Yamhill CCO
CAHPS® 5.0 Medicaid Survey

Banner Book Report

June 2016

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METHODOLOGY

Introduction

This banner book report summarizes the results of the 2016 CAHPS© Medicaid survey of Yamhill CCO members. Yamhill CCO is one of 17 CCOs that participated in the survey. It was administered over a twelve-week period using a mixed-mode (mail and telephone) six-wave protocol. This protocol consisted of a pre-notification letter, an initial survey mailing and reminder postcard to all respondents, followed by a second survey mailing and reminder postcard to non-respondents. Phone follow-up was conducted for members who had not responded to the mailings. Respondents were surveyed in English and Spanish. DataStat administered the survey under contract with the State of Oregon Department of Human Services.

Survey Milestones

Pre-notification letters mailed:	January 14, 2016
1st mailing of survey packets:	January 21, 2016
1st mailing of reminder postcards:	January 28, 2016
2nd mailing of survey packets:	February 18, 2016
2nd mailing of reminder postcards:	February 26, 2016
Phone follow-up start:	March 14, 2016
Mail and phone field terminated:	April 10, 2016

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. There was one plan, HealthShare, that sampled 2700 members - 900 members from each of the three counties that make up HealthShare. Adults were defined as members aged 18 years or older and children as 17 years old or younger, both as of December 31, 2015. To be eligible, members had to have been enrolled in Oregon Health Plan for at least six months as of December 31, 2015. The final selected sample consisted of 17,100 adult OHP enrollees and 17,100 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.

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Composites, Overall Ratings, and Measures for Reporting

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

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

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

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

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

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

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

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

Composite: Access to Specialized Services (Child only)
- Q--/20. Getting special medical equipment or devices for your child
- Q--/23. Getting special therapy (physical, occupational, speech) for your child
- Q--/26. Getting treatment or counseling for your child

Composite: Family Centered Care: Personal Doctor Who Knows Child (Child only)
- Q--/38. Child's personal doctor talked with you about how child is feeling, growing, behaving
- Q--/43. Child's personal doctor understands how child's health conditions affect child's day-to-day life
- Q--/44. Child's personal doctor understands how child's health conditions affect family's day-to-day life

Composite: Coordination of Care for Children with Chronic Conditions (Child only)
- Q--/18. Got help contacting school and daycare from someone at health plan or doctor's office
- Q--/29. Got help coordinating care among providers from someone at health plan or doctor's office

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Comparisons, Statistical Testing, Scoring, and Weighting

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

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

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

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

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Sample Disposition

	Adult		Child	
Category	**Yamhill CCO**	**Overall**	**Yamhill CCO**	**Overall**
****First mailing - sent**	900	17100	900	17100
***First mailing - usable survey returned**	154	3058	124	2302
Second mailing - sent	727	13527	750	14026
***Second mailing - usable survey returned**	63	1118	53	1027
***Phone - usable surveys**	85	1495	131	2309
Total - usable surveys	302	5671	308	5638
†Ineligible: According to population criteria‡	23	431	21	323
†Ineligible: Deceased	1	38	0	2
†Ineligible: Mentally or physically unable to complete survey	8	166	0	0
†Ineligible: Language barrier	0	78	0	81
Incorrect address AND incorrect phone number	45	915	39	878
Refusal/Returned survey blank	42	871	65	905
Nonresponse - Unavailable by mail or phone	479	8930	467	9273
Adjusted Response Rate	**34.8%**	**34.6%**	**35.0%**	**33.8%**

*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*

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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© 2016 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	204 41.1%	132 43.7%	2.58%
Female	292 58.9%	170 56.3%	-2.58%
18-24	107 21.6%	32 10.6%	-10.98%
25-34	147 29.6%	66 21.9%	-7.78%
35-44	98 19.8%	60 19.9%	0.11%
45-54	85 17.1%	60 19.9%	2.73%
55-64	50 10.1%	71 23.5%	13.43%
65-74	4 0.8%	10 3.3%	2.50%
75 or Older	5 1.0%	3 1.0%	-0.01%

Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	258 51.7%	156 50.6%	-1.05%
Female	241 48.3%	152 49.4%	1.05%
<3	93 18.6%	47 15.3%	-3.38%
4-7	117 23.4%	89 28.9%	5.45%
8-12	153 30.7%	96 31.2%	0.51%
13 or older	136 27.3%	76 24.7%	-2.58%

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q1																					
YES	300	5577	28	59	55	52	68	12	162							44	226	201	78	117	157
	100%	100%	100%	100%	100%	100%	100%	100%	100%	~	~	~	~	~		100%	100%	100%	100%	100%	100%
NOT ANSWERED	2	94	1			1			2								2	2			2
VALID CASES	300	5577	28	59	55	52	68	12	162							44	226	201	78	117	157
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q3																					
YES	120	2267	6	20	20	31	31	5	67							19	94	81	35	41	74
	41%	41%	21%~	34%	36%	61%*	46%	45%~	42%	~	~	~	~	~	~	43%~	42%	41%	46%	36%	47%*
NO	173	3221	23	38	35	20	36	6	93							25	129	119	41	74	83
	59%	59%	79%~	66%	64%	39%*	54%	55%~	58%	~	~	~	~	~	~	57%~	58%	59%	54%	64%	53%*
NOT ANSWERED	9	183		1		2	1	1	4								5	3	2	2	2
VALID CASES	293	5488	29	58	55	51	67	11	160							44	223	200	76	115	157
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	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							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q4																					
NEVER	2	61				1										1		1		1	
	2%	3%	~	~	~	3%~	~	~	~	~	~	~	~	~	~	6%~	~	1%~	~	3%~	~
SOMETIMES	11	267		5	3	2			3							4	7	7	4		11
	10%	13%	~	26%~	17%~	7%~	~	~	5%~	~	~	~	~	~	~	24%~	8%~	9%~	13%~	~	16%~
USUALLY	33	526	2	5	8	5	10	1	21							5	26	23	9	9	23
	30%	26%	33%~	26%~	44%~	17%~	38%~	20%~	35%~	~	~	~	~	~	~	29%~	30%~	31%~	29%~	24%~	34%~
ALWAYS	63	1196	4	9	7	21	16	4	36							7	53	44	18	28	33
	58%	58%	67%~	47%~	39%~	72%~	62%~	80%~	60%~	~	~	~	~	~	~	41%~	62%~	59%~	58%~	74%~	49%~
#ALWAYS + USUALLY (NET)	96	1723	6	14	15	26	26	5	57							12	79	67	27	37	56
	88%	84%	100%~	74%~	83%~	90%~	100%~	100%~	95%~	~	~	~	~	~	~	71%~	92%~	89%~	87%~	97%~	84%~
TOP BOX SCORE	63	1196	4	9	7	21	16	4	36							7	53	44	18	28	33
	58%	58%	67%~	47%~	39%~	72%~	62%~	80%~	60%~	~	~	~	~	~	~	41%~	62%~	59%~	58%~	74%~	49%~
NOT ANSWERED	11	187		1	2	2	5		7							2	8	6	4	3	7
VALID CASES	109	2050	6	19	18	29	26	5	60							17	86	75	31	38	67
NUMBER OF RESPONDENTS	120	2237	6	20	20	31	31	5	67							19	94	81	35	41	74
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q3 = YES]

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q5																					
YES	201	3682	17	43	32	40	48	10	111							31	157	137	57	73	118
	69%	67%	59%~	74%	59%	80%*	71%	83%~	70%	~	~	~	~	~	~	70%~	70%	68%	76%	64%	75%*
NO	91	1794	12	15	22	10	20	2	48							13	66	64	18	41	39
	31%	33%	41%~	26%	41%	20%*	29%	17%~	30%	~	~	~	~	~	~	30%~	30%	32%	24%	36%	25%*
NOT ANSWERED	10	196		1	1	3			5								5	2	3	3	2
VALID CASES	292	5475	29	58	54	50	68	12	159							44	223	201	75	114	157
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q6																					
NEVER	6	120		2	1	1	1		3							2	3	4	1		5
	3%	4%	~	5%~	3%~	3%~	2%~	~	3%	~	~	~	~	~	~	7%~	2%~	3%	2%~	~	5%
SOMETIMES	42	637	6	7	7	8	10	1	23							8	30	31	9	16	24
	23%	19%	35%~	18%~	23%~	22%~	23%~	10%~	23%	~	~	~	~	~	~	27%~	21%~	24%	19%~	23%	22%
USUALLY	45	905	6	7	10	11	8	1	24							10	33	27	17	11	33
	24%	27%	35%~	18%~	33%~	31%~	18%~	10%~	24%	~	~	~	~	~	~	33%~	23%~	21%	35%~	16%*	31%*
ALWAYS	92	1691	5	22	12	16	25	8	50							10	77	68	21	42	45
	50%	50%	29%~	58%~	40%~	44%~	57%~	80%~	50%	~	~	~	~	~	~	33%~	54%~	52%	44%~	61%*	42%*
#ALWAYS + USUALLY (NET)	137	2596	11	29	22	27	33	9	74							20	110	95	38	53	78
	74%	77%	65%~	76%~	73%~	75%~	75%~	90%~	74%	~	~	~	~	~	~	67%~	77%~	73%	79%~	77%	73%
TOP BOX SCORE	92	1691	5	22	12	16	25	8	50							10	77	68	21	42	45
	50%	50%	29%~	58%~	40%~	44%~	57%~	80%~	50%	~	~	~	~	~	~	33%~	54%~	52%	44%~	61%*	42%*
NOT ANSWERED	16	330		5	2	4	4		11							1	14	7	9	4	11
VALID CASES	185	3353	17	38	30	36	44	10	100							30	143	130	48	69	107
NUMBER OF RESPONDENTS	201	3683	17	43	32	40	48	10	111							31	157	137	57	73	118
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q5 = YES]

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q7																					
NONE	73	1469	9	17	17	6	14	2	40							8	55	53	13	33	31
	25%	27%	31%~	30%	33%	12%*	21%	17%~	25%	~	~	~	~	~	~	18%~	25%	26%	18%	29%	20%*
1 TIME	41	947	5	10	6	5	12		20							7	30	34	5	15	23
	14%	17%	17%~	18%	12%	10%	18%	~	13%	~	~	~	~	~	~	16%~	14%	17%*	7%*	13%	15%
2	50	900	4	11	8	11	11	1	30							9	37	36	11	19	27
	17%	17%	14%~	19%	15%	22%	16%	8%~	19%	~	~	~	~	~	~	20%~	17%	18%	15%	17%	17%
3	45	659	4	5	10	7	12	4	24							10	32	29	13	20	22
	16%	12%	14%~	9%	19%	14%	18%	33%~	15%	~	~	~	~	~	~	23%~	15%	14%	18%	18%	14%
4	20	465	3	2	4	4	6	1	10							4	16	13	7	8	12
	7%	9%	10%~	4%	8%	8%	9%	8%~	6%	~	~	~	~	~	~	9%~	7%	6%	10%	7%	8%
5 TO 9	36	673	2	10	3	9	8	2	23							3	30	22	14	11	24
	12%	12%	7%~	18%	6%*	18%	12%	17%~	14%	~	~	~	~	~	~	7%~	14%	11%	19%	10%	15%
10 OR MORE TIMES	23	305	2	2	4	8	5	2	12							3	20	14	9	6	17
	8%	6%	7%~	4%	8%	16%	7%	17%~	8%	~	~	~	~	~	~	7%~	9%	7%	13%	5%	11%*
NOT ANSWERED	14	254		2	3	3			5								8	2	6	5	3
VALID CASES	288	5417	29	57	52	50	68	12	159							44	220	201	72	112	156
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q8																					
#YES	153	2759	12	27	21	33	44	10	90							22	123	101	47	58	89
	73%	72%	60%~	69%~	60%~	79%~	83%*	100%~	78%*	~	~	~	~	~	~	61%~	76%*	70%	81%	74%	73%
NO	58	1087	8	12	14	9	9		25							14	38	44	11	20	33
	27%	28%	40%~	31%~	40%~	21%~	17%*	~	22%*	~	~	~	~	~	~	39%~	24%*	30%	19%	26%	27%
NOT ANSWERED	4	93		1		2	1		4								4	3	1	1	3
VALID CASES	211	3846	20	39	35	42	53	10	115							36	161	145	58	78	122
NUMBER OF RESPONDENTS	215	3939	20	40	35	44	54	10	119							36	165	148	59	79	125
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q9																					
YES	110	2168	3	20	20	24	36	5	71							10	97	69	40	37	72
	52%	56%	15%~	50%~	57%~	56%~	69%*	50%~	61%*	~	~	~	~	~	~	28%~	60%~	47%*	70%*	47%	59%*
NO	100	1687	17	20	15	19	16	5	45							26	65	78	17	41	51
	48%	44%	85%~	50%~	43%~	44%~	31%*	50%~	39%*	~	~	~	~	~	~	72%~	40%~	53%*	30%*	53%	41%*
NOT ANSWERED	5	84				1	2		3								3	1	2	1	2
VALID CASES	210	3855	20	40	35	43	52	10	116							36	162	147	57	78	123
NUMBER OF RESPONDENTS	215	3939	20	40	35	44	54	10	119							36	165	148	59	79	125
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q10																					
#YES	104	1919	3	20	19	22	33	5	67							9	92	66	37	32	71
	96%	93%	100%~	100%~	95%~	96%~	94%~	100%~	96%~	~	~	~	~	~	~	90%~	97%~	97%~	95%~	91%~	99%~
NO	4	152			1	1	2		3							1	3	2	2	3	1
	4%	7%	~	~	5%~	4%~	6%~	~	4%~	~	~	~	~	~	~	10%~	3%~	3%~	5%~	9%~	1%~
NOT ANSWERED	21	379		2	3	5	3		9								13	4	9	8	5
VALID CASES	108	2072	3	20	20	23	35	5	70							10	95	68	39	35	72
NUMBER OF RESPONDENTS	129	2451	3	22	23	28	38	5	79							10	108	72	48	43	77
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q11																					
#YES	80	1506	3	14	13	19	25	5	51							6	71	50	29	27	52
	74%	73%	100%~	70%~	65%~	83%~	71%~	100%~	73%~	~	~	~	~	~	~	60%~	75%~	74%~	74%~	77%~	72%~
NO	28	555		6	7	4	10		19							4	24	18	10	8	20
	26%	27%	~	30%~	35%~	17%~	29%~	~	27%~	~	~	~	~	~	~	40%~	25%~	26%~	26%~	23%~	28%~
NOT ANSWERED	2	53				1	1		1								2	1	1	2	
VALID CASES	108	2061	3	20	20	23	35	5	70							10	95	68	39	35	72
NUMBER OF RESPONDENTS	110	2114	3	20	20	24	36	5	71							10	97	69	40	37	72
	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?

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q12																					
#YES	78	1561	3	16	13	17	23	4	53							7	69	52	25	23	54
	74%	76%	100%~	80%~	65%~	74%~	70%~	80%~	76%~	~	~	~	~	~	~	78%~	73%~	78%~	66%~	68%~	76%~
NO	28	492		4	7	6	10	1	17							2	25	15	13	11	17
	26%	24%	~	20%~	35%~	26%~	30%~	20%~	24%~	~	~	~	~	~	~	22%~	27%~	22%~	34%~	32%~	24%~
NOT ANSWERED	4	61				1	3		1							1	3	2	2	3	1
VALID CASES	106	2053	3	20	20	23	33	5	70							9	94	67	38	34	71
NUMBER OF RESPONDENTS	110	2114	3	20	20	24	36	5	71							10	97	69	40	37	72
	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?

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q13 WORST HEALTH CARE POSSIBLE		27 0.7%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01	2 1%	7 0.2%	~	~	~	~	1 2%	~	~	~	~	~	~	~	~	1 3%~	~	~	1 2%	~	1 ~0.8%
02	2 1%	49 1%	~	~	~	~	2 4%	~	2 2%~	~	~	~	~	~	~	~	2 1%~	2 1%	~	1 1%	1 0.8%
03	5 2%	78 2%	~	1 2%~	1 3%~	1 2%~	2 4%	~	4 3%	~	~	~	~	~	~	~	4 2%~	2 1%	3 5%	2 3%	3 2%
04	7 3%	87 2%	1 5%~	3 8%~	2 6%~	~	1 2%	~	6 5%	~	~	~	~	~	~	~	7 4%~	2 1%	5 9%	3 4%	4 3%
05	16 8%	281 7%	3 15%~	5 12%~	1 3%~	5 12%~	1 2%*	~	6 5%	~	~	~	~	~	~	5 14%~	10 6%~	9 6%	7 12%	5 6%	11 9%
06	10 5%	233 6%	1 5%~	3 8%~	2 6%~	1 2%~	2 4%	1 10%~	5 4%	~	~	~	~	~	~	~	10 6%~	3 2%*	7 12%*	4 5%	6 5%
07	26 12%	502 13%	2 10%~	4 10%~	6 17%~	5 12%~	8 15%	~	16 14%	~	~	~	~	~	~	4 11%~	20 12%~	19 13%	6 10%	7 9%	18 15%
08	44 21%	866 23%	5 25%~	10 25%~	8 23%~	5 12%~	11 21%	1 10%~	19 17%	~	~	~	~	~	~	9 25%~	31 19%~	34 23%	8 14%	19 24%	21 17%
09	38 18%	651 17%	6 30%~	5 12%~	6 17%~	12 29%~	6 11%	3 30%~	19 17%	~	~	~	~	~	~	10 28%~	28 17%~	28 19%	10 17%	13 16%	25 21%
BEST HEALTH CARE POSSIBLE	59 28%	1054 27%	2 10%~	9 23%~	9 26%~	13 31%~	19 36%	5 50%~	38 33%	~	~	~	~	~	~	7 19%~	49 30%~	46 32%	11 19%*	25 32%	31 26%
#8-10 (NET)	141 67%	2571 67%	13 65%~	24 60%~	23 66%~	30 71%~	36 68%	9 90%~	76 66%	~	~	~	~	~	~	26 72%~	108 67%~	108 74%*	29 50%*	57 72%	77 64%

Continued

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
9-10 (NET)	97	1705	8	14	15	25	25	8	57							17	77	74	21	38	56
	46%	44%	40%~	35%~	43%~	60%~	47%	80%~	50%	~	~	~	~	~	~	47%~	48%~	51%*	36%	48%	46%
NOT ANSWERED	6	105				2	1		4								4	3	1		4
VALID CASES	209	3834	20	40	35	42	53	10	115							36	161	145	58	79	121
NUMBER OF RESPONDENTS	215	3939	20	40	35	44	54	10	119							36	165	148	59	79	125
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%
MEAN	7.92	7.91	7.65	7.53	7.94	8.26	7.92	9.10	7.96							7.94	7.98	8.26	7.12	8.06	7.83
p stat_(*=Sig @ p<=.05)		.950	~	~	~	~	.983	~	.770	~	~	~	~	~	~	~	~	.000*	.000*	.434	.495

[ASKED IF Q7 >= 1 TIME]

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q14																					
NEVER	3	112	1			2			1							1	1	3		2	1
	1%	3%	5%~	~	~	5%~	~	~	0.9%	~	~	~	~	~	~	3%~	0.6%~	2%~	~	3%	0.8%
SOMETIMES	36	652	5	10	6	2	11		18							6	26	19	16	7	27
	17%	17%	25%~	25%~	17%~	5%~	21%	~	16%	~	~	~	~	~	~	17%~	16%~	13%*	28%*	9%*	23%*
USUALLY	72	1292	2	15	13	16	20	3	44							15	55	48	23	31	38
	35%	34%	10%~	38%~	37%~	39%~	38%	30%~	39%	~	~	~	~	~	~	42%~	35%~	33%	40%	40%	32%
ALWAYS	96	1764	12	15	16	21	21	7	51							14	77	74	18	38	54
	46%	46%	60%~	38%~	46%~	51%~	40%	70%~	45%	~	~	~	~	~	~	39%~	48%~	51%*	32%*	49%	45%
#ALWAYS + USUALLY (NET)	168	3056	14	30	29	37	41	10	95							29	132	122	41	69	92
	81%	80%	70%~	75%~	83%~	90%~	79%	100%~	83%	~	~	~	~	~	~	81%~	83%~	85%	72%	88%*	77%*
TOP BOX SCORE	96	1764	12	15	16	21	21	7	51							14	77	74	18	38	54
	46%	46%	60%~	38%~	46%~	51%~	40%	70%~	45%	~	~	~	~	~	~	39%~	48%~	51%*	32%*	49%	45%
NOT ANSWERED	8	119				3	2		5								6	4	2	1	5
VALID CASES	207	3820	20	40	35	41	52	10	114							36	159	144	57	78	120
NUMBER OF RESPONDENTS	215	3939	20	40	35	44	54	10	119							36	165	148	59	79	125
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q15																					
YES	208	4350	14	42	35	42	52	11	113							28	165	143	58	75	121
	71%	80%*	48%~	72%	64%	82%*	78%	92%~	71%	~	~	~	~	~	~	64%~	74%	71%	76%	66%	77%*
NO	83	1094	15	16	20	9	15	1	47							16	59	58	18	39	37
	29%	20%*	52%~	28%	36%	18%*	22%	8%~	29%	~	~	~	~	~	~	36%~	26%	29%	24%	34%	23%*
NOT ANSWERED	11	228		1		2	1		4								4	2	2	3	1
VALID CASES	291	5443	29	58	55	51	67	12	160							44	224	201	76	114	158
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q16																					
NONE	36	890	4	10	8	4	5	1	15							4	27	26	6	10	21
	18%	22%	29%~	26%~	24%~	10%~	11%~	10%~	15%	~	~	~	~	~	~	15%~	18%~	19%	11%	15%	18%
1 TIME	39	1017	5	8	3	9	11	1	17							3	31	31	8	16	21
	20%	25%	36%~	21%~	9%~	22%~	23%~	10%~	17%	~	~	~	~	~	~	11%~	20%~	23%	15%	24%	18%
2	49	826	4	9	7	9	15	3	31							8	40	34	14	19	29
	25%	20%	29%~	23%~	21%~	22%~	32%~	30%~	30%	~	~	~	~	~	~	30%~	26%~	25%	25%	28%	25%
3	29	578		4	7	8	6	2	19							3	24	22	5	10	17
	15%	14%	~	10%~	21%~	20%~	13%~	20%~	18%	~	~	~	~	~	~	11%~	16%~	16%	9%	15%	14%
4	8	309		1	1	2	4		4							3	5	3	5	1	7
	4%	7%*	~	3%~	3%~	5%~	9%~	~	4%	~	~	~	~	~	~	11%~	3%~	2%	9%	1%	6%
5 TO 9	27	401	1	6	4	5	6	3	14							5	20	13	14	9	17
	14%	10%	7%~	15%~	12%~	12%~	13%~	30%~	14%	~	~	~	~	~	~	19%~	13%~	10%*	25%*	13%	14%
10 OR MORE TIMES	8	98		1	3	4			3							1	7	5	3	2	6
	4%	2%	~	3%~	9%~	10%~	~	~	3%	~	~	~	~	~	~	4%~	5%~	4%	5%	3%	5%
NOT ANSWERED	12	232		3	2	1	5	1	10							1	11	9	3	8	3
VALID CASES	196	4118	14	39	33	41	47	10	103							27	154	134	55	67	118
NUMBER OF RESPONDENTS	208	4350	14	42	35	42	52	11	113							28	165	143	58	75	121
	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							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q17																					
NEVER		58																			
		2%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	21	230	2	4	6	2	6		10							6	13	9	11	7	13
	13%	7%*	20%~	14%~	24%~	6%~	14%~	~	11%	~	~	~	~	~	~	26%~	10%~	8%*	23%~	13%	14%
USUALLY	25	675	2	6	6	3	4	1	14							3	18	18	7	7	16
	16%	21%	20%~	21%~	24%~	8%~	10%~	11%~	16%	~	~	~	~	~	~	13%~	14%~	17%	15%~	13%	17%
ALWAYS	112	2229	6	18	13	31	32	8	64							14	94	81	29	42	67
	71%	70%	60%~	64%~	52%~	86%~	76%~	89%~	73%	~	~	~	~	~	~	61%~	75%~	75%	62%~	75%	70%
#ALWAYS + USUALLY (NET)	137	2905	8	24	19	34	36	9	78							17	112	99	36	49	83
	87%	91%	80%~	86%~	76%~	94%~	86%~	100%~	89%	~	~	~	~	~	~	74%~	90%~	92%*	77%~	87%	86%
TOP BOX SCORE	112	2229	6	18	13	31	32	8	64							14	94	81	29	42	67
	71%	70%	60%~	64%~	52%~	86%~	76%~	89%~	73%	~	~	~	~	~	~	61%~	75%~	75%	62%~	75%	70%
NOT ANSWERED	2	27		1		1											2		2	1	1
VALID CASES	158	3193	10	28	25	36	42	9	88							23	125	108	47	56	96
NUMBER OF RESPONDENTS	160	3220	10	29	25	37	42	9	88							23	127	108	49	57	97
	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							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q18																					
NEVER	2	63					2		2								2	2		1	1
	1%	2%	~	~	~	~	5%~	~	2%~	~	~	~	~	~	~	~	2%~	2%~	~	2%	1%
SOMETIMES	18	266	2	2	4	2	6		7							4	11	9	8	3	13
	11%	8%	20%~	7%~	16%~	6%~	14%~	~	8%	~	~	~	~	~	~	17%~	9%~	8%	17%~	5%*	14%
USUALLY	28	675	1	10	7	6	2	2	17							4	22	18	10	10	18
	18%	21%	10%~	34%~	28%~	17%~	5%~	22%~	20%	~	~	~	~	~	~	17%~	18%~	17%	21%~	18%	19%
ALWAYS	109	2196	7	17	14	27	32	7	61							15	89	78	29	42	63
	69%	69%	70%~	59%~	56%~	77%~	76%~	78%~	70%	~	~	~	~	~	~	65%~	72%~	73%	62%~	75%	66%
#ALWAYS + USUALLY (NET)	137	2872	8	27	21	33	34	9	78							19	111	96	39	52	81
	87%	90%	80%~	93%~	84%~	94%~	81%~	100%~	90%	~	~	~	~	~	~	83%~	90%~	90%	83%~	93%	85%
TOP BOX SCORE	109	2196	7	17	14	27	32	7	61							15	89	78	29	42	63
	69%	69%	70%~	59%~	56%~	77%~	76%~	78%~	70%	~	~	~	~	~	~	65%~	72%~	73%	62%~	75%	66%
NOT ANSWERED	3	19				2			1								3	1	2	1	2
VALID CASES	157	3201	10	29	25	35	42	9	87							23	124	107	47	56	95
NUMBER OF RESPONDENTS	160	3220	10	29	25	37	42	9	88							23	127	108	49	57	97
	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							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q19																					
NEVER	4	78	1		1		2		3							1	3	3	1	2	2
	3%	2%	10%~	~	4%~	~	5%~	~	3%	~	~	~	~	~	~	5%~	2%~	3%	2%~	4%	2%
SOMETIMES	8	205	1	1	2	1	3		4							1	6	3	5	2	6
	5%	6%	10%~	3%~	8%~	3%~	7%~	~	5%	~	~	~	~	~	~	5%~	5%~	3%	11%~	4%	6%
USUALLY	24	539	1	6	6	4	4	1	15							2	19	15	8	5	17
	15%	17%	10%~	21%~	24%~	11%~	10%~	11%~	17%	~	~	~	~	~	~	9%~	15%~	14%	17%~	9%	18%
ALWAYS	121	2374	7	22	16	31	32	8	65							18	97	86	33	47	70
	77%	74%	70%~	76%~	64%~	86%~	78%~	89%~	75%	~	~	~	~	~	~	82%~	78%~	80%	70%~	84%	74%
#ALWAYS + USUALLY (NET)	145	2913	8	28	22	35	36	9	80							20	116	101	41	52	87
	92%	91%	80%~	97%~	88%~	97%~	88%~	100%~	92%	~	~	~	~	~	~	91%~	93%~	94%	87%~	93%	92%
TOP BOX SCORE	121	2374	7	22	16	31	32	8	65							18	97	86	33	47	70
	77%	74%	70%~	76%~	64%~	86%~	78%~	89%~	75%	~	~	~	~	~	~	82%~	78%~	80%	70%~	84%	74%
NOT ANSWERED	3	24				1	1		1							1	2	1	2	1	2
VALID CASES	157	3196	10	29	25	36	41	9	87							22	125	107	47	56	95
NUMBER OF RESPONDENTS	160	3220	10	29	25	37	42	9	88							23	127	108	49	57	97
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q20																					
NEVER	5	89	1	1		1	2		2							1	4	3	2	2	3
	3%	3%	10%~	3%~	~	3%~	5%~	~	2%	~	~	~	~	~	~	4%~	3%~	3%	4%~	4%	3%
SOMETIMES	15	317	1	2	2	1	5	1	8							4	9	10	4	2	11
	9%	10%	10%~	7%~	8%~	3%~	12%~	11%~	9%	~	~	~	~	~	~	17%~	7%~	9%	8%~	4%*	11%
USUALLY	37	782	1	6	9	8	12	1	25							5	30	19	18	12	25
	23%	24%	10%~	21%~	36%~	22%~	29%~	11%~	28%	~	~	~	~	~	~	22%~	24%~	18%*	38%~	21%	26%
ALWAYS	102	2009	7	20	14	26	23	7	53							13	83	76	24	40	58
	64%	63%	70%~	69%~	56%~	72%~	55%~	78%~	60%	~	~	~	~	~	~	57%~	66%~	70%*	50%~	71%	60%
#ALWAYS + USUALLY (NET)	139	2790	8	26	23	34	35	8	78							18	113	95	42	52	83
	87%	87%	80%~	90%~	92%~	94%~	83%~	89%~	89%	~	~	~	~	~	~	78%~	90%~	88%	88%~	93%	86%
TOP BOX SCORE	102	2009	7	20	14	26	23	7	53							13	83	76	24	40	58
	64%	63%	70%~	69%~	56%~	72%~	55%~	78%~	60%	~	~	~	~	~	~	57%~	66%~	70%*	50%~	71%	60%
NOT ANSWERED	1	24				1											1		1	1	
VALID CASES	159	3196	10	29	25	36	42	9	88							23	126	108	48	56	97
NUMBER OF RESPONDENTS	160	3220	10	29	25	37	42	9	88							23	127	108	49	57	97
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q21																					
YES	98	2002	4	15	14	23	29	7	58							11	80	60	35	37	57
	62%	63%	40%~	52%~	56%~	64%~	72%~	78%~	67%	~	~	~	~	~	~	50%~	64%~	56%*	74%~	67%	59%
NO	59	1173	6	14	11	13	11	2	29							11	45	47	12	18	39
	38%	37%	60%~	48%~	44%~	36%~	28%~	22%~	33%	~	~	~	~	~	~	50%~	36%~	44%*	26%~	33%	41%
NOT ANSWERED	3	45				1	2		1							1	2	1	2	2	1
VALID CASES	157	3175	10	29	25	36	40	9	87							22	125	107	47	55	96
NUMBER OF RESPONDENTS	160	3220	10	29	25	37	42	9	88							23	127	108	49	57	97
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q22																					
NEVER	8	115		3	1		4		5								8	4	4	1	7
	8%	6%	~	20%~	7%~	~	14%~	~	9%~	~	~	~	~	~	~	~	10%~	7%~	11%~	3%~	13%~
SOMETIMES	19	272	1	4	4	3	6		10							2	14	10	8	6	12
	20%	14%	25%~	27%~	29%~	13%~	21%~	~	18%~	~	~	~	~	~	~	18%~	18%~	17%~	23%~	16%~	21%~
USUALLY	23	568	1	3	1	8	5	4	17							2	21	12	11	12	11
	24%	30%	25%~	20%~	7%~	35%~	18%~	57%~	30%~	~	~	~	~	~	~	18%~	27%~	20%~	31%~	32%~	20%~
ALWAYS	46	925	2	5	8	12	13	3	25							7	36	33	12	18	26
	48%	49%	50%~	33%~	57%~	52%~	46%~	43%~	44%~	~	~	~	~	~	~	64%~	46%~	56%~	34%~	49%~	46%~
#ALWAYS + USUALLY (NET)	69	1493	3	8	9	20	18	7	42							9	57	45	23	30	37
	72%	79%	75%~	53%~	64%~	87%~	64%~	100%~	74%~	~	~	~	~	~	~	82%~	72%~	76%~	66%~	81%~	66%~
TOP BOX SCORE	46	925	2	5	8	12	13	3	25							7	36	33	12	18	26
	48%	49%	50%~	33%~	57%~	52%~	46%~	43%~	44%~	~	~	~	~	~	~	64%~	46%~	56%~	34%~	49%~	46%~
NOT ANSWERED	2	69					1		1								1	1			1
VALID CASES	96	1881	4	15	14	23	28	7	57							11	79	59	35	37	56
NUMBER OF RESPONDENTS	98	1950	4	15	14	23	29	7	58							11	80	60	35	37	57
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q23 WORST PERSONAL DOCTOR POSSIBLE		21																			
		0.5%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01	4	38					4		3								3	2	2	1	2
	2%	0.9%	~	~	~	~	9%~	~	3%	~	~	~	~	~	~	~	2%~	1%	4%	1%	2%
02	1	42			1				1								1		1		1
	0.5%	1%	~	~	3%~	~	~	~	1%	~	~	~	~	~	~	~	0.6%~	~	2%	~	0.9%
03	4	61	1		1		1		1							2	1	2	1	1	2
	2%	2%	7%~	~	3%~	~	2%~	~	1%	~	~	~	~	~	~	7%~	0.6%~	1%	2%	1%	2%
04	4	88	1	2	1				1								4	3	1	1	3
	2%	2%	7%~	5%~	3%~	~	~	~	1%	~	~	~	~	~	~	~	3%~	2%	2%	1%	3%
05	7	212		1	2	3	1		2							2	5	1	6	1	6
	4%	5%	~	2%~	6%~	7%~	2%~	~	2%	~	~	~	~	~	~	7%~	3%~	0.7%*	11%*	1%	5%
06	9	181		4	1	2	1		3							1	5	5	4	5	3
	5%	4%	~	10%~	3%~	5%~	2%~	~	3%	~	~	~	~	~	~	4%~	3%~	4%	7%	7%	3%
07	15	352		3	4	5	2		9							2	12	9	5	5	9
	8%	9%	~	7%~	12%~	12%~	4%~	~	9%	~	~	~	~	~	~	7%~	8%~	7%	9%	7%	8%
08	37	703	4	13	5	2	8	3	17							5	30	26	10	11	25
	19%	17%	29%~	33%~	15%~	5%~	18%~	30%~	17%	~	~	~	~	~	~	19%~	19%~	19%	18%	16%	22%
09	35	736	6	7	2	12	7	1	21							4	31	28	7	17	18
	18%	18%	43%~	17%~	6%~	29%~	16%~	10%~	20%	~	~	~	~	~	~	15%~	20%~	21%	13%	25%	16%
BEST PERSONAL DOCTOR POSSIBLE	80	1648	2	10	17	17	21	6	45							11	62	58	18	26	47
	41%	40%	14%~	25%~	50%~	41%~	47%~	60%~	44%	~	~	~	~	~	~	41%~	40%~	43%	33%	38%	41%
#8-10 (NET)	152	3087	12	30	24	31	36	10	83							20	123	112	35	54	90
	78%	76%	86%~	75%~	71%~	76%~	80%~	100%~	81%	~	~	~	~	~	~	74%~	80%~	84%*	64%*	79%	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							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
9-10 (NET)	115	2384	8	17	19	29	28	7	66							15	93	86	25	43	65
	59%	58%	57%~	43%~	56%~	71%~	62%~	70%~	64%	~	~	~	~	~	~	56%~	60%~	64%*	45%*	63%	56%
NOT ANSWERED	12	266		2	1	1	7	1	10							1	11	9	3	7	5
VALID CASES	196	4084	14	40	34	41	45	10	103							27	154	134	55	68	116
NUMBER OF RESPONDENTS	208	4350	14	42	35	42	52	11	113							28	165	143	58	75	121
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%
MEAN	8.36	8.33	8.07	8.13	8.26	8.68	8.20	9.30	8.52							8.22	8.45	8.64	7.69	8.51	8.32
p stat_(*=Sig @ p<=.05)		.814	~	~	~	~	~	~	.253	~	~	~	~	~	~	~	~	.014*	.013*	.432	.727

