



AllCare CCO
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 AllCare CCO members. AllCare CCO 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	
	All Care Health Plan	Overall	All Care Health Plan	Overall
**First mailing - sent	900	16200	900	16200
*First mailing - usable survey returned	172	2801	124	2168
Second mailing - sent	732	13319	752	13616
*Second mailing - usable survey returned	51	978	53	886
*Phone - usable surveys	72	1303	133	2255
Total - usable surveys	295	5082	310	5309
†Ineligible: According to population criteria‡	15	346	13	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	50	848	40	710
Refusal/Returned survey blank	36	672	55	829
Nonresponse - Unavailable by mail or phone	494	8962	481	9093
Adjusted Response Rate	33.7%	32.7%	35.0%	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	234 46.3%	115 39.0%	-7.35%
Female	271 53.7%	180 61.0%	7.35%
18-24	89 17.6%	26 8.8%	-8.81%
25-34	144 28.5%	65 22.0%	-6.48%
35-44	103 20.4%	42 14.2%	-6.16%
45-54	80 15.8%	58 19.7%	3.82%
55-64	67 13.3%	88 29.8%	16.56%
65-74	17 3.4%	9 3.1%	-0.32%
75 or Older	5 1.0%	7 2.4%	1.38%

Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	252 50.6%	163 52.6%	1.98%
Female	246 49.4%	147 47.4%	-1.98%
<3	118 23.7%	58 18.7%	-4.99%
4-7	130 26.1%	83 26.8%	0.67%
8-12	143 28.7%	86 27.7%	-0.97%
13 or older	107 21.5%	83 26.8%	5.29%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER			
	AHP 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	
Q1 YES	292 100%	5060 100%	25 100%	59 100%	38 100%	53 100%	85 100%	17 100%	215 100%	~	~	~	~	~100%	25 100%	19 100%	257 100%	204 100%	73 100%	106 100%	174 100%
NOT ANSWERED		3 22		1		2		2							3	1	2	3			
VALID CASES	292	5060	25	59	38	53	85	17	215					25	19	257	204	73	106	174	
NUMBER OF RESPONDENTS	295 100%	5082 100%	25 100%	60 100%	38 100%	55 100%	85 100%	17 100%	217 100%					100%	25 100%	19 100%	260 100%	205 100%	75 100%	109 100%	174 100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER			
	AHP 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
Q3 YES	109 38%	2017 41%	9 36%	22 37%	15 41%	24 44%	27 32%	4 25%	80 37%	~	~	~	~	~	10 40%	7 37%	94 37%	65 32%*	37 51%*	30 28%*	73 43%*
NO	180 62%	2921 59%	16 64%	38 63%	22 59%	30 56%	58 68%	12 75%	135 63%	~	~	~	~	~	15 60%	12 63%	163 63%	139 68%*	36 49%*	79 72%*	98 57%*
NOT ANSWERED	6	144			1	1	1	2								3	1	2		3	
VALID CASES	289	4938	25	60	37	54	85	16	215					25	19	257	204	73	109	171	
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174	
	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					
	AHP	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/		NOT	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	GOOD	FAIR				
									#	##	##	##	##	TI	IC	IC	&			
									WHTE						GOOD	POOR	MALE			
															POOR		MALE			
Q4																				
NEVER	5	42		2	2		1		5						5	4	1	2	3	
	5%	2%		~ 10%	~ 13%		~ 4%		7%						6%	7%	3%	7%	5%	
SOMETIMES	12	268	1	4	1	4	1		8						2	9	4	7	3	8
	12%	15%	11%	19%	7%	19%	4%		11%						29%	10%	7%	21%	10%	12%
USUALLY	34	466	4	6	5	9	8	1	27					4	32	20	13	13	20	
	33%	26%	44%	29%	33%	43%	32%	33%	37%					40%	37%	33%	38%	43%	30%	
ALWAYS	51	1045	4	9	7	8	15	2	33					6	5	41	33	13	12	35
	50%	57%	44%	43%	47%	38%	60%	67%	45%					60%	71%	47%	54%	38%	40%	53%
#ALWAYS + USUALLY (NET)	85	1511	8	15	12	17	23	3	60					10	5	73	53	26	25	55
	83%	83%	89%	71%	80%	81%	92%	100%	82%					100%	71%	84%	87%	76%	83%	83%
TOP BOX SCORE	51	1045	4	9	7	8	15	2	33					6	5	41	33	13	12	35
	50%	57%	44%	43%	47%	38%	60%	67%	45%					60%	71%	47%	54%	38%	40%	53%
NOT ANSWERED	7	196		1		3	2	1	7						7	4	3		7	
VALID CASES	102	1821	9	21	15	21	25	3	73					10	7	87	61	34	30	66
NUMBER OF RESPONDENTS	109	2017	9	22	15	24	27	4	80					10	7	94	65	37	30	73
	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						
	AHP	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-	HIS-	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE		
									#	##	##	##	##	TI					FE-		
									WHTE										MALE		
Q5																					
YES	198	3365	13	42	22	41	57	14	150					17	13	177	130	58	65	127	
	69%	68%	54%	70%	58%	77%	67%	82%	70%	~	~	~	~	~	68%	68%	69%	64%*	77%*	60%*	74%*
NO	91	1561	11	18	16	12	28	3	64					8	6	80	72	17	44	44	
	31%	32%	46%	30%	42%	23%	33%	18%	30%	~	~	~	~	32%	32%	31%	36%*	23%*	40%*	26%*	
NOT ANSWERED	6	156	1				2		3							3	3			3	
VALID CASES	289	4926	24	60	38	53	85	17	214					25	19	257	202	75	109	171	
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174	
	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						ETHNIC-ITY	HEALTH STATUS		GENDER		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER HAW/ IND/ PAC ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	MALE	FE-MALE
Q6 NEVER	2 1%	83 3%*	~	~	1 5%~	~	1 2%	~	0.7%~	~	~	~	~	~	~	2 1%~	2 2%	~	1 2%	1 0.9%
SOMETIMES	32 17%	590 19%	7 58%~	5 13%~	3 14%~	8 21%~	8 15%	1 8%~	26 19%~	~	~	~	~	1 6%~	3 23%~	29 18%~	20 16%	12 23%	11 18%	21 18%
USUALLY	57 31%	884 29%	4 33%~	16 41%~	5 24%~	14 37%~	15 29%	2 15%~	45 33%~	~	~	~	~	7 41%~	1 8%~	54 33%~	37 30%	18 35%	17 28%	39 33%
ALWAYS	92 50%	1472 49%	1 8%~	18 46%~	12 57%~	16 42%~	28 54%	10 77%~	64 47%~	~	~	~	~	9 53%~	9 69%~	78 48%~	63 52%	22 42%	32 52%	56 48%
#ALWAYS + USUALLY (NET)	149 81%	2356 78%	5 42%~	34 87%~	17 81%~	30 79%~	43 83%	12 92%~	109 80%~	~	~	~	~	16 94%~	10 77%~	132 81%~	100 82%	40 77%	49 80%	95 81%
TOP BOX SCORE	92 50%	1472 49%	1 8%~	18 46%~	12 57%~	16 42%~	28 54%	10 77%~	64 47%~	~	~	~	~	9 53%~	9 69%~	78 48%~	63 52%	22 42%	32 52%	56 48%
NOT ANSWERED	15	336	1	3	1	3	5	1	14						14	8	6	4	10	
VALID CASES	183	3029	12	39	21	38	52	13	136					17	13	163	122	52	61	117
NUMBER OF RESPONDENTS	198	3365	13	42	22	41	57	14	150					17	13	177	130	58	65	127
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q5 = YES]

