



PacificSource Community Solutions  
CAHPS® 5.0 Medicaid Survey

Banner Book Report

June 2016



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## METHODOLOGY

### Introduction

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

### Survey Milestones

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

### Sampling

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

### Questionnaires

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

### Selection of Cases for Analysis

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

## Composites, Overall Ratings, and Measures for Reporting

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

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

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

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

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

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

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

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

### **Composite: Customer Service**

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

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

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

### **Rating Questions**

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

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

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

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

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

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

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

## Comparisons, Statistical Testing, Scoring, and Weighting

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

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

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

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

## Sample Disposition

Category	Adult		Child	
	PacificSource Community Solutions	Overall	PacificSource Community Solutions	Overall
<b>**First mailing - sent</b>	900	17100	900	17100
<b>*First mailing - usable survey returned</b>	171	3058	129	2302
<b>Second mailing - sent</b>	715	13527	741	14026
<b>*Second mailing - usable survey returned</b>	63	1118	43	1027
<b>*Phone - usable surveys</b>	63	1495	119	2309
<b>Total - usable surveys</b>	297	5671	291	5638
<b>†Ineligible: According to population criteria‡</b>	23	431	22	323
<b>†Ineligible: Deceased</b>	3	38	1	2
<b>†Ineligible: Mentally or physically unable to complete survey</b>	9	166	0	0
<b>†Ineligible: Language barrier</b>	0	78	0	81
<b>Incorrect address AND incorrect phone number</b>	59	915	42	878
<b>Refusal/Returned survey blank</b>	44	871	58	905
<b>Nonresponse - Unavailable by mail or phone</b>	465	8930	486	9273
<b>Adjusted Response Rate</b>	<b>34.3%</b>	<b>34.6%</b>	<b>33.2%</b>	<b>33.8%</b>

\*Included in response rate numerator

†Excluded from adjusted response rate denominator

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

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

## Response/Non-Response Comparison

Presented below is a comparison, by age and gender within each age category, of respondents and non-respondents, all of whom were part of the random sample for the Oregon CAHPS© 2016 survey.

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

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

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

### Adult

Gender / Age	Non-Respondents	Respondents	Difference
Male	221 45.4%	123 41.4%	-3.97%
Female	266 54.6%	174 58.6%	3.97%
18-24	100 20.5%	26 8.8%	-11.78%
25-34	136 27.9%	63 21.2%	-6.71%
35-44	116 23.8%	43 14.5%	-9.34%
45-54	68 14.0%	72 24.2%	10.28%
55-64	49 10.1%	81 27.3%	17.21%
65-74	13 2.7%	6 2.0%	-0.65%
75 or Older	5 1.0%	6 2.0%	0.99%

### Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	264 52.4%	143 49.1%	-3.24%
Female	240 47.6%	148 50.9%	3.24%
<3	90 17.9%	62 21.3%	3.45%
4-7	135 26.8%	61 21.0%	-5.82%
8-12	146 29.0%	92 31.6%	2.65%
13 or older	133 26.4%	76 26.1%	-0.27%

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

	PSCS 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/ ILND	AMER IND/ PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q1 YES	293 100%	5577 100%	24 100%	58 100%	45 100%	65 100%	77 100%	14 100%	188 100%	~	~	~	~	~	14 100%	27 100%	253 100%	210 100%	74 100%	113 100%	170 100%
NOT ANSWERED	4	94				2	1	1	3						1		4	3	1	3	1
VALID CASES	293	5577	24	58	45	65	77	14	188						14	27	253	210	74	113	170
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%						15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%



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?

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	FE- MALE	MALE		
Q3 YES	142 48%	2267 41%*	9 38%~	28 48%	19 42%~	39 60%*	33 42%	7 47%~	96 51%	~	~	~	~	~	60%~	13 48%~	121 47%~	86 41%*	48 65%*	45 39%*	90 53%	
NO	153 52%	3221 59%*	15 63%~	30 52%	26 58%~	26 40%*	45 58%	8 53%~	93 49%	~	~	~	~	~	40%~	6 52%~	14 53%~	134 59%*	126 35%*	26 35%*	70 61%*	80 47%
NOT ANSWERED	2	183				2			2								2	1	1	1	1	
VALID CASES	295	5488	24	58	45	65	78	15	189						15	27	255	212	74	115	170	
NUMBER OF RESPONDENTS	297	5671	24	58	45	67	78	15	191						15	27	257	213	75	116	171	
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%	

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	PSCS 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 AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE
								WHTE	##	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q4 NEVER	8 6%	61 3%	1 ~	2 4%~	5 11%~	14%~	~	3 3%~	~	~	~	~	~	2 22%~	8 ~	7%~	6 7%~	2 5%~	2 5%~	6 7%~
SOMETIMES	23 17%	267 13%	2 25%~	6 23%~	2 11%~	6 16%~	5 16%~	15 17%~	~	~	~	~	~	1 11%~	2 18%~	19 17%~	14 17%~	7 16%~	6 14%~	15 18%~
USUALLY	38 29%	526 26%	1 13%~	4 15%~	7 39%~	11 30%~	9 28%~	2 40%~	26 29%~	~	~	~	~	2 22%~	2 18%~	32 28%~	20 24%~	14 33%~	14 33%~	20 24%~
ALWAYS	63 48%	1196 58%*	5 63%~	15 58%~	7 39%~	15 41%~	18 56%~	3 60%~	46 51%~	~	~	~	~	4 44%~	7 64%~	55 48%~	43 52%~	20 47%~	21 49%~	42 51%~
#ALWAYS + USUALLY (NET)	101 77%	1723 84%*	6 75%~	19 73%~	14 78%~	26 70%~	27 84%~	5 100%~	72 80%~	~	~	~	~	6 67%~	9 82%~	87 76%~	63 76%~	34 79%~	35 81%~	62 75%~
TOP BOX SCORE	63 48%	1196 58%*	5 63%~	15 58%~	7 39%~	15 41%~	18 56%~	3 60%~	46 51%~	~	~	~	~	4 44%~	7 64%~	55 48%~	43 52%~	20 47%~	21 49%~	42 51%~
NOT ANSWERED	10	187	1	2	1	2	1	2	6						2	7	3	5	2	7
VALID CASES	132	2050	8	26	18	37	32	5	90					9	11	114	83	43	43	83
NUMBER OF RESPONDENTS	142	2237	9	28	19	39	33	7	96					9	13	121	86	48	45	90
	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?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		PSCS 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- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTH R	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE
Q5																					
YES	203 69%	3682 67%	15 63%~	36 62%	33 73%~	46 70%	55 71%	13 87%~	137 72%	~	~	~	~	~	12 80%~	19 70%~	177 69%~	140 66%	58 77%*	73 63%	124 73%
NO	92 31%	1794 33%	9 38%~	22 38%	12 27%~	20 30%	23 29%	2 13%~	53 28%	~	~	~	~	~	3 20%~	8 30%~	79 31%~	72 34%	17 23%*	43 37%	46 27%
NOT ANSWERED	2	196				1			1								1	1			1
VALID CASES	295	5475	24	58	45	66	78	15	190					15	27	256	212	75	116	170	
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%					15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%	

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?

	PSCS 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-AMER ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK #	OTHR #	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE-MALE	MALE	
Q6 NEVER	7 4%	120 4%	4 ~ 12%~	2 7%~	2 ~ 2%	1 ~	5 4%	~	~	~	~	~	~	~	7 4%~	6 5%	1 2%	3 4%	4 4%		
SOMETIMES	46 25%	637 19%	4 29%~	9 26%~	7 23%~	9 21%~	12 24%	2 18%~	27 22%	~	~	~	~	~	2 18%~	5 28%~	38 23%~	30 23%	14 27%	22 32%	21 19%*
USUALLY	48 26%	905 27%	3 21%~	8 24%~	7 23%~	15 35%~	10 20%	4 36%~	35 28%	~	~	~	~	~	4 36%~	2 11%~	45 28%~	33 25%	14 27%	15 22%	31 28%
ALWAYS	86 46%	1691 50%	7 50%~	13 38%~	14 47%~	19 44%~	27 54%	5 45%~	57 46%	~	~	~	~	~	5 45%~	11 61%~	72 44%~	62 47%	23 44%	29 42%	56 50%
#ALWAYS + USUALLY (NET)	134 72%	2596 77%	10 71%~	21 62%~	21 70%~	34 79%~	37 74%	9 82%~	92 74%	~	~	~	~	~	9 82%~	13 72%~	117 72%~	95 73%	37 71%	44 64%	87 78%*
TOP BOX SCORE	86 46%	1691 50%	7 50%~	13 38%~	14 47%~	19 44%~	27 54%	5 45%~	57 46%	~	~	~	~	~	5 45%~	11 61%~	72 44%~	62 47%	23 44%	29 42%	56 50%
NOT ANSWERED	16	330	1	2	3	3	5	2	13					1	1	15	9	6	4	12	
VALID CASES	187	3353	14	34	30	43	50	11	124					11	18	162	131	52	69	112	
NUMBER OF RESPONDENTS	203	3683	15	36	33	46	55	13	137					12	19	177	140	58	73	124	
	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?

	PSCS 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 #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE MALE			
Q7 NONE	70 24%	1469 27%	8 33%~	21 37%*	10 22%~	13 20%	15 19%	3 20%~	43 23%	~	~	~	~	~	3 20%~	6 22%~	64 25%~	61 29%*	9 12%*	39 34%*	31 19%*
1 TIME	50 17%	947 17%	3 12%~	4 7%*	11 24%~	14 22%	17 22%	~	36 19%	~	~	~	~	~	1 7%~	5 19%~	42 17%~	40 19%	9 12%	16 14%	32 19%
2	49 17%	900 17%	7 29%~	6 11%	12 27%~	8 13%	14 18%	1 7%~	33 18%	~	~	~	~	~	3 20%~	4 15%~	44 17%~	36 17%	11 15%	15 13%	33 20%
3	41 14%	659 12%	3 12%~	8 14%	3 7%~	14 22%	8 10%	4 27%~	28 15%	~	~	~	~	~	2 13%~	5 19%~	35 14%~	31 15%	9 12%	15 13%	25 15%
4	27 9%	465 9%	1 4%~	7 12%	3 7%~	3 5%	9 12%	3 20%~	20 11%	~	~	~	~	~	2 13%~	1 4%~	25 10%~	17 8%	9 12%	7 6%	19 11%
5 TO 9	38 13%	673 12%	2 8%~	9 16%	5 11%~	9 14%	8 10%	3 20%~	19 10%*	~	~	~	~	~	3 20%~	4 15%~	31 12%~	19 9%*	18 24%*	15 13%	21 13%
10 OR MORE TIMES	13 5%	305 6%	~	2 4%	1 2%~	3 5%	6 8%	1 7%~	9 5%	~	~	~	~	~	1 7%~	2 7%~	11 4%~	4 2%*	9 12%*	8 7%	5 3%
NOT ANSWERED	9	254	1		3	1			3								5	5	1	1	5
VALID CASES	288	5417	24	57	45	64	77	15	188						15	27	252	208	74	115	166
NUMBER OF RESPONDENTS	297	5671	24	58	45	67	78	15	191						15	27	257	213	75	116	171
	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?

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE	
Q8 #YES	149 70%	2759 72%	9 60%~	20 57%~	24 69%~	42 84%*	42 69%	9 75%~	105 74%	~	~	~	~	~	9 75%~	14 70%~	131 71%~	101 71%~	45 69%	57 75%	88 67%
NO	64 30%	1087 28%	6 40%~	15 43%~	11 31%~	8 16%*	19 31%	3 25%~	37 26%	~	~	~	~	~	3 25%~	6 30%~	54 29%~	42 29%~	20 31%	19 25%	43 33%
NOT ANSWERED	5	93	1	1		1	1		3							1	3	4			4
VALID CASES	213	3846	15	35	35	50	61	12	142						12	20	185	143	65	76	131
NUMBER OF RESPONDENTS	218 100%	3939 100%	16 100%	36 100%	35 100%	51 100%	62 100%	12 100%	145 100%						12 100%	21 100%	188 100%	147 100%	65 100%	76 100%	135 100%

[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?

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q9 YES	121 57%	2168 56%	7 44%~	19 53%~	17 49%~	26 54%~	38 63%	10 83%~	84 59%	~	~	~	~	~	8 73%~	8 40%~	109 59%~	77 53%	41 65%	38 51%	79 60%
NO	92 43%	1687 44%	9 56%~	17 47%~	18 51%~	22 46%~	22 37%	2 17%~	59 41%	~	~	~	~	~	3 27%~	12 60%~	75 41%~	67 47%	22 35%	36 49%	53 40%
NOT ANSWERED	5	84				3	2		2						1	1	4	3	2	2	3
VALID CASES	213	3855	16	36	35	48	60	12	143						11	20	184	144	63	74	132
NUMBER OF RESPONDENTS	218 100%	3939 100%	16 100%	36 100%	35 100%	51 100%	62 100%	12 100%	145 100%						12 100%	21 100%	188 100%	147 100%	65 100%	76 100%	135 100%

[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?

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q10 #YES	111 94%	1919 93%	5 71%	19 100%	15 100%	26 100%	34 92%	9 90%	76 94%	~	~	~	~	~	8 100%	7 88%	101 95%	75 97%	34 89%	37 97%	71 93%
NO	7 6%	152 7%	2 29%	~	~	~	3 8%	1 10%	5 6%	~	~	~	~	~	~	1 12%	5 5%	2 3%	4 11%	1 3%	5 7%
NOT ANSWERED	17	379		1	2	6	4		8						1	1	12	8	6	3	11
VALID CASES	118	2072	7	19	15	26	37	10	81						8	8	106	77	38	38	76
NUMBER OF RESPONDENTS	135 100%	2451 100%	7 100%	20 100%	17 100%	32 100%	41 100%	10 100%	89 100%						9 100%	9 100%	118 100%	85 100%	44 100%	41 100%	87 100%

[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?

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q11 #YES	89 75%	1506 73%	6 86%~	17 89%~	11 73%~	21 81%~	24 63%~	7 70%~	60 73%~	~	~	~	~	~	6 75%~	5 63%~	81 76%~	57 75%~	30 75%~	30 81%~	56 72%~
NO	30 25%	555 27%	1 14%~	2 11%~	4 27%~	5 19%~	14 37%~	3 30%~	22 27%~	~	~	~	~	~	2 25%~	3 38%~	26 24%~	19 25%~	10 25%~	7 19%~	22 28%~
NOT ANSWERED	2	53			2				2								2	1	1	1	1
VALID CASES	119	2061	7	19	15	26	38	10	82						8	8	107	76	40	37	78
NUMBER OF RESPONDENTS	121 100%	2114 100%	7 100%	19 100%	17 100%	26 100%	38 100%	10 100%	84 100%						8 100%	8 100%	109 100%	77 100%	41 100%	38 100%	79 100%

[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?

	PSCS 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	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE	
Q12 #YES	87 73%	1561 76%	6 86%~	16 84%~	11 69%~	20 77%~	22 59%~	9 90%~	55 67%~	~	~	~	~	~	7 88%~	8 100%~	76 71%~	56 74%~	29 73%~	29 76%~	55 71%~
NO	32 27%	492 24%	1 14%~	3 16%~	5 31%~	6 23%~	15 41%~	1 10%~	27 33%~	~	~	~	~	~	1 12%~	31 29%~	20 26%~	11 28%~	9 24%~	22 29%~	
NOT ANSWERED	2	61			1		1		2							2	1	1		2	
VALID CASES	119	2053	7	19	16	26	37	10	82						8	8	107	76	40	38	77
NUMBER OF RESPONDENTS	121 100%	2114 100%	7 100%	19 100%	17 100%	26 100%	38 100%	10 100%	84 100%						8 100%	8 100%	109 100%	77 100%	41 100%	38 100%	79 100%

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

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

			AGE					RACE						ETHNICITY	HEALTH STATUS		GENDER				
	PSCS 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 ##	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		
Q13 WORST HEALTH CARE POSSIBLE	1 0.5%	27 0.7%	~	~	~	~	2%	~0.7%	~	~	~	~	~	~	~	1 ~0.5%	~	2%	~0.8%		
01	2 0.9%	7 0.2%	~	~	~	~	2%	9%	1%	~	~	~	~	~	~	2 ~1%	~	3%	~		
02	5 2%	49 1%	~	1 3%	2 6%	1 2%	1 2%	~	2 1%	~	~	~	~	1 8%	~	5 3%	1 0.7%	4 6%	2 3%	3 2%	
03	3 1%	78 2%	~	~	2 6%	~	1 2%	~	3 2%	~	~	~	~	~	~	3 2%	~	5%	3%	1 0.8%	
04	5 2%	87 2%	1 6%	~	1 3%	~	3 5%	~	3 2%	~	~	~	~	~	~	2 10%	3 2%	3 2%	2 3%	3 2%	
05	18 8%	281 7%	~	3 8%	5 14%	5 10%	4 7%	~	13 9%	~	~	~	~	~	~	1 5%	16 9%	11 8%	6 9%	3 4%	14 11%
06	14 7%	233 6%	1 6%	6 17%	1 3%	3 6%	2 3%	~	10 7%	~	~	~	~	~	~	~	13 7%	9 6%	4 6%	3 4%	10 8%
07	19 9%	502 13%*	5 31%	3 8%	3 9%	4 8%	2 3%*	~	10 7%	~	~	~	~	2 17%	4 20%	13 7%	14 10%	2 3%*	5 7%	12 9%	
08	54 25%	866 23%	5 31%	12 33%	8 23%	14 28%	13 21%	~	39 27%	~	~	~	~	2 17%	3 15%	47 25%	36 25%	17 27%	19 25%	33 25%	
09	37 17%	651 17%	~	6 17%	7 20%	11 22%	8 13%	5 45%	24 17%	~	~	~	~	4 33%	3 15%	33 18%	29 20%	8 13%	14 19%	23 17%	
BEST HEALTH CARE POSSIBLE	57 27%	1054 27%	4 25%	5 14%	6 17%	12 24%	25 41%*	5 45%	36 25%	~	~	~	~	3 25%	7 35%	50 27%	42 29%	15 23%	23 31%	33 25%	
#8-10 (NET)	148 69%	2571 67%	9 56%	23 64%	21 60%	37 74%	46 75%	10 91%	99 69%	~	~	~	~	9 75%	13 65%	130 70%	107 74%*	40 63%	56 75%	89 67%	

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	
		PSCS 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- AMER	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
9-10 (NET)	94 44%	1705 44%	4 25%	11 31%	13 37%	23 46%	33 54%	10 91%	60 42%	~	~	~	~	~	7 58%	10 50%	83 45%	71 49%*	23 36%	37 49%	56 42%
NOT ANSWERED	3	105				1	1	1	2							1	2	2	1	1	2
VALID CASES	215	3834	16	36	35	50	61	11	143					12	20	186	145	64	75	133	
NUMBER OF RESPONDENTS	218 100%	3939 100%	16 100%	36 100%	35 100%	51 100%	62 100%	12 100%	145 100%					12 100%	21 100%	188 100%	147 100%	65 100%	76 100%	135 100%	
MEAN	7.83	7.91	7.81	7.61	7.23	8.08	8.03	8.73	7.76					8.17	8.10	7.82	8.21	7.08	7.95	7.79	
p stat_(*=Sig @ p<=.05)		.545	~	~	~.287	.427		~.523	~	~	~	~	~	~	~	~	~.001*	.006*	.570	.740	

[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?

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE
			24	34	44	54	64	OVER	WHTE ##	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q14 NEVER	7 3%	112 3%		1 3%	2 6%	2 4%	2 3%	4 3%							7 4%	2 1%	5 8%	3 4%	4 3%	
SOMETIMES	52 24%	652 17%*	4 25%	10 28%	10 29%	8 16%	16 26%	1 8%	35 24%					3 25%	3 15%	46 25%	27 19%*	22 34%*	14 18%	35 26%
USUALLY	64 30%	1292 34%	6 38%	15 42%	9 26%	18 36%	12 20%*	2 17%	38 26%					6 50%	10 50%	52 28%	40 28%	21 32%	25 33%	37 28%
ALWAYS	93 43%	1764 46%	6 38%	10 28%	14 40%	22 44%	31 51%	9 75%	67 47%					3 25%	7 35%	82 44%	76 52%*	17 26%*	34 45%	57 43%
#ALWAYS + USUALLY (NET)	157 73%	3056 80%*	12 75%	25 69%	23 66%	40 80%	43 70%	11 92%	105 73%					9 75%	17 85%	134 72%	116 80%*	38 58%*	59 78%	94 71%
TOP BOX SCORE	93 43%	1764 46%	6 38%	10 28%	14 40%	22 44%	31 51%	9 75%	67 47%					3 25%	7 35%	82 44%	76 52%*	17 26%*	34 45%	57 43%
NOT ANSWERED	2	119				1	1	1	1						1	1	2			2
VALID CASES	216	3820	16	36	35	50	61	12	144					12	20	187	145	65	76	133
NUMBER OF RESPONDENTS	218	3939	16	36	35	51	62	12	145					12	21	188	147	65	76	135
	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?

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
Q15 YES	247 85%	4350 80%*	16 67%~	40 70%*	38 84%~	59 89%	74 95%*	14 93%~	173 91%*	~	~	~	~	~	12 86%~	16 59%~	223 87%~	177 83%	65 88%	91 80%	150 88%
NO	45 15%	1094 20%*	8 33%~	17 30%*	7 16%~	7 11%	4 5%*	1 7%~	18 9%*	~	~	~	~	~	2 14%~	11 41%~	32 13%~	35 17%	9 12%	23 20%	21 12%
NOT ANSWERED	5	228		1		1								1		2	1	1		2	
VALID CASES	292	5443	24	57	45	66	78	15	191						14	27	255	212	74	114	171
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%						15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%

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

	PSCS 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- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
			24	34	44	54	64	OVER	WHTE	##	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q16 NONE	46 20%	890 22%	5 31%~	11 29%~	8 22%~	10 17%	11 17%	1 8%~	33 20%	~	~	~	~	~	2 17%~	1 7%~	45 21%~	38 23%*	8 13%	23 26%	23 17%
1 TIME	68 29%	1017 25%	3 19%~	9 24%~	13 35%~	18 31%	20 30%	5 38%~	52 32%	~	~	~	~	~	1 8%~	6 40%~	60 28%~	53 32%	15 24%	25 28%	42 30%
2	44 19%	826 20%	4 25%~	7 18%~	5 14%~	12 21%	13 20%	2 15%~	32 20%	~	~	~	~	~	3 25%~	~	43 20%~	32 19%	11 18%	9 10%*	34 24%*
3	29 12%	578 14%	2 13%~	2 5%~	4 11%~	9 16%	7 11%	3 23%~	20 12%	~	~	~	~	~	2 17%~	3 20%~	24 11%~	21 13%	6 10%	13 15%	14 10%
4	19 8%	309 7%	1 6%~	2 5%~	3 8%~	5 9%	5 8%	2 15%~	11 7%	~	~	~	~	~	3 25%~	3 20%~	15 7%~	9 5%*	9 15%	5 6%	13 9%
5 TO 9	22 9%	401 10%	1 6%~	5 13%~	4 11%~	4 7%	7 11%	~	10 6%*	~	~	~	~	~	~	2 13%~	19 9%~	10 6%*	11 18%*	10 11%	11 8%
10 OR MORE TIMES	5 2%	98 2%	~	2 5%~	~	~	3 5%	~	4 2%	~	~	~	~	~	1 8%~	~	5 2%~	3 2%	2 3%	3 3%	2 1%
NOT ANSWERED	14	232		2	1	1	8	1	11							1	12	11	3	3	11
VALID CASES	233	4118	16	38	37	58	66	13	162						12	15	211	166	62	88	139
NUMBER OF RESPONDENTS	247	4350	16	40	38	59	74	14	173						12	16	223	177	65	91	150
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q15 = YES]

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		GENDER		
	PSCS 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 AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
								WHTE	##	##	#	##	##	TI	IC	IC	GOOD	POOR		
Q17 NEVER	4 2%	58 2%	~	~	~	4%	2%	8%	2%	~	~	~	~	~	~	2%	0.8%	6%	3%	2%
SOMETIMES	16 9%	230 7%	~	12%	10%	6%	9%	~	9%	~	~	~	10%	~	8%	6%	13%	8%	8%	
USUALLY	34 18%	675 21%	27%	19%	21%	17%	16%	17%	19%	~	~	~	~	20%	23%	18%	19%	17%	16%	20%
ALWAYS	132 71%	2229 70%	73%	69%	69%	73%	73%	75%	71%	~	~	~	~	70%	77%	71%	75%	65%	73%	71%
#ALWAYS + USUALLY (NET)	166 89%	2905 91%	100%	88%	90%	90%	89%	92%	89%	~	~	~	~	90%	100%	89%	94%*	81%	89%	91%
TOP BOX SCORE	132 71%	2229 70%	73%	69%	69%	73%	73%	75%	71%	~	~	~	~	70%	77%	71%	75%	65%	73%	71%
NOT ANSWERED	1	27		1											1		1		1	
VALID CASES	186	3193	11	26	29	48	55	12	129					10	13	166	127	54	64	116
NUMBER OF RESPONDENTS	187	3220	11	27	29	48	55	12	129					10	14	166	128	54	65	116
	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?

	PSCS 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/ ILND #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q18 NEVER	2 1%	63 2%	~	~	3%~	2%~	~	0.8%	~	~	~	~	~	~	~	1%~	0.8%	2%	~	2%
SOMETIMES	17 9%	266 8%	18%~	15%~	7%~	4%~	7%~	8%~	10%	~	~	~	~	10%~	~	9%~	6%	13%	8%	9%
USUALLY	32 17%	675 21%	~	11%~	21%~	19%~	18%~	17%~	19%	~	~	~	~	10%~	7%~	17%~	15%	20%	20%	15%
ALWAYS	136 73%	2196 69%	82%~	74%~	69%~	75%~	75%~	75%~	70%	~	~	~	~	80%~	93%~	72%~	78%*	65%	72%	75%
#ALWAYS + USUALLY (NET)	168 90%	2872 90%	82%~	85%~	90%~	94%~	93%~	92%~	89%	~	~	~	~	90%~	100%~	90%~	93%	85%	92%	90%
TOP BOX SCORE	136 73%	2196 69%	82%~	74%~	69%~	75%~	75%~	75%~	70%	~	~	~	~	80%~	93%~	72%~	78%*	65%	72%	75%
NOT ANSWERED		19																		
VALID CASES	187	3201	11	27	29	48	55	12	129					10	14	166	128	54	65	116
NUMBER OF RESPONDENTS	187 100%	3220 100%	11 100%	27 100%	29 100%	48 100%	55 100%	12 100%	129 100%					10 100%	14 100%	166 100%	128 100%	54 100%	65 100%	116 100%

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

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	PSCS 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 AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
								WHTE	##	##	#	##	##	TI	IC	IC	GOOD	POOR		
Q19 NEVER	5 3%	78 2%	18 ~	25 4%~	35 ~	45 4%~	55 4%	65 ~	4 3%	~	~	~	~	~	~	5 3%~	2 2%	3 6%	2 3%	3 3%
SOMETIMES	9 5%	205 6%	2 ~	1 7%~	1 4%~	1 2%~	1 2%	1 8%~	5 4%	~	~	~	~	1 10%~	6 ~	2 4%~	4 2%*	7 7%	2 3%	4 3%
USUALLY	27 15%	539 17%	3 27%~	5 19%~	4 14%~	5 10%~	9 16%	1 8%~	20 16%	~	~	~	~	~	3 21%~	24 15%~	18 14%	8 15%	12 18%	15 13%
ALWAYS	145 78%	2374 74%	8 73%~	19 70%~	23 82%~	40 83%~	43 78%	10 83%~	99 77%	~	~	~	~	9 90%~	11 79%~	130 79%~	105 83%*	39 72%	49 75%	93 81%
#ALWAYS + USUALLY (NET)	172 92%	2913 91%	11 100%~	24 89%~	27 96%~	45 94%~	52 95%	11 92%~	119 93%	~	~	~	~	9 90%~	14 100%~	154 93%~	123 97%*	47 87%	61 94%	108 94%
TOP BOX SCORE	145 78%	2374 74%	8 73%~	19 70%~	23 82%~	40 83%~	43 78%	10 83%~	99 77%	~	~	~	~	9 90%~	11 79%~	130 79%~	105 83%*	39 72%	49 75%	93 81%
NOT ANSWERED	1	24			1				1						1	1				1
VALID CASES	186	3196	11	27	28	48	55	12	128					10	14	165	127	54	65	115
NUMBER OF RESPONDENTS	187 100%	3220 100%	11 100%	27 100%	29 100%	48 100%	55 100%	12 100%	129 100%					10 100%	14 100%	166 100%	128 100%	54 100%	65 100%	116 100%

[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?

	PSCS 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/ ILND	AMER IND/ ALSK	OTH R	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	& FAIR & POOR	MALE	FE- MALE
			24	34	44	54	64	OVER	WHTE ##	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q20 NEVER	8 4%	89 3%	1 ~	1 4%~	2 3%~	2 4%~	1 4%~	6 5%	~	~	~	~	~	~	7 4%~	3 2%	4 7%	3 5%	4 3%	
SOMETIMES	14 7%	317 10%	3 ~	2 11%~	2 7%~	5 4%~	9 9%	9 7%	~	~	~	~	1 10%~	12 7%~	5 4%*	7 13%	5 8%	7 6%		
USUALLY	47 25%	782 24%	3 27%~	8 30%~	8 28%~	11 23%~	11 20%	4 33%~	30 23%	~	~	~	~	5 50%~	3 21%~	42 25%~	32 25%	13 24%	10 15%*	35 30%*
ALWAYS	118 63%	2009 63%	8 73%~	15 56%~	18 62%~	33 69%~	37 67%	7 58%~	84 65%	~	~	~	~	4 40%~	11 79%~	105 63%~	88 69%*	30 56%	47 72%*	70 60%
#ALWAYS + USUALLY (NET)	165 88%	2790 87%	11 100%~	23 85%~	26 90%~	44 92%~	48 87%	11 92%~	114 88%	~	~	~	~	9 90%~	14 100%~	147 89%~	120 94%*	43 80%*	57 88%	105 91%
TOP BOX SCORE	118 63%	2009 63%	8 73%~	15 56%~	18 62%~	33 69%~	37 67%	7 58%~	84 65%	~	~	~	~	4 40%~	11 79%~	105 63%~	88 69%*	30 56%	47 72%*	70 60%
NOT ANSWERED		24																		
VALID CASES	187	3196	11	27	29	48	55	12	129					10	14	166	128	54	65	116
NUMBER OF RESPONDENTS	187 100%	3220 100%	11 100%	27 100%	29 100%	48 100%	55 100%	12 100%	129 100%					10 100%	14 100%	166 100%	128 100%	54 100%	65 100%	116 100%

[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?

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q21 YES	121 65%	2002 63%	4 36%~	19 70%~	18 62%~	34 71%~	32 58%	10 83%~	79 61%	~	~	~	~	~	80%~	8 57%~	108 65%~	76 59%*	41 76%*	41 63%	75 65%
NO	66 35%	1173 37%	7 64%~	8 30%~	11 38%~	14 29%~	23 42%	2 17%~	50 39%	~	~	~	~	~	20%~	2 43%~	58 35%~	52 41%*	13 24%*	24 37%	41 35%
NOT ANSWERED		45																			
VALID CASES	187	3175	11	27	29	48	55	12	129						10	14	166	128	54	65	116
NUMBER OF RESPONDENTS	187 100%	3220 100%	11 100%	27 100%	29 100%	48 100%	55 100%	12 100%	129 100%						10 100%	14 100%	166 100%	128 100%	54 100%	65 100%	116 100%

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

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

			AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER		
	PSCS 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- AMER	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	FE- MALE	MALE
Q22 NEVER	10 8%	115 6%	1 25%	3 17%	1 6%	4 12%	1 3%	8 10%	~	~	~	~	~	1 13%	10 9%	7 9%	3 7%	4 10%	6 8%	
SOMETIMES	19 16%	272 14%	~	3 17%	4 24%	5 15%	5 16%	1 19%	~	~	~	~	~	1 13%	1 13%	17 16%	10 13%	7 18%	2 5%	16 21%
USUALLY	30 25%	568 30%	1 25%	4 22%	4 24%	12 35%	7 22%	1 10%	~	~	~	~	~	1 13%	3 38%	26 25%	19 25%	10 25%	10 26%	19 25%
ALWAYS	59 50%	925 49%	2 50%	8 44%	8 47%	13 38%	19 59%	8 80%	~	~	~	~	~	5 63%	4 50%	53 50%	39 52%	20 50%	23 59%	34 45%
#ALWAYS + USUALLY (NET)	89 75%	1493 79%	3 75%	12 67%	12 71%	25 74%	26 81%	9 90%	~	~	~	~	~	6 75%	7 88%	79 75%	58 77%	30 75%	33 85%	53 71%
TOP BOX SCORE	59 50%	925 49%	2 50%	8 44%	8 47%	13 38%	19 59%	8 80%	~	~	~	~	~	5 63%	4 50%	53 50%	39 52%	20 50%	23 59%	34 45%
NOT ANSWERED	3	69	1	1				1							2	1	1	2		
VALID CASES	118	1881	4	18	17	34	32	10	78					8	8	106	75	40	39	75
NUMBER OF RESPONDENTS	121	1950	4	19	18	34	32	10	79					8	8	108	76	41	41	75
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		GENDER			
	PSCS 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 ##	AS-IAN ##	NATV HAW/ PAC ILND #	AMER ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE	
	Q23 WORST PERSONAL DOCTOR POSSIBLE	1 0.4%	21 0.5%	~	~	~	~	2%	~0.6%	~	~	~	~	~	~	~	1 ~0.5%	~	1 2%	1 1%	~
01	4 2%	38 0.9%	~	~	1 3%	2 3%	1 2%	~	~	~	~	~	~	~	~	4 2%	~	4 6%*	2 2%	2 1%	
02		42 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
03	4 2%	61 2%	~	2 5%	~	~	1 2%	1 8%	~	~	~	~	~	1 8%	~	4 2%	1 0.6%	3 5%	2 2%	2 1%	
04	1 0.4%	88 2%*	~	~	~	1 2%	~	~0.6%	~	~	~	~	~	~	~	1 ~0.5%	1 0.6%	~	~	1 ~0.7%	
05	15 7%	212 5%	1 7%	2 5%	4 11%	4 7%	2 3%	~	~	~	~	~	~	~	~	1 7%	12 6%	10 6%	3 5%	5 6%	8 6%
06	14 6%	181 4%	1 7%	4 11%	2 5%	3 5%	3 5%	~	~	~	~	~	~	~	~	~	13 6%	9 6%	3 5%	3 3%	10 7%
07	14 6%	352 9%	2 13%	5 14%	2 5%	~	5 8%	~	~	~	~	~	~	1 8%	1 7%	13 6%	13 8%*	1 2%*	5 6%	9 7%	
08	36 16%	703 17%	2 13%	3 8%	10 27%	10 17%	9 14%	1 8%	~	~	~	~	~	2 17%	1 7%	34 16%	24 15%	12 19%	14 16%	21 15%	
09	52 23%	736 18%	1 7%	7 19%	7 19%	17 29%	15 23%	5 38%	~	~	~	~	~	3 25%	4 27%	47 23%	40 25%	12 19%	17 20%	35 25%	
BEST PERSONAL DOCTOR POSSIBLE	89 39%	1648 40%	8 53%	14 38%	11 30%	21 36%	27 42%	6 46%	~	~	~	~	~	5 42%	8 53%	78 38%	65 40%	23 37%	37 43%	50 36%	
#8-10 (NET)	177 77%	3087 76%	11 73%	24 65%	28 76%	48 83%	51 80%	12 92%	~	~	~	~	~	10 83%	13 87%	159 77%	129 79%	47 76%	68 79%	106 77%	

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				
	PSCS 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- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE	
9-10 (NET)	141 61%	2384 58%	9 60%~	21 57%~	18 49%~	38 66%	42 66%	11 85%~	97 61%	~	~	~	~	~	8 67%~	12 80%~	125 60%~	105 64%	35 56%	54 63%	85 62%
NOT ANSWERED		17 266	1	3	1	1	10	1	15							1	16	14	3	5	12
VALID CASES	230	4084	15	37	37	58	64	13	158					12	15	207	163	62	86	138	
NUMBER OF RESPONDENTS	247 100%	4350 100%	16 100%	40 100%	38 100%	59 100%	74 100%	14 100%	173 100%					12 100%	16 100%	223 100%	177 100%	65 100%	91 100%	150 100%	
MEAN	8.36	8.33	8.67	8.16	8.11	8.40	8.50	8.92	8.27					8.58	9.07	8.33	8.61	7.85	8.38	8.39	
p stat_(*=Sig @ p<=.05)		.800	~	~	~.878	.523	~	.317	~	~	~	~	~	~	~	~	~.018*	.071	.900	.790	

[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?

