



Western Oregon Advanced Health
CAHPS® 5.0 Medicaid Survey

Banner Book Report

June 2014



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METHODOLOGY

Introduction

This banner book report summarizes the results of the 2014 CAHPS® Medicaid survey of Western Oregon Advanced Health members. Western Oregon Advanced Health is one of 17 CCOs that participated in the survey. It was administered over a 10-week period using a mixed-mode (mail and telephone) five-wave protocol. This protocol consisted of a pre-notification letter, an initial survey mailing and reminder postcard to all respondents, followed by a second survey mailing and reminder postcard to non-respondents. Phone follow-up was conducted for members who had not responded to the mailings. Respondents were surveyed in English and Spanish. DataStat administered the survey under contract with the State of Oregon Department of Human Services.

Survey Milestones

Pre-notification letters mailed:	February 12, 2014
1st mailing of survey packets:	February 18, 2014
1st mailing of reminder postcards:	February 25, 2014
2nd mailing of survey packets:	March 25, 2014
2nd mailing of reminder postcards:	April 1, 2014
Phone follow-up start:	April 8, 2014
Mail and phone field terminated:	May 5, 2014

Sampling

The sampling plan for the adult and child surveys called for a random sample of 900 eligible members per CCO in each age group. Adults were defined as members aged 18 years or older and children as 17 years old or younger, both as of December 31, 2013. To be eligible, members had to have been enrolled in Oregon Health Plan for at least six months as of December 31, 2013. The final selected sample consisted of 15,300 adult OHP enrollees and 15,300 child OHP enrollees.

Questionnaires

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

Selection of Cases for Analysis

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

Composites, Overall Ratings, and Measures for Reporting

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

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

Composite: Getting Needed Care

- Q14/14. Got care, tests or treatment you thought you needed
- Q25/28. 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

- Q17/17. Personal doctor explained things in a way that was easy to understand
- Q18/18. Personal doctor listened carefully to you
- Q29/19. Personal doctor showed respect for what you had to say
- Q20/22. Personal doctor spent enough time with you

Composite: Customer Service

- Q31/32. Health plan's customer service gave needed information or help
- Q32/33. Treated with courtesy and respect by health plan's customer service staff

Composite: Shared Decision Making

- Q10/10. Doctor talked about reasons you might want to take a medicine
- Q11/11. Doctor talked about reasons you might not want to take a medicine
- Q12/12. Doctor talked about what you thought was best for you when discussing a medication

Rating Questions

- Q13/13. Rating of all health care
- Q23/26. Rating of personal doctor
- Q27/30. Rating of specialist doctor
- Q42/36. Rating of health plan

Composite: Access to Specialized Services (Child only)

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

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

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

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

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

Comparisons, Statistical Testing, Scoring, and Weighting

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

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

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

Sample Disposition

Category	Adult		Child	
	Western Oregon Advanced Health	Overall	Western Oregon Advanced Health	Overall
**First mailing - sent	900	15300	900	15300
*First mailing - usable survey returned	223	3059	133	2459
Second mailing - sent	660	11718	747	12459
*Second mailing - usable survey returned	71	1039	84	1057
*Phone - usable surveys	83	1456	127	2502
Total - usable surveys	377	5554	344	6018
†Ineligible: According to population criteria‡	12	348	21	362
†Ineligible: Deceased	4	78	0	3
†Ineligible: Mentally or physically unable to complete survey	20	301	0	0
†Ineligible: Language barrier	0	77	1	39
Incorrect address AND incorrect phone number	49	1065	50	991
Refusal/Returned survey blank	40	720	44	783
Nonresponse - Unavailable by mail or phone	398	7157	440	7104
Adjusted Response Rate	43.6%	38.3%	39.2%	40.4%

*Included in response rate numerator

†Excluded from adjusted response rate denominator

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

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

Response/Non-Response Comparison

Presented below is a comparison, by age and gender within each age category, of respondents and non-respondents, all of whom were part of the random sample for the Oregon CAHPS© 2014 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	178 40.6%	131 34.7%	-5.89%
Female	260 59.4%	246 65.3%	5.89%
18-24	107 24.4%	29 7.7%	-16.74%
25-34	115 26.3%	52 13.8%	-12.46%
35-44	77 17.6%	56 14.9%	-2.73%
45-54	59 13.5%	85 22.5%	9.08%
55-64	52 11.9%	99 26.3%	14.39%
65-74	17 3.9%	38 10.1%	6.20%
75 or Older	11 2.5%	18 4.8%	2.26%

Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	256 52.9%	173 50.3%	-2.60%
Female	228 47.1%	171 49.7%	2.60%
<1, 1-3	110 22.7%	67 19.5%	-3.25%
4-7	124 25.6%	99 28.8%	3.16%
8-12	146 30.2%	86 25.0%	-5.17%
13 or older	104 21.5%	92 26.7%	5.26%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLACK OR AFR-	ASIAN IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q1																					
YES	369 100%	5403 100%	25 100%	48 100%	50 100%	81 100%	101 100%	51 100%	296 100%	1 100%	3 100%	1 100%	5 100%	3 100%	43 100%	9 100%	342 100%	168 100%	180 100%	120 100%	237 100%
NOT ANSWERED	8	151			3	1	1	3	8							7	2	6	5	3	
VALID CASES	369	5403	25	48	50	81	101	51	296	1	3	1	5	3	43	9	342	168	180	120	237
NUMBER OF RESPONDENTS	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ AS- PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE					
Q3 YES	185 50%	2419 45%	4 16%	29 60%	32 60%	40 49%	52 51%	24 47%	154 51%	1 100%	1 ~100%	2 40%	2 67%	19 45%	5 56%	174 50%	76 45%	99 54%	57 46%	125 53%	
NO	183 50%	2914 55%	21 84%	19 40%	21 40%	41 51%	49 49%	27 53%	146 49%	3 ~100%	3 ~60%	1 33%	23 55%	4 44%	171 50%	93 55%	83 46%	66 54%	112 47%		
NOT ANSWERED	9	220				1	1	3	4					1	4	1	4	2	3		
VALID CASES	368	5334	25	48	53	81	101	51	300	1	3	1	5	3	42	9	345	169	182	123	237
NUMBER OF RESPONDENTS	377 100%	5554 100%	25 100%	48 100%	53 100%	82 100%	102 100%	54 100%	304 100%	1 100%	3 100%	1 100%	5 100%	3 100%	43 100%	9 100%	349 100%	170 100%	186 100%	125 100%	240 100%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q4 NEVER	6 4%	72 3%	~	2 7%	1 4%	~	2 5%	1 5%	5 4%	~	~	~	~	~	1 5%	~	6 4%	3 5%	3 4%	1 2%	5 5%
SOMETIMES	15 10%	310 15%	25%	1 11%	3 8%	2 9%	3 11%	4 11%	2 11%	10 8%	~	~	~	~	2 16%	3 50%	13 9%	5 8%	10 13%	3 7%	12 12%
USUALLY	54 36%	531 26%*	50%	2 29%	8 29%	9 35%	18 56%	10 27%	5 26%	42 34%	~	~	~	1 100%	9 47%	1 25%	51 36%	22 33%	26 34%	21 46%	31 31%
ALWAYS	75 50%	1161 56%	25%	1 54%	15 54%	14 54%	11 34%	21 57%	11 58%	66 54%	~	~	~	~	6 32%	1 25%	71 50%	36 55%	38 49%	21 46%	53 52%
#ALWAYS + USUALLY (NET)	129 86%	1692 82%	75%	3 82%	23 88%	23 88%	29 91%	31 84%	16 84%	108 88%	~	~	~	1 100%	15 79%	2 50%	122 87%	58 88%	64 83%	42 91%	84 83%
TOP BOX SCORE	75 50%	1161 56%	25%	1 54%	15 54%	14 54%	11 34%	21 57%	11 58%	66 54%	~	~	~	~	6 32%	1 25%	71 50%	36 55%	38 49%	21 46%	53 52%
NOT ANSWERED	35	322		1	6	8	15	5	31	1		1	1			1	33	10	22	11	24
VALID CASES	150	2074	4	28	26	32	37	19	123			1	2	19	4	141	66	77	46	101	
NUMBER OF RESPONDENTS	185 100%	2396 100%	4 100%	29 100%	32 100%	40 100%	52 100%	24 100%	154 100%	1		1	2	2	19 100%	5 100%	174 100%	76 100%	99 100%	57 100%	125 100%

[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							ETHNICITY		HEALTH STATUS		GENDER			
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE				
Q5																							
YES	WORA TOT ADLT	3840	16	37	44	62	86	42	240	1	2	1	3	3	33	7	276	121	159	94	194		
	OHP TOT ADLT	292	80%	72%*	64%~	77%~	83%	78%	86%*	79%	81%	100%~	67%~	100%~	60%~	100%~	77%~	88%~	80%~	72%*	87%*	77%	82%
NO	WORA TOT ADLT	1468	9	11	9	17	14	11	58	1	2	10	1	69	48	23	28	43	28	43			
	OHP TOT ADLT	75	20%	28%*	36%~	23%~	17%	22%	14%*	21%	19%	~ 33%~	~ 40%~	~ 23%~	13%~	20%~	28%*	13%*	23%	18%			
NOT ANSWERED	WORA TOT ADLT	10				3	2	1	6						1	4	1	4	3	3			
VALID CASES	WORA TOT ADLT	367	25	48	53	79	100	53	298	1	3	1	5	3	43	8	345	169	182	122	237		
NUMBER OF RESPONDENTS	OHP TOT ADLT	377	100%	100%	100%	100%	100%	100%	304	1	3	1	5	3	43	9	349	170	186	125	240		
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		

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

			AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
	WORA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AMR AS-	NATV PAC ILND	AMR IND/ ALSK	MUL-	OTH-	NOT HIS- IC	HIS- PAN-	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q6 NEVER	12 5%	83 2%	2 13%	3 9%	1 3%	2 4%	3 4%	1 3%	10 5%	~	~	~	1 33%	1 3%	~	12 5%	3 3%	9 6%	2 2%	10 6%	
SOMETIMES	32 12%	655 19%*	2 13%	7 21%	4 11%	9 16%	6 8%	4 11%	24 11%	~	~	~	2 67%	6 18%	2 40%	29 12%	13 12%	19 13%	9 11%	23 13%	
USUALLY	72 28%	957 28%	7 47%	10 29%	9 24%	16 28%	16 21%	11 31%	57 27%	~	~	~	1 33%	1 33%	8 24%	2 40%	67 27%	31 29%	36 26%	20 25%	49 28%
ALWAYS	143 55%	1742 51%	4 27%	14 41%	24 63%	30 53%	50 67%*	19 54%	119 57%	1 100%	2 100%	~	1 33%	18 55%	1 20%	139 56%	60 56%	77 55%	50 62%	92 53%	
#ALWAYS + USUALLY (NET)	215 83%	2699 79%	11 73%	24 71%	33 87%	46 81%	66 88%	30 86%	176 84%	1 100%	2 100%	~	2 67%	1 33%	26 79%	3 60%	206 83%	91 85%	113 80%	70 86%	141 81%
TOP BOX SCORE	143 55%	1742 51%	4 27%	14 41%	24 63%	30 53%	50 67%*	19 54%	119 57%	1 100%	2 100%	~	1 33%	18 55%	1 20%	139 56%	60 56%	77 55%	50 62%	92 53%	
NOT ANSWERED	33	401	1	3	6	5	11	7	30		1				2	29	14	18	13	20	
VALID CASES	259	3437	15	34	38	57	75	35	210	1	2		3	3	33	5	247	107	141	81	174
NUMBER OF RESPONDENTS	292	3838	16	37	44	62	86	42	240	1	2	1	3	3	33	7	276	121	159	94	194
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q5 = YES]

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

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE MALE					
Q7 NONE	65 18%	1217 23%*	9 38%~	10 22%~	8 15%	17 21%	13 13%	6 11%	52 18%	1 ~ 33%~	2 ~ 40%~	7 ~ 17%~	1 11%~	62 18%~	46 28%*	17 9%*	27 22%	36 15%			
1 TIME	64 18%	847 16%	2 8%~	7 15%~	12 23%	7 9%*	19 19%	15 28%	49 17%	~	2 ~ 40%~	2 67%~	8 19%~	3 33%~	59 17%~	27 16%	34 18%	29 24%*	33 14%*		
2	75 21%	1010 19%	4 17%~	10 22%~	10 19%	15 19%	24 24%	12 22%	62 21%	~ 33%~	1 100%~	1 20%~	1 ~ 24%~	10 22%~	2 21%~	71 18%	29 24%	45 23%	28 20%		
3	49 13%	647 12%	3 13%~	5 11%~	5 10%	15 19%	14 14%	7 13%	42 14%	~ 33%~	1 ~	~	4 ~ 10%~	1 11%~	47 14%~	22 13%	26 14%	10 8%*	39 17%*		
4	33 9%	427 8%	2 8%~	5 11%~	6 12%	8 10%	8 8%	3 6%	30 10%	~	~	~	3 ~ 7%~	2 22%~	29 9%~	16 10%	14 8%	11 9%	22 9%		
5 TO 9	55 15%	719 14%	3 13%~	6 13%~	5 10%	12 15%	18 18%	8 15%	42 14%	1 100%~	~	1 ~ 33%~	7 17%~	50 ~ 15%~	22 13%	31 17%	10 8%*	42 18%*			
10 OR MORE TIMES	22 6%	356 7%	1 4%~	3 7%~	6 12%	6 7%	3 3%	3 6%	19 6%	~	~	~	3 ~ 7%~	22 ~ 6%~	3 2%*	17 9%*	6 5%	16 7%			
NOT ANSWERED	14	330	1	2	1	2	3		8				1	9	5	2	4	5			
VALID CASES	363	5224	24	46	52	80	99	54	296	1	3	1	5	3	42	9	340	165	184		
NUMBER OF RESPONDENTS	377 100%	5554 100%	25 100%	48 100%	53 100%	82 100%	102 100%	54 100%	304 100%	1 100%	3 100%	1 100%	5 100%	3 100%	43 100%	9 100%	349 100%	170 100%	186 100%	125 100%	240 100%

Q8 A HEALTH PROVIDER IS THE PERSON YOU WOULD SEE IF YOU NEED A CHECK-UP, WANT ADVICE ABOUT A HEALTH PROBLEM, OR GET SICK OR HURT. 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					ETHNICITY		HEALTH STATUS		GENDER				
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE		
Q8 #YES	206 72%	2839 72%	10 67%~	22 61%~	37 88%~	42 70%	67 79%	25 58%~	170 73%	1 100%	1 50%~	3 ~100%	3 ~100%	21 60%~	6 75%~	194 73%~	79 68%	120 75%	68 76%	135 70%	
NO	81 28%	1080 28%	5 33%~	14 39%~	5 12%~	18 30%	18 21%	18 42%~	64 27%	1 ~50%~				14 ~40%~	2 25%~	73 27%~	38 32%	39 25%	22 24%	57 30%	
NOT ANSWERED	11	109			2	3	1	5	10		1				11	2	8	4	7		
VALID CASES	287	3919	15	36	42	60	85	43	234	1	2	3	3	35	8	267	117	159	90	192	
NUMBER OF RESPONDENTS	298	4028	15	36	44	63	86	48	244	1	2	1	3	3	35	8	278	119	167	94	199
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q7 >= 1 TIME]

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

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	OTHER	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q9 YES	164 58%	2140 54%	6 40%~	13 37%~	31 74%~	35 57%	50 61%	26 59%~	131 56%	1 100%	1 50%~	3 ~100%	3 ~100%	21 62%~	7 88%~	151 57%~	54 46%*	104 66%*	52 59%	110 57%	
NO	121 42%	1796 46%	9 60%~	22 63%~	11 26%~	26 43%	32 39%	18 41%~	102 44%	1 ~	1 50%~	~	~	13 ~	13 38%~	114 43%~	63 54%*	53 34%*	36 41%	82 43%	
NOT ANSWERED	13	92	1	2	2	4	4	11	11			1		1	13		2	10	6	7	
VALID CASES	285	3936	15	35	42	61	82	44	233	1	2		3	3	34	8	265	117	157	88	192
NUMBER OF RESPONDENTS	298 100%	4028 100%	15 100%	36 100%	44 100%	63 100%	86 100%	48 100%	244 100%	1 100%	2 100%	1 100%	3 100%	3 100%	35 100%	8 100%	278 100%	119 100%	167 100%	94 100%	199 100%

[ASKED IF Q7 >= 1 TIME]

Q10 WHEN YOU TALKED ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT WANT TO TAKE A MEDICINE?

			AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	WORA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR	AMER ASIAN	NATV HAW/IND/PAC	AMER ALASK	OTHER	MULTI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE
Q10 NOT AT ALL	8 5%	93 4%	~	1 8%	1 4%	3 9%	2 4%	1 4%	8 6%	~	~	~	~	~	~	8 6%	5 9%	3 3%	3 6%	5 5%
A LITTLE	27 17%	327 16%	3 50%	3 23%	4 14%	5 14%	8 17%	3 12%	23 18%	~	~	1 33%	~	2 10%	3 43%	23 16%	10 19%	16 16%	8 16%	18 17%
SOME	56 36%	758 36%	3 50%	5 38%	9 32%	12 34%	19 40%	7 28%	41 33%	1 ~100%	~	2 67%	3 100%	8 40%	4 57%	52 36%	17 32%	38 38%	25 49%*	31 30%*
#A LOT	65 42%	898 43%	~	4 31%	14 50%	15 43%	18 38%	14 56%	53 42%	1 ~100%	~	~	~	10 50%	61 42%	21 40%	42 42%	15 29%*	50 48%*	
NOT ANSWERED	8	95			3		3	1	6					1	7	1	5	1	6	
VALID CASES	156	2076	6	13	28	35	47	25	125	1	1	3	3	20	7	144	53	99	51	104
NUMBER OF RESPONDENTS	164	2171	6	13	31	35	50	26	131	1	1	3	3	21	7	151	54	104	52	110
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

Q11 WHEN YOU TALKED ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT NOT WANT TO TAKE A MEDICINE?

	WORA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ AS- PAC	AMER IND/ ALSK	MUL- TI	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE MALE					
Q11 NOT AT ALL	36 23%	407 20%	3 50%~	6 46%~	6 20%~	6 18%~	8 17%~	5 20%~	34 27%~	~	~	~	~	~	1 5%~	2 29%~	33 23%~	14 26%	21 21%	11 21%	24 23%
A LITTLE	31 20%	411 20%	1 17%~	3 23%~	7 23%~	8 24%~	10 21%~	2 8%~	22 18%~	1 ~100%~	~	~	~	~	6 29%~	1 14%~	29 20%~	9 17%	21 21%	13 25%	18 17%
SOME	53 34%	704 34%	2 33%~	2 15%~	11 37%~	12 35%~	17 36%~	9 36%~	37 30%~	~	~	3 ~100%~	3 ~100%~	10 48%~	4 57%~	48 33%~	18 34%	34 34%	18 35%	35 34%	
#A LOT	37 24%	554 27%	~	2 15%~	6 20%~	8 24%~	12 26%~	9 36%~	32 26%~	1 ~100%~	~	~	~	~	4 19%~	35 ~24%~	12 23%	23 23%	10 19%	27 26%	
NOT ANSWERED	7	95			1	1	3	1	6							6	1	5		6	
VALID CASES	157	2076	6	13	30	34	47	25	125	1	1	3	3	21	7	145	53	99	52	104	
NUMBER OF RESPONDENTS	164	2171	6	13	31	35	50	26	131	1	1	3	3	21	7	151	54	104	52	110	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q7 >= 1 TIME 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						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q12 #YES	109 69%	1495 72%	5 83%	9 69%	19 63%	23 66%	33 70%	20 80%	85 67%	1 100%	1 100%	2 ~	3 67%	16 100%	76%	3 43%	103 71%	35 66%	71 71%	35 67%	74 70%
NO	49 31%	577 28%	1 17%	4 31%	11 37%	12 34%	14 30%	5 20%	41 33%	~	~	1 ~	5 24%	33%	4 57%	43 29%	18 34%	29 29%	17 33%	31 30%	
NOT ANSWERED	6	99			1		3	1	5						5	1	4			5	
VALID CASES	158	2072	6	13	30	35	47	25	126	1	1	3	3	21	7	146	53	100	52	105	
NUMBER OF RESPONDENTS	164 100%	2171 100%	6 100%	13 100%	31 100%	35 100%	50 100%	26 100%	131 100%	1 100%	1 100%	3 100%	3 100%	21 100%	7 100%	151 100%	54 100%	104 100%	52 100%	110 100%	

[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					ETHNICITY	HEALTH STATUS		GENDER				
	WORA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE			
Q13 WORST HEALTH CARE POSSIBLE	4 1%	27 0.7%	~	1 3%	1 2%	1 2%	1 2%	4 2%	~	~	~	~	~	4 1%	3 2%	2 2%	2 1%			
01	2 0.7%	36 0.9%	~	~	~	1 2%	1 2%	2 0.9%	~	~	~	~	~	2 0.7%	1 0.9%	1 0.6%	2 1%			
02	6 2%	49 1%	~	3 9%	~	1 2%	2 4%	5 2%	~	~	~	1 3%	~	6 2%	3 3%	3 2%	1 1%	5 3%		
03	7 2%	75 2%	~	1 3%	1 2%	1 2%	3 4%	6 2%	~	1 50%	~	~	~	1 14%	6 2%	3 3%	4 3%	7 4%*		
04	8 3%	144 4%	~	~	~	2 3%	5 6%	1 2%	7 3%	~	~	~	1 3%	8 3%	~	8 5%	1 1%	7 4%		
05	27 9%	268 7%	1 7%	4 11%	8 20%	4 6%	6 7%	4 9%	20 9%	~	~	1 ~	6 17%	2 29%	25 9%	7 6%	18 11%	5 6%	22 11%	
06	26 9%	223 6%*	2 13%	2 6%	4 10%	6 10%	5 6%	5 11%	18 8%	~	~	1 ~	1 33%	3 33%	2 9%	22 8%	7 6%	15 9%	10 11%	14 7%
07	38 13%	446 11%	5 33%	4 11%	4 10%	8 13%	9 11%	5 11%	33 14%	~	~	~	~	2 6%	1 14%	35 13%	16 14%	20 13%	9 10%	27 14%
08	61 21%	874 22%	3 20%	7 20%	8 20%	17 27%	20 24%	6 13%	51 22%	~	~	~	1 ~	8 33%	~	60 23%	28 22%	32 24%	26 29%*	35 18%
09	35 12%	633 16%*	2 13%	6 17%	5 12%	8 13%	10 12%	4 9%	26 11%	~	~	~	~	8 23%	35 13%	15 13%	20 13%	15 17%	20 10%	
BEST HEALTH CARE POSSIBLE	72 25%	1114 29%	2 13%	7 20%	10 24%	13 21%	25 30%	15 33%	62 26%	1 100%	1 50%	2 ~	6 67%	1 ~	67 25%	37 32%*	34 22%	21 23%	51 27%	
#8-10 (NET)	168 59%	2622 67%*	7 47%	20 57%	23 56%	38 61%	55 66%	25 56%	139 59%	1 100%	1 50%	2 ~	1 67%	22 33%	14 14%	162 60%	80 68%*	86 54%	62 69%*	106 55%

Continued

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

	AGE							RACE					ETHNICITY		HEALTH STATUS		GENDER				
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ IND/ PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE			
9-10 (NET)	107 37%	1747 45%*	4 27%~	13 37%~	15 37%~	21 34%	35 42%	19 42%~	88 38%	1 100%~	1 50%~	2 ~ 67%~	14 ~ 40%~	1 14%~	102 38%~	52 44%*	54 34%	36 40%	71 37%		
NOT ANSWERED	12	139		1	3	1	3	3	10		1			1	8	2	9	4	7		
VALID CASES	286	3889	15	35	41	62	83	45	234	1	2	3	3	7	270	117	158	90	192		
NUMBER OF RESPONDENTS	298 100%	4028 100%	15 100%	36 100%	44 100%	63 100%	86 100%	48 100%	244 100%	1 100%	2 100%	1 100%	3 100%	3 100%	35 100%	8 100%	278 100%	119 100%	167 100%	94 100%	199 100%
MEAN	7.51	7.86	7.60	7.11	7.41	7.48	7.86	7.36	7.52	10.0	6.50	8.67	6.33	7.54	6.00	7.52	7.98	7.26	7.86	7.36	
p stat_(*=Sig @ p<=.05)		.007*	~	~	~.929	.083	~	.866	~	~	~	~	~	~	~	~.003*	.042*	.067	.115		

[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					ETHNICITY		HEALTH STATUS		GENDER				
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE			
Q14 NEVER	9 3%	106 3%	2 ~	1 6%	4 2%	2 7%	2 5%	2 3%	7 ~	1 ~	1 ~	1 ~	1 3%	1 12%	8 3%	4 3%	5 3%	2 2%	7 4%		
SOMETIMES	56 20%	606 16%	7 47%	10 29%	7 17%	11 19%	15 18%	5 11%	43 18%	1 50%	1 33%	2 67%	7 21%	3 37%	51 19%	13 11%*	40 25%*	11 12%*	44 23%*		
USUALLY	95 33%	1251 32%	6 40%	13 37%	16 38%	20 34%	26 31%	11 25%	78 33%	~	~	1 33%	12 35%	3 37%	87 33%	44 38%	47 29%	37 41%	55 29%*		
ALWAYS	125 44%	1927 50%	2 13%	10 29%	18 43%	24 41%	44 52%	26 59%	106 45%	1 100%	1 50%	2 67%	14 41%	1 12%	120 45%	54 47%	68 43%	41 45%	84 44%		
#ALWAYS + USUALLY (NET)	220 77%	3178 82%	8 53%	23 66%	34 81%	44 75%	70 82%	37 84%	184 79%	1 100%	1 50%	2 67%	1 33%	26 76%	4 50%	207 78%	98 85%*	115 72%*	139 86%*	179 73%*	
TOP BOX SCORE	125 44%	1927 50%	2 13%	10 29%	18 43%	24 41%	44 52%	26 59%	106 45%	1 100%	1 50%	2 67%	14 41%	1 12%	120 45%	54 47%	68 43%	41 45%	84 44%		
NOT ANSWERED	13	138		1	2	4	1	4	10		1		1		12	4	7	3	9		
VALID CASES	285	3890	15	35	42	59	85	44	234	1	2	3	3	34	8	266	115	160	91	190	
NUMBER OF RESPONDENTS	298	4028	15	36	44	63	86	48	244	1	2	1	3	3	35	8	278	119	167	94	199
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q7 >= 1 TIME]

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

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ AS- PAC	AMER IND/ ALSK	MUL- TI	OTH-	NOT HIS- PAN-	HIS- PAN-	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q15 YES	318 87%	4471 84%	18 72%~	37 79%~	48 91%~	70 85%	90 91%	49 91%	263 88%	1 100%	2 67%~	1 100%	3 60%~	3 100%	37 86%~	7 78%~	301 87%~	139 82%*	166 91%*	104 84%	209 88%
NO	49 13%	824 16%	7 28%~	10 21%~	5 9%	12 15%	9 9%	5 9%	37 12%	1 ~ 33%~	1 ~ 40%~	2 ~ 14%~	2 ~ 14%~	6 ~ 14%~	2 22%~	45 13%~	30 18%*	17 9%*	20 16%	28 12%	
NOT ANSWERED	10	259		1			3		4							3	1	3	1	3	
VALID CASES	367	5295	25	47	53	82	99	54	300	1	3	1	5	3	43	9	346	169	183	124	237
NUMBER OF RESPONDENTS	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q16 NONE	29 10%	737 18%*	3 19%~	5 14%~	4 9%~	9 13%	4 5%*	3 8%~	21 9%	~	~	~	50%~	~	17%~	6	28	19 15%*	9 6%*	11 12%	17 9%	
1 TIME	64 22%	904 22%	5 31%~	5 14%~	13 30%~	13 19%	17 22%	11 28%~	51 22%	~	~	~	67%~	29%~	2	10	3 43%~	60 22%~	30 24%	33 22%	24 25%	40 21%
2	77 27%	921 22%	2 13%~	15 41%~	9 20%~	14 21%	23 29%	13 33%~	67 28%	~	1 50%~	~	50%~	~	6	17%~	1 14%~	74 27%~	34 27%	40 27%	28 29%	48 26%
3	38 13%	552 13%	1 6%~	3 8%~	6 14%~	14 21%	11 14%	2 5%~	32 14%	~	1 50%~	~	~	~	4	11%~	2 29%~	35 13%~	18 14%	17 11%	8 8%	29 15%
4	28 10%	381 9%	1 6%~	2 5%~	3 7%~	8 12%	11 14%	2 5%~	24 10%	~	~	~	~	~	3	9%~	1 14%~	26 10%~	11 9%	15 10%	10 11%	18 10%
5 TO 9	35 12%	484 12%	3 19%~	5 14%~	5 11%~	7 10%	9 12%	5 13%~	29 12%	1 100%~	~	~	~	~	4	11%~	32	11 9%	24 16%*	9 9%	25 13%	
10 OR MORE TIMES	17 6%	164 4%	1 6%~	2 5%~	4 9%~	3 4%	3 4%	3 8%~	13 5%	~	~	~	33%~	6%~	1	2	16 6%~	3 2%*	12 8%	5 5%	11 6%	
NOT ANSWERED	30	311	2		4	2	12	10	26			1	1		2		30	13	16	9	21	
VALID CASES	288	4143	16	37	44	68	78	39	237	1	2		2	3	35	7	271	126	150	95	188	
NUMBER OF RESPONDENTS	318	4454	18	37	48	70	90	49	263	1	2	1	3	3	37	7	301	139	166	104	209	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q15 = YES]

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q17 NEVER	5 2%	64 2%	~	2 6%	1 2%	1 2%	1 3%	3 1%	~	~	~	~	~	2 7%	5 2%	2 2%	3 2%	1 1%	4 2%		
SOMETIMES	24 9%	221 7%	4 31%	5 16%	4 10%	5 9%	2 3%*	4 11%	19 9%	1 50%	~	~	4 14%	1 14%	23 10%	7 7%	16 12%	8 10%	16 9%		
USUALLY	64 25%	788 23%	3 23%	9 28%	9 22%	14 24%	18 25%	9 25%	55 26%	~	~	~	1 33%	5 17%	4 57%	59 24%	25 24%	36 26%	22 27%	41 24%	
ALWAYS	163 64%	2286 68%	6 46%	16 50%	26 65%	38 66%	52 72%	22 61%	136 64%	1 100%	1 50%	~	1 100%	2 67%	18 62%	2 29%	154 64%	72 68%	84 60%	51 62%	109 64%
#ALWAYS + USUALLY (NET)	227 89%	3074 92%	9 69%	25 78%	35 88%	52 90%	70 97%*	31 86%	191 90%	1 100%	1 50%	~	1 100%	3 79%	23 86%	6 88%	213 92%	120 86%	73 89%	150 88%	
TOP BOX SCORE	163 64%	2286 68%	6 46%	16 50%	26 65%	38 66%	52 72%	22 61%	136 64%	1 100%	1 50%	~	1 100%	2 67%	18 62%	2 29%	154 64%	72 68%	84 60%	51 62%	109 64%
NOT ANSWERED	3	36				1	2		3						2	1	2	2	1		
VALID CASES	256	3360	13	32	40	58	72	36	213	1	2		1	3	29	7	241	106	139	82	170
NUMBER OF RESPONDENTS	259 100%	3396 100%	13 100%	32 100%	40 100%	59 100%	74 100%	36 100%	216 100%	1 100%	2 100%		1 100%	3 100%	29 100%	7 100%	243 100%	107 100%	141 100%	84 100%	171 100%

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

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
	WORA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE				
Q18 NEVER	9 4%	80 2%	~	2 6%	2 5%	1 2%	3 4%	1 3%	6 3%	~	~	~	~	~	2 7%	9 4%	2 2%	5 4%	2 2%	7 4%		
SOMETIMES	38 15%	289 9%*	15%	2 25%	8 15%	6 15%	9 10%	7 17%	6 15%	31 15%	~	~	~	1 33%	6 21%	1 14%	36 15%	10 9%*	28 20%*	13 16%	25 15%	
USUALLY	46 18%	705 21%	31%	4 22%	7 20%	8 20%	11 19%	10 14%	6 17%	37 17%	1 50%	~	~	~	7 24%	5 71%	41 17%	20 19%	25 18%	13 16%	33 20%	
ALWAYS	163 64%	2267 68%	54%	7 54%	15 47%	24 60%	38 64%	52 72%	22 63%	139 65%	1 100%	1 50%	~	1 100%	2 67%	14 48%	1 14%	154 64%	74 70%	81 58%*	55 66%	104 62%
#ALWAYS + USUALLY (NET)	209 82%	2972 89%*	85%	11 85%	22 69%	32 80%	49 83%	62 86%	28 80%	176 83%	1 100%	2 100%	~	1 100%	2 67%	21 72%	6 86%	195 81%	94 89%*	106 76%*	68 82%	137 81%
TOP BOX SCORE	163 64%	2267 68%	54%	7 54%	15 47%	24 60%	38 64%	52 72%	22 63%	139 65%	1 100%	1 50%	~	1 100%	2 67%	14 48%	1 14%	154 64%	74 70%	81 58%*	55 66%	104 62%
NOT ANSWERED	3	55					2	1	3							3	1	2	1	2		
VALID CASES	256	3341	100%	13	32	40	59	72	35	213	1	2	1	3	29	7	240	106	139	83	169	
NUMBER OF RESPONDENTS	259 100%	3396 100%	100%	13 100%	32 100%	40 100%	59 100%	74 100%	36 100%	216 100%	1 100%	2 100%	1 100%	3 100%	29 100%	7 100%	243 100%	107 100%	141 100%	84 100%	171 100%	

[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?

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q19 NEVER	9 4%	70 2%	1 8%	1 3%	1 2%	1 2%	3 4%	2 6%	7 3%	~	~	~	~	~	~	1 3%	~	9 4%	2 2%	6 4%	1 1%	8 5%
SOMETIMES	30 12%	242 7%*	1 8%	7 22%	5 12%	8 14%	4 5%*	5 14%	24 11%	~	~	~	~	~	6 21%	~	30 12%	6 6%*	23 16%*	7 8%	23 14%	
USUALLY	50 19%	541 16%	2 15%	7 22%	6 15%	11 19%	16 22%	8 22%	39 18%	~	1 50%	~	~	1 33%	8 28%	5 71%	45 19%	24 23%	25 18%	22 26%	28 16%	
ALWAYS	168 65%	2489 74%*	9 69%	17 53%	28 70%	39 66%	50 68%	21 58%	145 67%	1 100%	1 50%	~	1 100%	2 67%	14 48%	2 29%	158 65%	74 70%	87 62%	54 64%	111 65%	
#ALWAYS + USUALLY (NET)	218 85%	3030 91%*	11 85%	24 75%	34 85%	50 85%	66 90%	29 81%	184 86%	1 100%	2 100%	~	1 100%	3 100%	22 76%	7 100%	203 84%	98 92%*	112 79%*	76 90%	139 82%*	
TOP BOX SCORE	168 65%	2489 74%*	9 69%	17 53%	28 70%	39 66%	50 68%	21 58%	145 67%	1 100%	1 50%	~	1 100%	2 67%	14 48%	2 29%	158 65%	74 70%	87 62%	54 64%	111 65%	
NOT ANSWERED	2	53					1		1								1	1			1	
VALID CASES	257	3343	13	32	40	59	73	36	215	1	2		1	3	29	7	242	106	141	84	170	
NUMBER OF RESPONDENTS	259 100%	3396 100%	13 100%	32 100%	40 100%	59 100%	74 100%	36 100%	216 100%	1 100%	2 100%		1 100%	3 100%	29 100%	7 100%	243 100%	107 100%	141 100%	84 100%	171 100%	

[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?

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q20 NEVER	8 3%	102 3%	1 8%	2 6%	2 ~	1 3%	2 1%	2 6%	6 3%	~	~	~	~	~	2 7%	~	8 3%	3 3%	5 4%	~	8 5%*	
SOMETIMES	30 12%	343 11%	~	7 23%	7 17%	8 14%	4 6%*	4 12%	24 12%	~	~	~	~	~	6 21%	2 29%	27 12%	7 7%*	22 16%*	10 13%	20 12%	
USUALLY	70 28%	852 27%	7 54%	13 42%	8 20%	13 22%	19 28%	8 24%	55 26%	1 ~	1 50%	~	~	1 ~	10 33%	2 29%	67 29%	32 31%	35 26%	24 30%	45 27%	
ALWAYS	140 56%	1905 60%	5 38%	9 29%	25 63%	35 60%	44 65%	20 59%	123 59%	1 ~	1 50%	~	~	2 ~	10 67%	3 43%	131 56%	61 59%	73 54%	45 57%	93 56%	
#ALWAYS + USUALLY (NET)	210 85%	2757 86%	12 92%	22 71%	33 83%	48 83%	63 93%*	28 82%	178 86%	1 ~	2 100%	~	~	3 ~	20 71%	5 71%	198 85%	93 90%*	108 80%*	69 87%	138 83%	
TOP BOX SCORE	140 56%	1905 60%	5 38%	9 29%	25 63%	35 60%	44 65%	20 59%	123 59%	1 ~	1 50%	~	~	2 ~	10 67%	3 43%	131 56%	61 59%	73 54%	45 57%	93 56%	
NOT ANSWERED	11	195	~	1	~	1	6	2	8	~	~	~	~	1	1	10	4	6	5	5	5	
VALID CASES	248	3201	13	31	40	58	68	34	208	1	2	~	~	3	28	7	233	103	135	79	166	
NUMBER OF RESPONDENTS	259 100%	3396 100%	13 100%	32 100%	40 100%	59 100%	74 100%	36 100%	216 100%	1 100%	2 100%	~	~	1 100%	3 100%	29 100%	7 100%	243 100%	107 100%	141 100%	84 100%	171 100%

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

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q21	WORA TOT ADLT																				
YES	147 60%	1971 62%	7 54%~	19 61%~	23 59%~	39 67%	41 59%	17 52%~	128 62%~	~	~	~100%~	1 33%~	1 52%~	14 43%~	3 60%~	140 51%*	52 65%	88 48%*	38 65%*	108 65%*
NO	100 40%	1225 38%	6 46%~	12 39%~	16 41%~	19 33%	28 41%	16 48%~	80 38%~	2 ~100%~	~	~	2 67%~	13 48%~	4 57%~	92 40%~	49 49%*	48 35%	41 52%*	57 35%*	
NOT ANSWERED	12	201	1	1	1	5	3	8	1				2		11	6	5	5	6		
VALID CASES	247	3195	13	31	39	58	69	33	208	2		1	3	27	7	232	101	136	79	165	
NUMBER OF RESPONDENTS	259 100%	3396 100%	13 100%	32 100%	40 100%	59 100%	74 100%	36 100%	216 100%	1 100%		1 100%	3 100%	29 100%	7 100%	243 100%	107 100%	141 100%	84 100%	171 100%	

[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?