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-#	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	73 25%	1242 26%	10 40%	18 30%	10 26%	13 24%	17 20%	3 18%	53 25%	~	~	~	~	~	6 25%	6 32%	65 25%	62 30%*	9 12%*	35 32%*	37 22%
1 TIME	64 22%	927 19%	3 12%	16 27%	6 16%	10 19%	24 29%	3 18%	47 22%	~	~	~	~	~	7 29%	3 16%	57 22%	51 25%	11 15%	25 23%	37 22%
2	53 18%	878 18%	7 28%	8 13%	6 16%	12 22%	12 14%	5 29%	44 20%	~	~	~	~	~	1 4%	3 16%	49 19%	38 19%	12 16%	21 19%	31 18%
3	34 12%	581 12%	1 4%	5 8%	5 13%	10 19%	11 13%	2 12%	27 13%	~	~	~	~	~	6 25%	34 ~	21 13%	12 16%	14 13%	20 12%	
4	20 7%	402 8%	~	3 5%	6 16%	1 2%*	7 8%	1 6%	13 6%	~	~	~	~	~	1 4%	3 16%	15 6%	10 5%	8 11%	5 5%	13 8%
5 TO 9	37 13%	571 12%	4 16%	7 12%	4 11%	8 15%	10 12%	2 12%	25 12%	~	~	~	~	~	2 8%	4 21%	30 12%	17 8%*	19 26%*	7 6%*	28 16%*
10 OR MORE TIMES	7 2%	248 5%*	~	3 5%	1 3%	~	2 2%	1 6%	6 3%	~	~	~	~	~	1 4%	7 ~	5 3%	2 2%	2 3%	2 2%	5 3%
NOT ANSWERED	7	233				1	2		2						1	3	1	2		3	
VALID CASES	288	4849	25	60	38	54	83	17	215						24	19	257	204	73	109	171
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217						25	19	260	205	75	109	174
	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			
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV ILND ###	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q8 #YES	161 77%	2535 72%	9 60%~	26 63%~	22 79%~	35 88%~	52 81%	13 93%~	120 76%	~	~	~	~	~	17 94%~	10 77%~	145 77%~	104 75%	52 83%	58 81%	100 76%
NO	49 23%	984 28%	6 40%~	15 37%~	6 21%~	5 13%~	12 19%	1 7%~	38 24%	~	~	~	~	~	1 6%~	3 23%~	43 23%~	35 25%	11 17%	14 19%	32 24%
NOT ANSWERED	5	88	1			1	2		4							4	3	1	2	2	
VALID CASES	210	3519	15	41	28	40	64	14	158					18	13	188	139	63	72	132	
NUMBER OF RESPONDENTS	215	3607	15	42	28	41	66	14	162					18	13	192	142	64	74	134	
	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					
	AHP	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			PAN-	GOOD	FAIR			
									AMER	ILLND	NATV	OTHR	MUL-	IC	IC	&	&			
									#	##	##	##	##	TI		GOOD	POOR			
									WHTE								MALE			
																	MALE			
Q9																				
YES	106	1857	3	18	18	27	28	8	77					14	7	95	64	38	35	68
	51%	53%	20%~	44%~	64%~	69%~	44%	57%~	49%	~	~	~	~	~ 78%	54%~	51%~	46%	61%*	49%	52%
NO	103	1655	12	23	10	12	36	6	80					4	6	92	75	24	37	63
	49%	47%	80%~	56%~	36%~	31%~	56%	43%~	51%	~	~	~	~	~ 22%	46%~	49%~	54%	39%*	51%	48%
NOT ANSWERED	6	95		1		2	2		5						5	3	2		2	3
VALID CASES	209	3512	15	41	28	39	64	14	157					18	13	187	139	62	72	131
NUMBER OF RESPONDENTS	215	3607	15	42	28	41	66	14	162					18	13	192	142	64	74	134
	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	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2																			
	AHP	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-	IC	IC	&	&	MALE		
									AMER					TI			GOOD	POOR	MALE		
									WHTE	#	##	##	##	##			GOOD	POOR	MALE		
Q10																					
#YES	96	1690	2	16	15	25	27	7	70					12	6	86	59	33	34	59	
	91%	93%	67%~	89%~	83%~	93%~	96%~	100%~	92%~	~	~	~	~	~	86%~	86%~	91%~	94%~	87%~	97%~	88%~
NO	9	121	1	2	3	2	1		6					2	1	8	4	5	1	8	
	9%	7%	33%~	11%~	17%~	7%~	4%~		8%~	~	~	~	~	~	14%~	14%~	9%~	6%~	13%~	3%~	12%~
NOT ANSWERED	1	46						1	1							1	1			1	
VALID CASES	105	1811	3	18	18	27	28	7	76					14	7	94	63	38	35	67	
NUMBER OF RESPONDENTS	106	1857	3	18	18	27	28	8	77					14	7	95	64	38	35	68	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

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

Q11 DID YOU AND A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT NOT WANT TO TAKE A MEDICINE?

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2																		
	AHP	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	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
Q11																				
#YES	82	1346	2	14	16	18	23	6	58					13	4	75	52	27	26	54
	79%	74%	67%~	82%~	89%~	67%~	82%~	86%~	77%~	~	~	~	~	~ 93%~	57%~	81%~	83%~	73%~	74%~	82%~
NO	22	462	1	3	2	9	5	1	17					1	3	18	11	10	9	12
	21%	26%	33%~	18%~	11%~	33%~	18%~	14%~	23%~	~	~	~	~	~ 7%~	43%~	19%~	17%~	27%~	26%~	18%~
NOT ANSWERED	2	49		1				1	2							2	1	1		2
VALID CASES	104	1808	3	17	18	27	28	7	75					14	7	93	63	37	35	66
NUMBER OF RESPONDENTS	106	1857	3	18	18	27	28	8	77					14	7	95	64	38	35	68
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	AHP 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 ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE- MALE
Q12 #YES	81 79%	1378 77%	3 100%~	16 89%~	15 83%~	17 63%~	20 77%~	6 86%~	55 74%~	~	~	~	~	~	12 86%~	6 86%~	71 77%~	50 82%~	28 74%~	26 76%~	52 79%~
NO	22 21%	420 23%	~	2 11%~	3 17%~	10 37%~	6 23%~	1 14%~	19 26%~	~	~	~	~	~	2 14%~	1 14%~	21 23%~	11 18%~	10 26%~	8 24%~	14 21%~
NOT ANSWERED	3	59					2	1	3							3	3			1	2
VALID CASES	103	1798	3	18	18	27	26	7	74				14	7	92	61	38			34	66
NUMBER OF RESPONDENTS	106	1857	3	18	18	27	28	8	77				14	7	95	64	38			35	68
	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			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV 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	2 1%	19 0.5%	~	~	~	2 5%	~	2 1%	~	~	~	~	~	~	~	2 1%	1 0.7%	1 2%	1 1%	1 0.8%
01	1 0.5%	22 0.6%	~	~	~	~	1 2%	1 0.6%	~	~	~	~	~	~	~	1 0.5%	1 0.7%	~	~	1 0.8%
02	1 0.5%	39 1%	~	1 2%	~	~	~	1 0.6%	~	~	~	~	~	~	~	1 0.5%	1 0.7%	~	1 1%	~
03	5 2%	63 2%	1 7%	1 2%	~	~	3 5%	4 3%	~	~	~	~	~	~	1 8%	4 2%	2 1%	3 5%	4 6%	1 0.8%
04	8 4%	95 3%	2 13%	2 5%	2 7%	1 3%	1 2%	5 3%	~	~	~	~	~	~	2 15%	6 3%	2 1%	6 10%*	2 3%	6 5%
05	9 4%	234 7%	~	~	~	3 8%	5 8%	7 4%	~	~	~	~	~	1 6%	~	8 4%	6 4%	3 5%	4 6%	4 3%
06	8 4%	215 6%	~	1 2%	2 7%	1 3%	3 5%	6 4%	~	~	~	~	~	~	~	7 4%	5 4%	2 3%	5 7%	2 2%
07	24 12%	442 13%	2 13%	3 7%	6 21%	11 28%	2 3%*	18 11%	~	~	~	~	~	3 19%	2 15%	22 12%	15 11%	9 14%	9 13%	15 12%
08	45 22%	779 22%	4 27%	14 34%	8 29%	2 5%	11 17%	4 31%	~	~	~	~	~	5 31%	1 8%	41 22%	35 26%*	8 13%*	13 18%	30 23%
09	38 18%	592 17%	3 20%	7 17%	2 7%	8 21%	13 20%	2 15%	~	~	~	~	~	2 13%	~	36 19%	22 16%	13 21%	10 14%	26 20%
BEST HEALTH CARE POSSIBLE	67 32%	1011 29%	3 20%	12 29%	8 29%	11 28%	25 39%	7 54%	47 30%	~	~	~	~	5 31%	7 54%	58 31%	47 34%	18 29%	23 32%	44 34%
#8-10 (NET)	150 72%	2382 68%	10 67%	33 80%	18 64%	21 54%	49 77%	13 100%	114 72%	~	~	~	~	12 75%	8 62%	135 73%	104 76%	39 62%*	46 64%	100 77%