[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							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q24																					
YES	110	2150	7	16	12	23	38	9	65							13	89	68	39	47	58
	38%	40%	24%~	28%	22%*	46%	56%*	75%~	41%	~	~	~	~	~	~	30%~	40%	34%*	51%*	41%	37%
NO	179	3272	22	42	43	27	30	3	94							31	134	132	37	68	98
	62%	60%	76%~	72%	78%*	54%	44%*	25%~	59%	~	~	~	~	~	~	70%~	60%	66%*	49%*	59%	63%
NOT ANSWERED	13	249		1		3			5								5	3	2	2	3
VALID CASES	289	5422	29	58	55	50	68	12	159							44	223	200	76	115	156
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q25																					
NEVER	9	123		2	1	2	3		5							1	6	5	3	6	2
	8%	6%	~	12%~	8%~	9%~	8%~	~	8%~	~	~	~	~	~	~	8%~	7%~	7%~	8%~	13%~	3%
SOMETIMES	9	379		1		1	7		3							2	6	6	3	4	5
	8%	19%*	~	6%~	~	4%~	19%~	~	5%~	~	~	~	~	~	~	15%~	7%~	9%~	8%~	9%~	9%
USUALLY	35	576		7	3	9	12	3	26							5	29	23	12	12	22
	32%	29%	~	44%~	25%~	39%~	33%~	33%~	41%~	~	~	~	~	~	~	38%~	33%~	34%~	32%~	27%~	38%
ALWAYS	55	938	7	6	8	11	14	6	30							5	46	34	19	23	29
	51%	46%	100%~	37%~	67%~	48%~	39%~	67%~	47%~	~	~	~	~	~	~	38%~	53%~	50%~	51%~	51%~	50%
#ALWAYS + USUALLY (NET)	90	1514	7	13	11	20	26	9	56							10	75	57	31	35	51
	83%	75%*	100%~	81%~	92%~	87%~	72%~	100%~	87%~	~	~	~	~	~	~	77%~	86%~	84%~	84%~	78%~	88%
TOP BOX SCORE	55	938	7	6	8	11	14	6	30							5	46	34	19	23	29
	51%	46%	100%~	37%~	67%~	48%~	39%~	67%~	47%~	~	~	~	~	~	~	38%~	53%~	50%~	51%~	51%~	50%
NOT ANSWERED	2	70					2		1								2		2	2	
VALID CASES	108	2016	7	16	12	23	36	9	64							13	87	68	37	45	58
NUMBER OF RESPONDENTS	110	2086	7	16	12	23	38	9	65							13	89	68	39	47	58
	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							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q26																					
NONE	7	110		2	1	1	2	1	6								7	4	3	4	3
	6%	5%	~	13%~	8%~	4%~	5%~	11%~	9%~	~	~	~	~	~	~	~	8%~	6%~	8%~	9%~	5%
1 SPECIALIST	52	1016	4	7	5	8	19	6	27							4	43	32	18	23	26
	48%	50%	57%~	44%~	42%~	35%~	51%~	67%~	42%~	~	~	~	~	~	~	31%~	49%~	47%~	47%~	50%~	45%
2	30	508	2	6	5	8	8		21							5	24	20	9	15	14
	28%	25%	29%~	38%~	42%~	35%~	22%~	~	33%~	~	~	~	~	~	~	38%~	27%~	29%~	24%~	33%~	24%
3	13	258	1	1		5	4	1	5							3	9	9	4	3	9
	12%	13%	14%~	6%~	~	22%~	11%~	11%~	8%~	~	~	~	~	~	~	23%~	10%~	13%~	11%~	7%~	16%
4	1	69					1		1								1	1			1
	0.9%	3%*	~	~	~	~	3%~	~	2%~	~	~	~	~	~	~	~	1%~	1%~	~	~	2%
5 OR MORE SPECIALISTS	6	55			1	1	3	1	4							1	4	2	4	1	5
	6%	3%	~	~	8%~	4%~	8%~	11%~	6%~	~	~	~	~	~	~	8%~	5%~	3%~	11%~	2%~	9%
NOT ANSWERED	1	71					1		1								1		1	1	
VALID CASES	109	2015	7	16	12	23	37	9	64							13	88	68	38	46	58
NUMBER OF RESPONDENTS	110	2086	7	16	12	23	38	9	65							13	89	68	39	47	58
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q27																					
WORST SPECIALIST	1	19		1													1	1		1	
POSSIBLE	1%	1%	~	7%~	~	~	~	~	~	~	~	~	~	~	~	~	1%~	2%~	~	2%~	~
01		7																			
		0.4%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02		19																			
		1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03	1	32					1		1								1		1	1	
	1%	2%	~	~	~	~	3%~	~	2%~	~	~	~	~	~	~	~	1%~	~	3%~	2%~	~
04	1	32		1					1								1		1	1	
	1%	2%	~	7%~	~	~	~	~	2%~	~	~	~	~	~	~	~	1%~	~	3%~	2%~	~
05	5	67			2	1	1		1							1	2	3	2	1	3
	5%	4%	~	~	18%~	5%~	3%~	~	2%~	~	~	~	~	~	~	8%~	2%~	5%~	6%~	2%~	5%~
06	6	73	1			1	3		3							1	4	3	2	1	4
	6%	4%	14%~	~	~	5%~	9%~	~	5%~	~	~	~	~	~	~	8%~	5%~	5%~	6%~	2%~	7%~
07	10	158		2		3	4		5							2	7	6	3	3	6
	10%	8%	~	14%~	~	14%~	11%~	~	9%~	~	~	~	~	~	~	17%~	9%~	9%~	9%~	7%~	11%~
08	19	318	1	4		2	10	2	10							1	18	10	9	9	10
	19%	17%	14%~	29%~	~	9%~	29%~	29%~	17%~	~	~	~	~	~	~	8%~	22%~	16%~	26%~	22%~	18%~
09	19	355	2	2	2	4	8		14							3	15	16	3	12	6
	19%	19%	29%~	14%~	18%~	18%~	23%~	~	24%~	~	~	~	~	~	~	25%~	19%~	25%~	9%~	29%~	11%~
BEST SPECIALIST	39	797	3	4	7	11	8	5	23							4	32	25	13	12	26
POSSIBLE	39%	42%	43%~	29%~	64%~	50%~	23%~	71%~	40%~	~	~	~	~	~	~	33%~	40%~	39%~	38%~	29%~	47%~
#8-10 (NET)	77	1470	6	10	9	17	26	7	47							8	65	51	25	33	42
	76%	78%	86%~	71%~	82%~	77%~	74%~	100%~	81%~	~	~	~	~	~	~	67%~	80%~	80%~	74%~	80%~	76%~

Continued

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
9-10 (NET)	58	1152	5	6	9	15	16	5	37							7	47	41	16	24	32
	57%	61%	71%~	43%~	82%~	68%~	46%~	71%~	64%~	~	~	~	~	~	~	58%~	58%~	64%~	47%~	59%~	58%~
NOT ANSWERED	1	16						1								1			1	1	
VALID CASES	101	1878	7	14	11	22	35	7	58							12	81	64	34	41	55
NUMBER OF RESPONDENTS	102	1894	7	14	11	22	35	8	58							13	81	64	35	42	55
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%
MEAN	8.43	8.45	8.86	7.71	8.91	8.82	8.17	9.43	8.64							8.33	8.51	8.58	8.21	8.27	8.64
p stat_(*=Sig @ p<=.05)		.924	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q28																					
YES	65	1069	1	20	13	13	10	4	32							13	46	41	20	20	41
	23%	20%	3%~	34%*	24%	26%	15%*	33%~	20%	~	~	~	~	~	~	30%~	21%	21%	26%	18%	26%
NO	223	4323	28	38	42	37	58	8	128							31	177	158	57	94	116
	77%	80%	97%~	66%*	76%	74%	85%*	67%~	80%	~	~	~	~	~	~	70%~	79%	79%	74%	82%	74%
NOT ANSWERED	14	279		1		3			4								5	4	1	3	2
VALID CASES	288	5392	29	58	55	50	68	12	160							44	223	199	77	114	157
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q29																					
NEVER	10	102		3	2	1	2	1	5							1	7	5	4	1	8
	16%	11%	~	18%~	15%~	8%~	20%~	33%~	17%~	~	~	~	~	~	~	8%~	16%~	12%~	24%~	6%~	20%~
SOMETIMES	21	354		6	5	7	2		13							3	17	13	7	3	17
	34%	37%	~	35%~	38%~	54%~	20%~	~	45%~	~	~	~	~	~	~	25%~	40%~	33%~	41%~	18%~	43%~
USUALLY	16	333	1	5	3	2	4	1	6							4	11	14	2	5	11
	26%	35%	100%~	29%~	23%~	15%~	40%~	33%~	21%~	~	~	~	~	~	~	33%~	26%~	35%~	12%~	29%~	28%~
ALWAYS	14	171		3	3	3	2	1	5							4	8	8	4	8	4
	23%	18%	~	18%~	23%~	23%~	20%~	33%~	17%~	~	~	~	~	~	~	33%~	19%~	20%~	24%~	47%~	10%~
#ALWAYS + USUALLY (NET)	30	504	1	8	6	5	6	2	11							8	19	22	6	13	15
	49%	52%	100%~	47%~	46%~	38%~	60%~	67%~	38%~	~	~	~	~	~	~	67%~	44%~	55%~	35%~	76%~	38%~
TOP BOX SCORE	14	171		3	3	3	2	1	5							4	8	8	4	8	4
	23%	18%	~	18%~	23%~	23%~	20%~	33%~	17%~	~	~	~	~	~	~	33%~	19%~	20%~	24%~	47%~	10%~
NOT ANSWERED	4	35		3				1	3							1	3	1	3	3	1
VALID CASES	61	961	1	17	13	13	10	3	29							12	43	40	17	17	40
NUMBER OF RESPONDENTS	65	996	1	20	13	13	10	4	32							13	46	41	20	20	41
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q30																					
YES	72	1502	5	14	17	11	17	3	30							14	52	45	24	28	40
	25%	28%	17%~	24%	31%	22%	25%	25%~	19%*	~	~	~	~	~	~	32%~	23%	23%	31%	25%	25%
NO	215	3866	24	44	38	39	51	9	130							30	171	154	53	86	117
	75%	72%	83%~	76%	69%	78%	75%	75%~	81%*	~	~	~	~	~	~	68%~	77%	77%	69%	75%	75%
NOT ANSWERED	15	303		1		3			4								5	4	1	3	2
VALID CASES	287	5368	29	58	55	50	68	12	160							44	223	199	77	114	157
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	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?

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q31																					
NEVER	5	56		2	1		1	1	1							1	4	3	2	1	4
	7%	4%	~	14%~	6%~	~	6%~	33%~	3%~	~	~	~	~	~	~	7%~	8%~	7%~	9%~	4%~	10%~
SOMETIMES	15	267	1	5	3		3	1	7							5	8	9	6	3	11
	21%	20%	20%~	36%~	18%~	~	19%~	33%~	24%~	~	~	~	~	~	~	36%~	16%~	20%~	26%~	11%~	28%~
USUALLY	17	405	1	2	8	3	2		7							3	12	7	9	8	8
	24%	30%	20%~	14%~	47%~	27%~	12%~	~	24%~	~	~	~	~	~	~	21%~	24%~	16%~	39%~	29%~	21%~
ALWAYS	34	624	3	5	5	8	10	1	14							5	27	26	6	16	16
	48%	46%	60%~	36%~	29%~	73%~	63%~	33%~	48%~	~	~	~	~	~	~	36%~	53%~	58%~	26%~	57%~	41%~
#ALWAYS + USUALLY (NET)	51	1029	4	7	13	11	12	1	21							8	39	33	15	24	24
	72%	76%	80%~	50%~	76%~	100%~	75%~	33%~	72%~	~	~	~	~	~	~	57%~	76%~	73%~	65%~	86%~	62%~
TOP BOX SCORE	34	624	3	5	5	8	10	1	14							5	27	26	6	16	16
	48%	46%	60%~	36%~	29%~	73%~	63%~	33%~	48%~	~	~	~	~	~	~	36%~	53%~	58%~	26%~	57%~	41%~
NOT ANSWERED	1	48					1		1								1		1		1
VALID CASES	71	1351	5	14	17	11	16	3	29							14	51	45	23	28	39
NUMBER OF RESPONDENTS	72	1399	5	14	17	11	17	3	30							14	52	45	24	28	40
	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?

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q32																					
NEVER	3	18			2			1	1								3	1	2	1	2
	4%	1%	~	~	12%~	~	~	33%~	3%~	~	~	~	~	~	~	~	6%~	2%~	9%~	4%~	5%~
SOMETIMES		102																			
		8%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
USUALLY	17	291	2	7	4	1	3		5							6	10	10	7	4	13
	24%	21%	40%~	50%~	24%~	9%~	19%~	~	17%~	~	~	~	~	~	~	43%~	20%~	22%~	30%~	14%~	33%~
ALWAYS	51	946	3	7	11	10	13	2	23							8	38	34	14	23	24
	72%	70%	60%~	50%~	65%~	91%~	81%~	67%~	79%~	~	~	~	~	~	~	57%~	75%~	76%~	61%~	82%~	62%~
#ALWAYS + USUALLY (NET)	68	1237	5	14	15	11	16	2	28							14	48	44	21	27	37
	96%	91%	100%~	100%~	88%~	100%~	100%~	67%~	97%~	~	~	~	~	~	~	100%~	94%~	98%~	91%~	96%~	95%~
TOP BOX SCORE	51	946	3	7	11	10	13	2	23							8	38	34	14	23	24
	72%	70%	60%~	50%~	65%~	91%~	81%~	67%~	79%~	~	~	~	~	~	~	57%~	75%~	76%~	61%~	82%~	62%~
NOT ANSWERED	1	41					1		1								1		1		1
VALID CASES	71	1358	5	14	17	11	16	3	29							14	51	45	23	28	39
NUMBER OF RESPONDENTS	72	1399	5	14	17	11	17	3	30							14	52	45	24	28	40
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q33																					
YES	86	1713	7	20	17	18	18	2	42							18	63	55	28	30	52
	31%	32%	25%~	34%	31%	36%	29%	18%~	27%	~	~	~	~	~	~	43%~	29%	29%	36%	27%	34%
NO	194	3590	21	38	37	32	45	9	114							24	154	136	49	82	100
	69%	68%	75%~	66%	69%	64%	71%	82%~	73%	~	~	~	~	~	~	57%~	71%	71%	64%	73%	66%
NOT ANSWERED	22	368	1	1	1	3	5	1	8							2	11	12	1	5	7
VALID CASES	280	5303	28	58	54	50	63	11	156							42	217	191	77	112	152
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
PQ34																					
NEVER	3	82		1	1	1			1							2	1	1	2	2	1
	1%	2%	~	2%	2%	2%	~	~	0.6%	~	~	~	~	~	~	5%~	0.5%	0.5%	3%	2%	0.7%
SOMETIMES	13	286	4		2	2	3	1	5							3	9	5	7	4	8
	5%	5%	14%~	~	4%	4%	5%	10%~	3%	~	~	~	~	~	~	7%~	4%	3%*	9%	4%	5%
USUALLY	27	671		8	4	6	8		15							5	20	18	8	10	16
	10%	13%	~	14%	8%	12%	13%	~	10%	~	~	~	~	~	~	12%~	9%	10%	11%	9%	11%
ALWAYS	231	4198	24	47	46	41	51	9	134							32	182	165	57	95	123
	84%	80%	86%~	84%	87%	82%	82%	90%~	86%	~	~	~	~	~	~	76%~	86%	87%	77%	86%	83%
#ALWAYS + USUALLY (NET)	258	4868	24	55	50	47	59	9	149							37	202	183	65	105	139
	94%	93%	86%~	98%*	94%	94%	95%	90%~	96%	~	~	~	~	~	~	88%~	95%	97%*	88%*	95%	94%
TOP BOX SCORE	231	4198	24	47	46	41	51	9	134							32	182	165	57	95	123
	84%	80%	86%~	84%	87%	82%	82%	90%~	86%	~	~	~	~	~	~	76%~	86%	87%	77%	86%	83%
NOT ANSWERED	6	86		2	1		1	1	1								5	2	3	1	4
VALID CASES	274	5236	28	56	53	50	62	10	155							42	212	189	74	111	148
NUMBER OF RESPONDENTS	280	5322	28	58	54	50	63	11	156							42	217	191	77	112	152
	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							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35																					
WORST HEALTH PLAN	6	41	1		2	1	1		4								4		5	2	2
POSSIBLE	2%	0.8%	4%~	~	4%	2%~	2%	~	3%	~	~	~	~	~	~	~	2%	~	7%*	2%	1%
01	4	47				2	2		1							2	2	2	2	1	3
	2%	0.9%	~	~	~	4%~	3%	~	0.7%	~	~	~	~	~	~	5%~	1%	1%	3%	0.9%	2%
02	4	52		1	1	1	1		4								4	2	2	1	3
	2%	1%	~	2%	2%	2%~	2%	~	3%*	~	~	~	~	~	~	~	2%~	1%	3%	0.9%	2%
03	7	102		1	1	3	2		3							1	5	2	5	3	4
	3%	2%	~	2%	2%	7%~	3%	~	2%	~	~	~	~	~	~	2%~	2%	1%	7%	3%	3%
04	4	122		2		1			2								3	2	1	2	1
	2%	2%	~	4%	~	2%~	~	~	1%	~	~	~	~	~	~	~	1%	1%	1%	2%	0.7%
05	33	466	3	11	6	3	9		20							4	27	26	7	12	20
	13%	9%	11%~	19%	12%	7%~	15%	~	14%	~	~	~	~	~	~	10%~	13%	14%	10%	11%	14%
06	13	327	1	3	2	5	1		9								12	8	5	4	8
	5%	6%	4%~	5%	4%	11%~	2%	~	6%	~	~	~	~	~	~	~	6%	4%	7%	4%	6%
07	34	646	3	10	8	5	5	1	15							3	29	17	15	14	18
	13%	13%	11%~	18%	16%	11%~	8%	11%~	11%	~	~	~	~	~	~	7%~	14%	9%*	21%*	13%	13%
08	47	1048	9	9	9	6	11	1	26							5	40	36	8	18	26
	18%	21%	33%~	16%	18%	13%~	19%	11%~	19%	~	~	~	~	~	~	12%~	20%	20%	11%	17%	19%
09	40	797	6	9	5	7	10	3	18							10	29	35	5	19	21
	15%	16%	22%~	16%	10%	15%~	17%	33%~	13%	~	~	~	~	~	~	24%~	14%	19%*	7%*	18%	15%
BEST HEALTH PLAN	71	1383	4	11	17	12	17	4	38							17	48	52	15	32	34
POSSIBLE	27%	27%	15%~	19%	33%	26%~	29%	44%~	27%	~	~	~	~	~	~	40%~	24%*	29%	21%	30%	24%
#8-10 (NET)	158	3229	19	29	31	25	38	8	82							32	117	123	28	69	81
	60%	64%	70%~	51%	61%	54%~	64%	89%~	59%	~	~	~	~	~	~	76%~	58%	68%*	40%*	64%	58%

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							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
9-10 (NET)	111	2180	10	20	22	19	27	7	56							27	77	87	20	51	55
	42%	43%	37%~	35%	43%	41%~	46%	78%~	40%	~	~	~	~	~	~	64%~	38%*	48%*	29%*	47%	39%
NOT ANSWERED	39	640	2	2	4	7	9	3	24							2	25	21	8	9	19
VALID CASES	263	5031	27	57	51	46	59	9	140							42	203	182	70	108	140
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%
MEAN	7.51	7.78	7.70	7.35	7.65	7.13	7.53	9.11	7.39							8.24	7.43	7.91	6.49	7.75	7.40
p stat_(*=Sig @ p<=.05)		.080		~.578	.669		~.968		~.403	~	~	~	~	~	~		~.311	.001*	.000*	.192	.432

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35A																					
YES	31	663		5	4	9	8	4	16							2	26	9	21	15	15
	11%	12%	~	9%	7%	18%	12%	36%~	10%	~	~	~	~	~	~	5%~	12%	5%*	28%*	13%	10%
NO	253	4665	29	53	50	41	58	7	140							41	194	187	55	98	139
	89%	88%	100%~	91%	93%	82%	88%	64%~	90%	~	~	~	~	~	~	95%~	88%	95%*	72%*	87%	90%
NOT ANSWERED	18	342		1	1	3	2	1	8							1	8	7	2	4	5
VALID CASES	284	5329	29	58	54	50	66	11	156							43	220	196	76	113	154
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35B																					
NEVER	7	127			2	4		1	1							1	5	5	2	2	5
	28%	21%~	~	~	50%~	44%~	~	33%~	8%~	~	~	~	~	~	~	50%~	25%~	83%~	11%~	18%~	38%~
SOMETIMES	3	93				1	2		1								2	1	2	2	1
	12%	16%~	~	~	~	11%~	40%~	~	8%~	~	~	~	~	~	~	~	10%~	17%~	11%~	18%~	8%~
USUALLY	8	141		2	2	2	1	1	5							1	7		8	3	5
	32%	24%~	~	67%~	50%~	22%~	20%~	33%~	42%~	~	~	~	~	~	~	50%~	35%~	~	44%~	27%~	38%~
ALWAYS	7	234		1		2	2	1	5								6		6	4	2
	28%	39%~	~	33%~	~	22%~	40%~	33%~	42%~	~	~	~	~	~	~	~	30%~	~	33%~	36%~	15%~
#ALWAYS + USUALLY (NET)	15	375		3	2	4	3	2	10							1	13		14	7	7
	60%	63%~	~	100%~	50%~	44%~	60%~	67%~	83%~	~	~	~	~	~	~	50%~	65%~	~	78%~	64%~	54%~
TOP BOX SCORE	7	234		1		2	2	1	5								6		6	4	2
	28%	39%~	~	33%~	~	22%~	40%~	33%~	42%~	~	~	~	~	~	~	~	30%~	~	33%~	36%~	15%~
NOT ANSWERED	6	32		2			3	1	4								6	3	3	4	2
VALID CASES	25	595		3	4	9	5	3	12							2	20	6	18	11	13
NUMBER OF RESPONDENTS	31	627		5	4	9	8	4	16							2	26	9	21	15	15
	100%	100%		100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q35A = YES]

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35C																					
YES	41	814	2	4	5	11	13	4	23							3	36	19	21	13	27
	15%	15%	7%~	7%*	9%	23%~	20%	33%~	15%	~	~	~	~	~	~	7%~	17%*	10%*	28%*	12%	18%
NO	239	4498	27	54	49	37	51	8	131							41	180	175	54	97	127
	85%	85%	93%~	93%*	91%	77%~	80%	67%~	85%	~	~	~	~	~	~	93%~	83%*	90%*	72%*	88%	82%
NOT ANSWERED	22	359		1	1	5	4		10								12	9	3	7	5
VALID CASES	280	5312	29	58	54	48	64	12	154							44	216	194	75	110	154
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35D																					
NEVER	14	169	1	2	3	3	3	1	7							1	13	8	6	1	13
	36%	23%~	50%~	67%~	60%~	27%~	23%~	33%~	32%~	~	~	~	~	~	~	33%~	38%~	42%~	32%~	8%~	50%~
SOMETIMES	11	128	1			4	5		7								9	4	6	4	6
	28%	17%~	50%~	~	~	36%~	38%~	~	32%~	~	~	~	~	~	~	~	26%~	21%~	32%~	33%~	23%~
USUALLY	5	197		1	1	1	2		3								5	2	3	3	2
	13%	26%~	~	33%~	20%~	9%~	15%~	~	14%~	~	~	~	~	~	~	~	15%~	11%~	16%~	25%~	8%~
ALWAYS	9	251			1	3	3	2	5							2	7	5	4	4	5
	23%	34%~	~	~	20%~	27%~	23%~	67%~	23%~	~	~	~	~	~	~	67%~	21%~	26%~	21%~	33%~	19%~
#ALWAYS + USUALLY (NET)	14	448		1	2	4	5	2	8							2	12	7	7	7	7
	36%	60%~	~	33%~	40%~	36%~	38%~	67%~	36%~	~	~	~	~	~	~	67%~	35%~	37%~	37%~	58%~	27%~
TOP BOX SCORE	9	251			1	3	3	2	5							2	7	5	4	4	5
	23%	34%~	~	~	20%~	27%~	23%~	67%~	23%~	~	~	~	~	~	~	67%~	21%~	26%~	21%~	33%~	19%~
NOT ANSWERED	2	29		1				1	1								2		2	1	1
VALID CASES	39	745	2	3	5	11	13	3	22							3	34	19	19	12	26
NUMBER OF RESPONDENTS	41	774	2	4	5	11	13	4	23							3	36	19	21	13	27
	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							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35E																					
YES	156	2942	12	31	25	35	41	8	93							18	130	108	45	56	96
	56%	55%	43%~	53%	46%	69%*	63%	73%~	60%	~	~	~	~	~	~	42%~	59%*	55%	60%	50%	63%*
NO	124	2408	16	27	29	16	24	3	63							25	89	88	30	57	57
	44%	45%	57%~	47%	54%	31%*	37%	27%~	40%	~	~	~	~	~	~	58%~	41%*	45%	40%	50%	37%*
NOT ANSWERED	22	321	1	1	1	2	3	1	8							1	9	7	3	4	6
VALID CASES	280	5350	28	58	54	51	65	11	156							43	219	196	75	113	153
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35F																					
NO EFFORT AT ALL	3	101	1			1		1	1							1	2	2	1	2	1
	2%	4%	8%~	~	~	3%~	~	13%~	1%	~	~	~	~	~	~	6%~	2%~	2%~	2%~	4%	1%
A LITTLE EFFORT WAS MADE	19	195		4	4	4	6	1	12							4	13	9	10	7	12
	13%	7%*	~	13%~	16%~	12%~	16%~	13%~	13%	~	~	~	~	~	~	22%~	10%~	9%~	23%~	13%	13%
SOME EFFORT WAS MADE	32	696	4	7	5	6	9		18							3	28	19	12	11	20
	21%	25%	33%~	23%~	20%~	18%~	24%~	~	20%	~	~	~	~	~	~	17%~	22%~	18%~	27%~	20%	22%
A LOT OF EFFORT WAS MADE	97	1801	7	19	16	23	23	6	58							10	82	74	21	34	60
	64%	64%	58%~	63%~	64%~	68%~	61%~	75%~	65%	~	~	~	~	~	~	56%~	66%~	71%~	48%~	63%	65%
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE(NET)	129	2497	11	26	21	29	32	6	76							13	110	93	33	45	80
	85%	89%	92%~	87%~	84%~	85%~	84%~	75%~	85%	~	~	~	~	~	~	72%~	88%~	89%~	75%~	83%	86%
TOP BOX SCORE	97	1801	7	19	16	23	23	6	58							10	82	74	21	34	60
	64%	64%	58%~	63%~	64%~	68%~	61%~	75%~	65%	~	~	~	~	~	~	56%~	66%~	71%~	48%~	63%	65%
NOT ANSWERED	5	82		1		1	3		4								5	4	1	2	3
VALID CASES	151	2794	12	30	25	34	38	8	89							18	125	104	44	54	93
NUMBER OF RESPONDENTS	156	2876	12	31	25	35	41	8	93							18	130	108	45	56	96
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q35E = YES]

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35G																					
NO EFFORT AT ALL	5	101	1	1		2	1		3							2	3	5		2	3
	3%	4%	8%~	3%~	~	6%~	3%~	~	3%	~	~	~	~	~	~	11%~	2%~	5%~	~	4%	3%
A LITTLE EFFORT WAS MADE	16	226		3	2	4	6	1	9							2	12	6	10	5	11
	11%	8%	~	10%~	8%~	11%~	15%~	13%~	10%	~	~	~	~	~	~	11%~	9%~	6%~	22%~	9%	12%
SOME EFFORT WAS MADE	33	717	4	8	6	5	8	1	21							2	30	23	9	13	19
	22%	26%	33%~	27%~	24%~	14%~	21%~	13%~	23%	~	~	~	~	~	~	11%~	24%~	22%~	20%~	24%	20%
A LOT OF EFFORT WAS MADE	98	1741	7	18	17	24	24	6	57							12	82	71	26	34	62
	64%	63%	58%~	60%~	68%~	69%~	62%~	75%~	63%	~	~	~	~	~	~	67%~	65%~	68%~	58%~	63%	65%
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE(NET)	131	2458	11	26	23	29	32	7	78							14	112	94	35	47	81
	86%	88%	92%~	87%~	92%~	83%~	82%~	88%~	87%	~	~	~	~	~	~	78%~	88%~	90%~	78%~	87%	85%
TOP BOX SCORE	98	1741	7	18	17	24	24	6	57							12	82	71	26	34	62
	64%	63%	58%~	60%~	68%~	69%~	62%~	75%~	63%	~	~	~	~	~	~	67%~	65%~	68%~	58%~	63%	65%
NOT ANSWERED	4	91		1			2		3								3	3		2	1
VALID CASES	152	2785	12	30	25	35	39	8	90							18	127	105	45	54	95
NUMBER OF RESPONDENTS	156	2876	12	31	25	35	41	8	93							18	130	108	45	56	96
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q35E = YES]

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35H																					
NO EFFORT AT ALL	9	190	1	1	1	3	3		5							3	5	7	2	3	6
	6%	7%	8%~	3%~	4%~	9%~	7%~	~	5%	~	~	~	~	~	~	18%~	4%~	7%~	5%~	5%	6%
A LITTLE EFFORT WAS MADE	13	238		2	3	3	4	1	9								12	7	6	3	10
	9%	9%	~	7%~	13%~	9%~	10%~	13%~	10%	~	~	~	~	~	~	~	9%~	7%~	14%~	5%	11%
SOME EFFORT WAS MADE	39	749	5	9	7	4	12	1	21							4	34	25	13	19	19
	26%	27%	42%~	30%~	29%~	11%~	30%~	13%~	23%	~	~	~	~	~	~	24%~	27%~	24%~	30%~	35%	20%
A LOT OF EFFORT WAS MADE	91	1596	6	18	13	25	21	6	56							10	77	67	23	30	59
	60%	58%	50%~	60%~	54%~	71%~	53%~	75%~	62%	~	~	~	~	~	~	59%~	60%~	63%~	52%~	55%	63%
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE(NET)	130	2345	11	27	20	29	33	7	77							14	111	92	36	49	78
	86%	85%	92%~	90%~	83%~	83%~	83%~	88%~	85%	~	~	~	~	~	~	82%~	87%~	87%~	82%~	89%	83%
TOP BOX SCORE	91	1596	6	18	13	25	21	6	56							10	77	67	23	30	59
	60%	58%	50%~	60%~	54%~	71%~	53%~	75%~	62%	~	~	~	~	~	~	59%~	60%~	63%~	52%~	55%	63%
NOT ANSWERED	4	103		1	1		1		2							1	2	2	1	1	2
VALID CASES	152	2773	12	30	24	35	40	8	91							17	128	106	44	55	94
NUMBER OF RESPONDENTS	156	2876	12	31	25	35	41	8	93							18	130	108	45	56	96
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q35E = YES]

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35I																					
YES	114	1870	10	22	19	20	31	9	63							15	94	79	33	41	70
	40%	35%	34%~	38%	35%	39%	46%	75%~	39%	~	~	~	~	~	~	34%~	42%	40%	43%	36%	45%
NO	168	3406	19	36	36	31	36	3	97							29	130	119	44	74	86
	60%	65%	66%~	62%	65%	61%	54%	25%~	61%	~	~	~	~	~	~	66%~	58%	60%	57%	64%	55%
NOT ANSWERED	20	394		1		2	1		4								4	5	1	2	3
VALID CASES	282	5277	29	58	55	51	67	12	160							44	224	198	77	115	156
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	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?