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	FE- MALE	MALE	
Q24 YES	127 43%	2150 40%	5 21%	20 34%	21 47%	32 48%	32 41%	12 80%	83 43%	~	~	~	~	~	8 57%	9 33%	112 44%	73 34%*	49 65%*	51 44%	71 42%
NO	165 57%	3272 60%	19 79%	38 66%	24 53%	34 52%	46 59%	3 20%	108 57%	~	~	~	~	~	6 43%	18 67%	144 56%	139 66%*	26 35%*	64 56%	100 58%
NOT ANSWERED	5	249				1								1		1		1		1	
VALID CASES	292	5422	24	58	45	66	78	15	191						14	27	256	212	75	115	171
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%						15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%



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

	PSCS 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/ ILND	AMER IND/ PAC	ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	& FAIR & POOR	MALE	FE- MALE
			24	34	44	54	64	OVER	WHTE	##	##	#	##	##	##	TI	PAN- IC	PAN- IC	GOOD	POOR	MALE
Q25 NEVER	13 11%	123 6%	1 25%~	1 5%~	6 30%~	4 13%~	~	9 11%~	~	~	~	~	~	~	1 11%~	11 10%~	5 7%	7 15%~	7 14%	5 7%	
SOMETIMES	29 24%	379 19%	2 50%~	6 30%~	4 20%~	8 25%~	6 20%~	2 17%~	18 23%~	~	~	~	~	2 25%~	1 11%~	27 25%~	15 21%	13 28%	13 26%	15 22%	
USUALLY	26 21%	576 29%*	~	3 15%~	1 5%~	9 28%~	11 37%~	2 17%~	18 23%~	~	~	~	~	4 50%~	1 11%~	25 23%~	17 24%	9 19%	6 12%*	20 29%*	
ALWAYS	55 45%	938 46%	1 25%~	10 50%~	9 45%~	11 34%~	13 43%~	8 67%~	34 43%~	~	~	~	~	2 25%~	6 67%~	45 42%~	34 48%	18 38%	24 48%	28 41%	
#ALWAYS + USUALLY (NET)	81 66%	1514 75%*	1 25%~	13 65%~	10 50%~	20 63%~	24 80%~	10 83%~	52 66%~	~	~	~	~	6 75%~	7 78%~	70 65%~	51 72%	27 57%	30 60%	48 71%	
TOP BOX SCORE	55 45%	938 46%	1 25%~	10 50%~	9 45%~	11 34%~	13 43%~	8 67%~	34 43%~	~	~	~	~	2 25%~	6 67%~	45 42%~	34 48%	18 38%	24 48%	28 41%	
NOT ANSWERED	4	70	1		1		2		4							4	2	2	1	3	
VALID CASES	123	2016	4	20	20	32	30	12	79					8	9	108	71	47	50	68	
NUMBER OF RESPONDENTS	127	2086	5	20	21	32	32	12	83					8	9	112	73	49	51	71	
	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?

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	& FAIR & POOR	MALE	FE- MALE
			24	34	44	54	64	OVER	WHTE ##	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q26 NONE	10 8%	110 5%	1 20%~	1 5%~	2 10%~	3 9%~	2 7%~	9 11%~	~	~	~	~	~	~	9 8%~	4 6%	5 11%~	6 12%	3 4%	
1 SPECIALIST	70 56%	1016 50%	3 60%~	13 65%~	13 65%~	19 59%~	14 47%~	5 42%~	43 54%~	~	~	~	~	5 63%~	4 44%~	62 57%~	47 65%*	19 40%~	30 59%	37 54%
2	26 21%	508 25%	1 20%~	2 10%~	2 10%~	7 22%~	10 33%~	3 25%~	15 19%~	~	~	~	~	2 25%~	4 44%~	21 19%~	17 24%	9 19%~	8 16%	17 25%
3	9 7%	258 13%*	~	4 20%~	2 10%~	~	1 3%~	2 17%~	6 8%~	~	~	~	~	~	9 8%~	4 6%	5 11%~	4 8%	5 7%	
4	6 5%	69 3%	~	~	~	2 6%~	3 10%~	1 8%~	5 6%~	~	~	~	~	~	1 11%~	5 5%~	~	6 13%~	3 6%	3 4%
5 OR MORE SPECIALISTS	3 2%	55 3%	~	~	1 5%~	1 3%~	~	1 8%~	2 3%~	~	~	~	~	1 13%~	~	3 3%~	~	3 6%~	~	3 4%~
NOT ANSWERED	3	71			1		2		3						3	1	2		3	
VALID CASES	124	2015	5	20	20	32	30	12	80					8	9	109	72	47	51	68
NUMBER OF RESPONDENTS	127	2086	5	20	21	32	32	12	83					8	9	112	73	49	51	71
	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?

	PSCS 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 #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q27 WORST SPECIALIST POSSIBLE	2 2%	19 1%	~	~	~	2 7%	~	2 3%	~	~	~	~	~	~	~	2 2%	1 1%	1 2%	1 2%	1 2%	
01	1 0.9%	7 0.4%	~	~	1 6%	~	~	~	~	~	~	~	~	~	~	1 1%	1 1%	~	~	1 2%	
02	3 3%	19 1%	~	1 5%	~	2 7%	~	2 3%	~	~	~	~	~	~	~	3 3%	2 3%	1 2%	2 4%	1 2%	
03	1 0.9%	32 2%	25%	~	~	~	~	1 1%	~	~	~	~	~	~	~	1 1%	1 1%	~	~	1 2%	
04	1 0.9%	32 2%	~	~	1 6%	~	~	~	~	~	~	~	~	~	1 11%	~	~	1 2%	1 2%	~	
05	6 5%	67 4%	~	1 5%	2 11%	3 11%	~	5 7%	~	~	~	~	~	~	~	6 6%	2 3%	4 10%	1 2%	5 8%	
06	3 3%	73 4%	~	~	~	2 7%	1 4%	3 4%	~	~	~	~	~	~	~	3 3%	3 4%	~	~	3 5%	
07	5 4%	158 8%*	~	2 11%	2 11%	1 3%	~	4 6%	~	~	~	~	~	~	~	5 5%	2 3%	3 7%	1 2%	4 6%	
08	16 14%	318 17%	25%	1 11%	2 17%	3 14%	4 11%	3 11%	1 8%	10 14%	~	~	~	~	2 25%	13 13%	9 13%	5 12%	6 13%	8 12%	
09	23 20%	355 19%	25%	1 26%	5 11%	2 18%	8 14%	4 14%	3 25%	16 23%	~	~	~	~	3 38%	2 22%	21 21%	15 22%	8 19%	12 27%	11 17%
BEST SPECIALIST POSSIBLE	53 46%	797 42%	25%	1 42%	8 39%	7 41%	12 54%	15 67%	8 67%	28 39%	~	~	~	~	3 38%	6 67%	45 45%	32 47%	19 45%	20 44%	31 48%
#8-10 (NET)	92 81%	1470 78%	75%	3 79%	15 79%	12 67%	24 83%	22 79%	12 100%	54 76%	~	~	~	~	8 100%	8 89%	79 79%	56 82%	32 76%	38 84%	50 77%

Continued

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	PSCS 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 ##	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR #	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	FE-MALE			
9-10 (NET)	76 67%	1152 61%	2 50%~	13 68%~	9 50%~	20 69%~	19 68%~	11 92%~	44 62%~	~	~	~	~	~	6 75%~	8 89%~	66 66%~	47 69%~	27 64%~	32 71%~	42 65%~
NOT ANSWERED		16																			
VALID CASES	114	1878	4	19	18	29	28	12	71					8	9	100	68	42	45	65	
NUMBER OF RESPONDENTS	114 100%	1894 100%	4 100%	19 100%	18 100%	29 100%	28 100%	12 100%	71 100%					8 100%	9 100%	100%	68 100%	42 100%	45 100%	65 100%	
MEAN	8.44	8.45	7.50	8.53	7.83	8.38	8.39	9.58	8.20					9.13	9.11	8.36	8.49	8.31	8.42	8.42	
p stat_(*=Sig @ p<=.05)		.975	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		PSCS 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- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE
Q28 YES	53 18%	1069 20%	15 ~ 26%	11 24%	11 ~ 17%	13 17%	2 13%	39 21%	~	~	~	~	~	4 ~ 29%	1 4%	51 20%	35 17%	16 21%	21 18%	31 18%	
NO	238 82%	4323 80%	24 100%	43 ~ 74%	34 76%	54 ~ 83%	65 83%	13 87%	151 79%	~	~	~	~	10 ~ 71%	26 96%	204 80%	176 83%	59 79%	94 82%	139 82%	
NOT ANSWERED	6	279				2		1						1		2	2		1	1	
VALID CASES	291	5392	24	58	45	65	78	15	190					14	27	255	211	75	115	170	
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%					15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%	

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

			AGE					RACE						ETHNICITY		HEALTH STATUS		GENDER	
	PSCS 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 ##	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	MALE
Q29 NEVER	6 12%	102 11%	2 ~ 13%	4 ~ 36%	~	~	4 ~ 11%	~	~	~	~	~	1 ~ 25%	~	6 ~ 12%	5 15%	1 6%	4 20%	2 6%
SOMETIMES	22 42%	354 37%	6 ~ 40%	5 50%	5 45%	5 38%	15 ~ 39%	~	~	~	~	~	3 ~ 75%	1 100%	20 40%	15 44%	6 38%	6 30%	15 48%
USUALLY	17 33%	333 35%	6 ~ 40%	4 40%	~	6 46%	1 50%	14 ~ 37%	~	~	~	~	~	~	17 ~ 34%	11 32%	5 31%	9 45%	8 26%
ALWAYS	7 13%	171 18%	1 ~ 7%	1 10%	2 18%	2 15%	1 50%	5 ~ 13%	~	~	~	~	~	~	7 ~ 14%	3 9%	4 25%	1 5%	6 19%
#ALWAYS + USUALLY (NET)	24 46%	504 52%	7 ~ 47%	5 50%	2 18%	8 62%	2 100%	19 ~ 50%	~	~	~	~	~	~	24 ~ 48%	14 41%	9 56%	10 50%	14 45%
TOP BOX SCORE	7 13%	171 18%	1 ~ 7%	1 10%	2 18%	2 15%	1 50%	5 ~ 13%	~	~	~	~	~	~	7 ~ 14%	3 9%	4 25%	1 5%	6 19%
NOT ANSWERED	1	35	1					1							1	1		1	
VALID CASES	52	961	15	10	11	13	2	38					4	1	50	34	16	20	31
NUMBER OF RESPONDENTS	53	996	15	11	11	13	2	39					4	1	51	35	16	21	31
	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?

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q30 YES	77 26%	1502 28%	5 21%	16 28%	10 22%	16 24%	21 27%	6 40%	44 23%	~	~	~	~	~	4 29%	9 33%	64 25%	52 25%	22 29%	27 23%	46 27%
NO	214 74%	3866 72%	19 79%	41 72%	35 78%	50 76%	57 73%	9 60%	147 77%	~	~	~	~	~	10 71%	18 67%	191 75%	159 75%	53 71%	88 77%	124 73%
NOT ANSWERED	6	303	1	1										1		2	2			1	1
VALID CASES	291	5368	24	57	45	66	78	15	191					14	27	255	211	75	115	170	
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%					15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%	

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	
	PSCS 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 AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE
								WHTE	##	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q31 NEVER	3 4%	56 4%		1 ~ 6%~			1 ~ 17%~	2 5%~							2 3%~	2 4%~			1 4%~	1 2%~
SOMETIMES	10 13%	267 20%	2 40%~	1 6%~	2 22%~	1 6%~	2 10%~	1 17%~	5 12%~					1 25%~	1 11%~	8 13%~	1 16%~	3 5%~	6 11%~	6 14%~
USUALLY	24 32%	405 30%		6 ~ 38%~	4 44%~	5 31%~	6 30%~	2 33%~	15 36%~					2 50%~	2 22%~	21 34%~	14 28%~	9 41%~	10 37%~	13 30%~
ALWAYS	38 51%	624 46%	3 60%~	8 50%~	3 33%~	10 63%~	12 60%~	2 33%~	20 48%~					1 25%~	6 67%~	31 50%~	26 52%~	12 55%~	13 48%~	24 55%~
#ALWAYS + USUALLY (NET)	62 83%	1029 76%	3 60%~	14 88%~	7 78%~	15 94%~	18 90%~	4 67%~	35 83%~					3 75%~	8 89%~	52 84%~	40 80%~	21 95%~	23 85%~	37 84%~
TOP BOX SCORE	38 51%	624 46%	3 60%~	8 50%~	3 33%~	10 63%~	12 60%~	2 33%~	20 48%~					1 25%~	6 67%~	31 50%~	26 52%~	12 55%~	13 48%~	24 55%~
NOT ANSWERED	2	48			1		1	2							2	2				2
VALID CASES	75	1351	5	16	9	16	20	6	42					4	9	62	50	22	27	44
NUMBER OF RESPONDENTS	77	1399	5	16	10	16	21	6	44					4	9	64	52	22	27	46
	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?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	PSCS 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 AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE
								WHTE	##	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q32 NEVER	1 1%	18 1%		1 ~ 6%~				1 2%~							1 2%~	1 2%~			1 4%~	
SOMETIMES	5 7%	102 8%	1 20%~	1 6%~	1 11%~	1 6%~	1 5%~	2 5%~					1 25%~		5 8%~	3 6%~	2 10%~		1 4%~	4 9%~
USUALLY	14 19%	291 21%	2 40%~	4 25%~	1 11%~	3 19%~	3 16%~	8 20%~							4 44%~	9 15%~	9 18%~	4 19%~	5 19%~	8 19%~
ALWAYS	54 73%	946 70%	2 40%~	10 63%~	7 78%~	12 75%~	15 79%~	6 100%~	30 73%~					3 75%~	5 56%~	46 75%~	37 74%~	15 71%~	20 74%~	31 72%~
#ALWAYS + USUALLY (NET)	68 92%	1237 91%	4 80%~	14 88%~	8 89%~	15 94%~	18 95%~	6 100%~	38 93%~					3 75%~	9 100%~	55 90%~	46 92%~	19 90%~	25 93%~	39 91%~
TOP BOX SCORE	54 73%	946 70%	2 40%~	10 63%~	7 78%~	12 75%~	15 79%~	6 100%~	30 73%~					3 75%~	5 56%~	46 75%~	37 74%~	15 71%~	20 74%~	31 72%~
NOT ANSWERED	3	41			1		2	3							3	2	1			3
VALID CASES	74	1358	5	16	9	16	19	6	41					4	9	61	50	21	27	43
NUMBER OF RESPONDENTS	77	1399	5	16	10	16	21	6	44					4	9	64	52	22	27	46
	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?

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q33 YES	100 34%	1713 32%	11 46%~	18 31%	14 31%~	26 39%	26 33%	1 7%~	59 31%	~	~	~	~	~	5 33%~	11 41%~	85 33%~	64 30%*	33 45%*	43 37%	52 31%
NO	191 66%	3590 68%	13 54%~	40 69%	31 69%~	40 61%	52 67%	13 93%~	130 69%	~	~	~	~	~	10 67%~	16 59%~	170 67%~	148 70%*	41 55%*	72 63%	118 69%
NOT ANSWERED	6	368				1		1	2								2	1	1	1	1
VALID CASES	291	5303	24	58	45	66	78	14	189						15	27	255	212	74	115	170
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%						15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%

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

	PSCS 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/ ILND #	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
PQ34 NEVER	2 0.7%	82 2%	1 5%~	~	~	~	1 1%	1 ~0.5%	~	~	~	~	~	~	2 ~0.8%	2 1%	1 ~0.9%	1 0.6%		
SOMETIMES	14 5%	286 5%	2 9%~	3 5%	3 7%~	~	5 7%	8 ~4%	~	~	~	~	1 7%~	2 7%~	11 4%~	6 3%*	8 11%*	6 5%	7 4%	
USUALLY	44 15%	671 13%	4 18%~	11 19%	5 11%~	16 24%*	7 9%*	25 ~13%	~	~	~	~	4 ~27%	5 19%~	38 15%~	32 15%	11 15%	17 15%	26 16%	
ALWAYS	226 79%	4198 80%	15 68%~	44 76%	37 82%~	50 76%	63 83%	14 100%~	153 82%	~	~	~	~	10 ~67%	20 74%~	200 80%~	170 81%	53 74%	90 79%	133 80%
#ALWAYS + USUALLY (NET)	270 94%	4868 93%	19 86%~	55 95%	42 93%~	66 100%~	70 92%	14 100%~	178 95%	~	~	~	~	14 ~93%	25 93%~	238 95%~	202 96%	64 89%	107 94%	159 95%
TOP BOX SCORE	226 79%	4198 80%	15 68%~	44 76%	37 82%~	50 76%	63 83%	14 100%~	153 82%	~	~	~	~	10 ~67%	20 74%~	200 80%~	170 81%	53 74%	90 79%	133 80%
NOT ANSWERED	5	86	2				2	2							4	2	2	1	3	
VALID CASES	286	5236	22	58	45	66	76	14	187					15	27	251	210	72	114	167
NUMBER OF RESPONDENTS	291 100%	5322 100%	24 100%	58 100%	45 100%	66 100%	78 100%	14 100%	189 100%					15 100%	27 100%	255 100%	212 100%	74 100%	115 100%	170 100%

[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?

	PSCS 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 #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q35 WORST HEALTH PLAN POSSIBLE	4 1%	41 0.8%	1 ~	2% 2%	3 ~	4% 4%	~	3 2%	~	~	~	~	~	~	4 2%	4 2%	3 3%	1 0.6%		
01	1 0.4%	47 0.9%	1 ~	2% 2%	~	~	~	~	~	~	~	1 7%	1 ~0.4%	1 0.5%	~	~	1 ~0.6%			
02	1 0.4%	52 1%	~	~	1 2%	~	~	1 0.6%	~	~	~	~	~	1 0.4%	1 0.5%	~	1 0.6%			
03	4 1%	102 2%	~	~	2 5%	~	2 3%	3 2%	~	~	~	~	1 4%	3 1%	2 1%	2 3%	2 2%	2 1%		
04	13 5%	122 2%	1 4%	3 5%	2 5%	1 1%	5 7%	1 7%	8 4%	~	~	~	~	1 7%	1 4%	12 5%	7 3%	6 8%	3 3%	10 6%
05	25 9%	466 9%	1 4%	6 11%	7 16%	8 12%	1 1%	1 7%	14 8%	~	~	~	~	2 14%	2 7%	22 9%	19 9%	5 7%	7 6%	17 10%
06	31 11%	327 6%*	3 13%	6 11%	5 11%	12 18%	4 6%	21 12%	~	~	~	~	2 14%	2 7%	28 11%	21 10%	9 12%	15 14%	15 9%	
07	41 15%	646 13%	6 26%	8 14%	8 18%	4 6%*	13 19%	23 13%	~	~	~	~	2 14%	4 15%	34 14%	21 10%*	19 26%*	14 13%	25 15%	
08	53 19%	1048 21%	5 22%	12 21%	10 23%	10 15%	12 17%	3 20%	37 20%	~	~	~	~	3 11%	47 19%	44 22%*	8 11%*	19 17%	33 20%	
09	49 17%	797 16%	3 13%	12 21%	3 7%	13 19%	13 19%	5 33%	35 19%	~	~	~	~	3 21%	5 19%	44 18%	41 20%*	8 11%*	21 19%	28 17%
BEST HEALTH PLAN POSSIBLE	58 21%	1383 27%*	4 17%	8 14%	6 14%	16 24%	19 28%	5 33%	36 20%	~	~	~	~	3 21%	9 33%	49 20%	41 20%	17 23%	25 23%	33 20%
#8-10 (NET)	160 57%	3229 64%*	12 52%	32 56%	19 43%	39 58%	44 64%	13 87%	108 60%	~	~	~	~	6 43%	17 63%	140 57%	126 62%*	33 45%*	65 60%	94 57%

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	
		PSCS 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- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE
9-10 (NET)	107 38%	2180 43%	7 30%	20 35%	9 20%	29 43%	32 46%	10 67%	71 39%	~	~	~	~	~	6 43%	14 52%	93 38%	82 41%	25 34%	46 42%	61 37%
NOT ANSWERED	17	640	1	1	1		9		10					1		12	11	1	7	5	
VALID CASES	280	5031	23	57	44	67	69	15	181					14	27	245	202	74	109	166	
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%					15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%	
MEAN	7.54	7.78	7.65	7.35	6.91	7.48	7.96	8.53	7.57					7.00	8.00	7.50	7.60	7.41	7.63	7.50	
p stat_(*=Sig @ p<=.05)		.050	~.463		~.816	.046*		~.681	~	~	~	~	~	~	~	~	~.370	.526	.548	.737	

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		PSCS 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- AMER	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
Q35A YES	39 14%	663 12%	1 4%	8 14%	3 7%	11 17%	9 12%	5 33%	22 12%	~	~	~	~	~	7%	3 11%	34 13%	17 8%*	20 27%*	15 13%	22 13%
NO	248 86%	4665 88%	23 96%	50 86%	41 93%	55 83%	66 88%	10 67%	165 88%	~	~	~	~	~	93%	24 89%	218 87%	192 92%*	54 73%*	98 87%	147 87%
NOT ANSWERED	10	342			1	1	3		4					1		5		4	1	3	2
VALID CASES	287	5329	24	58	44	66	75	15	187					14	27	252	209	74	113	169	
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%					15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%	

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

	PSCS 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/ ILND	AMER IND/ PAC	ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	& FAIR & POOR	MALE	FE- MALE
			24	34	44	54	64	OVER	WHTE ##	##	#	##	##	##	TI	PAN- IC	PAN- IC	GOOD	POOR	MALE	MALE
Q35B NEVER	5 13%	127 21%	1 ~	3 13%	1 ~	3 27%	1 11%	2 9%	~	~	~	~	~	~	~	5 15%	2 12%	3 15%	1 7%	4 18%	
SOMETIMES	9 23%	93 16%	3 ~	2 38%	1 67%	3 9%	4 33%	~	~	~	~	~	~	~	~	1 33%	8 24%	2 12%	7 35%	4 27%	5 23%
USUALLY	9 23%	141 24%	2 ~	2 25%	3 18%	1 33%	5 20%	11 23%	~	~	~	~	1 100%	1 33%	7 21%	5 29%	4 20%	3 20%	5 23%		
ALWAYS	16 41%	234 39%	1 100%	2 25%	1 33%	5 45%	2 22%	4 80%	11 50%	~	~	~	~	~	~	1 33%	14 41%	8 47%	6 30%	7 47%	8 36%
#ALWAYS + USUALLY (NET)	25 64%	375 63%	1 100%	4 50%	1 33%	7 64%	5 56%	5 100%	16 73%	~	~	~	~	1 100%	2 67%	21 62%	13 76%	10 50%	10 67%	13 59%	
TOP BOX SCORE	16 41%	234 39%	1 100%	2 25%	1 33%	5 45%	2 22%	4 80%	11 50%	~	~	~	~	~	~	1 33%	14 41%	8 47%	6 30%	7 47%	8 36%
NOT ANSWERED		32																			
VALID CASES	39	595	1	8	3	11	9	5	22					1	3	34	17	20	15	22	
NUMBER OF RESPONDENTS	39	627	1	8	3	11	9	5	22					1	3	34	17	20	15	22	
	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?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		PSCS 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- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR		FE- MALE	
Q35C YES	45 16%	814 15%	1 4%	8 14%	8 18%	7 11%	17 23%	2 13%	23 12%*	~	~	~	~	~	14%	5 19%	38 15%	21 10%*	21 29%*	10 9%*	33 20%*
NO	241 84%	4498 85%	22 96%	50 86%	37 82%	58 89%	58 77%	13 87%	163 88%*	~	~	~	~	~	86%	22 81%	213 85%	188 90%*	52 71%*	103 91%*	135 80%*
NOT ANSWERED	11	359	1			2	3		5					1		6	4	2	3	3	
VALID CASES	286	5312	23	58	45	65	75	15	186					14	27	251	209	73	113	168	
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%					15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%	



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

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	& FAIR & POOR	MALE	FE- MALE
Q35D NEVER	12 29%	169 23%	3 ~ 38%	4 57%	1 14%	3 21%	7 ~ 35%	~	~	~	~	~	~	1 20%	10 29%	5 26%	6 32%	2 22%	9 30%	
SOMETIMES	12 29%	128 17%	2 ~ 25%	3 43%	1 14%	5 36%	5 ~ 25%	~	~	~	~	~	~	1 20%	10 29%	4 21%	6 32%	1 11%	10 33%	
USUALLY	5 12%	197 26%	1 ~ 13%	2 ~ 29%	1 7%	1 50%	3 15%	~	~	~	~	~	~	1 20%	4 12%	3 16%	2 11%	1 11%	4 13%	
ALWAYS	12 29%	251 34%	1 100%	2 25%	3 ~ 43%	5 36%	1 50%	5 25%	~	~	~	~	1 ~100%	2 40%	10 29%	7 37%	5 26%	5 56%	7 23%	
#ALWAYS + USUALLY (NET)	17 41%	448 60%	1 100%	3 38%	5 ~ 71%	6 43%	2 100%	8 40%	~	~	~	~	1 ~100%	3 60%	14 41%	10 53%	7 37%	6 67%	11 37%	
TOP BOX SCORE	12 29%	251 34%	1 100%	2 25%	3 ~ 43%	5 36%	1 50%	5 25%	~	~	~	~	1 ~100%	2 40%	10 29%	7 37%	5 26%	5 56%	7 23%	
NOT ANSWERED	4	29		1		3	3						1		4	2	2	1	3	
VALID CASES	41	745	1	8	7	7	14	2	20				1	5	34	19	19	9	30	
NUMBER OF RESPONDENTS	45	774	1	8	8	7	17	2	23				2	5	38	21	21	10	33	
	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?

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35E YES	168 58%	2942 55%	10 42%~	33 57%	23 51%~	39 60%	48 62%	12 80%~	112 59%	~	~	~	~	~	10 71%~	16 59%~	148 58%~	108 51%*	57 77%*	61 53%	103 61%
NO	122 42%	2408 45%	14 58%~	25 43%	22 49%~	26 40%	30 38%	3 20%~	78 41%	~	~	~	~	~	4 29%~	11 41%~	107 42%~	104 49%*	17 23%*	54 47%	67 39%
NOT ANSWERED	7	321				2			1						1		2	1	1	1	1
VALID CASES	290	5350	24	58	45	65	78	15	190						14	27	255	212	74	115	170
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%						15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%

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

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
			WHTE	##	##	#	##	##	##	##	##	##	##	##	##	##	##	##	##	##	##	
Q35F NO EFFORT AT ALL	12 7%	101 4%	18 ~	25 3%~	35 23%~	45 5%~	55 2%~	65 3%~	1 8%~	8	~	~	~	~	~	~	3 20%~	9 6%~	4 4%*	8 15%*	5 8%	7 7%
A LITTLE EFFORT WAS MADE	12 7%	195 7%	10 ~	27 10%~	16 5%~	34 5%~	37 11%~	11 ~	7	~	~	~	~	1 10%~	1 ~	11 8%~	4 4%*	7 13%	5 8%	6 6%		
SOME EFFORT WAS MADE	31 19%	696 25%	30 30%~	4 13%~	7 32%~	4 11%~	11 24%~	2 17%~	26 25%*	~	~	~	~	1 10%~	1 7%~	30 21%~	19 18%	11 20%	12 20%	19 19%		
A LOT OF EFFORT WAS MADE	106 66%	1801 64%	70 70%~	23 74%~	9 41%~	30 79%~	26 58%~	9 75%~	65 61%	~	~	~	~	8 80%~	11 73%~	92 65%~	76 74%*	29 53%*	37 63%	66 67%		
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	137 85%	2497 89%	100 100%~	27 87%~	16 73%~	34 89%~	37 82%~	11 92%~	91 86%	~	~	~	~	9 90%~	12 80%~	122 86%~	95 92%*	40 73%*	49 83%	85 87%		
TOP BOX SCORE	106 66%	1801 64%	70 70%~	23 74%~	9 41%~	30 79%~	26 58%~	9 75%~	65 61%	~	~	~	~	8 80%~	11 73%~	92 65%~	76 74%*	29 53%*	37 63%	66 67%		
NOT ANSWERED	7	82	2	1	1	3			6						1	6	5	2	2	5		
VALID CASES	161	2794	10	31	22	38	45	12	106					10	15	142	103	55	59	98		
NUMBER OF RESPONDENTS	168	2876	10	33	23	39	48	12	112					10	16	148	108	57	61	103		
	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?

	PSCS 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/ ILND	AMER IND/ PAC	ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q35G NO EFFORT AT ALL	15 9%	101 4%*	1 10%~	3 10%~	3 13%~	2 5%~	5 11%~	1 8%~	11 10%	~	~	~	~	~	~	2 13%~	13 9%~	8 8%	7 13%	6 10%	9 9%
A LITTLE EFFORT WAS MADE	10 6%	226 8%	~	1 3%~	2 9%~	2 5%~	4 9%~	~	4 4%	~	~	~	~	~	1 10%~	2 13%~	7 5%~	2 2%*	7 13%*	5 8%	4 4%
SOME EFFORT WAS MADE	34 21%	717 26%	2 20%~	7 23%~	10 43%~	6 16%~	8 17%~	1 8%~	29 27%*	~	~	~	~	~	1 10%~	1 7%~	33 23%~	25 24%	8 14%	10 17%	24 24%
A LOT OF EFFORT WAS MADE	104 64%	1741 63%	7 70%~	20 65%~	8 35%~	28 74%~	29 63%~	10 83%~	64 59%	~	~	~	~	~	8 80%~	10 67%~	91 63%~	69 66%	34 61%	39 65%	62 63%
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	138 85%	2458 88%	9 90%~	27 87%~	18 78%~	34 89%~	37 80%~	11 92%~	93 86%	~	~	~	~	~	9 90%~	11 73%~	124 86%~	94 90%*	42 75%*	49 82%	86 87%
TOP BOX SCORE	104 64%	1741 63%	7 70%~	20 65%~	8 35%~	28 74%~	29 63%~	10 83%~	64 59%	~	~	~	~	~	8 80%~	10 67%~	91 63%~	69 66%	34 61%	39 65%	62 63%
NOT ANSWERED	5	91	2	1	2	4	1	2	4						1	4	4	1	1	4	
VALID CASES	163	2785	10	31	23	38	46	12	108						10	15	144	104	56	60	99
NUMBER OF RESPONDENTS	168	2876	10	33	23	39	48	12	112						10	16	148	108	57	61	103
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35E = YES]

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

	PSCS 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/ ILND	AMER IND/ PAC	ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE	
Q35H NO EFFORT AT ALL	20 12%	190 7%*	~	2 6%~	5 22%~	4 11%~	8 17%~	1 8%~	14 13%	~	~	~	~	~	~	3 20%~	17 12%~	10 10%	10 18%	7 12%	13 13%	
A LITTLE EFFORT WAS MADE	10 6%	238 9%	10%~	1 6%~	2 4%~	1 5%~	2 7%~	3 ~	7 6%	~	~	~	~	~	1 10%~	~	9 6%~	2 2%*	7 13%*	3 5%	6 6%	
SOME EFFORT WAS MADE	38 23%	749 27%	20%~	2 26%~	8 35%~	8 21%~	9 20%~	3 25%~	31 29%*	~	~	~	~	~	1 10%~	1 7%~	37 26%~	26 25%	11 20%	13 22%	25 25%	
A LOT OF EFFORT WAS MADE	95 58%	1596 58%	70%~	7 61%~	19 61%~	9 39%~	24 63%~	26 57%~	8 67%~	56 52%*	~	~	~	~	~	8 80%~	11 73%~	81 56%~	66 63%	28 50%	37 62%	55 56%
#A LOT OF EFFORT WAS MADE + SOME EFFORT WAS MADE (NET)	133 82%	2345 85%	90%~	9 87%~	27 74%~	17 84%~	32 84%~	35 76%~	11 92%~	87 81%	~	~	~	~	~	9 90%~	12 80%~	118 82%~	92 88%*	39 70%*	50 83%	80 81%
TOP BOX SCORE	95 58%	1596 58%	70%~	7 61%~	19 61%~	9 39%~	24 63%~	26 57%~	8 67%~	56 52%*	~	~	~	~	~	8 80%~	11 73%~	81 56%~	66 63%	28 50%	37 62%	55 56%
NOT ANSWERED	5	103		2		1	2		4							1	4	4	1	1	4	
VALID CASES	163	2773	10	31	23	38	46	12	108					10	15	144	104	56	60	99		
NUMBER OF RESPONDENTS	168	2876	10	33	23	39	48	12	112					10	16	148	108	57	61	103		
	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?

	PSCS 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	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE MALE			
Q35I YES	107 37%	1870 35%	7 29%	20 36%	14 33%	29 44%	30 38%	6 40%	70 37%	~	~	~	~	~	7 50%	11 41%	93 37%	74 35%	32 43%	33 29%*	73 43%*
NO	180 63%	3406 65%	17 71%	36 64%	29 67%	37 56%	48 62%	9 60%	120 63%	~	~	~	~	~	7 50%	16 59%	159 63%	135 65%	42 57%	81 71%*	95 57%*
NOT ANSWERED	10	394		2	2	1			1						1		5	4	1	2	3
VALID CASES	287	5277	24	56	43	66	78	15	190						14	27	252	209	74	114	168
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%						15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		PSCS 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- AMER	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
Q35J #YES	91 90%	1588 89%	6 100%	19 100%	7 50%	26 96%	28 97%	4 80%	58 89%	~	~	~	~	~	6 86%	10 91%	78 90%	64 90%	27 90%	30 91%	60 90%
NO	10 10%	204 11%	~	~	7 50%	1 4%	1 3%	1 20%	7 11%	~	~	~	~	~	1 14%	1 9%	9 10%	7 10%	3 10%	3 9%	7 10%
NOT ANSWERED	6	60	1	1		2	1	1	5							6	3	2		6	
VALID CASES	101	1792	6	19	14	27	29	5	65						7	11	87	71	30	33	67
NUMBER OF RESPONDENTS	107	1852	7	20	14	29	30	6	70						7	11	93	74	32	33	73
	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?

