



Cascade Comprehensive Care
CAHPS® 5.0 Medicaid Survey

Banner Book Report

June 2014



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METHODOLOGY

Introduction

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

Survey Milestones

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

Sampling

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

Questionnaires

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

Selection of Cases for Analysis

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

Composites, Overall Ratings, and Measures for Reporting

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

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

Composite: Getting Needed Care

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

Composite: Getting Care Quickly

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

Composite: How Well Doctors Communicate

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

Composite: Customer Service

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

Composite: Shared Decision Making

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

Rating Questions

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

Composite: Access to Specialized Services (Child only)

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

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

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

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

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

Comparisons, Statistical Testing, Scoring, and Weighting

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

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

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

Sample Disposition

Category	Adult		Child	
	Cascade Comprehensive Care	Overall	Cascade Comprehensive Care	Overall
**First mailing - sent	900	15300	900	15300
*First mailing - usable survey returned	154	3059	153	2459
Second mailing - sent	695	11718	717	12459
*Second mailing - usable survey returned	62	1039	56	1057
*Phone - usable surveys	89	1456	133	2502
Total - usable surveys	305	5554	342	6018
†Ineligible: According to population criteria‡	20	348	17	362
†Ineligible: Deceased	1	78	1	3
†Ineligible: Mentally or physically unable to complete survey	19	301	0	0
†Ineligible: Language barrier	1	77	1	39
Incorrect address AND incorrect phone number	77	1065	72	991
Refusal/Returned survey blank	32	720	39	783
Nonresponse - Unavailable by mail or phone	445	7157	428	7104
Adjusted Response Rate	35.5%	38.3%	38.8%	40.4%

*Included in response rate numerator

†Excluded from adjusted response rate denominator

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

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

Response/Non-Response Comparison

Presented below is a comparison, by age and gender within each age category, of respondents and non-respondents, all of whom were part of the random sample for the Oregon CAHPS© 2014 survey.

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

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

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

Adult

Gender / Age	Non-Respondents	Respondents	Difference
Male	171 35.8%	115 37.7%	1.86%
Female	306 64.2%	190 62.3%	-1.86%
18-24	124 26.0%	50 16.4%	-9.60%
25-34	134 28.1%	63 20.7%	-7.44%
35-44	83 17.4%	40 13.1%	-4.29%
45-54	72 15.1%	62 20.3%	5.23%
55-64	37 7.8%	61 20.0%	12.24%
65-74	14 2.9%	19 6.2%	3.29%
75 or Older	13 2.7%	10 3.3%	0.55%

Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	234 50.1%	183 53.5%	3.40%
Female	233 49.9%	159 46.5%	-3.40%
<1, 1-3	123 26.3%	69 20.2%	-6.16%
4-7	128 27.4%	76 22.2%	-5.19%
8-12	121 25.9%	106 31.0%	5.08%
13 or older	95 20.3%	91 26.6%	6.27%

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

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
Q1 YES	297 100%	5403 100%	44 100%	58 100%	38 100%	59 100%	58 100%	24 100%	207 100%	3 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	245 100%	178 100%	100 100%	104 100%	177 100%
NOT ANSWERED	8	151	4				1	3	7	1						8	3	5	6	2	
VALID CASES	297	5403	44	58	38	59	58	24	207	3	2	1	12	11	36	28	245	178	100	104	177
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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?

	CCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH	NOT HIS- PAN-	HIS- PAN-	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q3 YES	127 43%	2419 45%	17 36%	19 33%	18 50%	26 45%	33 59%*	8 30%~	89 42%	3 75%	2 100%	5 ~	3 42%	16 27%	7 26%	111 45%	65 36%*	57 56%*	44 41%	77 44%	
Q3 NO	168 57%	2914 55%	30 64%	39 67%	18 50%	32 55%	23 41%*	19 70%~	122 58%	1 25%	~	7 ~	8 58%	18 73%	20 74%	137 55%	114 64%*	44 44%*	64 59%	97 56%	
NOT ANSWERED	10	220	1		2	1	3		3			1		2	1	5	2	4	2	5	
VALID CASES	295	5334	47	58	36	58	56	27	211	4	2	12	11	34	27	248	179	101	108	174	
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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	
	CCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q4 NEVER	6 6%	72 3%	2 12%	2 14%	1 ~	1 5%	1 4%	3 4%	~	~	~	1 25%	1 33%	~	1 14%	4 4%	6 ~	13%	2 5%	4 6%
SOMETIMES	20 19%	310 15%	3 18%	4 29%	2 12%	5 23%	2 8%	15 21%	~	~	~	~	2 13%	1 14%	16 17%	10 17%	8 17%	8 21%	9 14%	
USUALLY	32 30%	531 26%	6 35%	2 14%	7 41%	6 27%	8 32%	23 32%	1 50%	~	~	1 33%	5 33%	2 29%	29 32%	19 33%	12 26%	12 31%	19 30%	
ALWAYS	49 46%	1161 56%	6 35%	6 43%	8 47%	10 45%	14 56%	5 71%	32 44%	3 100%	1 50%	3 75%	1 33%	8 53%	3 43%	43 47%	29 50%	20 43%	17 44%	31 49%
#ALWAYS + USUALLY (NET)	81 76%	1692 82%	12 71%	8 57%	15 88%	16 73%	22 88%	7 100%	55 75%	3 100%	2 100%	3 75%	2 67%	13 87%	5 71%	72 78%	48 83%	32 70%	29 74%	50 79%
TOP BOX SCORE	49 46%	1161 56%	6 35%	6 43%	8 47%	10 45%	14 56%	5 71%	32 44%	3 100%	1 50%	3 75%	1 33%	8 53%	3 43%	43 47%	29 50%	20 43%	17 44%	31 49%
NOT ANSWERED	20	322		5	1	4	8	1	16			1		1	19	7	11	5	14	
VALID CASES	107	2074	17	14	17	22	25	7	73	3	2	4	3	15	7	92	58	46	39	63
NUMBER OF RESPONDENTS	127	2396	17	19	18	26	33	8	89	3	2	5	3	16	7	111	65	57	44	77
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q3 = YES]

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

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q5 YES	206 69%	3840 72%	26 54%	35 61%	31 82%	44 75%	43 75%	20 74%	150 70%	2 50%	2 100%	8 ~	6 67%	26 55%	26 74%	20 71%	172 69%	116 65%*	79 76%	73 67%	126 71%
NO	92 31%	1468 28%	22 46%	22 39%	7 18%	15 25%	14 25%	7 26%	63 30%	2 50%	~	4 ~	5 33%	9 45%	9 26%	8 29%	78 31%	63 35%*	25 24%	36 33%	51 29%
NOT ANSWERED	7	246	1				2		1			1		1		3	2	1	1	2	
VALID CASES	298	5308	48	57	38	59	57	27	213	4	2		12	11	35	28	250	179	104	109	177
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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?

	CCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	VERY GOOD & POOR	FAIR & POOR	MALE	FE- MALE	
Q6 NEVER	8 4%	83 2%	1 ~	2 3%	4 7%	1 11%	3 3%	5 4%	~	~	1 ~	2 14%	~	2 9%	~	8 5%	4 4%	4 6%	2 3%	6 6%
SOMETIMES	43 24%	655 19%	6 23%	10 32%	7 23%	8 21%	6 18%	3 23%	29 22%	~	~	2 ~	3 50%	4 17%	7 37%	33 22%	21 19%	20 32%	18 28%	23 21%
USUALLY	38 21%	957 28%*	8 31%	6 19%	9 30%	4 11%	8 24%	1 8%	25 19%	~	~	1 ~	1 17%	8 35%	5 26%	30 20%	21 19%	13 21%	10 16%	26 24%
ALWAYS	89 50%	1742 51%	12 46%	14 45%	12 40%	22 58%	19 56%	9 69%	70 54%	1 100%	2 100%	3 ~	2 43%	9 33%	7 37%	76 52%	62 57%*	25 40%	34 53%	53 49%
#ALWAYS + USUALLY (NET)	127 71%	2699 79%*	20 77%	20 65%	21 70%	26 68%	27 79%	10 77%	95 74%	1 100%	2 100%	4 ~	3 57%	17 74%	12 63%	106 72%	83 77%*	38 61%*	44 69%	79 73%
TOP BOX SCORE	89 50%	1742 51%	12 46%	14 45%	12 40%	22 58%	19 56%	9 69%	70 54%	1 100%	2 100%	3 ~	2 43%	9 33%	7 37%	76 52%	62 57%*	25 40%	34 53%	53 49%
NOT ANSWERED	28	401	4	1	6	9	7	21	1			1	3	1	25	8	17	9	18	
VALID CASES	178	3437	26	31	30	38	34	13	129	1	2	7	6	23	19	147	108	62	64	108
NUMBER OF RESPONDENTS	206	3838	26	35	31	44	43	20	150	2	2	8	6	26	20	172	116	79	73	126
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q5 = YES]

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

	CCC TOT ADULT	OHP TOT ADULT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER HAW/ IND/ ALSK	OTH	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE		
Q7 NONE	71 24%	1217 23%	18 38%	20 35%	7 18%	15 26%	7 13%*	3 11%	47 22%	1 33%	~	~	4 36%	4 36%	10 28%	7 26%	61 25%	54 31%*	17 17%*	30 28%	40 23%	
1 TIME	45 15%	847 16%	6 13%	9 16%	7 18%	3 5%*	10 18%	7 26%	31 15%	~	~	~	~	2 18%	7 19%	6 22%	35 14%	31 18%	11 11%	17 16%	25 14%	
2	58 20%	1010 19%	10 21%	9 16%	10 26%	10 17%	12 22%	6 22%	43 20%	1 33%	~	~	4 36%	4 36%	3 8%	6 22%	49 20%	33 19%	23 22%	23 21%	33 19%	
3	53 18%	647 12%*	5 11%	9 16%	5 13%	15 26%	12 22%	6 22%	41 19%	1 33%	1 100%	~	2 18%	1 9%	5 14%	4 15%	46 19%	28 16%	23 22%	21 20%	31 18%	
4	27 9%	427 8%	4 9%	4 7%	5 13%	5 9%	7 13%	1 4%	21 10%	~	~	~	~	~	6 17%	~	27 11%	13 7%	13 13%	7 7%	20 11%	
5 TO 9	29 10%	719 14%*	2 4%	6 11%	4 11%	5 9%	5 9%	4 15%	21 10%	~	~	~	1 9%	~	4 11%	2 7%	23 9%	13 7%	12 12%	6 6%*	20 11%	
10 OR MORE TIMES	9 3%	356 7%*	2 4%	~	~	5 9%	2 4%	~	8 4%	~	~	~	~	~	1 3%	2 7%	6 2%	4 2%	4 4%	3 3%	6 3%	
NOT ANSWERED	13	330	1	1	~	1	4	~	2	1	1	1	1	~	~	1	6	5	2	3	4	
VALID CASES	292	5224	47	57	38	58	55	27	212	3	1	~	11	11	36	27	247	176	103	107	175	
NUMBER OF RESPONDENTS	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q8 A HEALTH PROVIDER IS THE PERSON YOU WOULD SEE IF YOU NEED A CHECK-UP, WANT ADVICE ABOUT A HEALTH PROBLEM, OR GET SICK OR HURT. IN THE LAST 6 MONTHS, DID YOU AND A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT SPECIFIC THINGS YOU COULD DO TO PREVENT ILLNESS?

	CCC TOT ADULT	OHP TOT ADULT	AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER					
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE			
Q8 #YES	150 70%	2839 72%	16 55%	27 75%	21 68%	31 76%	35 76%	16 70%	116 72%	1 50%				5 71%	3 43%	19 76%	12 60%	131 72%	84 71%	57 69%	50 68%	96 72%
NO	65 30%	1080 28%	13 45%	9 25%	10 32%	10 24%	11 24%	7 30%	44 28%	1 50%	1 100%			2 29%	4 57%	6 24%	8 40%	51 28%	35 29%	26 31%	23 32%	37 28%
NOT ANSWERED	6	109		1		2	2	1	5							1		4	3	3	4	2
VALID CASES	215	3919	29	36	31	41	46	23	160	2	1			7	7	25	20	182	119	83	73	133
NUMBER OF RESPONDENTS	221 100%	4028 100%	29 100%	37 100%	31 100%	43 100%	48 100%	24 100%	165 100%	2 100%	1 100%			7 100%	7 100%	26 100%	20 100%	186 100%	122 100%	86 100%	77 100%	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?

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q9 YES	117 54%	2140 54%	9 31%	16 44%	20 65%	30 71%	28 60%	9 39%	91 56%	1 50%	~	3 43%	2 29%	13 52%	4 20%	103 57%	51 48%*	60%	40 53%	71 53%
NO	100 46%	1796 46%	20 69%	20 56%	11 35%	12 29%	19 40%	14 61%	71 44%	1 50%	1 100%	4 57%	5 71%	12 48%	16 80%	79 43%	34 52%*	40%	35 47%	62 47%
NOT ANSWERED	4	92	1	1	1	1	1	3						1	4	3	1		2	2
VALID CASES	217	3936	29	36	31	42	47	23	162	2	1	7	7	25	20	182	119	85	75	133
NUMBER OF RESPONDENTS	221 100%	4028 100%	29 100%	37 100%	31 100%	43 100%	48 100%	24 100%	165 100%	2 100%	1 100%	7 100%	7 100%	26 100%	20 100%	186 100%	122 100%	86 100%	77 100%	135 100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	CCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AMR AS-	NATV HAW/ PAC	AMR IND/ ALSK	MUL-	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE	
Q10 NOT AT ALL	5 4%	93 4%	~	~	10%~	10%~	~	4%~	~	~	~	33%~	~	~	25%~	4%~	1 2%	4 8%	2 5%~	3 4%~	
A LITTLE	15 13%	327 16%	22%~	19%~	5%~	13%~	15%~	16%~	~	~	~	~	~	8%~	~	14%~	5 9%	8 16%	7 18%~	7 10%~	
SOME	36 31%	758 36%	44%~	38%~	25%~	23%~	30%~	31%~	~	~	~	~	~	38%~	50%~	31%~	19 33%	14 28%	13 32%~	21 30%~	
#A LOT	59 51%	898 43%	33%~	44%~	60%~	53%~	56%~	44%~	49%~	1 100%~	~	~	2 67%~	2 100%~	7 54%~	1 25%~	53 52%~	32 56%	24 48%	18 45%~	39 56%~
NOT ANSWERED	2	95					1	1								1		1		1	
VALID CASES	115	2076	9	16	20	30	27	9	90	1		3	2	13	4	102	57	50	40	70	
NUMBER OF RESPONDENTS	117	2171	9	16	20	30	28	9	91	1		3	2	13	4	103	57	51	40	71	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

	CCC TOT ADULT	OHP TOT ADULT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR	ASIAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHER	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q11 NOT AT ALL	27 24%	407 20%	1 11%	5 31%	8 40%	6 20%	5 19%	1 11%	19 21%	~	~	~	1 33%	1 50%	5 38%	2 50%	23 23%	14 25%	12 24%	7 18%	18 26%	
A LITTLE	19 17%	411 20%	3 33%	3 19%	~	6 20%	5 19%	1 11%	16 18%	~	~	~	~	~	2 15%	~	18 18%	7 12%	9 18%	7 18%	11 16%	
SOME	38 33%	704 34%	5 56%	2 13%	6 30%	7 23%	12 44%	5 56%	33 37%	~	~	~	~	~	3 23%	2 50%	34 33%	20 35%	17 34%	15 38%	22 31%	
#A LOT	30 26%	554 27%	~	6 38%	6 30%	11 37%	5 19%	2 22%	22 24%	1 100%	~	~	2 67%	1 50%	3 23%	~	27 26%	16 28%	12 24%	11 28%	19 27%	
NOT ANSWERED	3	95					1		1								1		1		1	
VALID CASES	114	2076	9	16	20	30	27	9	90	1			3	2	13	4	102	57	50	40	70	
NUMBER OF RESPONDENTS	117	2171	9	16	20	30	28	9	91	1			3	2	13	4	103	57	51	40	71	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

	CCC TOT ADULT	OHP TOT ADULT	AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q12 #YES	82 72%	1495 72%	8 89%	13 81%	14 70%	17 59%	21 78%	5 56%	62 70%	1 100%			2 67%	1 50%	10 77%	2 50%	72 71%	42 74%	35 70%	31 78%	47 68%
NO	32 28%	577 28%	1 11%	3 19%	6 30%	12 41%	6 22%	4 44%	27 30%				1 33%	1 50%	3 23%	2 50%	29 29%	15 26%	15 30%	9 22%	22 32%
NOT ANSWERED	3	99				1	1		2							2		1		2	
VALID CASES	114	2072	9	16	20	29	27	9	89	1			3	2	13	4	101	57	50	40	69
NUMBER OF RESPONDENTS	117 100%	2171 100%	9 100%	16 100%	20 100%	30 100%	28 100%	9 100%	91 100%	1 100%			3 100%	2 100%	13 100%	4 100%	103 100%	57 100%	51 100%	40 100%	71 100%

[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?

	CCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE				
Q13 WORST HEALTH CARE POSSIBLE	31%	27%	~	6%~	~	~	2%~	~	~	~	~	~	14%~	14%~	4%~	5%~	1%~	2%~	0.8%	2%	1%	2%	
01	2%	0.9%	3%~	~	~	5%~	2%~	2%	~	~	~	~	14%~	~	~	~	2%~	2%	1%	1%	2%	3%	
02	4%	1%*	~	~	10%~	5%~	6%~	~	5%	~	~	~	~	~	~	5%~	8%~	2%	7%	3%	6%	4%	5%
03	4%	2%	~	3%~	10%~	2%~	6%~	4%~	4%	50%~	~	~	14%~	~	4%~	~	5%~	2%	7%	1%	6%*	~	~
04	4%	4%	3%~	8%~	3%~	2%~	2%~	8%~	5%	~	~	~	14%~	~	~	5%~	7%~	3%	6%	~	~	~	6%*
05	8%	7%	10%~	6%~	6%~	14%~	4%~	8%~	8%	50%~	~	~	~	~	12%~	~	9%~	7%	7%	12%	6%	9%	8%
06	7%	6%	10%~	3%~	6%~	14%~	4%~	4%~	8%	~	~	~	~	~	8%~	~	8%~	4%	12%*	12%	5%	9%	6%
07	12%	11%	17%~	19%~	6%~	5%~	17%~	~	13%	~	~	~	14%~	14%~	~	10%~	12%~	12%	11%	9%	13%	7%	17%
08	19%	22%	21%~	22%~	26%~	21%~	13%~	17%~	20%	~100%~	~	~	14%~	29%~	20%~	20%~	20%~	21%	18%	29%*	14%*	22%	19%
09	12%	16%	10%~	11%~	13%~	10%~	15%~	13%~	11%	~	~	~	~	~	16%~	20%~	11%~	14%	9%	13%	11%	10%	15%
BEST HEALTH CARE POSSIBLE	25%	29%	24%~	22%~	19%~	21%~	28%~	46%~	25%	~	~	~	43%~	14%~	36%~	35%~	23%~	30%	20%	17%*	31%*	13%	41%
#8-10 (NET)	57%	67%*	55%~	56%~	58%~	52%~	55%~	75%~	56%	~100%~	~	~	57%~	43%~	72%~	75%~	55%~	65%*	47%*	59%	56%	45%	75%

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			
	CCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	25 & 29%*	23 MALE	56 MALE	
9-10 (NET)	82 38%	1747 45%*	10 34%~	12 33%~	10 32%~	13 31%~	20 43%~	14 58%~	59 36%	~	~	3 43%~	1 14%~	13 52%~	11 55%~	64 35%~	53 44%*	25 29%*	23 30%	56 42%
NOT ANSWERED	4	139		1		1	1		2				1		3	2	1	1	2	
VALID CASES	217	3889	29	36	31	42	47	24	163	2	1	7	7	25	20	183	120	85	76	133
NUMBER OF RESPONDENTS	221 100%	4028 100%	29 100%	37 100%	31 100%	43 100%	48 100%	24 100%	165 100%	2 100%	1 100%	7 100%	7 100%	26 100%	20 100%	186 100%	122 100%	86 100%	77 100%	135 100%
MEAN	7.27	7.86	7.52	7.22	6.94	6.93	7.21	8.17	7.28	4.00	8.00	6.86	5.43	7.84	7.90	7.17	7.72	6.66	7.29	7.24
p stat_(*=Sig @ p<=.05)		.001*	~	~	~	~	~	~	.920	~	~	~	~	~	~	~	~.006*	.007*	.939	.816

[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?

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & GOOD POOR	MALE	FE- MALE		
Q14 NEVER	15 7%	106 3%*	1 3%	3 8%	2 6%	5 12%	3 6%	1 4%	11 7%	~	~	~	14%~	14%~	8%~	1 5%	13 7%	6 5%	8 9%	4 5%	11 8%
SOMETIMES	34 16%	606 16%	4 14%~	3 8%~	8 26%~	9 21%~	6 13%~	3 13%~	27 17%	2 100%~	~	~	14%~	14%~	~	4 20%~	29 16%~	12 10%*	20 24%*	11 15%	22 17%
USUALLY	62 29%	1251 32%	12 41%~	14 39%~	9 29%~	7 17%~	14 30%~	2 9%~	43 27%	~	~	~	14%~	43%~	40%~	3 15%~	54 30%~	37 31%	22 26%	19 25%	39 29%
ALWAYS	104 48%	1927 50%	12 41%~	16 44%~	12 39%~	21 50%~	24 51%~	17 74%~	81 50%	1 ~100%~	~	~	4 ~57%~	2 29%~	13 52%~	12 60%~	87 48%~	64 54%	35 41%	41 55%	61 46%
#ALWAYS + USUALLY (NET)	166 77%	3178 82%	24 83%~	30 83%~	21 68%~	28 67%~	38 81%~	19 83%~	124 77%	1 ~100%~	~	~	5 ~71%~	5 71%~	23 92%~	15 75%~	141 77%~	101 85%*	57 67%*	60 80%	100 75%
TOP BOX SCORE	104 48%	1927 50%	12 41%~	16 44%~	12 39%~	21 50%~	24 51%~	17 74%~	81 50%	1 ~100%~	~	~	4 ~57%~	2 29%~	13 52%~	12 60%~	87 48%~	64 54%	35 41%	41 55%	61 46%
NOT ANSWERED	6	138	1	1	1	1	1	3							1	3	3	1	2	2	
VALID CASES	215	3890	29	36	31	42	47	23	162	2	1	7	7	25	20	183	119	85	75	133	
NUMBER OF RESPONDENTS	221 100%	4028 100%	29 100%	37 100%	31 100%	43 100%	48 100%	24 100%	165 100%	2 100%	1 100%	7 100%	7 100%	26 100%	20 100%	186 100%	122 100%	86 100%	77 100%	135 100%	

[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?

	CCC TOT ADULT	OHP TOT ADULT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTH- R	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q15 YES	236 81%	4471 84%	30 65%~	36 63%*	31 82%~	54 93%*	52 91%*	25 93%~	175 83%	3 75%~	1 50%~	10 ~	6 83%~	28 55%~	19 78%~	202 68%~	85 82%~	139 79%	85 83%	79 74%*	149 85%*	
Q15 NO	56 19%	824 16%	16 35%~	21 37%*	7 18%~	4 7%*	5 9%*	2 7%~	35 17%	1 25%~	1 50%~	2 ~	5 17%~	8 45%~	9 22%~	45 32%~	18 18%~	38 21%	18 17%	28 26%*	27 15%*	
NOT ANSWERED	13	259	2	1		1	2		4			1				6		4	2	3	3	
VALID CASES	292	5295	46	57	38	58	57	27	210	4	2	12	11	36	28	247	177	103	107	176		
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%	

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

	CCC 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	WHITE	BLCK OR AFR-AMER	AS-IAN	NATV LLND	AMER PAC ALSK	OTHR	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE	
Q16 NONE	51 23%	737 18%	13 43%~	11 31%~	8 26%~	9 18%	8 16%	2 11%	38 23%	1 33%~	~	~	2 22%~	3 50%~	5 19%~	5 26%~	46 24%~	41 31%*	10 13%*	19 24%	32 23%	
1 TIME	43 19%	904 22%	4 13%~	8 23%~	3 10%~	10 20%	11 22%	6 32%	32 20%	~	~	~	1 11%~	~	6 22%~	8 42%~	33 17%~	27 20%	14 18%	13 17%	29 21%	
2	43 19%	921 22%	5 17%~	4 11%~	6 19%~	10 20%	14 28%	3 16%~	29 18%	2 67%~	~	~	2 22%~	3 50%~	5 19%~	4 21%~	35 19%~	22 17%	18 23%	17 22%	24 18%	
3	39 18%	552 13%	3 10%~	6 17%~	6 19%~	12 24%	8 16%	3 16%~	32 20%	~	~	~	3 33%~	~	4 15%~	1 5%~	36 19%~	22 17%	16 20%	19 24%	20 15%	
4	15 7%	381 9%	1 3%~	3 9%~	3 10%~	4 8%	3 6%	1 5%~	14 9%*	~	~	~	~	~	1 4%~	~	15 8%~	9 7%	5 6%	5 6%	10 7%	
5 TO 9	25 11%	484 12%	1 3%~	3 9%~	5 16%~	4 8%	5 10%	4 21%~	15 9%	1 ~100%~	~	~	1 ~11%~	~	5 ~19%~	~	20 ~11%~	9 7%*	13 16%	3 4%*	19 14%	
10 OR MORE TIMES	5 2%	164 4%	3 10%~	~	~	1 2%	1 2%	~	4 2%	~	~	~	~	~	1 4%~	1 5%~	4 2%~	2 2%	3 4%	2 3%	3 2%	
NOT ANSWERED	15	311		1		4	2	6	11				1		1		13	7	6	1	12	
VALID CASES	221	4143	30	35	31	50	50	19	164	3	1		9	6	27	19	189	132	79	78	137	
NUMBER OF RESPONDENTS	236	4454	30	36	31	54	52	25	175	3	1		10	6	28	19	202	139	85	79	149	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q15 = YES]

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

	CCC 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- WHT	AS- IAN	NATV PAC ILND	AMER ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
Q17 NEVER	4 2%	64 2%	1 ~	2 4%	1 9%	1 2%	~	2 2%	1 50%	~	~	1 14%	~	~	4 3%	2 2%	2 3%	~	4 4%	
SOMETIMES	17 10%	221 7%	2 12%	6 26%	5 12%	3 7%	1 6%	15 12%	~	~	~	~	1 5%	2 14%	15 11%	6 7%	10 14%	5 9%	12 11%	
USUALLY	34 20%	788 23%	3 18%	6 25%	1 4%	6 15%	12 29%	2 13%	25 20%	1 50%	~	~	~	5 23%	1 7%	30 21%	12 13%	18 26%	15 26%	16 15%
ALWAYS	113 67%	2286 68%	12 71%	17 71%	14 61%	29 71%	26 63%	13 81%	82 66%	1 100%	~	6 86%	3 100%	16 73%	11 79%	93 65%	69 78%	39 57%	37 65%	73 70%
#ALWAYS + USUALLY (NET)	147 87%	3074 92%	15 88%	23 96%	15 65%	35 85%	38 93%	15 94%	107 86%	1 50%	1 100%	6 86%	3 100%	21 95%	12 86%	123 87%	81 91%	57 83%	52 91%	89 85%
TOP BOX SCORE	113 67%	2286 68%	12 71%	17 71%	14 61%	29 71%	26 63%	13 81%	82 66%	1 100%	~	6 86%	3 100%	16 73%	11 79%	93 65%	69 78%	39 57%	37 65%	73 70%
NOT ANSWERED	2	36					1	1	2						1	2		2		
VALID CASES	168	3360	17	24	23	41	41	16	124	2	1	7	3	22	14	142	89	69	57	105
NUMBER OF RESPONDENTS	170	3396	17	24	23	41	42	17	126	2	1	7	3	22	14	143	91	69	59	105
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

	CCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHER	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE
Q18 NEVER	6 4%	80 2%	~	~	13%~	5%~	2%~	3	1	~	~	1	1	~	6	2	4	2	4	
SOMETIMES	20 12%	289 9%	1 6%~	3 13%~	4 17%~	4 10%~	1 10%~	17 14%~	~	~	~	~	1 5%~	1 7%~	17 12%~	7 8%~	11 16%~	7 12%~	11 11%~	
USUALLY	34 20%	705 21%	3 18%~	8 33%~	2 9%~	8 20%~	3 20%~	25 20%~	~	~	~	1 ~	1 33%~	4 18%~	2 14%~	28 20%~	14 16%~	17 25%~	13 23%~	18 17%~
ALWAYS	107 64%	2267 68%	13 76%~	13 54%~	14 61%~	26 65%~	28 68%~	12 75%~	78 63%~	1 50%~	1 100%~	5 ~	2 71%~	16 73%~	11 79%~	90 64%~	66 74%*	37 54%*	35 61%~	71 68%~
#ALWAYS + USUALLY (NET)	141 84%	2972 89%	16 94%~	21 87%~	16 70%~	34 85%~	36 88%~	15 94%~	103 84%~	1 50%~	1 100%~	6 ~	3 86%~	20 100%~	13 93%~	118 84%~	80 90%*	54 78%~	48 84%~	89 86%~
TOP BOX SCORE	107 64%	2267 68%	13 76%~	13 54%~	14 61%~	26 65%~	28 68%~	12 75%~	78 63%~	1 50%~	1 100%~	5 ~	2 71%~	16 73%~	11 79%~	90 64%~	66 74%*	37 54%*	35 61%~	71 68%~
NOT ANSWERED	3	55				1	1	1	3						2	2		2	1	
VALID CASES	167	3341	17	24	23	40	41	16	123	2	1	7	3	22	14	141	89	69	57	104
NUMBER OF RESPONDENTS	170 100%	3396 100%	17 100%	24 100%	23 100%	41 100%	42 100%	17 100%	126 100%	2 100%	1 100%	7 100%	3 100%	22 100%	14 100%	143 100%	91 100%	69 100%	59 100%	105 100%

[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?

	CCC 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- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q19 NEVER	4 2%	70 2%	~	~	9%~	2%~	2%~	1	1	~	~	1	~	1	~	4	3	1	3		
SOMETIMES	21 13%	242 7%*	~	4%~	23%~	20%~	10%~	6%~	19	~	~	1	~	~	1	19	7	13	7	13	
USUALLY	30 18%	541 16%	29%~	21%~	5%~	15%~	17%~	19%~	22	~	~	~	~	33%~	14%~	8%~	17%~	15%~	19%~	15	12
ALWAYS	111 67%	2489 74%*	71%~	75%~	64%~	63%~	71%~	75%~	82	1	1	5	2	17	11	94	68	39	33	76	
#ALWAYS + USUALLY (NET)	141 85%	3030 91%*	100%~	96%~	68%~	78%~	88%~	94%~	104	1	1	5	3	20	12	118	81	52	48	88	
TOP BOX SCORE	111 67%	2489 74%*	71%~	75%~	64%~	63%~	71%~	75%~	82	1	1	5	2	17	11	94	68	39	33	76	
NOT ANSWERED	4	53			1	1	1	1	2					1	1	2	2	1	3	1	
VALID CASES	166	3343	17	24	22	40	41	16	124	2	1	7	3	21	13	141	89	68	56	104	
NUMBER OF RESPONDENTS	170 100%	3396 100%	17 100%	24 100%	23 100%	41 100%	42 100%	17 100%	126 100%	2 100%	1 100%	7 100%	3 100%	22 100%	14 100%	143 100%	91 100%	69 100%	59 100%	105 100%	

[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?

	CCC TOT ADULT	OHP TOT ADULT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHER	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q20 NEVER	3 2%	102 3%	~	1 4%	1 5%	~	~	~	1 0.8%	1 50%	~	~	~	~	~	~	2 1%	1 3%	2 3%	~	2 2%	
SOMETIMES	29 18%	343 11%*	1 6%	1 4%	6 29%	11 27%	7 17%	1 6%	22 18%	~	~	2 33%	4 18%	1 8%	27 19%	10 11%*	16 24%	10 18%	18 18%	10 18%	18 18%	
USUALLY	44 27%	852 27%	7 41%	9 39%	3 14%	11 27%	8 20%	4 25%	32 26%	1 100%	~	1 17%	2 67%	5 23%	3 23%	36 26%	23 26%	18 27%	16 28%	25 25%	25 25%	
ALWAYS	88 54%	1905 60%	9 53%	12 52%	11 52%	18 45%	26 63%	11 69%	67 55%	1 50%	~	3 50%	1 33%	13 59%	9 69%	74 53%	53 61%*	31 46%	31 54%	56 55%	56 55%	
#ALWAYS + USUALLY (NET)	132 80%	2757 86%	16 94%	21 91%	14 67%	29 72%	34 83%	15 94%	99 81%	1 50%	1 100%	4 67%	3 100%	18 82%	12 92%	110 79%	76 87%*	49 73%	47 82%	81 80%	81 80%	
TOP BOX SCORE	88 54%	1905 60%	9 53%	12 52%	11 52%	18 45%	26 63%	11 69%	67 55%	1 50%	~	3 50%	1 33%	13 59%	9 69%	74 53%	53 61%*	31 46%	31 54%	56 55%	56 55%	
NOT ANSWERED	6	195	~	1	2	1	1	1	4	~	~	1	~	~	4	2	4	2	2	4	4	
VALID CASES	164	3201	17	23	21	40	41	16	122	2	1	6	3	22	13	139	87	67	57	101	101	
NUMBER OF RESPONDENTS	170	3396	17	24	23	41	42	17	126	2	1	7	3	22	14	143	91	69	59	105	105	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
CCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN AMER	NATV HAW/ PAC LLND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE				
Q21 YES	99 60%	1971 62%	12 71%~	9 39%~	13 62%~	25 63%~	27 66%~	8 47%~	73 59%~	2 100%~	1 100%~	3 ~	3 50%~	11 100%~	5 38%~	86 62%~	46 52%*	44 66%	33 57%	61 60%
NO	66 40%	1225 38%	5 29%~	14 61%~	8 38%~	15 37%~	14 34%~	9 53%~	50 41%~	~	~	3 ~	11 50%~	8 62%~	53 38%~	42 48%*	23 34%	25 43%	40 40%	
NOT ANSWERED	5	201	1	2	1	1		3			1			1	4	3	2	1	4	
VALID CASES	165	3195	17	23	21	40	41	17	123	2	1	6	3	22	13	139	88	67	58	101
NUMBER OF RESPONDENTS	170	3396	17	24	23	41	42	17	126	2	1	7	3	22	14	143	91	69	59	105
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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?

	CCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q22 NEVER	10 11%	127 7%	2 17%	2 22%	1 8%	3 13%	1 4%	6 9%	1 50%	~	~	1 50%	1 11%	1 20%	8 10%	4 9%	4 10%	4 13%	5 9%	
SOMETIMES	18 19%	264 14%	3 25%	2 22%	2 17%	4 17%	3 13%	12 17%	~	~	~	~	4 44%	16 20%	6 13%	11 27%	7 22%	9 16%		
USUALLY	24 26%	545 29%	4 33%	3 33%	2 17%	4 17%	6 25%	4 26%	1 100%	~	~	3 50%	3 100%	2 40%	19 24%	11 24%	11 27%	6 19%	16 29%	
ALWAYS	41 44%	930 50%	3 25%	2 22%	7 58%	12 52%	14 58%	3 38%	34 49%	1 50%	~	~	4 44%	2 40%	37 46%	24 53%	15 37%	15 47%	26 46%	
#ALWAYS + USUALLY (NET)	65 70%	1474 79%	7 58%	5 56%	9 75%	16 70%	20 83%	7 88%	52 74%	1 50%	1 100%	1 50%	3 44%	4 80%	56 70%	35 78%	26 63%	21 66%	42 75%	
TOP BOX SCORE	41 44%	930 50%	3 25%	2 22%	7 58%	12 52%	14 58%	3 38%	34 49%	1 50%	~	~	4 44%	2 40%	37 46%	24 53%	15 37%	15 47%	26 46%	
NOT ANSWERED	6	57			1	2	3		3			1	2		6	1	3	1	5	
VALID CASES	93	1865	12	9	12	23	24	8	70	2	1	2	3	9	5	80	45	41	32	56
NUMBER OF RESPONDENTS	99	1922	12	9	13	25	27	8	73	2	1	3	3	11	5	86	46	44	33	61
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER				
	CCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q23 WORST PERSONAL DOCTOR POSSIBLE	3 1%	44 1%	~	1 3%	1 4%	~	1 2%	~	1 50%	~	1 13%	~	1 4%	~	3 2%	1 0.8%	2 3%	1 1%	2 2%	
01	1 0.5%	31 0.8%	~	~	~	1 2%	~	1 0.6%	~	~	~	~	~	1 0.6%	1 0.8%	~	~	1 0.8%	~	
02	5 2%	33 0.8%	~	1 3%	2 7%	~	1 2%	~	5 3%	~	~	~	~	5 3%	2 2%	3 4%	2 3%	3 3%	3 2%	
03	5 2%	49 1%	~	1 3%	2 7%	1 2%	~	1 5%	4 3%	~	~	1 13%	~	5 3%	2 2%	3 4%	~	~	5 4%*	
04	5 2%	91 2%	1 3%	~	1 4%	1 2%	1 2%	~	4 3%	~	~	~	~	4 2%	1 0.8%	4 5%	~	4 3%	~	
05	14 7%	232 6%	1 3%	6 18%	1 4%	4 9%	2 4%	~	10 6%	~	~	~	1 17%	3 11%	1 6%	12 7%	8 6%	5 7%	9 12%*	4 3%*
06	9 4%	158 4%	1 3%	1 3%	~	3 7%	2 4%	~	6 4%	~	~	~	~	1 4%	7 4%	1 0.8%*	4 5%	4 5%	3 2%	~
07	17 8%	284 7%	4 14%	5 15%	1 4%	2 4%	3 6%	1 5%	12 8%	~	~	1 13%	~	2 7%	1 6%	14 8%	13 10%	3 4%	5 7%	11 9%
08	36 17%	633 16%	8 28%	4 12%	1 4%	10 22%	11 23%	2 11%	30 19%	~	~	~	1 17%	3 11%	4 22%	31 18%	21 17%	15 20%	20 27%*	16 12%*
09	18 9%	737 19%*	4 14%	2 6%	3 11%	4 9%	1 2%	3 16%	11 7%	~	~	1 13%	2 33%	2 7%	3 17%	14 8%	10 8%	6 8%	5 7%	12 9%
BEST PERSONAL DOCTOR POSSIBLE	96 46%	1651 42%	10 34%	13 38%	15 56%	20 43%	25 53%	12 63%	72 46%	1 50%	~	4 50%	2 33%	15 56%	9 50%	81 46%	64 52%*	29 39%	27 37%	68 53%*
#8-10 (NET)	150 72%	3021 77%	22 76%	19 56%	19 70%	34 74%	37 79%	17 89%	113 73%	1 50%	~	5 63%	5 83%	20 74%	16 89%	126 71%	95 77%	50 68%	52 71%	96 74%

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			
	CCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE	
9-10 (NET)	114 55%	2388 61%	14 48%	15 44%	18 67%	24 52%	26 55%	15 79%	83 54%	1 50%	~	5 63%	4 67%	17 63%	12 67%	95 54%	74 60%	35 47%	32 44%*	80 62%*
NOT ANSWERED	27	511	1	2	4	8	5	6	20	1	1	2	1	1	25	15	11	6	20	
VALID CASES	209	3943	29	34	27	46	47	19	155	2		8	6	27	18	177	124	74	73	129
NUMBER OF RESPONDENTS	236 100%	4454 100%	30 100%	36 100%	31 100%	54 100%	52 100%	25 100%	175 100%	3 100%	1	10 100%	6 100%	28 100%	19 100%	202 100%	139 100%	85 100%	79 100%	149 100%
MEAN	8.13	8.35	8.38	7.53	7.81	8.17	8.43	9.11	8.18	5.00		7.37	8.50	8.41	8.94	8.06	8.47	7.64	7.99	8.29
p stat_(*=Sig @ p<=.05)		.195	~	~	~	~	~	~	.604	~	~	~	~	~	~	~	.019*	.028*	.533	.220

[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?