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		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE	
9-10 (NET)	105 50%	1603 46%	6 40%	19 46%	10 36%	19 49%	38 59%	9 69%	79 50%	~	~	~	~	~	44%	7 54%	94 51%	69 50%	31 49%	33 46%	70 54%
NOT ANSWERED		7 96		1		2	2	1	4					2		6	5	1	2	4	
VALID CASES	208	3511	15	41	28	39	64	13	158					16	13	186	137	63	72	130	
NUMBER OF RESPONDENTS	215 100%	3607 100%	15 100%	42 100%	28 100%	41 100%	66 100%	14 100%	162 100%					18 100%	13 100%	192 100%	142 100%	64 100%	74 100%	134 100%	
MEAN	8.09	7.94	7.60	8.17	8.00	7.69	8.22	9.23	8.04					8.38	7.92	8.10	8.25	7.68	7.76	8.30	
p stat_(*=Sig @ p<=.05)		.288	~	~	~	~	.572	~	.496	~	~	~	~	~	~	~	~	.156	.090	.124	.076

[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																		
	AHP	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				HIS-	HIS-	VERY			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	FAIR		
									WHTE	#	##	##	##	##	TI		GOOD	POOR	MALE	MALE
Q14																				
NEVER	4	90		2	1	1			4							4	2	2	1	3
	2%	3%		~ 5%	4%~	3%~			3%~							~ 2%	1%	3%	1%	2%
SOMETIMES	32	539	3	7	6	7	8		22					3	3	28	14	17	11	20
	15%	15%	20%~	17%~	21%~	18%~	13%		14%					~ 17%	23%~	15%~	10%*	27%*	15%	15%
USUALLY	61	1150	8	10	6	15	18	2	48					3	4	55	43	16	19	40
	29%	33%	53%~	24%~	21%~	38%~	29%	14%~	31%					~ 17%	31%~	29%~	31%	25%	27%	30%
ALWAYS	112	1722	4	22	15	17	37	12	83					12	6	100	79	28	40	69
	54%	49%	27%~	54%~	54%~	43%~	59%	86%~	53%					~ 67%	46%~	53%~	57%	44%	56%	52%
#ALWAYS + USUALLY (NET)	173	2872	12	32	21	32	55	14	131					15	10	155	122	44	59	109
	83%	82%	80%~	78%~	75%~	80%~	87%	100%~	83%					~ 83%	77%~	83%~	88%*	70%*	83%	83%
TOP BOX SCORE	112	1722	4	22	15	17	37	12	83					12	6	100	79	28	40	69
	54%	49%	27%~	54%~	54%~	43%~	59%	86%~	53%					~ 67%	46%~	53%~	57%	44%	56%	52%
NOT ANSWERED	6	106		1		1	3		5							5	4	1	3	2
VALID CASES	209	3501	15	41	28	40	63	14	157					18	13	187	138	63	71	132
NUMBER OF RESPONDENTS	215	3607	15	42	28	41	66	14	162					18	13	192	142	64	74	134
	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			
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL-TI TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE	
Q15 YES	246 85%	3993 82%	19 76%~	46 77%	30 79%~	48 87%	79 93%*	16 94%~	183 84%	~	~	~	~	~	21 84%~	17 89%~	220 85%~	172 84%	67 89%	85 78%*	156 90%*
NO	44 15%	904 18%	6 24%~	14 23%	8 21%~	7 13%	6 7%*	1 6%~	34 16%	~	~	~	~	~	4 16%~	2 11%~	40 15%~	33 16%	8 11%	24 22%*	18 10%*
NOT ANSWERED		5																			
VALID CASES	290	4897	25	60	38	55	85	17	217					25	19	260	205	75	109	174	
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q16 NONE	52 23%	792 21%	6 33%	13 30%	6 21%	8 18%	17 24%	2 13%	39 23%	~	~	~	~	4 21%	3 20%	48 23%	41 25%	11 17%	19 24%	33 22%
1 TIME	62 27%	995 27%	7 39%	13 30%	10 34%	8 18%	17 24%	4 27%	50 29%	~	~	~	~	4 21%	3 20%	56 27%	50 31%*	10 16%*	24 30%	37 25%
2	56 24%	792 21%	3 17%	9 20%	3 10%	17 38%	18 25%	3 20%	44 25%	~	~	~	~	3 16%	3 20%	51 25%	38 24%	16 25%	18 23%	36 24%
3	28 12%	483 13%	1 6%	4 9%	4 14%	6 13%	9 13%	2 13%	18 10%	~	~	~	~	7 37%	26 13%	20 12%	5 8%	10 13%	16 11%	
4	14 6%	279 7%	~	2 5%	2 7%	2 4%	6 8%	2 13%	11 6%	~	~	~	~	~	1 7%	12 6%	5 3%*	9 14%*	6 8%	8 5%
5 TO 9	16 7%	312 8%	1 6%	2 5%	3 10%	4 9%	5 7%	1 7%	10 6%	~	~	~	~	~	5 33%	11 5%	6 4%*	10 16%*	2 3%*	14 10%*
10 OR MORE TIMES	3 1%	88 2%	~	1 2%	1 3%	~	~	1 7%	1 0.6%	~	~	~	~	1 5%	3 1%	1 0.6%	2 3%	~	3 2%	
NOT ANSWERED	15	252	1	2	1	3	7	1	10					2	2	13	11	4	6	9
VALID CASES	231	3741	18	44	29	45	72	15	173					19	15	207	161	63	79	147
NUMBER OF RESPONDENTS	246	3993	19	46	30	48	79	16	183					21	17	220	172	67	85	156
	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					
	AHP	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	
Q17																				
NEVER		51																		
		2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	7	190	1	2		2	1		5						1	5	3	3	1	5
	4%	6%	8%~	6%~		6%~	2%		4%~						8%~	3%~	3%	6%	2%	4%
USUALLY	36	579	4	3	7	10	9	1	25					4	2	31	23	12	13	22
	20%	20%	33%~	10%~	30%~	28%~	16%	8%~	19%~					~ 27%~	17%~	20%~	19%	23%	22%	19%
ALWAYS	135	2109	7	26	16	24	45	12	103					11	9	122	93	37	46	86
	76%	72%	58%~	84%~	70%~	67%~	82%	92%~	77%~					~ 73%~	75%~	77%~	78%	71%	77%	76%
#ALWAYS + USUALLY (NET)	171	2688	11	29	23	34	54	13	128					15	11	153	116	49	59	108
	96%	92%*	92%~	94%~	100%~	94%~	98%	100%~	96%~					~ 100%~	92%~	97%~	97%	94%	98%	96%
TOP BOX SCORE	135	2109	7	26	16	24	45	12	103					11	9	122	93	37	46	86
	76%	72%	58%~	84%~	70%~	67%~	82%	92%~	77%~					~ 73%~	75%~	77%~	78%	71%	77%	76%
NOT ANSWERED	1	20				1			1						1	1				1
VALID CASES	178	2929	12	31	23	36	55	13	133					15	12	158	119	52	60	113
NUMBER OF RESPONDENTS	179	2949	12	31	23	37	55	13	134					15	12	159	120	52	60	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]

