Yamhill Community Care
CAHPS® 5.0 Medicaid Survey

Banner Book Report

June 2017
Measurement Year 2016

3975 Research Park Drive
Ann Arbor, MI 48108

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

Sample Disposition

Response/Non-Response Comparison

Banner Tables
- Adult Tables
- Child Tables

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

 © DataStat, Inc.

METHODOLOGY

Introduction

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

Survey Milestones

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

Sampling

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

Questionnaires

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

Selection of Cases for Analysis

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

© DataStat, Inc.

Composites, Overall Ratings, and Measures for Reporting

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

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

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

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

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

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

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

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

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

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

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

© DataStat, Inc.

Comparisons, Statistical Testing, Scoring, and Weighting

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

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

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

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

© DataStat, Inc.

Sample Disposition

	Adult		Child	
Category	**Yamhill CCO**	**Overall**	**Yamhill CCO**	**Overall**
****First mailing - sent**	900	16200	900	16200
***First mailing - usable survey returned**	164	2801	103	2168
Second mailing - sent	740	13319	781	13616
***Second mailing - usable survey returned**	53	978	63	886
***Phone - usable surveys**	78	1303	138	2255
Total - usable surveys	295	5082	304	5309
†Ineligible: According to population criteria‡	20	346	10	200
†Ineligible: Deceased	2	31	0	0
†Ineligible: Mentally or physically unable to complete survey	8	195	0	0
†Ineligible: Language barrier	0	64	0	59
Incorrect address AND incorrect phone number	53	848	35	710
Refusal/Returned survey blank	34	672	42	829
Nonresponse - Unavailable by mail or phone	488	8962	509	9093
Adjusted Response Rate	**33.9%**	**32.7%**	**34.2%**	**33.3%**

*Included in response rate numerator

†Excluded from adjusted response rate denominator

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

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

© DataStat, Inc.

Response/Non-Response Comparison

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

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

1) Members who passively refused by not returning the questionnaire mailed to their household and/ or not answering questions over the phone.

2) Members who actively refused, either by contacting DataStat or by declining to participate when DataStat attempted to reach them by phone.

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

Adult

Gender / Age	Non-Respondents	Respondents	Difference
Male	209 42.4%	111 37.6%	-4.77%
Female	284 57.6%	184 62.4%	4.77%
18-24	111 22.5%	33 11.2%	-11.33%
25-34	145 29.4%	62 21.0%	-8.39%
35-44	107 21.7%	52 17.6%	-4.08%
45-54	65 13.2%	64 21.7%	8.51%
55-64	57 11.6%	74 25.1%	13.52%
65-74	4 0.8%	9 3.1%	2.24%
75 or Older	4 0.8%	1 0.3%	-0.47%

Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	272 53.1%	142 46.7%	-6.41%
Female	240 46.9%	162 53.3%	6.41%
<3	113 22.1%	46 15.1%	-6.94%
4-7	113 22.1%	78 25.7%	3.59%
8-12	156 30.5%	95 31.3%	0.78%
13 or older	130 25.4%	85 28.0%	2.57%

© DataStat, Inc.

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q1																					
YES	293	5060	29	57	48	65	70		208						12	49	226	188	89	106	173
	100%	100%	100%	100%	100%	100%	100%		100%	~	~	~	~		100%	100%	100%	100%	100%	100%	100%
NOT ANSWERED	2	22		1			1		2								1	2		1	1
VALID CASES	293	5060	29	57	48	65	70		208						12	49	226	188	89	106	173
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q3																					
YES	112	2017	7	24	21	29	23		82						5	16	88	60	45	35	72
	39%	41%	26%~	42%	45%~	45%	32%	~	39%	~	~	~	~	~	45%~	34%~	39%	32%*	51%*	33%	42%
NO	173	2921	20	33	26	35	48		126						6	31	136	126	43	70	99
	61%	59%	74%~	58%	55%~	55%	68%	~	61%	~	~	~	~	~	55%~	66%~	61%	68%*	49%*	67%	58%
NOT ANSWERED	10	144	2	1	1	1			2						1	2	3	4	1	2	3
VALID CASES	285	4938	27	57	47	64	71		208						11	47	224	186	88	105	171
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q4																					
NEVER	2	42		1		1			1						1		2	1	1	1	1
	2%	2%	~	4%~	~	4%~	~	~	1%~	~	~	~	~	~	20%~	~	2%~	2%~	2%~	3%~	1%~
SOMETIMES	17	268		6	4	3	2		13							2	13	8	7	5	11
	16%	15%	~	26%~	20%~	11%~	10%~	~	17%~	~	~	~	~	~	~	13%~	16%~	14%~	17%~	16%~	16%~
USUALLY	28	466	2	4	5	10	6		21						1	5	22	16	11	9	18
	27%	26%	29%~	17%~	25%~	36%~	29%~	~	27%~	~	~	~	~	~	20%~	33%~	27%~	28%~	26%~	28%~	26%~
ALWAYS	58	1045	5	12	11	14	13		42						3	8	46	32	23	17	39
	55%	57%	71%~	52%~	55%~	50%~	62%~	~	55%~	~	~	~	~	~	60%~	53%~	55%~	56%~	55%~	53%~	57%~
#ALWAYS + USUALLY (NET)	86	1511	7	16	16	24	19		63						4	13	68	48	34	26	57
	82%	83%	100%~	70%~	80%~	86%~	90%~	~	82%~	~	~	~	~	~	80%~	87%~	82%~	84%~	81%~	81%~	83%~
TOP BOX SCORE	58	1045	5	12	11	14	13		42						3	8	46	32	23	17	39
	55%	57%	71%~	52%~	55%~	50%~	62%~	~	55%~	~	~	~	~	~	60%~	53%~	55%~	56%~	55%~	53%~	57%~
NOT ANSWERED	7	196		1	1	1	2		5							1	5	3	3	3	3
VALID CASES	105	1821	7	23	20	28	21		77						5	15	83	57	42	32	69
NUMBER OF RESPONDENTS	112	2017	7	24	21	29	23		82						5	16	88	60	45	35	72
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q3 = YES]

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q5																					
YES	190	3365	18	38	27	47	47		137						5	38	145	117	65	66	119
	67%	68%	62%~	66%	56%~	75%	69%	~	67%	~	~	~	~	~	42%~	79%~	65%	63%	73%	63%	70%
NO	94	1561	11	20	21	16	21		69						7	10	78	68	24	39	52
	33%	32%	38%~	34%	44%~	25%	31%	~	33%	~	~	~	~	~	58%~	21%~	35%	37%	27%	37%	30%
NOT ANSWERED	11	156				2	3		4							1	4	5		2	3
VALID CASES	284	4926	29	58	48	63	68		206						12	48	223	185	89	105	171
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q6																					
NEVER	3	83		2			1		3								3	1	2	1	2
	2%	3%	~	6%~	~	~	2%~	~	2%~	~	~	~	~	~	~	~	2%~	0.9%	3%	2%	2%
SOMETIMES	37	590	7	8	6	8	5		21						1	10	24	19	15	14	21
	21%	19%	39%~	23%~	26%~	19%~	12%~	~	17%~	~	~	~	~	~	20%~	29%~	18%~	18%	25%	25%	19%
USUALLY	57	884	4	14	7	18	11		44						1	10	45	35	21	19	37
	33%	29%	22%~	40%~	30%~	42%~	26%~	~	35%~	~	~	~	~	~	20%~	29%~	34%~	33%	36%	33%	33%
ALWAYS	76	1472	7	11	10	17	25		56						3	14	60	51	21	23	51
	44%	49%	39%~	31%~	43%~	40%~	60%~	~	45%~	~	~	~	~	~	60%~	41%~	45%~	48%	36%	40%	46%
#ALWAYS + USUALLY (NET)	133	2356	11	25	17	35	36		100						4	24	105	86	42	42	88
	77%	78%	61%~	71%~	74%~	81%~	86%~	~	81%~	~	~	~	~	~	80%~	71%~	80%~	81%	71%	74%	79%
TOP BOX SCORE	76	1472	7	11	10	17	25		56						3	14	60	51	21	23	51
	44%	49%	39%~	31%~	43%~	40%~	60%~	~	45%~	~	~	~	~	~	60%~	41%~	45%~	48%	36%	40%	46%
NOT ANSWERED	17	336		3	4	4	5		13							4	13	11	6	9	8
VALID CASES	173	3029	18	35	23	43	42		124						5	34	132	106	59	57	111
NUMBER OF RESPONDENTS	190	3365	18	38	27	47	47		137						5	38	145	117	65	66	119
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q5 = YES]

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q7																					
NONE	85	1242	10	21	17	15	16		59						5	13	66	63	19	34	47
	30%	26%	34%~	37%	35%~	23%	23%	~	29%	~	~	~	~	~	42%~	27%~	29%	34%*	22%*	32%	27%
1 TIME	48	927	7	11	5	9	15		36							9	39	36	12	29	19
	17%	19%	24%~	19%	10%~	14%	22%	~	17%	~	~	~	~	~	~	18%~	17%	19%	14%	27%*	11%*
2	52	878	9	9	11	8	12		39							12	39	33	18	21	31
	18%	18%	31%~	16%	23%~	12%	17%	~	19%	~	~	~	~	~	~	24%~	17%	18%	20%	20%	18%
3	28	581	1	6	4	11	5		22						2	3	25	18	8	9	19
	10%	12%	3%~	11%	8%~	17%	7%	~	11%	~	~	~	~	~	17%~	6%~	11%	10%	9%	8%	11%
4	23	402	1	4	4	7	5		15							7	15	15	7	7	15
	8%	8%	3%~	7%	8%~	11%	7%	~	7%	~	~	~	~	~	~	14%~	7%	8%	8%	7%	9%
5 TO 9	35	571	1	4	6	9	12		27						2	4	28	16	17	5	28
	12%	12%	3%~	7%	13%~	14%	17%	~	13%	~	~	~	~	~	17%~	8%~	13%	9%*	19%*	5%*	16%*
10 OR MORE TIMES	14	248		2	1	6	4		9						3	1	12	7	7	2	12
	5%	5%	~	4%	2%~	9%	6%	~	4%	~	~	~	~	~	25%~	2%~	5%	4%	8%	2%*	7%*
NOT ANSWERED	10	233		1			2		3								3	2	1		3
VALID CASES	285	4849	29	57	48	65	69		207						12	49	224	188	88	107	171
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC— ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE
Q8																					
#YES	139	2535	10	25	21	38	38		108						5	21	114	87	48	47	90
	71%	72%	53%~	69%~	70%~	78%~	73%	~	74%	~	~	~	~	~	71%~	60%~	74%~	71%	72%	66%	74%
NO	57	984	9	11	9	11	14		37						2	14	41	36	19	24	32
	29%	28%	47%~	31%~	30%~	22%~	27%	~	26%	~	~	~	~	~	29%~	40%~	26%~	29%	28%	34%	26%
NOT ANSWERED	4	88			1	1	1		3							1	3	2	2	2	2
VALID CASES	196	3519	19	36	30	49	52		145						7	35	155	123	67	71	122
NUMBER OF RESPONDENTS	200	3607	19	36	31	50	53		148						7	36	158	125	69	73	124
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q9																					
YES	100	1857	9	14	17	29	26		80						5	11	88	54	43	34	65
	51%	53%	47%~	39%~	57%~	60%~	50%	~	56%*	~	~	~	~	~	71%~	31%~	57%~	44%*	64%*	49%	53%
NO	95	1655	10	22	13	19	26		64						2	24	66	68	24	36	57
	49%	47%	53%~	61%~	43%~	40%~	50%	~	44%*	~	~	~	~	~	29%~	69%~	43%~	56%*	36%*	51%	47%
NOT ANSWERED	5	95			1	2	1		4							1	4	3	2	3	2
VALID CASES	195	3512	19	36	30	48	52		144						7	35	154	122	67	70	122
NUMBER OF RESPONDENTS	200	3607	19	36	31	50	53		148						7	36	158	125	69	73	124
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q10																					
#YES	94	1690	9	13	15	26	26		76						5	9	84	51	40	32	61
	96%	93%	100%~	93%~	94%~	93%~	100%~	~	96%~	~	~	~	~		~100%~	90%~	97%~	96%~	95%~	94%~	97%~
NO	4	121		1	1	2			3							1	3	2	2	2	2
	4%	7%	~	7%~	6%~	7%~	~	~	4%~	~	~	~	~	~	~	10%~	3%~	4%~	5%~	6%~	3%~
NOT ANSWERED	2	46			1	1			1							1	1	1	1		2
VALID CASES	98	1811	9	14	16	28	26		79						5	10	87	53	42	34	63
NUMBER OF RESPONDENTS	100	1857	9	14	17	29	26		80						5	11	88	54	43	34	65
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q11																					
#YES	76	1346	5	10	15	21	21		63						4	6	69	45	28	27	48
	77%	74%	56%~	71%~	88%~	75%~	81%~	~	79%~	~	~	~	~	~	80%~	60%~	78%~	83%~	67%~	79%~	75%~
NO	23	462	4	4	2	7	5		17						1	4	19	9	14	7	16
	23%	26%	44%~	29%~	12%~	25%~	19%~	~	21%~	~	~	~	~	~	20%~	40%~	22%~	17%~	33%~	21%~	25%~
NOT ANSWERED	1	49				1										1			1		1
VALID CASES	99	1808	9	14	17	28	26		80						5	10	88	54	42	34	64
NUMBER OF RESPONDENTS	100	1857	9	14	17	29	26		80						5	11	88	54	43	34	65
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q12																					
#YES	82	1378	5	12	16	24	20		67						5	7	74	47	32	29	52
	83%	77%	56%~	86%~	94%~	86%~	77%~	~	84%~	~	~	~	~		~100%~	70%~	84%~	87%~	76%~	85%~	81%~
NO	17	420	4	2	1	4	6		13							3	14	7	10	5	12
	17%	23%	44%~	14%~	6%~	14%~	23%~	~	16%~	~	~	~	~	~	~	30%~	16%~	13%~	24%~	15%~	19%~
NOT ANSWERED	1	59				1										1			1		1
VALID CASES	99	1798	9	14	17	28	26		80						5	10	88	54	42	34	64
NUMBER OF RESPONDENTS	100	1857	9	14	17	29	26		80						5	11	88	54	43	34	65
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q13																					
WORST HEALTH CARE	2	19		1	1				2								2		2		2
POSSIBLE	1%	0.5%	~	3%~	3%~	~	~	~	1%	~	~	~	~	~	~	~	1%~	~	3%	~	2%
01	1	22					1		1								1		1	1	
	0.5%	0.6%	~	~	~	~	2%	~	0.7%	~	~	~	~	~	~	~	0.6%~	~	2%	1%	~
02		39																			
		1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03	5	63			2	2			2						2	1	4	2	3	3	2
	3%	2%	~	~	7%~	4%~	~	~	1%	~	~	~	~	~	29%~	3%~	3%~	2%	5%	4%	2%
04	4	95		2			2		3								4	3	1	1	3
	2%	3%	~	6%~	~	~	4%	~	2%	~	~	~	~	~	~	~	3%~	2%	2%	1%	2%
05	12	234	5	2	1	2	1		10							1	10	6	5	3	8
	6%	7%	26%~	6%~	3%~	4%~	2%	~	7%	~	~	~	~	~	~	3%~	6%~	5%	8%	4%	7%
06	10	215	1	2	1	4			7						1	2	8	6	4	3	7
	5%	6%	5%~	6%~	3%~	8%~	~	~	5%	~	~	~	~	~	14%~	6%~	5%~	5%	6%	4%	6%
07	20	442	2	4		9	5		16							3	17	13	7	9	11
	10%	13%	11%~	11%~	~	19%~	10%	~	11%	~	~	~	~	~	~	9%~	11%~	11%	11%	13%	9%
08	41	779	1	7	10	9	11		31						2	5	33	32	7	15	25
	21%	22%	5%~	19%~	33%~	19%~	21%	~	22%	~	~	~	~	~	29%~	14%~	21%~	26%*	11%*	22%	20%
09	37	592	5	9	6	7	10		24						2	10	27	22	14	13	24
	19%	17%	26%~	25%~	20%~	15%~	19%	~	17%	~	~	~	~	~	29%~	29%~	18%~	18%	21%	19%	20%
BEST HEALTH CARE	63	1011	5	9	9	15	22		48							13	48	39	22	21	41
POSSIBLE	32%	29%	26%~	25%~	30%~	31%~	42%	~	33%	~	~	~	~	~	~	37%~	31%~	32%	33%	30%	33%
#8-10 (NET)	141	2382	11	25	25	31	43		103						4	28	108	93	43	49	90
	72%	68%	58%~	69%~	83%~	65%~	83%*	~	72%	~	~	~	~	~	57%~	80%~	70%~	76%	65%	71%	73%

Continued

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC— ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE
9-10 (NET)	100	1603	10	18	15	22	32		72						2	23	75	61	36	34	65
	51%	46%	53%~	50%~	50%~	46%~	62%	~	50%	~	~	~	~	~	29%~	66%~	49%~	50%	55%	49%	53%
NOT ANSWERED	5	96			1	2	1		4							1	4	2	3	4	1
VALID CASES	195	3511	19	36	30	48	52		144						7	35	154	123	66	69	123
NUMBER OF RESPONDENTS	200	3607	19	36	31	50	53		148						7	36	158	125	69	73	124
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%
MEAN	8.12	7.94	7.79	7.92	8.03	8.08	8.60		8.10						6.57	8.60	8.01	8.28	7.79	8.07	8.15
p stat_(*=Sig @ p<=.05)		.225	~	~	~	~	.039*	~	.875	~	~	~	~	~	~	~	~	.182	.160	.820	.746

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q14																					
NEVER	5	90		2		1	2		3						1		5	3	2	3	2
	3%	3%	~	6%~	~	2%~	4%	~	2%	~	~	~	~	~	14%~	~	3%~	2%	3%	4%	2%
SOMETIMES	32	539	4	7	6	7	6		22						2	5	25	14	16	9	22
	17%	15%	21%~	20%~	21%~	15%~	12%	~	15%	~	~	~	~	~	29%~	15%~	16%~	12%*	24%	13%	18%
USUALLY	66	1150	6	13	11	23	10		47						2	15	50	43	22	24	41
	34%	33%	32%~	37%~	38%~	48%~	19%*	~	33%	~	~	~	~	~	29%~	44%~	33%~	36%	33%	35%	34%
ALWAYS	90	1722	9	13	12	17	34		71						2	14	73	61	26	33	56
	47%	49%	47%~	37%~	41%~	35%~	65%*	~	50%	~	~	~	~	~	29%~	41%~	48%~	50%	39%	48%	46%
#ALWAYS + USUALLY (NET)	156	2872	15	26	23	40	44		118						4	29	123	104	48	57	97
	81%	82%	79%~	74%~	79%~	83%~	85%	~	83%	~	~	~	~	~	57%~	85%~	80%~	86%*	73%	83%	80%
TOP BOX SCORE	90	1722	9	13	12	17	34		71						2	14	73	61	26	33	56
	47%	49%	47%~	37%~	41%~	35%~	65%*	~	50%	~	~	~	~	~	29%~	41%~	48%~	50%	39%	48%	46%
NOT ANSWERED	7	106		1	2	2	1		5							2	5	4	3	4	3
VALID CASES	193	3501	19	35	29	48	52		143						7	34	153	121	66	69	121
NUMBER OF RESPONDENTS	200	3607	19	36	31	50	53		148						7	36	158	125	69	73	124
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC— ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE
Q15																					
YES	222	3993	20	39	35	50	64		167						8	34	179	146	68	80	137
	77%	82%	69%~	67%	73%~	77%	90%*	~	80%	~	~	~	~	~	67%~	69%~	79%	77%	76%	75%	79%
NO	65	904	9	19	13	15	7		43						4	15	48	44	21	27	37
	23%	18%	31%~	33%	27%~	23%	10%*	~	20%	~	~	~	~	~	33%~	31%~	21%	23%	24%	25%	21%
NOT ANSWERED	8	185																			
VALID CASES	287	4897	29	58	48	65	71		210						12	49	227	190	89	107	174
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q16																					
NONE	39	792	2	9	9	5	13		27						5	5	32	30	8	16	22
	19%	21%	10%~	24%~	26%~	11%~	22%	~	17%	~	~	~	~	~	63%~	16%~	19%~	22%	12%	21%	17%
1 TIME	47	995	6	5	7	10	18		40							4	42	34	13	24	23
	22%	27%	30%~	14%~	20%~	22%~	31%	~	25%	~	~	~	~	~	~	13%~	25%~	25%	20%	32%*	18%*
2	52	792	8	9	10	9	11		41							8	42	31	19	22	29
	25%	21%	40%~	24%~	29%~	20%~	19%	~	26%	~	~	~	~	~	~	25%~	25%~	23%	29%	29%	22%
3	31	483	1	9	4	8	7		24						2	5	26	21	8	7	24
	15%	13%	5%~	24%~	11%~	18%~	12%	~	15%	~	~	~	~	~	25%~	16%~	15%~	15%	12%	9%	19%*
4	14	279	2	3	2	3	1		7							5	7	8	4	4	8
	7%	7%	10%~	8%~	6%~	7%~	2%*	~	4%	~	~	~	~	~	~	16%~	4%~	6%	6%	5%	6%
5 TO 9	18	312	1	2	2	6	6		14						1	3	15	11	7	2	16
	9%	8%	5%~	5%~	6%~	13%~	10%	~	9%	~	~	~	~	~	13%~	9%~	9%~	8%	11%	3%*	12%*
10 OR MORE TIMES	8	88			1	4	3		5							2	5	2	6	1	7
	4%	2%	~	~	3%~	9%~	5%	~	3%	~	~	~	~	~	~	6%~	3%~	1%*	9%*	1%	5%
NOT ANSWERED	13	252		2		5	5		9							2	10	9	3	4	8
VALID CASES	209	3741	20	37	35	45	59		158						8	32	169	137	65	76	129
NUMBER OF RESPONDENTS	222	3993	20	39	35	50	64		167						8	34	179	146	68	80	137
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q15 = YES]

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q17																					
NEVER	4	51		1	1		1		4								4	1	3	2	2
	2%	2%	~	4%~	4%~	~	2%~	~	3%~	~	~	~	~	~	~	~	3%~	1%	5%	3%	2%
SOMETIMES	8	190	1		3	2	2		6								7	4	3	2	6
	5%	6%	6%~	~	12%~	5%~	4%~	~	5%~	~	~	~	~	~	~	~	5%~	4%	5%	3%	6%
USUALLY	31	579	2	6	3	10	5		20							8	21	15	14	9	20
	18%	20%	11%~	21%~	12%~	26%~	11%~	~	15%~	~	~	~	~	~	~	31%~	15%~	14%	25%	15%	19%
ALWAYS	125	2109	15	21	18	27	38		100						3	18	104	85	37	47	77
	74%	72%	83%~	75%~	72%~	69%~	83%~	~	77%~	~	~	~	~		~100%~	69%~	76%~	81%*	65%	78%	73%
#ALWAYS + USUALLY (NET)	156	2688	17	27	21	37	43		120						3	26	125	100	51	56	97
	93%	92%	94%~	96%~	84%~	95%~	93%~	~	92%~	~	~	~	~		~100%~	100%~	92%~	95%	89%	93%	92%
TOP BOX SCORE	125	2109	15	21	18	27	38		100						3	18	104	85	37	47	77
	74%	72%	83%~	75%~	72%~	69%~	83%~	~	77%~	~	~	~	~		~100%~	69%~	76%~	81%*	65%	78%	73%
NOT ANSWERED	2	20			1	1			1							1	1	2			2
VALID CASES	168	2929	18	28	25	39	46		130						3	26	136	105	57	60	105
NUMBER OF RESPONDENTS	170	2949	18	28	26	40	46		131						3	27	137	107	57	60	107
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q18																					
NEVER	4	63	1	1			1		3								4	2	2	1	3
	2%	2%	6%~	4%~	~	~	2%~	~	2%~	~	~	~	~	~	~	~	3%~	2%	4%	2%	3%
SOMETIMES	8	222			3	2	3		7								8	2	6	2	6
	5%	8%	~	~	12%~	5%~	7%~	~	5%~	~	~	~	~	~	~	~	6%~	2%	11%*	3%	6%
USUALLY	33	572	2	9	5	9	4		22						1	7	24	23	8	11	21
	19%	20%	11%~	32%~	19%~	23%~	9%~	~	17%~	~	~	~	~	~	33%~	26%~	18%~	21%	14%	18%	20%
ALWAYS	125	2066	15	18	18	29	38		99						2	20	101	80	41	46	77
	74%	71%	83%~	64%~	69%~	73%~	83%~	~	76%~	~	~	~	~	~	67%~	74%~	74%~	75%	72%	77%	72%
#ALWAYS + USUALLY (NET)	158	2638	17	27	23	38	42		121						3	27	125	103	49	57	98
	93%	90%	94%~	96%~	88%~	95%~	91%~	~	92%~	~	~	~	~	~	~100%~	100%~	91%~	96%	86%*	95%	92%
TOP BOX SCORE	125	2066	15	18	18	29	38		99						2	20	101	80	41	46	77
	74%	71%	83%~	64%~	69%~	73%~	83%~	~	76%~	~	~	~	~	~	67%~	74%~	74%~	75%	72%	77%	72%
NOT ANSWERED		26																			
VALID CASES	170	2923	18	28	26	40	46		131						3	27	137	107	57	60	107
NUMBER OF RESPONDENTS	170	2949	18	28	26	40	46		131						3	27	137	107	57	60	107
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q19																					
NEVER	3	55	1				1		3								3	2	1	1	2
	2%	2%	6%~	~	~	~	2%~	~	2%~	~	~	~	~	~	~	~	2%~	2%	2%	2%	2%
SOMETIMES	12	211		2	4	3	3		9								11	3	8	3	9
	7%	7%	~	7%~	15%~	8%~	7%~	~	7%~	~	~	~	~	~	~	~	8%~	3%*	14%*	5%	8%
USUALLY	22	437	2	5	2	9	1		15							5	16	14	7	9	12
	13%	15%	11%~	18%~	8%~	23%~	2%~	~	11%~	~	~	~	~	~	~	19%~	12%~	13%	12%	15%	11%
ALWAYS	133	2221	15	21	20	28	41		104						3	22	107	88	41	47	84
	78%	76%	83%~	75%~	77%~	70%~	89%~	~	79%~	~	~	~	~		~100%~	81%~	78%~	82%	72%	78%	79%
#ALWAYS + USUALLY (NET)	155	2658	17	26	22	37	42		119						3	27	123	102	48	56	96
	91%	91%	94%~	93%~	85%~	93%~	91%~	~	91%~	~	~	~	~		~100%~	100%~	90%~	95%*	84%*	93%	90%
TOP BOX SCORE	133	2221	15	21	20	28	41		104						3	22	107	88	41	47	84
	78%	76%	83%~	75%~	77%~	70%~	89%~	~	79%~	~	~	~	~		~100%~	81%~	78%~	82%	72%	78%	79%
NOT ANSWERED		25																			
VALID CASES	170	2924	18	28	26	40	46		131						3	27	137	107	57	60	107
NUMBER OF RESPONDENTS	170	2949	18	28	26	40	46		131						3	27	137	107	57	60	107
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q20																					
NEVER	5	87		1	1		2		5								5	1	4	1	4
	3%	3%	~	4%~	4%~	~	4%~	~	4%~	~	~	~	~	~	~	~	4%~	0.9%	7%	2%	4%
SOMETIMES	16	259	1	6	2	3	2		10						1	2	12	9	5	7	8
	9%	9%	6%~	21%~	8%~	8%~	4%~	~	8%~	~	~	~	~	~	33%~	7%~	9%~	8%	9%	12%	7%
USUALLY	47	721	5	9	8	13	8		30						1	12	32	30	14	13	32
	28%	25%	28%~	32%~	31%~	33%~	17%~	~	23%~	~	~	~	~	~	33%~	44%~	23%~	28%	25%	22%	30%
ALWAYS	102	1860	12	12	15	24	34		86						1	13	88	67	34	39	63
	60%	64%	67%~	43%~	58%~	60%~	74%~	~	66%~	~	~	~	~	~	33%~	48%~	64%~	63%	60%	65%	59%
#ALWAYS + USUALLY (NET)	149	2581	17	21	23	37	42		116						2	25	120	97	48	52	95
	88%	88%	94%~	75%~	88%~	93%~	91%~	~	89%~	~	~	~	~	~	67%~	93%~	88%~	91%	84%	87%	89%
TOP BOX SCORE	102	1860	12	12	15	24	34		86						1	13	88	67	34	39	63
	60%	64%	67%~	43%~	58%~	60%~	74%~	~	66%~	~	~	~	~	~	33%~	48%~	64%~	63%	60%	65%	59%
NOT ANSWERED		22																			
VALID CASES	170	2927	18	28	26	40	46		131						3	27	137	107	57	60	107
NUMBER OF RESPONDENTS	170	2949	18	28	26	40	46		131						3	27	137	107	57	60	107
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q21																					
YES	101	1800	9	13	11	27	33		79						1	15	83	57	40	25	74
	60%	62%	50%~	46%~	46%~	68%~	72%~	~	61%~	~	~	~	~	~	33%~	56%~	61%~	54%*	71%*	43%*	69%*
NO	67	1107	9	15	13	13	13		50						2	12	52	49	16	33	33
	40%	38%	50%~	54%~	54%~	33%~	28%~	~	39%~	~	~	~	~	~	67%~	44%~	39%~	46%*	29%*	57%*	31%*
NOT ANSWERED	2	42			2				2								2	1	1	2	
VALID CASES	168	2907	18	28	24	40	46		129						3	27	135	106	56	58	107
NUMBER OF RESPONDENTS	170	2949	18	28	26	40	46		131						3	27	137	107	57	60	107
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q22																					
NEVER	6	108		1	1	3	1		3							3	3	2	4	3	3
	6%	6%	~	8%~	10%~	11%~	3%~	~	4%~	~	~	~	~	~	~	21%~	4%~	4%~	11%~	13%~	4%~
SOMETIMES	17	264	3	4	4	2	2		14							1	16	10	7	5	12
	18%	15%	33%~	31%~	40%~	7%~	6%~	~	18%~	~	~	~	~	~	~	7%~	20%~	18%~	18%~	21%~	17%~
USUALLY	31	517	2	6	2	11	10		27							3	27	16	14	6	25
	32%	30%	22%~	46%~	20%~	41%~	31%~	~	35%~	~	~	~	~	~	~	21%~	33%~	29%~	37%~	25%~	35%~
ALWAYS	43	861	4	2	3	11	19		33						1	7	35	28	13	10	32
	44%	49%	44%~	15%~	30%~	41%~	59%~	~	43%~	~	~	~	~	~	~100%~	50%~	43%~	50%~	34%~	42%~	44%~
#ALWAYS + USUALLY (NET)	74	1378	6	8	5	22	29		60						1	10	62	44	27	16	57
	76%	79%	67%~	62%~	50%~	81%~	91%~	~	78%~	~	~	~	~	~	~100%~	71%~	77%~	79%~	71%~	67%~	79%~
TOP BOX SCORE	43	861	4	2	3	11	19		33						1	7	35	28	13	10	32
	44%	49%	44%~	15%~	30%~	41%~	59%~	~	43%~	~	~	~	~	~	~100%~	50%~	43%~	50%~	34%~	42%~	44%~
NOT ANSWERED	4	50			1		1		2							1	2	1	2	1	2
VALID CASES	97	1750	9	13	10	27	32		77						1	14	81	56	38	24	72
NUMBER OF RESPONDENTS	101	1800	9	13	11	27	33		79						1	15	83	57	40	25	74
	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?

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q23																					
WORST PERSONAL DOCTOR	2	23		1	1				2								2		2		2
POSSIBLE	1%	0.6%	~	3%~	3%~	~	~	~	1%~	~	~	~	~	~	~	~	1%~	~	3%	~	2%
01	2	32		1					2								2	1	1		2
	1%	0.9%	~	3%~	~	~	~	~	1%~	~	~	~	~	~	~	~	1%~	0.7%	2%	~	2%
02	2	39	1				1		2								2	1	1	1	1
	1%	1%	5%~	~	~	~	2%	~	1%~	~	~	~	~	~	~	~	1%~	0.7%	2%	1%	0.8%
03	1	60					1		1								1	1		1	
	0.5%	2%*	~	~	~	~	2%	~	0.6%~	~	~	~	~	~	~	~	0.6%~	0.7%	~	1%	~
04	1	72				1			1								1		1		1
	0.5%	2%*	~	~	~	2%~	~	~	0.6%~	~	~	~	~	~	~	~	0.6%~	~	2%	~	0.8%
05	8	188	1	1	2	1	3		5							1	7	7	1	2	6
	4%	5%	5%~	3%~	6%~	2%~	5%	~	3%~	~	~	~	~	~	~	3%~	4%~	5%	2%	3%	5%
06	11	158		3	1	1	4		8						2	1	10	8	3	6	5
	5%	4%	~	8%~	3%~	2%~	7%	~	5%~	~	~	~	~	~	25%~	3%~	6%~	6%	5%	8%	4%
07	14	327	4	4	2	2	2		11						1	2	12	11	3	10	4
	7%	9%	20%~	11%~	6%~	4%~	3%	~	7%~	~	~	~	~	~	13%~	6%~	7%~	8%	5%	14%*	3%*
08	26	632	3	7	2	5	7		19							5	19	16	9	7	18
	13%	17%	15%~	19%~	6%~	11%~	12%	~	12%~	~	~	~	~	~	~	16%~	11%~	12%	14%	10%	14%
09	47	691	5	7	9	14	11		39						1	6	41	38	8	16	31
	23%	19%	25%~	19%~	28%~	31%~	18%	~	25%~	~	~	~	~	~	13%~	19%~	25%~	28%*	13%*	22%	24%
BEST PERSONAL DOCTOR	91	1506	6	12	15	21	31		67						4	17	70	53	35	30	59
POSSIBLE	44%	40%	30%~	33%~	47%~	47%~	52%	~	43%~	~	~	~	~	~	50%~	53%~	42%~	39%*	55%*	41%	46%
#8-10 (NET)	164	2829	14	26	26	40	49		125						5	28	130	107	52	53	108
	80%	76%	70%~	72%~	81%~	89%~	82%	~	80%~	~	~	~	~	~	63%~	88%~	78%~	79%	81%	73%	84%

Continued

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
9-10 (NET)	138	2197	11	19	24	35	42		106						5	23	111	91	43	46	90
	67%	59%*	55%~	53%~	75%~	78%~	70%	~	68%~	~	~	~	~	~	63%~	72%~	66%~	67%	67%	63%	70%
NOT ANSWERED	17	265		3	3	5	4		10							2	12	10	4	7	8
VALID CASES	205	3728	20	36	32	45	60		157						8	32	167	136	64	73	129
NUMBER OF RESPONDENTS	222	3993	20	39	35	50	64		167						8	34	179	146	68	80	137
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%
MEAN	8.58	8.34	8.20	8.08	8.66	9.00	8.72		8.51						8.50	9.03	8.46	8.57	8.52	8.51	8.60
p stat_(*=Sig @ p<=.05)		.094	~	~	~	~	.503	~	~	~	~	~	~	~	~	~	~	.985	.773	.715	.835

[ASKED IF Q15 = YES]

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q24																					
YES	117	1933	7	19	10	34	41		89						7	17	98	66	48	32	84
	42%	40%	24%~	33%	22%~	52%	58%*	~	43%	~	~	~	~	~	58%~	35%~	44%	35%*	56%*	30%*	49%*
NO	163	2928	22	38	35	31	30		117						5	31	125	122	38	74	86
	58%	60%	76%~	67%	78%~	48%	42%*	~	57%	~	~	~	~	~	42%~	65%~	56%	65%*	44%*	70%*	51%*
NOT ANSWERED	15	221		1	3				4							1	4	2	3	1	4
VALID CASES	280	4861	29	57	45	65	71		206						12	48	223	188	86	106	170
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q25																					
NEVER	9	110	1	1		5	2		8						1		9	6	3	3	6
	8%	6%	14%~	6%~		~ 15%~	5%~	~	9%~	~	~	~	~	~	14%~	~	9%~	9%	6%~	10%~	7%~
SOMETIMES	17	323	3	3	3	3	3		11						1	3	13	5	10	2	14
	15%	17%	43%~	17%~	30%~	9%~	8%~	~	13%~	~	~	~	~	~	14%~	18%~	14%~	8%*	21%~	6%~	17%~
USUALLY	34	543	1	4	2	13	11		21						2	10	24	18	15	7	27
	30%	29%	14%~	22%~	20%~	39%~	28%~	~	24%~	~	~	~	~	~	29%~	59%~	25%~	28%	32%~	23%~	33%~
ALWAYS	54	893	2	10	5	12	24		46						3	4	49	35	19	19	35
	47%	48%	29%~	56%~	50%~	36%~	60%~	~	53%~	~	~	~	~	~	43%~	24%~	52%~	55%	40%~	61%~	43%~
#ALWAYS + USUALLY (NET)	88	1436	3	14	7	25	35		67						5	14	73	53	34	26	62
	77%	77%	43%~	78%~	70%~	76%~	88%~	~	78%~	~	~	~	~	~	71%~	82%~	77%~	83%	72%~	84%~	76%~
TOP BOX SCORE	54	893	2	10	5	12	24		46						3	4	49	35	19	19	35
	47%	48%	29%~	56%~	50%~	36%~	60%~	~	53%~	~	~	~	~	~	43%~	24%~	52%~	55%	40%~	61%~	43%~
NOT ANSWERED	3	64		1		1	1		3								3	2	1	1	2
VALID CASES	114	1869	7	18	10	33	40		86						7	17	95	64	47	31	82
NUMBER OF RESPONDENTS	117	1933	7	19	10	34	41		89						7	17	98	66	48	32	84
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q26																					
NONE	3	77		1		2			2						1		3	2	1	1	2
	3%	4%	~	5%~	~	6%~	~	~	2%~	~	~	~	~	~	14%~	~	3%~	3%	2%~	3%~	2%~
1 SPECIALIST	67	991	4	14	7	16	25		54						1	10	56	45	20	21	46
	58%	53%	57%~	74%~	70%~	48%~	63%~	~	62%~	~	~	~	~	~	14%~	59%~	58%~	69%*	43%~	68%~	55%~
2	32	498	3	3	1	12	11		23						3	4	27	14	17	9	22
	28%	27%	43%~	16%~	10%~	36%~	28%~	~	26%~	~	~	~	~	~	43%~	24%~	28%~	22%	36%~	29%~	27%~
3	10	191		1	1	2	4		6						1	3	7	2	8		10
	9%	10%	~	5%~	10%~	6%~	10%~	~	7%~	~	~	~	~	~	14%~	18%~	7%~	3%*	17%~	~	12%~
4	2	64			1	1			1						1		2	2			2
	2%	3%	~	~	10%~	3%~	~	~	1%~	~	~	~	~	~	14%~	~	2%~	3%~	~	~	2%~
5 OR MORE SPECIALISTS	1	45							1								1		1		1
	0.9%	2%	~	~	~	~	~	~	1%~	~	~	~	~	~	~	~	1%~	~	2%~	~	1%~
NOT ANSWERED	2	67				1	1		2								2	1	1	1	1
VALID CASES	115	1866	7	19	10	33	40		87						7	17	96	65	47	31	83
NUMBER OF RESPONDENTS	117	1933	7	19	10	34	41		89						7	17	98	66	48	32	84
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q27 WORST SPECIALIST POSSIBLE		13																			
		0.7%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01		14																			
		0.8%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02	1	12				1			1								1		1		1
	0.9%	0.7%	~	~	~	3%~	~	~	1%~	~	~	~	~	~	~	~	1%~	~	2%~	~	1%~
03	3	27			1	1	1		3								3		3	1	2
	3%	2%	~	~	10%~	3%~	3%~	~	4%~	~	~	~	~	~	~	~	3%~	~	7%~	3%~	2%~
04	4	22		1		2	1		1							2	2	2	2	2	2
	4%	1%	~	6%~	~	6%~	3%~	~	1%~	~	~	~	~	~	~	12%~	2%~	3%~	4%~	7%~	2%~
05	4	83		1	1	1	1		3							1	3	3	1	1	3
	4%	5%	~	6%~	10%~	3%~	3%~	~	4%~	~	~	~	~	~	~	6%~	3%~	5%~	2%~	3%~	4%~
06	2	68				1	1		2								2	1	1	2	
	2%	4%	~	~	~	3%~	3%~	~	2%~	~	~	~	~	~	~	~	2%~	2%~	2%~	7%~	~
07	15	157	3	2		2	7		12						1	1	14	11	4	4	11
	13%	9%	43%~	11%~	~	6%~	18%~	~	14%~	~	~	~	~	~	17%~	6%~	15%~	17%~	9%~	13%~	14%~
08	18	318	2	4	1	4	6		15							2	15	10	7	4	13
	16%	18%	29%~	22%~	10%~	13%~	15%~	~	18%~	~	~	~	~	~	~	12%~	16%~	16%~	15%~	13%~	16%~
09	16	315	1	3	2	4	6		14						1	1	15	10	5	4	12
	14%	18%	14%~	17%~	20%~	13%~	15%~	~	16%~	~	~	~	~	~	17%~	6%~	16%~	16%~	11%~	13%~	15%~
BEST SPECIALIST POSSIBLE	49	742	1	7	5	15	17		34						4	10	38	26	22	12	37
	44%	42%	14%~	39%~	50%~	48%~	43%~	~	40%~	~	~	~	~	~	67%~	59%~	41%~	41%~	48%~	40%~	46%~
#8-10 (NET)	83	1375	4	14	8	23	29		63						5	13	68	46	34	20	62
	74%	78%	57%~	78%~	80%~	74%~	73%~	~	74%~	~	~	~	~	~	83%~	76%~	73%~	73%~	74%~	67%~	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?

