



Jackson Care Connect
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 Jackson Care Connect members. Jackson Care Connect 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	
	Jackson Care Connect	Overall	Jackson Care Connect	Overall
**First mailing - sent	900	16200	900	16200
*First mailing - usable survey returned	145	2801	113	2168
Second mailing - sent	736	13319	751	13616
*Second mailing - usable survey returned	65	978	58	886
*Phone - usable surveys	75	1303	134	2255
Total - usable surveys	285	5082	305	5309
†Ineligible: According to population criteria‡	14	346	9	200
†Ineligible: Deceased	3	31	0	0
†Ineligible: Mentally or physically unable to complete survey	8	195	0	0
†Ineligible: Language barrier	1	64	3	59
Incorrect address AND incorrect phone number	48	848	34	710
Refusal/Returned survey blank	52	672	37	829
Nonresponse - Unavailable by mail or phone	489	8962	512	9093
Adjusted Response Rate	32.6%	32.7%	34.3%	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	226 44.3%	123 43.2%	-1.16%
Female	284 55.7%	162 56.8%	1.16%
18-24	109 21.4%	31 10.9%	-10.50%
25-34	148 29.0%	49 17.2%	-11.83%
35-44	105 20.6%	46 16.1%	-4.45%
45-54	76 14.9%	61 21.4%	6.50%
55-64	62 12.2%	77 27.0%	14.86%
65-74	8 1.6%	17 6.0%	4.40%
75 or Older	2 0.4%	4 1.4%	1.01%

Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	256 50.5%	150 49.2%	-1.31%
Female	251 49.5%	155 50.8%	1.31%
<3	98 19.3%	47 15.4%	-3.92%
4-7	129 25.4%	66 21.6%	-3.80%
8-12	149 29.4%	106 34.8%	5.37%
13 or older	131 25.8%	86 28.2%	2.36%

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					
	JCC	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
Q1																				
YES	284	5060	26	48	39	56	77	20	189					25	33	229	186	81	112	156
	100%	100%	100%	100%	100%	100%	100%	100%	100%	~	~	~	~	~100%	100%	100%	100%	100%	100%	100%
NOT ANSWERED	1	22		1					1						1	1			1	
VALID CASES	284	5060	26	48	39	56	77	20	189					25	33	229	186	81	112	156
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
	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			
	JCC 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 TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	EX & FAIR &	FE-MALE	MALE	
Q3 YES	112 41%	2017 41%	8 31%~	21 44%~	20 51%~	17 31%	31 41%	10 53%~	78 42%	~	~	~	~	~	11 44%~	9 29%~	97 43%	65 35%*	43 54%*	43 40%	65 42%
NO	164 59%	2921 59%	18 69%~	27 56%~	19 49%~	38 69%	44 59%	9 47%~	108 58%	~	~	~	~	~	14 56%~	22 71%~	129 57%	119 65%*	36 46%*	65 60%	90 58%
NOT ANSWERED	9	144		1		1	2	1	4							2	4	3	2	4	2
VALID CASES	276	4938	26	48	39	55	75	19	186					25	31	226	184	79	108	155	
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157	
	100%	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													ITY	STATUS						
	JCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER											
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/		NOT	EX &							
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR				
									AMER		ILND	NATV		TI	IC	PAN-	PAN-	&	&	FE-		
									WHTE	##	##	#	##	##	IC	IC	GOOD	POOR	MALE	MALE		
Q4																						
NEVER	1	42			1				1						1	1				1		
	1%	2%	~	~	5%~	~	~	~	1%~	~	~	~	~	~	~	1%~	2%~			~	~	2%~
SOMETIMES	13	268	1	4	1	1	4	1	10					1	10	8	5		2	9		
	13%	15%	13%~	21%~	5%~	7%~	15%~	11%~	14%~	~	~	~	~	9%~	~	11%~	13%~	14%~	5%~	16%~		
USUALLY	24	466	4	4	5	3	5	3	17					3	4	20	17	7	12	12		
	24%	26%	50%~	21%~	26%~	20%~	19%~	33%~	24%~	~	~	~	~	27%~	57%~	23%~	28%~	20%~	31%~	21%~		
ALWAYS	62	1045	3	11	12	11	17	5	42					7	3	56	35	23	25	35		
	62%	57%	38%~	58%~	63%~	73%~	65%~	56%~	60%~	~	~	~	~	64%~	43%~	64%~	57%~	66%~	64%~	61%~		
#ALWAYS + USUALLY (NET)	86	1511	7	15	17	14	22	8	59					10	7	76	52	30	37	47		
	86%	83%	88%~	79%~	89%~	93%~	85%~	89%~	84%~	~	~	~	~	91%~	100%~	87%~	85%~	86%~	95%~	82%~		
TOP BOX SCORE	62	1045	3	11	12	11	17	5	42					7	3	56	35	23	25	35		
	62%	57%	38%~	58%~	63%~	73%~	65%~	56%~	60%~	~	~	~	~	64%~	43%~	64%~	57%~	66%~	64%~	61%~		
NOT ANSWERED	12	196		2	1	2	5	1	8						2	10	4	8	4	8		
VALID CASES	100	1821	8	19	19	15	26	9	70					11	7	87	61	35	39	57		
NUMBER OF RESPONDENTS	112	2017	8	21	20	17	31	10	78					11	9	97	65	43	43	65		
	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					
	JCC	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	
Q5																				
YES	190	3365	11	31	28	39	58	16	130					20	18	159	113	68	79	103
	69%	68%	42%~	67%~	72%~	71%	76%	80%~	70%	~	~	~	~	~ 80%~	56%~	71%	62%*	85%*	72%	67%
NO	86	1561	15	15	11	16	18	4	55					5	14	66	69	12	30	51
	31%	32%	58%~	33%~	28%~	29%	24%	20%~	30%	~	~	~	~	~ 20%~	44%~	29%	38%*	15%*	28%	33%
NOT ANSWERED	9	156		3		1	1		5						1	5	5	1	3	3
VALID CASES	276	4926	26	46	39	55	76	20	185					25	32	225	182	80	109	154
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
	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					
	JCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-##	AS-IAN ##	NATV 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
Q6 NEVER	2 1%	83 3%	~	~	~	~	4%	~	2	~	~	~	~	~	~	2	1	1	2	3%	~		
SOMETIMES	24 15%	590 19%	4 40%	6 22%	3 12%	5 16%	6 12%	~	16	~	~	~	~	~	3	3	19	22	2	3%	13%	16%	
USUALLY	46 28%	884 29%	3 30%	9 33%	7 28%	9 29%	10 20%	6 43%	32	~	~	~	~	~	3	4	37	30	15	27%	28%	19	24
ALWAYS	93 56%	1472 49%*	3 30%	12 44%	15 60%	17 55%	33 65%	8 57%	61	~	~	~	~	~	12	8	79	48	40	57%	56%	40	49
#ALWAYS + USUALLY (NET)	139 84%	2356 78%*	6 60%	21 78%	22 88%	26 84%	43 84%	14 100%	93	~	~	~	~	~	15	12	116	78	55	84%	84%	59	73
TOP BOX SCORE	93 56%	1472 49%*	3 30%	12 44%	15 60%	17 55%	33 65%	8 57%	61	~	~	~	~	~	12	8	79	48	40	57%	56%	40	49
NOT ANSWERED	25	336	1	4	3	8	7	2	19						2	3	22	12	10			9	16
VALID CASES	165	3029	10	27	25	31	51	14	111						18	15	137	101	58			70	87
NUMBER OF RESPONDENTS	190	3365	11	31	28	39	58	16	130						20	18	159	113	68			79	103
	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						ETHNIC-ITY	HEALTH STATUS		GENDER			
	JCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND #	AMER IND/ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	MALE	FE-MALE	
Q7 NONE	64 24%	1242 26%	10 38%~	11 26%~	9 23%~	17 31%	12 16%*	3 15%~	40 22%	~	~	~	~	~	2 8%~	15 47%~	47 21%	51 28%*	12 15%*	27 25%	36 24%
1 TIME	51 19%	927 19%	2 8%~	7 16%~	12 31%~	7 13%	13 17%	6 30%~	34 19%	~	~	~	~	~	7 28%~	6 19%~	43 19%	39 22%	10 13%	21 19%	28 19%
2	56 21%	878 18%	5 19%~	9 21%~	5 13%~	15 27%	16 21%	5 25%~	44 24%*	~	~	~	~	~	3 12%~	6 19%~	45 20%	36 20%	19 24%	27 25%	28 19%
3	40 15%	581 12%	5 19%~	7 16%~	4 10%~	5 9%	13 17%	3 15%~	23 13%	~	~	~	~	~	6 24%~	2 6%~	33 15%	24 13%	13 16%	12 11%	24 16%
4	20 7%	402 8%	~	4 9%~	3 8%~	5 9%	7 9%	1 5%~	16 9%	~	~	~	~	~	3 12%~	~	19 9%*	8 4%*	11 14%*	7 6%	12 8%
5 TO 9	29 11%	571 12%	3 12%~	4 9%~	4 10%~	4 7%	11 15%	1 5%~	20 11%	~	~	~	~	~	2 8%~	2 6%~	25 11%	15 8%	11 14%	12 11%	15 10%
10 OR MORE TIMES	11 4%	248 5%	1 4%~	1 2%~	2 5%~	2 4%	3 4%	1 5%~	5 3%	~	~	~	~	~	2 8%~	1 3%~	9 4%	6 3%	4 5%	2 2%	8 5%
NOT ANSWERED	14	233	~	6	~	1	2	~	8	~	~	~	~	~	~	1	9	8	1	4	6
VALID CASES	271	4849	26	43	39	55	75	20	182	~	~	~	~	~	25	32	221	179	80	108	151
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190	~	~	~	~	~	25	33	230	187	81	112	157
	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			
	JCC 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	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE
Q8 #YES	154 76%	2535 72%	12 75%~	24 75%~	19 66%~	27 75%~	51 81%	11 73%~	109 80%	~	~	~	~	~	14 61%~	11 65%~	132 78%~	92 74%	52 79%	56 72%	90 80%
NO	48 24%	984 28%	4 25%~	8 25%~	10 34%~	9 25%~	12 19%	4 27%~	28 20%	~	~	~	~	~	9 39%~	6 35%~	37 22%~	33 26%	14 21%	22 28%	23 20%
NOT ANSWERED	5	88			1	2		2	5							5	3	2	3	2	
VALID CASES	202	3519	16	32	29	36	63	15	137					23	17	169	125	66	78	113	
NUMBER OF RESPONDENTS	207	3607	16	32	30	38	63	17	142					23	17	174	128	68	81	115	
	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					
	JCC	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	FE-		
									WHTE	##	##	#	##	##	TI			MALE	MALE		
Q9																					
YES	103 52%	1857 53%	6 38%	19 59%	11 38%	19 56%	37 60%	6 38%	76 56%	~	~	~	~	~	12 55%	3 18%	93 56%	58 47%	40 61%	37 48%	60 54%
NO	97 49%	1655 47%	10 63%	13 41%	18 62%	15 44%	25 40%	10 63%	60 44%	~	~	~	~	~	10 45%	14 82%	74 44%	65 53%	26 39%	40 52%	52 46%
NOT ANSWERED	7	95			1	4	1	1	6					1		7	5	2	4	3	
VALID CASES	200	3512	16	32	29	34	62	16	136					22	17	167	123	66	77	112	
NUMBER OF RESPONDENTS	207 100%	3607 100%	16 100%	32 100%	30 100%	38 100%	63 100%	17 100%	142 100%					23 100%	17 100%	174 100%	128 100%	68 100%	81 100%	115 100%	

[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						ETHNICITY			HEALTH STATUS		GENDER			
	OT1	OT2																					
	JCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &						
	TOT	TOT	TO	TO	TO	TO	TO	AND	AFR-	AS-	HAW/	IND/				HIS-	HIS-	GOOD	FAIR				
	ADLT	ADLT	24	34	44	54	64	OVER	AMER	IAN	ILND	NATV	OTHR	MUL-	TI	IC	IC	&	&			FE-	
									WHTE	##	##	#	##	##	TI	IC	IC	GOOD	POOR			MALE	MALE
Q10																							
#YES	97	1690	6	18	11	19	33	5	72					11	3	88	54	38			36	56	
	96%	93%	100%	95%	100%	100%	94%	83%	97%	~	~	~	~	~	92%	100%	97%	95%	97%	97%	97%	97%	
NO	4	121		1			2	1	2					1	3	3	3	1			1	2	
	4%	7%	~	5%	~	~	6%	17%	3%	~	~	~	~	8%	~	3%	5%	3%	3%	3%	3%	3%	
NOT ANSWERED	2	46					2		2							2	1	1				2	
VALID CASES	101	1811	6	19	11	19	35	6	74					12	3	91	57	39			37	58	
NUMBER OF RESPONDENTS	103	1857	6	19	11	19	37	6	76					12	3	93	58	40			37	60	
	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																			
	JCC	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-		
Q11																					
#YES	74	1346	5	15	11	13	21	6	55					10	2	69	45	26	29	42	
	75%	74%	83%~	83%~	100%~	68%~	60%~	100%~	75%~	~	~	~	~	~	83%~	67%~	77%~	80%~	67%~	81%~	72%~
NO	25	462	1	3		6	14		18					2	1	21	11	13	7	16	
	25%	26%	17%~	17%~	~	32%~	40%~	~	25%~	~	~	~	~	17%~	33%~	23%~	20%~	33%~	19%~	28%~	
NOT ANSWERED	4	49		1			2		3						3	2	1		1	2	
VALID CASES	99	1808	6	18	11	19	35	6	73					12	3	90	56	39	36	58	
NUMBER OF RESPONDENTS	103	1857	6	19	11	19	37	6	76					12	3	93	58	40	37	60	
	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	
	JCC 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
Q12 #YES	77 78%	1378 77%	4 67%~	14 74%~	8 73%~	13 68%~	30 86%~	5 83%~	56 76%~	~	~	~	~	10 83%~	3 100%~	69 76%~	44 77%~	30 77%~	31 84%~	42 72%~
NO	22 22%	420 23%	2 33%~	5 26%~	3 27%~	6 32%~	5 14%~	1 17%~	18 24%~	~	~	~	~	2 17%~	22 ~	24%~	13 23%~	9 23%~	6 16%~	16 28%~
NOT ANSWERED	4	59					2	2							2		1	1		2
VALID CASES	99	1798	6	19	11	19	35	6	74					12	3	91	57	39	37	58
NUMBER OF RESPONDENTS	103	1857	6	19	11	19	37	6	76					12	3	93	58	40	37	60
	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			
	JCC 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
Q13 WORST HEALTH CARE POSSIBLE		19 0.5%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01		22 0.6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02	2 1%	39 1%	~	~	~	1 3%	1 2%	~	2 1%	~	~	~	~	~	~	2 1%	2 2%	~	1 1%	1 0.9%
03	4 2%	63 2%	~	~	~	1 3%	2 3%	1 6%	3 2%	~	~	~	~	1 4%	4 2%	~	4 6%	1 1%	3 3%	
04	4 2%	95 3%	1 6%	~	1 4%	~	2 3%	~	3 2%	~	~	~	~	~	4 2%	3 2%	1 2%	1 1%	3 3%	
05	9 4%	234 7%	~	1 3%	1 4%	5 14%	~	1 6%	7 5%	~	~	~	~	~	1 6%	8 5%	4 3%	5 8%	2 3%	7 6%
06	21 10%	215 6%	2 13%	2 6%	3 11%	1 3%	8 13%	3 19%	12 9%	~	~	~	~	3 13%	15 9%	11 9%	9 14%	6 8%	12 11%	
07	23 11%	442 13%	7 44%	2 6%	3 11%	3 8%	6 10%	2 13%	13 9%	~	~	~	~	6 26%	3 18%	20 12%	17 14%	5 8%	11 14%	12 11%
08	43 21%	779 22%	1 6%	10 31%	8 29%	10 27%	9 15%	3 19%	30 22%	~	~	~	~	4 17%	3 18%	37 22%	27 22%	14 21%	13 16%	27 24%
09	40 20%	592 17%	1 6%	10 31%	5 18%	8 22%	11 18%	2 13%	27 20%	~	~	~	~	5 22%	6 35%	32 19%	27 22%	10 15%	18 23%	20 18%
BEST HEALTH CARE POSSIBLE	55 27%	1011 29%	4 25%	7 22%	7 25%	8 22%	23 37%*	4 25%	40 29%	~	~	~	~	4 17%	4 24%	47 28%	34 27%	18 27%	26 33%	27 24%
#8-10 (NET)	138 69%	2382 68%	6 38%	27 84%	20 71%	26 70%	43 69%	9 56%	97 71%	~	~	~	~	13 57%	13 76%	116 69%	88 70%	42 64%	57 72%	74 66%

Continued

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER				
	JCC 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 TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE-MALE
9-10 (NET)	95 47%	1603 46%	5 31%~	17 53%~	12 43%~	16 43%~	34 55%	6 38%~	67 49%	~	~	~	~	~	9 39%~	10 59%~	79 47%~	61 49%	28 42%	44 56%	47 42%	
NOT ANSWERED	6	96			2	1	1	1	5							5	3	2		2	3	
VALID CASES	201	3511	16	32	28	37	62	16	137					23	17	169	125	66	79	112		
NUMBER OF RESPONDENTS	207	3607	16	32	30	38	63	17	142					23	17	174	128	68	81	115		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%	
MEAN	8.05	7.94	7.63	8.47	8.11	7.81	8.18	7.63	8.07					7.83	8.47	8.02	8.16	7.76	8.33	7.86		
p stat_(*=Sig @ p<=.05)		.410	~	~	~	~	.515	~	.785	~	~	~	~	~	~	~	.279	.118	.085	.098		

[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																			
	JCC	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-	AMER	ILND	NATV	OTHR	MUL-	TI	IC	IC	&	&		
									WHTE	##	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q14 NEVER	3 1%	90 3%	1 6%	1 3%	~	~	1 2%	~	3 2%	~	~	~	~	~	~	3 2%	2 2%	~	2 3%	1 0.9%	
SOMETIMES	33 16%	539 15%	4 25%	5 16%	4 14%	8 22%	6 10%*	5 31%	21 15%	~	~	~	~	5 22%	3 18%	29 17%	19 15%	14 21%	10 13%	23 20%	
USUALLY	63 31%	1150 33%	5 31%	12 39%	9 31%	12 32%	19 30%	5 31%	43 31%	~	~	~	~	7 30%	7 41%	51 30%	38 30%	23 35%	28 35%	32 28%	
ALWAYS	102 51%	1722 49%	6 38%	13 42%	16 55%	17 46%	37 59%	6 38%	71 51%	~	~	~	~	11 48%	7 41%	87 51%	66 53%	29 44%	39 49%	57 50%	
#ALWAYS + USUALLY (NET)	165 82%	2872 82%	11 69%	25 81%	25 86%	29 78%	56 89%	11 69%	114 83%	~	~	~	~	18 78%	14 82%	138 81%	104 83%	52 79%	67 85%	89 79%	
TOP BOX SCORE	102 51%	1722 49%	6 38%	13 42%	16 55%	17 46%	37 59%	6 38%	71 51%	~	~	~	~	11 48%	7 41%	87 51%	66 53%	29 44%	39 49%	57 50%	
NOT ANSWERED	6	106		1	1	1		1	4							4	3	2	2	2	
VALID CASES	201	3501	16	31	29	37	63	16	138					23	17	170	125	66	79	113	
NUMBER OF RESPONDENTS	207	3607	16	32	30	38	63	17	142					23	17	174	128	68	81	115	
	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			
	JCC 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
Q15 YES	232 83%	3993 82%	19 73%	44 90%	30 79%	48 86%	62 81%	20 100%	161 86%	~	~	~	~	~	23 92%	24 73%	193 85%	150 81%	71 88%	96 86%	127 81%
NO	47 17%	904 18%	7 27%	5 10%	8 21%	8 14%	15 19%	~	27 14%	~	~	~	~	~	2 8%	9 27%	35 15%	35 19%	10 12%	15 14%	29 19%
NOT ANSWERED	6	185			1				2								2	2		1	1
VALID CASES	279	4897	26	49	38	56	77	20	188					25	33	228	185	81	111	156	
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157	
	100%	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 #	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE	
Q16 NONE	52 24%	792 21%	8 47%~	9 23%~	9 32%~	10 24%~	11 19%	2 11%~	35 24%	~	~	~	~	5 ~ 25%~	6 29%~	43 24%~	43 30%*	7 11%*	20 22%	30 27%	
1 TIME	62 29%	995 27%	3 18%~	13 33%~	7 25%~	10 24%~	16 28%	10 53%~	41 28%	~	~	~	~	6 ~ 30%~	8 38%~	49 28%~	39 27%	20 32%	35 38%*	24 21%*	
2	43 20%	792 21%	3 18%~	7 18%~	5 18%~	10 24%~	16 28%	2 11%~	35 24%*	~	~	~	~	1 ~ 5%~	4 19%~	37 21%~	28 20%	15 24%	17 19%	26 23%	
3	24 11%	483 13%	2 12%~	3 8%~	4 14%~	6 14%~	5 9%	3 16%~	15 10%	~	~	~	~	4 ~ 20%~	3 14%~	20 11%~	13 9%	10 16%	7 8%	16 14%	
4	12 6%	279 7%	~	3 8%~	2 7%~	3 7%~	4 7%	~	9 6%	~	~	~	~	3 ~ 15%~	~	11 6%~	7 5%	5 8%	4 4%	8 7%	
5 TO 9	17 8%	312 8%	1 6%~	4 10%~	~	3 7%~	5 9%	2 11%~	11 7%	~	~	~	~	1 ~ 5%~	~	14 8%~	10 7%	4 6%	7 8%	7 6%	
10 OR MORE TIMES	3 1%	88 2%	~	1 3%~	1 4%~	~	1 2%	~	2 1%	~	~	~	~	~	~	3 2%~	2 1%	1 2%	1 1%	2 2%	
NOT ANSWERED	19	252	2	4	2	6	4	1	13					3	3	16	8	9	5	14	
VALID CASES	213	3741	17	40	28	42	58	19	148					20	21	177	142	62	91	113	
NUMBER OF RESPONDENTS	232	3993	19	44	30	48	62	20	161					23	24	193	150	71	96	127	
	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	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	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE		
Q17 NEVER	2 1%	51 2%	~	~	5%~	~	~	0.9%~	~	~	~	~	~	~	7%~	0.8%~	1%	~	~	2%~		
SOMETIMES	11 7%	190 6%	~	3%~	5%~	16%~	4%~	6%~	2%~	~	~	~	~	20%~	13%~	5%~	6%	9%	3%	8%		
USUALLY	32 20%	579 20%	33%~	4%~	13%~	5%~	22%~	22%~	29%~	19%~	~	~	~	~	20%~	7%~	19%~	17%	24%	23%	16%	
ALWAYS	115 72%	2109 72%	67%~	26%~	84%~	16%~	84%~	63%~	74%~	65%~	79%~	~	~	~	~	60%~	73%~	75%~	76%	67%	74%	61%
#ALWAYS + USUALLY (NET)	147 92%	2688 92%	100%~	97%~	89%~	84%~	96%~	94%~	97%~	~	~	~	~	~	80%~	80%~	94%~	93%	91%	97%*	89%	
TOP BOX SCORE	115 72%	2109 72%	67%~	26%~	84%~	16%~	84%~	63%~	74%~	65%~	79%~	~	~	~	~	60%~	73%~	75%~	76%	67%	74%	61%
NOT ANSWERED	1	20					1		1							1		1		1		
VALID CASES	160	2929	9	31	19	32	46	17	112				15	15	133	99	54	70	83			
NUMBER OF RESPONDENTS	161	2949	9	31	19	32	47	17	113				15	15	134	99	55	71	83			
	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	100%	

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER							
	OT1	OT2	18	25	35	45	55	65	BLCK	AS-	NATV	AMER												
	JCC	OHP	TO	TO	TO	TO	TO	AND	OR	AFR-	IAN	HAW/	IND/	ALSK	OTH	MUL-	HIS-	HIS-	NOT	VERY	GOOD	FAIR	FE-	
	TOT	TOT	24	34	44	54	64	OVER	WHTE	##	##	#	##	##	##	TI	IC	IC	GOOD	&	POOR	MALE	MALE	
Q19																								
NEVER	2	55				1	1	1							1		2		2		2		2	
	1%	2%	~	~	~	3%	2%	0.9%	~	~	~	~	~	~	7%	~	2%	~	4%	~	2%	~	2%	~
SOMETIMES	11	211	1			5	3	1	6						1	1	7	6	5	3	7	4	8	
	7%	7%	11%	~	~	16%	7%	6%	5%	~	~	~	~	~	7%	7%	5%	6%	9%	4%	8%			
USUALLY	27	437	1	4	5	5	7	4	19							2	21	16	10	10	14	14	17	
	17%	15%	11%	13%	26%	16%	15%	24%	17%	~	~	~	~	~	~	13%	16%	16%	19%	14%	17%			
ALWAYS	119	2221	7	27	14	21	35	12	86						13	12	103	77	37	57	60	81	72	
	75%	76%	78%	87%	74%	66%	76%	71%	77%	~	~	~	~	~	87%	80%	77%	78%	69%	81%	72%			
#ALWAYS + USUALLY (NET)	146	2658	8	31	19	26	42	16	105						13	14	124	93	47	67	74	96	89	
	92%	91%	89%	100%	100%	81%	91%	94%	94%	~	~	~	~	~	87%	93%	93%	94%	87%	96%	89%			
TOP BOX SCORE	119	2221	7	27	14	21	35	12	86						13	12	103	77	37	57	60	81	72	
	75%	76%	78%	87%	74%	66%	76%	71%	77%	~	~	~	~	~	87%	80%	77%	78%	69%	81%	72%			
NOT ANSWERED	2	25					1		1								1		1		1			
VALID CASES	159	2924	9	31	19	32	46	17	112						15	15	133	99	54	70	83			
NUMBER OF RESPONDENTS	161	2949	9	31	19	32	47	17	113						15	15	134	99	55	71	83			
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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																		
	JCC	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			IC	IC	&	&		
									AMER	ILND	NATV	OTHR	MUL-			GOOD	POOR	MALE	FE-	
									##	##	#	##	##	TI					MALE	MALE
Q20																				
NEVER	4	87	1			1	1							1		2	2	2	1	2
	3%	3%	11%~	~	~	3%~	2%~	~0.9%~	~	~	~	~	~	7%~	~	2%~	2%	4%	1%	2%
SOMETIMES	13	259	1	3		5	2	1	10						1	10	7	5	4	8
	8%	9%	11%~	10%~	~	16%~	4%~	6%~	9%~	~	~	~	~	~	7%~	8%~	7%	9%	6%	10%
USUALLY	42	721	3	4	7	7	13	7	29					4	5	35	23	18	17	24
	26%	25%	33%~	13%~	37%~	22%~	28%~	41%~	26%~	~	~	~	~	~27%~	33%~	26%~	23%	33%	24%	29%
ALWAYS	100	1860	4	24	12	19	30	9	72					10	9	86	67	29	48	49
	63%	64%	44%~	77%~	63%~	59%~	65%~	53%~	64%~	~	~	~	~	~67%~	60%~	65%~	68%	54%	69%	59%
#ALWAYS + USUALLY (NET)	142	2581	7	28	19	26	43	16	101					14	14	121	90	47	65	73
	89%	88%	78%~	90%~	100%~	81%~	93%~	94%~	90%~	~	~	~	~	~93%~	93%~	91%~	91%	87%	93%	88%
TOP BOX SCORE	100	1860	4	24	12	19	30	9	72					10	9	86	67	29	48	49
	63%	64%	44%~	77%~	63%~	59%~	65%~	53%~	64%~	~	~	~	~	~67%~	60%~	65%~	68%	54%	69%	59%
NOT ANSWERED	2	22					1		1							1		1		1
VALID CASES	159	2927	9	31	19	32	46	17	112					15	15	133	99	54	70	83
NUMBER OF RESPONDENTS	161	2949	9	31	19	32	47	17	113					15	15	134	99	55	71	83
	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					
	JCC	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
Q21																				
YES	94	1800	6	20	13	17	24	13	69					8	7	83	61	30	42	50
	60%	62%	67%~	65%~	68%~	55%~	53%~	81%~	63%~	~	~	~	~	~ 53%~	47%~	63%~	62%	59%	61%	62%
NO	62	1107	3	11	6	14	21	3	40					7	8	48	38	21	27	31
	40%	38%	33%~	35%~	32%~	45%~	47%~	19%~	37%~	~	~	~	~	~ 47%~	53%~	37%~	38%	41%	39%	38%
NOT ANSWERED	5	42				1	2	1	4							3		4	2	2
VALID CASES	156	2907	9	31	19	31	45	16	109					15	15	131	99	51	69	81
NUMBER OF RESPONDENTS	161	2949	9	31	19	32	47	17	113					15	15	134	99	55	71	83
	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		
	JCC 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	2 2%	108 6%*	~	~	~	12%~	~	~	~	~	~	~	~	~	~	2%~	3%~	~	2%~	2%~
SOMETIMES	16 17%	264 15%	33%~	10%~	8%~	12%~	21%~	23%~	~	~	~	~	~	13%~	14%~	17%~	16%~	17%~	14%~	20%~
USUALLY	23 24%	517 30%	50%~	25%~	23%~	35%~	21%~	8%~	~	~	~	~	~	13%~	29%~	24%~	25%~	27%~	24%~	24%~
ALWAYS	53 56%	861 49%	17%~	65%~	69%~	41%~	58%~	69%~	~	~	~	~	~	75%~	57%~	57%~	56%~	57%~	60%~	54%~
#ALWAYS + USUALLY (NET)	76 81%	1378 79%	67%~	90%~	92%~	76%~	79%~	77%~	~	~	~	~	~	88%~	86%~	81%~	80%~	83%~	83%~	78%~
TOP BOX SCORE	53 56%	861 49%	17%~	65%~	69%~	41%~	58%~	69%~	~	~	~	~	~	75%~	57%~	57%~	56%~	57%~	60%~	54%~
NOT ANSWERED		50																		
VALID CASES	94	1750	6	20	13	17	24	13	69					8	7	83	61	30	42	50
NUMBER OF RESPONDENTS	94 100%	1800 100%	6 100%	20 100%	13 100%	17 100%	24 100%	13 100%	69 100%					8 100%	7 100%	83 100%	61 100%	30 100%	42 100%	50 100%

