



FamilyCare
CAHPS® 5.0 Medicaid Survey

Banner Book Report

June 2015



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METHODOLOGY

Introduction

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

Survey Milestones

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

Sampling

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

Questionnaires

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

Selection of Cases for Analysis

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

Composites, Overall Ratings, and Measures for Reporting

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

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

Composite: Getting Needed Care

Q14/15. Got care, tests or treatment you thought you needed

Q25/46. Getting appointments with specialists

Composite: Getting Care Quickly

Q4/4. Got care for illness/injury/condition as soon as you thought you/child needed

Q6/6. Got an appt. for routine care as soon as you thought you/child needed

Composite: How Well Doctors Communicate

Q17/32. Personal doctor explained things in a way that was easy to understand

Q18/33. Personal doctor listened carefully to you

Q29/34. Personal doctor showed respect for what you had to say

Q20/37. Personal doctor spent enough time with you

Composite: Customer Service

Q31/50. Health plan's customer service gave needed information or help

Q32/51. Treated with courtesy and respect by health plan's customer service staff

Composite: Shared Decision Making

Q10/11. Doctor talked about reasons you might want to take a medicine

Q11/12. Doctor talked about reasons you might not want to take a medicine

Q12/13. Doctor talked about what you thought was best for you when discussing a medication

Rating Questions

Q13/14. Rating of all health care

Q23/41. Rating of personal doctor

Q27/47. Rating of specialist doctor

Q35/54. Rating of health plan

Composite: Access to Specialized Services (Child only)

Q--/20. Getting special medical equipment or devices for your child

Q--/23. Getting special therapy (physical, occupational, speech) for your child

Q--/26. Getting treatment or counseling for your child

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

Q--/38. Child's personal doctor talked with you about how child is feeling, growing, behaving

Q--/43. Child's personal doctor understands how child's health conditions affect child's day-to-day life

Q--/44. Child's personal doctor understands how child's health conditions affect family's day-to-day life

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

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

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

Comparisons, Statistical Testing, Scoring, and Weighting

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

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

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

Sample Disposition

Category	Adult		Child	
	FamilyCare	Overall	FamilyCare	Overall
**First mailing - sent	900	15300	900	15300
*First mailing - usable survey returned	116	3240	136	2377
Second mailing - sent	754	12007	735	12648
*Second mailing - usable survey returned	71	979	63	987
*Phone - usable surveys	74	1234	113	1999
Total - usable surveys	261	5453	312	5363
†Ineligible: According to population criteria‡	23	261	12	158
†Ineligible: Deceased	1	39	0	1
†Ineligible: Mentally or physically unable to complete survey	4	207	0	0
†Ineligible: Language barrier	6	52	6	40
Incorrect address AND incorrect phone number	84	1173	86	1296
Refusal/Returned survey blank	43	667	36	729
Nonresponse - Unavailable by mail or phone	478	7448	448	7713
Adjusted Response Rate	30.1%	37.0%	35.4%	35.5%

*Included in response rate numerator

†Excluded from adjusted response rate denominator

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

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

Response/Non-Response Comparison

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

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

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

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

Adult

Gender / Age	Non-Respondents	Respondents	Difference
Male	226 43.4%	112 42.9%	-0.47%
Female	295 56.6%	149 57.1%	0.47%
18-24	107 20.5%	22 8.4%	-12.11%
25-34	164 31.5%	54 20.7%	-10.79%
35-44	118 22.6%	51 19.5%	-3.11%
45-54	73 14.0%	64 24.5%	10.51%
55-64	51 9.8%	60 23.0%	13.20%
65-74	7 1.3%	6 2.3%	0.96%
75 or Older	1 0.2%	4 1.5%	1.34%

Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	236 48.8%	175 56.1%	7.33%
Female	248 51.2%	137 43.9%	-7.33%
<3	111 22.9%	60 19.2%	-3.70%
4-7	135 27.9%	91 29.2%	1.27%
8-12	136 28.1%	87 27.9%	-0.21%
13 or older	102 21.1%	74 23.7%	2.64%

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE		
Q1 YES	257 100%	5345 100%	19 100%	42 100%	45 100%	60 100%	60 100%	8 100%	167 100%	15 100%	12 100%	3 100%	3 100%	7 100%	14 100%	33 100%	193 100%	169 100%	63 100%	96 100%	137 100%
NOT ANSWERED	4	108	1	1			1	1	2	1	1					4	2	1	2	2	
VALID CASES	257	5345	19	42	45	60	60	8	167	15	12	3	3	7	14	33	193	169	63	96	137
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

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?

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q3 YES	99 41%	2233 43%	6 30%~	15 37%~	21 48%~	27 46%	23 38%	4 44%~	70 42%	7 44%~	3 23%~	2 67%~	1 33%~	2 29%~	8 62%~	11 33%~	80 42%	64 38%	32 50%	39 40%	57 42%
NO	145 59%	2997 57%	14 70%~	26 63%~	23 52%~	32 54%	37 62%	5 56%~	96 58%	9 56%~	10 77%~	1 33%~	2 67%~	5 71%~	5 38%~	22 67%~	112 58%	103 62%	32 50%	58 60%	78 58%
NOT ANSWERED	17	223		2	1	1	1		3						1		5	4		1	4
VALID CASES	244	5230	20	41	44	59	60	9	166	16	13	3	3	7	13	33	192	167	64	97	135
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH- R	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q4 NEVER	4 4%	63 3%	1 ~	1 8%~	2 5%~	2 8%~	~	4 6%~	~	~	~	~	~	~	~	4 5%~	2 3%~	2 6%~	2 6%~	2 4%~	
SOMETIMES	12 13%	285 14%	1 17%~	1 8%~	3 16%~	3 12%~	4 18%~	10 16%~	1 ~	~	~	~	1 14%~	1 ~	11 15%~	7 12%~	5 16%~	6 17%~	6 11%~		
USUALLY	20 22%	563 28%	1 17%~	5 38%~	4 21%~	6 24%~	4 18%~	14 22%~	2 29%~	1 33%~	~	~	1 50%~	1 14%~	4 36%~	15 20%~	13 22%~	7 23%~	7 19%~	13 25%~	
ALWAYS	56 61%	1115 55%	4 67%~	6 46%~	11 58%~	14 56%~	14 64%~	4 100%~	36 56%~	5 71%~	1 33%~	2 100%~	1 100%~	1 50%~	5 71%~	7 64%~	44 59%~	36 62%~	17 55%~	21 58%~	32 60%~
#ALWAYS + USUALLY (NET)	76 83%	1678 83%	5 83%~	11 85%~	15 79%~	20 80%~	18 82%~	4 100%~	50 78%~	7 100%~	2 67%~	2 100%~	1 100%~	2 100%~	6 86%~	11 100%~	59 80%~	49 84%~	24 77%~	28 78%~	45 85%~
TOP BOX SCORE	56 61%	1115 55%	4 67%~	6 46%~	11 58%~	14 56%~	14 64%~	4 100%~	36 56%~	5 71%~	1 33%~	2 100%~	1 100%~	1 50%~	5 71%~	7 64%~	44 59%~	36 62%~	17 55%~	21 58%~	32 60%~
NOT ANSWERED	7	220	2	2	2	1	6	6	6	1	1	1	5	6	6	1	3	4	3	4	
VALID CASES	92	2026	6	13	19	25	22	4	64	7	3	2	1	2	7	11	74	58	31	36	53
NUMBER OF RESPONDENTS	99	2246	6	15	21	27	23	4	70	7	3	2	1	2	8	11	80	64	32	39	57
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q3 = YES]

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE					RACE							ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q5 YES	160 66%	3616 70%	10 50%~	27 63%~	28 65%~	37 65%	42 70%	9 100%~	108 66%	11 69%~	9 69%~	2 67%~	2 67%~	5 71%~	8 57%~	23 70%~	124 65%	103 62%*	48 76%*	59 62%	93 68%
NO	83 34%	1586 30%	10 50%~	16 37%~	15 35%~	20 35%	18 30%	55 ~34%	5 31%~	4 31%~	1 33%~	1 33%~	2 29%~	6 43%~	10 30%~	67 35%	64 38%*	15 24%*	36 38%	43 32%	
NOT ANSWERED	18	251			2	3	1	6								6	4	1	3	3	
VALID CASES	243	5202	20	43	43	57	60	9	163	16	13	3	3	7	14	33	191	167	63	95	136
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

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?

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE MALE				
Q6 NEVER	5 3%	100 3%	1 10%~	1 4%~	1 4%~	1 3%~	1 3%~	4 4%	1 ~	11%~	~	~	~	~	5 ~	4 4%	1 2%~	1 2%	4 5%		
SOMETIMES	27 18%	562 17%	1 10%~	6 26%~	4 15%~	5 14%~	9 23%~	1 13%~	15 15%	2 18%~	1 11%~	1 50%~	1 50%~	1 25%~	3 43%~	4 19%~	21 18%~	17 18%	9 20%~	11 20%	15 17%
USUALLY	39 26%	870 27%	4 40%~	6 26%~	10 38%~	8 22%~	8 21%~	1 13%~	24 24%	2 18%~	3 33%~	~	~	2 50%~	2 29%~	7 33%~	27 23%~	26 27%	10 22%~	8 15%*	28 32%*
ALWAYS	78 52%	1715 53%	4 40%~	10 43%~	11 42%~	22 61%~	21 54%~	6 75%~	56 57%	7 64%~	4 44%~	1 50%~	1 50%~	1 25%~	2 29%~	10 48%~	62 54%~	48 51%	26 57%~	34 63%*	40 46%
#ALWAYS + USUALLY (NET)	117 79%	2585 80%	8 80%~	16 70%~	21 81%~	30 83%~	29 74%~	7 88%~	80 81%	9 82%~	7 78%~	1 50%~	1 50%~	3 75%~	4 57%~	17 81%~	89 77%~	74 78%	36 78%~	42 78%	68 78%
TOP BOX SCORE	78 52%	1715 53%	4 40%~	10 43%~	11 42%~	22 61%~	21 54%~	6 75%~	56 57%	7 64%~	4 44%~	1 50%~	1 50%~	1 25%~	2 29%~	10 48%~	62 54%~	48 51%	26 57%~	34 63%*	40 46%
NOT ANSWERED	11	326		4	2	1	3	1	9					1	1	2	9	8	2	5	6
VALID CASES	149	3247	10	23	26	36	39	8	99	11	9	2	2	4	7	21	115	95	46	54	87
NUMBER OF RESPONDENTS	160	3573	10	27	28	37	42	9	108	11	9	2	2	5	8	23	124	103	48	59	93
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q5 = YES]

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

	FMCA TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q7 NONE	71 29%	1271 25%	9 45%~	16 38%~	11 25%~	13 22%	18 30%	44 26%	5 31%~	5 38%~	1 33%~	2 67%~	2 29%~	2 21%~	3 33%~	11 33%~	56 29%	54 32%	13 20%	35 36%	32 23%*
1 TIME	33 13%	975 19%*	2 10%~	6 14%~	7 16%~	8 13%	6 10%	2 22%~	26 16%	3 23%~	~	~	~	1 7%~	3 9%~	26 13%	21 12%	9 14%	11 11%	20 15%	
2	49 20%	973 19%	4 20%~	8 19%~	7 16%~	16 27%	11 18%	2 22%~	34 20%	3 19%~	3 23%~	~	~	3 43%~	4 29%~	9 27%~	37 19%	35 21%	13 20%	17 18%	30 22%
3	22 9%	600 12%	1 5%~	2 5%~	7 16%~	5 8%	5 8%	1 11%~	17 10%	1 8%~	1 33%~	1 33%~	~	~	3 9%~	17 9%	15 9%	6 9%	2 2%*	19 14%*	
4	26 11%	448 9%	~	5 12%~	5 11%~	5 8%	10 17%	~	16 10%	3 19%~	1 8%~	~	~	1 14%~	2 14%~	2 6%~	22 11%	18 11%	7 11%	11 11%	14 10%
5 TO 9	28 11%	631 12%	3 15%~	3 7%~	4 9%~	8 13%	6 10%	3 33%~	18 11%	4 25%~	1 33%~	~	1 14%~	1 7%~	3 9%~	23 12%	18 11%	9 14%	16 16%	11 8%	
10 OR MORE TIMES	16 7%	265 5%	1 5%~	2 5%~	3 7%~	5 8%	4 7%	1 11%~	12 7%	1 6%~	~	~	~	3 21%~	2 6%~	13 7%	8 5%	7 11%	5 5%	11 8%	
NOT ANSWERED	16	290	1	1		1			2						3	2			1	2	
VALID CASES	245	5163	20	42	44	60	60	9	167	16	13	3	3	7	14	33	194	169	64	97	137
NUMBER OF RESPONDENTS	261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE			
Q8 #YES	128 76%	2683 71%	10 91%~	15 60%~	21 64%~	35 78%~	35 85%~	8 89%~	85 71%~	11 100%~	6 75%~	2 100%~	1 100%~	5 100%~	8 80%~	18 86%~	99 73%~	83 75%	40 78%	53 85%*	71 70%*
NO	41 24%	1081 29%	1 9%~	10 40%~	12 36%~	10 22%~	6 15%~	1 11%~	35 29%~	2 ~ 25%~	~	~	~	2 ~ 20%~	3 14%~	37 27%~	28 25%	11 22%	9 15%*	30 30%*	
NOT ANSWERED	5	79	1			2	1		3					1	1	2	4			4	
VALID CASES	169	3764	11	25	33	45	41	9	120	11	8	2	1	5	10	21	136	111	51	62	101
NUMBER OF RESPONDENTS	174 100%	3843 100%	11 100%	26 100%	33 100%	47 100%	42 100%	9 100%	123 100%	11 100%	8 100%	2 100%	1 100%	5 100%	11 100%	22 100%	138 100%	115 100%	51 100%	62 100%	105 100%

[ASKED IF Q7 >= 1 TIME]

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHTE	AS- IAN AMER	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q9 YES	99 2125 58% 57%	6 55%~	12 48%~	19 58%~	26 57%~	26 63%~	8 89%~	72 60%~	5 45%~	4 50%~	2 100%~	1 100%~	2 40%~	7 70%~	13 62%~	80 59%~	64 57%	31 61%	40 65%	56 55%
NO	71 1611 42% 43%	5 45%~	13 52%~	14 42%~	20 43%~	15 37%~	1 11%~	49 40%~	6 55%~	4 50%~	~ ~	3 60%~	3 30%~	8 38%~	56 41%~	48 43%	20 39%	22 35%	46 45%	
NOT ANSWERED	4 107	1			1	1		2					1	1	2	3			3	
VALID CASES	170 3736	11 100%	25 100%	33 100%	46 100%	41 100%	9 100%	121 100%	11 100%	8 100%	2 100%	1 100%	5 100%	10 100%	21 100%	136 100%	112 100%	51 100%	62 100%	102 100%
NUMBER OF RESPONDENTS	174 3843 100% 100%	11 100%	26 100%	33 100%	47 100%	42 100%	9 100%	123 100%	11 100%	8 100%	2 100%	1 100%	5 100%	11 100%	22 100%	138 100%	115 100%	51 100%	62 100%	105 100%

[ASKED IF Q7 >= 1 TIME]

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
FMCA	OHP	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q10 #YES	89 94%	1887 100%	6 100%	12 100%	14 82%	23 96%	24 92%	8 100%	64 93%	5 100%	4 100%	2 100%	1 100%	1 100%	6 86%	12 100%	71 92%	57 92%	29 97%	36 97%	50 91%
NO	6 6%	166 8%	~	~	3 18%	1 4%	2 8%	~	5 7%	~	~	~	~	~	1 14%	~	6 8%	5 8%	1 3%	1 3%	5 9%
NOT ANSWERED	24	436	2	3	3	2	7	1	1	1	1	7	2	8	7	1	4	6			
VALID CASES	95	2053	6	12	17	24	26	8	69	5	4	2	1	1	7	12	77	62	30	37	55
NUMBER OF RESPONDENTS	119 100%	2489 100%	6 100%	14 100%	20 100%	27 100%	28 100%	8 100%	76 100%	5 100%	4 100%	2 100%	1 100%	2 100%	8 100%	14 100%	85 100%	69 100%	31 100%	41 100%	61 100%

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

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
FMCA	OHP	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q11 #YES	72 75%	1488 73%	3 50%	9 75%	13 81%	22 85%	17 65%	6 75%	51 72%	2 40%	3 100%	2 100%	1 100%	1 100%	6 86%	10 83%	57 73%	46 73%	23 77%	26 68%	43 78%
NO	24 25%	562 27%	3 50%	3 25%	3 19%	4 15%	9 35%	2 25%	20 28%	3 60%	~	~	~	~	1 14%	2 17%	21 27%	17 27%	7 23%	12 32%	12 22%
NOT ANSWERED	3	44			3			1		1				1		2	1	1		2	1
VALID CASES	96	2050	6	12	16	26	26	8	71	5	3	2	1	1	7	12	78	63	30	38	55
NUMBER OF RESPONDENTS	99	2094	6	12	19	26	26	8	72	5	4	2	1	2	7	13	80	64	31	40	56
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
FMCA	OHP	18	25	35	45	55	65		BLK	NATV	AMER					NOT	EX &					
TOT	TOT	TO	TO	TO	TO	TO	AND		OR	HAW/	IND/		MUL-	HIS-	HIS-	VERY	GOOD	FAIR				
ADLT	ADLT	24	34	44	54	64	OVER	WHTE	AFR-	AS-	PAC	ALSK	TI	IC	IC	&	&	GOOD	POOR	MALE	MALE	
Q12																						
#YES	69	1534	5	9	12	15	19	7	50	4	4	2		1	4	9	56	45	21	27	40	
	72%	75%	83%~	75%~	71%~	60%~	73%~	88%~	71%~	80%~	100%~	100%~		~ 50%~	67%~	69%~	72%~	70%~	72%~	71%~	73%~	
NO	27	511	1	3	5	10	7	1	20	1				1	1	2	4	22	19	8	11	15
	28%	25%	17%~	25%~	29%~	40%~	27%~	13%~	29%~	20%~	~	~100%~	50%~	33%~	31%~	28%~	30%~	28%~	29%~	27%~	27%~	
NOT ANSWERED	3	49			2	1			2						1		2		2	2	1	
VALID CASES	96	2045	6	12	17	25	26	8	70	5	4	2	1	2	6	13	78	64	29	38	55	
NUMBER OF RESPONDENTS	99	2094	6	12	19	26	26	8	72	5	4	2	1	2	7	13	80	64	31	40	56	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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?

	FMCA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE			
Q13 WORST HEALTH CARE POSSIBLE	2 1%	29 0.8%	1 ~	4%~	~	~	1 3%~	2 2%~	~	~	~	~	~	~	2 ~	1 1%~	1 0.9%	2%~	2%~	1%~	1%~
01	2 1%	27 0.7%	1 ~	4%~	~	1 2%~	2 2%~	~	~	~	~	~	~	~	2 ~	1 1%~	1 0.9%	2%~	2%~	1%~	1%~
02	3 2%	39 1%	~	~	2 6%~	1 2%~	~	2 2%~	~	~	~	~	1 10%~	~	2 1%~	2 2%~	1 2%~	2%~	3%~	2%~	1%~
03	4 2%	70 2%	1 9%~	~	2 6%~	1 ~	3%~	4 3%~	~	~	~	~	~	~	4 3%~	2 2%	2 4%~	2%~	4%~	2%~	3%~
04	3 2%	85 2%	1 ~	4%~	~	~	2 5%~	2 2%~	~	~	~	~	~	~	1 5%~	2 1%~	1 0.9%	4%~	3%~	2%~	1%~
05	20 12%	285 8%	1 9%~	3 13%~	3 9%~	7 15%~	4 10%~	2 22%~	12 10%~	1 10%~	1 13%~	~	~	1 20%~	5 50%~	3 15%~	17 13%~	11 10%	9 18%~	5 8%	14 14%
06	11 7%	223 6%	1 9%~	3 13%~	1 3%~	4 9%~	1 3%~	10 8%~	~	~	~	~	~	~	1 5%~	9 7%~	8 7%	2 4%~	5 8%	5 5%	
07	13 8%	493 13%*	~	2 8%~	3 9%~	5 11%~	2 5%~	10 8%~	1 10%~	~	~	~	~	1 10%~	~	12 9%~	9 8%	3 6%~	1 2%*	11 11%*	
08	33 20%	772 21%	2 18%~	3 13%~	10 30%~	8 17%~	10 25%~	24 20%~	1 10%~	2 25%~	~	1 100%~	3 60%~	1 10%~	5 25%~	26 19%~	25 22%	8 16%~	16 27%	17 17%	
09	21 12%	616 16%	1 9%~	4 17%~	1 3%~	4 9%~	7 18%~	3 33%~	12 10%~	1 10%~	4 50%~	1 50%~	~	1 20%~	1 10%~	3 15%~	16 12%~	13 12%	6 12%~	7 12%	13 13%
BEST HEALTH CARE POSSIBLE	56 33%	1096 29%	5 45%~	6 25%~	11 33%~	16 35%~	12 30%~	4 44%~	41 34%~	6 60%~	1 13%~	1 50%~	~	~	1 10%~	7 35%~	43 32%~	39 35%	14 29%~	19 32%	35 34%
#8-10 (NET)	110 65%	2485 66%	8 73%~	13 54%~	22 67%~	28 61%~	29 73%~	7 78%~	77 64%~	8 80%~	7 88%~	2 100%~	1 100%~	4 80%~	3 30%~	15 75%~	85 63%~	77 69%	28 57%~	42 70%	65 64%

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	FMCA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
9-10 (NET)	77 46%	1712 46%	6 55%~	10 42%~	12 36%~	20 43%~	19 48%~	7 78%~	53 44%~	7 70%~	5 63%~	2 100%~	1 ~	2 20%~	10 50%~	59 44%~	52 46%	20 41%~	26 43%	48 47%	
NOT ANSWERED	6	106	2			1	2		2	1				1	2	3	3	2	2	3	
VALID CASES	168	3737	11	24	33	46	40	9	121	10	8	2	1	5	10	20	135	112	49	60	102
NUMBER OF RESPONDENTS	174 100%	3843 100%	11 100%	26 100%	33 100%	47 100%	42 100%	9 100%	123 100%	11 100%	8 100%	2 100%	1 100%	5 100%	11 100%	22 100%	138 100%	115 100%	51 100%	62 100%	105 100%
MEAN	7.75	7.91	8.09	7.17	7.61	7.76	7.85	8.56	7.65	8.90	8.38	9.50	8.00	7.60	6.10	8.10	7.64	7.93	7.20	7.65	7.80
p stat_(*=Sig @ p<=.05)		.349	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

[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?

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q14 NEVER	3 2%	104 3%	1 9%	1 4%	1 ~	2 2%	~	3 3%	~	~	~	~	~	~	~	3 2%	1 0.9%	2 4%	3 5%	~	
SOMETIMES	37 22%	575 15%*	1 9%	7 28%	10 31%	8 18%	8 19%	2 22%	27 23%	1 ~	12 ~	2 ~	40 ~	5 50%	19 19%	30 22%	24 22%	12 24%	12 19%	24 24%	
USUALLY	41 24%	1243 33%*	2 18%	6 24%	9 28%	16 36%	7 17%	1 11%	28 24%	1 9%	4 50%	1 ~	1 100%	3 20%	6 29%	34 25%	28 25%	13 25%	11 18%	29 29%	
ALWAYS	87 52%	1797 48%	7 64%	11 44%	13 41%	19 43%	27 64%	6 67%	61 51%	10 91%	3 38%	2 100%	2 ~	2 40%	11 52%	67 50%	58 52%	24 47%	36 58%	47 47%	
#ALWAYS + USUALLY (NET)	128 76%	3040 82%	9 82%	17 68%	22 69%	35 80%	34 81%	7 78%	89 75%	11 100%	7 87%	2 100%	1 100%	3 60%	5 50%	17 81%	101 75%	86 77%	37 73%	47 76%	76 76%
TOP BOX SCORE	87 52%	1797 48%	7 64%	11 44%	13 41%	19 43%	27 64%	6 67%	61 51%	10 91%	3 38%	2 100%	2 ~	2 40%	11 52%	67 50%	58 52%	24 47%	36 58%	47 47%	
NOT ANSWERED	6	124	1	1	3				4					1	1	4	4			5	
VALID CASES	168	3719	11	25	32	44	42	9	119	11	8	2	1	5	10	21	134	111	51	62	100
NUMBER OF RESPONDENTS	174	3843	11	26	33	47	42	9	123	11	8	2	1	5	11	22	138	115	51	62	105
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE				
Q15 YES	177 73%	4201 81%*	13 65%~	22 51%~	33 75%~	48 81%	49 82%	8 100%~	124 75%	13 81%~	7 58%~	2 67%~	3 100%~	5 71%~	10 71%~	23 70%~	142 74%	121 71%	51 82%*	60 63%*	112 82%*
NO	66 27%	995 19%*	7 35%~	21 49%~	11 25%~	11 19%	11 18%	~	42 25%	3 19%~	5 42%~	1 33%~	~	2 ~	4 29%~	10 30%~	51 26%	49 29%	11 18%*	36 37%*	25 18%*
NOT ANSWERED	18	257			1	1	1	1	3		1						4	1	2	2	2
VALID CASES	243	5196	20	43	44	59	60	8	166	16	12	3	3	7	14	33	193	170	62	96	137
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q16 NONE	31 18%	713 18%	3 25%~	5 23%~	6 20%~	5 11%~	11 23%~	25 21%	2 17%~	~	~	1 33%~	1 20%~	1 10%~	3 13%~	26 19%~	23 20%	8 16%	8 14%	22 21%	
1 TIME	37 22%	973 24%	2 17%~	5 23%~	6 20%~	10 21%~	12 26%~	1 14%~	27 23%	3 25%~	3 43%~	~	~	~	1 10%~	4 17%~	30 22%~	27 24%	9 18%	12 21%	24 23%
2	48 28%	1005 25%	4 33%~	7 32%~	5 17%~	17 36%~	11 23%~	3 43%~	35 30%	3 ~	3 43%~	1 ~	3 33%~	3 60%~	3 30%~	10 43%~	37 28%~	33 29%	14 27%	16 28%	30 28%
3	19 11%	534 13%	~	1 5%~	7 23%~	3 6%~	6 13%~	2 29%~	13 11%	1 ~	1 14%~	1 50%~	1 33%~	~	1 10%~	3 13%~	14 10%~	12 11%	7 14%	4 7%	15 14%
4	13 8%	322 8%	~	2 9%~	3 10%~	5 11%~	3 6%~	~	5 4%*	4 33%~	~	~	~	1 20%~	1 10%~	2 9%~	9 7%~	8 7%	5 10%	7 12%	6 6%
5 TO 9	12 7%	403 10%	1 8%~	1 5%~	1 3%~	4 9%~	3 6%~	1 14%~	9 8%	1 8%~	1 ~	1 50%~	~	~	~	~	11 8%~	8 7%	3 6%	7 12%	4 4%
10 OR MORE TIMES	9 5%	75 2%*	2 17%~	1 5%~	2 7%~	3 6%~	1 2%~	~	4 3%	2 17%~	~	~	~	~	3 30%~	1 4%~	7 5%~	3 3%	5 10%	4 7%	5 5%
NOT ANSWERED	8	238	1		3	1	2	1	6	1						8	7		2	6	
VALID CASES	169	4026	12	22	30	47	47	7	118	12	7	2	3	5	10	23	134	114	51	58	106
NUMBER OF RESPONDENTS	177	4264	13	22	33	48	49	8	124	13	7	2	3	5	10	23	142	121	51	60	112
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q15 = YES]

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q17 NEVER		47 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	8 6%	196 6%	11% 12%	12% 8%	2% 2%	2% 6%	~	9% ~	~	~	~	~	~	~	7% ~	7% 5%	6% 2%	5% ~	3% 4%	5% ~	
USUALLY	27 20%	719 22%	22% 12%	12% 29%	7% 21%	7% 20%	~	18% 10%	2% 29%	~	1% 50%	1% 25%	2% 22%	6% 30%	21% 20%	20% 17%	7% ~	7% ~	14% 24%	20% ~	
ALWAYS	102 74%	2245 70%	67% 76%	13% 63%	15% 76%	32% 74%	7% 100%	67% 73%	9% 90%	5% 71%	2% 100%	1% 50%	3% 75%	7% 78%	14% 70%	78% 73%	65% 71%	33% 79%	39% 80%	60% 71%	
#ALWAYS + USUALLY (NET)	129 94%	2963 92%	89% 88%	15% 88%	22% 92%	41% 98%	33% 94%	7% 100%	84% 91%	10% 100%	7% 100%	2% 100%	2% 100%	4% 100%	9% 100%	20% 93%	99% 93%	85% 93%	40% 95%	46% 94%	80% 95%
TOP BOX SCORE	102 74%	2245 70%	67% 76%	13% 63%	15% 76%	32% 74%	7% 100%	67% 73%	9% 90%	5% 71%	2% 100%	1% 50%	3% 75%	7% 78%	14% 70%	78% 73%	65% 71%	33% 79%	39% 80%	60% 71%	
NOT ANSWERED	1	22				1		1						1			1		1		
VALID CASES	137	3206	9	17	24	42	35	7	92	10	7	2	2	4	9	20	107	91	42	49	84
NUMBER OF RESPONDENTS	138	3228	9	17	24	42	36	7	93	10	7	2	2	4	9	20	108	91	43	50	84
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		GENDER			
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q18 NEVER	4 3%	67 2%	~	1 6%	1 4%	1 2%	1 3%	~	4 4%	~	~	~	~	~	~	4 4%	2 2%	2 5%	1 2%	3 4%	
SOMETIMES	11 8%	251 8%	~	3 18%	4 17%	2 5%	1 3%	1 14%	7 8%	1 10%	~	~	~	3 33%	2 11%	9 8%	9 10%	2 5%	3 6%	7 8%	
USUALLY	26 19%	665 21%	11%	1 24%	4 25%	6 22%	9 17%	6 ~	14 15%	2 20%	2 29%	~	1 50%	1 25%	2 22%	5 26%	20 19%	16 18%	10 23%	8 16%	18 22%
ALWAYS	96 70%	2214 69%	89%	8 53%	9 54%	13 71%	29 78%	28 86%	6 73%	7 70%	5 71%	2 100%	1 50%	3 75%	4 44%	12 63%	75 69%	63 70%	29 67%	38 76%	55 66%
#ALWAYS + USUALLY (NET)	122 89%	2879 90%	100%	9 76%	13 79%	19 93%	38 94%	34 86%	6 88%	9 90%	7 100%	2 100%	2 100%	4 100%	6 67%	17 89%	95 88%	79 88%	39 91%	46 92%	73 88%
TOP BOX SCORE	96 70%	2214 69%	89%	8 53%	9 54%	13 71%	29 78%	28 86%	6 73%	7 70%	5 71%	2 100%	1 50%	3 75%	4 44%	12 63%	75 69%	63 70%	29 67%	38 76%	55 66%
NOT ANSWERED	1	31				1									1		1			1	
VALID CASES	137	3197	9	17	24	41	36	7	93	10	7	2	2	4	9	19	108	90	43	50	83
NUMBER OF RESPONDENTS	138	3228	9	17	24	42	36	7	93	10	7	2	2	4	9	20	108	91	43	50	84
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q19 NEVER	5 4%	85 3%	2 ~ 12%~	1 4%~	1 2%~	1 3%~	5 ~ 5%~	~	~	~	~	~	~	~	5 ~ 5%~	2 2%~	3 7%~	2 4%	3 4%		
SOMETIMES	6 4%	193 6%	2 ~ 12%~	2 8%~	1 2%~	1 ~ 14%~	3 3%~	2 20%~	~	~	~	~	1 ~ 11%~	1 5%~	4 4%~	4 4%~	2 5%~	1 2%	5 6%		
USUALLY	24 17%	575 18%	1 11%~	1 6%~	6 25%~	9 21%~	7 19%~	16 ~ 17%~	1 10%~	1 14%~	~	1 ~ 50%~	1 25%~	2 22%~	5 25%~	19 18%~	15 16%~	9 21%~	6 12%	17 20%	
ALWAYS	103 75%	2339 73%	8 89%~	12 71%~	15 63%~	31 74%~	28 78%~	6 86%~	69 74%~	7 70%~	6 86%~	2 100%~	1 50%~	3 75%~	6 67%~	14 70%~	80 74%~	70 77%~	29 67%~	41 82%	59 70%
#ALWAYS + USUALLY (NET)	127 92%	2915 91%	9 100%~	13 76%~	21 88%~	40 95%~	35 97%~	6 86%~	85 91%~	8 80%~	7 100%~	2 100%~	2 100%~	4 100%~	8 89%~	19 95%~	99 92%~	85 93%~	38 88%~	47 94%	76 90%
TOP BOX SCORE	103 75%	2339 73%	8 89%~	12 71%~	15 63%~	31 74%~	28 78%~	6 86%~	69 74%~	7 70%~	6 86%~	2 100%~	1 50%~	3 75%~	6 67%~	14 70%~	80 74%~	70 77%~	29 67%~	41 82%	59 70%
NOT ANSWERED		35																			
VALID CASES	138	3193	9	17	24	42	36	7	93	10	7	2	2	4	9	20	108	91	43	50	84
NUMBER OF RESPONDENTS	138 100%	3228 100%	9 100%	17 100%	24 100%	42 100%	36 100%	7 100%	93 100%	10 100%	7 100%	2 100%	2 100%	4 100%	9 100%	20 100%	108 100%	91 100%	43 100%	50 100%	84 100%

[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?

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q20 NEVER	4 3%	95 3%	1 ~	1 6%~	1 4%~	1 2%~	1 3%~	4 4%~	~	~	~	~	~	~	~	4 4%~	2 2%~	2 5%~	1 2%~	3 4%	
SOMETIMES	10 7%	295 9%	2 ~	3 12%~	2 13%~	3 5%~	3 8%~	6 7%~	1 10%~	~	1 50%~	1 11%~	2 10%~	8 7%~	8 9%~	2 5%~	4 8%~	6 7%			
USUALLY	36 26%	856 27%	1 11%~	5 29%~	7 29%~	12 29%~	8 22%~	3 43%~	22 24%~	3 30%~	2 29%~	1 50%~	1 25%~	4 44%~	8 40%~	25 23%~	23 26%~	13 30%~	9 18%~	26 31%	
ALWAYS	87 64%	1950 61%	8 89%~	9 53%~	13 54%~	26 63%~	24 67%~	4 57%~	60 65%~	6 60%~	5 71%~	2 100%~	3 75%~	4 44%~	10 50%~	70 65%~	57 63%~	26 60%~	35 71%~	49 58%	
#ALWAYS + USUALLY (NET)	123 90%	2806 88%	9 100%~	14 82%~	20 83%~	38 93%~	32 89%~	7 100%~	82 89%~	9 90%~	7 100%~	2 100%~	1 50%~	4 89%~	8 90%~	95 89%~	80 89%~	39 91%~	44 90%~	75 89%	
TOP BOX SCORE	87 64%	1950 61%	8 89%~	9 53%~	13 54%~	26 63%~	24 67%~	4 57%~	60 65%~	6 60%~	5 71%~	2 100%~	3 75%~	4 44%~	10 50%~	70 65%~	57 63%~	26 60%~	35 71%~	49 58%	
NOT ANSWERED	1	31				1			1						1	1			1		
VALID CASES	137	3197	9	17	24	41	36	7	92	10	7	2	2	4	9	20	107	90	43	49	84
NUMBER OF RESPONDENTS	138	3228	9	17	24	42	36	7	93	10	7	2	2	4	9	20	108	91	43	50	84
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q21	FMCA TOT ADLT	18	25	35	45	55	65													
YES	91 66%	5 24	11 34	16 44	29 54	23 64	5 71%	63 68%	6 60%	3 43%	1 50%	1 50%	3 75%	8 89%	12 60%	72 67%	60 66%	29 67%	32 64%	56 67%
NO	47 34%	4 44%	6 35%	8 33%	13 31%	13 36%	2 29%	30 32%	4 40%	4 57%	1 50%	1 50%	1 25%	1 11%	8 40%	36 33%	31 34%	14 33%	18 36%	28 33%
NOT ANSWERED	62																			
VALID CASES	138	9	17	24	42	36	7	93	10	7	2	2	4	9	20	108	91	43	50	84
NUMBER OF RESPONDENTS	138 100%	9 100%	17 100%	24 100%	42 100%	36 100%	7 100%	93 100%	10 100%	7 100%	2 100%	2 100%	4 100%	9 100%	20 100%	108 100%	91 100%	43 100%	50 100%	84 100%

[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?

	FMCA TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q22 NEVER	8 9%	119 6%	1 20%	2 18%	2 12%	2 7%	1 5%	8 13%	~	~	~	~	~	~	8 12%	4 7%	4 15%	3 10%	5 9%		
SOMETIMES	15 17%	265 14%	~	3 27%	4 25%	5 18%	2 10%	1 25%	10 17%	~	~	1 100%	3 38%	3 25%	12 17%	11 19%	4 15%	5 16%	9 17%		
USUALLY	17 20%	545 29%*	1 20%	1 9%	3 19%	5 18%	6 29%	1 25%	11 18%	2 40%	~	~	1 33%	1 13%	3 25%	14 20%	10 17%	7 26%	3 10%	14 26%	
ALWAYS	47 54%	927 50%	3 60%	5 45%	7 44%	16 57%	12 57%	2 50%	31 52%	3 60%	3 100%	1 100%	2 67%	4 50%	6 50%	35 51%	33 57%	12 44%	20 65%	25 47%	
#ALWAYS + USUALLY (NET)	64 74%	1472 79%	4 80%	6 55%	10 63%	21 75%	3 86%	3 75%	42 70%	5 100%	3 100%	1 100%	3 100%	5 63%	9 75%	49 71%	43 74%	19 70%	23 74%	39 74%	
TOP BOX SCORE	47 54%	927 50%	3 60%	5 45%	7 44%	16 57%	12 57%	2 50%	31 52%	3 60%	3 100%	1 100%	2 67%	4 50%	6 50%	35 51%	33 57%	12 44%	20 65%	25 47%	
NOT ANSWERED	4	61				1	2	1	3	1					3	2	2	1	3		
VALID CASES	87	1856	5	11	16	28	21	4	60	5	3	1	1	3	8	12	69	58	27	31	53
NUMBER OF RESPONDENTS	91	1917	5	11	16	29	23	5	63	6	3	1	1	3	8	12	72	60	29	32	56
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q15 = YES 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?

