



Cascade Health Alliance
CAHPS® 5.0 Medicaid Survey

Banner Book Report

June 2017
Measurement Year 2016



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METHODOLOGY

Introduction

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

Survey Milestones

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

Sampling

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

Questionnaires

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

Selection of Cases for Analysis

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

Composites, Overall Ratings, and Measures for Reporting

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

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

Composite: Getting Needed Care

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

Q25/46. Getting appointments with specialists

Composite: Getting Care Quickly

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

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

Composite: How Well Doctors Communicate

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

Q18/33. Personal doctor listened carefully to you

Q19/34. Personal doctor showed respect for what you had to say

Q20/37. Personal doctor spent enough time with you/your child

Composite: Customer Service

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

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

Composite: Shared Decision Making

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

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

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

Rating Questions

Q13/14. Rating of all health care

Q23/41. Rating of personal doctor

Q27/47. Rating of specialist doctor

Q35/54. Rating of health plan

Composite: Access to Specialized Services (Child only)

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

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

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

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

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

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

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

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

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

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

Comparisons, Statistical Testing, Scoring, and Weighting

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

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

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

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

Sample Disposition

Category	Adult		Child	
	Cascade Comprehensive Care	Overall	Cascade Comprehensive Care	Overall
**First mailing - sent	900	16200	900	16200
*First mailing - usable survey returned	142	2801	119	2168
Second mailing - sent	748	13319	761	13616
*Second mailing - usable survey returned	53	978	44	886
*Phone - usable surveys	92	1303	117	2255
Total - usable surveys	287	5082	280	5309
†Ineligible: According to population criteria‡	14	346	9	200
†Ineligible: Deceased	0	31	0	0
†Ineligible: Mentally or physically unable to complete survey	9	195	0	0
†Ineligible: Language barrier	1	64	0	59
Incorrect address AND incorrect phone number	57	848	49	710
Refusal/Returned survey blank	24	672	36	829
Nonresponse - Unavailable by mail or phone	508	8962	526	9093
Adjusted Response Rate	32.8%	32.7%	31.4%	33.3%

*Included in response rate numerator

†Excluded from adjusted response rate denominator

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

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

Response/Non-Response Comparison

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

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

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

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

Adult

Gender / Age	Non-Respondents	Respondents	Difference
Male	220 43.4%	117 40.8%	-2.63%
Female	287 56.6%	170 59.2%	2.63%
18-24	99 19.5%	36 12.5%	-6.98%
25-34	141 27.8%	47 16.4%	-11.43%
35-44	111 21.9%	25 8.7%	-13.18%
45-54	86 17.0%	71 24.7%	7.78%
55-64	56 11.0%	89 31.0%	19.97%
65-74	11 2.2%	13 4.5%	2.36%
75 or Older	3 0.6%	6 2.1%	1.50%

Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	274 52.1%	149 53.2%	1.12%
Female	252 47.9%	131 46.8%	-1.12%
<3	119 22.6%	54 19.3%	-3.34%
4-7	146 27.8%	66 23.6%	-4.19%
8-12	139 26.4%	89 31.8%	5.36%
13 or older	122 23.2%	71 25.4%	2.16%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY	GOOD	FAIR				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			&	&	MALE	MALE			
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	POOR	FE-		
									WHTE	##	#	##	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q1																					
YES	284	5060	29	44	23	67	84	20	201					19	35	229	183	88	110	158	
	100%	100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%
NOT ANSWERED	3	22	1			1		1	1						2	1	1	2	1	2	
VALID CASES	284	5060	29	44	23	67	84	20	201					19	35	229	183	88	110	158	
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	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	BLK OR AFR-AMER ##	AS-IAN #	NATV ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE	
Q3 YES	101 36%	2017 41%	5 18%	15 34%	10 43%	30 44%	26 31%	9 43%	72 36%	~	~	~	~	~	10 53%	9 24%	85 37%	57 31%*	42 47%*	33 30%	63 40%
NO	179 64%	2921 59%	23 82%	29 66%	13 57%	38 56%	58 69%	12 57%	128 64%	~	~	~	~	~	9 47%	28 76%	143 63%	126 69%*	47 53%*	78 70%	95 60%
NOT ANSWERED	7	144	2						2							2	1	1		2	
VALID CASES	280	4938	28	44	23	68	84	21	200					19	37	228	183	89	111	158	
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER							
	OT1	OT2	18	25	35	45	55	65	BLCK	AS-	NATV	AMER				EX &								
	CCC	OHP	TO	TO	TO	TO	TO	AND	OR	AFR-	IAN	ILND	NATV	ALSK	OTHR	MUL-	HIS-	HIS-	NOT	VERY	GOOD	FAIR	FE-	
	TOT	TOT	24	34	44	54	64	OVER	WHTE	##	#	##	##	##	##	TI	IC	IC	&	&	GOOD	POOR	MALE	MALE
Q4																								
NEVER	5	42		1		1	2		3						1		4	2	2		1	3		
	5%	2%		~ 7%		~ 4%	8%		~ 4%						~ 10%		~ 5%	4%	5%		3%	5%		
SOMETIMES	12	268	1	1	1	5	4		7						2	1	11	6	6		2	10		
	13%	15%	20%	7%	10%	19%	17%		~ 10%						~ 20%	11%	14%	12%	14%		7%	16%		
USUALLY	31	466	2	6	5	8	6	4	24						3	2	28	17	13		10	20		
	33%	26%	40%	40%	50%	30%	25%	44%	~ 36%						~ 30%	22%	35%	33%	31%		33%	33%		
ALWAYS	47	1045	2	7	4	13	12	5	33						4	6	38	26	21		17	28		
	49%	57%	40%	47%	40%	48%	50%	56%	~ 49%						~ 40%	67%	47%	51%	50%		57%	46%		
#ALWAYS + USUALLY (NET)	78	1511	4	13	9	21	18	9	57						7	8	66	43	34		27	48		
	82%	83%	80%	87%	90%	78%	75%	100%	~ 85%						~ 70%	89%	81%	84%	81%		90%	79%		
TOP BOX SCORE	47	1045	2	7	4	13	12	5	33						4	6	38	26	21		17	28		
	49%	57%	40%	47%	40%	48%	50%	56%	~ 49%						~ 40%	67%	47%	51%	50%		57%	46%		
NOT ANSWERED	6	196				3	2		5								4	6			3	2		
VALID CASES	95	1821	5	15	10	27	24	9	67						10	9	81	51	42		30	61		
NUMBER OF RESPONDENTS	101	2017	5	15	10	30	26	9	72						10	9	85	57	42		33	63		
	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?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			PAN-	PAN-	&	&	FE-		
									AMER	IAN	LLND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE	
Q5																					
YES	189 67%	3365 68%	16 53%~	31 70%~	13 57%~	52 76%*	56 67%	12 57%~	135 67%	~	~	~	~	~	63%~	26 70%~	154 67%	116 63%*	68 76%*	68 61%	113 71%
NO	93 33%	1561 32%	14 47%~	13 30%~	10 43%~	16 24%*	28 33%	9 43%~	67 33%	~	~	~	~	~	37%~	11 30%~	76 33%	68 37%*	22 24%*	43 39%	47 29%
NOT ANSWERED		5 156																			
VALID CASES	282	4926	30	44	23	68	84	21	202					19	37	230	184	90	111	160	
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	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- AMER	AS- IAN	NATV ILND	AMER HAW/ IND/ PAC ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE
Q6 NEVER	1 0.6%	83 3%*	~	1 3%~	~	~	~	1 ~0.8%~	~	~	~	~	~	~	1 ~0.7%~	1 ~0.9%~	~	~	1 ~1%~	~
SOMETIMES	35 20%	590 19%	3 20%~	8 27%~	3 23%~	9 18%~	9 17%	1 9%~	25 20%	~	~	~	~	2 ~17%~	6 25%~	27 18%~	23 22%	11 16%	8 12%*	25 24%
USUALLY	58 33%	884 29%	8 53%~	11 37%~	4 31%~	17 35%~	12 23%	4 36%~	41 32%	~	~	~	~	4 ~33%~	8 33%~	48 33%~	30 28%	26 38%	24 36%	33 31%
ALWAYS	84 47%	1472 49%	4 27%~	10 33%~	6 46%~	23 47%~	31 60%*	6 55%~	60 47%	~	~	~	~	6 ~50%~	10 42%~	70 48%~	52 49%	31 46%	34 52%	46 44%
#ALWAYS + USUALLY (NET)	142 80%	2356 78%	12 80%~	21 70%~	10 77%~	40 82%~	43 83%	10 91%~	101 80%	~	~	~	~	10 ~83%~	18 75%~	118 81%~	82 77%	57 84%	58 88%*	79 75%
TOP BOX SCORE	84 47%	1472 49%	4 27%~	10 33%~	6 46%~	23 47%~	31 60%*	6 55%~	60 47%	~	~	~	~	6 ~50%~	10 42%~	70 48%~	52 49%	31 46%	34 52%	46 44%
NOT ANSWERED	11	336	1	1		3	4	1	8						2	8	10		2	8
VALID CASES	178	3029	15	30	13	49	52	11	127					12	24	146	106	68	66	105
NUMBER OF RESPONDENTS	189	3365	16	31	13	52	56	12	135					12	26	154	116	68	68	113
	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?

	BANT OT1	BANT OT2	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	WHTE	BLCK OR AFR- AMER ##	AS- IAN #	NATV ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q7 NONE	67 24%	1242 26%	13 46%~	11 25%~	7 32%~	9 14%*	20 24%	5 24%~	46 23%	~	~	~	~	~	3 17%~	11 31%~	51 22%~	51 28%*	14 16%*	32 29%	32 20%
1 TIME	50 18%	927 19%	3 11%~	11 25%~	4 18%~	11 17%	16 19%	3 14%~	38 19%	~	~	~	~	~	1 6%~	7 20%~	41 18%~	34 19%	16 18%	28 26%*	20 13%*
2	53 19%	878 18%	4 14%~	10 23%~	4 18%~	16 24%	14 17%	3 14%~	35 18%	~	~	~	~	~	5 28%~	10 29%~	41 18%~	37 20%	14 16%	17 16%	35 22%
3	38 14%	581 12%	2 7%~	4 9%~	~	13 20%	12 14%	5 24%~	28 14%	~	~	~	~	~	4 22%~	3 9%~	34 15%~	23 13%	15 17%	11 10%	26 17%
4	23 8%	402 8%	2 7%~	1 2%~	2 9%~	5 8%	7 8%	4 19%~	17 9%	~	~	~	~	~	1 6%~	3 9%~	18 8%~	13 7%	8 9%	6 6%	15 10%
5 TO 9	29 11%	571 12%	3 11%~	4 9%~	4 18%~	6 9%	12 14%	~	24 12%	~	~	~	~	~	1 6%~	1 3%~	27 12%~	17 9%	12 14%	11 10%	18 11%
10 OR MORE TIMES	15 5%	248 5%	1 4%~	3 7%~	1 5%~	6 9%	3 4%	1 5%~	12 6%	~	~	~	~	~	3 17%~	~	15 7%~	7 4%	8 9%	4 4%	11 7%
NOT ANSWERED	12	233	2		1	2			2						1	2	3	2	3	2	3
VALID CASES	275	4849	28	44	22	66	84	21	200						18	35	227	182	87	109	157
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202						19	37	230	184	90	111	160
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	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	WHTE	BLCK OR AFR- AMER ##	AS- IAN #	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q8 #YES	143 69%	2535 72%	10 67%	23 72%	10 67%	42 75%	41 64%	12 75%	104 68%	~	~	~	~	~	13 87%	15 63%	124 71%	90 70%	52 71%	59 77%	81 66%
NO	63 31%	984 28%	5 33%	9 28%	5 33%	14 25%	23 36%	4 25%	48 32%	~	~	~	~	~	2 13%	9 38%	50 29%	39 30%	21 29%	18 23%	42 34%
NOT ANSWERED	2	88	1		1				2							2	2				2
VALID CASES	206	3519	15	32	15	56	64	16	152					15	24	174	129	73	77	123	
NUMBER OF RESPONDENTS	208	3607	15	33	15	57	64	16	154					15	24	176	131	73	77	125	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER				
	OT1	OT2												ITY	STATUS							
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &						
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	GOOD	FAIR				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			PAN-	PAN-	&	&				
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE		
Q9																						
YES	107 52%	1857 53%	9 60%~	17 53%~	6 40%~	24 43%	38 59%	9 56%~	81 53%	~	~	~	~	~	67%~	10 42%~	93 54%~	65 51%	40 55%	38 49%	66 54%	
NO	98 48%	1655 47%	6 40%~	15 47%~	9 60%~	32 57%	26 41%	7 44%~	71 47%	~	~	~	~	~	33%~	5 58%~	14 46%~	80 49%	63 45%	33 45%	39 51%	56 46%
NOT ANSWERED	3	95		1		1			2							3	3				3	
VALID CASES	205	3512	15	32	15	56	64	16	152					15	24	173	128	73	77	122		
NUMBER OF RESPONDENTS	208 100%	3607 100%	15 100%	33 100%	15 100%	57 100%	64 100%	16 100%	154 100%					15 100%	24 100%	176 100%	131 100%	73 100%	77 100%	125 100%		

[ASKED IF Q7 >= 1 TIME]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	##	#	##	##	##	TI	IC	IC	GOOD	POOR	
																		MALE	MALE	
Q10																				
#YES	99	1690	9	16	6	22	34	9	74					10	10	86	60	38	35	62
	94%	93%	100%	~94%	~100%	~92%	~92%	~100%	93%	~	~	~	~	~100%	~100%	93%	94%	95%	95%	94%
NO	6	121		1		2	3		6						6	4	2	2	4	
	6%	7%	~	6%	~	8%	8%	~	8%	~	~	~	~	~	~7%	6%	5%	5%	6%	
NOT ANSWERED	2	46					1		1						1	1		1		
VALID CASES	105	1811	9	17	6	24	37	9	80					10	10	92	64	40	37	66
NUMBER OF RESPONDENTS	107	1857	9	17	6	24	38	9	81					10	10	93	65	40	38	66
	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 DID YOU AND A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT NOT WANT TO TAKE A MEDICINE?

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2																		
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	HIS-	VERY	GOOD	FAIR	
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	IC	IC	&	&	MALE	
									WHTE	##	#	##	##	##	TI			GOOD	POOR	MALE
Q11																				
#YES	74	1346	6	11	5	17	27	6	58					7	7	66	45	28	29	44
	70%	74%	67%~	65%~	83%~	71%~	73%~	67%~	73%~	~	~	~	~	~ 70%~	70%~	72%~	70%~	70%~	78%~	67%~
NO	32	462	3	6	1	7	10	3	22					3	3	26	19	12	8	22
	30%	26%	33%~	35%~	17%~	29%~	27%~	33%~	28%~	~	~	~	~	~ 30%~	30%~	28%~	30%~	30%~	22%~	33%~
NOT ANSWERED	1	49						1	1							1	1		1	
VALID CASES	106	1808	9	17	6	24	37	9	80					10	10	92	64	40	37	66
NUMBER OF RESPONDENTS	107	1857	9	17	6	24	38	9	81					10	10	93	65	40	38	66
	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?

	BANT OT1	BANT OT2	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- AMER ##	NATV IAN #	AMER HAW/ IND/ PAC ALSK ##	OTHER ##	MULTI TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FEMALE		
Q12 #YES	80 75%	1378 77%	8 89%~	13 76%~	6 100%~	16 67%~	27 73%~	7 78%~	59 74%~	~	~	~	~	8 80%~	8 80%~	69 75%~	48 75%~	31 78%~	30 81%~	48 73%~
NO	26 25%	420 23%	1 11%~	4 24%~	~	8 33%~	10 27%~	2 22%~	21 26%~	~	~	~	~	2 20%~	2 20%~	23 25%~	16 25%~	9 23%~	7 19%~	18 27%~
NOT ANSWERED	1	59					1	1							1	1		1		
VALID CASES	106	1798	9	17	6	24	37	9	80				10	10	92	64	40	37	66	
NUMBER OF RESPONDENTS	107	1857	9	17	6	24	38	9	81				10	10	93	65	40	38	66	
	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	

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

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

	BANT OT1	BANT OT2	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	WHITE	BLK OR AFR-##	AS- IAN #	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q13 WORST HEALTH CARE POSSIBLE	2 1%	19 0.5%	~	~	~	1 2%	~	~0.7%	1	~	~	~	~	~	1 7%	~	2 1%	~	2 3%	~	2 2%
01	2 1%	22 0.6%	~	1 3%	~	~	~	~0.7%	1	~	~	~	~	~	~	1 ~0.6%	1 0.8%	~	~	~	1 ~0.8%
02	1 0.5%	39 1%	~	~	~	~	1 2%	~0.7%	1	~	~	~	~	~	~	1 ~0.6%	1 ~	~	1 1%	~	1 ~0.8%
03	2 1%	63 2%	~	~	~	1 2%	1 2%	~	2 1%	~	~	~	~	~	~	2 1%	2 2%	~	~	~	2 2%
04	2 1%	95 3%*	~	~	1 7%	1 2%	~	~	2 1%	~	~	~	~	~	~	2 1%	2 2%	~	~	1 1%	1 0.8%
05	23 11%	234 7%*	1 7%	5 16%	3 20%	6 11%	5 8%	2 14%	14 9%	~	~	~	~	~	3 20%	3 13%	19 11%	14 11%	8 11%	5 7%	17 14%
06	14 7%	215 6%	1 7%	5 16%	1 7%	3 5%	3 5%	1 7%	8 5%	~	~	~	~	~	1 7%	4 17%	10 6%	7 5%	7 10%	4 5%	10 8%
07	22 11%	442 13%	1 7%	5 16%	3 20%	5 9%	6 10%	1 7%	18 12%	~	~	~	~	~	1 7%	1 4%	20 12%	16 13%	6 8%	11 15%	10 8%
08	44 22%	779 22%	4 27%	7 22%	2 13%	16 29%	13 21%	2 14%	35 23%	~	~	~	~	~	2 13%	6 25%	37 22%	21 16%*	22 31%*	13 17%	31 25%
09	35 17%	592 17%	5 33%	4 13%	1 7%	7 13%	13 21%	4 29%	26 17%	~	~	~	~	~	4 27%	3 13%	30 18%	28 22%*	6 8%*	17 23%	17 14%
BEST HEALTH CARE POSSIBLE	56 28%	1011 29%	3 20%	5 16%	4 27%	16 29%	21 33%	4 29%	41 28%	~	~	~	~	~	3 20%	7 29%	47 27%	37 29%	19 27%	24 32%	30 25%
#8-10 (NET)	135 67%	2382 68%	12 80%	16 50%	7 47%	39 70%	47 75%	10 71%	102 68%	~	~	~	~	~	9 60%	16 67%	114 67%	86 67%	47 66%	54 72%	78 64%

Continued

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

	BANT OT1	BANT OT2	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- AMER ##	AS- IAN #	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE
9-10 (NET)	91 45%	1603 46%	8 53%~	9 28%~	5 33%~	23 41%	34 54%	8 57%~	67 45%	~	~	~	~	7 47%~	10 42%~	77 45%~	65 51%*	25 35%*	41 55%*	47 39%*
NOT ANSWERED		5 96		1		1	1	2	5							5	3	2	2	3
VALID CASES	203	3511	15	32	15	56	63	14	149					15	24	171	128	71	75	122
NUMBER OF RESPONDENTS	208	3607	15	33	15	57	64	16	154					15	24	176	131	73	77	125
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%
MEAN	7.87	7.94	8.33	7.28	7.40	7.88	8.27	8.21	7.95					7.33	7.96	7.88	8.04	7.69	8.36	7.61
p stat_(*=Sig @ p<=.05)		.604	~	~	~.990	.069	~	.361	~	~	~	~	~	~	~	~	~.157	.379	.005*	.025*

[ASKED IF Q7 >= 1 TIME]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2																			
	CCC	OHP	18	25	35	45	55	65	BLCK	AS-	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AFR-	IAN	ILND	NATV	ALSK	MUL-	HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	##	#	##	##	##	##	TI	IC	IC	&	&	
																	VERY	POOR	MALE	MALE	
																	GOOD	POOR	MALE	MALE	
Q14																					
NEVER	5 2%	90 3%				1 2%	2 3%	1 6%	3 2%						1 7%	4 2%	2 2%	2 3%	1 1%	3 2%	
SOMETIMES	38 19%	539 15%	2 13%	8 25%	4 27%	11 20%	10 16%	1 6%	28 19%						4 27%	4 17%	33 19%	23 18%	14 19%	9 12%*	28 23%*
USUALLY	66 32%	1150 33%	6 40%	15 47%	3 20%	20 37%	15 23%	6 38%	51 34%						3 20%	9 38%	55 32%	40 31%	24 33%	24 32%	41 34%
ALWAYS	95 47%	1722 49%	7 47%	9 28%	8 53%	22 41%	37 58%*	8 50%	68 45%						7 47%	11 46%	80 47%	63 49%	32 44%	42 55%	50 41%
#ALWAYS + USUALLY (NET)	161 79%	2872 82%	13 87%	24 75%	11 73%	42 78%	52 81%	14 88%	119 79%						10 67%	20 83%	135 78%	103 80%	56 78%	66 87%*	91 75%
TOP BOX SCORE	95 47%	1722 49%	7 47%	9 28%	8 53%	22 41%	37 58%*	8 50%	68 45%						7 47%	11 46%	80 47%	63 49%	32 44%	42 55%	50 41%
NOT ANSWERED	4	106		1		3			4							4	3	1	1	3	
VALID CASES	204	3501	15	32	15	54	64	16	150						15	24	172	128	72	76	122
NUMBER OF RESPONDENTS	208	3607	15	33	15	57	64	16	154						15	24	176	131	73	77	125
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	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- AMER ##	AS- IAN #	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE- MALE
Q15 YES	213 77%	3993 82%*	19 63%~	32 74%~	15 65%~	49 73%	70 83%	19 90%~	156 78%	~	~	~	~	13 72%~	25 68%~	176 77%	132 73%*	75 83%	72 65%*	133 84%*		
NO	65 23%	904 18%*	11 37%~	11 26%~	8 35%~	18 27%	14 17%	2 10%~	45 22%	~	~	~	~	5 28%~	12 32%~	52 23%	50 27%*	15 17%	38 35%*	26 16%*		
NOT ANSWERED	9	185		1		1			1					1		2	2		1	1		
VALID CASES	278	4897	30	43	23	67	84	21	201					18	37	228	182	90	110	159		
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%		

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN #	NATV HAW/ ILND PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE-MALE	MALE
Q16 NONE	37 18%	792 21%	6 32%~	7 22%~	3 20%~	2 4%~	14 21%	4 24%~	29 19%	~	~	~	~	~	4 17%~	29 17%~	26 20%	10 14%	11 15%	25 20%
1 TIME	55 27%	995 27%	5 26%~	10 31%~	4 27%~	13 28%~	20 29%	2 12%~	42 28%	~	~	~	~	3 23%~	6 26%~	48 28%~	41 32%*	14 19%	20 28%	34 27%
2	47 23%	792 21%	1 5%~	8 25%~	4 27%~	14 30%~	11 16%	5 29%~	32 21%	~	~	~	~	2 15%~	7 30%~	37 22%~	25 19%	21 29%	19 27%	26 20%
3	26 13%	483 13%	1 5%~	4 13%~	~	9 19%~	9 13%	3 18%~	21 14%	~	~	~	~	3 23%~	2 9%~	24 14%~	16 12%	10 14%	11 15%	15 12%
4	16 8%	279 7%	2 11%~	~	1 7%~	5 11%~	4 6%	2 12%~	11 7%	~	~	~	~	1 8%~	2 9%~	12 7%~	9 7%	5 7%	3 4%	11 9%
5 TO 9	21 10%	312 8%	4 21%~	3 9%~	2 13%~	3 6%~	8 12%	1 6%~	14 9%	~	~	~	~	3 23%~	2 9%~	18 10%~	11 9%	10 14%	6 8%	14 11%
10 OR MORE TIMES	4 2%	88 2%	~	~	1 7%~	1 2%~	2 3%	~	3 2%	~	~	~	~	1 8%~	~	4 2%~	1 0.8%	3 4%	1 1%	3 2%
NOT ANSWERED	7	252				2	2	2	4						2	4	3	2	1	5
VALID CASES	206	3741	19	32	15	47	68	17	152					13	23	172	129	73	71	128
NUMBER OF RESPONDENTS	213	3993	19	32	15	49	70	19	156					13	25	176	132	75	72	133
	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?

	BANT OT1	BANT OT2	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-IAN #	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE	
Q17 NEVER	5 3%	51 2%	~	1 4%	1 8%	~	2 4%	4 3%	~	~	~	~	~	~	4 3%	3 3%	1 2%	1 2%	3 3%		
SOMETIMES	8 5%	190 6%	~	2 8%	2 17%	1 2%	2 4%	5 4%	~	~	~	~	~	2 15%	8 6%	4 4%	4 6%	~	8 8%*		
USUALLY	37 22%	579 20%	38%	5 32%	8 32%	~	8 18%	12 22%	3 25%	26 21%	~	~	~	~	2 15%	6 32%	28 20%	16 16%*	20 32%*	15 25%	20 19%
ALWAYS	118 70%	2109 72%	62%	8 56%	14 56%	9 75%	36 80%	38 70%	9 75%	87 71%	~	~	~	~	9 69%	13 68%	102 72%	80 78%*	37 60%*	43 73%	72 70%
#ALWAYS + USUALLY (NET)	155 92%	2688 92%	100%	13 88%	22 88%	9 75%	44 98%	50 93%	12 100%	113 93%	~	~	~	~	11 85%	19 100%	130 92%	96 93%	57 92%	58 98%*	92 89%*
TOP BOX SCORE	118 70%	2109 72%	62%	8 56%	14 56%	9 75%	36 80%	38 70%	9 75%	87 71%	~	~	~	~	9 69%	13 68%	102 72%	80 78%*	37 60%*	43 73%	72 70%
NOT ANSWERED	1	20						1	1						1		1		1		
VALID CASES	168	2929	13	25	12	45	54	12	122					13	19	142	103	62	59	103	
NUMBER OF RESPONDENTS	169	2949	13	25	12	45	54	13	123					13	19	143	103	63	60	103	
	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?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	CCC	OHP	18	25	35	45	55	65	BLCK	AS-	NATV	AMER		NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	IAN	HAW/	IND/		HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-		PAC	ALSK		PAN-	PAN-	&	&			
									AMER		ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR		
									WHTE	##	#	##	##	##	TI	IC	IC	GOOD	POOR	
																		MALE	MALE	
Q18																				
NEVER	5	63		1	1	2			4						4	3	1		4	
	3%	2%		~ 4%	8%	4%	~		3%	~	~	~	~	~	~ 3%	3%	2%		~ 4%	
SOMETIMES	13	222	1	4	2		4		9					2	1	11	8	5	2	10
	8%	8%	8%	16%	17%	~	8%	~	7%	~	~	~	~	~ 15%	6%	8%	8%	8%	3%	10%
USUALLY	29	572	4	7	1	8	7	2	21					3	3	24	12	17	10	18
	17%	20%	31%	28%	8%	18%	13%	15%	17%	~	~	~	~	~ 23%	17%	17%	12%*	27%*	17%	18%
ALWAYS	120	2066	8	13	8	35	42	11	89					8	14	104	80	39	48	70
	72%	71%	62%	52%	67%	78%	79%	85%	72%	~	~	~	~	~ 62%	78%	73%	78%*	63%	80%	69%
#ALWAYS + USUALLY (NET)	149	2638	12	20	9	43	49	13	110					11	17	128	92	56	58	88
	89%	90%	92%	80%	75%	96%	92%	100%	89%	~	~	~	~	~ 85%	94%	90%	89%	90%	97%*	86%
TOP BOX SCORE	120	2066	8	13	8	35	42	11	89					8	14	104	80	39	48	70
	72%	71%	62%	52%	67%	78%	79%	85%	72%	~	~	~	~	~ 62%	78%	73%	78%*	63%	80%	69%
NOT ANSWERED	2	26					1								1			1		1
VALID CASES	167	2923	13	25	12	45	53	13	123					13	18	143	103	62	60	102
NUMBER OF RESPONDENTS	169	2949	13	25	12	45	54	13	123					13	19	143	103	63	60	103
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER						
	OT1	OT2	18	25	35	45	55	65	BLCK	AS-	NATV	AMER				EX &								
	CCC	OHP	TO	TO	TO	TO	TO	AND	OR	AFR-	IAN	ILND	NATV	ALSK	OTH	MUL-	HIS-	HIS-	NOT	VERY	GOOD	FAIR	FE-	
	TOT	TOT	24	34	44	54	64	OVER	WHT	##	#	##	##	##	##	TI	IC	IC	GOOD	&	POOR	MALE	MALE	
Q19																								
NEVER	7	55		1	2	2	1		6								6		4	2			6	
	4%	2%		~ 4%	17%	~ 4%	2%		5%								~ 4%		4%	3%			~ 6%	
SOMETIMES	12	211	1	4	1	1	3		7						3		11		7	5		1	10	
	7%	7%	8%	16%	8%	2%	6%		6%						23%		8%		7%	8%		2%*	10%	
USUALLY	21	437	3	6	1	4	5	2	15						2		4	16	11	10		10	11	
	13%	15%	23%	24%	8%	9%	9%	15%	12%						15%	21%	11%	11%	11%	16%		17%	11%	
ALWAYS	128	2221	9	14	8	38	45	11	95						8	15	110		81	46		49	76	
	76%	76%	69%	56%	67%	84%	83%	85%	77%						62%	79%	77%		79%	73%		82%	74%	
#ALWAYS + USUALLY (NET)	149	2658	12	20	9	42	50	13	110						10	19	126		92	56		59	87	
	89%	91%	92%	80%	75%	93%	93%	100%	89%						77%	100%	88%		89%	89%		98%*	84%*	
TOP BOX SCORE	128	2221	9	14	8	38	45	11	95						8	15	110		81	46		49	76	
	76%	76%	69%	56%	67%	84%	83%	85%	77%						62%	79%	77%		79%	73%		82%	74%	
NOT ANSWERED	1	25																						
VALID CASES	168	2924	13	25	12	45	54	13	123						13	19	143		103	63		60	103	
NUMBER OF RESPONDENTS	169	2949	13	25	12	45	54	13	123						13	19	143		103	63		60	103	
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%		100%	100%		100%	100%	

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2																			
	CCC	OHP	18	25	35	45	55	65	BLK	AS-	NATV	AMER									
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	IAN	ILND	ALSK									
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	##	#	##	##	##	##	TI	HIS-	HIS-			
																	NOT	VERY			
																	GOOD	FAIR			
																	&	&			
																	GOOD	POOR			
																	MALE	MALE			
Q20																					
NEVER	8	87		2		2	3		7							7	4	3	1	6	
	5%	3%		~ 8%		~ 4%	6%		6%							~ 5%	4%	5%	2%	6%	
SOMETIMES	14	259	2	2	3	2	3	1	11					3		14	7	7	5	9	
	8%	9%	15%	8%	25%	4%	6%	8%	9%					~ 23%		~ 10%	7%	11%	8%	9%	
USUALLY	48	721	4	9	4	11	16	4	34					3		37	39	26	22	21	26
	29%	25%	31%	36%	33%	24%	30%	31%	28%					~ 23%		37%	27%	25%	35%	35%	25%
ALWAYS	98	1860	7	12	5	30	32	8	71					7		12	83	66	31	33	62
	58%	64%	54%	48%	42%	67%	59%	62%	58%					~ 54%		63%	58%	64%	49%	55%	60%
#ALWAYS + USUALLY (NET)	146	2581	11	21	9	41	48	12	105					10		19	122	92	53	54	88
	87%	88%	85%	84%	75%	91%	89%	92%	85%					~ 77%		100%	85%	89%	84%	90%	85%
TOP BOX SCORE	98	1860	7	12	5	30	32	8	71					7		12	83	66	31	33	62
	58%	64%	54%	48%	42%	67%	59%	62%	58%					~ 54%		63%	58%	64%	49%	55%	60%
NOT ANSWERED	1	22																			
VALID CASES	168	2927	13	25	12	45	54	13	123					13		19	143	103	63	60	103
NUMBER OF RESPONDENTS	169	2949	13	25	12	45	54	13	123					13		19	143	103	63	60	103
	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?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			PAN-	GOOD	FAIR			
									AMER		ILLND	NATV	OTHR	MUL-	IC	IC	&	&	FE-	
									WHTE	##	#	##	##	##	TI		GOOD	POOR	MALE	MALE
Q21																				
YES	100	1800	7	14	7	30	34	7	75					10	9	90	60	40	33	66
	60%	62%	54%~	56%~	58%~	67%~	63%	54%~	61%~	~	~	~	~	~ 77%~	47%~	63%~	58%	63%	55%	64%
NO	68	1107	6	11	5	15	20	6	48					3	10	53	43	23	27	37
	40%	38%	46%~	44%~	42%~	33%~	37%	46%~	39%~	~	~	~	~	~ 23%~	53%~	37%~	42%	37%	45%	36%
NOT ANSWERED	1	42																		
VALID CASES	168	2907	13	25	12	45	54	13	123					13	19	143	103	63	60	103
NUMBER OF RESPONDENTS	169	2949	13	25	12	45	54	13	123					13	19	143	103	63	60	103
	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?

	BANT OT1	BANT OT2	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-AMER ##	AS-IAN #	NATV ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE-MALE
Q22 NEVER	8 8%	108 6%	1 14%~	1 ~	2 17%~	3 7%~	9 9%~	5 7%~	~	~	~	~	~	3 30%~	8 ~	9 9%~	5 9%~	3 8%~	8 ~	13%~
SOMETIMES	11 11%	264 15%	3 ~	1 23%~	2 17%~	5 7%~	16 16%~	9 13%~	~	~	~	~	~	~	1 11%~	9 10%~	6 11%~	5 13%~	4 13%~	6 10%~
USUALLY	24 25%	517 30%	4 57%~	5 38%~	1 17%~	9 30%~	4 13%~	1 14%~	15 21%~	~	~	~	~	2 20%~	6 67%~	18 21%~	14 25%~	10 25%~	6 19%~	18 29%~
ALWAYS	53 55%	861 49%	2 29%~	5 38%~	3 50%~	17 57%~	20 63%~	6 86%~	42 59%~	~	~	~	~	5 50%~	2 22%~	51 59%~	31 55%~	22 55%~	22 69%~	31 49%~
#ALWAYS + USUALLY (NET)	77 80%	1378 79%	6 86%~	10 77%~	4 67%~	26 87%~	24 75%~	7 100%~	57 80%~	~	~	~	~	7 70%~	8 89%~	69 80%~	45 80%~	32 80%~	28 88%~	49 78%~
TOP BOX SCORE	53 55%	861 49%	2 29%~	5 38%~	3 50%~	17 57%~	20 63%~	6 86%~	42 59%~	~	~	~	~	5 50%~	2 22%~	51 59%~	31 55%~	22 55%~	22 69%~	31 49%~
NOT ANSWERED	4	50	1	1	2	4	4	4							4	4		1	3	
VALID CASES	96	1750	7	13	6	30	32	7	71					10	9	86	56	40	32	63
NUMBER OF RESPONDENTS	100	1800	7	14	7	30	34	7	75					10	9	90	60	40	33	66
	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?