	CCC TOT ADULT	OHP TOT ADULT	AGE					RACE						ETHNICITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q24 YES	102 35%	2057 40%	6 12%~	11 19%*	14 38%~	24 42%	27 47%*	15 56%~	77 36%	2 50%~	1 50%~	5 ~ 45%~	11 ~ 31%~	4 14%~	92 37%~	47 26%*	48 47%*	31 28%	67 39%		
Q24 NO	189 65%	3041 60%	42 88%~	46 81%*	23 62%~	33 58%	31 53%*	12 44%~	134 64%	2 50%~	1 50%~	1 ~100%~	6 55%~	11 ~100%~	25 69%~	24 86%~	156 63%~	131 74%*	55 53%*	79 72%	107 61%
NOT ANSWERED	14	457		1	1	2	1		3			1			5	3	2		5		
VALID CASES	291	5097	48	57	37	57	58	27	211	4	2	1	11	11	36	28	248	178	103	110	174
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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

	CCC 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	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE
Q25 NEVER	12 12%	91 5%*	2 ~ 18%	2 ~ 14%	1 ~ 4%	5 ~ 20%	1 ~ 8%	9 12%	~	~	~	1 ~ 33%	~	1 ~ 9%	1 25%	10 11%	5 11%	7 16%	3 10%	8 13%
SOMETIMES	16 17%	329 17%	1 17%	4 ~ 29%	8 33%	2 8%	~	11 15%	~	1 ~ 100%	~	1 ~ 33%	~	3 ~ 27%	~	16 ~ 18%	4 9%	11 25%	8 27%	8 13%
USUALLY	25 26%	546 29%	2 33%	3 27%	4 29%	6 25%	7 28%	2 17%	19 26%	~	~	~	~	4 ~ 36%	~	23 ~ 26%	12 26%	10 23%	3 10%	21 33%
ALWAYS	43 45%	927 49%	3 50%	6 55%	4 29%	9 38%	11 44%	9 75%	35 47%	2 100%	~	1 ~ 33%	~	3 ~ 27%	3 75%	39 44%	25 54%	16 36%	16 53%	26 41%
#ALWAYS + USUALLY (NET)	68 71%	1473 78%	5 83%	9 82%	8 57%	15 63%	18 72%	11 92%	54 73%	2 100%	~	1 ~ 33%	~	7 ~ 64%	3 75%	62 70%	37 80%	26 59%	19 63%	47 75%
TOP BOX SCORE	43 45%	927 49%	3 50%	6 55%	4 29%	9 38%	11 44%	9 75%	35 47%	2 100%	~	1 ~ 33%	~	3 ~ 27%	3 75%	39 44%	25 54%	16 36%	16 53%	26 41%
NOT ANSWERED	6	107				2	3	3				2				4	1	4	1	4
VALID CASES	96	1893	6	11	14	24	25	12	74	2	1	3		11	4	88	46	44	30	63
NUMBER OF RESPONDENTS	102 100%	2000 100%	6 100%	11 100%	14 100%	24 100%	27 100%	15 100%	77 100%	2 100%	1 100%	5 100%		11 100%	4 100%	92 100%	47 100%	48 100%	31 100%	67 100%

[ASKED IF Q24 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER		
	CCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q26 NONE	10 10%	66 3%*	1 17%~	2 ~ 14%~	4 ~ 16%~	1 8%	8 11%~	~	~	~	~	~	~	8 9%~	2 4%~	7 16%~	3 10%~	5 8%~	
1 SPECIALIST	53 54%	967 51%	4 67%~	9 82%~	11 79%~	9 37%~	12 48%~	7 54%~	42 56%~	1 50%~	~	2 67%~	6 55%~	3 75%~	47 53%~	28 60%~	22 50%~	12 39%~	40 63%~
2	26 27%	501 26%	~	2 18%~	1 7%~	10 42%~	7 28%~	4 31%~	19 25%~	1 100%~	~	1 33%~	3 27%~	1 25%~	24 27%~	13 28%~	10 23%~	10 32%~	15 24%~
3	5 5%	222 12%*	~	~	4 17%~	1 4%~	~	~	3 4%~	~	~	~	2 18%~	5 6%~	3 6%~	2 5%~	3 10%~	2 3%~	
4	1 1%	72 4%*	~	~	1 4%~	~	~	~	1 1%~	~	~	~	~	1 1%~	~	1 2%~	1 3%~	~	
5 OR MORE SPECIALISTS	3 3%	70 4%	1 17%~	~	~	~	1 4%~	1 8%~	2 3%~	1 50%~	~	~	~	3 3%~	1 2%~	2 5%~	2 6%~	1 2%~	
NOT ANSWERED	4	103					2	2	2			2		4		4		4	
VALID CASES	98	1897	6	11	14	24	25	13	75	2	1	3	11	4	88	47	44	31	63
NUMBER OF RESPONDENTS	102	2000	6	11	14	24	27	15	77	2	1	5	11	4	92	47	48	31	67
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

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

	CCC TOT ADULT	OHP TOT ADULT	AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	MALE	FE- MALE		
Q27 WORST SPECIALIST POSSIBLE	1 1%	10 0.6%		1 ~ 9%								1 ~ 33%				1 ~ 1%		1 ~ 3%		1 ~ 2%	
01	2 2%	12 0.7%			1 ~ 8%	1 ~ 4%				2 ~ 3%						2 ~ 3%	1 ~ 2%			2 ~ 3%	
02	3 3%	19 1%				1 ~ 4%	1 ~ 5%			3 ~ 5%						3 ~ 4%	1 ~ 2%	2 ~ 5%	2 ~ 8%	1 ~ 2%	
03	1 1%	29 2%			1 ~ 8%									1 ~ 10%		1 ~ 1%		1 ~ 3%		1 ~ 2%	
04	2 2%	30 2%			1 ~ 8%	1 ~ 4%				2 ~ 3%						2 ~ 3%	1 ~ 2%	1 ~ 3%		2 ~ 3%	
05	2 2%	55 3%		1 ~ 9%			1 ~ 5%			2 ~ 3%					1 ~ 25%	1 ~ 1%	1 ~ 2%	1 ~ 3%	1 ~ 4%	1 ~ 2%	
06	2 2%	75 4%				2 ~ 9%				2 ~ 3%						2 ~ 3%		1 ~ 3%	2 ~ 8%		
07	7 8%	144 8%			2 ~ 17%	3 ~ 13%	1 ~ 5%	1 ~ 9%		5 ~ 8%			1 ~ 33%			6 ~ 8%	1 ~ 2%	6 ~ 16%	2 ~ 8%	5 ~ 9%	
08	10 12%	332 19%			2 ~ 18%	2 ~ 17%	3 ~ 13%	2 ~ 10%	1 ~ 9%	7 ~ 11%					3 ~ 30%	10 ~ 13%	4 ~ 9%	6 ~ 16%	6 ~ 23%	4 ~ 7%	
09	12 14%	332 19%		1 ~ 9%	2 ~ 17%	1 ~ 4%	4 ~ 19%	4 ~ 36%		9 ~ 14%	2 ~ 100%		1 ~ 33%			12 ~ 15%	5 ~ 11%	7 ~ 19%	2 ~ 8%	10 ~ 17%	
BEST SPECIALIST POSSIBLE	44 51%	747 42%	5 100%	6 55%	3 25%	11 48%	12 57%	5 45%		34 52%	1 ~100%				6 ~ 60%	3 75%	39 49%	30 68%	11 30%	11 42%	31 53%
#8-10 (NET)	66 77%	1411 79%	5 100%	9 82%	7 58%	15 65%	18 86%	10 91%		50 76%	2 100%	1 100%		1 ~ 33%	9 ~ 90%	3 75%	61 77%	39 89%	24 65%	19 73%	45 78%

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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				
	CCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ IND/ PAC ALSK	AMER ILND NATV OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE		
9-10 (NET)	56 65%	1080 60%	5 100%	7 64%	5 42%	12 52%	16 76%	9 82%	43 65%	2 100%	1 100%	1 ~	33% ~	6 ~	60% ~	3 75%	51 65%	35 80%	18 49%	13 50%	41 71%
NOT ANSWERED	2	31				1	1	1				1		1	1	1			2		
VALID CASES	86	1786	5	11	12	23	21	11	66	2	1	3	10	4	79	44	37	26	58		
NUMBER OF RESPONDENTS	88 100%	1817 100%	5 100%	11 100%	12 100%	24 100%	21 100%	12 100%	67 100%	2 100%	1 100%	3 100%	11 100%	4 100%	80 100%	45 100%	37 100%	28 100%	58 100%		
MEAN	8.35	8.46	10.0	8.18	7.17	7.96	8.86	9.18	8.33	9.00	10.0	5.33	8.70	8.75	8.30	9.00	7.70	8.12	8.40		
p stat_(*=Sig @ p<=.05)		.677	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		

[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?

	CCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q28 YES	50 17%	1016 20%	15 31%	6 11%	6 16%	10 18%	7 12%	1 4%	36 17%	1 25%	~	~	~	~	6 17%	4 14%	41 17%	28 16%	16 15%	19 17%	27 15%
Q28 NO	241 83%	4109 80%	33 69%	51 89%	32 84%	47 82%	51 88%	25 96%	175 83%	3 75%	2 100%	1 100%	11 100%	11 100%	30 83%	24 86%	207 83%	149 84%	88 85%	90 83%	148 85%
NOT ANSWERED	14	429		1		2	1	1	3				1			5	4	1	1	4	
VALID CASES	291	5125	48	57	38	57	58	26	211	4	2	1	11	11	36	28	248	177	104	109	175
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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			
	CCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & POOR	FAIR & POOR	MALE MALE
Q29 NEVER	4 8%	95 10%	1 7%	1 17%	1 17%			4 12%							4 10%	3 11%	1 7%	2 11%	2 8%
SOMETIMES	14 29%	336 35%	1 7%	2 33%	3 50%	6 67%		9 26%					1 17%	1 25%	10 26%	7 25%	3 21%	4 21%	8 32%
USUALLY	15 31%	299 31%	7 47%	1 17%	2 33%	1 11%	3 43%	11 32%					2 33%	1 25%	13 33%	9 32%	5 36%	8 42%	6 24%
ALWAYS	15 31%	228 24%	6 40%	2 33%		2 22%	4 57%	10 29%	1 100%				3 50%	2 50%	12 31%	9 32%	5 36%	5 26%	9 36%
#ALWAYS + USUALLY (NET)	30 63%	526 55%	13 87%	3 50%	2 33%	3 33%	7 100%	21 62%	1 100%				5 83%	3 75%	25 64%	18 64%	10 71%	13 68%	15 60%
TOP BOX SCORE	15 31%	228 24%	6 40%	2 33%		2 22%	4 57%	10 29%	1 100%				3 50%	2 50%	12 31%	9 32%	5 36%	5 26%	9 36%
NOT ANSWERED	2	45				1	1	2							2		2		2
VALID CASES	48	957	15	6	6	9	7	34	1				6	4	39	28	14	19	25
NUMBER OF RESPONDENTS	50	1002	15	6	6	10	7	36	1				6	4	41	28	16	19	27
	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

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

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q30 YES	53 18%	1357 27%*	14 29%~	8 14%	3 8%~	11 19%	12 21%	4 15%~	40 19%	2 50%~	~	~	~	3 27%~	5 14%~	6 21%~	42 17%~	31 17%	16 16%	21 19%	31 18%
NO	238 82%	3728 73%*	34 71%~	49 86%	34 92%~	46 81%	46 79%	23 85%~	170 81%	2 50%~	2 100%~	1 100%~	11 100%~	8 73%~	31 86%~	22 79%~	205 83%~	147 83%	86 84%	88 81%	143 82%
NOT ANSWERED	14	469		1	1	2	1		4				1			6	3	3	1	5	
VALID CASES	291	5085	48	57	37	57	58	27	210	4	2	1	11	11	36	28	247	178	102	109	174
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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

	CCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & POOR	FAIR & POOR	MALE	FE- MALE		
Q31 NEVER	7 14%	46 4%*	2 14%~	2 25%~	1 33%~	1 10%~	1 ~ 33%	5 13%~	~	~	~	~	~	1 25%~	~	5 ~ 12%~	4 13%~	2 12%~	1 5%~	6 19%~	
SOMETIMES	12 24%	289 23%	5 36%~	1 13%~	~	2 20%~	3 25%~	1 33%~	9 23%~	~	~	~	~	2 67%~	~	4 67%~	8 20%~	7 23%~	5 31%~	7 26%~	7 23%~
USUALLY	10 20%	401 32%*	2 14%~	1 13%~	1 33%~	2 20%~	4 33%~	~	10 26%~	~	~	~	~	~	~	10 ~ 24%~	6 20%~	4 25%~	5 26%~	5 16%~	
ALWAYS	22 43%	508 41%	5 36%~	4 50%~	1 33%~	5 50%~	5 42%~	1 33%~	15 38%~	2 100%~	~	~	~	1 33%~	3 75%~	2 33%~	18 44%~	13 43%~	5 31%~	8 42%~	13 42%~
#ALWAYS + USUALLY (NET)	32 63%	909 73%	7 50%~	5 63%~	2 67%~	7 70%~	9 75%~	1 33%~	25 64%~	2 100%~	~	~	~	1 33%~	3 75%~	2 33%~	28 68%~	19 63%~	9 56%~	13 68%~	18 58%~
TOP BOX SCORE	22 43%	508 41%	5 36%~	4 50%~	1 33%~	5 50%~	5 42%~	1 33%~	15 38%~	2 100%~	~	~	~	1 33%~	3 75%~	2 33%~	18 44%~	13 43%~	5 31%~	8 42%~	13 42%~
NOT ANSWERED	2	75				1	1	1	1					1		1	1	1		2	
VALID CASES	51	1245	14	8	3	10	12	3	39	2				3	4	6	41	30	16	19	31
NUMBER OF RESPONDENTS	53	1320	14	8	3	11	12	4	40	2				3	5	6	42	31	16	21	31
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL-	OTH-	TI	HIS-	NOT HIS-	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE
Q32 NEVER	3 6%	18 1%	1 7%	~	~	1 9%	~	1 33%	3 8%	~	~	~	~	~	~	2 5%	1 3%	1 6%	~	3 10%	
SOMETIMES	3 6%	93 7%	~	2 25%	1 33%	~	~	~	1 3%	~	~	~	~	1 20%	~	2 5%	2 7%	1 6%	1 5%	2 6%	
USUALLY	10 19%	288 23%	5 36%	~	~	3 27%	1 8%	1 33%	7 18%	~	~	~	~	1 33%	1 20%	2 33%	8 19%	4 13%	5 31%	6 30%	4 13%
ALWAYS	36 69%	849 68%	8 57%	6 75%	2 67%	7 64%	11 92%	1 33%	28 72%	2 100%	~	~	~	2 67%	3 60%	4 67%	30 71%	23 77%	9 56%	13 65%	22 71%
#ALWAYS + USUALLY (NET)	46 88%	1137 91%	13 93%	6 75%	2 67%	10 91%	12 100%	2 67%	35 90%	2 100%	~	~	~	3 100%	4 80%	6 100%	38 90%	27 90%	14 88%	19 95%	26 84%
TOP BOX SCORE	36 69%	849 68%	8 57%	6 75%	2 67%	7 64%	11 92%	1 33%	28 72%	2 100%	~	~	~	2 67%	3 60%	4 67%	30 71%	23 77%	9 56%	13 65%	22 71%
NOT ANSWERED	1	73						1	1								1		1		
VALID CASES	52	1247	14	8	3	11	12	3	39	2				3	5	6	42	30	16	20	31
NUMBER OF RESPONDENTS	53	1320	14	8	3	11	12	4	40	2				3	5	6	42	31	16	21	31
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q33 YES	82 28%	1535 30%	20 43%	13 24%	9 24%	12 21%	15 26%	8 30%	61 29%	3 75%	~	~	1 9%	3 27%	9 26%	9 32%	67 27%	48 27%	29 28%	32 30%	46 26%
NO	207 72%	3528 70%	27 57%	42 76%	29 76%	45 79%	43 74%	19 70%	150 71%	1 25%	2 100%	1 100%	10 91%	8 73%	25 74%	19 68%	179 73%	129 73%	73 72%	76 70%	128 74%
NOT ANSWERED	16	491	1	3		2	1		3				1		2		7	4	3	2	5
VALID CASES	289	5063	47	55	38	57	58	27	211	4	2	1	11	11	34	28	246	177	102	108	174
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	CCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV ILND	AMER ALSK	IND/ OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
PQ34 NEVER	4 1%	53 1%	~	~	3%	~	2%	4%	0.5%	25%	~	~	~	~	3%	~	1%	0.6%	2%	0.9%	1%
SOMETIMES	16 6%	302 6%	3%	5%	3%	5%	9%	~	7%	~	~	~	9%	1%	3%	7%	6%	3%*	11%*	7%	5%
USUALLY	31 11%	589 12%	9%	5%	8%	11%	10%	12%	12%	~	~	~	9%	1%	3%	7%	11%	11%	8%	11%	10%
ALWAYS	237 82%	4094 81%	35%	49%	33%	48%	46%	22%	169%	3%	2%	1%	10%	9%	31%	24%	201%	150%	81%	87%	145%
#ALWAYS + USUALLY (NET)	268 93%	4682 93%	44%	52%	36%	54%	52%	25%	195%	3%	2%	1%	11%	10%	32%	26%	229%	170%	89%	99%	163%
TOP BOX SCORE	237 82%	4094 81%	35%	49%	33%	48%	46%	22%	169%	3%	2%	1%	10%	9%	31%	24%	201%	150%	81%	87%	145%
NOT ANSWERED	1	97					1	1	1								1		1		
VALID CASES	288	5037	47	55	38	57	58	26	210	4	2	1	11	11	34	28	246	176	102	107	174
NUMBER OF RESPONDENTS	289 100%	5134 100%	47 100%	55 100%	38 100%	57 100%	58 100%	27 100%	211 100%	4 100%	2 100%	1 100%	11 100%	11 100%	34 100%	28 100%	246 100%	177 100%	102 100%	108 100%	174 100%

[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?

	CCC 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	WHTE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER HAW/ IND/ PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	FE- MALE	MALE	
Q35 WORST HEALTH PLAN POSSIBLE	7 3%	48 1%	1 2%	1 ~	1 3%	5 ~	5 9%*	4 2%	~	~	~	~	1 9%	2 6%	~	7 3%	2 1%	5 5%	4 4%	3 2%		
01	3 1%	36 0.7%	1 2%	1 2%	1 3%	~	~	3 2%	~	~	~	~	~	~	~	3 1%	2 1%	1 1%	1 1%	2 1%		
02	6 2%	58 1%	~	2 4%	2 6%	1 2%	~	3 2%	~	~	~	1 10%	1 3%	2 3%	2 7%	3 1%	2 1%	4 4%	3 3%	3 2%		
03	8 3%	85 2%	~	2 4%	1 3%	2 4%	1 2%	2 9%	5 3%	1 25%	~	~	~	1 9%	1 3%	1 4%	7 3%	1 0.6%*	6 6%	1 1%	7 4%	
04	8 3%	108 2%	1 2%	~	2 6%	3 6%	2 4%	6 3%	1 25%	~	~	~	~	1 3%	~	8 3%	4 2%	4 4%	1 1%	7 4%		
05	36 13%	486 10%	6 14%	6 11%	5 14%	11 20%	7 12%	1 5%	27 14%	1 ~100%	1 ~100%	1 10%	1 9%	4 13%	4 15%	30 13%	25 15%	11 11%	15 15%	21 13%		
06	22 8%	314 6%	3 7%	7 13%	3 9%	6 11%	2 4%	1 5%	19 10%	~	~	~	~	1 9%	2 6%	1 4%	21 9%	16 10%	6 6%	7 7%	15 9%	
07	37 14%	595 12%	8 19%	10 19%	5 14%	7 13%	5 9%	1 5%	32 16%*	~	~	~	~	~	3 9%	3 11%	33 14%	21 13%	15 15%	14 14%	22 13%	
08	65 24%	978 20%	12 29%	15 28%	9 26%	10 19%	13 23%	3 14%	43 22%	1 25%	~	~	3 30%	3 27%	9 28%	5 19%	55 24%	39 24%	23 23%	27 27%	34 21%	
09	23 9%	825 17%*	2 5%	3 6%	3 9%	3 6%	8 14%	3 14%	18 9%	~	~	~	2 20%	1 3%	2 7%	20 9%	15 9%	7 7%	10 10%	12 7%		
BEST HEALTH PLAN POSSIBLE	55 20%	1331 27%*	8 19%	7 13%	3 9%	11 20%	14 25%	11 50%	36 18%	1 25%	~	~	3 30%	4 36%	8 25%	9 33%	43 19%	35 22%	17 17%	17 17%	37 23%	
#8-10 (NET)	143 53%	3134 64%*	22 52%	25 47%	15 43%	24 44%	35 61%	17 77%	97 49%	2 50%	~	~	8 80%	7 64%	18 56%	16 59%	118 51%	89 55%	47 47%	54 54%	83 51%	

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		
	CCC 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-	NATV PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
9-10 (NET)	78 29%	2156 44%*	10 24%~	10 19%*	6 17%~	14 26%	22 39%	14 64%~	54 28%	1 25%~	~	~	5 ~	4 36%~	9 28%~	11 41%~	63 27%~	50 31%	24 24%	27 27%	49 30%
NOT ANSWERED	35	689	6	5	3	5	2	5	18	1	2	4	1	23	19	6	10	16			
VALID CASES	270	4865	42	53	35	54	57	22	196	4	1	1	10	11	32	27	230	162	99	100	163
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%
MEAN	7.11	7.79	7.21	6.98	6.37	6.98	7.18	8.41	7.08	6.25	5.00	5.00	7.90	7.09	6.97	7.48	7.04	7.35	6.63	7.05	7.09
p stat_(*=Sig @ p<=.05)		.000*	~.646	~.649	.837	~.756	~	~	~	~	~	~	~	~	~	~.063	.021*	.771	.900		

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?

	CCC TOT ADULT	OHP TOT ADULT	AGE					RACE						ETHNICITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q35A YES	42 15%	908 18%	2 ~	3 4%*	9 8%~	21 17%	7 36%*	35 17%	1 25%~	~	2 ~	18%~	4 ~	11%~	41 ~	17%~	6 3%*	34 34%*	22 21%*	20 12%	
NO	243 85%	4189 82%	45 100%~	55 96%*	34 92%~	45 83%	37 64%*	20 74%~	171 83%	3 75%~	2 100%~	1 100%~	9 82%~	11 100%~	31 89%~	28 100%~	201 83%~	169 97%*	67 66%*	85 79%*	151 88%
NOT ANSWERED	20	458	3	1	1	5	1	8				1	1		11		6	4	3	8	
VALID CASES	285	5096	45	57	37	54	58	27	206	4	2	1	11	11	35	28	242	175	101	107	171
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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

	CCC TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE
Q35B NEVER	8 21%	172 22%	1 ~ 50%	1 ~ 14%	5 25%	1 14%	8 24%	~	~	~	~	~	~	8 21%	1 17%	6 19%	3 15%	5 26%	
SOMETIMES	4 10%	131 17%	1 ~ 33%	3 ~ 15%	4 ~ 12%	~	~	~	~	~	~	~	4 11%	4 ~ 13%	2 10%	2 11%	~	~	
USUALLY	14 36%	173 22%	1 ~ 33%	2 29%	8 40%	3 43%	10 30%	~	~	2 100%	2 67%	2 67%	14 37%	1 17%	12 39%	6 30%	8 42%	~	~
ALWAYS	13 33%	296 38%	1 ~ 50%	1 33%	4 57%	4 20%	3 43%	11 33%	1 100%	~	~	~	1 33%	12 32%	4 67%	9 29%	9 45%	4 21%	
#ALWAYS + USUALLY (NET)	27 69%	470 61%	1 ~ 50%	2 67%	6 86%	12 60%	6 86%	21 64%	1 100%	~	2 100%	3 100%	3 100%	26 68%	5 83%	21 68%	15 75%	12 63%	
TOP BOX SCORE	13 33%	296 38%	1 ~ 50%	1 33%	4 57%	4 20%	3 43%	11 33%	1 100%	~	~	~	1 33%	12 32%	4 67%	9 29%	9 45%	4 21%	
NOT ANSWERED	3	58		2	1		2					1	3		3	2	1		
VALID CASES	39	773	2	3	7	20	7	33	1		2	3	38	6	31	20	19		
NUMBER OF RESPONDENTS	42	831	2	3	9	21	7	35	1		2	4	41	6	34	22	20		
	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		
	CCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q35C YES	30 10%	876 17%*	1 2%	2 4%*	7 19%~	9 16%	8 14%	3 12%~	23 11%	1 25%~	~	~	~	1 10%~	3 8%~	2 7%~	26 11%~	11 6%*	17 17%*	12 12%	18 10%
NO	257 90%	4320 83%*	46 98%~	55 96%*	29 81%~	47 84%	50 86%	23 88%~	183 89%	3 75%~	2 100%~	1 100%~	12 100%~	9 90%~	33 92%~	25 93%~	219 89%~	163 94%*	86 83%*	91 88%	159 90%
NOT ANSWERED	18	357	1	1	2	3	1	1	8				1		1	8	7	2	7	2	
VALID CASES	287	5197	47	57	36	56	58	26	206	4	2	1	12	10	36	27	245	174	103	103	177
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q35D NEVER	17 61%	245 32%	1 100%	2 100%	5 71%	6 75%	3 43%	12 57%						1 100%	2 67%	1 50%	15 60%	3 33%	12 71%	5 42%	12 75%
SOMETIMES	3 11%	126 16%			1 14%	1 13%	1 14%	2 10%						1 33%	1 50%	2 8%	2 22%	1 6%	3 25%		
USUALLY	4 14%	150 20%					2 29%	2 67%	4 19%							4 16%	2 22%	2 12%	3 25%	1 6%	
ALWAYS	4 14%	244 32%			1 14%	1 13%	1 14%	1 33%	3 14%	1 100%						4 16%	2 22%	2 12%	1 8%	3 19%	
#ALWAYS + USUALLY (NET)	8 29%	393 51%			1 14%	1 13%	3 43%	3 100%	7 33%	1 100%						8 32%	4 44%	4 24%	4 33%	4 25%	
TOP BOX SCORE	4 14%	244 32%			1 14%	1 13%	1 14%	1 33%	3 14%	1 100%						4 16%	2 22%	2 12%	1 8%	3 19%	
NOT ANSWERED	2	42				1	1	2								1	2			2	
VALID CASES	28	765	1	2	7	8	7	3	21	1				1	3	2	25	9	17	12	16
NUMBER OF RESPONDENTS	30	807	1	2	7	9	8	3	23	1				1	3	2	26	11	17	12	18
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35C = YES]

Q35E A HEALTH PROVIDER COULD BE A GENERAL DOCTOR, A SPECIALIST DOCTOR, A NURSE PRACTITIONER, A PHYSICIAN ASSISTANT, A NURSE OR ANYONE ELSE YOU WOULD SEE FOR HEALTH CARE. IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER TALK TOO FAST WHEN TALKING TO YOU?

	CCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	POOR	MALE	FE- MALE	
Q35E ALWAYS	12 4%	186 4%	4 ~	3 7%	3 8%	2 ~	2 4%	2 8%	4 2%*	2 50%	~	~	~	~	4 11%	2 7%	9 4%	6 3%	5 5%	3 3%	8 5%
USUALLY	18 6%	261 5%	3 6%	3 5%	3 8%	2 4%	4 7%	2 8%	9 4%	~	~	~	1 8%	1 9%	3 8%	3 11%	12 5%	10 6%	7 7%	7 7%	10 6%
SOMETIMES	60 21%	993 19%	12 26%	10 18%	6 16%	13 23%	9 16%	6 23%	50 24%*	1 25%	~	~	1 8%	~	5 14%	1 4%	55 22%	28 16%*	26 26%	23 22%	34 20%
NEVER	198 69%	3697 72%	32 68%	40 70%	26 68%	41 73%	41 73%	16 62%	142 69%	1 25%	2 100%	1 100%	10 83%	10 91%	24 67%	21 78%	170 69%	132 75%*	63 62%	73 69%	122 70%
#NEVER + SOMETIMES (NET)	258 90%	4690 91%	44 94%	50 88%	32 84%	54 96%*	50 89%	22 85%	192 94%*	2 50%	2 100%	1 100%	11 92%	10 91%	29 81%	22 81%	225 91%	160 91%	89 88%	96 91%	156 90%
TOP BOX SCORE	198 69%	3697 72%	32 68%	40 70%	26 68%	41 73%	41 73%	16 62%	142 69%	1 25%	2 100%	1 100%	10 83%	10 91%	24 67%	21 78%	170 69%	132 75%*	63 62%	73 69%	122 70%
NOT ANSWERED	17	417	1	1		3	3	1	9							1	7	5	4	4	5
VALID CASES	288	5137	47	57	38	56	56	26	205	4	2	1	12	11	36	27	246	176	101	106	174
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	CCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q35F ALWAYS	9 3%	87 2%	1 ~	3 2%	1 8%	3 ~	1 2%	4 5%	2 1%*	2 50%	~	~	~	1 9%	3 8%	2 7%	7 3%	5 3%	4 4%	3 3%	6 3%
USUALLY	7 2%	142 3%	1 2%	2 3%	1 3%	1 2%	2 4%	4 ~	2 2%	~	~	~	~	2 6%	6 ~	3 2%	3 2%	5 2%	2 3%	1 5%	1 1%
SOMETIMES	44 15%	912 18%	7 15%	5 9%	7 18%	8 14%	12 21%	2 8%	35 17%	1 25%	~	~	~	5 14%	1 4%	39 16%	13 7%*	26 26%*	13 12%	28 16%	
NEVER	229 79%	4005 78%	39 83%	50 86%	27 71%	46 82%	39 70%	23 88%	165 80%	1 25%	2 100%	1 100%	12 100%	10 91%	26 72%	25 89%	194 79%	157 88%*	67 67%*	85 80%	139 79%
#NEVER + SOMETIMES (NET)	273 94%	4917 96%	46 98%	55 95%	34 89%	54 96%	51 91%	25 96%	200 97%*	2 50%	2 100%	1 100%	12 100%	10 91%	31 86%	26 93%	233 95%	170 96%	93 93%	98 92%	167 95%
TOP BOX SCORE	229 79%	4005 78%	39 83%	50 86%	27 71%	46 82%	39 70%	23 88%	165 80%	1 25%	2 100%	1 100%	12 100%	10 91%	26 72%	25 89%	194 79%	157 88%*	67 67%*	85 80%	139 79%
NOT ANSWERED	16	408	1			3	3	1	8						7	3	5	4	4		
VALID CASES	289	5146	47	58	38	56	56	26	206	4	2	1	12	11	36	28	246	178	100	106	175
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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

			AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER					
	CCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	VERY GOOD & FAIR	POOR	MALE	FE- MALE		
Q35G ALWAYS	8 3%	75 1%	~	3 5%	~	1 2%	3 5%	1 4%	2 1%*	1 25%~	~	~	1 8%~	1 9%~	2 6%~	1 4%~	6 2%~	2 1%	6 6%*	4 4%	4 2%
USUALLY	5 2%	99 2%	1 2%~	3 ~	1 8%~	1 2%	~	~	3 1%	1 25%~	~	~	~	1 3%~	~	5 2%~	2 1%	2 2%	2 2%	2 2%	3 2%
SOMETIMES	36 12%	596 12%	5 11%~	3 5%*	5 13%~	10 18%	8 14%	2 8%~	27 13%	~	~	~	1 8%~	~	4 11%~	1 4%~	31 13%~	17 10%	15 15%	7 7%*	26 15%
NEVER	239 83%	4397 85%	41 87%~	51 89%	30 79%~	44 79%	46 81%	22 88%~	173 84%	2 50%~	2 100%~	1 100%~	10 83%~	10 91%~	29 81%~	26 93%~	203 83%~	156 88%*	77 77%	92 88%	142 81%
#NEVER + SOMETIMES (NET)	275 95%	4993 97%	46 98%~	54 95%	35 92%~	54 96%	24 95%	24 96%~	200 98%*	2 50%~	2 100%~	1 100%~	11 92%~	10 91%~	33 92%~	27 96%~	234 96%~	173 98%*	92 92%	99 94%	168 96%
TOP BOX SCORE	239 83%	4397 85%	41 87%~	51 89%	30 79%~	44 79%	46 81%	22 88%~	173 84%	2 50%~	2 100%~	1 100%~	10 83%~	10 91%~	29 81%~	26 93%~	203 83%~	156 88%*	77 77%	92 88%	142 81%
NOT ANSWERED	17	387	1	1		3	2	2	9							8	4	5	5	4	
VALID CASES	288	5167	47	57	38	56	57	25	205	4	2	1	12	11	36	28	245	177	100	105	175
NUMBER OF RESPONDENTS	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE			
Q35H #YES DEFINITELY	125 43%	2206 43%	15 33%~	24 42%	20 53%~	26 45%	26 45%	14 56%~	101 49%*	1 25%~	1 ~100%~	5 42%~	3 27%~	13 37%~	9 32%~	114 46%~	91 51%*	33 32%*	43 41%	82 46%	
YES SOMEWHAT	85 29%	1724 34%	17 37%~	19 33%	4 11%~	13 22%	19 33%	9 36%~	61 29%	1 25%~	1 50%~	3 ~ 25%~	2 18%~	9 26%~	8 29%~	71 29%~	48 27%	34 33%	33 31%	48 27%	
NO	80 28%	1181 23%	14 30%~	14 25%	14 37%~	19 33%	13 22%	2 8%~	46 22%*	2 50%~	1 50%~	4 ~ 33%~	6 55%~	13 37%~	11 39%~	62 25%~	38 21%*	35 34%	29 28%	47 27%	
NOT ANSWERED	15	443	2	1		1	1	2	6					1	6	4	3	5	2		
VALID CASES	290	5111	46	57	38	58	58	25	208	4	2	1	12	11	35	28	247	177	102	105	177
NUMBER OF RESPONDENTS	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	CCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q35I #YES DEFINITELY	186 65%	3431 67%	29 62%~	37 64%	22 58%~	41 73%	36 63%	17 68%~	139 67%	1 25%~	1 50%~	1 100%~	8 67%~	4 36%~	22 63%~	15 54%~	161 65%~	129 72%*	53 53%*	67 64%	115 65%
YES SOMEWHAT	76 26%	1348 26%	14 30%~	19 33%	9 24%~	9 16%*	16 28%	7 28%~	52 25%	1 25%~	~	~	4 33%~	5 45%~	9 26%~	10 36%~	63 26%~	41 23%	31 31%	24 23%	49 28%
NO	26 9%	341 7%	4 9%~	2 3%*	7 18%~	6 11%	5 9%	1 4%~	16 8%	2 50%~	1 50%~	~	~	2 18%~	4 11%~	3 11%~	22 9%~	9 5%*	16 16%*	14 13%	12 7%
NOT ANSWERED	17	434	1				3	2	2	7					1		7	2	5	5	3
VALID CASES	288	5120	47	58	38	56	57	25	207	4	2	1	12	11	35	28	246	179	100	105	176
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	CCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q35J #YES DEFINITELY	218 75%	3907 76%	35 76%~	44 76%	29 76%~	40 69%	46 79%	20 83%~	165 80%*	2 50%~	1 ~100%~	9 75%~	7 64%~	24 67%~	19 68%~	188 76%~	143 80%*	70 69%	75 71%	138 78%	
YES SOMEWHAT	46 16%	870 17%	9 20%~	8 14%	4 11%~	13 22%	8 14%	2 8%~	31 15%	1 ~ 50%~	1 ~	2 8%~	6 18%~	6 17%~	5 18%~	39 16%~	24 13%	17 17%	17 16%	27 15%	
NO	25 9%	334 7%	2 4%~	6 10%	5 13%~	5 9%	4 7%	2 8%~	11 5%*	2 50%~	1 50%~	2 ~ 17%~	2 18%~	6 17%~	4 14%~	20 8%~	11 6%	14 14%*	13 12%	12 7%	
NOT ANSWERED	16	443	2			1	1	3	7						6	3	4	5	2		
VALID CASES	289	5111	46	58	38	58	58	24	207	4	2	1	12	11	36	28	247	178	101	105	177
NUMBER OF RESPONDENTS	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHER	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q35K #YES DEFINITELY	179 62%	3274 64%	26 55%	39 68%	22 58%	34 59%	36 62%	20 80%	133 64%	2 50%	1 ~100%	9 75%	5 45%	24 67%	16 57%	157 63%	120 67%*	55 54%*	61 58%	116 66%	
YES SOMEWHAT	71 24%	1308 25%	16 34%	12 21%	9 24%	14 24%	12 21%	3 12%	51 25%	2 ~100%	1 ~	3 8%	5 27%	14 14%	8 29%	56 23%	41 23%	26 25%	29 27%	37 21%	
NO	40 14%	554 11%	5 11%	6 11%	7 18%	10 17%	10 17%	2 8%	24 12%	2 50%	~	2 ~17%	3 27%	7 19%	4 14%	35 14%	17 10%*	21 21%*	16 15%	24 14%	
NOT ANSWERED	15	417	1	1		1	1	2	6						5	3	3	4	2		
VALID CASES	290	5137	47	57	38	58	58	25	208	4	2	1	12	11	36	28	248	178	102	106	177
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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

	CCC 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	WHITE	BLK OR AFR-	AS- IAN	NATV ILND	AMER PAC ALSK	OTHER	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q35L NEVER	23 8%	281 6%	5 11%	4 7%	2 5%	6 10%	6 11%	15 7%	1 25%	~	~	1 8%	3 30%	3 8%	4 15%	19 8%	12 7%	11 11%	11 11%	7 7%		
SOMETIMES	37 13%	704 14%	6 13%	7 12%	6 16%	7 12%	3 11%	26 13%	1 25%	~	~	1 8%	1 10%	5 14%	2 7%	32 13%	15 8%*	19 19%*	12 12%	24 14%		
USUALLY	62 22%	1231 24%	15 33%	13 23%	5 13%	11 19%	14 25%	2 8%	43 21%	~	~	2 17%	3 30%	7 19%	8 30%	51 21%	37 21%	23 23%	25 24%	34 19%		
ALWAYS	163 57%	2878 56%	19 42%	33 58%	25 66%	34 59%	31 54%	20 80%	122 59%	2 50%	2 100%	1 100%	8 67%	3 30%	21 58%	13 48%	144 59%	113 64%*	48 48%*	56 54%	106 60%	
#ALWAYS + USUALLY (NET)	225 79%	4109 81%	34 76%	46 81%	30 79%	45 78%	45 79%	22 88%	165 80%	2 50%	2 100%	1 83%	10 60%	6 78%	28 78%	195 79%	150 85%*	71 70%*	81 78%	140 80%		
TOP BOX SCORE	163 57%	2878 56%	19 42%	33 58%	25 66%	34 59%	31 54%	20 80%	122 59%	2 50%	2 100%	1 83%	8 60%	3 58%	21 58%	13 48%	144 59%	113 64%*	48 48%*	56 54%	106 60%	
NOT ANSWERED	20	461	3	1		1	2	2	8					1	1	7	4	4	6	3		
VALID CASES	285	5093	45	57	38	58	57	25	206	4	2	1	12	10	36	27	246	177	101	104	176	
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%	

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	CCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTH	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & POOR	FAIR & POOR	MALE	FE- MALE	
Q35M ALWAYS	10 4%	72 1%	1 2%	1 2%	3 ~	5 5%	9 9%	5 2%	1 25%	~	~	~	1 9%	3 9%	1 4%	8 3%	5 3%	4 4%	4 4%	6 3%	
USUALLY	3 1%	48 0.9%	1 2%	~	1 ~	2 2%	1 4%	3 1%	~	~	~	~	~	~	~	3 1%	1 0.6%	2 2%	2 2%	1 0.6%	
SOMETIMES	13 5%	187 4%	3 7%	4 7%	1 3%	~	2 3%	2 8%	8 4%	1 25%	~	~	1 8%	2 6%	2 6%	12 5%	7 4%	6 4%	4 4%	8 5%	
NEVER	259 91%	4818 94%	41 89%	53 91%	37 97%	53 93%	51 88%	21 88%	191 92%	2 50%	2 100%	1 100%	11 92%	10 91%	30 86%	27 96%	223 91%	166 93%	88 88%	96 91%	160 91%
#NEVER + SOMETIMES (NET)	272 95%	5005 98%	44 96%	57 98%	38 100%	53 93%	53 91%	23 96%	199 96%	3 75%	2 100%	1 100%	12 91%	10 91%	32 91%	27 96%	235 96%	173 97%	94 94%	100 94%	168 96%
TOP BOX SCORE	259 91%	4818 94%	41 89%	53 91%	37 97%	53 93%	51 88%	21 88%	191 92%	2 50%	2 100%	1 100%	11 92%	10 91%	30 86%	27 96%	223 91%	166 93%	88 88%	96 91%	160 91%
NOT ANSWERED	20	430	2			2	1	3	7					1		7	2	5	4	4	
VALID CASES	285	5124	46	58	38	57	58	24	207	4	2	1	12	11	35	28	246	179	100	106	175
NUMBER OF RESPONDENTS	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	CCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER HAW/ IND/ ALSK	OTH	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q35N ALWAYS	12 4%	130 3%	1 2%	2 3%	~	4 7%	4 7%	1 4%	5 2%	2 50%	~	~	~	1 9%	4 11%	2 7%	9 4%	3 2%*	7 7%	5 5%	7 4%
USUALLY	10 3%	191 4%	3 7%	1 2%	3 8%	1 2%	2 3%	~	8 4%	~	~	~	~	1 3%	~	9 4%	4 2%	5 5%	2 2%	8 5%	
SOMETIMES	42 15%	664 13%	5 11%	10 17%	8 21%	9 16%	7 12%	2 8%	33 16%	1 25%	~	~	1 8%	~	6 17%	2 7%	38 15%	27 15%	14 14%	13 12%	28 16%
NEVER	222 78%	4121 81%	37 80%	45 78%	27 71%	43 75%	45 78%	22 88%	161 78%	1 25%	2 100%	1 100%	11 92%	10 91%	25 69%	24 86%	190 77%	146 81%	73 74%	87 81%	132 75%
#NEVER + SOMETIMES (NET)	264 92%	4786 94%	42 91%	55 95%	35 92%	52 91%	52 90%	24 96%	194 94%	2 50%	2 100%	1 100%	12 100%	10 91%	31 86%	26 93%	228 93%	173 96%*	87 88%	100 93%	160 91%
TOP BOX SCORE	222 78%	4121 81%	37 80%	45 78%	27 71%	43 75%	45 78%	22 88%	161 78%	1 25%	2 100%	1 100%	11 92%	10 91%	25 69%	24 86%	190 77%	146 81%	73 74%	87 81%	132 75%
NOT ANSWERED	19	448	2			2	1	2	7							7	1	6	3	4	
VALID CASES	286	5106	46	58	38	57	58	25	207	4	2	1	12	11	36	28	246	180	99	107	175
NUMBER OF RESPONDENTS	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	CCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE		
Q350 NEVER	31 11%	298 6%*	5 11%	8 14%	4 11%	6 11%	6 11%	1 4%	21 10%	1 33%	1 50%	~	1 8%	3 27%	3 8%	5 18%	25 10%	15 8%	15 15%	17 16%*	14 8%
SOMETIMES	35 12%	693 14%	4 9%	9 16%	6 16%	6 11%	8 14%	2 8%	27 13%	1 33%	~	~	1 8%	1 9%	5 14%	3 11%	32 13%	14 8%*	19 20%*	10 10%	25 15%
USUALLY	62 22%	1328 26%	17 37%	11 19%	5 13%	14 26%	14 25%	1 4%	46 23%	~	1 50%	~	3 25%	3 27%	5 14%	4 14%	57 24%	43 24%	18 19%	24 23%	37 22%
ALWAYS	153 54%	2777 55%	20 43%	30 52%	23 61%	28 52%	29 51%	20 83%	109 54%	1 33%	~	1 100%	7 58%	4 36%	23 64%	16 57%	128 53%	106 60%*	45 46%*	54 51%	96 56%
#ALWAYS + USUALLY (NET)	215 77%	4105 81%	37 80%	41 71%	28 74%	42 78%	43 75%	21 88%	155 76%	1 33%	1 50%	1 100%	10 83%	7 64%	28 78%	20 71%	185 76%	149 84%*	63 65%*	78 74%	133 77%
TOP BOX SCORE	153 54%	2777 55%	20 43%	30 52%	23 61%	28 52%	29 51%	20 83%	109 54%	1 33%	~	1 100%	7 58%	4 36%	23 64%	16 57%	128 53%	106 60%*	45 46%*	54 51%	96 56%
NOT ANSWERED	24	459	2			5	2	3	11	1						11		3	8	5	7
VALID CASES	281	5095	46	58	38	54	57	24	203	3	2	1	12	11	36	28	242	178	97	105	172
NUMBER OF RESPONDENTS	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	CCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE		
Q35P NEVER	42 15%	592 12%	4 9%	10 18%	5 13%	10 19%	10 17%	1 4%	28 14%	2 50%	1 50%	1 ~	5 8%	4 50%	7 26%	34 14%	23 13%	18 19%	19 18%	22 13%	
SOMETIMES	46 17%	825 16%	11 24%	9 16%	9 24%	5 9%	8 14%	3 13%	32 16%	~	~	2 ~	1 17%	7 10%	4 20%	41 15%	24 17%	21 14%	13 22%	32 18%	
USUALLY	56 20%	1308 26%*	9 20%	11 19%	5 13%	11 20%	16 28%	4 17%	41 20%	1 25%	1 50%	~	2 17%	1 10%	6 17%	5 19%	51 21%	37 21%	19 20%	23 22%	33 19%
ALWAYS	134 48%	2353 46%	21 47%	27 47%	19 50%	28 52%	24 41%	15 65%	101 50%	1 25%	1 ~	7 100%	3 58%	18 30%	11 51%	116 41%	116 48%	93 53%	39 40%*	48 47%	86 50%
#ALWAYS + USUALLY (NET)	190 68%	3661 72%	30 67%	38 67%	24 63%	39 72%	40 69%	19 83%	142 70%	2 50%	1 50%	1 100%	9 75%	4 40%	24 69%	16 59%	167 69%	130 73%*	58 60%*	71 69%	119 69%
TOP BOX SCORE	134 48%	2353 46%	21 47%	27 47%	19 50%	28 52%	24 41%	15 65%	101 50%	1 25%	1 ~	7 100%	3 58%	18 30%	11 51%	116 41%	116 48%	93 53%	39 40%*	48 47%	86 50%
NOT ANSWERED	27	477	3	1		5	1	4	12				1	1	1	11	4	8	7	6	
VALID CASES	278	5077	45	57	38	54	58	23	202	4	2	1	12	10	35	27	242	177	97	103	173
NUMBER OF RESPONDENTS	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	CCC TOT ADLT	OHP TOT ADLT	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- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q35Q ALWAYS	10 4%	187 4%	1 2%	2 4%	1 3%	2 4%	3 5%	1 4%	4 2%	1 25%	~	~	~	~	1 9%	4 11%	2 7%	7 3%	3 2%	6 6%	3 3%	7 4%
USUALLY	12 4%	215 4%	5 11%	4 7%	~	~	3 5%	~	10 5%	~	~	~	~	~	~	2 6%	1 4%	11 4%	7 4%	5 5%	5 5%	7 4%
SOMETIMES	113 40%	1973 39%	22 47%	21 37%	17 45%	19 33%	22 39%	11 44%	86 42%	1 25%	1 50%	1 100%	3 25%	4 36%	11 31%	13 46%	98 40%	66 37%	46 46%	39 36%	74 42%	
NEVER	149 52%	2695 53%	19 40%	30 53%	20 53%	36 63%	29 51%	13 52%	106 51%	2 50%	1 50%	~	9 75%	6 55%	19 53%	12 43%	130 53%	102 57%*	43 43%*	60 56%	87 50%	
#NEVER + SOMETIMES (NET)	262 92%	4668 92%	41 87%	51 89%	37 97%	55 96%	51 89%	24 96%	192 93%	3 75%	2 100%	1 100%	12 100%	10 91%	30 83%	25 89%	228 93%	168 94%	89 89%	99 93%	161 92%	
TOP BOX SCORE	149 52%	2695 53%	19 40%	30 53%	20 53%	36 63%	29 51%	13 52%	106 51%	2 50%	1 50%	~	9 75%	6 55%	19 53%	12 43%	130 53%	102 57%*	43 43%*	60 56%	87 50%	
NOT ANSWERED	21	484	1	1	~	~	2 2	2 2	8	~	~	~	~	~	~	~	7	3	5	3	4	
VALID CASES	284	5070	47	57	38	57	57	25	206	4	2	1	12	11	36	28	246	178	100	107	175	
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%	

Q35R WHAT IS YOUR PREFERRED LANGUAGE?

