



Willamette Valley Community Health  
CAHPS® 5.0 Medicaid Survey

Banner Book Report

June 2015



## **Methodology**

- Introduction
- Survey Milestones
- Sampling
- Questionnaires
- Selection of Cases for Analysis
- Composites, Overall Ratings, and Measures for Reporting
- Comparisons, Statistical Testing, Scoring, and Weighting

## **Sample Disposition**

## **Response/Non-Response Comparison**

## **Banner Tables**

- Adult Tables
- Child Tables

## **Appendix**

- Index of Tables
- Questionnaires
  - Adult English
  - Child English
  - Adult Spanish
  - Child Spanish
- Telephone script

## METHODOLOGY

### Introduction

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

### Survey Milestones

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

### Sampling

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

### Questionnaires

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

### Selection of Cases for Analysis

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

## Composites, Overall Ratings, and Measures for Reporting

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

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

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

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

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

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

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

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

### **Composite: Customer Service**

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

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

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

### **Rating Questions**

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

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

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

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

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

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

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

## Comparisons, Statistical Testing, Scoring, and Weighting

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

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

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

## Sample Disposition

Category	Adult		Child	
	Williamette Valley Community Health	Overall	Williamette Valley Community Health	Overall
<b>**First mailing - sent</b>	900	15300	900	15300
<b>*First mailing - usable survey returned</b>	179	3240	145	2377
<b>Second mailing - sent</b>	718	12007	752	12648
<b>*Second mailing - usable survey returned</b>	53	979	60	987
<b>*Phone - usable surveys</b>	72	1234	175	1999
<b>Total - usable surveys</b>	304	5453	380	5363
<b>†Ineligible: According to population criteria‡</b>	22	261	9	158
<b>†Ineligible: Deceased</b>	0	39	0	1
<b>†Ineligible: Mentally or physically unable to complete survey</b>	8	207	0	0
<b>†Ineligible: Language barrier</b>	7	52	4	40
<b>Incorrect address AND incorrect phone number</b>	73	1173	64	1296
<b>Refusal/Returned survey blank</b>	42	667	45	729
<b>Nonresponse - Unavailable by mail or phone</b>	444	7448	398	7713
<b>Adjusted Response Rate</b>	<b>35.2%</b>	<b>37.0%</b>	<b>42.8%</b>	<b>35.5%</b>

\*Included in response rate numerator

†Excluded from adjusted response rate denominator

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

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

## Response/Non-Response Comparison

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

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

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

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

### Adult

Gender / Age	Non-Respondents	Respondents	Difference
Male	191 39.3%	135 44.4%	5.11%
Female	295 60.7%	169 55.6%	-5.11%
18-24	127 26.1%	39 12.8%	-13.30%
25-34	129 26.5%	50 16.4%	-10.10%
35-44	97 20.0%	40 13.2%	-6.80%
45-54	70 14.4%	74 24.3%	9.94%
55-64	39 8.0%	76 25.0%	16.98%
65-74	10 2.1%	17 5.6%	3.53%
75 or Older	14 2.9%	8 2.6%	-0.25%

### Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	232 52.4%	192 50.5%	-1.84%
Female	211 47.6%	188 49.5%	1.84%
<3	83 18.7%	78 20.5%	1.79%
4-7	108 24.4%	106 27.9%	3.52%
8-12	136 30.7%	112 29.5%	-1.23%
13 or older	116 26.2%	84 22.1%	-4.08%

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE		
Q1 YES	295 100%	5345 100%	32 100%	43 100%	36 100%	64 100%	76 100%	26 100%	218 100%	3 100%	4 100%	1 100%	13 100%	16 100%	67 100%	205 100%	178 100%	102 100%	128 100%	150 100%	
NOT ANSWERED	9	108	1	1	4	3		5			1		2		3	5	4	5	2	7	
VALID CASES	295	5345	32	43	36	64	76	26	218	3	4	1	13	16	67	205	178	102	128	150	
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%



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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q3																					
YES	123 42%	2233 43%	11 34%	12 28%	16 46%	30 44%	31 40%	15 58%	92 42%	~	~100%	1 100%	1 100%	6 40%	9 56%	21 30%*	89 43%	69 38%	47 45%	52 41%	63 40%
NO	172 58%	2997 57%	21 66%	31 72%	19 54%	38 56%	46 60%	11 42%	127 58%	3 100%	4 100%	~	~	9 60%	7 44%	48 70%*	117 57%	111 62%	57 55%	74 59%	93 60%
NOT ANSWERED	9	223	1	2		2		4							1	4	2	3	4	1	
VALID CASES	295	5230	32	43	35	68	77	26	219	3	4	1	1	15	16	69	206	180	104	126	156
NUMBER OF RESPONDENTS	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	WVCH TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q4 NEVER	2 2%	63 3%	~	~	~	~	7%~	1 1%~	~	~	~	100%~	~	~	2 2%~	~	2 5%~	~	1 2%	
SOMETIMES	15 13%	285 14%	~	33%~	7%~	12%~	4%~ 15%~	10 12%~	~	~	~	40%~	2 ~	2 10%~	9 11%~	4 7%*	8 18%~	2 4%~	10 17%	
USUALLY	33 29%	563 28%	55%~	33%~	29%~	19%~	25%~ 31%~	23 27%~	~	1 ~100%~	~	40%~	2 25%~	2 45%~	20 25%~	19 31%	11 25%~	19 41%~	11 19%*	
ALWAYS	62 55%	1115 55%	45%~	33%~	64%~	69%~	64%~ 54%~	50 60%~	~	~	~	20%~	1 75%~	6 45%~	9 62%~	50 62%	38 62%	23 52%~	25 54%~	36 62%
#ALWAYS + USUALLY (NET)	95 85%	1678 83%	100%~	67%~	93%~	88%~	89%~ 85%~	73 87%~	~	1 ~100%~	~	60%~	3 100%~	8 90%~	18 86%~	70 93%*	34 77%~	44 96%~	47 81%	
TOP BOX SCORE	62 55%	1115 55%	45%~	33%~	64%~	69%~	64%~ 54%~	50 60%~	~	~	~	20%~	1 75%~	6 45%~	9 62%~	50 62%	38 62%	23 52%~	25 54%~	36 62%
NOT ANSWERED	11	220			2	4	3 2	8					1	1	1	8	8	3	6	5
VALID CASES	112	2026	11	12	14	26	28 13	84		1	1	5	8	20	81	61	44	46	58	
NUMBER OF RESPONDENTS	123 100%	2246 100%	11 100%	12 100%	16 100%	30 100%	31 100%	15 100%	92 100%	1 100%	1 100%	6 100%	9 100%	9 100%	21 100%	89 100%	69 100%	47 100%	52 100%	63 100%

[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?

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q5 YES	190 65%	3616 70%	13 41%~	20 47%~	21 60%~	52 76%*	55 72%	22 85%~	148 68%	3 100%~	3 75%~	1 100%~		11 ~ 73%~	10 63%~	36 52%*	146 71%*	108 60%*	78 75%*	77 61%	107 69%
NO	103 35%	1586 30%	19 59%~	23 53%~	14 40%~	16 24%*	21 28%	4 15%~	70 32%		1 ~ 25%~		1 ~100%~	4 27%~	6 37%~	33 48%*	59 29%*	72 40%*	26 25%*	49 39%	48 31%
NOT ANSWERED	11	251		1	2		3		5							1	5	2	3	4	2
VALID CASES	293	5202	32	43	35	68	76	26	218	3	4	1	1	15	16	69	205	180	104	126	155
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%

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

			AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	WVCH 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 IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q6 NEVER	1 0.6%	100 3%*	~	~	~	~	2%~	1 0.7%~	~	~	~	~	~	~	1 ~0.7%~	1 1%	1 ~	1 ~	1 ~	
SOMETIMES	30 17%	562 17%	5 38%~	4 20%~	4 19%~	6 13%~	6 12%~	4 22%~	23 17%~	~	~	~	3 ~	2 22%~	9 26%~	20 15%~	18 18%	11 15%	9 12%	20 21%
USUALLY	56 32%	870 27%	6 46%~	5 25%~	8 38%~	13 28%~	16 33%~	6 33%~	41 30%~	1 33%~	3 100%~	1 100%~	5 ~	1 11%~	10 29%~	43 32%~	25 26%*	28 39%	33 45%*	20 21%*
ALWAYS	87 50%	1715 53%	2 15%~	11 55%~	9 43%~	28 60%~	26 53%~	8 44%~	71 52%~	2 67%~	~	~	2 ~	6 67%~	15 44%~	70 52%~	54 55%	33 46%	30 41%*	56 58%*
#ALWAYS + USUALLY (NET)	143 82%	2585 80%	8 62%~	16 80%~	17 81%~	41 87%~	42 86%~	14 78%~	112 82%~	3 100%~	3 100%~	1 100%~	7 ~	7 78%~	25 74%~	113 84%~	79 81%	61 85%	63 86%	76 79%
TOP BOX SCORE	87 50%	1715 53%	2 15%~	11 55%~	9 43%~	28 60%~	26 53%~	8 44%~	71 52%~	2 67%~	~	~	2 ~	6 67%~	15 44%~	70 52%~	54 55%	33 46%	30 41%*	56 58%*
NOT ANSWERED	16	326				5	6	4	12				1	1	2	12	10	6	4	11
VALID CASES	174	3247	13	20	21	47	49	18	136	3	3	1	10	9	34	134	98	72	73	96
NUMBER OF RESPONDENTS	190	3573	13	20	21	52	55	22	148	3	3	1	11	10	36	146	108	78	77	107
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q5 = YES]

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE			
Q7 NONE	77 27%	1271 25%	10 33%~	16 37%~	7 21%~	16 25%	20 26%	4 16%~	56 26%	1 ~ 25%~	1 ~100%~	2 14%~	3 19%~	22 33%	50 25%	59 34%*	15 15%*	39 31%	35 23%		
1 TIME	52 18%	975 19%	8 27%~	11 26%~	10 29%~	9 14%	9 12%	3 12%~	38 18%	1 33%~	2 50%~	~	3 ~ 21%~	2 12%~	13 19%	34 17%	34 20%	17 17%	25 20%	25 17%	
2	49 17%	973 19%	7 23%~	8 19%~	7 21%~	8 12%	15 19%	4 16%~	38 18%	1 33%~	1 25%~	~	2 ~ 14%~	5 31%~	11 16%	36 18%	32 18%	17 17%	24 19%	25 17%	
3	33 12%	600 12%	2 7%~	3 7%~	2 6%~	12 18%	8 10%	5 20%~	26 12%	~	~	~	3 ~ 21%~	2 12%~	7 10%	25 12%	21 12%	10 10%	12 10%	20 13%	
4	31 11%	448 9%	2 7%~	2 5%~	4 12%~	8 12%	11 14%	2 8%~	26 12%	1 33%~	~	~	1 ~ 7%~	2 12%~	5 7%	25 12%	12 7%*	18 17%*	14 11%	16 11%	
5 TO 9	34 12%	631 12%	1 3%~	3 7%~	3 9%~	8 12%	12 16%	5 20%~	25 12%	~	~	~	3 ~ 21%~	~	8 12%	24 12%	11 6%*	22 21%*	7 6%*	24 16%*	
10 OR MORE TIMES	10 3%	265 5%	~	~	1 3%~	4 6%	2 3%	2 8%~	6 3%	~	~	~	~	2 12%~	1 1%	8 4%	5 3%	4 4%	4 3%	5 3%	
NOT ANSWERED	18	290	2	1	3	3	2	1	8		1	1		3	8	8	4	5	7		
VALID CASES	286	5163	30	43	34	65	77	25	215	3	4	1	14	16	67	202	174	103	125	150	
NUMBER OF RESPONDENTS	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q8 #YES	141 70%	2683 71%	11 55%~	17 63%~	15 56%~	36 78%~	42 76%~	16 80%~	112 73%~	3 100%~	1 33%~	~	~	7 64%~	8 62%~	24 56%~	113 76%*	79 72%	59 69%	62 75%	76 68%
NO	61 30%	1081 29%	9 45%~	10 37%~	12 44%~	10 22%~	13 24%	4 20%~	42 27%~	2 ~	~	~	~	4 36%~	5 38%~	19 44%~	35 24%*	31 28%	27 31%	21 25%	36 32%
NOT ANSWERED	7	79				3	2	1	5					1		2	4	5	2	3	3
VALID CASES	202	3764	20	27	27	46	55	20	154	3	3			11	13	43	148	110	86	83	112
NUMBER OF RESPONDENTS	209 100%	3843 100%	20 100%	27 100%	27 100%	49 100%	57 100%	21 100%	159 100%	3 100%	3 100%			12 100%	13 100%	45 100%	152 100%	115 100%	88 100%	86 100%	115 100%

[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?

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILLND	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q9 YES	107 53%	2125 57%	5 25%~	11 41%~	10 37%~	32 70%~	31 55%~	12 60%~	84 55%~	2 67%~	1 33%~	~	~	5 42%~	6 46%~	15 34%~	85 57%*	54 49%	49 56%	42 51%	60 53%
NO	96 47%	1611 43%	15 75%~	16 59%~	17 63%~	14 30%~	25 45%~	8 40%~	70 45%~	1 33%~	2 67%~	~	~	7 58%~	7 54%~	29 66%~	63 43%*	56 51%	38 44%	41 49%	53 47%
NOT ANSWERED	6	107				3	1	1	5							1	4	5	1	3	2
VALID CASES	203	3736	20	27	27	46	56	20	154	3	3			12	13	44	148	110	87	83	113
NUMBER OF RESPONDENTS	209 100%	3843 100%	20 100%	27 100%	27 100%	49 100%	57 100%	21 100%	159 100%	3 100%	3 100%			12 100%	13 100%	45 100%	152 100%	115 100%	88 100%	86 100%	115 100%

[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?

	WVCH TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q10 #YES	93 90%	1887 92%	4 100%	11 100%	6 67%	28 90%	28 93%	11 92%	75 89%	2 100%	~	~	~	2 100%	6 100%	11 92%	76 90%	46 87%	44 96%	34 89%	55 92%
NO	10 10%	166 8%	~	~	3 33%	3 10%	2 7%	1 8%	9 11%	~	~	~	~	~	~	1 8%	8 10%	7 13%	2 4%	4 11%	5 8%
NOT ANSWERED	28	436	3	1	4	7	4	2	13		1	1		4		7	13	14	8	12	9
VALID CASES	103	2053	4	11	9	31	30	12	84	2				2	6	12	84	53	46	38	60
NUMBER OF RESPONDENTS	131 100%	2489 100%	7 100%	12 100%	13 100%	38 100%	34 100%	14 100%	97 100%	2 100%	1	1		6 100%	6 100%	19 100%	97 100%	67 100%	54 100%	50 100%	69 100%

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



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

		AGE						RACE					ETHNICITY		HEALTH STATUS		GENDER				
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q11 #YES	68 65%	1488 73%	2 50%~	6 55%~	6 60%~	22 71%~	18 60%~	8 67%~	54 64%~	1 50%~	~	~	~	1 50%~	4 67%~	7 58%~	55 65%~	34 64%~	30 64%~	19 49%~	44 73%~
NO	36 35%	562 27%	2 50%~	5 45%~	4 40%~	9 29%~	12 40%~	4 33%~	30 36%~	1 50%~	1 100%~	~	~	1 50%~	2 33%~	5 42%~	30 35%~	19 36%~	17 36%~	20 51%~	16 27%~
NOT ANSWERED	3	44	1			1	1							3		3		1	2		3
VALID CASES	104	2050	4	11	10	31	30	12	84	2	1			2	6	12	85	53	47	39	60
NUMBER OF RESPONDENTS	107	2094	5	11	10	32	31	12	84	2	1			5	6	15	85	54	49	42	60
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

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

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?

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q12 #YES	79 75%	1534 75%	4 80%~	9 82%~	4 44%~	23 72%~	25 81%~	10 83%~	62 75%~	2 100%~	~	~	~	4 80%~	4 67%~	9 60%~	64 77%~	42 78%	34 72%~	30 73%~	45 76%~
NO	26 25%	511 25%	1 20%~	2 18%~	5 56%~	9 28%~	6 19%~	2 17%~	21 25%~	~	~	~	~	1 20%~	2 33%~	6 40%~	19 23%~	12 22%	13 28%~	11 27%~	14 24%~
NOT ANSWERED	2	49			1				1	1						2		2		1	1
VALID CASES	105	2045	5	11	9	32	31	12	83	2				5	6	15	83	54	47	41	59
NUMBER OF RESPONDENTS	107	2094	5	11	10	32	31	12	84	2	1			5	6	15	85	54	49	42	60
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

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

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?

	WVCH TOT ADULT	OHP TOT ADULT	AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q13 WORST HEALTH CARE POSSIBLE	1	29	~	~	~	~	2%	~	~	~	~	~	~	~	1	1	~	~	1
	0.5%	0.8%						~0.7%	~	~	~	~	~	~	~0.7%	~0.9%	~	~	~0.9%
01	1	27	~	~	1	~	~	~	~	~	~	~	~	1	1	~	~	1	
	0.5%	0.7%			4%	~	~	~0.7%	~	~	~	~	~	~0.7%	~0.9%	~	~	~0.9%	
02	3	39	1	~	~	1	1	2	~	~	~	~	~	1	1	1	2	3	
	1%	1%	5%	~	~	2%	2%	1%	~	~	~	~	~	8%	2%	0.7%	0.9%	2%	3%
03	1	70	~	~	~	~	2%	~	~	~	~	~	~	1	~	~	1	~	
	0.5%	2%*						~0.7%	~	~	~	~	~	~0.7%	~	~	1%	~	
04	5	85	~	2	~	~	4%	4	~	~	~	~	~	2	3	~	5	5	
	2%	2%		7%	~	~	4%	3%	~	~	~	~	~	5%	2%	~	6%	4%*	
05	9	285	~	1	3	4	~	1	7	1	~	~	~	2	7	5	4	3	
	4%	8%*		4%	12%	9%	~	5%	5%	33%	~	~	~	8%	5%	5%	5%	4%	
06	16	223	2	2	2	1	4	3	11	~	~	~	~	2	5	8	8	6	
	8%	6%	10%	7%	8%	2%	7%	15%	7%	~	~	~	~	15%	12%	5%	7%	7%	
07	21	493	2	3	1	8	3	3	17	~	~	~	~	1	4	16	11	9	
	10%	13%	10%	11%	4%	17%	5%	15%	11%	~	~	~	~	8%	10%	11%	10%	10%	
08	43	772	3	8	5	8	14	4	32	1	~	~	~	3	3	7	34	22	
	21%	21%	15%	30%	20%	17%	25%	20%	21%	33%	~	~	~	25%	23%	17%	23%	20%	
09	36	616	2	3	5	12	12	2	29	2	~	~	~	1	3	4	32	23	
	18%	16%	10%	11%	20%	26%	21%	10%	19%	~	67%	~	~	8%	23%	10%	22%*	21%	
BEST HEALTH CARE POSSIBLE	65	1096	10	8	8	12	18	7	48	1	1	~	~	5	4	17	44	37	
	32%	29%	50%	30%	32%	26%	32%	35%	31%	33%	33%	~	~	42%	31%	40%	30%	34%	
#8-10 (NET)	144	2485	15	19	18	32	44	13	109	2	3	~	~	9	10	28	110	82	
	72%	66%	75%	70%	72%	70%	79%	65%	71%	67%	100%	~	~	75%	77%	67%	74%	75%	

Continued

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
		WVCH TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ IND/ PAC ALSK	AMER ILND NATV OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE		
9-10 (NET)	101 50%	1712 46%	12 60%~	11 41%~	13 52%~	24 52%~	30 54%	9 45%~	77 50%~	1 33%~	3 100%~		6 ~	7 ~	50%~	54%~	21 50%~	76 51%	60 55%	39 45%	45 55%	54 48%
NOT ANSWERED	8	106			2	3	1	1	6								3	4	6	2	4	3
VALID CASES	201	3737	20	27	25	46	56	20	153	3	3			12	13		42	148	109	86	82	112
NUMBER OF RESPONDENTS	209 100%	3843 100%	20 100%	27 100%	27 100%	49 100%	57 100%	21 100%	159 100%	3 100%	3 100%			12 100%	13 100%		45 100%	152 100%	115 100%	88 100%	86 100%	115 100%
MEAN	8.14	7.91	8.50	8.04	8.00	8.17	8.18	8.20	8.11	7.67	9.33			8.25	8.08		8.10	8.20	8.31	7.94	8.50	7.94
p stat_(*=Sig @ p<=.05)		.104	~	~	~	~	.862	~	~	~	~	~	~	~	~	~	~	.526	.179	.222	.021*	.092

[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?

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q14 NEVER	4 2%	104 3%	~	~	4%~	1 2%~	1 2%~	1 2%~	1 5%~	3 2%~	~	~	~	~	~	~	1 2%~	3 2%	3 3%	1 1%	2 3%	2 2%
SOMETIMES	22 11%	575 15%	16%~	3 8%~	2 19%~	5 11%~	5 7%	4 11%~	2 11%~	15 10%~	1 33%~	~	~	~	2 17%~	2 17%~	7 17%~	13 9%	9 9%	12 14%	6 8%	14 13%
USUALLY	76 39%	1243 33%	32%~	6 29%~	7 33%~	9 38%~	17 44%	24 42%	8 42%~	58 39%~	1 33%~	1 33%~	~	~	6 50%~	2 17%~	15 36%~	55 38%	35 34%	38 44%	38 49%*	34 31%*
ALWAYS	93 48%	1797 48%	53%~	10 63%~	15 63%~	12 44%~	22 49%~	25 46%	8 42%~	71 48%~	1 33%~	2 67%~	~	~	4 33%~	8 67%~	19 45%~	72 50%	56 54%*	35 41%	31 40%	61 55%*
#ALWAYS + USUALLY (NET)	169 87%	3040 82%*	84%~	16 84%~	22 92%~	21 78%~	39 87%~	49 91%	16 84%~	129 88%~	2 67%~	3 100%~	~	~	10 83%~	10 83%~	34 81%~	127 89%	91 88%	73 85%	69 90%	95 86%
TOP BOX SCORE	93 48%	1797 48%	53%~	10 63%~	15 63%~	12 44%~	22 49%~	25 46%	8 42%~	71 48%~	1 33%~	2 67%~	~	~	4 33%~	8 67%~	19 45%~	72 50%	56 54%*	35 41%	31 40%	61 55%*
NOT ANSWERED	14	124	1	3		4	3	2	12						1	3	9	12	2	9	4	
VALID CASES	195	3719	19	24	27	45	54	19	147	3	3			12	12	42	143	103	86	77	111	
NUMBER OF RESPONDENTS	209 100%	3843 100%	20 100%	27 100%	27 100%	49 100%	57 100%	21 100%	159 100%	3 100%	3 100%			12 100%	13 100%	45 100%	152 100%	115 100%	88 100%	86 100%	115 100%	

[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?

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE			
Q15 YES	250 85%	4201 81%*	25 78%~	37 86%~	32 89%~	54 81%	67 86%	24 92%~	187 85%	3 100%~	3 75%~	1 100%~	14 ~ 93%~	12 75%~	56 82%	178 86%	154 86%	89 85%	99 78%*	141 90%*	
NO	44 15%	995 19%*	7 22%~	6 14%~	4 11%~	13 19%	11 14%	2 8%~	33 15%	1 ~ 25%~	1 ~100%~	1 7%~	1 25%~	4 18%	12 14%	30 14%	26 14%	16 15%	28 22%*	15 10%*	
NOT ANSWERED	10	257		1	1	1	1		3						2	2	2	2	3	1	
VALID CASES	294	5196	32	43	36	67	78	26	220	3	4	1	1	15	16	68	208	180	105	127	156
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q16 NONE	48 21%	713 18%	7 28%~	13 36%~	8 27%~	5 10%~	11 17%~	2 11%~	33 19%	~	~	~	~	4 31%~	~	13 26%	31 18%	39 28%*	8 9%*	21 23%	25 19%
1 TIME	46 20%	973 24%	8 32%~	8 22%~	7 23%~	7 15%~	13 20%	2 11%~	32 18%	1 33%~	1 33%~	~	~	3 23%~	3 25%~	13 26%	31 18%	31 22%	15 17%	22 24%	24 18%
2	55 24%	1005 25%	4 16%~	8 22%~	10 33%~	12 25%~	16 25%	5 26%~	47 27%*	1 33%~	2 67%~	~	~	2 15%~	3 25%~	9 18%	45 27%	31 22%	24 28%	26 28%	29 22%
3	30 13%	534 13%	3 12%~	5 14%~	~	9 19%~	8 12%	4 21%~	21 12%	1 33%~	~	~	~	3 23%~	4 33%~	8 16%	21 13%	17 12%	11 13%	10 11%	19 15%
4	23 10%	322 8%	1 4%~	1 3%~	2 7%~	8 17%~	6 9%	2 11%~	18 10%	~	~	~	~	1 8%~	1 8%~	3 6%	18 11%	9 6%*	13 15%	6 7%	15 11%
5 TO 9	25 11%	403 10%	1 4%~	1 3%~	3 10%~	5 10%~	9 14%	4 21%~	19 11%	~	~	1 100%~	~	~	1 8%~	4 8%	18 11%	9 6%*	14 16%	5 5%*	17 13%
10 OR MORE TIMES	4 2%	75 2%	1 4%~	~	~	2 4%~	1 2%	~	4 2%*	~	~	~	~	~	~	~	4 2%*	3 2%	1 1%	2 2%	2 2%
NOT ANSWERED	19	238		1	2	6	3	5	13					1		6	10	15	3	7	10
VALID CASES	231	4026	25	36	30	48	64	19	174	3	3	1		13	12	50	168	139	86	92	131
NUMBER OF RESPONDENTS	250	4264	25	37	32	54	67	24	187	3	3	1		14	12	56	178	154	89	99	141
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q15 = YES]

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	WVCH 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 WHTE	AS- IAN	NATV PAC ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q17 NEVER	2 1%	47 1%	1 ~	1 5%~	1 5%~	~	~	1 ~0.7%~	~	~	~	~	1 ~11%~	1 ~	1 3%~	1 0.7%~	1 1%	1 1%	2 ~2%	
SOMETIMES	12 7%	196 6%	2 11%~	1 5%~	2 9%~	1 2%~	6 11%	10 7%~	~	~	~	~	1 ~11%~	1 8%~	3 8%~	9 7%~	6 6%	6 8%	2 3%	9 8%
USUALLY	44 24%	719 22%	5 28%~	4 18%~	5 23%~	9 21%~	12 23%	5 29%~	33 24%~	1 33%~	1 33%~	~	2 ~22%~	2 17%~	9 24%~	31 23%~	22 22%	18 23%	24 34%*	16 15%*
ALWAYS	124 68%	2245 70%	11 61%~	16 73%~	14 64%~	33 77%~	35 66%	12 71%~	96 69%~	2 67%~	2 67%~	1 100%~	5 ~56%~	9 75%~	24 65%~	95 70%~	70 71%	53 68%	44 63%	79 75%*
#ALWAYS + USUALLY (NET)	168 92%	2963 92%	16 89%~	20 91%~	19 86%~	42 98%~	47 89%	17 100%~	129 92%~	3 100%~	3 100%~	1 100%~	7 ~78%~	11 92%~	33 89%~	126 93%~	92 93%	71 91%	68 97%*	95 90%
TOP BOX SCORE	124 68%	2245 70%	11 61%~	16 73%~	14 64%~	33 77%~	35 66%	12 71%~	96 69%~	2 67%~	2 67%~	1 100%~	5 ~56%~	9 75%~	24 65%~	95 70%~	70 71%	53 68%	44 63%	79 75%*
NOT ANSWERED	1	22	1						1						1	1		1		
VALID CASES	182	3206	18	22	22	43	53	17	140	3	3	1	9	12	37	136	99	78	70	106
NUMBER OF RESPONDENTS	183	3228	18	23	22	43	53	17	141	3	3	1	9	12	37	137	100	78	71	106
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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



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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	WVCH 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- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q18 NEVER	1 0.5%	67 2%*		1 5%									1 11%		1 3%		1 1%			1 ~0.9%
SOMETIMES	16 9%	251 8%	1 6%	1 5%	4 18%	2 5%	7 13%	15 11%							2 5%	13 10%	5 5%	10 13%	3 4%	11 10%
USUALLY	37 20%	665 21%	2 11%	2 9%	3 14%	9 21%	11 21%	5 19%	27 19%				2 ~	3 25%	7 19%	25 18%	16 16%	18 23%	17 24%	16 15%*
ALWAYS	128 70%	2214 69%	15 83%	18 82%	15 68%	32 74%	35 66%	12 71%	98 70%	3 100%	3 100%	1 100%	6 ~	9 75%	27 73%	98 72%	77 78%*	50 64%	50 71%	78 74%
#ALWAYS + USUALLY (NET)	165 91%	2879 90%	17 94%	20 91%	18 82%	41 95%	46 87%	17 100%	125 89%	3 100%	3 100%	1 100%	8 ~	12 100%	34 92%	123 90%	93 94%	68 87%	67 96%*	94 89%
TOP BOX SCORE	128 70%	2214 69%	15 83%	18 82%	15 68%	32 74%	35 66%	12 71%	98 70%	3 100%	3 100%	1 100%	6 ~	9 75%	27 73%	98 72%	77 78%*	50 64%	50 71%	78 74%
NOT ANSWERED	1	31		1					1						1	1			1	
VALID CASES	182	3197	18	22	22	43	53	17	140	3	3	1	9	12	37	136	99	78	70	106
NUMBER OF RESPONDENTS	183	3228	18	23	22	43	53	17	141	3	3	1	9	12	37	137	100	78	71	106
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER			
	WVCH TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q19 NEVER	4 2%	85 3%	1 ~	1 5%	1 5%	1 2%	1 2%	3 2%	~	~	~	~	1 11%	2 5%	2 1%	2 2%	2 3%	4 ~	4 4%	
SOMETIMES	9 5%	193 6%	1 6%	~	2 9%	1 2%	2 4%	2 12%	8 6%	~	~	~	~	~	8 6%	4 4%	4 5%	3 4%	5 5%	
USUALLY	35 19%	575 18%	1 6%	2 9%	4 18%	10 23%	11 21%	5 29%	29 21%	~	~	~	2 22%	1 8%	6 16%	27 20%	15 15%	19 24%	14 20%	19 18%
ALWAYS	133 73%	2339 73%	16 89%	19 86%	15 68%	31 72%	39 74%	10 59%	100 71%	3 100%	3 100%	1 100%	6 67%	11 92%	29 78%	99 73%	78 79%	53 68%	53 76%	78 74%
#ALWAYS + USUALLY (NET)	168 93%	2915 91%	17 94%	21 95%	19 86%	41 95%	50 94%	15 88%	129 92%	3 100%	3 100%	1 100%	8 89%	12 100%	35 95%	126 93%	93 94%	72 92%	67 96%	97 92%
TOP BOX SCORE	133 73%	2339 73%	16 89%	19 86%	15 68%	31 72%	39 74%	10 59%	100 71%	3 100%	3 100%	1 100%	6 67%	11 92%	29 78%	99 73%	78 79%	53 68%	53 76%	78 74%
NOT ANSWERED	2	35	1						1						1	1		1		
VALID CASES	181	3193	18	22	22	43	53	17	140	3	3	1	9	12	37	136	99	78	70	106
NUMBER OF RESPONDENTS	183	3228	18	23	22	43	53	17	141	3	3	1	9	12	37	137	100	78	71	106
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q20 NEVER	3 2%	95 3%	~	~	1 5%	~	2 4%	~	3 2%	~	~	~	~	~	~	~	3 2%	~	3 4%	~	2 2%
SOMETIMES	22 12%	295 9%	3 17%	3 14%	5 23%	3 7%	6 11%	2 12%	15 11%	~	~	~	~	4 44%	3 25%	9 24%	13 10%	12 12%	10 13%	7 10%	15 14%
USUALLY	56 31%	856 27%	4 22%	10 45%	3 14%	11 26%	18 34%	7 41%	43 31%	1 33%	~	~	~	4 44%	2 17%	16 43%	37 27%	29 29%	25 32%	25 36%	29 27%
ALWAYS	100 55%	1950 61%	11 61%	9 41%	13 59%	29 67%	27 51%	8 47%	79 56%	2 67%	3 100%	1 100%	~	1 11%	7 58%	12 32%	83 61%	58 59%	40 51%	38 54%	60 57%
#ALWAYS + USUALLY (NET)	156 86%	2806 88%	15 83%	19 86%	16 73%	40 93%	45 85%	15 88%	122 87%	3 100%	3 100%	1 100%	~	5 56%	9 75%	28 76%	120 88%	87 88%	65 83%	63 90%	89 84%
TOP BOX SCORE	100 55%	1950 61%	11 61%	9 41%	13 59%	29 67%	27 51%	8 47%	79 56%	2 67%	3 100%	1 100%	~	1 11%	7 58%	12 32%	83 61%	58 59%	40 51%	38 54%	60 57%
NOT ANSWERED	2	31	~	1	~	~	~	~	1	~	~	~	~	~	~	1	1	~	1	~	1
VALID CASES	181	3197	18	22	22	43	53	17	140	3	3	1	~	9	12	37	136	99	78	70	106
NUMBER OF RESPONDENTS	183 100%	3228 100%	18 100%	23 100%	22 100%	43 100%	53 100%	17 100%	141 100%	3 100%	3 100%	1 100%	~	9 100%	12 100%	37 100%	137 100%	100 100%	78 100%	71 100%	106 100%

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

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q21																					
YES	103 57%	1943 61%	7 39%	9 41%	12 55%	26 60%	31 60%	14 82%	83 60%	~	1 ~100%	6 ~	6 50%	21 57%	77 57%	53 54%	47 61%	35 50%	65 62%		
NO	77 43%	1222 39%	11 61%	13 59%	10 45%	17 40%	21 40%	3 18%	56 40%	3 100%	3 100%	~	3 ~	6 33%	6 50%	16 43%	58 43%	46 46%	30 39%	35 50%	40 38%
NOT ANSWERED	3	62	1			1		2						2	1	1		1	1		
VALID CASES	180	3166	18	22	22	43	52	17	139	3	3	1	9	12	37	135	99	77	70	105	
NUMBER OF RESPONDENTS	183	3228	18	23	22	43	53	17	141	3	3	1	9	12	37	137	100	78	71	106	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	WVCH TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q22 NEVER	4 4%	119 6%	1 17%	1 13%	1 8%	1 4%	~	2 2%	~	~	~	~	2 40%	2 11%	2 3%	4 8%	~	1 3%	3 5%	
SOMETIMES	15 15%	265 14%	1 17%	1 13%	3 25%	1 4%	7 23%	1 8%	~	~	~	~	1 17%	1 20%	2 11%	13 17%	7 14%	8 17%	2 6%	13 20%
USUALLY	32 32%	545 29%	2 33%	1 13%	3 25%	13 52%	8 26%	5 38%	~	1 ~100%	~	~	2 33%	2 40%	6 32%	24 32%	19 39%	12 26%	14 44%	18 28%
ALWAYS	48 48%	927 50%	2 33%	5 63%	5 42%	10 40%	16 52%	7 54%	~	~	~	~	3 50%	~	9 47%	36 48%	19 39%	27 57%	15 47%	30 47%
#ALWAYS + USUALLY (NET)	80 81%	1472 79%	4 67%	6 75%	8 67%	23 92%	24 77%	12 92%	~	1 ~100%	~	~	5 83%	2 40%	15 79%	60 80%	38 78%	39 83%	29 91%	48 75%
TOP BOX SCORE	48 48%	927 50%	2 33%	5 63%	5 42%	10 40%	16 52%	7 54%	~	~	~	~	3 50%	~	9 47%	36 48%	19 39%	27 57%	15 47%	30 47%
NOT ANSWERED	4	61	1	1		1		1					1	2	2	4		3	1	
VALID CASES	99	1856	6	8	12	25	31	13	81		1	6	5	19	75	49	47	32	64	
NUMBER OF RESPONDENTS	103	1917	7	9	12	26	31	14	83		1	6	6	21	77	53	47	35	65	
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE	FE- MALE			
Q23 WORST PERSONAL DOCTOR POSSIBLE		60 2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
01	1 0.4%	30 0.7%	~	~	~	1 2%	~	~	1 0.6%	~	~	~	~	~	1 ~0.6%	1 0.7%	~	~	1 ~0.8%	~	
02	2 0.9%	27 0.7%	~	~	1 3%	1 2%	~	~	1 0.6%	~	~	~	1 7%	~	1 2%	1 0.6%	2 1%	~	1 1%	1 0.8%	
03	4 2%	71 2%	~	1 3%	1 3%	1 2%	1 2%	~	3 2%	~	~	~	~	1 7%	~	1 2%	3 2%	2 1%	2 2%	~	4 3%
04	7 3%	80 2%	1 4%	2 6%	~	~	2 3%	1 5%	6 3%	~	~	~	~	1 7%	~	2 4%	4 2%	2 1%	5 6%	2 2%	5 4%
05	10 4%	203 5%	~	3 8%	3 10%	~	3 5%	~	9 5%	~	~	~	~	~	~	1 2%	8 5%	7 5%	2 2%	2 2%	6 5%
06	6 3%	153 4%	2 8%	~	1 3%	1 2%	2 3%	~	4 2%	~	~	~	~	1 7%	1 8%	2 4%	4 2%	4 3%	2 2%	3 3%	3 2%
07	21 9%	289 7%	2 8%	6 17%	2 6%	6 12%	4 6%	1 5%	16 9%	~	~	~	~	2 14%	1 8%	6 12%	14 8%	14 10%	7 8%	12 13%	9 7%
08	38 16%	720 18%	5 20%	7 19%	5 16%	6 12%	10 16%	4 21%	30 17%	1 33%	~	1 100%	~	~	2 17%	7 13%	29 17%	23 16%	15 17%	16 17%	21 16%
09	47 20%	743 19%	2 8%	8 22%	4 13%	12 25%	16 25%	3 16%	30 17%	2 67%	1 33%	~	~	2 14%	1 8%	13 25%	29 17%	28 20%	17 20%	18 20%	27 20%
BEST PERSONAL DOCTOR POSSIBLE	95 41%	1623 41%	13 52%	9 25%	14 45%	20 42%	26 41%	10 53%	72 42%	2 ~	~	~	~	6 ~	7 58%	19 37%	74 44%	57 41%	36 42%	38 41%	55 42%
#8-10 (NET)	180 78%	3087 77%	20 80%	24 67%	23 74%	38 79%	52 81%	17 89%	132 77%	3 100%	3 100%	1 100%	~	8 ~	10 83%	39 75%	132 79%	108 77%	68 79%	72 78%	103 78%

Continued

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
		WVCH TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL-	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE	
9-10 (NET)	142 61%	2366 59%	15 60%~	17 47%~	18 58%~	32 67%~	42 66%	13 68%~	102 59%	2 67%~	3 100%~		8 ~	8 ~	57%~	67%~	32 62%	103 62%	85 61%	53 62%	56 61%	82 62%
NOT ANSWERED	19	265		1	1	6	3	5	15								4	11	14	3	7	9
VALID CASES	231	3999	25	36	31	48	64	19	172	3	3	1		14	12		52	167	140	86	92	132
NUMBER OF RESPONDENTS	250 100%	4264 100%	25 100%	37 100%	32 100%	54 100%	67 100%	24 100%	187 100%	3 100%	3 100%	1 100%		14 100%	12 100%		56 100%	178 100%	154 100%	89 100%	99 100%	141 100%
MEAN	8.46	8.32	8.72	7.94	8.26	8.54	8.59	8.95	8.41	8.67	9.67	8.00		7.64	9.00		8.37	8.52	8.44	8.49	8.61	8.39
p stat_(*=Sig @ p<=.05)		.215	~	~	~	~	.500	~	.496	~	~	~	~	~	~	~	.677	.460	.842	.878	.326	.483

[ASKED IF Q15 = YES]

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	WHTE	BLK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q24																					
YES	109 37%	2074 40%	8 25%~	7 17%~	10 27%~	32 47%	35 45%	15 58%~	88 40%	2 67%~	1 25%~	1 100%~	5 ~	4 33%~	17 24%*	88 43%*	50 28%*	58 55%*	43 34%	63 40%	
NO	183 63%	3119 60%	24 75%~	35 83%~	27 73%~	36 53%	43 55%	11 42%~	133 60%	1 33%~	3 75%~	1 ~100%~	10 67%~	11 73%~	53 76%*	119 57%*	130 72%*	48 45%*	85 66%	93 60%	
NOT ANSWERED	12	260		2			1		2					1		3	2	1	2	1	
VALID CASES	292	5193	32	42	37	68	78	26	221	3	4	1	1	15	15	70	207	180	106	128	156
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%



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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q25 NEVER	4 4%	135 7%	1 13%~	1 ~	2 10%~	2 7%~	~	4 5%~	~	~	~	~	~	~	4 5%~	4 8%~	2 5%~	2 3%~			
SOMETIMES	12 12%	292 15%	1 ~	2 14%~	4 20%~	3 13%~	2 9%~	10 12%~	~	~	~	2 40%~	~	2 13%~	10 12%~	4 8%~	8 15%~	2 5%~	10 17%~		
USUALLY	34 33%	614 31%	1 13%~	5 ~	6 50%~	14 20%~	6 42%~	24 30%~	1 50%~	1 100%~	~	1 20%~	2 50%~	6 40%~	25 30%~	9 19%~	24 45%~	12 29%~	20 34%~		
ALWAYS	52 51%	926 47%	6 75%~	6 86%~	2 20%~	18 60%~	16 48%~	4 33%~	43 53%~	1 50%~	1 100%~	2 40%~	2 50%~	7 47%~	44 53%~	31 65%~	21 40%~	25 61%~	27 46%~		
#ALWAYS + USUALLY (NET)	86 84%	1540 78%	7 88%~	6 86%~	7 70%~	24 80%~	30 91%~	10 83%~	67 83%~	2 100%~	1 100%~	1 100%~	~	3 60%~	4 100%~	13 87%~	69 83%~	40 83%~	45 85%~	37 90%~	47 80%~
TOP BOX SCORE	52 51%	926 47%	6 75%~	6 86%~	2 20%~	18 60%~	16 48%~	4 33%~	43 53%~	1 50%~	1 100%~	~	2 40%~	2 50%~	7 47%~	44 53%~	31 65%~	21 40%~	25 61%~	27 46%~	
NOT ANSWERED	7	78			2	2	3	7						2	5	2	5	2	4		
VALID CASES	102	1967	8	7	10	30	33	12	81	2	1	1	5	4	15	83	48	53	41	59	
NUMBER OF RESPONDENTS	109	2045	8	7	10	32	35	15	88	2	1	1	5	4	17	88	50	58	43	63	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q24 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	WVCH TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q26 NONE	4	93			1	2		1	3	1						4	2	2	2	2	
	4%	5%	~	~	10%~	7%~	~	8%~	4%~	50%~	~	~	~	~	~	5%~	4%~	4%~	5%~	3%~	
1 SPECIALIST	52	1033	8	6	5	16	16	1	43	1	1		4	1	7	44	34	18	23	28	
	50%	52%	100%~	86%~	50%~	55%~	46%~	8%~	52%~	50%~	100%~	~	~	80%~	25%~	47%~	52%~	72%~	33%~	56%~	47%~
2	25	522		1	2	5	10	5	21					1	4	19	6	18	10	13	
	24%	26%	~	14%~	20%~	17%~	29%~	42%~	26%~	~	~	~	~	25%~	27%~	23%~	13%~	33%~	24%~	22%~	
3	14	217				4	7	3	10		1		1	1	2	11	2	12	4	10	
	14%	11%	~	~	~	14%~	20%~	25%~	12%~	~	~	100%~	~	20%~	25%~	13%~	13%~	4%~	22%~	10%~	17%~
4	6	74			2	1	1	2	4						2	4	2	4	1	5	
	6%	4%	~	~	20%~	3%~	3%~	17%~	5%~	~	~	~	~	~	13%~	5%~	4%~	7%~	2%~	8%~	
5 OR MORE SPECIALISTS	2	41				1	1		1					1	2	1	1	1	1		
	2%	2%	~	~	~	3%~	3%~	~	1%~	~	~	~	~	25%~	~	2%~	2%~	2%~	2%~	2%~	
NOT ANSWERED	6	66				3		3	6						2	4	3	3	2	4	
VALID CASES	103	1979	8	7	10	29	35	12	82	2	1	1		5	4	15	84	47	55	41	59
NUMBER OF RESPONDENTS	109	2045	8	7	10	32	35	15	88	2	1	1		5	4	17	88	50	58	43	63
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE	FE- MALE			
Q27 WORST SPECIALIST POSSIBLE		21 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~			
01		7 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~			
02	1 1%	19 1%	~	~	1 4%	~	1 1%	~	~	~	~	~	1 1%	1 2%	~	1 3%	~	~			
03	1 1%	28 2%	~	~	~	1 3%	1 1%	~	~	~	~	~	1 1%	~	1 2%	~	1 2%	~			
04		18 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~			
05	4 4%	88 5%	~	2 22%	1 4%	1 10%	4 5%	~	~	~	~	~	4 5%	1 2%	3 6%	1 3%	3 5%	~			
06	5 5%	76 4%	1 13%	1 14%	1 11%	1 4%	1 3%	4 5%	~	~	1 20%	~	1 7%	4 5%	2 4%	3 6%	2 5%	3 5%			
07	4 4%	154 8%*	~	~	2 7%	2 6%	3 4%	~	~	~	~	1 25%	4 5%	1 2%	3 6%	2 5%	2 4%	~			
08	18 18%	272 15%	1 13%	2 22%	5 19%	6 17%	4 40%	13 17%	1 100%	~	2 40%	~	4 27%	14 18%	6 13%	12 23%	4 11%	14 25%			
09	17 17%	345 19%	3 38%	2 29%	~	3 11%	7 20%	2 20%	15 19%	~	1 100%	~	1 7%	14 18%	8 18%	9 17%	7 18%	10 18%			
BEST SPECIALIST POSSIBLE	48 49%	812 44%	3 38%	4 57%	4 44%	14 52%	18 51%	3 30%	37 47%	1 100%	~	~	2 40%	3 75%	9 60%	37 47%	26 58%	21 40%	21 55%	24 42%	
#8-10 (NET)	83 85%	1429 78%*	7 88%	6 86%	6 67%	22 81%	31 89%	9 90%	65 83%	1 100%	1 100%	1 100%	~	4 80%	3 75%	14 93%	65 82%	40 89%	42 81%	32 84%	48 84%

Continued

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
		WVCH TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ IND/ PAC ALSK	AMER ILND NATV OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE
9-10 (NET)	65 66%	1157 63%	6 75%~	6 86%~	4 44%~	17 63%~	25 71%~	5 50%~	52 67%~	1 100%~	1 ~100%~	2 ~ 40%~	3 75%~	10 67%~	51 65%~	34 76%~	30 58%~	28 74%~	34 60%~	
NOT ANSWERED	1	34					1	1						1		1		1		
VALID CASES	98	1838	8	7	9	27	35	10	78	1	1	1	5	4	15	79	45	52	38	57
NUMBER OF RESPONDENTS	99	1872	8	7	9	27	35	11	79	1	1	1	5	4	15	80	45	53	39	57
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
MEAN	8.78	8.47	8.87	9.14	8.00	8.67	8.97	8.50	8.71	10.0	8.00	9.00	8.40	9.25	9.13	8.67	9.02	8.54	8.89	8.63
p stat_(*=Sig @ p<=.05)		.120	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

[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?

