



Western Oregon Advanced Health
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 Western Oregon Advanced Health members. Western Oregon Advanced Health 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	
	Western Oregon Advanced Health	Overall	Western Oregon Advanced Health	Overall
**First mailing - sent	900	16200	900	16200
*First mailing - usable survey returned	188	2801	141	2168
Second mailing - sent	702	13319	732	13616
*Second mailing - usable survey returned	55	978	40	886
*Phone - usable surveys	79	1303	106	2255
Total - usable surveys	322	5082	287	5309
†Ineligible: According to population criteria‡	21	346	7	200
†Ineligible: Deceased	1	31	0	0
†Ineligible: Mentally or physically unable to complete survey	8	195	0	0
†Ineligible: Language barrier	1	64	1	59
Incorrect address AND incorrect phone number	54	848	44	710
Refusal/Returned survey blank	39	672	42	829
Nonresponse - Unavailable by mail or phone	454	8962	519	9093
Adjusted Response Rate	37.1%	32.7%	32.2%	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	198 43.0%	132 41.0%	-1.96%
Female	263 57.0%	190 59.0%	1.96%
18-24	78 16.9%	23 7.1%	-9.78%
25-34	117 25.4%	60 18.6%	-6.75%
35-44	88 19.1%	43 13.4%	-5.73%
45-54	82 17.8%	68 21.1%	3.33%
55-64	73 15.8%	102 31.7%	15.84%
65-74	15 3.3%	19 5.9%	2.65%
75 or Older	8 1.7%	7 2.2%	0.44%

Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	268 52.1%	142 49.5%	-2.66%
Female	246 47.9%	145 50.5%	2.66%
<3	104 20.2%	51 17.8%	-2.46%
4-7	135 26.3%	67 23.3%	-2.92%
8-12	141 27.4%	91 31.7%	4.28%
13 or older	134 26.1%	78 27.2%	1.11%

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				
	WORA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									#	##	#	##	##	TI	IC	IC	&	&		
									WHTE								GOOD	POOR		
																	MALE	MALE		
Q1																				
YES	322	5060	20	53	39	63	99	25	247					23	14	277	190	104	122	178
	100%	100%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%	~100%
NOT ANSWERED		22																		
VALID CASES	322	5060	20	53	39	63	99	25	247					23	14	277	190	104	122	178
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178
	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	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER					
	OT1	OT2	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &						
	WORA	OHP	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/	ALSK	HIS-	HIS-	VERY	GOOD	FAIR				
	TOT	TOT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	PAN-	PAN-	&	&	FE-			
	ADLT	ADLT							WHTE	#	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE	
Q3																						
YES	138	2017	6	16	20	34	43	12	104					13	7	118	72	55	45	85		
	44%	41%	30%~	31%*	51%~	55%	43%	50%~	43%	~	~	~	~	~	57%~	50%~	43%~	38%*	53%*	38%	48%	
NO	174	2921	14	36	19	28	56	12	140					10	7	156	116	48	75	92		
	56%	59%	70%~	69%*	49%~	45%	57%	50%~	57%	~	~	~	~	~	43%~	50%~	57%~	62%*	47%*	63%	52%	
NOT ANSWERED	10	144		1		1		1	3							3	2	1	2	1		
VALID CASES	312	4938	20	52	39	62	99	24	244					23	14	274	188	103	120	177		
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178		
	100%	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					
	WORA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	PAN-	PAN-	GOOD			
									WHTE	#	##	#	##	##	TI	IC	IC			
																	GOOD			
																	POOR			
																	MALE			
																	MALE			
Q4 NEVER	1 0.8%	42 2%				1 3%			1 1%							1 ~0.9%	1 2%	1 3%		
SOMETIMES	16 13%	268 15%	1 17%	4 29%	3 16%	5 15%	3 8%		12 12%					1 9%	2 29%	14 13%	4 6%*	10 19%	2 5%	14 17%
USUALLY	33 26%	466 26%	2 33%	5 36%	4 21%	7 21%	8 20%	4 40%	25 25%					2 18%	1 14%	27 24%	19 29%	11 20%	8 20%	20 24%
ALWAYS	77 61%	1045 57%	3 50%	5 36%	12 63%	21 62%	29 73%	6 60%	61 62%					8 73%	4 57%	69 62%	41 63%	33 61%	29 73%	48 59%
#ALWAYS + USUALLY (NET)	110 87%	1511 83%	5 83%	10 71%	16 84%	28 82%	37 93%	10 100%	86 87%					10 91%	5 71%	96 86%	60 92%	44 81%	37 93%	68 83%
TOP BOX SCORE	77 61%	1045 57%	3 50%	5 36%	12 63%	21 62%	29 73%	6 60%	61 62%					8 73%	4 57%	69 62%	41 63%	33 61%	29 73%	48 59%
NOT ANSWERED	11	196		2	1		3	2	5					2		7	7	1	5	3
VALID CASES	127	1821	6	14	19	34	40	10	99					11	7	111	65	54	40	82
NUMBER OF RESPONDENTS	138	2017	6	16	20	34	43	12	104					13	7	118	72	55	45	85
	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				
	WORA	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	OTHR	MUL-	PAN-	PAN-	&	&		
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
Q5																				
YES	218	3365	12	33	28	50	69	19	170					18	10	194	123	83	77	134
	71%	68%	60%~	63%	74%~	81%*	70%	79%~	70%	~	~	~	~	~ 82%~	71%~	71%~	66%*	81%*	65%	76%*
NO	89	1561	8	19	10	12	29	5	74					4	4	78	63	20	42	42
	29%	32%	40%~	37%	26%~	19%*	30%	21%~	30%	~	~	~	~	~ 18%~	29%~	29%~	34%*	19%*	35%	24%*
NOT ANSWERED	15	156		1	1	1	1	1	3					1		5	4	1	3	2
VALID CASES	307	4926	20	52	38	62	98	24	244					22	14	272	186	103	119	176
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178
	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			
	WORA 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 #	OTH#	MULTI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE- MALE
Q6 NEVER	5 3%	83 3%		3 ~ 10%	1 4%		1 ~ 2%		5 3%						5 3%	4 4%	1 1%			2 3%	3 2%
SOMETIMES	33 17%	590 19%	1 8%	7 23%	7 27%	7 15%	8 13%	1 7%	24 15%					1 7%	4 44%	26 15%	19 17%	10 13%		7 10%	23 19%
USUALLY	60 30%	884 29%	4 33%	7 23%	8 31%	12 26%	21 33%	5 33%	44 28%					5 33%	2 22%	52 29%	29 27%	27 34%		20 29%	38 31%
ALWAYS	102 51%	1472 49%	7 58%	13 43%	10 38%	27 59%	34 53%	9 60%	83 53%					9 60%	3 33%	94 53%	57 52%	41 52%		40 58%	60 48%
#ALWAYS + USUALLY (NET)	162 81%	2356 78%	11 92%	20 67%	18 69%	39 85%	55 86%	14 93%	127 81%					14 93%	5 56%	146 82%	86 79%	68 86%		60 87%	98 79%
TOP BOX SCORE	102 51%	1472 49%	7 58%	13 43%	10 38%	27 59%	34 53%	9 60%	83 53%					9 60%	3 33%	94 53%	57 52%	41 52%		40 58%	60 48%
NOT ANSWERED	18	336		3	2	4	5	4	14					3	1	17	14	4		8	10
VALID CASES	200	3029	12	30	26	46	64	15	156					15	9	177	109	79		69	124
NUMBER OF RESPONDENTS	218 100%	3365 100%	12 100%	33 100%	28 100%	50 100%	69 100%	19 100%	170 100%					18 100%	10 100%	194 100%	123 100%	83 100%		77 100%	134 100%

[ASKED IF Q5 = YES]

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	WORA TOT ADLT	OHP TOT ADLT	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 ILND #	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	MALE	FE-MALE
Q7 NONE	81 27%	1242 26%	6 30%~	20 38%	10 26%~	13 21%	23 24%	6 25%~	69 29%	~	~	~	~	~	22%~	3 23%~	74 27%~	58 31%*	20 20%*	44 37%*	35 20%*
1 TIME	55 18%	927 19%	5 25%~	8 15%	7 18%~	9 15%	19 20%	5 21%~	48 20%	~	~	~	~	~	9%~	3 23%~	50 18%~	39 21%	13 13%	18 15%	35 20%
2	56 18%	878 18%	2 10%~	8 15%	10 26%~	9 15%	21 22%	5 21%~	45 19%	~	~	~	~	~	17%~	3 23%~	50 18%~	34 18%	20 20%	16 13%	39 22%*
3	44 14%	581 12%	3 15%~	8 15%	4 10%~	12 19%	12 13%	4 17%~	32 13%	~	~	~	~	~	26%~	1 8%~	41 15%~	24 13%	16 16%	23 19%	20 11%
4	22 7%	402 8%	3 15%~	1 2%*	3 8%~	9 15%	5 5%	~	17 7%	~	~	~	~	~	9%~	~	20 7%~	9 5%	12 12%	5 4%	17 10%*
5 TO 9	35 11%	571 12%	~	6 12%	3 8%~	7 11%	14 15%	3 13%~	25 10%	~	~	~	~	~	9%~	3 23%~	28 10%~	19 10%	14 14%	9 8%	23 13%
10 OR MORE TIMES	12 4%	248 5%	1 5%~	1 2%	2 5%~	3 5%	2 2%	1 4%~	6 2%	~	~	~	~	~	9%~	~	9 3%~	4 2%	6 6%	5 4%	5 3%
NOT ANSWERED	17	233	~	1	~	1	3	1	5	~	~	~	~	~	~	1	5	3	3	2	4
VALID CASES	305	4849	20	52	39	62	96	24	242	~	~	~	~	~	23	13	272	187	101	120	174
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247	~	~	~	~	~	23	14	277	190	104	122	178
	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			
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN #	NATV ILND #	AMER IND/ PAC ALSK #	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q8 #YES	156 71%	2535 72%	11 79%~	18 56%~	20 69%~	38 79%~	54 74%	13 72%~	119 69%~	~	~	~	~	~	14 78%~	8 80%~	138 70%~	91 71%	60 74%	56 75%	97 70%
NO	64 29%	984 28%	3 21%~	14 44%~	9 31%~	10 21%~	19 26%	5 28%~	53 31%~	~	~	~	~	~	4 22%~	2 20%~	59 30%~	37 29%	21 26%	19 25%	42 30%
NOT ANSWERED	4	88				1			1								1	1		1	
VALID CASES	220	3519	14	32	29	48	73	18	172						18	10	197	128	81	75	139
NUMBER OF RESPONDENTS	224	3607	14	32	29	49	73	18	173						18	10	198	129	81	76	139
	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				
	WORA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/			HIS-	HIS-	VERY	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	#	##	#	##	##	TI		GOOD	POOR	MALE	MALE
Q9																				
YES	115	1857	6	14	13	30	38	12	87					12	5	103	61	48	42	70
	52%	53%	43%~	44%~	45%~	63%~	52%	71%~	51%~	~	~	~	~	~ 67%~	50%~	53%~	48%	60%	56%	51%
NO	105	1655	8	18	16	18	35	5	84					6	5	93	67	32	33	68
	48%	47%	57%~	56%~	55%~	38%~	48%	29%~	49%~	~	~	~	~	~ 33%~	50%~	47%~	52%	40%	44%	49%
NOT ANSWERED	4	95				1		1	2							2	1	1	1	1
VALID CASES	220	3512	14	32	29	48	73	17	171					18	10	196	128	80	75	138
NUMBER OF RESPONDENTS	224	3607	14	32	29	49	73	18	173					18	10	198	129	81	76	139
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	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 OT1	BANT OT2	AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER		
	WORA 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
Q10 #YES	109 95%	1690 93%	6 100%~	13 93%~	13 100%~	28 93%~	36 95%~	11 92%~	81 93%~	~	~	~	~	12 ~100%~	5 100%~	97 94%~	59 97%	44 92%~	41 98%~	65 93%~
NO	6 5%	121 7%	~	1 7%~	~	2 7%~	2 5%~	1 8%~	6 7%~	~	~	~	~	~	~	6 6%~	2 3%	4 8%~	1 2%~	5 7%~
NOT ANSWERED		46																		
VALID CASES	115	1811	6	14	13	30	38	12	87					12	5	103	61	48	42	70
NUMBER OF RESPONDENTS	115 100%	1857 100%	6 100%	14 100%	13 100%	30 100%	38 100%	12 100%	87 100%					12 100%	5 100%	103 100%	61 100%	48 100%	42 100%	70 100%

[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 OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK ##	OTHR ##	MUL-TI TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE-MALE	MALE	
Q11 #YES	96 83%	1346 74%	6 100%	14 100%	10 77%	24 80%	32 84%	9 75%	72 83%	~	~	~	~	~	12 ~100%	4 80%	88 85%	50 82%	41 85%	37 88%	57 81%
NO	19 17%	462 26%	~	~	3 23%	6 20%	6 16%	3 25%	15 17%	~	~	~	~	~	1 20%	15 15%	11 18%	7 15%	5 12%	13 19%	
NOT ANSWERED		49																			
VALID CASES	115	1808	6	14	13	30	38	12	87					12	5	103	61	48	42	70	
NUMBER OF RESPONDENTS	115 100%	1857 100%	6 100%	14 100%	13 100%	30 100%	38 100%	12 100%	87 100%					12 100%	5 100%	103 100%	61 100%	48 100%	42 100%	70 100%	

[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					ETHNIC-ITY	HEALTH STATUS		GENDER				
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER #	NATV IAN #	AMER HAW/IND/PAC ALSK #	OTH MUL-TI #	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR	FE-MALE MALE			
Q12 #YES	87 76%	1378 77%	4 67%~	12 86%~	11 85%~	21 72%~	30 79%~	7 58%~	66 76%~	~	~	~	~	9 75%~	4 80%~	78 76%~	48 79%~	34 72%~	36 88%~	48 69%~
NO	27 24%	420 23%	2 33%~	2 14%~	2 15%~	8 28%~	8 21%~	5 42%~	21 24%~	~	~	~	~	3 25%~	1 20%~	24 24%~	13 21%~	13 28%~	5 12%~	22 31%~
NOT ANSWERED	1	59				1									1		1		1	
VALID CASES	114	1798	6	14	13	29	38	12	87					12	5	102	61	47	41	70
NUMBER OF RESPONDENTS	115	1857	6	14	13	30	38	12	87					12	5	103	61	48	42	70
	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			
	WORA 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	3 1%	22 0.6%	~	~	~	2 4%	1 1%	1 0.6%	~	~	~	~	~	~	1 10%	2 1%	1 0.8%	2 2%	~	3 2%
02	2 0.9%	39 1%	~	~	2 7%	~	~	2 1%	~	~	~	~	~	~	2 1%	~	1 1%	~	2 1%	
03	5 2%	63 2%	~	2 6%	1 4%	2 4%	~	5 3%	~	~	~	~	~	~	5 3%	1 0.8%	4 5%	1 1%	4 3%	
04	7 3%	95 3%	~	2 6%	~	3 6%	2 11%	6 3%	~	~	~	~	~	~	7 4%	3 2%	3 4%	2 3%	5 4%	
05	22 10%	234 7%	1 7%	6 19%	2 7%	5 10%	5 7%	2 11%	13 8%	~	~	~	~	2 12%	2 20%	16 8%	8 6%*	12 15%	7 9%	13 9%
06	27 12%	215 6%*	4 29%	4 13%	7 25%	2 4%	9 12%	22 13%	~	~	~	~	~	1 6%	2 20%	24 12%	17 13%	9 11%	9 12%	17 12%
07	33 15%	442 13%	2 14%	9 28%	2 7%	5 10%	13 18%	1 6%	28 16%	~	~	~	~	2 12%	1 10%	31 16%	22 17%	10 12%	12 16%	20 14%
08	39 18%	779 22%	2 14%	6 19%	5 18%	4 8%	14 19%	6 33%	30 17%	~	~	~	~	6 35%	~	35 18%	24 19%	13 16%	15 20%	22 16%
09	33 15%	592 17%	3 21%	2 6%	3 11%	8 17%	14 19%	2 11%	22 13%	~	~	~	~	4 24%	3 30%	28 14%	23 18%	8 10%	9 12%	23 17%
BEST HEALTH CARE POSSIBLE	49 22%	1011 29%*	2 14%	1 3%	6 21%	17 35%	17 23%	5 28%	43 25%	~	~	~	~	2 12%	1 10%	46 23%	28 22%	19 23%	19 26%	30 22%
#8-10 (NET)	121 55%	2382 68%*	7 50%	9 28%	14 50%	29 60%	45 62%	13 72%	95 55%	~	~	~	~	12 71%	4 40%	109 56%	75 59%	40 49%	43 58%	75 54%

Continued

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	WORA 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/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
9-10 (NET)	82 37%	1603 46%*	5 36%~	3 9%~	9 32%~	25 52%~	31 42%	7 39%~	65 38%~	~	~	~	~	~	6 35%~	4 40%~	74 38%~	51 40%	27 33%	28 38%	53 38%
NOT ANSWERED	4	96			1	1			1						1		2	2		2	
VALID CASES	220	3511	14	32	28	48	73	18	172						17	10	196	127	81	74	139
NUMBER OF RESPONDENTS	224	3607	14	32	29	49	73	18	173						18	10	198	129	81	76	139
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%
MEAN	7.51	7.94	7.57	6.47	7.14	7.63	7.93	7.83	7.59						7.88	6.70	7.56	7.80	7.14	7.77	7.40
p stat_(*=Sig @ p<=.05)		.001*	~	~	~	~.024*			~	~	~	~	~	~	~	~	~	~.020*	.059	.165	.303

[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												ITY	STATUS						
	WORA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	HIS-	PAN-	GOOD				
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	PAN-	GOOD				
									WHTE	#	##	#	##	##	TI	IC	IC				
																	FAIR				
																	&				
																	POOR				
																	MALE				
																	MALE				
Q14																					
NEVER	5	90		1	2	1			3						4	1	3	4			
	2%	3%		~	3%~	7%~	2%~		2%~						~	2%~	0.8%	4%	~	3%	
SOMETIMES	36	539	3	9	6	9	6	1	26					4	33	15	18	13	20		
	17%	15%	21%~	29%~	21%~	20%~	8%*	6%~	15%~					~	22%~	~	17%~	12%*	23%	18%	15%
USUALLY	82	1150	4	14	11	13	31	8	64					6	6	71	49	30	23	57	
	38%	33%	29%~	45%~	38%~	28%~	43%	44%~	38%~					~	33%~	60%~	37%~	39%	38%	32%	42%
ALWAYS	94	1722	7	7	10	23	35	9	75					8	4	86	60	29	37	56	
	43%	49%	50%~	23%~	34%~	50%~	49%	50%~	45%~					~	44%~	40%~	44%~	48%	36%	51%	41%
#ALWAYS + USUALLY (NET)	176	2872	11	21	21	36	66	17	139					14	10	157	109	59	60	113	
	81%	82%	79%~	68%~	72%~	78%~	92%*	94%~	83%~					~	78%~	100%~	81%~	87%*	74%*	82%	82%
TOP BOX SCORE	94	1722	7	7	10	23	35	9	75					8	4	86	60	29	37	56	
	43%	49%	50%~	23%~	34%~	50%~	49%	50%~	45%~					~	44%~	40%~	44%~	48%	36%	51%	41%
NOT ANSWERED	7	106		1		3	1		5						4	4	1	3	2		
VALID CASES	217	3501	14	31	29	46	72	18	168					18	10	194	125	80	73	137	
NUMBER OF RESPONDENTS	224	3607	14	32	29	49	73	18	173					18	10	198	129	81	76	139	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER			
	WORA 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
Q15 YES	247 81%	3993 82%	16 80%~	39 75%	29 74%~	53 85%	81 83%	23 96%~	196 80%	~	~	~	~	~	18 78%~	12 86%~	223 81%~	143 76%*	92 89%*	87 73%*	154 88%*
NO	57 19%	904 18%	4 20%~	13 25%	10 26%~	9 15%	17 17%	1 4%~	48 20%	~	~	~	~	~	5 22%~	2 14%~	51 19%~	44 24%*	11 11%*	33 28%*	22 13%*
NOT ANSWERED	18	185		1		1	1	1	3								3	3	1	2	2
VALID CASES	304	4897	20	52	39	62	98	24	244						23	14	274	187	103	120	176
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247						23	14	277	190	104	122	178
	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/PAC ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q16 NONE	49 21%	792 21%	4 27%	12 32%	7 25%	6 13%	16 20%	3 15%	41 22%	~	~	~	~	2 12%	2 18%	45 21%	33 24%	13 15%	18 22%	30 21%
1 TIME	56 24%	995 27%	8 53%	5 13%	6 21%	10 21%	21 27%	5 25%	48 26%	~	~	~	~	3 18%	5 45%	51 24%	35 26%	20 23%	17 20%	39 27%
2	51 22%	792 21%	1 7%	8 21%	7 25%	8 17%	20 25%	6 30%	38 21%	~	~	~	~	7 41%	~	47 22%	32 24%	18 20%	17 20%	32 22%
3	33 14%	483 13%	1 7%	6 16%	5 18%	9 19%	9 11%	2 10%	26 14%	~	~	~	~	2 12%	2 18%	30 14%	17 13%	13 15%	16 19%	16 11%
4	17 7%	279 7%	~	2 5%	2 7%	9 19%	4 5%	~	12 7%	~	~	~	~	~	1 9%	15 7%	8 6%	8 9%	5 6%	12 8%
5 TO 9	23 10%	312 8%	~	5 13%	~	5 10%	9 11%	4 20%	17 9%	~	~	~	~	2 12%	1 9%	20 10%	7 5%*	16 18%*	9 11%	13 9%
10 OR MORE TIMES	4 2%	88 2%	1 7%	~	1 4%	1 2%	~	~	2 1%	~	~	~	~	1 6%	~	2 1%	3 2%	~	1 1%	2 1%
NOT ANSWERED	14	252	1	1	1	5	2	3	12					1	1	13	8	4	4	10
VALID CASES	233	3741	15	38	28	48	79	20	184					17	11	210	135	88	83	144
NUMBER OF RESPONDENTS	247	3993	16	39	29	53	81	23	196					18	12	223	143	92	87	154
	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						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	WORA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			PAN-	&	POOR	&	FE-		
									WHTE	#	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q17																					
NEVER	6	51	1	1	1	2			3						4	2	2	2	2	2	2
	3%	2%	9%~	4%~	5%~	5%~	~	~	2%~	~	~	~	~	~	2%~	2%	3%	3%	2%	3%	2%
SOMETIMES	22	190	1	2	5	4	6	4	19					1	2	19	9	13	6	16	16
	12%	6%*	9%~	8%~	24%~	10%~	10%	24%~	13%~	~	~	~	~	7%~	22%~	12%~	9%	18%	9%	14%	14%
USUALLY	37	579	4	7	5	6	11	4	25					7	2	35	24	13	12	25	25
	20%	20%	36%~	27%~	24%~	15%~	18%	24%~	17%~	~	~	~	~	47%~	22%~	21%~	24%	18%	19%	22%	22%
ALWAYS	117	2109	5	16	10	29	45	9	96					7	5	105	67	45	44	70	70
	64%	72%*	45%~	62%~	48%~	71%~	73%	53%~	67%~	~	~	~	~	47%~	56%~	64%~	66%	62%	69%	62%	62%
#ALWAYS + USUALLY (NET)	154	2688	9	23	15	35	56	13	121					14	7	140	91	58	56	95	95
	85%	92%*	82%~	88%~	71%~	85%~	90%	76%~	85%~	~	~	~	~	93%~	78%~	86%~	89%	79%	88%	84%	84%
TOP BOX SCORE	117	2109	5	16	10	29	45	9	96					7	5	105	67	45	44	70	70
	64%	72%*	45%~	62%~	48%~	71%~	73%	53%~	67%~	~	~	~	~	47%~	56%~	64%~	66%	62%	69%	62%	62%
NOT ANSWERED	2	20				1	1								2		2		1	1	1
VALID CASES	182	2929	11	26	21	41	62	17	143					15	9	163	102	73	64	113	113
NUMBER OF RESPONDENTS	184	2949	11	26	21	42	63	17	143					15	9	165	102	75	65	114	114
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2																			
	WORA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				NOT	VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR			
									WHTE	#	##	#	##	##	TI	IC	IC	&	&		
																	GOOD	POOR	MALE	MALE	
Q18																					
NEVER	8	63	1	2	1	3			5							6	2	4	2	4	
	4%	2%	9%~	8%~	5%~	7%~			3%~							4%~	2%	5%	3%	4%	
SOMETIMES	21	222	3	2	4	4	5	3	17							3	18	10	11	1	20
	12%	8%	27%~	8%~	19%~	10%~	8%	18%~	12%~							33%~	11%~	10%	15%	2%*	18%*
USUALLY	45	572		8	6	7	16	6	32						8	1	42	24	18	17	27
	25%	20%		31%~	29%~	17%~	26%	35%~	22%~						53%~	11%~	26%~	24%	25%	27%	24%
ALWAYS	108	2066	7	14	10	27	41	8	89						7	5	97	66	40	44	62
	59%	71%*	64%~	54%~	48%~	66%~	66%	47%~	62%~						47%~	56%~	60%~	65%	55%	69%	55%
#ALWAYS + USUALLY (NET)	153	2638	7	22	16	34	57	14	121						15	6	139	90	58	61	89
	84%	90%*	64%~	85%~	76%~	83%~	92%*	82%~	85%~						100%~	67%~	85%~	88%	79%	95%*	79%*
TOP BOX SCORE	108	2066	7	14	10	27	41	8	89						7	5	97	66	40	44	62
	59%	71%*	64%~	54%~	48%~	66%~	66%	47%~	62%~						47%~	56%~	60%~	65%	55%	69%	55%
NOT ANSWERED	2	26				1	1										2		2	1	1
VALID CASES	182	2923	11	26	21	41	62	17	143					15	9	163	102	73	64	113	
NUMBER OF RESPONDENTS	184	2949	11	26	21	42	63	17	143					15	9	165	102	75	65	114	
	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												ITY	STATUS					
	WORA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	VERY	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			PAN-	&	GOOD	POOR	MALE	MALE
									AMER		ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
Q19																				
NEVER	7	55		1	1	3	1		4						1	5	2	3	2	4
	4%	2%	~	4%~	5%~	7%~	2%	~	3%~	~	~	~	~	~	11%~	3%~	2%	4%	3%	4%
SOMETIMES	22	211	3	4	2	4	4	5	16					1	3	18	8	14	2	19
	12%	7%*	27%~	15%~	10%~	10%~	6%	31%~	11%~	~	~	~	~	7%~	33%~	11%~	8%	19%*	3%*	17%*
USUALLY	33	437	1	4	7	6	12	2	26					3	1	32	17	14	14	19
	18%	15%	9%~	15%~	33%~	15%~	19%	13%~	18%~	~	~	~	~	21%~	11%~	20%~	17%	19%	22%	17%
ALWAYS	119	2221	7	17	11	28	45	9	97					10	4	107	74	42	46	70
	66%	76%*	64%~	65%~	52%~	68%~	73%	56%~	68%~	~	~	~	~	71%~	44%~	66%~	73%*	58%	72%	63%
#ALWAYS + USUALLY (NET)	152	2658	8	21	18	34	57	11	123					13	5	139	91	56	60	89
	84%	91%*	73%~	81%~	86%~	83%~	92%*	69%~	86%~	~	~	~	~	93%~	56%~	86%~	90%*	77%*	94%*	79%*
TOP BOX SCORE	119	2221	7	17	11	28	45	9	97					10	4	107	74	42	46	70
	66%	76%*	64%~	65%~	52%~	68%~	73%	56%~	68%~	~	~	~	~	71%~	44%~	66%~	73%*	58%	72%	63%
NOT ANSWERED	3	25				1	1	1						1		3	1	2	1	2
VALID CASES	181	2924	11	26	21	41	62	16	143					14	9	162	101	73	64	112
NUMBER OF RESPONDENTS	184	2949	11	26	21	42	63	17	143					15	9	165	102	75	65	114
	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						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2																			
	WORA	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	&	&	FE-		
									WHTE	#	##	#	##	##	TI		GOOD	POOR	MALE	MALE	
Q20																					
NEVER	8	87	2	1	3	1		4							2	5	3	3	1	6	
	4%	3%	18%~	~	5%~	7%~	2%	3%~	~	~	~	~	~	~	22%~	3%~	3%	4%	2%	5%	
SOMETIMES	24	259	2	7	4	4	3	4	19					3	1	21	9	15	7	16	
	13%	9%	18%~	27%~	19%~	10%~	5%*	24%~	13%~	~	~	~	~	~	20%~	11%~	13%~	9%	20%*	11%	14%
USUALLY	45	721	1	7	7	7	16	6	38					2	2	43	24	20	20	25	
	25%	25%	9%~	27%~	33%~	17%~	25%	35%~	27%~	~	~	~	~	~	13%~	22%~	26%~	24%	27%	31%	22%
ALWAYS	106	1860	6	12	9	28	43	7	82					10	4	96	66	37	37	67	
	58%	64%	55%~	46%~	43%~	67%~	68%*	41%~	57%~	~	~	~	~	~	67%~	44%~	58%~	65%*	49%	57%	59%
#ALWAYS + USUALLY (NET)	151	2581	7	19	16	35	59	13	120					12	6	139	90	57	57	92	
	83%	88%*	64%~	73%~	76%~	83%~	94%*	76%~	84%~	~	~	~	~	~	80%~	67%~	84%~	88%*	76%	88%	81%
TOP BOX SCORE	106	1860	6	12	9	28	43	7	82					10	4	96	66	37	37	67	
	58%	64%	55%~	46%~	43%~	67%~	68%*	41%~	57%~	~	~	~	~	~	67%~	44%~	58%~	65%*	49%	57%	59%
NOT ANSWERED	1	22																			
VALID CASES	183	2927	11	26	21	42	63	17	143					15	9	165	102	75	65	114	
NUMBER OF RESPONDENTS	184	2949	11	26	21	42	63	17	143					15	9	165	102	75	65	114	
	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					
	WORA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	VERY	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	HIS-	PAN-	GOOD	POOR	FE-	
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	
									#	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	
Q21																				
YES	112	1800	5	13	13	23	44	12	84					12	6	100	57	52	35	74
	62%	62%	45%~	50%~	65%~	56%~	70%~	71%~	59%~	~	~	~	~	~ 80%~	67%~	61%~	56%	70%*	56%	65%
NO	69	1107	6	13	7	18	19	5	58					3	3	63	44	22	28	40
	38%	38%	55%~	50%~	35%~	44%~	30%	29%~	41%~	~	~	~	~	~ 20%~	33%~	39%~	44%	30%*	44%	35%
NOT ANSWERED	3	42			1	1			1						2		1	1		2
VALID CASES	181	2907	11	26	20	41	63	17	142					15	9	163	101	74	63	114
NUMBER OF RESPONDENTS	184	2949	11	26	21	42	63	17	143					15	9	165	102	75	65	114
	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			
	WORA 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 #	NATV AS-IAN ##	AMER HAW/IND/PAC ALSK #	OTH#	MULTI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FEMALE
Q22 NEVER	9 8%	108 6%	2 40%	2 15%	1 8%	2 9%	1 2%	5 6%	~	~	~	~	~	2 33%	6 6%	2 4%	5 10%	2 6%	5 8%	2 6%	6 8%
SOMETIMES	23 21%	264 15%	1 20%	3 23%	6 46%	4 17%	6 14%	3 25%	17 20%	~	~	~	~	4 33%	1 17%	22 22%	11 19%	12 24%	8 23%	15 21%	~
USUALLY	28 25%	517 30%	1 20%	4 31%	2 15%	3 13%	12 28%	6 50%	21 25%	~	~	~	~	4 33%	~	27 27%	16 28%	12 24%	8 23%	19 26%	~
ALWAYS	51 46%	861 49%	1 20%	4 31%	4 31%	14 61%	24 56%	3 25%	40 48%	~	~	~	~	4 33%	3 50%	44 44%	28 49%	22 43%	17 49%	33 45%	~
#ALWAYS + USUALLY (NET)	79 71%	1378 79%	2 40%	8 62%	6 46%	17 74%	36 84%	9 75%	61 73%	~	~	~	~	8 67%	3 50%	71 72%	44 77%	34 67%	25 71%	52 71%	~
TOP BOX SCORE	51 46%	861 49%	1 20%	4 31%	4 31%	14 61%	24 56%	3 25%	40 48%	~	~	~	~	4 33%	3 50%	44 44%	28 49%	22 43%	17 49%	33 45%	~
NOT ANSWERED	1	50					1	1							1		1			1	
VALID CASES	111	1750	5	13	13	23	43	12	83				12	6	99	57	51	35	73		
NUMBER OF RESPONDENTS	112	1800	5	13	13	23	44	12	84				12	6	100	57	52	35	74		
	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE					RACE						ETHNICITY		HEALTH STATUS		GENDER			
	WORA 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 #	NATV AS- IAN ##	AMER HAW/ IND/ PAC ALSK #	OTHER NATV #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE- MALE
Q23 WORST PERSONAL DOCTOR POSSIBLE	1 0.4%	23 0.6%	~	~	1 4%	~	~	~	1 0.5%	~	~	~	~	~	~	1 ~0.5%	~	~	~	~	1 ~0.7%
01	3 1%	32 0.9%	1 7%	~	~	1 2%	1 1%	~	~	~	~	~	~	~	1 8%	1 0.5%	2 2%	1 1%	~	~	2 1%
02	3 1%	39 1%	~	~	~	2 4%	1 1%	~	3 2%	~	~	~	~	~	~	3 1%	1 0.8%	2 2%	~	~	3 2%
03	6 3%	60 2%	1 7%	1 3%	1 4%	1 2%	1 1%	~	5 3%	~	~	~	~	~	~	5 2%	~	~	5 6%	1 1%	4 3%
04	10 4%	72 2%	1 7%	2 5%	2 7%	~	3 4%	2 10%	8 4%	~	~	~	~	~	1 8%	9 4%	3 2%	7 8%	~	~	10 7%*
05	17 7%	188 5%	2 13%	4 11%	1 4%	4 8%	6 8%	~	15 8%	~	~	~	~	~	1 8%	16 8%	10 8%	7 8%	5 6%	12 8%	~
06	14 6%	158 4%	~	2 5%	1 4%	4 8%	5 7%	2 10%	11 6%	~	~	~	~	1 6%	1 8%	12 6%	6 5%	7 8%	2 2%*	12 8%*	~
07	22 10%	327 9%	1 7%	7 18%	5 19%	4 8%	3 4%*	2 10%	16 9%	~	~	~	~	6 35%	~	22 11%	16 12%	6 7%	11 14%	11 8%	~
08	39 17%	632 17%	3 20%	3 8%	6 22%	6 12%	17 22%	2 10%	33 18%	~	~	~	~	4 24%	~	38 18%	28 21%*	9 10%*	23 28%*	15 10%*	~
09	37 16%	691 19%	3 20%	12 32%	3 11%	1 2%*	14 18%	4 19%	30 16%	~	~	~	~	~	5 42%	31 15%	24 18%	12 13%	15 19%	22 15%	~
BEST PERSONAL DOCTOR POSSIBLE	79 34%	1506 40%*	3 20%	7 18%	7 26%	27 54%*	25 33%	9 43%	61 33%	~	~	~	~	6 35%	3 25%	70 34%	41 31%	34 38%	24 30%	53 37%	~
#8-10 (NET)	155 67%	2829 76%*	9 60%	22 58%	16 59%	34 68%	56 74%	15 71%	124 68%	~	~	~	~	10 59%	8 67%	139 67%	93 71%	55 61%	62 77%*	90 62%*	~