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC— ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE
9-10 (NET)	65	1057	2	10	7	19	23		48						5	11	53	36	27	16	49
	58%	60%	29%~	56%~	70%~	61%~	58%~	~	56%~	~	~	~	~	~	83%~	65%~	57%~	57%~	59%~	53%~	60%~
NOT ANSWERED		18																			
VALID CASES	112	1771	7	18	10	31	40		85						6	17	93	63	46	30	81
NUMBER OF RESPONDENTS	112	1789	7	18	10	31	40		85						6	17	93	63	46	30	81
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%
MEAN	8.41	8.43	8.00	8.44	8.40	8.26	8.48		8.38						9.33	8.53	8.38	8.51	8.24	8.13	8.52
p stat_(*=Sig @ p<=.05)		.920	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC— ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE
Q28																					
YES	55	886	7	16	11	12	8		42						5	7	47	40	14	16	39
	20%	18%	25%~	28%	24%~	18%	11%*	~	20%	~	~	~	~	~	42%~	15%~	21%	21%	16%	15%	23%
NO	224	3943	21	42	34	53	63		165						7	41	177	148	73	89	133
	80%	82%	75%~	72%	76%~	82%	89%*	~	80%	~	~	~	~	~	58%~	85%~	79%	79%	84%	85%	77%
NOT ANSWERED	16	253	1		3				3							1	3	2	2	2	2
VALID CASES	279	4829	28	58	45	65	71		207						12	48	224	188	87	105	172
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q29																					
NEVER	6	78			2	4			4						2		6	4	2	2	4
	11%	9%	~	~	18%~	36%~	~	~	10%~	~	~	~	~	~	40%~	~	13%~	10%~	15%~	13%~	10%~
SOMETIMES	14	290	2	6	2	2	1		10							4	9	12	2	3	11
	26%	33%	29%~	38%~	18%~	18%~	13%~	~	24%~	~	~	~	~	~	~	57%~	20%~	30%~	15%~	20%~	28%~
USUALLY	25	294	4	9	5	4	3		19						3	3	22	16	8	7	18
	46%	34%	57%~	56%~	45%~	36%~	38%~	~	46%~	~	~	~	~	~	60%~	43%~	48%~	40%~	62%~	47%~	46%~
ALWAYS	9	204	1	1	2	1	4		8								9	8	1	3	6
	17%	24%	14%~	6%~	18%~	9%~	50%~	~	20%~	~	~	~	~	~	~	~	20%~	20%~	8%~	20%~	15%~
#ALWAYS + USUALLY (NET)	34	498	5	10	7	5	7		27						3	3	31	24	9	10	24
	63%	58%	71%~	63%~	64%~	45%~	88%~	~	66%~	~	~	~	~	~	60%~	43%~	67%~	60%~	69%~	67%~	62%~
TOP BOX SCORE	9	204	1	1	2	1	4		8								9	8	1	3	6
	17%	24%	14%~	6%~	18%~	9%~	50%~	~	20%~	~	~	~	~	~	~	~	20%~	20%~	8%~	20%~	15%~
NOT ANSWERED	1	20				1			1								1		1	1	
VALID CASES	54	866	7	16	11	11	8		41						5	7	46	40	13	15	39
NUMBER OF RESPONDENTS	55	886	7	16	11	12	8		42						5	7	47	40	14	16	39
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q30																					
YES	67	1269	7	17	8	16	18		50						5	11	56	47	20	22	45
	24%	26%	24%~	29%	18%~	25%	25%	~	24%	~	~	~	~	~	42%~	23%~	25%	25%	24%	21%	27%
NO	209	3524	22	41	36	47	53		155						7	36	166	140	65	85	122
	76%	74%	76%~	71%	82%~	75%	75%	~	76%	~	~	~	~	~	58%~	77%~	75%	75%	76%	79%	73%
NOT ANSWERED	19	289			4	2			5							2	5	3	4		7
VALID CASES	276	4793	29	58	44	63	71		205						12	47	222	187	85	107	167
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q31																					
NEVER	3	39		1		1			3								3	2	1	1	2
	5%	3%	~	6%~	~	6%~	~	~	6%~	~	~	~	~	~	~	~	5%~	4%~	5%~	5%~	5%~
SOMETIMES	9	212	2	3		1	3		5						1	3	6	3	6	3	6
	14%	17%	29%~	18%~	~	6%~	17%~	~	10%~	~	~	~	~	~	20%~	30%~	11%~	7%~	30%~	14%~	14%~
USUALLY	17	361	2	4	3	4	4		11						1	5	12	11	6	5	12
	26%	29%	29%~	24%~	43%~	25%~	22%~	~	22%~	~	~	~	~	~	20%~	50%~	21%~	24%~	30%~	23%~	27%~
ALWAYS	37	619	3	9	4	10	11		31						3	2	35	30	7	13	24
	56%	50%	43%~	53%~	57%~	63%~	61%~	~	62%~	~	~	~	~	~	60%~	20%~	63%~	65%~	35%~	59%~	55%~
#ALWAYS + USUALLY (NET)	54	980	5	13	7	14	15		42						4	7	47	41	13	18	36
	82%	80%	71%~	76%~	100%~	88%~	83%~	~	84%~	~	~	~	~	~	80%~	70%~	84%~	89%~	65%~	82%~	82%~
TOP BOX SCORE	37	619	3	9	4	10	11		31						3	2	35	30	7	13	24
	56%	50%	43%~	53%~	57%~	63%~	61%~	~	62%~	~	~	~	~	~	60%~	20%~	63%~	65%~	35%~	59%~	55%~
NOT ANSWERED	1	38			1											1		1			1
VALID CASES	66	1231	7	17	7	16	18		50						5	10	56	46	20	22	44
NUMBER OF RESPONDENTS	67	1269	7	17	8	16	18		50						5	11	56	47	20	22	45
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q32																					
NEVER	1	16							1								1		1	1	
	2%	1%	~	~	~	~	~	~	2%~	~	~	~	~	~	~	~	2%~	~	5%~	5%~	~
SOMETIMES	2	61		1			1		2								2	1	1		2
	3%	5%	~	6%~	~	~	6%~	~	4%~	~	~	~	~	~	~	~	4%~	2%~	5%~	~	5%~
USUALLY	14	224	3	4		3	4		8							6	8	9	5	2	12
	22%	18%	43%~	24%~	~	19%~	24%~	~	16%~	~	~	~	~	~	~	60%~	15%~	20%~	26%~	9%~	28%~
ALWAYS	48	929	4	12	7	13	12		38						5	4	44	36	12	19	29
	74%	76%	57%~	71%~	100%~	81%~	71%~	~	78%~	~	~	~	~		~100%~	40%~	80%~	78%~	63%~	86%~	67%~
#ALWAYS + USUALLY (NET)	62	1153	7	16	7	16	16		46						5	10	52	45	17	21	41
	95%	94%	100%~	94%~	100%~	100%~	94%~	~	94%~	~	~	~	~		~100%~	100%~	95%~	98%~	89%~	95%~	95%~
TOP BOX SCORE	48	929	4	12	7	13	12		38						5	4	44	36	12	19	29
	74%	76%	57%~	71%~	100%~	81%~	71%~	~	78%~	~	~	~	~		~100%~	40%~	80%~	78%~	63%~	86%~	67%~
NOT ANSWERED	2	39			1		1		1							1	1	1	1		2
VALID CASES	65	1230	7	17	7	16	17		49						5	10	55	46	19	22	43
NUMBER OF RESPONDENTS	67	1269	7	17	8	16	18		50						5	11	56	47	20	22	45
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q33																					
YES	110	1787	17	22	17	25	27		75						10	22	87	74	34	34	76
	40%	37%	59%~	39%	37%~	38%	39%	~	36%*	~	~	~	~	~	83%~	47%~	39%	40%	39%	32%*	45%*
NO	167	2987	12	35	29	40	42		132						2	25	138	113	53	72	94
	60%	63%	41%~	61%	63%~	62%	61%	~	64%*	~	~	~	~	~	17%~	53%~	61%	60%	61%	68%*	55%*
NOT ANSWERED	18	308		1	2		2		3							2	2	3	2	1	4
VALID CASES	277	4774	29	57	46	65	69		207						12	47	225	187	87	106	170
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
PQ34																					
NEVER		91																			
		2%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	22	301	7	4	3	6	1		8						2	10	11	14	7	7	15
	8%	6%	24%~	7%	7%~	9%	1%*	~	4%*	~	~	~	~	~	17%~	22%~	5%*	8%	8%	7%	9%
USUALLY	36	677	4	7	8	6	11		29						3	4	32	25	10	8	28
	13%	14%	14%~	13%	18%~	9%	16%	~	14%	~	~	~	~	~	25%~	9%~	14%	14%	12%	8%*	17%*
ALWAYS	215	3637	18	45	33	53	56		167						7	32	179	145	69	90	124
	79%	77%	62%~	80%	75%~	82%	82%	~	82%*	~	~	~	~	~	58%~	70%~	81%	79%	80%	86%*	74%*
#ALWAYS + USUALLY (NET)	251	4314	22	52	41	59	67		196						10	36	211	170	79	98	152
	92%	92%	76%~	93%	93%~	91%	99%*	~	96%*	~	~	~	~	~	83%~	78%~	95%*	92%	92%	93%	91%
TOP BOX SCORE	215	3637	18	45	33	53	56		167						7	32	179	145	69	90	124
	79%	77%	62%~	80%	75%~	82%	82%	~	82%*	~	~	~	~	~	58%~	70%~	81%	79%	80%	86%*	74%*
NOT ANSWERED	4	68		1	2		1		3							1	3	3	1	1	3
VALID CASES	273	4706	29	56	44	65	68		204						12	46	222	184	86	105	167
NUMBER OF RESPONDENTS	277	4774	29	57	46	65	69		207						12	47	225	187	87	106	170
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35																					
WORST HEALTH PLAN POSSIBLE	2	33			1				2								2		2	1	1
	0.7%	0.7%	~	~	2%~	~	~	~	1%~	~	~	~	~	~	~		~0.9%~	~	2%~	1%	0.6%
01	2	31				1	1		1							1	1		2	1	1
	0.7%	0.7%	~	~	~	2%	1%		~0.5%	~	~	~	~	~	~	2%~	0.5%	~	2%~	1%	0.6%
02	5	51		2		3			4						1		5	5		1	4
	2%	1%	~	4%	~	5%	~	~	2%	~	~	~	~	~	8%~	~	2%~	3%~	~	1%	2%
03	2	61			1	1			1						1		2	1	1	1	1
	0.7%	1%	~	~	2%~	2%	~		~0.5%	~	~	~	~	~	8%~		~0.9%~	0.5%	1%	1%	0.6%
04	3	105			1	1	1		2						1		3	1	2	2	1
	1%	2%	~	~	2%~	2%	1%	~	1%	~	~	~	~	~	8%~	~	1%~	0.5%	2%	2%	0.6%
05	26	381	4	5	5	5	7		23						2		26	17	9	9	17
	10%	8%	14%~	9%	11%~	8%	10%	~	11%*	~	~	~	~	~	17%~	~	12%~	9%	11%	9%	10%
06	12	291	2	3		4	3		6						1	4	8	5	7	4	8
	4%	6%	7%~	5%	~	7%	4%	~	3%	~	~	~	~	~	8%~	9%~	4%	3%	8%	4%	5%
07	31	602	5	5	8	5	7		23						2	3	27	26	5	11	19
	11%	13%	17%~	9%	17%~	8%	10%	~	11%	~	~	~	~	~	17%~	7%~	12%	14%*	6%*	11%	11%
08	67	920	5	22	9	12	13		55						2	9	56	44	21	21	45
	25%	20%	17%~	40%*	20%~	20%	19%	~	27%	~	~	~	~	~	17%~	20%~	25%	24%	25%	21%	27%
09	46	736	5	10	8	12	10		34							10	35	34	11	20	26
	17%	16%	17%~	18%	17%~	20%	14%	~	17%	~	~	~	~	~	~	22%~	16%	18%	13%	20%	15%
BEST HEALTH PLAN POSSIBLE	76	1385	8	8	13	16	28		52						2	19	55	51	25	30	46
	28%	30%	28%~	15%*	28%~	27%	40%*	~	26%	~	~	~	~	~	17%~	41%~	25%*	28%	29%	30%	27%
#8-10 (NET)	189	3041	18	40	30	40	51		141						4	38	146	129	57	71	117
	69%	66%	62%~	73%	65%~	67%	73%	~	69%	~	~	~	~	~	33%~	83%~	66%*	70%	67%	70%	69%

Continued

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC— ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE
9-10 (NET)	122	2121	13	18	21	28	38		86						2	29	90	85	36	50	72
	45%	46%	45%~	33%*	46%~	47%	54%	~	42%	~	~	~	~	~	17%~	63%~	41%*	46%	42%	50%	43%
NOT ANSWERED	23	486		3	2	5	1		7							3	7	6	4	6	5
VALID CASES	272	4596	29	55	46	60	70		203						12	46	220	184	85	101	169
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%
MEAN	7.94	7.93	8.00	7.78	7.87	7.70	8.30		7.87						6.25	8.65	7.77	8.05	7.67	8.00	7.91
p stat_(*=Sig @ p<=.05)		.936	~.491		~.367		.080	~	.373	~	~	~	~	~	~	~.002*		.217	.195	.706	.745

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC— ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE
Q35A																					
YES	32	599	1	5	2	7	13		21						4	4	26	16	14	15	16
	11%	12%	3%~	9%	4%~	11%	18%	~	10%	~	~	~	~	~	33%~	8%~	12%	9%*	16%	14%	9%
NO	247	4210	28	52	45	56	58		186						8	44	198	171	74	91	155
	89%	88%	97%~	91%	96%~	89%	82%	~	90%	~	~	~	~	~	67%~	92%~	88%	91%*	84%	86%	91%
NOT ANSWERED	16	273		1	1	2			3							1	3	3	1	1	3
VALID CASES	279	4809	29	57	47	63	71		207						12	48	224	187	88	106	171
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35B																					
NEVER	6	90	1		1	2	2		5						1		6	3	3	1	5
	19%	16%~	100%~	~	50%~	29%~	17%~	~	25%~	~	~	~	~	~	25%~	~	24%~	20%~	21%~	7%~	33%~
SOMETIMES	3	83		1			2		1							1	2	1	2	2	1
	10%	15%~	~	20%~	~	~	17%~	~	5%~	~	~	~	~	~	~	25%~	8%~	7%~	14%~	13%~	7%~
USUALLY	8	129		1	1	1	3		7								7	4	3	4	4
	26%	23%~	~	20%~	50%~	14%~	25%~	~	35%~	~	~	~	~	~	~	~	28%~	27%~	21%~	27%~	27%~
ALWAYS	14	262		3		4	5		7						3	3	10	7	6	8	5
	45%	46%~	~	60%~	~	57%~	42%~	~	35%~	~	~	~	~	~	75%~	75%~	40%~	47%~	43%~	53%~	33%~
#ALWAYS + USUALLY (NET)	22	391		4	1	5	8		14						3	3	17	11	9	12	9
	71%	69%~	~	80%~	50%~	71%~	67%~	~	70%~	~	~	~	~	~	75%~	75%~	68%~	73%~	64%~	80%~	60%~
TOP BOX SCORE	14	262		3		4	5		7						3	3	10	7	6	8	5
	45%	46%~	~	60%~	~	57%~	42%~	~	35%~	~	~	~	~	~	75%~	75%~	40%~	47%~	43%~	53%~	33%~
NOT ANSWERED	1	35					1		1								1	1			1
VALID CASES	31	564	1	5	2	7	12		20						4	4	25	15	14	15	15
NUMBER OF RESPONDENTS	32	599	1	5	2	7	13		21						4	4	26	16	14	15	16
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35A = YES]

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35C																					
YES	52	759	4	8	6	17	14		38						3	8	43	25	25	8	44
	19%	16%	14%~	14%	13%~	28%	20%	~	19%	~	~	~	~	~	25%~	17%~	20%	14%*	29%*	8%*	26%*
NO	221	3989	24	50	40	43	55		166						9	38	177	157	62	94	125
	81%	84%	86%~	86%	87%~	72%	80%	~	81%	~	~	~	~	~	75%~	83%~	80%	86%*	71%*	92%*	74%*
NOT ANSWERED	22	334	1		2	5	2		6							3	7	8	2	5	5
VALID CASES	273	4748	28	58	46	60	69		204						12	46	220	182	87	102	169
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35D																					
NEVER	6	121	1		1	3	1		3							2	4	3	3	1	5
	12%	17%	25%~	~	17%~	18%~	7%~	~	8%~	~	~	~	~	~	~	25%~	9%~	12%~	12%~	13%~	11%~
SOMETIMES	10	129		2	1	3	3		8							1	9	4	5	2	8
	19%	18%	~	25%~	17%~	18%~	21%~	~	21%~	~	~	~	~	~	~	13%~	21%~	16%~	20%~	25%~	18%~
USUALLY	11	170		2	2	4	3		8						2	1	10	4	6	2	9
	21%	23%	~	25%~	33%~	24%~	21%~	~	21%~	~	~	~	~	~	67%~	13%~	23%~	16%~	24%~	25%~	20%~
ALWAYS	25	308	3	4	2	7	7		19						1	4	20	14	11	3	22
	48%	42%	75%~	50%~	33%~	41%~	50%~	~	50%~	~	~	~	~	~	33%~	50%~	47%~	56%~	44%~	38%~	50%~
#ALWAYS + USUALLY (NET)	36	478	3	6	4	11	10		27						3	5	30	18	17	5	31
	69%	66%	75%~	75%~	67%~	65%~	71%~	~	71%~	~	~	~	~	~	~100%~	63%~	70%~	72%~	68%~	63%~	70%~
TOP BOX SCORE	25	308	3	4	2	7	7		19						1	4	20	14	11	3	22
	48%	42%	75%~	50%~	33%~	41%~	50%~	~	50%~	~	~	~	~	~	33%~	50%~	47%~	56%~	44%~	38%~	50%~
NOT ANSWERED		31																			
VALID CASES	52	728	4	8	6	17	14		38						3	8	43	25	25	8	44
NUMBER OF RESPONDENTS	52	759	4	8	6	17	14		38						3	8	43	25	25	8	44
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35C = YES]

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35E																					
ALWAYS	6	178			1	2	2		3						1	1	3	4	2		6
	2%	4%	~	~	2%~	3%	3%	~	1%	~	~	~	~	~	8%~	2%~	1%	2%	2%	~	4%*
USUALLY	14	193	3	2	2	4	3		9						1	3	11	6	8	5	9
	5%	4%	10%~	3%	4%~	6%	4%	~	4%	~	~	~	~	~	8%~	6%~	5%	3%	9%	5%	5%
SOMETIMES	42	804	6	13	7	9	6		28						3	8	33	27	14	13	29
	15%	17%	21%~	22%	15%~	14%	9%*	~	14%	~	~	~	~	~	25%~	16%~	15%	15%	16%	13%	17%
NEVER	213	3575	20	43	36	48	58		163						7	37	173	148	63	85	127
	77%	75%	69%~	74%	78%~	76%	84%	~	80%	~	~	~	~	~	58%~	76%~	79%	80%	72%	83%	74%
#NEVER + SOMETIMES	255	4379	26	56	43	57	64		191						10	45	206	175	77	98	156
(NET)	93%	92%	90%~	97%	93%~	90%	93%	~	94%	~	~	~	~	~	83%~	92%~	94%	95%	89%	95%	91%
TOP BOX SCORE	213	3575	20	43	36	48	58		163						7	37	173	148	63	85	127
	77%	75%	69%~	74%	78%~	76%	84%	~	80%	~	~	~	~	~	58%~	76%~	79%	80%	72%	83%	74%
NOT ANSWERED	20	332			2	2	2		7								7	5	2	4	3
VALID CASES	275	4750	29	58	46	63	69		203						12	49	220	185	87	103	171
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35F																					
ALWAYS	5	66		1	1	3			3						1		4	2	3		5
	2%	1%	~	2%	2%~	5%	~	~	1%	~	~	~	~	~	8%~	~	2%	1%	3%	~	3%~
USUALLY	9	106		1	2	2	3		8						1		9	4	5	2	7
	3%	2%	~	2%	4%~	3%	4%	~	4%	~	~	~	~	~	8%~	~	4%*	2%	6%	2%	4%
SOMETIMES	38	672	3	10	6	11	7		27						2	6	31	23	14	13	25
	14%	14%	10%~	17%	13%~	17%	10%	~	13%	~	~	~	~	~	17%~	12%~	14%	12%	16%	13%	14%
NEVER	226	3911	26	46	38	49	59		168						8	43	179	158	66	89	136
	81%	82%	90%~	79%	81%~	75%	86%	~	82%	~	~	~	~	~	67%~	88%~	80%	84%	75%	86%	79%
#NEVER + SOMETIMES	264	4583	29	56	44	60	66		195						10	49	210	181	80	102	161
(NET)	95%	96%	100%~	97%	94%~	92%	96%	~	95%	~	~	~	~	~	83%~	100%~	94%	97%	91%	98%*	93%*
TOP BOX SCORE	226	3911	26	46	38	49	59		168						8	43	179	158	66	89	136
	81%	82%	90%~	79%	81%~	75%	86%	~	82%	~	~	~	~	~	67%~	88%~	80%	84%	75%	86%	79%
NOT ANSWERED	17	327			1		2		4								4	3	1	3	1
VALID CASES	278	4755	29	58	47	65	69		206						12	49	223	187	88	104	173
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35G																					
ALWAYS	6	55			1	3	1		4						1		5	3	3	1	5
	2%	1%	~	~	2%~	5%	1%	~	2%	~	~	~	~	~	8%~	~	2%	2%	3%	1%	3%
USUALLY	3	67			3				2						1		3		3		3
	1%	1%	~	~	6%~	~	~	~	1%	~	~	~	~	~	8%~	~	1%	~	3%	~	2%
SOMETIMES	23	487	1	10	4	4	4		17						1	4	18	10	12	2	21
	8%	10%	3%~	17%*	9%~	6%	6%	~	8%	~	~	~	~	~	8%~	8%~	8%	5%*	14%	2%*	12%*
NEVER	246	4149	28	48	39	58	64		183						9	45	197	174	70	102	143
	88%	87%	97%~	83%	83%~	89%	93%	~	89%	~	~	~	~	~	75%~	92%~	88%	93%*	80%*	97%*	83%*
#NEVER + SOMETIMES	269	4636	29	58	43	62	68		200						10	49	215	184	82	104	164
(NET)	97%	97%	100%~	100%~	91%~	95%	99%	~	97%	~	~	~	~	~	83%~	100%~	96%	98%	93%	99%*	95%*
TOP BOX SCORE	246	4149	28	48	39	58	64		183						9	45	197	174	70	102	143
	88%	87%	97%~	83%	83%~	89%	93%	~	89%	~	~	~	~	~	75%~	92%~	88%	93%*	80%*	97%*	83%*
NOT ANSWERED	17	324			1		2		4								4	3	1	2	2
VALID CASES	278	4758	29	58	47	65	69		206						12	49	223	187	88	105	172
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	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 TRUST A DOCTOR OR OTHER HEALTH PROVIDER WITH YOUR MEDICAL CARE?

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35H																					
#YES DEFINITELY	205	3305	22	39	35	46	56		147						9	41	160	142	61	81	123
	74%	70%	76%~	67%	74%~	73%	81%	~	72%	~	~	~	~	~	75%~	85%~	72%	76%	70%	77%	72%
YES SOMEWHAT	60	1110	6	16	9	16	11		49						3	6	52	42	17	20	40
	22%	24%	21%~	28%	19%~	25%	16%	~	24%	~	~	~	~	~	25%~	13%~	23%	23%	20%	19%	24%
NO	11	300	1	3	3	1	2		9							1	10	2	9	4	7
	4%	6%*	3%~	5%	6%~	2%	3%	~	4%	~	~	~	~	~	~	2%~	5%	1%*	10%*	4%	4%
NOT ANSWERED	19	367			1	2	2		5							1	5	4	2	2	4
VALID CASES	276	4715	29	58	47	63	69		205						12	48	222	186	87	105	170
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35I																					
YES	158	2797	22	33	22	35	42		112						9	32	124	114	42	52	106
	57%	58%	76%~	58%	47%~	54%	60%	~	54%	~	~	~	~	~	75%~	65%~	55%	61%*	47%*	50%	61%*
NO	121	1986	7	24	25	30	28		95						3	17	100	73	47	53	67
	43%	42%	24%~	42%	53%~	46%	40%	~	46%	~	~	~	~	~	25%~	35%~	45%	39%*	53%*	50%	39%*
NOT ANSWERED	16	299		1	1		1		3								3	3		2	1
VALID CASES	279	4783	29	57	47	65	70		207						12	49	224	187	89	105	173
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35J																					
YES	115	1919	13	23	18	27	30		81						6	24	88	86	26	39	76
	41%	40%	45%~	40%	39%~	42%	42%	~	39%	~	~	~	~	~	50%~	49%~	39%	46%*	29%*	37%	44%
NO	164	2885	16	34	28	38	41		126						6	25	136	101	63	66	97
	59%	60%	55%~	60%	61%~	58%	58%	~	61%	~	~	~	~	~	50%~	51%~	61%	54%*	71%*	63%	56%
NOT ANSWERED	16	278		1	2				3								3	3		2	1
VALID CASES	279	4804	29	57	46	65	71		207						12	49	224	187	89	105	173
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35K																					
NEVER	5	40	1		1	1	2		3							1	3	4	1	1	4
	5%	2%	8%~	~	6%~	4%~	7%~	~	4%~	~	~	~	~	~	~	5%~	3%~	5%~	4%~	3%~	5%~
SOMETIMES	15	150	4	1	3	2	4		11						1	3	12	11	4	6	9
	14%	8%	31%~	5%~	18%~	8%~	14%~	~	14%~	~	~	~	~	~	17%~	14%~	14%~	13%~	16%~	16%~	12%~
USUALLY	18	356	1	3	4	6	3		11							6	11	14	3	6	12
	16%	19%	8%~	14%~	24%~	23%~	10%~	~	14%~	~	~	~	~	~	~	27%~	13%~	17%~	12%~	16%~	16%~
ALWAYS	73	1310	7	18	9	17	20		54						5	12	60	54	17	25	48
	66%	71%	54%~	82%~	53%~	65%~	69%~	~	68%~	~	~	~	~	~	83%~	55%~	70%~	65%~	68%~	66%~	66%~
#ALWAYS + USUALLY (NET)	91	1666	8	21	13	23	23		65						5	18	71	68	20	31	60
	82%	90%*	62%~	95%~	76%~	88%~	79%~	~	82%~	~	~	~	~	~	83%~	82%~	83%~	82%~	80%~	82%~	82%~
TOP BOX SCORE	73	1310	7	18	9	17	20		54						5	12	60	54	17	25	48
	66%	71%	54%~	82%~	53%~	65%~	69%~	~	68%~	~	~	~	~	~	83%~	55%~	70%~	65%~	68%~	66%~	66%~
NOT ANSWERED	4	63		1	1	1	1		2							2	2	3	1	1	3
VALID CASES	111	1856	13	22	17	26	29		79						6	22	86	83	25	38	73
NUMBER OF RESPONDENTS	115	1919	13	23	18	27	30		81						6	24	88	86	26	39	76
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC— ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE
Q35L																					
ALWAYS	17	423	3	3	2	5	3		10						1	5	11	13	3	7	10
	15%	22%*	20%~	11%~	13%~	21%~	13%~	~	13%~	~	~	~	~	~	14%~	23%~	13%~	17%~	9%~	18%~	14%~
USUALLY	22	375	2	8	3	3	5		15						2	4	17	17	4	9	13
	20%	20%	13%~	29%~	19%~	13%~	21%~	~	19%~	~	~	~	~	~	29%~	18%~	20%~	22%~	12%~	23%~	18%~
SOMETIMES	24	377	4	6	6	5	3		16						1	5	18	17	7	6	18
	22%	20%	27%~	21%~	38%~	21%~	13%~	~	21%~	~	~	~	~	~	14%~	23%~	21%~	22%~	21%~	15%~	25%~
NEVER	48	744	6	11	5	11	13		36						3	8	39	29	19	18	30
	43%	39%	40%~	39%~	31%~	46%~	54%~	~	47%~	~	~	~	~	~	43%~	36%~	46%~	38%~	58%~	45%~	42%~
#NEVER + SOMETIMES	72	1121	10	17	11	16	16		52						4	13	57	46	26	24	48
(NET)	65%	58%	67%~	61%~	69%~	67%~	67%~	~	68%~	~	~	~	~	~	57%~	59%~	67%~	61%~	79%~	60%~	68%~
TOP BOX SCORE	48	744	6	11	5	11	13		36						3	8	39	29	19	18	30
	43%	39%	40%~	39%~	31%~	46%~	54%~	~	47%~	~	~	~	~	~	43%~	36%~	46%~	38%~	58%~	45%~	42%~
5	157	2747	13	28	29	37	43		123						5	23	132	105	51	63	93
NOT ANSWERED	27	416	1	2	3	4	4		10							4	10	9	5	4	10
VALID CASES	111	1919	15	28	16	24	24		77						7	22	85	76	33	40	71
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35M																					
NEVER	45	695	6	9	6	12	11		33						2	8	35	30	14	15	30
	42%	36%	50%~	35%~	33%~	46%~	50%~	~	43%~	~	~	~	~	~	33%~	36%~	43%~	41%~	44%~	44%~	41%~
SOMETIMES	16	351	1	6	4	2	3		11						2	3	13	12	4	7	9
	15%	18%	8%~	23%~	22%~	8%~	14%~	~	14%~	~	~	~	~	~	33%~	14%~	16%~	16%~	13%~	21%~	12%~
USUALLY	24	351	2	6	4	8	2		18							6	18	16	7	5	19
	22%	18%	17%~	23%~	22%~	31%~	9%~	~	24%~	~	~	~	~	~	~	27%~	22%~	22%~	22%~	15%~	26%~
ALWAYS	22	514	3	5	4	4	6		14						2	5	16	15	7	7	15
	21%	27%	25%~	19%~	22%~	15%~	27%~	~	18%~	~	~	~	~	~	33%~	23%~	20%~	21%~	22%~	21%~	21%~
#ALWAYS + USUALLY (NET)	46	865	5	11	8	12	8		32						2	11	34	31	14	12	34
	43%	45%	42%~	42%~	44%~	46%~	36%~	~	42%~	~	~	~	~	~	33%~	50%~	41%~	42%~	44%~	35%~	47%~
TOP BOX SCORE	22	514	3	5	4	4	6		14						2	5	16	15	7	7	15
	21%	27%	25%~	19%~	22%~	15%~	27%~	~	18%~	~	~	~	~	~	33%~	23%~	20%~	21%~	22%~	21%~	21%~
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	165	2765	16	31	28	37	45		124						6	27	136	111	53	70	94
NOT ANSWERED	23	406	1	1	2	2	4		10								9	6	4	3	7
VALID CASES	107	1911	12	26	18	26	22		76						6	22	82	73	32	34	73
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q35N																					
EXTREMELY DIFFICULT	25	281			5	12	7		18						2	5	19	16	9	6	19
	10%	6%	~	~	13%~	21%*	12%	~	10%	~	~	~	~	~	18%~	11%~	10%	9%	12%	7%	12%
01	8	112	1	2	1	2	2		5						1	2	6	5	3	4	4
	3%	3%	4%~	4%	3%~	3%	3%	~	3%	~	~	~	~	~	9%~	4%~	3%	3%	4%	4%	3%
02	14	129	2	5	2	2	3		10							4	10	8	6	5	9
	5%	3%	7%~	10%	5%~	3%	5%	~	6%	~	~	~	~	~	~	9%~	5%	5%	8%	5%	6%
03	8	164		1	2	2	3		7								8	7	1	4	4
	3%	4%	~	2%	5%~	3%	5%	~	4%	~	~	~	~	~	~	~	4%~	4%	1%	4%	3%
04	11	138	4	3	1	1	2		8							3	8	9	2	4	7
	4%	3%	15%~	6%	3%~	2%	3%	~	4%	~	~	~	~	~	~	7%~	4%	5%	3%	4%	5%
05	28	547	3	5	6	8	6		22							4	24	15	13	10	18
	11%	12%	11%~	10%	15%~	14%	10%	~	12%	~	~	~	~	~	~	9%~	12%	9%	17%	11%	12%
06	12	230	3	2	2	1	3		10							2	10	8	4	6	6
	5%	5%	11%~	4%	5%~	2%	5%	~	6%	~	~	~	~	~	~	4%~	5%	5%	5%	7%	4%
07	16	375	2	3	3	3	4		11						1	4	12	13	3	5	11
	6%	8%	7%~	6%	8%~	5%	7%	~	6%	~	~	~	~	~	9%~	9%~	6%	8%	4%	5%	7%
09	63	1161	5	10	12	14	9		40						4	6	45	37	14	19	33
	25%	26%	19%~	19%	30%~	24%	15%*	~	22%	~	~	~	~	~	36%~	13%~	23%	22%	19%	21%	21%
EXTREMELY EASY	72	1320	7	21	6	13	21		48						3	16	54	51	20	28	43
	28%	30%	26%~	40%*	15%~	22%	35%	~	27%	~	~	~	~	~	27%~	35%~	28%	30%	27%	31%	28%
#8-10 (NET)	135	2481	12	31	18	27	30		88						7	22	99	88	34	47	76
	53%	56%	44%~	60%	45%~	47%	50%	~	49%	~	~	~	~	~	64%~	48%~	51%	52%	45%	52%	49%
9-10 (NET)	135	2481	12	31	18	27	30		88						7	22	99	88	34	47	76
	53%	56%	44%~	60%	45%~	47%	50%	~	49%	~	~	~	~	~	64%~	48%~	51%	52%	45%	52%	49%

Continued

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
88	2	6			1		1		1										1	1	1
NOT ANSWERED	36	619	2	6	7	7	10		30						1	3	31	21	13	15	19
VALID CASES	257	4457	27	52	40	58	60		179						11	46	196	169	75	91	154
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%
MEAN	6.67	7.14	6.78	7.40	6.15	5.84	6.53		6.51						6.73	6.43	6.59	6.72	6.16	6.75	6.44
p stat_(*=Sig @ p<=.05)		.028*	~.067		~.039*		.722		~.250	~	~	~	~	~	~		~.476	.785	.140	.801	.192