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	MALE	FE- MALE				
Q23 WORST PERSONAL DOCTOR POSSIBLE	2 1%	60 2%	1 ~	5%~	~	~	1 2%~	2 2%~	~	~	~	~	~	~	2 ~	1 0.9%	1 2%~	1 2%	1 2%	1 0.9%	
01	2 1%	30 0.7%	~	~	~	2 4%~	2 2%~	~	~	~	~	~	~	~	2 2%~	2 2%	~	~	2 2%~	~	
02	2 1%	27 0.7%	~	~	1 3%~	~	1 2%~	2 2%~	~	~	~	~	~	~	1 5%~	1 0.8%	1 0.9%	1 2%~	~	2 2%~	
03	4 2%	71 2%	~	1 5%~	~	3 6%~	~	4 3%~	~	~	~	~	~	~	4 3%~	2 2%	2 4%~	2 4%	2 2%	2 2%	
04	4 2%	80 2%	~	3 14%~	1 3%~	~	~	3 3%~	1 10%~	~	~	~	~	~	4 3%~	4 4%*	~	~	1 2%	3 3%	
05	12 7%	203 5%	2 18%~	~	3 10%~	3 6%~	3 7%~	1 14%~	9 8%~	~	~	~	~	3 30%~	2 10%~	10 8%~	7 6%	5 10%~	2 4%	10 9%	
06	3 2%	153 4%*	~	1 5%~	1 3%~	~	1 2%~	3 3%~	~	~	~	~	~	~	3 2%~	2 2%	1 2%~	~	~	3 3%	
07	10 6%	289 7%	~	1 5%~	3 10%~	4 8%~	1 2%~	7 6%~	1 10%~	~	~	1 33%~	~	~	8 6%~	4 4%	5 10%~	2 4%	7 7%		
08	29 18%	720 18%	1 9%~	5 23%~	5 17%~	8 17%~	9 21%~	17 15%~	2 20%~	1 14%~	~	1 33%~	2 40%~	3 30%~	3 14%~	25 19%~	22 19%	6 13%~	10 19%	18 17%	
09	25 15%	743 19%	2 18%~	2 9%~	2 7%~	8 17%~	10 23%~	1 14%~	18 15%~	1 10%~	3 43%~	~	1 33%~	1 20%~	3 14%~	20 15%~	18 16%	7 15%~	13 24%*	12 11%	
BEST PERSONAL DOCTOR POSSIBLE	72 44%	1623 41%	6 55%~	8 36%~	14 47%~	20 42%~	17 40%~	5 71%~	50 43%~	5 50%~	3 43%~	2 100%~	~	2 40%~	4 40%~	12 57%~	53 40%~	50 44%	20 42%~	23 43%	47 44%
#8-10 (NET)	126 76%	3087 77%	9 82%~	15 68%~	21 70%~	36 75%~	36 84%~	6 86%~	85 73%~	8 80%~	7 100%~	2 100%~	2 67%~	5 100%~	7 70%~	18 86%~	98 74%~	90 80%	33 69%~	46 85%*	77 72%

Continued

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		FMCA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AMER IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE	
9-10 (NET)	97 59%	2366 59%	8 73%~	10 45%~	16 53%~	28 58%~	27 63%~	6 86%~	68 58%~	6 60%~	6 86%~	2 100%~	1 33%~	3 60%~	4 40%~	15 71%~	73 55%~	68 60%	27 56%~	36 67%	59 55%
NOT ANSWERED	12	265	2		3		6	1	7	3						2	10	8	3	6	5
VALID CASES	165	3999	11	22	30	48	43	7	117	10	7	2	3	5	10	21	132	113	48	54	107
NUMBER OF RESPONDENTS	177	4264	13	22	33	48	49	8	124	13	7	2	3	5	10	23	142	121	51	60	112
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
MEAN	8.24	8.32	8.73	7.55	8.20	8.12	8.42	9.14	8.03	8.60	9.29	10.0	8.00	9.00	7.90	8.71	8.08	8.31	8.02	8.54	8.07
p stat_(*=Sig @ p<=.05)		.619	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~.553	~.229	.180	

[ASKED IF Q15 = YES]

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV ILND	AMER HAW/ IND/ ALSK	OTH-	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q24 YES	97 40%	2074 40%	5 25%~	12 28%~	15 33%~	31 53%*	28 47%	5 56%~	66 40%	6 40%~	8 62%~	1 33%~	1 33%~	3 43%~	8 57%~	16 48%~	75 39%~	64 38%	32 51%*	37 38%	58 42%
NO	145 60%	3119 60%	15 75%~	31 72%~	30 67%~	28 47%*	31 53%	4 44%~	101 60%	9 60%~	5 38%~	2 67%~	2 67%~	4 57%~	6 43%~	17 52%~	119 61%~	105 62%	31 49%*	60 62%	79 58%
NOT ANSWERED	19	260				1	2		2	1					3	2	1		1	2	
VALID CASES	242	5193	20	43	45	59	59	9	167	15	13	3	3	7	14	33	194	169	63	97	137
NUMBER OF RESPONDENTS	261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH- R	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q25 NEVER	8 8%	135 7%	1 20%~	2 18%~	1 7%~	2 6%~	2 7%~	8 12%~	~	~	~	~	~	~	~	8 11%~	3 5%~	5 16%~	3 8%~	5 9%~	
SOMETIMES	19 20%	292 15%	1 20%~	1 9%~	6 40%~	5 16%~	4 14%~	1 20%~	11 17%~	4 50%~	~	~	1 33%~	2 29%~	1 6%~	16 22%~	13 21%~	5 16%~	8 22%~	9 16%~	
USUALLY	22 23%	614 31%*	1 20%~	3 27%~	3 20%~	6 19%~	9 32%~	~	17 26%~	1 17%~	1 12%~	~	~	1 33%~	1 14%~	4 25%~	17 23%~	16 25%~	6 19%~	8 22%~	14 25%~
ALWAYS	47 49%	926 47%	2 40%~	5 45%~	5 33%~	18 58%~	13 46%~	4 80%~	30 45%~	5 83%~	3 38%~	1 100%~	1 100%~	1 33%~	4 57%~	11 69%~	33 45%~	31 49%~	16 50%~	18 49%~	29 51%~
#ALWAYS + USUALLY (NET)	69 72%	1540 78%	3 60%~	8 73%~	8 53%~	24 77%~	22 79%~	4 80%~	47 71%~	6 100%~	4 50%~	1 100%~	1 100%~	2 67%~	5 71%~	15 94%~	50 68%~	47 75%~	22 69%~	26 70%~	43 75%~
TOP BOX SCORE	47 49%	926 47%	2 40%~	5 45%~	5 33%~	18 58%~	13 46%~	4 80%~	30 45%~	5 83%~	3 38%~	1 100%~	1 100%~	1 33%~	4 57%~	11 69%~	33 45%~	31 49%~	16 50%~	18 49%~	29 51%~
NOT ANSWERED	1	78	1											1		1	1			1	
VALID CASES	96	1967	5	11	15	31	28	5	66	6	8	1	1	3	7	16	74	63	32	37	57
NUMBER OF RESPONDENTS	97	2045	5	12	15	31	28	5	66	6	8	1	1	3	8	16	75	64	32	37	58
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q26 NONE		93 5%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
1 SPECIALIST	48 51%	1033 52%	2 40%	8 73%	8 53%	13 42%	15 56%	1 20%	31 48%	4 67%	6 75%	1 100%	1 100%	1 33%	3 43%	7 44%	39 53%	35 56%	12 39%	16 43%	31 55%
2	30 32%	522 26%	2 40%	3 27%	4 27%	11 35%	8 30%	2 40%	23 35%	2 25%	~	~	~	1 33%	1 14%	6 38%	21 29%	17 27%	13 42%	14 38%	15 27%
3	11 12%	217 11%	1 20%	~	3 20%	3 10%	3 11%	1 20%	8 12%	1 17%	~	~	~	1 33%	1 14%	2 13%	9 12%	9 14%	2 6%	6 16%	5 9%
4	3 3%	74 4%	~	~	~	2 6%	1 4%	~	2 3%	~	~	~	~	~	1 14%	1 6%	2 3%	2 3%	1 3%	~	3 5%
5 OR MORE SPECIALISTS	3 3%	41 2%	~	~	~	2 6%	1 20%	~	1 2%	1 17%	~	~	~	~	1 14%	~	2 3%	~	3 10%	1 3%	2 4%
NOT ANSWERED	2	66		1			1		1					1		2	1	1		2	
VALID CASES	95	1979	5	11	15	31	27	5	65	6	8	1	1	3	7	16	73	63	31	37	56
NUMBER OF RESPONDENTS	97	2045	5	12	15	31	28	5	66	6	8	1	1	3	8	16	75	64	32	37	58
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY	HEALTH STATUS		GENDER					
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE	FE- MALE			
Q27 WORST SPECIALIST POSSIBLE	2 2%	21 1%	~	~	~	1 3%	1 4%	~	2 3%	~	~	~	~	~	~	2 3%	2 3%	~	~	2 4%	
01		7 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
02	2 2%	19 1%	1 20%	~	~	~	~	~	1 2%	~	~	~	~	~	~	1 1%	~	1 3%	1 3%	~	
03	1 1%	28 2%	~	~	1 7%	~	~	~	~	~	~	~	1 14%	~	1 1%	2 2%	~	~	~	1 2%	
04	2 2%	18 1%	~	1 9%	~	1 3%	~	~	2 3%	~	~	~	~	~	~	2 3%	1 2%	1 3%	1 3%	1 2%	
05	6 6%	88 5%	~	1 9%	2 13%	2 6%	1 4%	~	4 6%	1 17%	~	~	~	1 33%	~	2 12%	4 5%	5 8%	1 3%	3 8%	2 4%
06	4 4%	76 4%	~	~	~	2 6%	2 7%	~	3 5%	~	~	~	~	1 14%	~	4 5%	1 2%	3 10%	3 8%	1 2%	
07	6 6%	154 8%	~	2 18%	1 7%	1 3%	2 7%	~	4 6%	~	1 12%	~	~	1 14%	1 6%	5 7%	6 10%	~	~	2 5%	4 7%
08	14 15%	272 15%	1 20%	1 9%	2 13%	5 16%	5 19%	~	11 17%	2 33%	1 12%	~	~	~	~	12 16%	10 16%	4 13%	5 14%	9 16%	
09	20 21%	345 19%	1 20%	1 9%	2 13%	7 23%	8 30%	1 20%	13 20%	1 17%	3 38%	~	1 100%	1 33%	~	5 31%	15 21%	11 17%	9 29%	9 24%	11 20%
BEST SPECIALIST POSSIBLE	38 40%	812 44%	2 40%	5 45%	7 47%	12 39%	8 30%	4 80%	25 38%	2 33%	3 38%	1 100%	~	1 33%	4 57%	8 50%	27 37%	26 41%	12 39%	13 35%	25 45%
#8-10 (NET)	72 76%	1429 78%	4 80%	7 64%	11 73%	24 77%	21 78%	5 100%	49 75%	5 83%	7 87%	1 100%	1 100%	2 67%	4 57%	13 81%	54 74%	47 75%	25 81%	27 73%	45 80%

Continued

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE			
9-10 (NET)	58 61%	1157 63%	3 60%~	6 55%~	9 60%~	19 61%~	16 59%~	5 100%~	38 58%~	3 50%~	6 75%~	1 100%~	1 100%~	2 67%~	4 57%~	13 81%~	42 58%~	37 59%~	21 68%~	22 59%~	36 64%~
NOT ANSWERED		34																			
VALID CASES	95	1838	5	11	15	31	27	5	65	6	8	1	1	3	7	16	73	63	31	37	56
NUMBER OF RESPONDENTS	95	1872	5	11	15	31	27	5	65	6	8	1	1	3	7	16	73	63	31	37	56
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
MEAN	8.24	8.47	7.80	8.18	8.27	8.26	8.26	9.80	8.17	8.33	9.00	10.0	9.00	8.00	8.00	8.88	8.12	8.24	8.45	8.22	8.43
p stat_(*=Sig @ p<=.05)		.299	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

[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?

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE					
Q28 YES	70 29%	1182 23%*	8 40%~	12 28%~	14 31%~	18 31%	14 24%	3 33%~	50 30%	4 27%~	7 54%~			2 ~	2 ~	2 29%~	2 14%~	8 25%~	59 30%~	51 30%	18 29%	29 30%	39 29%
NO	170 71%	3968 77%*	12 60%~	31 72%~	31 69%~	41 69%	44 76%	6 67%~	116 70%	11 73%~	6 46%~	3 100%~	3 100%~	3 71%~	5 86%~	12 86%~	24 75%~	135 70%~	117 70%	45 71%	68 70%	97 71%	97 71%
NOT ANSWERED	21	303				1	3		3	1								1	3	3	1	1	3
VALID CASES	240	5150	20	43	45	59	58	9	166	15	13	3	3	7	14			32	194	168	63	97	136
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%			33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

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?

	FMCA TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR	ASIAN	NATV ILND	AMER HAW/ PAC	IND/ ALSK	MULTI	HIS-IC	NOT HIS-IC	EX & VERY GOOD	FAIR & POOR	MALE	FE-MALE	
Q29 NEVER	10 15%	119 12%	2 29%	1 8%	1 7%	5 29%	1 7%	7 14%	1 33%	~	~	~	1 50%	1 14%	9 16%	8 16%	2 11%	5 18%	5 13%		
SOMETIMES	25 37%	339 34%	2 29%	6 50%	7 50%	5 29%	4 29%	1 33%	20 40%	1 33%	2 29%	~	~	2 100%	2 29%	22 38%	18 37%	7 39%	9 32%	15 39%	
USUALLY	21 31%	332 33%	2 29%	3 25%	5 36%	6 35%	3 21%	1 33%	13 26%	1 33%	3 43%	~	~	1 50%	2 29%	17 29%	15 31%	5 28%	8 29%	12 32%	
ALWAYS	12 18%	213 21%	1 14%	2 17%	1 7%	1 6%	6 43%	1 33%	10 20%	2 29%	~	~	~	2 29%	10 17%	8 16%	4 22%	6 21%	6 16%		
#ALWAYS + USUALLY (NET)	33 49%	545 54%	3 43%	5 42%	6 43%	7 41%	9 64%	2 67%	23 46%	1 33%	5 71%	~	~	1 50%	4 57%	27 47%	23 47%	9 50%	14 50%	18 47%	
TOP BOX SCORE	12 18%	213 21%	1 14%	2 17%	1 7%	1 6%	6 43%	1 33%	10 20%	2 29%	~	~	~	2 29%	10 17%	8 16%	4 22%	6 21%	6 16%		
NOT ANSWERED	2	19	1			1				1				1	1	2		1	1		
VALID CASES	68	1003	7	12	14	17	14	3	50	3	7			2	2	7	58	49	18	28	38
NUMBER OF RESPONDENTS	70	1022	8	12	14	18	14	3	50	4	7			2	2	8	59	51	18	29	39
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE					RACE							ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q30 YES	93 39%	1525 30%*	10 50%~	11 26%~	18 41%~	23 40%	22 37%	6 67%~	57 34%*	11 73%~	6 50%~	1 33%~	2 67%~	3 43%~	6 43%~	17 52%~	70 36%~	65 38%	26 42%	37 39%	53 39%
NO	147 61%	3584 70%*	10 50%~	32 74%~	26 59%~	35 60%	38 63%	3 33%~	110 66%*	4 27%~	6 50%~	2 67%~	1 33%~	4 57%~	8 57%~	16 48%~	123 64%~	104 62%	36 58%	59 61%	84 61%
NOT ANSWERED	21	344			1	2	1		2	1	1					4		2	2	2	2
VALID CASES	240	5109	20	43	44	58	60	9	167	15	12	3	3	7	14	33	193	169	62	96	137
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	FMCA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q31 NEVER	3 3%	51 4%	1 ~	9% ~	1 ~	1 ~	1 17% ~	1 2% ~	1 10% ~	~	~	~	~	1 17% ~	3 4% ~	1 2% ~	2 8% ~	2 6% ~	1 2% ~		
SOMETIMES	24 26%	295 21%	2 22% ~	3 27% ~	9 50% ~	5 22% ~	2 9% 17% ~	1 21% ~	2 33% ~	~	~	1 33% ~	4 67% ~	7 41% ~	13 19% ~	15 23% ~	8 31% ~	11 31% ~	11 21% ~		
USUALLY	22 24%	400 28%	1 11% ~	2 18% ~	2 11% ~	6 26% ~	11 50% ~	15 26% ~	4 40% ~	2 33% ~	1 50% ~	~	~	2 12% ~	20 29% ~	17 27% ~	5 19% ~	7 19% ~	15 28% ~		
ALWAYS	43 47%	670 47%	6 67% ~	5 45% ~	7 39% ~	12 52% ~	8 36% 67% ~	4 51% ~	5 50% ~	2 33% 100% ~	1 50% ~	1 50% ~	2 67% ~	1 17% ~	8 47% ~	33 48% ~	31 48% ~	11 42% ~	16 44% ~	26 49% ~	
#ALWAYS + USUALLY (NET)	65 71%	1070 76%	7 78% ~	7 64% ~	9 50% ~	18 78% ~	19 86% 67% ~	4 77% ~	9 90% ~	4 67% 100% ~	1 100% ~	2 100% ~	2 67% ~	1 17% ~	10 59% ~	53 77% ~	48 75% ~	16 62% ~	23 64% ~	41 77% ~	
TOP BOX SCORE	43 47%	670 47%	6 67% ~	5 45% ~	7 39% ~	12 52% ~	8 36% 67% ~	4 51% ~	5 50% ~	2 33% 100% ~	1 50% ~	1 50% ~	2 67% ~	1 17% ~	8 47% ~	33 48% ~	31 48% ~	11 42% ~	16 44% ~	26 49% ~	
NOT ANSWERED	1	26	1						1						1	1		1			
VALID CASES	92	1415	9	11	18	23	22	6	57	10	6	1	2	3	6	17	69	64	26	36	53
NUMBER OF RESPONDENTS	93	1441	10	11	18	23	22	6	57	11	6	1	2	3	6	17	70	65	26	37	53
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q32 NEVER	2 2%	24 2%	1 ~	1 9%~	1 6%~	~	~	~	2 4%~	~	~	~	~	~	~	2 3%~	1 2%~	1 4%~	2 6%~	~	
SOMETIMES	7 8%	83 6%	1 11%~	3 ~	1 17%~	1 4%~	1 5%~	1 17%~	3 5%~	2 ~	33%~	~	~	1 ~	17%~	1 6%~	5 7%~	4 6%~	3 12%~	3 8%~	4 8%~
USUALLY	16 17%	312 22%	2 ~	4 18%~	5 22%~	5 22%~	5 23%~	~	12 21%~	1 10%~	1 17%~	2 ~	2 100%~	~	~	2 12%~	14 20%~	12 19%~	4 15%~	8 22%~	8 15%~
ALWAYS	67 73%	995 70%	8 89%~	8 73%~	10 56%~	17 74%~	16 73%~	5 83%~	40 70%~	9 90%~	3 50%~	1 100%~	3 ~	3 100%~	5 83%~	14 82%~	48 70%~	47 73%~	18 69%~	23 64%~	41 77%~
#ALWAYS + USUALLY (NET)	83 90%	1307 92%	8 89%~	10 91%~	14 78%~	22 96%~	21 95%~	5 83%~	52 91%~	10 100%~	4 67%~	1 100%~	2 100%~	3 100%~	5 83%~	16 94%~	62 90%~	59 92%~	22 85%~	31 86%~	49 92%~
TOP BOX SCORE	67 73%	995 70%	8 89%~	8 73%~	10 56%~	17 74%~	16 73%~	5 83%~	40 70%~	9 90%~	3 50%~	1 100%~	3 ~	3 100%~	5 83%~	14 82%~	48 70%~	47 73%~	18 69%~	23 64%~	41 77%~
NOT ANSWERED	1	27	1							1						1	1		1		
VALID CASES	92	1414	9	11	18	23	22	6	57	10	6	1	2	3	6	17	69	64	26	36	53
NUMBER OF RESPONDENTS	93	1441	10	11	18	23	22	6	57	11	6	1	2	3	6	17	70	65	26	37	53
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLACK OR AFR-	ASIAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHER	MULTI	HIS-IC	NOT HIS-IC	EX & VERY GOOD &	FAIR & POOR	MALE	FEMALE	
Q33																					
YES	75 32%	1804 36%	8 40%~	15 35%~	8 19%~	23 39%	13 24%	3 33%~	49 30%	5 38%~	3 27%~	1 33%~	1 50%~	3 43%~	5 38%~	14 42%~	51 27%~	44 27%*	27 45%*	33 34%	37 28%
NO	159 68%	3261 64%	12 60%~	28 65%~	34 81%~	36 61%	42 76%	6 67%~	117 70%	8 62%~	8 73%~	2 67%~	1 50%~	4 57%~	8 62%~	19 58%~	137 73%~	121 73%*	33 55%*	63 66%	94 72%
NOT ANSWERED	27	388			3	1	6		3	3	2		1		1		9	6	4	2	8
VALID CASES	234	5065	20	43	42	59	55	9	166	13	11	3	2	7	13	33	188	165	60	96	131
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		GENDER			
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
PQ34 NEVER	6 3%	97 2%	~	~	~	4 7%	~	~	2 1%	~	1 9%	~	~	~	1 8%	~	4 2%	3 2%	2 3%	~	4 3%
SOMETIMES	18 8%	322 6%	2 10%	7 16%	2 5%	5 8%	2 4%	~	11 7%	~	1 9%	~	1 50%	1 14%	3 23%	2 6%	14 7%	9 6%	9 15%*	10 10%	8 6%
USUALLY	27 12%	697 14%	2 10%	3 7%	2 5%	12 20%*	5 9%	1 11%	19 12%	3 23%	~	~	~	1 14%	1 8%	7 21%	17 9%	17 10%	8 13%	14 15%	11 9%
ALWAYS	181 78%	3891 78%	16 80%	33 77%	37 90%	38 64%*	47 87%*	8 89%	133 81%	10 77%	9 82%	3 100%	1 50%	5 71%	8 62%	24 73%	153 81%	134 82%*	41 68%	72 75%	106 82%
#ALWAYS + USUALLY (NET)	208 90%	4589 92%	18 90%	36 84%	39 95%	50 85%	52 96%*	9 100%	152 92%	13 100%	9 82%	3 100%	1 50%	6 86%	9 69%	31 94%	170 90%	151 93%*	49 82%*	86 90%	117 91%
TOP BOX SCORE	181 78%	3891 78%	16 80%	33 77%	37 90%	38 64%*	47 87%*	8 89%	133 81%	10 77%	9 82%	3 100%	1 50%	5 71%	8 62%	24 73%	153 81%	134 82%*	41 68%	72 75%	106 82%
NOT ANSWERED	2	87			1		1		1								2				2
VALID CASES	232	5008	20	43	41	59	54	9	165	13	11	3	2	7	13	33	188	163	60	96	129
NUMBER OF RESPONDENTS	234 100%	5095 100%	20 100%	43 100%	42 100%	59 100%	55 100%	9 100%	166 100%	13 100%	11 100%	3 100%	2 100%	7 100%	13 100%	33 100%	188 100%	165 100%	60 100%	96 100%	131 100%

[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?

	FMCA TOT ADLT	OHP TOT ADLT	AGE							RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE MALE			
Q35 WORST HEALTH PLAN POSSIBLE	3 1%	59 1%		3 8%~				3 2%~								3 2%~		3 5%~	3 3%~		
01	2 0.9%	31 0.6%	1 5%~			1 2%		2 1%								2 1%~	1 0.6%	1 2%	1 1%~	1 0.8%	
02	1 0.4%	40 0.8%			1 2%~			1 0.6%								1 0.6%~		1 2%~		1 0.8%~	
03	6 3%	85 2%			3 7%~	1 2%	1 2%	1 12%~	4 3%						1 7%~	2 6%~	4 2%~	5 3%	1 2%	1 1%	5 4%
04	8 4%	121 2%	1 5%~	2 5%~	1 2%~	3 5%	1 2%		8 5%*							1 3%~	7 4%~	8 5%~		4 4%	4 3%
05	28 12%	451 9%	4 21%~	5 13%~	5 12%~	7 13%	6 11%	1 12%~	22 14%	1 ~			1 ~	3 14%~	1 3%~	26 14%~	17 11%	11 19%	15 17%	13 10%	
06	15 7%	332 7%		2 5%~	1 2%~	6 11%	6 11%		10 6%	1 7%~	2 18%~		1 ~	1 33%~	1 ~	13 7%~	8 5%	7 12%	3 3%	11 9%	
07	30 13%	632 13%	3 16%~	8 20%~	5 12%~	4 7%	7 13%		19 12%	2 13%~	1 9%~			3 ~	3 21%~	24 9%~	22 13%~	5 14%	10 8%	17 11%	13 13%
08	31 14%	921 19%*	1 5%~	6 15%~	9 22%~	6 11%	9 16%		19 12%	3 20%~	3 27%~		1 ~	1 33%~	1 14%~	25 7%~	25 14%~	6 16%	14 10%	17 13%	
09	38 17%	768 16%	4 21%~	4 10%~	2 5%~	11 20%	12 21%	3 38%~	21 14%	4 27%~	1 9%~	1 50%~	1 33%~	4 57%~	1 7%~	27 22%~	27 15%~	30 19%	6 10%	20 18%	16 16%
BEST HEALTH PLAN POSSIBLE	64 28%	1430 29%	5 26%~	10 25%~	14 34%~	17 30%	14 25%	3 38%~	46 30%	5 33%~	3 27%~	1 50%~		1 ~	4 14%~	48 29%~	44 28%	18 31%	23 26%	40 31%	
#8-10 (NET)	133 59%	3119 64%	10 53%~	20 50%~	25 61%~	34 61%	35 63%	6 75%~	86 55%	12 80%~	7 64%~	2 100%~	2 67%~	6 86%~	6 43%~	24 75%~	100 56%~	99 62%	30 51%	53 59%	77 60%

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	FMCA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE				
9-10 (NET)	102 45%	2198 45%	9 47%~	14 35%~	16 39%~	28 50%	26 46%	6 75%~	67 43%	9 60%~	4 36%~	2 100%~	1 33%~	5 71%~	5 36%~	18 56%~	75 42%~	74 46%	24 41%	39 43%	60 47%
NOT ANSWERED	35	583	1	3	4	4	5	1	14	1	2	1			1	17	11	5	8	10	
VALID CASES	226	4870	19	40	41	56	56	8	155	15	11	2	3	7	14	32	180	160	59	90	129
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%
MEAN	7.63	7.82	7.37	7.12	7.59	7.71	7.89	8.13	7.43	8.67	7.91	9.50	7.67	8.43	7.29	8.22	7.46	7.78	7.12	7.43	7.75
p stat_(*=Sig @ p<=.05)		.146	~	~	~.747	.263	~	.034*	~	~	~	~	~	~	~	~	~	~.166	.091	.319	.363

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?

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE MALE				
Q35A YES	21 9%	736 14%*	1 5%~	1 2%~	2 5%~	7 12%	7 12%	2 22%~	12 7%	2 13%~	2 17%~	1 ~	1 33%~	1 14%~	1 7%~	4 12%~	15 8%~	7 4%*	13 21%*	9 9%	11 8%
NO	219 91%	4378 86%*	19 95%~	42 98%~	42 95%~	52 88%	52 88%	7 78%~	155 93%	13 87%~	10 83%~	3 100%~	2 67%~	6 86%~	13 93%~	29 88%~	178 92%~	161 96%*	50 79%*	88 91%	125 92%
NOT ANSWERED	21	339			1	1	2		2	1	1					4	3	1	1	3	
VALID CASES	240	5114	20	43	44	59	59	9	167	15	12	3	3	7	14	33	193	168	63	97	136
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35B NEVER	4 19%	123 19%	~	~	50%	~	29%	50%	17%	50%	~	~	~	~	100%	50%	13%	14%	23%	11%	27%
SOMETIMES	2 10%	72 11%	~	~	~	14%	14%	~	17%	~	~	~	~	~	~	~	13%	~	15%	22%	~
USUALLY	3 14%	177 27%	~	~	~	14%	14%	50%	17%	~	50%	~	~	~	~	~	20%	~	23%	33%	~
ALWAYS	12 57%	279 43%	100%	100%	50%	71%	43%	~	50%	50%	50%	~	100%	100%	~	50%	53%	86%	38%	33%	73%
#ALWAYS + USUALLY (NET)	15 71%	456 70%	100%	100%	50%	86%	57%	50%	67%	50%	100%	~	100%	100%	~	50%	73%	86%	62%	67%	73%
TOP BOX SCORE	12 57%	279 43%	100%	100%	50%	71%	43%	~	50%	50%	50%	~	100%	100%	~	50%	53%	86%	38%	33%	73%
NOT ANSWERED		24																			
VALID CASES	21	651	1	1	2	7	7	2	12	2	2		1	1	1	4	15	7	13	9	11
NUMBER OF RESPONDENTS	21	675	1	1	2	7	7	2	12	2	2		1	1	1	4	15	7	13	9	11
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35A = YES]

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q35C YES	34 14%	760 15%	3 15%~	2 5%~	5 11%~	10 17%	10 33%~	3	18 11%*	2 13%~	3 25%~	1 33%~	1 33%~	6 ~ 43%~	3 9%~	28 15%~	16 10%*	17 27%*	13 14%	20 15%	
NO	205 86%	4319 85%	17 85%~	41 95%~	39 89%~	48 83%	49 83%	6 67%~	148 89%*	13 87%~	9 75%~	2 67%~	2 67%~	7 100%~	8 57%~	30 91%~	164 85%~	151 90%*	46 73%*	83 86%	116 85%
NOT ANSWERED	22	373			1	2	2		3	1	1					5	4	1	2	3	
VALID CASES	239	5080	20	43	44	58	59	9	166	15	12	3	3	7	14	33	192	167	63	96	136
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35D NEVER	7 21%	165 23%	2 67%	~	1 ~	2 10%	2 20%	2 67%	4 22%	~	~	~	~	~	3 60%	1 33%	6 21%	4 25%	3 19%	1 8%	6 30%
SOMETIMES	7 21%	141 19%	~	1 50%	3 30%	2 20%	~	22%	~	1 33%	~	~	~	~	1 20%	~	6 21%	1 6%	5 31%	2 17%	4 20%
USUALLY	11 33%	179 25%	1 33%	~	1 25%	4 40%	4 40%	1 33%	6 33%	1 50%	2 67%	~	1 100%	~	~	1 33%	9 32%	5 31%	6 38%	6 50%	5 25%
ALWAYS	8 24%	239 33%	~	1 50%	3 75%	2 20%	2 20%	~	4 22%	1 50%	~	1 100%	~	~	1 20%	1 33%	7 25%	6 38%	2 12%	3 25%	5 25%
#ALWAYS + USUALLY (NET)	19 58%	418 58%	1 33%	1 50%	4 100%	6 60%	6 60%	1 33%	10 56%	2 100%	2 67%	1 100%	1 100%	~	1 20%	2 67%	16 57%	11 69%	8 50%	9 75%	10 50%
TOP BOX SCORE	8 24%	239 33%	~	1 50%	3 75%	2 20%	2 20%	~	4 22%	1 50%	~	1 100%	~	~	1 20%	1 33%	7 25%	6 38%	2 12%	3 25%	5 25%
NOT ANSWERED	1	20			1									1					1	1	
VALID CASES	33	725	3	2	4	10	10	3	18	2	3	1	1	5	3	28	16	16	12	20	
NUMBER OF RESPONDENTS	34	745	3	2	5	10	10	3	18	2	3	1	1	6	3	28	16	17	13	20	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35C = YES]

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q35E	FMCA																				
YES	OHP TOT ADLT	2872	7	20	24	40	37	7	96	9	7	2	2	4	10	18	111	91	42	52	82
		57%	35%~	47%~	53%~	68%*	62%	78%~	57%	60%~	54%~	67%~	67%~	57%~	71%~	55%~	57%~	54%	67%	54%	59%
NO	OHP TOT ADLT	2261	13	23	21	19	23	2	72	6	6	1	1	3	4	15	84	79	21	45	56
		43%	65%~	53%~	47%~	32%*	38%	22%~	43%	40%~	46%~	33%~	33%~	43%~	29%~	45%~	43%~	46%	33%	46%	41%
NOT ANSWERED	OHP TOT ADLT	320				1	1		1	1							2	1	1	1	1
VALID CASES	OHP TOT ADLT	5133	20	43	45	59	60	9	168	15	13	3	3	7	14	33	195	170	63	97	138
NUMBER OF RESPONDENTS	OHP TOT ADLT	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35F																					
NO EFFORT AT ALL	10 7%	94 3%	1 14%~	1 5%~	1 4%~	3 8%~	2 6%~	2 29%~	7 7%~	1 ~ 14%~	1 ~ 50%~	1 ~ 10%~	1 11%~	2 11%~	8 7%~	4 4%~	6 15%~	6 12%~	4 5%		
A LITTLE EFFORT WAS MADE	13 10%	213 8%	1 14%~	2 10%~	2 9%~	4 10%~	3 8%~	1 14%~	11 12%~	~	~	~	1 ~ 25%~	1 10%~	3 17%~	10 9%~	8 9%~	4 10%~	4 8%~	8 10%	
SOME EFFORT WAS MADE	31 23%	662 24%	1 14%~	7 35%~	5 22%~	9 23%~	9 25%~	~	20 21%~	1 11%~	2 29%~	1 ~ 50%~	1 25%~	4 40%~	4 22%~	24 22%~	19 21%~	12 29%~	12 23%~	19 24%	
A LOT OF EFFORT WAS MADE	81 60%	1793 65%	4 57%~	10 50%~	15 65%~	24 60%~	22 61%~	4 57%~	56 60%~	8 89%~	4 57%~	2 100%~	1 ~ 50%~	3 40%~	4 50%~	68 62%~	59 66%~	19 46%~	30 58%~	49 61%	
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	112 83%	2455 89%*	5 71%~	17 85%~	20 87%~	33 83%~	31 86%~	4 57%~	76 81%~	9 100%~	6 86%~	2 100%~	1 50%~	3 75%~	8 80%~	13 72%~	92 84%~	78 87%~	31 76%~	42 81%~	68 85%
TOP BOX SCORE	81 60%	1793 65%	4 57%~	10 50%~	15 65%~	24 60%~	22 61%~	4 57%~	56 60%~	8 89%~	4 57%~	2 100%~	1 ~ 50%~	3 40%~	4 50%~	68 62%~	59 66%~	19 46%~	30 58%~	49 61%	
NOT ANSWERED	2	95			1		1		2						1	1	1			2	
VALID CASES	135	2763	7	20	23	40	36	7	94	9	7	2	2	4	10	18	110	90	41	52	80
NUMBER OF RESPONDENTS	137	2858	7	20	24	40	37	7	96	9	7	2	2	4	10	18	111	91	42	52	82
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35E = YES]

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35G																					
NO EFFORT AT ALL	16 12%	135 5%*	1 14%~	2 10%~	3 13%~	4 10%~	5 14%~	1 14%~	14 15%~	1 ~ 14%~	1 ~ 50%~			3 ~ 17%~	13 12%~	9 10%~	6 14%~	7 13%~	8 10%~		
A LITTLE EFFORT WAS MADE	5 4%	226 8%*		1 ~ 5%~	1 4%~	2 5%~	1 ~ 14%~	3 3%~						2 ~ 20%~	1 6%~	4 4%~	3 3%~	2 5%~	1 2%~	4 5%~	
SOME EFFORT WAS MADE	25 18%	652 24%		4 ~ 20%~	6 25%~	8 20%~	7 19%~	18 ~ 19%~	3 33%~		1 ~ 50%~	1 25%~	2 20%~	2 11%~	20 18%~	17 19%~	8 19%~	8 15%~	17 21%~		
A LOT OF EFFORT WAS MADE	91 66%	1759 63%	6 86%~	13 65%~	14 58%~	26 65%~	25 68%~	5 71%~	61 64%~	6 67%~	6 86%~	2 100%~		3 ~ 75%~	6 60%~	12 67%~	74 67%~	62 68%~	26 62%~	36 69%~	53 65%~
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	116 85%	2411 87%	6 86%~	17 85%~	20 83%~	34 85%~	32 86%~	5 71%~	79 82%~	9 100%~	6 86%~	2 100%~	1 50%~	4 100%~	8 80%~	14 78%~	94 85%~	79 87%~	34 81%~	44 85%~	70 85%~
TOP BOX SCORE	91 66%	1759 63%	6 86%~	13 65%~	14 58%~	26 65%~	25 68%~	5 71%~	61 64%~	6 67%~	6 86%~	2 100%~		3 ~ 75%~	6 60%~	12 67%~	74 67%~	62 68%~	26 62%~	36 69%~	53 65%~
NOT ANSWERED		87																			
VALID CASES	137	2771	7	20	24	40	37	7	96	9	7	2	2	4	10	18	111	91	42	52	82
NUMBER OF RESPONDENTS	137 100%	2858 100%	7 100%	20 100%	24 100%	40 100%	37 100%	7 100%	96 100%	9 100%	7 100%	2 100%	2 100%	4 100%	10 100%	18 100%	111 100%	91 100%	42 100%	52 100%	82 100%

[ASKED IF Q35E = YES]

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35H NO EFFORT AT ALL	15 11%	191 7%	1 14%	2 10%	2 8%	3 8%	5 14%	2 29%	14 15%	~	~	~	~	~	10%	1 17%	12 11%	8 9%	6 15%	6 12%	8 10%
A LITTLE EFFORT WAS MADE	8 6%	242 9%	~	2 10%	2 8%	4 10%	~	~	6 6%	~	~	1 50%	1 25%	~	~	2 11%	6 5%	4 4%	4 10%	4 8%	4 5%
SOME EFFORT WAS MADE	31 23%	781 28%	1 14%	6 30%	5 21%	8 20%	10 28%	1 14%	20 21%	1 11%	1 14%	1 50%	1 25%	5 50%	4 22%	25 23%	24 26%	6 15%	11 21%	20 25%	
A LOT OF EFFORT WAS MADE	82 60%	1558 56%	5 71%	10 50%	15 63%	25 63%	21 58%	4 57%	55 58%	8 89%	6 86%	2 100%	2 ~	4 50%	4 40%	9 50%	67 61%	55 60%	25 61%	31 60%	49 60%
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	113 83%	2339 84%	6 86%	16 80%	20 83%	33 83%	31 86%	5 71%	75 79%	9 100%	7 100%	2 100%	1 50%	3 75%	9 90%	13 72%	92 84%	79 87%	31 76%	42 81%	69 85%
TOP BOX SCORE	82 60%	1558 56%	5 71%	10 50%	15 63%	25 63%	21 58%	4 57%	55 58%	8 89%	6 86%	2 100%	2 ~	4 50%	4 40%	9 50%	67 61%	55 60%	25 61%	31 60%	49 60%
NOT ANSWERED	1	85					1		1							1		1		1	
VALID CASES	136	2773	7	20	24	40	36	7	95	9	7	2	2	4	10	18	110	91	41	52	81
NUMBER OF RESPONDENTS	137	2858	7	20	24	40	37	7	96	9	7	2	2	4	10	18	111	91	42	52	82
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35E = YES]

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	FMCA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	POOR	MALE	FE- MALE	
Q35I YES	86 36%	1866 37%	8 40%~	11 26%~	15 36%~	25 42%	20 34%	5 56%~	58 35%	9 69%~	4 33%~	1 33%~	1 33%~	3 43%~	5 36%~	14 42%~	68 36%~	54 33%	29 48%*	35 37%	49 36%
NO	150 64%	3186 63%	12 60%~	31 74%~	27 64%~	34 58%	39 66%	4 44%~	108 65%	4 31%~	8 67%~	2 67%~	2 67%~	4 57%~	9 64%~	19 58%~	122 64%~	112 67%	32 52%*	60 63%	86 64%
NOT ANSWERED	25	400		1	3	1	2		3	3	1					7	5	3	3	4	
VALID CASES	236	5053	20	42	42	59	59	9	166	13	12	3	3	7	14	33	190	166	61	95	135
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q35J #YES	76 89%	1483 85%	8 100%	11 100%	11 73%	23 92%	18 90%	3 75%	49 86%	9 100%	4 100%	1 100%	1 100%	3 100%	4 100%	14 100%	58 87%	47 87%	27 93%	31 89%	43 90%
NO	9 11%	254 15%	~	~	4 27%	2 8%	2 10%	1 25%	8 14%	~	~	~	~	~	1 20%	9 13%	7 13%	2 7%	4 11%	5 10%	
NOT ANSWERED	1	58					1	1								1				1	
VALID CASES	85	1737	8	11	15	25	20	4	57	9	4	1	1	3	5	14	67	54	29	35	48
NUMBER OF RESPONDENTS	86	1795	8	11	15	25	20	5	58	9	4	1	1	3	5	14	68	54	29	35	49
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35I = YES]

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q35K #YES	73 86%	1402 81%	8 100%	11 100%	10 67%	20 80%	18 90%	4 100%	48 84%	8 89%	3 75%	1 100%	1 100%	3 100%	4 80%	14 100%	55 82%	46 85%	25 86%	31 89%	40 83%
NO	12 14%	326 19%	~	~	5 33%	5 20%	2 10%	~	9 16%	1 11%	1 25%	~	~	~	1 20%	12 ~	8 15%	4 14%	4 11%	8 17%	
NOT ANSWERED	1	67					1	1							1					1	
VALID CASES	85	1728	8	11	15	25	20	4	57	9	4	1	1	3	5	14	67	54	29	35	48
NUMBER OF RESPONDENTS	86 100%	1795 100%	8 100%	11 100%	15 100%	25 100%	20 100%	4 100%	57 100%	9 100%	4 100%	1 100%	1 100%	3 100%	5 100%	14 100%	67 100%	54 100%	29 100%	35 100%	48 100%

[ASKED IF Q35I = YES]

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35L NEVER	31 13%	654 13%	3 15%~	4 10%~	8 19%~	8 14%	7 12%	1 13%~	22 14%	2 12%~	3 23%~	1 33%~	~	~	~	4 12%~	27 14%~	21 13%	9 15%	18 20%*	13 10%
SOMETIMES	25 11%	567 11%	~	6 15%~	6 14%~	8 14%	3 5%*	1 13%~	16 10%	2 12%~	1 8%~	~	2 67%~	1 14%~	2 15%~	5 15%~	18 10%~	14 8%	11 18%	7 8%	16 12%
USUALLY	51 22%	1126 23%	7 35%~	12 29%~	10 24%~	12 21%	10 17%	~	32 20%	1 6%~	3 23%~	~	1 33%~	5 71%~	6 46%~	9 27%~	41 22%~	44 27%*	7 11%*	16 18%	35 26%
ALWAYS	125 54%	2613 53%	10 50%~	19 46%~	18 43%~	29 51%	40 67%*	6 75%~	90 56%	11 69%~	6 46%~	2 67%~	~	1 14%~	5 38%~	15 45%~	101 54%~	86 52%	35 56%	50 55%	72 53%
#ALWAYS + USUALLY (NET)	176 76%	3739 75%	17 85%~	31 76%~	28 67%~	41 72%	50 83%	6 75%~	122 76%	12 75%~	9 69%~	2 67%~	1 33%~	6 86%~	11 85%~	24 73%~	142 76%~	130 79%	42 68%	66 73%	107 79%
TOP BOX SCORE	125 54%	2613 53%	10 50%~	19 46%~	18 43%~	29 51%	40 67%*	6 75%~	90 56%	11 69%~	6 46%~	2 67%~	~	1 14%~	5 38%~	15 45%~	101 54%~	86 52%	35 56%	50 55%	72 53%
NOT ANSWERED	29	493	~	2	3	3	1	1	9	~	~	~	~	~	1	10	6	2	7	3	~
VALID CASES	232	4960	20	41	42	57	60	8	160	16	13	3	3	7	13	33	187	165	62	91	136
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE					RACE							ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE	FE- MALE		
Q35M ALWAYS	17 7%	387 8%	2 10%~	4 10%~	4 9%~	3 5%	3 5%	12 7%	3 19%~	~	~	~	~	~	1 7%~	3 9%~	13 7%~	9 5%	6 10%	7 8%	9 7%
USUALLY	9 4%	258 5%	3 15%~	1 2%~	2 5%~	1 2%	2 3%	5 3%	~	1 8%~	~	~	2 29%~	2 7%~	1 6%~	7 4%~	5 3%	4 6%	3 3%	6 4%	
SOMETIMES	35 15%	881 18%	1 5%~	7 17%~	8 19%~	11 19%	8 13%	21 13%	3 19%~	3 23%~	~	2 67%~	1 14%~	3 21%~	7 21%~	26 14%~	26 16%	9 15%	12 13%	23 17%	
NEVER	171 74%	3452 69%	14 70%~	29 71%~	29 67%~	42 74%	47 78%	8 100%~	122 76%	10 63%~	9 69%~	3 100%~	1 33%~	4 57%~	9 64%~	21 64%~	142 76%~	126 76%	43 69%	71 76%	97 72%
#NEVER + SOMETIMES (NET)	206 89%	4333 87%	15 75%~	36 88%~	37 86%~	53 93%	55 92%	8 100%~	143 89%	13 81%~	12 92%~	3 100%~	3 100%~	5 71%~	12 86%~	28 85%~	168 89%~	152 92%	52 84%	83 89%	120 89%
TOP BOX SCORE	171 74%	3452 69%	14 70%~	29 71%~	29 67%~	42 74%	47 78%	8 100%~	122 76%	10 63%~	9 69%~	3 100%~	1 33%~	4 57%~	9 64%~	21 64%~	142 76%~	126 76%	43 69%	71 76%	97 72%
NOT ANSWERED	29	476		2	2	3	1	1	9							9	5	2	5	4	
VALID CASES	232	4977	20	41	43	57	60	8	160	16	13	3	3	7	14	33	188	166	62	93	135
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT PAN- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q35N ALWAYS	4 2%	113 2%	1 5%~	1 2%~	1 2%~	~	1 2%	~	2 1%	1 6%~	1 8%~	~	~	~	~	~	4 2%	2 1%	2 3%	2 2%	2 1%	
USUALLY	9 4%	124 2%	~	3 7%~	2 5%~	3 5%	1 2%	~	8 5%	1 6%~	~	~	~	~	~	~	8 4%	6 4%	3 5%	4 4%	5 4%	
SOMETIMES	22 9%	728 15%*	~	4 10%~	6 14%~	5 9%	6 10%	1 13%~	12 7%	~	1 8%~	~	~	1 14%~	4 29%~	~	6 18%~	15 8%~	13 8%	9 15%	6 6%	15 11%
NEVER	197 85%	4037 81%	19 95%~	34 81%~	34 79%~	48 86%	52 87%	7 88%~	138 86%	14 88%~	11 85%~	3 100%~	3 100%~	6 86%~	10 71%~	~	27 82%~	161 86%~	145 87%	48 77%	81 87%	113 84%
#NEVER + SOMETIMES (NET)	219 94%	4765 95%	19 95%~	38 90%~	40 93%~	53 95%	58 97%	8 100%~	150 94%	14 88%~	12 92%~	3 100%~	3 100%~	7 100%~	14 100%~	~	33 100%~	176 94%~	158 95%	57 92%	87 94%	128 95%
TOP BOX SCORE	197 85%	4037 81%	19 95%~	34 81%~	34 79%~	48 86%	52 87%	7 88%~	138 86%	14 88%~	11 85%~	3 100%~	3 100%~	6 86%~	10 71%~	~	27 82%~	161 86%~	145 87%	48 77%	81 87%	113 84%
NOT ANSWERED	29	451	~	1	2	4	1	1	9	~	~	~	~	~	~	~	9	5	2	5	4	
VALID CASES	232	5002	20	42	43	56	60	8	160	16	13	3	3	7	14	~	33	188	166	62	93	135
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	~	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

