241 100%	17 100%	9 100%	22 100%	18 100%	40 100%						4 100%	21 100%	44 100%	62 100%	3 100%	49 100%	17 100%

[ASKED IF Q49 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER IND/ALSK #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q51 NEVER		17 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	4 6%	87 7%	2 12%	~	2 9%	~	1 3%	~	~	~	~	1 25%	1 5%	2 5%	3 5%	~	4 9%	~
USUALLY	17 27%	274 23%	4 24%	4 50%	5 23%	4 24%	10 25%	~	~	~	~	1 25%	6 32%	11 25%	15 25%	2 67%	13 28%	4 24%
ALWAYS	43 67%	831 69%	11 65%	4 50%	15 68%	13 76%	29 73%	~	~	~	~	2 50%	12 63%	31 70%	42 70%	1 33%	30 64%	13 76%
#ALWAYS + USUALLY (NET)	60 94%	1105 91%	15 88%	8 100%	20 91%	17 100%	39 98%	~	~	~	~	3 75%	18 95%	42 95%	57 95%	3 100%	43 91%	17 100%
TOP BOX SCORE	43 67%	831 69%	11 65%	4 50%	15 68%	13 76%	29 73%	~	~	~	~	2 50%	12 63%	31 70%	42 70%	1 33%	30 64%	13 76%
NOT ANSWERED		2 32		1		1							2		2		2	
VALID CASES	64	1209	17	8	22	17	40					4	19	44	60	3	47	17
NUMBER OF RESPONDENTS	66	1241	17	9	22	18	40					4	21	44	62	3	49	17
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q52 YES	90 38%	1806 37%	17 32%	16 34%~	32 40%	25 42%	52 34%	~	~	~	~	~	6 38%~	29 45%	59 35%	84 37%~	3 60%~	67 37%	23 40%
NO	150 63%	3092 63%	36 68%	31 66%~	49 60%	34 58%	99 66%	~	~	~	~	~	10 63%~	35 55%	109 65%	145 63%~	2 40%~	116 63%	34 60%
NOT ANSWERED	21	411	3	6	2	10	4							3	4	6	1	21	
VALID CASES	240	4898	53	47	81	59	151						16	64	168	229	5	183	57
NUMBER OF RESPONDENTS	261 100%	5309 100%	56 100%	53 100%	83 100%	69 100%	155 100%						16 100%	67 100%	172 100%	235 100%	6 100%	204 100%	57 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
FQ53 NEVER	4 2%	83 2%	~	2%~	3%	2%	1 0.7%	~	~	~	~	2 ~ 13%	1 2%	3 2%	4 2%~	~	4 2%~	
SOMETIMES	17 7%	357 7%	3 6%	2 4%~	7 9%	5 8%	10 7%	~	~	~	~	~	7 ~ 11%	10 6%	16 7%~	1 20%~	14 8%	3 5%
USUALLY	30 13%	646 13%	6 11%	7 15%~	8 10%	9 15%	20 13%	~	~	~	~	2 ~ 13%	7 ~ 11%	22 13%	28 12%~	1 20%~	21 12%	9 16%
ALWAYS	186 78%	3743 78%	44 83%	36 78%~	62 78%	44 75%	119 79%	~	~	~	~	12 ~ 75%	47 76%	132 79%	178 79%~	3 60%~	141 78%	45 79%
#ALWAYS + USUALLY (NET)	216 91%	4389 91%	50 94%	43 93%~	70 89%	53 90%	139 93%	~	~	~	~	14 ~ 88%	54 87%	154 92%	206 91%~	4 80%~	162 90%	54 95%
TOP BOX SCORE	186 78%	3743 78%	44 83%	36 78%~	62 78%	44 75%	119 79%	~	~	~	~	12 ~ 75%	47 76%	132 79%	178 79%~	3 60%~	141 78%	45 79%
NOT ANSWERED	3	69		1	2		1						2	1	3		3	
VALID CASES	237	4829	53	46	79	59	150					16	62	167	226	5	180	57
NUMBER OF RESPONDENTS	240	4898	53	47	81	59	151					16	64	168	229	5	183	57
	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	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q54 WORST HEALTH PLAN POSSIBLE	2 0.8%	17 0.3%	~	~	~	2 3%	2 1%~	~	~	~	~	~	~	~	2 1%~	2 0.9%~	~	1 0.5%	1 2%
01		14 0.3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02	2 0.8%	21 0.4%	~	~	1 1%	1 2%	2 1%~	~	~	~	~	~	~	~	2 1%~	1 0.4%~	~	1 0.5%	1 2%
03	3 1%	35 0.7%	~	2 4%~	1 1%	~	2 1%	~	~	~	~	~	~	1 2%	2 1%	3 1%~	~	3 2%~	~
04	5 2%	62 1%	1 2%	~	~	4 7%	5 3%~	~	~	~	~	~	~	~	5 3%*	4 2%~	1 20%~	3 2%	2 4%
05	16 7%	266 5%	4 8%	4 8%~	3 4%	5 8%	10 7%	~	~	~	~	~	3 19%~	1 2%*	14 8%	15 6%~	~	11 6%	5 9%
06	17 7%	237 5%	2 4%	4 8%~	9 11%	2 3%	11 7%	~	~	~	~	~	1 6%~	4 6%	12 7%	15 6%~	1 20%~	11 6%	6 11%
07	22 9%	471 10%	6 11%	2 4%~	6 7%	8 13%	17 11%	~	~	~	~	~	2 13%~	2 3%*	19 11%*	21 9%~	~	18 10%	4 7%
08	48 20%	939 19%	12 23%	6 13%~	17 21%	13 21%	34 22%	~	~	~	~	~	4 25%~	9 14%	38 22%	48 21%~	~	39 21%	9 16%
09	36 15%	844 17%	8 15%	10 21%~	8 10%	10 16%	22 14%	~	~	~	~	~	3 19%~	9 14%	25 15%	35 15%~	~	29 16%	7 13%
BEST HEALTH PLAN POSSIBLE	92 38%	1982 41%	20 38%	20 42%~	36 44%	16 26%*	47 31%*	~	~	~	~	~	3 19%~	40 61%*	51 30%*	88 38%~	3 60%~	71 38%	21 38%
#8-10 (NET)	176 72%	3765 77%	40 75%	36 75%~	61 75%	39 64%	103 68%*	~	~	~	~	~	10 63%~	58 88%*	114 67%*	171 74%~	3 60%~	139 74%	37 66%

Continued

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ILND #	AMER IND/PAC ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
9-10 (NET)	128 53%	2826 58%	28 53%	30 63%	44 54%	26 43%	69 45%*	~	~	~	~	~	6 38%~	49 74%*	76 45%*	123 53%~	3 60%~	100 53%	28 50%
NOT ANSWERED	18	421	3	5	2	8	3							1	2	3	1	17	1
VALID CASES	243	4888	53	48	81	61	152					16	66	170	232	5	187	56	
NUMBER OF RESPONDENTS	261 100%	5309 100%	56 100%	53 100%	83 100%	69 100%	155 100%					16 100%	67 100%	172 100%	235 100%	6 100%	204 100%	57 100%	
MEAN	8.22	8.47	8.42	8.38	8.44	7.62	7.93					7.75	9.08	7.91	8.27	8.00	8.30	7.93	
p stat_(*=Sig @ p<=.05)		.048*	.422		~.216	.021*	.003*	~	~	~	~	~	~.000*	.000*	~	~	~.221		

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q55 YES	100 41%	1910 39%	23 43%	16 35%~	31 38%	30 48%	67 44%	~	~	~	~	~	6 38%	24 36%	74 43%	93 40%~	4 80%~	57 30%*	43 75%
NO	144 59%	3030 61%	31 57%	30 65%~	51 62%	32 52%	87 56%	~	~	~	~	~	10 63%	42 64%	97 57%	141 60%~	1 20%~	130 70%*	14 25%
NOT ANSWERED	17	369	2	7	1	7	1							1	1	1	1	17	
VALID CASES	244	4940	54	46	82	62	154						16	66	171	234	5	187	57
NUMBER OF RESPONDENTS	261 100%	5309 100%	56 100%	53 100%	83 100%	69 100%	155 100%						16 100%	67 100%	172 100%	235 100%	6 100%	204 100%	57 100%

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q56 NEVER	2 2%	42 2%	1 ~	1 6%~	1 ~	1 3%~	1 1%~	~	~	~	~	~	1 17%~	~	2 3%~	2 2%~	2 ~	1 2%~	1 2%
SOMETIMES	6 6%	156 8%	1 4%~	1 6%~	1 3%~	3 10%~	3 4%~	~	~	~	~	~	~	3 13%~	3 4%~	4 4%~	2 50%~	3 5%~	3 7%
USUALLY	26 26%	483 26%	4 17%~	4 25%~	9 30%~	9 30%~	18 27%~	~	~	~	~	~	2 33%~	6 25%~	20 27%~	25 27%~	1 25%~	15 27%~	11 26%
ALWAYS	65 66%	1206 64%	18 78%~	10 63%~	20 67%~	17 57%~	45 67%~	~	~	~	~	~	3 50%~	15 63%~	49 66%~	62 67%~	1 25%~	37 66%~	28 65%
#ALWAYS + USUALLY (NET)	91 92%	1689 90%	22 96%~	14 88%~	29 97%~	26 87%~	63 94%~	~	~	~	~	~	5 83%~	21 88%~	69 93%~	87 94%~	2 50%~	52 93%~	39 91%
TOP BOX SCORE	65 66%	1206 64%	18 78%~	10 63%~	20 67%~	17 57%~	45 67%~	~	~	~	~	~	3 50%~	15 63%~	49 66%~	62 67%~	1 25%~	37 66%~	28 65%
NOT ANSWERED		1 23			1														1
VALID CASES	99	1887	23	16	30	30	67						6	24	74	93	4	56	43
NUMBER OF RESPONDENTS	100	1910	23	16	31	30	67						6	24	74	93	4	57	43
	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	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q57 #YES	61 62%	1118 60%	17 74%~	10 63%~	16 53%~	18 60%~	40 60%~	~	~	~	~	~	3 50%~	17 71%~	43 58%~	57 61%~	3 75%~	36 64%~	25 58%
NO	38 38%	755 40%	6 26%~	6 38%~	14 47%~	12 40%~	27 40%~	~	~	~	~	~	3 50%~	7 29%~	31 42%~	36 39%~	1 25%~	20 36%~	18 42%
NOT ANSWERED	1	37			1													1	
VALID CASES	99	1873	23	16	30	30	67						6	24	74	93	4	56	43
NUMBER OF RESPONDENTS	100	1910	23	16	31	30	67						6	24	74	93	4	57	43
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q57A YES	200 84%	3983 82%	34 63%*	40 89%~	68 88%	58 92%*	122 80%*	~	~	~	~	~	15 94%~	57 88%	138 82%	193 84%~	4 80%~	149 82%	51 89%
NO	39 16%	876 18%	20 37%*	5 11%~	9 12%	5 8%*	30 20%*	~	~	~	~	~	1 6%~	8 12%	31 18%	38 16%~	1 20%~	33 18%	6 11%
NOT ANSWERED	22	450	2	8	6	6	3							2	3	4	1	22	
VALID CASES	239	4859	54	45	77	63	152						16	65	169	231	5	182	57
NUMBER OF RESPONDENTS	261	5309	56	53	83	69	155						16	67	172	235	6	204	57
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q57B YES	129 54%	2993 61%*	19 35%*	22 50%~	47 59%	41 65%*	76 49%	~	~	~	~	~	10 ~ 63%~	40 62%	86 50%	124 53%~	3 50%~	91 49%*	38 67%
NO	112 46%	1901 39%*	35 65%*	22 50%~	33 41%	22 35%*	78 51%	~	~	~	~	~	6 ~ 38%~	25 38%	85 50%	108 47%~	3 50%~	93 51%*	19 33%
NOT ANSWERED	20	415	2	9	3	6	1							2	1	3		20	
VALID CASES	241	4894	54	44	80	63	154						16	65	171	232	6	184	57
NUMBER OF RESPONDENTS	261 100%	5309 100%	56 100%	53 100%	83 100%	69 100%	155 100%						16 100%	67 100%	172 100%	235 100%	6 100%	204 100%	57 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER HAW/ IND/ PAC ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q57C NEVER	1 0.8%	52 2%	1 6%~	~	~	~	1 1%~	~	~	~	~	~	~	~	1 1%~	1 0.8%~	~	1 1%~	~
SOMETIMES	8 6%	168 6%	~	~	4 9%~	4 10%~	7 9%	~	~	~	~	~	~	1 3%~	7 8%~	8 7%~	~	7 8%~	1 3%
USUALLY	32 25%	532 18%	4 22%~	5 23%~	10 22%~	13 33%~	19 26%	~	~	~	~	~	3 30%~	10 25%~	22 26%~	31 25%~	1 33%~	19 21%~	13 35%
ALWAYS	85 67%	2201 75%	13 72%~	17 77%~	32 70%~	23 58%~	47 64%	~	~	~	~	~	7 70%~	29 73%~	54 64%~	82 67%~	2 67%~	62 70%~	23 62%
#ALWAYS + USUALLY (NET)	117 93%	2733 93%	17 94%~	22 100%~	42 91%~	36 90%~	66 89%*	~	~	~	~	~	10 100%~	39 98%~	76 90%~	113 93%~	3 100%~	81 91%~	36 97%
TOP BOX SCORE	85 67%	2201 75%	13 72%~	17 77%~	32 70%~	23 58%~	47 64%	~	~	~	~	~	7 70%~	29 73%~	54 64%~	82 67%~	2 67%~	62 70%~	23 62%
NOT ANSWERED	3	40	1		1	1	2							2	2		2	1	
VALID CASES	126	2953	18	22	46	40	74						10	40	84	122	3	89	37
NUMBER OF RESPONDENTS	129 100%	2993 100%	19 100%	22 100%	47 100%	41 100%	76 100%						10 100%	40 100%	86 100%	124 100%	3 100%	91 100%	38 100%