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q36																					
EXCELLENT	20	447	4	5		3	7		16						2	1	19	20		8	12
	7%	9%	14%~	9%	~	5%	10%	~	8%	~	~	~	~	~	17%~	2%~	8%*	11%*	~	8%	7%
VERY GOOD	62	1140	13	16	14	10	8		46						3	9	51	62		23	38
	22%	24%	45%~	28%	30%~	16%	11%*	~	22%	~	~	~	~	~	25%~	18%~	23%	33%~	~	22%	22%
GOOD	108	1676	8	25	19	24	28		79						4	21	85	108		39	69
	39%	35%	28%~	43%	40%~	38%	39%	~	38%	~	~	~	~	~	33%~	43%~	38%	57%*	~	37%	40%
FAIR	73	1110	4	11	11	22	23		54						2	16	56		73	31	42
	26%	23%	14%~	19%	23%~	34%	32%	~	26%	~	~	~	~	~	17%~	33%~	25%		~ 82%*	30%	24%
POOR	16	395		1	3	5	5		13						1	2	14		16	4	12
	6%	8%	~	2%*	6%~	8%	7%	~	6%	~	~	~	~	~	8%~	4%~	6%		~ 18%*	4%	7%
#EXCELLENT + VERY GOOD	190	3263	25	46	33	37	43		141						9	31	155	190		70	119
+ GOOD (NET)	68%	68%	86%~	79%*	70%~	58%	61%	~	68%	~	~	~	~	~	75%~	63%~	69%	100%~	~	67%	69%
NOT ANSWERED	16	314			1	1			2								2			2	1
VALID CASES	279	4768	29	58	47	64	71		208						12	49	225	190	89	105	173
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q37																					
EXCELLENT	54	870	6	10	7	12	19		37						3	11	42	48	6	25	29
	19%	18%	21%~	17%	15%~	19%	27%	~	18%	~	~	~	~	~	25%~	22%~	19%	25%*	7%*	24%	17%
VERY GOOD	73	1189	9	13	13	15	19		48						3	18	53	59	14	25	47
	26%	25%	31%~	22%	28%~	23%	27%	~	23%	~	~	~	~	~	25%~	37%~	23%	31%*	16%*	24%	27%
GOOD	78	1480	4	20	14	20	16		61						3	12	65	51	26	32	46
	28%	31%	14%~	34%	30%~	31%	23%	~	29%	~	~	~	~	~	25%~	24%~	29%	27%	30%	30%	27%
FAIR	62	937	10	15	8	14	13		53						2	6	56	31	30	20	42
	22%	20%	34%~	26%	17%~	22%	18%	~	25%*	~	~	~	~	~	17%~	12%~	25%*	16%*	34%*	19%	24%
POOR	13	296			5	3	4		10						1	2	10	1	12	4	9
	5%	6%	~	~	11%~	5%	6%	~	5%	~	~	~	~	~	8%~	4%~	4%	0.5%*	14%*	4%	5%
#EXCELLENT + VERY GOOD	205	3539	19	43	34	47	54		146						9	41	160	158	46	82	122
+ GOOD (NET)	73%	74%	66%~	74%	72%~	73%	76%	~	70%*	~	~	~	~	~	75%~	84%~	71%*	83%*	52%*	77%	71%
NOT ANSWERED	15	310			1	1			1								1		1	1	1
VALID CASES	280	4772	29	58	47	64	71		209						12	49	226	190	88	106	173
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q38																					
#YES	98	1705	8	14	18	21	29		69						1	24	73	61	34	37	61
	35%	36%	29%~	24%*	38%~	32%	41%	~	33%	~	~	~	~	~	8%~	50%~	32%	32%	39%	35%	35%
NO	181	2994	20	44	29	44	41		139						11	24	153	128	53	69	111
	65%	64%	71%~	76%*	62%~	68%	59%	~	67%	~	~	~	~	~	92%~	50%~	68%	68%	61%	65%	65%
DON'T KNOW	3	99	1		1		1		2							1	1	1	2	1	2
NOT ANSWERED	13	284																			
VALID CASES	279	4699	28	58	47	65	70		208						12	48	226	189	87	106	172
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q39																					
EVERY DAY	55	949	2	7	14	13	17		48						1	4	50	36	19	20	34
	20%	20%	7%~	12%	30%~	21%	24%	~	23%*	~	~	~	~	~	8%~	8%~	22%*	19%	22%	19%	20%
SOME DAYS	27	436	3	7	3	8	5		22						1	2	23	14	13	14	13
	10%	9%	10%~	12%	6%~	13%	7%	~	11%	~	~	~	~	~	8%~	4%~	10%	7%	15%	13%	7%
NOT AT ALL	197	3380	24	44	30	42	49		138						10	42	152	139	55	70	127
	71%	71%	83%~	76%	64%~	67%	69%	~	66%*	~	~	~	~	~	83%~	88%~	68%*	74%	63%	67%	73%
DON'T KNOW	3	34			1	2			2							1	2	1	2	3	
NOT ANSWERED	13	283																			
VALID CASES	279	4765	29	58	47	63	71		208						12	48	225	189	87	104	174
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q40																					
NEVER	19	367	2	7	2	5	2		18								18	11	8	8	10
	24%	27%	40%~	50%~	12%~	26%~	9%~	~	26%~	~	~	~	~	~	~	~	25%~	22%~	26%~	24%~	22%~
SOMETIMES	24	331	2	3	5	6	7		21						1		23	16	8	12	12
	30%	24%	40%~	21%~	29%~	32%~	32%~	~	30%~	~	~	~	~	~	50%~	~	32%~	33%~	26%~	36%~	26%~
USUALLY	12	212		2	5	2	3		10							1	11	9	3	6	6
	15%	16%	~	14%~	29%~	11%~	14%~	~	14%~	~	~	~	~	~	~	25%~	15%~	18%~	10%~	18%~	13%~
ALWAYS	25	455	1	2	5	6	10		21						1	3	21	13	12	7	18
	31%	33%	20%~	14%~	29%~	32%~	45%~	~	30%~	~	~	~	~	~	50%~	75%~	29%~	27%~	39%~	21%~	39%~
#ALWAYS + USUALLY (NET)	37	667	1	4	10	8	13		31						1	4	32	22	15	13	24
	46%	49%	20%~	29%~	59%~	42%~	59%~	~	44%~	~	~	~	~	~	50%~	100%~	44%~	45%~	48%~	39%~	52%~
TOP BOX SCORE	25	455	1	2	5	6	10		21						1	3	21	13	12	7	18
	31%	33%	20%~	14%~	29%~	32%~	45%~	~	30%~	~	~	~	~	~	50%~	75%~	29%~	27%~	39%~	21%~	39%~
NOT ANSWERED	2	20				2										2		1	1	1	1
VALID CASES	80	1365	5	14	17	19	22		70						2	4	73	49	31	33	46
NUMBER OF RESPONDENTS	82	1385	5	14	17	21	22		70						2	6	73	50	32	34	47
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q41																					
NEVER	38	687	4	11	4	9	9		34						1	1	36	23	15	18	19
	48%	50%	80%~	79%~	24%~	47%~	41%~	~	49%~	~	~	~	~	~	50%~	25%~	49%~	47%~	48%~	55%~	41%~
SOMETIMES	19	305	1	3	5	4	5		18								17	14	5	6	13
	24%	22%	20%~	21%~	29%~	21%~	23%~	~	26%~	~	~	~	~	~	~	~	23%~	29%~	16%~	18%~	28%~
USUALLY	12	152			6	3	2		11							1	11	6	6	6	6
	15%	11%	~	~	35%~	16%~	9%~	~	16%~	~	~	~	~	~	~	25%~	15%~	12%~	19%~	18%~	13%~
ALWAYS	11	223			2	3	6		7						1	2	9	6	5	3	8
	14%	16%	~	~	12%~	16%~	27%~	~	10%~	~	~	~	~	~	50%~	50%~	12%~	12%~	16%~	9%~	17%~
#ALWAYS + USUALLY (NET)	23	375			8	6	8		18						1	3	20	12	11	9	14
	29%	27%	~	~	47%~	32%~	36%~	~	26%~	~	~	~	~	~	50%~	75%~	27%~	24%~	35%~	27%~	30%~
TOP BOX SCORE	11	223			2	3	6		7						1	2	9	6	5	3	8
	14%	16%	~	~	12%~	16%~	27%~	~	10%~	~	~	~	~	~	50%~	50%~	12%~	12%~	16%~	9%~	17%~
NOT ANSWERED	2	18				2										2		1	1	1	1
VALID CASES	80	1367	5	14	17	19	22		70						2	4	73	49	31	33	46
NUMBER OF RESPONDENTS	82	1385	5	14	17	21	22		70						2	6	73	50	32	34	47
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q42																					
NEVER	39	778	3	9	5	8	13		35						1	1	37	20	19	18	20
	49%	57%	60%~	64%~	31%~	42%~	59%~	~	51%~	~	~	~	~	~	50%~	25%~	51%~	42%~	61%~	55%~	44%~
SOMETIMES	24	261	2	4	6	8	3		22								22	17	7	9	15
	30%	19%*	40%~	29%~	38%~	42%~	14%~	~	32%~	~	~	~	~	~	~	~	31%~	35%~	23%~	27%~	33%~
USUALLY	7	141		1	3	1	2		6							1	6	4	3	2	5
	9%	10%	~	7%~	19%~	5%~	9%~	~	9%~	~	~	~	~	~	~	25%~	8%~	8%~	10%~	6%~	11%~
ALWAYS	9	175			2	2	4		6						1	2	7	7	2	4	5
	11%	13%	~	~	13%~	11%~	18%~	~	9%~	~	~	~	~	~	50%~	50%~	10%~	15%~	6%~	12%~	11%~
#ALWAYS + USUALLY (NET)	16	316		1	5	3	6		12						1	3	13	11	5	6	10
	20%	23%	~	7%~	31%~	16%~	27%~	~	17%~	~	~	~	~	~	50%~	75%~	18%~	23%~	16%~	18%~	22%~
TOP BOX SCORE	9	175			2	2	4		6						1	2	7	7	2	4	5
	11%	13%	~	~	13%~	11%~	18%~	~	9%~	~	~	~	~	~	50%~	50%~	10%~	15%~	6%~	12%~	11%~
NOT ANSWERED	3	30			1	2			1							2	1	2	1	1	2
VALID CASES	79	1355	5	14	16	19	22		69						2	4	72	48	31	33	45
NUMBER OF RESPONDENTS	82	1385	5	14	17	21	22		70						2	6	73	50	32	34	47
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

Q43 DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q43																					
YES	58	997	2	1	10	16	22		45						4	8	50	30	27	19	39
	21%	21%	7%~	2%*	21%~	25%	31%*	~	22%	~	~	~	~	~	33%~	16%~	22%	16%*	30%*	18%	23%
NO	222	3756	27	57	37	48	49		164						8	41	175	158	62	88	133
	79%	79%	93%~	98%*	79%~	75%	69%*	~	78%	~	~	~	~	~	67%~	84%~	78%	84%*	70%*	82%	77%
DON'T KNOW	2	42			1	1			1								2	2			2
NOT ANSWERED	13	287																			
VALID CASES	280	4753	29	58	47	64	71		209						12	49	225	188	89	107	172
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q44																					
YES	23	448		2	3	4	14		17						2	3	18	9	14	11	12
	9%	10%	~	4%*	7%~	7%	21%*	~	9%	~	~	~	~	~	18%~	7%~	9%	5%*	18%*	11%	8%
NO	238	3956	28	55	38	57	52		179						9	41	193	173	62	92	145
	91%	90%	100%~	96%*	93%~	93%	79%*	~	91%	~	~	~	~	~	82%~	93%~	91%	95%*	82%*	89%	92%
DON'T KNOW	17	377	1	1	3	4	5		11						1	4	13	6	11	3	14
NOT ANSWERED	17	301			4				3							1	3	2	2	1	3
VALID CASES	261	4404	28	57	41	61	66		196						11	44	211	182	76	103	157
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q45																					
YES	91	1716		4	16	22	41		76						3	11	79	53	36	31	60
	33%	36%	~	7%*	34%~	34%	60%*	~	37%*	~	~	~	~	~	25%~	23%~	35%	29%*	41%	29%	36%
NO	185	3045	28	53	31	43	27		130						9	36	145	132	52	75	109
	67%	64%	100%~	93%*	66%~	66%	40%*	~	63%*	~	~	~	~	~	75%~	77%~	65%	71%*	59%	71%	64%
NOT ANSWERED	19	321	1	1	1		3		4							2	3	5	1	1	5
VALID CASES	276	4761	28	57	47	65	68		206						12	47	224	185	88	106	169
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q46.1																					
YES	55	1102		2	8	15	25		44							10	43	34	21	20	35
	19%	22%	~	3%*	17%~	23%	35%*	~	21%	~	~	~	~	~	~	20%~	19%	18%	24%	19%	20%
NO	240	3980	29	56	40	50	46		166						12	39	184	156	68	87	139
	81%	78%	100%~	97%*	83%~	77%	65%*	~	79%	~	~	~	~	~	~100%~	80%~	81%	82%	76%	81%	80%
VALID CASES	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q46.2																					
YES	76	1444		7	10	20	32		64						1	9	66	34	41	30	46
	26%	28%	~	12%*	21%~	31%	45%*	~	30%*	~	~	~	~	~	8%~	18%~	29%*	18%*	46%*	28%	26%
NO	219	3638	29	51	38	45	39		146						11	40	161	156	48	77	128
	74%	72%	100%~	88%*	79%~	69%	55%*	~	70%*	~	~	~	~	~	92%~	82%~	71%*	82%*	54%*	72%	74%
VALID CASES	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q46.3																					
YES	48	826	2	8	6	14	17		42						1	4	42	32	16	14	34
	16%	16%	7%~	14%	13%~	22%	24%	~	20%*	~	~	~	~	~	8%~	8%~	19%*	17%	18%	13%	20%
NO	247	4256	27	50	42	51	54		168						11	45	185	158	73	93	140
	84%	84%	93%~	86%	88%~	78%	76%	~	80%*	~	~	~	~	~	92%~	92%~	81%*	83%	82%	87%	80%
VALID CASES	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q47.1																					
YES	9	211			1	2	4		9								9	4	5	2	7
	3%	4%	~	~	2%~	3%	6%	~	4%*	~	~	~	~	~	~	~	4%*	2%	6%	2%	4%
NO	286	4871	29	58	47	63	67		201						12	49	218	186	84	105	167
	97%	96%	100%~	100%~	98%~	97%	94%	~	96%*	~	~	~	~	~	~100%~	100%~	96%*	98%	94%	98%	96%
VALID CASES	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q47.2																					
YES	9	212			1	3	3		8							1	8	2	6	4	5
	3%	4%	~	~	2%~	5%	4%	~	4%	~	~	~	~	~	~	2%~	4%	1%*	7%	4%	3%
NO	286	4870	29	58	47	62	68		202						12	48	219	188	83	103	169
	97%	96%	100%~	100%~	98%~	95%	96%	~	96%	~	~	~	~	~	~100%~	98%~	96%	99%*	93%	96%	97%
VALID CASES	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q47.3																					
YES	12	195			2	3	6		8							3	9	6	6	4	8
	4%	4%	~	~	4%~	5%	8%	~	4%	~	~	~	~	~	~	6%~	4%	3%	7%	4%	5%
NO	283	4887	29	58	46	62	65		202						12	46	218	184	83	103	166
	96%	96%	100%~	100%~	96%~	95%	92%	~	96%	~	~	~	~	~	~100%~	94%~	96%	97%	93%	96%	95%
VALID CASES	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q47.4																					
YES	50	916		3	8	16	19		37							11	39	24	24	25	25
	17%	18%	~	5%*	17%~	25%	27%*	~	18%	~	~	~	~	~	~	22%~	17%	13%*	27%*	23%*	14%
NO	245	4166	29	55	40	49	52		173						12	38	188	166	65	82	149
	83%	82%	100%~	95%*	83%~	75%	73%*	~	82%	~	~	~	~	~	~100%~	78%~	83%	87%*	73%*	77%*	86%
VALID CASES	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q48																					
YES	83	1408	4	11	16	24	23		69						6	7	75	43	38	19	64
	30%	30%	14%~	20%*	33%~	37%	32%	~	33%*	~	~	~	~	~	50%~	15%~	33%*	23%*	43%*	18%*	37%*
NO	195	3330	24	45	32	41	48		140						6	40	151	143	51	87	108
	70%	70%	86%~	80%*	67%~	63%	68%	~	67%*	~	~	~	~	~	50%~	85%~	67%*	77%*	57%*	82%*	63%*
NOT ANSWERED	17	344	1	2					1							2	1	4		1	2
VALID CASES	278	4738	28	56	48	65	71		209						12	47	226	186	89	106	172
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q49																					
YES	71	1187	2	9	15	21	20		58						6	6	64	36	33	16	55
	91%	88%	50%~	82%~	94%~	95%~	95%~	~	89%~	~	~	~	~		~100%~	100%~	90%~	88%~	94%~	100%~	89%~
NO	7	167	2	2	1	1	1		7								7	5	2		7
	9%	12%	50%~	18%~	6%~	5%~	5%~	~	11%~	~	~	~	~	~	~	~	10%~	12%~	6%~	~	11%~
NOT ANSWERED	5	54				2	2		4							1	4	2	3	3	2
VALID CASES	78	1354	4	11	16	22	21		65						6	6	71	41	35	16	62
NUMBER OF RESPONDENTS	83	1408	4	11	16	24	23		69						6	7	75	43	38	19	64
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q48 = YES]

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q50																					
YES	172	2988	12	21	34	42	53		135						7	26	142	96	73	62	110
	61%	63%	41%~	37%*	71%~	65%	75%*	~	65%	~	~	~	~	~	58%~	53%~	63%	51%*	82%*	58%	64%
NO	108	1758	17	36	14	23	18		74						5	23	84	92	16	45	63
	39%	37%	59%~	63%*	29%~	35%	25%*	~	35%	~	~	~	~	~	42%~	47%~	37%	49%*	18%*	42%	36%
NOT ANSWERED	15	336		1					1								1	2			1
VALID CASES	280	4746	29	57	48	65	71		209						12	49	226	188	89	107	173
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q51																					
YES	154	2723	11	19	32	32	50		126						5	19	131	86	65	55	99
	93%	95%	92%~	90%~	94%~	86%~	98%*	~	98%~	~	~	~	~	~	71%~	76%~	96%~	91%	96%	95%	93%
NO	11	155	1	2	2	5	1		3						2	6	5	8	3	3	8
	7%	5%	8%~	10%~	6%~	14%~	2%*	~	2%~	~	~	~	~	~	29%~	24%~	4%~	9%	4%	5%	7%
NOT ANSWERED	7	110				5	2		6							1	6	2	5	4	3
VALID CASES	165	2878	12	21	34	37	51		129						7	25	136	94	68	58	107
NUMBER OF RESPONDENTS	172	2988	12	21	34	42	53		135						7	26	142	96	73	62	110
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q50 = YES]

NQ52 WHAT IS YOUR AGE?

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
NQ52																					
18 TO 24	30	485	29						18							10	19	25	4	13	16
	10%	10%	100%~	~	~	~	~	~	9%	~	~	~	~	~	~	20%~	8%	13%*	4%*	12%	9%
25 TO 34	62	853		58					45						2	10	48	46	12	18	40
	21%	17%		~100%~	~	~	~	~	21%	~	~	~	~	~	17%~	20%~	21%	24%	13%*	17%	23%
35 TO 44	54	805			48				35						4	7	39	34	14	17	31
	18%	16%	~		~100%~	~	~	~	17%	~	~	~	~	~	33%~	14%~	17%	18%	16%	16%	18%
45 TO 54	65	1048				65			42						3	17	47	37	27	28	37
	22%	21%	~	~		~100%~	~	~	20%	~	~	~	~	~	25%~	35%~	21%	19%	30%*	26%	21%
55 TO 64	72	1437					71		61						3	4	65	43	28	27	44
	24%	28%	~	~	~		~100%~	~	29%*	~	~	~	~	~	25%~	8%~	29%*	23%	31%	25%	25%
65 TO 74	11	302							8							1	8	5	3	4	5
	4%	6%*	~	~	~	~	~	~	4%	~	~	~	~	~	~	2%~	4%	3%	3%	4%	3%
75 OR OLDER	1	152							1								1		1		1
	0.3%	3%*	~	~	~	~	~	~	~0.5%	~	~	~	~	~	~		~0.4%	~	1%		~0.6%
VALID CASES	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

NQ53 ARE YOU MALE OR FEMALE?

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
NQ53																					
MALE	112	2039	13	18	17	28	27		82						5	15	91	70	35	107	
	38%	40%	45%~	31%	35%~	43%	38%	~	39%	~	~	~	~	~	42%~	31%~	40%	37%	39%	100%~	~
FEMALE	183	3043	16	40	31	37	44		128						7	34	136	120	54		174
	62%	60%	55%~	69%	65%~	57%	62%	~	61%	~	~	~	~	~	58%~	69%~	60%	63%	61%	~	100%~
VALID CASES	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q54																					
8TH GRADE OR LESS	13	267			2	8	3		2						1	9	4	7	6	4	9
	5%	6%	~	~	4%~	13%*	4%	~	1%*	~	~	~	~	~	8%~	19%~	2%*	4%	7%	4%	5%
SOME HIGH SCHOOL BUT	37	599	8	4	7	8	10		24							12	23	23	13	12	25
DID NOT GRADUATE	13%	13%	28%~	7%	15%~	13%	14%	~	11%	~	~	~	~	~	~	26%~	10%*	12%	15%	11%	14%
HIGH SCHOOL GRADUATE	93	1663	10	24	17	22	16		76						1	12	79	60	33	44	49
OR GED	33%	35%	34%~	41%	35%~	35%	23%*	~	36%	~	~	~	~	~	8%~	26%~	35%	32%	38%	42%*	28%*
SOME COLLEGE OR 2-YEAR	108	1668	10	20	20	18	35		83						8	13	94	74	32	41	67
DEGREE	39%	35%	34%~	34%	42%~	29%*	49%*	~	40%	~	~	~	~	~	67%~	28%~	41%*	39%	36%	39%	39%
4-YEAR COLLEGE GRADUATE	20	348	1	9	2	5	2		18						1	1	19	17	3	4	16
	7%	7%	3%~	16%*	4%~	8%	3%*	~	9%*	~	~	~	~	~	8%~	2%~	8%*	9%*	3%	4%	9%
MORE THAN 4-YEAR	8	201		1		2	5		7						1		8	7	1	1	7
COLLEGE DEGREE	3%	4%	~	2%	~	3%	7%	~	3%	~	~	~	~	~	8%~	~	4%~	4%	1%	0.9%	4%
NOT ANSWERED	16	336				2										2		2	1	1	1
VALID CASES	279	4746	29	58	48	63	71		210						12	47	227	188	88	106	173
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

Q55 ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q55																					
YES HISPANIC OR LATINO	49	571	10	10	7	17	4									49		31	18	15	34
	18%	12%*	34%~	17%	15%~	27%	6%*	~	~	~	~	~	~	~	~	~100%~	~	17%	20%	14%	20%
NO NOT HISPANIC OR LATINO	227	4145	19	48	39	47	65		208						12		227	155	70	91	136
	82%	88%*	66%~	83%	85%~	73%	94%*		~100%~	~	~	~	~	~	~100%~		~100%~	83%	80%	86%	80%
NOT ANSWERED	19	366			2	1	2		2									4	1	1	4
VALID CASES	276	4716	29	58	46	64	69		208						12	49	227	186	88	106	170
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

Q56.1 WHAT IS YOUR RACE? RESPONSE: WHITE

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q56.1																					
YES	241	4120	21	51	42	52	65		210						11	20	219	159	80	91	150
	82%	81%	72%~	88%	88%~	80%	92%*		~100%~	~	~	~	~	~	92%~	41%~	96%*	84%	90%*	85%	86%*
NO	54	962	8	7	6	13	6								1	29	8	31	9	16	24
	18%	19%	28%~	12%	13%~	20%	8%*		~	~	~	~	~	~	8%~	59%~	4%*	16%	10%*	15%	14%*
VALID CASES	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q56.2																					
YES	2	85				2									2		2	2		1	1
	0.7%	2%*	~	~	~	3%	~	~	~	~	~	~	~	~	17%~		~0.9%	1%~		~0.9%	0.6%
NO	293	4997	29	58	48	63	71		210						10	49	225	188	89	106	173
	99%	98%*	100%~	100%~	100%~	97%~	100%~		~100%~	~	~	~	~	~	83%~	100%~	99%	99%	100%~	99%	99%
VALID CASES	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

Q56.3 WHAT IS YOUR RACE? RESPONSE: ASIAN

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q56.3																					
YES	4	136	1	2		1									1		4	4		1	3
	1%	3%*	3%~	3%	~	2%	~	~	~	~	~	~	~	~	8%~	~	2%*	2%~	~	0.9%	2%
NO	291	4946	28	56	48	64	71		210						11	49	223	186	89	106	171
	99%	97%*	97%~	97%	100%~	98%	100%~		~100%~	~	~	~	~	~	92%~	100%~	98%*	98%*	100%~	99%	98%
VALID CASES	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q56.4																					
YES	1	40					1										1		1	1	
	0.3%	0.8%	~	~	~	~	1%	~	~	~	~	~	~	~	~		~0.4%	~	1%	0.9%	~
NO	294	5042	29	58	48	65	70		210						12	49	226	190	88	106	174
	100%	99%	100%~	100%~	100%~	100%~	99%~		~100%~	~	~	~	~		~100%~	100%~	100%	100%~	99%~	99%~	100%~
VALID CASES	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q56.5																					
YES	7	313		1	2	2	2								6	1	6	3	4	3	4
	2%	6%*	~	2%	4%~	3%	3%	~	~	~	~	~	~	~	50%~	2%~	3%	2%	4%	3%	2%
NO	288	4769	29	57	46	63	69		210						6	48	221	187	85	104	170
	98%	94%*	100%~	98%	96%~	97%	97%	~	100%~	~	~	~	~	~	50%~	98%~	97%	98%	96%	97%	98%
VALID CASES	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

Q56.6 WHAT IS YOUR RACE? RESPONSE: OTHER

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q56.6																					
YES	16	278	1	3	3	6	3								8	6	10	11	5	7	9
	5%	5%	3%~	5%	6%~	9%	4%	~	~	~	~	~	~	~	67%~	12%~	4%	6%	6%	7%	5%
NO	279	4804	28	55	45	59	68		210						4	43	217	179	84	100	165
	95%	95%	97%~	95%	94%~	91%	96%		~100%~	~	~	~	~	~	33%~	88%~	96%	94%	94%	93%	95%
VALID CASES	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
NUMBER OF RESPONDENTS	295	5082	29	58	48	65	71		210						12	49	227	190	89	107	174
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

Q57 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q57																					
YES	20	466	2	5	7	3	3		15							5	15	11	9	14	6
	9%	12%	11%~	15%~	20%~	5%	5%	~	9%~	~	~	~	~	~	~	13%~	9%~	8%	13%	16%*	5%*
NO	194	3267	16	28	28	52	61		152						2	33	158	131	60	72	122
	91%	88%	89%~	85%~	80%~	95%	95%	~	91%~	~	~	~	~	~	~100%~	87%~	91%~	92%	87%	84%*	95%*
NOT ANSWERED	3	46				1										1			1		1
VALID CASES	214	3733	18	33	35	55	64		167						2	38	173	142	69	86	128
NUMBER OF RESPONDENTS	217	3779	18	33	35	56	64		167						2	39	173	142	70	86	129
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q58.1																					
YES	10	238	1	1	3	3	2		6							4	6	4	6	7	3
	50%	51%~	50%~	20%~	43%~	100%~	67%~	~	40%~	~	~	~	~	~	~	80%~	40%~	36%~	67%~	50%~	50%~
NO	10	228	1	4	4		1		9							1	9	7	3	7	3
	50%	49%~	50%~	80%~	57%~	~	33%~	~	60%~	~	~	~	~	~	~	20%~	60%~	64%~	33%~	50%~	50%~
VALID CASES	20	466	2	5	7	3	3		15							5	15	11	9	14	6
NUMBER OF RESPONDENTS	20	466	2	5	7	3	3		15							5	15	11	9	14	6
	100%	100%	100%	100%	100%	100%	100%		100%							100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q58.2																					
YES	8	182	2	2	3		1		6							2	6	7	1	7	1
	40%	39%~	100%~	40%~	43%~	~	33%~	~	40%~	~	~	~	~	~	~	40%~	40%~	64%~	11%~	50%~	17%~
NO	12	284		3	4	3	2		9							3	9	4	8	7	5
	60%	61%~	~	60%~	57%~	100%~	67%~	~	60%~	~	~	~	~	~	~	60%~	60%~	36%~	89%~	50%~	83%~
VALID CASES	20	466	2	5	7	3	3		15							5	15	11	9	14	6
NUMBER OF RESPONDENTS	20	466	2	5	7	3	3		15							5	15	11	9	14	6
	100%	100%	100%	100%	100%	100%	100%		100%							100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q58.3																					
YES	6	156		3	3				5							1	5	3	3	3	3
	30%	33%~	~	60%~	43%~	~	~	~	33%~	~	~	~	~	~	~	20%~	33%~	27%~	33%~	21%~	50%~
NO	14	310	2	2	4	3	3		10							4	10	8	6	11	3
	70%	67%~	100%~	40%~	57%~	100%~	100%~		67%~	~	~	~	~	~	~	80%~	67%~	73%~	67%~	79%~	50%~
VALID CASES	20	466	2	5	7	3	3		15							5	15	11	9	14	6
NUMBER OF RESPONDENTS	20	466	2	5	7	3	3		15							5	15	11	9	14	6
	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.

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q58.4																					
YES	2	56				1	1									2		1	1		2
	10%	12%~	~	~	~	33%~	33%~	~	~	~	~	~	~	~	~	40%~	~	9%~	11%~	~	33%~
NO	18	410	2	5	7	2	2		15							3	15	10	8	14	4
	90%	88%~	100%~	100%~	100%~	67%~	67%~		~100%~	~	~	~	~	~	~	60%~	100%~	91%~	89%~	100%~	67%~
VALID CASES	20	466	2	5	7	3	3		15							5	15	11	9	14	6
NUMBER OF RESPONDENTS	20	466	2	5	7	3	3		15							5	15	11	9	14	6
	100%	100%	100%	100%	100%	100%	100%		100%							100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
Q58.5																					
YES	1	39					1		1								1	1		1	
	5%	8%~	~	~	~	~	33%~	~	7%~	~	~	~	~	~	~	~	7%~	9%~	~	7%~	~
NO	19	427	2	5	7	3	2		14							5	14	10	9	13	6
	95%	92%~	100%~	100%~	100%~	100%~	67%~	~	93%~	~	~	~	~	~	~	100%~	93%~	91%~	100%~	93%~	100%~
VALID CASES	20	466	2	5	7	3	3		15							5	15	11	9	14	6
NUMBER OF RESPONDENTS	20	466	2	5	7	3	3		15							5	15	11	9	14	6
	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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
NQ13																					
0-6	34	687	6	7	5	8	4		25						3	4	29	17	16	11	22
	17%	20%	32%~	19%~	17%~	17%~	8%*	~	17%	~	~	~	~	~	43%~	11%~	19%~	14%	24%	16%	18%
7-8	61	1221	3	11	10	18	16		47						2	8	50	45	14	24	36
	31%	35%	16%~	31%~	33%~	38%~	31%	~	33%	~	~	~	~	~	29%~	23%~	32%~	37%*	21%*	35%	29%
9-10	100	1603	10	18	15	22	32		72						2	23	75	61	36	34	65
	51%	46%	53%~	50%~	50%~	46%~	62%	~	50%	~	~	~	~	~	29%~	66%~	49%~	50%	55%	49%	53%
VALID CASES	195	3511	19	36	30	48	52		144						7	35	154	123	66	69	123
NUMBER OF RESPONDENTS	195	3511	19	36	30	48	52		144						7	35	154	123	66	69	123
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%
MEAN	2.34	2.26	2.21	2.31	2.33	2.29	2.54		2.33						1.86	2.54	2.30	2.36	2.30	2.33	2.35
p stat_(*=Sig @ p<=.05)		.145	~	~	~	~	.015*	~	.710	~	~	~	~	~	~	~	~	.644	.642	.945	.788

[ASKED IF Q7 >= 1 TIME]

NQ23 RATING OF PERSONAL DOCTOR

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
NQ23																					
0-6	27	572	2	6	4	3	9		21						2	2	25	18	9	10	17
	13%	15%	10%~	17%~	13%~	7%~	15%	~	13%~	~	~	~	~	~	25%~	6%~	15%~	13%	14%	14%	13%
7-8	40	959	7	11	4	7	9		30						1	7	31	27	12	17	22
	20%	26%*	35%~	31%~	13%~	16%~	15%	~	19%~	~	~	~	~	~	13%~	22%~	19%~	20%	19%	23%	17%
9-10	138	2197	11	19	24	35	42		106						5	23	111	91	43	46	90
	67%	59%*	55%~	53%~	75%~	78%~	70%	~	68%~	~	~	~	~	~	63%~	72%~	66%~	67%	67%	63%	70%
VALID CASES	205	3728	20	36	32	45	60		157						8	32	167	136	64	73	129
NUMBER OF RESPONDENTS	205	3728	20	36	32	45	60		157						8	32	167	136	64	73	129
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%
MEAN	2.54	2.44	2.45	2.36	2.63	2.71	2.55		2.54						2.38	2.66	2.51	2.54	2.53	2.49	2.57
p stat_(*=Sig @ p<=.05)		.036*	~	~	~	~	.913	~	~	~	~	~	~	~	~	~	~	.896	.891	.478	.526

[ASKED IF Q15 = YES]

NQ27 RATING OF SPECIALIST SEEN MOST OFTEN

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
NQ27																					
0-6	14	239		2	2	6	4		10							3	11	6	8	6	8
	13%	13%	~	11%~	20%~	19%~	10%~	~	12%~	~	~	~	~	~	~	18%~	12%~	10%~	17%~	20%~	10%~
7-8	33	475	5	6	1	6	13		27						1	3	29	21	11	8	24
	29%	27%	71%~	33%~	10%~	19%~	33%~	~	32%~	~	~	~	~	~	17%~	18%~	31%~	33%~	24%~	27%~	30%~
9-10	65	1057	2	10	7	19	23		48						5	11	53	36	27	16	49
	58%	60%	29%~	56%~	70%~	61%~	58%~	~	56%~	~	~	~	~	~	83%~	65%~	57%~	57%~	59%~	53%~	60%~
VALID CASES	112	1771	7	18	10	31	40		85						6	17	93	63	46	30	81
NUMBER OF RESPONDENTS	112	1771	7	18	10	31	40		85						6	17	93	63	46	30	81
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%
MEAN	2.46	2.46	2.29	2.44	2.50	2.42	2.47		2.45						2.83	2.47	2.45	2.48	2.41	2.33	2.51
p stat_(*=Sig @ p<=.05)		.921	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

NQ35 RATING OF HEALTH PLAN

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
NQ35																					
0-6	52	953	6	10	8	15	12		39						6	5	47	29	23	19	33
	19%	21%	21%~	18%	17%~	25%	17%	~	19%	~	~	~	~	~	50%~	11%~	21%*	16%	27%*	19%	20%
7-8	98	1522	10	27	17	17	20		78						4	12	83	70	26	32	64
	36%	33%	34%~	49%*	37%~	28%	29%	~	38%	~	~	~	~	~	33%~	26%~	38%	38%	31%	32%	38%
9-10	122	2121	13	18	21	28	38		86						2	29	90	85	36	50	72
	45%	46%	45%~	33%*	46%~	47%	54%	~	42%	~	~	~	~	~	17%~	63%~	41%*	46%	42%	50%	43%
VALID CASES	272	4596	29	55	46	60	70		203						12	46	220	184	85	101	169
NUMBER OF RESPONDENTS	272	4596	29	55	46	60	70		203						12	46	220	184	85	101	169
	100%	100%	100%	100%	100%	100%	100%		100%						100%	100%	100%	100%	100%	100%	100%
MEAN	2.26	2.25	2.24	2.15	2.28	2.22	2.37		2.23						1.67	2.52	2.20	2.30	2.15	2.31	2.23
p stat_(*=Sig @ p<=.05)		.944	~.199		~.659		.149	~	.346	~	~	~	~	~	~	~.003*		.157	.146	.412	.462

GETTING NEEDED CARE

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
NPRBSEE4 NQ46	2.25	2.25	1.71	2.33	2.20	2.12	2.47		2.31						2.14	2.06	2.28	2.38	2.13	2.45	2.18
p stat_(*=Sig @ p<=.05)		.994	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.052	~	~	~
NCARNES4 NQ15	2.27	2.31	2.26	2.11	2.21	2.19	2.50		2.32						1.86	2.26	2.28	2.36	2.12	2.30	2.26
p stat_(*=Sig @ p<=.05)		.478	~	~	~	~	.013*	~	.149	~	~	~	~	~	~	~	~	.036*	.044*	.688	.811
COMPOSITE	2.26	2.28	1.99	2.22	2.20	2.15	2.49	x	2.32	x	x	x	x	x	2.00	2.16	2.28	2.37	2.12	2.38	2.22
p stat_(*=Sig @ p<=.05)		.607	~	~	~	~	.001*	~	.009*	~	~	~	~	~	~	~	~	.000*	.021*	.023*	.214

GETTING CARE QUICKLY

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
NCARSN4 NQ4	2.37	2.40	2.71	2.22	2.35	2.36	2.52		2.36						2.40	2.40	2.37	2.40	2.36	2.34	2.39
p stat_(*=Sig @ p<=.05)		.656	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NAPGET4 NQ6	2.21	2.26	2.00	2.03	2.17	2.21	2.45		2.26						2.40	2.12	2.25	2.29	2.07	2.14	2.25
p stat_(*=Sig @ p<=.05)		.345	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.084	.095	.433	.329
COMPOSITE	2.29	2.33	2.36	2.12	2.26	2.28	2.49	x	2.31	x	x	x	x	x	2.40	2.26	2.31	2.35	2.21	2.24	2.32
p stat_(*=Sig @ p<=.05)		.262	~	~	~	~	~	~	.382	~	~	~	~	~	~	~	~	.067	.163	.406	.284