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	18	25	35	45	55	65	BLCK	AS-	NATV	AMER									
	AHP	OHP	TO	TO	TO	TO	TO	AND	OR	IAN	ILND	ALSK			NOT	VERY					
	TOT	TOT	24	34	44	54	64	OVER	AFR-						HIS-	HIS-	GOOD	FAIR			
	ADLT	ADLT							AMER					IC	IC	&	&	FE-			
									WHTE	#	##	##	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q18																					
NEVER	2	63				1			1						1		1			1	
	1%	2%	~	~	~	3%	~	~	0.8%	~	~	~	~	~	0.6%	~	2%			0.9%	
SOMETIMES	9	222		3		5	1		7						2	7	6	3	2	7	
	5%	8%	~	10%	~	14%	2%	~	5%	~	~	~	~	~	17%	4%	5%	6%	3%	6%	
USUALLY	38	572	5	7	10	5	7	1	28					2	3	31	29	6	12	24	
	21%	20%	42%	23%	43%	14%	13%*	8%	21%	~	~	~	~	~	13%	25%	20%	25%	12%*	20%	21%
ALWAYS	128	2066	7	21	13	24	47	12	96					13	7	118	83	42	45	81	
	72%	71%	58%	68%	57%	69%	85%*	92%	73%	~	~	~	~	87%	58%	75%	70%	81%	76%	72%	
#ALWAYS + USUALLY (NET)	166	2638	12	28	23	29	54	13	124					15	10	149	112	48	57	105	
	94%	90%*	100%	90%	100%	83%	98%*	100%	94%	~	~	~	~	100%	83%	95%	95%	92%	97%	93%	
TOP BOX SCORE	128	2066	7	21	13	24	47	12	96					13	7	118	83	42	45	81	
	72%	71%	58%	68%	57%	69%	85%*	92%	73%	~	~	~	~	87%	58%	75%	70%	81%	76%	72%	
NOT ANSWERED	2	26				2			2						2	2			1	1	
VALID CASES	177	2923	12	31	23	35	55	13	132					15	12	157	118	52	59	113	
NUMBER OF RESPONDENTS	179	2949	12	31	23	37	55	13	134					15	12	159	120	52	60	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]

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					
	AHP	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	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									AMER					TI	IC	IC	&	&		
									WHTE	#	##	##	##	##			GOOD	POOR		
																	MALE	MALE		
Q19																				
NEVER	1 0.6%	55 2%*	~	~	~	~	2%	1	1	~	~	~	~	~	1	1	~	~	1	
SOMETIMES	10 6%	211 7%	1 8%~	3 10%~	5 ~	14%~	~	7	7	~	~	~	~	~	2	7	5	4	3	6
USUALLY	27 15%	437 15%	3 25%~	7 23%~	4 17%~	6 17%~	9% 8%~	1	23	~	~	~	~	~	2	23	22	4	7	19
ALWAYS	138 78%	2221 76%	8 67%~	21 68%~	19 83%~	25 69%~	47 89%*	12	100	~	~	~	~	15	8	125	89	44	48	87
#ALWAYS + USUALLY (NET)	165 94%	2658 91%	11 92%~	28 90%~	23 100%~	31 86%~	52 98%*	13	123	~	~	~	~	15	10	148	111	48	55	106
TOP BOX SCORE	138 78%	2221 76%	8 67%~	21 68%~	19 83%~	25 69%~	47 89%*	12	100	~	~	~	~	15	8	125	89	44	48	87
NOT ANSWERED	3	25				1	2		3						3	3			2	1
VALID CASES	176	2924	12	31	23	36	53	13	131					15	12	156	117	52	58	113
NUMBER OF RESPONDENTS	179	2949	12	31	23	37	55	13	134					15	12	159	120	52	60	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	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q20 NEVER	4 2%	87 3%	~	2 6%~	1 4%~	1 3%~	~	2 2%~	~	~	~	~	~	~	2 17%~	2 1%~	2 2%	2 4%	~	4 4%~
SOMETIMES	10 6%	259 9%	1 8%~	1 3%~	2 9%~	3 8%~	1 2%	6 5%~	~	~	~	~	~	1 7%~	1 8%~	7 4%~	7 6%	1 2%	4 7%	5 4%
USUALLY	37 21%	721 25%	4 33%~	7 23%~	4 17%~	10 28%~	9 17%	31 23%~	~	~	~	~	~	~	3 25%~	32 20%~	23 19%	12 24%	15 25%	21 19%
ALWAYS	126 71%	1860 64%*	7 58%~	21 68%~	16 70%~	22 61%~	44 81%*	12 92%~	93 70%~	~	~	~	~	14 93%~	6 50%~	116 74%~	87 73%	36 71%	40 68%	83 73%
#ALWAYS + USUALLY (NET)	163 92%	2581 88%	11 92%~	28 90%~	20 87%~	32 89%~	53 98%*	13 100%~	124 94%~	~	~	~	~	14 93%~	9 75%~	148 94%~	110 92%	48 94%	55 93%	104 92%
TOP BOX SCORE	126 71%	1860 64%*	7 58%~	21 68%~	16 70%~	22 61%~	44 81%*	12 92%~	93 70%~	~	~	~	~	14 93%~	6 50%~	116 74%~	87 73%	36 71%	40 68%	83 73%
NOT ANSWERED	2	22				1	1		2						2	1	1	1	1	1
VALID CASES	177	2927	12	31	23	36	54	13	132					15	12	157	119	51	59	113
NUMBER OF RESPONDENTS	179	2949	12	31	23	37	55	13	134					15	12	159	120	52	60	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					
	AHP	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			HIS-	GOOD	FAIR			
									AMER		ILLND	NATV	OTHR	MUL-	IC	IC	&	&	FE-	
									WHTE	#	##	##	##	##	TI		GOOD	POOR	MALE	MALE
Q21																				
YES	104	1800	7	19	16	20	29	8	80					8	7	92	64	35	29	72
	58%	62%	58%~	61%~	70%~	56%~	53%	62%~	60%~	~	~	~	~	~ 53%~	58%~	58%~	54%	67%	48%	64%
NO	74	1107	5	12	7	16	26	5	53					7	5	66	55	17	31	41
	42%	38%	42%~	39%~	30%~	44%~	47%	38%~	40%~	~	~	~	~	~ 47%~	42%~	42%~	46%	33%	52%	36%
NOT ANSWERED	1	42					1		1						1	1				1
VALID CASES	178	2907	12	31	23	36	55	13	133					15	12	158	119	52	60	113
NUMBER OF RESPONDENTS	179	2949	12	31	23	37	55	13	134					15	12	159	120	52	60	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			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q22 NEVER	8 8%	108 6%	2 ~ 11%	1 ~ 6%	2 10%	2 7%	~	6 8%	~	~	~	~	~	1 13%	1 14%	7 8%	4 6%	3 9%	2 7%	6 9%
SOMETIMES	17 17%	264 15%	2 29%	4 21%	4 ~ 20%	3 11%	1 13%	15 19%	~	~	~	~	~	~	15 ~ 17%	9 15%	6 17%	5 17%	10 14%	
USUALLY	27 26%	517 30%	2 29%	4 21%	7 44%	4 20%	8 30%	2 25%	21 27%	~	~	~	~	2 25%	3 43%	23 26%	20 32%	7 20%	8 28%	19 27%
ALWAYS	50 49%	861 49%	3 43%	9 47%	8 50%	10 50%	14 52%	5 63%	36 46%	~	~	~	~	5 63%	3 43%	45 50%	29 47%	19 54%	14 48%	35 50%
#ALWAYS + USUALLY (NET)	77 75%	1378 79%	5 71%	13 68%	15 94%	14 70%	22 81%	7 88%	57 73%	~	~	~	~	7 88%	6 86%	68 76%	49 79%	26 74%	22 76%	54 77%
TOP BOX SCORE	50 49%	861 49%	3 43%	9 47%	8 50%	10 50%	14 52%	5 63%	36 46%	~	~	~	~	5 63%	3 43%	45 50%	29 47%	19 54%	14 48%	35 50%
NOT ANSWERED	2	50				2		2								2	2			2
VALID CASES	102	1750	7	19	16	20	27	8	78					8	7	90	62	35	29	70
NUMBER OF RESPONDENTS	104	1800	7	19	16	20	29	8	80					8	7	92	64	35	29	72
	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						ETHNIC-ITY	HEALTH STATUS		GENDER				
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-#	AS-IAN##	NATV ILND##	AMER IND/PAC ALSK##	OTHR##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE	
Q23 WORST PERSONAL DOCTOR POSSIBLE		23 0.6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
01	2 0.9%	32 0.9%	~	~	1 4%	~	1 1%	~	~	~	~	~	~	~	~	2 1%	1 0.6%	1 2%	1 1%	1 0.7%	
02	1 0.4%	39 1%	~	~	~	1 2%	~	~	~	~	~	~	~	~	~	1 0.5%	~	1 2%	1 1%	~	
03	1 0.4%	60 2%*	~	~	~	1 2%	~	~	~	~	~	~	~	~	~	1 0.5%	~	1 2%	~	1 0.7%	
04	6 3%	72 2%	1 6%	2 5%	~	~	2 3%	~	~	~	~	~	~	~	~	2 13%	3 1%	4 2%	1 2%	2 3%	3 2%
05	8 3%	188 5%	~	1 2%	1 4%	1 2%	4 5%	~	~	~	~	~	~	1 5%	1 7%	7 3%	4 2%	3 5%	2 3%	6 4%	
06	11 5%	158 4%	~	4 9%	1 4%	3 7%	3 4%	~	~	~	~	~	~	~	~	11 5%	9 6%	2 3%	2 3%	9 6%	
07	25 11%	327 9%	1 6%	5 12%	3 11%	7 15%	9 12%	~	~	~	~	~	~	1 5%	2 13%	23 11%	15 9%	10 16%	8 10%	17 11%	
08	40 17%	632 17%	2 11%	13 30%	9 32%	5 11%	8 11%	2 13%	~	~	~	~	~	1 5%	~	37 18%	32 20%	7 11%	16 20%	23 15%	
09	42 18%	691 19%	4 22%	6 14%	3 11%	8 17%	16 22%	3 19%	~	~	~	~	~	2 11%	2 13%	37 18%	29 18%	11 17%	10 13%	30 20%	
BEST PERSONAL DOCTOR POSSIBLE	97 42%	1506 40%	10 56%	12 28%	10 36%	20 43%	31 42%	11 69%	~	~	~	~	~	14 74%	8 53%	87 42%	68 42%	27 42%	37 47%	59 40%	
#8-10 (NET)	179 77%	2829 76%	16 89%	31 72%	22 79%	33 72%	55 74%	16 100%	~	~	~	~	~	17 89%	10 67%	161 77%	129 80%	45 70%	63 80%	112 75%	