	BANT OT1	BANT OT2	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/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q23 WORST PERSONAL DOCTOR POSSIBLE	1 0.5%	23 0.6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01	2 1%	32 0.9%	~	3%	~	~	~	0.7%	~	~	~	~	~	8%	~	1%	0.8%	1%	~	2%
02	5 2%	39 1%	~	~	13%	4%	1%	3%*	~	~	~	~	~	~	~	3%	2%	3%	~	4%*
03	4 2%	60 2%	5%	~	~	2%	1%	6%	~	~	~	~	~	8%	~	2%	0.8%	4%	1%	3%
04	3 1%	72 2%	~	6%	~	~	1%	~	~	~	~	~	~	~	~	2%	2%	1%	~	2%~
05	8 4%	188 5%	5%	6%	~	7%	3%	~	~	~	~	~	~	8%	9%	4%	5%	3%	3%	5%
06	7 3%	158 4%	~	6%	13%	2%	3%	~	~	~	~	~	~	15%	~	4%	4%	3%	6%	2%
07	18 9%	327 9%	~	16%	~	9%	13%	~	~	~	~	~	~	~	4%	10%	12%*	4%	7%	10%
08	35 17%	632 17%	37%	22%	20%	9%	16%	12%	~	~	~	~	~	8%	17%	15%	16%	18%	17%	17%
09	47 23%	691 19%	37%	16%	7%	28%	22%	24%	~	~	~	~	~	15%	43%	21%	20%	26%	23%	24%
BEST PERSONAL DOCTOR POSSIBLE	75 37%	1506 40%	16%	25%	47%	39%	38%	59%	~	~	~	~	~	38%	26%	38%	38%	36%	44%	32%
#8-10 (NET)	157 77%	2829 76%	89%	63%	73%	76%	76%	94%	~	~	~	~	~	62%	87%	74%	74%	81%	83%	72%

Continued

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

	BANT OT1	BANT OT2	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- AMER ##	AS- IAN #	NATV HAW/ ILND PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE	
9-10 (NET)	122 60%	2197 59%	10 53%~	13 41%~	8 53%~	31 67%~	41 60%	14 82%~	88 58%	~	~	~	~	~	7 54%~	16 70%~	101 59%~	75 58%	45 63%	47 66%	71 56%
NOT ANSWERED	8	265				3	2	2	5							2	5	3	3	1	6
VALID CASES	205	3728	19	32	15	46	68	17	151					13		23	171	129	72	71	127
NUMBER OF RESPONDENTS	213	3993	19	32	15	49	70	19	156					13		25	176	132	75	72	133
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%		100%	100%	100%	100%	100%	100%
MEAN	8.28	8.34	8.26	7.72	7.93	8.37	8.49	9.12	8.30					7.46		8.65	8.24	8.33	8.28	8.76	8.03
p stat_(*=Sig @ p<=.05)		.662	~	~	~	~.291	~	.824	~	~	~	~	~	~	~	~	~	.632	1.00	.008*	.026*

[ASKED IF Q15 = YES]

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
	CCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR- ##	AS- IAN #	NATV ILND ##	AMER HAW/ IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q24 YES	97 35%	1933 40%	8 27%~	8 18%~	4 17%~	33 49%*	29 35%	10 50%~	67 34%	~	~	~	~	~	10 53%~	10 27%~	80 35%~	53 29%*	42 48%*	37 34%	55 35%
NO	180 65%	2928 60%	22 73%~	36 82%~	19 83%~	35 51%*	54 65%	10 50%~	133 67%	~	~	~	~	~	9 47%~	27 73%~	148 65%~	131 71%*	46 52%*	73 66%	104 65%
NOT ANSWERED	10	221					1	1	2								2	2	1	1	
VALID CASES	277	4861	30	44	23	68	83	20	200						19	37	228	184	88	110	159
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202						19	37	230	184	90	111	160
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN #	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q25 NEVER	4 4%	110 6%	~	~	~	2 6%	2 7%	3 4%	~	~	~	~	~	~	1 10%	3 4%	3 6%	1 2%	1 3%	3 5%
SOMETIMES	21 22%	323 17%	2 25%	4 50%	~	6 18%	5 17%	2 20%	15 22%	~	~	~	~	2 20%	2 23%	18 23%	12 23%	9 21%	7 19%	13 24%
USUALLY	22 23%	543 29%	1 13%	1 13%	1 25%	10 30%	5 17%	4 40%	17 25%	~	~	~	~	1 10%	2 20%	19 24%	8 15%	13 31%	5 14%	17 31%
ALWAYS	49 51%	893 48%	5 63%	3 38%	3 75%	15 45%	17 59%	4 40%	32 48%	~	~	~	~	7 70%	5 50%	40 50%	30 57%	19 45%	24 65%	22 40%
#ALWAYS + USUALLY (NET)	71 74%	1436 77%	6 75%	4 50%	4 100%	25 76%	22 76%	8 80%	49 73%	~	~	~	~	8 80%	7 70%	59 74%	38 72%	32 76%	29 78%	39 71%
TOP BOX SCORE	49 51%	893 48%	5 63%	3 38%	3 75%	15 45%	17 59%	4 40%	32 48%	~	~	~	~	7 70%	5 50%	40 50%	30 57%	19 45%	24 65%	22 40%
NOT ANSWERED	1	64																		
VALID CASES	96	1869	8	8	4	33	29	10	67					10	10	80	53	42	37	55
NUMBER OF RESPONDENTS	97	1933	8	8	4	33	29	10	67					10	10	80	53	42	37	55
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN #	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q26 NONE	4 4%	77 4%	1 13%~	2 25%~	~	1 3%~	~	1 2%~	~	~	~	~	~	1 11%~	1 10%~	3 4%~	2 4%~	2 5%~	1 3%~	3 6%~
1 SPECIALIST	48 52%	991 53%	4 50%~	3 38%~	~	18 58%~	16 55%~	5 56%~	36 55%~	~	~	~	~	~	8 80%~	36 47%~	34 64%~	14 36%~	18 50%~	28 53%~
2	27 29%	498 27%	2 25%~	3 38%~	2 50%~	7 23%~	9 31%~	2 22%~	17 26%~	~	~	~	~	7 78%~	~	25 32%~	12 23%~	15 38%~	10 28%~	15 28%~
3	9 10%	191 10%	~	~	1 25%~	3 10%~	4 14%~	1 11%~	8 12%~	~	~	~	~	~	~	9 12%~	4 8%~	4 10%~	5 14%~	4 8%~
4	4 4%	64 3%	1 13%~	~	1 25%~	1 3%~	~	1 11%~	2 3%~	~	~	~	~	1 11%~	1 10%~	3 4%~	~	4 10%~	1 3%~	3 6%~
5 OR MORE SPECIALISTS	1 1%	45 2%	~	~	~	1 3%~	~	~	1 2%~	~	~	~	~	~	~	1 1%~	1 2%~	~	1 3%~	~
NOT ANSWERED	4	67				2		1	2					1	3		3		1	2
VALID CASES	93	1866	8	8	4	31	29	9	65					9	10	77	53	39	36	53
NUMBER OF RESPONDENTS	97	1933	8	8	4	33	29	10	67					10	10	80	53	42	37	55
	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?

	BANT OT1	BANT OT2	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- AMER ##	AS- IAN #	NATV HAW/ ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q27 WORST SPECIALIST POSSIBLE	1 1%	13 0.7%	~	~	~	~	~	~	~	~	~	~	~	13%	~	1%	~	3%	~	2%
01		14 0.8%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02	1 1%	12 0.7%	~	~	~	1 3%	~	~	1 2%	~	~	~	~	~	~	1%	~	3%	~	2%
03	2 2%	27 2%	1 14%	~	~	~	1 3%	~	2 3%	~	~	~	~	~	~	3%	2 4%	~	~	4%
04		22 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
05	5 6%	83 5%	1 14%	~	~	2 7%	1 3%	~	2 3%	~	~	~	~	~	11%	3 4%	2 4%	3 8%	~	4 8%
06	2 2%	68 4%	~	1 17%	~	~	1 3%	~	2 3%	~	~	~	~	~	~	3%	~	2 6%	~	2 4%
07	6 7%	157 9%	1 14%	~	1 25%	2 7%	1 3%	1 13%	5 8%	~	~	~	~	13%	~	6 8%	6 12%	~	2 6%	4 8%
08	16 18%	318 18%	1 14%	3 50%	1 25%	5 17%	5 17%	1 13%	11 17%	~	~	~	~	25%	2 11%	14 19%	10 20%	5 14%	7 20%	8 16%
09	13 15%	315 18%	1 14%	~	~	6 20%	5 17%	1 13%	10 16%	~	~	~	~	~	33%	9 12%	9 18%	4 11%	8 23%	5 10%
BEST SPECIALIST POSSIBLE	42 48%	742 42%	2 29%	2 33%	2 50%	14 47%	15 52%	5 63%	30 48%	~	~	~	~	50%	4 44%	35 48%	22 43%	20 56%	18 51%	22 45%
#8-10 (NET)	71 81%	1375 78%	4 57%	5 83%	3 75%	25 83%	25 86%	7 88%	51 81%	~	~	~	~	75%	6 89%	58 79%	41 80%	29 81%	33 94%	35 71%

Continued

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

	BANT OT1	BANT OT2	AGE						RACE						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- AMER ##	AS- IAN #	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
9-10 (NET)	55 63%	1057 60%	3 43%~	2 33%~	2 50%~	20 67%~	20 69%~	6 75%~	40 63%~	~	~	~	~	4 50%~	7 78%~	44 60%~	31 61%~	24 67%~	26 74%~	27 55%~
NOT ANSWERED		1 18						1	1							1	1		1	
VALID CASES	88	1771	7	6	4	30	29	8	63					8	9	73	51	36	35	49
NUMBER OF RESPONDENTS	89 100%	1789 100%	7 100%	6 100%	4 100%	30 100%	29 100%	9 100%	64 100%					8 100%	9 100%	74 100%	51 100%	37 100%	35 100%	50 100%
MEAN	8.55	8.43	7.43	8.33	8.75	8.67	8.83	9.25	8.62					7.88	8.89	8.49	8.61	8.47	9.20	8.10
p stat_(*=Sig @ p<=.05)		.585	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER		
	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 ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q28 YES	46 17%	886 18%	8 29%	12 27%	15 ~	9 22%	1 11%	34 17%	~	~	~	~	~	5 ~ 26%	6 17%	39 17%	33 18%	13 15%	19 17%	26 17%
NO	227 83%	3943 82%	20 71%	32 73%	23 100%	53 78%	74 89%	18 95%	164 83%	~	~	~	~	14 ~ 74%	30 83%	187 83%	149 82%	75 85%	90 83%	131 83%
NOT ANSWERED	14	253	2				1 2	4							1 4		2 2		2 3	
VALID CASES	273	4829	28	44	23	68	83	19	198					19	36	226	182	88	109	157
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE					RACE					ETHNICITY	HEALTH STATUS		GENDER			
	CCC TOT ADLTL	OHP TOT ADLTL	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	MALE	FE- MALE
Q29 NEVER	2 4%	78 9%	~	~	~	~	11%~100%	2 6%	~	~	~	~	~	~	2 5%	1 3%	1 8%	2 11%	~
SOMETIMES	20 43%	290 33%	3 38%	6 50%	~	5 33%	5 56%	15 44%	~	~	~	~	2 40%	2 33%	17 44%	13 39%	7 54%	9 47%	10 38%
USUALLY	15 33%	294 34%	3 38%	3 25%	~	7 47%	2 22%	11 32%	~	~	~	~	2 40%	2 33%	13 33%	12 36%	3 23%	4 21%	11 42%
ALWAYS	9 20%	204 24%	2 25%	3 25%	~	3 20%	1 11%	6 18%	~	~	~	~	1 20%	2 33%	7 18%	7 21%	2 15%	4 21%	5 19%
#ALWAYS + USUALLY (NET)	24 52%	498 58%	5 63%	6 50%	~	10 67%	3 33%	17 50%	~	~	~	~	3 60%	4 67%	20 51%	19 58%	5 38%	8 42%	16 62%
TOP BOX SCORE	9 20%	204 24%	2 25%	3 25%	~	3 20%	1 11%	6 18%	~	~	~	~	1 20%	2 33%	7 18%	7 21%	2 15%	4 21%	5 19%
NOT ANSWERED		20																	
VALID CASES	46	866	8	12		15	9	1	34				5	6	39	33	13	19	26
NUMBER OF RESPONDENTS	46	866	8	12		15	9	1	34				5	6	39	33	13	19	26
	100%	100%	100%	100%		100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH		GENDER	
	OT1	OT2																			
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	IC	IC	GOOD	FAIR			
									AMER	#	ILND	NATV	OTHR	TI			&	&			
									WHTE	##	#	##	##	##			GOOD	POOR			
																	MALE	MALE			
Q30																					
YES	58	1269	9	9	1	14	18	5	40					4	10	45	36	22	23	33	
	21%	26%*	31%~	20%~	4%~	21%	22%	26%~	20%	~	~	~	~	~ 21%~	28%~	20%~	20%	26%	21%	21%	
NO	213	3524	20	35	22	52	64	14	157					15	26	180	146	64	85	124	
	79%	74%*	69%~	80%~	96%~	79%	78%	74%~	80%	~	~	~	~	~ 79%~	72%~	80%~	80%	74%	79%	79%	
NOT ANSWERED	16	289	1			2	2	2	5						1	5	2	4	3	3	
VALID CASES	271	4793	29	44	23	66	82	19	197					19	36	225	182	86	108	157	
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			NOT	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									WHTE	##	#	##	##	##	TI	IC	IC	&	&	
																	GOOD	POOR	MALE	
																			MALE	
Q31																				
NEVER		39																		
		3%																		
SOMETIMES	13	212	3	1		4	4		9					1	1	11	8	5	3	9
	23%	17%	33%~	11%~		~ 29%~	22%~		23%~					~ 25%~	10%~	25%~	22%~	24%~	13%~	28%~
USUALLY	16	361	4	4	1	1	5		6					1	7	8	11	5	4	11
	28%	29%	44%~	44%~	100%~	7%~	28%~		15%~					~ 25%~	70%~	18%~	31%~	24%~	17%~	34%~
ALWAYS	28	619	2	4		9	9	4	24					2	2	25	17	11	16	12
	49%	50%	22%~	44%~		~ 64%~	50%~	100%~	62%~					~ 50%~	20%~	57%~	47%~	52%~	70%~	38%~
#ALWAYS + USUALLY (NET)	44	980	6	8	1	10	14	4	30					3	9	33	28	16	20	23
	77%	80%	67%~	89%~	100%~	71%~	78%~	100%~	77%~					~ 75%~	90%~	75%~	78%~	76%~	87%~	72%~
TOP BOX SCORE	28	619	2	4		9	9	4	24					2	2	25	17	11	16	12
	49%	50%	22%~	44%~		~ 64%~	50%~	100%~	62%~					~ 50%~	20%~	57%~	47%~	52%~	70%~	38%~
NOT ANSWERED	1	38							1							1				1
VALID CASES	57	1231	9	9	1	14	18	4	39					4	10	44	36	21	23	32
NUMBER OF RESPONDENTS	58	1269	9	9	1	14	18	5	40					4	10	45	36	22	23	33
	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?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			PAN-	PAN-	&	&		
									WHTE	##	#	##	##	##	TI	IC	IC	GOOD	POOR	
																			MALE	FE-
																			MALE	
Q32																				
NEVER		16																		
		1%																		
SOMETIMES	3	61	1	1			1		3						3	3			1	2
	5%	5%	11%	11%			6%		8%						7%	8%			4%	6%
USUALLY	14	224	4	3	1	1	3	1	8						3	10	10	4	1	12
	24%	18%	44%	33%	100%	7%	17%	20%	20%						30%	22%	28%	18%	4%	36%
ALWAYS	41	929	4	5		13	14	4	29					4	7	32	23	18	21	19
	71%	76%	44%	56%		93%	78%	80%	73%					~100%	70%	71%	64%	82%	91%	58%
#ALWAYS + USUALLY (NET)	55	1153	8	8	1	14	17	5	37					4	10	42	33	22	22	31
	95%	94%	89%	89%	100%	100%	94%	100%	93%					~100%	100%	93%	92%	100%	96%	94%
TOP BOX SCORE	41	929	4	5		13	14	4	29					4	7	32	23	18	21	19
	71%	76%	44%	56%		93%	78%	80%	73%					~100%	70%	71%	64%	82%	91%	58%
NOT ANSWERED		39																		
VALID CASES	58	1230	9	9	1	14	18	5	40					4	10	45	36	22	23	33
NUMBER OF RESPONDENTS	58	1269	9	9	1	14	18	5	40					4	10	45	36	22	23	33
	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?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			PAN-	PAN-	&	&			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE		
									WHTE	##	#	##	##	##	TI				FE-		
Q33																					
YES	102 38%	1787 37%	15 52%	16 36%	9 41%	27 40%	28 35%	5 26%	71 36%	~	~	~	~	9 47%	15 42%	83 37%	73 41%	28 33%	41 39%	59 38%	
NO	167 62%	2987 63%	14 48%	28 64%	13 59%	40 60%	52 65%	14 74%	126 64%	~	~	~	~	10 53%	21 58%	140 63%	107 59%	58 67%	65 61%	98 62%	
NOT ANSWERED	18	308	1		1	1	4	2	5						1	7	4	4	5	3	
VALID CASES	269	4774	29	44	22	67	80	19	197					19	36	223	180	86	106	157	
NUMBER OF RESPONDENTS	287 100%	5082 100%	30 100%	44 100%	23 100%	68 100%	84 100%	21 100%	202 100%					100%	19 100%	37 100%	230 100%	184 100%	90 100%	111 100%	160 100%

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

	BANT OT1	BANT OT2	AGE						RACE						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	WHTE	BLCK OR AFR-AMER ##	AS-IAN #	NATV HAW/ ILND PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
PQ34 NEVER	9 3%	91 2%	1 4%	~	~	2 3%	3 4%	2 11%	4 2%	~	~	~	~	~	1 5%	3 9%	5 2%	7 4%	2 2%	4 4%	4 3%
SOMETIMES	12 5%	301 6%	1 4%	5 11%	~	2 3%	2 3%	2 11%	7 4%	~	~	~	~	~	3 16%	2 6%	10 5%	8 5%	4 5%	6 6%	6 4%
USUALLY	37 14%	677 14%	7 26%	8 18%	3 14%	9 14%	10 13%	~	31 16%	~	~	~	~	~	1 5%	4 12%	33 15%	27 15%	10 12%	13 13%	24 16%
ALWAYS	205 78%	3637 77%	18 67%	31 70%	18 86%	53 80%	63 81%	15 79%	152 78%	~	~	~	~	~	14 74%	25 74%	172 78%	135 76%	67 81%	80 78%	120 78%
#ALWAYS + USUALLY (NET)	242 92%	4314 92%	25 93%	39 89%	21 100%	62 94%	73 94%	15 79%	183 94%	~	~	~	~	~	15 79%	29 85%	205 93%	162 92%	77 93%	93 90%	144 94%
TOP BOX SCORE	205 78%	3637 77%	18 67%	31 70%	18 86%	53 80%	63 81%	15 79%	152 78%	~	~	~	~	~	14 74%	25 74%	172 78%	135 76%	67 81%	80 78%	120 78%
NOT ANSWERED	6	68	2		1	1	2		3							2	3	3	3	3	3
VALID CASES	263	4706	27	44	21	66	78	19	194						19	34	220	177	83	103	154
NUMBER OF RESPONDENTS	269 100%	4774 100%	29 100%	44 100%	22 100%	67 100%	80 100%	19 100%	197 100%						19 100%	36 100%	223 100%	180 100%	86 100%	106 100%	157 100%

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

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

	BANT OT1	BANT OT2	AGE					RACE						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 ##	OTHR ##	MUL-TI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE-MALE			
Q35 WORST HEALTH PLAN POSSIBLE	2 0.7%	33 0.7%	~	~	~	2%	~	~0.5%	~	~	~	~	~	~5%	~0.9%	~	~2%	~	~	2 1%			
01	1 0.4%	31 0.7%	~	~	~	~	1%	~0.5%	~	~	~	~	~	~	~0.4%	~	~	~	~	1 ~0.6%			
02	5 2%	51 1%	~	~	~	2%	4%	~	~	~	~	~	~	~	~	~2%	4 2%	4 1%	1 0.9%	3 2%			
03	5 2%	61 1%	~	2 5%	1 4%	2 3%	~	~	~	~	~	~	~	~	~	~2%	5 2%	3 2%	2 3%	3 1%			
04	9 3%	105 2%	1 3%	1 2%	~	4 6%	3 4%	~	~	~	~	~	~	~	~	~4%	8 2%	4 2%	5 6%	5 5%	3 2%		
05	30 11%	381 8%	3 10%	6 14%	4 17%	7 11%	8 10%	2 13%	22 11%	~	~	~	~	~	~	~	3 16%	2 6%	27 12%	22 10%	8 12%	13 11%	17 11%
06	16 6%	291 6%	2 7%	5 11%	2 9%	2 3%	5 6%	~	~	~	~	~	~	~	~	~	5 4%	2 6%	14 6%	9 5%	7 8%	11 10%*	5 3%*
07	48 18%	602 13%*	5 17%	12 27%	6 26%	14 21%	7 9%*	2 13%	33 17%	~	~	~	~	~	~	~	6 32%	7 21%	39 17%	35 19%	11 13%	17 16%	29 19%
08	40 15%	920 20%*	6 21%	5 11%	5 22%	10 15%	12 15%	2 13%	34 17%*	~	~	~	~	~	~	~	2 11%	3 9%	37 17%	29 16%	10 12%	11 10%	29 19%*
09	40 15%	736 16%	6 21%	5 11%	1 4%	8 12%	16 20%	2 13%	26 13%	~	~	~	~	~	~	~	8 24%	29 13%	26 14%	14 17%	17 16%	22 14%	
BEST HEALTH PLAN POSSIBLE	71 27%	1385 30%	6 21%	8 18%	4 17%	17 26%	26 32%	8 50%	54 28%	~	~	~	~	~	~	~	2 11%	11 33%	57 26%	48 27%	23 27%	28 26%	41 27%
#8-10 (NET)	151 57%	3041 66%*	18 62%	18 41%	10 43%	35 53%	54 67%*	12 75%	114 58%	~	~	~	~	~	~	~	4 21%	22 67%	123 55%	103 57%	47 56%	56 53%	92 60%

Continued

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

	BANT OT1	BANT OT2	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- AMER ##	AS- IAN #	NATV ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
9-10 (NET)	111 42%	2121 46%	12 41%	13 30%	5 22%	25 38%	42 52%*	10 63%	80 41%	~	~	~	~	~	2 11%	19 58%	86 39%	74 41%	37 44%	45 42%	63 41%
NOT ANSWERED		20 486	1			2	3	5	7							4	7	4	6	5	6
VALID CASES	267	4596	29	44	23	66	81	16	195					19	33	223	180	84	106	154	
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	
MEAN	7.62	7.93	7.86	7.25	7.22	7.44	7.88	8.63	7.63					6.47	8.39	7.51	7.71	7.43	7.57	7.68	
p stat_(*=Sig @ p<=.05)		.013*	~	~	~	.449	.219	~	.875	~	~	~	~	~	~	~	~	.355	.343	.753	.582

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER			
	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 PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI TI	HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35A YES	32 12%	599 12%	1 3%~	1 2%~	2 9%~	11 16%	10 12%	6 32%~	23 12%	~	~	~	~	~	2 11%~	2 6%~	28 12%~	12 7%*	19 22%*	17 15%	13 8%*
NO	243 88%	4210 88%	28 97%~	43 98%~	21 91%~	57 84%	74 88%	13 68%~	177 89%	~	~	~	~	17 89%~	34 94%~	200 88%~	171 93%*	69 78%*	93 85%	145 92%*	
NOT ANSWERED	12	273	1					2	2						1	2	1	2	1	2	
VALID CASES	275	4809	29	44	23	68	84	19	200					19	36	228	183	88	110	158	
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN #	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE		
Q35B NEVER	5 16%	90 16%	~	~	~	27%	11%	17%	4 17%	~	~	~	~	~	~	5 18%	2 17%	3 17%	2 12%	3 23%		
SOMETIMES	3 10%	83 15%	~100%	~	~	9%	~	~	1 4%	~	~	~	~	~	1 50%	1 4%	1 8%	2 11%	1 6%	1 8%		
USUALLY	7 23%	129 23%	~	~	~	9%	33%	50%	5 22%	~	~	~	~	1 50%	7 25%	3 25%	4 22%	3 18%	4 31%			
ALWAYS	16 52%	262 46%	100%	~	~	100%	55%	56%	2 33%	13 57%	~	~	~	~	1 50%	15 54%	6 50%	9 50%	11 65%	5 38%		
#ALWAYS + USUALLY (NET)	23 74%	391 69%	100%	~	~	100%	64%	89%	8 83%	18 78%	~	~	~	~	2 100%	22 79%	9 75%	13 72%	14 82%	9 69%		
TOP BOX SCORE	16 52%	262 46%	100%	~	~	100%	55%	56%	2 33%	13 57%	~	~	~	~	1 50%	15 54%	6 50%	9 50%	11 65%	5 38%		
NOT ANSWERED	1	35							1										1			
VALID CASES	31	564	1	1	2	11	9	6	23					2	2	28	12	18	17	13		
NUMBER OF RESPONDENTS	32	599	1	1	2	11	10	6	23					2	2	28	12	19	17	13		
	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?

	BANT OT1	BANT OT2	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 ILND	AMER IND/ PAC ALSK	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE	
Q35C YES	29 11%	759 16%*	1 3%	3 7%	1 4%	13 19%*	8 10%	1 5%	20 10%	~	~	~	~	~	4 21%	1 3%	26 11%	15 8%	14 16%	8 7%	19 12%
NO	244 89%	3989 84%*	29 97%	41 93%	22 96%	54 81%*	75 90%	18 95%	178 90%	~	~	~	~	~	15 79%	36 97%	201 89%	165 92%	75 84%	101 93%	139 88%
NOT ANSWERED	14	334				1	1	2	4							3	4	1	2	2	
VALID CASES	273	4748	30	44	23	67	83	19	198					19	37	227	180	89	109	158	
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER							
	OT1	OT2	18	25	35	45	55	65	BLCK	AS-	NATV	AMER				EX &								
	CCC	OHP	TO	TO	TO	TO	TO	AND	OR	AFR-	IAN	ILND	NATV	ALSK	OTHR	MUL-	HIS-	HIS-	NOT	VERY	GOOD	FAIR	FE-	
	TOT	TOT	24	34	44	54	64	OVER	WHTE	##	#	##	##	##	##	TI	IC	IC	&	&	GOOD	POOR	MALE	MALE
Q35D																								
NEVER	4	121				3	1		4								4			3	1		1	3
	14%	17%	~	~	~	23%	13%	~	20%	~	~	~	~	~	~	~	~	15%	~	20%	7%	~	13%	16%
SOMETIMES	5	129				2	2	1	3						1		5			1	4		1	4
	17%	18%	~	~	~	15%	25%	100%	15%	~	~	~	~	~	25%	~	~	19%	~	7%	29%	~	13%	21%
USUALLY	9	170		1	1	1	5		5						2		8			3	6		3	5
	31%	23%	~	33%	100%	8%	63%	~	25%	~	~	~	~	~	50%	~	~	31%	~	20%	43%	~	38%	26%
ALWAYS	11	308	1	2		7			8						1	1	9			8	3		3	7
	38%	42%	100%	67%	~	54%	~	~	40%	~	~	~	~	~	25%	100%	35%	~	53%	21%	~	38%	37%	
#ALWAYS + USUALLY (NET)	20	478	1	3	1	8	5		13						3	1	17			11	9		6	12
	69%	66%	100%	100%	100%	62%	63%	~	65%	~	~	~	~	~	75%	100%	65%	~	73%	64%	~	75%	63%	
TOP BOX SCORE	11	308	1	2		7			8						1	1	9			8	3		3	7
	38%	42%	100%	67%	~	54%	~	~	40%	~	~	~	~	~	25%	100%	35%	~	53%	21%	~	38%	37%	
NOT ANSWERED		31																						
VALID CASES	29	728	1	3	1	13	8	1	20						4	1	26			15	14		8	19
NUMBER OF RESPONDENTS	29	759	1	3	1	13	8	1	20						4	1	26			15	14		8	19
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%			100%	100%		100%	100%

[ASKED IF Q35C = YES]

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

	BANT	BANT	AGE						RACE						ETHNICITY			HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN #	NATV HAW/ ILND PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE	
Q35E ALWAYS	12 4%	178 4%	1 3%	3 7%	2 9%	2 3%	2 2%	2 11%	8 4%	~	~	~	~	~	2 11%	2 6%	10 4%	5 3%	7 8%	6 6%	6 4%
USUALLY	13 5%	193 4%	2 7%	2 5%	~	5 7%	2 2%	~	5 2%*	~	~	~	~	~	3 17%	4 11%	8 4%	5 3%	8 9%	4 4%	8 5%
SOMETIMES	43 16%	804 17%	7 23%	9 20%	5 22%	7 10%	7 8%*	6 32%	31 15%	~	~	~	~	~	5 28%	3 9%	37 16%	28 15%	13 15%	13 12%	28 18%
NEVER	206 75%	3575 75%	20 67%	30 68%	16 70%	53 79%	72 87%*	11 58%	157 78%	~	~	~	~	~	8 44%	26 74%	173 76%	144 79%*	61 69%	86 79%	116 73%
#NEVER + SOMETIMES (NET)	249 91%	4379 92%	27 90%	39 89%	21 91%	60 90%	79 95%	17 89%	188 94%*	~	~	~	~	~	13 72%	29 83%	210 92%	172 95%*	74 83%*	99 91%	144 91%
TOP BOX SCORE	206 75%	3575 75%	20 67%	30 68%	16 70%	53 79%	72 87%*	11 58%	157 78%	~	~	~	~	~	8 44%	26 74%	173 76%	144 79%*	61 69%	86 79%	116 73%
NOT ANSWERED	13	332				1	1	2	1					1	2	2	2	1	2	2	2
VALID CASES	274	4750	30	44	23	67	83	19	201					18	35	228	182	89	109	158	
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE							RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2																			
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	IC	PAN-	&	&			
									AMER		LLND	NATV		TI	IC	PAN-	GOOD	POOR	MALE	MALE	
Q35F																					
ALWAYS	2 0.7%	66 1%	~	~	~	1%	~	~	0.5%	~	~	~	~	~	5%	~	0.9%	~	2%	~	1%
USUALLY	9 3%	106 2%	2 7%	4 9%	1 4%	1 1%	1 1%	~	3%	~	~	~	~	~	16%	3%	4%	1%*	8%*	2%	4%
SOMETIMES	43 16%	672 14%	4 13%	9 20%	8 35%	8 12%	8 10%*	5 25%*	30 15%	~	~	~	~	~	21%	14%	16%	16%	13%	12%	18%
NEVER	221 80%	3911 82%	24 80%	31 70%	14 61%	57 85%	74 89%*	15 75%*	164 82%	~	~	~	~	~	58%	84%	79%	82%	76%	95%	120%*
#NEVER + SOMETIMES (NET)	264 96%	4583 96%	28 93%	40 91%	22 96%	65 97%	82 99%*	20 100%*	194 97%	~	~	~	~	~	79%	97%	96%	99%*	90%*	108%	149%*
TOP BOX SCORE	221 80%	3911 82%	24 80%	31 70%	14 61%	57 85%	74 89%*	15 75%*	164 82%	~	~	~	~	~	58%	84%	79%	82%	76%	95%	120%*
NOT ANSWERED	12	327				1	1	1	2							2	2	1	1	2	2
VALID CASES	275	4755	30	44	23	67	83	20	200					19	37	228	182	89	110	158	
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	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-AMER ##	AS-IAN #	NATV ILND ##	AMER HAW/IND/ALSK ##	OTHR ##	MULTI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE-MALE
Q35G ALWAYS	1 0.4%	55 1%*	~	~	~	~	1 1%~	~	~	~	~	~	~	~	~	1 ~0.4%~	~	1 1%	~	~	1 ~0.6%	~
USUALLY	7 3%	67 1%	1 3%~	2 5%~	2 9%~	1 1%	~	3 2%	~	~	~	~	~	2 11%~	1 3%~	5 2%~	2 1%	5 6%	2 2%	4 3%	~	~
SOMETIMES	35 13%	487 10%	4 13%~	12 27%~	2 9%~	5 7%	8 10%	3 15%~	25 13%	~	~	~	~	4 21%~	4 11%~	31 14%~	25 14%	10 11%	12 11%	23 14%	~	~
NEVER	232 84%	4149 87%	25 83%~	30 68%~	19 83%~	61 91%*	74 89%	17 85%~	171 86%	~	~	~	~	13 68%~	32 86%~	190 84%~	155 85%	73 82%	95 87%	131 82%	~	~
#NEVER + SOMETIMES (NET)	267 97%	4636 97%	29 97%~	42 95%~	21 91%~	66 99%	82 99%	20 100%~	196 98%	~	~	~	~	17 89%~	36 97%~	221 97%~	180 99%*	83 93%*	107 98%	154 97%	~	~
TOP BOX SCORE	232 84%	4149 87%	25 83%~	30 68%~	19 83%~	61 91%*	74 89%	17 85%~	171 86%	~	~	~	~	13 68%~	32 86%~	190 84%~	155 85%	73 82%	95 87%	131 82%	~	~
NOT ANSWERED	12	324				1	1	1	3							3	2	1	2	1		
VALID CASES	275	4758	30	44	23	67	83	20	199					19	37	227	182	89	109	159		
NUMBER OF RESPONDENTS	287 100%	5082 100%	30 100%	44 100%	23 100%	67 100%	83 100%	20 100%	199 100%					19 100%	37 100%	230 100%	184 100%	90 100%	111 100%	160 100%		

Q35H IN THE LAST 6 MONTHS, DID YOU FEEL YOU COULD TRUST A DOCTOR OR OTHER HEALTH PROVIDER WITH YOUR MEDICAL CARE?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	PAN-	PAN-	&	&	MALE	MALE	
									AMER					TI	IC	IC	GOOD	POOR	MALE	MALE	
Q35H																					
#YES DEFINITELY	173 63%	3305 70%*	18 62%~	21 48%~	16 70%~	46 70%	55 66%	13 65%~	131 66%	~	~	~	~	~	11 58%~	18 50%~	147 65%~	112 62%	58 67%	65 60%	104 66%
YES SOMEWHAT	77 28%	1110 24%	9 31%~	19 43%~	6 26%~	14 21%	22 27%	5 25%~	49 25%*	~	~	~	~	~	7 37%~	17 47%~	59 26%~	57 31%	19 22%	33 30%	43 27%
NO	23 8%	300 6%	2 7%~	4 9%~	1 4%~	6 9%	6 7%	2 10%~	18 9%	~	~	~	~	~	1 5%~	1 3%~	20 9%~	13 7%	10 11%	11 10%	10 6%
NOT ANSWERED	14	367	1			2	1	1	4							1	4	2	3	2	3
VALID CASES	273	4715	29	44	23	66	83	20	198						19	36	226	182	87	109	157
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202						19	37	230	184	90	111	160
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER			
	CCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-##	AS- IAN #	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q35I YES	157 58%	2797 58%	15 54%~	33 75%~	14 61%~	39 60%	42 51%	11 58%~	118 60%	~	~	~	~	~	10 53%~	19 53%~	133 59%~	116 64%*	40 47%*	56 52%	98 63%
NO	112 42%	1986 42%	13 46%~	11 25%~	9 39%~	26 40%	40 49%	8 42%~	78 40%	~	~	~	~	~	9 47%~	17 47%~	91 41%~	64 36%*	45 53%*	52 48%	57 37%
NOT ANSWERED	18	299	2			3	2	2	6							1	6	4	5	3	5
VALID CASES	269	4783	28	44	23	65	82	19	196						19	36	224	180	85	108	155
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202						19	37	230	184	90	111	160
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	VERY	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			PAN-	&	POOR	&	FE-	
									AMER	#	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
Q35J																				
YES	123	1919	12	20	7	34	35	12	90					6	19	99	90	31	44	76
	44%	40%	40%~	45%~	30%~	51%	42%	57%~	45%	~	~	~	~	~ 32%~	51%~	43%~	49%*	34%*	40%	48%
NO	154	2885	18	24	16	33	49	9	111					13	18	130	93	59	67	83
	56%	60%	60%~	55%~	70%~	49%	58%	43%~	55%	~	~	~	~	~ 68%~	49%~	57%~	51%*	66%*	60%	52%
NOT ANSWERED	10	278				1			1						1	1				1
VALID CASES	277	4804	30	44	23	67	84	21	201					19	37	229	183	90	111	159
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	CCC	OHP	18	25	35	45	55	65	BLCK	AS-	NATV	AMER			NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	IAN	ILND	ALSK			HIS-	VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	AFR-					PAN-	&	POOR			FE-	
									##	#	##	##	##	##	IC	IC	GOOD	POOR	MALE	MALE	
Q35K NEVER	2 2%	40 2%	~	~	~	~	6%~	~	1 1%~	~	~	~	~	~	17%~	2 2%~	1 1%~	1 3%~	~	2 3%~	
SOMETIMES	11 9%	150 8%	2 17%~	2 10%~	1 17%~	3 9%~	1 3%~	2 18%~	10 11%~	~	~	~	~	~	6%~	10 10%~	8 9%~	2 7%~	4 9%~	7 10%~	
USUALLY	26 22%	356 19%	2 17%~	3 15%~	~	7 21%~	10 29%~	3 27%~	19 22%~	~	~	~	~	~	17%~	5 28%~	20 21%~	15 17%~	10 33%~	13 30%~	12 16%~
ALWAYS	81 68%	1310 71%	8 67%~	15 75%~	5 83%~	24 71%~	21 62%~	6 55%~	58 66%~	~	~	~	~	~	67%~	12 67%~	65 67%~	64 73%~	17 57%~	27 61%~	52 71%~
#ALWAYS + USUALLY (NET)	107 89%	1666 90%	10 83%~	18 90%~	5 83%~	31 91%~	31 91%~	9 82%~	77 88%~	~	~	~	~	~	83%~	17 94%~	85 88%~	79 90%~	27 90%~	40 91%~	64 88%~
TOP BOX SCORE	81 68%	1310 71%	8 67%~	15 75%~	5 83%~	24 71%~	21 62%~	6 55%~	58 66%~	~	~	~	~	~	67%~	12 67%~	65 67%~	64 73%~	17 57%~	27 61%~	52 71%~
NOT ANSWERED	3	63			1		1	1	2						1	2	2	1		3	
VALID CASES	120	1856	12	20	6	34	34	11	88					6	18	97	88	30	44	73	
NUMBER OF RESPONDENTS	123	1919	12	20	7	34	35	12	90					6	19	99	90	31	44	76	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT OT1	BANT OT2	AGE						RACE						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- AMER ##	AS- IAN #	NATV ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE
Q35L ALWAYS	29 21%	423 22%	3 18%	4 17%	1 8%	11 34%	9 25%	17 19%	~	~	~	~	~	2 17%	7 29%	20 19%	21 26%	8 15%	11 19%	17 23%
USUALLY	25 18%	375 20%	4 24%	4 17%	3 25%	2 6%	8 22%	4 44%	16 18%	~	~	~	~	2 17%	6 25%	19 18%	15 19%	10 19%	12 21%	13 18%
SOMETIMES	28 21%	377 20%	4 24%	6 25%	4 33%	7 22%	3 8%	1 11%	19 22%	~	~	~	~	2 17%	4 17%	21 20%	19 23%	6 12%*	10 18%	15 20%
NEVER	54 40%	744 39%	6 35%	10 42%	4 33%	12 38%	16 44%	4 44%	36 41%	~	~	~	~	6 50%	7 29%	43 42%	26 32%*	28 54%*	24 42%	29 39%
#NEVER + SOMETIMES (NET)	82 60%	1121 58%	10 59%	16 67%	8 67%	19 59%	19 53%	5 56%	55 63%	~	~	~	~	8 67%	11 46%	64 62%	45 56%	34 65%	34 60%	44 59%
TOP BOX SCORE	54 40%	744 39%	6 35%	10 42%	4 33%	12 38%	16 44%	4 44%	36 41%	~	~	~	~	6 50%	7 29%	43 42%	26 32%*	28 54%*	24 42%	29 39%
5	136	2747	13	19	11	33	47	11	110					7	12	123	100	35	53	82
NOT ANSWERED	15	416		1		3	1	1	4						1	4	3	3	1	4
VALID CASES	136	1919	17	24	12	32	36	9	88					12	24	103	81	52	57	74
NUMBER OF RESPONDENTS	287 100%	5082 100%	30 100%	44 100%	23 100%	68 100%	84 100%	21 100%	202 100%					19 100%	37 100%	230 100%	184 100%	90 100%	111 100%	160 100%