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER IND/ALSK #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q57D NEVER	33 33%	609 28%	5 29%	10 53%	4 11%	14 50%	19 38%	~	~	~	~	3 27%	10 26%	23 38%	32 33%	1 33%	24 31%	9 38%
SOMETIMES	16 16%	384 18%	1 6%	3 16%	6 16%	6 21%	11 22%	~	~	~	~	1 9%	4 11%	12 20%	15 16%	~	13 17%	3 13%
USUALLY	26 26%	484 22%	3 18%	4 21%	12 32%	7 25%	10 20%	~	~	~	~	3 27%	13 34%	13 21%	25 26%	1 33%	20 26%	6 25%
ALWAYS	26 26%	716 33%	8 47%	2 11%	15 41%	1 4%	10 20%	~	~	~	~	4 36%	11 29%	13 21%	24 25%	1 33%	20 26%	6 25%
#ALWAYS + USUALLY (NET)	52 51%	1200 55%	11 65%	6 32%	27 73%	8 29%	20 40%*	~	~	~	~	7 64%	24 63%	26 43%	49 51%	2 67%	40 52%	12 50%
TOP BOX SCORE	26 26%	716 33%	8 47%	2 11%	15 41%	1 4%	10 20%	~	~	~	~	4 36%	11 29%	13 21%	24 25%	1 33%	20 26%	6 25%
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	134	2639	36	25	42	31	99					5	28	105	132	2	104	30
NOT ANSWERED	26	477	3	9	4	10	6						1	6	7	1	23	3
VALID CASES	101	2193	17	19	37	28	50					11	38	61	96	3	77	24
NUMBER OF RESPONDENTS	261	5309	56	53	83	69	155					16	67	172	235	6	204	57
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-#	AS-IAN #	NATV ILND #	AMER PAC ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q57E EXTREMELY DIFFICULT	7 3%	164 3%	1 2%	2 4%	~	4 6%	5 3%	~	~	~	~	~	2 13%	~	7 4%*	7 3%~	~	4 2%	3 5%
01	3 1%	92 2%	1 2%	1 2%	~	1 2%	2 1%	~	~	~	~	~	~	1 2%	2 1%	2 0.9%~	~	2 1%	1 2%
02	6 2%	75 1%	1 2%	~	3 4%	2 3%	4 3%	~	~	~	~	~	~	1 2%	5 3%	6 3%~	~	5 3%	1 2%
03	11 4%	133 3%	5 9%	2 4%	1 1%*	3 5%	6 4%	~	~	~	~	~	~	5 8%	6 4%	10 4%~	1 20%~	10 5%	1 2%
04	5 2%	87 2%	1 2%	~	3 4%	1 2%	5 3%*	~	~	~	~	~	~	~	5 3%*	4 2%~	1 20%~	2 1%	3 5%
05	23 9%	371 7%	4 8%	3 6%	9 11%	7 11%	18 12%*	~	~	~	~	~	1 7%~	4 6%	18 11%	23 10%~	~	18 9%	5 9%
06	14 6%	203 4%	2 4%	3 6%	7 9%	2 3%	10 7%	~	~	~	~	~	1 7%~	3 5%	11 7%	14 6%~	~	8 4%	6 11%
07	23 9%	375 7%	6 11%	6 12%	5 6%	6 10%	12 8%	~	~	~	~	~	3 20%~	8 12%	15 9%	23 10%~	~	17 9%	6 11%
09	78 31%	1657 33%	15 28%	20 38%	21 26%	22 35%	41 28%	~	~	~	~	~	2 13%~	18 28%	43 26%*	60 27%~	1 20%~	63 33%	15 27%
EXTREMELY EASY	78 31%	1890 37%*	17 32%	15 29%	31 39%	15 24%	44 30%	~	~	~	~	~	6 40%~	25 38%	51 31%	76 34%~	2 40%~	64 33%	14 25%
#8-10 (NET)	156 63%	3547 70%*	32 60%	35 67%	52 65%	37 59%	85 58%*	~	~	~	~	~	8 53%~	43 66%	94 58%*	136 60%~	3 60%~	127 66%	29 53%
9-10 (NET)	156 63%	3547 70%*	32 60%	35 67%	52 65%	37 59%	85 58%*	~	~	~	~	~	8 53%~	43 66%	94 58%*	136 60%~	3 60%~	127 66%	29 53%

Continued

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
88		1																	
NOT ANSWERED	13	261	3	1	3	6	8						1	2	9	10	1	11	2
VALID CASES	248	5047	53	52	80	63	147						15	65	163	225	5	193	55
NUMBER OF RESPONDENTS	261	5309	56	53	83	69	155						16	67	172	235	6	204	57
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%
MEAN	7.70	8.02	7.57	7.92	8.02	7.22	7.42						7.33	8.06	7.41	7.64	7.20	7.84	7.20
p stat_(*=Sig @ p<=.05)		.051	.683	.500	.167	.140	.045*	~	~	~	~	~	~	.187	.011*	~	~	~	.145

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q58 EXCELLENT	122 51%	2100 43%*	32 62%	30 64%~	40 50%	20 32%*	82 53%	~	~	~	~	~	8 50%~	30 45%	90 53%	122 52%~	109 59%*	13 23%	
VERY GOOD	78 32%	1734 35%	13 25%	13 28%~	26 33%	26 42%	47 31%	~	~	~	~	~	7 44%~	22 33%	55 32%	78 33%~	55 30%	23 41%	
GOOD	35 15%	854 17%	7 13%	4 9%~	10 13%	14 23%	22 14%	~	~	~	~	~	1 6%~	12 18%	23 13%	35 15%~	19 10%*	16 29%	
FAIR	5 2%	210 4%*	~	~	4 5%	1 2%	2 1%	~	~	~	~	~	~	3 4%	2 1%	~	5 83%~	2 1%	3 5%
POOR	1 0.4%	17 0.3%	~	~	~	1 2%	1 0.6%	~	~	~	~	~	~	~	1 ~0.6%	~	1 ~17%~	~	1 2%
#EXCELLENT + VERY GOOD + GOOD (NET)	235 98%	4688 95%*	52 100%~	47 100%~	76 95%	60 97%	151 98%	~	~	~	~	~	16 ~100%~	64 96%	168 98%	235 100%~	183 99%	52 93%	
NOT ANSWERED	20	394	4	6	3	7	1								1			19	1
VALID CASES	241	4915	52	47	80	62	154						16	67	171	235	6	185	56
NUMBER OF RESPONDENTS	261 100%	5309 100%	56 100%	53 100%	83 100%	69 100%	155 100%						16 100%	67 100%	172 100%	235 100%	6 100%	204 100%	57 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ PAC ILND #	AMER ALSK #	OTHR #	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q59 EXCELLENT	105 44%	2151 44%	33 63%*	24 53%~	36 45%	12 19%*	66 43%	~	~	~	~	~	6 40%~	32 48%	72 43%	104 45%~	1 17%~	96 52%*	9 16%
VERY GOOD	76 32%	1382 28%	15 29%	13 29%~	22 28%	26 42%	47 31%	~	~	~	~	~	7 47%~	19 28%	56 33%	75 32%~	1 17%~	61 33%	15 27%
GOOD	39 16%	930 19%	3 6%*	5 11%~	15 19%	16 26%*	28 18%	~	~	~	~	~	2 13%~	9 13%	29 17%	39 17%~	~	22 12%*	17 31%
FAIR	16 7%	366 7%	1 2%*	2 4%~	5 6%	8 13%	11 7%	~	~	~	~	~	~	5 7%	11 7%	13 6%~	3 50%~	5 3%*	11 20%
POOR	3 1%	88 2%	~	1 2%~	2 3%	~	1 0.7%	~	~	~	~	~	~	2 3%	1 0.6%	2 0.9%~	1 17%~	~	3 5%
#EXCELLENT + VERY GOOD + GOOD (NET)	220 92%	4463 91%	51 98%*	42 93%~	73 91%	54 87%	141 92%	~	~	~	~	~	15 100%~	60 90%	157 93%	218 94%~	2 33%~	179 97%*	41 75%
NOT ANSWERED	22	392	4	8	3	7	2						1		3	2		20	2
VALID CASES	239	4917	52	45	80	62	153						15	67	169	233	6	184	55
NUMBER OF RESPONDENTS	261 100%	5309 100%	56 100%	53 100%	83 100%	69 100%	155 100%						16 100%	67 100%	172 100%	235 100%	6 100%	204 100%	57 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q60 YES	47 20%	1056 22%	3 6%*	4 9%~	18 23%	22 35%*	34 22%	~	~	~	~	~	1 6%~	12 18%	35 20%	41 18%~	5 83%~	9 5%*	38 67%
NO	194 80%	3853 78%	49 94%*	43 91%~	62 78%	40 65%*	121 78%	~	~	~	~	~	15 94%~	54 82%	137 80%	193 82%~	1 17%~	175 95%*	19 33%
NOT ANSWERED	20	400	4	6	3	7								1		1		20	
VALID CASES	241	4909	52	47	80	62	155						16	66	172	234	6	184	57
NUMBER OF RESPONDENTS	261 100%	5309 100%	56 100%	53 100%	83 100%	69 100%	155 100%						16 100%	67 100%	172 100%	235 100%	6 100%	204 100%	57 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q61 YES	41 89%	843 81%~	2 67%~	3 75%~	16 89%~	20 95%~	29 88%~	~	~	~	~	~100%~	11 92%~	30 88%~	35 88%~	5 100%~	4 44%~	37 100%~
NO	5 11%	192 19%~	1 33%~	1 25%~	2 11%~	1 5%~	4 12%~	~	~	~	~	~	1 8%~	4 12%~	5 13%~	~	5 56%~	~
NOT ANSWERED	1	21				1	1							1	1			1
VALID CASES	46	1035	3	4	18	21	33				1	12	34	40	5		9	37
NUMBER OF RESPONDENTS	47	1056	3	4	18	22	34				1	12	35	41	5		9	38
	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%		100%	100%

[ASKED IF Q60 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ PAC ILND #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q62 YES	36 92%	748 91%	1 50%	3 100%	14 93%	18 95%	28 97%	~	~	~	~	~	1 ~100%	7 78%	29 97%	31 94%	4 80%	36 ~100%	
NO	3 8%	77 9%	1 50%	~	1 7%	1 5%	1 3%	~	~	~	~	~	~	2 22%	1 3%	2 6%	1 20%	3 100%	
NOT ANSWERED	2	18			1	1								2		2		1	1
VALID CASES	39	825	2	3	15	19	29					1	9	30	33	5	3	36	
NUMBER OF RESPONDENTS	41	843	2	3	16	20	29					1	11	30	35	5	4	37	
	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	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER PAC ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
Q63 YES	38 16%	832 17%	5 10%	5 11%	13 16%	15 24%	26 17%	~	~	~	~	~	2 13%	10 15%	28 16%	34 15%	4 67%	~	3 2%*	35 61%
NO	203 84%	4059 83%	47 90%	42 89%	67 84%	47 76%	128 83%	~	~	~	~	~	14 88%	57 85%	143 84%	200 85%	2 33%	~	181 98%*	22 39%
NOT ANSWERED	20	418	4	6	3	7	1								1	1			20	
VALID CASES	241	4891	52	47	80	62	154						16	67	171	234	6		184	57
NUMBER OF RESPONDENTS	261	5309	56	53	83	69	155						16	67	172	235	6		204	57
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%		100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q64 YES	32 91%	689 85%	3 60%	4 100%	13 100%	12 92%	21 91%	~	~	~	~	~	2 ~100%	9 90%	23 92%	28 90%	4 100%	32 ~94%
NO	3 9%	123 15%	2 40%	~	~	1 8%	2 9%	~	~	~	~	~	1 10%	2 8%	3 10%	~	1 100%	2 6%
NOT ANSWERED	3	20		1		2	3							3	3		2	1
VALID CASES	35	812	5	4	13	13	23					2	10	25	31	4	1	34
NUMBER OF RESPONDENTS	38	832	5	5	13	15	26					2	10	28	34	4	3	35
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q63 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER PAC ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q65 YES	32 100%	662 97%	3 100%	4 100%	13 100%	12 100%	21 100%	~	~	~	~	~	2 ~100%	9 100%	23 100%	28 100%	4 100%	32 ~100%	
NO		19 3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		8																	
VALID CASES	32	681	3	4	13	12	21						2	9	23	28	4		32
NUMBER OF RESPONDENTS	32 100%	689 100%	3 100%	4 100%	13 100%	12 100%	21 100%						2 100%	9 100%	23 100%	28 100%	4 100%		32 100%

[ASKED IF Q63 = YES AND Q64 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
Q66 YES	21 9%	644 13%*	3 6%	3 6%~	8 10%	7 11%	15 10%	~	~	~	~	~	~	6 9%	15 9%	18 8%~	2 33%~	2 1%*	19 33%	
NO	221 91%	4243 87%*	49 94%	44 94%~	72 90%	56 89%	140 90%	~	~	~	~	~	16 ~100%~	61 91%	157 91%	217 92%~	4 67%~	183 99%*	38 67%	
NOT ANSWERED	19	422	4	6	3	6													19	
VALID CASES	242	4887	52	47	80	63	155						16	67	172	235	6	185	57	
NUMBER OF RESPONDENTS	261	5309	56	53	83	69	155						16	67	172	235	6	204	57	
	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	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q67 YES	19 90%	508 81%	2 67%	3 100%	7 88%	7 100%	14 93%	~	~	~	~	~	5 83%	14 93%	16 89%	2 100%	19 ~100%	
NO	2 10%	121 19%	1 33%	~	1 13%	~	1 7%	~	~	~	~	~	1 17%	1 7%	2 11%	~	2 ~100%	
NOT ANSWERED		15																
VALID CASES	21	629	3	3	8	7	15						6	15	18	2	2	19
NUMBER OF RESPONDENTS	21 100%	644 100%	3 100%	3 100%	8 100%	7 100%	15 100%						6 100%	15 100%	18 100%	2 100%	2 100%	19 100%

[ASKED IF Q66 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER PAC ALSK NATV #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC	
Q68 YES	19 100%	477 96%	2 100%	3 100%	7 100%	7 100%	14 100%	~	~	~	~	~	~	5 100%	14 100%	16 100%	2 100%	19 100%	~	
NO		22 4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		9																		
VALID CASES	19	499	2	3	7	7	14							5	14	16	2	19		
NUMBER OF RESPONDENTS	19 100%	508 100%	2 100%	3 100%	7 100%	7 100%	14 100%							5 100%	14 100%	16 100%	2 100%	19 100%		