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

	FMCA TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER HAW/ IND/ PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q350 ALWAYS	6 3%	98 2%	2 ~	1 5%	2 2%	1 4%	1 2%	6 4%	~	~	~	~	~	~	6 3%	4 2%	2 3%	3 3%	3 2%		
USUALLY	4 2%	112 2%	3 ~	1 7%	2 2%	~	~	3 2%	~	~	~	~	1 7%	4 2%	3 2%	1 2%	2 2%	2 1%			
SOMETIMES	18 8%	493 10%	1 5%	1 2%	5 12%	6 11%	4 7%	1 13%	13 8%	1 6%	~	1 33%	1 14%	1 7%	3 9%	14 7%	12 7%	6 10%	5 5%	12 9%	
NEVER	205 88%	4278 86%	19 95%	36 86%	36 84%	49 86%	55 92%	7 88%	139 86%	15 94%	13 100%	3 100%	2 67%	6 86%	12 86%	30 91%	165 87%	148 89%	53 85%	84 89%	118 87%
#NEVER + SOMETIMES (NET)	223 96%	4771 96%	20 100%	37 88%	41 95%	55 96%	59 98%	8 100%	152 94%	16 100%	13 100%	3 100%	3 100%	7 93%	13 93%	33 100%	179 95%	160 96%	59 95%	89 95%	130 96%
TOP BOX SCORE	205 88%	4278 86%	19 95%	36 86%	36 84%	49 86%	55 92%	7 88%	139 86%	15 94%	13 100%	3 100%	2 67%	6 86%	12 86%	30 91%	165 87%	148 89%	53 85%	84 89%	118 87%
NOT ANSWERED	28	472	1	2	3	1	1	8							8	4	2	4	4		
VALID CASES	233	4981	20	42	43	57	60	8	161	16	13	3	3	7	14	33	189	167	62	94	135
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35P																					
#YES DEFINITELY	152 66%	3312 67%	16 80%~	26 62%~	27 61%~	33 60%	42 72%	6 75%~	107 67%	11 69%~	9 69%~	2 67%~	2 67%~	5 71%~	7 54%~	20 63%~	126 67%~	110 67%	39 64%	63 66%	87 66%
YES SOMEWHAT	53 23%	1213 25%	2 10%~	11 26%~	13 30%~	13 24%	12 21%	2 25%~	32 20%	4 25%~	2 15%~	1 33%~	1 33%~	2 29%~	6 46%~	9 28%~	41 22%~	39 24%	14 23%	20 21%	33 25%
NO	25 11%	418 8%	2 10%~	5 12%~	4 9%~	9 16%	4 7%	~	21 13%	1 6%~	2 15%~	~	~	~	~	3 9%~	21 11%~	16 10%	8 13%	12 13%	12 9%
NOT ANSWERED	31	511		1	1	5	3	1	9						1	1	9	6	3	3	7
VALID CASES	230	4942	20	42	44	55	58	8	160	16	13	3	3	7	13	32	188	165	61	95	132
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q35Q YES	116 50%	2643 53%	7 35%~	24 56%~	24 56%~	25 43%	29 48%	6 75%~	80 49%	12 75%~	6 46%~	2 67%~	2 67%~	3 43%~	5 38%~	12 36%~	98 51%~	91 54%*	24 39%	47 49%	68 50%
NO	117 50%	2382 47%	13 65%~	19 44%~	19 44%~	33 57%	31 52%	2 25%~	84 51%	4 25%~	7 54%~	1 33%~	1 33%~	4 57%~	8 62%~	21 64%~	94 49%~	78 46%*	37 61%	49 51%	67 50%
NOT ANSWERED	28	428			2	2	1	1	5					1		5	2	3	2	4	
VALID CASES	233	5025	20	43	43	58	60	8	164	16	13	3	3	7	13	33	192	169	61	96	135
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

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

	FMCA TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER HAW/ IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q35R NEVER	34 32%	799 36%	1 10%	12 50%	8 31%	5 24%	8 38%	22 34%	2 17%	3 38%	~	~	~	2 50%	4 44%	5 33%	26 31%	24 31%	10 34%	13 32%	21 33%
SOMETIMES	25 24%	439 20%	7 70%	6 25%	8 31%	3 14%	1 5%	10 16%	6 50%	3 38%	~	~	~	2 22%	2 27%	4 27%	20 24%	20 26%	5 17%	4 10%	21 33%
USUALLY	18 17%	421 19%	1 10%	5 21%	4 15%	5 24%	2 10%	1 33%	16 25%	~	~	~	1 100%	1 11%	2 13%	16 19%	12 16%	6 21%	6 21%	8 20%	10 16%
ALWAYS	29 27%	564 25%	1 10%	1 4%	6 23%	8 38%	10 48%	2 67%	16 25%	4 33%	2 25%	1 100%	1 100%	2 50%	2 22%	4 27%	23 27%	21 27%	8 28%	16 39%	12 19%
#ALWAYS + USUALLY (NET)	47 44%	985 44%	2 20%	6 25%	10 38%	13 62%	3 57%	3 100%	32 50%	4 33%	2 25%	1 100%	1 100%	2 50%	3 33%	6 40%	39 46%	33 43%	14 48%	24 59%	22 34%
TOP BOX SCORE	29 27%	564 25%	1 10%	1 4%	6 23%	8 38%	10 48%	2 67%	16 25%	4 33%	2 25%	1 100%	1 100%	2 50%	2 22%	4 27%	23 27%	21 27%	8 28%	16 39%	12 19%
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	123	2730	10	19	18	34	37	5	96	4	5	2	2	3	5	17	103	88	33	55	67
NOT ANSWERED	32	500			1	5	3	1	9							1	9	6	2	2	8
VALID CASES	106	2223	10	24	26	21	21	3	64	12	8	1	1	4	9	15	85	77	29	41	64
NUMBER OF RESPONDENTS	261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE	
Q36 EXCELLENT	30 13%	477 9%	6 30%~	9 21%~	6 14%~	4 7%	5 8%	17 10%	5 31%~	2 15%~	~	~	2 29%~	1 7%~	6 18%~	24 12%~	30 18%~	12 12%	18 13%		
VERY GOOD	73 31%	1176 23%*	5 25%~	12 28%~	19 43%~	15 25%	20 34%	2 25%~	52 32%	3 19%~	6 46%~	1 33%~	1 33%~	3 43%~	3 21%~	9 27%~	61 32%~	73 43%*	30 31%	42 31%	
GOOD	68 29%	1761 35%*	7 35%~	11 26%~	10 23%~	22 37%	16 27%	2 25%~	51 31%	4 25%~	2 15%~	2 67%~	~	1 14%~	4 29%~	8 24%~	58 30%~	68 40%~	27 28%	41 30%	
FAIR	51 22%	1244 25%	1 5%~	10 23%~	8 18%~	15 25%	14 24%	2 25%~	37 22%	2 13%~	2 15%~	~	2 67%~	1 14%~	5 36%~	9 27%~	39 20%~	51 80%*	21 21%	29 21%	
POOR	13 6%	405 8%	1 5%~	1 2%~	1 2%~	4 7%	4 7%	2 25%~	8 5%	2 13%~	1 8%~	~	~	~	1 7%~	1 3%~	11 6%~	13 20%*	8 8%	5 4%	
#EXCELLENT + VERY GOOD + GOOD (NET)	171 73%	3415 67%	18 90%~	32 74%~	35 80%~	41 68%	41 69%	4 50%~	120 73%	12 75%~	10 77%~	3 100%~	1 33%~	6 86%~	8 57%~	23 70%~	143 74%~	171 100%~	69 70%	101 75%	
NOT ANSWERED	26	389			1		2	1	4							4				4	
VALID CASES	235	5064	20	43	44	60	59	8	165	16	13	3	3	7	14	33	193	171	64	98	135
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE	
Q37																					
EXCELLENT	57 24%	895 18%*	9 45%~	10 24%~	10 22%~	12 20%	15 26%	1 13%~	36 22%	6 38%~	4 31%~	~	~	4 57%~	2 14%~	10 30%~	46 24%~	50 30%*	6 9%*	20 21%	37 27%
VERY GOOD	68 29%	1258 25%	6 30%~	10 24%~	11 24%~	20 33%	17 29%	4 50%~	44 27%	4 25%~	7 54%~	1 33%~	1 33%~	3 43%~	6 43%~	7 21%~	59 31%~	54 32%	14 22%	30 31%	37 27%
GOOD	59 25%	1533 30%	3 15%~	12 29%~	14 31%~	16 27%	13 22%	1 13%~	46 28%	5 31%~	1 8%~	1 33%~	~	~	2 14%~	10 30%~	45 23%~	45 27%	14 22%	21 22%	38 28%
FAIR	41 18%	1027 20%	2 10%~	8 19%~	7 16%~	9 15%	13 22%	2 25%~	31 19%	1 6%~	1 8%~	~	2 67%~	4 29%~	6 18%~	34 18%~	18 11%*	23 36%*	20 21%	21 16%	
POOR	9 4%	363 7%*	~	2 5%~	3 7%~	3 5%	~	~	7 4%	~	~	1 33%~	~	~	~	8 4%~	2 1%*	7 11%*	6 6%	2 1%*	
#EXCELLENT + VERY GOOD + GOOD (NET)	184 79%	3685 73%*	18 90%~	32 76%~	35 78%~	48 80%	45 78%	6 75%~	126 77%	15 94%~	12 92%~	2 67%~	1 33%~	7 100%~	10 71%~	27 82%~	150 78%~	149 88%*	34 53%*	71 73%	112 83%
NOT ANSWERED	27	378		1			3	1	5							5	2		1	4	
VALID CASES	234	5075	20	42	45	60	58	8	164	16	13	3	3	7	14	33	192	169	64	97	135
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
FMCA	OHP	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q38 #YES	87 38%	2160 44%	7 39%	11 26%	12 28%	31 53%*	20 34%	6 75%	60 37%	7 47%	4 33%	2 ~	2 67%	2 29%	7 54%	14 42%	68 36%	64 38%	23 38%	37 40%	50 37%
NO	142 62%	2803 56%	11 61%	31 74%	31 72%	27 47%*	39 66%	2 25%	102 63%	8 53%	8 67%	3 100%	1 33%	5 71%	6 46%	19 58%	120 64%	104 62%	37 62%	56 60%	84 63%
DON'T KNOW	5	112	2		1	2		3		1			1		4		1	4	3	2	
NOT ANSWERED	27	379		1	1		2	1	4	1					5		2		2	3	
VALID CASES	229	4963	18	42	43	58	59	8	162	15	12	3	3	7	13	33	188	168	60	93	134
NUMBER OF RESPONDENTS	261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE				
Q39 EVERY DAY	42 18%	1063 21%	1 5%	6 14%	5 11%	20 34%*	9 15%	33 20%	2 12%	1 3%	1 3%	3 21%	2 6%	37 19%	27 16%	15 23%	18 18%	23 17%			
SOME DAYS	29 12%	463 9%	3 15%	6 14%	3 7%	12 20%	4 7%	1 13%	20 12%	3 19%	1 3%	4 29%	4 12%	25 13%	20 12%	9 14%	15 15%	14 10%			
NOT AT ALL	164 70%	3502 70%	16 80%	31 72%	37 82%	27 46%*	46 78%	7 88%	112 68%	11 69%	13 100%	2 67%	1 33%	7 100%	7 50%	27 82%	131 68%	122 72%	40 63%	65 66%	98 73%
DON'T KNOW	1	42				1		1					1	1					1		
NOT ANSWERED	25	383				2	1	3					3	1					3		
VALID CASES	235	5028	20	43	45	59	59	8	165	16	13	3	3	7	14	33	193	169	64	98	135
NUMBER OF RESPONDENTS	261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	FMCA TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	POOR	MALE	FE- MALE	
Q40 NEVER	16 23%	435 26%	2 50%	3 25%	2 25%	7 23%	2 15%	12 23%	~	~	~	1 50%	3 43%	2 33%	14 23%	13 28%	3 13%	12 38%	4 11%	
SOMETIMES	18 26%	355 21%	2 50%	2 17%	2 25%	7 23%	5 38%	11 21%	3 60%	~	~	1 50%	1 14%	2 33%	15 25%	12 26%	6 26%	7 22%	11 30%	
USUALLY	10 14%	280 17%	~	3 25%	3 38%	3 10%	1 8%	9 17%	~	~	~	~	1 14%	1 17%	9 15%	7 15%	3 13%	5 16%	5 14%	
ALWAYS	25 36%	589 35%	~	4 33%	1 13%	14 45%	5 38%	1 100%	20 38%	2 40%	~	1 100%	~	2 29%	1 17%	23 38%	14 30%	11 48%	8 25%	17 46%
#ALWAYS + USUALLY (NET)	35 51%	869 52%	~	7 58%	4 50%	17 55%	6 46%	1 100%	29 56%	2 40%	~	1 100%	~	3 43%	2 33%	32 52%	21 46%	14 61%	13 41%	22 59%
TOP BOX SCORE	25 36%	589 35%	~	4 33%	1 13%	14 45%	5 38%	1 100%	20 38%	2 40%	~	1 100%	~	2 29%	1 17%	23 38%	14 30%	11 48%	8 25%	17 46%
NOT ANSWERED	2	31				1		1							1	1	1	1		
VALID CASES	69	1659	4	12	8	31	13	1	52	5	1	2	7	6	61	46	23	32	37	
NUMBER OF RESPONDENTS	71	1690	4	12	8	32	13	1	53	5	1	2	7	6	62	47	24	33	37	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE	
Q41 NEVER	30 43%	750 46%	3 75%~	5 42%~	4 50%~	11 35%~	7 54%~	20 38%~	2 40%~			2 ~100%~		5 ~71%~	3 50%~	27 44%~	21 46%~	9 39%~	17 53%~	13 35%~
SOMETIMES	16 23%	380 23%	1 25%~	3 25%~	3 38%~	6 19%~	2 15%~	1 100%~	14 27%~					2 ~29%~	2 33%~	14 23%~	12 26%~	4 17%~	6 19%~	10 27%~
USUALLY	12 17%	243 15%		3 ~25%~		8 ~26%~	1 8%~		9 17%~	2 40%~					1 17%~	9 15%~	7 15%~	5 22%~	4 13%~	8 22%~
ALWAYS	11 16%	267 16%		1 ~8%~	1 13%~	6 19%~	3 23%~		9 17%~	1 20%~	1 ~100%~					11 ~18%~	6 13%~	5 22%~	5 16%~	6 16%~
#ALWAYS + USUALLY (NET)	23 33%	510 31%		4 ~33%~	1 13%~	14 45%~	4 31%~		18 35%~	3 60%~	1 ~100%~				1 17%~	20 33%~	13 28%~	10 43%~	9 28%~	14 38%~
TOP BOX SCORE	11 16%	267 16%		1 ~8%~	1 13%~	6 19%~	3 23%~		9 17%~	1 20%~	1 ~100%~					11 ~18%~	6 13%~	5 22%~	5 16%~	6 16%~
NOT ANSWERED		2 51				1			1							1	1	1	1	
VALID CASES	69	1639	4	12	8	31	13	1	52	5		1	2	7	6	61	46	23	32	37
NUMBER OF RESPONDENTS	71	1690	4	12	8	32	13	1	53	5		1	2	7	6	62	47	24	33	37
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	POOR	MALE	FE- MALE	
Q42 NEVER	37 54%	864 53%	3 75%~	3 27%~	7 88%~	17 57%~	6 46%~	24 48%~	2 40%~			2 ~100%~		6 ~86%~	4 67%~	31 53%~	25 56%~	12 52%~	17 57%~	19 51%~	
SOMETIMES	11 16%	340 21%	1 25%~	3 27%~		4 ~13%~	3 23%~	11 22%~							1 17%~	10 17%~	9 20%~	2 9%~	6 20%~	5 14%~	
USUALLY	9 13%	207 13%		3 ~27%~		3 ~10%~	3 23%~	7 14%~	2 40%~							9 ~15%~	6 13%~	3 13%~	3 10%~	6 16%~	
ALWAYS	11 16%	215 13%		2 ~18%~	1 13%~	6 20%~	1 8%~	1 100%~	8 16%~	1 20%~		1 ~100%~			1 ~14%~	9 17%~	5 15%~	6 11%~	4 26%~	7 13%~	19%~
#ALWAYS + USUALLY (NET)	20 29%	422 26%		5 ~45%~	1 13%~	9 30%~	4 31%~	1 100%~	15 30%~	3 60%~		1 ~100%~			1 ~14%~	18 17%~	11 31%~	9 24%~	7 39%~	13 23%~	35%~
TOP BOX SCORE	11 16%	215 13%		2 ~18%~	1 13%~	6 20%~	1 8%~	1 100%~	8 16%~	1 20%~		1 ~100%~			1 ~14%~	9 17%~	5 15%~	6 11%~	4 26%~	7 13%~	19%~
NOT ANSWERED		3 64		1		2		3							3	2	1	3			
VALID CASES	68	1626	4	11	8	30	13	1	50	5		1	2	7	6	59	45	23	30	37	
NUMBER OF RESPONDENTS	71	1690	4	12	8	32	13	1	53	5		1	2	7	6	62	47	24	33	37	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

Q43 DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q43																					
YES	49 21%	1180 23%	2 10%~	3 7%~	3 7%~	14 23%	23 38%*	4 50%~	36 22%	8 50%~	2 17%~	1 ~	1 33%~	1 ~	7%~	3 9%~	43 22%~	26 15%*	23 37%*	28 29%*	21 16%*
NO	184 79%	3848 77%	18 90%~	37 93%~	42 93%~	46 77%	37 62%*	4 50%~	130 78%	8 50%~	10 83%~	3 100%~	2 67%~	7 100%~	13 93%~	30 91%~	149 78%~	142 85%*	40 63%*	70 71%*	113 84%*
DON'T KNOW	2	55		2					1							2	2			2	
NOT ANSWERED	26	370		1			1	1	2		1					3	1	1		3	
VALID CASES	233	5028	20	40	45	60	60	8	166	16	12	3	3	7	14	33	192	168	63	98	134
NUMBER OF RESPONDENTS	261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q44 YES	16 7%	460 10%	1 6%	5 11%	4 7%	4 7%	2 25%	11 7%	1 8%	1 8%	1 33%	1 14%	1 7%	2 6%	12 7%	12 7%	4 7%	5 5%	11 8%		
NO	207 93%	4154 90%	17 94%	42 100%	39 89%	53 93%	6 93%	147 93%	12 92%	12 92%	3 100%	2 67%	6 86%	13 93%	30 94%	171 93%	153 93%	52 93%	87 95%	119 92%	
DON'T KNOW	12	459	2	1	3	6	8	3						1	11	5	7	6	6		
NOT ANSWERED	26	380		1	1	1	3								3	1	1		3		
VALID CASES	223	4614	18	42	44	57	54	8	158	13	13	3	3	7	14	32	183	165	56	92	130
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
FMCA	OHP	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q45																					
YES	70 30%	1742 35%	4 20%~	8 19%~	10 22%~	16 28%	26 43%* 75%~	6 30%	6 40%~	6 50%~	2 ~ 67%~	3 43%~	2 14%~	11 34%~	57 29%~	43 25%*	26 42%*	28 29%	42 31%		
NO	163 70%	3293 65%	16 80%~	35 81%~	35 78%~	41 72%	34 57%* 25%~	2 70%	9 60%~	6 50%~	3 ~100%~	1 33%~	4 57%~	12 86%~	21 66%~	137 71%~	126 75%*	36 58%*	70 71%	92 69%	
NOT ANSWERED	28	417				3	1	1								2	2		5		
VALID CASES	233	5036	20	43	45	57	60	8	166	15	12	3	3	7	14	32	194	169	62	98	134
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q46.1	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE
YES	53 20%	1316 24%	1 5%	5 12%	3 7%	14 23%	25 41%*	5 56%~	39 23%	3 19%~	5 38%~	~	~	1 14%~	2 14%~	10 30%~	42 21%	34 20%	19 30%	21 21%	32 23%
NO	208 80%	4137 76%	19 95%~	38 88%~	42 93%~	46 77%	36 59%*	4 44%~	130 77%	13 81%~	8 62%~	3 100%~	3 100%~	6 86%~	12 86%~	23 70%~	155 79%	137 80%	45 70%	77 79%	107 77%
VALID CASES	261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q46.2	FMCA TOT ADLT	18	25	35	45	55	65														
YES	71 27%	1635 10%~	4 9%~	11 24%~	17 28%	31 51%*	6 67%~	52 31%	9 56%~	3 23%~	2 67%~	1 33%~	2 ~ 14%~	8 24%~	62 31%*	42 25%	29 45%*	34 35%*	37 27%		
NO	190 73%	3818 90%~	39 91%~	34 76%~	43 72%	30 49%*	3 33%~	117 69%	7 44%~	10 77%~	1 33%~	2 67%~	7 100%~	12 86%~	25 76%~	135 69%*	129 75%	35 55%*	64 65%*	102 73%	
VALID CASES	261 100%	5453 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%	
NUMBER OF RESPONDENTS	261 100%	5453 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%	

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
FMCA	OHP	18	25	35	45	55	65		BLCK	NATV	AMER					NOT	EX &	VERY			
TOT	TOT	TO	TO	TO	TO	TO	AND	WHTE	AFR-	AS-	PAC	ALSK	MUL-	HIS-	HIS-	GOOD	FAIR			FE-	
ADLT	ADLT	24	34	44	54	64	OVER			IAN	ILND	NATV	OTHR	TI	IC	IC	GOOD	POOR	MALE	MALE	
Q46.3																					
YES	42	862	3	1	2	17	18	1	30	3	1	1	2	2	4	36	22	19	16	26	
	16%	16%	15%~	2%~	4%~	28%*	30%*	11%~	18%	19%~	8%~	~	33%~	29%~	14%~	12%~	18%	13%	30%*	16%	19%
NO	219	4591	17	42	43	43	43	8	139	13	12	3	2	5	12	29	161	149	45	82	113
	84%	84%	85%~	98%~	96%~	72%*	70%*	89%~	82%	81%~	92%~	100%~	67%~	71%~	86%~	88%~	82%	87%	70%*	84%	81%
VALID CASES	261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139
NUMBER OF RESPONDENTS	261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE			
Q47.1	FMCA TOT ADLT	8	281		1	2	5	7	1					1	7	2	6	4	4			
YES		3%	5%*	~	2%~	3%	8%	4%	6%~	~	~	~	~	3%~	4%	1%*	9%*	4%	3%			
	OHP TOT ADLT	253	5172	20	43	44	58	9	162	15	13	3	3	7	14	32	190	169	58	94	135	
NO		97%	95%*	100%~	100%~	98%~	97%	92%	100%~	96%	94%~	100%~	100%~	100%~	100%~	97%~	96%	99%*	91%*	96%	97%	
	VALID CASES	261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139
NUMBER OF RESPONDENTS		261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER			
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE			
Q47.2	FMCA TOT ADLT	18	25	35	45	55	65																
YES	8 3%	284 5%*	~	~	1 2%~	3 5%	2 3%	2 22%~	7 4%	1 ~	8%~	~	~	~	~	8 4%*	2 1%*	6 9%*	5 5%	3 2%			
NO	253 97%	5169 95%*	100%~	100%~	20 98%~	43 95%	44 97%	57 78%~	59 96%	7 100%~	162 92%~	16 100%	12 92%~	3 100%	3 100%	7 100%	14 100%	33 96%*	189 99%*	169 99%*	58 91%*	93 95%	136 98%
VALID CASES	261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139		
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%		

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q47.3	FMCA TOT ADLT	18	25	35	45	55	65														
YES	7 3%	1	1	1	3	1	6	1						1	6	2	5	4	3		
		~ 2%	~ 2%	~ 2%	5%	11%	4%	~ 8%	~	~	~	~	~ 3%	~ 3%	1%	8%*	4%	2%			
NO	254 97%	20 100%	42 98%	44 98%	59 98%	58 95%	8 89%	163 96%	16 100%	12 92%	3 100%	3 100%	7 100%	14 100%	32 97%	191 97%	169 99%	59 92%*	94 96%	136 98%	
VALID CASES	261 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%	
NUMBER OF RESPONDENTS	261 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%	

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER		
FMCA	OHP	18	25	35	45	55	65		BLCK	NATV	AMER					NOT	EX &					
TOT	TOT	TO	TO	TO	TO	TO	AND		OR	HAW/	IND/				HIS-	HIS-	VERY	GOOD	FAIR		FE-	
ADLT	ADLT	TO	TO	TO	TO	TO	OVER	WHTE	AFR-	AS-	PAC	ALSK	MUL-	TI	PAN-	PAN-	&	&	GOOD	POOR	MALE	MALE
Q47.4																						
YES	40	1002	1	2	7	15	11	4	31	3	3		1	1	1	3	35	25	15	17	23	
	15%	18%	5%~	5%~	16%~	25%*	18%	44%~	18%*	19%~	23%~		~	33%~	14%~	7%~	9%~	18%*	15%	23%	17%	17%
NO	221	4451	19	41	38	45	50	5	138	13	10	3	2	6	13	30	162	146	49	81	116	
	85%	82%	95%~	95%~	84%~	75%*	82%	56%~	82%*	81%~	77%~	100%~	67%~	86%~	93%~	91%~	82%*	85%	77%	83%	83%	
VALID CASES	261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139	
NUMBER OF RESPONDENTS	261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
FMCA	OHP	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q48																					
YES	76 32%	1692 34%	6 30%~	9 21%~	11 25%~	21 42%	4 34%	54 32%	6 38%~	2 17%~	1 33%~	1 33%~	1 17%~	7 50%~	14 44%~	56 29%~	45 26%*	30 48%*	30 31%	45 32%	
NO	160 68%	3335 66%	14 70%~	34 79%~	33 75%~	35 58%	4 66%	115 68%	10 63%~	10 83%~	2 67%~	2 67%~	5 83%~	7 50%~	18 56%~	140 71%~	125 74%*	32 52%*	66 69%	94 68%	
NOT ANSWERED	25	426			1		1			1			1		1		1	2		2	
VALID CASES	236	5027	20	43	44	60	61	8	169	16	12	3	3	6	14	32	196	170	62	96	139
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	8 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE		
Q49 YES	61 84%	1394 85%	4 67%	5 56%	9 90%	22 88%	17 89%	4 100%	45 85%	4 67%	1 50%	1 100%	1 100%	7 ~100%	8 67%	48 86%	36 82%	24 86%	24 83%	36 84%	
NO	12 16%	240 15%	2 33%	4 44%	1 10%	3 12%	2 11%	~	8 15%	2 33%	1 50%	~	~	1 ~100%	4 33%	8 14%	8 18%	4 14%	5 17%	7 16%	
NOT ANSWERED	3	62			1	2		1							2		1	2	1	2	
VALID CASES	73	1633	6	9	10	25	19	4	53	6	2	1	1	1	7	12	56	44	28	29	43
NUMBER OF RESPONDENTS	76	1695	6	9	11	25	21	4	54	6	2	1	1	1	7	14	56	45	30	30	45
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q48 = YES]

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
FMCA	OHP	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q50																					
YES	147 63%	3255 65%	8 40%~	14 33%~	28 62%~	40 68%	48 80%*100%~	9 64%	13 81%~	7 54%~	2 67%~	3 100%~	2 29%~	8 57%~	17 52%~	124 64%~	92 54%*	54 89%*	58 60%	88 64%	
NO	88 37%	1781 35%	12 60%~	28 67%~	17 38%~	19 32%	12 20%*	59 ~36%	3 19%~	6 46%~	1 33%~	5 ~71%~	6 43%~	16 48%~	70 36%~	78 46%*	7 11%*	38 40%	50 36%		
NOT ANSWERED	26	417	1	1	1	1	3								3	1	3	2	1		
VALID CASES	235	5036	20	42	45	59	60	9	166	16	13	3	3	7	14	33	194	170	61	96	138
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
Q51 YES	133 92%	2975 94%	7 88%	13 93%	26 93%	37 93%	41 91%	9 100%	97 93%	11 85%	7 100%	2 100%	2 67%	2 100%	7 88%	16 94%	112 92%	81 90%	51 96%	53 93%	79 92%
NO	11 8%	176 6%	1 13%	1 7%	2 7%	3 7%	4 9%	~	7 7%	2 15%	~	~	1 33%	1 ~	1 6%	10 8%	9 10%	2 4%	4 7%	7 8%	
NOT ANSWERED	3	127					3		3							2	2	1	1	2	
VALID CASES	144	3151	8	14	28	40	45	9	104	13	7	2	3	2	8	17	122	90	53	57	86
NUMBER OF RESPONDENTS	147 100%	3278 100%	8 100%	14 100%	28 100%	40 100%	48 100%	9 100%	107 100%	13 100%	7 100%	2 100%	3 100%	2 100%	8 100%	17 100%	124 100%	92 100%	54 100%	58 100%	88 100%

[ASKED IF Q50 = YES]

NQ52 WHAT IS YOUR AGE?

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
									WHTE	AMER	IAN	ILND	NATV	OTHR	TI	IC	IC				
NQ52 18 TO 24	21 8%	547 10%	20 100%	~	~	~	~	9 5%*	2 13%	2 15%	~	~	3 43%	3 21%	5 15%	15 8%	18 11%*	2 3%*	11 11%	9 6%	
25 TO 34	53 20%	870 16%	~	43 ~100%	~	~	~	34 20%	2 13%	1 8%	1 33%	~	1 14%	2 14%	5 15%	38 19%	32 19%	11 17%	18 18%	25 18%	
35 TO 44	51 20%	802 15%*	~	~	45 ~100%	~	~	30 18%	3 19%	3 23%	1 33%	~	1 14%	3 21%	5 15%	38 19%	35 20%	9 14%	17 17%	28 20%	
45 TO 54	62 24%	1153 21%	~	~	60 ~100%	~	~	46 27%	1 6%	1 8%	~	2 67%	1 14%	4 29%	10 30%	46 23%	41 24%	19 30%	24 24%	36 26%	
55 TO 64	64 25%	1412 26%	~	~	~	61 ~100%	~	44 26%	8 50%	5 38%	1 33%	1 33%	1 14%	~	6 18%	53 27%	41 24%	19 30%	24 24%	36 26%	
65 TO 74	5 2%	405 7%*	~	~	~	~	4 44%	3 2%	~	~	~	~	~	1 7%	1 3%	3 2%	2 1%	1 2%	2 2%	2 1%	
75 OR OLDER	5 2%	264 5%*	~	~	~	~	5 56%	3 2%	~	1 8%	~	~	~	1 7%	1 3%	4 2%	2 1%	3 5%	2 2%	3 2%	
VALID CASES	261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139
NUMBER OF RESPONDENTS	261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

NQ53 ARE YOU MALE OR FEMALE?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
FMCA	OHP	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
NQ53																					
MALE	108	2159	11	18	17	24	24	4	70	7	4	2	2	3	5	12	83	69	30	98	
	41%	40%	55%~	42%~	38%~	40%	39%	44%~	41%	44%~	31%~	67%~	67%~	43%~	36%~	36%~	42%	40%	47%	100%~	
FEMALE	153	3294	9	25	28	36	37	5	99	9	9	1	1	4	9	21	114	102	34	139	
	59%	60%	45%~	58%~	62%~	60%	61%	56%~	59%	56%~	69%~	33%~	33%~	57%~	64%~	64%~	58%	60%	53%	~100%~	
VALID CASES	261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	
NUMBER OF RESPONDENTS	261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE							RACE							ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILLND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q54																						
8TH GRADE OR LESS	9 4%	312 6%	~	~	2%~	5%	7%	11%~	2%*	6%~	~	33%~	33%~	~	7%~	12%~	2%~	3%	6%	4%	5%	
SOME HIGH SCHOOL BUT DID NOT GRADUATE	34 15%	755 15%	20%~	14%~	9%~	21%	11%	11%~	14%	13%~	27%~	~	~	29%~	14%~	21%~	13%~	13%	19%	14%	20%	
HIGH SCHOOL GRADUATE OR GED	55 24%	1615 32%*	40%~	24%~	23%~	24%	18%	22%~	20%	13%~	18%~	33%~	33%~	29%~	50%~	33%~	22%~	23%	25%	28%	28%	
SOME COLLEGE OR 2-YEAR DEGREE	93 40%	1732 34%	35%~	43%~	43%~	33%	44%	33%~	43%	50%~	27%~	~	33%~	14%~	29%~	18%~	44%~	39%	40%	34%	60%	
4-YEAR COLLEGE GRADUATE	21 9%	415 8%	~	12%~	11%~	7%	10%	11%~	11%*	6%~	~	33%~	~	~	~	6%~	9%~	11%*	3%*	12%	9%	
MORE THAN 4-YEAR COLLEGE DEGREE	22 9%	214 4%*	5%~	7%~	11%~	10%	10%	11%~	9%	13%~	27%~	~	~	29%~	~	9%~	10%~	11%	6%	7%	14%	
NOT ANSWERED	27	410		1	1	2			1	2						3	4	1	1	3		
VALID CASES	234	5043	20	42	44	58	61	9	168	16	11	3	3	7	14	33	194	167	63	97	136	
NUMBER OF RESPONDENTS	261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q55 ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	FE- MALE	MALE		
Q55																					
YES HISPANIC OR LATINO	33 14%	610 12%	5 25%	5 12%	5 12%	10 18%	6 10%	2 22%	15 9%*	~	~	~	1 33%	5 71%	3 25%	33 100%	~	23 14%	10 17%	12 13%	21 16%
NO NOT HISPANIC OR LATINO	197 86%	4367 88%	15 75%	38 88%	38 88%	46 82%	53 90%	7 78%	151 91%*	15 100%	13 100%	3 100%	2 67%	2 29%	9 75%	197 100%	~	143 86%	50 83%	83 87%	113 84%
NOT ANSWERED	31	476			2	4	2		3	1				2				5	4	3	5
VALID CASES	230	4977	20	43	43	56	59	9	166	15	13	3	3	7	12	33	197	166	60	95	134
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

Q56.1 WHAT IS YOUR RACE? RESPONSE: WHITE

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q56.1	FMCA																					
	OHP																					
	TOT	180	4262	12	36	33	48	44	7	169					11	18	158	128	48	74	105	
YES	ADLT	69%	78%*	60%~	84%~	73%~	80%*	72%	78%~	100%~	~	~	~	~	79%~	55%~	80%*	75%*	75%	76%	76%*	
	TOT	81	1191	8	7	12	12	17	2		16	13	3	3	7	3	15	39	43	16	24	34
NO	ADLT	31%	22%*	40%~	16%~	27%~	20%*	28%	22%~	~	100%~	100%~	100%~	100%~	21%~	45%~	20%*	25%*	25%	24%	24%*	
	TOT	261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139
VALID CASES	ADLT	261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139
NUMBER OF RESPONDENTS	ADLT	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/ALSK	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD &	FAIR & POOR	FE-MALE	MALE			
Q56.2	FMCA TOT ADLT																				
YES	21 8%	133 2%*	3 15%~	3 7%~	4 9%~	2 3%*	8 13%	1 11%~	16 ~100%~	~	~	~	5 ~ 36%~	20 ~ 10%*	15 9%	6 9%	8 8%	13 9%			
NO	240 92%	5320 98%*	17 85%~	40 93%~	41 91%~	58 97%*	53 87%	8 89%~	169 100%~	13 ~100%~	3 100%~	3 100%~	7 100%~	9 64%~	33 100%~	177 90%*	156 91%	58 91%	90 92%	126 91%	
VALID CASES	261	5453	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%
NUMBER OF RESPONDENTS	261 100%	5453 100%	20 100%	43 100%	45 100%	60 100%	61 100%	9 100%	169 100%	16 100%	13 100%	3 100%	3 100%	7 100%	14 100%	33 100%	197 100%	171 100%	64 100%	98 100%	139 100%

Q56.3 WHAT IS YOUR RACE? RESPONSE: ASIAN

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	HIS- IC	NOT VERY GOOD & FAIR & POOR	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE			
Q56.3	FMCA TOT ADLT	18	25	35	45	55	65															
YES	OHP TOT ADLT	2	2	3	1	5	1			13			1			14	11	3	4	10		
		5%	4%	10%~	5%~	7%~	2%*	8%	11%~	~	~100%~	~	~	~	7%~	~	7%*	6%	5%	4%	7%	
NO	OHP TOT ADLT	18	41	42	59	56	8	169	16	3	3	7	13	33	183	160	61	94	129			
		95%	96%	90%~	95%~	93%~	98%*	92%	89%~	100%~	100%~	~	100%~	100%~	93%~	100%~	93%*	94%	95%	96%	93%	
VALID CASES	OHP TOT ADLT	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139		
NUMBER OF RESPONDENTS		261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q56.4																					
YES	4 2%	41 0.7%	2 ~	1 5%	1 2%	1 ~	~	~	3 ~100%	~	~	1 7%	~	4 2%	4 2%	2 ~	2 1%				
NO	257 98%	5412 99%	20 100%	41 95%	44 98%	60 100%	60 98%	9 100%	169 100%	16 100%	13 100%	3 ~100%	7 100%	13 93%	33 100%	193 98%*	167 98%*	64 100%	96 98%	137 99%	
VALID CASES	261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139
NUMBER OF RESPONDENTS	261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE			
Q56.5	FMCA TOT ADLT	18	25	35	45	55	65															
YES	OHP TOT ADLT	2	1	4	1	2				3		7		3	6	4	6	5	5			
		4%	6%	10%~	~ 2%	7%	2%	22%~	~	~	~	~100%~	~ 50%~	9%~	3%	2%	9%	5%	4%			
NO		251	5139	18	43	44	56	60	7	169	16	13	3	7	7	30	191	167	58	93	134	
		96%	94%	90%~	100%~	98%~	93%	98%	78%~	100%~	100%~	100%~	100%~	~100%~	50%~	91%~	97%	98%	91%	95%	96%	
VALID CASES		261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139
NUMBER OF RESPONDENTS		261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q56.6 WHAT IS YOUR RACE? RESPONSE: OTHER