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

	BANT OT1	BANT OT2	AGE						RACE						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/ PAC ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q35M NEVER	49 35%	695 36%	8 42%~	10 37%~	5 29%~	10 29%~	13 43%~	1 13%~	36 38%~	~	~	~	~	~	4 31%~	7 29%~	39 35%~	26 30%	23 43%	24 40%	24 31%
SOMETIMES	26 18%	351 18%	1 5%~	5 19%~	2 12%~	8 23%~	5 17%~	3 38%~	17 18%~	~	~	~	~	~	4 31%~	3 13%~	21 19%~	13 15%	11 21%	8 13%	16 21%
USUALLY	27 19%	351 18%	6 32%~	5 19%~	4 24%~	4 11%~	4 13%~	3 38%~	12 13%~	~	~	~	~	~	3 23%~	11 46%~	15 14%~	18 21%	8 15%	12 20%	14 18%
ALWAYS	40 28%	514 27%	4 21%~	7 26%~	6 35%~	13 37%~	8 27%~	1 13%~	29 31%~	~	~	~	~	~	2 15%~	3 13%~	35 32%~	29 34%	11 21%	16 27%	23 30%
#ALWAYS + USUALLY (NET)	67 47%	865 45%	10 53%~	12 44%~	10 59%~	17 49%~	12 40%~	4 50%~	41 44%~	~	~	~	~	~	5 38%~	14 58%~	50 45%~	47 55%*	19 36%*	28 47%	37 48%
TOP BOX SCORE	40 28%	514 27%	4 21%~	7 26%~	6 35%~	13 37%~	8 27%~	1 13%~	29 31%~	~	~	~	~	~	2 15%~	3 13%~	35 32%~	29 34%	11 21%	16 27%	23 30%
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	128	2765	11	17	6	30	51	11	102						6	12	114	95	32	49	78
NOT ANSWERED	17	406				3	3	2	6							1	6	3	5	2	5
VALID CASES	142	1911	19	27	17	35	30	8	94						13	24	110	86	53	60	77
NUMBER OF RESPONDENTS	287 100%	5082 100%	30 100%	44 100%	23 100%	68 100%	84 100%	21 100%	202 100%						19 100%	37 100%	230 100%	184 100%	90 100%	111 100%	160 100%

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

	BANT OT1	BANT OT2	AGE					RACE						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	WHTE	BLCK OR AFR-##	AS- IAN #	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD POOR	MALE	FE- MALE
Q35N EXTREMELY DIFFICULT	15 6%	281 6%	1 4%~	2 ~	3 9%~	8 5%	11%	9 5%	~	~	~	~	~	~	3 17%~	1 3%~	13 6%	2 1%*	13 16%*	4 4%	11 8%
01	6 2%	112 3%	~	2 5%~	~	1 2%	2 3%	1 6%~	5 3%	~	~	~	~	~	1 6%~	~	6 3%*	3 2%	3 4%	1 1%	5 3%
02	10 4%	129 3%	1 4%~	1 2%~	1 4%~	3 5%	3 4%	1 6%~	10 6%~	~	~	~	~	~	~	~	10 5%~	8 5%	2 3%	3 3%	7 5%
03	9 4%	164 4%	1 4%~	5 12%~	1 4%~	1 2%	1 1%	~	6 3%	~	~	~	~	~	2 11%~	1 3%~	8 4%	7 4%	2 3%	3 3%	6 4%
04	9 4%	138 3%	1 4%~	2 5%~	3 13%~	1 2%	~	1 6%~	6 3%	~	~	~	~	~	1 6%~	1 3%~	7 3%	5 3%	4 5%	2 2%	6 4%
05	29 11%	547 12%	3 11%~	7 17%~	1 4%~	7 12%	8 11%	2 13%~	24 13%	~	~	~	~	~	2 11%~	1 3%~	27 13%*	14 9%	15 19%*	12 12%	16 11%
06	12 5%	230 5%	2 7%~	1 2%~	2 9%~	1 2%	5 7%	1 6%~	9 5%	~	~	~	~	~	~	3 9%~	9 4%	7 4%	4 5%	5 5%	7 5%
07	20 8%	375 8%	4 14%~	6 15%~	3 13%~	3 5%	3 4%	1 6%~	14 8%	~	~	~	~	~	2 11%~	4 12%~	16 8%	18 11%*	2 3%*	10 10%	10 7%
09	77 30%	1161 26%	10 36%~	10 24%~	4 17%~	18 31%	18 25%	5 31%~	45 25%*	~	~	~	~	~	2 11%~	16 48%~	48 24%*	48 29%	17 22%*	30 31%	35 24%*
EXTREMELY EASY	68 27%	1320 30%	5 18%~	7 17%~	6 26%~	20 34%	25 34%	4 25%~	50 28%	~	~	~	~	~	5 28%~	6 18%~	60 29%*	51 31%*	17 22%	27 28%	40 28%
#8-10 (NET)	145 57%	2481 56%	15 54%~	17 41%~	10 43%~	38 66%	43 59%	9 56%~	95 53%	~	~	~	~	~	7 39%~	22 67%~	108 53%*	99 61%	34 43%*	57 59%	75 52%
9-10 (NET)	145 57%	2481 56%	15 54%~	17 41%~	10 43%~	38 66%	43 59%	9 56%~	95 53%	~	~	~	~	~	7 39%~	22 67%~	108 53%*	99 61%	34 43%*	57 59%	75 52%

Continued

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

	BANT OT1	BANT OT2	AGE					RACE					ETHNIC- ITY	HEALTH STATUS		GENDER				
	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 ILND ##	AMER HAW/ IND/ PAC ALSK ##	OTH R ##	MUL- TI TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE MALE	
88		6																		
NOT ANSWERED	32	619	2	3		10	11	5	24					1	4	26	21	11	14	17
VALID CASES	255	4457	28	41	23	58	73	16	178					18	33	204	163	79	97	143
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%
MEAN	7.13	7.14	7.29	6.59	6.57	7.55	7.04	7.19	6.99					5.72	7.94	6.92	7.61	5.89	7.46	6.77
p stat_(*=Sig @ p<=.05)	.991		~	~	~.245	.782		~.261	~	~	~	~	~	~	~.008*	.001*	.000*	.185	.030*	

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

	BANT	BANT	AGE							RACE							ETHNICITY			HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN #	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE-MALE			
Q36																							
EXCELLENT	21 8%	447 9%	5 17%	6 14%	1 4%	6 9%	2 2%*	1 5%	14 7%	~	~	~	~	2 11%	4 11%	17 7%	21 11%*	~	12 11%	9 6%			
VERY GOOD	61 22%	1140 24%	8 27%	8 18%	8 35%	15 22%	17 20%	4 20%	45 22%	~	~	~	~	2 11%	8 22%	51 22%	61 33%*	~	24 22%	36 23%			
GOOD	102 37%	1676 35%	10 33%	22 50%	9 39%	20 30%	35 42%	4 20%	76 38%	~	~	~	~	7 37%	15 42%	85 37%	102 55%	~	37 33%	64 41%			
FAIR	66 24%	1110 23%	7 23%	8 18%	3 13%	20 30%	21 25%	6 30%	46 23%	~	~	~	~	5 26%	9 25%	53 23%	~	66 73%	30 27%	34 22%			
POOR	24 9%	395 8%	~	~	2 9%	6 9%	9 11%	5 25%	20 10%	~	~	~	~	3 16%	23 10%	~	24 27%	~	8 7%	15 9%			
#EXCELLENT + VERY GOOD + GOOD (NET)	184 67%	3263 68%	23 77%	36 82%	18 78%	41 61%	54 64%	9 45%	135 67%	~	~	~	~	11 58%	27 75%	153 67%	184 100%	~	73 66%	109 69%			
NOT ANSWERED	13	314				1		1	1						1	1				2			
VALID CASES	274	4768	30	44	23	67	84	20	201					19	36	229	184	90	111	158			
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160			
	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?

	BANT	BANT	AGE							RACE							ETHNICITY			HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN #	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	MALE	FE-MALE		
Q37																							
EXCELLENT	50 18%	870 18%	7 23%	11 25%	4 17%	14 21%	12 14%	2 10%	38 19%	~	~	~	~	~	3 16%	8 22%	42 18%	44 24%*	6 7%*	21 19%	29 18%		
VERY GOOD	67 24%	1189 25%	8 27%	9 20%	5 22%	13 19%	22 26%	7 35%	49 24%	~	~	~	~	~	4 21%	7 19%	54 24%	54 29%*	13 15%*	22 20%	42 26%		
GOOD	96 35%	1480 31%	11 37%	15 34%	9 39%	24 35%	29 35%	6 30%	68 34%	~	~	~	~	~	7 37%	15 41%	80 35%	62 34%	33 37%	46 41%	50 31%		
FAIR	50 18%	937 20%	4 13%	8 18%	5 22%	14 21%	14 17%	5 25%	37 18%	~	~	~	~	~	4 21%	7 19%	42 18%	21 11%*	29 33%*	17 15%	32 20%		
POOR	11 4%	296 6%	~	1 2%	~	3 4%	7 8%	~	9 4%	~	~	~	~	~	1 5%	11 ~	11 5%	3 2%*	8 9%*	5 5%	6 4%		
#EXCELLENT + VERY GOOD + GOOD (NET)	213 78%	3539 74%	26 87%	35 80%	18 78%	51 75%	63 75%	15 75%	155 77%	~	~	~	~	~	14 74%	30 81%	176 77%	160 87%*	52 58%*	89 80%	121 76%		
NOT ANSWERED	13	310					1	1								1		1		1			
VALID CASES	274	4772	30	44	23	68	84	20	201						19	37	229	184	89	111	159		
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202						19	37	230	184	90	111	160		
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%		

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			HIS-	GOOD	FAIR			
									AMER		ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	##	#	##	##	##	TI	GOOD	POOR	MALE	MALE	
Q38																				
#YES	101	1705	8	11	3	27	37	12	73					8	13	85	63	36	31	67
	38%	36%	29%~	26%~	14%~	40%	45%	60%~	37%	~	~	~	~	~ 44%	37%~	38%~	35%	42%	28%*	44%*
NO	165	2994	20	31	19	40	46	8	124					10	22	139	116	49	78	87
	62%	64%	71%~	74%~	86%~	60%	55%	40%~	63%	~	~	~	~	~ 56%	63%~	62%~	65%	58%	72%*	56%*
DON'T KNOW	4	99	2	1			1		3						1	3	3	1		4
NOT ANSWERED	17	284		1	1	1		1	2					1	1	3	2	4	2	2
VALID CASES	266	4699	28	42	22	67	83	20	197					18	35	224	179	85	109	154
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160
	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?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				HIS-	VERY	GOOD	FAIR		
	ADLT	ADLT	TO	TO	TO	TO	TO	OVER	AFR-	IAN	PAC	ALSK			PAN-	&	POOR	&	MALE	MALE
			24	34	44	54	64		WHTE	##	#	##	##	##	IC	IC	GOOD	POOR	MALE	MALE
Q39																				
EVERY DAY	62	949	3	11	7	19	19	3	50					6	3	58	37	25	29	32
	23%	20%	10%~	25%~	30%~	28%	23%	14%~	25%	~	~	~	~	~ 32%~	8%~	25%~	20%	28%	26%	20%
SOME DAYS	27	436	1	8	2	3	11	1	14					5	5	22	17	10	11	16
	10%	9%	3%~	18%~	9%~	4%*	13%	5%~	7%*	~	~	~	~	~ 26%~	14%~	10%~	9%	11%	10%	10%
NOT AT ALL	183	3380	25	25	14	46	53	17	138					8	28	149	128	53	71	110
	67%	71%	86%~	57%~	61%~	68%	64%	81%~	68%	~	~	~	~	~ 42%~	78%~	65%~	70%	60%	64%	70%
DON'T KNOW	1	34	1												1			1		1
NOT ANSWERED	14	283					1									1	2	1		1
VALID CASES	272	4765	29	44	23	68	83	21	202					19	36	229	182	88	111	158
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	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-AMER ##	AS-IAN #	NATV ILND ##	AMER HAW/IND/PAC ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	MALE	FE-MALE	
Q40 NEVER	20 22%	367 27%	3 ~ 16%	1 ~ 11%	10 ~ 45%	5 ~ 17%	1 ~ 25%	16 25%	~	~	~	~	~	1 9%	2 25%	18 23%	15 28%	5 14%	10 25%	10 21%
SOMETIMES	23 26%	331 24%	4 100%	6 ~ 32%	2 ~ 22%	2 9%	9 ~ 30%	17 ~ 27%	~	~	~	~	~	4 ~ 36%	1 13%	22 28%	13 24%	10 29%	8 20%	15 31%
USUALLY	16 18%	212 16%	4 ~ 21%	1 ~ 11%	4 ~ 18%	6 ~ 20%	~	9 ~ 14%	~	~	~	~	~	2 ~ 18%	2 25%	13 16%	11 20%	5 14%	8 20%	7 15%
ALWAYS	30 34%	455 33%	6 ~ 32%	5 ~ 56%	6 ~ 27%	10 ~ 33%	3 ~ 75%	22 ~ 34%	~	~	~	~	~	4 ~ 36%	3 38%	27 34%	15 28%	15 43%	14 35%	16 33%
#ALWAYS + USUALLY (NET)	46 52%	667 49%	10 ~ 53%	6 ~ 67%	10 ~ 45%	16 ~ 53%	3 ~ 75%	31 ~ 48%	~	~	~	~	~	6 ~ 55%	5 63%	40 50%	26 48%	20 57%	22 55%	23 48%
TOP BOX SCORE	30 34%	455 33%	6 ~ 32%	5 ~ 56%	6 ~ 27%	10 ~ 33%	3 ~ 75%	22 ~ 34%	~	~	~	~	~	4 ~ 36%	3 38%	27 34%	15 28%	15 43%	14 35%	16 33%
NOT ANSWERED		20																		
VALID CASES	89	1365	4	19	9	22	30	4	64					11	8	80	54	35	40	48
NUMBER OF RESPONDENTS	89	1385	4	19	9	22	30	4	64					11	8	80	54	35	40	48
	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.

	BANT	BANT	AGE						RACE						ETHNICITY			HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER	AS-IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD	FAIR & POOR	MALE	FE-MALE	
Q41 NEVER	41 46%	687 50%	1 25%	8 42%	5 56%	11 50%	14 47%	2 50%	30 47%	~	~	~	~	~	5 45%	5 63%	36 45%	28 52%	13 37%	23 58%	18 38%
SOMETIMES	19 21%	305 22%	2 50%	4 21%	1 11%	6 27%	5 17%	11 17%	~	~	~	~	~	4 36%	2 25%	17 21%	9 17%	10 29%	6 15%	13 27%	
USUALLY	14 16%	152 11%	~	5 26%	2 22%	1 5%	5 17%	1 25%	8 13%	~	~	~	~	2 18%	1 13%	12 15%	9 17%	5 14%	5 13%	8 17%	
ALWAYS	15 17%	223 16%	1 25%	2 11%	1 11%	4 18%	6 20%	1 25%	15 23%	~	~	~	~	~	~	15 19%	8 15%	7 20%	6 15%	9 19%	
#ALWAYS + USUALLY (NET)	29 33%	375 27%	1 25%	7 37%	3 33%	5 23%	11 37%	2 50%	23 36%	~	~	~	~	2 18%	1 13%	27 34%	17 31%	12 34%	11 28%	17 35%	
TOP BOX SCORE	15 17%	223 16%	1 25%	2 11%	1 11%	4 18%	6 20%	1 25%	15 23%	~	~	~	~	~	~	15 19%	8 15%	7 20%	6 15%	9 19%	
NOT ANSWERED		18																			
VALID CASES	89	1367	4	19	9	22	30	4	64					11	8	80	54	35	40	48	
NUMBER OF RESPONDENTS	89	1385	4	19	9	22	30	4	64					11	8	80	54	35	40	48	
	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.

	BANT	BANT	AGE						RACE						ETHNIC-ITY		HEALTH STATUS		GENDER		
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AMER WHT#	AS- IAN #	NATV HAW/ ILND ##	AMER IND/ ALSK NATV ##	MUL- OTHR ##	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	MALE	FE- MALE	
Q42 NEVER	41 46%	778 57%*	1 25%~	7 37%~	5 56%~	11 50%~	15 50%~	2 50%~	30 47%~	~	~	~	~	~	5 45%~	4 50%~	37 46%~	26 48%~	15 43%~	23 58%~	18 38%~
SOMETIMES	16 18%	261 19%	3 75%~	5 26%~	~	4 18%~	3 10%~	1 25%~	10 16%~	~	~	~	~	~	3 27%~	1 13%~	14 18%~	8 15%~	8 23%~	4 10%~	11 23%~
USUALLY	17 19%	141 10%*	~	4 21%~	4 44%~	2 9%~	6 20%~	~	10 16%~	~	~	~	~	~	3 27%~	2 25%~	15 19%~	13 24%~	4 11%~	9 23%~	8 17%~
ALWAYS	15 17%	175 13%	~	3 16%~	~	5 23%~	6 20%~	1 25%~	14 22%~	~	~	~	~	~	~	1 13%~	14 18%~	7 13%~	8 23%~	4 10%~	11 23%~
#ALWAYS + USUALLY (NET)	32 36%	316 23%*	~	7 37%~	4 44%~	7 32%~	12 40%~	1 25%~	24 38%~	~	~	~	~	~	3 27%~	3 38%~	29 36%~	20 37%~	12 34%~	13 33%~	19 40%~
TOP BOX SCORE	15 17%	175 13%	~	3 16%~	~	5 23%~	6 20%~	1 25%~	14 22%~	~	~	~	~	~	~	1 13%~	14 18%~	7 13%~	8 23%~	4 10%~	11 23%~
NOT ANSWERED		30																			
VALID CASES	89	1355	4	19	9	22	30	4	64					11	8	80	54	35	40	48	
NUMBER OF RESPONDENTS	89	1385	4	19	9	22	30	4	64					11	8	80	54	35	40	48	
	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?

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-AMER ##	AS-IAN #	NATV HAW/ ILND PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE
Q43																				
YES	61 22%	997 21%	2 ~	2 5%~	19 9%~	30 28%	8 36%*	52 26%*	~	~	~	~	~	3 16%~	3 8%~	57 25%~	39 21%	21 24%	33 30%*	28 18%*
NO	211 78%	3756 79%	30 100%~	41 95%~	21 91%~	48 72%	54 64%*	13 62%~	149 74%*	~	~	~	~	16 84%~	33 92%~	172 75%~	143 79%	68 76%	77 70%*	131 82%*
DON'T KNOW	1	42	1					1							1	1			1	
NOT ANSWERED	14	287				1									1	1	1			1
VALID CASES	272	4753	30	43	23	67	84	21	201					19	36	229	182	89	110	159
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-AMER ##	AS-IAN #	NATV HAW/ ILND PAC ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q44																				
YES	239%	44810%	3~	27%	89%	513%	420%	168%	~	~	~	~	~	528%	13%	2210%	74%*	1620%*	55%*	1812%*
NO	23891%	395690%	30100%	4093%	2091%	5587%	7494%	1680%	~	~	~	~	~	1372%	3497%	19790%	17196%*	6680%*	10495%*	13188%*
DON'T KNOW	10	377	1	1	3	5		9						1	10	4	6		2	8
NOT ANSWERED	16	301				2	1	1							2	1	2	2		3
VALID CASES	261	4404	30	43	22	63	79	20						18	35	219	178	82	109	149
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21						19	37	230	184	90	111	160
	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			&	&				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									##	#	##	##	##	TI	IC	IC	GOOD	POOR		
									WHTE								MALE	MALE		
Q45																				
YES	91 33%	1716 36%	3 10%~	2 5%~	10 43%~	26 38%	37 45%*	12 57%~	72 36%	~	~	~	~	5 ~ 26%~	8 22%~	82 36%~	52 28%*	37 42%*	37 34%	54 34%
NO	182 67%	3045 64%	27 90%~	42 95%~	13 57%~	42 62%	46 55%*	9 43%~	129 64%	~	~	~	~	14 ~ 74%~	29 78%~	147 64%~	131 72%*	51 58%*	73 66%	106 66%
NOT ANSWERED	14	321					1		1						1	1	2		1	
VALID CASES	273	4761	30	44	23	68	83	21	201					19	37	229	183	88	110	160
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER				
	OT1	OT2												ITY	STATUS						
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER										
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	EX &						
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&			
									WHTE	##	#	##	##	##	TI	IC	IC	GOOD	POOR		
																		MALE	FE-		
																		MALE	MALE		
Q46.1																					
YES	65	1102			5	25	24	9	51					5	6	57	30	34	26	38	
	23%	22%		~	~	22%*	37%*	29%	25%	~	~	~	~	~	26%*	16%*	25%*	16%*	38%*	23%	24%
NO	222	3980	30	44	18	43	60	12	151					14	31	173	154	56	85	122	
	77%	78%	100%*	100%*	78%*	63%*	71%	57%*	75%	~	~	~	~	~	74%*	84%*	75%*	84%*	62%*	77%	76%
VALID CASES	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160	
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				HIS-	VERY				
	ADLT	ADLT	TO	TO	TO	TO	TO	OVER	AFR-	IAN	PAC	ALSK			PAN-	GOOD	FAIR			
			24	34	44	54	64		AMER		ILND	NATV	OTHR	MUL-	IC	IC	&	&	FE-	
									WHTE	##	#	##	##	##	TI		GOOD	POOR	MALE	MALE
Q46.2																				
YES	86	1444	1	6	6	28	32	11	69					6	4	78	41	44	37	48
	30%	28%	3%~	14%~	26%~	41%*	38%	52%~	34%*	~	~	~	~	~ 32%~	11%~	34%*	22%*	49%*	33%	30%
NO	201	3638	29	38	17	40	52	10	133					13	33	152	143	46	74	112
	70%	72%	97%~	86%~	74%~	59%*	62%	48%~	66%*	~	~	~	~	~ 68%~	89%~	66%*	78%*	51%*	67%	70%
VALID CASES	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	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 ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q46.3 YES	53 18%	826 16%	6 20%~	4 9%~	7 30%~	13 19%	15 18%	7 33%~	44 22%*	~	~	~	~	3 ~ 16%~	3 8%~	50 22%*	31 17%	22 24%	24 22%	29 18%
NO	234 82%	4256 84%	24 80%~	40 91%~	16 70%~	55 81%	69 82%	14 67%~	158 78%*	~	~	~	~	16 ~ 84%~	34 92%~	180 78%*	153 83%	68 76%	87 78%	131 82%
VALID CASES	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNICITY			HEALTH STATUS		GENDER						
	OT1	OT2																								
	CCC	OHP	18	25	35	45	55	65	BLK	AS-	NATV	AMER														
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	IAN	HAW/	IND/														
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-		PAC	ALSK														
									WHTE	##	#	##	##	##	##	TI	HIS-	HIS-	NOT	EX &	VERY	GOOD	FAIR		FE-	
																	IC	IC	GOOD	&	POOR	&	MALE	MALE		
Q47.1																										
YES	16	211			1	9	3	3	12						2	2	13		5	11				11	5	
	6%	4%	~	~	4%~	13%*	4%	14%~	6%	~	~	~	~	~	11%~	5%~	6%		3%*	12%*				10%*	3%	
NO	271	4871	30	44	22	59	81	18	190						17	35	217		179	79				100	155	
	94%	96%	100%~	100%~	96%~	87%*	96%	86%~	94%	~	~	~	~	~	89%~	95%~	94%		97%*	88%*				90%*	97%	
VALID CASES	287	5082	30	44	23	68	84	21	202						19	37	230		184	90				111	160	
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202						19	37	230		184	90				111	160	
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%		100%	100%				100%	100%	

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH		GENDER	
	OT1	OT2													ITY	STATUS					
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT	TO	TO	TO	TO	TO	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	PAN-	PAN-	&	&			
			24	34	44	54	64	OVER	WHTE	##	#	##	##	##	TI	IC	IC	GOOD	POOR		
																			MALE	MALE	
Q47.2																					
YES	21	212	1		1	7	6	6	16					2	3	17	5	15	10	11	
	7%	4%*	3%~	~	4%~	10%	7%	29%~	8%	~	~	~	~	~ 11%~	8%~	7%	3%*	17%*	9%	7%	
NO	266	4870	29	44	22	61	78	15	186					17	34	213	179	75	101	149	
	93%	96%*	97%~	100%~	96%~	90%	93%	71%~	92%	~	~	~	~	~ 89%~	92%~	93%	97%*	83%*	91%	93%	
VALID CASES	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160	
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160	
	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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									WHTE	##	#	##	##	##	TI	IC	IC	&		
																		&		
																		POOR		
																		MALE		
																		MALE		
Q47.3																				
YES	11	195				3	3	4	8					2	1	10	1	10	4	7
	4%	4%	~	~	~	4%	4%	19%~	4%	~	~	~	~	~ 11%~	3%~	4%	0.5%*	11%*	4%	4%
NO	276	4887	30	44	23	65	81	17	194					17	36	220	183	80	107	153
	96%	96%	100%~	100%~	100%~	96%	96%	81%~	96%	~	~	~	~	~ 89%~	97%~	96%	99%*	89%*	96%	96%
VALID CASES	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160
	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

	BANT OT1	BANT OT2	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	WHTE	BLCK OR AFR- AMER ##	AS- IAN #	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q47.4 YES	49 17%	916 18%	1 3%	3 7%	5 22%	17 25%	15 18%	7 33%	42 21%*	~	~	~	~	~	3 16%	4 11%	44 19%*	23 13%*	25 28%*	16 14%	33 21%
NO	238 83%	4166 82%	29 97%	41 93%	18 78%	51 75%	69 82%	14 67%	160 79%*	~	~	~	~	~	16 84%	33 89%	186 81%*	161 88%*	65 72%*	95 86%	127 79%
VALID CASES	287	5082	30	44	23	68	84	21	202						19	37	230	184	90	111	160
NUMBER OF RESPONDENTS	287 100%	5082 100%	30 100%	44 100%	23 100%	68 100%	84 100%	21 100%	202 100%						19 100%	37 100%	230 100%	184 100%	90 100%	111 100%	160 100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	&			
									WHTE	##	#	##	##	##	IC	IC	GOOD			
																	POOR			
																	MALE			
																	MALE			
Q48																				
YES	75	1408	9	8	6	22	21	7	55					9	7	67	36	38	28	46
	28%	30%	30%~	19%~	26%~	33%	26%	35%~	28%	~	~	~	~	~ 47%	19%~	30%~	20%*	44%*	26%	29%
NO	194	3330	21	35	17	45	61	13	143					10	30	159	145	48	80	113
	72%	70%	70%~	81%~	74%~	67%	74%	65%~	72%	~	~	~	~	~ 53%	81%~	70%~	80%*	56%*	74%	71%
NOT ANSWERED	18	344		1		1	2	1	4						4	3	4		3	1
VALID CASES	269	4738	30	43	23	67	82	20	198					19	37	226	181	86	108	159
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160
	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.

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			PAN-	PAN-	&	&		
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
Q49																				
YES	65	1187	8	7	5	20	19	5	50					9	4	61	31	33	24	41
	89%	88%	89%	100%	83%	91%	90%	71%	93%	~	~	~	~	~100%	57%	92%	89%	89%	86%	91%
NO	8	167	1		1	2	2	2	4						3	5	4	4	4	4
	11%	12%	11%	~	17%	9%	10%	29%	7%	~	~	~	~	~	43%	8%	11%	11%	14%	9%
NOT ANSWERED	2	54		1					1						1	1	1			1
VALID CASES	73	1354	9	7	6	22	21	7	54					9	7	66	35	37	28	45
NUMBER OF RESPONDENTS	75	1408	9	8	6	22	21	7	55					9	7	67	36	38	28	46
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q48 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				HIS-	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			PAN-	GOOD	FAIR				
									AMER		ILND	NATV	OTHR	MUL-	IC	IC	&	&			
									WHTE	##	#	##	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q50																					
YES	166 62%	2988 63%	7 23%~	19 46%~	12 52%~	45 69%	63 75%*	17 81%~	128 65%	~	~	~	~	14 ~ 74%~	15 42%~	147 65%~	96 53%*	68 80%*	62 57%	103 66%	
NO	101 38%	1758 37%	23 77%~	22 54%~	11 48%~	20 31%	21 25%*	4 19%~	69 35%	~	~	~	~	5 ~ 26%~	21 58%~	78 35%~	84 47%*	17 20%*	46 43%	54 34%	
NOT ANSWERED	20	336		3		3			5						1	5	4	5	3	3	
VALID CASES	267	4746	30	41	23	65	84	21	197					19	36	225	180	85	108	157	
NUMBER OF RESPONDENTS	287 100%	5082 100%	30 100%	44 100%	23 100%	68 100%	84 100%	21 100%	202 100%					19 100%	37 100%	230 100%	184 100%	90 100%	111 100%	160 100%	

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

	BANT OT1	BANT OT2	AGE							RACE							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/ PAC ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE-MALE	MALE	
Q51 YES	158 97%	2723 95%	7 100%~	18 95%~	12 100%~	43 96%~	60 98%	15 94%~	122 98%~	~	~	~	~	~	14 ~100%~	13 87%~	141 98%~	90 96%	67 100%	60 100%~	97 95%*
NO	5 3%	155 5%	~	1 5%~	~	2 4%~	1 2%	1 6%~	3 2%~	~	~	~	~	~	~	2 13%~	3 2%~	4 4%	~	~	5 5%~
NOT ANSWERED	3	110					2	1	3							3	2	1	2	1	
VALID CASES	163	2878	7	19	12	45	61	16	125					14	15	144	94	67	60	102	
NUMBER OF RESPONDENTS	166 100%	2988 100%	7 100%	19 100%	12 100%	45 100%	63 100%	17 100%	128 100%					14 100%	15 100%	147 100%	96 100%	68 100%	62 100%	103 100%	

[ASKED IF Q50 = YES]

NQ52 WHAT IS YOUR AGE?

	BANT	BANT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLK OR AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/ALSK	OTHR	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR		FE-MALE			
NQ52	CCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	##	#	##	##	##	TI	IC	IC	GOOD	FAIR	POOR	MALE	MALE
18 TO 24	35 12%	485 10%	30 100%	~	~	~	~	~	20 10%	~	~	~	~	2 11%	8 22%	22 10%*	23 13%	7 8%		12 11%	18 11%	
25 TO 34	45 16%	853 17%	~	44 ~100%	~	~	~	~	31 15%	~	~	~	~	5 26%	7 19%	37 16%	36 20%*	8 9%*		16 14%	28 18%	
35 TO 44	25 9%	805 16%*	~	~	23 ~100%	~	~	~	16 8%	~	~	~	~	3 16%	3 8%	21 9%	18 10%	6 7%		12 11%	12 8%	
45 TO 54	72 25%	1048 21%	~	~	~	68 ~100%	~	~	51 25%	~	~	~	~	4 21%	12 32%	55 24%	43 23%	27 30%		27 24%	41 26%	
55 TO 64	88 31%	1437 28%	~	~	~	~	84 ~100%	~	67 33%	~	~	~	~	4 21%	4 11%	77 33%*	55 30%	31 34%		36 32%	48 30%	
65 TO 74	16 6%	302 6%	~	~	~	~	15 ~71%	~	12 6%	~	~	~	~	~	3 8%	12 5%	8 4%	7 8%		6 5%	9 6%	
75 OR OLDER	6 2%	152 3%	~	~	~	~	6 ~29%	~	5 2%	~	~	~	~	1 5%	~	6 3%	1 0.5%*	4 4%		2 2%	4 3%	
VALID CASES	287	5082	30	44	23	68	84	21	202					19	37	230	184	90		111	160	
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90		111	160	
	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?

	BANT	BANT	AGE						RACE						ETHNIC-ITY		HEALTH STATUS		GENDER	
	OT1	OT2																		
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	HIS-	VERY	GOOD	FAIR	
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			PAN-	PAN-	&	&	FE-	
									AMER		ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
NQ53																				
MALE	118	2039	12	16	12	27	36	8	81					10	17	92	75	40	111	
	41%	40%	40%~	36%~	52%~	40%	43%	38%~	40%	~	~	~	~	~ 53%	46%~	40%	41%	44%	100%~	~
FEMALE	169	3043	18	28	11	41	48	13	121					9	20	138	109	50	160	
	59%	60%	60%~	64%~	48%~	60%	57%	62%~	60%	~	~	~	~	~ 47%	54%~	60%	59%	56%	~100%~	
VALID CASES	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN #	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE	
Q54																					
8TH GRADE OR LESS	10 4%	267 6%	2 ~	1 5%~	2 4%~	2 3%	3 2%	3 14%~	2 1%*	~	~	~	~	~	1 5%~	7 21%~	3 1%~	5 3%	4 5%	4 4%	6 4%
SOME HIGH SCHOOL BUT DID NOT GRADUATE	27 10%	599 13%	2 7%~	3 7%~	3 13%~	6 9%	11 14%	2 10%~	21 10%	~	~	~	~	~	2 11%~	3 9%~	23 10%~	12 7%*	15 18%*	15 14%	12 8%
HIGH SCHOOL GRADUATE OR GED	106 40%	1663 35%	18 62%~	12 27%~	8 35%~	29 45%	30 37%	7 33%~	81 40%	~	~	~	~	~	5 26%~	16 48%~	89 39%~	74 41%	32 38%	47 43%	59 38%
SOME COLLEGE OR 2-YEAR DEGREE	103 39%	1668 35%	8 28%~	21 48%~	11 48%~	20 31%	34 42%	9 43%~	81 40%	~	~	~	~	~	10 53%~	6 18%~	96 42%~	73 41%	29 35%	37 34%	66 42%
4-YEAR COLLEGE GRADUATE	13 5%	348 7%	1 3%~	4 9%~	~	6 9%	2 2%	~	10 5%	~	~	~	~	~	1 5%~	1 3%~	12 5%~	11 6%	2 2%	3 3%	10 6%
MORE THAN 4-YEAR COLLEGE DEGREE	6 2%	201 4%*	~	2 5%~	~	2 3%	2 2%	~	6 3%~	~	~	~	~	~	~	~	6 3%~	4 2%	2 2%	3 3%	3 2%
NOT ANSWERED	22	336	1			3	3		1							4	1	5	6	2	4
VALID CASES	265	4746	29	44	23	65	81	21	201					19	33	229	179	84	109	156	
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160	
	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?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2													ITY	STATUS				
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/			HIS-	HIS-	VERY	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									AMER	#	#	#	#	#	TI		GOOD	POOR	MALE	MALE
Q55																				
YES HISPANIC OR LATINO	37 14%	571 12%	8 27%~	7 16%~	3 13%~	12 18%	4 5%*	3 14%~	~	~	~	~	~	~	~100%~	37 ~	27 15%	9 11%	17 16%	20 13%
NO NOT HISPANIC OR LATINO	230 86%	4145 88%	22 73%~	37 84%~	20 87%~	55 82%	76 95%*	18 86%~	200 100%~	~	~	~	~	~100%~	19 ~100%~	230 ~100%~	153 85%	76 89%	92 84%	138 87%
NOT ANSWERED	20	366				1	4		2								4	5	2	2
VALID CASES	267	4716	30	44	23	67	80	21	200					19	37	230	180	85	109	158
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

Q56.1 WHAT IS YOUR RACE? RESPONSE: WHITE

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									WHTE	##	#	##	##	##	TI	IC	IC	&		
																		&		
																		POOR		
																		MALE		
																		MALE		
Q56.1																				
YES	234	4120	24	41	19	59	72	18	202					19	13	219	157	76	95	139
	82%	81%	80%~	93%~	83%~	87%	86%	86%~	100%~	~	~	~	~	~100%~	35%~	95%*	85%*	84%	86%	87%*
NO	53	962	6	3	4	9	12	3							24	11	27	14	16	21
	18%	19%	20%~	7%~	17%~	13%	14%	14%~	~	~	~	~	~	~	65%~	5%*	15%*	16%	14%	13%*
VALID CASES	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER	
	OT1	OT2												ITY	STATUS				
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				NOT	VERY			
	ADLT	ADLT	TO	TO	TO	TO	TO	OVER	AFR-	AS-	PAC	ALSK			HIS-	HIS-	GOOD	FAIR	
			24	34	44	54	64		AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE
									WHTE	##	#	##	##	##	TI				FE-
																			MALE
Q56.2																			
YES	6	85	1	1	1		2							4	6	4	2	3	3
	2%	2%	3%~	2%~	4%~		2%		~	~	~	~	~	~ 21%~	~ 3%~	2%	2%	3%	2%
NO	281	4997	29	43	22	68	82	21	202					15	37	224	180	88	108
	98%	98%	97%~	98%~	96%~	100%~	98%	100%~	100%~	~	~	~	~	~ 79%~	100%~	97%~	98%	98%	97%
VALID CASES	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%

Q56.3 WHAT IS YOUR RACE? RESPONSE: ASIAN

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER	
	OT1	OT2												ITY	STATUS			
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &		
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR		
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	
									WHTE	##	#	##	##	##	TI	IC	IC	GOOD
																	POOR	
																	MALE	
																	MALE	
Q56.3																		
YES		136																
		3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	287	4946	30	44	23	68	84	21	202					19	37	230	184	90
	100%	97%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~	~	~	~	~100%	~100%	~100%	~100%	~100%
VALID CASES	287	5082	30	44	23	68	84	21	202					19	37	230	184	90
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			PAN-	PAN-	&	&	FE-	
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
Q56.5																				
YES	16	313	3	4		2	4	1						13	1	15	10	6	8	8
	6%	6%	10%~	9%~	~	3%	5%	5%~	~	~	~	~	~	68%~	3%~	7%*	5%	7%	7%	5%
NO	271	4769	27	40	23	66	80	20	202					6	36	215	174	84	103	152
	94%	94%	90%~	91%~	100%~	97%	95%	95%~	100%~	~	~	~	~	32%~	97%~	93%*	95%	93%	93%	95%
VALID CASES	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

Q56.6 WHAT IS YOUR RACE? RESPONSE: OTHER

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH		GENDER	
	OT1	OT2													ITY	STATUS					
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY						
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR					
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR			
									##	#	##	##	##	TI	IC	IC	&	&			
									WHTE								GOOD	POOR			
																	MALE	MALE			
Q56.6																					
YES	25	278	3	4	2	9	5	2						6	15	10	16	8	12	13	
	9%	5%*	10%~	9%~	9%~	13%	6%	10%~	~	~	~	~	~	32%~	41%~	4%*	9%	9%	11%	8%	
NO	262	4804	27	40	21	59	79	19	202					13	22	220	168	82	99	147	
	91%	95%*	90%~	91%~	91%~	87%	94%	90%~	100%~	~	~	~	~	68%~	59%~	96%*	91%	91%	89%	92%	
VALID CASES	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160	
NUMBER OF RESPONDENTS	287	5082	30	44	23	68	84	21	202					19	37	230	184	90	111	160	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

Q57 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	FE-		
									WHTE	##	#	##	##	##	TI				MALE		
																			MALE		
Q57																					
YES	22 11%	466 12%	5 31%~	3 14%~	2 15%~	7 14%~	1 1%*	4 22%~	14 9%~	~	~	~	~	~	8 32%~	13 8%~	11 8%	10 18%	15 19%*	7 6%*	
NO	171 89%	3267 88%	11 69%~	19 86%~	11 85%~	42 86%~	72 99%*	14 78%~	138 91%~	~	~	~	~	~	6 ~100%~	17 68%~	152 92%~	125 92%	45 82%	63 81%*	108 94%*
NOT ANSWERED	2	46					1										1	1			
VALID CASES	193	3733	16	22	13	49	73	18	152					6	25	165	136	55	78	115	
NUMBER OF RESPONDENTS	195	3779	16	22	13	49	74	18	152					6	25	165	137	56	78	115	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

[ASKED IF SURVEY COMPLETED BY MAIL]

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH	GENDER	
	OT1	OT2															ITY	STATUS		
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	PAN-	PAN-	GOOD	FAIR		
									AMER		ILND	NATV			IC	IC	&	&	FE-	
									WHTE	##	#	##	##	##	TI		GOOD	POOR	MALE	MALE
Q58.1																				
YES	9	238	2	1	1	4		1	4						5	4	5	3	7	2
	41%	51%	40%	33%	50%	57%		~ 25%	29%	~	~	~	~	~	~ 63%	~ 31%	~ 45%	~ 30%	~ 47%	~ 29%
NO	13	228	3	2	1	3	1	3	10						3	9	6	7	8	5
	59%	49%	60%	67%	50%	43%	~100%	~ 75%	71%	~	~	~	~	~	~ 38%	~ 69%	~ 55%	~ 70%	~ 53%	~ 71%
VALID CASES	22	466	5	3	2	7	1	4	14						8	13	11	10	15	7
NUMBER OF RESPONDENTS	22	466	5	3	2	7	1	4	14						8	13	11	10	15	7
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH	GENDER			
	OT1	OT2								BLCK	NATV	AMER						NOT	EX &			
	CCC	OHP	18	25	35	45	55	65	AFR-	AS-	HAW/	IND/					HIS-	HIS-	GOOD	FAIR		
	TOT	TOT	TO	TO	TO	TO	TO	AND	AMER	IAN	ILND	NATV	OTHR	MUL-			PAN-	PAN-	&	&	MALE	FE-
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	##	#	##	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE	
Q58.2																						
YES	7	182	1	1	1	2	1	1	5							2	5	4	3	5	2	
	32%	39%	20%	33%	50%	29%	100%	25%	36%	~	~	~	~	~	25%	38%	36%	30%	33%	29%		
NO	15	284	4	2	1	5		3	9						6	8	7	7	10	5		
	68%	61%	80%	67%	50%	71%	~	75%	64%	~	~	~	~	~	75%	62%	64%	70%	67%	71%		
VALID CASES	22	466	5	3	2	7	1	4	14						8	13	11	10	15	7		
NUMBER OF RESPONDENTS	22	466	5	3	2	7	1	4	14						8	13	11	10	15	7		
	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.