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ IND/ PAC ALSK	AMER ILND NATV OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE				
Q28 YES	50 17%	1182 23%*	2 6%~	7 17%~	5 14%~	16 24%	14 18%	5 19%~	36 17%	2 67%~	1 25%~	1 100%~	5 ~ 33%~	2 13%~	11 16%	38 19%	29 16%	21 20%	19 15%	31 20%	
NO	237 83%	3968 77%*	30 94%~	34 83%~	31 86%~	52 76%	62 82%	21 81%~	181 83%	1 33%~	3 75%~	1 ~100%~	10 67%~	13 87%~	58 84%	166 81%	147 84%	85 80%	106 85%	124 80%	
NOT ANSWERED	17	303		3	1		3		6					1	1	6	6	1	5	2	
VALID CASES	287	5150	32	41	36	68	76	26	217	3	4	1	1	15	15	69	204	176	106	125	155
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%

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?

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q29 NEVER	5 10%	119 12%		2 ~ 29%~		1 ~ 6%~	2 14%~		4 11%~					1 ~ 20%~		1 9%~	4 11%~	5 17%~		2 11%~	3 10%~
SOMETIMES	7 14%	339 34%*	1 50%~		2 ~ 40%~	2 12%~	2 14%~		7 19%~								7 18%~	1 3%~	6 29%~	2 11%~	5 16%~
USUALLY	26 52%	332 33%*	1 50%~	3 43%~	2 40%~	7 44%~	9 64%~	4 80%~	17 47%~	1 ~100%~				3 ~ 60%~	2 100%~	8 73%~	18 47%~	16 55%~	10 48%~	10 53%~	16 52%~
ALWAYS	12 24%	213 21%		2 ~ 29%~	1 20%~	6 37%~	1 7%~	1 20%~	8 22%~	2 100%~	1 100%~			1 ~ 20%~		2 18%~	9 24%~	7 24%~	5 24%~	5 26%~	7 23%~
#ALWAYS + USUALLY (NET)	38 76%	545 54%*	1 50%~	5 71%~	3 60%~	13 81%~	10 71%~	5 100%~	25 69%~	2 100%~	1 100%~	1 100%~		4 ~ 80%~	2 100%~	10 91%~	27 71%~	23 79%~	15 71%~	15 79%~	23 74%~
TOP BOX SCORE	12 24%	213 21%		2 ~ 29%~	1 20%~	6 37%~	1 7%~	1 20%~	8 22%~	2 100%~	1 100%~			1 ~ 20%~		2 18%~	9 24%~	7 24%~	5 24%~	5 26%~	7 23%~
NOT ANSWERED		19																			
VALID CASES	50	1003	2	7	5	16	14	5	36	2	1	1		5	2	11	38	29	21	19	31
NUMBER OF RESPONDENTS	50 100%	1022 100%	2 100%	7 100%	5 100%	16 100%	14 100%	5 100%	36 100%	2 100%	1 100%	1 100%		5 100%	2 100%	11 100%	38 100%	29 100%	21 100%	19 100%	31 100%

[ASKED IF Q28 = YES]

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLACK OR AFR-	ASIAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q30																					
YES	92 32%	1525 30%	8 25%~	12 28%~	6 16%~	27 40%	24 31%	11 42%~	65 29%	3 100%~	1 ~100%~	6 ~ 40%~	5 33%~	29 41%	56 27%*	48 27%*	42 40%*	34 27%	53 34%		
NO	199 68%	3584 70%	24 75%~	31 72%~	31 84%~	41 60%	53 69%	15 58%~	156 71%	4 ~100%~	1 ~100%~	9 60%~	10 67%~	41 59%	152 73%*	132 73%*	64 60%*	94 73%	103 66%		
NOT ANSWERED	13	344	1			2		2					1		2	2	1	2	1		
VALID CASES	291	5109	32	43	37	68	77	26	221	3	4	1	1	15	15	70	208	180	106	128	156
NUMBER OF RESPONDENTS	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q31 NEVER	1 1%	51 4%*	1 13%~	~	~	~	~	1 2%~	~	~	~	~	~	~	1 2%~	1 2%~	1 3%~	~			
SOMETIMES	19 21%	295 21%	2 25%~	3 25%~	3 50%~	4 17%~	5 21%~	1 9%~	16 25%~	~	~	~	~	1 20%~	6 22%~	12 22%~	10 21%~	9 23%~	8 25%~	9 17%~	
USUALLY	20 22%	400 28%	3 38%~	1 8%~	1 17%~	6 25%~	5 21%~	3 27%~	13 21%~	~	1 100%~	~	1 17%~	1 20%~	5 19%~	12 22%~	9 19%~	10 25%~	6 19%~	13 25%~	
ALWAYS	49 55%	670 47%	2 25%~	8 67%~	2 33%~	14 58%~	14 58%~	7 64%~	33 52%~	3 100%~	~	~	~	5 83%~	3 60%~	16 59%~	30 55%~	27 57%~	21 53%~	17 53%~	30 58%~
#ALWAYS + USUALLY (NET)	69 78%	1070 76%	5 63%~	9 75%~	3 50%~	20 83%~	19 79%~	10 91%~	46 73%~	3 100%~	1 100%~	~	~	6 100%~	4 80%~	21 78%~	42 76%~	36 77%~	31 78%~	23 72%~	43 83%~
TOP BOX SCORE	49 55%	670 47%	2 25%~	8 67%~	2 33%~	14 58%~	14 58%~	7 64%~	33 52%~	3 100%~	~	~	~	5 83%~	3 60%~	16 59%~	30 55%~	27 57%~	21 53%~	17 53%~	30 58%~
NOT ANSWERED	3	26				3			2						2	1	1	2	2	1	
VALID CASES	89	1415	8	12	6	24	24	11	63	3	1			6	5	27	55	47	40	32	52
NUMBER OF RESPONDENTS	92	1441	8	12	6	27	24	11	65	3	1			6	5	29	56	48	42	34	53
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]



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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q32 NEVER		24 2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	3 3%	83 6%	1 13%	1 8%	~	1 4%	~	2 3%	~	~	~	~	~	1 20%	1 4%	2 4%	2 4%	1 2%	1 3%	2 4%	
USUALLY	23 26%	312 22%	4 50%	3 25%	3 50%	8 33%	2 8%	2 18%	18 29%	~	~	~	~	1 17%	8 30%	13 24%	11 23%	12 30%	9 28%	12 23%	
ALWAYS	63 71%	995 70%	3 38%	8 67%	3 50%	15 63%	22 92%	9 82%	43 68%	3 100%	~	1 100%	~	5 83%	4 80%	18 67%	40 73%	34 72%	27 68%	22 69%	38 73%
#ALWAYS + USUALLY (NET)	86 97%	1307 92%	7 88%	11 92%	6 100%	23 96%	24 100%	11 100%	61 97%	3 100%	~	1 100%	~	6 100%	4 80%	26 96%	53 96%	45 96%	39 98%	31 97%	50 96%
TOP BOX SCORE	63 71%	995 70%	3 38%	8 67%	3 50%	15 63%	22 92%	9 82%	43 68%	3 100%	~	1 100%	~	5 83%	4 80%	18 67%	40 73%	34 72%	27 68%	22 69%	38 73%
NOT ANSWERED	3	27				3		2							2	1	1	2	2	1	
VALID CASES	89	1414	8	12	6	24	24	11	63	3	1	6	5	27	55	47	40	32	52		
NUMBER OF RESPONDENTS	92	1441	8	12	6	27	24	11	65	3	1	6	5	29	56	48	42	34	53		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		

[ASKED IF Q30 = YES]

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q33 YES	94 33%	1804 36%	12 39%	10 23%	17 47%	23 34%	24 32%	7 27%	71 32%	1 33%	1 25%	1 100%	1 100%	7 47%	2 13%	29 43%	63 30%	59 33%	35 33%	42 33%	51 33%
NO	192 67%	3261 64%	19 61%	33 77%	19 53%	45 66%	52 68%	19 73%	148 68%	2 67%	3 75%	~	~	8 53%	13 87%	39 57%	145 70%	119 67%	70 67%	84 67%	104 67%
NOT ANSWERED	18	388	1	1	1	3		4						1	2	2	4	2	4	2	
VALID CASES	286	5065	31	43	36	68	76	26	219	3	4	1	1	15	15	68	208	178	105	126	155
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	WVCH TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
PQ34 NEVER	4 1%	97 2%	1 3%	2 ~	2 6%	~	1 ~	1 4%	1 0.5%	~	~	~	~	~	3 4%	1 0.5%	2 1%	2 2%	2 2%	2 1%	
SOMETIMES	16 6%	322 6%	2 6%	3 7%	4 11%	4 6%	3 4%	~	11 5%	1 25%	1 ~	1 100%	~	1 7%	4 6%	12 6%	11 6%	5 5%	6 5%	10 7%	
USUALLY	32 11%	697 14%	4 13%	4 9%	6 17%	5 8%	8 11%	5 20%	25 12%	1 33%	~	~	5 ~	1 33%	12 7%	20 10%	18 10%	14 13%	14 11%	18 12%	
ALWAYS	229 81%	3891 78%	24 77%	36 84%	24 67%	56 86%	64 85%	19 76%	178 83%	2 67%	3 75%	1 100%	10 ~	13 87%	48 72%*	171 84%	143 82%	83 80%	101 82%	123 80%	
#ALWAYS + USUALLY (NET)	261 93%	4589 92%	28 90%	40 93%	30 83%	61 94%	72 96%	24 96%	203 94%	3 100%	3 75%	1 100%	15 ~	14 93%	60 90%	191 94%	161 93%	97 93%	115 93%	141 92%	
TOP BOX SCORE	229 81%	3891 78%	24 77%	36 84%	24 67%	56 86%	64 85%	19 76%	178 83%	2 67%	3 75%	1 100%	10 ~	13 87%	48 72%*	171 84%	143 82%	83 80%	101 82%	123 80%	
NOT ANSWERED	5	87				3	1	1	4						1	4	4	1	3	2	
VALID CASES	281	5008	31	43	36	65	75	25	215	3	4	1	1	15	15	67	204	174	104	123	153
NUMBER OF RESPONDENTS	286	5095	31	43	36	68	76	26	219	3	4	1	1	15	15	68	208	178	105	126	155
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER					
	WVCH TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE			
	Q35 WORST HEALTH PLAN POSSIBLE	1 0.4%	59 1%*	~	~	~	~	1%	~0.5%	~	~	~	~	~	~	1 ~0.5%	1 ~ 1%	~	1 ~0.6%		
01	1 0.4%	31 0.6%	~	~	~	2%	~	~0.5%	~	~	~	~	~	~	1 ~0.5%	1 0.6%	~	1 ~0.6%			
02	2 0.7%	40 0.8%	~	~	1 3%	~	1%	~0.5%	~	~	1 ~100%	~	~	~	2 ~ 1%	1 0.6%	1 1%	~	2 ~ 1%		
03	1 0.4%	85 2%*	~	~	~	2%	~	~0.5%	~	~	~	~	~	~	1 ~0.5%	1 0.6%	~	1 ~0.6%			
04	4 1%	121 2%	~	~	~	2%	3 4%	~ 1%	~	~	~	~	1 7%	~	1 1%	3 2%	2 1%	2 2%	2 2%	2 1%	
05	25 9%	451 9%	4 12%	3 7%	3 9%	7 11%	6 8%	1 4%	24 11%*	~	~	~	~	~	1 1%*	23 12%*	13 7%	12 12%	15 13%	10 6%	
06	17 6%	332 7%	3 9%	5 12%	2 6%	2 3%	4 5%	1 4%	16 8%*	~	~	~	~	1 7%	4 6%	13 7%	9 5%	8 8%	5 4%	12 8%	
07	37 13%	632 13%	5 16%	7 16%	9 26%	9 14%	4 5%*	1 4%	28 13%	~	1 25%	~	~	1 7%	3 21%	6 9%	26 13%	21 15%	15 13%	18 12%	
08	46 16%	921 19%	6 19%	9 21%	4 11%	6 9%*	14 18%	6 25%	34 16%	1 33%	1 25%	~	~	3 21%	4 29%	11 16%	34 17%	32 18%	14 14%	15 13%	30 19%
09	54 19%	768 16%	5 16%	6 14%	3 9%	16 25%	16 21%	8 33%	42 20%	2 67%	2 50%	1 ~100%	~	2 ~ 14%	~	11 16%	40 20%	32 18%	21 21%	22 18%	32 21%
BEST HEALTH PLAN POSSIBLE	91 33%	1430 29%	9 28%	13 30%	13 37%	21 33%	27 36%	7 29%	62 29%*	~	~	~	~	7 ~ 50%	6 43%	35 51%*	55 28%*	65 37%*	25 25%*	44 37%	46 30%
#8-10 (NET)	191 68%	3119 64%	20 62%	28 65%	20 57%	43 67%	57 75%	21 88%	138 65%*	3 100%	3 75%	1 ~100%	~	12 ~ 86%	10 71%	57 83%*	129 65%*	129 73%*	60 61%*	81 68%	108 70%

Continued

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLK OR AFR-	AS- IAN	NATV ILND	AMER HAW/ IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE				
9-10 (NET)	145 52%	2198 45%*	14 44%~	19 44%~	16 46%~	37 58%	43 57%	15 63%~	104 49%	2 67%~	2 50%~	1 100%~	9 ~	6 64%~	46 43%~	95 67%*	48%*	97 55%	46 46%	66 55%	78 50%
NOT ANSWERED	25	583	1	2	4	3	2	10					1	2	1	11		5	8	11	2
VALID CASES	279	4870	32	43	35	64	76	24	213	3	4	1	1	14	14	69	199	177	99	119	155
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%
MEAN	8.15	7.82	8.00	8.14	8.03	8.12	8.18	8.67	7.98	8.67	8.25	9.00	2.00	8.79	8.50	8.87	7.92	8.33	7.82	8.26	8.08
p stat_(*=Sig @ p<=.05)		.003*	~	~	~.903	.858		~.003*	~	~	~	~	~	~	~.000*	.000*	.041*	.037*	.408	.471	

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?

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ IND/ PAC ALSK	AMER ILND NATV OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE			
Q35A YES	39 14%	736 14%	2 6%~	3 7%~	2 6%~	9 14%	15 20%	8 33%~	34 16%*	1 33%~	~	~	~	2 13%~	1 7%~	5 7%*	34 17%*	14 8%*	23 23%*	14 11%	24 16%	
NO	245 86%	4378 86%	30 94%~	40 93%~	34 94%~	57 86%	61 80%	16 67%~	182 84%*	2 67%~	4 100%~	~	1 100%~	13 87%~	14 93%~	65 93%*	168 83%*	164 92%*	79 77%*	110 89%	130 84%	
NOT ANSWERED	20	339		1	1	2	3	2	7				1			8		4	5	6	3	
VALID CASES	284	5114	32	43	36	66	76	24	216	3	4		1	15	15	70	202	178	102	124	154	
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%		1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHER	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q35B NEVER	4 11%	123 19%	1 ~ 33%	1 ~ 11%	1 7%	1 13%	2 6%	~	~	~	~	1 50%	1 100%	1 20%	3 9%	4 29%	~	2 15%	2 8%	
SOMETIMES	3 8%	72 11%	1 50%	1 50%	~	1 13%	2 6%	~	~	~	~	~	~	1 20%	2 6%	2 14%	1 4%	~	3 13%	
USUALLY	10 26%	177 27%	1 50%	1 33%	1 50%	3 11%	3 21%	3 38%	10 30%	~	~	~	~	2 40%	8 24%	2 14%	7 30%	5 38%	5 21%	
ALWAYS	21 55%	279 43%	1 ~ 33%	7 ~ 78%	10 71%	3 38%	19 58%	1 100%	~	~	~	1 50%	~	1 20%	20 61%	6 43%	15 65%	6 46%	14 58%	
#ALWAYS + USUALLY (NET)	31 82%	456 70%	1 50%	2 67%	1 50%	8 89%	13 93%	6 75%	29 88%	1 100%	~	~	1 50%	3 60%	28 85%	8 57%	22 96%	11 85%	19 79%	
TOP BOX SCORE	21 55%	279 43%	1 ~ 33%	7 ~ 78%	10 71%	3 38%	19 58%	1 100%	~	~	~	1 50%	~	1 20%	20 61%	6 43%	15 65%	6 46%	14 58%	
NOT ANSWERED	1	24				1	1								1			1		
VALID CASES	38	651	2	3	2	9	14	8	33	1				5	33	14	23	13	24	
NUMBER OF RESPONDENTS	39	675	2	3	2	9	15	8	34	1				5	34	14	23	14	24	
	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?

	WVCH TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q35C YES	42 15%	760 15%	2 6%~	1 ~	11 3%~	18 16%	9 24%*	36 17%	~	~	~	~	2 13%~	1 7%~	7 10%	35 17%*	17 9%*	24 23%*	17 13%	24 16%	
NO	244 85%	4319 85%	29 94%~	43 100%~	35 97%~	57 84%	16 76%*	182 83%	3 100%~	4 100%~	1 100%~	1 100%~	13 87%~	14 93%~	62 90%	169 83%*	162 91%*	79 77%*	110 87%	129 84%	
NOT ANSWERED	18	373	1	1	1	3	1	5					1	1	6	3	4	3	4		
VALID CASES	286	5080	31	43	36	68	76	25	218	3	4	1	1	15	15	69	204	179	103	127	153
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%



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

	WVCH TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35D NEVER	5 13%	165 23%	~	~	~	30%~	6%~	11%~	15%~	~	~	~	~	~	~	5 15%~	3 19%~	2 9%~	4 25%~	1 5%~	
SOMETIMES	9 23%	141 19%~	50%~	~	~	40%~	24%~	~	21%~	~	~	~	~	1 100%~	1 17%~	8 24%~	4 25%~	5 23%~	3 19%~	5 23%~	
USUALLY	12 31%	179 25%~	50%~	1 100%~	1 10%~	5 29%~	4 44%~	4 29%~	10 29%~	~	~	~	1 100%~	~	4 67%~	8 24%~	3 19%~	9 41%~	5 31%~	7 32%~	
ALWAYS	13 33%	239 33%~	~	~	~	20%~	41%~	44%~	35%~	~	~	~	~	~	1 17%~	12 36%~	6 37%~	6 27%~	4 25%~	9 41%~	
#ALWAYS + USUALLY (NET)	25 64%	418 58%~	50%~	1 100%~	3 30%~	12 71%~	8 89%~	8 65%~	22 65%~	~	~	~	1 100%~	~	5 83%~	20 61%~	9 56%~	15 68%~	9 56%~	16 73%~	
TOP BOX SCORE	13 33%	239 33%~	~	~	~	20%~	41%~	44%~	35%~	~	~	~	~	~	1 17%~	12 36%~	6 37%~	6 27%~	4 25%~	9 41%~	
NOT ANSWERED	3	20				1	1		2						1	2	1	2	1	2	
VALID CASES	39	725	2		1	10	17	9	34					1	1	6	33	16	22	16	22
NUMBER OF RESPONDENTS	42	745	2		1	11	18	9	36					2	1	7	35	17	24	17	24
	100%	100%	100%		100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35C = YES]

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q35E																					
YES	151 53%	2872 56%	11 35%~	17 40%~	20 54%~	40 61%	45 58%	16 62%~	123 56%*	2 67%~	1 25%~	1 100%~	6 ~ 43%~	7 47%~	25 36%*	122 60%*	78 44%*	73 70%*	60 47%	88 58%	
NO	135 47%	2261 44%	20 65%~	26 60%~	17 46%~	26 39%	32 42%	10 38%~	96 44%*	1 33%~	3 75%~	1 ~100%~	8 57%~	8 53%~	44 64%*	83 40%*	101 56%*	31 30%*	68 53%	65 42%	
NOT ANSWERED	18	320	1	1		2	2		4				1	1	1	5	3	3	2	4	
VALID CASES	286	5133	31	43	37	66	77	26	219	3	4	1	1	14	15	69	205	179	104	128	153
NUMBER OF RESPONDENTS	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35F NO EFFORT AT ALL	5 3%	94 3%	~	~	~	~	7%~	7%~	3%~	~	~	~	~	~	14%~	4%~	3%~	4%	3%	4%	2%
A LITTLE EFFORT WAS MADE	13 9%	213 8%	18%~	6%~	16%~	6%~	11%~	~	8%~	~	~	~	~	17%~	~	22%~	7%~	5%	13%	5%	12%
SOME EFFORT WAS MADE	28 19%	662 24%	~	29%~	16%~	22%~	18%~	27%~	18%~	~100%~	~	~	~	83%~	~	26%~	19%~	16%	23%	16%	21%
A LOT OF EFFORT WAS MADE	99 68%	1793 65%	82%~	65%~	68%~	72%~	64%~	67%~	71%~	100%~	~100%~	~	~	86%~	~	48%~	72%~	74%	62%	75%	65%
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	127 88%	2455 89%	82%~	94%~	84%~	94%~	82%~	93%~	89%~	100%~	100%~	100%~	~	83%~	86%~	74%~	91%~	91%	85%	91%	86%
TOP BOX SCORE	99 68%	1793 65%	82%~	65%~	68%~	72%~	64%~	67%~	71%~	100%~	~100%~	~	~	86%~	~	48%~	72%~	74%	62%	75%	65%
NOT ANSWERED	6	95			1	4		1	5							2	4	4	2	3	3
VALID CASES	145	2763	11	17	19	36	45	15	118	2	1	1		6	7	23	118	74	71	57	85
NUMBER OF RESPONDENTS	151 100%	2858 100%	11 100%	17 100%	20 100%	40 100%	45 100%	16 100%	123 100%	2 100%	1 100%	1 100%		6 100%	7 100%	25 100%	122 100%	78 100%	73 100%	60 100%	88 100%

[ASKED IF Q35E = YES]

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35G NO EFFORT AT ALL	5 3%	135 5%	~	~	5%~	~	7%~	~	3%~	~	~	~	~	17%~	~	4%~	3%~	1%~	6%~	3%~	2%~
A LITTLE EFFORT WAS MADE	17 12%	226 8%	18%~	18%~	5%~	3%~	16%~	20%~	11%~	~	~	~	~	17%~	14%~	26%~	9%~	11%~	13%~	9%~	14%~
SOME EFFORT WAS MADE	30 21%	652 24%	~	12%~	37%~	27%~	18%~	20%~	18%~	~100%~	~	~	~	67%~	14%~	26%~	20%~	19%~	23%~	24%~	18%~
A LOT OF EFFORT WAS MADE	94 64%	1759 63%	82%~	71%~	53%~	70%~	60%~	60%~	68%~	100%~	~100%~	~	~	71%~	43%~	68%~	69%~	59%~	64%~	66%~	
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	124 85%	2411 87%	82%~	82%~	89%~	97%~	78%~	80%~	87%~	100%~	100%~	100%~	~	67%~	86%~	70%~	88%~	88%~	82%~	88%~	84%~
TOP BOX SCORE	94 64%	1759 63%	82%~	71%~	53%~	70%~	60%~	60%~	68%~	100%~	~100%~	~	~	71%~	43%~	68%~	69%~	59%~	64%~	66%~	
NOT ANSWERED	5	87			1	3		1	4						2	3	3	2	2	3	
VALID CASES	146	2771	11	17	19	37	45	15	119	2	1	1		6	7	23	119	75	71	58	85
NUMBER OF RESPONDENTS	151 100%	2858 100%	11 100%	17 100%	20 100%	40 100%	45 100%	16 100%	123 100%	2 100%	1 100%	1 100%		6 100%	7 100%	25 100%	122 100%	78 100%	73 100%	60 100%	88 100%

[ASKED IF Q35E = YES]

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35H																				
NO EFFORT AT ALL	10 7%	191 7%	1 9%~	1 ~	1 5%~	5 3%~	1 11%~	7 6%~	~	~	~	~	1 17%~	1 14%~	3 13%~	6 5%~	5 7%	5 7%	5 9%	4 5%
A LITTLE EFFORT WAS MADE	17 12%	242 9%	2 ~	4 12%~	6 21%~	3 16%~	2 7%~	13 11%~	~	~	~	~	2 33%~	~	5 22%~	12 10%~	6 8%	11 16%	3 5%*	14 16%*
SOME EFFORT WAS MADE	34 23%	781 28%	1 9%~	6 37%~	3 16%~	9 24%~	12 27%~	3 20%~	27 23%~	1 50%~	1 100%~	~	2 33%~	1 14%~	4 17%~	29 25%~	19 25%	15 21%	15 26%	18 21%
A LOT OF EFFORT WAS MADE	84 58%	1558 56%	9 82%~	8 50%~	11 58%~	22 58%~	24 55%~	9 60%~	71 60%~	1 50%~	1 100%~	~	1 17%~	5 71%~	11 48%~	71 60%~	45 60%	39 56%	34 60%	49 58%
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	118 81%	2339 84%	10 91%~	14 88%~	14 74%~	31 82%~	36 82%~	12 80%~	98 83%~	2 100%~	1 100%~	1 100%~	3 50%~	6 86%~	15 65%~	100 85%~	64 85%	54 77%	49 86%	67 79%
TOP BOX SCORE	84 58%	1558 56%	9 82%~	8 50%~	11 58%~	22 58%~	24 55%~	9 60%~	71 60%~	1 50%~	1 100%~	~	1 17%~	5 71%~	11 48%~	71 60%~	45 60%	39 56%	34 60%	49 58%
NOT ANSWERED	6	85	1	1	2	1	1	5							2	4	3	3	3	3
VALID CASES	145	2773	11	16	19	38	44	15	118	2	1	1	6	7	23	118	75	70	57	85
NUMBER OF RESPONDENTS	151 100%	2858 100%	11 100%	17 100%	20 100%	40 100%	45 100%	16 100%	123 100%	2 100%	1 100%	1 100%	6 100%	7 100%	25 100%	122 100%	78 100%	73 100%	60 100%	88 100%

[ASKED IF Q35E = YES]

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
Q35I YES	98 35%	1866 37%	6 19%~	14 33%~	8 22%~	31 46%*	26 35%	11 42%~	74 34%	2 67%~	1 ~100%~	5 ~ 33%~	7 47%~	20 29%	75 37%	59 34%	39 37%	43 34%	53 34%		
NO	186 65%	3186 63%	26 81%~	28 67%~	28 78%~	36 54%*	49 65%	15 58%~	143 66%	1 33%~	4 100%~	1 ~100%~	10 67%~	8 53%~	48 71%	130 63%	117 66%	66 63%	82 66%	101 66%	
NOT ANSWERED	20	400		2	1	1	4		6				1	2	5	6	2	5	3		
VALID CASES	284	5053	32	42	36	67	75	26	217	3	4	1	1	15	15	68	205	176	105	125	154
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
Q35J #YES	83 86%	1483 85%	6 100%~	10 71%~	5 63%~	30 97%~	20 80%~	10 91%~	63 86%~	2 100%~	1 ~100%~	4 ~ 80%~	6 86%~	16 80%~	64 86%~	49 83%~	34 89%~	36 84%~	45 87%~	
NO	14 14%	254 15%		4 ~ 29%~	3 38%~	1 3%~	5 20%~	1 9%~	10 14%~				1 ~ 20%~	1 14%~	4 20%~	10 14%~	10 17%~	4 11%~	7 16%~	7 13%~
NOT ANSWERED	1	58					1		1						1		1		1	
VALID CASES	97	1737	6	14	8	31	25	11	73	2	1	5	7	20	74	59	38	43	52	
NUMBER OF RESPONDENTS	98	1795	6	14	8	31	26	11	74	2	1	5	7	20	75	59	39	43	53	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q35I = YES]

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE	
Q35K #YES	82 85%	1402 81%	6 100%~	11 79%~	6 75%~	27 87%~	20 83%~	10 91%~	60 83%~	2 100%~	1 ~100%~	4 ~ 80%~	6 86%~	16 84%~	63 85%~	51 86%~	31 84%~	36 86%~	44 85%~	
NO	14 15%	326 19%		3 ~ 21%~	2 25%~	4 13%~	4 17%~	1 9%~	12 17%~			1 ~ 20%~	1 14%~	3 16%~	11 15%~	8 14%~	6 16%~	6 14%~	8 15%~	
NOT ANSWERED	2	67					2		2					1	1		2	1	1	
VALID CASES	96	1728	6	14	8	31	24	11	72	2	1	5	7	19	74	59	37	42	52	
NUMBER OF RESPONDENTS	98	1795	6	14	8	31	26	11	74	2	1	5	7	20	75	59	39	43	53	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q35I = YES]



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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35L NEVER	38 14%	654 13%	2 7%	6 15%	4 11%	13 19%	10 14%	2 8%	24 11%	2 ~	1 50%	3 ~	3 ~	11 17%	25 12%	26 15%	12 12%	22 18%	15 10%*		
SOMETIMES	27 10%	567 11%	4 13%	3 7%	4 11%	6 9%	7 10%	3 12%	23 11%	~	~	~	2 ~	1 6%	8 12%	17 8%	15 9%	12 12%	12 10%	14 9%	
USUALLY	61 22%	1126 23%	7 23%	11 28%	7 19%	11 16%	17 24%	7 28%	47 22%	1 33%	1 25%	~	2 ~	4 25%	14 22%	45 22%	33 19%	27 26%	28 23%	33 22%	
ALWAYS	149 54%	2613 53%	17 57%	20 50%	21 58%	37 55%	38 53%	13 52%	117 55%	2 67%	1 25%	1 100%	8 ~	8 50%	32 49%	114 57%	97 57%	52 50%	59 49%	88 59%	
#ALWAYS + USUALLY (NET)	210 76%	3739 75%	24 80%	31 78%	28 78%	48 72%	55 76%	20 80%	164 78%	3 100%	2 50%	1 100%	10 ~	12 75%	46 71%	159 79%	130 76%	79 77%	87 72%	121 81%	
TOP BOX SCORE	149 54%	2613 53%	17 57%	20 50%	21 58%	37 55%	38 53%	13 52%	117 55%	2 67%	1 25%	1 100%	8 ~	8 50%	32 49%	114 57%	97 57%	52 50%	59 49%	88 59%	
NOT ANSWERED	29	493	2	4	1	1	7	1	12					5	9	11	4	9	7		
VALID CASES	275	4960	30	40	36	67	72	25	211	3	4	1	1	15	16	65	201	171	103	121	150
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE							RACE							ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q35M ALWAYS	23 8%	387 8%	2 6%~	4 9%~	3 9%~	6 9%	7 10%	1 4%~	18 8%	1 33%~	~	~	~	~	~	3 19%~	5 7%	18 9%	16 9%	7 7%	9 7%	14 9%
USUALLY	12 4%	258 5%	1 3%~	4 9%~	2 6%~	3 4%	~ 4%~	1 4%~	7 3%	~ 25%~	~	~	~	~	2 13%~	2 12%~	5 7%	7 3%	8 5%	4 4%	4 3%	8 5%
SOMETIMES	48 17%	881 18%	6 19%~	3 7%~	6 17%~	14 21%	12 17%	7 27%~	42 20%*	~ 25%~	1 100%~	1 ~	~	~	1 7%~	1 6%~	10 14%	34 17%	23 13%*	25 24%*	24 20%	24 16%
NEVER	199 71%	3452 69%	22 71%~	33 75%~	24 69%~	45 66%	53 74%	17 65%~	147 69%	2 67%~	2 50%~	~	1 100%~	12 80%~	10 63%~	49 71%	144 71%	129 73%	68 65%	86 70%	108 70%	
#NEVER + SOMETIMES (NET)	247 88%	4333 87%	28 90%~	36 82%~	30 86%~	59 87%	65 90%	24 92%~	189 88%	2 67%~	3 75%~	1 100%~	1 100%~	13 87%~	11 69%~	59 86%	178 88%	152 86%	93 89%	110 89%	132 86%	
TOP BOX SCORE	199 71%	3452 69%	22 71%~	33 75%~	24 69%~	45 66%	53 74%	17 65%~	147 69%	2 67%~	2 50%~	~	1 100%~	12 80%~	10 63%~	49 71%	144 71%	129 73%	68 65%	86 70%	108 70%	
NOT ANSWERED	22	476	1		2		7		9							1	7	6	3	7	3	
VALID CASES	282	4977	31	44	35	68	72	26	214	3	4	1	1	15	16	69	203	176	104	123	154	
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%	

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35N ALWAYS	8 3%	113 2%	1 3%~	1 2%~	1 3%~	1 1%	3 4%	7 3%	~	~	~	~	~	1 7%~	~	1 1%	7 3%	6 3%	2 2%	2 2%	6 4%
USUALLY	1 0.4%	124 2%*	~	~	~	1 1%~	~	~	~	~	~	~	~	~	~	~	1 ~0.5%	1 ~0.6%	~	~	1 ~0.6%
SOMETIMES	46 16%	728 15%	4 13%~	3 7%~	6 17%~	10 15%	14 19%	9 35%~	39 18%	~	~	1 ~100%~	~	1 7%~	4 25%~	6 9%*	38 19%*	21 12%*	25 24%*	19 15%	26 17%
NEVER	229 81%	4037 81%	26 84%~	40 91%~	28 80%~	56 82%	56 77%	17 65%~	168 78%*100%~	3 100%~	4 100%~	1 ~100%~	1 ~100%~	13 87%~	12 75%~	62 90%*	157 77%*	149 84%	77 74%*	103 83%	121 79%
#NEVER + SOMETIMES (NET)	275 97%	4765 95%	30 97%~	43 98%~	34 97%~	66 97%	70 96%	26 100%~	207 96%	3 100%~	4 100%~	1 ~100%~	1 ~100%~	14 93%~	16 100%~	68 99%	195 96%	170 96%	102 98%	122 98%	147 95%
TOP BOX SCORE	229 81%	4037 81%	26 84%~	40 91%~	28 80%~	56 82%	56 77%	17 65%~	168 78%*100%~	3 100%~	4 100%~	1 ~100%~	1 ~100%~	13 87%~	12 75%~	62 90%*	157 77%*	149 84%	77 74%*	103 83%	121 79%
NOT ANSWERED	20	451	1		2		6		8							1	7	5	3	6	3
VALID CASES	284	5002	31	44	35	68	73	26	215	3	4	1	1	15	16	69	203	177	104	124	154
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE MALE				
Q350 ALWAYS	5 2%	98 2%	1 ~	2%~	1 ~	1%~	3 4%	4 2%	~	~	~	~	~	1 7%~	1 ~	4 2%	3 2%	2 2%	1 0.8%	4 3%	
USUALLY	6 2%	112 2%	1 3%~	~	2 6%~	~	3 4%	6 3%~	~	~	~	~	~	~	~	6 3%*	3 2%	3 3%	2 2%	4 3%	
SOMETIMES	23 8%	493 10%	2 7%~	3 7%~	4 11%~	6 9%	6 8%	2 8%~	19 9%	1 ~	25%~	~	~	~	2 ~	19 3%*	13 7%	10 10%	8 6%	14 9%	
NEVER	247 88%	4278 86%	27 90%~	39 91%~	30 83%~	61 90%	60 83%	24 92%~	185 86%	3 100%~	3 75%~	1 100%~	1 100%~	14 93%~	14 88%~	65 96%*	173 86%*	155 89%	90 86%	113 91%	130 86%
#NEVER + SOMETIMES (NET)	270 96%	4771 96%	29 97%~	42 98%~	34 94%~	67 99%	66 92%	26 100%~	204 95%	3 100%~	4 100%~	1 100%~	1 100%~	14 93%~	16 100%~	67 99%	192 95%	168 97%	100 95%	121 98%	144 95%
TOP BOX SCORE	247 88%	4278 86%	27 90%~	39 91%~	30 83%~	61 90%	60 83%	24 92%~	185 86%	3 100%~	3 75%~	1 100%~	1 100%~	14 93%~	14 88%~	65 96%*	173 86%*	155 89%	90 86%	113 91%	130 86%
NOT ANSWERED	23	472	2	1	1		7		9						2	8	8	2	6	5	
VALID CASES	281	4981	30	43	36	68	72	26	214	3	4	1	1	15	16	68	202	174	105	124	152
NUMBER OF RESPONDENTS	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q35P #YES DEFINITELY	190 69%	3312 67%	20 65%~	32 74%~	24 69%~	48 71%	50 72%	13 54%~	146 70%	3 100%	4 100%	1 100%	7 ~	12 47%~	40 58%*	144 73%*	127 74%*	63 62%*	83 69%	105 70%	
YES SOMEWHAT	61 22%	1213 25%	10 32%~	10 23%~	7 20%~	12 18%	13 19%	8 33%~	50 24%	~	~	~	4 ~	3 27%~	15 22%	43 22%	32 19%	28 27%	29 24%	31 21%	
NO	23 8%	418 8%	1 3%~	1 2%~	4 11%~	8 12%	6 9%	3 12%~	12 6%*	~	~	1 ~100%	4 27%~	1 6%~	14 20%*	9 5%*	12 7%	11 11%	9 7%	14 9%	
NOT ANSWERED	30	511	1	1	2		10	2	15						1	14	11	5	9	7	
VALID CASES	274	4942	31	43	35	68	69	24	208	3	4	1	1	15	16	69	196	171	102	121	150
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE			
Q35Q YES	146 52%	2643 53%	17 55%~	28 65%~	23 62%~	28 42%	34 47%	13 50%~	97 45%*	3 100%~	4 100%~	1 100%~	1 100%~	11 73%~	11 69%~	43 62%*	94 46%*	91 51%	53 51%	53 42%*	90 59%*
NO	137 48%	2382 47%	14 45%~	15 35%~	14 38%~	39 58%	39 53%	13 50%~	118 55%*	~	~	~	~	4 27%~	5 31%~	26 38%*	109 54%*	87 49%	50 49%	73 58%*	62 41%*
NOT ANSWERED	21	428	1	1		1	6		8							1	7	4	4	4	5
VALID CASES	283	5025	31	43	37	67	73	26	215	3	4	1	1	15	16	69	203	178	103	126	152
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS-	AMER HAW/ IND/ ALSK	MUL-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE MALE					
Q35R NEVER	50 34%	799 36%	8 42%~	3 14%~	7 33%~	18 44%~	9 35%~	5 36%~	40 38%~	1 ~ 33%~	1 ~ 20%~	3 25%~	9 23%~	40 40%~	26 29%	24 44%	20 35%	30 34%			
SOMETIMES	26 18%	439 20%	2 11%~	7 32%~	4 19%~	8 20%~	4 15%~	~ 27%~	18 17%~	~ ~	1 ~100%~	2 ~ 17%~	8 20%~	17 17%~	18 20%	8 15%	10 18%	15 17%			
USUALLY	31 21%	421 19%	2 11%~	7 32%~	5 24%~	6 15%~	7 27%~	3 21%~	25 24%~	1 50%~	~ ~	4 ~ 20%~	7 33%~	23 18%~	22 23%~	9 24%	12 21%	19 22%			
ALWAYS	38 26%	564 25%	7 37%~	5 23%~	5 24%~	9 22%~	6 23%~	6 43%~	22 21%~	1 50%~	2 67%~	1 100%~	3 ~ 60%~	3 25%~	16 40%~	21 21%~	25 27%	13 24%	15 26%	23 26%	
#ALWAYS + USUALLY (NET)	69 48%	985 44%	9 47%~	12 55%~	10 48%~	15 37%~	13 50%~	9 64%~	47 45%~	2 100%~	2 67%~	1 100%~	4 ~ 80%~	7 58%~	23 58%~	44 44%~	47 52%	22 41%	27 47%	42 48%	
TOP BOX SCORE	38 26%	564 25%	7 37%~	5 23%~	5 24%~	9 22%~	6 23%~	6 43%~	22 21%~	1 50%~	2 67%~	1 100%~	3 ~ 60%~	3 25%~	16 40%~	21 21%~	25 27%	13 24%	15 26%	23 26%	
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	133	2730	13	19	16	24	47	12	107	1	1	9	3	27	100	84	48	67	64		
NOT ANSWERED	26	500	3			3	6		11			1	1	3	9	7	5	6	6		
VALID CASES	145	2223	19	22	21	41	26	14	105	2	3	1	1	5	12	40	101	57	87		
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%

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

	AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
	WVCH TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV PAC ILND	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE	
Q36 EXCELLENT	27 9%	477 9%	3 9%	9 20%	2 5%	8 12%	2 3%*	2 8%	18 8%	~	1 ~100%	2 ~	3 13%	19 19%	11 16%	14 7%*	27 15%	~	17 13%	9 6%*	
VERY GOOD	67 23%	1176 23%	15 47%	13 30%	8 22%	12 18%	5 17%	20 20%	45 20%	1 33%	1 25%	~	3 ~	9 20%	17 24%	48 23%	67 37%	~	31 24%	35 22%	
GOOD	88 30%	1761 35%	10 31%	15 34%	14 38%	20 29%	5 29%	20 20%	71 32%	1 33%	1 25%	~	3 ~	2 20%	18 26%	68 33%	88 48%*	~	42 33%	46 29%	
FAIR	88 30%	1244 25%*	4 12%	7 16%	12 32%	25 37%	9 37%	36 36%	74 33%*	1 33%	1 25%	~	6 ~	1 40%	21 30%	63 30%	88 ~	82%*	32 25%	54 35%	
POOR	19 7%	405 8%	~	~	3 3%	4 4%	11 14%*	16 16%	13 6%	1 ~	1 25%	1 ~100%	1 7%	1 6%	3 4%	15 7%	19 ~	18%*	7 5%	12 8%	
#EXCELLENT + VERY GOOD + GOOD (NET)	182 63%	3415 67%	28 88%	37 84%	24 65%	40 59%	38 49%*	12 48%	134 61%	2 67%	2 50%	1 ~100%	8 ~	14 88%	46 66%	130 62%	182 100%	~	90 70%*	90 58%*	
NOT ANSWERED	15	389					1	1	2						2				1	1	
VALID CASES	289	5064	32	44	37	68	78	25	221	3	4	1	1	15	16	70	208	182	107	129	156
NUMBER OF RESPONDENTS	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
	100%	100%	100%	100%	100%	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?