[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				
	JCC TOT ADLTT	OHP TOT ADLTT	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	
Q23 WORST PERSONAL DOCTOR POSSIBLE		23 0.6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
01	2 0.9%	32 0.9%	~	~	~	1 2%	1 5%	2 1%	~	~	~	~	~	~	~	2 1%	1 0.7%	1 2%	~	2 2%	
02	3 1%	39 1%	~	1 2%	~	1 2%	1 2%	1 0.7%	~	~	~	~	~	1 5%	1 5%	2 1%	1 0.7%	2 3%	1 1%	2 2%	
03	1 0.5%	60 2%*	~	~	~	~	1 2%	1 0.7%	~	~	~	~	~	~	~	1 0.6%	~	1 2%	1 1%	~	
04	2 0.9%	72 2%	~	~	~	~	1 2%	~	~	~	~	~	~	~	~	1 0.6%	1 0.7%	1 2%	~	1 0.9%	
05	9 4%	188 5%	2 12%	1 2%	~	2 5%	2 4%	2 11%	5 3%	~	~	~	~	1 5%	1 5%	6 3%	5 4%	4 6%	6 7%	3 3%	
06	9 4%	158 4%	2 12%	2 5%	1 3%	~	2 4%	1 5%	8 5%	~	~	~	~	~	~	8 4%	5 4%	3 5%	3 3%	5 4%	
07	23 11%	327 9%	2 12%	1 2%	4 14%	6 14%	7 12%	2 11%	16 11%	~	~	~	~	1 5%	1 5%	20 11%	12 8%	11 17%	6 7%	16 14%	
08	38 18%	632 17%	5 29%	7 17%	7 24%	7 16%	9 16%	2 11%	27 18%	~	~	~	~	~	5 24%	3 14%	34 19%	28 20%	9 14%	14 15%	23 20%
09	41 19%	691 19%	2 12%	9 22%	7 24%	7 21%	9 12%	5 26%	26 18%	~	~	~	~	~	4 19%	7 32%	32 18%	27 19%	12 19%	19 21%	20 17%
BEST PERSONAL DOCTOR POSSIBLE	85 40%	1506 40%	4 24%	20 49%	10 34%	17 40%	27 47%	6 32%	62 42%	~	~	~	~	~	9 43%	9 41%	72 40%	62 44%	20 31%	41 45%	43 37%
#8-10 (NET)	164 77%	2829 76%	11 65%	36 88%	24 83%	33 77%	43 75%	13 68%	115 78%	~	~	~	~	~	18 86%	19 86%	138 78%	117 82%*	41 64%*	74 81%	86 75%

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						ETHNICITY		HEALTH STATUS		GENDER		
	JCC 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	
9-10 (NET)	126 59%	2197 59%	6 35%~	29 71%~	17 59%~	26 60%~	34 60%~	11 58%~	88 59%	~	~	~	~	~	13 62%~	16 73%~	104 58%~	89 63%	32 50%	60 66%	63 55%
NOT ANSWERED	19	265	2	3	1	5	5	1	13					2	2	15	8	7	5	12	
VALID CASES	213	3728	17	41	29	43	57	19	148					21	22	178	142	64	91	115	
NUMBER OF RESPONDENTS	232	3993	19	44	30	48	62	20	161					23	24	193	150	71	96	127	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	
MEAN	8.46	8.34	7.88	8.85	8.72	8.42	8.51	8.00	8.53					8.57	8.68	8.49	8.68	7.92	8.66	8.36	
p stat_(*=Sig @ p<=.05)		.336	~	~	~	~	.819	~	.448	~	~	~	~	~	~	~	~	.024*	.006*	.179	.379

[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						ETHNICITY		HEALTH STATUS		GENDER		
	JCC 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 & POOR	MALE	FE- MALE
Q24 YES	111 41%	1933 40%	7 27%~	20 41%~	13 33%~	18 32%	39 53%*	11 58%~	81 44%	~	~	~	~	~	10 40%~	5 15%~	99 44%~	62 34%*	44 56%*	48 44%	59 38%
NO	162 59%	2928 60%	19 73%~	29 59%~	26 67%~	38 68%	35 47%*	8 42%~	104 56%	~	~	~	~	~	15 60%~	28 85%~	127 56%~	123 66%*	34 44%*	60 56%	97 62%
NOT ANSWERED		12					3	1	5								4	2	3	4	1
VALID CASES	273	4861	26	49	39	56	74	19	185						25	33	226	185	78	108	156
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190						25	33	230	187	81	112	157
	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						ETHNIC-	HEALTH		GENDER		
	OT1	OT2																		
	JCC	OHP	18	25	35	45	55	65	BLK	AS-	NATV	AMER				NOT	EX &			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	IAN	ILND	ALSK				VERY	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	##	##	#	##	##	TI	HIS-	HIS-	GOOD	FAIR	
															IC	IC	&	&		
																GOOD	POOR	MALE	MALE	
Q25																				
NEVER	6	110		2	1	1	2		5							5	4	2	2	3
	6%	6%		~ 11%	8%	6%	5%		7%							5%	7%	5%	4%	5%
SOMETIMES	17	323	2	2		6	4	2	9					4		14	9	6	11	5
	16%	17%	29%	11%	~	35%	11%	20%	12%					40%		15%	15%	15%	23%	9%*
USUALLY	31	543	2	4	3	5	14	3	23					1	2	27	15	15	11	19
	29%	29%	29%	21%	~ 23%	29%	38%	30%	30%					10%	40%	29%	25%	37%	23%	35%
ALWAYS	52	893	3	11	9	5	17	5	39					5	3	48	32	18	23	28
	49%	48%	43%	58%	~ 69%	29%	46%	50%	51%					50%	60%	51%	53%	44%	49%	51%
#ALWAYS + USUALLY (NET)	83	1436	5	15	12	10	31	8	62					6	5	75	47	33	34	47
	78%	77%	71%	79%	~ 92%	59%	84%	80%	82%					60%	100%	80%	78%	80%	72%	85%
TOP BOX SCORE	52	893	3	11	9	5	17	5	39					5	3	48	32	18	23	28
	49%	48%	43%	58%	~ 69%	29%	46%	50%	51%					50%	60%	51%	53%	44%	49%	51%
NOT ANSWERED	5	64		1		1	2	1	5							5	2	3	1	4
VALID CASES	106	1869	7	19	13	17	37	10	76					10	5	94	60	41	47	55
NUMBER OF RESPONDENTS	111	1933	7	20	13	18	39	11	81					10	5	99	62	44	48	59
	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						ETHNIC-	HEALTH		GENDER			
	OT1	OT2													ITY	STATUS					
	JCC	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-	PAN-	&	&		
									WHTE	##	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q26																					
NONE	7	77		1	1		4	1	6					1		7	3	4	2	5	
	7%	4%		~ 6%~	8%~		~ 11%~	10%~	8%~					~ 10%~		~ 7%~	5%~	9%~	4%~	9%	
1 SPECIALIST	66	991	6	12	9	14	18	4	50					1	5	57	42	22	27	37	
	62%	53%	86%~	67%~	69%~	78%~	47%~	40%~	65%~					~ 10%~	100%~	60%~	70%~	51%~	59%~	65%	
2	26	498	1	4	1	4	14	2	15					8		23	12	13	12	12	
	24%	27%	14%~	22%~	8%~	22%~	37%~	20%~	19%~					~ 80%~		~ 24%~	20%~	30%~	26%~	21%	
3	6	191			2		1	3	4							6	3	3	3	3	
	6%	10%*			~ 15%~		~ 3%~	30%~	5%~							~ 6%~	5%~	7%~	7%~	5%	
4	1	64					1		1							1		1	1		
	0.9%	3%*					~ 3%~		1%~							~ 1%~		~ 2%~	2%~		
5 OR MORE SPECIALISTS	1	45		1					1							1			1		
	0.9%	2%		~ 6%~					1%~							~ 1%~			2%~		
NOT ANSWERED	4	67		2			1	1	4							4	2	1	2	2	
VALID CASES	107	1866	7	18	13	18	38	10	77					10	5	95	60	43	46	57	
NUMBER OF RESPONDENTS	111	1933	7	20	13	18	39	11	81					10	5	99	62	44	48	59	
	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					
	JCC 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
Q27 WORST SPECIALIST POSSIBLE		13 0.7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01		14 0.8%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02		12 0.7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03	2 2%	27 2%	~	1 6%	~	1 6%	~	~	1 1%	~	~	~	~	~	~	1 1%	2 4%	~	~	1 2%	1 2%	~
04	1 1%	22 1%	~	~	1 8%	~	~	~	1 1%	~	~	~	~	~	~	1 1%	~	1 3%	~	~	1 2%	~
05	5 5%	83 5%	~	1 6%	1 8%	1 6%	1 3%	~	4 6%	~	~	~	~	~	~	3 4%	2 4%	2 5%	3 7%	1 2%	~	~
06	4 4%	68 4%	1 14%	~	~	1 6%	2 6%	~	3 4%	~	~	~	~	~	~	1 20%	3 4%	2 4%	2 5%	2 5%	2 4%	~
07	6 6%	157 9%	1 14%	1 6%	1 8%	1 6%	2 6%	~	4 6%	~	~	~	~	2 25%	~	6 7%	2 4%	4 11%	3 7%	3 6%	~	~
08	21 22%	318 18%	1 14%	3 18%	2 17%	3 19%	8 24%	4 44%	13 19%	~	~	~	~	~	~	1 20%	17 20%	13 23%	8 21%	5 12%	14 27%	~
09	18 19%	315 18%	2 29%	3 18%	6 50%	2 13%	4 12%	1 11%	15 22%	~	~	~	~	~	~	1 20%	17 20%	13 23%	5 13%	10 24%	8 16%	~
BEST SPECIALIST POSSIBLE	40 41%	742 42%	2 29%	8 47%	1 8%	7 44%	16 48%	4 44%	28 41%	~	~	~	~	6 75%	2 40%	37 44%	22 39%	16 42%	18 43%	21 41%	~	~
#8-10 (NET)	79 81%	1375 78%	5 71%	14 82%	9 75%	12 75%	28 85%	9 100%	56 81%	~	~	~	~	6 75%	4 80%	71 84%	48 86%	29 76%	33 79%	43 84%	~	~

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		
	JCC 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 PAC ALSK	MUL- OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	FE- MALE	MALE	
9-10 (NET)	58 60%	1057 60%	4 57%~	11 65%~	7 58%~	9 56%~	20 61%~	5 56%~	43 62%~	~	~	~	~	~	75%~	3 60%~	54 64%~	35 63%~	21 55%~	28 67%~	29 57%~
NOT ANSWERED	3	18				2	1		2					1		3	1	1	2	1	
VALID CASES	97	1771	7	17	12	16	33	9	69					8	5	85	56	38	42	51	
NUMBER OF RESPONDENTS	100	1789	7	17	12	18	34	9	71					9	5	88	57	39	44	52	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	
MEAN	8.57	8.43	8.43	8.59	8.00	8.31	8.82	9.00	8.58					9.25	8.60	8.72	8.63	8.50	8.60	8.61	
p stat_(*=Sig @ p<=.05)		.486	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

[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						ETHNICITY		HEALTH STATUS		GENDER		
	JCC 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
Q28 YES	54 20%	886 18%	7 27%	11 22%	8 21%	8 14%	16 21%	2 11%	41 22%	~	~	~	~	~	2 8%	5 16%	46 20%	36 19%	17 22%	19 18%	32 21%
NO	218 80%	3943 82%	19 73%	38 78%	31 79%	48 86%	59 79%	16 89%	145 78%	~	~	~	~	~	23 92%	27 84%	181 80%	149 81%	61 78%	89 82%	124 79%
NOT ANSWERED	13	253					2	2	4							1	3	2	3	4	1
VALID CASES	272	4829	26	49	39	56	75	18	186					25	32	227	185	78	108	156	
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157	
	100%	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		
	JCC 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 TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	MALE	FE-MALE
Q29 NEVER	3 6%	78 9%	1 14%~	1 9%~	1 ~	1 14%~	~	1 3%~	~	~	~	~	~	~	1 20%~	1 2%~	2 6%~	1 6%~	~	2 7%~
SOMETIMES	14 27%	290 33%	1 14%~	3 27%~	2 25%~	2 29%~	5 33%~	11 28%~	~	~	~	~	~	~	1 20%~	12 27%~	9 26%~	5 31%~	6 32%~	7 23%~
USUALLY	19 37%	294 34%	2 29%~	3 27%~	4 50%~	3 43%~	5 33%~	2 100%~	13 33%~	~	~	~	~	2 100%~	3 60%~	16 36%~	12 34%~	7 44%~	8 42%~	11 37%~
ALWAYS	16 31%	204 24%	3 43%~	4 36%~	2 25%~	1 14%~	5 33%~	14 36%~	~	~	~	~	~	~	15 34%~	12 34%~	3 19%~	5 26%~	10 33%~	
#ALWAYS + USUALLY (NET)	35 67%	498 58%	5 71%~	7 64%~	6 75%~	4 57%~	10 67%~	2 100%~	27 69%~	~	~	~	~	2 100%~	3 60%~	31 70%~	24 69%~	10 63%~	13 68%~	21 70%~
TOP BOX SCORE	16 31%	204 24%	3 43%~	4 36%~	2 25%~	1 14%~	5 33%~	14 36%~	~	~	~	~	~	~	15 34%~	12 34%~	3 19%~	5 26%~	10 33%~	
NOT ANSWERED	2	20				1 1	1 1	2							2	1 1	1 1			2
VALID CASES	52	866	7	11	8	7	15	2	39					2	5	44	35	16	19	30
NUMBER OF RESPONDENTS	54	886	7	11	8	8	16	2	41					2	5	46	36	17	19	32
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER				
	OT1	OT2												ITY	STATUS						
	JCC	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				
Q30																					
YES	71	1269	13	13	11	12	14	4	46					2	15	52	47	20	29	39	
	26%	26%	50%~	27%~	29%~	21%	19%	22%~	25%	~	~	~	~	~	8%~	45%~	23%~	26%	26%	27%	25%
NO	198	3524	13	36	27	44	59	14	136					23	18	171	135	58	78	115	
	74%	74%	50%~	73%~	71%~	79%	81%	78%~	75%	~	~	~	~	~	92%~	55%~	77%~	74%	74%	73%	75%
NOT ANSWERED	16	289			1		4	2	8						7	5	3		5	3	
VALID CASES	269	4793	26	49	38	56	73	18	182					25	33	223	182	78	107	154	
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157	
	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						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18	25	35	45	55	65	AND	BLK	AS-	NATV	AMER					EX &		
JCC	OHP	18	25	35	45	55	65	AND	BLK	AS-	NATV	AMER					EX &			
TOT	TOT	TO	TO	TO	TO	TO	TO	AND	OR	IAN	ILND	ALSK				NOT	VERY	GOOD	FAIR	
ADLT	ADLT	24	34	44	54	64	OVER	WHTE	AFR-						HIS-	HIS-	GOOD	FAIR		
									##	##	#	##	##	TI	IC	IC	&	&	MALE	
																	GOOD	POOR	MALE	
Q31																				
NEVER	2	39	1	1	1	1	1	1	2%	~	~	~	~	~	~	1	2	~	~	3%
	3%	3%	~	8%~	~	10%~	~	~	~	~	~	~	~	~	~	2%	5%	~	~	3%~
SOMETIMES	7	212	1	1	1	2	1	5	12%	~	~	~	~	~	~	6	2	5	2	4
	11%	17%	8%~	~	9%~	10%~	15%~	33%~	~	~	~	~	~	~	~	12%	5%	28%	7%	11%~
USUALLY	23	361	6	4	4	4	4	13	30%	~	~	~	~	~	~	7	15	17	5	14
	35%	29%	46%~	33%~	36%~	40%~	31%~	~	~	~	~	~	~	~	~	54%	31%	39%	28%	32%~
ALWAYS	34	619	6	7	6	4	7	24	56%	~	~	~	~	~	2	6	27	23	8	17
	52%	50%	46%~	58%~	55%~	40%~	54%~	67%~	~	~	~	~	~	~	100%	46%	55%	52%	44%	61%~
#ALWAYS + USUALLY (NET)	57	980	12	11	10	8	11	2	37	~	~	~	~	~	2	13	42	40	13	26
	86%	80%	92%~	92%~	91%~	80%~	85%~	67%~	86%	~	~	~	~	~	100%	100%	86%	91%	72%	93%~
TOP BOX SCORE	34	619	6	7	6	4	7	24	56%	~	~	~	~	~	2	6	27	23	8	17
	52%	50%	46%~	58%~	55%~	40%~	54%~	67%~	~	~	~	~	~	~	100%	46%	55%	52%	44%	61%~
NOT ANSWERED	5	38	1	2	1	1	3									2	3	3	2	4
VALID CASES	66	1231	13	12	11	10	13	3	43						2	13	49	44	18	28
NUMBER OF RESPONDENTS	71	1269	13	13	11	12	14	4	46						2	15	52	47	20	29
	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						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18	25	35	45	55	65	BLCK	AS-	NATV	AMER					EX &			
	JCC	OHP	TO	TO	TO	TO	TO	AND	OR	IAN	ILND	ALSK				VERY	FAIR			
	TOT	TOT	24	34	44	54	64	OVER	WHTE	##	##	#	##	##	TI	HIS-	HIS-	GOOD	POOR	FE-
	ADLT	ADLT													IC	IC	&	&	MALE	MALE
Q32																				
NEVER	3	16		1	1	1			1							2	3			2
	5%	1%		~ 8%	~ 9%	~ 9%			2%							~ 4%	7%			~ 6%
SOMETIMES	3	61	1			1	1		1						2	1	3			2
	5%	5%	8%			~ 9%	~ 33%		2%						~ 14%	~ 2%	7%			~ 3%
USUALLY	7	224	3		1		2		4						2	5	1	5		3
	11%	18%*	23%		~ 9%		~ 17%		10%						~ 14%	~ 10%	2%	28%		11%
ALWAYS	53	929	9	11	9	9	10	2	36					2	10	40	37	13		23
	80%	76%	69%	92%	82%	82%	83%	67%	86%					~ 100%	71%	83%	84%	72%		82%
#ALWAYS + USUALLY (NET)	60	1153	12	11	10	9	12	2	40					2	12	45	38	18		26
	91%	94%	92%	92%	91%	82%	100%	67%	95%					~ 100%	86%	94%	86%	100%		93%
TOP BOX SCORE	53	929	9	11	9	9	10	2	36					2	10	40	37	13		23
	80%	76%	69%	92%	82%	82%	83%	67%	86%					~ 100%	71%	83%	84%	72%		82%
NOT ANSWERED	5	39		1		1	2	1	4						1	4	3	2		1
VALID CASES	66	1230	13	12	11	11	12	3	42					2	14	48	44	18		28
NUMBER OF RESPONDENTS	71	1269	13	13	11	12	14	4	46					2	15	52	47	20		29
	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							ETHNICITY		HEALTH STATUS		GENDER					
	OT1	OT2																								
	JCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER								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-				&	&							
									WHTE	##	##	#	##	##	TI			GOOD	POOR							
																		GOOD	POOR							
Q33																										
YES	110	1787	11	20	18	16	34	5	73					12	13	90	73	31	46	59						
	41%	37%	44%~	41%~	46%~	29%*	47%	26%~	39%	~	~	~	~	~	48%~	42%~	40%~	40%	40%	43%	39%					
NO	158	2987	14	29	21	39	39	14	112					13	18	135	108	47	62	94						
	59%	63%	56%~	59%~	54%~	71%*	53%	74%~	61%	~	~	~	~	~	52%~	58%~	60%~	60%	60%	57%	61%					
NOT ANSWERED	17	308	1			1	4	1	5								2	5	6	3	4	4				
VALID CASES	268	4774	25	49	39	55	73	19	185					25	31	225	181	78	108	153						
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157						
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%					

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2	18	25	35	45	55	65	AND	BLCK	AS-	NATV	AMER					EX &	FAIR		
	JCC	OHP	TO	TO	TO	TO	TO	AND	OR	IAN	ILND	ALSK					VERY	&			
	TOT	TOT	24	34	44	54	64	OVER	WHTE	##	##	#	##	##	MUL-	HIS-	HIS-	GOOD	POOR	MALE	MALE
	ADLT	ADLT												TI	IC	IC	&				
PQ34																					
NEVER	2	91			1		1							1	1	1		2			2
	0.8%	2%	~	~	3%	~	1%	~	~	~	~	~	~	4%	3%	0.5%	~	3%	~	~	1%
SOMETIMES	13	301	3	2	1	3	4		8					3	1	11	8	5	11	2	
	5%	6%	12%	4%	3%	5%	6%	~	4%	~	~	~	~	12%	3%	5%	4%	7%	10%*	1%*	
USUALLY	50	677	6	10	5	10	13	3	34					2	7	40	36	12	18	30	
	19%	14%	24%	20%	13%	18%	18%	16%	19%	~	~	~	~	8%	23%	18%	20%	16%	17%	20%	
ALWAYS	199	3637	16	37	31	42	53	16	140					19	22	170	136	57	79	116	
	75%	77%	64%	76%	82%	76%	75%	84%	77%	~	~	~	~	76%	71%	77%	76%	75%	73%	77%	
#ALWAYS + USUALLY (NET)	249	4314	22	47	36	52	66	19	174					21	29	210	172	69	97	146	
	94%	92%	88%	96%	95%	95%	93%	100%	96%	~	~	~	~	84%	94%	95%	96%	91%	90%*	97%*	
TOP BOX SCORE	199	3637	16	37	31	42	53	16	140					19	22	170	136	57	79	116	
	75%	77%	64%	76%	82%	76%	75%	84%	77%	~	~	~	~	76%	71%	77%	76%	75%	73%	77%	
NOT ANSWERED	4	68			1		2		3							3	1	2		3	
VALID CASES	264	4706	25	49	38	55	71	19	182					25	31	222	180	76	108	150	
NUMBER OF RESPONDENTS	268	4774	25	49	39	55	73	19	185					25	31	225	181	78	108	153	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

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

	BANT OT1	BANT OT2	AGE					RACE						ETHNICITY	HEALTH STATUS		GENDER			
	JCC 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
Q35 WORST HEALTH PLAN POSSIBLE	1 0.4%	33 0.7%	~	~	~	~	1%	~	~	~	~	~	~	~	1 4%	1 ~0.5%	1 ~	1 1%	~	1 ~0.7%
01	1 0.4%	31 0.7%	~	~	~	~	1%	~0.6%	~	~	~	~	~	~	1 ~0.5%	1 ~0.6%	~	1 1%	~	
02	2 0.8%	51 1%	~	~	3%	2%	~	1%	~	~	~	~	~	~	2 ~0.9%	2 1%	~	~	2 1%	
03	4 2%	61 1%	~	~	~	2%	3%	5%	1%	~	~	~	~	1 4%	3 ~1%	2 1%	2 3%	1 1%	3 2%	
04	6 2%	105 2%	1 4%	1 2%	1 3%	~	3 4%	~	6 3%	~	~	~	~	~	6 ~3%	3 2%	3 4%	3 3%	3 2%	
05	19 7%	381 8%	3 12%	2 4%	2 6%	7 13%	4 6%	~	12 7%	~	~	~	~	2 8%	2 7%	15 7%	11 6%	7 9%	8 8%	10 7%
06	12 5%	291 6%	1 4%	~	2 6%	4 8%	3 4%	2 11%	9 5%	~	~	~	~	1 4%	1 3%	10 5%	6 3%	6 8%	5 5%	6 4%
07	31 12%	602 13%	4 16%	9 20%	4 12%	3 6%*	6 8%	2 11%	19 11%	~	~	~	~	5 21%	1 3%	28 13%	20 11%	10 14%	10 10%	19 13%
08	55 21%	920 20%	4 16%	13 29%	6 18%	12 23%	13 18%	6 32%	38 22%	~	~	~	~	6 25%	7 23%	47 22%	42 24%	11 15%	20 19%	35 24%
09	50 19%	736 16%	7 28%	6 13%	8 24%	7 13%	18 25%	3 16%	33 19%	~	~	~	~	5 21%	6 20%	41 19%	31 18%	18 24%	22 21%	26 18%
BEST HEALTH PLAN POSSIBLE	76 30%	1385 30%	5 20%	14 31%	10 29%	18 34%	21 29%	5 26%	54 31%	~	~	~	~	3 13%	13 43%	60 28%	58 33%	16 22%	34 33%	41 28%
#8-10 (NET)	181 70%	3041 66%	16 64%	33 73%	24 71%	37 70%	52 72%	14 74%	125 71%	~	~	~	~	14 58%	26 87%	148 69%	131 74%*	45 61%*	76 73%	102 70%

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			
	JCC 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)	126 49%	2121 46%	12 48%	20 44%	18 53%	25 47%	39 54%	8 42%	87 49%	~	~	~	~	~	8 33%	19 63%	101 47%	89 51%	34 46%	56 54%	67 46%	
NOT ANSWERED	28	486	1	4	5	3	5	1	14					1	3	16	11	7	8	11		
VALID CASES	257	4596	25	45	34	53	72	19	176					24	30	214	176	74	104	146		
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%	
MEAN	8.07	7.93	7.92	8.33	8.12	8.00	7.99	8.11	8.09					7.38	8.77	8.01	8.23	7.69	8.21	8.00		
p stat_(*=Sig @ p<=.05)	.248		~	~	~.759	.655		~.892	~	~	~	~	~	~	~	~	~.067	.045*	.351	.489		

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			
	JCC 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 TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE	
Q35A YES	28 11%	599 12%	1 4%	5 11%	3 8%	5 9%	10 14%	4 21%	20 11%	~	~	~	~	~	3 12%	1 3%	25 11%	13 7%*	14 18%*	12 11%	15 10%
NO	238 89%	4210 88%	25 96%	42 89%	35 92%	51 91%	63 86%	15 79%	161 89%	~	~	~	~	~	22 88%	32 97%	197 89%	169 93%*	63 82%*	96 89%	137 90%
NOT ANSWERED	19	273		2	1		4	1	9							8	5	4	4	5	
VALID CASES	266	4809	26	47	38	56	73	19	181					25	33	222	182	77	108	152	
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157	
	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						ETHNIC-	HEALTH		GENDER		
	OT1	OT2																		
	JCC	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-	VERY		
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	##	##	#	##	##	TI	IC	IC	GOOD		
																		FAIR		
																		&		
																		POOR		
																		MALE		
																		MALE		
Q35B																				
NEVER	5	90		1	2	1	1		3						1	4	2	3	1	3
	21%	16%		~ 20%	67%	~ 20%	17%		~ 19%						~ 33%	~ 19%	17%	27%	9%	25%
SOMETIMES	1	83					1								1	1		1		1
	4%	15%		~	~	~	~ 17%		~						~ 33%	~ 5%	~	9%	~	8%
USUALLY	6	129	1	1		2	1	1	3						1	1	5	3	2	3
	25%	23%	~ 100%	~ 20%		~ 40%	17%	25%	~ 19%						~ 33%	~ 100%	~ 24%	25%	18%	27%
ALWAYS	12	262		3	1	2	3	3	10							11	7	5	7	5
	50%	46%		~ 60%	33%	~ 40%	50%	75%	~ 63%						~	~ 52%	58%	45%	64%	42%
#ALWAYS + USUALLY (NET)	18	391	1	4	1	4	4	4	13						1	1	16	10	7	10
	75%	69%	~ 100%	~ 80%	33%	~ 80%	67%	~ 100%	~ 81%						~ 33%	~ 100%	~ 76%	83%	64%	91%
TOP BOX SCORE	12	262		3	1	2	3	3	10							11	7	5	7	5
	50%	46%		~ 60%	33%	~ 40%	50%	75%	~ 63%						~	~ 52%	58%	45%	64%	42%
NOT ANSWERED	4	35					4		4							4	1	3	1	3
VALID CASES	24	564	1	5	3	5	6	4	16					3	1	21	12	11	11	12
NUMBER OF RESPONDENTS	28	599	1	5	3	5	10	4	20					3	1	25	13	14	12	15
	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			
	JCC 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
Q35C YES	42 16%	759 16%	4 15%	6 13%	5 13%	8 14%	13 18%	4 22%	29 16%	~	~	~	~	~	5 20%	2 6%	37 17%	21 12%*	19 24%*	15 14%	25 16%
NO	223 84%	3989 84%	22 85%	42 88%	33 87%	48 86%	59 82%	14 78%	153 84%	~	~	~	~	~	20 80%	31 94%	185 83%	159 88%*	59 76%*	92 86%	128 84%
NOT ANSWERED	20	334	1	1			5	2	8							8	7	3	5	4	
VALID CASES	265	4748	26	48	38	56	72	18	182					25	33	222	180	78	107	153	
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157	
	100%	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												ITY	STATUS					
	JCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/			NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ALSK	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR			
									AMER				TI	IC	IC	&	&			
									WHTE	##	##	#	##	#	IC	IC	GOOD	POOR		
																		MALE	MALE	
Q35D																				
NEVER	12	121	1	1	2	4	2	2	7				2	11	7	5	5	7		
	31%	17%	25%	17%	50%	57%	17%	50%	26%	~	~	~	~	40%	~	31%	35%	29%	33%	32%
SOMETIMES	5	129		1	1	1	2		3				2	5	3	2	1	4		
	13%	18%	~	17%	25%	14%	17%	~	11%	~	~	~	~	40%	~	14%	15%	12%	7%	18%
USUALLY	5	170	2	1		1			3					1	3	3	2	1	3	
	13%	23%	50%	17%	~	14%	~	~	11%	~	~	~	~	100%	9%	15%	12%	7%	14%	
ALWAYS	17	308	1	3	1	1	8	2	14				1	16	7	8	8	8		
	44%	42%	25%	50%	25%	14%	67%	50%	52%	~	~	~	~	20%	~	46%	35%	47%	53%	36%
#ALWAYS + USUALLY (NET)	22	478	3	4	1	2	8	2	17				1	1	19	10	10	9	11	
	56%	66%	75%	67%	25%	29%	67%	50%	63%	~	~	~	~	20%	100%	54%	50%	59%	60%	50%
TOP BOX SCORE	17	308	1	3	1	1	8	2	14				1	16	7	8	8	8		
	44%	42%	25%	50%	25%	14%	67%	50%	52%	~	~	~	~	20%	~	46%	35%	47%	53%	36%
NOT ANSWERED	3	31			1	1	1		2					1	2	1	2		3	
VALID CASES	39	728	4	6	4	7	12	4	27				5	1	35	20	17	15	22	
NUMBER OF RESPONDENTS	42	759	4	6	5	8	13	4	29				5	2	37	21	19	15	25	
	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	25	35	45	55	65	BLCK	NATV	AMER	AFR-	AS-	HAW/	IND/	OTH	MUL-	HIS-	HIS-	NOT	EX &	VERY	GOOD	FAIR	FE-	MALE
JCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER	AFR-	AS-	HAW/	IND/	OTH	MUL-	HIS-	HIS-	NOT	EX &	VERY	GOOD	FAIR	FE-	MALE	MALE
TOT	TOT	TO	TO	TO	TO	TO	AND	OR	ILND	ALSK	AMER	IAN	PAC	ALS	TI	IC	IC	IC	IC	GOOD	POOR	GOOD	POOR	MALE	MALE	
ADLT	ADLT	24	34	44	54	64	OVER	WHTE	##	##	##	##	##	##	##	##	##	##	##	##	##	##	##	##	##	##
Q35E																										
ALWAYS	7 3%	178 4%	3 ~	1 6%~	1 3%~	2 ~	3%	7 4%~	~	~	~	~	~	~	~	~	~	~	7 3%~	3 2%	3 4%	4 4%	3 4%	4 2%	3 2%	
USUALLY	8 3%	193 4%	1 4%~	3 6%~	2 5%~	1 2%	1 1%	3 2%	~	~	~	~	~	~	~	1 4%	2 7%~	4 2%~	4 2%	4 2%	4 5%	3 3%	4 3%	3 3%	4 3%	
SOMETIMES	41 15%	804 17%	4 16%~	6 12%~	2 5%~	9 17%	12 16%	3 16%~	28 15%	~	~	~	~	~	~	1 4%	4 13%~	32 14%~	16 9%*	23 29%*	16 15%	23 14%	16 15%	21 14%	21 14%	
NEVER	210 79%	3575 75%	20 80%~	37 76%~	32 86%~	44 81%	59 80%	16 84%~	148 80%	~	~	~	~	~	~	22 92%~	24 80%~	181 81%~	159 87%*	48 62%*	85 79%	124 82%	124 82%	124 82%		
#NEVER + SOMETIMES (NET)	251 94%	4379 92%	24 96%~	43 88%~	34 92%~	53 98%	71 96%	19 100%~	176 95%	~	~	~	~	~	~	23 96%~	28 93%~	213 95%~	175 96%	71 91%	101 94%	145 95%	145 95%	145 95%		
TOP BOX SCORE	210 79%	3575 75%	20 80%~	37 76%~	32 86%~	44 81%	59 80%	16 84%~	148 80%	~	~	~	~	~	~	22 92%~	24 80%~	181 81%~	159 87%*	48 62%*	85 79%	124 82%	124 82%	124 82%		
NOT ANSWERED	19	332	1		2	2	3	1	4							1	3	6	5	3	4	5	4	5		
VALID CASES	266	4750	25	49	37	54	74	19	186							24	30	224	182	78	108	152	108	152		
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190							25	33	230	187	81	112	157	112	157		
	100%	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																			
	JCC	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	IC	&	&			
									WHTE	##	##	#	##	##	TI		GOOD	POOR	MALE	MALE	
Q35F																					
ALWAYS		66																			
		1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
USUALLY	6	106	1	1	1	2	1								1	2	4	2	2	3	
	2%	2%	4%	2%	3%	4%	1%								3%	0.9%	2%	3%	2%	2%	
SOMETIMES	35	672	2	7	3	7	12	3						4	3	31	15	20	11	23	
	13%	14%	8%	14%	8%	13%	16%	16%	13%					~	16%	9%	14%	8%*	25%*	10%	15%
NEVER	229	3911	22	41	34	47	62	16	159					21	28	193	165	57	95	130	
	85%	82%	88%	84%	89%	84%	83%	84%	85%					~	84%	88%	85%	90%*	72%*	88%	83%
#NEVER + SOMETIMES (NET)	264	4583	24	48	37	54	74	19	184					25	31	224	180	77	106	153	
	98%	96%	96%	98%	97%	96%	99%	100%	98%					~	100%	97%	99%	98%	97%	98%	98%
TOP BOX SCORE	229	3911	22	41	34	47	62	16	159					21	28	193	165	57	95	130	
	85%	82%	88%	84%	89%	84%	83%	84%	85%					~	84%	88%	85%	90%*	72%*	88%	83%
NOT ANSWERED	15	327	1		1		2	1	3						1	4	3	2	4	1	
VALID CASES	270	4755	25	49	38	56	75	19	187					25	32	226	184	79	108	156	
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157	
	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		
	JCC 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 ##	MULTI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE-MALE	MALE
Q35G ALWAYS		55 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
USUALLY	3 1%	67 1%	~	~	~	4%	~	1%	~	~	~	~	~	~	~	~0.9%	~0.5%	3%	~	1%
SOMETIMES	29 11%	487 10%	12%~	10%~	11%~	11%	11%~	12%	~	~	~	~	~	4%~	3%~	11%~	11%	10%	12%	9%
NEVER	238 88%	4149 87%	88%~	90%~	89%~	86%	89%~	87%	~	~	~	~	~	96%~	97%~	88%~	89%	87%	88%	90%
#NEVER + SOMETIMES (NET)	267 99%	4636 97%*	100%~	100%~	100%~	96%	100%~	99%	~	~	~	~	~	100%~	100%~	99%~	99%	97%	100%~	99%
TOP BOX SCORE	238 88%	4149 87%	88%~	90%~	89%~	86%	89%~	87%	~	~	~	~	~	96%~	97%~	88%~	89%	87%	88%	90%
NOT ANSWERED	15	324	1		1		2	1	3						1	4	3	2	4	1
VALID CASES	270	4758	25	49	38	56	75	19	187					25	32	226	184	79	108	156
NUMBER OF RESPONDENTS	285 100%	5082 100%	26 100%	49 100%	39 100%	56 100%	77 100%	20 100%	190 100%					25 100%	33 100%	230 100%	187 100%	81 100%	112 100%	157 100%