HOW WELL DOCTORS COMMUNICATE

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
NDREXPL4 NQ32	2.67	2.64	2.78	2.71	2.56	2.64	2.76		2.69						3.00	2.69	2.68	2.76	2.54	2.72	2.66
p stat_(*=Sig @ p<=.05)		.460	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.021*	.065	.477	.666
NDRLSTN4 NQ33	2.66	2.61	2.78	2.61	2.58	2.67	2.74		2.68						2.67	2.74	2.65	2.71	2.58	2.72	2.64
p stat_(*=Sig @ p<=.05)		.258	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.236	.239	.392	.397
NDRESPU4 NQ34	2.69	2.67	2.78	2.68	2.62	2.63	2.80		2.70						3.00	2.81	2.68	2.78	2.56	2.72	2.68
p stat_(*=Sig @ p<=.05)		.590	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.044*	.079	.722	.741
NDRTMEN4 NQ37	2.48	2.52	2.61	2.18	2.46	2.53	2.65		2.54						2.00	2.41	2.52	2.53	2.44	2.52	2.48
p stat_(*=Sig @ p<=.05)		.432	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.195	.621	.585	1.00
COMPOSITE	2.63	2.61	2.74	2.54	2.55	2.62	2.74	x	2.65	x	x	x	x	x	2.67	2.66	2.63	2.70	2.53	2.67	2.61
p stat_(*=Sig @ p<=.05)		.657	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.056	.149	.495	.668

CUSTOMER SERVICE

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
NPBCLCS4 NQ50	2.38	2.30	2.14	2.29	2.57	2.50	2.44		2.46						2.40	1.90	2.46	2.54	2.00	2.41	2.36
p stat_(*=Sig @ p<=.05)		.397	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ51	2.69	2.69	2.57	2.65	3.00	2.81	2.65		2.71						3.00	2.40	2.75	2.76	2.53	2.82	2.63
p stat_(*=Sig @ p<=.05)		1.00	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.54	2.50	2.36	2.47	2.79	2.66	2.55	x	2.59	x	x	x	x	x	2.70	2.15	2.60	2.65	2.26	2.61	2.50
p stat_(*=Sig @ p<=.05)		.596	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
NNRXWHY NQ11	2.92	2.87	3.00	2.86	2.88	2.86	3.00		2.92						3.00	2.80	2.93	2.92	2.90	2.88	2.94
p stat_(*=Sig @ p<=.05)		.289	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NNRXWYNT NQ12	2.54	2.49	2.11	2.43	2.76	2.50	2.62		2.58						2.60	2.20	2.57	2.67	2.33	2.59	2.50
p stat_(*=Sig @ p<=.05)		.586	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NRXBST NQ13	2.66	2.53	2.11	2.71	2.88	2.71	2.54		2.67						3.00	2.40	2.68	2.74	2.52	2.71	2.63
p stat_(*=Sig @ p<=.05)		.135	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.70	2.63	2.41	2.67	2.84	2.69	2.72	x	2.72	x	x	x	x	x	2.87	2.47	2.73	2.78	2.59	2.73	2.69
p stat_(*=Sig @ p<=.05)		.178	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

	BANTO T1	BANTO T2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
PRBSEE4 Q25	77%	77%	43%	78%	70%	76%	88%		78%						71%	82%	77%	83%	72%	84%	76%
CARNES4 Q14	81%	82%	79%	74%	79%	83%	85%		83%						57%	85%	80%	86%	73%	83%	80%
AVERAGE	79.01	79.43	60.90	76.03	74.66	79.55	86.06	x	80.21	x	x	x	x	x	64.29	83.82	78.62	84.38	72.53	83.24	77.89

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

	BANTO T1	BANTO T2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
CARSN4 Q4	82%	83%	100%	70%	80%	86%	90%		82%						80%	87%	82%	84%	81%	81%	83%
APGET4 Q6	77%	78%	61%	71%	74%	81%	86%		81%						80%	71%	80%	81%	71%	74%	79%
AVERAGE	79.39	80.38	80.56	70.50	76.96	83.55	88.10	x	81.23	x	x	x	x	x	80.00	78.63	80.74	82.67	76.07	77.47	80.94

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

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
DREXPL4 Q17	93%	92%	94%	96%	84%	95%	93%		92%						100%	100%	92%	95%	89%	93%	92%
DRLSTN4 Q18	93%	90%	94%	96%	88%	95%	91%		92%						100%	100%	91%	96%	86%	95%	92%
DRESPU4 Q19	91%	91%	94%	93%	85%	93%	91%		91%						100%	100%	90%	95%	84%	93%	90%
DRTMEN4 Q20	88%	88%	94%	75%	88%	93%	91%		89%						67%	93%	88%	91%	84%	87%	89%
AVERAGE	91.2	90.3	94.4	90.2	86.4	93.7	91.8	x	91.0	x	x	x	x	x	91.7	98.1	90.1	94.4	86.0	92.1	90.6

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

	BANTO T1	BANTO T2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
PBCLCS4 Q31	82%	80%	71%	76%	100%	88%	83%		84%						80%	70%	84%	89%	65%	82%	82%
CSRESP Q32	95%	94%	100%	94%	100%	100%	94%		94%						100%	100%	95%	98%	89%	95%	95%
AVERAGE	88.60	86.67	85.71	85.29	100.0	93.75	88.73	x	88.94	x	x	x	x	x	90.00	85.00	89.24	93.48	77.24	88.64	88.58

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE						RACE							ETHNIC-ITY		HEALTH STATUS		GENDER	
	YCCO TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER ##	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE
NRXWHY Q10	96%	93%	100%	93%	94%	93%	100%		96%						100%	90%	97%	96%	95%	94%	97%
NRXWYNT Q11	77%	74%	56%	71%	88%	75%	81%		79%						80%	60%	78%	83%	67%	79%	75%
RXBST Q12	83%	77%	56%	86%	94%	86%	77%		84%						100%	70%	84%	87%	76%	85%	81%
AVERAGE	85.2	81.5	70.4	83.3	92.0	84.5	85.9	x	86.2	x	x	x	x	x	93.3	73.3	86.4	88.9	79.4	86.3	84.4

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q1																			
YES	302	5277	44	77	96	85	115						17	132	142	265	8	244	58
	100%	100%	~100%	~100%	~100%	~100%	~100%	~	~	~	~		~100%	~100%	~100%	~100%	~100%	~100%	~100%
NOT ANSWERED	2	32			1	1								2		1	1	1	1
VALID CASES	302	5277	44	77	96	85	115						17	132	142	265	8	244	58
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q3																			
YES	92	1639	21	19	28	24	42						8	31	54	84	3	68	24
	31%	32%	50%~	25%	30%	29%	37%	~	~	~	~	~	47%~	24%*	38%*	32%~	33%~	29%	41%
NO	203	3549	21	56	66	60	73						9	100	88	181	6	168	35
	69%	68%	50%~	75%	70%	71%	63%	~	~	~	~	~	53%~	76%*	62%*	68%~	67%~	71%	59%
NOT ANSWERED	9	121	2	2	3	2								3		1		9	
VALID CASES	295	5188	42	75	94	84	115						17	131	142	265	9	236	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q4																			
NEVER	1	19			1		1								1	1			1
	1%	1%	~	~	4%~	~	3%~	~	~	~	~	~	~	~	2%~	1%~	~	~	4%
SOMETIMES	4	114	1	1		2	3							1	3	3	1	3	1
	5%	7%	5%~	6%~	~	10%~	8%~	~	~	~	~	~	~	3%~	6%~	4%~	33%~	5%~	4%
USUALLY	11	272	2	1	4	4	6						1	3	8	11		6	5
	13%	18%	11%~	6%~	15%~	19%~	16%~	~	~	~	~	~	13%~	10%~	16%~	14%~	~	10%~	22%
ALWAYS	69	1135	16	16	22	15	28						7	25	38	63	2	53	16
	81%	74%	84%~	89%~	81%~	71%~	74%~	~	~	~	~	~	88%~	86%~	76%~	81%~	67%~	85%~	70%
#ALWAYS + USUALLY (NET)	80	1407	18	17	26	19	34						8	28	46	74	2	59	21
	94%	91%	95%~	94%~	96%~	90%~	89%~	~	~	~	~	~	~100%~	97%~	92%~	95%~	67%~	95%~	91%
TOP BOX SCORE	69	1135	16	16	22	15	28						7	25	38	63	2	53	16
	81%	74%	84%~	89%~	81%~	71%~	74%~	~	~	~	~	~	88%~	86%~	76%~	81%~	67%~	85%~	70%
NOT ANSWERED	7	99	2	1	1	3	4							2	4	6		6	1
VALID CASES	85	1540	19	18	27	21	38						8	29	50	78	3	62	23
NUMBER OF RESPONDENTS	92	1639	21	19	28	24	42						8	31	54	84	3	68	24
	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?

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q5																			
YES	196	3464	33	42	58	63	80						13	85	100	174	9	148	48
	66%	67%	77%~	57%	61%	74%	70%	~	~	~	~	~	76%~	64%	70%	66%~	100%~	62%*	81%
NO	101	1672	10	32	37	22	35						4	48	42	91		90	11
	34%	33%	23%~	43%	39%	26%	30%	~	~	~	~	~	24%~	36%	30%	34%~	~	38%*	19%
NOT ANSWERED	7	173	1	3	2	1								1		1		7	
VALID CASES	297	5136	43	74	95	85	115						17	133	142	265	9	238	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q6																			
NEVER	5	57		3	1	1	4							1	4	5		3	2
	3%	2%	~	8%~	2%	2%	5%	~	~	~	~	~	~	1%	4%	3%~	~	2%~	4%
SOMETIMES	33	393	2	7	10	14	12						3	14	17	29	1	28	5
	18%	12%*	7%~	18%~	18%	24%	16%	~	~	~	~	~	23%~	17%	18%	18%~	11%~	20%~	11%
USUALLY	47	850	6	9	13	19	20						4	20	25	41	4	32	15
	25%	26%	20%~	23%~	23%	32%	27%	~	~	~	~	~	31%~	25%	27%	25%~	44%~	23%~	33%
ALWAYS	100	1954	22	21	32	25	37						6	46	47	89	4	77	23
	54%	60%	73%~	53%~	57%	42%*	51%	~	~	~	~	~	46%~	57%	51%	54%~	44%~	55%~	51%
#ALWAYS + USUALLY (NET)	147	2804	28	30	45	44	57						10	66	72	130	8	109	38
	79%	86%*	93%~	75%~	80%	75%	78%	~	~	~	~	~	77%~	81%	77%	79%~	89%~	78%~	84%
TOP BOX SCORE	100	1954	22	21	32	25	37						6	46	47	89	4	77	23
	54%	60%	73%~	53%~	57%	42%*	51%	~	~	~	~	~	46%~	57%	51%	54%~	44%~	55%~	51%
NOT ANSWERED	11	210	3	2	2	4	7							4	7	10		8	3
VALID CASES	185	3254	30	40	56	59	73						13	81	93	164	9	140	45
NUMBER OF RESPONDENTS	196	3464	33	42	58	63	80						13	85	100	174	9	148	48
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q5 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q7																			
NONE	90	1484	7	26	29	28	26						4	50	34	84		75	15
	32%	30%	17%~	37%	32%	35%	23%*	~	~	~	~	~	25%~	40%*	24%*	33%~	~	33%	26%
1 TIME	82	1437	9	20	27	26	37						5	32	46	77	1	71	11
	29%	29%	21%~	28%	29%	33%	32%	~	~	~	~	~	31%~	26%	33%	30%~	14%~	31%	19%
2	61	1045	19	14	17	11	33						4	18	37	52	2	47	14
	21%	21%	45%~	20%	18%	14%*	29%*	~	~	~	~	~	25%~	14%*	26%*	20%~	29%~	21%	25%
3	22	518	6	3	8	5	9						2	10	10	21		20	2
	8%	10%	14%~	4%	9%	6%	8%	~	~	~	~	~	13%~	8%	7%	8%~	~	9%	4%
4	11	229	1	4	6		1							8	3	10	1	7	4
	4%	5%	2%~	6%	7%		~0.9%*	~	~	~	~	~	~	6%	2%	4%~	14%~	3%	7%
5 TO 9	14	232		2	4	8	5						1	6	7	10	3	5	9
	5%	5%	~	3%	4%	10%*	4%	~	~	~	~	~	6%~	5%	5%	4%~	43%~	2%*	16%
10 OR MORE TIMES	5	79		2	1	2	3							1	3	4		3	2
	2%	2%	~	3%	1%	3%	3%	~	~	~	~	~	~	~0.8%	2%	2%~	~	1%	4%
NOT ANSWERED	19	285	2	6	5	6	1						1	9	2	8	2	17	2
VALID CASES	285	5024	42	71	92	80	114						16	125	140	258	7	228	57
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q8																			
#YES	136	2500	25	32	36	43	66						8	51	78	125	5	102	34
	72%	72%	76%~	74%~	60%*	83%*	80%*	~	~	~	~	~	67%~	68%	77%	74%~	71%~	68%~	87%
NO	52	975	8	11	24	9	17						4	24	23	44	2	47	5
	28%	28%	24%~	26%~	40%*	17%*	20%*	~	~	~	~	~	33%~	32%	23%	26%~	29%~	32%~	13%
NOT ANSWERED	7	65	2	2	3		5								5	5		4	3
VALID CASES	188	3475	33	43	60	52	83						12	75	101	169	7	149	39
NUMBER OF RESPONDENTS	195	3540	35	45	63	52	88						12	75	106	174	7	153	42
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q9																			
NEVER	1	83		1			1								1	1		1	
	0.5%	2%*	~	2%~	~	~	1%~	~	~	~	~	~	~	~	1%~	0.6%~		~0.7%~	
SOMETIMES	15	254	2	4	6	3	7						2	4	9	13		12	3
	8%	7%	6%~	10%~	10%	6%	8%	~	~	~	~	~	17%~	5%	9%	8%~	~	8%~	8%
USUALLY	44	708	7	9	14	14	18						3	18	23	39	2	35	9
	24%	20%	21%~	21%~	23%	27%	21%	~	~	~	~	~	25%~	24%	23%	23%~	29%~	24%~	23%
ALWAYS	127	2421	25	28	40	34	58						7	53	69	117	5	99	28
	68%	70%	74%~	67%~	67%	67%	69%	~	~	~	~	~	58%~	71%	68%	69%~	71%~	67%~	70%
#ALWAYS + USUALLY (NET)	171	3129	32	37	54	48	76						10	71	92	156	7	134	37
	91%	90%	94%~	88%~	90%	94%	90%	~	~	~	~	~	83%~	95%	90%	92%~	100%~	91%~	93%
TOP BOX SCORE	127	2421	25	28	40	34	58						7	53	69	117	5	99	28
	68%	70%	74%~	67%~	67%	67%	69%	~	~	~	~	~	58%~	71%	68%	69%~	71%~	67%~	70%
NOT ANSWERED	8	74	1	3	3	1	4								4	4		6	2
VALID CASES	187	3466	34	42	60	51	84						12	75	102	170	7	147	40
NUMBER OF RESPONDENTS	195	3540	35	45	63	52	88						12	75	106	174	7	153	42
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q10																			
YES	52	1023	8	13	16	15	24						4	17	31	45	3	36	16
	28%	30%	24%~	30%~	27%	30%	28%	~	~	~	~	~	33%~	23%	30%	26%~	50%~	24%~	41%
NO	135	2434	26	30	44	35	61						8	57	72	126	3	112	23
	72%	70%	76%~	70%~	73%	70%	72%	~	~	~	~	~	67%~	77%	70%	74%~	50%~	76%~	59%
NOT ANSWERED	8	83	1	2	3	2	3							1	3	3	1	5	3
VALID CASES	187	3457	34	43	60	50	85						12	74	103	171	6	148	39
NUMBER OF RESPONDENTS	195	3540	35	45	63	52	88						12	75	106	174	7	153	42
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q11																			
#YES	49	937	7	13	14	15	23						4	15	30	42	3	34	15
	94%	94%	88%~	100%~	88%~	100%~	96%~	~	~	~	~		~100%~	88%~	97%~	93%~	100%~	94%~	94%
NO	3	63	1		2		1							2	1	3		2	1
	6%	6%	13%~	~	13%~	~	4%~	~	~	~	~	~	~	12%~	3%~	7%~	~	6%~	6%
NOT ANSWERED		23																	
VALID CASES	52	1000	8	13	16	15	24						4	17	31	45	3	36	16
NUMBER OF RESPONDENTS	52	1023	8	13	16	15	24						4	17	31	45	3	36	16
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q12																			
#YES	33	709	3	6	10	14	14						2	12	18	28	2	22	11
	66%	71%	43%~	46%~	67%~	93%~	58%~	~	~	~	~	~	50%~	80%~	58%~	65%~	67%~	65%~	69%
NO	17	290	4	7	5	1	10						2	3	13	15	1	12	5
	34%	29%	57%~	54%~	33%~	7%~	42%~	~	~	~	~	~	50%~	20%~	42%~	35%~	33%~	35%~	31%
NOT ANSWERED	2	24	1		1									2		2		2	
VALID CASES	50	999	7	13	15	15	24						4	15	31	43	3	34	16
NUMBER OF RESPONDENTS	52	1023	8	13	16	15	24						4	17	31	45	3	36	16
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q13																			
#YES	46	780	7	10	15	14	21						2	16	26	39	3	31	15
	90%	79%*	88%~	77%~	100%~	93%~	88%~	~	~	~	~	~	50%~	100%~	84%~	89%~	100%~	89%~	94%
NO	5	209	1	3		1	3						2		5	5		4	1
	10%	21%*	13%~	23%~	~	7%~	13%~	~	~	~	~	~	50%~	~	16%~	11%~	~	11%~	6%
NOT ANSWERED	1	34			1									1		1		1	
VALID CASES	51	989	8	13	15	15	24						4	16	31	44	3	35	16
NUMBER OF RESPONDENTS	52	1023	8	13	16	15	24						4	17	31	45	3	36	16
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q14 WORST HEALTH CARE POSSIBLE	2	12		1	1		2								2	2		2	
	1%	0.3%	~	2%~	2%	~	2%	~	~	~	~	~	~	~	2%	1%~	~	1%~	
01	1	10			1		1								1	1			1
	0.5%	0.3%	~	~	2%	~	1%	~	~	~	~	~	~	~	1%	0.6%~	~	~	3%
02		13																	
		0.4%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
03	1	13				1	1								1	1		1	
	0.5%	0.4%	~	~	~	2%~	1%	~	~	~	~	~	~	~	1%	0.6%~	~	0.7%~	
04	5	22	1	1	1	2	3						1	1	3	5		4	1
	3%	0.6%	3%~	2%~	2%	4%~	4%	~	~	~	~	~	8%~	1%	3%	3%~	~	3%~	3%
05	6	111		3	3		3							2	3	5		6	
	3%	3%	~	7%~	5%	~	4%	~	~	~	~	~	~	3%	3%	3%~	~	4%~	
06	3	105	1		2		1							1	2	3		3	
	2%	3%	3%~	~	3%	~	1%	~	~	~	~	~	~	1%	2%	2%~	~	2%~	
07	12	269	2	2	2	6	5						3	3	8	10	1	9	3
	6%	8%	6%~	5%~	3%	12%~	6%	~	~	~	~	~	25%~	4%	8%	6%~	14%~	6%~	8%
08	31	725	7	6	8	10	23							6	23	28	1	22	9
	17%	21%	21%~	14%~	13%	20%~	27%*	~	~	~	~	~	~	8%*	23%*	17%~	14%~	15%~	23%
09	51	742	6	11	20	14	21						2	26	24	48	2	39	12
	27%	21%	18%~	26%~	33%	29%~	25%	~	~	~	~	~	17%~	35%	24%	28%~	29%~	27%~	31%
BEST HEALTH CARE POSSIBLE	74	1438	17	19	22	16	24						6	35	35	66	3	61	13
	40%	42%	50%~	44%~	37%	33%~	29%*	~	~	~	~	~	50%~	47%	34%	39%~	43%~	41%~	33%
#8-10 (NET)	156	2905	30	36	50	40	68						8	67	82	142	6	122	34
	84%	84%	88%~	84%~	83%	82%~	81%	~	~	~	~	~	67%~	91%*	80%	84%~	86%~	83%~	87%

Continued

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
9-10 (NET)	125	2180	23	30	42	30	45						8	61	59	114	5	100	25
	67%	63%	68%~	70%~	70%	61%~	54%*	~	~	~	~	~	67%~	82%*	58%*	67%~	71%~	68%~	64%
NOT ANSWERED	9	80	1	2	3	3	4							1	4	5		6	3
VALID CASES	186	3460	34	43	60	49	84						12	74	102	169	7	147	39
NUMBER OF RESPONDENTS	195	3540	35	45	63	52	88						12	75	106	174	7	153	42
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%
MEAN	8.62	8.70	8.94	8.60	8.50	8.55	8.15						8.58	9.09	8.32	8.60	9.00	8.62	8.62
p stat_(*=Sig @ p<=.05)		.553	~	~.576		~	.003*	~	~	~	~	~	~	.002*	.013*	~	~	~	

[ASKED IF Q7 >= 1]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q15																			
NEVER	4	57	1	2		1	2							2	2	4		4	
	2%	2%	3%~	5%~	~	2%	2%	~	~	~	~	~	~	3%	2%	2%~	~	3%~	
SOMETIMES	27	311	3	6	11	7	16						1	7	19	25	1	19	8
	15%	9%*	9%~	14%~	18%	14%	19%	~	~	~	~	~	8%~	9%	19%	15%~	14%~	13%~	20%
USUALLY	56	1019	11	8	18	19	25						4	23	30	50	3	45	11
	30%	29%	33%~	19%~	30%	37%	30%	~	~	~	~	~	33%~	31%	29%	29%~	43%~	31%~	28%
ALWAYS	99	2073	18	26	31	24	41						7	43	51	91	3	78	21
	53%	60%	55%~	62%~	52%	47%	49%	~	~	~	~	~	58%~	57%	50%	54%~	43%~	53%~	53%
#ALWAYS + USUALLY (NET)	155	3092	29	34	49	43	66						11	66	81	141	6	123	32
	83%	89%*	88%~	81%~	82%	84%	79%	~	~	~	~	~	92%~	88%	79%	83%~	86%~	84%~	80%
TOP BOX SCORE	99	2073	18	26	31	24	41						7	43	51	91	3	78	21
	53%	60%	55%~	62%~	52%	47%	49%	~	~	~	~	~	58%~	57%	50%	54%~	43%~	53%~	53%
NOT ANSWERED	9	80	2	3	3	1	4								4	4		7	2
VALID CASES	186	3460	33	42	60	51	84						12	75	102	170	7	146	40
NUMBER OF RESPONDENTS	195	3540	35	45	63	52	88						12	75	106	174	7	153	42
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q16																			
YES	211	3801	12	57	74	68	90						17	86	112	193	7	160	51
	73%	75%	29%~	80%	79%	83%*	78%	~	~	~	~		~100%~	66%*	79%*	73%~	78%~	70%*	86%
NO	78	1296	30	14	20	14	25							45	30	71	2	70	8
	27%	25%	71%~	20%	21%	17%*	22%	~	~	~	~	~	~	34%*	21%*	27%~	22%~	30%*	14%
NOT ANSWERED	15	212	2	6	3	4								3		2		15	
VALID CASES	289	5097	42	71	94	82	115						17	131	142	264	9	230	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q17																			
YES	24	409	3	6	9	6	13						1	9	13	20	3	11	13
	12%	11%	27%~	11%	13%	9%	15%	~	~	~	~	~	6%~	11%	12%	11%~	50%~	7%~	27%
NO	181	3206	8	50	62	61	76						15	73	97	168	3	145	36
	88%	89%	73%~	89%	87%	91%	85%	~	~	~	~	~	94%~	89%	88%	89%~	50%~	93%~	73%
NOT ANSWERED	6	186	1	1	3	1	1						1	4	2	5	1	4	2
VALID CASES	205	3615	11	56	71	67	89						16	82	110	188	6	156	49
NUMBER OF RESPONDENTS	211	3801	12	57	74	68	90						17	86	112	193	7	160	51
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q16 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q18																			
#YES	18	369	3	6	3	6	9						1	7	9	15	2	9	9
	78%	92%~	100%~	100%~	38%~	100%~	75%~	~	~	~	~		~100%~	78%~	75%~	79%~	67%~	82%~	75%
NO	5	30			5		3							2	3	4	1	2	3
	22%	8%~	~	~	63%~	~	25%~	~	~	~	~	~	~	22%~	25%~	21%~	33%~	18%~	25%
NOT ANSWERED	1	10			1		1								1	1			1
VALID CASES	23	399	3	6	8	6	12						1	9	12	19	3	11	12
NUMBER OF RESPONDENTS	24	409	3	6	9	6	13						1	9	13	20	3	11	13
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q16 = YES AND Q17 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q19																			
YES	8	214	2	2	3	1	2						2	4	4	7	1	6	2
	3%	4%	5%~	3%	3%	1%	2%	~	~	~	~	~	12%~	3%	3%	3%~	11%~	3%	3%
NO	279	4864	40	68	89	82	111						15	129	136	257	8	223	56
	97%	96%	95%~	97%	97%	99%	98%	~	~	~	~	~	88%~	97%	97%	97%~	89%~	97%	97%
NOT ANSWERED	17	231	2	7	5	3	2							1	2	2		16	1
VALID CASES	287	5078	42	70	92	83	113						17	133	140	264	9	229	58
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q20																			
NEVER		21																	
		10%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	1	30	1											1		1		1	
	13%	14%~	50%~	~	~	~	~	~	~	~	~	~	~	25%~	~	14%~	~	17%~	
USUALLY	3	46	1		1	1	1						2		3	3		2	1
	38%	22%~	50%~	~	33%~	100%~	50%~	~	~	~	~	~	100%~	~	75%~	43%~	~	33%~	50%
ALWAYS	4	113		2	2		1							3	1	3	1	3	1
	50%	54%~	~	100%~	67%~	~	50%~	~	~	~	~	~	~	75%~	25%~	43%~	100%~	50%~	50%
#ALWAYS + USUALLY (NET)	7	159	1	2	3	1	2						2	3	4	6	1	5	2
	88%	76%~	50%~	100%~	100%~	100%~	100%~	~	~	~	~	~	100%~	75%~	100%~	86%~	100%~	83%~	100%
TOP BOX SCORE	4	113		2	2		1							3	1	3	1	3	1
	50%	54%~	~	100%~	67%~	~	50%~	~	~	~	~	~	~	75%~	25%~	43%~	100%~	50%~	50%
NOT ANSWERED		4																	
VALID CASES	8	210	2	2	3	1	2						2	4	4	7	1	6	2
NUMBER OF RESPONDENTS	8	214	2	2	3	1	2						2	4	4	7	1	6	2
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q19 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q21																			
#YES	6	170	1	2	3		2						1	3	3	5	1	4	2
	75%	83%~	50%~	100%~	100%~		~100%~	~	~	~	~	~	~ 50%~	75%~	75%~	71%~	100%~	67%~	100%
NO	2	36	1			1							1	1	1	2		2	
	25%	17%~	50%~	~		~100%~	~	~	~	~	~	~	~ 50%~	25%~	25%~	29%~	~	33%~	
NOT ANSWERED		8																	
VALID CASES	8	206	2	2	3	1	2						2	4	4	7	1	6	2
NUMBER OF RESPONDENTS	8	214	2	2	3	1	2						2	4	4	7	1	6	2
	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?

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q22																			
YES	27	522	3	6	9	9	9							15	10	21	4	9	18
	9%	10%	7%~	9%	10%	11%	8%	~	~	~	~	~	~	11%	7%	8%~	44%~	4%*	31%
NO	259	4555	39	64	82	74	105						17	118	131	244	5	219	40
	91%	90%	93%~	91%	90%	89%	92%	~	~	~	~	~	~100%~	89%	93%	92%~	56%~	96%*	69%
NOT ANSWERED	18	232	2	7	6	3	1							1	1	1		17	1
VALID CASES	286	5077	42	70	91	83	114						17	133	141	265	9	228	58
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q23																			
NEVER	2	63		1	1		1							1	1	2		1	1
	7%	13%~	~	17%~	11%~	~	11%~	~	~	~	~	~	~	7%~	10%~	10%~	~	11%~	6%
SOMETIMES	2	78			1	1	1							1	1		2		2
	7%	16%~	~	~	11%~	11%~	11%~	~	~	~	~	~	~	7%~	10%~	~	50%~	~	11%
USUALLY	10	122	1	1	3	5	4							4	5	8	1	3	7
	37%	24%~	33%~	17%~	33%~	56%~	44%~	~	~	~	~	~	~	27%~	50%~	38%~	25%~	33%~	39%
ALWAYS	13	236	2	4	4	3	3							9	3	11	1	5	8
	48%	47%~	67%~	67%~	44%~	33%~	33%~	~	~	~	~	~	~	60%~	30%~	52%~	25%~	56%~	44%
#ALWAYS + USUALLY (NET)	23	358	3	5	7	8	7							13	8	19	2	8	15
	85%	72%~	100%~	83%~	78%~	89%~	78%~	~	~	~	~	~	~	87%~	80%~	90%~	50%~	89%~	83%
TOP BOX SCORE	13	236	2	4	4	3	3							9	3	11	1	5	8
	48%	47%~	67%~	67%~	44%~	33%~	33%~	~	~	~	~	~	~	60%~	30%~	52%~	25%~	56%~	44%
NOT ANSWERED		23																	
VALID CASES	27	499	3	6	9	9	9							15	10	21	4	9	18
NUMBER OF RESPONDENTS	27	522	3	6	9	9	9							15	10	21	4	9	18
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q22 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q24																			
#YES	22	347	2	4	7	9	7							13	8	17	4	6	16
	81%	69%~	67%~	67%~	78%~	100%~	78%~	~	~	~	~	~	~	87%~	80%~	81%~	100%~	67%~	89%
NO	5	153	1	2	2		2							2	2	4		3	2
	19%	31%~	33%~	33%~	22%~	~	22%~	~	~	~	~	~	~	13%~	20%~	19%~	~	33%~	11%
NOT ANSWERED		22																	
VALID CASES	27	500	3	6	9	9	9							15	10	21	4	9	18
NUMBER OF RESPONDENTS	27	522	3	6	9	9	9							15	10	21	4	9	18
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q22 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q25																			
YES	41	769	2	8	11	20	24						3	12	28	37	3	12	29
	14%	15%	5%~	11%	12%	25%*	21%*	~	~	~	~	~	18%~	9%*	20%*	14%~	33%~	5%*	50%
NO	244	4303	40	63	80	61	90						14	120	113	227	6	215	29
	86%	85%	95%~	89%	88%	75%*	79%*	~	~	~	~	~	82%~	91%*	80%*	86%~	67%~	95%*	50%
NOT ANSWERED	19	237	2	6	6	5	1							2	1	2		18	1
VALID CASES	285	5072	42	71	91	81	114						17	132	141	264	9	227	58
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q26																			
NEVER	4	94		1	3		3							1	3	4		1	3
	10%	13%~	~	14%~	30%~	~	13%~	~	~	~	~	~	~	8%~	12%~	11%~	~	9%~	11%
SOMETIMES	5	122	1	2		2	2						2	1	4	5		1	4
	13%	16%~	50%~	29%~	~	10%~	9%~	~	~	~	~	~	100%~	8%~	15%~	14%~	~	9%~	14%
USUALLY	11	178		2	1	8	10							1	10	8	3	1	10
	28%	24%~	~	29%~	10%~	40%~	43%~	~	~	~	~	~	~	8%~	38%~	23%~	100%~	9%~	36%
ALWAYS	19	353	1	2	6	10	8							9	9	18		8	11
	49%	47%~	50%~	29%~	60%~	50%~	35%~	~	~	~	~	~	~	75%~	35%~	51%~	~	73%~	39%
#ALWAYS + USUALLY (NET)	30	531	1	4	7	18	18							10	19	26	3	9	21
	77%	71%~	50%~	57%~	70%~	90%~	78%~	~	~	~	~	~	~	83%~	73%~	74%~	100%~	82%~	75%
TOP BOX SCORE	19	353	1	2	6	10	8							9	9	18		8	11
	49%	47%~	50%~	29%~	60%~	50%~	35%~	~	~	~	~	~	~	75%~	35%~	51%~	~	73%~	39%
NOT ANSWERED	2	22		1	1		1						1		2	2		1	1
VALID CASES	39	747	2	7	10	20	23						2	12	26	35	3	11	28
NUMBER OF RESPONDENTS	41	769	2	8	11	20	24						3	12	28	37	3	12	29
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q27																			
#YES	23	428	1	5	4	13	14							8	14	19	3	7	16
	61%	57%~	50%~	63%~	40%~	72%~	61%~	~	~	~	~	~	~	73%~	54%~	56%~	100%~	58%~	62%
NO	15	317	1	3	6	5	9						2	3	12	15		5	10
	39%	43%~	50%~	38%~	60%~	28%~	39%~	~	~	~	~		~100%~	27%~	46%~	44%~	~	42%~	38%
NOT ANSWERED	3	24			1	2	1						1	1	2	3			3
VALID CASES	38	745	2	8	10	18	23						2	11	26	34	3	12	26
NUMBER OF RESPONDENTS	41	769	2	8	11	20	24						3	12	28	37	3	12	29
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q28																			
YES	61	1124	7	13	22	19	32						6	16	41	53	4	33	28
	22%	22%	17%~	19%	24%	23%	29%*	~	~	~	~	~	35%~	12%*	29%*	20%~	50%~	15%*	50%
NO	222	3915	35	56	69	62	80						11	115	98	209	4	194	28
	78%	78%	83%~	81%	76%	77%	71%*	~	~	~	~	~	65%~	88%*	71%*	80%~	50%~	85%*	50%
NOT ANSWERED	21	270	2	8	6	5	3							3	3	4	1	18	3
VALID CASES	283	5039	42	69	91	81	112						17	131	139	262	8	227	56
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q29																			
#YES	34	673	1	9	12	12	19						3	9	23	29	3	16	18
	56%	62%	14%~	69%~	55%~	63%~	59%~	~	~	~	~	~	50%~	56%~	56%~	55%~	75%~	48%~	64%
NO	27	416	6	4	10	7	13						3	7	18	24	1	17	10
	44%	38%	86%~	31%~	45%~	37%~	41%~	~	~	~	~	~	50%~	44%~	44%~	45%~	25%~	52%~	36%
NOT ANSWERED		35																	
VALID CASES	61	1089	7	13	22	19	32						6	16	41	53	4	33	28
NUMBER OF RESPONDENTS	61	1124	7	13	22	19	32						6	16	41	53	4	33	28
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q30																			
YES	250	4437	38	61	84	67	99						14	117	121	228	9	195	55
	89%	89%	90%~	92%	90%	83%	90%	~	~	~	~	~	82%~	88%	88%	88%~	100%~	87%*	95%
NO	32	550	4	5	9	14	11						3	16	16	32		29	3
	11%	11%	10%~	8%	10%	17%	10%	~	~	~	~	~	18%~	12%	12%	12%~	~	13%*	5%
NOT ANSWERED	22	322	2	11	4	5	5							1	5	6		21	1
VALID CASES	282	4987	42	66	93	81	110						17	133	137	260	9	224	58
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q31																			
NONE	60	1154	4	19	25	12	26						1	28	28	57		52	8
	25%	27%	11%~	31%	32%	18%	27%	~	~	~	~	~	8%~	25%	24%	26%~	~	28%*	15%
1 TIME	91	1496	10	22	28	31	40						5	39	49	84	3	72	19
	38%	35%	26%~	36%	36%	48%	41%	~	~	~	~	~	38%~	35%	42%	38%~	43%~	38%	36%
2	47	893	17	11	11	8	16						3	24	19	42	1	41	6
	20%	21%	45%~	18%	14%	12%	16%	~	~	~	~	~	23%~	22%	16%	19%~	14%~	22%*	11%
3	22	389	6	2	8	6	9						2	10	11	20	1	15	7
	9%	9%	16%~	3%*	10%	9%	9%	~	~	~	~	~	15%~	9%	9%	9%~	14%~	8%	13%
4	12	157	1	5	3	3	2						2	7	5	11	1	4	8
	5%	4%	3%~	8%	4%	5%	2%	~	~	~	~	~	15%~	6%	4%	5%~	14%~	2%*	15%
5 TO 9	7	138		1	2	4	3							2	5	6	1	3	4
	3%	3%	~	2%	3%	6%	3%	~	~	~	~	~	~	2%	4%	3%~	14%~	2%	8%
10 OR MORE TIMES	2	34		1		1	1							1	1	2		1	1
	0.8%	0.8%	~	2%	~	2%	1%	~	~	~	~	~	~	0.9%	0.8%	0.9%~	~	0.5%	2%
NOT ANSWERED	9	176			7	2	2						1	6	3	6	2	7	2
VALID CASES	241	4261	38	61	77	65	97						13	111	118	222	7	188	53
NUMBER OF RESPONDENTS	250	4437	38	61	84	67	99						14	117	121	228	9	195	55
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q31A																			
ALWAYS	5	65	1	2	2		1							3	1	4		5	
	3%	2%	3%~	5%~	4%	~	1%	~	~	~	~	~	~	4%	1%	2%~	~	4%~	
USUALLY	2	49		1		1								1	1	2		1	1
	1%	2%	~	2%~	~	2%	~	~	~	~	~	~	~	1%	1%	1%~	~	0.7%~	2%
SOMETIMES	13	202	1	1	3	8	1							11	1	8	3	10	3
	7%	7%	3%~	2%~	6%	15%*	1%*	~	~	~	~	~	~	13%*	1%*	5%~	43%~	7%~	7%
NEVER	160	2765	32	38	46	44	69						12	67	87	151	4	119	41
	89%	90%	94%~	90%~	90%	83%	97%*	~	~	~	~	~	100%~	82%*	97%*	92%~	57%~	88%~	91%
#NEVER + SOMETIMES	173	2967	33	39	49	52	70						12	78	88	159	7	129	44
(NET)	96%	96%	97%~	93%~	96%	98%	99%	~	~	~	~	~	100%~	95%	98%	96%~	100%~	96%~	98%
TOP BOX SCORE	160	2765	32	38	46	44	69						12	67	87	151	4	119	41
	89%	90%	94%~	90%~	90%	83%	97%*	~	~	~	~	~	100%~	82%*	97%*	92%~	57%~	88%~	91%
NOT ANSWERED	1	26			1									1				1	
VALID CASES	180	3081	34	42	51	53	71						12	82	90	165	7	135	45
NUMBER OF RESPONDENTS	181	3107	34	42	52	53	71						12	83	90	165	7	136	45
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q32																			
NEVER	4	64	1		2	1								2	1	3		3	1
	2%	2%	3%~	~	4%	2%	~	~	~	~	~	~	~	2%	1%	2%~	~	2%~	2%
SOMETIMES	13	100	2	3	4	4	3							9	3	11	1	11	2
	7%	3%*	6%~	7%~	8%	8%	4%	~	~	~	~	~	~	11%	3%*	7%~	14%~	8%~	4%
USUALLY	21	428	3	2	4	12	9						3	9	12	21		13	8
	12%	14%	9%~	5%~	8%	23%*	13%	~	~	~	~	~	25%~	11%	13%	13%~	~	10%~	18%
ALWAYS	142	2486	27	37	42	36	59						9	63	74	130	6	108	34
	79%	81%	82%~	88%~	81%	68%*	83%	~	~	~	~	~	75%~	76%	82%	79%~	86%~	80%~	76%
#ALWAYS + USUALLY (NET)	163	2914	30	39	46	48	68						12	72	86	151	6	121	42
	91%	95%*	91%~	93%~	88%	91%	96%*	~	~	~	~	~	~100%~	87%	96%*	92%~	86%~	90%~	93%
TOP BOX SCORE	142	2486	27	37	42	36	59						9	63	74	130	6	108	34
	79%	81%	82%~	88%~	81%	68%*	83%	~	~	~	~	~	75%~	76%	82%	79%~	86%~	80%~	76%
NOT ANSWERED	1	29	1															1	
VALID CASES	180	3078	33	42	52	53	71						12	83	90	165	7	135	45
NUMBER OF RESPONDENTS	181	3107	34	42	52	53	71						12	83	90	165	7	136	45
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q33																			
NEVER	3	29			1	2								2		2		3	
	2%	0.9%	~	~	2%	4%	~	~	~	~	~	~	~	2%	~	1%~	~	2%~	
SOMETIMES	10	120	1	3	3	3	5						2	3	7	8	2	6	4
	6%	4%	3%~	7%~	6%	6%	7%	~	~	~	~	~	17%~	4%	8%	5%~	29%~	4%~	9%
USUALLY	19	422	6	4	3	6	6						3	9	10	19		14	5
	11%	14%	18%~	10%~	6%	11%	8%	~	~	~	~	~	25%~	11%	11%	12%~	~	10%~	11%
ALWAYS	147	2505	26	34	45	42	60						7	69	73	136	5	111	36
	82%	81%	79%~	83%~	87%	79%	85%	~	~	~	~	~	58%~	83%	81%	82%~	71%~	83%~	80%
#ALWAYS + USUALLY (NET)	166	2927	32	38	48	48	66						10	78	83	155	5	125	41
	93%	95%	97%~	93%~	92%	91%	93%	~	~	~	~	~	83%~	94%	92%	94%~	71%~	93%~	91%
TOP BOX SCORE	147	2505	26	34	45	42	60						7	69	73	136	5	111	36
	82%	81%	79%~	83%~	87%	79%	85%	~	~	~	~	~	58%~	83%	81%	82%~	71%~	83%~	80%
NOT ANSWERED	2	31	1	1														2	
VALID CASES	179	3076	33	41	52	53	71						12	83	90	165	7	134	45
NUMBER OF RESPONDENTS	181	3107	34	42	52	53	71						12	83	90	165	7	136	45
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q34																			
NEVER	7	30	1	2	1	3	2						1	3	3	6		6	1
	4%	1%*	3%~	5%~	2%	6%	3%	~	~	~	~	~	8%~	4%	3%	4%~	~	4%~	2%
SOMETIMES	7	85	1	3	3		2						1	4	3	6	1	5	2
	4%	3%	3%~	7%~	6%	~	3%	~	~	~	~	~	8%~	5%	3%	4%~	14%~	4%~	4%
USUALLY	21	368	3	4	5	9	6						3	12	9	19	2	13	8
	12%	12%	9%~	10%~	10%	17%	8%	~	~	~	~	~	25%~	14%	10%	12%~	29%~	10%~	18%
ALWAYS	144	2589	28	32	43	41	61						7	64	75	134	4	110	34
	80%	84%	85%~	78%~	83%	77%	86%	~	~	~	~	~	58%~	77%	83%	81%~	57%~	82%~	76%
#ALWAYS + USUALLY (NET)	165	2957	31	36	48	50	67						10	76	84	153	6	123	42
	92%	96%*	94%~	88%~	92%	94%	94%	~	~	~	~	~	83%~	92%	93%	93%~	86%~	92%~	93%
TOP BOX SCORE	144	2589	28	32	43	41	61						7	64	75	134	4	110	34
	80%	84%	85%~	78%~	83%	77%	86%	~	~	~	~	~	58%~	77%	83%	81%~	57%~	82%~	76%
NOT ANSWERED	2	35	1	1														2	
VALID CASES	179	3072	33	41	52	53	71						12	83	90	165	7	134	45
NUMBER OF RESPONDENTS	181	3107	34	42	52	53	71						12	83	90	165	7	136	45
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q35																			
YES	123	2086	5	27	42	49	45						9	58	59	113	3	93	30
	69%	68%	15%~	66%~	81%*	92%*	63%	~	~	~	~	~	75%~	70%	66%	68%~	43%~	69%~	67%
NO	56	964	28	14	10	4	26						3	25	31	52	4	41	15
	31%	32%	85%~	34%~	19%*	8%*	37%	~	~	~	~	~	25%~	30%	34%	32%~	57%~	31%~	33%
NOT ANSWERED	2	57	1	1														2	
VALID CASES	179	3050	33	41	52	53	71						12	83	90	165	7	134	45
NUMBER OF RESPONDENTS	181	3107	34	42	52	53	71						12	83	90	165	7	136	45
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q36																			
NEVER		25																	
		1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	10	112		5	2	3	5							4	6	9	1	7	3
	8%	5%	~	19%~	5%~	6%~	11%~	~	~	~	~	~	~	7%	10%	8%~	33%~	8%~	10%
USUALLY	22	405		5	4	13	10						2	9	12	20	1	17	5
	18%	20%	~	19%~	10%~	27%~	22%~	~	~	~	~	~	22%~	16%	20%	18%~	33%~	18%~	17%
ALWAYS	91	1518	5	17	36	33	30						7	45	41	84	1	69	22
	74%	74%	100%~	63%~	86%~	67%~	67%~	~	~	~	~	~	78%~	78%	69%	74%~	33%~	74%~	73%
#ALWAYS + USUALLY (NET)	113	1923	5	22	40	46	40						9	54	53	104	2	86	27
	92%	93%	100%~	81%~	95%~	94%~	89%~	~	~	~	~	~	~100%~	93%	90%	92%~	67%~	92%~	90%
TOP BOX SCORE	91	1518	5	17	36	33	30						7	45	41	84	1	69	22
	74%	74%	100%~	63%~	86%~	67%~	67%~	~	~	~	~	~	78%~	78%	69%	74%~	33%~	74%~	73%
NOT ANSWERED		26																	
VALID CASES	123	2060	5	27	42	49	45						9	58	59	113	3	93	30
NUMBER OF RESPONDENTS	123	2086	5	27	42	49	45						9	58	59	113	3	93	30
	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?