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q37 EXCELLENT	51 18%	895 18%	5 16%~	9 20%~	3 8%~	19 28%*	8 10%*	5 19%~	33 15%	1 33%~	1 25%~	1 100%~	2 ~	4 13%~	4 25%~	17 24%	31 15%	42 23%*	9 8%*	26 20%	23 15%	
VERY GOOD	64 22%	1258 25%	8 25%~	13 30%~	12 32%~	10 15%	19 25%	2 8%~	50 23%	2 ~	2 50%~	~	3 ~	4 20%~	4 25%~	13 19%	49 23%	54 30%*	9 8%*	28 22%	36 23%	
GOOD	99 34%	1533 30%	15 47%~	14 32%~	14 38%~	18 26%	26 34%	11 42%~	82 37%	~	~	~	5 ~	4 33%~	4 25%~	28 40%	70 33%	60 33%	39 36%	44 34%	55 35%	
FAIR	58 20%	1027 20%	4 12%~	7 16%~	7 19%~	15 22%	18 23%	5 19%~	40 18%	2 67%~	1 25%~	1 ~	4 ~	4 100%~	4 27%~	4 25%~	12 17%	43 21%	19 10%*	39 36%*	25 20%	31 20%
POOR	17 6%	363 7%	~	1 2%~	1 3%~	6 9%	6 8%	3 12%~	16 7%*	~	~	~	1 ~	1 7%~	~	~	16 8%*	6 3%*	11 10%*	5 4%	12 8%	
#EXCELLENT + VERY GOOD + GOOD (NET)	214 74%	3685 73%	28 88%~	36 82%~	29 78%~	47 69%	53 69%	18 69%~	165 75%	1 33%~	3 75%~	1 100%~	1 ~	10 ~	12 67%~	12 75%~	58 83%*	150 72%	156 86%*	57 53%*	98 77%	114 73%
NOT ANSWERED	15	378					2		2							1		1		2		
VALID CASES	289	5075	32	44	37	68	77	26	221	3	4	1	1	15	16	70	209	181	107	128	157	
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%	

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q38 #YES	102 36%	2160 44%*	7 26%~	12 28%~	12 32%~	23 35%	32 42%	14 54%~	76 36%	1 33%~	3 75%~	~	~	8 57%~	5 31%~	28 42%	70 34%	63 36%	39 38%	40 32%	61 40%
NO	179 64%	2803 56%*	20 74%~	31 72%~	25 68%~	43 65%	45 58%	12 46%~	138 64%	2 67%~	1 25%~	1 100%~	1 100%~	6 43%~	11 69%~	38 58%	135 66%	114 64%	64 62%	85 68%	91 60%
DON'T KNOW	6	112	5			1			6						2	4	3	3	3	3	
NOT ANSWERED	17	379		1		1	2		3					1		2	1	2	1	2	2
VALID CASES	281	4963	27	43	37	66	77	26	214	3	4	1	1	14	16	66	205	177	103	125	152
NUMBER OF RESPONDENTS	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q39 EVERY DAY	65 23%	1063 21%	1 3%	8 18%	8 22%	20 30%	22 29%	4 15%	55 25%	1 33%	~	~	~100%	1 7%	1 31%	5 7%*	59 29%*	37 21%	28 27%	36 28%	28 18%*
SOME DAYS	23 8%	463 9%	3 9%	3 7%	3 8%	5 7%	6 8%	2 8%	16 7%	1 33%	~	~	~	1 7%	3 19%	6 9%	16 8%	14 8%	9 9%	15 12%*	7 5%*
NOT AT ALL	198 69%	3502 70%	28 88%	33 75%	26 70%	42 63%	47 63%	20 77%	148 68%	1 33%	4 100%	1 100%	~	12 86%	8 50%	57 84%*	132 64%*	129 72%	68 65%	77 60%*	119 77%*
DON'T KNOW		42																			
NOT ANSWERED	18	383				1	4		4					1		2	3	2	2	2	3
VALID CASES	286	5028	32	44	37	67	75	26	219	3	4	1	1	14	16	68	207	180	105	128	154
NUMBER OF RESPONDENTS	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE MALE			
Q40 NEVER	25 29%	435 26%	2 50%~	5 45%~	4 36%~	7 29%~	5 18%~	2 33%~	18 26%~	1 50%~	~	~	~	1 50%~	3 38%~	3 27%~	22 30%~	20 41%~	5 14%~	18 36%~	7 21%~
SOMETIMES	15 18%	355 21%	~	1 9%~	4 36%~	3 13%~	6 21%~	1 17%~	15 22%~	~	~	~	~	~	~	2 18%~	13 18%~	8 16%~	7 19%~	9 18%~	6 18%~
USUALLY	19 22%	280 17%	1 25%~	2 18%~	2 18%~	4 17%~	7 25%~	2 33%~	13 19%~	~	~	~	1 100%~	1 50%~	3 38%~	2 18%~	16 22%~	10 20%~	9 25%~	11 22%~	7 21%~
ALWAYS	26 31%	589 35%	1 25%~	3 27%~	1 9%~	10 42%~	10 36%~	1 17%~	23 33%~	1 50%~	~	~	~	~	2 25%~	4 36%~	22 30%~	11 22%~	15 42%~	12 24%~	14 41%~
#ALWAYS + USUALLY (NET)	45 53%	869 52%	2 50%~	5 45%~	3 27%~	14 58%~	17 61%~	3 50%~	36 52%~	1 50%~	~	~	1 100%~	1 50%~	5 63%~	6 55%~	38 52%~	21 43%~	24 67%~	23 46%~	21 62%~
TOP BOX SCORE	26 31%	589 35%	1 25%~	3 27%~	1 9%~	10 42%~	10 36%~	1 17%~	23 33%~	1 50%~	~	~	~	~	2 25%~	4 36%~	22 30%~	11 22%~	15 42%~	12 24%~	14 41%~
NOT ANSWERED	3	31				1			2							2	2	1	1	1	1
VALID CASES	85	1659	4	11	11	24	28	6	69	2			1	2	8	11	73	49	36	50	34
NUMBER OF RESPONDENTS	88	1690	4	11	11	25	28	6	71	2			1	2	8	11	75	51	37	51	35
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR	MALE	FE- MALE	
Q41 NEVER	45 53%	750 46%	3 75%~	6 55%~	8 73%~	8 33%~	15 56%~	3 50%~	33 49%~	2 100%~			1 ~100%~	2 ~100%~	3 38%~	6 55%~	37 51%~	30 60%~	15 43%~	27 54%~	16 48%~
SOMETIMES	19 22%	380 23%	1 25%~	1 9%~	2 18%~	9 38%~	5 19%~	1 17%~	18 26%~						1 13%~	1 9%~	18 25%~	10 20%~	9 26%~	12 24%~	7 21%~
USUALLY	9 11%	243 15%		3 ~27%~	1 9%~	1 4%~	3 11%~	1 17%~	8 12%~						1 13%~	2 18%~	7 10%~	5 10%~	4 11%~	6 12%~	3 9%~
ALWAYS	12 14%	267 16%		1 ~9%~		6 ~25%~	4 15%~	1 17%~	9 13%~						3 38%~	2 18%~	10 14%~	5 10%~	7 20%~	5 10%~	7 21%~
#ALWAYS + USUALLY (NET)	21 25%	510 31%		4 ~36%~	1 9%~	7 29%~	7 26%~	2 33%~	17 25%~						4 50%~	4 36%~	17 24%~	10 20%~	11 31%~	11 22%~	10 30%~
TOP BOX SCORE	12 14%	267 16%		1 ~9%~		6 ~25%~	4 15%~	1 17%~	9 13%~						3 38%~	2 18%~	10 14%~	5 10%~	7 20%~	5 10%~	7 21%~
NOT ANSWERED	3	51				1	1		3								3	1	2	1	2
VALID CASES	85	1639	4	11	11	24	27	6	68	2			1	2	8	11	72	50	35	50	33
NUMBER OF RESPONDENTS	88	1690	4	11	11	25	28	6	71	2			1	2	8	11	75	51	37	51	35
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE	
Q42 NEVER	45 54%	864 53%	4 100%	3 27%	9 82%	10 42%	15 56%	4 67%	36 53%	1 50%			1 100%	2 100%	4 50%	8 73%	37 51%	32 65%	13 38%	30 60%	15 45%
SOMETIMES	16 19%	340 21%		3 27%		6 25%	6 22%	1 17%	13 19%	1 50%					1 13%	1 9%	15 21%	8 16%	8 24%	10 20%	6 18%
USUALLY	7 8%	207 13%		2 18%	1 9%	2 8%	1 4%	1 17%	7 10%							1 9%	6 8%	3 6%	4 12%	3 6%	4 12%
ALWAYS	15 18%	215 13%		3 27%	1 9%	6 25%	5 19%		12 18%						3 38%	1 9%	14 19%	6 12%	9 26%	7 14%	8 24%
#ALWAYS + USUALLY (NET)	22 27%	422 26%		5 45%	2 18%	8 33%	6 22%	1 17%	19 28%						3 38%	2 18%	20 28%	9 18%	13 38%	10 20%	12 36%
TOP BOX SCORE	15 18%	215 13%		3 27%	1 9%	6 25%	5 19%		12 18%						3 38%	1 9%	14 19%	6 12%	9 26%	7 14%	8 24%
NOT ANSWERED	5	64				1	1		3								3	2	3	1	2
VALID CASES	83	1626	4	11	11	24	27	6	68	2			1	2	8	11	72	49	34	50	33
NUMBER OF RESPONDENTS	88	1690	4	11	11	25	28	6	71	2			1	2	8	11	75	51	37	51	35
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

Q43 DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q43																					
YES	69 25%	1180 23%	3 10%~	4 ~	15 11%~	31 23%	14 41%*	54%~	59 27%*	1 33%~	2 67%~	~	~	2 13%~	1 6%~	9 13%*	59 29%*	28 16%*	41 39%*	27 22%	41 27%
NO	211 75%	3848 77%	28 90%~	42 100%~	33 89%~	51 77%	44 59%*	12 46%~	156 73%*	2 67%~	1 33%~	1 100%~	1 100%~	13 87%~	15 94%~	60 87%*	144 71%*	147 84%*	63 61%*	97 78%	113 73%
DON'T KNOW	6	55	1	2	1	2			5	1					1	5	4	2	4	2	
NOT ANSWERED	18	370			1	2			3						2	3	1	2	1		
VALID CASES	280	5028	31	42	37	66	75	26	215	3	3	1	1	15	16	69	203	175	104	124	154
NUMBER OF RESPONDENTS	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q44																					
YES	24 9%	460 10%	3 ~7%	2 6%	7 12%	9 14%	3 14%	19 10%	~	~	~	~	1 8%	2 12%	4 6%	20 11%	9 5%*	15 17%*	9 8%	15 11%	
NO	233 91%	4154 90%	30 100%	39 93%	32 94%	53 88%	19 86%	176 90%	2 100%	3 100%	1 100%	1 100%	12 92%	14 88%	61 94%	164 89%	160 95%*	73 83%*	107 92%	123 89%	
DON'T KNOW	29	459	1	2	3	8	10	4	25	1	1		1		4	24	11	17	11	18	
NOT ANSWERED	18	380	1				3		3				1		1	2	2	2	3	1	
VALID CASES	257	4614	30	42	34	60	66	22	195	2	3	1	1	13	16	65	184	169	88	116	138
NUMBER OF RESPONDENTS	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%



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

	WVCH TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q45 YES	94 33%	1742 35%	1 3%	8 18%	5 14%	24 36%	38 49%*	16 62%~	75 34%	1 33%~	1 25%~	1 100%~		3 ~ 20%~	5 31%~	16 23%*	76 37%*	48 27%*	46 44%*	39 31%	54 35%
NO	192 67%	3293 65%	31 97%~	36 82%~	31 86%~	43 64%	39 51%*	10 38%~	144 66%	2 67%~	3 75%~		1 ~100%~	12 80%~	11 69%~	54 77%*	131 63%*	132 73%*	59 56%*	88 69%	102 65%
NOT ANSWERED	18	417			1	1	2		4							3	2	2	3	1	
VALID CASES	286	5036	32	44	36	67	77	26	219	3	4	1	1	15	16	70	207	180	105	127	156
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q46.1																					
YES	71 23%	1316 24%	1 3%~	7 16%~	5 14%~	22 32%	28 35%*	7 27%~	50 22%	1 33%~	2 50%~	1 100%~		5 ~ 33%~	5 31%~	17 24%	51 24%	34 19%*	37 35%*	31 24%	40 25%
NO	233 77%	4137 76%	31 97%~	37 84%~	32 86%~	46 68%	51 65%*	19 73%~	173 78%	2 67%~	2 50%~		1 ~100%~	10 67%~	11 69%~	53 76%	159 76%	148 81%*	70 65%*	99 76%	117 75%
VALID CASES	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLACK OR AFR-	ASIAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHER	MULTI	HIS-IC	NOT HIS-IC	EX & VERY GOOD &	FAIR & POOR	MALE	FEMALE	
Q46.2	WVCH																				
	OHP	18	25	35	45	55	65														
	TOT	24	34	44	54	64	OVER														
	ADLT																				
YES	102	4	6	9	28	44	10	80	2	3	1		4	8	14	83	45	56	47	54	
	34%	12%~	14%~	24%~	41%	56%*	38%~	36%	67%~	75%~	100%~		~ 27%~	50%~	20%*	40%*	25%*	52%*	36%	34%	
NO	202	28	38	28	40	35	16	143	1	1		1	11	8	56	127	137	51	83	103	
	66%	88%~	86%~	76%~	59%	44%*	62%~	64%	33%~	25%~		~100%~	73%~	50%~	80%*	60%*	75%*	48%*	64%	66%	
VALID CASES	304	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157	
NUMBER OF RESPONDENTS	304	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q46.3																					
YES	46 15%	862 16%	1 3%	5 11%	3 8%	13 19%	18 23%*	5 19%	37 17%	1 33%	~	~	~	1 7%	3 19%	8 11%	37 18%*	23 13%	23 21%*	16 12%	29 18%
NO	258 85%	4591 84%	31 97%	39 89%	34 92%	55 81%	61 77%*	21 81%	186 83%	2 67%	4 100%	1 100%	1 100%	14 93%	13 81%	62 89%	173 82%*	159 87%	84 79%*	114 88%	128 82%
VALID CASES	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q47.1	WVCH																				
	OHP	18	25	35	45	55	65														
	TOT	24	34	44	54	64	OVER	WHTE	AMER	IAN	ILND	NATV	OTHR	TI	PAN- IC	PAN- IC	GOOD	FAIR	FE-		
	ADLT															POOR		MALE	MALE		
YES	10		1		3	5	1	8	1		1				9	6	4	5	5		
	3%		~ 2%	~	4%	6%	4%	4%	33%	~	100%	~	~	~	~ 4%	3%	4%	4%	3%		
NO	294	32	43	37	65	74	25	215	2	4		1	15	16	70	201	176	103	125	152	
	97%	100%	~ 98%	~ 100%	~ 96%	94%	96%	96%	67%	~ 100%	~	~ 100%	~ 100%	~ 100%	~ 100%	~ 96%	97%	96%	96%	97%	
VALID CASES	304	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157	
NUMBER OF RESPONDENTS	304	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q47.2	WVCH																				
	TOT ADLT	18	25	35	45	55	65														
	OHP ADLT	24	34	44	54	64	OVER	WHTE	AMER	IAN	ILND	NATV	OTHR	TI	HIS- IC	HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE		
YES	11				3	7	1	9			1				1	9	4	7	6	4	
	4%				4%	9%*	4%~	4%			~100%~				1%	4%	2%	7%	5%	3%	
NO	293	32	44	37	65	72	25	214	3	4		1	15	16	69	201	178	100	124	153	
	96%	100%	100%	100%	96%	91%*	96%~	96%	100%	100%		~100%	~100%	~100%	99%	96%	98%	93%	95%	97%	
VALID CASES	304	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157	
NUMBER OF RESPONDENTS	304	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	WHTE	AS- IAN	ILND	NOT HIS- PAN-	HIS- PAN-	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE
Q47.3 YES	5 2%	221 4%*	1 ~	1 2%~	1 ~	1 1%	1 1%	1 4%~	3 1%	~	~	~	~	1 7%~	1 6%~	~	5 2%~	3 2%	2 2%	~	5 3%*
NO	299 98%	5232 96%*	32 100%~	43 98%~	37 100%~	67 99%	78 99%	25 96%~	220 99%	3 100%	4 100%	1 100%	1 100%	14 93%~	15 94%~	70 100%~	205 98%*	179 98%	105 98%	130 100%~	152 97%~
VALID CASES	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q47.4																					
YES	58 19%	1002 18%	1 3%	3 7%	7 19%	15 22%	25 32%*	7 27%	48 22%*	1 33%	2 50%	~	~	1 7%	~	14 20%	43 20%	19 10%*	39 36%*	19 15%	38 24%*
NO	246 81%	4451 82%	31 97%	41 93%	30 81%	53 78%	54 68%*	19 73%	175 78%*	2 67%	2 50%	1 100%	1 100%	14 93%	16 100%	56 80%	167 80%	163 90%*	68 64%*	111 85%	119 76%*
VALID CASES	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
NUMBER OF RESPONDENTS	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%



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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q48																					
YES	85 30%	1692 34%	5 16%~	8 19%~	9 24%~	21 31%	25 33%	16 62%~	72 33%*	~	1 ~100%~	3 ~ 20%~	3 19%~	14 20%*	69 34%*	34 19%*	50 49%*	30 23%*	54 35%*		
NO	198 70%	3335 66%	26 84%~	35 81%~	28 76%~	46 69%	51 67%	10 38%~	145 67%*	3 100%~	4 100%~	1 ~100%~	12 80%~	13 81%~	55 80%*	136 66%*	144 81%*	53 51%*	98 77%*	99 65%*	
NOT ANSWERED	21	426	1	1	1	3		6						1	5	4	4	2	4		
VALID CASES	283	5027	31	43	37	67	76	26	217	3	4	1	1	15	16	69	205	178	103	128	153
NUMBER OF RESPONDENTS	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q49 YES	63 77%	1394 85%	2 40%~	7 88%~	5 63%~	17 85%~	22 88%~	10 67%~	53 76%~	~	~	~	~	3 ~100%~	2 ~100%~	10 83%~	52 76%~	21 64%~	41 85%~	20 74%~	42 78%~
NO	19 23%	240 15%	3 60%~	1 12%~	3 38%~	3 15%~	3 12%~	5 33%~	17 24%~	~	~	1 ~100%~	~	~	~	2 17%~	16 24%~	12 36%~	7 15%~	7 26%~	12 22%~
NOT ANSWERED	3	62			1	1		1	2						1	2	1	2		3	
VALID CASES	82	1633	5	8	8	20	25	15	70			1		3	2	12	68	33	48	27	54
NUMBER OF RESPONDENTS	85	1695	5	8	9	21	25	16	72			1		3	3	14	69	34	50	30	54
	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q48 = YES]

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q50 YES	171 61%	3255 65%	9 29%~	19 44%~	18 50%~	47 69%	55 72%*	21 84%~	134 62%	3 100%	4 100%~			8 53%~	10 63%~	26 39%*	141 68%*	89 51%*	80 78%*	74 59%	96 62%
NO	110 39%	1781 35%	22 71%~	24 56%~	18 50%~	21 31%	21 28%*	4 16%~	82 38%			1 100%	1 100%~	7 47%~	6 37%~	41 61%*	66 32%*	87 49%*	23 22%*	51 41%	59 38%
NOT ANSWERED	23	417	1	1	1		3	1	7							3	3	6	4	5	2
VALID CASES	281	5036	31	43	36	68	76	25	216	3	4	1	1	15	16	67	207	176	103	125	155
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q51 YES	151 93%	2975 94%	8 89%~	15 88%~	17 94%~	43 93%~	50 96%	17 85%~	123 97%~	2 67%~	1 33%~			8 ~100%~	8 80%~	20 83%~	128 94%~	77 89%*	72 97%*	62 89%	88 96%
NO	12 7%	176 6%	1 11%~	2 12%~	1 6%~	3 7%~	2 4%	3 15%~	4 3%~	1 33%~	2 67%~				2 ~20%~	4 17%~	8 6%~	10 11%*	2 3%*	8 11%	4 4%
NOT ANSWERED	8	127		2		1	3	1	7		1					2	5	2	6	4	4
VALID CASES	163	3151	9	17	18	46	52	20	127	3	3			8	10	24	136	87	74	70	92
NUMBER OF RESPONDENTS	171 100%	3278 100%	9 100%	19 100%	18 100%	47 100%	55 100%	21 100%	134 100%	3 100%	4 100%			8 100%	10 100%	26 100%	141 100%	89 100%	80 100%	74 100%	96 100%

[ASKED IF Q50 = YES]

NQ52 WHAT IS YOUR AGE?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	WVCH 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- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	& FAIR & POOR	MALE	FE- MALE	
																					24
NQ52																					
18 TO 24	33 11%	547 10%	32 100%	~	~	~	~	22 10%	~	~	~	~	2 13%	3 19%	15 21%*	16 8%*	29 16%*	4 4%*	19 15%	13 8%	
25 TO 34	50 16%	870 16%	~	44 ~100%	~	~	~	31 14%	1 33%	~	~	~	3 20%	5 31%	17 24%	27 13%*	37 20%*	7 7%*	18 14%	26 17%	
35 TO 44	41 13%	802 15%	~	~	37 ~100%	~	~	28 13%	~	1 25%	~	~	3 20%	1 6%	12 17%	24 11%	24 13%	15 14%	19 15%	19 12%	
45 TO 54	73 24%	1153 21%	~	~	~	68 ~100%	~	50 22%	1 33%	2 50%	1 100%	~	4 27%	5 31%	14 20%	52 25%	41 23%	28 26%	32 25%	36 23%	
55 TO 64	81 27%	1412 26%	~	~	~	79 ~100%	~	72 32%*	1 33%	1 25%	~	1 ~100%	2 13%	~	7 10%*	70 33%*	39 21%*	40 37%*	31 24%	48 31%	
65 TO 74	18 6%	405 7%	~	~	~	~	18 69%	15 7%	~	~	~	~	~	1 6%	3 4%	15 7%	8 4%	10 9%	9 7%	9 6%	
75 OR OLDER	8 3%	264 5%*	~	~	~	~	8 31%	5 2%	~	~	~	~	1 7%	1 6%	2 3%	6 3%	4 2%	3 3%	2 2%	6 4%	
VALID CASES	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
NUMBER OF RESPONDENTS	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

NQ53 ARE YOU MALE OR FEMALE?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
NQ53																					
MALE	135 44%	2159 40%	19 59%~	18 41%~	19 51%~	32 47%	31 39%	11 42%~	97 43%	1 33%~	2 50%~	1 100%~	9 ~ 60%~	8 50%~	29 41%	97 46%	91 50%*	39 36%*	130 100%~	~	
FEMALE	169 56%	3294 60%	13 41%~	26 59%~	18 49%~	36 53%	48 61%	15 58%~	126 57%	2 67%~	2 50%~	1 ~100%~	6 40%~	8 50%~	41 59%	113 54%	91 50%*	68 64%*	157 ~100%~		
VALID CASES	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%

[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?

	WVCH TOT ADLT	OHP TOT ADLT	AGE							RACE							ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE			
Q54 8TH GRADE OR LESS	29 10%	312 6%*	~	4 9%~	5 14%~	11 16%	4 5%*	5 21%~	13 6%*	~	~	~	~	40%~	6 13%~	2 13%~	20 30%*	9 4%*	15 8%	13 13%	12 10%	17 11%	
SOME HIGH SCHOOL BUT DID NOT GRADUATE	54 19%	755 15%	19%~	6 16%~	7 22%~	8 24%	16 20%	2 8%~	36 17%	1 33%~	1 25%~	1 100%~	1 100%~	4 27%~	4 27%~	4 27%~	18 27%	32 15%*	32 18%	22 22%	26 21%	28 18%	
HIGH SCHOOL GRADUATE OR GED	92 33%	1615 32%	59%~	19 34%~	15 22%~	8 31%	21 28%	21 33%~	8 36%*	1 ~	~	~	~	1 7%~	5 33%~	5 33%~	16 24%	75 36%*	63 36%	28 27%	44 35%	48 31%	
SOME COLLEGE OR 2-YEAR DEGREE	83 30%	1732 34%	19%~	6 34%~	15 32%~	12 24%	16 37%	28 21%~	5 32%	69 32%	2 ~	~	~	4 27%~	4 27%~	4 27%~	11 17%*	70 34%*	51 29%	32 31%	34 27%	49 32%	
4-YEAR COLLEGE GRADUATE	22 8%	415 8%	3%~	1 7%~	3 11%~	4 4%	3 11%	8 13%~	3 9%*	20 9%*	2 67%~	~	~	~	~	~	~	1 2%*	21 10%*	16 9%	6 6%	10 8%	11 7%
MORE THAN 4-YEAR COLLEGE DEGREE	1 0.4%	214 4%*	~	~	~	~	~	1 4%~	1 0.5%	~	~	~	~	~	~	~	~	1 ~0.5%	~	1 ~	~	1 ~0.6%	
NOT ANSWERED	23	410					1	3	2	7						1	4	2	5	5	4	3	
VALID CASES	281	5043	32	44	37	67	76	24	216	3	4	1	1	15	15	66	208	177	102	126	154		
NUMBER OF RESPONDENTS	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q55 ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q55																					
YES HISPANIC OR LATINO	70	610	15	17	12	14	7	5	26					14	7	70		46	24	29	41
	25%	12%*	48%~	39%~	34%~	21%	9%*	19%~	12%*	~	~	~	~	93%~	44%~	100%~	~	26%	24%	23%	27%
NO NOT HISPANIC OR LATINO	210	4367	16	27	23	52	69	21	192	3	3		1	1	9	210		130	78	97	112
	75%	88%*	52%~	61%~	66%~	79%	91%*	81%~	88%*	100%~	100%~	~	100%~	7%~	56%~	~100%~	~	74%	76%	77%	73%
NOT ANSWERED	24	476	1		2	2	3		5		1	1						6	5	4	4
VALID CASES	280	4977	31	44	35	66	76	26	218	3	3		1	15	16	70	210	176	102	126	153
NUMBER OF RESPONDENTS	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%



Q56.1 WHAT IS YOUR RACE? RESPONSE: WHITE

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE			
Q56.1	WVCH																					
YES	TOT ADLT	237	4262	24	35	28	55	71	21	223					14	31	201	146	89	104	131	
		78%	78%	75%~	80%~	76%~	81%	90%*	81%~	100%~	~	~	~	~	88%~	44%*	96%*	80%	83%	80%	83%*	
NO	TOT ADLT	67	1191	8	9	9	13	8	5		3	4	1	1	15	2	39	9	36	18	26	26
		22%	22%	25%~	20%~	24%~	19%	10%*	19%~	~100%~	~100%~	~100%~	~100%~	~100%~	12%~	56%*	4%*	20%	17%	20%	17%*	
VALID CASES		304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
NUMBER OF RESPONDENTS		304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/ALSK	MUL-OTHR	TI	HIS-IC	NOT HIS-IC	EX & VERY GOOD &	FAIR & POOR	FE-MALE	MALE		
Q56.2	WVCH																				
YES	OHP TOT ADLT	183	251	351	451	551	651	3						3	2	1	1	1	2		
	TOT ADLT	133	133	133	133	133	133	100%	~	~	~	~	~	1%	1%	0.9%	0.8%	0.8%	1%		
NO	OHP TOT ADLT	5320	5320	5320	5320	5320	5320	223	4	1	1	15	16	70	207	180	106	129	155		
	TOT ADLT	5320	5320	5320	5320	5320	5320	100%	~100%	~100%	~100%	~100%	~100%	~100%	99%	99%	99%	99%	99%		
VALID CASES	OHP TOT ADLT	5453	5453	5453	5453	5453	5453	223	3	4	1	1	15	16	70	210	182	107	130	157	
NUMBER OF RESPONDENTS	TOT ADLT	5453	5453	5453	5453	5453	5453	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q56.3 WHAT IS YOUR RACE? RESPONSE: ASIAN

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE			
Q56.3	WVCH																					
	TOT ADLT	18	25	35	45	55	65															
	OHP TOT ADLT	4	225	1	2	1				4					3	2	2	2	2			
YES		1%	4%*	~	~	3%~	3%	1%	~	~	~100%~	~	~	~	~	1%	1%	2%	1%			
	NO	300	5228	32	44	36	66	78	26	223	3	1	1	15	16	70	207	180	105	128	155	
		99%	96%*	100%~	100%~	97%~	97%	99%	100%~	100%~	100%~	~100%~	100%~	100%~	100%~	100%~	99%	99%	98%	99%		
	VALID CASES	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
	NUMBER OF RESPONDENTS	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q56.4	WVCH TOT ADLT	18	25	35	45	55	65														
YES	2 0.7%			1 3%	1 1%					1 100%			1 6%		1 0.5%	2 1%		2 2%			
NO	302 99%	32 100%	44 100%	36 97%	67 99%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	15 100%	15 94%	70 100%	209 100%	180 99%	107 100%	128 98%	157 100%		
VALID CASES	304	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157	
NUMBER OF RESPONDENTS	304 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%	

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q56.5 YES	11 4%	314 6%*	3 ~	1 7%~	4 3%~	1 6%	2 1% 8%~	~	~	~	1 ~100%~	10 ~	63%~	2 3%	9 4%	9 5%	2 2%	7 5%	4 3%		
NO	293 96%	5139 94%*	32 100%~	41 93%~	36 97%~	64 94%	78 99%	24 92%~	223 100%~	3 100%~	4 100%~	1 100%~	15 ~100%~	6 37%~	68 97%	201 96%	173 95%	105 98%	123 95%	153 97%	
VALID CASES	304	5453	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157
NUMBER OF RESPONDENTS	304 100%	5453 100%	32 100%	44 100%	37 100%	68 100%	79 100%	26 100%	223 100%	3 100%	4 100%	1 100%	1 100%	15 100%	16 100%	70 100%	210 100%	182 100%	107 100%	130 100%	157 100%

Q56.6 WHAT IS YOUR RACE? RESPONSE: OTHER

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q56.6	WVCH																				
	OHP	18	25	35	45	55	65														
	TOT	24	34	44	54	64	OVER	WHTE	AMER	IAN	ILND	NATV	OTHR	TI	HIS- IC	HIS- IC	GOOD	FAIR &	MALE	FE- MALE	
	ADLT																				
YES	25	5	7	3	6	2	2						15	10	21	4	17	8	12	13	
	8%	16%~	16%~	8%~	9%	3%*	8%~	~	~	~	~	~100%~	63%~	30%*	2%*	9%	7%	9%	8%		
NO	279	27	37	34	62	77	24	223	3	4	1	1	6	49	206	165	99	118	144		
	92%	84%~	84%~	92%~	91%	97%*	92%~	100%~	100%~	100%~	100%~	100%~	~ 37%~	70%*	98%*	91%	93%	91%	92%		
VALID CASES	304	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157	
NUMBER OF RESPONDENTS	304	32	44	37	68	79	26	223	3	4	1	1	15	16	70	210	182	107	130	157	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q57 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	WVCH TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q57 YES	35 15%	652 16%	3 15%~	4 14%~	1 4%~	8 14%	7 9%	11 48%~	24 13%~	1 ~	1 33%~	1 100%~	4 ~	3 31%~	3 38%~	8 18%~	24 14%	16 12%	19 21%	20 19%	13 10%*
NO	195 85%	3488 84%	17 85%~	25 86%~	24 96%~	48 86%	67 91%	12 52%~	164 87%~	2 100%~	2 67%~	1 ~	9 100%~	5 69%~	5 63%~	37 82%~	153 86%	122 88%	71 79%	83 81%	112 90%*
NOT ANSWERED	2	78					1	1	1						1			1	1		
VALID CASES	230	4141	20	29	25	56	74	23	188	2	3	1	1	13	8	45	177	138	90	103	125
NUMBER OF RESPONDENTS	232 100%	4219 100%	20 100%	29 100%	25 100%	56 100%	75 100%	23 100%	189 100%	2 100%	3 100%	1 100%	1 100%	13 100%	8 100%	46 100%	177 100%	138 100%	91 100%	104 100%	125 100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q58.1																			
YES	18 51%	253 47%	3 ~75%	1 ~100%	6 ~75%	4 ~57%	3 ~27%	13 54%		1 ~100%		1 ~25%	3 ~100%	4 50%	11 46%	8 50%	10 53%	12 60%	5 38%
NO	17 49%	289 53%	3 ~100%	1 ~25%	2 ~25%	3 ~43%	8 ~73%	11 46%	1 ~100%			3 ~75%		4 ~50%	13 54%	8 50%	9 47%	8 40%	8 62%
VALID CASES	35	542	3	4	1	8	7	11	24	1	1	4	3	8	24	16	19	20	13
NUMBER OF RESPONDENTS	35 100%	542 100%	3 100%	4 100%	1 100%	8 100%	7 100%	11 100%	24 100%	1 100%	1 100%	4 100%	3 100%	8 100%	24 100%	16 100%	19 100%	20 100%	13 100%

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



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

	WVCH TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q58.2 YES	12 34%	188 35%~	3 ~ 75%	1 100%	3 38%	3 43%	1 9%	10 42%	~	~	~	~	~	2 67%	1 12%	9 38%	5 31%	7 37%	6 30%	4 31%	
NO	23 66%	354 65%~	3 100%	1 25%	5 ~ 63%	4 57%	10 91%	14 58%	1 ~100%	1 100%	4 ~100%	1 33%	7 88%	15 63%	11 69%	12 63%	14 70%	9 69%			
VALID CASES	35	542	3	4	1	8	7	11	24	1	1	4	3	8	24	16	19	20	13		
NUMBER OF RESPONDENTS	35 100%	542 100%	3 100%	4 100%	1 100%	8 100%	7 100%	11 100%	24 100%	1 100%	1 100%	4 100%	3 100%	8 100%	24 100%	16 100%	19 100%	20 100%	13 100%		

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

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q58.3	YES	10 29%	197 36%	1 33%	~	2 25%	3 43%	4 36%	5 21%	1 100%	1 100%	2 50%	3 75%	2 25%	7 29%	5 31%	5 26%	5 25%	5 38%		
	NO	25 71%	345 64%	2 67%	4 100%	1 100%	6 75%	4 57%	7 64%	19 79%	~	~	~	2 50%	3 100%	6 75%	17 71%	11 69%	14 74%	15 75%	8 62%
VALID CASES		35	542	3	4	1	8	7	11	24	1	1	4	3	8	24	16	19	20	13	
NUMBER OF RESPONDENTS		35 100%	542 100%	3 100%	4 100%	1 100%	8 100%	7 100%	11 100%	24 100%	1 100%	1 100%	4 100%	3 100%	8 100%	24 100%	16 100%	19 100%	20 100%	13 100%	

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

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE
Q58.4 YES	5 14%	81 15%	1 ~25%	1 ~12%	1 14%	2 18%	4 17%	~	1 ~100%	~	~	~	4 ~17%	3 19%	2 11%	4 20%	1 8%		
NO	30 86%	461 85%	3 100%	3 75%	1 100%	7 88%	6 86%	9 82%	20 83%	1 ~100%	~	4 ~100%	3 100%	8 100%	20 83%	13 81%	17 89%	16 80%	12 92%
VALID CASES	35	542	3	4	1	8	7	11	24	1	1	4	3	8	24	16	19	20	13
NUMBER OF RESPONDENTS	35 100%	542 100%	3 100%	4 100%	1 100%	8 100%	7 100%	11 100%	24 100%	1 100%	1 100%	4 100%	3 100%	8 100%	24 100%	16 100%	19 100%	20 100%	13 100%

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

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER				
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE			
Q58.5	WVCH																					
	TOT	6	44	2	1		2	1	4			1		2	4	2	4	3	2			
YES	ADLT	17%	8%	67%	25%	~	~	29%	9%	17%	~	~	~	25%	~	25%	17%	12%	21%	15%	15%	
	TOT	29	498	1	3	1	8	5	10	20	1	1	3	3	6	20	14	15	17	11		
NO	ADLT	83%	92%	33%	75%	~	100%	~	100%	~	71%	91%	83%	~	100%	~	100%	~	75%	~	100%	~
	TOT	35	542	3	4	1	8	7	11	24	1	1	4	3	8	24	16	19	20	13		
VALID CASES	ADLT	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
NUMBER OF RESPONDENTS	TOT	35	542	3	4	1	8	7	11	24	1	1	4	3	8	24	16	19	20	13		
	ADLT	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

NQ13 RATING OF ALL HEALTH CARE

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	WVCH TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
NQ13 0-6	36 18%	759 20%	3 15%	5 19%	6 24%	6 13%	9 16%	4 20%	27 18%	1 33%	~	~	2 17%	3 23%	10 24%	22 15%	16 15%	18 21%	9 11%*	24 21%
7-8	64 32%	1267 34%	5 25%	11 41%	6 24%	16 35%	17 30%	7 35%	49 32%	1 33%	~	~	4 33%	3 23%	11 26%	50 34%	33 30%	29 34%	28 34%	34 30%
9-10	101 50%	1714 46%	12 60%	11 41%	13 52%	24 52%	30 54%	9 45%	77 50%	1 33%	3 100%	~	6 50%	7 54%	21 50%	76 51%	60 55%	39 45%	45 55%	54 48%
VALID CASES	201	3741	20	27	25	46	56	20	153	3	3		12	13	42	148	109	86	82	112
NUMBER OF RESPONDENTS	201 100%	3741 100%	20 100%	27 100%	25 100%	46 100%	56 100%	20 100%	153 100%	3 100%	3 100%		12 100%	13 100%	42 100%	148 100%	109 100%	86 100%	82 100%	112 100%
MEAN	2.32	2.26	2.45	2.22	2.28	2.39	2.37	2.25	2.33	2.00	3.00		2.33	2.31	2.26	2.36	2.40	2.24	2.44	2.27
p stat_(*=Sig @ p<=.05)		.185	~	~	~	~	.549	~	~	~	~	~	~	~	~	.229	.104	.203	.066	.247