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			
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE #	BLCK OR AFR- #	AS- IAN ##	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
9-10 (NET)	116 50%	2197 59%*	6 40%~	19 50%~	10 37%~	28 56%	39 51%	13 62%~	91 50%~	~	~	~	~	~	~	35%~	8 67%~	101 49%~	65 50%	46 51%	39 48%	75 52%
NOT ANSWERED	16	265	1	1	2	3	5	2	13						1		15	12	2	6	9	
VALID CASES	231	3728	15	38	27	50	76	21	183						17		12	208	131	90	81	145
NUMBER OF RESPONDENTS	247	3993	16	39	29	53	81	23	196						18		12	223	143	92	87	154
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%		100%	100%	100%	100%	100%	100%
MEAN	7.90	8.34	7.07	7.74	7.48	8.14	8.04	8.38	7.92						8.24		7.58	7.92	8.12	7.63	8.35	7.70
p stat_(*=Sig @ p<=.05)		.003*	~	~	~.406	.507	~	~	~	~	~	~	~	~	~	~	~	~.093	.158	.012*	.066	

[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	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &				
	WORA	OHP	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	HIS-	VERY	GOOD	FAIR		
	TOT	TOT	TO	TO	TO	TO	TO	OVER	AFR-	IAN	PAC	ALSK			PAN-	PAN-	&	&	MALE		
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	#	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	
Q24																					
YES	112	1933	5	10	12	28	44	11	82					14	4	103	57	52	42	68	
	37%	40%	25%~	19%*	31%~	45%	45%*	46%~	33%*	~	~	~	~	~	64%~	31%~	38%~	30%*	51%*	35%	39%
NO	190	2928	15	43	27	34	53	13	163					8	9	171	131	50	79	107	
	63%	60%	75%~	81%*	69%~	55%	55%*	54%~	67%*	~	~	~	~	~	36%~	69%~	62%~	70%*	49%*	65%	61%
NOT ANSWERED	20	221				1	2	1	2					1	1	3	2	2	1	3	
VALID CASES	302	4861	20	53	39	62	97	24	245					22	13	274	188	102	121	175	
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178	
	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												ITY	STATUS						
	WORA	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	ILND	NATV	OTHR	MUL-	IC	PAN-	PAN-	&	&	FE-	
									WHTE	#	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q25																					
NEVER	7	110		2	3		2		5					1		6	3	4	3	3	
	6%	6%		~ 20%	~ 25%		~ 5%		~ 6%					~ 7%		~ 6%	5%	8%	7%	5%	
SOMETIMES	22	323	1	2	4	6	8	1	14					4		22	10	12	9	13	
	20%	17%	20%	20%	33%	22%	18%	10%	18%					~ 29%		~ 22%	18%	24%	21%	20%	
USUALLY	28	543	1	3	1	5	13	5	21					4	2	26	16	12	14	14	
	26%	29%	20%	30%	8%	19%	30%	50%	27%					~ 29%	50%	26%	28%	24%	33%	22%	
ALWAYS	52	893	3	3	4	16	21	4	39					5	2	46	28	22	16	35	
	48%	48%	60%	30%	33%	59%	48%	40%	49%					~ 36%	50%	46%	49%	44%	38%	54%	
#ALWAYS + USUALLY (NET)	80	1436	4	6	5	21	34	9	60					9	4	72	44	34	30	49	
	73%	77%	80%	60%	42%	78%	77%	90%	76%					~ 64%	100%	72%	77%	68%	71%	75%	
TOP BOX SCORE	52	893	3	3	4	16	21	4	39					5	2	46	28	22	16	35	
	48%	48%	60%	30%	33%	59%	48%	40%	49%					~ 36%	50%	46%	49%	44%	38%	54%	
NOT ANSWERED	3	64				1		1	3							3				3	
VALID CASES	109	1869	5	10	12	27	44	10	79					14	4	100	57	50	42	65	
NUMBER OF RESPONDENTS	112	1933	5	10	12	28	44	11	82					14	4	103	57	52	42	68	
	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					
	WORA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	HIS-	PAN-	GOOD			
									AMER					TI	IC	IC	&			
									WHTE	#	##	#	##	##		GOOD	FAIR			
																POOR	MALE			
																	FE-			
																	MALE			
Q26																				
NONE	7 6%	77 4%	1 ~ 10%	2 ~ 17%	4 ~ 9%	4 ~ 5%	4 ~ 5%	4 ~ 5%						1 ~ 7%	6 ~ 6%	4 7%	3 6%	3 7%	3 5%	
1 SPECIALIST	60 55%	991 53%	5 100%	5 50%	5 42%	17 63%	23 52%	5 50%	46 58%					9 ~ 64%	1 25%	57 57%	37 65%*	22 44%*	25 60%	35 54%
2	25 23%	498 27%	3 ~ 30%	3 25%	5 19%	10 23%	4 40%	4 27%	21 27%					1 7%	1 25%	23 23%	11 19%	14 28%	8 19%	17 26%
3	11 10%	191 10%	1 ~ 8%	4 15%	5 11%	1 10%	4 5%	4 5%	4 5%					3 ~ 21%	1 25%	10 10%	4 7%	7 14%	3 7%	8 12%
4	3 3%	64 3%	1 ~ 10%	1 ~ 4%	1 2%	2 3%	2 3%	2 3%	2 3%					1 25%	2 2%	1 2%	2 4%	2 5%	1 2%	1 2%
5 OR MORE SPECIALISTS	3 3%	45 2%	1 ~ 8%	1 ~ 2%	1 2%	2 3%	2 3%	2 3%	2 3%					2 ~ 2%	2 ~ 4%	2 4%	1 2%	1 2%	1 2%	1 2%
NOT ANSWERED	3	67			1	1	3	3							3	2		3		
VALID CASES	109	1866	5	10	12	27	44	10	79					14	4	100	57	50	42	65
NUMBER OF RESPONDENTS	112	1933	5	10	12	28	44	11	82					14	4	103	57	52	42	68
	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			
	WORA 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 HAW/ 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
Q27 WORST SPECIALIST POSSIBLE	1 1%	13 0.7%	~	~	~	~	3%	~	~	~	~	~	~	~	~	1%	~	2%	~	2%
01	3 3%	14 0.8%	~	~	20%	4%	~	~	~	~	~	~	~	~	~	3%	2%	4%	3%	3%
02		12 0.7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03	4 4%	27 2%	~	~	10%	8%	10%	~	~	~	~	~	~	8%	~	4%	2%	7%	3%	5%
04	2 2%	22 1%	~	~	10%	~	3%	~	~	~	~	~	~	~	~	2%	4%	~	3%	2%
05	3 3%	83 5%	~	11%	~	~	3%	10%	~	~	~	~	~	8%	~	3%	4%	2%	3%	3%
06	6 6%	68 4%	20%	11%	10%	8%	3%	~	~	~	~	~	~	15%	~	6%	4%	9%	8%	5%
07	12 12%	157 9%	~	11%	10%	8%	20%	~	~	~	~	~	~	8%	~	13%	15%	9%	15%	10%
08	14 14%	318 18%	~	11%	~	12%	20%	~	~	~	~	~	~	~	75%	12%	19%	9%	21%	10%
09	16 16%	315 18%	40%	33%	~	19%	8%	30%	~	~	~	~	~	23%	~	15%	13%	20%	8%	21%
BEST SPECIALIST POSSIBLE	40 40%	742 42%	40%	22%	40%	42%	43%	30%	~	~	~	~	~	38%	25%	40%	38%	39%	38%	39%
#8-10 (NET)	70 69%	1375 78%	80%	67%	40%	73%	70%	80%	~	~	~	~	~	62%	100%	67%	70%	67%	67%	70%

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		
	WORA 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- #	NATV IAN #	AMER HAW/ IND/ PAC ALSK #	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE- MALE
9-10 (NET)	56 55%	1057 60%	4 80%~	5 56%~	4 40%~	16 62%~	20 50%~	6 60%~	40 54%~	~	~	~	~	~	8 62%~	1 25%~	51 55%~	27 51%~	27 59%~	18 46%~	37 61%~
NOT ANSWERED	1	18				1			1							1			1		1
VALID CASES	101	1771	5	9	10	26	40	10	74				13			4	93	53	46	39	61
NUMBER OF RESPONDENTS	102	1789	5	9	10	27	40	10	75				13			4	94	53	47	39	62
	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%			100%	100%	100%	100%	100%	100%
MEAN	8.06	8.43	8.80	8.11	6.20	8.15	8.30	8.10	8.03				8.00			8.50	7.98	8.17	7.85	8.05	8.03
p stat_(*=Sig @ p<=.05)		.112	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER			
	WORA 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 18%	886 18%	2 10%	13 25%	10 26%	14 23%	12 12%	1 4%	42 17%	~	~	~	~	~	6 27%	50 18%	36 19%	17 17%	21 17%	31 18%	
NO	249 82%	3943 82%	18 90%	40 75%	29 74%	48 77%	86 88%	23 96%	203 83%	~	~	~	~	~	16 73%	14 100%	224 82%	152 81%	86 83%	100 83%	145 82%
NOT ANSWERED	19	253				1	1	1	2						1	3	2	1	1	2	
VALID CASES	303	4829	20	53	39	62	98	24	245						22	14	274	188	103	121	176
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247						23	14	277	190	104	122	178
	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				
	WORA 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	HIS- PAN- IC	NOT VERY GOOD & FAIR	EX & VERY GOOD & POOR	MALE	FE- MALE
Q29 NEVER	2 4%	78 9%*		2 ~ 15%~					2 5%~								2 4%~	2 ~ 13%~	1 5%~	1 3%~	
SOMETIMES	16 30%	290 33%		6 ~ 46%~	3 30%~	5 38%~	1 8%~	1 100%~	14 33%~					2 33%~			16 32%~	11 31%~	5 31%~	6 29%~	10 33%~
USUALLY	18 34%	294 34%	1 50%~	4 31%~	4 40%~	3 23%~	4 33%~		13 31%~					2 33%~			15 30%~	10 28%~	7 44%~	1 5%~	15 50%~
ALWAYS	17 32%	204 24%	1 50%~	1 8%~	3 30%~	5 38%~	7 58%~		13 31%~					2 33%~			17 34%~	15 42%~	2 13%~	13 62%~	4 13%~
#ALWAYS + USUALLY (NET)	35 66%	498 58%	2 100%~	5 38%~	7 70%~	8 62%~	11 92%~		26 62%~					4 67%~			32 64%~	25 69%~	9 56%~	14 67%~	19 63%~
TOP BOX SCORE	17 32%	204 24%	1 50%~	1 8%~	3 30%~	5 38%~	7 58%~		13 31%~					2 33%~			17 34%~	15 42%~	2 13%~	13 62%~	4 13%~
NOT ANSWERED		1 20				1												1			1
VALID CASES	53	866	2	13	10	13	12	1	42					6			50	36	16	21	30
NUMBER OF RESPONDENTS	54	886	2	13	10	14	12	1	42					6			50	36	17	21	31
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%			100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	WORA	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		GOOD	POOR	MALE	MALE
Q30																				
YES	81	1269	5	11	18	13	28	4	63					7	6	71	46	29	25	54
	27%	26%	25%~	21%	47%~	21%	29%	17%~	26%	~	~	~	~	~ 32%	43%~	26%~	25%	28%	21%*	31%
NO	221	3524	15	42	20	49	70	20	182					15	8	202	141	74	95	122
	73%	74%	75%~	79%	53%~	79%	71%	83%~	74%	~	~	~	~	~ 68%	57%~	74%~	75%	72%	79%*	69%
NOT ANSWERED	20	289			1	1	1	1	2					1		4	3	1	2	2
VALID CASES	302	4793	20	53	38	62	98	24	245					22	14	273	187	103	120	176
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178
	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 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	MALE	FE-MALE
Q31 NEVER	3 4%	39 3%	1 ~	2 9%~	2 12%~	~	~	2 3%~	~	~	~	~	~	1 ~ 14%~	3 ~ 4%~	2 4%~	1 4%~	2 8%~	1 2%~	
SOMETIMES	12 15%	212 17%	1 20%~	4 36%~	2 12%~	1 8%~	2 7%~	9 15%~	~	~	~	~	~	1 ~ 14%~	10 ~ 14%~	8 18%~	2 7%~	5 20%~	5 10%~	
USUALLY	17 22%	361 29%	1 20%~	3 27%~	3 18%~	6 46%~	4 14%~	13 21%~	~	~	~	~	~	2 ~ 29%~	2 40%~	15 21%~	6 22%~	3 12%~	14 27%~	
ALWAYS	47 59%	619 50%	3 60%~	3 27%~	10 59%~	6 46%~	22 79%~	3 100%~	38 61%~	~	~	~	~	3 ~ 43%~	3 60%~	42 60%~	25 56%~	19 68%~	15 60%~	32 62%~
#ALWAYS + USUALLY (NET)	64 81%	980 80%	4 80%~	6 55%~	13 76%~	12 92%~	26 93%~	3 100%~	51 82%~	~	~	~	~	5 ~ 71%~	5 100%~	57 81%~	35 78%~	25 89%~	18 72%~	46 88%~
TOP BOX SCORE	47 59%	619 50%	3 60%~	3 27%~	10 59%~	6 46%~	22 79%~	3 100%~	38 61%~	~	~	~	~	3 ~ 43%~	3 60%~	42 60%~	25 56%~	19 68%~	15 60%~	32 62%~
NOT ANSWERED	2	38			1		1	1							1	1	1	1		2
VALID CASES	79	1231	5	11	17	13	28	3	62					7	5	70	45	28	25	52
NUMBER OF RESPONDENTS	81	1269	5	11	18	13	28	4	63					7	6	71	46	29	25	54
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER	
	OT1	OT2												ITY	STATUS				
	WORA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	VERY	GOOD	FAIR	
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			PAN-	&	GOOD	POOR	MALE
									WHTE	#	##	#	##	##	IC	IC	GOOD	POOR	MALE
Q32																			
NEVER		16																	
		1%																	
SOMETIMES	4	61		2	1		1		3						1	3	3	1	3
	5%	5%		~ 20%	~ 6%		~ 4%		~ 5%						~ 20%	~ 4%	~ 7%	~ 4%	~ 13%
USUALLY	14	224	2	2	3	4	2		10					3	13	8	5	2	11
	18%	18%	40%	~ 20%	~ 18%	~ 31%	~ 7%		~ 16%					~ 43%	~ 19%	~ 18%	~ 18%	~ 8%	~ 21%
ALWAYS	60	929	3	6	13	9	25	3	48					4	4	53	33	22	19
	77%	76%	60%	~ 60%	~ 76%	~ 69%	~ 89%	~ 100%	~ 79%					~ 57%	~ 80%	~ 77%	~ 75%	~ 79%	~ 79%
#ALWAYS + USUALLY (NET)	74	1153	5	8	16	13	27	3	58					7	4	66	41	27	21
	95%	94%	100%	~ 80%	~ 94%	~ 100%	~ 96%	~ 100%	~ 95%					~ 100%	~ 80%	~ 96%	~ 93%	~ 96%	~ 88%
TOP BOX SCORE	60	929	3	6	13	9	25	3	48					4	4	53	33	22	19
	77%	76%	60%	~ 60%	~ 76%	~ 69%	~ 89%	~ 100%	~ 79%					~ 57%	~ 80%	~ 77%	~ 75%	~ 79%	~ 79%
NOT ANSWERED	3	39		1	1			1	2						1	2	2	1	1
VALID CASES	78	1230	5	10	17	13	28	3	61					7	5	69	44	28	24
NUMBER OF RESPONDENTS	81	1269	5	11	18	13	28	4	63					7	6	71	46	29	25
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	WORA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	VERY	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			PAN-	&	POOR	&	MALE	MALE
									AMER		ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
Q33																				
YES	127	1787	6	22	20	29	43	5	104					8	4	117	83	41	53	72
	42%	37%	30%~	42%	51%~	46%	45%	22%~	43%	~	~	~	~	~ 40%~	29%~	43%~	45%	40%	45%	41%
NO	173	2987	14	31	19	34	52	18	140					12	10	154	103	61	66	103
	58%	63%	70%~	58%	49%~	54%	55%	78%~	57%	~	~	~	~	~ 60%~	71%~	57%~	55%	60%	55%	59%
NOT ANSWERED	22	308						4	2					3		6	4	2	3	3
VALID CASES	300	4774	20	53	39	63	95	23	244					20	14	271	186	102	119	175
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178
	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						ETHNIC-	HEALTH		GENDER	
	OT1	OT2												ITY	STATUS				
	WORA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	VERY	GOOD	FAIR	
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	IC	&	GOOD	POOR	MALE
									AMER	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
PQ34																			
NEVER	6	91		1	2	2	1		4					1	5	3	3	3	3
	2%	2%		~ 2%	5%~	3%	1%		2%					5%~	~ 2%	2%	3%	3%	2%
SOMETIMES	24	301	2	7	2	2	9	1	20					1	1	22	15	8	8
	8%	6%	10%~	13%	5%~	3%*	10%	4%~	8%					5%~	7%~	8%~	8%	8%	7%
USUALLY	45	677	2	9	9	12	9	4	38					3	2	42	32	13	17
	15%	14%	10%~	17%	23%~	20%	10%	17%~	16%					15%~	14%~	16%~	17%	13%	15%
ALWAYS	220	3637	16	36	26	45	73	18	178					15	11	197	134	75	87
	75%	77%	80%~	68%	67%~	74%	79%	78%~	74%					75%~	79%~	74%~	73%	76%	76%
#ALWAYS + USUALLY (NET)	265	4314	18	45	35	57	82	22	216					18	13	239	166	88	104
	90%	92%	90%~	85%	90%~	93%	89%	96%~	90%					90%~	93%~	90%~	90%	89%	90%
TOP BOX SCORE	220	3637	16	36	26	45	73	18	178					15	11	197	134	75	87
	75%	77%	80%~	68%	67%~	74%	79%	78%~	74%					75%~	79%~	74%~	73%	76%	76%
NOT ANSWERED	5	68				2	3		4						5	2	3	4	1
VALID CASES	295	4706	20	53	39	61	92	23	240					20	14	266	184	99	115
NUMBER OF RESPONDENTS	300	4774	20	53	39	63	95	23	244					20	14	271	186	102	119
	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					
	WORA 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 HAW/ 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		
Q35 WORST HEALTH PLAN POSSIBLE	1 0.4%	33 0.7%	~	~	~	2%	~	~	~	~	~	~	~	~	~	~	1 ~0.4%	1 ~0.6%	~	1 ~0.9%	~	
01	4 1%	31 0.7%	~	2%	~	3%	1%	~	~	~	~	~	~	~	~	~	4 2%	2 1%	2 2%	1 0.9%	3 2%	
02	5 2%	51 1%	~	2%	3%	3%	1%	~	~	~	~	~	~	1 5%	~	~	5 2%	2 1%	3 3%	4 3%	1 0.6%	
03	8 3%	61 1%	~	~	6%	10%*	~	~	~	~	~	~	~	1 5%	~	~	7 3%	1 0.6%*	7 7%*	2 2%	6 4%	
04	9 3%	105 2%	~	8%	6%	3%	1%	~	~	~	~	~	~	~	~	~	9 3%	2 1%*	7 7%*	1 0.9%*	8 5%*	
05	27 9%	381 8%	6%	18%	9%	3%*	8%	12%	~	~	~	~	~	1 5%	~	~	26 10%	20 11%	6 6%	14 12%	12 7%	
06	27 9%	291 6%	17%	10%	12%	8%	8%	4%	~	~	~	~	~	1 5%	~	~	1 8%	23 9%	18 10%	6 6%	11 10%	15 9%
07	39 14%	602 13%	11%	24%	12%	5%*	16%	16%	~	~	~	~	~	3 14%	~	~	2 17%	36 14%	25 14%	14 14%	20 17%	19 12%
08	60 21%	920 20%	11%	18%	18%	18%	28%	20%	~	~	~	~	~	5 24%	~	~	3 25%	54 21%	36 20%	23 24%	24 21%	34 21%
09	31 11%	736 16%*	28%	4%*	15%	17%	8%	8%	~	~	~	~	~	5 24%	~	~	2 17%	29 11%	25 14%*	6 6%*	8 7%	23 14%*
BEST HEALTH PLAN POSSIBLE	74 26%	1385 30%	28%	16%*	21%	27%	30%	40%	~	~	~	~	~	4 19%	~	~	4 33%	65 25%	48 27%	23 24%	29 25%	44 27%
#8-10 (NET)	165 58%	3041 66%*	67%	37%*	53%	62%	66%	68%	~	~	~	~	~	14 67%	~	~	9 75%	148 57%	109 61%	52 54%	61 53%	101 61%

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			
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE #	BLCK OR AFR- #	AS- IAN ##	NATV ILND #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
9-10 (NET)	105 37%	2121 46%*	10 56%~	10 20%*	12 35%~	26 43%	34 38%	12 48%~	83 36%	~	~	~	~	~	9 43%~	6 50%~	94 36%~	73 41%	29 30%	37 32%	67 41%
NOT ANSWERED	37	486	2	2	5	3	9		14						2	2	18	10	7	7	13
VALID CASES	285	4596	18	51	34	60	90	25	233						21	12	259	180	97	115	165
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247						23	14	277	190	104	122	178
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%
MEAN	7.52	7.93	8.22	6.82	7.24	7.18	7.94	8.28	7.47						7.71	8.50	7.47	7.74	7.10	7.38	7.62
p stat_(*=Sig @ p<=.05)		.001*		~.014*		~.193	.019*		~.446	~	~	~	~	~	~	~	~	~.039*	.035*	.402	.385

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						ETHNICITY	HEALTH STATUS		GENDER			
	WORA 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- #	NATV IAN ##	AMER HAW/ IND/ PAC ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35A YES	37 12%	599 12%	2 10%	3 6%	2 5%	11 18%	9 9%	9 36%	29 12%	~	~	~	~	~	5 23%	1 8%	33 12%	10 5%*	25 24%*	16 13%	20 11%
NO	263 88%	4210 88%	18 90%	48 94%	37 95%	51 82%	87 91%	16 64%	214 88%	~	~	~	~	~	17 77%	12 92%	239 88%	176 95%*	78 76%*	103 87%	155 89%
NOT ANSWERED	22	273		2		1	3		4					1	1	5	4	1	3	3	
VALID CASES	300	4809	20	51	39	62	96	25	243					22	13	272	186	103	119	175	
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178	
	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													ITY	STATUS						
	WORA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &						
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/				HIS-	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	IC	PAN-	PAN-	&	FAIR	&	FE-	
									WHTE	#	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE	
Q35B NEVER	5 14%	90 16%	~	~	~	18%	13%	25%	4	~	~	~	~	~	~	4	~	13%	~	21%	7%	20%
SOMETIMES	4 11%	83 15%	~	67%	~	9%	13%	~	3	~	~	~	~	25%	1	4	22%	8%	7%	15%	3	
USUALLY	10 29%	129 23%	2	1	1	1	3	2	7	~	~	~	~	25%	1	1	8	44%	25%	29%	5	
ALWAYS	16 46%	262 46%	~	~	50%	64%	38%	50%	14	~	~	~	~	50%	2	15	33%	46%	57%	40%	8	
#ALWAYS + USUALLY (NET)	26 74%	391 69%	2	1	2	8	6	6	21	~	~	~	~	75%	3	1	23	78%	71%	86%	13	
TOP BOX SCORE	16 46%	262 46%	~	~	50%	64%	38%	50%	14	~	~	~	~	50%	2	15	33%	46%	57%	40%	8	
NOT ANSWERED	2	35					1	1	1					1		2	1	1		2		
VALID CASES	35	564	2	3	2	11	8	8	28					4	1	31	9	24	14	20		
NUMBER OF RESPONDENTS	37	599	2	3	2	11	9	9	29					5	1	33	10	25	16	20		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35A = YES]

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	WORA 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- #	NATV IAN ##	AMER HAW/ IND/ PAC ALSK #	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q35C YES	45 15%	759 16%	1 5%	3 6%*	8 21%~	13 22%	16 17%	4 16%~	33 14%	~	~	~	~	6 27%~	2 14%~	41 15%~	17 9%*	27 27%*	14 12%	31 18%
NO	250 85%	3989 84%	18 95%~	48 94%*	31 79%~	46 78%	79 83%	21 84%~	204 86%	~	~	~	~	16 73%~	12 86%~	225 85%~	165 91%*	74 73%*	101 88%	143 82%
NOT ANSWERED	27	334	1	2		4	4		10					1		11	8	3	7	4
VALID CASES	295	4748	19	51	39	59	95	25	237					22	14	266	182	101	115	174
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178
	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					
	WORA	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	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	#	##	#	##	##	TI	IC	IC	GOOD	POOR	
																		MALE	MALE	
Q35D																				
NEVER	14	121		2	4	5	3		10					3	14	6	8	5	9	
	32%	17%		~ 67%	~ 50%	~ 42%	~ 19%		~ 30%					~ 50%	~ 35%	35%	31%	36%	30%	
SOMETIMES	9	129	1	1	1	2	2	2	7					1	1	8	3	6	9	
	20%	18%	100%	33%	13%	17%	13%	50%	21%					~ 17%	50%	20%	18%	23%	~ 30%	
USUALLY	6	170			1	1	4		3					1	5	3	3	3	3	
	14%	23%			~ 13%	~ 8%	~ 25%		~ 9%					~ 17%	~ 13%	18%	12%	21%	10%	
ALWAYS	15	308			2	4	7	2	13					1	1	13	5	9	6	9
	34%	42%			~ 25%	~ 33%	~ 44%	~ 50%	~ 39%					~ 17%	50%	33%	29%	35%	43%	30%
#ALWAYS + USUALLY (NET)	21	478			3	5	11	2	16					2	1	18	8	12	9	12
	48%	66%			~ 38%	~ 42%	~ 69%	~ 50%	~ 48%					~ 33%	50%	45%	47%	46%	64%	40%
TOP BOX SCORE	15	308			2	4	7	2	13					1	1	13	5	9	6	9
	34%	42%			~ 25%	~ 33%	~ 44%	~ 50%	~ 39%					~ 17%	50%	33%	29%	35%	43%	30%
NOT ANSWERED	1	31				1									1		1		1	
VALID CASES	44	728	1	3	8	12	16	4	33					6	2	40	17	26	14	30
NUMBER OF RESPONDENTS	45	759	1	3	8	13	16	4	33					6	2	41	17	27	14	31
	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						ETHNIC-	HEALTH		GENDER			
	OT1	OT2	18	25	35	45	55	65	BLCK	AS-	NATV	AMER				EX &					
	WORA	OHP	TO	TO	TO	TO	TO	AND	OR	IAN	HAW/	IND/			NOT	VERY					
	TOT	TOT	24	34	44	54	64	OVER	AFR-		PAC	ALSK			HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT							AMER		ILND	NATV	OTHR	MUL-	IC	IC	&	&			
									WHTE	#	##	#	##	##	TI		GOOD	POOR	MALE	MALE	
Q35E																					
ALWAYS	11 4%	178 4%	1 5%~	2 ~	4 5%~	4 7%	4 4%	8 ~	3%	~	~	~	~	~	~	10 4%~	6 3%	4 4%	2 2%	8 5%	
USUALLY	11 4%	193 4%	~	3 6%	2 5%~	1 2%	3 3%	2 8%~	10 4%	~	~	~	~	~	5%~	11 4%~	5 3%	6 6%	4 3%	7 4%	
SOMETIMES	63 21%	804 17%	3 15%~	14 28%	8 21%~	14 24%	15 16%	9 36%~	54 23%	~	~	~	~	~	4 19%~	4 31%~	58 22%~	40 22%	22 22%	20 17%	43 25%
NEVER	209 71%	3575 75%	16 80%~	33 66%	26 68%~	39 67%	74 77%	14 56%~	167 70%	~	~	~	~	~	16 76%~	9 69%~	188 70%~	132 72%	68 68%	89 77%*	115 66%*
#NEVER + SOMETIMES (NET)	272 93%	4379 92%	19 95%~	47 94%	34 89%~	53 91%	89 93%	23 92%~	221 92%	~	~	~	~	~	20 95%~	13 100%~	246 92%~	172 94%	90 90%	109 95%	158 91%
TOP BOX SCORE	209 71%	3575 75%	16 80%~	33 66%	26 68%~	39 67%	74 77%	14 56%~	167 70%	~	~	~	~	~	16 76%~	9 69%~	188 70%~	132 72%	68 68%	89 77%*	115 66%*
NOT ANSWERED	28	332		3	1	5	3		8						2	1	10	7	4	7	5
VALID CASES	294	4750	20	50	38	58	96	25	239						21	13	267	183	100	115	173
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247						23	14	277	190	104	122	178
	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												ITY	STATUS						
	WORA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	IC	PAN-	PAN-	&	&	FE-	
									WHTE	#	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q35F																					
ALWAYS	6	66		1	1	3	1		5						6	2	3	3	3	3	3
	2%	1%	~	2%	3%	5%	1%	~	2%	~	~	~	~	~	~	2%	1%	3%	3%	2%	2%
USUALLY	7	106	2	1	2	1	1		4					1	1	5	3	4		6	6
	2%	2%	10%	2%	6%	2%	~	4%	2%	~	~	~	~	5%	7%	2%	2%	4%	~	4%	4%
SOMETIMES	51	672	7	8	6	8	17	5	41					2	5	46	30	19	18	33	33
	17%	14%	35%	16%	17%	14%	18%	20%	17%	~	~	~	~	10%	36%	17%	16%	19%	15%	19%	19%
NEVER	230	3911	11	41	27	47	78	19	188					18	8	209	148	73	96	129	129
	78%	82%	55%	80%	75%	80%	81%	76%	79%	~	~	~	~	86%	57%	79%	81%	74%	82%	75%	75%
#NEVER + SOMETIMES (NET)	281	4583	18	49	33	55	95	24	229					20	13	255	178	92	114	162	162
	96%	96%	90%	96%	92%	93%	99%*	96%	96%	~	~	~	~	95%	93%	96%	97%	93%	97%	95%	95%
TOP BOX SCORE	230	3911	11	41	27	47	78	19	188					18	8	209	148	73	96	129	129
	78%	82%	55%	80%	75%	80%	81%	76%	79%	~	~	~	~	86%	57%	79%	81%	74%	82%	75%	75%
NOT ANSWERED	28	327		2	3	4	3		9					2		11	7	5	5	7	7
VALID CASES	294	4755	20	51	36	59	96	25	238					21	14	266	183	99	117	171	171
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178	178
	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					
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR- #	AS- IAN ##	NATV ILND #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE- MALE
Q35G ALWAYS	6 2%	55 1%	~	~	2 6%	2 3%	2 2%	~	4 2%	~	~	~	~	~	~	1 8%	5 2%	2 1%	3 3%	1 0.8%	5 3%		
USUALLY	7 2%	67 1%	1 5%	2 4%	1 3%	2 3%	1 4%	6 3%	~	~	~	~	~	~	~	6 2%	4 2%	3 3%	3 3%	3 2%			
SOMETIMES	35 12%	487 10%	2 10%	7 14%	5 14%	8 13%	10 11%	3 12%	29 12%	~	~	~	~	~	2 10%	4 31%	31 12%	19 10%	16 16%	10 8%	25 15%		
NEVER	245 84%	4149 87%	17 85%	42 82%	28 78%	48 80%	83 87%	21 84%	201 84%	~	~	~	~	~	19 90%	8 62%	225 84%	158 86%	78 78%	104 88%	137 81%		
#NEVER + SOMETIMES (NET)	280 96%	4636 97%	19 95%	49 96%	33 92%	56 93%	93 98%	24 96%	230 96%	~	~	~	~	~	21 100%	12 92%	256 96%	177 97%	94 94%	114 97%	162 95%		
TOP BOX SCORE	245 84%	4149 87%	17 85%	42 82%	28 78%	48 80%	83 87%	21 84%	201 84%	~	~	~	~	~	19 90%	8 62%	225 84%	158 86%	78 78%	104 88%	137 81%		
NOT ANSWERED	29	324		2	3	3	4		7						2	1	10	7	4	4	8		
VALID CASES	293	4758	20	51	36	60	95	25	240						21	13	267	183	100	118	170		
NUMBER OF RESPONDENTS	322 100%	5082 100%	20 100%	53 100%	39 100%	63 100%	99 100%	25 100%	247 100%						23 100%	14 100%	277 100%	190 100%	104 100%	122 100%	178 100%		