[ASKED IF Q66 = YES AND Q67 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ ILND #	AMER IND/ ALS #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q69 YES	18 8%	558 11%*	5 10%	2 4%~	6 8%	5 8%	13 8%	~	~	~	~	~	1 6%~	4 6%	14 8%	15 6%~	3 50%~	4 2%*	14 25%
NO	222 93%	4342 89%*	47 90%	45 96%~	73 92%	57 92%	140 92%	~	~	~	~	~	15 ~ 94%~	63 94%	156 92%	218 94%~	3 50%~	180 98%*	42 75%
NOT ANSWERED	21	409	4	6	4	7	2							2	2	2		20	1
VALID CASES	240	4900	52	47	79	62	153						16	67	170	233	6	184	56
NUMBER OF RESPONDENTS	261 100%	5309 100%	56 100%	53 100%	83 100%	69 100%	155 100%						16 100%	67 100%	172 100%	235 100%	6 100%	204 100%	57 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC	
Q70 YES	14 82%	389 72%	3 75%	1 50%	5 83%	5 100%	10 83%	~	~	~	~	~	1 ~100%	3 75%	11 85%	11 79%	3 100%	1 25%	13 100%
NO	3 18%	149 28%	1 25%	1 50%	1 17%	~	2 17%	~	~	~	~	~	1 25%	2 15%	3 21%	~	3 75%	~	~
NOT ANSWERED	1	20	1				1							1	1				1
VALID CASES	17	538	4	2	6	5	12					1	4	13	14	3		4	13
NUMBER OF RESPONDENTS	18	558	5	2	6	5	13					1	4	14	15	3		4	14
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%		100%	100%

[ASKED IF Q69 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER PAC ALSK NATV #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q71 YES	13 93%	357 93%	3 100%	1 100%	5 100%	4 80%	9 90%	~	~	~	~	~	1 ~100%	3 100%	10 91%	10 91%	3 100%	13 ~100%	
NO	1 7%	27 7%	~	~	~	1 20%	1 10%	~	~	~	~	~	~	~	1 9%	1 9%	~	1 100%	
NOT ANSWERED		5																	
VALID CASES	14	384	3	1	5	5	10						1	3	11	11	3	1	13
NUMBER OF RESPONDENTS	14	389	3	1	5	5	10						1	3	11	11	3	1	13
	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	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q72 YES	38 16%	813 17%	5 10%	4 9%	14 18%	15 24%	27 18%	~	~	~	~	~	3 19%	8 12%	30 18%	35 15%	2 33%	5 3%*	33 58%
NO	203 84%	4085 83%	47 90%	43 91%	65 82%	48 76%	127 82%	~	~	~	~	~	13 81%	59 88%	141 82%	199 85%	4 67%	179 97%*	24 42%
NOT ANSWERED	20	411	4	6	4	6	1								1	1		20	
VALID CASES	241	4898	52	47	79	63	154						16	67	171	234	6	184	57
NUMBER OF RESPONDENTS	261	5309	56	53	83	69	155						16	67	172	235	6	204	57
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ PAC ILND #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q73 YES	32 89%	726 92%	4 80%	4 100%	12 86%	12 92%	22 88%	~	~	~	~	~	3 ~100%	7 88%	25 89%	29 88%	2 100%	32 ~100%
NO	4 11%	64 8%	1 20%	~	2 14%	1 8%	3 12%	~	~	~	~	~	1 13%	3 11%	4 12%	~	4 ~100%	
NOT ANSWERED	2	23				2	2							2	2		1	1
VALID CASES	36	790	5	4	14	13	25					3	8	28	33	2	4	32
NUMBER OF RESPONDENTS	38	813	5	4	14	15	27					3	8	30	35	2	5	33
	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	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NQ74																		
3 YEARS OLD OR LESS	56 21%	908 17%	56 100%	~	~	~	37 24%	~	~	~	~	3 ~ 19%	12 18%	40 23%	52 22%	~	50 25%*	6 11%
4 TO 7 YEARS OLD	53 20%	1228 23%	~	53 ~100%	~	~	28 18%	~	~	~	~	6 ~ 38%	12 18%	34 20%	47 20%	~	46 23%	7 12%
8 TO 12 YEARS OLD	83 32%	1650 31%	~	~	83 ~100%	~	46 30%	~	~	~	~	3 ~ 19%	31 46%*	48 28%	76 32%	4 67%	63 31%	20 35%
13 OR OLDER	69 26%	1523 29%	~	~	69 ~100%	~	44 28%	~	~	~	~	4 ~ 25%	12 18%*	50 29%	60 26%	2 33%	45 22%*	24 42%
VALID CASES	261	5309	56	53	83	69	155					16	67	172	235	6	204	57
NUMBER OF RESPONDENTS	261	5309	56	53	83	69	155					16	67	172	235	6	204	57
	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	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ ILND #	AMER ALS #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NQ75 MALE	131 50%	2736 52%	31 55%	25 47%	38 46%	37 54%	80 52%	~	~	~	~	~	9 56%	30 45%	89 52%	117 50%	3 50%	102 50%	29 51%
FEMALE	130 50%	2573 48%	25 45%	28 53%	45 54%	32 46%	75 48%	~	~	~	~	~	7 44%	37 55%	83 48%	118 50%	3 50%	102 50%	28 49%
VALID CASES	261	5309	56	53	83	69	155						16	67	172	235	6	204	57
NUMBER OF RESPONDENTS	261 100%	5309 100%	56 100%	53 100%	83 100%	69 100%	155 100%						16 100%	67 100%	172 100%	235 100%	6 100%	204 100%	57 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q76 HISPANIC OR LATINO	67 28%	1726 35%*	12 23%	12 26%~	31 39%*	12 19%	~	~	~	~	~	~	~	67 ~100%~	64 ~28%~	3 50%~	56 31%	11 19%
NOT HISPANIC OR LATINO	172 72%	3146 65%*	40 77%	34 74%~	48 61%*	50 81%	153 100%~	~	~	~	~	~	16 ~100%~	172 ~100%~	168 72%~	3 50%~	126 69%	46 81%
NOT ANSWERED	22	437	4	7	4	7	2								3		22	
VALID CASES	239	4872	52	46	79	62	153					16	67	172	232	6	182	57
NUMBER OF RESPONDENTS	261 100%	5309 100%	56 100%	53 100%	83 100%	69 100%	155 100%					16 100%	67 100%	172 100%	235 100%	6 100%	204 100%	57 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER PAC	ALSK NATV	OTHR MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q77.1 YES	212 81%	3787 71%*	48 86%	40 75%	67 81%	57 83%	155 100%~	~	~	~	~	~	16 ~100%~	41 61%*	169 98%*	208 89%~	3 50%~	158 77%*	54 95%
NO	49 19%	1522 29%*	8 14%	13 25%	16 19%	12 17%	~	~	~	~	~	~	26 39%*	3 2%*	27 11%~	3 50%~	46 23%*	3 5%	
VALID CASES	261	5309	56	53	83	69	155						16	67	172	235	6	204	57
NUMBER OF RESPONDENTS	261 100%	5309 100%	56 100%	53 100%	83 100%	69 100%	155 100%						16 100%	67 100%	172 100%	235 100%	6 100%	204 100%	57 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER PAC	ALSK NATV	MUL- OTHR	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q77.2 YES	5 2%	204 4%*	1 2%	1 2%	3 4%	~	~	~	~	~	~	~	~	3 19%	2 3%	3 2%	5 2%	2 1%	3 5%	
NO	256 98%	5105 96%*	55 98%	52 98%	80 96%	69 100%	155 100%	~	~	~	~	~	~	13 81%	65 97%	169 98%	230 98%	6 100%	202 99%	54 95%
VALID CASES	261	5309	56	53	83	69	155							16	67	172	235	6	204	57
NUMBER OF RESPONDENTS	261 100%	5309 100%	56 100%	53 100%	83 100%	69 100%	155 100%							16 100%	67 100%	172 100%	235 100%	6 100%	204 100%	57 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN #	NATV ILND #	AMER ALS #	OTH R ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.3 YES	5 2%	184 3%	1 2%	1 2%	2 2%	1 1%	~	~	~	~	~	~	2 13%	3 4%	2 1%	5 2%	~	4 2%	1 2%
NO	256 98%	5125 97%	55 98%	52 98%	81 98%	68 99%	155 100%	~	~	~	~	~	14 88%	64 96%	170 99%	230 98%	6 100%	200 98%	56 98%
VALID CASES	261	5309	56	53	83	69	155						16	67	172	235	6	204	57
NUMBER OF RESPONDENTS	261 100%	5309 100%	56 100%	53 100%	83 100%	69 100%	155 100%						16 100%	67 100%	172 100%	235 100%	6 100%	204 100%	57 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN #	NATV ILND #	AMER PAC #	ALS K #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.4 YES	4 2%	83 2%		2 ~ 4%	1 1%	1 1%	~	~	~	~	~	~	~ 19%	3 1%	3 2%	4 2%	~	3 1%	1 2%	
NO	257 98%	5226 98%	56 100%	51 96%	82 99%	68 99%	155 100%	~	~	~	~	~	~ 81%	13 99%	66 98%	169 98%	231 98%	6 100%	201 99%	56 98%
VALID CASES	261	5309	56	53	83	69	155						16	67	172	235	6	204	57	
NUMBER OF RESPONDENTS	261 100%	5309 100%	56 100%	53 100%	83 100%	69 100%	155 100%						16 100%	67 100%	172 100%	235 100%	6 100%	204 100%	57 100%	

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN #	NATV ILND #	AMER ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.5 YES	12 5%	335 6%	3 5%	2 4%	5 6%	2 3%	~	~	~	~	~	~	8 50%	4 6%	8 5%	12 5%	~	9 4%	3 5%
NO	249 95%	4974 94%	53 95%	51 96%	78 94%	67 97%	155 100%	~	~	~	~	~	8 50%	63 94%	164 95%	223 95%	6 100%	195 96%	54 95%
VALID CASES	261	5309	56	53	83	69	155						16	67	172	235	6	204	57
NUMBER OF RESPONDENTS	261 100%	5309 100%	56 100%	53 100%	83 100%	69 100%	155 100%						16 100%	67 100%	172 100%	235 100%	6 100%	204 100%	57 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR-AMER #	AS-IAN #	NATV ILND #	AMER PAC ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q77.6 YES	14 5%	374 7%	2 4%	3 6%	5 6%	4 6%	~	~	~	~	~	~	2 13%	11 16%*	3 2%*	14 6%~	~	12 6%	2 4%
NO	247 95%	4935 93%	54 96%	50 94%	78 94%	65 94%	155 100%~	~	~	~	~	~	14 88%	56 84%*	169 98%*	221 94%~	6 100%~	192 94%	55 96%
VALID CASES	261	5309	56	53	83	69	155						16	67	172	235	6	204	57
NUMBER OF RESPONDENTS	261 100%	5309 100%	56 100%	53 100%	83 100%	69 100%	155 100%						16 100%	67 100%	172 100%	235 100%	6 100%	204 100%	57 100%

Q78 WHAT IS YOUR AGE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ ILND #	AMER ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q78 UNDER 18	8 3%	141 3%	1 2%	1 2%~	2 3%	4 6%	3 2%	~	~	~	~	~	1 6%~	4 6%	4 2%	6 3%~	2 33%~	7 4%	1 2%
18 TO 24	12 5%	161 3%	11 22%*	1 2%~	~	~	5 3%	~	~	~	~	~	1 6%~	6 9%	6 4%	12 5%~	~	12 7%*	~
25 TO 34	82 34%	1564 32%	26 51%*	22 47%~	27 35%	7 11%*	55 36%	~	~	~	~	~	2 13%~	24 37%	55 32%	80 35%~	1 17%~	65 35%	17 30%
35 TO 44	88 37%	1821 37%	13 25%*	19 40%~	34 44%	22 34%	51 33%	~	~	~	~	~	11 69%~	24 37%	64 38%	86 37%~	2 33%~	70 38%	18 32%
45 TO 54	38 16%	797 16%	~	2 4%~	12 15%	24 38%*	29 19%	~	~	~	~	~	1 6%~	6 9%	31 18%	35 15%~	1 17%~	24 13%	14 25%
55 TO 64	9 4%	266 5%	~	1 2%~	2 3%	6 9%*	8 5%	~	~	~	~	~	~	~	8 5%	9 4%~	~	4 2%	5 9%
65 TO 74	3 1%	116 2%	~	1 2%~	1 1%	1 2%	2 1%	~	~	~	~	~	~	1 2%	2 1%	3 1%~	~	2 1%	1 2%
75 OR OLDER		16 0.3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	21	427	5	6	5	5	2							2	2	4		20	1
VALID CASES	240	4882	51	47	78	64	153						16	65	170	231	6	184	56
NUMBER OF RESPONDENTS	261	5309	56	53	83	69	155						16	67	172	235	6	204	57
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

Q79 ARE YOU MALE OR FEMALE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q79 MALE	32 13%	702 14%	3 6%*	3 6%~	16 20%*	10 16%	20 13%	~	~	~	~	~	1 6%~	11 17%	21 12%	30 13%~	2 33%~	22 12%	10 18%
FEMALE	208 87%	4191 86%	48 94%*	44 94%~	63 80%*	53 84%	134 87%	~	~	~	~	~	15 94%~	54 83%	150 88%	202 87%~	4 67%~	162 88%	46 82%
NOT ANSWERED	21	416	5	6	4	6	1							2	1	3		20	1
VALID CASES	240	4893	51	47	79	63	154						16	65	171	232	6	184	56
NUMBER OF RESPONDENTS	261 100%	5309 100%	56 100%	53 100%	83 100%	69 100%	155 100%						16 100%	67 100%	172 100%	235 100%	6 100%	204 100%	57 100%