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHER	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q35R ENGLISH	286 99%	4755 93%*	47 98%~	57 98%	36 95%~	58 100%~	58 100%~	26 100%~	210 100%	4 100%~	1 50%~	1 100%~	12 100%~	10 91%~	36 100%~	25 89%~	249 100%~	177 98%	102 99%	106 98%	176 99%
SPANISH	3 1%	169 3%*	1 2%~	1 2%	1 3%~	~	~	~	1 0.5%	~	~	~	~	1 9%~	3 11%~	~	2 1%	1 1%	1 0.9%	2 1%	
SOME OTHER LANGUAGE	1 0.3%	191 4%*	~	~	1 3%~	~	~	~	~	~	1 50%~	~	~	~	~	1 0.4%~	1 0.6%~	~	1 0.9%~	~	
NOT ANSWERED	15	438				1	1	1	3							3	1	2	2	1	
VALID CASES	290	5116	48	58	38	58	58	26	211	4	2	1	12	11	36	28	250	180	103	108	178
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	58 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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

	CCC 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-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE MALE		
Q35T NEVER	1 33%	52 22%	1 ~100%	~	~	~	~	1 ~100%	~	~	~	~	~	1 50%	1 33%	1 ~100%	~	
SOMETIMES	1 33%	51 22%	~	1 ~100%	~	~	~	~	1 ~100%	~	~	~	~	~	1 33%	1 50%	~	
USUALLY		50 22%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
ALWAYS	1 33%	77 34%	1 ~100%	~	~	~	~	~	~	~	1 ~100%	~	~	1 50%	1 33%	1 50%	~	
#ALWAYS + USUALLY (NET)	1 33%	128 55%	1 ~100%	~	~	~	~	~	~	~	1 ~100%	~	~	1 50%	1 33%	1 50%	~	
TOP BOX SCORE	1 33%	77 34%	1 ~100%	~	~	~	~	~	~	~	1 ~100%	~	~	1 50%	1 33%	1 50%	~	
NOT ANSWERED	1	20		1										1	1	1		
VALID CASES	3	230	1	1	1		1	1		1			2	1	3	2	1	
NUMBER OF RESPONDENTS	4	250	1	1	2		1	1		1			3	1	3	2	2	
	100%	100%	100%	100%	100%		100%	100%		100%			100%	100%	100%	100%	100%	

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE]

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

	CCC TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR	ASIAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE
Q35U YES		134 58%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	4 100%	98 42%	1 100%	1 100%	2 100%	~	~	1 100%	1 100%	~	1 100%	~	~	3 100%	1 100%	3 100%	1 100%	2 100%	2 100%
NOT ANSWERED		19																	
VALID CASES	4	231	1	1	2			1	1		1			3	1	3	1	2	2
NUMBER OF RESPONDENTS	4 100%	250 100%	1 100%	1 100%	2 100%			1 100%	1 100%		1 100%			3 100%	1 100%	3 100%	1 100%	2 100%	2 100%

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE]

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

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

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

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

	CCC TOT ADLT	OHP TOT ADLT	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-	AMR AS-	NATV PAC ILND	AMR IND/ ALSK	MUL-	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE
Q35W NEVER	16	16%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	27	27%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
USUALLY	21	21%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
ALWAYS	37	36%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	6																		
VALID CASES	101																		
NUMBER OF RESPONDENTS	107	100%																	

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

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

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

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

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

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

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

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

	CCC 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-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q35Z WORST INTERPRETER POSSIBLE	1	0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
05	5	6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
06	1	1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
07	7	9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
08	19	22%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
09	15	18%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
BEST INTERPRETER POSSIBLE	37	44%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
#8-10 (NET)	71	84%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
9-10 (NET)	52	62%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
VALID CASES NUMBER OF RESPONDENTS	85	85																
MEAN	8.74																	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

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

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

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

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

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

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

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

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILLND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q36 EXCELLENT	18 6%	446 9%	6 13%~	8 14%*	1 3%~	1 2%*	2 ~ 7%~	12 6%	~	~	~	~	1 10%~	4 11%~	8 30%~	10 4%~	18 10%~	~	6 6%	12 7%	
VERY GOOD	60 21%	1044 20%	16 34%~	21 36%*	8 21%~	7 13%	6 10%*	1 4%~	42 20%	~	1 50%~	3 ~ 25%~	2 20%~	8 23%~	10 37%~	47 19%~	60 33%*	~	22 20%	37 21%	
GOOD	103 36%	1716 34%	16 34%~	21 36%	17 45%~	24 44%	8 29%	8 30%~	80 38%	1 25%~	1 50%~	1 100%~	3 25%~	4 40%~	11 31%~	6 22%~	94 38%~	103 57%*	~	39 36%	63 36%
FAIR	83 29%	1325 26%	7 15%~	7 12%*	11 29%~	19 35%	24 41%*	14 52%~	64 30%	1 25%~	~	~	5 42%~	3 30%~	7 20%~	3 11%~	78 31%~	83 ~ 79%*	34 31%	48 27%	
POOR	22 8%	590 12%*	2 4%~	1 2%*	1 3%~	4 7%	11 19%*	2 7%~	12 6%	2 50%~	~	~	1 8%~	5 ~ 14%~	~	20 ~ 8%~	22 ~ 21%~	~	7 6%	15 9%	
#EXCELLENT + VERY GOOD + GOOD (NET)	181 63%	3206 63%	38 81%~	50 86%*	26 68%~	32 58%	23 40%*	11 41%~	134 64%	1 25%~	2 100%~	1 100%~	6 50%~	7 70%~	23 66%~	24 89%~	151 61%~	181 100%~	~	67 62%	112 64%
NOT ANSWERED	19	432	1			4	1		4				1	1	1	4			2	4	
VALID CASES	286	5122	47	58	38	55	58	27	210	4	2	1	12	10	35	27	249	181	105	108	175
NUMBER OF RESPONDENTS	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
	CCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q37 EXCELLENT	51 18%	724 14%	16 34%~	12 21%	7 18%~	6 10%*	4 7%*	6 22%~	33 16%	1 ~	3 ~	4 25%~	7 40%~	19 19%~	12 44%~	38 15%~	43 24%*	7 7%*	16 15%	35 20%	
VERY GOOD	66 23%	1207 24%	15 32%~	18 31%	8 21%~	8 14%*	10 18%	6 22%~	50 24%	~	1 ~	3 100%~	9 25%~	9 ~	7 26%~	57 23%~	54 30%*	12 12%*	24 22%	41 23%	
GOOD	90 31%	1578 31%	8 17%~	19 33%	9 24%~	21 36%	22 39%	10 37%~	71 33%	1 25%~	1 50%~	2 ~	3 17%~	10 30%~	10 28%~	3 11%~	84 33%~	55 30%	34 33%	44 40%*	44 25%*
FAIR	65 22%	1184 23%	7 15%~	8 14%*	10 26%~	20 34%*	16 28%	4 15%~	46 22%	2 50%~	~	3 ~	2 25%~	9 20%~	9 25%~	5 19%~	58 23%~	25 14%*	38 37%*	23 21%	42 24%
POOR	17 6%	395 8%	1 2%~	1 2%*	4 11%~	4 7%	5 9%	1 4%~	12 6%	1 25%~	~	1 ~	1 8%~	1 10%~	1 3%~	14 ~	4 6%~	13 2%*	3 12%*	14 3%*	14 8%*
#EXCELLENT + VERY GOOD + GOOD (NET)	207 72%	3509 69%	39 83%~	49 84%*	24 63%~	35 59%*	36 63%	22 81%~	154 73%	1 25%~	2 100%~	1 100%~	8 67%~	7 70%~	26 72%~	22 81%~	179 71%~	152 84%*	53 51%*	84 76%	120 68%
NOT ANSWERED	16	466	1				2		2				1		1	2		1		3	
VALID CASES	289	5088	47	58	38	59	57	27	212	4	2	1	12	10	36	27	251	181	104	110	176
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHER	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q38 #YES	125 44%	2344 47%	13 29%	19 33%	11 29%	26 45%	33 57%*	22 81%~	97 46%	1 33%	2 100%~	5 ~	4 42%~	15 44%~	6 23%~	114 46%~	72 40%	51 50%	45 41%	78 45%	
NO	161 56%	2668 53%	32 71%~	38 67%	27 71%~	32 55%	25 43%*	5 19%~	114 54%	2 67%~	1 ~100%~	7 58%~	5 56%~	21 58%~	20 77%~	136 54%~	107 60%	52 50%	65 59%	95 55%	
DON'T KNOW	4	137	3	1					1	1			2		2	2	2	2		4	
NOT ANSWERED	15	405				1	1		2						1					2	
VALID CASES	286	5013	45	57	38	58	58	27	211	3	2	1	12	9	36	26	250	179	103	110	173
NUMBER OF RESPONDENTS	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q39 EVERY DAY	89 31%	1219 24%*	11 23%~	22 38%	13 34%~	20 34%	19 33%	3 12%~	65 31%	1 25%~	~	~	3 25%~	4 36%~	11 31%~	4 14%~	79 31%~	53 29%	36 34%	36 33%	51 29%
SOME DAYS	26 9%	519 10%	4 8%~	3 5%	3 8%~	10 17%	4 7%	2 8%~	20 9%	1 ~	50%~	~	2 ~	~	3 8%~	1 4%~	25 10%~	17 9%	7 7%	12 11%	14 8%
NOT AT ALL	175 60%	3357 66%	33 69%~	33 57%	22 58%~	29 49%	35 60%	21 81%~	127 60%	3 75%~	1 50%~	1 100%~	7 58%~	7 64%~	22 61%~	23 82%~	147 59%~	110 61%	62 59%	61 56%	113 63%
DON'T KNOW		16																			
NOT ANSWERED	15	443					1	1	2							2	1		1	1	1
VALID CASES	290	5095	48	58	38	59	58	26	212	4	2	1	12	11	36	28	251	180	105	109	178
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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?

	CCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTH- R	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	POOR	MALE	FE- MALE
Q40 NEVER	25 22%	387 21%	8 53%	7 28%	4 25%	4 14%	2 9%	20 24%	~	~	~	2 40%	1 25%	2 15%	3 60%	22 22%	18 26%	7 17%	14 30%	11 17%
SOMETIMES	22 19%	442 24%	2 13%	8 32%	3 19%	4 14%	3 13%	2 40%	15 18%	1 100%	~	1 20%	~	5 38%	22 22%	15 21%	7 17%	10 22%	12 18%	
USUALLY	25 22%	333 18%	~	4 16%	2 12%	9 32%	9 39%	1 20%	22 26%	~	~	~	~	2 15%	25 25%	13 19%	11 26%	8 17%	17 26%	
ALWAYS	41 36%	687 37%	5 33%	6 24%	7 44%	11 39%	9 39%	2 40%	27 32%	1 100%	~	2 40%	3 75%	4 31%	2 40%	33 32%	24 34%	17 40%	14 30%	25 38%
#ALWAYS + USUALLY (NET)	66 58%	1020 55%	5 33%	10 40%	9 56%	20 71%	18 78%	3 60%	49 58%	1 100%	~	2 40%	3 75%	6 46%	2 40%	58 57%	37 53%	28 67%	22 48%	42 65%
TOP BOX SCORE	41 36%	687 37%	5 33%	6 24%	7 44%	11 39%	9 39%	2 40%	27 32%	1 100%	~	2 40%	3 75%	4 31%	2 40%	33 32%	24 34%	17 40%	14 30%	25 38%
NOT ANSWERED	2	37				2			1					1	2		1		2	
VALID CASES	113	1849	15	25	16	28	23	5	84	1	1	5	4	13	5	102	70	42	46	65
NUMBER OF RESPONDENTS	115	1886	15	25	16	30	23	5	85	1	1	5	4	14	5	104	70	43	48	65
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	CCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	PAN- IC	HIS- IC	NOT VERY GOOD & FAIR	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE
Q41 NEVER	64 56%	839 45%*	12 80%~	15 60%~	11 69%~	15 52%~	9 39%~	1 20%~	43 51%~	1 ~100%~	5 ~100%~	4 ~100%~	8 57%~	4 80%~	57 55%~	39 57%~	23 53%~	27 57%~	36 55%~	
SOMETIMES	20 18%	418 23%	1 7%~	5 20%~	1 6%~	7 24%~	4 17%~	2 40%~	15 18%~	~	~	~	4 29%~	1 20%~	19 18%~	12 17%~	8 19%~	10 21%~	10 15%~	
USUALLY	15 13%	263 14%	1 7%~	3 12%~	1 6%~	4 14%~	6 26%~	~	14 17%~	1 100%~	~	~	~	~	15 15%~	9 13%~	6 14%~	5 11%~	10 15%~	
ALWAYS	15 13%	327 18%	1 7%~	2 8%~	3 19%~	3 10%~	4 17%~	2 40%~	12 14%~	~	~	~	2 14%~	12 ~12%~	9 13%~	6 14%~	5 11%~	9 14%~		
#ALWAYS + USUALLY (NET)	30 26%	589 32%	2 13%~	5 20%~	4 25%~	7 24%~	10 43%~	2 40%~	26 31%~	1 100%~	~	~	2 14%~	27 26%~	18 26%~	12 28%~	10 21%~	19 29%~		
TOP BOX SCORE	15 13%	327 18%	1 7%~	2 8%~	3 19%~	3 10%~	4 17%~	2 40%~	12 14%~	~	~	~	2 14%~	12 ~12%~	9 13%~	6 14%~	5 11%~	9 14%~		
NOT ANSWERED	1	39				1			1					1	1		1			
VALID CASES	114	1847	15	25	16	29	23	5	84	1	1	5	4	14	5	103	69	43	47	65
NUMBER OF RESPONDENTS	115	1886	15	25	16	30	23	5	85	1	1	5	4	14	5	104	70	43	48	65
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q42 NEVER	67 60%	965 52%	11 79%~	12 48%~	10 62%~	20 71%~	10 43%~	3 60%~	48 59%~	1 ~100%~	4 ~80%~	2 50%~	9 64%~	5 100%~	60 59%~	43 62%~	22 54%~	30 67%~	36 55%~	
SOMETIMES	18 16%	401 22%	2 14%~	7 28%~	2 13%~	3 11%~	3 13%~	1 20%~	12 15%~	~	~	1 ~20%~	1 25%~	4 29%~	18 ~18%~	13 19%~	5 12%~	6 13%~	12 18%~	
USUALLY	15 13%	224 12%	1 7%~	2 8%~	1 6%~	3 11%~	8 35%~	~	13 16%~	~	~	~	1 ~25%~	1 7%~	15 ~15%~	7 10%~	8 20%~	5 11%~	10 15%~	
ALWAYS	12 11%	255 14%	~	4 16%~	3 19%~	2 7%~	2 9%~	1 20%~	9 11%~	1 100%~	~	~	~	~	8 ~8%~	6 9%~	6 15%~	4 9%~	7 11%~	
#ALWAYS + USUALLY (NET)	27 24%	479 26%	1 7%~	6 24%~	4 25%~	5 18%~	10 43%~	1 20%~	22 27%~	1 100%~	~	~	1 ~25%~	1 7%~	23 ~23%~	13 19%~	14 34%~	9 20%~	17 26%~	
TOP BOX SCORE	12 11%	255 14%	~	4 16%~	3 19%~	2 7%~	2 9%~	1 20%~	9 11%~	1 100%~	~	~	~	~	8 ~8%~	6 9%~	6 15%~	4 9%~	7 11%~	
NOT ANSWERED	3	40	1			2			3						3	1	2	3		
VALID CASES	112	1846	14	25	16	28	23	5	82	1	1	5	4	14	5	101	69	41	45	65
NUMBER OF RESPONDENTS	115	1886	15	25	16	30	23	5	85	1	1	5	4	14	5	104	70	43	48	65
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

Q43 DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHER	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q43 YES	81 28%	1277 25%	4 9%	7 12%*	5 14%	19 33%	28 48%*	18 67%	59 28%				4 33%	2 18%	13 36%	5 18%	72 29%	37 21%*	44 43%*	33 31%	48 27%
NO	204 72%	3806 75%	42 91%	51 88%*	32 86%	38 67%	30 52%*	9 33%	150 72%	4 100%	1 100%	1 100%	8 67%	9 82%	23 64%	23 82%	177 71%	141 79%*	59 57%*	73 69%	129 73%
DON'T KNOW	4	62	2		1				2		1						3	3	1	3	
NOT ANSWERED	16	409				2	1		3								1		1	1	2
VALID CASES	285	5083	46	58	37	57	58	27	209	4	1	1	12	11	36	28	249	178	103	106	177
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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

	CCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q44 YES	29 11%	646 14%	2 4%	3 6%	6 17%	4 8%	12 23%*	1 4%	23 12%	2 67%	~	~	1 9%	1 9%	1 3%	1 4%	27 12%	9 5%*	20 22%*	9 9%	20 12%
NO	236 89%	4029 86%	43 96%	51 94%	29 83%	47 92%	41 77%*	23 96%	171 88%	1 33%	2 100%	1 100%	10 91%	10 91%	31 97%	27 96%	201 88%	160 95%*	72 78%*	90 91%	144 88%
DON'T KNOW	22	454	2	4	3	6	5	2	15	1			1		4		20	10	12	9	12
NOT ANSWERED	18	424	1				2	1	1								5	2	1	2	3
VALID CASES	265	4675	45	54	35	51	53	24	194	3	2	1	11	11	32	28	228	169	92	99	164
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q45 YES	111 38%	2037 40%	8 17%~	11 19%*	11 29%~	25 42%	35 60%*	20 74%~	86 41%	1 25%~	~	~	3 25%~	1 9%~	16 44%~	8 29%~	100 40%~	58 32%*	53 50%*	45 41%	66 37%
NO	179 62%	3086 60%	39 83%~	47 81%*	27 71%~	34 58%	23 40%*	7 26%~	126 59%	3 75%~	2 100%~	1 100%~	9 75%~	10 91%~	20 56%~	20 71%~	151 60%~	122 68%*	52 50%*	64 59%	112 63%
NOT ANSWERED	15	431	1				1		2							2	1		1	1	
VALID CASES	290	5123	47	58	38	59	58	27	212	4	2	1	12	11	36	28	251	180	105	109	178
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
CCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q46.1 YES	67 22%	1388 25%	5 ~ 9%*	6 16%~	21 36%*	21 36%*	13 48%~	56 26%*	~	~	2 ~ 17%~	1 9%~	7 19%~	1 4%~	62 25%*	30 17%*	36 34%*	25 23%	42 23%		
NO	238 78%	4166 75%	48 100%~	53 91%*	32 84%~	38 64%*	38 64%*	14 52%~	158 74%*	4 100%~	2 100%~	1 100%~	10 83%~	10 91%~	29 81%~	27 96%~	191 75%*	151 83%*	69 66%*	85 77%	137 77%
VALID CASES	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
CCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q46.2																					
YES	99 32%	1754 32%	3 6%~	10 17%*	10 26%~	21 36%	33 56%*	21 78%~	79 37%*	2 50%~	1 50%~		4 ~ 33%~	13 ~ 36%~	2 7%~	94 37%*	46 25%*	53 50%*	42 38%	57 32%	
NO	206 68%	3800 68%	45 94%~	48 83%*	28 74%~	38 64%	26 44%*	6 22%~	135 63%*	2 50%~	1 50%~	1 100%~	8 67%~	11 100%~	23 64%~	26 93%~	159 63%*	135 75%*	52 50%*	68 62%	122 68%
VALID CASES	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
CCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q46.3																					
YES	59 19%	899 16%	6 12%	9 16%	7 18%	13 22%	18 31%*	6 22%	43 20%	1 ~ 50%	2 ~ 17%	11 ~ 31%	3 11%	53 21%	34 19%	25 24%	20 18%	39 22%			
NO	246 81%	4655 84%	42 88%	49 84%	31 82%	46 78%	41 69%*	21 78%	171 80%	4 100%	1 50%	1 100%	10 83%	11 100%	25 69%	25 89%	200 79%	147 81%	80 76%	90 82%	140 78%
VALID CASES	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q47.1 YES	186%	3005%	1~	2%*	3~	105%	415%*	115%	~	~	1~	8%~	5~	14%~	17~	7%	63%*	1211%*	109%	84%	
NO	28794%	525495%	48100%~	5798%*	38100%~	5695%	4983%*	2385%~	20395%	4100%	2100%	1100%	1192%	31100%	2886%~	236100%	17597%*	9389%*	10091%	17196%	
VALID CASES	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
NUMBER OF RESPONDENTS	305100%	5554100%	48100%	58100%	38100%	59100%	59100%	27100%	214100%	4100%	2100%	1100%	12100%	11100%	36100%	28100%	253100%	181100%	105100%	110100%	179100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLACK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHER	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q47.2	CCC TOT ADLT	18	25	35	45	55	65															
YES	OHP TOT ADLT	20	35	1	5	11	3	14				3		2		18	6	14	7	13		
		7%	6%	~	~	3%~	8%	7%	~	~	~	25%~	~	6%~	~	7%	3%*	13%*	6%	7%		
NO	OHP TOT ADLT	285	5219	48	58	37	54	48	24	200	4	2	1	9	11	34	28	235	175	91	103	166
		93%	94%	100%~	100%~	97%~	92%	81%*	89%~	93%	100%~	100%~	100%~	75%~	100%~	94%~	100%~	93%	97%*	87%*	94%	93%
VALID CASES	OHP TOT ADLT	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
NUMBER OF RESPONDENTS	OHP TOT ADLT	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE			
Q47.3	CCC TOT ADLT	21	295																			
YES	OHP TOT ADLT	7%	5%	~	~	2 5%	8 14%	8 14%	3 11%	15 7%	~	~	2 17%	~	2 6%	1 4%	17 7%	8 4%	13 12%*	9 8%	12 7%	
NO	CCC TOT ADLT	284	5259	48	58	36	51	51	24	199	4	2	1	10	11	34	27	236	173	92	101	167
	OHP TOT ADLT	93%	95%	100%	100%	~ 95%	~ 86%	~ 86%	~ 89%	93%	100%	~ 100%	~ 100%	~ 83%	~ 100%	~ 94%	~ 96%	~ 93%	96%	88%*	92%	93%
VALID CASES	CCC TOT ADLT	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
NUMBER OF RESPONDENTS	OHP TOT ADLT	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER				
CCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE			
Q47.4 YES	53 17%	1125 20%	2 4%	7 ~	11 18%	20 19%	12 34%*	43 20%*	1 25%	~	1 ~	7 8%	~	19%~	52 ~	24 13%*	28 27%*	18 16%	35 20%		
NO	252 83%	4429 80%	46 96%~	58 100%~	31 82%~	48 81%	39 66%*	15 56%~	171 80%*	3 75%~	2 100%~	1 100%~	11 92%~	11 100%~	29 81%~	28 100%~	201 79%*	157 87%*	77 73%*	92 84%	144 80%
VALID CASES	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
CCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q48 YES	93 32%	1783 35%	6 12%	12 21%*	12 32%	27 47%*	27 46%*	8 31%	72 34%	1 25%	~	~	4 33%	2 18%	12 33%	4 14%	85 34%	43 24%*	47 46%*	31 29%	61 34%
NO	194 68%	3302 65%	42 88%	46 79%*	26 68%	30 53%*	32 54%*	18 69%	139 66%	3 75%	2 100%	1 100%	8 67%	9 82%	24 67%	24 86%	167 66%	136 76%*	56 54%*	77 71%	117 66%
NOT ANSWERED	18	469			2		1	3								1	2	2	2	1	
VALID CASES	287	5085	48	58	38	57	59	26	211	4	2	1	12	11	36	28	252	179	103	108	178
NUMBER OF RESPONDENTS	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	MALE	FE- MALE		
Q49 YES	77 89%	1476 87%	5 83%	9 75%	11 92%	24 92%	22 92%	5 83%	62 93%	~	~	~	3 75%	1 100%	9 75%	3 75%	71 90%	36 86%	38 90%	25 89%	51 88%	
NO	10 11%	228 13%	1 17%	3 25%	1 8%	2 8%	2 8%	1 17%	5 7%	1 100%	~	~	1 25%	3 25%	3 25%	8 10%	1 14%	8 10%	6 11%	4 12%	3 11%	7 12%
NOT ANSWERED	6	88				1	3	2	5				1			6	1	5	3	3		
VALID CASES	87	1703	6	12	12	26	24	6	67	1			4	1	12	4	79	42	42	28	58	
NUMBER OF RESPONDENTS	93 100%	1791 100%	6 100%	12 100%	12 100%	27 100%	27 100%	8 100%	72 100%	1 100%			4 100%	2 100%	12 100%	4 100%	85 100%	43 100%	47 100%	31 100%	61 100%	

[ASKED IF Q48 = YES]

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

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN AMER	NATV HAW/ PAC LLND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & POOR	FAIR & POOR	MALE	FE- MALE	
Q50 YES	185 65%	3492 68%	12 26%~	18 31%*	24 63%~	48 86%*	56 95%*	26 96%~	145 69%*	2 50%~	1 50%~	1 100%~	6 50%~	5 45%~	21 58%~	8 29%~	169 68%~	94 53%*	87 85%*	69 64%	115 65%
NO	100 35%	1617 32%	34 74%~	40 69%*	14 37%~	8 14%*	3 5%*	1 4%~	64 31%*	2 50%~	1 50%~		6 ~ 50%~	6 55%~	15 42%~	20 71%~	80 32%~	84 47%*	15 15%*	39 36%	61 35%
NOT ANSWERED	20	446	2			3			5							4	3	3	2	3	
VALID CASES	285	5108	46	58	38	56	59	27	209	4	2	1	12	11	36	28	249	178	102	108	176
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q51 YES	163 96%	3137 94%	9 75%	18 100%	19 95%	43 96%	51 98%	22 100%	129 95%	2 100%	1 100%	1 100%	5 100%	4 100%	17 100%	6 86%	151 97%	81 94%	78 98%	60 97%	102 95%
NO	7 4%	193 6%	3 25%	~	1 5%	2 4%	1 2%	~	7 5%	~	~	~	~	~	~	1 14%	5 3%	5 6%	2 3%	2 3%	5 5%
NOT ANSWERED	15	173			4	3	4	4	9				1	1	4	1	13	8	7	7	8
VALID CASES	170	3330	12	18	20	45	52	22	136	2	1	1	5	4	17	7	156	86	80	62	107
NUMBER OF RESPONDENTS	185 100%	3503 100%	12 100%	18 100%	24 100%	48 100%	56 100%	26 100%	145 100%	2 100%	1 100%	1 100%	6 100%	5 100%	21 100%	8 100%	169 100%	94 100%	87 100%	69 100%	115 100%

[ASKED IF Q50 = YES]

NQ52 WHAT IS YOUR AGE?

	CCC 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- WHT	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
NQ52																					
18 TO 24	50 16%	872 16%	48 100%~	~	~	~	~	34 16%	1 25%~	~	~	~	4 36%~	5 14%~	11 39%~	36 14%	38 21%*	10 10%*	22 20%	26 15%	
25 TO 34	63 21%	867 16%*	~	58 ~100%~	~	~	~	38 18%	~	~	~	6 50%~	1 9%	12 33%~	9 32%~	47 19%	50 28%*	8 8%*	17 15%	40 22%	
35 TO 44	40 13%	843 15%	~	~	38 ~100%~	~	~	26 12%	1 25%~	1 50%~	~	1 8%~	2 18%~	6 17%~	3 11%~	35 14%	27 15%	12 11%	11 10%	27 15%	
45 TO 54	61 20%	1055 19%	~	~	~	59 ~100%~	~	48 22%	~	1 50%~	~	2 ~17%~	2 18%~	4 11%~	2 7%~	53 21%	32 18%	23 22%	27 25%	32 18%	
55 TO 64	61 20%	1061 19%	~	~	~	~	59 ~100%~	47 22%	1 25%~	~	1 ~100%~	2 17%~	2 18%~	4 11%~	1 4%~	57 23%*	23 13%*	35 33%*	24 22%	35 20%	
65 TO 74	20 7%	478 9%	~	~	~	~	~	17 7%	~	~	~	~	~	4 ~11%~	1 4%~	16 6%	6 3%*	12 11%*	6 5%	12 7%	
75 OR OLDER	10 3%	377 7%*	~	~	~	~	~	10 3%	7 25%~	1 ~	~	1 8%~	~	1 3%~	9 4%~	5 4%	5 3%	5 5%	3 3%	7 4%	
VALID CASES	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
NUMBER OF RESPONDENTS	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

NQ53 ARE YOU MALE OR FEMALE?

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
CCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
NQ53 MALE	115 38%	2022 36%	22 46%~	18 31%	11 29%~	27 46%	24 41%	8 30%~	89 42%*	1 ~	1 50%~	4 ~	12 8%	12 36%~	33 33%~	8 29%~	98 39%	69 38%	41 39%	110 100%~	~
FEMALE	190 62%	3532 64%	26 54%~	40 69%	27 71%~	32 54%	19 59%	125 70%~	4 58%*100%~	1 50%~	1 100%~	11 92%~	7 64%~	24 67%~	20 71%~	155 61%	112 62%	64 61%	179 ~100%~		
VALID CASES	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

[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?

	CCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q54																					
8TH GRADE OR LESS	16 6%	280 5%	1 2%	2 3%	2 5%	3 5%	1 2%*	6 22%	12 6%	1 25%	~	~	~	1 10%	1 3%	3 11%	12 5%	6 3%	10 10%*	9 8%	6 3%
SOME HIGH SCHOOL BUT DID NOT GRADUATE	49 17%	804 16%	4 9%	9 16%	8 22%	14 24%	10 17%	4 15%	33 16%	1 50%	~	~	1 8%	2 20%	7 19%	3 11%	42 17%	25 14%	23 22%	19 17%	30 17%
HIGH SCHOOL GRADUATE OR GED	113 40%	1985 39%	26 57%	21 36%	9 24%	19 32%	27 47%	11 41%	84 40%	2 50%	~	1 100%	7 58%	5 50%	12 33%	11 41%	99 40%	72 40%	41 40%	51 47%*	62 35%
SOME COLLEGE OR 2-YEAR DEGREE	91 32%	1653 32%	14 30%	21 36%	16 43%	17 29%	17 29%	6 22%	68 32%	1 25%	1 50%	~	4 33%	1 10%	14 39%	6 22%	84 34%	62 35%	25 24%*	24 22%*	67 38%*
4-YEAR COLLEGE GRADUATE	12 4%	237 5%	1 2%	3 5%	2 5%	3 5%	3 5%	~	9 4%	~	~	~	~	1 10%	2 6%	3 11%	9 4%	10 6%	2 2%	5 5%	7 4%
MORE THAN 4-YEAR COLLEGE DEGREE	5 2%	145 3%	~	2 3%	~	3 5%	~	~	5 2%*	~	~	~	~	~	~	1 4%	4 2%	3 2%	2 2%	1 0.9%	4 2%
NOT ANSWERED	19	450	2	~	1	~	1	~	3	~	~	~	~	1	1	3	3	2	1	3	
VALID CASES	286	5104	46	58	37	59	58	27	211	4	2	1	12	10	36	27	250	178	103	109	176
NUMBER OF RESPONDENTS	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q55 ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?

	CCC TOT ADULT	OHP TOT ADULT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q55																					
YES HISPANIC OR LATINO	28 10%	549 11%	11 23%~	9 16%	3 8%~	2 4%*	1 2%*	2 8%~	7 3%*	~	~	~	1 8%~	7 70%~	7 19%~	28 100%~	~	24 14%*	3 3%*	8 8%	20 11%
NO NOT HISPANIC OR LATINO	253 90%	4520 89%	36 77%~	47 84%	35 92%~	53 96%*	57 98%*	24 92%~	201 97%*	4 100%~	2 100%~	1 100%~	11 92%~	3 30%~	29 81%~	253 100%~	151 86%*	98 97%*	98 92%	155 89%	
NOT ANSWERED	24	485	1	2		4	1	1	6					1			6	4	4	4	
VALID CASES	281	5069	47	56	38	55	58	26	208	4	2	1	12	10	36	28	253	175	101	106	175
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

Q56.1 WHAT IS YOUR RACE? RESPONSE: WHITE

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
CCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q56.1 YES	247 81%	4288 77%	37 77%	49 84%	32 84%	52 88%	51 86%	25 93%	214 100%	~	~	~	~	~	33 92%	12 43%	229 91%*	155 86%*	87 83%	98 89%*	148 83%
NO	58 19%	1266 23%	11 23%	9 16%	6 16%	7 12%	8 14%	2 7%	4 ~100%	2 ~100%	1 ~100%	12 ~100%	11 ~100%	3 8%	16 57%	24 9%*	26 14%*	18 17%	12 11%*	31 17%	
VALID CASES	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
CCC 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	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q56.2 YES	8 3%	207 4%	1 2%	2 3%	2 5%	1 2%	2 7%	4 ~100%	~	~	~	~	4 ~11%	2 7%	6 2%	3 2%	5 5%	2 2%	6 3%		
NO	297 97%	5347 96%	47 98%	56 97%	36 95%	59 100%	58 98%	25 93%	214 100%	2 100%	1 100%	12 100%	11 100%	32 89%	26 93%	247 98%	178 98%	100 95%	108 98%	173 97%	
VALID CASES	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

Q56.3 WHAT IS YOUR RACE? RESPONSE: ASIAN

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
CCC 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-	WHTE AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
Q56.3 YES	7 2%	238 4%*	2 4%~	3 5%	1 3%~	1 2%	~	~	~	2 ~100%~	~	~	5 ~14%~	1 4%~	6 2%	6 3%	1 1%	3 3%	4 2%		
NO	298 98%	5316 96%*	46 96%~	55 95%	37 97%~	58 98%	27 100%~	214 100%~	4 100%~	~	1 ~100%~	12 ~100%~	11 ~100%~	31 86%~	27 96%~	247 98%	175 97%	104 99%	107 97%	175 98%	
VALID CASES	305	5554	48	58	38	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179	
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%	

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE			
Q56.4	CCC TOT ADLT	6	38	2	1	1	2			1		5	2	4	5	1	3	3				
YES	OHP TOT ADLT	2%	0.7%	4%~	2%	3%~	~ 3%	~	~	~100%~	~	~ 14%~	7%~	2%	3%	1%	3%	2%				
NO	CCC TOT ADLT	299	5516	46	57	37	59	57	27	214	4	2	12	11	31	26	249	176	104	107	176	
	OHP TOT ADLT	98%	99%	96%~	98%	97%~	100%~	97%	100%	100%~	100%~	100%~	~100%~	100%~	86%~	93%~	98%	97%	99%	97%	98%	
VALID CASES	CCC TOT ADLT	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
NUMBER OF RESPONDENTS	OHP TOT ADLT	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
CCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q56.5 YES	30 10%	410 7%	2 4%	11 19%*	4 11%	5 8%	5 8%	3 11%	~	~	~	~	12 ~100%	18 ~50%	2 7%	28 11%*	14 8%	15 14%	7 6%	23 13%*	
NO	275 90%	5144 93%	46 96%	47 81%*	34 89%	54 92%	24 89%	214 100%	4 100%	2 100%	1 100%	11 ~100%	18 50%	26 93%	225 89%*	167 92%	90 86%	103 94%	156 87%*		
VALID CASES	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

Q56.6 WHAT IS YOUR RACE? RESPONSE: OTHER

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
CCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q56.6 YES	26 9%	323 6%	6 12%	7 12%	3 8%	4 7%	4 7%	2 7%	~	~	~	~	11 ~100%	15 42%	13 46%	12 5%*	19 10%	6 6%	9 8%	17 9%	
NO	279 91%	5231 94%	42 88%	51 88%	35 92%	55 93%	25 93%	214 100%	4 100%	2 100%	1 100%	12 100%	21 ~ 58%	15 54%	241 95%*	162 90%	99 94%	101 92%	162 91%		
VALID CASES	305	5554	48	58	38	59	59	27	214	4	2	1	12	11	36	28	253	181	105	110	179
NUMBER OF RESPONDENTS	305 100%	5554 100%	48 100%	58 100%	38 100%	59 100%	59 100%	27 100%	214 100%	4 100%	2 100%	1 100%	12 100%	11 100%	36 100%	28 100%	253 100%	181 100%	105 100%	110 100%	179 100%

Q57 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
CCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q57 YES	29 14%	778 19%*	6 21%~	4 12%~	3 11%~	5 11%~	5 9%	5 22%~	22 14%	1 33%~	~	~	~	1 10%~	5 29%~	1 7%~	28 15%~	16 13%	13 15%	21 27%*	8 6%*
NO	183 86%	3221 81%*	22 79%~	29 88%~	25 89%~	41 89%~	48 91%	18 78%~	139 86%	2 67%~	2 100%~	1 100%~	10 90%~	9 71%~	12 93%~	14 93%~	161 85%~	106 87%	71 85%	58 73%*	124 94%*
NOT ANSWERED	3	98				1		1								1	1	1	1		
VALID CASES	212	3999	28	33	28	46	53	23	161	3	2	1	10	10	17	15	189	122	84	79	132
NUMBER OF RESPONDENTS	215 100%	4097 100%	28 100%	33 100%	28 100%	47 100%	53 100%	23 100%	162 100%	3 100%	2 100%	1 100%	10 100%	10 100%	17 100%	15 100%	190 100%	123 100%	85 100%	80 100%	132 100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q58.1 YES	18 62%	312 49%	2 33%	4 100%	1 33%	3 60%	5 100%	3 60%	14 64%					1 ~100%	3 60%	1 100%	17 61%	10 62%	8 62%	13 62%	5 63%
NO	11 38%	325 51%	4 67%		2 ~67%	2 40%	2 ~40%	8 36%	1 100%						2 40%		11 39%	6 38%	5 38%	8 38%	3 38%
VALID CASES	29	637	6	4	3	5	5	5	22	1				1	5	1	28	16	13	21	8
NUMBER OF RESPONDENTS	29 100%	637 100%	6 100%	4 100%	3 100%	5 100%	5 100%	5 100%	22 100%	1 100%				1 100%	5 100%	1 100%	28 100%	16 100%	13 100%	21 100%	8 100%

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

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q58.2																				
YES	16 55%	277 43%	2 33%	2 50%	5 ~100%	5 ~100%	2 40%	13 59%	~	~	~	~	1 ~100%	2 40%	~	16 57%	8 50%	8 62%	14 67%	2 25%
NO	13 45%	360 57%	4 67%	2 50%	3 ~100%	~	3 ~60%	9 41%	1 ~100%	~	~	~	3 ~60%	1 ~100%	12 43%	8 50%	5 38%	7 33%	6 75%	
VALID CASES	29	637	6	4	3	5	5	22	1				1	5	1	28	16	13	21	8
NUMBER OF RESPONDENTS	29	637	6	4	3	5	5	22	1				1	5	1	28	16	13	21	8
	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

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

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

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK NATV	OTHER	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q58.3 YES	8 28%	225 35%	2 33%	3 100%	1 20%	1 20%	7 32%	~	~	~	~	~	1 20%	~	8 29%	6 38%	2 15%	6 29%	2 25%	
NO	21 72%	412 65%	4 67%	4 100%	5 100%	4 80%	4 80%	15 68%	1 100%	~	~	~	1 100%	4 80%	1 71%	20 62%	11 85%	15 71%	6 75%	
VALID CASES	29	637	6	4	3	5	5	22	1				1	5	1	28	16	13	21	8
NUMBER OF RESPONDENTS	29 100%	637 100%	6 100%	4 100%	3 100%	5 100%	5 100%	22 100%	1 100%				1 100%	5 100%	1 100%	28 100%	16 100%	13 100%	21 100%	8 100%

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

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

	CCC TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK NATV OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE		
Q58.4 YES		83 13%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NO	29 100%	554 87%	6 100%	4 100%	3 100%	5 100%	5 100%	5 100%	22 100%	1 100%	~	~	~	1 100%	5 100%	1 100%	28 100%	16 100%	13 100%	21 100%	8 100%
VALID CASES	29	637	6	4	3	5	5	5	22	1				1	5	1	28	16	13	21	8
NUMBER OF RESPONDENTS	29 100%	637 100%	6 100%	4 100%	3 100%	5 100%	5 100%	5 100%	22 100%	1 100%				1 100%	5 100%	1 100%	28 100%	16 100%	13 100%	21 100%	8 100%

[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		
CCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q58.5 YES	2 7%	59 9%	2 33%	~	~	~	~	1 5%	~	~	~	~	1 20%	~	2 7%	1 6%	1 8%	1 5%	1 13%	
NO	27 93%	578 91%	4 67%	4 100%	3 100%	5 100%	5 100%	5 95%	1 100%	~	~	~	1 100%	4 80%	1 100%	26 93%	15 94%	12 92%	20 95%	7 88%
VALID CASES	29	637	6	4	3	5	5	5	22	1			1	5	1	28	16	13	21	8
NUMBER OF RESPONDENTS	29	637	6	4	3	5	5	5	22	1			1	5	1	28	16	13	21	8
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

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

NQ13 RATING OF ALL HEALTH CARE

	CCC TOT ADLT	OHP TOT ADLT	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- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	MALE	FE- MALE		
NQ13 0-6	66 30%	821 21%*	8 28%~	9 25%~	11 35%~	18 43%~	13 28%~	6 25%~	51 31%	2 100%~	~	2 29%~	3 43%~	7 28%~	3 15%~	60 33%~	27 22%*	36 42%*	24 32%	41 31%		
7-8	69 32%	1319 34%	11 38%~	15 42%~	10 32%~	11 26%~	14 30%~	4 17%~	53 33%	1 100%~	~	2 29%~	3 43%~	5 20%~	6 30%~	59 32%~	40 33%	24 28%	29 38%	36 27%		
9-10	82 38%	1746 45%*	10 34%~	12 33%~	10 32%~	13 31%~	20 43%~	14 58%~	59 36%	~	~	3 43%~	1 14%~	13 52%~	11 55%~	64 35%~	53 44%*	25 29%*	23 30%	56 42%		
VALID CASES	217	3886	29	36	31	42	47	24	163	2	1	7	7	25	20	183	120	85	76	133		
NUMBER OF RESPONDENTS	217 100%	3886 100%	29 100%	36 100%	31 100%	42 100%	47 100%	24 100%	163 100%	2 100%	1 100%	7 100%	7 100%	25 100%	20 100%	183 100%	120 100%	85 100%	76 100%	133 100%		
MEAN	2.07	2.24	2.07	2.08	1.97	1.88	2.15	2.33	2.05	1.00	2.00	2.14	1.71	2.24	2.40	2.02	2.22	1.87	1.99	2.11		
p stat_(*=Sig @ p<=.05)		.002*	~	~	~	~	~	~	.448	~	~	~	~	~	~	~	.005*	.004*	.249	.376		

[ASKED IF Q7 >= 1 TIME]