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
		PSCS 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- AMER	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	FE- MALE
Q35K #YES	90 88%	1484 84%	6 86%	19 100%	9 64%	24 86%	26 93%	5 100%	56 86%	~	~	~	~	~	6 86%	11 100%	77 87%	65 90%	25 83%	27 82%	62 91%
NO	12 12%	292 16%	1 14%	~	5 36%	4 14%	2 7%	~	9 14%	~	~	~	~	~	1 14%	11 13%	7 10%	5 17%	6 18%	6 9%	
NOT ANSWERED	5	76		1		1	2	1	5							5	2	2		5	
VALID CASES	102	1776	7	19	14	28	28	5	65					7	11	88	72	30	33	68	
NUMBER OF RESPONDENTS	107	1852	7	20	14	29	30	6	70					7	11	93	74	32	33	73	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35I = YES]



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

	PSCS 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/ ILND	AMER IND/ ALSK	OTH R	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
			24	34	44	54	64	OVER	WHTE ##	##	#	##	##	TI	IC	IC	GOOD GOOD	POOR POOR	MALE	MALE	
Q35L NEVER	41 14%	692 13%	4 17%	11 20%	7 16%	9 14%	9 12%	1 7%	28 15%	~	~	~	~	~	1 7%	6 22%	35 14%	32 15%	9 12%	21 19%	20 12%
SOMETIMES	26 9%	623 12%	4 17%	4 7%	6 13%	7 11%	3 4%*	1 7%	14 8%	~	~	~	~	~	2 14%	2 7%	22 9%	14 7%	11 15%	8 7%	17 10%
USUALLY	60 21%	1195 23%	7 29%	12 22%	9 20%	15 23%	13 17%	3 20%	44 24%	~	~	~	~	~	3 21%	7 26%	52 21%	41 20%	18 24%	25 22%	34 20%
ALWAYS	157 55%	2698 52%	9 38%	28 51%	23 51%	33 52%	51 67%*	10 67%	100 54%	~	~	~	~	~	8 57%	12 44%	141 56%	120 58%	36 49%	59 52%	95 57%
#ALWAYS + USUALLY (NET)	217 76%	3894 75%	16 67%	40 73%	32 71%	48 75%	64 84%*	13 87%	144 77%	~	~	~	~	~	11 79%	19 70%	193 77%	161 78%	54 73%	84 74%	129 78%
TOP BOX SCORE	157 55%	2698 52%	9 38%	28 51%	23 51%	33 52%	51 67%*	10 67%	100 54%	~	~	~	~	~	8 57%	12 44%	141 56%	120 58%	36 49%	59 52%	95 57%
NOT ANSWERED	13	462		3		3	2		5						1		7	6	1	3	5
VALID CASES	284	5209	24	55	45	64	76	15	186						14	27	250	207	74	113	166
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%						15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%

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

	PSCS 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/ ILND #	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q35M ALWAYS	15 5%	310 6%	1 4%	4 7%	5 ~	4 8%	4 5%	9 ~	5%	~	~	~	~	~	~	~	14 6%	9 4%	5 7%	8 7%	6 4%	
USUALLY	17 6%	270 5%	1 4%	3 6%	4 9%	4 6%	4 5%	9 ~	5%	~	~	~	~	~	~	~	2 7%	14 6%	8 4%*	8 11%	4 4%	12 7%
SOMETIMES	54 19%	952 18%	5 21%	13 ~	7 24%	11 16%	14 17%	4 18%	27%~	40 21%	~	~	~	~	~	5 36%	4 15%	50 20%	40 19%	14 19%	15 13%*	39 23%*
NEVER	198 70%	3697 71%	17 71%	34 63%	34 76%	46 70%	54 71%	11 73%	129 69%	~	~	~	~	~	~	9 64%	21 78%	172 69%	150 72%	48 64%	87 76%*	109 66%
#NEVER + SOMETIMES (NET)	252 89%	4649 89%	22 92%	47 87%	41 91%	57 86%	68 89%	15 100%	169 90%	~	~	~	~	~	~	14 ~100%	25 93%	222 89%	190 92%*	62 83%	102 89%	148 89%
TOP BOX SCORE	198 70%	3697 71%	17 71%	34 63%	34 76%	46 70%	54 71%	11 73%	129 69%	~	~	~	~	~	~	9 64%	21 78%	172 69%	150 72%	48 64%	87 76%*	109 66%
NOT ANSWERED	13	442		4		1	2		4					1			7	6		2	5	
VALID CASES	284	5229	24	54	45	66	76	15	187					14	27	250	207	75	114	166		
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%					15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%		

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
	PSCS	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/	ALSK	MUL-	HIS-	HIS-	VERY	GOOD	FAIR		FE-	
ADLT	ADLT	24	34	44	54	64	OVER	WHTE	AFR-	IAN	ILND	NATV	OTHR	TI	IC	IC	GOOD	POOR	MALE	MALE		
Q35N																						
ALWAYS	5	79				1	4	2						1		5	2	3	2	3		
	2%	2%	~	~	~	2%	5%	1%	~	~	~	~	~	7%	~	2%	1%	4%	2%	2%		
USUALLY	7	129	1	3	1		2	5						1		7	5	2	3	4		
	2%	2%	4%	6%	2%	~	3%	3%	~	~	~	~	~	7%	~	3%	2%	3%	3%	2%		
SOMETIMES	42	739	2	11	6	14	6	2	31					4	2	39	24	18	16	25		
	15%	14%	8%	20%	13%	21%	8%*	13%	17%	~	~	~	~	29%	7%	16%	12%*	24%*	14%	15%		
NEVER	229	4276	21	40	38	51	64	13	149					8	25	199	176	52	93	134		
	81%	82%	88%	74%	84%	77%	84%	87%	80%	~	~	~	~	57%	93%	80%	85%*	69%*	82%	81%		
#NEVER + SOMETIMES (NET)	271	5015	23	51	44	65	70	15	180					12	27	238	200	70	109	159		
	96%	96%	96%	94%	98%	98%	92%	100%	96%	~	~	~	~	86%	100%	95%	97%	93%	96%	96%		
TOP BOX SCORE	229	4276	21	40	38	51	64	13	149					8	25	199	176	52	93	134		
	81%	82%	88%	74%	84%	77%	84%	87%	80%	~	~	~	~	57%	93%	80%	85%*	69%*	82%	81%		
NOT ANSWERED	14	448		4		1	2	4						1		7	6		2	5		
VALID CASES	283	5223	24	54	45	66	76	15	187					14	27	250	207	75	114	166		
NUMBER OF RESPONDENTS	297	5671	24	58	45	67	78	15	191					15	27	257	213	75	116	171		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%		

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

			AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	PSCS 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 ##	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
Q350 ALWAYS	6 2%	62 1%	1 4%	1 ~	1 2%	1 2%	3 4%	5 ~	~	~	~	~	~	~	~	6 2%	4 2%	2 3%	~	6 4%*
USUALLY	3 1%	77 1%	~	1 2%	2 ~	3 ~	~	1 0.5%	~	~	~	~	~	1 8%	~	3 1%	2 1%	1 1%	~	3 2%
SOMETIMES	33 12%	505 10%	4 17%	9 16%	6 13%	7 11%	6 8%	1 7%	22 12%	~	~	~	~	2 15%	2 7%	31 12%	18 9%*	15 20%*	15 13%	18 11%
NEVER	241 85%	4589 88%	19 79%	45 82%	38 84%	55 85%	67 88%	14 93%	159 85%	~	~	~	~	10 77%	25 93%	210 84%	183 88%*	57 76%*	98 87%	140 84%
#NEVER + SOMETIMES (NET)	274 97%	5094 97%	23 96%	54 98%	44 98%	62 95%	73 96%	15 100%	181 97%	~	~	~	~	12 92%	27 100%	241 96%	201 97%	72 96%	113 100%	158 95%*
TOP BOX SCORE	241 85%	4589 88%	19 79%	45 82%	38 84%	55 85%	67 88%	14 93%	159 85%	~	~	~	~	10 77%	25 93%	210 84%	183 88%*	57 76%*	98 87%	140 84%
NOT ANSWERED	14	438	3	2	2	2	4						2	7	6	3	4			
VALID CASES	283	5233	24	55	45	65	76	15	187					13	27	250	207	75	113	167
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%					15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%

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

	PSCS 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/ ILND	AMER IND/ PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35P																					
#YES DEFINITELY	194 70%	3547 69%	14 58%~	35 65%	30 68%~	45 69%	56 76%	12 80%~	127 69%	~	~	~	~	~	9 69%~	20 77%~	170 69%~	152 74%*	42 58%*	80 72%	112 68%
YES SOMEWHAT	65 23%	1203 23%	8 33%~	15 28%	10 23%~	15 23%	14 19%	2 13%~	44 24%	~	~	~	~	~	3 23%~	5 19%~	58 23%~	40 20%*	24 33%*	24 22%	40 24%
NO	20 7%	417 8%	2 8%~	4 7%	4 9%~	5 8%	4 5%	1 7%~	14 8%	~	~	~	~	~	1 8%~	1 4%~	19 8%~	13 6%	7 10%	7 6%	13 8%
NOT ANSWERED	18	503		4	1	2	4		6						2	1	10	8	2	5	6
VALID CASES	279	5168	24	54	44	65	74	15	185						13	26	247	205	73	111	165
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%						15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%

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?

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
Q35Q YES	172 60%	2983 57%	17 71%~	42 74%*	23 51%~	40 61%	41 53%	7 50%~	113 60%	~	~	~	~	~	11 79%~	16 59%~	152 60%~	133 63%	39 53%	59 51%*	112 66%*
NO	115 40%	2289 43%	7 29%~	15 26%*	22 49%~	26 39%	37 47%	7 50%~	76 40%	~	~	~	~	~	3 21%~	11 41%~	102 40%~	79 37%	35 47%	56 49%*	57 34%*
NOT ANSWERED	10	399		1		1		1	2						1	3		1	1	1	2
VALID CASES	287	5272	24	57	45	66	78	14	189						14	27	254	212	74	115	169
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%						15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%

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?

	PSCS 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 #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q35R NEVER	42 34%	917 37%	5 50%~	8 28%~	6 43%~	14 40%~	8 30%~	1 14%~	25 37%	~	~	~	~	~	2 40%~	5 38%~	36 33%~	26 30%~	16 43%~	21 38%	21 31%
SOMETIMES	22 18%	468 19%	~	8 28%~	1 7%~	6 17%~	5 19%~	2 29%~	11 16%	~	~	~	~	~	1 20%~	2 15%~	20 19%~	15 17%~	7 19%~	8 14%	14 21%
USUALLY	28 23%	470 19%	4 40%~	4 14%~	1 7%~	8 23%~	7 26%~	3 43%~	16 24%	~	~	~	~	~	1 20%~	3 23%~	24 22%~	19 22%~	9 24%~	14 25%	14 21%
ALWAYS	31 25%	619 25%	1 10%~	9 31%~	6 43%~	7 20%~	7 26%~	1 14%~	16 24%	~	~	~	~	~	1 20%~	3 23%~	28 26%~	26 30%~	5 14%~	13 23%	18 27%
#ALWAYS + USUALLY (NET)	59 48%	1089 44%	5 50%~	13 45%~	7 50%~	15 43%~	14 52%~	4 57%~	32 47%	~	~	~	~	~	2 40%~	6 46%~	52 48%~	45 52%~	14 38%~	27 48%	32 48%
TOP BOX SCORE	31 25%	619 25%	1 10%~	9 31%~	6 43%~	7 20%~	7 26%~	1 14%~	16 24%	~	~	~	~	~	1 20%~	3 23%~	28 26%~	26 30%~	5 14%~	13 23%	18 27%
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	160	2730	14	28	30	30	49	8	120						8	14	143	123	37	58	101
NOT ANSWERED	14	467		1	1	2	2		3						2		6	4	1	2	3
VALID CASES	123	2474	10	29	14	35	27	7	68						5	13	108	86	37	56	67
NUMBER OF RESPONDENTS	297	5671	24	58	45	67	78	15	191						15	27	257	213	75	116	171
	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?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	PSCS 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 AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE
								WHTE	##	##	#	##	##	TI	IC	IC	GOOD	POOR		
Q36																				
EXCELLENT	35 12%	556 10%	4 17%	15 26%*	4 9%	5 7%	7 9%	19 10%	~	~	~	~	~	1 7%	4 15%	31 12%	35 16%*	~	19 16%	16 9%
VERY GOOD	65 23%	1282 24%	7 29%	15 26%	13 29%	13 19%	14 18%	3 20%	46 24%	~	~	~	~	4 27%	5 19%	59 23%	65 31%*	~	21 18%	43 25%
GOOD	113 39%	1849 35%	10 42%	20 35%	16 36%	30 45%	30 38%	6 40%	79 42%	~	~	~	~	6 40%	12 44%	99 39%	113 53%	~	40 34%	73 43%
FAIR	53 18%	1201 23%	2 8%	5 9%*	8 18%	14 21%	20 26%	4 27%	34 18%	~	~	~	~	2 13%	5 19%	47 18%	53 ~	71%*	31 27%*	22 13%*
POOR	22 8%	406 8%	1 4%	2 4%	4 9%	5 7%	7 9%	2 13%	12 6%	~	~	~	~	2 13%	1 4%	20 8%	22 ~	29%	5 4%	16 9%
#EXCELLENT + VERY GOOD + GOOD (NET)	213 74%	3686 70%	21 88%	50 88%*	33 73%	48 72%	51 65%	9 60%	144 76%	~	~	~	~	11 73%	21 78%	189 74%	213 100%	~	80 69%	132 78%
NOT ANSWERED	9	377		1				1								1				1
VALID CASES	288	5294	24	57	45	67	78	15	190					15	27	256	213	75	116	170
NUMBER OF RESPONDENTS	297	5671	24	58	45	67	78	15	191					15	27	257	213	75	116	171
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%



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

	PSCS 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/ ILND #	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q37																					
EXCELLENT	53 19%	956 18%	4 17%	18 32%*	5 11%	12 18%	12 16%	1 7%	34 18%	~	~	~	~	~	1 7%	5 19%	47 19%	48 23%*	5 7%*	29 25%*	23 14%*
VERY GOOD	88 31%	1444 27%	11 48%	13 23%	15 33%	19 29%	26 34%	4 27%	62 33%	~	~	~	~	~	5 33%	8 30%	78 31%	79 37%*	9 12%*	33 29%	55 33%
GOOD	85 30%	1591 30%	7 30%	16 29%	14 31%	20 30%	22 29%	6 40%	53 28%	~	~	~	~	~	4 27%	8 30%	76 30%	62 29%	23 32%	33 29%	52 31%
FAIR	47 17%	1030 19%	~	9 16%	5 11%	13 20%	15 19%	4 27%	32 17%	~	~	~	~	~	5 33%	5 19%	41 16%	17 8%*	30 41%*	15 13%	31 18%
POOR	11 4%	303 6%	1 4%	~	6 13%	2 3%	2 3%	~	6 3%	~	~	~	~	~	~	1 4%	10 4%	5 2%	6 8%	4 4%	7 4%
#EXCELLENT + VERY GOOD + GOOD (NET)	226 80%	3991 75%*	22 96%	47 84%	34 76%	51 77%	60 78%	11 73%	149 80%	~	~	~	~	~	10 67%	21 78%	201 80%	189 90%*	37 51%*	95 83%	130 77%
NOT ANSWERED	13	348	1	2		1	1		4								5	2	2	2	3
VALID CASES	284	5323	23	56	45	66	77	15	187						15	27	252	211	73	114	168
NUMBER OF RESPONDENTS	297	5671	24	58	45	67	78	15	191						15	27	257	213	75	116	171
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	PSCS 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/ ILND	AMER IND/ PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q38 #YES	102 36%	1949 37%	5 23%~	17 30%	11 24%~	28 42%	29 38%	11 79%~	62 34%	~	~	~	~	~	7 50%~	14 54%~	87 35%~	65 31%*	37 51%*	44 39%	56 34%
NO	179 64%	3261 63%	17 77%~	39 70%	34 76%~	38 58%	47 62%	3 21%~	123 66%	~	~	~	~	~	7 50%~	12 46%~	163 65%~	144 69%*	35 49%*	69 61%	110 66%
DON'T KNOW	5	134	2	1		1		1	3						1	1	4	4	1	3	2
NOT ANSWERED	11	327		1			2		3								3		2		3
VALID CASES	281	5210	22	56	45	66	76	14	185						14	26	250	209	72	113	166
NUMBER OF RESPONDENTS	297	5671	24	58	45	67	78	15	191						15	27	257	213	75	116	171
	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?

	PSCS 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/ ILND	AMER IND/ PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q39 EVERY DAY	55 20%	1034 20%	2 8%	9 16%	6 14%	18 29%	17 22%	3 20%	41 22%	~	~	~	~	~	5 36%	~	55 22%	33 16%*	22 32%*	23 20%	32 19%
SOME DAYS	27 10%	461 9%	3 13%	7 12%	1 2%	6 10%	10 13%	~	18 10%	~	~	~	~	~	~	4 15%	22 9%	17 8%	10 14%	13 12%	14 8%
NOT AT ALL	197 71%	3773 72%	19 79%	41 72%	36 84%	39 62%	49 64%	12 80%	127 68%	~	~	~	~	~	9 64%	22 85%	172 69%	160 76%*	37 54%*	77 68%	119 72%
DON'T KNOW	4	42			2	1	1		2							1	3	2	2	1	3
NOT ANSWERED	14	360		1		3	1		3						1		5	1	4	2	3
VALID CASES	279	5269	24	57	43	63	76	15	186					14	26	249	210	69	113	165	
NUMBER OF RESPONDENTS	297	5671	24	58	45	67	78	15	191					15	27	257	213	75	116	171	
	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?

	PSCS 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-AMER ##	AS-IAN ##	NATV HAW/ILND #	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE-MALE	
Q40 NEVER	20 24%	477 30%	3 60%~	3 19%~	1 14%~	6 25%~	6 22%~	1 33%~	12 20%~	~	~	~	~	~	1 20%~	3 75%~	17 22%~	10 20%~	10 31%~	10 28%~	10 22%~
SOMETIMES	19 23%	309 20%	1 20%~	4 25%~	3 43%~	7 29%~	4 15%~	~	14 24%~	~	~	~	~	~	1 20%~	1 25%~	18 23%~	14 28%~	5 16%~	9 25%~	10 22%~
USUALLY	14 17%	270 17%	1 20%~	4 25%~	1 14%~	4 17%~	4 15%~	~	13 22%~	~	~	~	~	~	~	~	13 17%~	8 16%~	6 19%~	6 17%~	8 17%~
ALWAYS	29 35%	513 33%	~	5 31%~	2 29%~	7 29%~	13 48%~	2 67%~	20 34%~	~	~	~	~	~	3 60%~	~	29 38%~	18 36%~	11 34%~	11 31%~	18 39%~
#ALWAYS + USUALLY (NET)	43 52%	782 50%	1 20%~	9 56%~	3 43%~	11 46%~	17 63%~	2 67%~	33 56%~	~	~	~	~	~	3 60%~	~	42 55%~	26 52%~	17 53%~	17 47%~	26 57%~
TOP BOX SCORE	29 35%	513 33%	~	5 31%~	2 29%~	7 29%~	13 48%~	2 67%~	20 34%~	~	~	~	~	~	3 60%~	~	29 38%~	18 36%~	11 34%~	11 31%~	18 39%~
NOT ANSWERED		25																			
VALID CASES	82	1569	5	16	7	24	27	3	59						5	4	77	50	32	36	46
NUMBER OF RESPONDENTS	82	1594	5	16	7	24	27	3	59						5	4	77	50	32	36	46
	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.

	PSCS 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 ##	NATV AS- IAN ##	AMER HAW/ IND/ PAC ALSK #	ILND NATV ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q41 NEVER	41 50%	796 51%	5 100%~	7 44%~	4 57%~	11 46%~	12 44%~	2 67%~	28 47%~	~	~	~	~	~	2 40%~	3 75%~	37 48%~	23 46%~	18 56%~	23 64%~	18 39%~
SOMETIMES	22 27%	318 20%	~	6 38%~	2 29%~	7 29%~	7 26%~	~	17 29%~	~	~	~	~	~	3 60%~	1 25%~	21 27%~	14 28%~	8 25%~	7 19%~	15 33%~
USUALLY	7 9%	179 11%	~	2 12%~	~	3 12%~	2 7%~	~	5 8%~	~	~	~	~	~	~	~	7 9%~	6 12%~	1 3%~	3 8%~	4 9%~
ALWAYS	12 15%	266 17%	~	1 6%~	1 14%~	3 12%~	6 22%~	1 33%~	9 15%~	~	~	~	~	~	~	~	12 16%~	7 14%~	5 16%~	3 8%~	9 20%~
#ALWAYS + USUALLY (NET)	19 23%	445 29%	~	3 19%~	1 14%~	6 25%~	8 30%~	1 33%~	14 24%~	~	~	~	~	~	~	~	19 25%~	13 26%~	6 19%~	6 17%~	13 28%~
TOP BOX SCORE	12 15%	266 17%	~	1 6%~	1 14%~	3 12%~	6 22%~	1 33%~	9 15%~	~	~	~	~	~	~	~	12 16%~	7 14%~	5 16%~	3 8%~	9 20%~
NOT ANSWERED		34																			
VALID CASES	82	1560	5	16	7	24	27	3	59						5	4	77	50	32	36	46
NUMBER OF RESPONDENTS	82 100%	1594 100%	5 100%	16 100%	7 100%	24 100%	27 100%	3 100%	59 100%						5 100%	4 100%	77 100%	50 100%	32 100%	36 100%	46 100%

[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.

	PSCS 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 ##	NATV AS- IAN ##	AMER HAW/ IND/ PAC ALSK #	ILND NATV ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q42																					
NEVER	42 51%	888 57%	5 100%	8 50%	3 43%	11 46%	13 48%	2 67%	29 49%	~	~	~	~	~	3 60%	3 75%	38 49%	22 44%	20 62%	23 64%	19 41%
SOMETIMES	21 26%	301 19%	~	6 38%	1 14%	7 29%	7 26%	~	17 29%	~	~	~	~	~	1 20%	1 25%	20 26%	15 30%	6 19%	7 19%	14 30%
USUALLY	10 12%	175 11%	~	1 6%	1 14%	4 17%	4 15%	~	6 10%	~	~	~	~	~	1 20%	~	10 13%	6 12%	4 12%	4 11%	6 13%
ALWAYS	9 11%	191 12%	~	1 6%	2 29%	2 8%	3 11%	1 33%	7 12%	~	~	~	~	~	~	~	9 12%	7 14%	2 6%	2 6%	7 15%
#ALWAYS + USUALLY (NET)	19 23%	367 24%	~	2 12%	3 43%	6 25%	7 26%	1 33%	13 22%	~	~	~	~	~	1 20%	~	19 25%	13 26%	6 19%	6 17%	13 28%
TOP BOX SCORE	9 11%	191 12%	~	1 6%	2 29%	2 8%	3 11%	1 33%	7 12%	~	~	~	~	~	~	~	9 12%	7 14%	2 6%	2 6%	7 15%
NOT ANSWERED		39																			
VALID CASES	82	1555	5	16	7	24	27	3	59						5	4	77	50	32	36	46
NUMBER OF RESPONDENTS	82	1594	5	16	7	24	27	3	59						5	4	77	50	32	36	46
	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?

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q43 YES	58 20%	1073 20%	18 ~	25 5%*	35 7%*	45 21%	55 36%*	65 71%*	48 26%*	~	~	~	~	~	1 7%*	3 12%*	55 22%*	36 17%*	22 31%*	28 24%	30 18%
NO	226 80%	4210 80%	23 100%*	54 95%*	42 93%*	53 79%	49 64%*	4 29%*	140 74%*	~	~	~	~	~	14 93%*	23 88%*	199 78%*	176 83%*	50 69%*	87 76%	138 82%
DON'T KNOW	2	36	1					1	1							1	1	1	1	1	1
NOT ANSWERED	11	352		1				1	2								2		2		2
VALID CASES	284	5283	23	57	45	67	77	14	188						15	26	254	212	72	115	168
NUMBER OF RESPONDENTS	297	5671	24	58	45	67	78	15	191						15	27	257	213	75	116	171
	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?

	PSCS 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/ ILND	AMER IND/ PAC	ALSK	OTHR	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE
Q44 YES	19 7%	481 10%	1 ~ 2%*	8 ~ 14%	9 13%	1 9%~	11 7%	~	~	~	~	~	3 ~ 27%~	1 4%~	18 8%~	7 4%*	12 21%*	7 7%	12 8%	
NO	236 93%	4399 90%	23 100%~	52 98%*	44 100%~	48 86%	58 87%	10 91%~	156 93%	~	~	~	~	8 ~ 73%~	24 96%~	208 92%~	190 96%*	46 79%*	99 93%	136 92%
DON'T KNOW	28	432	1	4	1	10	8	4	21					3	2	26	15	13	8	20
NOT ANSWERED	14	359		1		1	3		3					1		5	1	4	2	3
VALID CASES	255	4880	23	53	44	56	67	11	167					11	25	226	197	58	106	148
NUMBER OF RESPONDENTS	297	5671	24	58	45	67	78	15	191					15	27	257	213	75	116	171
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%



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

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q45 YES	90 32%	1760 33%	4 17%~	8 14%*	6 14%~	24 36%	37 49%*	10 67%~	59 32%	~	~	~	~	~	6 43%~	5 19%~	82 33%~	60 29%	30 41%	42 37%	48 29%
NO	193 68%	3528 67%	20 83%~	49 86%*	38 86%~	42 64%	39 51%*	5 33%~	128 68%	~	~	~	~	~	8 57%~	22 81%~	170 67%~	150 71%	43 59%	73 63%	119 71%
NOT ANSWERED	14	383		1	1	1	2		4								5	3	2	1	4
VALID CASES	283	5288	24	57	44	66	76	15	187						14	27	252	210	73	115	167
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%						15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
PSCS	OHP	18	25	35	45	55	65		BLCK	NATV	AMER					NOT	EX &	VERY			
TOT	TOT	TO	TO	TO	TO	TO	AND	WHTE	AFR-	AS-	HAW/	IND/	ALSK	MUL-	HIS-	HIS-	GOOD	FAIR	FE-		
ADLT	ADLT	24	34	44	54	64	OVER	##	IAN	PAC	ILND	NATV	OTHR	TI	IC	IC	&	&	MALE	MALE	
																	GOOD	POOR			
Q46.1																					
YES	73	1193	2	2	11	20	32	6	52					2	4	69	40	33	33	40	
	25%	21%	8%~	3%*	24%~	30%	41%*	40%~	27%	~	~	~	~	~	13%~	15%~	27%~	19%*	44%*	28%	23%
NO	224	4478	22	56	34	47	46	9	139					13	23	188	173	42	83	131	
	75%	79%	92%~	97%*	76%~	70%	59%*	60%~	73%	~	~	~	~	~	87%~	85%~	73%~	81%*	56%*	72%	77%
VALID CASES	297	5671	24	58	45	67	78	15	191					15	27	257	213	75	116	171	
NUMBER OF RESPONDENTS	297	5671	24	58	45	67	78	15	191					15	27	257	213	75	116	171	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
		OHP TOT ADLT	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/ ILND	AMER IND/ ALSK	OTHR	MUL-TI	HIS-IC	NOT HIS-IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE-MALE
Q46.2																				
YES	93 31%	1634 29%	8 ~ 14%*	11 24%*	27 40%	37 47%*	10 67%*	67 35%	~	~	~	~	~	3 20%*	7 26%*	86 33%*	54 25%*	39 52%*	42 36%	51 30%
NO	204 69%	4037 71%	24 100%*	50 86%*	34 76%*	40 60%	5 53%*	124 65%	~	~	~	~	~	12 80%*	20 74%*	171 67%*	159 75%*	36 48%*	74 64%	120 70%
VALID CASES	297	5671	24	58	45	67	78	15						15	27	257	213	75	116	171
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%						15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%

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

	PSCS TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE	FE- MALE			
Q46.3 YES	44 15%	883 16%	18 ~	25 9%	35 11%	45 18%	55 27%*	65 18%	2 13%	31 16%	~	~	~	~	~	2 13%	4 15%	40 16%	28 13%	16 21%	20 17%	24 14%
NO	253 85%	4788 84%	24 100%	53 91%	40 89%	49 73%*	64 82%	13 87%	160 84%	~	~	~	~	~	13 87%	23 85%	217 84%	185 87%	59 79%	96 83%	147 86%	
VALID CASES	297	5671	24	58	45	67	78	15	191						15	27	257	213	75	116	171	
NUMBER OF RESPONDENTS	297	5671	24	58	45	67	78	15	191						15	27	257	213	75	116	171	
	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

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE	
Q47.1 YES	10 3%	231 4%	~	~	~	4%	6%	13%	8 4%	~	~	~	~	~	~	10 4%	4 2%	6 8%	7 6%	3 2%	
NO	287 97%	5440 96%	100%	100%	100%	96%	94%	87%	183 96%	~	~	~	~	~	15 100%	27 100%	247 96%	209 98%	69 92%	109 94%	168 98%
VALID CASES	297	5671	24	58	45	67	78	15	191						15	27	257	213	75	116	171
NUMBER OF RESPONDENTS	297 100%	5671 100%	100%	100%	100%	100%	100%	100%	100%						15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%

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

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q47.2 YES	12 4%	220 4%	1 ~	2 2%	4 ~	4 6%	3 5%	3 20%	10 5%	~	~	~	~	~	~	~	12 5%	6 3%	6 8%	5 4%	7 4%	
NO	285 96%	5451 96%	24 100%	57 ~	45 98%	63 100%	74 ~	12 94%	181 95%	~	~	~	~	~	15 ~	100%	27 ~	245 100%	207 95%	69 97%	111 92%	164 96%
VALID CASES NUMBER OF RESPONDENTS	297 297 100%	5671 5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 191 100%						15 15 100%	100%	27 27 100%	257 257 100%	213 213 100%	75 75 100%	116 116 100%	171 171 100%

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

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE			
Q47.3 YES	16 5%	243 4%	2 ~	1 3%	6 2%~	7 9%	11 ~	6%	~	~	~	~	2 ~	13%	16 ~	6%	7 3%*	9 12%*	8 7%	8 5%		
NO	281 95%	5428 96%	24 100%~	56 97%	44 98%~	61 91%	71 91%	15 100%~	180 94%	~	~	~	~	13 ~	87%~	100%~	27 94%~	241 97%*	206 88%*	66 93%	108 95%	163
VALID CASES	297	5671	24	58	45	67	78	15	191					15	27	257	213	75	116	171		
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%					15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%		

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

	PSCS TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
Q47.4 YES	48 16%	955 17%	18 ~	25 2%*	35 11%~	45 21%	55 26%*	65 53%~	31 16%	~	~	~	~	~	2 13%~	6 22%~	42 16%~	27 13%*	21 28%*	21 18%	27 16%
NO	249 84%	4716 83%	24 100%~	57 98%*	40 89%~	53 79%	58 74%*	7 47%~	160 84%	~	~	~	~	~	13 87%~	21 78%~	215 84%~	186 87%*	54 72%*	95 82%	144 84%
VALID CASES	297	5671	24	58	45	67	78	15	191						15	27	257	213	75	116	171
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%						15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%



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

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q48 YES	88 31%	1695 32%	5 21%	16 28%	13 29%	18 27%	29 37%	7 50%	57 30%	~	~	~	~	~	6 43%	12 44%	74 29%	50 24%*	38 52%*	37 32%	51 30%
NO	198 69%	3585 68%	19 79%	42 72%	32 71%	48 73%	49 63%	7 50%	133 70%	~	~	~	~	~	8 57%	15 56%	181 71%	162 76%*	35 48%*	79 68%	118 70%
NOT ANSWERED	11	392				1	1	1						1			2	1	2		2
VALID CASES	286	5279	24	58	45	66	78	14	190					14	27	255	212	73	116	169	
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%					15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%	

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

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q49 YES	76 87%	1392 87%	3 60%~	12 75%~	11 92%~	17 94%~	27 93%~	6 86%~	49 87%~	~	~	~	~	~	6 ~100%~	9 75%~	65 89%~	40 80%~	36 97%~	29 78%~	47 94%~
NO	11 13%	208 13%	2 40%~	4 25%~	1 8%~	1 6%~	2 7%~	1 14%~	7 13%~	~	~	~	~	~	~	3 ~25%~	8 11%~	10 20%~	1 3%~	8 22%~	3 6%~
NOT ANSWERED	1	69			1				1								1		1		1
VALID CASES	87	1600	5	16	12	18	29	7	56						6	12	73	50	37	37	50
NUMBER OF RESPONDENTS	88	1669	5	16	13	18	29	7	57						6	12	74	50	38	37	51
	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.

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q50 YES	168 59%	3271 62%	7 29%~	22 38%*	19 43%~	47 70%*	58 74%*100%~	15 61%	116	~	~	~	~	~	12 80%~	12 44%~	156 61%~	109 51%*	59 81%*	59 51%*	109 64%*
NO	119 41%	2030 38%	17 71%~	36 62%*	25 57%~	20 30%*	20 26%*	74 ~	39%	~	~	~	~	~	3 20%~	15 56%~	100 39%~	104 49%*	14 19%*	56 49%*	62 36%*
NOT ANSWERED	10	369			1			1									1	2	1		
VALID CASES	287	5302	24	58	44	67	78	15	190						15	27	256	213	73	115	171
NUMBER OF RESPONDENTS	297	5671	24	58	45	67	78	15	191						15	27	257	213	75	116	171
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	PSCS 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/ ILND	AMER IND/ PAC	ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q51 YES	155 94%	2939 94%	6 86%	19 86%	18 100%	43 93%	55 96%	14 93%	109 96%	~	~	~	~	~	11 92%	9 75%	146 95%	101 94%	54 95%	53 90%	102 96%
NO	10 6%	176 6%	1 14%	3 14%	~	3 7%	2 4%	1 7%	4 4%	~	~	~	~	~	1 8%	3 25%	7 5%	7 6%	3 5%	6 10%	4 4%
NOT ANSWERED	3	111			1	1	1		3								3	1	2		3
VALID CASES	165	3115	7	22	18	46	57	15	113						12	12	153	108	57	59	106
NUMBER OF RESPONDENTS	168 100%	3226 100%	7 100%	22 100%	19 100%	47 100%	58 100%	15 100%	116 100%						12 100%	12 100%	156 100%	109 100%	59 100%	59 100%	109 100%

[ASKED IF Q50 = YES]



NQ53 ARE YOU MALE OR FEMALE?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		PSCS 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- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE
NQ53																					
MALE	120 40%	2300 41%	10 42%~	23 40%	19 42%~	25 37%	34 44%	5 33%~	73 38%	~	~	~	~	5 33%~	14 52%~	100 39%~	80 38%	36 48%	116 100%~	~	
FEMALE	177 60%	3371 59%	14 58%~	35 60%	26 58%~	42 63%	44 56%	10 67%~	118 62%	~	~	~	~	10 67%~	13 48%~	157 61%~	133 62%	39 52%	171 ~100%~		
VALID CASES	297	5671	24	58	45	67	78	15	191					15	27	257	213	75	116	171	
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%					15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%	

[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?

	PSCS 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/ ILND #	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE				
Q54 8TH GRADE OR LESS	10 3%	328 6%*	1 4%~	1 ~	3 2%~	2 4%	3 3%	20%~	2%	4	~	~	~	~	~	7%~	19%~	2%~	2%	4	6	3	7	4%
SOME HIGH SCHOOL BUT DID NOT GRADUATE	35 12%	614 12%	2 9%~	7 12%	5 11%~	9 13%	10 13%	13%~	11%	20	~	~	~	~	~	13%~	27%~	11%~	11%	24	11	15	20	12%
HIGH SCHOOL GRADUATE OR GED	91 32%	1659 31%	12 52%~	15 26%	11 24%~	20 30%	30 39%	13%~	33%	63	~	~	~	~	~	40%~	23%~	33%~	31%	66	25	40	50	30%
SOME COLLEGE OR 2-YEAR DEGREE	100 35%	1998 38%	7 30%~	30 52%*	16 36%~	23 34%	20 26%*	4 27%~	66 35%	66	~	~	~	~	~	33%~	19%~	36%~	35%	75	24	42	58	34%
4-YEAR COLLEGE GRADUATE	32 11%	437 8%	1 4%~	5 9%	7 16%~	8 12%	8 10%	3 20%~	24 13%	24	~	~	~	~	~	~	8%~	11%~	13%*	28	4	13	19	11%
MORE THAN 4-YEAR COLLEGE DEGREE	18 6%	242 5%	~	1 2%*	5 11%~	4 6%	7 9%	1 7%~	13 7%	13	~	~	~	~	~	7%~	4%~	7%~	7%	15	3	3	15	9%*
NOT ANSWERED	11	392	1				1		1	1									1	2		2		
VALID CASES	286	5279	23	58	45	67	77	15	190						15	26	256	212	73	116	169			
NUMBER OF RESPONDENTS	297	5671	24	58	45	67	78	15	191						15	27	257	213	75	116	171			
	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?