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					
	WORA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			PAN-	GOOD	FAIR			
									#	##	#	##	##	TI	IC	IC	&	&	FE-	
									WHTE							GOOD	POOR	MALE	MALE	
Q35H																				
#YES DEFINITELY	184	3305	11	28	18	39	69	16	149					14	11	167	122	55	82	101
	62%	70%*	55%~	53%	51%~	65%	71%*	64%~	62%	~	~	~	~	~ 67%	79%~	62%~	66%	54%*	70%*	58%
YES SOMEWHAT	82	1110	7	19	13	14	23	5	67					7	3	77	48	33	25	56
	28%	24%	35%~	36%	37%~	23%	24%	20%~	28%	~	~	~	~	~ 33%	21%~	29%~	26%	32%	21%*	32%*
NO	30	300	2	6	4	7	5	4	26							26	14	14	10	17
	10%	6%*	10%~	11%	11%~	12%	5%*	16%~	11%	~	~	~	~	~	~ 10%	8%	14%	9%	10%	
NOT ANSWERED	26	367			4	3	2		5					2		7	6	2	5	4
VALID CASES	296	4715	20	53	35	60	97	25	242					21	14	270	184	102	117	174
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178
	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		
	WORA 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- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE
Q35I YES	165 56%	2797 58%	8 40%~	28 53%	22 59%~	33 55%	58 60%	14 58%~	129 53%	~	~	~	~	13 62%~	8 62%~	148 55%~	104 57%	54 53%	55 46%*	107 62%*
NO	132 44%	1986 42%	12 60%~	25 47%	15 41%~	27 45%	39 40%	10 42%~	113 47%	~	~	~	~	8 38%~	5 38%~	122 45%~	80 43%	48 47%	64 54%*	66 38%*
NOT ANSWERED	25	299			2	3	2	1	5					2	1	7	6	2	3	5
VALID CASES	297	4783	20	53	37	60	97	24	242					21	13	270	184	102	119	173
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178
	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 OT1	BANT OT2	AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER		
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE
Q35J YES	108 36%	1919 40%	7 35%~	13 25%*	16 42%~	24 39%	37 38%	11 44%~	87 36%	~	~	~	~	9 ~ 41%~	5 38%~	99 36%~	69 37%	37 36%	40 33%	67 39%
NO	191 64%	2885 60%	13 65%~	40 75%*	22 58%~	37 61%	61 62%	14 56%~	156 64%	~	~	~	~	13 ~ 59%~	8 62%~	173 64%~	119 63%	65 64%	81 67%	106 61%
NOT ANSWERED	23	278			1	2	1		4					1	1	5	2	2	1	5
VALID CASES	299	4804	20	53	38	61	98	25	243					22	13	272	188	102	121	173
NUMBER OF RESPONDENTS	322 100%	5082 100%	20 100%	53 100%	39 100%	63 100%	99 100%	25 100%	247 100%					23 100%	14 100%	277 100%	190 100%	104 100%	122 100%	178 100%

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						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q35K NEVER	1 0.9%	40 2%	~	~	~	4%	~	1 1%	~	~	~	~	~	~	1 1%	1 3%	1 3%	1 1%	1 1%		
SOMETIMES	8 7%	150 8%	14%~	8%~	13%~	~	8%~	9%~	8%~	~	~	~	~	~	20%~	7%~	10%~	3%~	8%~	7%~	
USUALLY	20 19%	356 19%	29%~	23%~	13%~	21%~	14%~	27%~	21%~	~	~	~	~	11%~	20%~	19%~	17%~	22%~	26%~	15%~	
ALWAYS	78 73%	1310 71%	57%~	69%~	75%~	75%~	78%~	64%~	70%~	~	~	~	~	89%~	60%~	72%~	72%~	72%~	67%~	76%~	
#ALWAYS + USUALLY (NET)	98 92%	1666 90%	86%~	92%~	88%~	96%~	92%~	91%~	91%~	~	~	~	~	100%~	80%~	92%~	90%~	94%~	92%~	91%~	
TOP BOX SCORE	78 73%	1310 71%	57%~	69%~	75%~	75%~	78%~	64%~	70%~	~	~	~	~	89%~	60%~	72%~	72%~	72%~	67%~	76%~	
NOT ANSWERED	1	63					1		1						1		1		1		
VALID CASES	107	1856	7	13	16	24	36	11	86					9	5	98	69	36	39	67	
NUMBER OF RESPONDENTS	108	1919	7	13	16	24	37	11	87					9	5	99	69	37	40	67	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	WORA 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 #	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	25 20%	423 22%	2 18%	1 5%	3 19%	8 29%	9 25%	2 25%	19 20%	~	~	~	~	~	3 27%	2 22%	21 20%	10 15%	15 28%	9 16%	16 25%
USUALLY	25 20%	375 20%	~	4 18%	4 25%	5 18%	9 25%	1 13%	20 22%	~	~	~	~	~	~	2 22%	19 18%	17 25%	6 11%	13 23%	9 14%
SOMETIMES	25 20%	377 20%	3 27%	8 36%	4 25%	6 21%	3 8%	1 13%	18 19%	~	~	~	~	~	3 27%	1 11%	23 22%	15 22%	10 19%	10 18%	15 24%
NEVER	49 40%	744 39%	6 55%	9 41%	5 31%	9 32%	15 42%	4 50%	36 39%	~	~	~	~	~	5 45%	4 44%	43 41%	25 37%	22 42%	24 43%	23 37%
#NEVER + SOMETIMES (NET)	74 60%	1121 58%	9 82%	17 77%	9 56%	15 54%	18 50%	5 63%	54 58%	~	~	~	~	~	8 73%	5 56%	66 62%	40 60%	32 60%	34 61%	38 60%
TOP BOX SCORE	49 40%	744 39%	6 55%	9 41%	5 31%	9 32%	15 42%	4 50%	36 39%	~	~	~	~	~	5 45%	4 44%	43 41%	25 37%	22 42%	24 43%	23 37%
5	170	2747	9	31	22	34	59	14	146					10	4	161	117	48	63	107	
NOT ANSWERED	28	416			1	1	4	3	8					2	1	10	6	3	3	8	
VALID CASES	124	1919	11	22	16	28	36	8	93					11	9	106	67	53	56	63	
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178	
	100%	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		
	WORA 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	
Q35M NEVER	47 40%	695 36%	4 36%~	8 35%~	6 38%~	11 39%~	15 56%~	3 30%~	34 38%~	~	~	~	~	~	5 50%~	2 40%~	42 41%~	24 38%~	23 45%~	23 48%~	23 35%~
SOMETIMES	20 17%	351 18%	1 9%~	5 22%~	3 19%~	3 11%~	4 15%~	4 40%~	17 19%~	~	~	~	~	~	1 10%~	1 20%~	18 17%~	10 16%~	10 20%~	8 17%~	12 18%~
USUALLY	24 21%	351 18%	3 27%~	7 30%~	2 13%~	6 21%~	5 19%~	3 ~	19 21%~	~	~	~	~	~	1 10%~	~	22 21%~	16 25%~	7 14%~	10 21%~	12 18%~
ALWAYS	26 22%	514 27%	3 27%~	3 13%~	5 31%~	8 29%~	3 11%~	3 30%~	20 22%~	~	~	~	~	~	3 30%~	2 40%~	21 20%~	13 21%~	11 22%~	7 15%~	18 28%~
#ALWAYS + USUALLY (NET)	50 43%	865 45%	6 55%~	10 43%~	7 44%~	14 50%~	8 30%~	3 30%~	39 43%~	~	~	~	~	~	4 40%~	2 40%~	43 42%~	29 46%~	18 35%~	17 35%~	30 46%~
TOP BOX SCORE	26 22%	514 27%	3 27%~	3 13%~	5 31%~	8 29%~	3 11%~	3 30%~	20 22%~	~	~	~	~	~	3 30%~	2 40%~	21 20%~	13 21%~	11 22%~	7 15%~	18 28%~
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	176	2765	9	30	21	32	70	12	148						12	8	164	120	51	70	105
NOT ANSWERED	29	406			2	3	2	3	9						1	1	10	7	2	4	8
VALID CASES	117	1911	11	23	16	28	27	10	90						10	5	103	63	51	48	65
NUMBER OF RESPONDENTS	322 100%	5082 100%	20 100%	53 100%	39 100%	63 100%	99 100%	25 100%	247 100%						23 100%	14 100%	277 100%	190 100%	104 100%	122 100%	178 100%

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						ETHNIC-ITY	HEALTH STATUS		GENDER					
	WORA TOT ADLTT	OHP TOT ADLTT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-#	AS-IAN ##	NATV ILND #	AMER IND/ PAC ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE-MALE
Q35N																							
EXTREMELY DIFFICULT	17 6%	281 6%	2 11%~	2 4%~	1 3%~	3 6%	5 6%	4 17%	16 7%*	~	~	~	~	~	1 5%~	~	17 7%~	5 3%*	12 13%*			7 6%	10 7%
01	3 1%	112 3%*	~	2%~	3%~	~	1%~	~	3 1%	~	~	~	~	~	~	~	3 1%~	3 2%~			~	~	3 2%~
02	5 2%	129 3%	~	2%~	~	~	5%~	~	4 2%	~	~	~	~	~	1 5%~	~	5 2%~	3 2%	2 2%			2 2%	3 2%
03	14 5%	164 4%	2 11%~	2 4%~	1 3%~	6 11%	1 1%*	2 9%~	9 4%	~	~	~	~	~	1 5%~	1 9%~	11 5%~	7 4%	7 8%			6 5%	7 5%
04	7 2%	138 3%	1 5%~	2 4%~	~	2%~	2 2%	1 4%~	7 3%*	~	~	~	~	~	~	~	7 3%~	4 2%	3 3%			4 4%	3 2%
05	48 17%	547 12%*	2 11%~	10 20%~	6 19%~	9 17%	17 20%	3 13%~	43 20%*	~	~	~	~	~	1 5%~	2 18%~	46 19%~	30 18%	18 20%			24 22%	24 16%
06	11 4%	230 5%	~	8%~	2 6%~	~	4 5%	1 4%~	8 4%	~	~	~	~	~	1 5%~	2 18%~	9 4%~	6 4%	5 5%			5 5%	6 4%
07	25 9%	375 8%	2 11%~	7 14%~	4 13%~	6 11%	5 6%	1 4%~	20 9%	~	~	~	~	~	3 14%~	~	23 10%~	19 11%*	6 7%			15 14%*	10 7%
09	74 26%	1161 26%	6 32%~	8 16%~	9 28%~	12 23%	16 19%*	4 17%~	46 21%*	~	~	~	~	~	4 19%~	3 27%~	49 20%~	36 22%*	19 21%			24 22%	30 20%*
EXTREMELY EASY	79 28%	1320 30%	4 21%~	12 24%~	8 25%~	16 30%	31 36%	7 30%~	60 28%	~	~	~	~	~	9 43%~	3 27%~	72 30%~	53 32%	20 22%			23 21%*	55 36%*
#8-10 (NET)	153 54%	2481 56%	10 53%~	20 41%~	17 53%~	28 53%	47 55%	11 48%~	106 49%*	~	~	~	~	~	13 62%~	6 55%~	121 50%~	89 54%	39 42%*			47 43%*	85 56%
9-10 (NET)	153 54%	2481 56%	10 53%~	20 41%~	17 53%~	28 53%	47 55%	11 48%~	106 49%*	~	~	~	~	~	13 62%~	6 55%~	121 50%~	89 54%	39 42%*			47 43%*	85 56%

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						ETHNICITY		HEALTH STATUS		GENDER		
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN ##	NATV ILND #	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
88		6																			
NOT ANSWERED	39	619	1	4	7	10	13	2	31					2	3	35	24	12	12	27	
VALID CASES	283	4457	19	49	32	53	86	23	216					21	11	242	166	92	110	151	
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	
MEAN	7.14	7.14	6.74	6.78	7.34	7.11	7.19	6.26	6.87					7.76	7.45	6.94	7.34	6.20	6.72	7.21	
p stat_(*=Sig @ p<=.05)	.990		~	~	~.948	.859		~.002*	~	~	~	~	~	~	~	~	~.183	.000*	.059	.685	

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

	BANT	BANT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE-MALE		
Q36																						
EXCELLENT	24 8%	447 9%	3 15%~	4 8%	6 16%~	2 3%*	8 8%	1 4%~	23 10%*	~	~	~	~	~	1 8%~	23 9%~	24 13%~	~	7 6%	17 10%		
VERY GOOD	65 22%	1140 24%	7 35%~	17 32%	7 19%~	7 11%*	25 26%	1 4%~	49 20%	~	~	~	~	8 35%~	2 15%~	60 22%~	65 34%~	~	31 26%	32 19%		
GOOD	101 34%	1676 35%	6 30%~	19 36%	12 32%~	26 43%	31 32%	6 24%~	85 35%	~	~	~	~	7 30%~	6 46%~	91 34%~	101 53%~	~	48 40%	53 31%		
FAIR	81 28%	1110 23%	4 20%~	11 21%	10 27%~	17 28%	26 27%	13 52%~	65 27%	~	~	~	~	6 26%~	4 31%~	75 28%~	~	81 78%*	23 19%*	57 33%*		
POOR	23 8%	395 8%	~	2 4%	2 5%~	9 15%	6 6%	4 16%~	19 8%	~	~	~	~	2 9%~	21 8%~	~	23 22%~	~	10 8%	13 8%		
#EXCELLENT + VERY GOOD + GOOD (NET)	190 65%	3263 68%	16 80%~	40 75%*	25 68%~	35 57%	64 67%	8 32%~	157 65%	~	~	~	~	15 65%~	9 69%~	174 64%~	190 100%~	~	86 72%*	102 59%*		
NOT ANSWERED	28	314			2	2	3		6						1	7			3	6		
VALID CASES	294	4768	20	53	37	61	96	25	241					23	13	270	190	104	119	172		
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%		

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	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	GOOD & FAIR & POOR	MALE	FE-MALE
Q37																				
EXCELLENT	53 18%	870 18%	4 20%~	10 19%	10 26%~	9 15%	17 17%	2 8%~	45 19%	~	~	~	~	3 13%~	2 14%~	49 18%~	44 23%*	9 9%*	25 21%	27 16%
VERY GOOD	69 23%	1189 25%	5 25%~	14 26%	6 16%~	9 15%*	30 31%*	5 20%~	59 24%	~	~	~	~	2 9%~	3 21%~	65 24%~	56 29%*	12 12%*	31 26%	38 22%
GOOD	95 32%	1480 31%	7 35%~	18 34%	13 34%	21 34%	28 29%	7 28%~	80 33%	~	~	~	~	9 39%~	4 29%~	88 32%~	64 34%	28 27%	37 31%	58 33%
FAIR	63 21%	937 20%	4 20%~	7 13%	5 13%~	16 26%	21 21%	10 40%~	47 19%	~	~	~	~	7 30%~	5 36%~	56 21%~	24 13%*	38 37%*	19 16%	43 25%
POOR	17 6%	296 6%	~	4 8%	4 11%~	6 10%	2 2%*	1 4%~	12 5%	~	~	~	~	2 9%~	~	14 5%~	2 1%*	15 15%*	8 7%	8 5%
#EXCELLENT + VERY GOOD + GOOD (NET)	217 73%	3539 74%	16 80%~	42 79%	29 76%~	39 64%	75 77%	14 56%~	184 76%*	~	~	~	~	14 61%~	9 64%~	202 74%~	164 86%*	49 48%*	93 78%	123 71%
NOT ANSWERED	25	310			1	2	1		4							5		2	2	4
VALID CASES	297	4772	20	53	38	61	98	25	243					23	14	272	190	102	120	174
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178
	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							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	EX & VERY GOOD &	FAIR & POOR	FE-MALE	MALE		
Q38 #YES	107 37%	1705 36%	9 45%~	7 13%*	7 19%~	25 40%	47 49%*	12 48%~	83 35%	~	~	~	~	12 ~ 52%~	5 38%~	98 37%~	51 27%*	53 54%*	33 28%*	72 42%*		
NO	185 63%	2994 64%	11 55%~	45 87%*	29 81%~	37 60%	48 51%*	13 52%~	157 65%	~	~	~	~	11 ~ 48%~	8 62%~	169 63%~	135 73%*	46 46%*	85 72%*	99 58%*		
DON'T KNOW	6	99		1	2		3		4						1	5	4	2	2	4		
NOT ANSWERED	24	284			1	1	1		3							5		3	2	3		
VALID CASES	292	4699	20	52	36	62	95	25	240					23	13	267	186	99	118	171		
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178		
	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 OT1	BANT OT2	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	WORA 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-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE		
Q39 EVERY DAY	69 23%	949 20%	1 5%	12 23%	10 26%	24 39%*	17 17%	3 12%	56 23%	~	~	~	~	8 35%	2 14%	62 23%	38 20%	30 29%	32 26%	36 21%		
SOME DAYS	24 8%	436 9%	1 5%	7 13%	2 5%	4 7%	8 8%	2 9%*	23 9%*	~	~	~	~	~	~	24 9%	18 10%	6 6%	12 10%	12 7%		
NOT AT ALL	205 69%	3380 71%	18 90%	34 64%	27 69%	33 54%*	73 74%	20 80%	165 68%	~	~	~	~	15 65%	12 86%	187 68%	133 70%	67 65%	77 64%	126 72%		
DON'T KNOW	1	34				1										1				1		
NOT ANSWERED	23	283				1	1		3							3	1	1	1	3		
VALID CASES	298	4765	20	53	39	61	98	25	244					23	14	273	189	103	121	174		
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178		
	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		
	WORA TOT ADLTL	OHP TOT ADLTL	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER #	NATV AS- IAN ##	AMER HAW/ IND/ PAC ALSK #	OTH#	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE
Q40 NEVER	39 42%	367 27%*	2 100%	12 63%	4 33%	10 37%	8 32%	1 20%	34 44%	~	~	~	~	3 38%	1 50%	37 44%	29 52%	9 26%	22 51%	16 33%
SOMETIMES	20 22%	331 24%	~	5 26%	3 25%	5 19%	6 24%	1 20%	16 21%	~	~	~	~	1 13%	1 50%	18 21%	12 21%	8 23%	10 23%	10 21%
USUALLY	17 18%	212 16%	~	1 5%	3 25%	6 22%	6 24%	1 20%	12 15%	~	~	~	~	4 50%	~	15 18%	7 13%	10 29%	7 16%	10 21%
ALWAYS	16 17%	455 33%*	~	1 5%	2 17%	6 22%	5 20%	2 40%	16 21%	~	~	~	~	~	~	15 18%	8 14%	8 23%	4 9%	12 25%
#ALWAYS + USUALLY (NET)	33 36%	667 49%*	~	2 11%	5 42%	12 44%	11 44%	3 60%	28 36%	~	~	~	~	4 50%	~	30 35%	15 27%	18 51%	11 26%	22 46%
TOP BOX SCORE	16 17%	455 33%*	~	1 5%	2 17%	6 22%	5 20%	2 40%	16 21%	~	~	~	~	~	~	15 18%	8 14%	8 23%	4 9%	12 25%
NOT ANSWERED	1	20				1			1						1		1		1	
VALID CASES	92	1365	2	19	12	27	25	5	78				8	2	85	56	35	43	48	
NUMBER OF RESPONDENTS	93	1385	2	19	12	28	25	5	79				8	2	86	56	36	44	48	
	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	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 & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q41 NEVER	58 63%	687 50%*	2 100%~	15 79%~	8 67%~	16 57%~	12 50%~	3 60%~	51 65%~	~	~	~	~	~	4 50%~	1 50%~	54 64%~	35 63%~	22 63%~	28 64%~	29 62%~
SOMETIMES	17 18%	305 22%	~	2 11%~	2 17%~	7 25%~	5 21%~	1 20%~	12 15%~	~	~	~	~	3 38%~	1 50%~	16 19%~	10 18%~	7 20%~	7 16%~	10 21%~	
USUALLY	6 7%	152 11%	~	~	1 8%~	1 4%~	4 17%~	~	6 8%~	~	~	~	~	~	~	5 6%~	4 7%~	2 6%~	4 9%~	2 4%~	
ALWAYS	11 12%	223 16%	~	2 11%~	1 8%~	4 14%~	3 13%~	1 20%~	10 13%~	~	~	~	~	1 13%~	10 ~	12%~	7 13%~	4 11%~	5 11%~	6 13%~	
#ALWAYS + USUALLY (NET)	17 18%	375 27%*	~	2 11%~	2 17%~	5 18%~	7 29%~	1 20%~	16 20%~	~	~	~	~	1 13%~	15 ~	18%~	11 20%~	6 17%~	9 20%~	8 17%~	
TOP BOX SCORE	11 12%	223 16%	~	2 11%~	1 8%~	4 14%~	3 13%~	1 20%~	10 13%~	~	~	~	~	1 13%~	10 ~	12%~	7 13%~	4 11%~	5 11%~	6 13%~	
NOT ANSWERED	1	18					1									1		1		1	
VALID CASES	92	1367	2	19	12	28	24	5	79					8	2	85	56	35	44	47	
NUMBER OF RESPONDENTS	93	1385	2	19	12	28	25	5	79					8	2	86	56	36	44	48	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ NATV ##	MUL-OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	MALE	FE-MALE
Q42 NEVER	65 70%	778 57%*	2 100%~	14 74%~	8 67%~	19 68%~	16 64%~	4 80%~	55 70%~	~	~	~	~	5 63%~	2 100%~	60 70%~	40 71%~	24 67%~	33 75%~	31 65%~
SOMETIMES	10 11%	261 19%*	~	11%~	2 17%~	2 7%~	4 16%~	~	8 10%~	~	~	~	~	1 13%~	10 ~	12%~	4 7%~	6 17%~	3 7%~	7 15%~
USUALLY	11 12%	141 10%	~	11%~	2 8%~	1 11%~	3 20%~	5 ~	10 13%~	~	~	~	~	1 13%~	10 ~	12%~	8 14%~	3 8%~	7 16%~	4 8%~
ALWAYS	7 8%	175 13%*	~	5%~	1 8%~	1 14%~	4 ~	1 20%~	6 8%~	~	~	~	~	1 13%~	6 ~	7%~	4 7%~	3 8%~	1 2%~	6 13%~
#ALWAYS + USUALLY (NET)	18 19%	316 23%	~	16%~	3 17%~	2 25%~	7 20%~	5 20%~	16 20%~	~	~	~	~	2 25%~	16 ~	19%~	12 21%~	6 17%~	8 18%~	10 21%~
TOP BOX SCORE	7 8%	175 13%*	~	5%~	1 8%~	1 14%~	4 ~	1 20%~	6 8%~	~	~	~	~	1 13%~	6 ~	7%~	4 7%~	3 8%~	1 2%~	6 13%~
NOT ANSWERED		30																		
VALID CASES	93	1355	2	19	12	28	25	5	79					8	2	86	56	36	44	48
NUMBER OF RESPONDENTS	93	1385	2	19	12	28	25	5	79					8	2	86	56	36	44	48
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

Q43 DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?

	BANT	BANT	AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD &	FAIR & POOR	FE-MALE	MALE	
Q43																					
YES	66 22%	997 21%	2 10%~	3 6%*	6 16%~	16 26%	29 29%	9 38%~	51 21%	~	~	~	~	10 43%~	1 7%~	62 23%~	34 18%*	29 29%	21 18%	44 25%	
NO	230 78%	3756 79%	18 90%~	50 94%*	31 84%~	45 74%	70 71%	15 63%~	189 79%	~	~	~	~	13 57%~	13 93%~	208 77%~	155 82%*	71 71%	98 82%	130 75%	
DON'T KNOW	5	42			2	2		1	5							5	1	4	2	3	
NOT ANSWERED	21	287							2							2			1	1	
VALID CASES	296	4753	20	53	37	61	99	24	240					23	14	270	189	100	119	174	
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE		
Q44																						
YES	33 12%	448 10%	1 6%~	4 8%	1 3%~	17 30%*	7 8%	3 14%~	25 11%~	~	~	~	~	5 ~ 23%~	1 8%~	31 12%~	14 8%*	18 20%*	12 11%	21 13%		
NO	240 88%	3956 90%	17 94%~	46 92%	36 97%~	40 70%*	81 92%	18 86%~	199 89%~	~	~	~	~	17 ~ 77%~	11 92%~	222 88%~	164 92%*	71 80%*	99 89%	139 87%		
DON'T KNOW	27	377	2	3	2	5	11	4	21					1	2	22	12	14	10	16		
NOT ANSWERED	22	301				1			2							2		1	1	2		
VALID CASES	273	4404	18	50	37	57	88	21	224					22	12	253	178	89	111	160		
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178		
	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					
	WORA	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	
Q45																				
YES	120	1716	6	5	8	31	49	20	94					14	3	113	64	51	46	73
	40%	36%	30%~	10%*	21%~	50%	50%*	80%~	39%	~	~	~	~	~ 61%~	21%~	42%~	34%*	50%*	39%	42%
NO	177	3045	14	47	30	31	49	5	148					9	11	159	124	51	73	102
	60%	64%	70%~	90%*	79%~	50%	50%*	20%~	61%	~	~	~	~	~ 39%~	79%~	58%~	66%*	50%*	61%	58%
NOT ANSWERED	25	321		1	1	1	1		5						5	2	2	3	3	
VALID CASES	297	4761	20	52	38	62	98	25	242					23	14	272	188	102	119	175
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178
	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						
	WORA	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-	
									#	##	#	##	##	TI					MALE	MALE	
Q46.1																					
YES	74	1102	2	2	6	21	31	12	57					7	3	65	40	34	27	47	
	23%	22%	10%~	4%*	15%~	33%*	31%*	48%~	23%	~	~	~	~	~ 30%~	21%~	23%~	21%	33%*	22%	26%	
NO	248	3980	18	51	33	42	68	13	190					16	11	212	150	70	95	131	
	77%	78%	90%~	96%*	85%~	67%*	69%*	52%~	77%	~	~	~	~	~ 70%~	79%~	77%~	79%	67%*	78%	74%	
VALID CASES	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178	
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178	
	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- ITY		HEALTH STATUS		GENDER	
	OT1	OT2																		
	WORA	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-	PAN-	PAN-	&	&	FE-	
									AMER	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE	
Q46.2																				
YES	102	1444	3	7	14	23	40	15	80					11	5	92	51	50	46	55
	32%	28%	15%~	13%*	36%~	37%	40%*	60%~	32%	~	~	~	~	~ 48%	36%~	33%~	27%*	48%*	38%	31%
NO	220	3638	17	46	25	40	59	10	167					12	9	185	139	54	76	123
	68%	72%	85%~	87%*	64%~	63%	60%*	40%~	68%	~	~	~	~	~ 52%	64%~	67%~	73%*	52%*	62%	69%
VALID CASES	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178
	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						ETHNIC-ITY	HEALTH STATUS		GENDER			
	WORA 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
Q46.3 YES	62 19%	826 16%	3 15%~	3 6%*	6 15%~	19 30%*	25 25%	5 20%~	48 19%	~	~	~	~	~	8 35%~	1 7%~	58 21%~	26 14%*	35 34%*	24 20%	38 21%
NO	260 81%	4256 84%	17 85%~	50 94%*	33 85%~	44 70%*	74 75%	20 80%~	199 81%	~	~	~	~	~	15 65%~	13 93%~	219 79%~	164 86%*	69 66%*	98 80%	140 79%
VALID CASES	322	5082	20	53	39	63	99	25	247						23	14	277	190	104	122	178
NUMBER OF RESPONDENTS	322 100%	5082 100%	20 100%	53 100%	39 100%	63 100%	99 100%	25 100%	247 100%						23 100%	14 100%	277 100%	190 100%	104 100%	122 100%	178 100%

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			
	WORA	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	
Q47.1																		
YES	12	211		1		4	4	3	8					3	1	10	6	6
	4%	4%		~ 2%		~ 6%	4%	12%~	3%	~	~	~	~	~ 13%~	7%~	4%~	3%	6%
																		5%
																		3%
																		6%
																		6%
																		6%
NO	310	4871	20	52	39	59	95	22	239					20	13	267	184	98
	96%	96%	100%~	98%	100%~	94%	96%	88%~	97%	~	~	~	~	~ 87%~	93%~	96%~	97%	94%
																		95%
																		97%
																		97%
VALID CASES	322	5082	20	53	39	63	99	25	247					23	14	277	190	104
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104
	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						
	WORA	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-	
									#	##	#	##	##	TI			GOOD	POOR	MALE	MALE	
Q47.2																					
YES	14	212			1	4	6	3	10					3	1	12	3	11	7	7	
	4%	4%	~	~	3%	6%	6%	12%	4%	~	~	~	~	~ 13%	7%	4%	2%*	11%*	6%	4%	
NO	308	4870	20	53	38	59	93	22	237					20	13	265	187	93	115	171	
	96%	96%	100%	100%	97%	94%	94%	88%	96%	~	~	~	~	~ 87%	93%	96%	98%*	89%*	94%	96%	
VALID CASES	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178	
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178	
	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					
	WORA	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	&			
									WHTE								&			
																	POOR			
																	MALE			
																	MALE			
Q47.3																				
YES	13	195		2	2	3	3	3	10					1	1	11	2	10	6	7
	4%	4%		~ 4%	5%~	5%	3%	12%~	4%	~	~	~	~	~ 4%	7%~	4%~	1%*	10%*	5%	4%
NO	309	4887	20	51	37	60	96	22	237					22	13	266	188	94	116	171
	96%	96%	100%~	96%	95%~	95%	97%	88%~	96%	~	~	~	~	~ 96%	93%~	96%~	99%*	90%*	95%	96%
VALID CASES	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178
	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		
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE #	BLCK OR AFR- AMER #	AS- IAN #	NATV ILND #	AMER IND/ PAC ALSK #	OTHR #	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q47.4 YES	60 19%	916 18%	1 5%~	4 8%*	3 8%~	16 25%	23 23%	13 52%~	46 19%	~	~	~	~	~	7 30%~	5 36%~	54 19%~	18 9%*	41 39%*	20 16%	40 22%*
NO	262 81%	4166 82%	19 95%~	49 92%*	36 92%~	47 75%	76 77%	12 48%~	201 81%	~	~	~	~	~	16 70%~	9 64%~	223 81%~	172 91%*	63 61%*	102 84%	138 78%*
VALID CASES	322	5082	20	53	39	63	99	25	247						23	14	277	190	104	122	178
NUMBER OF RESPONDENTS	322 100%	5082 100%	20 100%	53 100%	39 100%	63 100%	99 100%	25 100%	247 100%						23 100%	14 100%	277 100%	190 100%	104 100%	122 100%	178 100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER				
	OT1	OT2												ITY	STATUS						
	WORA	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-	&				
									#	##	#	##	##	TI	IC	IC	&				
									WHTE						GOOD	POOR	MALE				
																	FE-				
																	MALE				
Q48																					
YES	91	1408	3	11	8	28	31	10	71					9	6	80	38	52	34	56	
	31%	30%	15%	21%	21%	44%*	31%	42%	29%	~	~	~	~	~	39%	43%	29%	20%*	50%*	28%	32%
NO	207	3330	17	42	30	35	68	14	173					14	8	193	150	51	87	119	
	69%	70%	85%	79%	79%	56%*	69%	58%	71%	~	~	~	~	~	61%	57%	71%	80%*	50%*	72%	68%
NOT ANSWERED	24	344			1			1	3						4	2	1		1	3	
VALID CASES	298	4738	20	53	38	63	99	24	244					23	14	273	188	103	121	175	
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178	
	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					
	WORA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			PAN-	GOOD	FAIR			
									AMER		ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	#	##	#	##	##	TI	GOOD	POOR	MALE	MALE	
Q49																				
YES	81	1187	3	11	8	25	24	10	63					8	5	71	33	47	30	50
	90%	88%	100%	~100%	~100%	~93%	~77%	~100%	89%	~	~	~	~	~100%	83%	~90%	87%	~92%	91%	~89%
NO	9	167				2	7		8						1	8	5	4	3	6
	10%	12%	~	~	~	7%	23%	~	11%	~	~	~	~	~	17%	~10%	13%	~8%	9%	~11%
NOT ANSWERED	1	54				1								1	1		1		1	
VALID CASES	90	1354	3	11	8	27	31	10	71					8	6	79	38	51	33	56
NUMBER OF RESPONDENTS	91	1408	3	11	8	28	31	10	71					9	6	80	38	52	34	56
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q48 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	WORA	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		GOOD	POOR	MALE	MALE
Q50																				
YES	196	2988	7	21	20	50	76	22	157					17	8	181	102	89	68	127
	65%	63%	35%~	40%*	51%~	79%*	77%*	88%~	64%	~	~	~	~	~ 74%~	57%~	66%~	54%*	86%*	56%*	72%*
NO	104	1758	13	32	19	13	23	3	88					6	6	94	87	15	53	50
	35%	37%	65%~	60%*	49%~	21%*	23%*	12%~	36%	~	~	~	~	~ 26%~	43%~	34%~	46%*	14%*	44%*	28%*
NOT ANSWERED	22	336							2						2	1			1	1
VALID CASES	300	4746	20	53	39	63	99	25	245					23	14	275	189	104	121	177
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178
	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					
	WORA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			PAN-	GOOD	FAIR			
									AMER		ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	#	##	#	##	##	TI		GOOD	POOR	MALE	MALE
Q51																				
YES	182	2723	7	19	20	46	68	22	147					16	5	170	94	84	66	115
	95%	95%	100%~	90%~	100%~	94%~	93%	100%~	95%~	~	~	~	~	~100%~	63%~	96%~	95%	95%	99%*	93%*
NO	10	155		2		3	5		7						3	7	5	4	1	9
	5%	5%	~	10%~	~	6%~	7%	~	5%~	~	~	~	~	~	38%~	4%~	5%	5%	1%*	7%*
NOT ANSWERED	4	110				1	3		3					1	4	3	1		1	3
VALID CASES	192	2878	7	21	20	49	73	22	154					16	8	177	99	88	67	124
NUMBER OF RESPONDENTS	196	2988	7	21	20	50	76	22	157					17	8	181	102	89	68	127
	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 & FAIR & POOR	MALE	FE-MALE	
NQ52																					
18 TO 24	22 7%	485 10%	20 100%	~	~	~	~	~	13 5%	~	~	~	~	3 13%	3 21%	16 6%	16 8%	4 4%	7 6%	12 7%	
25 TO 34	61 19%	853 17%	53 ~100%	~	~	~	~	48 19%	~	~	~	~	~	3 13%	2 14%	51 18%	41 22%	13 13%*	23 19%	30 17%	
35 TO 44	42 13%	805 16%	39 ~100%	~	~	~	~	32 13%	~	~	~	~	~	4 17%	1 7%	36 13%	25 13%	12 12%	14 11%	25 14%	
45 TO 54	68 21%	1048 21%	63 ~100%	~	~	~	~	50 20%	~	~	~	~	~	7 30%	59 ~21%	36 19%	26 25%	26 21%	37 21%		
55 TO 64	103 32%	1437 28%	99 ~100%	~	~	~	~	84 34%	~	~	~	~	~	3 13%	6 43%	93 34%	64 34%	32 31%	44 36%	57 32%	
65 TO 74	19 6%	302 6%	18 ~72%	~	~	~	~	13 5%	~	~	~	~	~	3 13%	2 14%	15 5%	7 4%	11 11%*	7 6%	11 6%	
75 OR OLDER	7 2%	152 3%	7 ~28%	~	~	~	~	7 3%*	~	~	~	~	~	~	7 3%	1 0.5%*	6 6%*	1 0.8%	6 3%		
VALID CASES	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178	
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