NQ23 RATING OF PERSONAL DOCTOR

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
NQ23 0-6	42 20%	644 16%	3 10%	10 29%	7 26%	10 22%	7 15%	1 5%	30 19%	1 50%	~	~	2 25%	1 17%	5 19%	1 6%	37 21%	16 13%*	21 28%*	16 22%	22 17%
7-8	53 25%	927 23%	12 41%	9 26%	2 7%	12 26%	14 30%	3 16%	42 27%	~	~	~	1 13%	1 17%	5 19%	5 28%	45 25%	34 27%	18 24%	25 34%*	27 21%
9-10	114 55%	2413 61%	14 48%	15 44%	18 67%	24 52%	26 55%	15 79%	83 54%	1 50%	~	~	5 63%	4 67%	17 63%	12 67%	95 54%	74 60%	35 47%	32 44%*	80 62%*
VALID CASES	209	3984	29	34	27	46	47	19	155	2			8	6	27	18	177	124	74	73	129
NUMBER OF RESPONDENTS	209 100%	3984 100%	29 100%	34 100%	27 100%	46 100%	47 100%	19 100%	155 100%	2 100%			8 100%	6 100%	27 100%	18 100%	177 100%	124 100%	74 100%	73 100%	129 100%
MEAN	2.34	2.44	2.38	2.15	2.41	2.30	2.40	2.74	2.34	2.00			2.38	2.50	2.44	2.61	2.33	2.47	2.19	2.22	2.45
p stat_(*=Sig @ p<=.05)		.061	~	~	~	~	~	~	.938	~	~	~	~	~	~	~	~	.009*	.037*	.097	.015*

[ASKED IF Q15 = YES]

NQ27 RATING OF SPECIALIST SEEN MOST OFTEN

	CCC TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
NQ27 0-6	13 15%	230 13%	2 ~ 18%	3 ~ 25%	5 ~ 22%	2 ~ 10%	11 ~ 17%	~	~	1 ~ 33%	1 ~ 10%	1 25%	12 15%	4 9%	7 19%	5 19%	8 14%		
7-8	17 20%	475 27%	2 ~ 18%	4 ~ 33%	6 ~ 26%	3 ~ 14%	2 ~ 18%	12 18%	~	~	1 ~ 33%	3 ~ 30%	16 ~ 20%	5 11%	12 32%	8 31%	9 16%		
9-10	56 65%	1078 60%	5 100%	7 ~ 64%	5 ~ 42%	12 ~ 52%	16 ~ 76%	9 ~ 82%	43 65%	2 100%	1 ~ 100%	1 ~ 33%	6 ~ 60%	3 75%	51 65%	35 80%	18 49%	13 50%	41 71%
VALID CASES	86	1782	5	11	12	23	21	11	66	2	1	3	10	4	79	44	37	26	58
NUMBER OF RESPONDENTS	86 100%	1782 100%	5 100%	11 100%	12 100%	23 100%	21 100%	11 100%	66 100%	2 100%	1 100%	3 100%	10 100%	4 100%	79 100%	44 100%	37 100%	26 100%	58 100%
MEAN	2.50	2.48	3.00	2.45	2.17	2.30	2.67	2.82	2.48	3.00	3.00	2.00	2.50	2.50	2.49	2.70	2.30	2.31	2.57
p stat_(*=Sig @ p<=.05)		.767	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

NQ35 RATING OF HEALTH PLAN

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN AMER	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
NQ35 0-6	90 33%	1152 23%*	12 29%~	18 34%	15 43%~	23 43%	17 30%	4 18%~	67 34%	2 50%~	1 100%~	1 100%~	2 20%~	4 36%~	11 34%~	8 30%~	79 34%~	52 32%	37 37%	32 32%	58 36%
7-8	102 38%	1595 32%	20 48%~	25 47%	14 40%~	17 31%	18 32%	4 18%~	75 38%	1 25%~	~	~	3 30%~	3 27%~	12 38%~	8 30%~	88 38%~	60 37%	38 38%	41 41%	56 34%
9-10	78 29%	2187 44%*	10 24%~	10 19%*	6 17%~	14 26%	22 39%	14 64%~	54 28%	1 25%~	~	~	5 50%~	4 36%~	9 28%~	11 41%~	63 27%~	50 31%	24 24%	27 27%	49 30%
VALID CASES	270	4933	42	53	35	54	57	22	196	4	1	1	10	11	32	27	230	162	99	100	163
NUMBER OF RESPONDENTS	270 100%	4933 100%	42 100%	53 100%	35 100%	54 100%	57 100%	22 100%	196 100%	4 100%	1 100%	1 100%	10 100%	11 100%	32 100%	27 100%	230 100%	162 100%	99 100%	100 100%	163 100%
MEAN	1.96	2.21	1.95	1.85	1.74	1.83	2.09	2.45	1.93	1.75	1.00	1.00	2.30	2.00	1.94	2.11	1.93	1.99	1.87	1.95	1.94
p stat_(*=Sig @ p<=.05)		.000*	~.244		~.206	.174		~.470	~	~	~	~	~	~	~	~	~	~.415	.168	.929	.781

NQ35Z RATING OF INTERPRETER

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

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

GETTING NEEDED CARE

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	FE- MALE	MALE
NPRBSEE4 NQ25	2.16	2.27	2.33	2.36	1.86	2.00	2.16	2.67	2.20	3.00	1.00	1.67	1.91	2.50	2.15	2.35	1.95	2.17	2.16	
p stat_(*=Sig @ p<=.05)		.203	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCARNES4 NQ14	2.26	2.31	2.24	2.28	2.06	2.17	2.32	2.57	2.27	1.00	3.00	2.29	2.00	2.44	2.35	2.25	2.39	2.08	2.35	2.21
p stat_(*=Sig @ p<=.05)		.283	~	~	~	~	~	~	.762	~	~	~	~	~	~	~	.008*	.013*	.230	.295
COMPOSITE	2.21	2.29	2.29	2.32	1.96	2.08	2.24	2.62	2.23	2.00	2.00	x 1.98	2.00	2.17	2.42	2.20	2.37	2.02	2.26	2.18
p stat_(*=Sig @ p<=.05)		.531	~	~	~	~	~	~	.712	~	~	~	~	~	~	~	.194	.261	.790	.842

GETTING CARE QUICKLY

		AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
	CCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT VERY GOOD & POOR	EX & FAIR & POOR	FE- MALE	MALE	
NCARSN4 NQ4	2.21	2.38	2.06	2.00	2.35	2.18	2.44	2.71	2.19	3.00	2.50	2.50	2.00	2.40	2.14	2.25	2.33	2.13	2.18	2.29	
p stat_(*=Sig @ p<=.05)		.035*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NAPGET4 NQ6	2.21	2.29	2.23	2.10	2.10	2.26	2.35	2.46	2.28	3.00	3.00	2.00	1.83	2.13	2.00	2.24	2.34	2.02	2.22	2.22	
p stat_(*=Sig @ p<=.05)		.196	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.015*	.026*	.952	.870	
COMPOSITE	2.21	2.33	2.14	2.05	2.23	2.22	2.40	2.59	2.24	3.00	2.75	x	2.25	1.92	2.27	2.07	2.24	2.34	2.07	2.20	2.25
p stat_(*=Sig @ p<=.05)		.421	~	~	~	~	~	~	.835	~	~	~	~	~	~	~	~	.345	.500	.943	.751

HOW WELL DOCTORS COMMUNICATE

	CCC TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER					
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE		
NDREXPL4 NQ17	2.55	2.60	2.59	2.67	2.26	2.56	2.56	2.75	2.52	1.50	3.00		2.71	3.00	2.68	2.64	2.52	2.69	2.39	2.56	2.54	
p stat_(*=Sig @ p<=.05)		.340	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.008*	.021*	.852	.908	
NDRLSTN4 NQ18	2.49	2.57	2.71	2.42	2.30	2.50	2.56	2.69	2.47	2.00	3.00		2.57	2.67	2.64	2.71	2.48	2.64	2.32	2.46	2.54	
p stat_(*=Sig @ p<=.05)		.121	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.005*	.020*	.724	.242
NDRESPU4 NQ19	2.52	2.65	2.71	2.71	2.32	2.40	2.59	2.69	2.50	2.00	3.00		2.43	2.67	2.76	2.77	2.50	2.67	2.34	2.45	2.58	
p stat_(*=Sig @ p<=.05)		.023*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.004*	.013*	.378	.191
NDRTMEN4 NQ20	2.34	2.46	2.47	2.43	2.19	2.17	2.46	2.62	2.36	2.00	2.00		2.17	2.33	2.41	2.62	2.32	2.48	2.19	2.37	2.36	
p stat_(*=Sig @ p<=.05)		.046*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.016*	.052	.748	.760
COMPOSITE	2.47	2.57	2.62	2.56	2.27	2.41	2.54	2.69	2.46	1.88	2.75	x	2.47	2.67	2.62	2.69	2.46	2.62	2.31	2.46	2.50	
p stat_(*=Sig @ p<=.05)		.669	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.528	.582	.966	.874

CUSTOMER SERVICE

	CCC TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NPBCLCS4 NQ31	2.06	2.14	1.86	2.13	2.00	2.20	2.17	1.67	2.03	3.00				1.67	2.50	2.12	2.07	1.88	2.11	2.00
p stat_(*=Sig @ p<=.05)		.532	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ32	2.58	2.59	2.50	2.50	2.33	2.55	2.92	2.00	2.62	3.00				2.67	2.40	2.62	2.67	2.44	2.60	2.55
p stat_(*=Sig @ p<=.05)		.875	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.32	2.37	2.18	2.31	2.17	2.37	2.54	1.83	2.32	3.00	x	x	x	2.17	2.45	2.37	2.37	2.16	2.35	2.27
p stat_(*=Sig @ p<=.05)		.891	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE		
NRXWHY NQ10	2.34	2.23	2.11	2.25	2.45	2.30	2.41	2.33	2.29	3.00			2.33	3.00	2.46	2.00	2.34	2.46	2.24	2.22	2.41
p stat_(*=Sig @ p<=.05)		.129	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.106	.225	~	~
NRXWYNT NQ11	1.86	1.87	1.56	1.87	1.90	1.97	1.81	2.00	1.86	3.00			2.33	2.00	1.69	1.50	1.86	1.91	1.82	1.92	1.86
p stat_(*=Sig @ p<=.05)		.861	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.494	.649	~	~
NRXBST NQ12	2.44	2.44	2.78	2.62	2.40	2.17	2.56	2.11	2.39	3.00			2.33	2.00	2.54	2.00	2.43	2.47	2.40	2.55	2.36
p stat_(*=Sig @ p<=.05)		.959	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.683	.691	~	~
COMPOSITE	2.21	2.18	2.15	2.25	2.25	2.15	2.26	2.15	2.18	3.00	x	x	2.33	2.33	2.23	1.83	2.21	2.28	2.15	2.23	2.21
p stat_(*=Sig @ p<=.05)		.910	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.809	.853	~	~

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

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	OTHER	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE	
PRBSEE4 Q25	71%	78%	83%	82%	57%	63%	72%	92%	73%	100%	0%		33%		64%	75%	70%	80%	59%	63%	75%
CARNES4 Q14	77%	82%	83%	83%	68%	67%	81%	83%	77%	0%	100%		71%	71%	92%	75%	77%	85%	67%	80%	75%
AVERAGE	74.0	79.8	83.0	82.6	62.4	64.6	76.4	87.1	74.8	x	x	x	71.4	71.4	77.8	75.0	73.8	82.7	63.1	71.7	74.9

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

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE	
CARSN4 Q4	76%	82%	71%	57%	88%	73%	88%	100%	75%	100%	100%		75%	67%	87%	71%	78%	83%	70%	74%	79%
APGET4 Q6	71%	79%	77%	65%	70%	68%	79%	77%	74%	100%	100%		57%	50%	74%	63%	72%	77%	61%	69%	73%
AVERAGE	73.5	80.1	73.8	60.8	79.1	70.6	83.7	88.5	74.5	x	x	x	66.1	50.0	80.3	67.3	75.2	79.8	65.4	71.6	76.3

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

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
DREXPL4 Q17	87%	92%	88%	96%	65%	85%	93%	94%	86%	50%	100%		86%	100%	95%	86%	87%	91%	83%	91%	85%
DRLSTN4 Q18	84%	89%	94%	87%	70%	85%	88%	94%	84%	50%	100%		86%	100%	91%	93%	84%	90%	78%	84%	86%
DRESPU4 Q19	85%	91%	100%	96%	68%	78%	88%	94%	84%	50%	100%		71%	100%	95%	92%	84%	91%	76%	86%	85%
DRTMEN4 Q20	80%	86%	94%	91%	67%	72%	83%	94%	81%	50%	100%		67%	100%	82%	92%	79%	87%	73%	82%	80%
AVERAGE	84.3	89.3	94.1	92.6	67.4	80.1	87.8	93.8	83.8	x	x	x	77.4	x	90.9	90.8	83.3	89.8	77.6	85.9	83.8

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

	CCC TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER					
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE				
PBCLCS4 Q31	63%	73%	50%	63%	67%	70%	75%	33%	64%	100%						33%	75%	33%	68%	63%	56%	68%	58%
CSRESP Q32	88%	91%	93%	75%	67%	91%	100%	67%	90%	100%						100%	80%	100%	90%	90%	88%	95%	84%
AVERAGE	75.6	82.1	71.4	68.8	x	80.5	87.5	x	76.9	x	x	x	x	x	x	77.5	66.7	79.4	66.7	71.9	81.7	71.0	

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

	CCC TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
RXWHY Q10	83%	80%	78%	81%	85%	77%	85%	89%	80%	100%				67%	100%	92%	75%	82%	89%	76%	78%	86%
RXWYNT Q11	60%	61%	56%	50%	60%	60%	63%	78%	61%	100%				67%	50%	46%	50%	60%	63%	58%	65%	59%
FRXBST Q12	72%	72%	89%	81%	70%	59%	78%	56%	70%	100%				67%	50%	77%	50%	71%	74%	70%	78%	68%
AVERAGE	71.4	70.8	74.1	70.8	71.7	65.1	75.3	74.1	70.3	x	x	x	x	x	x	71.8	58.3	71.1	75.4	68.0	73.3	70.8

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q1 YES	333	5863	2	60	77	101	93	206	4	3	11	24	42	107	210	301	17	242	91
	100%	100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%
NOT ANSWERED	9	155	1	3	1	3	1	2			1	1		6	2	6	3	7	2
VALID CASES	333	5863	2	60	77	101	93	206	4	3	11	24	42	107	210	301	17	242	91
NUMBER OF RESPONDENTS	342	6018	3	63	78	104	94	208	4	3	12	25	42	113	212	307	20	249	93
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q3 YES	103 30%	1775 30%	2 100%~	20 32%	27 35%	24 23%*	30 32%	66 32%	2 50%~	1 33%~	3 ~ 25%~	6 24%~	19 45%~	22 20%*	77 36%*	91 30%~	10 53%~	66 27%*	37 40%*
NO	235 70%	4117 70%	~ 68%	43 65%	50 77%*	63 68%	140 68%	2 50%~	2 67%~	9 ~ 75%~	19 76%~	23 55%~	88 80%*	135 64%*	214 70%~	9 47%~	180 73%*	55 60%*	
NOT ANSWERED	4	126	1		1	1	1	2						3		2	1	3	1
VALID CASES	338	5892	2	63	77	103	93	206	4	3	12	25	42	110	212	305	19	246	92
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%	12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%

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		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q4 NEVER	2 2%	28 2%	~	~	8%~	~	~	3%~	~	~	~	~	~	~	2 3%~	2 2%~	~	2 3%~	~
SOMETIMES	10 11%	167 10%	~	5%~	8%~	14%~	15%~	8%~	~	~	~	2 33%~	3 17%~	3 14%~	7 10%~	8 9%~	2 25%~	6 9%~	4 13%~
USUALLY	26 27%	270 16%*	~	26%~	5 20%~	5 23%~	11 41%~	16 26%~	~	1 100%~	~	2 33%~	4 22%~	7 33%~	18 25%~	23 27%~	2 25%~	15 23%~	11 35%~
ALWAYS	57 60%	1252 73%*	2 100%~	13 68%~	16 64%~	14 64%~	12 44%~	38 62%~	~	~	3 100%~	2 33%~	11 61%~	11 52%~	44 62%~	52 61%~	4 50%~	41 64%~	16 52%~
#ALWAYS + USUALLY (NET)	83 87%	1522 89%	2 100%~	18 95%~	21 84%~	19 86%~	23 85%~	54 89%~	1 100%~	~	3 100%~	4 67%~	15 83%~	18 86%~	62 87%~	75 88%~	6 75%~	56 88%~	27 87%~
TOP BOX SCORE	57 60%	1252 73%*	2 100%~	13 68%~	16 64%~	14 64%~	12 44%~	38 62%~	~	~	3 100%~	2 33%~	11 61%~	11 52%~	44 62%~	52 61%~	4 50%~	41 64%~	16 52%~
NOT ANSWERED	8	136	1	2	2	3	5	2					1	1	6	6	2	2	6
VALID CASES	95	1718	2	19	25	22	27	61	1		3	6	18	21	71	85	8	64	31
NUMBER OF RESPONDENTS	103	1854	2	20	27	24	30	66	2	1	3	6	19	22	77	91	10	66	37
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q3 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC
Q5 YES	226 67%	3764 65%	2 100%~	54 86%*	53 69%	57 56%*	60 65%	132 64%	4 100%~	1 33%~	9 ~ 75%~	18 72%~	32 78%~	71 65%	141 67%	197 65%~	16 84%~	153 63%*	73 79%*
NO	110 33%	2063 35%	~ 14%*	9 31%	24 44%*	33 44%*	35% 36%	74 36%	2 ~ 67%~	3 ~ 25%~	7 28%~	9 22%~	38 35%	70 33%	106 35%~	3 16%~	91 37%*	19 21%*	
NOT ANSWERED	6	192	1	1	3	1	2					1	4	1	4	1	5	1	
VALID CASES	336	5826	2	63	77	101	93	206	4	3	12	25	41	109	211	303	19	244	92
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%	12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%

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					
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD POOR	NO CCC	CCC			
Q6 NEVER	3 1%	57 2%	~	~	~	2%	4%	2%	~	~	~	~	~	2	1	2	1%	~	2	1		
SOMETIMES	25 12%	442 13%	~	6%	10%	19%	12%	13	1	1	~	~	11%	2	7	8	16	19	5	14	11	
USUALLY	45 21%	870 25%	~	24%	31%	17%	16%	27	1	~	~	~	22%	4	5	15	27	39	3	30	15	
ALWAYS	138 65%	2092 60%	100%	71%	59%	62%	68%	81	~	~	~	100%	9	12	17	42	87	124	7	97	41	
#ALWAYS + USUALLY (NET)	183 87%	2961 86%	100%	94%*	90%	79%	84%	108	1	~	~	~	100%	9	16	22	57	114	163	10	127	56
TOP BOX SCORE	138 65%	2092 60%	100%	71%	59%	62%	68%	81	~	~	~	~	100%	9	12	17	42	87	124	7	97	41
NOT ANSWERED	15	259		3	4	4	4	9	2				3	4	10	13	1	10	5			
VALID CASES	211	3460	2	51	49	53	56	123	2	1			9	18	29	67	131	184	15	143	68	
NUMBER OF RESPONDENTS	226	3719	2	54	53	57	60	132	4	1			9	18	32	71	141	197	16	153	73	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q5 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q7 NONE	85 26%	1770 31%*	~ 18%	21%	33%*	27%	56 28%	1 ~ 33%~	2 ~ 17%~	5 20%~	4 10%~	38 34%*	46 22%	83 27%~	2 11%~	71 30%*	14 15%*		
1 TIME	97 29%	1587 28%	~ 25%	34%	31%	27%	62 31%	1 25%~	2 67%~	3 ~ 25%~	7 28%~	13 31%~	26 23%	67 32%	86 28%~	6 33%~	80 33%*	17 19%*	
2	71 21%	1212 21%	~ 22%	21%	20%	25%	40 20%	1 25%~	~	4 ~ 33%~	11 44%~	11 26%~	22 20%	45 22%	66 22%~	2 11%~	51 21%	20 22%	
3	31 9%	601 10%	33%~	12%	10%	4%* 12%	17 8%	~	~	1 ~ 8%~	~	8 ~ 19%~	10 9%	20 10%	29 10%~	1 6%~	17 7%*	14 15%*	
4	20 6%	266 5%	67%~	7%	8%	3% 6%	14 7%	1 25%~	~	~	~	2 ~ 5%~	7 6%	13 6%	19 6%~	1 6%~	10 4%	10 11%	
5 TO 9	21 6%	243 4%	~ 10%	5%	8%	3%	10 5%	1 25%~	~	~	2 ~ 8%~	4 10%~	6 5%	12 6%	15 5%~	4 22%~	8 3%*	13 14%*	
10 OR MORE TIMES	6 2%	84 1%	~ 7%	1%	1%	~	3 1%	~	~	2 ~ 17%~	~	~	2 2%	4 2%	4 1%~	2 11%~	3 1%	3 3%	
NOT ANSWERED	11	255	3	1	2	5	6						2	5	5	2	9	2	
VALID CASES	331	5763	3	60	77	102	89	202	4	3	12	25	42	111	207	302	18	240	91
NUMBER OF RESPONDENTS	342	6018	3	63	78	104	94	208	4	3	12	25	42	113	212	307	20	249	93
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ NATV	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q8 #YES	160 67%	2722 69%	3 100%	39 83%	42 69%	37 56%*	39 62%	100 70%	3 75%	1 50%		7 70%	13 65%	22 58%	44 61%	108 69%	144 67%	12 75%	108 65%	52 70%
NO	80 33%	1206 31%		8 17%	19 31%	29 44%*	24 38%	42 30%	1 25%	1 50%		3 30%	7 35%	16 42%	28 39%	49 31%	70 33%	4 25%	58 35%	22 30%
NOT ANSWERED	6	97		2		2	2	4							1	4	5		3	3
VALID CASES	240	3927	3	47	61	66	63	142	4	2		10	20	38	72	157	214	16	166	74
NUMBER OF RESPONDENTS	246	4024	3	49	61	68	65	146	4	2		10	20	38	73	161	219	16	169	77
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q9 NEVER	5 2%	99 3%	~	~	1 2%	3 4%	1 2%	1 0.7%	~	~	~	~	~	3 8%	2 3%	3 2%	4 2%	~	5 3%	~
SOMETIMES	19 8%	362 9%	~	2 4%	4 7%	8 12%	5 8%	10 7%	~	2 100%	~	~	3 16%	3 8%	4 6%	15 10%	17 8%	2 14%	13 8%	6 8%
USUALLY	59 25%	854 22%	2 67%	10 21%	15 25%	16 24%	16 25%	34 24%	2 50%	~	~	2 20%	5 26%	8 22%	22 31%	34 22%	53 25%	5 36%	35 21%	24 32%
ALWAYS	157 65%	2627 67%	1 33%	35 74%	39 66%	41 60%	41 65%	98 69%	2 50%	~	~	8 80%	11 58%	23 62%	44 61%	105 67%	142 66%	7 50%	111 68%	46 61%
#ALWAYS + USUALLY (NET)	216 90%	3480 88%	3 100%	45 96%	54 92%	57 84%	57 90%	132 92%	4 100%	~	~	10 100%	16 84%	31 84%	66 92%	139 89%	195 90%	12 86%	146 89%	70 92%
TOP BOX SCORE	157 65%	2627 67%	1 33%	35 74%	39 66%	41 60%	41 65%	98 69%	2 50%	~	~	8 80%	11 58%	23 62%	44 61%	105 67%	142 66%	7 50%	111 68%	46 61%
NOT ANSWERED	6	83		2	2		2	3					1	1	1	4	3	2	5	1
VALID CASES	240	3941	3	47	59	68	63	143	4	2		10	19	37	72	157	216	14	164	76
NUMBER OF RESPONDENTS	246 100%	4024 100%	3 100%	49 100%	61 100%	68 100%	65 100%	146 100%	4 100%	2 100%		10 100%	20 100%	38 100%	73 100%	161 100%	219 100%	16 100%	169 100%	77 100%

[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?

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD POOR	NO CCC	CCC	
Q10 YES	58 24%	1194 30%*	1 50%~	13 28%~	13 22%	16 24%	15 23%	30 21%	2 50%~	1 50%~		3 ~ 30%~	4 20%~	9 24%~	16 23%	39 25%	49 23%~	6 40%~	26 16%*	32 43%*
Q10 NO	181 76%	2727 70%*	1 50%~	34 72%~	46 78%	51 76%	49 77%	112 79%	2 50%~	1 50%~		7 ~ 70%~	16 80%~	28 76%~	55 77%	118 75%	165 77%~	9 60%~	138 84%*	43 57%*
NOT ANSWERED	7	102	1	2	2	1	1	4						1	2	4	5	1	5	2
VALID CASES	239	3922	2	47	59	67	64	142	4	2		10	20	37	71	157	214	15	164	75
NUMBER OF RESPONDENTS	246 100%	4024 100%	3 100%	49 100%	61 100%	68 100%	65 100%	146 100%	4 100%	2 100%		10 100%	20 100%	38 100%	73 100%	161 100%	219 100%	16 100%	169 100%	77 100%

[ASKED IF Q7 >= 1 TIME]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q11 NOT AT ALL	1 2%	40 4%	~	~	8%~	~	~	~	~	~	~	~	~	13%~	~	3%~	1 2%~	~	1 4%~	~
A LITTLE	7 12%	110 10%	~	31%~	8%~	7%~	7%~	7%~	~100%~	~	~	~	25%~	25%~	13%~	13%~	6 12%~	1 17%~	3 12%~	4 13%~
SOME	18 32%	287 26%	~	38%~	15%~	47%~	27%~	40%~	~	~	~	33%~	50%~	~	50%~	26%~	17 35%~	1 17%~	9 35%~	9 29%~
#A LOT	31 54%	660 60%	100%~	31%~	69%~	47%~	67%~	53%~	100%~	~	~	67%~	25%~	63%~	38%~	59%~	24 50%~	4 67%~	13 50%~	18 58%~
NOT ANSWERED	1	40				1								1			1			1
VALID CASES	57	1098	1	13	13	15	15	30	2	1		3	4	8	16	39	48	6	26	31
NUMBER OF RESPONDENTS	58	1138	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q12 NOT AT ALL	8 14%	204 19%	2 ~ 15%	2 15%	3 20%	1 7%	4 13%	~	~	~	~	2 25%	2 13%	6 15%	6 12%	2 33%	5 19%	3 10%	
A LITTLE	11 19%	171 16%	3 ~ 23%	4 31%	2 13%	2 13%	6 20%	~	~	~	1 25%	3 38%	3 19%	8 21%	10 21%	1 17%	5 19%	6 19%	
SOME	19 33%	343 31%	8 ~ 62%	3 23%	4 27%	4 27%	10 33%	1 50%	1 100%	~	2 67%	1 25%	7 44%	12 31%	16 33%	2 33%	7 27%	12 39%	
#A LOT	19 33%	374 34%	1 100%	4 ~ 31%	6 40%	8 53%	10 33%	1 50%	~	~	1 33%	2 50%	3 38%	4 25%	13 33%	16 33%	1 17%	9 35%	10 32%
NOT ANSWERED	1	47			1						1				1			1	
VALID CASES	57	1091	1	13	13	15	15	30	2	1	3	4	8	16	39	48	6	26	31
NUMBER OF RESPONDENTS	58	1138	1	13	13	16	15	30	2	1	3	4	9	16	39	49	6	26	32
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME AND 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?

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q13 #YES	43 75%	872 80%	1 100%	6 46%	9 69%	13 87%	14 93%	21 70%	2 100%	1 100%	2 ~	4 67%	6 100%	13 81%	28 72%	35 73%	5 83%	18 69%	25 81%	
NO	14 25%	225 20%		7 ~	4 54%	2 31%	1 13%	9 30%				1 ~	2 33%	3 19%	11 28%	13 27%	1 17%	8 31%	6 19%	
NOT ANSWERED	1	42				1							1			1			1	
VALID CASES	57	1096	1	13	13	15	15	30	2	1		3	4	8	16	39	48	6	26	31
NUMBER OF RESPONDENTS	58	1138	1	13	13	16	15	30	2	1		3	4	9	16	39	49	6	26	32
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME AND 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?

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER					
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC			
Q14 WORST HEALTH CARE POSSIBLE	4	0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~				
01	5	0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~				
02	15	0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~				
03	433	0.8%	~	~	~	4%	2%	~	~	~	~	3%	1%	3%	0.6%	2%	~	2%	2%			
04	853	1%	~	~	~	5%	3%	~	~	~	~	1%	3%	5%	8%	4%	3%	7%	3%	5%	3%	
05	8141	4%	~	3%	2%	2%	1%	2%	~	1%	50%	~	~	1%	3%	5%	3%	7%	1%	6%	2%	
06	7124	3%	~	1%	3%	1%	2%	5%	~	~	~	~	~	1%	3%	4%	3%	4%	2%	4%	3%	
07	22316	8%	~	3%	4%	8%	7%	17%	1%	25%	~	~	10%	1%	5%	5%	1%	21%	20%	2%	13%	9%
08	52886	23%	33%	15%	13%	9%	14%	32%	2%	50%	~	~	10%	1%	2%	8%	14%	34%	45%	4%	30%	22%
09	53849	22%	33%	12%	14%	16%	10%	30%	~	50%	~	~	20%	2%	7%	7%	23%	27%	49%	1%	39%	14%
BEST HEALTH CARE POSSIBLE	871476	38%	33%	13%	25%	22%	26%	50%	1%	25%	~	~	60%	6%	8%	13%	23%	61%	79%	6%	66%	21%
#8-10 (NET)	1923211	82%	100%	85%	85%	70%	79%	112%	3%	75%	50%	~	90%	9%	17%	28%	60%	122%	173%	11%	135%	57%

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		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
9-10 (NET)	140 58%	2325 60%	2 67%	25 53%	39 64%	38 57%	36 57%	80 56%	1 25%	1 50%	8 80%	15 75%	20 53%	46 63%	88 56%	128 60%	7 44%	105 64%*	35 46%*
NOT ANSWERED	5	122		2		1	2	4						4	4		4	1	
VALID CASES	241	3902	3	47	61	67	63	142	4	2	10	20	38	73	157	215	16	165	76
NUMBER OF RESPONDENTS	246 100%	4024 100%	3 100%	49 100%	61 100%	68 100%	65 100%	146 100%	4 100%	2 100%	10 100%	20 100%	38 100%	73 100%	161 100%	219 100%	16 100%	169 100%	77 100%
MEAN	8.48	8.59	9.00	8.51	8.79	8.06	8.57	8.49	8.25	7.00	9.30	8.75	8.08	8.36	8.54	8.51	8.25	8.62	8.17
p stat_(*=Sig @ p<=.05)		.307	~	~	.061	.048*	.612	.867	~	~	~	~	~	.502	.475	~	~	.059	.059

[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			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q15 NEVER	2 0.8%	70 2%	~	~	~	3%	2 0.7%	1	~	~	~	~	~	3%	1	2	2	~	1%	~
SOMETIMES	26 11%	378 10%	~	9%	16%	7%	11%	12 8%	~	1 50%	~	~	3 16%	6 16%	8 11%	18 11%	23 11%	2 13%	15 9%	11 14%
USUALLY	72 30%	1179 30%	1 33%	14 30%	18 30%	20 30%	19 30%	41 28%	4 100%	1 50%	~	1 10%	7 37%	12 32%	26 36%	43 27%	63 29%	8 53%	38 23%*	34 44%*
ALWAYS	142 59%	2256 58%	2 67%	29 62%	33 54%	40 60%	38 59%	90 62%	~	~	~	9 90%	9 47%	19 50%	36 50%	98 62%	129 59%	5 33%	110 67%*	32 42%*
#ALWAYS + USUALLY (NET)	214 88%	3435 88%	3 100%	43 91%	51 84%	60 90%	57 89%	131 91%	4 100%	1 50%	~	10 100%	16 84%	31 82%	62 86%	141 89%	192 88%	13 87%	148 90%	66 86%
TOP BOX SCORE	142 59%	2256 58%	2 67%	29 62%	33 54%	40 60%	38 59%	90 62%	~	~	~	9 90%	9 47%	19 50%	36 50%	98 62%	129 59%	5 33%	110 67%*	32 42%*
NOT ANSWERED	4	141		2		1	1	2				1		1	2	2	1	4		
VALID CASES	242	3883	3	47	61	67	64	144	4	2		10	19	38	72	159	217	15	165	77
NUMBER OF RESPONDENTS	246 100%	4024 100%	3 100%	49 100%	61 100%	68 100%	65 100%	146 100%	4 100%	2 100%		10 100%	20 100%	38 100%	73 100%	161 100%	219 100%	16 100%	169 100%	77 100%

[ASKED IF Q7 >= 1 TIME]

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

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q16 YES	248 74%	4005 69%*	14 ~ 23%*	62 81%	93 91%*	79 87%*	157 77%	3 75%~	2 67%~	8 ~ 67%~	18 72%~	34 81%~	71 65%*	168 79%*	224 74%~	16 84%~	171 71%*	77 83%*	
NO	85 26%	1827 31%*	2 100%~	47 77%*	15 19%	9 9%*	12 13%*	48 23%	1 25%~	1 33%~	4 ~ 33%~	7 28%~	8 19%~	39 35%*	44 21%*	80 26%~	3 16%~	69 29%*	16 17%*
NOT ANSWERED	9	187	1	2	1	2	3	3					3		3	1	9		
VALID CASES	333	5831	2	61	77	102	91	205	4	3	12	25	42	110	212	304	19	240	93
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%	12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%

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		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q17 YES	26 11%	460 12%	~	1 8%	5 8%	11 12%	9 13%	16 11%	1 100%	~	1 13%	1 6%	4 12%	8 12%	16 10%	22 11%	3 20%	10 6%*	16 22%*
NO	205 89%	3425 88%	~	12 92%	54 92%	78 88%	61 87%	129 89%	2 100%	~	7 87%	16 94%	29 88%	57 88%	141 90%	186 89%	12 80%	147 94%*	58 78%*
NOT ANSWERED	17	235		1	3	4	9	12	2			1	1	6	11	16	1	14	3
VALID CASES	231	3885		13	59	89	70	145	1	2	8	17	33	65	157	208	15	157	74
NUMBER OF RESPONDENTS	248 100%	4120 100%		14 100%	62 100%	93 100%	79 100%	157 100%	3 100%	2 100%	8 100%	18 100%	34 100%	71 100%	168 100%	224 100%	16 100%	171 100%	77 100%

[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			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q18 #YES	23 88%	368 88%		1	5	8	9	14	1			1	1	3	7	14	19	3	9	14
				~100%	~100%	~73%	~100%	88%	~100%	~	~100%	~100%	~75%	87%	~88%	86%	~100%	90%	~88%	
NO	3 12%	51 12%	~	~	~	27%	~	12%	~	~	~	~	~	25%	13%	~12%	14%	~	10%	~12%
NOT ANSWERED		1																		
VALID CASES	26	419		1	5	11	9	16	1			1	1	4	8	16	22	3	10	16
NUMBER OF RESPONDENTS	26	420		1	5	11	9	16	1			1	1	4	8	16	22	3	10	16
	100%	100%		100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q16 = YES AND Q17 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q19 YES	16 5%	202 3%		5 ~ 8%	4 5%	5 5%	2 2%	9 4%	1 25%~	~	1 ~ 8%	2 ~ 5%	8 7%	7 3%	13 4%~	2 12%~	7 3%*	9 10%*	
NO	316 95%	5625 97%	1 100%~	56 92%	72 95%	98 95%	89 98%	198 96%	3 75%~	3 100%~	11 ~ 92%~	24 100%~	40 95%~	100 93%	205 97%	292 96%~	15 88%~	233 97%*	83 90%*
NOT ANSWERED	10	191	2	2	2	1	3	1				1		5	2	3	9	1	
VALID CASES	332	5827	1	61	76	103	91	207	4	3	12	24	42	108	212	305	17	240	92
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%	12 100%	24 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%

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		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC
Q20 NEVER	2 13%	22 11%	~	~	1 25%	1 20%	1 11%	~	~	~	~	~	~	2 25%	~	2 15%	~	1 14%	1 11%
SOMETIMES	2 13%	27 13%	~	1 20%	~	1 20%	2 22%	~	~	~	~	~	~	1 13%	1 14%	1 8%	1 50%	~	2 22%
USUALLY	3 19%	51 24%	~	~	~	2 40%	1 50%	2 22%	1 100%	~	~	~	~	2 25%	1 14%	3 23%	~	1 14%	2 22%
ALWAYS	9 56%	109 52%	~	4 80%	3 75%	1 20%	1 50%	4 44%	~	~	1 100%	~	2 100%	3 38%	5 71%	7 54%	1 50%	5 71%	4 44%
#ALWAYS + USUALLY (NET)	12 75%	160 76%	~	4 80%	3 75%	3 60%	2 100%	6 67%	1 100%	~	1 100%	~	2 100%	5 63%	6 86%	10 77%	1 50%	6 86%	6 67%
TOP BOX SCORE	9 56%	109 52%	~	4 80%	3 75%	1 20%	1 50%	4 44%	~	~	1 100%	~	2 100%	3 38%	5 71%	7 54%	1 50%	5 71%	4 44%
NOT ANSWERED		12																	
VALID CASES	16	210		5	4	5	2	9	1		1		2	8	7	13	2	7	9
NUMBER OF RESPONDENTS	16	222		5	4	5	2	9	1		1		2	8	7	13	2	7	9
	100%	100%		100%	100%	100%	100%	100%	100%		100%		100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q19 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q21 #YES	13 81%	178 86%		4 ~ 80%	3 ~ 75%	4 ~ 80%	2 ~ 100%	6 67%	1 100%			1 ~ 100%	2 ~ 100%	6 75%	6 86%	11 85%	1 50%	6 86%	7 78%
NO	3 19%	30 14%		1 ~ 20%	1 ~ 25%	1 ~ 20%		3 33%						2 25%	1 14%	2 15%	1 50%	1 14%	2 22%
NOT ANSWERED		14																	
VALID CASES	16	208		5	4	5	2	9	1		1	2	8	7	13	2	7	9	
NUMBER OF RESPONDENTS	16 100%	222 100%		5 100%	4 100%	5 100%	2 100%	9 100%	1 100%		1 100%	2 100%	8 100%	7 100%	13 100%	2 100%	7 100%	9 100%	

[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?

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC		
Q22 YES	18 5%	474 8%*	~	5 8%	6 8%	6 6%	1 1%*	14 7%	1 25%~	~	~	1 8%~	~	2 5%~	5 5%	13 6%	16 5%~	2 12%~	2 0.8%*	16 18%*	
NO	312 95%	5319 92%*	100%~	2 92%	56 92%	69 94%	95 99%*	90 93%	191 75%~	3 100%~	3 ~	11 ~	24 92%~	39 100%~	95%~	103 95%	198 94%	287 95%~	15 88%~	238 99%*	74 82%*
NOT ANSWERED	12	225	1	2	3	3	3	3				1	1	5	1	4	3	9	3		
VALID CASES	330	5793	2	61	75	101	91	205	4	3		12	24	41	108	211	303	17	240	90	
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%		12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%	

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AMR AFR-	AS- IAN	NATV HAW/ PAC	AMR IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q23 NEVER	4 22%	60 14%	1 ~ 20%	3 ~ 50%	4 ~ 29%	~	~	~	~	~	~	~	~	2 40%	2 15%	3 19%	1 50%	4 ~ 25%		
SOMETIMES	1 6%	71 17%	~	~ 17%	1 ~ 7%	~	~	~	~	~	~	~	~	1 20%	~	1 6%	~	1 50%	~	~
USUALLY	3 17%	110 26%	2 ~ 40%	1 ~ 17%	2 ~ 14%	1 ~ 100%	~	1 ~ 100%	~	~	~	~	~	~	3 ~ 23%	3 19%	~	3 ~ 19%	~	~
ALWAYS	10 56%	179 43%	2 ~ 40%	6 ~ 100%	1 ~ 17%	1 ~ 100%	7 50%	~	~	~	1 ~ 100%	~	2 ~ 100%	2 40%	8 62%	9 56%	1 50%	1 50%	9 56%	
#ALWAYS + USUALLY (NET)	13 72%	289 69%	4 ~ 80%	6 ~ 100%	2 ~ 33%	1 ~ 100%	9 64%	1 ~ 100%	~	~	1 ~ 100%	~	2 ~ 100%	2 40%	11 85%	12 75%	1 50%	1 50%	12 75%	
TOP BOX SCORE	10 56%	179 43%	2 ~ 40%	6 ~ 100%	1 ~ 17%	1 ~ 100%	7 50%	~	~	~	1 ~ 100%	~	2 ~ 100%	2 40%	8 62%	9 56%	1 50%	1 50%	9 56%	
NOT ANSWERED		24																		
VALID CASES	18	420	5	6	6	1	14	1			1		2	5	13	16	2	2	16	
NUMBER OF RESPONDENTS	18	444	5	6	6	1	14	1			1		2	5	13	16	2	2	16	
	100%	100%	100%	100%	100%	100%	100%	100%			100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q22 = YES]

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

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC
Q24 #YES	10 56%	291 69%	4 ~ 80%	2 33%	3 50%	1 100%	8 57%	1 100%		1 100%			4 80%	6 46%	8 50%	2 100%		10 63%
NO	8 44%	132 31%	1 ~ 20%	4 67%	3 50%		6 43%				2 100%	1 20%	7 54%	8 50%		2 100%	6 38%	
NOT ANSWERED		21																
VALID CASES	18	423	5	6	6	1	14	1		1	2	5	13	16	2	2	16	
NUMBER OF RESPONDENTS	18	444	5	6	6	1	14	1		1	2	5	13	16	2	2	16	
	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q22 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q25 YES	48 15%	682 12%	~	4 7%*	14 18%	15 15%	15 17%	34 17%	4 100%~	~	1 ~	8%~	7 ~	17%~	6 6%*	41 19%*	40 13%~	6 38%~	9 4%*	39 42%*
NO	282 85%	5109 88%	100%~	2 93%*	57 82%	62 85%	86 83%	75 83%	172 83%	3 ~100%~	11 ~	23 92%~	35 100%~	83%~	101 94%*	171 81%*	264 87%~	10 63%~	229 96%*	53 58%*
NOT ANSWERED	12	227	1	2	2	3	4	2				2		6		3	4	11	1	
VALID CASES	330	5791	2	61	76	101	90	206	4	3	12	23	42	107	212	304	16	238	92	
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%	12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%	

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		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC
Q26 NEVER	5 11%	90 14%	~	~	1 7%	4 27%	5 15%	~	~	~	~	~	~	1 17%	4 10%	4 10%	1 17%	~	5 13%
SOMETIMES	4 9%	121 19%	~	~	1 7%	2 13%	1 7%	2 6%	~	~	~	~	2 29%	1 17%	3 7%	3 8%	1 17%	1 11%	3 8%
USUALLY	9 19%	156 24%	~	2 50%	1 7%	1 7%	5 36%	7 21%	2 50%	~	~	~	~	1 17%	8 20%	8 21%	1 17%	1 11%	8 21%
ALWAYS	29 62%	284 44%	~	2 50%	11 79%	8 53%	8 57%	19 58%	2 50%	~	~	1 100%	5 71%	3 50%	25 63%	24 62%	3 50%	7 78%	22 58%
#ALWAYS + USUALLY (NET)	38 81%	440 68%	~	4 100%	12 86%	9 60%	13 93%	26 79%	4 100%	~	~	1 100%	5 71%	4 67%	33 83%	32 82%	4 67%	8 89%	30 79%
TOP BOX SCORE	29 62%	284 44%	~	2 50%	11 79%	8 53%	8 57%	19 58%	2 50%	~	~	1 100%	5 71%	3 50%	25 63%	24 62%	3 50%	7 78%	22 58%
NOT ANSWERED	1	25				1	1								1	1			1
VALID CASES	47	651		4	14	15	14	33	4			1	7	6	40	39	6	9	38
NUMBER OF RESPONDENTS	48	676		4	14	15	15	34	4			1	7	6	41	40	6	9	39
	100%	100%		100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q27 #YES	24 52%	347 53%	~	3 75%	7 50%	5 33%	9 69%	16 50%	3 75%	~	1 100%	3 43%	3 50%	21 54%	20 51%	3 60%	3 33%	21 57%	
NO	22 48%	304 47%	~	1 25%	7 50%	10 67%	4 31%	16 50%	1 25%	~	~	~	4 57%	3 50%	18 46%	19 49%	2 40%	6 67%	16 43%
NOT ANSWERED	2	25				2	2							2	1	1		2	
VALID CASES	46	651		4	14	15	13	32	4		1	7	6	39	39	5	9	37	
NUMBER OF RESPONDENTS	48	676		4	14	15	15	34	4		1	7	6	41	40	6	9	39	
	100%	100%		100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q25 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q28 YES	58 18%	1072 19%	1 50%	12 20%	13 17%	17 17%	15 17%	33 16%	2 50%	~	4 ~	1 33%	11 4%	14 13%	43 21%	49 16%	8 44%	22 9%*	36 39%*	
Q28 NO	270 82%	4688 81%	1 50%	47 80%	63 83%	85 83%	74 83%	171 84%	2 50%	3 100%	~	8 67%	23 96%	29 73%	95 87%	166 79%	252 84%	10 56%	214 91%*	56 61%*
Q28 NOT ANSWERED	14	257	1	4	2	2	5	4				1	2	4	3	6	2	13	1	
VALID CASES	328	5761	2	59	76	102	89	204	4	3		12	24	40	109	209	301	18	236	92
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%		12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
Q29 #YES	35 64%	609 56%	1 100%	8 67%	8 67%	9 56%	9 64%	18 56%	2 100%	~	3 75%	1 100%	5 50%	11 92%	23 55%	27 59%	7 87%	11 58%	24 67%
NO	20 36%	471 44%	~	4 33%	4 33%	7 44%	5 36%	14 44%	~	~	1 25%	5 50%	1 8%	19 45%	19 41%	1 13%	8 42%	12 33%	
NOT ANSWERED	3	35			1	1	1	1					1	2	1	3		3	
VALID CASES	55	1080	1	12	12	16	14	32	2		4	1	10	12	42	46	8	19	36
NUMBER OF RESPONDENTS	58 100%	1115 100%	1 100%	12 100%	13 100%	17 100%	15 100%	33 100%	2 100%		4 100%	1 100%	11 100%	14 100%	43 100%	49 100%	8 100%	22 100%	36 100%

[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?