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q55																					
YES HISPANIC OR LATINO	27 10%	668 13%	5 22%	8 14%	4 9%	6 9%	4 5%	~	~	~	~	~	~	~	27 100%	~	21 10%	6 8%	14 12%	13 8%	
NO NOT HISPANIC OR LATINO	257 90%	4589 87%	18 78%	50 86%	41 91%	60 91%	73 95%	15 100%	191 100%	~	~	~	~	~	15 100%	15	257 100%	189 90%	67 92%	100 88%	156 92%
NOT ANSWERED	13	413	1			1	1										3	2	2	2	
VALID CASES	284	5258	23	58	45	66	77	15	191					15	27	257	210	73	114	169	
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%					15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%	



Q56.1 WHAT IS YOUR RACE? RESPONSE: WHITE

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q56.1 YES	212 71%	3500 62%*	13 54%~	35 60%	32 71%~	53 79%	65 83%*	14 93%~	191 100%~	~	~	~	~	~	15 ~100%~	6 22%~	206 80%~	161 76%*	50 67%	81 70%	130 76%*
NO	85 29%	2171 38%*	11 46%~	23 40%	13 29%~	14 21%	13 17%*	1 7%~	~	~	~	~	~	~	~	21 78%~	51 20%~	52 24%*	25 33%	35 30%	41 24%*
VALID CASES	297	5671	24	58	45	67	78	15	191						15	27	257	213	75	116	171
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%						15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER			
	PSCS 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-AMER ##	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE-MALE
Q56.2 YES	3 1%	117 2%	~	1 2%	~	1 1%	1 1%	~	~	~	~	~	~	2 13%	~	3 1%	2 0.9%	1 1%	1 0.9%	2 1%
NO	294 99%	5554 98%	24 100%	57 100%	45 100%	66 99%	77 99%	15 100%	191 100%	~	~	~	~	13 87%	27 100%	254 99%	211 99%	74 99%	115 99%	169 99%
VALID CASES	297	5671	24	58	45	67	78	15	191					15	27	257	213	75	116	171
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%					15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%

Q56.3 WHAT IS YOUR RACE? RESPONSE: ASIAN

	PSCS 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/ ILND	AMER IND/ PAC	ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE			
Q56.3 YES	5 2%	212 4%*	~	~	4%~	3%	1%	~	~	~	~	~	~	~	13%~	~	2%~	5	4	1	1	4	0.9%	2%
NO	292 98%	5459 96%*	100%~	100%~	96%~	97%	99%	100%~	100%~	~	~	~	~	~	87%~	100%~	98%~	209	74	115	167	99%	98%	
VALID CASES	297	5671	24	58	45	67	78	15	191						15	27	257	213	75	116	171			
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%						15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%			

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER			
	PSCS 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-AMER ##	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
Q56.4 YES	1	34				1								1		1	1		1	
	0.3%	0.6%	~	~	~	1%	~	~	~	~	~	~	~	7%	~	~0.4%	~0.5%	~	~0.9%	~
NO	296	5637	24	58	45	66	78	15	191					14	27	256	212	75	115	171
	100%	99%	100%	100%	100%	99%	100%	100%	100%	~	~	~	~	93%	100%	100%	100%	100%	99%	100%
VALID CASES	297	5671	24	58	45	67	78	15	191					15	27	257	213	75	116	171
NUMBER OF RESPONDENTS	297	5671	24	58	45	67	78	15	191					15	27	257	213	75	116	171
	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

	PSCS 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 ##	MUL- TI ##	HIS- IC IC	NOT PAN- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE MALE			
Q56.5 YES	15 5%	211 4%	1 4%	5 9%	5 ~	3 7%	1 4%	1 7%	~	~	~	~	~	~	13 87%	1 4%	14 5%	11 5%	4 5%	5 4%	10 6%
NO	282 95%	5460 96%	23 96%	53 91%	45 100%	62 93%	75 96%	14 93%	191 100%	~	~	~	~	~	2 13%	26 96%	243 95%	202 95%	71 95%	111 96%	161 94%
VALID CASES	297	5671	24	58	45	67	78	15	191						15	27	257	213	75	116	171
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%						15 100%	27 100%	257 100%	213 100%	75 100%	116 100%	171 100%

Q56.6 WHAT IS YOUR RACE? RESPONSE: OTHER

	PSCS 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/ ILND #	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q56.6 YES	10 3%	307 5%*	3 12%~	1 2%	6 ~	9%*	~	~	~	~	~	~	~	2 ~	13%~	7 26%~	2 0.8%~	9 4%	1 1%	1 0.9%*	9 5%*
NO	287 97%	5364 95%*	21 88%~	57 98%	45 100%~	61 91%*	78 100%~	15 100%~	191 100%~	~	~	~	~	13 ~	87%~	20 74%~	255 99%~	204 96%	74 99%	115 99%*	162 95%*
VALID CASES	297	5671	24	58	45	67	78	15	191					15		27	257	213	75	116	171
NUMBER OF RESPONDENTS	297 100%	5671 100%	24 100%	58 100%	45 100%	67 100%	78 100%	15 100%	191 100%					15 100%		27 100%	257 100%	213 100%	75 100%	116 100%	171 100%

Q57 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
		OHP TOT ADLT	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/ ILND	AMER IND/ ALSK	OTHR	MUL-TI	HIS-IC	NOT HIS-IC	EX & VERY GOOD	FAIR & POOR	MALE	FE-MALE	
Q57																					
YES	22 9%	630 15%*	6 38%~	5 13%~	1 3%~	5 9%	1 1%*	4 29%~	17 9%~	~	~	~	~	~	7%~	4 20%~	18 8%~	14 8%	8 14%	11 12%	11 8%
NO	212 91%	3507 85%*	10 63%~	34 87%~	36 97%~	53 91%	69 99%*	10 71%~	174 91%~	~	~	~	~	~	93%~	16 80%~	194 92%~	163 92%	48 86%	78 88%	133 92%
NOT ANSWERED		39																			
VALID CASES	234	4137	16	39	37	58	70	14	191					14	20	212	177	56	89	144	
NUMBER OF RESPONDENTS	234	4176	16	39	37	58	70	14	191					14	20	212	177	56	89	144	
	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.

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q58.1 YES	10 45%	257 48%	3 50%	1 20%	1 100%	3 60%	2 50%	8 47%	~	~	~	~	~	~	2 50%	8 44%	7 50%	3 38%	4 36%	6 55%
NO	12 55%	281 52%	3 50%	4 80%	2 40%	1 100%	2 50%	9 53%	~	~	~	~	1 100%	2 50%	10 56%	7 50%	5 63%	7 64%	5 45%	
VALID CASES	22	538	6	5	1	5	1	4	17					1	4	18	14	8	11	11
NUMBER OF RESPONDENTS	22 100%	538 100%	6 100%	5 100%	1 100%	5 100%	1 100%	4 100%	17 100%					1 100%	4 100%	18 100%	14 100%	8 100%	11 100%	11 100%

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



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

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q58.2 YES	11 50%	220 41%	3 50%	1 ~100%	4 80%	1 100%	2 50%	8 47%	~	~	~	~	~	~	3 75%	8 44%	6 43%	5 63%	3 27%	8 73%
NO	11 50%	318 59%	3 50%	5 100%	1 ~20%	2 ~50%	9 53%	~	~	~	~	1 ~100%	1 25%	10 56%	8 57%	3 38%	8 73%	3 27%	3 27%	
VALID CASES	22	538	6	5	1	5	1	4	17				1	4	18	14	8	11	11	
NUMBER OF RESPONDENTS	22 100%	538 100%	6 100%	5 100%	1 100%	5 100%	1 100%	4 100%	17 100%				1 100%	4 100%	18 100%	14 100%	8 100%	11 100%	11 100%	

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

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

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q58.3 YES	12 55%	203 38%	4 67%	4 80%	1 ~ 20%	3 ~ 75%	10 59%	~	~	~	~	~	1 ~100%	1 25%	11 61%	9 64%	3 38%	8 73%	4 36%	
NO	10 45%	335 62%	2 33%	1 20%	1 100%	4 80%	1 100%	1 25%	7 41%	~	~	~	~	~	3 75%	7 39%	5 36%	5 63%	3 27%	7 64%
VALID CASES	22	538	6	5	1	5	1	4	17				1	4	18	14	8	11	11	
NUMBER OF RESPONDENTS	22 100%	538 100%	6 100%	5 100%	1 100%	5 100%	1 100%	4 100%	17 100%				1 100%	4 100%	18 100%	14 100%	8 100%	11 100%	11 100%	

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

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

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q58.4 YES	1 5%	79 15%	18 24	25 34	35 44	45 54	55 64	65 OVER	1 6%	~	~	~	~	~	~	1 6%	1 7%	1 9%	~	
NO	21 95%	459 85%	6 100%	4 80%	1 100%	5 100%	1 100%	4 100%	16 94%	~	~	~	~	1 100%	4 100%	17 94%	13 93%	8 100%	10 91%	11 100%
VALID CASES	22	538	6	5	1	5	1	4	17					1	4	18	14	8	11	11
NUMBER OF RESPONDENTS	22 100%	538 100%	6 100%	5 100%	1 100%	5 100%	1 100%	4 100%	17 100%					1 100%	4 100%	18 100%	14 100%	8 100%	11 100%	11 100%

[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		
		OHP TOT ADLT	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/ ILND #	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE-MALE
Q58.5 YES	32 6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	22 100%	506 94%	6 100%	5 100%	1 100%	5 100%	1 100%	4 100%	17 100%	~	~	~	~	1 100%	4 100%	18 100%	14 100%	8 100%	11 100%	11 100%
VALID CASES	22	538	6	5	1	5	1	4	17					1	4	18	14	8	11	11
NUMBER OF RESPONDENTS	22 100%	538 100%	6 100%	5 100%	1 100%	5 100%	1 100%	4 100%	17 100%					1 100%	4 100%	18 100%	14 100%	8 100%	11 100%	11 100%

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

NQ13 RATING OF ALL HEALTH CARE

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
NQ13 0-6	48 22%	761 20%	2 13%~	10 28%~	11 31%~	9 18%	13 21%	1 9%~	34 24%	~	~	~	~	~	1 8%~	3 15%~	43 23%~	24 17%*	22 34%*	14 19%	32 24%	
7-8	73 34%	1368 36%	10 63%~	15 42%~	11 31%~	18 36%	15 25%	~	49 34%	~	~	~	~	~	4 33%~	7 35%~	60 32%~	50 34%	19 30%	24 32%	45 34%	
9-10	94 44%	1705 44%	4 25%~	11 31%~	13 37%~	23 46%	33 54%	10 91%~	60 42%	~	~	~	~	~	7 58%~	10 50%~	83 45%~	71 49%*	23 36%	37 49%	56 42%	
VALID CASES	215	3835	16	36	35	50	61	11	143						12	20	186	145	64	75	133	
NUMBER OF RESPONDENTS	215 100%	3835 100%	16 100%	36 100%	35 100%	50 100%	61 100%	11 100%	143 100%						12 100%	20 100%	186 100%	145 100%	64 100%	75 100%	133 100%	
MEAN	2.21	2.25	2.13	2.03	2.06	2.28	2.33	2.82	2.18						2.50	2.35	2.22	2.32	2.02	2.31	2.18	
p stat_(*=Sig @ p<=.05)		.526	~	~	~.488	.192			~.396	~	~	~	~	~	~	~	~	~.003*	.016*	.206	.424	

[ASKED IF Q7 >= 1 TIME]

NQ23 RATING OF PERSONAL DOCTOR

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	PSCS 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-AMER	AS-IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL-TI	HIS-IC	NOT HIS-IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE-MALE	
NQ23 0-6	39 17%	642 16%	2 13%	8 22%	7 19%	10 17%	8 13%	1 8%	28 18%	~	~	~	~	~	1 8%	1 7%	35 17%	21 13%*	14 23%	13 15%	23 17%
7-8	50 22%	1053 26%	4 27%	8 22%	12 32%	10 17%	14 22%	1 8%	33 21%	~	~	~	~	~	3 25%	2 13%	47 23%	37 23%	13 21%	19 22%	30 22%
9-10	141 61%	2378 58%	9 60%	21 57%	18 49%	38 66%	42 66%	11 85%	97 61%	~	~	~	~	~	8 67%	12 80%	125 60%	105 64%	35 56%	54 63%	85 62%
VALID CASES	230	4074	15	37	37	58	64	13	158					12	15	207	163	62	86	138	
NUMBER OF RESPONDENTS	230 100%	4074 100%	15 100%	37 100%	37 100%	58 100%	64 100%	13 100%	158 100%					12 100%	15 100%	207 100%	163 100%	62 100%	86 100%	138 100%	
MEAN	2.44	2.43	2.47	2.35	2.30	2.48	2.53	2.77	2.44					2.58	2.73	2.43	2.52	2.34	2.48	2.45	
p stat_(*=Sig @ p<=.05)		.719	~	~	~.653	.262	~	.841	~	~	~	~	~	~	~	~	~.041*	.234	.608	.889	

[ASKED IF Q15 = YES]

NQ27 RATING OF SPECIALIST SEEN MOST OFTEN

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
NQ27 0-6	17 15%	249 13%	1 25%~	2 11%~	4 22%~	4 14%~	6 21%~	13 18%~	~	~	~	~	~	~	1 11%~	16 16%~	10 15%~	7 17%~	6 13%~	11 17%~	
7-8	21 18%	475 25%	1 25%~	4 21%~	5 28%~	5 17%~	3 11%~	1 8%~	14 20%~	~	~	~	~	~	2 25%~	18 18%~	11 16%~	8 19%~	7 16%~	12 18%~	
9-10	76 67%	1151 61%	2 50%~	13 68%~	9 50%~	20 69%~	19 68%~	11 92%~	44 62%~	~	~	~	~	~	6 75%~	8 89%~	66 66%~	47 69%~	27 64%~	32 71%~	42 65%~
VALID CASES	114	1875	4	19	18	29	28	12	71						8	9	100	68	42	45	65
NUMBER OF RESPONDENTS	114 100%	1875 100%	4 100%	19 100%	18 100%	29 100%	28 100%	12 100%	71 100%						8 100%	9 100%	100	68 100%	42 100%	45 100%	65 100%
MEAN	2.52	2.48	2.25	2.58	2.28	2.55	2.46	2.92	2.44						2.75	2.78	2.50	2.54	2.48	2.58	2.48
p stat_(*=Sig @ p<=.05)		.574	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

NQ35 RATING OF HEALTH PLAN

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
NQ35 0-6	79 28%	1160 23%*	5 22%~	17 30%	17 39%~	24 36%	12 17%*	2 13%~	50 28%	~	~	~	~	~	6 43%~	6 22%~	71 29%~	55 27%	22 30%	30 28%	47 28%
7-8	94 34%	1699 34%	11 48%~	20 35%	18 41%~	14 21%*	25 36%	3 20%~	60 33%	~	~	~	~	~	2 14%~	7 26%~	81 33%~	65 32%	27 36%	33 30%	58 35%
9-10	107 38%	2187 43%	7 30%~	20 35%	9 20%~	29 43%	32 46%	10 67%~	71 39%	~	~	~	~	~	6 43%~	14 52%~	93 38%~	82 41%	25 34%	46 42%	61 37%
VALID CASES	280	5046	23	57	44	67	69	15	181						14	27	245	202	74	109	166
NUMBER OF RESPONDENTS	280 100%	5046 100%	23 100%	57 100%	44 100%	67 100%	69 100%	15 100%	181 100%						14 100%	27 100%	245 100%	202 100%	74 100%	109 100%	166 100%
MEAN	2.10	2.20	2.09	2.05	1.82	2.07	2.29	2.53	2.12						2.00	2.30	2.09	2.13	2.04	2.15	2.08
p stat_(*=Sig @ p<=.05)		.024*	~.623		~.784	.020*		~.656	~	~	~	~	~	~	~	~	~.261	.460	.445	.698	



GETTING NEEDED CARE

	PSCS 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/ ILND	AMER IND/ ALSK	OTH R	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE		
NPRBSEE4 NQ25	2.11	2.22	1.50	2.15	1.95	1.97	2.23	2.50	2.09							2.00	2.44	2.06	2.20	1.96	2.08	2.12
p stat_(*=Sig @ p<=.05)		.125	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.182		.791	.869
NCARNES4 NQ14	2.16	2.26	2.13	1.97	2.06	2.24	2.21	2.67	2.19							2.00	2.20	2.16	2.32	1.85	2.22	2.14
p stat_(*=Sig @ p<=.05)		.041*	~	~	~.400	.551	~	.346	~	~	~	~	~	~	~	~	~	~	.000*	.000*	.378	.617
COMPOSITE	2.13	2.24	1.81	2.06	2.00	2.10	2.22	2.58	2.14	x	x	x	x	x	x	2.00	2.32	2.11	2.26	1.90	2.15	2.13
p stat_(*=Sig @ p<=.05)		.014*	~	~	~.708	.149	~	.722	~	~	~	~	~	~	~	~	~	~	.000*	.000*	.698	.878

GETTING CARE QUICKLY

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS		GENDER					
	PSCS 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- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR NATV	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NCARSN4 NQ4	2.24	2.42	2.38	2.31	2.17	2.11	2.41	2.60	2.31					2.11	2.45	2.25	2.28	2.26	2.30	2.25	
p stat_(*=Sig @ p<=.05)		.004*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NAPGET4 NQ6	2.18	2.28	2.21	2.00	2.17	2.23	2.28	2.27	2.20					2.27	2.33	2.17	2.20	2.15	2.06	2.28	
p stat_(*=Sig @ p<=.05)		.076	~	~	~	~	.313	~	.580	~	~	~	~	~	~	~	.588	.821	.153	.052	
COMPOSITE	2.21	2.35	2.29	2.15	2.17	2.17	2.34	2.44	2.26	x	x	x	x	x	2.19	2.39	2.21	2.24	2.20	2.18	2.26
p stat_(*=Sig @ p<=.05)		.003*	~	~	~	.603	.050*	~	.144	~	~	~	~	~	~	~	.336	.947	.607	.105	

HOW WELL DOCTORS COMMUNICATE

	PSCS 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/ ILND #	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NDREXPL4 NQ17	2.60	2.61	2.73	2.58	2.59	2.63	2.62	2.67	2.60					2.60	2.77	2.60	2.69	2.46	2.63	2.61	
p stat_(*=Sig @ p<=.05)		.897	~	~	~	~.835	~.874	~	~	~	~	~	~	~	~	~	~.030*	.108	.739	.802	
NDRLSTN4 NQ18	2.63	2.58	2.64	2.59	2.59	2.69	2.67	2.67	2.59					2.70	2.93	2.62	2.71	2.50	2.65	2.65	
p stat_(*=Sig @ p<=.05)		.375	~	~	~	~.532	~.247	~	~	~	~	~	~	~	~	~	~.019*	.099	.759	.584	
NDRESPU4 NQ19	2.70	2.65	2.73	2.59	2.79	2.77	2.73	2.75	2.70					2.80	2.79	2.72	2.80	2.59	2.69	2.75	
p stat_(*=Sig @ p<=.05)		.272	~	~	~	~.726	~.969	~	~	~	~	~	~	~	~	~	~.010*	.149	.840	.228	
NDRTMEN4 NQ20	2.51	2.50	2.73	2.41	2.52	2.60	2.55	2.50	2.53					2.30	2.79	2.52	2.62	2.35	2.60	2.51	
p stat_(*=Sig @ p<=.05)		.816	~	~	~	~.686	~.531	~	~	~	~	~	~	~	~	~	~.004*	.044*	.217	.909	
COMPOSITE	2.61	2.59	2.70	2.54	2.62	2.67	2.64	2.65	2.61	x	x	x	x	x	2.60	2.82	2.62	2.70	2.48	2.64	2.63
p stat_(*=Sig @ p<=.05)		.639	~	~	~	~.649	~.847	~	~	~	~	~	~	~	~	~	~.005*	.071	.611	.610	

CUSTOMER SERVICE

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NPBCLCS4 NQ31	2.33	2.22	2.20	2.38	2.11	2.56	2.50	2.00	2.31						2.00	2.56	2.34	2.32	2.50	2.33	2.39
p stat_(*=Sig @ p<=.05)		.225	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ32	2.65	2.61	2.20	2.50	2.67	2.69	2.74	3.00	2.66						2.50	2.56	2.66	2.66	2.62	2.67	2.63
p stat_(*=Sig @ p<=.05)		.585	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.49	2.42	2.20	2.44	2.39	2.62	2.62	2.50	2.48	x	x	x	x	x	2.25	2.56	2.50	2.49	2.56	2.50	2.51
p stat_(*=Sig @ p<=.05)		.359	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NNRXWHY NQ10																					
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NNRXWYNT NQ11	2.50	2.46	2.71	2.79	2.47	2.62	2.26	2.40	2.46				2.50	2.25	2.51	2.50	2.50	2.62	2.44		
p stat_(*=Sig @ p<=.05)	.662		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NRXBST NQ12	2.46	2.52	2.71	2.68	2.37	2.54	2.19	2.80	2.34				2.75	3.00	2.42	2.47	2.45	2.53	2.43		
p stat_(*=Sig @ p<=.05)	.446		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
COMPOSITE	2.48	2.49	2.71	2.74	2.42	2.58	2.23	2.60	2.40	x	x	x	x	x	2.63	2.63	2.47	2.49	2.47	2.57	2.43
p stat_(*=Sig @ p<=.05)	.814		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		

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

	PSCS 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		
PRBSEE4 Q25	66%	75%	25%	65%	50%	63%	80%	83%	66%							75%	78%	65%	72%	57%	60%	71%
CARNES4 Q14	73%	80%	75%	69%	66%	80%	70%	92%	73%							75%	85%	72%	80%	58%	78%	71%
AVERAGE	69.27	77.53	50.00	67.22	57.86	71.25	75.25	87.50	69.37	x	x	x	x	x	75.00	81.39	68.24	75.92	57.95	68.82	70.63	

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

	PSCS 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 WHTE	AS- IAN ##	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	77%	84%	75%	73%	78%	70%	84%	100%	80%						67%	82%	76%	79%	81%	75%	
APGET4 Q6	72%	77%	71%	62%	70%	79%	74%	82%	74%						82%	72%	72%	73%	71%	64%	78%
AVERAGE	74.09	80.73	73.21	67.42	73.89	74.67	79.19	90.91	77.10	x	x	x	x	x	74.24	77.02	74.27	74.21	75.11	72.58	76.19

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

	PSCS 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/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
DREXPL4 Q17	89%	91%	100%	88%	90%	90%	89%	92%	89%						90%	100%	89%	94%	81%	89%	91%
DRLSTN4 Q18	90%	90%	82%	85%	90%	94%	93%	92%	89%						90%	100%	90%	93%	85%	92%	90%
DRESPU4 Q19	92%	91%	100%	89%	96%	94%	95%	92%	93%						90%	100%	93%	97%	87%	94%	94%
DRTMEN4 Q20	88%	87%	100%	85%	90%	92%	87%	92%	88%						90%	100%	89%	94%	80%	88%	91%
AVERAGE	89.9	89.8	95.5	86.9	91.3	92.2	90.9	91.7	89.9	x	x	x	x	x	90.0	100	90.2	94.3	83.3	90.7	91.2



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

	PSCS 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		
PBCLCS4 Q31	83%	76%	60%	88%	78%	94%	90%	67%	83%							75%	89%	84%	80%	95%	85%	84%
CSRESP Q32	92%	91%	80%	88%	89%	94%	95%	100%	93%							75%	100%	90%	92%	90%	93%	91%
AVERAGE	87.28	83.64	70.00	87.50	83.33	93.75	92.37	83.33	88.01	x	x	x	x	x	x	75.00	94.44	87.02	86.00	92.97	88.89	87.39

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	PSCS 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-AMER	AS-IAN	NATV HAW/ILND	AMER IND/ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	FE-MALE	FE-MALE		
NRXWHY Q10	94%	93%	71%	100%	100%	100%	92%	90%	94%					100%	88%	95%	97%	89%	97%	93%	
NRXWYNT Q11	75%	73%	86%	89%	73%	81%	63%	70%	73%					75%	63%	76%	75%	75%	81%	72%	
RXBST Q12	73%	76%	86%	84%	69%	77%	59%	90%	67%					88%	100%	71%	74%	73%	76%	71%	
AVERAGE	80.7	80.6	81.0	91.2	80.7	85.9	71.5	83.3	78.0	x	x	x	x	x	87.5	83.3	80.7	82.0	79.0	84.9	78.9

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

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER IND/ PAC ALSK ##	MUL-OTHR TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
Q1 YES	289	5578	59	61	91	78	106	~	~	~	~	~	~	82	178	244	14	228	61
	100%	100%	100%	100%	100%	100%	100%	~	~	~	~	~	~	100%	100%	100%	100%	100%	100%
NOT ANSWERED	2	60			1	1	2							2		2		2	
VALID CASES	289	5578	59	61	91	78	106							82	178	244	14	228	61
NUMBER OF RESPONDENTS	291	5638	59	61	92	79	108							82	180	246	14	230	61
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	MUL- OTHR TI ##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q3 YES	89 32%	1643 30%	17 30%	21 36%	26 30%	25 33%	33 31%	~	~	~	~	~	~	21 26%	59 34%	72 30%~	8 57%~	63 29%*	26 45%*
NO	189 68%	3803 70%	40 70%	37 64%	62 70%	50 67%	73 69%	~	~	~	~	~	~	60 74%	116 66%	169 70%~	6 43%~	157 71%*	32 55%*
NOT ANSWERED	13	191	2	3	4	4	2							1	5	5		10	3
VALID CASES	278	5447	57	58	88	75	106							81	175	241	14	220	58
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%							82 100%	180 100%	246 100%	14 100%	230 100%	61 100%

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		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ NATV ##	MUL-OTHR ##	TI	HIS-IC	HIS-PAN-IC	NOT VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q4 NEVER	4 5%	21 1%		2 ~ 10%	1 4%	1 5%	2 6%	~	~	~	~	~	~	1 5%	2 4%	2 3%	1 13%	2 3%	2 8%
SOMETIMES	6 7%	109 7%		~	4 ~ 16%	2 9%	3 10%	~	~	~	~	~	~	3 16%	3 5%	4 6%	2 25%	4 7%	2 8%
USUALLY	18 21%	253 16%	4 24%	3 14%	4 16%	7 32%	5 16%	~	~	~	~	~	~	7 37%	11 19%	17 25%	1 13%	12 20%	6 24%
ALWAYS	57 67%	1212 76%	13 76%	16 76%	16 64%	12 55%	21 68%	~	~	~	~	~	~	8 42%	41 72%	45 66%	4 50%	42 70%	15 60%
#ALWAYS + USUALLY (NET)	75 88%	1464 92%	17 100%	19 90%	20 80%	19 86%	26 84%	~	~	~	~	~	~	15 79%	52 91%	62 91%	5 63%	54 90%	21 84%
TOP BOX SCORE	57 67%	1212 76%	13 76%	16 76%	16 64%	12 55%	21 68%	~	~	~	~	~	~	8 42%	41 72%	45 66%	4 50%	42 70%	15 60%
NOT ANSWERED	4	102			1	3	2							2	2	4		3	1
VALID CASES	85	1594	17	21	25	22	31							19	57	68	8	60	25
NUMBER OF RESPONDENTS	89	1696	17	21	26	25	33							21	59	72	8	63	26
	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?

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	MUL- OTHR ##	TI ##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q5 YES	170 61%	3547 65%	41 69%	39 66%	46 53%	44 60%	64 60%	~	~	~	~	~	~	48 61%	106 60%	144 60%~	11 79%~	124 57%*	46 75%*
NO	107 39%	1877 35%	18 31%	20 34%	40 47%	29 40%	42 40%	~	~	~	~	~	~	31 39%	71 40%	97 40%~	3 21%~	92 43%*	15 25%*
NOT ANSWERED	14	214		2	6	6	2							3	3	5		14	
VALID CASES	277	5424	59	59	86	73	106							79	177	241	14	216	61
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%							82 100%	180 100%	246 100%	14 100%	230 100%	61 100%

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		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ NATV ##	MUL-OTHR ##	TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q6 NEVER	6 4%	50 2%	~	~	10%~	5%~	3 5%	~	~	~	~	~	~	2 5%~	3 3%	5 4%~	1 9%~	4 4%~	2 5%~
SOMETIMES	25 16%	468 14%	6 16%~	6 16%~	4 10%~	9 23%~	10 17%	~	~	~	~	~	~	7 16%~	16 16%	19 14%~	4 36%~	20 18%~	5 12%~
USUALLY	41 26%	881 27%	6 16%~	10 27%~	10 24%~	15 38%~	16 28%	~	~	~	~	~	~	10 23%~	29 30%	37 28%~	2 18%~	27 24%~	14 33%~
ALWAYS	85 54%	1910 58%	26 68%~	21 57%~	24 57%~	14 35%~	29 50%	~	~	~	~	~	~	25 57%~	50 51%	71 54%~	4 36%~	63 55%~	22 51%~
#ALWAYS + USUALLY (NET)	126 80%	2792 84%	32 84%~	31 84%~	34 81%~	29 73%~	45 78%	~	~	~	~	~	~	35 80%~	79 81%	108 82%~	6 55%~	90 79%~	36 84%~
TOP BOX SCORE	85 54%	1910 58%	26 68%~	21 57%~	24 57%~	14 35%~	29 50%	~	~	~	~	~	~	25 57%~	50 51%	71 54%~	4 36%~	63 55%~	22 51%~
NOT ANSWERED	13	232	3	2	4	4	6							4	8	12		10	3
VALID CASES	157	3310	38	37	42	40	58							44	98	132	11	114	43
NUMBER OF RESPONDENTS	170	3542	41	39	46	44	64							48	106	144	11	124	46
	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?

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	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	
Q7 NONE	80 29%	1626 30%	13 23%	13 23%	29 34%	25 34%	36 35%	~	~	~	~	~	~	19 24%	55 32%	70 29%	2 14%	73 34%*	7 12%*
1 TIME	87 32%	1614 30%	19 33%	19 34%	31 36%	18 25%	31 30%	~	~	~	~	~	~	29 36%	54 31%	79 33%	3 21%	75 35%*	12 20%*
2	39 14%	1048 20%*	8 14%	12 21%	10 12%	9 12%	16 16%	~	~	~	~	~	~	11 14%	26 15%	36 15%	1 7%	25 12%	14 23%
3	29 11%	512 10%	10 18%	6 11%	6 7%	7 10%	10 10%	~	~	~	~	~	~	11 14%	17 10%	27 11%	1 7%	20 9%	9 15%
4	12 4%	232 4%	5 9%	1 2%	2 2%	4 5%	1 1%*	~	~	~	~	~	~	4 5%	5 3%	9 4%	2 14%	9 4%	3 5%
5 TO 9	21 8%	256 5%	2 4%	4 7%	7 8%	8 11%	7 7%	~	~	~	~	~	~	6 8%	13 7%	15 6%	4 29%	9 4%*	12 20%*
10 OR MORE TIMES	4 1%	57 1%	~	1 2%	1 1%	2 3%	2 2%	~	~	~	~	~	~	~	4 2%	3 1%	1 7%	1 0.5%	3 5%
NOT ANSWERED	19	293	2	5	6	6	5							2	6	7		18	1
VALID CASES	272	5345	57	56	86	73	103							80	174	239	14	212	60
NUMBER OF RESPONDENTS	291	5638	59	61	92	79	108							82	180	246	14	230	61
	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		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ NATV ##	MUL-OTHR TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC		
Q8 #YES	132 69%	2462 67%	35 81%~	29 67%~	38 67%	30 63%~	48 72%	~	~	~	~	~	~	42 69%	80 67%	111 66%~	11 92%~	90 65%*	42 79%*
NO	59 31%	1197 33%	8 19%~	14 33%~	19 33%	18 38%~	19 28%	~	~	~	~	~	~	19 31%	39 33%	58 34%~	1 8%~	48 35%*	11 21%*
NOT ANSWERED	1	87	1																1
VALID CASES	191	3659	43	43	57	48	67							61	119	169	12	138	53
NUMBER OF RESPONDENTS	192 100%	3746 100%	44 100%	43 100%	57 100%	48 100%	67 100%							61 100%	119 100%	169 100%	12 100%	139 100%	53 100%

[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		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND NATV #	AMER IND/ ALSK ##	MUL-OTHR TI ##	HIS-IC	HIS-PAN-IC	NOT VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
Q9 NEVER	4 2%	111 3%	~	2 5%	1 2%	1 2%	2 3%	~	~	~	~	~	~	2 3%	2 2%	3 2%	1 8%	3 2%	1 2%
SOMETIMES	22 12%	330 9%	2 5%	3 7%	8 14%	9 20%	5 7%	~	~	~	~	~	~	7 12%	13 11%	20 12%	1 8%	16 12%	6 11%
USUALLY	39 21%	815 22%	7 16%	8 19%	10 18%	14 30%	19 28%	~	~	~	~	~	~	11 19%	27 23%	34 20%	4 33%	27 20%	12 23%
ALWAYS	124 66%	2400 66%	34 79%	30 70%	38 67%	22 48%	41 61%	~	~	~	~	~	~	39 66%	77 65%	110 66%	6 50%	90 66%	34 64%
#ALWAYS + USUALLY (NET)	163 86%	3215 88%	41 95%	38 88%	48 84%	36 78%	60 90%	~	~	~	~	~	~	50 85%	104 87%	144 86%	10 83%	117 86%	46 87%
TOP BOX SCORE	124 66%	2400 66%	34 79%	30 70%	38 67%	22 48%	41 61%	~	~	~	~	~	~	39 66%	77 65%	110 66%	6 50%	90 66%	34 64%
NOT ANSWERED	3	90	1			2								2		2		3	
VALID CASES	189	3656	43	43	57	46	67							59	119	167	12	136	53
NUMBER OF RESPONDENTS	192 100%	3746 100%	44 100%	43 100%	57 100%	48 100%	67 100%							61 100%	119 100%	169 100%	12 100%	139 100%	53 100%

[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?