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35J																					
#YES	97	1588	9	20	15	17	26	9	53							13	82	70	27	35	61
	89%	89%	90%~	91%~	83%~	94%~	90%~	100%~	91%	~	~	~	~	~	~	87%~	92%~	93%~	84%~	88%~	92%~
NO	12	204	1	2	3	1	3		5							2	7	5	5	5	5
	11%	11%	10%~	9%~	17%~	6%~	10%~	~	9%	~	~	~	~	~	~	13%~	8%~	7%~	16%~	13%~	8%~
NOT ANSWERED	5	60			1	2	2		5								5	4	1	1	4
VALID CASES	109	1792	10	22	18	18	29	9	58							15	89	75	32	40	66
NUMBER OF RESPONDENTS	114	1852	10	22	19	20	31	9	63							15	94	79	33	41	70
	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?

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35K																					
#YES	90	1484	9	20	14	16	21	8	49							12	75	66	23	32	56
	84%	84%	90%~	91%~	82%~	89%~	75%~	89%~	88%	~	~	~	~	~	~	80%~	86%~	89%~	74%~	82%~	86%~
NO	17	292	1	2	3	2	7	1	7							3	12	8	8	7	9
	16%	16%	10%~	9%~	18%~	11%~	25%~	11%~	13%	~	~	~	~	~	~	20%~	14%~	11%~	26%~	18%~	14%~
NOT ANSWERED	7	76			2	2	3		7								7	5	2	2	5
VALID CASES	107	1776	10	22	17	18	28	9	56							15	87	74	31	39	65
NUMBER OF RESPONDENTS	114	1852	10	22	19	20	31	9	63							15	94	79	33	41	70
	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?

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35L																					
NEVER	42	692	2	8	11	4	14	1	24							6	33	26	14	20	19
	15%	13%	8%~	14%	21%	8%*	22%	9%~	15%	~	~	~	~	~	~	14%~	15%	14%	18%	18%	13%
SOMETIMES	38	623	7	10	4	8	6	1	16							10	23	22	15	15	21
	14%	12%	28%~	17%	8%	15%	9%	9%~	10%	~	~	~	~	~	~	23%~	11%*	11%	20%	13%	14%
USUALLY	63	1195	7	13	15	12	13	2	35							13	49	43	19	19	43
	23%	23%	28%~	22%	28%	23%	20%	18%~	23%	~	~	~	~	~	~	30%~	23%	22%	25%	17%*	28%*
ALWAYS	131	2698	9	27	23	28	32	7	80							14	112	101	28	58	68
	48%	52%	36%~	47%	43%	54%	49%	64%~	52%	~	~	~	~	~	~	33%~	52%*	53%*	37%*	52%	45%
#ALWAYS + USUALLY (NET)	194	3894	16	40	38	40	45	9	115							27	161	144	47	77	111
	71%	75%	64%~	69%	72%	77%	69%	82%~	74%	~	~	~	~	~	~	63%~	74%*	75%*	62%	69%	74%
TOP BOX SCORE	131	2698	9	27	23	28	32	7	80							14	112	101	28	58	68
	48%	52%	36%~	47%	43%	54%	49%	64%~	52%	~	~	~	~	~	~	33%~	52%*	53%*	37%*	52%	45%
NOT ANSWERED	28	462	4	1	2	1	3	1	9							1	11	11	2	5	8
VALID CASES	274	5209	25	58	53	52	65	11	155							43	217	192	76	112	151
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35M																					
ALWAYS	17	310	2	5	3	3	4		6							5	11	10	7	7	9
	6%	6%	8%~	9%	6%	6%	6%	~	4%	~	~	~	~	~	~	12%~	5%	5%	9%	6%	6%
USUALLY	12	270	1	3	2	2	3	1	6							3	9	6	6	4	8
	4%	5%	4%~	5%	4%	4%	5%	9%~	4%	~	~	~	~	~	~	7%~	4%	3%	8%	4%	5%
SOMETIMES	36	952	8	4	6	8	9	1	24							8	27	25	11	14	22
	13%	18%*	31%~	7%	11%	15%	14%	9%~	16%	~	~	~	~	~	~	19%~	13%	13%	14%	12%	15%
NEVER	204	3697	15	45	42	40	47	9	117							27	169	151	52	87	111
	76%	71%	58%~	79%	79%	75%	75%	82%~	76%	~	~	~	~	~	~	63%~	78%	79%	68%	78%	74%
#NEVER + SOMETIMES	240	4649	23	49	48	48	56	10	141							35	196	176	63	101	133
(NET)	89%	89%	88%~	86%	91%	91%	89%	91%~	92%	~	~	~	~	~	~	81%~	91%	92%	83%	90%	89%
TOP BOX SCORE	204	3697	15	45	42	40	47	9	117							27	169	151	52	87	111
	76%	71%	58%~	79%	79%	75%	75%	82%~	76%	~	~	~	~	~	~	63%~	78%	79%	68%	78%	74%
NOT ANSWERED	33	442	3	2	2		5	1	11							1	12	11	2	5	9
VALID CASES	269	5229	26	57	53	53	63	11	153							43	216	192	76	112	150
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35N																					
ALWAYS	2	79			1		1		1							1	1	1	1	1	1
	0.7%	2%	~	~	2%	~	2%	~	0.7%	~	~	~	~	~	~	2%~	0.5%	0.5%	1%	0.9%	0.7%
USUALLY	4	129		1	1	1	1		2								3		4	1	2
	1%	2%	~	2%	2%	2%	2%	~	1%	~	~	~	~	~	~	~	1%	~	5%~	0.9%	1%
SOMETIMES	46	739	7	9	6	11	10	1	30							8	37	31	15	15	30
	17%	14%	26%~	16%	11%	21%	16%	9%~	20%	~	~	~	~	~	~	18%~	17%	16%	20%	13%	20%
NEVER	219	4276	20	47	45	41	52	10	120							35	176	162	56	96	118
	81%	82%	74%~	82%	85%	77%	81%	91%~	78%	~	~	~	~	~	~	80%~	81%	84%	74%	85%	78%
#NEVER + SOMETIMES	265	5015	27	56	51	52	62	11	150							43	213	193	71	111	148
(NET)	98%	96%	100%~	98%	96%	98%	97%	100%~	98%	~	~	~	~	~	~	98%~	98%	99%*	93%*	98%	98%
TOP BOX SCORE	219	4276	20	47	45	41	52	10	120							35	176	162	56	96	118
	81%	82%	74%~	82%	85%	77%	81%	91%~	78%	~	~	~	~	~	~	80%~	81%	84%	74%	85%	78%
NOT ANSWERED	31	448	2	2	2		4	1	11								11	9	2	4	8
VALID CASES	271	5223	27	57	53	53	64	11	153							44	217	194	76	113	151
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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?

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35O																					
ALWAYS		62																			
		1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
USUALLY	3	77		1			2		1								2	1	2	1	1
	1%	1%	~	2%	~	~	3%	~	0.7%	~	~	~	~	~	~	~	0.9%	0.5%	3%	0.9%	0.7%
SOMETIMES	31	505	5	6	5	6	6	2	20							6	24	19	12	9	21
	11%	10%	19%~	11%	9%	11%	9%	18%~	13%	~	~	~	~	~	~	14%~	11%	10%	16%	8%	14%
NEVER	237	4589	22	50	48	47	56	9	132							38	191	174	62	103	129
	87%	88%	81%~	88%	91%	89%	88%	82%~	86%	~	~	~	~	~	~	86%~	88%	90%	82%	91%	85%
#NEVER + SOMETIMES	268	5094	27	56	53	53	62	11	152							44	215	193	74	112	150
(NET)	99%	97%*	100%~	98%	100%~	100%~	97%	100%~	99%	~	~	~	~	~	~	100%~	99%	99%	97%	99%	99%
TOP BOX SCORE	237	4589	22	50	48	47	56	9	132							38	191	174	62	103	129
	87%	88%	81%~	88%	91%	89%	88%	82%~	86%	~	~	~	~	~	~	86%~	88%	90%	82%	91%	85%
NOT ANSWERED	31	438	2	2	2		4	1	11								11	9	2	4	8
VALID CASES	271	5233	27	57	53	53	64	11	153							44	217	194	76	113	151
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	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?

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35P																					
#YES DEFINITELY	170	3547	15	39	33	34	39	9	96							25	143	134	36	76	92
	64%	69%	56%~	68%	66%	64%	62%	90%~	63%	~	~	~	~	~	~	58%~	67%	71%*	48%*	70%	61%
YES SOMEWHAT	73	1203	10	12	13	17	17	1	42							14	54	42	31	24	47
	28%	23%	37%~	21%	26%	32%	27%	10%~	28%	~	~	~	~	~	~	33%~	25%	22%*	41%*	22%	31%
NO	21	417	2	6	4	2	7		14							4	16	13	8	9	11
	8%	8%	7%~	11%	8%	4%	11%	~	9%	~	~	~	~	~	~	9%~	8%	7%	11%	8%	7%
NOT ANSWERED	38	503	2	2	5		5	2	12							1	15	14	3	8	9
VALID CASES	264	5168	27	57	50	53	63	10	152							43	213	189	75	109	150
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	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?

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35Q																					
YES	143	2983	12	30	29	33	32	3	84							23	114	107	35	53	85
	52%	57%	43%~	52%	53%	63%	49%	25%~	53%	~	~	~	~	~	~	53%~	51%	54%	45%	46%	54%
NO	134	2289	16	28	26	19	33	9	76							20	109	92	42	61	71
	48%	43%	57%~	48%	47%	37%	51%	75%~	47%	~	~	~	~	~	~	47%~	49%	46%	55%	54%	46%
NOT ANSWERED	25	399	1	1		1	3		4							1	5	4	1	3	3
VALID CASES	277	5272	28	58	55	52	65	12	160							43	223	199	77	114	156
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	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?

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35R																					
NEVER	63	917	7	13	13	12	10	4	26							10	48	36	27	20	39
	45%	37%	41%~	41%~	50%~	43%~	40%~	67%~	45%	~	~	~	~	~	~	33%~	46%~	38%~	59%~	34%*	51%
SOMETIMES	20	468	4	5	3	4	2	1	9							7	13	14	6	10	10
	14%	19%	24%~	16%~	12%~	14%~	8%~	17%~	16%	~	~	~	~	~	~	23%~	13%~	15%~	13%~	17%	13%
USUALLY	22	470	2	6	4	5	4	1	12							6	16	17	5	8	14
	16%	19%	12%~	19%~	15%~	18%~	16%~	17%~	21%	~	~	~	~	~	~	20%~	15%~	18%~	11%~	14%	18%
ALWAYS	35	619	4	8	6	7	9		11							7	27	27	8	20	14
	25%	25%	24%~	25%~	23%~	25%~	36%~	~	19%	~	~	~	~	~	~	23%~	26%~	29%~	17%~	34%*	18%*
#ALWAYS + USUALLY (NET)	57	1089	6	14	10	12	13	1	23							13	43	44	13	28	28
	41%	44%	35%~	44%~	38%~	43%~	52%~	17%~	40%	~	~	~	~	~	~	43%~	41%~	47%~	28%~	48%	36%
TOP BOX SCORE	35	619	4	8	6	7	9		11							7	27	27	8	20	14
	25%	25%	24%~	25%~	23%~	25%~	36%~	~	19%	~	~	~	~	~	~	23%~	26%~	29%~	17%~	34%*	18%*
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	136	2730	11	26	29	25	39	6	101							13	119	105	31	57	79
NOT ANSWERED	26	467	1	1			4		5							1	5	4	1	2	3
VALID CASES	140	2474	17	32	26	28	25	6	58							30	104	94	46	58	77
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q36																					
EXCELLENT	29	556	7	9	2	1	6	2	14							6	22	29		14	14
	10%	10%	25%~	15%	4%*	2%*	9%	17%~	9%	~	~	~	~	~	~	14%~	10%	14%~	~	12%	9%
VERY GOOD	77	1282	10	22	8	17	17		50							8	65	77		27	47
	27%	24%	36%~	37%	15%*	32%	25%	~	31%	~	~	~	~	~	~	18%~	29%	38%*	~	23%	30%
GOOD	97	1849	8	17	25	19	26	2	57							20	75	97		39	58
	35%	35%	29%~	29%	45%	36%	38%	17%~	35%	~	~	~	~	~	~	45%~	33%	48%*	~	34%	36%
FAIR	54	1201	3	10	16	10	11	4	30							7	45		54	22	31
	19%	23%	11%~	17%	29%	19%	16%	33%~	18%	~	~	~	~	~	~	16%~	20%	~	69%*	19%	19%
POOR	24	406		1	4	6	8	4	12							3	20		24	14	9
	9%	8%	~	2%*	7%	11%	12%	33%~	7%	~	~	~	~	~	~	7%~	9%	~	31%*	12%	6%
#EXCELLENT + VERY GOOD	203	3686	25	48	35	37	49	4	121							34	162	203		80	119
+ GOOD (NET)	72%	70%	89%~	81%	64%	70%	72%	33%~	74%	~	~	~	~	~	~	77%~	71%	100%~	~	69%	75%
NOT ANSWERED	21	377	1						1								1			1	
VALID CASES	281	5294	28	59	55	53	68	12	163							44	227	203	78	116	159
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	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?

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q37																					
EXCELLENT	50	956	10	11	7	5	11	2	26							13	33	45	5	26	20
	18%	18%	37%~	19%	13%	9%*	17%	17%~	16%	~	~	~	~	~	~	30%~	15%*	22%*	6%*	23%	13%*
VERY GOOD	75	1444	5	19	11	18	18	3	41							11	64	66	9	28	47
	27%	27%	19%~	32%	20%	34%	27%	25%~	25%	~	~	~	~	~	~	25%~	28%	33%*	12%*	24%	30%
GOOD	75	1591	5	17	20	12	20	1	47							11	63	58	17	33	42
	27%	30%	19%~	29%	36%	23%	30%	8%~	29%	~	~	~	~	~	~	25%~	28%	29%	22%	29%	27%
FAIR	64	1030	6	12	13	16	11	5	38							9	52	25	39	22	41
	23%	19%	22%~	20%	24%	30%	17%	42%~	24%	~	~	~	~	~	~	20%~	23%	13%*	50%*	19%	26%
POOR	14	303	1		4	2	6	1	9								13	6	8	6	7
	5%	6%	4%~	~	7%	4%	9%	8%~	6%	~	~	~	~	~	~	~	6%	3%*	10%*	5%	4%
#EXCELLENT + VERY GOOD	200	3991	20	47	38	35	49	6	114							35	160	169	31	87	109
+ GOOD (NET)	72%	75%	74%~	80%	69%	66%	74%	50%~	71%	~	~	~	~	~	~	80%~	71%	85%*	40%*	76%	69%
NOT ANSWERED	24	348	2				2		3								3	3		2	2
VALID CASES	278	5323	27	59	55	53	66	12	161							44	225	200	78	115	157
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

Q38 HAVE YOU HAD EITHER A FLU SHOT OR FLU SPRAY IN THE NOSE SINCE JULY 1, 2015?

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q38																					
#YES	80	1949	9	12	11	14	25	7	38							17	60	48	32	32	46
	29%	37%*	33%~	21%	20%	27%	38%	58%~	24%*	~	~	~	~	~	~	41%~	27%	24%*	42%*	29%	30%
NO	193	3261	18	44	43	38	41	5	121							24	162	148	45	80	109
	71%	63%*	67%~	79%	80%	73%	62%	42%~	76%*	~	~	~	~	~	~	59%~	73%	76%*	58%*	71%	70%
DON'T KNOW	8	134	1	3	1	1	2		4							3	5	7	1	4	4
NOT ANSWERED	21	327	1						1								1			1	
VALID CASES	273	5210	27	56	54	52	66	12	159							41	222	196	77	112	155
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q39																					
EVERY DAY	61	1034	4	6	19	14	16	1	37							2	57	36	25	26	33
	22%	20%	15%~	11%*	35%*	27%	25%	8%~	24%	~	~	~	~	~	~	5%~	26%*	18%*	33%*	23%	22%
SOME DAYS	25	461	3	7	5	5	4	1	17							2	23	17	8	14	11
	9%	9%	11%~	12%	9%	10%	6%	8%~	11%	~	~	~	~	~	~	5%~	11%*	9%	11%	12%	7%
NOT AT ALL	186	3773	20	44	30	33	45	10	102							40	139	143	43	74	109
	68%	72%	74%~	77%	56%*	63%	69%	83%~	65%	~	~	~	~	~	~	91%~	63%*	73%*	57%*	65%	71%
DON'T KNOW	6	42	2	1	1	1	1		5								6	3	2	2	4
NOT ANSWERED	24	360		1			2		3								3	4		1	2
VALID CASES	272	5269	27	57	54	52	65	12	156							44	219	196	76	114	153
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	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?

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q40																					
NEVER	26	477	3	5	12	2	4		14							2	24	16	10	15	11
	31%	30%	43%~	38%~	50%~	11%~	21%~	~	26%~	~	~	~	~	~	~	50%~	30%~	31%~	30%~	38%~	26%~
SOMETIMES	19	309	4	1	4	5	4	1	14							1	18	13	6	8	11
	22%	20%	57%~	8%~	17%~	26%~	21%~	50%~	26%~	~	~	~	~	~	~	25%~	23%~	25%~	18%~	20%~	26%~
USUALLY	16	270		5	2	5	3	1	11								16	11	5	3	12
	19%	17%	~	38%~	8%~	26%~	16%~	50%~	20%~	~	~	~	~	~	~	~	20%~	21%~	15%~	7%~	28%~
ALWAYS	24	513		2	6	7	8		15							1	21	12	12	14	9
	28%	33%	~	15%~	25%~	37%~	42%~	~	28%~	~	~	~	~	~	~	25%~	27%~	23%~	36%~	35%~	21%~
#ALWAYS + USUALLY (NET)	40	782		7	8	12	11	1	26							1	37	23	17	17	21
	47%	50%	~	54%~	33%~	63%~	58%~	50%~	48%~	~	~	~	~	~	~	25%~	47%~	44%~	52%~	43%~	49%~
TOP BOX SCORE	24	513		2	6	7	8		15							1	21	12	12	14	9
	28%	33%	~	15%~	25%~	37%~	42%~	~	28%~	~	~	~	~	~	~	25%~	27%~	23%~	36%~	35%~	21%~
NOT ANSWERED	1	25					1										1	1			1
VALID CASES	85	1569	7	13	24	19	19	2	54							4	79	52	33	40	43
NUMBER OF RESPONDENTS	86	1594	7	13	24	19	20	2	54							4	80	53	33	40	44
	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.

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q41																					
NEVER	32	796	4	6	13	5	3		18							2	29	19	13	12	19
	38%	51%*	57%~	46%~	54%~	26%~	16%~	~	33%~	~	~	~	~	~	~	50%~	37%~	37%~	39%~	30%~	44%~
SOMETIMES	26	318	2	2	6	6	9	1	19							1	25	16	10	12	14
	31%	20%*	29%~	15%~	25%~	32%~	47%~	50%~	35%~	~	~	~	~	~	~	25%~	32%~	31%~	30%~	30%~	33%~
USUALLY	11	179	1	2	3	2	3		8								11	8	3	5	5
	13%	11%	14%~	15%~	12%~	11%~	16%~	~	15%~	~	~	~	~	~	~	~	14%~	15%~	9%~	12%~	12%~
ALWAYS	16	266		3	2	6	4	1	9							1	14	9	7	11	5
	19%	17%	~	23%~	8%~	32%~	21%~	50%~	17%~	~	~	~	~	~	~	25%~	18%~	17%~	21%~	28%~	12%~
#ALWAYS + USUALLY (NET)	27	445	1	5	5	8	7	1	17							1	25	17	10	16	10
	32%	29%	14%~	38%~	21%~	42%~	37%~	50%~	31%~	~	~	~	~	~	~	25%~	32%~	33%~	30%~	40%~	23%~
TOP BOX SCORE	16	266		3	2	6	4	1	9							1	14	9	7	11	5
	19%	17%	~	23%~	8%~	32%~	21%~	50%~	17%~	~	~	~	~	~	~	25%~	18%~	17%~	21%~	28%~	12%~
NOT ANSWERED	1	34					1										1	1			1
VALID CASES	85	1560	7	13	24	19	19	2	54							4	79	52	33	40	43
NUMBER OF RESPONDENTS	86	1594	7	13	24	19	20	2	54							4	80	53	33	40	44
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q42																					
NEVER	38	888	4	7	15	4	8		23							3	35	25	13	17	21
	45%	57%*	57%~	54%~	63%~	21%~	42%~	~	43%~	~	~	~	~	~	~	75%~	44%~	48%~	39%~	43%~	49%~
SOMETIMES	23	301	3	4	4	6	4	1	17								22	12	11	9	13
	27%	19%	43%~	31%~	17%~	32%~	21%~	50%~	31%~	~	~	~	~	~	~	~	28%~	23%~	33%~	23%~	30%~
USUALLY	11	175		1	3	4	3		6								11	9	2	7	3
	13%	11%	~	8%~	12%~	21%~	16%~	~	11%~	~	~	~	~	~	~	~	14%~	17%~	6%~	17%~	7%~
ALWAYS	13	191		1	2	5	4	1	8							1	11	6	7	7	6
	15%	12%	~	8%~	8%~	26%~	21%~	50%~	15%~	~	~	~	~	~	~	25%~	14%~	12%~	21%~	17%~	14%~
#ALWAYS + USUALLY (NET)	24	367		2	5	9	7	1	14							1	22	15	9	14	9
	28%	24%	~	15%~	21%~	47%~	37%~	50%~	26%~	~	~	~	~	~	~	25%~	28%~	29%~	27%~	35%~	21%~
TOP BOX SCORE	13	191		1	2	5	4	1	8							1	11	6	7	7	6
	15%	12%	~	8%~	8%~	26%~	21%~	50%~	15%~	~	~	~	~	~	~	25%~	14%~	12%~	21%~	17%~	14%~
NOT ANSWERED	1	39					1										1	1			1
VALID CASES	85	1555	7	13	24	19	19	2	54							4	79	52	33	40	43
NUMBER OF RESPONDENTS	86	1594	7	13	24	19	20	2	54							4	80	53	33	40	44
	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							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q43																					
YES	51	1073		2	4	14	26	4	33							5	42	27	24	25	25
	18%	20%	~	3%*	7%*	26%	40%*	36%~	20%	~	~	~	~	~	~	12%~	19%	13%*	32%*	22%	16%
NO	226	4210	29	57	51	39	39	7	128							38	183	174	51	90	132
	82%	80%	100%~	97%*	93%*	74%	60%*	64%~	80%	~	~	~	~	~	~	88%~	81%	87%*	68%*	78%	84%
DON'T KNOW	3	36					2	1	3								3		3	2	1
NOT ANSWERED	22	352					1									1		2			1
VALID CASES	277	5283	29	59	55	53	65	11	161							43	225	201	75	115	157
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	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							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q44																					
YES	28	481		4	3	9	9	3	17								27	14	14	13	15
	11%	10%	~	8%	6%	18%~	15%	27%~	11%	~	~	~	~	~	~	~	13%*	7%*	21%*	12%	10%
NO	231	4399	27	49	50	40	52	8	132							42	182	178	53	94	133
	89%	90%	100%~	92%	94%	82%~	85%	73%~	89%	~	~	~	~	~		~100%~	87%*	93%*	79%*	88%	90%
DON'T KNOW	19	432	1	6	1	4	6	1	12							2	16	9	10	9	10
NOT ANSWERED	24	359	1		1		1		3								3	2	1	1	1
VALID CASES	259	4880	27	53	53	49	61	11	149							42	209	192	67	107	148
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	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?

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q45																					
YES	82	1760	1	11	7	19	36	7	52							11	68	55	27	35	46
	30%	33%	4%~	19%*	13%*	37%	55%*	58%~	33%	~	~	~	~	~	~	25%~	30%	28%	35%	30%	29%
NO	193	3528	26	48	48	33	30	5	107							33	155	143	50	80	110
	70%	67%	96%~	81%*	87%*	63%	45%*	42%~	67%	~	~	~	~	~	~	75%~	70%	72%	65%	70%	71%
NOT ANSWERED	27	383	2			1	2		5								5	5	1	2	3
VALID CASES	275	5288	27	59	55	52	66	12	159							44	223	198	77	115	156
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q46.1																					
YES	51	1193	1	2	7	20	16	5	27							6	42	28	23	20	30
	17%	21%	3%~	3%*	13%	38%*	24%	42%~	16%	~	~	~	~	~	~	14%~	18%	14%	29%*	17%	19%
NO	251	4478	28	57	48	33	52	7	137							38	186	175	55	97	129
	83%	79%	97%~	97%*	87%	62%*	76%	58%~	84%	~	~	~	~	~	~	86%~	82%	86%	71%*	83%	81%
VALID CASES	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q46.2																					
YES	80	1634	4	9	14	21	26	6	47							12	66	42	38	35	43
	26%	29%	14%~	15%*	25%	40%*	38%*	50%~	29%	~	~	~	~	~	~	27%~	29%	21%*	49%*	30%	27%
NO	222	4037	25	50	41	32	42	6	117							32	162	161	40	82	116
	74%	71%	86%~	85%*	75%	60%*	62%*	50%~	71%	~	~	~	~	~	~	73%~	71%	79%*	51%*	70%	73%
VALID CASES	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	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							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q46.3																					
YES	54	883	3	8	13	9	15	6	35							1	50	28	26	23	31
	18%	16%	10%~	14%	24%	17%	22%	50%~	21%	~	~	~	~	~	~	2%~	22%*	14%*	33%*	20%	19%
NO	248	4788	26	51	42	44	53	6	129							43	178	175	52	94	128
	82%	84%	90%~	86%	76%	83%	78%	50%~	79%	~	~	~	~	~	~	98%~	78%*	86%*	67%*	80%	81%
VALID CASES	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q47.1																					
YES	9	231				3	4	2	5								9	3	6	5	4
	3%	4%	~	~	~	6%	6%	17%~	3%	~	~	~	~	~	~	~	4%*	1%	8%*	4%	3%
NO	293	5440	29	59	55	50	64	10	159							44	219	200	72	112	155
	97%	96%	100%~	100%~	100%~	94%	94%	83%~	97%	~	~	~	~	~	~	~100%~	96%~	99%	92%*	96%	97%
VALID CASES	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	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							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q47.2																					
YES	8	220		1		2	3	2	3								8	2	6	3	5
	3%	4%	~	2%	~	4%	4%	17%~	2%	~	~	~	~	~	~	~	4%~	1%*	8%*	3%	3%
NO	294	5451	29	58	55	51	65	10	161							44	220	201	72	114	154
	97%	96%	100%~	98%	100%~	96%	96%	83%~	98%	~	~	~	~	~	~	~100%~	96%*	99%*	92%*	97%	97%
VALID CASES	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q47.3																					
YES	11	243				4	5	2	5							1	10	3	8	6	5
	4%	4%	~	~	~	8%	7%	17%~	3%	~	~	~	~	~	~	2%~	4%	1%*	10%*	5%	3%
NO	291	5428	29	59	55	49	63	10	159							43	218	200	70	111	154
	96%	96%	100%~	100%~	100%~	92%	93%	83%~	97%	~	~	~	~	~	~	98%~	96%	99%*	90%*	95%	97%
VALID CASES	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q47.4																					
YES	46	955	2	4	9	10	16	5	24							4	41	18	28	23	23
	15%	17%	7%~	7%*	16%	19%	24%	42%~	15%	~	~	~	~	~	~	9%~	18%*	9%*	36%*	20%	14%
NO	256	4716	27	55	46	43	52	7	140							40	187	185	50	94	136
	85%	83%	93%~	93%*	84%	81%	76%	58%~	85%	~	~	~	~	~	~	91%~	82%*	91%*	64%*	80%	86%
VALID CASES	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	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							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q48																					
YES	91	1695	3	13	17	22	30	5	58							8	81	52	39	35	56
	33%	32%	10%~	22%*	31%	42%	45%*	42%~	36%	~	~	~	~	~	~	19%~	36%~	27%*	51%*	30%	36%
NO	182	3585	26	45	37	30	37	7	103							35	143	144	37	81	99
	67%	68%	90%~	78%*	69%	58%	55%*	58%~	64%	~	~	~	~	~	~	81%~	64%~	73%*	49%*	70%	64%
NOT ANSWERED	29	392		1	1	1	1		3							1	4	7	2	1	4
VALID CASES	273	5279	29	58	54	52	67	12	161							43	224	196	76	116	155
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q49																					
YES	73	1392	1	9	17	16	24	5	48							6	67	39	34	28	45
	82%	87%	33%~	69%~	100%~	76%~	83%~	100%~	86%~	~	~	~	~	~	~	75%~	85%~	76%~	89%~	82%~	82%~
NO	16	208	2	4		5	5		8							2	12	12	4	6	10
	18%	13%	67%~	31%~	~	24%~	17%~	~	14%~	~	~	~	~	~	~	25%~	15%~	24%~	11%~	18%~	18%~
NOT ANSWERED	2	69				1	1		2								2	1	1	1	1
VALID CASES	89	1600	3	13	17	21	29	5	56							8	79	51	38	34	55
NUMBER OF RESPONDENTS	91	1669	3	13	17	22	30	5	58							8	81	52	39	35	56
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q48 = YES]

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q50																					
YES	160	3271	5	29	31	40	45	9	104							15	142	101	59	68	91
	58%	62%	17%~	50%	56%	75%*	69%*	75%~	65%*	~	~	~	~	~	~	35%~	63%~	51%*	78%*	59%	58%
NO	114	2030	24	29	24	13	20	3	57							28	83	96	17	47	66
	42%	38%	83%~	50%	44%	25%*	31%*	25%~	35%*	~	~	~	~	~	~	65%~	37%~	49%*	22%*	41%	42%
NOT ANSWERED	28	369		1			3		3							1	3	6	2	2	2
VALID CASES	274	5302	29	58	55	53	65	12	161							43	225	197	76	115	157
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q51																					
YES	147	2939	4	26	29	37	43	8	97							12	133	91	56	61	85
	95%	94%	80%~	90%~	94%~	97%~	100%~	100%~	95%	~	~	~	~	~	~	86%~	96%~	93%	98%	95%	94%
NO	8	176	1	3	2	1			5							2	6	7	1	3	5
	5%	6%	20%~	10%~	6%~	3%~	~	~	5%	~	~	~	~	~	~	14%~	4%~	7%	2%	5%	6%
NOT ANSWERED	5	111				2	2	1	2							1	3	3	2	4	1
VALID CASES	155	3115	5	29	31	38	43	8	102							14	139	98	57	64	90
NUMBER OF RESPONDENTS	160	3226	5	29	31	40	45	9	104							15	142	101	59	68	91
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q50 = YES]

NQ52 WHAT IS YOUR AGE?