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q30 YES	272 82%	4998 86%*	3 100%~	54 90%*	65 86%	76 75%*	74 80%	176 86%*	4 100%~	2 67%~	9 ~ 75%~	17 68%~	34 81%~	80 72%*	181 86%*	246 81%~	17 89%~	189 78%*	83 90%*
NO	61 18%	790 14%*	~	6 10%*	11 14%	26 25%*	18 20%	29 14%*	1 ~ 33%~	3 ~ 25%~	8 32%~	8 19%~	31 28%*	29 14%*	58 19%~	2 11%~	52 22%*	9 10%*	
NOT ANSWERED	9	230	3	2	2	2	3						2	2	3	1	8	1	
VALID CASES	333	5788	3	60	76	102	92	205	4	3	12	25	42	111	210	304	19	241	92
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%	12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%

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

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AMER IAN	NATV PAC ILND	AMER ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q31 NONE	66 25%	1324 27%	7 ~ 13%*	13 21%	27 37%*	19 26%	55 32%*	~	~	~ 11%~	13%~	2 9%~	3 9%~	21 28%	45 25%	63 27%~	3 18%~	55 30%*	11 13%*	
1 TIME	88 33%	1651 34%	17 ~ 33%	28 44%*	28 38%	15 21%*	54 32%	2 ~100%~	~	~ 33%~	31%~	5 47%~	16 47%~	21 28%	63 36%	80 34%~	4 24%~	64 35%	24 29%	
2	47 18%	1029 21%	12 ~ 23%	12 19%	7 10%*	16 22%	27 16%	3 75%~	~	~ 33%~	31%~	5 15%~	5 15%~	11 15%	32 18%	41 17%~	3 18%~	30 17%	17 21%	
3	29 11%	462 9%	1 50%~	6 12%	6 10%	3 4%*	13 18%	15 9%	~	~	~ 19%~	3 18%~	6 18%~	11 15%	18 10%	28 12%~	~	17 9%	12 15%	
4	15 6%	201 4%	1 50%~	3 6%	2 3%	3 4%	6 8%	11 6%	1 25%~	~	~	~	1 3%~	5 7%	9 5%	13 5%~	2 12%~	8 4%	7 9%	
5 TO 9	13 5%	173 4%	~ 8%	4 2%	1 5%	4 5%	4 5%	5 3%	~	~	~ 11%~	1 6%~	1 9%~	3 5%	7 4%	10 4%~	2 12%~	5 3%*	8 10%*	
10 OR MORE TIMES	5 2%	32 0.6%	~ 6%	3 2%	1 1%	1 1%	~ 2%	3 ~	~	~ 11%~	~	1 ~	~	2 3%	3 2%	0.8%~	3 18%~	2 1%	3 4%	
NOT ANSWERED	9	181	1	2	2	3	1	6				1		5	4	9		8	1	
VALID CASES	263	4872	2	52	63	73	73	170	4	2		9	16	34	75	177	237	17	181	82
NUMBER OF RESPONDENTS	272	5053	3	54	65	76	74	176	4	2		9	17	34	80	181	246	17	189	83
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q31A ALWAYS	3 2%	68 2%	~	~	~	~	3 6%	1 0.9%	~	~	~	~	1 8%	~	2 4%	1 0.8%	3 2%	~	3 2%	~	
USUALLY		51 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	14 7%	288 8%	~	3 7%	4 8%	3 7%	4 8%	6 5%	~	~	~	~	3 23%	~	11 21%*	3 2%*	11 6%	3 21%	11 9%	3 4%	
NEVER	177 91%	3102 88%	2 100%	42 93%	45 92%	43 93%	45 87%	107 94%	4 100%	2 100%	~	~	8 100%	9 69%	31 100%	40 75%*	127 97%*	158 92%	11 79%	109 89%	68 96%
#NEVER + SOMETIMES (NET)	191 98%	3390 97%*	2 100%	45 100%	49 100%	46 100%	49 94%	113 99%	4 100%	2 100%	~	~	8 100%	12 92%	31 100%	51 96%	130 99%	169 98%	14 100%	120 98%	71 100%
TOP BOX SCORE	177 91%	3102 88%	2 100%	42 93%	45 92%	43 93%	45 87%	107 94%	4 100%	2 100%	~	~	8 100%	9 69%	31 100%	40 75%*	127 97%*	158 92%	11 79%	109 89%	68 96%
NOT ANSWERED	3	31			1		2	1					1	1	1	1	2		3		
VALID CASES	194	3509	2	45	49	46	52	114	4	2			8	13	31	53	131	172	14	123	71
NUMBER OF RESPONDENTS	197	3540	2	45	50	46	54	115	4	2			8	14	31	54	132	174	14	126	71
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q32 NEVER	7 4%	74 2%		1 ~ 2%	2 4%	3 7%	1 2%	2	~	~	~	1 8%	3 10%	4 8%	2 2%	6 3%		7 6%*	~	
SOMETIMES	10 5%	183 5%		3 ~ 7%	1 2%	1 2%	5 10%	5	~	~	~	2 15%	2 6%	4 8%	6 5%	7 4%	3 21%	7 6%	3 4%	
USUALLY	36 19%	573 16%	1 50%	6 13%	10 20%	11 24%	8 16%	17 15%	1 25%	2 100%	~	2 25%	3 23%	7 23%	16 31%*	19 15%*	34 20%	1 7%	22 18%	14 20%
ALWAYS	140 73%	2676 76%	1 50%	35 78%	36 73%	31 67%	37 73%	90 79%*	3 75%	~	~	6 75%	7 54%	19 61%	28 54%*	104 79%*	125 73%	10 71%	87 71%	53 76%
#ALWAYS + USUALLY (NET)	176 91%	3249 93%	2 100%	41 91%	46 94%	42 91%	45 88%	107 94%	4 100%	2 100%	~	8 100%	10 77%	26 84%	44 85%	123 94%	159 92%	11 79%	109 89%	67 96%
TOP BOX SCORE	140 73%	2676 76%	1 50%	35 78%	36 73%	31 67%	37 73%	90 79%*	3 75%	~	~	6 75%	7 54%	19 61%	28 54%*	104 79%*	125 73%	10 71%	87 71%	53 76%
NOT ANSWERED	4	33			1		3	1				1		2	1	2		3	1	
VALID CASES	193	3507	2	45	49	46	51	114	4	2		8	13	31	52	131	172	14	123	70
NUMBER OF RESPONDENTS	197	3540	2	45	50	46	54	115	4	2		8	14	31	54	132	174	14	126	71
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q33 NEVER	2 1%	29 0.8%	~	1 2%	~	1 2%	~	~	~	~	~	~	~	1 3%	1 2%	~	1 0.6%	~	2 2%	~	
SOMETIMES	11 6%	199 6%	~	3 7%	~	3 7%	5 10%	7 6%	1 25%	~	~	~	1 8%	1 3%	4 8%	7 5%	9 5%	2 14%	6 5%	5 7%	
USUALLY	35 18%	611 17%	~	8 18%	12 24%	9 20%	6 12%	20 18%	~	1 50%	~	1 13%	3 23%	7 23%	13 25%	20 15%	34 20%	1 7%	20 16%	15 21%	
ALWAYS	144 75%	2666 76%	100%	2 73%	33 76%	37 76%	33 72%	39 78%	87 76%	3 75%	1 50%	~	7 87%	9 69%	22 71%	34 65%	104 79%	128 74%	11 79%	94 77%	50 71%
#ALWAYS + USUALLY (NET)	179 93%	3277 93%	100%	2 91%	41 100%	49 100%	42 91%	45 90%	107 94%	3 75%	2 100%	~	8 100%	12 92%	29 94%	47 90%	124 95%	162 94%	12 86%	114 93%	65 93%
TOP BOX SCORE	144 75%	2666 76%	100%	2 73%	33 76%	37 76%	33 72%	39 78%	87 76%	3 75%	1 50%	~	7 87%	9 69%	22 71%	34 65%	104 79%	128 74%	11 79%	94 77%	50 71%
NOT ANSWERED	5	34			1		4	1					1		2	1	2		4	1	
VALID CASES	192	3506	2	45	49	46	50	114	4	2		8	13	31	52	131	172	14	122	70	
NUMBER OF RESPONDENTS	197	3540	2	45	50	46	54	115	4	2		8	14	31	54	132	174	14	126	71	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q34 NEVER	1 0.5%	22 0.6%	~	~	~	2%	~	~	~	~	~	~	~	3%	2%	1	~0.6%	~	1	~
SOMETIMES	7 4%	152 4%	~	4%	4%	2%	4%	~	~	~	~	~	8%	3%	4%	5	4%	~	5	2
USUALLY	32 17%	469 13%	~	22%	14%	17%	20%	25%	50%	~	~	~	8%	10%	21%	20	15%	18%	7%	12
ALWAYS	152 79%	2859 82%	100%	73%	82%	78%	75%	75%	50%	~	~	~	100%	85%	84%	106	81%	77%	93%	56
#ALWAYS + USUALLY (NET)	184 96%	3328 95%	100%	96%	96%	96%	96%	100%	100%	~	~	~	100%	92%	94%	126	96%	95%	100%	68
TOP BOX SCORE	152 79%	2859 82%	100%	73%	82%	78%	75%	75%	50%	~	~	~	100%	85%	84%	106	81%	77%	93%	56
NOT ANSWERED	5	38			1	4	1					1			1	2	1	2		1
VALID CASES	192	3502	2	45	49	46	50	114	4	2		8	13	31	52	131	172	14	122	70
NUMBER OF RESPONDENTS	197	3540	2	45	50	46	54	115	4	2		8	14	31	54	132	174	14	126	71
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER					
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV ILND	AMER IND/ PAC ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q35 YES	130 68%	2353 68%		7 ~ 16%	32 ~ 67%	44 ~ 96%	47 94%*	78 70%	3 75%~	1 50%~		5 ~ 63%	9 69%~	21 68%~	35 69%	89 68%	116 68%~	10 71%~	76 63%*	54 77%*	
NO	60 32%	1128 32%	1 100%~	38 84%~	16 33%~	2 4%~	3 6%*	34 30%	1 25%~	1 50%~		3 ~ 38%	4 31%~	10 32%~	16 31%	41 32%	54 32%~	4 29%~	44 37%*	16 23%*	
NOT ANSWERED	7	60	1		2		4	3					1			3	2	4		6	1
VALID CASES	190	3480	1	45	48	46	50	112	4	2		8	13	31	51	130	170	14	120	70	
NUMBER OF RESPONDENTS	197 100%	3540 100%	2 100%	45 100%	50 100%	46 100%	54 100%	115 100%	4 100%	2 100%		8 100%	14 100%	31 100%	54 100%	132 100%	174 100%	14 100%	126 100%	71 100%	

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q35A ALWAYS	3 2%	43 2%	~	~	1 3%	1 2%	1 2%	1 1%	~	~	~	~	11%~	~	2 6%	1 1%	3 3%	~	1 1%	2 4%
USUALLY	2 2%	47 2%	~	1 14%	~	~	1 2%	~	~	~	~	~	~	~	2 6%	~	2 2%	~	2 3%	~
SOMETIMES	4 3%	152 7%*	~	~	1 3%	2 5%	1 2%	3 4%	~	~	~	~	~	~	3 9%	1 1%	2 2%	2 20%	3 4%	1 2%
NEVER	118 93%	2045 89%	~	6 86%	30 94%	39 93%	43 93%	74 95%	3 100%	1 100%	~	4 100%	8 89%	19 100%	28 80%	85 98%	107 94%	8 80%	68 92%	50 94%
#NEVER + SOMETIMES (NET)	122 96%	2197 96%	~	6 86%	31 97%	41 98%	44 96%	77 99%	3 100%	1 100%	~	4 100%	8 89%	19 100%	31 89%	86 99%	109 96%	10 100%	71 96%	51 96%
TOP BOX SCORE	118 93%	2045 89%	~	6 86%	30 94%	39 93%	43 93%	74 95%	3 100%	1 100%	~	4 100%	8 89%	19 100%	28 80%	85 98%	107 94%	8 80%	68 92%	50 94%
NOT ANSWERED	3	49				2	1					1		2		2		2	1	
VALID CASES	127	2287		7	32	42	46	78	3	1		4	9	19	35	87	114	10	74	53
NUMBER OF RESPONDENTS	130	2336		7	32	44	47	78	3	1		5	9	21	35	89	116	10	76	54
	100%	100%		100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q36 NEVER	4 3%	72 3%	~	~	2 6%	2 5%	2 3%	~	~	~	~	~	2 10%	2 6%	2 2%	3 3%	1 10%	4 5%*	~
SOMETIMES	6 5%	148 6%	~	~	2 6%	3 7%	1 2%	4 5%	~	~	~	~	1 5%	2 6%	4 5%	5 4%	1 10%	4 5%	2 4%
USUALLY	25 19%	454 20%	~	4 57%	6 19%	6 14%	9 19%	12 15%	~100%	1	2	3	4	9	15	23	2	10	15
ALWAYS	94 73%	1606 70%	~	3 43%	22 69%	32 74%	37 79%	60 77%	3 100%	~	2	6	14	22	67	85	6	57	37
#ALWAYS + USUALLY (NET)	119 92%	2060 90%	~	7 100%	28 88%	38 88%	46 98%	72 92%	3 100%	1	4	9	18	31	82	108	8	67	52
TOP BOX SCORE	94 73%	1606 70%	~	3 43%	22 69%	32 74%	37 79%	60 77%	3 100%	~	2	6	14	22	67	85	6	57	37
NOT ANSWERED	1	56				1								1				1	
VALID CASES	129	2280		7	32	43	47	78	3	1	4	9	21	35	88	116	10	75	54
NUMBER OF RESPONDENTS	130	2336		7	32	44	47	78	3	1	5	9	21	35	89	116	10	76	54
	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC	
Q37 NEVER	3 2%	98 3%	~	~	~	7%	~	0.9%	~	~	~	~	~	7%	4%	0.8%	2%~	~	2%	1%	
SOMETIMES	25 13%	385 11%	~	18%~	12%~	9%~	14%~	12%	25%~	~	~	13%~	23%~	10%~	19%	12%	12%~	31%~	14%	12%	
USUALLY	46 24%	856 25%	1	13	12	13	7	21	1	2	~	~	38%~	31%~	33%	19%*	24%~	23%~	22%	28%	
ALWAYS	116 61%	2135 61%	1	24	30	26	35	78	2	~	~	87%~	38%~	52%~	44%*	68%*	62%~	46%~	62%	59%	
#ALWAYS + USUALLY (NET)	162 85%	2991 86%	2	37	42	39	42	99	3	2	~	~	87%~	77%~	83%~	77%	88%	86%~	69%~	84%	87%
TOP BOX SCORE	116 61%	2135 61%	1	24	30	26	35	78	2	~	~	~	87%~	38%~	52%~	44%*	68%*	62%~	46%~	62%	59%
NOT ANSWERED	7	67			2		5	1				1	2	2	3		3	1	5	2	
VALID CASES	190	3473	2	45	48	46	49	114	4	2		8	13	29	52	129	171	13	121	69	
NUMBER OF RESPONDENTS	197 100%	3540 100%	2	45	50	46	54	115	4	2		8	14	31	54	132	174	14	126	71	
			100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
Q38 #YES	154 81%	2956 85%	2 100%	42 95%	44 90%	29 64%	37 76%	92 81%	4 100%	2 100%	6 75%	9 69%	23 79%	42 82%	105 80%	141 83%	9 64%	99 82%	55 81%
NO	35 19%	518 15%	~	5 5%	10 10%	16 36%	12 24%	22 19%	~	~	2 25%	4 31%	6 21%	9 18%	26 20%	29 17%	5 36%	22 18%	13 19%
NOT ANSWERED	8	66		1	1	1	5	1				1	2	3	1	4		5	3
VALID CASES	189	3474	2	44	49	45	49	114	4	2	8	13	29	51	131	170	14	121	68
NUMBER OF RESPONDENTS	197 100%	3540 100%	2 100%	45 100%	50 100%	46 100%	54 100%	115 100%	4 100%	2 100%	8 100%	14 100%	31 100%	54 100%	132 100%	174 100%	14 100%	126 100%	71 100%

[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?

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q39 YES	77 41%	1340 39%	1 100%	20 45%	16 33%	20 43%	20 40%	49 43%	1 25%	~	3 ~	2 38%	13 15%	19 38%	55 42%	69 40%	7 54%	40 33%*	37 54%*	
Q39 NO	112 59%	2127 61%	~	24 55%	32 67%	26 57%	30 60%	64 57%	3 75%	2 100%	~	5 63%	11 85%	18 58%	31 62%	76 58%	102 60%	6 46%	80 67%*	32 46%*
NOT ANSWERED	8	73	1	1	2	4	2					1		4	1	3	1	6	2	
VALID CASES	189	3467	1	44	48	46	50	113	4	2		8	13	31	50	131	171	13	120	69
NUMBER OF RESPONDENTS	197	3540	2	45	50	46	54	115	4	2		8	14	31	54	132	174	14	126	71
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHTE	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q40 NEVER	5 7%	102 8%	~	~	~	10%~	16%~	8%~	~	~	~	~	8%~	5%~	7%~	7%~	~	12%~	~
SOMETIMES	13 17%	189 15%	~	15%~	19%~	25%~	11%~	18%~	~	~	33%~	50%~	~	32%~	13%~	16%~	29%~	12%~	22%~
USUALLY	18 24%	353 28%	~	25%~	38%~	15%~	21%~	16%~	100%~	~	67%~	~	33%~	37%~	19%~	22%~	43%~	15%~	33%~
ALWAYS	40 53%	630 49%	100%~	60%~	44%~	50%~	53%~	57%~	~	~	50%~	58%~	26%~	61%~	54%~	29%~	60%~	44%~	~
#ALWAYS + USUALLY (NET)	58 76%	983 77%	100%~	85%~	81%~	65%~	74%~	73%~	100%~	~	67%~	50%~	92%~	63%~	80%~	76%~	71%~	75%~	78%~
TOP BOX SCORE	40 53%	630 49%	100%~	60%~	44%~	50%~	53%~	57%~	~	~	50%~	58%~	26%~	61%~	54%~	29%~	60%~	44%~	~
NOT ANSWERED	1	48					1					1		1					1
VALID CASES	76	1274	1	20	16	20	19	49	1		3	2	12	19	54	68	7	40	36
NUMBER OF RESPONDENTS	77	1322	1	20	16	20	20	49	1		3	2	13	19	55	69	7	40	37
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q41 WORST PERSONAL DOCTOR POSSIBLE	1 0.4%	7 0.1%	~	~	~	1%~	~	~	~	~	~	~	1 3%	1 1%	1 0.4%	~	1 0.6%	~		
01		17 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
02		17 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
03	4 2%	21 0.4%	~	~	~	4% 1%	1 1%	4 2%	~	~	~	~	~	2 3%	2 1%	4 2%	~	2 1%	2 2%	
04	2 0.8%	41 0.9%	~	~	~	1% 1%	1 1%	~	~	~	~	1 6%	1 3%	1 1%	1 0.6%	2 0.8%	~	1 0.6%	1 1%	
05	10 4%	139 3%	~	~	1 2%	3 4%	6 8%	6 4%	~	~	~	2 13%	2 6%	4 5%	5 3%	9 4%	1 6%	7 4%	3 4%	
06	10 4%	111 2%	~	2 4%	2 3%	2 3%	4 6%	6 4%	~	~	~	2 13%	2 6%	4 5%	6 3%	9 4%	1 6%	7 4%	3 4%	
07	16 6%	320 7%	~	3 6%	2 3%	5 7%	6 8%	11 6%	1 25%	1 50%	~	~	~	2 6%	2 3%	14 8%*	2 12%	10 6%	6 7%	
08	37 14%	785 16%	~	13 25%*	9 14%	8 11%	7 10%	25 15%	1 25%	1 50%	~	1 13%	1 6%	4 12%	5 7%*	30 17%*	35 15%	~	30 17%	7 9%
09	61 23%	988 21%	1 33%	12 24%	17 27%	20 28%	11 15%*	44 26%	1 25%	~	~	1 13%	3 19%	4 12%	24 32%	35 20%	53 22%	7 41%	38 21%	23 28%
BEST PERSONAL DOCTOR POSSIBLE	119 46%	2358 49%	2 67%	21 41%	32 51%	29 40%	35 49%	75 44%	1 25%	~	~	6 75%	7 44%	18 53%	33 43%	83 47%	112 47%	6 35%	83 46%	36 44%
#8-10 (NET)	217 83%	4130 86%	3 100%	46 90%	58 92%*	57 79%	53 75%*	144 84%	3 75%	1 50%	~	8 100%	11 69%	26 76%	62 82%	148 84%	200 84%	13 76%	151 84%	66 81%

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			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR POOR	NO CCC	CCC		
9-10 (NET)	180 69%	3346 70%	3 100%	33 65%	49 78%	49 68%	46 65%	119 70%	2 50%	~	~	7 87%	10 62%	22 65%	57 75%	118 67%	165 69%	13 76%	121 68%	59 73%
NOT ANSWERED	12	249		3	2	4	3	5				1	1		4	5	7		10	2
VALID CASES	260	4804	3	51	63	72	71	171	4	2		8	16	34	76	176	239	17	179	81
NUMBER OF RESPONDENTS	272 100%	5053 100%	3 100%	54 100%	65 100%	76 100%	74 100%	176 100%	4 100%	2 100%		9 100%	17 100%	34 100%	80 100%	181 100%	246 100%	17 100%	189 100%	83 100%
MEAN	8.76	8.87	9.67	8.92	9.14	8.46	8.56	8.78	8.50	7.50		9.62	8.19	8.47	8.61	8.83	8.76	8.71	8.77	8.74
p stat_(*=Sig @ p<=.05)		.237	~.313	.010	*.130	.289	.801	~	~	~	~	~	~	~	.408	.372	~	~	.915	.914

[ASKED IF Q30 = YES]

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

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q42 YES	80 31%	1181 24%*	14 ~ 27%	17 27%	24 34%	25 35%	55 32%	3 75%~	1 50%~	3 ~ 38%~	3 19%~	11 32%~	18 24%	60 34%	69 29%~	11 65%~	14 8%*	66 81%*	
NO	178 69%	3655 76%*	2 100%~	37 ~ 73%	46 73%	46 66%	115 68%	1 25%~	1 50%~	5 ~ 63%~	13 81%~	23 68%~	56 76%	116 66%	168 71%~	6 35%~	163 92%*	15 19%*	
NOT ANSWERED	14	217	1	3	2	5	3	6		1	1		6	5	9		12	2	
VALID CASES	258	4836	2	51	63	71	71	170	4	2	8	16	34	74	176	237	17	177	81
NUMBER OF RESPONDENTS	272	5053	3	54	65	76	74	176	4	2	9	17	34	80	181	246	17	189	83
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
Q43 #YES	71 92%	1018 86%	13 ~100%	15 ~88%	22 96%	21 88%	48 89%	3 100%	1 100%		3 100%	2 100%	10 100%	15 94%	54 92%	61 91%	10 100%	10 83%	61 94%
NO	6 8%	160 14%		2 ~12%	1 4%	3 12%	6 11%							1 6%	5 8%	6 9%		2 17%	4 6%
NOT ANSWERED	3	36	1		1	1	1					1	1	2	1	2	1	2	1
VALID CASES	77	1178	13	17	23	24	54	3	1		3	2	10	16	59	67	10	12	65
NUMBER OF RESPONDENTS	80 100%	1214 100%	14 100%	17 100%	24 100%	25 100%	55 100%	3 100%	1 100%		3 100%	3 100%	11 100%	18 100%	60 100%	69 100%	11 100%	14 100%	66 100%

[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		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q44 #YES	64 83%	992 85%	14 ~100%	13 81%	19 83%	18 75%	43 80%	3 100%	1 100%		3 100%	2 100%	9 90%	13 81%	49 83%	56 84%	8 80%	8 73%	56 85%
NO	13 17%	179 15%		3 ~19%	4 17%	6 25%	11 20%						1 10%	3 19%	10 17%	11 16%	2 20%	3 27%	10 15%
NOT ANSWERED	3	43		1	1	1	1					1	1	2	1	2	1	3	
VALID CASES	77	1171	14	16	23	24	54	3	1		3	2	10	16	59	67	10	11	66
NUMBER OF RESPONDENTS	80 100%	1214 100%	14 100%	17 100%	24 100%	25 100%	55 100%	3 100%	1 100%		3 100%	3 100%	11 100%	18 100%	60 100%	69 100%	11 100%	14 100%	66 100%

[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				
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q45 YES	44 13%	817 14%	~	14%	16%	14%	11%	32 16%	2 50%~	~	~	18%~	2 8%~	2 10%~	4 14%	15 14%	29 14%	38 12%~	6 32%~	16 7%*	28 30%*
NO	283 87%	4882 86%	100%~	86%	84%	86%	89%	174 84%	2 50%~	3 100%~	~	82%~	9 92%~	23 90%~	38 90%~	95 86%	181 86%	267 88%~	13 68%~	219 93%*	64 70%*
NOT ANSWERED	15	319	1	4	2	2	6	2				1			3	2	2	1	14	1	
VALID CASES	327	5699	2	59	76	102	88	206	4	3		11	25	42	110	210	305	19	235	92	
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%		12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%	

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		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q46 NEVER	5 11%	42 5%	~	~	2 17%	3 21%	5 16%	~	~	~	~	~	~	3 20%	2 7%	5 13%	~	3 19%	2 7%	
SOMETIMES	5 11%	149 19%	~	1 13%	2 17%	1 7%	1 10%	4 12%	~	~	~	~	1 25%	~	5 17%	4 11%	1 17%	1 6%	4 14%	
USUALLY	13 30%	195 25%	~	1 13%	4 33%	4 29%	4 40%	8 25%	2 100%	~	~	~	1 50%	1 25%	6 40%	7 24%	10 26%	3 50%	4 25%	9 32%
ALWAYS	21 48%	401 51%	~	6 75%	4 33%	6 43%	5 50%	15 47%	~	~	~	2 100%	1 50%	2 50%	6 40%	15 52%	19 50%	2 33%	8 50%	13 46%
#ALWAYS + USUALLY (NET)	34 77%	596 76%	~	7 87%	8 67%	10 71%	9 90%	23 72%	2 100%	~	~	2 100%	2 100%	3 75%	12 80%	22 76%	29 76%	5 83%	12 75%	22 79%
TOP BOX SCORE	21 48%	401 51%	~	6 75%	4 33%	6 43%	5 50%	15 47%	~	~	~	2 100%	1 50%	2 50%	6 40%	15 52%	19 50%	2 33%	8 50%	13 46%
NOT ANSWERED		26																		
VALID CASES	44	787		8	12	14	10	32	2			2	2	4	15	29	38	6	16	28
NUMBER OF RESPONDENTS	44	813		8	12	14	10	32	2			2	2	4	15	29	38	6	16	28
	100%	100%		100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q47 NONE	6 14%	60 8%	~	13%	8%	21%	10%	5	1	~	~	~	~	~	3	3	6	16%	3	3
1 SPECIALIST	29 66%	510 64%	~	63%	42%	71%	90%	21	1	~	~	2	2	2	9	20	26	3	10	19
2	5 11%	153 19%	~	13%	33%	~	~	3	~	~	~	~	~	1	2	3	3	2	2	3
3	1 2%	36 5%	~	~	~	7%	~	~	~	~	~	~	~	1	1	~	1	~	1	~
4	2 5%	16 2%	~	~	17%	~	~	2	~	~	~	~	~	~	2	~	1	1	~	2
5 OR MORE SPECIALISTS	1 2%	17 2%	~	13%	~	~	~	1	~	~	~	~	~	~	1	~	1	~	~	1
NOT ANSWERED		21																		
VALID CASES	44	792		8	12	14	10	32	2			2	2	4	15	29	38	6	16	28
NUMBER OF RESPONDENTS	44	813		8	12	14	10	32	2			2	2	4	15	29	38	6	16	28
	100%	100%		100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

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

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ NATV	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC		
Q48 WORST SPECIALIST POSSIBLE		3 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
01		2 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
02		1 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
03		2 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
04		5 0.6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
05	1 3%	22 3%	~	~	~	13%	1 4%	~	~	~	~	~	~	1 4%	1 3%	~	~	1 4%		
06	3 8%	34 5%	~	14%	1 9%	1 9%	2 7%	~	~	~	~	~	1 25%	3 12%	3 10%	~	1 8%	2 8%		
07	4 11%	53 8%	~	14%	1 9%	2 18%	3 11%	1 100%	~	~	~	~	~	4 15%	4 13%	~	1 8%	3 12%		
08	1 3%	121 17%	~	14%	1 ~	~	1 4%	~	~	~	~	~	~	1 9%	1 3%	~	~	1 4%		
09	9 24%	144 20%	~	29%	2 18%	4 36%	1 13%	6 22%	~	~	1 50%	~	1 25%	4 36%	5 19%	8 26%	1 17%	4 33%	5 20%	
BEST SPECIALIST POSSIBLE	19 51%	324 45%	~	29%	2 64%	7 36%	4 36%	6 75%	14 52%	~	~	1 50%	1 100%	2 50%	6 55%	13 50%	14 45%	5 83%	6 50%	13 52%

Continued

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR AFR-	AMER IAN	NATV HAW/ ILND	AMER IND/ NATV	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC
#8-10 (NET)	29 78%	589 83%	5 ~ 71%	9 ~ 82%	8 ~ 73%	7 ~ 87%	21 78%			2 ~ 100%	1 ~ 100%	3 ~ 75%	11 100%	18 69%	23 74%	6 100%	10 83%	19 76%
9-10 (NET)	28 76%	468 66%	4 ~ 57%	9 ~ 82%	8 ~ 73%	7 ~ 87%	20 74%			2 ~ 100%	1 ~ 100%	3 ~ 75%	10 91%	18 69%	22 71%	6 100%	10 83%	18 72%
NOT ANSWERED	1	9				1					1		1		1		1	
VALID CASES	37	712	7	11	11	8	27	1		2	1	4	11	26	31	6	12	25
NUMBER OF RESPONDENTS	38	721	7	11	11	9	27	1		2	2	4	12	26	32	6	13	25
	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%
MEAN	8.92	8.75	8.43	9.18	8.73	9.25	8.89	7.00		9.50	10.0	8.75	9.45	8.69	8.74	9.83	9.08	8.84
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?

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q49 YES	54 17%	1474 26%*	1 50%~	11 19%	14 19%	16 16%	12 13%	33 16%	1 ~	33%~	2 ~	4 18%~	6 16%~	6 15%~	22 20%	30 14%	48 16%~	6 33%~	43 18%	11 12%
NO	270 83%	4149 74%*	1 50%~	48 81%	60 81%	84 84%	77 87%	172 84%	4 100%~	2 67%~	9 ~	21 82%~	35 84%~	88 85%~	178 80%	178 86%	256 84%~	12 67%~	191 82%	79 88%
NOT ANSWERED	18	395	1	4	4	4	5	3			1		1	3	4	3	2	15	3	
VALID CASES	324	5623	2	59	74	100	89	205	4	3	11	25	41	110	208	304	18	234	90	
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%	12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%	

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		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q50 NEVER	1 2%	37 3%	~	~	1 7%	~	~	1 3%	~	~	~	~	~	1 3%	1 2%	~	1 2%	~	~
SOMETIMES	9 17%	224 17%	~	2 18%	2 14%	4 27%	1 8%	5 15%	~	~	1 50%	2 33%	4 19%	5 17%	7 15%	2 33%	4 10%	5 45%	~
USUALLY	16 30%	391 30%	~	2 18%	9 64%	4 27%	1 8%	10 30%	~	~	~	~	3 50%	6 29%	9 30%	16 34%	~	13 31%	3 27%
ALWAYS	27 51%	645 50%	100%	1 64%	7 14%	2 47%	7 83%	10 52%	1 100%	~	1 50%	4 100%	1 17%	11 52%	15 50%	23 49%	4 67%	24 57%	3 27%
#ALWAYS + USUALLY (NET)	43 81%	1037 80%	100%	1 82%	9 79%	11 73%	11 92%	27 82%	1 100%	~	1 50%	4 100%	4 67%	17 81%	24 80%	39 83%	4 67%	37 88%	6 55%
TOP BOX SCORE	27 51%	645 50%	100%	1 64%	7 14%	2 47%	7 83%	10 52%	1 100%	~	1 50%	4 100%	1 17%	11 52%	15 50%	23 49%	4 67%	24 57%	3 27%
NOT ANSWERED	1	44				1							1		1		1		
VALID CASES	53	1297	1	11	14	15	12	33	1		2	4	6	21	30	47	6	42	11
NUMBER OF RESPONDENTS	54	1341	1	11	14	16	12	33	1		2	4	6	22	30	48	6	43	11
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]

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

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER HAW/ PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q51 NEVER	31 2%		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	4 8%	120 9%	100%~	9%~	7%~	7%~	9%~	~	~	~	~	~	17%~	10%~	7%~	9%~	~	7%~	9%~
USUALLY	15 29%	278 21%	~ 18%~	2 50%~	7 36%~	5 36%~	1 8%~	8 25%~	~	~	1 50%~	~	3 50%~	6 29%~	9 31%~	13 28%~	2 33%~	8 20%~	7 64%~
ALWAYS	33 63%	871 67%	~ 73%~	8 43%~	6 43%~	8 57%~	11 92%~	21 66%~	1 ~100%~	1 ~ 50%~	4 ~100%~	2 33%~	13 62%~	18 62%~	29 63%~	4 67%~	30 73%~	3 27%~	
#ALWAYS + USUALLY (NET)	48 92%	1149 88%	~ 91%~	10 93%~	13 93%~	13 93%~	12 100%~	29 91%~	1 ~100%~	2 ~100%~	4 ~100%~	5 83%~	19 90%~	27 93%~	42 91%~	6 100%~	38 93%~	10 91%~	
TOP BOX SCORE	33 63%	871 67%	~ 73%~	8 43%~	6 43%~	8 57%~	11 92%~	21 66%~	1 ~100%~	1 ~ 50%~	4 ~100%~	2 33%~	13 62%~	18 62%~	29 63%~	4 67%~	30 73%~	3 27%~	
NOT ANSWERED	2	41				2	1						1	1	2		2		
VALID CASES	52	1300	1	11	14	14	12	32	1	2	4	6	21	29	46	6	41	11	
NUMBER OF RESPONDENTS	54	1341	1	11	14	16	12	33	1	2	4	6	22	30	48	6	43	11	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]

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

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q52 YES	72 22%	1596 29%*	1 50%~	15 26%	18 24%	22 22%	16 18%	38 18%*	1 25%~	~	~	5 45%~	8 33%~	16 38%~	29 27%	40 19%	66 22%~	5 26%~	51 22%	21 23%
NO	253 78%	3983 71%*	1 50%~	43 74%	57 76%	79 78%	73 82%	168 82%*	3 75%~	3 100%~	~	6 55%~	16 67%~	26 62%~	80 73%	170 81%	238 78%~	14 74%~	183 78%	70 77%
NOT ANSWERED	17	439	1	5	3	3	5	2				1	1		4	2	3	1	15	2
VALID CASES	325	5579	2	58	75	101	89	206	4	3		11	24	42	109	210	304	19	234	91
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%		12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%

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			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
PQ53 NEVER	3 0.9%	65 1%	~	~	~	2%	1%	~	~	~	~	~	4%~	5%~	3%	~	3	1	2	1
SOMETIMES	12 4%	282 5%	~	5%	3%	1%*	7%	6	~	~	~	9%~	8%~	7%~	4%	8	11	1	7	5
USUALLY	22 7%	520 9%	~	10%	9%	5%	4%	14	1	~	~	18%~	~	12%~	7%	13	20	2	13	9
ALWAYS	286 89%	4656 84%*	2	49	66	91	78	185	3	3	~	8	21	31	94	188	268	16	211	75
#ALWAYS + USUALLY (NET)	308 95%	5175 94%	2	55	73	96	82	199	4	3	~	10	21	36	101	201	288	18	224	84
TOP BOX SCORE	286 89%	4656 84%*	2	49	66	91	78	185	3	3	~	8	21	31	94	188	268	16	211	75
NOT ANSWERED	2	67				2		1						1	1	1	2		1	1
VALID CASES	323	5523	2	58	75	99	89	205	4	3		11	24	41	108	209	302	19	233	90
NUMBER OF RESPONDENTS	325 100%	5590 100%	2	58	75	101	89	206	4	3		11	24	42	109	210	304	19	234	91
			100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER											
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC									
Q54 WORST HEALTH PLAN POSSIBLE	1 0.3%	18 0.3%	~	~	1%~	~	~	0.5%~	~	~	~	~	~	~	1 ~0.5%	1 ~0.3%	~	1 ~0.4%	~									
01	1 0.3%	11 0.2%	~	~	~	1%~	~	0.5%~	~	~	~	~	~	1 ~0.9%	1 ~0.3%	~	~	1 ~1%	~									
02		27 0.5%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~								
03	4 1%	40 0.7%	~	~	1%~	1%~	2%~	0.5%~	1%~	33%~	~	~	9%~	~	2%~	2%~	1%~	4%~	3%~	1%~								
04	6 2%	53 0.9%	~	1%~	~	3%~	2%~	1%~	~	~	~	~	4%~	1%~	2%~	5%~	0.9%~	2%~	6%~	4%~	2%~							
05	20 6%	288 5%	~	4%~	8%~	11%~	4%~	4%~	16%~	~	~	~	~	~	7%~	3%~	4%~	16%~	19%~	1%~	13%~	7%~						
06	20 6%	265 5%	~	~	7%~	7%~	9%~	17%~	8%*	1%~	33%~	~	~	~	~	5%~	2%~	4%~	16%~	16%~	4%~	12%~	8%~					
07	31 10%	565 10%	33%~	1%~	8%~	9%~	6%~	9%~	22%~	11%~	~	33%~	~	~	4%~	1%~	6%~	4%~	27%~	30%~	1%~	20%~	11%~					
08	54 17%	980 18%	~	11%~	14%~	18%~	11%~	12%~	32%~	16%~	1%~	1%~	33%~	~	~	20%~	5%~	11%~	15%~	38%~	52%~	2%~	39%~	15%~				
09	59 18%	1008 18%	~	11%~	15%~	17%~	16%~	18%~	39%~	19%~	~	1%~	33%~	~	27%~	16%~	12%~	4%~	5%~	21%~	37%~	55%~	4%~	43%~	16%~			
BEST HEALTH PLAN POSSIBLE	127 39%	2334 42%	67%~	2%~	23%~	23%~	43%~	36%~	71%~	35%*	~	~	~	~	64%~	7%~	14%~	12%~	29%~	59%~	64%~	53%*	31%*	39%~	8%~	99%~	28%~	
#8-10 (NET)	240 74%	4322 77%	67%~	2%~	45%~	52%~	78%~	63%~	142%~	70%*	1%~	2%~	33%~	67%~	~	91%~	10%~	23%~	28%~	67%~	95%~	139%~	86%*	67%*	224%~	14%~	181%~	59%~

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		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR POOR	NO CCC	CCC	
9-10 (NET)	186 58%	3342 60%	2 67%	34 59%	38 51%	60 60%	52 59%	110 54%	1 ~ 33%	10 ~ 91%	18 72%	17 40%	80 72%*	101 49%*	172 57%	12 60%	142 61%	44 49%	
NOT ANSWERED	19	430		5	4	4	6	5	1		1		2	6	6		15	4	
VALID CASES	323	5588	3	58	74	100	88	203	3	3	11	25	42	111	206	301	20	234	89
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%	12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%
MEAN	8.38	8.52	9.00	8.57	8.09	8.47	8.38	8.22	5.67	8.00	9.09	9.08	7.93	8.85	8.10	8.37	8.40	8.51	8.04
p stat_(*=Sig @ p<=.05)		.152	~.342	.134	.567	.973	.043*	~	~	~	~	~	~	.001*	.000*	~	~	.057	.055

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

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q55 YES	128 39%	2224 39%	1 33%~	28 47%	28 38%	34 34%	37 42%	78 38%	2 50%~	1 33%~		6 ~	10 55%~	20 40%~	35 32%*	91 43%*	116 38%~	12 60%~	65 28%*	63 68%*
NO	198 61%	3434 61%	2 67%~	31 53%	46 62%	67 66%	52 58%	129 62%	2 50%~	2 67%~		5 ~	15 45%~	22 60%~	76 68%*	119 57%*	189 62%~	8 40%~	169 72%*	29 32%*
NOT ANSWERED	16	359		4	4	3	5	1				1			2	2	2		15	1
VALID CASES	326	5659	3	59	74	101	89	207	4	3		11	25	42	111	210	305	20	234	92
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%		12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q56 NEVER	5 4%	36 2%		1 4%	1 4%	1 3%	2 5%	2 3%	1 100%			1 5%	1 3%	4 4%	5 4%		2 3%	3 5%	
SOMETIMES	15 12%	208 9%		2 7%	4 15%	7 21%	2 5%	8 10%			1 17%	1 10%	4 21%	4 11%	11 12%	3 25%	6 9%	9 14%	
USUALLY	36 28%	522 24%	1 100%	11 39%	6 22%	10 29%	8 22%	24 31%	2 100%		1 17%	4 40%	3 16%	14 40%	20 22%	32 28%	4 33%	13 20%*	23 37%*
ALWAYS	71 56%	1443 65%*		14 50%	16 59%	16 47%	25 68%	44 56%			4 67%	5 50%	11 58%	16 46%	55 61%	66 57%	5 42%	43 67%*	28 44%*
#ALWAYS + USUALLY (NET)	107 84%	1964 89%	1 100%	25 89%	22 81%	26 76%	33 89%	68 87%	2 100%		5 83%	9 90%	14 74%	30 86%	75 83%	98 85%	9 75%	56 88%	51 81%
TOP BOX SCORE	71 56%	1443 65%*		14 50%	16 59%	16 47%	25 68%	44 56%			4 67%	5 50%	11 58%	16 46%	55 61%	66 57%	5 42%	43 67%*	28 44%*
NOT ANSWERED	1	47			1							1		1	1		1		
VALID CASES	127	2208	1	28	27	34	37	78	2	1	6	10	19	35	90	115	12	64	63
NUMBER OF RESPONDENTS	128	2255	1	28	28	34	37	78	2	1	6	10	20	35	91	116	12	65	63
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q57 #YES	72 58%	1308 61%	1 100%	16 59%	19 73%	17 50%	19 51%	41 53%	1 50%	1 100%	4 67%	8 80%	12 63%	23 68%	49 55%	64 56%	8 73%	36 57%	36 58%
NO	53 42%	853 39%		11 41%	7 27%	17 50%	18 49%	36 47%	1 50%		2 33%	2 20%	7 37%	11 32%	40 45%	50 44%	3 27%	27 43%	26 42%
NOT ANSWERED	3	94		1	2		1						1	1	2	2	1	2	1
VALID CASES	125	2161	1	27	26	34	37	77	2	1	6	10	19	34	89	114	11	63	62
NUMBER OF RESPONDENTS	128 100%	2255 100%	1 100%	28 100%	28 100%	34 100%	37 100%	78 100%	2 100%	1 100%	6 100%	10 100%	20 100%	35 100%	91 100%	116 100%	12 100%	65 100%	63 100%