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE			
Q56.6	FMCA TOT ADLT	18	25	35	45	55	65															
YES	OHP TOT ADLT	3	1	3	4	1						7	5	6	4	8	4	6	6			
		5%	5%	15%~	2%~	7%~	7%	2%	~	~	~	~	~	~100%~	36%~	18%~	2%*	5%	6%	6%	4%	
NO		17	42	42	56	60	9	169	16	13	3	3	9	27	193	163	60	92	133			
		95%	95%	85%~	98%~	93%~	93%	98%	100%	100%~	100%~	100%~	100%~	100%~	~ 64%~	82%~	98%*	95%	94%	94%	96%	
VALID CASES		20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139		
NUMBER OF RESPONDENTS		261	5453	20	43	45	60	61	9	169	16	13	3	3	7	14	33	197	171	64	98	139
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q57 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
FMCA	OHP	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q57																					
YES	18 10%	652 16%*	2 17%~	6 19%~	3 ~	4 7%~	3 33%~	13 9%~	2 20%~	2 20%~	~	~	1 ~	2 10%~	16 10%~	9 7%~	9 20%~	13 17%*	5 5%*		
NO	166 90%	3488 84%*	10 83%~	26 81%~	29 100%~	40 93%~	55 93%~	6 67%~	129 91%~	8 80%~	8 80%~	3 100%~	2 100%~	4 100%~	5 83%~	19 90%~	144 90%~	126 93%~	36 80%~	62 83%*	103 95%*
NOT ANSWERED	3	78				1			1								1		1		
VALID CASES	184	4141	12	32	29	43	59	9	142	10	10	3	2	4	6	21	160	135	45	75	108
NUMBER OF RESPONDENTS	187	4219	12	32	29	44	59	9	142	11	10	3	2	4	6	21	160	135	46	75	109
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q58.1																			
YES	9	253	1	1	2	3	2	7	1			1	2	7	3	6	6	3	
	50%	47%	50%	17%	~ 67%	75%	67%	54%	50%	~	~	~	~100%	~100%	44%	33%	67%	46%	60%
NO	9	289	1	5	1	1	1	6	1	2			9	6	3	7	2		
	50%	53%	50%	83%	~ 33%	25%	33%	46%	50%	~100%	~	~	~	~ 56%	67%	33%	54%	40%	
VALID CASES	18	542	2	6	3	4	3	13	2	2		1	2	16	9	9	13	5	
NUMBER OF RESPONDENTS	18	542	2	6	3	4	3	13	2	2		1	2	16	9	9	13	5	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q58.2	YES	7 39%	188 35%~	1 50%~	1 17%~	2 ~ 67%~	1 25%~	2 67%~	6 46%~	~	~	~	~	1 ~100%~	2 ~100%~	5 31%~	3 33%~	4 44%~	4 31%~	3 60%~
	NO	11 61%	354 65%~	1 50%~	5 83%~	1 ~ 33%~	3 75%~	1 33%~	7 54%~	2 100%~	2 100%~	~	~	~	11 ~ 69%~	6 67%~	5 56%~	9 69%~	2 40%~	
	VALID CASES	18	542	2	6	3	4	3	13	2	2		1	2	16	9	9	13	5	
	NUMBER OF RESPONDENTS	18 100%	542 100%	2 100%	6 100%	3 100%	4 100%	3 100%	13 100%	2 100%	2 100%		1 100%	2 100%	16 100%	9 100%	9 100%	13 100%	5 100%	

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

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q58.3 YES	5 28%	197 36%	1 50%	2 33%	1 ~ 33%	1 25%	5 ~ 38%	~	~	~	~	~	1 50%	4 25%	3 33%	2 22%	4 31%	1 20%	
NO	13 72%	345 64%	1 50%	4 67%	2 ~ 67%	3 75%	3 100%	8 62%	2 100%	2 100%	~	~	1 ~ 100%	1 50%	12 75%	6 67%	7 78%	9 69%	4 80%
VALID CASES	18	542	2	6	3	4	3	13	2	2			1	2	16	9	9	13	5
NUMBER OF RESPONDENTS	18 100%	542 100%	2 100%	6 100%	3 100%	4 100%	3 100%	13 100%	2 100%	2 100%			1 100%	2 100%	16 100%	9 100%	9 100%	13 100%	5 100%

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

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q58.4 YES	4 22%	81 15%	1 ~	1 17%	1 ~	1 33%	1 25%	1 33%	2 15%	1 50%	1 50%	~	~	~	~	4 ~	3 25%	1 33%	3 11%	1 23%	1 20%
NO	14 78%	461 85%	2 100%	5 83%	2 ~	3 67%	2 75%	2 67%	11 85%	1 50%	1 50%	~	~	1 ~	100%	2 100%	12 75%	6 67%	8 89%	10 77%	4 80%
VALID CASES	18	542	2	6	3	4	3	13	2	2				1	2	16	9	9	13	5	
NUMBER OF RESPONDENTS	18	542	2	6	3	4	3	13	2	2				1	2	16	9	9	13	5	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE	
Q58.5 YES	3 17%	44 8%		3 ~ 50%				1 8%	1 50%	1 50%					3 ~ 19%	2 22%	1 11%	2 15%	1 20%	
NO	15 83%	498 92%	2 ~ 100%	3 ~ 50%	3 ~ 100%	4 ~ 100%	3 ~ 100%	12 92%	1 50%	1 50%			1 ~ 100%	2 ~ 100%	13 81%	7 78%	8 89%	11 85%	4 80%	
VALID CASES	18	542	2	6	3	4	3	13	2	2			1	2	16	9	9	13	5	
NUMBER OF RESPONDENTS	18 100%	542 100%	2 100%	6 100%	3 100%	4 100%	3 100%	13 100%	2 100%	2 100%			1 100%	2 100%	16 100%	9 100%	9 100%	13 100%	5 100%	

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

NQ13 RATING OF ALL HEALTH CARE

	FMCA TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
NQ13 0-6	45 27%	759 20%*	3 27%~	9 37%~	8 24%~	13 28%~	9 23%~	2 22%~	34 28%~	1 10%~	1 12%~	~	~	1 20%~	6 60%~	5 25%~	38 28%~	26 23%	18 37%~	17 28%	26 25%
7-8	46 27%	1267 34%*	2 18%~	5 21%~	13 39%~	13 28%~	12 30%~	~	34 28%~	2 20%~	2 25%~	~	1 100%~	3 60%~	2 20%~	5 25%~	38 28%~	34 30%	11 22%~	17 28%	28 27%
9-10	77 46%	1714 46%	6 55%~	10 42%~	12 36%~	20 43%~	19 48%~	7 78%~	53 44%~	7 70%~	5 63%~	2 100%~	~	1 20%~	2 20%~	10 50%~	59 44%~	52 46%	20 41%~	26 43%	48 47%
VALID CASES	168	3741	11	24	33	46	40	9	121	10	8	2	1	5	10	20	135	112	49	60	102
NUMBER OF RESPONDENTS	168 100%	3741 100%	11 100%	24 100%	33 100%	46 100%	40 100%	9 100%	121 100%	10 100%	8 100%	2 100%	1 100%	5 100%	10 100%	20 100%	135 100%	112 100%	49 100%	60 100%	102 100%
MEAN	2.19	2.26	2.27	2.04	2.12	2.15	2.25	2.56	2.16	2.60	2.50	3.00	2.00	2.00	1.60	2.25	2.16	2.23	2.04	2.15	2.22
p stat_(*=Sig @ p<=.05)		.243	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.360	~	.640	.627

[ASKED IF Q7 >= 1 TIME]

NQ23 RATING OF PERSONAL DOCTOR

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
NQ23 0-6	29 18%	617 16%	2 18%	6 27%	6 20%	8 17%	6 14%	1 14%	25 21%	1 10%	~	~	~	3 30%	3 14%	26 20%	19 17%	10 21%	6 11%	23 21%*	
7-8	39 24%	999 25%	1 9%	6 27%	8 27%	12 25%	10 23%	~	24 21%	3 30%	1 14%	~	2 67%	2 40%	3 30%	3 14%	33 25%	26 23%	11 23%	12 22%	25 23%
9-10	97 59%	2342 59%	8 73%	10 45%	16 53%	28 58%	27 63%	6 86%	68 58%	6 60%	6 86%	2 100%	1 33%	3 60%	4 40%	15 71%	73 55%	68 60%	27 56%	36 67%	59 55%
VALID CASES	165	3959	11	22	30	48	43	7	117	10	7	2	3	5	10	21	132	113	48	54	107
NUMBER OF RESPONDENTS	165 100%	3959 100%	11 100%	22 100%	30 100%	48 100%	43 100%	7 100%	117 100%	10 100%	7 100%	2 100%	3 100%	5 100%	10 100%	21 100%	132 100%	113 100%	48 100%	54 100%	107 100%
MEAN	2.41	2.44	2.55	2.18	2.33	2.42	2.49	2.71	2.37	2.50	2.86	3.00	2.33	2.60	2.10	2.57	2.36	2.43	2.35	2.56	2.34
p stat_(*=Sig @ p<=.05)		.665	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.599	~	.081	.072

[ASKED IF Q15 = YES]

NQ27 RATING OF SPECIALIST SEEN MOST OFTEN

	FMCA TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
NQ27 0-6	17 18%	257 14%	1 20%	2 18%	3 20%	6 19%	4 15%	12 18%	1 17%	~	~	~	1 33%	2 29%	2 13%	14 19%	10 16%	6 19%	8 22%	7 12%	
7-8	20 21%	429 23%	1 20%	3 27%	3 20%	6 19%	7 26%	15 23%	2 33%	2 25%	~	~	~	1 14%	1 6%	17 23%	16 25%	4 13%	7 19%	13 23%	
9-10	58 61%	1164 63%	3 60%	6 55%	9 60%	19 61%	16 59%	5 100%	38 58%	3 50%	6 75%	1 100%	1 100%	2 67%	4 57%	13 81%	42 58%	37 59%	21 68%	22 59%	36 64%
VALID CASES NUMBER OF RESPONDENTS	95 100%	1850 100%	5 100%	11 100%	15 100%	31 100%	27 100%	5 100%	65 100%	6 100%	8 100%	1 100%	1 100%	3 100%	7 100%	16 100%	73 100%	63 100%	31 100%	37 100%	56 100%
MEAN	2.43	2.49	2.40	2.36	2.40	2.42	2.44	3.00	2.40	2.33	2.75	3.00	3.00	2.33	2.29	2.69	2.38	2.43	2.48	2.38	2.52
p stat_(*=Sig @ p<=.05)		.431	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

NQ35 RATING OF HEALTH PLAN

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
NQ35 0-6	63 28%	1116 23%	6 32%~	12 30%~	11 27%~	18 32%	14 25%	2 25%~	50 32%*	1 7%~	3 27%~	1 ~	1 33%~	1 14%~	5 36%~	5 16%~	56 31%~	39 24%	24 41%*	27 30%	35 27%
7-8	61 27%	1551 32%	4 21%~	14 35%~	14 34%~	10 18%	16 29%	~	38 25%	5 33%~	4 36%~	1 ~	1 33%~	1 14%~	4 29%	9 28%~	49 27%~	47 29%	11 19%	24 27%	34 26%
9-10	102 45%	2193 45%	9 47%~	14 35%~	16 39%~	28 50%	26 46%	6 75%~	67 43%	9 60%~	4 36%~	2 100%~	1 33%~	5 71%~	5 36%~	18 56%~	75 42%~	74 46%	24 41%	39 43%	60 47%
VALID CASES	226	4860	19	40	41	56	56	8	155	15	11	2	3	7	14	32	180	160	59	90	129
NUMBER OF RESPONDENTS	226 100%	4860 100%	19 100%	40 100%	41 100%	56 100%	56 100%	8 100%	155 100%	15 100%	11 100%	2 100%	3 100%	7 100%	14 100%	32 100%	180 100%	160 100%	59 100%	90 100%	129 100%
MEAN	2.17	2.22	2.16	2.05	2.12	2.18	2.21	2.50	2.11	2.53	2.09	3.00	2.00	2.57	2.00	2.41	2.11	2.22	2.00	2.13	2.19
p stat_(*=Sig @ p<=.05)		.318	~	~	~.951	.665	~	.082	~	~	~	~	~	~	~	~	~	.215	.084	.570	.661

GETTING NEEDED CARE

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NPRBSEE4 NQ25	2.21	2.25	2.00	2.18	1.87	2.35	2.25	2.60	2.17	2.83	1.88	3.00	3.00	2.00	2.29	2.63	2.12	2.24	2.19	2.19	2.26
p stat_(*=Sig @ p<=.05)	.574		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCARNES4 NQ14	2.28	2.30	2.45	2.12	2.09	2.23	2.45	2.44	2.26	2.91	2.25	3.00	2.00	2.00	1.70	2.33	2.25	2.30	2.20	2.34	2.23
p stat_(*=Sig @ p<=.05)	.704		~	~	~	~	~	~	~	~	~	~	~	~	~	~	.702	.387	.480	.344	
COMPOSITE	2.24	2.28	2.23	2.15	1.98	2.29	2.35	2.52	2.21	2.87	2.06	3.00	2.50	2.00	1.99	2.48	2.19	2.27	2.19	2.26	2.25
p stat_(*=Sig @ p<=.05)	.764		~	~	~	~	~	~	.663	~	~	~	~	~	~	~	~	.756	.759	.889	.978

GETTING CARE QUICKLY

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE		
NCARSN4 NQ4	2.43	2.38	2.50	2.31	2.37	2.36	2.45	3.00	2.34	2.71	2.00	3.00	3.00	2.50	2.57	2.64	2.39	2.47	2.32	2.36	2.45
p stat_(*=Sig @ p<=.05)		.460	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NAPGET4 NQ6	2.31	2.32	2.20	2.13	2.23	2.44	2.28	2.63	2.37	2.45	2.22	2.00	2.00	2.00	1.86	2.29	2.31	2.28	2.35	2.41	2.24
p stat_(*=Sig @ p<=.05)		.796	~	~	~	~	~	~	.165	~	~	~	~	~	~	~	.622	~	.260	.227	
COMPOSITE	2.37	2.35	2.35	2.22	2.30	2.40	2.37	2.81	2.36	2.58	2.11	2.50	2.50	2.25	2.21	2.46	2.35	2.37	2.34	2.38	2.35
p stat_(*=Sig @ p<=.05)		.862	~	~	~	~	~	~	.866	~	~	~	~	~	~	~	.970	~	.938	.796	

HOW WELL DOCTORS COMMUNICATE

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHER	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE
NDREXPL4 NQ17	2.69	2.62	2.56	2.65	2.54	2.74	2.69	3.00	2.64	2.90	2.71	3.00	2.50	2.75	2.78	2.70	2.65	2.65	2.74	2.73	2.67
p stat_(*=Sig @ p<=.05)		.217	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.621
NDRLSTN4 NQ18	2.59	2.59	2.89	2.29	2.33	2.63	2.72	2.71	2.61	2.60	2.71	3.00	2.50	2.75	2.11	2.53	2.57	2.58	2.58	2.68	2.54
p stat_(*=Sig @ p<=.05)		.976	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.232 .288
NDRESPU4 NQ19	2.67	2.65	2.89	2.47	2.50	2.69	2.75	2.71	2.66	2.50	2.86	3.00	2.50	2.75	2.56	2.65	2.66	2.70	2.56	2.76	2.61
p stat_(*=Sig @ p<=.05)		.680	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.165 .143
NDRTMEN4 NQ20	2.53	2.49	2.89	2.35	2.38	2.56	2.56	2.57	2.54	2.50	2.71	3.00	1.50	2.75	2.33	2.40	2.54	2.52	2.51	2.61	2.48
p stat_(*=Sig @ p<=.05)		.428	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.217
COMPOSITE	2.62	2.59	2.81	2.44	2.44	2.66	2.68	2.75	2.61	2.63	2.75	3.00	2.25	2.75	2.44	2.57	2.61	2.61	2.60	2.70	2.57
p stat_(*=Sig @ p<=.05)		.844	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.709 .713

CUSTOMER SERVICE

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NPBCLCS4 NQ31	2.17	2.23	2.44	2.09	1.89	2.30	2.23	2.33	2.28	2.40	2.00	3.00	2.50	2.33	1.33	2.06	2.25	2.23	2.04	2.08	2.26
p stat_(*=Sig @ p<=.05)	.497		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ32	2.63	2.63	2.78	2.64	2.33	2.70	2.68	2.67	2.61	2.90	2.17	3.00	2.00	3.00	2.67	2.76	2.59	2.66	2.54	2.50	2.70
p stat_(*=Sig @ p<=.05)	.971		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.40	2.43	2.61	2.36	2.11	2.50	2.45	2.50	2.45	2.65	2.08	3.00	2.25	2.67	2.00	2.41	2.42	2.45	2.29	2.29	2.48
p stat_(*=Sig @ p<=.05)	.898		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	FMCA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHR	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NNRXWHY NQ10	2.87	2.84	3.00	3.00	2.65	2.92	2.85	3.00	2.86	3.00	3.00	3.00	3.00	3.00	2.71	3.00	2.84	2.84	2.93	2.95	2.82
p stat_(*=Sig @ p<=.05)	.497		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NNRXWYNT NQ11	2.50	2.45	2.00	2.50	2.63	2.69	2.31	2.50	2.44	1.80	3.00	3.00	3.00	3.00	2.71	2.67	2.46	2.46	2.53	2.37	2.56
p stat_(*=Sig @ p<=.05)	.569		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NRXBST NQ12	2.44	2.50	2.67	2.50	2.41	2.20	2.46	2.75	2.43	2.60	3.00	3.00	1.00	2.00	2.33	2.38	2.44	2.41	2.45	2.42	2.45
p stat_(*=Sig @ p<=.05)	.470		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.60	2.60	2.56	2.67	2.56	2.60	2.54	2.75	2.57	2.47	3.00	3.00	2.33	2.67	2.59	2.68	2.58	2.57	2.64	2.58	2.61
p stat_(*=Sig @ p<=.05)	.967		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTH R	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE	
PRBSEE4 Q25	72%	78%	60%	73%	53%	77%	79%	80%	71%	100%	50%	100%	100%	67%	71%	94%	68%	75%	69%	70%	75%
CARNES4 Q14	76%	82%	82%	68%	69%	80%	81%	78%	75%	100%	87%	100%	100%	60%	50%	81%	75%	77%	73%	76%	76%
AVERAGE	74.03	80.02	70.91	70.36	61.04	78.48	79.76	78.89	73.00	100.0	68.75	100.0	100.0	63.33	60.71	87.35	71.47	76.04	70.65	73.04	75.72

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE							ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	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	83%	83%	83%	85%	79%	80%	82%	100%	78%	100%	67%	100%	100%	100%	86%	100%	80%	84%	77%	78%	85%
APGET4 Q6	79%	80%	80%	70%	81%	83%	74%	88%	81%	82%	78%	50%	50%	75%	57%	81%	77%	78%	78%	78%	78%
AVERAGE	80.57	81.23	81.67	77.09	79.86	81.67	78.09	93.75	79.47	90.91	72.22	75.00	75.00	87.50	71.43	90.48	78.56	81.19	77.84	77.78	81.53

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
DREXPL4 Q17	94%	92%	89%	88%	92%	98%	94%	100%	91%	100%	100%	100%	100%	100%	100%	100%	93%	93%	95%	94%	95%
DRLSTN4 Q18	89%	90%	100%	76%	79%	93%	94%	86%	88%	90%	100%	100%	100%	100%	67%	89%	88%	88%	91%	92%	88%
DRESPU4 Q19	92%	91%	100%	76%	88%	95%	97%	86%	91%	80%	100%	100%	100%	100%	89%	95%	92%	93%	88%	94%	90%
DRTMEN4 Q20	90%	88%	100%	82%	83%	93%	89%	100%	89%	90%	100%	100%	50%	100%	89%	90%	89%	89%	91%	90%	89%
AVERAGE	91.3	90.4	97.2	80.9	85.4	94.6	93.7	92.9	90.0	90.0	100	100	87.5	100	86.1	93.6	90.2	90.9	91.3	92.4	90.7

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

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTH R	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE- MALE	
PBCLCS4 Q31	71%	76%	78%	64%	50%	78%	86%	67%	77%	90%	67%	100%	100%	67%	17%	59%	77%	75%	62%	64%	77%
CSRESP Q32	90%	92%	89%	91%	78%	96%	95%	83%	91%	100%	67%	100%	100%	100%	83%	94%	90%	92%	85%	86%	92%
AVERAGE	80.43	84.03	83.33	77.27	63.89	86.96	90.91	75.00	84.21	95.00	66.67	100.0	100.0	83.33	50.00	76.47	83.33	83.59	73.08	75.00	84.91

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	FMCA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE			
NRXWHY Q10	94%	92%	100%	100%	82%	96%	92%	100%	93%	100%	100%	100%	100%	100%	86%	100%	92%	92%	92%	97%	97%	91%
NRXWYNT Q11	75%	73%	50%	75%	81%	85%	65%	75%	72%	40%	100%	100%	100%	100%	86%	83%	73%	73%	77%	68%	78%	78%
RXBST Q12	72%	75%	83%	75%	71%	60%	73%	88%	71%	80%	100%	100%	0%	50%	67%	69%	72%	70%	72%	71%	73%	73%
AVERAGE	80.2	79.8	77.8	83.3	78.1	80.1	76.9	87.5	78.7	73.3	100	100	66.7	83.3	79.4	84.2	79.0	78.4	81.9	78.9	80.6	80.6

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

		AGE					RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q1	FMCA TOT CHLD																		
YES	307 100%	5304 100%	54 ~100%	88 ~100%	85 ~100%	80 ~100%	161 ~100%	7 ~100%	11 ~100%	6 ~100%	2 ~100%	21 ~100%	31 ~100%	117 ~100%	164 ~100%	272 ~100%	12 ~100%	245 ~100%	62 ~100%
NOT ANSWERED	5	59			2	3	2		1				2	3	4	1	4	1	
VALID CASES	307	5304	54	88	85	80	161	7	11	6	2	21	31	117	164	272	12	245	62
NUMBER OF RESPONDENTS	312 100%	5363 100%	54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q3 YES	84 28%	1687 32%	~ 24%	22% 46%*	20% 26%	18% 22%	45% 28%	2 33%~	1 8%~		2 ~100%~	6 29%~	10 32%~	37 32%	39 24%	71 26%~	6 46%~	56 23%*	28 45%*
NO	219 72%	3541 68%	~ 28%	64% 54%*	63% 74%	64% 78%	115 72%	4 67%~	11 92%~	5 ~100%~		15 ~ 71%~	21 68%~	79 68%	125 76%	199 74%~	7 54%~	185 77%*	34 55%*
NOT ANSWERED	9	135	2	2	4	1	3	1		1				3	3	6		8	1
VALID CASES	303	5228	52	86	83	82	160	6	12	5	2	21	31	116	164	270	13	241	62
NUMBER OF RESPONDENTS	312 100%	5363 100%	54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q4 NEVER	1 1%	18 1%	~	~	1 5%	~	~	1 50%	~	~	~	~	~	1 3%	1 1%	~	~	1 4%	~		
SOMETIMES	6 8%	148 9%	~	2 9%	1 5%	1 5%	2 12%	2 4%	~	~	~	~	2 40%	1 11%	3 9%	3 8%	6 9%	4 8%	2 7%		
USUALLY	13 16%	323 20%	~	3 14%	4 19%	3 16%	3 18%	7 16%	~	~	~	~	~	2 22%	9 26%	4 11%	2 50%	9 17%	4 15%		
ALWAYS	59 75%	1151 70%	~	17 77%	15 71%	15 79%	12 71%	36 80%	1 50%	1 100%	~	~	1 100%	3 60%	6 67%	22 65%	30 79%	51 74%	2 50%	39 75%	20 74%
#ALWAYS + USUALLY (NET)	72 91%	1475 90%	~	20 91%	19 90%	18 95%	15 88%	43 96%	1 50%	1 100%	~	~	1 100%	3 60%	8 89%	31 91%	34 89%	62 90%	4 100%	48 92%	24 89%
TOP BOX SCORE	59 75%	1151 70%	~	17 77%	15 71%	15 79%	12 71%	36 80%	1 50%	1 100%	~	~	1 100%	3 60%	6 67%	22 65%	30 79%	51 74%	2 50%	39 75%	20 74%
NOT ANSWERED	5	142		2	1	1	1						1	1	3	1	2	2	4	1	
VALID CASES	79	1641		22	21	19	17	45	2	1			1	5	9	34	38	69	4	52	27
NUMBER OF RESPONDENTS	84	1783		24	22	20	18	45	2	1			2	6	10	37	39	71	6	56	28
	100%	100%		100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q3 = YES]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q5 YES	207 69%	3345 65%	~	49 96%*	57 69%	55 66%	46 55%*	114 71%	4 67%~	8 67%~	3 60%~	2 100%~	15 71%~	23 74%~	81 70%	113 69%	187 69%~	9 69%~	157 66%*	50 81%*
Q5 NO	93 31%	1824 35%	~	2 4%*	26 31%	28 34%	37 45%*	47 29%	2 33%~	4 33%~	2 40%~		6 ~	8 29%~	35 30%	51 31%	83 31%~	4 31%~	81 34%*	12 19%*
NOT ANSWERED	12	194		3	5	4		2	1		1				3	3	6		11	1
VALID CASES	300	5169		51	83	83	83	161	6	12	5	2	21	31	116	164	270	13	238	62
NUMBER OF RESPONDENTS	312 100%	5363 100%		54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q6 NEVER	2 1%	35 1%	~	~	1 2%	~	1 2%	1 0.9%	~	~	~	~	~	2 3%	~	2 1%	~	2 1%	~	
SOMETIMES	23 12%	451 14%	~	2 4%	6 12%	8 15%	7 16%	6 6%*	1 25%	2 25%	2 67%	1 50%	3 21%	1 5%	9 12%	12 11%	20 11%	1 13%	19 13%	4 9%
USUALLY	45 23%	814 26%	~	15 31%	12 24%	9 17%	9 20%	26 24%	1 25%	3 38%	1 33%	~	4 29%	5 24%	19 24%	24 23%	41 23%	3 38%	32 21%	13 28%
ALWAYS	126 64%	1829 58%	~	31 65%	32 63%	36 68%	27 61%	74 69%	2 50%	3 38%	~	1 50%	7 50%	15 71%	48 62%	69 66%	114 64%	4 50%	97 65%	29 63%
#ALWAYS + USUALLY (NET)	171 87%	2643 84%	~	46 96%	44 86%	45 85%	36 82%	100 93%*	3 75%	6 75%	1 33%	1 50%	11 79%	20 95%	67 86%	93 89%	155 88%	7 88%	129 86%	42 91%
TOP BOX SCORE	126 64%	1829 58%	~	31 65%	32 63%	36 68%	27 61%	74 69%	2 50%	3 38%	~	1 50%	7 50%	15 71%	48 62%	69 66%	114 64%	4 50%	97 65%	29 63%
NOT ANSWERED	11	215		1	6	2	2	7					1	2	3	8	10	1	7	4
VALID CASES	196	3129		48	51	53	44	107	4	8	3	2	14	21	78	105	177	8	150	46
NUMBER OF RESPONDENTS	207	3344		49	57	55	46	114	4	8	3	2	15	23	81	113	187	9	157	50
	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q5 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q7 NONE	90 31%	1553 31%	~	4 9%	29 35%	26 32%	31 37%	43 28%	1 17%	5 42%	3 60%	~	4 19%	8 28%	33 29%	49 31%	81 31%	2 18%	80 34%*	10 17%*
1 TIME	93 32%	1446 28%	~	14 30%	25 30%	26 32%	28 34%	46 29%	1 17%	5 42%	1 20%	2 100%	10 48%	7 24%	36 32%	49 31%	83 31%	4 36%	79 34%	14 23%
2	53 18%	1007 20%	~	9 19%	16 20%	15 19%	13 16%	32 21%	3 50%	1 8%	1 20%	~	3 14%	5 17%	19 17%	32 20%	47 18%	4 36%	41 18%	12 20%
3	29 10%	534 11%	~	10 21%	2 2%*	9 11%	8 10%	19 12%	~	~	~	~	2 10%	3 10%	17 15%*	11 7%	27 10%	~	19 8%	10 17%
4	10 3%	260 5%	~	4 9%	3 4%	2 2%	1 1%	5 3%	1 17%	~	~	~	2 10%	2 7%	4 4%	6 4%	10 4%	~	6 3%	4 7%
5 TO 9	12 4%	196 4%	~	5 11%	3 4%	3 4%	1 1%*	8 5%	~	~	~	~	~	2 7%	4 4%	7 4%	10 4%	1 9%	6 3%	6 10%
10 OR MORE TIMES	6 2%	87 2%	~	1 2%	4 5%	~	1 1%	3 2%	~	1 8%	~	~	~	2 7%	~	6 4%	6 2%	~	2 0.9%	4 7%
NOT ANSWERED	19	280		7	6	6		7	1		1		2	6	7	12	2	16	3	
VALID CASES	293	5083		47	82	81	83	156	6	12	5	2	21	29	113	160	264	11	233	60
NUMBER OF RESPONDENTS	312	5363		54	88	87	83	163	7	12	6	2	21	31	119	167	276	13	249	63
	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q8 #YES	138 69%	2386 68%	30 ~ 71%~	35 66%	36 69%	37 71%	79 71%	3 60%~	4 57%~	1 100%~	1 50%~	10 59%~	16 76%~	58 72%	72 66%	124 69%~	7 78%~	100 67%~	38 78%~
NO	61 31%	1113 32%	12 ~ 29%~	18 34%	16 31%	15 29%	33 29%	2 40%~	3 43%~	1 ~ 50%~	7 41%~	5 24%~	22 28%	37 34%	57 31%~	2 22%~	50 33%~	11 22%~	
NOT ANSWERED	4	69	1		3		1		1					2	2		3	1	
VALID CASES	199	3499	42	53	52	52	112	5	7	1	2	17	21	80	109	181	9	150	49
NUMBER OF RESPONDENTS	203 100%	3568 100%	43 100%	53 100%	55 100%	52 100%	113 100%	5 100%	7 100%	2 100%	2 100%	17 100%	21 100%	80 100%	111 100%	183 100%	9 100%	153 100%	50 100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q9 NEVER	5 3%	78 2%	~	~	2 4%	~	3 6%	1 0.9%	~	2 29%	~	~	2 12%	~	3 4%	2 2%	4 2%	1 11%	4 3%	1 2%
SOMETIMES	19 10%	344 10%	~	2 5%	7 13%	5 10%	5 10%	8 7%	2 40%	1 14%	~	1 50%	2 12%	2 10%	7 9%	11 10%	16 9%	2 22%	11 7%	8 16%
USUALLY	32 16%	768 22%*	~	11 27%	4 8%*	9 18%	8 15%	15 14%	2 40%	1 14%	1 100%	~	3 18%	~	18 23%	13 12%	29 16%	2 22%	26 18%	6 12%
ALWAYS	141 72%	2292 66%	~	28 68%	40 75%	37 73%	36 69%	87 78%*	1 20%	3 43%	~	1 50%	10 59%	18 90%	51 65%	82 76%	130 73%	4 44%	106 72%	35 70%
#ALWAYS + USUALLY (NET)	173 88%	3059 88%	~	39 95%	44 83%	46 90%	44 85%	102 92%	3 60%	4 57%	1 100%	1 50%	13 76%	18 90%	69 87%	95 88%	159 89%	6 67%	132 90%	41 82%
TOP BOX SCORE	141 72%	2292 66%	~	28 68%	40 75%	37 73%	36 69%	87 78%*	1 20%	3 43%	~	1 50%	10 59%	18 90%	51 65%	82 76%	130 73%	4 44%	106 72%	35 70%
NOT ANSWERED	6	87		2		4		2			1		1	1	3		4		6	
VALID CASES	197	3481		41	53	51	52	111	5	7	1	2	17	20	79	108	179	9	147	50
NUMBER OF RESPONDENTS	203 100%	3568 100%		43 100%	53 100%	55 100%	52 100%	113 100%	5 100%	7 100%	2 100%	2 100%	17 100%	21 100%	80 100%	111 100%	183 100%	9 100%	153 100%	50 100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q10 YES	53 27%	1122 32%	~ 27%	~ 25%	31%	25%	33 30%	~ 14%	~	~ 25%	~ 33%	4 7	21 27%	28 26%	48 27%	2 22%	30 20%*	23 46%*	
Q10 NO	144 73%	2348 68%	~ 73%	~ 75%	69%	75%	78 70%	5 100%	6 86%	1 100%	2 100%	12 75%	14 67%	57 73%	81 74%	131 73%	7 78%	117 80%*	27 54%*
NOT ANSWERED	6	97	2	1	3		2		1		1		2	2	4		6		
VALID CASES	197	3471	41	52	52	52	111	5	7	1	2	16	21	78	109	179	9	147	50
NUMBER OF RESPONDENTS	203 100%	3568 100%	43 100%	53 100%	55 100%	52 100%	113 100%	5 100%	7 100%	2 100%	2 100%	17 100%	21 100%	80 100%	111 100%	183 100%	9 100%	153 100%	50 100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q11 #YES	49 98%	947 94%~	10 ~100%	12 ~100%	15 94%~	12 100%	32 97%~		1 ~100%				2 ~100%	7 100%	17 94%~	28 100%	44 98%~	2 100%	27 100%	22 96%~
NO	1 2%	63 6%~	~	~	1 6%~	~	1 3%~		~	~	~	~	~	1 6%~	~	1 2%~	~	~	1 4%~	
NOT ANSWERED	28	450	10	8	9	1	9	1		2		3	2	11	9	19	2	25	3	
VALID CASES	50	1010	10	12	16	12	33		1			2	7	18	28	45	2	27	23	
NUMBER OF RESPONDENTS	78 100%	1460 100%	20 100%	20 100%	25 100%	13 100%	42 100%	1 100%	1	2		5 100%	9 100%	29 100%	37 100%	64 100%	4 100%	52 100%	26 100%	

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC	
Q12 #YES	36 72%	718 70%	7 ~ 70%	9 ~ 75%	10 63%	10 83%	27 82%		1 ~100%				1 ~ 50%	4 57%	12 67%	22 79%	34 76%	1 50%	20 74%	16 70%
NO	14 28%	305 30%	3 ~ 30%	3 25%	6 38%	2 17%	6 18%						1 ~ 50%	3 43%	6 33%	6 21%	11 24%	1 50%	7 26%	7 30%
NOT ANSWERED	3	87	1	1		1							2		3	3		3		
VALID CASES	50	1023	10	12	16	12	33		1				2	7	18	28	45	2	27	23
NUMBER OF RESPONDENTS	53 100%	1110 100%	11 100%	13 100%	16 100%	13 100%	33 100%		1 100%				4 100%	7 100%	21 100%	28 100%	48 100%	2 100%	30 100%	23 100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q13 #YES	41 77%	830 78%	7 ~ 64%~	10 77%~	15 94%~	9 69%~	28 85%~		1 ~100%~				2 ~ 50%~	4 57%~	15 71%~	23 82%~	37 77%~	1 50%~	22 73%~	19 83%~
NO	12 23%	241 22%	4 ~ 36%~	3 23%~	1 6%~	4 31%~	5 15%~						2 ~ 50%~	3 43%~	6 29%~	5 18%~	11 23%~	1 50%~	8 27%~	4 17%~
NOT ANSWERED		39																		
VALID CASES	53	1071	11	13	16	13	33		1				4	7	21	28	48	2	30	23
NUMBER OF RESPONDENTS	53	1110	11	13	16	13	33		1				4	7	21	28	48	2	30	23
	100%	100%	100%	100%	100%	100%	100%		100%				100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
Q14 WORST HEALTH CARE POSSIBLE	3	0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
01	7	0.2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
02	19	0.5%	~	~	~	1	~	~	1	~	~	~	~	1	~	1	~	1	~	
03	25	0.5%	~	~	~	~	~	~	~	~	~	~	~	1	~	1	~	1	~	
04	47	0.5%	~	~	~	~	1	0.9%	~	~	~	~	~	1	~	1	~	1	~	
05	121	3%	~	1	1	1	2	0.9%	2	1	~	~	~	1	4	4	1	2	3	
06	116	4%	~	1	1	2	4	5	~	~	~	1	1	5	3	7	1	6	2	
07	300	5%	~	4	4	~	1	3	1	1	~	1	1	3	5	7	1	7	2	
08	813	22%	~	5	9	15	14	20	2	1	~	7	5	21	20	36	5	28	15	
09	704	20%	~	11	14	10	5	26	~	1	1	3	4	16	24	40	~	31	9	
BEST HEALTH CARE POSSIBLE	1323	45%	~	19	24	23	23	54	2	~	1	5	11	33	49	83	~	72	17	
#8-10 (NET)	2841	87%	~	35	47	48	42	100	2	4	1	1	15	20	70	93	159	5	131	41

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
9-10 (NET)	129 65%	2027 58%*	30 ~ 73%~	38 72%	33 63%	28 55%	80 73%*	3 ~ 43%~	1 100%~	1 50%~	8 47%~	15 71%~	49 62%	73 68%	123 69%~	~	103 70%~	26 53%~	
NOT ANSWERED	6	98	2		3	1	3		1				1	3	4		5	1	
VALID CASES	197	3470	41	53	52	51	110	5	7	1	2	17	21	79	108	179	9	148	49
NUMBER OF RESPONDENTS	203 100%	3568 100%	43 100%	53 100%	55 100%	52 100%	113 100%	5 100%	7 100%	2 100%	2 100%	17 100%	21 100%	80 100%	111 100%	183 100%	9 100%	153 100%	50 100%
MEAN	8.83	8.58	8.98	9.00	8.83	8.53	9.04	6.60	7.29	9.00	8.50	8.59	9.14	8.84	8.78	8.91	6.89	8.94	8.49
p stat_(*=Sig @ p<=.05)		.020*	~	~.261	1.00	.145	.030*	~	~	~	~	~	~.948	.594	~	~	~	~	~

[ASKED IF Q7 >= 1]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q15 NEVER	3 2%	64 2%	~	2 5%~	1 2%	~	~	2 2%	1 20%~	~	~	~	~	~	3 3%	3 2%~	~	~	3 6%~	
SOMETIMES	12 6%	353 10%*	~	~	3 6%	3 6%	6 12%	4 4%	~	2 29%~	~	~	1 6%~	1 5%~	5 6%	6 6%	9 5%~	2 22%~	8 5%	4 8%
USUALLY	55 28%	1112 32%	~	12 29%~	12 23%	15 29%	16 32%	25 23%	2 40%~	1 14%~	1 100%~	1 50%~	8 47%~	4 19%~	34 43%*	18 17%*	47 26%~	4 44%~	42 29%	13 26%
ALWAYS	126 64%	1922 56%*	~	27 66%~	37 70%	34 65%	28 56%	78 72%*	2 40%~	4 57%~	~	1 50%~	8 47%~	16 76%~	40 51%*	80 75%*	119 67%~	3 33%~	96 66%	30 60%
#ALWAYS + USUALLY (NET)	181 92%	3034 88%*	~	39 95%~	49 92%	49 94%	44 88%	103 94%	4 80%~	5 71%~	1 100%~	2 100%~	16 94%~	20 95%~	74 94%	98 92%	166 93%~	7 78%~	138 95%	43 86%
TOP BOX SCORE	126 64%	1922 56%*	~	27 66%~	37 70%	34 65%	28 56%	78 72%*	2 40%~	4 57%~	~	1 50%~	8 47%~	16 76%~	40 51%*	80 75%*	119 67%~	3 33%~	96 66%	30 60%
NOT ANSWERED	7	117	~	2	~	3	2	4	~	~	1	~	~	1	4	5	~	7	~	
VALID CASES	196	3451	~	41	53	52	50	109	5	7	1	2	17	21	79	107	178	9	146	50
NUMBER OF RESPONDENTS	203 100%	3568 100%	~	43 100%	53 100%	55 100%	52 100%	113 100%	5 100%	7 100%	2 100%	2 100%	17 100%	21 100%	80 100%	111 100%	183 100%	9 100%	153 100%	50 100%

[ASKED IF Q7 >= 1 TIME]

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

		AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q16	FMCA TOT CHLD																		
YES	204 69%	3643 71%	8 ~ 16%*	68 82%*	68 83%*	60 73%	112 70%	3 60%~	8 73%~	5 83%~	1 50%~	11 52%~	25 81%~	73 63%	120 74%*	188 70%~	7 54%~	154 66%*	50 81%*
NO	93 31%	1481 29%	42 ~ 84%*	15 18%*	14 17%*	22 27%	49 30%	2 40%~	3 27%~	1 17%~	1 50%~	10 48%~	6 19%~	43 37%	43 26%*	81 30%~	6 46%~	81 34%*	12 19%*
NOT ANSWERED	15	239	4	5	5	1	2	2	1					3	4	7		14	1
VALID CASES	297	5124	50	83	82	82	161	5	11	6	2	21	31	116	163	269	13	235	62
NUMBER OF RESPONDENTS	312 100%	5363 100%	54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q17 YES	24 12%	403 11%	~ 38%	3 20%*	13 6%*	4 7%	4 14%	15 14%	1 33%~	2 ~ 67%~	~	~ 19%~	4 13%	9 12%	14 12%	23 13%~	7 ~	13 9%~	11 23%~	
NO	168 88%	3143 89%	~ 63%	5 80%*	51 94%*	60 93%	52 86%	93 86%	2 67%~	8 100%~	1 33%~	1 100%~	10 81%~	17 87%	60 88%	98 87%~	153 87%~	7 100%~	132 91%~	36 77%~
NOT ANSWERED	12	226		4	4	4	4			2		1	4	4	8	12		9	3	
VALID CASES	192	3545		8	64	64	56	108	3	8	3	1	10	21	69	112	176	7	145	47
NUMBER OF RESPONDENTS	204 100%	3771 100%		8 100%	68 100%	68 100%	60 100%	112 100%	3 100%	8 100%	5 100%	1 100%	11 100%	25 100%	73 100%	120 100%	188 100%	7 100%	154 100%	50 100%

[ASKED IF Q16 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q18 #YES	23	349		3	13	3	4	15	1		2		4	9	14	23		12	11
	100%	94%~		~100%	~100%	~100%	~100%	~100%	~100%	~100%	~	~	~100%	~100%	~100%	~100%		~100%	~100%
NO		22		~	~	~	~	~	~	~	~	~	~	~	~	~		~	~
NO		6%~																	
NOT ANSWERED	1	7				1												1	
VALID CASES	23	371		3	13	3	4	15	1		2		4	9	14	23		12	11
NUMBER OF RESPONDENTS	24	378		3	13	4	4	15	1		2		4	9	14	23		13	11
	100%	100%		100%	100%	100%	100%	100%	100%		100%		100%	100%	100%	100%		100%	100%

[ASKED IF Q16 = YES AND Q17 = YES]

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

	FMCA TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q19 YES	4 1%	175 3%*	~	1 2%	~	2 2%	1 1%	2 1%	~	~	~	~	~	~	~	2 1%	2 0.7%~	2 ~	2 0.8%	2 3%
NO	294 99%	4948 97%*	~	50 98%	84 100%	79 98%	81 99%	159 99%	6 100%	11 100%	6 100%	2 100%	21 100%	31 100%	117 100%	162 99%	269 99%	13 100%	234 99%	60 97%
NOT ANSWERED	14	240	3	4	6	1	2	1	1						2	3	5		13	1
VALID CASES	298	5123	51	84	81	82	161	6	11	6	2	21	31	117	164	271	13	236	62	
NUMBER OF RESPONDENTS	312 100%	5363 100%	54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%	

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

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q20 NEVER		23 12%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	2 50%	35 18%	~	~	~	1 50% 1 100%	~	~	~	~	~	~	~	~	~	~	~	2 100%	~
USUALLY	1 25%	49 25%	~	~	~	1 50%	~	~	~	~	~	~	~	1 50%	1 50%	~	~	1 50%	~
ALWAYS	1 25%	87 45%	~	1 100%	~	~	1 50%	~	~	~	~	~	~	1 50%	1 50%	~	~	1 50%	~
#ALWAYS + USUALLY (NET)	2 50%	135 70%	~	1 100%	~	1 50%	2 100%	~	~	~	~	~	~	2 100%	2 100%	~	~	2 100%	~
TOP BOX SCORE	1 25%	87 45%	~	1 100%	~	~	1 50%	~	~	~	~	~	~	1 50%	1 50%	~	~	1 50%	~
NOT ANSWERED		3																	
VALID CASES	4	193		1		2	1	2						2	2			2	2
NUMBER OF RESPONDENTS	4	196		1		2	1	2						2	2			2	2
	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?