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q37																			
NEVER	6	72	1		3	2	1							5	1	6		5	1
	3%	2%	3%~	~	6%	4%	1%	~	~	~	~	~	~	6%	1%	4%~	~	4%~	2%
SOMETIMES	16	238	4	5	6	1	4						1	10	6	13	3	11	5
	9%	8%	12%~	13%~	12%	2%*	6%	~	~	~	~	~	8%~	12%	7%	8%~	43%~	8%~	11%
USUALLY	41	692	4	7	9	21	15						3	21	20	39	2	27	14
	23%	23%	12%~	18%~	17%	40%*	21%	~	~	~	~	~	25%~	25%	22%	24%~	29%~	20%~	31%
ALWAYS	115	2035	24	28	34	29	50						8	47	62	106	2	90	25
	65%	67%	73%~	70%~	65%	55%	71%	~	~	~	~	~	67%~	57%*	70%	65%~	29%~	68%~	56%
#ALWAYS + USUALLY (NET)	156	2727	28	35	43	50	65						11	68	82	145	4	117	39
	88%	90%	85%~	88%~	83%	94%*	93%	~	~	~	~	~	92%~	82%*	92%	88%~	57%~	88%~	87%
TOP BOX SCORE	115	2035	24	28	34	29	50						8	47	62	106	2	90	25
	65%	67%	73%~	70%~	65%	55%	71%	~	~	~	~	~	67%~	57%*	70%	65%~	29%~	68%~	56%
NOT ANSWERED	3	70	1	2			1								1	1		3	
VALID CASES	178	3037	33	40	52	53	70						12	83	89	164	7	133	45
NUMBER OF RESPONDENTS	181	3107	34	42	52	53	71						12	83	90	165	7	136	45
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q38																			
#YES	153	2662	30	35	43	45	62						10	70	78	141	6	115	38
	87%	87%	91%~	90%~	83%	87%	91%	~	~	~	~	~	83%~	84%	90%	87%~	100%~	87%~	86%
NO	23	384	3	4	9	7	6						2	13	9	22		17	6
	13%	13%	9%~	10%~	17%	13%	9%	~	~	~	~	~	17%~	16%	10%	13%~	~	13%~	14%
NOT ANSWERED	5	61	1	3		1	3								3	2	1	4	1
VALID CASES	176	3046	33	39	52	52	68						12	83	87	163	6	132	44
NUMBER OF RESPONDENTS	181	3107	34	42	52	53	71						12	83	90	165	7	136	45
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q39																			
YES	69	1240	14	16	19	20	31						4	29	39	62	6	38	31
	39%	41%	42%~	39%~	37%	38%	44%	~	~	~	~	~	33%~	35%	43%	38%~	86%~	29%~	69%
NO	109	1789	19	25	33	32	40						8	54	51	103	1	95	14
	61%	59%	58%~	61%~	63%	62%	56%	~	~	~	~	~	67%~	65%	57%	62%~	14%~	71%~	31%
NOT ANSWERED	3	78	1	1		1												3	
VALID CASES	178	3029	33	41	52	52	71						12	83	90	165	7	133	45
NUMBER OF RESPONDENTS	181	3107	34	42	52	53	71						12	83	90	165	7	136	45
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q40																			
NEVER	6	81	2	1	1	2	3						1	1	4	5		3	3
	9%	7%	14%~	6%~	6%~	10%~	10%~	~	~	~	~	~	25%~	4%~	10%~	8%~	~	8%~	10%
SOMETIMES	8	139	3	3	1	1	3							4	4	7	1	4	4
	12%	12%	21%~	19%~	6%~	5%~	10%~	~	~	~	~	~	~	14%~	10%~	11%~	17%~	11%~	13%
USUALLY	22	342	2	4	4	12	13						2	6	16	19	3	11	11
	32%	28%	14%~	25%~	22%~	60%~	42%~	~	~	~	~	~	50%~	21%~	41%~	31%~	50%~	29%~	37%
ALWAYS	32	645	7	8	12	5	12						1	17	15	30	2	20	12
	47%	53%	50%~	50%~	67%~	25%~	39%~	~	~	~	~	~	25%~	61%~	38%~	49%~	33%~	53%~	40%
#ALWAYS + USUALLY (NET)	54	987	9	12	16	17	25						3	23	31	49	5	31	23
	79%	82%	64%~	75%~	89%~	85%~	81%~	~	~	~	~	~	75%~	82%~	79%~	80%~	83%~	82%~	77%
TOP BOX SCORE	32	645	7	8	12	5	12						1	17	15	30	2	20	12
	47%	53%	50%~	50%~	67%~	25%~	39%~	~	~	~	~	~	25%~	61%~	38%~	49%~	33%~	53%~	40%
NOT ANSWERED	1	33			1									1		1			1
VALID CASES	68	1207	14	16	18	20	31						4	28	39	61	6	38	30
NUMBER OF RESPONDENTS	69	1240	14	16	19	20	31						4	29	39	62	6	38	31
	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?

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q41 WORST PERSONAL DOCTOR POSSIBLE	1 0.4%	6 0.1%	~	1 2%	~	~	1 1%	~	~	~	~	~	~	~	1 ~0.8%	1 ~0.5%	~	1 ~0.6%	
01		4 0.1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
02	3 1%	12 0.3%	~	~	2 3%	1 2%	1 1%	~	~	~	~	~	2 15%~	~	3 3%~	3 1%~	~	1 ~0.6%	2 4%
03	2 0.9%	23 0.5%	~	1 2%	~	1 2%	1 1%	~	~	~	~	~	~	1 ~0.9%	1 0.8%	2 0.9%~	~	2 1%	
04		19 0.4%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
05	6 3%	105 2%	1 3%~	2 4%	2 3%	1 2%	3 3%	~	~	~	~	~	~	3 3%	3 3%	5 2%~	1 11%~	4 2%	2 4%
06	5 2%	97 2%	~	2 4%	2 3%	1 2%	2 2%	~	~	~	~	~	2 15%~	1 0.9%	4 3%	5 2%~	~	3 2%	2 4%
07	18 8%	261 6%	1 3%~	3 5%	6 8%	8 13%	11 11%	~	~	~	~	~	~	7 6%	11 9%	16 7%~	2 22%~	13 7%	5 9%
08	33 14%	672 16%	9 26%~	6 11%	10 13%	8 13%	16 16%	~	~	~	~	~	2 15%~	12 11%	18 15%	29 13%~	2 22%~	25 14%	8 15%
09	48 20%	839 20%	7 20%~	10 18%	12 15%	19 30%*	22 23%	~	~	~	~	~	2 15%~	23 21%	25 21%	47 21%~	1 11%~	36 20%	12 22%
BEST PERSONAL DOCTOR POSSIBLE	119 51%	2208 52%	17 49%~	31 55%	46 58%	25 39%*	40 41%*	~	~	~	~	~	5 38%~	64 58%*	52 44%*	113 51%~	3 33%~	96 53%	23 43%
#8-10 (NET)	200 85%	3719 88%	33 94%~	47 84%	68 85%	52 81%	78 80%	~	~	~	~	~	9 69%~	99 89%	95 81%*	189 86%~	6 67%~	157 87%	43 80%

Continued

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC— ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
9-10 (NET)	167	3047	24	41	58	44	62						7	87	77	160	4	132	35
	71%	72%	69%~	73%	73%	69%	64%*	~	~	~	~	~	54%~	78%*	65%*	72%~	44%~	73%	65%
NOT ANSWERED	15	191	3	5	4	3	2						1	6	3	7		14	1
VALID CASES	235	4246	35	56	80	64	97						13	111	118	221	9	181	54
NUMBER OF RESPONDENTS	250	4437	38	61	84	67	99						14	117	121	228	9	195	55
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%
MEAN	8.87	8.98	9.06	8.82	8.95	8.70	8.61						7.69	9.15	8.59	8.89	8.22	8.96	8.57
p stat_(*=Sig @ p<=.05)		.307	~	.813	.592	.352	.053	~	~	~	~	~	~	.012*	.011*	~	~	.143	

[ASKED IF Q30 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q42																			
YES	49	1096	1	11	22	15	31						4	11	36	41	6	11	38
	20%	26%*	3%~	19%	27%	23%	32%*	~	~	~	~	~	29%~	10%*	30%*	18%~	67%~	6%*	70%
NO	192	3160	36	47	60	49	67						10	104	84	185	3	176	16
	80%	74%*	97%~	81%	73%	77%	68%*	~	~	~	~	~	71%~	90%*	70%*	82%~	33%~	94%*	30%
NOT ANSWERED	9	181	1	3	2	3	1							2	1	2		8	1
VALID CASES	241	4256	37	58	82	64	98						14	115	120	226	9	187	54
NUMBER OF RESPONDENTS	250	4437	38	61	84	67	99						14	117	121	228	9	195	55
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q43																			
#YES	43	955		10	20	13	27						2	11	30	36	5	10	33
	90%	90%~	~	91%~	91%~	93%~	90%~	~	~	~	~	~	50%~	100%~	86%~	90%~	83%~	91%~	89%
NO	5	109	1	1	2	1	3						2		5	4	1	1	4
	10%	10%~	100%~	9%~	9%~	7%~	10%~	~	~	~	~	~	50%~	~	14%~	10%~	17%~	9%~	11%
NOT ANSWERED	1	32				1	1								1	1			1
VALID CASES	48	1064	1	11	22	14	30						4	11	35	40	6	11	37
NUMBER OF RESPONDENTS	49	1096	1	11	22	15	31						4	11	36	41	6	11	38
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q44																			
#YES	41	906		9	19	13	26						2	11	29	35	5	8	33
	89%	85%~	~	90%~	90%~	93%~	90%~	~	~	~	~	~	50%~	100%~	85%~	90%~	83%~	89%~	89%
NO	5	155	1	1	2	1	3						2		5	4	1	1	4
	11%	15%~	100%~	10%~	10%~	7%~	10%~	~	~	~	~	~	50%~	~	15%~	10%~	17%~	11%~	11%
NOT ANSWERED	3	35		1	1	1	2								2	2		2	1
VALID CASES	46	1061	1	10	21	14	29						4	11	34	39	6	9	37
NUMBER OF RESPONDENTS	49	1096	1	11	22	15	31						4	11	36	41	6	11	38
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q45																			
YES	31	856	3	10	11	7	19						2	9	22	27	4	11	20
	11%	17%*	7%~	15%	12%	9%	17%*	~	~	~	~	~	12%~	7%*	16%*	10%~	44%~	5%*	34%
NO	248	4125	38	56	81	73	95						15	124	119	238	5	209	39
	89%	83%*	93%~	85%	88%	91%	83%*	~	~	~	~	~	88%~	93%*	84%*	90%~	56%~	95%*	66%
NOT ANSWERED	25	328	3	11	5	6	1							1	1	1		25	
VALID CASES	279	4981	41	66	92	80	114						17	133	141	265	9	220	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q46																			
NEVER	3	59			2	1	2						1		3	3		1	2
	10%	7%~	~	~	18%~	14%~	11%~	~	~	~	~	~	50%~	~	14%~	11%~	~	9%~	10%
SOMETIMES	7	127			3	4	4							3	4	4	3	2	5
	23%	15%~	~	~	27%~	57%~	21%~	~	~	~	~	~	~	33%~	18%~	15%~	75%~	18%~	25%
USUALLY	5	239		3	1	1	2						1	2	3	4	1	1	4
	16%	29%~	~	30%~	9%~	14%~	11%~	~	~	~	~	~	50%~	22%~	14%~	15%~	25%~	9%~	20%
ALWAYS	16	410	3	7	5	1	11							4	12	16		7	9
	52%	49%~	100%~	70%~	45%~	14%~	58%~	~	~	~	~	~	~	44%~	55%~	59%~	~	64%~	45%
#ALWAYS + USUALLY (NET)	21	649	3	10	6	2	13						1	6	15	20	1	8	13
	68%	78%~	100%~	100%~	55%~	29%~	68%~	~	~	~	~	~	50%~	67%~	68%~	74%~	25%~	73%~	65%
TOP BOX SCORE	16	410	3	7	5	1	11							4	12	16		7	9
	52%	49%~	100%~	70%~	45%~	14%~	58%~	~	~	~	~	~	~	44%~	55%~	59%~	~	64%~	45%
NOT ANSWERED		21																	
VALID CASES	31	835	3	10	11	7	19						2	9	22	27	4	11	20
NUMBER OF RESPONDENTS	31	856	3	10	11	7	19						2	9	22	27	4	11	20
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q47																			
NONE	1	48			1								1		1	1			1
	3%	6%~	~	~	9%~	~	~	~	~	~	~	~	50%~	~	5%~	4%~	~	~	5%
1 SPECIALIST	19	509	2	6	7	4	12						1	6	13	18	1	11	8
	61%	61%~	67%~	60%~	64%~	57%~	63%~	~	~	~	~	~	50%~	67%~	59%~	67%~	25%~	100%~	40%
2	6	170		3		3	5							1	5	5	1		6
	19%	20%~	~	30%~	~	43%~	26%~	~	~	~	~	~	~	11%~	23%~	19%~	25%~	~	30%
3	2	53	1		1									1	1	1	1		2
	6%	6%~	33%~	~	9%~	~	~	~	~	~	~	~	~	11%~	5%~	4%~	25%~	~	10%
4	2	27			2		2								2	2			2
	6%	3%~	~	~	18%~	~	11%~	~	~	~	~	~	~	~	9%~	7%~	~	~	10%
5 OR MORE SPECIALISTS	1	25		1										1			1		1
	3%	3%~	~	10%~	~	~	~	~	~	~	~	~	~	11%~	~	~	25%~	~	5%
NOT ANSWERED		24																	
VALID CASES	31	832	3	10	11	7	19						2	9	22	27	4	11	20
NUMBER OF RESPONDENTS	31	856	3	10	11	7	19						2	9	22	27	4	11	20
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q48 WORST SPECIALIST POSSIBLE		7																	
		0.9%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01		1																	
		0.1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02		5																	
		0.6%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03	1	7			1		1								1	1		1	
	3%	0.9%~	~	~	10%~	~	5%~	~	~	~	~	~	~	~	5%~	4%~	~	9%~	
04		5																	
		0.6%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
05	2	20				2	2								2	2			2
	7%	3%~	~	~	~	29%~	11%~	~	~	~	~	~	~	~	10%~	8%~	~	~	11%
06	3	24		1	2		2							1	2	2	1	1	2
	10%	3%~	~	10%~	20%~	~	11%~	~	~	~	~	~	~	11%~	10%~	8%~	25%~	9%~	11%
07	2	51			1	1	2								2	1	1		2
	7%	7%~	~	~	10%~	14%~	11%~	~	~	~	~	~	~	~	10%~	4%~	25%~	~	11%
08	4	135		2	1	1	3							1	3	3	1	1	3
	13%	17%~	~	20%~	10%~	14%~	16%~	~	~	~	~	~	~	11%~	14%~	12%~	25%~	9%~	16%
09	8	171		4	2	2	3						1	4	4	7	1	3	5
	27%	22%~	~	40%~	20%~	29%~	16%~	~	~	~	~	~	100%~	44%~	19%~	27%~	25%~	27%~	26%
BEST SPECIALIST POSSIBLE	10	353	3	3	3	1	6							3	7	10		5	5
	33%	45%~	100%~	30%~	30%~	14%~	32%~	~	~	~	~	~	~	33%~	33%~	38%~	~	45%~	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?

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
#8-10 (NET)	22	659	3	9	6	4	12						1	8	14	20	2	9	13
	73%	85%~	100%~	90%~	60%~	57%~	63%~	~	~	~	~	~	~100%~	89%~	67%~	77%~	50%~	82%~	68%
9-10 (NET)	18	524	3	7	5	3	9						1	7	11	17	1	8	10
	60%	67%~	100%~	70%~	50%~	43%~	47%~	~	~	~	~	~	~100%~	78%~	52%~	65%~	25%~	73%~	53%
NOT ANSWERED		5																	
VALID CASES	30	779	3	10	10	7	19						1	9	21	26	4	11	19
NUMBER OF RESPONDENTS	30	784	3	10	10	7	19						1	9	21	26	4	11	19
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%
MEAN	8.30	8.73	10.0	8.80	7.80	7.57	7.89						9.00	8.89	8.05	8.42	7.50	8.55	8.16
p stat_(*=Sig @ p<=.05)		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

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

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q49																			
YES	74	1241	16	20	21	17	22						6	41	31	70	3	62	12
	27%	25%	40%~	31%	23%	22%	19%*	~	~	~	~	~	35%~	32%	22%	27%~	33%~	29%	20%
NO	201	3699	24	45	70	62	91						11	89	109	191	6	154	47
	73%	75%	60%~	69%	77%	78%	81%*	~	~	~	~	~	65%~	68%	78%	73%~	67%~	71%	80%
NOT ANSWERED	29	369	4	12	6	7	2							4	2	5		29	
VALID CASES	275	4940	40	65	91	79	113						17	130	140	261	9	216	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q50																			
NEVER	2	36		1		1	1								2	2		2	
	3%	3%	~	5%~	~	6%~	5%~	~	~	~	~	~	~	~	6%~	3%~	~	3%~	
SOMETIMES	14	228	2	6	4	2	8							5	9	14		13	1
	19%	19%	13%~	30%~	19%~	13%~	36%~	~	~	~	~	~	~	12%~	29%~	20%~	~	21%~	8%
USUALLY	19	350	3	4	6	6	4						3	11	7	18	1	14	5
	26%	29%	19%~	20%~	29%~	38%~	18%~	~	~	~	~	~	50%~	27%~	23%~	26%~	33%~	23%~	42%
ALWAYS	38	598	11	9	11	7	9						3	25	13	35	2	32	6
	52%	49%	69%~	45%~	52%~	44%~	41%~	~	~	~	~	~	50%~	61%~	42%~	51%~	67%~	52%~	50%
#ALWAYS + USUALLY (NET)	57	948	14	13	17	13	13						6	36	20	53	3	46	11
	78%	78%	88%~	65%~	81%~	81%~	59%~	~	~	~	~	~	~100%~	88%~	65%~	77%~	100%~	75%~	92%
TOP BOX SCORE	38	598	11	9	11	7	9						3	25	13	35	2	32	6
	52%	49%	69%~	45%~	52%~	44%~	41%~	~	~	~	~	~	50%~	61%~	42%~	51%~	67%~	52%~	50%
NOT ANSWERED	1	29				1										1		1	
VALID CASES	73	1212	16	20	21	16	22						6	41	31	69	3	61	12
NUMBER OF RESPONDENTS	74	1241	16	20	21	17	22						6	41	31	70	3	62	12
	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?

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q51																			
NEVER	1	17			1									1		1		1	
	1%	1%	~	~	5%~	~	~	~	~	~	~	~	~	3%~	~	1%~	~	2%~	
SOMETIMES	4	87	1	1		2	1							3	1	4		4	
	5%	7%	6%~	5%~	~	12%~	5%~	~	~	~	~	~	~	8%~	3%~	6%~	~	7%~	
USUALLY	16	274	1	5	5	5	5						2	6	9	15	1	15	1
	22%	23%	6%~	25%~	25%~	29%~	23%~	~	~	~	~	~	33%~	15%~	29%~	22%~	33%~	25%~	8%
ALWAYS	52	831	14	14	14	10	16						4	30	21	49	2	41	11
	71%	69%	88%~	70%~	70%~	59%~	73%~	~	~	~	~	~	67%~	75%~	68%~	71%~	67%~	67%~	92%
#ALWAYS + USUALLY (NET)	68	1105	15	19	19	15	21						6	36	30	64	3	56	12
	93%	91%	94%~	95%~	95%~	88%~	95%~	~	~	~	~	~	~100%~	90%~	97%~	93%~	100%~	92%~	100%
TOP BOX SCORE	52	831	14	14	14	10	16						4	30	21	49	2	41	11
	71%	69%	88%~	70%~	70%~	59%~	73%~	~	~	~	~	~	67%~	75%~	68%~	71%~	67%~	67%~	92%
NOT ANSWERED	1	32			1									1		1		1	
VALID CASES	73	1209	16	20	20	17	22						6	40	31	69	3	61	12
NUMBER OF RESPONDENTS	74	1241	16	20	21	17	22						6	41	31	70	3	62	12
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q52																			
YES	94	1806	17	17	35	25	31						7	50	43	90	2	73	21
	34%	37%	41%~	27%	39%	32%	27%*	~	~	~	~	~	41%~	39%	31%	35%~	22%~	34%	36%
NO	180	3092	24	47	55	54	82						10	79	97	170	7	142	38
	66%	63%	59%~	73%	61%	68%	73%*	~	~	~	~	~	59%~	61%	69%	65%~	78%~	66%	64%
NOT ANSWERED	30	411	3	13	7	7	2							5	2	6		30	
VALID CASES	274	4898	41	64	90	79	113						17	129	140	260	9	215	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
PQ53																			
NEVER	1	83			1									1		1		1	
	0.4%	2%*	~	~	1%	~	~	~	~	~	~	~	~	0.8%	~	0.4%~	~	0.5%	
SOMETIMES	19	357	3	3	8	5	10						1	7	11	18		17	2
	7%	7%	7%~	5%	9%	6%	9%	~	~	~	~	~	6%~	6%	8%	7%~	~	8%	4%
USUALLY	36	646	4	7	14	11	8						4	20	16	36		32	4
	13%	13%	10%~	11%	16%	14%	7%*	~	~	~	~	~	25%~	16%	12%	14%~	~	15%	7%
ALWAYS	213	3743	34	53	64	62	93						11	99	110	200	9	163	50
	79%	78%	83%~	84%	74%	79%	84%	~	~	~	~	~	69%~	78%	80%	78%~	100%~	77%*	89%
#ALWAYS + USUALLY (NET)	249	4389	38	60	78	73	101						15	119	126	236	9	195	54
	93%	91%	93%~	95%	90%	94%	91%	~	~	~	~	~	94%~	94%	92%	93%~	100%~	92%	96%
TOP BOX SCORE	213	3743	34	53	64	62	93						11	99	110	200	9	163	50
	79%	78%	83%~	84%	74%	79%	84%	~	~	~	~	~	69%~	78%	80%	78%~	100%~	77%*	89%
NOT ANSWERED	5	69		1	3	1	2						1	2	3	5		2	3
VALID CASES	269	4829	41	63	87	78	111						16	127	137	255	9	213	56
NUMBER OF RESPONDENTS	274	4898	41	64	90	79	113						17	129	140	260	9	215	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q54																			
WORST HEALTH PLAN	2	17			1	1	2								2	2		2	
POSSIBLE	0.7%	0.3%	~	~	1%	1%	2%~	~	~	~	~	~	~	~	1%~	0.8%~		~0.9%~	
01	1	14			1								1		1	1			1
	0.4%	0.3%	~	~	1%~	~	~	~	~	~	~	~	6%~		~0.7%~	0.4%~		~	~ 2%
02	1	21			1										1	1		1	
	0.4%	0.4%	~	~	1%~	~	~	~	~	~	~	~	~		~0.7%~	0.4%~		~0.5%~	
03	3	35			1	2	2							1	2	3		2	1
	1%	0.7%	~	~	1%	3%	2%	~	~	~	~	~		~0.8%	1%	1%~		~0.9%	2%
04	3	62			2	1	1						1		3	3		2	1
	1%	1%	~	~	2%	1%	0.9%	~	~	~	~	~	6%~	~	2%~	1%~		~0.9%	2%
05	18	266	1	4	7	6	11						3	4	14	18		12	6
	6%	5%	3%~	6%	8%	8%	10%	~	~	~	~	~	18%~	3%*	10%*	7%~		~ 6%	10%
06	10	237	1	1	3	5	7							3	7	8	2	7	3
	4%	5%	3%~	2%	3%	6%	6%	~	~	~	~	~	~	2%	5%	3%~	22%~	3%	5%
07	30	471	4	8	9	9	16						1	12	18	27	2	22	8
	11%	10%	10%~	12%	10%	11%	14%	~	~	~	~	~	6%~	9%	13%	10%~	22%~	10%	14%
08	46	939	6	15	11	14	26						3	15	31	44	2	34	12
	17%	19%	15%~	23%	12%	18%	23%*	~	~	~	~	~	18%~	11%*	22%*	17%~	22%~	16%	20%
09	41	844	6	7	15	13	21						2	17	24	41		31	10
	15%	17%	15%~	11%	16%	16%	19%	~	~	~	~	~	12%~	13%	17%	16%~		~ 14%	17%
BEST HEALTH PLAN	122	1982	22	31	40	29	26						6	81	36	114	3	105	17
POSSIBLE	44%	41%	55%~	47%	44%	36%	23%*	~	~	~	~	~	35%~	61%*	26%*	44%~	33%~	48%*	29%
#8-10 (NET)	209	3765	34	53	66	56	73						11	113	91	199	5	170	39
	75%	77%	85%~	80%	73%	70%	65%*	~	~	~	~	~	65%~	85%*	65%*	76%~	56%~	78%	66%

Continued

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
9-10 (NET)	163	2826	28	38	55	42	47						8	98	60	155	3	136	27
	59%	58%	70%~	58%	60%	53%	42%*	~	~	~	~	~	47%~	74%*	43%*	59%~	33%~	62%*	46%
NOT ANSWERED	27	421	4	11	6	6	3							1	3	4		27	
VALID CASES	277	4888	40	66	91	80	112						17	133	139	262	9	218	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%
MEAN	8.45	8.47	9.02	8.71	8.27	8.15	7.82						7.59	9.08	7.79	8.44	8.00	8.59	7.93
p stat_(*=Sig @ p<=.05)		.882		~.143	.331	.100	.000*	~	~	~	~	~	~	~.000*	.000*	~	~	.028*	

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q55																			
YES	93	1910	13	19	34	27	46						5	38	54	87	5	55	38
	34%	39%	32%~	29%	37%	34%	40%*	~	~	~	~	~	29%~	29%	38%	33%~	56%~	25%*	64%
NO	184	3030	28	46	58	52	68						12	93	87	177	4	163	21
	66%	61%	68%~	71%	63%	66%	60%*	~	~	~	~	~	71%~	71%	62%	67%~	44%~	75%*	36%
NOT ANSWERED	27	369	3	12	5	7	1							3	1	2		27	
VALID CASES	277	4940	41	65	92	79	114						17	131	141	264	9	218	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q56																			
NEVER		42																	
		2%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	4	156			3	1	2							2	2	3	1	2	2
	4%	8%	~	~	9%~	4%~	4%~	~	~	~	~	~	~	5%~	4%~	3%~	20%~	4%~	5%
USUALLY	31	483	4	3	9	15	17						2	12	19	29	2	17	14
	34%	26%	31%~	16%~	27%~	56%~	38%~	~	~	~	~	~	40%~	32%~	36%~	34%~	40%~	31%~	38%
ALWAYS	57	1206	9	16	21	11	26						3	24	32	54	2	36	21
	62%	64%	69%~	84%~	64%~	41%~	58%~	~	~	~	~	~	60%~	63%~	60%~	63%~	40%~	65%~	57%
#ALWAYS + USUALLY (NET)	88	1689	13	19	30	26	43						5	36	51	83	4	53	35
	96%	90%*	100%~	100%~	91%~	96%~	96%~	~	~	~	~	~	100%~	95%~	96%~	97%~	80%~	96%~	95%
TOP BOX SCORE	57	1206	9	16	21	11	26						3	24	32	54	2	36	21
	62%	64%	69%~	84%~	64%~	41%~	58%~	~	~	~	~	~	60%~	63%~	60%~	63%~	40%~	65%~	57%
NOT ANSWERED	1	23			1		1								1	1			1
VALID CASES	92	1887	13	19	33	27	45						5	38	53	86	5	55	37
NUMBER OF RESPONDENTS	93	1910	13	19	34	27	46						5	38	54	87	5	55	38
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q57																			
#YES	56	1118	8	12	22	14	22						3	29	26	51	4	34	22
	62%	60%	62%~	63%~	67%~	54%~	50%~	~	~	~	~	~	60%~	76%~	50%~	60%~	80%~	62%~	61%
NO	35	755	5	7	11	12	22						2	9	26	34	1	21	14
	38%	40%	38%~	37%~	33%~	46%~	50%~	~	~	~	~	~	40%~	24%~	50%~	40%~	20%~	38%~	39%
NOT ANSWERED	2	37			1	1	2								2	2			2
VALID CASES	91	1873	13	19	33	26	44						5	38	52	85	5	55	36
NUMBER OF RESPONDENTS	93	1910	13	19	34	27	46						5	38	54	87	5	55	38
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q57A																			
YES	225	3983	19	57	85	64	84						15	113	107	212	8	175	50
	83%	82%	48%~	88%	94%*	83%	74%*	~	~	~	~	~	88%~	90%*	76%*	82%~	89%~	82%	85%
NO	47	876	21	8	5	13	30						2	13	34	46	1	38	9
	17%	18%	53%~	12%	6%*	17%	26%*	~	~	~	~	~	12%~	10%*	24%*	18%~	11%~	18%	15%
NOT ANSWERED	32	450	4	12	7	9	1							8	1	8		32	
VALID CASES	272	4859	40	65	90	77	114						17	126	141	258	9	213	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q57B																			
YES	169	2993	14	45	61	49	62						11	85	82	162	5	126	43
	61%	61%	35%~	69%	67%	62%	55%	~	~	~	~	~	65%~	65%	59%	62%~	56%~	58%*	73%
NO	106	1901	26	20	30	30	51						6	46	58	100	4	90	16
	39%	39%	65%~	31%	33%	38%	45%	~	~	~	~	~	35%~	35%	41%	38%~	44%~	42%*	27%
NOT ANSWERED	29	415	4	12	6	7	2							3	2	4		29	
VALID CASES	275	4894	40	65	91	79	113						17	131	140	262	9	216	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q57C																			
NEVER	2	52				2	2								2	2			2
	1%	2%	~	~	~	4%~	3%~	~	~	~	~	~	~	~	2%~	1%~	~	~	5%
SOMETIMES	6	168	1	1	2	2	3							1	5	6		3	3
	4%	6%	7%~	2%~	3%	4%~	5%	~	~	~	~	~	~	1%	6%	4%~	~	2%~	7%
USUALLY	32	532	2	6	11	13	14						3	13	19	30	1	25	7
	19%	18%	14%~	13%~	18%	27%~	23%	~	~	~	~	~	27%~	15%	23%	19%~	20%~	20%~	16%
ALWAYS	128	2201	11	38	48	31	43						8	71	56	124	4	97	31
	76%	75%	79%~	84%~	79%	65%~	69%	~	~	~	~	~	73%~	84%*	68%*	77%~	80%~	78%~	72%
#ALWAYS + USUALLY (NET)	160	2733	13	44	59	44	57						11	84	75	154	5	122	38
	95%	93%	93%~	98%~	97%	92%~	92%	~	~	~	~		~100%~	99%*	91%*	95%~	100%~	98%~	88%
TOP BOX SCORE	128	2201	11	38	48	31	43						8	71	56	124	4	97	31
	76%	75%	79%~	84%~	79%	65%~	69%	~	~	~	~	~	73%~	84%*	68%*	77%~	80%~	78%~	72%
NOT ANSWERED	1	40				1												1	
VALID CASES	168	2953	14	45	61	48	62						11	85	82	162	5	125	43
NUMBER OF RESPONDENTS	169	2993	14	45	61	49	62						11	85	82	162	5	126	43
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q57D																			
NEVER	32	609	9	8	6	9	11							20	11	32		27	5
	27%	28%	56%~	38%~	12%~	26%~	30%~	~	~	~	~	~	~	28%~	24%~	28%~	~	29%~	18%
SOMETIMES	27	384	2	6	11	8	8						1	16	11	24	2	21	6
	23%	18%	13%~	29%~	22%~	24%~	22%~	~	~	~	~	~	20%~	22%~	24%~	21%~	40%~	23%~	21%
USUALLY	19	484	2	3	8	6	7						1	10	9	19		11	8
	16%	22%	13%~	14%~	16%~	18%~	19%~	~	~	~	~	~	20%~	14%~	20%~	17%~	~	12%~	29%
ALWAYS	42	716	3	4	24	11	11						3	26	15	39	3	33	9
	35%	33%	19%~	19%~	49%~	32%~	30%~	~	~	~	~	~	60%~	36%~	33%~	34%~	60%~	36%~	32%
#ALWAYS + USUALLY (NET)	61	1200	5	7	32	17	18						4	36	24	58	3	44	17
	51%	55%	31%~	33%~	65%~	50%~	49%~	~	~	~	~	~	80%~	50%~	52%~	51%~	60%~	48%~	61%
TOP BOX SCORE	42	716	3	4	24	11	11						3	26	15	39	3	33	9
	35%	33%	19%~	19%~	49%~	32%~	30%~	~	~	~	~	~	60%~	36%~	33%~	34%~	60%~	36%~	32%
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	147	2639	23	41	42	41	72						12	56	90	142	4	116	31
NOT ANSWERED	37	477	5	15	6	11	6							6	6	10		37	
VALID CASES	120	2193	16	21	49	34	37						5	72	46	114	5	92	28
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q57E EXTREMELY DIFFICULT	7	164	3	2	1	1	5						1	1	6	7		5	2
	2%	3%	8%~	3%	1%	1%	5%	~	~	~	~	~	6%~	0.8%	4%*	3%~	~	2%	3%
01	11	92	2	5	1	3	7						1	3	8	10	1	7	4
	4%	2%	5%~	7%	1%*	4%	6%	~	~	~	~	~	6%~	2%	6%	4%~	11%~	3%	7%
02	2	75		1		1	1							1	1	2		2	
	0.7%	1%	~	1%	~	1%	0.9%	~	~	~	~	~	~	0.8%	0.7%	0.8%~	~	0.9%	
03	13	133		2	4	7	7						1	4	9	11	2	8	5
	4%	3%	~	3%	4%	8%	6%	~	~	~	~	~	6%~	3%	7%	4%~	22%~	3%	9%
04	2	87	1			1	1							1	1	2		2	
	0.7%	2%*	3%~	~	~	1%	0.9%	~	~	~	~	~	~	0.8%	0.7%	0.8%~	~	0.9%	
05	16	371	1	4	6	5	13						1	2	14	16		10	6
	6%	7%	3%~	5%	6%	6%	12%*	~	~	~	~	~	6%~	2%*	10%*	6%~	~	4%	10%
06	17	203	2	4	5	6	11						2	4	13	16	1	13	4
	6%	4%	5%~	5%	5%	7%	10%*	~	~	~	~	~	13%~	3%	10%*	6%~	11%~	6%	7%
07	17	375		4	7	6	6						1	7	10	17		11	6
	6%	7%	~	5%	7%	7%	6%	~	~	~	~	~	6%~	5%	7%	7%~	~	5%	10%
09	112	1657	13	36	31	32	24						3	58	28	85	2	100	12
	39%	33%*	35%~	48%	33%	39%	22%*	~	~	~	~	~	19%~	45%*	21%*	33%~	22%~	43%*	21%
EXTREMELY EASY	93	1890	15	17	40	21	33						6	47	44	88	3	74	19
	32%	37%*	41%~	23%*	42%*	25%	31%	~	~	~	~	~	38%~	37%	33%	35%~	33%~	32%	33%
#8-10 (NET)	205	3547	28	53	71	53	57						9	105	72	173	5	174	31
	71%	70%	76%~	71%	75%	64%	53%*	~	~	~	~	~	56%~	82%*	54%*	68%~	56%~	75%*	53%
9-10 (NET)	205	3547	28	53	71	53	57						9	105	72	173	5	174	31
	71%	70%	76%~	71%	75%	64%	53%*	~	~	~	~	~	56%~	82%*	54%*	68%~	56%~	75%*	53%