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	MUL- OTHR ##	TI ##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q10 YES	46 24%	1058 29%	11 26%~	9 21%~	12 21%	14 30%~	16 24%	~	~	~	~	~	~	10 ~ 17%	35 30%*	40 24%~	5 42%~	19 14%*	27 52%*
NO	143 76%	2578 71%	32 74%~	33 79%~	45 79%	33 70%~	50 76%	~	~	~	~	~	~	50 ~ 83%	83 70%*	127 76%~	7 58%~	118 86%*	25 48%*
NOT ANSWERED	3	110	1	1		1								1	1	2		2	1
VALID CASES	189	3636	43	42	57	47	66							60	118	167	12	137	52
NUMBER OF RESPONDENTS	192	3746	44	43	57	48	67							61	119	169	12	139	53
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	MUL- OTHR ##	TI ##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q11 #YES	42 95%	931 93%~	10 100%~	8 89%~	10 91%~	14 100%~	14 ~	~	~	~	~	~	10 ~100%~	31 94%~	36 95%~	5 100%~	15 88%~	27 100%~
NO	2 5%	71 7%~	~	1 11%~	1 9%~	~	~	~	~	~	~	~	2 6%~	2 5%~	2 ~	2 ~	2 12%~	~
NOT ANSWERED	24	408	4	6	7	7	8						3	9	11		22	2
VALID CASES	44	1002	10	9	11	14	14						10	33	38	5	17	27
NUMBER OF RESPONDENTS	68 100%	1410 100%	14 100%	15 100%	18 100%	21 100%	22 100%						13 100%	42 100%	49 100%	5 100%	39 100%	29 100%

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

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

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	MUL- OTHR ##	TI ##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q12 #YES	33 79%	722 71%~	8 80%~	7 78%~	6 60%~	12 92%~	12 86%~	~	~	~	~	~	~	8 80%~	25 81%~	28 78%~	5 100%~	9 56%~	24 92%~
NO	9 21%	300 29%~	2 20%~	2 22%~	4 40%~	1 8%~	2 14%~	~	~	~	~	~	~	2 20%~	6 19%~	8 22%~	~	7 44%~	2 8%~
NOT ANSWERED	4	19	1		2	1	2								4	4		3	1
VALID CASES	42	1022	10	9	10	13	14							10	31	36	5	16	26
NUMBER OF RESPONDENTS	46 100%	1041 100%	11 100%	9 100%	12 100%	14 100%	16 100%							10 100%	35 100%	40 100%	5 100%	19 100%	27 100%

[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?

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	MUL- OTHR TI ##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q13 #YES	29 69%	804 80%~	7 70%~	4 50%~	9 82%~	9 69%~	12 86%~	~	~	~	~	~	~	6 60%~	23 72%~	25 68%~	4 80%~	9 60%~	20 74%~
NO	13 31%	202 20%~	3 30%~	4 50%~	2 18%~	4 31%~	2 14%~	~	~	~	~	~	~	4 40%~	9 28%~	12 32%~	1 20%~	6 40%~	7 26%~
NOT ANSWERED	4	35	1	1	1	1	2							3	3	3		4	
VALID CASES	42	1006	10	8	11	13	14							10	32	37	5	15	27
NUMBER OF RESPONDENTS	46	1041	11	9	12	14	16							10	35	40	5	19	27
	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		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER ALSK NATV ##	MUL- OTHR ##	TI ##	HIS- IC	NOT HIS- PAN- IC	VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q14 WORST HEALTH CARE POSSIBLE	1	7			1									1	1			1	
	0.5%	0.2%	~	~	2%	~	~	~	~	~	~	~	~	~0.8%	~0.6%	~	~	~	2%
01		7																	
		0.2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02	1	15				1									1			1	
	0.5%	0.4%	~	~	~	2%	~	~	~	~	~	~	~	~	~0.6%	~	~	~0.7%	~
03	1	17		1										1			1		1
	0.5%	0.5%	~	2%	~	~	~	~	~	~	~	~	~	2%	~	~	8%	~	2%
04	3	22			1	2	1							1	2	1	2	1	2
	2%	0.6%	~	~	2%	4%	1%	~	~	~	~	~	~	2%	2%	0.6%	17%	~0.7%	4%
05	7	133	1		4	2	2							3	4	7		5	2
	4%	4%	2%	~	7%	4%	3%	~	~	~	~	~	~	5%	3%	4%	~	4%	4%
06	10	105	3	3	2	2	4							3	7	8	2	7	3
	5%	3%	7%	7%	4%	4%	6%	~	~	~	~	~	~	5%	6%	5%	17%	5%	6%
07	22	327	6	3	4	9	9							4	18	21		15	7
	12%	9%	14%	7%	7%	19%	13%	~	~	~	~	~	~	7%	15%*	13%	~	11%	13%
08	40	776	4	9	18	9	16							9	29	38	1	30	10
	21%	21%	9%	22%	32%*	19%	24%	~	~	~	~	~	~	15%	25%	23%	8%	22%	19%
09	30	815	7	6	10	7	10							16	14	27	3	18	12
	16%	22%*	16%	15%	18%	15%	15%	~	~	~	~	~	~	27%*	12%	16%	25%	13%	23%
BEST HEALTH CARE POSSIBLE	73	1412	22	19	17	15	25							23	43	63	3	59	14
	39%	39%	51%	46%	30%	32%	37%	~	~	~	~	~	~	38%	36%	38%	25%	43%*	27%*
#8-10 (NET)	143	3003	33	34	45	31	51							48	86	128	7	107	36
	76%	83%*	77%	83%	79%	66%	76%	~	~	~	~	~	~	80%	73%	77%	58%	79%	69%

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		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER ALSK NATV ##	MUL-OTHR TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC		
9-10 (NET)	103 55%	2227 61%	29 67%~	25 61%~	27 47%	22 47%~	35 52%	~	~	~	~	~	~	39 65%*	57 48%*	90 54%~	6 50%~	77 57%	26 50%
NOT ANSWERED	4	109	1	2		1								1	1	2		3	1
VALID CASES	188	3637	43	41	57	47	67							60	118	167	12	136	52
NUMBER OF RESPONDENTS	192 100%	3746 100%	44 100%	43 100%	57 100%	48 100%	67 100%							61 100%	119 100%	169 100%	12 100%	139 100%	53 100%
MEAN	8.44	8.64	8.84	8.73	8.21	8.09	8.49							8.57	8.34	8.46	7.33	8.60	8.00
p stat_(*=Sig @ p<=.05)		.100	~	~	.272	~	.730	~	~	~	~	~	~	.482	.336	~	~	.065	.065

[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	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q15 NEVER	2 1%	66 2%	~	~	~	4%~	1 1%	~	~	~	~	~	~	1 ~0.8%	1 0.6%~	1 8%~	1 0.7%	1 2%
SOMETIMES	19 10%	356 10%	14%~	9%~	9%	9%~	7 10%	~	~	~	~	~	5 8%	14 12%	17 10%~	1 8%~	13 9%	6 11%
USUALLY	68 36%	1161 32%	16%~	37%~	35%	53%~	23 34%	~	~	~	~	~	26 43%	41 34%	64 38%~	4 33%~	47 34%	21 40%
ALWAYS	101 53%	2060 57%	30 70%~	23 53%~	32 56%	16 34%~	36 54%	~	~	~	~	~	30 49%	63 53%	87 51%~	6 50%~	76 55%	25 47%
#ALWAYS + USUALLY (NET)	169 89%	3220 88%	37 86%~	39 91%~	52 91%	41 87%~	59 88%	~	~	~	~	~	56 92%	104 87%	151 89%~	10 83%~	123 90%	46 87%
TOP BOX SCORE	101 53%	2060 57%	30 70%~	23 53%~	32 56%	16 34%~	36 54%	~	~	~	~	~	30 49%	63 53%	87 51%~	6 50%~	76 55%	25 47%
NOT ANSWERED	2	104	1			1												2
VALID CASES	190	3642	43	43	57	47	67						61	119	169	12	137	53
NUMBER OF RESPONDENTS	192 100%	3746 100%	44 100%	43 100%	57 100%	48 100%	67 100%						61 100%	119 100%	169 100%	12 100%	139 100%	53 100%

[ASKED IF Q7 >= 1 TIME]

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

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ PAC	ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q16 YES	202 73%	3847 71%	15 26%*	51 88%*	75 86%*	61 82%*	74 70%	~	~	~	~	~	~	59 72%	131 74%	179 73%~	9 64%~	151 70%*	51 84%*
NO	75 27%	1561 29%	43 74%*	7 12%*	12 14%*	13 18%*	32 30%	~	~	~	~	~	~	23 28%	47 26%	65 27%~	5 36%~	65 30%*	10 16%*
NOT ANSWERED	14	230	1	3	5	5	2								2	2		14	
VALID CASES	277	5408	58	58	87	74	106							82	178	244	14	216	61
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%							82 100%	180 100%	246 100%	14 100%	230 100%	61 100%

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		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ NATV ##	MUL-OTHR TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR POOR	GOOD & FAIR	NO CCC	CCC		
Q17 YES	158	421	~	4%~	9%	12%	5%	~	~	~	~	~	~	4	10	9	5	3	12
	8%	11%												7%	8%	5%~	56%~	2%~	24%~
NO	174	3279	100%~	96%~	91%	88%	61	~	~	~	~	~	~	53	110	158	4	137	37
	92%	89%					95%							93%	92%	95%~	44%~	98%~	76%~
NOT ANSWERED	13	221	2	3	6	2	10							2	11	12		11	2
VALID CASES	189	3699	100%	100%	100%	100%	64							57	120	167	9	140	49
NUMBER OF RESPONDENTS	202	3920	100%	100%	100%	100%	74							59	131	179	9	151	51
	100%	100%					100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q16 = YES]

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

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ NATV ##	MUL-OTHR ##	TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC	
Q18 #YES	14 93%	351 89%	~100%	~100%	~86%	~100%	~	~	~	~	~	~100%	~90%	~89%	~100%	~100%	~92%	~	
NO	1 7%	44 11%	~	~	~14%	~	~	~	~	~	~	~10%	~11%	~	~	~	~8%	~	
NOT ANSWERED		4																	
VALID CASES	15	394	2	6	7	3						4	10	9	5	3	12		
NUMBER OF RESPONDENTS	15	398	2	6	7	3						4	10	9	5	3	12		
	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?

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	MUL- OTHR ##	TI #	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q19 YES	13 5%	201 4%	4 7%	2 3%	6 7%	1 1%*	4 4%	~	~	~	~	~	~	4 5%	9 5%	10 4%~	3 23%~	7 3%	6 10%
NO	261 95%	5179 96%	54 93%	57 97%	78 93%	72 99%*	102 96%	~	~	~	~	~	~	76 95%	169 95%	233 96%~	10 77%~	207 97%	54 90%
NOT ANSWERED	17	258	1	2	8	6	2							2	2	3	1	16	1
VALID CASES	274	5380	58	59	84	73	106							80	178	243	13	214	60
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%							82 100%	180 100%	246 100%	14 100%	230 100%	61 100%

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

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	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 & POOR	NO CCC	CCC	
Q20 NEVER	1 8%	19 10%	~	50%	~	~	~	~	~	~	~	~	25%	~	10%	~	17%	
SOMETIMES	1 8%	32 16%	~	~	17%	~	25%	~	~	~	~	~	~	11%	10%	~	17%	
USUALLY	3 23%	40 20%	~	50%	33%	~	25%	~	~	~	~	~	50%	11%	20%	33%	29% 17%	
ALWAYS	8 62%	107 54%	4 100%	~	50%	100%	50%	~	~	~	~	~	25%	78%	60%	67%	71% 50%	
#ALWAYS + USUALLY (NET)	11 85%	147 74%	4 100%	1 50%	5 83%	1 100%	3 75%	~	~	~	~	~	75%	89%	80%	100%	100% 67%	
TOP BOX SCORE	8 62%	107 54%	4 100%	~	50%	100%	50%	~	~	~	~	~	25%	78%	60%	67%	71% 50%	
NOT ANSWERED		9																
VALID CASES	13	198	4	2	6	1	4						4	9	10	3	7	6
NUMBER OF RESPONDENTS	13	207	4	2	6	1	4						4	9	10	3	7	6
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q19 = YES]

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

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	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	
Q21 #YES	12 92%	166 83%	4 100%	1 50%	6 100%	1 100%	4 100%	~	~	~	~	~	~	3 75%	9 100%	9 90%	3 100%	7 100%	5 83%
NO	1 8%	35 17%	~	1 50%	~	~	~	~	~	~	~	~	1 25%	~	1 10%	~	~	1 17%	
NOT ANSWERED		6																	
VALID CASES	13	201	4	2	6	1	4							4	9	10	3	7	6
NUMBER OF RESPONDENTS	13	207	4	2	6	1	4							4	9	10	3	7	6
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q19 = YES]

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

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	MUL- OTHR #	TI #	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q22 YES	23 8%	487 9%	5 9%	7 12%	5 6%	6 8%	5 5%	~	~	~	~	~	~	8 10%	14 8%	16 7%	6 43%	10 5%*	13 21%*
NO	250 92%	4887 91%	53 91%	50 88%	79 94%	68 92%	102 95%	~	~	~	~	~	~	72 90%	164 92%	226 93%	8 57%	202 95%*	48 79%*
NOT ANSWERED	18	264	1	4	8	5	1							2	2	4		18	
VALID CASES	273	5374	58	57	84	74	107							80	178	242	14	212	61
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%							82 100%	180 100%	246 100%	14 100%	230 100%	61 100%



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

	PSCS TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
		OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q23 NEVER	4 19%	64 14%	~	2 29%	2 40%	1 20%	~	~	~	~	~	~	3 25%	2 14%	1 17%	1 13%	3 23%	
SOMETIMES	5 24%	82 18%	1 20%	2 29%	1 25%	1 20%	~	~	~	~	~	~	3 38%	2 17%	4 29%	1 17%	3 38%	2 15%
USUALLY	3 14%	105 23%	~	~	2 50%	1 20%	~	~	~	~	~	~	1 13%	2 17%	1 7%	2 33%	3 23%	
ALWAYS	9 43%	198 44%	4 80%	3 43%	1 25%	1 20%	2 40%	~	~	~	~	~	4 50%	5 42%	7 50%	2 33%	4 50%	5 38%
#ALWAYS + USUALLY (NET)	12 57%	303 68%	4 80%	3 43%	3 75%	2 40%	3 60%	~	~	~	~	~	5 63%	7 58%	8 57%	4 67%	4 50%	8 62%
TOP BOX SCORE	9 43%	198 44%	4 80%	3 43%	1 25%	1 20%	2 40%	~	~	~	~	~	4 50%	5 42%	7 50%	2 33%	4 50%	5 38%
NOT ANSWERED	2	21			1	1							2	2			2	
VALID CASES	21	448	5	7	4	5	5						8	12	14	6	8	13
NUMBER OF RESPONDENTS	23	469	5	7	5	6	5						8	14	16	6	10	13
	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?

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	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 PAN- IC	EX & VERY GOOD & POOR	FAIR & GOOD	NO CCC	CCC	
Q24 #YES	16 70%	310 69%~	2 40%~	5 71%~	4 80%~	5 83%~	4 80%~	~	~	~	~	~	~	6 75%~	10 71%~	10 63%~	6 100%~	5 50%~	11 85%~
NO	7 30%	142 31%~	3 60%~	2 29%~	1 20%~	1 17%~	1 20%~	~	~	~	~	~	~	2 25%~	4 29%~	6 38%~	~	5 50%~	2 15%~
NOT ANSWERED		17																	
VALID CASES	23	452	5	7	5	6	5							8	14	16	6	10	13
NUMBER OF RESPONDENTS	23	469	5	7	5	6	5							8	14	16	6	10	13
	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		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ NATV ##	MUL-OTHR ##	TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC	
Q25 YES	39 14%	692 13%	3 5%*	7 12%	12 14%	17 23%*	22 20%*	~	~	~	~	~	~	9 11%	29 16%	35 14%~	3 21%~	15 7%*	24 39%*
NO	236 86%	4667 87%	55 95%*	51 88%	72 86%	58 77%*	86 80%*	~	~	~	~	~	~	72 89%	151 84%	210 86%~	11 79%~	199 93%*	37 61%*
NOT ANSWERED	16	279	1	3	8	4								1		1		16	
VALID CASES	275	5359	58	58	84	75	108							81	180	245	14	214	61
NUMBER OF RESPONDENTS	291	5638	59	61	92	79	108							82	180	246	14	230	61
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER IND/ALSK #	MUL-TI ##	HIS-PAN-IC	HIS-PAN-IC	NOT VERY GOOD & POOR	EX & FAIR & POOR	NO CCC	CCC		
Q26 NEVER	5 13%	86 13%	~	~	17%	19%	4 19%	~	~	~	~	~	~	~	5 18%	4 12%	1 33%	1 7%	4 17%	
SOMETIMES	8 21%	135 20%	1 33%	1 14%	2 17%	4 25%	2 10%	~	~	~	~	~	~	~	2 22%	6 21%	7 21%	1 33%	3 20%	5 22%
USUALLY	8 21%	147 22%	~	1 14%	3 25%	4 25%	5 24%	~	~	~	~	~	~	~	2 22%	6 21%	8 24%	~	3 20%	5 22%
ALWAYS	17 45%	290 44%	2 67%	5 71%	5 42%	5 31%	10 48%	~	~	~	~	~	~	~	5 56%	11 39%	15 44%	1 33%	8 53%	9 39%
#ALWAYS + USUALLY (NET)	25 66%	437 66%	2 67%	6 86%	8 67%	9 56%	15 71%	~	~	~	~	~	~	~	7 78%	17 61%	23 68%	1 33%	11 73%	14 61%
TOP BOX SCORE	17 45%	290 44%	2 67%	5 71%	5 42%	5 31%	10 48%	~	~	~	~	~	~	~	5 56%	11 39%	15 44%	1 33%	8 53%	9 39%
NOT ANSWERED	1	25				1	1								1	1				1
VALID CASES	38	658	3	7	12	16	21								9	28	34	3	15	23
NUMBER OF RESPONDENTS	39	683	3	7	12	17	22								9	29	35	3	15	24
	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?

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	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	
Q27 #YES	21 55%	342 52%	1 33%	6 86%	5 42%	9 56%	11 52%	~	~	~	~	~	~	8 89%	12 43%	18 53%	2 67%	10 67%	11 48%
NO	17 45%	320 48%	2 67%	1 14%	7 58%	7 44%	10 48%	~	~	~	~	~	~	1 11%	16 57%	16 47%	1 33%	5 33%	12 52%
NOT ANSWERED	1	21				1	1								1	1			1
VALID CASES	38	662	3	7	12	16	21							9	28	34	3	15	23
NUMBER OF RESPONDENTS	39	683	3	7	12	17	22							9	29	35	3	15	24
	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?

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALS ##	MUL- OTHR ##	TI ##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q28 YES	60 22%	1125 21%	12 21%	15 26%	16 19%	17 24%	25 23%	~	~	~	~	~	~	11 14%*	45 25%	49 20%~	8 57%~	33 15%*	27 46%*
NO	212 78%	4219 79%	46 79%	43 74%	68 81%	55 76%	83 77%	~	~	~	~	~	~	68 86%*	134 75%	193 80%~	6 43%~	180 85%*	32 54%*
NOT ANSWERED	19	294	1	3	8	7								3	1	4		17	2
VALID CASES	272	5344	58	58	84	72	108							79	179	242	14	213	59
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%							82 100%	180 100%	246 100%	14 100%	230 100%	61 100%

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?

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	MUL- OTHR #	TI #	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q29 #YES	30 50%	616 57%	5 42%~	7 47%~	7 44%~	11 65%~	15 60%~	~	~	~	~	~	~	8 73%~	20 44%~	23 47%~	6 75%~	14 42%~	16 59%~
NO	30 50%	465 43%	7 58%~	8 53%~	9 56%~	6 35%~	10 40%~	~	~	~	~	~	~	3 27%~	25 56%~	26 53%~	2 25%~	19 58%~	11 41%~
NOT ANSWERED		36																	
VALID CASES	60	1081	12	15	16	17	25							11	45	49	8	33	27
NUMBER OF RESPONDENTS	60 100%	1117 100%	12 100%	15 100%	16 100%	17 100%	25 100%							11 100%	45 100%	49 100%	8 100%	33 100%	27 100%

[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?

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALS ##	MUL- OTHR ##	TI ##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q30 YES	230 85%	4642 88%	53 93%*	47 82%	69 82%	61 85%	94 89%	~	~	~	~	~	~	58 73%*	160 90%*	205 85%~	10 71%~	175 84%	55 90%
NO	40 15%	640 12%	4 7%*	10 18%	15 18%	11 15%	12 11%	~	~	~	~	~	~	21 27%*	17 10%*	36 15%~	4 29%~	34 16%	6 10%
NOT ANSWERED	21	357	2	4	8	7	2							3	3	5		21	
VALID CASES	270	5281	57	57	84	72	106							79	177	241	14	209	61
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%							82 100%	180 100%	246 100%	14 100%	230 100%	61 100%



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

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q31 NONE	83 38%	1245 28%*	13 25%*	14 32%~	31 46%	25 45%	35 39%	~	~	~	~	~	~	20 35%	58 38%	75 38%~	1 ~	72 43%*	11 21%*
1 TIME	67 30%	1677 37%*	18 35%	15 34%~	22 32%	12 21%	32 36%	~	~	~	~	~	~	16 28%	50 33%	65 33%~	1 10%~	54 32%	13 25%
2	34 15%	850 19%	11 21%	7 16%~	7 10%	9 16%	12 13%	~	~	~	~	~	~	9 16%	23 15%	31 16%~	1 10%~	23 14%	11 21%
3	16 7%	387 9%	4 8%	4 9%~	3 4%	5 9%	5 6%	~	~	~	~	~	~	7 12%	9 6%	12 6%~	4 40%~	9 5%	7 13%
4	7 3%	160 4%	4 8%	1 2%~	2 3%	~	~	~	~	~	~	~	~	4 7%	2 1%	4 2%~	2 20%~	4 2%	3 6%
5 TO 9	10 5%	163 4%	2 4%	2 5%~	3 4%	3 5%	3 3%	~	~	~	~	~	~	1 2%	7 5%	6 3%~	2 20%~	4 2%*	6 12%*
10 OR MORE TIMES	3 1%	21 0.5%	~	1 2%~	~	2 4%	2 2%	~	~	~	~	~	~	~	3 2%~	3 2%~	~	2 1%	1 2%
NOT ANSWERED	10	173	1	3	1	5	5							1	8	9		7	3
VALID CASES	220	4503	52	44	68	56	89							57	152	196	10	168	52
NUMBER OF RESPONDENTS	230	4676	53	47	69	61	94							58	160	205	10	175	55
	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		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND NATV #	AMER ALSK ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR POOR	GOOD & FAIR	NO CCC	CCC		
Q31A ALWAYS	4 3%	87 3%	1 3%	2 7%	~	1 3%	~	~	~	~	~	~	~	1 3%	3 3%	2 2%	2 20%	2 2%	2 5%
USUALLY	3 2%	60 2%	1 3%	1 3%	~	1 3%	~	~	~	~	~	~	~	3 8%	3 3%	~	~	3 3%	~
SOMETIMES	4 3%	220 7%*	1 3%	~	2 6%	1 3%	~	~	~	~	~	~	~	4 11%	4 3%	~	~	4 4%	~
NEVER	125 92%	2850 89%	36 92%	27 90%	34 94%	28 90%	54 100%	~	~	~	~	~	~	28 78%	91 97%	111 92%	8 80%	86 91%	39 95%
#NEVER + SOMETIMES (NET)	129 95%	3070 95%	37 95%	27 90%	36 100%	29 94%	54 100%	~	~	~	~	~	~	32 89%	91 97%	115 96%	8 80%	90 95%	39 95%
TOP BOX SCORE	125 92%	2850 89%	36 92%	27 90%	34 94%	28 90%	54 100%	~	~	~	~	~	~	28 78%	91 97%	111 92%	8 80%	86 91%	39 95%
NOT ANSWERED	1	23			1									1	1			1	
VALID CASES	136	3216	39	30	36	31	54							36	94	120	10	95	41
NUMBER OF RESPONDENTS	137 100%	3239 100%	39 100%	30 100%	37 100%	31 100%	54 100%							37 100%	94 100%	121 100%	10 100%	96 100%	41 100%

[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	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ NATV ##	MUL-OTHR ##	TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q32 NEVER	3 2%	78 2%	2 5%~	~	~	1 3%~	1 2%	~	~	~	~	~	1 3%~	2 2%~	2 2%~	1 10%~	2 2%~	1 2%~
SOMETIMES	3 2%	156 5%*	1 3%~	~	1 3%~	1 3%~	~	~	~	~	~	~	3 8%~	~	2 2%~	1 10%~	2 2%~	1 2%~
USUALLY	22 16%	485 15%	3 8%~	3 10%~	7 19%~	9 29%~	11 20%	~	~	~	~	~	5 14%~	17 18%~	19 16%~	3 30%~	15 16%~	7 17%~
ALWAYS	109 80%	2499 78%	33 85%~	27 90%~	29 78%~	20 65%~	42 78%	~	~	~	~	~	28 76%~	75 80%~	98 81%~	5 50%~	77 80%~	32 78%~
#ALWAYS + USUALLY (NET)	131 96%	2984 93%	36 92%~	30 100%~	36 97%~	29 94%~	53 98%	~	~	~	~	~	33 89%~	92 98%~	117 97%~	8 80%~	92 96%~	39 95%~
TOP BOX SCORE	109 80%	2499 78%	33 85%~	27 90%~	29 78%~	20 65%~	42 78%	~	~	~	~	~	28 76%~	75 80%~	98 81%~	5 50%~	77 80%~	32 78%~
NOT ANSWERED		21																
VALID CASES	137	3218	39	30	37	31	54						37	94	121	10	96	41
NUMBER OF RESPONDENTS	137	3239	39	30	37	31	54						37	94	121	10	96	41
	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?

	PSCS TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
		OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q33 NEVER	35 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	8 6%	139 4%	2 5%	3 10%	3 10%	3 6%	~	~	~	~	~	2 5%	5 5%	7 6%	6 6%	2 5%	
USUALLY	19 14%	518 16%	1 3%	4 13%	7 19%	7 23%	11 20%	~	~	~	~	1 3%	18 19%	17 14%	2 20%	13 14%	6 15%
ALWAYS	110 80%	2521 78%	36 92%	23 77%	30 81%	21 68%	40 74%	~	~	~	~	34 92%	71 76%	97 80%	8 80%	77 80%	33 80%
#ALWAYS + USUALLY (NET)	129 94%	3039 95%	37 95%	27 90%	37 100%	28 90%	51 94%	~	~	~	~	35 95%	89 95%	114 94%	10 100%	90 94%	39 95%
TOP BOX SCORE	110 80%	2521 78%	36 92%	23 77%	30 81%	21 68%	40 74%	~	~	~	~	34 92%	71 76%	97 80%	8 80%	77 80%	33 80%
NOT ANSWERED		26															
VALID CASES	137	3213	39	30	37	31	54					37	94	121	10	96	41
NUMBER OF RESPONDENTS	137 100%	3239 100%	39 100%	30 100%	37 100%	31 100%	54 100%					37 100%	94 100%	121 100%	10 100%	96 100%	41 100%

[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?

	PSCS TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
		OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q34 NEVER	28 0.9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	6 4%	104 3%	1 3%	3 10%	2 6%	2 4%	~	~	~	~	~	5 5%	5 4%	3 3%	3 7%		
USUALLY	13 10%	398 12%	1 3%	1 3%	3 8%	8 26%	6 11%	~	~	~	~	2 5%	11 12%	11 9%	2 20%	7 7%	6 15%
ALWAYS	117 86%	2679 83%	36 95%	26 87%	34 92%	21 68%	46 85%	~	~	~	~	35 95%	78 83%	105 87%	8 80%	85 89%	32 78%
#ALWAYS + USUALLY (NET)	130 96%	3077 96%	37 97%	27 90%	37 100%	29 94%	52 96%	~	~	~	~	37 100%	89 95%	116 96%	10 100%	92 97%	38 93%
TOP BOX SCORE	117 86%	2679 83%	36 95%	26 87%	34 92%	21 68%	46 85%	~	~	~	~	35 95%	78 83%	105 87%	8 80%	85 89%	32 78%
NOT ANSWERED	1	30	1													1	
VALID CASES	136	3209	38	30	37	31	54					37	94	121	10	95	41
NUMBER OF RESPONDENTS	137	3239	39	30	37	31	54					37	94	121	10	96	41
	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		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND #	AMER IND/ALSK ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC		
Q35 YES	88 65%	2175 68%	4 11%	21 70%	33 89%	30 97%	34 63%	~	~	~	~	~	~	25 68%	60 65%	78 64%	7 78%	58 61%	30 75%
NO	47 35%	1015 32%	33 89%	9 30%	4 11%	1 3%	20 37%	~	~	~	~	~	~	12 32%	33 35%	43 36%	2 22%	37 39%	10 25%
NOT ANSWERED	2	49	2											1		1		1	1
VALID CASES	135	3190	37	30	37	31	54							37	93	121	9	95	40
NUMBER OF RESPONDENTS	137 100%	3239 100%	39 100%	30 100%	37 100%	31 100%	54 100%							37 100%	94 100%	121 100%	10 100%	96 100%	41 100%

[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	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND NATV #	AMER ALSK OTHR ##	MUL-TI ##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
Q36 NEVER	1 1%	30 1%	1 25%~	~	~	~	~	~	~	~	~	~	1 4%~	~	1 1%~	~	1 2%~	~
SOMETIMES	4 5%	137 6%	~	4 19%~	~	~	2 6%~	~	~	~	~	~	~	3 5%~	3 4%~	~	3 5%~	1 3%~
USUALLY	23 26%	493 23%	1 25%~	4 19%~	8 25%~	10 33%~	12 36%~	~	~	~	~	~	5 20%~	18 31%~	21 27%~	2 29%~	13 23%~	10 33%~
ALWAYS	59 68%	1509 70%	2 50%~	13 62%~	24 75%~	20 67%~	19 58%~	~	~	~	~	~	19 76%~	38 64%~	52 68%~	5 71%~	40 70%~	19 63%~
#ALWAYS + USUALLY (NET)	82 94%	2002 92%	3 75%~	17 81%~	32 100%~	30 100%~	31 94%~	~	~	~	~	~	24 96%~	56 95%~	73 95%~	7 100%~	53 93%~	29 97%~
TOP BOX SCORE	59 68%	1509 70%	2 50%~	13 62%~	24 75%~	20 67%~	19 58%~	~	~	~	~	~	19 76%~	38 64%~	52 68%~	5 71%~	40 70%~	19 63%~
NOT ANSWERED	1	40			1		1							1	1		1	
VALID CASES	87	2170	4	21	32	30	33						25	59	77	7	57	30
NUMBER OF RESPONDENTS	88	2210	4	21	33	30	34						25	60	78	7	58	30
	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	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR 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	
Q37 NEVER	4 3%	96 3%	~	3%~	5%~	3%~	2	~	~	~	~	~	1	2	2	1	2	2
SOMETIMES	13 10%	305 10%	11%~	10%~	3%~	16%~	4	~	~	~	~	~	5	8	11	2	11	2
USUALLY	31 23%	799 25%	8%~	28%~	24%~	35%~	11	~	~	~	~	~	9	22	27	4	19	12
ALWAYS	86 64%	1981 62%	81%~	59%~	68%~	45%~	37	~	~	~	~	~	20	62	79	3	61	25
#ALWAYS + USUALLY (NET)	117 87%	2780 87%	89%~	86%~	92%~	81%~	48	~	~	~	~	~	29	84	106	7	80	37
TOP BOX SCORE	86 64%	1981 62%	81%~	59%~	68%~	45%~	37	~	~	~	~	~	20	62	79	3	61	25
NOT ANSWERED	3	58	2	1									2		2		3	
VALID CASES	134	3181	37	29	37	31	54						35	94	119	10	93	41
NUMBER OF RESPONDENTS	137 100%	3239 100%	39 100%	30 100%	37 100%	31 100%	54 100%						37 100%	94 100%	121 100%	10 100%	96 100%	41 100%

[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	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ NATV ##	MUL-OTHR ##	TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q38 #YES	119 88%	2742 86%	35 92%~	29 97%~	28 78%~	27 87%~	51 94%*	~	~	~	~	~	30 ~81%~	86 91%~	109 90%~	7 70%~	84 89%~	35 85%~
NO	16 12%	440 14%	3 8%~	1 3%~	8 22%~	4 13%~	3 6%*	~	~	~	~	~	7 ~19%~	8 9%~	12 10%~	3 30%~	10 11%~	6 15%~
NOT ANSWERED	2	57	1		1													2
VALID CASES	135	3182	38	30	36	31	54						37	94	121	10	94	41
NUMBER OF RESPONDENTS	137	3239	39	30	37	31	54						37	94	121	10	96	41
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

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

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ NATV ##	MUL-OTHR TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q39 YES	61 46%	1245 39%	19 50%~	11 37%~	12 34%~	19 61%~	27 50%	~	~	~	~	~	13 36%~	45 48%~	52 43%~	6 60%~	34 36%~	27 68%~
Q39 NO	73 54%	1935 61%	19 50%~	19 63%~	23 66%~	12 39%~	27 50%	~	~	~	~	~	23 64%~	49 52%~	68 57%~	4 40%~	60 64%~	13 33%~
NOT ANSWERED	3	59	1		2								1		1		2	1
VALID CASES	134	3180	38	30	35	31	54						36	94	120	10	94	40
NUMBER OF RESPONDENTS	137	3239	39	30	37	31	54						37	94	121	10	96	41
	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?