	FMCA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<1	1-3	4-7	8-12	13 AND OVER	WHTA	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	NO CCC	CCC
Q21 #YES	4 100%	157 84%~	1 ~100%~	2 ~100%~	1 ~100%~	2 ~100%~	~	~	~	~	~	~	2 ~100%~	2 ~100%~	2 ~100%~	2 ~100%~		
NO		31 16%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NOT ANSWERED		8																
VALID CASES	4	188	1	2	1	2							2	2	2	2		
NUMBER OF RESPONDENTS	4 100%	196 100%	1 100%	2 100%	1 100%	2 100%							2 100%	2 100%	2 100%	2 100%		

[ASKED IF Q19 = YES]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-	AS- IAN	NATV ILND	AMER PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q22 YES	16 5%	446 9%*	~	3 6%	6 7%	4 5%	3 4%	10 6%	1 ~	9%~	~	2 ~	2 10%~	6%~	7 6%	8 5%	16 6%~	12 ~	6 3%*	10 17%*
NO	280 95%	4656 91%*	~	48 94%	78 93%	76 95%	78 96%	149 94%	5 100%~	10 91%~	6 100%~	2 100%~	19 90%~	29 94%~	111 94%	153 95%	254 94%~	12 100%~	231 97%*	49 83%*
NOT ANSWERED	16	261		3	4	7	2	4	2	1				1	6	6	1	12	4	
VALID CASES	296	5102		51	84	80	81	159	5	11	6	2	21	31	118	161	270	12	237	59
NUMBER OF RESPONDENTS	312 100%	5363 100%		54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q23 NEVER	2 13%	62 15%	~	1 33%	1 20%	~	~	2 22%	~	~	~	~	~	1 14%	1 14%	2 13%	~	~	2 22%	
SOMETIMES	3 20%	96 24%	~	~	1 20%	1 25%	1 33%	~	~	~	~	~	1 50%	2 100%	2 29%	1 14%	3 20%	~	1 17%	2 22%
USUALLY	6 40%	112 28%	~	2 67%	2 40%	1 25%	1 33%	5 56%	~	~	~	~	1 50%	~	3 43%	3 43%	6 40%	~	2 33%	4 44%
ALWAYS	4 27%	135 33%	~	~	1 20%	2 50%	1 33%	2 22%	~	1 100%	~	~	~	~	1 14%	2 29%	4 27%	~	3 50%	1 11%
#ALWAYS + USUALLY (NET)	10 67%	247 61%	~	2 67%	3 60%	3 75%	2 67%	7 78%	~	1 100%	~	~	1 50%	~	4 57%	5 71%	10 67%	~	5 83%	5 56%
TOP BOX SCORE	4 27%	135 33%	~	~	1 20%	2 50%	1 33%	2 22%	~	1 100%	~	~	~	~	1 14%	2 29%	4 27%	~	3 50%	1 11%
NOT ANSWERED	1	14			1			1								1	1			1
VALID CASES	15	405		3	5	4	3	9		1			2	2	7	7	15		6	9
NUMBER OF RESPONDENTS	16	419		3	6	4	3	10		1			2	2	7	8	16		6	10
	100%	100%		100%	100%	100%	100%	100%		100%			100%	100%	100%	100%	100%		100%	100%

[ASKED IF Q22 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q24 #YES	7	260		3	3		1	6				1		3	4	7	2	5
	44%	64%	~100%	~50%	~33%	~60%	~	~	~	~50%	~	~	~43%	~50%	~44%	~33%	~50%	
NO	9	143		3	4	2	4		1		1	2	4	4	9	4	5	
	56%	36%	~	~50%	~100%	~67%	~40%	~100%	~	~50%	~100%	~57%	~50%	~56%	~67%	~50%		
NOT ANSWERED		16																
VALID CASES	16	403		3	6	4	3	10		1		2	2	7	8	16	6	10
NUMBER OF RESPONDENTS	16	419		3	6	4	3	10		1		2	2	7	8	16	6	10
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q22 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q25 YES	34 11%	666 13%	~	3 6%	8 10%	13 16%	10 12%	22 14%	~	~	1 17%	~	3 14%	5 16%	11 9%	22 14%	31 11%	2 15%	10 4%*	24 39%*
NO	263 89%	4441 87%	~	48 94%	76 90%	67 84%	72 88%	138 86%	5 100%	11 100%	5 83%	2 100%	18 86%	26 84%	107 91%	140 86%	239 89%	11 85%	226 96%*	37 61%*
NOT ANSWERED	15	256		3	4	7	1	3	2	1					1	5	6		13	2
VALID CASES	297	5107		51	84	80	82	160	5	11	6	2	21	31	118	162	270	13	236	61
NUMBER OF RESPONDENTS	312 100%	5363 100%		54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q26 NEVER	5 15%	92 14%	~	2 67%	1 13%	1 8%	1 10%	4 18%	~	~	1 100%	~	~	~	1 9%	4 18%	4 13%	1 50%	3 33%	2 8%
SOMETIMES	3 9%	116 18%	~	~	1 13%	1 8%	1 10%	~	~	~	~	~	~	3 60%	1 9%	2 9%	3 10%	~	~	3 13%
USUALLY	9 27%	171 27%	~	~	3 38%	3 25%	3 30%	7 32%	~	~	~	~	1 33%	~	4 36%	5 23%	9 29%	~	2 22%	7 29%
ALWAYS	16 48%	258 41%	~	1 33%	3 38%	7 58%	5 50%	11 50%	~	~	~	~	2 67%	2 40%	5 45%	11 50%	15 48%	1 50%	4 44%	12 50%
#ALWAYS + USUALLY (NET)	25 76%	429 67%	~	1 33%	6 75%	10 83%	8 80%	18 82%	~	~	~	~	3 100%	2 40%	9 82%	16 73%	24 77%	1 50%	6 67%	19 79%
TOP BOX SCORE	16 48%	258 41%	~	1 33%	3 38%	7 58%	5 50%	11 50%	~	~	~	~	2 67%	2 40%	5 45%	11 50%	15 48%	1 50%	4 44%	12 50%
NOT ANSWERED	1	17				1														1
VALID CASES	33	636		3	8	12	10	22			1		3	5	11	22	31	2	9	24
NUMBER OF RESPONDENTS	34	653		3	8	13	10	22			1		3	5	11	22	31	2	10	24
	100%	100%		100%	100%	100%	100%	100%			100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q27 #YES	12 38%	311 49%~	~	~	4 57%~	3 25%~	5 50%~	7 33%~	~	~	~	1 33%~	3 60%~	4 36%~	8 38%~	11 37%~	1 50%~	3 38%~	9 38%~
NO	20 63%	326 51%~	~100%~	3 43%~	3 75%~	9 50%~	5 67%~	14 67%~	~	~100%~	1	2 67%~	2 40%~	7 64%~	13 62%~	19 63%~	1 50%~	5 63%~	15 63%~
NOT ANSWERED	2	17			1	1	1							1	1			2	
VALID CASES	32	636		3	7	12	10	21			1	3	5	11	21	30	2	8	24
NUMBER OF RESPONDENTS	34	653		3	8	13	10	22			1	3	5	11	22	31	2	10	24
	100%	100%		100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

	FMCA TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALS	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR GOOD POOR	NO CCC	CCC	
Q28 YES	48 16%	978 19%	10 ~ 20%	11 13%	11 14%	16 19%	32 20%	1 ~ 8%	~	3 ~ 14%	6 19%	14 12%	33 20%*	44 16%	3 23%	24 10%*	24 39%*		
NO	246 84%	4103 81%	40 ~ 80%	71 87%	68 86%	67 81%	127 80%	5 100%	11 ~ 92%	6 100%	2 ~ 100%	18 86%	25 81%	104 88%	129 80%*	226 84%	10 77%	209 90%*	37 61%*
NOT ANSWERED	18	281	4	6	8		4	2						1	5	6		16	2
VALID CASES	294	5082	50	82	79	83	159	5	12	6	2	21	31	118	162	270	13	233	61
NUMBER OF RESPONDENTS	312 100%	5363 100%	54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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?

	FMCA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC
Q29 #YES	28 62%	594 60%~	7 ~ 70%~	7 70%~	5 50%~	9 60%~	18 58%~	1 ~100%~			3 ~100%~	4 80%~	8 57%~	20 65%~	27 63%~	1 50%~	13 62%~	15 63%~
NO	17 38%	403 40%~	3 ~ 30%~	3 30%~	5 50%~	6 40%~	13 42%~	~	~	~	~	1 ~ 20%~	6 43%~	11 35%~	16 37%~	1 50%~	8 38%~	9 38%~
NOT ANSWERED	3	32		1	1	1	1					1		2	1	1	3	
VALID CASES	45	998	10	10	10	15	31	1		3	5	14	31	43	2	21	24	
NUMBER OF RESPONDENTS	48 100%	1030 100%	10 100%	11 100%	11 100%	16 100%	32 100%	1 100%		3 100%	6 100%	14 100%	33 100%	44 100%	3 100%	24 100%	24 100%	

[ASKED IF Q28 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q30 YES	255 87%	4410 88%	~ 94%*	89%	85%	82%	145 90%	6 100%	8 67%	2 40%	2 100%	19 90%	31 100%	102 87%	143 88%	238 88%	9 69%	196 85%*	59 95%*
NO	38 13%	622 12%	~ 6%*	11%	15%	18%	16 10%	~ 33%*	4 60%	3 ~ 10%*	2	~ 10%*	15 13%	20 12%	32 12%	4 31%	35 15%*	3 5%*	
NOT ANSWERED	19	331	3	5	7	4	2	1	1				2	4	6		18	1	
VALID CASES	293	5032	51	83	80	79	161	6	12	5	2	21	31	117	163	270	13	231	62
NUMBER OF RESPONDENTS	312 100%	5363 100%	54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV ILND	AMER ALSK	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q31 NONE	53 22%	1163 27%*	~	2%~	17 25%	17 27%	18 28%	31 22%	1 17%~	2 25%~	~	~	1 6%~	6 20%~	22 23%	27 20%	49 22%~	1 12%~	47 25%*	6 11%*
1 TIME	91 37%	1470 34%	~	32%~	23 33%	21 33%	32 50%*	46 33%	1 17%~	4 50%~	1 50%~	1 50%~	9 56%~	11 37%~	36 37%	52 38%	84 37%~	5 62%~	73 39%	18 33%
2	53 22%	817 19%	~	30%~	19 28%	14 22%	6 9%*	32 23%	3 50%~	2 25%~	1 50%~	1 50%~	3 19%~	7 23%~	19 20%	33 24%	52 23%~	1 12%~	40 21%	13 24%
3	27 11%	450 11%	~	26%~	5 7%	7 11%	3 5%*	19 14%	1 17%~	~	~	~	2 12%~	3 10%~	12 13%	14 10%	25 11%~	~	18 10%	9 16%
4	9 4%	180 4%	~	4%~	2 3%	2 2%	4 6%	4 3%	~	~	~	~	1 6%~	2 7%~	4 4%	5 4%	9 4%~	~	6 3%	3 5%
5 TO 9	9 4%	146 3%	~	6%~	3 3%	2 5%	1 2%	7 5%	~	~	~	~	~	~	3 3%	5 4%	7 3%~	1 12%~	3 2%*	6 11%*
10 OR MORE TIMES	1 0.4%	40 0.9%	~	~	1 1%	~	~	~	~	~	~	~	1 3%~	~	1 ~0.7%	1 ~0.4%	~	1 ~0.5%	~	~
NOT ANSWERED	12	203			1 5	5 5	1 1	6 6					3 3	1 1	6 6	6 6	11 11	1 1	8 8	4 4
VALID CASES	243	4266			47 69	63 64		139 139	6 6	8 8	2 2	2 2	16 16	30 30	96 96	137 137	227 227	8 8	188 188	55 55
NUMBER OF RESPONDENTS	255	4469			48 74	68 65		145 145	6 6	8 8	2 2	2 2	19 19	31 31	102 102	143 143	238 238	9 9	196 196	59 59
	100%	100%			100% 100%	100% 100%		100% 100%	100% 100%	100% 100%	100% 100%	100% 100%	100% 100%	100% 100%	100% 100%	100% 100%	100% 100%	100% 100%	100% 100%	100% 100%

[ASKED IF Q30 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q31A ALWAYS	4 2%	82 3%	~	1 2%	1 2%	2 4%	3 ~	1 3%	~	~	~	~	~	3 4%	1 0.9%	4 2%	~	3 2%	1 2%	
USUALLY	1 0.5%	49 2%*	~	~	1 2%	~	1 ~0.9%	~	~	~	~	~	~	1 1%	~	1 ~0.6%	~	1 ~0.7%	~	
SOMETIMES	12 6%	229 8%	~	2 4%	5 10%	4 9%	1 2%	5 5%	~	~	~	2 13%	1 4%	8 11%	4 4%	12 7%	~	7 5%	5 10%	
NEVER	172 91%	2671 88%	~	43 93%	44 86%	40 87%	45 98%	98 92%	4 80%	6 100%	2 100%	2 100%	13 87%	23 96%	62 84%*	104 95%*	160 90%	7 100%	129 92%	43 88%
#NEVER + SOMETIMES (NET)	184 97%	2900 96%	~	45 98%	49 96%	44 96%	46 100%	103 96%	4 80%	6 100%	2 100%	2 100%	15 100%	24 100%	70 95%	108 99%	172 97%	7 100%	136 97%	48 98%
TOP BOX SCORE	172 91%	2671 88%	~	43 93%	44 86%	40 87%	45 98%	98 92%	4 80%	6 100%	2 100%	2 100%	13 87%	23 96%	62 84%*	104 95%*	160 90%	7 100%	129 92%	43 88%
NOT ANSWERED	1	30			1		1							1		1		1		
VALID CASES	189	3030		46	51	46	46	107	5	6	2	2	15	24	74	109	177	7	140	49
NUMBER OF RESPONDENTS	190	3060		46	52	46	46	108	5	6	2	2	15	24	74	110	178	7	141	49
	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC			
Q32 NEVER	6 3%	80 3%	~	~	1 2%	3 7%	2 4%	~	~	1 17%	~	~	~	1 4%	3 4%	3 3%	6 3%	~	6 4%	~	
SOMETIMES	9 5%	145 5%	~	2 4%	4 8%	2 4%	1 2%	4 4%	~	~	~	~	1 7%	2 8%	7 9%*	2 2%*	8 5%	1 14%	5 4%	4 8%	
USUALLY	28 15%	478 16%	~	4 9%	7 14%	9 20%	8 17%	14 13%	1 20%	~	1 50%	~	5 33%	2 8%	17 23%*	10 9%*	24 14%	3 43%	22 16%	6 12%	
ALWAYS	146 77%	2312 77%	~	40 87%	39 76%	32 70%	35 76%	89 83%*	4 80%	5 83%	1 50%	2 100%	2 100%	9 60%	19 79%	47 64%*	94 86%*	139 79%	3 43%	107 76%	39 80%
#ALWAYS + USUALLY (NET)	174 92%	2790 93%	~	44 96%	46 90%	41 89%	43 93%	103 96%*	5 100%	5 83%	2 100%	2 100%	14 93%	21 88%	64 86%*	104 95%	163 92%	6 86%	129 92%	45 92%	
TOP BOX SCORE	146 77%	2312 77%	~	40 87%	39 76%	32 70%	35 76%	89 83%*	4 80%	5 83%	1 50%	2 100%	2 100%	9 60%	19 79%	47 64%*	94 86%*	139 79%	3 43%	107 76%	39 80%
NOT ANSWERED	1	44			1			1							1				1		
VALID CASES	189	3016		46	51	46	46	107	5	6	2	2	15	24	74	109	177	7	140	49	
NUMBER OF RESPONDENTS	190	3060		46	52	46	46	108	5	6	2	2	15	24	74	110	178	7	141	49	
	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC	
Q33 NEVER	5 3%	40 1%	~	2%~	~	2%~	3 7%~	1 0.9%	~	2 33%~	~	~	~	1 4%~	~	5 5%*	5 3%~	~	4 3%~	1 2%~	
SOMETIMES	5 3%	145 5%	~	4%~	2	4%~	1 2%~	2 ~	~	~	1 50%~	~	1 4%~	3 4%	2 2%	4 2%~	1 14%~	4 3%~	1 2%~		
USUALLY	30 16%	494 16%	~	15%~	7	10%~	8 18%~	5 11%~	16 15%	2 40%~	1 50%~	1 50%~	2 13%~	5 21%~	16 22%	14 13%	27 15%~	2 29%~	22 16%~	8 16%~	
ALWAYS	148 79%	2341 77%	~	78%~	36	39%~	35 78%~	38 83%~	88 82%	3 60%~	4 67%~	1 50%~	13 ~	17 71%~	55 74%	88 81%	140 80%~	4 57%~	109 78%~	39 80%~	
#ALWAYS + USUALLY (NET)	178 95%	2835 94%	~	93%~	43	49%~	43 96%~	43 93%~	104 97%	5 100%~	4 67%~	2 100%~	1 50%~	15 100%~	22 92%~	71 96%	102 94%	167 95%~	6 86%~	131 94%~	47 96%~
TOP BOX SCORE	148 79%	2341 77%	~	78%~	36	39%~	35 78%~	38 83%~	88 82%	3 60%~	4 67%~	1 50%~	13 ~	17 71%~	55 74%	88 81%	140 80%~	4 57%~	109 78%~	39 80%~	
NOT ANSWERED	2	39			1	1		1							1	2		2			
VALID CASES	188	3021			46	51	45	46	107	5	6	2	2	15	24	74	109	176	7	139	49
NUMBER OF RESPONDENTS	190 100%	3060 100%			46 100%	52 100%	46 100%	46 100%	108 100%	5 100%	6 100%	2 100%	2 100%	15 100%	24 100%	74 100%	110 100%	178 100%	7 100%	141 100%	49 100%

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

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q34 NEVER	1 0.5%	28 0.9%	~	~	~	~	1 2%	~	~	~	~	~	~	~	1 ~0.9%	1 0.6%	~	~	1 ~0.7%	~
SOMETIMES	6 3%	114 4%	~	2 4%	2 4%	2 4%	~	2 2%	~	1 17%	~	1 50%	~	1 4%	2 3%	4 4%	5 3%	1 14%	4 3%	2 4%
USUALLY	25 13%	407 14%	~	6 13%	5 10%	9 20%	5 11%	14 13%	2 40%	1 17%	1 50%	~	3 21%	2 8%	12 16%	12 11%	25 14%	~	15 11%	10 20%
ALWAYS	156 83%	2460 82%	~	38 83%	43 86%	35 76%	40 87%	91 85%	3 60%	4 67%	1 50%	1 50%	11 79%	21 88%	59 81%	92 84%	145 82%	6 86%	119 86%	37 76%
#ALWAYS + USUALLY (NET)	181 96%	2867 95%	~	44 96%	48 96%	44 96%	45 98%	105 98%	5 100%	5 83%	2 100%	1 50%	14 100%	23 96%	71 97%	104 95%	170 97%	6 86%	134 96%	47 96%
TOP BOX SCORE	156 83%	2460 82%	~	38 83%	43 86%	35 76%	40 87%	91 85%	3 60%	4 67%	1 50%	1 50%	11 79%	21 88%	59 81%	92 84%	145 82%	6 86%	119 86%	37 76%
NOT ANSWERED	2	51			2			1					1		1	1	2		2	
VALID CASES	188	3009		46	50	46	46	107	5	6	2	2	14	24	73	109	176	7	139	49
NUMBER OF RESPONDENTS	190	3060		46	52	46	46	108	5	6	2	2	15	24	74	110	178	7	141	49
	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q35 YES	122 65%	2050 69%	3 ~ 7%	36 71%	40 87%	43 93%	68 64%	4 80%	4 67%	1 ~ 50%	7 47%	15 63%	50 68%	68 62%	111 63%	7 100%	88 63%	34 69%	
NO	67 35%	942 31%	43 ~ 93%	15 29%	6 13%	3 7%	39 36%	1 20%	2 33%	2 100%	1 50%	8 53%	9 38%	24 32%	41 38%	66 37%	52 ~ 37%	15 31%	
NOT ANSWERED	1	67			1		1							1	1		1		
VALID CASES	189	2993	46	51	46	46	107	5	6	2	2	15	24	74	109	177	7	140	49
NUMBER OF RESPONDENTS	190 100%	3060 100%	46 100%	52 100%	46 100%	46 100%	108 100%	5 100%	6 100%	2 100%	2 100%	15 100%	24 100%	74 100%	110 100%	178 100%	7 100%	141 100%	49 100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q36 NEVER	1 0.8%	19 1%	~	~	~	1 3%	~	~	~	~	~	~	1 2%	~	1 0.9%	~	1 1%	~		
SOMETIMES	10 8%	119 6%	~	~	5 14%	4 10%	1 2%	5 7%	~	~	~	~	1 7%	8 17%	2 3%	9 8%	1 17%	7 8%	3 9%	
USUALLY	21 18%	466 23%	~	1 50%	8 23%	7 18%	5 12%	9 13%	1 50%	1 25%	~	~	3 43%	3 21%	10 21%	11 17%	19 18%	2 33%	14 16%	7 21%
ALWAYS	86 73%	1408 70%	~	1 50%	22 63%	27 69%	36 86%	54 79%	1 50%	3 75%	~	1 100%	4 57%	10 71%	29 60%	53 80%	79 73%	3 50%	63 74%	23 70%
#ALWAYS + USUALLY (NET)	107 91%	1874 93%	~	2 100%	30 86%	34 87%	41 98%	63 93%	2 100%	4 100%	~	1 100%	7 100%	13 93%	39 81%	64 97%	98 91%	5 83%	77 91%	30 91%
TOP BOX SCORE	86 73%	1408 70%	~	1 50%	22 63%	27 69%	36 86%	54 79%	1 50%	3 75%	~	1 100%	4 57%	10 71%	29 60%	53 80%	79 73%	3 50%	63 74%	23 70%
NOT ANSWERED	4	36	1	1	1	1	2					1	2	2	3	1	3	1		
VALID CASES	118	2013	2	35	39	42	68	2	4	1	7	14	48	66	108	6	85	33		
NUMBER OF RESPONDENTS	122	2049	3	36	40	43	68	4	4	1	7	15	50	68	111	7	88	34		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		

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

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q37 NEVER	2 1%	89 3%*	~	~	~	~	4%~	~	~	~	~	~	~	~	1% 1	0.9% 1	2 1%~	~	2 1%~	~
SOMETIMES	27 14%	318 11%	~	15%~	14%~	22%~	7%~	9%* 10	40%~ 2	17%~ 1	50%~ 1	50%~ 1	13%~ 2	8%~ 2	23%* 17	7%* 8	14%~ 25	~	14%~ 20	14%~ 7
USUALLY	45 24%	708 24%	~	20%~	24%~	33%~	20%~	18%* 19	20%~ 1	33%~ 2	~	50%~ 1	47%~ 7	29%~ 7	36%* 27	17%* 18	23%~ 41	57%~ 4	24%~ 34	22%~ 11
ALWAYS	114 61%	1876 63%	~	65%~	62%~	46%~	70%~	73%* 78	40%~ 2	50%~ 3	50%~ 1	~	40%~ 6	63%~ 15	39%* 29	75%* 82	62%~ 109	43%~ 3	60%~ 83	63%~ 31
#ALWAYS + USUALLY (NET)	159 85%	2584 86%	~	85%~	86%~	78%~	89%~	91%* 97	60%~ 3	83%~ 5	50%~ 1	50%~ 1	87%~ 13	92%~ 22	76%* 56	92%* 100	85%~ 150	100%~ 7	84%~ 117	86%~ 42
TOP BOX SCORE	114 61%	1876 63%	~	65%~	62%~	46%~	70%~	73%* 78	40%~ 2	50%~ 3	50%~ 1	~	40%~ 6	63%~ 15	39%* 29	75%* 82	62%~ 109	43%~ 3	60%~ 83	63%~ 31
NOT ANSWERED	2	70			2			1							1		1		2	
VALID CASES	188	2990		46	50	46	46	107	5	6	2	2	15	24	74	109	177	7	139	49
NUMBER OF RESPONDENTS	190	3060		46	52	46	46	108	5	6	2	2	15	24	74	110	178	7	141	49
	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q38 #YES	166 88%	2520 84%*	43 ~ 93%~	46 92%	38 83%~	39 85%~	97 91%	4 80%~	5 83%~	1 50%~	2 100%~	12 80%~	22 92%~	66 89%	95 87%	157 89%~	5 71%~	122 88%~	44 90%~
NO	22 12%	484 16%*	3 ~ 7%~	4 8%	8 17%~	7 15%~	10 9%	1 20%~	1 17%~	1 50%~		3 ~ 20%~	2 8%~	8 11%	14 13%	20 11%~	2 29%~	17 12%~	5 10%~
NOT ANSWERED	2	56		2			1							1		1		2	
VALID CASES	188	3004	46	50	46	46	107	5	6	2	2	15	24	74	109	177	7	139	49
NUMBER OF RESPONDENTS	190 100%	3060 100%	46 100%	52 100%	46 100%	46 100%	108 100%	5 100%	6 100%	2 100%	2 100%	15 100%	24 100%	74 100%	110 100%	178 100%	7 100%	141 100%	49 100%

[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?

	FMCA TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	NO CCC	CCC	
Q39 YES	66 35%	1156 39%	20 ~ 43%~	19 37%	12 26%~	15 33%~	37 34%	2 40%~	1 17%~	1 50%~	6 ~ 40%~	9 38%~	27 36%	37 34%	60 34%~	4 57%~	40 29%~	26 53%~	
NO	123 65%	1846 61%	26 ~ 57%~	32 63%	34 74%~	31 67%~	71 66%	3 60%~	5 83%~	1 50%~	2 100%~	9 60%~	15 63%~	73 64%	118 66%~	3 43%~	100 71%~	23 47%~	
NOT ANSWERED	1	59			1												1		
VALID CASES	189	3001	46	51	46	46	108	5	6	2	2	15	24	74	110	178	7	140	49
NUMBER OF RESPONDENTS	190	3060	46	52	46	46	108	5	6	2	2	15	24	74	110	178	7	141	49
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q40 NEVER	8 13%	80 7%	1 ~	2 6%~	1 11%~	4 8%~	6 27%~	17%~	~	~	~	~	1 ~	1 11%~	2 8%~	6 17%~	8 14%~	4 ~	4 10%~	4 16%~
SOMETIMES	7 11%	163 14%	2 ~	2 11%~	1 11%~	2 8%~	3 13%~	9%~	~	~	~	~	1 ~	1 11%~	6 23%~	1 3%~	6 10%~	5 ~	2 8%~	13%~
USUALLY	20 31%	320 28%	8 ~	5 44%~	6 26%~	1 50%~	7 7%~	10 29%~	1 50%~	~	~	~	1 ~	5 56%~	11 42%~	9 25%~	19 33%~	1 25%~	12 31%~	8 32%~
ALWAYS	29 45%	595 51%	7 ~	10 39%~	4 53%~	8 33%~	8 53%~	16 46%~	1 50%~	1 100%~	1 100%~	~	3 ~	2 22%~	7 27%~	20 56%~	25 43%~	3 75%~	18 46%~	11 44%~
#ALWAYS + USUALLY (NET)	49 77%	915 79%	15 ~	15 83%~	10 79%~	9 83%~	9 60%~	26 74%~	2 100%~	1 100%~	1 100%~	~	4 ~	7 78%~	18 69%~	29 81%~	44 76%~	4 100%~	30 77%~	19 76%~
TOP BOX SCORE	29 45%	595 51%	7 ~	10 39%~	4 53%~	8 33%~	8 53%~	16 46%~	1 50%~	1 100%~	1 100%~	~	3 ~	2 22%~	7 27%~	20 56%~	25 43%~	3 75%~	18 46%~	11 44%~
NOT ANSWERED	2	33	2					2						1	1	2		1	1	
VALID CASES	64	1158	18	19	12	15	15	35	2	1	1		6	9	26	36	58	4	39	25
NUMBER OF RESPONDENTS	66	1191	20	19	12	15	15	37	2	1	1		6	9	27	37	60	4	40	26
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q41 WORST PERSONAL DOCTOR POSSIBLE	1	9					1							1	1		1	
	0.4%	0.2%	~	~	~	~	2%	~	~	~	~	~	~	~0.7%	0.4%~	~	~0.5%	~
01		6																
		0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02		7																
		0.2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03		14																
		0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
04	2	45		1		1				1		1		1	1		2	2
	0.8%	1%	~	2%	~	2%	~	~	~	13%	~	50%	~	1%	0.7%	~	0.9%	~
05	9	127		2	2	3	2	6	2					1	3	6	9	8
	4%	3%	~	4%	3%	5%	3%	4%	40%	~	~	~	~	3%	3%	4%	4%	~
06	5	112			3	1	1	3						2	2	3	5	3
	2%	3%	~	~	4%	2%	2%	2%	~	~	~	~	~	6%	2%	2%	2%	~
07	16	293			6	4	6	6	2	2				2	2	4	15	1
	7%	7%	~	~	9%	6%	10%	4%	40%	25%	~	~	13%	6%	4%	9%	7%	11%
08	42	690		9	9	15	9	19	1	1				5	6	20	38	3
	17%	16%	~	19%	13%	23%	15%	14%	20%	13%	~	~	31%	19%	20%	15%	17%	33%
09	36	810		9	13	6	8	24		1	1			3	3	16	36	
	15%	19%	~	19%	19%	9%	13%	17%	~	13%	50%	~	~	19%	10%	16%	16%	~
BEST PERSONAL DOCTOR POSSIBLE	130	2128		27	34	35	34	81		3	1	1	6	17	53	72	122	5
	54%	50%	~	56%	51%	54%	56%	58%	~	38%	50%	50%	38%	55%	54%	53%	54%	56%
#8-10 (NET)	208	3628		45	56	56	51	124	1	5	2	1	14	26	89	113	196	8
	86%	86%	~	94%	84%	86%	84%	89%	20%	63%	100%	50%	88%	84%	90%	83%	86%	89%

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
9-10 (NET)	166 69%	2937 69%	36 ~ 75%	47 ~ 70%	41 63%	42 69%	105 76%*	4 ~ 50%	2 ~ 100%	1 ~ 50%	9 56%	20 65%	69 70%	92 68%	158 69%	5 56%	125 67%	41 75%	
NOT ANSWERED	14	228		7	3	4	6	1			3		3	7	10		10	4	
VALID CASES	241	4241	48	67	65	61	139	5	8	2	2	16	31	99	136	228	9	186	55
NUMBER OF RESPONDENTS	255 100%	4469 100%	48 100%	74 100%	68 100%	65 100%	145 100%	6 100%	8 100%	2 100%	2 100%	19 100%	31 100%	102 100%	143 100%	238 100%	9 100%	196 100%	59 100%
MEAN	8.94	8.89	9.10	8.94	8.88	8.89	9.12	6.40	8.12	9.50	7.00	8.81	8.90	9.02	8.85	8.93	9.00	8.91	9.05
p stat_(*=Sig @ p<=.05)		.547	~	~.992	.688	.763	.031*	~	~	~	~	~	~.505	.302	~	~	~.478	.479	

[ASKED IF Q30 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q42 YES	58 24%	1024 24%	9 ~ 19%	11 ~ 16%	22 34%*	16 26%	39 28%	2 33%~	~	1 ~ 50%	2 12%~	9 29%~	15 16%*	42 31%*	54 24%~	3 38%~	13 7%*	45 80%*	
NO	181 76%	3250 76%	38 ~ 81%	56 ~ 84%	42 66%*	45 74%	99 72%	4 67%~	8 100%~	2 100%~	1 50%~	14 88%~	22 71%~	81 84%*	95 69%*	172 76%~	5 63%~	170 93%*	11 20%*
NOT ANSWERED	16	195	1	7	4	4	7				3		6	6	12	1	13	3	
VALID CASES	239	4274	47	67	64	61	138	6	8	2	2	16	31	96	137	226	8	183	56
NUMBER OF RESPONDENTS	255 100%	4469 100%	48 100%	74 100%	68 100%	65 100%	145 100%	6 100%	8 100%	2 100%	2 100%	19 100%	31 100%	102 100%	143 100%	238 100%	9 100%	196 100%	59 100%

[ASKED IF Q30 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q43 #YES	47 82%	896 89%	5 ~ 56%	9 ~ 90%	19 ~ 86%	14 ~ 88%	33 85%	1 100%	~	~	~	2 ~100%	7 78%	13 87%	33 80%	45 85%	1 33%	10 77%	37 84%
NO	10 18%	110 11%	4 ~ 44%	1 ~ 10%	3 ~ 14%	2 ~ 12%	6 15%	~	~	~	1 ~100%	2 ~ 22%	2 13%	8 20%	8 15%	2 67%	3 23%	7 16%	
NOT ANSWERED	1	35		1			1							1	1			1	
VALID CASES	57	1006	9	10	22	16	39	1		1	2	9	15	41	53	3	13	44	
NUMBER OF RESPONDENTS	58 100%	1041 100%	9 100%	11 100%	22 100%	16 100%	39 100%	2 100%		1 100%	2 100%	9 100%	15 100%	42 100%	54 100%	3 100%	13 100%	45 100%	

[ASKED IF Q30 = YES AND Q42 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q44 #YES	46 81%	836 84%	5 ~ 56%~	8 80%~	20 91%~	13 81%~	31 79%~	1 100%~	~	~	2 ~100%~	8 89%~	11 73%~	34 83%~	43 81%~	2 67%~	11 85%~	35 80%~
NO	11 19%	163 16%	4 ~ 44%~	2 20%~	2 9%~	3 19%~	8 21%~	~	~	1 ~100%~	1 ~ 11%~	4 27%~	7 17%~	10 19%~	1 33%~	2 15%~	9 20%~	
NOT ANSWERED	1	41		1			1						1	1		1		
VALID CASES	57	1000	9	10	22	16	39	1		1	2	9	15	41	53	3	13	44
NUMBER OF RESPONDENTS	58 100%	1041 100%	9 100%	11 100%	22 100%	16 100%	39 100%	2 100%		1 100%	2 100%	9 100%	15 100%	42 100%	54 100%	3 100%	13 100%	45 100%

[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?

	FMCA TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	NO CCC	CCC	
Q45 YES	41 14%	774 15%	10 ~ 20%	9 11%	7 9%	15 19%	30 18%*	2 33%~	1 9%~	~	~	2 ~ 10%~	3 10%~	12 10%	29 18%*	36 13%~	5 38%~	17 7%*	24 38%*
NO	250 86%	4257 85%	41 ~ 80%	73 89%	74 91%	62 81%	133 82%*	4 67%~	10 91%~	6 100%~	2 100%~	19 90%~	28 90%~	107 90%	136 82%*	237 87%~	8 62%~	211 93%*	39 62%*
NOT ANSWERED	21	332	3	6	6	6	1	1						2	3		21		
VALID CASES	291	5031	51	82	81	77	163	6	11	6	2	21	31	119	165	273	13	228	63
NUMBER OF RESPONDENTS	312 100%	5363 100%	54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER				
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- AMR	IAN	NATV ILND	AMR IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q46 NEVER	3 7%	73 10%	~	10%	~	14%	7%	2	~	~	~	~	~	1	2	3	~	~	3	
SOMETIMES	8 20%	115 16%	~	33%	~	14%	27%	5	~	~	~	~	2	4	4	6	2	5	3	
USUALLY	5 12%	209 28%	~	20%	~	11%	14%	3	1	~	~	1	~	~	5	5	~	1	4	
ALWAYS	25 61%	340 46%	~	70%	~	56%	57%	20	1	1	~	1	1	7	18	22	3	11	14	
#ALWAYS + USUALLY (NET)	30 73%	549 75%	~	90%	~	67%	71%	23	2	1	~	2	1	7	23	27	3	12	18	
TOP BOX SCORE	25 61%	340 46%	~	70%	~	56%	57%	20	1	1	~	1	1	7	18	22	3	11	14	
NOT ANSWERED		29																		
VALID CASES	41	737		10		9	7	15	30	2	1		2	3	12	29	36	5	17	24
NUMBER OF RESPONDENTS	41	766		10		9	7	15	30	2	1		2	3	12	29	36	5	17	24
	100%	100%		100%		100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

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

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER				
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q47 NONE	3 7%	67 9%	~	~	~	~	20%	3%	~	~	~	~	~	33%	17%	3%	6%	20%	~	13%
1 SPECIALIST	28 68%	450 61%	~	90%	67%	57%	60%	21%	2%	1%	~	~	50%	33%	67%	69%	75%	20%	76%	63%
2	6 15%	144 19%	~	~	11%	29%	20%	5%	~	~	~	~	50%	~	8%	17%	11%	40%	12%	17%
3	3 7%	48 6%	~	~	22%	14%	~	2%	~	~	~	~	33%	8%	7%	6%	20%	12%	4%	
4		10 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
5 OR MORE SPECIALISTS	1 2%	23 3%	~	10%	~	~	~	1%	~	~	~	~	~	~	1%	3%	1%	3%	~	4%
NOT ANSWERED		25																		
VALID CASES	41	741		10	9	7	15	30	2	1			2	3	12	29	36	5	17	24
NUMBER OF RESPONDENTS	41	766		10	9	7	15	30	2	1			2	3	12	29	36	5	17	24
	100%	100%		100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

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

	FMCA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ NATV	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q48 WORST SPECIALIST POSSIBLE		1 0.1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
01		2 0.3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
02		1 0.2%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
03		8 1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
04		17 3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
05		11 2%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
06	3 8%	29 4%~	~	~	~	3 25%~	2 7%~	~	~	~	~	~	2 20%~	1 4%~	1 3%~	2 50%~	1 6%~	2 10%~	
07	2 5%	71 11%~	~	~	1 11%~	1 14%~	~	1 50%~	~	~	~	1 50%~	~	2 7%~	1 3%~	1 25%~	1 6%~	1 5%~	
08	6 16%	106 16%~	~	1 10%~	2 29%~	3 25%~	6 21%~	~	~	~	~	~	~	6 21%~	5 15%~	1 25%~	1 6%~	5 24%~	
09	7 18%	148 22%~	~	3 30%~	2 22%~	1 14%~	1 8%~	5 17%~	~	~	~	1 50%~	~	2 20%~	5 18%~	7 21%~	~	5 29%~	2 10%~
BEST SPECIALIST POSSIBLE	20 53%	278 41%~	~	6 60%~	6 67%~	3 43%~	5 42%~	16 55%~	1 50%~	1 100%~	~	~	1 50%~	1 50%~	6 60%~	14 50%~	20 59%~	9 53%~	11 52%~

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AMER IAN	NATV HAW/ ILND	AMER IND/ NATV	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
#8-10 (NET)	33 87%	532 79%	10 ~100%	8 89%	6 86%	9 75%	27 93%	1 50%	1 100%		2 ~100%	1 50%	8 80%	25 89%	32 94%	1 25%	15 88%	18 86%
9-10 (NET)	27 71%	426 63%	9 ~90%	8 89%	4 57%	6 50%	21 72%	1 50%	1 100%		2 ~100%	1 50%	8 80%	19 68%	27 79%		14 82%	13 62%
NOT ANSWERED		10																
VALID CASES	38	672	10	9	7	12	29	2	1		2	2	10	28	34	4	17	21
NUMBER OF RESPONDENTS	38 100%	682 100%	10 100%	9 100%	7 100%	12 100%	29 100%	2 100%	1 100%		2 100%	2 100%	10 100%	28 100%	34 100%	4 100%	17 100%	21 100%
MEAN	9.03	8.61	9.50	9.44	8.86	8.42	9.14	8.50	10.0		9.50	8.50	9.00	9.04	9.29	6.75	9.18	8.90
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER															
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC														
Q49 YES	94 32%	1285 26%*	~	43%	37%	33%	21%*	53%	17%~	3%	27%~	33%~	6%	29%~	11%	37%~	40%	34%	51%	31%	88%	3%	23%~	74%	32%	20%	32%					
NO	197 68%	3691 74%*	~	57%	63%	67%	79%*	110%	83%~	5%	73%~	8%	67%~	100%~	2%	71%~	15%	66%	19%	69%	78%	66%	114%	69%	185%	68%	10%	77%~	155%	68%	42%	68%
NOT ANSWERED	21	387		3	6	7	5		1	1				1			1	1	2		3				20		1					
VALID CASES	291	4976		51	82	80	78	163	6	11	6	2	21	30	118	165	273	13	229	62												
NUMBER OF RESPONDENTS	312	5363		54	88	87	83	163	7	12	6	2	21	31	119	167	276	13	249	63												
	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	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?