Continued

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- #	AS- IAN ##	NATV ILND ##	AMER IND/ ALSK ##	OTH MUL- TI ##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
9-10 (NET)	139 60%	2197 59%	14 78%~	18 42%~	13 46%~	28 61%~	47 64%	14 88%~	94 54%*	~	~	~	~	~	16 84%~	10 67%~	124 59%~	97 60%	38 59%	47 59%	89 60%
NOT ANSWERED	13	265	1	3	2	2	5		8				2	2	11	10	3	6	7		
VALID CASES	233	3728	18	43	28	46	74	16	175				19	15	209	162	64	79	149		
NUMBER OF RESPONDENTS	246	3993	19	46	30	48	79	16	183				21	17	220	172	67	85	156		
	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%		
MEAN	8.50	8.34	9.06	8.14	8.29	8.46	8.49	9.56	8.34				9.37	8.33	8.52	8.60	8.31	8.57	8.48		
p stat_(*=Sig @ p<=.05)		.176	~	~	~	~.948			~.016*	~	~	~	~	~	~	~.248	.340	.674	.812		

[ASKED IF Q15 = YES]

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	AHP 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
Q24 YES	120 42%	1933 40%	6 25%~	24 40%	17 45%~	21 40%	41 49%	10 67%~	93 44%	~	~	~	~	~	13 54%~	6 32%~	111 44%~	72 35%*	46 65%*	38 35%	81 48%*
NO	163 58%	2928 60%	18 75%~	36 60%	21 55%~	32 60%	43 51%	5 33%~	120 56%	~	~	~	~	~	11 46%~	13 68%~	143 56%~	131 65%*	25 35%*	70 65%	88 52%*
NOT ANSWERED	12	221	1			2	1	2	4						1		6	2	4	1	5
VALID CASES	283	4861	24	60	38	53	84	15	213						24	19	254	203	71	108	169
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217						25	19	260	205	75	109	174
	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	18	25	35	45	55	65	BLCK	AS-	NATV	AMER												
	AHP	OHP	TO	TO	TO	TO	TO	AND	OR	AFR-	IAN	ILND	NATV	ALSK	OTHR	MUL-	HIS-	HIS-	NOT	VERY	GOOD	FAIR	FE-	
	TOT	TOT	24	34	44	54	64	OVER	WHTE	#	##	##	##	##	##	TI	IC	IC	GOOD	&	POOR	&	MALE	MALE
Q25																								
NEVER	8	110		1	1	3	3		7						1		8		EX &		1	7	2	6
	7%	6%		~ 4%	~ 6%	~ 14%	~ 7%		8%						8%		7%		VERY		1%	15%	5%	8%
SOMETIMES	19	323		3	4	5	6		11						4	2	16		GOOD		12	7	8	10
	16%	17%		~ 13%	~ 24%	~ 24%	~ 15%		12%						31%	33%	15%		FAIR		17%	15%	21%	13%
USUALLY	44	543		5	9	6	13	5	39							2	41		VERY		27	16	8	36
	37%	29%		83%	~ 39%	~ 35%	~ 29%	~ 32%	42%							33%	37%		GOOD		38%	35%	21%	45%
ALWAYS	48	893		1	10	6	7	19	35						8	2	45		VERY		31	16	20	28
	40%	48%		17%	~ 43%	~ 35%	~ 33%	~ 46%	50%						62%	33%	41%		GOOD		44%	35%	53%	35%
#ALWAYS + USUALLY (NET)	92	1436		6	19	12	13	32	74						8	4	86		VERY		58	32	28	64
	77%	77%		100%	~ 83%	~ 71%	~ 62%	~ 78%	100%						62%	67%	78%		GOOD		82%	70%	74%	80%
TOP BOX SCORE	48	893		1	10	6	7	19	35						8	2	45		VERY		31	16	20	28
	40%	48%		17%	~ 43%	~ 35%	~ 33%	~ 46%	50%						62%	33%	41%		GOOD		44%	35%	53%	35%
NOT ANSWERED	1	64		1					1								1		VERY		1			1
VALID CASES	119	1869		6	23	17	21	41	92						13	6	110		VERY		71	46	38	80
NUMBER OF RESPONDENTS	120	1933		6	24	17	21	41	93						13	6	111		VERY		72	46	38	81
	100%	100%		100%	100%	100%	100%	100%	100%						100%	100%	100%		VERY		100%	100%	100%	100%