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
NQ52																					
18 TO 24	29	544	29						9							9	20	25	3	13	16
	10%	10%	100%~	~	~	~	~	~	5%*	~	~	~	~	~	~	20%~	9%	12%*	4%*	11%	10%
25 TO 34	66	1042		59					32							11	48	49	11	24	35
	22%	18%		~100%~	~	~	~	~	20%	~	~	~	~	~	~	25%~	21%	24%	14%*	21%	22%
35 TO 44	61	924			55				28							11	44	36	20	25	30
	20%	16%	~		~100%~	~	~	~	17%	~	~	~	~	~	~	25%~	19%	18%	26%	21%	19%
45 TO 54	61	1138				53			40							5	48	39	17	26	29
	20%	20%	~	~		~100%~	~	~	24%*	~	~	~	~	~	~	11%~	21%	19%	22%	22%	18%
55 TO 64	71	1472					68		48							7	57	49	19	25	41
	24%	26%	~	~	~		~100%~	~	29%*	~	~	~	~	~	~	16%~	25%	24%	24%	21%	26%
65 TO 74	11	326						9	4							1	8	4	6	4	5
	4%	6%	~	~	~	~	~	75%~	2%	~	~	~	~	~	~	2%~	4%	2%	8%	3%	3%
75 OR OLDER	3	225						3	3								3	1	2		3
	1%	4%*	~	~	~	~	~	25%~	2%~	~	~	~	~	~	~	~	1%	0.5%	3%	~	2%~
VALID CASES	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	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							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
NQ53																					
MALE	130	2300	13	24	25	26	26	4	66							17	98	81	37	117	
	43%	41%	45%~	41%	45%	49%	38%	33%~	40%	~	~	~	~	~	~	39%~	43%	40%	47%	100%~	~
FEMALE	172	3371	16	35	30	27	42	8	98							27	130	122	41		159
	57%	59%	55%~	59%	55%	51%	62%	67%~	60%	~	~	~	~	~	~	61%~	57%	60%	53%	~	100%~
VALID CASES	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q54																					
8TH GRADE OR LESS	15	328		2	5	2	4	2	3							9	6	7	8	8	7
	5%	6%	~	3%	9%	4%	6%	17%~	2%*	~	~	~	~	~	~	21%~	3%~	4%	11%	7%	4%
SOME HIGH SCHOOL BUT	34	614	4	7	4	11	8		19							7	26	16	18	20	14
DID NOT GRADUATE	12%	12%	14%~	12%	7%	21%	12%	~	12%	~	~	~	~	~	~	16%~	11%~	8%*	24%*	17%*	9%
HIGH SCHOOL GRADUATE	91	1659	18	17	25	7	20	3	54							16	74	75	15	41	50
OR GED	33%	31%	62%~	29%	45%*	13%*	30%	25%~	33%	~	~	~	~	~	~	37%~	33%~	38%*	20%*	35%	32%
SOME COLLEGE OR 2-YEAR	100	1998	7	24	18	23	24	4	63							9	89	73	27	33	66
DEGREE	36%	38%	24%~	41%	33%	43%	36%	33%~	39%	~	~	~	~	~	~	21%~	39%~	37%	36%	28%*	42%*
4-YEAR COLLEGE GRADUATE	27	437		8	3	8	7	1	18							2	23	21	6	11	15
	10%	8%	~	14%	5%	15%	10%	8%~	11%	~	~	~	~	~	~	5%~	10%~	11%	8%	9%	10%
MORE THAN 4-YEAR	9	242		1		2	4	2	6								9	7	2	4	5
COLLEGE DEGREE	3%	5%	~	2%	~	4%	6%	17%~	4%	~	~	~	~	~	~	~	4%~	4%	3%	3%	3%
NOT ANSWERED	26	392					1		1							1	1	4	2		2
VALID CASES	276	5279	29	59	55	53	67	12	163							43	227	199	76	117	157
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

Q55 ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q55																					
YES HISPANIC OR LATINO	44	668	9	11	11	5	7	1								44		34	10	17	27
	16%	13%	31%~	19%	20%	10%	11%	8%~	~	~	~	~	~	~	~	~100%~	~	17%	13%	15%	17%
NO NOT HISPANIC OR LATINO	228	4589	20	48	44	46	57	11	162								228	162	65	98	129
	84%	87%	69%~	81%	80%	90%	89%	92%~	100%~	~	~	~	~	~	~	~	~100%~	83%	87%	85%	83%
NOT ANSWERED	30	413				2	4		2									7	3	2	3
VALID CASES	272	5258	29	59	55	51	64	12	162							44	228	196	75	115	156
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	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							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q56.1																					
YES	183	3500	12	40	32	40	50	7	164							11	170	132	50	73	109
	61%	62%	41%~	68%	58%	75%*	74%*	58%~	100%~	~	~	~	~	~	~	25%~	75%*	65%*	64%	62%	69%*
NO	119	2171	17	19	23	13	18	5								33	58	71	28	44	50
	39%	38%	59%~	32%	42%	25%*	26%*	42%~	~	~	~	~	~	~	~	75%~	25%*	35%*	36%	38%	31%*
VALID CASES	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	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							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q56.2																					
YES	1	117	1														1	1		1	
	0.3%	2%*	3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~0.4%	~0.5%		~0.9%~	~
NO	301	5554	28	59	55	53	68	12	164							44	227	202	78	116	159
	100%	98%*	97%~	100%~	100%~	100%~	100%~	100%~	100%~	~	~	~	~	~	~	~100%~	100%	100%	100%~	99%	100%~
VALID CASES	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

Q56.3 WHAT IS YOUR RACE? RESPONSE: ASIAN

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q56.3																					
YES	4	212			1	1	1	1									3	2	2	1	3
	1%	4%*	~	~	2%	2%	1%	8%~	~	~	~	~	~	~	~	~	1%	1%	3%	0.9%	2%
NO	298	5459	29	59	54	52	67	11	164							44	225	201	76	116	156
	99%	96%*	100%~	100%~	98%	98%	99%	92%~	100%~	~	~	~	~	~	~	~100%~	99%	99%	97%	99%	98%
VALID CASES	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	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							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q56.4																					
YES	4	34			2	1	1									1	3	1	3	3	1
	1%	0.6%	~	~	4%	2%	1%	~	~	~	~	~	~	~	~	2%~	1%	0.5%	4%	3%	0.6%
NO	298	5637	29	59	53	52	67	12	164							43	225	202	75	114	158
	99%	99%	100%~	100%~	96%	98%	99%	100%~	100%~	~	~	~	~	~	~	98%~	99%	100%	96%	97%	99%
VALID CASES	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q56.5																					
YES	8	211	1	3	1		3										8	6	2	5	3
	3%	4%	3%~	5%	2%	~	4%	~	~	~	~	~	~	~	~	~	4%~	3%	3%	4%	2%
NO	294	5460	28	56	54	53	65	12	164							44	220	197	76	112	156
	97%	96%	97%~	95%	98%	100%~	96%	100%~	100%~	~	~	~	~	~	~	~100%~	96%*	97%	97%	96%	98%
VALID CASES	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

Q56.6 WHAT IS YOUR RACE? RESPONSE: OTHER

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q56.6																					
YES	17	307	2	4	2	3	6									7	10	11	6	8	9
	6%	5%	7%~	7%	4%	6%	9%	~	~	~	~	~	~	~	~	16%~	4%	5%	8%	7%	6%
NO	285	5364	27	55	53	50	62	12	164							37	218	192	72	109	150
	94%	95%	93%~	93%	96%	94%	91%	100%~	100%~	~	~	~	~	~	~	84%~	96%	95%	92%	93%	94%
VALID CASES	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
NUMBER OF RESPONDENTS	302	5671	29	59	55	53	68	12	164							44	228	203	78	117	159
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

Q57 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q57																					
YES	20	630	1	6	3	2	6	2	13							5	15	12	8	10	10
	9%	15%*	6%~	14%~	8%~	4%~	10%	22%~	8%~	~	~	~	~	~	~	19%~	8%~	8%	14%	11%	8%
NO	191	3507	15	36	33	45	53	7	149							21	165	142	48	79	111
	91%	85%*	94%~	86%~	92%~	96%~	90%	78%~	92%~	~	~	~	~	~	~	81%~	92%~	92%	86%	89%	92%
NOT ANSWERED	6	39	1			1	1		2								2	3	1	2	
VALID CASES	211	4137	16	42	36	47	59	9	162							26	180	154	56	89	121
NUMBER OF RESPONDENTS	217	4176	17	42	36	48	60	9	164							26	182	157	57	91	121
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q58.1																					
YES	10	257		2	1	1	4	2	6							3	7	4	6	3	7
	50%	48%~	~	33%~	33%~	50%~	67%~	100%~	46%~	~	~	~	~	~	~	60%~	47%~	33%~	75%~	30%~	70%~
NO	10	281	1	4	2	1	2		7							2	8	8	2	7	3
	50%	52%~	100%~	67%~	67%~	50%~	33%~	~	54%~	~	~	~	~	~	~	40%~	53%~	67%~	25%~	70%~	30%~
VALID CASES	20	538	1	6	3	2	6	2	13							5	15	12	8	10	10
NUMBER OF RESPONDENTS	20	538	1	6	3	2	6	2	13							5	15	12	8	10	10
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q58.2																					
YES	6	220		1		1	3	1	4							2	4	2	4	5	1
	30%	41%~	~	17%~	~	50%~	50%~	50%~	31%~	~	~	~	~	~	~	40%~	27%~	17%~	50%~	50%~	10%~
NO	14	318	1	5	3	1	3	1	9							3	11	10	4	5	9
	70%	59%~	100%~	83%~	100%~	50%~	50%~	50%~	69%~	~	~	~	~	~	~	60%~	73%~	83%~	50%~	50%~	90%~
VALID CASES	20	538	1	6	3	2	6	2	13							5	15	12	8	10	10
NUMBER OF RESPONDENTS	20	538	1	6	3	2	6	2	13							5	15	12	8	10	10
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q58.3																					
YES	6	203	1	4			1		5							1	5	5	1	3	3
	30%	38%~	100%~	67%~	~	~	17%~	~	38%~	~	~	~	~	~	~	20%~	33%~	42%~	12%~	30%~	30%~
NO	14	335		2	3	2	5	2	8							4	10	7	7	7	7
	70%	62%~	~	33%~	100%~	100%~	83%~	100%~	62%~	~	~	~	~	~	~	80%~	67%~	58%~	88%~	70%~	70%~
VALID CASES	20	538	1	6	3	2	6	2	13							5	15	12	8	10	10
NUMBER OF RESPONDENTS	20	538	1	6	3	2	6	2	13							5	15	12	8	10	10
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q58.4																					
YES	2	79			1		1									1	1	1	1	2	
	10%	15%~	~	~	33%~	~	17%~	~	~	~	~	~	~	~	~	20%~	7%~	8%~	12%~	20%~	~
NO	18	459	1	6	2	2	5	2	13							4	14	11	7	8	10
	90%	85%~	100%~	100%~	67%~	100%~	83%~	100%~	100%~	~	~	~	~	~	~	80%~	93%~	92%~	88%~	80%~	100%~
VALID CASES	20	538	1	6	3	2	6	2	13							5	15	12	8	10	10
NUMBER OF RESPONDENTS	20	538	1	6	3	2	6	2	13							5	15	12	8	10	10
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q58.5																					
YES	1	32			1				1								1	1		1	
	5%	6%~	~	~	33%~	~	~	~	8%~	~	~	~	~	~	~	~	7%~	8%~	~	10%~	~
NO	19	506	1	6	2	2	6	2	12							5	14	11	8	9	10
	95%	94%~	100%~	100%~	67%~	100%~	100%~	100%~	92%~	~	~	~	~	~	~	~100%~	93%~	92%~	100%~	90%~	100%~
VALID CASES	20	538	1	6	3	2	6	2	13							5	15	12	8	10	10
NUMBER OF RESPONDENTS	20	538	1	6	3	2	6	2	13							5	15	12	8	10	10
	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							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
NQ13																					
0-6	42	761	5	12	6	7	9	1	23							6	33	18	23	15	26
	20%	20%	25%~	30%~	17%~	17%~	17%	10%~	20%	~	~	~	~	~	~	17%~	20%~	12%*	40%*	19%	21%
7-8	70	1368	7	14	14	10	19	1	35							13	51	53	14	26	39
	33%	36%	35%~	35%~	40%~	24%~	36%	10%~	30%	~	~	~	~	~	~	36%~	32%~	37%	24%	33%	32%
9-10	97	1705	8	14	15	25	25	8	57							17	77	74	21	38	56
	46%	44%	40%~	35%~	43%~	60%~	47%	80%~	50%	~	~	~	~	~	~	47%~	48%~	51%*	36%	48%	46%
VALID CASES	209	3835	20	40	35	42	53	10	115							36	161	145	58	79	121
NUMBER OF RESPONDENTS	209	3835	20	40	35	42	53	10	115							36	161	145	58	79	121
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%
MEAN	2.26	2.25	2.15	2.05	2.26	2.43	2.30	2.70	2.30							2.31	2.27	2.39	1.97	2.29	2.25
p stat_(*=Sig @ p<=.05)		.749	~	~	~	~	.675	~	.504	~	~	~	~	~	~	~	~	.001*	.001*	.686	.739

[ASKED IF Q7 >= 1 TIME]

NQ23 RATING OF PERSONAL DOCTOR

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
NQ23																					
0-6	29	642	2	7	6	5	7		11							5	19	13	15	9	17
	15%	16%	14%~	17%~	18%~	12%~	16%~	~	11%	~	~	~	~	~	~	19%~	12%~	10%*	27%*	13%	15%
7-8	52	1053	4	16	9	7	10	3	26							7	42	35	15	16	34
	27%	26%	29%~	40%~	26%~	17%~	22%~	30%~	25%	~	~	~	~	~	~	26%~	27%~	26%	27%	24%	29%
9-10	115	2378	8	17	19	29	28	7	66							15	93	86	25	43	65
	59%	58%	57%~	43%~	56%~	71%~	62%~	70%~	64%	~	~	~	~	~	~	56%~	60%~	64%*	45%*	63%	56%
VALID CASES	196	4074	14	40	34	41	45	10	103							27	154	134	55	68	116
NUMBER OF RESPONDENTS	196	4074	14	40	34	41	45	10	103							27	154	134	55	68	116
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%
MEAN	2.44	2.43	2.43	2.25	2.38	2.59	2.47	2.70	2.53							2.37	2.48	2.54	2.18	2.50	2.41
p stat_(*=Sig @ p<=.05)		.815	~	~	~	~	~	~	.060	~	~	~	~	~	~	~	~	.007*	.006*	.396	.573

[ASKED IF Q15 = YES]

NQ27 RATING OF SPECIALIST SEEN MOST OFTEN

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
NQ27																					
0-6	14	249	1	2	2	2	5		6							2	9	7	6	5	7
	14%	13%	14%~	14%~	18%~	9%~	14%~	~	10%~	~	~	~	~	~	~	17%~	11%~	11%~	18%~	12%~	13%~
7-8	29	475	1	6		5	14	2	15							3	25	16	12	12	16
	29%	25%	14%~	43%~	~	23%~	40%~	29%~	26%~	~	~	~	~	~	~	25%~	31%~	25%~	35%~	29%~	29%~
9-10	58	1151	5	6	9	15	16	5	37							7	47	41	16	24	32
	57%	61%	71%~	43%~	82%~	68%~	46%~	71%~	64%~	~	~	~	~	~	~	58%~	58%~	64%~	47%~	59%~	58%~
VALID CASES	101	1875	7	14	11	22	35	7	58							12	81	64	34	41	55
NUMBER OF RESPONDENTS	101	1875	7	14	11	22	35	7	58							12	81	64	34	41	55
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%
MEAN	2.44	2.48	2.57	2.29	2.64	2.59	2.31	2.71	2.53							2.42	2.47	2.53	2.29	2.46	2.45
p stat_(*=Sig @ p<=.05)		.532	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

NQ35 RATING OF HEALTH PLAN

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
NQ35																					
0-6	71	1160	5	18	12	16	16		43							7	57	42	27	25	41
	27%	23%	19%~	32%	24%	35%~	27%	~	31%	~	~	~	~	~	~	17%~	28%	23%*	39%*	23%	29%
7-8	81	1699	12	19	17	11	16	2	41							8	69	53	23	32	44
	31%	34%	44%~	33%	33%	24%~	27%	22%~	29%	~	~	~	~	~	~	19%~	34%*	29%	33%	30%	31%
9-10	111	2187	10	20	22	19	27	7	56							27	77	87	20	51	55
	42%	43%	37%~	35%	43%	41%~	46%	78%~	40%	~	~	~	~	~	~	64%~	38%*	48%*	29%*	47%	39%
VALID CASES	263	5046	27	57	51	46	59	9	140							42	203	182	70	108	140
NUMBER OF RESPONDENTS	263	5046	27	57	51	46	59	9	140							42	203	182	70	108	140
	100%	100%	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%
MEAN	2.15	2.20	2.19	2.04	2.20	2.07	2.19	2.78	2.09							2.48	2.10	2.25	1.90	2.24	2.10
p stat_(*=Sig @ p<=.05)		.295		~.225	.671		~.716		~.213	~	~	~	~	~	~		~.052	.005*	.003*	.143	.274

GETTING NEEDED CARE

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
NPRBSEE4 NQ25	2.34	2.22	3.00	2.19	2.58	2.35	2.11	2.67	2.34							2.15	2.39	2.34	2.35	2.29	2.38
p stat_(*=Sig @ p<=.05)		.109	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~.590
NCARNES4 NQ14	2.28	2.26	2.30	2.13	2.29	2.41	2.19	2.70	2.28							2.19	2.31	2.36	2.04	2.37	2.22
p stat_(*=Sig @ p<=.05)		.800	~	~	~	~	.366	~	.913	~	~	~	~	~	~	~	~	.019*	.005*	.143	.195
COMPOSITE	2.31	2.24	2.65	2.16	2.43	2.38	2.15	2.68	2.31	x	x	x	x	x	x	2.17	2.35	2.35	2.19	2.33	2.30
p stat_(*=Sig @ p<=.05)		.590	~	~	~	~	.494	~	.979	~	~	~	~	~	~	~	~	.650	.600	.902	.925

GETTING CARE QUICKLY

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
NCARSN4 NQ4	2.46	2.42	2.67	2.21	2.22	2.62	2.62	2.80	2.55							2.12	2.53	2.48	2.45	2.71	2.33
p stat_(*=Sig @ p<=.05)		.631	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NAPGET4 NQ6	2.24	2.28	1.94	2.34	2.13	2.19	2.32	2.70	2.24							2.00	2.31	2.25	2.23	2.38	2.15
p stat_(*=Sig @ p<=.05)		.497	~	~	~	~	~	~	.970	~	~	~	~	~	~	~	~	.692	~	.085	.095
COMPOSITE	2.35	2.35	2.30	2.28	2.18	2.41	2.47	2.75	2.39	x	x	x	x	x	x	2.06	2.42	2.37	2.34	2.54	2.24
p stat_(*=Sig @ p<=.05)		.982	~	~	~	~	~	~	.726	~	~	~	~	~	~	~	~	.843	.973	.318	.362

HOW WELL DOCTORS COMMUNICATE

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
NDREXPL4 NQ17	2.58	2.61	2.40	2.50	2.28	2.81	2.62	2.89	2.61							2.35	2.65	2.67	2.38	2.63	2.56
p stat_(*=Sig @ p<=.05)		.537	~	~	~	~	~	~	.469	~	~	~	~	~	~	~	~	.040*	~	.523	.771
NDRLSTN4 NQ18	2.57	2.58	2.50	2.52	2.40	2.71	2.57	2.78	2.60							2.48	2.61	2.63	2.45	2.68	2.52
p stat_(*=Sig @ p<=.05)		.759	~	~	~	~	~	~	.548	~	~	~	~	~	~	~	~	.129	~	.120	.257
NDRESPU4 NQ19	2.69	2.65	2.50	2.72	2.52	2.83	2.66	2.89	2.67							2.73	2.70	2.75	2.57	2.77	2.65
p stat_(*=Sig @ p<=.05)		.436	~	~	~	~	~	~	.527	~	~	~	~	~	~	~	~	.146	~	.249	.281
NDRTMEN4 NQ20	2.52	2.50	2.50	2.59	2.48	2.67	2.38	2.67	2.49							2.35	2.56	2.58	2.38	2.64	2.45
p stat_(*=Sig @ p<=.05)		.804	~	~	~	~	~	~	.599	~	~	~	~	~	~	~	~	.082	~	.079	.162
COMPOSITE	2.59	2.59	2.47	2.58	2.42	2.75	2.56	2.81	2.59	x	x	x	x	x	x	2.48	2.63	2.66	2.44	2.68	2.55
p stat_(*=Sig @ p<=.05)		1.00	~	~	~	~	~	~	.986	~	~	~	~	~	~	~	~	.644	~	.755	.805

CUSTOMER SERVICE

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
NPBCLCS4 NQ31	2.20	2.22	2.40	1.86	2.06	2.73	2.37	1.67	2.21							1.93	2.29	2.31	1.91	2.43	2.03
p stat_(*=Sig @ p<=.05)		.801	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ32	2.68	2.61	2.60	2.50	2.53	2.91	2.81	2.33	2.76							2.57	2.69	2.73	2.52	2.79	2.56
p stat_(*=Sig @ p<=.05)		.381	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.44	2.42	2.50	2.18	2.29	2.82	2.59	2.00	2.48	x	x	x	x	x	x	2.25	2.49	2.52	2.22	2.61	2.29
p stat_(*=Sig @ p<=.05)		.934	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
NNRXWHY NQ10	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
p stat_(*=Sig @ p<=.05)		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NNRXWYNT NQ11	2.48	2.46	3.00	2.40	2.30	2.65	2.43	3.00	2.46							2.20	2.49	2.47	2.49	2.54	2.44
p stat_(*=Sig @ p<=.05)		.813	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NRXBST NQ12	2.47	2.52	3.00	2.60	2.30	2.48	2.39	2.60	2.51							2.56	2.47	2.55	2.32	2.35	2.52
p stat_(*=Sig @ p<=.05)		.561	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.48	2.49	3.00	2.50	2.30	2.57	2.41	2.80	2.49	x	x	x	x	x	x	2.38	2.48	2.51	2.40	2.45	2.48
p stat_(*=Sig @ p<=.05)		.931	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

			AGE						RACE							ETHNIC— ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI ##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE
PRBSEE4 Q25	83%	75%	100%	81%	92%	87%	72%	100%	87%							77%	86%	84%	84%	78%	88%
CARNES4 Q14	81%	80%	70%	75%	83%	90%	79%	100%	83%							81%	83%	85%	72%	88%	77%
AVERAGE	82.25	77.53	85.00	78.12	87.26	88.60	75.53	100.0	85.42	x	x	x	x	x	x	78.74	84.61	84.27	77.86	83.12	82.30

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

			AGE						RACE							ETHNIC— ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI ##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE
CARSN4 Q4	88%	84%	100%	74%	83%	90%	100%	100%	95%							71%	92%	89%	87%	97%	84%
APGET4 Q6	74%	77%	65%	76%	73%	75%	75%	90%	74%							67%	77%	73%	79%	77%	73%
AVERAGE	81.06	80.73	82.35	75.00	78.33	82.33	87.50	95.00	84.50	x	x	x	x	x	x	68.63	84.39	81.21	83.13	87.09	78.24

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

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
DREXPL4 Q17	87%	91%	80%	86%	76%	94%	86%	100%	89%							74%	90%	92%	77%	87%	86%
DRLSTN4 Q18	87%	90%	80%	93%	84%	94%	81%	100%	90%							83%	90%	90%	83%	93%	85%
DRESPU4 Q19	92%	91%	80%	97%	88%	97%	88%	100%	92%							91%	93%	94%	87%	93%	92%
DRTMEN4 Q20	87%	87%	80%	90%	92%	94%	83%	89%	89%							78%	90%	88%	88%	93%	86%
AVERAGE	88.4	89.8	80.0	91.3	85.0	95.1	84.5	97.2	89.7	x	x	x	x	x	x	81.4	90.4	90.9	83.6	91.5	87.2

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

			AGE						RACE							ETHNIC— ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI ##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE
PBCLCS4 Q31	72%	76%	80%	50%	76%	100%	75%	33%	72%							57%	76%	73%	65%	86%	62%
CSRESP Q32	96%	91%	100%	100%	88%	100%	100%	67%	97%							100%	94%	98%	91%	96%	95%
AVERAGE	83.80	83.64	90.00	75.00	82.35	100.0	87.50	50.00	84.48	x	x	x	x	x	x	78.57	85.29	85.56	78.26	91.07	78.21

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
NRXWHY Q10	96%	93%	100%	100%	95%	96%	94%	100%	96%							90%	97%	97%	95%	91%	99%
NRXWYNT Q11	74%	73%	100%	70%	65%	83%	71%	100%	73%							60%	75%	74%	74%	77%	72%
RXBST Q12	74%	76%	100%	80%	65%	74%	70%	80%	76%							78%	73%	78%	66%	68%	76%
AVERAGE	81.3	80.6	100	83.3	75.0	84.1	78.5	93.3	81.4	x	x	x	x	x	x	75.9	81.7	82.7	78.3	78.7	82.3

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q1																			
YES	307	5578	42	84	102	79	71						15	146	137	273	14	242	65
	100%	100%	100%	100%	100%	100%	100%	~	~	~	~	~	100%	100%	100%	100%	100%	100%	100%
NOT ANSWERED	1	60		1										1		1		1	
VALID CASES	307	5578	42	84	102	79	71						15	146	137	273	14	242	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q3																			
YES	97	1643	16	23	32	26	22						10	41	51	83	11	67	30
	32%	30%	39%~	28%	32%	33%	31%	~	~	~	~	~	67%~	28%	37%	30%~	79%~	28%*	46%*
NO	205	3803	25	59	69	52	49						5	105	86	190	3	170	35
	68%	70%	61%~	72%	68%	67%	69%	~	~	~	~	~	33%~	72%	63%	70%~	21%~	72%*	54%*
NOT ANSWERED	6	191	1	3	1	1								1		1		6	
VALID CASES	302	5447	41	82	101	78	71						15	146	137	273	14	237	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q4																			
NEVER		21																	
		1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	8	109		5	2	1							1	6	2	7	1	6	2
	9%	7%	~	23%~	7%~	4%~	~	~	~	~	~	~	10%~	16%~	4%~	9%~	9%~	10%~	7%~
USUALLY	18	253	3	2	6	7	5						1	9	8	15	3	13	5
	20%	16%	20%~	9%~	20%~	29%~	25%~	~	~	~	~	~	10%~	24%~	17%~	19%~	27%~	21%~	18%~
ALWAYS	65	1212	12	15	22	16	15						8	23	38	55	7	44	21
	71%	76%	80%~	68%~	73%~	67%~	75%~	~	~	~	~	~	80%~	61%~	79%~	71%~	64%~	70%~	75%~
#ALWAYS + USUALLY (NET)	83	1464	15	17	28	23	20						9	32	46	70	10	57	26
	91%	92%	100%~	77%~	93%~	96%~	100%~	~	~	~	~	~	90%~	84%~	96%~	91%~	91%~	90%~	93%~
TOP BOX SCORE	65	1212	12	15	22	16	15						8	23	38	55	7	44	21
	71%	76%	80%~	68%~	73%~	67%~	75%~	~	~	~	~	~	80%~	61%~	79%~	71%~	64%~	70%~	75%~
NOT ANSWERED	6	102	1	1	2	2	2							3	3	6		4	2
VALID CASES	91	1594	15	22	30	24	20						10	38	48	77	11	63	28
NUMBER OF RESPONDENTS	97	1696	16	23	32	26	22						10	41	51	83	11	67	30
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q5																			
YES	196	3547	30	56	58	52	49						14	91	90	174	11	143	53
	66%	65%	75%~	70%	58%*	67%	70%	~	~	~	~		~100%~	63%	67%	64%~	79%~	61%*	82%*
NO	102	1877	10	24	42	26	21							54	45	96	3	90	12
	34%	35%	25%~	30%	42%*	33%	30%	~	~	~	~	~	~	37%	33%	36%~	21%~	39%*	18%*
NOT ANSWERED	10	214	2	5	2	1	1						1	2	2	4		10	
VALID CASES	298	5424	40	80	100	78	70						14	145	135	270	14	233	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q6																			
NEVER	4	50		2	2		1						1	2	2	4		2	2
	2%	2%	~	4%	4%	~	2%~	~	~	~	~	~	7%~	2%	2%	2%~	~	1%~	4%~
SOMETIMES	23	468	2	12	3	6	3						2	13	10	22	1	19	4
	13%	14%	7%~	23%*	6%*	13%~	7%~	~	~	~	~	~	14%~	15%	12%	14%~	10%~	14%~	9%~
USUALLY	59	881	9	16	20	14	16						5	27	27	54	2	44	15
	32%	27%	30%~	30%	38%	30%~	36%~	~	~	~	~	~	36%~	32%	32%	33%~	20%~	32%~	32%~
ALWAYS	97	1910	19	23	28	27	25						6	42	45	82	7	71	26
	53%	58%	63%~	43%	53%	57%~	56%~	~	~	~	~	~	43%~	50%	54%	51%~	70%~	52%~	55%~
#ALWAYS + USUALLY (NET)	156	2792	28	39	48	41	41						11	69	72	136	9	115	41
	85%	84%	93%~	74%*	91%	87%~	91%~	~	~	~	~	~	79%~	82%	86%	84%~	90%~	85%~	87%~
TOP BOX SCORE	97	1910	19	23	28	27	25						6	42	45	82	7	71	26
	53%	58%	63%~	43%	53%	57%~	56%~	~	~	~	~	~	43%~	50%	54%	51%~	70%~	52%~	55%~
NOT ANSWERED	13	232		3	5	5	4							7	6	12	1	7	6
VALID CASES	183	3310	30	53	53	47	45						14	84	84	162	10	136	47
NUMBER OF RESPONDENTS	196	3542	30	56	58	52	49						14	91	90	174	11	143	53
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q5 = YES]