NQ53 ARE YOU MALE OR FEMALE?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2													ITY	STATUS				
	WORA	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
NQ53																				
MALE	131	2039	8	23	14	26	43	8	104					11	2	118	88	34	122	
	41%	40%	40%~	43%	36%~	41%	43%	32%~	42%	~	~	~	~	~ 48%	14%~	43%~	46%*	33%*	100%~	~
FEMALE	191	3043	12	30	25	37	56	17	143					12	12	159	102	70	178	
	59%	60%	60%~	57%	64%~	59%	57%	68%~	58%	~	~	~	~	~ 52%	86%~	57%~	54%*	67%*	~100%~	
VALID CASES	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNICITY			HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND #	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE	
Q54																					
8TH GRADE OR LESS	11 4%	267 6%	1 ~	1 2%	5 3%	3 8%	1 3%	7 3%	~	~	~	~	~	1 4%	2 14%	9 3%	3 2%*	8 8%*	6 5%	5 3%	
SOME HIGH SCHOOL BUT DID NOT GRADUATE	42 14%	599 13%	3 16%	10 19%	8 21%	7 11%	9 9%	4 16%	~	~	~	~	~	4 17%	1 7%	40 14%	17 9%*	23 23%*	19 16%	23 13%	
HIGH SCHOOL GRADUATE OR GED	110 37%	1663 35%	7 37%	24 46%	11 28%	27 44%	31 32%	8 32%	~	~	~	~	~	8 35%	2 14%	104 38%	77 41%	31 31%	47 39%	63 36%	
SOME COLLEGE OR 2-YEAR DEGREE	108 36%	1668 35%	9 47%	13 25%*	15 38%	19 31%	44 45%*	8 32%	~	~	~	~	~	10 43%	9 64%	98 35%	71 38%	33 33%	37 31%	71 40%	
4-YEAR COLLEGE GRADUATE	13 4%	348 7%*	~	3 6%	2 5%	2 3%	6 6%	~	~	~	~	~	~	~	~	13 5%	11 6%	2 2%	6 5%	7 4%	
MORE THAN 4-YEAR COLLEGE DEGREE	13 4%	201 4%	~	1 2%	2 5%	1 2%	5 5%	4 16%	~	~	~	~	~	~	~	13 5%	9 5%	4 4%	6 5%	7 4%	
NOT ANSWERED	25	336	1	1		2	1										2	3	1	2	
VALID CASES	297	4746	19	52	39	61	98	25	247					23	14	277	188	101	121	176	
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178	
	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							AND	BLCK	AS-	NATV	AMER					NOT	EX &	FAIR	FE-	
WORA	OHP	18	25	35	45	55	65		OR	IAN	HAW/	IND/					HIS-	HIS-	GOOD	POOR	MALE	MALE
TOT	TOT	TO	TO	TO	TO	TO	AND	WHTE	#	##	#	##	##	TI	IC	IC	IC	IC	&	&	MALE	MALE
ADLT	ADLT	24	34	44	54	64	OVER															
Q55																						
YES HISPANIC OR LATINO	14	571	3	2	1	6	2								14		9	4	2	12		
	5%	12%*	16%~	4%	3%~	~	6%	8%~	~	~	~	~	~	~	~100%~	~	5%	4%	2%*	7%*		
NO NOT HISPANIC OR LATINO	277	4145	16	50	36	59	91	22	244					22	277	174	96	118	159			
	95%	88%*	84%~	96%	97%~	100%~	94%	92%~	100%~	~	~	~	~	~100%~	~100%~	95%	96%	98%*	93%*			
NOT ANSWERED	31	366	1	1	2	4	2	1	3					1		7	4	2	7			
VALID CASES	291	4716	19	52	37	59	97	24	244					22	14	277	183	100	120	171		
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178		
	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						
	WORA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY						
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR					
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD				
									WHTE	#	##	#	##	##	TI	IC	IC	&			
																		&			
																		GOOD			
																		POOR			
																		MALE			
																		MALE			
Q56.1																					
YES	276	4120	19	51	35	57	88	23	247					22	7	266	176	93	116	160	
	86%	81%*	95%~	96%*	90%~	90%	89%	92%~	100%~	~	~	~	~	~	96%~	50%~	96%~	93%*	89%	95%*	90%*
NO	46	962	1	2	4	6	11	2						1	7	11	14	11	6	18	
	14%	19%*	5%~	4%*	10%~	10%	11%	8%~	~	~	~	~	~	4%~	50%~	4%~	7%*	11%	5%*	10%*	
VALID CASES	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178	
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178	
	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			
	WORA	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-	&	
									#	##	#	##	##	TI	IC	IC	GOOD	
																	POOR	
																	MALE	
																	MALE	
Q56.2																		
YES	3	85	2					1						3	3	2	1	3
	0.9%	2%	10%~	~	~	~	~	4%~	~	~	~	~	~	13%~	~	1%~	1%~	~
NO	319	4997	18	53	39	63	99	24	247					20	14	274	188	103
	99%	98%	90%~	100%~	100%~	100%~	100%~	96%~	100%~	~	~	~	~	87%~	100%~	99%~	99%~	99%~
VALID CASES	322	5082	20	53	39	63	99	25	247					23	14	277	190	104
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104
	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			
	WORA	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	&	
									WHTE								&	
																	POOR	
																	MALE	
																	MALE	
Q56.3																		
YES	4	136		1	2	1								3	3	4	2	2
	1%	3%		~ 2%	5%	~ 2%								~ 13%	~ 1%	2%	~ 2%	1%
NO	318	4946	20	52	37	62	99	25	247					20	14	274	186	104
	99%	97%	100%	~ 98%	95%	~ 98%	100%	~ 100%	~ 100%	~	~	~	~	~ 87%	~ 100%	~ 99%	~ 98%	~ 100%
VALID CASES	322	5082	20	53	39	63	99	25	247					23	14	277	190	104
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104
	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					
	WORA	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	&			
									WHTE								POOR			
																	MALE			
																	MALE			
Q56.4																				
YES	2	40	1			1								2	2	2		2		
	0.6%	0.8%	5%~	~	~	2%	~	~	~	~	~	~	~	9%~	~0.7%~	1%~	~	~ 1%		
NO	320	5042	19	53	39	62	99	25	247					21	14	275	188	104	122	176
	99%	99%	95%~	100%~	100%~	98%	100%~	100%~	100%~	~	~	~	~	~ 91%~	100%~	99%~	99%	100%~	100%~	99%~
VALID CASES	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178
	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							ETHNIC-	HEALTH	GENDER	
	OT1	OT2													ITY	STATUS				
	WORA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									#	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q56.5																				
YES	18	313	1	1	2	6	4	4						14	3	15	8	9	8	10
	6%	6%	5%~	2%	5%~	10%	4%	16%~	~	~	~	~	~	61%~	21%~	5%~	4%	9%	7%	6%
NO	304	4769	19	52	37	57	95	21	247					9	11	262	182	95	114	168
	94%	94%	95%~	98%	95%~	90%	96%	84%~	100%~	~	~	~	~	39%~	79%~	95%~	96%	91%	93%	94%
VALID CASES	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178
	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					
	WORA	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-	GOOD	POOR	MALE	MALE		
									WHTE	#	##	#	##	##	TI	IC	IC	&	&	
Q56.6																				
YES	13	278	1	1	2	2	5	2						4	4	8	7	5	4	9
	4%	5%	5%~	2%	5%~	3%	5%	8%~	~	~	~	~	~	~ 17%	29%	3%	4%	5%	3%	5%
NO	309	4804	19	52	37	61	94	23	247					19	10	269	183	99	118	169
	96%	95%	95%~	98%	95%~	97%	95%	92%~	100%~	~	~	~	~	~ 83%	71%	97%	96%	95%	97%	95%
VALID CASES	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178
NUMBER OF RESPONDENTS	322	5082	20	53	39	63	99	25	247					23	14	277	190	104	122	178
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

Q57 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH		GENDER	
	OT1	OT2													ITY	STATUS					
	WORA	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	
Q57																					
YES	21	466	1	6	4	2	5	3	19					1	21	13	8	16	5		
	9%	12%*	9%~	16%~	13%~	4%~	6%	13%~	9%~	~	~	~	~	~ 10%~	~	9%~	8%	11%	17%*	3%*	
NO	219	3267	10	31	27	47	81	20	187					9	10	201	143	68	80	139	
	91%	88%*	91%~	84%~	87%~	96%~	94%	87%~	91%~	~	~	~	~	~ 90%~	100%~	91%~	92%	89%	83%*	97%*	
NOT ANSWERED	3	46	1	1				1	1						1	1	2		1		
VALID CASES	240	3733	11	37	31	49	86	23	206					10	10	222	156	76	96	144	
NUMBER OF RESPONDENTS	243	3779	12	38	31	49	86	24	207					10	10	223	157	78	96	145	
	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																			
	WORA	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	PAC	ALSK	OTHR	MUL-	PAN-	PAN-	GOOD	FAIR			
									AMER		ILND	NATV		TI	IC	IC	&	&			
									WHTE	#	#	#	#	#	#	#	GOOD	POOR			
																	MALE	FE-			
																	MALE				
Q58.1																					
YES	17	238		6	2	2	5	2	15					1	17	11	6	12	5		
	81%	51%~		~100%~	50%~	100%~	100%~	67%~	79%~	~	~	~	~	~100%~	~ 81%~	85%~	75%~	75%~	100%~		
NO	4	228	1		2			1	4						4	2	2	4			
	19%	49%~	100%~	~	50%~	~	~	33%~	21%~	~	~	~	~	~	~ 19%~	15%~	25%~	25%~	~		
VALID CASES	21	466	1	6	4	2	5	3	19					1	21	13	8	16	5		
NUMBER OF RESPONDENTS	21	466	1	6	4	2	5	3	19					1	21	13	8	16	5		
	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					
	WORA	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	&			
									WHTE								&			
																	POOR			
																	MALE			
																	MALE			
Q58.2																				
YES	13	182	1	3	1	1	4	3	13						13	8	5	12	1	
	62%	39%	100%	50%	25%	50%	80%	100%	68%	~	~	~	~	~	~	62%	62%	63%	75%	20%
NO	8	284		3	3	1	1		6					1	8	5	3	4	4	
	38%	61%	~	50%	75%	50%	20%	~	32%	~	~	~	~	100%	~	38%	38%	38%	25%	80%
VALID CASES	21	466	1	6	4	2	5	3	19					1	21	13	8	16	5	
NUMBER OF RESPONDENTS	21	466	1	6	4	2	5	3	19					1	21	13	8	16	5	
	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	AGE							RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2														ITY	STATUS			
	WORA	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-	GOOD	FAIR	
	ADLT	ADLT	24	34	44	54	64	OVER	AMER	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE	
									#	##	#	##	##	TI	IC	IC	&	&	FE-	
Q58.3																				
YES	1	156			1				1						1	1	1	1		
	5%	33%	~	~	25%	~	~	~	5%	~	~	~	~	~	~	5%	8%	~	6%	~
NO	20	310	1	6	3	2	5	3	18					1	20	12	8	15	5	
	95%	67%	100%	100%	75%	100%	100%	100%	95%	~	~	~	~	100%	~	95%	92%	100%	94%	100%
VALID CASES	21	466	1	6	4	2	5	3	19					1	21	13	8	16	5	
NUMBER OF RESPONDENTS	21	466	1	6	4	2	5	3	19					1	21	13	8	16	5	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH	GENDER	
	OT1	OT2													ITY	STATUS				
	WORA	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	MALE
Q58.4																				
YES		56																		
		12%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	21	410	1	6	4	2	5	3	19					1	21	13	8	16	5	
	100%	88%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%	
VALID CASES	21	466	1	6	4	2	5	3	19					1	21	13	8	16	5	
NUMBER OF RESPONDENTS	21	466	1	6	4	2	5	3	19					1	21	13	8	16	5	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER		
	OT1	OT2												ITY	STATUS				
	WORA	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	&		
									WHTE								&		
																	POOR		
																	MALE		
																	MALE		
Q58.5																			
YES	2	39					2		2						2	2	2		
	10%	8%	~	~	~	~	40%~	~	11%~	~	~	~	~	~	~ 10%~	15%~	~	13%~	
NO	19	427	1	6	4	2	3	3	17					1	19	11	8	14	5
	90%	92%	100%~	100%~	100%~	100%~	60%~	100%~	89%~	~	~	~	~	~100%~	~ 90%~	85%~	100%~	88%~	100%~
VALID CASES	21	466	1	6	4	2	5	3	19					1	21	13	8	16	5
NUMBER OF RESPONDENTS	21	466	1	6	4	2	5	3	19					1	21	13	8	16	5
	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																			
	WORA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	HIS-	VERY	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	PAN-	PAN-	&	&	FE-		
									WHTE	#	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
NQ13																					
0-6	66	687	5	14	12	14	15	4	49					3	5	56	30	31	19	44	
	30%	20%*	36%~	44%~	43%~	29%~	21%*	22%~	28%~	~	~	~	~	~ 18%~	50%~	29%~	24%*	38%*	26%	32%	
7-8	72	1221	4	15	7	9	27	7	58					8	1	66	46	23	27	42	
	33%	35%	29%~	47%~	25%~	19%~	37%	39%~	34%~	~	~	~	~	~ 47%~	10%~	34%~	36%	28%	36%	30%	
9-10	82	1603	5	3	9	25	31	7	65					6	4	74	51	27	28	53	
	37%	46%*	36%~	9%~	32%~	52%~	42%	39%~	38%~	~	~	~	~	~ 35%~	40%~	38%~	40%	33%	38%	38%	
VALID CASES	220	3511	14	32	28	48	73	18	172					17	10	196	127	81	74	139	
NUMBER OF RESPONDENTS	220	3511	14	32	28	48	73	18	172					17	10	196	127	81	74	139	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	
MEAN	2.07	2.26	2.00	1.66	1.89	2.23	2.22	2.17	2.09					2.18	1.90	2.09	2.17	1.95	2.12	2.06	
p stat_(*=Sig @ p<=.05)		.000*	~	~	~	~	~.055	~	~	~	~	~	~	~	~	~	~.053	.098	.523	.848	

[ASKED IF Q7 >= 1 TIME]

NQ23 RATING OF PERSONAL DOCTOR

	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/PAC ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE			
NQ23	WORA	OHP	18	25	35	45	55	65															
0-6	TOT	TOT	24	34	44	54	64	OVER	43	~	~	~	~	~	1	4	47	22	29	8	44		
	ADLT	ADLT	24	34	44	54	64	OVER	23%~	~	~	~	~	6%~	33%~	23%~	17%*	32%*	10%*	30%*			
7-8	TOT	TOT	4	10	11	10	20	4	49	~	~	~	~	10	60	44	15	34	26				
	ADLT	ADLT	4	10	11	10	20	4	27%~	~	~	~	~	59%~	~	29%~	34%*	17%*	42%*	18%*			
9-10	TOT	TOT	6	19	10	28	39	13	91	~	~	~	~	6	8	101	65	46	39	75			
	ADLT	ADLT	6	19	10	28	39	13	50%~	~	~	~	~	35%~	67%~	49%~	50%	51%	48%	52%			
VALID CASES	TOT	TOT	15	38	27	50	76	21	183					17	12	208	131	90	81	145			
NUMBER OF RESPONDENTS	ADLT	ADLT	15	38	27	50	76	21	183					17	12	208	131	90	81	145			
			100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%			
MEAN			2.07	2.26	2.15	2.32	2.29	2.43	2.26					2.29	2.33	2.26	2.33	2.19	2.38	2.21			
p stat_(*=Sig @ p<=.05)			~	~	~.615	.784	~	~	~	~	~	~	~	~	~	~	~.203	.238	.089	.160			

[ASKED IF Q15 = YES]

NQ27 RATING OF SPECIALIST SEEN MOST OFTEN

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2																		
	WORA	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	ILND	NATV	OTHR	MUL-	PAN-	PAN-	&	&		
									#	##	#	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
NQ27																				
0-6	19	239	1	2	5	5	4	2	13					4	19	8	11	7	12	
	19%	13%	20%~	22%~	50%~	19%~	10%~	20%~	18%~	~	~	~	~	31%~	~	20%~	15%~	24%~	18%~	20%~
7-8	26	475		2	1	5	16	2	21					1	3	23	18	8	14	12
	26%	27%	~	22%~	10%~	19%~	40%~	20%~	28%~	~	~	~	~	8%~	75%~	25%~	34%~	17%~	36%~	20%~
9-10	56	1057	4	5	4	16	20	6	40					8	1	51	27	27	18	37
	55%	60%	80%~	56%~	40%~	62%~	50%~	60%~	54%~	~	~	~	~	62%~	25%~	55%~	51%~	59%~	46%~	61%~
VALID CASES	101	1771	5	9	10	26	40	10	74					13	4	93	53	46	39	61
NUMBER OF RESPONDENTS	101	1771	5	9	10	26	40	10	74					13	4	93	53	46	39	61
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%
MEAN	2.37	2.46	2.60	2.33	1.90	2.42	2.40	2.40	2.36					2.31	2.25	2.34	2.36	2.35	2.28	2.41
p stat_(*=Sig @ p<=.05)		.170	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

NQ35 RATING OF HEALTH PLAN

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER			
	OT1	OT2																				
	WORA	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	ILND	NATV	OTHR	MUL-	IC	IC	&	&	GOOD	POOR	MALE	MALE
									#	##	#	##	##	TI			VERY					
NQ35																						
0-6	81	953	4	20	12	20	17	4	68					4	1	75	46	31	34	45		
	28%	21%*	22%~	39%	35%~	33%	19%*	16%~	29%	~	~	~	~	~ 19%~	8%~	29%~	26%	32%	30%	27%		
7-8	99	1522	4	21	10	14	39	9	82					8	5	90	61	37	44	53		
	35%	33%	22%~	41%	29%~	23%*	43%*	36%~	35%	~	~	~	~	~ 38%~	42%~	35%~	34%	38%	38%	32%		
9-10	105	2121	10	10	12	26	34	12	83					9	6	94	73	29	37	67		
	37%	46%*	56%~	20%*	35%~	43%	38%	48%~	36%	~	~	~	~	~ 43%~	50%~	36%~	41%	30%	32%	41%		
VALID CASES	285	4596	18	51	34	60	90	25	233					21	12	259	180	97	115	165		
NUMBER OF RESPONDENTS	285	4596	18	51	34	60	90	25	233					21	12	259	180	97	115	165		
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%		
MEAN	2.08	2.25	2.33	1.80	2.00	2.10	2.19	2.32	2.06					2.24	2.42	2.07	2.15	1.98	2.03	2.13		
p stat_(*=Sig @ p<=.05)		.000*	~.006*		~.865	.119		~.379	~	~	~	~	~	~	~	~	~.071	.114	.317	.225		

GETTING NEEDED CARE

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER			
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
NPRBSEE4 NQ46	2.21	2.25	2.40	1.90	1.75	2.37	2.25	2.30	2.25					2.00	2.50	2.18	2.26	2.12	2.10	2.29	
p stat_(*=Sig @ p<=.05)	.639		~	~	~	~	~	~	~	~	~	~	~	~	~	~	.500	.300	~	~	
NCARNES4 NQ15	2.24	2.31	2.29	1.90	2.07	2.28	2.40	2.44	2.27					2.22	2.40	2.25	2.35	2.10	2.33	2.23	
p stat_(*=Sig @ p<=.05)	.173		~	~	~	~.019*	~	~	~	~	~	~	~	~	~	~	.014*	.030*	.244	.785	
COMPOSITE	2.23	2.28	2.34	1.90	1.91	2.33	2.33	2.37	2.26	x	x	x	x	x	2.11	2.45	2.22	2.31	2.11	2.21	2.26
p stat_(*=Sig @ p<=.05)	.147		~	~	~	~.051	~	~.066	~	~	~	~	~	~	~	~	~.009*	.014*	.766	.202	

GETTING CARE QUICKLY

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS		GENDER				
	WORA 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	
NCARSN4 NQ4	2.47	2.40	2.33	2.07	2.47	2.44	2.65	2.60	2.48					2.64	2.29	2.49	2.55	2.43	2.65	2.41	
p stat_(*=Sig @ p<=.05)	.292		~	~	~	~	~	~	~	~	~	~	~	~	~	~	.194	.534	~	~	
NAPGET4 NQ6	2.32	2.26	2.50	2.10	2.08	2.43	2.39	2.53	2.35					2.53	1.89	2.36	2.31	2.38	2.45	2.27	
p stat_(*=Sig @ p<=.05)	.303		~	~	~	~	.362	~	~	~	~	~	~	~	~	~	.872	.368	.078	.281	
COMPOSITE	2.40	2.33	2.42	2.09	2.28	2.44	2.52	2.57	2.42	x	x	x	x	x	2.58	2.09	2.42	2.43	2.40	2.55	2.34
p stat_(*=Sig @ p<=.05)	.088		~	~	~	.534	.015*	~	~	~	~	~	~	~	~	~	.263	.888	.001*	.054	

HOW WELL DOCTORS COMMUNICATE

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
NDREXPL4 NQ32	2.49	2.64	2.27	2.50	2.19	2.56	2.63	2.29	2.52						2.40	2.33	2.50	2.55	2.41	2.56	2.46
p stat_(*=Sig @ p<=.05)		.006*	~	~	~	~	.056	~	~	~	~	~	~	~	~	~	~	.234	.265	.320	.506
NDRLSTN4 NQ33	2.43	2.61	2.27	2.38	2.24	2.49	2.58	2.29	2.47						2.47	2.22	2.45	2.53	2.34	2.64	2.34
p stat_(*=Sig @ p<=.05)		.001*	~	~	~	~	.044*	~	~	~	~	~	~	~	~	~	~	.058	.191	.003*	.017*
NDRESPU4 NQ34	2.50	2.67	2.36	2.46	2.38	2.51	2.65	2.25	2.54						2.64	2.00	2.52	2.63	2.34	2.66	2.42
p stat_(*=Sig @ p<=.05)		.002*	~	~	~	~	.041*	~	~	~	~	~	~	~	~	~	~	.008*	.030*	.022*	.064
NDRTMEN4 NQ37	2.40	2.52	2.18	2.19	2.19	2.50	2.62	2.18	2.41						2.47	2.11	2.42	2.53	2.25	2.45	2.39
p stat_(*=Sig @ p<=.05)		.041*	~	~	~	~	.003*	~	~	~	~	~	~	~	~	~	~	.015*	.031*	.587	.829
COMPOSITE	2.46	2.61	2.27	2.38	2.25	2.52	2.62	2.25	2.48	x	x	x	x	x	2.49	2.17	2.47	2.56	2.34	2.58	2.40
p stat_(*=Sig @ p<=.05)		.001*	~	~	~	~	.009*	~	~	~	~	~	~	~	~	~	~	.020*	.049*	.046*	.144

CUSTOMER SERVICE

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
NPBCLCS4 NQ50	2.41	2.30	2.40	1.82	2.35	2.38	2.71	3.00	2.44					2.14	2.60	2.41	2.33	2.57	2.32	2.50	
p stat_(*=Sig @ p<=.05)	.222		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCSRESP NQ51	2.72	2.69	2.60	2.40	2.71	2.69	2.86	3.00	2.74					2.57	2.60	2.72	2.68	2.75	2.67	2.75	
p stat_(*=Sig @ p<=.05)	.692		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.56	2.50	2.50	2.11	2.53	2.54	2.79	3.00	2.59	x	x	x	x	x	2.36	2.60	2.57	2.51	2.66	2.49	2.63
p stat_(*=Sig @ p<=.05)	.335		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

SHARED DECISION MAKING

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS	GENDER					
	WORA 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 NATV	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
NNRXWHY NQ11	2.90	2.87	3.00	2.86	3.00	2.87	2.89	2.83	2.86					3.00	3.00	2.88	2.93	2.83	2.95	2.86	
p stat_(*=Sig @ p<=.05)	.516		~	~	~	~	~	~	~	~	~	~	~	~	~	~	.336	~	~	~	
NNRXWYNT NQ12	2.67	2.49	3.00	3.00	2.54	2.60	2.68	2.50	2.66					3.00	2.60	2.71	2.64	2.71	2.76	2.63	
p stat_(*=Sig @ p<=.05)	.009*		~	~	~	~	~	~	~	~	~	~	~	~	~	~	.646	~	~	~	
NRXBST NQ13	2.53	2.53	2.33	2.71	2.69	2.45	2.58	2.17	2.52					2.50	2.60	2.53	2.57	2.45	2.76	2.37	
p stat_(*=Sig @ p<=.05)	.933		~	~	~	~	~	~	~	~	~	~	~	~	~	~	.527	~	~	~	
COMPOSITE	2.70	2.63	2.78	2.86	2.74	2.64	2.72	2.50	2.68	x	x	x	x	x	2.83	2.73	2.71	2.72	2.66	2.82	2.62
p stat_(*=Sig @ p<=.05)	.182		~	~	~	~	~	~	~	~	~	~	~	~	~	~	.679	~	~	~	

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

	BANTO T1	BANTO T2	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND #	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	FE- MALE	MALE
PRBSEE4 Q25	73%	77%	80%	60%	42%	78%	77%	90%	76%					64%	100%	72%	77%	68%	71%	75%
CARNES4 Q14	81%	82%	79%	68%	72%	78%	92%	94%	83%					78%	100%	81%	87%	74%	82%	82%
AVERAGE	77.25	79.43	79.29	63.87	57.04	78.02	84.47	92.22	79.34	x	x	x	x	x 71.03	100.0	76.46	82.20	70.87	76.81	78.93

GETTING CARE QUICKLY (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	FE-MALE	MALE	
CARSN4 Q4	87%	83%	83%	71%	84%	82%	93%	100%	87%					91%	71%	86%	92%	81%	93%	83%	
APGET4 Q6	81%	78%	92%	67%	69%	85%	86%	93%	81%					93%	56%	82%	79%	86%	87%	79%	
AVERAGE	83.81	80.38	87.50	69.05	76.72	83.57	89.22	96.67	84.14	x	x	x	x	x	92.12	63.49	84.49	85.60	83.78	89.73	80.98

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER			
	WORA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
DREXPL4 Q17	85%	92%	82%	88%	71%	85%	90%	76%	85%					93%	78%	86%	89%	79%	88%	84%	
DRLSTN4 Q18	84%	90%	64%	85%	76%	83%	92%	82%	85%					100%	67%	85%	88%	79%	95%	79%	
DRESPU4 Q19	84%	91%	73%	81%	86%	83%	92%	69%	86%					93%	56%	86%	90%	77%	94%	79%	
DRTMEN4 Q20	83%	88%	64%	73%	76%	83%	94%	76%	84%					80%	67%	84%	88%	76%	88%	81%	
AVERAGE	83.8	90.3	70.5	81.7	77.4	83.6	92.0	76.0	84.8	x	x	x	x	x	91.5	66.7	85.3	88.9	77.9	91.1	80.7

CUSTOMER SERVICE (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
PBCLCS4 Q31	81%	80%	80%	55%	76%	92%	93%	100%	82%						71%	100%	81%	78%	89%	72%	88%
CSRESP Q32	95%	94%	100%	80%	94%	100%	96%	100%	95%						100%	80%	96%	93%	96%	88%	98%
AVERAGE	87.94	86.67	90.00	67.27	85.29	96.15	94.64	100.0	88.67	x	x	x	x	x	85.71	90.00	88.54	85.48	92.86	79.75	93.27

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER				
	OT1	OT2													ITY	STATUS					
	WORA	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY						
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR					
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR			
									#	##	#	##	##	TI	IC	IC	&	&			
									WHTE							GOOD	POOR	MALE	FE-		
																			MALE		
NRXWHY Q10	95%	93%	100%	93%	100%	93%	95%	92%	93%					100%	100%	94%	97%	92%	98%	93%	
NRXWYNT Q11	83%	74%	100%	100%	77%	80%	84%	75%	83%					100%	80%	85%	82%	85%	88%	81%	
RXBST Q12	76%	77%	67%	86%	85%	72%	79%	58%	76%					75%	80%	76%	79%	72%	88%	69%	
AVERAGE	84.9	81.5	88.9	92.9	87.2	81.9	86.0	75.0	83.9	x	x	x	x	x	91.7	86.7	85.4	85.8	83.1	91.2	81.0

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	NO CCC		
Q1 YES	286 100%	5277 100%	44 100%	72 100%	92 100%	78 100%	181 100%	~	~	~	~	~	~	56 100%	213 100%	260 100%	10 100%	212 100%	74 100%
NOT ANSWERED	1	32				1								1	1	1			
VALID CASES	286	5277	44	72	92	78	181							56	213	260	10	212	74
NUMBER OF RESPONDENTS	287 100%	5309 100%	44 100%	72 100%	92 100%	79 100%	181 100%							57 100%	213 100%	261 100%	10 100%	213 100%	74 100%

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		
	WORA 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
Q3 YES	85 30%	1639 32%	16 36%	23 33%	21 23%	25 32%	57 32%	~	~	~	~	~	~	14 25%	67 32%	74 29%	7 70%	51 25%*	34 46%
NO	197 70%	3549 68%	28 64%	47 67%	70 77%	52 68%	123 68%	~	~	~	~	~	~	43 75%	145 68%	185 71%	3 30%	157 75%*	40 54%
NOT ANSWERED	5	121		2	1	2	1								1	2		5	
VALID CASES	282	5188	44	70	91	77	180							57	212	259	10	208	74
NUMBER OF RESPONDENTS	287	5309	44	72	92	79	181							57	213	261	10	213	74
	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			
	WORA 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	
Q4 NEVER	1 1%	19 1%	~	~	1 5%	~	1 2%	~	~	~	~	~	~	~	~	1 1%	~	1 2%	
SOMETIMES	8 10%	114 7%	1 6%	1 5%	3 14%	3 14%	5 9%	~	~	~	~	~	~	2 14%	5 8%	5 7%	2 33%	2 4%	6 19%
USUALLY	17 21%	272 18%	2 13%	6 29%	3 14%	6 27%	8 15%	~	~	~	~	~	~	5 36%	11 17%	15 21%	1 17%	8 17%	9 28%
ALWAYS	54 68%	1135 74%	13 81%	14 67%	14 67%	13 59%	40 74%	~	~	~	~	~	~	7 50%	47 75%	50 70%	3 50%	37 77%	17 53%
#ALWAYS + USUALLY (NET)	71 89%	1407 91%	15 94%	20 95%	17 81%	19 86%	48 89%	~	~	~	~	~	~	12 86%	58 92%	65 92%	4 67%	45 94%	26 81%
TOP BOX SCORE	54 68%	1135 74%	13 81%	14 67%	14 67%	13 59%	40 74%	~	~	~	~	~	~	7 50%	47 75%	50 70%	3 50%	37 77%	17 53%
NOT ANSWERED	5	99		2		3	3								4	3	1	3	2
VALID CASES	80	1540	16	21	21	22	54							14	63	71	6	48	32
NUMBER OF RESPONDENTS	85 100%	1639 100%	16 100%	23 100%	21 100%	25 100%	57 100%							14 100%	67 100%	74 100%	7 100%	51 100%	34 100%