[ASKED IF Q7 >= 1 TIME]

NQ23 RATING OF PERSONAL DOCTOR

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
NQ23																					
0-6	30 13%	617 16%	3 12%	6 17%	6 19%	4 8%	8 13%	1 5%	24 14%	~	~	~	4 29%	1 8%	7 13%	21 13%	18 13%	11 13%	8 9%	20 15%	
7-8	59 26%	999 25%	7 28%	13 36%	7 23%	12 25%	14 22%	5 26%	46 27%	1 33%	1 100%	~	2 14%	3 25%	13 25%	43 26%	37 26%	22 26%	28 30%	30 23%	
9-10	142 61%	2342 59%	15 60%	17 47%	18 58%	32 67%	42 66%	13 68%	102 59%	2 67%	3 100%	~	8 57%	8 67%	32 62%	103 62%	85 61%	53 62%	56 61%	82 62%	
VALID CASES	231	3959	25	36	31	48	64	19	172	3	3	1	14	12	52	167	140	86	92	132	
NUMBER OF RESPONDENTS	231 100%	3959 100%	25 100%	36 100%	31 100%	48 100%	64 100%	19 100%	172 100%	3 100%	3 100%	1 100%	14 100%	12 100%	52 100%	167 100%	140 100%	86 100%	92 100%	132 100%	
MEAN	2.48	2.44	2.48	2.31	2.39	2.58	2.53	2.63	2.45	2.67	3.00	2.00	2.29	2.58	2.48	2.49	2.48	2.49	2.52	2.47	
p stat_(*=Sig @ p<=.05)		.287	~	~	~	~	.542	~	.256	~	~	~	~	~	~	.963	.833	.869	.954	.513	.711

[ASKED IF Q15 = YES]

NQ27 RATING OF SPECIALIST SEEN MOST OFTEN

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
NQ27 0-6	11 11%	257 14%	1 13%~	1 14%~	3 33%~	3 11%~	2 6%~	1 10%~	10 13%~	~	~	~	~	1 20%~	~	1 7%~	10 13%~	4 9%~	7 13%~	4 11%~	7 12%~
7-8	22 22%	429 23%	1 13%~	~	2 22%~	7 26%~	8 23%~	4 40%~	16 21%~	~	1 100%~	~	~	2 40%~	1 25%~	4 27%~	18 23%~	7 16%~	15 29%~	6 16%~	16 28%~
9-10	65 66%	1164 63%	6 75%~	6 86%~	4 44%~	17 63%~	25 71%~	5 50%~	52 67%~	1 100%~	~	1 100%~	~	2 40%~	3 75%~	10 67%~	51 65%~	34 76%~	30 58%~	28 74%~	34 60%~
VALID CASES	98	1850	8	7	9	27	35	10	78	1	1	1	~	5	4	15	79	45	52	38	57
NUMBER OF RESPONDENTS	98 100%	1850 100%	8 100%	7 100%	9 100%	27 100%	35 100%	10 100%	78 100%	1 100%	1 100%	1 100%	~	5 100%	4 100%	15 100%	79 100%	45 100%	52 100%	38 100%	57 100%
MEAN	2.55	2.49	2.63	2.71	2.11	2.52	2.66	2.40	2.54	3.00	2.00	3.00	~	2.20	2.75	2.60	2.52	2.67	2.44	2.63	2.47
p stat_(*=Sig @ p<=.05)		.380	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

NQ35 RATING OF HEALTH PLAN

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
NQ35 0-6	51 18%	1116 23%*	7 22%~	8 19%~	6 17%~	12 19%	15 20%	2 8%~	47 22%*	~	~	~100%~	1 7%~	1 7%~	1 9%*	6 22%*	44 15%	27 24%	24 18%	22 19%	
7-8	83 30%	1551 32%	11 34%~	16 37%~	13 37%~	15 23%	18 24%	7 29%~	62 29%	1 33%~	2 50%~	~	~	4 29%~	7 50%~	17 25%	60 30%	53 30%	29 29%	31 26%	48 31%
9-10	145 52%	2193 45%*	14 44%~	19 44%~	16 46%~	37 58%	43 57%	15 63%~	104 49%	2 67%~	2 50%~	1 100%~	~	9 64%~	6 43%~	46 67%*	95 48%*	97 55%	46 46%	66 55%	78 50%
VALID CASES NUMBER OF RESPONDENTS	279 100%	4860 100%	32 100%	43 100%	35 100%	64 100%	76 100%	24 100%	213 100%	3 100%	4 100%	1 100%	1 100%	14 100%	14 100%	69 100%	199 100%	177 100%	99 100%	119 100%	155 100%
MEAN	2.34	2.22	2.22	2.26	2.29	2.39	2.37	2.54	2.27	2.67	2.50	3.00	1.00	2.57	2.36	2.58	2.26	2.40	2.22	2.37	2.32
p stat_(*=Sig @ p<=.05)		.010*	~	~	~.525	.676		~.002*	~	~	~	~	~	~	~.002*	.003*	.094	.073	.541	.614	



GETTING NEEDED CARE

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
	WVCH TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHER	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NPRBSEE4 NQ25	2.35	2.25	2.63	2.71	1.90	2.40	2.39	2.17	2.36	2.50	2.00	3.00		2.00	2.50	2.33	2.36	2.48	2.25	2.51	2.25
p stat_(*=Sig @ p<=.05)		.182	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCARNES4 NQ14	2.34	2.30	2.37	2.54	2.22	2.36	2.37	2.26	2.36	2.00	2.67			2.17	2.50	2.26	2.39	2.43	2.26	2.30	2.41
p stat_(*=Sig @ p<=.05)		.402	~	~	~	~	.732	~	~	~	~	~	~	~	~	~.114	.079	.122	.472	.153	
COMPOSITE	2.35	2.28	2.50	2.63	2.06	2.38	2.38	2.21	2.36	2.25	2.33	3.00	x	2.08	2.50	2.30	2.38	2.45	2.25	2.41	2.33
p stat_(*=Sig @ p<=.05)		.364	~	~	~	~	.775	~	.795	~	~	~	~	~	~	~.527	.119	.251	.525	.770	

GETTING CARE QUICKLY

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	WVCH TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE			
NCARSN4 NQ4	2.40	2.38	2.45	2.00	2.57	2.58	2.54	2.38	2.46		2.00	1.00	1.80	2.75	2.35	2.48	2.56	2.30	2.50	2.43	
p stat_(*=Sig @ p<=.05)		.734	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.017*	~	~	.667	
NAPGET4 NQ6	2.32	2.32	1.77	2.35	2.24	2.47	2.39	2.22	2.35	2.67	2.00	2.00	1.90	2.44	2.18	2.37	2.36	2.31	2.27	2.38	
p stat_(*=Sig @ p<=.05)		.964	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.483	.810	.470	.299	
COMPOSITE	2.36	2.35	2.11	2.17	2.40	2.52	2.46	2.30	2.40	2.67	2.00	2.00	1.00	1.85	2.60	2.26	2.42	2.46	2.30	2.39	2.40
p stat_(*=Sig @ p<=.05)		.903	~	~	~	~	.435	~	~	~	~	~	~	~	~	~	.183	.161	.527	.789	.558

HOW WELL DOCTORS COMMUNICATE

	WVCH TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NDREXPL4 NQ17	2.60	2.62	2.50	2.64	2.50	2.74	2.55	2.71	2.61	2.67	2.67	3.00		2.33	2.67	2.54	2.63	2.64	2.59	2.60	2.64
p stat_(*=Sig @ p<=.05)		.644	~	~	~	~.461	~	~	~	~	~	~	~	~	~	~	~	.457	.788	.938	.336
NDRLSTN4 NQ18	2.61	2.59	2.78	2.73	2.50	2.70	2.53	2.71	2.59	3.00	3.00	3.00		2.56	2.75	2.65	2.63	2.72	2.51	2.67	2.62
p stat_(*=Sig @ p<=.05)		.712	~	~	~	~.313	~	~	~	~	~	~	~	~	~	~	~	.017*	.091	.290	.752
NDRESPU4 NQ19	2.66	2.65	2.83	2.82	2.55	2.67	2.68	2.47	2.64	3.00	3.00	3.00		2.56	2.92	2.73	2.65	2.73	2.60	2.71	2.65
p stat_(*=Sig @ p<=.05)		.697	~	~	~	~.817	~	~	~	~	~	~	~	~	~	~	~	.118	.245	.349	.752
NDRTMEN4 NQ20	2.41	2.49	2.44	2.27	2.32	2.60	2.36	2.35	2.44	2.67	3.00	3.00		1.67	2.33	2.08	2.49	2.46	2.35	2.44	2.41
p stat_(*=Sig @ p<=.05)		.133	~	~	~	~.504	~	~	~	~	~	~	~	~	~	~	~	.304	.270	.667	.848
COMPOSITE	2.57	2.59	2.64	2.61	2.47	2.68	2.53	2.56	2.57	2.83	2.92	3.00	x	2.28	2.67	2.50	2.60	2.64	2.51	2.61	2.58
p stat_(*=Sig @ p<=.05)		.891	~	~	~	~.771	~	~	~	~	~	~	~	~	~	~	~	.479	.595	.783	.930

CUSTOMER SERVICE

	WVCH TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE
NPBCLCS4 NQ31	2.33	2.23	1.88	2.42	1.83	2.42	2.38	2.55	2.25	3.00	2.00	2.83	2.40	2.37	2.31	2.34	2.30	2.25	2.40
p stat_(*=Sig @ p<=.05)		.242	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ32	2.67	2.63	2.25	2.58	2.50	2.58	2.92	2.82	2.65	3.00	3.00	2.83	2.60	2.63	2.69	2.68	2.65	2.66	2.69
p stat_(*=Sig @ p<=.05)		.458	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.50	2.43	2.06	2.50	2.17	2.50	2.65	2.68	2.45	3.00	x 2.50	x 2.83	2.50	2.50	2.50	2.51	2.47	2.45	2.55
p stat_(*=Sig @ p<=.05)		.666	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	WVCH TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE			
NNRXWHY NQ10	2.81	2.84	3.00	3.00	2.33	2.81	2.87	2.83	2.79	3.00			3.00	3.00	2.83	2.81	2.74	2.91	2.79	2.83	
p stat_(*=Sig @ p<=.05)		.529	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.216	~	~	~	
NNRXWYNT NQ11	2.31	2.45	2.00	2.09	2.20	2.42	2.20	2.33	2.29	2.00	1.00		2.00	2.33	2.17	2.29	2.28	2.28	1.97	2.47	
p stat_(*=Sig @ p<=.05)		.082	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.790	~	~	~	
NRXBST NQ12	2.50	2.50	2.60	2.64	1.89	2.44	2.61	2.67	2.49	3.00			2.60	2.33	2.20	2.54	2.56	2.45	2.46	2.53	
p stat_(*=Sig @ p<=.05)		.952	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.539	~	~	~	
COMPOSITE	2.54	2.60	2.53	2.58	2.14	2.55	2.56	2.61	2.52	2.67	1.00	x	x	2.53	2.56	2.40	2.55	2.52	2.55	2.41	2.61
p stat_(*=Sig @ p<=.05)		.654	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.896	~	~	~	

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- TI	OTH	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE		
PRBSEE4 Q25	84%	78%	88%	86%	70%	80%	91%	83%	100%	100%	100%		60%	100%	87%	83%	83%	85%	90%	80%	
CARNES4 Q14	87%	82%	84%	92%	78%	87%	91%	84%	88%	67%	100%			83%	83%	81%	89%	88%	85%	90%	86%
AVERAGE	85.49	80.02	85.86	88.69	73.89	83.33	90.82	83.77	85.24	83.33	100.0	100.0	x	71.67	91.67	83.81	85.97	85.84	84.89	89.93	82.62

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- TI	OTH	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE		
CARSN4 Q4	85%	83%	100%	67%	93%	88%	89%	85%	87%			100%	0%	60%	100%	90%	86%	93%	77%	96%	81%
APGET4 Q6	82%	80%	62%	80%	81%	87%	86%	78%	82%	100%	100%	100%		70%	78%	74%	84%	81%	85%	86%	79%
AVERAGE	83.50	81.23	80.77	73.33	86.90	87.85	87.50	81.20	84.63	100.0	100.0	100.0		65.00	88.89	81.76	85.37	87.03	81.00	90.98	80.10

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

	WVCH TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
DREXPL4 Q17	92%	92%	89%	91%	86%	98%	89%	100%	92%	100%	100%	100%		78%	92%	89%	93%	93%	91%	97%	90%
DRLSTN4 Q18	91%	90%	94%	91%	82%	95%	87%	100%	89%	100%	100%	100%		89%	100%	92%	90%	94%	87%	96%	89%
DRESPU4 Q19	93%	91%	94%	95%	86%	95%	94%	88%	92%	100%	100%	100%		89%	100%	95%	93%	94%	92%	96%	92%
DRTMEN4 Q20	86%	88%	83%	86%	73%	93%	85%	88%	87%	100%	100%	100%		56%	75%	76%	88%	88%	83%	90%	84%
AVERAGE	90.5	90.4	90.3	90.9	81.8	95.3	88.7	94.1	90.2	100	100	100	x	77.8	91.7	87.8	91.0	92.2	88.5	94.6	88.4



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

	WVCH TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHT	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTH	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE
PBCLCS4 Q31	78%	76%	63%	75%	50%	83%	79%	91%	73%	100%		100%		100%	80%	78%	76%	77%	78%	72%	83%
CSRESP Q32	97%	92%	88%	92%	100%	96%	100%	100%	97%	100%		100%		100%	80%	96%	96%	96%	98%	97%	96%
AVERAGE	87.08	84.03	75.00	83.33	75.00	89.58	89.58	95.45	84.92	100.0	x	100.0	x	100.0	80.00	87.04	86.36	86.17	87.50	84.38	89.42

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	WVCH TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE	
NRXWHY Q10	90%	92%	100%	100%	67%	90%	93%	92%	89%	100%				100%	100%	92%	90%	87%	96%	89%	92%
NRXWYNT Q11	65%	73%	50%	55%	60%	71%	60%	67%	64%	50%	0%			50%	67%	58%	65%	64%	64%	49%	73%
RXBST Q12	75%	75%	80%	82%	44%	72%	81%	83%	75%	100%				80%	67%	60%	77%	78%	72%	73%	76%
AVERAGE	77.0	79.8	76.7	78.8	57.0	77.7	78.0	80.6	76.1	83.3		x	x	76.7	77.8	70.0	77.4	76.2	77.3	70.5	80.4

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
Q1	WVCH TOT CHLD	OHP TOT CHLD																		
YES	371	5304	4	63	105	112	87	193	1	3	2	4	38	27	214	117	314	22	304	67
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
NOT ANSWERED	9	59	2	4	3	5									7	2	7	2	8	1
VALID CASES	371	5304	4	63	105	112	87	193	1	3	2	4	38	27	214	117	314	22	304	67
NUMBER OF RESPONDENTS	380	5363	4	65	109	112	90	198	1	3	2	4	38	27	221	119	321	24	312	68
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
Q3																				
YES	110 31%	1687 32%	2 50%~	27 47%*	35 33%	23 22%*	23 27%	64 34%	~	~	~	75%~	8 21%~	7 27%~	51 24%*	48 40%*	92 29%~	11 52%~	82 28%*	28 43%*
NO	248 69%	3541 68%	2 50%~	31 53%*	71 67%	82 78%*	62 73%	127 66%	1 100%	3 100%	2 100%	1 25%~	30 79%~	19 73%~	159 76%*	71 60%*	221 71%~	10 48%~	211 72%*	37 57%*
NOT ANSWERED	22	135		7	3	7	5	7					1	11		8	3	19	3	
VALID CASES	358	5228	4	58	106	105	85	191	1	3	2	4	38	26	210	119	313	21	293	65
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%

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?

	WVCH TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q4 NEVER	11	18																	
	11%	1%																	
SOMETIMES	11	148	3	3	2	3	5			1		1	7	2	8	2	9	2	
	11%	9%	~ 12%~	10%~	10%~	14%~	8%~	~	~	~ 33%~	~ 17%~	16%~	4%~	9%~	22%~	12%~	8%~		
USUALLY	25	323	5	9	7	4	15			1	1	1	15	9	23	2	16	9	
	25%	20%	~ 19%~	29%~	33%~	19%~	25%~	~	~	~ 33%~	14%~	17%~	33%~	20%~	27%~	22%~	22%~	35%~	
ALWAYS	64	1151	1	18	19	12	14	40		1	6	4	23	35	55	5	49	15	
	64%	70%	100%~	69%~	61%~	57%~	67%~	67%~	~	~	~ 33%~	86%~	67%~	51%~	76%~	64%~	56%~	66%~	58%~
#ALWAYS + USUALLY (NET)	89	1475	1	23	28	19	18	55		2	7	5	38	44	78	7	65	24	
	89%	90%	100%~	88%~	90%~	90%~	86%~	92%~	~	~	~ 67%~	100%~	83%~	84%~	96%~	91%~	78%~	88%~	92%~
TOP BOX SCORE	64	1151	1	18	19	12	14	40		1	6	4	23	35	55	5	49	15	
	64%	70%	100%~	69%~	61%~	57%~	67%~	67%~	~	~	~ 33%~	86%~	67%~	51%~	76%~	64%~	56%~	66%~	58%~
NOT ANSWERED	10	142	1	1	4	2	2	4			1	1	6	2	6	2	8	2	
VALID CASES	100	1641	1	26	31	21	21	60		3	7	6	45	46	86	9	74	26	
NUMBER OF RESPONDENTS	110	1783	2	27	35	23	23	64		3	8	7	51	48	92	11	82	28	
	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q3 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q5 YES	233 65%	3345 65%	3 75%~	52 87%*	72 69%	57 53%*	49 58%	123 64%	1 100%	3 100%	1 50%~	3 75%~	23 61%~	13 50%~	136 64%	77 65%	197 63%~	20 87%~	181 62%*	52 78%*
Q5 NO	126 35%	1824 35%	1 25%~	8 13%*	32 31%	50 47%*	35 42%	70 36%	~	~	1 50%~	1 25%~	15 39%~	13 50%~	77 36%	41 35%	116 37%~	3 13%~	111 38%*	15 22%*
NOT ANSWERED	21	194		5	5	5	6	5					1	8	1	8	1	20	1	
VALID CASES	359	5169	4	60	104	107	84	193	1	3	2	4	38	26	213	118	313	23	292	67
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q6 NEVER	4 2%	35 1%	~	2%	2%	2%	2%	3%	~	~	~	~	~	4 3%*	~	4 2%~	~	3 2%	1 2%	
SOMETIMES	35 16%	451 14%	1 50%~	5 10%	11 17%	7 13%	11 24%~	14 12%	~	2 67%~	1 100%~	~	3 14%~	1 8%~	25 20%	6 8%*	27 15%~	5 25%~	30 18%	5 10%
USUALLY	51 24%	814 26%	~	12 24%	19 29%	11 20%	9 20%~	27 24%	~	~	~	~	6 29%~	6 46%~	26 20%	22 30%	43 23%~	5 25%~	41 25%	10 19%
ALWAYS	126 58%	1829 58%	1 50%~	32 64%	34 52%	35 65%	24 53%~	69 61%	1 100%~	1 33%~	~	3 100%~	12 57%~	6 46%~	72 57%	46 62%	111 60%~	10 50%~	90 55%	36 69%
#ALWAYS + USUALLY (NET)	177 82%	2643 84%	1 50%~	44 88%	53 82%	46 85%	33 73%~	96 85%	1 100%~	1 33%~	~	3 100%~	18 86%~	12 92%~	98 77%*	68 92%*	154 83%~	15 75%~	131 80%	46 88%
TOP BOX SCORE	126 58%	1829 58%	1 50%~	32 64%	34 52%	35 65%	24 53%~	69 61%	1 100%~	1 33%~	~	3 100%~	12 57%~	6 46%~	72 57%	46 62%	111 60%~	10 50%~	90 55%	36 69%
NOT ANSWERED	17	215	1	2	7	3	4	10					2		9	3	12		17	
VALID CASES	216	3129	2	50	65	54	45	113	1	3	1	3	21	13	127	74	185	20	164	52
NUMBER OF RESPONDENTS	233 100%	3344 100%	3 100%	52 100%	72 100%	57 100%	49 100%	123 100%	1 100%	3 100%	1 100%	3 100%	23 100%	13 100%	136 100%	77 100%	197 100%	20 100%	181 100%	52 100%

[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?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC	
Q7 NONE	108 31%	1553 31%		7 ~ 13%*	27 28%	44 42%*	30 36%	58 30%	1 100%~	1 33%~	2 100%~	1 25%~	10 28%~	8 31%~	72 35%	30 25%	102 33%~	2 9%~	94 34%*	14 21%*
1 TIME	92 27%	1446 28%	1 25%~	18 33%	27 28%	31 30%	15 18%*	49 26%	~	~	~	1 25%~	12 33%~	8 31%~	55 27%	31 26%	81 26%~	6 26%~	74 27%	18 26%
2	64 19%	1007 20%	1 25%~	13 24%	20 20%	13 12%*	17 20%	35 18%	~	1 33%~	~	1 25%~	6 17%~	5 19%~	38 18%	22 19%	59 19%~	4 17%~	52 19%	12 18%
3	36 10%	534 11%	~	6 11%	14 14%	9 9%	7 8%	21 11%	~	~	~	~	4 11%~	3 12%~	17 8%	16 14%	30 10%~	3 13%~	27 10%	9 13%
4	22 6%	260 5%	1 25%~	4 7%	7 7%	4 4%	6 7%	16 8%	~	1 33%~	~	1 25%~	2 6%~	~	10 5%	12 10%	19 6%~	3 13%~	14 5%	8 12%
5 TO 9	19 6%	196 4%	1 25%~	6 11%	3 3%	3 3%	6 7%	11 6%	~	~	~	~	2 6%~	1 4%~	13 6%	5 4%	15 5%~	3 13%~	14 5%	5 7%
10 OR MORE TIMES	4 1%	87 2%	~	~	~	1 1%	3 4%	2 1%	~	~	~	~	~	1 4%~	2 1%	2 2%	2 0.6%~	2 9%~	2 0.7%	2 3%
NOT ANSWERED	35	280	11	11	7	6	6						2	1	14	1	13	1	35	
VALID CASES	345	5083	4	54	98	105	84	192	1	3	2	4	36	26	207	118	308	23	277	68
NUMBER OF RESPONDENTS	380	5363	4	65	109	112	90	198	1	3	2	4	38	27	221	119	321	24	312	68
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC
Q8 #YES	157 68%	2386 68%	3 75%~	30 67%~	49 71%	42 70%	33 63%	88 67%	2 ~100%~	3 ~100%~	18 72%~	11 69%~	93 70%	57 67%	135 68%~	17 81%~	119 67%	38 72%
NO	73 32%	1113 32%	1 25%~	15 33%~	20 29%	18 30%	19 37%	43 33%	~	~	7 ~ 28%~	5 31%~	39 30%	28 33%	64 32%~	4 19%~	58 33%	15 28%
NOT ANSWERED	7	69		2	2	1	2	3			1	2	3	3	7		6	1
VALID CASES	230	3499	4	45	69	60	52	131	2	3	25	16	132	85	199	21	177	53
NUMBER OF RESPONDENTS	237 100%	3568 100%	4 100%	47 100%	71 100%	61 100%	54 100%	134 100%	2 100%	3 100%	26 100%	18 100%	135 100%	88 100%	206 100%	21 100%	183 100%	54 100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q9 NEVER	4 2%	78 2%	1 25%~	~	~	1 2%	2 4%	2 2%	~	~	~	~	1 6%~	2 2%	2 2%	4 2%~	~	3 2%	1 2%	
SOMETIMES	25 11%	344 10%	~	3 7%~	3 4%*	10 16%	9 17%	13 10%	~	~	~	~	2 8%~	2 11%~	12 9%	10 11%	22 11%~	2 10%~	21 12%	4 7%
USUALLY	67 29%	768 22%*	1 25%~	14 31%~	21 30%	15 25%	16 31%	38 29%	~	1 50%~	~	~	6 24%~	3 17%~	40 30%	21 24%	56 28%~	5 24%~	54 30%	13 24%
ALWAYS	136 59%	2292 66%*	2 50%~	28 62%~	46 66%	35 57%	25 48%	79 60%	~	1 50%~	~	3 100%~	17 68%~	12 67%~	78 59%	55 62%	120 59%~	14 67%~	100 56%	36 67%
#ALWAYS + USUALLY (NET)	203 88%	3059 88%	3 75%~	42 93%~	67 96%*	50 82%	41 79%	117 89%	~	2 100%~	~	3 100%~	23 92%~	15 83%~	118 89%	76 86%	176 87%~	19 90%~	154 87%	49 91%
TOP BOX SCORE	136 59%	2292 66%*	2 50%~	28 62%~	46 66%	35 57%	25 48%	79 60%	~	1 50%~	~	3 100%~	17 68%~	12 67%~	78 59%	55 62%	120 59%~	14 67%~	100 56%	36 67%
NOT ANSWERED	5	87		2	1		2	2				1		3		4		5		
VALID CASES	232	3481	4	45	70	61	52	132		2		3	25	18	132	88	202	21	178	54
NUMBER OF RESPONDENTS	237 100%	3568 100%	4 100%	47 100%	71 100%	61 100%	54 100%	134 100%		2 100%		3 100%	26 100%	18 100%	135 100%	88 100%	206 100%	21 100%	183 100%	54 100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC		
Q10 YES	74 33%	1122 32%	2 50%~	12 28%~	21 30%	21 35%	18 35%	47 36%	~	~	~	2 67%~	5 20%~	10 56%~	40 31%	33 38%	64 32%~	8 42%~	46 26%*	28 53%*
Q10 NO	153 67%	2348 68%	2 50%~	31 72%~	48 70%	39 65%	33 65%	84 64%	~100%~	2	1	20 80%~	8 44%~	87 69%	55 62%	134 68%~	11 58%~	128 74%*	25 47%*	
NOT ANSWERED	10	97		4	2	1	3	3				1		8		8	2	9	1	
VALID CASES	227	3471	4	43	69	60	51	131	2	3	25	18	127	88	198	19	174	53		
NUMBER OF RESPONDENTS	237	3568	4	47	71	61	54	134	2	3	26	18	135	88	206	21	183	54		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q7 >= 1 TIME]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q11 #YES	62 93%	947 94%	~	90%~	95%~	95%~	89%~	41 95%~	~	~	~	1 ~100%~	4 100%~	7 70%~	30 91%~	31 94%~	54 93%~	6 86%~	35 88%~	27 100%~
NO	5 7%	63 6%	~	10%~	5%~	5%~	11%~	2 5%~	~	~	~	~	~	3 9%~	2 6%~	4 7%~	1 14%~	5 13%~	~	
NOT ANSWERED	52	450	2	17	15	9	9	13				1	4	1	29	1	27	4	50	2
VALID CASES	67	1010		10	19	20	18	43				1	4	10	33	33	58	7	40	27
NUMBER OF RESPONDENTS	119 100%	1460 100%	2	27 100%	34 100%	29 100%	27 100%	56 100%				2 100%	8 100%	11 100%	62 100%	34 100%	85 100%	11 100%	90 100%	29 100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q12 #YES	44 67%	718 70%	7 ~ 70%~	13 72%~	13 65%~	11 61%~	32 74%~					1 ~100%~	2 50%~	4 44%~	20 61%~	23 72%~	36 63%~	7 100%~	22 55%~	22 85%~
NO	22 33%	305 30%	3 ~ 30%~	5 28%~	7 35%~	7 39%~	11 26%~					2 ~ 50%~	5 56%~	13 39%~	9 28%~	21 37%~		18 45%~	4 15%~	
NOT ANSWERED	8	87	2	2	3	1	4				1	1	1	7	1	7	1	6	2	
VALID CASES	66	1023	10	18	20	18	43				1	4	9	33	32	57	7	40	26	
NUMBER OF RESPONDENTS	74 100%	1110 100%	2 100%	12 100%	21 100%	21 100%	18 100%	47 100%			2 100%	5 100%	10 100%	40 100%	33 100%	64 100%	8 100%	46 100%	28 100%	

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q13 #YES	60 82%	830 78%	1 100%~	11 92%~	20 95%~	16 76%~	12 67%~	40 87%~	~	~	2 ~100%~	3 60%~	7 70%~	30 77%~	29 88%~	51 81%~	8 100%~	33 73%~	27 96%~
NO	13 18%	241 22%	~	8%~	5%~	24%~	33%~	6 13%~	~	~	2 ~40%~	3 30%~	9 23%~	4 12%~	12 19%~	~	12 27%~	1 4%~	
NOT ANSWERED	1	39	1					1					1		1		1		
VALID CASES	73	1071	1	12	21	21	18	46			2	5	10	39	33	63	8	45	28
NUMBER OF RESPONDENTS	74	1110	2	12	21	21	18	47			2	5	10	40	33	64	8	46	28
	100%	100%	100%	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?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC
Q14 WORST HEALTH CARE POSSIBLE	3	0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01	2	0.9%	~	2%	~	~	2%	~	~	~	33%	~	~	2%	~	~	10%	2%	1%
02	1	0.4%	~	~	~	~	2%	~	~	~	~	~	~	1%	~	0.5%	~	~	0.6%
03	1	0.4%	~	~	~	~	2%	~	~	~	~	~	~	0.8%	~	~	5%	~	0.6%
04	4	2%	~	2%	~	3%	2%	~	~	~	~	4%	~	2%	2%	2%	~	3%	2%
05	5	2%	~	2%	~	5%	2%	~	~	~	~	~	~	2%	2%	1%	10%	1%	6%
06	5	2%	~	2%	1%	2%	4%	~	~	~	~	~	~	6%	~	2%	~	3%	4%
07	27	12%	25%	16%	10%	8%	13%	14%	~	~	~	8%	17%	10%	13%	12%	5%	10%	17%
08	47	20%	25%	20%	23%	18%	19%	19%	~100%	~	~	20%	28%	17%	23%	19%	19%	22%	15%
09	42	18%	~	13%	24%	18%	15%	17%	~	~	~	33%	16%	17%	20%	16%	19%	14%	17%
BEST HEALTH CARE POSSIBLE	98	42%	50%	42%	41%	46%	38%	40%	~	~	~	33%	52%	39%	47%	37%	43%	38%	44%
#8-10 (NET)	187	81%	75%	76%	89%*	82%	73%	77%	~100%	~	~	67%	88%	83%	84%	76%	82%	71%	83%

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC		
9-10 (NET)	140 60%	2027 58%	2 50%~	25 56%~	46 66%	39 64%	28 54%	76 58%	~	~	~	2 67%~	17 68%~	10 56%~	89 67%*	47 53%	125 62%~	11 52%~	109 61%	31 57%
NOT ANSWERED	5	98		2	1		2				1			3		5		5		
VALID CASES	232	3470	4	45	70	61	52	132	2		3	25	18	132	88	201	21	178	54	
NUMBER OF RESPONDENTS	237 100%	3568 100%	4 100%	47 100%	71 100%	61 100%	54 100%	134 100%	2 100%		3 100%	26 100%	18 100%	135 100%	88 100%	206 100%	21 100%	183 100%	54 100%	
MEAN	8.63	8.58	8.75	8.47	8.94	8.70	8.23	8.55	8.00		6.67	8.96	8.78	8.77	8.44	8.73	7.67	8.68	8.44	
p stat_(*=Sig @ p<=.05)		.631	~	~	.021*	.661	.115	.462	~	~	~	~	~	.122	.200	~	~	.355	.356	

[ASKED IF Q7 >= 1]



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC	
Q15 NEVER	2 0.9%	64 2%	~	1 2%	~	1 2%	~	~	~	~	~	~	1 6%	1 0.8%	1 1%	2 1%	~	2 1%	~	
SOMETIMES	18 8%	353 10%	~	5 12%	2 3%*	7 12%	4 8%	9 7%	~	~	2 67%	~	1 6%	11 9%	6 7%	12 6%	5 24%	14 8%	4 7%	
USUALLY	84 37%	1112 32%	3 75%	10 23%	27 39%	23 38%	21 40%	51 39%	~	1 50%	~	~	10 42%	4 22%	43 33%	33 38%	74 37%	4 19%	64 37%	20 37%
ALWAYS	125 55%	1922 56%	1 25%	27 63%	40 58%	29 48%	28 53%	70 54%	~	1 50%	~	1 33%	14 58%	12 67%	74 57%	48 55%	110 56%	12 57%	95 54%	30 56%
#ALWAYS + USUALLY (NET)	209 91%	3034 88%	4 100%	37 86%	67 97%*	52 87%	49 92%	121 93%	~	2 100%	~	1 33%	24 100%	16 89%	117 91%	81 92%	184 93%	16 76%	159 91%	50 93%
TOP BOX SCORE	125 55%	1922 56%	1 25%	27 63%	40 58%	29 48%	28 53%	70 54%	~	1 50%	~	1 33%	14 58%	12 67%	74 57%	48 55%	110 56%	12 57%	95 54%	30 56%
NOT ANSWERED	8	117		4	2	1	1	4				2		6		8		8		
VALID CASES	229	3451	4	43	69	60	53	130	2		3	24	18	129	88	198	21	175	54	
NUMBER OF RESPONDENTS	237 100%	3568 100%	4 100%	47 100%	71 100%	61 100%	54 100%	134 100%	2 100%		3 100%	26 100%	18 100%	135 100%	88 100%	206 100%	21 100%	183 100%	54 100%	

[ASKED IF Q7 >= 1 TIME]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
Q16 YES	231 65%	3643 71%*	~	11 18%*	73 70%	85 83%*	62 75%*	125 65%	3 ~100%~		2 ~ 50%~	24 65%~	21 78%~	136 63%	81 69%	203 65%~	16 73%~	176 61%*	55 82%*	
NO	123 35%	1481 29%*	100%~	4 82%*	49 30%	31 17%*	18 25%*	21 35%	1 100%~		1 ~100%~	2 50%~	13 35%~	6 22%~	79 37%	36 31%	110 35%~	6 27%~	111 39%*	12 18%*
NOT ANSWERED	26	239		5	5	9	7	6			1	1		6	2	8	2	25	1	
VALID CASES	354	5124	4	60	104	103	83	192	1	3	1	4	37	27	215	117	313	22	287	67
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q17 YES	33 15%	403 11%	~	11%~	21%	10%	17%	15 13%	~	~	~100%~	2 22%~	5 19%~	4 16%	20 14%	11 13%~	26 33%~	5 11%*	18 28%*
NO	186 85%	3143 89%	~	89%~	79%	90%	83%	104 87%	3 ~100%~	~	~	18 78%~	17 81%~	109 84%	67 86%	167 87%~	10 67%~	148 89%*	38 72%*
NOT ANSWERED	12	226	2	5	2	3	6				1			7	3	10	1	10	2
VALID CASES	219	3545	9	68	83	59	119	3			2	23	21	129	78	193	15	166	53
NUMBER OF RESPONDENTS	231 100%	3771 100%	11 100%	73 100%	85 100%	62 100%	125 100%	3 100%			2 100%	24 100%	21 100%	136 100%	81 100%	203 100%	16 100%	176 100%	55 100%

[ASKED IF Q16 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q18 #YES	29 94%	349 94%~	~100%~	1 92%~	12 88%~	7 100%~	9 100%~	15 100%~	~	~	~	2 ~100%~	4 80%~	1 50%~	18 90%~	9 100%~	23 92%~	4 100%~	16 89%~	13 100%~
NO	2 6%	22 6%~	~	~	1 8%~	1 13%~	~	~	~	~	~	1 ~20%~	1 50%~	2 10%~	~	2 8%~	~	2 11%~	~	
NOT ANSWERED	2	7			1		1							2	2	1	1		2	
VALID CASES	31	371		1	13	8	9	15			2	5	2	20	9	25	4	18	13	
NUMBER OF RESPONDENTS	33	378		1	14	8	10	15			2	5	4	20	11	26	5	18	15	
	100%	100%		100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q16 = YES AND Q17 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q19 YES	11 3%	175 3%	~	4 7%	5 5%	1 1%	1 1%	4 2%	~	~	~	~	3 8%	~	8 4%	3 3%	9 3%	2 9%	6 2%	5 8%
NO	343 97%	4948 97%	100%	~ 93%	95%	99%	99%	189 98%	1 100%	3 100%	2 100%	4 100%	35 92%	27 100%	206 96%	116 97%	305 97%	20 91%	282 98%	61 92%
NOT ANSWERED	26	240		6	7	7	6	5						7		7	2	24	2	
VALID CASES	354	5123	4	59	102	105	84	193	1	3	2	4	38	27	214	119	314	22	288	66
NUMBER OF RESPONDENTS	380	5363	4	65	109	112	90	198	1	3	2	4	38	27	221	119	321	24	312	68
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q20 NEVER		23 12%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	1 9%	35 18%	~	~	1 20%	~	1 25%	~	~	~	~	~	~	1 33%	1 11%	~	~	1 20%	~
USUALLY	6 55%	49 25%	~	2 50%	2 40%	1 100%	1 100%	3 75%	~	~	~	~	~	4 50%	2 67%	5 56%	1 50%	3 50%	3 60%
ALWAYS	4 36%	87 45%	~	2 50%	2 40%	~	~	~	~	~	~	3 100%	~	4 50%	~	3 33%	1 50%	3 50%	1 20%
#ALWAYS + USUALLY (NET)	10 91%	135 70%	~	4 100%	4 80%	1 100%	1 100%	3 75%	~	~	~	3 100%	~	8 100%	2 67%	8 89%	2 100%	6 100%	4 80%
TOP BOX SCORE	4 36%	87 45%	~	2 50%	2 40%	~	~	~	~	~	~	3 100%	~	4 50%	~	3 33%	1 50%	3 50%	1 20%
NOT ANSWERED		3																	
VALID CASES	11	193		4	5	1	1	4				3		8	3	9	2	6	5
NUMBER OF RESPONDENTS	11	196		4	5	1	1	4				3		8	3	9	2	6	5
	100%	100%		100%	100%	100%	100%	100%				100%		100%	100%	100%	100%	100%	100%

[ASKED IF Q19 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q21 #YES	11	157		4	5	1	1	4				3		8	3	9	2	6	5
	100%	84%	~	100%	100%	100%	100%	100%	~	~	~	100%	~	100%	100%	100%	100%	100%	100%
NO		31	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		8																	
VALID CASES	11	188		4	5	1	1	4			3		8	3	9	2	6	5	
NUMBER OF RESPONDENTS	11	196		4	5	1	1	4			3		8	3	9	2	6	5	
	100%	100%	100%	100%	100%	100%	100%	100%			100%		100%	100%	100%	100%	100%	100%	

[ASKED IF Q19 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
Q22 YES	27 8%	446 9%	~	12%	9%	5%	7%	13 7%	~	~	~	50%~	2 2	2 4%~	1 8%	17 6%~	8 26%~	19 6%*	6 16%*	11 16%*
NO	327 92%	4656 91%	100%~	88%	91%	95%	93%	180 93%	1 100%	3 ~100%	2 ~100%	2 50%~	36 95%~	25 96%~	197 92%	110 93%	295 94%~	17 74%~	271 94%*	56 84%*
NOT ANSWERED	26	261		7	6	6	7	5					1	7	1	7	1	25	1	
VALID CASES	354	5102	4	58	103	106	83	193	1	3	2	4	38	26	214	118	314	23	287	67
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%



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

			AGE					RACE					ETHNIC-ITY	HEALTH STATUS		CCC SCREENER				
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q23 NEVER	2 8%	62 15%~	1 ~ 14%~	1 ~ 20%~	2 ~ 15%~	~	~	~	~	~	~	~	~	~ 25%~	2 11%~	2 11%~	1 7%~	1 9%~		
SOMETIMES	2 8%	96 24%~	2 ~ 29%~	~	1 ~ 8%~	~	~	~	~	1 ~ 50%~	~	~	~	1 6%~	1 13%~	1 5%~	1 17%~	1 7%~	1 9%~	
USUALLY	11 42%	112 28%~	1 ~ 14%~	4 50%~	2 40%~	4 67%~	2 15%~	~	~	1 ~ 50%~	~	1 ~ 100%~	~	8 47%~	2 25%~	7 37%~	4 67%~	5 33%~	6 55%~	
ALWAYS	11 42%	135 33%~	3 ~ 43%~	4 50%~	2 40%~	2 33%~	8 62%~	~	~	~	~	2 ~ 100%~	~	8 47%~	3 38%~	9 47%~	1 17%~	8 53%~	3 27%~	
#ALWAYS + USUALLY (NET)	22 85%	247 61%~	4 ~ 57%~	8 100%~	4 80%~	6 100%~	10 77%~	~	~	1 ~ 50%~	2 100%~	1 100%~	~	16 94%~	5 63%~	16 84%~	5 83%~	13 87%~	9 82%~	
TOP BOX SCORE	11 42%	135 33%~	3 ~ 43%~	4 50%~	2 40%~	2 33%~	8 62%~	~	~	~	~	2 ~ 100%~	~	8 47%~	3 38%~	9 47%~	1 17%~	8 53%~	3 27%~	
NOT ANSWERED	1	14		1														1		
VALID CASES	26	405	7	8	5	6	13			2	2	1		17	8	19	6	15	11	
NUMBER OF RESPONDENTS	27	419	7	9	5	6	13			2	2	1		17	8	19	6	16	11	
	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%		100%	100%	100%	100%	100%	100%	