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					
	JCC	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		
Q35H																				
#YES DEFINITELY	191	3305	17	41	27	39	50	14	137					18	24	164	138	49	78	112
	73%	70%	71%~	84%~	71%~	74%	68%	74%~	74%	~	~	~	~	~ 72%~	80%~	74%~	77%*	63%*	75%	72%
YES SOMEWHAT	60	1110	5	7	9	11	21	4	41					5	4	51	34	25	20	37
	23%	24%	21%~	14%~	24%~	21%	28%	21%~	22%	~	~	~	~	~ 20%~	13%~	23%~	19%*	32%*	19%	24%
NO	12	300	2	1	2	3	3	1	6					2	2	8	8	4	6	6
	5%	6%	8%~	2%~	5%~	6%	4%	5%~	3%	~	~	~	~	~ 8%~	7%~	4%~	4%	5%	6%	4%
NOT ANSWERED	22	367	2		1	3	3	1	6						3	7	7	3	8	2
VALID CASES	263	4715	24	49	38	53	74	19	184					25	30	223	180	78	104	155
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
	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			
	JCC 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 TI	HIS-PAN-IC	NOT HIS-PAN-IC	VERY GOOD & FAIR & POOR	EX & VERY GOOD & FAIR & POOR	FE-MALE	MALE
Q35I YES	160 59%	2797 58%	17 65%~	31 63%~	29 74%~	27 48%	42 56%	9 50%~	109 59%	~	~	~	~	~	16 64%~	22 67%~	133 59%~	115 62%	43 54%	51 47%*	106 68%*
NO	109 41%	1986 42%	9 35%~	18 37%~	10 26%~	29 52%	33 44%	9 50%~	77 41%	~	~	~	~	~	9 36%~	11 33%~	93 41%~	70 38%	36 46%	58 53%*	50 32%*
NOT ANSWERED	16	299					2	2	4							4		2	2	3	1
VALID CASES	269	4783	26	49	39	56	75	18	186						25	33	226	185	79	109	156
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190						25	33	230	187	81	112	157
	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																			
	JCC	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	&	&			
									WHTE	##	##	#	##	##	TI		GOOD	POOR	MALE	MALE	
Q35J																					
YES	97	1919	7	20	15	18	28	7	65					9	15	80	68	28	33	62	
	36%	40%	28%~	41%~	38%~	33%	37%	37%~	36%	~	~	~	~	~ 36%	45%~	36%~	37%	35%	30%	41%	
NO	169	2885	18	29	24	37	47	12	118					16	18	144	115	51	77	90	
	64%	60%	72%~	59%~	62%~	67%	63%	63%~	64%	~	~	~	~	~ 64%	55%~	64%~	63%	65%	70%	59%	
NOT ANSWERED	19	278	1			1	2	1	7						6	4	2		2	5	
VALID CASES	266	4804	25	49	39	55	75	19	183					25	33	224	183	79	110	152	
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157	
	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			
	JCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER							
	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	
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	
									WHTE	##	##	#	##	##	TI	IC	IC	
																	GOOD	
																	POOR	
																	MALE	
																	MALE	
Q35K																		
NEVER		40																
		2%																
SOMETIMES	6	150	1		1	2	1		3					2	5	4	2	
	6%	8%	14%		7%	12%	4%		5%					22%	6%	6%	8%	
USUALLY	15	356		4	2	4	4	1	11						1	14	12	
	16%	19%		21%	13%	24%	15%	14%	17%						7%	18%	18%	
ALWAYS	73	1310	6	15	12	11	22	6	49					7	13	59	52	
	78%	71%	86%	79%	80%	65%	81%	86%	78%					78%	93%	76%	76%	
#ALWAYS + USUALLY (NET)	88	1666	6	19	14	15	26	7	60					7	14	73	64	
	94%	90%	86%	100%	93%	88%	96%	100%	95%					78%	100%	94%	94%	
TOP BOX SCORE	73	1310	6	15	12	11	22	6	49					7	13	59	52	
	78%	71%	86%	79%	80%	65%	81%	86%	78%					78%	93%	76%	76%	
NOT ANSWERED	3	63		1		1	1		2						1	2	2	
VALID CASES	94	1856	7	19	15	17	27	7	63					9	14	78	68	
NUMBER OF RESPONDENTS	97	1919	7	20	15	18	28	7	65					9	15	80	68	
	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		
	JCC 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 AS- IAN ##	AMER HAW/ IND/ PAC ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE	
Q35L ALWAYS	20 18%	423 22%	1 9%	2 11%	5 31%	4 22%	6 15%	1 20%	12 16%	~	~	~	~	3 27%	4 25%	16 18%	11 16%	9 22%	9 20%	11 17%
USUALLY	24 22%	375 20%	3 27%	4 22%	4 25%	4 22%	9 23%	~	14 19%	~	~	~	~	3 27%	5 31%	18 20%	15 22%	9 22%	10 22%	14 22%
SOMETIMES	23 21%	377 20%	3 27%	3 17%	~	3 17%	11 28%	1 20%	16 22%	~	~	~	~	1 9%	1 6%	20 22%	15 22%	8 20%	10 22%	11 17%
NEVER	44 40%	744 39%	4 36%	9 50%	7 44%	7 39%	14 35%	3 60%	31 42%	~	~	~	~	4 36%	6 38%	37 41%	28 41%	15 37%	17 37%	27 43%
#NEVER + SOMETIMES (NET)	67 60%	1121 58%	7 64%	12 67%	7 44%	10 56%	25 63%	4 80%	47 64%	~	~	~	~	5 45%	7 44%	57 63%	43 62%	23 56%	27 59%	38 60%
TOP BOX SCORE	44 40%	744 39%	4 36%	9 50%	7 44%	7 39%	14 35%	3 60%	31 42%	~	~	~	~	4 36%	6 38%	37 41%	28 41%	15 37%	17 37%	27 43%
5	151	2747	15	30	20	35	34	15	109					14	15	132	114	35	60	89
NOT ANSWERED	23	416		1	3	3	3		8						2	7	4	5	6	5
VALID CASES	111	1919	11	18	16	18	40	5	73					11	16	91	69	41	46	63
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	JCC 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/ 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	45 45%	695 36%	6 55%	9 45%	10 59%	7 37%	10 36%	3 75%	27 43%	~	~	~	~	~	5 45%	9 50%	34 43%	34 50%	11 34%	19 45%	26 46%
SOMETIMES	16 16%	351 18%	1 9%	4 20%	1 6%	1 5%	8 29%	~	11 17%	~	~	~	~	~	1 9%	2 11%	13 16%	8 12%	7 22%	7 17%	8 14%
USUALLY	17 17%	351 18%	1 9%	1 5%	3 18%	5 26%	6 21%	1 25%	10 16%	~	~	~	~	~	2 18%	2 11%	14 18%	10 15%	7 22%	5 12%	11 19%
ALWAYS	23 23%	514 27%	3 27%	6 30%	3 18%	6 32%	4 14%	~	15 24%	~	~	~	~	~	3 27%	5 28%	18 23%	16 24%	7 22%	11 26%	12 21%
#ALWAYS + USUALLY (NET)	40 40%	865 45%	4 36%	7 35%	6 35%	11 58%	10 36%	1 25%	25 40%	~	~	~	~	~	5 45%	7 39%	32 41%	26 38%	14 44%	16 38%	23 40%
TOP BOX SCORE	23 23%	514 27%	3 27%	6 30%	3 18%	6 32%	4 14%	~	15 24%	~	~	~	~	~	3 27%	5 28%	18 23%	16 24%	7 22%	11 26%	12 21%
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	159	2765	15	27	19	34	45	16	118					14	13	142	113	44	62	95	
NOT ANSWERED	25	406		2	3	3	4		9						2	9	6	5	8	5	
VALID CASES	101	1911	11	20	17	19	28	4	63					11	18	79	68	32	42	57	
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	JCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-##	AS-IAN##	NATV ILND#	AMER IND/ALSK##	OTHR##	MULTI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q35N																				
EXTREMELY DIFFICULT	12 5%	281 6%		3 7%~	2 6%~	3 6%~	4 6%	9 6%	~	~	~	~	~	3 14%~	~	12 6%*	8 5%	4 6%	5 5%	7 5%
01	4 2%	112 3%		2 4%~	1 3%~	1 2%~	~	3 2%	~	~	~	~	~	1 5%~	~	4 2%*	3 2%	1 1%	1 1%	3 2%
02	7 3%	129 3%		5 11%~	~	2 4%~	~	7 4%~	~	~	~	~	~	~	~	6 3%	6 4%	~	4 4%	3 2%
03	11 4%	164 4%	1 4%~	~	1 3%~	3 6%~	5 8%	9 6%	~	~	~	~	~	1 5%~	1 3%~	10 5%	6 4%	5 7%	2 2%	9 6%
04	10 4%	138 3%	2 9%~	~	2 6%~	2 4%~	4 6%	8 5%	~	~	~	~	~	~	1 3%~	9 5%	4 2%	6 9%	4 4%	6 4%
05	35 14%	547 12%	5 22%~	6 13%~	5 15%~	4 8%~	12 18%	3 19%~	24 15%	~	~	~	~	3 14%~	4 13%~	30 15%	26 16%	9 13%	14 15%	21 15%
06	12 5%	230 5%	2 9%~	3 7%~	2 6%~	1 2%~	2 3%	2 13%~	7 4%	~	~	~	~	1 5%~	2 6%~	10 5%	8 5%	4 6%	4 4%	8 6%
07	28 11%	375 8%	4 17%~	6 13%~	5 15%~	5 10%~	7 11%	1 6%~	19 12%	~	~	~	~	3 14%~	3 10%~	24 12%	22 13%	5 7%	9 10%	18 13%
09	65 26%	1161 26%	5 22%~	8 18%~	7 21%~	16 33%~	12 18%	4 25%~	32 20%*	~	~	~	~	7 32%~	8 26%~	42 21%*	39 23%	14 21%	24 26%	27 19%*
EXTREMELY EASY	64 26%	1320 30%	4 17%~	12 27%~	8 24%~	12 24%~	20 30%	5 31%~	43 27%	~	~	~	~	3 14%~	12 39%~	51 26%~	44 27%	20 29%	26 28%	38 27%
#8-10 (NET)	129 52%	2481 56%	9 39%~	20 44%~	15 45%~	28 57%~	32 48%	9 56%~	75 47%*	~	~	~	~	10 45%~	20 65%~	93 47%*	83 50%	34 50%	50 54%	65 46%*
9-10 (NET)	129 52%	2481 56%	9 39%~	20 44%~	15 45%~	28 57%~	32 48%	9 56%~	75 47%*	~	~	~	~	10 45%~	20 65%~	93 47%*	83 50%	34 50%	50 54%	65 46%*

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					
	JCC 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	
88		6																					
NOT ANSWERED	37	619	3	4	6	7	11	4	29					3	2	32	21	13				19	17
VALID CASES	248	4457	23	45	33	49	66	16	161					22	31	198	166	68				93	140
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81				112	157
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%				100%	100%
MEAN	7.09	7.14	7.00	6.53	6.88	7.08	6.97	7.69	6.76					6.32	8.13	6.81	7.06	6.91				7.14	6.87
p stat_(*=Sig @ p<=.05)	.825		~	~	~	~	.694	~.011*	~	~	~	~	~	~	~.000*	.806	.566				.848	.177	

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	VERY GOOD & POOR	FAIR & POOR	MALE	FE-MALE	
Q36	JCC 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	MALE	FE-MALE	
EXCELLENT	30 11%	447 9%	7 27%	9 19%	6 15%	3 6%	4 5%*	19 10%	~	~	~	~	~	3 13%	5 16%	25 11%	30 16%*	~	12 11%	18 12%	
VERY GOOD	65 24%	1140 24%	9 35%	16 34%	10 26%	13 24%	12 16%*	5 25%	~	~	~	~	~	8 33%	10 31%	52 23%	65 35%*	~	21 19%	43 28%	
GOOD	92 34%	1676 35%	7 27%	17 36%	12 31%	24 44%	25 32%	6 30%	~	~	~	~	~	3 13%	10 31%	79 35%	92 49%	~	40 37%	51 33%	
FAIR	59 22%	1110 23%	3 12%	5 11%	9 23%	11 20%	24 31%*	5 25%	~	~	~	~	~	6 25%	6 19%	49 22%	59 73%	~	25 23%	32 21%	
POOR	22 8%	395 8%	~	~	2 5%	3 6%	12 16%*	4 20%	~	~	~	~	~	4 17%	1 3%	21 9%	22 27%	~	11 10%	11 7%	
#EXCELLENT + VERY GOOD + GOOD (NET)	187 70%	3263 68%	23 88%	42 89%	28 72%	40 74%	41 53%*	11 55%	~	~	~	~	~	14 58%	25 78%	156 69%	187 100%	~	73 67%	112 72%	
NOT ANSWERED	17	314	~	2	~	2	~	~	~	~	~	~	~	1	1	4	~	~	3	2	
VALID CASES	268	4768	26	47	39	54	77	20	~	~	~	~	~	24	32	226	187	81	109	155	
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	~	~	~	~	~	25	33	230	187	81	112	157	
	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	BLK 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	MALE	FE-MALE
Q37	JCC TOT ADULT	OHP TOT ADULT	18	25	35	45	55	65												
EXCELLENT	60 22%	870 18%	7 28%	15 31%	8 21%	14 25%	10 13%*	4 20%	37 20%	~	~	~	~	7 28%	13 41%	45 20%	52 28%*	7 9%*	31 28%	28 18%
VERY GOOD	67 25%	1189 25%	6 24%	13 27%	11 28%	13 23%	19 25%	5 25%	51 27%	~	~	~	~	6 24%	3 9%	62 27%	58 31%*	9 11%*	26 23%	41 26%
GOOD	82 30%	1480 31%	9 36%	14 29%	10 26%	15 27%	29 38%	4 20%	51 27%	~	~	~	~	9 36%	13 41%	67 29%	57 31%	23 28%	27 24%	54 35%
FAIR	51 19%	937 20%	2 8%	6 12%	9 23%	11 20%	16 21%	5 25%	41 22%*	~	~	~	~	3 12%	3 9%	44 19%	17 9%*	33 41%*	22 20%	27 17%
POOR	11 4%	296 6%	1 4%	1 2%	1 3%	3 5%	3 4%	2 10%	9 5%	~	~	~	~	~	~	11 5%	2 1%*	9 11%*	6 5%	5 3%
#EXCELLENT + VERY GOOD + GOOD (NET)	209 77%	3539 74%	22 88%	42 86%	29 74%	42 75%	58 75%	13 65%	139 74%*	~	~	~	~	22 88%	29 91%	174 76%	167 90%*	39 48%*	84 75%	123 79%
NOT ANSWERED	14	310	1						1						1	1	1			2
VALID CASES	271	4772	25	49	39	56	77	20	189					25	32	229	186	81	112	155
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
	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				
	JCC	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	OTHR	MUL-	HIS-	HIS-	&	&		
									AMER	IAN	ILND	NATV		TI	IC	IC	GOOD	POOR	MALE	MALE
Q38																				
#YES	76	1705	7	11	6	16	26	8	55					6	7	66	44	31	37	37
	29%	36%*	30%~	23%~	16%~	30%	34%	40%~	30%	~	~	~	~	~ 25%~	23%~	29%~	24%*	40%*	34%	24%
NO	187	2994	16	36	32	37	51	12	130					18	23	158	138	47	71	115
	71%	64%*	70%~	77%~	84%~	70%	66%	60%~	70%	~	~	~	~	~ 75%~	77%~	71%~	76%*	60%*	66%	76%
DON'T KNOW	9	99	3	2	1	3			4					1	3	5	5	3	4	4
NOT ANSWERED	13	284							1							1				1
VALID CASES	263	4699	23	47	38	53	77	20	185					24	30	224	182	78	108	152
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
	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					
	JCC	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		AMER		ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
Q39																				
EVERY DAY	45 17%	949 20%	1 4%	10 20%	6 16%	11 20%	13 18%	3 15%	37 20%*	~	~	~	~	6 24%	42 19%	24 13%*	19 24%	25 23%*	19 12%*	
SOME DAYS	24 9%	436 9%	~	4 8%	4 11%	7 13%	9 12%	~	20 11%	~	~	~	~	1 4%	2 6%	21 9%	16 9%	8 10%	14 13%	10 7%
NOT AT ALL	196 74%	3380 71%	24 96%	35 71%	28 74%	37 67%	51 70%	17 85%	128 69%*	~	~	~	~	18 72%	30 94%	161 72%	141 78%*	53 66%	69 64%*	124 81%*
DON'T KNOW	4	34	1				3		3						1	3	3	1	2	2
NOT ANSWERED	16	283			1	1	1		2						3	3			2	2
VALID CASES	265	4765	25	49	38	55	73	20	185					25	32	224	181	80	108	153
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
	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			
	JCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-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
Q40 NEVER	11 16%	367 27%	100%	21%	20%	18%	5%	33%	10 18%	~	~	~	~	~	~	50%	16%	25%	4%	18%	14%
SOMETIMES	22 32%	331 24%	~	21%	30%	35%	36%	67%	19 33%	~	~	~	~	~	17%	50%	29%	28%	41%	34%	28%
USUALLY	9 13%	212 16%	~	7%	20%	24%	9%	~	6 11%	~	~	~	~	~	17%	~	13%	13%	15%	11%	17%
ALWAYS	26 38%	455 33%	~	50%	30%	24%	50%	~	22 39%	~	~	~	~	~	67%	~	42%	35%	41%	37%	41%
#ALWAYS + USUALLY (NET)	35 51%	667 49%	~	57%	50%	47%	59%	~	28 49%	~	~	~	~	~	83%	~	55%	48%	56%	47%	59%
TOP BOX SCORE	26 38%	455 33%	~	50%	30%	24%	50%	~	22 39%	~	~	~	~	~	67%	~	42%	35%	41%	37%	41%
NOT ANSWERED	1	20				1								1		1				1	
VALID CASES	68	1365	1	14	10	17	22	3	57					6	2	62	40	27	38	29	
NUMBER OF RESPONDENTS	69	1385	1	14	10	18	22	3	57					7	2	63	40	27	39	29	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	JCC 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 NATV ##	MUL-OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	FE-MALE	FE-MALE
Q41 NEVER	23 33%	687 50%*	1 100%~	3 21%~	4 40%~	7 39%~	6 27%~	2 67%~	19 33%~	~	~	~	~	2 29%~	21 100%~	14 35%~	9 33%~	17 44%~	6 21%~	
SOMETIMES	17 25%	305 22%	~	4 29%~	2 20%~	5 28%~	5 23%~	1 33%~	13 23%~	~	~	~	~	1 14%~	15 24%~	11 28%~	6 22%~	6 15%~	10 34%~	
USUALLY	13 19%	152 11%	~	3 21%~	2 20%~	2 11%~	5 23%~	~	10 18%~	~	~	~	~	3 43%~	12 19%~	5 13%~	7 26%~	5 13%~	8 28%~	
ALWAYS	16 23%	223 16%	~	4 29%~	2 20%~	4 22%~	6 27%~	~	15 26%~	~	~	~	~	1 14%~	15 24%~	10 25%~	5 19%~	11 28%~	5 17%~	
#ALWAYS + USUALLY (NET)	29 42%	375 27%*	~	7 50%~	4 40%~	6 33%~	11 50%~	~	25 44%~	~	~	~	~	4 57%~	27 43%~	15 38%~	12 44%~	16 41%~	13 45%~	
TOP BOX SCORE	16 23%	223 16%	~	4 29%~	2 20%~	4 22%~	6 27%~	~	15 26%~	~	~	~	~	1 14%~	15 24%~	10 25%~	5 19%~	11 28%~	5 17%~	
NOT ANSWERED		18																		
VALID CASES	69	1367	1	14	10	18	22	3	57					7	2	63	40	27	39	29
NUMBER OF RESPONDENTS	69	1385	1	14	10	18	22	3	57					7	2	63	40	27	39	29
	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 AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	MALE	FE-MALE	
Q42 NEVER	31 45%	778 57%	100%~	29%~	50%~	44%~	45%~	67%~	47%~	~	~	~	~	~	43%~	50%~	46%~	48%~	44%~	46%~	45%~
SOMETIMES	15 22%	261 19%	~	36%~	20%~	28%~	9%~	33%~	18%~	~	~	~	~	~	29%~	50%~	21%~	23%~	19%~	15%~	28%~
USUALLY	10 14%	141 10%	~	21%~	20%~	17%~	9%~	~	14%~	~	~	~	~	~	14%~	~	13%~	13%~	15%~	15%~	14%~
ALWAYS	13 19%	175 13%	~	14%~	10%~	11%~	36%~	~	21%~	~	~	~	~	~	14%~	~	21%~	18%~	22%~	23%~	14%~
#ALWAYS + USUALLY (NET)	23 33%	316 23%	~	36%~	30%~	28%~	45%~	~	35%~	~	~	~	~	~	29%~	~	33%~	30%~	37%~	38%~	28%~
TOP BOX SCORE	13 19%	175 13%	~	14%~	10%~	11%~	36%~	~	21%~	~	~	~	~	~	14%~	~	21%~	18%~	22%~	23%~	14%~
NOT ANSWERED		30																			
VALID CASES	69	1355	1	14	10	18	22	3	57					7	2	63	40	27	39	29	
NUMBER OF RESPONDENTS	69	1385	1	14	10	18	22	3	57					7	2	63	40	27	39	29	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

Q43 DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
	OT1	OT2																				
	JCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/				VERY	GOOD	FAIR				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR				
									AMER		ILND	NATV		TI	IC	IC	&	&			FE-	
									WHTE	##	##	#	##	##			GOOD	POOR			MALE	MALE
Q43																						
YES	57	997	1	6	1	13	26	10	39					7	6	49	27	29	24	33		
	21%	21%	4%~	13%~	3%~	23%	34%*	53%~	21%	~	~	~	~	28%~	18%~	22%~	15%*	37%*	22%	21%		
NO	211	3756	24	42	38	43	51	9	149					18	27	178	158	50	87	122		
	79%	79%	96%~	88%~	97%~	77%	66%*	47%~	79%	~	~	~	~	72%~	82%~	78%~	85%*	63%*	78%	79%		
DON'T KNOW	3	42	1	1				1	1							2	2	1	1	1		
NOT ANSWERED	14	287							1							1		1		1		
VALID CASES	268	4753	25	48	39	56	77	19	188					25	33	227	185	79	111	155		
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%		