	WORA TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE		
Q22 NEVER	12 9%	127 7%	2 29%	3 16%	~	3 8%	3 9%	1 6%	10 8%	~	~	~	~	~	2 15%	12 ~	9%	5 10%	7 9%	1 3%	11 11%
SOMETIMES	21 15%	264 14%	1 14%	5 26%	3 14%	6 16%	4 11%	2 12%	17 14%	~	~	~	~	~	2 15%	3 100%	17 13%	6 12%	13 16%	8 24%	13 13%
USUALLY	26 19%	545 29%*	2 29%	3 16%	3 14%	8 22%	6 17%	4 24%	23 19%	~	~	~	~	~	3 23%	~	26 20%	13 27%	12 15%	6 18%	20 20%
ALWAYS	78 57%	930 50%	2 29%	8 42%	15 71%	20 54%	22 63%	10 59%	69 58%	~	~	1 ~100%	1 ~100%	6 46%	75 ~	75 58%	24 50%	50 61%	19 56%	58 57%	
#ALWAYS + USUALLY (NET)	104 76%	1474 79%	4 57%	11 58%	18 86%	28 76%	28 80%	14 82%	92 77%	~	~	1 ~100%	1 ~100%	9 69%	101 ~	101 78%	37 77%	62 76%	25 74%	78 76%	
TOP BOX SCORE	78 57%	930 50%	2 29%	8 42%	15 71%	20 54%	22 63%	10 59%	69 58%	~	~	1 ~100%	1 ~100%	6 46%	75 ~	75 58%	24 50%	50 61%	19 56%	58 57%	
NOT ANSWERED	10	57			2	2	6		9					1		10		4	6	4	6
VALID CASES	137	1865	7	19	21	37	35	17	119			1	1	13	3	130	48	82	34	102	
NUMBER OF RESPONDENTS	147	1922	7	19	23	39	41	17	128			1	1	14	3	140	52	88	38	108	
	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q15 = YES AND Q16 >= 1 TIME 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					ETHNICITY	HEALTH STATUS		GENDER				
	WORA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	VERY GOOD & POOR	FAIR & POOR	FE- MALE	MALE	
Q23 WORST PERSONAL DOCTOR POSSIBLE	3 1%	44 1%	~	1 3%	~	~	1 1%	~	0.9%	~	~	~	~	~	2 -0.8%	1 -0.8%	1 0.7%	~	2 1%	
01	5 2%	31 0.8%	~	2 6%	1 2%	1 2%	1 1%	~	2%	~	~	~	~	3%	5 2%	1 0.8%	4 3%	2 2%	3 2%	
02	8 3%	33 0.8%*	~	3 9%	1 2%	2 3%	~	5%	2%	~	~	~	~	6%	1 17%	7 3%	3 2%	4 3%	1 1%	7 4%
03	1 0.4%	49 1%*	~	~	~	~	~	3%	0.4%	~	~	~	~	~	1 -0.4%	~	~	~	1 -0.7%	~
04	8 3%	91 2%	~	3 9%	~	2 3%	2 3%	1 3%	7 3%	~	1 50%	~	~	~	~	8 3%	3 2%	5 3%	1 1%	7 4%
05	19 7%	232 6%	1 6%	1 3%	5 12%	6 9%	5 6%	1 3%	15 7%	~	~	1 50%	~	3%	19 7%	5 4%	13 9%	8 9%	11 6%	
06	11 4%	158 4%	3 18%	2 6%	2 5%	2 3%	2 3%	~	10 4%	~	~	~	~	3%	11 4%	4 3%	6 4%	3 3%	8 4%	
07	29 10%	284 7%	4 24%	6 18%	4 9%	4 6%	6 8%	4 11%	23 10%	~	~	~	1 33%	4 12%	4 67%	25 9%	20 16%*	9 6%*	8 9%	21 12%
08	45 16%	633 16%	5 29%	6 18%	5 12%	17 26%*	9 12%	3 8%	40 17%	~	~	~	~	5 15%	45 17%	28 23%*	16 11%*	16 11%*	16 17%	29 16%
09	43 15%	737 19%	2 12%	4 12%	7 16%	11 17%	13 17%	6 16%	38 17%	~	~	~	1 33%	3 9%	43 16%	16 13%	25 17%	15 16%	28 15%	
BEST PERSONAL DOCTOR POSSIBLE	107 38%	1651 42%	2 12%	5 15%	18 42%	21 32%	38 49%*	20 53%	85 37%	1 100%	1 50%	1 50%	1 33%	15 44%	1 17%	98 37%	43 35%	60 42%	38 41%	66 36%
#8-10 (NET)	195 70%	3021 77%*	9 53%	15 45%	30 70%	49 74%	60 78%	29 76%	163 71%	1 100%	1 50%	1 50%	2 67%	23 68%	1 17%	186 70%	87 70%	101 70%	69 74%	123 68%

Continued

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

	AGE							RACE					ETHNICITY		HEALTH STATUS		GENDER					
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ IND/ PAC	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE			
9-10 (NET)	150 54%	2388 61%*	4 24%~	9 27%~	25 58%~	32 48%	51 66%*	26 68%~	123 53%~	1 100%~	1 50%~	1 ~	2 50%~	18 67%~	53%~	1 17%~	141 53%~	59 48%	85 59%	53 57%	94 52%	
NOT ANSWERED	39	511	1	4	5	4	13	11	33		1	1		3	1	37	15	22	11	27		
VALID CASES	279	3943	17	33	43	66	77	38	230	1	2		2	3	34	6	264	124	144	93	182	
NUMBER OF RESPONDENTS	318 100%	4454 100%	18 100%	37 100%	48 100%	70 100%	90 100%	49 100%	263 100%	1 100%	2 100%		1 100%	3 100%	3 100%	37 100%	7 100%	301 100%	139 100%	166 100%	104 100%	209 100%
MEAN	8.02	8.35	7.59	6.45	8.16	8.00	8.53	8.47	8.06	10.0	7.00		7.50	8.67	7.97	6.67	8.02	8.11	8.00	8.26	7.91	
p stat_(*=Sig @ p<=.05)		.023*	~	~	~.941	.027*	~	~	~	~	~	~	~	~	~	~	~.546	.898	.239	.290		

[ASKED IF Q15 = YES]

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

	AGE								RACE						ETHNICITY		HEALTH STATUS		GENDER		
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q24 YES	155 43%	2057 40%	7 28%~	16 34%~	24 45%	38 47%	49 51%	20 38%	131 44%	1 100%	1 33%~	1 100%	1 ~	1 33%~	17 40%~	3 33%~	149 44%~	57 34%*	90 49%*	43 36%	111 47%*
Q24 NO	207 57%	3041 60%	18 72%~	31 66%~	29 55%	43 53%	48 49%	33 62%	166 56%	2 ~	2 67%~	5 ~	2 100%	25 67%~	6 60%~	193 56%~	109 66%*	92 51%*	77 64%	126 53%*	
NOT ANSWERED	15	457		1		1	5	1	7					1		7	4	4	5	3	
VALID CASES	362	5097	25	47	53	81	97	53	297	1	3	1	5	3	42	9	342	166	182	120	237
NUMBER OF RESPONDENTS	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER			
	WORA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q25 NEVER	107%	915%	5~	2~	2~	1~	9~	8~	~	~	~	~	~	1~	1~	9~	9~	1~	10~	
SOMETIMES	2417%	32917%	4~	4~	4~	4~	5~	3~	22~	~	~	~	~	2~	24~	8~	16~	6~	18~	
USUALLY	3827%	54629%	2~	1~	7~	10~	13~	5~	28~	~	~	~	1~	7~	1~	36~	8~	27~	14~	24~
ALWAYS	7049%	92749%	1~	6~	10~	21~	24~	7~	60~	1~	1~	~	~	7~	1~	67~	27~	38~	16~	53~
#ALWAYS + USUALLY (NET)	10876%	147378%	3~	7~	17~	31~	37~	12~	88~	1~	1~	~	1~	14~	2~	103~	35~	65~	30~	77~
TOP BOX SCORE	7049%	92749%	1~	6~	10~	21~	24~	7~	60~	1~	1~	~	~	7~	1~	67~	27~	38~	16~	53~
NOT ANSWERED	13	107			1	3	5	4	12		1				13	5	8	7	6	
VALID CASES	142	1893	7	16	23	35	44	16	119	1	1		1	17	3	136	52	82	36	105
NUMBER OF RESPONDENTS	155	2000	7	16	24	38	49	20	131	1	1	1	1	17	3	149	57	90	43	111
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER			
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK NATV	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q26 NONE	9 6%	66 3%		3 ~ 19%	1 4%	2 6%	2 4%	1 6%	8 7%					1 6%	1 33%	8 6%	5 9%	4 5%	3 8%	6 6%
1 SPECIALIST	73 51%	967 51%	5 71%	11 69%	11 48%	15 42%	23 51%	8 50%	64 52%	1 ~100%				7 44%	1 33%	71 51%	32 59%	38 46%	20 51%	53 51%
2	41 28%	501 26%	2 29%	1 6%	7 30%	13 36%	16 36%	2 12%	33 27%				1 ~100%	6 38%	1 33%	39 28%	13 24%	24 29%	11 28%	30 29%
3	14 10%	222 12%		1 6%	3 13%	5 14%	3 7%	1 6%	12 10%					1 6%		13 9%	3 6%	10 12%	3 8%	10 10%
4	4 3%	72 4%			1 4%	1 3%	1 2%	1 6%	3 2%	1 100%						4 3%	1 2%	3 4%	1 3%	3 3%
5 OR MORE SPECIALISTS	3 2%	70 4%					3 ~ 19%	2 2%						1 6%		3 2%		3 4%	1 3%	2 2%
NOT ANSWERED	11	103			1	2	4	4	9		1				11	3	8	4	7	
VALID CASES	144	1897	7	16	23	36	45	16	122	1	1			1	3	138	54	82	39	104
NUMBER OF RESPONDENTS	155	2000	7	16	24	38	49	20	131	1	1	1		1	3	149	57	90	43	111
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

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

	WORA TOT ADULT	OHP TOT ADULT	AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	VERY GOOD & POOR	FAIR & POOR	MALE	FE- MALE		
Q27 WORST SPECIALIST POSSIBLE	3 2%	10 0.6%	2 ~ 15%	1 ~ 3%	1 ~ 3%	1 ~ 3%	3 3%	~	~	~	~	~	~	3 2%	3 4%	2 6%	1 1%			
01	1 0.8%	12 0.7%	~	1 5%	~	~	1 0.9%	~	~	~	~	~	~	1 0.8%	~	~	1 1%			
02	~	19 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~			
03	4 3%	29 2%	~	3 14%	1 2%	~	3 3%	~	~	~	~	1 7%	4 3%	1 2%	3 4%	1 3%	3 3%			
04	1 0.8%	30 2%	~	1 8%	~	~	1 0.9%	~	~	~	~	~	1 0.8%	1 2%	~	~	1 1%			
05	7 5%	55 3%	1 14%	2 15%	2 9%	1 3%	1 8%	5 5%	~	~	1 100%	1 7%	7 6%	4 8%	3 4%	3 9%	4 4%			
06	4 3%	75 4%	~	2 15%	1 5%	1 2%	~	3 3%	~	~	~	1 7%	4 3%	3 6%	~	1 3%	3 3%			
07	10 8%	144 8%	1 14%	~	2 9%	4 12%	3 7%	10 9%	~	~	~	~	10 8%	3 6%	7 9%	1 3%	9 9%			
08	27 21%	332 19%	2 29%	3 23%	2 9%	11 33%	5 12%	4 31%	21 19%	1 100%	~	~	4 27%	1 50%	25 20%	12 25%	15 20%	12 35%	15 16%	
09	27 21%	332 19%	2 29%	3 23%	5 23%	6 18%	10 24%	1 8%	21 19%	~	~	~	5 33%	1 50%	26 21%	8 17%	18 24%	4 12%	23 24%	
BEST SPECIALIST POSSIBLE	45 35%	747 42%	1 14%	~	6 27%	10 30%	21 51%	7 54%	41 38%	1 100%	~	~	3 20%	44 35%	16 33%	27 36%	10 29%	35 37%		
#8-10 (NET)	99 77%	1411 79%	5 71%	6 46%	13 59%	27 82%	36 88%	12 92%	83 76%	1 100%	1 100%	~	~	12 80%	2 100%	95 76%	36 75%	60 79%	26 76%	73 77%

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					
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- PAC	AMER IND/ ALSK	MUL- TI	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE			
9-10 (NET)	72 56%	1080 60%	3 43%	3 23%	11 50%	16 48%	31 76%	8 62%	62 57%	1 100%	~	~	~	~	8 53%	1 50%	70 56%	24 50%	45 59%	14 41%	58 61%
NOT ANSWERED	6	31				1	2	2	5						5	1	2	2	3		
VALID CASES	129	1786	7	13	22	33	41	13	109	1	1			1	15	2	125	48	76	34	95
NUMBER OF RESPONDENTS	135 100%	1817 100%	7 100%	13 100%	22 100%	34 100%	43 100%	15 100%	114 100%	1 100%	1 100%			1 100%	15 100%	2 100%	130 100%	49 100%	78 100%	36 100%	98 100%
MEAN	8.18	8.46	8.00	5.92	7.32	8.33	9.02	8.92	8.20	10.0	8.00			5.00	8.07	8.50	8.16	8.21	8.22	7.74	8.34
p stat_(*=Sig @ p<=.05)		.157	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

[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?

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ AS- PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE			
Q28 YES	67 19%	1016 20%	3 12%~	15 32%~	9 17%	20 25%	15 15%	5 10%*	60 20%*	1 ~ 33%~	1 ~ 33%~	1 ~ 33%~	5 12%~	1 11%~	63 19%~	29 18%	37 21%	16 13%	51 22%*		
NO	290 81%	4109 80%	21 88%~	32 68%~	44 83%	60 75%	82 85%	45 90%*	233 80%*100%~	1 67%~	2 100%~	1 100%~	5 67%~	2 88%~	36 89%~	8 81%~	273 82%	136 79%	142 79%	103 87%	182 78%*
NOT ANSWERED	20	429	1	1		2	5	4	11					2	13	5	7	6	7		
VALID CASES	357	5125	24	47	53	80	97	50	293	1	3	1	5	3	41	9	336	165	179	119	233
NUMBER OF RESPONDENTS	377 100%	5554 100%	25 100%	48 100%	53 100%	82 100%	102 100%	54 100%	304 100%	1 100%	3 100%	1 100%	5 100%	3 100%	43 100%	9 100%	349 100%	170 100%	186 100%	125 100%	240 100%

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					ETHNICITY		HEALTH STATUS		GENDER			
	WORA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q29 NEVER	7 11%	95 10%		1 ~ 7%		3 ~ 16%	3 21%	7 12%							1 100%	5 8%	3 10%	4 12%	3 20%	4 8%
SOMETIMES	26 41%	336 35%	2 67%	8 53%	5 63%	5 26%	3 21%	3 60%	23 40%	1 100%				2 40%	26 43%	13 45%	12 35%	4 27%	22 45%	
USUALLY	20 31%	299 31%	1 33%	4 27%	3 38%	8 42%	3 21%	1 20%	17 29%					3 60%	20 33%	7 24%	13 38%	4 27%	16 33%	
ALWAYS	11 17%	228 24%		2 ~ 13%		3 ~ 16%	5 36%	1 20%	11 19%						9 15%	6 21%	5 15%	4 27%	7 14%	
#ALWAYS + USUALLY (NET)	31 48%	526 55%	1 33%	6 40%	3 38%	11 58%	8 57%	2 40%	28 48%					3 60%	29 48%	13 45%	18 53%	8 53%	23 47%	
TOP BOX SCORE	11 17%	228 24%		2 ~ 13%		3 ~ 16%	5 36%	1 20%	11 19%						9 15%	6 21%	5 15%	4 27%	7 14%	
NOT ANSWERED	3	45			1	1	1		2				1		3		3	1	2	
VALID CASES	64	957	3	15	8	19	14	5	58	1			5	1	60	29	34	15	49	
NUMBER OF RESPONDENTS	67	1002	3	15	9	20	15	5	60	1		1	5	1	63	29	37	16	51	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q28 = YES]

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q30																					
YES	84 23%	1357 27%	6 25%	10 22%	14 26%	17 22%	28 29%	9 17%	70 24%	1 100%	~	~	2 40%	2 67%	8 20%	4 44%	78 23%	29 18%*	51 28%*	29 24%	55 24%
NO	275 77%	3728 73%	18 75%	36 78%	39 74%	62 78%	70 71%	44 83%	226 76%	3 ~100%	1 ~100%	3 60%	1 33%	32 80%	5 56%	262 77%	135 82%*	130 72%*	92 76%	178 76%	
NOT ANSWERED	18	469	1	2		3	4	1	8				3		9	6	5	4	7		
VALID CASES	359	5085	24	46	53	79	98	53	296	1	3	1	5	3	40	9	340	164	181	121	233
NUMBER OF RESPONDENTS	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q31 NEVER	1 1%	46 4%	~	~	~	6%	~	2%	~	~	~	~	~	~	1%	~	2%	~	2%	
SOMETIMES	17 22%	289 23%	40%~	10%~	43%~	19%~	16%~	11%~	21%~	~	~	~	50%~	25%~	~	23%~	19%~	24%~	19%~	23%~
USUALLY	25 32%	401 32%	40%~	50%~	7%~	38%~	32%~	33%~	30%~	~	~	~	50%~	38%~	75%~	29%~	37%~	27%~	30%~	33%~
ALWAYS	36 46%	508 41%	20%~	40%~	50%~	38%~	52%~	56%~	47%~	~	~	~100%~	~	38%~	25%~	47%~	44%~	47%~	52%~	42%~
#ALWAYS + USUALLY (NET)	61 77%	909 73%	60%~	90%~	57%~	75%~	84%~	89%~	77%~	~	~	~100%~	50%~	75%~	100%~	75%~	81%~	73%~	81%~	75%~
TOP BOX SCORE	36 46%	508 41%	20%~	40%~	50%~	38%~	52%~	56%~	47%~	~	~	~100%~	~	38%~	25%~	47%~	44%~	47%~	52%~	42%~
NOT ANSWERED	5	75	1			1	3		4	1					5	2	2	2	3	
VALID CASES	79	1245	5	10	14	16	25	9	66			2	2	8	4	73	27	49	27	52
NUMBER OF RESPONDENTS	84 100%	1320 100%	6 100%	10 100%	14 100%	17 100%	28 100%	9 100%	70 100%	1		2 100%	2 100%	8 100%	4 100%	78 100%	29 100%	51 100%	29 100%	55 100%

[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						ETHNICITY		HEALTH STATUS		GENDER		
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL-	OTHER	HIS-	NOT HIS-	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE	
									WHTE	AMER	IAN	LLND	NATV	OTHR	TI	IC	IC				
Q32 NEVER	1 1%	18 1%	~	~	~	6%	~	2%	~	~	~	~	~	~	~	1%	~	2%	~	2%	
SOMETIMES	6 8%	93 7%	~	10%	7%	6%	8% 11%	8%	~	~	~	~	50%	~	25%	7%	7%	8%	8%	8%	
USUALLY	18 23%	288 23%	20%	40%	36%	19%	12% 22%	23%	~	~	~	~	50%	13%	50%	22%	19%	27%	19%	25%	
ALWAYS	53 68%	849 68%	80%	50%	57%	69%	79% 67%	68%	~	~	~	100%	~	88%	25%	69%	74%	62%	73%	65%	
#ALWAYS + USUALLY (NET)	71 91%	1137 91%	100%	90%	93%	88%	92% 89%	91%	~	~	~	100%	50%	100%	75%	92%	93%	90%	92%	90%	
TOP BOX SCORE	53 68%	849 68%	80%	50%	57%	69%	79% 67%	68%	~	~	~	100%	~	88%	25%	69%	74%	62%	73%	65%	
NOT ANSWERED	6	73	1			1	4	5	1							6	2	3	3	3	
VALID CASES	78	1247	5	10	14	16	24	9	65				2	2	8	4	72	27	48	26	52
NUMBER OF RESPONDENTS	84 100%	1320 100%	6 100%	10 100%	14 100%	17 100%	28 100%	9 100%	70 100%	1			2 100%	2 100%	8 100%	4 100%	78 100%	29 100%	51 100%	29 100%	55 100%

[ASKED IF Q30 = YES]

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q33																					
YES	116 33%	1535 30%	11 44%	20 43%	16 31%	28 35%	26 27%	14 27%	90 31%	1 100%	1 33%	1 100%	1 20%	2 67%	14 34%	4 44%	108 32%	50 30%	61 34%	41 34%	74 32%
NO	240 67%	3528 70%	14 56%	27 57%	36 69%	52 65%	69 73%	38 73%	203 69%	2 ~67%	4 ~80%	1 33%	27 66%	5 56%	228 68%	115 70%	118 66%	80 66%	157 68%		
NOT ANSWERED	21	491		1	1	2	7	2	11				2		13	5	7	4	9		
VALID CASES	356	5063	25	47	52	80	95	52	293	1	3	1	5	3	41	9	336	165	179	121	231
NUMBER OF RESPONDENTS	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
PQ34 NEVER	10 3%	53 1%*	2 ~	4 4%	4 ~	3 5%	3 ~	8 3%	~	~	~	~	~	1 2%	~	9 3%	2 1%	7 4%	4 3%	5 2%		
SOMETIMES	17 5%	302 6%	2 9%	4 9%	1 2%	4 5%	5 5%	1 2%	14 5%	~	~	~	~	3 7%	~	16 5%	7 4%	10 6%	8 7%	9 4%		
USUALLY	34 10%	589 12%	4 17%	5 11%	6 12%	9 12%	8 9%	2 4%*	28 10%	~	~	~	~	2 67%	3 7%	2 25%	32 10%	13 8%	20 12%	11 9%	23 10%	
ALWAYS	285 82%	4094 81%	17 74%	36 77%	43 86%	60 78%	80 86%	45 88%	235 82%	1 100%	3 100%	~	5 ~100%	1 33%	34 83%	6 75%	270 83%	140 86%	135 78%	95 81%	187 83%	
#ALWAYS + USUALLY (NET)	319 92%	4682 93%	21 91%	41 87%	49 98%*	69 90%	88 95%	47 92%	263 92%	1 100%	3 100%	~	5 ~100%	3 100%	37 90%	8 100%	302 92%	153 94%	155 90%	106 90%	210 94%	
TOP BOX SCORE	285 82%	4094 81%	17 74%	36 77%	43 86%	60 78%	80 86%	45 88%	235 82%	1 100%	3 100%	~	5 ~100%	1 33%	34 83%	6 75%	270 83%	140 86%	135 78%	95 81%	187 83%	
NOT ANSWERED	10	97	2		2	3	2	1	8			1				1	9	3	7	3	7	
VALID CASES	346	5037	23	47	50	77	93	51	285	1	3		5	3	41	8	327	162	172	118	224	
NUMBER OF RESPONDENTS	356 100%	5134 100%	25 100%	47 100%	52 100%	80 100%	95 100%	52 100%	293 100%	1 100%	3 100%		1 100%	5 100%	3 100%	41 100%	9 100%	336 100%	165 100%	179 100%	121 100%	231 100%

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

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

			AGE							RACE							ETHNICITY	HEALTH STATUS		GENDER	
	WORA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q35 WORST HEALTH PLAN POSSIBLE	4 1%	48 1%	~	2 4%	~	1 1%	1 1%	~	4 1%	~	~	~	~	~	~	4 1%	~	2 2%	2 0.9%		
01	2 0.6%	36 0.7%	~	~	~	1 1%	1 1%	~	2 0.7%	~	~	~	~	~	~	1 0.3%	~	2 1%	2 ~		
02	3 0.9%	58 1%	5%	1 2%	1 ~	1 1%	~	~	2 0.7%	~	~	~	1 3%	~	3 0.9%	2 1%	1 0.6%	~	3 1%		
03	9 3%	85 2%	~	~	1 2%	4 5%	3 3%	1 2%	7 2%	~	~	~	~	1 3%	2 22%	7 2%	2 1%	6 3%	3 3%	6 3%	
04	16 5%	108 2%*	~	1 2%	4 8%	4 5%	6 6%	1 2%	10 4%	~	1 50%	~	~	5 13%	~	16 5%	5 3%	11 6%	1 0.9%*	15 7%*	
05	43 12%	486 10%	18%	2 4%	9 18%	13 18%	8 8%	7 13%	37 13%	~	~	~	2 67%	4 10%	1 11%	42 13%	14 9%	28 16%*	13 11%	30 13%	
06	32 9%	314 6%	14%	3 18%	8 18%	5 10%	8 11%	3 4%*	26 9%	~	~	2 40%	~	3 8%	~	31 10%	17 11%	11 6%*	9 8%	22 10%	
07	44 13%	595 12%	14%	3 18%	8 18%	5 10%	12 16%	10 10%	6 12%	40 14%*	~	~	~	1 33%	3 8%	2 22%	41 13%	19 12%	23 13%	15 13%	29 13%
08	72 21%	978 20%	18%	4 20%	9 24%	12 18%	13 24%	23 24%	10 19%	57 20%	~	~	~	~	12 30%	1 11%	69 21%	41 26%*	29 16%*	27 23%	44 19%
09	40 12%	825 17%*	14%	3 11%	5 11%	8 16%	5 7%	11 11%	6 12%	30 11%	~	~	1 20%	~	5 13%	1 11%	37 11%	15 9%	24 14%	16 14%	22 10%
BEST HEALTH PLAN POSSIBLE	80 23%	1331 27%	18%	4 20%	9 14%*	7 15%*	11 15%*	30 31%*	18 35%	69 24%	1 100%	1 50%	1 100%	2 40%	6 15%	2 22%	74 23%	43 27%	37 21%	27 23%	53 23%
#8-10 (NET)	192 56%	3134 64%*	50%	11 50%	23 51%	27 53%	29 40%*	64 66%*	34 65%	156 55%	1 100%	1 50%	1 100%	3 60%	23 58%	4 44%	180 55%	99 63%*	90 51%	70 61%	119 53%

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?

	WORA TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE		
9-10 (NET)	120 35%	2156 44%*	7 32%~	14 31%~	15 29%	16 22%*	41 42%	24 46%	99 35%	1 100%~	1 50%~	1 100%~	3 60%~	11 ~ 28%~	3 33%~	111 34%~	58 37%	61 35%	43 37%	75 33%	
NOT ANSWERED	32	689	3	3	2	9	5	2	20		1			3		24	12	10	10	14	
VALID CASES	345	4865	22	45	51	73	97	52	284	1	2	1	5	3	40	9	325	158	176	115	226
NUMBER OF RESPONDENTS	377 100%	5554 100%	25 100%	48 100%	53 100%	82 100%	102 100%	54 100%	304 100%	1 100%	3 100%	1 100%	5 100%	3 100%	43 100%	9 100%	349 100%	170 100%	186 100%	125 100%	240 100%
MEAN	7.39	7.79	7.27	7.27	7.20	6.67	7.74	8.00	7.41	10.0	7.00	10.0	8.20	5.67	7.13	6.89	7.38	7.77	7.11	7.56	7.30
p stat_(*=Sig @ p<=.05)		.001*	~	~	.503	.003*	.075	.021*	.761	~	~	~	~	~	~	~	~	.003*	.017*	.338	.283

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					ETHNICITY		HEALTH STATUS		GENDER				
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE				
Q35A YES	70 20%	908 18%	2 ~	8 4%	14 15%	24 18%	21 24%	21 41%*	60 20%	~	~	1 ~	3 100%	5 12%	1 11%	67 20%	17 10%*	53 29%*	21 18%	49 21%	
NO	286 80%	4189 82%	25 100%	45 96%	44 85%	64 82%	74 76%	30 59%*	233 80%	1 100%	3 100%	1 100%	4 80%	36 ~	8 88%	269 89%	149 90%*	127 71%*	97 82%	185 79%	
NOT ANSWERED	21	458	1	1	4	4	3	11					2		13	4	6	7	6		
VALID CASES	356	5096	25	47	52	78	98	51	293	1	3	1	5	3	41	9	336	166	180	118	234
NUMBER OF RESPONDENTS	377 100%	5554 100%	25 100%	48 100%	53 100%	82 100%	102 100%	54 100%	304 100%	1 100%	3 100%	1 100%	5 100%	3 100%	43 100%	9 100%	349 100%	170 100%	186 100%	125 100%	240 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER			
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE
Q35B NEVER	13 20%	172 22%	~	~	4 50%	3 21%	5 23%	1 6%	12 21%	~	~	~	~	1 20%	13 21%	3 19%	10 20%	1 5%	12 26%	
SOMETIMES	10 15%	131 17%	~	1 50%	2 25%	2 14%	3 14%	2 11%	8 14%	~	~	~	2 67%	1 100%	9 15%	2 13%	8 16%	3 16%	7 15%	
USUALLY	11 17%	173 22%	~	1 50%	1 12%	2 14%	3 14%	4 22%	9 16%	~	~	~	~	2 40%	11 18%	4 25%	7 14%	5 26%	6 13%	
ALWAYS	31 48%	296 38%	~	~	1 12%	7 50%	11 50%	11 61%	27 48%	~	~	~	1 33%	2 40%	29 47%	7 44%	24 49%	10 53%	21 46%	
#ALWAYS + USUALLY (NET)	42 65%	470 61%	~	1 50%	2 25%	9 64%	14 64%	15 83%	36 64%	~	~	~	1 33%	4 80%	40 65%	11 69%	31 63%	15 79%	27 59%	
TOP BOX SCORE	31 48%	296 38%	~	~	1 12%	7 50%	11 50%	11 61%	27 48%	~	~	~	1 33%	2 40%	29 47%	7 44%	24 49%	10 53%	21 46%	
NOT ANSWERED	5	58					2 3	3 4				1			5	1	4	2	3	
VALID CASES	65	773		2	8	14	22	18	56				3	5	1	62	16	49	19	46
NUMBER OF RESPONDENTS	70	831		2	8	14	24	21	60			1	3	5	1	67	17	53	21	49
	100%	100%		100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35A = YES]

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

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ AS- PAC	AMER IND/ ALSK	MUL- TI	OTH	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q35C YES	68 19%	876 17%	2 8%	7 15%	10 19%	19 24%	17 17%	12 22%	59 20%	~	~	~	~	50%	14%	2 22%	65 19%	18 11%*	45 25%*	17 14%	50 21%
NO	296 81%	4320 83%	23 92%	40 85%	43 81%	60 76%	84 83%	42 78%	241 80%	1 100%	3 100%	1 100%	5 100%	1 50%	37 86%	7 78%	279 81%	151 89%*	137 75%*	106 86%	187 79%
NOT ANSWERED	13	357		1		3	1		4					1		5	1	4	2	3	
VALID CASES	364	5197	25	47	53	79	101	54	300	1	3	1	5	2	43	9	344	169	182	123	237
NUMBER OF RESPONDENTS	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q35D NEVER	24 39%	245 32%	2 ~ 29%	9 ~ 90%	6 ~ 35%	7 ~ 47%	20 ~ 37%	~	~	~	~	1 ~ 100%	2 ~ 50%	1 ~ 50%	23 ~ 40%	5 ~ 31%	18 ~ 43%	6 ~ 43%	18 ~ 39%	
SOMETIMES	8 13%	126 16%	1 50%	2 ~ 29%	2 ~ 12%	2 ~ 13%	1 ~ 11%	8 ~ 15%	~	~	~	~	~	1 ~ 50%	7 ~ 12%	3 ~ 19%	5 ~ 12%	1 ~ 7%	7 ~ 15%	
USUALLY	9 15%	150 20%	1 50%	1 ~ 14%	4 ~ 24%	1 ~ 7%	1 ~ 11%	7 ~ 13%	~	~	~	~	1 ~ 25%	8 ~ 14%	4 ~ 25%	4 ~ 10%	1 ~ 7%	7 ~ 15%		
ALWAYS	20 33%	244 32%	2 ~ 29%	1 ~ 10%	5 ~ 29%	5 ~ 33%	7 ~ 78%	19 ~ 35%	~	~	~	~	1 ~ 25%	20 ~ 34%	4 ~ 25%	15 ~ 36%	6 ~ 43%	14 ~ 30%		
#ALWAYS + USUALLY (NET)	29 48%	393 51%	1 50%	3 ~ 43%	1 ~ 10%	9 ~ 53%	6 ~ 40%	8 ~ 89%	26 ~ 48%	~	~	~	2 ~ 50%	28 ~ 48%	8 ~ 50%	19 ~ 45%	7 ~ 50%	21 ~ 46%		
TOP BOX SCORE	20 33%	244 32%	2 ~ 29%	1 ~ 10%	5 ~ 29%	5 ~ 33%	7 ~ 78%	19 ~ 35%	~	~	~	~	1 ~ 25%	20 ~ 34%	4 ~ 25%	15 ~ 36%	6 ~ 43%	14 ~ 30%		
NOT ANSWERED	7	42			2	2	3	5					2	7	2	3	3	4		
VALID CASES	61	765	2	7	10	17	15	9	54			1	4	2	58	16	42	14	46	
NUMBER OF RESPONDENTS	68	807	2	7	10	19	17	12	59			1	6	2	65	18	45	17	50	
	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q35C = YES]

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

	WORA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q35E ALWAYS	15 4%	186 4%	1 4%~	3 7%~	1 ~	8 1%*	1 8%	2 2%	9 3%	~	~	~	2 50%~	~	3 8%~	1 11%~	12 4%~	8 5%	7 4%	9 8%	5 2%*
USUALLY	17 5%	261 5%	1 4%~	3 7%~	4 8%	3 4%	5 5%	1 2%	16 5%	~	~	~	~	~	1 3%~	1 11%~	16 5%~	5 3%	12 7%	6 5%	11 5%
SOMETIMES	75 21%	993 19%	8 33%~	9 20%~	8 15%	22 28%	14 14%*	13 25%	62 21%	~	1 33%~	~	~	2 67%~	7 18%~	3 33%~	70 21%~	30 18%	41 23%	18 15%*	56 24%
NEVER	247 70%	3697 72%	14 58%~	31 67%~	40 77%	52 67%	70 72%	37 71%	206 70%	1 100%~	2 67%~	1 100%~	2 50%~	1 33%~	29 73%~	4 44%~	236 71%~	120 74%	120 67%	84 72%	161 69%
#NEVER + SOMETIMES (NET)	322 91%	4690 91%	22 92%~	40 87%~	48 92%	74 95%	84 87%	50 96%	268 91%	1 100%~	3 100%~	1 100%~	2 50%~	3 100%~	36 90%~	7 78%~	306 92%~	150 92%	161 89%	102 87%	217 93%
TOP BOX SCORE	247 70%	3697 72%	14 58%~	31 67%~	40 77%	52 67%	70 72%	37 71%	206 70%	1 100%~	2 67%~	1 100%~	2 50%~	1 33%~	29 73%~	4 44%~	236 71%~	120 74%	120 67%	84 72%	161 69%
NOT ANSWERED	23	417	1	2	1	4	5	2	11				1	3		15	7	6	8	7	
VALID CASES	354	5137	24	46	52	78	97	52	293	1	3	1	4	3	40	9	334	163	180	117	233
NUMBER OF RESPONDENTS	377 100%	5554 100%	25 100%	48 100%	53 100%	82 100%	102 100%	54 100%	304 100%	1 100%	3 100%	1 100%	5 100%	3 100%	43 100%	9 100%	349 100%	170 100%	186 100%	125 100%	240 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q35F ALWAYS	7 2%	87 2%	~	1 2%	1 2%	1 1%	2 2%	2 4%	5 2%	~	~	~	~	~	2 5%	~	7 2%	3 2%	4 2%	3 3%	4 2%
USUALLY	11 3%	142 3%	~	4 9%	1 2%	4 5%	2 2%	~	9 3%	~	~	1 25%	~	1 2%	~	11 3%	2 1%*	9 5%*	3 3%	8 3%	
SOMETIMES	76 21%	912 18%	8 33%	13 28%	11 21%	15 19%	15 15%	13 25%	65 22%	~	~	~	3 100%	6 14%	2 25%	73 22%	28 17%	44 24%	21 18%	54 23%	
NEVER	262 74%	4005 78%	16 67%	29 62%	39 75%	58 74%	79 81%*	38 72%	215 73%	1 100%	3 100%	1 100%	3 75%	33 ~	6 75%	247 73%	132 80%*	123 68%*	92 77%	168 72%	
#NEVER + SOMETIMES (NET)	338 95%	4917 96%	24 100%	42 89%	50 96%	73 94%	94 96%	51 96%	280 95%	1 100%	3 100%	1 100%	3 75%	3 100%	39 93%	8 100%	320 95%	160 97%	167 93%	113 95%	222 95%
TOP BOX SCORE	262 74%	4005 78%	16 67%	29 62%	39 75%	58 74%	79 81%*	38 72%	215 73%	1 100%	3 100%	1 100%	3 75%	33 ~	6 75%	247 73%	132 80%*	123 68%*	92 77%	168 72%	
NOT ANSWERED	21	408	1	1	1	4	4	1	10			1	1	1	11	5	6	6	6		
VALID CASES	356	5146	24	47	52	78	98	53	294	1	3	1	4	3	42	8	338	165	180	119	234
NUMBER OF RESPONDENTS	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER					
	WORA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q35G ALWAYS	6 2%	75 1%	1 4%	2 ~	3 4%	3 ~	3 3%	6 2%*	~	~	~	~	~	~	6 ~ 2%	2 1%	3 2%	2 2%	4 2%		
USUALLY	12 3%	99 2%	~	4 9%	2 4%	3 4%	1 1%*	2 4%	10 3%	~	~	~	~	2 5%	12 ~ 4%	4 2%	7 4%	4 3%	8 3%		
SOMETIMES	56 15%	596 12%*	4 16%	15 32%	9 17%	11 14%	13 13%	3 6%*	48 16%	~	~	~	1 ~ 33%	5 12%	33 ~ 15%	51 13%	21 17%	32 17%	17 14%	38 16%	
NEVER	288 80%	4397 85%*	20 80%	28 60%	40 75%	65 82%	83 83%	48 91%*	235 79%	1 100%	3 100%	1 100%	4 100%	2 67%	35 83%	6 67%	273 80%	139 84%	142 77%	98 81%	187 79%
#NEVER + SOMETIMES (NET)	344 95%	4993 97%	24 96%	43 91%	49 92%	76 96%	96 96%	51 96%	283 95%	1 100%	3 100%	1 100%	4 100%	3 95%	40 100%	9 95%	324 95%	160 96%	174 95%	115 95%	225 95%
TOP BOX SCORE	288 80%	4397 85%*	20 80%	28 60%	40 75%	65 82%	83 83%	48 91%*	235 79%	1 100%	3 100%	1 100%	4 100%	2 67%	35 83%	6 67%	273 80%	139 84%	142 77%	98 81%	187 79%
NOT ANSWERED	15	387		1		3	2	1	5			1		1	7	4	2	4	3		
VALID CASES	362	5167	25	47	53	79	100	53	299	1	3	1	4	3	42	9	342	166	184	121	237
NUMBER OF RESPONDENTS	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q35H IN THE LAST 6 MONTHS, DID YOU FEEL YOU COULD TELL A DOCTOR OR OTHER HEALTH PROVIDER ANYTHING, EVEN THINGS THAT YOU MIGHT NOT TELL ANYONE ELSE?

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE			
Q35H #YES DEFINITELY	159 44%	2206 43%	6 24%	14 30%	25 47%	37 46%	48 48%	28 53%	135 45%	1 100%	1 33%	1 100%	17 ~	1 ~	152 44%	73 44%	79 43%	52 43%	106 45%		
YES SOMEWHAT	122 34%	1724 34%	11 44%	19 40%	18 34%	27 34%	31 31%	13 25%	96 32%	~	~	1 25%	2 67%	18 43%	6 67%	113 33%	58 35%	59 32%	38 31%	81 34%	
NO	81 22%	1181 23%	8 32%	14 30%	10 19%	16 20%	20 20%	12 23%	68 23%	2 ~	2 67%	3 ~	1 75%	7 33%	2 22%	77 23%	35 21%	45 25%	31 26%	50 21%	
NOT ANSWERED	15	443	1			2	3	1	5			1		1	7	4	3	4	3		
VALID CASES	362	5111	25	47	53	80	99	53	299	1	3	1	4	3	42	9	342	166	183	121	237
NUMBER OF RESPONDENTS	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q35I IN THE LAST 6 MONTHS, DID YOU FEEL YOU COULD TRUST A DOCTOR OR OTHER HEALTH PROVIDER WITH YOUR MEDICAL CARE?

	WORA TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35I																					
#YES DEFINITELY	230 64%	3431 67%	16 67%~	25 53%~	34 64%	49 63%	67 67%	36 72%	190 65%	1 100%	1 33%~	1 100%	2 50%~	1 33%~	29 69%~	3 33%~	218 65%~	113 69%	113 62%	76 64%	152 65%
YES SOMEWHAT	102 29%	1348 26%	7 29%~	17 36%~	16 30%	22 28%	26 26%	12 24%	83 28%		1 33%~		2 50%~	2 67%~	12 29%~	5 56%~	95 28%~	43 26%	54 30%	29 25%	71 30%
NO	25 7%	341 7%	1 4%~	5 11%~	3 6%	7 9%	7 7%	2 4%	21 7%		1 33%~				1 2%	1 11%~	24 7%~	8 5%	15 8%	13 11%	12 5%
NOT ANSWERED	20	434	1	1		4	2	4	10				1			12	6	4	7	5	
VALID CASES	357	5120	24	47	53	78	100	50	294	1	3	1	4	3	42	9	337	164	182	118	235
NUMBER OF RESPONDENTS	377 100%	5554 100%	25 100%	48 100%	53 100%	82 100%	102 100%	54 100%	304 100%	1 100%	3 100%	1 100%	5 100%	3 100%	43 100%	9 100%	349 100%	170 100%	186 100%	125 100%	240 100%

Q35J IN THE LAST 6 MONTHS, DID YOU FEEL A DOCTOR OR OTHER HEALTH PROVIDER ALWAYS TOLD YOU THE TRUTH ABOUT YOUR HEALTH, EVEN IF THERE WAS BAD NEWS?

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	OTH-	OTH-	OTH-	OTH-	OTH-	OTH-	OTH-	OTH-	OTH-	OTH-
Q35J #YES DEFINITELY	283 79%	3907 76%	20 83%	32 68%	44 83%	62 78%	77 79%	44 86%	234 79%	1 100%	2 67%	1 100%	2 50%	2 67%	2 88%	36 67%	6 79%	267 79%	136 84%*	139 76%	94 79%	186 79%
YES SOMEWHAT	52 15%	870 17%	3 12%	10 21%	6 11%	14 18%	14 14%	4 8%	41 14%	~	~	~	50%	33%	10%	4 33%	3 14%	48 14%	18 11%	30 16%	16 13%	35 15%
NO	22 6%	334 7%	1 4%	5 11%	3 6%	3 4%	7 7%	3 6%	20 7%	~	33%	~	~	~	~	1 2%	22 ~	22 7%	8 5%	14 8%	9 8%	13 6%
NOT ANSWERED	20	443	1	1		3	4	3	9				1		2		12		8	3	6	6
VALID CASES	357	5111	24	47	53	79	98	51	295	1	3	1	4	3	41	9	337	162	183	119	234	
NUMBER OF RESPONDENTS	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q35K IN THE LAST 6 MONTHS, DID YOU FEEL THIS PROVIDER CARED AS MUCH AS YOU DO ABOUT YOUR HEALTH?

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q35K																					
#YES DEFINITELY	206 58%	3274 64%*	12 48%~	22 47%~	32 60%	47 59%	59 60%	32 63%	175 59%	1 100%~	1 33%~	1 100%~	2 50%~		24 ~ 57%~	2 22%~	196 58%~	102 62%	98 54%	66 56%	139 59%
YES SOMEWHAT	103 29%	1308 25%	10 40%~	13 28%~	15 28%	22 28%	27 28%	14 27%	78 26%*		1 ~ 33%~		1 ~ 25%~	2 67%~	16 38%~	5 56%~	96 28%~	47 29%	53 29%	33 28%	68 29%
NO	49 14%	554 11%	3 12%~	12 26%~	6 11%	11 14%	12 12%	5 10%	43 15%		1 ~ 33%~		1 ~ 25%~	1 33%~	2 5%~	2 22%~	47 14%~	15 9%*	31 17%	19 16%	30 13%
NOT ANSWERED	19	417		1		2	4	3	8				1		1	10	6	4	7	3	
VALID CASES	358	5137	25	47	53	80	98	51	296	1	3	1	4	3	42	9	339	164	182	118	237
NUMBER OF RESPONDENTS	377 100%	5554 100%	25 100%	48 100%	53 100%	82 100%	102 100%	54 100%	304 100%	1 100%	3 100%	1 100%	5 100%	3 100%	43 100%	9 100%	349 100%	170 100%	186 100%	125 100%	240 100%

Q35L IN THE LAST 6 MONTHS, DID YOU FEEL THIS PROVIDER REALLY CARED ABOUT YOU AS A PERSON?

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35L NEVER	27 8%	281 6%	1 4%	7 15%	3 6%	4 5%	8 8%	4 8%	22 7%	1 ~	33%~	~	~	33%~	5%~	27 ~	9 8%	17 9%	9 8%	18 8%	
SOMETIMES	64 18%	704 14%	5 20%	13 28%	7 13%	18 23%	13 13%	8 15%	52 17%	1 ~	33%~	~	1 25%	1 33%	8 19%	4 44%	60 18%	22 13%*	39 21%	23 19%	41 17%
USUALLY	78 22%	1231 24%	6 24%	12 26%	13 25%	15 19%	18 18%	14 27%	63 21%	~	~	~	~	33%~	29%~	3 33%	74 22%	32 19%	46 25%	26 22%	52 22%
ALWAYS	191 53%	2878 56%	13 52%	15 32%	30 57%	42 53%	61 61%	26 50%	161 54%	1 100%	1 33%	1 100%	3 75%	3 ~	20 48%	2 22%	180 53%	102 62%*	81 44%*	62 52%	126 53%
#ALWAYS + USUALLY (NET)	269 75%	4109 81%*	19 76%	27 57%	43 81%	57 72%	79 79%	40 77%	224 75%	1 100%	1 33%	1 100%	3 75%	3 33%	32 76%	5 56%	254 74%	134 81%*	127 69%*	88 73%	178 75%
TOP BOX SCORE	191 53%	2878 56%	13 52%	15 32%	30 57%	42 53%	61 61%	26 50%	161 54%	1 100%	1 33%	1 100%	3 75%	3 ~	20 48%	2 22%	180 53%	102 62%*	81 44%*	62 52%	126 53%
NOT ANSWERED	17	461		1		3	2	2	6				1	1		8	5	3	5	3	
VALID CASES	360	5093	25	47	53	79	100	52	298	1	3	1	4	3	42	9	341	165	183	120	237
NUMBER OF RESPONDENTS	377 100%	5554 100%	25 100%	48 100%	53 100%	82 100%	102 100%	54 100%	304 100%	1 100%	3 100%	1 100%	5 100%	3 100%	43 100%	9 100%	349 100%	170 100%	186 100%	125 100%	240 100%

Q35M IN THE LAST 6 MONTHS, HOW OFTEN HAVE YOU BEEN TREATED UNFAIRLY AT A DOCTOR OR OTHER HEALTH PROVIDER'S OFFICE BECAUSE OF YOUR RACE OR ETHNICITY?

			AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	WORA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER HAW/ IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q35M ALWAYS	9 3%	72 1%	1 4%	~	~	2 3%	5 5%	1 2%	8 3%	~	~	~	~	~	1 2%	9 3%	3 2%	5 3%	4 3%	5 2%	
USUALLY	3 0.8%	48 0.9%	~	~	1 2%	2 3%	~	0.3%	~	~	~	~	33%	1 2%	3 ~0.9%	1 0.6%	2 1%	3 2%	~		
SOMETIMES	12 3%	187 4%	~	4%	2 6%	3 3%	4 4%	1 2%	10 3%	~	~	~	~	5%	2 ~	12 4%	5 3%	7 4%	4 3%	8 3%	
NEVER	333 93%	4818 94%	24 96%	45 96%	48 92%	72 92%	89 91%	51 96%	276 94%	1 100%	3 100%	1 100%	4 100%	2 67%	38 90%	9 100%	315 93%	156 95%	168 92%	109 91%	221 94%
#NEVER + SOMETIMES (NET)	345 97%	5005 98%	24 96%	47 100%	51 98%	74 95%	93 95%	52 98%	286 97%	1 100%	3 100%	1 100%	4 100%	2 67%	40 95%	9 100%	327 96%	161 98%	175 96%	113 94%	229 98%
TOP BOX SCORE	333 93%	4818 94%	24 96%	45 96%	48 92%	72 92%	89 91%	51 96%	276 94%	1 100%	3 100%	1 100%	4 100%	2 67%	38 90%	9 100%	315 93%	156 95%	168 92%	109 91%	221 94%
NOT ANSWERED	20	430		1	1	4	4	1	9				1		10	5	4	5	6		
VALID CASES	357	5124	25	47	52	78	98	53	295	1	3	1	4	3	42	9	339	165	182	120	234
NUMBER OF RESPONDENTS	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q35N IN THE LAST 6 MONTHS, HOW OFTEN HAVE YOU BEEN TREATED UNFAIRLY AT A DOCTOR OR OTHER HEALTH PROVIDER'S OFFICE BECAUSE OF THE TYPE OF HEALTH INSURANCE YOU HAVE OR BECAUSE YOU DO NOT HAVE HEALTH INSURANCE?