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

	BANT	BANT	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	OT1	OT2	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ILND #	AMER PAC ALSK #	OTHR #	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q80																			
8TH GRADE OR LESS	11 5%	479 10%*	1 2%	2 4%~	6 8%	2 3%	1 0.7%*	~	~	~	~	~	~	10 16%*	~	9 4%~	2 33%~	10 5%	1 2%
SOME HIGH SCHOOL BUT DID NOT GRADUATE	19 8%	480 10%	2 4%	5 11%~	9 12%	3 5%	5 3%*	~	~	~	~	~	~	14 22%*	5 3%*	18 8%~	1 17%~	15 8%	4 7%
HIGH SCHOOL GRADUATE OR GED	62 26%	1452 30%	13 25%	6 13%~	26 33%	17 27%	36 24%	~	~	~	~	3 19%~	22 34%	39 23%	60 26%~	1 17%~	50 27%	12 22%	
SOME COLLEGE OR 2-YEAR DEGREE	92 39%	1752 36%	24 47%	20 43%~	22 28%*	26 42%	70 46%*	~	~	~	~	6 38%~	14 22%*	76 45%*	90 39%~	1 17%~	65 36%	27 49%	
4-YEAR COLLEGE GRADUATE	29 12%	437 9%	10 20%	9 19%~	6 8%	4 6%	22 14%	~	~	~	~	4 25%~	2 3%*	27 16%*	29 13%~	~	27 15%*	2 4%	
MORE THAN 4-YEAR COLLEGE DEGREE	25 11%	238 5%*	1 2%*	5 11%~	9 12%	10 16%	19 12%	~	~	~	~	3 19%~	2 3%*	23 14%*	24 10%~	1 17%~	16 9%	9 16%	
NOT ANSWERED	23	471	5	6	5	7	2						3	2	5		21	2	
VALID CASES	238	4838	51	47	78	62	153					16	64	170	230	6	183	55	
NUMBER OF RESPONDENTS	261	5309	56	53	83	69	155					16	67	172	235	6	204	57	
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

Q81 HOW ARE YOU RELATED TO THE CHILD?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ILND #	AMER PAC ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q81 MOTHER OR FATHER	220 92%	4466 93%	51 100%~	44 94%~	71 90%	54 89%	139 91%	~	~	~	~	~	15 94%~	61 95%	155 91%	213 93%~	5 83%~	172 94%	48 87%
GRANDPARENT	11 5%	186 4%	~	3 6%~	5 6%	3 5%	7 5%	~	~	~	~	~	1 6%~	3 5%	8 5%	11 5%~	~	7 4%	4 7%
AUNT OR UNCLE	1 0.4%	33 0.7%	~	~	~	1 2%	1 0.7%~	~	~	~	~	~	~	~	1 ~0.6%~	1 ~0.4%~	~	1 ~0.5%~	~
OLDER BROTHER OR SISTER		12 0.2%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
OTHER RELATIVE		6 0.1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
LEGAL GUARDIAN	5 2%	73 2%	~	~	3 4%	2 3%	5 3%~	~	~	~	~	~	~	~	5 3%*	4 2%~	1 17%~	2 1%	3 5%
SOMEONE ELSE	1 0.4%	33 0.7%	~	~	~	1 2%	1 0.7%~	~	~	~	~	~	~	~	1 ~0.6%~	1 ~0.4%~	~	1 ~0.5%~	~
NOT ANSWERED	23	500	5	6	4	8	2							3	2	5		21	2
VALID CASES	238	4809	51	47	79	61	153					16	64	170	230	6	183	55	
NUMBER OF RESPONDENTS	261 100%	5309 100%	56 100%	53 100%	83 100%	69 100%	155 100%					16 100%	67 100%	172 100%	235 100%	6 100%	204 100%	57 100%	

Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q82 YES	4 3%	101 3%	~	3%~	4%~	2%~	2%~	~	~	~	~	~	6%~	2%~	3%~	~	0.8%~	8%
NO	152 97%	2894 97%	100%~	97%~	96%~	98%~	98%~	~	~	~	~	6	33 94%~	117 98%~	147 97%~	3 100%~	118 99%~	34 92%
NOT ANSWERED	4	59			2	2	1						2	1	3		2	2
VALID CASES	156	2995	28	37	47	44	112					6	35	119	151	3	119	37
NUMBER OF RESPONDENTS	160 100%	3054 100%	100%	100%	100%	100%	100%					6 100%	37 100%	120 100%	154 100%	3 100%	121 100%	39 100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.1 YES	3 75%	53 52%	~	~	100%	100%	2 100%	~	~	~	~	~	~	1 50%	2 100%	3 75%	~	1 100%	2 67%
NO	1 25%	48 48%	~	100%	~	~	~	~	~	~	~	~	~	1 50%	~	1 25%	~	~	1 33%
VALID CASES	4	101		1	2	1	2							2	2	4		1	3
NUMBER OF RESPONDENTS	4	101		1	2	1	2							2	2	4		1	3
	100%	100%		100%	100%	100%	100%							100%	100%	100%		100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.2 YES	3 75%	31 31%~	~	~100%	~100%	~100%	~	~	~	~	~	~	1 50%	2 100%	3 75%~	~	1 100%	2 67%
NO	1 25%	70 69%~	~100%	~	~	~	~	~	~	~	~	~	1 50%	1 25%	~	~	1 33%	
VALID CASES	4	101	1	2	1	2							2	2	4		1	3
NUMBER OF RESPONDENTS	4	101	1	2	1	2							2	2	4		1	3
	100%	100%	100%	100%	100%	100%							100%	100%	100%		100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER				
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q83.3 YES	2 50%	13 13%	~100%	1	1	50%	~	~	~	~	~	~	~	2 ~100%	2 ~50%	2	2	~	2 ~67%	
NO	2 50%	88 87%	~	1	1	50%	1 100%	~	~	~	~	~	~	2 ~100%	2 50%	2	2	~100%	1 33%	
VALID CASES	4	101		1	2	1	2							2	2	4	4		1	3
NUMBER OF RESPONDENTS	4 100%	101 100%		1 100%	2 100%	1 100%	2 100%							2 100%	2 100%	4 100%	4		1 100%	3 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q83.4 YES	1 25%	43 43%	~	~	50%	~	~	~	~	~	~	~	50%	~	25%	~	33%
NO	3 75%	58 57%	~100%	~	50%	~100%	~	~	~	~	~	~	50%	~100%	75%	~	100%
VALID CASES	4	101	1	2	1	2							2	2	4	1	3
NUMBER OF RESPONDENTS	4	101	1	2	1	2							2	2	4	1	3
	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER IND/ ALSK	OTHR MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q83.5 YES		6 6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NO	4 100%	95 94%	~100%	~100%	~100%	~100%	~	~	~	~	~	~	~	~100%	~100%	~100%	~100%	
VALID CASES	4	101	1	2	1	2								2	2	4	1	3
NUMBER OF RESPONDENTS	4	101	1	2	1	2								2	2	4	1	3
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%

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

NQ14 RATING OF ALL CHILD'S HEALTH CARE

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ILND #	AMER IND/PAC ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
NQ14 0-6	22 13%	286 8%	4 9%	2 6%	8 15%	8 18%	14 13%	~	~	~	~	~	2 18%	5 11%	15 12%	19 12%	1 20%	15 12%	7 16%
7-8	46 26%	994 29%	15 35%	9 26%	11 20%	11 25%	34 30%	~	~	~	~	~	1 9%	7 16%	36 29%	43 26%	~	32 25%	14 31%
9-10	107 61%	2180 63%	24 56%	23 68%	35 65%	25 57%	64 57%	~	~	~	~	~	8 73%	32 73%	73 59%	101 62%	4 80%	83 64%	24 53%
VALID CASES	175	3460	43	34	54	44	112						11	44	124	163	5	130	45
NUMBER OF RESPONDENTS	175 100%	3460 100%	43 100%	34 100%	54 100%	44 100%	112 100%						11 100%	44 100%	124 100%	163 100%	5 100%	130 100%	45 100%
MEAN	2.49	2.55	2.47	2.62	2.50	2.39	2.45						2.55	2.61	2.47	2.50	2.60	2.52	2.38
p stat_(*=Sig @ p<=.05)		.237	~	~	.859	~	.331	~	~	~	~	~	~	~	.603	~	~	~	~

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ILND #	AMER IND/PAC/ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR		NO CCC	CCC
NQ41 0-6	11 5%	266 6%	1 2%	1 3%	3 5%	6 12%	9 7%	~	~	~	~	~	2 4%	9 6%	11 6%		7 5%	4 8%
7-8	44 22%	933 22%	15 31%	6 15%	13 20%	10 20%	30 23%	~	~	~	~	5 33%	7 14%	34 24%	41 22%		29 19%	15 31%
9-10	146 73%	3047 72%	32 67%	32 82%	49 75%	33 67%	89 70%	~	~	~	~	10 67%	42 82%*	101 70%	138 73%~	5 100%~	117 76%~	29 60%
VALID CASES	201	4246	48	39	65	49	128					15	51	144	190	5	153	48
NUMBER OF RESPONDENTS	201 100%	4246 100%	48 100%	39 100%	65 100%	49 100%	128 100%					15 100%	51 100%	144 100%	190 100%	5 100%	153 100%	48 100%
MEAN	2.67	2.65	2.65	2.79	2.71	2.55	2.63					2.67	2.78	2.64	2.67	3.00	2.72	2.52
p stat_(*=Sig @ p<=.05)		.683	~	~	.541	~	.107	~	~	~	~	~	.106	.201	~	~	~	~

[ASKED IF Q30 = YES]

NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ILND #	AMER PAC ALSK NATV #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
NQ48 0-6	5 17%	69 9%	1 20%	~	~	4 24%	4 18%	~	~	~	~	1 25%	5 19%	4 15%	1 33%	3 18%	2 15%	
7-8	9 30%	186 24%	1 20%	1 50%	1 17%	6 35%	7 32%	~	~	~	~	1 25%	1 25%	8 31%	9 33%	~	6 35%	3 23%
9-10	16 53%	524 67%	3 60%	1 50%	5 83%	7 41%	11 50%	~	~	~	~	2 50%	3 75%	13 50%	14 52%	2 67%	8 47%	8 62%
VALID CASES	30	779	5	2	6	17	22					4	4	26	27	3	17	13
NUMBER OF RESPONDENTS	30 100%	779 100%	5 100%	2 100%	6 100%	17 100%	22 100%					4 100%	4 100%	26 100%	27 100%	3 100%	17 100%	13 100%
MEAN	2.37	2.58	2.40	2.50	2.83	2.18	2.32					2.25	2.75	2.31	2.37	2.33	2.29	2.46
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

NQ54 RATING OF CHILD'S HEALTH PLAN

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN #	NATV HAW/ILND #	AMER PAC ALSK NATV #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
NQ54 0-6	45 19%	652 13%*	7 13%	10 21%~	14 17%	14 23%	32 21%	~	~	~	~	~	4 ~ 25%~	6 9%*	37 22%*	40 17%~	2 40%~	30 16%	15 27%
7-8	70 29%	1410 29%	18 34%	8 17%~	23 28%	21 34%*	51 34%*	~	~	~	~	~	6 ~ 38%~	11 17%*	57 34%*	69 30%~	~	57 30%	13 23%
9-10	128 53%	2826 58%	28 53%	30 63%~	44 54%	26 43%	69 45%*	~	~	~	~	~	6 ~ 38%~	49 74%*	76 45%*	123 53%~	3 60%~	100 53%	28 50%
VALID CASES	243	4888	53	48	81	61	152						16	66	170	232	5	187	56
NUMBER OF RESPONDENTS	243 100%	4888 100%	53 100%	48 100%	81 100%	61 100%	152 100%						16 100%	66 100%	170 100%	232 100%	5 100%	187 100%	56 100%
MEAN	2.34	2.44	2.40	2.42	2.37	2.20	2.24						2.13	2.65	2.23	2.36	2.20	2.37	2.23
p stat_(*=Sig @ p<=.05)		.021*	.561	~.682	.099	.010*	~	~	~	~	~	~	~.000*	.000*	~	~	~.228		

GETTING NEEDED CARE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NPRBSEE4 NQ46	2.16	2.27	2.20	2.00	2.71	1.94	2.00					2.75	2.50	2.11	2.14	2.33	2.11	2.23	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCARNES4 NQ15	2.37	2.49	2.55	2.50	2.35	2.12	2.34					2.55	2.42	2.37	2.39	2.20	2.41	2.25	
p stat_(*=Sig @ p<=.05)		.015*	~	~	.749	~	.481	~	~	~	~	~	~	.943	~	~	~	~	
COMPOSITE	2.27	2.38	2.37	2.25	2.53	2.03	2.17	x	x	x	x	x	2.65	2.46	2.24	2.27	2.27	2.26	2.24
p stat_(*=Sig @ p<=.05)		.000*	~	~	.000*	~	.000*	~	~	~	~	~	~	.262	~	~	~	~	

GETTING CARE QUICKLY

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	ILND NATV	OTHR MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NCARSN4 NQ4	2.57	2.65	2.72	2.73	2.65	2.32	2.51					2.50	2.88	2.51	2.63	2.67	2.62	2.45	
p stat_(*=Sig @ p<=.05)	.311		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NAPGET4 NQ6	2.36	2.46	2.71	2.38	2.25	2.12	2.37					2.40	2.41	2.36	2.39	2.40	2.35	2.38	
p stat_(*=Sig @ p<=.05)	.055		~	~	.258	~	.776	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.46	2.56	2.71	2.55	2.45	2.22	2.44	x	x	x	x	x	2.45	2.65	2.43	2.51	2.53	2.48	2.42
p stat_(*=Sig @ p<=.05)	.012*		~	~	.857	~	.469	~	~	~	~	~	~	.281	~	~	~	~	

HOW WELL DOCTORS COMMUNICATE

	BANT OT1	BANT OT2	AGE				RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER				
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NDREXPL4 NQ32	2.74	2.75	2.80	2.77	2.79	2.58	2.75				2.91	2.67	2.76	2.73	2.80	2.77	2.66		
p stat_(*=Sig @ p<=.05)	.680		~	~	~		~.731	~	~	~	~	~	~	~	~	~	~		
NDRLSTN4 NQ33	2.76	2.77	2.73	2.85	2.91	2.55	2.73				2.91	2.86	2.75	2.77	3.00	2.79	2.68		
p stat_(*=Sig @ p<=.05)	.858		~	~	~		~.327	~	~	~	~	~	~	~	~	~	~		
NDRESPU4 NQ34	2.80	2.81	2.80	2.84	2.93	2.63	2.78				3.00	2.86	2.81	2.81	3.00	2.82	2.76		
p stat_(*=Sig @ p<=.05)	.973		~	~	~		~.361	~	~	~	~	~	~	~	~	~	~		
NDRTMEN4 NQ37	2.53	2.57	2.59	2.48	2.55	2.50	2.52				2.82	2.50	2.56	2.55	2.60	2.58	2.43		
p stat_(*=Sig @ p<=.05)	.525		~	~	~		~.748	~	~	~	~	~	~	~	~	~	~		
COMPOSITE	2.71	2.72	2.73	2.73	2.79	2.57	2.69	x	x	x	x	x	2.91	2.72	2.72	2.72	2.85	2.74	2.63
p stat_(*=Sig @ p<=.05)	.668		~	~	~		~.574	~	~	~	~	~	~	~	~	~	~		