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	JCC	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
Q45																				
YES	96	1716	5	10	10	22	37	11	71					12	8	86	51	41	46	50
	36%	36%	19%~	20%~	26%~	40%	48%*	55%~	38%	~	~	~	~	~ 48%~	24%~	38%~	27%*	52%*	41%	32%
NO	173	3045	21	39	29	33	40	9	117					13	25	142	135	38	65	106
	64%	64%	81%~	80%~	74%~	60%	52%*	45%~	62%	~	~	~	~	~ 52%~	76%~	62%~	73%*	48%*	59%	68%
NOT ANSWERED	16	321				1			2						2	1	2	1	1	1
VALID CASES	269	4761	26	49	39	55	77	20	188					25	33	228	186	79	111	156
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
	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					
	JCC	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	TO	TO	TO	TO	TO	OVER	AFR-	AS-	PAC	ALSK			PAN-	PAN-	&	&		
			24	34	44	54	64	OVER	AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	FE-
									WHTE	##	##	#	##	##	TI					MALE
Q46.1																				
YES	62	1102		4	3	20	28	7	43					6	3	54	31	31	24	37
	22%	22%		~ 8%	~ 8%	36%*	36%*	35%~	23%	~	~	~	~	~ 24%	9%~	23%	17%*	38%*	21%	24%
NO	223	3980	26	45	36	36	49	13	147					19	30	176	156	50	88	120
	78%	78%	100%~	92%~	92%~	64%*	64%*	65%~	77%	~	~	~	~	~ 76%	91%~	77%	83%*	62%*	79%	76%
VALID CASES	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
	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								BLCK	NATV	AMER					NOT	EX &		
	JCC	OHP	18	25	35	45	55	65	OR	HAW/	IND/					HIS-	HIS-	GOOD	FAIR	
	TOT	TOT	TO	TO	TO	TO	TO	AND	AFR-	AS-	PAC	ALSK				PAN-	PAN-	&	&	
	ADLT	ADLT	24	34	44	54	64	OVER	AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
Q46.2																				
YES	75	1444	1	7	5	20	32	9	57					5	6	66	33	42	39	36
	26%	28%	4%~	14%~	13%~	36%	42%*	45%~	30%*	~	~	~	~	~ 20%~	18%~	29%*	18%*	52%*	35%*	23%
NO	210	3638	25	42	34	36	45	11	133					20	27	164	154	39	73	121
	74%	72%	96%~	86%~	87%~	64%	58%*	55%~	70%*	~	~	~	~	~ 80%~	82%~	71%*	82%*	48%*	65%*	77%
VALID CASES	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
	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		
	JCC 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	FE-MALE	MALE
Q46.3 YES	50 18%	826 16%	3 12%~	7 14%~	5 13%~	14 25%	14 18%	5 25%~	27 14%*	~	~	~	~	~	7 28%~	7 21%~	40 17%	26 14%*	23 28%*	15 13%	33 21%
NO	235 82%	4256 84%	23 88%~	42 86%~	34 87%~	42 75%	63 82%	15 75%~	163 86%*	~	~	~	~	~	18 72%~	26 79%~	190 83%	161 86%*	58 72%*	97 87%	124 79%
VALID CASES	285	5082	26	49	39	56	77	20	190						25	33	230	187	81	112	157
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190						25	33	230	187	81	112	157
	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						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	JCC	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	FE-
									WHTE	##	##	#	##	##	TI					MALE
Q47.1																				
YES	10	211	1	1			8		2					4	1	9	6	4	4	6
	4%	4%	4%~	2%~	~	~	10%*	~	1%*	~	~	~	~	~ 16%~	3%~	4%	3%	5%	4%	4%
NO	275	4871	25	48	39	56	69	20	188					21	32	221	181	77	108	151
	96%	96%	96%~	98%~	100%~	100%~	90%*	100%~	99%*	~	~	~	~	~ 84%~	97%~	96%	97%	95%	96%	96%
VALID CASES	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
	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					
	JCC	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	MALE	FE-
									WHTE	##	##	#	##	##	TI					MALE
Q47.2																				
YES	11	212		2			6	3	4					2	10	3	7	4	6	
	4%	4%		~ 4%	~	~	8%	15%	2%	~	~	~	~	~ 8%	~ 4%	2%*	9%*	4%	4%	
NO	274	4870	26	47	39	56	71	17	186					23	33	220	184	74	108	151
	96%	96%	100%	~ 96%	~ 100%	~ 100%	~ 92%	85%	98%	~	~	~	~	~ 92%	~ 100%	~ 96%	98%*	91%*	96%	96%
VALID CASES	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
	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					
	JCC	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-	
																			MALE	
Q47.3																				
YES	6	195				1	4	1	4					2	6	3	3	2	4	
	2%	4%	~	~	~	2%	5%	5%	2%	~	~	~	~	8%	~	3%	2%	4%	2%	3%
NO	279	4887	26	49	39	55	73	19	186					23	33	224	184	78	110	153
	98%	96%	100%	100%	100%	98%	95%	95%	98%	~	~	~	~	92%	100%	97%	98%	96%	98%	97%
VALID CASES	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
	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			
	JCC 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- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE		
Q47.4 YES	50 18%	916 18%	2 ~	5 4%	13 13%	22 23%	7 29%*	36 19%	~	~	~	~	~	3 12%	4 12%	43 19%	21 11%*	28 35%*	21 19%	28 18%
Q47.4 NO	235 82%	4166 82%	26 100%	47 96%	34 87%	43 77%	55 71%*	13 65%	154 81%	~	~	~	~	22 88%	29 88%	187 81%	166 89%*	53 65%*	91 81%	129 82%
VALID CASES	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER					
	OT1	OT2																								
	JCC	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			FE-	
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	TI	IC	IC	GOOD	POOR	&	&	MALE	MALE			
Q48																										
YES	61	1408	1	11	8	13	23	5	44					7	4	55	30	30	24	36						
	23%	30%*	4%~	23%~	21%~	23%	31%	25%~	24%	~	~	~	~	28%~	13%~	24%~	16%*	39%*	22%	24%						
NO	204	3330	25	37	30	43	52	15	141					18	28	171	154	47	86	117						
	77%	70%*	96%~	77%~	79%~	77%	69%	75%~	76%	~	~	~	~	72%~	88%~	76%~	84%*	61%*	78%	76%						
NOT ANSWERED	20	344		1	1		2		5						1	4	3	4	2	4						
VALID CASES	265	4738	26	48	38	56	75	20	185					25	32	226	184	77	110	153						
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157						
	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						
	JCC	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	50	1187	1	10	7	10	20	2	39					6	1	47	23	26	21	28	
	85%	88%	100%~	91%~	88%~	83%~	91%~	40%~	91%~	~	~	~	~	~	86%~	33%~	87%~	79%~	90%~	88%~	82%~
NO	9	167		1	1	2	2	3	4					1	2	7	6	3	3	6	
	15%	12%	~	9%~	13%~	17%~	9%~	60%~	9%~	~	~	~	~	~	14%~	67%~	13%~	21%~	10%~	13%~	18%~
NOT ANSWERED	2	54				1	1		1						1	1	1	1		2	
VALID CASES	59	1354	1	11	8	12	22	5	43					7	3	54	29	29	24	34	
NUMBER OF RESPONDENTS	61	1408	1	11	8	13	23	5	44					7	4	55	30	30	24	36	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q48 = YES]

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2																		
	JCC	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-	
Q50																				
YES	153	2988	4	23	14	37	60	15	117					16	8	141	87	63	64	88
	58%	63%	15%~	47%~	37%~	70%*	78%*	79%~	63%*	~	~	~	~	~ 64%~	27%~	62%~	48%*	81%*	59%	57%
NO	111	1758	22	26	24	16	17	4	70					9	22	86	95	15	44	66
	42%	37%	85%~	53%~	63%~	30%*	22%*	21%~	37%*	~	~	~	~	~ 36%~	73%~	38%~	52%*	19%*	41%	43%
NOT ANSWERED	21	336			1	3		1	3						3	3	5	3	4	3
VALID CASES	264	4746	26	49	38	53	77	19	187					25	30	227	182	78	108	154
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	JCC	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	POOR	FE-	
									WHTE	##	##	#	##	##	IC	IC	GOOD	POOR	MALE	
																			MALE	
Q51																				
YES	139	2723	3	21	13	33	54	15	105					16	8	127	77	59	60	78
	94%	95%	75%	100%	93%	94%	92%	100%	94%	~	~	~	~	~100%	100%	93%	92%	97%	95%	93%
NO	9	155	1		1	2	5		7						9	7	2		3	6
	6%	5%	25%	~	~	7%	6%	8%	6%	~	~	~	~	~	~	7%	8%	3%	5%	7%
NOT ANSWERED	5	110		2		2	1		5						5	3	2		1	4
VALID CASES	148	2878	4	21	14	35	59	15	112					16	8	136	84	61	63	84
NUMBER OF RESPONDENTS	153	2988	4	23	14	37	60	15	117					16	8	141	87	63	64	88
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q50 = YES]

NQ52 WHAT IS YOUR AGE?

	BANT	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	GOOD & POOR	FE-MALE	MALE		
NQ52	JCC TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	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	FE-MALE	MALE	
18 TO 24	29 10%	485 10%	26 100%	~	~	~	~	~	13 7%*	~	~	~	~	~	2 8%	11 33%	16 7%*	24 13%*	3 4%*	10 9%	17 11%	
25 TO 34	53 19%	853 17%	~	49 ~100%	~	~	~	~	38 20%	~	~	~	~	~	5 20%	4 12%	45 20%	42 22%*	5 6%*	19 17%	30 19%	
35 TO 44	45 16%	805 16%	~	~	39 ~100%	~	~	~	28 15%	~	~	~	~	~	3 12%	6 18%	34 15%	28 15%	14 17%	15 13%	25 16%	
45 TO 54	59 21%	1048 21%	~	~	~	56 ~100%	~	~	40 21%	~	~	~	~	~	5 20%	9 27%	46 20%	41 22%	14 17%	28 25%	29 18%	
55 TO 64	78 27%	1437 28%	~	~	~	~	77 ~100%	~	58 31%	~	~	~	~	~	9 36%	1 3%	72 31%*	41 22%*	36 44%*	31 28%	46 29%	
65 TO 74	17 6%	302 6%	~	~	~	~	16 ~80%	~	11 6%	~	~	~	~	~	1 4%	2 6%	13 6%	11 6%	5 6%	6 5%	9 6%	
75 OR OLDER	4 1%	152 3%*	~	~	~	~	4 ~20%	~	2 1%	~	~	~	~	~	~	~	4 2%*	~	4 5%*	3 3%	1 0.6%	
VALID CASES	285	5082	26	49	39	56	77	20	190						25	33	230	187	81	112	157	
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190						25	33	230	187	81	112	157	
	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						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2																			
	JCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	VERY	GOOD	FAIR		
	ADLT	ADLT	TO	TO	TO	TO	TO	OVER	AFR-	AS-	PAC	ALSK			PAN-	PAN-	&	&	FE-		
			24	34	44	54	64	OVER	AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE	
NQ53	122	2039	10	20	15	27	31	10	82					12	13	95	75	36	112		
MALE	43%	40%	38%~	41%~	38%~	48%	40%	50%~	43%	~	~	~	~	~ 48%	39%	41%	40%	44%	100%~	~	
FEMALE	163	3043	16	29	24	29	46	10	108	~	~	~	~	13	20	135	112	45	157		
	57%	60%	62%~	59%~	62%~	52%	60%	50%~	57%	~	~	~	~	~ 52%	61%	59%	60%	56%	~100%~		
VALID CASES	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157	
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

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

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

	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 ##	MULTI TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE-MALE	MALE		
Q54																						
8TH GRADE OR LESS	12 5%	267 6%	~	~	~	9%	8%	5%~	2%*	~	~	~	~	~	8%~	15%~	3%~	3%	5%	7%	4%	8%
SOME HIGH SCHOOL BUT DID NOT GRADUATE	36 14%	599 13%	12%~	17%~	18%~	11%	11%	5%~	13%	~	~	~	~	~	12%~	21%~	12%~	10%*	18%	19%*	10%*	
HIGH SCHOOL GRADUATE OR GED	92 35%	1663 35%	52%~	35%~	36%~	36%	28%	37%~	35%	~	~	~	~	~	40%~	36%~	35%~	34%	38%	41%	51%	
SOME COLLEGE OR 2-YEAR DEGREE	89 33%	1668 35%	36%~	31%~	36%~	31%	37%	26%~	36%	~	~	~	~	~	32%~	18%~	36%~	37%	27%	28%	37%	
4-YEAR COLLEGE GRADUATE	18 7%	348 7%	~	10%~	5%~	4%	9%	11%~	5%	~	~	~	~	~	4%~	6%~	7%~	8%	5%	6%	7%	
MORE THAN 4-YEAR COLLEGE DEGREE	19 7%	201 4%	~	6%~	5%~	9%	8%	16%~	9%	~	~	~	~	~	4%~	3%~	8%~	9%	3%*	5%	8%	
NOT ANSWERED	19	336	1	1		1	1	1	3							2	3	4		2	1	
VALID CASES	266	4746	25	48	39	55	76	19	187					25	33	228	184	77	110	156		
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157		
	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				
	JCC	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	TO	TO	TO	TO	OVER	WHTE	AFR-	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									AMER					TI			GOOD	POOR	MALE	MALE
Q55																				
YES HISPANIC OR LATINO	33	571	11	4	5	9	1	2							33		25	7	13	20
	13%	12%	42%~	8%~	13%~	17%	1%*	11%~	~	~	~	~	~	~	~100%~	~	14%	9%	12%	13%
NO NOT HISPANIC OR LATINO	230	4145	15	44	34	45	72	17	187					24	230	156	70	95	135	
	87%	88%	58%~	92%~	87%~	83%	99%*	89%~	100%~	~	~	~	~	~100%~	~100%~	86%	91%	88%	87%	
NOT ANSWERED	22	366		1		2	4	1	3					1		6	4	4	2	
VALID CASES	263	4716	26	48	39	54	73	19	187					24	33	230	181	77	108	155
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
	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						
	JCC	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	TO	TO	TO	TO	TO	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR					
			24	34	44	54	64	OVER	AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD				
									WHTE	##	##	#	##	##	TI	IC	IC	&			
																		&			
																		POOR			
																		MALE			
																		MALE			
Q56.1																					
YES	229	4120	20	44	34	47	66	15	190					23	16	209	156	69	98	131	
	80%	81%	77%~	90%~	87%~	84%	86%	75%~	100%~	~	~	~	~	~	92%~	48%~	91%*	83%	85%	88%*	83%
NO	56	962	6	5	5	9	11	5						2	17	21	31	12	14	26	
	20%	19%	23%~	10%~	13%~	16%	14%	25%~	~	~	~	~	~	8%~	52%~	9%*	17%	15%	13%*	17%	
VALID CASES	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157	
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157	
	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					
	JCC	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	OVER	AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	##	##	#	##	##	TI	IC	IC	GOOD	POOR	
																		MALE	MALE	
Q56.2																				
YES	5	85	2		1		1	1						3	4	4	1	4	1	
	2%	2%	8%~	~	3%~	~	1%	5%~	~	~	~	~	~	12%~	~	2%	1%	4%	0.6%	
NO	280	4997	24	49	38	56	76	19	190					22	33	226	183	80	108	156
	98%	98%	92%~	100%~	97%~	100%~	99%	95%~	100%~	~	~	~	~	88%~	100%~	98%	98%	99%	96%	99%
VALID CASES	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
	100%	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						
	JCC	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			
Q56.3																					
YES	7	136		1	2	1	2	1						2		6	6	1	1	6	
	2%	3%		~	2%~	5%~	2%	3%	5%~	~	~	~	~	~	8%~	~	3%	3%	1%	0.9%	4%
NO	278	4946	26	48	37	55	75	19	190					23	33	224	181	80	111	151	
	98%	97%	100%~	98%~	95%~	98%	97%	95%~	100%~	~	~	~	~	~	92%~	100%~	97%	97%	99%	96%	
VALID CASES	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157	
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	JCC	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	TO	TO	TO	TO	TO	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
			24	34	44	54	64	OVER	AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									##	##	#	##	##	TI	IC	IC	GOOD	POOR		
																	MALE	MALE		
Q56.4																				
YES	3	40			1		2							3	2	2	1	1	2	
	1%	0.8%	~	~	3%	~	3%	~	~	~	~	~	~	12%	~0.9%	1%	1%	0.9%	1%	
NO	282	5042	26	49	38	56	75	20	190					22	33	228	185	80	111	155
	99%	99%	100%	~100%	~97%	~100%	~97%	100%	~100%	~	~	~	~	~88%	~100%	~99%	99%	99%	99%	99%
VALID CASES	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER					
	OT1	OT2																								
	JCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER								NOT	EX &						
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/	AFR-	AS-	PAC	ALSK			HIS-	HIS-	VERY	GOOD	FAIR			FE-	
	ADLT	ADLT	24	34	44	54	64	OVER	AMER	IAN	ILND	NATV	OTHR	MUL-	TI			PAN-	PAN-	&	&	GOOD	POOR	MALE	MALE	
Q56.5																										
YES	22	313	1	5	2	4	9	1							18		2	19		12	9			8	14	
	8%	6%	4%~	10%~	5%~	7%	12%	5%~	~	~	~	~	~	~	72%~		6%~	8%		6%	11%			7%	9%	
NO	263	4769	25	44	37	52	68	19	190						7		31	211		175	72			104	143	
	92%	94%	96%~	90%~	95%~	93%	88%	95%~	100%~	~	~	~	~	~	28%~		94%~	92%		94%	89%			93%	91%	
VALID CASES	285	5082	26	49	39	56	77	20	190						25		33	230		187	81			112	157	
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190						25		33	230		187	81			112	157	
	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					
	JCC	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	OVER	AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	##	##	#	##	##	TI	IC	IC	GOOD	POOR	
																		MALE	MALE	
Q56.6																				
YES	23	278	1	4	3	6	7	2						9	7	15	14	8	12	11
	8%	5%	4%~	8%~	8%~	11%	9%	10%~	~	~	~	~	~	36%~	21%~	7%	7%	10%	11%	7%
NO	262	4804	25	45	36	50	70	18	190					16	26	215	173	73	100	146
	92%	95%	96%~	92%~	92%~	89%	91%	90%~	100%~	~	~	~	~	64%~	79%~	93%	93%	90%	89%	93%
VALID CASES	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
NUMBER OF RESPONDENTS	285	5082	26	49	39	56	77	20	190					25	33	230	187	81	112	157
	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							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	AMER IND/ALSK	OTHR	MUL-TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE		
Q57	JCC	OHP	18	25	35	45	55	65														
YES	TOT	TOT	24	34	44	54	64	OVER	WHTE	##	##	#	##	##	TI	IC	IC	GOOD	FAIR	MALE	MALE	
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	##	##	#	##	##	TI	IC	IC	GOOD	FAIR	MALE	MALE	
			15	466	5	1	1	1	3	4	10				2	13	7	8	7	8		
			7%	12%*	29%~	4%~	3%~	2%~	5%	29%~	7%	~	~	~	~	~	9%~	7%~	5%	13%	9%	6%
NO			187	3267	12	27	28	47	60	10	139			10	21	161	130	53	71	116		
			93%	88%*	71%~	96%~	97%~	98%~	95%	71%~	93%	~	~	~	~	~	91%~	93%~	95%	87%	91%	94%
NOT ANSWERED			8	46	2		1	1	1		3				1	3	4	3	3	1		
VALID CASES			202	3733	17	28	29	48	63	14	149			10	23	174	137	61	78	124		
NUMBER OF RESPONDENTS			210	3779	17	30	29	49	64	15	152			10	24	177	141	64	81	125		
			100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF SURVEY COMPLETED BY MAIL]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	JCC	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	
Q58.1																				
YES	3	238	2				1		2						1	2	3		3	
	20%	51%~	40%~	~	~	~	33%~	~	20%~	~	~	~	~	~	50%~	15%~	43%~	~	~ 38%~	
NO	12	228	3	1	1	1	2	4	8						1	11	4	8	7	5
	80%	49%~	60%~	100%~	100%~	100%~	67%~	100%~	80%~	~	~	~	~	~	50%~	85%~	57%~	100%~	100%~	63%~
VALID CASES	15	466	5	1	1	1	3	4	10						2	13	7	8	7	8
NUMBER OF RESPONDENTS	15	466	5	1	1	1	3	4	10						2	13	7	8	7	8
	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												ITY	STATUS					
	JCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER									
	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	
Q58.2																				
YES	2	182	1				1		2						2	2			2	
	13%	39%~	20%~	~	~	~	33%~	~	20%~	~	~	~	~	~	~	15%~	29%~	~	25%~	
NO	13	284	4	1	1	1	2	4	8						2	11	5	8	7	6
	87%	61%~	80%~	100%~	100%~	100%~	67%~	100%~	80%~	~	~	~	~	~	100%~	85%~	71%~	100%~	100%~	75%~
VALID CASES	15	466	5	1	1	1	3	4	10						2	13	7	8	7	8
NUMBER OF RESPONDENTS	15	466	5	1	1	1	3	4	10						2	13	7	8	7	8
	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					
	JCC	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		
Q58.3																				
YES	10	156	1	1	1	1	2	4	7						1	9	5	5	5	5
	67%	33%	20%	100%	100%	100%	67%	100%	70%	~	~	~	~	~	50%	69%	71%	63%	71%	63%
NO	5	310	4				1		3						1	4	2	3	2	3
	33%	67%	80%	~	~	~	33%	~	30%	~	~	~	~	~	50%	31%	29%	38%	29%	38%
VALID CASES	15	466	5	1	1	1	3	4	10						2	13	7	8	7	8
NUMBER OF RESPONDENTS	15	466	5	1	1	1	3	4	10						2	13	7	8	7	8
	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				
	JCC	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			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	PAN-	PAN-	GOOD	FAIR		
									AMER					TI	IC	IC	&	&		
									WHTE	##	##	#	##	##			GOOD	POOR		
																	MALE	MALE		
Q58.4																				
YES	1	56	1						1						1	1	1			
	7%	12%~	20%~	~	~	~	~	~	10%~	~	~	~	~	~	~	8%~	~	13%~	14%~	
NO	14	410	4	1	1	1	3	4	9						2	12	7	7	6	
	93%	88%~	80%~	100%~	100%~	100%~	100%~	100%~	90%~	~	~	~	~	~	~	100%~	92%~	100%~	88%~	
VALID CASES	15	466	5	1	1	1	3	4	10						2	13	7	8	7	
NUMBER OF RESPONDENTS	15	466	5	1	1	1	3	4	10						2	13	7	8	7	
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	JCC	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	
Q58.5																				
YES	3	39	1	1			1		1						1	2	2	1	1	2
	20%	8%	20%	100%	~	~	33%	~	10%	~	~	~	~	~	50%	15%	29%	13%	14%	25%
NO	12	427	4		1	1	2	4	9						1	11	5	7	6	6
	80%	92%	80%	~	~100%	~100%	67%	~100%	90%	~	~	~	~	~	50%	85%	71%	88%	86%	75%
VALID CASES	15	466	5	1	1	1	3	4	10						2	13	7	8	7	8
NUMBER OF RESPONDENTS	15	466	5	1	1	1	3	4	10						2	13	7	8	7	8
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

NQ13 RATING OF ALL HEALTH CARE

	BANT	BANT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER					
	OT1	OT2																								
	JCC	OHP	18	25	35	45	55	65	BLCK	NATV	AMER								EX &							
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/							VERY	GOOD	FAIR						
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	ALSK	OTHR	MUL-	HIS-	NOT	PAN-	PAN-	&	&	GOOD	POOR	MALE	MALE	
									AMER						TI	IC	IC									
NQ13																										
0-6	40	687	3	3	5	8	13	5	27					4	1	33	20	19	11	26						
	20%	20%	19%~	9%~	18%~	22%~	21%	31%~	20%	~	~	~	~	~	17%~	6%~	20%~	16%	29%*	14%	23%					
7-8	66	1221	8	12	11	13	15	5	43					10	6	57	44	19	24	39						
	33%	35%	50%~	38%~	39%~	35%~	24%	31%~	31%	~	~	~	~	~	43%~	35%~	34%~	35%	29%	30%	35%					
9-10	95	1603	5	17	12	16	34	6	67					9	10	79	61	28	44	47						
	47%	46%	31%~	53%~	43%~	43%~	55%	38%~	49%	~	~	~	~	~	39%~	59%~	47%~	49%	42%	56%	42%					
VALID CASES	201	3511	16	32	28	37	62	16	137					23	17	169	125	66	79	112						
NUMBER OF RESPONDENTS	201	3511	16	32	28	37	62	16	137					23	17	169	125	66	79	112						
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%					
MEAN	2.27	2.26	2.13	2.44	2.25	2.22	2.34	2.06	2.29					2.22	2.53	2.27	2.33	2.14	2.42	2.19						
p stat_(*=Sig @ p<=.05)		.808	~	~	~	~	.428	~	.624	~	~	~	~	~	~	~	~	.203	.079	.033*	.077					

[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	AMER IND/ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE			
NQ23	JCC TOT ADLT	OHP TOT ADLT	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	WHTE	##	##	#	##	##	TI	IC	IC	GOOD	FAIR & POOR	MALE	MALE		
0-6	26 12%	572 15%	4 24%	4 10%	1 3%	4 9%	7 12%	4 21%	17 11%	~	~	~	~	~	2 10%	2 9%	20 11%	13 9%	12 19%	11 12%	13 11%		
7-8	61 29%	959 26%	7 41%	8 20%	11 38%	13 30%	16 28%	4 21%	43 29%	~	~	~	~	~	6 29%	4 18%	54 30%	40 28%	20 31%	20 22%	39 34%		
9-10	126 59%	2197 59%	6 35%	29 71%	17 59%	26 60%	34 60%	11 58%	88 59%	~	~	~	~	~	13 62%	16 73%	104 58%	89 63%	32 50%	60 66%	63 55%		
VALID CASES	213	3728	17	41	29	43	57	19	148						21	22	178	142	64	91	115		
NUMBER OF RESPONDENTS	213 100%	3728 100%	17 100%	41 100%	29 100%	43 100%	57 100%	19 100%	148 100%						21 100%	22 100%	178 100%	142 100%	64 100%	91 100%	115 100%		
MEAN	2.47	2.44	2.12	2.61	2.55	2.51	2.47	2.37	2.48						2.52	2.64	2.47	2.54	2.31	2.54	2.43		
p stat_(*=Sig @ p<=.05)		.497	~	~	~	~	.958	~	.754	~	~	~	~	~	~	~	~	.068	.033*	.218	.437		

[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	AMER IND/ALSK	OTHR	MUL-TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE	
NQ27	JCC TOT ADLT	OHP TOT ADLT	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	WHTE	##	##	#	##	##	TI	IC	IC	GOOD	FAIR	MALE	MALE
0-6	12 12%	239 13%	1 14%~	2 12%~	2 17%~	3 19%~	3 9%~	9 13%~	~	~	~	~	~	~	1 20%~	8 9%~	6 11%~	5 13%~	6 14%~	5 10%~	
7-8	27 28%	475 27%	2 29%~	4 24%~	3 25%~	4 25%~	10 30%~	4 44%~	17 25%~	~	~	~	~	2 25%~	1 20%~	23 27%~	15 27%~	12 32%~	8 19%~	17 33%~	
9-10	58 60%	1057 60%	4 57%~	11 65%~	7 58%~	9 56%~	20 61%~	5 56%~	43 62%~	~	~	~	~	6 75%~	3 60%~	54 64%~	35 63%~	21 55%~	28 67%~	29 57%~	
VALID CASES	97	1771	7	17	12	16	33	9	69					8	5	85	56	38	42	51	
NUMBER OF RESPONDENTS	97	1771	7	17	12	16	33	9	69					8	5	85	56	38	42	51	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	
MEAN	2.47	2.46	2.43	2.53	2.42	2.38	2.52	2.56	2.49					2.75	2.40	2.54	2.52	2.42	2.52	2.47	
p stat_(*=Sig @ p<=.05)		.862	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

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

NQ35 RATING OF HEALTH PLAN

	BANT	BANT	AGE							RACE							ETHNICITY			HEALTH STATUS		GENDER					
	OT1	OT2																									
	JCC	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	ALSK	OTHR	MUL-	IC	IC	&	&	GOOD	POOR	MALE	MALE				
NQ35																											
0-6	45	953	5	3	6	13	14	3	32						5	3	38		25	19	18	25					
	18%	21%	20%~	7%~	18%~	25%	19%	16%~	18%	~	~	~	~	~	21%~	10%~	18%~		14%	26%*	17%	17%					
7-8	86	1522	8	22	10	15	19	8	57						11	8	75		62	21	30	54					
	33%	33%	32%~	49%~	29%~	28%	26%	42%~	32%	~	~	~	~	~	46%~	27%~	35%~		35%	28%	29%	37%					
9-10	126	2121	12	20	18	25	39	8	87						8	19	101		89	34	56	67					
	49%	46%	48%~	44%~	53%~	47%	54%	42%~	49%	~	~	~	~	~	33%~	63%~	47%~		51%	46%	54%	46%					
VALID CASES	257	4596	25	45	34	53	72	19	176						24	30	214		176	74	104	146					
NUMBER OF RESPONDENTS	257	4596	25	45	34	53	72	19	176						24	30	214		176	74	104	146					
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%		100%	100%	100%	100%					
MEAN	2.32	2.25	2.28	2.38	2.35	2.23	2.35	2.26	2.31						2.13	2.53	2.29		2.36	2.20	2.37	2.29					
p stat_(*=Sig @ p<=.05)		.195	~	~	~.371	.672			~.933	~	~	~	~	~	~	~	~		~.148	.129	.380	.506					

GETTING NEEDED CARE

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
	JCC 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	
NPRBSEE4 NQ46	2.27	2.25	2.14	2.37	2.62	1.88	2.30	2.30	2.33					2.10	2.60	2.31	2.32	2.24	2.21	2.36	
p stat_(*=Sig @ p<=.05)	.718		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~.230	
NCARNES4 NQ15	2.33	2.31	2.06	2.23	2.41	2.24	2.48	2.06	2.34					2.26	2.24	2.32	2.36	2.23	2.34	2.29	
p stat_(*=Sig @ p<=.05)	.756		~	~	~	~.063	~	~.738	~	~	~	~	~	~	~	~	~.452	.190	.842	.439	
COMPOSITE	2.30	2.28	2.10	2.30	2.51	2.06	2.39	2.18	2.33	x	x	x	x	x	2.18	2.42	2.32	2.34	2.24	2.28	2.33
p stat_(*=Sig @ p<=.05)	.552		~	~	~	~.119	~	~.183	~	~	~	~	~	~	~	~	~.189	.215	.608	.419	

GETTING CARE QUICKLY

	BANT OT1	BANT OT2	AGE					RACE					ETHNIC- ITY	HEALTH STATUS	GENDER						
	JCC TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE MALE			
NCARSN4 NQ4	2.48	2.40	2.25	2.37	2.53	2.67	2.50	2.44	2.44					2.55	2.43	2.52	2.43	2.51	2.59	2.44	
p stat_(*=Sig @ p<=.05)		.303	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NAPGET4 NQ6	2.41	2.26	1.90	2.22	2.48	2.39	2.49	2.57	2.39					2.50	2.33	2.42	2.25	2.64	2.41	2.40	
p stat_(*=Sig @ p<=.05)		.019*	~	~	~	~	~	~	.646	~	~	~	~	~	~	~	.000*	.001*	.904	.946	
COMPOSITE	2.44	2.33	2.08	2.30	2.50	2.53	2.50	2.51	2.42	x	x	x	x	x	2.52	2.38	2.47	2.34	2.58	2.50	2.42
p stat_(*=Sig @ p<=.05)		.006*	~	~	~	~	~	~	.306	~	~	~	~	~	~	~	~	.000*	.013*	.213	.537

HOW WELL DOCTORS COMMUNICATE

	BANT OT1	BANT OT2	AGE					RACE					ETHNIC- ITY	HEALTH STATUS		GENDER					
	JCC 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	FE- MALE MALE			
NDREXPL4 NQ32	2.64	2.64	2.67	2.81	2.74	2.47	2.70	2.59	2.76					2.40	2.53	2.69	2.69	2.57	2.71	2.63	
p stat_(*=Sig @ p<=.05)		1.00	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.220	.365	.158	.818	
NDRLSTN4 NQ33	2.64	2.61	2.67	2.87	2.79	2.41	2.67	2.65	2.69					2.67	2.73	2.68	2.71	2.55	2.75	2.60	
p stat_(*=Sig @ p<=.05)		.526	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.107	.203	.052	.433	
NDRESPU4 NQ34	2.67	2.67	2.67	2.87	2.74	2.47	2.67	2.65	2.71					2.73	2.73	2.71	2.72	2.56	2.77	2.61	
p stat_(*=Sig @ p<=.05)		.968	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.190	.137	.052	.267	
NDRTMEN4 NQ37	2.52	2.52	2.22	2.68	2.63	2.41	2.59	2.47	2.54					2.60	2.53	2.56	2.59	2.41	2.61	2.47	
p stat_(*=Sig @ p<=.05)		.929	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.130	.130	.124	.314	
COMPOSITE	2.62	2.61	2.56	2.81	2.72	2.44	2.66	2.59	2.68	x	x	x	x	x	2.60	2.63	2.66	2.67	2.52	2.71	2.58
p stat_(*=Sig @ p<=.05)		.842	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.121	.130	.051	.374	

CUSTOMER SERVICE

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS		GENDER				
	JCC 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	
NPBCLCS4 NQ50	2.38	2.30	2.38	2.50	2.45	2.20	2.38	2.33	2.42					3.00	2.46	2.41	2.43	2.17	2.54	2.31	
p stat_(*=Sig @ p<=.05)		.396	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCSRESP NQ51	2.71	2.69	2.62	2.83	2.73	2.64	2.83	2.33	2.81					3.00	2.57	2.77	2.70	2.72	2.75	2.71	
p stat_(*=Sig @ p<=.05)		.796	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.55	2.50	2.50	2.67	2.59	2.42	2.61	2.33	2.61	x	x	x	x	x	3.00	2.52	2.59	2.57	2.44	2.64	2.51
p stat_(*=Sig @ p<=.05)		.505	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