	WORA TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER HAW/ IND/ PAC ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE MALE			
Q35N ALWAYS	17 5%	130 3%*	1 4%	3 6%	2 4%	3 4%	6 6%	2 4%	15 5%	~	~	~	~	1 33%	1 2%	~	17 5%	8 5%	8 4%	7 6%	10 4%
USUALLY	14 4%	191 4%	1 4%	3 6%	3 6%	3 4%	1 3%	1 2%	11 4%	~	~	~	~	~	2 5%	1 11%	12 4%	6 4%	8 4%	3 3%	11 5%
SOMETIMES	51 14%	664 13%	3 12%	8 17%	11 21%	17 22%	9 9%	3 6%*	38 13%	~	~	~	~	1 33%	10 24%	4 44%	47 14%	13 8%*	34 19%*	15 13%	36 15%
NEVER	272 77%	4121 81%	20 80%	33 70%	36 69%	55 71%	79 81%	46 88%*	230 78%	1 100%	3 100%	1 100%	3 100%	1 33%	29 69%	4 44%	260 77%	138 84%*	130 72%*	92 79%	178 76%
#NEVER + SOMETIMES (NET)	323 91%	4786 94%	23 92%	41 87%	47 90%	72 92%	88 91%	49 94%	268 91%	1 100%	3 100%	1 100%	3 100%	2 67%	39 93%	8 89%	307 91%	151 92%	164 91%	107 91%	214 91%
TOP BOX SCORE	272 77%	4121 81%	20 80%	33 70%	36 69%	55 71%	79 81%	46 88%*	230 78%	1 100%	3 100%	1 100%	3 100%	1 33%	29 69%	4 44%	260 77%	138 84%*	130 72%*	92 79%	178 76%
NOT ANSWERED	23	448	1	1	4	5	2	10					2	1		13	5	6	8	5	
VALID CASES	354	5106	25	47	52	78	97	52	294	1	3	1	3	3	42	9	336	165	180	117	235
NUMBER OF RESPONDENTS	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q350 IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER GIVE YOU ALL THE INFORMATION YOU WANTED ABOUT YOUR HEALTH?

	WORA TOT ADULT	OHP TOT ADULT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER HAW/ IND/ PAC ALSK	MUL- TI	NOT HIS- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE MALE					
Q350 NEVER	278	298	14%	8%	3%	4%	8%	3%	21%	1%	1%	4%	26%	10%	17%	11%	16%					
SOMETIMES	441	693	16%	12%	11%	19%	9%	6%*	13%	~	~	~	33%~	12%~	44%~	12%~	10%	14%				
USUALLY	962	1328	14%	13%	13%	16%	24%	16%	76%	1%	~	~	33%~	33%~	44%~	27%~	27%	27%				
ALWAYS	190	2777	24%	44%	58%	55%	58%	58%	161%	1%	1%	3%	1%	19%	1%	182%	95%	90%				
#ALWAYS + USUALLY (NET)	286	4105	80%	71%	83%	76%	82%	89%*	237%	1%	2%	3%	2%	33%	5%	273%	139%	140%				
TOP BOX SCORE	190	2777	24%	44%	58%	55%	58%	58%	161%	1%	1%	3%	1%	19%	1%	182%	95%	90%				
NOT ANSWERED	20	459				4%	5%	1%	8%			1%		1%	10%	5%	3%	5%	5%			
VALID CASES	357	5095	25%	48%	53%	78%	97%	53%	296%	1%	3%	1%	4%	3%	42%	9%	339%	165%	183%			
NUMBER OF RESPONDENTS	377	5554	25%	48%	53%	82%	102%	54%	304%	1%	3%	1%	5%	3%	43%	9%	349%	170%	186%			
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			

Q35P IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER ENCOURAGE YOU TO TALK ABOUT ALL YOUR HEALTH QUESTIONS OR CONCERNS?

			AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	WORA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL-	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q35P NEVER	43 12%	592 12%	2 8%	8 17%	4 8%	12 15%	11 11%	5 10%	38 13%	1 ~ 33%	1 ~ 25%	3 ~ 7%	3 ~ 13%	43 ~ 13%	20 12%	23 13%	18 16%	25 11%			
SOMETIMES	50 14%	825 16%	4 16%	8 17%	7 13%	11 14%	17 17%	3 6%*	44 15%	~	~	~	~	6 ~ 14%	2 22%	46 14%	14 9%*	33 18%*	19 16%	31 13%	
USUALLY	90 25%	1308 26%	11 44%	12 26%	13 25%	21 27%	19 19%	13 26%	67 23%*	1 ~ 33%	1 ~ 25%	2 67%	15 36%	5 56%	84 25%	41 25%	45 25%	29 25%	60 26%		
ALWAYS	170 48%	2353 46%	8 32%	19 40%	28 54%	34 44%	51 52%	29 58%	143 49%	1 100%	1 33%	1 100%	2 50%	1 33%	18 43%	2 22%	162 48%	87 54%	80 44%	50 43%	119 51%
#ALWAYS + USUALLY (NET)	260 74%	3661 72%	19 76%	31 66%	41 79%	55 71%	70 71%	42 84%*	210 72%	1 100%	2 67%	1 100%	3 75%	3 100%	33 79%	7 78%	246 73%	128 79%*	125 69%*	79 68%	179 76%
TOP BOX SCORE	170 48%	2353 46%	8 32%	19 40%	28 54%	34 44%	51 52%	29 58%	143 49%	1 100%	1 33%	1 100%	2 50%	1 33%	18 43%	2 22%	162 48%	87 54%	80 44%	50 43%	119 51%
NOT ANSWERED	24	477	1	1	4	4	4	4	12			1	1		14	8	5	9	5		
VALID CASES	353	5077	25	47	52	78	98	50	292	1	3	1	4	3	42	9	335	162	181	116	235
NUMBER OF RESPONDENTS	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q35Q IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER USE MEDICAL WORDS YOU DID NOT UNDERSTAND?

	WORA TOT ADLT	OHP TOT ADLT	AGE							RACE							ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q35Q ALWAYS	18 5%	187 4%	2 8%~	2 4%~	5 9%	5 6%	3 3%	1 2%	14 5%	~	~	~	~	1 33%~	3 7%~	~	18 5%~	10 6%	8 4%	7 6%	11 5%	
USUALLY	19 5%	215 4%	1 4%~	4 9%~	3 6%	4 5%	5 5%	2 4%	16 5%	~	~	~	~	~	2 5%~	1 11%~	16 5%~	8 5%	11 6%	9 8%	10 4%	
SOMETIMES	140 39%	1973 39%	15 60%~	22 47%~	17 32%	35 45%	35 35%	16 31%	113 38%	~	1 33%~	~	2 50%~	1 33%~	21 50%~	6 67%~	133 39%~	64 39%	73 40%	44 37%	96 41%	
NEVER	179 50%	2695 53%	7 28%~	19 40%~	28 53%	33 43%	56 57%	33 63%*	152 52%	1 100%~	2 67%~	1 100%~	2 50%~	1 33%~	16 38%~	2 22%~	171 51%~	83 50%	90 49%	58 49%	119 50%	
#NEVER + SOMETIMES (NET)	319 90%	4668 92%	22 88%~	41 87%~	45 85%	68 88%	91 92%	49 94%	265 90%	1 100%~	3 100%~	1 100%~	4 100%~	2 67%~	37 88%~	8 89%~	304 90%~	147 89%	163 90%	102 86%	215 91%	
TOP BOX SCORE	179 50%	2695 53%	7 28%~	19 40%~	28 53%	33 43%	56 57%	33 63%*	152 52%	1 100%~	2 67%~	1 100%~	2 50%~	1 33%~	16 38%~	2 22%~	171 51%~	83 50%	90 49%	58 49%	119 50%	
NOT ANSWERED	21	484		1		5	3	2	9					1		11	5	4	7	4		
VALID CASES	356	5070	25	47	53	77	99	52	295	1	3	1	4	3	42	9	338	165	182	118	236	
NUMBER OF RESPONDENTS	377 100%	5554 100%	25 100%	48 100%	53 100%	82 100%	102 100%	54 100%	304 100%	1 100%	3 100%	1 100%	5 100%	3 100%	43 100%	9 100%	349 100%	170 100%	186 100%	125 100%	240 100%	

Q35R WHAT IS YOUR PREFERRED LANGUAGE?

	WORA TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q35R ENGLISH	361 99%	4755 93%*	25 100%	48 100%	52 98%	81 100%	101 100%	51 96%	301 100%	1 100%	2 67%	1 100%	5 100%	2 67%	43 100%	7 78%	345 100%	170 100%	181 98%	123 100%	236 99%
SPANISH	2 0.5%	169 3%*	~	~	1 2%	~	~	1 2%	~	~	~	~	~	1 33%	~	2 22%	~	~	2 1%	~	2 0.8%
SOME OTHER LANGUAGE	1 0.3%	191 4%*	~	~	~	~	~	1 2%	~	~	1 33%	~	~	~	~	~	1 0.3%	~	1 0.5%	~	1 0.4%
NOT ANSWERED	13	438				1	1	1	3							3		2	2	1	
VALID CASES	364	5116	25	48	53	81	101	53	301	1	3	1	5	3	43	9	346	170	184	123	239
NUMBER OF RESPONDENTS	377 100%	5554 100%	25 100%	48 100%	53 100%	82 100%	102 100%	54 100%	304 100%	1 100%	3 100%	1 100%	5 100%	3 100%	43 100%	9 100%	349 100%	170 100%	186 100%	125 100%	240 100%

Q35S HOW WELL DO YOU SPEAK ENGLISH?

	WORA TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE
Q35S VERY WELL		11 4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
WELL		41 17%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT WELL	1 50%	119 49%	~	~	100%	~	~	~	~	~	~	~	~	1 50%	~	1 50%	~	1 50%	
NOT AT ALL	1 50%	71 30%	~	~	~	~	~	~	~	~	~	~	1 50%	~	1 50%	~	1 50%		
NOT ANSWERED	1	8				1		1						1		1		1	
VALID CASES	2	242			1	1								2		2		2	
NUMBER OF RESPONDENTS	3	250			1	2		1						2	1	3		3	
	100%	100%			100%	100%								100%		100%		100%	

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE]

Q35T IN THE LAST 6 MONTHS, WHEN YOU CALLED OR SPOKE TO SOMEONE FROM YOUR HEALTH PLAN, HOW OFTEN DID THEY SPEAK TO YOU IN YOUR PREFERRED LANGUAGE?

	WORA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ AS- PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE	MALE	
Q35T NEVER	1 50%	52 22%	~	~	~	~	~100%	~	~	~	~	~100%	~	1 50%	~	1 50%	~	1 50%
SOMETIMES		51 22%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
USUALLY	1 50%	50 22%	~	~100%	~	~	~	~	~	~	~	~	~	1 50%	~	1 50%	~	1 50%
ALWAYS		77 34%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
#ALWAYS + USUALLY (NET)	1 50%	128 55%	~	~100%	~	~	~	~	~	~	~	~	~	1 50%	~	1 50%	~	1 50%
TOP BOX SCORE		77 34%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	1	20					1		1						1		1	1
VALID CASES	2	230			1		1					1		2		2		2
NUMBER OF RESPONDENTS	3	250			1		2		1			1		2	1	3		3
	100%	100%			100%		100%					100%		100%		100%		100%

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE]

Q35U AN INTERPRETER IS SOMEONE WHO HELPS YOU TALK WITH OTHERS WHO DO NOT SPEAK YOUR LANGUAGE. INTERPRETERS CAN INCLUDE STAFF FROM THE HEALTH PLAN OR TELEPHONE INTERPRETERS. IN THE LAST 6 MONTHS, WAS THERE ANY TIME WHEN YOU NEEDED AN INTERPRETER TO TALK WITH SOMEONE FROM YOUR HEALTH PLAN?

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER	
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q35U YES	1 50%	134 58%	~	~	~	~	~100%	~	~	~	~100%	~	~	1 50%	1 50%	~	1 50%	
NO	1 50%	98 42%	~	~	1 100%	~	~	~	~	~	~	~	~	1 50%	1 50%	~	1 50%	
NOT ANSWERED	1	19					1		1					1	1		1	
VALID CASES	2	231			1		1				1			2	2		2	
NUMBER OF RESPONDENTS	3	250			1		2		1		1		1	2	3		3	
	100%	100%			100%		100%				100%			100%	100%		100%	

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE]

Q35V IN THE LAST 6 MONTHS, DID ANYONE FROM THE HEALTH PLAN LET YOU KNOW THAT AN INTERPRETER WAS AVAILABLE FREE OF CHARGE?

	WORA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK NATV OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE
Q35V NEVER		21 21%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	1 100%	13 13%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
USUALLY		16 16%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
ALWAYS		50 50%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
#ALWAYS + USUALLY (NET)		66 66%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
TOP BOX SCORE		50 50%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		7																	
VALID CASES	1	100																	
NUMBER OF RESPONDENTS	1 100%	107 100%																	

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES]

Q35W IN THE LAST 6 MONTHS, HOW OFTEN DID YOU USE AN INTERPRETER PROVIDED BY YOUR HEALTH PLAN TO HELP YOU TALK WITH SOMEONE FROM THE PLAN?

	WORA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE MALE		
Q35W NEVER	1 100%	16 16%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES		27 27%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
USUALLY		21 21%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
ALWAYS		37 36%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		6																
VALID CASES	1	101								1			1			1		1
NUMBER OF RESPONDENTS	1 100%	107 100%								1 100%			1 100%			1 100%		1 100%

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES]

Q35X IN THE LAST 6 MONTHS, WHEN YOU USED AN INTERPRETER PROVIDED BY YOUR HEALTH PLAN, WHO WAS THE INTERPRETER YOU USED MOST OFTEN?

	WORA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ AS- PAC	AMER IND/ ALSK	MUL- TI	OTH-	NOT HIS- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE
Q35X A STAFF MEMBER FROM THE HEALTH PLAN		7 9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
AN INTERPRETER PROVIDED IN-PERSON BY THE HEALTH PLAN		16 21%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
A TELEPHONE INTERPRETER PROVIDED BY THE HEALTH PLAN		22 28%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMEONE ELSE PROVIDED BY THE HEALTH PLAN		7 9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
DON'T KNOW OR UNSURE		25 33%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		8																	
VALID CASES NUMBER OF RESPONDENTS		77 85 100%																	

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND 35W = SOMETIMES OR USUALLY OR ALWAYS]

Q35Y IN THE LAST 6 MONTHS, HOW OFTEN DID THIS INTERPRETER TREAT YOU WITH COURTESY AND RESPECT?

	WORA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE
Q35Y NEVER		1 0.9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES		6 7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
USUALLY		22 26%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
ALWAYS		56 66%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
#ALWAYS + USUALLY (NET)		78 92%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
TOP BOX SCORE		56 66%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
VALID CASES NUMBER OF RESPONDENTS		85 85 100%																	

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND Q35W = SOMETIMES OR USUALLY OR ALWAYS]

Q35Z USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST INTERPRETER POSSIBLE AND 10 IS THE BEST INTERPRETER POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE THIS INTERPRETER?

	WORA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ AS- PAC	AMER IND/ ALSK	MUL- TI	OTH-	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE MALE	
Q35Z WORST INTERPRETER POSSIBLE		1 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
05		5 6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
06		1 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
07		7 9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
08		19 22%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
09		15 18%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
BEST INTERPRETER POSSIBLE		37 44%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
#8-10 (NET)		71 84%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
9-10 (NET)		52 62%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
VALID CASES NUMBER OF RESPONDENTS		85 85 100%																
MEAN		8.74																
p stat_(*=Sig @ p<=.05)		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND 35W = SOMETIMES OR USUALLY OR ALWAYS]

Q35AA IN THE LAST 6 MONTHS, HOW OFTEN DID YOU USE A FRIEND OR FAMILY MEMBER AS AN INTERPRETER WHEN YOU TALKED WITH SOMEONE FROM YOUR HEALTH PLAN?

	WORA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ AS- PAC	AMER IND/ ALSK	MUL- TI	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE MALE		
Q35AA NEVER		48 48%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES		22 22%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
USUALLY		7 7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
ALWAYS	1 100%	23 23%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		7																
VALID CASES	1	100																
NUMBER OF RESPONDENTS	1 100%	107 100%																

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES]

Q35AB IN THE LAST 6 MONTHS, DID YOU USE FRIENDS OR FAMILY MEMBERS AS INTERPRETERS BECAUSE THAT WAS WHAT YOU PREFERRED?

	WORA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE
Q35AB																		
NEVER		4 8%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES		18 36%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
USUALLY		14 27%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
ALWAYS	1 100%	15 30%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		1																
VALID CASES	1	52																
NUMBER OF RESPONDENTS	1 100%	52 100%																

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND Q35AA = SOMETIMES OR USUALLY OR ALWAYS]

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

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE	
Q36																					
EXCELLENT	12 3%	446 9%*	4 16%~	5 11%~	~	~	1 1%*	1 2%	10 3%	1 ~	33%~	~	~	~	2%~	11 ~	3%~	12 7%~	3 ~	9 4%	
VERY GOOD	52 15%	1044 20%*	7 28%~	14 30%~	10 20%	11 14%	4 4%*	5 9%	43 14%	~	~	~	20%~	~	17%~	33%~	14%~	52 31%*	21 ~	30 13%	
GOOD	106 30%	1716 34%	10 40%~	18 38%~	15 29%	23 30%	26 26%	14 26%	92 31%	1 100%~	~	~	40%~	~	24%~	11%~	103 30%~	106 62%*	33 ~	73 31%	
FAIR	116 33%	1325 26%*	4 16%~	8 17%~	21 41%	26 34%	38 38%	19 35%	94 32%	~	33%~	100%~	~	~	67%~	39%~	33%~	33%~	116 ~	42 35%	74 31%
POOR	70 20%	590 12%*	~	2 4%~	5 10%*	17 22%	31 31%*	15 28%	58 20%	~	33%~	~	40%~	33%~	17%~	22%~	20%~	70 ~	20 17%	50 21%	
#EXCELLENT + VERY GOOD + GOOD (NET)	170 48%	3206 63%*	21 84%~	37 79%~	25 49%	34 44%	31 31%*	20 37%	145 49%	1 100%~	1 33%~	~	3 60%~	~	18 44%~	4 44%~	161 47%~	170 100%~	57 ~	112 47%	
NOT ANSWERED	21	432		1	2	5	2		7						2	10			6	4	
VALID CASES	356	5122	25	47	51	77	100	54	297	1	3	1	5	3	41	9	339	170	186	119	236
NUMBER OF RESPONDENTS	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q37																					
EXCELLENT	36 10%	724 14%*	4 16%~	8 17%~	3 6%	8 10%	5 5%*	6 11%	29 10%	~	~	~	~	~	5 12%~	2 22%~	31 9%~	32 19%*	4 2%*	10 8%	25 11%
VERY GOOD	67 19%	1207 24%*	7 28%~	8 17%~	9 17%	16 20%	15 15%	12 22%	58 20%	~	1 33%~	~	2 40%~	~	6 14%~	2 22%~	63 18%~	45 26%*	20 11%*	27 22%	40 17%
GOOD	117 33%	1578 31%	6 24%~	19 40%~	18 35%	24 30%	32 33%	18 33%	100 34%	1 100%~	~	~	1 20%~	~	12 28%~	2 22%~	114 33%~	62 36%	52 28%	42 34%	75 32%
FAIR	106 30%	1184 23%*	7 28%~	10 21%~	16 31%	26 33%	33 34%	14 26%	83 28%	~	1 33%~	1 100%~	~	2 67%~	18 42%~	3 33%~	101 30%~	28 16%*	77 42%*	36 30%	70 30%
POOR	33 9%	395 8%	1 4%~	3 6%~	6 12%	6 7%	13 13%	4 7%	27 9%	~	1 33%~	~	2 40%~	1 33%~	2 5%~	~	33 10%~	3 2%*	30 16%*	7 6%	26 11%
#EXCELLENT + VERY GOOD + GOOD (NET)	220 61%	3509 69%*	17 68%~	35 73%~	30 58%	48 60%	52 53%	36 67%	187 63%	1 100%~	1 33%~	~	3 60%~	~	23 53%~	6 67%~	208 61%~	139 82%*	76 42%*	79 65%	140 59%
NOT ANSWERED	18	466			1	2	4		7								7		3	3	4
VALID CASES	359	5088	25	48	52	80	98	54	297	1	3	1	5	3	43	9	342	170	183	122	236
NUMBER OF RESPONDENTS	377 100%	5554 100%	25 100%	48 100%	53 100%	82 100%	102 100%	54 100%	304 100%	1 100%	3 100%	1 100%	5 100%	3 100%	43 100%	9 100%	349 100%	170 100%	186 100%	125 100%	240 100%

Q38 HAVE YOU HAD EITHER A FLU SHOT OR FLU SPRAY IN THE NOSE SINCE JULY 1, 2013?

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE	
Q38 #YES	189 53%	2344 47%*	8 36%~	13 27%~	27 52%	39 49%	59 61%	42 78%*	156 53%	1 100%~	2 67%~	1 100%~	1 20%~	2 67%~	24 59%~	3 33%~	181 54%~	73 44%*	110 61%*	56 47%	133 57%
NO	165 47%	2668 53%*	14 64%~	35 73%~	25 48%	40 51%	38 39%	12 22%*	138 47%	1 ~ 33%~	1 ~ 80%~	4 ~ 33%~	1 41%~	17 41%~	6 67%~	156 46%~	93 56%*	70 39%*	63 53%	101 43%	
DON'T KNOW	8	137	3			1	4		6					2		8	3	5	4	4	
NOT ANSWERED	15	405			1	2	1		4							4	1	1	2	2	
VALID CASES	354	5013	22	48	52	79	97	54	294	1	3	1	5	3	41	9	337	166	180	119	234
NUMBER OF RESPONDENTS	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE			
Q39																						
EVERY DAY	120 34%	1219 24%*	7 29%~	18 38%~	22 43%	36 45%*	29 29%	7 13%*	94 32%	~	~	~	80%~	~	47%~	20 11%~	1 34%~	117 32%	54 34%	62 34%	51 42%*	68 29%*
SOME DAYS	39 11%	519 10%	4 17%~	4 8%~	4 8%	7 9%	15 15%	5 9%	33 11%	~	~	100%~	~	33%~	9%~	4 11%~	1 11%~	37 11%~	12 7%*	26 14%*	10 8%	29 12%
NOT AT ALL	198 55%	3357 66%*	13 54%~	26 54%~	25 49%	37 46%	55 56%	41 77%*	168 57%	1 100%~	3 100%~	~	20%~	67%~	44%~	19 78%~	7 55%~	186 55%~	101 60%	95 52%	61 50%	137 59%
DON'T KNOW	2	16			1			1	2								2	1	1			2
NOT ANSWERED	18	443	1		1	2	3		7								7	2	2		3	4
VALID CASES	357	5095	24	48	51	80	99	53	295	1	3	1	5	3	43	9	340	167	183	122	234	
NUMBER OF RESPONDENTS	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	WORA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q40 NEVER	34 23%	387 21%	6 55%	9 41%	3 12%	10 25%	6 15%	26 22%	~	~	2 67%	6 26%	6 26%	34 24%	22 34%*	11 14%*	15 27%	19 21%		
SOMETIMES	28 19%	442 24%	2 18%	3 14%	6 24%	8 20%	7 17%	2 20%	23 19%	~	1 33%	3 13%	3 100%	2 17%	25 17%	11 17%	15 19%	7 12%	21 23%	
USUALLY	23 15%	333 18%	1 9%	3 14%	4 16%	8 20%	7 17%	23 19%	~	~	~	~	~	23 16%	10 16%	12 15%	8 14%	15 16%		
ALWAYS	64 43%	687 37%	2 18%	7 32%	12 48%	14 35%	20 50%	8 80%	48 40%	~	1 100%	14 ~	14 61%	62 43%	21 33%*	42 52%*	26 46%	37 40%		
#ALWAYS + USUALLY (NET)	87 58%	1020 55%	3 27%	10 45%	16 64%	22 55%	27 68%	8 80%	71 59%	~	1 100%	14 ~	14 61%	85 59%	31 48%*	54 68%*	34 61%	52 57%		
TOP BOX SCORE	64 43%	687 37%	2 18%	7 32%	12 48%	14 35%	20 50%	8 80%	48 40%	~	1 100%	~	14 61%	62 43%	21 33%*	42 52%*	26 46%	37 40%		
NOT ANSWERED	10	37			1	3	4	2	7			1	1	1	10	2	8	5	5	
VALID CASES	149	1849	11	22	25	40	40	10	120		1	3	23	2	144	64	80	56	92	
NUMBER OF RESPONDENTS	159	1886	11	22	26	43	44	12	127		1	4	1	24	2	154	66	88	61	97
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

			AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	WORA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE	
Q41 NEVER	65 43%	839 45%	8 73%	12 55%	6 24%	22 52%	15 38%	2 20%	53 43%	~	~	~	2 67%	1 100%	9 39%	1 50%	63 43%	34 53%*	28 35%*	25 44%	40 43%
SOMETIMES	40 27%	418 23%	2 18%	6 27%	10 40%	11 26%	9 23%	2 20%	35 29%	~	~	1 33%	4 17%	4 17%	1 50%	38 26%	18 28%	22 27%	13 23%	27 29%	
USUALLY	17 11%	263 14%	~	1 5%	2 8%	5 12%	7 17%	2 20%	13 11%	~	~	~	~	4 17%	4 12%	17 12%	5 8%	11 14%	5 9%	12 13%	
ALWAYS	28 19%	327 18%	1 9%	3 14%	7 28%	4 10%	9 23%	4 40%	21 17%	~	~	~	~	6 26%	6 19%	28 19%*	7 11%*	20 25%*	14 25%	14 15%	
#ALWAYS + USUALLY (NET)	45 30%	589 32%	1 9%	4 18%	9 36%	9 21%	16 40%	6 60%	34 28%	~	~	~	~	10 43%	10 31%	45 31%*	12 19%*	31 38%*	19 33%	26 28%	
TOP BOX SCORE	28 19%	327 18%	1 9%	3 14%	7 28%	4 10%	9 23%	4 40%	21 17%	~	~	~	~	6 26%	6 19%	28 19%*	7 11%*	20 25%*	14 25%	14 15%	
NOT ANSWERED	9	39			1	1	4	2	5			1	1	1		8	2	7	4	4	
VALID CASES	150	1847	11	22	25	42	40	10	122			3	1	23	2	146	64	81	57	93	
NUMBER OF RESPONDENTS	159 100%	1886 100%	11 100%	22 100%	26 100%	43 100%	44 100%	12 100%	127 100%			1 100%	4 100%	1 100%	24 100%	2 100%	154 100%	66 100%	88 100%	61 100%	97 100%

[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.

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ AS- PAC IND/ ALSK	AMER ILND NATV	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR	MALE	FE- MALE		
Q42 NEVER	73 48%	965 52%	7 64%	11 50%	10 40%	26 62%	16 40%	3 30%	59 48%	~	~	~	2 67%	1 100%	11 48%	2 100%	70 48%	34 52%	36 44%	30 53%	43 46%
SOMETIMES	36 24%	401 22%	2 18%	6 27%	7 28%	9 21%	8 20%	3 30%	32 26%	~	~	~	1 33%	~	2 9%	~	34 23%	20 31%	16 20%	11 19%	24 26%
USUALLY	13 9%	224 12%	~	1 5%	2 8%	4 10%	4 10%	2 20%	9 7%	~	~	~	~	~	4 17%	~	13 9%	1 2%*	12 15%*	1 2%*	12 13%*
ALWAYS	29 19%	255 14%	2 18%	4 18%	6 24%	3 7%	12 30%	2 20%	22 18%	~	~	~	~	~	6 26%	~	29 20%	10 15%	17 21%	15 26%	14 15%
#ALWAYS + USUALLY (NET)	42 28%	479 26%	2 18%	5 23%	8 32%	7 17%	16 40%	4 40%	31 25%	~	~	~	~	~	10 43%	~	42 29%	11 17%*	29 36%*	16 28%	26 28%
TOP BOX SCORE	29 19%	255 14%	2 18%	4 18%	6 24%	3 7%	12 30%	2 20%	22 18%	~	~	~	~	~	6 26%	~	29 20%	10 15%	17 21%	15 26%	14 15%
NOT ANSWERED	8	40			1	1	4	2	5			1	1		1		8	1	7	4	4
VALID CASES	151	1846	11	22	25	42	40	10	122			3	1	23	2	146	65	81	57	93	
NUMBER OF RESPONDENTS	159 100%	1886 100%	11 100%	22 100%	26 100%	43 100%	44 100%	12 100%	127 100%			1 100%	4 100%	1 100%	24 100%	2 100%	154 100%	66 100%	88 100%	61 100%	97 100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

Q43 DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ LLND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q43																					
YES	109 30%	1277 25%*	2 8%~	3 6%~	8 15%*	21 26%	45 45%*	29 54%*	87 29%	2 ~	1 67%~	1 100%~	1 ~	16 33%~	1 38%~	106 31%~	39 23%*	68 37%*	40 33%	68 29%	
NO	252 70%	3806 75%*	23 92%~	45 94%~	44 85%*	60 74%	54 55%*	25 46%*	213 71%	1 100%~	1 33%~	5 ~	2 100%~	26 67%~	8 62%~	238 69%~	131 77%*	115 63%*	83 67%	169 71%	
DON'T KNOW		62																			
NOT ANSWERED	16	409			1	1	3		4					1		5		3	2	3	
VALID CASES	361	5083	25	48	52	81	99	54	300	1	3	1	5	3	42	9	344	170	183	123	237
NUMBER OF RESPONDENTS	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ LLND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q44	WORA TOT ADLT																				
YES	54 18%	646 14%	5 ~13%	6 ~14%	13 ~20%	19 23%	11 23%	47 18%	~	~	~	~	~	5 15%	~	52 18%	15 10%*	37 26%*	13 13%	41 20%	
NO	252 82%	4029 86%	25 100%	34 87%	38 86%	53 80%	64 77%	37 77%	209 82%	1 100%	3 100%	1 100%	5 100%	1 100%	29 85%	7 100%	241 82%	141 90%*	107 74%*	87 87%	165 80%
DON'T KNOW	52	454	9	8	14	16	4	42					2	7	2	48	12	39	22	29	
NOT ANSWERED	19	424			1	2	3	2	6					2		8	2	3	3	5	
VALID CASES	306	4675	25	39	44	66	83	48	256	1	3	1	5	1	34	7	293	156	144	100	206
NUMBER OF RESPONDENTS	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q45 YES	161 45%	2037 40%*	5 20%~	9 19%~	20 38%	41 51%	51 51%	35 69%*	128 43%	1 100%~	2 67%~	1 100%~		1 ~	25 33%~	2 60%~	155 22%~	155 45%~	59 36%*	98 54%*	55 45%	106 45%
NO	196 55%	3086 60%*	20 80%~	39 81%~	32 62%	39 49%	49 49%	16 31%*	169 57%		1 ~		5 ~	2 100%~	17 67%~	40 40%~	186 78%~	186 55%~	107 64%*	85 46%*	67 55%	129 55%
NOT ANSWERED	20	431			1	2	2	3	7								8		4	3	3	5
VALID CASES	357	5123	25	48	52	80	100	51	297	1	3	1	5	3	42		9	341	166	183	122	235
NUMBER OF RESPONDENTS	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43		9	349	170	186	125	240
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q46.1	WORA TOT ADLT	OHP TOT ADLT	18	25	35	45	55	65													
YES	128 34%	1388 25%*	6	12	26	58	26	105				2	2	18	2	124	33	93	49	79	
			~ 13%	~ 23%*	32%	57%*	48%*	35%	~	~	~ 40%	~ 67%	~ 42%	~ 22%	~ 36%	~ 19%*	~ 50%*	39%	33%		
NO	249 66%	4166 75%*	25	42	41	56	44	28	199	1	3	1	3	1	25	7	225	137	93	76	161
			100%	~ 88%	~ 77%*	68%	43%*	52%*	65%	100%	~ 100%	~ 100%	~ 60%	~ 33%	~ 58%	~ 78%	~ 64%	~ 81%*	~ 50%*	61%	67%
VALID CASES	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
NUMBER OF RESPONDENTS	377 100%	5554 100%	25 100%	48 100%	53 100%	82 100%	102 100%	54 100%	304 100%	1 100%	3 100%	1 100%	5 100%	3 100%	43 100%	9 100%	349 100%	170 100%	186 100%	125 100%	240 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q46.2	WORA TOT ADLT	182	1754	1	6	13	31	62	29	113	3	1	2	1	19	4	135	46	94	53	89	
YES	OHP TOT ADLT	38%	32%*	4%~	13%~	25%*	38%	61%*	54%*	37%	~100%	~100%	40%~	33%~	44%~	44%~	39%~	27%*	51%*	42%	37%	
NO	OHP TOT ADLT	235	3800	24	42	40	51	40	25	191	1	3	2	24	5	214	124	92	72	151		
	OHP TOT ADLT	62%	68%*	96%~	88%~	75%*	62%	39%*	46%*	63%	100%~	~	~	60%~	67%~	56%~	56%~	61%~	73%*	49%*	58%	63%
VALID CASES	OHP TOT ADLT	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
NUMBER OF RESPONDENTS	OHP TOT ADLT	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
	OHP TOT ADLT	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE			
Q46.3 YES	88 23%	899 16%*	3 12%~	13 27%~	12 23%	18 22%	29 28%	13 24%	69 23%	1 100%~	1 33%~	1 100%~	2 40%~	13 ~ 30%~	1 11%~	87 25%~	30 18%*	54 29%*	29 23%	59 25%	
NO	289 77%	4655 84%*	22 88%~	35 73%~	41 77%	64 78%	73 72%	41 76%	235 77%	2 ~ 67%~	3 ~ 60%~	3 100%~	30 70%~	8 89%~	262 75%~	140 82%*	132 71%*	96 77%	181 75%		
VALID CASES	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
NUMBER OF RESPONDENTS	377 100%	5554 100%	25 100%	48 100%	53 100%	82 100%	102 100%	54 100%	304 100%	1 100%	3 100%	1 100%	5 100%	3 100%	43 100%	9 100%	349 100%	170 100%	186 100%	125 100%	240 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q47.1	WORA TOT ADLT	18	25	35	45	55	65														
	OHP TOT ADLT	24	34	44	54	64	OVER	WHTE	AMER	IAN	LLND	NATV	OTHR	TI	HIS- IC	HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE		
YES	30 8%	300 5%	~	~	2 4%	8 10%	17 17%*	3 6%	23 8%	~	~	1 100%~	~	5 12%~	29 ~	8%~	6 4%*	24 13%*	17 14%*	13 5%*	
NO	347 92%	5254 95%	25 100%~	48 100%~	51 96%	74 90%	85 83%*	51 94%	281 92%	1 100%	3 100%	5 100%	3 100%	38 88%	9 100%	320 92%~	164 96%*	162 87%*	108 86%*	227 95%*	
VALID CASES	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
NUMBER OF RESPONDENTS	377 100%	5554 100%	25 100%	48 100%	53 100%	82 100%	102 100%	54 100%	304 100%	1 100%	3 100%	1 100%	5 100%	3 100%	43 100%	9 100%	349 100%	170 100%	186 100%	125 100%	240 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLACK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q47.2	WORA TOT ADLT	18	25	35	45	55	65														
	OHP TOT ADLT																				
YES	30 8%	~	~	2%*	6%	19%*	9%	24 8%	~	~	~	~	~	12%~	~	9%~	8 5%*	22 12%*	16 13%*	14 6%	
NO	347 92%	100%~	100%~	98%*	94%	81%*	91%	280 92%	1 100%	3 100%	1 100%	5 100%	3 100%	38 88%	9 100%	319 91%	162 95%*	164 88%*	109 87%*	226 94%	
VALID CASES	377	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240	
NUMBER OF RESPONDENTS	377 100%	25 100%	48 100%	53 100%	82 100%	102 100%	54 100%	304 100%	1 100%	3 100%	1 100%	5 100%	3 100%	43 100%	9 100%	349 100%	170 100%	186 100%	125 100%	240 100%	

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLACK OR AFR-	ASIAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q47.3	WORA TOT ADLT	18	25	35	45	55	65														
	OHP TOT ADLT																				
YES	27 7%	1	1	4	14	7	22 7%						4 9%		27 8%	7 4%*	18 10%	10 8%	17 7%		
NO	350 93%	25 100%	47 98%	52 98%*	78 95%	88 86%*	47 87%	282 93%	1 100%	3 100%	1 100%	5 100%	3 91%	39 100%	9 100%	322 92%	163 96%*	168 90%	115 92%	223 93%	
VALID CASES	377	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240	
NUMBER OF RESPONDENTS	377 100%	25 100%	48 100%	53 100%	82 100%	102 100%	54 100%	304 100%	1 100%	3 100%	1 100%	5 100%	3 100%	43 100%	9 100%	349 100%	170 100%	186 100%	125 100%	240 100%	

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLACK OR AFR-	ASIAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	VERY GOOD & POOR	FAIR &	FE- MALE	MALE		
Q47.4																					
YES	111 29%	1125 20%*	4 ~ 8%	8 15%*	28 34%	42 41%*	29 54%*	92 30%	1 ~ 33%		1 ~ 20%	2 67%	15 35%	1 11%	108 31%	28 16%*	81 44%*	34 27%	77 32%		
NO	266 71%	4429 80%*	25 100%~	44 92%~	45 85%*	54 66%	60 59%*	25 46%*	212 70%	1 100%~	2 67%~	1 100%~	4 80%~	1 33%~	28 65%~	8 89%~	241 69%~	142 84%*	105 56%*	91 73%	163 68%
VALID CASES	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
NUMBER OF RESPONDENTS	377 100%	5554 100%	25 100%	48 100%	53 100%	82 100%	102 100%	54 100%	304 100%	1 100%	3 100%	1 100%	5 100%	3 100%	43 100%	9 100%	349 100%	170 100%	186 100%	125 100%	240 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q48																					
YES	150 42%	1783 35%*	4 17%~	16 33%~	26 49%	39 48%	46 47%	19 37%	129 43%		1 ~100%~	1 20%~	17 ~ 41%~	3 33%~	143 42%~	41 25%*	103 56%*	43 34%*	107 46%*		
NO	208 58%	3302 65%*	20 83%~	32 67%~	27 51%	43 52%	52 53%	33 63%	171 57%	3 ~100%~	4 ~ 80%~	3 ~100%~	24 59%~	6 67%~	200 58%~	124 75%*	80 44%*	82 66%*	126 54%*		
NOT ANSWERED	19	469	1				4	2	4	1			2		6	5	3		7		
VALID CASES	358	5085	24	48	53	82	98	52	300		3	1	5	3	41	9	343	165	183	125	233
NUMBER OF RESPONDENTS	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q49 YES	131 91%	1476 87%	1 25%	13 81%	23 92%	35 97%	43 96%	16 89%	114 91%	~	~	~100%	~	14 88%	2 100%	126 91%	31 78%	95 96%	39 98%	92 88%
NO	13 9%	228 13%	3 75%	3 19%	2 8%	1 3%	2 4%	2 11%	11 9%	~	~	~	~	2 12%	~	12 9%	9 23%	4 4%	1 3%	12 12%
NOT ANSWERED	6	88			1	3	1	1	4			1		1	5	1	4	3	3	
VALID CASES	144	1703	4	16	25	36	45	18	125			1		16	2	138	40	99	40	104
NUMBER OF RESPONDENTS	150 100%	1791 100%	4 100%	16 100%	26 100%	39 100%	46 100%	19 100%	129 100%			1 100%		17 100%	3 100%	143 100%	41 100%	103 100%	43 100%	107 100%

[ASKED IF Q48 = YES]

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q50																					
YES	WORA TOT ADLT	3492	12	29	43	69	86	240	1	2	1	2	3	35	8	274	109	169	96	192	
	OHP TOT ADLT	288	48%	60%	81%	85%	86%*	79%	100%	67%	100%	40%	100%	83%	89%	79%	65%*	92%*	77%	81%	
		80%	48%~	60%~	81%	85%	86%*	79%	100%	67%~	100%~	40%~	100%~	83%~	89%~	79%~	65%*	92%*	77%	81%	
NO	WORA TOT ADLT	1617	13	19	10	12	14	62		1		3		7	1	72	59	15	29	45	
	OHP TOT ADLT	74	52%	40%	19%	15%	14%*	21%		33%~		60%~		17%~	11%~	21%~	35%*	8%*	23%	19%	
		20%	52%~	40%~	19%	15%	14%*	21%		33%~		60%~		17%~	11%~	21%~	35%*	8%*	23%	19%	
NOT ANSWERED	WORA TOT ADLT	446				1	2	2						1		3	2	2		3	
	OHP TOT ADLT	15																			
VALID CASES	WORA TOT ADLT	5108	25	48	53	81	100	302	1	3	1	5	3	42	9	346	168	184	125	237	
NUMBER OF RESPONDENTS	OHP TOT ADLT	377	25	48	53	82	102	304	1	3	1	5	3	43	9	349	170	186	125	240	
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q51 YES	269 97%	3137 94%*	10 91%~	28 97%~	40 98%~	65 98%	84 99%	42 95%~	224 97%~	1 100%~	2 100%~	2 ~100%~	3 ~100%~	33 97%~	8 100%~	255 97%~	101 95%	159 99%	89 98%	180 97%	
NO	7 3%	193 6%*	1 9%~	1 3%~	1 2%~	1 2%	1 1%	2 5%~	6 3%~	~	~	~	~	1 3%~	7 ~	3%~	5 5%	2 1%	2 2%	5 3%	
NOT ANSWERED	12	173	1		2	3	1	5	10			1		1	12		3	8	5	7	
VALID CASES	276	3330	11	29	41	66	85	44	230	1	2		2	3	34	8	262	106	161	91	185
NUMBER OF RESPONDENTS	288 100%	3503 100%	12 100%	29 100%	43 100%	69 100%	86 100%	49 100%	240 100%	1 100%	2 100%	1 100%	2 100%	3 100%	35 100%	8 100%	274 100%	109 100%	169 100%	96 100%	192 100%

[ASKED IF Q50 = YES]

NQ52 WHAT IS YOUR AGE?