[ASKED IF Q22 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER PAC ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q24 #YES	18	260		6	5	2	5	10				2	1	1	11	7	13	4	10	8
	72%	64%	~	86%	63%	40%	100%	77%	~	~	~	100%	50%	100%	65%	88%	72%	67%	71%	73%
NO	7	143		1	3	3		3					1		6	1	5	2	4	3
	28%	36%	~	14%	38%	60%	~	23%	~	~	~	~	50%	~	35%	13%	28%	33%	29%	27%
NOT ANSWERED	2	16			1		1										1			2
VALID CASES	25	403		7	8	5	5	13				2	2	1	17	8	18	6	14	11
NUMBER OF RESPONDENTS	27	419		7	9	5	6	13				2	2	1	17	8	19	6	16	11
	100%	100%		100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q22 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q25 YES	50 14%	666 13%	6 ~ 10%	6 6%*	20 19%	18 21%	29 15%	1 ~ 33%~	3 ~ 75%~	4 11%~	6 22%~	28 13%	22 19%	40 13%~	9 39%~	13 5%*	37 54%*			
NO	304 86%	4441 87%	4 100%~	52 90%	96 94%*	86 81%	66 79%	166 85%	1 100%~	2 67%~	2 100%~	1 25%~	34 89%~	21 78%~	189 87%	96 81%	275 87%~	14 61%~	273 95%*	31 46%*
NOT ANSWERED	26	256	7	7	6	6	3							4	1	6	1	26		
VALID CASES	354	5107	4	58	102	106	84	195	1	3	2	4	38	27	217	118	315	23	286	68
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC
Q26 NEVER	4 8%	92 14%	2 ~ 33%	2 ~ 10%	2 ~ 7%	2 ~ 7%	2 ~ 7%	~	~	~	~	1 ~ 25%	~	3 ~ 11%	1 ~ 5%	3 ~ 8%	1 ~ 11%	~	4 ~ 11%
SOMETIMES	8 17%	116 18%	2 ~ 33%	4 ~ 20%	2 13%	5 19%	5 19%	1 ~ 100%	~	1 ~ 33%	1 ~ 17%	1 ~ 17%	1 ~ 17%	4 15%	4 19%	5 13%	3 33%	5 45%	3 8%
USUALLY	16 33%	171 27%	1 ~ 17%	4 67%	5 25%	6 38%	8 30%	~	~	2 ~ 67%	2 50%	2 33%	2 33%	10 37%	6 29%	12 31%	4 44%	3 27%	13 35%
ALWAYS	20 42%	258 41%	1 ~ 17%	2 33%	9 45%	8 50%	12 44%	~	~	~	1 ~ 25%	3 50%	3 50%	10 37%	10 48%	19 49%	1 11%	3 27%	17 46%
#ALWAYS + USUALLY (NET)	36 75%	429 67%	2 ~ 33%	6 100%	14 70%	14 88%	20 74%	~	~	2 ~ 67%	3 75%	5 83%	5 83%	20 74%	16 76%	31 79%	5 56%	6 55%	30 81%
TOP BOX SCORE	20 42%	258 41%	1 ~ 17%	2 33%	9 45%	8 50%	12 44%	~	~	~	1 ~ 25%	3 50%	3 50%	10 37%	10 48%	19 49%	1 11%	3 27%	17 46%
NOT ANSWERED	2	17			2	2	2							1	1	1		2	
VALID CASES	48	636	6	6	20	16	27	1		3	4	6	6	27	21	39	9	11	37
NUMBER OF RESPONDENTS	50	653	6	6	20	18	29	1		3	4	6	6	28	22	40	9	13	37
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC
Q27 #YES	29 59%	311 49%~	4 ~ 67%~	4 67%~	9 45%~	12 71%~	17 61%~	~	~	3 ~100%~	2 50%~	3 50%~	17 61%~	12 57%~	22 56%~	6 67%~	6 50%~	23 62%~
NO	20 41%	326 51%~	2 ~ 33%~	2 33%~	11 55%~	5 29%~	11 39%~	1 ~100%~	~	2 ~ 50%~	3 50%~	11 39%~	9 43%~	17 44%~	3 33%~	6 50%~	14 38%~	
NOT ANSWERED	1	17				1	1						1	1			1	
VALID CASES	49	636	6	6	20	17	28	1	3	4	6	28	21	39	9	12	37	
NUMBER OF RESPONDENTS	50 100%	653 100%	6 100%	6 100%	20 100%	18 100%	29 100%	1 100%	3 100%	4 100%	6 100%	28 100%	22 100%	40 100%	9 100%	13 100%	37 100%	

[ASKED IF Q25 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q28 YES	72 20%	978 19%	1 25%	16 28%	21 21%	19 18%	15 18%	37 19%		1 ~ 33%		3 ~ 75%	8 21%	5 19%	35 16%*	33 28%*	60 19%	8 35%	44 15%*	28 41%*
Q28 NO	281 80%	4103 81%	3 75%	41 72%	80 79%	89 82%	68 82%	158 81%	1 100%	2 67%	2 100%	1 25%	30 79%	21 81%	180 84%*	86 72%*	254 81%	15 65%	241 85%*	40 59%*
Q28 NOT ANSWERED	27	281		8	8	4	7	3					1	6		7	1	27		
VALID CASES	353	5082	4	57	101	108	83	195	1	3	2	4	38	26	215	119	314	23	285	68
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC
Q29 #YES	39 56%	594 60%	1 100%	8 53%	14 67%	9 47%	7 50%	22 61%	1 ~100%	2 ~67%	3 38%	2 40%	17 52%	20 61%	35 58%	3 43%	23 53%	16 59%
NO	31 44%	403 40%		7 ~47%	7 33%	10 53%	7 50%	14 39%	~	1 ~33%	5 63%	3 60%	16 48%	13 39%	25 42%	4 57%	20 47%	11 41%
NOT ANSWERED	2	32		1		1	1						2		1	1	1	
VALID CASES	70	998	1	15	21	19	14	36	1	3	8	5	33	33	60	7	43	27
NUMBER OF RESPONDENTS	72 100%	1030 100%	1 100%	16 100%	21 100%	19 100%	15 100%	37 100%	1 100%	3 100%	8 100%	5 100%	35 100%	33 100%	60 100%	8 100%	44 100%	28 100%

[ASKED IF Q28 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q30 YES	312 88%	4410 88%	3 75%~	51 89%	94 91%	91 85%	73 88%	181 92%*	3 ~100%~	4 ~100%~	31 84%~	24 89%~	185 86%	110 92%	276 87%~	21 95%~	251 87%	61 91%		
NO	42 12%	622 12%	1 25%~	6 11%	9 9%	16 15%	10 12%	16 8%*	1 100%~	2 ~100%~	6 ~16%~	3 11%~	30 14%	9 8%	40 13%~	1 5%~	36 13%	6 9%		
NOT ANSWERED	26	331		8	6	5	7	1			1		6		5	2	25	1		
VALID CASES	354	5032	4	57	103	107	83	197	1	3	2	4	37	27	215	119	316	22	287	67
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%



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

	WVCH TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q31 NONE	78 27%	1163 27%		5 ~ 11%	20 ~ 22%	34 38%*	19 29%	43 25%					11 ~ 35%	8 ~ 36%	52 30%	24 23%	73 28%	2 10%	65 28%	13 22%
1 TIME	97 33%	1470 34%		19 ~ 42%	35 ~ 39%	29 33%	14 22%*	51 30%		1 ~ 33%		1 ~ 25%	11 35%	9 41%	57 33%	35 34%	88 34%	4 20%	81 35%	16 27%
2	62 21%	817 19%	3 100%	11 ~ 24%	18 ~ 20%	16 18%	14 22%	44 26%*		1 ~ 33%		2 ~ 50%	4 13%	3 14%	36 21%	23 22%	56 22%	4 20%	47 20%	15 25%
3	23 8%	450 11%		3 ~ 7%	10 ~ 11%	5 6%	5 8%	13 8%				1 ~ 25%	2 6%		11 6%	9 9%	18 7%	3 15%	19 8%	4 7%
4	17 6%	180 4%		4 ~ 9%	5 ~ 6%	3 3%	5 8%	10 6%		1 ~ 33%			3 ~ 10%		9 5%	8 8%	14 5%	3 15%	9 4%*	8 13%*
5 TO 9	13 4%	146 3%		3 ~ 7%	2 ~ 2%	1 1%*	7 11%*	9 5%							2 9%	5 5%	9 3%	3 15%	10 4%	3 5%
10 OR MORE TIMES	2 0.7%	40 0.9%				1 ~ 1%	1 2%									2 1%	1 ~ 0.4%	1 5%	1 ~ 0.4%	1 2%
NOT ANSWERED	20	203		6	4	2	8	11						2	10	6	17	1	19	1
VALID CASES	292	4266	3	45	90	89	65	170		3		4	31	22	175	104	259	20	232	60
NUMBER OF RESPONDENTS	312	4469	3	51	94	91	73	181		3		4	31	24	185	110	276	21	251	61
	100%	100%	100%	100%	100%	100%	100%	100%		100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q31A ALWAYS	6 3%	82 3%	~	1 3%	3 4%	~	2 5%	3 2%	~	~	~	1 25%	1 8%	6 5%*	~	3 2%	2 11%	4 2%	2 4%	
USUALLY	2 1%	49 2%	~	~	1 1%	~	1 2%	~	~	~	~	~	1 8%	2 2%	~	2 1%	~	2 1%	~	
SOMETIMES	24 12%	229 8%*	1 33%	5 13%	5 7%	6 11%	7 16%	14 11%	~	~	~	1 25%	2 10%	1 8%	21 18%*	2 3%*	18 10%	5 28%	20 12%	4 9%
NEVER	176 85%	2671 88%	2 67%	34 85%	59 87%	47 89%	34 77%	107 86%	3 ~100%	~	~	2 50%	18 90%	10 77%	89 75%*	78 98%*	159 87%	11 61%	136 84%	40 87%
#NEVER + SOMETIMES (NET)	200 96%	2900 96%	3 100%	39 98%	64 94%	53 100%	41 93%	121 98%	3 ~100%	~	~	3 75%	20 100%	11 85%	110 93%*	80 100%	177 97%	16 89%	156 96%	44 96%
TOP BOX SCORE	176 85%	2671 88%	2 67%	34 85%	59 87%	47 89%	34 77%	107 86%	3 ~100%	~	~	2 50%	18 90%	10 77%	89 75%*	78 98%*	159 87%	11 61%	136 84%	40 87%
NOT ANSWERED	6	30			2	2	2	3					1	5		4		5	1	
VALID CASES	208	3030	3	40	68	53	44	124	3		4	20	13	118	80	182	18	162	46	
NUMBER OF RESPONDENTS	214 100%	3060 100%	3 100%	40 100%	70 100%	55 100%	46 100%	127 100%	3 100%		4 100%	20 100%	14 100%	123 100%	80 100%	186 100%	18 100%	167 100%	47 100%	

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q32 NEVER	9 4%	80 3%		2 5%	4 6%	1 2%	2 4%	6 5%	~	~	~	~	~	6 5%	2 3%	8 4%		9 6%	~
SOMETIMES	8 4%	145 5%		2 5%		3 6%	3 7%	5 4%	~	~	1 25%		1 8%	5 4%	2 3%	4 2%	3 17%	5 3%	3 6%
USUALLY	48 23%	478 16%*	2 67%	6 15%	13 19%	8 15%	19 42%	22 18%*	~	~	2 50%	4 20%	3 23%	33 28%	13 16%	42 23%	4 22%	34 21%	14 30%
ALWAYS	144 69%	2312 77%*	1 33%	30 75%	51 75%	41 77%	21 47%	90 73%	3 ~100%		1 25%	16 80%	9 69%	75 63%*	62 78%*	128 70%	11 61%	114 70%	30 64%
#ALWAYS + USUALLY (NET)	192 92%	2790 93%	3 100%	36 90%	64 94%	49 92%	40 89%	112 91%	3 ~100%		3 75%	20 100%	12 92%	108 91%	75 95%	170 93%	15 83%	148 91%	44 94%
TOP BOX SCORE	144 69%	2312 77%*	1 33%	30 75%	51 75%	41 77%	21 47%	90 73%	3 ~100%		1 25%	16 80%	9 69%	75 63%*	62 78%*	128 70%	11 61%	114 70%	30 64%
NOT ANSWERED	5	44			2	2	1	4					1	4	1	4		5	
VALID CASES	209	3016	3	40	68	53	45	123	3		4	20	13	119	79	182	18	162	47
NUMBER OF RESPONDENTS	214	3060	3	40	70	55	46	127	3		4	20	14	123	80	186	18	167	47
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	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	GOOD & POOR	NO CCC	CCC
Q33 NEVER	2 1%	40 1%	~	1 3%	~	1 2%	~	2 2%	~	~	~	~	~	~	0.8%	1%	1%~	~	1%~	~
SOMETIMES	11 5%	145 5%	~	2 5%	2 3%	2 4%	5 11%	6 5%	~	~	~	~	1 5%	~	6 5%	5 6%	10 5%	1 6%	8 5%	3 6%
USUALLY	33 16%	494 16%	2 67%	3 8%	16 24%	6 11%	6 14%	20 16%	~	~	~	~	3 15%	1 8%	22 19%	8 10%	29 16%	2 11%	29 18%	4 9%
ALWAYS	162 78%	2341 77%	1 33%	33 85%	50 74%	45 83%	33 75%	95 77%	3 ~100%	~	4 ~100%	16 80%	12 92%	89 75%	66 82%	141 77%	15 83%	122 76%	40 85%	
#ALWAYS + USUALLY (NET)	195 94%	2835 94%	3 100%	36 92%	66 97%	51 94%	39 89%	115 93%	3 ~100%	~	4 ~100%	19 95%	13 100%	111 94%	74 92%	170 93%	17 94%	151 94%	44 94%	
TOP BOX SCORE	162 78%	2341 77%	1 33%	33 85%	50 74%	45 83%	33 75%	95 77%	3 ~100%	~	4 ~100%	16 80%	12 92%	89 75%	66 82%	141 77%	15 83%	122 76%	40 85%	
NOT ANSWERED	6	39		1	2	1	2	4					1	5		4		6		
VALID CASES	208	3021	3	39	68	54	44	123	3		4	20	13	118	80	182	18	161	47	
NUMBER OF RESPONDENTS	214 100%	3060 100%	3 100%	40 100%	70 100%	55 100%	46 100%	127 100%	3 100%		4 100%	20 100%	14 100%	123 100%	80 100%	186 100%	18 100%	167 100%	47 100%	

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

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q34 NEVER	3	28		1		2		2							2	2	2		3	
	1%	0.9%	~	3%~	~	4%	~	2%	~	~	~	~	~	~	3%	1%~	~	2%~	~	~
SOMETIMES	7	114		1	2	1	3	5					1	3	4	6	1	5	2	
	3%	4%	~	3%~	3%	2%	7%~	4%	~	~	~	~	8%~	2%	5%	3%~	6%~	3%~	4%~	~
USUALLY	24	407	1	4	8	5	6	16				3	1	14	9	21	2	17	7	
	11%	14%	33%~	10%~	12%	9%	13%~	13%	~	~	~	15%~	8%~	12%	11%	11%~	11%~	10%~	15%~	~
ALWAYS	175	2460	2	33	58	46	36	102		3		4	17	11	103	65	154	15	137	38
	84%	82%	67%~	85%~	85%	85%	80%~	82%	~100%~	~100%~	~100%~	85%~	85%~	86%	81%	84%~	83%~	85%~	81%~	~
#ALWAYS + USUALLY (NET)	199	2867	3	37	66	51	42	118		3		4	20	12	117	74	175	17	154	45
	95%	95%	100%~	95%~	97%	94%	93%~	94%	~100%~	~100%~	~100%~	100%~	92%~	98%	92%	96%~	94%~	95%~	96%~	~
TOP BOX SCORE	175	2460	2	33	58	46	36	102		3		4	17	11	103	65	154	15	137	38
	84%	82%	67%~	85%~	85%	85%	80%~	82%	~100%~	~100%~	~100%~	85%~	85%~	86%	81%	84%~	83%~	85%~	81%~	~
NOT ANSWERED	5	51		1	2	1	1	2						1	3	3		5		
VALID CASES	209	3009	3	39	68	54	45	125		3		4	20	13	120	80	183	18	162	47
NUMBER OF RESPONDENTS	214	3060	3	40	70	55	46	127		3		4	20	14	123	80	186	18	167	47
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER PAC ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q35 YES	138 68%	2050 69%		4 ~ 11%	44 ~ 66%	47 90%*	43 96%~	85 69%		3 ~100%~		1 ~ 25%~	14 74%~	10 77%~	75 64%	56 71%	120 67%~	12 71%~	104 66%~	34 74%~
NO	66 32%	942 31%	3 100%~	33 89%~	23 34%	5 10%*	2 4%~	39 31%				3 ~ 75%~	5 26%~	3 23%~	42 36%	23 29%	60 33%~	5 29%~	54 34%~	12 26%~
NOT ANSWERED	10	67		3	3	3	1	3					1	1	6	1	6	1	9	1
VALID CASES	204	2993	3	37	67	52	45	124		3		4	19	13	117	79	180	17	158	46
NUMBER OF RESPONDENTS	214 100%	3060 100%	3 100%	40 100%	70 100%	55 100%	46 100%	127 100%		3 100%		4 100%	20 100%	14 100%	123 100%	80 100%	186 100%	18 100%	167 100%	47 100%

[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?

	WVCH TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
			<1	1-3	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC
Q36 NEVER	13	119	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	10%	6%	~ 25%	~ 7%	~ 7%	~ 14%	~ 8%	~ 33%	~	~	~ 7%	~ 10%	~ 5%	~ 15%	~ 8%	~ 17%	~ 9%	~ 12%
USUALLY	24%	23%	~ 50%	~ 30%	~ 20%	~ 19%	~ 25%	~ 33%	~ 100%	~ 21%	~ 20%	~ 23%	~ 25%	~ 25%	~ 17%	~ 25%	~ 21%	
ALWAYS	67%	70%	~ 25%	~ 64%	~ 73%	~ 67%	~ 67%	~ 33%	~	~ 71%	~ 70%	~ 72%	~ 60%	~ 67%	~ 67%	~ 67%	~ 68%	
#ALWAYS + USUALLY (NET)	90%	93%	~ 75%	~ 93%	~ 93%	~ 86%	~ 92%	~ 67%	~ 100%	~ 93%	~ 90%	~ 95%	~ 85%	~ 92%	~ 83%	~ 91%	~ 88%	
TOP BOX SCORE	67%	70%	~ 25%	~ 64%	~ 73%	~ 67%	~ 67%	~ 33%	~	~ 71%	~ 70%	~ 72%	~ 60%	~ 67%	~ 67%	~ 67%	~ 68%	
NOT ANSWERED	2	36			2		1					1	1	2		2		
VALID CASES	136	2013	4	44	45	43	84	3	1	14	10	74	55	118	12	102	34	
NUMBER OF RESPONDENTS	138	2049	4	44	47	43	85	3	1	14	10	75	56	120	12	104	34	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q37 NEVER	9 4%	89 3%	~	2 5%~	1 1%	5 9%	1 2%~	6 5%	~	~	~	~	1 5%~	~	5 4%	4 5%	9 5%~	~	7 4%~	2 4%~
SOMETIMES	28 13%	318 11%	~	7 18%~	8 12%	7 13%	6 13%~	12 10%	~	1 33%~	~	2 50%~	2 10%~	1 8%~	18 15%	7 9%	20 11%~	6 33%~	22 14%~	6 13%~
USUALLY	49 24%	708 24%	67%~	2 26%~	10 33%*	23 33%*	6 11%*	8 18%~	~	~	~	1 25%~	5 25%~	2 15%~	36 30%*	12 15%*	44 24%~	4 22%~	42 26%~	7 15%~
ALWAYS	122 59%	1876 63%	33%~	1 50%~	19 54%	37 54%	35 66%	30 67%~	~	2 67%~	~	1 25%~	12 60%~	10 77%~	61 51%*	57 71%*	110 60%~	8 44%~	90 56%~	32 68%~
#ALWAYS + USUALLY (NET)	171 82%	2584 86%	100%~	3 76%~	29 87%	60 87%	41 77%	38 84%~	~	2 67%~	~	2 50%~	17 85%~	12 92%~	97 81%	69 86%	154 84%~	12 67%~	132 82%~	39 83%~
TOP BOX SCORE	122 59%	1876 63%	33%~	1 50%~	19 54%	37 54%	35 66%	30 67%~	~	2 67%~	~	1 25%~	12 60%~	10 77%~	61 51%*	57 71%*	110 60%~	8 44%~	90 56%~	32 68%~
NOT ANSWERED	6	70		2	1	2	1	2						1	3		3		6	
VALID CASES	208	2990	3	38	69	53	45	125	3			4	20	13	120	80	183	18	161	47
NUMBER OF RESPONDENTS	214	3060	3	40	70	55	46	127	3			4	20	14	123	80	186	18	167	47
	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

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



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q38 #YES	182 88%	2520 84%	2 67%	35 90%	62 91%	44 83%	39 87%	112 90%	3 ~100%	4 ~100%	16 80%	9 69%	111 93%*	66 82%	162 89%	15 83%	139 86%	43 91%
NO	26 12%	484 16%	1 33%	4 10%	6 9%	9 17%	6 13%	13 10%	~	~	4 ~20%	4 31%	9 7%*	14 18%	21 11%	3 17%	22 14%	4 9%
NOT ANSWERED	6	56		1	2	2	1	2				1	3		3		6	
VALID CASES	208	3004	3	39	68	53	45	125	3	4	20	13	120	80	183	18	161	47
NUMBER OF RESPONDENTS	214 100%	3060 100%	3 100%	40 100%	70 100%	55 100%	46 100%	127 100%	3 100%	4 100%	20 100%	14 100%	123 100%	80 100%	186 100%	18 100%	167 100%	47 100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
Q39 YES	75 37%	1156 39%		11 ~ 29%~	28 42%	16 31%	20 44%~	43 34%				2 ~ 50%~	9 47%~	6 46%~	41 35%	33 41%	64 35%~	9 53%~	50 32%~	25 54%~
NO	129 63%	1846 61%	3 100%~	27 71%~	38 58%	36 69%	25 56%~	82 66%	3 ~100%~		2 ~ 50%~	10 53%~	7 54%~	76 65%	47 59%	117 65%~	8 47%~	108 68%~	21 46%~	
NOT ANSWERED	10	59		2	4	3	1	2				1	1	6		5	1	9	1	
VALID CASES	204	3001	3	38	66	52	45	125	3		4	19	13	117	80	181	17	158	46	
NUMBER OF RESPONDENTS	214 100%	3060 100%	3 100%	40 100%	70 100%	55 100%	46 100%	127 100%	3 100%		4 100%	20 100%	14 100%	123 100%	80 100%	186 100%	18 100%	167 100%	47 100%	

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q40 NEVER	1 1%	80 7%	~	9%~	~	~	2%~	~	~	~	~	~	~	3%~	1 2%~	~	1 2%~	~		
SOMETIMES	9 13%	163 14%	~	9%~	7%~	13%~	25%~	10%~	~	~	~	11%~	~	16%~	6 13%~	3 11%~	8 15%~	1 9%~	7 2	
USUALLY	17 24%	320 28%	~	27%~	7%~	26%~	25%~	19%~	~	~	50%~	22%~	25%~	21%~	8 27%~	9 29%~	16 27%~	1 11%~	11 23%~	6 26%~
ALWAYS	43 61%	595 51%	~	55%~	18%~	67%~	63%~	56%~	~	~	50%~	67%~	75%~	63%~	24 58%~	18 58%~	35 58%~	7 78%~	28 60%~	15 65%~
#ALWAYS + USUALLY (NET)	60 86%	915 79%	~	82%~	25%~	93%~	88%~	75%~	~	~	100%~	89%~	100%~	84%~	32 85%~	27 87%~	51 85%~	8 89%~	39 83%~	21 91%~
TOP BOX SCORE	43 61%	595 51%	~	55%~	18%~	67%~	63%~	56%~	~	~	50%~	67%~	75%~	63%~	24 58%~	18 58%~	35 58%~	7 78%~	28 60%~	15 65%~
NOT ANSWERED	5	33			1		4	2					2	3	2	4		3	2	
VALID CASES	70	1158		11	27	16	16	41			2	9	4	38	31	60	9	47	23	
NUMBER OF RESPONDENTS	75	1191		11	28	16	20	43			2	9	6	41	33	64	9	50	25	
	100%	100%		100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q41 WORST PERSONAL DOCTOR POSSIBLE	1	9	~	~	1	~	1	~	~	~	~	~	1	1	1	~	1	~	
	0.3%	0.2%			1%		0.6%						1%	0.4%	~	~	0.4%	~	
01	1	6	~	1	~	~	1	~	~	~	~	~	1	1	~	~	1	~	
	0.3%	0.1%		2%	~	~	0.6%						1%	0.4%	~	~	0.4%	~	
02	2	7	~	1	~	1	1	~	~	1	~	1	1	1	1	5	1	2	
	0.7%	0.2%		2%	~	1%	0.6%			25%	~	0.6%	1%	0.4%	~	5%	0.8%	~	
03	1	14	~	1	~	~	1	~	~	~	~	~	1	1	~	~	1	~	
	0.3%	0.3%		2%	~	~	0.6%						1%	0.4%	~	~	0.4%	~	
04	2	45	~	~	~	~	2	~	~	~	1	~	2	2	~	~	2	~	
	0.7%	1%					3%				3%		1%	0.8%	~	~	0.8%	~	
05	4	127	~	~	2	2	2	~	~	~	~	1	4	4	~	~	4	~	
	1%	3%*			2%	2%	1%					4%	2%*	2%	~	~	2%*	~	
06	8	112	~	1	2	2	3	5	~	~	~	1	3	5	6	1	7	1	
	3%	3%		2%	2%	2%	4%	3%	~	~	~	3%	2%	5%	2%	5%	3%	2%	
07	18	293	~	2	4	8	4	14	~	~	~	2	9	7	17	~	11	7	
	6%	7%		4%	4%	9%	6%	8%	~	~	~	6%	5%	7%	6%	~	5%	12%	
08	41	690	33%	9	12	9	10	20	~	~	~	3	5	22	16	35	3	34	7
	14%	16%		19%	13%	10%	15%	12%	~	~	~	10%	21%	12%	15%	13%	15%	14%	12%
09	65	810	~	9	22	19	15	41	~	1	2	7	4	38	25	59	5	50	15
	22%	19%		19%	24%	22%	22%	24%	~	33%	~	50%	23%	17%	21%	22%	25%	21%	25%
BEST PERSONAL DOCTOR POSSIBLE	153	2128	67%	23	49	46	33	86	~	2	1	17	14	101	48	139	10	123	30
	52%	50%		49%	53%	53%	49%	50%	~	67%	~	25%	55%	58%	56%	52%	50%	52%	50%
#8-10 (NET)	259	3628	100%	3	41	83	74	58	~	3	3	27	23	161	89	233	18	207	52
	88%	86%		87%	90%	85%	87%	85%	~	100%	~	75%	87%	96%	89%	88%	90%	88%	87%

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC
9-10 (NET)	218 74%	2937 69%	2 67%~	32 68%~	71 77%	65 75%	48 72%	127 74%	3 ~100%~	3 ~ 75%~	24 77%~	18 75%~	139 77%	73 70%	198 74%~	15 75%~	173 73%	45 75%
NOT ANSWERED	16	228	4	2	4	6	9					5	5	10	1	15	1	
VALID CASES	296	4241	3	47	92	87	67	172	3	4	31	24	180	105	266	20	236	60
NUMBER OF RESPONDENTS	312 100%	4469 100%	3 100%	51 100%	94 100%	91 100%	73 100%	181 100%	3 100%	4 100%	31 100%	24 100%	185 100%	110 100%	276 100%	21 100%	251 100%	61 100%
MEAN	8.96	8.89	9.33	8.70	9.07	9.00	8.94	8.91	9.67	7.50	9.06	9.21	9.11	8.74	8.98	8.85	8.93	9.10
p stat_(*=Sig @ p<=.05)		.348	~	~.443	.786	.887	.511	~	~	~	~	~	.066	.102	~	~	.341	.342

[ASKED IF Q30 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER PAC ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q42 YES	53 18%	1024 24%*	~	4 9%~	11 12%	19 22%	19 28%*	37 21%	1 ~ 33%~		2 ~ 50%~	2 7%~	7 29%~	19 11%*	34 32%*	43 16%~	9 43%~	15 6%*	38 62%*
NO	243 82%	3250 76%*	100%~	3 91%~	43 88%	80 78%	69 72%*	48 79%	137 ~ 67%~	2 ~ 50%~	2 ~ 50%~	28 93%~	17 71%~	160 89%*	72 68%*	222 84%~	12 57%~	220 94%*	23 38%*
NOT ANSWERED	16	195		4	3	3	6	7				1		6	4	11		16	
VALID CASES	296	4274	3	47	91	88	67	174	3		4	30	24	179	106	265	21	235	61
NUMBER OF RESPONDENTS	312 100%	4469 100%	3 100%	51 100%	94 100%	91 100%	73 100%	181 100%	3 100%		4 100%	31 100%	24 100%	185 100%	110 100%	276 100%	21 100%	251 100%	61 100%

[ASKED IF Q30 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
Q43 #YES	47 94%	896 89%	3 ~ 75%	11 ~ 100%	16 ~ 89%	17 ~ 100%	33 92%		1 ~ 100%		2 ~ 100%	2 ~ 100%	6 ~ 100%	17 100%	30 91%	40 95%	7 88%	12 92%	35 95%
NO	3 6%	110 11%	1 ~ 25%		2 ~ 11%		3 8%							3 ~ 9%	2 5%	1 13%	1 8%	2 5%	
NOT ANSWERED	3	35			1	2	1						1	2	1	1	1	2	1
VALID CASES	50	1006	4	11	18	17	36	1		2	2	6	17	33	42	8	13	37	
NUMBER OF RESPONDENTS	53 100%	1041 100%	4 100%	11 100%	19 100%	19 100%	37 100%	1 100%		2 100%	2 100%	7 100%	19 100%	34 100%	43 100%	9 100%	15 100%	38 100%	

[ASKED IF Q30 = YES AND Q42 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC
Q44 #YES	45 90%	836 84%	3 ~ 75%	10 91%	16 89%	16 94%	30 86%		1 ~100%		2 ~100%	2 100%	6 100%	18 100%	27 84%	38 90%	7 88%	11 79%	34 94%
NO	5 10%	163 16%	1 ~ 25%	1 9%	2 11%	1 6%	5 14%		~	~	~	~	~	5 ~ 16%	4 10%	1 13%	3 21%	2 6%	
NOT ANSWERED	3	41			1	2	2						1	2	1	1	1	2	
VALID CASES	50	1000	4	11	18	17	35	1		2	2	6	18	32	42	8	14	36	
NUMBER OF RESPONDENTS	53 100%	1041 100%	4 100%	11 100%	19 100%	19 100%	37 100%	1 100%		2 100%	2 100%	7 100%	19 100%	34 100%	43 100%	9 100%	15 100%	38 100%	

[ASKED IF Q30 = YES AND Q42 = YES]



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q45																					
YES	48 14%	774 15%	~	5 9%	19 19%	11 11%	13 16%	26 13%	1 ~ 33%	2 ~ 50%	8 21%	6 22%	25 12%	23 20%*	42 13%~	6 29%~	23 8%*	25 37%*			
NO	300 86%	4257 85%	100%~	4 91%	52 81%	83 89%	92 84%	170 87%	1 100%~	2 67%~	2 100%~	2 50%~	30 79%~	21 78%~	192 88%	94 80%*	275 87%~	15 71%~	258 92%*	42 63%*	
NOT ANSWERED	32	332		8	7	9	8	2						4	2	4	3	31	1		
VALID CASES	348	5031		4	57	102	103	82	196	1	3	2	4	38	27	217	117	317	21	281	67
NUMBER OF RESPONDENTS	380 100%	5363 100%	100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%

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

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC
Q46 NEVER	2 4%	73 10%	~	~	1 6%	1 10%	2 9%	~	~	~	~	~	~	~	2 9%	2 5%	~	~	2 8%
SOMETIMES	4 9%	115 16%	~	1 20%	1 10%	2 17%	3 13%	~	~	~	~	1 13%	~	3 13%	1 5%	3 8%	1 17%	2 10%	2 8%
USUALLY	16 36%	209 28%	~	1 20%	7 39%	4 40%	4 33%	9 39%	~	~	~	2 25%	3 50%	8 35%	8 36%	13 33%	3 50%	7 33%	9 38%
ALWAYS	23 51%	340 46%	~	3 60%	10 56%	4 40%	6 50%	9 39%	1 100%	~	2 100%	5 63%	3 50%	12 52%	11 50%	21 54%	2 33%	12 57%	11 46%
#ALWAYS + USUALLY (NET)	39 87%	549 75%	~	4 80%	17 94%	8 80%	10 83%	18 78%	1 100%	~	2 100%	7 88%	6 100%	20 87%	19 86%	34 87%	5 83%	19 90%	20 83%
TOP BOX SCORE	23 51%	340 46%	~	3 60%	10 56%	4 40%	6 50%	9 39%	1 100%	~	2 100%	5 63%	3 50%	12 52%	11 50%	21 54%	2 33%	12 57%	11 46%
NOT ANSWERED	3	29			1	1	1	3						2	1	3		2	1
VALID CASES	45	737		5	18	10	12	23	1		2	8	6	23	22	39	6	21	24
NUMBER OF RESPONDENTS	48	766		5	19	11	13	26	1		2	8	6	25	23	42	6	23	25
	100%	100%		100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q47 NONE	7	67		1	4	2		4				1	1		5	2	6	1	3	4
	15%	9%	~	20%	21%	18%	~	16%	~	~	~	50%	13%	~	21%	9%	15%	17%	14%	16%
1 SPECIALIST	27	450		4	10	6	7	17		1			5	2	12	15	24	3	16	11
	57%	61%	~	80%	53%	55%	58%	68%	~	100%	~	~	63%	33%	50%	65%	59%	50%	73%	44%
2	7	144			2	3	2	2					1	2	4	3	6	1	2	5
	15%	19%	~	~	11%	27%	17%	8%	~	~	~	~	13%	33%	17%	13%	15%	17%	9%	20%
3	3	48			1		2	2						1	2	1	2	3		3
	6%	6%	~	~	5%	~	17%	8%	~	~	~	~	17%	~	4%	9%	7%	~	~	12%
4		10																		
		1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
5 OR MORE SPECIALISTS	3	23			2		1					1	1	1	2	1	2	1	1	2
	6%	3%	~	~	11%	~	8%	~	~	~	~	50%	13%	17%	8%	4%	5%	17%	5%	8%
NOT ANSWERED	1	25					1	1									1		1	
VALID CASES	47	741		5	19	11	12	25		1		2	8	6	24	23	41	6	22	25
NUMBER OF RESPONDENTS	48	766		5	19	11	13	26		1		2	8	6	25	23	42	6	23	25
	100%	100%		100%	100%	100%	100%	100%		100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

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

	WVCH TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ NATV	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q48 WORST SPECIALIST POSSIBLE		1 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
01		2 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
02		1 0.2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
03	1 3%	8 1%	~	~	~	~	8%	~	~	~	~	14%	~	6%	~	3%	~	6%		
04	1 3%	17 3%	~	1 25%	~	~	~	5%	~	~	~	~	~	~	5%	~	20%	~	5%	
05	1 3%	11 2%	~	~	~	~	8%	5%	~	~	~	~	~	~	5%	3%	~	~	5%	
06	1 3%	29 4%	~	~	~	~	8%	5%	~	~	~	~	~	6%	~	3%	~	~	5%	
07	5 13%	71 11%	~	1 25%	1 7%	1 11%	2 17%	3 15%	~	1 100%	~	~	~	17%	~	5%	4 12%	1 20%	2 11%	3 14%
08	1 3%	106 16%	~	~	~	~	8%	5%	~	~	~	~	~	~	~	5%	1 3%	1 3%	~	1 5%
09	10 26%	148 22%	~	~	7 50%	2 22%	1 8%	3 15%	~	~	~	1 100%	3 43%	2 33%	6 33%	4 19%	9 26%	1 20%	3 17%	7 33%
BEST SPECIALIST POSSIBLE	19 49%	278 41%	~	2 50%	6 43%	6 67%	5 42%	10 50%	~	~	~	~	3 43%	3 50%	10 56%	9 43%	17 50%	2 40%	12 67%	7 33%

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR WHT	AMR IAN	NATV HAW/ ILND	AMR IND/ NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
#8-10 (NET)	30 77%	532 79%	~	2 50%	13 93%	8 89%	7 58%	14 70%	~	~	1 100%	6 86%	5 83%	16 89%	14 67%	27 79%	3 60%	15 83%	15 71%
9-10 (NET)	29 74%	426 63%	~	2 50%	13 93%	8 89%	6 50%	13 65%	~	~	1 100%	6 86%	5 83%	16 89%	13 62%	26 76%	3 60%	15 83%	14 67%
NOT ANSWERED	1	10			1		1						1		1		1		
VALID CASES	39	672		4	14	9	12	20	1	1	7	6	18	21	34	5	18	21	
NUMBER OF RESPONDENTS	40	682		4	15	9	12	21	1	1	7	6	19	21	35	5	19	21	
	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
MEAN	8.74	8.61		7.75	9.29	9.44	7.92	8.55	7.00	9.00	8.57	9.17	9.06	8.48	8.85	8.00	9.11	8.43	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q49 YES	93 27%	1285 26%	1 25%	15 28%	32 32%	29 28%	16 20%	48 24%	3 ~100%	3 ~75%	12 32%	4 15%	61 29%	30 25%	81 26%	11 50%	74 27%	19 28%		
NO	250 73%	3691 74%	3 75%	39 72%	69 68%	73 72%	66 80%	148 76%	1 100%	2 ~100%	1 25%	26 68%	23 85%	151 71%	88 75%	233 74%	11 50%	202 73%	48 72%	
NOT ANSWERED	37	387		11	8	10	8	2						9	1	7	2	36	1	
VALID CASES	343	4976	4	54	101	102	82	196	1	3	2	4	38	27	212	118	314	22	276	67
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%

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?

	WVCH TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER	AS-IAN	NATV ILND	AMER HAW/IND/ ALSK	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC
Q50 NEVER	37	3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	15 17%	235 20%	~	7%~	5 16%~	5 19%~	4 31%~	7 16%~	1 ~	1 33%~	2 ~	1 33%~	7 17%~	8 25%~	12 13%~	3 30%~	13 19%~	2 11%~	
USUALLY	26 30%	343 30%	~	7 50%~	11 35%~	7 26%~	1 8%~	15 33%~	~	~	1 ~	3 25%~	1 25%~	18 32%~	8 27%~	23 31%~	3 30%~	19 28%~	7 37%~
ALWAYS	45 52%	547 47%	100%~	6 43%~	15 48%~	15 56%~	8 62%~	23 51%~	2 ~	~	1 33%~	7 58%~	2 50%~	31 55%~	14 47%~	40 53%~	4 40%~	35 52%~	10 53%~
#ALWAYS + USUALLY (NET)	71 83%	890 77%	100%~	13 93%~	26 84%~	22 81%~	9 69%~	38 84%~	2 ~	~	2 67%~	10 83%~	3 75%~	49 87%~	22 73%~	63 84%~	7 70%~	54 81%~	17 89%~
TOP BOX SCORE	45 52%	547 47%	100%~	6 43%~	15 48%~	15 56%~	8 62%~	23 51%~	2 ~	~	1 33%~	7 58%~	2 50%~	31 55%~	14 47%~	40 53%~	4 40%~	35 52%~	10 53%~
NOT ANSWERED	7	42		1	1	2	3	3						5	6	1	7		
VALID CASES	86	1162	1	14	31	27	13	45	3		3	12	4	56	30	75	10	67	19
NUMBER OF RESPONDENTS	93	1204	100%	15	32	29	16	48	3		3	12	4	61	30	81	11	74	19
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q51 NEVER	2 2%	21 2%	~	~	3%~	4%~	1 2%~	~	~	~	~	1 25%~	~	2 7%~	2 3%~	1 ~	1 1%~	1 5%~		
SOMETIMES	6 7%	81 7%	~	7%~	3%~	4%~	3 7%~	~	~	~	~	~	4 7%~	2 7%~	5 7%~	1 10%~	6 9%~	~		
USUALLY	19 22%	289 25%	~	21%~	8%~	22%~	2 14%~	11 24%~	~	~	~	3 25%~	2 50%~	9 16%~	10 33%~	16 21%~	3 30%~	12 18%~	7 37%~	
ALWAYS	60 69%	768 66%	100%~	71%~	21%~	68%~	19%~	9%~	30%~	3%~	~100%~	3%~	9%~	1%~	43%~	16%~	53%~	6%~	49%~	11%~
#ALWAYS + USUALLY (NET)	79 91%	1057 91%	100%~	93%~	13%~	94%~	25%~	11%~	41%~	3%~	~100%~	3%~	12%~	3%~	52%~	26%~	69%~	9%~	61%~	18%~
TOP BOX SCORE	60 69%	768 66%	100%~	71%~	21%~	68%~	19%~	9%~	30%~	3%~	~100%~	3%~	9%~	1%~	43%~	16%~	53%~	6%~	49%~	11%~
NOT ANSWERED	6	44	1	1	2	2	3							5	5	1	6			
VALID CASES	87	1160	1	14	31	27	14	45	3	3	12	4	56	30	76	10	68	19		
NUMBER OF RESPONDENTS	93	1204	1	15	32	29	16	48	3	3	12	4	61	30	81	11	74	19		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		

[ASKED IF Q49 = YES]



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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC	
Q52 YES	164 48%	1790 36%*	~	27 48%	54 54%	50 49%	33 41%	92 47%	3 ~100%	1 50%	3 75%	17 45%	14 54%	105 49%	54 47%	151 48%	9 41%	131 47%	33 51%	
NO	179 52%	3138 64%*	100%	4 52%	29 46%	46 51%	53 59%	103 53%	1 100%	1 ~ 50%	1 25%	21 55%	12 46%	110 51%	62 53%	161 52%	13 59%	147 53%	32 49%	
NOT ANSWERED	37	435		9	9	9	10	3					1	6	3	9	2	34	3	
VALID CASES	343	4928	4	56	100	103	80	195	1	3	2	4	38	26	215	116	312	22	278	65
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC	
PQ53 NEVER	10 3%	64 1%*	~	~	2% 2%	3% 3%	5% 6%	5% 3%	~	~	~	~	3%~ 8%~	2% 8%~	5% 2%	5% 4%	9% 3%~	1% 5%~	5% 2%	5% 8%
SOMETIMES	26 8%	317 6%	~	6% 3%	8% 8%	12% 12%	4% 4%	14% 7%	~	~	~	~	11%~ 15%~	4% 15%~	20% 3%*	4% 3%*	24% 8%~	2% 10%~	23% 9%	3% 5%
USUALLY	63 19%	629 13%*	~	19% 10%	28% 29%*	17% 17%	8% 10%*	32% 17%	~	2% 67%~	~	1% 25%~	7% 18%~	6% 23%~	38% 18%	24% 21%	60% 20%~	2% 10%~	49% 18%	14% 22%
ALWAYS	234 70%	3884 79%*	4% 100%~	39% 75%	60% 61%*	68% 68%	63% 80%*	137% 73%	1% 100%~	1% 33%~	2% 100%~	3% 75%~	26% 68%~	14% 54%~	144% 70%	82% 71%	211% 69%~	16% 76%~	193% 71%	41% 65%
#ALWAYS + USUALLY (NET)	297 89%	4513 92%*	4% 100%~	49% 94%	88% 90%	85% 85%	71% 90%	169% 90%	1% 100%~	3% 100%~	2% 100%~	4% 100%~	33% 87%~	20% 77%~	182% 88%	106% 92%	271% 89%~	18% 86%~	242% 90%	55% 87%
TOP BOX SCORE	234 70%	3884 79%*	4% 100%~	39% 75%	60% 61%*	68% 68%	63% 80%*	137% 73%	1% 100%~	1% 33%~	2% 100%~	3% 75%~	26% 68%~	14% 54%~	144% 70%	82% 71%	211% 69%~	16% 76%~	193% 71%	41% 65%
NOT ANSWERED	10	91		4	2	3	1	7							8	1	8	1	8	2
VALID CASES	333	4894	4	52	98	100	79	188	1	3	2	4	38	26	207	115	304	21	270	63
NUMBER OF RESPONDENTS	343 100%	4985 100%	4 100%	56 100%	100 100%	103 100%	80 100%	195 100%	1 100%	3 100%	2 100%	4 100%	38 100%	26 100%	215 100%	116 100%	312 100%	22 100%	278 100%	65 100%

[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?