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q7																			
NONE	87	1626	11	22	35	19	20						2	45	40	82	3	76	11
	30%	30%	28%~	28%	36%	24%	28%	~	~	~	~	~	13%~	32%	29%	31%~	21%~	33%*	17%*
1 TIME	94	1614	13	27	25	29	20						6	47	40	84	4	76	18
	32%	30%	33%~	34%	26%	37%	28%	~	~	~	~	~	40%~	33%	29%	31%~	29%~	33%	28%
2	49	1048	8	12	17	12	10						1	27	17	44		43	6
	17%	20%	20%~	15%	18%	15%	14%	~	~	~	~	~	7%~	19%	13%	16%~	~	19%*	9%*
3	30	512	1	14	7	8	9						3	12	16	28	2	20	10
	10%	10%	3%~	18%*	7%	10%	13%	~	~	~	~	~	20%~	9%	12%	10%~	14%~	9%	15%
4	14	232	4	1	5	4	8						1	3	10	13	1	7	7
	5%	4%	10%~	1%*	5%	5%	11%*	~	~	~	~	~	7%~	2%*	7%	5%~	7%~	3%	11%
5 TO 9	16	256	3	3	6	4	4						2	6	10	14	2	7	9
	5%	5%	7%~	4%	6%	5%	6%	~	~	~	~	~	13%~	4%	7%	5%~	14%~	3%*	14%*
10 OR MORE TIMES	4	57			1	3								1	3	2	2		4
	1%	1%	~	~	1%	4%	~	~	~	~	~	~	~	0.7%	2%	0.7%~	14%~	~	6%~
NOT ANSWERED	14	293	2	6	6									6	1	7		14	
VALID CASES	294	5345	40	79	96	79	71						15	141	136	267	14	229	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q8																			
#YES	136	2462	20	44	33	39	36						7	64	63	121	8	95	41
	67%	67%	69%~	79%*	54%*	67%	71%	~	~	~	~	~	54%~	68%	66%	66%~	73%~	63%	76%
NO	68	1197	9	12	28	19	15						6	30	32	61	3	55	13
	33%	33%	31%~	21%*	46%*	33%	29%	~	~	~	~	~	46%~	32%	34%	34%~	27%~	37%	24%
NOT ANSWERED	3	87		1		2								2	1	3		3	
VALID CASES	204	3659	29	56	61	58	51						13	94	95	182	11	150	54
NUMBER OF RESPONDENTS	207	3746	29	57	61	60	51						13	96	96	185	11	153	54
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q9																			
NEVER	4	111		2		2	2						1	1	3	4		3	1
	2%	3%	~	4%	~	4%	4%	~	~	~	~	~	8%~	1%	3%	2%~	~	2%	2%
SOMETIMES	18	330	4	7	5	2	3						1	12	5	17	1	15	3
	9%	9%	14%~	13%	8%	4%*	6%	~	~	~	~	~	8%~	13%	5%	9%~	9%~	10%	6%
USUALLY	41	815	5	9	15	12	6						1	24	15	33	5	29	12
	20%	22%	17%~	16%	25%	21%	12%	~	~	~	~	~	8%~	26%	16%	18%~	45%~	19%	23%
ALWAYS	140	2400	20	38	41	41	39						10	57	72	128	5	103	37
	69%	66%	69%~	68%	67%	72%	78%	~	~	~	~	~	77%~	61%*	76%*	70%~	45%~	69%	70%
#ALWAYS + USUALLY (NET)	181	3215	25	47	56	53	45						11	81	87	161	10	132	49
	89%	88%	86%~	84%	92%	93%	90%	~	~	~	~	~	85%~	86%	92%	88%~	91%~	88%	92%
TOP BOX SCORE	140	2400	20	38	41	41	39						10	57	72	128	5	103	37
	69%	66%	69%~	68%	67%	72%	78%	~	~	~	~	~	77%~	61%*	76%*	70%~	45%~	69%	70%
NOT ANSWERED	4	90		1		3	1							2	1	3		3	1
VALID CASES	203	3656	29	56	61	57	50						13	94	95	182	11	150	53
NUMBER OF RESPONDENTS	207	3746	29	57	61	60	51						13	96	96	185	11	153	54
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q10																			
YES	58	1058	8	15	20	15	16						4	21	33	48	6	27	31
	29%	29%	28%~	27%	33%	27%	31%	~	~	~	~	~	31%~	23%	34%	27%~	55%~	18%*	57%*
NO	143	2578	21	41	40	41	35						9	71	63	133	5	120	23
	71%	71%	72%~	73%	67%	73%	69%	~	~	~	~	~	69%~	77%	66%	73%~	45%~	82%*	43%*
NOT ANSWERED	6	110		1	1	4								4		4		6	
VALID CASES	201	3636	29	56	60	56	51						13	92	96	181	11	147	54
NUMBER OF RESPONDENTS	207	3746	29	57	61	60	51						13	96	96	185	11	153	54
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q11																			
#YES	49	931	5	12	18	14	16						4	13	33	42	3	20	29
	86%	93%	63%~	80%~	95%~	93%~	100%~	~	~	~	~		~100%~	65%~	100%~	88%~	60%~	77%~	94%~
NO	8	71	3	3	1	1								7		6	2	6	2
	14%	7%	38%~	20%~	5%~	7%~	~	~	~	~	~	~	~	35%~	~	12%~	40%~	23%~	6%~
NOT ANSWERED	21	408	2	7	8	4								11	1	11	1	21	
VALID CASES	57	1002	8	15	19	15	16						4	20	33	48	5	26	31
NUMBER OF RESPONDENTS	78	1410	10	22	27	19	16						4	31	34	59	6	47	31
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q12																			
#YES	35	722	5	8	12	10	10						4	11	22	29	4	11	24
	62%	71%	63%~	53%~	67%~	67%~	63%~	~	~	~	~		~100%~	55%~	69%~	62%~	80%~	42%~	80%~
NO	21	300	3	7	6	5	6							9	10	18	1	15	6
	38%	29%	38%~	47%~	33%~	33%~	38%~	~	~	~	~	~	~	45%~	31%~	38%~	20%~	58%~	20%~
NOT ANSWERED	2	19			2									1	1	1	1	1	1
VALID CASES	56	1022	8	15	18	15	16						4	20	32	47	5	26	30
NUMBER OF RESPONDENTS	58	1041	8	15	20	15	16						4	21	33	48	6	27	31
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q13																			
#YES	43	804	7	12	14	10	11						3	16	25	38	4	18	25
	78%	80%	88%~	86%~	78%~	67%~	69%~	~	~	~	~		~100%~	80%~	81%~	83%~	80%~	69%~	86%~
NO	12	202	1	2	4	5	5							4	6	8	1	8	4
	22%	20%	13%~	14%~	22%~	33%~	31%~	~	~	~	~	~	~	20%~	19%~	17%~	20%~	31%~	14%~
NOT ANSWERED	3	35		1	2								1	1	2	2	1	1	2
VALID CASES	55	1006	8	14	18	15	16						3	20	31	46	5	26	29
NUMBER OF RESPONDENTS	58	1041	8	15	20	15	16						4	21	33	48	6	27	31
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q14																			
WORST HEALTH CARE	1	7		1											1	1		1	
POSSIBLE	0.5%	0.2%	~	2%~	~	~	~	~	~	~	~	~	~	~	1%~	0.5%~	~	0.7%	~
01		7																	
		0.2%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02		15																	
		0.4%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03		17																	
		0.5%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
04		22																	
		0.6%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
05	11	133		4	5	2	3						2	4	7	11		7	4
	5%	4%	~	7%	8%	3%	6%	~	~	~	~	~	15%~	4%	7%	6%~	~	5%	8%
06	11	105		3	4	4	2							7	4	10	1	8	3
	5%	3%	~	5%	7%	7%	4%	~	~	~	~	~	~	8%	4%	5%~	9%~	5%	6%
07	15	327	5	6	3	1	3						1	7	6	13	1	13	2
	7%	9%	17%~	11%	5%	2%*	6%	~	~	~	~	~	8%~	8%	6%	7%~	9%~	9%	4%
08	38	776	5	7	10	16	13						3	13	23	36	2	26	12
	19%	21%	17%~	13%	17%	28%	25%	~	~	~	~	~	23%~	14%	24%	20%~	18%~	17%	23%
09	41	815	7	11	11	12	6						1	24	12	32	4	32	9
	20%	22%	24%~	20%	19%	21%	12%*	~	~	~	~	~	8%~	26%	13%*	18%~	36%~	21%	17%
BEST HEALTH CARE	85	1412	12	24	26	23	24						6	38	43	79	3	62	23
POSSIBLE	42%	39%	41%~	43%	44%	40%	47%	~	~	~	~	~	46%~	41%	45%	43%~	27%~	42%	43%
#8-10 (NET)	164	3003	24	42	47	51	43						10	75	78	147	9	120	44
	81%	83%	83%~	75%	80%	88%	84%	~	~	~	~	~	77%~	81%	81%	81%~	82%~	81%	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
9-10 (NET)	126	2227	19	35	37	35	30						7	62	55	111	7	94	32
	62%	61%	66%~	63%	63%	60%	59%	~	~	~	~	~	54%~	67%	57%	61%~	64%~	63%	60%
NOT ANSWERED	5	109		1	2	2								3		3		4	1
VALID CASES	202	3637	29	56	59	58	51						13	93	96	182	11	149	53
NUMBER OF RESPONDENTS	207	3746	29	57	61	60	51						13	96	96	185	11	153	54
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%
MEAN	8.66	8.64	8.90	8.48	8.63	8.74	8.75						8.46	8.72	8.57	8.64	8.64	8.66	8.66
p stat_(*=Sig @ p<=.05)		.879		~.400	.859	.612	.642	~	~	~	~	~	~	~.609	.477	~	~	~.992	.992

[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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q15																			
NEVER	2	66	1	1			1								2	2		1	1
	1%	2%	3%~	2%	~	~	2%	~	~	~	~	~	~	~	2%~	1%~		~0.7%	2%
SOMETIMES	17	356	2	8	2	5							2	12	5	15	2	12	5
	8%	10%	7%~	15%	3%*	9%	~	~	~	~	~	~	15%~	13%*	5%	8%~	18%~	8%	9%
USUALLY	60	1161	5	11	24	20	16						3	29	27	53	4	46	14
	30%	32%	17%~	20%*	40%*	34%	31%	~	~	~	~	~	23%~	31%	28%	29%~	36%~	31%	26%
ALWAYS	123	2060	21	35	34	33	34						8	53	62	113	5	89	34
	61%	57%	72%~	64%	57%	57%	67%	~	~	~	~	~	62%~	56%	65%	62%~	45%~	60%	63%
#ALWAYS + USUALLY (NET)	183	3220	26	46	58	53	50						11	82	89	166	9	135	48
	91%	88%	90%~	84%	97%*	91%	98%*	~	~	~	~	~	85%~	87%	93%	91%~	82%~	91%	89%
TOP BOX SCORE	123	2060	21	35	34	33	34						8	53	62	113	5	89	34
	61%	57%	72%~	64%	57%	57%	67%	~	~	~	~	~	62%~	56%	65%	62%~	45%~	60%	63%
NOT ANSWERED	5	104		2	1	2								2		2		5	
VALID CASES	202	3642	29	55	60	58	51						13	94	96	183	11	148	54
NUMBER OF RESPONDENTS	207	3746	29	57	61	60	51						13	96	96	185	11	153	54
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q16																			
YES	212	3847	12	62	81	57	54						11	94	108	195	9	156	56
	72%	71%	29%~	79%	83%*	74%	76%	~	~	~	~	~	73%~	66%*	79%*	72%~	64%~	68%*	86%*
NO	82	1561	29	16	17	20	17						4	49	29	75	5	73	9
	28%	29%	71%~	21%	17%*	26%	24%	~	~	~	~	~	27%~	34%*	21%*	28%~	36%~	32%*	14%*
NOT ANSWERED	14	230	1	7	4	2								4		4		14	
VALID CASES	294	5408	41	78	98	77	71						15	143	137	270	14	229	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q17																			
YES	24	421	2	8	7	7	6						3	9	13	23		12	12
	12%	11%	18%~	13%	9%	13%	12%	~	~	~	~	~	27%~	10%	12%	12%~	~	8%*	22%*
NO	179	3279	9	54	69	47	46						8	78	93	164	8	137	42
	88%	89%	82%~	87%	91%	87%	88%	~	~	~	~	~	73%~	90%	88%	88%~	100%~	92%*	78%*
NOT ANSWERED	9	221	1		5	3	2							7	2	8	1	7	2
VALID CASES	203	3699	11	62	76	54	52						11	87	106	187	8	149	54
NUMBER OF RESPONDENTS	212	3920	12	62	81	57	54						11	94	108	195	9	156	56
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q16 = YES]

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q18																			
#YES	21	351	2	7	6	6	6						3	6	13	20		9	12
	95%	89%	~100%	~100%	~ 86%	~100%	~100%	~	~	~	~		~100%	~ 86%	~100%	~ 95%	~	~ 90%	~100%
NO	1	44			1									1		1		1	
	5%	11%	~	~	~ 14%	~	~	~	~	~	~	~	~	~ 14%	~	~ 5%	~	~ 10%	~
NOT ANSWERED	2	4		1		1								2		2		2	
VALID CASES	22	394	2	7	7	6	6						3	7	13	21		10	12
NUMBER OF RESPONDENTS	24	398	2	8	7	7	6						3	9	13	23		12	12
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q19																			
YES	9	201	1	1	4	3	1							5	3	6	2	4	5
	3%	4%	2%~	1%	4%	4%	1%	~	~	~	~	~	~	3%	2%	2%~	14%~	2%	8%
NO	285	5179	40	79	92	74	70						15	139	134	265	12	225	60
	97%	96%	98%~	99%	96%	96%	99%	~	~	~	~	~	~100%~	97%	98%	98%~	86%~	98%	92%
NOT ANSWERED	14	258	1	5	6	2								3		3		14	
VALID CASES	294	5380	41	80	96	77	71						15	144	137	271	14	229	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	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	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q20																			
NEVER	1	19			1		1								1		1		1
	11%	10%	~	~	25%	~	100%	~	~	~	~	~	~	~	33%	~	50%	~	20%
SOMETIMES	3	32	1			2								1	2	3		1	2
	33%	16%	100%	~	~	67%	~	~	~	~	~	~	~	20%	67%	50%	~	25%	40%
USUALLY	1	40			1									1			1		1
	11%	20%	~	~	25%	~	~	~	~	~	~	~	~	20%	~	~	50%	~	20%
ALWAYS	4	107		1	2	1								3		3		3	1
	44%	54%	~	100%	50%	33%	~	~	~	~	~	~	~	60%	~	50%	~	75%	20%
#ALWAYS + USUALLY (NET)	5	147		1	3	1								4		3	1	3	2
	56%	74%	~	100%	75%	33%	~	~	~	~	~	~	~	80%	~	50%	50%	75%	40%
TOP BOX SCORE	4	107		1	2	1								3		3		3	1
	44%	54%	~	100%	50%	33%	~	~	~	~	~	~	~	60%	~	50%	~	75%	20%
NOT ANSWERED		9																	
VALID CASES	9	198	1	1	4	3	1							5	3	6	2	4	5
NUMBER OF RESPONDENTS	9	207	1	1	4	3	1							5	3	6	2	4	5
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q21																			
#YES	8	166	1	1	4	2	1							4	3	5	2	4	4
	89%	83%	100%	100%	100%	67%	100%	~	~	~	~	~	~	80%	100%	83%	100%	100%	80%
NO	1	35				1								1		1			1
	11%	17%	~	~	~	33%	~	~	~	~	~	~	~	20%	~	17%	~	~	20%
NOT ANSWERED		6																	
VALID CASES	9	201	1	1	4	3	1							5	3	6	2	4	5
NUMBER OF RESPONDENTS	9	207	1	1	4	3	1							5	3	6	2	4	5
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q22																			
YES	28	487	2	9	9	8	7						3	10	17	24	3	13	15
	10%	9%	5%~	11%	9%	10%	10%	~	~	~	~	~	20%~	7%	12%	9%~	21%~	6%*	23%*
NO	266	4887	39	71	87	69	64						12	134	120	247	11	216	50
	90%	91%	95%~	89%	91%	90%	90%	~	~	~	~	~	80%~	93%	88%	91%~	79%~	94%*	77%*
NOT ANSWERED	14	264	1	5	6	2								3		3		14	
VALID CASES	294	5374	41	80	96	77	71						15	144	137	271	14	229	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q23																			
NEVER	6	64		2	2	2	3							2	4	6		3	3
	22%	14%~	~	22%~	25%~	25%~	50%~	~	~	~	~	~	~	20%~	25%~	26%~	~	23%~	21%~
SOMETIMES	3	82		2		1								1	2	3		1	2
	11%	18%~	~	22%~	~	13%~	~	~	~	~	~	~	~	10%~	13%~	13%~	~	8%~	14%~
USUALLY	5	105		1	2	2	1							1	4	4	1	2	3
	19%	23%~	~	11%~	25%~	25%~	17%~	~	~	~	~	~	~	10%~	25%~	17%~	33%~	15%~	21%~
ALWAYS	13	198	2	4	4	3	2						3	6	6	10	2	7	6
	48%	44%~	100%~	44%~	50%~	38%~	33%~	~	~	~	~	~	100%~	60%~	38%~	43%~	67%~	54%~	43%~
#ALWAYS + USUALLY (NET)	18	303	2	5	6	5	3						3	7	10	14	3	9	9
	67%	68%~	100%~	56%~	75%~	63%~	50%~	~	~	~	~	~	100%~	70%~	63%~	61%~	100%~	69%~	64%~
TOP BOX SCORE	13	198	2	4	4	3	2						3	6	6	10	2	7	6
	48%	44%~	100%~	44%~	50%~	38%~	33%~	~	~	~	~	~	100%~	60%~	38%~	43%~	67%~	54%~	43%~
NOT ANSWERED	1	21			1		1								1	1			1
VALID CASES	27	448	2	9	8	8	6						3	10	16	23	3	13	14
NUMBER OF RESPONDENTS	28	469	2	9	9	8	7						3	10	17	24	3	13	15
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q24																			
#YES	16	310	1	4	4	7	5						1	3	12	13	2	7	9
	59%	69%~	50%~	44%~	50%~	88%~	83%~	~	~	~	~	~	33%~	30%~	75%~	57%~	67%~	54%~	64%~
NO	11	142	1	5	4	1	1						2	7	4	10	1	6	5
	41%	31%~	50%~	56%~	50%~	13%~	17%~	~	~	~	~	~	67%~	70%~	25%~	43%~	33%~	46%~	36%~
NOT ANSWERED	1	17			1		1								1	1			1
VALID CASES	27	452	2	9	8	8	6						3	10	16	23	3	13	14
NUMBER OF RESPONDENTS	28	469	2	9	9	8	7						3	10	17	24	3	13	15
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q25																			
YES	32	692	1	3	15	13	9						4	11	21	29	3	14	18
	11%	13%	2%~	4%*	16%	17%	13%	~	~	~	~	~	27%~	8%	15%*	11%~	21%~	6%*	28%*
NO	261	4667	40	77	80	64	62						11	132	116	241	11	214	47
	89%	87%	98%~	96%*	84%	83%	87%	~	~	~	~	~	73%~	92%	85%*	89%~	79%~	94%*	72%*
NOT ANSWERED	15	279	1	5	7	2								4		4		15	
VALID CASES	293	5359	41	80	95	77	71						15	143	137	270	14	228	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q26																			
NEVER	2	86		1		1	1								2	2		1	1
	7%	13%~	~	33%~	~	8%~	13%~	~	~	~	~	~	~	~	10%~	7%~	~	8%~	6%~
SOMETIMES	1	135				1									1	1			1
	3%	20%~	~	~	~	8%~	~	~	~	~	~	~	~	~	5%~	4%~	~	~	6%~
USUALLY	5	147			4	1	3						1		5	4	1		5
	17%	22%~	~	~	29%~	8%~	38%~	~	~	~	~	~	25%~	~	25%~	15%~	33%~	~	29%~
ALWAYS	22	290	1	2	10	9	4						3	10	12	20	2	12	10
	73%	44%~	100%~	67%~	71%~	75%~	50%~	~	~	~	~	~	75%~	100%~	60%~	74%~	67%~	92%~	59%~
#ALWAYS + USUALLY (NET)	27	437	1	2	14	10	7						4	10	17	24	3	12	15
	90%	66%~	100%~	67%~	100%~	83%~	88%~	~	~	~	~	~	100%~	100%~	85%~	89%~	100%~	92%~	88%~
TOP BOX SCORE	22	290	1	2	10	9	4						3	10	12	20	2	12	10
	73%	44%~	100%~	67%~	71%~	75%~	50%~	~	~	~	~	~	75%~	100%~	60%~	74%~	67%~	92%~	59%~
NOT ANSWERED	2	25			1	1	1							1	1	2		1	1
VALID CASES	30	658	1	3	14	12	8						4	10	20	27	3	13	17
NUMBER OF RESPONDENTS	32	683	1	3	15	13	9						4	11	21	29	3	14	18
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q27																			
#YES	18	342		1	8	9	6						2	6	12	15	3	6	12
	58%	52%~	~	33%~	57%~	69%~	75%~	~	~	~	~	~	50%~	55%~	60%~	54%~	100%~	43%~	71%~
NO	13	320	1	2	6	4	2						2	5	8	13		8	5
	42%	48%~	100%~	67%~	43%~	31%~	25%~	~	~	~	~	~	50%~	45%~	40%~	46%~	~	57%~	29%~
NOT ANSWERED	1	21			1		1								1	1			1
VALID CASES	31	662	1	3	14	13	8						4	11	20	28	3	14	17
NUMBER OF RESPONDENTS	32	683	1	3	15	13	9						4	11	21	29	3	14	18
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q28																			
YES	57	1125	4	16	19	18	19						6	21	33	51	4	28	29
	20%	21%	10%~	20%	20%	24%	27%	~	~	~	~	~	40%~	15%*	24%	19%~	29%~	12%*	45%*
NO	235	4219	37	64	76	58	51						9	123	102	218	10	200	35
	80%	79%	90%~	80%	80%	76%	73%	~	~	~	~	~	60%~	85%*	76%	81%~	71%~	88%*	55%*
NOT ANSWERED	16	294	1	5	7	3	1							3	2	5		15	1
VALID CASES	292	5344	41	80	95	76	70						15	144	135	269	14	228	64
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q29																			
#YES	29	616	1	8	11	9	12						1	12	16	26	2	10	19
	52%	57%	25%~	50%~	61%~	50%~	63%~	~	~	~	~	~	17%~	57%~	50%~	52%~	50%~	37%~	66%~
NO	27	465	3	8	7	9	7						5	9	16	24	2	17	10
	48%	43%	75%~	50%~	39%~	50%~	37%~	~	~	~	~	~	83%~	43%~	50%~	48%~	50%~	63%~	34%~
NOT ANSWERED	1	36			1										1	1		1	
VALID CASES	56	1081	4	16	18	18	19						6	21	32	50	4	27	29
NUMBER OF RESPONDENTS	57	1117	4	16	19	18	19						6	21	33	51	4	28	29
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q30																			
YES	248	4642	38	69	83	58	61						13	120	115	228	11	190	58
	87%	88%	93%~	87%	89%	82%	90%	~	~	~	~	~	93%~	86%	88%	87%~	79%~	86%	91%
NO	36	640	3	10	10	13	7						1	19	16	33	3	30	6
	13%	12%	7%~	13%	11%	18%	10%	~	~	~	~	~	7%~	14%	12%	13%~	21%~	14%	9%
NOT ANSWERED	24	357	1	6	9	8	3						1	8	6	13		23	1
VALID CASES	284	5281	41	79	93	71	68						14	139	131	261	14	220	64
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q31																			
NONE	63	1245	6	16	28	13	18						1	28	33	58	3	53	10
	27%	28%	17%~	24%	36%*	23%	30%	~	~	~	~	~	8%~	25%	29%	27%~	27%~	30%*	17%*
1 TIME	79	1677	14	22	21	22	20						6	37	36	72	4	60	19
	33%	37%	39%~	33%	27%	39%	33%	~	~	~	~	~	46%~	33%	32%	33%~	36%~	34%	33%
2	50	850	8	17	16	9	7						1	35	13	47	1	44	6
	21%	19%	22%~	26%	21%	16%	12%*	~	~	~	~	~	8%~	31%*	12%*	22%~	9%~	25%*	10%*
3	18	387	2	8	3	5	5						3	6	11	16	1	10	8
	8%	9%	6%~	12%	4%	9%	8%	~	~	~	~	~	23%~	5%	10%	7%~	9%~	6%	14%
4	11	160	2	2	5	2	5						1	4	7	10	1	7	4
	5%	4%	6%~	3%	6%	4%	8%	~	~	~	~	~	8%~	4%	6%	5%~	9%~	4%	7%
5 TO 9	13	163	4	1	4	4	4						1	3	10	13		4	9
	6%	4%	11%~	2%*	5%	7%	7%	~	~	~	~	~	8%~	3%	9%*	6%~	~	2%*	16%*
10 OR MORE TIMES	2	21			1	1	1								2	1	1		2
	0.8%	0.5%	~	~	1%	2%	2%	~	~	~	~	~	~	~	2%	0.5%~	9%~	~	3%
NOT ANSWERED	12	173	2	3	5	2	1							7	3	11		12	
VALID CASES	236	4503	36	66	78	56	60						13	113	112	217	11	178	58
NUMBER OF RESPONDENTS	248	4676	38	69	83	58	61						13	120	115	228	11	190	58
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q31A																			
ALWAYS	5	87	1	3	1									5		4	1	5	
	3%	3%	3%~	6%	2%	~	~	~	~	~	~	~	~	6%~	~	3%~	13%~	4%~	~
USUALLY	3	60		1	1	1								1	2	3		2	1
	2%	2%	~	2%	2%	2%~	~	~	~	~	~	~	~	1%	3%	2%~	~	2%~	2%~
SOMETIMES	21	220	4	5	9	3								18	3	19	2	15	6
	12%	7%*	14%~	10%	18%	7%~	~	~	~	~	~	~	~	21%*	4%*	12%~	25%~	12%~	12%~
NEVER	143	2850	24	41	39	39	42						11	61	73	132	5	102	41
	83%	89%	83%~	82%	78%	91%~	100%~	~	~	~	~	~	~100%~	72%*	94%*	84%~	63%~	82%~	85%~
#NEVER + SOMETIMES	164	3070	28	46	48	42	42						11	79	76	151	7	117	47
(NET)	95%	95%	97%~	92%	96%	98%~	100%~	~	~	~	~	~	~100%~	93%	97%	96%~	88%~	94%~	98%~
TOP BOX SCORE	143	2850	24	41	39	39	42						11	61	73	132	5	102	41
	83%	89%	83%~	82%	78%	91%~	100%~	~	~	~	~	~	~100%~	72%*	94%*	84%~	63%~	82%~	85%~
NOT ANSWERED	1	23	1										1		1	1		1	
VALID CASES	172	3216	29	50	50	43	42						11	85	78	158	8	124	48
NUMBER OF RESPONDENTS	173	3239	30	50	50	43	42						12	85	79	159	8	125	48
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q32																			
NEVER	8	78		2	3	3								6	1	7		8	
	5%	2%	~	4%	6%	7%~	~	~	~	~	~	~	~	7%	1%*	4%~	~	6%~	~
SOMETIMES	15	156	4	3	5	3	1							11	4	14	1	11	4
	9%	5%	13%~	6%	10%	7%~	2%~	~	~	~	~	~	~	13%	5%	9%~	13%~	9%~	8%~
USUALLY	25	485	4	7	7	7	4						2	16	7	23	2	22	3
	14%	15%	13%~	14%	14%	16%~	10%~	~	~	~	~	~	17%~	19%	9%*	14%~	25%~	18%~	6%~
ALWAYS	125	2499	22	38	35	30	37						10	52	67	115	5	84	41
	72%	78%	73%~	76%	70%	70%~	88%~	~	~	~	~	~	83%~	61%*	85%*	72%~	63%~	67%~	85%~
#ALWAYS + USUALLY (NET)	150	2984	26	45	42	37	41						12	68	74	138	7	106	44
	87%	93%*	87%~	90%	84%	86%~	98%~	~	~	~	~	~	100%~	80%*	94%*	87%~	88%~	85%~	92%~
TOP BOX SCORE	125	2499	22	38	35	30	37						10	52	67	115	5	84	41
	72%	78%	73%~	76%	70%	70%~	88%~	~	~	~	~	~	83%~	61%*	85%*	72%~	63%~	67%~	85%~
NOT ANSWERED		21																	
VALID CASES	173	3218	30	50	50	43	42						12	85	79	159	8	125	48
NUMBER OF RESPONDENTS	173	3239	30	50	50	43	42						12	85	79	159	8	125	48
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q33																			
NEVER	2	35	1			1	1									1		2	
	1%	1%	3%~	~	~	2%~	2%~	~	~	~	~	~	~	~	~	~0.6%~	~	2%~	~
SOMETIMES	4	139	1		2	1	1							2	2	4		2	2
	2%	4%	3%~	~	4%	2%~	2%~	~	~	~	~	~	~	2%	3%	3%~	~	2%~	4%~
USUALLY	23	518	4	6	6	7	2						2	14	8	22	1	20	3
	13%	16%	13%~	12%	12%	16%~	5%~	~	~	~	~	~	17%~	16%	10%	14%~	13%~	16%~	6%~
ALWAYS	144	2521	24	44	42	34	38						10	69	69	132	7	101	43
	83%	78%	80%~	88%	84%	79%~	90%~	~	~	~	~	~	83%~	81%	87%	83%~	88%~	81%~	90%~
#ALWAYS + USUALLY (NET)	167	3039	28	50	48	41	40						12	83	77	154	8	121	46
	97%	95%	93%~	100%~	96%	95%~	95%~	~	~	~	~	~	100%~	98%	97%	97%~	100%~	97%~	96%~
TOP BOX SCORE	144	2521	24	44	42	34	38						10	69	69	132	7	101	43
	83%	78%	80%~	88%	84%	79%~	90%~	~	~	~	~	~	83%~	81%	87%	83%~	88%~	81%~	90%~
NOT ANSWERED		26																	
VALID CASES	173	3213	30	50	50	43	42						12	85	79	159	8	125	48
NUMBER OF RESPONDENTS	173	3239	30	50	50	43	42						12	85	79	159	8	125	48
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q34																			
NEVER		28																	
		0.9%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	7	104	3	3		1	2							2	4	7		6	1
	4%	3%	10%~	6%	~	2%~	5%~	~	~	~	~	~	~	2%	5%	4%~	~	5%~	2%~
USUALLY	22	398	4	7	7	4	1						1	18	4	20	2	17	5
	13%	12%	13%~	14%	14%	9%~	2%~	~	~	~	~	~	8%~	21%*	5%*	13%~	25%~	14%~	10%~
ALWAYS	144	2679	23	40	43	38	39						11	65	71	132	6	102	42
	83%	83%	77%~	80%	86%	88%~	93%~	~	~	~	~	~	92%~	76%*	90%*	83%~	75%~	82%~	88%~
#ALWAYS + USUALLY (NET)	166	3077	27	47	50	42	40						12	83	75	152	8	119	47
	96%	96%	90%~	94%	100%~	98%~	95%~	~	~	~	~	~	~100%~	98%	95%	96%~	100%~	95%~	98%~
TOP BOX SCORE	144	2679	23	40	43	38	39						11	65	71	132	6	102	42
	83%	83%	77%~	80%	86%	88%~	93%~	~	~	~	~	~	92%~	76%*	90%*	83%~	75%~	82%~	88%~
NOT ANSWERED		30																	
VALID CASES	173	3209	30	50	50	43	42						12	85	79	159	8	125	48
NUMBER OF RESPONDENTS	173	3239	30	50	50	43	42						12	85	79	159	8	125	48
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q35																			
YES	118	2175	2	31	43	42	30						8	56	55	106	7	80	38
	69%	68%	7%~	63%~	86%*	98%~	71%~	~	~	~	~	~	67%~	66%	71%	67%~	88%~	65%~	79%~
NO	54	1015	28	18	7	1	12						4	29	23	52	1	44	10
	31%	32%	93%~	37%~	14%*	2%~	29%~	~	~	~	~	~	33%~	34%	29%	33%~	13%~	35%~	21%~
NOT ANSWERED	1	49		1											1	1		1	
VALID CASES	172	3190	30	49	50	43	42						12	85	78	158	8	124	48
NUMBER OF RESPONDENTS	173	3239	30	50	50	43	42						12	85	79	159	8	125	48
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q36																			
NEVER		30																	
		1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	9	137	1	2	6									5	3	8		6	3
	8%	6%	50%~	6%~	14%~	~	~	~	~	~	~	~	~	9%	5%	8%~	~	7%~	8%~
USUALLY	25	493		6	8	11	6						3	15	8	23	2	16	9
	21%	23%	~	19%~	19%~	26%~	20%~	~	~	~	~	~	38%~	27%	15%	22%~	29%~	20%~	24%~
ALWAYS	84	1509	1	23	29	31	24						5	36	44	75	5	58	26
	71%	70%	50%~	74%~	67%~	74%~	80%~	~	~	~	~	~	63%~	64%	80%*	71%~	71%~	73%~	68%~
#ALWAYS + USUALLY (NET)	109	2002	1	29	37	42	30						8	51	52	98	7	74	35
	92%	92%	50%~	94%~	86%~	100%~	100%~	~	~	~	~	~	100%~	91%	95%	92%~	100%~	93%~	92%~
TOP BOX SCORE	84	1509	1	23	29	31	24						5	36	44	75	5	58	26
	71%	70%	50%~	74%~	67%~	74%~	80%~	~	~	~	~	~	63%~	64%	80%*	71%~	71%~	73%~	68%~
NOT ANSWERED		40																	
VALID CASES	118	2170	2	31	43	42	30						8	56	55	106	7	80	38
NUMBER OF RESPONDENTS	118	2210	2	31	43	42	30						8	56	55	106	7	80	38
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q37																			
NEVER	6	96	3	2	1		2							4	1	6		6	
	3%	3%	10%~	4%	2%	~	5%~	~	~	~	~	~	~	5%	1%	4%~	~	5%~	~
SOMETIMES	15	305	1	5	6	3							1	10	5	14	1	10	5
	9%	10%	3%~	10%	12%	7%~	~	~	~	~	~	~	9%~	12%	6%	9%~	13%~	8%~	10%~
USUALLY	42	799	7	11	10	14	7						1	28	13	39	3	32	10
	24%	25%	24%~	22%	20%	33%~	17%~	~	~	~	~	~	9%~	33%*	17%*	25%~	38%~	26%~	21%~
ALWAYS	109	1981	18	32	33	26	33						9	43	59	99	4	76	33
	63%	62%	62%~	64%	66%	60%~	79%~	~	~	~	~	~	82%~	51%*	76%*	63%~	50%~	61%~	69%~
#ALWAYS + USUALLY (NET)	151	2780	25	43	43	40	40						10	71	72	138	7	108	43
	88%	87%	86%~	86%	86%	93%~	95%~	~	~	~	~	~	91%~	84%	92%	87%~	88%~	87%~	90%~
TOP BOX SCORE	109	1981	18	32	33	26	33						9	43	59	99	4	76	33
	63%	62%	62%~	64%	66%	60%~	79%~	~	~	~	~	~	82%~	51%*	76%*	63%~	50%~	61%~	69%~
NOT ANSWERED	1	58	1										1		1	1		1	
VALID CASES	172	3181	29	50	50	43	42						11	85	78	158	8	124	48
NUMBER OF RESPONDENTS	173	3239	30	50	50	43	42						12	85	79	159	8	125	48
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q38																			
#YES	148	2742	27	45	44	32	37						9	74	69	137	7	111	37
	87%	86%	93%~	90%	90%~	74%~	90%~	~	~	~	~	~	75%~	87%	87%	87%~	88%~	90%~	77%~
NO	23	440	2	5	5	11	4						3	11	10	21	1	12	11
	13%	14%	7%~	10%	10%~	26%~	10%~	~	~	~	~	~	25%~	13%	13%	13%~	13%~	10%~	23%~
NOT ANSWERED	2	57	1		1		1									1		2	
VALID CASES	171	3182	29	50	49	43	41						12	85	79	158	8	123	48
NUMBER OF RESPONDENTS	173	3239	30	50	50	43	42						12	85	79	159	8	125	48
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q39																			
YES	66	1245	10	18	19	19	16						5	34	30	60	5	40	26
	39%	39%	34%~	36%	39%~	44%~	39%~	~	~	~	~	~	42%~	40%	38%	38%~	63%~	33%~	54%~
NO	105	1935	19	32	30	24	25						7	51	49	98	3	83	22
	61%	61%	66%~	64%	61%~	56%~	61%~	~	~	~	~	~	58%~	60%	62%	62%~	38%~	67%~	46%~
NOT ANSWERED	2	59	1		1		1									1		2	
VALID CASES	171	3180	29	50	49	43	41						12	85	79	158	8	123	48
NUMBER OF RESPONDENTS	173	3239	30	50	50	43	42						12	85	79	159	8	125	48
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q40																			
NEVER	4	77		1	1	2							1	2	1	3	1	3	1
	6%	7%	~	6%~	5%~	11%~	~	~	~	~	~	~	20%~	6%~	3%~	5%~	20%~	8%~	4%~
SOMETIMES	5	132		2	2	1								3	2	5		2	3
	8%	11%	~	11%~	11%~	6%~	~	~	~	~	~	~	~	9%~	7%~	8%~	~	5%~	12%~
USUALLY	18	337	3	3	3	9	5						1	8	9	17		12	6
	28%	29%	30%~	17%~	16%~	50%~	33%~	~	~	~	~	~	20%~	24%~	31%~	29%~	~	30%~	24%~
ALWAYS	38	626	7	12	13	6	10						3	21	17	34	4	23	15
	58%	53%	70%~	67%~	68%~	33%~	67%~	~	~	~	~	~	60%~	62%~	59%~	58%~	80%~	58%~	60%~
#ALWAYS + USUALLY (NET)	56	962	10	15	16	15	15						4	29	26	51	4	35	21
	86%	82%	100%~	83%~	84%~	83%~	100%~	~	~	~	~	~	80%~	85%~	90%~	86%~	80%~	88%~	84%~
TOP BOX SCORE	38	626	7	12	13	6	10						3	21	17	34	4	23	15
	58%	53%	70%~	67%~	68%~	33%~	67%~	~	~	~	~	~	60%~	62%~	59%~	58%~	80%~	58%~	60%~
NOT ANSWERED	1	42				1	1								1	1			1
VALID CASES	65	1171	10	18	19	18	15						5	34	29	59	5	40	25
NUMBER OF RESPONDENTS	66	1213	10	18	19	19	16						5	34	30	60	5	40	26
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q41 WORST PERSONAL DOCTOR POSSIBLE		8																	
		0.2%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01		20																	
		0.5%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02	3	19	2	1			3								2	3		2	1
	1%	0.4%	5%~	2%	~	~	5%	~	~	~	~	~	~	~	2%	1%~	~	1%	2%
03	1	22		1			1								1	1		1	
	0.4%	0.5%	~	2%	~	~	2%~	~	~	~	~	~	~	~	0.9%~	0.5%~	~	0.6%	~
04	3	26		2	1									3		3		2	1
	1%	0.6%	~	3%	1%	~	~	~	~	~	~	~	~	3%	~	1%~	~	1%	2%
05	6	122		2	4		2							3	3	6		4	2
	3%	3%	~	3%	5%	~	3%	~	~	~	~	~	~	3%	3%	3%~	~	2%	3%
06	9	114	2	3	2	2							1	7	1	8	1	7	2
	4%	3%	5%~	5%	2%	4%	~	~	~	~	~	~	8%~	6%	0.9%*	4%~	9%~	4%	3%
07	16	260	2	3	9	2	3							8	8	16		13	3
	7%	6%	5%~	5%	11%	4%	5%	~	~	~	~	~	~	7%	7%	7%~	~	7%	5%
08	26	703	2	9	7	8	6						2	10	13	22	2	20	6
	11%	16%*	5%~	14%	9%	15%	10%	~	~	~	~	~	15%~	9%	12%	10%~	18%~	11%	10%
09	36	904	7	6	14	9	9						1	18	16	30	4	27	9
	15%	20%*	18%~	9%	18%	16%	15%	~	~	~	~	~	8%~	16%	14%	14%~	36%~	15%	16%
BEST PERSONAL DOCTOR POSSIBLE	139	2271	23	39	43	34	36						9	66	69	132	4	105	34
	58%	51%*	61%~	59%	54%	62%	60%	~	~	~	~	~	69%~	57%	61%	60%~	36%~	58%	59%
#8-10 (NET)	201	3877	32	54	64	51	51						12	94	98	184	10	152	49
	84%	87%	84%~	82%	80%	93%*	85%	~	~	~	~	~	92%~	82%	87%	83%~	91%~	84%	84%