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
NQ52																					
18 TO 24	25 7%	872 16%*	25 100%	~	~	~	~	17 6%	1 ~ 33%	1 ~ 20%	6 ~ 14%		25 ~ 7%	21 12%*	4 2%*	7 6%	18 8%				
25 TO 34	51 14%	867 16%	~100%	48 ~	~	~	~	42 14%	~	~	5 ~ 12%	1 11%	47 13%	38 22%*	10 5%*	13 10%	35 15%				
35 TO 44	56 15%	843 15%	~	53 ~100%	~	~	~	44 14%	~	~	1 ~ 33%	8 19%	3 33%	51 15%	26 15%	26 14%	20 16%	34 14%			
45 TO 54	83 22%	1055 19%	~	~	82 ~100%	~	~	68 22%	~	~	1 ~ 20%	1 33%	11 26%	2 22%	79 23%	34 20%	43 23%	32 26%	50 21%		
55 TO 64	104 28%	1061 19%*	~	~	~	102 ~100%	~	86 28%	1 100%	1 33%	3 ~ 60%	9 ~ 21%	2 22%	95 27%	31 18%*	69 37%*	41 33%	61 25%			
65 TO 74	38 10%	478 9%	~	~	~	~	35 65%*	30 10%	1 ~ 33%	1 ~100%	~	3 ~ 7%	~	34 ~ 10%	15 9%	20 11%	9 7%	26 11%			
75 OR OLDER	20 5%	377 7%	~	~	~	~	19 35%*	17 6%	~	~	~	1 ~ 33%	1 2%	1 11%	18 5%	5 3%	14 8%	3 2%*	16 7%		
VALID CASES	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
NUMBER OF RESPONDENTS	377 100%	5554 100%	25 100%	48 100%	53 100%	82 100%	102 100%	54 100%	304 100%	1 100%	3 100%	1 100%	5 100%	3 100%	43 100%	9 100%	349 100%	170 100%	186 100%	125 100%	240 100%

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

NQ53 ARE YOU MALE OR FEMALE?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLACK OR AFR-	ASIAN IAN	NATV HAW/ LLND	AMER IND/ ALSK	OTHER	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FEMALE	
NQ53	WORA TOT ADLT	180	252	193	324	416	122*	101	33%	1	1	4	2	13	2	120	58	62	125	~	
MALE	OHP TOT ADLT	202	222	273	364	408	228*	33%	~	33%	100%	80%	67%	30%	22%	34%	34%	33%	100%	~	
FEMALE	WORA TOT ADLT	247	353	344	506	618	428*	203	67%	1	2	1	1	30	7	229	112	124	240	~	
	OHP TOT ADLT	353	322	73%	64%	60%	78%	67%	100%	67%	~	20%	33%	70%	78%	66%	66%	67%	~	100%	
VALID CASES	WORA TOT ADLT	377	554	485	826	1025	544	304	1	3	1	5	3	43	9	349	170	186	125	240	
NUMBER OF RESPONDENTS	OHP TOT ADLT	377	554	485	826	1025	544	304	1	3	1	5	3	43	9	349	170	186	125	240	
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q54																					
8TH GRADE OR LESS	19 5%	280 5%	1 4%~	3 ~	5 6%	3 6%	7 13%	12 4%	1 ~	2 33%~	1 ~	2 40%~	1 33%~	2 5%~	2 22%~	17 5%~	4 2%*	14 8%*	8 7%	11 5%	
SOME HIGH SCHOOL BUT DID NOT GRADUATE	67 19%	804 16%	5 20%~	8 17%~	7 13%	16 20%	11 21%	55 18%	1 ~	1 33%~	1 ~	1 20%~	9 ~	9 21%~	1 11%~	61 18%~	29 17%	36 20%	20 16%	47 20%	
HIGH SCHOOL GRADUATE OR GED	150 42%	1985 39%	14 56%~	20 42%~	25 47%	32 39%	40 40%	125 42%	1 ~	1 33%~	1 100%~	2 40%~	2 67%~	18 42%~	3 33%~	146 42%~	72 43%	73 40%	63 52%*	87 37%*	
SOME COLLEGE OR 2-YEAR DEGREE	110 31%	1653 32%	5 20%~	18 38%~	18 34%	26 32%	11 21%	95 32%	1 100%~	~	~	~	~	12 28%~	3 33%~	107 31%~	56 34%	52 28%	27 22%*	83 35%*	
4-YEAR COLLEGE GRADUATE	8 2%	237 5%*	~	~	~	3 4%	3 3%	2 4%	8 3%~	~	~	~	~	~	~	8 2%~	3 2%	5 3%	4 3%	4 2%	
MORE THAN 4-YEAR COLLEGE DEGREE	6 2%	145 3%	~	2 4%~	~	~	1 1%	3 6%	4 1%	~	~	~	~	2 5%~	6 ~	3 2%~	3 2%	~	6 3%~		
NOT ANSWERED	17	450				3	1	5							4	3	3	3	2		
VALID CASES	360	5104	25	48	53	82	99	53	299	1	3	1	5	3	43	9	345	167	183	122	238
NUMBER OF RESPONDENTS	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q55 ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q55																					
YES HISPANIC OR LATINO	9 3%	549 11%*	1 ~	3 2%	2 6%	2 2%	1 2%	4 1%	~	~	~	20%~	1 33%~	1 2%	1 100%~	9 ~	4 2%	5 3%	2 2%	7 3%	
NO NOT HISPANIC OR LATINO	349 97%	4520 89%*	25 100%~	47 98%~	50 94%	79 98%	95 98%	52 98%	294 99%	1 100%	3 100%	1 100%	4 80%~	2 67%~	42 98%~	349 ~	161 98%	178 97%	120 98%	229 97%	
NOT ANSWERED	19	485				1	5	1	6							5	3	3	4		
VALID CASES	358	5069	25	48	53	81	97	53	298	1	3	1	5	3	43	9	349	165	183	122	236
NUMBER OF RESPONDENTS	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q56.1 WHAT IS YOUR RACE? RESPONSE: WHITE

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q56.1	WORA TOT ADLT	18	25	35	45	55	65														
YES	OHP TOT ADLT	23	46	50	78	95	51	304					40	5	333	161	174	114	230		
		92%~	96%~	94%	95%	93%	94%	100%~	~	~	~	~	~	93%~	56%~	95%~	95%*	94%	91%	96%*	
NO	OHP TOT ADLT	2	2	3	4	7	3		1	3	1	5	3	3	4	16	9	12	11	10	
		8%~	4%~	6%	5%	7%	6%	~100%	~100%	~100%	~100%	~100%	~	7%~	44%~	5%~	5%*	6%	9%	4%*	
VALID CASES	OHP TOT ADLT	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240	
NUMBER OF RESPONDENTS		25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240	
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE			
Q56.2	WORA TOT ADLT	18	25	35	45	55	65															
YES	OHP TOT ADLT	1				1		1						1		1		1				
		0.3%				1%		~100%						~0.3%		~0.6%		~0.4%				
NO	OHP TOT ADLT	376	5347	25	48	53	82	101	54	304	3	1	5	3	43	9	348	169	186	125	239	
		100%	96%*	100%	100%	100%	100%	99%	100%	100%	100%	100%	100%	100%	100%	100%	100%	99%	100%	100%	100%	
VALID CASES	OHP TOT ADLT	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
NUMBER OF RESPONDENTS		377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q56.3 WHAT IS YOUR RACE? RESPONSE: ASIAN

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q56.3	WORA TOT ADLT	18	25	35	45	55	65														
YES	OHP TOT ADLT	2				1	1			3			1		4	2	2	2	2		
		8%	~	~	~	1%	2%	~	~100%	~	~	~	2%	~	1%	1%	1%	2%	0.8%		
NO	OHP TOT ADLT	23	48	53	82	101	53	304	1	1	5	3	42	9	345	168	184	123	238		
		92%	100%	100%	100%	99%	98%	100%	100%	~100%	~100%	~100%	98%	100%	99%	99%	99%	98%	99%		
VALID CASES	OHP TOT ADLT	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240	
NUMBER OF RESPONDENTS	OHP TOT ADLT	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240	
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q56.4	WORA TOT ADLT	18	25	35	45	55	65														
	OHP TOT ADLT	24	34	44	54	64	OVER	WHTE	AMER	IAN	LLND	NATV	OTHR	TI	HIS- IC	HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
YES	2 0.5%				1 1%		1 2%				1 ~100%			1 ~2%		2 ~0.6%	1 ~0.6%	1 0.5%	1 0.8%	1 0.4%	
NO	375 99%	25 100%	48 100%	53 100%	81 99%	102 100%	53 98%	304 100%	1 100%	3 100%		5 ~100%	3 ~100%	42 98%	9 ~100%	347 99%	169 99%	185 99%	124 99%	239 100%	
VALID CASES	377	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240	
NUMBER OF RESPONDENTS	377 100%	25 100%	48 100%	53 100%	82 100%	102 100%	54 100%	304 100%	1 100%	3 100%	1 100%	5 100%	3 100%	43 100%	9 100%	349 100%	170 100%	186 100%	125 100%	240 100%	

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q56.5	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
YES	43 11%	410 7%*	6 24%~	5 10%~	8 15%	9 11%	12 12%	3 6%	~	~	~	~100%~	~	88%~	22%~	12%~	19% 11%	22% 12%	16% 13%	27% 11%	
NO	334 89%	5144 93%*	19 76%~	43 90%~	45 85%	73 89%	90 88%	51 94%	304 100%	1 100%	3 100%	1 100%	~	3 ~100%	5 12%~	7 78%~	308 88%~	151 89%	164 88%	109 87%	213 89%
VALID CASES	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
NUMBER OF RESPONDENTS	377 100%	5554 100%	25 100%	48 100%	53 100%	82 100%	102 100%	54 100%	304 100%	1 100%	3 100%	1 100%	5 100%	3 100%	43 100%	9 100%	349 100%	170 100%	186 100%	125 100%	240 100%

Q56.6 WHAT IS YOUR RACE? RESPONSE: OTHER

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE			
Q56.6	WORA TOT ADLT																					
YES	OHP TOT ADLT	13	3	1	4	4	1	3					3	10	2	11	3	10	3	10		
		3%	6%*	~ 2%	8%	5%	1%*	6%	~	~	~	~	~100%	23%	22%	3%	2%	5%*	2%	4%		
NO	OHP TOT ADLT	364	5231	25	47	49	78	101	51	304	1	3	1	5	33	7	338	167	176	122	230	
		97%	94%*	100%	98%	92%	95%	99%*	94%	100%	100%	100%	100%	100%	~ 77%	78%	97%	98%	95%*	98%	96%	
VALID CASES	OHP TOT ADLT	377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
NUMBER OF RESPONDENTS		377	5554	25	48	53	82	102	54	304	1	3	1	5	3	43	9	349	170	186	125	240
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q57 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q57																					
YES	36 12%	778 19%*	3 18%~	3 10%~	3 7%~	8 12%	8 9%	10 22%~	30 12%~	3 ~100%~		1 ~	2 ~	1 33%~	2 11%~	1 17%~	35 13%~	17 13%	17 11%	18 17%	18 10%
NO	256 88%	3221 81%*	14 82%~	28 90%~	40 93%~	58 88%	80 91%	36 78%~	228 88%~	1 100%~	1 ~100%~	4 100%~	2 67%~	16 89%~	5 83%~	244 87%~	111 87%	139 89%	85 83%	171 90%	
NOT ANSWERED	2	98					1						1		1	1				1	
VALID CASES	292	3999	17	31	43	66	88	46	258	1	3	1	4	3	18	6	279	128	156	103	189
NUMBER OF RESPONDENTS	294	4097	17	31	43	66	88	47	258	1	3	1	4	3	19	6	280	129	156	103	190
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q58.1	WORA TOT ADLT																				
YES	21 58%	312 49%	1 33%	2 67%	4 ~ 50%	6 75%	8 80%	16 53%	2 ~ 67%		1 ~ 100%	2 100%	1 100%	20 57%	6 35%	13 76%	9 50%	12 67%			
NO	15 42%	325 51%	2 67%	1 33%	3 100%	4 50%	2 25%	2 20%	14 47%	1 ~ 33%				15 43%	11 65%	4 24%	9 50%	6 33%			
VALID CASES	36	637	3 100%	3 100%	3 100%	8 100%	8 100%	10 100%	30 100%	3 100%		1 100%	2 100%	1 100%	35 100%	17 100%	17 100%	18 100%	18 100%		
NUMBER OF RESPONDENTS	36 100%	637 100%	3 100%	3 100%	3 100%	8 100%	8 100%	10 100%	30 100%	3 100%		1 100%	2 100%	1 100%	35 100%	17 100%	17 100%	18 100%	18 100%		

[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						ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q58.2																				
YES	27 75%	277 43%	1 33%	3 100%	1 33%	6 75%	7 88%	9 90%	22 73%	2 67%	1 100%	2 100%	1 100%	26 74%	10 59%	16 94%	12 67%	15 83%		
NO	9 25%	360 57%	2 67%	2 67%	2 25%	1 13%	1 10%	8 27%	1 33%	~	~	~	~	9 26%	7 41%	1 6%	6 33%	3 17%		
VALID CASES	36	637	3	3	3	8	8	10	30	3	1	2	1	35	17	17	18	18		
NUMBER OF RESPONDENTS	36 100%	637 100%	3 100%	3 100%	3 100%	8 100%	8 100%	10 100%	30 100%	3 100%	1 100%	2 100%	1 100%	35 100%	17 100%	17 100%	18 100%	18 100%		

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

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q58.3	WORA TOT ADLT																		
YES	8 225			2	1	3	1	8						8		5	3	5	3
	22%			67%	13%	38%	10%	27%						23%		29%	18%	28%	17%
NO	28 412	3	3	1	7	5	9	22	3		1	2	1	27	12	14	13	15	
	78%	65%	100%	100%	33%	88%	63%	90%	73%	100%		100%	100%	100%	77%	71%	82%	72%	83%
VALID CASES	36 637	3	3	3	8	8	10	30	3		1	2	1	35	17	17	18	18	
NUMBER OF RESPONDENTS	36 637	3	3	3	8	8	10	30	3		1	2	1	35	17	17	18	18	
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	

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

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q58.4	WORA TOT ADLT																			
YES	2 6%	83			1	1	1	1	1					2	1	1			2	
		~	~	~	13%	10%	3%	~	33%	~	~	~	~	6%	6%	6%			~	11%
NO	34 94%	554 87%	3 100%	3 100%	3 100%	7 88%	8 100%	9 90%	29 97%	2 67%		1 100%	2 100%	1 100%	33 94%	16 94%	16 94%	18 100%	16 89%	
VALID CASES	36	637	3	3	3	8	8	10	30	3		1	2	1	35	17	17	18	18	
NUMBER OF RESPONDENTS	36 100%	637 100%	3 100%	3 100%	3 100%	8 100%	8 100%	10 100%	30 100%	3 100%		1 100%	2 100%	1 100%	35 100%	17 100%	17 100%	18 100%	18 100%	

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

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q58.5	YES	1	59	1	~	~	~	1	~	~	~	~	~	1	1	1	1	1	1
		3%	9%	33%	~	~	~	3%	~	~	~	~	~	3%	6%	~	~	~	6%
	NO	35	578	2	3	3	8	8	10	29	3	1	2	1	34	16	17	18	17
		97%	91%	67%	100%	100%	100%	100%	97%	~100%	~	~100%	~100%	100%	97%	94%	100%	100%	94%
	VALID CASES	36	637	3	3	3	8	8	10	30	3	1	2	1	35	17	17	18	18
	NUMBER OF RESPONDENTS	36	637	3	3	3	8	8	10	30	3	1	2	1	35	17	17	18	18
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

NQ13 RATING OF ALL HEALTH CARE

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
NQ13 0-6	80 28%	821 21%*	3 20%~	11 31%~	14 34%~	16 26%	19 23%	15 33%~	62 26%	1 ~	1 50%~	2 ~	11 33%~	1 67%~	5 71%~	73 27%~	21 18%*	52 33%*	19 21%	59 31%
7-8	99 35%	1319 34%	8 53%~	11 31%~	12 29%~	25 40%	29 35%	11 24%~	84 36%	~	~	~	1 33%~	10 29%~	1 14%~	95 35%~	44 38%	52 33%	35 39%	62 32%
9-10	107 37%	1746 45%*	4 27%~	13 37%~	15 37%~	21 34%	35 42%	19 42%~	88 38%	1 100%~	1 50%~	2 ~	14 67%~	1 40%~	102 38%~	52 44%*	54 34%	36 40%	71 37%	
VALID CASES	286	3886	15	35	41	62	83	45	234	1	2	3	3	35	7	270	117	158	90	192
NUMBER OF RESPONDENTS	286 100%	3886 100%	15 100%	35 100%	41 100%	62 100%	83 100%	45 100%	234 100%	1 100%	2 100%	3 100%	3 100%	35 100%	7 100%	270 100%	117 100%	158 100%	90 100%	192 100%
MEAN	2.09	2.24	2.07	2.06	2.02	2.08	2.19	2.09	2.11	3.00	2.00	2.33	1.33	2.09	1.43	2.11	2.26	2.01	2.19	2.06
p stat_(*=Sig @ p<=.05)		.002*	~	~	~	.876	.183	~	.459	~	~	~	~	~	~	~	.002*	.056	.169	.331

[ASKED IF Q7 >= 1 TIME]

NQ23 RATING OF PERSONAL DOCTOR

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
NQ23 0-6	55 20%	644 16%	4 24%~	12 36%~	9 21%~	13 20%	11 14%	5 13%~	44 19%~	1 ~ 50%~	1 ~ 50%~	7 ~ 21%~	1 17%~	53 20%~	17 14%*	34 24%	16 17%	38 21%		
7-8	74 27%	927 23%	9 53%~	12 36%~	9 21%~	21 32%	15 19%	7 18%~	63 27%~	~	~	1 ~ 33%~	9 26%~	4 67%~	70 27%~	48 39%*	25 17%*	24 26%	50 27%	
9-10	150 54%	2413 61%*	4 24%~	9 27%~	25 58%~	32 48%	51 66%*	26 68%~	123 53%~	1 100%~	1 50%~	1 ~ 50%~	2 67%~	18 53%~	1 17%~	141 53%~	59 48%	85 59%	53 57%	94 52%
VALID CASES	279	3984	17	33	43	66	77	38	230	1	2	2	3	34	6	264	124	144	93	182
NUMBER OF RESPONDENTS	279 100%	3984 100%	17 100%	33 100%	43 100%	66 100%	77 100%	38 100%	230 100%	1 100%	2 100%	2 100%	3 100%	34 100%	6 100%	264 100%	124 100%	144 100%	93 100%	182 100%
MEAN	2.34	2.44	2.00	1.91	2.37	2.29	2.52	2.55	2.34	3.00	2.00	2.00	2.67	2.32	2.00	2.33	2.34	2.35	2.40	2.31
p stat_(*=Sig @ p<=.05)		.025*	~	~	~.534	.019*	~	~	~	~	~	~	~	~	~	~.973	.766	.393	.344	

[ASKED IF Q15 = YES]

NQ27 RATING OF SPECIALIST SEEN MOST OFTEN

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
NQ27 0-6	20 16%	230 13%	1 14%~	7 54%~	7 32%~	2 6%~	2 5%~	1 8%~	16 15%~	~	~	~	~	1 ~100%~	3 20%~	20 ~ 16%~	9 19%~	9 12%	7 21%~	13 14%~		
7-8	37 29%	475 27%	3 43%~	3 23%~	4 18%~	15 45%~	8 20%~	4 31%~	31 28%~	1 ~100%~	~	~	~	4 ~ 27%~	4 50%~	1 50%~	35 28%~	15 31%~	22 29%	13 38%~	24 25%~	
9-10	72 56%	1078 60%	3 43%~	3 23%~	11 50%~	16 48%~	31 76%~	8 62%~	62 57%~	1 100%~	~	~	~	8 ~ 53%~	8 50%~	1 56%~	70 50%~	24 50%~	45 59%	14 41%~	58 61%~	
VALID CASES	129	1782	7	13	22	33	41	13	109	1	1			1	15	2	125	48	76	34	95	
NUMBER OF RESPONDENTS	129 100%	1782 100%	7 100%	13 100%	22 100%	33 100%	41 100%	13 100%	109 100%	1 100%	1 100%			1 100%	15 100%	2 100%	125 100%	48 100%	76 100%	34 100%	95 100%	
MEAN	2.40	2.48	2.29	1.69	2.18	2.42	2.71	2.54	2.42	3.00	2.00			1.00	2.33	2.50	2.40	2.31	2.47	2.21	2.47	
p stat_(*=Sig @ p<=.05)		.255	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

NQ35 RATING OF HEALTH PLAN

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE			
NQ35	WORA TOT ADLT																					
0-6	109 32%	1152 23%*	8 36%~	14 31%~	19 37%	32 44%*	23 24%*	12 23%	88 31%	1 ~	2 50%~	2 ~	14 67%~	35%~	3 33%~	104 32%~	40 25%*	63 36%	30 26%	78 35%		
7-8	116 34%	1595 32%	7 32%~	17 38%~	17 33%	25 34%	33 34%	16 31%	97 34%	~	~	~	1 ~	15 33%~	3 33%~	110 34%~	60 38%	52 30%	42 37%	73 32%		
9-10	120 35%	2187 44%*	7 32%~	14 31%~	15 29%	16 22%*	41 42%	24 46%	99 35%	1 100%~	1 50%~	1 100%~	3 60%~	11 ~	3 27%~	111 33%~	58 34%~	61 35%	43 37%	75 33%		
VALID CASES		345	4933	22	45	51	73	97	52	284	1	2	1	5	3	40	9	325	158	176	115	226
NUMBER OF RESPONDENTS		345	4933	22	45	51	73	97	52	284	1	2	1	5	3	40	9	325	158	176	115	226
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
MEAN		2.03	2.21	1.95	2.00	1.92	1.78	2.19	2.23	2.04	3.00	2.00	3.00	2.20	1.33	1.93	2.00	2.02	2.11	1.99	2.11	1.99
p stat_(*=Sig @ p<=.05)		.000*	~	~	.297	.003*	.029*	.058	.746	~	~	~	~	~	~	~	~	.085	.317	.193	.158	

NQ35Z RATING OF INTERPRETER

	WORA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN-	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE
NQ35Z 0-6		6 8%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
7-8		26 31%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
9-10		52 62%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
VALID CASES NUMBER OF RESPONDENTS		85 85 100%																
MEAN		2.54																
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND 35W = SOMETIMES OR USUALLY OR ALWAYS]

GETTING NEEDED CARE

	WORA TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHER	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE		
NPRBSEE4 NQ25	2.25	2.27	1.57	1.81	2.17	2.49	2.39	2.19	2.24	3.00	3.00				2.00	2.24	2.00	2.25	2.19	2.26	2.28	2.24
p stat_(*=Sig @ p<=.05)		.829	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.504	.966	~	~
NCARNES4 NQ14	2.21	2.31	1.67	1.94	2.24	2.15	2.34	2.43	2.24	3.00	2.00		2.33	1.33	2.18	1.62	2.23	2.32	2.14	2.31	2.17	
p stat_(*=Sig @ p<=.05)		.027*	~	~	~	.529	.070	~	.190	~	~	~	~	~	~	~	~	~	.052	.108	.157	.268
COMPOSITE	2.23	2.29	1.62	1.88	2.21	2.32	2.36	2.31	2.24	3.00	2.50	x	2.33	1.67	2.21	1.81	2.24	2.26	2.20	2.29	2.21	
p stat_(*=Sig @ p<=.05)		.611	~	~	~	.721	.528	~	.873	~	~	~	~	~	~	~	~	~	.873	.778	.741	.773

GETTING CARE QUICKLY

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NCARSN4 NQ4	2.36	2.38	2.00	2.36	2.42	2.25	2.41	2.42	2.41				2.00	1.00	2.11	1.75	2.37	2.42	2.32	2.37	2.36
p stat_(*=Sig @ p<=.05)		.807	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.336	.539	~	~
NAPGET4 NQ6	2.38	2.29	2.00	2.12	2.50	2.33	2.55	2.40	2.40	3.00	3.00		2.00	1.33	2.33	1.80	2.40	2.41	2.35	2.48	2.34
p stat_(*=Sig @ p<=.05)		.072	~	~	~.585	.027*	~	~	~	~	~	~	~	~	~	~	~	.609	.421	.159	.194
COMPOSITE	2.37	2.33	2.00	2.24	2.46	2.29	2.48	2.41	2.41	3.00	3.00	x	2.00	1.17	2.22	1.78	2.38	2.42	2.34	2.43	2.35
p stat_(*=Sig @ p<=.05)		.785	~	~	~.774	.646	~	.540	~	~	~	~	~	~	~	~	~	.780	.795	.799	.815

HOW WELL DOCTORS COMMUNICATE

	AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NDREXPL4 NQ17	2.52	2.60	2.15	2.28	2.53	2.55	2.69	2.47	2.54	3.00	2.00	3.00	2.67	2.41	2.14	2.52	2.59	2.47	2.51	2.52
p stat_(*=Sig @ p<=.05)		.078	~	~	~.721	.004*	~	~	~	~	~	~	~	~	~	~	.162	.157	.859	1.00
NDRLSTN4 NQ18	2.45	2.57	2.38	2.16	2.40	2.47	2.58	2.43	2.48	3.00	2.50	3.00	2.33	2.21	2.00	2.45	2.58	2.35	2.48	2.43
p stat_(*=Sig @ p<=.05)		.021*	~	~	~.810	.085	~	~	~	~	~	~	~	~	~	~	.020*	.015*	.686	.444
NDRESPU4 NQ19	2.50	2.65	2.54	2.28	2.55	2.51	2.59	2.39	2.53	3.00	2.50	3.00	2.67	2.24	2.29	2.49	2.62	2.41	2.55	2.47
p stat_(*=Sig @ p<=.05)		.002*	~	~	~.939	.241	~	~	~	~	~	~	~	~	~	~	.023*	.028*	.472	.348
NDRTMEN4 NQ20	2.41	2.46	2.31	2.00	2.45	2.43	2.57	2.41	2.45	3.00	2.50	2.67	2.07	2.14	2.41	2.50	2.34	2.44	2.39	
p stat_(*=Sig @ p<=.05)		.338	~	~	~.818	.021*	~	~	~	~	~	~	~	~	~	~	.125	.098	.639	.546
COMPOSITE	2.47	2.57	2.35	2.18	2.48	2.49	2.61	2.43	2.50	3.00	2.38	x 3.00	2.58	2.23	2.14	2.47	2.57	2.39	2.50	2.45
p stat_(*=Sig @ p<=.05)		.619	~	~	~.959	.682	~	~	~	~	~	~	~	~	~	~	.675	.658	.934	.892

CUSTOMER SERVICE

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NPBCLCS4 NQ31	2.23	2.14	1.80	2.30	2.07	2.12	2.36	2.44	2.24			3.00	1.50	2.12	2.25	2.22	2.26	2.20	2.33	2.17	
p stat_(*=Sig @ p<=.05)		.336	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCSRESP NQ32	2.59	2.59	2.80	2.40	2.50	2.56	2.71	2.56	2.58			3.00	1.50	2.87	2.00	2.61	2.67	2.52	2.65	2.56	
p stat_(*=Sig @ p<=.05)		.973	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.41	2.37	2.30	2.35	2.29	2.34	2.53	2.50	2.41	x	x	x	3.00	1.50	2.50	2.13	2.42	2.46	2.36	2.49	2.37
p stat_(*=Sig @ p<=.05)		.883	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

SHARED DECISION MAKING

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHER	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE
NRXWHY NQ10	2.19	2.23	1.50	2.00	2.32	2.20	2.17	2.40	2.18	3.00	2.00	1.67	2.00	2.40	1.57	2.21	2.11	2.23	2.08	2.26
p stat_(*=Sig @ p<=.05)		.544	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.368	.404	.189	.122
NRXWYNT NQ11	1.81	1.87	1.33	1.46	1.77	1.82	1.87	2.08	1.81	3.00	1.00	2.00	2.00	1.86	1.57	1.81	1.79	1.81	1.73	1.86
p stat_(*=Sig @ p<=.05)		.325	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.855	.986	.382	.305
NRXBST NQ12	2.38	2.44	2.67	2.38	2.27	2.31	2.40	2.60	2.35	3.00	3.00	2.33	3.00	2.52	1.86	2.41	2.32	2.42	2.35	2.41
p stat_(*=Sig @ p<=.05)		.384	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.575	.479	.753	.575
COMPOSITE	2.13	2.18	1.83	1.95	2.12	2.11	2.15	2.36	2.11	3.00	2.00	x 2.00	2.33	2.26	1.67	2.14	2.08	2.15	2.05	2.17
p stat_(*=Sig @ p<=.05)		.795	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.867	.874	.807	.752

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

	WORA TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
PRBSEE4 Q25	76%	78%	43%	44%	74%	89%	84%	75%	74%	100%	100%			100%	82%	67%	76%	67%	79%	83%	73%
CARNES4 Q14	77%	82%	53%	66%	81%	75%	82%	84%	79%	100%	50%		67%	33%	76%	50%	78%	85%	72%	86%	73%
AVERAGE	76.6	79.8	48.1	54.7	77.4	81.6	83.2	79.5	76.3	x	x	x	x	x	79.4	50.0	76.8	76.3	75.6	84.5	73.2

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

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE	
CARSN4 Q4	86%	82%	75%	82%	88%	91%	84%	84%	88%				100%	0%	79%	50%	87%	88%	83%	91%	83%
APGET4 Q6	83%	79%	73%	71%	87%	81%	88%	86%	84%	100%	100%		67%	33%	79%	60%	83%	85%	80%	86%	81%
AVERAGE	84.5	80.1	74.2	76.4	87.7	85.7	85.9	85.0	85.8	x	x	x	x	x	78.9	55.0	85.0	86.5	81.6	88.9	82.1

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

	WORA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE			
DREXPL4 Q17	89%	92%	69%	78%	88%	90%	97%	86%	90%	100%	50%	100%	100%	79%	86%	88%	92%	86%	89%	88%	
DRLSTN4 Q18	82%	89%	85%	69%	80%	83%	86%	80%	83%	100%	100%	100%	67%	72%	86%	81%	89%	76%	82%	81%	
DRESPU4 Q19	85%	91%	85%	75%	85%	85%	90%	81%	86%	100%	100%	100%	100%	76%	100%	84%	92%	79%	90%	82%	
DRTMEN4 Q20	85%	86%	92%	71%	83%	83%	93%	82%	86%	100%	100%	100%	100%	71%	71%	85%	90%	80%	87%	83%	
AVERAGE	85.0	89.3	82.7	73.2	83.8	85.1	91.6	82.3	85.9	x	x	x	x	x	74.8	85.7	84.6	90.7	80.5	87.2	83.5

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

	WORA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE			
PBCLCS4 Q31	77%	73%	60%	90%	57%	75%	84%	89%	77%					100%	50%	75%	100%	75%	81%	73%	81%	75%
CSRESP Q32	91%	91%	100%	90%	93%	88%	92%	89%	91%					100%	50%	100%	75%	92%	93%	90%	92%	90%
AVERAGE	84.1	82.1	80.0	90.0	75.0	81.3	87.8	88.9	84.0	x	x	x	x	x	x	87.5	87.5	83.5	87.0	81.5	86.9	82.7

SHARED DECISION MAKING (A LOT/YES + SOME) -- GLOBAL PROPORTION COMPOSITE

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE			
RXWHY Q10	78%	80%	50%	69%	82%	77%	79%	84%	75%	100%	100%	67%	100%	90%	57%	78%	72%	81%	78%	78%	
RXWYNT Q11	57%	61%	33%	31%	57%	59%	62%	72%	55%	100%	0%	100%	100%	67%	57%	57%	57%	58%	54%	60%	
FRXBST Q12	69%	72%	83%	69%	63%	66%	70%	80%	67%	100%	100%	67%	100%	76%	43%	71%	66%	71%	67%	70%	
AVERAGE	68.0	70.8	55.6	56.4	67.4	67.2	70.2	78.7	66.0	x	x	x	x	x	77.6	52.4	68.8	64.8	69.8	66.5	69.3

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
Q1	WORA TOT CHLD																			
YES	340	5863	1	62	101	83	93	245	2	2	1	6	13	42	58	267	309	17	256	84
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
NOT ANSWERED	4	155				2	2	3							1	2	4		4	
VALID CASES	340	5863	1	62	101	83	93	245	2	2	1	6	13	42	58	267	309	17	256	84
NUMBER OF RESPONDENTS	344	6018	1	62	101	85	95	248	2	2	1	6	13	42	59	269	313	17	260	84
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q3 YES	111 33%	1775 30%	19 ~ 32%	36 36%	21 26%	35 37%	83 34%				1 ~100%	4 67%	2 15%	16 38%	17 29%	91 34%	102 33%	6 35%	79 31%	32 39%
Q3 NO	225 67%	4117 70%	1 100%	41 68%	63 64%	61 74%	59 63%	161 66%	2 100%	2 100%		2 ~ 33%	11 85%	26 62%	42 71%	174 66%	208 67%	11 65%	175 69%	50 61%
NOT ANSWERED	8	126		2	2	3	1	4							4	3		6	2	
VALID CASES	336	5892	1	60	99	82	94	244	2	2	1	6	13	42	59	265	310	17	254	82
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC	
Q4 NEVER	1 1%	28 2%	~	~	3%~	~	~	1%~	~	~	~	~	~	~	1%~	1	1	~	1	3%~	
SOMETIMES	3 3%	167 10%*	~	6%~	3%~	5%~	~	1%~	~	~	~	25%~	~	7%~	12%~	2	1	3	4%~	~	
USUALLY	18 18%	270 16%	~	17%~	3	2	4	9	13	~	~	~	50%~	20%~	3	4	14	17	1	12	6
ALWAYS	79 78%	1252 73%	~	78%~	14	30	15	20	59	~	~	100%~	75%~	50%~	73%~	11	65	73	4	55	24
#ALWAYS + USUALLY (NET)	97 96%	1522 89%*	~	94%~	17	32	19	29	72	~	~	100%~	75%~	100%~	93%~	15	79	90	5	67	30
TOP BOX SCORE	79 78%	1252 73%	~	78%~	14	30	15	20	59	~	~	100%~	75%~	50%~	73%~	11	65	73	4	55	24
NOT ANSWERED	10	136		1	2	1	6	9						1		10	8	1	9	1	
VALID CASES	101	1718		18	34	20	29	74				1	4	2	15	17	81	94	5	70	31
NUMBER OF RESPONDENTS	111	1854		19	36	21	35	83				1	4	2	16	17	91	102	6	79	32
	100%	100%		100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q3 = YES]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q5																				
YES	230 68%	3764 65%	1 100%	50 83%*	65 66%	48 59%	66 69%	169 69%	2 100%	2 100%	1 100%	6 100%	10 77%	23 55%	44 75%	180 68%	208 67%	17 100%	163 65%*	67 80%*
NO	106 32%	2063 35%		10 ~ 17%*	34 34%	33 41%	29 31%	76 31%					3 ~ 23%	19 45%	15 25%	86 32%	103 33%		89 ~ 35%*	17 20%*
NOT ANSWERED	8	192		2	2	4		3							3		2		8	
VALID CASES	336	5826	1	60	99	81	95	245	2	2	1	6	13	42	59	266	311	17	252	84
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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?

	WORA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC	
Q6 NEVER		57 2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	20 10%	442 13%	~	4 9%	4 7%	4 10%	8 14%	13 8%	~	~	~	~	5 10%	2 10%	9 23%	11 7%	18 9%	2 13%	15 10%	5 8%
USUALLY	40 19%	870 25%*	~	4 9%	12 20%	9 21%	15 25%	29 19%	1 100%	~	~	1 17%	3 30%	3 14%	6 15%	33 20%	34 18%	5 33%	25 17%	15 24%
ALWAYS	149 71%	2092 60%*	1 100%	39 83%	44 73%	29 69%	36 61%	113 73%	1 100%	1 100%	5 83%	2 20%	16 76%	25 63%	120 73%	139 73%	8 53%	106 73%	43 68%	
#ALWAYS + USUALLY (NET)	189 90%	2961 86%*	1 100%	43 91%	56 93%	38 90%	51 86%	142 92%	1 100%	1 100%	1 100%	6 100%	5 50%	19 90%	31 78%	153 93%	173 91%	13 87%	131 90%	58 92%
TOP BOX SCORE	149 71%	2092 60%*	1 100%	39 83%	44 73%	29 69%	36 61%	113 73%	1 100%	1 100%	5 83%	2 20%	16 76%	25 63%	120 73%	139 73%	8 53%	106 73%	43 68%	
NOT ANSWERED	21	259		3	5	6	7	14	1	1				2	4	16	17	2	17	4
VALID CASES	209	3460	1	47	60	42	59	155	1	1	1	6	10	21	40	164	191	15	146	63
NUMBER OF RESPONDENTS	230	3719	1	50	65	48	66	169	2	2	1	6	10	23	44	180	208	17	163	67
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q5 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q7 NONE	85 26%	1770 31%*		10 ~ 17%	24 24%	28 34%	23 25%	59 24%		1 ~ 50%			3 ~ 23%	14 34%	16 28%	65 25%	80 26%	3 18%	74 30%*	11 13%*
1 TIME	98 30%	1587 28%		16 ~ 28%	28 29%	28 34%	26 28%	76 31%	1 50%	1 50%		1 ~ 17%	5 38%	8 20%	17 29%	79 30%	93 30%	4 24%	79 32%	19 23%
2	60 18%	1212 21%		9 ~ 16%	24 24%	11 13%	16 17%	47 19%				2 ~ 33%	2 15%	6 15%	7 12%	52 20%	57 18%	2 12%	45 18%	15 18%
3	45 14%	601 10%	1 100%	12 ~ 21%	8 8%*	8 10%	16 17%	31 13%				2 ~ 33%	1 8%	9 22%	9 16%	36 14%	41 13%	4 24%	29 12%	16 20%
4	23 7%	266 5%		8 ~ 14%	7 7%	3 4%	5 5%	15 6%	1 50%		1 ~ 100%	1 17%	1 8%	2 5%	5 9%	17 6%	20 6%	2 12%	14 6%	9 11%
5 TO 9	14 4%	243 4%		1 ~ 2%	4 4%	4 5%	5 5%	12 5%						2 ~ 5%	2 3%	12 5%	13 4%	1 6%	5 2%*	9 11%*
10 OR MORE TIMES	7 2%	84 1%		2 ~ 3%	3 3%		2 ~ 2%	5 2%					1 ~ 8%		2 ~ 3%	4 2%	5 2%	1 6%	4 2%	3 4%
NOT ANSWERED	12	255		4	3	3	2	3						1	1	4	4		10	2
VALID CASES	332	5763	1	58	98	82	93	245	2	2	1	6	13	41	58	265	309	17	250	82
NUMBER OF RESPONDENTS	344	6018	1	62	101	85	95	248	2	2	1	6	13	42	59	269	313	17	260	84
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q8 A HEALTH PROVIDER IS THE PERSON YOU WOULD SEE IF YOUR CHILD NEEDED A CHECK-UP, WANTED ADVICE ABOUT A HEALTH PROBLEM, OR GOT SICK OR HURT. IN THE LAST 6 MONTHS, DID YOU AND YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT SPECIFIC THINGS YOU COULD DO TO PREVENT ILLNESS IN YOUR CHILD?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER IAN	NATV HAW/ ILND	AMER IND/ NATV	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q8 #YES	176 73%	2722 69%	42 ~ 88%	54 ~ 75%	34 64%	46 69%	133 73%	1 50%	1 ~ 100%	1 ~ 100%	5 83%	5 50%	19 70%	29 73%	143 73%	165 73%	9 69%	124 73%	52 74%	
NO	65 27%	1206 31%	1 100%	6 ~ 12%	18 25%	19 31%	49 27%	1 50%	~	~	1 ~ 17%	5 50%	8 30%	11 28%	54 27%	60 27%	4 31%	47 27%	18 26%	
NOT ANSWERED	6	97			2	1	3	4						2	3	4	1	5	1	
VALID CASES	241	3927	1	48	72	53	67	182	2	1	1	6	10	27	40	197	225	13	171	70
NUMBER OF RESPONDENTS	247	4024	1	48	74	54	70	186	2	1	1	6	10	27	42	200	229	14	176	71
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q9 NEVER	5 2%	99 3%	~	~	3 4%	1 2%	1 2%	5 3%*	~	~	~	~	~	~	1 3%~	4 2%~	5 2%~	~	5 3%*	~
SOMETIMES	15 6%	362 9%	~	~	7 10%	4 8%	4 6%	9 5%	~	~	~	~	2 20%~	1 4%~	4 10%~	11 6%~	15 7%~	~	11 6%	4 6%
USUALLY	36 15%	854 22%*	~	8 17%~	8 11%	7 13%	13 20%	27 15%	1 50%~	~	~	~	1 10%~	3 12%~	7 18%~	28 14%~	31 14%~	4 36%~	28 16%	8 12%
ALWAYS	182 76%	2627 67%*	1 100%~	40 83%~	53 75%	40 77%	48 73%	139 77%	1 50%~	1 100%~	1 100%~	6 100%~	7 70%~	22 85%~	28 70%~	151 78%~	173 77%~	7 64%~	126 74%	56 82%
#ALWAYS + USUALLY (NET)	218 92%	3480 88%	1 100%~	48 100%~	61 86%	47 90%	61 92%	166 92%	2 100%~	1 100%~	1 100%~	6 100%~	8 80%~	25 96%~	35 88%~	179 92%~	204 91%~	11 100%~	154 91%	64 94%
TOP BOX SCORE	182 76%	2627 67%*	1 100%~	40 83%~	53 75%	40 77%	48 73%	139 77%	1 50%~	1 100%~	1 100%~	6 100%~	7 70%~	22 85%~	28 70%~	151 78%~	173 77%~	7 64%~	126 74%	56 82%
NOT ANSWERED	9	83			3	2	4	6						1	2	6	5	3	6	3
VALID CASES	238	3941	1	48	71	52	66	180	2	1	1	6	10	26	40	194	224	11	170	68
NUMBER OF RESPONDENTS	247 100%	4024 100%	1 100%	48 100%	74 100%	54 100%	70 100%	186 100%	2 100%	1 100%	1 100%	6 100%	10 100%	27 100%	42 100%	200 100%	229 100%	14 100%	176 100%	71 100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q10 YES	76 31%	1194 30%		16 ~ 33%	18 25%	17 32%	25 37%	59 32%			1 ~100%	1 17%	1 10%	10 37%	12 30%	61 31%	67 30%	7 54%	45 26%*	31 44%*
NO	166 69%	2727 70%	1 100%	32 67%	54 75%	36 68%	43 63%	124 68%	2 100%	1 100%		5 ~ 83%	9 90%	17 63%	28 70%	137 69%	159 70%	6 46%	127 74%*	39 56%*
NOT ANSWERED	5	102			2	1	2	3						2	2	3	1	4	1	
VALID CASES	242	3922	1	48	72	53	68	183	2	1	1	6	10	27	40	198	226	13	172	70
NUMBER OF RESPONDENTS	247 100%	4024 100%	1 100%	48 100%	74 100%	54 100%	70 100%	186 100%	2 100%	1 100%	1 100%	6 100%	10 100%	27 100%	42 100%	200 100%	229 100%	14 100%	176 100%	71 100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q11 NOT AT ALL	2 3%	40 4%	~	~	1 6%~	~	1 4%~	1 2%~	~	~	~	~	~	~	2 17%~	~	2 3%~	~	1 2%~	1 3%~
A LITTLE	5 7%	110 10%	~	~	1 6%~	3 18%~	1 4%~	4 7%~	~	~	~	~	~	1 10%~	2 17%~	3 5%~	4 6%~	~	4 9%~	1 3%~
SOME	28 37%	287 26%*	~	7 44%~	6 33%~	6 35%~	9 38%~	20 34%~	~	~	~	~	1 100%~	4 40%~	4 33%~	21 35%~	23 34%~	4 67%~	16 36%~	12 40%~
#A LOT	40 53%	660 60%	~	9 56%~	10 56%~	8 47%~	13 54%~	33 57%~	~	~	1 100%~	1 100%~	~	5 50%~	4 33%~	36 60%~	38 57%~	2 33%~	24 53%~	16 53%~
NOT ANSWERED	1	40					1	1							1		1			1
VALID CASES	75	1098		16	18	17	24	58			1	1	1	10	12	60	67	6	45	30
NUMBER OF RESPONDENTS	76	1138		16	18	17	25	59			1	1	1	10	12	61	67	7	45	31
	100%	100%		100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLK OR AFR-	AMER AS-	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q12 NOT AT ALL	15 20%	204 19%	1 ~	5 6%~	3 28%~	6 18%~	12 25%~	12 21%~	~	~	~	1 ~100%~	2 20%~	3 25%~	12 20%~	13 19%~	1 17%~	9 20%~	6 20%~
A LITTLE	13 17%	171 16%	2 ~	2 13%~	5 11%~	4 29%~	11 17%~	11 19%~	~	~	~	~	2 ~ 20%~	3 25%~	10 17%~	12 18%~	1 17%~	8 18%~	5 17%~
SOME	25 33%	343 31%	6 ~	5 38%~	5 28%~	9 29%~	19 38%~	19 33%~	~	~	~	~	3 ~ 30%~	5 42%~	18 30%~	23 34%~	1 17%~	15 33%~	10 33%~
#A LOT	22 29%	374 34%	7 ~	6 44%~	4 33%~	5 24%~	16 21%~	16 28%~	~	~	1 ~100%~	1 ~100%~	3 ~ 30%~	1 8%~	20 33%~	19 28%~	3 50%~	13 29%~	9 30%~
NOT ANSWERED	1	47				1	1							1		1		1	
VALID CASES	75	1091	16	18	17	24	58			1	1	1	10	12	60	67	6	45	30
NUMBER OF RESPONDENTS	76	1138	16	18	17	25	59			1	1	1	10	12	61	67	7	45	31
	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q13 #YES	56 75%	872 80%	12 ~ 75%	11 ~ 61%	15 ~ 88%	18 ~ 75%	43 74%				1 ~ 100%	1 ~ 100%	7 ~ 70%	9 75%	44 73%	49 73%	6 100%	28 62%	28 93%
NO	19 25%	225 20%	4 ~ 25%	7 ~ 39%	2 ~ 12%	6 ~ 25%	15 26%					1 ~ 100%	3 30%	3 25%	16 27%	18 27%		17 38%	2 7%
NOT ANSWERED	1	42				1	1							1		1		1	
VALID CASES	75	1096	16	18	17	24	58			1	1	1	10	12	60	67	6	45	30
NUMBER OF RESPONDENTS	76	1138	16	18	17	25	59			1	1	1	10	12	61	67	7	45	31
	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
Q14 WORST HEALTH CARE POSSIBLE	1 0.4%	4 0.1%	~	~	1%	~	~	0.5%	~	~	~	~	~	~	1 0.5%	1 0.4%	~	~	1 1%	
01		5 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
02		15 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
03	1 0.4%	33 0.8%	~	~	~	2%	~	0.5%	~	~	~	~	~	1 3%	1 0.4%	~	~	1 0.6%	~	
04	3 1%	53 1%	~	~	2%	~	1%	~	~	~	~	~	~	1 3%	2 1%	1 0.4%	2 14%	1 0.6%	2 3%	
05	5 2%	141 4%	~	1 2%	2 3%	1 2%	1 1%	2 1%	~	~	~	2 20%	1 4%	1 3%	4 2%	4 2%	1 7%	4 2%	1 1%	
06	14 6%	124 3%	~	~	3 4%	6 11%	5 7%	12 7%	1 50%	~	~	~	~	1 3%	12 6%	11 5%	3 21%	8 5%	6 8%	
07	25 10%	316 8%	~	2 4%	9 13%	3 6%	11 16%	19 10%	~	~	~	~	4 15%	5 13%	19 10%	22 10%	3 21%	17 10%	8 11%	
08	43 18%	886 23%	~	9 19%	15 21%	9 17%	10 14%	33 18%	~	1 100%	3 50%	3 30%	2 8%	8 20%	35 18%	41 18%	2 14%	28 16%	15 21%	
09	63 26%	849 22%	~	18 38%	16 23%	9 17%	20 29%	52 28%	~	~	1 17%	1 10%	7 27%	6 15%	57 29%	60 27%	2 14%	47 28%	16 23%	
BEST HEALTH CARE POSSIBLE	86 36%	1476 38%	100%	1 36%	17 32%	23 45%	24 30%	21 30%	62 34%	1 50%	1 100%	2 33%	4 40%	12 46%	17 43%	68 34%	84 37%	1 7%	64 38%	22 31%
#8-10 (NET)	192 80%	3211 82%	100%	1 94%	44 76%	54 79%	42 74%	51 74%	147 80%	1 50%	1 100%	1 100%	6 80%	8 81%	21 78%	31 81%	160 82%	5 36%	139 82%	53 75%