Continued

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
88		1																	
NOT ANSWERED	14	261	7	2	2	3	7						1	6	8	12		13	1
VALID CASES	290	5047	37	75	95	83	108						16	128	134	254	9	232	58
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%
MEAN	7.93	8.02	7.84	7.72	8.43	7.60	6.97						7.19	8.56	7.10	7.85	6.78	8.14	7.12
p stat_(*=Sig @ p<=.05)		.555		~.446	.017*	.191	.000*	~	~	~	~	~	~	.000*	.000*	~	~	.026*	

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q58																			
EXCELLENT	115	2100	23	41	31	20	51						8	47	65	115		104	11
	42%	43%	56%~	63%*	34%	26%*	44%	~	~	~	~	~	47%~	36%	46%	43%~	~	48%*	19%
VERY GOOD	94	1734	14	17	36	27	43						5	42	52	94		72	22
	34%	35%	34%~	26%	40%	35%	37%	~	~	~	~	~	29%~	32%	37%	35%~	~	33%	37%
GOOD	57	854	4	6	21	26	18						4	35	22	57		37	20
	21%	17%	10%~	9%*	23%	33%*	16%	~	~	~	~	~	24%~	27%*	15%*	21%~	~	17%*	34%
FAIR	8	210			3	5	3							5	3		8	3	5
	3%	4%	~	~	3%	6%	3%	~	~	~	~	~	~	4%	2%	~	89%~	1%	8%
POOR	1	17		1										1			1		1
	0.4%	0.3%	~	2%	~	~	~	~	~	~	~	~	~	0.8%	~	~	11%~	~	2%
#EXCELLENT + VERY GOOD	266	4688	41	64	88	73	112						17	124	139	266		213	53
+ GOOD (NET)	97%	95%	100%~	98%	97%	94%	97%	~	~	~	~	~	100%~	95%	98%	100%~	~	99%*	90%
NOT ANSWERED	29	394	3	12	6	8								4				29	
VALID CASES	275	4915	41	65	91	78	115						17	130	142	266	9	216	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q59																			
EXCELLENT	122	2151	28	38	33	23	46						9	60	61	120	1	113	9
	44%	44%	70%~	58%*	36%	29%*	40%	~	~	~	~	~	53%~	46%	43%	45%~	11%~	52%*	15%
VERY GOOD	73	1382	10	14	33	16	30						2	38	35	70	1	59	14
	26%	28%	25%~	21%	36%*	20%	26%	~	~	~	~	~	12%~	29%	25%	27%~	11%~	27%	24%
GOOD	59	930	2	11	17	29	28						3	25	32	56	3	39	20
	21%	19%	5%~	17%	19%	37%*	24%	~	~	~	~	~	18%~	19%	23%	21%~	33%~	18%*	34%
FAIR	15	366		3	6	6	7						1	7	8	13	2	4	11
	5%	7%	~	5%	7%	8%	6%	~	~	~	~	~	6%~	5%	6%	5%~	22%~	2%*	19%
POOR	7	88			2	5	4						2	1	6	5	2	2	5
	3%	2%	~	~	2%	6%	3%	~	~	~	~	~	12%~	0.8%	4%	2%~	22%~	0.9%*	8%
#EXCELLENT + VERY GOOD	254	4463	40	63	83	68	104						14	123	128	246	5	211	43
+ GOOD (NET)	92%	91%	100%~	95%	91%	86%*	90%	~	~	~	~	~	82%~	94%	90%	93%~	56%~	97%*	73%
NOT ANSWERED	28	392	4	11	6	7								3		2		28	
VALID CASES	276	4917	40	66	91	79	115						17	131	142	264	9	217	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q60																			
YES	47	1056	5	6	20	16	28						1	15	32	44	3	17	30
	17%	22%*	12%~	10%*	22%	20%	25%*	~	~	~	~	~	6%~	11%*	23%*	17%~	33%~	8%*	51%
NO	228	3853	36	57	72	63	86						16	116	109	220	6	199	29
	83%	78%*	88%~	90%*	78%	80%	75%*	~	~	~	~	~	94%~	89%*	77%*	83%~	67%~	92%*	49%
NOT ANSWERED	29	400	3	14	5	7	1							3	1	2		29	
VALID CASES	275	4909	41	63	92	79	114						17	131	141	264	9	216	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q61																			
YES	31	843	1	4	13	13	23							6	25	28	3	2	29
	67%	81%~	20%~	67%~	68%~	81%~	82%~	~	~	~	~	~	~	43%~	78%~	65%~	100%~	13%~	97%
NO	15	192	4	2	6	3	5						1	8	7	15		14	1
	33%	19%~	80%~	33%~	32%~	19%~	18%~	~	~	~	~	~	~100%~	57%~	22%~	35%~	~	88%~	3%
NOT ANSWERED	1	21			1									1		1		1	
VALID CASES	46	1035	5	6	19	16	28						1	14	32	43	3	16	30
NUMBER OF RESPONDENTS	47	1056	5	6	20	16	28						1	15	32	44	3	17	30
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q60 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q62																			
YES	29	748	1	3	13	12	21							6	23	26	3		29
	94%	91%	100%	75%	100%	92%	91%	~	~	~	~	~	~	100%	92%	93%	100%	~	100%
NO	2	77		1		1	2								2	2		2	
	6%	9%	~	25%	~	8%	9%	~	~	~	~	~	~	~	8%	7%	~	100%	~
NOT ANSWERED		18																	
VALID CASES	31	825	1	4	13	13	23							6	25	28	3	2	29
NUMBER OF RESPONDENTS	31	843	1	4	13	13	23							6	25	28	3	2	29
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q60 = YES AND Q61 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q63																			
YES	33	832	1	5	12	15	19						4	9	24	28	5	2	31
	12%	17%*	2%~	8%	13%	19%*	17%	~	~	~	~	~	24%~	7%*	17%*	11%~	56%~	0.9%*	53%
NO	242	4059	40	60	79	63	95						13	122	117	236	4	214	28
	88%	83%*	98%~	92%	87%	81%*	83%	~	~	~	~	~	76%~	93%*	83%*	89%~	44%~	99%*	47%
NOT ANSWERED	29	418	3	12	6	8	1							3	1	2		29	
VALID CASES	275	4891	41	65	91	78	114						17	131	141	264	9	216	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q64																			
YES	28	689	1	5	11	11	17						2	8	20	23	5		28
	88%	85%	100%	100%	92%	79%	89%	~	~	~	~	~	50%	100%	83%	85%	100%	~	93%
NO	4	123			1	3	2						2		4	4		2	2
	13%	15%	~	~	8%	21%	11%	~	~	~	~	~	50%	~	17%	15%	~	100%	7%
NOT ANSWERED	1	20				1								1		1			1
VALID CASES	32	812	1	5	12	14	19						4	8	24	27	5	2	30
NUMBER OF RESPONDENTS	33	832	1	5	12	15	19						4	9	24	28	5	2	31
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q63 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q65																			
YES	28	662	1	5	11	11	17						2	8	20	23	5		28
	100%	97%	~100%	~100%	~100%	~100%	~100%	~	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~	~100%
NO		19																	
		3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NOT ANSWERED		8																	
VALID CASES	28	681	1	5	11	11	17						2	8	20	23	5		28
NUMBER OF RESPONDENTS	28	689	1	5	11	11	17						2	8	20	23	5		28
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%		100%

[ASKED IF Q63 = YES AND Q64 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q66																			
YES	32	644	1	5	17	9	19						1	9	23	28	4	7	25
	12%	13%	2%~	8%	19%*	12%	17%*	~	~	~	~	~	6%~	7%*	16%*	11%~	44%~	3%*	42%
NO	243	4243	40	60	74	69	95						16	122	118	235	5	209	34
	88%	87%	98%~	92%	81%*	88%	83%*	~	~	~	~	~	94%~	93%*	84%*	89%~	56%~	97%*	58%
NOT ANSWERED	29	422	3	12	6	8	1							3	1	3		29	
VALID CASES	275	4887	41	65	91	78	114						17	131	141	263	9	216	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q67																			
YES	24	508	1	2	12	9	16						1	5	19	20	4		24
	77%	81%	~100%	~ 40%	~ 75%	~100%	~ 84%	~	~	~	~	~	~100%	~ 63%	~ 83%	~ 74%	~100%	~	~ 96%
NO	7	121		3	4		3							3	4	7		6	1
	23%	19%	~	~ 60%	~ 25%	~	~ 16%	~	~	~	~	~	~	~ 38%	~ 17%	~ 26%	~	~100%	~ 4%
NOT ANSWERED	1	15			1									1		1		1	
VALID CASES	31	629	1	5	16	9	19						1	8	23	27	4	6	25
NUMBER OF RESPONDENTS	32	644	1	5	17	9	19						1	9	23	28	4	7	25
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q66 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q68																			
YES	24	477	1	2	12	9	16						1	5	19	20	4		24
	100%	96%	~100%	~100%	~100%	~100%	~100%	~	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~	~100%
NO		22																	
		4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NOT ANSWERED		9																	
VALID CASES	24	499	1	2	12	9	16						1	5	19	20	4		24
NUMBER OF RESPONDENTS	24	508	1	2	12	9	16						1	5	19	20	4		24
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%		100%

[ASKED IF Q66 = YES AND Q67 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q69																			
YES	25	558	2	9	8	6	11						1	12	13	22	3	9	16
	9%	11%	5%~	14%	9%	8%	10%	~	~	~	~	~	6%~	9%	9%	8%~	33%~	4%*	27%
NO	252	4342	39	57	84	72	103						16	121	128	243	6	209	43
	91%	89%	95%~	86%	91%	92%	90%	~	~	~	~	~	94%~	91%	91%	92%~	67%~	96%*	73%
NOT ANSWERED	27	409	3	11	5	8	1							1	1	1		27	
VALID CASES	277	4900	41	66	92	78	114						17	133	141	265	9	218	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q70																			
YES	14	389	1	3	6	4	8							5	9	11	3		14
	56%	72%~	50%~	33%~	75%~	67%~	73%~	~	~	~	~	~	~	42%~	69%~	50%~	100%~	~	88%
NO	11	149	1	6	2	2	3						1	7	4	11		9	2
	44%	28%~	50%~	67%~	25%~	33%~	27%~	~	~	~	~	~	~100%~	58%~	31%~	50%~	~	100%~	13%
NOT ANSWERED		20																	
VALID CASES	25	538	2	9	8	6	11						1	12	13	22	3	9	16
NUMBER OF RESPONDENTS	25	558	2	9	8	6	11						1	12	13	22	3	9	16
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q69 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q71																			
YES	13	357	1	3	6	3	7							5	8	11	2		13
	93%	93%	100%	100%	100%	75%	88%	~	~	~	~	~	~	100%	89%	100%	67%	~	93%
NO	1	27				1	1								1		1		1
	7%	7%	~	~	~	25%	13%	~	~	~	~	~	~	~	11%	~	33%	~	7%
NOT ANSWERED		5																	
VALID CASES	14	384	1	3	6	4	8							5	9	11	3		14
NUMBER OF RESPONDENTS	14	389	1	3	6	4	8							5	9	11	3		14
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%		100%

[ASKED IF Q69 = YES AND Q70 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q72																			
YES	44	813	1	5	17	21	28						4	10	34	40	4	4	40
	16%	17%	2%~	8%*	18%	27%*	25%*	~	~	~	~	~	24%~	8%*	24%*	15%~	44%~	2%*	68%
NO	232	4085	40	60	75	57	85						13	123	106	224	5	213	19
	84%	83%	98%~	92%*	82%	73%*	75%*	~	~	~	~	~	76%~	92%*	76%*	85%~	56%~	98%*	32%
NOT ANSWERED	28	411	3	12	5	8	2							1	2	2		28	
VALID CASES	276	4898	41	65	92	78	113						17	133	140	264	9	217	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q73																			
YES	39	726	1	5	15	18	26						3	9	30	35	4		39
	89%	92%	~100%	~100%	~ 88%	~ 86%	~ 93%	~	~	~	~	~	~ 75%	~ 90%	~ 88%	~ 88%	~100%	~	~ 98%
NO	5	64			2	3	2						1	1	4	5		4	1
	11%	8%	~	~	~ 12%	~ 14%	~ 7%	~	~	~	~	~	~ 25%	~ 10%	~ 12%	~ 13%	~	~100%	~ 3%
NOT ANSWERED		23																	
VALID CASES	44	790	1	5	17	21	28						4	10	34	40	4	4	40
NUMBER OF RESPONDENTS	44	813	1	5	17	21	28						4	10	34	40	4	4	40
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q72 = YES]

NQ74 WHAT IS YOUR CHILD'S AGE?

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NQ74																			
3 YEARS OLD OR LESS	44	908	44				19						2	19	22	41		41	3
	14%	17%	100%~	~	~	~	17%	~	~	~	~	~	12%~	14%	15%	15%~	~	17%*	5%
4 TO 7 YEARS OLD	77	1228		77			31						3	30	36	64	1	70	7
	25%	23%		~100%~	~	~	27%	~	~	~	~	~	18%~	22%	25%	24%~	11%~	29%*	12%
8 TO 12 YEARS OLD	97	1650			97		30						3	52	38	88	3	73	24
	32%	31%	~		~100%~	~	26%	~	~	~	~	~	18%~	39%*	27%	33%~	33%~	30%	41%
13 OR OLDER	86	1523				86	35						9	33	46	73	5	61	25
	28%	29%	~	~	~	~100%~	30%	~	~	~	~	~	53%~	25%	32%	27%~	56%~	25%*	42%
VALID CASES	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

NQ75 IS YOUR CHILD MALE OR FEMALE?

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NQ75																			
MALE	142	2736	25	40	40	37	53						8	66	65	125	3	117	25
	47%	52%	57%~	52%	41%	43%	46%	~	~	~	~	~	47%~	49%	46%	47%~	33%~	48%	42%
FEMALE	162	2573	19	37	57	49	62						9	68	77	141	6	128	34
	53%	48%	43%~	48%	59%	57%	54%	~	~	~	~	~	53%~	51%	54%	53%~	67%~	52%	58%
VALID CASES	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q76																			
HISPANIC OR LATINO	134	1726	19	30	52	33								134		124	6	119	15
	49%	35%*	46%~	45%	58%*	42%	~	~	~	~	~	~		~100%~	~	47%~	67%~	55%*	25%
NOT HISPANIC OR LATINO	142	3146	22	36	38	46	114						17		142	139	3	98	44
	51%	65%*	54%~	55%	42%*	58%	100%~	~	~	~	~	~	~100%~		~100%~	53%~	33%~	45%*	75%
NOT ANSWERED	28	437	3	11	7	7	1									3		28	
VALID CASES	276	4872	41	66	90	79	114						17	134	142	263	9	217	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.1																			
YES	190	3787	32	45	56	57	115						17	58	131	183	6	141	49
	63%	71%*	73%~	58%	58%	66%	100%~	~	~	~	~		~100%~	43%*	92%*	69%~	67%~	58%*	83%
NO	114	1522	12	32	41	29								76	11	83	3	104	10
	38%	29%*	27%~	42%	42%	34%	~	~	~	~	~	~	~	57%*	8%*	31%~	33%~	42%*	17%
VALID CASES	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.2																			
YES	6	204	1	2	2	1							3	1	5	6		4	2
	2%	4%*	2%~	3%	2%	1%	~	~	~	~	~	~	18%~	0.7%	4%	2%~	~	2%	3%
NO	298	5105	43	75	95	85	115						14	133	137	260	9	241	57
	98%	96%*	98%~	97%	98%	99%	100%~	~	~	~	~	~	82%~	99%	96%	98%~	100%~	98%	97%
VALID CASES	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.3																			
YES	8	184		1	4	3							3	1	7	8		6	2
	3%	3%	~	1%	4%	3%	~	~	~	~	~	~	18%~	0.7%*	5%*	3%~	~	2%	3%
NO	296	5125	44	76	93	83	115						14	133	135	258	9	239	57
	97%	97%	100%~	99%	96%	97%	100%~	~	~	~	~	~	82%~	99%*	95%*	97%~	100%~	98%	97%
VALID CASES	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.4																			
YES	4	83			3	1							2	1	3	4		4	
	1%	2%	~	~	3%	1%	~	~	~	~	~	~	12%~	0.7%	2%	2%~	~	2%~	
NO	300	5226	44	77	94	85	115						15	133	139	262	9	241	59
	99%	98%	100%~	100%~	97%	99%	100%~	~	~	~	~	~	88%~	99%	98%	98%~	100%~	98%~	100%
VALID CASES	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.5																			
YES	12	335	1	3	1	7							11	1	11	12		12	
	4%	6%*	2%~	4%	1%*	8%	~	~	~	~	~	~	65%~	0.7%*	8%*	5%~	~	5%~	
NO	292	4974	43	74	96	79	115						6	133	131	254	9	233	59
	96%	94%*	98%~	96%	99%*	92%	100%~	~	~	~	~	~	35%~	99%*	92%*	95%~	100%~	95%*	100%
VALID CASES	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.6																			
YES	21	374	3	8	6	4							2	18	3	21		20	1
	7%	7%	7%~	10%	6%	5%	~	~	~	~	~	~	12%~	13%*	2%*	8%~	~	8%*	2%
NO	283	4935	41	69	91	82	115						15	116	139	245	9	225	58
	93%	93%	93%~	90%	94%	95%	100%~	~	~	~	~	~	88%~	87%*	98%*	92%~	100%~	92%*	98%
VALID CASES	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

Q78 WHAT IS YOUR AGE?

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q78																			
UNDER 18	6	141	2	1		3	2						1	3	3	6		5	1
	2%	3%	5%~	2%	~	4%	2%	~	~	~	~	~	6%~	2%	2%	2%~	~	2%	2%
18 TO 24	10	161	4	3	1	2	5						1	4	6	10		6	4
	4%	3%	10%~	5%	1%	3%	4%	~	~	~	~	~	6%~	3%	4%	4%~	~	3%	7%
25 TO 34	87	1564	20	24	33	10	37						3	44	42	86	1	73	14
	32%	32%	50%~	36%	36%	13%*	32%	~	~	~	~	~	18%~	33%	30%	33%~	11%~	33%	24%
35 TO 44	122	1821	14	29	41	38	49						8	61	61	115	5	96	26
	44%	37%*	35%~	44%	45%	48%	43%	~	~	~	~	~	47%~	46%	43%	44%~	56%~	44%	45%
45 TO 54	37	797		6	12	19	15						2	16	20	33	2	30	7
	13%	16%	~	9%	13%	24%*	13%	~	~	~	~	~	12%~	12%	14%	13%~	22%~	14%	12%
55 TO 64	10	266		3	2	5	4						1	4	5	9	1	5	5
	4%	5%	~	5%	2%	6%	3%	~	~	~	~	~	6%~	3%	4%	3%~	11%~	2%	9%
65 TO 74	4	116			2	2	3						1		4	4		3	1
	1%	2%	~	~	2%	3%	3%	~	~	~	~	~	6%~	~	3%~	2%~	~	1%	2%
75 OR OLDER		16																	
		0.3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NOT ANSWERED	28	427	4	11	6	7								2	1	3		27	1
VALID CASES	276	4882	40	66	91	79	115						17	132	141	263	9	218	58
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

Q79 ARE YOU MALE OR FEMALE?

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q79																			
MALE	33	702	5	7	7	14	14						1	15	18	31	1	26	7
	12%	14%	13%~	11%	8%	18%	12%	~	~	~	~	~	6%~	11%	13%	12%~	11%~	12%	12%
FEMALE	242	4191	35	58	85	64	101						16	116	123	233	8	191	51
	88%	86%	88%~	89%	92%	82%	88%	~	~	~	~	~	94%~	89%	87%	88%~	89%~	88%	88%
NOT ANSWERED	29	416	4	12	5	8								3	1	2		28	1
VALID CASES	275	4893	40	65	92	78	115						17	131	141	264	9	217	58
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q80																			
8TH GRADE OR LESS	40	479	1	10	14	15	3							35	2	34	3	36	4
	15%	10%*	3%~	15%	16%	19%	3%*	~	~	~	~	~	~	27%*	1%*	13%~	33%~	17%*	7%
SOME HIGH SCHOOL BUT	29	480	5	10	7	7	9						1	19	10	28	1	24	5
DID NOT GRADUATE	11%	10%	13%~	15%	8%	9%	8%	~	~	~	~	~	6%~	15%*	7%	11%~	11%~	11%	9%
HIGH SCHOOL GRADUATE	91	1452	16	15	35	25	32						4	53	38	88	3	76	15
OR GED	33%	30%	41%~	23%*	39%	32%	28%	~	~	~	~	~	24%~	41%*	27%*	34%~	33%~	35%	26%
SOME COLLEGE OR 2-YEAR	74	1752	11	14	25	24	43						9	16	58	72	2	51	23
DEGREE	27%	36%*	28%~	21%	28%	31%	38%*	~	~	~	~	~	53%~	12%*	41%*	28%~	22%~	24%*	40%
4-YEAR COLLEGE GRADUATE	29	437	5	15	4	5	22						2	4	25	29		24	5
	11%	9%	13%~	23%*	4%*	6%	19%*	~	~	~	~	~	12%~	3%*	18%*	11%~	~	11%	9%
MORE THAN 4-YEAR	9	238	1	2	4	2	5						1	2	7	9		4	5
COLLEGE DEGREE	3%	5%	3%~	3%	4%	3%	4%	~	~	~	~	~	6%~	2%	5%	3%~	~	2%	9%
NOT ANSWERED	32	471	5	11	8	8	1							5	2	6		30	2
VALID CASES	272	4838	39	66	89	78	114						17	129	140	260	9	215	57
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

Q81 HOW ARE YOU RELATED TO THE CHILD?

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q81																			
MOTHER OR FATHER	255	4466	39	59	87	70	101						16	127	126	244	8	205	50
	94%	93%	98%~	94%	96%	90%	90%	~	~	~	~	~	94%~	97%*	91%	94%~	89%~	95%	89%
GRANDPARENT	9	186	1	2	4	2	6						1	1	7	8	1	6	3
	3%	4%	3%~	3%	4%	3%	5%	~	~	~	~	~	6%~	0.8%*	5%	3%~	11%~	3%	5%
AUNT OR UNCLE	3	33		1		2	2							1	2	3		2	1
	1%	0.7%	~	2%	~	3%	2%	~	~	~	~	~		~0.8%	1%	1%~		~0.9%	2%
OLDER BROTHER OR SISTER		12																	
		0.2%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
OTHER RELATIVE	1	6				1								1		1			1
	0.4%	0.1%	~	~	~	1%~	~	~	~	~	~	~		~0.8%~		~0.4%~		~	~ 2%
LEGAL GUARDIAN	2	73				2	1							1	1	2		1	1
	0.7%	2%	~	~	~	3%~	0.9%	~	~	~	~	~		~0.8%	0.7%	0.8%~		~0.5%	2%
SOMEONE ELSE	2	33		1		1	2								2	2		2	
	0.7%	0.7%	~	2%	~	1%	2%~	~	~	~	~	~	~	~	1%~	0.8%~		~0.9%~	
NOT ANSWERED	32	500	4	14	6	8	3							3	4	6		29	3
VALID CASES	272	4809	40	63	91	78	112						17	131	138	260	9	216	56
NUMBER OF RESPONDENTS	304	5309	44	77	97	86	115						17	134	142	266	9	245	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q82																			
YES	12	101	2	4	3	3	1							8	3	11	1	10	2
	7%	3%*	8%~	10%~	6%	6%~	1%*	~	~	~	~	~	~	11%	3%*	7%~	25%~	8%~	6%
NO	153	2894	23	38	47	45	72						8	66	86	147	3	121	32
	93%	97%*	92%~	90%~	94%	94%~	99%*	~	~	~	~		~100%~	89%	97%*	93%~	75%~	92%~	94%
NOT ANSWERED	1	59			1		1								1	1			1
VALID CASES	165	2995	25	42	50	48	73						8	74	89	158	4	131	34
NUMBER OF RESPONDENTS	166	3054	25	42	51	48	74						8	74	90	159	4	131	35
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.1																			
YES	5	53	2	2	1		1							3	2	5		5	
	42%	52%	100%	50%	33%		100%	~	~	~	~	~	~	38%	67%	45%	~	50%	~
NO	7	48		2	2	3								5	1	6	1	5	2
	58%	48%	~	50%	67%	100%	~	~	~	~	~	~	~	63%	33%	55%	100%	50%	100%
VALID CASES	12	101	2	4	3	3	1							8	3	11	1	10	2
NUMBER OF RESPONDENTS	12	101	2	4	3	3	1							8	3	11	1	10	2
	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.

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.2																			
YES	2	31	1	1										1	1	2		2	
	17%	31%~	50%~	25%~	~	~	~	~	~	~	~	~	~	13%~	33%~	18%~	~	20%~	
NO	10	70	1	3	3	3	1							7	2	9	1	8	2
	83%	69%~	50%~	75%~	100%~	100%~	100%~	~	~	~	~	~	~	88%~	67%~	82%~	100%~	80%~	100%
VALID CASES	12	101	2	4	3	3	1							8	3	11	1	10	2
NUMBER OF RESPONDENTS	12	101	2	4	3	3	1							8	3	11	1	10	2
	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.

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.3																			
YES		13																	
		13%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NO	12	88	2	4	3	3	1							8	3	11	1	10	2
	100%	87%~	100%~	100%~	100%~	100%~	100%~	~	~	~	~	~	~	~100%~	100%~	100%~	100%~	100%~	100%
VALID CASES	12	101	2	4	3	3	1							8	3	11	1	10	2
NUMBER OF RESPONDENTS	12	101	2	4	3	3	1							8	3	11	1	10	2
	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.

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.4																			
YES	6	43		3	2	1								4	1	6		5	1
	50%	43%~	~	75%~	67%~	33%~	~	~	~	~	~	~	~	50%~	33%~	55%~	~	50%~	50%
NO	6	58	2	1	1	2	1							4	2	5	1	5	1
	50%	57%~	100%~	25%~	33%~	67%~	100%~	~	~	~	~	~	~	50%~	67%~	45%~	100%~	50%~	50%
VALID CASES	12	101	2	4	3	3	1							8	3	11	1	10	2
NUMBER OF RESPONDENTS	12	101	2	4	3	3	1							8	3	11	1	10	2
	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.

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.5																			
YES	2	6				2								2		1	1	1	1
	17%	6%~	~	~	~	67%~	~	~	~	~	~	~	~	25%~	~	9%~	100%~	10%~	50%
NO	10	95	2	4	3	1	1							6	3	10		9	1
	83%	94%~	100%~	100%~	100%~	33%~	100%~	~	~	~	~	~	~	75%~	100%~	91%~	~	90%~	50%
VALID CASES	12	101	2	4	3	3	1							8	3	11	1	10	2
NUMBER OF RESPONDENTS	12	101	2	4	3	3	1							8	3	11	1	10	2
	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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NQ14																			
0-6	18	286	2	5	8	3	11						1	4	12	17		16	2
	10%	8%	6%~	12%~	13%	6%~	13%	~	~	~	~	~	8%~	5%	12%	10%~	~	11%~	5%
7-8	43	994	9	8	10	16	28						3	9	31	38	2	31	12
	23%	29%	26%~	19%~	17%	33%~	33%*	~	~	~	~	~	25%~	12%*	30%*	22%~	29%~	21%~	31%
9-10	125	2180	23	30	42	30	45						8	61	59	114	5	100	25
	67%	63%	68%~	70%~	70%	61%~	54%*	~	~	~	~	~	67%~	82%*	58%*	67%~	71%~	68%~	64%
VALID CASES	186	3460	34	43	60	49	84						12	74	102	169	7	147	39
NUMBER OF RESPONDENTS	186	3460	34	43	60	49	84						12	74	102	169	7	147	39
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%
MEAN	2.58	2.55	2.62	2.58	2.57	2.55	2.40						2.58	2.77	2.46	2.57	2.71	2.57	2.59
p stat_(*=Sig @ p<=.05)		.543	~	~	.908	~	.002*	~	~	~	~	~	~	.001*	.008*	~	~	~	

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NQ41																			
0-6	17	266	1	6	6	4	8						4	5	12	16	1	11	6
	7%	6%	3%~	11%	8%	6%	8%	~	~	~	~	~	31%~	5%	10%	7%~	11%~	6%	11%
7-8	51	933	10	9	16	16	27						2	19	29	45	4	38	13
	22%	22%	29%~	16%	20%	25%	28%	~	~	~	~	~	15%~	17%	25%	20%~	44%~	21%	24%
9-10	167	3047	24	41	58	44	62						7	87	77	160	4	132	35
	71%	72%	69%~	73%	73%	69%	64%*	~	~	~	~	~	54%~	78%*	65%*	72%~	44%~	73%	65%
VALID CASES	235	4246	35	56	80	64	97						13	111	118	221	9	181	54
NUMBER OF RESPONDENTS	235	4246	35	56	80	64	97						13	111	118	221	9	181	54
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%
MEAN	2.64	2.65	2.66	2.63	2.65	2.63	2.56						2.23	2.74	2.55	2.65	2.33	2.67	2.54
p stat_(*=Sig @ p<=.05)		.657	~	.853	.834	.838	.093	~	~	~	~	~	~	.017*	.028*	~	~	.168	

[ASKED IF Q30 = YES]

NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NQ48																			
0-6	6	69		1	3	2	5							1	5	5	1	2	4
	20%	9%~	~	10%~	30%~	29%~	26%~	~	~	~	~	~	~	11%~	24%~	19%~	25%~	18%~	21%
7-8	6	186		2	2	2	5							1	5	4	2	1	5
	20%	24%~	~	20%~	20%~	29%~	26%~	~	~	~	~	~	~	11%~	24%~	15%~	50%~	9%~	26%
9-10	18	524	3	7	5	3	9						1	7	11	17	1	8	10
	60%	67%~	100%~	70%~	50%~	43%~	47%~	~	~	~	~	~	~100%~	78%~	52%~	65%~	25%~	73%~	53%
VALID CASES	30	779	3	10	10	7	19						1	9	21	26	4	11	19
NUMBER OF RESPONDENTS	30	779	3	10	10	7	19						1	9	21	26	4	11	19
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%
MEAN	2.40	2.58	3.00	2.60	2.20	2.14	2.21						3.00	2.67	2.29	2.46	2.00	2.55	2.32
p stat_(*=Sig @ p<=.05)		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

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

NQ54 RATING OF CHILD'S HEALTH PLAN

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NQ54																			
0-6	38	652	2	5	16	15	23						5	8	30	36	2	26	12
	14%	13%	5%~	8%	18%	19%	21%*	~	~	~	~	~	29%~	6%*	22%*	14%~	22%~	12%	20%
7-8	76	1410	10	23	20	23	42						4	27	49	71	4	56	20
	27%	29%	25%~	35%	22%	29%	38%*	~	~	~	~	~	24%~	20%*	35%*	27%~	44%~	26%	34%
9-10	163	2826	28	38	55	42	47						8	98	60	155	3	136	27
	59%	58%	70%~	58%	60%	53%	42%*	~	~	~	~	~	47%~	74%*	43%*	59%~	33%~	62%*	46%
VALID CASES	277	4888	40	66	91	80	112						17	133	139	262	9	218	59
NUMBER OF RESPONDENTS	277	4888	40	66	91	80	112						17	133	139	262	9	218	59
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%
MEAN	2.45	2.44	2.65	2.50	2.43	2.34	2.21						2.18	2.68	2.22	2.45	2.11	2.50	2.25
p stat_(*=Sig @ p<=.05)		.877		~.497	.726	.096	.000*	~	~	~	~	~		~0.000*	0.000*		~	~.028*	

GETTING NEEDED CARE

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NPRBSEE4 NQ46	2.19	2.27	3.00	2.70	2.00	1.43	2.26						1.50	2.11	2.23	2.33	1.25	2.36	2.10
p stat_(*=Sig @ p<=.05)		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCARNES4 NQ15	2.37	2.49	2.42	2.43	2.33	2.31	2.27						2.50	2.45	2.29	2.36	2.29	2.38	2.33
p stat_(*=Sig @ p<=.05)		.018*	~	~	.688	.560	.137	~	~	~	~	~	~	.184	.150	~	~	~	
COMPOSITE	2.28	2.38	2.71	2.56	2.17	1.87	2.27	x	x	x	x	x	2.00	2.28	2.26	2.35	1.77	2.37	2.21
p stat_(*=Sig @ p<=.05)		.001*	~	~	.015*	0.000*	.757	~	~	~	~	~	~	.946	.515	~		~	~

GETTING CARE QUICKLY

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NCARSN4 NQ4	2.75	2.65	2.79	2.83	2.78	2.62	2.63						2.88	2.83	2.68	2.76	2.33	2.81	2.61
p stat_(*=Sig @ p<=.05)		.125	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NAPGET4 NQ6	2.34	2.46	2.67	2.28	2.38	2.17	2.29						2.23	2.38	2.28	2.34	2.33	2.33	2.36
p stat_(*=Sig @ p<=.05)		.026*	~	~	.656	.053	.517	~	~	~	~	~	~	.476	.342	~	~	~	
COMPOSITE	2.54	2.56	2.73	2.55	2.58	2.39	2.46	x	x	x	x	x	2.55	2.61	2.48	2.55	2.33	2.57	2.48
p stat_(*=Sig @ p<=.05)		.694	~	~	.501	.004*	.038*	~	~	~	~	~	~	.110	.048*	~	~	~	

HOW WELL DOCTORS COMMUNICATE

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NDREXPL4 NQ32	2.69	2.75	2.73	2.81	2.69	2.58	2.79						2.75	2.63	2.78	2.70	2.71	2.70	2.69
p stat_(*=Sig @ p<=.05)		.190	~	~	.977	.135	.086	~	~	~	~	~	~	.193	.078	~	~	~	
NDRLSTN4 NQ33	2.75	2.77	2.76	2.76	2.79	2.70	2.77						2.42	2.77	2.73	2.76	2.43	2.76	2.71
p stat_(*=Sig @ p<=.05)		.679	~	~	.554	.478	.627	~	~	~	~	~	~	.630	.724	~	~	~	
NDRESPU4 NQ34	2.73	2.81	2.79	2.66	2.75	2.72	2.80						2.42	2.69	2.77	2.74	2.43	2.74	2.69
p stat_(*=Sig @ p<=.05)		.067	~	~	.733	.893	.165	~	~	~	~	~	~	.415	.365	~	~	~	
NDRTMEN4 NQ37	2.52	2.57	2.58	2.58	2.48	2.49	2.64						2.58	2.39	2.62	2.53	1.86	2.56	2.42
p stat_(*=Sig @ p<=.05)		.351	~	~	.615	.672	.056	~	~	~	~	~	~	.017*	.071	~	~	~	
COMPOSITE	2.67	2.72	2.71	2.70	2.68	2.62	2.75	x	x	x	x	x	2.54	2.62	2.72	2.68	2.36	2.69	2.63
p stat_(*=Sig @ p<=.05)		.164	~	~	.933	.380	.085	~	~	~	~	~	~	.172	.174	~	~	~	