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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
9-10 (NET)	175	3175	30	45	57	43	45						10	84	85	162	8	132	43
	73%	71%	79%~	68%	71%	78%	75%	~	~	~	~	~	77%~	73%	75%	73%~	73%~	73%	74%
NOT ANSWERED	9	208		3	3	3	1							5	2	7		9	
VALID CASES	239	4468	38	66	80	55	60						13	115	113	221	11	181	58
NUMBER OF RESPONDENTS	248	4676	38	69	83	58	61						13	120	115	228	11	190	58
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%
MEAN	8.95	8.91	8.92	8.76	8.89	9.29	8.82						9.31	8.93	9.04	8.95	8.91	8.96	8.93
p stat_(*=Sig @ p<=.05)		.681		~.274	.674	.026*	.478	~	~	~	~	~	~	.864	.410	~	~	.922	.922

[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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q42																			
YES	54	1079	3	11	23	17	22						7	13	41	46	8	10	44
	22%	24%	8%~	17%	29%	30%	37%*	~	~	~	~	~	54%~	11%*	36%*	21%~	73%~	5%*	76%*
NO	186	3404	35	55	57	39	38						6	102	73	176	3	172	14
	78%	76%	92%~	83%	71%	70%	63%*	~	~	~	~	~	46%~	89%*	64%*	79%~	27%~	95%*	24%*
NOT ANSWERED	8	193		3	3	2	1							5	1	6		8	
VALID CASES	240	4483	38	66	80	56	60						13	115	114	222	11	182	58
NUMBER OF RESPONDENTS	248	4676	38	69	83	58	61						13	120	115	228	11	190	58
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q43																			
#YES	49	932	3	9	20	17	20						7	11	38	43	6	9	40
	94%	89%	100%~	82%~	95%~	100%~	91%~	~	~	~	~		~100%~	92%~	95%~	96%~	86%~	90%~	95%~
NO	3	112		2	1		2							1	2	2	1	1	2
	6%	11%	~	18%~	5%~	~	9%~	~	~	~	~	~	~	8%~	5%~	4%~	14%~	10%~	5%~
NOT ANSWERED	2	26			2									1	1	1	1		2
VALID CASES	52	1045	3	11	21	17	22						7	12	40	45	7	10	42
NUMBER OF RESPONDENTS	54	1071	3	11	23	17	22						7	13	41	46	8	10	44
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q44																			
#YES	44	903	3	8	19	14	18						7	8	36	40	4	7	37
	86%	87%	100%~	73%~	86%~	93%~	82%~	~	~	~	~		~100%~	73%~	90%~	87%~	80%~	78%~	88%~
NO	7	141		3	3	1	4							3	4	6	1	2	5
	14%	13%	~	27%~	14%~	7%~	18%~	~	~	~	~	~	~	27%~	10%~	13%~	20%~	22%~	12%~
NOT ANSWERED	3	27			1	2								2	1		3	1	2
VALID CASES	51	1044	3	11	22	15	22						7	11	40	46	5	9	42
NUMBER OF RESPONDENTS	54	1071	3	11	23	17	22						7	13	41	46	8	10	44
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q45																			
YES	38	851	3	13	11	11	9						3	18	20	35	3	18	20
	13%	16%	8%~	17%	12%	15%	13%	~	~	~	~	~	20%~	13%	15%	13%~	23%~	8%*	31%*
NO	250	4406	37	65	84	64	62						12	124	117	235	10	205	45
	87%	84%	93%~	83%	88%	85%	87%	~	~	~	~	~	80%~	87%	85%	87%~	77%~	92%*	69%*
NOT ANSWERED	20	381	2	7	7	4								5		4	1	20	
VALID CASES	288	5257	40	78	95	75	71						15	142	137	270	13	223	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q46																			
NEVER	3	36		2	1		2								3	3			3
	8%	5%~	~	15%~	9%~	~	22%~	~	~	~	~	~	~	~	15%~	9%~	~	~	15%~
SOMETIMES	6	163	1	3	1	1								4	2	6		5	1
	16%	21%~	33%~	23%~	9%~	9%~	~	~	~	~	~	~	~	22%~	10%~	17%~	~	28%~	5%~
USUALLY	11	221	1	3	4	3	3						1	5	6	11		6	5
	29%	28%~	33%~	23%~	36%~	27%~	33%~	~	~	~	~	~	33%~	28%~	30%~	31%~	~	33%~	25%~
ALWAYS	18	367	1	5	5	7	4						2	9	9	15	3	7	11
	47%	47%~	33%~	38%~	45%~	64%~	44%~	~	~	~	~	~	67%~	50%~	45%~	43%~	100%~	39%~	55%~
#ALWAYS + USUALLY (NET)	29	589	2	8	9	10	7						3	14	15	26	3	13	16
	76%	75%~	67%~	62%~	82%~	91%~	78%~	~	~	~	~	~	100%~	78%~	75%~	74%~	100%~	72%~	80%~
TOP BOX SCORE	18	367	1	5	5	7	4						2	9	9	15	3	7	11
	47%	47%~	33%~	38%~	45%~	64%~	44%~	~	~	~	~	~	67%~	50%~	45%~	43%~	100%~	39%~	55%~
NOT ANSWERED		15																	
VALID CASES	38	787	3	13	11	11	9						3	18	20	35	3	18	20
NUMBER OF RESPONDENTS	38	802	3	13	11	11	9						3	18	20	35	3	18	20
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q47																			
NONE	4	55	1	2	1									3	1	4		3	1
	11%	7%~	33%~	17%~	9%~	~	~	~	~	~	~	~	~	18%~	5%~	12%~	~	18%~	5%~
1 SPECIALIST	20	514	2	7	5	6	4							11	9	19	1	12	8
	54%	65%~	67%~	58%~	45%~	55%~	44%~	~	~	~	~	~	~	65%~	45%~	56%~	33%~	71%~	40%~
2	10	134		3	3	4	4						2	3	7	9	1	2	8
	27%	17%~	~	25%~	27%~	36%~	44%~	~	~	~	~	~	67%~	18%~	35%~	26%~	33%~	12%~	40%~
3	2	51			1	1							1		2	2			2
	5%	6%~	~	~	9%~	9%~	~	~	~	~	~	~	33%~	~	10%~	6%~	~	~	10%~
4		13																	
		2%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
5 OR MORE SPECIALISTS	1	19			1		1								1		1		1
	3%	2%~	~	~	9%~	~	11%~	~	~	~	~	~	~	~	5%~	~	33%~	~	5%~
NOT ANSWERED	1	16		1										1		1		1	
VALID CASES	37	786	3	12	11	11	9						3	17	20	34	3	17	20
NUMBER OF RESPONDENTS	38	802	3	13	11	11	9						3	18	20	35	3	18	20
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q48 WORST SPECIALIST POSSIBLE		7																	
		0.9%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01		4																	
		0.5%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02		6																	
		0.9%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03		5																	
		0.6%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
04		6																	
		0.9%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
05		29																	
		4%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
06	3	32		2	1		1							1	2	3		1	2
	9%	4%~	~	20%~	10%~	~	11%~	~	~	~	~	~	~	7%~	11%~	10%~	~	7%~	11%~
07	8	59	1	2	2	3	1						2	3	5	8		5	3
	24%	8%~	50%~	20%~	20%~	27%~	11%~	~	~	~	~	~	67%~	21%~	26%~	27%~	~	36%~	16%~
08	2	116		1	1		1							1	1	2		2	
	6%	16%~	~	10%~	10%~	~	11%~	~	~	~	~	~	~	7%~	5%~	7%~	~	14%~	~
09	5	143		1	2	2	2							1	4	3	2	1	4
	15%	20%~	~	10%~	20%~	18%~	22%~	~	~	~	~	~	~	7%~	21%~	10%~	67%~	7%~	21%~
BEST SPECIALIST POSSIBLE	15	312	1	4	4	6	4						1	8	7	14	1	5	10
	45%	43%~	50%~	40%~	40%~	55%~	44%~	~	~	~	~	~	33%~	57%~	37%~	47%~	33%~	36%~	53%~

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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
#8-10 (NET)	22	570	1	6	7	8	7						1	10	12	19	3	8	14
	67%	80%~	50%~	60%~	70%~	73%~	78%~	~	~	~	~	~	33%~	71%~	63%~	63%~	100%~	57%~	74%~
9-10 (NET)	20	455	1	5	6	8	6						1	9	11	17	3	6	14
	61%	63%~	50%~	50%~	60%~	73%~	67%~	~	~	~	~	~	33%~	64%~	58%~	57%~	100%~	43%~	74%~
NOT ANSWERED		7																	
VALID CASES	33	717	2	10	10	11	9						3	14	19	30	3	14	19
NUMBER OF RESPONDENTS	33	724	2	10	10	11	9						3	14	19	30	3	14	19
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%
MEAN	8.64	8.55	8.50	8.30	8.60	9.00	8.78						8.00	8.86	8.47	8.57	9.33	8.29	8.89
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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q49																			
YES	87	1347	16	28	26	17	16						3	52	31	80	5	69	18
	30%	26%	40%~	37%	27%	22%	23%	~	~	~	~	~	20%~	36%*	23%*	30%~	36%~	31%	28%
NO	200	3870	24	48	69	59	54						12	91	104	189	9	154	46
	70%	74%	60%~	63%	73%	78%	77%	~	~	~	~	~	80%~	64%*	77%*	70%~	64%~	69%	72%
NOT ANSWERED	21	421	2	9	7	3	1							4	2	5		20	1
VALID CASES	287	5217	40	76	95	76	70						15	143	135	269	14	223	64
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q50																			
NEVER	4	45	1	2	1		1							1	3	4		4	
	5%	3%	6%~	7%~	4%~	~	6%~	~	~	~	~	~	~	2%~	10%~	5%~	~	6%~	~
SOMETIMES	12	221	1	5	2	4	3							6	6	11	1	9	3
	14%	17%	6%~	18%~	8%~	24%~	19%~	~	~	~	~	~	~	12%~	19%~	14%~	20%~	13%~	17%~
USUALLY	25	378	6	6	10	3	4						1	16	8	23	1	21	4
	29%	29%	38%~	21%~	40%~	18%~	25%~	~	~	~	~	~	33%~	31%~	26%~	29%~	20%~	31%~	22%~
ALWAYS	45	651	8	15	12	10	8						2	29	14	42	3	34	11
	52%	50%	50%~	54%~	48%~	59%~	50%~	~	~	~	~	~	67%~	56%~	45%~	53%~	60%~	50%~	61%~
#ALWAYS + USUALLY (NET)	70	1029	14	21	22	13	12						3	45	22	65	4	55	15
	81%	79%	88%~	75%~	88%~	76%~	75%~	~	~	~	~	~	~100%~	87%~	71%~	81%~	80%~	81%~	83%~
TOP BOX SCORE	45	651	8	15	12	10	8						2	29	14	42	3	34	11
	52%	50%	50%~	54%~	48%~	59%~	50%~	~	~	~	~	~	67%~	56%~	45%~	53%~	60%~	50%~	61%~
NOT ANSWERED	1	28			1													1	
VALID CASES	86	1295	16	28	25	17	16						3	52	31	80	5	68	18
NUMBER OF RESPONDENTS	87	1323	16	28	26	17	16						3	52	31	80	5	69	18
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q51																			
NEVER	1	23		1											1	1		1	
	1%	2%	~	4%~	~	~	~	~	~	~	~	~	~	~	3%~	1%~	~	1%~	~
SOMETIMES	7	90		3	2	2	2							2	5	6	1	4	3
	8%	7%	~	11%~	8%~	12%~	12%~	~	~	~	~	~	~	4%~	17%~	8%~	20%~	6%~	17%~
USUALLY	20	268	7	7	5	1	3							16	3	19		17	3
	24%	21%	47%~	25%~	20%~	6%~	19%~	~	~	~	~	~	~	31%~	10%~	24%~	~	25%~	17%~
ALWAYS	57	903	8	17	18	14	11						3	34	21	53	4	45	12
	67%	70%	53%~	61%~	72%~	82%~	69%~	~	~	~	~	~	~100%~	65%~	70%~	67%~	80%~	67%~	67%~
#ALWAYS + USUALLY (NET)	77	1171	15	24	23	15	14						3	50	24	72	4	62	15
	91%	91%	100%~	86%~	92%~	88%~	88%~	~	~	~	~	~	~100%~	96%~	80%~	91%~	80%~	93%~	83%~
TOP BOX SCORE	57	903	8	17	18	14	11						3	34	21	53	4	45	12
	67%	70%	53%~	61%~	72%~	82%~	69%~	~	~	~	~	~	~100%~	65%~	70%~	67%~	80%~	67%~	67%~
NOT ANSWERED	2	39	1		1										1	1		2	
VALID CASES	85	1284	15	28	25	17	16						3	52	30	79	5	67	18
NUMBER OF RESPONDENTS	87	1323	16	28	26	17	16						3	52	31	80	5	69	18
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q52																			
YES	108	1805	13	31	43	21	22						6	60	46	100	7	77	31
	38%	35%	33%~	40%	47%*	28%*	32%	~	~	~	~	~	40%~	42%	34%	38%~	50%~	35%*	49%*
NO	176	3343	26	46	49	55	47						9	84	88	166	7	144	32
	62%	65%	67%~	60%	53%*	72%*	68%	~	~	~	~	~	60%~	58%	66%	62%~	50%~	65%*	51%*
NOT ANSWERED	24	490	3	8	10	3	2							3	3	8		22	2
VALID CASES	284	5148	39	77	92	76	69						15	144	134	266	14	221	63
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
PQ53																			
NEVER	10	124	3	2	4	1	1						1	5	5	7	3	9	1
	4%	2%	8%~	3%	4%	1%	1%	~	~	~	~	~	7%~	4%	4%	3%~	21%~	4%	2%
SOMETIMES	22	397	2	9	10	1	6							14	8	22		14	8
	8%	8%	5%~	12%	11%	1%*	9%	~	~	~	~	~	~	10%	6%	8%~	~	6%	13%
USUALLY	43	575	6	9	20	8	11						3	23	19	41	1	28	15
	15%	11%	15%~	12%	22%*	11%	16%	~	~	~	~	~	20%~	16%	14%	16%~	7%~	13%	24%
ALWAYS	206	3983	28	56	56	66	51						11	99	102	193	10	167	39
	73%	78%	72%~	74%	62%*	87%*	74%	~	~	~	~	~	73%~	70%	76%	73%~	71%~	77%*	62%*
#ALWAYS + USUALLY (NET)	249	4559	34	65	76	74	62						14	122	121	234	11	195	54
	89%	90%	87%~	86%	84%	97%*	90%	~	~	~	~	~	93%~	87%	90%	89%~	79%~	89%	86%
TOP BOX SCORE	206	3983	28	56	56	66	51						11	99	102	193	10	167	39
	73%	78%	72%~	74%	62%*	87%*	74%	~	~	~	~	~	73%~	70%	76%	73%~	71%~	77%*	62%*
NOT ANSWERED	27	559	3	9	12	3	2							6	3	11		25	2
VALID CASES	281	5079	39	76	90	76	69						15	141	134	263	14	218	63
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q54																			
WORST HEALTH PLAN	2	17		2			1							1	1	2		2	
POSSIBLE	0.7%	0.3%	~	3%	~	~	1%	~	~	~	~	~	~	0.7%	0.7%	0.7%~	~	0.9%	~
01	2	27		1	1									1	1	1	1	1	1
	0.7%	0.5%	~	1%	1%	~	~	~	~	~	~	~	~	0.7%	0.7%	0.4%~	7%~	0.4%	2%
02	3	33	1		2		2							1	2	3		3	
	1%	0.6%	3%~	~	2%	~	3%	~	~	~	~	~	~	0.7%	1%	1%~	~	1%~	~
03	1	44		1											1	1		1	
	0.3%	0.9%	~	1%	~	~	~	~	~	~	~	~	~		~0.7%	0.4%~	~	0.4%	~
04	3	62				3	2								3	3		2	1
	1%	1%	~	~	~	4%~	3%	~	~	~	~	~	~	~	2%~	1%~	~	0.9%	2%
05	15	275		5	4	6	5						2	4	10	12	2	8	7
	5%	5%	~	6%	4%	8%	7%	~	~	~	~	~	13%~	3%	7%	4%~	14%~	4%	11%
06	12	233	1	5	2	4	2							7	5	12		9	3
	4%	5%	3%~	6%	2%	5%	3%	~	~	~	~	~	~	5%	4%	4%~	~	4%	5%
07	32	496	4	5	12	11	12						2	5	26	31	1	20	12
	11%	10%	10%~	6%	13%	14%	17%	~	~	~	~	~	13%~	3%*	19%*	11%~	7%~	9%	18%
08	54	982	5	16	19	14	17						5	19	34	52	2	43	11
	19%	19%	13%~	21%	20%	18%	24%	~	~	~	~	~	33%~	13%*	25%*	19%~	14%~	19%	17%
09	47	974	7	10	21	9	12						1	28	18	42	4	37	10
	16%	19%	18%~	13%	22%	12%	17%	~	~	~	~	~	7%~	19%	13%	15%~	29%~	17%	15%
BEST HEALTH PLAN	118	2033	22	33	33	30	17						5	80	35	112	4	98	20
POSSIBLE	41%	39%	55%~	42%	35%	39%	24%*	~	~	~	~	~	33%~	55%*	26%*	41%~	29%~	44%	31%
#8-10 (NET)	219	3988	34	59	73	53	46						11	127	87	206	10	178	41
	76%	77%	85%~	76%	78%	69%	66%*	~	~	~	~	~	73%~	87%*	64%*	76%~	71%~	79%*	63%*

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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
9-10 (NET)	165	3007	29	43	54	39	29						6	108	53	154	8	135	30
	57%	58%	73%~	55%	57%	51%	41%*	~	~	~	~	~	40%~	74%*	39%*	57%~	57%~	60%*	46%*
NOT ANSWERED	19	462	2	7	8	2	1							1	1	3		19	
VALID CASES	289	5176	40	78	94	77	70						15	146	136	271	14	224	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%
MEAN	8.40	8.44	8.97	8.23	8.43	8.26	7.81						8.20	8.93	7.84	8.43	7.86	8.52	8.00
p stat_(*=Sig @ p<=.05)		.778		~.358	.898	.447	.003*	~	~	~	~	~	~	.000*	.000*	~	~	.061	.059

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q55																			
YES	117	1994	16	30	41	30	33						11	50	64	107	9	67	50
	40%	38%	40%~	38%	43%	40%	46%	~	~	~	~	~	73%~	34%*	47%*	39%~	64%~	30%*	77%*
NO	172	3218	24	49	54	45	38						4	95	72	164	5	157	15
	60%	62%	60%~	62%	57%	60%	54%	~	~	~	~	~	27%~	66%*	53%*	61%~	36%~	70%*	23%*
NOT ANSWERED	19	425	2	6	7	4								2	1	3		19	
VALID CASES	289	5213	40	79	95	75	71						15	145	136	271	14	224	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q56																			
NEVER		36 2%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	9 8%	176 9%	~	2 7%~	5 12%~	2 7%~	1 3%~	~	~	~	~	~	2 18%~	5 10%	4 6%	8 7%~	1 11%~	6 9%	3 6%
USUALLY	30 26%	474 24%	3 19%~	5 17%~	14 34%~	8 27%~	8 24%~	~	~	~	~	~	2 18%~	12 24%	18 28%	26 24%~	4 44%~	15 22%	15 30%
ALWAYS	78 67%	1301 65%	13 81%~	23 77%~	22 54%~	20 67%~	24 73%~	~	~	~	~	~	7 64%~	33 66%	42 66%	73 68%~	4 44%~	46 69%	32 64%
#ALWAYS + USUALLY (NET)	108 92%	1775 89%	16 100%~	28 93%~	36 88%~	28 93%~	32 97%~	~	~	~	~	~	9 82%~	45 90%	60 94%	99 93%~	8 89%~	61 91%	47 94%
TOP BOX SCORE	78 67%	1301 65%	13 81%~	23 77%~	22 54%~	20 67%~	24 73%~	~	~	~	~	~	7 64%~	33 66%	42 66%	73 68%~	4 44%~	46 69%	32 64%
NOT ANSWERED		29																	
VALID CASES	117	1988	16	30	41	30	33						11	50	64	107	9	67	50
NUMBER OF RESPONDENTS	117 100%	2017 100%	16 100%	30 100%	41 100%	30 100%	33 100%						11 100%	50 100%	64 100%	107 100%	9 100%	67 100%	50 100%