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR POOR	NO CCC	CCC	
9-10 (NET)	149 62%	2325 60%	1 100%	35 74%	39 55%	33 62%	41 59%	114 62%	1 50%	1 100%	3 ~	5 50%	19 73%	23 58%	125 63%	144 64%	3 21%	111 65%	38 54%	
NOT ANSWERED	6	122		1	3	1	1	2					1	2	2	4		6		
VALID CASES	241	3902	1	47	71	53	69	184	2	1	1	6	10	26	40	198	225	14	170	71
NUMBER OF RESPONDENTS	247 100%	4024 100%	1 100%	48 100%	74 100%	54 100%	70 100%	186 100%	2 100%	1 100%	1 100%	6 100%	10 100%	27 100%	42 100%	200 100%	229 100%	14 100%	176 100%	71 100%
MEAN	8.59	8.59	10.0	9.00	8.35	8.64	8.49	8.58	8.00	10.0	8.00	8.83	8.30	8.92	8.52	8.62	8.69	6.86	8.71	8.30
p stat_(*=Sig @ p<=.05)		.969	~	~	.171	.784	.547	.817	~	~	~	~	~	~	~	~	~	~	.095	.091

[ASKED IF Q7 >= 1]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q15 NEVER	3 1%	70 2%	~	~	2 3%	1 2%	~	3 2%	~	~	~	~	~	~	1 3%	2 1%	3 1%	~	2 1%	1 1%
SOMETIMES	13 5%	378 10%*	~	2 2%	6 8%	2 4%	4 6%	8 4%	~	~	~	1 17%	~	1 4%	4 10%	8 4%	11 5%	2 14%	7 4%	6 8%
USUALLY	72 30%	1179 30%	~	16 34%	13 18%*	16 30%	27 39%	54 30%	1 50%	~	1 100%	1 17%	4 40%	7 26%	12 31%	59 30%	65 29%	6 43%	47 28%	25 35%
ALWAYS	153 63%	2256 58%	1 100%	30 64%	50 70%	34 64%	38 55%	118 64%	1 50%	1 100%	~	4 67%	6 60%	19 70%	22 56%	130 65%	146 65%	6 43%	114 67%	39 55%
#ALWAYS + USUALLY (NET)	225 93%	3435 88%*	1 100%	46 98%	63 89%	50 94%	65 94%	172 94%	2 100%	1 100%	1 100%	5 83%	10 100%	26 96%	34 87%	189 95%	211 94%	12 86%	161 95%	64 90%
TOP BOX SCORE	153 63%	2256 58%	1 100%	30 64%	50 70%	34 64%	38 55%	118 64%	1 50%	1 100%	~	4 67%	6 60%	19 70%	22 56%	130 65%	146 65%	6 43%	114 67%	39 55%
NOT ANSWERED	6	141		1	3	1	1	3							3	1	4		6	
VALID CASES	241	3883	1	47	71	53	69	183	2	1	1	6	10	27	39	199	225	14	170	71
NUMBER OF RESPONDENTS	247	4024	1	48	74	54	70	186	2	1	1	6	10	27	42	200	229	14	176	71
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER PAC ALSK	OTH	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q16 YES	243 73%	4005 69%	12 ~ 21%*	77 79%	70 86%*	84 90%*	184 75%	1 50%~	2 100%~	1 100%~	3 50%~	7 54%~	31 74%~	44 76%	194 73%	227 73%~	15 94%~	171 69%*	72 87%*	
NO	88 27%	1827 31%	1 100%~	46 79%*	21 21%	11 14%*	9 10%*	60 25%	1 50%~	~	~	3 50%~	6 46%~	11 26%~	14 24%	72 27%	84 27%~	1 6%~	77 31%*	11 13%*
NOT ANSWERED	13	187	4	3	4	2	4							1	3	2	1	12	1	
VALID CASES	331	5831	1	58	98	81	93	244	2	2	1	6	13	42	58	266	311	16	248	83
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q17 YES	25 11%	460 12%	~	3 25%	8 11%	8 12%	6 8%	20 12%	1 100%	~	1 ~100%	~	~	1 3%	6 14%	18 10%	19 9%	5 38%	12 7%*	13 19%*
NO	203 89%	3425 88%	~	9 75%	65 89%	57 88%	72 92%	151 88%	2 ~100%	~	3 ~100%	7 ~100%	28 97%	37 86%	162 90%	195 91%	8 62%	148 93%*	55 81%*	
NOT ANSWERED	15	235			4	5	6	13					2	1	14	13	2	11	4	
VALID CASES	228	3885		12	73	65	78	171	1	2	1	3	7	29	43	180	214	13	160	68
NUMBER OF RESPONDENTS	243 100%	4120 100%		12 100%	77 100%	70 100%	84 100%	184 100%	1 100%	2 100%	1 100%	3 100%	7 100%	31 100%	44 100%	194 100%	227 100%	15 100%	171 100%	72 100%

[ASKED IF Q16 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC
Q18 #YES	22 92%	368 88%	~	2 67%	7 100%	7 87%	6 100%	19 100%	~	1 100%	~	1 100%	6 100%	16 94%	18 100%	4 80%	11 92%	11 92%
NO	2 8%	51 12%	~	1 33%	~	1 13%	~	1 100%	~	~	~	~	1 6%	~	1 20%	1 8%	1 8%	
NOT ANSWERED	1	1			1		1						1		1		1	
VALID CASES	24	419		3	7	8	6	19	1	1		1	6	17	18	5	12	12
NUMBER OF RESPONDENTS	25	420		3	8	8	6	20	1	1		1	6	18	19	5	12	13
	100%	100%		100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q16 = YES AND Q17 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q19 YES	17 5%	202 3%		6 ~ 10%	5 5%	4 5%	2 2%	13 5%	1 50%~	~	~ 20%~	1 ~ 2%~	2 3%	14 5%	11 4%~	5 29%~	7 3%*	10 12%*		
NO	314 95%	5625 97%	1 100%~	52 90%	91 95%	77 95%	93 98%	232 95%	1 50%~	2 100%~	1 100%~	4 80%~	13 100%~	41 98%~	56 97%	252 95%	299 96%~	12 71%~	240 97%*	74 88%*
NOT ANSWERED	13	191		4	5	4		3			1			1	3	3		13		
VALID CASES	331	5827	1	58	96	81	95	245	2	2	1	5	13	42	58	266	310	17	247	84
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AMER IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & POOR	EX & VERY GOOD & FAIR	NO CCC	CCC
Q20 NEVER	2 12%	22 11%	~	~	1 20%	1 25%	1 8%	1 100%	~	~	~	~	~	~	2 14%	2 40%	2 20%		
SOMETIMES	1 6%	27 13%	~	~	1 25%	~	1 8%	~	~	~	~	~	~	~	1 7%	1 20%	1 10%		
USUALLY	1 6%	51 24%	~	~	1 20%	~	1 8%	~	~	~	~	~	~	~	1 7%	1 9%	1 10%		
ALWAYS	13 76%	109 52%	6 ~100%	3 60%	2 50%	2 100%	10 77%	~	~	1 ~100%	~	1 ~100%	2 100%	10 71%	10 91%	2 40%	7 100%	6 60%	
#ALWAYS + USUALLY (NET)	14 82%	160 76%	6 ~100%	4 80%	2 50%	2 100%	11 85%	~	~	1 ~100%	~	1 ~100%	2 100%	11 79%	11 100%	2 40%	7 100%	7 70%	
TOP BOX SCORE	13 76%	109 52%	6 ~100%	3 60%	2 50%	2 100%	10 77%	~	~	1 ~100%	~	1 ~100%	2 100%	10 71%	10 91%	2 40%	7 100%	6 60%	
NOT ANSWERED		12																	
VALID CASES	17	210	6	5	4	2	13	1		1		1	2	14	11	5	7	10	
NUMBER OF RESPONDENTS	17	222	6	5	4	2	13	1		1		1	2	14	11	5	7	10	
	100%	100%	100%	100%	100%	100%	100%	100%		100%		100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q19 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q21 #YES	14 82%	178 86%	6 ~100%	3 60%	3 75%	2 100%	12 92%				1 ~100%			2 100%	11 79%	9 82%	4 80%	6 86%	8 80%
NO	3 18%	30 14%		2 40%	1 25%		1 8%	1 100%					1 100%	3 21%	2 18%	1 20%	1 14%	2 20%	
NOT ANSWERED		14																	
VALID CASES	17	208	6	5	4	2	13	1			1		2	14	11	5	7	10	
NUMBER OF RESPONDENTS	17	222	6	5	4	2	13	1			1		2	14	11	5	7	10	
	100%	100%	100%	100%	100%	100%	100%	100%			100%		100%	100%	100%	100%	100%	100%	

[ASKED IF Q19 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q22 YES	25 8%	474 8%	~	4 7%	9 9%	6 7%	6 6%	20 8%	2 100%~	~	~	1 17%~	1 8%~	~	4 7%	21 8%	20 6%~	5 29%~	11 4%*	14 17%*	
NO	308 92%	5319 92%	100%~	1 93%	54 91%	90 93%	76 94%	87 92%	226 92%	~100%~	2 100%~	1 83%~	5 92%~	12 100%~	42 93%	55 93%	246 92%	291 94%~	12 71%~	238 96%*	70 83%*
NOT ANSWERED	11	225		4	2	3	2	2							2	2			11		
VALID CASES	333	5793	1	58	99	82	93	246	2	2	1	6	13	42	59	267	311	17	249	84	
NUMBER OF RESPONDENTS	344	6018	1	62	101	85	95	248	2	2	1	6	13	42	59	269	313	17	260	84	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC
Q23 NEVER	2 8%	60 14%	~	~	~	~	2 40%	2 11%	~	~	~	~	~	~	2 10%	1 5%	1 20%	1 9%	1 8%
SOMETIMES	3 13%	71 17%	~	~	3 33%	~	3 16%	~	~	~	~	~	~	1 25%	2 10%	3 16%	~	1 9%	2 15%
USUALLY	3 13%	110 26%	~	~	1 11%	1 17%	1 20%	2 11%	1 50%	~	~	~	~	~	3 15%	2 11%	1 20%	~	3 23%
ALWAYS	16 67%	179 43%	~	4 100%	5 56%	5 83%	2 40%	12 63%	1 50%	~	~	1 100%	1 100%	3 75%	13 65%	13 68%	3 60%	9 82%	7 54%
#ALWAYS + USUALLY (NET)	19 79%	289 69%	~	4 100%	6 67%	6 100%	3 60%	14 74%	2 100%	~	~	1 100%	1 100%	3 75%	16 80%	15 79%	4 80%	9 82%	10 77%
TOP BOX SCORE	16 67%	179 43%	~	4 100%	5 56%	5 83%	2 40%	12 63%	1 50%	~	~	1 100%	1 100%	3 75%	13 65%	13 68%	3 60%	9 82%	7 54%
NOT ANSWERED	1	24					1	1						1	1				1
VALID CASES	24	420		4	9	6	5	19	2			1	1	4	20	19	5	11	13
NUMBER OF RESPONDENTS	25	444		4	9	6	6	20	2			1	1	4	21	20	5	11	14
	100%	100%		100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q22 = YES]

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

	WORA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC
Q24 #YES	12 50%	291 69%	2 ~ 50%	5 56%	2 33%	3 60%	9 47%	2 100%	~	~	~	~	3 75%	9 45%	9 47%	3 60%	5 45%	7 54%
NO	12 50%	132 31%	2 ~ 50%	4 44%	4 67%	2 40%	10 53%	~	~	1 100%	1 100%	~	1 25%	11 55%	10 53%	2 40%	6 55%	6 46%
NOT ANSWERED	1	21				1	1							1	1			1
VALID CASES	24	423	4	9	6	5	19	2		1	1		4	20	19	5	11	13
NUMBER OF RESPONDENTS	25 100%	444 100%	4 100%	9 100%	6 100%	6 100%	20 100%	2 100%		1 100%	1 100%		4 100%	21 100%	20 100%	5 100%	11 100%	14 100%

[ASKED IF Q22 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q25 YES	42 13%	682 12%	~	1 2%*	13 13%	11 13%	17 18%	36 15%*	~	~	~	~	1 8%~	4 10%~	7 12%	34 13%	38 12%~	4 25%~	9 4%*	33 40%*	
NO	291 87%	5109 88%	100%~	1 98%*	57 87%	85 87%	71 82%	77 82%	211 85%*	2 100%~	2 100%~	1 100%~	6 100%~	12 92%~	38 90%~	51 88%	234 87%	274 88%~	12 75%~	241 96%*	50 60%*
NOT ANSWERED	11	227		4	3	3	1	1							1	1	1	1	10	1	
VALID CASES	333	5791	1	58	98	82	94	247	2	2	1	6	13	42	58	268	312	16	250	83	
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%	

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q26 NEVER	3 7%	90 14%	~	~	1 8%	~	2 13%	3 9%	~	~	~	~	~	~	~	3 9%	2 5%	1 25%	~	3 9%
SOMETIMES	2 5%	121 19%	~	~	~	2 18%	~	2 6%	~	~	~	~	~	~	~	2 6%	2 5%	~	2 22%	~
USUALLY	15 37%	156 24%	~	~	4 31%	2 18%	9 56%	13 37%	~	~	~	~	1 100%	1 25%	4 57%	11 33%	15 41%	~	3 33%	12 38%
ALWAYS	21 51%	284 44%	~	1 100%	8 62%	7 64%	5 31%	17 49%	~	~	~	~	~	3 75%	3 43%	17 52%	18 49%	3 75%	4 44%	17 53%
#ALWAYS + USUALLY (NET)	36 88%	440 68%	~	1 100%	12 92%	9 82%	14 88%	30 86%	~	~	~	~	1 100%	4 100%	7 100%	28 85%	33 89%	3 75%	7 78%	29 91%
TOP BOX SCORE	21 51%	284 44%	~	1 100%	8 62%	7 64%	5 31%	17 49%	~	~	~	~	~	3 75%	3 43%	17 52%	18 49%	3 75%	4 44%	17 53%
NOT ANSWERED	1	25					1	1								1	1			1
VALID CASES	41	651		1	13	11	16	35					1	4	7	33	37	4	9	32
NUMBER OF RESPONDENTS	42	676		1	13	11	17	36					1	4	7	34	38	4	9	33
	100%	100%		100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q27 #YES	18 46%	347 53%	~	~	42%~	44%~	53%~	16 48%~	~	~	~	~	~	2 29%~	2 52%~	16 49%~	1 25%~	3 38%~	15 48%~	
NO	21 54%	304 47%	~100%~	1	7	5	8	17 52%~	~	~	~	~100%~	1 50%~	2 71%~	15 48%~	18 51%~	3 75%~	5 63%~	16 52%~	
NOT ANSWERED	3	25		1	2		3							3	3		1	2		
VALID CASES	39	651		1	12	9	17	33					1	4	7	31	35	4	8	31
NUMBER OF RESPONDENTS	42	676		1	13	11	17	36					1	4	7	34	38	4	9	33
	100%	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					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q28 YES	75 23%	1072 19%	~	19%	22%	23%	25%	57 23%	1 50%~	~	~	50%~	1 8%~	11 26%~	10 17%	64 24%	68 22%~	6 35%~	38 15%*	37 45%*
NO	256 77%	4688 81%	100%~	81%	78%	77%	75%	188 77%	1 50%~	2 100%~	1 100%~	3 50%~	12 92%~	31 74%~	49 83%	202 76%	242 78%~	11 65%~	210 85%*	46 55%*
NOT ANSWERED	13	257		4	3	6		3							3	3		12	1	
VALID CASES	331	5761	1	58	98	79	95	245	2	2	1	6	13	42	59	266	310	17	248	83
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q29 #YES	45 63%	609 56%	9 ~ 82%~	14 64%~	9 50%~	13 62%~	35 64%~	1 100%~			2 ~ 67%~	1 100%~	6 55%~	8 80%~	37 61%~	40 62%~	5 83%~	22 59%~	23 66%~
NO	27 37%	471 44%	2 ~ 18%~	8 36%~	9 50%~	8 38%~	20 36%~			1 ~ 33%~		5 ~ 45%~	2 20%~	24 39%~	25 38%~	1 17%~	15 41%~	12 34%~	
NOT ANSWERED	3	35				3	2							3	3		1	2	
VALID CASES	72	1080	11	22	18	21	55	1		3	1	11	10	61	65	6	37	35	
NUMBER OF RESPONDENTS	75	1115	11	22	18	24	57	1		3	1	11	10	64	68	6	38	37	
	100%	100%	100%	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						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q30																				
YES	314 95%	4998 86%*	1 100%	52 93%	93 95%	77 95%	91 96%	235 96%	2 100%	2 100%	1 100%	6 100%	13 100%	37 88%	55 93%	254 95%	296 95%	15 94%	233 94%	81 98%
NO	17 5%	790 14%*	~	4 7%	5 5%	4 5%	4 4%	11 4%	~	~	~	~	~	5 12%	4 7%	13 5%	16 5%	1 6%	15 6%	2 2%
NOT ANSWERED	13	230		6	3	4		2							2		1	1	12	1
VALID CASES	331	5788	1	56	98	81	95	246	2	2	1	6	13	42	59	267	312	16	248	83
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV ILND	AMER HAW/IND/PAC ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q31 NONE	68 23%	1324 27%	~	15%	21%	32%*	21%	50 22%	~	~	~	~	31%~	24%~	27%	21%	67 24%~	1 7%~	60 27%*	8 11%*	
1 TIME	95 32%	1651 34%	~	23%	35%	36%	30%	71 32%	2 100%~	2 100%~	~	33%~	31%~	24%~	29%	33%	91 32%~	4 27%~	71 32%	24 32%	
2	58 19%	1029 21%	~	21%	23%	15%	18%	46 21%	~	~	~	17%~	8%~	16%~	8%*	22%*	52 18%~	4 27%~	45 20%	13 17%	
3	45 15%	462 9%*	100%~	23%	7%*	14%	19%	34 15%	~	~	~	17%~	8%~	24%~	19%	14%	42 15%~	3 20%~	29 13%	16 21%	
4	20 7%	201 4%	~	10%	8%	1%*	8%	11 5%	~	~	100%~	33%~	8%~	8%~	8%	6%	17 6%~	2 13%~	12 5%	8 11%	
5 TO 9	12 4%	173 4%	~	6%	7%	1%	2%	9 4%	~	~	~	~	15%~	3%~	10%	3%	11 4%~	1 7%~	5 2%*	7 9%*	
10 OR MORE TIMES	2 0.7%	32 0.6%	~	2%	~	~	1%	2 0.9%	~	~	~	~	~	~	~	~	2 0.7%~	2 0.9%~	2 ~	~	
NOT ANSWERED	14	181			2	5	7	12									3	11	14	9	5
VALID CASES	300	4872	1	52	91	72	84	223	2	2	1	6	13	37	52	243	282	15	224	76	
NUMBER OF RESPONDENTS	314	5053	1	52	93	77	91	235	2	2	1	6	13	37	55	254	296	15	233	81	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q30 = YES]

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER					
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q31A ALWAYS	1 0.4%	68 2%*	~	~	1%	~	~	~	~	~	~	~	~	~	1 3%	~	~	1 7%	1 0.6%	~	
USUALLY	3 1%	51 1%	~	1 2%	~	1 2%	1 2%	2 1%	~	~	~	~	~	~	2 5%	1 0.5%	~	3 1%	~	2 1%	1 1%
SOMETIMES	2 0.9%	288 8%*	~	1 2%	1 1%	~	~	1 0.6%	~	~	~	~	~	~	1 3%	1 0.5%	~	2 0.9%	~	2 1%	~
NEVER	224 97%	3102 88%*	1 100%	42 95%	70 97%	46 98%	65 98%	169 98%	2 100%	2 100%	1 100%	6 100%	9 100%	27 100%	34 89%	187 99%	208 98%	13 93%	158 97%	66 99%	
#NEVER + SOMETIMES (NET)	226 98%	3390 97%	1 100%	43 98%	71 99%	46 98%	65 98%	170 99%	2 100%	2 100%	1 100%	6 100%	9 100%	27 100%	35 92%	188 99%	210 99%	13 93%	160 98%	66 99%	
TOP BOX SCORE	224 97%	3102 88%*	1 100%	42 95%	70 97%	46 98%	65 98%	169 98%	2 100%	2 100%	1 100%	6 100%	9 100%	27 100%	34 89%	187 99%	208 98%	13 93%	158 97%	66 99%	
NOT ANSWERED	2	31				2		1					1		2		2		1	1	
VALID CASES	230	3509	1	44	72	47	66	172	2	2	1	6	9	27	38	189	213	14	163	67	
NUMBER OF RESPONDENTS	232 100%	3540 100%	1 100%	44 100%	72 100%	49 100%	66 100%	173 100%	2 100%	2 100%	1 100%	6 100%	9 100%	28 100%	38 100%	191 100%	215 100%	14 100%	164 100%	68 100%	

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q32 NEVER	2 0.9%	74 2%	~	~	1% 1%	2% ~	~	1% ~	~	~	~	~	~	~	~	1% ~	0.9% ~	~	1% ~	~
SOMETIMES	4 2%	183 5%*	~	~	3% 2%	~	3% 2%	1% ~	~	~	~	11% ~	~	5% ~	1% ~	2% ~	4% ~	2% ~	3% 2%	1% 1%
USUALLY	35 15%	573 16%	~	9% 4%	18% 13%	10% 5%	20% 13%	13% ~	~	~	17% ~	33% 1%	21% 3%	24% 6%	14% 9%	14% 26%	14% 30%	29% 4%	15% 25%	15% 10%
ALWAYS	190 82%	2676 76%*	100% ~	91% 40%	78% 56%	88% 42%	77% 51%	85% 146	100% 2	100% 2	100% 1	83% 5	56% 5	79% 22	71% 27	84% 160	83% 178	71% 10	82% 133	84% 57
#ALWAYS + USUALLY (NET)	225 97%	3249 93%*	100% ~	100% 44%	96% 69%	98% 47%	97% 64%	98% 168	100% 2	100% 2	100% 1	89% 6	100% 8	95% 28	98% 36	98% 186	97% 208	100% 14	97% 158	99% 67
TOP BOX SCORE	190 82%	2676 76%*	100% ~	91% 40%	78% 56%	88% 42%	77% 51%	85% 146	100% 2	100% 2	100% 1	83% 5	56% 5	79% 22	71% 27	84% 160	83% 178	71% 10	82% 133	84% 57
NOT ANSWERED	1	33				1		1							1		1		1	
VALID CASES	231	3507	1	44	72	48	66	172	2	2	1	6	9	28	38	190	214	14	163	68
NUMBER OF RESPONDENTS	232	3540	1	44	72	49	66	173	2	2	1	6	9	28	38	191	215	14	164	68
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q33 NEVER	1 0.4%	29 0.8%	~	~	~	2%	1 ~0.6%	~	~	~	~	~	~	~	1 ~0.5%	1 ~0.5%	~	1 ~0.6%	~	
SOMETIMES	11 5%	199 6%	~	2%	7%	~	5 8%	6 3%	~	~	~	~	11%	4%	7 4%	9 4%	2 14%	7 4%	4 6%	
USUALLY	33 14%	611 17%	~	11%	15%	17%	14%	26 15%	1 50%	~	~	1 17%	2 22%	1 4%	28 15%	30 14%	2 14%	25 15%	8 12%	
ALWAYS	186 81%	2666 76%	100%	86%	78%	81%	79%	139 81%	1 50%	2 100%	1 100%	5 83%	6 67%	26 93%	30 79%	154 81%	174 81%	10 71%	130 80%	56 82%
#ALWAYS + USUALLY (NET)	219 95%	3277 93%	100%	98%	93%	98%	92%	165 96%	2 100%	2 100%	1 100%	6 100%	8 89%	27 96%	34 89%	182 96%	204 95%	12 86%	155 95%	64 94%
TOP BOX SCORE	186 81%	2666 76%	100%	86%	78%	81%	79%	139 81%	1 50%	2 100%	1 100%	5 83%	6 67%	26 93%	30 79%	154 81%	174 81%	10 71%	130 80%	56 82%
NOT ANSWERED	1	34				1		1							1	1		1		
VALID CASES	231	3506	1	44	72	48	66	172	2	2	1	6	9	28	38	190	214	14	163	68
NUMBER OF RESPONDENTS	232 100%	3540 100%	1 100%	44 100%	72 100%	49 100%	66 100%	173 100%	2 100%	2 100%	1 100%	6 100%	9 100%	28 100%	38 100%	191 100%	215 100%	14 100%	164 100%	68 100%

[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			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q34 NEVER	1 0.4%	22 0.6%	~	~	~	2%	1 ~0.6%	~	~	~	~	~	~	~	1 ~0.5%	1 ~0.5%	1 ~0.6%	~	~	~
SOMETIMES	11 5%	152 4%	~	~	6 8%	1 2%	4 6%	5 3%	1 50%	~	~	~	1 11%	1 4%	4 11%	7 4%	9 4%	2 14%	8 5%	3 4%
USUALLY	27 12%	469 13%	~	4 9%	9 12%	6 12%	8 12%	23 13%	~	~	~	1 17%	1 11%	~	2 5%	24 13%	22 10%	4 29%	15 9%	12 18%
ALWAYS	192 83%	2859 82%	1 100%	40 91%	57 79%	40 83%	54 82%	143 83%	1 50%	2 100%	1 100%	5 83%	7 78%	27 96%	32 84%	158 83%	182 85%	8 57%	139 85%	53 78%
#ALWAYS + USUALLY (NET)	219 95%	3328 95%	1 100%	44 100%	66 92%	46 96%	62 94%	166 97%	1 50%	2 100%	1 100%	6 100%	8 89%	27 96%	34 89%	182 96%	204 95%	12 86%	154 94%	65 96%
TOP BOX SCORE	192 83%	2859 82%	1 100%	40 91%	57 79%	40 83%	54 82%	143 83%	1 50%	2 100%	1 100%	5 83%	7 78%	27 96%	32 84%	158 83%	182 85%	8 57%	139 85%	53 78%
NOT ANSWERED	1	38				1	1								1	1		1		
VALID CASES	231	3502	1	44	72	48	66	172	2	2	1	6	9	28	38	190	214	14	163	68
NUMBER OF RESPONDENTS	232	3540	1	44	72	49	66	173	2	2	1	6	9	28	38	191	215	14	164	68
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

		AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER ALSK	OTH	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
Q35	WORA TOT CHLD																			
YES	162 70%	2353 68%	4 ~	53 9%	43 75%	62 94%*	126 74%	2 ~100%	1 ~	6 17%	19 67%	25 68%	135 71%	153 72%	8 57%	114 70%	48 71%			
NO	68 30%	1128 32%	1 100%	40 91%	18 25%	5 10%	4 6%*	2 26%	1 100%	5 83%	3 33%	9 32%	13 34%	54 29%	60 28%	6 43%	48 30%	20 29%		
NOT ANSWERED	2	60			1	1	2							2	2		2			
VALID CASES	230	3480	1	44	71	48	66	171	2	2	1	6	9	28	38	189	213	14	162	68
NUMBER OF RESPONDENTS	232	3540	1	44	72	49	66	173	2	2	1	6	9	28	38	191	215	14	164	68
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

Q35A IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD HAVE A HARD TIME SPEAKING WITH OR UNDERSTANDING HIS OR HER PERSONAL DOCTOR BECAUSE THEY SPOKE DIFFERENT LANGUAGES?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER HAW/ PAC	IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q35A ALWAYS	1	43	~	~	~	1	~	~	~	~	~	~	1	~	1	1	1	~	1	~
	0.6%	2%				2%							17%		0.8%	0.7%			0.9%	
USUALLY		47	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
		2%																		
SOMETIMES	3	152	~	~	2	1	1	~	~	~	~	~	~	2	1	3	~	~	2	1
	2%	7%*			4%	2%	0.8%							8%	0.8%	2%			2%	2%
NEVER	150	2045	~	3	49	40	58	117	2	1	5	19	23	125	144	6	107	43	97%	98%
	97%	89%*		~	100%	96%	98%	98%	99%	~	100%	83%	100%	92%	98%	97%	100%	97%	98%	
#NEVER + SOMETIMES (NET)	153	2197	~	3	51	40	59	118	2	1	5	19	25	126	147	6	109	44	99%	100%
	99%	96%*		~	100%	100%	98%	100%	~	100%	83%	100%	100%	99%	99%	100%	99%	100%	99%	100%
TOP BOX SCORE	150	2045	~	3	49	40	58	117	2	1	5	19	23	125	144	6	107	43	97%	98%
	97%	89%*		~	100%	96%	98%	98%	99%	~	100%	83%	100%	92%	98%	97%	100%	97%	98%	
NOT ANSWERED	8	49	1	2	2	3	8							8	5	2	4	4		
VALID CASES	154	2287	3	51	41	59	118	2	1	6	19	25	127	148	6	110	44			
NUMBER OF RESPONDENTS	162	2336	4	53	43	62	126	2	1	6	19	25	135	153	8	114	48			
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q36 NEVER	2 1%	72 3%	~	~	1 2%	1 2%	2 2%	~	~	~	~	~	~	2 2%	2 1%	2 1%	1 0.9%	1 2%	
SOMETIMES	11 7%	148 6%	~	~	8 16%*	3 5%	7 6%	~	~	~	~	~	2 11%	2 8%	9 7%	10 7%	1 17%	5 5%	6 14%
USUALLY	28 18%	454 20%	~	~	12 24%	8 20%	8 14%	19 16%	~	~	~	2 33%	4 21%	9 36%	19 15%	28 19%	~	21 19%	7 16%
ALWAYS	112 73%	1606 70%	~	100%	3 59%*	30 78%	32 81%	47 76%	89 76%	2 ~100%	1 ~100%	4 67%	13 68%	14 56%	96 76%	107 73%	5 83%	82 75%	30 68%
#ALWAYS + USUALLY (NET)	140 92%	2060 90%	~	100%	3 82%*	42 98%	40 95%	55 92%	108 92%	2 ~100%	1 ~100%	6 100%	17 89%	23 92%	115 91%	135 92%	5 83%	103 94%	37 84%
TOP BOX SCORE	112 73%	1606 70%	~	100%	3 59%*	30 78%	32 81%	47 76%	89 76%	2 ~100%	1 ~100%	4 67%	13 68%	14 56%	96 76%	107 73%	5 83%	82 75%	30 68%
NOT ANSWERED	9	56	1	2	2	4	9							9	6	2	5	4	
VALID CASES	153	2280	3	51	41	58	117	2		1	6	19	25	126	147	6	109	44	
NUMBER OF RESPONDENTS	162	2336	4	53	43	62	126	2		1	6	19	25	135	153	8	114	48	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC	
Q37 NEVER	2 0.9%	98 3%*	~	~	1%	~	2%	~	~	~	~	~	~	4%~	1	1	1	1	2	~	
SOMETIMES	14 6%	385 11%*	~	~	13%*	6%~	3%	7	1	~	~	~	~	7%~	2	5	9	11	3	8	6
USUALLY	55 24%	856 25%	~	13	19	8	15	40	~	~	100%~	50%~	44%~	14%~	4	9	45	49	4	41	14
ALWAYS	158 69%	2135 61%*	100%~	31	42	37	47	123	1	2	~	50%~	56%~	75%~	21	23	133	152	6	111	47
#ALWAYS + USUALLY (NET)	213 93%	2991 86%*	100%~	44	61	45	62	163	1	2	100%~	100%~	100%~	89%~	25	32	178	201	10	152	61
TOP BOX SCORE	158 69%	2135 61%*	100%~	31	42	37	47	123	1	2	~	50%~	56%~	75%~	21	23	133	152	6	111	47
NOT ANSWERED	3	67			1	1	1	3								3	2	1	2	1	
VALID CASES	229	3473	1	44	71	48	65	170	2	2	1	6	9	28	38	188	213	13	162	67	
NUMBER OF RESPONDENTS	232 100%	3540 100%	1	44	72	49	66	173	2	2	1	6	9	28	38	191	215	14	164	68	

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC	
Q38 #YES	199 87%	2956 85%	1 100%	42 95%	64 90%	40 83%	52 79%	151 88%	1 50%	2 100%	1 100%	5 83%	7 78%	23 82%	35 92%	162 86%	188 88%	9 64%	139 86%	60 88%
NO	31 13%	518 15%	~	2 5%	7 10%	8 17%	14 21%	20 12%	1 50%	~	~	1 17%	2 22%	5 18%	3 8%	27 14%	25 12%	5 36%	23 14%	8 12%
NOT ANSWERED	2	66			1	1		2							2	2			2	
VALID CASES	230	3474	1	44	71	48	66	171	2	2	1	6	9	28	38	189	213	14	162	68
NUMBER OF RESPONDENTS	232 100%	3540 100%	1 100%	44 100%	72 100%	49 100%	66 100%	173 100%	2 100%	2 100%	1 100%	6 100%	9 100%	28 100%	38 100%	191 100%	215 100%	14 100%	164 100%	68 100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q39 YES	84 37%	1340 39%		16 ~ 36%	25 ~ 36%	14 29%	29 45%	61 36%	2 100%			3 ~ 50%	2 22%	13 46%	15 39%	68 36%	75 36%	7 50%	48 30%*	36 54%*
NO	144 63%	2127 61%	1 100%	28 64%	45 64%	34 71%	36 55%	108 64%		2 ~100%	1 ~100%	3 50%	7 78%	15 54%	23 61%	119 64%	136 64%	7 50%	113 70%*	31 46%*
NOT ANSWERED	4	73			2	1	1	4							4	4		3	1	
VALID CASES	228	3467	1	44	70	48	65	169	2	2	1	6	9	28	38	187	211	14	161	67
NUMBER OF RESPONDENTS	232	3540	1	44	72	49	66	173	2	2	1	6	9	28	38	191	215	14	164	68
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC	
Q40 NEVER	7 8%	102 8%	~	~	2 8%	~	5 18%	3 5%	~	~	~	~	~	3 25%	1 7%	6 9%	6 8%	~	4 8%	3 9%
SOMETIMES	11 13%	189 15%	~	3 19%	4 16%	~	4 14%	6 10%	~	~	2 67%	2 100%	~	4 27%	7 10%	10 13%	1 17%	~	7 15%	4 11%
USUALLY	33 40%	353 28%*	~	4 25%	11 44%	7 50%	11 39%	28 46%	1 50%	~	~	~	~	3 25%	5 33%	27 40%	29 39%	3 50%	19 40%	14 40%
ALWAYS	32 39%	630 49%*	~	9 56%	8 32%	7 50%	8 29%	24 39%	1 50%	~	~	1 33%	~	6 50%	5 33%	27 40%	30 40%	2 33%	18 38%	14 40%
#ALWAYS + USUALLY (NET)	65 78%	983 77%	~	13 81%	19 76%	14 100%	19 68%	52 85%	2 100%	~	~	1 33%	~	9 75%	10 67%	54 81%	59 79%	5 83%	37 77%	28 80%
TOP BOX SCORE	32 39%	630 49%*	~	9 56%	8 32%	7 50%	8 29%	24 39%	1 50%	~	~	1 33%	~	6 50%	5 33%	27 40%	30 40%	2 33%	18 38%	14 40%
NOT ANSWERED	1	48					1						1		1		1			1
VALID CASES	83	1274		16	25	14	28	61	2		3	2	12	15	67	75	6	48	35	
NUMBER OF RESPONDENTS	84	1322		16	25	14	29	61	2		3	2	13	15	68	75	7	48	36	
	100%	100%		100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AMR AS- IAN	NATV HAW/ PAC ILND	AMR IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
Q41 WORST PERSONAL DOCTOR POSSIBLE	7	0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
01	17	0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
02	17	0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
03	21	0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
04	2 41	0.7% 0.9%	~	1 2%	1 1%	~	1 0.5%	~	~	~	~	~	1 3%	~	2 0.8%	2 0.7%	~	2 0.9%	~		
05	15 5%	139 3%	~	1 2%	5 5%	4 6%	5 6%	11 5%	~	~	~	~	1 8%	2 5%	2 4%	13 5%	2 13%	11 5%	4 5%		
06	11 4%	111 2%	~	~	5 5%	2 3%	4 5%	8 4%	1 50%	~	~	~	~	1 3%	2 4%	9 4%	10 4%	1 7%	8 4%	3 4%	
07	20 7%	320 7%	~	1 2%*	7 8%	9 13%	3 4%	19 9%*	~	~	~	~	~	1 3%	1 2%*	19 8%*	19 7%	1 7%	13 6%	7 9%	
08	43 14%	785 16%	~	5 10%	17 19%	10 14%	11 13%	32 14%	~	~	~	1 17%	2 15%	6 16%	7 13%	35 15%	41 15%	2 13%	30 14%	13 17%	
09	63 21%	988 21%	~	14 27%	15 16%	13 18%	21 25%	47 21%	~	~	1 100%	1 17%	5 38%	5 14%	11 21%	50 21%	56 20%	5 33%	50 23%	13 17%	
BEST PERSONAL DOCTOR POSSIBLE	144 48%	2358 49%	100%	1 58%	30 45%	41 46%	33 47%	39 47%	103 47%	1 50%	2 100%	~	4 67%	5 38%	21 57%	29 56%	113 47%	139 50%	4 27%	107 48%	37 48%
#8-10 (NET)	250 84%	4130 86%	100%	1 94%*	49 80%	73 79%	56 86%	71 86%	182 82%	1 50%	2 100%	1 100%	6 100%	12 92%	32 86%	47 90%	198 82%*	236 84%	11 73%	187 85%	63 82%

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLK OR AFR-	AMER AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
9-10 (NET)	207 69%	3346 70%	1 100%	44 85%*	56 62%	46 65%	60 72%	150 68%	1 50%	2 100%	1 100%	5 83%	10 77%	26 70%	40 77%	163 68%	195 70%	9 60%	157 71%	50 65%
NOT ANSWERED	16	249			2	6	8	14							3	13	16		12	4
VALID CASES	298	4804	1	52	91	71	83	221	2	2	1	6	13	37	52	241	280	15	221	77
NUMBER OF RESPONDENTS	314 100%	5053 100%	1 100%	52 100%	93 100%	77 100%	91 100%	235 100%	2 100%	2 100%	1 100%	6 100%	13 100%	37 100%	55 100%	254 100%	296 100%	15 100%	233 100%	81 100%
MEAN	8.86	8.87	10.0	9.27	8.67	8.76	8.88	8.82	8.00	10.0	9.00	9.50	8.92	8.92	9.12	8.80	8.89	8.27	8.88	8.81
p stat_(*=Sig @ p<=.05)		.868		~.013*	.163	.526	.882	.441	~	~	~	~	~	~	.138	.106	~	~	.715	.712

[ASKED IF Q30 = YES]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q42 YES	78 26%	1181 24%		6 ~ 12%*	22 24%	21 29%	29 35%*	63 28%	2 100%~	1 ~100%~		2 ~ 15%~	8 22%~	7 13%*	69 29%*	65 23%~	12 80%~	17 8%*	61 79%*	
NO	220 74%	3655 76%	1 100%~	45 88%*	69 76%	52 71%	53 65%*	159 72%	2 ~100%~	6 ~100%~	11 85%~	29 78%~	45 87%*	173 71%*	216 77%~	3 20%~	204 92%*	16 21%*		
NOT ANSWERED	16	217		1	2	4	9	13						3	12	15		12	4	
VALID CASES	298	4836	1	51	91	73	82	222	2	2	1	6	13	37	52	242	281	15	221	77
NUMBER OF RESPONDENTS	314 100%	5053 100%	1 100%	52 100%	93 100%	77 100%	91 100%	235 100%	2 100%	2 100%	1 100%	6 100%	13 100%	37 100%	55 100%	254 100%	296 100%	15 100%	233 100%	81 100%