[ASKED IF Q55 = YES]

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q58																				
EXCELLENT	133 41%	2291 40%	1 33%~	27 46%	27 36%	45 44%	33 38%	80 38%	1 25%~	1 33%~	5 ~ 45%~	9 36%~	21 50%~	41 37%	91 43%	133 43%~	~	117 50%*	16 17%*	
VERY GOOD	116 35%	2006 35%	~	15 25%	34 45%*	37 36%	30 34%	85 41%*	3 75%~	1 33%~	5 ~ 45%~	5 20%~	12 29%~	32 29%	81 38%	116 38%~	~	77 33%	39 42%	
GOOD	58 18%	1106 20%	2 67%~	14 24%	9 12%	15 15%	18 20%	32 15%	~	1 33%~	1 ~ 9%~	7 28%~	7 17%~	29 26%*	28 13%*	58 19%~	~	31 13%*	27 29%*	
FAIR	20 6%	239 4%	~	3 5%	5 7%	5 5%	7 8%	11 5%	~	~	~	~	4 ~ 16%~	2 5%	9 8%	11 5%	20 ~100%~	10 4%	10 11%	
POOR		17 0.3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
#EXCELLENT + VERY GOOD + GOOD (NET)	307 94%	5403 95%	3 100%~	56 95%	70 93%	97 95%	81 92%	197 95%	4 100%~	3 100%~	11 ~100%~	21 84%~	40 95%~	102 92%	200 95%	307 100%~	~	225 96%	82 89%	
NOT ANSWERED	15	359		4	3	2	6				1			2	1			14	1	
VALID CASES	327	5659	3	59	75	102	88	208	4	3	11	25	42	111	211	307	20	235	92	
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%	12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%	

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q59																				
EXCELLENT	141 43%	2506 44%	1 33%~	34 59%*	35 47%	40 39%	31 35%	89 43%	2 ~	4 67%~	12 ~	18 44%~	53 47%	87 42%	139 45%~	2 11%~	122 52%*	19 21%*		
VERY GOOD	87 27%	1630 29%	1 33%~	14 24%	20 27%	30 29%	22 25%	55 27%	2 50%~	5 ~	5 45%~	11 20%~	27 27%	57 27%	86 28%~	1 6%~	70 30%*	17 19%*		
GOOD	73 22%	1044 18%	1 33%~	7 12%*	15 20%	25 25%	25 28%	46 22%	1 25%~	1 33%~	1 ~	7 9%~	8 28%~	20 20%~	28 25%	45 22%	64 21%~	9 50%~	40 17%*	33 37%*
FAIR	23 7%	420 7%	~	3 5%	3 4%	7 7%	10 11%	15 7%	1 25%~	~	1 ~	1 9%~	4 4%~	4 10%~	4 4%*	18 9%	17 6%~	5 28%~	4 2%*	19 21%*
POOR	2 0.6%	74 1%	~	~	1 1%	~	1 1%	2 1%	~	~	~	~	~	~	2 ~	1 0.3%~	1 6%~	~	2 2%	
#EXCELLENT + VERY GOOD + GOOD (NET)	301 92%	5181 91%	3 100%~	55 95%	70 95%	95 93%	78 88%	190 92%	3 75%~	3 100%~	10 ~	24 91%~	37 96%~	108 96%*	189 90%	289 94%~	12 67%~	232 98%*	69 77%*	
NOT ANSWERED	16	344		5	4	2	5	1			1	1	1	3		2	13	3		
VALID CASES	326	5674	3	58	74	102	89	207	4	3	11	25	41	112	209	307	18	236	90	
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%	12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%	

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

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q60 YES	79 24%	1197 21%	14 ~ 24%	16 21%	21 21%	28 32%	50 24%	1 25%~	1 33%~	5 ~ 45%~	3 12%~	13 32%~	18 16%*	59 28%*	67 22%~	12 60%~	22 9%*	57 62%*	
NO	246 76%	4478 79%	2 100%~	45 76%	59 79%	81 79%	59 68%	157 76%	3 75%~	2 67%~	6 ~ 55%~	22 88%~	28 68%~	93 84%*	151 72%*	237 78%~	8 40%~	211 91%*	35 38%*
NOT ANSWERED	17	343	1	4	3	2	7	1			1	1	2	2	3		16	1	
VALID CASES	325	5675	2	59	75	102	87	207	4	3	11	25	41	111	210	304	20	233	92
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%	12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q61 YES	58 74%	945 79%	8 ~ 57%	13 81%	18 86%	19 70%	39 80%	1 100%	1 100%	4 ~ 80%	9 ~ 69%	10 56%	47 81%	49 74%	9 75%	3 14%	55 96%		
NO	20 26%	248 21%	6 ~ 43%	3 19%	3 14%	8 30%	10 20%			1 ~ 20%	3 100%	4 31%	8 44%	11 19%	17 26%	3 25%	18 86%	2 4%	
NOT ANSWERED	1	41				1	1						1	1			1		
VALID CASES	78	1192	14	16	21	27	49	1	1	5	3	13	18	58	66	12	21	57	
NUMBER OF RESPONDENTS	79	1233	14	16	21	28	50	1	1	5	3	13	18	59	67	12	22	57	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q60 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q62 YES	54 96%	867 92%	7 ~ 87%	12 ~100%	18 ~100%	17 ~ 94%	37 97%	1 100%	1 100%	3 ~ 75%	8 ~100%	10 100%	43 100%	96% 96%	45 96%	9 100%	54 ~100%		
NO	2 4%	75 8%	1 ~ 13%	~	~	1 6%	1 3%	~	~	1 ~ 25%	~	~	~	2 4%	2 4%	2 ~100%	2 ~		
NOT ANSWERED	2	13		1		1	1					1		2	2		1	1	
VALID CASES	56	942	8	12	18	18	38	1	1	4	8	10	45	47	9	2	54		
NUMBER OF RESPONDENTS	58 100%	955 100%	8 100%	13 100%	18 100%	19 100%	39 100%	1 100%	1 100%	4 100%	9 100%	10 100%	47 100%	49 100%	9 100%	3 100%	55 100%		

[ASKED IF Q60 = YES AND Q61 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q63 YES	57 18%	872 15%		8 ~ 14%	12 16%	20 20%	17 19%	39 19%	2 50%~	1 33%~		2 ~ 18%~	2 8%~	8 19%~	14 13%	41 20%	49 16%~	8 42%~	2 0.9%*	55 61%*
NO	267 82%	4772 85%	2 100%~	51 86%	61 84%	82 80%	71 81%	166 81%	2 50%~	2 67%~		9 ~ 82%~	23 92%~	34 81%~	95 87%	169 80%	255 84%~	11 58%~	232 99%*	35 39%*
NOT ANSWERED	18	374	1	4	5	2	6	3				1		4	2	3	1	15	3	
VALID CASES	324	5644	2	59	73	102	88	205	4	3		11	25	42	109	210	304	19	234	90
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%		12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%

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

	AGE					RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q64 YES	54 95%	716 83%*	8 ~100%	11 ~92%	18 90%	17 100%	39 100%	2 100%	1 100%		2 100%	2 100%	6 75%	12 86%	41 100%		46 94%	8 100%	2 100%	52 95%
NO	3 5%	150 17%*		1 8%	2 10%								2 25%	2 14%			3 6%			3 5%
NOT ANSWERED		15																		
VALID CASES	57	866	8	12	20	17	39	2	1		2	2	8	14	41		49	8	2	55
NUMBER OF RESPONDENTS	57	881	8	12	20	17	39	2	1		2	2	8	14	41		49	8	2	55
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%		100%	100%	100%	100%

[ASKED IF Q63 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q65 YES	51 98%	679 96%	8 ~100%	11 ~100%	17 ~100%	15 94%	37 ~100%	2 ~100%	1 ~100%	2 ~100%	1 50%	6 ~100%	11 100%	39 98%	45 100%	6 86%	51 ~100%		
NO	1 2%	29 4%	~	~	~	1 6%	~	~	~	~	1 50%	~	~	1 2%	~	1 14%	1 100%	~	~
NOT ANSWERED	2	17				1 1	2						1	1	1	1	1	1	1
VALID CASES	52	708	8	11	17	16	37	2	1	2	2	6	11	40	45	7	1	51	
NUMBER OF RESPONDENTS	54 100%	725 100%	8 100%	11 100%	18 100%	17 100%	39 100%	2 100%	1 100%	2 100%	2 100%	6 100%	12 100%	41 100%	46 100%	8 100%	2 100%	52 100%	

[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		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q66 YES	43 13%	674 12%	10 ~ 17%	9 12%	13 13%	11 12%	28 14%	1 25%~	~	2 ~ 18%~	2 8%~	8 19%~	11 10%	30 14%	36 12%~	7 37%~	6 3%*	37 41%*	
NO	283 87%	4980 88%	2 100%~	49 83%	65 88%	89 87%	78 88%	179 86%	3 75%~	3 100%~	9 ~ 82%~	23 92%~	34 81%~	99 90%	181 86%	270 88%~	12 63%~	229 97%*	54 59%*
NOT ANSWERED	16	364	1	4	4	2	5	1			1		3	1	1	1	14	2	
VALID CASES	326	5654	2	59	74	102	89	207	4	3	11	25	42	110	211	306	19	235	91
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%	12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q67 YES	36	505	6	9	11	10	27	1		2		6	7	27	29	7		36	
	86%	79%	~ 60%	~ 100%	~ 92%	~ 91%	96%	~ 100%	~	~ 100%	~	75%	70%	~ 90%	83%	~ 100%	~	97%	
NO	6	133	4		1	1	1					2	2	3	3	6		5	1
	14%	21%	~ 40%	~	8%	9%	4%	~	~	~	~	100%	25%	30%	~ 10%	17%	~	100%	3%
NOT ANSWERED	1	30			1									1		1		1	
VALID CASES	42	638	10	9	12	11	28	1		2	2	8	10	30	35	7		5	37
NUMBER OF RESPONDENTS	43	668	10	9	13	11	28	1		2	2	8	11	30	36	7		6	37
	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%		100%	100%

[ASKED IF Q66 = YES]

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

	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q68 YES	36	510	6	9	11	10	27	1		2		6	7	27	29	7		36
	100%	96%	~100%	~100%	~100%	~100%	~100%	~100%	~	~100%	~	~100%	~100%	~100%	~100%	~100%	~	~100%
NO		19																
		4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		5																
VALID CASES	36	529	6	9	11	10	27	1		2		6	7	27	29	7		36
NUMBER OF RESPONDENTS	36	534	6	9	11	10	27	1		2		6	7	27	29	7		36
	100%	100%	100%	100%	100%	100%	100%	100%		100%		100%	100%	100%	100%	100%		100%

[ASKED IF Q66 = YES AND Q67 = YES]

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

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
Q69 YES	23 7%	583 10%*	~	4 7%	8 11%	8 8%	3 3%	18 9%	1 25%~	~	~	~	~	1 4%~	3 7%~	6 5%	17 8%	20 7%~	3 16%~	5 2%*	18 20%*
NO	303 93%	5081 90%*	100%~	2 93%	55 89%	66 92%	94 97%	86 91%	189 91%	3 75%~	3 100%~	~	11 ~100%~	24 96%~	39 93%~	104 95%	194 92%	286 93%~	16 84%~	230 98%*	73 80%*
NOT ANSWERED	16	354	1	4	4	2	5	1					1			3	1	1	1	14	2
VALID CASES	326	5664	2	59	74	102	89	207	4	3		11	25	42	110	211	306	19	235	91	
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%		12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%	

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK NATV	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q70 YES	19 83%	317 61%	4 ~100%	6 75%	6 75%	3 100%	16 89%	1 100%	~	~	~100%	1 33%	1 33%	5 83%	14 82%	16 80%	3 100%	2 40%	17 94%
NO	4 17%	205 39%	~	~	2 25%	2 25%	~	2 11%	~	~	~	~	2 67%	1 17%	3 18%	4 20%	~	3 60%	1 6%
NOT ANSWERED		42																	
VALID CASES	23	522	4	8	8	3	18	1				1	3	6	17	20	3	5	18
NUMBER OF RESPONDENTS	23	564	4	8	8	3	18	1				1	3	6	17	20	3	5	18
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q69 = YES]

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AMER 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
Q71 YES	17	315	4	6	5	2	16	1					5	12	15	2		17	
	94%	96%	~100%	~100%	~100%	67%	~100%	~100%	~	~	~	~	~100%	~92%	~100%	67%	~	~100%	~
NO	1	14				1					1			1		1		1	
	6%	4%	~	~	~	33%	~	~	~	~	~100%	~	~	8%	~	33%	~100%	~	~
NOT ANSWERED	1	6			1							1		1				1	
VALID CASES	18	330	4	6	5	3	16	1			1		5	13	15	3	1	17	
NUMBER OF RESPONDENTS	19	336	4	6	6	3	16	1			1	1	5	14	16	3	2	17	
	100%	100%	100%	100%	100%	100%	100%	100%			100%		100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q69 = YES AND Q70 = YES]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q72 YES	60 19%	799 14%*	~	12%	19%	15%	27%*	22%	75%~	~	~	17%~	4%~	19%~	6%*	25%*	17%~	32%~	2%*	60%*
NO	264 81%	4843 86%*	100%~	88%~	81%	85%	73%*	78%	25%~	100%~	~	83%~	96%~	81%~	94%*	75%*	83%~	68%~	98%*	40%*
NOT ANSWERED	18	376	1	4	5	3	5	4							4	2	4	1	16	2
VALID CASES	324	5642	2	59	73	101	89	204	4	3		12	25	42	109	210	303	19	233	91
NUMBER OF RESPONDENTS	342 100%	6018 100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q73 YES	52 91%	744 94%	5 ~ 71%	13 ~ 100%	14 ~ 100%	20 87%	37 90%	2 67%		2 ~ 100%	1 ~ 100%	8 ~ 100%	6 86%	45 92%	46 90%	5 ~ 100%		52 ~ 98%	
NO	5 9%	48 6%	2 ~ 29%			3 ~ 13%	4 10%	1 33%						1 14%	4 8%	5 10%		4 ~ 100%	1 2%
NOT ANSWERED	3	31		1	1	1	3							3	2	1		1	2
VALID CASES	57	793	7	13	14	23	41	3		2	1	8	7	49	51	5		4	53
NUMBER OF RESPONDENTS	60 100%	824 100%	7 100%	14 100%	15 100%	24 100%	44 100%	3 100%		2 100%	1 100%	8 100%	7 100%	52 100%	53 100%	6 100%		5 100%	55 100%

[ASKED IF Q72 = YES]

NQ74 WHAT IS YOUR CHILD'S AGE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	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	GOOD & POOR	NO CCC	CCC
NQ74																					
LESS THAN 1 YEAR OLD	3 0.9%	27 0.4%	3 100%	~	~	~	~	2 1%	~	~	~	~	~	~	2 2%	1 0.5%	3 1%	~	~	3 1%	~
1 TO 3 YEARS OLD	63 18%	1125 19%	~	63 ~100%	~	~	~	33 16%	1 25%	1 33%	~	4 33%	6 24%	8 19%	21 19%	37 17%	56 18%	3 15%	52 21%*	11 12%*	
4 TO 7 YEARS OLD	78 23%	1651 27%*	~	~	78 ~100%	~	~	48 23%	1 25%	1 33%	~	1 8%	2 8%	12 29%	24 21%	51 24%	70 23%	5 25%	55 22%	23 25%	
8 TO 12 YEARS OLD	104 30%	1813 30%	~	~	104 ~100%	~	~	65 31%	1 25%	~	~	3 25%	9 36%	15 36%	42 37%	58 27%	97 32%	5 25%	74 30%	30 32%	
13 OR OLDER	94 27%	1402 23%	~	~	~	94 ~100%	~	60 29%	1 25%	1 33%	~	4 33%	8 32%	7 17%	24 21%	65 31%	81 26%	7 35%	65 26%	29 31%	
VALID CASES	342	6018	3	63	78	104	94	208	4	3		12	25	42	113	212	307	20	249	93	
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%		12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%	

[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		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
NQ75																			
MALE	180 53%	3120 52%	1 33%~	39 62%	40 51%	54 52%	46 49%	106 51%	2 50%~	2 67%~	8 ~	12 67%~	23 55%~	51 45%	118 56%	164 53%~	7 35%~	118 47%*	62 67%*
FEMALE	162 47%	2898 48%	2 67%~	24 38%	38 49%	50 48%	48 51%	102 49%	2 50%~	1 33%~	4 ~	13 33%~	19 45%~	62 55%	94 44%	143 47%~	13 65%~	131 53%*	31 33%*
VALID CASES	342	6018	3	63	78	104	94	208	4	3	12	25	42	113	212	307	20	249	93
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%	12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%

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

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

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC	
Q76																				
HISPANIC OR LATINO	113 35%	2443 43%*	2 67%~	21 36%	24 32%	42 42%	24 27%	43 21%*	1 25%~	~	~	2 18%~	23 92%~	11 27%~	113 100%~	~	102 34%~	9 45%~	93 40%*	20 22%*
NOT HISPANIC OR LATINO	212 65%	3183 57%*	1 33%~	37 64%	51 68%	58 58%	65 73%	164 79%*	3 75%~	3 100%~	~	9 82%~	2 8%~	29 73%~	~	212 100%~	200 66%~	11 55%~	141 60%*	71 78%*
NOT ANSWERED	17	391		5	3	4	5	1				1		2			5		15	2
VALID CASES	325	5627	3	58	75	100	89	207	4	3		11	25	40	113	212	302	20	234	91
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%		12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%

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

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q77.1 YES	248 73%	3921 65%*	2 67%~	41 65%	60 77%	80 77%	65 69%	208 100%~							40 95%~	54 48%*	191 90%*	235 77%~	13 65%~	172 69%*	76 82%*
NO	94 27%	2097 35%*	1 33%~	22 35%	18 23%	24 23%	29 31%		4 ~100%	3 ~100%		12 ~100%	25 ~100%	2 5%~	59 52%*	21 10%*		72 23%~	7 35%~	77 31%*	17 18%*
VALID CASES	342	6018	3	63	78	104	94	208	4	3		12	25	42	113	212		307	20	249	93
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%		12 100%	25 100%	42 100%	113 100%	212 100%		307 100%	20 100%	249 100%	93 100%

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q77.2	CCC TOT CHLD																		
YES	17 5%	320 5%	3 ~	3 5%	5 4%	6 5%	4 ~100%	~	~	~	13 ~ 31%	3 3%	13 6%	17 6%	~	11 4%	6 6%		
NO	325 95%	5698 95%	3 100%	60 95%	75 96%	99 95%	88 94%	208 100%	3 ~100%	12 ~100%	25 ~100%	29 69%	110 97%	199 94%	290 94%	20 100%	238 96%	87 94%	
VALID CASES	342	6018	3	63	78	104	94	208	4	3	12	25	42	113	212	307	20	249	93
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%	12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%

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

		AGE						RACE						ETHNICITY	HEALTH STATUS	CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q77.3	CCC TOT CHLD	7																
YES	OHP TOT CHLD	238	1	3	1	2		3			4		7	7		4	3	
		2%	~ 2%	4%	1%	2%	~	~100%	~	~	~ 10%	~	~ 3%	2%	~	2%	3%	
NO	CCC TOT CHLD	335	3	62	75	103	208	4		12	25	38	113	205	300	20	245	90
	OHP TOT CHLD	5780	3	62	75	103	208	4		12	25	38	113	205	300	20	245	90
		98%	100%	~ 98%	96%	99%	100%	~100%	~	~100%	~100%	90%	~100%	97%	98%	~100%	98%	97%
VALID CASES	CCC TOT CHLD	342	3	63	78	104	208	4	3	12	25	42	113	212	307	20	249	93
NUMBER OF RESPONDENTS	OHP TOT CHLD	6018	3	63	78	104	208	4	3	12	25	42	113	212	307	20	249	93
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q77.4 YES	3 0.9%	104 2%	~	~	~	2% 1%	1	~	~	~	~	~	7% 0.9%	1 0.9%	2 0.9%	3 1%~	~	3 1%~	~
NO	339 99%	5914 98%	3 100%	63 100%	78 100%	102 98%	93 99%	208 100%	4 100%	3 100%	12 ~	25 100%	39 93%	112 99%	210 99%	304 99%	20 100%	246 99%	93 100%
VALID CASES	342	6018	3	63	78	104	94	208	4	3	12	25	42	113	212	307	20	249	93
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%	12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC	
Q77.5	CCC TOT CHLD																			
YES	30 9%	339 6%*	6 ~ 10%	8 10%	10 10%	6 6%	~	~	~	12 ~100%	18 ~ 43%	4 4%*	24 11%*	28 9%~	1 5%~	19 8%	11 12%			
NO	312 91%	5679 94%*	3 100%~	57 90%	70 90%	88 94%	208 100%	4 100%	3 100%	~	25 ~100%	24 57%	109 96%*	188 89%*	279 91%~	19 95%~	230 92%	82 88%		
VALID CASES	342	6018	3	63	78	104	208	4	3	12	25	42	113	212	307	20	249	93		
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	208 100%	4 100%	3 100%	12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%		

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

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
Q77.6	CCC TOT CHLD																		
YES	40 12%	629 10%	12 ~ 19%	4 5%*	12 12%	12 13%	~	~	~	~	25 ~100%	15 36%	33 29%*	7 3%*	35 11%~	5 25%~	34 14%*	6 6%*	
NO	302 88%	5389 90%	3 100%~	51 81%	74 95%*	92 88%	208 100%~	4 100%	3 100%	12 ~100%	27 ~ 64%	80 71%*	205 97%*	272 89%~	15 75%~	215 86%*	87 94%*		
VALID CASES	342	6018	3	63	78	104	208	4	3	12	25	42	113	212	307	20	249	93	
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	208 100%	4 100%	3 100%	12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%	

Q78 WHAT IS YOUR AGE?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER				
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/PAC	AMER IND/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q78 UNDER 18	11 3%	209 4%	1 33%~	1 2%	2 3%	3 3%	4 4%	9 4%	~	~	~	8%~	~	~	4 4%	6 3%	10 3%~	1 5%~	10 4%	1 1%	
18 TO 24	15 5%	307 5%	2 67%~	10 17%*	2 3%	1 1%*	~	9 4%	~	~	~	8%~	2 8%~	1 2%~	7 6%	8 4%	15 5%~	~	11 5%	4 4%	
25 TO 34	117 36%	2087 37%	~	29 49%*	45 60%*	35 34%	8 9%*	75 36%	1 25%~	2 67%~	~	~	8 32%~	18 44%~	42 37%	75 36%	108 35%~	7 35%~	88 37%	29 31%	
35 TO 44	106 32%	2042 36%	~	15 25%	16 21%*	35 34%	40 45%*	64 31%	2 50%~	1 33%~	~	~	2 17%~	11 44%~	13 32%~	42 37%	62 30%	100 33%~	6 30%~	81 34%	25 27%
45 TO 54	39 12%	708 13%	~	2 3%*	6 8%	12 12%	19 21%*	27 13%	1 25%~	~	~	~	1 8%~	1 4%~	4 10%~	10 9%	28 13%	37 12%~	2 10%~	25 11%	14 15%
55 TO 64	28 9%	233 4%*	~	~	4 5%	10 10%	14 16%*	15 7%	~	~	~	~	5 42%~	3 12%~	4 10%~	7 6%	21 10%	24 8%~	3 15%~	12 5%*	16 17%*
65 TO 74	10 3%	39 0.7%*	~	2 3%	~	5 5%	3 3%	7 3%	~	~	~	~	2 17%~	~	1 2%~	9 0.9%*	1 4%*	9 3%~	1 5%~	6 3%	4 4%
75 OR OLDER	2 0.6%	12 0.2%	~	~	~	1 1%	1 1%	2 1%~	~	~	~	~	~	~	~	1 ~0.5%	1 0.7%~	2 ~0.9%	2 ~0.9%	~	~
NOT ANSWERED	14	382		4	3	2	5							1	2	2			14		
VALID CASES	328	5636	3	59	75	102	89	208	4	3			12	25	41	113	210	305	20	235	93
NUMBER OF RESPONDENTS	342	6018	3	63	78	104	94	208	4	3			12	25	42	113	212	307	20	249	93
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

Q79 ARE YOU MALE OR FEMALE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q79																			
MALE	36 11%	691 12%		5 ~ 8%	10 14%	9 9%	12 13%	19 9%			2 ~ 17%	4 ~ 16%	7 ~ 17%	11 10%	25 12%	31 10%	5 25%	27 11%	9 10%
FEMALE	291 89%	4976 88%	3 100%	54 ~ 92%	64 86%	92 91%	78 87%	188 91%	4 100%	3 ~ 100%	10 ~ 83%	21 ~ 84%	35 ~ 83%	101 90%	185 88%	273 90%	15 75%	208 89%	83 90%
NOT ANSWERED	15	352		4	4	3	4	1						1	2	3		14	1
VALID CASES	327	5666	3	59	74	101	90	207	4	3	12	25	42	112	210	304	20	235	92
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%	12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%

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

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q80																				
8TH GRADE OR LESS	29 9%	729 13%*	~	4 7%	5 7%	14 14%	6 7%	7 3%*	1 25%~	~	~	1 8%~	5 20%~	1 2%~	27 24%*	2 0.9%*	23 8%~	5 26%~	27 12%*	2 2%*
SOME HIGH SCHOOL BUT DID NOT GRADUATE	38 12%	659 12%	~	8 14%	4 5%*	14 14%	12 14%	17 8%*	~	1 33%~	~	1 8%~	8 32%~	4 10%~	21 19%*	17 8%*	35 12%~	1 5%~	29 12%	9 10%
HIGH SCHOOL GRADUATE OR GED	105 32%	1741 31%	67%~	2 25%	15 37%	28 25%	34 39%	68 33%	~	~	~	6 50%~	6 24%~	17 40%~	36 32%	66 31%	100 33%~	5 26%~	74 32%	31 33%
SOME COLLEGE OR 2-YEAR DEGREE	125 38%	1785 32%*	33%~	1 44%	26 44%	33 44%	28 32%	93 45%*	3 75%~	2 67%~	~	2 17%~	5 20%~	16 38%~	24 22%*	100 47%*	118 39%~	7 37%~	84 36%	41 44%
4-YEAR COLLEGE GRADUATE	23 7%	395 7%	~	4 7%	4 5%	9 9%	6 7%	17 8%	~	~	~	1 8%~	1 4%~	4 10%~	3 3%*	20 9%*	23 8%~	~	15 6%	8 9%
MORE THAN 4-YEAR COLLEGE DEGREE	6 2%	239 4%*	~	2 3%	1 1%	2 2%	1 1%	5 2%	~	~	~	1 8%~	~	~	~	6 3%*	5 2%~	1 5%~	4 2%	2 2%
NOT ANSWERED	16	471		4	3	2	7	1							2	1	3	1	16	
VALID CASES	326	5547	3	59	75	102	87	207	4	3		12	25	42	111	211	304	19	233	93
NUMBER OF RESPONDENTS	342 100%	6018 100%	3 100%	63 100%	78 100%	104 100%	94 100%	208 100%	4 100%	3 100%		12 100%	25 100%	42 100%	113 100%	212 100%	307 100%	20 100%	249 100%	93 100%

Q81 HOW ARE YOU RELATED TO THE CHILD?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q81																				
MOTHER OR FATHER	279 88%	5300 95%*	3 100%~	52 90%	62 85%	83 86%	79 90%	175 87%	4 100%	3 100%	5 ~ 42%	22 96%~	38 93%	100 92%	176 86%	259 88%~	18 90%~	208 91%*	71 79%*	
GRANDPARENT	24 8%	137 2%*	~	2 3%	7 10%	9 9%	6 7%	14 7%	~	~	~	4 33%~	1 4%~	3 7%~	8 7%	15 7%	23 8%~	~	14 6%	10 11%
AUNT OR UNCLE	1 0.3%	36 0.6%	~	~	~	~	1 1%	1 0.5%	~	~	~	~	~	~	1 ~0.5%	1 0.3%~	~	~	1 1%	
OLDER BROTHER OR SISTER	4 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
OTHER RELATIVE	6 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
LEGAL GUARDIAN	11 3%	77 1%*	~	3 5%	3 4%	4 4%	1 1%	9 4%	~	~	~	2 17%~	~	~	1 ~0.9%*	10 5%*	10 3%~	1 5%~	4 2%*	7 8%*
SOMEONE ELSE	3 0.9%	44 0.8%	~	1 2%	1 1%	~	1 1%	2 1%	~	~	~	1 8%~	~	~	3 1%~	2 ~0.7%~	1 5%~	2 ~0.9%	1 1%	
NOT ANSWERED	24	415		5	5	8	6	7				2	1	4	7	12		21	3	
VALID CASES	318	5603	3	58	73	96	88	201	4	3		12	23	41	109	205	295	20	228	90
NUMBER OF RESPONDENTS	342	6018	3	63	78	104	94	208	4	3		12	25	42	113	212	307	20	249	93
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q82 YES	5 2%	157 5%	~	1 3%	~	2 3%	2 3%	~	~	~	~	2 13%	~	5 7%	~	4 2%	1 9%	4 3%	1 2%	
NO	199 98%	3319 95%	2 100%	38 97%	42 100%	56 97%	61 97%	135 100%	4 100%	3 100%	~	9 100%	13 87%	16 100%	66 93%	130 100%	186 98%	10 91%	145 97%	54 98%
NOT ANSWERED	5	40	1			4	2					1		1	2	4		5		
VALID CASES	204	3476	2	39	42	58	63	135	4	3		9	15	16	71	130	190	11	149	55
NUMBER OF RESPONDENTS	209	3516	3	39	42	58	67	137	4	3		9	15	17	72	132	194	11	154	55
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC
Q83.1 YES	3 60%	68 57%	1 ~100%	1 ~50%	1 50%						1 50%		3 60%		2 50%	1 100%	3 75%	
NO	2 40%	51 43%			1 50%	1 50%					1 50%		2 40%		2 50%		1 25%	1 100%
VALID CASES	5	119	1		2	2					2		5		4	1	4	1
NUMBER OF RESPONDENTS	5 100%	119 100%	1 100%		2 100%	2 100%					2 100%		5 100%		4 100%	1 100%	4 100%	1 100%

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

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q83.2 YES	3 60%	52 44%	~	1 100%	~	1 50%	1 50%	~	~	~	~	~	1 50%	3 60%	2	1	100%	3 75%	~
NO	2 40%	67 56%	~	~	~	1 50%	1 50%	~	~	~	~	~	1 50%	2 40%	2	~	50%	1 25%	1 100%
VALID CASES	5	119		1		2	2						2	5	4	1		4	1
NUMBER OF RESPONDENTS	5 100%	119 100%		1 100%		2 100%	2 100%						2 100%	5 100%	4 100%	1 100%		4 100%	1 100%

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

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

		AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND PAC	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC
Q83.3	CCC TOT CHLD																
YES	2 40%	9 7%	~	~	~ 50%	1 50%	~	~	~	~	1 50%	2 40%	~	1 25%	1 100%	2 50%	~
NO	3 60%	110 93%	~ 100%	1	~ 50%	1 50%	~	~	~	~	1 50%	3 60%	~	3 75%	~	2 50%	1 100%
VALID CASES	5	119	1		2	2					2	5		4	1	4	1
NUMBER OF RESPONDENTS	5 100%	119 100%	1 100%		2 100%	2 100%					2 100%	5 100%		4 100%	1 100%	4 100%	1 100%

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

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

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC
Q83.4 YES	1 20%	31 26%	~	~	~	50%	~	~	~	~	~	~	20%	1 25%	1	~	1 100%
NO	4 80%	88 74%	~100%	1	~	50%	~	~	~	~	2 100%	~	4 80%	3 75%	1 100%	4 100%	~
VALID CASES	5	119	1	2	2						2		5	4	1	4	1
NUMBER OF RESPONDENTS	5 100%	119 100%	1 100%	2 100%	2 100%						2 100%		5 100%	4 100%	1 100%	4 100%	1 100%

[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				
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
Q83.5 YES		11 9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NO	5 100%	108 91%	~100%	1	2	2	~100%	~	~	~	~	~100%	~100%	5	4	1	4	1	4	1
VALID CASES	5	119	100%	1	2	2	100%					2	5	5	4	1	4	1	4	1
NUMBER OF RESPONDENTS	5 100%	119 100%	100%	1	2	2	100%					2	5	5	4	1	4	1	4	1

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

NQ14 RATING OF ALL CHILD'S HEALTH CARE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
NQ14 0-6	27 11%	375 10%	~	4 9%	5 8%	12 18%	6 10%	13 9%	1 50%	~	~	2 10%	8 21%	12 16%	14 9%	22 10%	3 19%	17 10%	10 13%	
7-8	74 31%	1202 31%	33%	1 38%	18 28%	17 25%	21 33%	49 35%	3 75%	~	~	2 20%	3 15%	10 26%	15 21%*	55 35%*	65 30%	6 38%	43 26%*	31 41%*
9-10	140 58%	2325 60%	67%	2 53%	25 64%	39 57%	38 57%	80 56%	1 25%	1 50%	~	8 80%	15 75%	20 53%	46 63%	88 56%	128 60%	7 44%	105 64%*	35 46%*
VALID CASES	241	3902	3	47	61	67	63	142	4	2		10	20	38	73	157	215	16	165	76
NUMBER OF RESPONDENTS	241 100%	3902 100%	100%	3 100%	47 100%	61 100%	67 100%	142 100%	4 100%	2 100%		10 100%	20 100%	38 100%	73 100%	157 100%	215 100%	16 100%	165 100%	76 100%
MEAN	2.47	2.50	2.67	2.45	2.56	2.39	2.48	2.47	2.25	2.00		2.80	2.65	2.32	2.47	2.47	2.49	2.25	2.53	2.33
p stat_(*=Sig @ p<=.05)		.475	~	~	.249	.299	.923	.938	~	~	~	~	~	~	.965	.940	~	~	.033*	.033*

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
NQ41 0-6	27 10%	353 7%	~	2 4%*	3 5%*	10 14%	12 17%	16 9%	~	~	~	~	5 31%~	6 18%~	12 16%	14 8%	25 10%~	2 12%~	18 10%	9 11%
7-8	53 20%	1106 23%	~	16 31%	11 17%	13 18%	13 18%	36 21%	2 50%~	2 100%~	~	1 13%~	1 6%~	6 18%~	7 9%*	44 25%*	49 21%~	2 12%~	40 22%	13 16%
9-10	180 69%	3349 70%	100%~	3 65%	33 78%	49 68%	49 65%	46 70%	2 50%~	~	~	7 87%~	10 63%~	22 65%~	57 75%	118 67%	165 69%~	13 76%~	121 68%	59 73%
VALID CASES	260	4809	3	51	63	72	71	171	4	2	8	16	34	76	176	239	17	179	81	
NUMBER OF RESPONDENTS	260 100%	4809 100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
MEAN	2.59	2.62	3.00	2.61	2.73	2.54	2.48	2.60	2.50	2.00	2.87	2.31	2.47	2.59	2.59	2.59	2.65	2.58	2.62	
p stat_(*=Sig @ p<=.05)	.411		~.796	.030*	.512	.144	.656	~	~	~	~	~	~	.958	.937	~	~	.648	.646	

[ASKED IF Q30 = YES]

NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC	
NQ48 0-6	4 11%	69 10%	~	14%~	9%~	9%~	13%~	11%~	~	~	~	~	25%~	~	15%~	13%~	~	8%~	12%~	
7-8	5 14%	173 25%	~	29%~	9%~	18%~	~	15%~	100%~	~	~	~	~	~	9%~	15%~	16%~	~	8%~	16%~
9-10	28 76%	464 66%	~	57%~	82%~	73%~	87%~	74%~	~	~	~	100%~	100%~	75%~	91%~	69%~	71%~	100%~	83%~	72%~
VALID CASES	37	706		7	11	11	8	27	1		2	1	4	11	26	31	6	12	25	
NUMBER OF RESPONDENTS	37 100%	706 100%		7 100%	11 100%	11 100%	8 100%	27 100%	1 100%		2 100%	1 100%	4 100%	11 100%	26 100%	31 100%	6 100%	12 100%	25 100%	
MEAN	2.65	2.56		2.43	2.73	2.64	2.75	2.63	2.00		3.00	3.00	2.50	2.91	2.54	2.58	3.00	2.75	2.60	
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			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC			
NQ54 0-6	52 16%	702 13%	~	5 9%*	15 20%	16 16%	16 18%	39 19%*	2 67%~	~	~	1 9%~	1 4%~	8 19%~	12 11%*	40 19%*	47 16%~	5 25%~	33 14%	19 21%	
7-8	85 26%	1548 28%	33%~	1 33%~	19 33%	21 28%	24 24%	20 23%	54 27%	1 33%~	2 67%~	~	~	6 24%~	17 40%~	19 17%*	65 32%*	82 27%~	3 15%~	59 25%	26 29%
9-10	186 58%	3348 60%	67%~	2 59%~	34 59%	38 51%	60 60%	52 59%	110 54%	~	1 33%~	~	10 91%~	18 72%~	17 40%~	80 72%*	101 49%*	172 57%~	12 60%~	142 61%	44 49%
VALID CASES	323	5598	3	58	74	100	88	203	3	3	11	25	42	111	206	301	20	234	89		
NUMBER OF RESPONDENTS	323 100%	5598 100%	3 100%	58 100%	74 100%	100 100%	88 100%	203 100%	3 100%	3 100%	11 100%	25 100%	42 100%	111 100%	206 100%	301 100%	20 100%	234 100%	89 100%		
MEAN	2.41	2.47	2.67	2.50	2.31	2.44	2.41	2.35	1.33	2.33	2.82	2.68	2.21	2.61	2.30	2.42	2.35	2.47	2.28		
p stat_(*=Sig @ p<=.05)		.148	~	.294	.177	.689	.933	.037*	~	~	~	~	~	~	.001*	.000*	~	~	.061	.059	

GETTING NEEDED CARE

		AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NPRBSEE4 NQ46	2.25	2.27	2.62	2.00	2.14	2.40	2.19	2.00			3.00	2.50	2.25	2.20	2.28	2.26	2.17	2.25	2.25	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCARNES4 NQ15	2.47	2.47	2.67	2.53	2.38	2.49	2.48	2.53	2.00	1.50		2.90	2.32	2.32	2.36	2.50	2.48	2.20	2.56	2.27
p stat_(*=Sig @ p<=.05)	.904		~	~.252	.765	.858	.094	~	~	~	~	~	~	.119	.327	~	~	.003*	.003*	
COMPOSITE	2.36	2.37	2.67	2.58	2.19	2.32	2.44	2.36	2.00	1.50	x	2.95	2.41	2.28	2.28	2.39	2.37	2.18	2.41	2.26
p stat_(*=Sig @ p<=.05)	.959		~	~.371	.815	.660	.995	~	~	~	~	~	~	.647	.718	~	~	.571	.569	

GETTING CARE QUICKLY

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NCARSN4 NQ4	2.47	2.61	3.00	2.63	2.48	2.50	2.30	2.51	2.00	3.00	2.00	2.44	2.38	2.49	2.49	2.25	2.52	2.39	
p stat_(*=Sig @ p<=.05)		.058	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NAPGET4 NQ6	2.52	2.46	3.00	2.65	2.49	2.42	2.52	2.54	1.50	1.00	3.00	2.56	2.34	2.48	2.53	2.56	2.13	2.57	2.43
p stat_(*=Sig @ p<=.05)		.232	~	.109	~	.260	.967	.718	~	~	~	~	~	.557	.739	~	.190	.189	
COMPOSITE	2.50	2.54	3.00	2.64	2.48	2.46	2.41	2.52	1.50	1.50	x 3.00	2.28	2.39	2.43	2.51	2.53	2.19	2.54	2.41
p stat_(*=Sig @ p<=.05)		.771	~	.592	.960	.873	.705	.835	~	~	~	~	~	.747	.878	~	.646	.682	

HOW WELL DOCTORS COMMUNICATE

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
NDREXPL4 NQ32	2.64	2.69	2.50	2.69	2.67	2.59	2.61	2.73	2.75	2.00		2.75	2.31	2.45	2.38	2.73	2.65	2.50	2.59	2.71
p stat_(*=Sig @ p<=.05)		.233	~	~	~	~	.704	.024*	~	~	~	~	~	~	.001*	.003*	~	~	.183	.182
NDRLSTN4 NQ33	2.68	2.70	3.00	2.64	2.76	2.63	2.68	2.70	2.50	2.50		2.88	2.62	2.65	2.56	2.74	2.69	2.64	2.70	2.64
p stat_(*=Sig @ p<=.05)		.763	~	~	~	~	.975	.593	~	~	~	~	~	~	.079	.070	~	~	.499	.491
NDRESPU4 NQ34	2.75	2.77	3.00	2.69	2.78	2.74	2.78	2.71	2.75	2.50		3.00	2.77	2.77	2.67	2.77	2.73	2.93	2.74	2.77
p stat_(*=Sig @ p<=.05)		.669	~	~	~	~	.632	.200	~	~	~	~	~	~	.217	.439	~	~	.661	.660
NDRTMEN4 NQ37	2.46	2.48	2.50	2.36	2.50	2.41	2.57	2.55	2.25	2.00		2.75	2.15	2.34	2.21	2.56	2.48	2.15	2.46	2.46
p stat_(*=Sig @ p<=.05)		.810	~	~	~	~	~	.045*	~	~	~	~	~	~	.004*	.014*	~	~	.993	.993
COMPOSITE	2.63	2.66	2.75	2.59	2.68	2.59	2.66	2.67	2.56	2.25	x	2.84	2.46	2.55	2.46	2.70	2.64	2.56	2.62	2.65
p stat_(*=Sig @ p<=.05)		.916	~	~	~	~	.946	.837	~	~	~	~	~	~	.625	.659	~	~	.962	.962

CUSTOMER SERVICE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER	AS-IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
NPBCLCS4 NQ50	2.32	2.30	3.00	2.45	1.93	2.20	2.75	2.33		3.00		2.00	3.00	1.83	2.33	2.30	2.32	2.33	2.45	1.82
p stat_(*=Sig @ p<=.05)		.824	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ51	2.56	2.55	1.00	2.64	2.36	2.50	2.92	2.56		3.00		2.50	3.00	2.17	2.52	2.55	2.54	2.67	2.66	2.18
p stat_(*=Sig @ p<=.05)		.964	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.44	2.43	2.00	2.55	2.14	2.35	2.83	2.45	x	3.00	x	2.25	3.00	2.00	2.43	2.43	2.43	2.50	2.56	2.00
p stat_(*=Sig @ p<=.05)		.970	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
NRXWHY NQ11	2.40	2.46	3.00	2.00	2.54	2.40	2.60	2.47	3.00	1.00		2.67	2.00	2.25	2.25	2.44	2.35	2.50	2.35	2.45
p stat_(*=Sig @ p<=.05)		.533	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NRXWYNT NQ12	2.00	2.00	3.00	1.62	1.85	2.07	2.33	2.00	2.50	2.00		2.33	2.25	1.75	1.94	1.97	2.00	1.67	1.96	2.03
p stat_(*=Sig @ p<=.05)		1.00	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NRXBST NQ13	2.51	2.59	3.00	1.92	2.38	2.73	2.87	2.40	3.00	3.00		2.33	3.00	2.50	2.62	2.44	2.46	2.67	2.38	2.61
p stat_(*=Sig @ p<=.05)		.485	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.30	2.35	3.00	1.85	2.26	2.40	2.60	2.29	2.83	2.00	x	2.44	2.42	2.17	2.27	2.28	2.27	2.28	2.23	2.37
p stat_(*=Sig @ p<=.05)		.903	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