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER									
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	EX &					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	##	#	##	##	##	TI	IC	IC	GOOD	POOR	
																		MALE	MALE	
Q58.3																				
YES	8	156	1	1		2		4	6						2	5	4	4	7	1
	36%	33%	20%	33%		~ 29%		~ 100%	43%	~	~	~	~	~	~ 25%	38%	36%	40%	47%	14%
NO	14	310	4	2	2	5	1		8						6	8	7	6	8	6
	64%	67%	80%	67%	100%	~ 71%	~ 100%	~	57%	~	~	~	~	~	~ 75%	62%	64%	60%	53%	86%
VALID CASES	22	466	5	3	2	7	1	4	14						8	13	11	10	15	7
NUMBER OF RESPONDENTS	22	466	5	3	2	7	1	4	14						8	13	11	10	15	7
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER	
	OT1	OT2												ITY	STATUS			
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &		
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR		
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	&	
									WHTE	##	#	##	##	##	IC	IC	GOOD	
																	POOR	
																	MALE	
																	MALE	
Q58.4																		
YES	1	56		1											1	1	1	
	5%	12%~	~	33%~	~	~	~	~	~	~	~	~	~	~	13%~	~	9%~	
NO	21	410	5	2	2	7	1	4	14						7	13	10	
	95%	88%~	100%~	67%~	100%~	100%~	100%~	100%~	100%~	~	~	~	~	~	88%~	100%~	91%~	
VALID CASES	22	466	5	3	2	7	1	4	14						8	13	11	
NUMBER OF RESPONDENTS	22	466	5	3	2	7	1	4	14						8	13	11	
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER	
	OT1	OT2												ITY	STATUS	MALE	MALE	
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &		
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR		
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	
									WHTE	##	#	##	##	##	IC	IC	GOOD	
																	POOR	
																	MALE	
																	MALE	
Q58.5																		
YES	3	39	1			2			2						1	2	1	2
	14%	8%	20%	~	~	29%	~	~	14%	~	~	~	~	~	13%	15%	9%	20%
NO	19	427	4	3	2	5	1	4	12						7	11	10	8
	86%	92%	80%	~100%	~100%	71%	~100%	~100%	86%	~	~	~	~	~	88%	85%	91%	80%
VALID CASES	22	466	5	3	2	7	1	4	14						8	13	11	10
NUMBER OF RESPONDENTS	22	466	5	3	2	7	1	4	14						8	13	11	10
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%

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

NQ13 RATING OF ALL HEALTH CARE

	BANT	BANT	AGE							RACE							ETHNICITY			HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN #	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE			
NQ13	CCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE														
0-6	46 23%	687 20%	2 13%	11 34%	5 33%	12 21%	10 16%	3 21%	29 19%					5 33%	7 29%	37 22%	26 20%	18 25%	10 13%*	34 28%*			
7-8	66 33%	1221 35%	5 33%	12 38%	5 33%	21 38%	19 30%	3 21%	53 36%					3 20%	7 29%	57 33%	37 29%	28 39%	24 32%	41 34%			
9-10	91 45%	1603 46%	8 53%	9 28%	5 33%	23 41%	34 54%	8 57%	67 45%					7 47%	10 42%	77 45%	65 51%*	25 35%*	41 55%*	47 39%*			
VALID CASES	203	3511	15	32	15	56	63	14	149					15	24	171	128	71	75	122			
NUMBER OF RESPONDENTS	203 100%	3511 100%	15 100%	32 100%	15 100%	56 100%	63 100%	14 100%	149 100%					15 100%	24 100%	171 100%	128 100%	71 100%	75 100%	122 100%			
MEAN	2.22	2.26	2.40	1.94	2.00	2.20	2.38	2.36	2.26					2.13	2.13	2.23	2.30	2.10	2.41	2.11			
p stat_(*=Sig @ p<=.05)		.451	~	~	~.777	.055		~.321	~	~	~	~	~	~	~	~	~.051	.105	.008*	.011*			

[ASKED IF Q7 >= 1 TIME]

NQ23 RATING OF PERSONAL DOCTOR

	BANT	BANT	AGE							RACE							ETHNICITY			HEALTH STATUS		GENDER	
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN #	NATV HAW/ILND PAC ##	AMER IND/ALSK ##	OTHR ##	MUL-TI TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE			
NQ23	CCC TOT ADLT	OHP TOT ADLT	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	WHTE														
0-6	30 15%	572 15%	2 11%	7 22%	4 27%	7 15%	7 10%	1 6%	20 13%	~	~	~	~	~	5 38%	2 9%	27 16%	18 14%	11 15%	7 10%	22 17%		
7-8	53 26%	959 26%	7 37%	12 38%	3 20%	8 17%	20 29%	2 12%	43 28%	~	~	~	~	~	1 8%	5 22%	43 25%	36 28%	16 22%	17 24%	34 27%		
9-10	122 60%	2197 59%	10 53%	13 41%	8 53%	31 67%	41 60%	14 82%	88 58%	~	~	~	~	~	7 54%	16 70%	101 59%	75 58%	45 63%	47 66%	71 56%		
VALID CASES	205	3728	19	32	15	46	68	17	151						13	23	171	129	72	71	127		
NUMBER OF RESPONDENTS	205 100%	3728 100%	19 100%	32 100%	15 100%	46 100%	68 100%	17 100%	151 100%						13 100%	23 100%	171 100%	129 100%	72 100%	71 100%	127 100%		
MEAN	2.45	2.44	2.42	2.19	2.27	2.52	2.50	2.76	2.45						2.15	2.61	2.43	2.44	2.47	2.56	2.39		
p stat_(*=Sig @ p<=.05)		.799	~	~	~	~	.467	~	.960	~	~	~	~	~	~	~	~	.861	.738	.105	.108		

[ASKED IF Q15 = YES]

NQ27 RATING OF SPECIALIST SEEN MOST OFTEN

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLK OR AFR-AMER ##	AS-IAN #	NATV HAW/ ILND PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE	
NQ27	CCC TOT ADLT	OHP TOT ADLT	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	WHTE	##	#	##	##	##	TI	HIS-IC	HIS-PAN-IC	GOOD & POOR	FAIR & POOR	MALE	MALE
0-6	11 13%	239 13%	2 29%	1 17%	3 ~	3 10%	3 10%	7 ~	11%	~	~	~	~	1 ~	13%	11%	9 12%	4 8%	7 19%	10 ~	20%
7-8	22 25%	475 27%	2 29%	3 50%	2 ~	7 23%	6 21%	2 25%	16 25%	~	~	~	~	3 ~	38%	1 11%	20 27%	16 31%	5 14%	9 26%	12 24%
9-10	55 63%	1057 60%	3 43%	2 33%	2 ~	20 50%	20 67%	6 75%	40 63%	~	~	~	~	4 ~	50%	7 78%	44 60%	31 61%	24 67%	26 74%	27 55%
VALID CASES	88	1771	7	6	4	30	29	8	63					8	8	9	73	51	36	35	49
NUMBER OF RESPONDENTS	88	1771	7	6	4	30	29	8	63					8	8	9	73	51	36	35	49
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%
MEAN	2.50	2.46	2.14	2.17	2.50	2.57	2.59	2.75	2.52					2.38	2.67	2.48	2.53	2.47	2.74	2.35	
p stat_(*=Sig @ p<=.05)		.611	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

NQ35 RATING OF HEALTH PLAN

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-AMER ##	AS-IAN #	NATV HAW/ ILND PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE	
NQ35	CCC TOT ADLT	OHP TOT ADLT	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	WHTE												
0-6	68 25%	953 21%	6 21%~	14 32%~	7 30%~	17 26%	20 25%	2 13%~	48 25%	~	~	~	~	~	9 47%~	4 12%~	61 27%~	42 23%	26 31%	33 31%	33 21%
7-8	88 33%	1522 33%	11 38%~	17 39%~	11 48%~	24 36%	19 23%*	4 25%~	67 34%	~	~	~	~	~	8 42%~	10 30%~	76 34%~	64 36%	21 25%	28 26%	58 38%
9-10	111 42%	2121 46%	12 41%~	13 30%~	5 22%~	25 38%	42 52%*	10 63%~	80 41%	~	~	~	~	~	2 11%~	19 58%~	86 39%~	74 41%	37 44%	45 42%	63 41%
VALID CASES	267	4596	29	44	23	66	81	16	195						19	33	223	180	84	106	154
NUMBER OF RESPONDENTS	267 100%	4596 100%	29 100%	44 100%	23 100%	66 100%	81 100%	16 100%	195 100%						19 100%	33 100%	223 100%	180 100%	84 100%	106 100%	154 100%
MEAN	2.16	2.25	2.21	1.98	1.91	2.12	2.27	2.50	2.16						1.63	2.45	2.11	2.18	2.13	2.11	2.19
p stat_(*=Sig @ p<=.05)		.044*	~	~	~	.641	.149	~	.919	~	~	~	~	~	~	~	~	.635	.680	.431	.432

GETTING NEEDED CARE

	BANT OT1	BANT OT2	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- AMER	AS- IAN	NATV HAW/ ILLND	AMER IND/ ALSK	OTHR MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE		
NPRBSEE4 NQ46	2.25	2.25	2.38	1.88	2.75	2.21	2.34	2.20	2.21				2.50	2.20	2.24	2.28	2.21	2.43	2.11		
p stat_(*=Sig @ p<=.05)	.963		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NCARNES4 NQ15	2.25	2.31	2.33	2.03	2.27	2.19	2.39	2.38	2.25				2.13	2.29	2.25	2.30	2.22	2.42	2.16		
p stat_(*=Sig @ p<=.05)	.266		~	~	~.446	.095	~	.803	~	~	~	~	~	~	~	~.325	.661	.016*	.025*		
COMPOSITE	2.25	2.28	2.35	1.95	2.51	2.20	2.37	2.29	2.23	x	x	x	x	x	2.32	2.25	2.24	2.29	2.22	2.43	2.13
p stat_(*=Sig @ p<=.05)	.467		~	~	~.392	.050*	~	.298	~	~	~	~	~	~	~	~.213	.520	.000*	.000*		

GETTING CARE QUICKLY

	BANT OT1	BANT OT2	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- AMER	AS- IAN	NATV HAW/ ILLND	AMER IND/ ALSK	OTHR MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE		
NCARSN4 NQ4	2.32	2.40	2.20	2.33	2.30	2.26	2.25	2.56	2.34				2.10	2.56	2.28	2.35	2.31	2.47	2.25		
p stat_(*=Sig @ p<=.05)	.249		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NAPGET4 NQ6	2.27	2.26	2.07	2.03	2.23	2.29	2.42	2.45	2.27				2.33	2.17	2.29	2.26	2.29	2.39	2.19		
p stat_(*=Sig @ p<=.05)	.919		~	~	~	~	.091	~	.958	~	~	~	~	~	~	~	.907	.737	.089	.096	
COMPOSITE	2.29	2.33	2.13	2.18	2.27	2.27	2.34	2.51	2.31	x	x	x	x	x	2.22	2.36	2.29	2.31	2.30	2.43	2.22
p stat_(*=Sig @ p<=.05)	.293		~	~	~	.736	.457	~	.583	~	~	~	~	~	~	~	.604	.852	.004*	.010*	

HOW WELL DOCTORS COMMUNICATE

	BANT OT1	BANT OT2	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- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
NDREXPL4 NQ32	2.63	2.64	2.62	2.44	2.50	2.78	2.63	2.75	2.64					2.54	2.68	2.63	2.71	2.52	2.71	2.59	
p stat_(*=Sig @ p<=.05)	.787		~	~	~	~	.947	~	~	~	~	~	~	~	~	~	.034*	.085	.147	.369	
NDRLSTN4 NQ33	2.61	2.61	2.54	2.32	2.42	2.73	2.72	2.85	2.62					2.46	2.72	2.62	2.67	2.53	2.77	2.55	
p stat_(*=Sig @ p<=.05)	.976		~	~	~	~	.166	~	~	~	~	~	~	~	~	~	.152	.249	.013*	.139	
NDRESPU4 NQ34	2.65	2.67	2.62	2.36	2.42	2.78	2.76	2.85	2.67					2.38	2.79	2.65	2.68	2.62	2.80	2.58	
p stat_(*=Sig @ p<=.05)	.678		~	~	~	~	.118	~	~	~	~	~	~	~	~	~	.465	.660	.013*	.085	
NDRTMEN4 NQ37	2.45	2.52	2.38	2.32	2.17	2.58	2.48	2.54	2.43					2.31	2.63	2.43	2.53	2.33	2.45	2.46	
p stat_(*=Sig @ p<=.05)	.214		~	~	~	~	.713	~	~	~	~	~	~	~	~	~	.069	.095	.974	.928	
COMPOSITE	2.58	2.61	2.54	2.36	2.38	2.72	2.65	2.75	2.59	x	x	x	x	x	2.42	2.71	2.59	2.65	2.50	2.68	2.55
p stat_(*=Sig @ p<=.05)	.571		~	~	~	~	.332	~	~	~	~	~	~	~	~	~	.084	.160	.076	.256	

CUSTOMER SERVICE

	BANT OT1	BANT OT2	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- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE MALE			
NPBCLCS4 NQ50	2.26	2.30	1.89	2.33	2.00	2.36	2.28	3.00	2.38				2.25	2.10	2.32	2.25	2.29	2.57	2.09		
p stat_(*=Sig @ p<=.05)		.735	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NCSRESP NQ51	2.66	2.69	2.33	2.44	2.00	2.93	2.72	2.80	2.65				3.00	2.70	2.64	2.56	2.82	2.87	2.52		
p stat_(*=Sig @ p<=.05)		.615	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
COMPOSITE	2.46	2.50	2.11	2.39	2.00	2.64	2.50	2.90	2.52	x	x	x	x	x	2.63	2.40	2.48	2.40	2.55	2.72	2.30
p stat_(*=Sig @ p<=.05)		.656	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		

SHARED DECISION MAKING

	BANT OT1	BANT OT2	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- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
NNRXWHY NQ11	2.89	2.87	3.00	2.88	3.00	2.83	2.84	3.00	2.85					3.00	3.00	2.87	2.88	2.90	2.89	2.88	
p stat_(*=Sig @ p<=.05)		.683	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NNRXWYNT NQ12	2.40	2.49	2.33	2.29	2.67	2.42	2.46	2.33	2.45					2.40	2.40	2.43	2.41	2.40	2.57	2.33	
p stat_(*=Sig @ p<=.05)		.260	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NRXBST NQ13	2.51	2.53	2.78	2.53	3.00	2.33	2.46	2.56	2.47					2.60	2.60	2.50	2.50	2.55	2.62	2.45	
p stat_(*=Sig @ p<=.05)		.770	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.60	2.63	2.70	2.57	2.89	2.53	2.59	2.63	2.59	x	x	x	x	x	2.67	2.67	2.60	2.59	2.62	2.69	2.56
p stat_(*=Sig @ p<=.05)		.543	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

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

	BANTO	BANTO	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	T1	T2												ITY	STATUS					
	CCC	OHP	18	25	35	45	55	65	BLCK	AS-	NATV	AMER								
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AFR-	HAW/	IND/								
	ADLT	ADLT	24	34	44	54	64	OVER	WHT	AMER	ILND	NATV	OTHR	MUL-	HIS-	NOT	EX &			
									##	#	##	##	##	TI	PAN-	PAN-	VERY			
															IC	IC	GOOD			
																	FAIR			
																	&			
																	POOR			
																	MALE			
																	FE-			
																	MALE			
PRBSEE4 Q25	74%	77%	75%	50%	100%	76%	76%	80%	73%					80%	70%	74%	72%	76%	78%	71%
CARNES4 Q14	79%	82%	87%	75%	73%	78%	81%	88%	79%					67%	83%	78%	80%	78%	87%	75%
AVERAGE	76.44	79.43	80.83	62.50	86.67	76.77	78.56	83.75	76.23	x	x	x	x	x 73.33	76.67	76.12	76.08	76.98	82.61	72.75

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

	BANTO	BANTO	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	T1	T2	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 HAW/ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	FE-MALE	MALE
CARSN4 Q4	82%	83%	80%	87%	90%	78%	75%	100%	85%						70%	89%	81%	84%	81%	90%	79%
APGET4 Q6	80%	78%	80%	70%	77%	82%	83%	91%	80%						83%	75%	81%	77%	84%	88%	75%
AVERAGE	80.94	80.38	80.00	78.33	83.46	79.71	78.85	95.45	82.30	x	x	x	x	x	76.67	81.94	81.15	80.84	82.39	88.94	76.96

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER				
	OT1	OT2												ITY	STATUS						
	CCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			PAN-	PAN-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE	
DREXPL4 Q17	92%	92%	100%	88%	75%	98%	93%	100%	93%					85%	100%	92%	93%	92%	98%	89%	
DRLSTN4 Q18	89%	90%	92%	80%	75%	96%	92%	100%	89%					85%	94%	90%	89%	90%	97%	86%	
DRESPU4 Q19	89%	91%	92%	80%	75%	93%	93%	100%	89%					77%	100%	88%	89%	89%	98%	84%	
DRTMEN4 Q20	87%	88%	85%	84%	75%	91%	89%	92%	85%					77%	100%	85%	89%	84%	90%	85%	
AVERAGE	89.3	90.3	92.3	83.0	75.0	94.4	91.6	98.1	89.2	x	x	x	x	x	80.8	98.6	88.6	90.3	88.8	95.8	86.4

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

	BANTO	BANTO	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	T1	T2																			
	CCC	OHP	18	25	35	45	55	65	BLCK	AS-	NATV	AMER									
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	IAN	HAW/	IND/									
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-		PAC	ALSK	OTHR	MUL-	HIS-	NOT	EX &	VERY	FAIR		
									AMER	#	ILND	NATV	##	TI	PAN-	PAN-	GOOD	&	POOR		
									##						IC	IC	GOOD	POOR	MALE		
									WHT								GOOD	POOR	MALE		
									##								GOOD	POOR	MALE		
PBCLCS4 Q31	77%	80%	67%	89%	100%	71%	78%	100%	77%					75%	90%	75%	78%	76%	87%	72%	
CSRESP Q32	95%	94%	89%	89%	100%	100%	94%	100%	93%					100%	100%	93%	92%	100%	96%	94%	
AVERAGE	86.01	86.67	77.78	88.89	100.0	85.71	86.11	100.0	84.71	x	x	x	x	x	87.50	95.00	84.17	84.72	88.10	91.30	82.91

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	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- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALS	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
NRXWHY Q10	94%	93%	100%	94%	100%	92%	92%	100%						100%	100%	93%	94%	95%	95%	94%	
NRXWYNT Q11	70%	74%	67%	65%	83%	71%	73%	67%						70%	70%	72%	70%	70%	78%	67%	
RXBST Q12	75%	77%	89%	76%	100%	67%	73%	78%						80%	80%	75%	75%	78%	81%	73%	
AVERAGE	79.9	81.5	85.2	78.4	94.4	76.4	79.3	81.5	79.6	x	x	x	x	x	83.3	83.3	80.1	79.7	80.8	84.7	77.8

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q1 YES	278 100%	5277 100%	50 100%	66 100%	89 100%	73 100%	144 100%	~	~	~	~	20 100%	81 100%	172 100%	244 100%	11 100%	218 100%	60 100%
NOT ANSWERED	2	32		1	1								1	1	2		2	
VALID CASES	278	5277	50	66	89	73	144					20	81	172	244	11	218	60
NUMBER OF RESPONDENTS	280 100%	5309 100%	50 100%	67 100%	90 100%	73 100%	144 100%					20 100%	82 100%	173 100%	246 100%	11 100%	220 100%	60 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q3 YES	81 30%	1639 32%	17 35%~	20 30%	21 25%	23 33%	47 33%	~	~	~	~	~	8 40%~	19 23%	59 35%*	71 29%~	7 64%~	53 25%*	28 47%
NO	189 70%	3549 68%	32 65%~	46 70%	64 75%	47 67%	95 67%	~	~	~	~	~	12 60%~	62 77%	110 65%*	170 71%~	4 36%~	158 75%*	31 53%
NOT ANSWERED	10	121	1	1	5	3	2							1	4	5		9	1
VALID CASES	270	5188	49	66	85	70	142						20	81	169	241	11	211	59
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q4 NEVER	2 3%	19 1%	~	1 5%	1 5%	~	2 5%	~	~	~	~	~	~	2 4%	1 2%	1 17%	1 2%	1 4%
SOMETIMES	3 4%	114 7%	~	2 10%	1 5%	~	3 7%	~	~	~	~	~	~	3 6%	2 3%	1 17%	1 2%	2 7%
USUALLY	11 15%	272 18%	1 7%	3 15%	4 20%	3 15%	2 5%	~	~	~	~	3 38%	5 28%	6 11%	9 14%	2 33%	4 9%	7 26%
ALWAYS	58 78%	1135 74%	13 93%	14 70%	15 75%	16 80%	36 84%	~	~	~	~	5 63%	13 72%	42 79%	53 82%	2 33%	41 87%	17 63%
#ALWAYS + USUALLY (NET)	69 93%	1407 91%	14 100%	17 85%	19 95%	19 95%	38 88%	~	~	~	~	8 100%	18 100%	48 91%	62 95%	4 67%	45 96%	24 89%
TOP BOX SCORE	58 78%	1135 74%	13 93%	14 70%	15 75%	16 80%	36 84%	~	~	~	~	5 63%	13 72%	42 79%	53 82%	2 33%	41 87%	17 63%
NOT ANSWERED	7	99	3		1	3	4						1	6	6	1	6	1
VALID CASES	74	1540	14	20	20	20	43					8	18	53	65	6	47	27
NUMBER OF RESPONDENTS	81 100%	1639 100%	17 100%	20 100%	21 100%	23 100%	47 100%					8 100%	19 100%	59 100%	71 100%	7 100%	53 100%	28 100%

[ASKED IF Q3 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN ##	NATV ILND #	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q5 YES	169 64%	3464 67%	38 81%~	45 69%	47 57%	39 57%	90 63%	~	~	~	~	~	15 75%~	50 64%	110 65%	153 64%~	8 73%~	124 60%*	45 76%
NO	95 36%	1672 33%	9 19%~	20 31%	36 43%	30 43%	52 37%	~	~	~	~	~	5 25%~	28 36%	60 35%	86 36%~	3 27%~	81 40%*	14 24%
NOT ANSWERED	16	173	3	2	7	4	2							4	3	7		15	1
VALID CASES	264	5136	47	65	83	69	142						20	78	170	239	11	205	59
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND #	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	NO CCC	CCC	
Q6 NEVER	2 1%	57 2%	~	2 5%~	~	~	2 2%~	~	~	~	~	~	~	~	2 2%	1 0.7%~	1 14%~	~	2 5%
SOMETIMES	13 8%	393 12%	14%~	5 7%~	3 7%~	2 6%~	8 10%	~	~	~	~	~	~	4 8%~	9 9%	12 8%~	1 14%~	10 9%~	3 8%
USUALLY	33 21%	850 26%	22%~	8 15%~	6 27%~	7 20%~	15 18%	~	~	~	~	~	5 36%~	11 23%~	21 21%	32 23%~	1 14%~	25 21%~	8 20%
ALWAYS	109 69%	1954 60%*	65%~	24 73%~	30 73%~	29 66%~	26 74%~	57 70%	~	~	~	~	9 64%~	33 69%~	68 68%	97 68%~	4 57%~	82 70%~	27 68%
#ALWAYS + USUALLY (NET)	142 90%	2804 86%	86%~	32 86%~	36 88%~	41 93%~	33 94%~	72 88%	~	~	~	~	14 100%~	44 92%~	89 89%	129 91%~	5 71%~	107 91%~	35 88%
TOP BOX SCORE	109 69%	1954 60%*	65%~	24 73%~	30 73%~	29 66%~	26 74%~	57 70%	~	~	~	~	9 64%~	33 69%~	68 68%	97 68%~	4 57%~	82 70%~	27 68%
NOT ANSWERED	12	210	1	4	3	4	8						1	2	10	11	1	7	5
VALID CASES	157	3254	37	41	44	35	82						14	48	100	142	7	117	40
NUMBER OF RESPONDENTS	169	3464	38	45	47	39	90						15	50	110	153	8	124	45
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q5 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND #	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q7 NONE	82 31%	1484 30%	10 21%	21 33%	29 35%	22 31%	42 30%	~	~	~	~	~	30%~	26 33%	50 29%	76 32%	1 9%	76 37%*	6 10%
1 TIME	72 27%	1437 29%	11 23%~	18 28%	20 24%	23 33%	37 26%	~	~	~	~	~	10%~	26 33%	42 25%	67 28%~	2 18%~	59 29%	13 22%
2	60 23%	1045 21%	13 28%~	14 22%	23 28%	10 14%*	36 25%	~	~	~	~	~	35%~	15 19%	44 26%	58 24%~	1 9%	40 20%*	20 34%
3	25 9%	518 10%	7 15%~	6 9%	6 7%	6 9%	11 8%	~	~	~	~	~	25%~	7 9%	17 10%	21 9%~	3 27%~	16 8%	9 15%
4	12 5%	229 5%	2 4%~	1 2%	3 4%	6 9%	7 5%	~	~	~	~	~	~	4 5%	7 4%	10 4%~	1 9%~	7 3%	5 8%
5 TO 9	8 3%	232 5%	4 9%~	1 2%	2 2%	1 1%	4 3%	~	~	~	~	~	~	2 3%	5 3%	5 2%~	2 18%~	5 2%	3 5%
10 OR MORE TIMES	5 2%	79 2%	~	3 5%	~	2 3%	5 4%~	~	~	~	~	~	~	~	5 3%*	4 2%~	1 9%~	2 1%	3 5%
NOT ANSWERED	16	285	3	3	7	3	2							2	3	5		15	1
VALID CASES	264	5024	47	64	83	70	142						20	80	170	241	11	205	59
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN ##	NATV ILND #	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q8 #YES	121 67%	2500 72%	24 65%~	26 62%~	38 70%	33 70%~	70	~	~	~	~	~	11 79%~	32 62%	85 71%	108 66%~	9 90%~	81 64%	40 75%
NO	59 33%	975 28%	13 35%~	16 38%~	16 30%	14 30%~	30	~	~	~	~	~	3 21%~	20 38%	35 29%	55 34%~	1 10%~	46 36%	13 25%
NOT ANSWERED	2	65		1		1								2		2		2	
VALID CASES	180	3475	37	42	54	47	100						14	52	120	163	10	127	53
NUMBER OF RESPONDENTS	182	3540	37	43	54	48	100						14	54	120	165	10	129	53
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q9 NEVER	4 2%	83 2%	1 3%	1 2%	2 4%	~	3 3%	~	~	~	~	~	~	1 2%	3 3%	3 2%	1 10%	2 2%	2 4%
SOMETIMES	11 6%	254 7%	5 14%	2 5%	2 4%	2 4%	2 2%*	~	~	~	~	~	2 14%	5 10%	6 5%	10 6%	1 10%	9 7%	2 4%
USUALLY	29 16%	708 20%	5 14%	5 12%	8 15%	11 23%	16 16%	~	~	~	~	~	2 14%	9 17%	18 15%	25 15%	3 30%	23 18%	6 11%
ALWAYS	136 76%	2421 70%	26 70%	34 81%	42 78%	34 72%	79 79%	~	~	~	~	~	10 71%	37 71%	93 78%	125 77%	5 50%	93 73%	43 81%
#ALWAYS + USUALLY (NET)	165 92%	3129 90%	31 84%	39 93%	50 93%	45 96%	95 95%	~	~	~	~	~	12 86%	46 88%	111 93%	150 92%	8 80%	116 91%	49 92%
TOP BOX SCORE	136 76%	2421 70%	26 70%	34 81%	42 78%	34 72%	79 79%	~	~	~	~	~	10 71%	37 71%	93 78%	125 77%	5 50%	93 73%	43 81%
NOT ANSWERED		2 74		1		1								2		2		2	
VALID CASES	180	3466	37	42	54	47	100						14	52	120	163	10	127	53
NUMBER OF RESPONDENTS	182 100%	3540 100%	37 100%	43 100%	54 100%	48 100%	100 100%						14 100%	54 100%	120 100%	165 100%	10 100%	129 100%	53 100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND#	AMER IND/PAC ALSK##	OTHR##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q10 YES	55 31%	1023 30%	9 24%~	10 24%~	20 37%	16 34%~	35 35%	~	~	~	~	~	8 57%~	7 13%*	46 38%*	49 30%~	4 40%~	25 20%*	30 57%
Q10 NO	125 69%	2434 70%	28 76%~	32 76%~	34 63%	31 66%~	65 65%	~	~	~	~	~	6 43%~	45 87%*	74 62%*	114 70%~	6 60%~	102 80%*	23 43%
NOT ANSWERED	2	83		1		1								2		2		2	
VALID CASES	180	3457	37	42	54	47	100						14	52	120	163	10	127	53
NUMBER OF RESPONDENTS	182	3540	37	43	54	48	100						14	54	120	165	10	129	53
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND #	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q11 #YES	49 96%	937 94%	7 88%	9 100%	18 95%	15 100%	31 97%	~	~	~	~	~	8 100%	7 100%	41 98%	45 98%	3 100%	21 91%	28 100%
NO	2 4%	63 6%	1 13%	~	1 5%	~	1 3%	~	~	~	~	~	~	1 2%	1 2%	1 2%	~	2 9%	~
NOT ANSWERED	4	23	1	1	1	1	3							4	3	1	2	2	
VALID CASES	51	1000	8	9	19	15	32						8	7	42	46	3	23	28
NUMBER OF RESPONDENTS	55	1023	9	10	20	16	35						8	7	46	49	4	25	30
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- ##	AS- IAN ##	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q12 #YES	40 77%	709 71%	6 75%	10 100%	14 74%	10 67%	26 79%	~	~	~	~	~	7 88%	4 57%	35 81%	37 79%	2 67%	16 70%	24 83%
NO	12 23%	290 29%	2 25%	~	5 26%	5 33%	7 21%	~	~	~	~	~	1 13%	3 43%	8 19%	10 21%	1 33%	7 30%	5 17%
NOT ANSWERED	3	24	1		1	1	2								3	2	1	2	1
VALID CASES	52	999	8	10	19	15	33						8	7	43	47	3	23	29
NUMBER OF RESPONDENTS	55	1023	9	10	20	16	35						8	7	46	49	4	25	30
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND#	AMER IND/ALSK##	OTHR##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q13 #YES	41 80%	780 79%	5 63%~	9 90%~	16 89%~	11 73%~	26 81%~	~	~	~	~	~	6 75%~	5 71%~	34 81%~	38 83%~	1 33%~	18 78%~	23 82%~
NO	10 20%	209 21%	3 38%~	1 10%~	2 11%~	4 27%~	6 19%~	~	~	~	~	~	2 25%~	2 29%~	8 19%~	8 17%~	2 67%~	5 22%~	5 18%~
NOT ANSWERED	4	34	1		2	1	3							4	3	1	2	2	
VALID CASES	51	989	8	10	18	15	32						8	7	42	46	3	23	28
NUMBER OF RESPONDENTS	55	1023	9	10	20	16	35						8	7	46	49	4	25	30
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-##	AS-IAN##	NATV ILND#	AMER IND/ALSK##	OTHR##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q14 WORST HEALTH CARE POSSIBLE		12 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
01	1 0.6%	10 0.3%	~	1 2%	~	~	1 1%	~	~	~	~	~	~	1 ~0.8%	~	1 ~10%	~	1 2%	
02		13 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
03		13 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
04		22 0.6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
05	5 3%	111 3%	~	1 2%	1 2%	3 6%	2 2%	~	~	~	~	~	~	2 4%	2 2%	4 2%	~	5 4%	
06	6 3%	105 3%	2 5%	1 2%	3 6%	~	5 5%	~	~	~	~	~	~	~	6 5%	6 4%	~	4 3%	2 4%
07	12 7%	269 8%	2 5%	3 7%	5 9%	2 4%	7 7%	~	~	~	~	~	2 ~14%	1 2%*	10 8%	11 7%	1 10%	6 5%	6 11%
08	39 22%	725 21%	12 32%	7 17%	10 19%	10 21%	20 20%	~	~	~	~	~	4 ~29%	14 27%	25 21%	35 21%	4 40%	30 24%	9 17%
09	31 17%	742 21%	6 16%	3 7%	8 15%	14 30%	21 21%	~	~	~	~	~	2 ~14%	7 13%	24 20%	29 18%	2 20%	23 18%	8 15%
BEST HEALTH CARE POSSIBLE	86 48%	1438 42%	15 41%	26 62%	27 50%	18 38%	44 44%	~	~	~	~	~	6 ~43%	28 54%	52 43%	78 48%	2 20%	59 46%	27 51%
#8-10 (NET)	156 87%	2905 84%	33 89%	36 86%	45 83%	42 89%	85 85%	~	~	~	~	~	12 ~86%	49 94%*	101 84%	142 87%	8 80%	112 88%	44 83%

Continued

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND#	AMER IND/ALSK##	OTHR##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
9-10 (NET)	117 65%	2180 63%	21 57%	29 69%	35 65%	32 68%	65 65%	~	~	~	~	~	8 57%	35 67%	76 63%	107 66%	4 40%	82 65%	35 66%	
NOT ANSWERED	2	80		1		1								2		2			2	
VALID CASES	180	3460	37	42	54	47	100						14	52	120	163	10	127	53	
NUMBER OF RESPONDENTS	182 100%	3540 100%	37 100%	43 100%	54 100%	48 100%	100 100%						14 100%	54 100%	120 100%	165 100%	10 100%	129 100%	53 100%	
MEAN	8.87	8.70	8.81	8.95	8.89	8.83	8.79						8.86	9.08	8.77	8.92	7.80	8.88	8.85	
p stat_(*=Sig @ p<=.05)		.095	~	~	.917	~	.384	~	~	~	~	~	~	.187	.183	~	~	~	.898	