CUSTOMER SERVICE

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NPBCLCS4 NQ50	2.30	2.28	2.56	2.10	2.33	2.25	2.00						2.50	2.49	2.06	2.28	2.67	2.28	2.42
p stat_(*=Sig @ p<=.05)		.780	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCSRESP NQ51	2.64	2.60	2.81	2.65	2.65	2.47	2.68						2.67	2.65	2.65	2.64	2.67	2.59	2.92
p stat_(*=Sig @ p<=.05)		.560	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.47	2.44	2.69	2.38	2.49	2.36	2.34	x	x	x	x	x	2.58	2.57	2.35	2.46	2.67	2.43	2.67
p stat_(*=Sig @ p<=.05)		.642	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

SHARED DECISION MAKING

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NNRXWHY NQ11	2.88	2.87	2.75	3.00	2.75	3.00	2.92						3.00	2.76	2.94	2.87	3.00	2.89	2.88
p stat_(*=Sig @ p<=.05)		.868	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NNRXWYNT NQ12	2.32	2.42	1.86	1.92	2.33	2.87	2.17						2.00	2.60	2.16	2.30	2.33	2.29	2.38
p stat_(*=Sig @ p<=.05)		.427	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NRXBST NQ13	2.80	2.58	2.75	2.54	3.00	2.87	2.75						2.00	3.00	2.68	2.77	3.00	2.77	2.88
p stat_(*=Sig @ p<=.05)		.009*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.67	2.62	2.45	2.49	2.69	2.91	2.61	x	x	x	x	x	2.33	2.79	2.59	2.65	2.78	2.65	2.71
p stat_(*=Sig @ p<=.05)		.516	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

ACCESS TO SPECIALIZED SERVICES

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NEZMDEQ NQ20	2.38	2.30	1.50	3.00	2.67	2.00	2.50						2.00	2.50	2.25	2.29	3.00	2.33	2.50
p stat_(*=Sig @ p<=.05)		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTHP NQ23	2.33	2.19	2.67	2.50	2.22	2.22	2.11							2.47	2.10	2.43	1.75	2.44	2.28
p stat_(*=Sig @ p<=.05)		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTC NQ26	2.26	2.18	2.00	1.86	2.30	2.40	2.13						1.00	2.58	2.08	2.26	2.00	2.55	2.14
p stat_(*=Sig @ p<=.05)		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.32	2.22	2.06	2.45	2.40	2.21	2.25	x	x	x	x	x	1.50	2.52	2.14	2.32	2.25	2.44	2.31
p stat_(*=Sig @ p<=.05)		.083	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

	BANTO T1	BANTO T2	AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
PRBSEE4 Q46	68%	78%	100%	100%	55%	29%	68%						50%	67%	68%	74%	25%	73%	65%
CARNES4 Q15	83%	89%	88%	81%	82%	84%	79%						92%	88%	79%	83%	86%	84%	80%
AVERAGE	75.54	83.54	93.94	90.48	68.11	56.44	73.50	x	x	x	x	x	70.83	77.33	73.80	78.51	55.36	78.49	72.50

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

	BANTO T1	BANTO T2	AGE				RACE							ETHNIC— ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
CARSN4 Q4	94%	91%	95%	94%	96%	90%	89%						100%	97%	92%	95%	67%	95%	91%
APGET4 Q6	79%	86%	93%	75%	80%	75%	78%						77%	81%	77%	79%	89%	78%	84%
AVERAGE	86.79	88.77	94.04	84.72	88.33	82.53	83.78	x	x	x	x	x	88.46	89.02	84.71	87.07	77.78	86.51	87.87

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
DREXPL4 Q32	91%	95%	91%	93%	88%	91%	96%						100%	87%	96%	92%	86%	90%	93%
DRLSTN4 Q33	93%	95%	97%	93%	92%	91%	93%						83%	94%	92%	94%	71%	93%	91%
DRESPU4 Q34	92%	96%	94%	88%	92%	94%	94%						83%	92%	93%	93%	86%	92%	93%
DRTMEN4 Q37	88%	90%	85%	88%	83%	94%	93%						92%	82%	92%	88%	57%	88%	87%
AVERAGE	90.8	94.0	91.7	90.2	88.9	92.5	94.0	x	x	x	x	x	89.6	88.6	93.3	91.6	75.0	90.7	91.1

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

	BANTO T1	BANTO T2	AGE				RACE							ETHNIC— ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
PBCLCS4 Q50	78%	78%	88%	65%	81%	81%	59%						100%	88%	65%	77%	100%	75%	92%
CSRESP Q51	93%	91%	94%	95%	95%	88%	95%						100%	90%	97%	93%	100%	92%	100%
AVERAGE	85.62	84.81	90.63	80.00	87.98	84.74	77.27	x	x	x	x	x	100.0	88.90	80.65	84.78	100.0	83.61	95.83

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NRXWHY Q11	94%	94%	88%	100%	88%	100%	96%						100%	88%	97%	93%	100%	94%	94%
NRXWYNT Q12	66%	71%	43%	46%	67%	93%	58%						50%	80%	58%	65%	67%	65%	69%
RXBST Q13	90%	79%	88%	77%	100%	93%	88%						50%	100%	84%	89%	100%	89%	94%
AVERAGE	83.5	81.2	72.6	74.4	84.7	95.6	80.6	x	x	x	x	x	66.7	89.4	79.6	82.4	88.9	82.6	85.4

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
EZMDEQ Q20	88%	76%	50%	100%	100%	100%	100%						100%	75%	100%	86%	100%	83%	100%
EZTHP Q23	85%	72%	100%	83%	78%	89%	78%							87%	80%	90%	50%	89%	83%
EZTC Q26	77%	71%	50%	57%	70%	90%	78%						0%	83%	73%	74%	100%	82%	75%
AVERAGE	83.2	72.8	66.7	80.2	82.6	93.0	85.3	x	x	x	x	x	50.0	81.7	84.4	83.5	83.3	84.7	86.1

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
DRTLKU Q38	87%	87%	91%	90%	83%	87%	91%						83%	84%	90%	87%	100%	87%	86%
DRUNCON Q43	90%	90%	0%	91%	91%	93%	90%						50%	100%	86%	90%	83%	91%	89%
DRUNFAM Q44	89%	85%	0%	90%	90%	93%	90%						50%	100%	85%	90%	83%	89%	89%
AVERAGE	88.5	87.5	30.3	90.2	88.0	90.8	90.3	x	x	x	x	x	61.1	94.8	86.9	88.7	88.9	89.0	88.2

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC-ITY		HEALTH STATUS		CCC SCREENER	
	YCCO TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
HELPCONT Q18	78%	92%	100%	100%	38%	100%	75%						100%	78%	75%	79%	67%	82%	75%
HLPCOORD Q29	56%	62%	14%	69%	55%	63%	59%						50%	56%	56%	55%	75%	48%	64%
AVERAGE	67.0	77.1	57.1	84.6	46.0	81.6	67.2	x	x	x	x	x	75.0	67.0	65.5	66.8	70.8	65.2	69.6

INDEX OF ADULT TABLES

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

PAGE	QUESTION	TITLE
3. YOUR PERSONAL DOCTOR		
14	Q15	A PERSONAL DOCTOR IS THE ONE YOU WOULD SEE IF YOU NEED A CHECK-UP, WANT ADVICE ABOUT A HEALTH PROBLEM, OR GET SICK OR HURT. DO YOU HAVE A PERSONAL DOCTOR?
15	Q16	IN THE LAST 6 MONTHS, HOW MANY TIMES DID YOU VISIT YOUR PERSONAL DOCTOR TO GET CARE FOR YOURSELF? [ASKED IF Q15 = YES]
16	Q17	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR EXPLAIN THINGS IN A WAY THAT WAS EASY TO UNDERSTAND? [ASKED IF Q15 = YES AND Q16 >= 1 TIME]
17	Q18	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR LISTEN CAREFULLY TO YOU? [ASKED IF Q15 = YES AND Q16 >= 1 TIME]
18	Q19	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR SHOW RESPECT FOR WHAT YOU HAD TO SAY? [ASKED IF Q15 = YES AND Q16 >= 1 TIME]
19	Q20	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR SPEND ENOUGH TIME WITH YOU? [ASKED IF Q15 = YES AND Q16 >= 1 TIME]
20	Q21	IN THE LAST 6 MONTHS, DID YOU GET CARE FROM A DOCTOR OR OTHER HEALTH PROVIDER BESIDES YOUR PERSONAL DOCTOR? [ASKED IF Q15 = YES AND Q16 >= 1 TIME]
21	Q22	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR SEEM INFORMED AND UP-TO-DATE ABOUT THE CARE YOU GOT FROM THESE DOCTORS OR OTHER HEALTH PROVIDERS? [ASKED IF Q15 = YES AND Q16 >= 1 TIME AND Q21 = YES]
22	Q23	USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST PERSONAL DOCTOR POSSIBLE AND 10 IS THE BEST PERSONAL DOCTOR POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR PERSONAL DOCTOR? [ASKED IF Q15 = YES]
4. GETTING HEALTH CARE FROM SPECIALISTS		
23	Q24	SPECIALISTS ARE DOCTORS LIKE SURGEONS, HEART DOCTORS, ALLERGY DOCTORS, SKIN DOCTORS, AND OTHER DOCTORS WHO SPECIALIZE IN ONE AREA OF HEALTH CARE. IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS TO SEE A SPECIALIST?
24	Q25	IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT TO SEE A SPECIALIST AS SOON AS YOU NEEDED? [ASKED IF Q24 = YES]
25	Q26	HOW MANY SPECIALISTS HAVE YOU SEEN IN THE LAST 6 MONTHS? [ASKED IF Q24 = YES]
26	Q27	WE WANT TO KNOW YOUR RATING OF THE SPECIALIST YOU SAW MOST OFTEN IN THE LAST 6 MONTHS. USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST SPECIALIST POSSIBLE AND 10 IS THE BEST SPECIALIST POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE THAT SPECIALIST? [ASKED IF Q24 = YES AND Q26 >= 1 SPECIALIST]

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

PAGE	QUESTION	TITLE
5. ADDITIONAL QUESTIONS		
39	Q35E	IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER TALK TOO FAST WHEN TALKING TO YOU?
40	Q35F	IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER INTERRUPT YOU WHEN YOU WERE TALKING?
41	Q35G	IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER USE A CONDESCENDING, SARCASTIC, OR RUDE TONE OR MANNER WITH YOU?
42	Q35H	IN THE LAST 6 MONTHS, DID YOU FEEL YOU COULD TRUST A DOCTOR OR OTHER HEALTH PROVIDER WITH YOUR MEDICAL CARE?
5. ACCESS TO DENTAL CARE		
43	Q35I	A REGULAR DENTIST IS ONE YOU WOULD GO TO FOR CHECK-UPS AND CLEANINGS OR WHEN YOU HAVE A CAVITY OR TOOTH PAIN. DO YOU HAVE A REGULAR DENTIST?
44	Q35J	IN THE LAST 6 MONTHS, DID YOU GO TO A DENTIST'S OFFICE OR CLINIC FOR CARE?
45	Q35K	IN THE LAST 6 MONTHS, HOW OFTEN DID THE DENTISTS OR DENTAL STAFF EXPLAIN WHAT THEY WERE DOING WHILE TREATING YOU?
46	Q35L	IF YOU TRIED TO GET AN APPOINTMENT FOR YOURSELF WITH A DENTIST WHO SPECIALIZES IN A PARTICULAR TYPE OF DENTAL CARE (SUCH AS ROOT CANALS OR GUM DISEASE) IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT AS SOON AS YOU WANTED?
47	Q35M	IN THE LAST 6 MONTHS, IF YOU NEEDED TO SEE A DENTIST RIGHT AWAY BECAUSE OF A DENTAL EMERGENCY, DID YOU GET TO SEE A DENTIST AS SOON AS YOU WANTED?
48	Q35N	USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS EXTREMELY DIFFICULT AND 10 IS EXTREMELY EASY, WHAT NUMBER WOULD YOU USE TO RATE HOW EASY IT WAS FOR YOU TO FIND A DENTIST?

PAGE	QUESTION	TITLE
6. ABOUT YOU		
49	Q36	IN GENERAL, HOW WOULD YOU RATE YOUR OVERALL HEALTH?
50	Q37	IN GENERAL, HOW WOULD YOU RATE YOUR OVERALL MENTAL OR EMOTIONAL HEALTH?
51	Q38	HAVE YOU HAD EITHER A FLU SHOT OR FLU SPRAY IN THE NOSE SINCE JULY 1, 2017?
52	Q39	DO YOU NOW SMOKE CIGARETTES OR USE TOBACCO EVERY DAY, SOME DAYS, OR NOT AT ALL?
53	Q40	IN THE LAST 6 MONTHS, HOW OFTEN WERE YOU ADVISED TO QUIT SMOKING OR USING TOBACCO BY A DOCTOR OR OTHER HEALTH PROVIDER IN YOUR PLAN? [ASKED IF Q39 = EVERY DAY OR SOME DAYS]
54	Q41	IN THE LAST 6 MONTHS, HOW OFTEN WAS MEDICATION RECOMMENDED OR DISCUSSED BY A DOCTOR OR HEALTH PROVIDER TO ASSIST YOU WITH QUITTING SMOKING OR USING TOBACCO? EXAMPLES OF MEDICATION ARE: NICOTINE GUM, PATCH, NASAL SPRAY, INHALER, OR PRESCRIPTION MEDICATION. [ASKED IF Q39 = EVERY DAY OR SOME DAYS]
55	Q42	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR DOCTOR OR HEALTH PROVIDER DISCUSS OR PROVIDE METHODS AND STRATEGIES OTHER THAN MEDICATION TO ASSIST YOU WITH QUITTING SMOKING OR USING TOBACCO? EXAMPLES OF METHODS AND STRATEGIES ARE: TELEPHONE HELPLINE, INDIVIDUAL OR GROUP COUNSELING, OR CESSATION PROGRAM. [ASKED IF Q39 = EVERY DAY OR SOME DAYS]
56	Q43	DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?
57	Q44	DO YOU HAVE A HEALTH PROBLEM OR TAKE MEDICATION THAT MAKES TAKING ASPIRIN UNSAFE FOR YOU?
58	Q45	HAS A DOCTOR OR HEALTH PROVIDER EVER DISCUSSED WITH YOU THE RISKS AND BENEFITS OF ASPIRIN TO PREVENT HEART ATTACK OR STROKE?

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

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

INDEX OF CHILD TABLES

PAGE	QUESTION	TITLE
1. INTRODUCTION		
1	Q1	OUR RECORDS SHOW THAT YOUR CHILD IS NOW IN <HEALTH PLAN>. IS THAT RIGHT?
2. YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS		
2	Q3	IN THE LAST 6 MONTHS, DID YOUR CHILD HAVE AN ILLNESS, INJURY, OR CONDITION THAT NEEDED CARE RIGHT AWAY IN A CLINIC, EMERGENCY ROOM OR DOCTOR'S OFFICE?
3	Q4	IN THE LAST 6 MONTHS, WHEN YOUR CHILD NEEDED CARE RIGHT AWAY, HOW OFTEN DID YOUR CHILD GET CARE AS SOON AS HE OR SHE NEEDED? [ASKED IF Q3 = YES]
4	Q5	IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS FOR A CHECK UP OR ROUTINE CARE FOR YOUR CHILD AT A DOCTOR'S OFFICE OR CLINIC?
5	Q6	IN THE LAST 6 MONTHS, WHEN YOU MADE AN APPOINTMENT FOR A CHECK UP OR ROUTINE CARE FOR YOUR CHILD AT A DOCTOR'S OFFICE OR CLINIC, HOW OFTEN DID YOU GET AN APPOINTMENT AS SOON AS YOUR CHILD NEEDED? [ASKED IF Q5 = YES]
6	Q7	IN THE LAST 6 MONTHS, NOT COUNTING THE TIMES YOUR CHILD WENT TO AN EMERGENCY ROOM, HOW MANY TIMES DID HE OR SHE GO TO A DOCTOR'S OFFICE OR CLINIC TO GET HEALTH CARE?
7	Q8	IN THE LAST 6 MONTHS, DID YOU AND YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT SPECIFIC THINGS YOU COULD DO TO PREVENT ILLNESS IN YOUR CHILD? [ASKED IF Q7 >= 1 TIME]
8	Q9	IN THE LAST 6 MONTHS, HOW OFTEN DID YOU HAVE YOUR QUESTIONS ANSWERED BY YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER? [ASKED IF Q7 >= 1 TIME]
9	Q10	IN THE LAST 6 MONTHS, DID YOU AND YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE FOR YOUR CHILD? [ASKED IF Q7 >= 1 TIME]
10	Q11	WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT WANT YOUR CHILD TO TAKE A MEDICINE? [ASKED IF Q7 >= 1 TIME AND Q10 = YES]
11	Q12	WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT NOT WANT YOUR CHILD TO TAKE A MEDICINE? [ASKED IF Q7 >= 1 TIME AND Q10 = YES]
12	Q13	WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRITION MEDICINE, DID A DOCTOR OR OTHER HEALTH PROVIDER ASK YOU WHAT YOU THOUGHT WAS BEST FOR YOUR CHILD? [ASKED IF Q7 >= 1 TIME AND Q10 = YES]
13	Q14	USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH CARE POSSIBLE AND 10 IS THE BEST HEALTH CARE POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE ALL YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS? [ASKED IF Q7 >= 1]
14	Q15	IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THE CARE, TESTS, OR TREATMENT YOUR CHILD NEEDED? [ASKED IF Q7 >= 1 TIME]
15	Q16	IS YOUR CHILD NOW ENROLLED IN ANY KIND OF SCHOOL OR DAYCARE?
16	Q17	IN THE LAST 6 MONTHS, DID YOU NEED YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TO CONTACT A SCHOOL OR DAYCARE CENTER ABOUT YOUR CHILD'S HEALTH OR HEALTH CARE? [ASKED IF Q16 = YES]
17	Q18	IN THE LAST 6 MONTHS, DID YOU GET THE HELP YOU NEEDED FROM YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER IN CONTACTING YOUR CHILD'S SCHOOL OR DAYCARE? [ASKED IF Q16 = YES AND Q17 = YES]
3. SPECIALIZED SERVICES		
18	Q19	SPECIAL MEDICAL EQUIPMENT OR DEVICES INCLUDE A WALKER, WHEELCHAIR, NEBULIZER, FEEDING TUBES, OR OXYGEN EQUIPMENT. IN THE LAST 6 MONTHS, DID YOU GET OR TRY TO GET ANY SPECIAL MEDICAL EQUIPMENT OR DEVICES FOR YOUR CHILD?

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

PAGE	QUESTION	TITLE

4. YOUR CHILD'S PERSONAL DOCTOR

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

PAGE	QUESTION	TITLE
5. GETTING HEALTH CARE FROM SPECIALISTS		
45	Q45	SPECIALISTS ARE DOCTORS LIKE SURGEONS, HEART DOCTORS, ALLERGY DOCTORS, SKIN DOCTORS, AND OTHER DOCTORS WHO SPECIALIZE IN ONE AREA OF HEALTH CARE. IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS FOR YOUR CHILD TO SEE A SPECIALIST?
46	Q46	IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT FOR YOUR CHILD TO SEE A SPECIALIST AS SOON AS YOU NEEDED? [ASKED IF Q45 = YES]
47	Q47	HOW MANY SPECIALISTS HAS YOUR CHILD SEEN IN THE LAST 6 MONTHS? [ASKED IF Q45 = YES]
48	Q48	WE WANT TO KNOW YOUR RATING OF THE SPECIALIST YOUR CHILD SAW MOST OFTEN IN THE LAST 6 MONTHS. USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST SPECIALIST POSSIBLE AND 10 IS THE BEST SPECIALIST POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE THAT SPECIALIST? [ASKED IF Q45 = YES AND Q47 >= 1 SPECIALIST]
6. YOUR CHILD'S HEALTH PLAN		
49	Q49	IN THE LAST 6 MONTHS, DID YOU GET INFORMATION OR HELP FROM CUSTOMER SERVICE AT YOUR CHILD'S HEALTH PLAN?
50	Q50	IN THE LAST 6 MONTHS, HOW OFTEN DID CUSTOMER SERVICE AT YOUR CHILD'S HEALTH PLAN GIVE YOU THE INFORMATION OR HELP YOU NEEDED? [ASKED IF Q49 = YES]
51	Q51	IN THE LAST 6 MONTHS, HOW OFTEN DID CUSTOMER SERVICE STAFF AT YOUR CHILD'S HEALTH PLAN TREAT YOU WITH COURTESY AND RESPECT? [ASKED IF Q49 = YES]
52	Q52	IN THE LAST 6 MONTHS, DID YOUR CHILD'S HEALTH PLAN GIVE YOU ANY FORMS TO FILL OUT?
53	PQ53	IN THE LAST 6 MONTHS, HOW OFTEN WERE THE FORMS FROM YOUR CHILD'S HEALTH PLAN EASY TO FILL OUT? [ASKED IF Q52 = YES. RESPONSE OF 'ALWAYS' PADDED WITH Q52 = NO]
54	Q54	USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH PLAN POSSIBLE AND 10 IS THE BEST HEALTH PLAN POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR CHILD'S HEALTH PLAN?

PAGE	QUESTION	TITLE
7. PRESCRIPTION MEDICINES		
55	Q55	IN THE LAST 6 MONTHS, DID YOU GET OR REFILL ANY PRESCRIPTION MEDICINES FOR YOUR CHILD?
56	Q56	IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET PRESCRIPTION MEDICINES FOR YOUR CHILD THROUGH HIS OR HER HEALTH PLAN? [ASKED IF Q55 = YES]
57	Q57	DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE, OR CLINIC HELP YOU GET YOUR CHILD'S PRESCRIPTION MEDICINES? [ASKED IF Q55 = YES]
7. ACCESS TO DENTAL CARE		
58	Q57A	A REGULAR DENTIST IS ONE YOUR CHILD WOULD GO TO FOR CHECK-UPS AND CLEANINGS OR WHEN HE/SHE HAS A CAVITY OR TOOTH PAIN. DOES YOUR CHILD HAVE A REGULAR DENTIST?
59	Q57B	IN THE LAST 6 MONTHS, DID YOUR CHILD GO TO A DENTIST'S OFFICE OR CLINIC FOR CARE?
60	Q57C	IN THE LAST 6 MONTHS, HOW OFTEN DID THE DENTISTS OR DENTAL STAFF EXPLAIN WHAT THEY WERE DOING WHILE TREATING YOUR CHILD?
61	Q57D	IN THE LAST 6 MONTHS, IF YOUR CHILD NEEDED TO SEE A DENTIST RIGHT AWAY BECAUSE OF A DENTAL EMERGENCY, DID HE/SHE GET TO SEE A DENTIST AS SOON AS YOU WANTED?
62	Q57E	USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS EXTREMELY DIFFICULT AND 10 IS EXTREMELY EASY, WHAT NUMBER WOULD YOU USE TO RATE HOW EASY IT WAS FOR YOU TO FIND A DENTIST FOR YOUR CHILD?
8. ABOUT YOUR CHILD AND YOU		
63	Q58	IN GENERAL, HOW WOULD YOU RATE YOUR CHILD'S OVERALL HEALTH?

64	Q59	IN GENERAL, HOW WOULD YOU RATE YOUR CHILD'S OVERALL MENTAL OR EMOTIONAL HEALTH?
65	Q60	DOES YOUR CHILD CURRENTLY NEED OR USE MEDICINE PRESCRIBED BY A DOCTOR (OTHER THAN VITAMINS)?
66	Q61	IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q60 = YES]
67	Q62	IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q60 = YES AND Q61 = YES]
68	Q63	DOES YOUR CHILD NEED OR USE MORE MEDICAL CARE, MORE MENTAL HEALTH SERVICES, OR MORE EDUCATIONAL SERVICES THAN IS USUAL FOR MOST CHILDREN OF THE SAME AGE?
69	Q64	IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q63 = YES]
70	Q65	IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q63 = YES AND Q64 = YES]
71	Q66	IS YOUR CHILD LIMITED OR PREVENTED IN ANY WAY IN HIS OR HER ABILITY TO DO THE THINGS MOST CHILDREN OF THE SAME AGE CAN DO?
72	Q67	IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q66 = YES]
73	Q68	IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q66 = YES AND Q67 = YES]
74	Q69	DOES YOUR CHILD NEED OR GET SPECIAL THERAPY, SUCH AS PHYSICAL, OCCUPATIONAL, OR SPEECH THERAPY?
75	Q70	IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q69 = YES]
76	Q71	IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q69 = YES AND Q70 = YES]
77	Q72	DOES YOUR CHILD HAVE ANY KIND OF EMOTIONAL, DEVELOPMENTAL, OR BEHAVIORAL PROBLEMS FOR WHICH HE OR SHE NEEDS OR GETS TREATMENT OR COUNSELING?
78	Q73	HAS THIS PROBLEM LASTED OR IS IT EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q72 = YES]
79	NQ74	WHAT IS YOUR CHILD'S AGE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
80	NQ75	IS YOUR CHILD MALE OR FEMALE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
81	Q76	IS YOUR CHILD OF HISPANIC OR LATINO ORIGIN OR DESCENT?
82	Q77.1	WHAT IS YOUR CHILD'S RACE? RESPONSE: WHITE
83	Q77.2	WHAT IS YOUR CHILD'S RACE? RESPONSE: BLACK OR AFRICAN-AMERICAN
84	Q77.3	WHAT IS YOUR CHILD'S RACE? RESPONSE: ASIAN
85	Q77.4	WHAT IS YOUR CHILD'S RACE? RESPONSE: NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
86	Q77.5	WHAT IS YOUR CHILD'S RACE? RESPONSE: AMERICAN INDIAN OR ALASKA NATIVE
87	Q77.6	WHAT IS YOUR CHILD'S RACE? RESPONSE: OTHER
88	Q78	WHAT IS YOUR AGE?
89	Q79	ARE YOU MALE OR FEMALE?
90	Q80	WHAT IS THE HIGHEST GRADE OR LEVEL OF SCHOOL THAT YOU HAVE COMPLETED?
91	Q81	HOW ARE YOU RELATED TO THE CHILD?
92	Q82	DID SOMEONE HELP YOU COMPLETE THIS SURVEY? [ASKED IF SURVEY COMPLETED BY MAIL]
93	Q83.1	HOW DID THAT PERSON HELP YOU? RESPONSE: READ THE QUESTIONS TO ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]
94	Q83.2	HOW DID THAT PERSON HELP YOU? RESPONSE: WROTE DOWN THE ANSWERS I GAVE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]
95	Q83.3	HOW DID THAT PERSON HELP YOU? RESPONSE: ANSWERED THE QUESTIONS FOR ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]
96	Q83.4	HOW DID THAT PERSON HELP YOU? RESPONSE: TRANSLATED THE QUESTIONS INTO MY LANGUAGE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]
97	Q83.5	HOW DID THAT PERSON HELP YOU? RESPONSE: HELPED IN SOME OTHER WAY. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]

PAGE	QUESTION	TITLE

9. RATINGS

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

10. COMPOSITES

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

11. GLOBAL PROPORTION COMPOSITES

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

Oregon Health Authority

DataStat

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 <u>completely</u>. Use only <u>black or blue ink</u> or <u>dark pencil</u> to complete the survey.**

Correct Mark ● **Incorrect Marks**

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

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

⬇ START HERE ⬇

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

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

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

   _____

YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

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

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

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

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

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

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

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

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

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

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

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

- ○ Yes
- ○ No

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

- ○ Yes
- ○ No ➔ ***Go to Question 13***

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

- ○ Yes
- ○ No

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

- ○ Yes
- ○ No

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

- ○ Yes
- ○ No

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

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

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

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

YOUR PERSONAL DOCTOR

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

- ○ Yes
- ○ No ➔ ***Go to Question 24***

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

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

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

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

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

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

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

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

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

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

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

- ○ Yes
- ○ No ➔ ***Go to Question 23***

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

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

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

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

GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

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

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

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

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

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

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

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

YOUR HEALTH PLAN

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

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

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

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

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

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

- ○ Yes
- ○ No ➔ ***Go to Question 33***

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

ADDITIONAL QUESTIONS

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

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

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

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

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

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

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

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

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

ACCESS TO DENTAL CARE

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

- ○ Yes
- ○ No

35j. In the last 6 months, did you go to a dentist's office or clinic for care?

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

35k. In the last 6 months, how often did the dentists or dental staff explain what they were doing while treating you?

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

35l. If you tried to get an appointment for yourself with a dentist who specializes in a particular type of dental care (such as root canals or gum disease) in the last 6 months, how often did you get an appointment as soon as you wanted?

- ○ Never
- ○ Sometimes
- ○ Usually
- ○ Always
- ○ I did not try to get an appointment with a specialist dentist for myself in the last 6 months.

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

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

35n. Using any number from 0 to 10, where 0 is extremely difficult and 10 is extremely easy, what number would you use to rate how easy it was for you to find a dentist?

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

ABOUT YOU

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

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

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

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

38. Have you had either a flu shot or flu spray in the nose since July 1, 2016?

- ○ Yes
- ○ No
- ○ Don't know

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

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

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

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

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

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

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

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

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

- ○ Yes
- ○ No
- ○ Don't know

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

- ○ Yes
- ○ No
- ○ Don't know

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

- ○ Yes
- ○ No

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

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

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

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

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

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

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

- ○ Yes
- ○ No

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

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

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

- ○ Yes
- ○ No

52. What is your age?

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

53. Are you male or female?

- ○ Male
- ○ Female

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

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

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

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

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

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

_____

57. Did someone help you complete this survey?

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

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

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

_____

THANK YOU

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

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

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

Oregon Health Authority

DataStat

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 <u>completely</u>. Use only <u>black or blue ink</u> or <u>dark pencil</u> 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 providers?

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

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

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

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

- ○ Yes
- ○ No

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

- ○ Yes
- ○ No

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

- ○ Yes
- ○ No

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

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

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

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

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

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

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

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

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

- ○ Yes
- ○ No

SPECIALIZED SERVICES

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

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

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

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

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

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

- ○ Yes
- ○ No

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

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

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

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

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

- ○ Yes
- ○ No

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

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

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

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

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

- ○ Yes
- ○ No

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

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

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

- ○ Yes
- ○ No

YOUR CHILD'S PERSONAL DOCTOR

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

- ○ Yes
- ○ No

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

- ○ Yes
- ○ No ➔ ***Go to Question 41***

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

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

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

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

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

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

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

- ○ Yes
- ○ No

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

- ○ Yes
- ○ No

GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

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

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

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

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

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

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

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

YOUR CHILD'S HEALTH PLAN

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

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

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

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

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

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

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

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

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

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

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

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

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

PRESCRIPTION MEDICINES

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

- ○ Yes
- ○ No ➔ ***Go to Question 57a***

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

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

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

- ○ Yes
- ○ No

ACCESS TO DENTAL CARE

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

- ○ Yes
- ○ No

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

- ○ Yes
- ○ No ➔ ***Go to Question 57d***

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

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

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

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

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

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

ABOUT YOUR CHILD AND YOU

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

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

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

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

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

- ○ Yes
- ○ No ➔ ***Go to Question 63***

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

- ○ Yes
- ○ No ➔ ***Go to Question 63***

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

- ○ Yes
- ○ No

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

- ○ Yes
- ○ No ➔ ***Go to Question 66***

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

- ○ Yes
- ○ No ➔ ***Go to Question 66***

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

- ○ Yes
- ○ No

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

- ○ Yes
- ○ No ➔ ***Go to Question 69***

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

- ○ Yes
- ○ No ➔ ***Go to Question 69***

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

- ○ Yes
- ○ No

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

- ○ Yes
- ○ No ➔ ***Go to Question 72***

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

- ○ Yes
- ○ No ➔ ***Go to Question 72***

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

- ○ Yes
- ○ No

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

- ○ Yes
- ○ No ➔ ***Go to Question 74***

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

- ○ Yes
- ○ No

74. What is <u>your child's</u> age?

- ○ Less than 1 year old

☐☐ YEARS OLD (write in)

75. Is your child male or female?

- ○ Male
- ○ Female

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

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

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

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

_____

78. What is <u>your</u> age?

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

79. Are you male or female?

- ○ Male
- ○ Female

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

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

81. How are you related to the child?

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

82. Did someone help you complete this survey?

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

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

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

_____

THANK YOU

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

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

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

Oregon Health Authority

DataStat

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

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

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

INSTRUCCIONES PARA EL CUESTIONARIO

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

Marca Correcta ● **Marca Incorrecta**

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

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

⬇ COMIENCE AQUI ⬇

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

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

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

   _____

LA ATENCIÓN MÉDICA QUE USTED RECIBIÓ EN LOS ÚLTIMOS 6 MESES

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

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

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

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

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

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

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

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

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

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

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

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

- ○ Sí
- ○ No

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

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

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

- ○ Sí
- ○ No

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

- ○ Sí
- ○ No

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

- ○ Sí
- ○ No

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

○	○	○	○	○	○	○	○	○	○	○
0	1	2	3	4	5	6	7	8	9	10
La peor atención médica posible										La mejor atención médica posible

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

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

SU DOCTOR PERSONAL

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

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 24***

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

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

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

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

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

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

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

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

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

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

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

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 23***

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

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

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

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

LA ATENCIÓN MÉDICA QUE RECIBIÓ DE ESPECIALISTAS

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

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

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

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

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

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

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

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

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

SU PLAN DE SALUD

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

PREGUNTAS ADICIONALES

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

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

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

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

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

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

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

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

- ○ Sí, definitivamente
- ○ Sí, algo
- ○ No

ACCESO A CUIDADO DENTAL

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

- ○ Sí
- ○ No

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

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

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

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

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

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

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

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

35n. Usando un número del 0 al 10, el 0 siendo extremadamente difícil y el 10 extremadamente fácil, ¿qué número usaría para calificar cuán fácil le fue encontrar un dentista?

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

ACERCA DE USTED

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

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

37. En general, ¿cómo calificaría toda su salud <u>mental o emocional</u>?

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

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

- ○ Sí
- ○ No
- ○ No sé

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

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

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

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

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

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

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

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

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

- ○ Sí
- ○ No
- ○ No sé

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

- ○ Sí
- ○ No
- ○ No sé

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

- ○ Sí
- ○ No

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

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

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

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

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

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

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

- ○ Sí
- ○ No

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

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

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

- ○ Sí
- ○ No

52. ¿Qué edad tiene?

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

53. ¿Es usted hombre o mujer?

- ○ Hombre
- ○ Mujer

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

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

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

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

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

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

_____

57. ¿Le ayudó alguien a completar esta encuesta?

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

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

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

_____

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

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

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

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

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

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

INSTRUCCIONES PARA EL CUESTIONARIO

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

Marca Correcta ● **Marca Incorrecta**

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

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

⬇ COMIENCE AQUI ⬇

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

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

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

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

   _____

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

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

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

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

4. En los últimos 6 meses, cuando su niño necesitó atención inmediata, ¿con qué frecuencia atendieron a su niño tan pronto como él o ella lo necesitaba?

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

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

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

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

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

7. En los últimos 6 meses, sin contar las veces en que su niño fue a una sala de emergencia, ¿cuántas veces fue su niño a un consultorio médico o a una clínica para que lo atendieran?

- ○ Ninguna vez ➔ ***Pase a la pregunta 16***
- ○ 1 vez
- ○ 2
- ○ 3
- ○ 4
- ○ 5 a 9
- ○ 10 veces o más

8. En los últimos 6 meses, ¿hablaron usted y el doctor u otro profesional médico de su niño sobre cosas específicas que usted podría hacer para prevenir que su niño se enferme?

- ○ Sí
- ○ No

9. En los últimos 6 meses, ¿con qué frecuencia le contestaron sus preguntas los doctores u otros profesionales médicos de su niño?

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

10. En los últimos 6 meses, ¿hablaron usted y el doctor u otro profesional médico de su niño sobre comenzar o suspender una medicina recetada?

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 14***

11. ¿Hablaron usted y un doctor u otro profesional médico sobre las razones por las que tal vez usted quiera que su niño tome una medicina?

- ○ Sí
- ○ No

12. ¿Hablaron usted y un doctor u otro profesional médico sobre las razones por las que tal vez usted no quiera que su niño tome una medicina?

- ○ Sí
- ○ No

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

- ○ Sí
- ○ No

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

○	○	○	○	○	○	○	○	○	○	○
0	1	2	3	4	5	6	7	8	9	10
La peor atención médica posible										La mejor atención médica posible

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

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

16. ¿Está matriculado actualmente su niño en algún tipo de escuela o guardería/cuidado infantil?

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 19***

17. En los últimos 6 meses, ¿necesitó que los doctores o los otros profesionales médicos de su niño se pusieran en contacto con una escuela o guardería acerca de la salud o la atención médica de su niño?

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 19***

18. En los últimos 6 meses, ¿consiguió la ayuda de los doctores o los otros profesionales médicos de su niño que necesitaba para ponerse en contacto con la escuela o guardería de su niño?

- ○ Sí
- ○ No

SERVICIOS ESPECIALIZADOS

19. En el equipo o dispositivo médico especial se incluye un andador, silla de ruedas, nebulizador, tubos de alimentación o equipo de oxígeno. En los últimos 6 meses, ¿consiguió o intentó conseguir algún equipo o dispositivo médico especial para su niño?

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 22***

20. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir equipo o dispositivos médicos especiales para su niño?

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

21. ¿Alguien del plan de salud, del consultorio médico o clínica de su niño le ayudó a conseguir el equipo o dispositivos médicos especiales para su niño?

- ○ Sí
- ○ No

22. En los últimos 6 meses, ¿consiguió o intentó conseguir terapia especial para su niño tal como terapia física, ocupacional o del habla?

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 25***

23. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir esta terapia para su niño?