CUSTOMER SERVICE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	ILND NATV	OTHR MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NPBCLCS4 NQ50	2.36	2.28	2.35	2.25	2.41	2.35	2.42					2.25	2.26	2.41	2.40	1.67	2.36	2.35	
p stat_(*=Sig @ p<=.05)	.388		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCSRESP NQ51	2.61	2.60	2.53	2.50	2.59	2.76	2.70					2.25	2.58	2.66	2.65	2.33	2.55	2.76	
p stat_(*=Sig @ p<=.05)	.918		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.48	2.44	2.44	2.38	2.50	2.56	2.56	x	x	x	x	x	2.25	2.42	2.53	2.53	2.00	2.46	2.56
p stat_(*=Sig @ p<=.05)	.562		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

SHARED DECISION MAKING

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR NATV	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NNRXWHY NQ11	2.80	2.87	2.85	2.67	2.75	2.88	2.71					2.00	3.00	2.67	2.77	3.00	2.80	2.81	
p stat_(*=Sig @ p<=.05)	.392		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NNRXWYNT NQ12	2.29	2.42	2.08	2.67	2.25	2.38	2.29					2.00	2.37	2.27	2.32	2.00	2.20	2.43	
p stat_(*=Sig @ p<=.05)	.344		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NRXBST NQ13	2.57	2.58	2.08	3.00	2.75	2.63	2.50					2.00	2.79	2.47	2.55	3.00	2.47	2.71	
p stat_(*=Sig @ p<=.05)	.938		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.56	2.62	2.33	2.78	2.58	2.63	2.50	x	x	x	x	x	2.00	2.72	2.47	2.55	2.67	2.49	2.65
p stat_(*=Sig @ p<=.05)	.429		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

ACCESS TO SPECIALIZED SERVICES

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NEZMDEQ NQ20	2.29	2.30	3.00	3.00	1.50	2.00	2.33						2.00	2.33	2.50	1.00	2.67	2.00	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NEZTHP NQ23	2.14	2.19	2.50	3.00	1.83	1.83	2.13						2.00	2.13	2.24	1.33	2.33	2.00	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NEZTC NQ26	2.24	2.18	1.33	2.33	2.18	2.38	2.23				2.00		2.33	2.17	2.19	3.00	2.20	2.27	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.22	2.22	2.28	2.78	1.84	2.07	2.23	x	x	x	x	x	2.00	2.11	2.21	2.31	1.78	2.40	2.09
p stat_(*=Sig @ p<=.05)	.984		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

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

	BANTO T1	BANTO T2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
PRBSEE4 Q46	68%	78%	60%	50%	86%	65%	61%						100%	75%	67%	68%	67%	67%	69%
CARNES4 Q15	86%	89%	91%	91%	82%	81%	85%						100%	84%	87%	87%	80%	87%	82%
AVERAGE	76.73	83.54	75.45	70.59	83.77	72.83	72.78	x	x	x	x	x	100.0	79.72	76.83	77.18	73.33	76.84	75.52

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

	BANTO T1	BANTO T2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
CARSN4 Q4	86%	91%	89%	91%	90%	80%	84%						83%	100%	84%	89%	100%	88%	82%
APGET4 Q6	82%	86%	93%	83%	80%	74%	83%						90%	85%	82%	83%	100%	80%	90%
AVERAGE	84.35	88.77	90.79	86.83	85.20	76.90	83.12	x	x	x	x	x	86.67	92.31	83.06	85.91	100.0	84.15	85.78

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
DREXPL4 Q32	96%	95%	100%	92%	98%	92%	95%					100%	97%	95%	96%	100%	96%	95%	
DRLSTN4 Q33	97%	95%	100%	96%	100%	92%	97%					100%	100%	97%	98%	100%	98%	95%	
DRESPU4 Q34	98%	96%	100%	100%	98%	95%	97%					100%	100%	97%	98%	100%	99%	95%	
DRTMEN4 Q37	91%	90%	93%	92%	89%	89%	90%					100%	92%	91%	92%	80%	92%	88%	
AVERAGE	95.4	94.0	98.2	95.1	96.0	92.1	94.5	x	x	x	x	x	100	97.2	95.1	95.8	95.0	96.2	93.4

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

	BANTO T1	BANTO T2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
PBCLCS4 Q50	86%	78%	88%	75%	91%	82%	88%						75%	84%	86%	87%	67%	87%	82%
CSRESP Q51	94%	91%	88%	100%	91%	100%	98%						75%	95%	95%	95%	100%	91%	100%
AVERAGE	89.84	84.81	88.24	87.50	90.91	91.18	92.50	x	x	x	x	x	75.00	89.47	90.91	90.83	83.33	89.36	91.18

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NRXWHY Q11	90%	94%	92%	83%	88%	94%	86%					50%	100%	83%	89%	100%	90%	90%	
NRXWYNT Q12	65%	71%	54%	83%	63%	69%	64%					50%	68%	63%	66%	50%	60%	71%	
RXBST Q13	78%	79%	54%	100%	88%	81%	75%					50%	89%	73%	77%	100%	73%	86%	
AVERAGE	77.8	81.2	66.7	88.9	79.2	81.3	75.0	x	x	x	x	x	50.0	86.0	73.3	77.3	83.3	74.4	82.5

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
EZMDEQ Q20	71%	76%	100%	100%	50%	50%	67%						100%	67%	83%	0%	100%	50%	
EZTHP Q23	62%	72%	75%	100%	50%	50%	63%						50%	63%	65%	33%	67%	58%	
EZTC Q26	76%	71%	33%	83%	73%	81%	77%				100%		67%	76%	73%	100%	73%	77%	
AVERAGE	69.6	72.8	69.4	94.4	57.6	60.3	68.7	x	x	x	x	x	100	72.2	68.3	73.7	44.4	80.0	61.8

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN #	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
DRTLKU Q38	84%	87%	95%	80%	91%	67%	82%						100%	86%	83%	83%	100%	84%	83%
DRUNCON Q43	93%	90%	100%	50%	100%	91%	91%						100%	100%	92%	95%	100%	100%	91%
DRUNFAM Q44	87%	85%	83%	50%	88%	91%	86%						100%	88%	87%	88%	100%	85%	88%
AVERAGE	88.1	87.5	92.8	60.0	92.8	82.8	86.5	x	x	x	x	x	100	91.2	87.4	88.8	100	89.5	87.4

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
HELPCONT Q18	94%	92%	100%	100%	86%	100%	80%					100%	100%	83%	91%	100%	100%	89%	
HLPCOORD Q29	58%	62%	70%	17%	63%	61%	52%					50%	82%	51%	55%	80%	50%	68%	
AVERAGE	75.9	77.1	85.0	58.3	74.1	80.6	65.8	x	x	x	x	x	75.0	90.9	67.3	72.8	90.0	75.0	78.5

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

2. YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

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

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

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

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

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

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

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

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

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

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

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

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3. YOUR PERSONAL DOCTOR

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

4. GETTING HEALTH CARE FROM SPECIALISTS

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

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5. YOUR HEALTH PLAN

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

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

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

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

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

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

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

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

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

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

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

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

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5. ADDITIONAL QUESTIONS

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

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

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

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

5. ACCESS TO DENTAL CARE

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

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

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

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

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

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

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6. ABOUT YOU

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

3. SPECIALIZED SERVICES

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

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

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

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

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

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

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

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

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

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

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

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4. YOUR CHILD'S PERSONAL DOCTOR

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

5. GETTING HEALTH CARE FROM SPECIALISTS

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

6. YOUR CHILD'S HEALTH PLAN

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

PAGE QUESTION TITLE

7. PRESCRIPTION MEDICINES

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

7. ACCESS TO DENTAL CARE

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

8. ABOUT YOUR CHILD AND YOU

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

88 Q78 WHAT IS YOUR AGE?

89 Q79 ARE YOU MALE OR FEMALE?

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

91 Q81 HOW ARE YOU RELATED TO THE CHILD?

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

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

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

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

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

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

9. RATINGS

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

10. COMPOSITES

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

11. GLOBAL PROPORTION COMPOSITES

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

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

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

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).

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Correct Mark 

Incorrect Marks   

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

Yes → *Go to Question 1*
 No

↓ **START HERE** ↓

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

- Yes → *Go to Question 3*
- No

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

YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

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

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

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

0 1 2 3 4 5 6 7 8 9 10

Worst Health Care Possible Best Health Care Possible

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

- Never
- Sometimes
- Usually
- Always

YOUR PERSONAL DOCTOR

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

- Yes
- No → Go to Question 24

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → Go to Question 23

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

- Never
- Sometimes
- Usually
- Always

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

0 1 2 3 4 5 6 7 8 9 10

Worst Personal Doctor Possible Best Personal Doctor Possible



GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

- Yes
 No → *Go to Question 28*

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

- Never
 Sometimes
 Usually
 Always

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

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

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

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

YOUR HEALTH PLAN

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

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

- Yes
 No → *Go to Question 30*

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

- Never
 Sometimes
 Usually
 Always

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

- Yes
 No → *Go to Question 33*

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

- Never
 Sometimes
 Usually
 Always

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

- Never
 Sometimes
 Usually
 Always

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

- Yes
 No → *Go to Question 35*



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

- Never
- Sometimes
- Usually
- Always

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

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

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

- Yes
- No → *Go to Question 35c*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 35e*

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

- Never
- Sometimes
- Usually
- Always

ADDITIONAL QUESTIONS

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes, definitely
- Yes, somewhat
- No

ACCESS TO DENTAL CARE

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

- Yes
- No



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?

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



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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No
- Don't know

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

- Yes
- No
- Don't know

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

- Yes
- No

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

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

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

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

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

- Yes
- No → *Go to Question 50*

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

- Yes
- No

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

- Yes
- No → *Go to Question 52*

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

- Yes
- No

52. What is your age?

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



53. Are you male or female?

- Male
- Female

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

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

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

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

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

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

57. Did someone help you complete this survey?

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

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

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

THANK YOU

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

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

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



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

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

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Correct
Mark 

Incorrect
Marks



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

- Yes → *Go to Question 1*
- No

↓ **START HERE** ↓

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

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

- Yes → *Go to Question 3*
- No

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

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

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

- 3. In the last 6 months, did your child have an illness, injury, or condition that needed care right away in a clinic, emergency room, or doctor's office?
 - Yes
 - No → *Go to Question 5*

- 4. In the last 6 months, when your child needed care right away, how often did your child get care as soon as he or she needed?
 - Never
 - Sometimes
 - Usually
 - Always

- 5. In the last 6 months, did you make any appointments for a check-up or routine care for your child at a doctor's office or clinic?
 - Yes
 - No → *Go to Question 7*

- 6. In the last 6 months, when you made an appointment for a check-up or routine care for your child at a doctor's office or clinic, how often did you get an appointment as soon as your child needed?
 - Never
 - Sometimes
 - Usually
 - Always

- 7. In the last 6 months, not counting the times your child went to an emergency room, how many times did he or she go to a doctor's office or clinic to get health care?
 - None → *Go to Question 16*
 - 1 time
 - 2
 - 3
 - 4
 - 5 to 9
 - 10 or more times

- 8. In the last 6 months, did you and your child's doctor or other health provider talk about specific things you could do to prevent illness in your child?
 - Yes
 - No

- 9. In the last 6 months, how often did you have your questions answered by your child's doctor or other health providers?
 - Never
 - Sometimes
 - Usually
 - Always

- 10. In the last 6 months, did you and your child's doctor or other health provider talk about starting or stopping a prescription medicine for your child?
 - Yes
 - No → *Go to Question 14*

- 11. Did you and a doctor or other health provider talk about the reasons you might want your child to take a medicine?
 - Yes
 - No



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

- Yes
- No

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

- Yes
- No

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No

SPECIALIZED SERVICES

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

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

- Yes
- No → *Go to Question 22*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 25*



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 28*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 30*

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

- Yes
- No

YOUR CHILD'S PERSONAL DOCTOR

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

- Yes
- No → *Go to Question 45*

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

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

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

- Never
- Sometimes
- Usually
- Always

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

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



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

- Yes
- No

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

- Yes
- No

GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

- Yes
- No → *Go to Question 49*

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

- Never
- Sometimes
- Usually
- Always

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

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

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

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

YOUR CHILD'S HEALTH PLAN

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

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

- Yes
- No → *Go to Question 52*

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

- Never
- Sometimes
- Usually
- Always



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 54*

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

- Never
- Sometimes
- Usually
- Always

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

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

PRESCRIPTION MEDICINES

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

- Yes
- No → *Go to Question 57a*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

ACCESS TO DENTAL CARE

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

- Yes
- No

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

- Yes
- No → *Go to Question 57d*

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

- Never
- Sometimes
- Usually
- Always



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

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

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

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

ABOUT YOUR CHILD AND YOU

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Yes
- No → **Go to Question 63**

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

- Yes
- No → **Go to Question 63**

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

- Yes
- No

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

- Yes
- No → **Go to Question 66**

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

- Yes
- No → **Go to Question 66**

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

- Yes
- No

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

- Yes
- No → **Go to Question 69**

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

- Yes
- No → **Go to Question 69**



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

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

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

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

81. How are you related to the child?

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

82. Did someone help you complete this survey?

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

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

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

THANK YOU

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

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

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





897-12



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CZPCE

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

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

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

INSTRUCCIONES PARA EL CUESTIONARIO

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

Marca
Correcta 

Marca
Incorrecta   

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

- Sí ➔ *Pase a la Pregunta 1*
- No

↓ **COMIENCE AQUI** ↓

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

- Sí ➔ *Pase a la pregunta 3*
- No

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

LA ATENCIÓN MÉDICA QUE USTED RECIBIÓ EN LOS ÚLTIMOS 6 MESES

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

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

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

13. Usando un número del 0 al 10, el 0 siendo la peor atención médica posible y el 10 la mejor atención médica posible, ¿qué número usaría para calificar a toda la atención médica que ha recibido en los últimos 6 meses?