[ASKED IF Q24 = YES]

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	MALE	FE-MALE
Q26 NONE	7 6%	77 4%	2 33%~	1 ~	1 6%~	3 5%~	3 7%~	5 5%~	~	~	~	~	~	1 8%~	1 17%~	5 5%~	4 6%~	3 7%~	1 3%~	6 8%~
1 SPECIALIST	75 63%	991 53%*	2 33%~	17 74%~	10 59%~	11 52%~	28 68%~	6 60%~	58 63%~	~	~	~	~	8 62%~	2 33%~	71 65%~	50 70%~	23 50%~	30 79%~	44 55%~
2	25 21%	498 27%	2 33%~	5 22%~	4 24%~	8 38%~	4 10%~	2 20%~	21 23%~	~	~	~	~	1 8%~	2 33%~	23 21%~	12 17%~	13 28%~	5 13%~	20 25%~
3	9 8%	191 10%	~	1 4%~	2 12%~	1 5%~	3 7%~	2 20%~	6 7%~	~	~	~	~	2 15%~	1 17%~	8 7%~	4 6%~	5 11%~	1 3%~	8 10%~
4	2 2%	64 3%	~	~	~	~	2 5%~	~	2 2%~	~	~	~	~	~	~	2 2%~	~	2 4%~	1 3%~	1 1%~
5 OR MORE SPECIALISTS	1 0.8%	45 2%	~	~	~	~	1 2%~	~	~	~	~	~	~	1 8%~	1 ~0.9%~	1 1%~	~	~	~	1 1%~
NOT ANSWERED	1	67	1						1						1	1				1
VALID CASES	119	1866	6	23	17	21	41	10	92					13	6	110	71	46	38	80
NUMBER OF RESPONDENTS	120	1933	6	24	17	21	41	10	93					13	6	111	72	46	38	81
	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				
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ ILND ###	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q27 WORST SPECIALIST POSSIBLE	1 0.9%	13 0.7%	~	~	~	1 5%	~	~	~	~	~	~	~	~	1 20%	~	~	1 2%	~	1 1%	
01	1 0.9%	14 0.8%	~	~	~	~	1 3%	~	1 1%	~	~	~	~	~	~	1 1%	~	1 2%	~	1 3%	
02		12 0.7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
03	1 0.9%	27 2%	~	~	~	~	1 3%	~	1 1%	~	~	~	~	~	~	1 1%	~	1 2%	~	1 1%	
04		22 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
05	3 3%	83 5%	~	1 4%	1 6%	1 5%	~	~	2 2%	~	~	~	~	~	1 9%	~	3 3%	3 5%	~	2 5%	1 1%
06	5 5%	68 4%	1 25%	2 9%	~	1 5%	1 3%	~	3 3%	~	~	~	~	~	~	1 20%	4 4%	3 5%	2 5%	2 5%	3 4%
07	10 9%	157 9%	~	2 9%	1 6%	4 20%	2 5%	1 11%	10 11%	~	~	~	~	~	~	~	10 10%	6 9%	4 9%	3 8%	7 10%
08	15 14%	318 18%	~	5 22%	4 25%	2 10%	2 5%	2 22%	14 16%	~	~	~	~	~	1 9%	~	15 14%	9 14%	6 14%	6 16%	9 12%
09	17 15%	315 18%	~	1 4%	3 19%	3 15%	8 21%	2 22%	12 14%	~	~	~	~	~	2 18%	1 20%	16 15%	11 17%	6 14%	3 8%	14 19%
BEST SPECIALIST POSSIBLE	58 52%	742 42%	3 75%	12 52%	7 44%	8 40%	23 61%	4 44%	44 51%	~	~	~	~	~	7 64%	2 40%	54 52%	33 50%	23 53%	20 54%	37 51%
#8-10 (NET)	90 81%	1375 78%	3 75%	18 78%	14 88%	13 65%	33 87%	8 89%	70 80%	~	~	~	~	~	10 91%	3 60%	85 82%	53 80%	35 81%	29 78%	60 82%