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER ALSK OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q40 NEVER	2 3%	77 7%	~	~	~	11%~	2 4%~	~	~	~	~	~	~	2 5%~	2 4%~	~	~	2 7%~
SOMETIMES	6 10%	132 11%	3 16%~	2 20%~	1 8%~	2 8%~	~	~	~	~	~	2 15%~	3 7%~	5 10%~	~	4 12%~	2 7%~	
USUALLY	18 30%	337 29%	4 21%~	1 10%~	4 33%~	9 47%~	8 31%~	~	~	~	~	5 38%~	13 30%~	16 31%~	2 33%~	11 33%~	7 26%~	
ALWAYS	34 57%	626 53%	12 63%~	7 70%~	7 58%~	8 42%~	15 58%~	~	~	~	~	6 46%~	26 59%~	28 55%~	4 67%~	18 55%~	16 59%~	
#ALWAYS + USUALLY (NET)	52 87%	962 82%	16 84%~	8 80%~	11 92%~	17 89%~	23 88%~	~	~	~	~	11 85%~	39 89%~	44 86%~	6 100%~	29 88%~	23 85%~	
TOP BOX SCORE	34 57%	626 53%	12 63%~	7 70%~	7 58%~	8 42%~	15 58%~	~	~	~	~	6 46%~	26 59%~	28 55%~	4 67%~	18 55%~	16 59%~	
NOT ANSWERED	1	42	1				1						1	1		1		
VALID CASES	60	1171	19	10	12	19	26					13	44	51	6	33	27	
NUMBER OF RESPONDENTS	61	1213	19	11	12	19	27					13	45	52	6	34	27	
	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	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER ALSK NATV ##	MUL-OTHR TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q41 WORST PERSONAL DOCTOR POSSIBLE	1 0.5%	8 0.2%	~	~	1% 1	~	~	~	~	~	~	~	~	1 ~0.6%	1 ~0.5%	~	~	1 2%~
01		20 0.5%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02		19 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03	1 0.5%	22 0.5%	~	~	~	1 2%	~	~	~	~	~	~	~	1 ~0.6%	1 ~0.5%	~	~	1 2%
04	1 0.5%	26 0.6%	~	1 2%	~	~	~	~	~	~	~	~	~	1 2%	1 ~0.5%	~	1 ~0.6%	~
05	10 5%	122 3%	~	3 7%	3 4%	4 7%	6 7%	~	~	~	~	~	~	10 6%	10 5%	~	6 4%	4 7%
06	5 2%	114 3%	1 2%	1 2%	2 3%	1 2%	3 3%	~	~	~	~	~	~	4 3%	3 2%	1 10%	2 1%	3 6%
07	18 8%	260 6%	5 10%	2 4%	3 4%	8 15%	5 6%	~	~	~	~	~	~	3 5%	13 8%	16 8%	17 10%	1 2%
08	39 18%	703 16%	8 15%	5 11%	14 21%	12 22%	19 21%	~	~	~	~	~	~	12 21%	27 18%	34 17%	4 40%	12 16%
09	40 18%	904 20%	9 17%	11 24%	9 13%	11 20%	22 25%*	~	~	~	~	~	~	9 16%	31 20%	39 20%	~	8 15%
BEST PERSONAL DOCTOR POSSIBLE	105 48%	2271 51%	29 56%	23 50%	36 53%	17 31%*	34 38%*	~	~	~	~	~	~	32 56%	67 44%	94 47%	5 50%	81 49%
#8-10 (NET)	184 84%	3877 87%	46 88%	39 85%	59 87%	40 74%	75 84%	~	~	~	~	~	~	53 93%*	125 81%	167 84%	9 90%	140 84%

Continued

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

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER ALSK NATV ##	MUL-OTHR TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC		
9-10 (NET)	145 66%	3175 71%	38 73%	34 74%	45 66%	28 52%	56 63%	~	~	~	~	~	~	41 72%	98 64%	133 67%	5 50%	113 68%	32 59%
NOT ANSWERED	10	208	1	1	1	7	5							1	6	6		9	1
VALID CASES	220	4468	52	46	68	54	89							57	154	199	10	166	54
NUMBER OF RESPONDENTS	230 100%	4676 100%	53 100%	47 100%	69 100%	61 100%	94 100%							58 100%	160 100%	205 100%	10 100%	175 100%	55 100%
MEAN	8.80	8.91	9.15	8.87	8.84	8.33	8.69							9.16	8.66	8.79	8.80	8.91	8.44
p stat_(*=Sig @ p<=.05)	.284	.023*	~.802	.014*	.386	~	~	~	~	~	~	~	~	.019*	.026*	~	~	.130	.130

[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		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND #	AMER IND/PAC ALSK ##	MUL-TI OTHR ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
Q42 YES	66 30%	1079 24%	9 17%*	13 28%~	18 26%	26 47%*	29 32%	~	~	~	~	~	~	14 25%	49 32%	55 28%~	8 80%~	19 11%*	47 87%*
NO	155 70%	3404 76%	43 83%*	33 72%~	50 74%	29 53%*	61 68%	~	~	~	~	~	~	43 75%	106 68%	145 72%~	2 20%~	148 89%*	7 13%*
NOT ANSWERED	9	193	1	1	1	6	4							1	5	5		8	1
VALID CASES	221	4483	52	46	68	55	90							57	155	200	10	167	54
NUMBER OF RESPONDENTS	230 100%	4676 100%	53 100%	47 100%	69 100%	61 100%	94 100%							58 100%	160 100%	205 100%	10 100%	175 100%	55 100%

[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		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	MUL- OTHR #	TI #	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q43 #YES	59 91%	932 89%	9 100%~	11 92%~	16 89%~	23 88%~	27 93%~	~	~	~	~	~	~	14 ~100%~	43 90%~	49 91%~	8 100%~	15 83%~	44 94%~
NO	6 9%	112 11%	~	8%~	1 11%~	2 12%~	3 7%~	~	~	~	~	~	~	5 ~10%~	5 9%~	~	~	3 17%~	3 6%~
NOT ANSWERED	1	26		1										1	1			1	
VALID CASES	65	1045	9	12	18	26	29							14	48	54	8	18	47
NUMBER OF RESPONDENTS	66	1071	9	13	18	26	29							14	49	55	8	19	47
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

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

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ NATV ##	MUL-OTHR TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC		
Q44 #YES	59 91%	903 87%	9 100%~	12 92%~	15 88%~	23 88%~	27 93%~	~	~	~	~	~	~	14 ~100%~	43 90%~	49 91%~	8 100%~	16 84%~	43 93%~
NO	6 9%	141 13%	~	8%~	1 12%~	2 12%~	3 7%~	2 ~	~	~	~	~	~	5 ~10%~	5 9%~	~	3 16%~	3 7%~	
NOT ANSWERED	1	27			1									1	1			1	
VALID CASES	65	1044	9	13	17	26	29							14	48	54	8	19	46
NUMBER OF RESPONDENTS	66	1071	9	13	18	26	29							14	49	55	8	19	47
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]



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

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER ALSK #	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
Q45 YES	41 15%	851 16%	5 9%	11 19%	11 13%	14 19%	20 19%	~	~	~	~	~	~	8 10%	30 17%	30 12%	8 57%	21 10%*	20 33%*
NO	228 85%	4406 84%	51 91%	46 81%	71 87%	60 81%	87 81%	~	~	~	~	~	~	74 90%	149 83%	215 88%	6 43%	188 90%*	40 67%*
NOT ANSWERED	22	381	3	4	10	5	1								1	1		21	1
VALID CASES	269	5257	56	57	82	74	107							82	179	245	14	209	60
NUMBER OF RESPONDENTS	291	5638	59	61	92	79	108							82	180	246	14	230	61
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ NATV ##	MUL-OTHR ##	TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q46 NEVER	3 7%	36 5%	~	1 9%	1 9%	1 7%	~	~	~	~	~	~	2 25%	~	1 3%	1 13%	1 5%	2 10%
SOMETIMES	10 24%	163 21%	1 20%	4 36%	3 27%	2 14%	5 25%	~	~	~	~	~	3 38%	7 23%	7 23%	3 38%	5 24%	5 25%
USUALLY	13 32%	221 28%	~	3 27%	3 27%	7 50%	7 35%	~	~	~	~	~	1 13%	11 37%	11 37%	1 13%	7 33%	6 30%
ALWAYS	15 37%	367 47%	4 80%	3 27%	4 36%	4 29%	8 40%	~	~	~	~	~	2 25%	12 40%	11 37%	3 38%	8 38%	7 35%
#ALWAYS + USUALLY (NET)	28 68%	589 75%	4 80%	6 55%	7 64%	11 79%	15 75%	~	~	~	~	~	3 38%	23 77%	22 73%	4 50%	15 71%	13 65%
TOP BOX SCORE	15 37%	367 47%	4 80%	3 27%	4 36%	4 29%	8 40%	~	~	~	~	~	2 25%	12 40%	11 37%	3 38%	8 38%	7 35%
NOT ANSWERED		15																
VALID CASES	41	787	5	11	11	14	20						8	30	30	8	21	20
NUMBER OF RESPONDENTS	41	802	5	11	11	14	20						8	30	30	8	21	20
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

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

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER ALSK NATV ##	MUL-TI OTHR ##	HIS-PAN-IC	HIS-PAN-IC	NOT VERY GOOD & POOR	EX & FAIR & POOR	NO CCC	CCC	
Q47 NONE	1 3%	55 7%	~	1 9%	~	~	1 5%	~	~	~	~	~	~	1 3%	1 3%	~	1 5%	~
1 SPECIALIST	28 70%	514 65%	4 80%	5 45%	7 70%	12 86%	17 85%	~	~	~	~	~	3 43%	23 77%	22 76%	4 50%	16 80%	12 60%
2	5 13%	134 17%	1 20%	1 9%	2 20%	1 7%	1 5%	~	~	~	~	~	1 14%	4 13%	3 10%	2 25%	~	5 25%
3	3 8%	51 6%	~	2 18%	~	1 7%	1 5%	~	~	~	~	~	1 14%	2 7%	1 3%	2 25%	1 5%	2 10%
4	2 5%	13 2%	~	1 9%	1 10%	~	~	~	~	~	~	~	1 14%	~	1 3%	~	2 10%	~
5 OR MORE SPECIALISTS	1 3%	19 2%	~	1 9%	~	~	~	~	~	~	~	~	1 14%	~	1 3%	~	~	1 5%
NOT ANSWERED	1	16				1							1		1		1	
VALID CASES	40	786	5	11	10	14	20						7	30	29	8	20	20
NUMBER OF RESPONDENTS	41	802	5	11	11	14	20						8	30	30	8	21	20
	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?

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV ILND #	AMER ALSK ##	IND/ OTHR ##	MUL- TI ##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q48 WORST SPECIALIST POSSIBLE		7 0.9%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01		4 0.5%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02		6 0.9%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03	1 3%	5 0.6%~	~	1 10%~	~	~	~	~	~	~	~	~	1 3%~	1 4%~	~	~	1 5%~	
04		6 0.9%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
05	3 8%	29 4%~	~	~	1 10%~	2 14%~	1 5%~	~	~	~	~	~	1 14%~	2 7%~	2 7%~	1 13%~	2 11%~	1 5%~
06		32 4%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
07	6 15%	59 8%~	~	2 20%~	2 20%~	2 14%~	2 11%~	~	~	~	~	~	2 29%~	3 10%~	4 14%~	1 13%~	3 16%~	3 15%~
08	5 13%	116 16%~	1 20%~	~	2 20%~	2 14%~	2 11%~	~	~	~	~	~	~	5 17%~	3 11%~	2 25%~	1 5%~	4 20%~
09	7 18%	143 20%~	1 20%~	1 10%~	2 20%~	3 21%~	4 21%~	~	~	~	~	~	1 14%~	6 21%~	7 25%~	~	3 16%~	4 20%~
BEST SPECIALIST POSSIBLE	17 44%	312 43%~	3 60%~	6 60%~	3 30%~	5 36%~	10 53%~	~	~	~	~	~	3 43%~	12 41%~	11 39%~	4 50%~	10 53%~	7 35%~

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			
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER ALSK ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC	
#8-10 (NET)	29 74%	570 80%	5 100%	7 70%	7 70%	10 71%	16 84%	~	~	~	~	~	~	4 57%	23 79%	21 75%	6 75%	14 74%	15 75%
9-10 (NET)	24 62%	455 63%	4 80%	7 70%	5 50%	8 57%	14 74%	~	~	~	~	~	~	4 57%	18 62%	18 64%	4 50%	13 68%	11 55%
NOT ANSWERED		7																	
VALID CASES	39	717	5	10	10	14	19							7	29	28	8	19	20
NUMBER OF RESPONDENTS	39	724	5	10	10	14	19							7	29	28	8	19	20
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%
MEAN	8.54	8.55	9.40	8.60	8.30	8.36	9.00							8.29	8.55	8.50	8.50	8.74	8.35
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	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND #	AMER IND/PAC ALSK ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q49 YES	65 25%	1347 26%	14 25%	11 20%	22 27%	18 25%	22 20%	~	~	~	~	~	25 31%	37 21%	51 21%	9 64%	51 25%	14 23%
NO	200 75%	3870 74%	42 75%	44 80%	59 73%	55 75%	86 80%	~	~	~	~	~	55 69%	140 79%	190 79%	5 36%	153 75%	47 77%
NOT ANSWERED	26	421	3	6	11	6							2	3	5		26	
VALID CASES	265	5217	56	55	81	73	108						80	177	241	14	204	61
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%						82 100%	180 100%	246 100%	14 100%	230 100%	61 100%

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

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ NATV ##	MUL-OTHR ##	TI ##	HIS-IC	HIS-PAN-IC	NOT VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q50 NEVER	1 2%	45 3%	~	~	~	7%~	1 5%~	~	~	~	~	~	~	1 3%~	1 2%~	~	~	1 8%~
SOMETIMES	13 21%	221 17%	3 21%~	4 36%~	6 27%~	4 21%~	~	~	~	~	~	~	3 12%~	8 24%~	10 20%~	1 13%~	11 22%~	2 15%~
USUALLY	20 32%	378 29%	3 21%~	3 27%~	8 36%~	6 40%~	4 21%~	~	~	~	~	~	11 44%~	8 24%~	15 31%~	3 38%~	12 24%~	8 62%~
ALWAYS	28 45%	651 50%	8 57%~	4 36%~	8 36%~	8 53%~	10 53%~	~	~	~	~	~	11 44%~	17 50%~	23 47%~	4 50%~	26 53%~	2 15%~
#ALWAYS + USUALLY (NET)	48 77%	1029 79%	11 79%~	7 64%~	16 73%~	14 93%~	14 74%~	~	~	~	~	~	22 88%~	25 74%~	38 78%~	7 88%~	38 78%~	10 77%~
TOP BOX SCORE	28 45%	651 50%	8 57%~	4 36%~	8 36%~	8 53%~	10 53%~	~	~	~	~	~	11 44%~	17 50%~	23 47%~	4 50%~	26 53%~	2 15%~
NOT ANSWERED	3	28				3	3							3	2	1	2	1
VALID CASES	62	1295	14	11	22	15	19						25	34	49	8	49	13
NUMBER OF RESPONDENTS	65	1323	14	11	22	18	22						25	37	51	9	51	14
	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	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER PAC ALSK NATV ##	MUL-OTHR TI ##	HIS-IC	HIS-PAN-IC	NOT VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q51 NEVER	1 2%	23 2%	~	9%~	~	~	~	~	~	~	~	~	3%~	1 2%~	1 ~	1 2%~	1 ~	
SOMETIMES	3 5%	90 7%	~	9%~	9%~	~	~	~	~	~	~	~	4%~	1 3%~	1 4%~	2 6%~	3 ~	
USUALLY	14 23%	268 21%	4 29%~	2 18%~	6 27%~	2 13%~	5 26%~	~	~	~	~	~	5 20%~	9 26%~	11 22%~	1 13%~	11 22%~	3 23%~
ALWAYS	44 71%	903 70%	10 71%~	7 64%~	14 64%~	13 87%~	14 74%~	~	~	~	~	~	19 76%~	23 68%~	35 71%~	7 88%~	34 69%~	10 77%~
#ALWAYS + USUALLY (NET)	58 94%	1171 91%	14 100%~	9 82%~	20 91%~	15 100%~	19 100%~	~	~	~	~	~	24 96%~	32 94%~	46 94%~	8 100%~	45 92%~	13 100%~
TOP BOX SCORE	44 71%	903 70%	10 71%~	7 64%~	14 64%~	13 87%~	14 74%~	~	~	~	~	~	19 76%~	23 68%~	35 71%~	7 88%~	34 69%~	10 77%~
NOT ANSWERED	3	39				3	3							3	2	1	2	1
VALID CASES	62	1284	14	11	22	15	19						25	34	49	8	49	13
NUMBER OF RESPONDENTS	65	1323	14	11	22	18	22						25	37	51	9	51	14
	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	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND #	AMER IND/PAC ALSK ##	MUL-TI OTHR ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q52 YES	95 36%	1805 35%	20 36%	20 36%	28 35%	27 38%	32 30%	~	~	~	~	~	30 37%	62 35%	88 36%	6 43%	72 35%	23 38%
NO	169 64%	3343 65%	35 64%	36 64%	53 65%	45 62%	75 70%	~	~	~	~	~	51 63%	116 65%	156 64%	8 57%	131 65%	38 62%
NOT ANSWERED	27	490	4	5	11	7	1						1	2	2		27	
VALID CASES	264	5148	55	56	81	72	107						81	178	244	14	203	61
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%						82 100%	180 100%	246 100%	14 100%	230 100%	61 100%

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	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AMER	AS- IAN	NATV ILND	AMER ALSK	MUL- OTHR	HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
							#	##	#	##	##	##	##					
PQ53 NEVER	7 3%	124 2%	~	2%	5	1	1	~	~	~	~	~	1	6	6	1	3	4
					6%	1%							1%	3%	3%~	7%~	2%	7%
SOMETIMES	14 5%	397 8%	4%	5%	2	7	6	~	~	~	~	~	3	11	11	3	8	6
					3%	10%	6%						4%	6%	5%~	21%~	4%	10%
USUALLY	33 13%	575 11%	13%	11%	7	8	10	~	~	~	~	~	11	20	32	1	27	6
					15%	11%	10%						14%	11%	13%~	7%~	14%	10%
ALWAYS	205 79%	3983 78%	83%	82%	45	54	87	~	~	~	~	~	65	137	190	9	161	44
					76%	77%	84%						81%	79%	79%~	64%~	81%	73%
#ALWAYS + USUALLY (NET)	238 92%	4559 90%	96%	93%	52	62	97	~	~	~	~	~	76	157	222	10	188	50
					91%	89%	93%						95%	90%	93%~	71%~	94%*	83%*
TOP BOX SCORE	205 79%	3983 78%	83%	82%	45	54	87	~	~	~	~	~	65	137	190	9	161	44
					76%	77%	84%						81%	79%	79%~	64%~	81%	73%
NOT ANSWERED	32	559	5	6	12	9	4						2	6	7		31	1
VALID CASES	259	5079	54	55	80	70	104						80	174	239	14	199	60
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%						82 100%	180 100%	246 100%	14 100%	230 100%	61 100%

[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		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER ALSK NATV ##	MUL-OTHR TI ##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q54 WORST HEALTH PLAN POSSIBLE	1 0.4%	17 0.3%	~	~	1%~	~	1 0.9%	~	~	~	~	~	~	1 0.6%	1 0.4%	~	~	1 2%~	
01	1 0.4%	27 0.5%	~	~	1%~	~	1 0.9%	~	~	~	~	~	~	1 0.6%	1 0.4%	~	~	1 2%~	
02	3 1%	33 0.6%	~	~	4%	~	~	~	~	~	~	~	~	3 2%	3 1%	~	1 0.5%	2 3%	
03	1 0.4%	44 0.9%	~	~	1%~	~	1 0.9%	~	~	~	~	~	~	1 0.6%	1 0.4%	~	~	1 2%~	
04	3 1%	62 1%	~	~	2%	1%~	1 0.9%	~	~	~	~	~	~	1 1%	2 1%	2 0.8%	1 7%	1 0.5%	2 3%
05	19 7%	275 5%	4% 8%	3% 5%	6% 7%	6% 8%	11 10%	~	~	~	~	~	~	2 3%*	16 9%	15 6%	3 21%	14 7%	5 8%
06	14 5%	233 5%	1% 2%	2% 4%	5% 6%	6% 8%	7 7%	~	~	~	~	~	~	3 4%	10 6%	14 6%	~	10 5%	4 7%
07	34 13%	496 10%	6% 11%	6% 11%	10% 12%	12% 17%	17 16%	~	~	~	~	~	~	7 9%	27 15%	31 13%	2 14%	26 13%	8 13%
08	47 18%	982 19%	14% 26%	10% 18%	12% 15%	11% 15%	19 18%	~	~	~	~	~	~	8 10%*	39 22%*	46 19%	1 7%	39 19%	8 13%
09	52 20%	974 19%	6% 11%*	12% 21%	16% 20%	18% 25%	20 19%	~	~	~	~	~	~	20 25%	30 17%	47 19%	3 21%	38 19%	14 23%
BEST HEALTH PLAN POSSIBLE	87 33%	2033 39%*	22% 42%	23% 41%	24% 30%	18% 25%	28 26%*	~	~	~	~	~	~	39 49%*	48 27%*	81 33%	4 29%	72 36%	15 25%
#8-10 (NET)	186 71%	3988 77%*	42% 79%	45% 80%	52% 64%	47% 65%	67 63%*	~	~	~	~	~	~	67 84%*	117 66%*	174 72%	8 57%	149 74%	37 61%

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		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER ALSK NATV ##	MUL-OTHR TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
9-10 (NET)	139 53%	3007 58%	28 53%	35 63%	40 49%	36 50%	48 45%*	~	~	~	~	~	~	59 74%*	78 44%*	128 53%~	7 50%~	110 55%	29 48%
NOT ANSWERED	29	462	6	5	11	7	2							2	2	4		29	
VALID CASES	262	5176	53	56	81	72	106							80	178	242	14	201	61
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%							82 100%	180 100%	246 100%	14 100%	230 100%	61 100%
MEAN	8.22	8.44	8.57	8.70	7.75	8.11	7.89							8.94	7.92	8.24	7.71	8.42	7.56
p stat_(*=Sig @ p<=.05)		.050*	.086	.012*	.024*	.546	.023*	~	~	~	~	~	~	.000*	.000*	~	~	.013*	.013*

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

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ PAC	ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q55																			
YES	111 42%	1994 38%	26 48%	23 42%	33 42%	29 39%	47 44%	~	~	~	~	~	~	32 41%	75 42%	99 41%	10 77%	63 31%*	48 79%*
NO	151 58%	3218 62%	28 52%	32 58%	46 58%	45 61%	61 56%	~	~	~	~	~	~	47 59%	104 58%	145 59%	3 23%	138 69%*	13 21%*
NOT ANSWERED	29	425	5	6	13	5								3	1	2	1	29	
VALID CASES	262	5213	54	55	79	74	108							79	179	244	13	201	61
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%							82 100%	180 100%	246 100%	14 100%	230 100%	61 100%

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

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	HIS- IC	NOT VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q56 NEVER		36 2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	12 11%	176 9%	2 8%	1 4%	4 12%	5 17%	4 9%	~	~	~	~	~	3 9%	8 11%	10 10%	2 20%	3 5%	9 19%
USUALLY	22 20%	474 24%	5 19%	4 17%	7 21%	6 21%	11 23%	~	~	~	~	~	2 6%	19 25%	20 20%	2 20%	12 19%	10 21%
ALWAYS	77 69%	1301 65%	19 73%	18 78%	22 67%	18 62%	32 68%	~	~	~	~	~	27 84%	48 64%	69 70%	6 60%	48 76%	29 60%
#ALWAYS + USUALLY (NET)	99 89%	1775 89%	24 92%	22 96%	29 88%	24 83%	43 91%	~	~	~	~	~	29 91%	67 89%	89 90%	8 80%	60 95%	39 81%
TOP BOX SCORE	77 69%	1301 65%	19 73%	18 78%	22 67%	18 62%	32 68%	~	~	~	~	~	27 84%	48 64%	69 70%	6 60%	48 76%	29 60%
NOT ANSWERED		29																
VALID CASES	111	1988	26	23	33	29	47						32	75	99	10	63	48
NUMBER OF RESPONDENTS	111	2017	26	23	33	29	47						32	75	99	10	63	48
	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?

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	MUL- TI ##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q57 #YES	58 53%	1177 60%	11 42%~	16 73%~	15 45%~	16 55%~	26 55%~	~	~	~	~	~	~	17 53%~	38 51%~	50 51%~	7 70%~	32 52%~	26 54%~
NO	52 47%	795 40%	15 58%~	6 27%~	18 55%~	13 45%~	21 45%~	~	~	~	~	~	~	15 47%~	37 49%~	49 49%~	3 30%~	30 48%~	22 46%~
NOT ANSWERED	1	45		1															1
VALID CASES	110	1972	26	22	33	29	47							32	75	99	10	62	48
NUMBER OF RESPONDENTS	111	2017	26	23	33	29	47							32	75	99	10	63	48
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

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

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	MUL- OTHR ##	TI ##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q57A YES	209 82%	4014 79%	31 58%*	49 91%*	74 95%*	55 80%	85 83%	~	~	~	~	~	~	65 83%	144 83%	195 82%~	11 92%~	155 80%*	54 90%*
NO	45 18%	1085 21%	22 42%*	5 9%*	4 5%*	14 20%	18 17%	~	~	~	~	~	~	13 17%	29 17%	43 18%~	1 8%~	39 20%*	6 10%*
NOT ANSWERED	37	539	6	7	14	10	5							4	7	8	2	36	1
VALID CASES	254	5099	53	54	78	69	103							78	173	238	12	194	60
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%							82 100%	180 100%	246 100%	14 100%	230 100%	61 100%



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?

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	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	
Q57B NEVER	40 34%	667 28%	7 37%~	6 24%~	15 43%~	12 32%~	11 44%~	~	~	~	~	~	~	13 36%~	27 35%~	36 33%~	3 50%~	32 36%~	8 30%~
SOMETIMES	25 21%	484 20%	5 26%~	6 24%~	4 11%~	10 26%~	6 24%~	~	~	~	~	~	~	11 31%~	14 18%~	25 23%~	~	19 21%~	6 22%~
USUALLY	21 18%	468 20%	1 5%~	4 16%~	7 20%~	9 24%~	5 20%~	~	~	~	~	~	~	1 3%~	19 24%~	19 18%~	1 17%~	16 18%~	5 19%~
ALWAYS	31 26%	771 32%	6 32%~	9 36%~	9 26%~	7 18%~	3 12%~	~	~	~	~	~	~	11 31%~	18 23%~	28 26%~	2 33%~	23 26%~	8 30%~
#ALWAYS + USUALLY (NET)	52 44%	1239 52%	7 37%~	13 52%~	16 46%~	16 42%~	8 32%~	~	~	~	~	~	~	12 33%~	37 47%~	47 44%~	3 50%~	39 43%~	13 48%~
TOP BOX SCORE	31 26%	771 32%	6 32%~	9 36%~	9 26%~	7 18%~	3 12%~	~	~	~	~	~	~	11 31%~	18 23%~	28 26%~	2 33%~	23 26%~	8 30%~
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	143	2768	33	30	46	34	82							44	99	133	8	109	34
NOT ANSWERED	31	480	7	6	11	7	1							2	3	5		31	
VALID CASES	117	2390	19	25	35	38	25							36	78	108	6	90	27
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%							82 100%	180 100%	246 100%	14 100%	230 100%	61 100%

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?

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI ##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q57C YES	43 17%	1124 22%*	9 17%	11 20%	12 15%	11 15%	12 11%*	~	~	~	~	~	~	17 22%	26 15%	36 15%~	7 50%~	26 13%*	17 28%*
NO	214 83%	3960 78%*	44 83%	43 80%	67 85%	60 85%	94 89%*	~	~	~	~	~	~	62 78%	150 85%	204 85%~	7 50%~	171 87%*	43 72%*
NOT ANSWERED	34	553	6	7	13	8	2							3	4	6		33	1
VALID CASES	257	5085	53	54	79	71	106							79	176	240	14	197	60
NUMBER OF RESPONDENTS	291	5638	59	61	92	79	108							82	180	246	14	230	61
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	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	
Q57D #YES	38 88%	945 87%	8 89%	9 82%	10 83%	11 100%	11 92%	~	~	~	~	~	~	14 82%	24 92%	32 89%	6 86%	23 88%	15 88%
NO	5 12%	135 13%	1 11%	2 18%	2 17%	~	1 8%	~	~	~	~	~	~	3 18%	2 8%	4 11%	1 14%	3 12%	2 12%
NOT ANSWERED		16																	
VALID CASES	43	1081	9	11	12	11	12							17	26	36	7	26	17
NUMBER OF RESPONDENTS	43	1097	9	11	12	11	12							17	26	36	7	26	17
	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?

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	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	
Q57E #YES	36 84%	905 84%~	7 78%~	7 64%~	12 100%~	10 91%~	10 83%~	~	~	~	~	~	~	15 88%~	21 81%~	30 83%~	6 86%~	23 88%~	13 76%~
NO	7 16%	169 16%~	2 22%~	4 36%~	~	1 9%~	2 17%~	~	~	~	~	~	~	2 12%~	5 19%~	6 17%~	1 14%~	3 12%~	4 24%~
NOT ANSWERED		24																	
VALID CASES	43	1073	9	11	12	11	12							17	26	36	7	26	17
NUMBER OF RESPONDENTS	43 100%	1097 100%	9 100%	11 100%	12 100%	11 100%	12 100%							17 100%	26 100%	36 100%	7 100%	26 100%	17 100%

[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?

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	MUL- OTHR ##	TI ##	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q57F NEVER	1 2%	20 2%	1 ~	9% ~	1 ~	13 AND OVER ~	~	~	~	~	~	~	~	~	1 6%~	1 3%~	1 4%~	1 ~		
SOMETIMES	2 5%	94 9%~	1 11%~	1 ~	8% ~	~	~	~	~	~	~	~	~	~	2 12%~	1 3%~	1 14%~	1 4%~	1 6%~	
USUALLY	10 24%	257 24%~	2 22%~	2 18%~	1 8%~	5 50%~	2 18%~	~	~	~	~	~	~	~	5 29%~	5 20%~	6 17%~	4 57%~	5 19%~	5 31%~
ALWAYS	29 69%	704 66%~	6 67%~	8 73%~	10 83%~	5 50%~	9 82%~	~	~	~	~	~	~	~	9 53%~	20 80%~	27 77%~	2 29%~	19 73%~	10 63%~
#ALWAYS + USUALLY (NET)	39 93%	960 89%~	8 89%~	10 91%~	11 92%~	10 100%~	11 100%~	~	~	~	~	~	~	~	14 82%~	25 100%~	33 94%~	6 86%~	24 92%~	15 94%~
TOP BOX SCORE	29 69%	704 66%~	6 67%~	8 73%~	10 83%~	5 50%~	9 82%~	~	~	~	~	~	~	~	9 53%~	20 80%~	27 77%~	2 29%~	19 73%~	10 63%~
NOT ANSWERED	1	23				1	1								1	1				1
VALID CASES	42	1074	9	11	12	10	11								17	25	35	7	26	16
NUMBER OF RESPONDENTS	43	1097	9	11	12	11	12								17	26	36	7	26	17
	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?

	PSCS TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
		OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q57G NEVER	3 7%	53 5%	2 22%	1 9%	~	1 8%	~	~	~	~	~	2 12%	1 4%	3 8%	~	3 12%	~	
SOMETIMES	4 9%	120 11%	1 11%	1 9%	2 18%	2 17%	~	~	~	~	~	2 12%	2 8%	2 6%	2 29%	1 4%	3 18%	
USUALLY	8 19%	238 22%	1 11%	2 18%	4 33%	1 9%	1 8%	~	~	~	~	3 18%	5 19%	7 19%	1 14%	4 15%	4 24%	
ALWAYS	28 65%	662 62%	5 56%	7 64%	8 67%	8 67%	~	~	~	~	~	10 59%	18 69%	24 67%	4 57%	18 69%	10 59%	
#ALWAYS + USUALLY (NET)	36 84%	901 84%	6 67%	9 82%	12 100%	9 82%	~	~	~	~	~	13 76%	23 88%	31 86%	5 71%	22 85%	14 82%	
TOP BOX SCORE	28 65%	662 62%	5 56%	7 64%	8 67%	8 67%	~	~	~	~	~	10 59%	18 69%	24 67%	4 57%	18 69%	10 59%	
NOT ANSWERED		23																
VALID CASES	43	1074	9	11	12	11	12					17	26	36	7	26	17	
NUMBER OF RESPONDENTS	43	1097	9	11	12	11	12					17	26	36	7	26	17	
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	

[ASKED IF Q57C = YES]

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

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	OTH- R	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q57H NEVER	1 2%	23 2%	~	9%~	~	~	~	~	~	~	~	~	~	6%~	~	3%~	~	4%~	~
SOMETIMES	5 12%	97 9%	11%~	9%~	8%~	18%~	8%~	~	~	~	~	~	~	18%~	8%~	6%~	43%~	8%~	18%~
USUALLY	9 21%	214 20%	11%~	18%~	25%~	27%~	17%~	~	~	~	~	~	~	24%~	19%~	22%~	14%~	19%~	24%~
ALWAYS	28 65%	741 69%	78%~	64%~	67%~	55%~	75%~	~	~	~	~	~	~	53%~	73%~	69%~	43%~	69%~	59%~
#ALWAYS + USUALLY (NET)	37 86%	955 89%	89%~	82%~	92%~	82%~	92%~	~	~	~	~	~	~	76%~	92%~	92%~	57%~	88%~	82%~
TOP BOX SCORE	28 65%	741 69%	78%~	64%~	67%~	55%~	75%~	~	~	~	~	~	~	53%~	73%~	69%~	43%~	69%~	59%~
NOT ANSWERED		23																	
VALID CASES	43	1074	9	11	12	11	12							17	26	36	7	26	17
NUMBER OF RESPONDENTS	43	1097	9	11	12	11	12							17	26	36	7	26	17
	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	
	PSCS TOT CHLD	OHP TOT CHLD	<4	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 & POOR	FAIR & POOR	NO CCC	CCC
							WHITE											
Q58																		
EXCELLENT	119 46%	2143 41%	32 60%*	27 49%	36 45%	24 33%*	50 47%	~	~	~	~	~	29 36%*	90 51%*	119 48%~	~	102 51%*	17 28%*
VERY GOOD	87 33%	1856 36%	15 28%	23 42%	22 28%	27 38%	40 38%	~	~	~	~	~	26 33%	60 34%	87 35%~	~	68 34%	19 31%
GOOD	40 15%	944 18%	5 9%	3 5%*	16 20%	16 22%	13 12%	~	~	~	~	~	17 21%	22 12%	40 16%~	~	24 12%*	16 26%*
FAIR	13 5%	237 5%	1 2%	1 2%	6 8%	5 7%	3 3%	~	~	~	~	~	7 9%	6 3%	~	13 93%~	5 3%*	8 13%*
POOR	1 0.4%	15 0.3%	~	1 2%	~	~	~	~	~	~	~	~	1 1%	~	1 7%~	~	~	1 2%
#EXCELLENT + VERY GOOD + GOOD (NET)	246 95%	4943 95%	52 98%	53 96%	74 93%	67 93%	103 97%	~	~	~	~	~	72 90%	172 97%	246 100%~	~	194 97%*	52 85%*
NOT ANSWERED	31	443	6	6	12	7	2						2	2			31	
VALID CASES	260	5195	53	55	80	72	106						80	178	246	14	199	61
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%						82 100%	180 100%	246 100%	14 100%	230 100%	61 100%



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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	MUL-OTHR ##	MUL-TI ##	HIS-PAN-IC	HIS-PAN-IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC
Q59																		
EXCELLENT	129 49%	2231 43%*	37 69%*	29 53%	34 43%	29 40%	48 45%	~	~	~	~	~	43 53%	84 47%	125 51%~	2 14%~	117 58%*	12 20%*
VERY GOOD	67 26%	1483 29%	14 26%	15 27%	23 29%	15 21%	28 26%	~	~	~	~	~	17 21%	50 28%	64 26%~	3 21%~	54 27%	13 21%
GOOD	45 17%	1030 20%	3 6%*	7 13%	18 23%	17 23%	20 19%	~	~	~	~	~	16 20%	29 16%	43 17%~	2 14%~	26 13%*	19 31%*
FAIR	15 6%	368 7%	~	4 7%	5 6%	6 8%	6 6%	~	~	~	~	~	5 6%	10 6%	10 4%~	5 36%~	3 1%*	12 20%*
POOR	6 2%	70 1%	~	~	~	6 8%*	5 5%	~	~	~	~	~	~	6 3%*	4 2%~	2 14%~	1 0.5%*	5 8%*
#EXCELLENT + VERY GOOD + GOOD (NET)	241 92%	4745 92%	54 100%~	51 93%	75 94%	61 84%*	96 90%	~	~	~	~	~	76 94%	163 91%	232 94%~	7 50%~	197 98%*	44 72%*
NOT ANSWERED	29	455	5	6	12	6	1						1	1				29
VALID CASES	262	5183	54	55	80	73	107						81	179	246	14	201	61
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%						82 100%	180 100%	246 100%	14 100%	230 100%	61 100%

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

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ PAC	ALSK	MUL- TI	HIS- PAN- IC	NOT PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q60 YES	49 19%	1055 20%	9 17%	11 20%	15 19%	14 19%	18 17%	~	~	~	~	~	~	12 ~ 15%	37 21%	41 17%	8 57%	11 5%*	38 62%*
NO	215 81%	4144 80%	45 83%	45 80%	66 81%	59 81%	89 83%	~	~	~	~	~	~	70 ~ 85%	143 79%	205 83%	6 43%	192 95%*	23 38%*
NOT ANSWERED	27	439	5	5	11	6	1												27
VALID CASES	264	5199	54	56	81	73	107							82	180	246	14	203	61
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%							82 100%	180 100%	246 100%	14 100%	230 100%	61 100%

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

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
Q61 YES	39 81%	796 77%	5 56%	9 90%	13 87%	12 86%	15 88%	~	~	~	~	~	~	10 83%	29 81%	31 78%	8 100%	3 30%	36 95%
NO	9 19%	235 23%	4 44%	1 10%	2 13%	2 14%	2 12%	~	~	~	~	~	~	2 17%	7 19%	9 23%	~	7 70%	2 5%
NOT ANSWERED	1	22		1		1									1	1		1	
VALID CASES	48	1030	9	10	15	14	17							12	36	40	8	10	38
NUMBER OF RESPONDENTS	49	1052	9	11	15	14	18							12	37	41	8	11	38
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q60 = YES]

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

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND #	AMER IND/PAC ALSK ##	MUL-OTHR TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
Q62 YES	36 92%	716 91%	4 80%	9 100%	11 85%	12 100%	14 93%	~	~	~	~	~	~	10 ~100%	26 90%	28 90%	8 100%	36 ~100%	
NO	3 8%	75 9%	1 20%	~	2 15%	~	1 7%	~	~	~	~	~	~	~	3 10%	3 10%	~	3 ~100%	
NOT ANSWERED		15																	
VALID CASES	39	791	5	9	13	12	15							10	29	31	8	3	36
NUMBER OF RESPONDENTS	39 100%	806 100%	5 100%	9 100%	13 100%	12 100%	15 100%							10 100%	29 100%	31 100%	8 100%	3 100%	36 100%

[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?