[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		
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND##	AMER IND/ALSK##	OTHR##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q5 YES	204 73%	3464 67%*	40 91%~	49 73%	62 69%	53 68%	128 72%	~	~	~	~	~	~	45 79%	151 72%	187 72%~	9 90%~	141 69%*	63 85%
NO	75 27%	1672 33%*	4 9%~	18 27%	28 31%	25 32%	51 28%	~	~	~	~	~	~	12 21%	60 28%	71 28%~	1 10%~	64 31%*	11 15%
NOT ANSWERED	8	173		5	2	1	2								2	3		8	
VALID CASES	279	5136	44	67	90	78	179							57	211	258	10	205	74
NUMBER OF RESPONDENTS	287	5309	44	72	92	79	181							57	213	261	10	213	74
	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			
	WORA 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	GOOD & POOR	NO CCC	CCC
Q6 NEVER	3 2%	57 2%	~	~	5%	3	1 0.9%	~	~	~	~	~	~	1 2%	2 1%	3 2%	~	3 2%	
SOMETIMES	15 8%	393 12%	3 8%	7 15%	2 3%	3 7%	8 7%	~	~	~	~	~	~	5 11%	9 6%	14 8%	~	7 5%	8 13%
USUALLY	52 27%	850 26%	10 26%	11 23%	16 27%	15 33%	30 26%	~	~	~	~	~	~	14 32%	35 25%	47 27%	1 13%	35 27%	17 28%
ALWAYS	122 64%	1954 60%	26 67%	29 62%	39 65%	28 61%	78 67%	~	~	~	~	~	~	24 55%	94 67%	112 64%	7 88%	86 66%	36 59%
#ALWAYS + USUALLY (NET)	174 91%	2804 86%	36 92%	40 85%	55 92%	43 93%	108 92%	~	~	~	~	~	~	38 86%	129 92%	159 90%	8 100%	121 92%	53 87%
TOP BOX SCORE	122 64%	1954 60%	26 67%	29 62%	39 65%	28 61%	78 67%	~	~	~	~	~	~	24 55%	94 67%	112 64%	7 88%	86 66%	36 59%
NOT ANSWERED	12	210	1	2	2	7	11							1	11	11	1	10	2
VALID CASES	192	3254	39	47	60	46	117							44	140	176	8	131	61
NUMBER OF RESPONDENTS	204 100%	3464 100%	40 100%	49 100%	62 100%	53 100%	128 100%							45 100%	151 100%	187 100%	9 100%	141 100%	63 100%

[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			
	WORA 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 & POOR	NO CCC	CCC	
Q7 NONE	75 27%	1484 30%	7 17%	14 22%	28 31%	26 34%	48 27%	~	~	~	~	~	~	16 29%	56 27%	73 29%	~	64 32%*	11 15%
1 TIME	89 32%	1437 29%	14 33%	21 32%	35 38%	19 25%	56 32%	~	~	~	~	~	~	19 34%	65 31%	82 32%	3 33%	71 35%	18 25%
2	55 20%	1045 21%	7 17%	19 29%	17 19%	12 16%	31 18%	~	~	~	~	~	~	14 25%	41 20%	52 20%	3 33%	40 20%	15 21%
3	30 11%	518 10%	6 14%	4 6%	8 9%	12 16%	22 12%	~	~	~	~	~	~	4 7%	25 12%	28 11%	1 11%	16 8%*	14 19%
4	5 2%	229 5%*	~	2%	1%	4%	4 2%	~	~	~	~	~	~	1 2%	4 2%	5 2%	~	2 1%	3 4%
5 TO 9	17 6%	232 5%	5 12%	6 9%	2 2%*	4 5%	12 7%	~	~	~	~	~	~	2 4%	13 6%	14 5%	~	8 4%*	9 12%
10 OR MORE TIMES	4 1%	79 2%	3 7%	~	~	1 1%	4 2%*	~	~	~	~	~	~	~	4 2%*	2 0.8%	2 22%	1 0.5%	3 4%
NOT ANSWERED	12	285	2	7	1	2	4							1	5	5	1	11	1
VALID CASES	275	5024	42	65	91	77	177							56	208	256	9	202	73
NUMBER OF RESPONDENTS	287	5309	44	72	92	79	181							57	213	261	10	213	74
	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	
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND##	AMER ALSK##	OTHMUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q8 #YES	144 74%	2500 72%	25 76%	40 80%	44 71%	35 70%	94 75%	~	~	~	~	~	30 75%	108 73%	133 74%	5 56%	95 71%	49 79%
NO	51 26%	975 28%	8 24%	10 20%	18 29%	15 30%	32 25%	~	~	~	~	~	10 25%	40 27%	46 26%	4 44%	38 29%	13 21%
NOT ANSWERED	5	65	2	1	1	1	3							4	4		5	
VALID CASES	195	3475	33	50	62	50	126						40	148	179	9	133	62
NUMBER OF RESPONDENTS	200	3540	35	51	63	51	129						40	152	183	9	138	62
	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			
	WORA 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 & POOR	NO CCC	CCC	
Q9 NEVER	2 1%	83 2%	~	1 2%	1 2%	1 0.8%	1 0.8%	~	~	~	~	~	~	~	2 1%	2 1%	2 2%	2 2%	
SOMETIMES	15 8%	254 7%	2 6%	4 8%	4 7%	5 10%	7 6%	~	~	~	~	~	~	6 16%	6 4%	10 6%	3 33%	11 8%	4 6%
USUALLY	31 16%	708 20%	5 15%	8 16%	9 15%	9 18%	23 18%	~	~	~	~	~	~	5 13%	26 17%	29 16%	1 11%	21 16%	10 16%
ALWAYS	145 75%	2421 70%	27 79%	36 73%	47 77%	35 71%	96 76%	~	~	~	~	~	~	27 71%	115 77%	137 77%	5 56%	97 74%	48 77%
#ALWAYS + USUALLY (NET)	176 91%	3129 90%	32 94%	44 90%	56 92%	44 90%	119 94%	~	~	~	~	~	~	32 84%	141 95%	166 93%	6 67%	118 90%	58 94%
TOP BOX SCORE	145 75%	2421 70%	27 79%	36 73%	47 77%	35 71%	96 76%	~	~	~	~	~	~	27 71%	115 77%	137 77%	5 56%	97 74%	48 77%
NOT ANSWERED	7	74	1	2	2	2	2							2	3	5		7	
VALID CASES	193	3466	34	49	61	49	127							38	149	178	9	131	62
NUMBER OF RESPONDENTS	200 100%	3540 100%	35 100%	51 100%	63 100%	51 100%	129 100%							40 100%	152 100%	183 100%	9 100%	138 100%	62 100%

[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		
	WORA 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	
Q10 YES	61 31%	1023 30%	9 26%	14 29%	17 27%	21 41%	38 30%	~	~	~	~	~	~	14 35%	44 29%	53 29%	4 44%	28 21%*	33 53%
NO	135 69%	2434 70%	25 74%	35 71%	45 73%	30 59%	89 70%	~	~	~	~	~	~	26 65%	106 71%	128 71%	5 56%	106 79%*	29 47%
NOT ANSWERED	4	83	1	2	1		2								2	2		4	
VALID CASES	196	3457	34	49	62	51	127							40	150	181	9	134	62
NUMBER OF RESPONDENTS	200	3540	35	51	63	51	129							40	152	183	9	138	62
	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		
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN	NATV ILND	AMER ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q11 #YES	56 92%	937 94%	7 78%~	13 93%~	15 88%~	21 100%~	36 95%~	~	~	~	~	~	~	12 86%~	42 95%~	49 92%~	4 100%~	24 86%~	32 97%
NO	5 8%	63 6%	2 22%~	1 7%~	2 12%~	~	2 5%~	~	~	~	~	~	~	2 14%~	2 5%~	4 8%~	~	4 14%~	1 3%
NOT ANSWERED		23																	
VALID CASES	61	1000	9	14	17	21	38							14	44	53	4	28	33
NUMBER OF RESPONDENTS	61	1023	9	14	17	21	38							14	44	53	4	28	33
	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		
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN	NATV ILND	AMER ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q12 #YES	46 75%	709 71%	5 56%~	10 71%~	12 71%~	19 90%~	30 79%~	~	~	~	~	~	~	11 79%~	34 77%~	40 75%~	4 100%~	19 68%~	27 82%
NO	15 25%	290 29%	4 44%~	4 29%~	5 29%~	2 10%~	8 21%~	~	~	~	~	~	~	3 21%~	10 23%~	13 25%~	~	9 32%~	6 18%
NOT ANSWERED		24																	
VALID CASES	61	999	9	14	17	21	38							14	44	53	4	28	33
NUMBER OF RESPONDENTS	61	1023	9	14	17	21	38							14	44	53	4	28	33
	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			
	WORA 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	
Q13 #YES	50 83%	780 79%	6 67%~	12 92%~	14 82%~	18 86%~	32 84%~	~	~	~	~	~	~	10 71%~	38 88%~	43 83%~	3 75%~	22 79%~	28 88%
NO	10 17%	209 21%	3 33%~	1 8%~	3 18%~	3 14%~	6 16%~	~	~	~	~	~	~	4 29%~	5 12%~	9 17%~	1 25%~	6 21%~	4 13%
NOT ANSWERED	1	34		1											1	1			1
VALID CASES	60	989	9	13	17	21	38							14	43	52	4	28	32
NUMBER OF RESPONDENTS	61	1023	9	14	17	21	38							14	44	53	4	28	33
	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		
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-##	AS-IAN	NATV HAW/ILND	AMER IND/PAC ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q14 WORST HEALTH CARE POSSIBLE	1 0.5%	12 0.3%	~	~	1 2%	~	~	~	~	~	~	~	~	~	1 ~0.7%	1 ~0.6%	~	~	1 ~0.7%
01		10 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02	1 0.5%	13 0.4%	~	~	~	1 2%	~	~	~	~	~	~	~	~	~	~	~	~	1 ~0.7%
03	1 0.5%	13 0.4%	~	1 2%	~	~	~	~	~	~	~	~	~	1 3%	~	1 ~0.6%	~	~	1 2%
04	1 0.5%	22 0.6%	~	~	1 2%	~	~	~	~	~	~	~	~	1 3%	~	1 ~0.6%	~	~	1 ~0.7%
05	10 5%	111 3%	2 6%	1 2%	4 6%	3 6%	6 5%	~	~	~	~	~	~	2 5%	7 5%	8 4%	2 22%	6 4%	4 7%
06	3 2%	105 3%	~	1 2%	1 2%	1 2%	2 2%	~	~	~	~	~	~	1 3%	2 1%	2 1%	1 11%	1 ~0.7%	2 3%
07	15 8%	269 8%	5 15%	4 8%	4 6%	2 4%	12 10%	~	~	~	~	~	~	2 5%	13 9%	14 8%	1 11%	13 10%	2 3%
08	53 27%	725 21%*	9 26%	12 24%	18 29%	14 28%	34 27%	~	~	~	~	~	~	9 23%	41 28%	47 26%	1 11%	37 28%	16 26%
09	40 21%	742 21%	10 29%	11 22%	10 16%	9 18%	27 21%	~	~	~	~	~	~	9 23%	30 20%	40 22%	~	27 20%	13 21%
BEST HEALTH CARE POSSIBLE	70 36%	1438 42%	8 24%	19 39%	23 37%	20 40%	45 36%	~	~	~	~	~	~	15 38%	55 37%	66 37%	4 44%	47 35%	23 38%
#8-10 (NET)	163 84%	2905 84%	27 79%	42 86%	51 82%	43 86%	106 84%	~	~	~	~	~	~	33 83%	126 85%	153 85%	5 56%	111 83%	52 85%

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		
	WORA 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)	110 56%	2180 63%	18 53%~	30 61%~	33 53%	29 58%	72 57%	~	~	~	~	~	~	24 60%~	85 57%~	106 59%~	4 44%~	74 55%	36 59%
NOT ANSWERED	5	80	1	2	1	1	3								3	3		4	1
VALID CASES	195	3460	34	49	62	50	126							40	149	180	9	134	61
NUMBER OF RESPONDENTS	200 100%	3540 100%	35 100%	51 100%	63 100%	51 100%	129 100%							40 100%	152 100%	183 100%	9 100%	138 100%	62 100%
MEAN	8.54	8.70	8.44	8.71	8.42	8.60	8.66							8.50	8.63	8.63	7.89	8.52	8.59
p stat_(*=Sig @ p<=.05)		.172	~	~	.471	.778	.241	~	~	~	~	~	~	~	~	~	~	~	.790

[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	
	WORA 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-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q15 NEVER	3 2%	57 2%	~	2%~	2%	2%	~	~	~	~	~	~	1 3%~	1 0.7%~	2 1%~	~	2 2%	1 2%
SOMETIMES	13 7%	311 9%	4 12%~	3 6%~	3 5%	3 6%	7 6%	~	~	~	~	~	4 10%~	7 5%~	9 5%~	3 33%~	9 7%	4 6%
USUALLY	54 28%	1019 29%	6 18%~	17 35%~	17 28%	14 27%	36 28%	~	~	~	~	~	14 36%~	39 26%~	52 29%~	2 22%~	36 27%	18 29%
ALWAYS	125 64%	2073 60%	24 71%~	28 57%~	40 66%	33 65%	84 66%	~	~	~	~	~	20 51%~	103 69%~	117 65%~	4 44%~	86 65%	39 63%
#ALWAYS + USUALLY (NET)	179 92%	3092 89%	30 88%~	45 92%~	57 93%	47 92%	120 94%	~	~	~	~	~	34 87%~	142 95%~	169 94%~	6 67%~	122 92%	57 92%
TOP BOX SCORE	125 64%	2073 60%	24 71%~	28 57%~	40 66%	33 65%	84 66%	~	~	~	~	~	20 51%~	103 69%~	117 65%~	4 44%~	86 65%	39 63%
NOT ANSWERED	5	80	1	2	2		2						1	2	3		5	
VALID CASES	195	3460	34	49	61	51	127						39	150	180	9	133	62
NUMBER OF RESPONDENTS	200	3540	35	51	63	51	129						40	152	183	9	138	62
	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		
	WORA 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	223 80%	3801 75%*	15 34%~	57 86%	80 88%*	71 91%*	148 82%	~	~	~	~	~	~	36 63%*	178 84%*	207 80%~	8 80%~	154 75%*	69 93%
NO	56 20%	1296 25%*	29 66%~	9 14%	11 12%*	7 9%*	32 18%	~	~	~	~	~	~	21 37%*	34 16%*	53 20%~	2 20%~	51 25%*	5 7%
NOT ANSWERED	8	212		6	1	1	1								1	1		8	
VALID CASES	279	5097	44	66	91	78	180							57	212	260	10	205	74
NUMBER OF RESPONDENTS	287 100%	5309 100%	44 100%	72 100%	92 100%	79 100%	181 100%							57 100%	213 100%	261 100%	10 100%	213 100%	74 100%

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		
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND##	AMER ALSK##	OTHMUL-TI##	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
Q17 YES	20 9%	409 11%		6 ~ 11%	5 6%	9 13%	12 8%	~	~	~	~	~	5 ~ 14%	14 8%	18 9%	1 13%		9 6%*	11 16%
NO	196 91%	3206 89%	14 100%	51 ~ 89%	73 94%	58 87%	132 92%	~	~	~	~	~	31 ~ 86%	158 92%	183 91%	7 88%		139 94%*	57 84%
NOT ANSWERED	7	186	1		2	4	4							6	6			6	1
VALID CASES	216	3615	14	57	78	67	144						36	172	201	8		148	68
NUMBER OF RESPONDENTS	223	3801	15	57	80	71	148						36	178	207	8		154	69
	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		
	WORA 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	17 85%	369 92%	6 ~100%	4 ~80%	7 ~78%	11 92%	11 92%	~	~	~	~	~	~	5 ~100%	12 86%	16 89%	1 100%	7 78%	10 91%
NO	3 15%	30 8%	~	~	1 20%	2 22%	1 8%	~	~	~	~	~	~	2 ~14%	2 11%	2 11%	2 22%	1 9%	
NOT ANSWERED		10																	
VALID CASES	20	399	6	5	9	12	12							5	14	18	1	9	11
NUMBER OF RESPONDENTS	20	409	6	5	9	12	12							5	14	18	1	9	11
	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		
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV ILND ##	AMER ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC
Q19 YES	16 6%	214 4%	5 11%~	6 9%	1 1%*	4 5%	10 6%	~	~	~	~	~	~	5 9%	10 5%	12 5%~	2 20%~	9 4%	7 9%
NO	261 94%	4864 96%	39 89%~	58 91%	90 99%*	74 95%	169 94%	~	~	~	~	~	~	52 91%	201 95%	247 95%~	8 80%~	194 96%	67 91%
NOT ANSWERED	10	231		8	1	1	2								2	2			10
VALID CASES	277	5078	44	64	91	78	179							57	211	259	10	203	74
NUMBER OF RESPONDENTS	287	5309	44	72	92	79	181							57	213	261	10	213	74
	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	
	WORA 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
Q20 NEVER	2 13%	21 10%~	~	1 17%~	~	1 33%~	1 10%~	~	~	~	~	~	1 20%~	1 10%~	1 8%~	1 50%~	1 13%~	1 14%~
SOMETIMES		30 14%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
USUALLY		46 22%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
ALWAYS	13 87%	113 54%~	5 100%~	5 83%~	1 100%~	2 67%~	9 90%~	~	~	~	~	~	4 80%~	9 90%~	11 92%~	1 50%~	7 88%~	6 86%~
#ALWAYS + USUALLY (NET)	13 87%	159 76%~	5 100%~	5 83%~	1 100%~	2 67%~	9 90%~	~	~	~	~	~	4 80%~	9 90%~	11 92%~	1 50%~	7 88%~	6 86%~
TOP BOX SCORE	13 87%	113 54%~	5 100%~	5 83%~	1 100%~	2 67%~	9 90%~	~	~	~	~	~	4 80%~	9 90%~	11 92%~	1 50%~	7 88%~	6 86%~
NOT ANSWERED	1	4				1												1
VALID CASES	15	210	5	6	1	3	10						5	10	12	2	8	7
NUMBER OF RESPONDENTS	16	214	5	6	1	4	10						5	10	12	2	9	7
	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			
	WORA 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		
Q21 #YES	14 93%	170 83%	4 80%	6 100%	1 100%	3 100%	9 90%	~	~	~	~	~	~	5 100%	9 90%	11 92%	2 100%	7 88%	7 100%	
NO	1 7%	36 17%	1 20%	~	~	~	1 10%	~	~	~	~	~	~	1 10%	1 8%	1 8%	1 13%	1 13%	~	
NOT ANSWERED	1	8				1												1		
VALID CASES	15	206	5	6	1	3	10							5	10	12	2	8	7	
NUMBER OF RESPONDENTS	16	214	5	6	1	4	10							5	10	12	2	9	7	
	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			
	WORA 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
Q22 YES	29 10%	522 10%	3 7%	9 14%	7 8%	10 13%	17 9%	~	~	~	~	~	~	6 11%	22 10%	24 9%	3 30%	~	9 4%*	20 27%
NO	248 90%	4555 90%	41 93%	56 86%	84 92%	67 87%	163 91%	~	~	~	~	~	~	51 89%	190 90%	236 91%	7 70%	~	194 96%*	54 73%
NOT ANSWERED	10	232		7	1	2	1								1	1			10	
VALID CASES	277	5077	44	65	91	77	180							57	212	260	10		203	74
NUMBER OF RESPONDENTS	287	5309	44	72	92	79	181							57	213	261	10		213	74
	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	
	WORA 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 & POOR	FAIR & POOR	NO CCC	CCC
Q23 NEVER	2 8%	63 13%	~	1 13%	~	1 13%	2 13%	~	~	~	~	~	~	2 10%	1 5%	~	~	2 11%
SOMETIMES	3 12%	78 16%	~	1 13%	2 29%	~	~	~	~	~	~	~	1 20%	2 10%	2 9%	1 50%	1 13%	2 11%
USUALLY	4 15%	122 24%	~	~	~	4 50%	2 13%	~	~	~	~	~	1 20%	2 10%	3 14%	~	2 25%	2 11%
ALWAYS	17 65%	236 47%	3 100%	6 75%	5 71%	3 38%	11 73%	~	~	~	~	~	3 60%	14 70%	16 73%	1 50%	5 63%	12 67%
#ALWAYS + USUALLY (NET)	21 81%	358 72%	3 100%	6 75%	5 71%	7 88%	13 87%	~	~	~	~	~	4 80%	16 80%	19 86%	1 50%	7 88%	14 78%
TOP BOX SCORE	17 65%	236 47%	3 100%	6 75%	5 71%	3 38%	11 73%	~	~	~	~	~	3 60%	14 70%	16 73%	1 50%	5 63%	12 67%
NOT ANSWERED	3	23	~	1	~	2	2	~	~	~	~	~	1	2	2	1	1	2
VALID CASES	26	499	3	8	7	8	15	~	~	~	~	~	5	20	22	2	8	18
NUMBER OF RESPONDENTS	29	522	3	9	7	10	17	~	~	~	~	~	6	22	24	3	9	20
	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		
	WORA 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
Q24 #YES	22 79%	347 69%	3 100%	6 67%	4 57%	9 100%	12 75%	~	~	~	~	~	~	6 100%	15 71%	18 75%	2 100%	7 78%	15 79%
NO	6 21%	153 31%	~	3 33%	3 43%	~	4 25%	~	~	~	~	~	~	6 29%	6 25%	6 25%	6 25%	2 22%	4 21%
NOT ANSWERED	1	22				1	1							1		1			1
VALID CASES	28	500	3	9	7	9	16							6	21	24	2	9	19
NUMBER OF RESPONDENTS	29	522	3	9	7	10	17							6	22	24	3	9	20
	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		
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLK OR AFR-##	AS-IAN	NATV ILND	AMER ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q25 YES	41 15%	769 15%	1 2%	12 19%	12 13%	16 21%	25 14%	~	~	~	~	~	~	8 14%	31 15%	35 13%	5 56%	11 5%*	30 42%
NO	235 85%	4303 85%	43 98%	52 81%	79 87%	61 79%	154 86%	~	~	~	~	~	~	49 86%	180 85%	225 87%	4 44%	193 95%*	42 58%
NOT ANSWERED	11	237		8	1	2	2								2	1	1	9	2
VALID CASES	276	5072	44	64	91	77	179							57	211	260	9	204	72
NUMBER OF RESPONDENTS	287	5309	44	72	92	79	181							57	213	261	10	213	74
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALS K ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q26 NEVER	3 8%	94 13%	~	1 8%	1 8%	1 7%	3 12%	~	~	~	~	~	~	3 10%	3 9%	~	~	3 10%	
SOMETIMES	7 18%	122 16%	~	3 25%	2 17%	2 13%	4 16%	~	~	~	~	~	3 38%	4 13%	5 15%	2 40%	3 30%	4 13%	
USUALLY	9 23%	178 24%	~	3 25%	~	6 40%	5 20%	~	~	~	~	~	~	8 26%	8 24%	~	~	2 20%	7 23%
ALWAYS	21 53%	353 47%	1 100%	5 42%	9 75%	6 40%	13 52%	~	~	~	~	~	5 63%	16 52%	18 53%	3 60%	5 50%	16 53%	
#ALWAYS + USUALLY (NET)	30 75%	531 71%	1 100%	8 67%	9 75%	12 80%	18 72%	~	~	~	~	~	5 63%	24 77%	26 76%	3 60%	7 70%	23 77%	
TOP BOX SCORE	21 53%	353 47%	1 100%	5 42%	9 75%	6 40%	13 52%	~	~	~	~	~	5 63%	16 52%	18 53%	3 60%	5 50%	16 53%	
NOT ANSWERED	1	22				1									1		1		
VALID CASES	40	747	1	12	12	15	25						8	31	34	5	10	30	
NUMBER OF RESPONDENTS	41	769	1	12	12	16	25						8	31	35	5	11	30	
	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		
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN##	NATV ILND##	AMER IND/ALSK##	OTHR##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q27 #YES	23 58%	428 57%	100%	27%	67%	69%	15 60%	~	~	~	~	~	~	7 88%	16 53%	17 50%	5 100%	6 55%	17 59%
NO	17 43%	317 43%	~	73%	33%	31%	10 40%	~	~	~	~	~	~	1 13%	14 47%	17 50%	~	5 45%	12 41%
NOT ANSWERED	1	24		1											1	1			1
VALID CASES	40	745	1	11	12	16	25							8	30	34	5	11	29
NUMBER OF RESPONDENTS	41	769	1	12	12	16	25							8	31	35	5	11	30
	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			
	WORA 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
Q28 YES	55 20%	1124 22%	9 20%	14 23%	13 14%	19 25%	32 18%	~	~	~	~	~	~	12 22%	42 20%	47 18%	7 78%	~	25 13%*	30 42%
NO	217 80%	3915 78%	35 80%	48 77%	78 86%	56 75%	146 82%	~	~	~	~	~	~	43 78%	167 80%	209 82%	2 22%	~	175 88%*	42 58%
NOT ANSWERED	15	270		10	1	4	3							2	4	5	1		13	2
VALID CASES	272	5039	44	62	91	75	178							55	209	256	9		200	72
NUMBER OF RESPONDENTS	287	5309	44	72	92	79	181							57	213	261	10		213	74
	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			
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS- IAN ##	NATV ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q29 #YES	36 67%	673 62%	7 78%~	9 64%~	8 67%~	12 63%~	22 71%~	~	~	~	~	~	~	8 67%~	27 66%~	29 63%~	6 86%~	14 58%~	22 73%
NO	18 33%	416 38%	2 22%~	5 36%~	4 33%~	7 37%~	9 29%~	~	~	~	~	~	~	4 33%~	14 34%~	17 37%~	1 14%~	10 42%~	8 27%
NOT ANSWERED	1	35			1		1							1	1	1			
VALID CASES	54	1089	9	14	12	19	31							12	41	46	7	24	30
NUMBER OF RESPONDENTS	55	1124	9	14	13	19	32							12	42	47	7	25	30
	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	
	WORA 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
Q30 YES	252 94%	4437 89%*	41 95%~	63 98%*	79 91%	69 92%	169 96%	~	~	~	~	~	~	49 89%	197 95%	238 94%~	8 89%~	182 92%	70 97%
NO	17 6%	550 11%*	2 5%~	1 2%*	8 9%	6 8%	7 4%	~	~	~	~	~	~	6 11%	10 5%	15 6%~	1 11%~	15 8%	2 3%
NOT ANSWERED	18	322	1	8	5	4	5							2	6	8	1	16	2
VALID CASES	269	4987	43	64	87	75	176							55	207	253	9	197	72
NUMBER OF RESPONDENTS	287	5309	44	72	92	79	181							57	213	261	10	213	74
	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		
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND ##	AMER PAC ALSK NATV ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q31 NONE	60 24%	1154 27%	4 10%	15 25%	23 29%	18 26%	42 26%	~	~	~	~	~	~	10 21%	49 26%	59 25%	~	50 28%*	10 14%
1 TIME	89 36%	1496 35%	15 38%	20 33%	34 44%	20 29%	58 35%	~	~	~	~	~	~	18 38%	68 35%	85 37%	3 38%	65 37%	24 34%
2	51 21%	893 21%	8 20%	14 23%	14 18%	15 22%	30 18%	~	~	~	~	~	~	12 25%	38 20%	46 20%	3 38%	39 22%	12 17%
3	26 11%	389 9%	7 18%	7 12%	5 6%	7 10%	20 12%	~	~	~	~	~	~	4 8%	22 11%	26 11%	~	14 8%	12 17%
4	7 3%	157 4%	~	1 2%	1 1%	5 7%	6 4%	~	~	~	~	~	~	1 2%	6 3%	6 3%	1 13%	1 0.6%*	6 9%
5 TO 9	11 4%	138 3%	4 10%	3 5%	1 1%*	3 4%	6 4%	~	~	~	~	~	~	3 6%	7 4%	9 4%	~	6 3%	5 7%
10 OR MORE TIMES	2 0.8%	34 0.8%	2 5%	~	~	~	2 1%	~	~	~	~	~	~	~	2 1%	1 0.4%	1 13%	1 0.6%	1 1%
NOT ANSWERED	6	176	1	3	1	1	5							1	5	6		6	
VALID CASES	246	4261	40	60	78	68	164							48	192	232	8	176	70
NUMBER OF RESPONDENTS	252	4437	41	63	79	69	169							49	197	238	8	182	70
	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				
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	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	
Q31A ALWAYS	2 1%	65 2%	~	~	2 4%	~	~	~	~	~	~	~	~	1 3%	1 0.7%	2 1%	~	~	1 0.8%	1 2%
USUALLY	1 0.5%	49 2%	1 3%	~	~	~	~	~	~	~	~	~	~	1 3%	~	1 0.6%	~	~	1 0.8%	~
SOMETIMES	6 3%	202 7%*	~	2 5%	2 4%	2 4%	~	~	~	~	~	~	~	6 16%	~	5 3%	1 13%	~	5 4%	1 2%
NEVER	173 95%	2765 90%*	35 97%	41 95%	49 92%	48 96%	120 100%	~	~	~	~	~	~	29 78%	140 99%	162 95%	7 88%	~	116 94%	57 97%
#NEVER + SOMETIMES (NET)	179 98%	2967 96%*	35 97%	43 100%	51 96%	50 100%	120 100%	~	~	~	~	~	~	35 95%	140 99%	167 98%	8 100%	~	121 98%	58 98%
TOP BOX SCORE	173 95%	2765 90%*	35 97%	41 95%	49 92%	48 96%	120 100%	~	~	~	~	~	~	29 78%	140 99%	162 95%	7 88%	~	116 94%	57 97%
NOT ANSWERED	4	26	~	2	2	~	2	~	~	~	~	~	~	1	2	3	~	~	3	1
VALID CASES	182	3081	36	43	53	50	120	~	~	~	~	~	~	37	141	170	8	~	123	59
NUMBER OF RESPONDENTS	186 100%	3107 100%	36 100%	45 100%	55 100%	50 100%	122 100%	~	~	~	~	~	~	38 100%	143 100%	173 100%	8 100%	~	126 100%	60 100%

[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		
	WORA 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	3 2%	64 2%	~	2%~	~	4%	0.8%	~	~	~	~	~	1 3%	1 0.7%	2 1%	1 13%	3 2%	2 2%
SOMETIMES	3 2%	100 3%	~	2%~	2%	2%	~	~	~	~	~	~	3 8%	~	2 1%	1 13%	2 2%	1 2%
USUALLY	23 13%	428 14%	3 8%	6 14%	10 19%	4 8%	16 13%	~	~	~	~	~	6 16%	17 12%	22 13%	1 13%	14 11%	9 15%
ALWAYS	155 84%	2486 81%	33 92%	36 82%	43 80%	43 86%	104 86%	~	~	~	~	~	28 74%	124 87%	146 85%	6 75%	105 85%	50 83%
#ALWAYS + USUALLY (NET)	178 97%	2914 95%	36 100%	42 95%	53 98%	47 94%	120 99%*	~	~	~	~	~	34 89%	141 99%	168 98%	7 88%	119 96%	59 98%
TOP BOX SCORE	155 84%	2486 81%	33 92%	36 82%	43 80%	43 86%	104 86%	~	~	~	~	~	28 74%	124 87%	146 85%	6 75%	105 85%	50 83%
NOT ANSWERED	2	29	1	1			1						1	1			2	
VALID CASES	184	3078	36	44	54	50	121						38	142	172	8	124	60
NUMBER OF RESPONDENTS	186 100%	3107 100%	36 100%	45 100%	55 100%	50 100%	122 100%						38 100%	143 100%	173 100%	8 100%	126 100%	60 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q33 NEVER	1 0.5%	29 0.9%	~	~	~	2%	~	~	~	~	~	~	1 3%	1 0.6%	1 0.8%	~	~	~
SOMETIMES	8 4%	120 4%	1 3%	1 2%	3 6%	3 6%	3 2%	~	~	~	~	~	3 8%	4 3%	7 4%	1 13%	4 3%	4 7%
USUALLY	26 14%	422 14%	6 17%	11 25%	5 9%	4 8%	18 15%	~	~	~	~	~	5 13%	21 15%	24 14%	2 25%	15 12%	11 18%
ALWAYS	149 81%	2505 81%	29 81%	32 73%	46 85%	42 84%	100 83%	~	~	~	~	~	29 76%	117 82%	140 81%	5 63%	104 84%	45 75%
#ALWAYS + USUALLY (NET)	175 95%	2927 95%	35 97%	43 98%	51 94%	46 92%	118 98%	~	~	~	~	~	34 89%	138 97%	164 95%	7 88%	119 96%	56 93%
TOP BOX SCORE	149 81%	2505 81%	29 81%	32 73%	46 85%	42 84%	100 83%	~	~	~	~	~	29 76%	117 82%	140 81%	5 63%	104 84%	45 75%
NOT ANSWERED	2	31	1	1			1						1	1		2		
VALID CASES	184	3076	36	44	54	50	121						38	142	172	8	124	60
NUMBER OF RESPONDENTS	186	3107	36	45	55	50	122						38	143	173	8	126	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER		
	WORA 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 & FAIR POOR	NO CCC	CCC	
Q34 NEVER		30 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	8 4%	85 3%	~	2 5%	3 6%	3 6%	3 2%	~	~	~	~	~	3 8%	4 3%	7 4%	1 13%	4 3%	4 7%
USUALLY	21 11%	368 12%	5 14%	7 16%	6 11%	3 6%	16 13%	~	~	~	~	~	3 8%	18 13%	20 12%	1 13%	15 12%	6 10%
ALWAYS	155 84%	2589 84%	31 86%	35 80%	45 83%	44 88%	102 84%	~	~	~	~	~	32 84%	120 85%	145 84%	6 75%	105 85%	50 83%
#ALWAYS + USUALLY (NET)	176 96%	2957 96%	36 100%	42 95%	51 94%	47 94%	118 98%	~	~	~	~	~	35 92%	138 97%	165 96%	7 88%	120 97%	56 93%
TOP BOX SCORE	155 84%	2589 84%	31 86%	35 80%	45 83%	44 88%	102 84%	~	~	~	~	~	32 84%	120 85%	145 84%	6 75%	105 85%	50 83%
NOT ANSWERED	2	35	1	1			1							1	1		2	
VALID CASES	184	3072	36	44	54	50	121						38	142	172	8	124	60
NUMBER OF RESPONDENTS	186	3107	36	45	55	50	122						38	143	173	8	126	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	WORA 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
Q35 YES	121 66%	2086 68%	1 3%	27 61%	45 83%*	48 98%	80 67%	~	~	~	~	~	~	23 61%	95 67%	112 65%	5 63%	77 63%	44 73%
NO	62 34%	964 32%	35 97%	17 39%	9 17%*	1 2%	40 33%	~	~	~	~	~	~	15 39%	46 33%	59 35%	3 38%	46 37%	16 27%
NOT ANSWERED	3	57		1	1	1	2								2	2		3	
VALID CASES	183	3050	36	44	54	49	120							38	141	171	8	123	60
NUMBER OF RESPONDENTS	186 100%	3107 100%	36 100%	45 100%	55 100%	50 100%	122 100%							38 100%	143 100%	173 100%	8 100%	126 100%	60 100%