ACCESS TO SPECIALIZED SERVICES

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
NEZMDEQ NQ20	2.31	2.28		2.60	2.50	1.80	2.50	2.11	2.00			3.00		3.00	2.00	2.57	2.31	2.00	2.57	2.11
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTHP NQ23	2.28	2.11		2.20	3.00	1.50	3.00	2.14	2.00			3.00		3.00	1.80	2.46	2.31	2.00	2.00	2.31
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTC NQ26	2.43	2.11		2.50	2.64	2.13	2.50	2.36	2.50			3.00		2.43	2.17	2.45	2.44	2.17	2.67	2.37
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.34	2.17	x	2.43	2.71	1.81	2.67	2.21	2.17	x	x	3.00	x	2.81	1.99	2.49	2.35	2.06	2.41	2.26
p stat_(*=Sig @ p<=.05)		.373	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
PRBSEE4 Q46	77%	76%		87%	67%	71%	90%	72%	100%		100%	100%	75%	80%	76%	76%	83%	75%	79%	
CARNES4 Q15	88%	88%	100%	91%	84%	90%	89%	91%	100%	50%	100%	84%	82%	86%	89%	88%	87%	90%	86%	
AVERAGE	82.9	82.1	x	89.5	75.1	80.5	89.5	81.4	100	x	x	100	84.2	78.3	83.1	82.3	82.4	85.0	82.3	82.1

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
CARSN4 Q4	87%	89%	100%	95%	84%	86%	85%	89%		100%		100%	67%	83%	86%	87%	88%	75%	88%	87%
APGET4 Q6	87%	86%	100%	94%	90%	79%	84%	88%	50%	0%		100%	89%	76%	85%	87%	89%	67%	89%	82%
AVERAGE	87.0	87.1	x	94.4	86.9	82.8	84.6	88.2	x	x	x	100	77.8	79.6	85.4	87.2	88.4	70.8	88.2	84.7

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
DREXPL4 Q32	91%	93%	100%	91%	94%	91%	88%	94%	100%	100%	100%	77%	84%	85%	94%	92%	79%	89%	96%	
DRLSTN4 Q33	93%	93%	100%	91%	100%	91%	90%	94%	75%	100%	100%	92%	94%	90%	95%	94%	86%	93%	93%	
DRESPU4 Q34	96%	95%	100%	96%	96%	96%	96%	96%	100%	100%	100%	92%	94%	94%	96%	95%	100%	95%	97%	
DRTMEN4 Q37	85%	86%	100%	82%	88%	85%	86%	87%	75%	100%	87%	77%	83%	77%	88%	86%	69%	84%	87%	
AVERAGE	91.4	91.8	x	90.0	94.3	90.8	90.0	92.5	87.5	x	x	96.9	84.6	88.4	86.5	93.1	92.0	83.4	90.4	93.2

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
PBCLCS4 Q50	81%	80%	100%	82%	79%	73%	92%	82%	100%	50%	100%	67%	81%	80%	83%	67%	88%	55%		
CSRESP Q51	92%	88%	0%	91%	93%	93%	100%	91%	100%	100%	100%	83%	90%	93%	91%	100%	93%	91%		
AVERAGE	86.7	84.1	x	86.4	85.7	83.1	95.8	86.2	x	x	x	x	100	75.0	85.7	86.6	87.1	83.3	90.4	72.7

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

	CCC TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
RXWHY Q11	86%	86%	100%	69%	85%	93%	93%	100%	0%		100%	75%	63%	87%	85%	85%	83%	85%	87%	
RXWYNT Q12	67%	66%	100%	62%	54%	67%	80%	67%	100%	100%		100%	75%	38%	69%	64%	67%	50%	62%	71%
FRXBST Q13	75%	80%	100%	46%	69%	87%	93%	70%	100%	100%		67%	100%	75%	81%	72%	73%	83%	69%	81%
AVERAGE	76.0	77.2	x	59.0	69.2	82.2	88.9	76.7	x	x	x	x	83.3	58.3	79.2	73.5	75.0	72.2	71.8	79.6

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AMER IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
EZMDEQ Q20	75%	76%	80%	75%	60%	100%	67%	100%		100%		100%	63%	86%	77%	50%	86%	67%		
EZTHP Q23	72%	69%	80%	100%	33%	100%	64%	100%		100%		100%	40%	85%	75%	50%	50%	75%		
EZTC Q26	81%	68%	100%	86%	60%	93%	79%	100%		100%		71%	67%	83%	82%	67%	89%	79%		
AVERAGE	76.0	70.9	x	86.7	86.9	51.1	92.9	69.9	100	x	x	x	x	71.4	56.4	84.3	78.0	66.7	87.3	73.5

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

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
DRTLKU Q38	81%	85%	100%	95%	90%	64%	76%	81%	100%	100%	75%	69%	79%	82%	80%	83%	64%	82%	81%	
DRUNCON Q43	92%	86%		100%	88%	96%	88%	89%	100%	100%	100%	100%	100%	94%	92%	91%	100%	83%	94%	
DRUNFAM Q44	83%	85%		100%	81%	83%	75%	80%	100%	100%	100%	100%	90%	81%	83%	84%	80%	73%	85%	
AVERAGE	85.6	85.4	x	98.5	86.4	80.9	79.3	83.1	100	x	x	75.0	69.2	89.8	85.8	84.9	85.9	81.4	79.3	86.5

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
HELPCONT Q18	88%	88%	100%	100%	73%	100%	88%	100%		100%	100%	75%	87%	88%	86%	100%	90%	88%		
HLPCOORD Q29	64%	56%	100%	67%	67%	56%	64%	56%	100%		75%	100%	50%	92%	55%	59%	87%	58%	67%	
AVERAGE	76.0	72.1	x	66.7	83.3	64.5	82.1	71.9	x	x	x	75.0	x	62.5	89.6	71.1	72.5	87.5	73.9	77.1

INDEX OF ADULT TABLES

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

PAGE QUESTION TITLE

3. YOUR PERSONAL DOCTOR

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

4. GETTING HEALTH CARE FROM SPECIALISTS

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

PAGE QUESTION TITLE

5. YOUR HEALTH PLAN

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

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

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

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

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

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

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

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

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

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

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

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

39 Q35E A HEALTH PROVIDER COULD BE A GENERAL DOCTOR, A SPECIALIST DOCTOR, A NURSE PRACTITIONER, A PHYSICIAN ASSISTANT, A NURSE OR ANYONE ELSE YOU WOULD SEE FOR HEALTH CARE. IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER TALK TOO FAST WHEN TALKING TO YOU?

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

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

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

PAGE	QUESTION	TITLE
61	Q35AA	IN THE LAST 6 MONTHS, HOW OFTEN DID YOU USE A FRIEND OR FAMILY MEMBER AS AN INTERPRETER WHEN YOU TALKED WITH SOMEONE FROM YOUR HEALTH PLAN? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES]
62	Q35AB	IN THE LAST 6 MONTHS, DID YOU USE FRIENDS OR FAMILY MEMBERS AS INTERPRETERS BECAUSE THAT WAS WHAT YOU PREFERRED? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND Q35AA = SOMETIMES OR USUALLY OR ALWAYS]
6. ABOUT YOU		
63	Q36	IN GENERAL, HOW WOULD YOU RATE YOUR OVERALL HEALTH?
64	Q37	IN GENERAL, HOW WOULD YOU RATE YOUR OVERALL MENTAL OR EMOTIONAL HEALTH?
65	Q38	HAVE YOU HAD EITHER A FLU SHOT OR FLU SPRAY IN THE NOSE SINCE JULY 1, 2013?
66	Q39	DO YOU NOW SMOKE CIGARETTES OR USE TOBACCO EVERY DAY, SOME DAYS, OR NOT AT ALL?
67	Q40	IN THE LAST 6 MONTHS, HOW OFTEN WERE YOU ADVISED TO QUIT SMOKING OR USING TOBACCO BY A DOCTOR OR OTHER HEALTH PROVIDER IN YOUR PLAN? [ASKED IF Q39 = EVERY DAY OR SOME DAYS]
68	Q41	IN THE LAST 6 MONTHS, HOW OFTEN WAS MEDICATION RECOMMENDED OR DISCUSSED BY A DOCTOR OR HEALTH PROVIDER TO ASSIST YOU WITH QUITTING SMOKING OR USING TOBACCO? EXAMPLES OF MEDICATION ARE: NICOTINE GUM, PATCH, NASAL SPRAY, INHALER, OR PRESCRIPTION MEDICATION. [ASKED IF Q39 = EVERY DAY OR SOME DAYS]
69	Q42	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR DOCTOR OR HEALTH PROVIDER DISCUSS OR PROVIDE METHODS AND STRATEGIES OTHER THAN MEDICATION TO ASSIST YOU WITH QUITTING SMOKING OR USING TOBACCO? EXAMPLES OF METHODS AND STRATEGIES ARE: TELEPHONE HELPLINE, INDIVIDUAL OR GROUP COUNSELING, OR CESSATION PROGRAM. [ASKED IF Q39 = EVERY DAY OR SOME DAYS]
70	Q43	DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?
71	Q44	DO YOU HAVE A HEALTH PROBLEM OR TAKE MEDICATION THAT MAKES TAKING ASPIRIN UNSAFE FOR YOU?
72	Q45	HAS A DOCTOR OR HEALTH PROVIDER EVER DISCUSSED WITH YOU THE RISKS AND BENEFITS OF ASPIRIN TO PREVENT HEART ATTACK OR STROKE?
73	Q46.1	ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: HIGH CHOLESTEROL
74	Q46.2	ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: HIGH BLOOD PRESSURE
75	Q46.3	ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: PARENT OR SIBLING WITH HEART ATTACK BEFORE THE AGE OF 60
76	Q47.1	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: A HEART ATTACK
77	Q47.2	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: ANGINA OR CORONARY HEART DISEASE
78	Q47.3	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: A STROKE
79	Q47.4	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: ANY KIND OF DIABETES OR HIGH BLOOD SUGAR

PAGE	QUESTION	TITLE
80	Q48	IN THE LAST 6 MONTHS, DID YOU GET HEALTH CARE 3 OR MORE TIMES FOR THE SAME CONDITION OR PROBLEM?
81	Q49	IS THIS A CONDITION OR PROBLEM THAT HAS LASTED FOR AT LEAST 3 MONTHS? DO NOT INCLUDE PREGNANCY OR MENOPAUSE. [ASKED IF Q48 = YES]
82	Q50	DO YOU NOW NEED OR TAKE MEDICINE PRESCRIBED BY A DOCTOR? DO NOT INCLUDE BIRTH CONTROL.
83	Q51	IS THIS MEDICINE TO TREAT A CONDITION THAT HAS LASTED FOR AT LEAST 3 MONTHS? DO NOT INCLUDE PREGNANCY OR MENOPAUSE. [ASKED IF Q50 = YES]
84	NQ52	WHAT IS YOUR AGE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
85	NQ53	ARE YOU MALE OR FEMALE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
86	Q54	WHAT IS THE HIGHEST GRADE OR LEVEL OF SCHOOL THAT YOU HAVE COMPLETED?
87	Q55	ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?
88	Q56.1	WHAT IS YOUR RACE? RESPONSE: WHITE
89	Q56.2	WHAT IS YOUR RACE? RESPONSE: BLACK OR AFRICAN-AMERICAN
90	Q56.3	WHAT IS YOUR RACE? RESPONSE: ASIAN
91	Q56.4	WHAT IS YOUR RACE? RESPONSE: NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
92	Q56.5	WHAT IS YOUR RACE? RESPONSE: AMERICAN INDIAN OR ALASKA NATIVE
93	Q56.6	WHAT IS YOUR RACE? RESPONSE: OTHER
94	Q57	DID SOMEONE HELP YOU COMPLETE THIS SURVEY? [ASKED IF SURVEY COMPLETED BY MAIL]
95	Q58.1	HOW DID THAT PERSON HELP YOU? RESPONSE: READ THE QUESTIONS TO ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
96	Q58.2	HOW DID THAT PERSON HELP YOU? RESPONSE: WROTE DOWN THE ANSWERS I GAVE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
97	Q58.3	HOW DID THAT PERSON HELP YOU? RESPONSE: ANSWERED THE QUESTIONS FOR ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
98	Q58.4	HOW DID THAT PERSON HELP YOU? RESPONSE: TRANSLATED THE QUESTIONS INTO MY LANGUAGE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
99	Q58.5	HOW DID THAT PERSON HELP YOU? RESPONSE: HELPED IN SOME OTHER WAY. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]

PAGE QUESTION TITLE

8. RATINGS

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

9. COMPOSITES

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

10. GLOBAL PROPORTION COMPOSITES

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

INDEX OF CHILD TABLES

PAGE	QUESTION	TITLE
1. INTRODUCTION		
1	Q1	OUR RECORDS SHOW THAT YOUR CHILD IS NOW IN <HEALTH PLAN>. IS THAT RIGHT?
2. YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS		
2	Q3	IN THE LAST 6 MONTHS, DID YOUR CHILD HAVE AN ILLNESS, INJURY, OR CONDITION THAT NEEDED CARE RIGHT AWAY IN A CLINIC, EMERGENCY ROOM OR DOCTOR'S OFFICE?
3	Q4	IN THE LAST 6 MONTHS, WHEN YOUR CHILD NEEDED CARE RIGHT AWAY, HOW OFTEN DID YOUR CHILD GET CARE AS SOON AS HE OR SHE NEEDED? [ASKED IF Q3 = YES]
4	Q5	IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS FOR A CHECK UP OR ROUTINE CARE FOR YOUR CHILD AT A DOCTOR'S OFFICE OR CLINIC?
5	Q6	IN THE LAST 6 MONTHS, WHEN YOU MADE AN APPOINTMENT FOR A CHECK UP OR ROUTINE CARE FOR YOUR CHILD AT A DOCTOR'S OFFICE OR CLINIC, HOW OFTEN DID YOU GET AN APPOINTMENT AS SOON AS YOUR CHILD NEEDED? [ASKED IF Q5 = YES]
6	Q7	IN THE LAST 6 MONTHS, NOT COUNTING THE TIMES YOUR CHILD WENT TO AN EMERGENCY ROOM, HOW MANY TIMES DID HE OR SHE GO TO A DOCTOR'S OFFICE OR CLINIC TO GET HEALTH CARE?
7	Q8	A HEALTH PROVIDER IS THE PERSON YOU WOULD SEE IF YOUR CHILD NEEDED A CHECK-UP, WANTED ADVICE ABOUT A HEALTH PROBLEM, OR GOT SICK OR HURT. IN THE LAST 6 MONTHS, DID YOU AND YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT SPECIFIC THINGS YOU COULD DO TO PREVENT ILLNESS IN YOUR CHILD? [ASKED IF Q7 >= 1 TIME]
8	Q9	IN THE LAST 6 MONTHS, HOW OFTEN DID YOU HAVE YOUR QUESTIONS ANSWERED BY YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER? [ASKED IF Q7 >= 1 TIME]
9	Q10	IN THE LAST 6 MONTHS, DID YOU AND YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE FOR YOUR CHILD? [ASKED IF Q7 >= 1 TIME]
10	Q11	WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT WANT YOUR CHILD TO TAKE A MEDICINE? [ASKED IF Q7 >= 1 TIME AND Q10 = YES]
11	Q12	WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT NOT WANT YOUR CHILD TO TAKE A MEDICINE? [ASKED IF Q7 >= 1 TIME AND Q10 = YES]
12	Q13	WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, DID A DOCTOR OR OTHER HEALTH PROVIDER ASK YOU WHAT YOU THOUGHT WAS BEST FOR YOUR CHILD? [ASKED IF Q7 >= 1 TIME AND Q10 = YES]
13	Q14	USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH CARE POSSIBLE AND 10 IS THE BEST HEALTH CARE POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE ALL YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS? [ASKED IF Q7 >= 1]
14	Q15	IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THE CARE, TESTS, OR TREATMENT YOUR CHILD NEEDED? [ASKED IF Q7 >= 1 TIME]

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

3. SPECIALIZED SERVICES

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

PAGE	QUESTION	TITLE
4.	YOUR CHILD'S PERSONAL DOCTOR	
29	Q30	A PERSONAL DOCTOR IS THE ONE YOUR CHILD WOULD SEE IF HE OR SHE NEEDS A CHECKUP, HAS A HEALTH PROBLEM, OR GETS SICK OR HURT. DOES YOUR CHILD HAVE A PERSONAL DOCTOR?
30	Q31	IN THE LAST 6 MONTHS, HOW MANY TIMES DID YOUR CHILD VISIT HIS OR HER PERSONAL DOCTOR FOR CARE? [ASKED IF Q30 = YES]
31	Q31A	IN THE LAST 6 MONTHS, HOW OFTEN DID YOU HAVE A HARD TIME SPEAKING WITH OR UNDERSTANDING YOUR CHILD'S PERSONAL DOCTOR BECAUSE YOU SPOKE DIFFERENT LANGUAGES? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
32	Q32	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR EXPLAIN THINGS ABOUT YOUR CHILD'S HEALTH IN A WAY THAT WAS EASY TO UNDERSTAND? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
33	Q33	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR LISTEN CAREFULLY TO YOU? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
34	Q34	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR SHOW RESPECT FOR WHAT YOU HAD TO SAY? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
35	Q35	IS YOUR CHILD ABLE TO TALK WITH DOCTORS ABOUT HIS OR HER HEALTH CARE? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
36	Q35A	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD HAVE A HARD TIME SPEAKING WITH OR UNDERSTANDING HIS OR HER PERSONAL DOCTOR BECAUSE THEY SPOKE DIFFERENT LANGUAGES? [ASKED IF Q30 = YES AND Q31 >= 1 TIME AND Q35 = YES]
37	Q36	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR EXPLAIN THINGS IN A WAY THAT WAS EASY FOR YOUR CHILD TO UNDERSTAND? [ASKED IF Q30 = YES AND Q31 >= 1 TIME AND Q35 = YES]
38	Q37	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR SPEND ENOUGH TIME WITH YOUR CHILD? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
39	Q38	IN THE LAST 6 MONTHS, DID YOUR CHILD'S PERSONAL DOCTOR TALK WITH YOU ABOUT HOW YOUR CHILD IS FEELING, GROWING, OR BEHAVING? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
40	Q39	IN THE LAST 6 MONTHS, DID YOUR CHILD GET CARE FROM A DOCTOR OR OTHER HEALTH PROVIDER BESIDES HIS OR HER PERSONAL DOCTOR? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
41	Q40	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR SEEM INFORMED AND UP-TO-DATE ABOUT THE CARE YOUR CHILD GOT FROM THESE DOCTORS OR OTHER HEALTH PROVIDERS? [ASKED IF Q30 = YES AND Q31 >= 1 TIME AND Q39 = YES]
42	Q41	USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST PERSONAL DOCTOR POSSIBLE AND 10 IS THE BEST PERSONAL DOCTOR POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR CHILD'S PERSONAL DOCTOR? [ASKED IF Q30 = YES]
43	Q42	DOES YOUR CHILD HAVE ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITIONS THAT HAVE LASTED FOR MORE THAN 3 MONTHS? [ASKED IF Q30 = YES]
44	Q43	DOES YOUR CHILD'S PERSONAL DOCTOR UNDERSTAND HOW THESE MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITIONS AFFECT YOUR CHILD'S DAY-TO-DAY LIFE? [ASKED IF Q30 = YES AND Q42 = YES]
45	Q44	DOES YOUR CHILD'S PERSONAL DOCTOR UNDERSTAND HOW YOUR CHILD'S MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITIONS AFFECT YOUR FAMILY'S DAY-TO-DAY LIFE? [ASKED IF Q30 = YES AND Q42 = YES]

PAGE QUESTION TITLE

5. GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

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

6. YOUR CHILD'S HEALTH PLAN

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

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

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

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

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

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

PAGE QUESTION TITLE

7. PRESCRIPTION MEDICINES

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

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

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

8. ABOUT YOUR CHILD AND YOU

- 59 Q58 IN GENERAL, HOW WOULD YOU RATE YOUR CHILD'S OVERALL HEALTH?
- 60 Q59 IN GENERAL, HOW WOULD YOU RATE YOUR CHILD'S OVERALL MENTAL OR EMOTIONAL HEALTH?
- 61 Q60 DOES YOUR CHILD CURRENTLY NEED OR USE MEDICINE PRESCRIBED BY A DOCTOR (OTHER THAN VITAMINS)?
- 62 Q61 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q60 = YES]
- 63 Q62 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q60 = YES AND Q61 = YES]
- 64 Q63 DOES YOUR CHILD NEED OR USE MORE MEDICAL CARE, MORE MENTAL HEALTH SERVICES, OR MORE EDUCATIONAL SERVICES THAN IS USUAL FOR MOST CHILDREN OF THE SAME AGE?
- 65 Q64 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q63 = YES]
- 66 Q65 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q63 = YES AND Q64 = YES]
- 67 Q66 IS YOUR CHILD LIMITED OR PREVENTED IN ANY WAY IN HIS OR HER ABILITY TO DO THE THINGS MOST CHILDREN OF THE SAME AGE CAN DO?
- 68 Q67 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q66 = YES]
- 69 Q68 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q66 = YES AND Q67 = YES]
- 70 Q69 DOES YOUR CHILD NEED OR GET SPECIAL THERAPY, SUCH AS PHYSICAL, OCCUPATIONAL, OR SPEECH THERAPY?
- 71 Q70 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q69 = YES]
- 72 Q71 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q69 = YES AND Q70 = YES]
- 73 Q72 DOES YOUR CHILD HAVE ANY KIND OF EMOTIONAL, DEVELOPMENTAL, OR BEHAVIORAL PROBLEMS FOR WHICH HE OR SHE NEEDS OR GETS TREATMENT OR COUNSELING?
- 74 Q73 HAS THIS PROBLEM LASTED OR IS IT EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q72 = YES]
- 75 NQ74 WHAT IS YOUR CHILD'S AGE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
- 76 NQ75 IS YOUR CHILD MALE OR FEMALE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
- 77 Q76 IS YOUR CHILD OF HISPANIC OR LATINO ORIGIN OR DESCENT?
- 78 Q77.1 WHAT IS YOUR CHILD'S RACE? RESPONSE: WHITE
- 79 Q77.2 WHAT IS YOUR CHILD'S RACE? RESPONSE: BLACK OR AFRICAN-AMERICAN
- 80 Q77.3 WHAT IS YOUR CHILD'S RACE? RESPONSE: ASIAN
- 81 Q77.4 WHAT IS YOUR CHILD'S RACE? RESPONSE: NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
- 82 Q77.5 WHAT IS YOUR CHILD'S RACE? RESPONSE: AMERICAN INDIAN OR ALASKA NATIVE
- 83 Q77.6 WHAT IS YOUR CHILD'S RACE? RESPONSE: OTHER
- 84 Q78 WHAT IS YOUR AGE?
- 85 Q79 ARE YOU MALE OR FEMALE?

86	Q80	WHAT IS THE HIGHEST GRADE OR LEVEL OF SCHOOL THAT YOU HAVE COMPLETED?
87	Q81	HOW ARE YOU RELATED TO THE CHILD?
88	Q82	DID SOMEONE HELP YOU COMPLETE THIS SURVEY? [ASKED IF SURVEY COMPLETED BY MAIL]
89	Q83.1	HOW DID THAT PERSON HELP YOU? RESPONSE: READ THE QUESTIONS TO ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]
90	Q83.2	HOW DID THAT PERSON HELP YOU? RESPONSE: WROTE DOWN THE ANSWERS I GAVE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]
91	Q83.3	HOW DID THAT PERSON HELP YOU? RESPONSE: ANSWERED THE QUESTIONS FOR ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]
92	Q83.4	HOW DID THAT PERSON HELP YOU? RESPONSE: TRANSLATED THE QUESTIONS INTO MY LANGUAGE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]
93	Q83.5	HOW DID THAT PERSON HELP YOU? RESPONSE: HELPED IN SOME OTHER WAY. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]

PAGE	QUESTION	TITLE
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9. RATINGS

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

10. COMPOSITES

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

11. GLOBAL PROPORTION COMPOSITES

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

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

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

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

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

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

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

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

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

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

- Yes
- No

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

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

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

- Never
- Sometimes
- Usually
- Always

YOUR PERSONAL DOCTOR

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

- Yes
- No → *Go to Question 24*

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → Go to Question 23

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

- Never
- Sometimes
- Usually
- Always

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

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

GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

- Yes
- No → Go to Question 28

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

- Never
- Sometimes
- Usually
- Always

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

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

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

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



YOUR HEALTH PLAN

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

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

- Yes
- No → *Go to Question 30*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 33*

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 35*

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

- Never
- Sometimes
- Usually
- Always

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

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

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

- Yes
- No → *Go to Question 35c*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 35e*

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

- Never
- Sometimes
- Usually
- Always

CULTURAL COMPETENCY

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes, definitely
- Yes, somewhat
- No

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

- Yes, definitely
- Yes, somewhat
- No

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

- Yes, definitely
- Yes, somewhat
- No

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

- Yes, definitely
- Yes, somewhat
- No

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

HEALTH LITERACY

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

INTERPRETER SERVICES

35r. What is your preferred language?

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

35s. How well do you speak English?

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

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

- Never
- Sometimes
- Usually
- Always



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

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

- Yes
- No → **Go to Question 36**

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

- Never
- Sometimes
- Usually
- Always

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

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

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

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

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

- Never
- Sometimes
- Usually
- Always

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

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

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

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

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

- Never
- Sometimes
- Usually
- Always



ABOUT YOU

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

- Excellent
- Very Good
- Good
- Fair
- Poor

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

- Excellent
- Very Good
- Good
- Fair
- Poor

38. Have you had either a flu shot or flu spray in the nose since July 1, 2013?

- Yes
- No
- Don't know

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No
- Don't know

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

- Yes
- No
- Don't know

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

- Yes
- No

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

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

THANK YOU

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

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

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





448-12



12

CTYAD

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

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

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

Correct
Mark 

Incorrect
Marks



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

- Yes → *Go to Question 1*
- No

↓ **START HERE** ↓

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

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

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

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

- 3. In the last 6 months, did your child have an illness, injury, or condition that needed care right away in a clinic, emergency room, or doctor's office?
 - Yes
 - No → *Go to Question 5*

- 4. In the last 6 months, when your child needed care right away, how often did your child get care as soon as he or she needed?
 - Never
 - Sometimes
 - Usually
 - Always

- 5. In the last 6 months, did you make any appointments for a check-up or routine care for your child at a doctor's office or clinic?
 - Yes
 - No → *Go to Question 7*

- 6. In the last 6 months, when you made an appointment for a check-up or routine care for your child at a doctor's office or clinic, how often did you get an appointment as soon as your child needed?
 - Never
 - Sometimes
 - Usually
 - Always

- 7. In the last 6 months, not counting the times your child went to an emergency room, how many times did he or she go to a doctor's office or clinic to get health care?
 - None → *Go to Question 16*
 - 1 time
 - 2
 - 3
 - 4
 - 5 to 9
 - 10 or more times

- 8. In the last 6 months, did you and your child's doctor or other health provider talk about specific things you could do to prevent illness in your child?
 - Yes
 - No

- 9. In the last 6 months, how often did you have your questions answered by your child's doctor or other health provider?
 - Never
 - Sometimes
 - Usually
 - Always

- 10. In the last 6 months, did you and your child's doctor or other health provider talk about starting or stopping a prescription medicine for your child?
 - Yes
 - No → *Go to Question 14*

- 11. When you talked about your child starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might want your child to take a medicine?
 - Not at all
 - A little
 - Some
 - A lot



12. When you talked about your child starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might **not** want your child to take a medicine?
- Not at all
 - A little
 - Some
 - A lot
13. When you talked about your child starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for your child?
- Yes
 - No
14. Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your child's health care in the last 6 months?
-
- 0 1 2 3 4 5 6 7 8 9 10
- Worst Health Care Possible Best Health Care Possible
15. In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed?
- Never
 - Sometimes
 - Usually
 - Always
16. Is your child now enrolled in any kind of school or daycare?
- Yes
 - No → **Go to Question 19**

17. In the last 6 months, did you need your child's doctor or other health provider to contact a school or daycare center about your child's health or health care?
- Yes
 - No → **Go to Question 19**
18. In the last 6 months, did you get the help you needed from your child's doctor or other health provider in contacting your child's school or daycare?
- Yes
 - No

SPECIALIZED SERVICES

19. Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment.
- In the last 6 months, did you get or try to get any special medical equipment or devices for your child?
- Yes
 - No → **Go to Question 22**
20. In the last 6 months, how often was it easy to get special medical equipment or devices for your child?
- Never
 - Sometimes
 - Usually
 - Always
21. Did anyone from your child's health plan, doctor's office, or clinic help you get special medical equipment or devices for your child?
- Yes
 - No



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

- Yes
- No → *Go to Question 25*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 28*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 30*

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

- Yes
- No

YOUR CHILD'S PERSONAL DOCTOR

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

- Yes
- No → *Go to Question 45*

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

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

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

- Never
- Sometimes
- Usually
- Always



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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → **Go to Question 37**

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → **Go to Question 41**

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

- Never
- Sometimes
- Usually
- Always



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

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

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

- Yes
- No → **Go to Question 45**

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

- Yes
- No

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

- Yes
- No

GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

- Yes
- No → **Go to Question 49**

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

- Never
- Sometimes
- Usually
- Always

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

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

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

0 1 2 3 4 5 6 7 8 9 10

Worst Specialist Possible Best Specialist Possible

YOUR CHILD'S HEALTH PLAN

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

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

Yes
 No → *Go to Question 52*

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

Never
 Sometimes
 Usually
 Always

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

Never
 Sometimes
 Usually
 Always

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

Yes
 No → *Go to Question 54*

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

Never
 Sometimes
 Usually
 Always

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

0 1 2 3 4 5 6 7 8 9 10

Worst Health Plan Possible Best Health Plan Possible

PRESCRIPTION MEDICINES

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

Yes
 No → *Go to Question 58*

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

Never
 Sometimes
 Usually
 Always



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

- Yes
- No

ABOUT YOUR CHILD AND YOU

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Yes
- No → *Go to Question 63*

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

- Yes
- No → *Go to Question 63*

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

- Yes
- No

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

- Yes
- No → *Go to Question 66*

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

- Yes
- No → *Go to Question 66*

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

- Yes
- No

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

- Yes
- No → *Go to Question 69*

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

- Yes
- No → *Go to Question 69*

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

- Yes
- No

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

- Yes
- No → *Go to Question 72*



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

- Yes
- No → *Go to Question 72*

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

- Yes
- No

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

- Yes
- No → *Go to Question 74*

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

- Yes
- No

74. What is your child's age?

- Less than 1 year old

YEARS OLD (write in)

75. Is your child male or female?

- Male
- Female

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

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

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

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

78. What is your age?

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

79. Are you male or female?

- Male
- Female

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

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

81. How are you related to the child?

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

82. Did someone help you complete this survey?

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

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

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

THANK YOU

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

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

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







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

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

Si quiere recibir más información acerca de este estudio, llame al 1-888-506-5136 (o, para personas con problemas de audición, llame al 1-888-631-2097).

INSTRUCCIONES PARA EL CUESTIONARIO

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

Marca
Correcta ●

Marca
Incorrecta   

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

- Sí → *Pase a la Pregunta 1*
- No

↓ **COMIENCE AQUI** ↓

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

- Sí → *Pase a la pregunta 3*
- No

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

LA ATENCIÓN MÉDICA QUE USTED RECIBIÓ EN LOS ÚLTIMOS 6 MESES

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

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

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

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

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

20. En los últimos 6 meses, ¿con qué frecuencia su doctor personal pasó suficiente tiempo con usted?

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

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

- Sí
- No → *Pase a la pregunta 23*

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

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

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

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

LA ATENCIÓN MÉDICA QUE RECIBÍ DE ESPECIALISTAS

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

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

- Sí
- No → *Pase a la pregunta 28*

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

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

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

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



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

- Sí
- No → *Pase a la pregunta 35c*

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

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

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

- Sí
- No → *Pase a la pregunta 35e*

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

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

CAPACIDAD CULTURAL

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

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

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

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

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

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

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

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

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

- Sí, definitivamente
- Sí, algo
- No

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

- Sí, definitivamente
- Sí, algo
- No

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

- Sí, definitivamente
- Sí, algo
- No

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

- Sí, definitivamente
- Sí, algo
- No

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

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

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

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

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

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

COMPRESIÓN DE INFORMACIÓN DE SALUD

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

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

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



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

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

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

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

SERVICIOS DE INTÉRPRETE

35r. ¿Qué idioma prefiere hablar usted?

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

35s. ¿Qué tan bien habla inglés?

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

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

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

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

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

- Sí
- No → *Pase a la Pregunta 36*

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

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

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

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

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

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

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

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

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

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

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

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

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

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

ACERCA DE USTED

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Sí
- No
- No sé

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

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

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

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

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

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

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

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

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

- Sí
- No
- No sé

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

- Sí
- No
- No sé

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

- Sí
- No

46. Que usted sepa, ¿tiene alguna de las siguientes enfermedades? Marque todas las que aplican.

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

47. ¿Alguna vez le ha dicho un médico que usted tiene alguna de las siguientes enfermedades? Marque todas las que aplican.

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

48. En los últimos 6 meses, ¿ha ido a ver a un doctor o a otro profesional médico 3 veces o más por la misma enfermedad o problema?

- Sí
- No → *Pase a la pregunta 50*

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

- Sí
- No

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

- Sí
- No → **Pase a la pregunta 52**

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

- Sí
- No

52. ¿Qué edad tiene?

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

53. ¿Es usted hombre o mujer?

- Hombre
- Mujer

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

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

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

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

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

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

57. ¿Le ayudó alguien a completar esta encuesta?

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

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

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

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

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

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



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

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

Si quiere recibir más información acerca de este estudio, llame al 1-888-506-5136 (o, para personas con problemas de audición, llame al 1-888-631-2097).

INSTRUCCIONES PARA EL CUESTIONARIO

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

Marca
Correcta ●

Marca
Incorrecta 

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

● Sí → *Pase a la Pregunta 1*
○ No

↓ **COMIENCE AQUI** ↓

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

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

○ Sí → *Pase a la pregunta 3*
○ No

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

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

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

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

7. En los últimos 6 meses, sin contar las veces en que su niño fue a una sala de emergencia, ¿cuántas veces fue su niño a un consultorio médico o a una clínica para que lo atendieran?
- Ninguna vez → *Pase a la pregunta 16*
 1 vez
 2
 3
 4
 5 a 9
 10 veces o más
8. En los últimos 6 meses, ¿hablaron usted y el doctor u otro profesional médico de su niño sobre cosas específicas que usted podría hacer para prevenir que su niño se enferme?
- Sí
 No
9. En los últimos 6 meses, ¿con qué frecuencia le contestaron sus preguntas los doctores u otros profesionales médicos de su niño?
- Nunca
 A veces
 La mayoría de las veces
 Siempre
10. En los últimos 6 meses, ¿hablaron usted y el doctor u otro profesional médico de su niño sobre comenzar o suspender una medicina recetada?
- Sí
 No → *Pase a la pregunta 14*

11. Cuando hablaron de comenzar o suspender una medicina recetada para su niño, ¿qué tanto habló un doctor u otro profesional médico sobre las razones por las que tal vez usted quiera que su niño tome una medicina?

- Para nada
- Un poco
- Algo
- Mucho

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

- Para nada
- Un poco
- Algo
- Mucho

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

- Sí
- No

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

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

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

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

16. ¿Está matriculado actualmente su niño en algún tipo de escuela o guardería/cuidado infantil?

- Sí
- No → *Pase a la pregunta 19*

17. En los últimos 6 meses, ¿necesitó que los doctores o los otros profesionales médicos de su niño se pusieran en contacto con una escuela o guardería acerca de la salud o la atención médica de su niño?

- Sí
- No → *Pase a la pregunta 19*

18. En los últimos 6 meses, ¿consiguió la ayuda de los doctores o los otros profesionales médicos de su niño que necesitaba para ponerse en contacto con la escuela o guardería de su niño?

- Sí
- No

SERVICIOS ESPECIALIZADOS

19. En el equipo o dispositivo médico especial se incluye un andador, silla de ruedas, nebulizador, tubos de alimentación o equipo de oxígeno.

En los últimos 6 meses, ¿consiguió o intentó conseguir algún equipo o dispositivo médico especial para su niño?

- Sí
- No → *Pase a la pregunta 22*



20. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir equipo o dispositivos médicos especiales para su niño?

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

21. ¿Alguien del plan de salud, del consultorio médico o clínica de su niño le ayudó a conseguir el equipo o dispositivos médicos especiales para su niño?

- Sí
- No

22. En los últimos 6 meses, ¿consiguió o intentó conseguir terapia especial para su niño tal como terapia física, ocupacional o del habla?

- Sí
- No → *Pase a la pregunta 25*

23. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir esta terapia para su niño?

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

24. ¿Alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a conseguir esta terapia para su niño?

- Sí
- No

25. En los últimos 6 meses, ¿consiguió o intentó conseguir tratamiento o consejería para su niño, para un problema emocional, de desarrollo o de comportamiento?

- Sí
- No → *Pase a la pregunta 28*

26. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir este tratamiento o consejería para su niño?

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

27. ¿Alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a conseguir este tratamiento o consejería para su niño?

- Sí
- No

28. En los últimos 6 meses, ¿recibió su niño atención de más de un tipo de profesional médico, o usó más de un tipo de servicio de salud?

- Sí
- No → *Pase a la pregunta 30*

29. En los últimos 6 meses, ¿alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a coordinar la atención médica de su niño entre estos profesionales o servicios diferentes?

- Sí
- No

EL DOCTOR PERSONAL DE SU NIÑO

30. El doctor personal es aquel a quien su niño va si necesita un chequeo, quiere pedir consejo sobre un problema de salud, está enfermo o lastimado. ¿Tiene su niño un doctor personal?

- Sí
- No → *Pase a la pregunta 45*

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

- Ninguna vez → **Pase a la pregunta 41**
- 1 vez
- 2
- 3
- 4
- 5 a 9
- 10 veces o más

31a. En los últimos 6 meses, ¿con qué frecuencia se le hizo difícil hablar o entender al doctor personal de su niño porque hablaban idiomas diferentes?

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

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

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

33. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño le escuchó a usted con atención?

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

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

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

35. ¿Su niño puede hablar con los doctores sobre su atención médica?

- Sí
- No → **Pase a la pregunta 37**

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

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

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

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

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

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



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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 41*

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 45*

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

- Sí
- No

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

- Sí
- No

LA ATENCIÓN MÉDICA QUE RECIBIÓ DE ESPECIALISTAS

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

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

- Sí
- No → *Pase a la pregunta 49*

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

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

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

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

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

EL PLAN DE SALUD DE SU NIÑO

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

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

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

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

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

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

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

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

MEDICINAS RECETADAS

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



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

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

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

- Sí
- No

ACERCA DE USTED Y DE SU NIÑO

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Sí
- No → *Pase a la pregunta 63*

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

- Sí
- No → *Pase a la pregunta 63*

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 66*

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

- Sí
- No → *Pase a la pregunta 66*

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 69*

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

- Sí
- No → *Pase a la pregunta 69*

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 72*

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

- Sí
- No → *Pase a la pregunta 72*

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 74*

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

- Sí
- No

74. ¿Qué edad tiene su niño?

- Menos de un año

AÑOS (escriba la respuesta)

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

- Masculino
- Femenino

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

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

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

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

78. ¿Qué edad tiene usted?

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

79. ¿Es usted hombre o mujer?

- Hombre
- Mujer

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

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

◆

81. ¿Qué relación tiene con el niño?

- Madre o padre
- Abuelo o abuela
- Tía o tío
- Hermano o hermana mayor
- Otro familiar
- Tutor legal del niño
- Otra persona

82. ¿Le ayudó alguien a completar esta encuesta?

- Sí → ***Pase a la pregunta 83***
- No → ***Gracias. Por favor, devuelva esta encuesta en el sobre con el porte o franqueo pagado.***

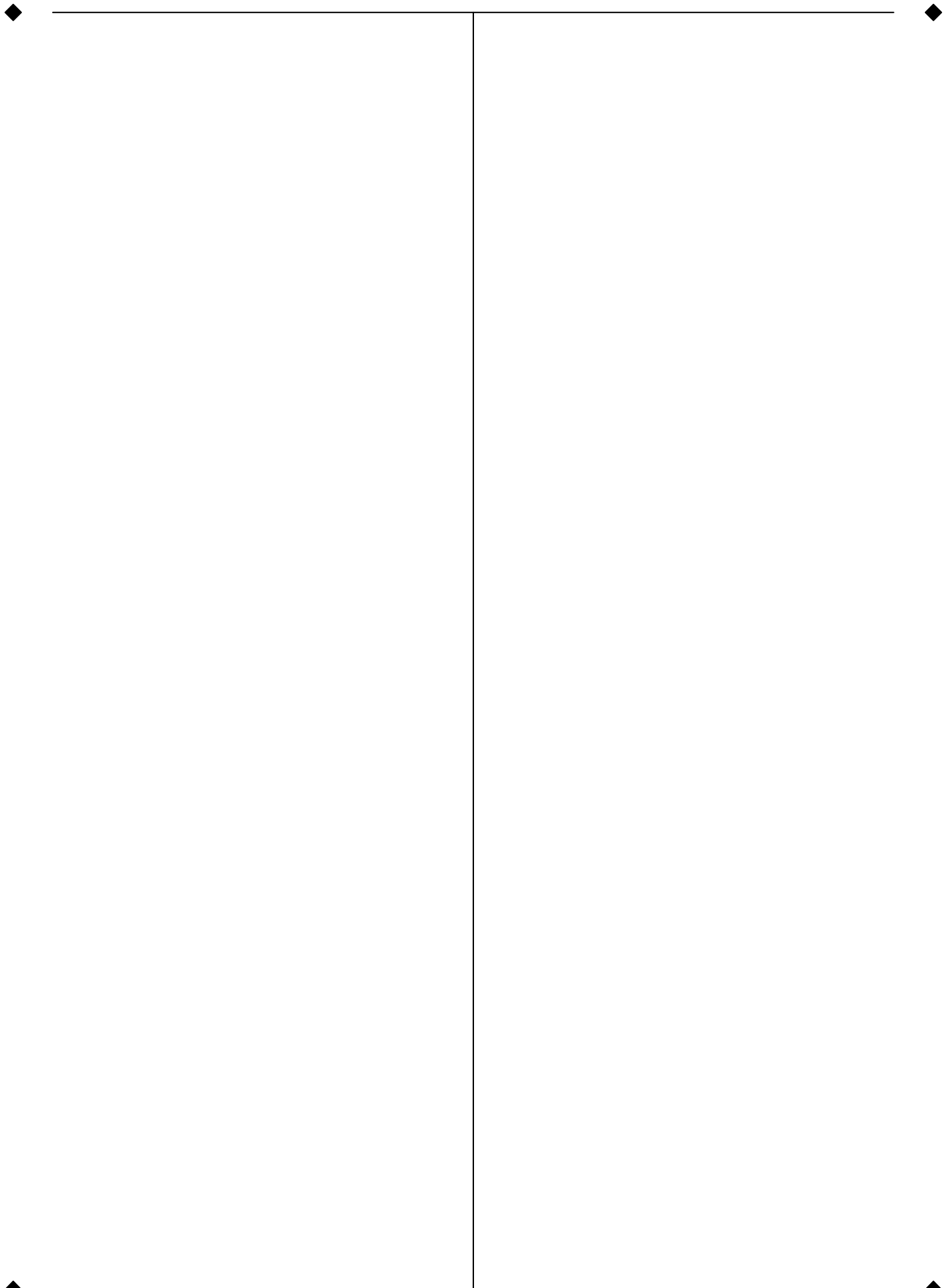
83. ¿Cómo le ayudó a usted esta persona? Marque una o más.