[ASKED IF Q30 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC
Q43 #YES	70 92%	1018 86%	6 ~100%	21 95%	18 90%	25 89%	58 95%	1 50%		1 ~100%		1 ~50%	7 87%	6 86%	62 93%	59 94%	10 83%	15 88%	55 93%
NO	6 8%	160 14%		1 5%	2 10%	3 11%	3 5%	1 50%				1 ~50%	1 13%	1 14%	5 7%	4 6%	2 17%	2 12%	4 7%
NOT ANSWERED	2	36				1 1	2							2	2			2	
VALID CASES	76	1178	6	22	20	28	61	2		1		2	8	7	67	63	12	17	59
NUMBER OF RESPONDENTS	78	1214	6	22	21	29	63	2		1		2	8	7	69	65	12	17	61
	100%	100%	100%	100%	100%	100%	100%	100%		100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q44 #YES	66 87%	992 85%	6 ~100%	19 90%	18 86%	23 82%	54 89%	1 50%	1 ~100%	1 ~50%	7 87%	6 86%	58 87%	9 89%	56 75%	9 75%	15 88%	51 86%	
NO	10 13%	179 15%	~	2 10%	3 14%	5 18%	7 11%	1 50%	~	~	1 ~50%	1 13%	9 14%	9 13%	7 11%	3 25%	2 12%	8 14%	
NOT ANSWERED	2	43		1		1	2							2	2			2	
VALID CASES	76	1171	6	21	21	28	61	2		1		2	8	7	67	63	12	17	59
NUMBER OF RESPONDENTS	78	1214	6	22	21	29	63	2		1		2	8	7	69	65	12	17	61
	100%	100%	100%	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						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC			
Q45																					
YES	51 16%	817 14%	~	11%	13%	16%	21%	39 16%	2 100%	~	~	17%	1 8%	1 14%	6 12%	7 17%	44 17%	43 14%	8 50%	21 9%*	30 36%*
NO	277 84%	4882 86%	100%	89%	87%	84%	79%	205 84%	2 ~100%	1 ~100%	5 83%	12 92%	36 86%	51 88%	222 83%	267 86%	8 50%	224 91%*	53 64%*		
NOT ANSWERED	16	319		6	3	4	3	4						1	3	3	1	15	1		
VALID CASES	328	5699	1	56	98	81	92	244	2	2	1	6	13	42	58	266	310	16	245	83	
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%	

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					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q46 NEVER	4 8%	42 5%	~	~	8%~	~	17%~	3 8%~	~	~	~	~	100%~	2 29%~	2 5%~	4 9%~	~	2 10%~	2 7%~	
SOMETIMES	7 14%	149 19%	~	17%~	23%~	8%~	11%~	4 11%~	~	~	~	100%~	1 17%~	1 14%~	6 14%~	6 14%~	1 14%~	5 24%~	2 7%~	
USUALLY	15 30%	195 25%	~	33%~	31%~	15%~	39%~	14 37%~	~	~	~	~	17%~	1 35%~	15 33%~	14 33%~	1 14%~	7 33%~	8 28%~	
ALWAYS	24 48%	401 51%	~	50%~	38%~	77%~	33%~	17 45%~	2 100%~	~	~	~	67%~	4 57%~	4 47%~	20 44%~	19 71%~	5 33%~	17 59%~	
#ALWAYS + USUALLY (NET)	39 78%	596 76%	~	83%~	69%~	92%~	72%~	31 82%~	2 100%~	~	~	~	83%~	5 57%~	4 81%~	35 77%~	6 86%~	14 67%~	25 86%~	
TOP BOX SCORE	24 48%	401 51%	~	50%~	38%~	77%~	33%~	17 45%~	2 100%~	~	~	~	67%~	4 57%~	4 47%~	20 44%~	19 71%~	5 33%~	17 59%~	
NOT ANSWERED	1	26					1	1							1		1		1	
VALID CASES	50	787		6	13	13	18	38	2			1	1	6	7	43	43	7	21	29
NUMBER OF RESPONDENTS	51	813		6	13	13	19	39	2			1	1	6	7	44	43	8	21	30
	100%	100%		100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q47 NONE	7 15%	60 8%	~	~	3 23%	1 8%	3 19%	6 17%	~	~	~	~	1 100%	1 14%	6 15%	7 17%	6 17%	5 24%	2 7%	
1 SPECIALIST	27 56%	510 64%	~	4 67%	5 38%	10 77%	8 50%	20 56%	1 50%	~	~	1 100%	4 67%	3 43%	24 59%	23 55%	4 67%	12 57%	15 56%	
2	11 23%	153 19%	~	1 17%	4 31%	2 15%	4 25%	8 22%	~	~	~	~	2 33%	2 29%	9 22%	9 21%	2 33%	4 19%	7 26%	
3	1 2%	36 5%	~	~	1 8%	~	~	1 3%	~	~	~	~	~	~	1 2%	1 2%	~	~	1 4%	
4		16 2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
5 OR MORE SPECIALISTS	2 4%	17 2%	~	1 17%	~	~	1 6%	1 3%	1 50%	~	~	~	~	1 14%	1 2%	2 5%	~	~	2 7%	
NOT ANSWERED	3	21				3	3								3	1	2		3	
VALID CASES	48	792		6	13	13	16	36	2			1	1	6	7	41	42	6	21	27
NUMBER OF RESPONDENTS	51	813		6	13	13	19	39	2			1	1	6	7	44	43	8	21	30
	100%	100%		100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

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

	WORA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ NATV	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q48 WORST SPECIALIST POSSIBLE		3 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
01		2 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
02		1 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
03	1 3%	2 0.3%	~	1 17%	~	~	~	1 4%	~	~	~	~	~	1 3%	1 3%	~	1 6%	~	
04	1 3%	5 0.6%	~	~	~	~	1 8%	1 4%	~	~	~	~	~	1 3%	1 3%	~	1 6%	~	
05		22 3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
06	3 8%	34 5%	~	~	2 22%	~	1 8%	2 7%	~	~	~	~	1 17%	1 20%	2 6%	3 9%	1 6%	2 9%	
07	5 13%	53 8%	~	~	2 22%	2 17%	1 8%	2 7%	1 50%	~	~	1 100%	1 17%	5 15%	4 12%	1 20%	2 13%	3 13%	
08	6 15%	121 17%	~	~	2 22%	2 17%	2 17%	5 18%	~	~	~	~	1 17%	6 18%	4 12%	2 40%	2 13%	4 17%	
09	11 28%	144 20%	~	1 17%	2 22%	5 42%	3 25%	10 36%	~	~	~	~	1 17%	1 20%	10 29%	10 29%	1 20%	3 19%	8 35%
BEST SPECIALIST POSSIBLE	12 31%	324 45%	~	4 67%	1 11%	3 25%	4 33%	7 25%	1 50%	~	~	~	2 33%	3 60%	9 26%	11 32%	1 20%	6 38%	6 26%

Continued

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

		AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR AFR-	AMER IAN	NATV HAW/ ILND	AMER IND/ NATV	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
#8-10 (NET)	29 74%	589 83%	5 ~ 83%	5 56%	10 83%	9 75%	22 79%	1 50%	~	~	~	~	4 67%	4 80%	25 74%	25 74%	4 80%	11 69%	18 78%
9-10 (NET)	23 59%	468 66%	5 ~ 83%	3 33%	8 67%	7 58%	17 61%	1 50%	~	~	~	~	3 50%	4 80%	19 56%	21 62%	2 40%	9 56%	14 61%
NOT ANSWERED	2	9		1		1	2							1	1	1	1		2
VALID CASES	39	712	6	9	12	12	28	2		1		6	5	34	34	5	16	23	
NUMBER OF RESPONDENTS	41 100%	721 100%	6 100%	10 100%	12 100%	13 100%	30 100%	2 100%		1 100%		6 100%	6 100%	35 100%	35 100%	6 100%	16 100%	25 100%	
MEAN	8.38	8.75	8.67	7.78	8.75	8.33	8.32	8.50		7.00		8.33	9.00	8.29	8.38	8.40	8.13	8.57	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER PAC ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q49 YES	53 16%	1474 26%*	1 100%~	13 23%	17 18%	13 16%	9 10%*	39 16%	~	~	~	17%~	1 8%~	1 21%~	9 18%	43 16%	50 16%~	3 19%~	43 18%	10 12%
NO	272 84%	4149 74%*	~	43 77%	80 82%	67 84%	82 90%*	203 84%	2 100%~	2 100%~	1 100%~	5 83%~	11 92%~	33 79%~	47 82%	221 84%	257 84%~	13 81%~	200 82%	72 88%
NOT ANSWERED	19	395		6	4	5	4	6					1		2	5	6	1	17	2
VALID CASES	325	5623	1	56	97	80	91	242	2	2	1	6	12	42	57	264	307	16	243	82
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC
Q50 NEVER	4 8%	37 3%	100%~	1 8%~	~ 9%~	1 11%~	1 5%~	2	~	~	~	~	2 25%~	1 10%~	3 7%~	3 6%~	1 33%~	3 7%~	1 10%~
SOMETIMES	10 20%	224 17%	~ 38%~	5 12%~	2 18%~	2 11%~	1 7%~	7 18%~	~	~	~	~	1 12%~	2 20%~	8 20%~	10 21%~	~	9 22%~	1 10%~
USUALLY	13 25%	391 30%	~ 15%~	2 29%~	5 36%~	4 22%~	2 10%~	10 26%~	~	~	1 ~100%~	~	2 25%~	3 30%~	10 24%~	13 27%~	~	9 22%~	4 40%~
ALWAYS	24 47%	645 50%	~ 38%~	5 59%~	10 36%~	4 56%~	5 19%~	19 50%~	~	~	~	1 ~100%~	3 37%~	4 40%~	20 49%~	22 46%~	2 67%~	20 49%~	4 40%~
#ALWAYS + USUALLY (NET)	37 73%	1037 80%	~ 54%~	7 88%~	15 73%~	8 78%~	7 29%~	29 76%~	~	~	1 ~100%~	1 100%~	5 62%~	7 70%~	30 73%~	35 73%~	2 67%~	29 71%~	8 80%~
TOP BOX SCORE	24 47%	645 50%	~ 38%~	5 59%~	10 36%~	4 56%~	5 19%~	19 50%~	~	~	~	1 ~100%~	3 37%~	4 40%~	20 49%~	22 46%~	2 67%~	20 49%~	4 40%~
NOT ANSWERED	2	44				2	1						1		2	2		2	
VALID CASES	51	1297	1	13	17	11	9	38			1	1	8	10	41	48	3	41	10
NUMBER OF RESPONDENTS	53	1341	1	13	17	13	9	39			1	1	9	10	43	50	3	43	10
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q51 NEVER	3 6%	31 2%		3 ~ 23%~				2 5%~					1 ~ 13%~	3 ~ 7%~	3 6%~		2 5%~	1 10%~	
SOMETIMES	4 8%	120 9%		1 ~ 8%~	2 12%~		1 ~ 11%~	2 5%~					1 ~ 13%~	1 10%~	3 7%~	4 8%~		3 7%~	1 10%~
USUALLY	8 16%	278 21%		3 ~ 23%~	1 6%~	2 18%~	2 22%~	8 21%~						8 ~ 20%~	7 15%~	1 33%~	7 17%~	1 10%~	
ALWAYS	36 71%	871 67%	1 100%~	6 46%~	14 82%~	9 82%~	6 67%~	26 68%~			1 ~100%~	1 100%~	6 75%~	9 90%~	27 66%~	34 71%~	2 67%~	29 71%~	7 70%~
#ALWAYS + USUALLY (NET)	44 86%	1149 88%	1 100%~	9 69%~	15 88%~	11 100%~	8 89%~	34 89%~			1 ~100%~	1 100%~	6 75%~	9 90%~	35 85%~	41 85%~	3 100%~	36 88%~	8 80%~
TOP BOX SCORE	36 71%	871 67%	1 100%~	6 46%~	14 82%~	9 82%~	6 67%~	26 68%~			1 ~100%~	1 100%~	6 75%~	9 90%~	27 66%~	34 71%~	2 67%~	29 71%~	7 70%~
NOT ANSWERED	2	41				2		1					1	2	2		2		
VALID CASES	51	1300	1	13	17	11	9	38		1	1	8	10	41	48	3	41	10	
NUMBER OF RESPONDENTS	53	1341	1	13	17	13	9	39		1	1	9	10	43	50	3	43	10	
	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q49 = YES]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
Q52 YES	90 28%	1596 29%		20 ~ 36%	33 34%	13 17%*	24 27%	62 26%		1 ~ 50%		3 ~ 50%	3 23%~	14 35%~	17 30%	70 27%	84 28%~	5 33%~	71 29%	19 24%
NO	231 72%	3983 71%	1 100%~	35 64%	65 66%	64 83%*	66 73%	177 74%	2 100%~	1 50%~	1 100%~	3 50%~	10 77%~	26 65%~	40 70%	190 73%	220 72%~	10 67%~	170 71%	61 76%
NOT ANSWERED	23	439		7	3	8	5	9						2	2	9	9	2	19	4
VALID CASES	321	5579	1	55	98	77	90	239	2	2	1	6	13	40	57	260	304	15	241	80
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
PQ53 NEVER	3 0.9%	65 1%	~	~	2%	~	1%	2 0.8%	~	~	~	17%~	~	~	3 1%	3 1%~	2 ~	1 0.8%	1 1%	
SOMETIMES	18 6%	282 5%	~	7%	7%	3%	6%	10 4%	~	~	~	17%~	1 8%~	2 5%~	6 11%	11 4%	15 5%~	3 20%~	13 5%	5 6%
USUALLY	31 10%	520 9%	~	9%	13%	9%	7%	23 10%	~	~	~	17%~	6 ~	15%~	2 4%*	28 11%	29 10%~	2 13%~	24 10%	7 9%
ALWAYS	266 84%	4656 84%	100%~	83%	77%	88%	87%	202 85%	2 100%	2 ~	1 100%	3 ~	12 50%~	32 92%~	48 86%	216 84%	254 84%~	10 67%~	200 84%	66 84%
#ALWAYS + USUALLY (NET)	297 93%	5175 94%	100%~	93%	91%	97%*	93%	225 95%	2 100%	2 ~	1 100%	4 67%~	12 92%~	38 95%~	50 89%	244 95%	283 94%~	12 80%~	224 94%	73 92%
TOP BOX SCORE	266 84%	4656 84%	100%~	83%	77%	88%	87%	202 85%	2 100%	2 ~	1 100%	3 50%~	12 92%~	32 80%~	48 86%	216 84%	254 84%~	10 67%~	200 84%	66 84%
NOT ANSWERED	3	67		1	1		1	2							1	2	3		2	1
VALID CASES	318	5523	1	54	97	77	89	237	2	2	1	6	13	40	56	258	301	15	239	79
NUMBER OF RESPONDENTS	321 100%	5590 100%	1 100%	55 100%	98 100%	77 100%	90 100%	239 100%	2 100%	2 100%	1 100%	6 100%	13 100%	40 100%	57 100%	260 100%	304 100%	15 100%	241 100%	80 100%

[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					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC		
Q54 WORST HEALTH PLAN POSSIBLE	1	18	~	~	~	1%	~	~	~	~	~	8%	~	1	1	~	0.4%	~	~		
0.3%	0.3%													~0.4%	~0.3%		~0.4%				
01	2	11	~	2%	~	~	1%	2	~	~	~	~	~	2	2	~	0.8%	~0.7%	~0.4%	1%	
0.6%	0.2%						0.9%	~	~	~	~	~	~	~0.8%	~0.7%		~0.4%		1%		
02	27	0.5%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
03	3	40	~	~	1%	3%	~0.4%	1	1	~	~	~	~	1	2	2	0.8%	0.7%	7%	0.8%	1%
0.9%	0.7%						~0.4%	50%	~	~	~	~	~	2%	0.8%	0.7%	7%	0.8%	1%		
04	1	53	~	~	1%	~	~0.4%	1	~	~	~	~	~	1	1	~	0.4%	~0.3%	~0.4%	~	
0.3%	0.9%						~0.4%	~	~	~	~	~	~	~0.4%	~0.3%		~0.4%		~		
05	17	288	~	4%	5%	4%	8%	15	~	~	~	8%	2%	2	15	15	4%	2	11	6	
5%	5%						6%	~	~	~	~	~	~	4%	6%	5%	13%	5%	8%		
06	13	265	~	9%	2%	3%	4%	9	~	~	~	15%	2%	2	10	12	4%	1	10	3	
4%	5%						4%	~	~	~	~	~	~	4%	4%	4%	7%	4%	4%		
07	35	565	~	6%	9%	14%	13%	26	~	100%	17%	~	15%	5	29	30	9%	4	19	16	
11%	10%						11%	~	~100%	~17%	~	~15%	9%	11%	10%	27%	8%	20%			
08	59	980	~	23%	20%	19%	14%	45	1	1	~	50%	15%	7	52	56	12%	3	47	12	
19%	18%						19%	50%	50%	~	50%	15%	15%	7	52	19%	20%	20%	15%		
09	47	1008	~	15%	14%	13%	17%	44	~	~	~	~	2%	6	41	45	11%	2	37	10	
15%	18%						19%*	~	~	~	~	~	~	6	41	15%	13%	15%	13%		
BEST HEALTH PLAN POSSIBLE	140	2334	100%	42%	47%	43%	42%	92	1	~	2	7	26	33	105	137	2	110	30		
44%	42%		100%	42%	47%	43%	42%	39%*	~50%	~	33%	54%	63%	59%*	41%*	46%	13%	46%	38%		
#8-10 (NET)	246	4322	100%	79%	81%	75%	73%	181	1	2	~	5	9	33	198	238	7	194	52		
77%	77%		100%	79%	81%	75%	73%	77%	50%	100%	~	83%	69%	80%	82%	77%	79%	47%	81%*	66%*	

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
9-10 (NET)	187 59%	3342 60%	1 100%	30 57%	60 62%	43 56%	53 59%	136 58%	1 ~ 50%	2 ~ 33%	7 54%	27 66%	39 70%	146 57%	182 60%	4 27%	147 62%	40 51%		
NOT ANSWERED	26	430		9	4	8	5	13					1	3	11	12	2	21	5	
VALID CASES	318	5588	1	53	97	77	90	235	2	2	1	6	13	41	56	258	301	15	239	79
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%
MEAN	8.55	8.52	10.0	8.49	8.71	8.44	8.48	8.49	5.50	9.00	7.00	8.50	7.92	9.02	8.93	8.47	8.61	7.27	8.65	8.23
p stat_(*=Sig @ p<=.05)		.816	~.801	.254	.576	.665	.403	~	~	~	~	~	~	.062	.094	~	~	.085	.081	

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q55																				
YES	142 43%	2224 39%	1 100%	28 50%	39 39%	30 37%	44 48%	112 46%	1 50%	1 100%	3 50%	5 38%	16 38%	21 36%	119 45%	126 41%	14 87%	84 34%*	58 70%*	
NO	187 57%	3434 61%		28 50%	60 61%	51 63%	48 52%	133 54%	1 50%	2 100%	3 50%	8 62%	26 62%	37 64%	148 55%	185 59%	2 13%	162 66%*	25 30%*	
NOT ANSWERED	15	359		6	2	4	3	3						1	2	2	1	14	1	
VALID CASES	329	5659	1	56	99	81	92	245	2	2	1	6	13	42	58	267	311	16	246	83
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC			
Q56 NEVER	3 2%	36 2%	~	~	3%~	3%~	2%~	~	~	~	~	~	6%~	5%~	2%~	2%~	~	2%~	2%		
SOMETIMES	17 12%	208 9%	~	18%~	13%~	3%~	14%~	10%~	~	~	~	67%~	20%~	19%~	24%~	10%~	29%~	10%~	16%		
USUALLY	33 23%	522 24%	~	25%~	23%~	23%~	23%~	25%~	100%~	~	100%~	~	40%~	~	29%~	23%~	24%~	21%~	18%~	31%~	
ALWAYS	89 63%	1443 65%	100%~	57%~	62%~	70%~	61%~	63%~	~	~	~	33%~	40%~	75%~	43%~	66%~	65%~	50%~	70%*	52%*	
#ALWAYS + USUALLY (NET)	122 86%	1964 89%	100%~	82%~	85%~	93%~	84%~	88%~	100%~	~	~	100%~	33%~	80%~	75%~	71%~	88%~	89%~	71%~	88%~	83%~
TOP BOX SCORE	89 63%	1443 65%	100%~	57%~	62%~	70%~	61%~	63%~	~	~	~	33%~	40%~	75%~	43%~	66%~	65%~	50%~	70%*	52%*	
NOT ANSWERED		47																			
VALID CASES	142	2208	1	28	39	30	44	112	1	1	3	5	16	21	119	126	14	84	58		
NUMBER OF RESPONDENTS	142	2255	1	28	39	30	44	112	1	1	3	5	16	21	119	126	14	84	58		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q55 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
Q57 #YES	67 49%	1308 61%*	1 100%	13 46%	18 47%	16 57%	19 44%	52 48%	~	~	2 67%	2 40%	10 63%	11 55%	55 47%	60 49%	5 36%	40 49%	27 47%	
NO	71 51%	853 39%*	~	15 54%	20 53%	12 43%	24 56%	56 52%	1 100%	~	1 100%	1 33%	3 60%	6 38%	9 45%	61 53%	62 51%	9 64%	41 51%	30 53%
NOT ANSWERED	4	94			1	2	1	4						1	3	4		3	1	
VALID CASES	138	2161	1	28	38	28	43	108	1	1	3	5	16	20	116	122	14	81	57	
NUMBER OF RESPONDENTS	142	2255	1	28	39	30	44	112	1	1	3	5	16	21	119	126	14	84	58	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q55 = YES]

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q58																				
EXCELLENT	142 43%	2291 40%	1 100%~	27 48%	43 44%	34 42%	37 39%	100 40%	1 50%~	1 50%~	2 ~ 33%~	6 46%~	21 51%~	24 41%	115 43%	142 45%~	125 ~ 51%*	17 20%*		
VERY GOOD	115 35%	2006 35%		22 ~ 39%	32 33%	30 37%	31 33%	94 38%*		1 ~ 50%~	3 ~ 50%~	2 15%~	13 32%~	19 32%	96 36%	115 37%~	90 ~ 37%	25 30%		
GOOD	56 17%	1106 20%		6 ~ 11%	21 21%	12 15%	17 18%	42 17%			1 ~ 17%~	4 31%~	6 15%~	13 22%	43 16%	56 18%~	28 ~ 11%*	28 33%*		
FAIR	15 5%	239 4%		1 ~ 2%	2 2%	4 5%	8 9%	10 4%			1 ~ 100%~	1 ~ 8%~	1 2%~	3 5%	11 4%	15 ~ 88%~	3 1%*	12 14%*		
POOR	2 0.6%	17 0.3%				1 ~ 1%	1 1%	1 0.4%	1 50%~						2 ~ 0.7%	2 ~ 12%~		2 ~ 2%		
#EXCELLENT + VERY GOOD + GOOD (NET)	313 95%	5403 95%	1 100%~	55 98%	96 98%*	76 94%	85 90%	236 96%	1 50%~	2 100%~	6 ~ 100%~	12 92%~	40 98%~	56 95%	254 95%	313 100%~	243 ~ 99%*	70 83%*		
NOT ANSWERED	14	359		6	3	4	1	1					1		2		14			
VALID CASES	330	5659	1	56	98	81	94	247	2	2	1	6	13	41	59	267	313	17	246	84
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q59 EXCELLENT	151 46%	2506 44%	1 100%	34 61%*	49 49%	33 41%	34 36%*	112 45%	1 50%	1 50%	2 ~ 33%	6 46%	17 40%	31 53%	118 44%	150 48%	1 ~	136 55%*	15 18%*	
VERY GOOD	90 27%	1630 29%		14 ~ 25%	30 30%	27 33%	19 20%	65 26%		1 ~ 50%	3 ~ 50%	5 38%	14 33%	17 29%	72 27%	89 29%	1 6%	71 29%	19 23%	
GOOD	57 17%	1044 18%		7 ~ 12%	14 14%	14 17%	22 23%	41 17%			1 ~ 100%	1 17%	1 8%	11 26%	8 14%	49 18%	48 15%	8 47%	23 14%*	23 28%*
FAIR	30 9%	420 7%		1 ~ 2%*	6 6%	6 7%	17 18%*	27 11%*					1 8%		3 5%	26 10%	24 8%	6 35%	7 3%*	23 28%*
POOR	3 0.9%	74 1%				1 ~	2 2%	2 0.8%	1 50%						3 ~	1 0.3%	2 12%		3 ~	4%*
#EXCELLENT + VERY GOOD + GOOD (NET)	298 90%	5181 91%	1 100%	55 98%*	93 94%	74 91%	75 80%*	218 88%*	1 50%	2 100%	1 100%	6 100%	12 92%	42 100%	56 95%	239 89%	287 92%	9 53%	241 97%*	57 69%*
NOT ANSWERED	13	344		6	2	4	1	1							1	1		12	1	
VALID CASES	331	5674	1 100%	56 100%	99 100%	81 100%	94 100%	247 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	268 100%	312 100%	17 100%	248 100%	83 100%
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q60 YES	88 27%	1197 21%*		11 ~ 20%	21 21%	24 30%	32 34%	75 30%*	1 50%~	1 ~100%~	3 50%~	6 ~ 14%~	9 15%*	78 29%*	74 24%~	13 76%~	28 11%*	60 72%*		
NO	243 73%	4478 79%*	1 100%~	45 80%	78 79%	57 70%	62 66%	172 70%*	1 50%~	2 100%~	3 ~ 50%~	13 100%~	36 86%~	50 85%*	190 71%*	238 76%~	4 24%~	220 89%*	23 28%*	
NOT ANSWERED	13	343		6	2	4	1	1						1	1		12	1		
VALID CASES	331	5675	1	56	99	81	94	247	2	2	1	6	13	42	59	268	312	17	248	83
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q61 YES	61 70%	945 79%	6 ~ 55%	12 ~ 57%	21 ~ 88%	22 ~ 71%	51 69%	1 100%	1 ~ 100%	1 33%	5 ~ 83%	7 78%	53 69%	49 66%	12 100%	5 18%	56 95%	
NO	26 30%	248 21%	5 ~ 45%	9 ~ 43%	3 13%	9 29%	23 31%	~	~	2 ~ 67%	1 ~ 17%	2 22%	24 31%	25 34%	~	23 82%	3 5%	
NOT ANSWERED	1	41				1	1						1		1		1	
VALID CASES	87	1192	11	21	24	31	74	1	1	3	6	9	77	74	12	28	59	
NUMBER OF RESPONDENTS	88 100%	1233 100%	11 100%	21 100%	24 100%	32 100%	75 100%	1 100%	1 100%	3 100%	6 100%	9 100%	78 100%	74 100%	13 100%	28 100%	60 100%	

[ASKED IF Q60 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q62 YES	55	867		4	12	20	19	47	1				5	7	47	44	11		55	
	95%	92%		~ 67%	~100%	~100%	~ 95%	~ 98%	~100%	~	~	~	~100%	~100%	~ 94%	~ 96%	~ 92%	~	~ 98%	
NO	3	75		2			1	1	1					3	2	1		2	1	
	5%	8%		~ 33%	~	~	~ 5%	~ 2%	~	~100%	~100%	~	~	~ 6%	~ 4%	~ 8%	~100%	~	~ 2%	
NOT ANSWERED	3	13				1	2	3						3	3			3		
VALID CASES	58	942		6	12	20	20	48	1		1	1	5	7	50	46	12		2	56
NUMBER OF RESPONDENTS	61	955		6	12	21	22	51	1		1	1	5	7	53	49	12		5	56
	100%	100%		100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%		100%	100%

[ASKED IF Q60 = YES AND Q61 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q63 YES	58 18%	872 15%		7 ~ 13%	15 15%	17 21%	19 20%	47 19%	2 100%~		1 ~100%~		6 ~ 14%~	5 9%*	52 19%*	45 14%~	13 76%~	7 3%*	51 61%*	
NO	272 82%	4772 85%	1 100%~	48 87%	84 85%	64 79%	75 80%	200 81%		2 ~100%~		6 ~100%~	12 100%~	36 86%~	53 91%*	216 81%*	266 86%~	4 24%~	240 97%*	32 39%*
NOT ANSWERED	14	374		7	2	4	1	1				1		1	1	2		13	1	
VALID CASES	330	5644	1	55	99	81	94	247	2	2	1	6	12	42	58	268	311	17	247	83
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q64 YES	46 81%	716 83%	6 ~ 86%	11 ~ 73%	14 ~ 82%	15 ~ 83%	39 85%	2 ~ 100%	1 ~ 100%			3 ~ 50%	4 80%	41 80%	34 76%	12 ~ 100%		46 ~ 92%	
NO	11 19%	150 17%	1 ~ 14%	4 ~ 27%	3 ~ 18%	3 ~ 17%	7 15%					3 ~ 50%	1 20%	10 20%	11 24%		7 ~ 100%	4 8%	
NOT ANSWERED	1	15				1	1							1		1		1	
VALID CASES	57	866	7	15	17	18	46	2	1			6	5	51	45	12	7	50	
NUMBER OF RESPONDENTS	58 100%	881 100%	7 100%	15 100%	17 100%	19 100%	47 100%	2 100%	1 100%			6 100%	5 100%	52 100%	45 100%	13 100%	7 100%	51 100%	

[ASKED IF Q63 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR & POOR	NO CCC	CCC
Q65 YES	45	679	6	11	13	15	39	2	1			2	4	40	33	12			45	
	98%	96%	~100%	~100%	93%	~100%	~100%	~100%	~100%	~100%	~	~	67%	~100%	98%	97%	~100%	~	~98%	~
NO	1	29				1							1	1	1				1	
	2%	4%	~	~	~	7%	~	~	~	~	~	~	33%	~	2%	3%	~	~	~2%	~
NOT ANSWERED		17																		
VALID CASES	46	708	6	11	14	15	39	2	1			3	4	41	34	12			46	
NUMBER OF RESPONDENTS	46	725	6	11	14	15	39	2	1			3	4	41	34	12			46	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q63 = YES AND Q64 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q66 YES	37 11%	674 12%		4 ~ 7%	10 10%	11 14%	12 13%	28 11%	2 100%~		1 ~100%~	1 17%~	1 8%~	3 7%~	7 12%	30 11%	28 9%~	9 56%~	4 2%*	33 40%*
NO	292 89%	4980 88%	1 100%~	51 93%	88 90%	70 86%	82 87%	219 89%	2 ~100%~		5 ~ 83%~	12 92%~	37 93%~	51 88%	237 89%	283 91%~	7 44%~	243 98%*	49 60%*	
NOT ANSWERED	15	364		7	3	4	1	1					2	1	2	2	1	13	2	
VALID CASES	329	5654	1	55	98	81	94	247	2	2	1	6	13	40	58	267	311	16	247	82
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q67 YES	32	505		2	8	11	11	26	2	1	1	2	5	27	24	8		32	
	89%	79%		~ 50%	~ 80%	~ 100%	~ 100%	96%	~ 100%	~ 100%	~ 100%	~ 67%	71%	93%	86%	~ 100%		~ 100%	
NO	4	133		2	2			1				1	1	2	2	4		4	
	11%	21%		~ 50%	~ 20%			4%				~ 100%	33%	29%	7%	14%		~ 100%	
NOT ANSWERED	1	30					1	1						1		1		1	
VALID CASES	36	638		4	10	11	11	27	2	1	1	1	3	7	29	28	8	4	32
NUMBER OF RESPONDENTS	37	668		4	10	11	12	28	2	1	1	1	3	7	30	28	9	4	33
	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q66 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC
Q68 YES	31	510	2	8	10	11	26	2	1	1	1	5	26	23	8	31		
	97%	96%	~100%	~100%	~91%	~100%	~100%	~100%	~100%	~100%	~50%	~100%	~96%	~96%	~100%	~97%		
NO	1	19			1							1	1	1		1		
	3%	4%	~	~	~9%	~	~	~	~	~	~50%	~	~4%	~4%	~	~3%		
NOT ANSWERED		5																
VALID CASES	32	529	2	8	11	11	26	2	1	1	2	5	27	24	8	32		
NUMBER OF RESPONDENTS	32	534	2	8	11	11	26	2	1	1	2	5	27	24	8	32		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		

[ASKED IF Q66 = YES AND Q67 = YES]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
Q69 YES	38 12%	583 10%	~	9%	16%	11%	9%	29 12%	2 100%~	~	~	17%~	1 8%~	1 7%~	3 13%	4 11%~	34 31%~	33 5%*	5 30%*	
NO	292 88%	5081 90%	100%~	91%	84%	89%	91%	218 88%	2 ~100%~	1 ~100%~	5 83%~	12 92%~	39 93%~	55 93%	234 87%	279 89%~	11 69%~	234 95%*	58 70%*	
NOT ANSWERED	14	354		6	3	4	1	1							1	1	1	13	1	
VALID CASES	330	5664	1	56	98	81	94	247	2	2	1	6	13	42	59	268	312	16	247	83
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q70 YES	22 58%	317 61%	~	40%~	31%~	78%~	100%~	19 66%~	2 100%~	~	~	~	~	33%~	22 65%~	18 55%~	4 80%~	1 8%~	21 84%~
NO	16 42%	205 39%	~	60%~	69%~	22%~	~	10 34%~	~	~	1 100%~	1 100%~	2 67%~	4 100%~	12 35%~	15 45%~	1 20%~	12 92%~	4 16%~
NOT ANSWERED		42																	
VALID CASES	38	522		5	16	9	8	29	2		1	1	3	4	34	33	5	13	25
NUMBER OF RESPONDENTS	38	564		5	16	9	8	29	2		1	1	3	4	34	33	5	13	25
	100%	100%		100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q69 = YES]

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

	AGE					RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC
Q71 YES	21 95%	315 96%	2 ~100%	5 ~100%	7 ~100%	7 87%	18 95%	2 100%	~	~	~	~100%	1	21 ~95%	17 94%	4 100%	21 ~100%	
NO	1 5%	14 4%	~	~	~	1 13%	1 5%	~	~	~	~	~	~	1 5%	1 6%	~	1 100%	~
NOT ANSWERED		6																
VALID CASES	22	330	2	5	7	8	19	2				1	22	18	4	1	21	
NUMBER OF RESPONDENTS	22	336	2	5	7	8	19	2				1	22	18	4	1	21	
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q69 = YES AND Q70 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q72 YES	46 14%	799 14%	~	2 4%*	13 13%	9 11%	22 24%*	36 15%	2 100%~	~	~	~	1 8%	4 10%~	8 14%	37 14%	36 12%~	10 59%~	7 3%*	39 48%*	
NO	281 86%	4843 86%	100%~	1 96%*	54 87%	86 89%	71 76%*	69 85%	209 85%	~100%~	2 100%~	1 100%~	6 100%~	12 92%~	38 90%~	51 86%	229 86%	272 88%~	7 41%~	238 97%*	43 52%*
NOT ANSWERED	17	376		6	2	5	4	3							3		5		15	2	
VALID CASES	327	5642	1	56	99	80	91	245	2	2	1	6	13	42	59	266	308	17	245	82	
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%	

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q73 YES	37 82%	744 94%	~100%	2 85%	11 89%	8 76%	16 76%	29 83%	2 100%	~	~	~100%	3 75%	4 50%	32 89%	28 80%	9 90%	37 95%	
NO	8 18%	48 6%	~	~	2 15%	1 11%	5 24%	6 17%	~	~	~	~	1 25%	4 50%	4 11%	7 20%	1 10%	6 100%	2 5%
NOT ANSWERED	1	31				1	1							1	1		1		
VALID CASES	45	793		2	13	9	21	35	2			1	4	8	36	35	10	6	39
NUMBER OF RESPONDENTS	46	824		2	13	9	22	36	2			1	4	8	37	36	10	7	39
	100%	100%		100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q72 = YES]

NQ74 WHAT IS YOUR CHILD'S AGE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- AMER IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
NQ74 LESS THAN 1 YEAR OLD	1 0.3%	27 0.4%	1 100%	~	~	~	~	~	~	~	~	~	1 2%	1 2%	1 ~0.3%	~	1 ~0.4%	~		
1 TO 3 YEARS OLD	62 18%	1125 19%	~	62 ~100%	~	~	~	41 17%	1 50%	~	1 ~100%	3 50%	2 15%	7 17%	8 14%	48 18%	55 18%	1 6%	54 21%*	8 10%*
4 TO 7 YEARS OLD	101 29%	1651 27%	~	~	101 ~100%	~	~	72 29%	~	~	~	3 50%	4 31%	13 31%	22 37%	77 29%	96 31%	2 12%	78 30%	23 27%
8 TO 12 YEARS OLD	85 25%	1813 30%*	~	~	~	85 ~100%	~	63 25%	1 50%	~	~	~	2 15%	10 24%	13 22%	66 25%	76 24%	5 29%	61 23%	24 29%
13 OR OLDER	95 28%	1402 23%	~	~	~	95 ~100%	~	72 29%	~	2 ~100%	~	~	5 38%	11 26%	15 25%	78 29%	85 27%	9 53%	66 25%	29 35%
VALID CASES	344	6018	1	62	101	85	95	248	2	2	1	6	13	42	59	269	313	17	260	84
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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

NQ75 IS YOUR CHILD MALE OR FEMALE?