	WVCH TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q54 WORST HEALTH PLAN POSSIBLE		24 0.5%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
01	1 0.3%	11 0.2%	~	1 2%	~	~	1 0.5%	~	~	~	~	~	1 0.9%	1 0.3%	~	1 0.4%	~			
02	4 1%	31 0.6%	~	1 2%	1 1%	1 1%	2 1%	~	~	1 25%	~	~	2 0.9%	2 2%	2 0.6%	2 9%	4 1%*	~		
03	1 0.3%	38 0.8%	~	~	~	1 1%	1 0.5%	~	~	~	~	~	1 0.9%	1 0.3%	~	~	1 1%			
04	3 0.9%	60 1%	~	1 2%	1 1%	1 1%	3 2%	~	~	~	~	~	3 3%	2 0.6%	1 4%	2 0.7%	1 1%			
05	12 3%	233 5%	~	3 5%	2 2%	5 5%	2 2%	6 3%	~	~	~	~	2 7%	4 2%	6 5%	10 3%	9 3%	3 4%		
06	16 5%	215 4%	~	2 4%	2 2%	5 5%	7 9%	11 6%	~	~	~	~	3 8%	2 7%	6 3%	10 9%*	15 5%	1 4%	10 4%	6 9%
07	19 6%	490 10%*	~	4 7%	7 7%	2 2%*	6 7%	13 7%	~	2 67%	~	~	2 5%	1 4%	4 2%*	14 12%*	18 6%	1 4%	15 5%	4 6%
08	60 17%	940 19%	3 75%	10 18%	15 15%	14 13%	18 22%	43 22%*	~	~	~	~	6 16%	4 15%	37 17%	21 18%	53 17%	4 17%	48 17%	12 18%
09	57 17%	878 18%	~	6 11%	21 21%	21 20%	9 11%	35 18%	~	1 50%	1 25%	6 16%	2 7%	35 16%	20 17%	56 18%	1 4%	42 15%	15 22%	
BEST HEALTH PLAN POSSIBLE	170 50%	2014 41%*	1 25%	27 49%	49 50%	56 53%	37 46%	78 40%*	1 100%	1 33%	1 50%	2 50%	21 55%	16 59%	128 59%*	39 33%*	155 50%	13 57%	145 53%*	25 37%*
#8-10 (NET)	287 84%	3832 78%*	4 100%	43 78%	85 87%	91 87%	64 79%	156 81%	1 100%	1 33%	2 100%	3 75%	33 87%	22 81%	200 93%*	80 68%*	264 84%	18 78%	235 85%	52 78%

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
9-10 (NET)	227 66%	2892 59%*	1 25%~	33 60%	70 71%	77 73%	46 57%*	113 59%*	1 100%~	1 33%~	2 100%~	3 75%~	27 71%~	18 67%~	163 75%*	59 50%*	211 67%~	14 61%~	187 68%	40 60%
NOT ANSWERED	37	430		10	11	7	9	5						5	2	8	1	36	1	
VALID CASES	343	4933	4	55	98	105	81	193	1	3	2	4	38	27	216	117	313	23	276	67
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%
MEAN	8.76	8.49	8.50	8.47	8.94	8.91	8.57	8.53	10.0	8.00	9.50	7.75	9.05	8.85	9.16	8.09	8.82	8.35	8.84	8.46
p stat_(*=Sig @ p<=.05)		.002*	~.253	.196	.278	.246	.003*	~	~	~	~	~	~	~.000*	.000*	~	~	~.112	.113	

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC	
Q55 YES	130 38%	2010 40%	1 25%	23 40%	38 38%	34 33%	34 43%	78 40%	1 ~	4 ~	15 100%	8 30%	78 36%	50 42%	115 36%	13 62%	83 30%*	47 71%*		
NO	213 62%	2973 60%	3 75%	34 60%	61 62%	69 67%	46 58%	117 60%	1 100%	2 67%	2 100%	23 ~	19 61%	136 70%	68 70%	201 64%	8 38%	194 70%*	19 29%*	
NOT ANSWERED	37	380		8	10	9	10	3					7	1	5	3	35	2		
VALID CASES	343	4983	4	57	99	103	80	195	1	3	2	4	38	27	214	118	316	21	277	66
NUMBER OF RESPONDENTS	380	5363	4	65	109	112	90	198	1	3	2	4	38	27	221	119	321	24	312	68
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q56 NEVER	1 0.8%	30 1%	~	5%~	~	~	~	~	~	~	~	~	~	~	~	~	1 1%	~		
SOMETIMES	13 10%	187 9%	~	9%~	3%~	15%~	5 16%~	6 8%	~	~	~	1 25%~	1 7%~	2 25%~	7 9%	6 12%~	8 7%~	5 38%~	6 8%~	7 15%~
USUALLY	33 26%	459 23%	~	23%~	11 30%~	8 24%~	9 28%~	22 30%	~	~	~	1 25%~	3 20%~	2 25%~	16 21%	17 35%~	32 29%~	1 8%~	21 27%~	12 26%~
ALWAYS	79 63%	1338 66%	100%~	64%~	25 68%~	21 62%~	18 56%~	46 62%	~100%~	1	~	2 50%~	11 73%~	4 50%~	52 69%	26 53%~	72 64%~	7 54%~	51 65%~	28 60%~
#ALWAYS + USUALLY (NET)	112 89%	1797 89%	100%~	86%~	36 97%~	29 85%~	27 84%~	68 92%	~100%~	1	~	3 75%~	14 93%~	6 75%~	68 91%	43 88%~	104 93%~	8 62%~	72 91%~	40 85%~
TOP BOX SCORE	79 63%	1338 66%	100%~	64%~	25 68%~	21 62%~	18 56%~	46 62%	~100%~	1	~	2 50%~	11 73%~	4 50%~	52 69%	26 53%~	72 64%~	7 54%~	51 65%~	28 60%~
NOT ANSWERED	4	42		1	1		2	4						3	1	3		4		
VALID CASES	126	2014	1	22	37	34	32	74	1		4	15	8	75	49	112	13	79	47	
NUMBER OF RESPONDENTS	130	2056	1	23	38	34	34	78	1		4	15	8	78	50	115	13	83	47	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q55 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER PAC ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q57 #YES	83 66%	1193 60%	1 100%	13 62%	26 72%	20 59%	23 70%	48 63%	1 ~100%		4 ~100%	10 71%	4 57%	53 71%	30 62%	73 66%	9 69%	49 63%	34 72%	
NO	42 34%	793 40%		8 ~38%	10 28%	14 41%	10 30%	28 37%	~	~	~	~	4 29%	3 43%	22 29%	18 38%	37 34%	4 31%	29 37%	13 28%
NOT ANSWERED	5	70		2	2		1	2					1	1	3	2	5		5	
VALID CASES	125	1986	1	21	36	34	33	76	1		4	14	7	75	48	110	13	78	47	
NUMBER OF RESPONDENTS	130	2056	1	23	38	34	34	78	1		4	15	8	78	50	115	13	83	47	
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q55 = YES]

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

	WVCH TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q57A YES	289 85%	3840 79%*	2 50%~	35 61%*	86 89%	96 94%*	70 89%	163 84%	1 100%~	2 67%~	4 ~100%~	32 91%~	22 85%~	192 91%*	88 75%*	265 85%~	18 82%~	234 86%	55 83%	
NO	50 15%	1039 21%*	2 50%~	22 39%*	11 11%	6 6%*	9 11%	30 16%	1 ~	2 33%~	2 100%~	3 ~	4 9%~	19 9%*	29 25%*	45 15%~	4 18%~	39 14%	11 17%	
NOT ANSWERED	41	484		8	12	10	11	5				3	1	10	2	11	2	39	2	
VALID CASES	339	4879	4	57	97	102	79	193	1	3	2	4	35	26	211	117	310	22	273	66
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q57B NEVER	50 27%	674 30%	2 67%~	10 40%~	14 23%	17 31%	7 18%	28 29%	1 100%~	1 ~100%~	2 67%~	4 20%~	2 13%~	35 27%	15 31%~	45 28%~	4 27%~	41 27%~	9 29%~	
SOMETIMES	39 21%	430 19%	1 33%~	5 20%~	8 13%*	12 22%	13 33%~	23 24%	~	~	~	4 20%~	9 56%~	22 17%*	15 31%~	33 20%~	5 33%~	34 23%~	5 16%~	
USUALLY	41 23%	488 22%	~	7 28%~	11 18%	12 22%	11 28%~	19 20%	2 67%~	1 ~	2 33%~	5 10%~	31%~	33 26%	7 15%~	37 23%~	3 20%~	32 21%~	9 29%~	
ALWAYS	52 29%	667 30%	~	3 12%~	27 45%*	13 24%	9 23%~	25 26%	1 33%~	~	~	10 50%~	~	38 30%	11 23%~	48 29%~	3 20%~	44 29%~	8 26%~	
#ALWAYS + USUALLY (NET)	93 51%	1154 51%	~	10 40%~	38 63%*	25 46%	20 50%~	44 46%	3 ~100%~	1 ~	12 33%~	5 60%~	31%~	71 55%	18 38%~	85 52%~	6 40%~	76 50%~	17 55%~	
TOP BOX SCORE	52 29%	667 30%	~	3 12%~	27 45%*	13 24%	9 23%~	25 26%	1 33%~	~	~	10 50%~	~	38 30%	11 23%~	48 29%~	3 20%~	44 29%~	8 26%~	
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	155	2651	1	31	40	46	37	95		1	1	17	9	81	69	146	7	120	35	
NOT ANSWERED	43	454		9	9	12	13	8				1	2	12	2	12	2	41	2	
VALID CASES	182	2258	3	25	60	54	40	95	1	3	1	3	20	16	128	48	163	15	151	31
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%

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

	WVCH TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	NO CCC	CCC		
Q57C YES	76 23%	1026 21%	14 ~ 26%	31 32%*	18 18%	13 17%	42 22%	2 ~ 67%~	1 ~ 25%~	8 21%~	8 32%~	48 23%	28 25%	67 22%~	8 38%~	55 21%	21 32%			
NO	254 77%	3791 79%	4 100%~	40 74%	66 68%*	81 82%	63 83%	146 78%	1 100%~	1 33%~	2 100%~	3 75%~	30 79%~	17 68%~	162 77%	84 75%	238 78%~	13 62%~	210 79%	44 68%
NOT ANSWERED	50	546	11	12	13	14	10					2	11	7	16	3	47	3		
VALID CASES	330	4817	4	54	97	99	76	188	1	3	2	4	38	25	210	112	305	21	265	65
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q57D #YES	70 92%	865 87%	~ 86%~	12 94%~	29 94%~	17 92%~	12 92%~	40 95%~	2 ~100%~		1 ~100%~	8 ~100%~	6 75%~	43 90%~	27 96%~	61 91%~	8 100%~	50 91%~	20 95%~
NO	6 8%	124 13%	~ 14%~	2 6%~	2 6%~	1 6%~	1 8%~	2 5%~	~	~	~	~	2 25%~	5 10%~	1 4%~	6 9%~		5 9%~	1 5%~
NOT ANSWERED		6																	
VALID CASES	76	990		14	31	18	13	42	2		1	8	8	48	28	67	8	55	21
NUMBER OF RESPONDENTS	76 100%	996 100%		14 100%	31 100%	18 100%	13 100%	42 100%	2 100%		1 100%	8 100%	8 100%	48 100%	28 100%	67 100%	8 100%	55 100%	21 100%

[ASKED IF Q57C = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q57E #YES	70 93%	853 87%*	~	13 93%~	28 93%~	18 100%~	11 85%~	39 95%~	2 ~100%~		1 ~100%~	8 100%~	5 63%~	45 96%~	25 89%~	61 92%~	8 100%~	52 96%~	18 86%~
NO	5 7%	127 13%*	~	1 7%~	2 7%~	2 ~15%~	2 5%~	~	~	~	~	~	3 38%~	2 4%~	3 11%~	5 8%~	~	2 4%~	3 14%~
NOT ANSWERED	1	15			1		1							1		1		1	
VALID CASES	75	981		14	30	18	13	41	2		1	8	8	47	28	66	8	54	21
NUMBER OF RESPONDENTS	76 100%	996 100%		14 100%	31 100%	18 100%	13 100%	42 100%	2 100%		1 100%	8 100%	8 100%	48 100%	28 100%	67 100%	8 100%	55 100%	21 100%

[ASKED IF Q57C = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q57F NEVER	2 3%	20 2%	~	~	2 6%	~	~	~	~	~	~	~	2 25%	1 2%	1 4%	2 3%	~	1 2%	1 5%
SOMETIMES	7 9%	89 9%	~	2 14%	3 10%	~	2 17%	3 7%	1 50%	1 100%	~	1 13%	5 11%	2 7%	6 9%	1 13%	5 9%	2 10%	
USUALLY	17 23%	244 25%	~	1 7%	10 32%	4 22%	2 17%	10 24%	~	~	~	2 25%	2 25%	11 23%	6 21%	14 21%	3 38%	10 19%	7 33%
ALWAYS	49 65%	624 64%	~	11 79%	16 52%	14 78%	8 67%	28 68%	1 50%	~	~	6 75%	3 38%	30 64%	19 68%	45 67%	4 50%	38 70%	11 52%
#ALWAYS + USUALLY (NET)	66 88%	868 89%	~	12 86%	26 84%	18 100%	10 83%	38 93%	1 50%	~	~	8 100%	5 63%	41 87%	25 89%	59 88%	7 88%	48 89%	18 86%
TOP BOX SCORE	49 65%	624 64%	~	11 79%	16 52%	14 78%	8 67%	28 68%	1 50%	~	~	6 75%	3 38%	30 64%	19 68%	45 67%	4 50%	38 70%	11 52%
NOT ANSWERED	1	20					1	1						1				1	
VALID CASES	75	976		14	31	18	12	41	2		1	8	8	47	28	67	8	54	21
NUMBER OF RESPONDENTS	76	996		14	31	18	13	42	2		1	8	8	48	28	67	8	55	21
	100%	100%		100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q57C = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV ILND	AMER PAC	IND/ALSK	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q57G NEVER	3 4%	39 4%	~	~	2 6%	~	1 8%	1 2%	~	~	~	~	1 13%	1 13%	1 2%	2 7%	3 4%	~	1 2%	2 10%
SOMETIMES	8 11%	87 9%	~	2 14%	2 6%	~	4 31%	4 10%	~	~	~	1 100%	2 25%	6 13%	2 7%	7 10%	1 13%	6 11%	2 10%	
USUALLY	21 28%	248 25%	~	4 29%	8 26%	6 33%	3 23%	9 21%	1 50%	~	~	1 13%	4 50%	13 27%	8 29%	16 24%	5 63%	10 18%	11 52%	
ALWAYS	44 58%	607 62%	~	8 57%	19 61%	12 67%	5 38%	28 67%	1 50%	~	~	6 75%	1 13%	28 58%	16 57%	41 61%	2 25%	38 69%	6 29%	
#ALWAYS + USUALLY (NET)	65 86%	855 87%	~	12 86%	27 87%	18 100%	8 62%	37 88%	2 100%	~	~	7 88%	5 63%	41 85%	24 86%	57 85%	7 88%	48 87%	17 81%	
TOP BOX SCORE	44 58%	607 62%	~	8 57%	19 61%	12 67%	5 38%	28 67%	1 50%	~	~	6 75%	1 13%	28 58%	16 57%	41 61%	2 25%	38 69%	6 29%	
NOT ANSWERED		16																		
VALID CASES	76	980		14	31	18	13	42	2			1	8	8	48	28	67	8	55	21
NUMBER OF RESPONDENTS	76	996		14	31	18	13	42	2			1	8	8	48	28	67	8	55	21
	100%	100%		100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q57C = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q57H NEVER	1 1%	18 2%	~	~	~	6%	1 2%	~	~	~	~	~	~	1 2%	~	~	1 13%	~	1 2%	~
SOMETIMES	6 8%	71 7%	~	2 14%	1 3%	1 6%	2 17%	2 5%	~	~	1 100%	~	1 13%	6 13%	~	~	5 7%	1 13%	5 9%	1 5%
USUALLY	15 20%	202 21%	~	2 14%	8 26%	4 22%	1 8%	6 15%	~	~	~	2 25%	3 38%	11 23%	4 14%	~	12 18%	3 38%	9 17%	6 29%
ALWAYS	53 71%	690 70%	~	10 71%	22 71%	12 67%	9 75%	32 78%	2 100%	~	~	6 75%	4 50%	29 62%	24 86%	~	50 75%	3 38%	39 72%	14 67%
#ALWAYS + USUALLY (NET)	68 91%	892 91%	~	12 86%	30 97%	16 89%	10 83%	38 93%	2 100%	~	~	8 100%	7 88%	40 85%	28 100%	~	62 93%	6 75%	48 89%	20 95%
TOP BOX SCORE	53 71%	690 70%	~	10 71%	22 71%	12 67%	9 75%	32 78%	2 100%	~	~	6 75%	4 50%	29 62%	24 86%	~	50 75%	3 38%	39 72%	14 67%
NOT ANSWERED	1	16					1	1						1					1	
VALID CASES	75	980		14	31	18	12	41	2		1	8	8	47	28		67	8	54	21
NUMBER OF RESPONDENTS	76	996		14	31	18	13	42	2		1	8	8	48	28		67	8	55	21
	100%	100%		100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%		100%	100%	100%	100%

[ASKED IF Q57C = YES]

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q58																				
EXCELLENT	118 34%	1951 39%*	2 50%~	24 43%	40 40%	34 32%	18 23%*	71 36%	1 100%~	~	~	9 24%~	14 52%~	64 29%*	50 42%*	118 37%~	~	106 38%*	12 18%*	
VERY GOOD	117 34%	1732 35%	2 50%~	17 30%	39 39%	30 29%	29 37%	75 38%*	~	2 67%~	~	18 47%~	5 19%~	71 33%	43 36%	117 36%~	~	91 33%	26 38%	
GOOD	86 25%	973 20%*	~	10 18%	21 21%	31 30%	24 30%	41 21%	~	1 33%~	2 100%~	2 50%~	9 24%~	6 22%~	64 29%*	20 17%*	86 27%~	~	65 23%	21 31%
FAIR	21 6%	308 6%	~	4 7%	1 1%*	10 10%	6 8%	9 5%	~	~	~	1 25%~	2 5%~	2 7%~	15 7%	6 5%	21 ~	12 4%*	9 13%*	
POOR	3 0.9%	13 0.3%	~	1 2%	~	~	2 3%	~	~	~	~	1 25%~	~	3 1%~	~	~	3 ~	3 1%	~	
#EXCELLENT + VERY GOOD + GOOD (NET)	321 93%	4656 94%	4 100%~	51 91%	100 99%*	95 90%	71 90%	187 95%	1 100%~	3 100%~	2 100%~	2 50%~	36 95%~	25 93%~	199 92%	113 95%	321 100%~	~	262 95%	59 87%
NOT ANSWERED	35	386		9	8	7	11	2						4				35		
VALID CASES	345	4977	4	56	101	105	79	196	1	3	2	4	38	27	217	119	321	24	277	68
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%



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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q59 EXCELLENT	160 46%	2270 46%	3 75%	35 64%*	56 56%*	41 39%	25 31%*	96 49%	1 100%	1 33%	1 50%	2 50%	12 32%	13 48%	101 46%	57 48%	153 48%	5 21%	146 53%*	14 21%*
VERY GOOD	81 23%	1311 26%		11 ~ 20%	25 25%	30 28%	15 19%	43 22%		1 33%	1 50%		13 ~ 35%	4 15%	47 22%	30 25%	78 25%	3 13%	68 25%	13 19%
GOOD	73 21%	923 19%	1 25%	8 15%	13 13%*	24 23%	27 34%*	40 20%		1 33%			9 ~ 24%	6 22%	52 24%	20 17%	64 20%	8 33%	52 19%*	21 31%*
FAIR	28 8%	400 8%		1 ~ 2%*	6 6%	10 9%	11 14%	15 8%				2 ~ 50%	3 8%	3 11%	17 8%	10 8%	20 6%	7 29%	11 4%*	17 25%*
POOR	3 0.9%	72 1%				1 ~0.9%	2 3%	2 1%						1 ~ 4%	1 0.5%	2 2%	2 0.6%	1 4%		3 ~ 4%
#EXCELLENT + VERY GOOD + GOOD (NET)	314 91%	4503 91%	4 100%	54 98%*	94 94%	95 90%	67 84%*	179 91%	1 100%	3 100%	2 100%	2 50%	34 92%	23 85%	200 92%	107 90%	295 93%	16 67%	266 96%*	48 71%*
NOT ANSWERED	35	387		10	9	6	10	2					1		3		4		35	
VALID CASES	345	4976	4 100%	55 100%	100 100%	106 100%	80 100%	196 100%	1 100%	3 100%	2 100%	4 100%	37 100%	27 100%	218 100%	119 100%	317 100%	24 100%	277 100%	68 100%
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q60 YES	73 21%	1132 23%		7 ~ 13%*	15 15%*	25 24%	26 33%*	38 19%		1 ~ 33%~		3 ~ 75%~	9 24%~	5 19%~	44 20%	28 24%	61 19%~	12 55%~	25 9%*	48 72%*
NO	270 79%	3829 77%	4 100%~	49 87%*	86 85%*	78 76%	53 67%*	159 81%	1 100%~	2 67%~	2 100%~	1 25%~	29 76%~	22 81%~	173 80%	90 76%	256 81%~	10 45%~	251 91%*	19 28%*
NOT ANSWERED	37	401		9	8	9	11	1							4	1	4	2	36	1
VALID CASES	343	4962	4	56	101	103	79	197	1	3	2	4	38	27	217	118	317	22	276	67
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q61 YES	53 76%	857 79%	4 ~ 67%	13 87%	16 67%	20 80%	34 89%	1 ~100%			3 ~100%	6 67%	4 80%	27 66%	25 89%	45 76%	8 73%	10 43%	43 91%
NO	17 24%	234 21%	2 ~ 33%	2 13%	8 33%	5 20%	4 11%					3 33%	1 20%	14 34%	3 11%	14 24%	3 27%	13 57%	4 9%
NOT ANSWERED	3	30	1		1	1								3		2	1	2	1
VALID CASES	70	1091	6	15	24	25	38	1			3	9	5	41	28	59	11	23	47
NUMBER OF RESPONDENTS	73 100%	1121 100%	7 100%	15 100%	25 100%	26 100%	38 100%	1 100%			3 100%	9 100%	5 100%	44 100%	28 100%	61 100%	12 100%	25 100%	48 100%

[ASKED IF Q60 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q62 YES	43	763		3	8	14	18	29				3	4	4	21	22	37	6	43	
	83%	90%		~ 75%	~ 62%	~ 93%	~ 90%	85%	~	~	~ 100%	67%	~ 100%	~ 81%	~ 88%	84%	~ 75%	~ 100%	~	
NO	9	83		1	5	1	2	5				2		5	3	7	2	9		
	17%	10%		~ 25%	~ 38%	~ 7%	~ 10%	15%	~	~	~	~ 33%	~	~ 19%	~ 12%	16%	~ 25%	~ 100%	~	
NOT ANSWERED	1	20				1				1				1		1		1		
VALID CASES	52	846		4	13	15	20	34				3	6	4	26	25	44	8	9	43
NUMBER OF RESPONDENTS	53	866		4	13	16	20	34	1			3	6	4	27	25	45	8	10	43
	100%	100%		100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q60 = YES AND Q61 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL-	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
Q63 YES	52 15%	727 15%	~	7 13%	9 9%*	15 15%	21 27%*	33 17%	1 100%~	~	~	3 75%~	3 8%~	5 19%~	28 13%	24 20%	41 13%~	9 41%~	11 4%*	41 61%*
NO	289 85%	4197 85%	100%~	4 87%	48 91%*	92 85%	87 73%*	58 83%	164 83%	3 ~100%~	2 ~100%~	1 25%~	35 92%~	21 81%~	187 87%	94 80%	274 87%~	13 59%~	263 96%*	26 39%*
NOT ANSWERED	39	439		10	8	10	11	1					1	6	1	6	2	38	1	
VALID CASES	341	4924	4	55	101	102	79	197	1	3	2	4	38	26	215	118	315	22	274	67
NUMBER OF RESPONDENTS	380	5363	4	65	109	112	90	198	1	3	2	4	38	27	221	119	321	24	312	68
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC
Q64 YES	39 76%	620 86%	6 ~ 86%	7 ~ 78%	11 ~ 73%	15 ~ 75%	25 76%	~	~	3 ~ 100%	2 ~ 67%	5 ~ 100%	17 63%	22 92%	32 80%	7 78%	1 10%	38 93%
NO	12 24%	103 14%	1 ~ 14%	2 ~ 22%	4 ~ 27%	5 ~ 25%	8 24%	1 ~ 100%	~	~	1 ~ 33%	~	10 ~ 37%	2 8%	8 20%	2 22%	9 90%	3 7%
NOT ANSWERED	1	18				1							1		1		1	
VALID CASES	51	723	7	9	15	20	33	1		3	3	5	27	24	40	9	10	41
NUMBER OF RESPONDENTS	52 100%	741 100%	7 100%	9 100%	15 100%	21 100%	33 100%	1 100%		3 100%	3 100%	5 100%	28 100%	24 100%	41 100%	9 100%	11 100%	41 100%

[ASKED IF Q63 = YES]

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER				
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q65 YES	37	581		5	7	11	14	24				3	2	5	16	21	31	6	37	
	95%	97%	~	83%	100%	100%	93%	96%	~	~	~	100%	100%	100%	94%	95%	97%	86%	~	97%
NO	2	18		1			1	1							1	1	1	1	1	1
	5%	3%	~	17%	~	~	7%	4%	~	~	~	~	~	~	6%	5%	3%	14%	100%	3%
NOT ANSWERED		12																		
VALID CASES	39	600		6	7	11	15	25				3	2	5	17	22	32	7	1	38
NUMBER OF RESPONDENTS	39	612		6	7	11	15	25				3	2	5	17	22	32	7	1	38
	100%	100%		100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q63 = YES AND Q64 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q66 YES	38 11%	575 12%		6 ~ 11%	7 7%	14 13%	11 14%	26 13%			3 ~ 75%	1 3%	3 11%	18 8%*	20 17%*	32 10%~	6 27%~	8 3%*	30 45%*	
NO	302 89%	4353 88%	4 100%~	49 89%	93 93%	90 87%	66 86%	170 87%	3 ~100%	2 ~100%	1 25%~	36 97%~	24 89%~	196 92%*	98 83%*	283 90%~	16 73%~	265 97%*	37 55%*	
NOT ANSWERED	40	435		10	9	8	13	2	1			1		7	1	6	2	39	1	
VALID CASES	340	4928	4	55	100	104	77	196	3	2	4	37	27	214	118	315	22	273	67	
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER PAC ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q67 YES	30	448		5	5	10	10	22				3	1	3	12	18	26	4	2	28
	81%	80%	~	83%	83%	71%	91%	88%	~	~	~100%	~100%	~100%	~	71%	90%	84%	67%	29%	93%
NO	7	112		1	1	4	1	3							5	2	5	2	5	2
	19%	20%	~	17%	17%	29%	9%	12%	~	~	~	~	~	~	29%	10%	16%	33%	71%	7%
NOT ANSWERED	1	21			1			1							1		1		1	
VALID CASES	37	560		6	6	14	11	25				3	1	3	17	20	31	6	7	30
NUMBER OF RESPONDENTS	38	581		6	7	14	11	26				3	1	3	18	20	32	6	8	30
	100%	100%		100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q66 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q68 YES	28 93%	439 97%	5 ~100%	4 80%	10 100%	9 90%	21 95%	~	~	~	3 ~100%	3 ~100%	3	11 92%	17 94%	24 92%	4 100%	28 ~100%	
NO	2 7%	14 3%	~	1 20%	1 10%	1 10%	1 5%	~	~	~	1 ~100%	1	1	1 8%	1 6%	2 8%	2 ~100%	2 ~	
NOT ANSWERED		3																	
VALID CASES	30	453	5	5	10	10	22				3	1	3	12	18	26	4	2	28
NUMBER OF RESPONDENTS	30	456	5	5	10	10	22				3	1	3	12	18	26	4	2	28
	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q66 = YES AND Q67 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q69 YES	30 9%	459 9%		7 ~ 13%	12 12%	7 7%	4 5%	14 7%	~	~	~	2 50%~	2 5%~	2 7%~	19 9%	10 8%	25 8%~	5 22%~	13 5%*	17 25%*
NO	316 91%	4495 91%	4 100%~	49 87%	89 88%	99 93%	75 95%	183 93%	1 100%~	3 100%~	2 100%~	2 50%~	36 95%~	25 93%~	199 91%	109 92%	295 92%~	18 78%~	265 95%*	51 75%*
NOT ANSWERED	34	409		9	8	6	11	1						3		1	1	34		
VALID CASES	346	4954	4	56	101	106	79	197	1	3	2	4	38	27	218	119	320	23	278	68
NUMBER OF RESPONDENTS	380	5363	4	65	109	112	90	198	1	3	2	4	38	27	221	119	321	24	312	68
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q70 YES	16	314	3	7	4	2	7			2	1	2	9	7	13	3	2	14
	57%	71%	~ 43%	~ 58%	~ 57%	~ 100%	~ 50%	~	~	~ 100%	~ 50%	~ 100%	~ 50%	~ 70%	~ 57%	~ 60%	~ 18%	~ 82%
NO	12	129	4	5	3		7				1		9	3	10	2	9	3
	43%	29%	~ 57%	~ 42%	~ 43%	~	~ 50%	~	~	~	~ 50%	~	~ 50%	~ 30%	~ 43%	~ 40%	~ 82%	~ 18%
NOT ANSWERED	2	20				2							1		2		2	
VALID CASES	28	442	7	12	7	2	14			2	2	2	18	10	23	5	11	17
NUMBER OF RESPONDENTS	30	462	7	12	7	4	14			2	2	2	19	10	25	5	13	17
	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q69 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q71 YES	14	260		3	5	4	2	6			2		2	8	6	11	3		14
	93%	95%	~100%	~83%	~100%	~100%	~100%	~	~	~100%	~	~100%	89%	~100%	92%	~100%	~	~100%	
NO	1	14			1						1		1		1			1	
	7%	5%	~	~	17%	~	~	~	~	~	~100%	~	11%	~	8%	~	~100%	~	
NOT ANSWERED	1	7			1		1							1	1			1	
VALID CASES	15	274		3	6	4	2	6		2	1	2	9	6	12	3	1	14	
NUMBER OF RESPONDENTS	16	281		3	7	4	2	7		2	1	2	9	7	13	3	2	14	
	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q69 = YES AND Q70 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q72 YES	53 15%	722 15%		6 ~ 11%	7 7%*	21 20%	19 24%*	33 17%	1 ~ 33%~	3 ~ 75%~	2 5%~	6 22%~	30 14%	23 19%	43 14%~	10 43%~	7 3%*	46 68%*		
NO	291 85%	4209 85%	4 100%~	49 89%	94 93%*	84 80%	60 76%*	163 83%	1 100%~	2 67%~	2 100%~	1 25%~	36 95%~	21 78%~	188 86%	95 81%	274 86%~	13 57%~	269 97%*	22 32%*
NOT ANSWERED	36	432		10	8	7	11	2						3	1	4	1	36		
VALID CASES	344	4931	4	55	101	105	79	196	1	3	2	4	38	27	218	118	317	23	276	68
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER PAC ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q73 YES	42	612	6	7	16	13	28				3	1	5	24	18	34	8	42	
	91%	90%	~100%	~100%	89%	87%	93%	~	~	~100%	~100%	~100%	~	89%	95%	94%	80%	~100%	~
NO	4	68				2	2	2	1					3	1	2	2	4	
	9%	10%	~	~	~	11%	13%	7%	~100%	~	~	~	~	11%	5%	6%	20%	~100%	~
NOT ANSWERED	7	39				3	4	3				1	1	3	4	7		3	4
VALID CASES	46	680	6	7	18	15	30		1		3	1	5	27	19	36	10	4	42
NUMBER OF RESPONDENTS	53	719	6	7	21	19	33		1		3	2	6	30	23	43	10	7	46
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q72 = YES]

NQ74 WHAT IS YOUR CHILD'S AGE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
NQ74																				
LESS THAN 1 YEAR OLD	4 1%	27 0.5%	4 100%	~	~	~	~	3 2%	~	~	~	~	~	~	3 1%	1 0.8%	4 1%*	~	4 1%~	~
1 TO 3 YEARS OLD	65 17%	890 17%	~	65 ~100%	~	~	~	33 17%	1 100%	~	~	2 50%	3 8%	3 11%	32 14%	23 19%	51 16%	5 21%	57 18%	8 12%
4 TO 7 YEARS OLD	109 29%	1394 26%	~	~	109 ~100%	~	~	57 29%	~	2 67%	1 50%	1 25%	15 39%	9 33%	65 29%	33 28%	100 31%*	1 4%	96 31%*	13 19%*
8 TO 12 YEARS OLD	112 29%	1563 29%	~	~	~	112 ~100%	~	59 30%	~	1 33%	1 50%	~	10 26%	8 30%	73 33%	31 26%	95 30%	10 42%	88 28%	24 35%
13 OR OLDER	90 24%	1489 28%*	~	~	~	90 ~100%	~	46 23%	~	~	~	1 25%	10 26%	7 26%	48 22%	31 26%	71 22%	8 33%	67 21%*	23 34%*
VALID CASES	380	5363	4	65	109	112	90	198	1	3	2	4	38	27	221	119	321	24	312	68
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%

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



NQ75 IS YOUR CHILD MALE OR FEMALE?

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
NQ75																				
MALE	195 51%	2755 51%	3 75%	35 54%	54 50%	59 49%	99 50%	1 100%	2 67%	1 50%	2 50%	17 45%	12 44%	105 48%	65 55%	161 50%	13 54%	158 51%	37 54%	
FEMALE	185 49%	2608 49%	1 25%	30 46%	55 50%	53 47%	99 50%	1 33%	1 50%	2 50%	21 55%	15 56%	116 52%	54 45%	160 50%	11 46%	154 49%	31 46%		
VALID CASES	380	5363	4	65	109	112	90	198	1	3	2	4	38	27	221	119	321	24	312	68
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%

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

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

	AGE							RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q76																				
HISPANIC OR LATINO	221	2091	3	32	65	73	48	99		1		4	38	11	221		199	18	187	34
	65%	42%*	75%~	58%	66%	70%	61%	51%*		~ 33%~		~100%~	100%~	41%~	100%~		~ 64%~	75%~	69%*	50%*
NOT HISPANIC OR LATINO	119	2832	1	23	33	31	31	97	1	2	2			16		119	113	6	85	34
	35%	58%*	25%~	42%	34%	30%	39%	49%*	100%~	67%~	100%~		~	~ 59%~		~100%~	36%~	25%~	31%*	50%*
NOT ANSWERED	40	440		10	11	8	11	2									9		40	
VALID CASES	340	4923	4	55	98	104	79	196	1	3	2	4	38	27	221	119	312	24	272	68
NUMBER OF RESPONDENTS	380	5363	4	65	109	112	90	198	1	3	2	4	38	27	221	119	321	24	312	68
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE						RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
Q77.1	WVCH TOT CHLD	OHP TOT CHLD																		
YES	225 59%	3570 67%*	3 75%~	36 55%	66 61%	67 60%	53 59%	198 100%~	~	~	~	~	~	27 ~100%~	110 50%*	113 95%*	212 66%*	11 46%~	172 55%*	53 78%*
NO	155 41%	1793 33%*	1 25%~	29 45%	43 39%	45 40%	37 41%	1 ~100%~	3 ~100%~	2 ~100%~	4 ~100%~	38 ~100%~	111 ~	6 5%*	109 34%*	13 54%~	140 45%*	15 22%*		
VALID CASES	380	5363	4	65	109	112	90	198	1	3	2	4	38	27	221	119	321	24	312	68
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
Q77.2	WVCH TOT CHLD																			
YES	7 2%	230 4%*	2 ~ 3%	2 2%	2 2%	1 1%	1 ~100%	~	~	~	6 ~ 22%	3 1%	4 3%	7 2%*	~	6 2%	1 1%			
NO	373 98%	5133 96%*	4 100%	63 97%	107 98%	89 98%	198 100%	3 ~100%	2 100%	4 100%	38 100%	21 78%	218 99%	115 97%	314 98%*	24 100%	306 98%	67 99%		
VALID CASES	380	5363	4	65	109	112	90	198	1	3	2	4	38	27	221	119	321	24	312	68
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q77.3	WVCH TOT CHLD																			
YES	7 2%	201 4%*	~	~	4% 2%	1% 1%	~	~	3 ~100%	~	~	~	4 ~15%	2 0.9%	5 4%	7 2%*	~	7 2%*		
NO	373 98%	5162 96%*	4 100%	65 100%	105 96%	110 98%	89 99%	198 100%	1 100%	2 100%	4 100%	38 100%	23 85%	219 99%	114 96%	314 98%*	24 100%	305 98%*	68 100%	
VALID CASES	380	5363	4	65	109	112	90	198	1	3	2	4	38	27	221	119	321	24	312	68
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%

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

		AGE					RACE							ETHNICITY	HEALTH STATUS	CCC SCREENER			
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q77.4	WVCH TOT CHLD																		
YES	5 1%	82 2%	~	~	2% 2%	1% 1%	~	~	~100%	~	~	11% 11%	~	4% 4%	2% 2%	~	1% 1%		
NO	375 99%	5281 98%	4 100%	65 100%	107 98%	110 98%	198 100%	1 100%	3 100%	4 100%	38 100%	24 89%	221 100%	114 96%	316 98%	24 100%	308 99%	67 99%	
VALID CASES	380	5363	4	65	109	112	198	1	3	2	4	38	27	221	119	321	24	312	68
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%

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

		AGE						RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC	
Q77.5	WVCH TOT CHLD																			
YES	14 4%	275 5%	4 ~	4 6%	1 0.9%*	5 6%	~	~	~	4 ~100%~	10 ~ 37%~	8 4%	6 5%	10 3%	4 17%~	7 2%*	7 10%*			
NO	366 96%	5088 95%	4 100%~	61 94%	105 96%	111 99%*	85 94%	198 100%~	1 100%~	3 100%~	2 100%~	38 ~100%~	17 63%~	213 96%	113 95%	311 97%	20 83%~	305 98%*	61 90%*	
VALID CASES	380	5363	4	65	109	112	90	198	1	3	2	4	38	27	221	119	321	24	312	68
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC	
Q77.6	WVCH TOT CHLD																			
YES	47 12%	519 10%	3 ~	18 5%*	13 17%	13 12%	13 14%					38 ~100%	9 33%	45 20%*	2 2%*	45 14%*	2 8%	42 13%	5 7%	
NO	333 88%	4844 90%	4 100%	62 95%*	91 83%	99 88%	77 86%	198 100%	1 100%	3 100%	2 100%	4 100%	4 100%	18 ~ 67%	176 80%*	117 98%*	276 86%*	22 92%	270 87%	63 93%
VALID CASES	380	5363	4	65	109	112	90	198	1	3	2	4	38	27	221	119	321	24	312	68
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%