SHARED DECISION MAKING

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER		
	JCC 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	2.92	2.87	3.00	2.89	3.00	3.00	2.89	2.67	2.95					2.83	3.00	2.93	2.89	2.95	2.95	2.93
p stat_(*=Sig @ p<=.05)		.161	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NNRXWYNT NQ12	2.49	2.49	2.67	2.67	3.00	2.37	2.20	3.00	2.51					2.67	2.33	2.53	2.61	2.33	2.61	2.45
p stat_(*=Sig @ p<=.05)		.944	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NRXBST NQ13	2.56	2.53	2.33	2.47	2.45	2.37	2.71	2.67	2.51					2.67	3.00	2.52	2.54	2.54	2.68	2.45
p stat_(*=Sig @ p<=.05)		.783	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.66	2.63	2.67	2.68	2.82	2.58	2.60	2.78	2.66	x	x	x	x	x 2.72	2.78	2.66	2.68	2.61	2.74	2.61
p stat_(*=Sig @ p<=.05)		.610	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

GETTING NEEDED CARE (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
JCC TOT ADLT	OHP TOT ADLT		18	25	35	45	55	65													
PRBSEE4 Q25	78%	77%	71%	79%	92%	59%	84%	80%	82%						60%	100%	80%	78%	80%	72%	85%
CARNES4 Q14	82%	82%	69%	81%	86%	78%	89%	69%	83%						78%	82%	81%	83%	79%	85%	79%
AVERAGE	80.20	79.43	70.09	79.80	89.26	68.60	86.34	74.37	82.09	x	x	x	x	x	69.13	91.18	80.48	80.77	79.64	78.58	82.11

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

	BANTO	BANTO	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	T1	T2																			
	JCC	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-	AMER	PAC	ALSK	OTHR	MUL-	HIS-	NOT	HIS-	VERY	FAIR		
									##	##	#	##	##	TI	PAN-	PAN-	GOOD	GOOD	POOR	FE-	
									WHT						IC	IC	&	&	MALE	MALE	
CARSN4 Q4	86%	83%	88%	79%	89%	93%	85%	89%	84%					91%	100%	87%	85%	86%	95%	82%	
APGET4 Q6	84%	78%	60%	78%	88%	84%	84%	100%	84%					83%	80%	85%	77%	95%	84%	84%	
AVERAGE	85.12	80.38	73.75	78.36	88.74	88.60	84.46	94.44	84.03	x	x	x	x	x	87.12	90.00	86.01	81.24	90.27	89.58	83.18

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

	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 #	AMER IND/ ALSK #	OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	FE-MALE				
DREXPL4 Q17	92%	92%	100%	97%	89%	84%	96%	94%	97%					80%	80%	94%	93%	91%	97%	89%		
DRLSTN4 Q18	90%	90%	89%	97%	100%	78%	91%	94%	92%					87%	93%	91%	91%	89%	94%	88%		
DRESPU4 Q19	92%	91%	89%	100%	100%	81%	91%	94%	94%					87%	93%	93%	94%	87%	96%	89%		
DRTMEN4 Q20	89%	88%	78%	90%	100%	81%	93%	94%	90%					93%	93%	91%	91%	87%	93%	88%		
AVERAGE	90.7	90.3	88.9	96.0	97.4	81.3	92.9	94.1	93.3	x	x	x	x	x	86.7	90.0	92.3	92.2	88.4	95.0	88.6	

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

	BANTO	BANTO	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	T1	T2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ILND #	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	MALE	FE-MALE	
PBCLCS4 Q31	86%	80%	92%	92%	91%	80%	85%	67%	86%					100%	100%	86%	91%	72%	93%	86%	
CSRESP Q32	91%	94%	92%	92%	91%	82%	100%	67%	95%					100%	86%	94%	86%	100%	93%	91%	
AVERAGE	88.64	86.67	92.31	91.67	90.91	80.91	92.31	66.67	90.64	x	x	x	x	x	100.0	92.86	89.73	88.64	86.11	92.86	88.57

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER				
	OT1	OT2												ITY	STATUS						
	JCC	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				
									##	##	#	##	##	TI	IC	IC	&				
																	&				
																	POOR				
																	MALE				
																	MALE				
NRXWHY Q10	96%	93%	100%	95%	100%	100%	94%	83%	97%					92%	100%	97%	95%	97%	97%	97%	
NRXWYNT Q11	75%	74%	83%	83%	100%	68%	60%	100%	75%					83%	67%	77%	80%	67%	81%	72%	
RXBST Q12	78%	77%	67%	74%	73%	68%	86%	83%	76%					83%	100%	76%	77%	77%	84%	72%	
AVERAGE	82.9	81.5	83.3	83.9	90.9	78.9	80.0	88.9	82.8	x	x	x	x	x	86.1	88.9	83.1	84.1	80.3	87.2	80.5

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		
	JCC 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 & FAIR & POOR	NO CCC	CCC	
Q1 YES	304 100%	5277 100%	43 100%	65 100%	106 100%	90 100%	137 100%	~	~	~	~	~	~	108 100%	168 100%	267 100%	12 100%	237 100%	67 100%
NOT ANSWERED	1	32	1				1							1	1	1			
VALID CASES	304	5277	43	65	106	90	137							108	168	267	12	237	67
NUMBER OF RESPONDENTS	305 100%	5309 100%	43 100%	66 100%	106 100%	90 100%	138 100%							108 100%	169 100%	268 100%	12 100%	238 100%	67 100%

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						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC 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	GOOD	FAIR	NO CCC	CCC
Q3 YES	88 30%	1639 32%	12 28%	21 33%	29 29%	26 30%	45 33%	~	~	~	~	~	~	34 33%	48 29%	77 29%	6 55%	~	63 28%	25 38%
NO	205 70%	3549 68%	31 72%	42 67%	71 71%	61 70%	92 67%	~	~	~	~	~	~	69 67%	120 71%	187 71%	5 45%	~	164 72%	41 62%
NOT ANSWERED	12	121		3	6	3	1							5	1	4	1		11	1
VALID CASES	293	5188	43	63	100	87	137							103	168	264	11		227	66
NUMBER OF RESPONDENTS	305	5309	43	66	106	90	138							108	169	268	12		238	67
	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		
	JCC 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 ##	MULTI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q4 NEVER	2 2%	19 1%	~	~	2 7%	~	1 2%	~	~	~	~	~	1 3%	1 2%	2 3%	~	1 2%	1 4%
SOMETIMES	5 6%	114 7%	~	~	2 7%	3 12%	5 11%	~	~	~	~	~	~	5 10%	5 6%	~	4 6%	1 4%
USUALLY	16 18%	272 18%	1 8%	6 29%	7 25%	2 8%	8 18%	~	~	~	~	~	7 21%	8 17%	14 18%	2 40%	11 18%	5 20%
ALWAYS	64 74%	1135 74%	11 92%	15 71%	17 61%	21 81%	31 69%	~	~	~	~	~	25 76%	34 71%	56 73%	3 60%	46 74%	18 72%
#ALWAYS + USUALLY (NET)	80 92%	1407 91%	12 100%	21 100%	24 86%	23 88%	39 87%	~	~	~	~	~	32 97%	42 88%	70 91%	5 100%	57 92%	23 92%
TOP BOX SCORE	64 74%	1135 74%	11 92%	15 71%	17 61%	21 81%	31 69%	~	~	~	~	~	25 76%	34 71%	56 73%	3 60%	46 74%	18 72%
NOT ANSWERED		1 99			1								1			1	1	
VALID CASES	87	1540	12	21	28	26	45						33	48	77	5	62	25
NUMBER OF RESPONDENTS	88 100%	1639 100%	12 100%	21 100%	29 100%	26 100%	45 100%						34 100%	48 100%	77 100%	6 100%	63 100%	25 100%

[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	
	JCC 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	GOOD	FAIR	NO CCC
Q5 YES	191 65%	3464 67%	33 79%	41 64%	59 59%	58 66%	84 62%	~	~	~	~	~	~	74 70%	102 61%	169 64%	8 67%	140 62%*	51 76%
NO	103 35%	1672 33%	9 21%	23 36%	41 41%	30 34%	52 38%	~	~	~	~	~	~	32 30%	65 39%	95 36%	4 33%	87 38%*	16 24%
NOT ANSWERED	11	173	1	2	6	2	2							2	2	4			11
VALID CASES	294	5136	42	64	100	88	136							106	167	264	12	227	67
NUMBER OF RESPONDENTS	305	5309	43	66	106	90	138							108	169	268	12	238	67
	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		
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK 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	NO CCC	CCC
Q6 NEVER	3 2%	57 2%	~	~	2%	4%	1%	~	~	~	~	~	1%	2%	3 2%~	1	0.8%~	2 5%
SOMETIMES	28 16%	393 12%	6 19%~	6 15%~	11 20%	5 10%	7 9%*	~	~	~	~	~	15 22%	10 11%	25 16%~	1 13%~	22 17%~	6 14%
USUALLY	36 20%	850 26%	9 29%~	8 21%~	9 17%	10 19%	10 13%*	~	~	~	~	~	21 30%*	11 12%*	31 20%~	2 25%~	28 21%~	8 18%
ALWAYS	109 62%	1954 60%	16 52%~	25 64%~	33 61%	35 67%	61 77%*	~	~	~	~	~	32 46%*	69 75%*	96 62%~	5 63%~	81 61%~	28 64%
#ALWAYS + USUALLY (NET)	145 82%	2804 86%	25 81%~	33 85%~	42 78%	45 87%	71 90%*	~	~	~	~	~	53 77%	80 87%	127 82%~	7 88%~	109 83%~	36 82%
TOP BOX SCORE	109 62%	1954 60%	16 52%~	25 64%~	33 61%	35 67%	61 77%*	~	~	~	~	~	32 46%*	69 75%*	96 62%~	5 63%~	81 61%~	28 64%
NOT ANSWERED	15	210	2	2	5	6	5						5	10	14		8	7
VALID CASES	176	3254	31	39	54	52	79						69	92	155	8	132	44
NUMBER OF RESPONDENTS	191 100%	3464 100%	33 100%	41 100%	59 100%	58 100%	84 100%						74 100%	102 100%	169 100%	8 100%	140 100%	51 100%

[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			
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-##	AS- IAN	NATV ILND	AMER PAC ALSK	IND/ OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q7 NONE	85 30%	1484 30%	8 19%	15 24%	35 36%	27 32%	46 34%	~	~	~	~	~	~	27 26%	57 35%*	81 31%	3 30%	71 32%	14 22%
1 TIME	72 25%	1437 29%	11 26%	13 21%	23 23%	25 30%	36 26%	~	~	~	~	~	~	22 22%	46 28%	68 26%	1 10%	56 25%	16 25%
2	78 27%	1045 21%*	13 30%	18 29%	26 27%	21 25%	31 23%	~	~	~	~	~	~	31 30%	38 23%	68 26%	3 30%	61 27%	17 27%
3	25 9%	518 10%	5 12%	13 21%*	3 3%*	4 5%	12 9%	~	~	~	~	~	~	11 11%	12 7%	23 9%	~	17 8%	8 13%
4	13 5%	229 5%	4 9%	2 3%	3 3%	4 5%	6 4%	~	~	~	~	~	~	4 4%	8 5%	12 5%	~	11 5%	2 3%
5 TO 9	10 3%	232 5%	2 5%	~	5 5%	3 4%	4 3%	~	~	~	~	~	~	5 5%	3 2%	6 2%	2 20%	5 2%	5 8%
10 OR MORE TIMES	4 1%	79 2%	~	1 2%	3 3%	~	1 0.7%	~	~	~	~	~	~	2 2%	1 0.6%	2 0.8%	1 10%	2 0.9%	2 3%
NOT ANSWERED	18	285	4	8	6	2	2							6	4	8	2	15	3
VALID CASES	287	5024	43	62	98	84	136							102	165	260	10	223	64
NUMBER OF RESPONDENTS	305	5309	43	66	106	90	138							108	169	268	12	238	67
	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		
	JCC 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
Q8 #YES	147 75%	2500 72%	29 83%~	32 68%~	49 78%	37 71%	69 78%	~	~	~	~	~	~	51 70%	82 77%	129 74%~	7 100%~	108 72%~	39 81%
NO	50 25%	975 28%	6 17%~	15 32%~	14 22%	15 29%	19 22%	~	~	~	~	~	~	22 30%	24 23%	46 26%~	~	41 28%~	9 19%
NOT ANSWERED	5	65				5	2							2	2	4		3	2
VALID CASES	197	3475	35	47	63	52	88							73	106	175	7	149	48
NUMBER OF RESPONDENTS	202	3540	35	47	63	57	90							75	108	179	7	152	50
	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		
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	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
Q9 NEVER	4 2%	83 2%	1 3%~	1 2%~	1 2%	1 2%	1 1%	~	~	~	~	~	~	2 3%	2 2%	4 2%~	~	3 2%~	1 2%
SOMETIMES	23 12%	254 7%*	3 9%~	3 6%~	9 14%	8 15%	7 8%	~	~	~	~	~	~	10 14%	9 8%	20 11%~	2 29%~	13 9%~	10 21%
USUALLY	39 20%	708 20%	4 11%~	9 19%~	14 22%	12 23%	12 14%*	~	~	~	~	~	~	20 27%	14 13%*	30 17%~	4 57%~	30 20%~	9 19%
ALWAYS	131 66%	2421 70%	27 77%~	34 72%~	39 62%	31 60%	68 77%*	~	~	~	~	~	~	41 56%*	81 76%*	121 69%~	1 14%~	103 69%~	28 58%
#ALWAYS + USUALLY (NET)	170 86%	3129 90%	31 89%~	43 91%~	53 84%	43 83%	80 91%	~	~	~	~	~	~	61 84%	95 90%	151 86%~	5 71%~	133 89%~	37 77%
TOP BOX SCORE	131 66%	2421 70%	27 77%~	34 72%~	39 62%	31 60%	68 77%*	~	~	~	~	~	~	41 56%*	81 76%*	121 69%~	1 14%~	103 69%~	28 58%
NOT ANSWERED		5 74				5	2							2 2	2	4		3	2
VALID CASES	197	3466	35	47	63	52	88							73	106	175	7	149	48
NUMBER OF RESPONDENTS	202 100%	3540 100%	35 100%	47 100%	63 100%	57 100%	90 100%							75 100%	108 100%	179 100%	7 100%	152 100%	50 100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC 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	
Q10 YES	42 22%	1023 30%*	9 26%~	4 9%~	17 27%	12 23%	16 19%	~	~	~	~	~	~	20 27%	19 18%	35 20%~	4 57%~	25 17%~	17 35%
NO	153 78%	2434 70%*	26 74%~	41 91%~	45 73%	41 77%	70 81%	~	~	~	~	~	~	53 73%	85 82%	138 80%~	3 43%~	121 83%~	32 65%
NOT ANSWERED	7	83		2	1	4	4							2	4	6		6	1
VALID CASES	195	3457	35	45	62	53	86							73	104	173	7	146	49
NUMBER OF RESPONDENTS	202	3540	35	47	63	57	90							75	108	179	7	152	50
	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			
	JCC 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	MULTI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q11 #YES	40 95%	937 94%	9 100%	4 100%	16 94%	11 92%	16 100%	~	~	~	~	~	~	18 90%	19 100%	34 97%	4 100%	24 96%	16 94%
NO	2 5%	63 6%	~	~	1 6%	1 8%	~	~	~	~	~	~	~	2 10%	~	1 3%	~	1 4%	1 6%
NOT ANSWERED		23																	
VALID CASES	42	1000	9	4	17	12	16							20	19	35	4	25	17
NUMBER OF RESPONDENTS	42	1023	9	4	17	12	16							20	19	35	4	25	17
	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						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN	NATV ILND	AMER PAC ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q12 #YES	31 74%	709 71%~	7 78%~	3 75%~	12 71%~	9 75%~	11 69%~	~	~	~	~	~	~	14 70%~	15 79%~	26 74%~	3 75%~	19 76%~	12 71%
NO	11 26%	290 29%~	2 22%~	1 25%~	5 29%~	3 25%~	5 31%~	~	~	~	~	~	~	6 30%~	4 21%~	9 26%~	1 25%~	6 24%~	5 29%
NOT ANSWERED		24																	
VALID CASES	42	999	9	4	17	12	16							20	19	35	4	25	17
NUMBER OF RESPONDENTS	42	1023	9	4	17	12	16							20	19	35	4	25	17
	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			
	JCC 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	
Q13 #YES	30 71%	780 79%	6 67%	4 100%	13 76%	7 58%	11 69%	~	~	~	~	~	~	14 70%	14 74%	25 71%	3 75%	19 76%	11 65%
NO	12 29%	209 21%	3 33%	~	4 24%	5 42%	5 31%	~	~	~	~	~	~	6 30%	5 26%	10 29%	1 25%	6 24%	6 35%
NOT ANSWERED		34																	
VALID CASES	42	989	9	4	17	12	16							20	19	35	4	25	17
NUMBER OF RESPONDENTS	42	1023	9	4	17	12	16							20	19	35	4	25	17
	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			
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-##	AS-IAN	NATV ILND	AMER PAC ALSK	IND/ OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q14 WORST HEALTH CARE POSSIBLE		12 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01	1 0.5%	10 0.3%	~	~	1 2%	~	~	~	~	~	~	~	~	1 1%	~	1 0.6%	~	~	1 2%
02		13 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03	1 0.5%	13 0.4%	~	1 2%	~	~	~	~	~	~	~	~	~	~	~	1 14%	~	~	1 2%
04	1 0.5%	22 0.6%	~	~	~	1 2%	~	~	~	~	~	~	~	1 1%	~	1 0.6%	~	1 0.7%	~
05	13 7%	111 3%	3 9%	2 4%	4 6%	4 8%	5 6%	~	~	~	~	~	~	2 3%	11 10%	12 7%	1 14%	9 6%	4 8%
06	5 3%	105 3%	~	1 2%	1 2%	3 6%	1 1%	~	~	~	~	~	~	3 4%	1 1%	3 2%	~	3 2%	2 4%
07	14 7%	269 8%	4 11%	2 4%	6 10%	2 4%	4 5%	~	~	~	~	~	~	8 11%	5 5%	13 7%	~	11 7%	3 6%
08	29 15%	725 21%*	5 14%	10 21%	8 13%	6 11%	12 14%	~	~	~	~	~	~	12 16%	13 12%	25 14%	1 14%	24 16%	5 10%
09	40 20%	742 21%	7 20%	8 17%	12 19%	13 25%	19 22%	~	~	~	~	~	~	15 20%	22 21%	35 20%	3 43%	32 22%	8 16%
BEST HEALTH CARE POSSIBLE	93 47%	1438 42%	16 46%	23 49%	30 48%	24 45%	46 53%	~	~	~	~	~	~	32 43%	53 50%	85 49%	1 14%	68 46%	25 51%
#8-10 (NET)	162 82%	2905 84%	28 80%	41 87%	50 81%	43 81%	77 89%*	~	~	~	~	~	~	59 80%	88 84%	145 83%	5 71%	124 84%	38 78%

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			
	JCC 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	GOOD & POOR	NO CCC	CCC
9-10 (NET)	133 68%	2180 63%	23 66%~	31 66%~	42 68%	37 70%	65 75%	~	~	~	~	~	~	47 64%	75 71%	120 69%~	4 57%~	100 68%~	33 67%
NOT ANSWERED	5	80			1	4	3							1	3	4		4	1
VALID CASES	197	3460	35	47	62	53	87							74	105	175	7	148	49
NUMBER OF RESPONDENTS	202 100%	3540 100%	35 100%	47 100%	63 100%	57 100%	90 100%							75 100%	108 100%	179 100%	7 100%	152 100%	50 100%
MEAN	8.75	8.70	8.74	8.83	8.73	8.70	9.03							8.65	8.84	8.79	7.57	8.81	8.55
p stat_(*=Sig @ p<=.05)		.653	~	~	.908	.806	.025*	~	~	~	~	~	~	.525	.409	~	~	~	~

[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	
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER PAC ALSK NATV ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q15 NEVER	4 2%	57 2%	~	2%~	3%	2%	~	~	~	~	~	~	4 5%~	~	4 2%~	~	2 1%~	2 4%
SOMETIMES	15 8%	311 9%	14%~	6%~	5%	8%	7%	~	~	~	~	~	3 4%	9 8%	13 7%~	1 14%~	11 7%~	4 8%
USUALLY	52 26%	1019 29%	20%~	17%~	35%	28%	17 19%*	~	~	~	~	~	28 38%*	19 18%*	42 24%~	5 71%~	39 26%~	13 27%
ALWAYS	126 64%	2073 60%	66%~	74%~	56%	62%	65 74%*	~	~	~	~	~	39 53%*	78 74%*	117 66%~	1 14%~	96 65%~	30 61%
#ALWAYS + USUALLY (NET)	178 90%	3092 89%	86%~	91%~	92%	91%	82 93%	~	~	~	~	~	67 91%	97 92%	159 90%~	6 86%~	135 91%~	43 88%
TOP BOX SCORE	126 64%	2073 60%	66%~	74%~	56%	62%	65 74%*	~	~	~	~	~	39 53%*	78 74%*	117 66%~	1 14%~	96 65%~	30 61%
NOT ANSWERED	5	80			1	4	2						1	2	3		4	1
VALID CASES	197	3460	35	47	62	53	88						74	106	176	7	148	49
NUMBER OF RESPONDENTS	202	3540	35	47	63	57	90						75	108	179	7	152	50
	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		
	JCC 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/ ALS K ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q16 YES	224 76%	3801 75%	9 21%	51 80%	90 91%*	74 85%*	109 79%	~	~	~	~	~	~	77 73%	134 79%	203 76%	11 92%~	170 75%	54 81%
NO	69 24%	1296 25%	34 79%~	13 20%	9 9%*	13 15%*	29 21%	~	~	~	~	~	~	29 27%	35 21%	63 24%~	1 8%~	56 25%	13 19%
NOT ANSWERED	12	212		2	7	3								2		2		12	
VALID CASES	293	5097	43	64	99	87	138							106	169	266	12	226	67
NUMBER OF RESPONDENTS	305 100%	5309 100%	43 100%	66 100%	106 100%	90 100%	138 100%							108 100%	169 100%	268 100%	12 100%	238 100%	67 100%

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		
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	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	
Q17 YES	21 10%	409 11%	1 13%~	3 6%	12 14%	5 7%	6 6%*	~	~	~	~	~	~	13 18%*	5 4%*	16 8%~	4 36%~	13 8%	8 16%
NO	195 90%	3206 89%	7 88%~	47 94%	76 86%	65 93%	99 94%*	~	~	~	~	~	~	61 82%*	124 96%*	179 92%~	7 64%~	152 92%	43 84%
NOT ANSWERED	8	186	1	1	2	4	4							3	5	8		5	3
VALID CASES	216	3615	8	50	88	70	105							74	129	195	11	165	51
NUMBER OF RESPONDENTS	224	3801	9	51	90	74	109							77	134	203	11	170	54
	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			
	JCC 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	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q18 #YES	19 90%	369 92%	100%	100%	92%	80%	100%	~	~	~	~	~	~	85%	100%	88%	100%	100%	75%
NO	2 10%	30 8%	~	~	8%	20%	~	~	~	~	~	~	~	15%	~	13%	~	~	25%
NOT ANSWERED		10																	
VALID CASES	21	399	1	3	12	5	6							13	5	16	4	13	8
NUMBER OF RESPONDENTS	21	409	1	3	12	5	6							13	5	16	4	13	8
	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			
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND ##	AMER PAC ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
Q19 YES	8 3%	214 4%	1 2%~	1 2%	4 4%	2 2%	3 2%	~	~	~	~	~	~	5 5%	3 2%	7 3%~	1 8%~	3 1%	5 8%	
NO	284 97%	4864 96%	42 98%~	63 98%	96 96%	83 98%	134 98%	~	~	~	~	~	~	101 95%	165 98%	258 97%~	11 92%~	224 99%	60 92%	
NOT ANSWERED	13	231		2	6	5	1							2	1	3			11	2
VALID CASES	292	5078	43	64	100	85	137							106	168	265	12	227	65	
NUMBER OF RESPONDENTS	305	5309	43	66	106	90	138							108	169	268	12	238	67	
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	JCC 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- IC	EX & VERY GOOD & FAIR POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q20 NEVER		21 10%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	1 13%	30 14%	~	~	~	50%	~	~	~	~	~	~	20%	~	14%	~	~	20%
USUALLY	3 38%	46 22%	1 ~100%	1 ~	1 25%	1 50%	2 67%	~	~	~	~	~	20%	67%	2 29%	1 100%	~	60%
ALWAYS	4 50%	113 54%	~100%	1 75%	3 ~	1 33%	~	~	~	~	~	~	60%	33%	4 57%	1 ~	~100%	20%
#ALWAYS + USUALLY (NET)	7 88%	159 76%	1 100%	1 100%	4 100%	1 50%	3 100%	~	~	~	~	~	80%	100%	6 86%	1 100%	~100%	80%
TOP BOX SCORE	4 50%	113 54%	~100%	1 75%	3 ~	1 33%	~	~	~	~	~	~	60%	33%	4 57%	1 ~	~100%	20%
NOT ANSWERED		4																
VALID CASES	8	210	1	1	4	2	3						5	3	7	1	3	5
NUMBER OF RESPONDENTS	8	214	1	1	4	2	3						5	3	7	1	3	5
	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			
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN	NATV ILND	AMER PAC ALSK	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q21 #YES	8	170	1	1	4	2	3	~	~	~	~	~	~	5	3	7	1	3	5
	100%	83%	~100%	~100%	~100%	~100%	~100%	~	~	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%
NO		36																	
		17%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		8																	
VALID CASES	8	206	1	1	4	2	3							5	3	7	1	3	5
NUMBER OF RESPONDENTS	8	214	1	1	4	2	3							5	3	7	1	3	5
	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	
	JCC 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	GOOD	FAIR	NO CCC
Q22 YES	34 12%	522 10%	4 9%	8 13%	12 12%	10 11%	15 11%	~	~	~	~	~	~	16 15%	16 9%	32 12%	2 17%	16 7%*	18 27%
NO	260 88%	4555 90%	39 91%	56 88%	88 88%	77 89%	123 89%	~	~	~	~	~	~	91 85%	153 91%	235 88%	10 83%	211 93%*	49 73%
NOT ANSWERED	11	232		2	6	3								1		1		11	
VALID CASES	294	5077	43	64	100	87	138							107	169	267	12	227	67
NUMBER OF RESPONDENTS	305	5309	43	66	106	90	138							108	169	268	12	238	67
	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	
	JCC 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
Q23 NEVER	2 6%	63 13%~	1 25%~	1 ~	1 8%~	1 ~	~	~	~	~	~	~	1 7%~	2 ~	2 6%~	1 ~	1 6%~	1 6%
SOMETIMES	8 25%	78 16%~	1 25%~	1 14%~	2 17%~	4 44%~	6 40%~	~	~	~	~	~	2 13%~	6 38%~	8 26%~	~	1 6%~	7 44%
USUALLY	5 16%	122 24%~	1 25%~	2 29%~	1 8%~	1 11%~	1 7%~	~	~	~	~	~	4 27%~	1 6%~	4 13%~	1 100%~	4 25%~	1 6%
ALWAYS	17 53%	236 47%~	1 25%~	4 57%~	8 67%~	4 44%~	8 53%~	~	~	~	~	~	8 53%~	9 56%~	17 55%~	~	10 63%~	7 44%
#ALWAYS + USUALLY (NET)	22 69%	358 72%~	2 50%~	6 86%~	9 75%~	5 56%~	9 60%~	~	~	~	~	~	12 80%~	10 63%~	21 68%~	1 100%~	14 88%~	8 50%
TOP BOX SCORE	17 53%	236 47%~	1 25%~	4 57%~	8 67%~	4 44%~	8 53%~	~	~	~	~	~	8 53%~	9 56%~	17 55%~	~	10 63%~	7 44%
NOT ANSWERED	2	23	1		1								1		1	1		2
VALID CASES	32	499	4	7	12	9	15						15	16	31	1	16	16
NUMBER OF RESPONDENTS	34	522	4	8	12	10	15						16	16	32	2	16	18
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q22 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	JCC 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
Q24 #YES	25 76%	347 69%	3 75%	5 63%	9 75%	8 89%	12 80%	~	~	~	~	~	13 87%	12 75%	24 77%	1 50%	12 75%	13 76%
NO	8 24%	153 31%	1 25%	3 38%	3 25%	1 11%	3 20%	~	~	~	~	~	2 13%	4 25%	7 23%	1 50%	4 25%	4 24%
NOT ANSWERED	1	22				1							1		1			1
VALID CASES	33	500	4	8	12	9	15						15	16	31	2	16	17
NUMBER OF RESPONDENTS	34	522	4	8	12	10	15						16	16	32	2	16	18
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q22 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC 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	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
Q25 YES	44 15%	769 15%	3 7%	11 17%	17 17%	13 15%	19 14%	~	~	~	~	~	~	17 16%	23 14%	35 13%	5 42%	~	24 11%*	20 30%
NO	250 85%	4303 85%	40 93%	53 83%	83 83%	74 85%	119 86%	~	~	~	~	~	~	90 84%	146 86%	232 87%	7 58%	~	203 89%*	47 70%
NOT ANSWERED	11	237		2	6	3								1		1			11	
VALID CASES	294	5072	43	64	100	87	138							107	169	267	12		227	67
NUMBER OF RESPONDENTS	305	5309	43	66	106	90	138							108	169	268	12		238	67
	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						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC 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 ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q26 NEVER	9 20%	94 13%	2 67%	4 36%	1 6%	2 15%	5 26%	~	~	~	~	~	~	2 12%	6 26%	9 26%	~	4 17%	5 25%
SOMETIMES	6 14%	122 16%	~	3 27%	1 6%	2 15%	1 5%	~	~	~	~	~	~	3 18%	1 4%	2 6%	1 20%	4 17%	2 10%
USUALLY	7 16%	178 24%	~	~	5 29%	2 15%	2 11%	~	~	~	~	~	~	5 29%	2 9%	5 14%	2 40%	4 17%	3 15%
ALWAYS	22 50%	353 47%	1 33%	4 36%	10 59%	7 54%	11 58%	~	~	~	~	~	~	7 41%	14 61%	19 54%	2 40%	12 50%	10 50%
#ALWAYS + USUALLY (NET)	29 66%	531 71%	1 33%	4 36%	15 88%	9 69%	13 68%	~	~	~	~	~	~	12 71%	16 70%	24 69%	4 80%	16 67%	13 65%
TOP BOX SCORE	22 50%	353 47%	1 33%	4 36%	10 59%	7 54%	11 58%	~	~	~	~	~	~	7 41%	14 61%	19 54%	2 40%	12 50%	10 50%
NOT ANSWERED		22																	
VALID CASES	44	747	3	11	17	13	19							17	23	35	5	24	20
NUMBER OF RESPONDENTS	44	769	3	11	17	13	19							17	23	35	5	24	20
	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			
	JCC 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	
Q27 #YES	26 59%	428 57%	1 33%	5 45%	13 76%	7 54%	11 58%	~	~	~	~	~	~	13 76%	12 52%	20 57%	5 100%	15 63%	11 55%
NO	18 41%	317 43%	2 67%	6 55%	4 24%	6 46%	8 42%	~	~	~	~	~	~	4 24%	11 48%	15 43%	~	9 38%	9 45%
NOT ANSWERED		24																	
VALID CASES	44	745	3	11	17	13	19							17	23	35	5	24	20
NUMBER OF RESPONDENTS	44	769	3	11	17	13	19							17	23	35	5	24	20
	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		
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND ##	AMER HAW/ PAC ALSK ##	IND/ OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q28 YES	58 20%	1124 22%	8 20%	10 16%	19 19%	21 24%	32 23%	~	~	~	~	~	~	18 17%	33 20%	48 18%	5 42%	29 13%*	29 43%
NO	233 80%	3915 78%	33 80%	54 84%	80 81%	66 76%	105 77%	~	~	~	~	~	~	88 83%	135 80%	217 82%	7 58%	195 87%*	38 57%
NOT ANSWERED	14	270	2	2	7	3	1							2	1	3		14	
VALID CASES	291	5039	41	64	99	87	137							106	168	265	12	224	67
NUMBER OF RESPONDENTS	305	5309	43	66	106	90	138							108	169	268	12	238	67
	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	
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND##	AMER ALSK##	OTH MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC
Q29 #YES	33 60%	673 62%	3 38%~	6 67%~	11 61%~	13 65%~	21 68%~	~	~	~	~	~	9 53%~	22 67%~	28 61%~	4 80%~	15 54%~	18 67%
NO	22 40%	416 38%	5 63%~	3 33%~	7 39%~	7 35%~	10 32%~	~	~	~	~	~	8 47%~	11 33%~	18 39%~	1 20%~	13 46%~	9 33%
NOT ANSWERED	3	35		1	1	1	1						1		2		1	2
VALID CASES	55	1089	8	9	18	20	31						17	33	46	5	28	27
NUMBER OF RESPONDENTS	58	1124	8	10	19	21	32						18	33	48	5	29	29
	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	
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND ##	AMER PAC ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q30 YES	261 91%	4437 89%	38 93%~	58 94%	91 92%	74 86%	126 93%	~	~	~	~	~	~	90 85%*	156 94%*	239 91%~	11 92%~	196 89%*	65 97%
NO	27 9%	550 11%	3 7%~	4 6%	8 8%	12 14%	9 7%	~	~	~	~	~	~	16 15%*	10 6%*	24 9%~	1 8%~	25 11%*	2 3%
NOT ANSWERED	17	322	2	4	7	4	3							2	3	5		17	
VALID CASES	288	4987	41	62	99	86	135							106	166	263	12	221	67
NUMBER OF RESPONDENTS	305	5309	43	66	106	90	138							108	169	268	12	238	67
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC 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
Q31 NONE	64 26%	1154 27%	4 11%	12 21%	29 34%*	19 26%	39 33%*	~	~	~	~	~	~	14 16%*	49 33%*	62 27%	2 18%	51 27%	13 21%
1 TIME	84 34%	1496 35%	14 39%	15 27%	26 30%	29 40%	38 32%	~	~	~	~	~	~	30 34%	49 33%	80 35%	~	61 33%	23 37%
2	67 27%	893 21%*	11 31%	19 34%	19 22%	18 25%	26 22%	~	~	~	~	~	~	27 31%	33 22%	55 24%	6 55%	54 29%	13 21%
3	18 7%	389 9%	3 8%	7 13%	4 5%	4 6%	8 7%	~	~	~	~	~	~	9 10%	8 5%	17 7%	~	12 6%	6 10%
4	6 2%	157 4%	1 3%	1 2%	3 3%	1 1%	2 2%	~	~	~	~	~	~	2 2%	3 2%	6 3%	~	4 2%	2 3%
5 TO 9	8 3%	138 3%	3 8%	2 4%	2 2%	1 1%	3 3%	~	~	~	~	~	~	4 5%	4 3%	7 3%	1 9%	4 2%	4 6%
10 OR MORE TIMES	3 1%	34 0.8%	~	~	3 3%	~	2 2%	~	~	~	~	~	~	1 1%	2 1%	1 0.4%	2 18%	1 0.5%	2 3%
NOT ANSWERED	11	176	2	2	5	2	8							3	8	11		9	2
VALID CASES	250	4261	36	56	86	72	118							87	148	228	11	187	63
NUMBER OF RESPONDENTS	261	4437	38	58	91	74	126							90	156	239	11	196	65
	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			
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	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
Q31A ALWAYS	6 3%	65 2%	1 ~	2 2%~	3 4%	3 6%	1 1%	~	~	~	~	~	~	5 7%	1 1%	5 3%~	1 11%~	5 4%~	1 2%
USUALLY	6 3%	49 2%	1 3%~	1 2%~	2 4%	2 4%	~	~	~	~	~	~	~	6 8%*	~	6 4%~	~	6 4%~	~
SOMETIMES	13 7%	202 7%	1 3%~	3 7%~	5 9%	4 8%	1 1%*	~	~	~	~	~	~	10 14%*	2 2%*	10 6%~	2 22%~	10 7%~	3 6%
NEVER	159 86%	2765 90%	30 94%~	38 88%~	48 84%	43 83%	76 97%*	~	~	~	~	~	~	51 71%*	95 97%*	143 87%~	6 67%~	114 84%~	45 92%
#NEVER + SOMETIMES (NET)	172 93%	2967 96%	31 97%~	41 95%~	53 93%	47 90%	77 99%*	~	~	~	~	~	~	61 85%*	97 99%*	153 93%~	8 89%~	124 92%~	48 98%
TOP BOX SCORE	159 86%	2765 90%	30 94%~	38 88%~	48 84%	43 83%	76 97%*	~	~	~	~	~	~	51 71%*	95 97%*	143 87%~	6 67%~	114 84%~	45 92%
NOT ANSWERED		2 26		1		1	1							1	1	2		1	1
VALID CASES	184	3081	32	43	57	52	78							72	98	164	9	135	49
NUMBER OF RESPONDENTS	186 100%	3107 100%	32 100%	44 100%	57 100%	53 100%	79 100%							73 100%	99 100%	166 100%	9 100%	136 100%	50 100%