[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	
	WORA 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
Q36 NEVER		25 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	6 5%	112 5%	~ 12%	~ 2%	~ 4%	~ 6%	~	~	~	~	~	~ 4%	~ 5%	~ 5%	~	~ 4%	~ 7%
USUALLY	20 17%	405 20%	~ 23%	~ 18%	~ 13%	~ 17%	~	~	~	~	~	~ 13%	~ 18%	~ 18%	~	~ 17%	~ 16%
ALWAYS	93 78%	1518 74%	100% 65%	~ 80%	~ 83%	~ 77%	~	~	~	~	~	~ 83%	~ 76%	~ 76%	~ 100%	~ 79%	~ 77%
#ALWAYS + USUALLY (NET)	113 95%	1923 93%	100% 88%	~ 98%	~ 96%	~ 94%	~	~	~	~	~	~ 96%	~ 95%	~ 95%	~ 100%	~ 96%	~ 93%
TOP BOX SCORE	93 78%	1518 74%	100% 65%	~ 80%	~ 83%	~ 77%	~	~	~	~	~	~ 83%	~ 76%	~ 76%	~ 100%	~ 79%	~ 77%
NOT ANSWERED		2		1	1	2							2	2		2	
VALID CASES	119	2060	1	26	44	48	78					23	93	110	5	75	44
NUMBER OF RESPONDENTS	121 100%	2086 100%	1 100%	27 100%	45 100%	48 100%	80 100%					23 100%	95 100%	112 100%	5 100%	77 100%	44 100%

[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 OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WORA 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
Q37 NEVER	2 1%	72 2%	~	~	2%	2%~0.8%	~	~	~	~	~	~	1 3%	1 0.7%	1 0.6%	1 13%	2 2%	
SOMETIMES	14 8%	238 8%	4 11%	5 11%	3 6%	2 4%	7 6%	~	~	~	~	~	5 13%	8 6%	13 8%	1 13%	8 7%	6 10%
USUALLY	31 17%	692 23%*	8 22%	9 20%	9 17%	5 10%	22 18%	~	~	~	~	~	7 18%	24 17%	30 18%	~	21 17%	10 17%
ALWAYS	136 74%	2035 67%*	24 67%	30 68%	41 76%	41 84%	91 75%	~	~	~	~	~	25 66%	108 77%	127 74%	6 75%	92 75%	44 73%
#ALWAYS + USUALLY (NET)	167 91%	2727 90%	32 89%	39 89%	50 93%	46 94%	113 93%	~	~	~	~	~	32 84%	132 94%	157 92%	6 75%	113 92%	54 90%
TOP BOX SCORE	136 74%	2035 67%*	24 67%	30 68%	41 76%	41 84%	91 75%	~	~	~	~	~	25 66%	108 77%	127 74%	6 75%	92 75%	44 73%
NOT ANSWERED	3	70		1	1	1	1							2	2		3	
VALID CASES	183	3037	36	44	54	49	121						38	141	171	8	123	60
NUMBER OF RESPONDENTS	186	3107	36	45	55	50	122						38	143	173	8	126	60
	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		
	WORA 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	
Q38 #YES	162 89%	2662 87%	34 94%~	38 88%~	48 91%	42 84%	106 88%	~	~	~	~	~	~	34 92%~	124 88%~	151 89%~	7 88%~	108 89%	54 90%
NO	20 11%	384 13%	2 6%~	5 12%~	5 9%	8 16%	15 12%	~	~	~	~	~	~	3 8%~	17 12%~	19 11%~	1 13%~	14 11%	6 10%
NOT ANSWERED	4	61		2	2		1							1	2	3		4	
VALID CASES	182	3046	36	43	53	50	121							37	141	170	8	122	60
NUMBER OF RESPONDENTS	186	3107	36	45	55	50	122							38	143	173	8	126	60
	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		
	WORA 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
Q39 YES	64 35%	1240 41%	12 33%~	14 32%~	16 30%	22 46%~	40 33%	~	~	~	~	~	~	13 34%~	50 35%~	55 32%~	7 88%~	32 26%*	32 53%
NO	118 65%	1789 59%	24 67%~	30 68%~	38 70%	26 54%~	80 67%	~	~	~	~	~	~	25 66%~	91 65%~	116 68%~	1 13%~	90 74%*	28 47%
NOT ANSWERED	4	78		1	1	2	2								2	2			4
VALID CASES	182	3029	36	44	54	48	120							38	141	171	8	122	60
NUMBER OF RESPONDENTS	186	3107	36	45	55	50	122							38	143	173	8	126	60
	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			
	WORA 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	
Q40 NEVER	3 5%	81 7%	1 8%~	~	1 6%~	1 5%~	2 5%~	~	~	~	~	~	~	1 8%~	2 4%~	3 5%~	~	3 9%~	
SOMETIMES	7 11%	139 12%	~	1 7%~	3 19%~	3 14%~	6 15%~	~	~	~	~	~	~	1 8%~	6 12%~	5 9%~	2 29%~	3 9%~	4 13%
USUALLY	13 20%	342 28%	2 17%~	1 7%~	2 13%~	8 36%~	5 13%~	~	~	~	~	~	~	5 38%~	7 14%~	10 18%~	3 43%~	3 9%~	10 31%
ALWAYS	41 64%	645 53%	9 75%~	12 86%~	10 63%~	10 45%~	27 68%~	~	~	~	~	~	~	6 46%~	35 70%~	37 67%~	2 29%~	23 72%~	18 56%
#ALWAYS + USUALLY (NET)	54 84%	987 82%	11 92%~	13 93%~	12 75%~	18 82%~	32 80%~	~	~	~	~	~	~	11 85%~	42 84%~	47 85%~	5 71%~	26 81%~	28 88%
TOP BOX SCORE	41 64%	645 53%	9 75%~	12 86%~	10 63%~	10 45%~	27 68%~	~	~	~	~	~	~	6 46%~	35 70%~	37 67%~	2 29%~	23 72%~	18 56%
NOT ANSWERED		33																	
VALID CASES	64	1207	12	14	16	22	40							13	50	55	7	32	32
NUMBER OF RESPONDENTS	64 100%	1240 100%	12 100%	14 100%	16 100%	22 100%	40 100%							13 100%	50 100%	55 100%	7 100%	32 100%	32 100%

[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			
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-##	AS-IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	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 2%	~	~	~	~	~	~	~	1 2%	~	2 0.9%~	~	1 0.6%	1 1%
04	1 0.4%	19 0.4%	~	~	1 1%	~	1 0.6%~	~	~	~	~	~	~	1 0.5%~	~	1 0.4%~	~	~	1 1%
05	13 5%	105 2%*	1 3%~	3 5%	4 5%	5 8%	7 4%	~	~	~	~	~	~	4 8%~	9 5%	12 5%~	1 13%~	9 5%	4 6%
06	4 2%	97 2%	~	~	3 4%	1 2%	3 2%	~	~	~	~	~	~	~	4 2%~	4 2%~	~	3 2%	1 1%
07	14 6%	261 6%	3 8%~	2 3%	5 6%	4 6%	11 7%	~	~	~	~	~	~	1 2%~	13 7%	13 6%~	1 13%~	9 5%	5 7%
08	39 16%	672 16%	7 18%~	14 23%	10 13%	8 12%	25 15%	~	~	~	~	~	~	7 14%~	31 16%	36 16%~	2 25%~	29 17%	10 14%
09	38 16%	839 20%	6 15%~	7 11%	11 14%	14 22%	25 15%	~	~	~	~	~	~	8 16%~	30 16%	37 16%~	1 13%~	27 16%	11 16%
BEST PERSONAL DOCTOR POSSIBLE	132 54%	2208 52%	23 58%~	34 56%	43 56%	32 49%	91 56%	~	~	~	~	~	~	28 57%~	102 54%	127 55%~	3 38%~	96 55%	36 52%
#8-10 (NET)	209 86%	3719 88%	36 90%~	55 90%	64 83%	54 83%	141 87%	~	~	~	~	~	~	43 88%~	163 86%	200 86%~	6 75%~	152 87%	57 83%

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		
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
9-10 (NET)	170 70%	3047 72%	29 73%~	41 67%	54 70%	46 71%	116 71%	~	~	~	~	~	~	36 73%~	132 69%	164 71%~	4 50%~	123 71%	47 68%
NOT ANSWERED	9	191	1	2	2	4	6								7	6		8	1
VALID CASES	243	4246	40	61	77	65	163							49	190	232	8	174	69
NUMBER OF RESPONDENTS	252 100%	4437 100%	41 100%	63 100%	79 100%	69 100%	169 100%							49 100%	197 100%	238 100%	8 100%	182 100%	70 100%
MEAN	8.93	8.98	9.15	8.97	8.91	8.80	9.01							8.94	8.96	8.95	8.38	8.99	8.80
p stat_(*=Sig @ p<=.05)		.643	~.846	.864	.437	.257	~	~	~	~	~	~	~	~.692		~	~	~.413	

[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		
	WORA 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	76 31%	1096 26%	8 21%	18 30%	26 34%	24 36%	50 30%	~	~	~	~	~	~	14 29%	61 32%	69 30%	6 75%	23 13%*	53 77%
NO	168 69%	3160 74%	31 79%	43 70%	51 66%	43 64%	114 70%	~	~	~	~	~	~	34 71%	131 68%	163 70%	2 25%	152 87%*	16 23%
NOT ANSWERED	8	181	2	2	2	2	5							1	5	6		7	1
VALID CASES	244	4256	39	61	77	67	164							48	192	232	8	175	69
NUMBER OF RESPONDENTS	252 100%	4437 100%	41 100%	63 100%	79 100%	69 100%	169 100%							49 100%	197 100%	238 100%	8 100%	182 100%	70 100%

[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			
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLK 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
Q43 #YES	68 93%	955 90%	8 100%	17 100%	24 92%	19 86%	46 94%	~	~	~	~	~	~	12 92%	55 93%	63 95%	4 67%	21 95%	47 92%	
NO	5 7%	109 10%	~	~	2 8%	3 14%	3 6%	~	~	~	~	~	~	1 8%	4 7%	3 5%	2 33%	1 5%	4 8%	
NOT ANSWERED	3	32		1		2	1							1	2	3			1	2
VALID CASES	73	1064	8	17	26	22	49							13	59	66	6	22	51	
NUMBER OF RESPONDENTS	76	1096	8	18	26	24	50							14	61	69	6	23	53	
	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			
	WORA 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	GOOD	FAIR	NO CCC	CCC
Q44 #YES	66 92%	906 85%	8 100%	18 100%	23 88%	17 85%	44 92%	~	~	~	~	~	~	12 92%	53 91%	61 94%	4 67%	20 91%	46 92%	
NO	6 8%	155 15%	~	~	3 12%	3 15%	4 8%	~	~	~	~	~	~	1 8%	5 9%	4 6%	2 33%	2 9%	4 8%	
NOT ANSWERED	4	35				4	2							1	3	4			1	3
VALID CASES	72	1061	8	18	26	20	48							13	58	65	6	22	50	
NUMBER OF RESPONDENTS	76	1096	8	18	26	24	50							14	61	69	6	23	53	
	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	
	WORA 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	43 16%	856 17%	6 14%	11 17%	9 10%	17 22%	27 15%	~	~	~	~	~	7 13%	36 17%	38 15%	5 50%	15 8%*	28 38%
NO	230 84%	4125 83%	37 86%	53 83%	80 90%	60 78%	154 85%	~	~	~	~	~	49 88%	177 83%	222 85%	5 50%	185 93%*	45 62%
NOT ANSWERED	14	328	1	8	3	2							1		1		13	1
VALID CASES	273	4981	43	64	89	77	181						56	213	260	10	200	73
NUMBER OF RESPONDENTS	287 100%	5309 100%	44 100%	72 100%	92 100%	79 100%	181 100%						57 100%	213 100%	261 100%	10 100%	213 100%	74 100%

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			
	WORA 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	
Q46 NEVER	3 7%	59 7%	~	1 9%	1 11%	1 6%	2 7%	~	~	~	~	~	~	1 14%	2 6%	2 5%	1 20%	1 7%	2 7%
SOMETIMES	5 12%	127 15%	~	4 36%	~	1 6%	2 7%	~	~	~	~	~	~	3 43%	2 6%	4 11%	1 20%	2 13%	3 11%
USUALLY	8 19%	239 29%	2 33%	~	2 22%	4 24%	5 19%	~	~	~	~	~	~	1 14%	7 19%	7 18%	1 20%	3 20%	5 18%
ALWAYS	27 63%	410 49%	4 67%	6 55%	6 67%	11 65%	18 67%	~	~	~	~	~	~	2 29%	25 69%	25 66%	2 40%	9 60%	18 64%
#ALWAYS + USUALLY (NET)	35 81%	649 78%	6 100%	6 55%	8 89%	15 88%	23 85%	~	~	~	~	~	~	3 43%	32 89%	32 84%	3 60%	12 80%	23 82%
TOP BOX SCORE	27 63%	410 49%	4 67%	6 55%	6 67%	11 65%	18 67%	~	~	~	~	~	~	2 29%	25 69%	25 66%	2 40%	9 60%	18 64%
NOT ANSWERED		21																	
VALID CASES	43	835	6	11	9	17	27							7	36	38	5	15	28
NUMBER OF RESPONDENTS	43 100%	856 100%	6 100%	11 100%	9 100%	17 100%	27 100%							7 100%	36 100%	38 100%	5 100%	15 100%	28 100%

[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		
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND NATV ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q47 NONE	4 10%	48 6%	~	1 9%	2 22%	1 6%	2 8%	~	~	~	~	~	~	1 14%	3 9%	2 5%	2 40%	1 7%	3 11%
1 SPECIALIST	24 57%	509 61%	3 60%	6 55%	4 44%	11 65%	17 65%	~	~	~	~	~	~	3 43%	21 60%	23 62%	1 20%	10 71%	14 50%
2	9 21%	170 20%	~	4 36%	3 33%	2 12%	4 15%	~	~	~	~	~	~	2 29%	7 20%	9 24%	~	2 14%	7 25%
3	1 2%	53 6%	~	~	~	1 6%	1 4%	~	~	~	~	~	~	~	1 3%	~	1 20%	~	1 4%
4	2 5%	27 3%	1 20%	~	~	1 6%	1 4%	~	~	~	~	~	~	~	2 6%	2 5%	~	1 7%	1 4%
5 OR MORE SPECIALISTS	2 5%	25 3%	1 20%	~	~	1 6%	1 4%	~	~	~	~	~	~	1 14%	1 3%	1 3%	1 20%	~	2 7%
NOT ANSWERED	1	24	1				1							1	1			1	
VALID CASES	42	832	5	11	9	17	26							7	35	37	5	14	28
NUMBER OF RESPONDENTS	43	856	6	11	9	17	27							7	36	38	5	15	28
	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	
	WORA 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		7 0.9%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01		1 0.1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02		5 0.6%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
03	1 3%	7 0.9%~	~	~	~	6%~	1 4%~	~	~	~	~	~	~	1 3%~	1 3%~	~	~	1 4%
04		5 0.6%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
05	1 3%	20 3%~	~	~	~	6%~	1 4%~	~	~	~	~	~	~	1 3%~	1 3%~	~	~	1 4%
06		24 3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
07	1 3%	51 7%~	~	1 10%~	~	~	1 4%~	~	~	~	~	~	~	1 3%~	1 3%~	~	~	1 4%
08	4 11%	135 17%~	~	2 20%~	~	2 13%~	1 4%~	~	~	~	~	~	3 50%~	1 3%~	3 9%~	1 33%~	~	4 16%
09	11 29%	171 22%~	2 40%~	2 20%~	3 43%~	4 25%~	6 25%~	~	~	~	~	~	1 17%~	10 31%~	11 31%~	~	5 38%~	6 24%
BEST SPECIALIST POSSIBLE	20 53%	353 45%~	3 60%~	5 50%~	4 57%~	8 50%~	14 58%~	~	~	~	~	~	2 33%~	18 56%~	18 51%~	2 67%~	8 62%~	12 48%

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	
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
#8-10 (NET)	35 92%	659 85%	5 100%	9 90%	7 100%	14 88%	21 88%	~	~	~	~	~	~	~	~	~	~
9-10 (NET)	31 82%	524 67%	5 100%	7 70%	7 100%	12 75%	20 83%	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		5															
VALID CASES	38	779	5	10	7	16	24					6	32	35	3	13	25
NUMBER OF RESPONDENTS	38	784	5	10	7	16	24					6	32	35	3	13	25
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%
MEAN	9.11	8.73	9.60	9.10	9.57	8.75	9.04					8.83	9.16	9.09	9.33	9.62	8.84
p_stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	WORA 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
Q49 YES	65 24%	1241 25%	9 21%	20 32%	21 24%	15 20%	40 23%	~	~	~	~	~	~	17 30%	48 23%	58 23%	6 60%	44 22%	21 30%
NO	204 76%	3699 75%	34 79%	43 68%	66 76%	61 80%	137 77%	~	~	~	~	~	~	40 70%	160 77%	198 77%	4 40%	154 78%	50 70%
NOT ANSWERED	18	369	1	9	5	3	4								5	5		15	3
VALID CASES	269	4940	43	63	87	76	177							57	208	256	10	198	71
NUMBER OF RESPONDENTS	287	5309	44	72	92	79	181							57	213	261	10	213	74
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	WORA 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	3 5%	36 3%		2 ~ 10%	1 5%		3 8%	~	~	~	~	~	~	~	3 7%	3 5%		3 7%	
SOMETIMES	13 21%	228 19%	2 22%	4 20%	4 20%	3 21%	6 15%	~	~	~	~	~	~	5 29%	8 17%	11 20%	2 33%	8 19%	5 24%
USUALLY	15 24%	350 29%	3 33%	4 20%	4 20%	4 29%	12 30%	~	~	~	~	~	~	2 12%	13 28%	14 25%		10 24%	5 24%
ALWAYS	32 51%	598 49%	4 44%	10 50%	11 55%	7 50%	19 48%	~	~	~	~	~	~	10 59%	22 48%	28 50%	4 67%	21 50%	11 52%
#ALWAYS + USUALLY (NET)	47 75%	948 78%	7 78%	14 70%	15 75%	11 79%	31 78%	~	~	~	~	~	~	12 71%	35 76%	42 75%	4 67%	31 74%	16 76%
TOP BOX SCORE	32 51%	598 49%	4 44%	10 50%	11 55%	7 50%	19 48%	~	~	~	~	~	~	10 59%	22 48%	28 50%	4 67%	21 50%	11 52%
NOT ANSWERED		2			1	1									2	2		2	
VALID CASES	63	1212	9	20	20	14	40							17	46	56	6	42	21
NUMBER OF RESPONDENTS	65	1241	9	20	21	15	40							17	48	58	6	44	21
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER		
	WORA 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 TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q51 NEVER	2 3%	17 1%	~	1 5%~	1 5%~	~	2 5%~	~	~	~	~	~	~	2 4%~	2 4%~	~	2 5%~	
SOMETIMES	5 8%	87 7%	~	1 5%~	3 15%~	1 7%~	2 5%~	~	~	~	~	~	2 12%~	3 7%~	4 7%~	1 17%~	3 7%~	2 10%
USUALLY	13 21%	274 23%	33%~	3 35%~	7 5%~	1 14%~	2 23%~	9	~	~	~	~	3 18%~	10 22%~	12 21%~	~	10 24%~	3 14%
ALWAYS	43 68%	831 69%	67%~	6 55%~	11 75%~	15 79%~	11 68%~	27	~	~	~	~	12 71%~	31 67%~	38 68%~	5 83%~	27 64%~	16 76%
#ALWAYS + USUALLY (NET)	56 89%	1105 91%	100%~	9 90%~	18 80%~	16 93%~	13 90%~	36	~	~	~	~	15 88%~	41 89%~	50 89%~	5 83%~	37 88%~	19 90%
TOP BOX SCORE	43 68%	831 69%	67%~	6 55%~	11 75%~	15 79%~	11 68%~	27	~	~	~	~	12 71%~	31 67%~	38 68%~	5 83%~	27 64%~	16 76%
NOT ANSWERED	2	32			1	1								2	2		2	
VALID CASES	63	1209	9	20	20	14	40						17	46	56	6	42	21
NUMBER OF RESPONDENTS	65	1241	9	20	21	15	40						17	48	58	6	44	21
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	WORA 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
Q52 YES	104 38%	1806 37%	14 33%~	26 41%	36 40%	28 36%	61 34%*	~	~	~	~	~	~	27 48%	76 36%	100 38%~	3 30%~	74 37%	30 41%
NO	169 62%	3092 63%	29 67%~	38 59%	53 60%	49 64%	120 66%*	~	~	~	~	~	~	29 52%	137 64%	160 62%~	7 70%~	125 63%	44 59%
NOT ANSWERED	14	411	1	8	3	2								1		1		14	
VALID CASES	273	4898	43	64	89	77	181							56	213	260	10	199	74
NUMBER OF RESPONDENTS	287 100%	5309 100%	44 100%	72 100%	92 100%	79 100%	181 100%							57 100%	213 100%	261 100%	10 100%	213 100%	74 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
FQ53 NEVER	8 3%	83 2%	~	2 3%	3 3%	3 4%	7 4%	~	~	~	~	~	~	1 2%	7 3%	8 3%	~	7 4%	1 1%
SOMETIMES	16 6%	357 7%	5%~	2 8%	5 6%	4 5%	10 6%	~	~	~	~	~	~	5 9%	10 5%	15 6%	1 10%	12 6%	4 5%
USUALLY	38 14%	646 13%	17%~	7 13%	8 17%	15 11%	22 12%	~	~	~	~	~	~	8 15%	30 14%	37 15%	1 10%	28 15%	10 14%
ALWAYS	205 77%	3743 78%	79%~	33 76%	48 74%	64 80%	140 78%	~	~	~	~	~	~	40 74%	162 78%	194 76%	8 80%	146 76%	59 80%
#ALWAYS + USUALLY (NET)	243 91%	4389 91%	95%~	40 89%	56 91%	79 91%	162 91%	~	~	~	~	~	~	48 89%	192 92%	231 91%	9 90%	174 90%	69 93%
TOP BOX SCORE	205 77%	3743 78%	79%~	33 76%	48 74%	64 80%	140 78%	~	~	~	~	~	~	40 74%	162 78%	194 76%	8 80%	146 76%	59 80%
NOT ANSWERED	6	69	1	1	2	2	2							2	4	6		6	
VALID CASES	267	4829	42	63	87	75	179							54	209	254	10	193	74
NUMBER OF RESPONDENTS	273 100%	4898 100%	43 100%	64 100%	89 100%	77 100%	181 100%							56 100%	213 100%	260 100%	10 100%	199 100%	74 100%

[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			
	WORA 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	GOOD & POOR	NO CCC	CCC
Q54 WORST HEALTH PLAN POSSIBLE	1 0.4%	17 0.3%	~	~	1%~	~	1 0.6%	~	~	~	~	~	~	~	1 0.5%	1 0.4%	~	~	1 0.5%
01	1 0.4%	14 0.3%	~	~	1%~	~	~	~	~	~	~	~	~	1 2%	~	1 0.4%	~	~	1 0.5%
02	3 1%	21 0.4%	~	2%	1%	1%	1 0.6%	~	~	~	~	~	~	1 2%	2 1%	3 1%	~	2 1%	1 1%
03	1 0.4%	35 0.7%	~	~	~	1%~	1 0.6%	~	~	~	~	~	~	~	1 0.5%	1 0.4%	~	~	1 0.5%
04	5 2%	62 1%	~	~	5%	1%	3 2%	~	~	~	~	~	~	2 4%	3 1%	3 1%	2 20%	4 2%	1 1%
05	22 8%	266 5%	3 7%	6 9%	5 6%	8 11%	13 7%	~	~	~	~	~	~	4 7%	17 8%	21 8%	1 10%	16 8%	6 8%
06	14 5%	237 5%	1 2%	2 3%	5 6%	6 8%	10 6%	~	~	~	~	~	~	3 5%	11 5%	13 5%	1 10%	6 3%*	8 11%
07	36 13%	471 10%	9 21%	10 16%	10 11%	7 10%	24 14%	~	~	~	~	~	~	5 9%	30 14%	35 14%	~	26 13%	10 14%
08	52 19%	939 19%	11 26%	13 20%	19 22%	9 12%*	40 23%*	~	~	~	~	~	~	9 16%	43 21%	51 20%	1 10%	44 23%*	8 11%
09	39 15%	844 17%	6 14%	10 16%	12 14%	11 15%	25 14%	~	~	~	~	~	~	9 16%	30 14%	39 15%	~	25 13%	14 19%
BEST HEALTH PLAN POSSIBLE	94 35%	1982 41%	13 30%	22 34%	30 34%	29 40%	59 33%	~	~	~	~	~	~	23 40%	69 33%	88 34%	5 50%	69 35%	25 34%
#8-10 (NET)	185 69%	3765 77%*	30 70%	45 70%	61 69%	49 67%	124 70%	~	~	~	~	~	~	41 72%	142 69%	178 70%	6 60%	138 71%	47 64%

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		
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
9-10 (NET)	133 50%	2826 58%*	19 44%	32 50%	42 48%	40 55%	84 47%	~	~	~	~	~	~	32 56%	99 48%	127 50%	5 50%	94 48%	39 53%
NOT ANSWERED	19	421	1	8	4	6	4							6		5		18	1
VALID CASES	268	4888	43	64	88	73	177							57	207	256	10	195	73
NUMBER OF RESPONDENTS	287 100%	5309 100%	44 100%	72 100%	92 100%	79 100%	181 100%							57 100%	213 100%	261 100%	10 100%	213 100%	74 100%
MEAN	8.15	8.47	8.28	8.25	8.00	8.15	8.16							8.19	8.14	8.16	7.70	8.15	8.14
p stat_(*=Sig @ p<=.05)		.006*	~.605	.426	.980		.839	~	~	~	~	~	~	.850	.885	~	~	~.965	

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	
	WORA 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
Q55 YES	111 41%	1910 39%	21 49%~	23 36%	32 36%	35 45%	72 40%	~	~	~	~	~	22 39%	89 42%	102 39%~	8 80%~	58 29%*	53 72%
NO	163 59%	3030 61%	22 51%~	41 64%	58 64%	42 55%	109 60%	~	~	~	~	~	35 61%	124 58%	159 61%~	2 20%~	142 71%*	21 28%
NOT ANSWERED	13	369	1	8	2	2												13
VALID CASES	274	4940	43	64	90	77	181						57	213	261	10	200	74
NUMBER OF RESPONDENTS	287 100%	5309 100%	44 100%	72 100%	92 100%	79 100%	181 100%						57 100%	213 100%	261 100%	10 100%	213 100%	74 100%

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			
	WORA 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	
Q56 NEVER	4 4%	42 2%		2 9%~	2 6%~		2 3%~							2 10%~	2 2%~	4 4%~		2 4%	2 4%
SOMETIMES	8 7%	156 8%	1 5%~	3 13%~	4 13%~		5 7%~							2 10%~	6 7%~	6 6%~	2 25%~	6 11%	2 4%
USUALLY	22 20%	483 26%	1 5%~	8 35%~	7 23%~	6 17%~	12 17%~							4 19%~	18 20%~	21 21%~	1 13%~	12 21%	10 19%
ALWAYS	76 69%	1206 64%	19 90%~	10 43%~	18 58%~	29 83%~	53 74%~							13 62%~	63 71%~	70 69%~	5 63%~	37 65%	39 74%
#ALWAYS + USUALLY (NET)	98 89%	1689 90%	20 95%~	18 78%~	25 81%~	35 100%~	65 90%~							17 81%~	81 91%~	91 90%~	6 75%~	49 86%	49 92%
TOP BOX SCORE	76 69%	1206 64%	19 90%~	10 43%~	18 58%~	29 83%~	53 74%~							13 62%~	63 71%~	70 69%~	5 63%~	37 65%	39 74%
NOT ANSWERED		1 23			1									1		1		1	
VALID CASES	110	1887	21	23	31	35	72							21	89	101	8	57	53
NUMBER OF RESPONDENTS	111 100%	1910 100%	21 100%	23 100%	32 100%	35 100%	72 100%							22 100%	89 100%	102 100%	8 100%	58 100%	53 100%

[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		
	WORA 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	
Q57 #YES	63 58%	1118 60%	12 57%~	13 57%~	18 56%~	20 61%~	41 58%~	~	~	~	~	~	~	12 57%~	51 58%~	56 56%~	7 88%~	35 60%	28 55%
NO	46 42%	755 40%	9 43%~	10 43%~	14 44%~	13 39%~	30 42%~	~	~	~	~	~	~	9 43%~	37 42%~	44 44%~	1 13%~	23 40%	23 45%
NOT ANSWERED	2	37				2	1							1	1	2			2
VALID CASES	109	1873	21	23	32	33	71							21	88	100	8	58	51
NUMBER OF RESPONDENTS	111	1910	21	23	32	35	72							22	89	102	8	58	53
	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	
	WORA 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
Q57A YES	224 83%	3983 82%	24 56%	56 89%	82 92%*	62 84%	148 83%	~	~	~	~	~	~	46 81%	175 84%	215 83%	8 80%	161 83%	63 85%
NO	45 17%	876 18%	19 44%	7 11%	7 8%*	12 16%	30 17%	~	~	~	~	~	~	11 19%	34 16%	43 17%	2 20%	34 17%	11 15%
NOT ANSWERED	18	450	1	9	3	5	3								4	3			18
VALID CASES	269	4859	43	63	89	74	178							57	209	258	10	195	74
NUMBER OF RESPONDENTS	287	5309	44	72	92	79	181							57	213	261	10	213	74
	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		
	WORA 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
Q57B YES	168 62%	2993 61%	15 35%~	49 77%*	67 76%*	37 48%*	112 62%	~	~	~	~	~	~	34 61%	132 62%	163 63%~	3 30%~	122 62%	46 62%
NO	104 38%	1901 39%	28 65%~	15 23%*	21 24%*	40 52%*	69 38%	~	~	~	~	~	~	22 39%	81 38%	96 37%~	7 70%~	76 38%	28 38%
NOT ANSWERED	15	415	1	8	4	2								1		2		15	
VALID CASES	272	4894	43	64	88	77	181							56	213	259	10	198	74
NUMBER OF RESPONDENTS	287 100%	5309 100%	44 100%	72 100%	92 100%	79 100%	181 100%							57 100%	213 100%	261 100%	10 100%	213 100%	74 100%