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
NQ75	WORA TOT CHLD																			
	OHP TOT CHLD																			
MALE	172 50%	3120 52%	32 ~ 52%	53 52%	40 47%	47 49%	119 48%	2 100%	2 100%	1 100%	1 17%	6 46%	22 52%	29 49%	132 49%	156 50%	7 41%	129 50%	43 51%	
FEMALE	172 50%	2898 48%	1 100%	30 48%	48 48%	45 53%	48 51%	129 52%	~	~	~	5 83%	7 54%	20 48%	30 51%	137 51%	157 50%	10 59%	131 50%	41 49%
VALID CASES	344	6018	1	62	101	85	95	248	2	2	1	6	13	42	59	269	313	17	260	84
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q76																				
HISPANIC OR LATINO	59 18%	2443 43%*	1 100%~	8 14%	22 22%	13 16%	15 16%	22 9%*	1 ~ 50%~	2 ~ 33%~	10 77%~	11 26%~	59 100%~		56 18%~	3 19%~	48 20%	11 13%		
NOT HISPANIC OR LATINO	269 82%	3183 57%*		48 ~ 86%	77 78%	66 84%	78 84%	226 91%*	2 100%~	1 ~ 50%~	1 ~ 100%~	4 67%~	3 23%~	31 74%~	269 ~ 100%~	254 82%~	13 81%~	197 80%	72 87%	
NOT ANSWERED	16	391		6	2	6	2								3	1	15	1		
VALID CASES	328	5627	1	56	99	79	93	248	2	2	1	6	13	42	59	269	310	16	245	83
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
Q77.1	WORA TOT CHLD																			
YES	290 84%	3921 65%*	1 100%	48 77%	85 84%	73 86%	83 87%	248 100%	~	~	~	~	~	42 ~100%	33 56%*	257 96%*	276 88%	12 71%	214 82%*	76 90%*
NO	54 16%	2097 35%*	~	14 23%	16 16%	12 14%	12 13%	2 ~100%	2 ~100%	1 ~100%	6 ~100%	13 ~100%	~	26 ~44%*	12 4%*	37 12%	5 29%	46 18%*	8 10%*	
VALID CASES	344	6018	1	62	101	85	95	248	2	2	1	6	13	42	59	269	313	17	260	84
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q77.2	WORA TOT CHLD																			
YES	4 1%	320 5%*	3 ~5%	1 ~1%	1 ~1%	2 ~100%					2 5%		4 1%	3 1%	1 6%	2 0.8%	2 2%			
NO	340 99%	5698 95%*	1 100%	59 95%	101 100%	84 99%	95 100%	248 100%	2 ~100%	1 ~100%	6 ~100%	13 ~100%	40 95%	59 100%	265 99%*	310 99%	16 94%	258 99%	82 98%	
VALID CASES	344	6018	1	62	101	85	95	248	2	2	1	6	13	42	59	269	313	17	260	84
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
		<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
Q77.3	WORA TOT CHLD																		
	OHP TOT CHLD																		
YES	3 0.9%	238 4%*	~	~	1 1%	~	2 ~	~100%	~	~	~	~	2 2%	1 2%	2 0.7%	3 1%~	~	3 1%~	
NO	341 99%	5780 96%*	100%	~100%	~99%	100%	248 100%	2 ~100%	1 ~100%	6 ~100%	13 ~100%	41 98%	58 98%	267 99%	310 99%	17 ~100%	257 99%	84 ~100%	
VALID CASES	344	6018	100%	100%	100%	100%	248	2	2	1	6	13	42	59	269	313	17	260	84
NUMBER OF RESPONDENTS	344 100%	6018 100%	100%	100%	100%	100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q77.4	WORA TOT CHLD																		
YES	7 2%	104 2%	4 ~	1 6%	1 1%	1 1%	~	~	1 ~100%	~	6 ~ 14%	~	7 ~ 3%	6 2%	1 6%	4 2%	3 4%		
NO	337 98%	5914 98%	1 100%	58 94%	100 99%	84 99%	248 100%	2 100%	2 100%	6 ~100%	13 ~100%	36 86%	59 100%	262 97%*	307 98%	16 94%	256 98%	81 96%	
VALID CASES	344	6018	1	62	101	85	248	2	2	1	6	13	42	59	269	313	17	260	84
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
Q77.5	WORA TOT CHLD																			
YES	35 10%	339 6%*	6 ~ 10%	12 12%	8 9%	9 9%			6 ~100%		29 ~ 69%	8 14%	27 10%	33 11%~	1 6%~	28 11%	7 8%			
NO	309 90%	5679 94%*	1 100%~	56 90%	89 88%	77 91%	86 91%	248 100%	2 100%	2 100%	1 100%	13 ~100%	13 31%~	51 86%	242 90%	280 89%~	16 94%~	232 89%	77 92%	
VALID CASES	344	6018	1	62	101	85	95	248	2	2	1	6	13	42	59	269	313	17	260	84
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & POOR	VERY FAIR & POOR	NO CCC	CCC	
Q77.6	WORA TOT CHLD																		
	OHP TOT CHLD																		
YES	21 6%	629 100%*	1 ~3%	2 8%	8 4%	3 7%					13 ~100%	8 19%	16 27%*	5 2%*	20 6%~	1 6%~	18 7%	3 4%	
NO	323 94%	5389 90%*	60 ~97%	93 92%	82 96%	88 93%	248 100%	2 100%	2 100%	1 100%	6 100%	34 ~81%	43 73%*	264 98%*	293 94%~	16 94%~	242 93%	81 96%	
VALID CASES	344	6018	1	62	101	85	248	2	2	1	6	13	42	59	269	313	17	260	84
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

Q78 WHAT IS YOUR AGE?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/PAC	AMER IND/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q78 UNDER 18	16 5%	209 4%	~	2%	~	11%*	6%	14 6%	~	~	~	~	~	2 5%	~	16 6%*	16 5%~	~	11 4%	5 6%
18 TO 24	22 7%	307 5%	~	25%*	6%	1%*	1%*	15 6%	~	~	~	2 33%~	2 15%~	2 5%~	7 12%	15 6%	21 7%~	~	17 7%	5 6%
25 TO 34	100 30%	2087 37%*	1 100%~	28 50%*	44 45%*	22 27%	5 5%*	77 31%	~	~	~	2 33%~	2 15%~	14 33%~	19 32%	80 30%	95 31%~	5 29%~	78 32%	22 26%
35 TO 44	113 34%	2042 36%	~	18%*	31 32%	29 36%	43 46%*	86 35%	~	1 50%~	1 100%~	1 17%~	5 38%~	12 29%~	24 41%	87 32%	107 34%~	6 35%~	90 37%	23 27%
45 TO 54	49 15%	708 13%	~	4%*	13 13%	11 14%	23 24%*	33 13%	1 50%~	~	~	1 17%~	3 23%~	9 21%~	7 12%	42 16%	45 14%~	3 18%~	35 14%	14 17%
55 TO 64	22 7%	233 4%	~	2%*	3 3%*	8 10%	10 11%	14 6%	1 50%~	1 50%~	~	~	1 8%~	3 7%~	2 3%	20 7%	19 6%~	3 18%~	12 5%	10 12%
65 TO 74	7 2%	39 0.7%	~	~	1 1%	1 1%	5 5%	7 3%~	~	~	~	~	~	~	~	7 3%~	7 2%~	~	3 1%	4 5%
75 OR OLDER	1 0.3%	12 0.2%	~	~	~	~	1 1%	1 0.4%	~	~	~	~	~	~	~	1 ~0.4%	1 0.3%~	~	~	1 1%~
NOT ANSWERED	14	382		6	3	4	1	1								1	2		14	
VALID CASES	330	5636	1	56	98	81	94	247	2	2	1	6	13	42	59	268	311	17	246	84
NUMBER OF RESPONDENTS	344	6018	1	62	101	85	95	248	2	2	1	6	13	42	59	269	313	17	260	84
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q79 ARE YOU MALE OR FEMALE?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
Q79 MALE	48 15%	691 12%		4 ~ 7%*	12 12%	16 20%	16 17%	27 11%*	2 ~100%~	2 ~ 33%~	2 15%~	10 24%~	5 8%	40 15%	45 14%~	2 12%~	38 15%	10 12%		
FEMALE	282 85%	4976 88%	1 100%~	52 93%*	87 88%	64 80%	78 83%	220 89%*	2 100%~	1 ~100%~	4 67%~	11 85%~	32 76%~	54 92%	228 85%	266 86%~	15 88%~	208 85%	74 88%	
NOT ANSWERED	14	352		6	2	5	1	1						1	2		14			
VALID CASES	330	5666	1	56	99	80	94	247	2	2	1	6	13	42	59	268	311	17	246	84
NUMBER OF RESPONDENTS	344 100%	6018 100%	1 100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q80																				
8TH GRADE OR LESS	16 5%	729 13%*	~	2 4%	4 4%	5 6%	5 5%	5 2%*	1 50%~	~	~	~	2 15%~	2 5%~	10 17%*	6 2%*	13 4%~	3 18%~	14 6%	2 2%
SOME HIGH SCHOOL BUT DID NOT GRADUATE	37 11%	659 12%	~	5 9%	13 13%	9 11%	10 11%	27 11%	~	~	~	3 50%~	2 15%~	2 5%~	11 19%	26 10%	37 12%~	~	29 12%	8 10%
HIGH SCHOOL GRADUATE OR GED	103 31%	1741 31%	100%~	22 39%	29 30%	21 27%	30 32%	75 31%	~	2 100%~	~	2 33%~	2 15%~	18 44%~	22 37%	80 30%	99 32%~	3 18%~	84 35%*	19 23%*
SOME COLLEGE OR 2-YEAR DEGREE	142 43%	1785 32%*	~	22 39%	43 44%	34 43%	43 46%	118 48%*	1 50%~	~	~	1 17%~	3 23%~	17 41%~	13 22%*	128 48%*	134 44%~	7 41%~	95 39%*	47 56%*
4-YEAR COLLEGE GRADUATE	19 6%	395 7%	~	5 9%	5 5%	5 6%	4 4%	14 6%	~	~	1 100%~	~	3 23%~	1 2%~	2 3%	17 6%	17 6%~	2 12%~	15 6%	4 5%
MORE THAN 4-YEAR COLLEGE DEGREE	10 3%	239 4%	~	~	4 4%	5 6%	1 1%	6 2%	~	~	~	~	1 8%~	1 2%~	1 2%	8 3%	8 3%~	2 12%~	6 2%	4 5%
NOT ANSWERED	17	471		6	3	6	2	3						1		4	5		17	
VALID CASES	327	5547	1	56	98	79	93	245	2	2	1	6	13	41	59	265	308	17	243	84
NUMBER OF RESPONDENTS	344 100%	6018 100%	100%	62 100%	101 100%	85 100%	95 100%	248 100%	2 100%	2 100%	1 100%	6 100%	13 100%	42 100%	59 100%	269 100%	313 100%	17 100%	260 100%	84 100%

Q81 HOW ARE YOU RELATED TO THE CHILD?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV ILND PAC	AMER ALSK	OTH	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC	
Q81																					
MOTHER OR FATHER	284	5300	1	52	85	69	77	215	1	2	1	5	12	33	56	226	270	12	223	61	
	88%	95%*	100%~	93%	87%	90%	86%	88%	50%~	100%~	100%~	83%~	100%~	82%~	97%*	87%*	89%~	75%~	92%*	76%*	
GRANDPARENT	16	137		3	5	2	6	11	1			1		3	1	15	15	1	7	9	
	5%	2%*	~	5%	5%	3%	7%	5%	50%~	~	~	17%~	~	7%~	2%	6%	5%~	6%~	3%*	11%*	
AUNT OR UNCLE	3	36			2		1	2						1		3	3		2	1	
	0.9%	0.6%	~	~	2%	~	1%	0.8%	~	~	~	~	~	2%~	~	1%~	1%~	~	0.8%	1%	
OLDER BROTHER OR SISTER	1	4					1	1								1	1			1	
	0.3%	0.1%	~	~	~	1%	~	0.4%	~	~	~	~	~	~	~	0.4%	0.3%~	~	~	1%	
OTHER RELATIVE		6																			
		0.1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
LEGAL GUARDIAN	13	77			5	4	4	11						2	1	12	11	2	6	7	
	4%	1%*	~	~	5%	5%	4%	5%	~	~	~	~	~	5%~	2%	5%	4%~	13%~	2%	9%	
SOMEONE ELSE	5	44		1	1	1	2	3						1		4	4	1	4	1	
	2%	0.8%	~	2%	1%	1%	2%	1%	~	~	~	~	~	2%~	~	2%	1%~	6%~	2%	1%	
NOT ANSWERED	22	415		6	3	8	5	5						1	2	1	8	9	1	18	4
VALID CASES	322	5603	1	56	98	77	90	243	2	2	1	6	12	40	58	261	304	16	242	80	
NUMBER OF RESPONDENTS	344	6018	1	62	101	85	95	248	2	2	1	6	13	42	59	269	313	17	260	84	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER IND/ PAC ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q82 YES	8 4%	157 5%	~	~	2%	2%	9%*	4 2%~	1 ~100%~	~	~	1 11%~	~	2 6%~	6 3%~	7 3%~	1 8%~	4 2%	4 7%
NO	208 96%	3319 95%	33 ~100%~	56 98%	59 98%	60 91%*	166 98%~100%~	2 ~100%~	1 ~100%~	1 ~100%~	3 100%	8 100%	16 100%	34 94%~	172 97%~	194 97%~	12 92%~	156 98%	52 93%
NOT ANSWERED	1	40				1												1	
VALID CASES	216	3476	33	57	60	66	170	2	1	1	3	9	16	36	178	201	13	160	56
NUMBER OF RESPONDENTS	217 100%	3516 100%	33 100%	57 100%	61 100%	66 100%	170 100%	2 100%	1 100%	1 100%	3 100%	9 100%	16 100%	36 100%	178 100%	201 100%	13 100%	161 100%	56 100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

		AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q83.1	WORA TOT CHLD																
YES	5 63%	68 57%	~	~100%	~	67%	75%	~	~	~	~	~100%	50%	57%	100%	50%	75%
NO	3 38%	51 43%	~	~	~100%	33%	25%	~	~	~	~100%	~	50%	43%	~	50%	25%
VALID CASES	8	119		1	1	6	4	1		1		2	6	7	1	4	4
NUMBER OF RESPONDENTS	8	119		1	1	6	4	1		1		2	6	7	1	4	4
	100%	100%		100%	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					ETHNICITY	HEALTH STATUS		CCC SCREENER			
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	HIS- PAN- IC	NOT VERY GOOD & POOR	EX & FAIR & POOR	NO CCC	CCC	
Q83.2	WORA TOT CHLD																	
YES	1 13%	52 44%	~	~	~	1 17%	1 25%	~	~	~	~	~	1 17%	1 14%	~	~	1 25%	
NO	7 87%	67 56%	~	~100%	~100%	5 83%	3 75%	~100%	~	1 ~100%	~	2 ~100%	5 83%	6 86%	1 100%	~100%	4 75%	3
VALID CASES	8	119		1	1	6	4	1		1		2	6	7	1	4	4	
NUMBER OF RESPONDENTS	8	119		1	1	6	4	1		1		2	6	7	1	4	4	
	100%	100%		100%	100%	100%	100%	100%		100%		100%	100%	100%	100%	100%	100%	

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

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

		AGE					RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND PAC	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	HIS- PAN- IC	NOT VERY GOOD & FAIR & POOR	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q83.3	WORA TOT CHLD																
YES	1 13%	9 7%	~	~	~	1 17%	1 25%	~	~	~	~	~	1 17%	1 14%	~	1 25%	~
NO	7 87%	110 93%	~	~100%	~100%	5 83%	3 75%	~100%	~	~100%	~	2 100%	5 83%	6 86%	1 100%	3 75%	4 100%
VALID CASES	8	119		1	1	6	4	1		1		2	6	7	1	4	4
NUMBER OF RESPONDENTS	8	119		1	1	6	4	1		1		2	6	7	1	4	4
	100%	100%		100%	100%	100%	100%	100%		100%		100%	100%	100%	100%	100%	100%

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

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

		AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
		<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLK OR AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q83.4	WORA TOT CHLD																		
YES	OHP TOT CHLD	31																	
		26%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO		8		1	1	6	4	1			1			2	6	7	1	4	4
		100%	~	~100%	~100%	~100%	~100%	~100%	~	~	~100%	~	~	~100%	~100%	~100%	~100%	~100%	~100%
VALID CASES		8		1	1	6	4	1			1			2	6	7	1	4	4
NUMBER OF RESPONDENTS		8		1	1	6	4	1			1			2	6	7	1	4	4
		100%		100%	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					ETHNICITY	HEALTH STATUS		CCC SCREENER						
		<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/ALSK NATV	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
Q83.5	WORA TOT CHLD																				
YES	2 25%	11 9%	~	~	~100%	17%	~	~	~	~	~100%	~	~	~33%	2	2	29%	~	1 25%	1 25%	
NO	6 75%	108 91%	~	~100%	~83%	~100%	4	1	~	~	~	~	~100%	2	4	5	1	71%	~100%	3 75%	3 75%
VALID CASES	8	119		1	1	6	4	1			1			2	6	7	1			4	4
NUMBER OF RESPONDENTS	8	119		1	1	6	4	1			1			2	6	7	1			4	4
	100%	100%		100%	100%	100%	100%	100%			100%			100%	100%	100%	100%			100%	100%

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

NQ14 RATING OF ALL CHILD'S HEALTH CARE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC	
NQ14 0-6	24 10%	375 10%	~	1 2%	8 11%	8 15%	7 10%	18 10%	1 50%	~	~	~	2 20%	1 4%	4 10%	19 10%	18 8%	6 43%	14 8%	10 14%	
7-8	68 28%	1202 31%	~	11 23%	24 34%	12 23%	21 30%	52 28%	~	~	1 100%	3 50%	3 30%	6 23%	13 33%	54 27%	63 28%	5 36%	45 26%	23 32%	
9-10	149 62%	2325 60%	100%	1 74%	35 74%	39 55%	41 62%	114 62%	1 50%	1 100%	~	3 50%	5 50%	19 73%	23 58%	125 63%	144 64%	3 21%	111 65%	38 54%	
VALID CASES	241	3902	1	47	71	53	69	184	2	1	1	6	10	26	40	198	225	14	170	71	
NUMBER OF RESPONDENTS	241 100%	3902 100%	100%	1 100%	47 100%	71 100%	53 100%	69 100%	184 100%	2 100%	1 100%	1 100%	6 100%	10 100%	26 100%	40 100%	198 100%	225 100%	14 100%	170 100%	71 100%
MEAN	2.52	2.50	3.00	2.72	2.44	2.47	2.49	2.52	2.00	3.00	2.00	2.50	2.30	2.69	2.47	2.54	2.56	1.79	2.57	2.39	
p stat_(*=Sig @ p<=.05)		.666	~	~	.231	.597	.707	.899	~	~	~	~	~	~	~	~	~	~	~	.083	.079

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
NQ41 0-6	28 9%	353 7%	~	2 4%*	11 12%	6 8%	9 11%	20 9%	1 50%~	~	~	~	1 8%~	4 11%~	4 8%	24 10%	25 9%~	3 20%~	21 10%	7 9%	
7-8	63 21%	1106 23%	~	6 12%*	24 26%	19 27%	14 17%	51 23%	~	~	~	1 17%~	2 15%~	7 19%~	8 15%	54 22%	60 21%~	3 20%~	43 19%	20 26%	
9-10	207 69%	3349 70%	100%~	1 85%*	44 62%	56 65%	46 72%	60 72%	150 68%	1 50%~	2 100%~	1 100%~	5 83%~	10 77%~	26 70%~	40 77%	163 68%	195 70%~	9 60%~	157 71%	50 65%
VALID CASES	298	4809	1	52	91	71	83	221	2	2	1	6	13	37	52	241	280	15	221	77	
NUMBER OF RESPONDENTS	298 100%	4809 100%	100%	100%	100%	100%	100%	221 100%	2 100%	2 100%	1 100%	6 100%	13 100%	37 100%	52 100%	241 100%	280 100%	15 100%	221 100%	77 100%	
MEAN	2.60	2.62	3.00	2.81	2.49	2.56	2.61	2.59	2.00	3.00	3.00	2.83	2.69	2.59	2.69	2.58	2.61	2.40	2.62	2.56	
p stat_(*=Sig @ p<=.05)		.540	~	.002*	.077	.582	.826	.590	~	~	~	~	~	~	.246	.176	~	~	.520	.515	

[ASKED IF Q30 = YES]

NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
NQ48 0-6	5 13%	69 10%	~	17%~	22%~	~	17%~	4 14%~	~	~	~	~	17%~	1 20%~	4 12%~	5 15%~	~	3 19%~	2 9%~	
7-8	11 28%	173 25%	~	~	44%~	33%~	25%~	7 25%~	1 50%~	~	~	100%~	2 33%~	11 32%~	8 24%~	3 60%~	4 25%~	7 30%~		
9-10	23 59%	464 66%	~	83%~	33%~	67%~	58%~	17 61%~	1 50%~	~	~	~	3 50%~	4 80%~	19 56%~	21 62%~	2 40%~	9 56%~	14 61%~	
VALID CASES	39	706		6	9	12	12	28	2		1	6	5	34	34	5	16	23		
NUMBER OF RESPONDENTS	39	706		6	9	12	12	28	2		1	6	5	34	34	5	16	23		
	100%	100%		100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
MEAN	2.46	2.56		2.67	2.11	2.67	2.42	2.46	2.50		2.00	2.33	2.60	2.44	2.47	2.40	2.38	2.52		
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

NQ54 RATING OF CHILD'S HEALTH PLAN

		AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
NQ54	WORA TOT CHLD																			
	OHP TOT CHLD																			
0-6	37 12%	702 13%	8 ~ 15%	9 9%	8 10%	12 13%	28 12%	1 50%~	~	~	4 31%~	2 5%~	5 9%	31 12%	33 11%~	4 27%~	26 11%	11 14%		
7-8	94 30%	1548 28%	15 ~ 28%	28 29%	26 34%	25 28%	71 30%	1 50%~	1 50%~	1 100%~	4 67%~	2 15%~	12 29%~	12 21%	81 31%	86 29%~	7 47%~	66 28%	28 35%	
9-10	187 59%	3348 60%	1 100%~	30 57%	60 62%	43 56%	53 59%	136 58%	1 ~ 50%~	2 ~ 33%~	7 54%~	27 66%~	39 70%	146 57%	182 60%~	4 27%~	147 62%	40 51%		
VALID CASES	318	5598	1	53	97	77	90	235	2	2	1	6	13	41	56	258	301	15	239	79
NUMBER OF RESPONDENTS	318 100%	5598 100%	1 100%	53 100%	97 100%	77 100%	90 100%	235 100%	2 100%	2 100%	1 100%	6 100%	13 100%	41 100%	56 100%	258 100%	301 100%	15 100%	239 100%	79 100%
MEAN	2.47	2.47	3.00	2.42	2.53	2.45	2.46	2.46	1.50	2.50	2.00	2.33	2.23	2.61	2.61	2.45	2.50	2.00	2.51	2.37
p stat_(*=Sig @ p<=.05)		.983	~.542	.348	.801	.800	.604	~	~	~	~	~	~	.095	.167	~	~	.139	.134	

GETTING NEEDED CARE

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
		<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
NPRBSEE4	NQ46	2.26	2.27	2.33	2.08	2.69	2.06	2.26	3.00		1.00	1.00	2.50	2.14	2.28	2.21	2.57	2.00	2.45		
p stat_(*=Sig @ p<=.05)		.955	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NCARNES4	NQ15	2.57	2.47	3.00	2.62	2.59	2.58	2.50	3.00	2.00	2.50	2.60	2.67	2.44	2.60	2.59	2.29	2.62	2.45		
p stat_(*=Sig @ p<=.05)		.012*	~	~.727	.827	.230	.472	~	~	~	~	~	~	~	~	~	~	.075	.071		
COMPOSITE		2.41	2.37	3.00	2.48	2.33	2.64	2.27	2.42	2.75	3.00	2.00	1.75	1.80	2.58	2.29	2.44	2.40	2.43	2.31	2.45
p stat_(*=Sig @ p<=.05)		.713	~	~.698	.443	.511	.899	~	~	~	~	~	~	~	~	~	~	.237	.868		

GETTING CARE QUICKLY

		AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
NCARSN4 NQ4	2.74	2.61	2.72	2.82	2.70	2.69	2.77		3.00	2.50	2.50	2.67	2.53	2.78	2.73	2.80	2.74	2.74		
p stat_(*=Sig @ p<=.05)		.019*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NAPGET4 NQ6	2.62	2.46	3.00	2.74	2.67	2.60	2.47	2.65	2.00	3.00	3.00	2.83	1.70	2.67	2.40	2.66	2.63	2.40	2.62	2.60
p stat_(*=Sig @ p<=.05)		.001*	~	~.470	~.068		.302	~	~	~	~	~	~	~	~	~	~.840	.840		
COMPOSITE	2.68	2.54	3.00	2.73	2.75	2.65	2.58	2.71	2.00	3.00	3.00	2.67	2.10	2.67	2.46	2.72	2.68	2.60	2.68	2.67
p stat_(*=Sig @ p<=.05)		.421	~	~.832	.924	.744		.799	~	~	~	~	~	~	~.657	~	~.979	.980		

HOW WELL DOCTORS COMMUNICATE

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NDREXPL4 NQ32	2.80	2.69	3.00	2.91	2.74	2.85	2.74	2.83	3.00	3.00	3.00	2.83	2.44	2.79	2.66	2.82	2.80	2.71	2.79	2.82	
p stat_(*=Sig @ p<=.05)		.001*	~	~	.186	~	.266	.147	~	~	~	~	~	~	~	~	~	~	~	.553	.549
NDRLSTN4 NQ33	2.75	2.70	3.00	2.84	2.71	2.79	2.71	2.77	2.50	3.00	3.00	2.83	2.56	2.89	2.68	2.77	2.77	2.57	2.75	2.76	
p stat_(*=Sig @ p<=.05)		.137	~	~	.398	~	.467	.543	~	~	~	~	~	~	~	~	~	~	~	.837	.836
NDRESPU4 NQ34	2.78	2.77	3.00	2.91	2.71	2.79	2.76	2.80	2.00	3.00	3.00	2.83	2.67	2.93	2.74	2.79	2.80	2.43	2.80	2.74	
p stat_(*=Sig @ p<=.05)		.717	~	~	.171	~	.695	.468	~	~	~	~	~	~	~	~	~	~	~	.417	.417
NDRTMEN4 NQ37	2.62	2.48	3.00	2.70	2.45	2.71	2.68	2.68	2.00	3.00	2.00	2.50	2.56	2.64	2.45	2.65	2.66	2.23	2.62	2.61	
p stat_(*=Sig @ p<=.05)		.001*	~	~	.013*	~	.382	.029*	~	~	~	~	~	~	~	~	~	~	~	.902	.901
COMPOSITE	2.74	2.66	3.00	2.84	2.65	2.79	2.72	2.77	2.38	3.00	2.75	2.75	2.56	2.81	2.63	2.76	2.76	2.49	2.74	2.73	
p stat_(*=Sig @ p<=.05)		.745	~	~	.823	~	.971	.841	~	~	~	~	~	~	~	~	~	~	~	.993	.993

CUSTOMER SERVICE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER	AS-IAN	NATV HAW/ PAC ILND	AMER ALSK NATV	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
NPBCLCS4 NQ50	2.20	2.30	1.00	1.92	2.47	2.09	2.33	2.26				2.00	3.00	2.00	2.10	2.22	2.19	2.33	2.20	2.20
p stat_(*=Sig @ p<=.05)		.405	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ51	2.57	2.55	3.00	2.15	2.71	2.82	2.56	2.58				3.00	3.00	2.50	2.80	2.51	2.56	2.67	2.59	2.50
p stat_(*=Sig @ p<=.05)		.883	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.38	2.43	2.00	2.04	2.59	2.45	2.44	2.42	x	x	x	2.50	3.00	2.25	2.45	2.37	2.37	2.50	2.39	2.35
p stat_(*=Sig @ p<=.05)		.918	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
NRXWHY NQ11	2.44	2.46	2.56	2.44	2.29	2.46	2.48		3.00	3.00	2.00	2.40	2.00	2.55	2.48	2.33	2.42	2.47
p stat_(*=Sig @ p<=.05)	.770		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NRXWYNT NQ12	1.92	2.00	2.25	1.94	1.76	1.79	1.88		3.00	3.00	1.00	1.90	1.58	1.97	1.91	2.17	1.91	1.93
p stat_(*=Sig @ p<=.05)	.413		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NRXBST NQ13	2.49	2.59	2.50	2.22	2.76	2.50	2.48		3.00	3.00	1.00	2.40	2.50	2.47	2.46	3.00	2.24	2.87
p stat_(*=Sig @ p<=.05)	.347		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.28	2.35	x 2.44	2.20	2.27	2.25	2.28	x	x 3.00	3.00	1.33	2.23	2.03	2.33	2.28	2.50	2.19	2.42
p stat_(*=Sig @ p<=.05)	.862		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

ACCESS TO SPECIALIZED SERVICES

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AMER IAN	NATV HAW/ PAC ILND	AMER ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
NEZMDEQ NQ20	2.59	2.28	3.00	2.40	2.00	3.00	2.62	1.00		3.00	3.00	3.00	2.50	2.91	1.80	3.00	2.30	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NEZTHP NQ23	2.46	2.11	3.00	2.22	2.83	2.00	2.37	2.50		3.00	3.00	2.50	2.45	2.47	2.40	2.64	2.31	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NEZTC NQ26	2.39	2.11	3.00	2.54	2.45	2.19	2.34			2.00	2.75	2.43	2.36	2.38	2.50	2.22	2.44	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.48	2.17	x 3.00	2.39	2.43	2.40	2.44	1.75	x	x 3.00	2.50	2.88	2.64	2.44	2.59	2.23	2.62	2.35
p stat_(*=Sig @ p<=.05)	.173		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
PRBSEE4 Q46	78%	76%		83%	69%	92%	72%	82%	100%		0%	0%	83%	57%	81%	77%	86%	67%	86%	
CARNES4 Q15	93%	88%	100%	98%	89%	94%	94%	100%	100%	100%	83%	100%	96%	87%	95%	94%	86%	95%	90%	
AVERAGE	85.7	82.1	x	90.6	79.0	93.3	83.2	87.8	x	x	x	83.3	100	89.8	72.2	88.2	85.3	85.7	80.7	88.2

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
CARSN4 Q4	96%	89%		94%	94%	95%	100%	97%		100%	75%	100%	93%	88%	98%	96%	100%	96%	97%	
APGET4 Q6	90%	86%	100%	91%	93%	90%	86%	92%	100%	100%	100%	50%	90%	78%	93%	91%	87%	90%	92%	
AVERAGE	93.2	87.1	x	93.0	93.7	92.7	93.2	94.5	x	x	x	87.5	50.0	91.9	82.9	95.4	93.2	93.3	92.7	94.4

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
DREXPL4 Q32	97%	93%	100%	100%	96%	98%	97%	98%	100%	100%	100%	100%	89%	100%	95%	98%	97%	100%	97%	99%
DRLSTN4 Q33	95%	93%	100%	98%	93%	98%	92%	96%	100%	100%	100%	100%	89%	96%	89%	96%	95%	86%	95%	94%
DRESPU4 Q34	95%	95%	100%	100%	92%	96%	94%	97%	50%	100%	100%	100%	89%	96%	89%	96%	95%	86%	94%	96%
DRTMEN4 Q37	93%	86%	100%	100%	86%	94%	95%	96%	50%	100%	100%	100%	100%	89%	84%	95%	94%	77%	94%	91%
AVERAGE	95.0	91.8	x	99.4	91.6	96.4	94.7	96.5	x	x	x	100	91.7	95.5	89.5	96.0	95.6	87.1	95.1	94.8

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

		AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
PBCLCS4 Q50	73%	80%	0%	54%	88%	73%	78%	76%		100%	100%	62%	70%	73%	73%	67%	71%	80%		
CSRESP Q51	86%	88%	100%	69%	88%	100%	89%		100%	100%	75%	90%	85%	85%	100%	88%	80%			
AVERAGE	79.4	84.1	x	61.5	88.2	86.4	83.3	82.9	x	x	x	x	x	68.8	80.0	79.3	79.2	x	79.3	80.0

SHARED DECISION MAKING (A LOT/YES + SOME) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC			
RXWHY Q11	91%	86%	100%	89%	82%	92%	91%		100%	100%	100%	90%	67%	95%	91%	100%	89%	93%		
RXWYNT Q12	63%	66%	81%	61%	53%	58%	60%		100%	100%	0%	60%	50%	63%	63%	67%	62%	63%		
FRXBST Q13	75%	80%	75%	61%	88%	75%	74%		100%	100%	0%	70%	75%	73%	73%	100%	62%	93%		
AVERAGE	76.0	77.2	x	85.4	70.4	74.5	75.0	75.3	x	x	x	x	x	73.3	63.9	77.2	75.6	88.9	71.1	83.3

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
EZMDEQ Q20	82%	76%	100%	80%	50%	100%	85%	0%		100%		100%	100%	79%	100%	40%	100%	70%		
EZTHP Q23	79%	69%	100%	67%	100%	60%	74%	100%		100%	100%		75%	80%	79%	80%	82%	77%		
EZTC Q26	88%	68%	100%	92%	82%	88%	86%				100%	100%	100%	85%	89%	75%	78%	91%		
AVERAGE	83.1	70.9	x	100	79.7	77.3	73.8	81.3	x	x	x	x	x	100	87.5	81.1	89.4	65.0	86.5	79.2

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
DRTLKU Q38	87%	85%	100%	95%	90%	83%	79%	88%	50%	100%	100%	83%	78%	82%	92%	86%	88%	64%	86%	88%
DRUNCON Q43	92%	86%		100%	95%	90%	89%	95%	50%		100%		50%	87%	86%	93%	94%	83%	88%	93%
DRUNFAM Q44	87%	85%		100%	90%	86%	82%	89%	50%		100%		50%	87%	86%	87%	89%	75%	88%	86%
AVERAGE	88.5	85.4	x	98.5	92.0	86.3	83.4	90.6	x	x	x	83.3	77.8	85.7	87.8	88.3	90.3	74.2	87.4	89.3

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
HELPCONT Q18	92%	88%	67%	100%	87%	100%	100%	0%	100%			100%	100%	94%	100%	80%	92%	92%		
HLPCOORD Q29	63%	56%	82%	64%	50%	62%	64%	100%		67%	100%	55%	80%	61%	62%	83%	59%	66%		
AVERAGE	77.1	72.1	x	81.8	81.8	68.8	81.0	81.8	x	x	x	x	x	54.5	90.0	77.4	80.8	81.7	75.6	78.7

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2. YOUR HEALTH CARE IN THE LAST 6 MONTHS		
2	Q3	IN THE LAST 6 MONTHS, DID YOU HAVE AN ILLNESS, INJURY, OR CONDITION THAT NEEDED CARE RIGHT AWAY IN A CLINIC, EMERGENCY ROOM OR DOCTOR'S OFFICE?
3	Q4	IN THE LAST 6 MONTHS, WHEN YOU NEEDED CARE RIGHT AWAY, HOW OFTEN DID YOU GET CARE AS SOON AS YOU NEEDED? [ASKED IF Q3 = YES]
4	Q5	IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS FOR A CHECK-UP OR ROUTINE CARE AT A DOCTOR'S OFFICE OR CLINIC?
5	Q6	IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT FOR A CHECK-UP OR ROUTINE CARE AT A DOCTOR'S OFFICE OR CLINIC AS SOON AS YOU NEEDED? [ASKED IF Q5 = YES]
6	Q7	IN THE LAST 6 MONTHS, NOT COUNTING THE TIMES YOU WENT TO AN EMERGENCY ROOM, HOW MANY TIMES DID YOU GO TO A DOCTOR'S OFFICE OR CLINIC TO GET HEALTH CARE FOR YOURSELF?
7	Q8	A HEALTH PROVIDER IS THE PERSON YOU WOULD SEE IF YOU NEED A CHECK-UP, WANT ADVICE ABOUT A HEALTH PROBLEM, OR GET SICK OR HURT. 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	WHEN YOU TALKED ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID 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	WHEN YOU TALKED ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID 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]

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

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

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

PAGE	QUESTION	TITLE
42	Q35H	IN THE LAST 6 MONTHS, DID YOU FEEL YOU COULD TELL A DOCTOR OR OTHER HEALTH PROVIDER ANYTHING, EVEN THINGS THAT YOU MIGHT NOT TELL ANYONE ELSE?
43	Q35I	IN THE LAST 6 MONTHS, DID YOU FEEL YOU COULD TRUST A DOCTOR OR OTHER HEALTH PROVIDER WITH YOUR MEDICAL CARE?
44	Q35J	IN THE LAST 6 MONTHS, DID YOU FEEL A DOCTOR OR OTHER HEALTH PROVIDER ALWAYS TOLD YOU THE TRUTH ABOUT YOUR HEALTH, EVEN IF THERE WAS BAD NEWS?
45	Q35K	IN THE LAST 6 MONTHS, DID YOU FEEL THIS PROVIDER CARED AS MUCH AS YOU DO ABOUT YOUR HEALTH?
46	Q35L	IN THE LAST 6 MONTHS, DID YOU FEEL THIS PROVIDER REALLY CARED ABOUT YOU AS A PERSON?
47	Q35M	IN THE LAST 6 MONTHS, HOW OFTEN HAVE YOU BEEN TREATED UNFAIRLY AT A DOCTOR OR OTHER HEALTH PROVIDER'S OFFICE BECAUSE OF YOUR RACE OR ETHNICITY?
48	Q35N	IN THE LAST 6 MONTHS, HOW OFTEN HAVE YOU BEEN TREATED UNFAIRLY AT A DOCTOR OR OTHER HEALTH PROVIDER'S OFFICE BECAUSE OF THE TYPE OF HEALTH INSURANCE YOU HAVE OR BECAUSE YOU DO NOT HAVE HEALTH INSURANCE?
49	Q35O	IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER GIVE YOU ALL THE INFORMATION YOU WANTED ABOUT YOUR HEALTH?
50	Q35P	IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER ENCOURAGE YOU TO TALK ABOUT ALL YOUR HEALTH QUESTIONS OR CONCERNS?
51	Q35Q	IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER USE MEDICAL WORDS YOU DID NOT UNDERSTAND?
52	Q35R	WHAT IS YOUR PREFERRED LANGUAGE?
53	Q35S	HOW WELL DO YOU SPEAK ENGLISH? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE]
54	Q35T	IN THE LAST 6 MONTHS, WHEN YOU CALLED OR SPOKE TO SOMEONE FROM YOUR HEALTH PLAN, HOW OFTEN DID THEY SPEAK TO YOU IN YOUR PREFERRED LANGUAGE? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE]
55	Q35U	AN INTERPRETER IS SOMEONE WHO HELPS YOU TALK WITH OTHERS WHO DO NOT SPEAK YOUR LANGUAGE. INTERPRETERS CAN INCLUDE STAFF FROM THE HEALTH PLAN OR TELEPHONE INTERPRETERS. IN THE LAST 6 MONTHS, WAS THERE ANY TIME WHEN YOU NEEDED AN INTERPRETER TO TALK WITH SOMEONE FROM YOUR HEALTH PLAN? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE]
56	Q35V	IN THE LAST 6 MONTHS, DID ANYONE FROM THE HEALTH PLAN LET YOU KNOW THAT AN INTERPRETER WAS AVAILABLE FREE OF CHARGE? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES]
57	Q35W	IN THE LAST 6 MONTHS, HOW OFTEN DID YOU USE AN INTERPRETER PROVIDED BY YOUR HEALTH PLAN TO HELP YOU TALK WITH SOMEONE FROM THE PLAN? ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES]
58	Q35X	IN THE LAST 6 MONTHS, WHEN YOU USED AN INTERPRETER PROVIDED BY YOUR HEALTH PLAN, WHO WAS THE INTERPRETER YOU USED MOST OFTEN? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND 35W = SOMETIMES OR USUALLY OR ALWAYS]
59	Q35Y	IN THE LAST 6 MONTHS, HOW OFTEN DID THIS INTERPRETER TREAT YOU WITH COURTESY AND RESPECT? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND Q35W = SOMETIMES OR USUALLY OR ALWAYS]
60	Q35Z	USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST INTERPRETER POSSIBLE AND 10 IS THE BEST INTERPRETER POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE THIS INTERPRETER? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND 35W = SOMETIMES OR USUALLY OR ALWAYS]

PAGE	QUESTION	TITLE
61	Q35AA	IN THE LAST 6 MONTHS, HOW OFTEN DID YOU USE A FRIEND OR FAMILY MEMBER AS AN INTERPRETER WHEN YOU TALKED WITH SOMEONE FROM YOUR HEALTH PLAN? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES]
62	Q35AB	IN THE LAST 6 MONTHS, DID YOU USE FRIENDS OR FAMILY MEMBERS AS INTERPRETERS BECAUSE THAT WAS WHAT YOU PREFERRED? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND Q35AA = SOMETIMES OR USUALLY OR ALWAYS]
6. ABOUT YOU		
63	Q36	IN GENERAL, HOW WOULD YOU RATE YOUR OVERALL HEALTH?
64	Q37	IN GENERAL, HOW WOULD YOU RATE YOUR OVERALL MENTAL OR EMOTIONAL HEALTH?
65	Q38	HAVE YOU HAD EITHER A FLU SHOT OR FLU SPRAY IN THE NOSE SINCE JULY 1, 2013?
66	Q39	DO YOU NOW SMOKE CIGARETTES OR USE TOBACCO EVERY DAY, SOME DAYS, OR NOT AT ALL?
67	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]
68	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]
69	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]
70	Q43	DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?
71	Q44	DO YOU HAVE A HEALTH PROBLEM OR TAKE MEDICATION THAT MAKES TAKING ASPIRIN UNSAFE FOR YOU?
72	Q45	HAS A DOCTOR OR HEALTH PROVIDER EVER DISCUSSED WITH YOU THE RISKS AND BENEFITS OF ASPIRIN TO PREVENT HEART ATTACK OR STROKE?
73	Q46.1	ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: HIGH CHOLESTEROL
74	Q46.2	ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: HIGH BLOOD PRESSURE
75	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
76	Q47.1	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: A HEART ATTACK
77	Q47.2	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: ANGINA OR CORONARY HEART DISEASE
78	Q47.3	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: A STROKE
79	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

PAGE	QUESTION	TITLE
80	Q48	IN THE LAST 6 MONTHS, DID YOU GET HEALTH CARE 3 OR MORE TIMES FOR THE SAME CONDITION OR PROBLEM?
81	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]
82	Q50	DO YOU NOW NEED OR TAKE MEDICINE PRESCRIBED BY A DOCTOR? DO NOT INCLUDE BIRTH CONTROL.
83	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]
84	NQ52	WHAT IS YOUR AGE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
85	NQ53	ARE YOU MALE OR FEMALE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
86	Q54	WHAT IS THE HIGHEST GRADE OR LEVEL OF SCHOOL THAT YOU HAVE COMPLETED?
87	Q55	ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?
88	Q56.1	WHAT IS YOUR RACE? RESPONSE: WHITE
89	Q56.2	WHAT IS YOUR RACE? RESPONSE: BLACK OR AFRICAN-AMERICAN
90	Q56.3	WHAT IS YOUR RACE? RESPONSE: ASIAN
91	Q56.4	WHAT IS YOUR RACE? RESPONSE: NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
92	Q56.5	WHAT IS YOUR RACE? RESPONSE: AMERICAN INDIAN OR ALASKA NATIVE
93	Q56.6	WHAT IS YOUR RACE? RESPONSE: OTHER
94	Q57	DID SOMEONE HELP YOU COMPLETE THIS SURVEY? [ASKED IF SURVEY COMPLETED BY MAIL]
95	Q58.1	HOW DID THAT PERSON HELP YOU? RESPONSE: READ THE QUESTIONS TO ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
96	Q58.2	HOW DID THAT PERSON HELP YOU? RESPONSE: WROTE DOWN THE ANSWERS I GAVE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
97	Q58.3	HOW DID THAT PERSON HELP YOU? RESPONSE: ANSWERED THE QUESTIONS FOR ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
98	Q58.4	HOW DID THAT PERSON HELP YOU? RESPONSE: TRANSLATED THE QUESTIONS INTO MY LANGUAGE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
99	Q58.5	HOW DID THAT PERSON HELP YOU? RESPONSE: HELPED IN SOME OTHER WAY. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]

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8. RATINGS

100 NQ13 RATING OF ALL HEALTH CARE [ASKED IF Q7 >= 1 TIME]
101 NQ23 RATING OF PERSONAL DOCTOR [ASKED IF Q15 = YES]
102 NQ27 RATING OF SPECIALIST SEEN MOST OFTEN [ASKED IF Q24 = YES AND Q26 >= 1 SPECIALIST]
103 NQ35 RATING OF HEALTH PLAN
104 NQ35Z RATING OF INTERPRETER [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND 35W = SOMETIMES OR USUALLY OR ALWAYS]

9. COMPOSITES

105 GETTING NEEDED CARE
106 GETTING CARE QUICKLY
107 HOW WELL DOCTORS COMMUNICATE
108 CUSTOMER SERVICE
109 SHARED DECISION MAKING

10. GLOBAL PROPORTION COMPOSITES

110 GETTING NEEDED CARE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
111 GETTING CARE QUICKLY (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
112 HOW WELL DOCTORS COMMUNICATE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
113 CUSTOMER SERVICE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
114 SHARED DECISION MAKING (A LOT/YES + SOME) -- GLOBAL PROPORTION COMPOSITE

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2. YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS		
2	Q3	IN THE LAST 6 MONTHS, DID YOUR CHILD HAVE AN ILLNESS, INJURY, OR CONDITION THAT NEEDED CARE RIGHT AWAY IN A CLINIC, EMERGENCY ROOM OR DOCTOR'S OFFICE?
3	Q4	IN THE LAST 6 MONTHS, WHEN YOUR CHILD NEEDED CARE RIGHT AWAY, HOW OFTEN DID YOUR CHILD GET CARE AS SOON AS HE OR SHE NEEDED? [ASKED IF Q3 = YES]
4	Q5	IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS FOR A CHECK UP OR ROUTINE CARE FOR YOUR CHILD AT A DOCTOR'S OFFICE OR CLINIC?
5	Q6	IN THE LAST 6 MONTHS, WHEN YOU MADE AN APPOINTMENT FOR A CHECK UP OR ROUTINE CARE FOR YOUR CHILD AT A DOCTOR'S OFFICE OR CLINIC, HOW OFTEN DID YOU GET AN APPOINTMENT AS SOON AS YOUR CHILD NEEDED? [ASKED IF Q5 = YES]
6	Q7	IN THE LAST 6 MONTHS, NOT COUNTING THE TIMES YOUR CHILD WENT TO AN EMERGENCY ROOM, HOW MANY TIMES DID HE OR SHE GO TO A DOCTOR'S OFFICE OR CLINIC TO GET HEALTH CARE?
7	Q8	A HEALTH PROVIDER IS THE PERSON YOU WOULD SEE IF YOUR CHILD NEEDED A CHECK-UP, WANTED ADVICE ABOUT A HEALTH PROBLEM, OR GOT SICK OR HURT. IN THE LAST 6 MONTHS, DID YOU AND YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT SPECIFIC THINGS YOU COULD DO TO PREVENT ILLNESS IN YOUR CHILD? [ASKED IF Q7 >= 1 TIME]
8	Q9	IN THE LAST 6 MONTHS, HOW OFTEN DID YOU HAVE YOUR QUESTIONS ANSWERED BY YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER? [ASKED IF Q7 >= 1 TIME]
9	Q10	IN THE LAST 6 MONTHS, DID YOU AND YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE FOR YOUR CHILD? [ASKED IF Q7 >= 1 TIME]
10	Q11	WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT WANT YOUR CHILD TO TAKE A MEDICINE? [ASKED IF Q7 >= 1 TIME AND Q10 = YES]
11	Q12	WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT NOT WANT YOUR CHILD TO TAKE A MEDICINE? [ASKED IF Q7 >= 1 TIME AND Q10 = YES]
12	Q13	WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, DID A DOCTOR OR OTHER HEALTH PROVIDER ASK YOU WHAT YOU THOUGHT WAS BEST FOR YOUR CHILD? [ASKED IF Q7 >= 1 TIME AND Q10 = YES]
13	Q14	USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH CARE POSSIBLE AND 10 IS THE BEST HEALTH CARE POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE ALL YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS? [ASKED IF Q7 >= 1]
14	Q15	IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THE CARE, TESTS, OR TREATMENT YOUR CHILD NEEDED? [ASKED IF Q7 >= 1 TIME]

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

3. SPECIALIZED SERVICES

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

PAGE	QUESTION	TITLE
4.	YOUR CHILD'S PERSONAL DOCTOR	
29	Q30	A PERSONAL DOCTOR IS THE ONE YOUR CHILD WOULD SEE IF HE OR SHE NEEDS A CHECKUP, HAS A HEALTH PROBLEM, OR GETS SICK OR HURT. DOES YOUR CHILD HAVE A PERSONAL DOCTOR?
30	Q31	IN THE LAST 6 MONTHS, HOW MANY TIMES DID YOUR CHILD VISIT HIS OR HER PERSONAL DOCTOR FOR CARE? [ASKED IF Q30 = YES]
31	Q31A	IN THE LAST 6 MONTHS, HOW OFTEN DID YOU HAVE A HARD TIME SPEAKING WITH OR UNDERSTANDING YOUR CHILD'S PERSONAL DOCTOR BECAUSE YOU SPOKE DIFFERENT LANGUAGES? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
32	Q32	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR EXPLAIN THINGS ABOUT YOUR CHILD'S HEALTH IN A WAY THAT WAS EASY TO UNDERSTAND? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
33	Q33	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR LISTEN CAREFULLY TO YOU? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
34	Q34	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR SHOW RESPECT FOR WHAT YOU HAD TO SAY? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
35	Q35	IS YOUR CHILD ABLE TO TALK WITH DOCTORS ABOUT HIS OR HER HEALTH CARE? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
36	Q35A	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD HAVE A HARD TIME SPEAKING WITH OR UNDERSTANDING HIS OR HER PERSONAL DOCTOR BECAUSE THEY SPOKE DIFFERENT LANGUAGES? [ASKED IF Q30 = YES AND Q31 >= 1 TIME AND Q35 = YES]
37	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]
38	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]
39	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]
40	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]
41	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]
42	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]
43	Q42	DOES YOUR CHILD HAVE ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITIONS THAT HAVE LASTED FOR MORE THAN 3 MONTHS? [ASKED IF Q30 = YES]
44	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]
45	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

46 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?