	FMCA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q50 NEVER	3 3%	37 3%	~	~	1 3%	1 4%	1 6%	2 4%	~	~	~	~	~	~	1 9%	2 4%	2 2%	3 4%	~	
SOMETIMES	15 16%	235 20%	~	2 10%	5 17%	5 19%	3 19%	9 18%	~	1 50%	~	2 33%	2 18%	6 15%	9 18%	15 18%	8 11%	7 35%	~	
USUALLY	29 32%	343 30%	~	4 20%	7 24%	12 46%	6 38%	9 18%	~	2 67%	1 50%	~	3 50%	4 36%	16 41%	12 24%	25 29%	3 100%	23 32%	6 30%
ALWAYS	44 48%	547 47%	~	14 70%	16 55%	8 31%	6 38%	30 60%	1 100%	1 33%	~	~	1 17%	4 36%	17 44%	26 53%	43 51%	~	37 52%	7 35%
#ALWAYS + USUALLY (NET)	73 80%	890 77%	~	18 90%	23 79%	20 77%	12 75%	39 78%	1 100%	3 100%	1 50%	~	4 67%	8 73%	33 85%	38 78%	68 80%	3 100%	60 85%	13 65%
TOP BOX SCORE	44 48%	547 47%	~	14 70%	16 55%	8 31%	6 38%	30 60%	1 100%	1 33%	~	~	1 17%	4 36%	17 44%	26 53%	43 51%	~	37 52%	7 35%
NOT ANSWERED	3	42		2	1			3					1	2		3		3		
VALID CASES	91	1162		20	29	26	16	50	1	3	2		6	11	39	49	85	3	71	20
NUMBER OF RESPONDENTS	94	1204		22	30	26	16	53	1	3	2		6	11	40	51	88	3	74	20
	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q51 NEVER	1 1%	21 2%	~	~	~	4%	~	~	~	~	~	~	~	1 2%	1 1%	~	1 1%	~	
SOMETIMES	4 4%	81 7%	~	~	1 3%	2 8%	1 6%	4 8%	~	~	~	~	~	2 5%	2 4%	4 5%	2 3%	2 10%	
USUALLY	26 29%	289 25%	~	4 20%	7 24%	7 27%	8 50%	15 29%	~	~	~	2 33%	2 18%	13 33%	11 22%	21 25%	3 100%	20 28%	6 30%
ALWAYS	60 66%	768 66%	~	16 80%	21 72%	16 62%	7 44%	32 63%	1 100%	3 100%	1 100%	4 67%	8 73%	24 62%	35 71%	59 69%	~	48 68%	12 60%
#ALWAYS + USUALLY (NET)	86 95%	1057 91%	~	20 100%	28 97%	23 88%	15 94%	47 92%	1 100%	3 100%	1 100%	6 100%	10 91%	37 95%	46 94%	80 94%	3 100%	68 96%	18 90%
TOP BOX SCORE	60 66%	768 66%	~	16 80%	21 72%	16 62%	7 44%	32 63%	1 100%	3 100%	1 100%	4 67%	8 73%	24 62%	35 71%	59 69%	~	48 68%	12 60%
NOT ANSWERED	3	44	2	1			2		1			1	2	3		3			
VALID CASES	91	1160	20	29	26	16	51	1	3	1	6	11	39	49	85	3	71	20	
NUMBER OF RESPONDENTS	94	1204	22	30	26	16	53	1	3	2	6	11	40	51	88	3	74	20	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q49 = YES]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q52 YES	103 36%	1790 36%	19 ~ 38%	32 40%	24 30%	28 37%	60 38%	3 60%~	1 9%~	4 67%~	2 100%~	7 33%~	12 39%~	40 34%	61 38%	95 36%~	5 38%~	84 37%	19 32%
NO	182 64%	3138 64%	31 ~ 62%	48 60%	56 70%	47 63%	98 62%	2 40%~	10 91%~	2 33%~		14 ~ 67%~	19 61%~	77 66%	99 62%	172 64%~	8 62%~	142 63%	40 68%
NOT ANSWERED	27	435	4	8	7	8	5	2	1					2	7	9		23	4
VALID CASES	285	4928	50	80	80	75	158	5	11	6	2	21	31	117	160	267	13	226	59
NUMBER OF RESPONDENTS	312 100%	5363 100%	54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC	
PQ53 NEVER	4 1%	64 1%	~	~	~	1% 4%	3 2%	~	~	17% ~	1 ~	~	~	~	0.9% 2%	3 2%	4 2%	~	~	2 0.9%	2 3%
SOMETIMES	18 6%	317 6%	~	~	12% 9%	7% 3%	2 5%	~	9% ~	17% ~	1 50% ~	1 5% ~	1 10% ~	3 10% ~	8 7%	10 6%	16 6%	1 8%	~	15 7%	3 5%
USUALLY	35 12%	629 13%	~	8% 14%	11% 6%*	5% 20%*	15% 60%*	3 60%*	~	~	~	~	4 19% ~	2 6% ~	12 10%	22 14%	32 12% ~	2 15% ~	~	27 12%	8 14%
ALWAYS	226 80%	3884 79%	~	92%* 74%	58% 84%	67% 73%	55% 78%	123 78%	2 40% ~	10 91% ~	4 67% ~	1 50% ~	16 76% ~	26 84% ~	95 82%	124 78%	213 80% ~	10 77% ~	~	180 80%	46 78%
#ALWAYS + USUALLY (NET)	261 92%	4513 92%	~	100% 88%	88% 90%	72% 93%	70% 93%	146 93%	5 100% ~	10 91% ~	4 67% ~	1 50% ~	20 95% ~	28 90% ~	107 92%	146 92%	245 92% ~	12 92% ~	~	207 92%	54 92%
TOP BOX SCORE	226 80%	3884 79%	~	92%* 74%	58% 84%	67% 73%	55% 78%	123 78%	2 40% ~	10 91% ~	4 67% ~	1 50% ~	16 76% ~	26 84% ~	95 82%	124 78%	213 80% ~	10 77% ~	~	180 80%	46 78%
NOT ANSWERED	2	91			2			1							1	1	2			2	
VALID CASES	283	4894		50	78	80	75	157	5	11	6	2	21	31	116	159	265	13		224	59
NUMBER OF RESPONDENTS	285 100%	4985 100%		50 100%	80 100%	80 100%	75 100%	158 100%	5 100%	11 100%	6 100%	2 100%	21 100%	31 100%	117 100%	160 100%	267 100%	13 100%		226 100%	59 100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q54 WORST HEALTH PLAN POSSIBLE	2	24			1		1	2							1	1		1	1
	0.7%	0.5%	~	~	1%	~	1%	1%	~	~	~	~	~	~	~0.6%	0.4%	~	~0.4%	2%
01		11	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
		0.2%																	
02	1	31	~	~	1%	~	~0.6%	~	~	~	~	~	~	~0.6%	1	1	~0.4%	~0.4%	~
	0.3%	0.6%																	
03	2	38	~	2%	~	~	1%	~	~	~	~	~	~	~	2	1	1	~	2
	0.7%	0.8%													1%	0.4%	8%	~	3%
04	4	60	~	~	1%	2	1	3	~	~	~	~	~	~	4	4	~	3	1
	1%	1%				3%	1%	2%							2%	1%	~	1%	2%
05	13	233	~	2%	4	1	7	9	1	1	~	~	1	1	12	13	~	10	3
	5%	5%			5%	1%*	9%	6%	17%	9%	~	~	3%	0.9%*	7%*	5%	~	4%	5%
06	9	215	~	~	2	5	2	7	~	~	~	~	1	1	7	9	~	7	2
	3%	4%			2%	6%	3%	4%	~	~	~	~	5%	0.9%*	4%	3%	~	3%	3%
07	27	490	~	4%*	9	7	9	11	2	2	~	~	2	9	6	21	27	~	17
	9%	10%			11%	9%	12%	7%	33%	18%	~	~	10%	30%	5%*	13%*	10%	~	8%
08	57	940	~	16%	18	15	16	37	1	3	~	~	5	5	19	38	52	5	40
	20%	19%			22%	19%	22%	23%	17%	27%	~	~	24%	17%	16%	23%	19%	42%	18%
09	55	878	~	25%	12	14	16	31	1	2	1	~	3	5	27	28	50	4	45
	19%	18%			15%	18%	22%	19%	17%	18%	17%	~	14%	17%	23%	17%	19%	33%	20%
BEST HEALTH PLAN POSSIBLE	117	2014	~	51%	34	36	21	58	1	3	5	2	10	10	63	48	112	2	101
	41%	41%			41%	45%	28%*	36%	17%	27%	83%	100%	48%	33%	54%*	30%*	41%	17%	45%*
#8-10 (NET)	229	3832	~	92%*	64	65	53	126	3	8	6	2	18	20	109	114	214	11	186
	80%	78%			78%	81%	72%	78%	50%	73%	100%	100%	86%	67%	93%*	70%*	79%	92%	83%*

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR AFR-	AMR AS-	NATV HAW/ PAC	AMR IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC
9-10 (NET)	172 60%	2892 59%	39 ~ 76%*	46 56%	50 62%	37 50%*	89 55%	2 33%~	5 45%~	6 100%~	2 100%~	13 62%~	15 50%~	90 77%*	76 47%*	162 60%~	6 50%~	146 65%*	26 42%*
NOT ANSWERED	25	430	3	6	7	9	2	1	1				1	2	5	6	1	24	1
VALID CASES	287	4933	51	82	80	74	161	6	11	6	2	21	30	117	162	270	12	225	62
NUMBER OF RESPONDENTS	312 100%	5363 100%	54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%
MEAN	8.55	8.49	9.08	8.45	8.73	8.09	8.32	7.67	8.27	9.83	10.0	8.90	8.43	9.21	8.08	8.57	8.25	8.71	7.95
p stat_(*=Sig @ p<=.05)		.552	~.005*	.563	.250	.010*	.009*	~	~	~	~	~	~	~0.000*	.000*	~	~	~.003*	.003*

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q55 YES	109 38%	2010 40%	~ 21	32	29	27	63	2	4	1	8	15	42	63	101	6	61	48	
			~ 42%	39%	36%	35%	39%	33%~	36%~	17%~	~ 38%~	50%~	36%	38%	37%~	46%~	27%*	76%*	
NO	181 62%	2973 60%	~ 29	50	52	50	100	4	7	5	2	13	15	75	102	171	7	166	15
			~ 58%	61%	64%	65%	61%	67%~	64%~	83%~	100%~	62%~	50%~	64%	62%	63%~	54%~	73%*	24%*
NOT ANSWERED	22	380	4	6	6	6	1	1				1	2	2	4		22		
VALID CASES	290	4983	50	82	81	77	163	6	11	6	2	21	30	117	165	272	13	227	63
NUMBER OF RESPONDENTS	312	5363	54	88	87	83	163	7	12	6	2	21	31	119	167	276	13	249	63
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q56 NEVER	2 2%	30 1%	~	5%~	~	~	4%~	2%~	~	~	~	~	13%~	~	3%~	2	2	1	1	
SOMETIMES	12 11%	187 9%	~	5%~	10%~	14%~	15%~	8%~	~	~	100%~	~	13%~	20%~	10%~	11%~	11	4	8	
USUALLY	19 18%	459 23%	~	33%~	13%~	17%~	11%~	10	1	~	~	25%~	27%~	26%~	13%~	19	10	9		
ALWAYS	74 69%	1338 66%	~	57%~	77%~	69%~	70%~	46	2	2	~	50%~	53%~	64%~	72%~	67	6	44	30	
#ALWAYS + USUALLY (NET)	93 87%	1797 89%	~	90%~	90%~	86%~	81%~	56	2	3	~	75%~	80%~	90%~	85%~	86	6	54	39	
TOP BOX SCORE	74 69%	1338 66%	~	57%~	77%~	69%~	70%~	46	2	2	~	50%~	53%~	64%~	72%~	67	6	44	30	
NOT ANSWERED	2	42			2			1	1					2	2		2			
VALID CASES	107	2014		21	30	29	27	62	2	3	1		8	15	42	61	99	6	59	48
NUMBER OF RESPONDENTS	109	2056		21	32	29	27	63	2	4	1		8	15	42	63	101	6	61	48
	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC
Q57 #YES	59 56%	1193 60%	12 ~ 57%	17 ~ 59%	16 ~ 55%	14 ~ 54%	32 52%	1 50%	2 67%	1 100%	5 ~ 71%	9 60%	26 63%	32 53%	55 57%	3 50%	32 55%	27 57%
NO	46 44%	793 40%	9 ~ 43%	12 41%	13 45%	12 46%	29 48%	1 50%	1 33%	~	2 ~ 29%	6 40%	15 37%	28 47%	42 43%	3 50%	26 45%	20 43%
NOT ANSWERED	4	70		3		1	2		1		1		1	3	4		3	1
VALID CASES	105	1986	21	29	29	26	61	2	3	1	7	15	41	60	97	6	58	47
NUMBER OF RESPONDENTS	109 100%	2056 100%	21 100%	32 100%	29 100%	27 100%	63 100%	2 100%	4 100%	1 100%	8 100%	15 100%	42 100%	63 100%	101 100%	6 100%	61 100%	48 100%

[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?

	FMCA TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	NO CCC	CCC	
Q57A YES	210 75%	3840 79%	19 ~ 38%*	63 80%	68 89%*	60 79%	109 69%*	5 100%~	11 92%~	2 50%~	2 100%~	13 65%~	25 81%~	89 77%	117 73%	198 75%~	9 69%~	163 74%	47 77%
NO	71 25%	1039 21%	31 ~ 62%*	16 20%	8 11%*	16 21%	50 31%*	~	1 8%~	2 50%~	~	7 35%~	6 19%~	26 23%	43 27%	66 25%~	4 31%~	57 26%	14 23%
NOT ANSWERED	31	484	4	9	11	7	4	2	2	1				4	7	12		29	2
VALID CASES	281	4879	50	79	76	76	159	5	12	4	2	20	31	115	160	264	13	220	61
NUMBER OF RESPONDENTS	312 100%	5363 100%	54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q57B NEVER	35 30%	674 30%		5 ~ 45%	11 28%	11 31%	8 27%	16 31%	3 ~ 50%	1 25%		4 ~ 57%	4 24%	16 29%	18 31%	34 32%		30 ~ 34%	5 19%	
SOMETIMES	33 28%	430 19%*		2 ~ 18%	10 26%	9 25%	12 40%	13 25%	2 ~ 33%	3 75%		1 ~ 14%	5 29%	21 38%*	12 21%	28 26%	5 71%	21 24%	12 44%	
USUALLY	15 13%	488 22%*		1 ~ 9%	5 13%	6 17%	3 10%	6 12%	1 50%	1 17%			2 ~ 12%	8 15%	7 12%	14 13%	1 14%	9 10%	6 22%	
ALWAYS	33 28%	667 30%		3 ~ 27%	13 33%	10 28%	7 23%	17 33%	1 50%			1 ~ 100%	2 29%	6 35%	10 18%*	21 36%	30 28%	1 14%	4 33%	15%
#ALWAYS + USUALLY (NET)	48 41%	1154 51%*		4 ~ 36%	18 46%	16 44%	10 33%	23 44%	2 100%	1 17%		1 ~ 100%	2 29%	8 47%	18 33%	28 48%	44 42%	2 29%	38 43%	10 37%
TOP BOX SCORE	33 28%	667 30%		3 ~ 27%	13 33%	10 28%	7 23%	17 33%	1 50%			1 ~ 100%	2 29%	6 35%	10 18%*	21 36%	30 28%	1 14%	4 33%	15%
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	167	2651		36	41	43	47	105	3	6	2	1	12	14	62	101	160	6	133	34
NOT ANSWERED	29	454		7	8	8	6	6	2				2		2	8	10		27	2
VALID CASES	116	2258		11	39	36	30	52	2	6	4	1	7	17	55	58	106	7	89	27
NUMBER OF RESPONDENTS	312 100%	5363 100%		54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

	FMCA TOT CHLD	OHP TOT CHLD	AGE					RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR GOOD	POOR	NO CCC	CCC	
Q57C YES	52 19%	1026 21%	10 ~ 21%	18 ~ 23%	16 21%	8 11%*	27 17%	2 40%	1 8%	1 17%	1 50%	5 25%	8 29%	16 14%	35 22%	48 18%	3 23%	31 14%*	21 34%*	
NO	226 81%	3791 79%	38 ~ 79%	60 ~ 77%	62 79%	66 89%*	129 83%	3 60%	11 92%	5 83%	1 50%	15 75%	20 71%	99 86%	123 78%	215 82%	10 77%	186 86%*	40 66%*	
NOT ANSWERED	34	546	6	10	9	9	7	2				1	3	4	9	13		32	2	
VALID CASES	278	4817	48	78	78	74	156	5	12	6	2	20	28	115	158	263	13	217	61	
NUMBER OF RESPONDENTS	312 100%	5363 100%	54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%	

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q57D #YES	36 71%	865 87%*	8 ~ 89%~	11 61%~	10 63%~	7 88%~	20 77%~	1 50%~				1 ~100%~	4 80%~	5 63%~	10 63%~	25 74%~	32 68%~	3 100%~	19 63%~	17 81%~
NO	15 29%	124 13%*	1 ~ 11%~	7 39%~	6 38%~	1 12%~	6 23%~	1 50%~	1 100%~	1 100%~		1 ~ 20%~	3 38%~	6 38%~	9 26%~	15 32%~		11 37%~	4 19%~	
NOT ANSWERED	1	6	1				1							1	1			1		
VALID CASES	51	990	9	18	16	8	26	2	1	1	1	5	8	16	34	47	3	30	21	
NUMBER OF RESPONDENTS	52	996	10	18	16	8	27	2	1	1	1	5	8	16	35	48	3	31	21	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q57C = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD POOR	NO CCC	CCC	
Q57E #YES	41 80%	853 87%		9 ~100%	13 72%	11 69%	8 100%	21 81%	1 50%	1 100%		1 100%	5 100%	7 88%	11 69%	29 85%	37 79%	3 100%	24 80%	17 81%
NO	10 20%	127 13%			5 28%	5 31%		5 19%	1 50%		1 100%			1 12%	5 31%	5 15%	10 21%		6 20%	4 19%
NOT ANSWERED	1	15		1			1								1	1		1		
VALID CASES	51	981		9	18	16	8	26	2	1	1	1	5	8	16	34	47	3	30	21
NUMBER OF RESPONDENTS	52 100%	996 100%		10 100%	18 100%	16 100%	8 100%	27 100%	2 100%	1 100%	1 100%	1 100%	5 100%	8 100%	16 100%	35 100%	48 100%	3 100%	31 100%	21 100%

[ASKED IF Q57C = YES]

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

	FMCA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC	
Q57F NEVER	7	20	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
SOMETIMES	14%	89%	~	~	3 17%~	4 25%~	1 4%~	~	1 100%~	1 100%~	1 20%~	2 25%~	3 19%~	4 12%~	7 15%~	~	4 13%~	3 14%~		
USUALLY	22%	244 25%	~	2 22%~	5 28%~	3 19%~	1 12%~	7 27%~	~	~	~	2 25%~	3 19%~	8 24%~	9 19%~	2 67%~	5 17%~	6 29%~		
ALWAYS	65%	624 64%	~	7 78%~	10 56%~	9 56%~	7 88%~	18 69%~	2 100%~	1 100%~	~	4 80%~	4 50%~	10 63%~	22 65%~	31 66%~	1 33%~	21 70%~	12 57%~	
#ALWAYS + USUALLY (NET)	86%	44 868 89%	~	9 100%~	15 83%~	12 75%~	8 100%~	25 96%~	2 100%~	1 100%~	~	4 80%~	6 75%~	13 81%~	30 88%~	40 85%~	3 100%~	26 87%~	18 86%~	
TOP BOX SCORE	65%	33 624 64%	~	7 78%~	10 56%~	9 56%~	7 88%~	18 69%~	2 100%~	1 100%~	~	4 80%~	4 50%~	10 63%~	22 65%~	31 66%~	1 33%~	21 70%~	12 57%~	
NOT ANSWERED		1 20		1				1						1	1		1			
VALID CASES	51	976		9	18	16	8	26	2	1	1	1	5	8	16	34	47	3	30	21
NUMBER OF RESPONDENTS	52	996		10	18	16	8	27	2	1	1	1	5	8	16	35	48	3	31	21
	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q57C = YES]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV HAW/ PAC ILND	AMER ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC	
Q57G NEVER	3 6%	39 4%	~	~	18%	~	~	2 8%	1 50%	~	~	~	~	~	~	3 9%	3 7%	~	1 4%	2 10%	
SOMETIMES	5 10%	87 9%	~	~	18%	14%	~	3 12%	~	~	1 100%	~	~	1 14%	2 13%	3 9%	5 11%	~	3 11%	2 10%	
USUALLY	11 23%	248 25%	~	22%	24%	21%	25%	6 23%	~	~	~	~	1 20%	2 29%	5 33%	6 18%	10 22%	1 50%	5 19%	6 29%	
ALWAYS	29 60%	607 62%	~	78%	41%	64%	75%	15 58%	1 50%	1 100%	~	~	1 100%	4 80%	4 57%	8 53%	21 64%	28 61%	1 50%	18 67%	11 52%
#ALWAYS + USUALLY (NET)	40 83%	855 87%	~	100%	65%	86%	100%	21 81%	1 50%	1 100%	~	~	1 100%	5 100%	6 86%	13 87%	27 82%	38 83%	2 100%	23 85%	17 81%
TOP BOX SCORE	29 60%	607 62%	~	78%	41%	64%	75%	15 58%	1 50%	1 100%	~	~	1 100%	4 80%	4 57%	8 53%	21 64%	28 61%	1 50%	18 67%	11 52%
NOT ANSWERED	4	16	1	1	2		1						1	1	2	2	1	4			
VALID CASES	48	980	9	17	14	8	26	2	1	1	1	5	7	15	33	46	2	27	21		
NUMBER OF RESPONDENTS	52 100%	996 100%	10 100%	18 100%	16 100%	8 100%	27 100%	2 100%	1 100%	1 100%	1 100%	5 100%	8 100%	16 100%	35 100%	48 100%	3 100%	31 100%	21 100%		

[ASKED IF Q57C = YES]

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q57H NEVER	2 4%	18 2%	~	~	1 6%	1 7%	1 4%	~	~	~	1 100%	~	~	~	2 6%	2 4%	~	2 7%	~	~
SOMETIMES	5 10%	71 7%	~	~	3 18%	2 13%	2 8%	~	~	~	~	~	2 25%	3 19%	2 6%	4 9%	1 33%	3 10%	2 10%	
USUALLY	9 18%	202 21%	~	1 11%	3 18%	4 27%	1 12%	3 12%	~	~	~	1 100%	1 20%	2 25%	4 25%	5 15%	8 17%	1 33%	6 21%	3 15%
ALWAYS	33 67%	690 70%	~	8 89%	10 59%	8 53%	7 88%	19 76%	2 100%	1 100%	~	~	4 80%	4 50%	9 56%	24 73%	32 70%	1 33%	18 62%	15 75%
#ALWAYS + USUALLY (NET)	42 86%	892 91%	~	9 100%	13 76%	12 80%	8 100%	22 88%	2 100%	1 100%	~	1 100%	5 100%	6 75%	13 81%	29 88%	40 87%	2 67%	24 83%	18 90%
TOP BOX SCORE	33 67%	690 70%	~	8 89%	10 59%	8 53%	7 88%	19 76%	2 100%	1 100%	~	~	4 80%	4 50%	9 56%	24 73%	32 70%	1 33%	18 62%	15 75%
NOT ANSWERED	3	16	~	1	1	1	~	2	~	~	~	~	~	2	2	~	2	2	1	1
VALID CASES	49	980	~	9	17	15	8	25	2	1	1	1	5	8	16	33	46	3	29	20
NUMBER OF RESPONDENTS	52	996	~	10	18	16	8	27	2	1	1	1	5	8	16	35	48	3	31	21
	100%	100%	~	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q57C = YES]

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

	AGE					RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC
Q58 EXCELLENT	131 45%	1951 39%*	~ 30	40	32	29	74	4	9	4		9	13	42	87	131		117	14
			~ 59%*	49%	41%	37%	46%	57%~	75%~	67%~		~ 43%~	42%~	36%*	52%*	47%~		~ 52%*	22%*
VERY GOOD	89 31%	1732 35%	~ 14	27	21	27	54	1	2	1	2	5	12	31	57	89		66	23
			~ 27%	33%	27%	35%	33%	14%~	17%~	17%~	100%~	24%~	39%~	26%	34%	32%~		~ 29%	37%
GOOD	56 19%	973 20%	~ 7	12	22	15	30	2	1	1		5	5	38	18	56		34	22
			~ 14%	15%	28%*	19%	19%	29%~	8%~	17%~		~ 24%~	16%~	32%*	11%*	20%~		~ 15%*	35%*
FAIR	12 4%	308 6%	~	2	4	6	3					2	1	7	4		12	8	4
			~	~ 2%	5%	8%	2%*	~	~	~		~ 10%~	3%~	6%	2%		~ 92%~	4%	6%
POOR	1 0.3%	13 0.3%	~	~	~	1	1								1		1	1	
			~	~	~	1%~	0.6%~	~	~	~		~	~		~0.6%		~ 8%~	0.4%	~
#EXCELLENT + VERY GOOD + GOOD (NET)	276 96%	4656 94%	~ 51	79	75	71	158	7	12	6	2	19	30	111	162	276		217	59
			~100%~	98%	95%	91%	98%	100%~	100%~	100%~	100%~	90%~	97%~	94%	97%	100%~		~ 96%	94%
NOT ANSWERED	23	386	3	7	8	5	1							1				23	
VALID CASES	289	4977	51	81	79	78	162	7	12	6	2	21	31	118	167	276	13	226	63
NUMBER OF RESPONDENTS	312 100%	5363 100%	54	88	87	83	163	7	12	6	2	21	31	119	167	276	13	249	63
			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC
Q59 EXCELLENT	138 48%	2270 46%	37 ~ 73%*	40 49%	31 39%	30 38%	75 46%	3 43%~	10 83%~	5 83%~	1 50%~	9 43%~	13 43%~	54 45%	82 49%	137 50%~	1 8%~	128 57%*	10 16%*
VERY GOOD	74 26%	1311 26%	9 ~ 18%	18 22%	24 30%	23 29%	44 27%	1 ~ 8%~	~	~	~	7 ~ 33%~	8 27%~	32 27%	41 25%	72 26%~	1 8%~	59 26%	15 24%
GOOD	54 19%	923 19%	5 ~ 10%*	19 23%	15 19%	15 19%	27 17%	4 57%~	1 8%~	1 17%~	1 50%~	1 14%~	3 23%~	7 23%	27 16%	51 18%~	3 25%~	33 15%*	21 33%*
FAIR	18 6%	400 8%	~	4 ~ 5%	7 9%	7 9%	13 8%	~	~	~	~	1 ~ 5%~	1 3%~	6 5%	11 7%	13 5%~	5 42%~	5 2%*	13 21%*
POOR	5 2%	72 1%	~	~	2 ~ 3%	3 4%	3 2%	~	~	~	~	1 ~ 5%~	1 3%~	~	5 3%*	3 1%~	2 17%~	1 0.4%	4 6%
#EXCELLENT + VERY GOOD + GOOD (NET)	266 92%	4503 91%	51 ~100%~	77 95%	70 89%	68 87%	146 90%	7 100%~	12 100%~	6 100%~	2 100%~	19 90%~	28 93%~	113 95%	150 90%	260 94%~	5 42%~	220 97%*	46 73%*
NOT ANSWERED	23	387	3	7	8	5	1						1		1	1	23		
VALID CASES	289	4976	51	81	79	78	162	7	12	6	2	21	30	119	166	276	12	226	63
NUMBER OF RESPONDENTS	312 100%	5363 100%	54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC	
Q60 YES	62 21%	1132 23%	~ 20%	10 12%*	10 25%	20 28%	22	39 24%	1 17%~	3 25%~	1 17%~	3 ~ 14%~	10 32%~	19 16%*	43 26%*	58 21%~	4 31%~	16 7%*	46 73%*	
NO	227 79%	3829 77%	~ 80%	40 88%*	71 75%	60 72%	56	123 76%	5 83%~	9 75%~	5 83%~	2 100%~	18 86%~	21 68%~	100 84%*	123 74%*	217 79%~	9 69%~	210 93%*	17 27%*
NOT ANSWERED	23	401		4	7	7	5	1	1						1	1		23		
VALID CASES	289	4962		50	81	80	78	162	6	12	6	2	21	31	119	166	275	13	226	63
NUMBER OF RESPONDENTS	312 100%	5363 100%		54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC
Q61 YES	46 77%	857 79%	6 ~ 60%	8 ~ 89%	14 ~ 74%	18 ~ 82%	31 82%	1 100%	1 33%	1 100%	2 ~ 100%	8 80%	10 59%	36 84%	43 77%	3 75%	2 13%	44 98%
NO	14 23%	234 21%	4 ~ 40%	1 ~ 11%	5 ~ 26%	4 ~ 18%	7 18%	2 ~ 67%				2 ~ 20%	7 41%	7 16%	13 23%	1 25%	13 87%	1 2%
NOT ANSWERED	2	30			1	1	1				1		2		2		1	1
VALID CASES	60	1091	10	9	19	22	38	1	3	1	2	10	17	43	56	4	15	45
NUMBER OF RESPONDENTS	62 100%	1121 100%	10 100%	10 100%	20 100%	22 100%	39 100%	1 100%	3 100%	1 100%	3 100%	10 100%	19 100%	43 100%	58 100%	4 100%	16 100%	46 100%

[ASKED IF Q60 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q62 YES	41 91%	763 90%	~100%	~100%	79%	94%	30 97%	1 100%	~	~	~100%	88%	2 7	7 78%	34 94%	39 91%	2 100%	~	41 95%
NO	4 9%	83 10%	~	~	21%	6%	1 3%	1 100%	1 100%	~	~	12%	1 22%	2 6%	4 9%	~	~100%	2 5%	2 5%
NOT ANSWERED	1	20				1							1			1			1
VALID CASES	45	846	6	8	14	17	31	1	1	1	2	8	9	36	43	2	2	43	
NUMBER OF RESPONDENTS	46	866	6	8	14	18	31	1	1	1	2	8	10	36	43	3	2	44	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q60 = YES AND Q61 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q63 YES	41 14%	727 15%	~	8%	10%	20%	17%	25 15%	~	~	~	~	24%~	23%~	11%	17%	37 13%~	4 31%~	5 2%*	36 57%*
NO	248 86%	4197 85%	~	92%	90%	80%	83%	137 85%	6 100%	12 ~100%	6 ~100%	2 ~100%	16 76%~	24 77%~	106 89%	138 83%	238 87%~	9 69%~	221 98%*	27 43%*
NOT ANSWERED	23	439		4	7	7	5	1	1						1	1			23	
VALID CASES	289	4924		50	81	80	78	162	6	12	6	2	21	31	119	166	275	13	226	63
NUMBER OF RESPONDENTS	312 100%	5363 100%		54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q64 YES	35 87%	620 86%	~	50%	71%	94%	100%	23 92%	~	~	~	~	3 60%	6 86%	10 83%	25 89%	31 86%	4 100%	1 25%	34 94%
NO	5 13%	103 14%	~	50%	29%	6%	~	2 8%	~	~	~	~	2 40%	1 14%	2 17%	3 11%	5 14%	~	3 75%	2 6%
NOT ANSWERED	1	18			1										1		1		1	
VALID CASES	40	723		4	7	16	13	25					5	7	12	28	36	4	4	36
NUMBER OF RESPONDENTS	41	741		4	8	16	13	25					5	7	13	28	37	4	5	36
	100%	100%		100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q63 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q65 YES	32 94%	581 97%	~100%	~100%	~100%	~100%	~96%	~	~	~	~100%	~80%	~80%	~100%	~94%	~100%	~94%	~	~94%
NO	2 6%	18 3%	~	~	~14%	~	~4%	~	~	~	~	~20%	~20%	~	~6%	~	~	~	~6%
NOT ANSWERED	1	12			1							1		1		1		1	
VALID CASES	34	600		2	5	14	13	23				3	5	10	24	31	3		34
NUMBER OF RESPONDENTS	35	612		2	5	15	13	23				3	6	10	25	31	4	1	34
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%		100%

[ASKED IF Q63 = YES AND Q64 = YES]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q66 YES	34 12%	575 12%	~	3 6%	9 11%	13 16%	9 12%	21 13%	1 17%	2 17%	~	~	1 5%	8 26%	10 8%	24 15%	32 12%	2 15%	7 3%*	27 44%*
NO	252 88%	4353 88%	~	46 94%	72 89%	67 84%	67 88%	138 87%	5 83%	10 83%	6 100%	2 100%	20 95%	23 74%	109 92%	139 85%	240 88%	11 85%	217 97%*	35 56%*
NOT ANSWERED	26	435		5	7	7	7	4	1						4		4		25	1
VALID CASES	286	4928		49	81	80	76	159	6	12	6	2	21	31	119	163	272	13	224	62
NUMBER OF RESPONDENTS	312 100%	5363 100%		54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q67 YES	23 70%	448 80%	~	2 67%	4 44%	9 75%	8 89%	15 75%	~	~	~	~	1 ~100%	6 75%	7 70%	16 70%	22 71%	1 50%	1 14%	22 85%
NO	10 30%	112 20%	~	1 33%	5 56%	3 25%	1 11%	5 25%	1 100%	2 100%	~	~	~	2 25%	3 30%	7 30%	9 29%	1 50%	6 86%	4 15%
NOT ANSWERED	1	21				1	1								1	1			1	
VALID CASES	33	560		3	9	12	9	20	1	2			1	8	10	23	31	2	7	26
NUMBER OF RESPONDENTS	34	581		3	9	13	9	21	1	2			1	8	10	24	32	2	7	27
	100%	100%		100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q66 = YES]

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q68 YES	21 91%	439 97%	~100%	~100%	89%	88%	93%	~	~	~	~100%	83%	6	15	86%	94%	91%	100%	21 ~ 95%
NO	2 9%	14 3%	~	~	~11%	12%	7%	~	~	~	~	~17%	1	1	14%	6%	9%	~100%	1 5%
NOT ANSWERED		3																	
VALID CASES	23	453	2	4	9	8	15					1	6	7	16	22	1	1	22
NUMBER OF RESPONDENTS	23	456	2	4	9	8	15					1	6	7	16	22	1	1	22
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q66 = YES AND Q67 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC	
Q69 YES	21 7%	459 9%	~	3 6%	7 9%	7 9%	4 5%	15 9%	~	1 8%	~	~	2 10%	3 10%	5 4%	16 10%	20 7%	1 8%	5 2%*	16 26%*
NO	266 93%	4495 91%	~	46 94%	73 91%	73 91%	74 95%	147 91%	5 100%	11 92%	6 100%	2 100%	19 90%	27 90%	114 96%	148 90%	253 93%	12 92%	220 98%*	46 74%*
NOT ANSWERED	25	409		5	8	7	5	1	2				1		3		3		24	1
VALID CASES	287	4954		49	80	80	78	162	5	12	6	2	21	30	119	164	273	13	225	62
NUMBER OF RESPONDENTS	312 100%	5363 100%		54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q70 YES	18 86%	314 71%	3 ~100%	5 71%	7 100%	3 75%	14 93%	~	~	~	~	1 50%	3 100%	4 80%	14 88%	17 85%	1 100%	2 40%	16 100%
NO	3 14%	129 29%	~	2 29%	~	1 25%	1 7%	1 100%	~	~	~	1 50%	~	1 20%	2 12%	3 15%	~	3 60%	~
NOT ANSWERED		20																	
VALID CASES	21	442	3	7	7	4	15	1				2	3	5	16	20	1	5	16
NUMBER OF RESPONDENTS	21 100%	462 100%	3 100%	7 100%	7 100%	4 100%	15 100%	1 100%				2 100%	3 100%	5 100%	16 100%	20 100%	1 100%	5 100%	16 100%

[ASKED IF Q69 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q71 YES	15 94%	260 95%	~100%	~100%	~100%	~67%	12 92%	~	~	~	~	~100%	1 100%	2 100%	3 100%	12 92%	15 94%	~	15 94%
NO	1 6%	14 5%	~	~	~	~33%	1 8%	~	~	~	~	~	~	~	1 8%	1 6%	~	1 6%	
NOT ANSWERED	2	7	1		1		1						1	1	1	1	1	2	
VALID CASES	16	274	2	5	6	3	13					1	2	3	13	16		16	
NUMBER OF RESPONDENTS	18 100%	281 100%	3 100%	5 100%	7 100%	3 100%	14 100%					1 100%	3 100%	4 100%	14 100%	17 100%	1	2 100%	16 100%

[ASKED IF Q69 = YES AND Q70 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q72 YES	39 14%	722 15%	~	2 4%~	8 10%	17 21%*	12 15%	27 17%	2 40%~	~	~	~	3 14%~	5 17%~	11 9%	28 17%*	36 13%~	3 23%~	6 3%*	33 53%*
NO	245 86%	4209 85%	~	47 96%~	69 90%	63 79%*	66 85%	134 83%	3 60%~	12 100%~	6 100%~	2 100%~	18 86%~	24 83%~	105 91%	136 83%*	234 87%~	10 77%~	216 97%*	29 47%*
NOT ANSWERED	28	432		5	11	7	5	2	2				2	3	3	6		27	1	
VALID CASES	284	4931		49	77	80	78	161	5	12	6	2	21	29	116	164	270	13	222	62
NUMBER OF RESPONDENTS	312 100%	5363 100%		54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q73 YES	32 86%	612 90%	~	50%	71%	94%	92%	21 81%	1 100%	~	~	~	3 100%	5 100%	9 82%	23 88%	30 88%	2 67%	32 100%
NO	5 14%	68 10%	~	50%	29%	6%	8%	5 19%	~	~	~	~	~	~	2 18%	3 12%	4 12%	1 33%	5 100%
NOT ANSWERED	2	39			1	1		1	1						2	2		1	1
VALID CASES	37	680		2	7	16	12	26	1			3	5	11	26	34	3	5	32
NUMBER OF RESPONDENTS	39	719		2	8	17	12	27	2			3	5	11	28	36	3	6	33
	100%	100%		100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q72 = YES]

NQ74 WHAT IS YOUR CHILD'S AGE?