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			
	WORA 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	POOR	NO CCC	CCC
Q57C NEVER	5 3%	52 2%	~	~	2%	11%~	4%	~	~	~	~	~	~	~	5 4%~	5 3%~	~	4 3%~	1 2%
SOMETIMES	8 5%	168 6%	2 13%~	3 6%~	2 3%	1 3%~	3 3%	~	~	~	~	~	~	4 13%~	3 2%~	7 4%~	1 33%~	6 5%~	2 4%
USUALLY	33 20%	532 18%	1 7%~	13 27%~	11 17%	8 23%~	21 19%	~	~	~	~	~	~	9 28%~	24 18%~	33 21%~	~	22 18%~	11 24%
ALWAYS	118 72%	2201 75%	12 80%~	33 67%~	51 78%	22 63%~	82 75%	~	~	~	~	~	~	19 59%~	98 75%~	114 72%~	2 67%~	87 73%~	31 69%
#ALWAYS + USUALLY (NET)	151 92%	2733 93%	13 87%~	46 94%~	62 95%	30 86%~	103 94%	~	~	~	~	~	~	28 88%~	122 94%~	147 92%~	2 67%~	109 92%~	42 93%
TOP BOX SCORE	118 72%	2201 75%	12 80%~	33 67%~	51 78%	22 63%~	82 75%	~	~	~	~	~	~	19 59%~	98 75%~	114 72%~	2 67%~	87 73%~	31 69%
NOT ANSWERED	4	40			2	2	2							2	2	4		3	1
VALID CASES	164	2953	15	49	65	35	110							32	130	159	3	119	45
NUMBER OF RESPONDENTS	168	2993	15	49	67	37	112							34	132	163	3	122	46
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	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			
	WORA 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	29 28%	609 28%	3 27%	10 34%	7 17%	9 41%	18 28%	~	~	~	~	~	~	6 32%	22 27%	26 27%	3 75%	20 28%	9 28%
SOMETIMES	18 17%	384 18%	2 18%	6 21%	9 22%	1 5%	9 14%	~	~	~	~	~	~	4 21%	14 17%	18 18%	~	15 21%	3 9%
USUALLY	17 17%	484 22%	2 18%	4 14%	7 17%	4 18%	10 16%	~	~	~	~	~	~	5 26%	11 14%	17 17%	~	9 13%	8 25%
ALWAYS	39 38%	716 33%	4 36%	9 31%	18 44%	8 36%	27 42%	~	~	~	~	~	~	4 21%	34 42%	37 38%	1 25%	27 38%	12 38%
#ALWAYS + USUALLY (NET)	56 54%	1200 55%	6 55%	13 45%	25 61%	12 55%	37 58%	~	~	~	~	~	~	9 47%	45 56%	54 55%	1 25%	36 51%	20 63%
TOP BOX SCORE	39 38%	716 33%	4 36%	9 31%	18 44%	8 36%	27 42%	~	~	~	~	~	~	4 21%	34 42%	37 38%	1 25%	27 38%	12 38%
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	163	2639	32	33	49	49	110							37	125	157	6	123	40
NOT ANSWERED	21	477	1	10	2	8	7							1	7	6		19	2
VALID CASES	103	2193	11	29	41	22	64							19	81	98	4	71	32
NUMBER OF RESPONDENTS	287	5309	44	72	92	79	181							57	213	261	10	213	74
	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			
	WORA 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	
Q57E EXTREMELY DIFFICULT	9 3%	164 3%		3 4%	5 5%	1 1%	4 2%	~	~	~	~	~	~	4 8%	5 2%	8 3%	1 13%	6 3%	3 4%
01	6 2%	92 2%			4 4%	2 3%	4 2%	~	~	~	~	~	~	1 2%	5 2%	6 2%	~	2 1%	4 6%
02	3 1%	75 1%		2 3%	1 1%		1 0.6%	~	~	~	~	~	~	~	2 1%	3 1%	~	1 0.5%	2 3%
03	11 4%	133 3%	2 5%	3 4%	2 2%	4 6%	7 4%	~	~	~	~	~	~	3 6%	8 4%	10 4%	1 13%	9 4%	2 3%
04	3 1%	87 2%	1 3%	~	2 2%	~	2 1%	~	~	~	~	~	~	1 2%	2 1%	2 0.8%	1 13%	3 1%	~
05	15 6%	371 7%	4 11%	5 7%	1 1%*	5 7%	10 6%	~	~	~	~	~	~	3 6%	12 6%	15 6%	~	12 6%	3 4%
06	6 2%	203 4%*	1 3%	1 1%	2 2%	2 3%	6 3%	~	~	~	~	~	~	~	6 3%	6 2%	~	5 2%	1 1%
07	19 7%	375 7%	4 11%	6 8%	6 7%	3 4%	9 5%	~	~	~	~	~	~	7 13%	12 6%	19 8%	~	16 8%	3 4%
09	80 29%	1657 33%	10 27%	24 34%	26 28%	20 28%	48 28%	~	~	~	~	~	~	10 19%*	56 28%	66 26%	1 13%	62 31%	18 26%
EXTREMELY EASY	120 44%	1890 37%*	15 41%	27 38%	43 47%	35 49%	81 47%	~	~	~	~	~	~	23 44%	95 47%	115 46%	4 50%	86 43%	34 49%
#8-10 (NET)	200 74%	3547 70%	25 68%	51 72%	69 75%	55 76%	129 75%	~	~	~	~	~	~	33 63%	151 74%	181 72%	5 63%	148 73%	52 74%
9-10 (NET)	200 74%	3547 70%	25 68%	51 72%	69 75%	55 76%	129 75%	~	~	~	~	~	~	33 63%	151 74%	181 72%	5 63%	148 73%	52 74%

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	
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
88		1																	
NOT ANSWERED	15	261	7	1		7	9							5	10	11	2	11	4
VALID CASES	272	5047	37	71	92	72	172							52	203	250	8	202	70
NUMBER OF RESPONDENTS	287	5309	44	72	92	79	181							57	213	261	10	213	74
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%
MEAN	8.17	8.02	8.22	8.06	8.08	8.36	8.29							7.65	8.25	8.15	7.00	8.23	7.97
p stat_(*=Sig @ p<=.05)		.372		~.697	.717	.463	.338	~	~	~	~	~	~	~.191	.401	~	~	~.536	

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA 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
Q58 EXCELLENT	119 44%	2100 43%	17 40%	30 48%	44 49%	28 37%	76 43%	~	~	~	~	~	~	29 51%	87 41%	119 46%	~	98 49%*	21 29%
VERY GOOD	106 39%	1734 35%	20 47%	28 44%	34 38%	24 32%	74 42%	~	~	~	~	~	~	15 26%*	90 43%*	106 41%	~	79 40%	27 37%
GOOD	36 13%	854 17%*	5 12%	5 8%	8 9%	18 24%*	22 12%	~	~	~	~	~	~	10 18%	26 12%	36 14%	~	18 9%*	18 25%
FAIR	9 3%	210 4%	~	~	4 4%	5 7%	5 3%	~	~	~	~	~	~	3 5%	6 3%	~	9 90%	3 2%*	6 8%
POOR	1 0.4%	17 0.3%	1 2%	~	~	~	1 0.6%	~	~	~	~	~	~	~	1 0.5%	~	1 10%	~	1 1%
#EXCELLENT + VERY GOOD + GOOD (NET)	261 96%	4688 95%	42 98%	63 100%	86 96%	70 93%	172 97%	~	~	~	~	~	~	54 95%	203 97%	261 100%	~	195 98%*	66 90%
NOT ANSWERED	16	394	1	9	2	4	3								3			15	1
VALID CASES	271	4915	43	63	90	75	178							57	210	261	10	198	73
NUMBER OF RESPONDENTS	287	5309	44	72	92	79	181							57	213	261	10	213	74
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA 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	FAIR & POOR	NO CCC	CCC
Q59 EXCELLENT	116 43%	2151 44%	28 65%~	25 40%	37 41%	26 35%	84 47%*	~	~	~	~	~	~	26 46%	89 42%	113 43%~	3 30%~	101 51%*	15 21%
VERY GOOD	88 33%	1382 28%	9 21%~	23 37%	33 37%	23 31%	60 34%	~	~	~	~	~	~	13 23%	74 35%	85 33%~	3 30%~	65 33%	23 32%
GOOD	46 17%	930 19%	5 12%~	10 16%	15 17%	16 22%	25 14%	~	~	~	~	~	~	11 19%	34 16%	46 18%~	~	28 14%	18 25%
FAIR	18 7%	366 7%	1 2%~	5 8%	4 4%	8 11%	8 4%	~	~	~	~	~	~	7 12%	11 5%	14 5%~	4 40%~	3 2%*	15 21%
POOR	2 0.7%	88 2%*	~	~	1 1%	1 1%	1 0.6%	~	~	~	~	~	~	~	2 1%~	2 0.8%~	~	~	2 3%
#EXCELLENT + VERY GOOD + GOOD (NET)	250 93%	4463 91%	42 98%~	58 92%	85 94%	65 88%	169 95%	~	~	~	~	~	~	50 88%	197 94%	244 94%~	6 60%~	194 98%*	56 77%
NOT ANSWERED	17	392	1	9	2	5	3							3	1	1		16	1
VALID CASES	270	4917	43	63	90	74	178							57	210	260	10	197	73
NUMBER OF RESPONDENTS	287 100%	5309 100%	44 100%	72 100%	92 100%	79 100%	181 100%							57 100%	213 100%	261 100%	10 100%	213 100%	74 100%

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		
	WORA 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
Q60 YES	68 25%	1056 22%	5 12%	16 25%	21 24%	26 36%*	42 24%	~	~	~	~	~	~	15 27%	53 25%	62 24%	6 60%	16 8%*	52 71%
NO	200 75%	3853 78%	38 88%	47 75%	68 76%	47 64%*	135 76%	~	~	~	~	~	~	41 73%	156 75%	195 76%	4 40%	179 92%*	21 29%
NOT ANSWERED	19	400	1	9	3	6	4							1	4	4		18	1
VALID CASES	268	4909	43	63	89	73	177							56	209	257	10	195	73
NUMBER OF RESPONDENTS	287	5309	44	72	92	79	181							57	213	261	10	213	74
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	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	
			<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
Q61 YES	52 79%	843 81%	3 60%~	11 73%~	19 90%~	19 76%~	34 83%~	~	~	~	~	~	10 67%~	42 82%~	47 78%~	5 83%~	3 21%~	49 94%
NO	14 21%	192 19%	2 40%~	4 27%~	2 10%~	6 24%~	7 17%~	~	~	~	~	~	5 33%~	9 18%~	13 22%~	1 17%~	11 79%~	3 6%
NOT ANSWERED	2	21		1		1	1							2	2		2	
VALID CASES	66	1035	5	15	21	25	41						15	51	60	6	14	52
NUMBER OF RESPONDENTS	68	1056	5	16	21	26	42						15	53	62	6	16	52
	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		
	WORA 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
Q62 YES	48 94%	748 91%	2 100%~	9 82%~	19 100%~	18 95%~	30 91%~	~	~	~	~	~	~	10 ~100%~	38 93%~	43 93%~	5 100%~	48 ~98%	
NO	3 6%	77 9%	~	2 18%~	~	1 5%~	3 9%~	~	~	~	~	~	~	~	3 7%~	3 7%~	~	2 ~100%~	1 2%
NOT ANSWERED	1	18	1				1							1	1	1			
VALID CASES	51	825	2	11	19	19	33							10	41	46	5	2	49
NUMBER OF RESPONDENTS	52	843	3	11	19	19	34							10	42	47	5	3	49
	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			
	WORA 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
Q63 YES	42 16%	832 17%	4 9%	13 21%	8 9%*	17 23%	25 14%	~	~	~	~	~	~	9 16%	33 16%	34 13%	8 80%	~	8 4%*	34 47%
NO	227 84%	4059 83%	39 91%	50 79%	81 91%*	57 77%	155 86%	~	~	~	~	~	~	47 84%	177 84%	223 87%	2 20%	~	188 96%*	39 53%
NOT ANSWERED	18	418	1	9	3	5	1							1	3	4			17	1
VALID CASES	269	4891	43	63	89	74	180							56	210	257	10		196	73
NUMBER OF RESPONDENTS	287	5309	44	72	92	79	181							57	213	261	10		213	74
	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		
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	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
Q64 YES	31 74%	689 85%~	4 100%~	7 54%~	4 50%~	16 94%~	17 68%~	~	~	~	~	~	~	7 78%~	24 73%~	24 71%~	7 88%~	1 13%~	30 88%~
NO	11 26%	123 15%~	~	6 46%~	4 50%~	1 6%~	8 32%~	~	~	~	~	~	~	2 22%~	9 27%~	10 29%~	1 13%~	7 88%~	4 12%~
NOT ANSWERED		20																	
VALID CASES	42	812	4	13	8	17	25							9	33	34	8	8	34
NUMBER OF RESPONDENTS	42 100%	832 100%	4 100%	13 100%	8 100%	17 100%	25 100%							9 100%	33 100%	34 100%	8 100%	8 100%	34 100%

[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	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER PAC ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q65 YES	30 100%	662 97%	3 100%	7 100%	4 100%	16 100%	16 100%	~	~	~	~	~	7 100%	23 100%	23 100%	7 100%	30 100%	
NO		19 3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	1	8	1				1						1	1			1	
VALID CASES	30	681	3	7	4	16	16						7	23	23	7	30	
NUMBER OF RESPONDENTS	31 100%	689 100%	4 100%	7 100%	4 100%	16 100%	17 100%						7 100%	24 100%	24 100%	7 100%	1 100%	30 100%

[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		
	WORA 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	
Q66 YES	32 12%	644 13%	2 5%	8 13%	6 7%*	16 21%*	15 8%*	~	~	~	~	~	~	12 21%*	20 9%	25 10%~	7 70%~	6 3%*	26 36%
NO	239 88%	4243 87%	41 95%~	56 88%	83 93%*	59 79%*	164 92%*	~	~	~	~	~	~	45 79%*	191 91%	234 90%~	3 30%~	193 97%*	46 64%
NOT ANSWERED	16	422	1	8	3	4	2								2	2		14	2
VALID CASES	271	4887	43	64	89	75	179							57	211	259	10	199	72
NUMBER OF RESPONDENTS	287	5309	44	72	92	79	181							57	213	261	10	213	74
	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		
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALS K ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q67 YES	25 83%	508 81%	2 100%	5 71%	5 100%	13 81%	12 86%	~	~	~	~	~	~	9 82%	16 84%	18 78%	7 100%	1 25%	24 92%
NO	5 17%	121 19%	~	2 29%	~	3 19%	2 14%	~	~	~	~	~	~	2 18%	3 16%	5 22%	~	3 75%	2 8%
NOT ANSWERED	2	15		1	1		1							1	1	2		2	
VALID CASES	30	629	2	7	5	16	14							11	19	23	7	4	26
NUMBER OF RESPONDENTS	32	644	2	8	6	16	15							12	20	25	7	6	26
	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	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q68 YES	24 96%	477 96%	2 100%	5 100%	4 80%	13 100%	12 100%	~	~	~	~	~	8 89%	16 100%	18 100%	6 86%	24 100%	
NO	1 4%	22 4%	~	~	20%	~	~	~	~	~	~	~	1 11%	~	1 14%	1 100%	1 100%	
NOT ANSWERED		9																
VALID CASES	25	499	2	5	5	13	12						9	16	18	7	1	24
NUMBER OF RESPONDENTS	25	508	2	5	5	13	12						9	16	18	7	1	24
	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		
	WORA 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
Q69 YES	32 12%	558 11%	4 9%	10 16%	9 10%	9 12%	16 9%	~	~	~	~	~	~	9 16%	23 11%	26 10%	5 50%	8 4%*	24 33%
NO	240 88%	4342 89%	39 91%	53 84%	81 90%	67 88%	164 91%	~	~	~	~	~	~	48 84%	189 89%	233 90%	5 50%	191 96%*	49 67%
NOT ANSWERED	15	409	1	9	2	3	1								1	2		14	1
VALID CASES	272	4900	43	63	90	76	180							57	212	259	10	199	73
NUMBER OF RESPONDENTS	287 100%	5309 100%	44 100%	72 100%	92 100%	79 100%	181 100%							57 100%	213 100%	261 100%	10 100%	213 100%	74 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	WORA 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 IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q70 YES	21 72%	389 72%	3 75%	5 63%	5 56%	8 100%	10 67%	~	~	~	~	~	8 100%	13 62%	16 67%	4 100%	2 33%	19 83%
NO	8 28%	149 28%	1 25%	3 38%	4 44%	~	5 33%	~	~	~	~	~	8 38%	8 33%	~	~	4 67%	4 17%
NOT ANSWERED	3	20		2		1	1						1	2	2	1	2	1
VALID CASES	29	538	4	8	9	8	15						8	21	24	4	6	23
NUMBER OF RESPONDENTS	32	558	4	10	9	9	16						9	23	26	5	8	24
	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			
	WORA 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/ ALS K ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q71 YES	16 80%	357 93%	2 67%	4 100%	4 80%	6 75%	7 78%	~	~	~	~	~	~	6 75%	10 83%	13 87%	3 75%	~	16 89%	
NO	4 20%	27 7%	1 33%	~	1 20%	2 25%	2 22%	~	~	~	~	~	~	2 25%	2 17%	2 13%	1 25%	2 100%	2 11%	
NOT ANSWERED	1	5		1			1								1	1			1	
VALID CASES	20	384	3	4	5	8	9							8	12	15	4		2	18
NUMBER OF RESPONDENTS	21	389	3	5	5	8	10							8	13	16	4		2	19
	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			
	WORA 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	41 15%	813 17%	2 5%	11 17%	12 13%	16 21%	23 13%	~	~	~	~	~	~	8 14%	32 15%	35 14%	5 50%	~	1 0.5%*	40 54%
NO	231 85%	4085 83%	41 95%	53 83%	77 87%	60 79%	158 87%	~	~	~	~	~	~	48 86%	181 85%	224 86%	5 50%	~	197 99%*	34 46%
NOT ANSWERED	15	411	1	8	3	3								1		2			15	
VALID CASES	272	4898	43	64	89	76	181							56	213	259	10		198	74
NUMBER OF RESPONDENTS	287	5309	44	72	92	79	181							57	213	261	10		213	74
	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	
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALSK ##	OTHR MUL- TI ##	HIS- IC IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q73 YES	40 98%	726 92%~100%	2 ~100%	10 ~91%	12 ~100%	16 ~100%	22 96%~	~	~	~	~	~	8 ~100%	31 97%~	34 97%~	5 ~100%	40 ~100%	
NO	1 2%	64 8%~	~	1 ~9%	~	~	1 4%~	~	~	~	~	~	~	1 3%~	1 3%~	~	1 ~100%	
NOT ANSWERED		23																
VALID CASES	41	790	2	11	12	16	23						8	32	35	5	1	40
NUMBER OF RESPONDENTS	41	813	2	11	12	16	23						8	32	35	5	1	40
	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		
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NQ74																			
3 YEARS OLD OR LESS	44 15%	908 17%	44 100%	~	~	~	33 18%	~	~	~	~	~	~	9 16%	34 16%	42 16%	1 10%	40 19%*	4 5%
4 TO 7 YEARS OLD	72 25%	1228 23%	~	72 ~100%	~	~	45 25%	~	~	~	~	~	~	12 21%	51 24%	63 24%	~	55 26%	17 23%
8 TO 12 YEARS OLD	92 32%	1650 31%	~	~	92 ~100%	~	56 31%	~	~	~	~	~	~	18 32%	70 33%	86 33%	4 40%	64 30%	28 38%
13 OR OLDER	79 28%	1523 29%	~	~	~	79 ~100%	47 26%	~	~	~	~	~	~	18 32%	58 27%	70 27%	5 50%	54 25%	25 34%
VALID CASES	287	5309	44	72	92	79	181							57	213	261	10	213	74
NUMBER OF RESPONDENTS	287	5309	44	72	92	79	181							57	213	261	10	213	74
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%

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

NQ75 IS YOUR CHILD MALE OR FEMALE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ ILND ##	AMER ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NQ75																			
MALE	143 50%	2736 52%	20 45%~	38 53%	46 50%	39 49%	91 50%	~	~	~	~	~	~	31 ~ 54%	104 49%	134 51%~	2 20%~	102 48%	41 55%
FEMALE	144 50%	2573 48%	24 55%~	34 47%	46 50%	40 51%	90 50%	~	~	~	~	~	~	26 ~ 46%	109 51%	127 49%~	8 80%~	111 52%	33 45%
VALID CASES	287	5309	44	72	92	79	181							57	213	261	10	213	74
NUMBER OF RESPONDENTS	287 100%	5309 100%	44 100%	72 100%	92 100%	79 100%	181 100%							57 100%	213 100%	261 100%	10 100%	213 100%	74 100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	WORA 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
Q76 HISPANIC OR LATINO	57 21%	1726 35%*	9 21%~	12 19%	18 20%	18 24%	~	~	~	~	~	~	~	57 ~100%~	~	54 21%~	3 30%~	42 21%	15 21%
NOT HISPANIC OR LATINO	213 79%	3146 65%*	34 79%~	51 81%	70 80%	58 76%	180 100%~	~	~	~	~	~	~	213 ~100%~	~	203 79%~	7 70%~	155 79%	58 79%
NOT ANSWERED	17	437	1	9	4	3	1									4		16	1
VALID CASES	270	4872	43	63	88	76	180							57	213	257	10	197	73
NUMBER OF RESPONDENTS	287 100%	5309 100%	44 100%	72 100%	92 100%	79 100%	181 100%							57 100%	213 100%	261 100%	10 100%	213 100%	74 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ 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	242 84%	3787 71%*	41 93%~	59 82%	81 88%	61 77%	181 100%~	~	~	~	~	~	38 ~ 67%*	203 95%*	231 89%~	8 80%~	177 83%	65 88%
NO	45 16%	1522 29%*	3 7%~	13 18%	11 12%	18 23%	~	~	~	~	~	~	19 ~ 33%*	10 5%*	30 11%~	2 20%~	36 17%	9 12%
VALID CASES	287	5309	44	72	92	79	181						57	213	261	10	213	74
NUMBER OF RESPONDENTS	287 100%	5309 100%	44 100%	72 100%	92 100%	79 100%	181 100%						57 100%	213 100%	261 100%	10 100%	213 100%	74 100%

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	
			<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%	~	3%	5%	3%	~	~	~	~	~	~	1 2%	8 4%	8 3%~	1 10%~	3 1%*	6 8%
NO	278 97%	5105 96%	44 100%~	70 97%	87 95%	77 97%	181 100%~	~	~	~	~	~	56 98%	205 96%	253 97%~	9 90%~	210 99%*	68 92%
VALID CASES	287	5309	44	72	92	79	181						57	213	261	10	213	74
NUMBER OF RESPONDENTS	287 100%	5309 100%	44 100%	72 100%	92 100%	79 100%	181 100%						57 100%	213 100%	261 100%	10 100%	213 100%	74 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.3 YES	8 3%	184 3%	~	~	4%	5%	~	~	~	~	~	~	1 2%	7 3%	8 3%	~	4 2%	4 5%
NO	279 97%	5125 97%	44 100%	72 100%	88 96%	75 95%	181 100%	~	~	~	~	~	56 98%	206 97%	253 97%	10 100%	209 98%	70 95%
VALID CASES	287	5309	44	72	92	79	181						57	213	261	10	213	74
NUMBER OF RESPONDENTS	287 100%	5309 100%	44 100%	72 100%	92 100%	79 100%	181 100%						57 100%	213 100%	261 100%	10 100%	213 100%	74 100%

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	
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE ##	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ##	AMER IND/ ALSK NATV ##	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%	~	2 3%	2 2%	~	~	~	~	~	~	~	1 2%	3 1%	4 2%	~	2 0.9%	2 3%
NO	283 99%	5226 98%	44 100%	70 97%	90 98%	79 100%	181 100%	~	~	~	~	~	56 98%	210 99%	257 98%	10 100%	211 99%	72 97%
VALID CASES	287	5309	44	72	92	79	181						57	213	261	10	213	74
NUMBER OF RESPONDENTS	287 100%	5309 100%	44 100%	72 100%	92 100%	79 100%	181 100%						57 100%	213 100%	261 100%	10 100%	213 100%	74 100%

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	
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.5 YES	19 7%	335 6%	2 5%	3 4%	10 11%	4 5%	~	~	~	~	~	~	7 12%	12 6%	19 7%	~	14 7%	5 7%
NO	268 93%	4974 94%	42 95%	69 96%	82 89%	75 95%	181 100%	~	~	~	~	~	50 88%	201 94%	242 93%	10 100%	199 93%	69 93%
VALID CASES	287	5309	44	72	92	79	181						57	213	261	10	213	74
NUMBER OF RESPONDENTS	287 100%	5309 100%	44 100%	72 100%	92 100%	79 100%	181 100%						57 100%	213 100%	261 100%	10 100%	213 100%	74 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER PAC	IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.6 YES	20 7%	374 7%	3 7%~	1 1%*	8 9%	8 10%	~	~	~	~	~	~	~	14 25%*	6 3%*	19 7%~	1 10%~	12 6%	8 11%
NO	267 93%	4935 93%	41 93%~	71 99%*	84 91%	71 90%	181 100%~	~	~	~	~	~	~	43 75%*	207 97%*	242 93%~	9 90%~	201 94%	66 89%
VALID CASES	287	5309	44	72	92	79	181							57	213	261	10	213	74
NUMBER OF RESPONDENTS	287 100%	5309 100%	44 100%	72 100%	92 100%	79 100%	181 100%							57 100%	213 100%	261 100%	10 100%	213 100%	74 100%

Q78 WHAT IS YOUR AGE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN ##	NATV HAW/ ILND PAC ##	AMER ALSK NATV ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q78 UNDER 18	6 2%	141 3%	1 2%~	~	3 3%	2 3%	6 3%*	~	~	~	~	~	~	6 3%~	5 2%~	1 10%~	5 3%	1 1%
18 TO 24	11 4%	161 3%	8 19%~	2 3%	~	1 1%	8 4%	~	~	~	~	~	3 5%	8 4%	11 4%~	~	10 5%	1 1%
25 TO 34	93 34%	1564 32%	25 58%~	34 53%*	27 31%	7 9%*	62 34%	~	~	~	~	~	22 39%	70 33%	92 36%~	1 10%~	73 37%	20 27%
35 TO 44	99 37%	1821 37%	7 16%~	17 27%*	36 41%	39 51%*	64 35%	~	~	~	~	~	22 39%	77 36%	93 36%~	4 40%~	71 36%	28 38%
45 TO 54	39 14%	797 16%	1 2%~	7 11%	13 15%	18 24%*	26 14%	~	~	~	~	~	6 11%	32 15%	35 14%~	3 30%~	28 14%	11 15%
55 TO 64	20 7%	266 5%	1 2%~	4 6%	7 8%	8 11%	12 7%	~	~	~	~	~	4 7%	16 8%	19 7%~	1 10%~	8 4%*	12 16%
65 TO 74	3 1%	116 2%*	~	~	2 2%	1 1%	3 2%	~	~	~	~	~	~	3 1%~	3 1%~	~	2 1%	1 1%
75 OR OLDER		16 0.3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	16	427	1	8	4	3								1	3		16	
VALID CASES	271	4882	43	64	88	76	181						57	212	258	10	197	74
NUMBER OF RESPONDENTS	287	5309	44	72	92	79	181						57	213	261	10	213	74
	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	
	WORA 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
Q79 MALE	45 17%	702 14%	4 9%~	8 13%	18 20%	15 20%	31 17%	~	~	~	~	~	5 9%*	40 19%*	44 17%~		32 16%	13 18%
FEMALE	225 83%	4191 86%	39 91%~	55 87%	70 80%	61 80%	150 83%	~	~	~	~	~	52 91%*	171 81%*	213 83%~	10 100%~	165 84%	60 82%
NOT ANSWERED	17	416	1	9	4	3								2	4		16	1
VALID CASES	270	4893	43	63	88	76	181						57	211	257	10	197	73
NUMBER OF RESPONDENTS	287 100%	5309 100%	44 100%	72 100%	92 100%	79 100%	181 100%						57 100%	213 100%	261 100%	10 100%	213 100%	74 100%

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		
	WORA 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 & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC	
Q80																			
8TH GRADE OR LESS	15 6%	479 10%*	~	3 5%	8 9%	4 5%	5 3%*	~	~	~	~	~	~	8 14%*	7 3%*	12 5%~	3 30%~	12 6%	3 4%
SOME HIGH SCHOOL BUT DID NOT GRADUATE	22 8%	480 10%	7%~	3 6%	4 9%	8 9%	7 6%	~	~	~	~	~	~	9 16%	13 6%	21 8%~	1 10%~	17 9%	5 7%
HIGH SCHOOL GRADUATE OR GED	89 33%	1452 30%	48%~	20 30%	19 30%	24 27%	26 34%	~	~	~	~	~	~	16 29%	72 34%	85 33%~	2 20%~	69 35%	20 28%
SOME COLLEGE OR 2-YEAR DEGREE	116 43%	1752 36%*	40%~	17 40%~	31 48%	38 43%	30 41%	~	~	~	~	~	~	18 32%*	97 46%*	111 44%~	4 40%~	79 40%	37 51%
4-YEAR COLLEGE GRADUATE	14 5%	437 9%*	2%~	1 2%~	4 6%	5 6%	4 7%	~	~	~	~	~	~	2 4%	11 5%	14 5%~	~	10 5%	4 6%
MORE THAN 4-YEAR COLLEGE DEGREE	12 4%	238 5%	2%~	1 2%~	3 5%	5 6%	3 3%	~	~	~	~	~	~	3 5%	9 4%	12 5%~	~	9 5%	3 4%
NOT ANSWERED	19	471	2	8	4	5	3							1	4	6		17	2
VALID CASES	268	4838	42	64	88	74	178							56	209	255	10	196	72
NUMBER OF RESPONDENTS	287	5309	44	72	92	79	181							57	213	261	10	213	74
	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	
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALS ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q81 MOTHER OR FATHER	239 90%	4466 93%	40 93%~	58 92%	77 88%	64 88%	158 89%	~	~	~	~	~	53 95%	184 88%	229 90%~	7 70%~	181 93%*	58 81%
GRANDPARENT	13 5%	186 4%	2 5%~	2 3%	6 7%	3 4%	10 6%	~	~	~	~	~	~	12 6%	12 5%~	1 10%~	6 3%	7 10%
AUNT OR UNCLE	5 2%	33 0.7%	1 2%~	1 2%	1 1%	2 3%	1 0.6%	~	~	~	~	~	3 5%	2 1%	3 1%~	2 20%~	1 0.5%	4 6%
OLDER BROTHER OR SISTER		12 0.2%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
OTHER RELATIVE		6 0.1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
LEGAL GUARDIAN	8 3%	73 2%	~	1 2%	4 5%	3 4%	7 4%	~	~	~	~	~	~	8 4%*	8 3%~	~	6 3%	2 3%
SOMEONE ELSE	2 0.7%	33 0.7%	~	1 2%	~	1 1%	1 0.6%	~	~	~	~	~	~	2 1%	2 0.8%~	~	1 0.5%	1 1%
NOT ANSWERED	20	500	1	9	4	6	4						1	5	7		18	2
VALID CASES	267	4809	43	63	88	73	177						56	208	254	10	195	72
NUMBER OF RESPONDENTS	287 100%	5309 100%	44 100%	72 100%	92 100%	79 100%	181 100%						57 100%	213 100%	261 100%	10 100%	213 100%	74 100%

Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	WORA 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/ ALS K ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q82 YES	5 3%	101 3%	~	1 3%	1 2%	3 5%	4 3%	~	~	~	~	~	~	1 3%	4 3%	5 3%	~	3 2%	2 5%
NO	174 97%	2894 97%	100%~	27 98%	39 98%	55 98%	53 97%	119 97%	~	~	~	~	~	37 97%	136 97%	165 97%	6 100%	132 98%	42 95%
NOT ANSWERED	2	59				2	2								2	2		1	1
VALID CASES	179	2995	27	40	56	56	123							38	140	170	6	135	44
NUMBER OF RESPONDENTS	181 100%	3054 100%	27 100%	40 100%	56 100%	58 100%	125 100%							38 100%	142 100%	172 100%	6 100%	136 100%	45 100%

[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		
	WORA 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- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.1 YES	2 40%	53 52%~	~	~	~	67%~	25%~	~	~	~	~	~	~	100%~	25%~	40%~	~	33%~	50%~
NO	3 60%	48 48%~	~100%~	100%~	33%~	75%~	~	~	~	~	~	~	~	75%~	60%~	~	67%~	50%~	
VALID CASES	5	101	1	1	3	4								1	4	5		3	2
NUMBER OF RESPONDENTS	5 100%	101 100%	100%	100%	100%	100%								100%	100%	100%		100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	WORA 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
Q83.2 YES	2 40%	31 31%~	~	~	~	2 67%~	1 25%~	~	~	~	~	~	~	1 100%~	1 25%~	2 40%~	~	1 33%~	1 50%~
NO	3 60%	70 69%~	~100%	~100%	~	1 33%~	3 75%~	~	~	~	~	~	~	3 75%~	3 60%~	~	~	2 67%~	1 50%~
VALID CASES	5	101	1	1	3	4	4							1	4	5		3	2
NUMBER OF RESPONDENTS	5 100%	101 100%	100%	100%	100%	100%	100%							1 100%	4 100%	5 100%		3 100%	2 100%

[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		
	WORA 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- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.3 YES	3 60%	13 13%	~100%	100%	~33%	1	3 75%	~	~	~	~	~	~	3 75%	3 60%	~	2 67%	1 50%
NO	2 40%	88 87%	~	~	~67%	2	1 25%	~	~	~	~	~	1 100%	1 25%	2 40%	~	1 33%	1 50%
VALID CASES	5	101	1	1	3	4							1	4	5		3	2
NUMBER OF RESPONDENTS	5 100%	101 100%	100%	100%	100%	100%							100%	100%	100%		100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER	
	WORA 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 & FAIR & POOR	NO CCC	NO CCC
Q83.4 YES		43 43%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	5 100%	58 57%	~100%	~100%	~100%	~100%	~	~	~	~	~	~	~	~100%	~100%	~100%	~100%
VALID CASES	5	101	1	1	3	4							1	4	5	3	2
NUMBER OF RESPONDENTS	5 100%	101 100%	100%	100%	100%	100%							100%	100%	100%	100%	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		
	WORA 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 & FAIR & POOR	NO CCC	CCC
Q83.5 YES		6 6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	5 100%	95 94%	~100%	~100%	~100%	~100%	~	~	~	~	~	~	~	~100%	~100%	~100%	~100%	~100%
VALID CASES	5	101	1	1	3	4								1	4	5	3	2
NUMBER OF RESPONDENTS	5 100%	101 100%	100%	100%	100%	100%								100%	100%	100%	100%	100%

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

NQ14 RATING OF ALL CHILD'S HEALTH CARE

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA 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-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
NQ14 0-6	17 9%	286 8%	2 6%	3 6%	7 11%	5 10%	8 6%	~	~	~	~	~	~	5 13%	10 7%	13 7%	3 33%	10 7%	7 11%
7-8	68 35%	994 29%	14 41%	16 33%	22 35%	16 32%	46 37%	~	~	~	~	~	~	11 28%	54 36%	61 34%	2 22%	50 37%	18 30%
9-10	110 56%	2180 63%	18 53%	30 61%	33 53%	29 58%	72 57%	~	~	~	~	~	~	24 60%	85 57%	106 59%	4 44%	74 55%	36 59%
VALID CASES	195	3460	34	49	62	50	126							40	149	180	9	134	61
NUMBER OF RESPONDENTS	195 100%	3460 100%	34 100%	49 100%	62 100%	50 100%	126 100%							40 100%	149 100%	180 100%	9 100%	134 100%	61 100%
MEAN	2.48	2.55	2.47	2.55	2.42	2.48	2.51							2.47	2.50	2.52	2.11	2.48	2.48
p stat_(*=Sig @ p<=.05)		.115	~	~	.402	.969	.393	~	~	~	~	~	~	~	~	~	~	~	.983