[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	
	JCC 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
Q32 NEVER	4 2%	64 2%	~	2 5%~	1 2%	1 2%	1 1%	~	~	~	~	~	2 3%	1 1%	3 2%~	~	3 2%	1 2%
SOMETIMES	10 5%	100 3%	3 9%~	1 2%~	4 7%	2 4%	3 4%	~	~	~	~	~	5 7%	4 4%	9 5%~	1 11%~	6 4%	4 8%
USUALLY	27 15%	428 14%	5 16%~	8 19%~	6 11%	8 15%	6 8%*	~	~	~	~	~	16 22%*	8 8%*	22 13%~	3 33%~	21 16%	6 12%
ALWAYS	144 78%	2486 81%	24 75%~	32 74%~	46 81%	42 79%	68 87%*	~	~	~	~	~	50 68%*	85 87%*	131 79%~	5 56%~	105 78%	39 78%
#ALWAYS + USUALLY (NET)	171 92%	2914 95%	29 91%~	40 93%~	52 91%	50 94%	74 95%	~	~	~	~	~	66 90%	93 95%	153 93%~	8 89%~	126 93%	45 90%
TOP BOX SCORE	144 78%	2486 81%	24 75%~	32 74%~	46 81%	42 79%	68 87%*	~	~	~	~	~	50 68%*	85 87%*	131 79%~	5 56%~	105 78%	39 78%
NOT ANSWERED		1 29		1			1							1	1		1	
VALID CASES	185	3078	32	43	57	53	78						73	98	165	9	135	50
NUMBER OF RESPONDENTS	186 100%	3107 100%	32 100%	44 100%	57 100%	53 100%	79 100%						73 100%	99 100%	166 100%	9 100%	136 100%	50 100%

[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						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	JCC 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 & POOR	FAIR & POOR	NO CCC	CCC
Q33 NEVER	1 0.5%	29 0.9%	1 3%	~	~	~	~	~	~	~	~	~	~	~	1 0.6%	~	1 0.8%	~
SOMETIMES	11 6%	120 4%	2 6%	3 7%	5 9%	1 2%	3 4%	~	~	~	~	~	5 7%	5 5%	9 5%	2 22%	6 5%	5 10%
USUALLY	22 12%	422 14%	4 13%	5 12%	5 9%	8 15%	8 10%	~	~	~	~	~	11 15%	8 8%	18 11%	1 11%	17 13%	5 10%
ALWAYS	149 81%	2505 81%	25 78%	34 81%	47 82%	43 83%	67 86%	~	~	~	~	~	57 78%	85 87%*	137 83%	6 67%	109 82%	40 80%
#ALWAYS + USUALLY (NET)	171 93%	2927 95%	29 91%	39 93%	52 91%	51 98%*	75 96%	~	~	~	~	~	68 93%	93 95%	155 94%	7 78%	126 95%	45 90%
TOP BOX SCORE	149 81%	2505 81%	25 78%	34 81%	47 82%	43 83%	67 86%	~	~	~	~	~	57 78%	85 87%*	137 83%	6 67%	109 82%	40 80%
NOT ANSWERED	3	31	2	~	~	1	1	~	~	~	~	~	1	1	1	~	3	~
VALID CASES	183	3076	32	42	57	52	78	~	~	~	~	~	73	98	165	9	133	50
NUMBER OF RESPONDENTS	186	3107	32	44	57	53	79	~	~	~	~	~	73	99	166	9	136	50
	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	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
Q34 NEVER	1 0.5%	30 1%	1 3%	~	~	~	~	~	~	~	~	~	~	~	1 0.6%	~	1 0.8%	
SOMETIMES	6 3%	85 3%	~	1 2%	3 5%	2 4%	3 4%	~	~	~	~	~	2 3%	4 4%	5 3%	1 11%	4 3%	2 4%
USUALLY	26 14%	368 12%	4 13%	7 17%	7 12%	8 16%	6 8%*	~	~	~	~	~	15 21%	9 9%*	23 14%	2 22%	17 13%	9 18%
ALWAYS	149 82%	2589 84%	27 84%	34 81%	47 82%	41 80%	69 88%*	~	~	~	~	~	56 77%	85 87%	136 82%	6 67%	110 83%	39 78%
#ALWAYS + USUALLY (NET)	175 96%	2957 96%	31 97%	41 98%	54 95%	49 96%	75 96%	~	~	~	~	~	71 97%	94 96%	159 96%	8 89%	127 96%	48 96%
TOP BOX SCORE	149 82%	2589 84%	27 84%	34 81%	47 82%	41 80%	69 88%*	~	~	~	~	~	56 77%	85 87%	136 82%	6 67%	110 83%	39 78%
NOT ANSWERED	4	35		2		2	1							1	1		4	
VALID CASES	182	3072	32	42	57	51	78						73	98	165	9	132	50
NUMBER OF RESPONDENTS	186	3107	32	44	57	53	79						73	99	166	9	136	50
	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						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC 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
Q35 YES	122 67%	2086 68%	4 13%~	21 50%~	48 86%*	49 96%*	55 71%	~	~	~	~	~	~	47 64%	68 70%	110 67%~	6 67%~	84 64%~	38 78%
NO	59 33%	964 32%	28 88%~	21 50%~	8 14%*	2 4%*	22 29%	~	~	~	~	~	~	26 36%	29 30%	54 33%~	3 33%~	48 36%~	11 22%
NOT ANSWERED	5	57		2	1	2	2								2	2		4	1
VALID CASES	181	3050	32	42	56	51	77							73	97	164	9	132	49
NUMBER OF RESPONDENTS	186 100%	3107 100%	32 100%	44 100%	57 100%	53 100%	79 100%							73 100%	99 100%	166 100%	9 100%	136 100%	50 100%

[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		
	JCC 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
Q36 NEVER		25 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	6 5%	112 5%	~	2 10%	2 4%	2 4%	3 6%	~	~	~	~	~	3 6%	3 5%	5 5%	1 17%	6 7%	~
USUALLY	20 17%	405 20%	1 25%	5 24%	8 17%	6 13%	9 17%	~	~	~	~	~	9 19%	10 15%	18 17%	1 17%	15 18%	5 14%
ALWAYS	94 78%	1518 74%	3 75%	14 67%	38 79%	39 83%	42 78%	~	~	~	~	~	35 74%	53 80%	85 79%	4 67%	63 75%	31 86%
#ALWAYS + USUALLY (NET)	114 95%	1923 93%	4 100%	19 90%	46 96%	45 96%	51 94%	~	~	~	~	~	44 94%	63 95%	103 95%	5 83%	78 93%	36 100%
TOP BOX SCORE	94 78%	1518 74%	3 75%	14 67%	38 79%	39 83%	42 78%	~	~	~	~	~	35 74%	53 80%	85 79%	4 67%	63 75%	31 86%
NOT ANSWERED		2				2	1							2	2			2
VALID CASES	120	2060	4	21	48	47	54						47	66	108	6	84	36
NUMBER OF RESPONDENTS	122 100%	2086 100%	4 100%	21 100%	48 100%	49 100%	55 100%						47 100%	68 100%	110 100%	6 100%	84 100%	38 100%

[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						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	OT1	OT2	<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
Q37 NEVER	3 2%	72 2%	1 3%~	~	~	2 4%	~	~	~	~	~	~	1 1%	1 1%	3 2%~	~	2 2%~	1 2%
SOMETIMES	22 12%	238 8%	3 9%~	7 18%~	5 9%	7 14%	7 9%	~	~	~	~	~	12 17%	7 7%*	18 11%~	2 22%~	18 14%~	4 8%
USUALLY	32 18%	692 23%	6 19%~	8 20%~	11 19%	7 14%	9 12%*	~	~	~	~	~	18 25%*	13 13%	28 17%~	3 33%~	24 18%~	8 16%
ALWAYS	122 68%	2035 67%	22 69%~	25 63%~	41 72%	34 68%	62 79%*	~	~	~	~	~	40 56%*	76 78%*	113 70%~	4 44%~	86 66%~	36 73%
#ALWAYS + USUALLY (NET)	154 86%	2727 90%	28 88%~	33 83%~	52 91%	41 82%	71 91%	~	~	~	~	~	58 82%	89 92%*	141 87%~	7 78%~	110 85%~	44 90%
TOP BOX SCORE	122 68%	2035 67%	22 69%~	25 63%~	41 72%	34 68%	62 79%*	~	~	~	~	~	40 56%*	76 78%*	113 70%~	4 44%~	86 66%~	36 73%
NOT ANSWERED	7	70	4			3	1						2	2	4		6	1
VALID CASES	179	3037	32	40	57	50	78						71	97	162	9	130	49
NUMBER OF RESPONDENTS	186	3107	32	44	57	53	79						73	99	166	9	136	50
	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		
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN	NATV ILND	AMER PAC ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q38 #YES	154 86%	2662 87%	30 94%~	33 80%~	48 86%	43 84%	66 86%	~	~	~	~	~	~	61 84%	84 87%	140 85%~	8 89%~	111 85%	43 86%
NO	26 14%	384 13%	2 6%~	8 20%~	8 14%	8 16%	11 14%	~	~	~	~	~	~	12 16%	13 13%	24 15%~	1 11%~	19 15%	7 14%
NOT ANSWERED	6	61		3	1	2	2								2	2		6	
VALID CASES	180	3046	32	41	56	51	77							73	97	164	9	130	50
NUMBER OF RESPONDENTS	186	3107	32	44	57	53	79							73	99	166	9	136	50
	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		
	JCC 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	
Q39 YES	61 34%	1240 41%*	12 38%~	14 34%~	14 25%	21 41%	22 28%	~	~	~	~	~	~	29 40%	26 27%*	52 32%~	4 44%~	36 28%*	25 50%
NO	119 66%	1789 59%*	20 63%~	27 66%~	42 75%	30 59%	56 72%	~	~	~	~	~	~	43 60%	72 73%*	112 68%~	5 56%~	94 72%*	25 50%
NOT ANSWERED	6	78		3	1	2	1							1	1	2		6	
VALID CASES	180	3029	32	41	56	51	78							72	98	164	9	130	50
NUMBER OF RESPONDENTS	186	3107	32	44	57	53	79							73	99	166	9	136	50
	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		
	JCC 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 ##	MULTI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q40 NEVER	1 2%	81 7%*	~	~	8%	~	~	~	~	~	~	~	1 4%	1 2%	~	~	1 4%	
SOMETIMES	6 11%	139 12%	10%~	14%~	8%~	10%~	2 10%~	~	~	~	~	~	3 11%~	3 13%~	6 13%~	~	5 16%~	1 4%
USUALLY	15 27%	342 28%	10%~	36%~	25%~	30%~	5 25%~	~	~	~	~	~	8 30%~	6 26%~	13 28%~	1 25%~	9 29%~	6 24%
ALWAYS	34 61%	645 53%	80%~	50%~	58%~	60%~	13 65%~	~	~	~	~	~	15 56%~	14 61%~	27 57%~	3 75%~	17 55%~	17 68%
#ALWAYS + USUALLY (NET)	49 88%	987 82%	90%~	86%~	83%~	90%~	18 90%~	~	~	~	~	~	23 85%~	20 87%~	40 85%~	4 100%~	26 84%~	23 92%
TOP BOX SCORE	34 61%	645 53%	80%~	50%~	58%~	60%~	13 65%~	~	~	~	~	~	15 56%~	14 61%~	27 57%~	3 75%~	17 55%~	17 68%
NOT ANSWERED	5	33	2		2	1	2						2	3	5		5	
VALID CASES	56	1207	10	14	12	20	20						27	23	47	4	31	25
NUMBER OF RESPONDENTS	61 100%	1240 100%	100%	100%	100%	100%	100%						29 100%	26 100%	52 100%	4 100%	36 100%	25 100%

[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			
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-##	AS-IAN	NATV ILND	AMER PAC ALSK	OTH	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q41 WORST PERSONAL DOCTOR POSSIBLE		6 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01		4 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02		12 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03	2 0.8%	23 0.5%	~	1 2%	~	1 1%	1 0.8%	~	~	~	~	~	~	~	1 ~0.7%	1 0.4%	1 9%	~	2 3%
04	2 0.8%	19 0.4%	1 3%	~	1 1%	~	1 0.8%	~	~	~	~	~	~	~	1 ~0.7%	1 0.4%	1 9%	2 1%	~
05	5 2%	105 2%	1 3%	1 2%	1 1%	2 3%	3 3%	~	~	~	~	~	~	2 2%	3 2%	5 2%	~	3 2%	2 3%
06	13 5%	97 2%	1 3%	2 4%	6 7%	4 6%	6 5%	~	~	~	~	~	~	3 3%	9 6%	12 5%	~	8 4%	5 8%
07	16 6%	261 6%	3 8%	2 4%	6 7%	5 7%	6 5%	~	~	~	~	~	~	3 3%	13 9%*	14 6%	2 18%	10 5%	6 9%
08	36 15%	672 16%	7 19%	10 19%	11 13%	8 11%	17 14%	~	~	~	~	~	~	15 17%	21 14%	35 15%	1 9%	32 17%*	4 6%
09	46 19%	839 20%	5 14%	11 20%	16 19%	14 20%	25 21%	~	~	~	~	~	~	17 19%	28 19%	42 18%	3 27%	36 20%	10 16%
BEST PERSONAL DOCTOR POSSIBLE	127 51%	2208 52%	19 51%	27 50%	44 52%	37 52%	60 50%	~	~	~	~	~	~	48 55%	72 49%	119 52%	3 27%	92 50%	35 55%
#8-10 (NET)	209 85%	3719 88%	31 84%	48 89%	71 84%	59 83%	102 86%	~	~	~	~	~	~	80 91%*	121 82%	196 86%	7 64%	160 87%	49 77%

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		
	JCC 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- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	NO CCC	CCC
9-10 (NET)	173 70%	3047 72%	24 65%	38 70%	60 71%	51 72%	85 71%	~	~	~	~	~	65 74%	100 68%	161 70%	6 55%	128 70%	45 70%
NOT ANSWERED	14	191	1	4	6	3	7						2	8	10		13	1
VALID CASES	247	4246	37	54	85	71	119						88	148	229	11	183	64
NUMBER OF RESPONDENTS	261 100%	4437 100%	38 100%	58 100%	91 100%	74 100%	126 100%						90 100%	156 100%	239 100%	11 100%	196 100%	65 100%
MEAN	8.91	8.98	8.84	8.94	8.93	8.90	8.92						9.11	8.83	8.95	7.82	8.97	8.75
p stat_(*=Sig @ p<=.05)		.469	~.851	.888	.950	.959	~	~	~	~	~	~	.087	.303	~	~	.316	

[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		
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q42 YES	53 21%	1096 26%	4 11%	8 15%	21 25%	20 28%	25 21%	~	~	~	~	~	~	18 20%	32 22%	44 19%	7 64%	13 7%*	40 63%
NO	194 79%	3160 74%	33 89%	46 85%	64 75%	51 72%	93 79%	~	~	~	~	~	~	70 80%	116 78%	185 81%	4 36%	171 93%*	23 37%
NOT ANSWERED	14	181	1	4	6	3	8							2	8	10		12	2
VALID CASES	247	4256	37	54	85	71	118							88	148	229	11	184	63
NUMBER OF RESPONDENTS	261	4437	38	58	91	74	126							90	156	239	11	196	65
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLK OR AFR-##	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
Q43 #YES	46 94%	955 90%	3 100%	7 88%	20 100%	16 89%	24 96%	~	~	~	~	~	~	15 100%	29 94%	39 95%	5 83%	12 100%	34 92%
NO	3 6%	109 10%	~	1 13%	~	2 11%	1 4%	~	~	~	~	~	~	~	2 6%	2 5%	1 17%	~	3 8%
NOT ANSWERED	4	32	1		1	2								3	1	3	1	1	3
VALID CASES	49	1064	3	8	20	18	25							15	31	41	6	12	37
NUMBER OF RESPONDENTS	53	1096	4	8	21	20	25							18	32	44	7	13	40
	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		
	JCC 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	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q44 #YES	44 85%	906 85%	4 100%	6 75%	20 95%	14 74%	24 96%	~	~	~	~	~	~	13 76%	29 91%	39 91%	4 57%	13 100%	31 79%
NO	8 15%	155 15%	~	2 25%	1 5%	5 26%	1 4%	~	~	~	~	~	~	4 24%	3 9%	4 9%	3 43%	~	8 21%
NOT ANSWERED	1	35				1								1		1			1
VALID CASES	52	1061	4	8	21	19	25							17	32	43	7	13	39
NUMBER OF RESPONDENTS	53	1096	4	8	21	20	25							18	32	44	7	13	40
	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	
	JCC 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 NATV ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q45 YES	44 15%	856 17%	5 12%~	6 10%	12 12%	21 25%*	24 18%	~	~	~	~	~	15 ~14%	26 15%	37 14%~	5 42%~	25 11%*	19 29%
NO	242 85%	4125 83%	37 88%~	55 90%	88 88%	62 75%*	113 82%	~	~	~	~	~	93 ~86%	142 85%	230 86%~	7 58%~	195 89%*	47 71%
NOT ANSWERED	19	328	1	5	6	7	1							1	1		18	1
VALID CASES	286	4981	42	61	100	83	137						108	168	267	12	220	66
NUMBER OF RESPONDENTS	305 100%	5309 100%	43 100%	66 100%	106 100%	90 100%	138 100%						108 100%	169 100%	268 100%	12 100%	238 100%	67 100%

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			
	JCC 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	
Q46 NEVER	1 2%	59 7%	1 20%	~	~	~	1 4%	~	~	~	~	~	~	~	1 4%	1 3%	~	1 5%	
SOMETIMES	4 9%	127 15%	1 20%	1 17%	1 8%	1 5%	1 4%	~	~	~	~	~	~	2 13%	2 8%	4 11%	3 13%	1 5%	
USUALLY	12 28%	239 29%	2 40%	1 17%	2 17%	7 35%	5 22%	~	~	~	~	~	~	5 33%	5 20%	9 25%	2 40%	6 25%	6 32%
ALWAYS	26 60%	410 49%	1 20%	4 67%	9 75%	12 60%	16 70%	~	~	~	~	~	~	8 53%	17 68%	22 61%	3 60%	15 63%	11 58%
#ALWAYS + USUALLY (NET)	38 88%	649 78%	3 60%	5 83%	11 92%	19 95%	21 91%	~	~	~	~	~	~	13 87%	22 88%	31 86%	5 100%	21 88%	17 89%
TOP BOX SCORE	26 60%	410 49%	1 20%	4 67%	9 75%	12 60%	16 70%	~	~	~	~	~	~	8 53%	17 68%	22 61%	3 60%	15 63%	11 58%
NOT ANSWERED	1	21				1	1								1	1		1	
VALID CASES	43	835	5	6	12	20	23							15	25	36	5	24	19
NUMBER OF RESPONDENTS	44 100%	856 100%	5 100%	6 100%	12 100%	21 100%	24 100%							15 100%	26 100%	37 100%	5 100%	25 100%	19 100%

[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	
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ILND ##	AMER IND/PAC ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q47 NONE	3 7%	48 6%	2 40%	~	1 8%	~	1 4%	~	~	~	~	~	1 7%	2 8%	2 6%	1 20%	2 8%	1 5%
1 SPECIALIST	31 72%	509 61%	3 60%	6 100%	8 67%	14 70%	20 87%	~	~	~	~	~	7 47%	21 84%	27 75%	2 40%	17 71%	14 74%
2	5 12%	170 20%	~	~	2 17%	3 15%	1 4%	~	~	~	~	~	4 27%	1 4%	4 11%	1 20%	4 17%	1 5%
3	3 7%	53 6%	~	~	~	3 15%	1 4%	~	~	~	~	~	2 13%	1 4%	2 6%	1 20%	~	3 16%
4	1 2%	27 3%	~	~	1 8%	~	~	~	~	~	~	~	1 7%	~	1 3%	~	1 4%	~
5 OR MORE SPECIALISTS		25 3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	1	24				1	1							1	1		1	
VALID CASES	43	832	5	6	12	20	23						15	25	36	5	24	19
NUMBER OF RESPONDENTS	44	856	5	6	12	21	24						15	26	37	5	25	19
	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	
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ NATV ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q48 WORST SPECIALIST POSSIBLE	1 3%	7 0.9%	~	~	9%	~	~	~	~	~	~	~	1 7%	~	~	1 25%	~	1 5%
01		1 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02		5 0.6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03		7 0.9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
04		5 0.6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
05	1 3%	20 3%	~	~	~	1 5%	~	~	~	~	~	~	1 7%	~	1 3%	~	1 5%	~
06	1 3%	24 3%	1 3%	~	~	~	~	~	~	~	~	~	~	1 5%	1 3%	~	~	1 6%
07		51 7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
08	5 13%	135 17%	~	~	3 27%	2 11%	4 19%	~	~	~	~	~	~	3 14%	4 12%	~	3 14%	2 11%
09	13 33%	171 22%	1 33%	2 33%	3 27%	7 37%	7 33%	~	~	~	~	~	4 29%	9 41%	11 33%	1 25%	7 33%	6 33%
BEST SPECIALIST POSSIBLE	18 46%	353 45%	1 33%	4 67%	4 36%	9 47%	10 48%	~	~	~	~	~	8 57%	9 41%	16 48%	2 50%	9 43%	9 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		
	JCC 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	
#8-10 (NET)	36 92%	659 85%	2 67%	6 100%	10 91%	18 95%	21 100%	~	~	~	~	~	12 86%	21 95%	31 94%	3 75%	19 90%	17 94%
9-10 (NET)	31 79%	524 67%	2 67%	6 100%	7 64%	16 84%	17 81%	~	~	~	~	~	12 86%	18 82%	27 82%	3 75%	16 76%	15 83%
NOT ANSWERED	1	5				1	1							1	1		1	
VALID CASES	39	779	3	6	11	19	21						14	22	33	4	21	18
NUMBER OF RESPONDENTS	40	784	3	6	11	20	22						14	23	34	4	22	18
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%
MEAN	8.92	8.73	8.33	9.67	8.27	9.16	9.29						8.64	9.14	9.15	7.25	8.67	9.22
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	
	JCC 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
Q49 YES	83 29%	1241 25%	5 12%~	18 30%	34 35%	26 31%	31 23%*	~	~	~	~	~	39 ~ 36%*	41 24%*	76 29%~	5 42%~	65 30%	18 27%
NO	200 71%	3699 75%	37 88%~	42 70%	63 65%	58 69%	106 77%*	~	~	~	~	~	68 ~ 64%*	127 76%*	190 71%~	7 58%~	152 70%	48 73%
NOT ANSWERED	22	369	1	6	9	6	1						1	1	2		21	1
VALID CASES	283	4940	42	60	97	84	137						107	168	266	12	217	66
NUMBER OF RESPONDENTS	305 100%	5309 100%	43 100%	66 100%	106 100%	90 100%	138 100%						108 100%	169 100%	268 100%	12 100%	238 100%	67 100%

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			
	JCC 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	
Q50 NEVER		36 3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	22 28%	228 19%	1 20%	7 41%	11 32%	3 13%	8 28%	~	~	~	~	~	~	10 26%	12 31%	22 30%	17 27%	5 28%	
USUALLY	18 23%	350 29%	2 40%	2 12%	9 26%	5 21%	7 24%	~	~	~	~	~	~	8 21%	9 23%	13 18%	4 80%	13 21%	5 28%
ALWAYS	40 50%	598 49%	2 40%	8 47%	14 41%	16 67%	14 48%	~	~	~	~	~	~	21 54%	18 46%	38 52%	1 20%	32 52%	8 44%
#ALWAYS + USUALLY (NET)	58 73%	948 78%	4 80%	10 59%	23 68%	21 88%	21 72%	~	~	~	~	~	~	29 74%	27 69%	51 70%	5 100%	45 73%	13 72%
TOP BOX SCORE	40 50%	598 49%	2 40%	8 47%	14 41%	16 67%	14 48%	~	~	~	~	~	~	21 54%	18 46%	38 52%	1 20%	32 52%	8 44%
NOT ANSWERED		3		1		2	2								2	3		3	
VALID CASES	80	1212	5	17	34	24	29							39	39	73	5	62	18
NUMBER OF RESPONDENTS	83 100%	1241 100%	5 100%	18 100%	34 100%	26 100%	31 100%							39 100%	41 100%	76 100%	5 100%	65 100%	18 100%