[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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q57																			
#YES	75	1177	12	17	29	17	19						6	36	38	66	9	43	32
	66%	60%	80%~	59%~	72%~	57%~	58%~	~	~	~	~	~	60%~	72%	62%	63%~	100%~	66%~	65%~
NO	39	795	3	12	11	13	14						4	14	23	38		22	17
	34%	40%	20%~	41%~	28%~	43%~	42%~	~	~	~	~	~	40%~	28%	38%	37%~	~	34%~	35%~
NOT ANSWERED	3	45	1	1	1								1		3	3		2	1
VALID CASES	114	1972	15	29	40	30	33						10	50	61	104	9	65	49
NUMBER OF RESPONDENTS	117	2017	16	30	41	30	33						11	50	64	107	9	67	50
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q57A																			
YES	238	4014	23	67	86	62	53						8	127	104	223	12	183	55
	83%	79%*	59%~	85%	91%*	84%	76%	~	~	~	~	~	57%~	89%*	77%*	83%~	86%~	83%	85%
NO	48	1085	16	12	8	12	17						6	16	31	46	2	38	10
	17%	21%*	41%~	15%	9%*	16%	24%	~	~	~	~	~	43%~	11%*	23%*	17%~	14%~	17%	15%
NOT ANSWERED	22	539	3	6	8	5	1						1	4	2	5		22	
VALID CASES	286	5099	39	79	94	74	70						14	143	135	269	14	221	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q57B																			
NEVER	32	667	2	12	8	10	6						2	16	15	30	1	24	8
	23%	28%	15%~	27%~	18%~	27%~	55%~	~	~	~	~	~	29%~	21%	27%	24%~	9%~	23%~	24%~
SOMETIMES	18	484	3	4	6	5							1	9	8	17	1	14	4
	13%	20%*	23%~	9%~	14%~	14%~	~	~	~	~	~	~	14%~	12%	14%	13%~	9%~	13%~	12%~
USUALLY	35	468	2	12	13	8							1	24	10	29	5	27	8
	25%	20%	15%~	27%~	30%~	22%~	~	~	~	~	~	~	14%~	31%	18%	23%~	45%~	26%~	24%~
ALWAYS	54	771	6	17	17	14	5						3	29	23	50	4	40	14
	39%	32%	46%~	38%~	39%~	38%~	45%~	~	~	~	~	~	43%~	37%	41%	40%~	36%~	38%~	41%~
#ALWAYS + USUALLY (NET)	89	1239	8	29	30	22	5						4	53	33	79	9	67	22
	64%	52%*	62%~	64%~	68%~	59%~	45%~	~	~	~	~	~	57%~	68%	59%	63%~	82%~	64%~	65%~
TOP BOX SCORE	54	771	6	17	17	14	5						3	29	23	50	4	40	14
	39%	32%	46%~	38%~	39%~	38%~	45%~	~	~	~	~	~	43%~	37%	41%	40%~	36%~	38%~	41%~
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	148	2768	26	34	48	40	60						8	64	81	143	3	117	31
NOT ANSWERED	21	480	3	6	10	2								5		5		21	
VALID CASES	139	2390	13	45	44	37	11						7	78	56	126	11	105	34
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q57C																			
YES	63	1124	8	15	19	21	13						6	29	31	55	5	40	23
	22%	22%	21%~	19%	20%	28%	18%	~	~	~	~	~	43%~	20%	23%	21%~	36%~	18%*	36%*
NO	220	3960	30	62	74	54	58						8	113	102	210	9	179	41
	78%	78%	79%~	81%	80%	72%	82%	~	~	~	~	~	57%~	80%	77%	79%~	64%~	82%*	64%*
NOT ANSWERED	25	553	4	8	9	4							1	5	4	9		24	1
VALID CASES	283	5085	38	77	93	75	71						14	142	133	265	14	219	64
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q57D																			
#YES	56	945	8	15	14	19	12						6	25	28	49	4	36	20
	90%	87%	100%~	100%~	78%~	90%~	92%~	~	~	~	~		~100%~	89%~	90%~	91%~	80%~	92%~	87%~
NO	6	135			4	2	1							3	3	5	1	3	3
	10%	13%	~	~	22%~	10%~	8%~	~	~	~	~	~	~	11%~	10%~	9%~	20%~	8%~	13%~
NOT ANSWERED	1	16			1									1		1		1	
VALID CASES	62	1081	8	15	18	21	13						6	28	31	54	5	39	23
NUMBER OF RESPONDENTS	63	1097	8	15	19	21	13						6	29	31	55	5	40	23
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q57E																			
#YES	52	905	7	12	15	18	12						5	25	25	45	5	33	19
	85%	84%	88%~	80%~	83%~	90%~	92%~	~	~	~	~	~	83%~	89%~	81%~	83%~	100%~	87%~	83%~
NO	9	169	1	3	3	2	1						1	3	6	9		5	4
	15%	16%	13%~	20%~	17%~	10%~	8%~	~	~	~	~	~	17%~	11%~	19%~	17%~	~	13%~	17%~
NOT ANSWERED	2	24			1	1								1		1		2	
VALID CASES	61	1073	8	15	18	20	13						6	28	31	54	5	38	23
NUMBER OF RESPONDENTS	63	1097	8	15	19	21	13						6	29	31	55	5	40	23
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q57F																			
NEVER	2	20		2									1		2	2		1	1
	3%	2%	~	13%~	~	~	~	~	~	~	~	~	17%~	~	6%~	4%~	~	3%~	4%~
SOMETIMES	4	94	1		1	2								2	2	4		3	1
	7%	9%	13%~	~	6%~	10%~	~	~	~	~	~	~	~	7%~	6%~	7%~	~	8%~	4%~
USUALLY	16	257	2	3	6	5	3							9	6	12	2	11	5
	26%	24%	25%~	20%~	33%~	25%~	23%~	~	~	~	~	~	~	32%~	19%~	22%~	40%~	29%~	22%~
ALWAYS	39	704	5	10	11	13	10						5	17	21	36	3	23	16
	64%	66%	63%~	67%~	61%~	65%~	77%~	~	~	~	~	~	83%~	61%~	68%~	67%~	60%~	61%~	70%~
#ALWAYS + USUALLY (NET)	55	960	7	13	17	18	13						5	26	27	48	5	34	21
	90%	89%	88%~	87%~	94%~	90%~	100%~	~	~	~	~	~	83%~	93%~	87%~	89%~	100%~	89%~	91%~
TOP BOX SCORE	39	704	5	10	11	13	10						5	17	21	36	3	23	16
	64%	66%	63%~	67%~	61%~	65%~	77%~	~	~	~	~	~	83%~	61%~	68%~	67%~	60%~	61%~	70%~
NOT ANSWERED	2	23			1	1								1		1		2	
VALID CASES	61	1074	8	15	18	20	13						6	28	31	54	5	38	23
NUMBER OF RESPONDENTS	63	1097	8	15	19	21	13						6	29	31	55	5	40	23
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q57G																			
NEVER	4	53		3	1		1						1	1	3	4		2	2
	7%	5%	~	20%~	6%~	~	8%~	~	~	~	~	~	17%~	4%~	10%~	7%~	~	5%~	9%~
SOMETIMES	5	120			1	4								3	2	4	1	3	2
	8%	11%	~	~	6%~	20%~	~	~	~	~	~	~	~	11%~	6%~	7%~	20%~	8%~	9%~
USUALLY	9	238	3	2	3	1								6	2	7	1	8	1
	15%	22%	38%~	13%~	17%~	5%~	~	~	~	~	~	~	~	21%~	6%~	13%~	20%~	21%~	4%~
ALWAYS	43	662	5	10	13	15	12						5	18	24	39	3	25	18
	70%	62%	63%~	67%~	72%~	75%~	92%~	~	~	~	~	~	83%~	64%~	77%~	72%~	60%~	66%~	78%~
#ALWAYS + USUALLY (NET)	52	901	8	12	16	16	12						5	24	26	46	4	33	19
	85%	84%	100%~	80%~	89%~	80%~	92%~	~	~	~	~	~	83%~	86%~	84%~	85%~	80%~	87%~	83%~
TOP BOX SCORE	43	662	5	10	13	15	12						5	18	24	39	3	25	18
	70%	62%	63%~	67%~	72%~	75%~	92%~	~	~	~	~	~	83%~	64%~	77%~	72%~	60%~	66%~	78%~
NOT ANSWERED	2	23			1	1								1		1		2	
VALID CASES	61	1074	8	15	18	20	13						6	28	31	54	5	38	23
NUMBER OF RESPONDENTS	63	1097	8	15	19	21	13						6	29	31	55	5	40	23
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q57H																			
NEVER	2	23		2			1								2	2		1	1
	3%	2%	~	13%~	~	~	8%~	~	~	~	~	~	~	~	7%~	4%~	~	3%~	4%~
SOMETIMES	6	97		1	2	3							1	4	2	5	1	4	2
	10%	9%	~	7%~	11%~	16%~	~	~	~	~	~	~	17%~	14%~	7%~	9%~	20%~	11%~	9%~
USUALLY	10	214	3	1	5	1	1							7	3	9	1	7	3
	17%	20%	43%~	7%~	28%~	5%~	8%~	~	~	~	~	~	~	25%~	10%~	17%~	20%~	19%~	13%~
ALWAYS	41	741	4	11	11	15	10						5	17	23	38	3	24	17
	69%	69%	57%~	73%~	61%~	79%~	83%~	~	~	~	~	~	83%~	61%~	77%~	70%~	60%~	67%~	74%~
#ALWAYS + USUALLY (NET)	51	955	7	12	16	16	11						5	24	26	47	4	31	20
	86%	89%	100%~	80%~	89%~	84%~	92%~	~	~	~	~	~	83%~	86%~	87%~	87%~	80%~	86%~	87%~
TOP BOX SCORE	41	741	4	11	11	15	10						5	17	23	38	3	24	17
	69%	69%	57%~	73%~	61%~	79%~	83%~	~	~	~	~	~	83%~	61%~	77%~	70%~	60%~	67%~	74%~
NOT ANSWERED	4	23	1		1	2	1							1	1	1		4	
VALID CASES	59	1074	7	15	18	19	12						6	28	30	54	5	36	23
NUMBER OF RESPONDENTS	63	1097	8	15	19	21	13						6	29	31	55	5	40	23
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q58																			
EXCELLENT	108	2143	16	36	35	21	28						5	49	57	108		96	12
	38%	41%	41%~	46%	37%	28%*	40%	~	~	~	~	~	33%~	34%	42%	39%~	~	43%*	18%*
VERY GOOD	104	1856	12	26	31	35	31						9	43	57	104		81	23
	36%	36%	31%~	33%	33%	47%*	44%	~	~	~	~	~	60%~	29%*	42%	38%~	~	36%	35%
GOOD	62	944	10	15	22	15	10						1	42	20	62		40	22
	22%	18%	26%~	19%	23%	20%	14%	~	~	~	~	~	7%~	29%*	15%*	23%~	~	18%*	34%*
FAIR	12	237	1	2	5	4	1							11	1		12	5	7
	4%	5%	3%~	3%	5%	5%	1%	~	~	~	~	~	~	8%*	0.7%*	~	86%~	2%*	11%*
POOR	2	15			2									1	1		2	1	1
	0.7%	0.3%	~	~	2%~	~	~	~	~	~	~	~	~	0.7%	0.7%	~	14%~	0.4%	2%
#EXCELLENT + VERY GOOD	274	4943	38	77	88	71	69						15	134	134	274		217	57
+ GOOD (NET)	95%	95%	97%~	97%	93%	95%	99%*	~	~	~	~	~	100%~	92%*	99%*	100%~	~	97%*	88%*
NOT ANSWERED	20	443	3	6	7	4	1							1	1			20	
VALID CASES	288	5195	39	79	95	75	70						15	146	136	274	14	223	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q59																			
EXCELLENT	119	2231	25	33	41	20	24						6	67	48	117	2	105	14
	41%	43%	64%~	42%	43%	27%*	35%	~	~	~	~	~	40%~	46%	36%	43%~	14%~	47%*	22%*
VERY GOOD	91	1483	6	28	26	31	29						5	37	52	89	2	77	14
	32%	29%	15%~	35%	27%	42%*	42%*	~	~	~	~	~	33%~	25%*	39%*	33%~	14%~	34%*	22%*
GOOD	55	1030	8	14	18	15	6						3	34	21	49	5	38	17
	19%	20%	21%~	18%	19%	20%	9%*	~	~	~	~	~	20%~	23%	16%	18%~	36%~	17%	27%
FAIR	20	368		4	9	7	9							8	12	15	5	4	16
	7%	7%	~	5%	9%	9%	13%	~	~	~	~	~	~	5%	9%	6%~	36%~	2%*	25%*
POOR	2	70			1	1	1						1		2	2			2
	0.7%	1%	~	~	1%	1%	1%	~	~	~	~	~	7%~	~	1%	0.7%~	~	~	3%
#EXCELLENT + VERY GOOD	265	4745	39	75	85	66	59						14	138	121	255	9	220	45
+ GOOD (NET)	92%	92%	100%~	95%	89%	89%	86%*	~	~	~	~	~	93%~	95%	90%	94%~	64%~	98%*	71%*
NOT ANSWERED	21	455	3	6	7	5	2							1	2	2		19	2
VALID CASES	287	5183	39	79	95	74	69						15	146	135	272	14	224	63
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q60																			
YES	56	1055	4	15	23	14	20						4	20	36	48	8	10	46
	20%	20%	10%~	19%	24%	19%	29%*	~	~	~	~	~	27%~	14%*	26%*	18%~	57%~	5%*	71%*
NO	231	4144	35	64	72	60	50						11	125	100	224	6	212	19
	80%	80%	90%~	81%	76%	81%	71%*	~	~	~	~	~	73%~	86%*	74%*	82%~	43%~	95%*	29%*
NOT ANSWERED	21	439	3	6	7	5	1							2	1	2		21	
VALID CASES	287	5199	39	79	95	74	70						15	145	136	272	14	222	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q61																			
YES	46	796	3	12	19	12	18						3	14	32	40	6	3	43
	82%	77%	75%~	80%~	83%~	86%~	90%~	~	~	~	~	~	75%~	70%~	89%~	83%~	75%~	30%~	93%~
NO	10	235	1	3	4	2	2						1	6	4	8	2	7	3
	18%	23%	25%~	20%~	17%~	14%~	10%~	~	~	~	~	~	25%~	30%~	11%~	17%~	25%~	70%~	7%~
NOT ANSWERED		22																	
VALID CASES	56	1030	4	15	23	14	20						4	20	36	48	8	10	46
NUMBER OF RESPONDENTS	56	1052	4	15	23	14	20						4	20	36	48	8	10	46
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q60 = YES]

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q62																			
YES	43	716	2	12	18	11	18						3	12	31	37	6		43
	93%	91%~	67%~	100%~	95%~	92%~	100%~	~	~	~	~	~	~100%~	86%~	97%~	93%~	100%~	~	~100%~
NO	3	75	1		1	1								2	1	3		3	
	7%	9%~	33%~	~	5%~	8%~	~	~	~	~	~	~	~	14%~	3%~	8%~	~	100%~	~
NOT ANSWERED		15																	
VALID CASES	46	791	3	12	19	12	18						3	14	32	40	6	3	43
NUMBER OF RESPONDENTS	46	806	3	12	19	12	18						3	14	32	40	6	3	43
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q63																			
YES	40	788	2	7	17	14	17						4	11	29	35	5	6	34
	14%	15%	5%~	9%	18%	19%	24%*	~	~	~	~	~	29%~	8%*	22%*	13%~	38%~	3%*	55%*
NO	243	4394	37	72	75	59	53						10	133	105	233	8	215	28
	86%	85%	95%~	91%	82%	81%	76%*	~	~	~	~	~	71%~	92%*	78%*	87%~	62%~	97%*	45%*
NOT ANSWERED	25	456	3	6	10	6	1						1	3	3	6	1	22	3
VALID CASES	283	5182	39	79	92	73	70						14	144	134	268	13	221	62
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q64																			
YES	30	637	1	4	17	8	15						2	7	23	26	4	1	29
	75%	85%~	50%~	57%~	100%~	57%~	88%~	~	~	~	~	~	50%~	64%~	79%~	74%~	80%~	17%~	85%~
NO	10	110	1	3		6	2						2	4	6	9	1	5	5
	25%	15%~	50%~	43%~	~	43%~	12%~	~	~	~	~	~	50%~	36%~	21%~	26%~	20%~	83%~	15%~
NOT ANSWERED		19																	
VALID CASES	40	747	2	7	17	14	17						4	11	29	35	5	6	34
NUMBER OF RESPONDENTS	40	766	2	7	17	14	17						4	11	29	35	5	6	34
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q63 = YES]

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q65																			
YES	29	591	1	4	17	7	15						2	7	22	25	4		29
	97%	96%	~100%	~100%	~100%	~ 88%	~100%	~	~	~	~		~100%	~100%	~ 96%	~ 96%	~100%	~	~100%
NO	1	26				1									1	1		1	
	3%	4%	~	~	~	~ 13%	~	~	~	~	~	~	~	~	~ 4%	~ 4%	~	~100%	~
NOT ANSWERED		7																	
VALID CASES	30	617	1	4	17	8	15						2	7	23	26	4	1	29
NUMBER OF RESPONDENTS	30	624	1	4	17	8	15						2	7	23	26	4	1	29
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q66																			
YES	39	639	5	9	17	8	13						3	16	23	33	6	8	31
	14%	12%	13%~	12%	18%	11%	18%	~	~	~	~	~	20%~	11%	17%	12%~	43%~	4%*	48%*
NO	246	4546	34	69	76	67	58						12	127	114	236	8	213	33
	86%	88%	87%~	88%	82%	89%	82%	~	~	~	~	~	80%~	89%	83%	88%~	57%~	96%*	52%*
NOT ANSWERED	23	453	3	7	9	4								4		5		22	1
VALID CASES	285	5185	39	78	93	75	71						15	143	137	269	14	221	64
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q67																			
YES	30	445	1	6	16	7	13						3	8	22	24	6	1	29
	77%	77%~	20%~	67%~	94%~	88%~	100%~	~	~	~	~		~100%~	50%~	96%~	73%~	100%~	13%~	94%~
NO	9	136	4	3	1	1								8	1	9		7	2
	23%	23%~	80%~	33%~	6%~	13%~	~	~	~	~	~	~	~	50%~	4%~	27%~	~	88%~	6%~
NOT ANSWERED		22																	
VALID CASES	39	582	5	9	17	8	13						3	16	23	33	6	8	31
NUMBER OF RESPONDENTS	39	604	5	9	17	8	13						3	16	23	33	6	8	31
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q68																			
YES	28	427	1	6	15	6	13						3	6	22	22	6		28
	97%	96%	~100%	~100%	~ 94%	~100%	~100%	~	~	~	~	~	~100%	~ 86%	~100%	~ 96%	~100%	~	~100%
NO	1	17			1									1		1		1	
	3%	4%	~	~	~ 6%	~	~	~	~	~	~	~	~	~ 14%	~	~ 4%	~	~100%	~
NOT ANSWERED	1	6				1								1		1			1
VALID CASES	29	444	1	6	16	6	13						3	7	22	23	6	1	28
NUMBER OF RESPONDENTS	30	450	1	6	16	7	13						3	8	22	24	6	1	29
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q69																			
YES	28	531	1	12	8	7	9						3	8	20	26	2	9	19
	10%	10%	3%~	15%	9%	9%	13%	~	~	~	~	~	20%~	6%*	15%*	10%~	14%~	4%*	29%*
NO	259	4648	38	67	86	68	62						12	137	117	245	12	213	46
	90%	90%	97%~	85%	91%	91%	87%	~	~	~	~	~	80%~	94%*	85%*	90%~	86%~	96%*	71%*
NOT ANSWERED	21	459	3	6	8	4								2		3		21	
VALID CASES	287	5179	39	79	94	75	71						15	145	137	271	14	222	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q70																			
YES	14	336		3	8	3	8						1		14	13	1	1	13
	50%	68%~	~	25%~	100%~	43%~	89%~	~	~	~	~	~	33%~	~	70%~	50%~	50%~	11%~	68%~
NO	14	157	1	9		4	1						2	8	6	13	1	8	6
	50%	32%~	100%~	75%~	~	57%~	11%~	~	~	~	~	~	67%~	100%~	30%~	50%~	50%~	89%~	32%~
NOT ANSWERED		8																	
VALID CASES	28	493	1	12	8	7	9						3	8	20	26	2	9	19
NUMBER OF RESPONDENTS	28	501	1	12	8	7	9						3	8	20	26	2	9	19
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q71																			
YES	13	293		3	8	2	8						1		13	12	1		13
	93%	92%~		~100%~	~100%~	67%~	~100%~	~	~	~	~		~100%~		~ 93%~	92%~	~100%~		~100%~
NO	1	24				1									1	1		1	
	7%	8%~	~	~	~	33%~	~	~	~	~	~	~	~	~	7%~	8%~		~100%~	~
NOT ANSWERED		3																	
VALID CASES	14	317		3	8	3	8						1		14	13	1	1	13
NUMBER OF RESPONDENTS	14	320		3	8	3	8						1		14	13	1	1	13
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q72																			
YES	43	736	2	5	23	13	14						5	11	32	39	4	10	33
	15%	14%	5%~	6%*	24%*	17%	20%	~	~	~	~	~	33%~	8%*	23%*	14%~	29%~	5%*	51%*
NO	243	4444	36	74	71	62	56						10	134	105	231	10	211	32
	85%	86%	95%~	94%*	76%*	83%	80%	~	~	~	~	~	67%~	92%*	77%*	86%~	71%~	95%*	49%*
NOT ANSWERED	22	458	4	6	8	4	1							2		4		22	
VALID CASES	286	5180	38	79	94	75	70						15	145	137	270	14	221	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q73																			
YES	32	628	1	4	19	8	13						4	4	28	30	2		32
	76%	90%~	50%~	80%~	83%~	67%~	93%~	~	~	~	~	~	80%~	40%~	88%~	77%~	67%~	~	97%~
NO	10	72	1	1	4	4	1						1	6	4	9	1	9	1
	24%	10%~	50%~	20%~	17%~	33%~	7%~	~	~	~	~	~	20%~	60%~	13%~	23%~	33%~	100%~	3%~
NOT ANSWERED	1	16				1								1			1	1	
VALID CASES	42	700	2	5	23	12	14						5	10	32	39	3	9	33
NUMBER OF RESPONDENTS	43	716	2	5	23	13	14						5	11	32	39	4	10	33
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q72 = YES]

NQ74 WHAT IS YOUR CHILD'S AGE?

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NQ74																			
3 YEARS OLD OR LESS	42	971	42				7						4	23	14	38	1	38	4
	14%	17%	100%~	~	~	~	10%	~	~	~	~	~	27%~	16%	10%	14%~	7%~	16%*	6%*
4 TO 7 YEARS OLD	85	1380		85			15						4	44	33	77	2	69	16
	28%	24%		~100%~	~	~	21%	~	~	~	~	~	27%~	30%	24%	28%~	14%~	28%	25%
8 TO 12 YEARS OLD	102	1689			102		27						3	48	47	88	7	75	27
	33%	30%	~	~	~100%~	~	38%	~	~	~	~	~	20%~	33%	34%	32%~	50%~	31%	42%
13 OR OLDER	79	1597				79	22						4	32	43	71	4	61	18
	26%	28%	~	~	~	~100%~	31%	~	~	~	~	~	27%~	22%	31%*	26%~	29%~	25%	28%
VALID CASES	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

NQ75 IS YOUR CHILD MALE OR FEMALE?

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NQ75																			
MALE	160	2948	21	51	48	40	39						8	80	71	143	8	127	33
	52%	52%	50%~	60%	47%	51%	55%	~	~	~	~	~	53%~	54%	52%	52%~	57%~	52%	51%
FEMALE	148	2690	21	34	54	39	32						7	67	66	131	6	116	32
	48%	48%	50%~	40%	53%	49%	45%	~	~	~	~	~	47%~	46%	48%	48%~	43%~	48%	49%
VALID CASES	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	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]

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q76																			
HISPANIC OR LATINO	147	2037	23	44	48	32								147		134	12	130	17
	52%	40%*	62%~	57%	51%	43%	~	~	~	~	~	~		~100%~	~	50%~	86%~	59%*	26%*
NOT HISPANIC OR LATINO	137	3094	14	33	47	43	70						13		137	134	2	89	48
	48%	60%*	38%~	43%	49%	57%	100%~	~	~	~	~		~100%~		~100%~	50%~	14%~	41%*	74%*
NOT ANSWERED	24	507	5	8	7	4	1						2			6		24	
VALID CASES	284	5131	37	77	95	75	70						13	147	137	268	14	219	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	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	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.1																			
YES	128	2548	16	29	46	37	71						13	44	81	122	5	93	35
	42%	45%	38%~	34%	45%	47%	100%~	~	~	~	~	~	87%~	30%*	59%*	45%~	36%~	38%*	54%*
NO	180	3090	26	56	56	42							2	103	56	152	9	150	30
	58%	55%	62%~	66%	55%	53%	~	~	~	~	~	~	13%~	70%*	41%*	55%~	64%~	62%*	46%*
VALID CASES	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.2																			
YES	2	139	1		1								1		2	2		2	
	0.6%	2%*	2%~	~	1%	~	~	~	~	~	~	~	7%~	~	1%	0.7%~	~	0.8%	~
NO	306	5499	41	85	101	79	71						14	147	135	272	14	241	65
	99%	98%*	98%~	100%~	99%	100%~	100%~	~	~	~	~	~	93%~	100%~	99%~	99%~	100%~	99%	100%~
VALID CASES	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.3																			
YES	5	186	2	1	2								2	1	4	5		3	2
	2%	3%*	5%~	1%	2%	~	~	~	~	~	~	~	13%~	0.7%	3%	2%~	~	1%	3%
NO	303	5452	40	84	100	79	71						13	146	133	269	14	240	63
	98%	97%*	95%~	99%	98%	100%~	100%~	~	~	~	~	~	87%~	99%	97%	98%~	100%~	99%	97%
VALID CASES	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.4																			
YES	5	61	1	1	2	1							3	2	3	5		3	2
	2%	1%	2%~	1%	2%	1%	~	~	~	~	~	~	20%~	1%	2%	2%~	~	1%	3%
NO	303	5577	41	84	100	78	71						12	145	134	269	14	240	63
	98%	99%	98%~	99%	98%	99%	100%~	~	~	~	~	~	80%~	99%	98%	98%~	100%~	99%	97%
VALID CASES	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

			AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.5																			
YES	11	168	1	1	5	4							7	2	9	11		7	4
	4%	3%	2%~	1%	5%	5%	~	~	~	~	~	~	47%~	1%*	7%*	4%~	~	3%	6%
NO	297	5470	41	84	97	75	71						8	145	128	263	14	236	61
	96%	97%	98%~	99%	95%	95%	100%~	~	~	~	~	~	53%~	99%*	93%*	96%~	100%~	97%	94%
VALID CASES	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.6																			
YES	32	486	3	10	10	9							7	25	5	31	1	28	4
	10%	9%	7%~	12%	10%	11%	~	~	~	~	~	~	47%~	17%*	4%*	11%~	7%~	12%	6%
NO	276	5152	39	75	92	70	71						8	122	132	243	13	215	61
	90%	91%	93%~	88%	90%	89%	100%~	~	~	~	~	~	53%~	83%*	96%*	89%~	93%~	88%	94%
VALID CASES	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

Q78 WHAT IS YOUR AGE?

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q78																			
UNDER 18	12	196	3	1	4	4	7						1	4	7	11		11	1
	4%	4%	8%~	1%*	4%	5%	10%*	~	~	~	~	~	7%~	3%	5%	4%~	~	5%	2%
18 TO 24	12	176	6	4	1	1	2						3	7	5	12		8	4
	4%	3%	15%~	5%	1%*	1%	3%	~	~	~	~	~	20%~	5%	4%	4%~	~	4%	6%
25 TO 34	92	1691	21	44	23	4	22						2	47	43	90	2	75	17
	32%	33%	54%~	56%*	24%*	5%*	31%	~	~	~	~	~	13%~	32%	32%	33%~	14%~	34%	26%
35 TO 44	114	2049	9	27	46	32	25						5	63	50	107	6	89	25
	40%	40%	23%~	34%	49%*	43%	35%	~	~	~	~	~	33%~	43%	37%	40%~	43%~	40%	38%
45 TO 54	44	738		3	17	24	8						4	21	22	39	5	29	15
	15%	14%	~	4%*	18%	32%*	11%	~	~	~	~	~	27%~	14%	16%	14%~	36%~	13%	23%
55 TO 64	6	229			2	4	3							2	4	5	1	4	2
	2%	4%*	~	~	2%	5%	4%	~	~	~	~	~	~	1%	3%	2%~	7%~	2%	3%
65 TO 74	6	87			1	5	4							1	5	6		5	1
	2%	2%	~	~	1%	7%*	6%	~	~	~	~	~		~0.7%	4%	2%~	~	2%	2%
75 OR OLDER		15																	
		0.3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	22	457	3	6	8	5								2	1	4		22	
VALID CASES	286	5181	39	79	94	74	71						15	145	136	270	14	221	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

Q79 ARE YOU MALE OR FEMALE?

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q79																			
MALE	42	711	3	13	13	13	10						2	19	22	39	2	32	10
	15%	14%	8%~	17%	14%	18%	14%	~	~	~	~	~	13%~	13%	16%	14%~	15%~	15%	16%
FEMALE	242	4484	36	64	81	61	61						13	124	114	230	11	188	54
	85%	86%	92%~	83%	86%	82%	86%	~	~	~	~	~	87%~	87%	84%	86%~	85%~	85%	84%
NOT ANSWERED	24	443	3	8	8	5								4	1	5	1	23	1
VALID CASES	284	5195	39	77	94	74	71						15	143	136	269	13	220	64
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q80																			
8TH GRADE OR LESS	44	593	5	11	15	13								42	2	36	8	36	8
	16%	12%	13%~	14%	16%	18%	~	~	~	~	~	~	~	29%*	1%*	13%~	57%~	17%	13%
SOME HIGH SCHOOL BUT	31	565	5	9	10	7	1						1	23	8	29	2	25	6
DID NOT GRADUATE	11%	11%	13%~	12%	11%	10%	1%*	~	~	~	~	~	7%~	16%*	6%*	11%~	14%~	11%	9%
HIGH SCHOOL GRADUATE	83	1483	14	23	29	17	16						3	48	33	82	1	73	10
OR GED	29%	29%	37%~	29%	31%	24%	23%	~	~	~	~	~	20%~	34%	24%	31%~	7%~	33%*	16%*
SOME COLLEGE OR 2-YEAR	89	1722	13	22	28	26	33						9	26	61	87	1	62	27
DEGREE	32%	33%	34%~	28%	30%	36%	48%*	~	~	~	~	~	60%~	18%*	45%*	33%~	7%~	28%*	42%*
4-YEAR COLLEGE GRADUATE	23	491		10	8	5	11						1	3	20	22	1	14	9
	8%	10%	~	13%	9%	7%	16%*	~	~	~	~	~	7%~	2%*	15%*	8%~	7%~	6%	14%
MORE THAN 4-YEAR	12	290	1	3	4	4	8						1	1	11	11	1	8	4
COLLEGE DEGREE	4%	6%	3%~	4%	4%	6%	12%*	~	~	~	~	~	7%~	0.7%*	8%*	4%~	7%~	4%	6%
NOT ANSWERED	26	495	4	7	8	7	2							4	2	7		25	1
VALID CASES	282	5143	38	78	94	72	69						15	143	135	267	14	218	64
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

Q81 HOW ARE YOU RELATED TO THE CHILD?