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	MUL- OTHR #	TI #	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q63 YES	40 15%	788 15%	3 6%*	10 18%	12 15%	15 15%	~	~	~	~	~	~	12 15%	28 16%	31 13%~	9 64%~	3 1%*	37 62%*
NO	223 85%	4394 85%	51 94%*	46 82%	68 85%	58 79%	91 85%	~	~	~	~	~	70 85%	151 84%	214 87%~	5 36%~	200 99%*	23 38%*
NOT ANSWERED	28	456	5	5	12	6	1							1	1		27	1
VALID CASES	263	5182	54	56	80	73	107						82	179	245	14	203	60
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%						82 100%	180 100%	246 100%	14 100%	230 100%	61 100%

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

	PSCS TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
		OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q64 YES	37 95%	637 85%	3 100%	9 90%	12 100%	13 93%	13 87%	~	~	~	~	~	12 100%	25 93%	28 93%	9 100%	2 67%	35 97%
NO	2 5%	110 15%	~	1 10%	1 7%	2 13%	~	~	~	~	~	~	2 7%	2 7%	~	1 33%	1 3%	
NOT ANSWERED	1	19			1	1							1	1			1	
VALID CASES	39	747	3	10	12	14	15						12	27	30	9	3	36
NUMBER OF RESPONDENTS	40	766	3	10	12	15	16						12	28	31	9	3	37
	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?

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q65 YES	34 94%	591 96%	3 100%	8 89%	10 91%	13 100%	12 100%	~	~	~	~	~	~	10 83%	24 100%	26 96%	8 89%	34 100%	
NO	2 6%	26 4%	~	1 11%	1 9%	~	~	~	~	~	~	~	~	2 17%	~	1 4%	1 11%	2 100%	
NOT ANSWERED	1	7			1	1									1	1		1	
VALID CASES	36	617	3	9	11	13	12							12	24	27	9	2	34
NUMBER OF RESPONDENTS	37	624	3	9	12	13	13							12	25	28	9	2	35
	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	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ NATV ##	MUL-OTHR TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q66 YES	33 13%	639 12%	4 7%	8 14%	9 11%	12 16%	10 9%	~	~	~	~	~	10 13%	23 13%	25 10%~	8 62%~	3 1%*	30 49%*
NO	229 87%	4546 88%	50 93%	48 86%	70 89%	61 84%	97 91%	~	~	~	~	~	70 87%	157 87%	220 90%~	5 38%~	198 99%*	31 51%*
NOT ANSWERED	29	453	5	5	13	6	1						2		1	1	29	
VALID CASES	262	5185	54	56	79	73	107						80	180	245	13	201	61
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%						82 100%	180 100%	246 100%	14 100%	230 100%	61 100%



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

	PSCS TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
		OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q67 YES	30 91%	445 77%	3 75%	7 88%	8 89%	12 100%	10 100%	~	~	~	~	~	9 90%	21 91%	22 88%	8 100%	30 100%	
NO	3 9%	136 23%	1 25%	1 13%	1 11%	~	~	~	~	~	~	~	1 10%	2 9%	3 12%	3 100%	~	
NOT ANSWERED		22																
VALID CASES	33	582	4	8	9	12	10						10	23	25	8	3	30
NUMBER OF RESPONDENTS	33 100%	604 100%	4 100%	8 100%	9 100%	12 100%	10 100%						10 100%	23 100%	25 100%	8 100%	3 100%	30 100%

[ASKED IF Q66 = YES]

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

	PSCS TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
		OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q68 YES	30 100%	427 96%	3 100%	7 100%	8 100%	12 100%	10 100%	~	~	~	~	~	9 100%	21 100%	22 100%	8 100%	30 100%	
NO		17 4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NOT ANSWERED		6																
VALID CASES	30	444	3	7	8	12	10						9	21	22	8	30	
NUMBER OF RESPONDENTS	30 100%	450 100%	3 100%	7 100%	8 100%	12 100%	10 100%						9 100%	21 100%	22 100%	8 100%	30 100%	

[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	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q69 YES	22 8%	531 10%	2 4%	6 11%	8 10%	6 8%	8 7%	~	~	~	~	~	8 10%	14 8%	17 7%	5 36%	7 3%*	15 25%*
NO	242 92%	4648 90%	52 96%	50 89%	73 90%	67 92%	99 93%	~	~	~	~	~	74 90%	166 92%	229 93%	9 64%	196 97%*	46 75%*
NOT ANSWERED	27	459	5	5	11	6	1											27
VALID CASES	264	5179	54	56	81	73	107						82	180	246	14	203	61
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%						82 100%	180 100%	246 100%	14 100%	230 100%	61 100%

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

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q70 YES	15 68%	336 68%	~	4 67%	6 75%	5 83%	6 75%	~	~	~	~	~	~	6 75%	9 64%	10 59%	5 100%	15 ~100%	
NO	7 32%	157 32%	~100%	2 33%	2 25%	1 17%	2 25%	~	~	~	~	~	~	2 25%	5 36%	7 41%	~	7 ~100%	
NOT ANSWERED		8																	
VALID CASES	22	493	2	6	8	6	8							8	14	17	5	7	15
NUMBER OF RESPONDENTS	22	501	2	6	8	6	8							8	14	17	5	7	15
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q69 = YES]

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

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND #	AMER IND/ALSK #	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
Q71 YES	15	293	4	6	5	6	~	~	~	~	~	6	9	10	5	15	15	
	100%	92%~	~100%	~100%	~100%	~100%	~	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%	
NO		24	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
		8%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NOT ANSWERED		3																
VALID CASES	15	317	4	6	5	6						6	9	10	5	15	15	
NUMBER OF RESPONDENTS	15	320	4	6	5	6						6	9	10	5	15	15	
	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	

[ASKED IF Q69 = YES AND Q70 = YES]

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

	AGE					RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALS #	MUL- OTHR #	TI #	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q72 YES	30 11%	736 14%	1 2%*	5 9%	9 11%	15 21%*	17 16%	~	~	~	~	~	~	5 6%*	25 14%*	27 11%~	3 21%~	30 ~ 50%~	
NO	232 89%	4444 86%	53 98%*	51 91%	71 89%	57 79%*	90 84%	~	~	~	~	~	~	77 94%*	153 86%*	217 89%~	11 79%~	202 ~100%~	30 50%*
NOT ANSWERED	29	458	5	5	12	7	1							2	2			28	1
VALID CASES	262	5180	54	56	80	72	107							82	178	244	14	202	60
NUMBER OF RESPONDENTS	291	5638	59	61	92	79	108							82	180	246	14	230	61
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

	PSCS TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
		OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q73 YES	29 100%	628 90%	1 100%	4 100%	9 100%	15 100%	17 100%	~	~	~	~	~	~	~	~	~	~	29 100%
NO		72 10%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	1	16		1									1	1				1
VALID CASES	29	700	1	4	9	15	17						5	24	26	3		29
NUMBER OF RESPONDENTS	30 100%	716 100%	1 100%	5 100%	9 100%	15 100%	17 100%						5 100%	25 100%	27 100%	3 100%		30 100%

[ASKED IF Q72 = YES]

NQ74 WHAT IS YOUR CHILD'S AGE?

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND #	AMER IND/ALSK #	MUL-TI OTHR ##	HIS-PAN-IC	NOT-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
NQ74																		
3 YEARS OLD OR LESS	59 20%	971 17%	59 100%	~	~	~	23 21%	~	~	~	~	~	15 18%	38 21%	52 21%	1 7%	54 23%*	5 8%*
4 TO 7 YEARS OLD	61 21%	1380 24%	~	61 ~100%	~	~	21 19%	~	~	~	~	~	19 23%	37 21%	53 22%	2 14%	45 20%	16 26%
8 TO 12 YEARS OLD	92 32%	1689 30%	~	~	92 ~100%	~	29 27%	~	~	~	~	~	28 34%	53 29%	74 30%	6 43%	75 33%	17 28%
13 OR OLDER	79 27%	1597 28%	~	~	79 ~100%	~	35 32%	~	~	~	~	~	20 24%	52 29%	67 27%	5 36%	56 24%	23 38%
VALID CASES	291	5638	59	61	92	79	108						82	180	246	14	230	61
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%						82 100%	180 100%	246 100%	14 100%	230 100%	61 100%

[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	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AMER	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
NQ75 MALE	144 49%	2948 52%	32 54%	29 48%	42 46%	41 52%	52 48%	~	~	~	~	~	40 49%	91 51%	123 50%	7 50%	109 47%	35 57%
FEMALE	147 51%	2690 48%	27 46%	32 52%	50 54%	38 48%	56 52%	~	~	~	~	~	42 51%	89 49%	123 50%	7 50%	121 53%	26 43%
VALID CASES	291	5638	59	61	92	79	108						82	180	246	14	230	61
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%						82 100%	180 100%	246 100%	14 100%	230 100%	61 100%

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

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

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ PAC	ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
Q76 HISPANIC OR LATINO	82 31%	2037 40%*	15 28%	19 34%	28 35%	20 28%	~	~	~	~	~	~	~	~	82 ~100%	180 ~100%	72 30%	8 57%	67 33%	15 25%
NOT HISPANIC OR LATINO	180 69%	3094 60%*	38 72%	37 66%	53 65%	52 72%	107 100%	~	~	~	~	~	~	~	180 ~100%	180 ~100%	172 70%	6 43%	134 67%	46 75%
NOT ANSWERED	29	507	6	5	11	7	1										2		29	
VALID CASES	262	5131	53	56	81	72	107								82	180	244	14	201	61
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%								82 100%	180 100%	246 100%	14 100%	230 100%	61 100%

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

		AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER ALSK ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR		NO CCC	CCC		
Q77.1																		
YES	PSCS TOT CHLD	152	32	35	41	44	108	~	~	~	~	~	36	115	143	7	114	38
	OHP TOT CHLD	2548	54%	57%	45%	56%	100%	~	~	~	~	~	44%	64%*	58%~	50%~	50%	62%
NO		139	27	26	51	35	~	~	~	~	~	~	46	65	103	7	116	23
	OHP TOT CHLD	3090	46%	43%	55%	44%	~	~	~	~	~	~	56%	36%*	42%~	50%~	50%	38%
VALID CASES		291	59	61	92	79	108						82	180	246	14	230	61
NUMBER OF RESPONDENTS		291	59	61	92	79	108						82	180	246	14	230	61
		100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER IND/ALS PAC #	MUL-TI OTHR ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q77.2 YES	5 2%	139 2%	1 2%	3 5%	1 1%	~	~	~	~	~	~	~	1 1%	4 2%	5 2%	~	5 2%*	~
NO	286 98%	5499 98%	58 98%	58 95%	91 99%	79 100%	108 100%	~	~	~	~	~	81 99%	176 98%	241 98%	14 100%	225 98%*	61 100%
VALID CASES	291	5638	59	61	92	79	108						82	180	246	14	230	61
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%						82 100%	180 100%	246 100%	14 100%	230 100%	61 100%

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

		AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
		<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER ALSK ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
Q77.3	PSCS TOT CHLD																
YES	2 0.7%	186 3%*	~	~	1 1%	~	~	~	~	~	~	2 1%	2 0.8%~	~	2 ~	~	
NO	289 99%	5452 97%*	59 100%~	61 100%~	91 99%	78 99%	108 100%~	~	~	~	~	82 ~100%~	178 99%~	244 99%~	14 100%~	228 99%~	61 100%~
VALID CASES	291	5638	59	61	92	79	108					82	180	246	14	230	61
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%					82 100%	180 100%	246 100%	14 100%	230 100%	61 100%

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

		AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
		<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER ALSK ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR		NO CCC	CCC		
Q77.4	PSCS TOT CHLD																	
YES	1 0.3%	61 1%*	~	1 2%~	~	~	~	~	~	~	~	1 ~0.6%	1 0.4%~	~	1 ~2%~			
NO	290 100%	5577 99%*	59 100%~	60 98%~	92 100%~	79 100%~	108 100%~	~	~	~	~	82 ~100%~	179 99%~	245 100%~	14 100%~	230 100%~	60 98%~	
VALID CASES	291	5638	59	61	92	79	108					82	180	246	14	230	61	
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%					82 100%	180 100%	246 100%	14 100%	230 100%	61 100%	

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

		AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
		<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER ALSK ##	MUL-OTHR ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC	
Q77.5	PSCS TOT CHLD	OHP TOT CHLD																
YES	3 1%	168 3%*	~	2%	1%	1%	~	~	~	~	~	~	3 2%	3 1%~	~	2 0.9%	1 2%	
NO	288 99%	5470 97%*	100%~	98%~	99%~	108 100%~	~	~	~	~	~	82 ~100%~	177 98%	243 99%~	14 100%~	228 99%	60 98%	
VALID CASES	291	5638	59	61	92	79	108					82	180	246	14	230	61	
NUMBER OF RESPONDENTS	291 100%	5638 100%	100%	100%	100%	100%	108					82 100%	180 100%	246 100%	14 100%	230 100%	61 100%	

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

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND #	AMER IND/ALSK ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	NO CCC	CCC	
Q77.6 YES	15 5%	486 9%*	4 7%	6 10%	3 3%	2 3%	~	~	~	~	~	~	12 15%*	3 2%*	14 6%~	1 7%~	13 6%	2 3%
NO	276 95%	5152 91%*	55 93%	55 90%	89 97%	77 97%	108 100%~	~	~	~	~	~	70 85%*	177 98%*	232 94%~	13 93%~	217 94%	59 97%
VALID CASES	291	5638	59	61	92	79	108						82	180	246	14	230	61
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%						82 100%	180 100%	246 100%	14 100%	230 100%	61 100%



Q78 WHAT IS YOUR AGE?

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	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 & POOR	NO CCC	CCC		
			%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	
Q78 UNDER 18	15 6%	196 4%	4 8%	2 4%	4 5%	5 7%	9 8%	~	~	~	~	~	~	6 7%	9 5%	15 6%	~	12 6%	3 5%
18 TO 24	10 4%	176 3%	6 11%*	3 5%	~	1 1%	2 2%	~	~	~	~	~	~	3 4%	7 4%	10 4%	~	8 4%	2 3%
25 TO 34	78 30%	1691 33%	24 45%*	23 42%*	27 33%	4 5%*	23 21%*	~	~	~	~	~	~	25 31%	53 30%	72 30%	4 29%	65 32%	13 21%
35 TO 44	101 38%	2049 40%	16 30%	22 40%	27 33%	36 49%*	44 41%	~	~	~	~	~	~	35 43%	65 36%	93 38%	6 43%	76 38%	25 41%
45 TO 54	45 17%	738 14%	2 4%*	4 7%*	19 23%	20 27%*	20 19%	~	~	~	~	~	~	11 14%	33 18%	42 17%	3 21%	33 16%	12 20%
55 TO 64	7 3%	229 4%	1 2%	1 2%	3 4%	2 3%	3 3%	~	~	~	~	~	~	1 1%	6 3%	7 3%	~	4 2%	3 5%
65 TO 74	5 2%	87 2%	~	~	1 1%	4 5%	5 5%*	~	~	~	~	~	~	~	5 3%*	4 2%	1 7%	3 1%	2 3%
75 OR OLDER	2 0.8%	15 0.3%	~	~	~	2 3%	2 2%~	~	~	~	~	~	~	~	1 0.6%	1 0.4%	~	1 0.5%	1 2%
NOT ANSWERED	28	457	6	6	11	5								1	1	2		28	
VALID CASES	263	5181	53	55	81	74	108							81	179	244	14	202	61
NUMBER OF RESPONDENTS	291	5638	59	61	92	79	108							82	180	246	14	230	61
	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	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND #	AMER IND/ALSK ##	MUL-TI OTHR ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q79																		
MALE	33 13%	711 14%	8 15%	6 11%	8 10%	11 15%	13 12%	~	~	~	~	~	7 9%	24 13%	32 13%	1 8%	27 13%	6 10%
FEMALE	230 87%	4484 86%	45 85%	50 89%	72 90%	63 85%	95 88%	~	~	~	~	~	74 91%	155 87%	213 87%	12 92%	175 87%	55 90%
NOT ANSWERED	28	443	6	5	12	5							1	1	1	1	28	
VALID CASES	263	5195	53	56	80	74	108						81	179	245	13	202	61
NUMBER OF RESPONDENTS	291 100%	5638 100%	59 100%	61 100%	92 100%	79 100%	108 100%						82 100%	180 100%	246 100%	14 100%	230 100%	61 100%

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	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 & POOR	FAIR & POOR	NO CCC	CCC	
Q80																		
8TH GRADE OR LESS	19 7%	593 12%*	4 8%	2 4%	8 10%	5 7%	~	~	~	~	~	~	19 23%*	~	17 7%~	2 15%~	17 8%	2 3%
SOME HIGH SCHOOL BUT DID NOT GRADUATE	20 8%	565 11%*	1 2%*	1 2%*	8 10%	10 14%	7 6%	~	~	~	~	~	6 7%	14 8%	18 7%~	1 8%~	16 8%	4 7%
HIGH SCHOOL GRADUATE OR GED	72 27%	1483 29%	12 23%	19 34%	24 30%	17 23%	19 18%*	~	~	~	~	~	29 36%	42 23%*	66 27%~	5 38%~	58 29%	14 23%
SOME COLLEGE OR 2-YEAR DEGREE	107 41%	1722 33%*	27 51%	22 39%	28 35%	30 41%	49 45%	~	~	~	~	~	23 28%*	83 46%*	101 41%~	4 31%~	79 39%	28 46%
4-YEAR COLLEGE GRADUATE	25 10%	491 10%	5 9%	6 11%	9 11%	5 7%	16 15%*	~	~	~	~	~	4 5%	21 12%*	24 10%~	1 8%~	19 9%	6 10%
MORE THAN 4-YEAR COLLEGE DEGREE	20 8%	290 6%	4 8%	6 11%	4 5%	6 8%	17 16%*	~	~	~	~	~	19 ~	19 11%*	19 8%~	~	13 6%	7 11%
NOT ANSWERED	28	495	6	5	11	6							1	1	1	1	28	
VALID CASES	263	5143	53	56	81	73	108						81	179	245	13	202	61
NUMBER OF RESPONDENTS	291	5638	59	61	92	79	108						82	180	246	14	230	61
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

Q81 HOW ARE YOU RELATED TO THE CHILD?

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
Q81																			
MOTHER OR FATHER	250 95%	4883 95%	51 98%	56 100%	78 96%	65 88%*	96 90%*	~	~	~	~	~	~	80 98%	168 94%	233 95%	13 93%	194 96%	56 93%
GRANDPARENT	7 3%	145 3%	~	~	2 2%	5 7%	6 6%*	~	~	~	~	~	~	1 1%	5 3%	5 2%	1 7%	4 2%	3 5%
AUNT OR UNCLE		13 0.2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
OLDER BROTHER OR SISTER	1 0.4%	12 0.2%	~	~	~	1 1%	~	~	~	~	~	~	~	1 1%	~	1 0.4%	~	1 0.5%	~
OTHER RELATIVE		4 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
LEGAL GUARDIAN	4 2%	51 1%	1 2%	~	1 1%	2 3%	4 4%*	~	~	~	~	~	~	~	4 2%	4 2%	~	4 2%*	~
SOMEONE ELSE	1 0.4%	36 0.7%	~	~	~	1 1%	0.9%	~	~	~	~	~	~	~	1 0.6%	1 0.4%	~	~	1 2%
NOT ANSWERED	28	494	7	5	11	5	1							2	2			27	1
VALID CASES	263	5144	52	56	81	74	107							82	178	244	14	203	60
NUMBER OF RESPONDENTS	291	5638	59	61	92	79	108							82	180	246	14	230	61
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND #	AMER IND/PAC ALSK ##	MUL-TI OTHR ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q82 YES	4 2%	143 4%	1 3%~	~	~	3 6%	~	~	~	~	~	~	3 6%	1 0.9%	4 3%~	~	4 3%~	~
NO	167 98%	3143 96%	33 97%~	36 100%~	51 100%~	47 94%	108 100%~	~	~	~	~	~	48 94%	116 99%	153 97%~	10 100%~	131 97%~	36 100%~
NOT ANSWERED	1	43		1										1			1	
VALID CASES	171	3286	34	36	51	50	108						51	117	157	10	135	36
NUMBER OF RESPONDENTS	172 100%	3329 100%	34 100%	37 100%	51 100%	50 100%	108 100%						51 100%	118 100%	157 100%	10 100%	136 100%	36 100%

[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	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND #	AMER ALSK ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q83.1 YES	1 25%	56 41%	~	~	~	33%	~	~	~	~	~	~	1 ~100%	1 25%	~	1 25%	~	
NO	3 75%	79 59%	1 100%	~	~	67%	~	~	~	~	~	3 ~100%	3 75%	~	3 75%	~	~	
VALID CASES	4	135	1			3						3	1	4		4		
NUMBER OF RESPONDENTS	4 100%	135 100%	1 100%			3 100%						3 100%	1 100%	4 100%		4 100%		

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

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

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q83.2 YES	1 25%	44 32%	~	~	~	1 33%	~	~	~	~	~	~	~	~	1 100%	1 25%	1 25%	~
NO	3 75%	91 68%	1 100%	~	~	2 67%	~	~	~	~	~	~	~	~	3 100%	3 75%	3 75%	~
VALID CASES	4	135	1			3									3	1	4	4
NUMBER OF RESPONDENTS	4 100%	135 100%	1 100%			3 100%									3 100%	1 100%	4 100%	4 100%

[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	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND #	AMER IND/ALSK ##	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q83.3 YES	1 25%	11 8%~100%	1	~	~	~	~	~	~	~	~	~	1 33%	1 25%	1 25%	~		
NO	3 75%	124 92%	~	~	~100%	~	~	~	~	~	~	~	2 67%	1 100%	3 75%	3 75%	~	
VALID CASES	4	135	1			3							3	1	4	4		
NUMBER OF RESPONDENTS	4 100%	135 100%	1 100%			3 100%							3 100%	1 100%	4 100%	4 100%		

[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	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND #	AMER IND/ALSK #	MUL-TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
Q83.4 YES	1 25%	76 56%	~	~	~	33%	~	~	~	~	~	~	33%	~	25%	~	25%	~
NO	3 75%	59 44%	100%	~	~	67%	~	~	~	~	~	~	67%	100%	75%	~	75%	~
VALID CASES	4	135	1			3							3	1	4		4	
NUMBER OF RESPONDENTS	4 100%	135 100%	1 100%			3 100%							3 100%	1 100%	4 100%		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	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	NO CCC	CCC
							#	##	#	##	##	##	IC	IC				
Q83.5 YES	1 25%	7 5%	~	~	~	33%	~	~	~	~	~	~	33%	~	25%	~	25%	~
NO	3 75%	128 95%	1 100%	~	~	67%	~	~	~	~	~	~	67%	100%	75%	~	75%	~
VALID CASES	4	135	1			3							3	1	4		4	
NUMBER OF RESPONDENTS	4	135	1			3							3	1	4		4	
	100%	100%	100%			100%							100%	100%	100%		100%	

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

NQ14 RATING OF ALL CHILD'S HEALTH CARE

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR 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		
NQ14 0-6	23 12%	307 8%	4 9%	4 10%	8 14%	7 15%	7 10%	~	~	~	~	~	8 13%	14 12%	18 11%	5 42%	14 10%	9 17%
7-8	62 33%	1107 30%	10 23%	12 29%	22 39%	18 38%	25 37%	~	~	~	~	~	13 22%*	47 40%*	59 35%	1 8%	45 33%	17 33%
9-10	103 55%	2234 61%	29 67%	25 61%	27 47%	22 47%	35 52%	~	~	~	~	~	39 65%*	57 48%*	90 54%	6 50%	77 57%	26 50%
VALID CASES	188	3648	43	41	57	47	67						60	118	167	12	136	52
NUMBER OF RESPONDENTS	188 100%	3648 100%	43 100%	41 100%	57 100%	47 100%	67 100%						60 100%	118 100%	167 100%	12 100%	136 100%	52 100%
MEAN	2.43	2.53	2.58	2.51	2.33	2.32	2.42						2.52	2.36	2.43	2.08	2.46	2.33
p stat_(*=Sig @ p<=.05)		.025*	~	~	.235	~	.911	~	~	~	~	~	.223	.121	~	~	.234	.234

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR 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	GOOD & POOR	NO CCC	CCC	
NQ41 0-6	18 8%	330 7%	1 2%*	5 11%~	6 9%	6 11%	9 10%	~	~	~	~	~	1 2%*	16 10%*	16 8%~	1 10%~	9 5%*	9 17%*
7-8	57 26%	960 22%	13 25%	7 15%~	17 25%	20 37%*	24 27%	~	~	~	~	~	15 26%	40 26%	50 25%~	4 40%~	44 27%	13 24%
9-10	145 66%	3168 71%	38 73%	34 74%~	45 66%	28 52%*	56 63%	~	~	~	~	~	41 72%	98 64%	133 67%~	5 50%~	113 68%	32 59%
VALID CASES	220	4459	52	46	68	54	89						57	154	199	10	166	54
NUMBER OF RESPONDENTS	220 100%	4459 100%	52 100%	46 100%	68 100%	54 100%	89 100%						57 100%	154 100%	199 100%	10 100%	166 100%	54 100%
MEAN	2.58	2.64	2.71	2.63	2.57	2.41	2.53						2.70	2.53	2.59	2.40	2.63	2.43
p stat_(*=Sig @ p<=.05)		.144	.044*	~.954	.024*	.357	~	~	~	~	~	~.050*	.081	~	~	~.082	.082	

[ASKED IF Q30 = YES]

NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND #	AMER IND/PAC ALSK ##	MUL-TI OTHR ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
NQ48 0-6	4 10%	88 12%	~	10%	10%	14%	1 5%	~	~	~	~	~	1 14%	3 10%	3 11%	1 13%	2 11%	2 10%
7-8	11 28%	175 24%	20%	20%	40%	29%	4 21%	~	~	~	~	~	2 29%	8 28%	7 25%	3 38%	4 21%	7 35%
9-10	24 62%	456 63%	80%	70%	50%	57%	14 74%	~	~	~	~	~	4 57%	18 62%	18 64%	4 50%	13 68%	11 55%
VALID CASES	39	718	5	10	10	14	19						7	29	28	8	19	20
NUMBER OF RESPONDENTS	39 100%	718 100%	5 100%	10 100%	10 100%	14 100%	19 100%						7 100%	29 100%	28 100%	8 100%	19 100%	20 100%
MEAN	2.51	2.51	2.80	2.60	2.40	2.43	2.68						2.43	2.52	2.54	2.38	2.58	2.45
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	
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR 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	GOOD & FAIR & POOR	NO CCC	CCC	
NQ54 0-6	42 16%	696 13%	5 9%	5 9%	19 23%*	13 18%	22 21%	~	~	~	~	~	6 8%*	34 19%*	37 15%~	4 29%~	26 13%*	16 26%*
7-8	81 31%	1488 29%	20 38%	16 29%	22 27%	23 32%	36 34%	~	~	~	~	~	15 19%*	66 37%*	77 32%~	3 21%~	65 32%	16 26%
9-10	139 53%	3026 58%	28 53%	35 62%	40 49%	36 50%	48 45%*	~	~	~	~	~	59 74%*	78 44%*	128 53%~	7 50%~	110 55%	29 48%
VALID CASES	262	5210	53	56	81	72	106						80	178	242	14	201	61
NUMBER OF RESPONDENTS	262 100%	5210 100%	53 100%	56 100%	81 100%	72 100%	106 100%						80 100%	178 100%	242 100%	14 100%	201 100%	61 100%
MEAN	2.37	2.45	2.43	2.54	2.26	2.32	2.25						2.66	2.25	2.38	2.21	2.42	2.21
p stat_(*=Sig @ p<=.05)		.075	.451	.044*	.128	.506	.028*	~	~	~	~	~	~.000*	.000*	~	~	~.087	.088

GETTING NEEDED CARE

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	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 & POOR	GOOD	FAIR	NO CCC	CCC
NPRBSEE4 NQ46	2.05	2.21	2.60	1.82	2.00	2.07	2.15						1.63	2.17	2.10	1.88	2.10	2.00	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCARNES4 NQ15	2.42	2.45	2.56	2.44	2.47	2.21	2.42						2.41	2.40	2.41	2.33	2.45	2.34	
p stat_(*=Sig @ p<=.05)	.556		~	~	.479		~.963	~	~	~	~	~	~.873	.639	~	~	~.308	.308	
COMPOSITE	2.23	2.33	2.58	2.13	2.24	2.14	2.28	x	x	x	x	x	2.02	2.29	2.25	2.10	2.27	2.17	
p stat_(*=Sig @ p<=.05)	.007*		~	~	.970		~.268	~	~	~	~	~	~.000*	.042*	~	~	~.078	.257	

GETTING CARE QUICKLY

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	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 & POOR	GOOD	FAIR	NO CCC	CCC
NCARSN4 NQ4	2.55	2.68	2.76	2.67	2.44	2.41	2.52						2.21	2.63	2.57	2.13	2.60	2.44	
p stat_(*=Sig @ p<=.05)	.089		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NAPGET4 NQ6	2.34	2.42	2.53	2.41	2.38	2.08	2.28						2.36	2.32	2.36	1.91	2.34	2.35	
p stat_(*=Sig @ p<=.05)	.186		~	~	~	~	.410	~	~	~	~	~	~	.574	~	~	~	~	~
COMPOSITE	2.45	2.55	2.65	2.54	2.41	2.24	2.40	x	x	x	x	x	2.29	2.47	2.46	2.02	2.47	2.39	
p stat_(*=Sig @ p<=.05)	.018*		~	~	.543	~	.332	~	~	~	~	~	.007*	.405	~	~	~	~	~



HOW WELL DOCTORS COMMUNICATE

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ PAC ##	ALSK NATV ##	MUL- OTHR ##	TI ##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NDREXPL4 NQ32	2.75	2.70	2.77	2.90	2.76	2.58	2.76							2.65	2.78	2.78	2.30	2.76	2.73
p stat_(*=Sig @ p<=.05)		.336	~	~	~	~	.891	~	~	~	~	~	~	~	~	~	~	~	~
NDRLSTN4 NQ33	2.74	2.73	2.87	2.67	2.81	2.58	2.69							2.86	2.70	2.74	2.80	2.74	2.76
p stat_(*=Sig @ p<=.05)		.758	~	~	~	~	.315	~	~	~	~	~	~	~	~	~	~	~	~
NDRESPU4 NQ34	2.82	2.79	2.92	2.77	2.92	2.61	2.81							2.95	2.78	2.83	2.80	2.86	2.71
p stat_(*=Sig @ p<=.05)		.589	~	~	~	~	.979	~	~	~	~	~	~	~	~	~	~	~	~
NDRTMEN4 NQ37	2.51	2.50	2.70	2.45	2.59	2.26	2.57							2.40	2.55	2.55	2.00	2.52	2.51
p stat_(*=Sig @ p<=.05)		.763	~	~	~	~	.432	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.71	2.68	2.82	2.70	2.77	2.51	2.71	x	x	x	x	x	x	2.71	2.70	2.73	2.48	2.72	2.68
p stat_(*=Sig @ p<=.05)		.598	~	~	~	~	.976	~	~	~	~	~	~	~	~	~	~	~	~



SHARED DECISION MAKING

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER IND/ PAC	ALSK NATV	OTHR ##	MUL- TI ##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
NNRXWHY NQ11																			
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NNRXWYNT NQ12	2.57	2.41	2.60	2.56	2.20	2.85	2.71						2.60	2.61	2.56	3.00	2.13	2.85	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NRXBST NQ13	2.38	2.60	2.40	2.00	2.64	2.38	2.71						2.20	2.44	2.35	2.60	2.20	2.48	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.48	2.51	2.50	2.28	2.42	2.62	2.71	x	x	x	x	x	x	2.40	2.53	2.45	2.80	2.16	2.66
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

ACCESS TO SPECIALIZED SERVICES

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR 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	GOOD	FAIR	NO CCC	CCC
NEZMDEQ NQ20	2.46	2.28	3.00	1.50	2.33	3.00	2.25						2.00	2.67	2.40	2.67	2.71	2.17	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTHP NQ23	2.00	2.12	2.60	1.86	2.00	1.60	2.00						2.13	2.00	2.07	2.00	2.00	2.00	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTC NQ26	2.11	2.11	2.33	2.57	2.08	1.88	2.19						2.33	2.00	2.12	1.67	2.27	2.00	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.19	2.17	2.64	1.98	2.14	2.16	2.15	x	x	x	x	x	2.15	2.22	2.20	2.11	2.33	2.06	
p stat_(*=Sig @ p<=.05)	.701		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
			<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI ##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
PRBSEE4 Q46	68%	75%	80%	55%	64%	79%	75%								38%	77%	73%	50%	71%	65%
CARNES4 Q15	89%	88%	86%	91%	91%	87%	88%								92%	87%	89%	83%	90%	87%
AVERAGE	78.62	81.59	83.02	72.62	77.43	82.90	81.53	x	x	x	x	x	x	64.65	82.03	81.34	66.67	80.60	75.90	

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

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI ##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
CARSN4 Q4	88%	92%	100%	90%	80%	86%	84%							79%	91%	91%	63%	90%	84%
APGET4 Q6	80%	84%	84%	84%	81%	73%	78%							80%	81%	82%	55%	79%	84%
AVERAGE	84.25	88.10	92.11	87.13	80.48	79.43	80.73	x	x	x	x	x	x	79.25	85.92	86.50	58.52	84.47	83.86

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

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND #	AMER IND/PAC ALSK ##	MUL-OTHR TI ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
DREXPL4 Q32	96%	93%	92%	100%	97%	94%	98%							89%	98%	97%	80%	96%	95%
DRLSTN4 Q33	94%	95%	95%	90%	100%	90%	94%							95%	95%	94%	100%	94%	95%
DRESPU4 Q34	96%	96%	97%	90%	100%	94%	96%							100%	95%	96%	100%	97%	93%
DRTMEN4 Q37	87%	87%	89%	86%	92%	81%	89%							83%	89%	89%	70%	86%	90%
AVERAGE	93.2	92.6	93.4	91.6	97.3	89.5	94.4	x	x	x	x	x	x	91.7	94.1	94.0	87.5	93.1	93.3

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

	PSCS TOT CHLD	OHP TOT CHLD	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI ##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
PBCLCS4 Q50	77%	79%	79%	64%	73%	93%	74%							88%	74%	78%	88%	78%	77%
CSRESP Q51	94%	91%	100%	82%	91%	100%	100%							96%	94%	94%	100%	92%	100%
AVERAGE	85.48	85.33	89.29	72.73	81.82	96.67	86.84	x	x	x	x	x	x	92.00	83.82	85.71	93.75	84.69	88.46



SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND #	AMER IND/ALSK #	MUL-TI OTHR ##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	NO CCC	CCC		
NRXWHY Q11	95%	93%	100%	89%	91%	100%	100%							100%	94%	95%	100%	88%	100%
NRXWYNT Q12	79%	71%	80%	78%	60%	92%	86%							80%	81%	78%	100%	56%	92%
RXBST Q13	69%	80%	70%	50%	82%	69%	86%							60%	72%	68%	80%	60%	74%
AVERAGE	81.0	81.2	83.3	72.2	77.6	87.2	90.5	x	x	x	x	x	x	80.0	82.2	80.0	93.3	68.2	88.8

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

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
EZMDEQ Q20	85%	74%	100%	50%	83%	100%	75%						75%	89%	80%	100%	100%	67%	
EZTHP Q23	57%	68%	80%	43%	75%	40%	60%						63%	58%	57%	67%	50%	62%	
EZTC Q26	66%	66%	67%	86%	67%	56%	71%						78%	61%	68%	33%	73%	61%	
AVERAGE	69.2	69.4	82.2	59.5	75.0	65.4	68.8	x	x	x	x	x	x	71.8	69.3	68.3	66.7	74.4	63.0

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

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
DRTLKU Q38	88%	86%	92%	97%	78%	87%	94%							81%	91%	90%	70%	89%	85%
DRUNCON Q43	91%	89%	100%	92%	89%	88%	93%							100%	90%	91%	100%	83%	94%
DRUNFAM Q44	91%	87%	100%	92%	88%	88%	93%							100%	90%	91%	100%	84%	93%
AVERAGE	89.9	87.3	97.4	93.5	85.0	88.0	93.6	x	x	x	x	x	x	93.7	90.2	90.5	90.0	85.6	90.8

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	PSCS TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR 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	
HELPCONT Q18	93%	89%	100%	100%	86%	100%							100%	90%	89%	100%	100%	92%	
HLPCOORD Q29	50%	57%	42%	47%	44%	65%	60%						73%	44%	47%	75%	42%	59%	
AVERAGE	71.7	73.0	41.7	73.3	71.9	75.2	80.0	x	x	x	x	x	x	86.4	67.2	67.9	87.5	71.2	75.5

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

PAGE QUESTION TITLE

3. YOUR PERSONAL DOCTOR

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

4. GETTING HEALTH CARE FROM SPECIALISTS

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

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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?