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		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR- AMER #	AS- IAN ##	NATV ILND ##	AMER IND/ ALSK ##	OTH MUL- TI ##	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
9-10 (NET)	75 68%	1057 60%	3 75%~	13 57%~	10 63%~	11 55%~	31 82%~	6 67%~	56 64%~	~	~	~	~	~	9 82%~	3 60%~	70 67%~	44 67%~	29 67%~	23 62%~	51 70%~
NOT ANSWERED	1	18					1						1		1	1				1	
VALID CASES	111	1771	4	23	16	20	38	9	87				11		5	104	66	43	37	73	
NUMBER OF RESPONDENTS	112	1789	4	23	16	20	38	10	87				12		5	105	67	43	37	74	
	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%		100%	100%	100%	100%	100%	100%	100%
MEAN	8.76	8.43	9.00	8.70	8.81	8.10	9.00	9.00	8.76				9.18		7.00	8.82	8.77	8.67	8.62	8.81	
p stat_(*=Sig @ p<=.05)		.075	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	AHP 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	46 16%	886 18%	3 12%	15 25%	5 13%	12 22%	8 10%*	1 6%~	36 17%	~	~	~	~	~	5 21%~	3 16%~	41 16%~	36 18%	8 11%	13 12%	31 18%
NO	239 84%	3943 82%	22 88%~	44 75%	33 87%~	42 78%	76 90%*	15 94%~	178 83%	~	~	~	~	~	19 79%~	16 84%~	215 84%~	168 82%	64 89%	96 88%	139 82%
NOT ANSWERED	10	253	1		1	1	1	3						1		4	1	3			4
VALID CASES	285	4829	25	59	38	54	84	16	214					24	19	256	204	72	109	170	
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	MALE	FE-MALE
Q29 NEVER	2 5%	78 9%	~	~	20%~	8%~	~	1 3%~	~	~	~	~	~	20%~	~	2 5%~	2 6%~	1 8%~	1 3%~	
SOMETIMES	16 36%	290 33%~	2 67%~	5 36%~	1 20%~	4 33%~	2 29%~	10 29%~	~	~	~	~	~	2 40%~	2 67%~	12 31%~	9 26%~	5 63%~	3 25%~	11 37%~
USUALLY	12 27%	294 34%~	1 33%~	5 36%~	1 20%~	3 25%~	2 29%~	12 35%~	~	~	~	~	~	~	12 31%~	10 29%~	2 25%~	5 42%~	7 23%~	
ALWAYS	14 32%	204 24%~	~	4 29%~	2 40%~	4 33%~	3 43%~	1 100%~	11 32%~	~	~	~	~	2 40%~	1 33%~	13 33%~	13 38%~	1 13%~	3 25%~	11 37%~
#ALWAYS + USUALLY (NET)	26 59%	498 58%~	1 33%~	9 64%~	3 60%~	7 58%~	5 71%~	1 100%~	23 68%~	~	~	~	~	2 40%~	1 33%~	25 64%~	23 68%~	3 38%~	8 67%~	18 60%~
TOP BOX SCORE	14 32%	204 24%~	~	4 29%~	2 40%~	4 33%~	3 43%~	1 100%~	11 32%~	~	~	~	~	2 40%~	1 33%~	13 33%~	13 38%~	1 13%~	3 25%~	11 37%~
NOT ANSWERED	2	20	1				1	2							2	2		1	1	
VALID CASES	44	866	3	14	5	12	7	1	34					5	3	39	34	8	12	30
NUMBER OF RESPONDENTS	46	886	3	15	5	12	8	1	36					5	3	41	36	8	13	31
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	AHP	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	
Q30																					
YES	74	1269	2	19	10	14	23	5	50					6	7	64	46	26	23	50	
	26%	26%	8%	32%	26%	26%	28%	31%	23%	~	~	~	~	~ 25%	37%	25%	23%	36%*	21%	30%	
NO	208	3524	22	41	28	40	59	11	163					18	12	191	155	47	85	119	
	74%	74%	92%	68%	74%	74%	72%	69%	77%	~	~	~	~	~ 75%	63%	75%	77%	64%*	79%	70%	
NOT ANSWERED	13	289	1			1	3	1	4					1		5	4	2	1	5	
VALID CASES	282	4793	24	60	38	54	82	16	213					24	19	255	201	73	108	169	
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	AHP	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	FAIR		
									AMER					TI	IC	IC	&	&		
									WHTE	#	##	##	##	##			GOOD	POOR	MALE	
																			MALE	
Q31																				
NEVER	2 3%	39 3%	~	~	~	7%~	5%~	~	2 4%~	~	~	~	~	~	~	2 3%~	2 5%~	~	1 5%~	1 2%~
SOMETIMES	4 6%	212 17%*	~	~	2 20%~	2 14%~	~	~	2 4%~	~	~	~	~	1 17%~	1 14%~	3 5%~	2 5%~	2 8%~	~	4 8%~
USUALLY	22 31%	361 29%	1 50%~	8 42%~	4 40%~	3 21%~	3 14%~	2 50%~	17 35%~	~	~	~	~	~	2 29%~	18 30%~	12 27%~	8 32%~	8 38%~	13 27%~
ALWAYS	43 61%	619 50%	1 50%~	11 58%~	4 40%~	8 57%~	17 81%~	2 50%~	27 56%~	~	~	~	~	5 83%~	4 57%~	38 62%~	28 64%~	15 60%~	12 57%~	31 63%~
#ALWAYS + USUALLY (NET)	65 92%	980 80%*	2 100%~	19 100%~	8 80%~	11 79%~	20 95%~	4 100%~	44 92%~	~	~	~	~	5 83%~	6 86%~	56 92%~	40 91%~	23 92%~	20 95%~	44 90%~
TOP BOX SCORE	43 61%	619 50%	1 50%~	11 58%~	4 40%~	8 57%~	17 81%~	2 50%~	27 56%~	~	~	~	~	5 83%~	4 57%~	38 62%~	28 64%~	15 60%~	12 57%~	31 63%~
NOT ANSWERED	3	38					2	1	2						3	2	1		2	1
VALID CASES	71	1231	2	19	10	14	21	4	48					6	7	61	44	25	21	49
NUMBER OF RESPONDENTS	74	1269	2	19	10	14	23	5	50					6	7	64	46	26	23	50
	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						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/ILLND ###	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q32 NEVER	1 1%	16 1%	~	~	~	~	5%~	1 2%~	~	~	~	~	~	~	1 2%~	1 2%~	1 5%~	1 ~	1 ~	
SOMETIMES	3 4%	61 5%	~	5%~	~	14%~	~	3 6%~	~	~	~	~	~	~	3 5%~	2 4%~	1 4%~	2 9%~	1 2%~	
USUALLY	13 18%	224 18%	~	21%~	4 40%~	4 21%~	3 5%~	1 25%~	1 18%~	~	~	~	~	~	3 43%~	10 16%~	8 18%~	5 20%~	3 14%~	10 20%~
ALWAYS	55 76%	929 76%	100%~	74%~	6 60%~	9 64%~	20 91%~	3 75%~	36 73%~	~	~	~	~	6 ~100%~	4 57%~	48 77%~	34 76%~	19 76%~	16 73%~	38 78%~
#ALWAYS + USUALLY (NET)	68 94%	1153 94%	100%~	95%~	10 100%~	12 86%~	21 95%~	4 100%~	45 92%~	~	~	~	~	6 ~100%~	7 100%~	58 94%~	42 93%~	24 96%~	19 86%~	48 98%~
TOP BOX SCORE	55 76%	929 76%	100%~	74%~	6 60%~	9 64%~	20 91%~	3 75%~	36 73%~	~	~	~	~	6 ~100%~	4 57%~	48 77%~	34 76%~	19 76%~	16 73%~	38 78%~
NOT ANSWERED	2	39					1	1	1						2	1	1	1	1	
VALID CASES	72	1230	2	19	10	14	22	4	49					6	7	62	45	25	22	49
NUMBER OF RESPONDENTS	74	1269	2	19	10	14	23	5	50					6	7	64	46	26	23	50
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER				
	OT1	OT2												ITY	STATUS						
	AHP	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				
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&				
									WHTE	#	##	##	##	##	TI		FAIR				
																GOOD	POOR				
																MALE	MALE				
Q33																					
YES	109	1787	9	18	18	26	29	5	82					9	6	99	70	35	44	62	
	39%	37%	36%~	31%	51%~	48%	35%	31%~	39%	~	~	~	~	~	38%~	32%~	39%~	35%*	48%	42%	36%
NO	171	2987	16	41	17	28	54	11	129					15	13	155	129	38	61	108	
	61%	63%	64%~	69%	49%~	52%	65%	69%~	61%	~	~	~	~	~	63%~	68%~	61%~	65%*	52%	58%	64%
NOT ANSWERED	15	308		1	3	1	2	1	6					1		6	6	2	4	4	
VALID CASES	280	4774	25	59	35	54	83	16	211					24	19	254	199	73	105	170	
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174	
	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	18	25	35	45	55	65	BLCK	NATV	AMER					EX &					
	AHP	OHP	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			NOT	VERY	FAIR				
	TOT	TOT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	POOR	MALE	FE-	
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	#	##	##	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
PQ34																					
NEVER	6	91		1	1	3	1		5					1		6	3	3	3	3	3
	2%	2%		~ 2%	3%~	6%	1%		2%	~	~	~	~	~ 4%	~	2%	2%	4%	3%	2%	
SOMETIMES	19	301	5	3	2	5	2	1	15					2		18	10	8	6	12	
	7%	6%	20%~	5%	6%~	9%	2%*	6%~	7%	~	~	~	~	~ 8%	~	7%	5%	11%	6%	7%	
USUALLY	38	677	3	5	7	9	12	2	27					4		4	34	27	10	18	20
	14%	14%	12%~	8%	20%~	17%	15%	13%~	13%	~	~	~	~	~ 17%	~	21%~	14%~	14%	17%	12%	
ALWAYS	214	3637	17	50	25	36	66	13	161					17		15	193	158	50	77	133
	77%	77%	68%~	85%	71%~	68%	81%	81%~	77%	~	~	~	~	~ 71%	~	79%~	77%~	80%	70%	74%	79%
#ALWAYS + USUALLY (NET)	252	4314	20	55	32	45	78	15	188					21		19	227	185	60	95	153
	91%	92%	80%~	93%	91%~	85%	96%*	94%~	90%	~	~	~	~	~ 88%	~	100%~	90%~	93%	85%	91%	91%
TOP BOX SCORE	214	3637	17	50	25	36	66	13	161					17		15	193	158	50	77	133
	77%	77%	68%~	85%	71%~	68%	81%	81%~	77%	~	~	~	~	~ 71%	~	79%~	77%~	80%	70%	74%	79%
NOT ANSWERED	3	68				1	2		3							3	1	2	1	2	
VALID CASES	277	4706	25	59	35	53	81	16	208					24		19	251	198	71	104	168
NUMBER OF RESPONDENTS	280	4774	25	59	35	54	83	16	211					24		19	254	199	73	105	170
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%		100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC-ITY	HEALTH STATUS		GENDER				
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	MALE	FE-MALE	
Q35 WORST HEALTH PLAN POSSIBLE	2 0.7%	33 0.7%	1 ~	2 2%	1 ~	1 2%	~	1 0.5%	~	~	~	~	~	~	1 ~0.4%	2 1%	2	~	~	2 1%	
01	4 1%	31 0.7%	1 4%	2 4%	~	1 ~	1 1%	4 2%	~	~	~	~	~	~	4 2%	2 1%	2 3%	0.9%	1 2%	3	
02		51 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
03	1 0.4%	61 1%*	1 4%	~	~	~	~	~	~	~	~	~	~	~	1 ~0.4%	1 ~	1	~	~	1 ~0.6%	
04	5 2%	105 2%	1 ~	2 2%	1 5%	1 2%	1 1%	5 2%*	~	~	~	~	~	~	5 2%	2 1%	3 4%	3	2 1%		
05	21 8%	381 8%	6 ~	4 11%	4 11%	7 8%	9 9%	16 8%	~	~	~	~	4 ~	17%	1 6%	20 8%	14 7%	7 10%	10 9%	11 7%	
06	24 9%	291 6%	2 8%	3 5%	5 13%	7 14%	5 6%	18 9%	~	~	~	~	1 ~	4%	1 6%	22 9%	16 8%	6 9%	13 12%	10 6%	
07	41 15%	602 13%	5 21%	8 14%	8 21%	11 22%	9 11%	33 16%	~	~	~	~	4 ~	17%	1 6%	39 16%	31 16%	10 14%	16 15%	25 16%	
08	46 17%	920 20%	5 21%	9 16%	6 16%	8 16%	12 15%	5 29%	35 17%	~	~	~	~	~	5 22%	2 11%	43 18%	34 18%	11 16%	15 14%	30 19%
09	40 15%	736 16%	6 25%	11 20%	3 8%	4 8%	11 14%	4 24%	26 13%	~	~	~	~	~	4 17%	7 39%	32 13%	30 16%	9 13%	12 11%	27 17%
BEST HEALTH PLAN POSSIBLE	87 32%	1385 30%	4 17%	15 27%	10 26%	14 28%	33 42%*	8 47%	65 32%	~	~	~	~	~	5 22%	6 33%	78 32%	62 32%	21 30%	36 34%	49 31%
#8-10 (NET)	173 64%	3041 66%	15 63%	35 63%	19 50%	26 52%	56 71%	17 100%	126 62%	~	~	~	~	~	14 61%	15 83%	153 62%	126 65%	41 59%	63 59%	106 66%