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA 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	20 8%	266 6%	1 3%	4 7%	8 10%	7 11%	11 7%	~	~	~	~	~	~	5 10%	14 7%	19 8%	1 13%	13 7%	7 10%
7-8	53 22%	933 22%	10 25%	16 26%	15 19%	12 18%	36 22%	~	~	~	~	~	~	8 16%	44 23%	49 21%	3 38%	38 22%	15 22%
9-10	170 70%	3047 72%	29 73%	41 67%	54 70%	46 71%	116 71%	~	~	~	~	~	~	36 73%	132 69%	164 71%	4 50%	123 71%	47 68%
VALID CASES	243	4246	40	61	77	65	163							49	190	232	8	174	69
NUMBER OF RESPONDENTS	243 100%	4246 100%	40 100%	61 100%	77 100%	65 100%	163 100%							49 100%	190 100%	232 100%	8 100%	174 100%	69 100%
MEAN	2.62	2.65	2.70	2.61	2.60	2.60	2.64							2.63	2.62	2.63	2.38	2.63	2.58
p stat_(*=Sig @ p<=.05)		.307	~.879	.748	.807		.347	~	~	~	~	~	~	~.869		~	~	~.576	

[ASKED IF Q30 = YES]

NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	WORA 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
NQ48 0-6	2 5%	69 9%	~	~	~	13%~	2 8%~	~	~	~	~	~	~	~	2 6%~	2 6%~	~	~	2 8%
7-8	5 13%	186 24%	~	30%~	~	13%~	2 8%~	~	~	~	~	~	~	3 50%~	2 6%~	4 11%~	1 33%~	~	5 20%
9-10	31 82%	524 67%~	5 100%~	7 70%~	7 100%~	12 75%~	20 83%~	~	~	~	~	~	~	3 50%~	28 88%~	29 83%~	2 67%~	13 100%~	18 72%
VALID CASES	38	779	5	10	7	16	24							6	32	35	3	13	25
NUMBER OF RESPONDENTS	38	779	5	10	7	16	24							6	32	35	3	13	25
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%
MEAN	2.76	2.58	3.00	2.70	3.00	2.63	2.75							2.50	2.81	2.77	2.67	3.00	2.64
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		
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN ##	NATV 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	47 18%	652 13%	4 9%	9 14%	17 19%	17 23%	29 16%	~	~	~	~	~	~	11 19%	35 17%	43 17%	4 40%	31 16%	16 22%
7-8	88 33%	1410 29%	20 47%	23 36%	29 33%	16 22%*	64 36%	~	~	~	~	~	~	14 25%	73 35%	86 34%	1 10%	70 36%	18 25%
9-10	133 50%	2826 58%*	19 44%	32 50%	42 48%	40 55%	84 47%	~	~	~	~	~	~	32 56%	99 48%	127 50%	5 50%	94 48%	39 53%
VALID CASES	268	4888	43	64	88	73	177							57	207	256	10	195	73
NUMBER OF RESPONDENTS	268 100%	4888 100%	43 100%	64 100%	88 100%	73 100%	177 100%							57 100%	207 100%	256 100%	10 100%	195 100%	73 100%
MEAN	2.32	2.44	2.35	2.36	2.28	2.32	2.31							2.37	2.31	2.33	2.10	2.32	2.32
p stat_(*=Sig @ p<=.05)		.004*	~.631	.582	.942		.765	~	~	~	~	~	~	.607	.654	~	~	.941	

GETTING NEEDED CARE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	WORA 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
NPRBSEE4 NQ46	2.44	2.27	2.67	2.09	2.56	2.53	2.52						1.71	2.58	2.50	2.00	2.40	2.46
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCARNES4 NQ15	2.56	2.49	2.59	2.49	2.59	2.57	2.61						2.38	2.63	2.59	2.11	2.56	2.55
p stat_(*=Sig @ p<=.05)	.162		~	~	.649	.901	.160	~	~	~	~	~	~	~	~	~	~	.876
COMPOSITE	2.50	2.38	2.63	2.29	2.57	2.55	2.56	x	x	x	x	x	2.05	2.61	2.54	2.06	2.48	2.51
p stat_(*=Sig @ p<=.05)	.000*		~	~	.068	.303	.005*	~	~	~	~	~	~	~	~	~	~	.386

GETTING CARE QUICKLY

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	WORA 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	2.56	2.65	2.75	2.62	2.48	2.45	2.63							2.36	2.67	2.62	2.17	2.71	2.34
p stat_(*=Sig @ p<=.05)	.242		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NAPGET4 NQ6	2.54	2.46	2.59	2.47	2.57	2.54	2.59							2.41	2.59	2.54	2.88	2.58	2.46
p stat_(*=Sig @ p<=.05)	.117		~	~.722			~.221	~	~	~	~	~	~	~.079		~		~.262	
COMPOSITE	2.55	2.56	2.67	2.54	2.52	2.50	2.61	x	x	x	x	x	x	2.38	2.63	2.58	2.52	2.64	2.40
p stat_(*=Sig @ p<=.05)	.890		~.870	.489			~.017*	~	~	~	~	~	~	~.000*		~		~.000*	

HOW WELL DOCTORS COMMUNICATE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NDREXPL4 NQ32	2.81	2.75	2.92	2.77	2.78	2.80	2.85							2.63	2.87	2.83	2.63	2.81	2.82
p stat_(*=Sig @ p<=.05)	.104		~	~	.549	.864	.149	~	~	~	~	~	~	~	~	~	~	~	.886
NDRLSTN4 NQ33	2.76	2.77	2.78	2.70	2.80	2.76	2.80							2.66	2.80	2.77	2.50	2.80	2.68
p stat_(*=Sig @ p<=.05)	.893		~	~	.560	.989	.194	~	~	~	~	~	~	~	~	~	~	~	.198
NDRESPU4 NQ34	2.80	2.81	2.86	2.75	2.78	2.82	2.82							2.76	2.82	2.80	2.63	2.81	2.77
p stat_(*=Sig @ p<=.05)	.852		~	~	.712	.727	.507	~	~	~	~	~	~	~	~	~	~	~	.570
NDRTMEN4 NQ37	2.66	2.57	2.56	2.57	2.69	2.78	2.69							2.50	2.70	2.66	2.50	2.67	2.63
p stat_(*=Sig @ p<=.05)	.068		~	~	.679		.370	~	~	~	~	~	~	~	~	~	~	~	.740
COMPOSITE	2.76	2.72	2.78	2.70	2.76	2.79	2.79	x	x	x	x	x	x	2.64	2.80	2.76	2.56	2.77	2.72
p stat_(*=Sig @ p<=.05)	.302		~	~	.952	.535	.199	~	~	~	~	~	~	~	~	~	~	~	.517

CUSTOMER SERVICE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	WORA 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
NPBCLCS4 NQ50	2.25	2.28	2.22	2.20	2.30	2.29	2.25							2.29	2.24	2.25	2.33	2.24	2.29
p stat_(*=Sig @ p<=.05)	.834		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ51	2.57	2.60	2.67	2.45	2.55	2.71	2.58							2.59	2.57	2.57	2.67	2.52	2.67
p stat_(*=Sig @ p<=.05)	.724		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.41	2.44	2.44	2.33	2.42	2.50	2.41	x	x	x	x	x	x	2.44	2.40	2.41	2.50	2.38	2.48
p stat_(*=Sig @ p<=.05)	.774		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALSK ##	OTHR MUL- TI ##	HIS- PAN- IC IC	NOT HIS- PAN- IC IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NNRXWHY NQ11	2.84	2.87	2.56	2.86	2.76	3.00	2.89						2.71	2.91	2.85	3.00	2.71	2.94
p stat_(*=Sig @ p<=.05)	.580		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NNRXWYNT NQ12	2.51	2.42	2.11	2.43	2.41	2.81	2.58						2.57	2.55	2.51	3.00	2.36	2.64
p stat_(*=Sig @ p<=.05)	.431		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NRXBST NQ13	2.67	2.58	2.33	2.85	2.65	2.71	2.68						2.43	2.77	2.65	2.50	2.57	2.75
p stat_(*=Sig @ p<=.05)	.348		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.67	2.62	2.33	2.71	2.61	2.84	2.72	x	x	x	x	x	2.57	2.74	2.67	2.83	2.55	2.78
p stat_(*=Sig @ p<=.05)	.517		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

ACCESS TO SPECIALIZED SERVICES

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
	WORA TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHT	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER IND/ PAC	ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NEZMDEQ NQ20	2.73	2.30	3.00	2.67	3.00	2.33	2.80							2.60	2.80	2.83	2.00	2.75	2.71	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NEZTHP NQ23	2.46	2.19	3.00	2.50	2.43	2.25	2.60							2.40	2.50	2.59	2.00	2.50	2.44	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NEZTC NQ26	2.28	2.18	3.00	2.08	2.50	2.20	2.24							2.25	2.29	2.29	2.20	2.20	2.30	
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.49	2.22	3.00	2.42	2.64	2.26	2.55	x	x	x	x	x	x	2.42	2.53	2.57	2.07	2.48	2.49	
p stat_(*=Sig @ p<=.05)		.000*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

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

	BANTO T1	BANTO T2	AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	WORA 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	81%	78%	100%	55%	89%	88%	85%							43%	89%	84%	60%	80%	82%
CARNES4 Q15	92%	89%	88%	92%	93%	92%	94%							87%	95%	94%	67%	92%	92%
AVERAGE	86.60	83.54	94.12	73.19	91.17	90.20	89.84	x	x	x	x	x	x	65.02	91.78	89.05	63.33	85.86	87.04

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

	BANTO T1	BANTO T2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	WORA 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	89%	91%	94%	95%	81%	86%	89%							86%	92%	92%	67%	94%	81%
APGET4 Q6	91%	86%	92%	85%	92%	93%	92%							86%	92%	90%	100%	92%	87%
AVERAGE	89.69	88.77	93.03	90.17	86.31	89.92	90.60	x	x	x	x	x	x	86.04	92.10	90.95	83.33	93.06	84.07

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	WORA 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	97%	95%	100%	95%	98%	94%	99%							89%	99%	98%	88%	96%	98%
DRLSTN4 Q33	95%	95%	97%	98%	94%	92%	98%							89%	97%	95%	88%	96%	93%
DRESPU4 Q34	96%	96%	100%	95%	94%	94%	98%							92%	97%	96%	88%	97%	93%
DRTMEN4 Q37	91%	90%	89%	89%	93%	94%	93%							84%	94%	92%	75%	92%	90%
AVERAGE	94.7	94.0	96.5	94.3	94.9	93.5	96.9	x	x	x	x	x	x	88.8	96.8	95.2	84.4	95.1	93.8

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

	BANTO T1	BANTO T2	AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	WORA 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
PBCLCS4 Q50	75%	78%	78%	70%	75%	79%	78%							71%	76%	75%	67%	74%	76%
CSRESP Q51	89%	91%	100%	90%	80%	93%	90%							88%	89%	89%	83%	88%	90%
AVERAGE	81.75	84.81	88.89	80.00	77.50	85.71	83.75	x	x	x	x	x	x	79.41	82.61	82.14	75.00	80.95	83.33

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	ILND NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NRXWHY Q11	92%	94%	78%	93%	88%	100%	95%							86%	95%	92%	100%	86%	97%
NRXWYNT Q12	75%	71%	56%	71%	71%	90%	79%							79%	77%	75%	100%	68%	82%
RXBST Q13	83%	79%	67%	92%	82%	86%	84%							71%	88%	83%	75%	79%	88%
AVERAGE	83.5	81.2	66.7	85.5	80.4	92.1	86.0	x	x	x	x	x	x	78.6	87.0	83.5	91.7	77.4	88.8

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN ##	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
EZMDEQ Q20	87%	76%	100%	83%	100%	67%	90%							80%	90%	92%	50%	88%	86%
EZTHP Q23	81%	72%	100%	75%	71%	88%	87%							80%	80%	86%	50%	88%	78%
EZTC Q26	75%	71%	100%	67%	75%	80%	72%							63%	77%	76%	60%	70%	77%
AVERAGE	80.8	72.8	100	75.0	82.1	78.1	82.9	x	x	x	x	x	x	74.2	82.5	84.8	53.3	81.7	80.1

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	WORA 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	89%	87%	94%	88%	91%	84%	88%							92%	88%	89%	88%	89%	90%
DRUNCON Q43	93%	90%	100%	100%	92%	86%	94%							92%	93%	95%	67%	95%	92%
DRUNFAM Q44	92%	85%	100%	100%	88%	85%	92%							92%	91%	94%	67%	91%	92%
AVERAGE	91.3	87.5	98.1	96.1	90.4	85.1	91.0	x	x	x	x	x	x	92.2	90.8	92.7	73.6	91.6	91.4

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
			<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
HELPCONT Q18	85%	92%	100%	80%	78%	92%							100%	86%	89%	100%	78%	91%	
HLPCOORD Q29	67%	62%	78%	64%	67%	63%	71%						67%	66%	63%	86%	58%	73%	
AVERAGE	75.8	77.1	77.8	82.1	73.3	70.5	81.3	x	x	x	x	x	x	83.3	75.8	76.0	92.9	68.1	82.1

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

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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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Correct
Mark 

Incorrect
Marks 

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

Yes → *Go to Question 1*
 No

↓ **START HERE** ↓

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

- Yes → *Go to Question 3*
- No

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

YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

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

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

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

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

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

- Never
- Sometimes
- Usually
- Always

YOUR PERSONAL DOCTOR

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

- Yes
- No → Go to Question 24

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → Go to Question 23

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

- Never
- Sometimes
- Usually
- Always

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

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



GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

- Yes
 No → *Go to Question 28*

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

- Never
 Sometimes
 Usually
 Always

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

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

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

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

YOUR HEALTH PLAN

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

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

- Yes
 No → *Go to Question 30*

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

- Never
 Sometimes
 Usually
 Always

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

- Yes
 No → *Go to Question 33*

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

- Never
 Sometimes
 Usually
 Always

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

- Never
 Sometimes
 Usually
 Always

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

- Yes
 No → *Go to Question 35*

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

- Never
- Sometimes
- Usually
- Always

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

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

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

- Yes
- No → *Go to Question 35c*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 35e*

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

- Never
- Sometimes
- Usually
- Always

ADDITIONAL QUESTIONS

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

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes, definitely
- Yes, somewhat
- No

ACCESS TO DENTAL CARE

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

- Yes
- No



ABOUT YOU

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

- Yes
- No → *Go to Question 35l*

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

- Never
- Sometimes
- Usually
- Always

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

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

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

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

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

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

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

- Excellent
- Very Good
- Good
- Fair
- Poor

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

- Excellent
- Very Good
- Good
- Fair
- Poor

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

- Yes
- No
- Don't know

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

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

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

- Never
- Sometimes
- Usually
- Always



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

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No
- Don't know

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

- Yes
- No
- Don't know

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

- Yes
- No

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

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

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

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

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

- Yes
- No → *Go to Question 50*

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

- Yes
- No

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

- Yes
- No → *Go to Question 52*

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

- Yes
- No

52. What is your age?

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



53. Are you male or female?

- Male
- Female

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

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

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

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

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

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

57. Did someone help you complete this survey?

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

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

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

THANK YOU

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

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

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



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

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

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Correct
Mark 

Incorrect
Marks



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

- Yes → *Go to Question 1*
- No

↓ **START HERE** ↓

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

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

- Yes → *Go to Question 3*
- No

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

YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS

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

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

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

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

- Yes
- No

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

- Yes
- No

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

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

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No → *Go to Question 19*

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

- Yes
- No

SPECIALIZED SERVICES

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

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

- Yes
- No → *Go to Question 22*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 25*



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 28*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

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

- Yes
- No → *Go to Question 30*

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

- Yes
- No

YOUR CHILD'S PERSONAL DOCTOR

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

- Yes
- No → *Go to Question 45*

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

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

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

- Never
- Sometimes
- Usually
- Always

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

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



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

- Yes
- No

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

- Yes
- No

GETTING HEALTH CARE FROM SPECIALISTS

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

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

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

- Yes
- No → *Go to Question 49*

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

- Never
- Sometimes
- Usually
- Always

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

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

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

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

YOUR CHILD'S HEALTH PLAN

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

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

- Yes
- No → *Go to Question 52*

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

- Never
- Sometimes
- Usually
- Always



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → **Go to Question 54**

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

- Never
- Sometimes
- Usually
- Always

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

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

PRESCRIPTION MEDICINES

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

- Yes
- No → **Go to Question 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



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

13. 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 a toda la atención médica que 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

14. En los últimos 6 meses, ¿con qué frecuencia le fue fácil conseguir la atención médica, las pruebas o el tratamiento que usted necesitaba?
- Nunca
 A veces
 La mayoría de las veces
 Siempre

SU DOCTOR PERSONAL

15. El doctor personal es aquel a quien usted va si necesita un chequeo, quiere pedir consejo sobre un problema de salud o si se enferma o lastima. ¿Tiene usted un doctor personal?
- Sí
 No → *Pase a la pregunta 24*
16. En los últimos 6 meses, ¿cuántas veces fue a ver a su doctor personal para recibir atención médica para usted mismo?
- Ninguna vez → *Pase a la pregunta 23*
 1 vez
 2
 3
 4
 5 a 9
 10 veces o más
17. En los últimos 6 meses, ¿con qué frecuencia su doctor personal le explicó las cosas de una manera fácil de entender?
- Nunca
 A veces
 La mayoría de las veces
 Siempre

18. En los últimos 6 meses, ¿con qué frecuencia su doctor personal le escuchó con atención?
- Nunca
 A veces
 La mayoría de las veces
 Siempre
19. En los últimos 6 meses, ¿con qué frecuencia su doctor personal demostró respeto por lo que usted tenía que decir?
- Nunca
 A veces
 La mayoría de las veces
 Siempre
20. En los últimos 6 meses, ¿con qué frecuencia su doctor personal pasó suficiente tiempo con usted?
- Nunca
 A veces
 La mayoría de las veces
 Siempre
21. En los últimos 6 meses, ¿lo atendió algún doctor u otro profesional médico además de su doctor personal?
- Sí
 No → *Pase a la pregunta 23*
22. En los últimos 6 meses, ¿con qué frecuencia parecía su doctor personal estar informado y al día acerca de la atención que usted había recibido de estos doctores u otros profesionales médicos?
- Nunca
 A veces
 La mayoría de las veces
 Siempre
23. Usando un número del 0 al 10, el 0 siendo el peor doctor personal posible y el 10 el mejor doctor personal posible, ¿qué número usaría para calificar a su doctor personal?
- 0 1 2 3 4 5 6 7 8 9 10
- El peor doctor personal posible El mejor doctor personal posible



LA ATENCIÓN MÉDICA QUE 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 condescendiente, 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



35j. En los últimos 6 meses, ¿fue usted a una oficina o clínica de un dentista para cuidado?

- Sí
- No → *Pase a la pregunta 35l*

35k. En los últimos 6 meses, ¿con qué frecuencia el personal dental o el dentista le explicaron lo que le hacían mientras lo/la trataron?

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

35l. Si usted trató de conseguir una cita para usted con un dentista que se especialice en un tipo de cuidado dental en particular (como una endodoncia (root canal) o enfermedad de las encías) en los últimos 6 meses, ¿con qué frecuencia le dieron una cita tan pronto la quería?

- Nunca
- A veces
- La mayoría de las veces
- Siempre
- No traté de conseguir una cita con un especialista dental para mí en los últimos 6 meses.

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

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

35n. 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?

- | | | | | | | | | | | |
|------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <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 |
| Extremadamente difícil | | | | | | Extremadamente fácil | | | | |

ACERCA DE USTED

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

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

- Excelente
- Muy buena
- Buena
- Regular
- Mala

38. Desde el 1 de julio del 2015, ¿le han puesto la vacuna para la influenza o gripe ya sea en inyección o con un rociador o spray nasal?

- Sí
- No
- No sé

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

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

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

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



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

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

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

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

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

- Sí
- No
- No sé

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

- Sí
- No
- No sé

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

- Sí
- No

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

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

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

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

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

- Sí
- No → *Pase a la pregunta 50*

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

- Sí
- No

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

- Sí
- No → *Pase a la pregunta 52*

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

- Sí
- No

52. ¿Qué edad tiene?

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



53. ¿Es usted hombre o mujer?

- Hombre
- Mujer

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

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

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

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

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

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

57. ¿Le ayudó alguien a completar esta encuesta?

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

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

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

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

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

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



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

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

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

42. ¿Tiene su niño alguna condición médica, de comportamiento u otra condición de salud que ha durado por más de 3 meses?

- Sí
 No → *Pase a la pregunta 45*

43. ¿El doctor o enfermera personal de su niño entiende cómo estas condiciones médicas, de comportamiento u otras condiciones de salud afectan la vida cotidiana de su niño?

- Sí
 No

44. ¿El doctor o enfermera personal de su niño entiende cómo estas condiciones médicas, de comportamiento u otras condiciones de salud afectan la vida cotidiana de su familia?

- Sí
 No

LA ATENCIÓN MÉDICA QUE RECIBIÓ DE ESPECIALISTAS

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

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

- Sí
 No → *Pase a la pregunta 49*

46. En los últimos 6 meses, ¿con qué frecuencia consiguió una cita con un especialista para su niño tan pronto como él o ella la necesitaba?

- Nunca
 A veces
 La mayoría de las veces
 Siempre

47. ¿Cuántos especialistas ha visto su niño en los últimos 6 meses?

- Ninguno → *Pase a la pregunta 49*
 1 especialista
 2
 3
 4
 5 especialistas o más

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

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

EL PLAN DE SALUD DE SU NIÑO

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

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

- Sí
 No → *Pase a la pregunta 52*

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

- Nunca
 A veces
 La mayoría de las veces
 Siempre

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

- Nunca
 A veces
 La mayoría de las veces
 Siempre

52. En los últimos 6 meses, ¿le dio el plan de salud de su niño algún formulario para llenar?

- Sí
 No → *Pase a la pregunta 54*

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

- Nunca
 A veces
 La mayoría de las veces
 Siempre

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

0 1 2 3 4 5 6 7 8 9 10
El peor plan de salud posible El mejor plan de salud posible

MEDICINAS RECETADAS

55. En los últimos 6 meses, ¿consiguió alguna medicina recetada o renovó una receta para una medicina recetada para su niño?

- Sí
 No → *Pase a la pregunta 57a*

56. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir medicinas recetadas para su niño a través de su plan de salud?

- Nunca
 A veces
 La mayoría de las veces
 Siempre



57. ¿Alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a conseguir las medicinas recetadas para su niño?

- Sí
- No

ACCESO A CUIDADO DENTAL

57a. Un dentista regular es a quien su niño va a ver para un chequeo y limpieza o cuando tiene una carie o un dolor de diente. ¿Su niño tiene un dentista regular?

- Sí
- No

57b. En los últimos 6 meses, ¿fué su niño a una oficina o clínica de un dentista para cuidado?

- Sí
- No → *Pase a la pregunta 57d*

57c. En los últimos 6 meses, ¿con qué frecuencia el personal dental o el dentista le explicaron lo que le hacían mientras trataron a su niño?

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

57d. En los últimos 6 meses, si su niño necesitó ver a un dentista de inmediato por una emergencia dental, ¿el/ella pudo ver a un dentista tan pronto como usted quería?

- Nunca
- A veces
- La mayoría de las veces
- Siempre
- Mi niño no tuvo una emergencia dental en los últimos 6 meses

57e. Usando un número del 0 al 10, el 0 siendo extremadamente difícil y el 10 extremadamente fácil, ¿qué número usaría para calificar cuán fácil le fue encontrar un dentista para su niño?

-
- 0 1 2 3 4 5 6 7 8 9 10
- Extremadamente difícil Extremadamente fácil

ACERCA DE USTED Y DE SU NIÑO

58. En general, ¿cómo calificaría toda la salud de su niño?

- Excelente
- Muy buena
- Buena
- Regular
- Mala

59. En general, ¿cómo calificaría toda la salud mental o emocional de su niño?

- Excelente
- Muy buena
- Buena
- Regular
- Mala

60. ¿Actualmente necesita o usa su niño una medicina recetada por un doctor (aparte de vitaminas)?

- Sí
- No → *Pase a la pregunta 63*

61. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?

- Sí
- No → *Pase a la pregunta 63*

62. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?

- Sí
- No



63. ¿Necesita o usa su niño más servicios médicos, de salud mental o educativos de lo que es normal para la mayoría de los niños de la misma edad?

- Sí
- No → *Pase a la pregunta 66*

64. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?

- Sí
- No → *Pase a la pregunta 66*

65. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?

- Sí
- No

66. ¿Está su niño limitado o impedido de alguna manera en su habilidad de hacer lo que pueden hacer la mayoría de los niños de la misma edad?

- Sí
- No → *Pase a la pregunta 69*

67. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?

- Sí
- No → *Pase a la pregunta 69*

68. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?

- Sí
- No

69. ¿Necesita o recibe su niño terapia especial, tal como terapia física, ocupacional o del habla?

- Sí
- No → *Pase a la pregunta 72*

70. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?

- Sí
- No → *Pase a la pregunta 72*

71. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?

- Sí
- No

72. ¿Tiene su niño algún problema emocional, de desarrollo o de comportamiento, para el cual necesita o recibe tratamiento o consejería?

- Sí
- No → *Pase a la pregunta 74*

73. ¿Ha durado este problema o se espera que dure por lo menos 12 meses?

- Sí
- No

74. ¿Qué edad tiene su niño?

- Menos de un año

AÑOS (escriba la respuesta)

75. ¿Es su niño de sexo masculino o femenino?

- Masculino
- Femenino

76. ¿Es su niño de origen o ascendencia hispana o latina?

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



77. ¿A qué raza pertenece su niño?

Marque una o más.

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

78. ¿Qué edad tiene usted?

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

79. ¿Es usted hombre o mujer?

- Hombre
- Mujer

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

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

81. ¿Qué relación tiene con el niño?

- Madre o padre
- Abuelo o abuela
- Tía o tío
- Hermano o hermana mayor
- Otro familiar
- Tutor legal del niño
- Otra persona

82. ¿Le ayudó alguien a completar esta encuesta?

- Sí → *Pase a la pregunta 83*
- No → *Gracias. Por favor devuelva esta encuesta en el sobre con el porte o franqueo pagado.*

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

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

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

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

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





898-12



12

CZPCS

DIAL.SCREEN

DS. INTERVIEWER: YOU MAY DO THE INTERVIEW WITH ONLY THE [NAMED
RESPONDENT. NO PROXIES WILL BE ACCEPTED/PARENT/GUARDIAN/OR ADULT WHO
KNOWS MOST ABOUT [MEMBER NAME] 'S HEALTH CARE] .

PHONE NUMBER ---> [1 CELL PHONE - HAND DIAL (###) ### - ##### /***
-*]

Hello, I'm calling about a health care survey on behalf of
[HEALTH PLAN NAME]. This call will be recorded and may be
monitored for quality and
training purposes. May I please speak with [[MEMBER FIRST NAME]
[MEMBER LAST NAME]/the person who knows the most about [NAME OF
CHILD]'s health care)?

We are conducting an important study to find out how satisfied
[people/families] are with [HEALTH PLAN NAME]. The results of the
study will help [HEALTH PLAN NAME] improve the care they provide
and will also help consumers when they choose health care plans.

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

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

IF DIAL.SCREEN = 01, GO TO START2

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

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

RETURN TO COVERSHEET

MAIL.SCREEN

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

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

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

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

1. CONTINUE
2. REFUSAL BECAUSE ALREADY COMPLETED AND MAILED SURVEY BACK
3. REFUSAL
4. APPOINTMENT
5. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)

IF MAIL.SCREEN = 1, GO TO START2
RETURN TO COVERSHEET

SEX

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

1. MALE
2. FEMALE

SPAN.VAR

(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

1. Spanish
2. English

MEMBER

Q1. / MEMBER

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

Our records show that [you/your child] [are/is] now in [HEALTH PLAN NAME]. Is that right?

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

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

DK/REFUSAL/NOT ASCERTAINED

NPLNAME

Q2. / NPLNAME

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

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS [HEALTH PLAN NAME]]

[(ENTER 5 IF R SAYS: MEDICAID)]

(IF R SAYS SOMETHING CLOSE TO [HEALTH PLAN NAME], ENTER "2")

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

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

PLNAME

Q2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)



CK.PLMSTCR:

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

INTRO.INCARE

INTRO.INCARE

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

INCARE

Q3. / INCARE

In the last [12/6] months, did [you/your child] have an illness, injury, or condition that NEEDED CARE RIGHT AWAY in a clinic, emergency room, or doctor's office?

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

DK/REFUSAL/NOT ASCERTAINED --> APMAKE4

CARSN4

Q4. / CARSN4

In the last [12/6] months, when [you/your child] NEEDED CARE RIGHT AWAY, how often did [you/your child] get care as soon as [you/+[he/she]] needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

APMAKE4

Q5. / APMAKE4

In the last [12/6] months, did you make any appointments for a CHECK-UP OR ROUTINE CARE [/for your child] at a doctor's office or clinic?

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

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

APGET4

Q6. / APGET4

In the last [12/6] months, [/when you made an appointment for a CHECK-UP OR ROUTINE CARE for your child at a doctor's office or clinic,] how often did you get an appointment [for a CHECK-UP OR ROUTINE CARE at a doctor's office or clinic/] as soon as [you/your child] needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

OFCTIM4

Q7. / OFCTIM4

In the last [12/6] months, NOT counting the times [you/your child] went to an emergency room, how many times did [you/+[he/she]] go to a doctor's office or clinic [to get health care for yourself/to get health care]

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

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

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

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

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

IF OFCTIM4=0 OR DK/REFUSAL AND QNAIRE <05 THEN GO TO PRSNLD4

IF OFCTIM4=0 OR DK/REFUSAL AND QNAIRE >05 THEN GO TO CHSCHL

PRVENT5

Q8. / PRVENT5

In the last [12/6] months, did you and [a/your child's] doctor or other health provider talk about specific things you could do to prevent illness [/in your child?] ?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

IF qnaire<5 then go to RXSTP

OFTQUES

[0/0/0/0/9/9]. / OFTQUES

In the last [12/6] months, how often did you have your questions answered by your child's doctor or other health providers? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXSTP

[9/9/9/9/10/10]. / RXSTP

In the last [12/6] months, did you and [a/your child's] doctor or other health provider talk about starting or stopping a prescription medicine [/for your child] ?

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

DK/REFUSAL/NOT ASCERTAINED --> RTALLCR

NRXWHY

[10/10/10/10/11/11]. / NRXWHY

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

NRXWYNT

[11/11/11/11/12/12]. / NRXWYNT

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RXBST

[12/12/12/12/13/13]. / RXBST

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RTALLCR

[13/13/13/13/14/14]. / RTALLCR

Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all [your/your child's] health care in the last [12/6] months?

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

00 01 02 03 04 05 06 07 08 09 10

DK/REFUSAL/NOT ASCERTAINED

CARNES4

[14/14/14/14/15/15]. / CARNES4

In the last [12/6] months, how often was it easy to get the care, tests, or treatment [you/your child] needed? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHSCHL

[0/0/0/0/16/16]. / CHSCHL

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

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

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

CONTSCHL

[0/0/0/0/17/17]. / CONTSCHL

In the last [12/6] months, did you need your child's doctors or other health providers to contact a school or daycare center about your child's health or health care?

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

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

HELPCONT

[0/0/0/0/18/18]. / HELPCONT

In the last [12/6] months, did you get the help you needed from your child's doctors or other health providers in contacting your child's school or daycare?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

MEDEQUIP

[0/0/0/0/19/19]. / MEDEQUIP

Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment. In the last [12/6] months, did you get or try to get any special medical equipment or devices for your child?

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

DK/REFUSAL/NOT ASCERTAINED --> SPCTHY

EZMDEQ

[0/0/0/0/20/20]. / EZMDEQ

In the last [12/6] months, how often was it easy to get special medical equipment or devices for your child? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPMDEQ

[0/0/0/0/21/21]. / HELPMDEQ

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

SPCTHY

[0/0/0/0/22/22]. / SPCTHY

In the last [12/6] months, did you get or try to get special therapy such as physical, occupational, or speech therapy for your child?

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

DK/REFUSAL/NOT ASCERTAINED --> TCPBLM

EZTHP

[0/0/0/0/23/23]. / EZTHP

In the last [12/6] months, how often was it easy to get this therapy for your child? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTHP

[0/0/0/0/24/24]. / HELPTHP

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

TCPBLM

[0/0/0/0/25/25]. / TCPBLM

In the last [12/6] months, did you get or try to get treatment or counseling for your child for an emotional, developmental, or behavioral problem?

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

DK/REFUSAL/NOT ASCERTAINED --> PLUSCARE

EZTC

[0/0/0/0/26/26]. / EZTC

In the last [12/6] months, how often was it easy to get this treatment or counseling for your child? Would you say...

(READ LIST)

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

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTC

[0/0/0/0/27/27]. / HELPTC

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

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

PLUSCARE

[0/0/0/0/28/28]. / PLUSCARE

In the last [12/6] months, did your child get care from more than one kind of health care provider or use more than one kind of health care service?

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

DK/REFUSAL/NOT ASCERTAINED --> PRSNLD4

HLPCOORD

[0/0/0/0/29/29]. / HLPCOORD

In the last [12/6] months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these different providers or services?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

PRSNLD4

[15/15/15/15/30/30]. / PRSNLD4

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

[Do you/Does your child] have a personal doctor?

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

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

DRTMS

[16/16/16/16/31/31]. / DRTMS

In the last [12/6] months, how many times did [you/your child] visit [your/[his/her]] personal doctor [to get care for yourself/for care] ?

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

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

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

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

IF QNAIRE= ADULT MEDICAID (02), GO TO DREXPL4

PBDRLNG

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?