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

24. ¿Alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a conseguir esta terapia para su niño?

- ○ Sí
- ○ No

25. En los últimos 6 meses, ¿consiguió o intentó conseguir tratamiento o consejería para su niño, para un problema emocional, de desarrollo o de comportamiento?

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

26. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir este tratamiento o consejería para su niño?

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

27. ¿Alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a conseguir este tratamiento o consejería para su niño?

- ○ Sí
- ○ No

28. En los últimos 6 meses, ¿recibió su niño atención de más de un tipo de profesional médico, o usó más de un tipo de servicio de salud?

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

29. En los últimos 6 meses, ¿alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a coordinar la atención médica de su niño entre estos profesionales o servicios diferentes?

- ○ Sí
- ○ No

EL DOCTOR PERSONAL DE SU NIÑO

30. El doctor personal es aquel a quien su niño va si necesita un chequeo, tiene un problema de salud o si se enferma o lastima. ¿Tiene su niño un doctor personal?

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 45***

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

- ○ Ninguna vez ➔ ***Pase a la pregunta 41***
- ○ 1 vez
- ○ 2
- ○ 3
- ○ 4
- ○ 5 a 9
- ○ 10 veces o más

31a. En los últimos 6 meses, ¿con qué frecuencia se le hizo difícil hablar o entender al doctor personal de su niño porque hablaban idiomas diferentes?

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

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

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

33. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño le escuchó a usted con atención?

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

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

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

35. ¿Su niño puede hablar con los doctores sobre su atención médica?

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 37***

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

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

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

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

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

- ○ Sí
- ○ No

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

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

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

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

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

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

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

○ Sí
○ No ➔ ***Pase a la pregunta 45***

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

○ Sí
○ No

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

○ Sí
○ No

LA ATENCIÓN MÉDICA QUE RECIBIÓ DE ESPECIALISTAS

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

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

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

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

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

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

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

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

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

EL PLAN DE SALUD DE SU NIÑO

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

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

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

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

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

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

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

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

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

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

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

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

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

MEDICINAS RECETADAS

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

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

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

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

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

- ○ Sí
- ○ No

ACCESO A CUIDADO DENTAL

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

- ○ Sí
- ○ No

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

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

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

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

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

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

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

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

ACERCA DE USTED Y DE SU NIÑO

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

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

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

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

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

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 63***

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

- ○ Sí
- ○ No ➔ ***Pase a la pregunta 63***

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

- ○ Sí
- ○ No

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

○ Sí
○ No ➔ ***Pase a la pregunta 66***

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

○ Sí
○ No ➔ ***Pase a la pregunta 66***

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

○ Sí
○ No

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

○ Sí
○ No ➔ ***Pase a la pregunta 69***

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

○ Sí
○ No ➔ ***Pase a la pregunta 69***

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

○ Sí
○ No

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

○ Sí
○ No ➔ ***Pase a la pregunta 72***

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

○ Sí
○ No ➔ ***Pase a la pregunta 72***

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

○ Sí
○ No

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

○ Sí
○ No ➔ ***Pase a la pregunta 74***

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

○ Sí
○ No

74. ¿Qué edad tiene <u>su niño</u>?

○ Menos de un año

☐☐ AÑOS (escriba la respuesta)

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

○ Masculino
○ Femenino

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

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

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

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

_____

78. ¿Qué edad tiene usted?

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

79. ¿Es usted hombre o mujer?

- ○ Hombre
- ○ Mujer

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

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

81. ¿Qué relación tiene con el niño?

- ○ Madre o padre
- ○ Abuelo o abuela
- ○ Tía o tío
- ○ Hermano o hermana mayor
- ○ Otro familiar
- ○ Tutor legal del niño
- ○ Otra persona

82. ¿Le ayudó alguien a completar esta encuesta?

- ○ Sí ➔ ***Pase a la pregunta 83***
- ○ No ➔ ***Gracias. Por favor devuelva esta encuesta en el sobre con el porte o franqueo pagado.***

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

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

_____

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

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

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

DIAL.SCREEN

DS. INTERVIEWER: YOU MAY DO THE INTERVIEW WITH ONLY THE [NAMED RESPONDENT. NO PROXIES WILL BE ACCEPTED/PARENT/GUARDIAN/OR ADULT WHO KNOWS MOST ABOUT [MEMBER NAME] 'S HEALTH CARE] .

PHONE NUMBER ---> [1 CELL PHONE - HAND DIAL (###) ### - #### /*** ***-****]

Hello, I'm calling about a health care survey on behalf of [HEALTH PLAN NAME]. This call will be recorded and may be monitored for quality and
training purposes. May I please speak with [[MEMBER FIRST NAME] [MEMBER LAST NAME]/the person who knows the most about [NAME OF CHILD]'s health care]?

We are conducting an important study to find out how satisfied [people/families] are with [HEALTH PLAN NAME]. The results of the study will help [HEALTH PLAN NAME] improve the care they provide and will also help consumers when they choose health care plans.

The interview is completely confidential and voluntary, and will not affect [your/your child's] health care or benefits in any way.

01. CONTINUE
02. ALREADY COMPLETED AND MAILED SURVEY BACK
03. NEW PHONE NUMBER
04. REFUSAL
05. APPOINTMENT
06. NEVER HEARD OF R
07. KNOWS R BUT HAS NO NEW NUMBER FOR R
08. RNA, ANS MACH, RETURN TO COVERSHEET
09. LANGUAGE PROBLEM -- SPEAKS SPANISH
10. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH
11. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)

IF DIAL.SCREEN = 01, GO TO START2
IF DIAL.SCREEN = 02, GO TO MAIL.SCREEN
IF DIAL.SCREEN = 03, ENTER NEW NUMBER ON COVERSHEET AND RE-DIAL

RETURN TO COVERSHEET

MAIL.SCREEN
MS. INTERVIEWER: WE STILL NEED TO CONDUCT A TELEPHONE INTERVIEW EVEN THOUGH R SAYS THEY'VE SENT BACK THE MAIL SURVEY.

I'm sorry, but we haven't received your survey back -- it may have been lost in the mail. And since the deadline for mailing surveys has passed, we're now in the telephone phase of this study. May I continue?

(IF NEEDED: "This is purely a research study -- we are polling people about [their/their child's] health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

1. CONTINUE
2. REFUSAL BECAUSE ALREADY COMPLETED AND MAILED SURVEY BACK
3. REFUSAL
4. APPOINTMENT
5. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)

IF MAIL.SCREEN = 1, GO TO START2
RETURN TO COVERSHEET

SEX
SEX. (IWER: RECORD RESPONDENT'S SEX, 'DK' NOT ALLOWED)

1. MALE
2. FEMALE

SPAN.VAR
(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

1. Spanish
2. English

MEMBER
Q1. / MEMBER

[/I will be asking you about [NAME OF CHILD]'s health care. Please answer these questions based on the experiences you have had in getting health care for [NAME OF CHILD], and not on any experiences you may have had getting care for yourself or other members of your family.]

Our records show that [you/your child] [are/is] now in [HEALTH PLAN NAME]. Is that right?

(IWER: IF R SAYS "LEFT PLAN" OR "SWITCHED PLANS" OR "NO LONGER INSURED" ENTER "2". IF R IS NOT SURE IF HE/SHE IS PART OF [HEALTH PLAN NAME], ENTER "2".)

1. YES ----------> CK.PLMSTCR
2. NO

DK/REFUSAL/NOT ASCERTAINED

NPLNAME
Q2. / NPLNAME

What is the name of [your/your child's] health plan?

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS [HEALTH PLAN NAME]]

[(ENTER 5 IF R SAYS: MEDICAID)]

(IF R SAYS SOMETHING CLOSE TO [HEALTH PLAN NAME], ENTER "2")

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

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

PLNAME
Q2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)

_____

CK.PLMSTCR:

IF NPLNAME = NOT A MATCH (3), GO TO END.SCREEN

INTRO.INCARE

INTRO.INCARE

Now I'm going to ask you some questions about [your own/your child's] health care. When you answer these questions, please do NOT include dental visits or care [you/your child] got when [you/+[he/she]] stayed overnight in a hospital.

INCARE

Q3. / INCARE

In the last [12/6] months, did [you/your child] have an illness, injury, or condition that NEEDED CARE RIGHT AWAY in a clinic, emergency room, or doctor's office?

1. YES
2. NO ----------> APMAKE4

DK/REFUSAL/NOT ASCERTAINED --> APMAKE4

CARSN4

Q4. / CARSN4

In the last [12/6] months, when [you/your child] NEEDED CARE RIGHT AWAY, how often did [you/your child] get care as soon as [you/+[he/she]] needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

APMAKE4

Q5. / APMAKE4

In the last [12/6] months, did you make any appointments for a CHECK-UP OR ROUTINE CARE [/for your child] at a doctor's office or clinic?

1. YES
2. NO ----------> OFCTIM4

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

APGET4
Q6. / APGET4

In the last [12/6] months, [/when you made an appointment for a CHECK-UP OR ROUTINE CARE for your child at a doctor's office or clinic,] how often did you get an appointment [for a CHECK-UP OR ROUTINE CARE at a doctor's office or clinic/] as soon as [you/your child] needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

OFCTIM4
Q7. / OFCTIM4

In the last [12/6] months, NOT counting the times [you/your child] went to an emergency room, how many times did [you/+[he/she]] go to a doctor's office or clinic [to get health care for yourself/to get health care]

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

(IWER: IF NEEDED CLARIFY: "Please don't include dental care [you/your child] received.")

(IWER: IF NEEDED CLARIFY, "Please include ALL doctor visits including those for routine, regular care and for an illness or injury.")

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

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

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

PRVENT5
Q8. / PRVENT5

In the last [12/6] months, did you and [a/your child's] doctor or other health provider talk about specific things you could do to prevent illness [/in your child?] ?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

IF qnaire<5 then go to RXSTP

OFTQUES
[0/0/0/0/9/9]. / OFTQUES

In the last [12/6] months, how often did you have your questions answered by your child's doctor or other health providers? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXSTP
[9/9/9/9/10/10]. / RXSTP

In the last [12/6] months, did you and [a/your child's] doctor or other health provider talk about starting or stopping a prescription medicine [/for your child] ?

1. YES
2. NO ----------> RTALLCR

DK/REFUSAL/NOT ASCERTAINED --> RTALLCR

NRXWHY
[10/10/10/10/11/11]. / NRXWHY

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

NRXWYNT
[11/11/11/11/12/12]. / NRXWYNT

Did you and a doctor or other health provider talk about the reasons you might NOT want [/your child] to take a medicine?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

RXBST
[12/12/12/12/13/13]. / RXBST

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

RTALLCR
[13/13/13/13/14/14]. / RTALLCR

Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all [your/your child's] health care in the last [12/6] months?

(IF NEEDED: "Please do not include any dental care [you/your child] may have received.")

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

CARNES4
[14/14/14/14/15/15]. / CARNES4

In the last [12/6] months, how often was it easy to get the care, tests, or treatment [you/your child] needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHSCHL
[0/0/0/0/16/16]. / CHSCHL

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

1. YES
2. NO ----------> MEDEQUIP

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

CONTSCHL
[0/0/0/0/17/17]. / CONTSCHL

In the last [12/6] months, did you need your child's doctors or other health providers to contact a school or daycare center about your child's health or health care?

1. YES
2. NO ----------> MEDEQUIP

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

HELPCONT
[0/0/0/0/18/18]. / HELPCONT

In the last [12/6] months, did you get the help you needed from your child's doctors or other health providers in contacting your child's school or daycare?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

MEDEQUIP
[0/0/0/0/19/19]. / MEDEQUIP

Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment. In the last [12/6] months, did you get or try to get any special medical equipment or devices for your child?

1. YES
2. NO ----------> SPCTHY

DK/REFUSAL/NOT ASCERTAINED --> SPCTHY

EZMDEQ
[0/0/0/0/20/20]. / EZMDEQ

In the last [12/6] months, how often was it easy to get special medical equipment or devices for your child? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPMDEQ
[0/0/0/0/21/21]. / HELPMDEQ

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

SPCTHY
[0/0/0/0/22/22]. / SPCTHY

In the last [12/6] months, did you get or try to get special therapy such as physical, occupational, or speech therapy for your child?

1. YES
2. NO ----------> TCPBLM

DK/REFUSAL/NOT ASCERTAINED --> TCPBLM

EZTHP
[0/0/0/0/23/23]. / EZTHP

In the last [12/6] months, how often was it easy to get this therapy for your child? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTHP
[0/0/0/0/24/24]. / HELPTHP

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

TCPBLM
[0/0/0/0/25/25]. / TCPBLM

In the last [12/6] months, did you get or try to get treatment or counseling for your child for an emotional, developmental, or behavioral problem?

1. YES
2. NO ----------> PLUSCARE

DK/REFUSAL/NOT ASCERTAINED --> PLUSCARE

EZTC
[0/0/0/0/26/26]. / EZTC

In the last [12/6] months, how often was it easy to get this treatment or counseling for your child? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTC
[0/0/0/0/27/27]. / HELPTC

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

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

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

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

DK/REFUSAL/NOT ASCERTAINED --> PRSNLD4

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

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

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

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

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

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

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

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

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

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

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

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

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

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

PBDRLNG
31a. / PBDRLANG

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

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

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

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

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

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

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

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

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

1. YES
2. NO ----------> DRTMEN4

DK/REFUSAL/NOT ASCERTAINED --> DRTMEN4

CDREXPL
[0/0/21/21/36/36]. / CDREXPL

In the last [12/6] months, how often did your child's personal doctor explain things in a way that was easy for YOUR CHILD to understand? Would you say...

(READ LIST)

1. NEVER
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTMEN4
[20/20/22/22/37/37]. / DRTMEN4

In the last [12/6] months, how often did [your/your child's] personal doctor spend enough time with [you/your child] ? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTLKU
[0/0/23/23/38/38]. / DRTLKU

In the last [12/6] months, did your child's personal doctor talk with you about how your child is feeling, growing, or behaving?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

DIFFDR
[21/21/24/24/39/39]. / DIFFDR

In the last [12/6] months, did [you/your child] get care from a doctor or other health provider besides [your/+[his/her]] personal doctor?

1. YES
2. NO ----------> RATEDR4

DK/REFUSAL/NOT ASCERTAINED --> RATEDR4

DRINFO
[22/22/25/25/40/40]. / DRINFO

In the last [12/6] months, how often did [your/your child's] personal doctor seem informed and up-to-date about the care [you/your child] got from these doctors or other health providers? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RATEDR4
[23/23/26/26/41/41]. / RATEDR4

Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate [your/your child's] personal doctor?

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

COND3MO
[0/0/0/0/42/42]. / COND3MO

Does your child have any medical, behavioral, or other health conditions that have lasted for more than 3 MONTHS?

1. YES
2. NO ----------> INTRO.SPDR

DK/REFUSAL/NOT ASCERTAINED --> INTRO.SPDR

DRUNCON
[0/0/0/0/43/43]. / DRUNCON

Does your child's personal doctor understand how these medical, behavioral, or other health conditions affect your child's day-to-day life?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

DRUNFAM
[0/0/0/0/44/44]. / DRUNFAM

Does your child's personal doctor understand how your child's medical, behavioral, or other health conditions affect your FAMILY'S day-to-day life?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.SPDR
INTRO.SPDR

Now I'm going to ask you some questions about specialists. When you answer these questions, please do NOT include [dental visits or care you got when you stayed overnight in a hospital. /dental visits or care your child got when (he/she) stayed overnight in a hospital.]

NDSPDR4
[24/24/27/27/45/45]. / NDSPDR4

SPECIALISTS are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.

In the last [12/6] months, did you make any appointments [/for your child] to see a specialist?

(CLARIFY IF NEEDED: "Specialists are doctors who specialize in one area of health care. Please include all doctors you consider to be specialists, but do not include any dental visits.")

(IWER: IF RESPONDENT ASKS IF A PARTICULAR TYPE OF DOCTOR IS A SPECIALIST, CLARIFY, "I don't have any information about that, so please just interpret it however it seems best to you.")

(CLARIFY IF NEEDED: "You can interpret this question however it seems best to you.")

1. YES
2. NO ----------> INTRO.PLAN

DK/REFUSAL/NOT ASCERTAINED --> INTRO.PLAN

PRBSEE4
[25/25/28/28/46/46]. / PRBSEE4

In the last [12/6] months, how often did you get an appointment [/for your child] to see a specialist as soon as you needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

SPDRS
[26/26/29/29/47/47]. / SPDRS

How many specialists [have/has] [you/your child] seen in the last [12/6] months?

(CLARIFY IF NEEDED: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. Would you say [you've/your child has] seen...")

(READ LIST IF NEEDED: "Would you say...")

0. NONE, ----------> INTRO.PLAN
1. 1 SPECIALIST,
2. 2,
3. 3,
4. 4, OR
5. 5 OR MORE SPECIALISTS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> INTRO.PLAN

RTSPDR4
[27/27/30/30/48/48]. / RTSPDR4

We want to know your rating of the specialist [you/your child] saw most often in the last [12/6] months.

Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

(Clarify if necessary: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.")

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN
INTRO.PLAN

Now I'm going to ask you some questions about your experience with [your/your child's] health plan.

LOOMAT4
[28/28/0/0/0/0]. / LOOMAT4

In the last [12/6] months, did you look for any information in written materials or on the Internet about how your health plan works?

1. YES
2. NO ----------> CK.LOOSVC

DK/REFUSAL/NOT ASCERTAINED --> CK.LOOSVC

UNDINF4
[29/29/0/0/0/0]. / UNDINF4

In the last [12/6] months, how often did the written materials OR the Internet provide the information you needed about how your health plan works? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CK.LOOSVC
IF qnaire=02 then go to CLCSRV4

LOOSVC
[30/0/0/0/0/0]. / LOOSVC

Sometimes people need services or equipment beyond what is provided in a regular or routine office visit, such as care from a specialist, physical therapy, a hearing aid, or oxygen.

In the last 12 months, did you look for information from your health plan on how much you would have to pay for a health care service or equipment?

1. YES
2. NO ----------> LOOMED

DK/REFUSAL/NOT ASCERTAINED --> LOOMED

FNDSVC
[31/0/0/0/0/0]. / FNDSVC

In the last 12 months, how often were you able to find out from your health plan how much you would have to pay for a health care service or equipment? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

LOOMED
[32/0/0/0/0/0]. / LOOMED

In some health plans the amount you pay for a prescription medicine can be different for different medicines, or can be different for prescriptions filled by mail instead of at the pharmacy.

In the last 12 months, did you look for information from your health plan on how much you would have to pay for specific prescription medicines?

1. YES
2. NO ----------> CLCSRV4

DK/REFUSAL/NOT ASCERTAINED --> CLCSRV4

FNDMED
[33/0/0/0/0/0]. / FNDMED

In the last 12 months, how often were you able to find out from your health plan how much you would have to pay for specific prescription medicines? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CLCSRV4
[34/30/31/31/49/49]. / CLCSRV4

In the last [12/6] months, did you get information or help from [your health plan's customer service/customer service at your child's health plan] ?

1. YES
2. NO ----------> PLPRWK4

DK/REFUSAL/NOT ASCERTAINED --> PLPRWK4

PBCLCS4
[35/31/32/32/50/50]. / PBCLCS4

In the last [12/6] months, how often did [your health plan's customer service/customer service at your child's health plan] give you the information or help you needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CSRESP
[36/32/33/33/51/51]. / CSRESP

In the last [12/6] months, how often did [your health plan's/] customer service staff [/at your child's health plan] treat you with courtesy and respect? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLPRWK4
[37/33/34/34/52/52]. / PLPRWK4

In the last [12/6] months, did [your/your child's] health plan give you any forms to fill out?

1. YES
2. NO ----------> CK.SNDCLMS

DK/REFUSAL/NOT ASCERTAINED --> CK.SNDCLMS

PBPLPW4
[38/34/35/35/53/53]. / PBPLPW4

In the last [12/6] months, how often were the forms from [your/your child's] health plan easy to fill out? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CK.SNDCLMS
SNDCLM4
[39/0/0/0/0/0]. / SNDCLM4

Claims are sent to a health plan for payment. You may send in the claims yourself, or doctors, hospitals, or others may do this for you.

In the last [12/6] months, did you or anyone else send in any claims for your care to your health plan?

1. YES
2. NO ----------> RTPLEXP
3. DON'T KNOW (DO NOT PROBE) --> RTPLEXP

9. REFUSAL/NOT ASCERTAINED ----> RTPLEXP

CLMTMR4
[40/0/0/0/0/0]. / CLMTMR4

In the last [12/6] months, how often did your health plan handle your claims quickly? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

5. DON'T KNOW (DO NOT READ) (DO NOT PROBE)

9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

CLMCRCT
[41/0/0/0/0/0]. / CLMCRCT

In the last [12/6] months, how often did your health plan handle [your/your child's] claims correctly? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

5. DON'T KNOW (DO NOT READ) (DO NOT PROBE)

9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTPLEXP
[42/35/36/36/54/54]. / RTPLEXP

Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate [your/your child's] health plan?

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

IF QNAIRE= CHILD MED W/CCC (07), GO TO CHPRES

HPMDEQ
[0/35.01/0/0/0/0]. / HPMDEQ

In the last [12/6] months, did you have a health problem for which you needed special medical equipment, such as a cane, a wheelchair, or oxygen equipment?

1. YES
2. NO ----------> POSTHP

DK/REFUSAL/NOT ASCERTAINED --> POSTHP

EZMDHP
[0/35.02/0/0/0/0]. / EZMDHP

In the last [12/6] months, how often was it easy to get the medical equipment you needed through your health plan? Would you say...?

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

POSTHP
[0/35.03/0/0/0/0]. / POSTHP

In the last [12/6] months, did you have any health problems that needed special therapy, such as physical, occupational, or speech therapy?

1. YES
2. NO ----------> INTRO.DTLK

DK/REFUSAL/NOT ASCERTAINED --> INTRO.DTLK

EZPOST
[0/35.04/0/0/0/0]. / EZPOST

In the last [12/6] months, how often was it easy to get the special therapy you needed through your health plan? Would you say...?

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

INTRO.DTLK
INTRO.DTLK

The following questions ask about how much you think your doctor or other health provider respects your beliefs, attitudes, language and behavior.

DTLKTF
[0/35.5/0/0/0/0]. / DTLKTF

In the last [12/6] months, how often did a doctor or other health provider talk too fast when talking to you? Would you say...?

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DINTER
[0/35.6/0/0/0/0]. / DINTER

In the last [12/6] months, how often did a doctor or other health provider interrupt you when you were talking? Would you say...?

(READ LIST IF NECESSARY)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRRUDE
[0/35.7/0/0/0/0]. / DRRUDE

In the last [12/6] months, how often did a doctor or other health provider use a condescending, sarcastic or rude tone or manner with you? Would you say...?

(READ LIST IF NECESSARY)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

TRUSTDR
[0/35.8/0/0/0/0]. / TRUSTDR

In the last [12/6] months, did you feel you could trust a doctor or other health provider with your medical care?

(READ LIST)

1. YES DEFINITELY,
2. YES SOMEWHAT, OR
3. NO?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

REGDENT
[0/35.9/0/0/0/57.01]. / REGDENT

A regular dentist is one [you/your child] would go to for check-ups and cleanings or when [you/+[he/she]] [have/has] a cavity or tooth pain.

[Do you/Does your child] have a regular dentist?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

GODENT
[0/35.10/0/0/0/57.02]. / GODENT

In the last 6 months, did [you/your child] go to a dentist's office or clinic for care?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

IF QNAIRE = ADULT MEDICAID (02) AND GODENT <> YES, GO TO CK.DENTSOON
IF QNAIRE = CHILD MEDICAID W/CCC (07) AND GODENT <> YES, GO TO DNTASAP

DENTEXPL
[0/35.11/0/0/0/57.03]. / DENTEXPL

In the last [12/6] months, how often did [your/your child's] dentist or dental staff explain what they were doing while treating [you/your child]? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CK.DENTSOON
IF QNAIRE = CHILD MEDICAID W/CCC (07), GO TO DNTASAP

DENTSOON
[0/35.12/0/0/0/0]. / DENTSOON

If you tried to get an appointment for yourself with a dentist who specializes in a particular type of dental care (such as root canals or gum disease) in the last 6 months, how often did you get an appointment as soon as you wanted?

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

5. DID NOT TRY TO GET AN APPOINTMENT WITH A SPECIALIST DENTIST IN THE LAST 6 MONTHS (DO NOT READ)

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DNTASAP
[0/35.13/0/0/0/57.04]. / DNTASAP

In the last [12/6] months, if [you/your child] needed to see a dentist right away because of a DENTAL EMERGENCY, did [you/+[he/she]] get to see a dentist as soon as you wanted? Would you say...

(IWER: IF R RESPONDS WITH "YES/NO" PLEASE PROBE WITH RESPONSE OPTIONS)

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

5. DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS (DO NOT READ)

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTDENT
[0/35.14/0/0/0/57.03]. / RTDENT

Using any number from 0 to 10, where 0 is extremely difficult and 10 is extremely easy, what number would you use to rate how easy it was for you to find a dentist [/for your child] ?

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

GO TO HLTSTA4

CHPRES
[0/0/0/0/55/55]. / CHPRES

In the last [12/6] months, did you get or refill any prescription medicines for your child?

1. YES
2. NO ----------> REGDENT

DK/REFUSAL/NOT ASCERTAINED --> REGDENT

EZPRES
[0/0/0/0/56/56]. / EZPRES

In the last [12/6] months, how often was it easy to get prescription medicines for your child through [your/+[his/her]] health plan? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPPRES
[0/0/0/0/57/57]. / HELPPRES

Did anyone from your child's health plan, doctor's office, or clinic help you get your child's prescription medicines?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

IF QNAIRE = CHILD MEDICAID W/CCC, GO TO REGDENT

HLTSTA4
[43/36/37/37/58/58]. / HLTSTA4

[/I have just a few more questions.]

In general, how would you rate [your/your child's] overall health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

MNTLSTAT
[44/37/38/38/59/59]. / MNTLSTAT

In general, how would you rate [your/your child's] overall MENTAL OR EMOTIONAL health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CUSEMED
[0/0/0/0/60/60]. / CUSEMED

Other than vitamins, does your child currently need or use medicine prescribed by a doctor?

1. YES
2. NO ----------> MOREMED

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

WHYMEDA
[0/0/0/0/61/61]. / WHYMEDA

Is this because of any medical, behavioral, or other health condition?

1. YES
2. NO ----------> MOREMED

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

WHYMEDB
[0/0/0/0/62/62]. / WHYMEDB

Is this a condition that has lasted or is expected to last for at least 12 months?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

MOREMED
[0/0/0/0/63/63]. / MOREMED

Does your child need or use more medical care, more mental health services, or more educational services than is usual for most children of the same age?

1. YES
2. NO ----------> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

WHYMOREA
[0/0/0/0/64/64]. / WHYMOREA

Is this because of any medical, behavioral, or other health condition?

1. YES
2. NO ----------> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

WHYMOREB
[0/0/0/0/65/65]. / WHYMOREB

Is this a condition that has lasted or is expected to last for at least 12 months?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

LIMITED
[0/0/0/0/66/66]. / LIMITED

Is your child limited or prevented in any way in [your/+[his/her]] ability to do the things most children of the same age can do?

1. YES
2. NO ----------> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --> SPECTHP

WHYLIMA
[0/0/0/0/67/67]. / WHYLIMA

Is this because of any medical, behavioral, or other health condition?

1. YES
2. NO ----------> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --> SPECTHP

WHYLIMB
[0/0/0/0/68/68]. / WHYLIMB

Is this a condition that has lasted or is expected to last for at least 12 months?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

SPECTHP
[0/0/0/0/69/69]. / SPECTHP

Does your child need or get special therapy such as physical, occupational, or speech therapy?

1. YES
2. NO ----------> CHCOUNS

DK/REFUSAL/NOT ASCERTAINED --> CHCOUNS

WHYSTA
[0/0/0/0/70/70]. / WHYSTA

Is this because of any medical, behavioral, or other health condition?

1. YES
2. NO ----------> CHCOUNS

DK/REFUSAL/NOT ASCERTAINED --> CHCOUNS

WHYSTB
[0/0/0/0/71/71]. / WHYSTB

Is this a condition that has lasted or is expected to last for at least 12 months?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

CHCOUNS
[0/0/0/0/72/72]. / CHCOUNS

Does your child have any kind of emotional, developmental, or behavioral problem for which [you/+[he/she]] needs or gets treatment or counseling?

1. YES
2. NO ----------> CAGE

DK/REFUSAL/NOT ASCERTAINED --> CAGE

TIMCOUNA
[0/0/0/0/73/73]. / TIMCOUNA

Has this problem lasted or is it expected to last for at least 12 months?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

FLUSHOTQ
[45/38/0/0/0/0]. / FLUSHOTQ

Have you had either a flu shot or flu spray in the nose since July 1, 2015?

1. YES
2. NO
3. DON'T KNOW

9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

NOWSMOK
[46/39/0/0/0/0]. / NOWSMOK

Do you now smoke cigarettes or use tobacco...

(READ LIST)

1. EVERY DAY,
2. SOME DAYS, OR
3. NOT AT ALL? ----------> ASPDAY

4. DON'T KNOW (DO NOT READ) ----------> ASPDAY
9. REFUSAL/NOT ASCERTAINED (DO NOT READ) --> ASPDAY

ADVQUIT9
[47/40/0/0/0/0]. / ADVQUIT9

In the last [12/6] months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PATCH9
[48/41/0/0/0/0]. / PATCH9

In the last [12/6] months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication. Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

WILLPWR9
[49/42/0/0/0/0]. / WILLPWR9

In the last [12/6] months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program. Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPDAY
[50/43/0/0/0/0]. / ASPDAY

Do you take aspirin daily or every other day?

(IF NEEDED: "Would you say YES or NO?")

(IWER: If the R asks about whether a particular medication or Brand name is considered aspirin, you may provide the following clarification:
Aspirin: Bayer and Bufferin
Not Aspirin: Tylenol, Motrin, Aleve, Advil, ibuprofen and acetaminophen)

1. YES
2. NO
3. DON'T KNOW

9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPUSF
[51/44/0/0/0/0]. / ASPUSF

Do you have a health problem or take medication that makes taking aspirin unsafe for you?

(IF NEEDED: "Would you say YES or NO?")

1. YES
2. NO
3. DON'T KNOW

9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPPRV
[52/45/0/0/0/0]. / ASPPRV

Has a doctor or health provider ever discussed with you the risks and benefits of aspirin to prevent heart attack or stroke?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.AWCOND
INTRO.AWCOND

When I read the following list, please tell me if you are aware that you have any of these conditions.

PHAWCD.(1-3)
[53/46/0/0/0/0].(1-3) / PHAWCD.(1-3)

[First,/(Next/How About...)]

1. "High cholesterol"

2. "High blood pressure"

3. "Parent or sibling who had a heart attack before the age of 60"

?

(IWER IF NECESSARY: "Are you aware if you have this condition?")

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.DRCOND
INTRO.DRCOND

When I read the following list, please tell me if a doctor has ever told you that you have any of these conditions.

PHDRCD.(1-4)
[54/47/0/0/0/0].(1-4) / PHDRCD.(1-4)

[First,/(Next/How About...)]

1. "A heart attack"

2. "Angina or coronary heart disease"

3. "A stroke"

4. "Any kind of diabetes or high blood sugar"

?

(IWER IF NECESSARY: "Has a doctor ever told you that you have this condition?")

[FOR PHDRCD.2: (IWER IF NEEDED, CLARIFY: Angina pectoris (an-JYE-nuh or AN-jin-uh PECK-ter-iss) is severe pain in the chest associated with insufficient blood supply to the heart.)]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

SMPROB
[55/48/0/0/0/0]. / SMPROB

[I have just a few more questions./]

In the last [12/6] months, did you get health care 3 or more times for the same condition or problem?

1. YES
2. NO ----------> TKMED

DK/REFUSAL/NOT ASCERTAINED --> TKMED

PRBLST
[56/49/0/0/0/0]. / PRBLST

Is this a condition or problem that has lasted for at least 3 months? [/Please do NOT include pregnancy or menopause.]

[/(IWER IF NEEDED, CLARIFY: Menopause (men-ne-paws) is the time in a woman's life when she stops having menstrual periods. It is sometimes called 'the change of life' or 'the change'.)]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

TKMED
[57/50/0/0/0/0]. / TKMED

Do you now need or take medicine prescribed by a doctor? [/Please do NOT include birth control.]

1. YES
2. NO ----------> QAGE4

DK/REFUSAL/NOT ASCERTAINED --> QAGE4

TRTCOND
[58/51/0/0/0/0]. / TRTCOND

Is this medicine to treat a condition that has lasted for at least three months? [/Please do NOT include pregnancy or menopause.]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

[59/52/0/0/0/0]. / QAGE4

What is your age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your last birthday.")

(READ LIST IF NEEDED, "Are you...")

1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

QGENDER

[60/53/0/0/0/0]. / QGENDER

(IWER: RECORD RESPONDENT'S SEX.)

(ASK IF NECESSARY, "Are you male or female?")

1. MALE
2. FEMALE

DK/REFUSAL/NOT ASCERTAINED

CAGE
[0/0/39/39/74/74]. / CAGE

[/I have just a few more questions.]

What is YOUR CHILD'S age?

(IWER: ENTER 00 IF LESS THAN 1 YEAR OLD)

(IWER: DO NOT ROUND UP)

(IWER: IF NEEDED CLARIFY, "Please answer based on your child's age as of their last birthday.")

__ ENTER CHILD'S AGE

DK/REFUSAL/NOT ASCERTAINED

IF CAGE<19 THEN GO TO CGENDER

CAGE.CK
[0/0/39/39/74/74]a. / CAGE.CK

I have entered that [NAME OF CHILD] is [CAGE] . Is that correct?

("DK" NOT ALLOWED)

1. YES-AGE ENTERED CORRECTLY
2. NO-CORRECT AGE ----------> CAGE

IF cage>18 and cage<>99 then go to ALL.DONE

CGENDER
[0/0/40/40/75/75]. / CGENDER

(IF NEEDED: "Is your child male or female?")

1. MALE
2. FEMALE

REFUSAL/NOT ASCERTAINED

LATINO
[62/55/41/41/76/76]. / LATINO

[Are/Is] [you/your child] of Hispanic or Latino origin or descent?

1. YES / HISPANIC OR LATINO
2. NO / NOT HISPANIC OR LATINO

DK/REFUSAL/NOT ASCERTAINED

INTRO.RACE
INTRO.RACE

I am going to read a list of race categories. For each category, please say YES or NO if it describes [your/your child's] race. I must ask you about all categories in case more than one applies.

PQRACE3.(1-6)
[63/56/42/42/77/77].(1-6) / PQRACE3.(1-6)

[(Are you)/(Is your child)]

1. "White"

2. "Black or African-American"

3. "Asian"

4. "Native Hawaiian or other Pacific Islander"

5. "American Indian or Alaska Native"

6. "Some other race"

?

(IWER: IF R REPLIES "WHY ARE YOU ASKING ABOUT MY [/CHILD'S] RACE?" SAY "We ask about [your/your child's] race for demographic purposes only. We want to be sure that the people we survey accurately represent the racial diversity of managed care enrollees in this country.")

(IWER: If R answers with a category not listed here, such as "HISPANIC" or "AMERICAN" or "MIXED RACE", probe using the category "OTHER".)

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

QRACE3.OTH / QRACE3.OTH
(What is [your/your child's] race?)

_____

PAGE
[0/0/43/43/78/78]. / PAGE

Now I have a few questions about you. What is YOUR age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your last birthday.")

(READ IF NEEDED, "Are you...")

0. UNDER 18,
1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PGENDER
[0/0/44/44/79/79]. / PGENDER

(IWER: ENTER RESPONDENT'S SEX.)

(IWER: IF NECESSARY ASK, "Are you male or female?")

1. MALE
2. FEMALE

DK/REFUSAL/NOT ASCERTAINED

EDUCAT
[61/54/45/45/80/80]. / EDUCAT

What is the highest grade or level of school that you have completed? Did you complete...

(IWER: IF R SAYS HE/SHE HAD NON-ACADEMIC TRAINING, SUCH AS TRADE SCHOOL, PROBE: "Did you receive a high school diploma or GED?")

(IWER: ACADEMIC TRAINING BEYOND A HIGH SCHOOL DIPLOMA THAT DOES NOT LEAD TO A BACHELORS DEGREE, SHOULD BE CODED "4". IF R WENT TO BUSINESS SCHOOL OR GOT A 3-YEAR NURSING DEGREE, ENTER "4")

(IWER: IF R OFFERS MORE THAN ONE RESPONSE, FOR EXAMPLE: "SOME HIGH SCHOOL OR GED", ENTER THE HIGHEST NUMBER THAT APPLIES.)

(READ LIST)

1. 8TH GRADE OR LESS,
2. SOME HIGH SCHOOL, BUT DID NOT GRADUATE,
3. HIGH SCHOOL GRADUATE OR GED,
4. SOME COLLEGE OR 2-YEAR DEGREE,
5. 4-YEAR COLLEGE GRADUATE, OR
6. MORE THAN A 4-YEAR COLLEGE DEGREE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHRELT
[0/0/46/46/81/81]. / CHRELT

How are you related to the child?

(READ IF NEEDED: "Are you the ...")

1. MOTHER OR FATHER,
2. GRANDPARENT,
3. AUNT OR UNCLE,
4. OLDER BROTHER OR SISTER,
5. OTHER RELATIVE,
6. LEGAL GUARDIAN, OR
7. SOMEONE ELSE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ALL.DONE
THANKS.SCREEN.

Those are all the questions I have.

Thank you for taking part in this important interview.

Have a nice (day/evening). Good bye.

RETURN TO COVERSHEET

EDIT.FLG
(IWER: DO YOU NEED TO TYPE AN EDIT?)

1. YES
2. NO

IF EDIT.FLG = 2 THEN GO TO CK.END.EDIT

EDIT.OTH
EDIT.OTH. (IWER: PLEASE TYPE YOUR EDIT-BE SPECIFIC-INCLUDE:

1) QUESTION NUMBER(S)
2) WHAT WAS ENTERED
3) WHAT NEEDS TO BE CHANGED

_____

CK.END.EDIT
LANG.DID
LANG.DID. IWER: DID YOU DO THIS INTERVIEW IN...

1. ENGLISH,
2. SPANISH OR
3. BOTH?