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q81																			
MOTHER OR FATHER	267	4883	39	77	86	65	61						14	140	122	254	12	210	57
	94%	95%	100%~	97%	91%	92%	88%	~	~	~	~	~	93%~	97%*	91%*	95%~	86%~	96%*	88%*
GRANDPARENT	7	145		1	3	3	4							2	5	6	1	4	3
	2%	3%	~	1%	3%	4%	6%	~	~	~	~	~	~	1%	4%	2%~	7%~	2%	5%
AUNT OR UNCLE	1	13			1		1								1	1		1	
	0.4%	0.2%	~	~	1%	~	1%~	~	~	~	~	~	~		~0.7%~	0.4%~		~0.5%~	~
OLDER BROTHER OR SISTER	1	12			1									1		1			1
	0.4%	0.2%	~	~	1%	~	~	~	~	~	~	~		~0.7%		~0.4%~		~	~ 2%~
OTHER RELATIVE		4																	
		0.1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
LEGAL GUARDIAN	2	51			1	1	1						1		2	2		1	1
	0.7%	1%	~	~	1%	1%	1%	~	~	~	~	~	7%~	~	1%~	0.7%~		~0.5%	2%
SOMEONE ELSE	5	36		1	2	2	2							1	4	4	1	2	3
	2%	0.7%	~	1%	2%	3%	3%	~	~	~	~	~		~0.7%	3%	1%~	7%~	0.9%	5%
NOT ANSWERED	25	494	3	6	8	8	2							3	3	6		25	
VALID CASES	283	5144	39	79	94	71	69						15	144	134	268	14	218	65
NUMBER OF RESPONDENTS	308	5638	42	85	102	79	71						15	147	137	274	14	243	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q82																			
YES	7	143			5	2	2							4	3	6	1	4	3
	4%	4%	~	~	8%	4%~	3%	~	~	~	~	~	~	5%	3%	4%~	14%~	3%~	8%~
NO	164	3143	19	46	55	44	69						12	78	83	156	6	128	36
	96%	96%	100%~	100%~	92%	96%~	97%	~	~	~	~		~100%~	95%	97%	96%~	86%~	97%~	92%~
NOT ANSWERED	6	43			2	4								4	1	5		6	
VALID CASES	171	3286	19	46	60	46	71						12	82	86	162	7	132	39
NUMBER OF RESPONDENTS	177	3329	19	46	62	50	71						12	86	87	167	7	138	39
	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	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.1																			
YES	5	56			4	1	1							3	2	4	1	2	3
	71%	41%~	~	~	80%~	50%~	50%~	~	~	~	~	~	~	75%~	67%~	67%~	100%~	50%~	100%~
NO	2	79			1	1	1							1	1	2		2	
	29%	59%~	~	~	20%~	50%~	50%~	~	~	~	~	~	~	25%~	33%~	33%~	~	50%~	~
VALID CASES	7	135			5	2	2							4	3	6	1	4	3
NUMBER OF RESPONDENTS	7	135			5	2	2							4	3	6	1	4	3
	100%	100%			100%	100%	100%							100%	100%	100%	100%	100%	100%

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

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.2																			
YES	4	44			2	2	2							2	2	3	1	2	2
	57%	32%~	~	~	40%~	100%~	100%~	~	~	~	~	~	~	50%~	67%~	50%~	100%~	50%~	67%~
NO	3	91			3									2	1	3		2	1
	43%	68%~	~	~	60%~	~	~	~	~	~	~	~	~	50%~	33%~	50%~	~	50%~	33%~
VALID CASES	7	135			5	2	2							4	3	6	1	4	3
NUMBER OF RESPONDENTS	7	135			5	2	2							4	3	6	1	4	3
	100%	100%			100%	100%	100%							100%	100%	100%	100%	100%	100%

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

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.3																			
YES		11																	
		8%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	7	124			5	2	2							4	3	6	1	4	3
	100%	92%~	~	~	100%~	100%~	100%~	~	~	~	~	~	~	100%~	100%~	100%~	100%~	100%~	100%~
VALID CASES	7	135			5	2	2							4	3	6	1	4	3
NUMBER OF RESPONDENTS	7	135			5	2	2							4	3	6	1	4	3
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.4																			
YES	1	76			1									1		1		1	
	14%	56%~	~	~	20%~	~	~	~	~	~	~	~	~	25%~	~	17%~	~	25%~	~
NO	6	59			4	2	2							3	3	5	1	3	3
	86%	44%~	~	~	80%~	100%~	100%~	~	~	~	~	~	~	75%~	100%~	83%~	100%~	75%~	100%~
VALID CASES	7	135			5	2	2							4	3	6	1	4	3
NUMBER OF RESPONDENTS	7	135			5	2	2							4	3	6	1	4	3
	100%	100%			100%	100%	100%							100%	100%	100%	100%	100%	100%

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

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.5																			
YES		7																	
		5%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	7	128			5	2	2							4	3	6	1	4	3
	100%	95%~	~	~	100%~	100%~	100%~	~	~	~	~	~	~	100%~	100%~	100%~	100%~	100%~	100%~
VALID CASES	7	135			5	2	2							4	3	6	1	4	3
NUMBER OF RESPONDENTS	7	135			5	2	2							4	3	6	1	4	3
	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							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NQ14																			
0-6	23	307		8	9	6	5						2	11	12	22	1	16	7
	11%	8%	~	14%	15%	10%	10%	~	~	~	~	~	15%~	12%	12%	12%~	9%~	11%	13%
7-8	53	1107	10	13	13	17	16						4	20	29	49	3	39	14
	26%	30%	34%~	23%	22%	29%	31%	~	~	~	~	~	31%~	22%	30%	27%~	27%~	26%	26%
9-10	126	2234	19	35	37	35	30						7	62	55	111	7	94	32
	62%	61%	66%~	62%	63%	60%	59%	~	~	~	~	~	54%~	67%	57%	61%~	64%~	63%	60%
VALID CASES	202	3648	29	56	59	58	51						13	93	96	182	11	149	53
NUMBER OF RESPONDENTS	202	3648	29	56	59	58	51						13	93	96	182	11	149	53
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%
MEAN	2.51	2.53	2.66	2.48	2.47	2.50	2.49						2.38	2.55	2.45	2.49	2.55	2.52	2.47
p stat_(*=Sig @ p<=.05)		.689	~	.726	.659	.897	.812	~	~	~	~	~	~	.469	.229	~	~	.642	.642

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NQ41																			
0-6	22	330	4	9	7	2	6						1	13	7	21	1	16	6
	9%	7%	11%~	14%	9%	4%*	10%	~	~	~	~	~	8%~	11%	6%	10%~	9%~	9%	10%
7-8	42	960	4	12	16	10	9						2	18	21	38	2	33	9
	18%	22%	11%~	18%	20%	18%	15%	~	~	~	~	~	15%~	16%	19%	17%~	18%~	18%	16%
9-10	175	3168	30	45	57	43	45						10	84	85	162	8	132	43
	73%	71%	79%~	68%	71%	78%	75%	~	~	~	~	~	77%~	73%	75%	73%~	73%~	73%	74%
VALID CASES	239	4459	38	66	80	55	60						13	115	113	221	11	181	58
NUMBER OF RESPONDENTS	239	4459	38	66	80	55	60						13	115	113	221	11	181	58
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%
MEAN	2.64	2.64	2.68	2.55	2.63	2.75	2.65						2.69	2.62	2.69	2.64	2.64	2.64	2.64
p stat_(*=Sig @ p<=.05)		.923	~	.162	.797	.114	.892	~	~	~	~	~	~	.603	.258	~	~	.976	.976

[ASKED IF Q30 = YES]

NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NQ48																			
0-6	3	88		2	1		1							1	2	3		1	2
	9%	12%~	~	20%~	10%~	~	11%~	~	~	~	~	~	~	7%~	11%~	10%~	~	7%~	11%~
7-8	10	175	1	3	3	3	2						2	4	6	10		7	3
	30%	24%~	50%~	30%~	30%~	27%~	22%~	~	~	~	~	~	67%~	29%~	32%~	33%~	~	50%~	16%~
9-10	20	456	1	5	6	8	6						1	9	11	17	3	6	14
	61%	63%~	50%~	50%~	60%~	73%~	67%~	~	~	~	~	~	33%~	64%~	58%~	57%~	100%~	43%~	74%~
VALID CASES	33	718	2	10	10	11	9						3	14	19	30	3	14	19
NUMBER OF RESPONDENTS	33	718	2	10	10	11	9						3	14	19	30	3	14	19
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%
MEAN	2.52	2.51	2.50	2.30	2.50	2.73	2.56						2.33	2.57	2.47	2.47	3.00	2.36	2.63
p stat_(*=Sig @ p<=.05)		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

NQ54 RATING OF CHILD'S HEALTH PLAN

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NQ54																			
0-6	38	696	2	14	9	13	12						2	14	23	34	3	26	12
	13%	13%	5%~	18%	10%	17%	17%	~	~	~	~	~	13%~	10%	17%	13%~	21%~	12%	18%
7-8	86	1488	9	21	31	25	29						7	24	60	83	3	63	23
	30%	29%	23%~	27%	33%	32%	41%*	~	~	~	~	~	47%~	16%*	44%*	31%~	21%~	28%	35%
9-10	165	3026	29	43	54	39	29						6	108	53	154	8	135	30
	57%	58%	73%~	55%	57%	51%	41%*	~	~	~	~	~	40%~	74%*	39%*	57%~	57%~	60%*	46%*
VALID CASES	289	5210	40	78	94	77	70						15	146	136	271	14	224	65
NUMBER OF RESPONDENTS	289	5210	40	78	94	77	70						15	146	136	271	14	224	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%
MEAN	2.44	2.45	2.68	2.37	2.48	2.34	2.24						2.27	2.64	2.22	2.44	2.36	2.49	2.28
p stat_(*=Sig @ p<=.05)		.857	~	.330	.504	.161	.008*	~	~	~	~	~	~	.000*	.000*	~	~	.051	.049*

GETTING NEEDED CARE

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NPRBSEE4 NQ46	2.24	2.21	2.00	2.00	2.27	2.55	2.22						2.67	2.28	2.20	2.17	3.00	2.11	2.35
p stat_(*=Sig @ p<=.05)		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCARNES4 NQ15	2.51	2.45	2.62	2.47	2.53	2.48	2.65						2.46	2.44	2.57	2.52	2.27	2.51	2.52
p stat_(*=Sig @ p<=.05)		.181	~	.618	.780	.662	.059	~	~	~	~	~	~	.121	.236	~	~	.962	.962
COMPOSITE	2.38	2.33	2.31	2.24	2.40	2.51	2.43	x	x	x	x	x	2.56	2.36	2.39	2.35	2.64	2.31	2.43
p stat_(*=Sig @ p<=.05)		.532	~	.253	.816	.290	.659	~	~	~	~	~	~	.810	.898	~	~	.164	.645

GETTING CARE QUICKLY

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NCARSN4 NQ4	2.63	2.68	2.80	2.45	2.67	2.63	2.75						2.70	2.45	2.75	2.62	2.55	2.60	2.68
p stat_(*=Sig @ p<=.05)		.441	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NAPGET4 NQ6	2.38	2.42	2.57	2.17	2.43	2.45	2.47						2.21	2.32	2.39	2.35	2.60	2.37	2.43
p stat_(*=Sig @ p<=.05)		.490	~	.022*	.546	~	~	~	~	~	~	~	~	.300	.861	~	~	~	~
COMPOSITE	2.50	2.55	2.68	2.31	2.55	2.54	2.61	x	x	x	x	x	2.46	2.38	2.57	2.48	2.57	2.49	2.55
p stat_(*=Sig @ p<=.05)		.667	~	.246	.785	.865	.578	~	~	~	~	~	~	.309	.570	~	~	.769	.795

HOW WELL DOCTORS COMMUNICATE

			AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NDREXPL4 NQ32	2.59	2.70	2.60	2.66	2.54	2.56	2.86						2.83	2.41	2.78	2.59	2.50	2.52	2.77
p stat_(*=Sig @ p<=.05)		.035*		~.389	.563	~	~	~	~	~	~	~	~	~.001*	.001*	~	~	~	~
NDRLSTN4 NQ33	2.80	2.73	2.73	2.88	2.80	2.74	2.86						2.83	2.79	2.85	2.80	2.88	2.78	2.85
p stat_(*=Sig @ p<=.05)		.070		~.085	.968	~	~	~	~	~	~	~	~	~.801	.210	~	~	~	~
NDRESPU4 NQ34	2.79	2.79	2.67	2.74	2.86	2.86	2.88						2.92	2.74	2.85	2.79	2.75	2.77	2.85
p stat_(*=Sig @ p<=.05)		.961		~.384	.173	~	~	~	~	~	~	~	~	~.189	.175	~	~	~	~
NDRTMEN4 NQ37	2.51	2.50	2.48	2.50	2.52	2.53	2.74						2.73	2.34	2.68	2.50	2.38	2.48	2.58
p stat_(*=Sig @ p<=.05)		.786		~.891	.921	~	~	~	~	~	~	~	~	~.002*	.004*	~	~	~	~
COMPOSITE	2.67	2.68	2.62	2.70	2.68	2.67	2.83	x	x	x	x	x	2.83	2.57	2.79	2.67	2.63	2.64	2.77
p stat_(*=Sig @ p<=.05)		.947		~.922	.974	~	~	~	~	~	~	~	~	~.491	.469	~	~	~	~

CUSTOMER SERVICE

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NPBCLCS4 NQ50	2.34	2.30	2.37	2.29	2.36	2.35	2.25						2.67	2.42	2.16	2.34	2.40	2.31	2.44
p stat_(*=Sig @ p<=.05)		.640	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ51	2.58	2.62	2.53	2.46	2.64	2.71	2.56						3.00	2.62	2.50	2.58	2.60	2.60	2.50
p stat_(*=Sig @ p<=.05)		.590	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.46	2.46	2.45	2.38	2.50	2.53	2.41	x	x	x	x	x	2.83	2.52	2.33	2.46	2.50	2.45	2.47
p stat_(*=Sig @ p<=.05)		1.00	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
NNRXWHY NQ11	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
p stat_(*=Sig @ p<=.05)		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NNRXWYNT NQ12	2.25	2.41	2.25	2.07	2.33	2.33	2.25						3.00	2.10	2.38	2.23	2.60	1.85	2.60
p stat_(*=Sig @ p<=.05)		.217	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NRXBST NQ13	2.56	2.60	2.75	2.71	2.56	2.33	2.37						3.00	2.60	2.61	2.65	2.60	2.38	2.72
p stat_(*=Sig @ p<=.05)		.757	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.41	2.51	2.50	2.39	2.44	2.33	2.31	x	x	x	x	x	3.00	2.35	2.49	2.44	2.60	2.12	2.66
p stat_(*=Sig @ p<=.05)		.496	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

ACCESS TO SPECIALIZED SERVICES

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NEZMDEQ NQ20	2.00	2.28	1.00	3.00	2.25	1.67	1.00							2.40	1.00	2.00	1.50	2.50	1.60
p stat_(*=Sig @ p<=.05)		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTHP NQ23	2.15	2.12	3.00	2.00	2.25	2.00	1.83						3.00	2.30	2.00	2.04	2.67	2.23	2.07
p stat_(*=Sig @ p<=.05)		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTC NQ26	2.63	2.11	3.00	2.33	2.71	2.58	2.38						2.75	3.00	2.45	2.63	2.67	2.85	2.47
p stat_(*=Sig @ p<=.05)		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.26	2.17	2.33	2.44	2.40	2.08	1.74	x	x	x	x	x	2.88	2.57	1.82	2.22	2.28	2.53	2.05
p stat_(*=Sig @ p<=.05)		.522	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

			AGE				RACE							ETHNIC— ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
PRBSEE4 Q46	76%	75%	67%	62%	82%	91%	78%						100%	78%	75%	74%	100%	72%	80%
CARNES4 Q15	91%	88%	90%	84%	97%	91%	98%						85%	87%	93%	91%	82%	91%	89%
AVERAGE	83.45	81.59	78.16	72.59	89.24	91.14	87.91	x	x	x	x	x	92.31	82.51	83.85	82.50	90.91	81.72	84.44

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

			AGE				RACE							ETHNIC— ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
CARSN4 Q4	91%	92%	100%	77%	93%	96%	100%						90%	84%	96%	91%	91%	90%	93%
APGET4 Q6	85%	84%	93%	74%	91%	87%	91%						79%	82%	86%	84%	90%	85%	87%
AVERAGE	88.23	88.10	96.67	75.43	91.95	91.53	95.56	x	x	x	x	x	84.29	83.18	90.77	87.43	90.45	87.52	90.05

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
DREXPL4 Q32	87%	93%	87%	90%	84%	86%	98%						100%	80%	94%	87%	88%	85%	92%
DRLSTN4 Q33	97%	95%	93%	100%	96%	95%	95%						100%	98%	97%	97%	100%	97%	96%
DRESPU4 Q34	96%	96%	90%	94%	100%	98%	95%						100%	98%	95%	96%	100%	95%	98%
DRTMEN4 Q37	88%	87%	86%	86%	86%	93%	95%						91%	84%	92%	87%	88%	87%	90%
AVERAGE	91.7	92.6	89.1	92.5	91.5	93.0	95.8	x	x	x	x	x	97.7	89.7	94.6	91.6	93.8	91.0	93.8

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

			AGE				RACE							ETHNIC— ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
PBCLCS4 Q50	81%	79%	88%	75%	88%	76%	75%						100%	87%	71%	81%	80%	81%	83%
CSRESP Q51	91%	91%	100%	86%	92%	88%	88%						100%	96%	80%	91%	80%	93%	83%
AVERAGE	85.99	85.33	93.75	80.36	90.00	82.35	81.25	x	x	x	x	x	100.0	91.35	75.48	86.19	80.00	86.71	83.33

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NRXWHY Q11	86%	93%	63%	80%	95%	93%	100%						100%	65%	100%	88%	60%	77%	94%
NRXWYNT Q12	62%	71%	63%	53%	67%	67%	63%						100%	55%	69%	62%	80%	42%	80%
RXBST Q13	78%	80%	88%	86%	78%	67%	69%						100%	80%	81%	83%	80%	69%	86%
AVERAGE	75.5	81.2	70.8	73.0	79.7	75.6	77.1	x	x	x	x	x	100	66.7	83.1	77.3	73.3	62.8	86.6

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

			AGE				RACE							ETHNIC— ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
EZMDEQ Q20	56%	74%	0%	100%	75%	33%	0%							80%	0%	50%	50%	75%	40%
EZTHP Q23	67%	68%	100%	56%	75%	63%	50%						100%	70%	63%	61%	100%	69%	64%
EZTC Q26	90%	66%	100%	67%	100%	83%	88%						100%	100%	85%	89%	100%	92%	88%
AVERAGE	70.7	69.4	x	61.1	83.3	59.7	68.8	x	x	x	x	x	100	83.3	49.2	66.6	100	78.8	64.2

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

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
DRTLKU Q38	87%	86%	93%	90%	90%	74%	90%						75%	87%	87%	87%	88%	90%	77%
DRUNCON Q43	94%	89%	100%	82%	95%	100%	91%						100%	92%	95%	96%	86%	90%	95%
DRUNFAM Q44	86%	87%	100%	73%	86%	93%	82%						100%	73%	90%	87%	80%	78%	88%
AVERAGE	89.0	87.3	97.7	81.5	90.5	89.3	87.7	x	x	x	x	x	91.7	83.8	90.8	89.7	84.4	86.0	86.8

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
HELPCONT Q18	95%	89%	100%	100%	86%	100%	100%						100%	86%	100%	95%		90%	100%
HLPCOORD Q29	52%	57%	25%	50%	61%	50%	63%						17%	57%	50%	52%	50%	37%	66%
AVERAGE	73.6	73.0	25.0	75.0	73.4	75.0	81.6	x	x	x	x	x	58.3	71.4	75.0	73.6	50.0	63.5	82.8

INDEX OF ADULT TABLES

PAGE	QUESTION	TITLE
1. INTRODUCTION		
1	Q1	OUR RECORDS SHOW THAT YOU ARE NOW IN <HEALTH PLAN>. IS THAT RIGHT?
2. YOUR HEALTH CARE IN THE LAST 6 MONTHS		
2	Q3	IN THE LAST 6 MONTHS, DID YOU HAVE AN ILLNESS, INJURY, OR CONDITION THAT NEEDED CARE RIGHT AWAY IN A CLINIC, EMERGENCY ROOM OR DOCTOR'S OFFICE?
3	Q4	IN THE LAST 6 MONTHS, WHEN YOU NEEDED CARE RIGHT AWAY, HOW OFTEN DID YOU GET CARE AS SOON AS YOU NEEDED? [ASKED IF Q3 = YES]
4	Q5	IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS FOR A CHECK-UP OR ROUTINE CARE AT A DOCTOR'S OFFICE OR CLINIC?
5	Q6	IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT FOR A CHECK-UP OR ROUTINE CARE AT A DOCTOR'S OFFICE OR CLINIC AS SOON AS YOU NEEDED? [ASKED IF Q5 = YES]
6	Q7	IN THE LAST 6 MONTHS, NOT COUNTING THE TIMES YOU WENT TO AN EMERGENCY ROOM, HOW MANY TIMES DID YOU GO TO A DOCTOR'S OFFICE OR CLINIC TO GET HEALTH CARE FOR YOURSELF?
7	Q8	IN THE LAST 6 MONTHS, DID YOU AND A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT SPECIFIC THINGS YOU COULD DO TO PREVENT ILLNESS? [ASKED IF Q7 >= 1 TIME]
8	Q9	IN THE LAST 6 MONTHS, DID YOU AND A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE? [ASKED IF Q7 >= 1 TIME]
9	Q10	DID YOU AND A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT WANT TO TAKE A MEDICINE? [ASKED IF Q7 >= 1 TIME AND Q9 = YES]
10	Q11	DID YOU AND A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT NOT WANT TO TAKE A MEDICINE? [ASKED IF Q7 >= 1 TIME AND Q9 = YES]
11	Q12	WHEN YOU TALKED ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE, DID A DOCTOR OR OTHER HEALTH PROVIDER ASK YOU WHAT YOU THOUGHT WAS BEST FOR YOU? [ASKED IF Q7 >= 1 TIME AND Q9 = YES]
12	Q13	USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH CARE POSSIBLE AND 10 IS THE BEST HEALTH CARE POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE ALL YOUR HEALTH CARE IN THE LAST 6 MONTHS? [ASKED IF Q7 >= 1 TIME]
13	Q14	IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THE CARE, TESTS OR TREATMENT YOU NEEDED? [ASKED IF Q7 >= 1 TIME]

PAGE	QUESTION	TITLE

3. YOUR PERSONAL DOCTOR

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

4. GETTING HEALTH CARE FROM SPECIALISTS

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

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

PAGE	QUESTION	TITLE
5. ADDITIONAL QUESTIONS		
39	Q35E	IN THE LAST 6 MONTHS, DID YOU VISIT A PROVIDER FOR A SPECIFIC HEALTH ISSUE?
40	Q35F	HOW MUCH EFFORT WAS MADE TO HELP YOU UNDERSTAND YOUR HEALTH ISSUE? [ASKED IF Q35E = YES]
41	Q35G	HOW MUCH EFFORT WAS MADE TO LISTEN TO THE THINGS THAT MATTER MOST TO YOU ABOUT YOUR HEALTH ISSUE? [ASKED IF Q35E = YES]
42	Q35H	HOW MUCH EFFORT WAS MADE TO INCLUDE WHAT MATTERS MOST TO YOU IN CHOOSING WHAT TO DO NEXT? [ASKED IF Q35E = YES]
43	Q35I	CHOICES FOR YOUR TREATMENT OR HEALTH CARE CAN INCLUDE CHOICES ABOUT MEDICINE, SURGERY, OR OTHER TREATMENT. IN THE LAST 6 MONTHS, DID THIS PROVIDER TELL YOU THERE WAS MORE THAN ONE CHOICE FOR YOUR TREATMENT OR HEALTH CARE?
44	Q35J	IN THE LAST 6 MONTHS, DID YOUR PROVIDER TALK WITH YOU ABOUT THE PROS AND CONS OF EACH CHOICE FOR YOUR TREATMENT OR HEALTH CARE? [ASKED IF Q35I = YES]
45	Q35K	IN THE LAST 6 MONTHS, WHEN THERE WAS MORE THAN ONE CHOICE FOR YOUR TREATMENT OR HEALTH CARE, DID YOUR PROVIDER ASK YOU WHICH CHOICE WAS BEST FOR YOU? [ASKED IF Q35I = YES]
46	Q35L	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PROVIDER MAKE IT EASY FOR YOU TO ASK QUESTIONS OR RAISE CONCERNS?
47	Q35M	IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER TALK TOO FAST WHEN TALKING TO YOU?
48	Q35N	IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER INTERRUPT YOU WHEN YOU WERE TALKING?
49	Q35O	IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER USE A CONDESCENDING, SARCASTIC, OR RUDE TONE OR MANNER WITH YOU?
50	Q35P	IN THE LAST 6 MONTHS, DID YOU FEEL YOU COULD TRUST A DOCTOR OR OTHER HEALTH PROVIDER WITH YOUR MEDICAL CARE?
5. ACCESS TO DENTAL CARE		
51	Q35Q	A REGULAR DENTIST IS ONE YOU WOULD GO TO FOR CHECK-UPS AND CLEANINGS OR WHEN YOU HAVE A CAVITY OR TOOTH PAIN. DO YOU HAVE A REGULAR DENTIST?
52	Q35R	IN THE LAST 6 MONTHS, IF YOU NEEDED TO SEE A DENTIST RIGHT AWAY BECAUSE OF A DENTAL EMERGENCY, DID YOU GET TO SEE A DENTIST AS SOON AS YOU WANTED?

PAGE	QUESTION	TITLE
6. ABOUT YOU		
53	Q36	IN GENERAL, HOW WOULD YOU RATE YOUR OVERALL HEALTH?
54	Q37	IN GENERAL, HOW WOULD YOU RATE YOUR OVERALL MENTAL OR EMOTIONAL HEALTH?
55	Q38	HAVE YOU HAD EITHER A FLU SHOT OR FLU SPRAY IN THE NOSE SINCE JULY 1, 2015?
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

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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 PRESCRITION 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***

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

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

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

- ○ Yes
- ○ No ➔ ***Go to Question 35c***

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

- ○ Yes
- ○ No ➔ ***Go to Question 35e***

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

ADDITIONAL QUESTIONS

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

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

- ○ Yes
- ○ No ➔ ***Go to Question 35i***

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

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

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

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

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

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

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

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

- ○ Yes
- ○ No ➔ ***Go to Question 35l***

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

- ○ Yes
- ○ No

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

- ○ Yes
- ○ No

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

- ○ Yes, definitely
- ○ Yes, somewhat
- ○ No

ACCESS TO DENTAL CARE

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

- ○ Yes
- ○ No

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

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

ABOUT YOU

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

- ○ Excellent
- ○ Very Good
- ○ Good
- ○ Fair
- ○ Poor

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

- ○ Excellent
- ○ Very Good
- ○ Good
- ○ Fair
- ○ Poor

38. Have you had either a flu shot or flu spray in the nose since July 1, 2015?

- ○ Yes
- ○ No
- ○ Don't know

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

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

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

- ○ Yes
- ○ No
- ○ Don't know

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

- ○ Yes
- ○ No
- ○ Don't know

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

- ○ Yes
- ○ No

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

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

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

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

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

- ○ Yes
- ○ No ➔ ***Go to Question 50***

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

- ○ Yes
- ○ No

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

- ○ Yes
- ○ No ➔ ***Go to Question 52***

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

- ○ Yes
- ○ No

52. What is your age?

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

53. Are you male or female?

- ○ Male
- ○ Female

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

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

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

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

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

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

_____

57. Did someone help you complete this survey?

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

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

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

_____

THANK YOU

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

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

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

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

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

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Correct Mark ● **Incorrect Marks**

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

● **Yes** ➔ ***Go to Question 1***
○ **No**

⬇ START HERE ⬇

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

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

   ○ Yes ➔ ***Go to Question 3***
   ○ No

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

   _____

YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS

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

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

- ○ Yes
- ○ No ➔ ***Go to Question 5***

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

- ○ Yes
- ○ No ➔ ***Go to Question 7***

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

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

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

- ○ Yes
- ○ No

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

- ○ Yes
- ○ No ➔ ***Go to Question 14***

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

- ○ Yes
- ○ No

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

- ○ Yes
- ○ No

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

- ○ Yes
- ○ No

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

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

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

- ○ Yes
- ○ No ➔ ***Go to Question 19***

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

- ○ Yes
- ○ No ➔ ***Go to Question 19***

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

- ○ Yes
- ○ No

SPECIALIZED SERVICES

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

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

- ○ Yes
- ○ No ➔ ***Go to Question 22***

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

- ○ Yes
- ○ No

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

- ○ Yes
- ○ No ➔ ***Go to Question 25***

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

- ○ Yes
- ○ No

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

- ○ Yes
- ○ No ➔ ***Go to Question 28***

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

- ○ Yes
- ○ No

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

- ○ Yes
- ○ No ➔ ***Go to Question 30***

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

- ○ Yes
- ○ No

YOUR CHILD'S PERSONAL DOCTOR

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

- ○ Yes
- ○ No ➔ ***Go to Question 45***

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

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

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

- ○ Yes
- ○ No ➔ ***Go to Question 37***

36. In the last 6 months, how often did your child's personal doctor explain things in a way that was easy for <u>your child</u> 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 <u>3 months</u>?

- ○ Yes
- ○ No ➔ ***Go to Question 45***

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

- ○ Yes
- ○ No

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

- ○ Yes
- ○ No

GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

- ○ Yes
- ○ No ➔ ***Go to Question 49***

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

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

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

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

YOUR CHILD'S HEALTH PLAN

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

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

- ○ Yes
- ○ No ➔ ***Go to Question 52***

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

- ○ Yes
- ○ No ➔ ***Go to Question 54***

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

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always

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

○	○	○	○	○	○	○	○	○	○	○
0	1	2	3	4	5	6	7	8	9	10
Worst Health Plan Possible										Best Health 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 <u>dental emergency</u>, 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 <u>mental or emotional</u> 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 <u>your child's</u> 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 <u>your</u> age?

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

79. Are you male or female?

- ○ Male
- ○ Female

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

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

81. How are you related to the child?

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

82. Did someone help you complete this survey?

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

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

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

_____

THANK YOU

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

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

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

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

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

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

INSTRUCCIONES PARA EL CUESTIONARIO

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

Marca Correcta ● **Marca Incorrecta**

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

● **Sí** ➔ ***Pase a la Pregunta 1***
○ **No**

⬇ COMIENCE AQUI ⬇

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

   ○ Sí ➔ ***Pase a la pregunta 3***
   ○ No

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

   _____

LA ATENCIÓN MÉDICA QUE USTED RECIBIÓ EN LOS ÚLTIMOS 6 MESES

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

3. En los últimos 6 meses, ¿tuvo usted una enfermedad, lesión, o problema de salud para el cual necesitó atención inmediata en una clínica, en una sala de emergencia o en un consultorio médico?

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 5***

4. En los últimos 6 meses, cuando usted necesitó atención inmediata, ¿con qué frecuencia lo atendieron tan pronto como lo necesitaba?

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

5. En los últimos 6 meses, ¿hizo alguna cita para un chequeo o una consulta regular en un consultorio médico o en una clínica?

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 7***

6. En los últimos 6 meses, ¿con qué frecuencia consiguió una cita para un chequeo o una consulta regular en un consultorio médico o en una clínica tan pronto como la necesitaba?

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

7. En los últimos 6 meses, sin contar las veces en que fue a una sala de emergencia, ¿cuántas veces fue a un consultorio médico o a una clínica para recibir atención médica para usted mismo?

- ○ Ninguna vez ➔ ***Pase a la pregunta 15***
- ○ 1 vez
- ○ 2
- ○ 3
- ○ 4
- ○ 5 a 9
- ○ 10 veces o más

8. En los últimos 6 meses, ¿hablaron usted y un doctor u otro profesional médico sobre cosas específicas que usted podría hacer para prevenir enfermedades?

- ○ Sí
- ○ No

9. En los últimos 6 meses, ¿hablaron usted y un doctor u otro profesional médico sobre comenzar o suspender una medicina recetada?

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 13***

10. ¿Hablaron usted y un doctor u otro profesional médico sobre las razones por las que tal vez quiera tomar una medicina?

- ○ Sí
- ○ No

11. ¿Hablaron usted y un doctor u otro profesional médico sobre las razones por las que tal vez no quiera tomar una medicina?

- ○ Sí
- ○ No

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

- ○ Sí
- ○ No

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

○	○	○	○	○	○	○	○	○	○	○
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?

○	○	○	○	○	○	○	○	○	○	○
0	1	2	3	4	5	6	7	8	9	10
El peor doctor personal posible										El mejor doctor personal posible

LA ATENCIÓN MÉDICA QUE RECIBIÓ DE ESPECIALISTAS

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

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

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 28***

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

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

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

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

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

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

SU PLAN DE SALUD

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

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

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 30***

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

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

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

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 33***

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

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

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

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

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

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 35***

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

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

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

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

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

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 35c***

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

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

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

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 35e***

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

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

PREGUNTAS ADICIONALES

Un proveedor de salud puede ser un doctor generalista, un doctor especialista, una enfermera prácticante, 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 problem 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

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 rapido 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 interumpió 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 podrída 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 <u>emergencia dental</u>, ¿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 <u>mental o emocional</u>?

- ○ Excelente
- ○ Muy buena
- ○ Buena
- ○ Regular
- ○ Mala

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

- ○ Sí
- ○ No
- ○ No sé

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

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

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

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

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

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

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

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

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

- ○ Sí
- ○ No
- ○ No sé

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

- ○ Sí
- ○ No
- ○ No sé

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

- ○ Sí
- ○ No

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

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

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

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

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

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 50***

49. ¿Se trata de una enfermedad o problema que ha durado al menos 3 meses? <u>No</u> incluya el embarazo ni la menopausia.

- ○ Sí
- ○ No

50. ¿Necesita o toma ahora alguna medicina recetada por un doctor? <u>No</u> incluya anticonceptivos.

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 52***

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

- ○ Sí
- ○ No

52. ¿Qué edad tiene?

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

53. ¿Es usted hombre o mujer?

- ○ Hombre
- ○ Mujer

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

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

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

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

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

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

_____

57. ¿Le ayudó alguien a completar esta encuesta?

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

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

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

_____

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

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

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

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

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

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

INSTRUCCIONES PARA EL CUESTIONARIO

- **Por favor llene el círculo de su respuesta <u>completamente</u>. Use solamente tinta <u>NEGRA</u> o <u>AZUL</u> 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 <u>su niño</u> de una manera fácil de entender?

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

37. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño pasó suficiente tiempo con su niño?

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

38. En los últimos 6 meses, ¿habló el doctor personal de su niño con usted sobre cómo su niño se estaba sintiendo, estaba creciendo o se estaba comportando?

- ○ Sí
- ○ No

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

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 41***

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

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

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

○	○	○	○	○	○	○	○	○	○	○
0	1	2	3	4	5	6	7	8	9	10
El peor doctor personal posible										El mejor doctor personal posible

42. ¿Tiene su niño alguna condición médica, de comportamiento u otra condición de salud que ha durado por más de <u>3 meses</u>?

- ○ 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 <u>familia</u>?

- ○ Sí
- ○ No

LA ATENCIÓN MÉDICA QUE RECIBIÓ DE ESPECIALISTAS

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

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

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 49***

46. En los últimos 6 meses, ¿con qué frecuencia consiguió una cita con un especialista para su niño tan pronto como él o ella la necesitaba?

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

47. ¿Cuántos especialistas ha visto su niño en los últimos 6 meses?

- ○ Ninguno ➔ ***Pase a la pregunta 49***
- ○ 1 especialista
- ○ 2
- ○ 3
- ○ 4
- ○ 5 especialistas o más

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

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

EL PLAN DE SALUD DE SU NIÑO

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

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

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 52***

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

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

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

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

52. En los últimos 6 meses, ¿le dio el plan de salud de su niño algún formulario para llenar?

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 54***

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

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

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

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

MEDICINAS RECETADAS

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

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 57a***

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

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

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

- ○ Sí
- ○ No

ACCESO A CUIDADO DENTAL

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

- ○ Sí
- ○ No

57b. En los últimos 6 meses, si su niño necesitó ver a un dentista de inmediato por una <u>emergencia dental</u>, ¿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 funcionarian 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 <u>mental o emocional</u> 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 envie la encuesta en el sobre con el porte pagado a:

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

DIAL.SCREEN

DS. INTERVIEWER: YOU MAY DO THE INTERVIEW WITH ONLY THE NAMED RESPONDENT.

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 KNOW PLAN NAME ----------> CK.PLMSTCR
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, 2015?

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 KNOW PLAN NAME ----------> CK.PLMSTCR
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 --> 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 --> 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 --> 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 --> 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 --> 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 --> 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

PBDRLNG
31a. / PBDRLNG

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 --> 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 --> 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 --> 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 --> 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 --> CHCOUNS

WHYSTA
70. / WHYSTA

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

1. YES
2. NO ----------> CHCOUNS

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