[ASKED IF Q7 >= 1]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND NATV #	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q15 NEVER	1 0.6%	57 2%	~	2%~	~	~	1 1%	~	~	~	~	~	~	1 ~0.8%	3	10	11	2	9	5
SOMETIMES	14 8%	311 9%	5%~	7%~	9%	9%~	8 8%	~	~	~	~	~	7%~	3 6%	10 8%	11 7%~	2 20%~	9 7%	5 9%	
USUALLY	47 26%	1019 29%	24%~	17%~	31%	30%~	24 24%	~	~	~	~	~	3 ~21%~	17 33%	29 24%	43 26%~	4 40%~	30 24%	17 32%	
ALWAYS	118 66%	2073 60%	70%~	74%~	59%	62%~	67 67%	~	~	~	~	~	10 ~71%~	32 62%	80 67%	109 67%~	3 30%~	88 69%	30 57%	
#ALWAYS + USUALLY (NET)	165 92%	3092 89%	95%~	90%~	91%	91%~	91 91%	~	~	~	~	~	13 ~93%~	49 94%	109 91%	152 93%~	7 70%~	118 93%	47 89%	
TOP BOX SCORE	118 66%	2073 60%	70%~	74%~	59%	62%~	67 67%	~	~	~	~	~	10 ~71%~	32 62%	80 67%	109 67%~	3 30%~	88 69%	30 57%	
NOT ANSWERED	2	80		1		1								2		2		2		
VALID CASES	180	3460	37	42	54	47	100						14	52	120	163	10	127	53	
NUMBER OF RESPONDENTS	182	3540	37	43	54	48	100						14	54	120	165	10	129	53	
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q16 YES	196 74%	3801 75%	8 17%	57 89%*	73 88%*	58 82%	109 76%	~	~	~	~	~	16 80%	54 68%	129 75%	177 73%	7 64%	140 68%*	56 93%
NO	70 26%	1296 25%	40 83%	7 11%*	10 12%*	13 18%	34 24%	~	~	~	~	~	4 20%	26 33%	42 25%	65 27%	4 36%	66 32%*	4 7%
NOT ANSWERED	14	212	2	3	7	2	1							2	2	4		14	
VALID CASES	266	5097	48	64	83	71	143						20	80	171	242	11	206	60
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND#	AMER IND/ALSK##	OTHR##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q17 YES	15 8%	409 11%	2 25%	7 13%	5 7%	1 2%*	10 10%	~	~	~	~	~	2 14%	2 4%	12 10%	12 7%~	2 33%~	7 5%	8 16%
NO	169 92%	3206 89%	6 75%	48 87%	65 93%	50 98%*	92 90%	~	~	~	~	~	12 86%	50 96%	107 90%	154 93%~	4 67%~	126 95%	43 84%
NOT ANSWERED	12	186		2	3	7	7						2	2	10	11	1	7	5
VALID CASES	184	3615	8	55	70	51	102						14	52	119	166	6	133	51
NUMBER OF RESPONDENTS	196	3801	8	57	73	58	109						16	54	129	177	7	140	56
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q16 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLK OR AFR-##	AS-IAN##	NATV ILND#	AMER IND/ALSK##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q18 #YES	14 93%	369 92%	2 100%	6 86%	5 100%	1 100%	10 100%	~	~	~	~	~	2 100%	1 50%	12 100%	11 92%	2 100%	6 86%	8 100%
NO	1 7%	30 8%	~	1 14%	~	~	~	~	~	~	~	~	~	1 50%	~	1 8%	~	1 14%	~
NOT ANSWERED		10																	
VALID CASES	15	399	2	7	5	1	10						2	2	12	12	2	7	8
NUMBER OF RESPONDENTS	15	409	2	7	5	1	10						2	2	12	12	2	7	8
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q16 = YES AND Q17 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND#	AMER IND/ALSK##	OTHR##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q19 YES	10 4%	214 4%	3 6%~	4 6%	2 2%	1 1%	6 4%	~	~	~	~	~	1 5%~	~	9 5%*	7 3%~	2 18%~	4 2%*	6 10%
NO	259 96%	4864 96%	45 94%~	61 94%	82 98%	71 99%	138 96%	~	~	~	~	~	19 95%~	81 100%~	163 95%*	237 97%~	9 82%~	205 98%*	54 90%
NOT ANSWERED	11	231	2	2	6	1								1	1	2		11	
VALID CASES	269	5078	48	65	84	72	144						20	81	172	244	11	209	60
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	OT1	OT2	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q20 NEVER	2 20%	21 10%	~	2 50%	~	~	2 33%	~	~	~	~	~	~	2 22%	2 100%	~	2 33%	~
SOMETIMES	2 20%	30 14%	1 33%	1 25%	~	~	~	~	~	~	~	~	1 11%	1 14%	~	2 50%	~	
USUALLY		46 22%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
ALWAYS	6 60%	113 54%	2 67%	1 25%	2 100%	1 100%	4 67%	~	~	~	~	1 100%	1 67%	6 86%	6 86%	~	2 50%	4 67%
#ALWAYS + USUALLY (NET)	6 60%	159 76%	2 67%	1 25%	2 100%	1 100%	4 67%	~	~	~	~	1 100%	1 67%	6 86%	6 86%	~	2 50%	4 67%
TOP BOX SCORE	6 60%	113 54%	2 67%	1 25%	2 100%	1 100%	4 67%	~	~	~	~	1 100%	1 67%	6 86%	6 86%	~	2 50%	4 67%
NOT ANSWERED		4																
VALID CASES	10	210	3	4	2	1	6					1		9	7	2	4	6
NUMBER OF RESPONDENTS	10	214	3	4	2	1	6					1		9	7	2	4	6
	100%	100%	100%	100%	100%	100%	100%					100%		100%	100%	100%	100%	100%

[ASKED IF Q19 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN	NATV ILND	AMER PAC ALSK	OTH#	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q21 #YES	8 80%	170 83%	3 100%	2 50%	2 100%	1 100%	4 67%	~	~	~	~	~	1 100%	~	7 78%	7 100%	~	4 100%	4 67%
NO	2 20%	36 17%	~	2 50%	~	~	2 33%	~	~	~	~	~	~	2 22%	~	2 100%	~	2 33%	~
NOT ANSWERED		8																	
VALID CASES	10	206	3	4	2	1	6					1		9	7	2		4	6
NUMBER OF RESPONDENTS	10	214	3	4	2	1	6					1		9	7	2		4	6
	100%	100%	100%	100%	100%	100%	100%					100%		100%	100%	100%		100%	100%

[ASKED IF Q19 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER				
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND#	AMER IND/ALSK##	OTHR##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC	
Q22 YES	23 9%	522 10%	1 2%	8 12%	11 13%	3 4%	14 10%	~	~	~	~	~	2 10%	4 5%	17 10%	18 7%	3 27%	7 3%*	16 27%		
NO	245 91%	4555 90%	47 98%	57 88%	72 87%	69 96%	130 90%	~	~	~	~	~	18 90%	77 95%	155 90%	226 93%	8 73%	201 97%*	44 73%		
NOT ANSWERED	12	232	2	2	7	1								1	1	2			12		
VALID CASES	268	5077	48	65	83	72	144						20	81	172	244	11	208	60		
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144						20	82	173	246	11	220	60		
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND #	AMER PAC ALSK ##	MUL-OTHR ##	TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & GOOD	FAIR & POOR	NO CCC
Q23 NEVER	6 27%	63 13%~100%	1 50%	4 10%	1 10%	3 23%	~	~	~	~	~	1 50%	2 50%	4 25%	4 22%	2 100%	2 29%	4 27%
SOMETIMES	1 5%	78 16%	~	1 13%	~	1 8%	~	~	~	~	~	~	~	1 6%	1 6%	~	~	1 7%
USUALLY	3 14%	122 24%	~	~	1 10%	2 67%	15%	~	~	~	~	~	~	3 19%	3 17%	~	~	3 20%
ALWAYS	12 55%	236 47%	~	3 38%	8 80%	1 33%	7 54%	~	~	~	~	1 50%	2 50%	8 50%	10 56%	~	5 71%	7 47%
#ALWAYS + USUALLY (NET)	15 68%	358 72%	~	3 38%	9 90%	3 100%	9 69%	~	~	~	~	1 50%	2 50%	11 69%	13 72%	~	5 71%	10 67%
TOP BOX SCORE	12 55%	236 47%	~	3 38%	8 80%	1 33%	7 54%	~	~	~	~	1 50%	2 50%	8 50%	10 56%	~	5 71%	7 47%
NOT ANSWERED	1	23			1	1								1		1		1
VALID CASES	22	499	1	8	10	3	13					2	4	16	18	2	7	15
NUMBER OF RESPONDENTS	23	522	1	8	11	3	14					2	4	17	18	3	7	16
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE ##	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q24 #YES	10 48%	347 69%	~	4 50%	4 44%	2 67%	5 42%	~	~	~	~	~	1 50%	2 50%	7 47%	9 53%	~	2 29%	8 57%
NO	11 52%	153 31%	100%	1 50%	4 56%	5 33%	1 58%	~	~	~	~	~	1 50%	2 50%	8 53%	8 47%	2 100%	5 71%	6 43%
NOT ANSWERED	2	22			2		2								2	1	1		2
VALID CASES	21	500	1	8	9	3	12						2	4	15	17	2	7	14
NUMBER OF RESPONDENTS	23	522	1	8	11	3	14						2	4	17	18	3	7	16
	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?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN	NATV ILND	AMER IND/ALSK	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q25 YES	36 13%	769 15%		7 ~ 11%	17 20%*	12 17%	26 18%*	~	~	~	~	~	4 ~ 20%~	4 5%*	31 18%*	29 12%~	6 55%~	7 3%*	29 48%
NO	233 87%	4303 85%	48 100%~	58 89%	67 80%*	60 83%	118 82%*	~	~	~	~	~	16 ~ 80%~	78 95%*	141 82%*	216 88%~	5 45%~	202 97%*	31 52%
NOT ANSWERED	11	237	2	2	6	1									1	1		11	
VALID CASES	269	5072	48	65	84	72	144						20	82	172	245	11	209	60
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE ##	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q26 NEVER	4 11%	94 13%	~	2 29%	2 13%	~	3 12%	~	~	~	~	~	1 25%	~	4 13%	4 14%	~	~	4 14%
SOMETIMES	3 9%	122 16%	~	~	1 6%	2 17%	1 4%	~	~	~	~	~	~	1 25%	2 7%	2 7%	1 17%	1 14%	2 7%
USUALLY	6 17%	178 24%	~	1 14%	3 19%	2 17%	4 16%	~	~	~	~	~	1 25%	1 25%	5 17%	3 11%	3 50%	~	6 21%
ALWAYS	22 63%	353 47%	~	4 57%	10 63%	8 67%	17 68%	~	~	~	~	~	2 50%	2 50%	19 63%	19 68%	2 33%	6 86%	16 57%
#ALWAYS + USUALLY (NET)	28 80%	531 71%	~	5 71%	13 81%	10 83%	21 84%	~	~	~	~	~	3 75%	3 75%	24 80%	22 79%	5 83%	6 86%	22 79%
TOP BOX SCORE	22 63%	353 47%	~	4 57%	10 63%	8 67%	17 68%	~	~	~	~	~	2 50%	2 50%	19 63%	19 68%	2 33%	6 86%	16 57%
NOT ANSWERED	1	22			1		1								1	1			1
VALID CASES	35	747		7	16	12	25						4	4	30	28	6	7	28
NUMBER OF RESPONDENTS	36	769		7	17	12	26						4	4	31	29	6	7	29
	100%	100%		100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN	NATV ILND	AMER IND/ALSK	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q27 #YES	19 53%	428 57%	1 ~ 14%	9 ~ 53%	9 ~ 75%	14 54%	~	~	~	~	~	~ 75%	3 25%	1 58%	18 52%	15 67%	4 57%	15 52%
NO	17 47%	317 43%	6 ~ 86%	8 ~ 47%	3 ~ 25%	12 46%	~	~	~	~	~	~ 25%	1 75%	3 42%	13 48%	14 33%	2 43%	14 48%
NOT ANSWERED		24																
VALID CASES	36	745	7	17	12	26						4	4	31	29	6	7	29
NUMBER OF RESPONDENTS	36	769	7	17	12	26						4	4	31	29	6	7	29
	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND#	AMER IND/ALSK##	OTHR##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q28 YES	44 16%	1124 22%*	4 8%~	9 14%	18 21%	13 18%	30 21%*	~	~	~	~	~	3 15%~	9 11%	34 20%*	36 15%~	7 64%~	17 8%*	27 45%
NO	223 84%	3915 78%*	44 92%~	55 86%	66 79%	58 82%	114 79%*	~	~	~	~	~	17 85%~	73 89%	138 80%*	209 85%~	4 36%~	190 92%*	33 55%
NOT ANSWERED	13	270	2	3	6	2								1	1		13		
VALID CASES	267	5039	48	64	84	71	144						20	82	172	245	11	207	60
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND#	AMER IND/ALSK##	OTHR##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q29 #YES	25 58%	673 62%	3 75%	5 56%	8 47%	9 69%	16 55%	~	~	~	~	~	2 67%	5 56%	19 58%	21 58%	3 50%	12 71%	13 50%
NO	18 42%	416 38%	1 25%	4 44%	9 53%	4 31%	13 45%	~	~	~	~	~	1 33%	4 44%	14 42%	15 42%	3 50%	5 29%	13 50%
NOT ANSWERED	1	35				1	1								1		1		1
VALID CASES	43	1089	4	9	17	13	29						3	9	33	36	6	17	26
NUMBER OF RESPONDENTS	44	1124	4	9	18	13	30						3	9	34	36	7	17	27
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND#	AMER IND/PAC ALSK##	OTHR##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q30 YES	223 86%	4437 89%	42 91%~	56 89%	67 82%	58 84%	124 90%*	~	~	~	~	~	16 84%~	65 79%	144 88%	203 86%~	8 73%~	171 84%	52 91%
NO	37 14%	550 11%	4 9%~	7 11%	15 18%	11 16%	14 10%*	~	~	~	~	~	3 16%~	17 21%	20 12%	34 14%~	3 27%~	32 16%	5 9%
NOT ANSWERED	20	322	4	4	8	4	6						1		9	9		17	3
VALID CASES	260	4987	46	63	82	69	138						19	82	164	237	11	203	57
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	OT1	OT2	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q31 NONE	61 29%	1154 27%	6 15%	17 32%	20 31%	18 36%	33 29%	~	~	~	~	~	5 33%	19 30%	38 29%	58 31%	3 ~	52 33%	9 19%
1 TIME	73 35%	1496 35%	17 43%	19 36%	19 30%	18 36%	36 32%	~	~	~	~	~	6 40%	22 35%	44 34%	64 34%	3 38%	60 38%	13 27%
2	39 19%	893 21%	7 18%	10 19%	15 23%	7 14%	27 24%*	~	~	~	~	~	3 20%	9 14%	30 23%*	38 20%	1 13%	27 17%	12 25%
3	16 8%	389 9%	5 13%	4 8%	4 6%	3 6%	6 5%	~	~	~	~	~	1 7%	9 14%*	7 5%	14 7%	2 25%	10 6%	6 13%
4	11 5%	157 4%	3 8%	1 2%	4 6%	3 6%	7 6%	~	~	~	~	~	~	3 5%	7 5%	9 5%	1 13%	6 4%	5 10%
5 TO 9	6 3%	138 3%	2 5%	2 4%	2 3%	~	3 3%	~	~	~	~	~	~	1 2%	4 3%	4 2%	1 13%	3 2%	3 6%
10 OR MORE TIMES	1 0.5%	34 0.8%	~	~	~	1 2%	1 0.9%	~	~	~	~	~	~	~	1 ~0.8%	1 0.5%	~	1 ~0.6%	~
NOT ANSWERED	16	176	2	3	3	8	11						1	2	13	15		12	4
VALID CASES	207	4261	40	53	64	50	113						15	63	131	188	8	159	48
NUMBER OF RESPONDENTS	223	4437	42	56	67	58	124						16	65	144	203	8	171	52
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND #	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q31A ALWAYS	1 0.7%	65 2%*	~	~	1 2%~	~	1 1%~	~	~	~	~	~	~	~	1 1%~	1 0.8%~	~	~	1 3%
USUALLY		49 2%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	6 4%	202 7%	1 3%~	1 3%~	1 2%~	3 10%~	1 1%	~	~	~	~	~	~	5 12%~	1 1%*	6 5%~	~	5 5%~	1 3%
NEVER	137 95%	2765 90%*	33 97%~	35 97%~	42 95%~	27 90%~	77 97%	~	~	~	~	~	10 ~100%~	38 88%~	90 98%	121 95%~	8 100%~	101 95%~	36 95%
#NEVER + SOMETIMES (NET)	143 99%	2967 96%*	34 100%~	36 100%~	43 98%~	30 100%~	78 99%~	~	~	~	~	~	10 ~100%~	43 100%~	91 99%	127 99%~	8 100%~	106 100%~	37 97%
TOP BOX SCORE	137 95%	2765 90%*	33 97%~	35 97%~	42 95%~	27 90%~	77 97%	~	~	~	~	~	10 ~100%~	38 88%~	90 98%	121 95%~	8 100%~	101 95%~	36 95%
NOT ANSWERED		2				2	1							1	1	2		1	1
VALID CASES	144	3081	34	36	44	30	79						10	43	92	128	8	106	38
NUMBER OF RESPONDENTS	146 100%	3107 100%	34 100%	36 100%	44 100%	32 100%	80 100%						10 100%	44 100%	93 100%	130 100%	8 100%	107 100%	39 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AMERIAN	ASIAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MULTI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q32 NEVER	3 2%	64 2%	1 3%~	2 ~	2 5%~	1 ~	1 1%	~	~	~	~	~	1 2%~	1 1%	2 2%~	1 ~	3 3%~	
SOMETIMES	3 2%	100 3%	~	1 3%~	1 2%~	1 3%~	3 4%~	~	~	~	~	~	~	3 3%	2 2%~	1 13%~	1 1%~	2 5%
USUALLY	20 14%	428 14%	5 15%~	2 6%~	5 11%~	8 28%~	6 8%*	~	~	~	~	1 10%~	10 24%~	8 9%*	16 13%~	3 38%~	16 15%~	4 11%
ALWAYS	117 82%	2486 81%	28 82%~	33 92%~	36 82%~	20 69%~	69 87%	~	~	~	~	9 90%~	31 74%~	80 87%*	107 84%~	4 50%~	85 81%~	32 84%
#ALWAYS + USUALLY (NET)	137 96%	2914 95%	33 97%~	35 97%~	41 93%~	28 97%~	75 95%	~	~	~	~	10 100%~	41 98%~	88 96%	123 97%~	7 88%~	101 96%~	36 95%
TOP BOX SCORE	117 82%	2486 81%	28 82%~	33 92%~	36 82%~	20 69%~	69 87%	~	~	~	~	9 90%~	31 74%~	80 87%*	107 84%~	4 50%~	85 81%~	32 84%
NOT ANSWERED		3				3	1						2	1	3		2	1
VALID CASES	143	3078	34	36	44	29	79					10	42	92	127	8	105	38
NUMBER OF RESPONDENTS	146 100%	3107 100%	34 100%	36 100%	44 100%	32 100%	80 100%					10 100%	44 100%	93 100%	130 100%	8 100%	107 100%	39 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q33 NEVER	2 1%	29 0.9%	~	1 3%	1 2%	~	~	~	~	~	~	~	2 5%	2 2%	2 2%	2 2%	2 2%	
SOMETIMES	4 3%	120 4%	2 6%	~	2 5%	2 3%	~	~	~	~	~	~	2 5%	2 2%	4 3%	3 3%	1 3%	
USUALLY	20 14%	422 14%	5 15%	2 6%	5 11%	8 27%	8 10%	~	~	~	~	1 10%	8 19%	9 10%	15 12%	3 38%	16 15%	4 11%
ALWAYS	118 82%	2505 81%	27 79%	33 92%	36 82%	22 73%	69 87%	~	~	~	~	9 90%	31 72%	81 88%*	107 84%	5 63%	85 80%	33 87%
#ALWAYS + USUALLY (NET)	138 96%	2927 95%	32 94%	35 97%	41 93%	30 100%	77 97%	~	~	~	~	10 100%	39 91%	90 98%	122 95%	8 100%	101 95%	37 97%
TOP BOX SCORE	118 82%	2505 81%	27 79%	33 92%	36 82%	22 73%	69 87%	~	~	~	~	9 90%	31 72%	81 88%*	107 84%	5 63%	85 80%	33 87%
NOT ANSWERED	2	31				2	1						1	1	2		1	1
VALID CASES	144	3076	34	36	44	30	79					10	43	92	128	8	106	38
NUMBER OF RESPONDENTS	146	3107	34	36	44	32	80					10	44	93	130	8	107	39
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q34 NEVER	2 1%	30 1%	1 3%	~	1 2%	~	1 1%	~	~	~	~	~	~	1 2%	1 1%	2 2%	~	2 2%	~
SOMETIMES	3 2%	85 3%	~	~	2 5%	1 3%	3 4%	~	~	~	~	~	~	~	3 3%	3 2%	~	2 2%	1 3%
USUALLY	9 6%	368 12%*	5 15%	~	1 2%	3 10%	3 4%	~	~	~	~	~	1 10%	4 9%	4 4%	6 5%	2 25%	7 7%	2 5%
ALWAYS	130 90%	2589 84%*	28 82%	36 100%	40 91%	26 87%	72 91%	~	~	~	~	~	9 90%	38 88%	84 91%	117 91%	6 75%	95 90%	35 92%
#ALWAYS + USUALLY (NET)	139 97%	2957 96%	33 97%	36 100%	41 93%	29 97%	75 95%	~	~	~	~	~	10 ~100%	42 98%	88 96%	123 96%	8 100%	102 96%	37 97%
TOP BOX SCORE	130 90%	2589 84%*	28 82%	36 100%	40 91%	26 87%	72 91%	~	~	~	~	~	9 90%	38 88%	84 91%	117 91%	6 75%	95 90%	35 92%
NOT ANSWERED	2	35				2	1							1	1	2		1	1
VALID CASES	144	3072	34	36	44	30	79						10	43	92	128	8	106	38
NUMBER OF RESPONDENTS	146	3107	34	36	44	32	80						10	44	93	130	8	107	39
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE ##	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q35 YES	96 68%	2086 68%	3 9%	24 69%	40 91%	29 97%	54 68%	~	~	~	~	~	7 70%	25 61%	63 68%	83 66%	6 75%	65 63%	31 82%
NO	46 32%	964 32%	30 91%	11 31%	4 9%	1 3%	25 32%	~	~	~	~	~	3 30%	16 39%	29 32%	43 34%	2 25%	39 38%	7 18%
NOT ANSWERED	4	57	1	1		2	1							3	1	4		3	1
VALID CASES	142	3050	33	35	44	30	79						10	41	92	126	8	104	38
NUMBER OF RESPONDENTS	146 100%	3107 100%	34 100%	36 100%	44 100%	32 100%	80 100%						10 100%	44 100%	93 100%	130 100%	8 100%	107 100%	39 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND #	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q36 NEVER	2 2%	25 1%	1 33%~	1 ~	1 3%~	1 ~	1 2%~	~	~	~	~	~	~	1 4%~	1 2%~	2 2%~	~	2 3%~	~
SOMETIMES	2 2%	112 5%*	~	1 4%~	1 3%~	~	1 2%~	~	~	~	~	~	~	1 4%~	1 2%~	2 2%~	~	1 2%~	1 3%
USUALLY	17 18%	405 20%	1 33%~	4 17%~	7 18%~	5 17%~	10 19%~	~	~	~	~	~	~	5 20%~	11 18%~	14 17%~	3 50%~	8 12%~	9 30%
ALWAYS	74 78%	1518 74%	1 33%~	18 78%~	31 78%~	24 83%~	41 77%~	~	~	~	~	~	7 ~100%~	18 72%~	49 79%~	64 78%~	3 50%~	54 83%~	20 67%
#ALWAYS + USUALLY (NET)	91 96%	1923 93%	2 67%~	22 96%~	38 95%~	29 100%~	51 96%~	~	~	~	~	~	7 ~100%~	23 92%~	60 97%~	78 95%~	6 100%~	62 95%~	29 97%
TOP BOX SCORE	74 78%	1518 74%	1 33%~	18 78%~	31 78%~	24 83%~	41 77%~	~	~	~	~	~	7 ~100%~	18 72%~	49 79%~	64 78%~	3 50%~	54 83%~	20 67%
NOT ANSWERED		1 26		1			1								1	1			1
VALID CASES	95	2060	3	23	40	29	53						7	25	62	82	6	65	30
NUMBER OF RESPONDENTS	96 100%	2086 100%	3 100%	24 100%	40 100%	29 100%	54 100%						7 100%	25 100%	63 100%	83 100%	6 100%	65 100%	31 100%

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

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

	BANT	BANT	AGE				RACE					ETHNIC-	HEALTH		CCC				
	OT1	OT2	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND NATV #	AMER IND/ ALSK ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q37 NEVER	3 2%	72 2%	2 6%	1 ~	1 2%	1 ~	1 1%	~	~	~	~	~	2 5%	1 1%	3 2%	~	3 3%	~	
SOMETIMES	7 5%	238 8%	1 3%	1 3%	2 5%	3 10%	1 1%*	~	~	~	~	~	1 10%	4 9%	2 2%	4 3%	2 25%	4 4%	3 8%
USUALLY	32 22%	692 23%	9 26%	7 19%	9 20%	7 23%	15 19%	~	~	~	~	~	2 20%	12 28%	19 21%	30 23%	2 25%	27 25%	5 13%
ALWAYS	102 71%	2035 67%	22 65%	28 78%	32 73%	20 67%	62 78%*	~	~	~	~	~	7 70%	25 58%	70 76%	91 71%	4 50%	72 68%	30 79%
#ALWAYS + USUALLY (NET)	134 93%	2727 90%	31 91%	35 97%	41 93%	27 90%	77 97%*	~	~	~	~	~	9 90%	37 86%	89 97%*	121 95%	6 75%	99 93%	35 92%
TOP BOX SCORE	102 71%	2035 67%	22 65%	28 78%	32 73%	20 67%	62 78%*	~	~	~	~	~	7 70%	25 58%	70 76%	91 71%	4 50%	72 68%	30 79%
NOT ANSWERED	2	70				2	1						1	1	2		1	1	
VALID CASES	144	3037	34	36	44	30	79					10	43	92	128	8	106	38	
NUMBER OF RESPONDENTS	146	3107	34	36	44	32	80					10	44	93	130	8	107	39	
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND#	AMER IND/ALSK##	OTHR##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q38 #YES	120 85%	2662 87%	32 94%~	33 94%~	35 83%~	20 67%~	66 84%	~	~	~	~	~	9 90%~	38 88%~	78 85%~	109 85%~	7 88%~	88 85%~	32 84%
NO	21 15%	384 13%	2 6%~	2 6%~	7 17%~	10 33%~	13 16%	~	~	~	~	~	1 10%~	5 12%~	14 15%~	19 15%~	1 13%~	15 15%~	6 16%
NOT ANSWERED		5 61		1	2	2	1							1	1	2		4	1
VALID CASES	141	3046	34	35	42	30	79						10	43	92	128	8	103	38
NUMBER OF RESPONDENTS	146	3107	34	36	44	32	80						10	44	93	130	8	107	39
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND#	AMER IND/PAC ALSK##	OTHR##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q39 YES	39 28%	1240 41%*	9 27%~	8 23%~	14 33%~	8 27%~	24 30%	~	~	~	~	~	3 30%~	10 24%~	28 30%~	32 25%~	6 75%~	20 20%~	19 50%
NO	101 72%	1789 59%*	24 73%~	27 77%~	28 67%~	22 73%~	55 70%	~	~	~	~	~	7 70%~	32 76%~	64 70%~	95 75%~	2 25%~	82 80%~	19 50%
NOT ANSWERED	6	78	1	1	2	2	1							2	1	3		5	1
VALID CASES	140	3029	33	35	42	30	79						10	42	92	127	8	102	38
NUMBER OF RESPONDENTS	146	3107	34	36	44	32	80						10	44	93	130	8	107	39
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	NO CCC	CCC		
Q40 NEVER	2 5%	81 7%	~	1 13%	1 7%	~	2 8%	~	~	~	~	~	~	2 7%	1 3%	1 17%	~	2 11%	
SOMETIMES	5 13%	139 12%	~	1 13%	2 14%	2 25%	2 8%	~	~	~	~	~	2 20%	2 7%	4 13%	~	3 15%	2 11%	
USUALLY	9 23%	342 28%	~	1 13%	5 36%	3 38%	5 21%	~	~	~	~	1 33%	3 30%	6 21%	7 22%	2 33%	5 25%	4 21%	
ALWAYS	23 59%	645 53%	~	9 100%	5 63%	6 43%	3 38%	15 63%	~	~	~	~	2 67%	5 50%	18 64%	20 63%	3 50%	12 60%	11 58%
#ALWAYS + USUALLY (NET)	32 82%	987 82%	~	9 100%	6 75%	11 79%	6 75%	20 83%	~	~	~	~	3 100%	8 80%	24 86%	27 84%	5 83%	17 85%	15 79%
TOP BOX SCORE	23 59%	645 53%	~	9 100%	5 63%	6 43%	3 38%	15 63%	~	~	~	~	2 67%	5 50%	18 64%	20 63%	3 50%	12 60%	11 58%
NOT ANSWERED		33																	
VALID CASES	39	1207	9	8	14	8	24					3	10	28	32	6	20	19	
NUMBER OF RESPONDENTS	39 100%	1240 100%	9 100%	8 100%	14 100%	8 100%	24 100%					3 100%	10 100%	28 100%	32 100%	6 100%	20 100%	19 100%	

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND #	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q41 WORST PERSONAL DOCTOR POSSIBLE		6 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01	1 0.5%	4 0.1%	~	~	~	2%	~	~	~	~	~	~	~	2%	~	1 0.5%	~	1 0.6%
02	1 0.5%	12 0.3%	~	2%	~	~	1 0.9%	~	~	~	~	~	~	~	1 0.8%	1 0.5%	~	1 2%
03		23 0.5%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
04	1 0.5%	19 0.4%	~	~	2%	~	1 0.9%	~	~	~	~	~	~	~	1 0.8%	1 0.5%	~	1 2%
05	3 1%	105 2%	2%~	2%	~	2%	2%	~	~	~	~	~	~	2%~	2%	3 2%~	~	3 2%~
06	4 2%	97 2%	~	6%	~	2%	1 0.9%	~	~	~	~	~	7%~	1 2%	2 2%	3 2%~	~	3 2%~
07	12 6%	261 6%	5%~	2%	10%	6%	3 5%	~	~	~	~	~	~	3 5%	5 4%	10 5%~	~	10 6%~
08	26 13%	672 16%	20%~	10%	13%	8%	5 12%	~	~	~	~	~	20%~	3 13%	8 14%	18 12%~	23 38%~	3 13%~
09	35 17%	839 20%	2%~	10%	19%	11%	13 17%	~	~	~	~	~	20%~	3 18%	11 18%	24 17%~	32 38%~	3 17%~
BEST PERSONAL DOCTOR POSSIBLE	122 60%	2208 52%*	29 71%~	31 60%	36 58%	26 52%	70 61%	~	~	~	~	~	8 53%~	37 60%	80 60%	115 61%~	2 25%~	91 58%~
#8-10 (NET)	183 89%	3719 88%	38 93%~	46 88%	55 89%	44 88%	104 90%	~	~	~	~	~	14 93%~	56 90%	122 92%	170 90%~	8 100%~	139 89%~

Continued

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR- ##	AS- IAN ##	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	NO CCC	CCC
9-10 (NET)	157 77%	3047 72%	30 73%~	41 79%	47 76%	39 78%	90 78%	~	~	~	~	~	11 ~ 73%~	48 77%	104 78%	147 78%~	5 63%~	118 76%~	39 80%
NOT ANSWERED	18	191	1	4	5	8	9						1	3	11	14		15	3
VALID CASES	205	4246	41	52	62	50	115						15	62	133	189	8	156	49
NUMBER OF RESPONDENTS	223 100%	4437 100%	42 100%	56 100%	67 100%	58 100%	124 100%						16 100%	65 100%	144 100%	203 100%	8 100%	171 100%	52 100%
MEAN	9.14	8.98	9.32	9.08	9.18	9.00	9.18						9.13	9.13	9.20	9.16	8.88	9.13	9.14
p stat_(*=Sig @ p<=.05)		.109	~.728	.770	.437	.602	~	~	~	~	~	~	~.960	.423		~	~	~	~

[ASKED IF Q30 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE ##	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALS ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q42 YES	47 23%	1096 26%	3 7%	12 23%	20 32%	12 24%	35 31%*	~	~	~	~	~	4 ~ 27%	5 8%*	39 29%*	40 21%~	5 63%~	9 6%~	38 79%
NO	159 77%	3160 74%	38 93%~	40 77%	43 68%	38 76%	79 69%*	~	~	~	~	~	11 ~ 73%	58 92%*	94 71%*	150 79%~	3 38%~	149 94%~	10 21%
NOT ANSWERED	17	181	1	4	4	8	10						1	2	11	13		13	4
VALID CASES	206	4256	41	52	63	50	114						15	63	133	190	8	158	48
NUMBER OF RESPONDENTS	223 100%	4437 100%	42 100%	56 100%	67 100%	58 100%	124 100%						16 100%	65 100%	144 100%	203 100%	8 100%	171 100%	52 100%

[ASKED IF Q30 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND#	AMER IND/ALSK##	OTHR##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q43 #YES	40 89%	955 90%~100%	3 80%~	8 90%~	18 92%~	11 92%~	29 88%~	~	~	~	~	~	4 ~100%	4 80%~	34 92%~	34 87%~	4 100%~	8 100%~	32 86%
NO	5 11%	109 10%~	~	2 20%~	2 10%~	1 8%~	4 12%~	~	~	~	~	~	~	1 20%~	3 8%~	5 13%~	~	~	5 14%
NOT ANSWERED	2	32		2			2								2	1	1	1	1
VALID CASES	45	1064	3	10	20	12	33						4	5	37	39	4	8	37
NUMBER OF RESPONDENTS	47	1096	3	12	20	12	35						4	5	39	40	5	9	38
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND#	AMER IND/PAC ALSK##	OTHR##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q44 #YES	39 87%	906 85%~100%	3 82%~	9 84%~	16 92%~	11 92%~	27 82%~	~	~	~	~	~	4 ~100%	5 ~100%	32 86%~	32 84%~	5 100%	8 ~100%	31 84%
NO	6 13%	155 15%~	~	2 18%~	3 16%~	1 8%~	6 18%~	~	~	~	~	~	~	~	5 14%~	6 16%~	~	~	6 16%
NOT ANSWERED	2	35		1	1		2								2	2		1	1
VALID CASES	45	1061	3	11	19	12	33						4	5	37	38	5	8	37
NUMBER OF RESPONDENTS	47	1096	3	12	20	12	35						4	5	39	40	5	9	38
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD GOOD	FAIR & POOR	NO CCC	CCC
Q45 YES	39 15%	856 17%	3 6%	10 16%	12 15%	14 20%	31 22%*	~	~	~	~	5 25%~	2 2%*	37 22%*	34 14%~	5 45%~	14 7%*	25 42%	
NO	220 85%	4125 83%	44 94%~	51 84%	69 85%	56 80%	113 78%*	~	~	~	~	15 75%~	80 98%*	135 78%*	211 86%~	6 55%~	185 93%*	35 58%	
NOT ANSWERED		21 328	3	6	9	3								1	1		21		
VALID CASES	259	4981	47	61	81	70	144					20	82	172	245	11	199	60	
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144					20	82	173	246	11	220	60	
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q46 NEVER	6 15%	59 7%		4 ~ 40%	1 ~ 8%	1 ~ 7%	4 13%	~	~	~	~	~ 20%	~ 16%	6	5 15%	1 20%	1 7%	5 20%
SOMETIMES	8 21%	127 15%		1 ~ 10%	4 ~ 33%	3 ~ 21%	8 26%	~	~	~	~	~	~ 22%	8	6 18%	2 40%	2 14%	6 24%
USUALLY	6 15%	239 29%	1 33%	1 10%	1 8%	3 21%	4 13%	~	~	~	~	~ 20%	1 50%	5 14%	5 15%	1 20%	~	6 24%
ALWAYS	19 49%	410 49%	2 67%	4 40%	6 50%	7 50%	15 48%	~	~	~	~	~ 60%	3 50%	18 49%	18 53%	1 20%	11 79%	8 32%
#ALWAYS + USUALLY (NET)	25 64%	649 78%	3 100%	5 50%	7 58%	10 71%	19 61%	~	~	~	~	~ 80%	2 100%	23 62%	23 68%	2 40%	11 79%	14 56%
TOP BOX SCORE	19 49%	410 49%	2 67%	4 40%	6 50%	7 50%	15 48%	~	~	~	~	~ 60%	3 50%	18 49%	18 53%	1 20%	11 79%	8 32%
NOT ANSWERED		21																
VALID CASES	39	835	3	10	12	14	31					5	2	37	34	5	14	25
NUMBER OF RESPONDENTS	39 100%	856 100%	3 100%	10 100%	12 100%	14 100%	31 100%					5 100%	2 100%	37 100%	34 100%	5 100%	14 100%	25 100%

[ASKED IF Q45 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS- IAN ##	NATV HAW/ ILND NATV #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q47 NONE	4 11%	48 6%	~	22%~	8%~	8%~	2 7%	~	~	~	~	~	1 20%~	1 50%~	3 9%~	3 9%~	1 25%~	4 ~ 17%	
1 SPECIALIST	26 70%	509 61%~	3 100%~	6 67%~	8 67%~	9 69%~	21 72%~	~	~	~	~	~	3 60%~	1 50%~	25 71%~	25 76%~	1 25%~	13 100%~	13 54%
2	5 14%	170 20%~	~	~	2 17%~	3 23%~	4 14%~	~	~	~	~	~	1 20%~	~	5 14%~	5 15%~	~	~	5 ~ 21%
3		53 6%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
4		27 3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
5 OR MORE SPECIALISTS	2 5%	25 3%~	~	1 11%~	1 8%~	~	2 7%~	~	~	~	~	~	~	~	2 6%~	2 ~ 50%~	~	~	2 ~ 8%
NOT ANSWERED	2	24	~	1	~	1	2	~	~	~	~	~	~	~	2	1	1	1	1
VALID CASES	37	832	3	9	12	13	29	~	~	~	~	~	5	2	35	33	4	13	24
NUMBER OF RESPONDENTS	39	856	3	10	12	14	31	~	~	~	~	~	5	2	37	34	5	14	25
	100%	100%	100%	100%	100%	100%	100%	~	~	~	~	~	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND #	AMER IND/ALSK #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q48 WORST SPECIALIST POSSIBLE		7 0.9%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01		1 0.1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02		5 0.6%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03		7 0.9%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
04	1 3%	5 0.6%~	~	1 14%~	~	~	1 4%~	~	~	~	~	~	~	1 3%~	1 3%~	~	~	1 5%
05	1 3%	20 3%~	~	~	~	1 8%~	1 4%~	~	~	~	~	~	~	1 3%~	1 3%~	~	1 8%~	~
06	1 3%	24 3%~	~	~	1 9%~	~	1 4%~	~	~	~	~	~	~	1 3%~	~	1 33%~	~	1 5%
07	2 6%	51 7%~	~	1 14%~	~	1 8%~	2 7%~	~	~	~	~	~	~	2 6%~	1 3%~	1 33%~	1 8%~	1 5%
08	8 24%	135 17%~	1 33%~	1 14%~	2 18%~	4 33%~	7 26%~	~	~	~	~	~	~	8 25%~	8 27%~	~	3 23%~	5 25%
09	4 12%	171 22%~	~	1 14%~	2 18%~	1 8%~	3 11%~	~	~	~	~	1 25%~	~	4 13%~	4 13%~	~	2 15%~	2 10%
BEST SPECIALIST POSSIBLE	16 48%	353 45%~	2 67%~	3 43%~	6 55%~	5 42%~	12 44%~	~	~	~	~	3 75%~	1 100%~	15 47%~	15 50%~	1 33%~	6 46%~	10 50%