PAGE	QUESTION	TITLE
6. ABOUT YOU		
53	Q36	IN GENERAL, HOW WOULD YOU RATE YOUR OVERALL HEALTH?
54	Q37	IN GENERAL, HOW WOULD YOU RATE YOUR OVERALL MENTAL OR EMOTIONAL HEALTH?
55	Q38	HAVE YOU HAD EITHER A FLU SHOT OR FLU SPRAY IN THE NOSE SINCE JULY 1, 2015?
56	Q39	DO YOU NOW SMOKE CIGARETTES OR USE TOBACCO EVERY DAY, SOME DAYS, OR NOT AT ALL?
57	Q40	IN THE LAST 6 MONTHS, HOW OFTEN WERE YOU ADVISED TO QUIT SMOKING OR USING TOBACCO BY A DOCTOR OR OTHER HEALTH PROVIDER IN YOUR PLAN? [ASKED IF Q39 = EVERY DAY OR SOME DAYS]
58	Q41	IN THE LAST 6 MONTHS, HOW OFTEN WAS MEDICATION RECOMMENDED OR DISCUSSED BY A DOCTOR OR HEALTH PROVIDER TO ASSIST YOU WITH QUITTING SMOKING OR USING TOBACCO? EXAMPLES OF MEDICATION ARE: NICOTINE GUM, PATCH, NASAL SPRAY, INHALER, OR PRESCRIPTION MEDICATION. [ASKED IF Q39 = EVERY DAY OR SOME DAYS]
59	Q42	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR DOCTOR OR HEALTH PROVIDER DISCUSS OR PROVIDE METHODS AND STRATEGIES OTHER THAN MEDICATION TO ASSIST YOU WITH QUITTING SMOKING OR USING TOBACCO? EXAMPLES OF METHODS AND STRATEGIES ARE: TELEPHONE HELPLINE, INDIVIDUAL OR GROUP COUNSELING, OR CESSATION PROGRAM. [ASKED IF Q39 = EVERY DAY OR SOME DAYS]
60	Q43	DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?
61	Q44	DO YOU HAVE A HEALTH PROBLEM OR TAKE MEDICATION THAT MAKES TAKING ASPIRIN UNSAFE FOR YOU?
62	Q45	HAS A DOCTOR OR HEALTH PROVIDER EVER DISCUSSED WITH YOU THE RISKS AND BENEFITS OF ASPIRIN TO PREVENT HEART ATTACK OR STROKE?

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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
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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**

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Correct  
Mark 

Incorrect  
Marks 

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

Yes → *Go to Question 1*  
 No

↓ **START HERE** ↓

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

- Yes → *Go to Question 3*
- No

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

\_\_\_\_\_

## YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

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

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

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

0 1 2 3 4 5 6 7 8 9 10

Worst Health Care Possible Best Health Care Possible

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

- Never
- Sometimes
- Usually
- Always

### YOUR PERSONAL DOCTOR

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

- Yes
- No → *Go to Question 24*

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 23*

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

- Never
- Sometimes
- Usually
- Always

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

0 1 2 3 4 5 6 7 8 9 10

Worst Personal Doctor Possible Best Personal Doctor Possible



## GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

- Yes  
 No → *Go to Question 28*

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

- Never  
 Sometimes  
 Usually  
 Always

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

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

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

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

## YOUR HEALTH PLAN

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

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

- Yes  
 No → *Go to Question 30*

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

- Never  
 Sometimes  
 Usually  
 Always

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

- Yes  
 No → *Go to Question 33*

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

- Never  
 Sometimes  
 Usually  
 Always

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

- Never  
 Sometimes  
 Usually  
 Always

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

- Yes  
 No → *Go to Question 35*







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

- Yes
- No

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

- Yes
- No

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

- Never
- Sometimes
- Usually
- Always

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes, definitely
- Yes, somewhat
- No

### ACCESS TO DENTAL CARE

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

- Yes
- No

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

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

### ABOUT YOU

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

- Excellent
- Very Good
- Good
- Fair
- Poor



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

- Excellent
- Very Good
- Good
- Fair
- Poor

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

- Yes
- No
- Don't know

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No
- Don't know

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

- Yes
- No
- Don't know

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

- Yes
- No

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

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

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

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



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

- Yes
- No → **Go to Question 50**

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

- Yes
- No

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

- Yes
- No → **Go to Question 52**

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

- Yes
- No

52. What is your age?

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

53. Are you male or female?

- Male
- Female

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

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

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

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

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

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

57. Did someone help you complete this survey?

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

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

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

**THANK YOU**

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

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

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



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

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

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Correct  
Mark 

Incorrect  
Marks



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

- Yes → *Go to Question 1*
- No

↓ **START HERE** ↓

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

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

- Yes → *Go to Question 3*
- No

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

\_\_\_\_\_



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

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

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

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



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

- Yes
- No

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

- Yes
- No

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No

### SPECIALIZED SERVICES

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

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

- Yes
- No → *Go to Question 22*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 25*



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 28*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 30*

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

- Yes
- No

### YOUR CHILD'S PERSONAL DOCTOR

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

- Yes
- No → *Go to Question 45*

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

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

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

- Never
- Sometimes
- Usually
- Always



32. In the last 6 months, how often did your child's personal doctor explain things about your child's health in a way that was easy to understand?
- Never
  - Sometimes
  - Usually
  - Always
33. In the last 6 months, how often did your child's personal doctor listen carefully to you?
- Never
  - Sometimes
  - Usually
  - Always
34. In the last 6 months, how often did your child's personal doctor show respect for what you had to say?
- Never
  - Sometimes
  - Usually
  - Always
35. Is your child able to talk with doctors about his or her health care?
- Yes
  - No → *Go to Question 37*
36. In the last 6 months, how often did your child's personal doctor explain things in a way that was easy for 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*







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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → **Go to Question 54**

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

- Never
- Sometimes
- Usually
- Always

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

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

**PRESCRIPTION MEDICINES**

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

- Yes
- No → **Go to Question 57a**

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

**ACCESS TO DENTAL CARE**

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

- Yes
- No

57b. In the last 6 months, if your child needed to see a dentist right away because of a 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. El personal de la encuesta no divulgará su información personal sin su permiso.

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

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

**INSTRUCCIONES PARA EL CUESTIONARIO**

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

Marca  
Correcta 

Marca  
Incorrecta   

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

Sí → *Pase a la Pregunta 1*  
 No

↓ **COMIENCE AQUI** ↓

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

Sí → *Pase a la pregunta 3*  
 No

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

\_\_\_\_\_



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

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

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

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









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 podrída confiar en el doctor u otro proveedor de salud con su cuidado médico?

- Sí, definitivamente
- Sí, algo
- No

## ACCESO A CUIDADO DENTAL

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

- Sí
- No

35r. En los últimos 6 meses, si usted necesitó ver a un dentista de inmediato por una 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 2015, ¿le han puesto la vacuna para la influenza o gripe ya sea en inyección o con un rociador o espray nasal?

- Sí
- No
- No sé

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

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

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

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

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

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

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

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

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

- Sí
- No
- No sé

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

- Sí
- No
- No sé

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

- Sí
- No

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

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

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

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

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

- Sí
- No → **Pase a la pregunta 50**

49. ¿Se trata de una enfermedad o problema que ha durado al menos 3 meses? **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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**INSTRUCCIONES PARA EL CUESTIONARIO**

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

Marca  
Correcta 

Marca  
Incorrecta   

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

Sí ➔ *Pase a la Pregunta 1*  
 No

↓ **COMIENCE AQUI** ↓

Por favor conteste las preguntas para el niño cuyo nombre está anotado en el sobre. No las conteste para ningún otro niño.

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

Sí ➔ *Pase a la pregunta 3*  
 No

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

\_\_\_\_\_



**LA ATENCIÓN MÉDICA QUE  
RECIBIÓ  
SU NIÑO EN LOS ÚLTIMOS 6 MESES**

Estas preguntas son acerca de la atención médica que ha recibido su niño. **No** incluya la atención que recibió su niño cuando pasó la noche hospitalizado. **No** incluya las consultas de su niño con el dentista.

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

Sí  
 No → *Pase a la pregunta 5*

4. En los últimos 6 meses, cuando su niño necesitó atención inmediata, ¿con qué frecuencia atendieron a su niño tan pronto como él o ella lo necesitaba?

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

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

Sí  
 No → *Pase a la pregunta 7*

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

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

7. En los últimos 6 meses, sin contar las veces en que su niño fue a una sala de emergencia, ¿cuántas veces fue su niño a un consultorio médico o a una clínica para que lo atendieran?

Ninguna vez → *Pase a la pregunta 16*  
 1 vez  
 2  
 3  
 4  
 5 a 9  
 10 veces o más

8. En los últimos 6 meses, ¿hablaron usted y el doctor u otro profesional médico de su niño sobre cosas específicas que usted podría hacer para prevenir que su niño se enferme?

Sí  
 No

9. En los últimos 6 meses, ¿con qué frecuencia le contestaron sus preguntas los doctores u otros profesionales médicos de su niño?

Nunca  
 A veces  
 La mayoría de las veces  
 Siempre



## 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

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

### 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



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



## 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, 2015?

1. YES
2. NO
3. DON'T KNOW
9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

## NOWSMOK

39. / NOWSMOK

Do you now smoke cigarettes or use tobacco...

(READ LIST)

1. EVERY DAY,
2. SOME DAYS, OR
3. NOT AT ALL? -----> ASPDAY
4. DON'T KNOW (DO NOT READ) -----> ASPDAY
9. REFUSAL/NOT ASCERTAINED (DO NOT READ) --> ASPDAY

## ADVQUIT9

40. / ADVQUIT9

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## PATCH9

41. / PATCH9

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

WILLPWR9

42. / WILLPWR9

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPDAY

43. / ASPDAY

Do you take aspirin daily or every other day?

(IF NEEDED: "Would you say YES or NO?")

(IWER: If the R asks about whether a particular medication or Brand name is considered aspirin, you may provide the following clarification:

Aspirin: Bayer and Bufferin

Not Aspirin: Tylenol, Motrin, Aleve, Advil, ibuprofen and acetaminophen)

1. YES
2. NO
3. DON'T KNOW
9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPUSF

44. / ASPUSF

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

(IF NEEDED: "Would you say YES or NO?")

1. YES
2. NO
3. DON'T KNOW

9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPPRV

45. / ASPPRV

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.AWCOND  
INTRO.AWCOND

When I read the following list, please tell me if you are aware that you have any of these conditions.

PHAWCD.(1-3)  
46.(1-3) / PHAWCD.(1-3)

[First,/(Next/How About...)]

1. "High cholesterol"
2. "High blood pressure"
3. "Parent or sibling who had a heart attack before the age of 60"

(IWER IF NECESSARY: "Are you aware if you have this condition?")

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.DRCOND  
INTRO.DRCOND

When I read the following list, please tell me if a doctor has ever told you that you have any of these conditions.

PHDRCD.(1-4)  
47.(1-4) / PHDRCD.(1-4)

[First,/(Next/How About...)]

1. "A heart attack"
2. "Angina or coronary heart disease"
3. "A stroke"
4. "Any kind of diabetes or high blood sugar"

(IWER IF NECESSARY: "Has a doctor ever told you that you have this condition?")

[FOR PHDRCD.2: (IWER IF NEEDED, CLARIFY: Angina pectoris (an-JYE-nuh or AN-jin-uh PECK-ter-iss) is severe pain in the chest associated with insufficient blood supply to the heart.)]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED



SMPROB

48. / SMPROB

I have just a few more questions.

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

1. YES
2. NO -----> TKMED

DK/REFUSAL/NOT ASCERTAINED --> TKMED

PRBLST

49. / PRBLST

Is this a condition or problem that has lasted for at least 3 months? [Please do NOT include pregnancy or menopause.]

[(IWER IF NEEDED, CLARIFY: Menopause (men-ne-paws) is the time in a woman's life when she stops having menstrual periods. It is sometimes called 'the change of life' or 'the change'.)]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

TKMED

50. / TKMED

Do you now need or take medicine prescribed by a doctor? [Please do NOT include birth control.]

1. YES
2. NO -----> QAGE4

DK/REFUSAL\NOT ASCERTAINED --> QAGE4

TRTCOND

51. / TRTCOND

Is this medicine to treat a condition that has lasted for at least three months? [Please do NOT include pregnancy or menopause.]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

QAGE4

52. / QAGE4

What is your age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your last birthday.")

(READ LIST IF NEEDED, "Are you...")

1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

QGENDER

53. / QGENDER

(IWER: RECORD RESPONDENT'S SEX, 'DK' NOT ALLOWED)

(ASK IF NECESSARY, "Are you male or female?")

1. MALE
2. FEMALE

EDUCAT

54. / EDUCAT

What is the highest grade or level of school that you have COMPLETED?  
Did you complete...

(IWER: IF R SAYS HE/SHE HAD NON-ACADEMIC TRAINING, SUCH AS TRADE SCHOOL, PROBE: "Did you receive a high school diploma or GED?")

(IWER: ACADEMIC TRAINING BEYOND A HIGH SCHOOL DIPLOMA THAT DOES NOT LEAD TO A BACHELORS DEGREE, SHOULD BE CODED "4". IF R WENT TO BUSINESS SCHOOL OR GOT A 3-YEAR NURSING DEGREE, ENTER "4")

(IWER: IF R OFFERS MORE THAN ONE RESPONSE, FOR EXAMPLE: "SOME HIGH SCHOOL OR GED", ENTER THE HIGHEST NUMBER THAT APPLIES.)

(READ LIST)

1. 8TH GRADE OR LESS,
2. SOME HIGH SCHOOL, BUT DID NOT GRADUATE,
3. HIGH SCHOOL GRADUATE OR GED,
4. SOME COLLEGE OR 2-YEAR DEGREE,
5. 4-YEAR COLLEGE GRADUATE, OR
6. MORE THAN A 4-YEAR COLLEGE DEGREE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

LATINO

55. / LATINO

Are you of Hispanic or Latino origin or descent?

1. YES / HISPANIC OR LATINO
2. NO / NOT HISPANIC OR LATINO

DK/REFUSAL/NOT ASCERTAINED

INTRO.RACE

INTRO.RACE

I am going to read a list of race categories. For each category, please say YES or NO if it describes your race. I must ask you about all categories in case more than one applies.

PQRACE3.(1-6)

56.(1-6) / PQRACE3.(1-6)

[(Are you)]

1. "White"
2. "Black or African-American"
3. "Asian"
4. "Native Hawaiian or other Pacific Islander"
5. "American Indian or Alaska Native"
6. "Some other race"

(IWER: IF R REPLIES "WHY ARE YOU ASKING ABOUT MY RACE?" SAY "We ask about your race for demographic purposes only. We want to be sure that the people we survey accurately represent the racial diversity of managed care enrollees in this country.")

(IWER: If R answers with a category not listed here, such as "HISPANIC" or "AMERICAN" or "MIXED RACE", probe using the category "OTHER".)

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

ALL.DONE

THANKS.SCREEN.

Those are all the questions I have.

Thank you for taking part in this important interview.

Have a nice (day/evening). Good bye.

RETURN TO COVERSHEET

## DIAL.SCREEN

DS. INTERVIEWER: YOU MAY DO THE INTERVIEW WITH ONLY THE PARENT OR GUARDIAN WHO KNOWS MOST ABOUT FNAME LNAME'S HEALTH CARE.  
PHONE NUMBER ---> [ 1 CELL PHONE - HAND DIAL ([AREA\$]) [FRST3\$] - [LAST4\$] /\*\*\* \*\*\*-\*\*\*\*]

(IWER: THIS IS A PROXY INTERVIEW.)

Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may be monitored and recorded for quality control. May I please speak with the person who knows the most about [NAME OF CHILD]'s health care?

(IF NEEDED: "We are conducting an important study to find out how satisfied families are with Oregon Health Plan. The results of the study will help Oregon Health Plan improve the care they provide and will also help consumers when they choose health care plans.")

(IF NEEDED: "The interview is completely confidential and voluntary, and will not affect your child's health care or benefits in any way.")

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

01. CONTINUE
02. ALREADY COMPLETED AND MAILED SURVEY BACK
03. NEW PHONE NUMBER
04. REFUSAL
05. APPOINTMENT
06. NEVER HEARD OF R
07. KNOWS R BUT HAS NO NEW NUMBER FOR R
08. RNA, ANS MACH, RETURN TO COVERSHEET
09. LANGUAGE PROBLEM -- SPEAKS SPANISH
10. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH

IF DIAL.SCREEN = 01, GO TO RE.INTRO

IF DIAL.SCREEN = 02, GO TO MAIL.SCREEN

IF DIAL.SCREEN = 03, ENTER NEWNUMBER ON COVERSHEET AND RE-DIAL

RETURN TO COVERSHEET

## MAIL.SCREEN

MS. INTERVIEWER: WE STILL NEED TO CONDUCT A TELEPHONE INTERVIEW EVEN  
THOUGH R SAYS THEY'VE SENT BACK THE MAIL SURVEY.

I'm sorry, but we haven't received your survey back -- it may have been lost in the mail. And since the deadline for mailing surveys has passed, we're now in the telephone phase of this study. May I continue?

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

1. CONTINUE
2. REFUSAL BECAUSE ALREADY COMPLETED AND MAILED SURVEY BACK
3. REFUSAL
4. APPOINTMENT

IF MAIL.SCREEN = 1, GO TO RE.INTRO  
RETURN TO COVERSHEET

## RE.INTRO

RE.INTRO. (INTERVIEWER: READ PARENS TEXT IF R ISN'T PERSON WHO ANSWERED  
PHONE OR HAS NOT HEARD IT YET.)

(Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may be monitored and recorded for quality control.)

We are conducting an important study to find out how satisfied families are with Oregon Health Plan. The results of the study will help Oregon Health Plan improve the care they provide and will also help consumers when they choose health care plans.

The interview is completely confidential and voluntary, and will not affect your child's health care or benefits in any way.

(IF R ASKS: "How long will this take?", EXPLAIN: "The questions should take about 12-15 minutes to answer.")

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

("DK" NOT ALLOWED)

1. CONTINUE
2. APPOINTMENT
3. REFUSAL
4. LANGUAGE PROBLEM -- SPEAKS SPANISH
5. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH
6. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)
7. RETURN TO CS

## SEX

SEX. (IWER: RECORD RESPONDENT'S SEX, 'DK' NOT ALLOWED)

1. MALE
2. FEMALE

## SPAN.VAR

(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

1. Spanish
2. English

## MEMBER

Q1. / MEMBER

I will be asking you about [NAME OF CHILD]'s health care. Please answer these questions based on the experiences you have had in getting health care for [NAME OF CHILD], and not on any experiences you may have had getting care for yourself or other members of your family.

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

(IWER: IF R SAYS "LEFT PLAN" OR "SWITCHED PLANS" OR "NO LONGER INSURED" ENTER "2". IF R IS NOT SURE IF HE/SHE IS PART OF Oregon Health Plan, ENTER "2".)

1. YES --> CK.PLMSTCR
2. NO

DK/REFUSAL/NOT ASCERTAINED

## NPLNAME

Q2. / NPLNAME

What is the name of your child's health plan?

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS Oregon Health Plan]

[(ENTER 5 IF R SAYS: MEDICAID)]

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

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

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

PLNAME

Q2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)

CK.PLMSTCR:

-----

IF NPLNAME = NOT A MATCH (3), GO TO END.SCREEN

INTRO.INCARE

INTRO.INCARE

Now I'm going to ask you some questions about your child's health care. When you answer these questions, please do NOT include dental visits or care your child got when [he/she] stayed overnight in a hospital.

INCARE

Q3. / INCARE

In the last 6 months, did your child have an illness, injury, or condition that NEEDED CARE RIGHT AWAY in a clinic, emergency room, or doctor's office?

1. YES
2. NO -----> APMAKE4

DK/REFUSAL/NOT ASCERTAINED --&gt; APMAKE4

CARSN4

Q4. / CARSN4

In the last 6 months, when your child NEEDED CARE RIGHT AWAY, how often did your child get care as soon as [he/she] needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

APMAKE4

Q5. / APMAKE4

In the last 6 months, did you make any appointments for a CHECK-UP OR ROUTINE CARE for your child at a doctor's office or clinic?

1. YES
2. NO -----> OFCTIM4

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

APGET4

Q6. / APGET4

In the last 6 months, when you made an appointment for a CHECK-UP OR ROUTINE CARE for your child at a doctor's office or clinic, how often did you get an appointment as soon as your child needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

OFCTIM4

Q7. / OFCTIM4

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

(IWER: IF NECESSARY: "Your best estimate would be fine.")

(IWER: IF NEEDED CLARIFY: "Please don't include dental care your child received.")

(IWER: IF NEEDED CLARIFY, "Please include ALL doctor visits including those for routine, regular care and for an illness or injury.")

(READ LIST IF NEEDED: "Would you say...")

0. NONE,
1. 1 TIME,
2. 2,
3. 3,
4. 4,
5. 5 TO 9, OR
6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

IF OFCTIM4=0 OR DK/REFUSAL THEN GO TO CHSCHL



PRVENT5

Q8. / PRVENT5

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

OFTQUES

9. / OFTQUES

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXSTP

10. / RXSTP

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

1. YES
2. NO -----> RTALLCR

DK/REFUSAL/NOT ASCERTAINED --&gt; RTALLCR

NRXWHY

11. / NRXWHY

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

NRXWYNT

12. / NRXWYNT

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

RXBST

13. / RXBST

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

RTALLCR

14. / RTALLCR

Using ANY NUMBER FROM 0 TO 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your child's health care in the last 6 months?

(IF NEEDED: "Please do not include any dental care your child may have received.")

00            01 02 03 04 05 06 07 08 09    10

DK/REFUSAL/NOT ASCERTAINED

CARNES4

15. / CARNES4

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## CHSCHL

16. / CHSCHL

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

1. YES
2. NO -----> MEDEQUIP

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

## CONTSCHL

17. / CONTSCHL

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

1. YES
2. NO -----> MEDEQUIP

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

## HELPCONT

18. / HELPCONT

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## MEDEQUIP

19. / MEDEQUIP

Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment. In the last 6 months, did you get or try to get any special medical equipment or devices for your child?

1. YES
2. NO -----> SPCTHY

DK/REFUSAL/NOT ASCERTAINED --> SPCTHY

## EZMDEQ

20. / EZMDEQ

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## HELPMDEQ

21. / HELPMDEQ

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## SPCTHY

22. / SPCTHY

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

1. YES
2. NO -----> TCPBLM

DK/REFUSAL/NOT ASCERTAINED --&gt; TCPBLM

## EZTHP

23. / EZTHP

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## HELPTHP

24. / HELPTHP

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## TCPBLM

25. / TCPBLM

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

1. YES
2. NO -----> PLUSCARE

DK/REFUSAL/NOT ASCERTAINED --&gt; PLUSCARE

EZTC

26. / EZTC

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTC

27. / HELPTC

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

PLUSCARE

28. / PLUSCARE

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

1. YES
2. NO -----> PRSNLD4

DK/REFUSAL/NOT ASCERTAINED --&gt; PRSNLD4

HLPCOORD

29. / HLPCOORD

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

PRSNLD4

30. / PRSNLD4

A personal doctor is the one your child would see if [he/she] needs a check-up, has a health problem or gets sick or hurt.

Does your child have a personal doctor?

1. YES
2. NO -----> INTRO.SPDR

DK/REFUSAL/NOT ASCERTAINED --&gt; INTRO.SPDR

DRTMS

31. / DRTMS

In the last 6 months, how many times did your child visit  
[his/her] personal doctor for care?

(IF NEEDED: "Your best estimate would be fine.")

(READ LIST IF NEEDED: "Would you say...")

- 0. NONE, -----> RATEDR4
- 1. 1 TIME,
- 2. 2,
- 3. 3,
- 4. 4,
- 5. 5 TO 9, OR
- 6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> RATEDR4

PBDRNG

31a. / PBDRNG

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

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DREXPL4

32. / DREXPL4

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

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRLSTN4

33. / DRLSTN4

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRESPU4

34. / DRESPU4

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CABLTLK

35. / CABLTLK

Is your child able to talk with doctors about [his/her] health care?

1. YES
2. NO -----> DRTMEN4

DK/REFUSAL/NOT ASCERTAINED --> DRTMEN4

CDREXPL

36. / CDREXPL

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

(READ LIST)

1. NEVER
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTMEN4

37. / DRTMEN4

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTLKU

38. / DRTLKU

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

DIFFDR

39. / DIFFDR

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

1. YES
2. NO -----> RATEDR4

DK/REFUSAL/NOT ASCERTAINED --> RATEDR4

DRINFO

40. / DRINFO

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)



RATEDR4

41. / RATEDR4

Using ANY NUMBER FROM 0 TO 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your child's personal doctor?

00            01 02 03 04 05 06 07 08 09    10

DK/REFUSAL/NOT ASCERTAINED

COND3MO

42. / COND3MO

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

(IWER: "We are looking for a condition that the child CURRENTLY HAS that has lasted for more than 3 months." )

1. YES
2. NO -----> INTRO.SPDR

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

DRUNCON

43. / DRUNCON

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

DRUNFAM

44. / DRUNFAM

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.SPDR

INTRO.SPDR

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

NDSPDR4

45. / NDSPDR4

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

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

(CLARIFY IF NEEDED: "Specialists are doctors who specialize in one area of health care. Please include all doctors you consider to be specialists, but do not include any dental visits.")

(IWER: IF RESPONDENT ASKS IF A PARTICULAR TYPE OF DOCTOR IS A SPECIALIST, CLARIFY, "I don't have any information about that, so please just interpret it however it seems best to you.")

(CLARIFY IF NEEDED: "You can interpret this question however it seems best to you.")

1. YES
2. NO -----> INTRO.PLAN

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

PRBSEE4

46. / PRBSEE4

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

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

SPDRS

47. / SPDRS

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

(CLARIFY IF NEEDED: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. Would you say your child has seen...")

(READ LIST IF NEEDED: "Would you say...")

0. NONE, -----> INTRO.PLAN
1. 1 SPECIALIST,
2. 2,
3. 3,
4. 4, OR
5. 5 OR MORE SPECIALISTS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> INTRO.PLAN

RTSPDR4

48. / RTSPDR4

We want to know your rating of the specialist your child saw most often in the last 6 months.

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

(Clarify if necessary: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.")

00            01 02 03 04 05 06 07 08 09    10

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN

INTRO.PLAN

Now I'm going to ask you some questions about your experience with your child's health plan.

CLCSRV4

49. / CLCSRV4

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

1. YES
2. NO -----> PLPRWK4

DK/REFUSAL/NOT ASCERTAINED --> PLPRWK4

PBCLCS4

50. / PBCLCS4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CSRESP

51. / CSRESP

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLPRWK4

52. / PLPRWK4

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

1. YES
2. NO -----> RTPLEXP

DK/REFUSAL/NOT ASCERTAINED --&gt; RTPLEXP

PBPLPW4

53. / PBPLPW4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTPLEXP

54. / RTPLEXP

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

00            01 02 03 04 05 06 07 08 09    10

DK/REFUSAL/NOT ASCERTAINED

CHPRES

55. / CHPRES

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

1. YES
2. NO -----> REGDENT

DK/REFUSAL/NOT ASCERTAINED --&gt; REGDENT

## EZPRES

56. / EZPRES

In the last 6 months, how often was it easy to get prescription medicines for your child through [his/her] health plan? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## HELPPRES

57. / HELPPRES

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## REGDENT

57a. / REGDENT

A regular dentist is one you would go to for check-ups and cleanings or when [he/she] has a cavity or tooth pain.

Does your child have a regular dentist?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## DNTASAP

57b. / DNTASAP

In the last 6 months, if your child needed to see a dentist right away because of a DENTAL EMERGENCY, did [he/she] get to see a dentist as soon as you wanted? Would you say...?

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?
5. DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS (DO NOT READ)

DK/REFUSAL/NOT ASCERTAINED

## CHTREAT

57c. / CHTREAT

Choices for your child's treatment or health care can include choices about medicine, surgery, or other treatment.

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

1. YES
2. NO -----> RESPCHT

DK/REFUSAL/NOT ASCERTAINED --> RESPCHT

## PCTREAT

57d. / PCTREAT

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## BSTREAT

57e. / BSTREAT

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## RESPCHT

57f. / RESPCHT

In the last 6 months, how often did your child's provider respect what health care and treatment choices you thought work best for your child? Would you say...?

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED

## ENCORQC

57g. / ENCORQC

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

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED

EASYQC

57h. / EASYQC

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

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED

HLTSTA4

58. / HLTSTA4

In general, how would you rate your child's overall health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

MNTLSTAT

59. / MNTLSTAT

In general, how would you rate your child's overall MENTAL OR EMOTIONAL health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CUSEMED

60. / CUSEMED

Other than vitamins, does your child currently need or use medicine prescribed by a doctor?

1. YES
2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --&gt; MOREMED

## WHYMEDA

61. / WHYMEDA

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

1. YES
2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

## WHYMEDB

62. / WHYMEDB

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## MOREMED

63. / MOREMED

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

1. YES
2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

## WHYMOREA

64. / WHYMOREA

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

1. YES
2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

## WHYMOREB

65. / WHYMOREB

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

## LIMITED

66. / LIMITED

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

1. YES
2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --> SPECTHP



WHYLIMA

67. / WHYLIMA

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

1. YES
2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --&gt; SPECTHP

WHYLIMB

68. / WHYLIMB

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

SPECTHP

69. / SPECTHP

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

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

DK/REFUSAL/NOT ASCERTAINED --&gt; CHCOUNS

WHYSTA

70. / WHYSTA

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

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

DK/REFUSAL/NOT ASCERTAINED --&gt; CHCOUNS

WHYSTB

71. / WHYSTB

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

CHCOUNS

72. / CHCOUNS

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

1. YES
2. NO -----> CAGE

DK/REFUSAL/NOT ASCERTAINED --&gt; CAGE

TIMCOUNA

73. / TIMCOUNA

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

CAGE

74. / CAGE

I have just a few more questions.

What is YOUR CHILD'S age?

(IWER: ENTER 00 IF LESS THAN 1 YEAR OLD)

(IWER: IF NEEDED CLARIFY, "Please answer based on your child's age as of their last birthday.")

\_\_\_ ENTER CHILD'S AGE

DK/REFUSAL/NOT ASCERTAINED

CGENDER

75. / CGENDER

(IF NEEDED: "Is your child male or female?")

1. MALE
2. FEMALE

REFUSAL/NOT ASCERTAINED

LATINO

76. / LATINO

Is your child of Hispanic or Latino origin or descent?

1. YES / HISPANIC OR LATINO
2. NO / NOT HISPANIC OR LATINO

DK/REFUSAL/NOT ASCERTAINED

INTRO.RACE

INTRO.RACE

I am going to read a list of race categories. For each category, please say YES or NO if it describes your child's race. I must ask you about all categories in case more than one applies.

PQRACE3.(1-6)

77.1-6) / PQRACE3.(1-6)

[(Is your child)]

1. "White"
2. "Black or African-American"
3. "Asian"
4. "Native Hawaiian or other Pacific Islander"
5. "American Indian or Alaska Native"
6. "Some other race"

(IWER: IF R REPLIES "WHY ARE YOU ASKING ABOUT MY CHILD'S RACE?" SAY "We ask about your child's race for demographic purposes only. We want to be sure that the people we survey accurately represent the racial diversity of managed care enrollees in this country.")

(IWER: If R answers with a category not listed here, such as "HISPANIC" or "AMERICAN" or "MIXED RACE", probe using the category "OTHER".)

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

PAGE

78. / PAGE

Now I have a few questions about you. What is YOUR age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your last birthday.")

(READ IF NEEDED, "Are you...")

0. UNDER 18,
1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PGENDER

79. / PGENDER

(IWER: ENTER RESPONDENT'S SEX. "DK" NOT ALLOWED.)

(IWER: IF NECESSARY ASK, "Are you male or female?")

1. MALE
2. FEMALE

EDUCAT  
80. / EDUCAT

What is the highest grade or level of school that you have COMPLETED?  
Did you complete...

(IWER: IF R SAYS HE/SHE HAD NON-ACADEMIC TRAINING, SUCH AS TRADE  
SCHOOL, PROBE: "Did you receive a high school diploma or GED?")

(IWER: ACADEMIC TRAINING BEYOND A HIGH SCHOOL DIPLOMA THAT DOES NOT  
LEAD TO A BACHELORS DEGREE, SHOULD BE CODED "4". IF R WENT TO BUSINESS  
SCHOOL OR GOT A 3-YEAR NURSING DEGREE, ENTER "4")

(IWER: IF R OFFERS MORE THAN ONE RESPONSE, FOR EXAMPLE: "SOME HIGH  
SCHOOL OR GED", ENTER THE HIGHEST NUMBER THAT APPLIES.)

(READ LIST)

1. 8TH GRADE OR LESS,
2. SOME HIGH SCHOOL, BUT DID NOT GRADUATE,
3. HIGH SCHOOL GRADUATE OR GED,
4. SOME COLLEGE OR 2-YEAR DEGREE,
5. 4-YEAR COLLEGE GRADUATE, OR
6. MORE THAN A 4-YEAR COLLEGE DEGREE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHRELT  
81. / CHRELT

How are you related to the child?

(READ IF NEEDED: "Are you the ...")

1. MOTHER OR FATHER,
2. GRANDPARENT,
3. AUNT OR UNCLE,
4. OLDER BROTHER OR SISTER,
5. OTHER RELATIVE,
6. LEGAL GUARDIAN, OR
7. SOMEONE ELSE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ALL.DONE  
THANKS.SCREEN.

Those are all the questions I have.

Thank you for taking part in this important interview.

Have a nice (day/evening). Good bye.