47 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]

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

49 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

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

51 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]

52 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]

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

54 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]

55 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

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

57 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]

58 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]

8. ABOUT YOUR CHILD AND YOU

- 59 Q58 IN GENERAL, HOW WOULD YOU RATE YOUR CHILD'S OVERALL HEALTH?
- 60 Q59 IN GENERAL, HOW WOULD YOU RATE YOUR CHILD'S OVERALL MENTAL OR EMOTIONAL HEALTH?
- 61 Q60 DOES YOUR CHILD CURRENTLY NEED OR USE MEDICINE PRESCRIBED BY A DOCTOR (OTHER THAN VITAMINS)?
- 62 Q61 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q60 = YES]
- 63 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]
- 64 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?
- 65 Q64 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q63 = YES]
- 66 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]
- 67 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?
- 68 Q67 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q66 = YES]
- 69 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]
- 70 Q69 DOES YOUR CHILD NEED OR GET SPECIAL THERAPY, SUCH AS PHYSICAL, OCCUPATIONAL, OR SPEECH THERAPY?
- 71 Q70 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q69 = YES]
- 72 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]
- 73 Q72 DOES YOUR CHILD HAVE ANY KIND OF EMOTIONAL, DEVELOPMENTAL, OR BEHAVIORAL PROBLEMS FOR WHICH HE OR SHE NEEDS OR GETS TREATMENT OR COUNSELING?
- 74 Q73 HAS THIS PROBLEM LASTED OR IS IT EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q72 = YES]
- 75 NQ74 WHAT IS YOUR CHILD'S AGE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
- 76 NQ75 IS YOUR CHILD MALE OR FEMALE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
- 77 Q76 IS YOUR CHILD OF HISPANIC OR LATINO ORIGIN OR DESCENT?
- 78 Q77.1 WHAT IS YOUR CHILD'S RACE? RESPONSE: WHITE
- 79 Q77.2 WHAT IS YOUR CHILD'S RACE? RESPONSE: BLACK OR AFRICAN-AMERICAN
- 80 Q77.3 WHAT IS YOUR CHILD'S RACE? RESPONSE: ASIAN
- 81 Q77.4 WHAT IS YOUR CHILD'S RACE? RESPONSE: NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
- 82 Q77.5 WHAT IS YOUR CHILD'S RACE? RESPONSE: AMERICAN INDIAN OR ALASKA NATIVE
- 83 Q77.6 WHAT IS YOUR CHILD'S RACE? RESPONSE: OTHER
- 84 Q78 WHAT IS YOUR AGE?
- 85 Q79 ARE YOU MALE OR FEMALE?

86	Q80	WHAT IS THE HIGHEST GRADE OR LEVEL OF SCHOOL THAT YOU HAVE COMPLETED?
87	Q81	HOW ARE YOU RELATED TO THE CHILD?
88	Q82	DID SOMEONE HELP YOU COMPLETE THIS SURVEY? [ASKED IF SURVEY COMPLETED BY MAIL]
89	Q83.1	HOW DID THAT PERSON HELP YOU? RESPONSE: READ THE QUESTIONS TO ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]
90	Q83.2	HOW DID THAT PERSON HELP YOU? RESPONSE: WROTE DOWN THE ANSWERS I GAVE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]
91	Q83.3	HOW DID THAT PERSON HELP YOU? RESPONSE: ANSWERED THE QUESTIONS FOR ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]
92	Q83.4	HOW DID THAT PERSON HELP YOU? RESPONSE: TRANSLATED THE QUESTIONS INTO MY LANGUAGE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]
93	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
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9. RATINGS

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

10. COMPOSITES

98	GETTING NEEDED CARE
99	GETTING CARE QUICKLY
100	HOW WELL DOCTORS COMMUNICATE
101	CUSTOMER SERVICE
102	SHARED DECISION MAKING
103	ACCESS TO SPECIALIZED SERVICES

11. GLOBAL PROPORTION COMPOSITES

104	GETTING NEEDED CARE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
105	GETTING CARE QUICKLY (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
106	HOW WELL DOCTORS COMMUNICATE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
107	CUSTOMER SERVICE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

108 SHARED DECISION MAKING (A LOT/YES + SOME) -- GLOBAL PROPORTION COMPOSITE
109 ACCESS TO SPECIALIZED SERVICES (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE
110 PERSONAL DOCTOR WHO KNOWS CHILD (YES) -- GLOBAL PROPORTION COMPOSITE
111 CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

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

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

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

SURVEY INSTRUCTIONS

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

Correct
Mark 

Incorrect
Marks



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

- Yes → *Go to Question 1*
- No

↓ **START HERE** ↓

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

- Yes → *Go to Question 3*
- No

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

YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

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

- Yes
- No → *Go to Question 5*

4. In the last 6 months, when you needed care right away, how often did you get care as soon as you needed?

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 7*

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

- Never
- Sometimes
- Usually
- Always

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

- None → *Go to Question 15*
- 1 time
- 2
- 3
- 4
- 5 to 9
- 10 or more times

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

- Yes
- No

9. In the last 6 months, did you and a doctor or other health provider talk about starting or stopping a prescription medicine?

- Yes
- No → *Go to Question 13*

10. When you talked about starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might want to take a medicine?

- Not at all
- A little
- Some
- A lot

11. When you talked about starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might not want to take a medicine?

- Not at all
- A little
- Some
- A lot

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

- Yes
- No

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

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

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

- Never
- Sometimes
- Usually
- Always

YOUR PERSONAL DOCTOR

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

- Yes
- No → *Go to Question 24*

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 23*

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

- Never
- Sometimes
- Usually
- Always

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

- 0 1 2 3 4 5 6 7 8 9 10
 Worst 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?

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

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

- Yes
- No → *Go to Question 35c*

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

- Never
- Sometimes
- Usually
- Always



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

- Yes
- No → *Go to Question 35e*

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

- Never
- Sometimes
- Usually
- Always

CULTURAL COMPETENCY

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

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, how often did a doctor or other health provider talk too fast when talking to you?

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

35h. In the last 6 months, did you feel you could tell a doctor or other health provider anything, even things that you might not tell anyone else?

- Yes, definitely
- Yes, somewhat
- No

35i. 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

35j. In the last 6 months, did you feel a doctor or other health provider always told you the truth about your health, even if there was bad news?

- Yes, definitely
- Yes, somewhat
- No

35k. In the last 6 months, did you feel this provider cared as much as you do about your health?

- Yes, definitely
- Yes, somewhat
- No



35l. In the last 6 months, did you feel this provider really cared about you as a person?

- Never
- Sometimes
- Usually
- Always

35m. In the last 6 months, how often have you been treated unfairly at a doctor or other health provider's office because of your race or ethnicity?

- Never
- Sometimes
- Usually
- Always

35n. In the last 6 months, how often have you been treated unfairly at a doctor or other health provider's office because of the type of health insurance you have or because you do not have health insurance?

- Never
- Sometimes
- Usually
- Always

HEALTH LITERACY

The following questions ask about how much you think your doctor or other health provider helps you understand the information and services you need to make decisions about your health.

35o. In the last 6 months, how often did a doctor or other health provider give you all the information you wanted about your health?

- Never
- Sometimes
- Usually
- Always

35p. In the last 6 months, how often did a doctor or other health provider encourage you to talk about all your health questions or concerns?

- Never
- Sometimes
- Usually
- Always

35q. In the last 6 months, how often did a doctor or other health provider use medical words you did not understand?

- Never
- Sometimes
- Usually
- Always

INTERPRETER SERVICES

35r. What is your preferred language?

- English → *Go to Question 36*
- Spanish
- Some other language

35s. How well do you speak English?

- Very well
- Well
- Not well
- Not at all

35t. In the last 6 months, when you called or spoke to someone from your health plan, how often did they speak to you in your preferred language?

- Never
- Sometimes
- Usually
- Always



35u. An interpreter is someone who helps you talk with others who do not speak your language. Interpreters can include staff from the health plan or telephone interpreters.

In the last 6 months, was there any time when you needed an interpreter to talk with someone from your health plan?

- Yes
- No → **Go to Question 36**

35v. In the last 6 months, did anyone from the health plan let you know that an interpreter was available free of charge?

- Never
- Sometimes
- Usually
- Always

35w. In the last 6 months, how often did you use an interpreter provided by your health plan to help you talk with someone from the plan?

- Never → **Go to Question 35aa**
- Sometimes
- Usually
- Always

35x. In the last 6 months, when you used an interpreter provided by your health plan, who was the interpreter you used most often?

- A staff member from the health plan
- An interpreter provided in-person by the health plan
- A telephone interpreter provided by the health plan
- Someone else provided by the health plan
- Don't know or unsure

35y. In the last 6 months, how often did this interpreter treat you with courtesy and respect?

- Never
- Sometimes
- Usually
- Always

35z. Using any number from 0 to 10, where 0 is the worst interpreter possible and 10 is the best interpreter possible, what number would you use to rate this interpreter?

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

35aa. In the last 6 months, how often did you use a friend or family member as an interpreter when you talked with someone from your health plan?

- Never → **Go to Question 36**
- Sometimes
- Usually
- Always

35ab. In the last 6 months, did you use friends or family members as interpreters because that was what you preferred?

- Never
- Sometimes
- Usually
- Always

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, 2013?

- 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

◆ **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





448-12



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CTYAD

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

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

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

SURVEY INSTRUCTIONS

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

Correct
Mark 

Incorrect
Marks



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

- Yes → *Go to Question 1*
- No

↓ **START HERE** ↓

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 provider?
 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. 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?
 Not at all
 A little
 Some
 A lot



12. 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?
- Not at all
 - A little
 - Some
 - A lot
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**

35a. In the last 6 months, how often did your child have a hard time speaking with or understanding his or her personal doctor because they spoke different languages?

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → **Go to Question 41**

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

- Never
- Sometimes
- Usually
- Always



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

0 1 2 3 4 5 6 7 8 9 10

Worst Personal Doctor Possible Best Personal Doctor Possible

42. Does your child have any medical, behavioral, or other health conditions that have lasted for more than 3 months?

- Yes
- No → **Go to Question 45**

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

- Yes
- No

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

- Yes
- No

GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

- Yes
- No → **Go to Question 49**

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

- Never
- Sometimes
- Usually
- Always

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

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

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

0 1 2 3 4 5 6 7 8 9 10

Worst Specialist Possible Best Specialist Possible

YOUR CHILD'S HEALTH PLAN

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

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

Yes
 No → *Go to Question 52*

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

Never
 Sometimes
 Usually
 Always

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

Never
 Sometimes
 Usually
 Always

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

Yes
 No → *Go to Question 54*

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

Never
 Sometimes
 Usually
 Always

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

0 1 2 3 4 5 6 7 8 9 10

Worst Health 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 58*

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

ABOUT YOUR CHILD AND YOU

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Yes
- No → *Go to Question 63*

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

- Yes
- No → *Go to Question 63*

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

- Yes
- No

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

- Yes
- No → *Go to Question 66*

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

- Yes
- No → *Go to Question 66*

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

- Yes
- No

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

- Yes
- No → *Go to Question 69*

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

- Yes
- No → *Go to Question 69*

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

- Yes
- No

69. Does your child need or get special therapy such as physical, occupational, or speech therapy?

- Yes
- No → *Go to Question 72*



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

- Yes
- No → *Go to Question 72*

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

- Yes
- No

72. Does your child have any kind of emotional, developmental, or behavioral problem for which he or she needs or gets treatment or counseling?

- Yes
- No → *Go to Question 74*

73. Has this problem lasted or is it expected to last for at least 12 months?

- Yes
- No

74. What is your child's age?

- Less than 1 year old

YEARS OLD (write in)

75. Is your child male or female?

- Male
- Female

76. Is your child of Hispanic or Latino origin or descent?

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

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

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

78. What is your age?

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

79. Are you male or female?

- Male
- Female

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

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

81. How are you related to the child?

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

82. Did someone help you complete this survey?

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

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

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

THANK YOU

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

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

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







Sus respuestas a esta encuesta son completamente confidenciales. Toda información que pueda identificarle a usted o a su familia se mantendrá privada. El personal de investigación 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 (o, para personas con problemas de audición, llame al 1-888-631-2097).

INSTRUCCIONES PARA EL CUESTIONARIO

- ▶ Por favor llene el círculo de su respuesta completamente. Use solamente tinta NEGRA o AZUL 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. Cuando hablaron de comenzar o suspender una medicina recetada, ¿qué tanto habló un doctor u otro profesional médico sobre las razones por las que tal vez quiera tomar una medicina?
- Para nada
 Un poco
 Algo
 Mucho

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 RECIBÍ 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 como 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



CAPACIDAD CULTURAL

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

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

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

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

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 35c*

35b. En los últimos 6 meses, ¿con qué frecuencia fue facil 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 facil 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

35h. En los últimos 6 meses, ¿sintió usted que le podía decir a su doctor u otro proveedor de salud cualquier cosa, hasta cosas que tal vez no le diría a otra persona?

- Sí, definitivamente
- Sí, algo
- No

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

- Sí, definitivamente
- Sí, algo
- No

35j. En los últimos 6 meses, ¿sintió usted que un doctor u otro proveedor de salud siempre le decía la verdad sobre su salud, aun si fueran malas noticias?

- Sí, definitivamente
- Sí, algo
- No

35k. En los últimos 6 meses, ¿sintió usted que este proveedor se preocupó tanto por usted como se preocupa usted de su propia salud?

- Sí, definitivamente
- Sí, algo
- No

35l. En los últimos 6 meses, ¿sintió usted que a este proveedor realmente le preocupaba usted como persona?

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

35m. En los últimos 6 meses, ¿con qué frecuencia le trataron injustamente en el consultorio de un doctor u otro proveedor de salud por su raza o etnicidad?

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

35n. En los últimos 6 meses, ¿con qué frecuencia le trataron injustamente en el consultorio de un doctor u otro proveedor de salud por el tipo de seguro de salud que tiene o porque no tiene seguro de salud?

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

COMPRESIÓN DE INFORMACIÓN DE SALUD

Las siguientes preguntas son sobre cuanto piensa usted que su doctor u otro proveedores de salud le ayudan a entender la información y servicios que usted necesita para tomar decisiones sobre su salud.

35o. En los últimos 6 meses, ¿con qué frecuencia un doctor u otro proveedor de salud le dieron toda la información que usted quería sobre su salud?

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



35p. En los últimos 6 meses, ¿con qué frecuencia un doctor u otro proveedor de salud le animó a usted a hablar sobre todas sus preguntas o inquietudes de su salud?

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

35q. En los últimos 6 meses, ¿con qué frecuencia un doctor u otro proveedor de salud uso palabras médicas que usted no entendió?

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

SERVICIOS DE INTÉRPRETE

35r. ¿Qué idioma prefiere hablar usted?

- Inglés → *Pase a la Pregunta 36*
- Español
- Otro idioma

35s. ¿Qué tan bien habla inglés?

- Muy bien
- Bien
- No muy bien
- Para nada

35t. En los últimos 6 meses, cuando llamó o habló con alguien de su plan de salud, ¿con qué frecuencia hablaban con usted en su idioma de preferencia?

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

35u. Un intérprete es una persona que le ayuda a hablar con otras personas que no hablan su idioma. Los intérpretes pueden ser empleados del plan de salud o intérpretes por teléfono.

Durante los últimos 6 meses, ¿necesitó alguna vez a un intérprete para hablar con alguien de su plan de salud?

- Sí
- No → *Pase a la Pregunta 36*

35v. En los últimos 6 meses, ¿le dijo alguna persona de su plan de salud que un intérprete estaba disponible de forma gratuita?

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

35w. En los últimos 6 meses, ¿con qué frecuencia usó un intérprete del plan de salud para que le ayudara a hablar con alguien del plan?

- Nunca → *Pase a la Pregunta 35aa*
- A veces
- La mayoría de las veces
- Siempre

35x. En los últimos 6 meses, cuando usó un intérprete que le ofreció su plan de salud, ¿quién fue el intérprete que usó con más frecuencia?

- Un empleado o personal del plan de salud
- Un intérprete que me ofreció el plan de salud que me ayudó en persona
- Un intérprete que me ofreció el plan de salud que me ayudó por teléfono
- Otra persona que me ofreció el plan de salud
- No sé o no estoy seguro

35y. En los últimos 6 meses, ¿con qué frecuencia le trataba con cortesía y respeto este intérprete?

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

35z. Usando cualquier número del 0 al 10, donde 0 siendo el peor intérprete posible y el 10 el mejor intérprete posible, ¿qué número usaría para calificar a este intérprete?

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

35aa. En los últimos 6 meses, ¿con qué frecuencia usó a un amigo o familiar como intérprete cuando habló con alguien de su plan de salud?

- Nunca → *Pase a la Pregunta 36*
- A veces
- La mayoría de las veces
- Siempre

35ab. En los últimos 6 meses, ¿usó a amigos o familiares como intérpretes porque usted lo prefería así?

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

ACERCA DE USTED

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

38. Desde el 1 de julio del 2013, ¿le han puesto la vacuna para la influenza o gripe ya sea en inyección o con un rociador o spray nasal?

- Sí
- No
- No sé

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

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

40. En los últimos 6 meses, ¿qué tan seguido le aconsejó un médico u otro proveedor de cuidado 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 con, un médico o proveedor de cuidado 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 médico o proveedor de cuidado 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 médico o proveedor de cuidado 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 todas las que aplican.

- 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 médico que usted tiene alguna de las siguientes enfermedades? Marque todas las que aplican.

- 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, ¿ha ido a ver a un doctor o a otro profesional médico 3 veces o más por la misma enfermedad o problema?

- Sí
- No → *Pase a la pregunta 50*

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

- Sí
- No

50. ¿Necesita o toma ahora alguna medicina recetada por un doctor? **No** incluya anticonceptivos.

- Sí
- No → **Pase a la pregunta 52**

51. ¿Esta medicina es 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 use 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 use letra de molde)

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

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

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



Sus respuestas a esta encuesta son completamente confidenciales. Toda información que pueda identificarle a usted o a su familia se mantendrá privada. El personal de investigación 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 (o, para personas con problemas de audición, llame al 1-888-631-2097).

INSTRUCCIONES PARA EL CUESTIONARIO

- Por favor llene el círculo de su respuesta completamente. Use solamente tinta NEGRA o AZUL 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. Cuando hablaron de comenzar o suspender una medicina recetada para su niño, ¿qué tanto habló un doctor u otro profesional médico sobre las razones por las que tal vez usted quiera que su niño tome una medicina?

- Para nada
- Un poco
- Algo
- Mucho

12. Cuando hablaron de comenzar o suspender una medicina recetada para su niño, ¿qué tanto habló un doctor u otro profesional médico sobre las razones por las que tal vez usted no quiera que su niño tome una medicina?

- Para nada
- Un poco
- Algo
- Mucho

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?

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

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, quiere pedir consejo sobre un problema de salud, está enfermo o lastimado. ¿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**

35a. En los últimos 6 meses, ¿con qué frecuencia se le hizo difícil a su niño hablar o entender a su doctor personal porque ellos hablaban idiomas diferentes?

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

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

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

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

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



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

- Sí
- No

39. En los últimos 6 meses, ¿atendió a su niño algún doctor o un 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 o de 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 El mejor doctor personal posible

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

- Sí
- No → *Pase a la pregunta 45*

43. ¿El doctor o enfermera personal de su niño entiende cómo estas condiciones médicas, de comportamiento u otras condiciones de salud afectan la vida cotidiana de su niño?

- Sí
- No

44. ¿El doctor o enfermera personal de su niño entiende cómo estas condiciones médicas, de comportamiento u otras condiciones de salud afectan la vida cotidiana de su familia?

- Sí
- No

LA ATENCIÓN MÉDICA QUE RECIBIÓ DE ESPECIALISTAS

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

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

- Sí
- No → *Pase a la pregunta 49*

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

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

47. ¿Cuántos especialistas ha visto su niño en los últimos 6 meses?
- Ninguno → *Pase a la pregunta 49*
 - 1 especialista
 - 2
 - 3
 - 4
 - 5 especialistas o más

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

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

EL PLAN DE SALUD DE SU NIÑO

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

49. En los últimos 6 meses, ¿recibió información o ayuda de parte del servicio al cliente del plan de salud de su niño?
- Sí
 - No → *Pase a la pregunta 52*

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

51. En los últimos 6 meses, ¿con qué frecuencia el personal de servicio al cliente del plan de salud de su niño le trató con cortesía y respeto?
- Nunca
 - A veces
 - La mayoría de las veces
 - Siempre

52. En los últimos 6 meses, ¿le dio el plan de salud de su niño algún formulario para llenar?
- Sí
 - No → *Pase a la pregunta 54*

53. En los últimos 6 meses, ¿con qué frecuencia fueron fáciles de llenar los formularios del plan de salud de su niño?
- Nunca
 - A veces
 - La mayoría de las veces
 - Siempre

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

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

MEDICINAS RECETADAS

55. En los últimos 6 meses, ¿consiguió alguna medicina recetada o renovó una receta para una medicina recetada para su niño?
- Sí
 - No → *Pase a la pregunta 58*



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

ACERCA DE USTED Y DE SU NIÑO

58. En general, ¿cómo calificaría toda la salud de su niño?

- Excelente
- Muy buena
- Buena
- Regular
- Mala

59. En general, ¿cómo calificaría toda la salud mental o emocional de su niño?

- Excelente
- Muy buena
- Buena
- Regular
- Mala

60. ¿Actualmente necesita o usa su niño una medicina recetada por un doctor (aparte de vitaminas)?

- Sí
- No → *Pase a la pregunta 63*

61. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?

- Sí
- No → *Pase a la pregunta 63*

62. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?

- Sí
- No

63. ¿Necesita o usa su niño más servicios médicos, de salud mental o educativos de lo que es normal para la mayoría de los niños de la misma edad?

- Sí
- No → *Pase a la pregunta 66*

64. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?

- Sí
- No → *Pase a la pregunta 66*

65. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?

- Sí
- No

66. ¿Está su niño limitado o impedido de alguna manera en su habilidad de hacer lo que pueden hacer la mayoría de los niños de la misma edad?

- Sí
- No → *Pase a la pregunta 69*

67. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?

- Sí
- No → *Pase a la pregunta 69*

68. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?

- Sí
- No

69. ¿Necesita o recibe su niño terapia especial, tal como terapia física, ocupacional o del habla?

- Sí
- No → *Pase a la pregunta 72*

70. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?

- Sí
- No → *Pase a la pregunta 72*

71. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?

- Sí
- No

72. ¿Tiene su niño algún problema emocional, de desarrollo o de comportamiento, para el cual necesita o recibe tratamiento o consejería?

- Sí
- No → *Pase a la pregunta 74*

73. ¿Ha durado este problema o se espera que dure por lo menos 12 meses?

- Sí
- No

74. ¿Qué edad tiene su niño?

- Menos de un año

AÑOS (escriba la respuesta)

75. ¿Es su niño de sexo masculino o femenino?

- Masculino
- Femenino

76. ¿Es su niño de origen o ascendencia hispana o latina?

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

77. ¿A qué raza pertenece su niño? Marque una o más.

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

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

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

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

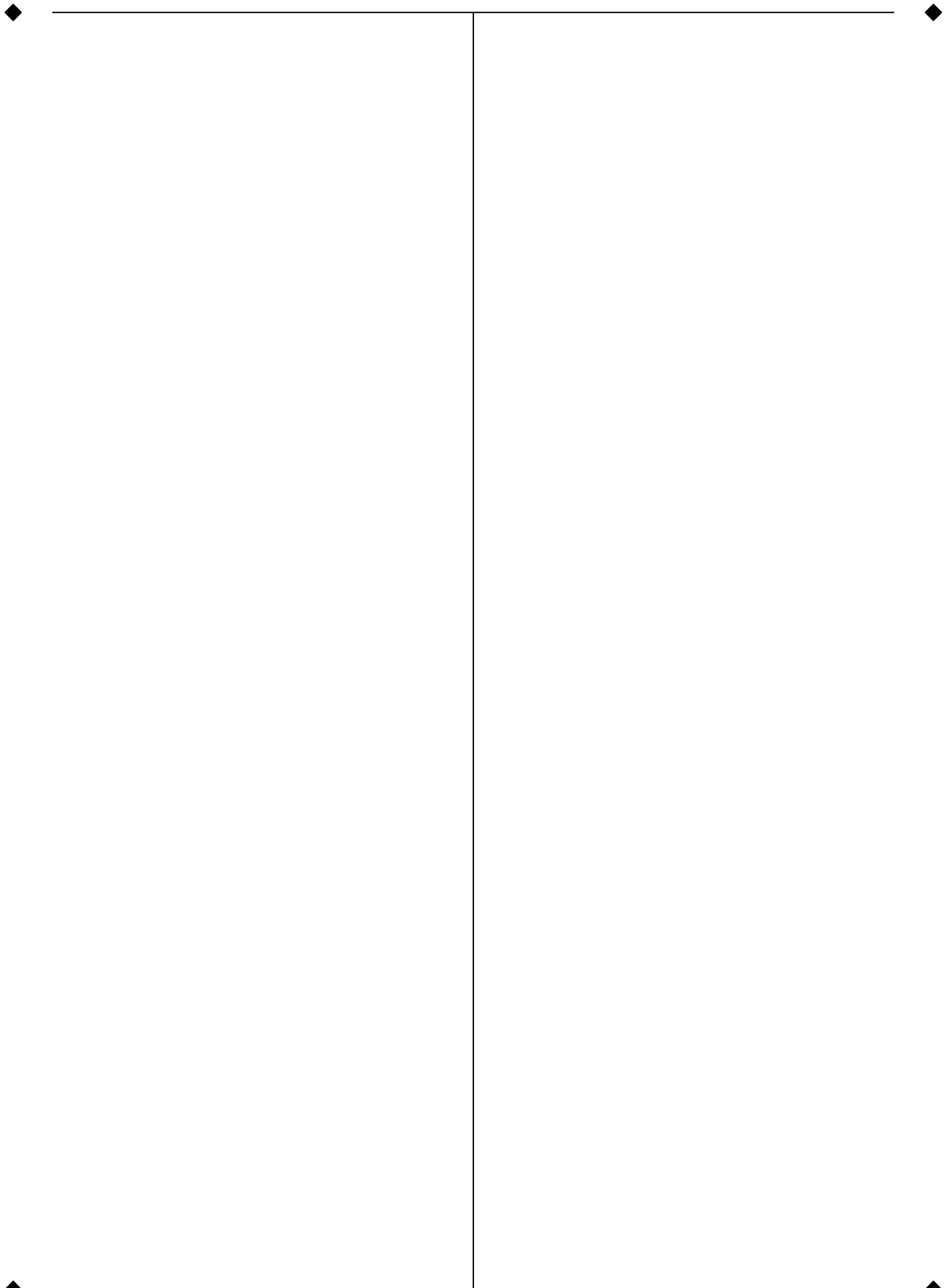


451-11



11

CTYSCCCC



DIAL.SCREEN

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

PHONE NUMBER ---> (###) ### - ####

(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

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 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 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

1. / MEMBER

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

("DK" NOT ALLOWED)

(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

NPLNAME

2. / NPLNAME

What is the name of your health plan?

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS Oregon Health Plan]

(IF R SAYS SOMETHING CLOSE TO Oregon Health Plan, ENTER "2")

(IF R NOT SURE OF PLAN NAME, ENTER "2")

- 1. EXACT MATCH -----> CK.PLMSTCR
- 2. POSSIBLE MATCH -----> PLNAME
- 3. NOT A MATCH -----> PLNAME
- 4. [RESPONDENT] NO LONGER INSURED -----> NO.INSUR
- 5. [RESPONDENT] INSURED BY MEDICAID BUT DOESN'T ----> CK.PLMSTCR
KNOW PLAN NAME
- 6. [RESPONDENT] INSURED BUT NOT BY MEDICAID -----> NO.INSUR

PLNAME

2a. / 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

3. / 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 -----> APM4

DK/REFUSAL/NOT ASCERTAINED --> APM4

CARSN4

4. / 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

5. / 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

6. / APGET4

In the last 6 months, when you made an appointment for a CHECK-UP OR ROUTINE CARE at a doctor's office or clinic, how often did you get an appointment 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

7. / 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 AND QNAIRE <05 THEN GO TO PRSNLD4
IF OFCTIM4=0 OR DK/REFUSAL AND QNAIRE >05 THEN GO TO CHSCHL

PRVENT5

8. / PRVENT5

A health provider is the person you would see if you need a check-up, want advice about a health problem, or get sick or hurt.

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

RXWHY

10. / RXWHY

When you talked about starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might want to take a medicine? Would you say...

(READ LIST)

- 1. NOT AT ALL,
- 2. A LITTLE,
- 3. SOME, OR
- 4. A LOT?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXWYNT

11. / RXWYNT

When you talked about starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might NOT want to take a medicine? Would you say...

(READ LIST)

- 1. NOT AT ALL,
- 2. A LITTLE,
- 3. SOME, OR
- 4. A LOT?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

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
WORST										BEST
HEALTH CARE										HEALTH CARE
POSSIBLE										POSSIBLE

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 (DO NOT READ) --> 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
WORST										BEST
PERSONAL										PERSONAL
DOCTOR POSSIBLE										DOCTOR POSSIBLE

DK/REFUSAL/NOT ASCERTAINED

INTRO.SPDR

INTRO.SPDR

Now I'm going to ask you some questions about specialists. When you answer these questions, please do NOT include dental visits or care you got when you stayed overnight in a hospital.

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, "Does my (type of specialist) count?", 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 |
| WORST | | | | | | | | | | BEST |
| SPECIALIST | | | | | | | | | | SPECIALIST |
| POSSIBLE | | | | | | | | | | POSSIBLE |

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN

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 -----> CLCSR4

DK/REFUSAL/NOT ASCERTAINED --> CLCSR4

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)

CLCSR4

30. / CLCSR4

In the last 6 months, did you get information or help from [your health plan's customer service/customer service at 's health plan] ?

- 1. YES
- 2. NO -----> PLPRW4

DK/REFUSAL/NOT ASCERTAINED --> PLPRW4

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
WORST										BEST
HEALTH PLAN										HEALTH PLAN
POSSIBLE										POSSIBLE

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

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?

(READ LIST)

- 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?

(READ LIST)

- 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?

(READ LIST)

- 1. YES
- 2. NO -----> INTRO.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? Would you say...

- 1. NEVER
- 2. SOMETIMES
- 3. USUALLY
- 4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

INTRO.DTLKTF

INTRO.DTLKTF

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

DTLKTF

35e. / DTLKTF

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.

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,
4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

DINTER

35f. / DINTER

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DRRUDE

35g. / 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?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DRTELL

35h. / DRTELL

In the last 6 months, did you feel you could tell a doctor or other health provider anything, even things that you might not tell anyone else? Would you say...

(READ LIST)

1. YES, DEFINITELY
2. YES, SOMEWHAT OR
3. NO

DK/REFUSAL/NOT ASCERTAINED

DTRUST

35i. / DTRUST

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

(READ LIST)

1. YES, DEFINITELY
2. YES, SOMEWHAT OR
3. NO

DK/REFUSAL/NOT ASCERTAINED

DTRUTH

35j. / DTRUTH

In the last 6 months, did you feel a doctor or other health provider always told you the truth about your health, even if there was bad news? Would you say...

(READ LIST)

1. YES, DEFINITELY
2. YES, SOMEWHAT OR
3. NO

DK/REFUSAL/NOT ASCERTAINED

DCAREH

35k. / DCAREH

In the last 6 months, did you feel this provider cared as much as you do about your health? Would you say...

(READ LIST)

1. YES, DEFINITELY
2. YES, SOMEWHAT OR
3. NO

DK/REFUSAL/NOT ASCERTAINED

DCAREP

35l. / DCAREP

In the last 6 months, did you feel this provider cared about you as a person? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

UNFETH

35m. / UNFETH

In the last 6 months, how often have you been treated unfairly at a doctor or other health provider's office because of your race or ethnicity? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

UNFINS

35n. / UNFINS

In the last 6 months, how often have you been treated unfairly at a doctor or other health provider's office because of the type of health insurance you have or because you do not have health insurance? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

INTRO.ALLINF

INTRO.ALLINF

The following questions ask about how much you think your doctor or other health provider helps you understand the information and services you need to make decisions about your health.

ALLINF

35o. / ALLINF

In the last 6 months, how often did a doctor or other health provider give you all the information you wanted about your health? Would you say..

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

TLKQS

35p. / TLKQS

In the last 6 months, how often did a doctor or other health provider encourage you to talk about all your health questions or concerns? Would you say..

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DMEDW

35q. / DMEDW

In the last 6 months, how often did a doctor or other health provider use medical words you did not understand? Would you say..

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

PRFLANG

35r. / PRFLANG

What is your preferred language? Would you say..

(READ LIST)

- 1. ENGLISH, -----> HLTSTA4
- 2. SPANISH, or
- 3. SOME OTHER LANGUAGE

DK/REFUSAL/NOT ASCERTAINED

SPKENG

35s. / SPKENG

How well do you speak English? Would you say...

(READ LIST)

- 1. VERY WELL,
- 2. WELL,
- 3. NOT WELL, or
- 4. NOT AT ALL

DK/REFUSAL/NOT ASCERTAINED

DSPKPRF

35t. / DSPKPRF

In the last 6 months, when you called or spoke to someone from your health plan, how often did they speak your preferred language? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

NDINTRP

35u. / NDIRTRP

An interpreter is someone who helps you talk with others who do not speak your language. Interpreters can include staff from the health plan or telephone interpreters.

In the last 6 months, was there any time when you needed an interpreter to talk with someone from your health plan?

- 1. YES
- 2. NO -----> HLTSTA4

DK/REFUSAL/NOT ASCERTAINED

FRTRAN

35v. / FRTRAN

In the last 6 months, did anyone from the health plan let you know that an interpreter was available free of charge? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

INTROFC

35w. / INTROFC

In the last 6 months, how often did you use an interpreter provided by your health plan to help you talk with someone from the plan? Would you say..

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

MOTRAN

35x. / MOTRAN

In the last 6 months, when you used an interpreter provided by your health plan, who was it? Was it..

(READ LIST)

- 1. A STAFF MEMBER FROM THE HEALTH PLAN
- 2. AN INTERPRETER PROVIDED IN-PERSON BY THE HEALTH PLAN
- 3. A TELEPHONE INTERPRETER PROVIDED BY THE HEALTH PLAN
- 4. SOMEONE ELSE PROVIDED BY THE HEALTH PLAN
- 5. DON'T KNOW OR UNSURE

REFUSAL/NOT ASCERTAINED

CRTRAN

35y. / CRTRAN

In the last 6 months, how often did this interpreter treat you with courtesy and respect? Would you say..

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

RATEINT

35z. / RATEINT

Using any number from 0 to 10, where 0 is the worst interpreter possible and 10 is the best interpreter possible, what number would you use to rate this interpreter?

00	01	02	03	04	05	06	07	08	09	10
WORST										BEST
INTERPRETER										INTERPRETER
POSSIBLE										POSSIBLE

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

INTRFRD

35aa. / INTRFRD

In the last 6 months, how often did you use a friend or family member as an interpreter when you talked with someone from your health plan? Would you say...

(READ LIST)

1. NEVER, -----> HLTSTA4
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

FRDPREF

35ab. / FRDPREF

In the last 6 months, did you use friends or family members as interpreters because that was what you preferred? Would you say...

(READ LIST)

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

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, 2013?

- 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 that 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

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

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

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

QRACE3.OTH / QRACE3.OTH
(What is your race?)

ALL.DONE
THANKS.SCREEN.

Those are all the questions I have.

Thank you for taking part in this important interview.

Have a nice (day/evening). Good bye.

RETURN TO COVERSHEET

EDIT.FLG
(IWER: DO YOU NEED TO TYPE AN EDIT?)

1. YES
2. NO

IF EDIT.FLG = 2 THEN GO TO CK.END.EDIT

EDIT.OTH
EDIT.OTH. (IWER: PLEASE TYPE YOUR EDIT-BE SPECIFIC-INCLUDE:

- 1) QUESTION NUMBER(S)
 - 2) WHAT WAS ENTERED
 - 3) WHAT NEEDS TO BE CHANGED
-

CK.END.EDIT
LANG.DID

LANG.DID. IWER: DID YOU DO THIS INTERVIEW IN...

1. ENGLISH,
2. SPANISH OR
3. BOTH?

END.SCREEN

COVERSHEET NOT NEEDED

I may need to contact you again later, but today we are only interviewing members of Oregon Health Plan, so those are all the questions I have. Thank you very much for your help.

(RC = [RC%])

RETURN TO COVERSHEET

TRANS.SCRN

INTERVIEWER: YOU HAVE INDICATED THAT YOU HAVE A SPANISH SPEAKER OR A HOUSEHOLD WITH A LANGUAGE PROBLEM.

1. IF THIS COVERSHEET SHOULD BE MOVED TO THE SPANISH PROJECT ENTER "1"
2. IF THIS WAS AN ERROR, TYPE "2" TO GO BACK

WHAT.LANG

INTERVIEWER: WHAT LANGUAGE DO YOU THINK THEY SPEAK IN THIS HOUSEHOLD?

DK

GOOD.BYE

INTERVIEWER: [THIS ID HAS BEEN TRANSFERRED TO THE SPANISH PROJECT/THIS ID IS NOT ELIGIBLE FOR TRANSFER TO THE SPANISH PROJECT. THIS ID WILL BE CODED AS A LANGUAGE PROBLEM]

[(RC = 80)/(RC = 63)]

DIAL.SCREEN

DS. INTERVIEWER: YOU MAY DO THE INTERVIEW WITH ONLY THE PARENT OR GUARDIAN WHO KNOWS MOST ABOUT [MEMBER NAME]'S HEALTH CARE]

PHONE NUMBER ---> (###) ### - ####

(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

1. / 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?

("DK" NOT ALLOWED)

(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

NPLNAME

2. / NPLNAME

What is the name of your child's health plan?

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS OREGON HEALTH PLAN]

(IF R SAYS SOMETHING CLOSE TO OREGON HEALTH PLAN, ENTER "2")

(IF R NOT SURE OF PLAN NAME, ENTER "2")

- 1. EXACT MATCH -----> CK.PLMSTCR
- 2. POSSIBLE MATCH -----> PLNAME
- 3. NOT A MATCH -----> PLNAME
- 4. CHILD NO LONGER INSURED -----> NO.INSUR
- 5. CHILD INSURED BY MEDICAID BUT DOESN'T ----> CK.PLMSTCR
KNOW PLAN NAME
- 6. CHILD INSURED BUT NOT BY MEDICAID -----> NO.INSUR

PLNAME

2a. / 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

3. / 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

4. / 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

5. / 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

6. / 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

7. / 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 AND QNAIRE <05 THEN GO TO PRSNLD4
IF OFCTIM4=0 OR DK/REFUSAL AND QNAIRE >05 THEN GO TO CHSCHL

PRVENT5

8. / 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 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)

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

RXWHY

11. / RXWHY

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? Would you say...

(READ LIST)

- 1. NOT AT ALL,
- 2. A LITTLE,
- 3. SOME, OR
- 4. A LOT?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXWYNT

12. / RXWYNT

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? Would you say...

(READ LIST)

- 1. NOT AT ALL,
- 2. A LITTLE,
- 3. SOME, OR
- 4. A LOT?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

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
WORST										BEST
HEALTH CARE										HEALTH CARE
POSSIBLE										POSSIBLE

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 (DO NOT READ)

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

PBDRNG

31a. /PBDRNG

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

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?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

DRLSTN4

33. / DRLSTN4

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

DRESPU4

34. / DRESPU4

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

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

CPBDRLN

35a. / CPBDRLN

In the last 6 months, how often did your child have a hard time speaking with or understanding his or her personal doctor because they spoke different languages? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

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 (DO NOT READ)

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 (DO NOT READ) --> 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
WORST										BEST
PERSONAL										PERSONAL
DOCTOR POSSIBLE										DOCTOR POSSIBLE

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, "Does a (type of specialist) count?", 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 |
| WORST | | | | | | | | | | BEST |
| SPECIALIST | | | | | | | | | | SPECIALIST |
| POSSIBLE | | | | | | | | | | POSSIBLE |

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.

CLCSR4
49. / CLCSR4

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
WORST										BEST
HEALTH PLAN										HEALTH PLAN
POSSIBLE										POSSIBLE

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHPRES

55. / CHPRES

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

- 1. YES
- 2. NO -----> HLTSTA4

DK/REFUSAL/NOT ASCERTAINED --> HLTSTA4

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

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

IF CAGE<19 THEN GO TO CGENDER

CAGE.CK

74a. / CAGE.CK

I have entered that [NAME OF CHILD] is [CAGE]. Is that correct?

("DK" NOT ALLOWED)

- 1. YES-AGE ENTERED CORRECTLY
- 2. NO-CORRECT AGE -----> CAGE

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

QRACE3.OTH / QRACE3.OTH
(What is your child's race?)

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.

RETURN TO COVERSHEET

EDIT.FLG

(IWER: DO YOU NEED TO TYPE AN EDIT?)

1. YES
2. NO

IF EDIT.FLG = 2 THEN GO TO CK.END.EDIT

EDIT.OTH

EDIT.OTH. (IWER: PLEASE TYPE YOUR EDIT-BE SPECIFIC-INCLUDE:

- 1) QUESTION NUMBER(S)
 - 2) WHAT WAS ENTERED
 - 3) WHAT NEEDS TO BE CHANGED
-

CK.END.EDIT

LANG.DID

LANG.DID. IWER: DID YOU DO THIS INTERVIEW IN...

1. ENGLISH,
2. SPANISH OR
3. BOTH?

END.SCREEN

COVERSHEET NOT NEEDED

I may need to contact you again later, but today we are only interviewing members of Oregon Health Plan, so those are all the questions I have. Thank you very much for your help.

(RC = [RC%])

RETURN TO COVERSHEET

TRANS.SCRN

INTERVIEWER: YOU HAVE INDICATED THAT YOU HAVE A SPANISH SPEAKER OR
A HOUSEHOLD WITH A LANGUAGE PROBLEM.

1. IF THIS COVERSHEET SHOULD BE MOVED TO THE SPANISH PROJECT
ENTER "1"
2. IF THIS WAS AN ERROR, TYPE "2" TO GO BACK

WHAT.LANG

INTERVIEWER: WHAT LANGUAGE DO YOU THINK THEY SPEAK IN THIS HOUSEHOLD?

DK

GOOD.BYE

INTERVIEWER: [THIS ID HAS BEEN TRANSFERRED TO THE SPANISH PROJECT/THIS ID IS
NOT ELIGIBLE FOR TRANSFER TO THE SPANISH PROJECT. THIS ID WILL BE CODED AS
A LANGUAGE PROBLEM]

[(RC = 80)/(RC = 63)]