Continued

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
#8-10 (NET)	28 85%	659 85%~100%	3 71%~	5 91%~	10 83%~	10 81%~	22 ~	~	~	~	~	4 ~100%	1 ~100%	27 84%~	27 90%~	1 33%~	11 85%~	17 85%
9-10 (NET)	20 61%	524 67%~	2 67%~	4 57%~	8 73%~	6 50%~	15 56%~	~	~	~	~	4 ~100%	1 ~100%	19 59%~	19 63%~	1 33%~	8 62%~	12 60%
NOT ANSWERED		5																
VALID CASES	33	779	3	7	11	12	27					4	1	32	30	3	13	20
NUMBER OF RESPONDENTS	33	784	3	7	11	12	27					4	1	32	30	3	13	20
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%
MEAN	8.76	8.73	9.33	8.29	9.09	8.58	8.59					9.75	10.0	8.72	8.87	7.67	8.77	8.75
p_stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q49 YES	55 21%	1241 25%	12 26%	8 13%	21 26%	14 20%	29 20%	~	~	~	~	~	5 ~ 26%	20 24%	34 20%	52 21%	2 18%	34 17%*	21 35%
NO	202 79%	3699 75%	35 74%	52 87%	60 74%	55 80%	114 80%	~	~	~	~	~	14 ~ 74%	62 76%	136 80%	191 79%	9 82%	163 83%*	39 65%
NOT ANSWERED	23	369	3	7	9	4	1						1		3	3		23	
VALID CASES	257	4940	47	60	81	69	143						19	82	170	243	11	197	60
NUMBER OF RESPONDENTS	280 100%	5309 100%	50 100%	67 100%	90 100%	73 100%	144 100%						20 100%	82 100%	173 100%	246 100%	11 100%	220 100%	60 100%

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	NO CCC	CCC	
Q50 NEVER		36 3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	9 17%	228 19%	2 17%	3 38%	4 19%	~	5 18%	~	~	~	~	~	2 40%	2 10%	7 21%	9 18%	6 18%	3 15%	
USUALLY	15 28%	350 29%	1 8%	1 13%	8 38%	5 38%	7 25%	~	~	~	~	~	1 20%	7 35%	8 24%	13 25%	2 100%	8 24%	7 35%
ALWAYS	30 56%	598 49%	9 75%	4 50%	9 43%	8 62%	16 57%	~	~	~	~	~	2 40%	11 55%	18 55%	29 57%	~	20 59%	10 50%
#ALWAYS + USUALLY (NET)	45 83%	948 78%	10 83%	5 63%	17 81%	13 100%	23 82%	~	~	~	~	~	3 60%	18 90%	26 79%	42 82%	2 100%	28 82%	17 85%
TOP BOX SCORE	30 56%	598 49%	9 75%	4 50%	9 43%	8 62%	16 57%	~	~	~	~	~	2 40%	11 55%	18 55%	29 57%	~	20 59%	10 50%
NOT ANSWERED		1 29				1	1								1	1			1
VALID CASES	54	1212	12	8	21	13	28						5	20	33	51	2	34	20
NUMBER OF RESPONDENTS	55 100%	1241 100%	12 100%	8 100%	21 100%	14 100%	29 100%						5 100%	20 100%	34 100%	52 100%	2 100%	34 100%	21 100%

[ASKED IF Q49 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE					ETHNICITY	HEALTH STATUS		CCC SCREENER				
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q51 NEVER	1 2%	17 1%	~	~	1 5%	~	~	~	~	~	~	25%	~	3%	1 2%	~	~	1 5%	
SOMETIMES	3 6%	87 7%	2 17%	~	~	1 8%	2 7%	~	~	~	~	~	5%	2 6%	3 6%	~	3 9%	~	
USUALLY	10 19%	274 23%	1 8%	3 38%	4 21%	2 15%	5 18%	~	~	~	~	25%	1 21%	4 19%	6 16%	8 100%	2 ~	6 19%	4 20%
ALWAYS	38 73%	831 69%	9 75%	5 63%	14 74%	10 77%	21 75%	~	~	~	~	50%	2 74%	14 72%	23 76%	37 ~	~	23 72%	15 75%
#ALWAYS + USUALLY (NET)	48 92%	1105 91%	10 83%	8 100%	18 95%	12 92%	26 93%	~	~	~	~	75%	3 95%	18 91%	29 92%	45 100%	2 ~	29 91%	19 95%
TOP BOX SCORE	38 73%	831 69%	9 75%	5 63%	14 74%	10 77%	21 75%	~	~	~	~	50%	2 74%	14 72%	23 76%	37 ~	~	23 72%	15 75%
NOT ANSWERED	3	32			2	1	1					1	1	2	3		2	1	
VALID CASES	52	1209	12	8	19	13	28					4	19	32	49	2	32	20	
NUMBER OF RESPONDENTS	55 100%	1241 100%	12 100%	8 100%	21 100%	14 100%	29 100%					5 100%	20 100%	34 100%	52 100%	2 100%	34 100%	21 100%	

[ASKED IF Q49 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALS #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q52 YES	91 36%	1806 37%	19 41%	21 34%	24 31%	27 39%	52 36%	~	~	~	~	5 ~ 25%	31 39%	59 35%	86 36%	4 36%	68 35%	23 38%
NO	163 64%	3092 63%	27 59%	40 66%	54 69%	42 61%	91 64%	~	~	~	~	15 ~ 75%	49 61%	111 65%	155 64%	7 64%	126 65%	37 62%
NOT ANSWERED	26	411	4	6	12	4	1						2	3	5		26	
VALID CASES	254	4898	46	61	78	69	143					20	80	170	241	11	194	60
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144					20	82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

FQ53 IN THE LAST 6 MONTHS, HOW OFTEN WERE THE FORMS FROM YOUR CHILD'S HEALTH PLAN EASY TO FILL OUT?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
FQ53 NEVER	2 0.8%	83 2%	~	2%	1%	1	0.7%	~	~	~	~	~	1	1	2	~	2	1%
SOMETIMES	17 7%	357 7%	9%~	5%	5%	6	7%	~	~	~	~	5%	6	11	17	7%~	14	3
USUALLY	37 15%	646 13%	11%~	16%	14%	11	15%	~	~	~	~	5%	13	24	33	4	26	11
ALWAYS	196 78%	3743 78%	80%~	77%	79%	51	77%	~	~	~	~	89%	60	132	187	7	151	45
#ALWAYS + USUALLY (NET)	233 92%	4389 91%	91%~	93%	94%	62	92%	~	~	~	~	95%	73	156	220	11	177	56
TOP BOX SCORE	196 78%	3743 78%	80%~	77%	79%	51	77%	~	~	~	~	89%	60	132	187	7	151	45
NOT ANSWERED	2	69			1	1	1					1		2	2		1	1
VALID CASES	252	4829	46	61	77	68	142					19	80	168	239	11	193	59
NUMBER OF RESPONDENTS	254	4898	46	61	78	69	143					20	80	170	241	11	194	60
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-##	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q54 WORST HEALTH PLAN POSSIBLE	2 0.8%	17 0.3%	~	1 2%	~	1 1%	1 0.7%	~	~	~	~	~	~	~	2 1%	1 0.4%	1 9%	1 0.5%	1 2%
01		14 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02		21 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03	3 1%	35 0.7%	~	~	3 4%	~	3 2%	~	~	~	~	~	~	~	2 1%	2 0.8%	1 9%	1 0.5%	2 3%
04	2 0.8%	62 1%	~	~	1 1%	1 1%	2 1%	~	~	~	~	~	~	~	2 1%	2 0.8%	~	2 1%	~
05	10 4%	266 5%	~	3 5%	3 4%	4 6%	8 6%	~	~	~	~	~	~	1 1%	9 5%	10 4%	~	7 4%	3 5%
06	9 4%	237 5%	3 6%	3 5%	3 4%	~	6 4%	~	~	~	~	~	1 5%	2 2%	7 4%	8 3%	1 9%	5 3%	4 7%
07	23 9%	471 10%	4 9%	6 10%	10 13%	3 4%	15 11%	~	~	~	~	~	3 15%	5 6%	18 11%	21 9%	2 18%	17 9%	6 10%
08	53 21%	939 19%	9 19%	12 20%	16 21%	16 23%	30 21%	~	~	~	~	~	7 35%	12 15%	41 24%	51 21%	2 18%	37 19%	16 27%
09	47 19%	844 17%	7 15%	15 25%	16 21%	9 13%	30 21%	~	~	~	~	~	2 10%	14 17%	33 19%	46 19%	1 9%	39 20%	8 13%
BEST HEALTH PLAN POSSIBLE	105 41%	1982 41%	24 51%	20 33%	26 33%	35 51%	47 33%*	~	~	~	~	~	7 35%	47 58%*	57 33%*	101 42%	3 27%	85 44%	20 33%
#8-10 (NET)	205 81%	3765 77%	40 85%	47 78%	58 74%	60 87%	107 75%*	~	~	~	~	~	16 80%	73 90%*	131 77%*	198 82%	6 55%	161 83%	44 73%

Continued

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER IND/ PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	NO CCC	CCC	
9-10 (NET)	152 60%	2826 58%	31 66%	35 58%	42 54%	44 64%	77 54%*	~	~	~	~	~	9 45%	61 75%*	90 53%*	147 61%~	4 36%~	124 64%*	28 47%
NOT ANSWERED	26	421	3	7	12	4	2							1	2	4		26	
VALID CASES	254	4888	47	60	78	69	142					20	81	171	242	11	194	60	
NUMBER OF RESPONDENTS	280 100%	5309 100%	50 100%	67 100%	90 100%	73 100%	144 100%					20 100%	82 100%	173 100%	246 100%	11 100%	220 100%	60 100%	
MEAN	8.58	8.47	8.96	8.43	8.31	8.75	8.30					8.55	9.19	8.32	8.64	7.09	8.72	8.12	
p stat_(*=Sig @ p<=.05)		.310	~.460	.108	.346	.003*	~	~	~	~	~	~.000*	.000*	~	~	~.040*			

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q55 YES	102 40%	1910 39%	17 37%	25 42%	33 41%	27 39%	64 45%	~	~	~	~	~	10 53%	24 29%*	78 46%*	95 39%	7 64%	51 26%*	51 85%
NO	153 60%	3030 61%	29 63%	35 58%	47 59%	42 61%	79 55%	~	~	~	~	~	9 47%	58 71%*	92 54%*	148 61%	4 36%	144 74%*	9 15%
NOT ANSWERED	25	369	4	7	10	4	1						1		3	3		25	
VALID CASES	255	4940	46	60	80	69	143						19	82	170	243	11	195	60
NUMBER OF RESPONDENTS	280 100%	5309 100%	50 100%	67 100%	90 100%	73 100%	144 100%						20 100%	82 100%	173 100%	246 100%	11 100%	220 100%	60 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND #	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	NO CCC	CCC	
Q56 NEVER	4 4%	42 2%		3 ~ 12%~	1 3%~		3 5%~	~	~	~	~	~	1 10%~	~	4 5%~	3 3%~	1 14%~	2 4%	2 4%
SOMETIMES	12 12%	156 8%	4 24%~	4 16%~	3 9%~	1 4%~	9 14%~	~	~	~	~	~	1 10%~	1 4%~	11 14%~	11 12%~	1 14%~	8 16%	4 8%
USUALLY	30 30%	483 26%	4 24%~	6 24%~	10 30%~	10 38%~	17 27%~	~	~	~	~	~	2 20%~	10 42%~	20 26%~	25 27%~	5 71%~	13 26%	17 33%
ALWAYS	55 54%	1206 64%	9 53%~	12 48%~	19 58%~	15 58%~	34 54%~	~	~	~	~	~	6 60%~	13 54%~	42 55%~	55 59%~	~	27 54%	28 55%
#ALWAYS + USUALLY (NET)	85 84%	1689 90%	13 76%~	18 72%~	29 88%~	25 96%~	51 81%~	~	~	~	~	~	8 80%~	23 96%~	62 81%~	80 85%~	5 71%~	40 80%	45 88%
TOP BOX SCORE	55 54%	1206 64%	9 53%~	12 48%~	19 58%~	15 58%~	34 54%~	~	~	~	~	~	6 60%~	13 54%~	42 55%~	55 59%~	~	27 54%	28 55%
NOT ANSWERED		1 23				1	1								1	1		1	
VALID CASES	101	1887	17	25	33	26	63						10	24	77	94	7	50	51
NUMBER OF RESPONDENTS	102 100%	1910 100%	17 100%	25 100%	33 100%	27 100%	64 100%						10 100%	24 100%	78 100%	95 100%	7 100%	51 100%	51 100%

[ASKED IF Q55 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN ##	NATV ILND #	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q57 #YES	57 56%	1118 60%	11 69%~	10 40%~	22 67%~	14 52%~	32 51%~	~	~	~	~	~	6 60%~	15 63%~	42 55%~	54 57%~	3 43%~	27 54%	30 59%
NO	44 44%	755 40%	5 31%~	15 60%~	11 33%~	13 48%~	31 49%~	~	~	~	~	~	4 40%~	9 38%~	35 45%~	40 43%~	4 57%~	23 46%	21 41%
NOT ANSWERED	1	37	1				1							1	1			1	
VALID CASES	101	1873	16	25	33	27	63						10	24	77	94	7	50	51
NUMBER OF RESPONDENTS	102	1910	17	25	33	27	64						10	24	78	95	7	51	51
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND #	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q57A YES	211 84%	3983 82%	31 67%	52 87%	69 90%	59 86%	116 83%	~	~	~	~	~	20 ~100%	66 81%	142 85%	199 83%	11 100%	157 82%	54 90%
NO	41 16%	876 18%	15 33%	8 13%	8 10%	10 14%	23 17%	~	~	~	~	~	~	15 19%	26 15%	41 17%	~	35 18%	6 10%
NOT ANSWERED	28	450	4	7	13	4	5							1	5	6		28	
VALID CASES	252	4859	46	60	77	69	139						20	81	168	240	11	192	60
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALS #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q57B YES	157 62%	2993 61%	19 40%	36 61%	55 70%	47 67%	85 59%	~	~	~	~	~	12 60%	53 65%	101 59%	150 62%	6 55%	117 60%	40 67%
NO	98 38%	1901 39%	28 60%	23 39%	24 30%	23 33%	58 41%	~	~	~	~	~	8 40%	28 35%	70 41%	93 38%	5 45%	78 40%	20 33%
NOT ANSWERED	25	415	3	8	11	3	1							1	2	3		25	
VALID CASES	255	4894	47	59	79	70	143						20	81	171	243	11	195	60
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC	
Q57C NEVER	2 1%	52 2%	~	~	2%	2%	2%	~	~	~	~	~	~	2%	2	1%	~	2	2%
SOMETIMES	9 6%	168 6%	1 5%	1 3%	4 7%	3 7%	4 5%	~	~	~	~	~	5 9%	4 4%	9 6%	~	7 6%	2 5%	
USUALLY	21 13%	532 18%	2 11%	3 8%	7 13%	9 20%	12 14%	~	~	~	~	2 17%	5 9%	16 16%	19 13%	2 33%	16 14%	5 13%	
ALWAYS	124 79%	2201 75%	16 84%	32 89%	43 78%	33 72%	67 79%	~	~	~	~	10 83%	43 81%	79 78%	120 80%	4 67%	91 78%	33 83%	
#ALWAYS + USUALLY (NET)	145 93%	2733 93%	18 95%	35 97%	50 91%	42 91%	79 93%	~	~	~	~	12 100%	48 91%	95 94%	139 93%	6 100%	107 92%	38 95%	
TOP BOX SCORE	124 79%	2201 75%	16 84%	32 89%	43 78%	33 72%	67 79%	~	~	~	~	10 83%	43 81%	79 78%	120 80%	4 67%	91 78%	33 83%	
NOT ANSWERED		1 40				1												1	
VALID CASES	156	2953	19	36	55	46	85					12	53	101	150	6	116	40	
NUMBER OF RESPONDENTS	157 100%	2993 100%	19 100%	36 100%	55 100%	47 100%	85 100%					12 100%	53 100%	101 100%	150 100%	6 100%	117 100%	40 100%	

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND #	AMER IND/ALSK ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC	
Q57D NEVER	29 28%	609 28%	7 58%	8 32%	8 19%	6 23%	13 30%	~	~	~	~	~	1 10%	13 27%	16 28%	29 29%	~	27 34%	2 8%
SOMETIMES	11 10%	384 18%	~	~	8 19%	3 12%	7 16%	~	~	~	~	~	1 10%	3 6%	8 14%	11 11%	~	5 6%	6 24%
USUALLY	25 24%	484 22%	~	10 40%	7 17%	8 31%	8 18%	~	~	~	~	~	1 10%	16 33%	9 16%	22 22%	3 50%	18 23%	7 28%
ALWAYS	40 38%	716 33%	5 42%	7 28%	19 45%	9 35%	16 36%	~	~	~	~	~	7 70%	16 33%	24 42%	37 37%	3 50%	30 38%	10 40%
#ALWAYS + USUALLY (NET)	65 62%	1200 55%	5 42%	17 68%	26 62%	17 65%	24 55%	~	~	~	~	~	8 80%	32 67%	33 58%	59 60%	6 100%	48 60%	17 68%
TOP BOX SCORE	40 38%	716 33%	5 42%	7 28%	19 45%	9 35%	16 36%	~	~	~	~	~	7 70%	16 33%	24 42%	37 37%	3 50%	30 38%	10 40%
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	145	2639	32	35	37	41	94						10	33	111	140	5	112	33
NOT ANSWERED	30	477	6	7	11	6	6							1	5	7		28	2
VALID CASES	105	2193	12	25	42	26	44						10	48	57	99	6	80	25
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND #	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q57E EXTREMELY DIFFICULT	6 2%	164 3%	1 2%~	1 2%	3 4%	1 1%	2 1%	~	~	~	~	~	1 5%~	2 3%	4 2%	6 3%~	~	6 3%~	
01	5 2%	92 2%	~	1 2%	1 1%	3 4%	2 1%	~	~	~	~	~	~	3 4%	2 1%	5 2%~	~	5 2%~	
02	2 0.7%	75 1%	~	1 2%	~	1 1%	1 0.7%	~	~	~	~	~	~	~	2 1%~	2 0.8%~	~	2 0.9%~	
03	3 1%	133 3%*	~	~	~	3 4%	~	~	~	~	~	~	~	3 4%	~	3 1%~	~	3 1%~	
04	4 1%	87 2%	2 4%~	1 2%	~	1 1%	2 1%	~	~	~	~	~	1 5%~	1 1%	3 2%	4 2%~	~	4 2%~	
05	20 7%	371 7%	6 12%~	5 8%	4 5%	5 7%	14 10%	~	~	~	~	~	~	5 6%	15 9%	19 8%~	1 9%~	11 5%*	9 16%
06	9 3%	203 4%	1 2%~	1 2%	3 4%	4 6%	5 4%	~	~	~	~	~	1 5%~	2 3%	7 4%	9 4%~	~	6 3%	3 5%
07	14 5%	375 7%	3 6%~	2 3%	4 5%	5 7%	5 4%	~	~	~	~	~	1 5%~	5 6%	9 5%	13 5%~	1 9%~	13 6%	1 2%
09	91 34%	1657 33%	17 35%~	20 31%	33 39%	21 29%	41 30%	~	~	~	~	~	6 30%~	19 24%*	48 29%*	64 27%~	4 36%~	75 35%	16 28%
EXTREMELY EASY	117 43%	1890 37%	19 39%~	33 51%	37 44%	28 39%	66 48%	~	~	~	~	~	10 50%~	40 50%	76 46%	112 47%~	5 45%~	89 42%	28 49%
#8-10 (NET)	208 77%	3547 70%*	36 73%~	53 82%	70 82%	49 68%	107 78%	~	~	~	~	~	16 80%~	59 74%	124 75%	176 74%~	9 82%~	164 77%	44 77%
9-10 (NET)	208 77%	3547 70%*	36 73%~	53 82%	70 82%	49 68%	107 78%	~	~	~	~	~	16 80%~	59 74%	124 75%	176 74%~	9 82%~	164 77%	44 77%

Continued

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
88		1																	
NOT ANSWERED	9	261	1	2	5	1	6							2	7	9		6	3
VALID CASES	271	5047	49	65	85	72	138					20		80	166	237	11	214	57
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144					20		82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%					100%		100%	100%	100%	100%	100%	100%
MEAN	8.39	8.02	8.33	8.65	8.64	7.93	8.52					8.55		8.24	8.37	8.31	8.91	8.32	8.67
p stat_(*=Sig @ p<=.05)		.011*		~.339	.270	.058	.382	~	~	~	~	~		~.490	.856	~	~	~.259	

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK ##	OTHR MUL- TI ##	HIS- IC IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD POOR	FAIR & POOR	NO CCC	CCC	
Q58 EXCELLENT	119 46%	2100 43%	29 62%~	35 58%*	29 36%*	26 38%	70 49%	~	~	~	~	~	12 60%~	34 41%	84 49%	119 48%~	~	102 52%*	17 28%
VERY GOOD	86 33%	1734 35%	12 26%~	17 28%	28 35%	29 42%	47 33%	~	~	~	~	~	5 25%~	27 33%	58 34%	86 35%~	~	64 32%	22 37%
GOOD	41 16%	854 17%	6 13%~	5 8%*	20 25%*	10 14%	21 15%	~	~	~	~	~	2 10%~	17 21%	24 14%	41 17%~	~	26 13%	15 25%
FAIR	10 4%	210 4%	~	2 3%	4 5%	4 6%	5 3%	~	~	~	~	~	1 5%~	4 5%	6 3%	~	10 91%~	5 3%	5 8%
POOR	1 0.4%	17 0.3%	~	1 2%	~	~	1 0.7%	~	~	~	~	~	~	~	1 0.6%~	~	1 9%~	~	1 2%
#EXCELLENT + VERY GOOD + GOOD (NET)	246 96%	4688 95%	47 100%~	57 95%	77 95%	65 94%	138 96%	~	~	~	~	~	19 95%~	78 95%	166 96%	246 100%~	~	192 97%	54 90%
NOT ANSWERED	23	394	3	7	9	4												23	
VALID CASES	257	4915	47	60	81	69	144						20	82	173	246	11	197	60
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ILND #	AMER IND/PAC/ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC
Q59 EXCELLENT	119 46%	2151 44%	33 70%~	36 61%*	24 30%*	26 38%	64 45%	~	~	~	~	~	9 45%~	42 51%	77 45%	118 48%~	1 10%~	111 56%*	8 14%
VERY GOOD	79 31%	1382 28%	12 26%~	14 24%	30 37%	23 33%	42 29%	~	~	~	~	~	7 35%~	26 32%	51 30%	76 31%~	3 30%~	58 29%	21 36%
GOOD	38 15%	930 19%	2 4%~	7 12%	18 22%*	11 16%	23 16%	~	~	~	~	~	2 10%~	11 13%	27 16%	37 15%~	1 10%~	23 12%*	15 25%
FAIR	16 6%	366 7%	~	1 2%*	8 10%	7 10%	11 8%	~	~	~	~	~	1 5%~	3 4%	13 8%	12 5%~	4 40%~	5 3%*	11 19%
POOR	4 2%	88 2%	~	1 2%	1 1%	2 3%	3 2%	~	~	~	~	~	1 5%~	~	4 2%*	3 1%~	1 10%~	~	4 7%
#EXCELLENT + VERY GOOD + GOOD (NET)	236 92%	4463 91%	47 100%~	57 97%	72 89%	60 87%	129 90%	~	~	~	~	~	18 90%~	79 96%*	155 90%*	231 94%~	5 50%~	192 97%*	44 75%
NOT ANSWERED	24	392	3	8	9	4	1								1	1	23	1	
VALID CASES	256	4917	47	59	81	69	143						20	82	172	246	10	197	59
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR #	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
Q60 YES	50 20%	1056 22%	6 13%	10 17%	20 25%	14 20%	33 23%	~	~	~	~	~	7 35%	7 9%*	43 25%*	44 18%	6 55%	8 4%*	42 70%	
NO	205 80%	3853 78%	41 87%	50 83%	59 75%	55 80%	111 77%	~	~	~	~	~	13 65%	75 91%*	128 75%*	200 82%	5 45%	187 96%*	18 30%	
NOT ANSWERED	25	400	3	7	11	4								2	2				25	
VALID CASES	255	4909	47	60	79	69	144						20	82	171	244	11	195	60	
NUMBER OF RESPONDENTS	280 100%	5309 100%	50 100%	67 100%	90 100%	73 100%	144 100%						20 100%	82 100%	173 100%	246 100%	11 100%	220 100%	60 100%	

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE ##	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q61 YES	43 86%	843 81%	4 67%~	8 80%~	18 90%~	13 93%~	31 94%~	~	~	~	~	~	6 ~ 86%~	4 57%~	39 91%~	38 86%~	5 83%~	3 38%~	40 95%
NO	7 14%	192 19%	2 33%~	2 20%~	2 10%~	1 7%~	2 6%~	~	~	~	~	~	1 ~ 14%~	3 43%~	4 9%~	6 14%~	1 17%~	5 63%~	2 5%
NOT ANSWERED		21																	
VALID CASES	50	1035	6	10	20	14	33						7	7	43	44	6	8	42
NUMBER OF RESPONDENTS	50 100%	1056 100%	6 100%	10 100%	20 100%	14 100%	33 100%						7 100%	7 100%	43 100%	44 100%	6 100%	8 100%	42 100%

[ASKED IF Q60 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q62 YES	38 88%	748 91%	2 50%	7 88%	18 100%	11 85%	28 90%	~	~	~	~	~	5 83%	4 100%	34 87%	35 92%	3 60%	38 95%	
NO	5 12%	77 9%	2 50%	1 13%	~	2 15%	3 10%	~	~	~	~	~	1 17%	5 13%	3 8%	2 40%	3 100%	2 5%	
NOT ANSWERED		18																	
VALID CASES	43	825	4	8	18	13	31						6	4	39	38	5	3	40
NUMBER OF RESPONDENTS	43	843	4	8	18	13	31						6	4	39	38	5	3	40
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q60 = YES AND Q61 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND #	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q63 YES	42 16%	832 17%	2 4%	12 20%	19 24%*	9 13%	32 22%*	~	~	~	~	~	5 25%~	4 5%*	37 22%*	34 14%~	8 73%~	6 3%*	36 60%
NO	214 84%	4059 83%	45 96%~	48 80%	61 76%*	60 87%	112 78%*	~	~	~	~	~	15 75%~	78 95%*	135 78%*	211 86%~	3 27%~	190 97%*	24 40%
NOT ANSWERED	24	418	3	7	10	4									1	1		24	
VALID CASES	256	4891	47	60	80	69	144						20	82	172	245	11	196	60
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE ##	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q64 YES	37 93%	689 85%~	1 50%~	10 91%~	18 95%~	8 100%~	30 94%~	~	~	~	~	~	5 ~100%~	1 50%~	35 95%~	30 91%~	7 100%~	1 25%~	36 100%~
NO	3 8%	123 15%~	1 50%~	1 9%~	1 5%~	~	2 6%~	~	~	~	~	~	~	1 50%~	2 5%~	3 9%~	~	3 75%~	~
NOT ANSWERED	2	20		1		1								2		1	1	2	
VALID CASES	40	812	2	11	19	8	32						5	2	37	33	7	4	36
NUMBER OF RESPONDENTS	42	832	2	12	19	9	32						5	4	37	34	8	6	36
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q63 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE ##	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q65 YES	36 97%	662 97%	1 100%	10 100%	18 100%	7 88%	29 97%	~	~	~	~	~	5 100%	1 100%	34 97%	30 100%	6 86%	~	36 100%
NO	1 3%	19 3%	~	~	~	13 13%	1 3%	~	~	~	~	~	~	1 3%	~	1 14%	1 100%	~	1 100%
NOT ANSWERED		8																	
VALID CASES	37	681	1	10	18	8	30					5	1	35	30	7	1	36	
NUMBER OF RESPONDENTS	37	689	1	10	18	8	30					5	1	35	30	7	1	36	
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q63 = YES AND Q64 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS- IAN ##	NATV ILND #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q66 YES	20 8%	644 13%*	1 2%~	6 10%	7 9%	6 9%	13 9%	~	~	~	~	~	2 10%~	4 5%	15 9%	15 6%~	5 45%~	5 3%*	15 25%
NO	235 92%	4243 87%*	46 98%~	54 90%	73 91%	62 91%	130 91%	~	~	~	~	~	18 90%~	78 95%	156 91%	229 94%~	6 55%~	190 97%*	45 75%
NOT ANSWERED	25	422	3	7	10	5	1								2	2		25	
VALID CASES	255	4887	47	60	80	68	143						20	82	171	244	11	195	60
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q67 YES	16 80%	508 81%	~	5 83%	6 86%	5 83%	13 100%	~	~	~	~	~	2 100%	15 100%	12 80%	4 80%	1 20%	15 100%
NO	4 20%	121 19%	1 100%	1 17%	1 14%	1 17%	~	~	~	~	~	~	4 100%	3 20%	1 20%	4 80%	~	
NOT ANSWERED		15																
VALID CASES	20	629	1	6	7	6	13					2	4	15	15	5	5	15
NUMBER OF RESPONDENTS	20	644	1	6	7	6	13					2	4	15	15	5	5	15
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q66 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND #	AMER ALSK #	OTHR #	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q68 YES	15 94%	477 96%	~100%	~100%	~80%	4	12 92%	~	~	~	~	~100%	2	~	14 93%	12 100%	3 75%	15 ~100%	
NO	1 6%	22 4%	~	~	~20%	1	1 8%	~	~	~	~	~	~	~	1 7%	1 25%	1 100%	1	
NOT ANSWERED		9																	
VALID CASES	16	499	5	6	5	13						2		15	12	4	1	15	
NUMBER OF RESPONDENTS	16 100%	508 100%	5 100%	6 100%	5 100%	13 100%						2 100%		15 100%	12 100%	4 100%	1 100%	15 100%	

[ASKED IF Q66 = YES AND Q67 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE ##	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALS ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q69 YES	25 10%	558 11%	1 2%~	7 12%	13 16%*	4 6%	19 13%*	~	~	~	~	~	1 5%~	4 5%*	20 12%	21 9%~	4 40%~	5 3%*	20 34%
NO	229 90%	4342 89%	46 98%~	52 88%	66 84%*	65 94%	123 87%*	~	~	~	~	~	19 95%~	78 95%*	150 88%	223 91%~	6 60%~	190 97%*	39 66%
NOT ANSWERED	26	409	3	8	11	4	2							3	2	1	25	1	
VALID CASES	254	4900	47	59	79	69	142						20	82	170	244	10	195	59
NUMBER OF RESPONDENTS	280 100%	5309 100%	50 100%	67 100%	90 100%	73 100%	144 100%						20 100%	82 100%	173 100%	246 100%	11 100%	220 100%	60 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q70 YES	18 78%	389 72%	~	83%~	85%~	50%~	16 89%~	~	~	~	~	~	1 33%~	16 84%~	15 79%~	3 75%~	~	18 90%
NO	5 22%	149 28%	~	17%~	15%~	50%~	2 11%~	~	~	~	~	1 ~100%	2 67%~	3 16%~	4 21%~	1 25%~	3 100%	2 10%
NOT ANSWERED	2	20	1	1			1						1	1	2		2	
VALID CASES	23	538		6	13	4	18					1	3	19	19	4	3	20
NUMBER OF RESPONDENTS	25	558	1	7	13	4	19					1	4	20	21	4	5	20
	100%	100%		100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q69 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q71 YES	18 100%	357 93%	~100%	~100%	~100%	~100%	16 ~	~	~	~	~	~	~	1 ~100%	16 ~100%	15 ~100%	3 ~100%	~	18 ~100%
NO		27 7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		5																	
VALID CASES	18	384	5	11	2	16								1	16	15	3		18
NUMBER OF RESPONDENTS	18 100%	389 100%	5 100%	11 100%	2 100%	16 100%								1 100%	16 100%	15 100%	3 100%		18 100%

[ASKED IF Q69 = YES AND Q70 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND#	AMER IND/ALSK##	OTHR##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q72 YES	33 13%	813 17%	1 2%~	5 8%	18 23%*	9 13%	24 17%*	~	~	~	~	~	4 20%~	4 5%*	29 17%*	28 11%~	5 45%~	4 2%*	29 48%
NO	223 87%	4085 83%	46 98%~	55 92%	62 78%*	60 87%	120 83%*	~	~	~	~	~	16 80%~	78 95%*	143 83%*	217 89%~	6 55%~	192 98%*	31 52%
NOT ANSWERED	24	411	3	7	10	4									1	1		24	
VALID CASES	256	4898	47	60	80	69	144						20	82	172	245	11	196	60
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE ##	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q73 YES	28 85%	726 92%	~100%	5 94%	17 67%	6 88%	21	~	~	~	~	~100%	4	2	26	24	4	28	28
NO	5 15%	64 8%	100%	1 ~	1 6%	3 33%	3	~	~	~	~	~	~	2	3	4	1	4	1
NOT ANSWERED		23																	
VALID CASES	33	790	1	5	18	9	24					4	4	29	28	5	4	29	29
NUMBER OF RESPONDENTS	33	813	1	5	18	9	24					4	4	29	28	5	4	29	29
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q72 = YES]

NQ74 WHAT IS YOUR CHILD'S AGE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NQ74																		
3 YEARS OLD OR LESS	50 18%	908 17%	50 100%	~	~	~	23 16%	~	~	~	~	3 15%	17 21%	30 17%	47 19%	~	47 21%*	3 5%
4 TO 7 YEARS OLD	67 24%	1228 23%	~	67 ~100%	~	~	32 22%	~	~	~	~	5 25%	23 28%	37 21%	57 23%	3 27%	54 25%	13 22%
8 TO 12 YEARS OLD	90 32%	1650 31%	~	~	90 ~100%	~	47 33%	~	~	~	~	8 40%	22 27%	57 33%	77 31%	4 36%	62 28%*	28 47%
13 OR OLDER	73 26%	1523 29%	~	~	73 ~100%	~	42 29%	~	~	~	~	4 20%	20 24%	49 28%	65 26%	4 36%	57 26%	16 27%
VALID CASES	280	5309	50	67	90	73	144					20	82	173	246	11	220	60
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144					20	82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

NQ75 IS YOUR CHILD MALE OR FEMALE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NQ75 MALE	151 54%	2736 52%	24 48%	36 54%	54 60%	37 51%	81 56%	~	~	~	~	~	7 35%	46 56%	93 54%	134 54%	7 64%	111 50%*	40 67%
FEMALE	129 46%	2573 48%	26 52%	31 46%	36 40%	36 49%	63 44%	~	~	~	~	~	13 65%	36 44%	80 46%	112 46%	4 36%	109 50%*	20 33%
VALID CASES	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
NUMBER OF RESPONDENTS	280 100%	5309 100%	50 100%	67 100%	90 100%	73 100%	144 100%						20 100%	82 100%	173 100%	246 100%	11 100%	220 100%	60 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE ##	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALS ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q76 HISPANIC OR LATINO	82 32%	1726 35%	17 36%	23 38%	22 28%	20 29%	~	~	~	~	~	~	~100%	~	82	78	4	76	6
NOT HISPANIC OR LATINO	173 68%	3146 65%	30 64%	37 62%	57 72%	49 71%	143 100%	~	~	~	~	~	~100%	~100%	173	166	7	120	53
NOT ANSWERED	25	437	3	7	11	4	1									2		24	1
VALID CASES	255	4872	47	60	79	69	143						20	82	173	244	11	196	59
NUMBER OF RESPONDENTS	280 100%	5309 100%	50 100%	67 100%	90 100%	73 100%	144 100%						20 100%	82 100%	173 100%	246 100%	11 100%	220 100%	60 100%

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER PAC	IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.1 YES	203 73%	3787 71%	36 72%	47 70%	64 71%	56 77%	144 100%~	~	~	~	~	~	20 ~100%~	39 48%*	163 94%*	196 80%~	7 64%~	147 67%*	56 93%
NO	77 28%	1522 29%	14 28%	20 30%	26 29%	17 23%	~	~	~	~	~	~	43 52%*	10 6%*	50 20%~	4 36%~	73 33%*	4 7%	
VALID CASES	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
NUMBER OF RESPONDENTS	280 100%	5309 100%	50 100%	67 100%	90 100%	73 100%	144 100%						20 100%	82 100%	173 100%	246 100%	11 100%	220 100%	60 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q77.2 YES	7 3%	204 4%	3 6%	2 3%	2 2%	~	~	~	~	~	~	~ 10%	2 2%	5 3%	7 3%	~	7 3%	~	
NO	273 98%	5105 96%	47 94%	65 97%	88 98%	73 100%	144 100%	~	~	~	~	~ 90%	18 98%	80 97%	168 97%	239 97%	11 100%	213 97%	60 100%
VALID CASES	280	5309	50	67	90	73	144					20	82	173	246	11	220	60	
NUMBER OF RESPONDENTS	280 100%	5309 100%	50 100%	67 100%	90 100%	73 100%	144 100%					20 100%	82 100%	173 100%	246 100%	11 100%	220 100%	60 100%	

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

	BANT	BANT	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	OT1	OT2	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC	
Q77.3 YES	5 2%	184 3%*	2 4%	1 1%	1 1%	1 1%	~	~	~	~	~	~	1 5%	1 1%	4 2%	5 2%	~	4 2%	1 2%
NO	275 98%	5125 97%*	48 96%	66 99%	89 99%	72 99%	144 100%~	~	~	~	~	~	19 95%	81 99%	169 98%	241 98%	11 100%	216 98%	59 98%
VALID CASES	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE ##	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.4 YES	3 1%	83 2%	1 2%	~	1 1%	1 1%	~	~	~	~	~	~	2 ~ 10%	1 1%	2 1%	3 1%	~	3 ~ 1%	
NO	277 99%	5226 98%	49 98%	67 100%	89 99%	72 99%	144 100%	~	~	~	~	~	18 ~ 90%	81 99%	171 99%	243 99%	11 100%	217 99%	60 100%
VALID CASES	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
NUMBER OF RESPONDENTS	280 100%	5309 100%	50 100%	67 100%	90 100%	73 100%	144 100%						20 100%	82 100%	173 100%	246 100%	11 100%	220 100%	60 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER ALSK	OTH R	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.5 YES	25 9%	335 6%	3 6%	7 10%	8 9%	7 10%	~	~	~	~	~	17 85%	6 7%	19 11%	24 10%	1 9%	18 8%	7 12%
NO	255 91%	4974 94%	47 94%	60 90%	82 91%	66 90%	144 100%	~	~	~	~	3 15%	76 93%	154 89%	222 90%	10 91%	202 92%	53 88%
VALID CASES	280	5309	50	67	90	73	144					20	82	173	246	11	220	60
NUMBER OF RESPONDENTS	280 100%	5309 100%	50 100%	67 100%	90 100%	73 100%	144 100%					20 100%	82 100%	173 100%	246 100%	11 100%	220 100%	60 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.6 YES	27 10%	374 7%	3 6%	9 13%	10 11%	5 7%	~	~	~	~	~	~	1 5%	25 30%*	2 1%	25 10%~	2 18%~	23 10%	4 7%
NO	253 90%	4935 93%	47 94%	58 87%	80 89%	68 93%	144 100%~	~	~	~	~	~	19 95%~	57 70%*	171 99%*	221 90%~	9 82%~	197 90%	56 93%
VALID CASES	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
NUMBER OF RESPONDENTS	280 100%	5309 100%	50 100%	67 100%	90 100%	73 100%	144 100%						20 100%	82 100%	173 100%	246 100%	11 100%	220 100%	60 100%

Q78 WHAT IS YOUR AGE?