Q78 WHAT IS YOUR AGE?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR WHT	AFR-AMER	AS-IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q78 UNDER 18	16 5%	223 5%	1 25%~	3 ~	8 3%	4 8%	4 5%	10 5%	~	~	~	33%~	2 5%~	~	13 6%	3 3%	14 4%~	2 9%~	12 4%	4 6%	
18 TO 24	18 5%	229 5%	~	10 18%*	8 8%	~	~	11 6%	~	~	50%~	1 33%~	1 33%~	~	1 4%~	8 4%	9 8%	17 5%~	1 4%~	15 5%	3 4%
25 TO 34	131 38%	1610 33%*	2 50%~	33 59%*	46 46%	40 38%	10 13%*	79 40%	1 100%~	2 67%~	~	~	14 37%~	10 37%~	85 39%	43 36%	124 39%~	7 30%~	110 40%	21 31%	
35 TO 44	126 37%	1842 37%	1 25%~	13 23%*	34 34%	41 39%	37 47%*	64 32%	~	1 33%~	~	1 33%~	17 45%~	13 48%~	86 39%	38 32%	116 37%~	8 35%~	104 38%	22 33%	
45 TO 54	43 12%	718 15%	~	~	8 8%	13 12%	22 28%*	27 14%	~	~	50%~	~	4 11%~	2 7%~	23 11%	19 16%	36 11%~	5 22%~	32 12%	11 16%	
55 TO 64	6 2%	213 4%*	~	~	~	3 3%	3 4%	4 2%	~	~	~	~	1 3%~	~	3 1%	3 3%	6 2%~	~	2 0.7%	4 6%	
65 TO 74	3 0.9%	77 2%	~	~	1 1%	1 0.9%	1 1%	2 1%	~	~	~	~	~	1 4%~	~	3 3%	3 0.9%~	~	1 0.4%	2 3%	
75 OR OLDER	1 0.3%	15 0.3%	~	~	~	~	1 1%	1 0.5%	~	~	~	~	~	~	~	1 0.8%	1 0.3%~	~	1 0.4%	~	
NOT ANSWERED	36	436		9	9	6	12						1		3		4	1	35	1	
VALID CASES	344	4927	4	56	100	106	78	198	1	3	2	3	38	27	218	119	317	23	277	67	
NUMBER OF RESPONDENTS	380	5363	4	65	109	112	90	198	1	3	2	4	38	27	221	119	321	24	312	68	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q79 ARE YOU MALE OR FEMALE?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q79																				
MALE	30 9%	657 13%*	~	2%*	13%	8%	9%	16 8%	~	33%~	~	~	16%~	7%~	8%	11 9%	26 8%~	3 13%~	25 9%	5 7%
FEMALE	316 91%	4307 87%*	100%~	98%*	87%	92%	91%	182 92%	1 100%~	2 67%~	2 100%~	4 100%~	32 84%~	25 93%~	202 92%	108 91%	292 92%~	21 87%~	253 91%	63 93%
NOT ANSWERED	34	399		8	9	6	11							1		3		34		
VALID CASES	346	4964	4	57	100	106	79	198	1	3	2	4	38	27	220	119	318	24	278	68
NUMBER OF RESPONDENTS	380	5363	4	65	109	112	90	198	1	3	2	4	38	27	221	119	321	24	312	68
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q80																				
8TH GRADE OR LESS	76 23%	618 13%*	10 ~ 18%	22 22%	25 25%	19 25%	29 15%*	~	~	~	50%~	12 32%~	5 19%~	71 34%*	1 0.8%*	63 20%~	9 41%~	64 24%	12 18%	
SOME HIGH SCHOOL BUT DID NOT GRADUATE	57 17%	624 13%*	2 50%~	7 13%	15 15%	17 22%	26 13%*	~	~	50%~	1 ~	7 19%~	5 19%~	44 21%*	12 10%*	53 17%~	4 18%~	47 17%	10 15%	
HIGH SCHOOL GRADUATE OR GED	109 32%	1385 28%	1 25%~	17 31%	33 33%	37 37%	21 28%	70 36%	1 ~	33%~	1 ~	15 41%~	4 15%~	70 33%	37 31%	106 34%~	3 14%~	89 33%	20 30%	
SOME COLLEGE OR 2-YEAR DEGREE	75 22%	1555 32%*	1 25%~	18 33%	23 23%	17 17%	16 21%	57 29%*	1 ~	33%~	1 50%~	3 ~	9 8%~	21 10%*	54 45%*	71 23%~	4 18%~	53 20%*	22 33%*	
4-YEAR COLLEGE GRADUATE	11 3%	470 10%*	1 ~	5 2%	4 5%	1 4%	8 4%	1 ~	33%~	~	~	~	2 7%~	2 1%*	9 8%*	11 4%~	~	10 4%	1 1%	
MORE THAN 4-YEAR COLLEGE DEGREE	8 2%	246 5%*	2 ~	2 4%	2 2%	2 3%	5 3%	1 100%~	~	~	~	~	2 7%~	2 1%	6 5%	6 2%~	2 9%~	6 2%	2 3%	
NOT ANSWERED	44	466	10	9	11	14	3				2	1		11		11	2	43	1	
VALID CASES	336	4897	4	55	100	101	76	195	1	3	2	2	37	27	210	119	310	22	269	67
NUMBER OF RESPONDENTS	380 100%	5363 100%	4 100%	65 100%	109 100%	112 100%	90 100%	198 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	221 100%	119 100%	321 100%	24 100%	312 100%	68 100%

Q81 HOW ARE YOU RELATED TO THE CHILD?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV ILND	AMER PAC ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q81																				
MOTHER OR FATHER	322	4614	4	53	95	97	73	187	1	2	1	3	37	23	213	105	297	21	263	59
	95%	94%	100%~	95%	96%	94%	96%	96%	100%~	67%~	50%~	100%~	100%~	88%~	99%*	91%*	95%~	91%~	96%	91%
GRANDPARENT	7	165			2	2	3	5							1	5	6	1	4	3
	2%	3%	~	~	2%	2%	4%	3%	~	~	~	~	~	~	0.5%*	4%	2%~	4%~	1%	5%
AUNT OR UNCLE	3	19			1	2				1				1	1	2	3		3	
	0.9%	0.4%	~	~	1%	2%	~	~	~	33%~	~	~	~	4%~	0.5%	2%	1%~	~	1%~	~
OLDER BROTHER OR SISTER	1	8		1				1							1		1		1	
	0.3%	0.2%	~	2%~	~	~	~	0.5%~	~	~	~	~	~	~	0.5%~	~	0.3%~	~	0.4%~	~
OTHER RELATIVE		3																		
		0.1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
LEGAL GUARDIAN	4	60		2	1	1		1			1			1	3	4		2	2	
	1%	1%	~	4%	1%	1%	~	0.5%	~	~	50%~	~	~	4%~	~	3%	1%~	~	0.7%	3%
SOMEONE ELSE	1	41				1								1	1		1		1	
	0.3%	0.8%	~	~	~	1%~	~	~	~	~	~	~	~	4%~	~	0.9%~	~	4%~	~	2%~
NOT ANSWERED	42	454		9	10	9	14	4				1	1	1	5	3	10	1	39	3
VALID CASES	338	4909	4	56	99	103	76	194	1	3	2	3	37	26	216	116	311	23	273	65
NUMBER OF RESPONDENTS	380	5363	4	65	109	112	90	198	1	3	2	4	38	27	221	119	321	24	312	68
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q82 YES	9 4%	96 3%	~	1 3%~	1 2%	3 5%	4 8%~	4 3%	~	~	~	~	3 13%~	~	8 7%*	1 1%*	9 5%~	~	6 4%~	3 7%~
NO	194 96%	3230 97%	100%~	3 97%~	34 98%	58 95%	44 92%~	131 97%	~	~	1 100%~	4 100%~	21 87%~	6 100%~	112 93%*	78 99%*	177 95%~	14 100%~	156 96%~	38 93%~
NOT ANSWERED	2	38		1			1							1		2		2		
VALID CASES	203	3326	3	35	59	58	48	135			1	4	24	6	120	79	186	14	162	41
NUMBER OF RESPONDENTS	205	3364	3	36	59	58	49	135			1	4	24	6	121	79	188	14	164	41
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q83.1 YES	6 67%	45 50%	~100%	100%	67%	50%	2 50%	~	~	~	~	2 67%	~	6 75%	6 67%	5 83%	1 33%	
NO	3 33%	44 50%	~	~	33%	50%	2 50%	~	~	~	~	1 33%	~	2 25%	1 100%	3 33%	1 17%	2 67%
VALID CASES	9	89	1	1	3	4	4					3		8	1	9	6	3
NUMBER OF RESPONDENTS	9 100%	89 100%	1 100%	1 100%	3 100%	4 100%	4 100%					3 100%		8 100%	1 100%	9 100%	6 100%	3 100%

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

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

			AGE					RACE					ETHNICITY	HEALTH STATUS	CCC SCREENER				
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q83.2 YES	2 22%	28 31%	~	~	~	67%	~	~	~	~	~	33%	~	25%	~	22%	~	17%	33%
NO	7 78%	61 69%	~	100%	100%	33%	100%	~	~	~	~	67%	~	75%	100%	78%	~	83%	67%
VALID CASES	9	89		1	1	3	4	4				3		8	1	9		6	3
NUMBER OF RESPONDENTS	9	89		1	1	3	4	4				3		8	1	9		6	3
	100%	100%		100%	100%	100%	100%	100%				100%		100%	100%	100%		100%	100%

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

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

		AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q83.3	WVCH TOT CHLD	OHP TOT CHLD														
YES	11	12%	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	9	78	1	1	3	4	4	~	~	~	3	8	1	9	6	3
	100%	88%	~100%	~100%	~100%	~100%	~100%	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%
VALID CASES	9	89	1	1	3	4	4			3		8	1	9	6	3
NUMBER OF RESPONDENTS	9	89	1	1	3	4	4			3		8	1	9	6	3
	100%	100%	100%	100%	100%	100%	100%			100%		100%	100%	100%	100%	100%

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



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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q83.4 YES	3 33%	19 21%	~	~	~	67%	25%	2 50%	~	~	~	33%	1 25%	1 100%	3 33%	1 17%	2 67%	
NO	6 67%	70 79%	~	100%	100%	33%	75%	2 50%	~	~	~	67%	2 75%	6 67%	6 67%	5 83%	1 33%	
VALID CASES	9	89	1	1	3	4	4	4				3	8	1	9	6	3	
NUMBER OF RESPONDENTS	9 100%	89 100%	1 100%	1 100%	3 100%	4 100%	4 100%	4 100%				3 100%	8 100%	1 100%	9 100%	6 100%	3 100%	

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q83.5 YES	1	8					1						1	1		1		1		
	11%	10%	~	~	~	~	25%	~	~	~	~	~	33%	~	13%	~	11%	~	33%	
NO	8	81		1	1	3	3	4					2	7	1	8		6	2	
	89%	90%	~	100%	100%	100%	75%	100%	~	~	~	~	67%	~	88%	100%	89%	~	100%	67%
VALID CASES	9	89		1	1	3	4	4					3	8	1	9		6	3	
NUMBER OF RESPONDENTS	9	89		1	1	3	4	4					3	8	1	9		6	3	
	100%	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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NQ14 0-6	188	329	~	4 9%~	1 1%*	6 10%	7 13%	12 9%	~	~	~	1 33%~	1 4%~	~	8 6%	10 11%	13 6%~	5 24%~	12 7%	6 11%
7-8	74	1112	50%~	2 36%~	16 33%	23 26%	17 33%	44 33%	~	2 100%~	~	~	7 28%~	8 44%~	35 27%*	31 35%	63 31%~	5 24%~	57 32%	17 31%
9-10	140	2025	50%~	2 56%~	25 66%	46 64%	39 54%	76 58%	~	~	~	2 67%~	17 68%~	10 56%~	89 67%*	47 53%	125 62%~	11 52%~	109 61%	31 57%
VALID CASES	232	3466	100%	4 100%	45 100%	70 100%	61 100%	52 100%	132	2		3	25	18	132	88	201	21	178	54
NUMBER OF RESPONDENTS	232	3466	100%	4 100%	45 100%	70 100%	61 100%	52 100%	132	2		3	25	18	132	88	201	21	178	54
MEAN	2.53	2.49	2.50	2.47	2.64	2.54	2.40	2.48	2.00	2.33	2.64	2.56	2.61	2.42	2.56	2.29	2.54	2.46		
p stat_(*=Sig @ p<=.05)	.359		~	~	.040*	.835	.156	.255	~	~	~	~	~	~	.017*	.057	~	~	.409	.409

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
NQ41 0-6	19 6%	319 8%	~	4 9%~	5 5%	5 6%	5 7%	11 6%	~	~	~	1 25%~	2 6%~	1 4%~	10 6%	9 9%	16 6%~	2 10%~	18 8%*	1 2%*
7-8	59 20%	980 23%	33%~	1 23%~	11 17%	16 20%	14 21%	34 20%	~	~	~	~	5 16%~	5 21%~	31 17%	23 22%	52 20%~	3 15%~	45 19%	14 23%
9-10	218 74%	2929 69%	67%~	2 68%~	32 68%~	71 77%	65 72%	48 74%	~	3 100%~	~	3 75%~	24 77%~	18 75%~	139 77%	73 70%	198 74%~	15 75%~	173 73%	45 75%
VALID CASES	296	4228	3 100%	47 100%	92 100%	87 100%	67 100%	172	3	3	4	31	24	180	105	266	20	236	60	
NUMBER OF RESPONDENTS	296 100%	4228 100%	3 100%	47 100%	92 100%	87 100%	67 100%	172 100%	3 100%	3	4	31	24	180 100%	105 100%	266 100%	20 100%	236 100%	60 100%	
MEAN	2.67	2.62	2.67	2.60	2.72	2.69	2.64	2.67	3.00	2.50	2.71	2.71	2.72	2.61	2.68	2.65	2.66	2.73		
p stat_(*=Sig @ p<=.05)		.095	~	~	.366	.742	.644	.942	~	~	~	~	~	~	.117	.194	~	~	.302	.304

[ASKED IF Q30 = YES]

NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NQ48 0-6	4 10%	69 10%	~	25%~	~	~	25%~	3 15%~	~	~	~	14%~	~	11%~	2 10%~	3 9%~	1 20%~	1 6%~	3 14%~	
7-8	6 15%	178 26%~	~	25%~	7%~	11%~	25%~	4 20%~	1 ~100%~	~	~	~	1 ~ 17%~	6 ~ 29%~	5 15%~	1 20%~	2 11%~	4 19%~		
9-10	29 74%	428 63%~	~	50%~	93%~	89%~	50%~	13 65%~	~	~	~	100%~	6 86%~	5 83%~	16 89%~	13 62%~	26 76%~	3 60%~	15 83%~	14 67%~
VALID CASES	39	675	4	14	9	12	20	1	1	7	6	18	21	34	5	18	21			
NUMBER OF RESPONDENTS	39 100%	675 100%	4 100%	14 100%	9 100%	12 100%	20 100%	1 100%	1 100%	7 100%	6 100%	18 100%	21 100%	34 100%	5 100%	18 100%	21 100%			
MEAN	2.64	2.53	2.25	2.93	2.89	2.25	2.50	2.00	3.00	2.71	2.83	2.78	2.52	2.68	2.40	2.78	2.52			
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

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

NQ54 RATING OF CHILD'S HEALTH PLAN

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NQ54 0-6	37 11%	619 12%		8 ~ 15%	6 6%*	12 11%	11 14%	24 12%	~	~	~ 25%~	1 3	4 4	12 6%*	23 20%*	31 10%~	4 17%~	26 9%	11 16%	
7-8	79 23%	1448 29%*	3 75%~	14 25%	22 22%	16 15%*	24 30%	56 29%*	~	2 67%~	~	8 ~ 21%~	5 19%~	41 19%*	35 30%*	71 23%~	5 22%~	63 23%	16 24%	
9-10	227 66%	2927 59%*	1 25%~	33 60%	70 71%	77 73%	46 57%*	113 59%*	1 100%~	1 33%~	2 100%~	3 75%~	27 71%~	18 67%~	163 75%*	59 50%*	211 67%~	14 61%~	187 68%	40 60%
VALID CASES	343	4994	4	55	98	105	81	193	1	3	2	4	38	27	216	117	313	23	276	67
NUMBER OF RESPONDENTS	343 100%	4994 100%	4 100%	55 100%	98 100%	105 100%	81 100%	193 100%	1 100%	3 100%	2 100%	4 100%	38 100%	27 100%	216 100%	117 100%	313 100%	23 100%	276 100%	67 100%
MEAN	2.55	2.46	2.25	2.45	2.65	2.62	2.43	2.46	3.00	2.33	3.00	2.50	2.63	2.52	2.70	2.31	2.58	2.43	2.58	2.43
p stat_(*=Sig @ p<=.05)		.008*	~.274	.066	.242	.080	.004*	~	~	~	~	~	~	~.000*	.000*	~	~	.140	.141	

GETTING NEEDED CARE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
NPRBSEE4 NQ46	2.38	2.21		2.40	2.50	2.20	2.33	2.17		3.00		3.00	2.50	2.50	2.39	2.36	2.41	2.17	2.48	2.29
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCARNES4 NQ15	2.46	2.44	2.25	2.49	2.55	2.35	2.45	2.47		2.50		1.67	2.58	2.56	2.48	2.47	2.48	2.33	2.45	2.48
p stat_(*=Sig @ p<=.05)		.597	~	~	.160	.133	.942	.779	~	~	~	~	~	~	.559	.892	~	~	.763	.764
COMPOSITE	2.42	2.32	2.25	2.44	2.53	2.28	2.39	2.32	x	2.75	x	2.33	2.54	2.53	2.44	2.41	2.45	2.25	2.46	2.39
p stat_(*=Sig @ p<=.05)		.142	~	~	.294	.191	.831	.088	~	~	~	~	~	~	.755	.968	~	~	.270	.819

GETTING CARE QUICKLY

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
NCARSN4 NQ4	2.53	2.60	3.00	2.58	2.52	2.48	2.52	2.58			2.00	2.86	2.50	2.36	2.72	2.55	2.33	2.54	2.50	
p stat_(*=Sig @ p<=.05)		.267	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NAPGET4 NQ6	2.40	2.43	2.00	2.52	2.34	2.50	2.27	2.46	3.00	1.67	1.00	3.00	2.43	2.38	2.34	2.54	2.43	2.25	2.35	2.58
p stat_(*=Sig @ p<=.05)		.573	~.198	.426	.278	~.258	~	~	~	~	~	~	~.135	.042*	~	~	~.048*	.048*		
COMPOSITE	2.47	2.51	2.50	2.55	2.43	2.49	2.40	2.52	3.00	1.67	1.00	2.50	2.64	2.44	2.35	2.63	2.49	2.29	2.44	2.54
p stat_(*=Sig @ p<=.05)		.528	~.585	.725	.865	.607	.424	~	~	~	~	~	~.065	.118	~	~	~.606	.610		



HOW WELL DOCTORS COMMUNICATE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC
NDREXPL4 NQ32	2.61	2.69	2.33	2.65	2.69	2.70	2.36	2.64	3.00	2.00	2.80	2.62	2.54	2.73	2.64	2.44	2.62	2.57
p stat_(*=Sig @ p<=.05)		.026*	~	~.168	.230		~.344	~	~	~	~	~	~.063	.024*	~	~	~	~
NDRLSTN4 NQ33	2.72	2.71	2.33	2.77	2.71	2.78	2.64	2.71	3.00	3.00	2.75	2.92	2.69	2.75	2.71	2.78	2.70	2.79
p stat_(*=Sig @ p<=.05)		.934	~	~.848	.343		~.784	~	~	~	~	~	~.538	.508	~	~	~	~
NDRESPU4 NQ34	2.79	2.77	2.67	2.79	2.82	2.80	2.73	2.76	3.00	3.00	2.85	2.77	2.83	2.74	2.80	2.78	2.80	2.77
p stat_(*=Sig @ p<=.05)		.564	~	~.481	.910		~.296	~	~	~	~	~	~.171	.249	~	~	~	~
NDRTMEN4 NQ37	2.41	2.49	2.33	2.26	2.41	2.43	2.51	2.46	2.33	1.75	2.45	2.69	2.32	2.58	2.44	2.11	2.38	2.51
p stat_(*=Sig @ p<=.05)		.070	~	~.969	.796		~.217	~	~	~	~	~	~.044*	.012*	~	~	~	~
COMPOSITE	2.63	2.67	2.42	2.62	2.66	2.68	2.56	2.64	x 2.83	x 2.44	2.71	2.75	2.60	2.70	2.65	2.53	2.62	2.66
p stat_(*=Sig @ p<=.05)		.747	~	~.865	.805		~.886	~	~	~	~	~	~.713	.627	~	~	~	~

CUSTOMER SERVICE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
NPBCLCS4 NQ50	2.35	2.24	3.00	2.36	2.32	2.37	2.31	2.36	2.33	2.00	2.42	2.25	2.43	2.20	2.37	2.10	2.33	2.42
p stat_(*=Sig @ p<=.05)		.161	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ51	2.60	2.57	3.00	2.64	2.61	2.63	2.43	2.58	3.00	3.00	2.75	2.00	2.70	2.40	2.61	2.50	2.62	2.53
p stat_(*=Sig @ p<=.05)		.713	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.47	2.41	3.00	2.50	2.47	2.50	2.37	2.47	x 2.67	x 2.50	2.58	2.13	2.56	2.30	2.49	2.30	2.47	2.47
p stat_(*=Sig @ p<=.05)		.707	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NNRXWHY NQ11	2.85	2.88	2.80	2.89	2.90	2.78	2.91			3.00	3.00	2.40	2.82	2.88	2.86	2.71	2.75	3.00		
p stat_(*=Sig @ p<=.05)	.681		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NNRXWYNT NQ12	2.33	2.40	2.40	2.44	2.30	2.22	2.49			3.00	2.00	1.89	2.21	2.44	2.26	3.00	2.10	2.69		
p stat_(*=Sig @ p<=.05)	.514		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NRXBST NQ13	2.64	2.55	3.00	2.83	2.90	2.52	2.33	2.74		3.00	2.20	2.40	2.54	2.76	2.62	3.00	2.47	2.93		
p stat_(*=Sig @ p<=.05)	.297		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
COMPOSITE	2.61	2.61	3.00	2.68	2.75	2.57	2.44	2.71	x	x	x	3.00	2.40	2.23	2.52	2.69	2.58	2.90	2.44	2.87
p stat_(*=Sig @ p<=.05)	1.00		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		

ACCESS TO SPECIALIZED SERVICES

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
NEZMDEQ NQ20	2.27	2.15		2.50	2.20	2.00	2.00	1.75				3.00		2.50	1.67	2.22	2.50	2.50	2.00
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTHP NQ23	2.27	1.94		2.00	2.50	2.20	2.33	2.38			1.50	3.00	2.00	2.41	2.00	2.32	2.00	2.40	2.09
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTC NQ26	2.17	2.08		1.50	2.33	2.15	2.38	2.19	1.00		1.67	2.00	2.33	2.11	2.24	2.28	1.67	1.82	2.27
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.24	2.06	x	2.00	2.34	2.12	2.24	2.11	x 1.00	x	1.58	2.67	2.17	2.34	1.97	2.27	2.06	2.24	2.12
p stat_(*=Sig @ p<=.05)		.062	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER	AS-IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
PRBSEE4 Q46	87%	75%		80%	94%	80%	83%	78%		100%		100%	88%	100%	87%	86%	87%	83%	90%	83%
CARNES4 Q15	91%	88%	100%	86%	97%	87%	92%	93%		100%		33%	100%	89%	91%	92%	93%	76%	91%	93%
AVERAGE	88.97	81.22	100.0	83.02	95.77	83.33	87.89	85.67	x	100.0	x	66.67	93.75	94.44	88.83	89.20	90.05	79.76	90.67	87.96

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTH	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
CARSN4 Q4	89%	90%	100%	88%	90%	90%	86%	92%			67%	100%	83%	84%	96%	91%	78%	88%	92%	
APGET4 Q6	82%	84%	50%	88%	82%	85%	73%	85%	100%	33%	0%	100%	86%	92%	77%	92%	83%	75%	80%	88%
AVERAGE	85.47	87.16	75.00	88.23	85.93	87.83	79.52	88.31	100.0	33.33		83.33	92.86	87.82	80.80	93.77	86.97	76.39	83.86	90.38

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
DREXPL4 Q32	92%	93%	100%	90%	94%	92%	89%	91%	100%	75%	100%	92%	91%	95%	93%	83%	91%	94%
DRLSTN4 Q33	94%	94%	100%	92%	97%	94%	89%	93%	100%	100%	95%	100%	94%	92%	93%	94%	94%	94%
DRESPU4 Q34	95%	95%	100%	95%	97%	94%	93%	94%	100%	100%	100%	92%	98%	92%	96%	94%	95%	96%
DRTMEN4 Q37	82%	86%	100%	76%	87%	77%	84%	86%	67%	50%	85%	92%	81%	86%	84%	67%	82%	83%
AVERAGE	90.8	92.0	100	88.4	93.8	89.7	88.8	91.1	x 91.7	x 81.3	95.0	94.2	90.8	91.5	91.6	84.7	90.5	91.5

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER	AS-IAN	NATV HAW/PAC ILND	AMER IND/ALSK NATV	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
PBCLCS4 Q50	83%	77%	100%	93%	84%	81%	69%	84%	67%		67%	83%	75%	87%	73%	84%	70%	81%	89%
CSRESP Q51	91%	91%	100%	93%	94%	93%	79%	91%	100%		100%	100%	75%	93%	87%	91%	90%	90%	95%
AVERAGE	86.68	83.89	100.0	92.86	88.71	87.04	73.90	87.78	x 83.33		x 83.33	91.67	75.00	90.18	80.00	87.39	80.00	85.15	92.11



SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
NRXWHY Q11	93%	94%	90%	95%	95%	89%	95%			100%	100%	70%	91%	94%	93%	86%	88%	100%
NRXWYNT Q12	67%	70%	70%	72%	65%	61%	74%			100%	50%	44%	61%	72%	63%	100%	55%	85%
RXBST Q13	82%	78%	100%	92%	95%	76%	67%	87%		100%	60%	70%	77%	88%	81%	100%	73%	96%
AVERAGE	80.5	80.5	100	83.9	87.4	78.7	72.2	85.6	x	x	x	100	70.0	61.5	76.1	84.6	79.1	93.7

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
EZMDEQ Q20	91%	70%	100%	80%	100%	100%	75%					100%	100%	67%	89%	100%	100%	80%	
EZTHP Q23	85%	61%	57%	100%	80%	100%	77%			50%	100%	100%	94%	63%	84%	83%	87%	82%	
EZTC Q26	75%	67%	33%	100%	70%	88%	74%	0%	67%	75%	83%	74%	76%	79%	56%	55%	81%		
AVERAGE	83.5	66.1	x	63.5	93.3	83.3	95.8	75.3	x	x	58.3	91.7	91.7	89.4	68.5	84.2	79.6	80.4	81.0

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
DRTLKU Q38	88%	84%	67%	90%	91%	83%	87%	90%	100%	100%	80%	69%	93%	82%	89%	83%	86%	91%
DRUNCON Q43	94%	89%		75%	100%	89%	100%	92%	100%	100%	100%	100%	100%	91%	95%	88%	92%	95%
DRUNFAM Q44	90%	84%		75%	91%	89%	94%	86%	100%	100%	100%	100%	100%	84%	90%	88%	79%	94%
AVERAGE	90.5	85.5	66.7	79.9	94.0	86.9	93.6	89.0	x 100	x 100	93.3	89.7	97.5	85.9	91.4	86.1	85.7	93.5

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WVCH TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
HELPCONT Q18	94%	94%	100%	92%	88%	100%	100%			100%	80%	50%	90%	100%	92%	100%	89%	100%
HLPCOORD Q29	56%	60%	100%	53%	67%	47%	50%	61%	100%	67%	38%	40%	52%	61%	58%	43%	53%	59%
AVERAGE	74.6	76.8	100	76.7	79.5	67.4	75.0	80.6	x 100	x 83.3	58.8	45.0	70.8	80.3	75.2	71.4	71.2	79.6

INDEX OF ADULT TABLES

PAGE QUESTION TITLE

1. INTRODUCTION

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

2. YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

3. YOUR PERSONAL DOCTOR

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

4. GETTING HEALTH CARE FROM SPECIALISTS

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

PAGE QUESTION TITLE

5. YOUR HEALTH PLAN

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

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

5. ADDITIONAL QUESTIONS

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

5. ACCESS TO DENTAL CARE

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



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

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

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

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

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

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

PAGE QUESTION TITLE

8. RATINGS

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

9. COMPOSITES

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

10. GLOBAL PROPORTION COMPOSITES

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

INDEX OF CHILD TABLES

PAGE QUESTION TITLE

1. INTRODUCTION

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

### 3. SPECIALIZED SERVICES

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

PAGE QUESTION TITLE

### 4. YOUR CHILD'S PERSONAL DOCTOR

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

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

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

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

5. GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

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

6. YOUR CHILD'S HEALTH PLAN

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

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

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

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

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

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

PAGE QUESTION TITLE

7. PRESCRIPTION MEDICINES

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

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

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

7. ACCESS TO DENTAL CARE

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

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

7. ADDITIONAL QUESTIONS

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



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

8. ABOUT YOUR CHILD AND YOU

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

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

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

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

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

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

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

91 Q78 WHAT IS YOUR AGE?

92 Q79 ARE YOU MALE OR FEMALE?

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

94 Q81 HOW ARE YOU RELATED TO THE CHILD?

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

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

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

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

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

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

PAGE QUESTION TITLE

9. RATINGS

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

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

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

104 NQ54 RATING OF CHILD'S HEALTH PLAN

10. COMPOSITES

105 GETTING NEEDED CARE

106 GETTING CARE QUICKLY

107 HOW WELL DOCTORS COMMUNICATE

108 CUSTOMER SERVICE

109 SHARED DECISION MAKING  
110 ACCESS TO SPECIALIZED SERVICES

11. GLOBAL PROPORTION COMPOSITES

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

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

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

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

**SURVEY INSTRUCTIONS**

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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*





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

- Yes
- No

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

- Yes
- No

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

- Never
- Sometimes
- Usually
- Always

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes, definitely
- Yes, somewhat
- No

### ACCESS TO DENTAL CARE

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

- Yes
- No

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

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

### ABOUT YOU

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

- Excellent
- Very Good
- Good
- Fair
- Poor



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

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

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

- Yes
- No → **Go to Question 50**

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

- Yes
- No

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

- Yes
- No → **Go to Question 52**

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

- Yes
- No

52. What is your age?

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

53. Are you male or female?

- Male
- Female

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

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

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

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

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

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

57. Did someone help you complete this survey?

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

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

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

**THANK YOU**

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

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

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



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

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

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Correct  
Mark 

Incorrect  
Marks



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

- Yes → *Go to Question 1*
- No

↓ **START HERE** ↓

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

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

\_\_\_\_\_

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

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

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

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



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

- Yes
- No

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

- Yes
- No

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No

**SPECIALIZED SERVICES**

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

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

- Yes
- No → *Go to Question 22*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 25*



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 28*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 30*

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

- Yes
- No

### YOUR CHILD'S PERSONAL DOCTOR

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

- Yes
- No → *Go to Question 45*

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

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

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

- Never
- Sometimes
- Usually
- Always



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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 37*

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 41*

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

- Never
- Sometimes
- Usually
- Always

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

0 1 2 3 4 5 6 7 8 9 10

Worst Personal 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

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

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

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

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

**GETTING HEALTH CARE FROM SPECIALISTS**

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

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

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

- Yes
- No → **Go to Question 49**

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

- Never
- Sometimes
- Usually
- Always

**YOUR CHILD'S HEALTH PLAN**

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

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

- Yes
- No → **Go to Question 52**

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

- Never
- Sometimes
- Usually
- Always



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → **Go to Question 54**

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

- Never
- Sometimes
- Usually
- Always

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

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

**PRESCRIPTION MEDICINES**

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

- Yes
- No → **Go to Question 57a**

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

**ACCESS TO DENTAL CARE**

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

- Yes
- No

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

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



## ADDITIONAL QUESTIONS

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

- Yes
- No → *Go to Question 58*

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

- Yes
- No

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

- Yes
- No

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

## ABOUT YOUR CHILD AND YOU

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Yes
- No → *Go to Question 63*

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

- Yes
- No → *Go to Question 63*

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

- Yes
- No

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

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



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

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

78. What is your age?

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

79. Are you male or female?

- Male
- Female

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

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

81. How are you related to the child?

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

82. Did someone help you complete this survey?

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

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

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

**THANK YOU**

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

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

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







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

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

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

**INSTRUCCIONES PARA EL CUESTIONARIO**

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

Marca  
Correcta ●

Marca  
Incorrecta   

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

● Sí → *Pase a la Pregunta 1*  
○ No

↓ **COMIENCE AQUI** ↓

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

- Sí → *Pase a la pregunta 3*
- No

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

\_\_\_\_\_



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

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

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

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

12. Cuando hablaron de comenzar o suspender una medicina recetada, ¿le preguntó un doctor u otro profesional médico sobre lo que usted creía que sería lo mejor para usted?

- Sí
- No

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

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

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

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

### SU DOCTOR PERSONAL

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

- Sí
- No → *Pase a la pregunta 24*

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

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

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

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

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

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

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

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



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

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

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

- Sí
- No → *Pase a la pregunta 23*

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

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

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

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

## LA ATENCIÓN MÉDICA QUE RECIBÍÓ DE ESPECIALISTAS

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

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

- Sí
- No → *Pase a la pregunta 28*

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

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

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

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





## PREGUNTAS ADICIONALES

Un proveedor de salud puede ser un doctor generalista, un doctor especialista, una enfermera practicante, un asistente médico, una enfermera o cualquiera que usted vería para cuidado de salud.

35e. En los últimos 6 meses, ¿visitó usted a un profesional médico para un problema de salud específico?

- Sí
- No → *Pase a la pregunta 35i*

35f. ¿Cuánto esfuerzo se hizo para ayudarlo/a a entender su problema de salud?

- Ningún esfuerzo en absoluto
- Se hizo un poco de esfuerzo
- Se hizo algún esfuerzo
- Se hizo un gran esfuerzo

35g. ¿Cuánto esfuerzo se hizo para escuchar las cosas que más le importan a usted sobre su problema de salud?

- Ningún esfuerzo en absoluto
- Se hizo un poco de esfuerzo
- Se hizo algún esfuerzo
- Se hizo un gran esfuerzo

35h. ¿Cuánto esfuerzo se hizo para incluir lo que más le importa a usted en escoger que hacer próximamente?

- Ningún esfuerzo en absoluto
- Se hizo un poco de esfuerzo
- Se hizo algún esfuerzo
- Se hizo un gran esfuerzo

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

- Sí
- No → *Pase a la pregunta 35e*

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

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

35i. Opciones para su tratamiento o atención médica pueden ser opciones sobre medicinas, cirugías u otros tratamientos. En los últimos 6 meses, ¿le dijo este profesional médico que había más de una opción para su tratamiento o atención médica?

- Sí
- No → *Pase a la pregunta 35l*

35j. En los últimos 6 meses, ¿habló su profesional médico con usted acerca de las ventajas y desventajas de cada opción de tratamiento o atención médica?

- Sí
- No

35k. En los últimos 6 meses, cuando había más de una opción de tratamiento o atención médica, ¿su profesional médico le preguntó cuál opción le convenía más a usted?

- Sí
- No

35l. En los últimos 6 meses, ¿con qué frecuencia le hizo fácil su profesional médico el hacer preguntas o plantear inquietudes?

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

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

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

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

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

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

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

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

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

- Sí, definitivamente
- Sí, algo
- No

## ACCESO A CUIDADO DENTAL

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

- Sí
- No

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

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

## ACERCA DE USTED

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

38. Desde el 1 de julio del 2014, ¿le han puesto la vacuna para la influenza o gripe ya sea en inyección o con un rociador o spray nasal?

- Sí
- No
- No sé

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

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

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

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

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

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

42. En los últimos 6 meses, ¿qué tan seguido le ofreció o habló con su doctor o profesional médico sobre métodos y estrategias, aparte de medicamentos, para ayudarlo(a) a dejar de fumar o usar tabaco? Ejemplos de métodos y estrategias son: una línea telefónica de ayuda, consejería individual o terapia de grupo o un programa para dejar de fumar.
- Nunca
  - A veces
  - La mayoría de las veces
  - Siempre
43. ¿Toma aspirina todos los días o un día sí y otro día no?
- Sí
  - No
  - No sé
44. ¿Tiene algún problema de salud o toma algún medicamento que hace que sea peligroso para usted tomar aspirina?
- Sí
  - No
  - No sé
45. ¿Ha hablado alguna vez un doctor o profesional médico con usted acerca de los riesgos y beneficios de la aspirina para prevenir un infarto o un derrame cerebral?
- Sí
  - No

46. Que usted sepa, ¿tiene alguna de las siguientes enfermedades? Marque una o más.
- Colesterol alto
  - Presión sanguínea alta (hipertensión arterial)
  - Padres o hermanos que hayan tenido un infarto antes de los 60 años
47. ¿Alguna vez le ha dicho un doctor que usted tiene alguna de las siguientes enfermedades? Marque una o más.
- Un infarto
  - Angina de pecho o cardiopatía coronaria
  - Un derrame cerebral
  - Algún tipo de diabetes o niveles altos de azúcar en la sangre
48. En los últimos 6 meses, ¿recibió usted atención médica 3 veces o más para la misma enfermedad o problema?
- Sí
  - No → *Pase a la pregunta 50*
49. ¿Se trata de una enfermedad o problema que ha durado al menos 3 meses? No incluya el embarazo ni la menopausia.
- Sí
  - No
50. ¿Necesita o toma ahora alguna medicina recetada por un doctor? No incluya anticonceptivos.
- Sí
  - No → *Pase a la pregunta 52*



51. ¿Es esta medicina para tratar una enfermedad o problema que ha durado al menos 3 meses? **No** incluya el embarazo ni la menopausia.

- Sí
- No

52. ¿Qué edad tiene?

- 18 a 24 años
- 25 a 34
- 35 a 44
- 45 a 54
- 55 a 64
- 65 a 74
- 75 años o más

53. ¿Es usted hombre o mujer?

- Hombre
- Mujer

54. ¿Cuál es el grado o nivel escolar más alto que usted ha completado?

- 8 años de escuela o menos
- 9 a 12 años de escuela, pero sin graduarse
- Graduado de la escuela secundaria (high school), Diploma de escuela secundaria, preparatoria, o su equivalente (o GED)
- Algunos cursos universitarios o un título universitario de un programa de 2 años
- Título universitario de 4 años
- Título universitario de más de 4 años

55. ¿Es usted de origen o ascendencia hispana o latina?

- Sí, hispano o latino
- No, ni hispano ni latino

56. ¿A qué raza pertenece? Marque una o más.

- Blanca
  - Negra o afroamericana
  - Asiática
  - Nativo de Hawái o de otras islas del Pacífico
  - Indígena americano o nativo de Alaska
  - Otra (Por favor escriba en letra de molde)
- 

57. ¿Le ayudó alguien a completar esta encuesta?

- Sí → *Pase a la pregunta 58*
- No → *Gracias. Por favor devuelva esta encuesta en el sobre con el porte o franqueo pagado.*

58. ¿Cómo le ayudó a usted esta persona? Marque una o más.

- Me leyó las preguntas
  - Anotó las respuestas que le di
  - Contestó las preguntas por mí
  - Tradujo las preguntas a mi idioma
  - Me ayudó de otra forma (Por favor escriba en letra de molde)
- 

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

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

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





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

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

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

**INSTRUCCIONES PARA EL CUESTIONARIO**

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

Marca  
Correcta



Marca  
Incorrecta



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

- Sí ➔ *Pase a la Pregunta 1*
- No



**COMIENCE AQUI**



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

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

- Sí ➔ *Pase a la pregunta 3*
- No

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

---

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

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

3. En los últimos 6 meses, ¿tuvo su niño una enfermedad, lesión, o problema de salud para el cual necesitó atención inmediata en una clínica, en una sala de emergencia o en un consultorio médico?

Sí  
 No → *Pase a la pregunta 5*

4. En los últimos 6 meses, cuando su niño necesitó atención inmediata, ¿con qué frecuencia atendieron a su niño tan pronto como él o ella lo necesitaba?

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

5. En los últimos 6 meses, ¿hizo alguna cita para un chequeo o una consulta regular para su niño en un consultorio médico o en una clínica?

Sí  
 No → *Pase a la pregunta 7*

6. En los últimos 6 meses, ¿con qué frecuencia consiguió una cita para un chequeo o una consulta regular para su niño en un consultorio médico o en una clínica tan pronto como su niño la necesitaba?

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

7. En los últimos 6 meses, sin contar las veces en que su niño fue a una sala de emergencia, ¿cuántas veces fue su niño a un consultorio médico o a una clínica para que lo atendieran?

Ninguna vez → *Pase a la pregunta 16*  
 1 vez  
 2  
 3  
 4  
 5 a 9  
 10 veces o más

8. En los últimos 6 meses, ¿hablaron usted y el doctor u otro profesional médico de su niño sobre cosas específicas que usted podría hacer para prevenir que su niño se enferme?

Sí  
 No

9. En los últimos 6 meses, ¿con qué frecuencia le contestaron sus preguntas los doctores u otros profesionales médicos de su niño?

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

10. En los últimos 6 meses, ¿hablaron usted y el doctor u otro profesional médico de su niño sobre comenzar o suspender una medicina recetada?

- Sí
- No → *Pase a la pregunta 14*

11. ¿Hablaron usted y un doctor u otro profesional médico sobre las razones por las que tal vez usted quiera que su niño tome una medicina?

- Sí
- No

12. ¿Hablaron usted y un doctor u otro profesional médico sobre las razones por las que tal vez usted no quiera que su niño tome una medicina?

- Sí
- No

13. Cuando hablaron de comenzar o suspender una medicina recetada para su niño, ¿le preguntó un doctor u otro profesional médico sobre lo que usted creía que sería lo mejor para su niño?

- Sí
- No

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

- 
- 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?

- |                                 |                       |                       |                       |                       |                       |                       |                                  |                       |                       |                       |
|---------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|-----------------------|-----------------------|-----------------------|
| <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 |                       |                       |                       |

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?

- |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <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               |                       |                       |                       |                       |                       |                       |                       | El mejor              |                       |                       |
| especialista          |                       |                       |                       |                       |                       |                       |                       | especialista          |                       |                       |
| posible               |                       |                       |                       |                       |                       |                       |                       | posible               |                       |                       |

## EL PLAN DE SALUD DE SU NIÑO

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

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

- Sí
- No → *Pase a la pregunta 52*

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

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

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

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

52. En los últimos 6 meses, ¿le dio el plan de salud de su niño algún formulario para llenar?

- Sí
- No → *Pase a la pregunta 54*

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

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

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

- |                               |                                |
|-------------------------------|--------------------------------|
| ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○         |                                |
| 0 1 2 3 4 5 6 7 8 9 10        |                                |
| El peor plan de salud posible | El mejor plan de salud posible |

### MEDICINAS RECETADAS

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

- Sí
- No → *Pase a la pregunta 57a*

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

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

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

- Sí
- No

### ACCESO A CUIDADO DENTAL

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

- Sí
- No

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

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



## PREGUNTAS ADICIONALES

57c. Las opciones de tratamiento o atención médica para su niño pueden incluir opciones sobre medicinas, cirugía u otro tratamiento.

En los últimos 6 meses, ¿le dijo su profesional médico que había más de una opción para el tratamiento o atención médica de su niño?

- Sí
- No → *Pase a la pregunta 58*

57d. En los últimos 6 meses, ¿le habló su profesional médico acerca de las cosas buenas y las cosas malas de cada opción de tratamiento o de atención médica de su niño?