	FMCA TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- AMR	IAN	NATV HAW/ ILND	AMR IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC
NQ74 LESS THAN 1 YEAR OLD		27 0.5%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
1 TO 3 YEARS OLD	54 17%	890 17%	54 ~100%	~	~	~	32 20%	2 29%	1 8%	1 17%	1 50%	5 24%	5 16%	23 19%	28 17%	51 18%	7 11%	47 19%	7 11%
4 TO 7 YEARS OLD	88 28%	1394 26%	~	88 ~100%	~	~	48 29%	2 29%	2 17%	1 17%	1 50%	7 33%	11 35%	33 28%	48 29%	79 29%	2 15%	73 29%	15 24%
8 TO 12 YEARS OLD	87 28%	1563 29%	~	~	87 ~100%	~	41 25%	2 29%	3 25%	2 33%	~	4 19%	7 23%	38 32%	40 24%	75 27%	4 31%	67 27%	20 32%
13 OR OLDER	83 27%	1489 28%	~	~	~	83 ~100%	42 26%	1 14%	6 50%	2 33%	~	5 24%	8 26%	25 21%	51 31%	71 26%	7 54%	62 25%	21 33%
VALID CASES	312	5363	54	88	87	83	163	7	12	6	2	21	31	119	167	276	13	249	63
NUMBER OF RESPONDENTS	312 100%	5363 100%	54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

NQ75 IS YOUR CHILD MALE OR FEMALE?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
NQ75 MALE	176 56%	2755 51%	34 ~ 63%	52 59%	47 54%	43 52%	95 58%	3 43%~	9 75%~	5 83%~	1 50%~	12 57%~	17 55%~	63 53%	100 60%	158 57%~	6 46%~	130 52%*	46 73%*
FEMALE	136 44%	2608 49%	20 ~ 37%	36 41%	40 46%	40 48%	68 42%	4 57%~	3 25%~	1 17%~	1 50%~	9 43%~	14 45%~	56 47%	67 40%	118 43%~	7 54%~	119 48%*	17 27%*
VALID CASES	312	5363	54	88	87	83	163	7	12	6	2	21	31	119	167	276	13	249	63
NUMBER OF RESPONDENTS	312 100%	5363 100%	54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q76																			
HISPANIC OR LATINO	119 42%	2091 42%	23 ~ 45%	33 41%	38 49%	25 33%	48 30%*	1 14%~	1 ~ 17%~	1 50%~	18 86%~	7 23%~	119 100%~		111 ~ 41%~	7 58%~	101 45%*	18 29%*	
NOT HISPANIC OR LATINO	167 58%	2832 58%	28 ~ 55%	48 59%	40 51%	51 67%	114 70%*	6 86%~	12 100%~	5 83%~	1 50%~	3 14%~	24 77%~	167 100%~	162 59%~	5 42%~	122 55%*	45 71%*	
NOT ANSWERED	26	440	3	7	9	7	1								3	1	26		
VALID CASES	286	4923	51	81	78	76	162	7	12	6	2	21	31	119	167	273	12	223	63
NUMBER OF RESPONDENTS	312 100%	5363 100%	54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

		AGE					RACE							ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q77.1 YES	193 62%	3570 67%	37 ~ 69%	58 66%	48 55%	50 60%	163 100%	~	~	~	~	~	30 ~ 97%	55 46%*	137 82%*	187 68%~	5 38%~	140 56%*	53 84%*
NO	119 38%	1793 33%	17 ~ 31%	30 34%	39 45%	33 40%	7 ~100%	12 ~100%	6 ~100%	2 ~100%	21 ~100%	1 ~ 3%	64 54%*	30 18%*	89 32%~	8 62%~	109 44%*	10 16%*	
VALID CASES	312	5363	54	88	87	83	163	7	12	6	2	21	31	119	167	276	13	249	63
NUMBER OF RESPONDENTS	312 100%	5363 100%	54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q77.2 YES	19 6%	230 4%	~	4 7%	7 8%	5 6%	3 4%	7 ~100%	~	~	~	~	12 ~39%	2 2%*	17 10%*	19 7%~	~	13 5%	6 10%	
NO	293 94%	5133 96%	~	50 93%	81 92%	82 94%	80 96%	163 100%	12 ~100%	6 ~100%	2 ~100%	21 ~100%	19 61%~	117 98%*	150 90%*	257 93%~	13 100%~	236 95%	57 90%	
VALID CASES	312	5363		54	88	87	83	163	7	12	6	2	21	31	119	167	276	13	249	63
NUMBER OF RESPONDENTS	312 100%	5363 100%		54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

			AGE					RACE							ETHNIC-ITY	HEALTH STATUS	CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q77.3 YES	17 5%	201 4%	~	3 6%	4 5%	3 3%	7 8%	~	12 ~100%	~	~	~	5 ~16%	~	17 ~10%	17 6%	~	15 6%	2 3%	
NO	295 95%	5162 96%	~	51 94%	84 95%	84 97%	76 92%	163 100%	7 100%	6 ~100%	2 ~100%	21 ~100%	26 84%	119 100%	150 90%*	259 94%	13 100%	234 94%	61 97%	
VALID CASES	312	5363		54	88	87	83	163	7	12	6	2	21	31	119	167	276	13	249	63
NUMBER OF RESPONDENTS	312 100%	5363 100%		54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

		AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q77.4	FMCA TOT CHLD																		
YES	9 3%	82 2%	2 ~ 4%	2 2%	2 2%	3 4%	~	~	6 ~100%	~	3 ~ 10%	2 2%	7 4%	9 3%	~	8 3%	1 2%		
NO	303 97%	5281 98%	52 ~ 96%	86 98%	85 98%	80 96%	163 100%	7 100%	12 ~100%	~	2 ~100%	21 100%	28 90%	117 98%	160 96%	267 97%	13 100%	241 97%	62 98%
VALID CASES	312	5363	54	88	87	83	163	7	12	6	2	21	31	119	167	276	13	249	63
NUMBER OF RESPONDENTS	312 100%	5363 100%	54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

		AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
Q77.5	FMCA TOT CHLD																		
YES	10 3%	275 5%*	4 ~ 7%	3 3%	2 2%	1 1%	~	~	~	2 ~100%	8 ~ 26%	4 3%	6 4%	9 3%	1 8%	10 4%*	~	~	~
NO	302 97%	5088 95%*	50 ~ 93%	85 97%	85 98%	82 99%	163 100%	7 100%	12 100%	6 100%	21 ~100%	23 74%	115 97%	161 96%	267 97%	12 92%	239 96%*	63 100%	~
VALID CASES	312	5363	54	88	87	83	163	7	12	6	2	21	31	119	167	276	13	249	63
NUMBER OF RESPONDENTS	312 100%	5363 100%	54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

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

		AGE					RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q77.6	FMCA TOT CHLD																		
YES	29 9%	519 10%	6 ~ 11%	9 10%	6 7%	8 10%	~	~	~	~	21 ~100%	8 ~ 26%	22 18%*	7 4%*	27 10%~	2 15%~	23 9%	6 10%	
NO	283 91%	4844 90%	48 ~ 89%	79 90%	81 93%	75 90%	163 100%	7 ~100%	12 ~100%	6 ~100%	2 ~100%	23 ~ 74%	97 82%*	160 96%*	249 90%~	11 85%~	226 91%	57 90%	
VALID CASES	312	5363	54	88	87	83	163	7	12	6	2	21	31	119	167	276	13	249	63
NUMBER OF RESPONDENTS	312 100%	5363 100%	54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

Q78 WHAT IS YOUR AGE?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q78 UNDER 18	10 3%	223 5%	~	~	1% 6%	5% 5%	4% 5%	7% 4%	1% 14%~	1% 8%~	~	~	~	~	~	0.8%* 4%	7% 4%	9% 3%~	~	6% 3%	4% 6%
18 TO 24	16 6%	229 5%	~	14% 27%*	1% 1%*	~	1% 1%*	9% 6%	~	8%~	~	50%~	5%~	10%~	3% 5%	6% 6%	16% 6%~	~	15% 7%*	1% 2%*	
25 TO 34	92 32%	1610 33%	~	23% 45%*	42% 52%*	21% 27%	6% 8%*	55% 34%	3% 43%~	1% 8%~	3% 50%~	1% 50%~	7% 33%~	8% 26%~	43% 36%	48% 29%	91% 33%~	1% 8%~	80% 36%*	12% 19%*	
35 TO 44	110 38%	1842 37%	~	11% 22%*	27% 33%	41% 53%*	31% 40%	59% 36%	2% 29%~	5% 42%~	2% 33%~	~	7% 33%~	11% 35%~	50% 42%	60% 36%	102% 37%~	7% 58%~	87% 39%	23% 37%	
45 TO 54	45 16%	718 15%	~	2%* 7%*	6% 7%*	10% 13%	28% 36%*	24% 15%	~	2% 17%~	1% 17%~	~	5% 24%~	8% 26%~	15% 13%	30% 18%	42% 15%~	3% 25%~	28% 13%*	17% 27%*	
55 TO 64	13 5%	213 4%	~	2% 4%	3% 4%	~	8% 10%*	8% 5%	~	2% 17%~	~	~	1% 5%~	1% 3%~	3% 3%	10% 6%	12% 4%~	1% 8%~	8% 4%	5% 8%	
65 TO 74	1 0.3%	77 2%*	~	~	1% 1%	~	~	~	14%~	~	~	~	~	~	~	~	~	~	~	1% 2%~	
75 OR OLDER	15 0.3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NOT ANSWERED	25	436	~	3	7	10	5	1	~	~	~	~	~	~	~	~	3	1	25	~	
VALID CASES	287	4927	~	51	81	77	78	162	7	12	6	2	21	31	118	166	273	12	224	63	
NUMBER OF RESPONDENTS	312	5363	~	54	88	87	83	163	7	12	6	2	21	31	119	167	276	13	249	63	
	100%	100%	~	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q79 ARE YOU MALE OR FEMALE?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER													
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC											
Q79																															
MALE	34 12%	657 13%	~	6%	15%	9%	15%	15%	9%	2	17%	1	17%	1	50%	5	25%	6	19%	12	10%	22	13%	31	11%	3	23%	27	12%	7	11%
FEMALE	255 88%	4307 87%	~	94%	85%	91%	85%	148	7	10	83%	5	83%	1	50%	15	75%	25	81%	105	90%	145	87%	243	89%	10	77%	199	88%	56	89%
NOT ANSWERED	23	399		3	7	9	4								1							2		2				23			
VALID CASES	289	4964		51	81	78	79	163	7	12	6	2	20	31	117	167	274	13	226	63				274	100%	13	100%	226	100%	63	100%
NUMBER OF RESPONDENTS	312 100%	5363 100%		54	88	87	83	163	7	12	6	2	21	31	119	167	276	13	249	63				276	100%	13	100%	249	100%	63	100%

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q80																				
8TH GRADE OR LESS	36 13%	618 13%	~	1 2%*	10 13%	14 18%	11 14%	10 6%*	~	1 8%~	1 17%~	9 ~	1 43%~	30 26%*	5 3%*	31 11%~	4 36%~	30 14%	6 10%	
SOME HIGH SCHOOL BUT DID NOT GRADUATE	24 8%	624 13%*	~	6 12%	5 6%	6 8%	7 9%	10 6%	1 14%~	1 8%~	~	3 ~	14%~	19 ~	5 3%*	21 8%~	3 27%~	20 9%	4 6%	
HIGH SCHOOL GRADUATE OR GED	86 30%	1385 28%	~	17 34%	30 37%	18 23%	21 27%	46 28%	3 43%~	5 42%~	4 67%~	1 50%~	5 24%~	7 23%~	41 36%	45 27%	86 32%~	75 ~	11 34%*	17%*
SOME COLLEGE OR 2-YEAR DEGREE	91 32%	1555 32%	~	13 26%	24 30%	27 35%	27 35%	60 37%*	2 29%~	3 25%~	1 17%~	~	1 5%~	17 57%~	16 14%*	72 43%*	86 32%~	4 36%~	65 29%	26 41%
4-YEAR COLLEGE GRADUATE	33 12%	470 10%	~	9 18%	7 9%	9 12%	8 10%	23 14%	1 14%~	2 17%~	~	1 50%~	2 10%~	4 13%~	8 7%*	25 15%*	33 12%~	21 ~	12 9%	19%
MORE THAN 4-YEAR COLLEGE DEGREE	15 5%	246 5%	~	4 8%	4 5%	3 4%	4 5%	13 8%*	~	~	~	~	1 5%~	1 3%~	1 0.9%*	14 8%*	15 6%~	11 ~	4 5%	6%
NOT ANSWERED	27	466		4	8	10	5	1					1	4	1	4	2	27		
VALID CASES	285	4897		50	80	77	78	162	7	12	6	2	21	30	115	166	272	11	222	63
NUMBER OF RESPONDENTS	312	5363		54	88	87	83	163	7	12	6	2	21	31	119	167	276	13	249	63
	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q81 HOW ARE YOU RELATED TO THE CHILD?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV ILND	AMER PAC ALSK	IND/ OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q81																				
MOTHER OR FATHER	276 96%	4614 94%*	~	98%	96%	96%	95%	155 96%	6 86%	12 100%	5 83%	2 100%	19 95%	30 97%	117 99%*	156 95%	262 96%	13 100%	223 99%*	53 87%*
GRANDPARENT	5 2%	165 3%*	~	2%	~	3%	3%	4 2%	~	~	~	~	~	1 3%	1 0.8%	3 2%	4 1%	~	1 ~0.4%	4 7%
AUNT OR UNCLE	1 0.3%	19 0.4%	~	~	~	~	1 1%	~	~	~	1 17%	~	~	~	~	1 ~0.6%	1 0.4%	~	1 ~0.4%	~
OLDER BROTHER OR SISTER		8 0.2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
OTHER RELATIVE		3 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
LEGAL GUARDIAN	2 0.7%	60 1%	~	~	1%	~	1 0.6%	1 ~	~	~	~	~	1 5%	~	~	2 1%	2 0.7%	~	~	2 3%
SOMEONE ELSE	3 1%	41 0.8%	~	~	2%	1%	~	2 1%	1 14%	~	~	~	~	~	~	3 2%	3 1%	~	1 ~0.4%	2 3%
NOT ANSWERED	25	454		4	7	9	5	1					1		1	2	4		23	2
VALID CASES	287	4909		50	81	78	78	162	7	12	6	2	20	31	118	165	272	13	226	61
NUMBER OF RESPONDENTS	312 100%	5363 100%		54 100%	88 100%	87 100%	83 100%	163 100%	7 100%	12 100%	6 100%	2 100%	21 100%	31 100%	119 100%	167 100%	276 100%	13 100%	249 100%	63 100%

Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q82 YES	10 5%	96 3%	~	~	3 6%	3 5%	4 7%	3 3%	~	~	~	~	3 17%	1 7%	8 11%	1 0.9%	8 4%	2 22%	6 4%	4 9%
NO	187 95%	3230 97%	~100%	~94%	~95%	~93%	111 97%	5 100%	11 100%	4 100%	1 100%	15 83%	14 93%	68 89%	115 99%	179 96%	7 78%	147 96%	40 91%	
NOT ANSWERED	2	38				2	1							1	1	2		2		
VALID CASES	197	3326		33	49	55	60	114	5	11	4	1	18	15	76	116	187	9	153	44
NUMBER OF RESPONDENTS	199	3364		33	49	57	60	115	5	11	4	1	18	15	77	117	189	9	155	44
	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

		AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV ILND	AMER IND/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC
Q83.1	FMCA TOT CHLD																		
YES	5 50%	45 50%	~	~	2 67%	3 75%	1 33%	~	~	~	~	3 100%	~	5 63%	~	4 50%	1 50%	3 50%	2 50%
NO	5 50%	44 50%	~	~	1 33%	3 100%	1 25%	2 67%	~	~	~	~	1 100%	3 38%	1 100%	4 50%	1 50%	3 50%	2 50%
VALID CASES	10	89			3	3	4	3				3	1	8	1	8	2	6	4
NUMBER OF RESPONDENTS	10	89			3	3	4	3				3	1	8	1	8	2	6	4
	100%	100%			100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

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

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

		AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC
Q83.2	FMCA TOT CHLD																		
YES	1 28					1						1	1	1	1	1	1	1	1
	10%	31%	~	~	~	25%	~	~	~	~	~	33%	~	12%	~	12%	~	17%	~
NO	9 61			3	3	3	3					2	1	7	1	7	2	5	4
	90%	69%	~	~100%	~100%	75%	~100%	~	~	~	~	67%	~100%	88%	~100%	88%	~100%	83%	~100%
VALID CASES	10 89			3	3	4	3					3	1	8	1	8	2	6	4
NUMBER OF RESPONDENTS	10 89			3	3	4	3					3	1	8	1	8	2	6	4
	100%	100%		100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

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

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

		AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q83.3	FMCA TOT CHLD																		
YES	2 20%	11 12%	~	~	~	1 33%	1 25%	1 33%	~	~	~	~	~	1 100%	1 12%	1 100%	2 25%	~	2 50%
NO	8 80%	78 88%	~	~	3 100%	2 67%	3 75%	2 67%	~	~	~	3 100%	~	7 88%	~	6 75%	2 100%	6 100%	2 50%
VALID CASES	10	89			3	3	4	3				3	1	8	1	8	2	6	4
NUMBER OF RESPONDENTS	10	89			3	3	4	3				3	1	8	1	8	2	6	4
	100%	100%			100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q83.4 YES		19 21%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	10 100%	70 79%	~	~100%	~100%	~100%	~100%	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%
VALID CASES	10	89		3	3	4	3				3	1	8	1	8	2	6	4
NUMBER OF RESPONDENTS	10 100%	89 100%		3 100%	3 100%	4 100%	3 100%				3 100%	1 100%	8 100%	1 100%	8 100%	2 100%	6 100%	4 100%

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

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

		AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC
Q83.5	FMCA TOT CHLD	OHP TOT CHLD																	
YES	1 10%	8 10%	~	~	33%	~	33%	~	~	~	~	~	~	12%	~	12%	~	17%	~
NO	9 90%	81 90%	~	~	67%	100%	100%	~	~	~	~	100%	100%	88%	100%	88%	100%	83%	100%
VALID CASES	10	89																	
NUMBER OF RESPONDENTS	10	89																	
	100%	100%																	

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

NQ14 RATING OF ALL CHILD'S HEALTH CARE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NQ14 0-6	16 8%	329 10%	~	2 5%	2 4%	4 8%	8 16%	7 6%	2 40%	2 29%	~	~	1 6%	1 5%	6 8%	10 9%	13 7%	3 33%	10 7%	6 12%
7-8	52 26%	1112 32%	~	9 22%	13 25%	15 29%	15 29%	23 21%	3 60%	2 29%	~	1 50%	8 47%	5 24%	24 30%	25 23%	43 24%	6 67%	35 24%	17 35%
9-10	129 65%	2025 58%*	~	30 73%	38 72%	33 63%	28 55%	80 73%*	~	3 43%	1 100%	1 50%	8 47%	15 71%	49 62%	73 68%	123 69%	~	103 70%	26 53%
VALID CASES	197	3466		41	53	52	51	110	5	7	1	2	17	21	79	108	179	9	148	49
NUMBER OF RESPONDENTS	197 100%	3466 100%		41 100%	53 100%	52 100%	51 100%	110 100%	5 100%	7 100%	1 100%	2 100%	17 100%	21 100%	79 100%	108 100%	179 100%	9 100%	148 100%	49 100%
MEAN	2.57	2.49		2.68	2.68	2.56	2.39	2.66	1.60	2.14	3.00	2.50	2.41	2.67	2.54	2.58	2.61	1.67	2.63	2.41
p stat_(*=Sig @ p<=.05)		.055	~	~.159	.835	.038*	.028*	~	~	~	~	~	~	~	.600	.814	~	~	~	~

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NQ41 0-6	17 7%	319 8%	~	3 6%~	5 7%	5 8%	4 7%	9 6%	2 40%~	1 13%~	1 50%~	3 10%~	6 6%	11 8%	17 7%~	~	14 8%	3 5%		
7-8	58 24%	980 23%	~	9 19%~	15 22%	19 29%	15 25%	25 18%*	3 60%~	3 38%~	~	7 44%~	8 26%~	24 24%	33 24%	53 23%~	4 44%~	47 25%	11 20%	
9-10	166 69%	2929 69%	~	36 75%~	47 70%	41 63%	42 69%	105 76%*	4 50%~	2 100%~	1 50%~	9 56%~	20 65%~	69 70%	92 68%	158 69%~	5 56%~	125 67%	41 75%	
VALID CASES	241	4228		48	67	65	61	139	5	8	2	2	16	31	99	136	228	9	186	55
NUMBER OF RESPONDENTS	241 100%	4228 100%		48 100%	67 100%	65 100%	61 100%	139 100%	5 100%	8 100%	2 100%	2 100%	16 100%	31 100%	99 100%	136 100%	228 100%	9 100%	186 100%	55 100%
MEAN	2.62	2.62		2.69	2.63	2.55	2.62	2.69	1.60	2.38	3.00	2.00	2.56	2.55	2.64	2.60	2.62	2.56	2.60	2.69
p stat_(*=Sig @ p<=.05)		.977		~	~.894	.337	.945	.033*	~	~	~	~	~	~	~.703	.516	~	~	~.320	.319

[ASKED IF Q30 = YES]

NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
NQ48 0-6	3 8%	69 10%	~	~	~	~	25%	2 7%	~	~	~	~	~	2 20%	1 4%	1 3%	2 50%	1 6%	2 10%
7-8	8 21%	178 26%	~	10%	11%	43%	25%	6 21%	1 50%	~	~	~	1 50%	8 29%	6 18%	2 50%	2 12%	6 29%	
9-10	27 71%	428 63%	~	90%	89%	57%	50%	21 72%	1 50%	1 100%	~	2 100%	1 50%	8 80%	19 68%	27 79%	~	14 82%	13 62%
VALID CASES	38	675	10	9	7	12	29	2	1			2	2	10	28	34	4	17	21
NUMBER OF RESPONDENTS	38	675	10	9	7	12	29	2	1			2	2	10	28	34	4	17	21
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%
MEAN	2.63	2.53	2.90	2.89	2.57	2.25	2.66	2.50	3.00			3.00	2.50	2.60	2.64	2.76	1.50	2.76	2.52
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

NQ54 RATING OF CHILD'S HEALTH PLAN

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NQ54 0-6	31 11%	619 12%	~	2 4%*	9 11%	8 10%	12 16%	24 15%*	1 17%~	1 9%~	~	~	1 5%~	1 3%~	2 2%*	27 17%*	29 11%~	1 8%~	22 10%	9 15%
7-8	84 29%	1448 29%	~	10 20%	27 33%	22 28%	25 34%	48 30%	3 50%~	5 45%~	~	~	7 33%~	14 47%~	25 21%*	59 36%*	79 29%~	5 42%~	57 25%*	27 44%*
9-10	172 60%	2927 59%	~	39 76%*	46 56%	50 62%	37 50%*	89 55%	2 33%~	5 45%~	6 100%~	2 100%~	13 62%~	15 50%~	90 77%*	76 47%*	162 60%~	6 50%~	146 65%*	26 42%*
VALID CASES	287	4994		51	82	80	74	161	6	11	6	2	21	30	117	162	270	12	225	62
NUMBER OF RESPONDENTS	287 100%	4994 100%		51 100%	82 100%	80 100%	74 100%	161 100%	6 100%	11 100%	6 100%	2 100%	21 100%	30 100%	117 100%	162 100%	270 100%	12 100%	225 100%	62 100%
MEAN	2.49	2.46		2.73	2.45	2.53	2.34	2.40	2.17	2.36	3.00	3.00	2.57	2.47	2.75	2.30	2.49	2.42	2.55	2.27
p stat_(*=Sig @ p<=.05)		.452		~.002*	.531	.601	.025*	.012*	~	~	~	~	~	~	~.000*	.000*	~	~	~.005*	.005*

GETTING NEEDED CARE

		AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NPRBSEE4	NQ46	2.34	2.21	2.60	2.22	2.29	2.27	2.43	2.50	3.00		2.50	1.67	2.17	2.41	2.36	2.20	2.35	2.33	
p stat_(*=Sig @ p<=.05)		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCARNES4	NQ15	2.57	2.44	2.61	2.62	2.60	2.44	2.66	2.20	2.29	2.00	2.50	2.41	2.71	2.44	2.66	2.60	2.11	2.60	2.46
p stat_(*=Sig @ p<=.05)		.005*	~	~.447	.684	.102	.021*	~	~	~	~	~	~	~.024*	.018*	~	~	.216	.218	
COMPOSITE		2.45	2.32	x 2.60	2.42	2.44	2.35	2.55	2.35	2.64	2.00	2.50	2.46	2.19	2.30	2.54	2.48	2.16	2.48	2.40
p stat_(*=Sig @ p<=.05)		.066	~	~.782	.912	.405	.135	~	~	~	~	~	~	~.082	.181	~	~	.618	.666	

GETTING CARE QUICKLY

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
NCARSN4 NQ4	2.66	2.60	2.68	2.62	2.74	2.59	2.76	2.00	3.00		3.00	2.20	2.56	2.56	2.68	2.64	2.50	2.67	2.63
p stat_(*=Sig @ p<=.05)		.409	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NAPGET4 NQ6	2.52	2.43	2.60	2.49	2.53	2.43	2.63	2.25	2.12	1.33	2.00	2.29	2.67	2.47	2.54	2.52	2.38	2.51	2.54
p stat_(*=Sig @ p<=.05)		.079	~	~.770	.877	~	~.019*	~	~	~	~	~	~	~.518	.563	~	~	~	~
COMPOSITE	2.59	2.51	x 2.64	2.55	2.63	2.51	2.69	2.13	2.56	1.33	2.50	2.24	2.61	2.52	2.61	2.58	2.44	2.59	2.59
p stat_(*=Sig @ p<=.05)		.377	~	~.811	.720	~	~.151	~	~	~	~	~	~	~.465	.726	~	~	~	~

HOW WELL DOCTORS COMMUNICATE

		AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
NDREXPL4 NQ32	2.69	2.69	2.83	2.67	2.59	2.70	2.79	2.80	2.67	2.50	3.00	2.53	2.67	2.50	2.82	2.71	2.29	2.69	2.71
p stat_(*=Sig @ p<=.05)	.978		~	~.718	~	~	~.013*	~	~	~	~	~	~	~.001*	.002*	~	~	~	~
NDRLSTN4 NQ33	2.73	2.71	2.72	2.73	2.73	2.76	2.79	2.60	2.33	2.50	1.50	2.87	2.63	2.70	2.74	2.74	2.43	2.73	2.76
p stat_(*=Sig @ p<=.05)	.592		~	~.895	~	~	~.097	~	~	~	~	~	~	~.528	.789	~	~	~	~
NDRESPU4 NQ34	2.79	2.77	2.78	2.82	2.72	2.85	2.83	2.60	2.50	2.50	2.00	2.79	2.83	2.78	2.80	2.79	2.71	2.82	2.71
p stat_(*=Sig @ p<=.05)	.530		~	~.641	~	~	~.226	~	~	~	~	~	~	~.793	.852	~	~	~	~
NDRTMEN4 NQ37	2.45	2.49	2.50	2.48	2.24	2.59	2.64	2.00	2.33	2.00	1.50	2.27	2.54	2.15	2.67	2.46	2.43	2.44	2.49
p stat_(*=Sig @ p<=.05)	.419		~	~.757	~	~	~.000*	~	~	~	~	~	~	~.000*	.000*	~	~	~	~
COMPOSITE	2.67	2.67	x 2.71	2.67	2.57	2.72	2.76	2.50	2.46	2.38	2.00	2.61	2.67	2.53	2.76	2.68	2.46	2.67	2.67
p stat_(*=Sig @ p<=.05)	.992		~	~.979	~	~	~.343	~	~	~	~	~	~	~.348	.369	~	~	~	~

CUSTOMER SERVICE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
NPBCLCS4 NQ50	2.29	2.24		2.60	2.34	2.08	2.12	2.38	3.00	2.33	1.50		1.83	2.09	2.28	2.31	2.31	2.00	2.37	2.00
p stat_(*=Sig @ p<=.05)		.528	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ51	2.60	2.57		2.80	2.69	2.50	2.37	2.55	3.00	3.00	3.00		2.67	2.64	2.56	2.65	2.64	2.00	2.63	2.50
p stat_(*=Sig @ p<=.05)		.625	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.45	2.41	x	2.70	2.52	2.29	2.25	2.46	3.00	2.67	2.25	x	2.25	2.36	2.42	2.48	2.47	2.00	2.50	2.25
p stat_(*=Sig @ p<=.05)		.823	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
NNRXWHY NQ11	2.96	2.88	3.00	3.00	2.87	3.00	2.94	3.00			3.00	3.00	2.89	3.00	2.96	3.00	3.00	2.91
p stat_(*=Sig @ p<=.05)		.035*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NNRXWYNT NQ12	2.44	2.40	2.40	2.50	2.25	2.67	2.64	3.00			2.00	2.14	2.33	2.57	2.51	2.00	2.48	2.39
p stat_(*=Sig @ p<=.05)		.764	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NRXBST NQ13	2.55	2.55	2.27	2.54	2.87	2.38	2.70	3.00			2.00	2.14	2.43	2.64	2.54	2.00	2.47	2.65
p stat_(*=Sig @ p<=.05)		.979	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.65	2.61	x 2.56	2.68	2.67	2.68	2.76	x 3.00	x	x 2.33	2.43	2.55	2.74	2.67	2.33	2.65	2.65	
p stat_(*=Sig @ p<=.05)		.843	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

ACCESS TO SPECIALIZED SERVICES

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
NEZMDEQ NQ20	1.75	2.15		3.00		1.50	1.00	2.50						2.50	2.50		1.00	2.50		
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NEZTHP NQ23	1.93	1.94		1.67	1.80	2.25	2.00		3.00			1.50	1.00	1.71	2.00	1.93		2.33	1.67	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NEZTC NQ26	2.24	2.08		1.67	2.12	2.42	2.30	2.32		1.00		2.67	1.80	2.27	2.23	2.26	2.00	2.11	2.29	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
COMPOSITE	1.98	2.06	x	2.11	1.96	2.06	1.77	2.27	x	3.00	1.00	x	2.08	1.40	1.99	2.24	2.23	2.00	1.81	2.15
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-AMER	AS-IAN	NATV HAW/PAC ILND	AMER IND/ALSK NATV	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
PRBSEE4 Q46	73%	75%		90%	67%	71%	67%	77%	100%	100%			100%	33%	58%	79%	75%	60%	71%	75%
CARNES4 Q15	92%	88%		95%	92%	94%	88%	94%	80%	71%	100%	100%	94%	95%	94%	92%	93%	78%	95%	86%
AVERAGE	82.76	81.22	x	92.56	79.56	82.83	77.33	85.58	90.00	85.71	100.0	100.0	97.06	64.29	76.00	85.45	84.13	68.89	82.55	80.50

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-AMER	AS-IAN	NATV HAW/PAC ILND	AMER IND/ALSK NATV	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
CARSN4 Q4	91%	90%		91%	90%	95%	88%	96%	50%	100%		100%	60%	89%	91%	89%	90%	100%	92%	89%
APGET4 Q6	87%	84%		96%	86%	85%	82%	93%	75%	75%	33%	50%	79%	95%	86%	89%	88%	88%	86%	91%
AVERAGE	89.19	87.16	x	93.37	88.38	89.82	85.03	94.51	62.50	87.50	33.33	75.00	69.29	92.06	88.54	89.02	88.71	93.75	89.15	90.10

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
DREXPL4 Q32	92%	93%	96%	90%	89%	93%	96%	100%	83%	100%	100%	93%	88%	86%	95%	92%	86%	92%	92%
DRLSTN4 Q33	95%	94%	93%	96%	96%	93%	97%	100%	67%	100%	50%	100%	92%	96%	94%	95%	86%	94%	96%
DRESPU4 Q34	96%	95%	96%	96%	96%	98%	98%	100%	83%	100%	50%	100%	96%	97%	95%	97%	86%	96%	96%
DRTMEN4 Q37	85%	86%	85%	86%	78%	89%	91%	60%	83%	50%	50%	87%	92%	76%	92%	85%	100%	84%	86%
AVERAGE	91.9	92.0	x 92.4	92.1	89.6	93.5	95.6	90.0	79.2	87.5	62.5	95.0	91.7	88.8	94.0	92.1	89.3	91.7	92.3

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-AMER	AS-IAN	NATV HAW/PAC ILND	AMER IND/ALSK NATV	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
PBCLCS4 Q50	80%	77%		90%	79%	77%	75%	78%	100%	100%	50%		67%	73%	85%	78%	80%	100%	85%	65%	
CSRESP Q51	95%	91%		100%	97%	88%	94%	92%	100%	100%	100%		100%	91%	95%	94%	94%	100%	96%	90%	
AVERAGE	87.36	83.89	x	95.00	87.93	82.69	84.38	85.08	100.0	100.0	75.00		x	83.33	81.82	89.74	85.71	87.06	100.0	90.14	77.50

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NRXWHY Q11	98%	94%	100%	100%	94%	100%	97%	100%			100%	100%	94%	100%	98%	100%	100%	96%		
NRXWYNT Q12	72%	70%	70%	75%	63%	83%	82%	100%			50%	57%	67%	79%	76%	50%	74%	70%		
RXBST Q13	77%	78%	64%	77%	94%	69%	85%	100%			50%	57%	71%	82%	77%	50%	73%	83%		
AVERAGE	82.5	80.5	x	77.9	84.0	83.3	84.2	87.9	x	100	x	x	66.7	71.4	77.5	86.9	83.5	66.7	82.5	82.6

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV ILND	AMER IND/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
EZMDEQ Q20	50%	70%	100%		50%	0%	100%							100%		100%	0%	100%		
EZTHP Q23	67%	61%	67%	60%	75%	67%	78%		100%			50%	0%	57%	71%	67%	83%	56%		
EZTC Q26	76%	67%	33%	75%	83%	80%	82%			0%		100%	40%	82%	73%	77%	50%	67%	79%	
AVERAGE	64.1	66.1	x	66.7	67.5	69.4	48.9	86.5	x	100		x	75.0	20.0	69.5	81.4	81.4	50.0	50.0	78.2

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- AMER	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
DRTLKU Q38	88%	84%		93%	92%	83%	85%	91%	80%	83%	50%	100%	80%	92%	89%	87%	89%	71%	88%	90%
DRUNCON Q43	82%	89%		56%	90%	86%	88%	85%	100%			0%	100%	78%	87%	80%	85%	33%	77%	84%
DRUNFAM Q44	81%	84%		56%	80%	91%	81%	79%	100%			0%	100%	89%	73%	83%	81%	67%	85%	80%
AVERAGE	83.8	85.5	x	68.2	87.3	86.6	84.5	84.9	93.3	83.3	50.0	33.3	93.3	86.1	83.1	83.5	84.9	57.1	83.1	84.5

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

		AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
FMCA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
HELPCONT Q18	100%	94%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	
HLPCOORD Q29	62%	60%	70%	70%	50%	60%	58%	100%			100%	80%	57%	65%	63%	50%	62%	63%
AVERAGE	81.1	76.8	x 85.0	85.0	75.0	80.0	79.0	100	100	100	x 100	90.0	78.6	82.3	81.4	50.0	81.0	81.3

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

2. YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

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

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

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

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

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

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

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

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

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

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

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

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3. YOUR PERSONAL DOCTOR

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

4. GETTING HEALTH CARE FROM SPECIALISTS

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

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5. YOUR HEALTH PLAN

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

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

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

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

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

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

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

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

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

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

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

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

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5. ADDITIONAL QUESTIONS

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

5. ACCESS TO DENTAL CARE

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

3. SPECIALIZED SERVICES

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

PAGE QUESTION TITLE

4. YOUR CHILD'S PERSONAL DOCTOR

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

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

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

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

5. GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

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

6. YOUR CHILD'S HEALTH PLAN

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

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

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

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

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

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

PAGE QUESTION TITLE

7. PRESCRIPTION MEDICINES

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

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

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

7. ACCESS TO DENTAL CARE

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

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

7. ADDITIONAL QUESTIONS

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

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

8. ABOUT YOUR CHILD AND YOU

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

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

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

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

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

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

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

91 Q78 WHAT IS YOUR AGE?

92 Q79 ARE YOU MALE OR FEMALE?

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

94 Q81 HOW ARE YOU RELATED TO THE CHILD?

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

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

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

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

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

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

PAGE QUESTION TITLE

9. RATINGS

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

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

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

104 NQ54 RATING OF CHILD'S HEALTH PLAN

10. COMPOSITES

105 GETTING NEEDED CARE

106 GETTING CARE QUICKLY

107 HOW WELL DOCTORS COMMUNICATE

108 CUSTOMER SERVICE

109 SHARED DECISION MAKING
110 ACCESS TO SPECIALIZED SERVICES

11. GLOBAL PROPORTION COMPOSITES

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

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

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

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

SURVEY INSTRUCTIONS

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

Correct
Mark 

Incorrect
Marks   

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

- Yes → *Go to Question 1*
- No

↓ **START HERE** ↓

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

- Yes → *Go to Question 3*
- No

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

YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

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

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

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

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

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

- Never
 Sometimes
 Usually
 Always

YOUR PERSONAL DOCTOR

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

- Yes
 No → *Go to Question 24*

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

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

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

- Never
 Sometimes
 Usually
 Always

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

- Never
 Sometimes
 Usually
 Always

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

- Never
 Sometimes
 Usually
 Always

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

- Never
 Sometimes
 Usually
 Always

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

- Yes
 No → *Go to Question 23*

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

- Never
 Sometimes
 Usually
 Always

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

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



GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

- Yes
 No → *Go to Question 28*

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

- Never
 Sometimes
 Usually
 Always

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

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

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

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

YOUR HEALTH PLAN

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

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

- Yes
 No → *Go to Question 30*

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

- Never
 Sometimes
 Usually
 Always

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

- Yes
 No → *Go to Question 33*

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

- Never
 Sometimes
 Usually
 Always

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

- Never
 Sometimes
 Usually
 Always

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

- Yes
 No → *Go to Question 35*

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

- Yes
- No

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

- Yes
- No

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

- Never
- Sometimes
- Usually
- Always

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes, definitely
- Yes, somewhat
- No

ACCESS TO DENTAL CARE

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

- Yes
- No

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

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

ABOUT YOU

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

- Excellent
- Very Good
- Good
- Fair
- Poor

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

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

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

- Yes
- No → **Go to Question 50**

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

- Yes
- No

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

- Yes
- No → **Go to Question 52**

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

- Yes
- No

52. What is your age?

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

53. Are you male or female?

- Male
- Female

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

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

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

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

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

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

57. Did someone help you complete this survey?

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

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

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

THANK YOU

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

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

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



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

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

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Correct
Mark 

Incorrect
Marks



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

- Yes ➔ *Go to Question 1*
- No

↓ **START HERE** ↓

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

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

YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS

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

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

Yes
 No → *Go to Question 5*

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

Never
 Sometimes
 Usually
 Always

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

Yes
 No → *Go to Question 7*

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

Never
 Sometimes
 Usually
 Always

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

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

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

Yes
 No

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

Never
 Sometimes
 Usually
 Always

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

Yes
 No → *Go to Question 14*

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

Yes
 No

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

- Yes
- No

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

- Yes
- No

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No

SPECIALIZED SERVICES

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

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

- Yes
- No → *Go to Question 22*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 25*



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 28*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 30*

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

- Yes
- No

YOUR CHILD'S PERSONAL DOCTOR

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

- Yes
- No → *Go to Question 45*

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 37*

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 41*

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

- Never
- Sometimes
- Usually
- Always

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

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

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

- Yes
- No → *Go to Question 45*



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

- Yes
- No

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

- Yes
- No

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

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

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

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

GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

- Yes
- No → **Go to Question 49**

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

- Never
- Sometimes
- Usually
- Always

YOUR CHILD'S HEALTH PLAN

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

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

- Yes
- No → **Go to Question 52**

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

- Never
- Sometimes
- Usually
- Always



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 54*

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

- Never
- Sometimes
- Usually
- Always

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

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

PRESCRIPTION MEDICINES

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

- Yes
- No → *Go to Question 57a*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

ACCESS TO DENTAL CARE

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

- Yes
- No

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

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



ADDITIONAL QUESTIONS

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

- Yes
- No → *Go to Question 58*

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

- Yes
- No

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

- Yes
- No

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

ABOUT YOUR CHILD AND YOU

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Yes
- No → *Go to Question 63*

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

- Yes
- No → *Go to Question 63*

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

- Yes
- No

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

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



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

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

78. What is your age?

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

79. Are you male or female?

- Male
- Female

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

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

81. How are you related to the child?

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

82. Did someone help you complete this survey?

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

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

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

THANK YOU

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

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

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







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

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INSTRUCCIONES PARA EL CUESTIONARIO

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

Marca
Correcta ●

Marca
Incorrecta 

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

● Sí → *Pase a la Pregunta 1*
○ No

↓ **COMIENCE AQUI** ↓

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

- Sí → *Pase a la pregunta 3*
- No

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

LA ATENCIÓN MÉDICA QUE USTED RECIBIÓ EN LOS ÚLTIMOS 6 MESES

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

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

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

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

- Sí
- No → *Pase a la pregunta 35c*

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

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

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

- Sí
- No → *Pase a la pregunta 35e*

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

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

PREGUNTAS ADICIONALES

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

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

- Sí
- No → *Pase a la pregunta 35i*

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

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

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 35l*

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

- Sí
- No

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

- Sí
- No

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

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

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

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

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

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

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

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

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

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

- Sí, definitivamente
- Sí, algo
- No

ACCESO A CUIDADO DENTAL

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

- Sí
- No

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

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

ACERCA DE USTED

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Sí
- No
- No sé

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

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

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

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

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

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

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

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

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

- Sí
- No

52. ¿Qué edad tiene?

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

53. ¿Es usted hombre o mujer?

- Hombre
- Mujer

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

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

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

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

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

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

57. ¿Le ayudó alguien a completar esta encuesta?

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

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

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

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

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

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





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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?

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

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

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

16. ¿Está matriculado actualmente su niño en algún tipo de escuela o guardería/cuidado infantil?

- Sí
- No → *Pase a la pregunta 19*

17. En los últimos 6 meses, ¿necesitó que los doctores o los otros profesionales médicos de su niño se pusieran en contacto con una escuela o guardería acerca de la salud o la atención médica de su niño?

- Sí
- No → *Pase a la pregunta 19*

18. En los últimos 6 meses, ¿consiguió la ayuda de los doctores o los otros profesionales médicos de su niño que necesitaba para ponerse en contacto con la escuela o guardería de su niño?

- Sí
- No

SERVICIOS ESPECIALIZADOS

19. En el equipo o dispositivo médico especial se incluye un andador, silla de ruedas, nebulizador, tubos de alimentación o equipo de oxígeno. En los últimos 6 meses, ¿consiguió o intentó conseguir algún equipo o dispositivo médico especial para su niño?

- Sí
- No → *Pase a la pregunta 22*

20. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir equipo o dispositivos médicos especiales para su niño?

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

21. ¿Alguien del plan de salud, del consultorio médico o clínica de su niño le ayudó a conseguir el equipo o dispositivos médicos especiales para su niño?

- Sí
- No

22. En los últimos 6 meses, ¿consiguió o intentó conseguir terapia especial para su niño tal como terapia física, ocupacional o del habla?

- Sí
- No → *Pase a la pregunta 25*

23. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir esta terapia para su niño?

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

24. ¿Alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a conseguir esta terapia para su niño?

- Sí
- No

25. En los últimos 6 meses, ¿consiguió o intentó conseguir tratamiento o consejería para su niño, para un problema emocional, de desarrollo o de comportamiento?

- Sí
- No → *Pase a la pregunta 28*

26. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir este tratamiento o consejería para su niño?

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

27. ¿Alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a conseguir este tratamiento o consejería para su niño?

- Sí
- No

28. En los últimos 6 meses, ¿recibió su niño atención de más de un tipo de profesional médico, o usó más de un tipo de servicio de salud?

- Sí
- No → *Pase a la pregunta 30*

29. En los últimos 6 meses, ¿alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a coordinar la atención médica de su niño entre estos profesionales o servicios diferentes?