[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		
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ILND ##	AMER IND/PAC ALSK ##	OTHR ##	MULTI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q51 NEVER	1 1%	17 1%	~	~	3%	~	~	~	~	~	~	~	1 3%	~	1 1%	~	1 2%
SOMETIMES	4 5%	87 7%	1 20%	1 6%	1 3%	1 4%	~	~	~	~	~	~	3 8%	1 3%	4 5%	~	3 5% 1 6%
USUALLY	18 22%	274 23%	1 20%	1 6%	10 29%	6 25%	7 24%	~	~	~	~	~	10 26%	8 21%	15 20%	3 60%	13 21% 5 28%
ALWAYS	58 72%	831 69%	3 60%	16 89%	22 65%	17 71%	22 76%	~	~	~	~	~	25 64%	30 77%	54 73%	2 40%	46 73% 12 67%
#ALWAYS + USUALLY (NET)	76 94%	1105 91%	4 80%	17 94%	32 94%	23 96%	29 100%	~	~	~	~	~	35 90%	38 97%	69 93%	5 100%	59 94% 17 94%
TOP BOX SCORE	58 72%	831 69%	3 60%	16 89%	22 65%	17 71%	22 76%	~	~	~	~	~	25 64%	30 77%	54 73%	2 40%	46 73% 12 67%
NOT ANSWERED	2	32				2	2							2	2		2
VALID CASES	81	1209	5	18	34	24	29						39	39	74	5	63 18
NUMBER OF RESPONDENTS	83 100%	1241 100%	5 100%	18 100%	34 100%	26 100%	31 100%						39 100%	41 100%	76 100%	5 100%	65 18 100%

[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		
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q52 YES	103 37%	1806 37%	11 27%~	21 36%	42 44%	29 35%	49 36%	~	~	~	~	~	~	40 38%	59 36%	96 37%~	6 55%~	82 39%	21 32%
NO	175 63%	3092 63%	30 73%~	38 64%	54 56%	53 65%	87 64%	~	~	~	~	~	~	65 62%	106 64%	166 63%~	5 45%~	130 61%	45 68%
NOT ANSWERED	27	411	2	7	10	8	2							3	4	6	1	26	1
VALID CASES	278	4898	41	59	96	82	136							105	165	262	11	212	66
NUMBER OF RESPONDENTS	305 100%	5309 100%	43 100%	66 100%	106 100%	90 100%	138 100%							108 100%	169 100%	268 100%	12 100%	238 100%	67 100%

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						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ILND ##	AMER PAC NATV ##	IND/ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
FQ53 NEVER	3 1%	83 2%	~	2%	2%	~	2%	~	~	~	~	~	~	~	2%	0.8%	9%	~	1%
SOMETIMES	21 8%	357 7%	5%~	5%	10%	9%	5%	~	~	~	~	~	~	12%	9%	8%~	9%	~	8% 6%
USUALLY	34 12%	646 13%	18%~	8%	14%	11%	15%	~	~	~	~	~	~	8%*	23%	12%~	27%	~	11% 17%
ALWAYS	217 79%	3743 78%	78%~	85%	74%	80%	77%	~	~	~	~	~	~	81%	129%	80%~	55%	~	79% 77%
#ALWAYS + USUALLY (NET)	251 91%	4389 91%	95%~	93%	88%	91%	93%	~	~	~	~	~	~	92%	152%	92%~	82%	~	90% 94%
TOP BOX SCORE	217 79%	3743 78%	78%~	85%	74%	80%	77%	~	~	~	~	~	~	81%	129%	80%~	55%	~	79% 77%
NOT ANSWERED	3	69	1		2									1	1	2			3
VALID CASES	275	4829	40	59	94	82	136							104	164	260	11	209	66
NUMBER OF RESPONDENTS	278	4898	41	59	96	82	136							105	165	262	11	212	66
	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		
	JCC 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
Q54 WORST HEALTH PLAN POSSIBLE		17 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01		14 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02	1 0.4%	21 0.4%	~	~	1%	~	~	~	~	~	~	~	1 0.9%	~	1 0.4%	~	~	1 1%
03		35 0.7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
04	4 1%	62 1%	1 3%	~	1 1%	2 2%	4 3%*	~	~	~	~	~	~	4 2%	4 2%	~	2 0.9%	2 3%
05	15 5%	266 5%	3 8%	4 7%	1 1%*	7 9%	9 7%	~	~	~	~	~	1 0.9%*	13 8%*	14 5%	1 8%	11 5%	4 6%
06	14 5%	237 5%	2 5%	3 5%	4 4%	5 6%	4 3%	~	~	~	~	~	5 5%	9 5%	12 5%	1 8%	11 5%	3 4%
07	24 9%	471 10%	6 15%	1 2%*	13 13%	4 5%	16 12%	~	~	~	~	~	1 0.9%*	21 13%*	24 9%	~	16 8%	8 12%
08	57 20%	939 19%	6 15%	10 17%	18 18%	23 28%	27 20%	~	~	~	~	~	23 21%	32 19%	50 19%	5 42%	38 18%	19 28%
09	56 20%	844 17%	7 18%	11 19%	22 22%	16 20%	28 21%	~	~	~	~	~	23 21%	33 20%	54 21%	2 17%	48 23%*	8 12%
BEST HEALTH PLAN POSSIBLE	108 39%	1982 41%	15 38%	30 51%*	38 39%	25 30%	47 35%	~	~	~	~	~	53 50%*	53 32%*	104 40%	3 25%	86 41%	22 33%
#8-10 (NET)	221 79%	3765 77%	28 70%	51 86%	78 80%	64 78%	102 76%	~	~	~	~	~	99 93%*	118 72%*	208 79%	10 83%	172 81%	49 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		
	JCC 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- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	NO CCC	CCC
9-10 (NET)	164 59%	2826 58%	22 55%~	41 69%*	60 61%	41 50%	75 56%	~	~	~	~	~	~	76 71%*	86 52%*	158 60%~	5 42%~	134 63%*	30 45%
NOT ANSWERED		26	3	7	8	8	3							1	4	5		26	
VALID CASES	279	4888	40	59	98	82	135							107	165	263	12	212	67
NUMBER OF RESPONDENTS	305 100%	5309 100%	43 100%	66 100%	106 100%	90 100%	138 100%							108 100%	169 100%	268 100%	12 100%	238 100%	67 100%
MEAN	8.55	8.47	8.35	8.88	8.65	8.28	8.41							9.02	8.27	8.57	8.25	8.67	8.18
p stat_(*=Sig @ p<=.05)		.388	~.073	.412	.073		.158	~	~	~	~	~	~	~.000*	.000*	~	~	~.050	

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	
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	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
Q55 YES	101 36%	1910 39%	14 34%~	15 25%*	38 38%	34 40%	51 37%	~	~	~	~	~	38 35%	60 36%	92 34%~	7 58%~	58 27%*	43 64%
NO	183 64%	3030 61%	27 66%~	45 75%*	61 62%	50 60%	87 63%	~	~	~	~	~	70 65%	109 64%	176 66%~	5 42%~	159 73%*	24 36%
NOT ANSWERED	21	369	2	6	7	6												21
VALID CASES	284	4940	41	60	99	84	138						108	169	268	12	217	67
NUMBER OF RESPONDENTS	305 100%	5309 100%	43 100%	66 100%	106 100%	90 100%	138 100%						108 100%	169 100%	268 100%	12 100%	238 100%	67 100%

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		
	JCC 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	
Q56 NEVER	4 4%	42 2%	1 ~	7%~	3 ~	9%~	2 ~	~	~	~	~	~	3 8%~	1 2%~	4 4%~	3 5%~	1 2%	
SOMETIMES	5 5%	156 8%	1 7%~	~	3 8%~	1 3%~	2 4%	~	~	~	~	~	3 8%~	2 3%~	5 5%~	3 5%~	2 5%	
USUALLY	23 23%	483 26%	6 43%~	3 20%~	6 16%~	8 24%~	9 18%	~	~	~	~	~	9 24%~	13 22%~	22 24%~	1 14%~	13 22%~	10 23%
ALWAYS	69 68%	1206 64%	7 50%~	11 73%~	29 76%~	22 65%~	40 78%*	~	~	~	~	~	23 61%~	44 73%~	61 66%~	6 86%~	39 67%~	30 70%
#ALWAYS + USUALLY (NET)	92 91%	1689 90%	13 93%~	14 93%~	35 92%~	30 88%~	49 96%	~	~	~	~	~	32 84%~	57 95%~	83 90%~	7 100%~	52 90%~	40 93%
TOP BOX SCORE	69 68%	1206 64%	7 50%~	11 73%~	29 76%~	22 65%~	40 78%*	~	~	~	~	~	23 61%~	44 73%~	61 66%~	6 86%~	39 67%~	30 70%
NOT ANSWERED		23																
VALID CASES	101	1887	14	15	38	34	51						38	60	92	7	58	43
NUMBER OF RESPONDENTS	101 100%	1910 100%	14 100%	15 100%	38 100%	34 100%	51 100%						38 100%	60 100%	92 100%	7 100%	58 100%	43 100%

[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			
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND ##	AMER HAW/ PAC ALSK ##	IND/ OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
Q57 #YES	55 54%	1118 60%	10 71%~	10 67%~	17 45%~	18 53%~	22 43%*	~	~	~	~	~	~	27 71%~	28 47%~	49 53%~	6 86%~	29 50%~	26 60%	
NO	46 46%	755 40%	4 29%~	5 33%~	21 55%~	16 47%~	29 57%*	~	~	~	~	~	~	11 29%~	32 53%~	43 47%~	1 14%~	29 50%~	17 40%	
NOT ANSWERED		37																		
VALID CASES	101	1873	14	15	38	34	51							38	60	92	7	58	43	
NUMBER OF RESPONDENTS	101	1910	14	15	38	34	51							38	60	92	7	58	43	
	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	
	JCC 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	237 86%	3983 82%	29 71%~	47 80%	89 92%*	72 90%	113 82%	~	~	~	~	~	~	94 91%*	137 82%*	225 86%~	10 83%~	178 85%	59 88%
NO	40 14%	876 18%	12 29%~	12 20%	8 8%*	8 10%	24 18%	~	~	~	~	~	~	9 9%*	31 18%*	38 14%~	2 17%~	32 15%	8 12%
NOT ANSWERED	28	450	2	7	9	10	1							5	1	5		28	
VALID CASES	277	4859	41	59	97	80	137							103	168	263	12	210	67
NUMBER OF RESPONDENTS	305	5309	43	66	106	90	138							108	169	268	12	238	67
	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		
	JCC 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	
Q57B YES	188 67%	2993 61%*	20 49%~	44 76%	71 72%	53 64%	88 65%	~	~	~	~	~	~	76 72%	107 64%	177 67%~	9 75%~	142 67%	46 69%
NO	92 33%	1901 39%*	21 51%~	14 24%	27 28%	30 36%	48 35%	~	~	~	~	~	~	30 28%	61 36%	88 33%~	3 25%~	71 33%	21 31%
NOT ANSWERED	25	415	2	8	8	7	2							2	1	3		25	
VALID CASES	280	4894	41	58	98	83	136							106	168	265	12	213	67
NUMBER OF RESPONDENTS	305 100%	5309 100%	43 100%	66 100%	106 100%	90 100%	138 100%							108 100%	169 100%	268 100%	12 100%	238 100%	67 100%

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			
	JCC 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	
Q57C NEVER	2 1%	52 2%	~	~	1%	2%	1 1%	~	~	~	~	~	~	1 1%	0.9%	0.6%~	~	~	2 4%
SOMETIMES	14 8%	168 6%	~	4 9%	5 7%	5 9%	3 3%*	~	~	~	~	~	~	8 11%	6 6%	13 7%~	1 11%	12 9%~	2 4%
USUALLY	34 18%	532 18%	5 26%~	4 9%~	12 17%	13 25%	15 17%	~	~	~	~	~	~	15 20%	17 16%	29 17%~	5 56%~	26 19%~	8 17%
ALWAYS	136 73%	2201 75%	14 74%~	36 82%~	52 74%	34 64%	69 78%	~	~	~	~	~	~	50 68%	83 78%	132 75%~	3 33%~	102 73%~	34 74%
#ALWAYS + USUALLY (NET)	170 91%	2733 93%	19 100%~	40 91%~	64 91%	47 89%	84 95%	~	~	~	~	~	~	65 88%	100 93%	161 92%~	8 89%~	128 91%~	42 91%
TOP BOX SCORE	136 73%	2201 75%	14 74%~	36 82%~	52 74%	34 64%	69 78%	~	~	~	~	~	~	50 68%	83 78%	132 75%~	3 33%~	102 73%~	34 74%
NOT ANSWERED	2	40	1		1									2		2		2	
VALID CASES	186	2953	19	44	70	53	88							74	107	175	9	140	46
NUMBER OF RESPONDENTS	188 100%	2993 100%	20 100%	44 100%	71 100%	53 100%	88 100%							76 100%	107 100%	177 100%	9 100%	142 100%	46 100%

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			
	JCC 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	
Q57D NEVER	33 24%	609 28%	4 29%	9 30%	9 17%	11 25%	14 25%	~	~	~	~	~	~	17 26%	16 23%	33 25%	2 ~	29 26%	4 15%
SOMETIMES	28 20%	384 18%	2 14%	6 20%	11 21%	9 20%	7 13%	~	~	~	~	~	~	12 18%	16 23%	26 20%	2 25%	23 20%	5 19%
USUALLY	29 21%	484 22%	4 29%	4 13%	11 21%	10 23%	11 20%	~	~	~	~	~	~	18 27%	11 15%	27 21%	2 25%	22 19%	7 26%
ALWAYS	50 36%	716 33%	4 29%	11 37%	21 40%	14 32%	24 43%	~	~	~	~	~	~	19 29%	28 39%	45 34%	4 50%	39 35%	11 41%
#ALWAYS + USUALLY (NET)	79 56%	1200 55%	8 57%	15 50%	32 62%	24 55%	35 63%	~	~	~	~	~	~	37 56%	39 55%	72 55%	6 75%	61 54%	18 67%
TOP BOX SCORE	50 36%	716 33%	4 29%	11 37%	21 40%	14 32%	24 43%	~	~	~	~	~	~	19 29%	28 39%	45 34%	4 50%	39 35%	11 41%
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	137	2639	27	29	43	38	79							38	96	132	4	97	40
NOT ANSWERED	28	477	2	7	11	8	3							4	2	5		28	
VALID CASES	140	2193	14	30	52	44	56							66	71	131	8	113	27
NUMBER OF RESPONDENTS	305	5309	43	66	106	90	138							108	169	268	12	238	67
	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		
	JCC 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 ##	MULTI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q57E EXTREMELY DIFFICULT	9 3%	164 3%	1 2%	2 3%	3 3%	3 3%	5 4%	~	~	~	~	~	1 1%	8 5%*	9 3%~	~	7 3%	2 3%
01	5 2%	92 2%	~	1 2%	1 1%	3 3%	4 3%	~	~	~	~	~	1 1%	4 2%	5 2%~	~	4 2%	1 2%
02	3 1%	75 1%	~	2 3%	~	1 1%	1 0.8%	~	~	~	~	~	1 1%	2 1%	3 1%~	~	3 1%~	
03	4 1%	133 3%	1 2%	1 2%	1 1%	1 1%	~	~	~	~	~	~	1 1%	2 1%	3 1%~	1 9%~	2 0.9%	2 3%
04	6 2%	87 2%	1 2%	2 3%	2 2%	1 1%	3 2%	~	~	~	~	~	1 1%	5 3%	5 2%~	1 9%~	5 2%	1 2%
05	16 5%	371 7%	3 7%	2 3%	7 7%	4 5%	9 7%	~	~	~	~	~	7 7%	9 6%	14 5%~	1 9%~	10 4%	6 10%
06	10 3%	203 4%	3 7%	4 6%	~	3 3%	6 5%	~	~	~	~	~	3 3%	7 4%	10 4%~	~	8 3%	2 3%
07	25 9%	375 7%	4 10%~	4 6%	12 12%	5 6%	13 10%	~	~	~	~	~	6 6%	19 12%*	24 9%~	~	18 8%	7 11%
09	102 35%	1657 33%	10 24%~	19 30%	39 38%	34 40%	36 27%*	~	~	~	~	~	37 36%	43 27%*	76 29%~	5 45%~	84 37%	18 29%
EXTREMELY EASY	112 38%	1890 37%	18 44%~	26 41%	37 36%	31 36%	54 41%	~	~	~	~	~	46 44%	63 39%	109 42%~	3 27%~	88 38%	24 38%
#8-10 (NET)	214 73%	3547 70%	28 68%~	45 71%	76 75%	65 76%	90 69%	~	~	~	~	~	83 80%	106 65%*	185 72%~	8 73%~	172 75%	42 67%
9-10 (NET)	214 73%	3547 70%	28 68%~	45 71%	76 75%	65 76%	90 69%	~	~	~	~	~	83 80%	106 65%*	185 72%~	8 73%~	172 75%	42 67%

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	
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	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 & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
88		1																	
NOT ANSWERED	13	261	2	3	4	4	7							4	7	10	1	9	4
VALID CASES	292	5047	41	63	102	86	131							104	162	258	11	229	63
NUMBER OF RESPONDENTS	305	5309	43	66	106	90	138							108	169	268	12	238	67
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%
MEAN	8.22	8.02	8.24	8.08	8.35	8.15	8.05							8.63	7.85	8.19	7.91	8.28	8.00
p stat_(*=Sig @ p<=.05)		.201	~.642	.494	.777		.300	~	~	~	~	~	~	~.025*	.003*	~	~	~.451	

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	JCC 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 & POOR	FAIR & POOR	NO CCC	CCC
Q58 EXCELLENT	115 41%	2100 43%	16 39%	30 51%	31 31%*	38 47%	61 45%	~	~	~	~	~	38 36%	76 45%	115 43%	~	104 49%*	11 17%
VERY GOOD	106 38%	1734 35%	15 37%	19 32%	41 41%	31 38%	56 41%	~	~	~	~	~	37 35%	67 40%	106 40%	~	77 36%	29 44%
GOOD	47 17%	854 17%	10 24%	8 14%	20 20%	9 11%	16 12%*	~	~	~	~	~	25 24%*	21 12%*	47 18%	~	29 14%*	18 27%
FAIR	11 4%	210 4%	~	3%	6 6%	3 4%	4 3%	~	~	~	~	~	6 6%	4 2%	~	11 92%	4 2%*	7 11%
POOR	1 0.4%	17 0.3%	~	~	1 1%	~	~	~	~	~	~	~	~	1 ~0.6%	~	1 8%	~	1 2%
#EXCELLENT + VERY GOOD + GOOD (NET)	268 96%	4688 95%	41 100%	57 97%	92 93%	78 96%	133 97%	~	~	~	~	~	100 94%	164 97%	268 100%	~	210 98%*	58 88%
NOT ANSWERED	25	394	2	7	7	9	1						2				24	1
VALID CASES	280	4915	41	59	99	81	137						106	169	268	12	214	66
NUMBER OF RESPONDENTS	305	5309	43	66	106	90	138						108	169	268	12	238	67
	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	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
Q59	JCC TOT CHLD	OHP TOT CHLD																
EXCELLENT	126 45%	2151 44%	25 63%~	31 53%	33 34%*	37 45%	62 46%	~	~	~	~	~	45 42%	80 48%	125 47%~	1 8%~	111 52%*	15 22%
VERY GOOD	75 27%	1382 28%	10 25%~	13 22%	28 29%	24 29%	36 26%	~	~	~	~	~	31 29%	44 26%	73 27%~	2 17%~	58 27%	17 25%
GOOD	53 19%	930 19%	3 8%~	13 22%	24 24%	13 16%	25 18%	~	~	~	~	~	23 21%	28 17%	49 18%~	4 33%~	37 17%	16 24%
FAIR	21 8%	366 7%	2 5%~	2 3%	11 11%	6 7%	11 8%	~	~	~	~	~	6 6%	14 8%	17 6%~	3 25%~	6 3%*	15 22%
POOR	4 1%	88 2%	~	~	2 2%	2 2%	2 1%	~	~	~	~	~	2 2%	2 1%	2 0.8%~	2 17%~	~	4 6%
#EXCELLENT + VERY GOOD + GOOD (NET)	254 91%	4463 91%	38 95%~	57 97%*	85 87%	74 90%	123 90%	~	~	~	~	~	99 93%	152 90%	247 93%~	7 58%~	206 97%*	48 72%
NOT ANSWERED	26	392	3	7	8	8	2						1	1	2		26	
VALID CASES	279	4917	40	59	98	82	136						107	168	266	12	212	67
NUMBER OF RESPONDENTS	305	5309	43	66	106	90	138						108	169	268	12	238	67
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	JCC 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/ ALS K ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q60 YES	55 20%	1056 22%	8 20%~	6 10%*	19 19%	22 27%	23 17%	~	~	~	~	~	~	25 23%	29 17%	48 18%~	6 50%~	15 7%*	40 61%
NO	224 80%	3853 78%	32 80%~	53 90%*	79 81%	60 73%	113 83%	~	~	~	~	~	~	82 77%	139 83%	217 82%~	6 50%~	198 93%*	26 39%
NOT ANSWERED	26	400	3	7	8	8	2							1	1	3		25	1
VALID CASES	279	4909	40	59	98	82	136							107	168	265	12	213	66
NUMBER OF RESPONDENTS	305 100%	5309 100%	43 100%	66 100%	106 100%	90 100%	138 100%							108 100%	169 100%	268 100%	12 100%	238 100%	67 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	JCC 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- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q61 YES	45 82%	843 81%	6 75%~	3 50%~	17 89%~	19 86%~	18 78%~	~	~	~	~	~	20 80%~	24 83%~	38 79%~	6 100%~	6 40%~	39 98%
NO	10 18%	192 19%	2 25%~	3 50%~	2 11%~	3 14%~	5 22%~	~	~	~	~	~	5 20%~	5 17%~	10 21%~	~	9 60%~	1 3%
NOT ANSWERED		21																
VALID CASES	55	1035	8	6	19	22	23						25	29	48	6	15	40
NUMBER OF RESPONDENTS	55	1056	8	6	19	22	23						25	29	48	6	15	40
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q60 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	JCC 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
Q62 YES	39 91%	748 91%	4 67%	2 100%	14 88%	19 100%	16 94%	~	~	~	~	~	17 85%	21 95%	33 92%	5 83%	39 ~100%	
NO	4 9%	77 9%	2 33%	~	2 13%	~	1 6%	~	~	~	~	~	3 15%	1 5%	3 8%	1 17%	4 100%	
NOT ANSWERED	2	18		1	1		1							2	2		2	
VALID CASES	43	825	6	2	16	19	17						20	22	36	6	4	39
NUMBER OF RESPONDENTS	45	843	6	3	17	19	18						20	24	38	6	6	39
	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	
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV ILND ##	AMER HAW/ PAC ALSK ##	IND/ OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC
Q63 YES	45 16%	832 17%	4 10%~	5 8%*	19 19%	17 21%	22 16%	~	~	~	~	~	~	14 13%	28 17%	38 14%~	6 50%~	11 5%*	34 52%
NO	233 84%	4059 83%	35 90%~	54 92%*	79 81%	65 79%	113 84%	~	~	~	~	~	~	93 87%	139 83%	226 86%~	6 50%~	201 95%*	32 48%
NOT ANSWERED	27	418	4	7	8	8	3							1	2	4		26	1
VALID CASES	278	4891	39	59	98	82	135							107	167	264	12	212	66
NUMBER OF RESPONDENTS	305	5309	43	66	106	90	138							108	169	268	12	238	67
	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	
	JCC 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
Q64 YES	29 66%	689 85%	3 100%	2 40%	13 68%	11 65%	16 76%	~	~	~	~	~	8 57%	20 74%	24 65%	4 67%	2 18%	27 82%
NO	15 34%	123 15%	~	3 60%	6 32%	6 35%	5 24%	~	~	~	~	~	6 43%	7 26%	13 35%	2 33%	9 82%	6 18%
NOT ANSWERED	1	20	1				1						1	1				1
VALID CASES	44	812	3	5	19	17	21						14	27	37	6	11	33
NUMBER OF RESPONDENTS	45	832	4	5	19	17	22						14	28	38	6	11	34
	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		
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q65 YES	27 93%	662 97%	3 100%	2 100%	12 92%	10 91%	16 100%	~	~	~	~	~	~	7 88%	19 95%	22 92%	4 100%	27 100%	
NO	2 7%	19 3%	~	~	1 8%	1 9%	~	~	~	~	~	~	~	1 13%	1 5%	2 8%	~	2 100%	
NOT ANSWERED		8																	
VALID CASES	29	681	3	2	13	11	16							8	20	24	4	2	27
NUMBER OF RESPONDENTS	29	689	3	2	13	11	16							8	20	24	4	2	27
	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		
	JCC 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	GOOD	FAIR	NO CCC
Q66 YES	31 11%	644 13%	3 8%~	5 8%	13 13%	10 12%	15 11%	~	~	~	~	~	~	11 10%	19 11%	28 11%~	3 25%~	10 5%*	21 31%
NO	249 89%	4243 87%	37 93%~	54 92%	85 87%	73 88%	122 89%	~	~	~	~	~	~	96 90%	150 89%	238 89%~	9 75%~	203 95%*	46 69%
NOT ANSWERED	25	422	3	7	8	7	1							1		2		25	
VALID CASES	280	4887	40	59	98	83	137							107	169	266	12	213	67
NUMBER OF RESPONDENTS	305	5309	43	66	106	90	138							108	169	268	12	238	67
	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	
	JCC 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
Q67 YES	20 67%	508 81%	2 67%	1 20%	10 83%	7 70%	12 86%	~	~	~	~	~	6 55%	13 72%	18 67%	2 67%	2 22%	18 86%
NO	10 33%	121 19%	1 33%	4 80%	2 17%	3 30%	2 14%	~	~	~	~	~	5 45%	5 28%	9 33%	1 33%	7 78%	3 14%
NOT ANSWERED	1	15				1	1							1	1		1	
VALID CASES	30	629	3	5	12	10	14						11	18	27	3	9	21
NUMBER OF RESPONDENTS	31	644	3	5	13	10	15						11	19	28	3	10	21
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q66 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	JCC 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 IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q68 YES	17 89%	477 96%	2 100%	1 100%	9 90%	5 83%	11 100%	~	~	~	~	~	4 67%	12 100%	15 88%	2 100%	17 100%	
NO	2 11%	22 4%	~	~	10 10%	1 17%	~	~	~	~	~	~	2 33%	~	2 12%	~	2 100%	
NOT ANSWERED	1	9				1	1							1	1		1	
VALID CASES	19	499	2	1	10	6	11						6	12	17	2	2	17
NUMBER OF RESPONDENTS	20	508	2	1	10	7	12						6	13	18	2	2	18
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q66 = YES AND Q67 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	JCC 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
Q69 YES	28 10%	558 11%	3 8%	8 14%	12 12%	5 6%	13 9%	~	~	~	~	~	~	13 12%	14 8%	26 10%	2 17%	14 7%*	14 21%
NO	251 90%	4342 89%	37 93%	51 86%	87 88%	76 94%	124 91%	~	~	~	~	~	~	94 88%	154 92%	239 90%	10 83%	199 93%*	52 79%
NOT ANSWERED	26	409	3	7	7	9	1							1	1	3		25	1
VALID CASES	279	4900	40	59	99	81	137							107	168	265	12	213	66
NUMBER OF RESPONDENTS	305 100%	5309 100%	43 100%	66 100%	106 100%	90 100%	138 100%							108 100%	169 100%	268 100%	12 100%	238 100%	67 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	JCC 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
Q70 YES	13 48%	389 72%	1 33%	3 38%	6 50%	3 75%	8 67%	~	~	~	~	~	4 31%	8 62%	11 44%	2 100%	1 8%	12 86%
NO	14 52%	149 28%	2 67%	5 63%	6 50%	1 25%	4 33%	~	~	~	~	~	9 69%	5 38%	14 56%	~	12 92%	2 14%
NOT ANSWERED	1	20				1	1							1	1		1	
VALID CASES	27	538	3	8	12	4	12						13	13	25	2	13	14
NUMBER OF RESPONDENTS	28	558	3	8	12	5	13						13	14	26	2	14	14
	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	
	JCC 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
Q71 YES	12 92%	357 93%	1 100%	3 100%	5 83%	3 100%	8 100%	~	~	~	~	~	3 75%	8 100%	10 91%	2 100%	12 100%	
NO	1 8%	27 7%	~	~	1 17%	~	~	~	~	~	~	~	1 25%	1 9%	~	1 100%	~	
NOT ANSWERED		5																
VALID CASES	13	384	1	3	6	3	8						4	8	11	2	1	12
NUMBER OF RESPONDENTS	13	389	1	3	6	3	8						4	8	11	2	1	12
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q69 = YES AND Q70 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	JCC 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	GOOD	FAIR	NO CCC	CCC
Q72 YES	40 14%	813 17%	3 8%	5 8%	16 17%	16 20%	22 16%	~	~	~	~	~	~	12 11%	27 16%	34 13%	5 45%	~	3 1%*	37 57%
NO	237 86%	4085 83%	37 93%	54 92%	80 83%	66 80%	113 84%	~	~	~	~	~	~	95 89%	140 84%	230 87%	6 55%	~	209 99%*	28 43%
NOT ANSWERED	28	411	3	7	10	8	3							1	2	4	1		26	2
VALID CASES	277	4898	40	59	96	82	135							107	167	264	11		212	65
NUMBER OF RESPONDENTS	305	5309	43	66	106	90	138							108	169	268	12		238	67
	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		
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q73 YES	36 92%	726 92%	2 100%	3 60%	15 94%	16 100%	20 95%	~	~	~	~	~	~	11 92%	24 92%	30 91%	5 100%	36 100%	
NO	3 8%	64 8%	~	2 40%	1 6%	~	1 5%	~	~	~	~	~	~	1 8%	2 8%	3 9%	~	3 100%	
NOT ANSWERED	1	23	1				1							1	1			1	
VALID CASES	39	790	2	5	16	16	21							12	26	33	5	3	36
NUMBER OF RESPONDENTS	40	813	3	5	16	16	22							12	27	34	5	3	37
	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		
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND NATV ##	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	43 14%	908 17%	43 100%	~	~	~	19 14%	~	~	~	~	~	~	15 14%	25 15%	41 15%	2 ~	36 15%	7 10%
4 TO 7 YEARS OLD	66 22%	1228 23%	~	66 ~100%	~	~	30 22%	~	~	~	~	~	~	21 19%	36 21%	57 21%	2 17%	58 24%*	8 12%
8 TO 12 YEARS OLD	106 35%	1650 31%	~	~	106 ~100%	~	49 36%	~	~	~	~	~	~	38 35%	60 36%	92 34%	7 58%	81 34%	25 37%
13 OR OLDER	90 30%	1523 29%	~	~	~	90 ~100%	40 29%	~	~	~	~	~	~	34 31%	48 28%	78 29%	3 25%	63 26%*	27 40%
VALID CASES	305	5309	43	66	106	90	138							108	169	268	12	238	67
NUMBER OF RESPONDENTS	305 100%	5309 100%	43 100%	66 100%	106 100%	90 100%	138 100%							108 100%	169 100%	268 100%	12 100%	238 100%	67 100%