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

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

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

SU DOCTOR PERSONAL

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

- Sí
- No → *Pase a la pregunta 24*

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

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

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

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

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

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

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 23*

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

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

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

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



LA ATENCIÓN MÉDICA QUE RECIBIÓ DE ESPECIALISTAS

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

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

Sí
 No → *Pase a la pregunta 28*

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

Nunca
 A veces
 La mayoría de las veces
 Siempre

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

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

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

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

SU PLAN DE SALUD

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

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

Sí
 No → *Pase a la pregunta 30*

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

Nunca
 A veces
 La mayoría de las veces
 Siempre

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

Sí
 No → *Pase a la pregunta 33*

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

Nunca
 A veces
 La mayoría de las veces
 Siempre

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

Nunca
 A veces
 La mayoría de las veces
 Siempre

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

Sí
 No → *Pase a la pregunta 35*



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?

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

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 rapido 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 interrumpió 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 condesendiente, 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



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

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

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

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

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

- Sí
- No
- No sé

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

- Sí
- No
- No sé

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

- Sí
- No

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 50*

49. ¿Se trata de una enfermedad o problema que ha durado al menos 3 meses? No incluya el embarazo ni la menopausia.

- Sí
- No

50. ¿Necesita o toma ahora alguna medicina recetada por un doctor? No incluya anticonceptivos.

- Sí
- No → *Pase a la pregunta 52*

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

- Sí
- No

52. ¿Qué edad tiene?

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

53. ¿Es usted hombre o mujer?

- Hombre
- Mujer

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

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

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

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

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

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

57. ¿Le ayudó alguien a completar esta encuesta?

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

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

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

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

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

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



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

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

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

INSTRUCCIONES PARA EL CUESTIONARIO

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

Marca
Correcta ●

Marca
Incorrecta



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

- Sí → *Pase a la Pregunta 1*
- No

↓ **COMIENCE AQUI** ↓

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

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

- Sí → *Pase a la pregunta 3*
- No

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

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

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

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

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

12. ¿Hablaron usted y un doctor u otro profesional médico sobre las razones por las que tal vez usted no quiera que su niño tome una medicina?

- Sí
- No

13. Cuando hablaron de comenzar o suspender una medicina recetada para su niño, ¿le preguntó un doctor u otro profesional médico sobre lo que usted creía que sería lo mejor para su niño?

- Sí
- No

14. Usando un número del 0 al 10, el 0 siendo la peor atención médica posible y el 10 la mejor atención médica posible, ¿qué número usaría para calificar toda la atención médica que su niño ha recibido en los últimos 6 meses?

-
- 0 1 2 3 4 5 6 7 8 9 10
- La peor atención médica posible La mejor atención médica posible

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

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

16. ¿Está matriculado actualmente su niño en algún tipo de escuela o guardería/cuidado infantil?

- Sí
- No → *Pase a la pregunta 19*

17. En los últimos 6 meses, ¿necesitó que los doctores o los otros profesionales médicos de su niño se pusieran en contacto con una escuela o guardería acerca de la salud o la atención médica de su niño?

- Sí
- No → *Pase a la pregunta 19*

18. En los últimos 6 meses, ¿consiguió la ayuda de los doctores o los otros profesionales médicos de su niño que necesitaba para ponerse en contacto con la escuela o guardería de su niño?

- Sí
- No

SERVICIOS ESPECIALIZADOS

19. En el equipo o dispositivo médico especial se incluye un andador, silla de ruedas, nebulizador, tubos de alimentación o equipo de oxígeno. En los últimos 6 meses, ¿consiguió o intentó conseguir algún equipo o dispositivo médico especial para su niño?

- Sí
- No → *Pase a la pregunta 22*

20. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir equipo o dispositivos médicos especiales para su niño?

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

21. ¿Alguien del plan de salud, del consultorio médico o clínica de su niño le ayudó a conseguir el equipo o dispositivos médicos especiales para su niño?

- Sí
- No

22. En los últimos 6 meses, ¿consiguió o intentó conseguir terapia especial para su niño tal como terapia física, ocupacional o del habla?

- Sí
- No → *Pase a la pregunta 25*

23. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir esta terapia para su niño?

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

24. ¿Alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a conseguir esta terapia para su niño?

- Sí
- No

25. En los últimos 6 meses, ¿consiguió o intentó conseguir tratamiento o consejería para su niño, para un problema emocional, de desarrollo o de comportamiento?

- Sí
- No → *Pase a la pregunta 28*

26. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir este tratamiento o consejería para su niño?

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

27. ¿Alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a conseguir este tratamiento o consejería para su niño?

- Sí
- No

28. En los últimos 6 meses, ¿recibió su niño atención de más de un tipo de profesional médico, o usó más de un tipo de servicio de salud?

- Sí
- No → *Pase a la pregunta 30*

29. En los últimos 6 meses, ¿alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a coordinar la atención médica de su niño entre estos profesionales o servicios diferentes?

- Sí
- No

EL DOCTOR PERSONAL DE SU NIÑO

30. El doctor personal es aquel a quien su niño va si necesita un chequeo, tiene un problema de salud o si se enferma o lastima. ¿Tiene su niño un doctor personal?

- Sí
- No → *Pase a la pregunta 45*

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

- Ninguna vez → *Pase a la pregunta 41*
- 1 vez
- 2
- 3
- 4
- 5 a 9
- 10 veces o más



- 31a. En los últimos 6 meses, ¿con qué frecuencia se le hizo difícil hablar o entender al doctor personal de su niño porque hablaban idiomas diferentes?
- Nunca
 - A veces
 - La mayoría de las veces
 - Siempre
32. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño le explicó las cosas sobre la salud de su niño de una manera fácil de entender?
- Nunca
 - A veces
 - La mayoría de las veces
 - Siempre
33. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño le escuchó a usted con atención?
- Nunca
 - A veces
 - La mayoría de las veces
 - Siempre
34. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño demostró respeto por lo que usted tenía que decir?
- Nunca
 - A veces
 - La mayoría de las veces
 - Siempre
35. ¿Su niño puede hablar con los doctores sobre su atención médica?
- Sí
 - No → *Pase a la pregunta 37*

36. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño le explicó las cosas a su niño de una manera fácil de entender?
- Nunca
 - A veces
 - La mayoría de las veces
 - Siempre
37. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño pasó suficiente tiempo con su niño?
- Nunca
 - A veces
 - La mayoría de las veces
 - Siempre
38. En los últimos 6 meses, ¿habló el doctor personal de su niño con usted sobre cómo su niño se estaba sintiendo, estaba creciendo o se estaba comportando?
- Sí
 - No
39. En los últimos 6 meses, ¿atendió a su niño algún doctor u otro profesional médico además de su doctor personal?
- Sí
 - No → *Pase a la pregunta 41*
40. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño parecía estar informado y al día acerca de la atención que su niño había recibido de estos doctores u otros profesionales médicos?
- Nunca
 - A veces
 - La mayoría de las veces
 - Siempre

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 difícil Extremadamente fácil

ACERCA DE USTED Y DE SU NIÑO

58. En general, ¿cómo calificaría toda la salud de su niño?

- Excelente
- Muy buena
- Buena
- Regular
- Mala

59. En general, ¿cómo calificaría toda la salud mental o emocional de su niño?

- Excelente
- Muy buena
- Buena
- Regular
- Mala

60. ¿Actualmente necesita o usa su niño una medicina recetada por un doctor (aparte de vitaminas)?

- Sí
- No → *Pase a la pregunta 63*

61. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?

- Sí
- No → *Pase a la pregunta 63*

62. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?

- Sí
- No



63. ¿Necesita o usa su niño más servicios médicos, de salud mental o educativos de lo que es normal para la mayoría de los niños de la misma edad?

- Sí
- No → *Pase a la pregunta 66*

64. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?

- Sí
- No → *Pase a la pregunta 66*

65. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?

- Sí
- No

66. ¿Está su niño limitado o impedido de alguna manera en su habilidad de hacer lo que pueden hacer la mayoría de los niños de la misma edad?

- Sí
- No → *Pase a la pregunta 69*

67. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?

- Sí
- No → *Pase a la pregunta 69*

68. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?

- Sí
- No

69. ¿Necesita o recibe su niño terapia especial, tal como terapia física, ocupacional o del habla?

- Sí
- No → *Pase a la pregunta 72*

70. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?

- Sí
- No → *Pase a la pregunta 72*

71. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?

- Sí
- No

72. ¿Tiene su niño algún problema emocional, de desarrollo o de comportamiento, para el cual necesita o recibe tratamiento o consejería?

- Sí
- No → *Pase a la pregunta 74*

73. ¿Ha durado este problema o se espera que dure por lo menos 12 meses?

- Sí
- No

74. ¿Qué edad tiene su niño?

- Menos de un año

AÑOS (escriba la respuesta)

75. ¿Es su niño de sexo masculino o femenino?

- Masculino
- Femenino

76. ¿Es su niño de origen o ascendencia hispana o latina?

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



77. ¿A qué raza pertenece su niño?

Marque una o más.

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

78. ¿Qué edad tiene usted?

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

79. ¿Es usted hombre o mujer?

- Hombre
- Mujer

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

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

81. ¿Qué relación tiene con el niño?

- Madre o padre
- Abuelo o abuela
- Tía o tío
- Hermano o hermana mayor
- Otro familiar
- Tutor legal del niño
- Otra persona

82. ¿Le ayudó alguien a completar esta encuesta?

- Sí → **Pase a la pregunta 83**
- No → **Gracias. Por favor devuelva esta encuesta en el sobre con el porte o franqueo pagado.**

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

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

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

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

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







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12

CZPCS

DIAL.SCREEN

DS. INTERVIEWER: YOU MAY DO THE INTERVIEW WITH ONLY THE [NAMED
RESPONDENT. NO PROXIES WILL BE ACCEPTED/PARENT/GUARDIAN/OR ADULT WHO
KNOWS MOST ABOUT [MEMBER NAME] 'S HEALTH CARE] .

PHONE NUMBER ---> [1 CELL PHONE - HAND DIAL (###) ### - #### /***
-*]

Hello, I'm calling about a health care survey on behalf of
[HEALTH PLAN NAME]. This call will be recorded and may be
monitored for quality and
training purposes. May I please speak with [[MEMBER FIRST NAME]
[MEMBER LAST NAME]/the person who knows the most about [NAME OF
CHILD]'s health care)?

We are conducting an important study to find out how satisfied
[people/families] are with [HEALTH PLAN NAME]. The results of the
study will help [HEALTH PLAN NAME] improve the care they provide
and will also help consumers when they choose health care plans.

The interview is completely confidential and voluntary, and will
not affect [your/your child's] health care or benefits in any way.

01. CONTINUE
02. ALREADY COMPLETED AND MAILED SURVEY BACK
03. NEW PHONE NUMBER
04. REFUSAL
05. APPOINTMENT
06. NEVER HEARD OF R
07. KNOWS R BUT HAS NO NEW NUMBER FOR R
08. RNA, ANS MACH, RETURN TO COVERSHEET
09. LANGUAGE PROBLEM -- SPEAKS SPANISH
10. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH
11. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)

IF DIAL.SCREEN = 01, GO TO START2

IF DIAL.SCREEN = 02, GO TO MAIL.SCREEN

IF DIAL.SCREEN = 03, ENTER NEW NUMBER ON COVERSHEET AND RE-DIAL

RETURN TO COVERSHEET

MAIL.SCREEN

MS. INTERVIEWER: WE STILL NEED TO CONDUCT A TELEPHONE INTERVIEW EVEN
THOUGH R SAYS THEY'VE SENT BACK THE MAIL SURVEY.

I'm sorry, but we haven't received your survey back -- it may have been
lost in the mail. And since the deadline for mailing surveys has passed,
we're now in the telephone phase of this study. May I continue?

(IF NEEDED: "This is purely a research study -- we are polling people
about [their/their child's] health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD
LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the
deadline for mailing surveys has passed and we're now in the telephone
phase of this study. May I continue?")

1. CONTINUE
2. REFUSAL BECAUSE ALREADY COMPLETED AND MAILED SURVEY BACK
3. REFUSAL
4. APPOINTMENT
5. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)

IF MAIL.SCREEN = 1, GO TO START2
RETURN TO COVERSHEET

SEX

SEX. (IWER: RECORD RESPONDENT'S SEX, 'DK' NOT ALLOWED)

1. MALE
2. FEMALE

SPAN.VAR

(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

1. Spanish
2. English

MEMBER

Q1. / MEMBER

[/I will be asking you about [NAME OF CHILD]'s health care. Please answer these questions based on the experiences you have had in getting health care for [NAME OF CHILD], and not on any experiences you may have had getting care for yourself or other members of your family.]

Our records show that [you/your child] [are/is] now in [HEALTH PLAN NAME]. Is that right?

(IWER: IF R SAYS "LEFT PLAN" OR "SWITCHED PLANS" OR "NO LONGER INSURED" ENTER "2". IF R IS NOT SURE IF HE/SHE IS PART OF [HEALTH PLAN NAME], ENTER "2".)

- 1. YES -----> CK.PLMSTCR
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

NPLNAME

Q2. / NPLNAME

What is the name of [your/your child's] health plan?

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS [HEALTH PLAN NAME]]

[(ENTER 5 IF R SAYS: MEDICAID)]

(IF R SAYS SOMETHING CLOSE TO [HEALTH PLAN NAME], ENTER "2")

(IF R NOT SURE OF PLAN NAME, ENTER "2")

- 1. EXACT MATCH -----> CK.PLMSTCR
- 2. POSSIBLE MATCH -----> PLNAME
- 3. NOT A MATCH -----> PLNAME
- 4. [RESPONDENT/CHILD] NO LONGER INSURED (BY MEDICAID) ----> NO.INSUR
- 5. [RESPONDENT/CHILD] INSURED BY MEDICAID BUT DOESN'T ----> CK.PLMSTCR
KNOW PLAN NAME

PLNAME

Q2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)

CK.PLMSTCR:

IF NPLNAME = NOT A MATCH (3), GO TO END.SCREEN

INTRO.INCARE

INTRO.INCARE

Now I'm going to ask you some questions about [your own/your child's] health care. When you answer these questions, please do NOT include dental visits or care [you/your child] got when [you/+[he/she]] stayed overnight in a hospital.