- Sí
- No

57e. En los últimos 6 meses, cuando había más de una opción de tratamiento o de atención médica para su niño, ¿su profesional médico le preguntó cuál opción le convenía más a su niño?

- Sí
- No

57f. En los últimos 6 meses, ¿con qué frecuencia su profesional médico considero y respeto las opciones de atención médica que usted penso funcionarían mejor para su niño?

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

57g. En los últimos 6 meses, ¿con qué frecuencia el profesional médico de su niño le animo a usted a hacer preguntas y plantear inquietudes?

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

57h. En los últimos 6 meses, ¿con qué frecuencia el profesional médico de su niño le hizo fácil a usted el hacer preguntas y plantear inquietudes?

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

## ACERCA DE USTED Y DE SU NIÑO

58. En general, ¿cómo calificaría toda la salud de su niño?

- Excelente
- Muy buena
- Buena
- Regular
- Mala

59. En general, ¿cómo calificaría toda la salud mental o emocional de su niño?

- Excelente
- Muy buena
- Buena
- Regular
- Mala

60. ¿Actualmente necesita o usa su niño una medicina recetada por un doctor (aparte de vitaminas)?

- Sí
- No → *Pase a la pregunta 63*

61. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?
- Sí  
 No → *Pase a la pregunta 63*
62. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?
- Sí  
 No
63. ¿Necesita o usa su niño más servicios médicos, de salud mental o educativos de lo que es normal para la mayoría de los niños de la misma edad?
- Sí  
 No → *Pase a la pregunta 66*
64. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?
- Sí  
 No → *Pase a la pregunta 66*
65. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?
- Sí  
 No
66. ¿Está su niño limitado o impedido de alguna manera en su habilidad de hacer lo que pueden hacer la mayoría de los niños de la misma edad?
- Sí  
 No → *Pase a la pregunta 69*

67. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?
- Sí  
 No → *Pase a la pregunta 69*
68. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?
- Sí  
 No
69. ¿Necesita o recibe su niño terapia especial, tal como terapia física, ocupacional o del habla?
- Sí  
 No → *Pase a la pregunta 72*
70. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?
- Sí  
 No → *Pase a la pregunta 72*
71. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?
- Sí  
 No
72. ¿Tiene su niño algún problema emocional, de desarrollo o de comportamiento, para el cual necesita o recibe tratamiento o consejería?
- Sí  
 No → *Pase a la pregunta 74*
73. ¿Ha durado este problema o se espera que dure por lo menos 12 meses?
- Sí  
 No

74. ¿Qué edad tiene su niño?

Menos de un año

AÑOS (escriba la respuesta)

75. ¿Es su niño de sexo masculino o femenino?

Masculino

Femenino

76. ¿Es su niño de origen o ascendencia hispana o latina?

Sí, hispano o latino

No, ni hispano ni latino

77. ¿A qué raza pertenece su niño?  
Marque una o más.

Blanca

Negra o afroamericana

Asiática

Nativo de Hawái o de otras islas del Pacífico

Indígena americano o nativo de Alaska

Otra (Por favor escriba en letra de molde)

---

78. ¿Qué edad tiene usted?

Menos de 18 años

18 a 24

25 a 34

35 a 44

45 a 54

55 a 64

65 a 74

75 años o más

79. ¿Es usted hombre o mujer?

Hombre

Mujer

80. ¿Cuál es el grado o nivel escolar más alto que usted ha completado?

8 años de escuela o menos

9 a 12 años de escuela, pero sin graduarse

Graduado de la escuela secundaria (high school), Diploma de escuela secundaria, preparatoria, o su equivalente (o GED)

Algunos cursos universitarios o un título universitario de un programa de 2 años

Título universitario de 4 años

Título universitario de más de 4 años

81. ¿Qué relación tiene con el niño?

Madre o padre

Abuelo o abuela

Tía o tío

Hermano o hermana mayor

Otro familiar

Tutor legal del niño

Otra persona

82. ¿Le ayudó alguien a completar esta encuesta?

Sí → **Pase a la pregunta 83**

No → **Gracias. Por favor devuelva esta encuesta en el sobre con el porte o franqueo pagado.**

83. ¿Cómo le ayudó a usted esta persona? Marque una o más.

Me leyó las preguntas

Anotó las respuestas que le di

Contestó las preguntas por mí

Tradujo las preguntas a mi idioma

Me ayudó de otra forma (Por favor escriba en letra de molde)

---

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

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

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



DIAL.SCREEN

DS. INTERVIEWER: YOU MAY DO THE INTERVIEW WITH ONLY THE NAMED  
RESPONDENT.

PHONE NUMBER ---> [1 CELL PHONE - HAND DIAL ([AREA\$]) [FRST3\$] -  
[LAST4\$] /\*\*\* \*\*\*-\*\*\*\*]

(IWER: THIS IS NOT A PROXY INTERVIEW.)

Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may  
be monitored and recorded for quality control. May I please speak with  
[MEMBER FIRST NAME] [MEMBER LAST NAME]?

(IF NEEDED: "We are conducting an important study to find out how  
satisfied people are with Oregon Health Plan. The results of the  
study will help Oregon Health Plan improve the care they provide and will also  
help consumers when they choose health care plans.")

(IF NEEDED: "The interview is completely confidential and voluntary,  
and will not affect your health care or benefits in any way.")

(IF NEEDED: "This is purely a research study -- we are polling people  
about their health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD  
LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the  
deadline for mailing surveys has passed and we're now in the telephone  
phase of this study. May I continue?")

01. CONTINUE
02. ALREADY COMPLETED AND MAILED SURVEY BACK
03. NEW PHONE NUMBER
04. REFUSAL
05. APPOINTMENT
06. NEVER HEARD OF R
07. KNOWS R BUT HAS NO NEW NUMBER FOR R
08. RNA, ANS MACH, RETURN TO COVERSHEET
09. LANGUAGE PROBLEM -- SPEAKS SPANISH
10. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH

IF DIAL.SCREEN = 01, GO TO RE.INTRO

IF DIAL.SCREEN = 02, GO TO MAIL.SCREEN

IF DIAL.SCREEN = 03, ENTER NEW NUMBER ON COVERSHEET AND RE-DIAL

RETURN TO COVERSHEET



## RE.INTRO

RE.INTRO. (INTERVIEWER: READ PARENS TEXT IF R ISN'T PERSON WHO ANSWERED  
PHONE OR HAS NOT HEARD IT YET.)

(Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may  
be monitored and recorded for quality control.)

We are conducting an important study to find out how satisfied  
people are with Oregon Health Plan. The results of the study will help  
Oregon Health Plan improve the care they provide and will also help consumers  
when they choose health care plans.

The interview is completely confidential and voluntary, and will not  
affect your health care or benefits in any way.

(IF R ASKS: "How long will this take?", EXPLAIN: "The questions should  
take about 12-15 minutes to answer.")

(IF NEEDED: "This is purely a research study -- we are polling people  
about their health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD  
LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the  
deadline for mailing surveys has passed and we're now in the telephone  
phase of this study. May I continue?")

("DK" NOT ALLOWED)

1. CONTINUE
2. APPOINTMENT
3. REFUSAL
4. LANGUAGE PROBLEM -- SPEAKS SPANISH
5. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH
  
6. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)
7. RETURN TO CS

## SEX

SEX. (IWER: RECORD RESPONDENT'S SEX, 'DK' NOT ALLOWED)

1. MALE
2. FEMALE

## SPAN.VAR

(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

1. Spanish
2. English

MEMBER

Q1. / MEMBER

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

(IWER: IF R SAYS "LEFT PLAN" OR "SWITCHED PLANS" OR "NO LONGER INSURED" ENTER "2". IF R IS NOT SURE IF HE/SHE IS PART OF Oregon Health Plan, ENTER "2".)

- 1. YES --> CK.PLMSTCR
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

NPLNAME

Q2. / NPLNAME

What is the name of your health plan?

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS Oregon Health Plan]

[(ENTER 5 IF R SAYS: MEDICAID)]

(IF R SAYS SOMETHING CLOSE TO Oregon Health Plan, ENTER "2")

(IF R NOT SURE OF PLAN NAME, ENTER "2")

- 1. EXACT MATCH -----> CK.PLMSTCR
- 2. POSSIBLE MATCH -----> PLNAME
- 3. NOT A MATCH -----> PLNAME
- 4. RESPONDENT NO LONGER INSURED -----> NO.INSUR
- 5. RESPONDENT INSURED BY MEDICAID BUT DOESN'T -----> CK.PLMSTCR  
KNOW PLAN NAME
- 6. RESPONDENT INSURED BUT NOT BY MEDICAID -----> NO.INSUR

PLNAME

Q2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)

CK.PLMSTCR:

-----  
IF NPLNAME = NOT A MATCH (3), GO TO END.SCREEN

INTRO.INCARE

INTRO.INCARE

Now I'm going to ask you some questions about your own health care. When you answer these questions, please do NOT include dental visits or care you got when you stayed overnight in a hospital.

INCARE

Q3. / INCARE

In the last 6 months, did you have an illness, injury, or condition that NEEDED CARE RIGHT AWAY in a clinic, emergency room, or doctor's office?

- 1. YES
- 2. NO -----> APMAKE4

DK/REFUSAL/NOT ASCERTAINED --> APMAKE4

CARSN4

Q4. / CARSN4

In the last 6 months, when you NEEDED CARE RIGHT AWAY, how often did you get care as soon as you needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

APMAKE4

Q5. / APMAKE4

In the last 6 months, did you make any appointments for a CHECK-UP OR ROUTINE CARE at a doctor's office or clinic?

- 1. YES
- 2. NO -----> OFCTIM4

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

APGET4

Q6. / APGET4

In the last 6 months, how often did you get an appointment for a CHECK-UP OR ROUTINE CARE at a doctor's office or clinic as soon as you needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

OFCTIM4

Q7. / OFCTIM4

In the last 6 months, NOT counting the times you went to an emergency room, how many times did you go to a doctor's office or clinic to get health care for yourself?

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

(IWER: IF NEEDED CLARIFY: "Please don't include dental care you received.")

(IWER: IF NEEDED CLARIFY, "Please include ALL doctor visits including those for routine, regular care and for an illness or injury.")

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

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

IF OFCTIM4=0 OR DK/REFUSAL THEN GO TO PRSNLD4

PRVENT5

Q8. / PRVENT5

In the last 6 months, did you and a doctor or other health provider talk about specific things you could do to prevent illness?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RXSTP

9. / RXSTP

In the last 6 months, did you and a doctor or other health provider talk about starting or stopping a prescription medicine?

- 1. YES
- 2. NO -----> RTALLCR

DK/REFUSAL/NOT ASCERTAINED --> RTALLCR

NRXWHY

10. / NRXWHY

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

NRXWYNT

11. / NRXWYNT

Did you and a doctor or other health provider talk about the reasons you might NOT want to take a medicine?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RXBST

12. / RXBST

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RTALLCR

13. / RTALLCR

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

(IF NEEDED: "Please do not include any dental care you may have received.")

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

CARNES4

14. / CARNES4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PRSNLD4

15. / PRSNLD4

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

Do you have a personal doctor?

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

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

DRTMS

16. / DRTMS

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

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

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

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

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

DREXPL4

17. / DREXPL4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRLSTN4

18. / DRLSTN4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRESPU4

19. / DRESPU4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTMEN4

20. / DRTMEN4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DIFFDR

21. / DIFFDR

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

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

DK/REFUSAL/NOT ASCERTAINED --> RATEDR4

DRINFO

22. / DRINFO

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)



RATEDR4

23. / RATEDR4

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

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

INTRO.SPDR

Now I'm going to ask you some questions about specialists. When you answer these questions, please do NOT include dental visits or care you got when you stayed overnight in a hospital

NDSPDR4

24. / NDSPDR4

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

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

(CLARIFY IF NEEDED: "Specialists are doctors who specialize in one area of health care. Please include all doctors you consider to be specialists, but do not include any dental visits.")

(IWER: IF RESPONDENT ASKS IF A PARTICULAR TYPE OF DOCTOR IS A SPECIALIST, CLARIFY, "I don't have any information about that, so please just interpret it however it seems best to you.")

(CLARIFY IF NEEDED: "You can interpret this question however it seems best to you.")

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

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

PRBSEE4

25. / PRBSEE4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

SPDRS

26. / SPDRS

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

(CLARIFY IF NEEDED: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. Would you say you've seen...")

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

- 0. NONE, -----> INTRO.PLAN
- 1. 1 SPECIALIST,
- 2. 2,
- 3. 3,
- 4. 4, OR
- 5. 5 OR MORE SPECIALISTS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> INTRO.PLAN

RTSPDR4

27. / RTSPDR4

We want to know your rating of the specialist you saw most often in the last 6 months.

Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

(Clarify if necessary: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.")

00            01 02 03 04 05 06 07 08 09    10

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN

Now I'm going to ask you some questions about your experience with your health plan.

LOOMAT4

28. / LOOMAT4

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

- 1. YES
- 2. NO -----> CLCSRV4

DK/REFUSAL/NOT ASCERTAINED --> CLCSRV4

UNDINF4

29. / UNDINF4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CLCSRV4

30. / CLCSRV4

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

- 1. YES
- 2. NO -----> PLPRWK4

DK/REFUSAL/NOT ASCERTAINED --> PLPRWK4

PBCLCS4

31. / PBCLCS4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CSRESP

32. / CSRESP

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLPRWK4

33. / PLPRWK4

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

- 1. YES
- 2. NO -----> RTPLEXP

DK/REFUSAL/NOT ASCERTAINED --> RTPLEXP

PBPLPW4

34. / PBPLPW4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTPLEXP

35. / RTPLEXP

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

00            01 02 03 04 05 06 07 08 09    10

DK/REFUSAL/NOT ASCERTAINED

HPMDEQ

35a. / HPMDEQ

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

- 1. YES
  - 2. NO -----> POSTHP
- DK/REFUSAL/NOT ASCERTAINED

EZMDHP

35b. / EZMDHP

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

- 1. NEVER
  - 2. SOMETIMES
  - 3. USUALLY
  - 4. ALWAYS
- DK/REFUSAL/NOT ASCERTAINED

POSTHP

35c. / POSTHP

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

- 1. YES
  - 2. NO -----> DTLKTF
- DK/REFUSAL/NOT ASCERTAINED

EZPOST

35d. / EZPOST

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

- 1. NEVER
  - 2. SOMETIMES
  - 3. USUALLY
  - 4. ALWAYS
- DK/REFUSAL/NOT ASCERTAINED

INTRO.SHLTHIS

INTRO.SHLTHIS

A health provider could be a general doctor, a specialist doctor, a nurse practitioner, a physician assistant, a nurse or anyone else you would see for health care. Please keep this in mind as you answer the following questions.

SHLTHIS

35e. / SHLTHIS

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

- 1. YES
- 2. NO -----> CHTREAT

DK/REFUSAL/NOT ASCERTAINED --> CHTREAT

EUNDER

35f. / EUNDER

How much effort was made to help you understand your health issue? Would you say...?

(READ LIST)

- 1. NO EFFORT AT ALL,
- 2. A LITTLE EFFORT WAS MADE,
- 3. SOME EFFORT WAS MADE, or
- 4. A LOT OF EFFORT WAS MADE

DK/REFUSAL/NOT ASCERTAINED

ELISTEN

35g. / ELISTEN

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

(READ LIST IF NECESSARY)

- 1. NO EFFORT AT ALL,
- 2. A LITTLE EFFORT WAS MADE,
- 3. SOME EFFORT WAS MADE, or
- 4. A LOT OF EFFORT WAS MADE

DK/REFUSAL/NOT ASCERTAINED

EINCLUD

35h. / EINCLUD

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

(READ LIST IF NECESSARY)

- 1. NO EFFORT AT ALL,
- 2. A LITTLE EFFORT WAS MADE,
- 3. SOME EFFORT WAS MADE, or
- 4. A LOT OF EFFORT WAS MADE

DK/REFUSAL/NOT ASCERTAINED

## CHTREAT

35i. / CHTREAT

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

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

1. YES
2. NO -----> RESPCHT

DK/REFUSAL/NOT ASCERTAINED --> RESPCHT

## PCTREAT

35j. / PCTREAT

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

1. YES
  2. NO
- DK/REFUSAL/NOT ASCERTAINED

## BSTREAT

35k. / BSTREAT

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

1. YES
  2. NO
- DK/REFUSAL/NOT ASCERTAINED

## EASYQC

35l. / EASYQC

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DTLKTF

35m. / DTLKTF

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DINTER

35n. / DINTER

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

(READ LIST IF NECESSARY)

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

DK/REFUSAL/NOT ASCERTAINED

DRRUDE

35o. / DRRUDE

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

(READ LIST IF NECESSARY)

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

DK/REFUSAL/NOT ASCERTAINED

TRUSTDR

35p. / TRUSTDR

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

(READ LIST)

1. YES DEFINITELY,
2. YES SOMEWHAT, OR
3. NO?

DK/REFUSAL/NOT ASCERTAINED



REGDENT

35q. / REGDENT

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

1. YES
  2. NO
- DK/REFUSAL/NOT ASCERTAINED

DNTASAP

35r.

In the last 6 months, if you needed to see a dentist right away because of a DENTAL EMERGENCY, did you get to see a dentist as soon as you wanted?

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?
5. I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS (DO NOT READ)

DK/REFUSAL/NOT ASCERTAINED

HLTSTA4

36. / HLTSTA4

In general, how would you rate your overall health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

MNTLSTAT

37. / MNTLSTAT

In general, how would you rate your overall MENTAL OR EMOTIONAL health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

FLUSHOTQ

38. / FLUSHOTQ

Have you had either a flu shot or flu spray in the nose since July 1, 2014?

- 1. YES
- 2. NO
- 3. DON'T KNOW
- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

NOWSMOK

39. / NOWSMOK

Do you now smoke cigarettes or use tobacco...

(READ LIST)

- 1. EVERY DAY,
- 2. SOME DAYS, OR
- 3. NOT AT ALL? -----> ASPDAY
- 4. DON'T KNOW (DO NOT READ) -----> ASPDAY
- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ) --> ASPDAY

ADVQUIT9

40. / ADVQUIT9

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PATCH9

41. / PATCH9

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

WILLPWR9

42. / WILLPWR9

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPDAY

43. / ASPDAY

Do you take aspirin daily or every other day?

(IF NEEDED: "Would you say YES or NO?")

(IWER: If the R asks about whether a particular medication or Brand name is considered aspirin, you may provide the following clarification:

Aspirin: Bayer and Bufferin

Not Aspirin: Tylenol, Motrin, Aleve, Advil, ibuprofen and acetaminophen)

1. YES
2. NO
3. DON'T KNOW
9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPUSF

44. / ASPUSF

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

(IF NEEDED: "Would you say YES or NO?")

1. YES
2. NO
3. DON'T KNOW

9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPPRV

45. / ASPPRV

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.AWCOND  
INTRO.AWCOND

When I read the following list, please tell me if you are aware that you have any of these conditions.

PHAWCD.(1-3)  
46.(1-3) / PHAWCD.(1-3)

[First,/(Next/How About...)]

1. "High cholesterol"
2. "High blood pressure"
3. "Parent or sibling who had a heart attack before the age of 60"

(IWER IF NECESSARY: "Are you aware if you have this condition?")

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.DRCOND  
INTRO.DRCOND

When I read the following list, please tell me if a doctor has ever told you that you have any of these conditions.

PHDRCD.(1-4)  
47.(1-4) / PHDRCD.(1-4)

[First,/(Next/How About...)]

1. "A heart attack"
2. "Angina or coronary heart disease"
3. "A stroke"
4. "Any kind of diabetes or high blood sugar"

(IWER IF NECESSARY: "Has a doctor ever told you that you have this condition?")

[FOR PHDRCD.2: (IWER IF NEEDED, CLARIFY: Angina pectoris (an-JYE-nuh or AN-jin-uh PECK-ter-iss) is severe pain in the chest associated with insufficient blood supply to the heart.)]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## SMPROB

48. / SMPROB

I have just a few more questions.

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

1. YES
2. NO -----> TKMED

DK/REFUSAL/NOT ASCERTAINED --> TKMED

## PRBLST

49. / PRBLST

Is this a condition or problem that has lasted for at least 3 months? [Please do NOT include pregnancy or menopause.]

[(IWER IF NEEDED, CLARIFY: Menopause (men-ne-paws) is the time in a woman's life when she stops having menstrual periods. It is sometimes called 'the change of life' or 'the change'.)]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## TKMED

50. / TKMED

Do you now need or take medicine prescribed by a doctor? [Please do NOT include birth control.]

1. YES
2. NO -----> QAGE4

DK/REFUSAL\NOT ASCERTAINED --> QAGE4

## TRTCOND

51. / TRTCOND

Is this medicine to treat a condition that has lasted for at least three months? [Please do NOT include pregnancy or menopause.]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## QAGE4

52. / QAGE4

What is your age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your last birthday.")

(READ LIST IF NEEDED, "Are you...")

1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## QGENDER

53. / QGENDER

(IWER: RECORD RESPONDENT'S SEX, 'DK' NOT ALLOWED)

(ASK IF NECESSARY, "Are you male or female?")

1. MALE
2. FEMALE

## EDUCAT

54. / EDUCAT

What is the highest grade or level of school that you have COMPLETED?  
Did you complete...

(IWER: IF R SAYS HE/SHE HAD NON-ACADEMIC TRAINING, SUCH AS TRADE SCHOOL, PROBE: "Did you receive a high school diploma or GED?")

(IWER: ACADEMIC TRAINING BEYOND A HIGH SCHOOL DIPLOMA THAT DOES NOT LEAD TO A BACHELORS DEGREE, SHOULD BE CODED "4". IF R WENT TO BUSINESS SCHOOL OR GOT A 3-YEAR NURSING DEGREE, ENTER "4")

(IWER: IF R OFFERS MORE THAN ONE RESPONSE, FOR EXAMPLE: "SOME HIGH SCHOOL OR GED", ENTER THE HIGHEST NUMBER THAT APPLIES.)

(READ LIST)

1. 8TH GRADE OR LESS,
2. SOME HIGH SCHOOL, BUT DID NOT GRADUATE,
3. HIGH SCHOOL GRADUATE OR GED,
4. SOME COLLEGE OR 2-YEAR DEGREE,
5. 4-YEAR COLLEGE GRADUATE, OR
6. MORE THAN A 4-YEAR COLLEGE DEGREE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

LATINO

55. / LATINO

Are you of Hispanic or Latino origin or descent?

1. YES / HISPANIC OR LATINO
2. NO / NOT HISPANIC OR LATINO

DK/REFUSAL/NOT ASCERTAINED

INTRO.RACE

INTRO.RACE

I am going to read a list of race categories. For each category, please say YES or NO if it describes your race. I must ask you about all categories in case more than one applies.

PQRACE3.(1-6)

56.(1-6) / PQRACE3.(1-6)

[(Are you)]

1. "White"
2. "Black or African-American"
3. "Asian"
4. "Native Hawaiian or other Pacific Islander"
5. "American Indian or Alaska Native"
6. "Some other race"

(IWER: IF R REPLIES "WHY ARE YOU ASKING ABOUT MY RACE?" SAY "We ask about your race for demographic purposes only. We want to be sure that the people we survey accurately represent the racial diversity of managed care enrollees in this country.")

(IWER: If R answers with a category not listed here, such as "HISPANIC" or "AMERICAN" or "MIXED RACE", probe using the category "OTHER".)

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

ALL.DONE

THANKS.SCREEN.

Those are all the questions I have.

Thank you for taking part in this important interview.

Have a nice (day/evening). Good bye.

RETURN TO COVERSHEET

## DIAL.SCREEN

DS. INTERVIEWER: YOU MAY DO THE INTERVIEW WITH ONLY THE PARENT OR GUARDIAN WHO KNOWS MOST ABOUT FNAME LNAME'S HEALTH CARE.  
PHONE NUMBER ---> [1 CELL PHONE - HAND DIAL ([AREA\$]) [FRST3\$] - [LAST4\$] /\*\*\* \*\*\*-\*\*\*\*]

(IWER: THIS IS A PROXY INTERVIEW.)

Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may be monitored and recorded for quality control. May I please speak with the person who knows the most about [NAME OF CHILD]'s health care?

(IF NEEDED: "We are conducting an important study to find out how satisfied families are with Oregon Health Plan. The results of the study will help Oregon Health Plan improve the care they provide and will also help consumers when they choose health care plans.")

(IF NEEDED: "The interview is completely confidential and voluntary, and will not affect your child's health care or benefits in any way.")

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

01. CONTINUE
02. ALREADY COMPLETED AND MAILED SURVEY BACK
03. NEW PHONE NUMBER
04. REFUSAL
05. APPOINTMENT
06. NEVER HEARD OF R
07. KNOWS R BUT HAS NO NEW NUMBER FOR R
08. RNA, ANS MACH, RETURN TO COVERSHEET
09. LANGUAGE PROBLEM -- SPEAKS SPANISH
10. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH

IF DIAL.SCREEN = 01, GO TO RE.INTRO

IF DIAL.SCREEN = 02, GO TO MAIL.SCREEN

IF DIAL.SCREEN = 03, ENTER NEW NUMBER ON COVERSHEET AND RE-DIAL

RETURN TO COVERSHEET



## MAIL.SCREEN

MS. INTERVIEWER: WE STILL NEED TO CONDUCT A TELEPHONE INTERVIEW EVEN  
THOUGH R SAYS THEY'VE SENT BACK THE MAIL SURVEY.

I'm sorry, but we haven't received your survey back -- it may have been lost in the mail. And since the deadline for mailing surveys has passed, we're now in the telephone phase of this study. May I continue?

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

1. CONTINUE
2. REFUSAL BECAUSE ALREADY COMPLETED AND MAILED SURVEY BACK
3. REFUSAL
4. APPOINTMENT

IF MAIL.SCREEN = 1, GO TO RE.INTRO  
RETURN TO COVERSHEET

## RE.INTRO

RE.INTRO. (INTERVIEWER: READ PARENS TEXT IF R ISN'T PERSON WHO ANSWERED  
PHONE OR HAS NOT HEARD IT YET.)

(Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may be monitored and recorded for quality control.)

We are conducting an important study to find out how satisfied families are with Oregon Health Plan. The results of the study will help Oregon Health Plan improve the care they provide and will also help consumers when they choose health care plans.

The interview is completely confidential and voluntary, and will not affect your child's health care or benefits in any way.

(IF R ASKS: "How long will this take?", EXPLAIN: "The questions should take about 12-15 minutes to answer.")

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

("DK" NOT ALLOWED)

1. CONTINUE
2. APPOINTMENT
3. REFUSAL
4. LANGUAGE PROBLEM -- SPEAKS SPANISH
5. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH
6. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)
7. RETURN TO CS

## SEX

SEX. (IWER: RECORD RESPONDENT'S SEX, 'DK' NOT ALLOWED)

1. MALE
2. FEMALE

## SPAN.VAR

(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

1. Spanish
2. English

## MEMBER

Q1. / MEMBER

I will be asking you about [NAME OF CHILD]'s health care. Please answer these questions based on the experiences you have had in getting health care for [NAME OF CHILD], and not on any experiences you may have had getting care for yourself or other members of your family.

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

(IWER: IF R SAYS "LEFT PLAN" OR "SWITCHED PLANS" OR "NO LONGER INSURED" ENTER "2". IF R IS NOT SURE IF HE/SHE IS PART OF Oregon Health Plan, ENTER "2".)

1. YES --> CK.PLMSTCR
2. NO

DK/REFUSAL/NOT ASCERTAINED

## NPLNAME

Q2. / NPLNAME

What is the name of your child's health plan?

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS Oregon Health Plan]

[(ENTER 5 IF R SAYS: MEDICAID)]

(IF R SAYS SOMETHING CLOSE TO Oregon Health Plan, ENTER "2")

(IF R NOT SURE OF PLAN NAME, ENTER "2")

1. EXACT MATCH -----> CK.PLMSTCR
2. POSSIBLE MATCH -----> PLNAME
3. NOT A MATCH -----> PLNAME
4. CHILD NO LONGER INSURED -----> NO.INSUR
5. CHILD INSURED BY MEDICAID BUT DOESN'T -----> CK.PLMSTCR  
KNOW PLAN NAME
6. CHILD INSURED BUT NOT BY MEDICAID -----> NO.INSUR

PLNAME

Q2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)

CK.PLMSTCR:

-----

IF NPLNAME = NOT A MATCH (3), GO TO END.SCREEN

INTRO.INCARE

INTRO.INCARE

Now I'm going to ask you some questions about your child's health care. When you answer these questions, please do NOT include dental visits or care your child got when [he/she] stayed overnight in a hospital.

INCARE

Q3. / INCARE

In the last 6 months, did your child have an illness, injury, or condition that NEEDED CARE RIGHT AWAY in a clinic, emergency room, or doctor's office?

1. YES
2. NO -----> APMAKE4

DK/REFUSAL/NOT ASCERTAINED --&gt; APMAKE4

CARSN4

Q4. / CARSN4

In the last 6 months, when your child NEEDED CARE RIGHT AWAY, how often did your child get care as soon as [he/she] needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

APMAKE4

Q5. / APMAKE4

In the last 6 months, did you make any appointments for a CHECK-UP  
OR ROUTINE CARE for your child at a doctor's office or clinic?

1. YES
2. NO -----> OFCTIM4

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

APGET4

Q6. / APGET4

In the last 6 months, when you made an appointment for a CHECK-UP  
OR ROUTINE CARE for your child at a doctor's office or clinic, how  
often did you get an appointment as soon as your child needed? Would  
you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

OFCTIM4

Q7. / OFCTIM4

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

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

(IWER: IF NEEDED CLARIFY: "Please don't include dental care your  
child received.")

(IWER: IF NEEDED CLARIFY, "Please include ALL doctor visits including  
those for routine, regular care and for an illness or injury.")

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

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

IF OFCTIM4=0 OR DK/REFUSAL THEN GO TO CHSCHL

## PRVENT5

Q8. / PRVENT5

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## OFTQUES

9. / OFTQUES

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## RXSTP

10. / RXSTP

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

1. YES
2. NO -----> RTALLCR

DK/REFUSAL/NOT ASCERTAINED --&gt; RTALLCR

## NRXWHY

11. / NRXWHY

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

NRXWYNT

12. / NRXWYNT

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

RXBST

13. / RXBST

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

RTALLCR

14. / RTALLCR

Using ANY NUMBER FROM 0 TO 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your child's health care in the last 6 months?

(IF NEEDED: "Please do not include any dental care your child may have received.")

00            01 02 03 04 05 06 07 08 09    10

DK/REFUSAL/NOT ASCERTAINED

CARNES4

15. / CARNES4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## CHSCHL

16. / CHSCHL

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

1. YES
2. NO -----> MEDEQUIP

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

## CONTSCHL

17. / CONTSCHL

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

1. YES
2. NO -----> MEDEQUIP

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

## HELPCONT

18. / HELPCONT

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## MEDEQUIP

19. / MEDEQUIP

Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment. In the last 6 months, did you get or try to get any special medical equipment or devices for your child?

1. YES
2. NO -----> SPCTHY

DK/REFUSAL/NOT ASCERTAINED --> SPCTHY

## EZMDEQ

20. / EZMDEQ

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## HELPMDEQ

21. / HELPMDEQ

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## SPCTHY

22. / SPCTHY

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

1. YES
2. NO -----> TCPBLM

DK/REFUSAL/NOT ASCERTAINED --&gt; TCPBLM

## EZTHP

23. / EZTHP

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## HELPTHP

24. / HELPTHP

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## TCPBLM

25. / TCPBLM

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

1. YES
2. NO -----> PLUSCARE

DK/REFUSAL/NOT ASCERTAINED --&gt; PLUSCARE



EZTC

26. / EZTC

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTC

27. / HELPTC

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

PLUSCARE

28. / PLUSCARE

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

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

DK/REFUSAL/NOT ASCERTAINED --&gt; PRSNLD4

HLPCOORD

29. / HLPCOORD

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

PRSNLD4

30. / PRSNLD4

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

Does your child have a personal doctor?

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

DK/REFUSAL/NOT ASCERTAINED --&gt; INTRO.SPDR

DRTMS

31. / DRTMS

In the last 6 months, how many times did your child visit  
[his/her] personal doctor for care?

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

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

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

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

PBDRNG

31a. / PBDRNG

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DREXPL4

32. / DREXPL4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRLSTN4

33. / DRLSTN4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRESPU4

34. / DRESPU4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CABLTLK

35. / CABLTLK

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

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

DK/REFUSAL/NOT ASCERTAINED --> DRTMEN4

CDREXPL

36. / CDREXPL

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTMEN4

37. / DRTMEN4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTLKU

38. / DRTLKU

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

DIFFDR

39. / DIFFDR

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

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

DK/REFUSAL/NOT ASCERTAINED --> RATEDR4

DRINFO

40. / DRINFO

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RATEDR4

41. / RATEDR4

Using ANY NUMBER FROM 0 TO 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your child's personal doctor?

00            01 02 03 04 05 06 07 08 09    10

DK/REFUSAL/NOT ASCERTAINED

COND3MO

42. / COND3MO

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

(IWER: "We are looking for a condition that the child CURRENTLY HAS that has lasted for more than 3 months." )

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

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

DRUNCON

43. / DRUNCON

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

DRUNFAM

44. / DRUNFAM

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.SPDR

INTRO.SPDR

Now I'm going to ask you some questions about specialists. When you answer these questions, please do NOT include dental visits or care your child got when (he/she) stayed overnight in a hospital.

NDSPDR4

45. / NDSPDR4

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

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

(CLARIFY IF NEEDED: "Specialists are doctors who specialize in one area of health care. Please include all doctors you consider to be specialists, but do not include any dental visits.")

(IWER: IF RESPONDENT ASKS IF A PARTICULAR TYPE OF DOCTOR IS A SPECIALIST, CLARIFY, "I don't have any information about that, so please just interpret it however it seems best to you.")

(CLARIFY IF NEEDED: "You can interpret this question however it seems best to you.")

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

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

PRBSEE4

46. / PRBSEE4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

SPDRS

47. / SPDRS

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

(CLARIFY IF NEEDED: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. Would you say your child has seen...")

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

0. NONE, -----> INTRO.PLAN
1. 1 SPECIALIST,
2. 2,
3. 3,
4. 4, OR
5. 5 OR MORE SPECIALISTS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> INTRO.PLAN

RTSPDR4

48. / RTSPDR4

We want to know your rating of the specialist your child saw most often in the last 6 months.

Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

(Clarify if necessary: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.")

00            01 02 03 04 05 06 07 08 09    10

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN

INTRO.PLAN

Now I'm going to ask you some questions about your experience with your child's health plan.

CLCSRV4

49. / CLCSRV4

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

1. YES
2. NO -----> PLPRWK4

DK/REFUSAL/NOT ASCERTAINED --> PLPRWK4

PBCLCS4

50. / PBCLCS4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CSRESP

51. / CSRESP

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLPRWK4

52. / PLPRWK4

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

1. YES
2. NO -----> RTPLEXP

DK/REFUSAL/NOT ASCERTAINED --&gt; RTPLEXP

PBPLPW4

53. / PBPLPW4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTPLEXP

54. / RTPLEXP

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

00            01 02 03 04 05 06 07 08 09    10

DK/REFUSAL/NOT ASCERTAINED

CHPRES

55. / CHPRES

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

1. YES
2. NO -----> REGDENT

DK/REFUSAL/NOT ASCERTAINED --&gt; REGDENT



## EZPRES

56. / EZPRES

In the last 6 months, how often was it easy to get prescription medicines for your child through [his/her] health plan? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## HELPPRES

57. / HELPPRES

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## REGDENT

57a. / REGDENT

A regular dentist is one you would go to for check-ups and cleanings or when [he/she] has a cavity or tooth pain.

Does your child have a regular dentist?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## DNTASAP

57b. / DNTASAP

In the last 6 months, if your child needed to see a dentist right away because of a DENTAL EMERGENCY, did [he/she] get to see a dentist as soon as you wanted? Would you say...?

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?
5. DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS (DO NOT READ)

DK/REFUSAL/NOT ASCERTAINED

## CHTREAT

57c. / CHTREAT

Choices for your child's treatment or health care can include choices about medicine, surgery, or other treatment.

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

1. YES
2. NO -----> RESPCHT

DK/REFUSAL/NOT ASCERTAINED --> RESPCHT

## PCTREAT

57d. / PCTREAT

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## BSTREAT

57e. / BSTREAT

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## RESPCHT

57f. / RESPCHT

In the last 6 months, how often did your child's provider respect what health care and treatment choices you thought work best for your child? Would you say...?

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

DK/REFUSAL/NOT ASCERTAINED

## ENCORQC

57g. / ENCORQC

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

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

DK/REFUSAL/NOT ASCERTAINED

## EASYQC

57h. / EASYQC

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

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

DK/REFUSAL/NOT ASCERTAINED

## HLTSTA4

58. / HLTSTA4

In general, how would you rate your child's overall health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## MNTLSTAT

59. / MNTLSTAT

In general, how would you rate your child's overall MENTAL OR EMOTIONAL health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## CUSEMED

60. / CUSEMED

Other than vitamins, does your child currently need or use medicine prescribed by a doctor?

1. YES
2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --&gt; MOREMED

## WHYMEDA

61. / WHYMEDA

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

1. YES
2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

## WHYMEDB

62. / WHYMEDB

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## MOREMED

63. / MOREMED

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

1. YES
2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

## WHYMOREA

64. / WHYMOREA

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

1. YES
2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

## WHYMOREB

65. / WHYMOREB

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## LIMITED

66. / LIMITED

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

1. YES
2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --> SPECTHP

## WHYLIMA

67. / WHYLIMA

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

1. YES
2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --&gt; SPECTHP

## WHYLIMB

68. / WHYLIMB

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## SPECTHP

69. / SPECTHP

Does your child need or get special therapy such as physical, occupational, or speech therapy?

1. YES
2. NO -----> CHCOUNS

DK/REFUSAL/NOT ASCERTAINED --&gt; CHCOUNS

## WHYSTA

70. / WHYSTA

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

1. YES
2. NO -----> CHCOUNS

DK/REFUSAL/NOT ASCERTAINED --&gt; CHCOUNS

## WHYSTB

71. / WHYSTB

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## CHCOUNS

72. / CHCOUNS

Does your child have any kind of emotional, developmental, or behavioral problem for which [he/she] needs or gets treatment or counseling?

1. YES
2. NO -----> CAGE

DK/REFUSAL/NOT ASCERTAINED --&gt; CAGE

## TIMCOUNA

73. / TIMCOUNA

Has this problem lasted or is it expected to last for at least 12 months?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## CAGE

74. / CAGE

I have just a few more questions.

What is YOUR CHILD'S age?

(IWER: ENTER 00 IF LESS THAN 1 YEAR OLD)

(IWER: IF NEEDED CLARIFY, "Please answer based on your child's age as of their last birthday.")

\_\_\_ ENTER CHILD'S AGE

DK/REFUSAL/NOT ASCERTAINED

## CGENDER

75. / CGENDER

(IF NEEDED: "Is your child male or female?")

1. MALE
2. FEMALE

REFUSAL/NOT ASCERTAINED

## LATINO

76. / LATINO

Is your child of Hispanic or Latino origin or descent?

1. YES / HISPANIC OR LATINO
2. NO / NOT HISPANIC OR LATINO

DK/REFUSAL/NOT ASCERTAINED

## INTRO.RACE

INTRO.RACE

I am going to read a list of race categories. For each category, please say YES or NO if it describes your child's race. I must ask you about all categories in case more than one applies.

PQRACE3.(1-6)

77.1-6) / PQRACE3.(1-6)

[(Is your child)]

1. "White"
2. "Black or African-American"
3. "Asian"
4. "Native Hawaiian or other Pacific Islander"
5. "American Indian or Alaska Native"
6. "Some other race"

(IWER: IF R REPLIES "WHY ARE YOU ASKING ABOUT MY CHILD'S RACE?" SAY "We ask about your child's race for demographic purposes only. We want to be sure that the people we survey accurately represent the racial diversity of managed care enrollees in this country.")

(IWER: If R answers with a category not listed here, such as "HISPANIC" or "AMERICAN" or "MIXED RACE", probe using the category "OTHER".)

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

PAGE

78. / PAGE

Now I have a few questions about you. What is YOUR age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your last birthday.")

(READ IF NEEDED, "Are you...")

0. UNDER 18,
1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PGENDER

79. / PGENDER

(IWER: ENTER RESPONDENT'S SEX. "DK" NOT ALLOWED.)

(IWER: IF NECESSARY ASK, "Are you male or female?")

1. MALE
2. FEMALE

EDUCAT

80. / EDUCAT

What is the highest grade or level of school that you have COMPLETED?  
Did you complete...

(IWER: IF R SAYS HE/SHE HAD NON-ACADEMIC TRAINING, SUCH AS TRADE  
SCHOOL, PROBE: "Did you receive a high school diploma or GED?")

(IWER: ACADEMIC TRAINING BEYOND A HIGH SCHOOL DIPLOMA THAT DOES NOT  
LEAD TO A BACHELORS DEGREE, SHOULD BE CODED "4". IF R WENT TO BUSINESS  
SCHOOL OR GOT A 3-YEAR NURSING DEGREE, ENTER "4")

(IWER: IF R OFFERS MORE THAN ONE RESPONSE, FOR EXAMPLE: "SOME HIGH  
SCHOOL OR GED", ENTER THE HIGHEST NUMBER THAT APPLIES.)

(READ LIST)

1. 8TH GRADE OR LESS,
2. SOME HIGH SCHOOL, BUT DID NOT GRADUATE,
3. HIGH SCHOOL GRADUATE OR GED,
4. SOME COLLEGE OR 2-YEAR DEGREE,
5. 4-YEAR COLLEGE GRADUATE, OR
6. MORE THAN A 4-YEAR COLLEGE DEGREE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHRELT

81. / CHRELT

How are you related to the child?

(READ IF NEEDED: "Are you the ...")

1. MOTHER OR FATHER,
2. GRANDPARENT,
3. AUNT OR UNCLE,
4. OLDER BROTHER OR SISTER,
5. OTHER RELATIVE,
6. LEGAL GUARDIAN, OR
7. SOMEONE ELSE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ALL.DONE

THANKS.SCREEN.

Those are all the questions I have.

Thank you for taking part in this important interview.

Have a nice (day/evening). Good bye.