[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		
	JCC 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	150 49%	2736 52%	19 44%	29 44%	56 53%	46 51%	73 53%	~	~	~	~	~	~	48 44%	84 50%	131 49%	3 25%	115 48%	35 52%
FEMALE	155 51%	2573 48%	24 56%	37 56%	50 47%	44 49%	65 47%	~	~	~	~	~	~	60 56%	85 50%	137 51%	9 75%	123 52%	32 48%
VALID CASES	305	5309	43	66	106	90	138							108	169	268	12	238	67
NUMBER OF RESPONDENTS	305 100%	5309 100%	43 100%	66 100%	106 100%	90 100%	138 100%							108 100%	169 100%	268 100%	12 100%	238 100%	67 100%

[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						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC 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
Q76 HISPANIC OR LATINO	108 39%	1726 35%	15 38%	21 37%	38 39%	34 41%	~	~	~	~	~	~	~	108 ~100%	~	100 38%	6 55%	87 41%	21 33%
NOT HISPANIC OR LATINO	169 61%	3146 65%	25 63%	36 63%	60 61%	48 59%	135 100%	~	~	~	~	~	~	~	169 ~100%	164 62%	5 45%	126 59%	43 67%
NOT ANSWERED	28	437	3	9	8	8	3									4	1	25	3
VALID CASES	277	4872	40	57	98	82	135							108	169	264	11	213	64
NUMBER OF RESPONDENTS	305 100%	5309 100%	43 100%	66 100%	106 100%	90 100%	138 100%							108 100%	169 100%	268 100%	12 100%	238 100%	67 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	JCC 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	
Q77.1 YES	224 73%	3787 71%	31 72%~	44 67%	84 79%	65 72%	138 100%~	~	~	~	~	~	~	66 61%*	155 92%*	213 79%~	9 75%~	168 71%*	56 84%
NO	81 27%	1522 29%	12 28%~	22 33%	22 21%	25 28%	~	~	~	~	~	~	~	42 39%*	14 8%*	55 21%~	3 25%~	70 29%*	11 16%
VALID CASES	305	5309	43	66	106	90	138							108	169	268	12	238	67
NUMBER OF RESPONDENTS	305 100%	5309 100%	43 100%	66 100%	106 100%	90 100%	138 100%							108 100%	169 100%	268 100%	12 100%	238 100%	67 100%

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		
	JCC 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	9 3%	204 4%	~	2%	5%	3%	~	~	~	~	~	~	~	1 0.9%	8 5%*	9 3%~	~	7 3%	2 3%
NO	296 97%	5105 96%	43 100%~	65 98%	101 95%	87 97%	138 100%~	~	~	~	~	~	~	107 99%	161 95%*	259 97%~	12 100%~	231 97%	65 97%
VALID CASES	305	5309	43	66	106	90	138							108	169	268	12	238	67
NUMBER OF RESPONDENTS	305 100%	5309 100%	43 100%	66 100%	106 100%	90 100%	138 100%							108 100%	169 100%	268 100%	12 100%	238 100%	67 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	JCC 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-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q77.3 YES	8 3%	184 3%	4 9%	3 5%	1 0.9%		~	~	~	~	~	~	~	8 5%	8 3%	7 3%	1 1%	
NO	297 97%	5125 97%	39 91%	63 95%	105 99%	90 100%	138 100%	~	~	~	~	~	108 100%	161 95%	260 97%	12 100%	231 97%	66 99%
VALID CASES	305	5309	43	66	106	90	138						108	169	268	12	238	67
NUMBER OF RESPONDENTS	305 100%	5309 100%	43 100%	66 100%	106 100%	90 100%	138 100%						108 100%	169 100%	268 100%	12 100%	238 100%	67 100%

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	
	JCC 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
Q77.4 YES	4 1%	83 2%	~	~	3%	1%	~	~	~	~	~	~	3 3%	1 0.6%	4 1%	~	3 1%	1 1%
NO	301 99%	5226 98%	43 100%	66 100%	103 97%	89 99%	138 100%	~	~	~	~	~	105 97%	168 99%	264 99%	12 100%	235 99%	66 99%
VALID CASES	305	5309	43	66	106	90	138						108	169	268	12	238	67
NUMBER OF RESPONDENTS	305 100%	5309 100%	43 100%	66 100%	106 100%	90 100%	138 100%						108 100%	169 100%	268 100%	12 100%	238 100%	67 100%

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	
	JCC 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- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.5 YES	19 6%	335 6%	3 7%	3 5%	6 6%	7 8%	~	~	~	~	~	~	7 6%	12 7%	18 7%	1 8%	11 5%	8 12%
NO	286 94%	4974 94%	40 93%	63 95%	100 94%	83 92%	138 100%	~	~	~	~	~	101 94%	157 93%	250 93%	11 92%	227 95%	59 88%
VALID CASES	305	5309	43	66	106	90	138						108	169	268	12	238	67
NUMBER OF RESPONDENTS	305 100%	5309 100%	43 100%	66 100%	106 100%	90 100%	138 100%						108 100%	169 100%	268 100%	12 100%	238 100%	67 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC 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 NATV ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q77.6 YES	22 7%	374 7%	4 9%~	5 8%	6 6%	7 8%	~	~	~	~	~	~	~	17 ~ 16%*	5 3%*	21 8%~	1 8%~	17 7%	5 7%
NO	283 93%	4935 93%	39 91%~	61 92%	100 94%	83 92%	138 100%~	~	~	~	~	~	~	91 ~ 84%*	164 97%*	247 92%~	11 92%~	221 93%	62 93%
VALID CASES	305	5309	43	66	106	90	138							108	169	268	12	238	67
NUMBER OF RESPONDENTS	305 100%	5309 100%	43 100%	66 100%	106 100%	90 100%	138 100%							108 100%	169 100%	268 100%	12 100%	238 100%	67 100%

Q78 WHAT IS YOUR AGE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC 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 & GOOD	FAIR & POOR	NO CCC	CCC
Q78 UNDER 18	5 2%	141 3%	1 3%~	~	1 1%	3 4%	3 2%	~	~	~	~	~	~	2 2%	3 2%	5 2%~	~	2 0.9%	3 5%
18 TO 24	7 3%	161 3%	2 5%~	2 3%	1 1%	2 2%	2 1%	~	~	~	~	~	~	4 4%	3 2%	6 2%~	1 9%~	6 3%	1 2%
25 TO 34	87 31%	1564 32%	21 53%~	27 47%*	33 34%	6 7%*	37 27%	~	~	~	~	~	~	41 38%*	44 26%*	84 32%~	3 27%~	75 35%*	12 18%
35 TO 44	103 37%	1821 37%	15 38%~	19 33%	35 36%	34 41%	53 39%	~	~	~	~	~	~	37 35%	64 38%	97 37%~	4 36%~	80 37%	23 35%
45 TO 54	61 22%	797 16%*	1 3%~	9 16%	23 23%	28 34%*	30 22%	~	~	~	~	~	~	21 20%	40 24%	57 22%~	3 27%~	41 19%	20 31%
55 TO 64	11 4%	266 5%	~	1 2%	2 2%	8 10%*	7 5%	~	~	~	~	~	~	2 2%	9 5%	11 4%~	~	7 3%	4 6%
65 TO 74	5 2%	116 2%	~	~	3 3%	2 2%	5 4%*	~	~	~	~	~	~	~	5 3%~	5 2%~	~	3 1%	2 3%
75 OR OLDER		16 0.3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	26	427	3	8	8	7	1							1	1	3	1	24	2
VALID CASES	279	4882	40	58	98	83	137							107	168	265	11	214	65
NUMBER OF RESPONDENTS	305	5309	43	66	106	90	138							108	169	268	12	238	67
	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		
	JCC 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
Q79 MALE	40 14%	702 14%	4 10%	6 10%	18 18%	12 14%	18 13%	~	~	~	~	~	~	12 11%	28 17%	36 14%	4 36%	27 13%	13 20%
FEMALE	240 86%	4191 86%	35 90%	53 90%	81 82%	71 86%	120 87%	~	~	~	~	~	~	96 89%	140 83%	230 86%	7 64%	187 87%	53 80%
NOT ANSWERED	25	416	4	7	7	7									1	2	1	24	1
VALID CASES	280	4893	39	59	99	83	138							108	168	266	11	214	66
NUMBER OF RESPONDENTS	305 100%	5309 100%	43 100%	66 100%	106 100%	90 100%	138 100%							108 100%	169 100%	268 100%	12 100%	238 100%	67 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILLND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q80																			
8TH GRADE OR LESS	31 11%	479 10%	6 15%~	3 5%*	13 14%	9 11%	4 3%*	~	~	~	~	~	~	27 26%*	4 2%*	27 10%~	4 36%~	26 13%	5 8%
SOME HIGH SCHOOL BUT DID NOT GRADUATE	33 12%	480 10%	7 18%~	2 4%*	12 13%	12 15%	11 8%*	~	~	~	~	~	~	19 18%*	13 8%*	28 11%~	5 45%~	22 11%	11 17%
HIGH SCHOOL GRADUATE OR GED	83 31%	1452 30%	10 26%~	20 36%	28 29%	25 31%	44 33%	~	~	~	~	~	~	28 27%	53 32%	80 31%~	2 18%~	62 30%	21 32%
SOME COLLEGE OR 2-YEAR DEGREE	84 31%	1752 36%	11 28%~	21 38%	30 31%	22 27%	53 39%*	~	~	~	~	~	~	19 18%*	64 39%*	83 32%~	~	66 32%	18 28%
4-YEAR COLLEGE GRADUATE	25 9%	437 9%	4 10%~	6 11%	5 5%	10 12%	13 10%	~	~	~	~	~	~	7 7%	18 11%	25 10%~	~	17 8%	8 12%
MORE THAN 4-YEAR COLLEGE DEGREE	16 6%	238 5%	1 3%~	4 7%	8 8%	3 4%	10 7%	~	~	~	~	~	~	3 3%	13 8%	16 6%~	~	14 7%	2 3%
NOT ANSWERED	33	471	4	10	10	9	3							5	4	9	1	31	2
VALID CASES	272	4838	39	56	96	81	135							103	165	259	11	207	65
NUMBER OF RESPONDENTS	305	5309	43	66	106	90	138							108	169	268	12	238	67
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

Q81 HOW ARE YOU RELATED TO THE CHILD?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	JCC 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
Q81 MOTHER OR FATHER	249 92%	4466 93%	37 95%~	50 89%	86 91%	76 93%	118 89%	~	~	~	~	~	99 94%	146 90%	237 92%~	10 91%~	195 93%	54 89%
GRANDPARENT	7 3%	186 4%	1 3%~	~	4 4%	2 2%	6 5%	~	~	~	~	~	1 1%	6 4%	7 3%~	~	2 1%*	5 8%
AUNT OR UNCLE	3 1%	33 0.7%	~	~	2 2%	1 1%	1 0.8%	~	~	~	~	~	2 2%	1 0.6%	2 0.8%~	~	3 1%~	~
OLDER BROTHER OR SISTER	2 0.7%	12 0.2%	~	~	1 1%	1 1%	~	~	~	~	~	~	1 1%	1 0.6%	2 0.8%~	~	2 1%~	~
OTHER RELATIVE	1 0.4%	6 0.1%	~	2%~	~	~	1 0.8%~	~	~	~	~	~	~	1 0.6%~	1 0.4%~	~	1 0.5%~	~
LEGAL GUARDIAN	6 2%	73 2%	~	5%	1 1%	2 2%	5 4%	~	~	~	~	~	1 1%	5 3%	5 2%~	1 9%~	4 2%	2 3%
SOMEONE ELSE	3 1%	33 0.7%	1 3%~	2 4%	~	~	1 0.8%	~	~	~	~	~	1 1%	2 1%	3 1%~	~	3 1%~	~
NOT ANSWERED	34	500	4	10	12	8	6						3	7	11	1	28	6
VALID CASES	271	4809	39	56	94	82	132						105	162	257	11	210	61
NUMBER OF RESPONDENTS	305 100%	5309 100%	43 100%	66 100%	106 100%	90 100%	138 100%						108 100%	169 100%	268 100%	12 100%	238 100%	67 100%

Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ PAC	ALS NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q82 YES	1 0.6%	101 3%	~	~	2%	~	~	~	~	~	~	~	~	2%	~	0.6%	~	0.9%	
NO	165 99%	2894 97%	100%~	100%~	98%~	100%~	100%~	~	~	~	~	~	~	98%~	100%~	99%~	100%~	99%~	100%~
NOT ANSWERED	5	59	1	1	2	1	1							2	2	4		4	1
VALID CASES	166	2995	23	35	52	56	95							54	109	159	4	116	50
NUMBER OF RESPONDENTS	171 100%	3054 100%	24 100%	36 100%	54 100%	57 100%	96 100%							56 100%	111 100%	163 100%	4 100%	120 100%	51 100%

[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		
	JCC 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	1 100%	53 52%~	~	~	~	1 ~100%~	~	~	~	~	~	~	1 ~100%~	1 ~100%~	1 ~100%~		
NO		48 48%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
VALID CASES	1	101				1							1	1	1		
NUMBER OF RESPONDENTS	1 100%	101 100%				1 100%							1 100%	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		
	JCC 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- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.2 YES		31 31%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	1 100%	70 69%~	~	~	100%~	~	~	~	~	~	~	~	100%~	100%~	100%~	100%~	100%~	100%~
VALID CASES	1	101			1								1	1	1	1	1	1
NUMBER OF RESPONDENTS	1 100%	101 100%			1 100%								1 100%	1 100%	1 100%	1 100%	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		
	JCC 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- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.3 YES		13 13%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	1 100%	88 87%~	~	~	100%~	~	~	~	~	~	~	~	100%~	~	100%~	~	100%~	~
VALID CASES	1	101			1								1		1		1	
NUMBER OF RESPONDENTS	1 100%	101 100%			1 100%								1 100%		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		
	JCC 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
Q83.4 YES		43 43%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NO	1 100%	58 57%~	~	~	100%~	~	~	~	~	~	~	100%~	~	1 100%~	~	1 100%~		
VALID CASES	1	101			1							1		1		1		
NUMBER OF RESPONDENTS	1 100%	101 100%			1 100%							1 100%		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		
	JCC 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
Q83.5 YES		6 6%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	1 100%	95 94%~	~	~	100%~	~	~	~	~	~	~	~	1 100%~	1 100%~	1 100%~	1 100%~	1 100%~	
VALID CASES	1	101			1								1	1	1	1	1	
NUMBER OF RESPONDENTS	1 100%	101 100%			1 100%								1 100%	1 100%	1 100%	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	
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC/ALSK	OTHR	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC
NQ14 0-6	21 11%	286 8%	3 9%	4 9%	6 10%	8 15%	6 7%	~	~	~	~	~	7 9%	12 11%	17 10%	2 29%	13 9%	8 16%
7-8	43 22%	994 29%*	9 26%	12 26%	14 23%	8 15%	16 18%	~	~	~	~	~	20 27%	18 17%	38 22%	1 14%	35 24%	8 16%
9-10	133 68%	2180 63%	23 66%	31 66%	42 68%	37 70%	65 75%	~	~	~	~	~	47 64%	75 71%	120 69%	4 57%	100 68%	33 67%
VALID CASES	197	3460	35	47	62	53	87						74	105	175	7	148	49
NUMBER OF RESPONDENTS	197 100%	3460 100%	35 100%	47 100%	62 100%	53 100%	87 100%						74 100%	105 100%	175 100%	7 100%	148 100%	49 100%
MEAN	2.57	2.55	2.57	2.57	2.58	2.55	2.68						2.54	2.60	2.59	2.29	2.59	2.51
p stat_(*=Sig @ p<=.05)		.635	~	~	.864	.802	.043*	~	~	~	~	~	.652	.488	~	~	~	~

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
NQ41																			
0-6	22 9%	266 6%	3 8%	4 7%	8 9%	7 10%	11 9%	~	~	~	~	~	~	5 6%	14 9%	19 8%	2 18%	13 7%	9 14%
7-8	52 21%	933 22%	10 27%	12 22%	17 20%	13 18%	23 19%	~	~	~	~	~	~	18 20%	34 23%	49 21%	3 27%	42 23%	10 16%
9-10	173 70%	3047 72%	24 65%	38 70%	60 71%	51 72%	85 71%	~	~	~	~	~	~	65 74%	100 68%	161 70%	6 55%	128 70%	45 70%
VALID CASES	247	4246	37	54	85	71	119							88	148	229	11	183	64
NUMBER OF RESPONDENTS	247 100%	4246 100%	37 100%	54 100%	85 100%	71 100%	119 100%							88 100%	148 100%	229 100%	11 100%	183 100%	64 100%
MEAN	2.61	2.65	2.57	2.63	2.61	2.62	2.62							2.68	2.58	2.62	2.36	2.63	2.56
p stat_(*=Sig @ p<=.05)		.273	~.810	.994	.899	.806	~	~	~	~	~	~	~	.183	.369	~	~	.484	

[ASKED IF Q30 = YES]

NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC 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	FAIR & POOR	NO CCC	CCC
NQ48 0-6	3 8%	69 9%	1 33%	~	1 9%	1 5%	~	~	~	~	~	~	~	2 14%	1 5%	2 6%	1 25%	2 10%	1 6%
7-8	5 13%	186 24%	~	~	3 27%	2 11%	4 19%	~	~	~	~	~	~	3 14%	4 12%	~	~	3 14%	2 11%
9-10	31 79%	524 67%	2 67%	6 100%	7 64%	16 84%	17 81%	~	~	~	~	~	~	12 86%	18 82%	27 82%	3 75%	16 76%	15 83%
VALID CASES	39	779	3	6	11	19	21							14	22	33	4	21	18
NUMBER OF RESPONDENTS	39	779	3	6	11	19	21							14	22	33	4	21	18
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%
MEAN	2.72	2.58	2.33	3.00	2.55	2.79	2.81							2.71	2.77	2.76	2.50	2.67	2.78
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						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	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
NQ54 0-6	34 12%	652 13%	6 15%	7 12%	7 7%*	14 17%	17 13%	~	~	~	~	~	~	7 7%*	26 16%*	31 12%	2 17%	24 11%	10 15%
7-8	81 29%	1410 29%	12 30%	11 19%*	31 32%	27 33%	43 32%	~	~	~	~	~	~	24 22%*	53 32%	74 28%	5 42%	54 25%*	27 40%
9-10	164 59%	2826 58%	22 55%	41 69%*	60 61%	41 50%	75 56%	~	~	~	~	~	~	76 71%*	86 52%*	158 60%	5 42%	134 63%*	30 45%
VALID CASES	279	4888	40	59	98	82	135							107	165	263	12	212	67
NUMBER OF RESPONDENTS	279 100%	4888 100%	40 100%	59 100%	98 100%	82 100%	135 100%							107 100%	165 100%	263 100%	12 100%	212 100%	67 100%
MEAN	2.47	2.44	2.40	2.58	2.54	2.33	2.43							2.64	2.36	2.48	2.25	2.52	2.30
p stat_(*=Sig @ p<=.05)		.611	~.175	.171	.036*	.405	~	~	~	~	~	~	~	~.001*	.002*	~	~	~.029*	

GETTING NEEDED CARE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	JCC 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
NPRBSEE4 NQ46	2.49	2.27	1.80	2.50	2.67	2.55	2.61							2.40	2.56	2.47	2.60	2.50	2.47
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCARNES4 NQ15	2.54	2.49	2.51	2.66	2.48	2.53	2.67							2.43	2.65	2.57	2.00	2.56	2.49
p stat_(*=Sig @ p<=.05)	.285		~	~	.391	.850	.014*	~	~	~	~	~	~	.070	.014*	~	~	~	~
COMPOSITE	2.52	2.38	2.16	2.58	2.58	2.54	2.64	x	x	x	x	x	x	2.42	2.61	2.52	2.30	2.53	2.48
p stat_(*=Sig @ p<=.05)	.000*		~	~	.148	.605	.000*	~	~	~	~	~	~	.006*	.000*	~	~	~	.433

GETTING CARE QUICKLY

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	JCC 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- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NCARSN4 NQ4	2.66	2.65	2.92	2.71	2.46	2.69	2.56							2.73	2.58	2.64	2.60	2.66	2.64
p stat_(*=Sig @ p<=.05)	.945		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NAPGET4 NQ6	2.44	2.46	2.32	2.49	2.39	2.54	2.67							2.23	2.62	2.44	2.50	2.44	2.45
p stat_(*=Sig @ p<=.05)	.720		~	~.539	.276	.000*	~	~	~	~	~	~	~	~.004*	.002*	~	~	~	~
COMPOSITE	2.55	2.56	2.62	2.60	2.43	2.62	2.61	x	x	x	x	x	x	2.48	2.60	2.54	2.55	2.55	2.55
p stat_(*=Sig @ p<=.05)	.821		~	~.028*	.196	.082	~	~	~	~	~	~	~	~.108	.099	~	~	~	~

HOW WELL DOCTORS COMMUNICATE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	JCC 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 IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NDREXPL4 NQ32	2.70	2.75	2.66	2.67	2.72	2.74	2.82						2.59	2.82	2.72	2.44	2.71	2.68	
p stat_(*=Sig @ p<=.05)	.227		~	~	.803	.636	.018*	~	~	~	~	~	~	.046*	.007*	~	~	.756	
NDRLSTN4 NQ33	2.75	2.77	2.69	2.74	2.74	2.81	2.82						2.71	2.82	2.77	2.44	2.77	2.70	
p stat_(*=Sig @ p<=.05)	.646		~	~	.857	.313	.125	~	~	~	~	~	~	.487	.088	~	~	.478	
NDRESPU4 NQ34	2.78	2.81	2.81	2.79	2.77	2.76	2.85						2.74	2.83	2.79	2.56	2.80	2.74	
p stat_(*=Sig @ p<=.05)	.468		~	~	.885	.795	.116	~	~	~	~	~	~	.373	.181	~	~	.506	
NDRTMEN4 NQ37	2.54	2.57	2.56	2.45	2.63	2.50	2.71						2.38	2.70	2.57	2.22	2.51	2.63	
p stat_(*=Sig @ p<=.05)	.592		~	~	.261	.633	.006*	~	~	~	~	~	~	.019*	.002*	~	~	~	
COMPOSITE	2.69	2.72	2.68	2.66	2.71	2.70	2.80	x	x	x	x	x	x	2.61	2.79	2.71	2.42	2.70	2.69
p stat_(*=Sig @ p<=.05)	.344		~	~	.688	.878	.009*	~	~	~	~	~	~	.051	.004*	~	~	.929	

CUSTOMER SERVICE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	JCC 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	
NPBCLCS4 NQ50	2.22	2.28	2.20	2.06	2.09	2.54	2.21						2.28	2.15	2.22	2.20	2.24	2.17	
p stat_(*=Sig @ p<=.05)	.584		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCSRESP NQ51	2.65	2.60	2.40	2.83	2.59	2.67	2.76						2.54	2.74	2.66	2.40	2.67	2.61	
p stat_(*=Sig @ p<=.05)	.442		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.44	2.44	2.30	2.45	2.34	2.60	2.48	x	x	x	x	x	x	2.41	2.45	2.44	2.30	2.45	2.39
p stat_(*=Sig @ p<=.05)	.986		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

SHARED DECISION MAKING

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	JCC 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- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NNRXWHY NQ11	2.90	2.87	3.00	3.00	2.88	2.83	3.00							2.80	3.00	2.94	3.00	2.92	2.88
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NNRXWYNT NQ12	2.48	2.42	2.56	2.50	2.41	2.50	2.38							2.40	2.58	2.49	2.50	2.52	2.41
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NRXBST NQ13	2.43	2.58	2.33	3.00	2.53	2.17	2.38							2.40	2.47	2.43	2.50	2.52	2.29
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.60	2.62	2.63	2.83	2.61	2.50	2.58	x	x	x	x	x	x	2.53	2.68	2.62	2.67	2.65	2.53
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

ACCESS TO SPECIALIZED SERVICES

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	JCC 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
NEZMDEQ NQ20	2.38	2.30	2.00	3.00	2.75	1.50	2.33						2.40	2.33	2.43	2.00	3.00	2.00
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTHP NQ23	2.22	2.19	1.75	2.43	2.42	2.00	2.13						2.33	2.19	2.23	2.00	2.50	1.94
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTC NQ26	2.16	2.18	1.67	1.73	2.47	2.23	2.26						2.12	2.30	2.23	2.20	2.17	2.15
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.25	2.22	1.81	2.39	2.55	1.91	2.24	x	x	x	x	x	2.28	2.28	2.29	2.07	2.56	2.03
p stat_(*=Sig @ p<=.05)	.602		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

	BANTO T1	BANTO T2	AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	JCC 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	88%	78%	60%	83%	92%	95%	91%							87%	88%	86%	100%	88%	89%
CARNES4 Q15	90%	89%	86%	91%	92%	91%	93%							91%	92%	90%	86%	91%	88%
AVERAGE	89.36	83.54	72.86	87.41	91.80	92.78	92.24	x	x	x	x	x	x	88.60	89.75	88.23	92.86	89.36	88.61

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

	BANTO T1	BANTO T2	AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	JCC 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	92%	91%	100%	100%	86%	88%	87%							97%	88%	91%	100%	92%	92%
APGET4 Q6	82%	86%	81%	85%	78%	87%	90%							77%	87%	82%	88%	83%	82%
AVERAGE	87.17	88.77	90.32	92.31	81.75	87.50	88.27	x	x	x	x	x	x	86.89	87.23	86.42	93.75	87.26	86.91

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
DREXPL4 Q32	92%	95%	91%	93%	91%	94%	95%							90%	95%	93%	89%	93%	90%
DRLSTN4 Q33	93%	95%	91%	93%	91%	98%	96%							93%	95%	94%	78%	95%	90%
DRESPU4 Q34	96%	96%	97%	98%	95%	96%	96%							97%	96%	96%	89%	96%	96%
DRTMEN4 Q37	86%	90%	88%	83%	91%	82%	91%							82%	92%	87%	78%	85%	90%
AVERAGE	92.0	94.0	91.4	91.5	92.1	92.6	94.6	x	x	x	x	x	x	90.6	94.4	92.5	83.3	92.2	91.4

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

	BANTO T1	BANTO T2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	JCC TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ 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	73%	78%	80%	59%	68%	88%	72%							74%	69%	70%	100%	73%	72%
CSRESP Q51	94%	91%	80%	94%	94%	96%	100%							90%	97%	93%	100%	94%	94%
AVERAGE	83.16	84.81	80.00	76.63	80.88	91.67	86.21	x	x	x	x	x	x	82.05	83.33	81.55	100.0	83.12	83.33

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	JCC 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
NRXWHY Q11	95%	94%	100%	100%	94%	92%	100%							90%	100%	97%	100%	96%	94%
NRXWYNT Q12	74%	71%	78%	75%	71%	75%	69%							70%	79%	74%	75%	76%	71%
RXBST Q13	71%	79%	67%	100%	76%	58%	69%							70%	74%	71%	75%	76%	65%
AVERAGE	80.2	81.2	81.5	91.7	80.4	75.0	79.2	x	x	x	x	x	x	76.7	84.2	81.0	83.3	82.7	76.5

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	JCC 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
EZMDEQ Q20	88%	76%	100%	100%	100%	50%	100%							80%	100%	86%	100%	100%	80%
EZTHP Q23	69%	72%	50%	86%	75%	56%	60%							80%	63%	68%	100%	88%	50%
EZTC Q26	66%	71%	33%	36%	88%	69%	68%							71%	70%	69%	80%	67%	65%
AVERAGE	74.1	72.8	61.1	74.0	87.7	58.3	76.1	x	x	x	x	x	x	76.9	77.4	74.0	93.3	84.7	65.0

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	JCC 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
DRTLKU Q38	86%	87%	94%	80%	86%	84%	86%							84%	87%	85%	89%	85%	86%
DRUNCON Q43	94%	90%	100%	88%	100%	89%	96%							100%	94%	95%	83%	100%	92%
DRUNFAM Q44	85%	85%	100%	75%	95%	74%	96%							76%	91%	91%	57%	100%	79%
AVERAGE	88.0	87.5	97.9	81.0	93.7	82.3	92.6	x	x	x	x	x	x	86.7	90.3	90.4	76.5	95.1	85.8

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	JCC 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	90%	92%	100%	100%	92%	80%	100%						85%	100%	88%	100%	100%	75%	
HLPCOORD Q29	60%	62%	38%	67%	61%	65%	68%						53%	67%	61%	80%	54%	67%	
AVERAGE	75.2	77.1	68.8	83.3	76.4	72.5	83.9	x	x	x	x	x	x	68.8	83.3	74.2	90.0	76.8	70.8

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.

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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*

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

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

Correct
Mark 

Incorrect
Marks



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

- Yes → *Go to Question 1*
- No

↓ **START HERE** ↓

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

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

- Yes → *Go to Question 3*
- No

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

YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS

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

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

Yes
 No → *Go to Question 5*

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

Never
 Sometimes
 Usually
 Always

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

Yes
 No → *Go to Question 7*

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

Never
 Sometimes
 Usually
 Always

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

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

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

Yes
 No

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

Never
 Sometimes
 Usually
 Always

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

Yes
 No → *Go to Question 14*

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

Yes
 No

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

- Yes
- No

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

- Yes
- No

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No

SPECIALIZED SERVICES

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

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

- Yes
- No → *Go to Question 22*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 25*



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 28*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 30*

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

- Yes
- No

YOUR CHILD'S PERSONAL DOCTOR

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

- Yes
- No → *Go to Question 45*

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

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

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

- Never
- Sometimes
- Usually
- Always

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

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



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 54*

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

- Never
- Sometimes
- Usually
- Always

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

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

34. En los últimos 6 meses, ¿con qué frecuencia fueron fáciles de llenar los formularios de su plan de salud?

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

35. Usando un número del 0 al 10, el 0 siendo el peor plan de salud posible y el 10 el mejor plan de salud posible, ¿qué número usaría para calificar su plan de salud?

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

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

- Sí
- No → *Pase a la pregunta 35c*

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

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

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

- Sí
- No → *Pase a la pregunta 35e*

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

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

PREGUNTAS ADICIONALES

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

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

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

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

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

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

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

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

- Sí, definitivamente
- Sí, algo
- No

ACCESO A CUIDADO DENTAL

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

- Sí
- No



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



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** ↓

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

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?