INCARE

Q3. / INCARE

In the last [12/6] months, did [you/your child] have an illness, injury, or condition that NEEDED CARE RIGHT AWAY in a clinic, emergency room, or doctor's office?

1. YES
2. NO -----> APMAKE4

DK/REFUSAL/NOT ASCERTAINED --> APMAKE4

CARSN4

Q4. / CARSN4

In the last [12/6] months, when [you/your child] NEEDED CARE RIGHT AWAY, how often did [you/your child] get care as soon as [you/+[he/she]] needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

APMAKE4

Q5. / APMAKE4

In the last [12/6] months, did you make any appointments for a CHECK-UP OR ROUTINE CARE [/for your child] at a doctor's office or clinic?

1. YES
2. NO -----> OFCTIM4

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

APGET4

Q6. / APGET4

In the last [12/6] months, [/when you made an appointment for a CHECK-UP OR ROUTINE CARE for your child at a doctor's office or clinic,] how often did you get an appointment [for a CHECK-UP OR ROUTINE CARE at a doctor's office or clinic/] as soon as [you/your child] needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

OFCTIM4

Q7. / OFCTIM4

In the last [12/6] months, NOT counting the times [you/your child] went to an emergency room, how many times did [you/+[he/she]] go to a doctor's office or clinic [to get health care for yourself/to get health care]

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

(IWER: IF NEEDED CLARIFY: "Please don't include dental care [you/your child] received.")

(IWER: IF NEEDED CLARIFY, "Please include ALL doctor visits including those for routine, regular care and for an illness or injury.")

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

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

IF OFCTIM4=0 OR DK/REFUSAL AND QNAIRE <05 THEN GO TO PRSNLD4

IF OFCTIM4=0 OR DK/REFUSAL AND QNAIRE >05 THEN GO TO CHSCHL

PRVENT5

Q8. / PRVENT5

In the last [12/6] months, did you and [a/your child's] doctor or other health provider talk about specific things you could do to prevent illness [/in your child?] ?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

IF qnaire<5 then go to RXSTP

OFTQUES

[0/0/0/0/9/9]. / OFTQUES

In the last [12/6] months, how often did you have your questions answered by your child's doctor or other health providers? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXSTP

[9/9/9/9/10/10]. / RXSTP

In the last [12/6] months, did you and [a/your child's] doctor or other health provider talk about starting or stopping a prescription medicine [/for your child] ?

- 1. YES
- 2. NO -----> RTALLCR

DK/REFUSAL/NOT ASCERTAINED --> RTALLCR

NRXWHY

[10/10/10/10/11/11]. / NRXWHY

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

NRXWYNT

[11/11/11/11/12/12]. / NRXWYNT

Did you and a doctor or other health provider talk about the reasons you might NOT want [/your child] to take a medicine?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

RXBST

[12/12/12/12/13/13]. / RXBST

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

RTALLCR

[13/13/13/13/14/14]. / RTALLCR

Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all [your/your child's] health care in the last [12/6] months?

(IF NEEDED: "Please do not include any dental care [you/your child] may have received.")

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

CARNES4

[14/14/14/14/15/15]. / CARNES4

In the last [12/6] months, how often was it easy to get the care, tests, or treatment [you/your child] needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHSCHL

[0/0/0/0/16/16]. / CHSCHL

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

- 1. YES
- 2. NO -----> MEDEQUIP

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

CONTSCHL

[0/0/0/0/17/17]. / CONTSCHL

In the last [12/6] months, did you need your child's doctors or other health providers to contact a school or daycare center about your child's health or health care?

- 1. YES
- 2. NO -----> MEDEQUIP

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

HELPCONT

[0/0/0/0/18/18]. / HELPCONT

In the last [12/6] months, did you get the help you needed from your child's doctors or other health providers in contacting your child's school or daycare?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

MEDEQUIP

[0/0/0/0/19/19]. / MEDEQUIP

Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment. In the last [12/6] months, did you get or try to get any special medical equipment or devices for your child?

- 1. YES
- 2. NO -----> SPCTHY

DK/REFUSAL/NOT ASCERTAINED --> SPCTHY

EZMDEQ

[0/0/0/0/20/20]. / EZMDEQ

In the last [12/6] months, how often was it easy to get special medical equipment or devices for your child? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPMDEQ

[0/0/0/0/21/21]. / HELPMDEQ

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

SPCTHY

[0/0/0/0/22/22]. / SPCTHY

In the last [12/6] months, did you get or try to get special therapy such as physical, occupational, or speech therapy for your child?

- 1. YES
- 2. NO -----> TCPBLM

DK/REFUSAL/NOT ASCERTAINED --> TCPBLM

EZTHP

[0/0/0/0/23/23]. / EZTHP

In the last [12/6] months, how often was it easy to get this therapy for your child? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTHP

[0/0/0/0/24/24]. / HELPTHP

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

TCPBLM

[0/0/0/0/25/25]. / TCPBLM

In the last [12/6] months, did you get or try to get treatment or counseling for your child for an emotional, developmental, or behavioral problem?

- 1. YES
- 2. NO -----> PLUSCARE

DK/REFUSAL/NOT ASCERTAINED --> PLUSCARE

EZTC

[0/0/0/0/26/26]. / EZTC

In the last [12/6] months, how often was it easy to get this treatment or counseling for your child? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTC

[0/0/0/0/27/27]. / HELPTC

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

PLUSCARE

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

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

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

DK/REFUSAL/NOT ASCERTAINED --> PRSNLD4

HLPCOORD

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

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

PRSNLD4

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

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

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

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

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

DRTMS

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

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

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

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

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

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

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

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

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

In the last [12/6] months, how often did [your/your child's] personal doctor seem informed and up-to-date about the care [you/your child] got from these doctors or other health providers? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RATEDR4

[23/23/26/26/41/41]. / RATEDR4

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

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

COND3MO

[0/0/0/0/42/42]. / COND3MO

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

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

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

DRUNCON

[0/0/0/0/43/43]. / DRUNCON

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

DRUNFAM

[0/0/0/0/44/44]. / DRUNFAM

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.SPDR

INTRO.SPDR

Now I'm going to ask you some questions about specialists. When you answer these questions, please do NOT include [dental visits or care you got when you stayed overnight in a hospital. /dental visits or care your child got when (he/she) stayed overnight in a hospital.]

NDSPDR4

[24/24/27/27/45/45]. / NDSPDR4

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

In the last [12/6] months, did you make any appointments [/for your child] to see a specialist?

(CLARIFY IF NEEDED: "Specialists are doctors who specialize in one area of health care. Please include all doctors you consider to be specialists, but do not include any dental visits.")

(IWER: IF RESPONDENT ASKS IF A PARTICULAR TYPE OF DOCTOR IS A SPECIALIST, CLARIFY, "I don't have any information about that, so please just interpret it however it seems best to you.")

(CLARIFY IF NEEDED: "You can interpret this question however it seems best to you.")

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

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

PRBSEE4

[25/25/28/28/46/46]. / PRBSEE4

In the last [12/6] months, how often did you get an appointment [/for your child] to see a specialist as soon as you needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

SPDRS

[26/26/29/29/47/47]. / SPDRS

How many specialists [have/has] [you/your child] seen in the last [12/6] months?

(CLARIFY IF NEEDED: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. Would you say [you've/your child has] seen...")

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

- 0. NONE, -----> INTRO.PLAN
- 1. 1 SPECIALIST,
- 2. 2,
- 3. 3,
- 4. 4, OR
- 5. 5 OR MORE SPECIALISTS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> INTRO.PLAN

RTSPDR4

[27/27/30/30/48/48]. / RTSPDR4

We want to know your rating of the specialist [you/your child] saw most often in the last [12/6] months.

Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

(Clarify if necessary: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.")

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN
INTRO.PLAN

Now I'm going to ask you some questions about your experience with
[your/your child's] health plan.

LOOMAT4
[28/28/0/0/0/0]. / LOOMAT4

In the last [12/6] months, did you look for any information in written
materials or on the Internet about how your health plan works?

- 1. YES
- 2. NO -----> CK.LOOSVC

DK/REFUSAL/NOT ASCERTAINED --> CK.LOOSVC

UNDINF4
[29/29/0/0/0/0]. / UNDINF4

In the last [12/6] months, how often did the written materials OR the
Internet provide the information you needed about how your health plan
works? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CK.LOOSVC
IF qnaire=02 then go to CLCSRV4

LOOSVC
[30/0/0/0/0/0]. / LOOSVC

Sometimes people need services or equipment beyond what is provided in a
regular or routine office visit, such as care from a specialist,
physical therapy, a hearing aid, or oxygen.

In the last 12 months, did you look for information from your health
plan on how much you would have to pay for a health care service or
equipment?

- 1. YES
- 2. NO -----> LOOMED

DK/REFUSAL/NOT ASCERTAINED --> LOOMED

FNDSVC

[31/0/0/0/0/0]. / FNDSVC

In the last 12 months, how often were you able to find out from your health plan how much you would have to pay for a health care service or equipment? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

LOOMED

[32/0/0/0/0/0]. / LOOMED

In some health plans the amount you pay for a prescription medicine can be different for different medicines, or can be different for prescriptions filled by mail instead of at the pharmacy.

In the last 12 months, did you look for information from your health plan on how much you would have to pay for specific prescription medicines?

- 1. YES
- 2. NO -----> CLCSRV4

DK/REFUSAL/NOT ASCERTAINED --> CLCSRV4

FNDMED

[33/0/0/0/0/0]. / FNDMED

In the last 12 months, how often were you able to find out from your health plan how much you would have to pay for specific prescription medicines? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CLCSRV4

[34/30/31/31/49/49]. / CLCSRV4

In the last [12/6] months, did you get information or help from [your health plan's customer service/customer service at your child's health plan] ?

- 1. YES
- 2. NO -----> PLPRWK4

DK/REFUSAL/NOT ASCERTAINED --> PLPRWK4

PBCLCS4

[35/31/32/32/50/50]. / PBCLCS4

In the last [12/6] months, how often did [your health plan's customer service/customer service at your child's health plan] give you the information or help you needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CSRESP

[36/32/33/33/51/51]. / CSRESP

In the last [12/6] months, how often did [your health plan's/] customer service staff [/at your child's health plan] treat you with courtesy and respect? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLPRWK4

[37/33/34/34/52/52]. / PLPRWK4

In the last [12/6] months, did [your/your child's] health plan give you any forms to fill out?

- 1. YES
- 2. NO -----> CK.SNDCLMS

DK/REFUSAL/NOT ASCERTAINED --> CK.SNDCLMS

PBPLPW4

[38/34/35/35/53/53]. / PBPLPW4

In the last [12/6] months, how often were the forms from [your/your child's] health plan easy to fill out? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CK.SNDCLMS

SNDCLM4

[39/0/0/0/0/0]. / SNDCLM4

Claims are sent to a health plan for payment. You may send in the claims yourself, or doctors, hospitals, or others may do this for you.

In the last [12/6] months, did you or anyone else send in any claims for your care to your health plan?

- 1. YES
- 2. NO -----> RTPLEXP
- 3. DON'T KNOW (DO NOT PROBE) --> RTPLEXP
- 9. REFUSAL/NOT ASCERTAINED ----> RTPLEXP

CLMTMR4

[40/0/0/0/0/0]. / CLMTMR4

In the last [12/6] months, how often did your health plan handle your claims quickly? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?
- 5. DON'T KNOW (DO NOT READ) (DO NOT PROBE)
- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

CLMCRCT

[41/0/0/0/0/0]. / CLMCRCT

In the last [12/6] months, how often did your health plan handle [your/your child's] claims correctly? Would you say...

(READ LIST)

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

- 5. DON'T KNOW (DO NOT READ) (DO NOT PROBE)

- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTPLEXP

[42/35/36/36/54/54]. / RTPLEXP

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

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

IF QNAIRE= CHILD MED W/CCC (07), GO TO CHPRES

HPMDEQ

[0/35.01/0/0/0/0]. / HPMDEQ

In the last [12/6] months, did you have a health problem for which you needed special medical equipment, such as a cane, a wheelchair, or oxygen equipment?

- 1. YES
- 2. NO -----> POSTHP

DK/REFUSAL/NOT ASCERTAINED --> POSTHP

EZMDHP

[0/35.02/0/0/0/0]. / EZMDHP

In the last [12/6] months, how often was it easy to get the medical equipment you needed through your health plan? Would you say...?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

POSTHP

[0/35.03/0/0/0/0]. / POSTHP

In the last [12/6] months, did you have any health problems that needed special therapy, such as physical, occupational, or speech therapy?

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

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

EZPOST

[0/35.04/0/0/0/0]. / EZPOST

In the last [12/6] months, how often was it easy to get the special therapy you needed through your health plan? Would you say...?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

INTRO.DTLK
INTRO.DTLK

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

DTLKTF
[0/35.5/0/0/0/0]. / DTLKTF

In the last [12/6] months, how often did a doctor or other health provider talk too fast when talking to you? Would you say...?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DINTER

[0/35.6/0/0/0/0]. / DINTER

In the last [12/6] months, how often did a doctor or other health provider interrupt you when you were talking? Would you say...?

(READ LIST IF NECESSARY)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRRUDE

[0/35.7/0/0/0/0]. / DRRUDE

In the last [12/6] months, how often did a doctor or other health provider use a condescending, sarcastic or rude tone or manner with you? Would you say...?

(READ LIST IF NECESSARY)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

TRUSTDR

[0/35.8/0/0/0/0]. / TRUSTDR

In the last [12/6] months, did you feel you could trust a doctor or other health provider with your medical care?