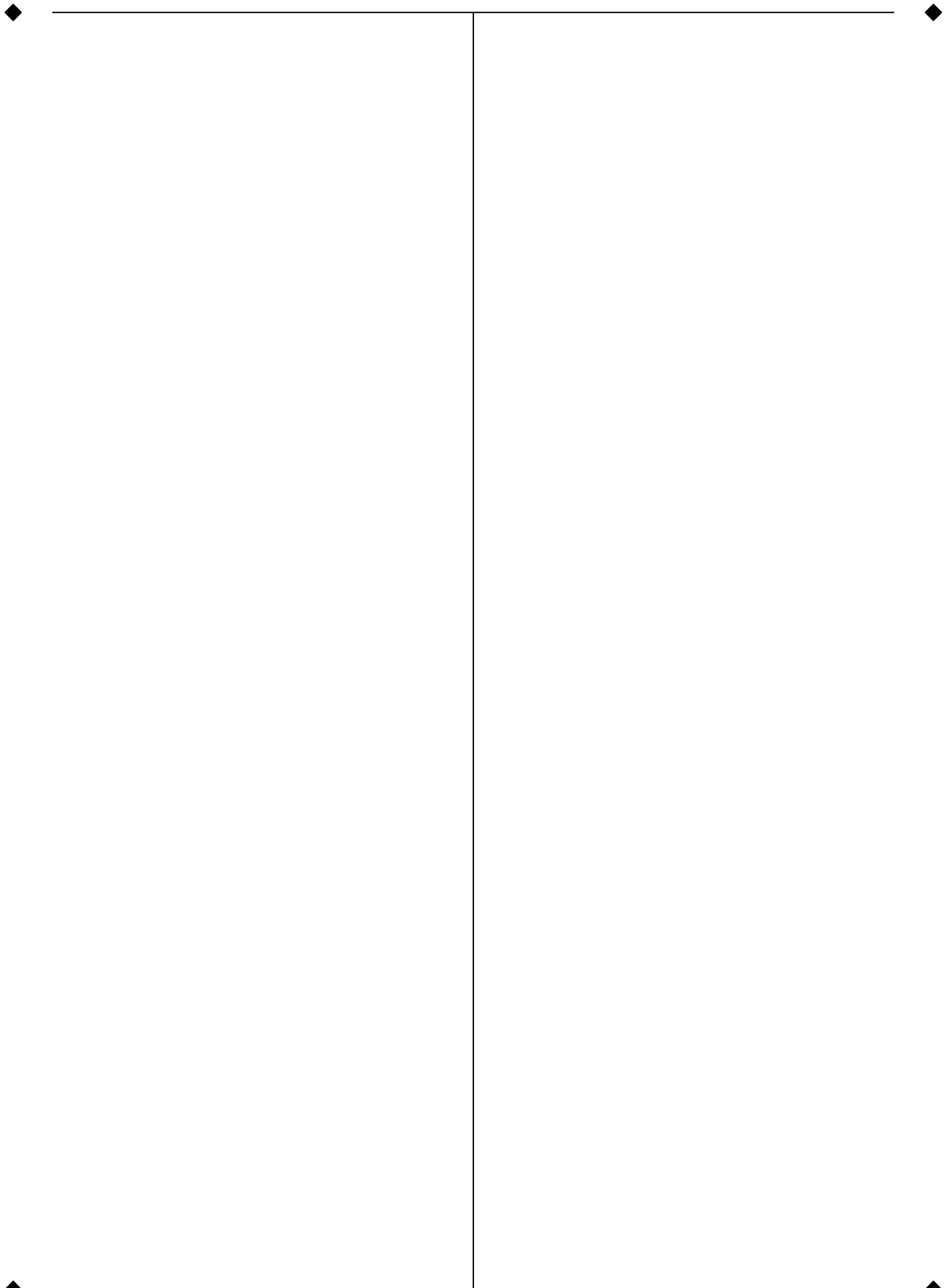
- Me leyó las preguntas
- Anotó las respuestas que le di
- Contestó las preguntas por mí
- Tradujo las preguntas a mi idioma
- Me ayudó de otra forma (Por favor use letra de molde)

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

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

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





DIAL.SCREEN

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

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

(IWER: THIS IS NOT A PROXY INTERVIEW.)

Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may be monitored and recorded for quality control. May I please speak with [MEMBER FIRST NAME] [MEMBER LAST NAME]?

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

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

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

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

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

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

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

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

RETURN TO COVERSHEET

MAIL.SCREEN

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

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

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

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

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

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

RE.INTRO

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

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

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

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

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

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

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

("DK" NOT ALLOWED)

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

SEX

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

- 1. MALE
- 2. FEMALE

SPAN.VAR

(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

- 1. Spanish
- 2. English

MEMBER

1. / MEMBER

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

("DK" NOT ALLOWED)

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

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

NPLNAME

2. / NPLNAME

What is the name of your health plan?

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS Oregon Health Plan]

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

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

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

PLNAME

2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)

CK.PLMSTCR:

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

INTRO.INCARE

INTRO.INCARE

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

INCARE

3. / INCARE

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

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

DK/REFUSAL/NOT ASCERTAINED --> APMAKE4

CARSN4

4. / CARSN4

In the last 6 months, when you NEEDED CARE RIGHT AWAY, how often did you get care as soon as you needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

APMAKE4

5. / APMAKE4

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

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

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

APGET4

6. / APGET4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

OFCTIM4

7. / OFCTIM4

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

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

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

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

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

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

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

PRVENT5

8. / PRVENT5

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

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RXSTP

9. / RXSTP

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

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

DK/REFUSAL/NOT ASCERTAINED --> RTALLCR

RXWHY

10. / RXWHY

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXWYNT

11. / RXWYNT

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXBST

12. / RXBST

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RTALLCR

13. / RTALLCR

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

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

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

DK/REFUSAL/NOT ASCERTAINED

CARNES4

14. / CARNES4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PRSNLD4

15. / PRSNLD4

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

Do you have a personal doctor?

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

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

DRTMS

16. / DRTMS

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

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

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

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

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

DREXPL4

17. / DREXPL4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRLSTN4

18. / DRLSTN4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRESPU4

19. / DRESPU4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTMEN4

20. / DRTMEN4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DIFFDR

21. / DIFFDR

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

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

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

DRINFO

22. / DRINFO

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RATEDR4

23. / RATEDR4

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

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

DK/REFUSAL/NOT ASCERTAINED

INTRO.SPDR

INTRO.SPDR

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

NDSPDR4

24. / NDSPDR4

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

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

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

(IWER: IF RESPONDENT ASKS, "Does my (type of specialist) count?", CLARIFY, "I don't have any information about that, so please just interpret it however it seems best to you.")

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

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

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

PRBSEE4

25. / PRBSEE4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

SPDRS

26. / SPDRS

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

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

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

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

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

RTSPDR4

27. / RTSPDR4

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

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

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

- | | | | | | | | | | | |
|------------|----|----|----|----|----|----|----|----|----|------------|
| 00 | 01 | 02 | 03 | 04 | 05 | 06 | 07 | 08 | 09 | 10 |
| WORST | | | | | | | | | | BEST |
| SPECIALIST | | | | | | | | | | SPECIALIST |
| POSSIBLE | | | | | | | | | | POSSIBLE |

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN

INTRO.PLAN

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

LOOMAT4

28. / LOOMAT4

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

- 1. YES
- 2. NO -----> CLCSR4

DK/REFUSAL/NOT ASCERTAINED --> CLCSR4

UNDINF4

29. / UNDINF4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CLCSR4

30. / CLCSR4

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

- 1. YES
- 2. NO -----> 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
WORST										BEST
HEALTH PLAN										HEALTH PLAN
POSSIBLE										POSSIBLE

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HPMDEQ

35a. / HPMDEQ

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

(READ LIST)

- 1. YES
- 2. NO -----> POSTHP

DK/REFUSAL/NOT ASCERTAINED

EZMDHP

35b. / EZMDHP

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

POSTHP

35c. / POSTHP

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

EZPOST

35d. / EZPOST

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

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

DK/REFUSAL/NOT ASCERTAINED

INTRO.DTLKTF

INTRO.DTLKTF

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

DTLKTF

35e. / DTLKTF

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

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DINTER

35f. / DINTER

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DRRUDE

35g. / DRRUDE

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DRTELL

35h. / DRTELL

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DTRUST

35i. / DTRUST

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DTRUTH

35j. / DTRUTH

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DCAREH

35k. / DCAREH

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DCAREP

35l. / DCAREP

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

UNFETH

35m. / UNFETH

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

UNFINS

35n. / UNFINS

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

INTRO.ALLINF

INTRO.ALLINF

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

ALLINF

35o. / ALLINF

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

TLKQS

35p. / TLKQS

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DMEDW

35q. / DMEDW

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

PRFLANG

35r. / PRFLANG

What is your preferred language? Would you say..

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

SPKENG

35s. / SPKENG

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

DSPKPRF

35t. / DSPKPRF

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

NDINTRP

35u. / NDIRTRP

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

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

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

DK/REFUSAL/NOT ASCERTAINED

FRTRAN

35v. / FRTRAN

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

INTROFC

35w. / INTROFC

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

MOTRAN

35x. / MOTRAN

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

(READ LIST)

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

REFUSAL/NOT ASCERTAINED

CRTRAN

35y. / CRTRAN

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

RATEINT

35z. / RATEINT

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

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

INTRFRD

35aa. / INTRFRD

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

FRDPREF

35ab. / FRDPREF

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED

HLTSTA4

36. / HLTSTA4

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

MNTLSTAT

37. / MNTLSTAT

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

FLUSHOTQ

38. / FLUSHOTQ

Have you had either a flu shot or flu spray in the nose since July 1, 2013?

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

NOWSMOK

39. / NOWSMOK

Do you now smoke cigarettes or use tobacco...

(READ LIST)

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

ADVQUIT9

40. / ADVQUIT9

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PATCH9

41. / PATCH9

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

WILLPWR9

42. / WILLPWR9

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPDAY

43. / ASPDAY

Do you take aspirin daily or every other day?

(IF NEEDED: "Would you say YES or NO?")

(IWER: If the R asks about whether a particular medication or Brand name is considered aspirin, you may provide the following clarification:

Aspirin: Bayer and Bufferin

Not Aspirin: Tylenol, Motrin, Aleve, Advil, ibuprofen and acetaminophen)

1. YES
2. NO
3. DON'T KNOW
9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPUSF

44. / ASPUSF

Do you have a health problem or take medication that makes taking aspirin unsafe for you?

(IF NEEDED: "Would you say YES or NO?")

1. YES
2. NO
3. DON'T KNOW
9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPPRV

45. / ASPPRV

Has a doctor or health provider ever discussed with you the risks and benefits of aspirin to prevent heart attack or stroke?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.AWCOND

INTRO.AWCOND

When I read the following list, please tell me if you are aware that you have any of these conditions.

PHAWCD.(1-3)

46.(1-3) / PHAWCD.(1-3)

[First,/(Next/How About...)]

1. "High cholesterol"
2. "High blood pressure"
3. "Parent or sibling who had a heart attack before the age of 60"?

(IWER IF NECESSARY: "Are you aware that you have this condition?")

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.DRCOND

INTRO.DRCOND

When I read the following list, please tell me if a doctor has ever told you that you have any of these conditions.

PHDRCD.(1-4)

47.(1-4) / PHDRCD.(1-4)

[First,/(Next/How About...)]

1. "A heart attack"
2. "Angina or coronary heart disease"
3. "A stroke"
4. "Any kind of diabetes or high blood sugar"?

(IWER IF NECESSARY: "Has a doctor ever told you that you have this condition?")

[FOR PHDRCD.2: (IWER IF NEEDED, CLARIFY: Angina pectoris (an-JYE-nuh or AN-jin-uh PECK-ter-iss) is severe pain in the chest associated with insufficient blood supply to the heart.)]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

SMPROB

48. / SMPROB

[I have just a few more questions.]

In the last 6 months, did you get health care 3 or more times for the same condition or problem?

1. YES
2. NO -----> TKMED

DK/REFUSAL/NOT ASCERTAINED

PRBLST

49. / PRBLST

Is this a condition or problem that has lasted for at least 3 months?
[Please do NOT include pregnancy or menopause.]

[IWER IF NEEDED, CLARIFY: Menopause (men-ne-paws) is the time in a woman's life when she stops having menstrual periods. It is sometimes called 'the change of life' or 'the change'.)]

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

TKMED

50. / TKMED

Do you now need or take medicine prescribed by a doctor? [Please do NOT include birth control.]

1. YES
2. NO -----> QAGE4

DK/REFUSAL\NOT ASCERTAINED

TRTCOND

51. / TRTCOND

Is this medicine to treat a condition that has lasted for at least three months? Please do NOT include pregnancy or menopause.

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

52. / QAGE4

What is your age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your last birthday.")

(READ LIST IF NEEDED, "Are you...")

1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

QGENDER

53. / QGENDER

(IWER: RECORD RESPONDENT'S SEX, 'DK' NOT ALLOWED)

(ASK IF NECESSARY, "Are you male or female?")

1. MALE
2. FEMALE

EDUCAT

54. / EDUCAT

What is the highest grade or level of school that you have COMPLETED?
Did you complete...

(IWER: IF R SAYS HE/SHE HAD NON-ACADEMIC TRAINING, SUCH AS TRADE SCHOOL, PROBE: "Did you receive a high school diploma or GED?")

(IWER: ACADEMIC TRAINING BEYOND A HIGH SCHOOL DIPLOMA THAT DOES NOT LEAD TO A BACHELORS DEGREE, SHOULD BE CODED "4". IF R WENT TO BUSINESS SCHOOL OR GOT A 3-YEAR NURSING DEGREE, ENTER "4")

(IWER: IF R OFFERS MORE THAN ONE RESPONSE, FOR EXAMPLE: "SOME HIGH SCHOOL OR GED", ENTER THE HIGHEST NUMBER THAT APPLIES.)

(READ LIST)

1. 8TH GRADE OR LESS,
2. SOME HIGH SCHOOL, BUT DID NOT GRADUATE,
3. HIGH SCHOOL GRADUATE OR GED,
4. SOME COLLEGE OR 2-YEAR DEGREE,
5. 4-YEAR COLLEGE GRADUATE, OR
6. MORE THAN A 4-YEAR COLLEGE DEGREE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

LATINO

55. / LATINO

Are you of Hispanic or Latino origin or descent?

1. YES / HISPANIC OR LATINO
2. NO / NOT HISPANIC OR LATINO

DK/REFUSAL/NOT ASCERTAINED

INTRO.RACE

INTRO.RACE

I am going to read a list of race categories. For each category, please say YES or NO if it describes your race. I must ask you about all categories in case more than one applies.

PQRACE3.(1-6)

56.(1-6) / PQRACE3.(1-6)

[(Are you)]

1. "White"
2. "Black or African-American"
3. "Asian"
4. "Native Hawaiian or other Pacific Islander"
5. "American Indian or Alaska Native"
6. "Some other race"?

(IWER: IF R REPLIES "WHY ARE YOU ASKING ABOUT MY RACE?" SAY
"We ask about your race for demographic purposes only.
We want to be sure that the people we survey accurately represent the
racial diversity of managed care enrollees in this country.")

(IWER: If R answers with a category not listed here, such as "HISPANIC"
or "AMERICAN" or "MIXED RACE", probe using the category "OTHER".)

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

QRACE3.OTH / QRACE3.OTH
(What is your race?)

ALL.DONE
THANKS.SCREEN.

Those are all the questions I have.

Thank you for taking part in this important interview.

Have a nice (day/evening). Good bye.

RETURN TO COVERSHEET

EDIT.FLG
(IWER: DO YOU NEED TO TYPE AN EDIT?)

1. YES
2. NO

IF EDIT.FLG = 2 THEN GO TO CK.END.EDIT

EDIT.OTH
EDIT.OTH. (IWER: PLEASE TYPE YOUR EDIT-BE SPECIFIC-INCLUDE:

- 1) QUESTION NUMBER(S)
 - 2) WHAT WAS ENTERED
 - 3) WHAT NEEDS TO BE CHANGED
-

CK.END.EDIT
LANG.DID

LANG.DID. IWER: DID YOU DO THIS INTERVIEW IN...

1. ENGLISH,
2. SPANISH OR
3. BOTH?

END.SCREEN

COVERSHEET NOT NEEDED

I may need to contact you again later, but today we are only interviewing members of Oregon Health Plan, so those are all the questions I have. Thank you very much for your help.

(RC = [RC%])

RETURN TO COVERSHEET

TRANS.SCRN

INTERVIEWER: YOU HAVE INDICATED THAT YOU HAVE A SPANISH SPEAKER OR A HOUSEHOLD WITH A LANGUAGE PROBLEM.

1. IF THIS COVERSHEET SHOULD BE MOVED TO THE SPANISH PROJECT ENTER "1"
2. IF THIS WAS AN ERROR, TYPE "2" TO GO BACK

WHAT.LANG

INTERVIEWER: WHAT LANGUAGE DO YOU THINK THEY SPEAK IN THIS HOUSEHOLD?

DK

GOOD.BYE

INTERVIEWER: [THIS ID HAS BEEN TRANSFERRED TO THE SPANISH PROJECT/THIS ID IS NOT ELIGIBLE FOR TRANSFER TO THE SPANISH PROJECT. THIS ID WILL BE CODED AS A LANGUAGE PROBLEM]

[(RC = 80)/(RC = 63)]

DIAL.SCREEN

DS. INTERVIEWER: YOU MAY DO THE INTERVIEW WITH ONLY THE PARENT OR GUARDIAN WHO KNOWS MOST ABOUT [MEMBER NAME]'S HEALTH CARE]

PHONE NUMBER ---> (###) ### - ####

(IWER: THIS IS A PROXY INTERVIEW.)

Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may be monitored and recorded for quality control. May I please speak with the person who knows the most about [NAME OF CHILD]'s health care]?

(IF NEEDED: "We are conducting an important study to find out how satisfied families are with Oregon Health Plan. The results of the study will help Oregon Health Plan improve the care they provide and will also help consumers when they choose health care plans.")

(IF NEEDED: "The interview is completely confidential and voluntary, and will not affect your child's health care or benefits in any way.")

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

01. CONTINUE
02. ALREADY COMPLETED AND MAILED SURVEY BACK
03. NEW PHONE NUMBER
04. REFUSAL
05. APPOINTMENT
06. NEVER HEARD OF R
07. KNOWS R BUT HAS NO NEW NUMBER FOR R
08. RNA, ANS MACH, RETURN TO COVERSHEET
09. LANGUAGE PROBLEM -- SPEAKS SPANISH
10. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH

IF DIAL.SCREEN = 01, GO TO RE.INTRO

IF DIAL.SCREEN = 02, GO TO MAIL.SCREEN

IF DIAL.SCREEN = 03, ENTER NEW NUMBER ON COVERSHEET AND RE-DIAL

RETURN TO COVERSHEET

MAIL.SCREEN

MS. INTERVIEWER: WE STILL NEED TO CONDUCT A TELEPHONE INTERVIEW EVEN
THOUGH R SAYS THEY'VE SENT BACK THE MAIL SURVEY.

I'm sorry, but we haven't received your survey back -- it may have been lost in the mail. And since the deadline for mailing surveys has passed, we're now in the telephone phase of this study. May I continue?

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

1. CONTINUE
2. REFUSAL BECAUSE ALREADY COMPLETED AND MAILED SURVEY BACK
3. REFUSAL
4. APPOINTMENT

IF MAIL.SCREEN = 1, GO TO RE.INTRO
RETURN TO COVERSHEET

RE.INTRO

RE.INTRO. (INTERVIEWER: READ PARENS TEXT IF R ISN'T PERSON WHO ANSWERED
PHONE OR HAS NOT HEARD IT YET.)

(Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may be monitored and recorded for quality control.)

We are conducting an important study to find out how satisfied families are with Oregon Health Plan. The results of the study will help Oregon Health Plan improve the care they provide and will also help consumers when they choose health care plans.

The interview is completely confidential and voluntary, and will not affect your child's health care or benefits in any way.

(IF R ASKS: "How long will this take?", EXPLAIN: "The questions should take about 12-15 minutes to answer.")

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

("DK" NOT ALLOWED)

1. CONTINUE
2. APPOINTMENT
3. REFUSAL
4. LANGUAGE PROBLEM -- SPEAKS SPANISH
5. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH
6. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)
7. RETURN TO CS

SEX

SEX. (IWER: RECORD RESPONDENT'S SEX, 'DK' NOT ALLOWED)

- 1. MALE
- 2. FEMALE

SPAN.VAR

(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

- 1. Spanish
- 2. English

MEMBER

1. / MEMBER

[I will be asking you about [NAME OF CHILD]'s health care. Please answer these questions based on the experiences you have had in getting health care for [NAME OF CHILD], and NOT on any experiences you may have had getting care for yourself or other members of your family.]

Our records show that your child is now in Oregon Health Plan. Is that right?

("DK" NOT ALLOWED)

(IWER: IF R SAYS "LEFT PLAN" OR "SWITCHED PLANS" OR "NO LONGER INSURED" ENTER "2". IF R IS NOT SURE IF HE/SHE IS PART OF OREGON HEALTH PLAN, ENTER "2".)

- 1. YES --> CK.PLMSTCR
- 2. NO

NPLNAME

2. / NPLNAME

What is the name of your child's health plan?

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS OREGON HEALTH PLAN]

(IF R SAYS SOMETHING CLOSE TO OREGON HEALTH PLAN, ENTER "2")

(IF R NOT SURE OF PLAN NAME, ENTER "2")

- 1. EXACT MATCH -----> CK.PLMSTCR
- 2. POSSIBLE MATCH -----> PLNAME
- 3. NOT A MATCH -----> PLNAME
- 4. CHILD NO LONGER INSURED -----> NO.INSUR
- 5. CHILD INSURED BY MEDICAID BUT DOESN'T ----> CK.PLMSTCR
KNOW PLAN NAME
- 6. CHILD INSURED BUT NOT BY MEDICAID -----> NO.INSUR

PLNAME

2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)

CK.PLMSTCR:

IF NPLNAME = NOT A MATCH (3), GO TO END.SCREEN

INTRO.INCARE

INTRO.INCARE

Now I'm going to ask you some questions about your child's health care. When you answer these questions, please do NOT include dental visits or care your child got when [he/she] stayed overnight in a hospital.

INCARE

3. / INCARE

In the last 6 months, did your child have an illness, injury, or condition that NEEDED CARE RIGHT AWAY in a clinic, emergency room, or doctor's office?

- 1. YES
- 2. NO -----> APMAKE4

DK/REFUSAL/NOT ASCERTAINED --> APMAKE4

CARSN4

4. / CARSN4

In the last 6 months, when your child NEEDED CARE RIGHT AWAY, how often did your child get care as soon as [he/she] needed? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

APMAKE4

5. / APMAKE4

In the last 6 months, did you make any appointments for a CHECK-UP OR ROUTINE CARE for your child at a doctor's office or clinic?

- 1. YES
- 2. NO -----> OFCTIM4

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

APGET4

6. / APGET4

In the last 6 months, when you made an appointment for a CHECK-UP OR ROUTINE CARE for your child at a doctor's office or clinic, how often did you get an appointment as soon as your child needed? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

OFCTIM4

7. / OFCTIM4

In the last 6 months, NOT counting the times your child went to an emergency room, how many times did [he/she] go to a doctor's office or clinic to get health care?

(IWER: IF NECESSARY: "Your best estimate would be fine.")

(IWER: IF NEEDED CLARIFY: "Please don't include dental care your child received.")

(IWER: IF NEEDED CLARIFY, "Please include ALL doctor visits including those for routine, regular care and for an illness or injury.")

(READ LIST IF NEEDED: "Would you say...")

- 0. NONE,
- 1. 1 TIME,
- 2. 2,
- 3. 3,
- 4. 4,
- 5. 5 TO 9, OR
- 6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

IF OFCTIM4=0 OR DK/REFUSAL AND QNAIRE <05 THEN GO TO PRSNLD4
IF OFCTIM4=0 OR DK/REFUSAL AND QNAIRE >05 THEN GO TO CHSCHL

PRVENT5

8. / PRVENT5

In the last 6 months, did you and your child's doctor or other health provider talk about specific things you could do to prevent illness in your child?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

OFTQUES

9. / OFTQUES

In the last 6 months, how often did you have your questions answered by your child's doctors or other health providers? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXSTP

10. / RXSTP

In the last 6 months, did you and your child's doctor or other health provider talk about starting or stopping a prescription medicine for your child?

- 1. YES
- 2. NO -----> RTALLCR

DK/REFUSAL/NOT ASCERTAINED --> RTALLCR

RXWHY

11. / RXWHY

When you talked about your child starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might want your child to take a medicine? Would you say...

(READ LIST)

- 1. NOT AT ALL,
- 2. A LITTLE,
- 3. SOME, OR
- 4. A LOT?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXWYNT

12. / RXWYNT

When you talked about your child starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might NOT want your child to take a medicine? Would you say...

(READ LIST)

- 1. NOT AT ALL,
- 2. A LITTLE,
- 3. SOME, OR
- 4. A LOT?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXBST

13. / RXBST

When you talked about your child starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for your child?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RTALLCR

14. / RTALLCR

Using ANY NUMBER FROM 0 TO 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your child's health care in the last 6 months?

(IF NEEDED: "Please do not include any dental care your child may have received.")

00	01	02	03	04	05	06	07	08	09	10
WORST										BEST
HEALTH CARE										HEALTH CARE
POSSIBLE										POSSIBLE

DK/REFUSAL/NOT ASCERTAINED

CARNES4

15. / CARNES4

In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHSCHL

16. / CHSCHL

Is your child now enrolled in any kind of school or daycare?

- 1. YES
- 2. NO -----> MEDEQUIP

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

CONTSCHL

17. / CONTSCHL

In the last 6 months, did you need your child's doctors or other health providers to contact a school or daycare center about your child's health or health care?

- 1. YES
- 2. NO -----> MEDEQUIP

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

HELPCONT

18. / HELPCONT

In the last 6 months, did you get the help you needed from your child's doctors or other health providers in contacting your child's school or daycare?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

MEDEQUIP

19. / MEDEQUIP

Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment. In the last 6 months, did you get or try to get any special medical equipment or devices for your child?

- 1. YES
- 2. NO -----> SPCTHY

DK/REFUSAL/NOT ASCERTAINED --> SPCTHY

EZMDEQ

20. / EZMDEQ

In the last 6 months, how often was it easy to get special medical equipment or devices for your child? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPMDEQ

21. / HELPMDEQ

Did anyone from your child's health plan, doctor's office, or clinic help you get special medical equipment or devices for your child?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

SPCTHY

22. / SPCTHY

In the last 6 months, did you get or try to get special therapy such as physical, occupational, or speech therapy for your child?

- 1. YES
- 2. NO -----> TCPBLM

DK/REFUSAL/NOT ASCERTAINED --> TCPBLM

EZTHP

23. / EZTHP

In the last 6 months, how often was it easy to get this therapy for your child? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTHP

24. / HELPTHP

Did anyone from your child's health plan, doctor's office, or clinic help you get this therapy for your child?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

TCPBLM

25. / TCPBLM

In the last 6 months, did you get or try to get treatment or counseling for your child for an emotional, developmental, or behavioral problem?

- 1. YES
- 2. NO -----> PLUSCARE

DK/REFUSAL/NOT ASCERTAINED --> PLUSCARE

EZTC

26. / EZTC

In the last 6 months, how often was it easy to get this treatment or counseling for your child? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTC

27. / HELPTC

Did anyone from your child's health plan, doctor's office, or clinic help you get this treatment or counseling for your child?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLUSCARE

28. / PLUSCARE

In the last 6 months, did your child get care from more than one kind of health care provider or use more than one kind of health care service?

- 1. YES
- 2. NO -----> PRSNLD4

DK/REFUSAL/NOT ASCERTAINED --> PRSNLD4

HLPCOORD

29. / HLPCOORD

In the last 6 months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these different providers or services?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

PRSNLD4

30. / PRSNLD4

A personal doctor is the one your child would see if [he/she] needs a check-up, has a health problem, or gets sick or hurt.

Does your child have a personal doctor?

- 1. YES
- 2. NO -----> INTRO.SPDR

DK/REFUSAL/NOT ASCERTAINED --> INTRO.SPDR

DRTMS

31. / DRTMS

In the last 6 months, how many times did your child visit [his/her] personal doctor for care ?

(IF NEEDED: "Your best estimate would be fine.")

(READ LIST IF NEEDED: "Would you say...")

- 0. NONE, -----> RATEDR4
- 1. 1 TIME,
- 2. 2,
- 3. 3,
- 4. 4,
- 5. 5 TO 9, OR
- 6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> RATEDR4

PBDRNG

31a. /PBDRNG

In the last 6 months, how often did you have a hard time speaking with or understanding your child's personal doctor because you spoke different languages? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY,
- 4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

DREXPL4

32. / DREXPL4

In the last 6 months, how often did your child's personal doctor explain things about your child's health in a way that was easy to understand?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

DRLSTN4

33. / DRLSTN4

In the last 6 months, how often did your child's personal doctor listen carefully to you?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

DRESPU4

34. / DRESPU4

In the last 6 months, how often did your child's personal doctor show respect for what you had to say?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

CABLTLK

35. / CABLTLK

Is your child able to talk with doctors about [his/her] health care?

- 1. YES
- 2. NO -----> DRTMEN4

DK/REFUSAL/NOT ASCERTAINED --> DRTMEN4

CPBDRLN

35a. / CPBDRLN

In the last 6 months, how often did your child have a hard time speaking with or understanding his or her personal doctor because they spoke different languages? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

CDREXPL

36. / CDREXPL

In the last 6 months, how often did your child's personal doctor explain things in a way that was easy for YOUR CHILD to understand? Would you say...

(READ LIST)

1. NEVER
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTMEN4

37. / DRTMEN4

In the last 6 months, how often did your child's personal doctor spend enough time with your child ? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTLKU

38. / DRTLKU

In the last 6 months, did your child's personal doctor talk with you about how your child is feeling, growing, or behaving?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DIFFDR

39. / DIFFDR

In the last 6 months, did your child get care from a doctor or other health provider besides [his/her] personal doctor?

- 1. YES
- 2. NO -----> RATEDR4

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> RATEDR4

DRINFO

40. / DRINFO

In the last 6 months, how often did your child's personal doctor seem informed and up-to-date about the care your child got from these doctors or other health providers? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RATEDR4

41. / RATEDR4

Using ANY NUMBER FROM 0 TO 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your child's personal doctor?

00	01	02	03	04	05	06	07	08	09	10
WORST										BEST
PERSONAL										PERSONAL
DOCTOR POSSIBLE										DOCTOR POSSIBLE

DK/REFUSAL/NOT ASCERTAINED

COND3MO

42. / COND3MO

Does your child have any medical, behavioral, or other health conditions that have lasted for more than 3 MONTHS?

(IWER: "We are looking for a condition that the child CURRENTLY HAS that has lasted for more than 3 months.")

- 1. YES
- 2. NO -----> INTRO.SPDR

DK/REFUSAL/NOT ASCERTAINED --> INTRO.SPDR

DRUNCON

43. / DRUNCON

Does your child's personal doctor understand how these medical, behavioral, or other health conditions affect your child's day-to-day life?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

DRUNFAM

44. / DRUNFAM

Does your child's personal doctor understand how your child's medical, behavioral, or other health conditions affect your FAMILY'S day-to-day life?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.SPDR

INTRO.SPDR

Now I'm going to ask you some questions about specialists. When you answer these questions, please do NOT include dental visits or care your child got when (he/she) stayed overnight in a hospital.

NDSPDR4

45. / NDSPDR4

SPECIALISTS are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.

In the last 6 months, did you make any appointments for your child to see a specialist?

(CLARIFY IF NEEDED: "Specialists are doctors who specialize in one area of health care. Please include all doctors you consider to be specialists, but do not include any dental visits.")

(IWER: IF RESPONDENT ASKS, "Does a (type of specialist) count?", CLARIFY, "I don't have any information about that, so please just interpret it however it seems best to you.")

(CLARIFY IF NEEDED: "You can interpret this question however it seems best to you.")

- 1. YES
- 2. NO -----> INTRO.PLAN

DK/REFUSAL/NOT ASCERTAINED --> INTRO.PLAN

PRBSEE4

46. / PRBSEE4

In the last 6 months, how often did you get an appointment for your child to see a specialist as soon as you needed? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

SPDRS

47. / SPDRS

How many specialists has your child seen in the last 6 months?

(CLARIFY IF NEEDED: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. Would you say your child has seen...")

(READ LIST IF NEEDED: "Would you say...")

- 0. NONE, -----> INTRO.PLAN
- 1. 1 SPECIALIST,
- 2. 2,
- 3. 3,
- 4. 4, OR
- 5. 5 OR MORE SPECIALISTS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> INTRO.PLAN

RTSPDR4

48. / RTSPDR4

We want to know your rating of the specialist your child saw most often in the last 6 months.

Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

(Clarify if necessary: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.")

- | | | | | | | | | | | |
|------------|----|----|----|----|----|----|----|----|----|------------|
| 00 | 01 | 02 | 03 | 04 | 05 | 06 | 07 | 08 | 09 | 10 |
| WORST | | | | | | | | | | BEST |
| SPECIALIST | | | | | | | | | | SPECIALIST |
| POSSIBLE | | | | | | | | | | POSSIBLE |

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN
INTRO.PLAN

Now I'm going to ask you some questions about your experience with your child's health plan.

CLCSR4
49. / CLCSR4

In the last 6 months, did you get information or help from customer service at your child's health plan?

- 1. YES
- 2. NO -----> PLPRWK4

DK/REFUSAL/NOT ASCERTAINED --> PLPRWK4

PBCLCS4
50. / PBCLCS4

In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CSRESP
51. / CSRESP

In the last 6 months, how often did customer service staff at your child's health plan treat you with courtesy and respect? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLPRWK4
52. / PLPRWK4

In the last 6 months, did your child's health plan give you any forms to fill out?

- 1. YES
- 2. NO -----> RTPLEXP

DK/REFUSAL/NOT ASCERTAINED --> RTPLEXP

PBPLPW4

53. / PBPLPW4

In the last 6 months, how often were the forms from your child's health plan easy to fill out? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTPLEXP

54. / RTPLEXP

Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your child's health plan?

00	01	02	03	04	05	06	07	08	09	10
WORST										BEST
HEALTH PLAN										HEALTH PLAN
POSSIBLE										POSSIBLE

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHPRES

55. / CHPRES

In the last 6 months, did you get or refill any prescription medicines for your child?

- 1. YES
- 2. NO -----> HLTSTA4

DK/REFUSAL/NOT ASCERTAINED --> HLTSTA4

EZPRES

56. / EZPRES

In the last 6 months, how often was it easy to get prescription medicines for your child through [his/her] health plan? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPPRES

57. / HELPPRES

Did anyone from your child's health plan, doctor's office, or clinic help you get your child's prescription medicines?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

HLTSTA4

58. / HLTSTA4

In general, how would you rate your child's overall health? Would you say it is...

(READ LIST)

- 1. EXCELLENT,
- 2. VERY GOOD,
- 3. GOOD,
- 4. FAIR, OR
- 5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

MNTLSTAT

59. / MNTLSTAT

In general, how would you rate your child's overall MENTAL OR EMOTIONAL health? Would you say it is...

(READ LIST)

- 1. EXCELLENT,
- 2. VERY GOOD,
- 3. GOOD,
- 4. FAIR, OR
- 5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CUSEMED

60. / CUSEMED

Other than vitamins, does your child currently need or use medicine prescribed by a doctor?

- 1. YES
- 2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

WHYMEDA

61. / WHYMEDA

Is this because of any medical, behavioral, or other health condition?

- 1. YES
- 2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

WHYMEDB

62. / WHYMEDB

Is this a condition that has lasted or is expected to last for at least 12 months?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

MOREMED

63. / MOREMED

Does your child need or use more medical care, more mental health services, or more educational services than is usual for most children of the same age?

- 1. YES
- 2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

WHYMOREA

64. / WHYMOREA

Is this because of any medical, behavioral, or other health condition?

- 1. YES
- 2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

WHYMOREB

65. / WHYMOREB

Is this a condition that has lasted or is expected to last for at least 12 months?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

LIMITED

66. / LIMITED

Is your child limited or prevented in any way in [his/her] ability to do the things most children of the same age can do?

- 1. YES
- 2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --> SPECTHP

WHYLIMA

67. / WHYLIMA

Is this because of any medical, behavioral, or other health condition?

- 1. YES
- 2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --> SPECTHP

WHYLIMB

68. / WHYLIMB

Is this a condition that has lasted or is expected to last for at least 12 months?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

SPECTHP

69. / SPECTHP

Does your child need or get special therapy such as physical, occupational, or speech therapy?

- 1. YES
- 2. NO -----> CHCOUNS

DK/REFUSAL/NOT ASCERTAINED --> CHCOUNS

WHYSTA

70. / WHYSTA

Is this because of any medical, behavioral, or other health condition?

- 1. YES
- 2. NO -----> CHCOUNS

DK/REFUSAL/NOT ASCERTAINED --> CHCOUNS

WHYSTB

71. / WHYSTB

Is this a condition that has lasted or is expected to last for at least 12 months?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

CHCOUNS

72. / CHCOUNS

Does your child have any kind of emotional, developmental, or behavioral problem for which [he/she] needs or gets treatment or counseling?

- 1. YES
- 2. NO -----> CAGE

DK/REFUSAL/NOT ASCERTAINED --> CAGE

TIMCOUNA

73. / TIMCOUNA

Has this problem lasted or is it expected to last for at least 12 months?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

CAGE

74. / CAGE

I have just a few more questions.

What is YOUR CHILD'S age?

(IWER: ENTER 00 IF LESS THAN 1 YEAR OLD)

(IWER: IF NEEDED CLARIFY, "Please answer based on your child's age as of their last birthday.")

___ ENTER CHILD'S AGE

DK/REFUSAL/NOT ASCERTAINED

IF CAGE<19 THEN GO TO CGENDER

CAGE.CK

74a. / CAGE.CK

I have entered that [NAME OF CHILD] is [CAGE]. Is that correct?

("DK" NOT ALLOWED)

- 1. YES-AGE ENTERED CORRECTLY
- 2. NO-CORRECT AGE -----> CAGE

CGENDER

75. / CGENDER

(IF NEEDED: "Is your child male or female?")

- 1. MALE
- 2. FEMALE

REFUSAL/NOT ASCERTAINED

LATINO

76. / LATINO

Is your child of Hispanic or Latino origin or descent?

- 1. YES / HISPANIC OR LATINO
- 2. NO / NOT HISPANIC OR LATINO

DK/REFUSAL/NOT ASCERTAINED

INTRO.RACE

INTRO.RACE

I am going to read a list of race categories. For each category, please say YES or NO if it describes your child's race. I must ask you about all categories in case more than one applies.

PQRACE3.(1-6)

77.(1-6) / PQRACE3.(1-6)

[Is your child)]

- 1. "White"
- 2. "Black or African-American"
- 3. "Asian"
- 4. "Native Hawaiian or other Pacific Islander"
- 5. "American Indian or Alaska Native"
- 6. "Some other race"?

(IWER: IF R REPLIES "WHY ARE YOU ASKING ABOUT MY CHILD'S RACE?" SAY
"We ask about your child's race for demographic purposes only.
We want to be sure that the people we survey accurately represent the
racial diversity of managed care enrollees in this country.")

(IWER: If R answers with a category not listed here, such as "HISPANIC"
or "AMERICAN" or "MIXED RACE", probe using the category "OTHER".)

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

QRACE3.OTH / QRACE3.OTH
(What is your child's race?)

PAGE
78. / PAGE

Now I have a few questions about you. What is YOUR age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your
last birthday.")

(READ IF NEEDED, "Are you...")

0. UNDER 18,
1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PGENDER
79. / PGENDER

(IWER: ENTER RESPONDENT'S SEX. "DK" NOT ALLOWED.)

(IWER: IF NECESSARY ASK, "Are you male or female?")

1. MALE
2. FEMALE

EDUCAT

80. / EDUCAT

What is the highest grade or level of school that you have COMPLETED?
Did you complete...

(IWER: IF R SAYS HE/SHE HAD NON-ACADEMIC TRAINING, SUCH AS TRADE
SCHOOL, PROBE: "Did you receive a high school diploma or GED?")

(IWER: ACADEMIC TRAINING BEYOND A HIGH SCHOOL DIPLOMA THAT DOES NOT
LEAD TO A BACHELORS DEGREE, SHOULD BE CODED "4". IF R WENT TO BUSINESS
SCHOOL OR GOT A 3-YEAR NURSING DEGREE, ENTER "4")

(IWER: IF R OFFERS MORE THAN ONE RESPONSE, FOR EXAMPLE: "SOME HIGH
SCHOOL OR GED", ENTER THE HIGHEST NUMBER THAT APPLIES.)

(READ LIST)

1. 8TH GRADE OR LESS,
2. SOME HIGH SCHOOL, BUT DID NOT GRADUATE,
3. HIGH SCHOOL GRADUATE OR GED,
4. SOME COLLEGE OR 2-YEAR DEGREE,
5. 4-YEAR COLLEGE GRADUATE, OR
6. MORE THAN A 4-YEAR COLLEGE DEGREE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHRELT

81. / CHRELT

How are you related to the child?

(READ IF NEEDED: "Are you the ...")

1. MOTHER OR FATHER,
2. GRANDPARENT,
3. AUNT OR UNCLE,
4. OLDER BROTHER OR SISTER,
5. OTHER RELATIVE,
6. LEGAL GUARDIAN, OR
7. SOMEONE ELSE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ALL.DONE

THANKS.SCREEN.

Those are all the questions I have.

Thank you for taking part in this important interview.

Have a nice (day/evening). Good bye.

RETURN TO COVERSHEET

EDIT.FLG

(IWER: DO YOU NEED TO TYPE AN EDIT?)

1. YES
2. NO

IF EDIT.FLG = 2 THEN GO TO CK.END.EDIT

EDIT.OTH

EDIT.OTH. (IWER: PLEASE TYPE YOUR EDIT-BE SPECIFIC-INCLUDE:

- 1) QUESTION NUMBER(S)
 - 2) WHAT WAS ENTERED
 - 3) WHAT NEEDS TO BE CHANGED
-

CK.END.EDIT

LANG.DID

LANG.DID. IWER: DID YOU DO THIS INTERVIEW IN...

1. ENGLISH,
2. SPANISH OR
3. BOTH?

END.SCREEN

COVERSHEET NOT NEEDED

I may need to contact you again later, but today we are only interviewing members of Oregon Health Plan, so those are all the questions I have. Thank you very much for your help.

(RC = [RC%])

RETURN TO COVERSHEET

TRANS.SCRN

INTERVIEWER: YOU HAVE INDICATED THAT YOU HAVE A SPANISH SPEAKER OR
A HOUSEHOLD WITH A LANGUAGE PROBLEM.

1. IF THIS COVERSHEET SHOULD BE MOVED TO THE SPANISH PROJECT
ENTER "1"
2. IF THIS WAS AN ERROR, TYPE "2" TO GO BACK

WHAT.LANG

INTERVIEWER: WHAT LANGUAGE DO YOU THINK THEY SPEAK IN THIS HOUSEHOLD?

DK

GOOD.BYE

INTERVIEWER: [THIS ID HAS BEEN TRANSFERRED TO THE SPANISH PROJECT/THIS ID IS
NOT ELIGIBLE FOR TRANSFER TO THE SPANISH PROJECT. THIS ID WILL BE CODED AS
A LANGUAGE PROBLEM]

[(RC = 80)/(RC = 63)]