- Sí
- No

EL DOCTOR PERSONAL DE SU NIÑO

30. El doctor personal es aquel a quien su niño va si necesita un chequeo, tiene un problema de salud o si se enferma o lastima. ¿Tiene su niño un doctor personal?

- Sí
- No → *Pase a la pregunta 45*

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

- Ninguna vez → *Pase a la pregunta 41*
- 1 vez
- 2
- 3
- 4
- 5 a 9
- 10 veces o más

31a. En los últimos 6 meses, ¿con qué frecuencia se le hizo difícil hablar o entender al doctor personal de su niño porque hablaban idiomas diferentes?

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

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

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

33. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño le escuchó a usted con atención?

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

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

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

35. ¿Su niño puede hablar con los doctores sobre su atención médica?

- Sí
- No → *Pase a la pregunta 37*

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

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



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

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

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 41*

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 45*

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

- Sí
- No

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

- Sí
- No



LA ATENCIÓN MÉDICA QUE RECIBIÓ DE ESPECIALISTAS

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

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

- Sí
- No → *Pase a la pregunta 49*

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

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

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

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

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

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

EL PLAN DE SALUD DE SU NIÑO

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

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

- Sí
- No → *Pase a la pregunta 52*

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 54*

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

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

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

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

MEDICINAS RECETADAS

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

- Sí
- No → *Pase a la pregunta 57a*

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

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

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

- Sí
- No

ACCESO A CUIDADO DENTAL

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

- Sí
- No

57b. En los últimos 6 meses, si su niño necesitó ver a un dentista de inmediato por una emergencia dental, ¿el/ella pudo ver a un dentista tan pronto como usted quería?

- Nunca
- A veces
- La mayoría de las veces
- Siempre
- Mi niño no tuvo una emergencia dental en los últimos 6 meses

PREGUNTAS ADICIONALES

57c. Las opciones de tratamiento o atención médica para su niño pueden incluir opciones sobre medicinas, cirugía u otro tratamiento.

En los últimos 6 meses, ¿le dijo su profesional médico que había más de una opción para el tratamiento o atención médica de su niño?

- Sí
- No → *Pase a la pregunta 58*

57d. En los últimos 6 meses, ¿le habló su profesional médico acerca de las cosas buenas y las cosas malas de cada opción de tratamiento o de atención médica de su niño?

- Sí
- No

57e. En los últimos 6 meses, cuando había más de una opción de tratamiento o de atención médica para su niño, ¿su profesional médico le preguntó cuál opción le convenía más a su niño?

- Sí
- No

57f. En los últimos 6 meses, ¿con qué frecuencia su profesional médico considero y respeto las opciones de atención médica que usted penso funcionarían mejor para su niño?

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

57g. En los últimos 6 meses, ¿con qué frecuencia el profesional médico de su niño le animo a usted a hacer preguntas y plantear inquietudes?

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

57h. En los últimos 6 meses, ¿con qué frecuencia el profesional médico de su niño le hizo fácil a usted el hacer preguntas y plantear inquietudes?

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

ACERCA DE USTED Y DE SU NIÑO

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Sí
- No → *Pase a la pregunta 63*

61. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?
- Sí
 No → *Pase a la pregunta 63*
62. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?
- Sí
 No
63. ¿Necesita o usa su niño más servicios médicos, de salud mental o educativos de lo que es normal para la mayoría de los niños de la misma edad?
- Sí
 No → *Pase a la pregunta 66*
64. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?
- Sí
 No → *Pase a la pregunta 66*
65. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?
- Sí
 No
66. ¿Está su niño limitado o impedido de alguna manera en su habilidad de hacer lo que pueden hacer la mayoría de los niños de la misma edad?
- Sí
 No → *Pase a la pregunta 69*

67. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?
- Sí
 No → *Pase a la pregunta 69*
68. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?
- Sí
 No
69. ¿Necesita o recibe su niño terapia especial, tal como terapia física, ocupacional o del habla?
- Sí
 No → *Pase a la pregunta 72*
70. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?
- Sí
 No → *Pase a la pregunta 72*
71. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?
- Sí
 No
72. ¿Tiene su niño algún problema emocional, de desarrollo o de comportamiento, para el cual necesita o recibe tratamiento o consejería?
- Sí
 No → *Pase a la pregunta 74*
73. ¿Ha durado este problema o se espera que dure por lo menos 12 meses?
- Sí
 No

74. ¿Qué edad tiene su niño?

Menos de un año

AÑOS (escriba la respuesta)

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

Masculino

Femenino

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

Sí, hispano o latino

No, ni hispano ni latino

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

Blanca

Negra o afroamericana

Asiática

Nativo de Hawái o de otras islas del Pacífico

Indígena americano o nativo de Alaska

Otra (Por favor escriba en letra de molde)

78. ¿Qué edad tiene usted?

Menos de 18 años

18 a 24

25 a 34

35 a 44

45 a 54

55 a 64

65 a 74

75 años o más

79. ¿Es usted hombre o mujer?

Hombre

Mujer

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

8 años de escuela o menos

9 a 12 años de escuela, pero sin graduarse

Graduado de la escuela secundaria (high school), Diploma de escuela secundaria, preparatoria, o su equivalente (o GED)

Algunos cursos universitarios o un título universitario de un programa de 2 años

Título universitario de 4 años

Título universitario de más de 4 años

81. ¿Qué relación tiene con el niño?

Madre o padre

Abuelo o abuela

Tía o tío

Hermano o hermana mayor

Otro familiar

Tutor legal del niño

Otra persona

82. ¿Le ayudó alguien a completar esta encuesta?

Sí → **Pase a la pregunta 83**

No → **Gracias. Por favor devuelva esta encuesta en el sobre con el porte o franqueo pagado.**

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

Me leyó las preguntas

Anotó las respuestas que le di

Contestó las preguntas por mí

Tradujo las preguntas a mi idioma

Me ayudó de otra forma (Por favor escriba en letra de molde)

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

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

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



DIAL.SCREEN

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

PHONE NUMBER ---> [1 CELL PHONE - HAND DIAL ([AREA\$]) [FRST3\$] - [LAST4\$] /*** ***-****]

(IWER: THIS IS NOT A PROXY INTERVIEW.)

Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may be monitored and recorded for quality control. May I please speak with [MEMBER FIRST NAME] [MEMBER LAST NAME]?

(IF NEEDED: "We are conducting an important study to find out how satisfied people are with Oregon Health Plan. The results of the study will help Oregon Health Plan improve the care they provide and will also help consumers when they choose health care plans.")

(IF NEEDED: "The interview is completely confidential and voluntary, and will not affect your health care or benefits in any way.")

(IF NEEDED: "This is purely a research study -- we are polling people about their health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

01. CONTINUE
02. ALREADY COMPLETED AND MAILED SURVEY BACK
03. NEW PHONE NUMBER
04. REFUSAL
05. APPOINTMENT
06. NEVER HEARD OF R
07. KNOWS R BUT HAS NO NEW NUMBER FOR R
08. RNA, ANS MACH, RETURN TO COVERSHEET
09. LANGUAGE PROBLEM -- SPEAKS SPANISH
10. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH

IF DIAL.SCREEN = 01, GO TO RE.INTRO

IF DIAL.SCREEN = 02, GO TO MAIL.SCREEN

IF DIAL.SCREEN = 03, ENTER NEW NUMBER ON COVERSHEET AND RE-DIAL

RETURN TO COVERSHEET

RE.INTRO

RE.INTRO. (INTERVIEWER: READ PARENS TEXT IF R ISN'T PERSON WHO ANSWERED
PHONE OR HAS NOT HEARD IT YET.)

(Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may
be monitored and recorded for quality control.)

We are conducting an important study to find out how satisfied
people are with Oregon Health Plan. The results of the study will help
Oregon Health Plan improve the care they provide and will also help consumers
when they choose health care plans.

The interview is completely confidential and voluntary, and will not
affect your health care or benefits in any way.

(IF R ASKS: "How long will this take?", EXPLAIN: "The questions should
take about 12-15 minutes to answer.")

(IF NEEDED: "This is purely a research study -- we are polling people
about their health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD
LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the
deadline for mailing surveys has passed and we're now in the telephone
phase of this study. May I continue?")

("DK" NOT ALLOWED)

1. CONTINUE
2. APPOINTMENT
3. REFUSAL
4. LANGUAGE PROBLEM -- SPEAKS SPANISH
5. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH

6. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)
7. RETURN TO CS

SEX

SEX. (IWER: RECORD RESPONDENT'S SEX, 'DK' NOT ALLOWED)

1. MALE
2. FEMALE

SPAN.VAR

(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

1. Spanish
2. English

MEMBER

Q1. / MEMBER

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

(IWER: IF R SAYS "LEFT PLAN" OR "SWITCHED PLANS" OR "NO LONGER INSURED" ENTER "2". IF R IS NOT SURE IF HE/SHE IS PART OF Oregon Health Plan, ENTER "2".)

- 1. YES --> CK.PLMSTCR
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

NPLNAME

Q2. / NPLNAME

What is the name of your health plan?

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS Oregon Health Plan]

[(ENTER 5 IF R SAYS: MEDICAID)]

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

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

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

PLNAME

Q2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)

CK.PLMSTCR:

IF NPLNAME = NOT A MATCH (3), GO TO END.SCREEN

INTRO.INCARE

INTRO.INCARE

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

INCARE

Q3. / INCARE

In the last 6 months, did you have an illness, injury, or condition that NEEDED CARE RIGHT AWAY in a clinic, emergency room, or doctor's office?

- 1. YES
- 2. NO -----> APMAKE4

DK/REFUSAL/NOT ASCERTAINED --> APMAKE4

CARSN4

Q4. / CARSN4

In the last 6 months, when you NEEDED CARE RIGHT AWAY, how often did you get care as soon as you needed? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

APMAKE4

Q5. / APMAKE4

In the last 6 months, did you make any appointments for a CHECK-UP OR ROUTINE CARE at a doctor's office or clinic?

- 1. YES
- 2. NO -----> OFCTIM4

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

APGET4

Q6. / APGET4

In the last 6 months, how often did you get an appointment for a CHECK-UP OR ROUTINE CARE at a doctor's office or clinic as soon as you needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

OFCTIM4

Q7. / OFCTIM4

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

(IWER: IF NECESSARY: "Your best estimate would be fine.")

(IWER: IF NEEDED CLARIFY: "Please don't include dental care you received.")

(IWER: IF NEEDED CLARIFY, "Please include ALL doctor visits including those for routine, regular care and for an illness or injury.")

(READ LIST IF NEEDED: "Would you say...")

0. NONE,
1. 1 TIME,
2. 2,
3. 3,
4. 4,
5. 5 TO 9, OR
6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

IF OFCTIM4=0 OR DK/REFUSAL THEN GO TO PRSNLD4

PRVENT5

Q8. / PRVENT5

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RXSTP

9. / RXSTP

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

- 1. YES
- 2. NO -----> RTALLCR

DK/REFUSAL/NOT ASCERTAINED --> RTALLCR

NRXWHY

10. / NRXWHY

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

NRXWYNT

11. / NRXWYNT

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RXBST

12. / RXBST

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RTALLCR

13. / RTALLCR

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

(IF NEEDED: "Please do not include any dental care you may have received.")

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

CARNES4

14. / CARNES4

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

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PRSNLD4

15. / PRSNLD4

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

Do you have a personal doctor?

- 1. YES
- 2. NO -----> INTRO.SPDR

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

DRTMS

16. / DRTMS

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

(IF NEEDED: "Your best estimate would be fine.")

(READ LIST IF NEEDED: "Would you say...")

- 0. NONE, -----> RATEDR4
- 1. 1 TIME,
- 2. 2,
- 3. 3,
- 4. 4,
- 5. 5 TO 9, OR
- 6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> RATEDR4

DREXPL4

17. / DREXPL4

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

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRLSTN4

18. / DRLSTN4

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

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRESPU4

19. / DRESPU4

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

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTMEN4

20. / DRTMEN4

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

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DIFFDR

21. / DIFFDR

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

- 1. YES
- 2. NO -----> RATEDR4

DK/REFUSAL/NOT ASCERTAINED --> RATEDR4

DRINFO

22. / DRINFO

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

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RATEDR4

23. / RATEDR4

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

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

INTRO.SPDR

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

NDSPDR4

24. / NDSPDR4

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

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

(CLARIFY IF NEEDED: "Specialists are doctors who specialize in one area of health care. Please include all doctors you consider to be specialists, but do not include any dental visits.")

(IWER: IF RESPONDENT ASKS IF A PARTICULAR TYPE OF DOCTOR IS A SPECIALIST, CLARIFY, "I don't have any information about that, so please just interpret it however it seems best to you.")

(CLARIFY IF NEEDED: "You can interpret this question however it seems best to you.")

- 1. YES
- 2. NO -----> INTRO.PLAN

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

PRBSEE4

25. / PRBSEE4

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

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

SPDRS

26. / SPDRS

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

(CLARIFY IF NEEDED: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. Would you say you've seen...")

(READ LIST IF NEEDED: "Would you say...")

- 0. NONE, -----> INTRO.PLAN
- 1. 1 SPECIALIST,
- 2. 2,
- 3. 3,
- 4. 4, OR
- 5. 5 OR MORE SPECIALISTS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> INTRO.PLAN

RTSPDR4

27. / RTSPDR4

We want to know your rating of the specialist you saw most often in the last 6 months.

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

(Clarify if necessary: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.")

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN

Now I'm going to ask you some questions about your experience with your health plan.

LOOMAT4

28. / LOOMAT4

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

- 1. YES
- 2. NO -----> CLCSRV4

DK/REFUSAL/NOT ASCERTAINED --> CLCSRV4

UNDINF4

29. / UNDINF4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CLCSRV4

30. / CLCSRV4

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

- 1. YES
- 2. NO -----> PLPRWK4

DK/REFUSAL/NOT ASCERTAINED --> PLPRWK4

PBCLCS4

31. / PBCLCS4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CSRESP

32. / CSRESP

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLPRWK4

33. / PLPRWK4

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

- 1. YES
- 2. NO -----> RTPLEXP

DK/REFUSAL/NOT ASCERTAINED --> RTPLEXP

PBPLPW4

34. / PBPLPW4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTPLEXP

35. / RTPLEXP

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

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

HPMDEQ

35a. / HPMDEQ

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

- 1. YES
 - 2. NO -----> POSTHP
- DK/REFUSAL/NOT ASCERTAINED

EZMDHP

35b. / EZMDHP

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

- 1. NEVER
 - 2. SOMETIMES
 - 3. USUALLY
 - 4. ALWAYS
- DK/REFUSAL/NOT ASCERTAINED

POSTHP

35c. / POSTHP

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

- 1. YES
 - 2. NO -----> DTLKTF
- DK/REFUSAL/NOT ASCERTAINED

EZPOST

35d. / EZPOST

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

- 1. NEVER
 - 2. SOMETIMES
 - 3. USUALLY
 - 4. ALWAYS
- DK/REFUSAL/NOT ASCERTAINED

INTRO.SHLTHIS

INTRO.SHLTHIS

A health provider could be a general doctor, a specialist doctor, a nurse practitioner, a physician assistant, a nurse or anyone else you would see for health care. Please keep this in mind as you answer the following questions.

SHLTHIS

35e. / SHLTHIS

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

- 1. YES
- 2. NO -----> CHTREAT

DK/REFUSAL/NOT ASCERTAINED --> CHTREAT

EUNDER

35f. / EUNDER

How much effort was made to help you understand your health issue? Would you say...?

(READ LIST)

- 1. NO EFFORT AT ALL,
- 2. A LITTLE EFFORT WAS MADE,
- 3. SOME EFFORT WAS MADE, or
- 4. A LOT OF EFFORT WAS MADE

DK/REFUSAL/NOT ASCERTAINED

ELISTEN

35g. / ELISTEN

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

(READ LIST IF NECESSARY)

- 1. NO EFFORT AT ALL,
- 2. A LITTLE EFFORT WAS MADE,
- 3. SOME EFFORT WAS MADE, or
- 4. A LOT OF EFFORT WAS MADE

DK/REFUSAL/NOT ASCERTAINED

EINCLUD

35h. / EINCLUD

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

(READ LIST IF NECESSARY)

- 1. NO EFFORT AT ALL,
- 2. A LITTLE EFFORT WAS MADE,
- 3. SOME EFFORT WAS MADE, or
- 4. A LOT OF EFFORT WAS MADE

DK/REFUSAL/NOT ASCERTAINED

CHTREAT

35i. / CHTREAT

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

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

- 1. YES
- 2. NO -----> RESPCHT

DK/REFUSAL/NOT ASCERTAINED --> RESPCHT

PCTREAT

35j. / PCTREAT

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

- 1. YES
 - 2. NO
- DK/REFUSAL/NOT ASCERTAINED

BSTREAT

35k. / BSTREAT

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

- 1. YES
 - 2. NO
- DK/REFUSAL/NOT ASCERTAINED

EASYQC

35l. / EASYQC

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DTLKTF

35m. / DTLKTF

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DINTER

35n. / DINTER

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

(READ LIST IF NECESSARY)

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

DK/REFUSAL/NOT ASCERTAINED

DRRUDE

35o. / DRRUDE

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

(READ LIST IF NECESSARY)

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

DK/REFUSAL/NOT ASCERTAINED

TRUSTDR

35p. / TRUSTDR

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

REGDENT

35q. / REGDENT

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

1. YES
 2. NO
- DK/REFUSAL/NOT ASCERTAINED

DNTASAP

35r.

In the last 6 months, if you needed to see a dentist right away because of a DENTAL EMERGENCY, did you get to see a dentist as soon as you wanted?

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?
5. I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS (DO NOT READ)

DK/REFUSAL/NOT ASCERTAINED

HLTSTA4

36. / HLTSTA4

In general, how would you rate your overall health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

MNTLSTAT

37. / MNTLSTAT

In general, how would you rate your overall MENTAL OR EMOTIONAL health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

FLUSHOTQ

38. / FLUSHOTQ

Have you had either a flu shot or flu spray in the nose since July 1, 2014?

1. YES
2. NO
3. DON'T KNOW
9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

NOWSMOK

39. / NOWSMOK

Do you now smoke cigarettes or use tobacco...

(READ LIST)

1. EVERY DAY,
2. SOME DAYS, OR
3. NOT AT ALL? -----> ASPDAY
4. DON'T KNOW (DO NOT READ) -----> ASPDAY
9. REFUSAL/NOT ASCERTAINED (DO NOT READ) --> ASPDAY

ADVQUIT9

40. / ADVQUIT9

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PATCH9

41. / PATCH9

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

WILLPWR9

42. / WILLPWR9

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPDAY

43. / ASPDAY

Do you take aspirin daily or every other day?

(IF NEEDED: "Would you say YES or NO?")

(IWER: If the R asks about whether a particular medication or Brand name is considered aspirin, you may provide the following clarification:

Aspirin: Bayer and Bufferin

Not Aspirin: Tylenol, Motrin, Aleve, Advil, ibuprofen and acetaminophen)

1. YES
2. NO
3. DON'T KNOW
9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPUSF

44. / ASPUSF

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

(IF NEEDED: "Would you say YES or NO?")

1. YES
2. NO
3. DON'T KNOW

9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPPRV

45. / ASPPRV

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.AWCOND
INTRO.AWCOND

When I read the following list, please tell me if you are aware that you have any of these conditions.

PHAWCD.(1-3)
46.(1-3) / PHAWCD.(1-3)

[First,/(Next/How About...)]

1. "High cholesterol"
2. "High blood pressure"
3. "Parent or sibling who had a heart attack before the age of 60"

(IWER IF NECESSARY: "Are you aware if you have this condition?")

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.DRCOND
INTRO.DRCOND

When I read the following list, please tell me if a doctor has ever told you that you have any of these conditions.

PHDRCD.(1-4)
47.(1-4) / PHDRCD.(1-4)

[First,/(Next/How About...)]

1. "A heart attack"
2. "Angina or coronary heart disease"
3. "A stroke"
4. "Any kind of diabetes or high blood sugar"

(IWER IF NECESSARY: "Has a doctor ever told you that you have this condition?")

[FOR PHDRCD.2: (IWER IF NEEDED, CLARIFY: Angina pectoris (an-JYE-nuh or AN-jin-uh PECK-ter-iss) is severe pain in the chest associated with insufficient blood supply to the heart.)]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

SMPROB

48. / SMPROB

I have just a few more questions.

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

- 1. YES
- 2. NO -----> TKMED

DK/REFUSAL/NOT ASCERTAINED --> TKMED

PRBLST

49. / PRBLST

Is this a condition or problem that has lasted for at least 3 months? [Please do NOT include pregnancy or menopause.]

[(IWER IF NEEDED, CLARIFY: Menopause (men-ne-paws) is the time in a woman's life when she stops having menstrual periods. It is sometimes called 'the change of life' or 'the change'.)]

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

TKMED

50. / TKMED

Do you now need or take medicine prescribed by a doctor? [Please do NOT include birth control.]

- 1. YES
- 2. NO -----> QAGE4

DK/REFUSAL\NOT ASCERTAINED --> QAGE4

TRTCOND

51. / TRTCOND

Is this medicine to treat a condition that has lasted for at least three months? [Please do NOT include pregnancy or menopause.]

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

QAGE4

52. / QAGE4

What is your age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your last birthday.")

(READ LIST IF NEEDED, "Are you...")

1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

QGENDER

53. / QGENDER

(IWER: RECORD RESPONDENT'S SEX, 'DK' NOT ALLOWED)

(ASK IF NECESSARY, "Are you male or female?")

1. MALE
2. FEMALE

EDUCAT

54. / EDUCAT

What is the highest grade or level of school that you have COMPLETED?
Did you complete...

(IWER: IF R SAYS HE/SHE HAD NON-ACADEMIC TRAINING, SUCH AS TRADE SCHOOL, PROBE: "Did you receive a high school diploma or GED?")

(IWER: ACADEMIC TRAINING BEYOND A HIGH SCHOOL DIPLOMA THAT DOES NOT LEAD TO A BACHELORS DEGREE, SHOULD BE CODED "4". IF R WENT TO BUSINESS SCHOOL OR GOT A 3-YEAR NURSING DEGREE, ENTER "4")

(IWER: IF R OFFERS MORE THAN ONE RESPONSE, FOR EXAMPLE: "SOME HIGH SCHOOL OR GED", ENTER THE HIGHEST NUMBER THAT APPLIES.)

(READ LIST)

1. 8TH GRADE OR LESS,
2. SOME HIGH SCHOOL, BUT DID NOT GRADUATE,
3. HIGH SCHOOL GRADUATE OR GED,
4. SOME COLLEGE OR 2-YEAR DEGREE,
5. 4-YEAR COLLEGE GRADUATE, OR
6. MORE THAN A 4-YEAR COLLEGE DEGREE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

LATINO

55. / LATINO

Are you of Hispanic or Latino origin or descent?

1. YES / HISPANIC OR LATINO
2. NO / NOT HISPANIC OR LATINO

DK/REFUSAL/NOT ASCERTAINED

INTRO.RACE

INTRO.RACE

I am going to read a list of race categories. For each category, please say YES or NO if it describes your race. I must ask you about all categories in case more than one applies.

PQRACE3.(1-6)

56.(1-6) / PQRACE3.(1-6)

[(Are you)]

1. "White"
2. "Black or African-American"
3. "Asian"
4. "Native Hawaiian or other Pacific Islander"
5. "American Indian or Alaska Native"
6. "Some other race"

(IWER: IF R REPLIES "WHY ARE YOU ASKING ABOUT MY RACE?" SAY "We ask about your race for demographic purposes only. We want to be sure that the people we survey accurately represent the racial diversity of managed care enrollees in this country.")

(IWER: If R answers with a category not listed here, such as "HISPANIC" or "AMERICAN" or "MIXED RACE", probe using the category "OTHER".)

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

ALL.DONE

THANKS.SCREEN.

Those are all the questions I have.

Thank you for taking part in this important interview.

Have a nice (day/evening). Good bye.

RETURN TO COVERSHEET

DIAL.SCREEN

DS. INTERVIEWER: YOU MAY DO THE INTERVIEW WITH ONLY THE PARENT OR GUARDIAN WHO KNOWS MOST ABOUT FNAME LNAME'S HEALTH CARE.
PHONE NUMBER ---> [1 CELL PHONE - HAND DIAL ([AREA\$]) [FRST3\$] - [LAST4\$] /*** ***-****]

(IWER: THIS IS A PROXY INTERVIEW.)

Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may be monitored and recorded for quality control. May I please speak with the person who knows the most about [NAME OF CHILD]'s health care?

(IF NEEDED: "We are conducting an important study to find out how satisfied families are with Oregon Health Plan. The results of the study will help Oregon Health Plan improve the care they provide and will also help consumers when they choose health care plans.")

(IF NEEDED: "The interview is completely confidential and voluntary, and will not affect your child's health care or benefits in any way.")

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

01. CONTINUE
02. ALREADY COMPLETED AND MAILED SURVEY BACK
03. NEW PHONE NUMBER
04. REFUSAL
05. APPOINTMENT
06. NEVER HEARD OF R
07. KNOWS R BUT HAS NO NEW NUMBER FOR R
08. RNA, ANS MACH, RETURN TO COVERSHEET
09. LANGUAGE PROBLEM -- SPEAKS SPANISH
10. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH

IF DIAL.SCREEN = 01, GO TO RE.INTRO

IF DIAL.SCREEN = 02, GO TO MAIL.SCREEN

IF DIAL.SCREEN = 03, ENTER NEW NUMBER ON COVERSHEET AND RE-DIAL

RETURN TO COVERSHEET

MAIL.SCREEN

MS. INTERVIEWER: WE STILL NEED TO CONDUCT A TELEPHONE INTERVIEW EVEN
THOUGH R SAYS THEY'VE SENT BACK THE MAIL SURVEY.

I'm sorry, but we haven't received your survey back -- it may have been lost in the mail. And since the deadline for mailing surveys has passed, we're now in the telephone phase of this study. May I continue?

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

1. CONTINUE
2. REFUSAL BECAUSE ALREADY COMPLETED AND MAILED SURVEY BACK
3. REFUSAL
4. APPOINTMENT

IF MAIL.SCREEN = 1, GO TO RE.INTRO
RETURN TO COVERSHEET

RE.INTRO

RE.INTRO. (INTERVIEWER: READ PARENS TEXT IF R ISN'T PERSON WHO ANSWERED
PHONE OR HAS NOT HEARD IT YET.)

(Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may be monitored and recorded for quality control.)

We are conducting an important study to find out how satisfied families are with Oregon Health Plan. The results of the study will help Oregon Health Plan improve the care they provide and will also help consumers when they choose health care plans.

The interview is completely confidential and voluntary, and will not affect your child's health care or benefits in any way.

(IF R ASKS: "How long will this take?", EXPLAIN: "The questions should take about 12-15 minutes to answer.")

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

("DK" NOT ALLOWED)

1. CONTINUE
2. APPOINTMENT
3. REFUSAL
4. LANGUAGE PROBLEM -- SPEAKS SPANISH
5. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH
6. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)
7. RETURN TO CS

SEX

SEX. (IWER: RECORD RESPONDENT'S SEX, 'DK' NOT ALLOWED)

1. MALE
2. FEMALE

SPAN.VAR

(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

1. Spanish
2. English

MEMBER

Q1. / MEMBER

I will be asking you about [NAME OF CHILD]'s health care. Please answer these questions based on the experiences you have had in getting health care for [NAME OF CHILD], and not on any experiences you may have had getting care for yourself or other members of your family.

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

(IWER: IF R SAYS "LEFT PLAN" OR "SWITCHED PLANS" OR "NO LONGER INSURED" ENTER "2". IF R IS NOT SURE IF HE/SHE IS PART OF Oregon Health Plan, ENTER "2".)

1. YES --> CK.PLMSTCR
2. NO

DK/REFUSAL/NOT ASCERTAINED

NPLNAME

Q2. / NPLNAME

What is the name of your child's health plan?

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS Oregon Health Plan]

[(ENTER 5 IF R SAYS: MEDICAID)]

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

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

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

PLNAME

Q2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)

CK.PLMSTCR:

IF NPLNAME = NOT A MATCH (3), GO TO END.SCREEN

INTRO.INCARE

INTRO.INCARE

Now I'm going to ask you some questions about your child's health care. When you answer these questions, please do NOT include dental visits or care your child got when [he/she] stayed overnight in a hospital.

INCARE

Q3. / INCARE

In the last 6 months, did your child have an illness, injury, or condition that NEEDED CARE RIGHT AWAY in a clinic, emergency room, or doctor's office?

1. YES
2. NO -----> APMAKE4

DK/REFUSAL/NOT ASCERTAINED --> APMAKE4

CARSN4

Q4. / CARSN4

In the last 6 months, when your child NEEDED CARE RIGHT AWAY, how often did your child get care as soon as [he/she] needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

APMAKE4

Q5. / APMAKE4

In the last 6 months, did you make any appointments for a CHECK-UP OR ROUTINE CARE for your child at a doctor's office or clinic?

1. YES
2. NO -----> OFCTIM4

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

APGET4

Q6. / APGET4

In the last 6 months, when you made an appointment for a CHECK-UP OR ROUTINE CARE for your child at a doctor's office or clinic, how often did you get an appointment as soon as your child needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

OFCTIM4

Q7. / OFCTIM4

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

(IWER: IF NECESSARY: "Your best estimate would be fine.")

(IWER: IF NEEDED CLARIFY: "Please don't include dental care your child received.")

(IWER: IF NEEDED CLARIFY, "Please include ALL doctor visits including those for routine, regular care and for an illness or injury.")

(READ LIST IF NEEDED: "Would you say...")

0. NONE,
1. 1 TIME,
2. 2,
3. 3,
4. 4,
5. 5 TO 9, OR
6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

IF OFCTIM4=0 OR DK/REFUSAL THEN GO TO CHSCHL

PRVENT5

Q8. / PRVENT5

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

OFTQUES

9. / OFTQUES

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXSTP

10. / RXSTP

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

1. YES
2. NO -----> RTALLCR

DK/REFUSAL/NOT ASCERTAINED --> RTALLCR

NRXWHY

11. / NRXWHY

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

NRXWYNT

12. / NRXWYNT

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

RXBST

13. / RXBST

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

RTALLCR

14. / RTALLCR

Using ANY NUMBER FROM 0 TO 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your child's health care in the last 6 months?

(IF NEEDED: "Please do not include any dental care your child may have received.")

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

CARNES4

15. / CARNES4

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHSCHL

16. / CHSCHL

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

1. YES
2. NO -----> MEDEQUIP

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

CONTSCHL

17. / CONTSCHL

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

1. YES
2. NO -----> MEDEQUIP

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

HELPCONT

18. / HELPCONT

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

MEDEQUIP

19. / MEDEQUIP

Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment. In the last 6 months, did you get or try to get any special medical equipment or devices for your child?

1. YES
2. NO -----> SPCTHY

DK/REFUSAL/NOT ASCERTAINED --> SPCTHY

EZMDEQ

20. / EZMDEQ

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPMDEQ

21. / HELPMDEQ

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

SPCTHY

22. / SPCTHY

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

1. YES
2. NO -----> TCPBLM

DK/REFUSAL/NOT ASCERTAINED --> TCPBLM

EZTHP

23. / EZTHP

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTHP

24. / HELPTHP

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

TCPBLM

25. / TCPBLM

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

1. YES
2. NO -----> PLUSCARE

DK/REFUSAL/NOT ASCERTAINED --> PLUSCARE

EZTC

26. / EZTC

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTC

27. / HELPTC

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

PLUSCARE

28. / PLUSCARE

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

1. YES
2. NO -----> PRSNLD4

DK/REFUSAL/NOT ASCERTAINED --> PRSNLD4

HLPCOORD

29. / HLPCOORD

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

PRSNLD4

30. / PRSNLD4

A personal doctor is the one your child would see if [he/she] needs a check-up, has a health problem or gets sick or hurt.

Does your child have a personal doctor?

1. YES
2. NO -----> INTRO.SPDR

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

DRTMS

31. / DRTMS

In the last 6 months, how many times did your child visit
[his/her] personal doctor for care?

(IF NEEDED: "Your best estimate would be fine.")

(READ LIST IF NEEDED: "Would you say...")

- 0. NONE, -----> RATEDR4
- 1. 1 TIME,
- 2. 2,
- 3. 3,
- 4. 4,
- 5. 5 TO 9, OR
- 6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> RATEDR4

PBDRNG

31a. / PBDRNG

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

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DREXPL4

32. / DREXPL4

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

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRLSTN4

33. / DRLSTN4

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRESPU4

34. / DRESPU4

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CABLTLK

35. / CABLTLK

Is your child able to talk with doctors about [his/her] health care?

1. YES
2. NO -----> DRTMEN4

DK/REFUSAL/NOT ASCERTAINED --> DRTMEN4

CDREXPL

36. / CDREXPL

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

(READ LIST)

1. NEVER
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTMEN4

37. / DRTMEN4

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTLKU

38. / DRTLKU

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

DIFFDR

39. / DIFFDR

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

1. YES
2. NO -----> RATEDR4

DK/REFUSAL/NOT ASCERTAINED --> RATEDR4

DRINFO

40. / DRINFO

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RATEDR4

41. / RATEDR4

Using ANY NUMBER FROM 0 TO 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your child's personal doctor?

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

COND3MO

42. / COND3MO

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

(IWER: "We are looking for a condition that the child CURRENTLY HAS that has lasted for more than 3 months.")

1. YES
2. NO -----> INTRO.SPDR

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

DRUNCON

43. / DRUNCON

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

DRUNFAM

44. / DRUNFAM

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.SPDR

INTRO.SPDR

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

NDSPDR4

45. / NDSPDR4

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

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

(CLARIFY IF NEEDED: "Specialists are doctors who specialize in one area of health care. Please include all doctors you consider to be specialists, but do not include any dental visits.")

(IWER: IF RESPONDENT ASKS IF A PARTICULAR TYPE OF DOCTOR IS A SPECIALIST, CLARIFY, "I don't have any information about that, so please just interpret it however it seems best to you.")

(CLARIFY IF NEEDED: "You can interpret this question however it seems best to you.")

1. YES
2. NO -----> INTRO.PLAN

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

PRBSEE4

46. / PRBSEE4

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

SPDRS

47. / SPDRS

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

(CLARIFY IF NEEDED: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. Would you say your child has seen...")

(READ LIST IF NEEDED: "Would you say...")

0. NONE, -----> INTRO.PLAN
1. 1 SPECIALIST,
2. 2,
3. 3,
4. 4, OR
5. 5 OR MORE SPECIALISTS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> INTRO.PLAN

RTSPDR4

48. / RTSPDR4

We want to know your rating of the specialist your child saw most often in the last 6 months.

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

(Clarify if necessary: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.")

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN

INTRO.PLAN

Now I'm going to ask you some questions about your experience with your child's health plan.

CLCSRV4

49. / CLCSRV4

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

1. YES
2. NO -----> PLPRWK4

DK/REFUSAL/NOT ASCERTAINED --> PLPRWK4

PBCLCS4

50. / PBCLCS4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CSRESP

51. / CSRESP

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLPRWK4

52. / PLPRWK4

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

1. YES
2. NO -----> RTPLEXP

DK/REFUSAL/NOT ASCERTAINED --> RTPLEXP

PBPLPW4

53. / PBPLPW4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTPLEXP

54. / RTPLEXP

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

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

CHPRES

55. / CHPRES

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

1. YES
2. NO -----> REGDENT

DK/REFUSAL/NOT ASCERTAINED --> REGDENT

EZPRES

56. / EZPRES

In the last 6 months, how often was it easy to get prescription medicines for your child through [his/her] health plan? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPPRES

57. / HELPPRES

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

REGDENT

57a. / REGDENT

A regular dentist is one you would go to for check-ups and cleanings or when [he/she] has a cavity or tooth pain.

Does your child have a regular dentist?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

DNTASAP

57b. / DNTASAP

In the last 6 months, if your child needed to see a dentist right away because of a DENTAL EMERGENCY, did [he/she] get to see a dentist as soon as you wanted? Would you say...?

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?
5. DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS (DO NOT READ)

DK/REFUSAL/NOT ASCERTAINED

CHTREAT

57c. / CHTREAT

Choices for your child's treatment or health care can include choices about medicine, surgery, or other treatment.

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

1. YES
2. NO -----> RESPCHT

DK/REFUSAL/NOT ASCERTAINED --> RESPCHT

PCTREAT

57d. / PCTREAT

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

BSTREAT

57e. / BSTREAT

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

RESPCHT

57f. / RESPCHT

In the last 6 months, how often did your child's provider respect what health care and treatment choices you thought work best for your child? Would you say...?

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED

ENCORQC

57g. / ENCORQC

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

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED

EASYQC

57h. / EASYQC

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

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED

HLTSTA4

58. / HLTSTA4

In general, how would you rate your child's overall health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

MNTLSTAT

59. / MNTLSTAT

In general, how would you rate your child's overall MENTAL OR EMOTIONAL health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CUSEMED

60. / CUSEMED

Other than vitamins, does your child currently need or use medicine prescribed by a doctor?

1. YES
2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

WHYMEDA

61. / WHYMEDA

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

1. YES
2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

WHYMEDB

62. / WHYMEDB

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

MOREMED

63. / MOREMED

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

1. YES
2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

WHYMOREA

64. / WHYMOREA

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

1. YES
2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

WHYMOREB

65. / WHYMOREB

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

LIMITED

66. / LIMITED

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

1. YES
2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --> SPECTHP

WHYLIMA

67. / WHYLIMA

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

1. YES
2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --> SPECTHP

WHYLIMB

68. / WHYLIMB

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

SPECTHP

69. / SPECTHP

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

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

DK/REFUSAL/NOT ASCERTAINED --> CHCOUNS

WHYSTA

70. / WHYSTA

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

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

DK/REFUSAL/NOT ASCERTAINED --> CHCOUNS

WHYSTB

71. / WHYSTB

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

CHCOUNS

72. / CHCOUNS

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

1. YES
2. NO -----> CAGE

DK/REFUSAL/NOT ASCERTAINED --> CAGE

TIMCOUNA

73. / TIMCOUNA

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

CAGE

74. / CAGE

I have just a few more questions.

What is YOUR CHILD'S age?

(IWER: ENTER 00 IF LESS THAN 1 YEAR OLD)

(IWER: IF NEEDED CLARIFY, "Please answer based on your child's age as of their last birthday.")

___ ENTER CHILD'S AGE

DK/REFUSAL/NOT ASCERTAINED

CGENDER

75. / CGENDER

(IF NEEDED: "Is your child male or female?")

1. MALE
2. FEMALE

REFUSAL/NOT ASCERTAINED

LATINO

76. / LATINO

Is your child of Hispanic or Latino origin or descent?

1. YES / HISPANIC OR LATINO
2. NO / NOT HISPANIC OR LATINO

DK/REFUSAL/NOT ASCERTAINED

INTRO.RACE

INTRO.RACE

I am going to read a list of race categories. For each category, please say YES or NO if it describes your child's race. I must ask you about all categories in case more than one applies.

PQRACE3.(1-6)

77.1-6) / PQRACE3.(1-6)

[(Is your child)]

1. "White"
2. "Black or African-American"
3. "Asian"
4. "Native Hawaiian or other Pacific Islander"
5. "American Indian or Alaska Native"
6. "Some other race"

(IWER: IF R REPLIES "WHY ARE YOU ASKING ABOUT MY CHILD'S RACE?" SAY "We ask about your child's race for demographic purposes only. We want to be sure that the people we survey accurately represent the racial diversity of managed care enrollees in this country.")

(IWER: If R answers with a category not listed here, such as "HISPANIC" or "AMERICAN" or "MIXED RACE", probe using the category "OTHER".)

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

PAGE

78. / PAGE

Now I have a few questions about you. What is YOUR age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your last birthday.")

(READ IF NEEDED, "Are you...")

0. UNDER 18,
1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PGENDER

79. / PGENDER

(IWER: ENTER RESPONDENT'S SEX. "DK" NOT ALLOWED.)

(IWER: IF NECESSARY ASK, "Are you male or female?")

1. MALE
2. FEMALE

EDUCAT

80. / EDUCAT

What is the highest grade or level of school that you have COMPLETED?
Did you complete...

(IWER: IF R SAYS HE/SHE HAD NON-ACADEMIC TRAINING, SUCH AS TRADE
SCHOOL, PROBE: "Did you receive a high school diploma or GED?")

(IWER: ACADEMIC TRAINING BEYOND A HIGH SCHOOL DIPLOMA THAT DOES NOT
LEAD TO A BACHELORS DEGREE, SHOULD BE CODED "4". IF R WENT TO BUSINESS
SCHOOL OR GOT A 3-YEAR NURSING DEGREE, ENTER "4")

(IWER: IF R OFFERS MORE THAN ONE RESPONSE, FOR EXAMPLE: "SOME HIGH
SCHOOL OR GED", ENTER THE HIGHEST NUMBER THAT APPLIES.)

(READ LIST)

1. 8TH GRADE OR LESS,
2. SOME HIGH SCHOOL, BUT DID NOT GRADUATE,
3. HIGH SCHOOL GRADUATE OR GED,
4. SOME COLLEGE OR 2-YEAR DEGREE,
5. 4-YEAR COLLEGE GRADUATE, OR
6. MORE THAN A 4-YEAR COLLEGE DEGREE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHRELT

81. / CHRELT

How are you related to the child?

(READ IF NEEDED: "Are you the ...")

1. MOTHER OR FATHER,
2. GRANDPARENT,
3. AUNT OR UNCLE,
4. OLDER BROTHER OR SISTER,
5. OTHER RELATIVE,
6. LEGAL GUARDIAN, OR
7. SOMEONE ELSE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ALL.DONE

THANKS.SCREEN.

Those are all the questions I have.

Thank you for taking part in this important interview.

Have a nice (day/evening). Good bye.