(READ LIST)

1. YES DEFINITELY,
2. YES SOMEWHAT, OR
3. NO?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

REGDENT

[0/35.9/0/0/0/57.01]. / REGDENT

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

[Do you/Does your child] have a regular dentist?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

GODENT

[0/35.10/0/0/0/57.02]. / GODENT

In the last 6 months, did [you/your child] go to a dentist's office or clinic for care?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

IF QNAIRE = ADULT MEDICAID (02) AND GODENT <> YES, GO TO CK.DENTSOON
IF QNAIRE = CHILD MEDICAID W/CCC (07) AND GODENT <> YES, GO TO DNTASAP

DENTEXPL

[0/35.11/0/0/0/57.03]. / DENTEXPL

In the last [12/6] months, how often did [your/your child's] dentist or dental staff explain what they were doing while treating [you/your child]? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CK.DENTSOON

IF QNAIRE = CHILD MEDICAID W/CCC (07), GO TO DNTASAP

DENTSOON

[0/35.12/0/0/0/0]. / DENTSOON

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

(READ LIST)

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

- 5. DID NOT TRY TO GET AN APPOINTMENT WITH A SPECIALIST DENTIST IN THE LAST 6 MONTHS (DO NOT READ)

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DNTASAP

[0/35.13/0/0/0/57.04]. / DNTASAP

In the last [12/6] months, if [you/your child] needed to see a dentist right away because of a DENTAL EMERGENCY, did [you/+[he/she]] get to see a dentist as soon as you wanted? Would you say...

(IWER: IF R RESPONDS WITH "YES/NO" PLEASE PROBE WITH RESPONSE OPTIONS)

(READ LIST)

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

- 5. DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS (DO NOT READ)

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTDENT

[0/35.14/0/0/0/57.03]. / RTDENT

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

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

GO TO HLTSTA4

CHPRES

[0/0/0/0/55/55]. / CHPRES

In the last [12/6] months, did you get or refill any prescription medicines for your child?

1. YES
2. NO -----> REGDENT

DK/REFUSAL/NOT ASCERTAINED --> REGDENT

EZPRES

[0/0/0/0/56/56]. / EZPRES

In the last [12/6] months, how often was it easy to get prescription medicines for your child through [your/+[his/her]] health plan? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPPRES

[0/0/0/0/57/57]. / HELPPRES

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

IF QNAIRE = CHILD MEDICAID W/CCC, GO TO REGDENT

HLTSTA4

[43/36/37/37/58/58]. / HLTSTA4

[/I have just a few more questions.]

In general, how would you rate [your/your child's] overall health?
Would you say it is...

(READ LIST)

- 1. EXCELLENT,
- 2. VERY GOOD,
- 3. GOOD,
- 4. FAIR, OR
- 5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

MNTLSTAT

[44/37/38/38/59/59]. / MNTLSTAT

In general, how would you rate [your/your child's] overall MENTAL OR
EMOTIONAL health? Would you say it is...

(READ LIST)

- 1. EXCELLENT,
- 2. VERY GOOD,
- 3. GOOD,
- 4. FAIR, OR
- 5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CUSEMED

[0/0/0/0/60/60]. / CUSEMED

Other than vitamins, does your child currently need or use medicine
prescribed by a doctor?

- 1. YES
- 2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

WHYMEDA

[0/0/0/0/61/61]. / WHYMEDA

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

- 1. YES
- 2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

WHYMEDB

[0/0/0/0/62/62]. / WHYMEDB

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

MOREMED

[0/0/0/0/63/63]. / MOREMED

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

- 1. YES
- 2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

WHYMOREA

[0/0/0/0/64/64]. / WHYMOREA

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

- 1. YES
- 2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

WHYMOREB

[0/0/0/0/65/65]. / WHYMOREB

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

LIMITED

[0/0/0/0/66/66]. / LIMITED

Is your child limited or prevented in any way in [your/+[his/her]] ability to do the things most children of the same age can do?

- 1. YES
- 2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --> SPECTHP

WHYLIMA

[0/0/0/0/67/67]. / WHYLIMA

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

1. YES
2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --> SPECTHP

WHYLIMB

[0/0/0/0/68/68]. / WHYLIMB

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

SPECTHP

[0/0/0/0/69/69]. / SPECTHP

Does your child need or get special therapy such as physical, occupational, or speech therapy?

1. YES
2. NO -----> CHCOUNS

DK/REFUSAL/NOT ASCERTAINED --> CHCOUNS

WHYSTA

[0/0/0/0/70/70]. / WHYSTA

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

1. YES
2. NO -----> CHCOUNS

DK/REFUSAL/NOT ASCERTAINED --> CHCOUNS

WHYSTB

[0/0/0/0/71/71]. / WHYSTB

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

CHCOUNS

[0/0/0/0/72/72]. / CHCOUNS

Does your child have any kind of emotional, developmental, or behavioral problem for which [you/+[he/she]] needs or gets treatment or counseling?

- 1. YES
- 2. NO -----> CAGE

DK/REFUSAL/NOT ASCERTAINED --> CAGE

TIMCOUNA

[0/0/0/0/73/73]. / TIMCOUNA

Has this problem lasted or is it expected to last for at least 12 months?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

FLUSHOTQ

[45/38/0/0/0/0]. / FLUSHOTQ

Have you had either a flu shot or flu spray in the nose since July 1, 2015?

- 1. YES
- 2. NO
- 3. DON'T KNOW
- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

NOWSMOK

[46/39/0/0/0/0]. / NOWSMOK

Do you now smoke cigarettes or use tobacco...

(READ LIST)

- 1. EVERY DAY,
- 2. SOME DAYS, OR
- 3. NOT AT ALL? -----> ASPDAY
- 4. DON'T KNOW (DO NOT READ) -----> ASPDAY
- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ) --> ASPDAY

ADVQUIT9

[47/40/0/0/0/0]. / ADVQUIT9

In the last [12/6] months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PATCH9

[48/41/0/0/0/0]. / PATCH9

In the last [12/6] months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication. Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

WILLPWR9

[49/42/0/0/0/0]. / WILLPWR9

In the last [12/6] months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program. Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPDAY

[50/43/0/0/0/0]. / ASPDAY

Do you take aspirin daily or every other day?

(IF NEEDED: "Would you say YES or NO?")

(IWER: If the R asks about whether a particular medication or Brand name is considered aspirin, you may provide the following clarification:
Aspirin: Bayer and Bufferin

Not Aspirin: Tylenol, Motrin, Aleve, Advil, ibuprofen and acetaminophen)

1. YES
2. NO
3. DON'T KNOW

9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPUSF

[51/44/0/0/0/0]. / ASPUSF

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

(IF NEEDED: "Would you say YES or NO?")

1. YES
2. NO
3. DON'T KNOW

9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPPRV

[52/45/0/0/0/0]. / ASPPRV

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.AWCOND

INTRO.AWCOND

When I read the following list, please tell me if you are aware that you have any of these conditions.

PHAWCD.(1-3)

[53/46/0/0/0/0].(1-3) / PHAWCD.(1-3)

[First,/(Next/How About...)]

1. "High cholesterol"
 2. "High blood pressure"
 3. "Parent or sibling who had a heart attack before the age of 60"
- ?

(IWER IF NECESSARY: "Are you aware if you have this condition?")

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.DRCOND

INTRO.DRCOND

When I read the following list, please tell me if a doctor has ever told you that you have any of these conditions.

PHDRCD.(1-4)

[54/47/0/0/0/0].(1-4) / PHDRCD.(1-4)

[First,/(Next/How About...)]

1. "A heart attack"
 2. "Angina or coronary heart disease"
 3. "A stroke"
 4. "Any kind of diabetes or high blood sugar"
- ?

(IWER IF NECESSARY: "Has a doctor ever told you that you have this condition?")

[FOR PHDRCD.2: (IWER IF NEEDED, CLARIFY: Angina pectoris (an-JYE-nuh or AN-jin-uh PECK-ter-iss) is severe pain in the chest associated with insufficient blood supply to the heart.)]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

SMPROB

[55/48/0/0/0/0]. / SMPROB

[I have just a few more questions./]

In the last [12/6] months, did you get health care 3 or more times for the same condition or problem?

1. YES
2. NO -----> TKMED

DK/REFUSAL/NOT ASCERTAINED --> TKMED

PRBLST

[56/49/0/0/0/0]. / PRBLST

Is this a condition or problem that has lasted for at least 3 months?
[/Please do NOT include pregnancy or menopause.]

[/ (IWER IF NEEDED, CLARIFY: Menopause (men-ne-paws) is the time in a woman's life when she stops having menstrual periods. It is sometimes called 'the change of life' or 'the change'.)]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

TKMED

[57/50/0/0/0/0]. / TKMED

Do you now need or take medicine prescribed by a doctor? [/Please do NOT include birth control.]

1. YES
2. NO -----> QAGE4

DK/REFUSAL/NOT ASCERTAINED --> QAGE4

TRTCOND

[58/51/0/0/0/0]. / TRTCOND

Is this medicine to treat a condition that has lasted for at least three months? [/Please do NOT include pregnancy or menopause.]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

[59/52/0/0/0/0]. / QAGE4

What is your age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your last birthday.")

(READ LIST IF NEEDED, "Are you...")

1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

QGENDER

[60/53/0/0/0/0]. / QGENDER

(IWER: RECORD RESPONDENT'S SEX.)

(ASK IF NECESSARY, "Are you male or female?")

1. MALE
2. FEMALE

DK/REFUSAL/NOT ASCERTAINED

CAGE

[0/0/39/39/74/74]. / CAGE

[/I have just a few more questions.]

What is YOUR CHILD'S age?

(IWER: ENTER 00 IF LESS THAN 1 YEAR OLD)

(IWER: DO NOT ROUND UP)

(IWER: IF NEEDED CLARIFY, "Please answer based on your child's age as of their last birthday.")

___ ENTER CHILD'S AGE

DK/REFUSAL/NOT ASCERTAINED

IF CAGE<19 THEN GO TO CGENDER

CAGE.CK

[0/0/39/39/74/74]a. / CAGE.CK

I have entered that [NAME OF CHILD] is [CAGE] . Is that correct?

("DK" NOT ALLOWED)

1. YES-AGE ENTERED CORRECTLY
2. NO-CORRECT AGE -----> CAGE

IF cage>18 and cage<>99 then go to ALL.DONE

CGENDER

[0/0/40/40/75/75]. / CGENDER

(IF NEEDED: "Is your child male or female?")

1. MALE
2. FEMALE

REFUSAL/NOT ASCERTAINED

LATINO

[62/55/41/41/76/76]. / LATINO

[Are/Is] [you/your child] of Hispanic or Latino origin or descent?

1. YES / HISPANIC OR LATINO
2. NO / NOT HISPANIC OR LATINO

DK/REFUSAL/NOT ASCERTAINED

INTRO.RACE

INTRO.RACE

I am going to read a list of race categories. For each category, please say YES or NO if it describes [your/your child's] race. I must ask you about all categories in case more than one applies.

PQRACE3.(1-6)
[63/56/42/42/77/77].(1-6) / PQRACE3.(1-6)

[(Are you)/(Is your child)]

1. "White"
2. "Black or African-American"
3. "Asian"
4. "Native Hawaiian or other Pacific Islander"
5. "American Indian or Alaska Native"
6. "Some other race"
- ?

(IWER: IF R REPLIES "WHY ARE YOU ASKING ABOUT MY [/CHILD'S] RACE?" SAY
"We ask about [your/your child's] race for demographic purposes only.
We want to be sure that the people we survey accurately represent the
racial diversity of managed care enrollees in this country.")

(IWER: If R answers with a category not listed here, such as "HISPANIC"
or "AMERICAN" or "MIXED RACE", probe using the category "OTHER".)

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

QRACE3.OTH / QRACE3.OTH
(What is [your/your child's] race?)

PAGE

[0/0/43/43/78/78]. / PAGE

Now I have a few questions about you. What is YOUR age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your last birthday.")

(READ IF NEEDED, "Are you...")

0. UNDER 18,
1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PGENDER

[0/0/44/44/79/79]. / PGENDER

(IWER: ENTER RESPONDENT'S SEX.)

(IWER: IF NECESSARY ASK, "Are you male or female?")

1. MALE
2. FEMALE

DK/REFUSAL/NOT ASCERTAINED

EDUCAT

[61/54/45/45/80/80]. / EDUCAT

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

(IWER: IF R SAYS HE/SHE HAD NON-ACADEMIC TRAINING, SUCH AS TRADE
SCHOOL, PROBE: "Did you receive a high school diploma or GED?")

(IWER: ACADEMIC TRAINING BEYOND A HIGH SCHOOL DIPLOMA THAT DOES NOT
LEAD TO A BACHELORS DEGREE, SHOULD BE CODED "4". IF R WENT TO BUSINESS
SCHOOL OR GOT A 3-YEAR NURSING DEGREE, ENTER "4")

(IWER: IF R OFFERS MORE THAN ONE RESPONSE, FOR EXAMPLE: "SOME HIGH
SCHOOL OR GED", ENTER THE HIGHEST NUMBER THAT APPLIES.)

(READ LIST)

1. 8TH GRADE OR LESS,
2. SOME HIGH SCHOOL, BUT DID NOT GRADUATE,
3. HIGH SCHOOL GRADUATE OR GED,
4. SOME COLLEGE OR 2-YEAR DEGREE,
5. 4-YEAR COLLEGE GRADUATE, OR
6. MORE THAN A 4-YEAR COLLEGE DEGREE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHRELT

[0/0/46/46/81/81]. / CHRELT

How are you related to the child?

(READ IF NEEDED: "Are you the ...")

1. MOTHER OR FATHER,
2. GRANDPARENT,
3. AUNT OR UNCLE,
4. OLDER BROTHER OR SISTER,
5. OTHER RELATIVE,
6. LEGAL GUARDIAN, OR
7. SOMEONE ELSE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ALL.DONE
THANKS.SCREEN.

Those are all the questions I have.

Thank you for taking part in this important interview.

Have a nice (day/evening). Good bye.

RETURN TO COVERSHEET

EDIT.FLG
(IWER: DO YOU NEED TO TYPE AN EDIT?)

1. YES
2. NO

IF EDIT.FLG = 2 THEN GO TO CK.END.EDIT

EDIT.OTH
EDIT.OTH. (IWER: PLEASE TYPE YOUR EDIT-BE SPECIFIC-INCLUDE:
1) QUESTION NUMBER(S)
2) WHAT WAS ENTERED
3) WHAT NEEDS TO BE CHANGED

CK.END.EDIT
LANG.DID

LANG.DID. IWER: DID YOU DO THIS INTERVIEW IN...

1. ENGLISH,
2. SPANISH OR
3. BOTH?