	BANT OT1	BANT OT2	AGE				RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ILND #	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q78 UNDER 18	6 2%	141 3%	2 4%~	2 3%	1 1%	1 1%	2 1%	~	~	~	~	~	~	4 5%	2 1%	6 2%~	~	6 3%~	~
18 TO 24	11 4%	161 3%	7 15%~	4 7%	~	~	8 6%	~	~	~	~	~	1 5%~	1 1%*	10 6%*	11 4%~	~	10 5%	1 2%
25 TO 34	83 32%	1564 32%	23 49%~	31 52%*	26 32%	3 4%*	46 32%	~	~	~	~	~	5 25%~	30 37%	53 31%	78 32%~	5 45%~	62 31%	21 35%
35 TO 44	77 30%	1821 37%*	12 26%~	10 17%*	31 38%	24 35%	37 26%	~	~	~	~	~	2 10%~	34 41%*	41 24%*	75 30%~	2 18%~	65 33%*	12 20%
45 TO 54	44 17%	797 16%	2 4%~	10 17%	12 15%	20 29%*	24 17%	~	~	~	~	~	8 40%~	11 13%	33 19%	41 17%~	3 27%~	30 15%	14 23%
55 TO 64	20 8%	266 5%	1 2%~	2 3%	3 4%	14 20%*	15 10%	~	~	~	~	~	3 15%~	1 1%*	19 11%*	19 8%~	1 9%~	13 7%	7 12%
65 TO 74	14 5%	116 2%*	~	1 2%*	6 7%	7 10%	11 8%	~	~	~	~	~	~	1 1%*	13 8%*	14 6%~	~	10 5%	4 7%
75 OR OLDER	2 0.8%	16 0.3%	~	~	2 2%~	~	1 0.7%	~	~	~	~	~	1 5%~	~	2 1%~	2 0.8%~	~	1 0.5%	1 2%
NOT ANSWERED	23	427	3	7	9	4												23	
VALID CASES	257	4882	47	60	81	69	144						20	82	173	246	11	197	60
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

Q79 ARE YOU MALE OR FEMALE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALS ##	OTHR MUL- TI ##	HIS- IC IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q79																			
MALE	34 13%	702 14%	4 9%	6 10%	13 16%	11 16%	21 15%	~	~	~	~	~	3 ~ 15%	6 8%*	27 16%	34 14%	11 ~	29 15%	5 8%
FEMALE	221 87%	4191 86%	43 91%	53 90%	67 84%	58 84%	123 85%	~	~	~	~	~	17 ~ 85%	74 93%*	146 84%	210 86%	11 100%	166 85%	55 92%
NOT ANSWERED	25	416	3	8	10	4								2		2		25	
VALID CASES	255	4893	47	59	80	69	144						20	80	173	244	11	195	60
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE				RACE						ETHNIC-	HEALTH		CCC				
	OT1	OT2				13	BLCK	AS-	NATV	AMER				EX &	FAIR	NO	CCC			
	CCC	OHP	<4	4-7	8-12	AND	OR	AFR-	IAN	ILND	NATV	ALSK	MUL-	HIS-	NOT	VERY	GOOD	POOR	CCC	CCC
	TOT	TOT				OVER	WHTE	##	##	#	##	##	TI	IC	PAN-	PAN-	GOOD	POOR	CCC	CCC
	CHLD	CHLD													IC	IC	GOOD	POOR		
Q80																				
8TH GRADE OR LESS	15 6%	479 10%*	2 4%~	2 3%	4 5%	7 10%	~	~	~	~	~	~	~	15 18%*	~	~	14 6%~	1 9%~	15 8%*	
SOME HIGH SCHOOL BUT DID NOT GRADUATE	28 11%	480 10%	3 6%~	9 15%	8 10%	8 12%	12 8%	~	~	~	~	~	~	1 5%~	14 17%	14 8%	28 11%~	~	22 11%	6 10%
HIGH SCHOOL GRADUATE OR GED	93 36%	1452 30%*	14 30%~	27 45%	31 38%	21 30%	53 37%	~	~	~	~	~	~	4 20%~	31 38%	61 35%	88 36%~	5 45%~	72 37%	21 35%
SOME COLLEGE OR 2-YEAR DEGREE	100 39%	1752 36%	23 49%~	18 30%	33 41%	26 38%	65 45%*	~	~	~	~	~	~	12 60%~	20 24%*	79 46%*	97 39%~	3 27%~	72 37%	28 47%
4-YEAR COLLEGE GRADUATE	16 6%	437 9%	4 9%~	2 3%	5 6%	5 7%	10 7%	~	~	~	~	~	~	3 15%~	2 2%*	14 8%*	15 6%~	1 9%~	12 6%	4 7%
MORE THAN 4-YEAR COLLEGE DEGREE	5 2%	238 5%*	1 2%~	2 3%	~	2 3%	4 3%	~	~	~	~	~	~	~	~	5 3%~	4 2%~	1 9%~	4 2%	1 2%
NOT ANSWERED	23	471	3	7	9	4														23
VALID CASES	257	4838	47	60	81	69	144							20	82	173	246	11	197	60
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144							20	82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%	100%

Q81 HOW ARE YOU RELATED TO THE CHILD?

	BANT OT1	BANT OT2	AGE				RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q81 MOTHER OR FATHER	219 88%	4466 93%*	45 96%~	51 86%	67 86%	56 86%	123 87%	~	~	~	~	~	11 69%~	75 93%	142 86%	209 87%~	10 100%~	172 89%	47 84%
GRANDPARENT	18 7%	186 4%*	1 2%~	4 7%	9 12%	4 6%	11 8%	~	~	~	~	~	4 25%~	2 2%*	16 10%*	18 8%~	~	12 6%	6 11%
AUNT OR UNCLE	2 0.8%	33 0.7%	~	~	1 1%	1 2%	~	~	~	~	~	~	2 2%	~	2 0.8%~	~	~	1 0.5%	1 2%
OLDER BROTHER OR SISTER		12 0.2%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
OTHER RELATIVE	1 0.4%	6 0.1%	~	2%	~	~	~	~	~	~	~	~	1 1%	~	1 0.4%~	~	~	1 0.5%	~
LEGAL GUARDIAN	7 3%	73 2%	1 2%~	1 2%	1 1%	4 6%	6 4%	~	~	~	~	~	~	1 1%	6 4%	7 3%~	~	5 3%	2 4%
SOMEONE ELSE	2 0.8%	33 0.7%	~	3%	~	~	1 0.7%	~	~	~	~	~	1 6%~	~	2 1%~	2 0.8%~	~	2 1%	~
NOT ANSWERED	31	500	3	8	12	8	3						4	1	7	7	1	27	4
VALID CASES	249	4809	47	59	78	65	141						16	81	166	239	10	193	56
NUMBER OF RESPONDENTS	280	5309	50	67	90	73	144						20	82	173	246	11	220	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE ##	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q82 YES	2 1%	101 3%	~	3%	~	2%	~	~	~	~	~	~	~	5%	~	1%	~	0.8%	3%
NO	160 99%	2894 97%	100%	97%	100%	98%	100%	~	~	~	~	~	100%	95%	100%	99%	100%	99%	97%
NOT ANSWERED	1	59			1										1	1		1	
VALID CASES	162	2995	30	38	45	49	99						12	43	118	155	7	127	35
NUMBER OF RESPONDENTS	163	3054	30	38	46	49	99						12	43	119	156	7	128	35
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.2 YES		31 31%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	2 100%	70 69%	~100%	1	~100%	1	~	~	~	~	~	~	2 ~100%	2 ~100%	2 ~100%	1 ~100%	1 ~100%	
VALID CASES	2	101		1		1							2	2	2	1	1	
NUMBER OF RESPONDENTS	2 100%	101 100%		1 100%		1 100%							2 100%	2 100%	2 100%	1 100%	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.

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALS	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.5 YES		6 6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	2 100%	95 94%	~100%	1	~100%	1	~	~	~	~	~	~	~	2	2	~100%	1	1
VALID CASES	2	101		1		1								2	2		1	1
NUMBER OF RESPONDENTS	2 100%	101 100%		1 100%		1 100%								2 100%	2 100%		1 100%	1 100%

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

NQ14 RATING OF ALL CHILD'S HEALTH CARE

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER	AS-IAN	NATV ILND	AMER PAC ALSK	OTHR	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC
NQ14 0-6	12 7%	286 8%	2 5%	3 7%	4 7%	3 6%	8 8%	~	~	~	~	~	2 4%	9 8%	10 6%	1 10%	9 7%	3 6%
7-8	51 28%	994 29%	14 38%	10 24%	15 28%	12 26%	27 27%	~	~	~	~	6 43%	15 29%	35 29%	46 28%	5 50%	36 28%	15 28%
9-10	117 65%	2180 63%	21 57%	29 69%	35 65%	32 68%	65 65%	~	~	~	~	8 57%	35 67%	76 63%	107 66%	4 40%	82 65%	35 66%
VALID CASES	180	3460	37	42	54	47	100					14	52	120	163	10	127	53
NUMBER OF RESPONDENTS	180 100%	3460 100%	37 100%	42 100%	54 100%	47 100%	100 100%					14 100%	52 100%	120 100%	163 100%	10 100%	127 100%	53 100%
MEAN	2.58	2.55	2.51	2.62	2.57	2.62	2.57					2.57	2.63	2.56	2.60	2.30	2.57	2.60
p stat_(*=Sig @ p<=.05)		.441	~	~	~.895	~	.744	~	~	~	~	~	.454	.430	~	~	~.771	

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC
NQ41																			
0-6	10 5%	266 6%	1 2%	5 10%	1 2%	3 6%	5 4%	~	~	~	~	~	1 7%	3 5%	6 5%	9 5%	~	7 4%	3 6%
7-8	38 19%	933 22%	10 24%	6 12%	14 23%	8 16%	20 17%	~	~	~	~	~	3 20%	11 18%	23 17%	33 17%	3 38%	31 20%	7 14%
9-10	157 77%	3047 72%	30 73%	41 79%	47 76%	39 78%	90 78%	~	~	~	~	~	11 73%	48 77%	104 78%	147 78%	5 63%	118 76%	39 80%
VALID CASES	205	4246	41	52	62	50	115						15	62	133	189	8	156	49
NUMBER OF RESPONDENTS	205 100%	4246 100%	41 100%	52 100%	62 100%	50 100%	115 100%						15 100%	62 100%	133 100%	189 100%	8 100%	156 100%	49 100%
MEAN	2.72	2.65	2.71	2.69	2.74	2.72	2.74						2.67	2.73	2.74	2.73	2.63	2.71	2.73
p stat_(*=Sig @ p<=.05)		.124	~.708	.647	.966		.517	~	~	~	~	~	~.881	.485		~	~	~	~

[ASKED IF Q30 = YES]

NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
NQ48 0-6	3 9%	69 9%	~	14%~	9%~	8%~	11%~	~	~	~	~	~	~	9%~	7%~	33%~	8%~	10%~
7-8	10 30%	186 24%	33%~	29%~	18%~	42%~	33%~	~	~	~	~	~	31%~	30%~	33%~	31%~	30%~	
9-10	20 61%	524 67%	67%~	57%~	73%~	50%~	56%~	~	~	~	~	100%~	100%~	59%~	63%~	33%~	62%~	60%~
VALID CASES	33	779	3	7	11	12	27					4	1	32	30	3	13	20
NUMBER OF RESPONDENTS	33	779	3	7	11	12	27					4	1	32	30	3	13	20
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%
MEAN	2.52	2.58	2.67	2.43	2.64	2.42	2.44					3.00	3.00	2.50	2.57	2.00	2.54	2.50
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

NQ54 RATING OF CHILD'S HEALTH PLAN

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NQ54																			
0-6	26 10%	652 13%	3 6%	7 12%	10 13%	6 9%	20 14%*	~	~	~	~	~	1 5%	3 4%*	22 13%*	23 10%	3 27%	16 8%	10 17%
7-8	76 30%	1410 29%	13 28%	18 30%	26 33%	19 28%	45 32%	~	~	~	~	~	10 50%	17 21%*	59 35%*	72 30%	4 36%	54 28%	22 37%
9-10	152 60%	2826 58%	31 66%	35 58%	42 54%	44 64%	77 54%*	~	~	~	~	~	9 45%	61 75%*	90 53%*	147 61%	4 36%	124 64%*	28 47%
VALID CASES	254	4888	47	60	78	69	142						20	81	171	242	11	194	60
NUMBER OF RESPONDENTS	254 100%	4888 100%	47 100%	60 100%	78 100%	69 100%	142 100%						20 100%	81 100%	171 100%	242 100%	11 100%	194 100%	60 100%
MEAN	2.50	2.44	2.60	2.47	2.41	2.55	2.40						2.40	2.72	2.40	2.51	2.09	2.56	2.30
p stat_(*=Sig @ p<=.05)		.241	~.701	.192	.423	.010*	~	~	~	~	~	~	~.000*	.000*	~	~	~.018*		

GETTING NEEDED CARE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NPRBSEE4 NQ46	2.13	2.27	2.67	1.90	2.08	2.21	2.10						2.40	2.50	2.11	2.21	1.60	2.57	1.88
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCARNES4 NQ15	2.57	2.49	2.65	2.64	2.50	2.53	2.58						2.64	2.56	2.58	2.60	2.00	2.62	2.45
p stat_(*=Sig @ p<=.05)	.108		~	~	.325		~.856	~	~	~	~	~	~	~.842	.934	~	~	~.108	
COMPOSITE	2.35	2.38	2.66	2.27	2.29	2.37	2.34	x	x	x	x	x	2.52	2.53	2.34	2.40	1.80	2.60	2.17
p stat_(*=Sig @ p<=.05)	.326		~	~	.244		~.678	~	~	~	~	~	~	~.000*	.667	~	~	~	~

GETTING CARE QUICKLY

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	ILND NATV	OTHR MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NCARSN4 NQ4	2.72	2.65	2.93	2.55	2.70	2.75	2.72					2.63	2.72	2.70	2.77	2.00	2.83	2.52	
p stat_(*=Sig @ p<=.05)	.361		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NAPGET4 NQ6	2.60	2.46	2.51	2.61	2.59	2.69	2.57					2.64	2.60	2.57	2.59	2.29	2.62	2.55	
p stat_(*=Sig @ p<=.05)	.016*		~	~	~	~	.613	~	~	~	~	~	~	.471	~	~	~	~	
COMPOSITE	2.66	2.56	2.72	2.58	2.65	2.72	2.65	x	x	x	x	x	2.63	2.66	2.63	2.68	2.14	2.72	2.53
p stat_(*=Sig @ p<=.05)	.003*		~	~	.808	~	.723	~	~	~	~	~	.899	.274	~	~	~	~	

HOW WELL DOCTORS COMMUNICATE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NDREXPL4 NQ32	2.78	2.75	2.79	2.89	2.75	2.66	2.82					2.90	2.71	2.83	2.81	2.38	2.77	2.79	
p stat_(*=Sig @ p<=.05)	.621		~	~	~		~.226	~	~	~	~	~	~.116		~	~	~	~	
NDRLSTN4 NQ33	2.78	2.77	2.74	2.89	2.75	2.73	2.85					2.90	2.63	2.86	2.79	2.63	2.75	2.84	
p stat_(*=Sig @ p<=.05)	.782		~	~	~		~.076	~	~	~	~	~	~.023*		~	~	~	~	
NDRESPU4 NQ34	2.87	2.81	2.79	3.00	2.84	2.83	2.86					2.90	2.86	2.87	2.88	2.75	2.86	2.89	
p stat_(*=Sig @ p<=.05)	.109		~	~	~		~.820	~	~	~	~	~	~.954		~	~	~	~	
NDRTMEN4 NQ37	2.64	2.57	2.56	2.75	2.66	2.57	2.76					2.60	2.44	2.73	2.66	2.25	2.61	2.71	
p stat_(*=Sig @ p<=.05)	.194		~	~	~		~.011*	~	~	~	~	~	~.033*		~	~	~	~	
COMPOSITE	2.77	2.72	2.72	2.88	2.75	2.70	2.82	x	x	x	x	x	2.83	2.66	2.82	2.78	2.50	2.75	2.81
p stat_(*=Sig @ p<=.05)	.249		~	~	~		~.068	~	~	~	~	~	~.031*		~	~	~	~	

CUSTOMER SERVICE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NPBCLCS4 NQ50	2.39	2.28	2.58	2.13	2.24	2.62	2.39						2.00	2.45	2.33	2.39	2.00	2.41	2.35
p stat_(*=Sig @ p<=.05)	.286		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ51	2.65	2.60	2.58	2.63	2.68	2.69	2.68						2.25	2.68	2.63	2.67	2.00	2.63	2.70
p stat_(*=Sig @ p<=.05)	.547		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.52	2.44	2.58	2.38	2.46	2.65	2.54	x	x	x	x	x	2.13	2.57	2.48	2.53	2.00	2.52	2.53
p stat_(*=Sig @ p<=.05)	.338		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	ILND NATV	OTHR MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NNRXWHY NQ11	2.92	2.87	2.75	3.00	2.89	3.00	2.94					3.00	3.00	2.95	2.96	3.00	2.83	3.00	
p stat_(*=Sig @ p<=.05)	.384		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NNRXWYNT NQ12	2.54	2.42	2.50	3.00	2.47	2.33	2.58					2.75	2.14	2.63	2.57	2.33	2.39	2.66	
p stat_(*=Sig @ p<=.05)	.306		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NRXBST NQ13	2.61	2.58	2.25	2.80	2.78	2.47	2.63					2.50	2.43	2.62	2.65	1.67	2.57	2.64	
p stat_(*=Sig @ p<=.05)	.784		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.69	2.62	2.50	2.93	2.72	2.60	2.71	x	x	x	x	x	2.75	2.52	2.73	2.73	2.33	2.59	2.77
p stat_(*=Sig @ p<=.05)	.390		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

ACCESS TO SPECIALIZED SERVICES

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NEZMDEQ NQ20	2.20	2.30	2.33	1.50	3.00	3.00	2.33						3.00	2.33		2.71	1.00	2.00	2.33
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTHP NQ23	2.23	2.19	1.00	1.75	2.70	2.33	2.23						2.00	2.00	2.19	2.28	1.00	2.43	2.13
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTC NQ26	2.43	2.18		2.29	2.44	2.50	2.52						2.25	2.25	2.43	2.46	2.17	2.71	2.36
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.29	2.22	1.67	1.85	2.71	2.61	2.36	x	x	x	x	x	2.42	2.13	2.32	2.49	1.39	2.38	2.27
p stat_(*=Sig @ p<=.05)		.303	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

	BANTO T1	BANTO T2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
PRBSEE4 Q46	64%	78%	100%	50%	58%	71%	61%						80%	100%	62%	68%	40%	79%	56%
CARNES4 Q15	92%	89%	95%	90%	91%	91%	91%						93%	94%	91%	93%	70%	93%	89%
AVERAGE	77.88	83.54	97.30	70.24	74.54	81.46	76.15	x	x	x	x	x	86.43	97.12	76.50	80.45	55.00	85.74	72.34

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

	BANTO T1	BANTO T2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
CARSN4 Q4	93%	91%	100%	85%	95%	95%	88%						100%	100%	91%	95%	67%	96%	89%
APGET4 Q6	90%	86%	86%	88%	93%	94%	88%						100%	92%	89%	91%	71%	91%	88%
AVERAGE	91.84	88.77	93.24	86.40	94.09	94.64	88.09	x	x	x	x	x	100.0	95.83	89.78	93.11	69.05	93.60	88.19

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
DREXPL4 Q32	96%	95%	97%	97%	93%	97%	95%						100%	98%	96%	97%	88%	96%	95%
DRLSTN4 Q33	96%	95%	94%	97%	93%	100%	97%						100%	91%	98%	95%	100%	95%	97%
DRESPU4 Q34	97%	96%	97%	100%	93%	97%	95%						100%	98%	96%	96%	100%	96%	97%
DRTMEN4 Q37	93%	90%	91%	97%	93%	90%	97%						90%	86%	97%	95%	75%	93%	92%
AVERAGE	95.3	94.0	94.9	97.9	93.2	95.8	96.2	x	x	x	x	x	97.5	93.0	96.5	95.7	90.6	95.3	95.4

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

	BANTO T1	BANTO T2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
PBCLCS4 Q50	83%	78%	83%	63%	81%	100%	82%						60%	90%	79%	82%	100%	82%	85%
CSRESP Q51	92%	91%	83%	100%	95%	92%	93%						75%	95%	91%	92%	100%	91%	95%
AVERAGE	87.82	84.81	83.33	81.25	87.84	96.15	87.50	x	x	x	x	x	67.50	92.37	84.71	87.09	100.0	86.49	90.00

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NRXWHY Q11	96%	94%	88%	100%	95%	100%	97%						100%	100%	98%	98%	100%	91%	100%
NRXWYNT Q12	77%	71%	75%	100%	74%	67%	79%						88%	57%	81%	79%	67%	70%	83%
RXBST Q13	80%	79%	63%	90%	89%	73%	81%						75%	71%	81%	83%	33%	78%	82%
AVERAGE	84.5	81.2	75.0	96.7	85.8	80.0	85.6	x	x	x	x	x	87.5	76.2	86.7	86.4	66.7	79.7	88.3

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
EZMDEQ Q20	60%	76%	67%	25%	100%	100%	67%						100%	67%		86%	0%	50%	67%
EZTHP Q23	68%	72%	0%	38%	90%	100%	69%						50%	50%	69%	72%	0%	71%	67%
EZTC Q26	80%	71%		71%	81%	83%	84%						75%	75%	80%	79%	83%	86%	79%
AVERAGE	69.4	72.8	33.3	44.6	90.4	94.4	73.3	x	x	x	x	x	75.0	62.5	71.8	78.8	27.8	69.0	70.6

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
DRTLKU Q38	85%	87%	94%	94%	83%	67%	84%						90%	88%	85%	85%	85%	88%	85%	84%
DRUNCON Q43	89%	90%	100%	80%	90%	92%	88%						100%	80%	92%	87%	100%	100%	86%	
DRUNFAM Q44	87%	85%	100%	82%	84%	92%	82%						100%	100%	86%	84%	100%	100%	84%	
AVERAGE	86.9	87.5	98.0	85.4	85.8	83.3	84.4	x	x	x	x	x	96.7	89.5	87.7	85.5	95.8	95.1	84.8	

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	CCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
HELPCONT Q18	93%	92%	100%	86%	100%	100%					100%	50%	100%	92%	100%	86%	100%		
HLPCOORD Q29	58%	62%	75%	56%	47%	69%	55%				67%	56%	58%	58%	50%	71%	50%		
AVERAGE	75.7	77.1	87.5	70.6	73.5	84.6	77.6	x	x	x	x	x	83.3	52.8	78.8	75.0	75.0	78.2	75.0

INDEX OF ADULT TABLES

PAGE QUESTION TITLE

1. INTRODUCTION

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

2. YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

3. YOUR PERSONAL DOCTOR

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

4. GETTING HEALTH CARE FROM SPECIALISTS

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

PAGE QUESTION TITLE

5. YOUR HEALTH PLAN

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

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

5. ADDITIONAL QUESTIONS

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

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

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

42 Q35H IN THE LAST 6 MONTHS, DID YOU FEEL YOU COULD TRUST A DOCTOR OR OTHER HEALTH PROVIDER WITH YOUR MEDICAL CARE?

5. ACCESS TO DENTAL CARE

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

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

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

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

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

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

PAGE QUESTION TITLE

6. ABOUT YOU

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

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

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

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

53 Q40 IN THE LAST 6 MONTHS, HOW OFTEN WERE YOU ADVISED TO QUIT SMOKING OR USING TOBACCO BY A DOCTOR OR OTHER HEALTH PROVIDER IN YOUR PLAN? [ASKED IF Q39 = EVERY DAY OR SOME DAYS]

54 Q41 IN THE LAST 6 MONTHS, HOW OFTEN WAS MEDICATION RECOMMENDED OR DISCUSSED BY A DOCTOR OR HEALTH PROVIDER TO ASSIST YOU WITH QUITTING SMOKING OR USING TOBACCO? EXAMPLES OF MEDICATION ARE: NICOTINE GUM, PATCH, NASAL SPRAY, INHALER, OR PRESCRIPTION MEDICATION. [ASKED IF Q39 = EVERY DAY OR SOME DAYS]

55 Q42 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR DOCTOR OR HEALTH PROVIDER DISCUSS OR PROVIDE METHODS AND STRATEGIES OTHER THAN MEDICATION TO ASSIST YOU WITH QUITTING SMOKING OR USING TOBACCO? EXAMPLES OF METHODS AND STRATEGIES ARE: TELEPHONE HELPLINE, INDIVIDUAL OR GROUP COUNSELING, OR CESSATION PROGRAM. [ASKED IF Q39 = EVERY DAY OR SOME DAYS]

56 Q43 DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?

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

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

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

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

INDEX OF CHILD TABLES

PAGE QUESTION TITLE

1. INTRODUCTION

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

2. YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

3. SPECIALIZED SERVICES

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

19 Q20 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET SPECIAL MEDICAL EQUIPMENT OR DEVICES FOR YOUR CHILD? [ASKED IF Q19 = YES]

20 Q21 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE, OR CLINIC HELP YOU GET SPECIAL MEDICAL EQUIPMENT OR DEVICES FOR YOUR CHILD? [ASKED IF Q19 = YES]

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

22 Q23 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THIS THERAPY FOR YOUR CHILD? [ASKED IF Q22 = YES]

23 Q24 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE OR CLINIC HELP YOU GET THIS THERAPY FOR YOUR CHILD? [ASKED IF Q22 = YES]

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

25 Q26 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THIS TREATMENT OR COUNSELING FOR YOUR CHILD? [ASKED IF Q25 = YES]

26 Q27 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE OR CLINIC HELP YOU GET THIS TREATMENT OR COUNSELING FOR YOUR CHILD? [ASKED IF Q25 = YES]

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

28 Q29 IN THE LAST 6 MONTHS, DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE, OR CLINIC HELP COORDINATE YOUR CHILD'S CARE AMONG THESE DIFFERENT PROVIDERS OR SERVICES? [ASKED IF Q28 = YES]

PAGE QUESTION TITLE

4. YOUR CHILD'S PERSONAL DOCTOR

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

30 Q31 IN THE LAST 6 MONTHS, HOW MANY TIMES DID YOUR CHILD VISIT HIS OR HER PERSONAL DOCTOR FOR CARE? [ASKED IF Q30 = YES]

31 Q31A IN THE LAST 6 MONTHS, HOW OFTEN DID YOU HAVE A HARD TIME SPEAKING WITH OR UNDERSTANDING YOUR CHILD'S PERSONAL DOCTOR BECAUSE YOU SPOKE DIFFERENT LANGUAGES? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]

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

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

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

5. GETTING HEALTH CARE FROM SPECIALISTS

- 45 Q45 SPECIALISTS ARE DOCTORS LIKE SURGEONS, HEART DOCTORS, ALLERGY DOCTORS, SKIN DOCTORS, AND OTHER DOCTORS WHO SPECIALIZE IN ONE AREA OF HEALTH CARE. IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS FOR YOUR CHILD TO SEE A SPECIALIST?
- 46 Q46 IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT FOR YOUR CHILD TO SEE A SPECIALIST AS SOON AS YOU NEEDED? [ASKED IF Q45 = YES]
- 47 Q47 HOW MANY SPECIALISTS HAS YOUR CHILD SEEN IN THE LAST 6 MONTHS? [ASKED IF Q45 = YES]
- 48 Q48 WE WANT TO KNOW YOUR RATING OF THE SPECIALIST YOUR CHILD SAW MOST OFTEN IN THE LAST 6 MONTHS. USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST SPECIALIST POSSIBLE AND 10 IS THE BEST SPECIALIST POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE THAT SPECIALIST? [ASKED IF Q45 = YES AND Q47 >= 1 SPECIALIST]

6. YOUR CHILD'S HEALTH PLAN

- 49 Q49 IN THE LAST 6 MONTHS, DID YOU GET INFORMATION OR HELP FROM CUSTOMER SERVICE AT YOUR CHILD'S HEALTH PLAN?
- 50 Q50 IN THE LAST 6 MONTHS, HOW OFTEN DID CUSTOMER SERVICE AT YOUR CHILD'S HEALTH PLAN GIVE YOU THE INFORMATION OR HELP YOU NEEDED? [ASKED IF Q49 = YES]
- 51 Q51 IN THE LAST 6 MONTHS, HOW OFTEN DID CUSTOMER SERVICE STAFF AT YOUR CHILD'S HEALTH PLAN TREAT YOU WITH COURTESY AND RESPECT? [ASKED IF Q49 = YES]
- 52 Q52 IN THE LAST 6 MONTHS, DID YOUR CHILD'S HEALTH PLAN GIVE YOU ANY FORMS TO FILL OUT?
- 53 PQ53 IN THE LAST 6 MONTHS, HOW OFTEN WERE THE FORMS FROM YOUR CHILD'S HEALTH PLAN EASY TO FILL OUT? [ASKED IF Q52 = YES. RESPONSE OF 'ALWAYS' PADDED WITH Q52 = NO]
- 54 Q54 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH PLAN POSSIBLE AND 10 IS THE BEST HEALTH PLAN POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR CHILD'S HEALTH PLAN?

PAGE QUESTION TITLE

7. PRESCRIPTION MEDICINES

- 55 Q55 IN THE LAST 6 MONTHS, DID YOU GET OR REFILL ANY PRESCRIPTION MEDICINES FOR YOUR CHILD?
- 56 Q56 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET PRESCRIPTION MEDICINES FOR YOUR CHILD THROUGH HIS OR HER HEALTH PLAN? [ASKED IF Q55 = YES]
- 57 Q57 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE, OR CLINIC HELP YOU GET YOUR CHILD'S PRESCRIPTION MEDICINES? [ASKED IF Q55 = YES]

7. ACCESS TO DENTAL CARE

- 58 Q57A A REGULAR DENTIST IS ONE YOUR CHILD WOULD GO TO FOR CHECK-UPS AND CLEANINGS OR WHEN HE/SHE HAS A CAVITY OR TOOTH PAIN. DOES YOUR CHILD HAVE A REGULAR DENTIST?
- 59 Q57B IN THE LAST 6 MONTHS, DID YOUR CHILD GO TO A DENTIST'S OFFICE OR CLINIC FOR CARE?
- 60 Q57C IN THE LAST 6 MONTHS, HOW OFTEN DID THE DENTISTS OR DENTAL STAFF EXPLAIN WHAT THEY WERE DOING WHILE TREATING YOUR CHILD?
- 61 Q57D IN THE LAST 6 MONTHS, IF YOUR CHILD NEEDED TO SEE A DENTIST RIGHT AWAY BECAUSE OF A DENTAL EMERGENCY, DID HE/SHE GET TO SEE A DENTIST AS SOON AS YOU WANTED?
- 62 Q57E USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS EXTREMELY DIFFICULT AND 10 IS EXTREMELY EASY, WHAT NUMBER WOULD YOU USE TO RATE HOW EASY IT WAS FOR YOU TO FIND A DENTIST FOR YOUR CHILD?

8. ABOUT YOUR CHILD AND YOU

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

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

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

66 Q61 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q60 = YES]

67 Q62 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q60 = YES AND Q61 = YES]

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

69 Q64 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q63 = YES]

70 Q65 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q63 = YES AND Q64 = YES]

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

72 Q67 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q66 = YES]

73 Q68 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q66 = YES AND Q67 = YES]

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

75 Q70 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q69 = YES]

76 Q71 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q69 = YES AND Q70 = YES]

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

78 Q73 HAS THIS PROBLEM LASTED OR IS IT EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q72 = YES]

79 NQ74 WHAT IS YOUR CHILD'S AGE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]

80 NQ75 IS YOUR CHILD MALE OR FEMALE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]

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

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

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

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

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

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

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

88 Q78 WHAT IS YOUR AGE?

89 Q79 ARE YOU MALE OR FEMALE?

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

91 Q81 HOW ARE YOU RELATED TO THE CHILD?

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

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

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

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

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

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

9. RATINGS

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

10. COMPOSITES

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

11. GLOBAL PROPORTION COMPOSITES

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

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

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

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

SURVEY INSTRUCTIONS

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

Correct Mark 

Incorrect Marks   

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

Yes → *Go to Question 1*
 No

↓ **START HERE** ↓

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

- Yes → *Go to Question 3*
- No

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

YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

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

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



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

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

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

- Never
- Sometimes
- Usually
- Always

YOUR PERSONAL DOCTOR

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

- Yes
- No → Go to Question 24

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → Go to Question 23

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

- Never
- Sometimes
- Usually
- Always

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

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



GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

- Yes
 No → *Go to Question 28*

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

- Never
 Sometimes
 Usually
 Always

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

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

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

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

YOUR HEALTH PLAN

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

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

- Yes
 No → *Go to Question 30*

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

- Never
 Sometimes
 Usually
 Always

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

- Yes
 No → *Go to Question 33*

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

- Never
 Sometimes
 Usually
 Always

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

- Never
 Sometimes
 Usually
 Always

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

- Yes
 No → *Go to Question 35*

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

- Never
- Sometimes
- Usually
- Always

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

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

ADDITIONAL QUESTIONS

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes, definitely
- Yes, somewhat
- No

ACCESS TO DENTAL CARE

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

- Yes
- No



ABOUT YOU

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

- Yes
- No → *Go to Question 35l*

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

- Never
- Sometimes
- Usually
- Always

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

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

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

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

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

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

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

- Excellent
- Very Good
- Good
- Fair
- Poor

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

- Excellent
- Very Good
- Good
- Fair
- Poor

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

- Yes
- No
- Don't know

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

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

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

- Never
- Sometimes
- Usually
- Always



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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No
- Don't know

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

- Yes
- No
- Don't know

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

- Yes
- No

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

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

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

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

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

- Yes
- No → *Go to Question 50*

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

- Yes
- No

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

- Yes
- No → *Go to Question 52*

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

- Yes
- No

52. What is your age?

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



53. Are you male or female?

- Male
- Female

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

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

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

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

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

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

57. Did someone help you complete this survey?

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

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

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

THANK YOU

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

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

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



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

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

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SURVEY INSTRUCTIONS

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Correct
Mark 

Incorrect
Marks



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

- Yes → *Go to Question 1*
- No

↓ **START HERE** ↓

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

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

- Yes → *Go to Question 3*
- No

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

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

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

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

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

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

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

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

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

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

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

- 11. Did you and a doctor or other health provider talk about the reasons you might want your child to take a medicine?
 - Yes
 - No



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

- Yes
- No

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

- Yes
- No

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No

SPECIALIZED SERVICES

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

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

- Yes
- No → *Go to Question 22*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 25*



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 28*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 30*

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

- Yes
- No

YOUR CHILD'S PERSONAL DOCTOR

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

- Yes
- No → *Go to Question 45*

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

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

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

- Never
- Sometimes
- Usually
- Always

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

38. In the last 6 months, did your child's personal doctor talk with you about how your child is feeling, growing, or behaving?
- Yes
 - No
39. In the last 6 months, did your child get care from a doctor or other health provider besides his or her personal doctor?
- Yes
 - No → *Go to Question 41*
40. In the last 6 months, how often did your child's personal doctor seem informed and up-to-date about the care your child got from these doctors or other health providers?
- Never
 - Sometimes
 - Usually
 - Always
41. Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your child's personal doctor?
- 0 1 2 3 4 5 6 7 8 9 10
 Worst Personal Doctor Possible Best Personal Doctor Possible
42. Does your child have any medical, behavioral, or other health conditions that have lasted for more than 3 months?
- Yes
 - No → *Go to Question 45*

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?

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

YOUR CHILD'S HEALTH PLAN

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

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

- Yes
- No → *Go to Question 52*

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

- Never
- Sometimes
- Usually
- Always



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → **Go to Question 54**

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

- Never
- Sometimes
- Usually
- Always

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

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

PRESCRIPTION MEDICINES

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

- Yes
- No → **Go to Question 57a**

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

ACCESS TO DENTAL CARE

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

- Yes
- No

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

- Yes
- No → **Go to Question 57d**

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

- Never
- Sometimes
- Usually
- Always



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

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

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

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

ABOUT YOUR CHILD AND YOU

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Yes
- No → **Go to Question 63**

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

- Yes
- No → **Go to Question 63**

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

- Yes
- No

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

- Yes
- No → **Go to Question 66**

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

- Yes
- No → **Go to Question 66**

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

- Yes
- No

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

- Yes
- No → **Go to Question 69**

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

- Yes
- No → **Go to Question 69**



68. Is this a condition that has lasted or is expected to last for at least 12 months?
- Yes
 - No
69. Does your child need or get special therapy such as physical, occupational, or speech therapy?
- Yes
 - No → *Go to Question 72*
70. Is this because of any medical, behavioral, or other health condition?
- Yes
 - No → *Go to Question 72*
71. Is this a condition that has lasted or is expected to last for at least 12 months?
- Yes
 - No
72. Does your child have any kind of emotional, developmental, or behavioral problem for which he or she needs or gets treatment or counseling?
- Yes
 - No → *Go to Question 74*
73. Has this problem lasted or is it expected to last for at least 12 months?
- Yes
 - No

74. What is 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







897-12



12

CZPCE

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

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

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

INSTRUCCIONES PARA EL CUESTIONARIO

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

Marca
Correcta

Marca
Incorrecta

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

Sí ➔ *Pase a la Pregunta 1*
 No

↓ **COMIENCE AQUI** ↓

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

Sí ➔ *Pase a la pregunta 3*
 No

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

LA ATENCIÓN MÉDICA QUE USTED RECIBIÓ EN LOS ÚLTIMOS 6 MESES

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

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

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

LA ATENCIÓN MÉDICA QUE RECIBIÓ DE ESPECIALISTAS

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

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

Sí
 No → *Pase a la pregunta 28*

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

Nunca
 A veces
 La mayoría de las veces
 Siempre

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

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

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

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

SU PLAN DE SALUD

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

28. En los últimos 6 meses, ¿buscó alguna información en materiales escritos o en la Internet sobre cómo funciona su plan de salud?

Sí
 No → *Pase a la pregunta 30*

29. En los últimos 6 meses, ¿con qué frecuencia encontró la información que usted necesitaba sobre cómo funciona su plan de salud en materiales escritos o en la Internet?

Nunca
 A veces
 La mayoría de las veces
 Siempre

30. En los últimos 6 meses, ¿recibió información o ayuda de parte del servicio al cliente de su plan de salud?

Sí
 No → *Pase a la pregunta 33*

31. En los últimos 6 meses, ¿con qué frecuencia el servicio al cliente de su plan de salud le dio la información o ayuda que usted necesitaba?

Nunca
 A veces
 La mayoría de las veces
 Siempre

32. En los últimos 6 meses, ¿con qué frecuencia el personal de servicio al cliente de su plan de salud le trató con cortesía y respeto?

Nunca
 A veces
 La mayoría de las veces
 Siempre

33. En los últimos 6 meses, ¿le dio su plan de salud algún formulario para que lo llenara?

Sí
 No → *Pase a la pregunta 35*



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

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

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

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

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

- Sí
- No
- No sé

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

- Sí
- No
- No sé

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

- Sí
- No

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 50*

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 52*

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

- Sí
- No

52. ¿Qué edad tiene?

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



53. ¿Es usted hombre o mujer?

- Hombre
- Mujer

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

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

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

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

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

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

57. ¿Le ayudó alguien a completar esta encuesta?

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

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

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

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

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

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



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INSTRUCCIONES PARA EL CUESTIONARIO

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

Marca
Correcta ●

Marca
Incorrecta



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

- Sí ➔ *Pase a la Pregunta 1*
- No

↓ **COMIENCE AQUI** ↓

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

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

- Sí ➔ *Pase a la pregunta 3*
- No

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

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

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

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

7. En los últimos 6 meses, sin contar las veces en que su niño fue a una sala de emergencia, ¿cuántas veces fue su niño a un consultorio médico o a una clínica para que lo atendieran?
- Ninguna vez → *Pase a la pregunta 16*
 1 vez
 2
 3
 4
 5 a 9
 10 veces o más
8. En los últimos 6 meses, ¿hablaron usted y el doctor u otro profesional médico de su niño sobre cosas específicas que usted podría hacer para prevenir que su niño se enferme?
- Sí
 No
9. En los últimos 6 meses, ¿con qué frecuencia le contestaron sus preguntas los doctores u otros profesionales médicos de su niño?
- Nunca
 A veces
 La mayoría de las veces
 Siempre
10. En los últimos 6 meses, ¿hablaron usted y el doctor u otro profesional médico de su niño sobre comenzar o suspender una medicina recetada?
- Sí
 No → *Pase a la pregunta 14*
11. ¿Hablaron usted y un doctor u otro profesional médico sobre las razones por las que tal vez usted quiera que su niño tome una medicina?
- Sí
 No

12. ¿Hablaron usted y un doctor u otro profesional médico sobre las razones por las que tal vez usted no quiera que su niño tome una medicina?

- Sí
- No

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

- Sí
- No

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

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

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

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

16. ¿Está matriculado actualmente su niño en algún tipo de escuela o guardería/cuidado infantil?

- Sí
- No → *Pase a la pregunta 19*

17. En los últimos 6 meses, ¿necesitó que los doctores o los otros profesionales médicos de su niño se pusieran en contacto con una escuela o guardería acerca de la salud o la atención médica de su niño?

- Sí
- No → *Pase a la pregunta 19*

18. En los últimos 6 meses, ¿consiguió la ayuda de los doctores o los otros profesionales médicos de su niño que necesitaba para ponerse en contacto con la escuela o guardería de su niño?

- Sí
- No

SERVICIOS ESPECIALIZADOS

19. En el equipo o dispositivo médico especial se incluye un andador, silla de ruedas, nebulizador, tubos de alimentación o equipo de oxígeno. En los últimos 6 meses, ¿consiguió o intentó conseguir algún equipo o dispositivo médico especial para su niño?

- Sí
- No → *Pase a la pregunta 22*

20. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir equipo o dispositivos médicos especiales para su niño?

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

21. ¿Alguien del plan de salud, del consultorio médico o clínica de su niño le ayudó a conseguir el equipo o dispositivos médicos especiales para su niño?

- Sí
- No

22. En los últimos 6 meses, ¿consiguió o intentó conseguir terapia especial para su niño tal como terapia física, ocupacional o del habla?

- Sí
- No → *Pase a la pregunta 25*

23. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir esta terapia para su niño?

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

24. ¿Alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a conseguir esta terapia para su niño?

- Sí
- No

25. En los últimos 6 meses, ¿consiguió o intentó conseguir tratamiento o consejería para su niño, para un problema emocional, de desarrollo o de comportamiento?

- Sí
- No → *Pase a la pregunta 28*

26. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir este tratamiento o consejería para su niño?

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

27. ¿Alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a conseguir este tratamiento o consejería para su niño?

- Sí
- No

28. En los últimos 6 meses, ¿recibió su niño atención de más de un tipo de profesional médico, o usó más de un tipo de servicio de salud?

- Sí
- No → *Pase a la pregunta 30*

29. En los últimos 6 meses, ¿alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a coordinar la atención médica de su niño entre estos profesionales o servicios diferentes?

- Sí
- No

EL DOCTOR PERSONAL DE SU NIÑO

30. El doctor personal es aquel a quien su niño va si necesita un chequeo, tiene un problema de salud o si se enferma o lastima. ¿Tiene su niño un doctor personal?

- Sí
- No → *Pase a la pregunta 45*

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

- Ninguna vez → *Pase a la pregunta 41*
- 1 vez
- 2
- 3
- 4
- 5 a 9
- 10 veces o más



- 31a. En los últimos 6 meses, ¿con qué frecuencia se le hizo difícil hablar o entender al doctor personal de su niño porque hablaban idiomas diferentes?
- Nunca
 - A veces
 - La mayoría de las veces
 - Siempre
32. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño le explicó las cosas sobre la salud de su niño de una manera fácil de entender?
- Nunca
 - A veces
 - La mayoría de las veces
 - Siempre
33. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño le escuchó a usted con atención?
- Nunca
 - A veces
 - La mayoría de las veces
 - Siempre
34. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño demostró respeto por lo que usted tenía que decir?
- Nunca
 - A veces
 - La mayoría de las veces
 - Siempre
35. ¿Su niño puede hablar con los doctores sobre su atención médica?
- Sí
 - No → *Pase a la pregunta 37*

36. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño le explicó las cosas a su niño de una manera fácil de entender?
- Nunca
 - A veces
 - La mayoría de las veces
 - Siempre
37. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño pasó suficiente tiempo con su niño?
- Nunca
 - A veces
 - La mayoría de las veces
 - Siempre
38. En los últimos 6 meses, ¿habló el doctor personal de su niño con usted sobre cómo su niño se estaba sintiendo, estaba creciendo o se estaba comportando?
- Sí
 - No
39. En los últimos 6 meses, ¿atendió a su niño algún doctor u otro profesional médico además de su doctor personal?
- Sí
 - No → *Pase a la pregunta 41*
40. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño parecía estar informado y al día acerca de la atención que su niño había recibido de estos doctores u otros profesionales médicos?
- Nunca
 - A veces
 - La mayoría de las veces
 - Siempre

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

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

EL PLAN DE SALUD DE SU NIÑO

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

49. En los últimos 6 meses, ¿recibió información o ayuda de parte del servicio al cliente del plan de salud de su niño?

- Sí
 No → *Pase a la pregunta 52*

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

- Nunca
 A veces
 La mayoría de las veces
 Siempre

51. En los últimos 6 meses, ¿con qué frecuencia el personal de servicio al cliente del plan de salud de su niño le trató con cortesía y respeto?

- Nunca
 A veces
 La mayoría de las veces
 Siempre

52. En los últimos 6 meses, ¿le dio el plan de salud de su niño algún formulario para llenar?

- Sí
 No → *Pase a la pregunta 54*

53. En los últimos 6 meses, ¿con qué frecuencia fueron fáciles de llenar los formularios del plan de salud de su niño?

- Nunca
 A veces
 La mayoría de las veces
 Siempre

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

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

MEDICINAS RECETADAS

55. En los últimos 6 meses, ¿consiguió alguna medicina recetada o renovó una receta para una medicina recetada para su niño?

- Sí
 No → *Pase a la pregunta 57a*

56. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir medicinas recetadas para su niño a través de su plan de salud?

- Nunca
 A veces
 La mayoría de las veces
 Siempre

57. ¿Alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a conseguir las medicinas recetadas para su niño?

- Sí
- No

ACCESO A CUIDADO DENTAL

57a. Un dentista regular es a quien su niño va a ver para un chequeo y limpieza o cuando tiene una carie o un dolor de diente. ¿Su niño tiene un dentista regular?

- Sí
- No

57b. En los últimos 6 meses, ¿fué su niño a una oficina o clínica de un dentista para cuidado?

- Sí
- No → *Pase a la pregunta 57d*

57c. En los últimos 6 meses, ¿con qué frecuencia el personal dental o el dentista le explicaron lo que le hacían mientras trataron a su niño?

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

57d. En los últimos 6 meses, si su niño necesitó ver a un dentista de inmediato por una emergencia dental, ¿el/ella pudo ver a un dentista tan pronto como usted quería?

- Nunca
- A veces
- La mayoría de las veces
- Siempre
- Mi niño no tuvo una emergencia dental en los últimos 6 meses

57e. Usando un número del 0 al 10, el 0 siendo extremadamente difícil y el 10 extremadamente fácil, ¿qué número usaría para calificar cuán fácil le fue encontrar un dentista para su niño?

-
- 0 1 2 3 4 5 6 7 8 9 10
- Extremadamente difícil Extremadamente fácil

ACERCA DE USTED Y DE SU NIÑO

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Sí
- No → *Pase a la pregunta 63*

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

- Sí
- No → *Pase a la pregunta 63*

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

- Sí
- No



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

- Sí
- No → *Pase a la pregunta 66*

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

- Sí
- No → *Pase a la pregunta 66*

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 69*

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

- Sí
- No → *Pase a la pregunta 69*

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 72*

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

- Sí
- No → *Pase a la pregunta 72*

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 74*

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

- Sí
- No

74. ¿Qué edad tiene su niño?

- Menos de un año

AÑOS (escriba la respuesta)

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

- Masculino
- Femenino

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

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



77. ¿A qué raza pertenece su niño?
Marque una o más.
- Blanca
 - Negra o afroamericana
 - Asiática
 - Nativo de Hawái o de otras islas del Pacífico
 - Indígena americano o nativo de Alaska
 - Otra (Por favor escriba en letra de molde)
-

78. ¿Qué edad tiene usted?

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

79. ¿Es usted hombre o mujer?

- Hombre
- Mujer

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

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

81. ¿Qué relación tiene con el niño?

- Madre o padre
- Abuelo o abuela
- Tía o tío
- Hermano o hermana mayor
- Otro familiar
- Tutor legal del niño
- Otra persona

82. ¿Le ayudó alguien a completar esta encuesta?

- Sí → *Pase a la pregunta 83*
- No → *Gracias. Por favor devuelva esta encuesta en el sobre con el porte o franqueo pagado.*

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

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

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

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

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





898-12



12

CZPCS

DIAL.SCREEN

DS. INTERVIEWER: YOU MAY DO THE INTERVIEW WITH ONLY THE [NAMED
RESPONDENT. NO PROXIES WILL BE ACCEPTED/PARENT/GUARDIAN/OR ADULT WHO
KNOWS MOST ABOUT [MEMBER NAME] 'S HEALTH CARE] .

PHONE NUMBER ---> [1 CELL PHONE - HAND DIAL (###) ### - ##### /***
-*]

Hello, I'm calling about a health care survey on behalf of
[HEALTH PLAN NAME]. This call will be recorded and may be
monitored for quality and
training purposes. May I please speak with [[MEMBER FIRST NAME]
[MEMBER LAST NAME]/the person who knows the most about [NAME OF
CHILD]'s health care)?

We are conducting an important study to find out how satisfied
[people/families] are with [HEALTH PLAN NAME]. The results of the
study will help [HEALTH PLAN NAME] improve the care they provide
and will also help consumers when they choose health care plans.

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

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

IF DIAL.SCREEN = 01, GO TO START2

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

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

RETURN TO COVERSHEET

MAIL.SCREEN

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

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

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

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

1. CONTINUE
2. REFUSAL BECAUSE ALREADY COMPLETED AND MAILED SURVEY BACK
3. REFUSAL
4. APPOINTMENT
5. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)

IF MAIL.SCREEN = 1, GO TO START2
RETURN TO COVERSHEET

SEX

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

1. MALE
2. FEMALE

SPAN.VAR

(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

1. Spanish
2. English

MEMBER

Q1. / MEMBER

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

Our records show that [you/your child] [are/is] now in [HEALTH PLAN NAME]. Is that right?

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

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

DK/REFUSAL/NOT ASCERTAINED

NPLNAME

Q2. / NPLNAME

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

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS [HEALTH PLAN NAME]]

[(ENTER 5 IF R SAYS: MEDICAID)]

(IF R SAYS SOMETHING CLOSE TO [HEALTH PLAN NAME], ENTER "2")

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

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

PLNAME

Q2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)

CK.PLMSTCR:

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

INTRO.INCARE

INTRO.INCARE

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

INCARE

Q3. / INCARE

In the last [12/6] months, did [you/your child] have an illness, injury, or condition that NEEDED CARE RIGHT AWAY in a clinic, emergency room, or doctor's office?

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

DK/REFUSAL/NOT ASCERTAINED --> APMAKE4

CARSN4

Q4. / CARSN4

In the last [12/6] months, when [you/your child] NEEDED CARE RIGHT AWAY, how often did [you/your child] get care as soon as [you/+[he/she]] needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

APMAKE4

Q5. / APMAKE4

In the last [12/6] months, did you make any appointments for a CHECK-UP OR ROUTINE CARE [/for your child] at a doctor's office or clinic?

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

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

APGET4

Q6. / APGET4

In the last [12/6] months, [/when you made an appointment for a CHECK-UP OR ROUTINE CARE for your child at a doctor's office or clinic,] how often did you get an appointment [for a CHECK-UP OR ROUTINE CARE at a doctor's office or clinic/] as soon as [you/your child] needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

OFCTIM4

Q7. / OFCTIM4

In the last [12/6] months, NOT counting the times [you/your child] went to an emergency room, how many times did [you/+[he/she]] go to a doctor's office or clinic [to get health care for yourself/to get health care]

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

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

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

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

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

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

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

PRVENT5

Q8. / PRVENT5

In the last [12/6] months, did you and [a/your child's] doctor or other health provider talk about specific things you could do to prevent illness [/in your child?] ?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

IF qnaire<5 then go to RXSTP

OFTQUES

[0/0/0/0/9/9]. / OFTQUES

In the last [12/6] months, how often did you have your questions answered by your child's doctor or other health providers? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXSTP

[9/9/9/9/10/10]. / RXSTP

In the last [12/6] months, did you and [a/your child's] doctor or other health provider talk about starting or stopping a prescription medicine [/for your child] ?

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

DK/REFUSAL/NOT ASCERTAINED --> RTALLCR

NRXWHY

[10/10/10/10/11/11]. / NRXWHY

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

NRXWYNT

[11/11/11/11/12/12]. / NRXWYNT

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RXBST

[12/12/12/12/13/13]. / RXBST

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RTALLCR

[13/13/13/13/14/14]. / RTALLCR

Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all [your/your child's] health care in the last [12/6] months?

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

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

CARNES4

[14/14/14/14/15/15]. / CARNES4

In the last [12/6] months, how often was it easy to get the care, tests, or treatment [you/your child] needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHSCHL

[0/0/0/0/16/16]. / CHSCHL

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

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

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

CONTSCHL

[0/0/0/0/17/17]. / CONTSCHL

In the last [12/6] months, did you need your child's doctors or other health providers to contact a school or daycare center about your child's health or health care?

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

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

HELPCONT

[0/0/0/0/18/18]. / HELPCONT

In the last [12/6] months, did you get the help you needed from your child's doctors or other health providers in contacting your child's school or daycare?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

MEDEQUIP

[0/0/0/0/19/19]. / MEDEQUIP

Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment. In the last [12/6] months, did you get or try to get any special medical equipment or devices for your child?

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

DK/REFUSAL/NOT ASCERTAINED --> SPCTHY

EZMDEQ

[0/0/0/0/20/20]. / EZMDEQ

In the last [12/6] months, how often was it easy to get special medical equipment or devices for your child? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPMDEQ

[0/0/0/0/21/21]. / HELPMDEQ

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

SPCTHY

[0/0/0/0/22/22]. / SPCTHY

In the last [12/6] months, did you get or try to get special therapy such as physical, occupational, or speech therapy for your child?

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

DK/REFUSAL/NOT ASCERTAINED --> TCPBLM

EZTHP

[0/0/0/0/23/23]. / EZTHP

In the last [12/6] months, how often was it easy to get this therapy for your child? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTHP

[0/0/0/0/24/24]. / HELPTHP

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

TCPBLM

[0/0/0/0/25/25]. / TCPBLM

In the last [12/6] months, did you get or try to get treatment or counseling for your child for an emotional, developmental, or behavioral problem?

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

DK/REFUSAL/NOT ASCERTAINED --> PLUSCARE

EZTC

[0/0/0/0/26/26]. / EZTC

In the last [12/6] months, how often was it easy to get this treatment or counseling for your child? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTC

[0/0/0/0/27/27]. / HELPTC

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

PLUSCARE

[0/0/0/0/28/28]. / PLUSCARE

In the last [12/6] months, did your child get care from more than one kind of health care provider or use more than one kind of health care service?

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

DK/REFUSAL/NOT ASCERTAINED --> PRSNLD4

HLPCOORD

[0/0/0/0/29/29]. / HLPCOORD

In the last [12/6] months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these different providers or services?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

PRSNLD4

[15/15/15/15/30/30]. / PRSNLD4

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

[Do you/Does your child] have a personal doctor?

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

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

DRTMS

[16/16/16/16/31/31]. / DRTMS

In the last [12/6] months, how many times did [you/your child] visit [your/[his/her]] personal doctor [to get care for yourself/for care] ?

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

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

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

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

IF QNAIRE= ADULT MEDICAID (02), GO TO DREXPL4

PBDRNG

31a. / PBDRLANG

In the last [12/6] months, how often did you have a hard time speaking with or understanding your child's personal doctor because you spoke different languages? Would you say...?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DREXPL4

[17/17/17/17/32/32]. / DREXPL4

In the last [12/6] months, how often did [your/your child's] personal doctor explain things [/about your child's health] in a way that was easy to understand? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRLSTN4

[18/18/18/18/33/33]. / DRLSTN4

In the last [12/6] months, how often did [your/your child's] personal doctor listen carefully to you? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRESPU4

[19/19/19/19/34/34]. / DRESPU4

In the last [12/6] months, how often did [your/your child's] personal doctor show respect for what you had to say? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CABLTLK

[0/0/20/20/35/35]. / CABLTLK

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

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

DK/REFUSAL/NOT ASCERTAINED --> DRTMEN4

CDREXPL

[0/0/21/21/36/36]. / CDREXPL

In the last [12/6] months, how often did your child's personal doctor explain things in a way that was easy for YOUR CHILD to understand? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTMEN4

[20/20/22/22/37/37]. / DRTMEN4

In the last [12/6] months, how often did [your/your child's] personal doctor spend enough time with [you/your child] ? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTLKU

[0/0/23/23/38/38]. / DRTLKU

In the last [12/6] months, did your child's personal doctor talk with you about how your child is feeling, growing, or behaving?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

DIFFDR

[21/21/24/24/39/39]. / DIFFDR

In the last [12/6] months, did [you/your child] get care from a doctor or other health provider besides [your/+[his/her]] personal doctor?

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

DK/REFUSAL/NOT ASCERTAINED --> RATEDR4

DRINFO

[22/22/25/25/40/40]. / DRINFO

In the last [12/6] months, how often did [your/your child's] personal doctor seem informed and up-to-date about the care [you/your child] got from these doctors or other health providers? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RATEDR4

[23/23/26/26/41/41]. / RATEDR4

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

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

COND3MO

[0/0/0/0/42/42]. / COND3MO

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

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

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

DRUNCON

[0/0/0/0/43/43]. / DRUNCON

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

DRUNFAM

[0/0/0/0/44/44]. / DRUNFAM

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.SPDR

INTRO.SPDR

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

NDSPDR4

[24/24/27/27/45/45]. / NDSPDR4

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

In the last [12/6] months, did you make any appointments [/for your child] to see a specialist?

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

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

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

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

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

PRBSEE4

[25/25/28/28/46/46]. / PRBSEE4

In the last [12/6] months, how often did you get an appointment [/for your child] to see a specialist as soon as you needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

SPDRS

[26/26/29/29/47/47]. / SPDRS

How many specialists [have/has] [you/your child] seen in the last [12/6] months?

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

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

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

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

RTSPDR4

[27/27/30/30/48/48]. / RTSPDR4

We want to know your rating of the specialist [you/your child] saw most often in the last [12/6] months.

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

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

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN
INTRO.PLAN

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

LOOMAT4
[28/28/0/0/0/0]. / LOOMAT4

In the last [12/6] months, did you look for any information in written
materials or on the Internet about how your health plan works?

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

DK/REFUSAL/NOT ASCERTAINED --> CK.LOOSVC

UNDINF4
[29/29/0/0/0/0]. / UNDINF4

In the last [12/6] months, how often did the written materials OR the
Internet provide the information you needed about how your health plan
works? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CK.LOOSVC
IF qnaire=02 then go to CLCSRV4

LOOSVC
[30/0/0/0/0/0]. / LOOSVC

Sometimes people need services or equipment beyond what is provided in a
regular or routine office visit, such as care from a specialist,
physical therapy, a hearing aid, or oxygen.

In the last 12 months, did you look for information from your health
plan on how much you would have to pay for a health care service or
equipment?

- 1. YES
- 2. NO -----> LOOMED

DK/REFUSAL/NOT ASCERTAINED --> LOOMED

FNDSVC

[31/0/0/0/0/0]. / FNDSVC

In the last 12 months, how often were you able to find out from your health plan how much you would have to pay for a health care service or equipment? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

LOOMED

[32/0/0/0/0/0]. / LOOMED

In some health plans the amount you pay for a prescription medicine can be different for different medicines, or can be different for prescriptions filled by mail instead of at the pharmacy.

In the last 12 months, did you look for information from your health plan on how much you would have to pay for specific prescription medicines?

- 1. YES
- 2. NO -----> CLCSRV4

DK/REFUSAL/NOT ASCERTAINED --> CLCSRV4

FNDMED

[33/0/0/0/0/0]. / FNDMED

In the last 12 months, how often were you able to find out from your health plan how much you would have to pay for specific prescription medicines? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CLCSRV4

[34/30/31/31/49/49]. / CLCSRV4

In the last [12/6] months, did you get information or help from [your health plan's customer service/customer service at your child's health plan] ?

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

DK/REFUSAL/NOT ASCERTAINED --> PLPRWK4

PBCLCS4

[35/31/32/32/50/50]. / PBCLCS4

In the last [12/6] months, how often did [your health plan's customer service/customer service at your child's health plan] give you the information or help you needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CSRESP

[36/32/33/33/51/51]. / CSRESP

In the last [12/6] months, how often did [your health plan's/] customer service staff [/at your child's health plan] treat you with courtesy and respect? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLPRWK4

[37/33/34/34/52/52]. / PLPRWK4

In the last [12/6] months, did [your/your child's] health plan give you any forms to fill out?

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

DK/REFUSAL/NOT ASCERTAINED --> CK.SNDCLMS

PBPLPW4

[38/34/35/35/53/53]. / PBPLPW4

In the last [12/6] months, how often were the forms from [your/your child's] health plan easy to fill out? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CK.SNDCLMS

SNDCLM4

[39/0/0/0/0/0]. / SNDCLM4

Claims are sent to a health plan for payment. You may send in the claims yourself, or doctors, hospitals, or others may do this for you.

In the last [12/6] months, did you or anyone else send in any claims for your care to your health plan?

- 1. YES
- 2. NO -----> RTPLEXP
- 3. DON'T KNOW (DO NOT PROBE) --> RTPLEXP
- 9. REFUSAL/NOT ASCERTAINED ----> RTPLEXP

CLMTMR4

[40/0/0/0/0/0]. / CLMTMR4

In the last [12/6] months, how often did your health plan handle your claims quickly? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?
- 5. DON'T KNOW (DO NOT READ) (DO NOT PROBE)
- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

CLMCRCT

[41/0/0/0/0/0]. / CLMCRCT

In the last [12/6] months, how often did your health plan handle [your/your child's] claims correctly? Would you say...

(READ LIST)

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

- 5. DON'T KNOW (DO NOT READ) (DO NOT PROBE)

- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTPLEXP

[42/35/36/36/54/54]. / RTPLEXP

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

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

IF QNAIRE= CHILD MED W/CCC (07), GO TO CHPRES

HPMDEQ

[0/35.01/0/0/0/0]. / HPMDEQ

In the last [12/6] months, did you have a health problem for which you needed special medical equipment, such as a cane, a wheelchair, or oxygen equipment?

- 1. YES
- 2. NO -----> POSTHP

DK/REFUSAL/NOT ASCERTAINED --> POSTHP

EZMDHP

[0/35.02/0/0/0/0]. / EZMDHP

In the last [12/6] months, how often was it easy to get the medical equipment you needed through your health plan? Would you say...?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

POSTHP

[0/35.03/0/0/0/0]. / POSTHP

In the last [12/6] months, did you have any health problems that needed special therapy, such as physical, occupational, or speech therapy?

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

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

EZPOST

[0/35.04/0/0/0/0]. / EZPOST

In the last [12/6] months, how often was it easy to get the special therapy you needed through your health plan? Would you say...?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

INTRO.DTLK
INTRO.DTLK

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

DTLKTF
[0/35.5/0/0/0/0]. / DTLKTF

In the last [12/6] months, how often did a doctor or other health provider talk too fast when talking to you? Would you say...?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DINTER

[0/35.6/0/0/0/0]. / DINTER

In the last [12/6] months, how often did a doctor or other health provider interrupt you when you were talking? Would you say...?

(READ LIST IF NECESSARY)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRRUDE

[0/35.7/0/0/0/0]. / DRRUDE

In the last [12/6] months, how often did a doctor or other health provider use a condescending, sarcastic or rude tone or manner with you? Would you say...?

(READ LIST IF NECESSARY)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

TRUSTDR

[0/35.8/0/0/0/0]. / TRUSTDR

In the last [12/6] months, did you feel you could trust a doctor or other health provider with your medical care?

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

REGDENT

[0/35.9/0/0/0/57.01]. / REGDENT

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

[Do you/Does your child] have a regular dentist?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

GODENT

[0/35.10/0/0/0/57.02]. / GODENT

In the last 6 months, did [you/your child] go to a dentist's office or clinic for care?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

IF QNAIRE = ADULT MEDICAID (02) AND GODENT <> YES, GO TO CK.DENTSOON
IF QNAIRE = CHILD MEDICAID W/CCC (07) AND GODENT <> YES, GO TO DNTASAP

DENTEXPL

[0/35.11/0/0/0/57.03]. / DENTEXPL

In the last [12/6] months, how often did [your/your child's] dentist or dental staff explain what they were doing while treating [you/your child]? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CK.DENTSOON

IF QNAIRE = CHILD MEDICAID W/CCC (07), GO TO DNTASAP

DENTSOON

[0/35.12/0/0/0/0]. / DENTSOON

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

(READ LIST)

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

- 5. DID NOT TRY TO GET AN APPOINTMENT WITH A SPECIALIST DENTIST IN THE LAST 6 MONTHS (DO NOT READ)

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DNTASAP

[0/35.13/0/0/0/57.04]. / DNTASAP

In the last [12/6] months, if [you/your child] needed to see a dentist right away because of a DENTAL EMERGENCY, did [you/+[he/she]] get to see a dentist as soon as you wanted? Would you say...

(IWER: IF R RESPONDS WITH "YES/NO" PLEASE PROBE WITH RESPONSE OPTIONS)

(READ LIST)

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

- 5. DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS (DO NOT READ)

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTDENT

[0/35.14/0/0/0/57.03]. / RTDENT

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

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

GO TO HLTSTA4

CHPRES

[0/0/0/0/55/55]. / CHPRES

In the last [12/6] months, did you get or refill any prescription medicines for your child?

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

DK/REFUSAL/NOT ASCERTAINED --> REGDENT

EZPRES

[0/0/0/0/56/56]. / EZPRES

In the last [12/6] months, how often was it easy to get prescription medicines for your child through [your/+[his/her]] health plan? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPPRES

[0/0/0/0/57/57]. / HELPPRES

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

IF QNAIRE = CHILD MEDICAID W/CCC, GO TO REGDENT

HLTSTA4

[43/36/37/37/58/58]. / HLTSTA4

[/I have just a few more questions.]

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

MNTLSTAT

[44/37/38/38/59/59]. / MNTLSTAT

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CUSEMED

[0/0/0/0/60/60]. / CUSEMED

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

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

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

WHYMEDA

[0/0/0/0/61/61]. / WHYMEDA

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

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

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

WHYMEDB

[0/0/0/0/62/62]. / WHYMEDB

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

MOREMED

[0/0/0/0/63/63]. / MOREMED

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

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

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

WHYMOREA

[0/0/0/0/64/64]. / WHYMOREA

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

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

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

WHYMOREB

[0/0/0/0/65/65]. / WHYMOREB

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

LIMITED

[0/0/0/0/66/66]. / LIMITED

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

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

DK/REFUSAL/NOT ASCERTAINED --> SPECTHP

WHYLIMA

[0/0/0/0/67/67]. / WHYLIMA

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

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

DK/REFUSAL/NOT ASCERTAINED --> SPECTHP

WHYLIMB

[0/0/0/0/68/68]. / WHYLIMB

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

SPECTHP

[0/0/0/0/69/69]. / SPECTHP

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

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

DK/REFUSAL/NOT ASCERTAINED --> CHCOUNS

WHYSTA

[0/0/0/0/70/70]. / WHYSTA

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

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

DK/REFUSAL/NOT ASCERTAINED --> CHCOUNS

WHYSTB

[0/0/0/0/71/71]. / WHYSTB

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

CHCOUNS

[0/0/0/0/72/72]. / CHCOUNS

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

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

DK/REFUSAL/NOT ASCERTAINED --> CAGE

TIMCOUNA

[0/0/0/0/73/73]. / TIMCOUNA

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

FLUSHOTQ

[45/38/0/0/0/0]. / FLUSHOTQ

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

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

NOWSMOK

[46/39/0/0/0/0]. / NOWSMOK

Do you now smoke cigarettes or use tobacco...

(READ LIST)

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

ADVQUIT9

[47/40/0/0/0/0]. / ADVQUIT9

In the last [12/6] months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PATCH9

[48/41/0/0/0/0]. / PATCH9

In the last [12/6] months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication. Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

WILLPWR9

[49/42/0/0/0/0]. / WILLPWR9

In the last [12/6] months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program. Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPDAY

[50/43/0/0/0/0]. / ASPDAY

Do you take aspirin daily or every other day?

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

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

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

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

9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPUSF

[51/44/0/0/0/0]. / ASPUSF

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

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

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

9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPPRV

[52/45/0/0/0/0]. / ASPPRV

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.AWCOND

INTRO.AWCOND

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

PHAWCD.(1-3)

[53/46/0/0/0/0].(1-3) / PHAWCD.(1-3)

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

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

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.DRCOND

INTRO.DRCOND

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

PHDRCD.(1-4)

[54/47/0/0/0/0].(1-4) / PHDRCD.(1-4)

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

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

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

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

SMPROB

[55/48/0/0/0/0]. / SMPROB

[I have just a few more questions./]

In the last [12/6] months, did you get health care 3 or more times for the same condition or problem?

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

DK/REFUSAL/NOT ASCERTAINED --> TKMED

PRBLST

[56/49/0/0/0/0]. / PRBLST

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

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

TKMED

[57/50/0/0/0/0]. / TKMED

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

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

DK/REFUSAL/NOT ASCERTAINED --> QAGE4

TRTCOND

[58/51/0/0/0/0]. / TRTCOND

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

[59/52/0/0/0/0]. / QAGE4

What is your age?

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

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

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

QGENDER

[60/53/0/0/0/0]. / QGENDER

(IWER: RECORD RESPONDENT'S SEX.)

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

1. MALE
2. FEMALE

DK/REFUSAL/NOT ASCERTAINED

CAGE

[0/0/39/39/74/74]. / CAGE

[/I have just a few more questions.]

What is YOUR CHILD'S age?

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

(IWER: DO NOT ROUND UP)

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

___ ENTER CHILD'S AGE

DK/REFUSAL/NOT ASCERTAINED

IF CAGE<19 THEN GO TO CGENDER

CAGE.CK

[0/0/39/39/74/74]a. / CAGE.CK

I have entered that [NAME OF CHILD] is [CAGE] . Is that correct?

("DK" NOT ALLOWED)

1. YES-AGE ENTERED CORRECTLY
2. NO-CORRECT AGE -----> CAGE

IF cage>18 and cage<>99 then go to ALL.DONE

CGENDER

[0/0/40/40/75/75]. / CGENDER

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

1. MALE
2. FEMALE

REFUSAL/NOT ASCERTAINED

LATINO

[62/55/41/41/76/76]. / LATINO

[Are/Is] [you/your child] of Hispanic or Latino origin or descent?

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

DK/REFUSAL/NOT ASCERTAINED

INTRO.RACE

INTRO.RACE

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

PQRACE3.(1-6)
[63/56/42/42/77/77].(1-6) / PQRACE3.(1-6)

[(Are you)/(Is your child)]

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

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

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

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

QRACE3.OTH / QRACE3.OTH
(What is [your/your child's] race?)

PAGE

[0/0/43/43/78/78]. / PAGE

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

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

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

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PGENDER

[0/0/44/44/79/79]. / PGENDER

(IWER: ENTER RESPONDENT'S SEX.)

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

1. MALE
2. FEMALE

DK/REFUSAL/NOT ASCERTAINED

EDUCAT

[61/54/45/45/80/80]. / EDUCAT

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

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

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

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

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHRELT

[0/0/46/46/81/81]. / CHRELT

How are you related to the child?

(READ IF NEEDED: "Are you the ...")

1. MOTHER OR FATHER,
2. GRANDPARENT,
3. AUNT OR UNCLE,
4. OLDER BROTHER OR SISTER,
5. OTHER RELATIVE,
6. LEGAL GUARDIAN, OR
7. SOMEONE ELSE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ALL.DONE
THANKS.SCREEN.

Those are all the questions I have.

Thank you for taking part in this important interview.

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

RETURN TO COVERSHEET

EDIT.FLG
(IWER: DO YOU NEED TO TYPE AN EDIT?)

1. YES
2. NO

IF EDIT.FLG = 2 THEN GO TO CK.END.EDIT

EDIT.OTH
EDIT.OTH. (IWER: PLEASE TYPE YOUR EDIT-BE SPECIFIC-INCLUDE:
1) QUESTION NUMBER(S)
2) WHAT WAS ENTERED
3) WHAT NEEDS TO BE CHANGED

CK.END.EDIT
LANG.DID
LANG.DID. IWER: DID YOU DO THIS INTERVIEW IN...
1. ENGLISH,
2. SPANISH OR
3. BOTH?