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		
	AHP 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 AMER HAW/ IND/ PAC ALSK #	ILND #	NATV OTHR #	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
9-10 (NET)	127 47%	2121 46%	10 42%~	26 46%	13 34%~	18 36%	44 56%	12 71%~	91 45%	~	~	~	~	~	9 39%~	13 72%~	110 45%~	92 48%	30 43%	48 45%	76 48%
NOT ANSWERED	24	486	1	4		5	6		14					2	1	15	12	5	3	14	
VALID CASES	271	4596	24	56	38	50	79	17	203					23	18	245	193	70	106	160	
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	
MEAN	7.97	7.93	7.71	7.70	7.61	7.66	8.33	9.18	7.92					7.83	8.72	7.93	8.06	7.67	7.93	7.98	
p stat_(*=Sig @ p<=.05)		.705	~.258		~.232	.068		~.416	~	~	~	~	~	~	~	~	~.298	.153	.794	.946	

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER			
	AHP 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 HAW/ IND/ PAC ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q35A YES	34 12%	599 12%	2 8%~	1 2%*	1 3%~	8 15%	15 18%	4 24%~	25 12%	~	~	~	~	~	5 21%~	1 5%~	32 12%~	12 6%*	19 26%*	8 7%*	25 15%
NO	251 88%	4210 88%	23 92%~	59 98%*	37 97%~	46 85%	68 82%	13 76%~	190 88%	~	~	~	~	~	19 79%~	18 95%~	225 88%~	191 94%*	55 74%*	100 93%*	147 85%
NOT ANSWERED	10	273				1	2		2						1		3	2	1	1	2
VALID CASES	285	4809	25	60	38	54	83	17	215						24	19	257	203	74	108	172
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217						25	19	260	205	75	109	174
	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					
	AHP	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	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR		
									AMER					TI	IC	IC	&	&		
									WHTE	#	##	##	##	##			GOOD	POOR	MALE	MALE
Q35B																				
NEVER	4	90				2	2		3						4	2	2	2	2	2
	12%	16%	~	~	~	25%	14%	~	13%	~	~	~	~	~	~	13%	17%	11%	29%	8%
SOMETIMES	4	83				1	1	1	2					2	4	1	2		4	
	12%	15%	~	~	~	13%	7%	25%	8%	~	~	~	~	40%	~	13%	8%	11%	~	16%
USUALLY	4	129					2		2					1	3	2	2		3	
	12%	23%	~	~	~	14%	~	~	8%	~	~	~	~	20%	~	10%	17%	11%	~	12%
ALWAYS	21	262	1	1	1	5	9	3	17					2	1	20	7	12	5	16
	64%	46%	50%	100%	100%	63%	64%	75%	71%	~	~	~	~	40%	100%	65%	58%	67%	71%	64%
#ALWAYS + USUALLY (NET)	25	391	2	1	1	5	11	3	19					3	1	23	9	14	5	19
	76%	69%	100%	100%	100%	63%	79%	75%	79%	~	~	~	~	60%	100%	74%	75%	78%	71%	76%
TOP BOX SCORE	21	262	1	1	1	5	9	3	17					2	1	20	7	12	5	16
	64%	46%	50%	100%	100%	63%	64%	75%	71%	~	~	~	~	40%	100%	65%	58%	67%	71%	64%
NOT ANSWERED	1	35					1		1						1		1		1	
VALID CASES	33	564	2	1	1	8	14	4	24					5	1	31	12	18	7	25
NUMBER OF RESPONDENTS	34	599	2	1	1	8	15	4	25					5	1	32	12	19	8	25
	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						ETHNIC-ITY	HEALTH STATUS		GENDER					
	AHP 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-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE-MALE
Q35C YES	44 16%	759 16%	3 13%	9 15%	4 11%	13 24%	11 13%	2 13%	34 16%	~	~	~	~	~	3 13%	3 16%	38 15%	19 9%*	23 32%*	8 7%*	34 20%*		
NO	238 84%	3989 84%	21 88%	50 85%	34 89%	41 76%	72 87%	14 88%	181 84%	~	~	~	~	~	20 87%	16 84%	217 85%	182 91%*	50 68%*	100 93%*	135 80%*		
NOT ANSWERED	13	334	1	1		1	2	1	2						2		5	4	2	1	5		
VALID CASES	282	4748	24	59	38	54	83	16	215						23	19	255	201	73	108	169		
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217						25	19	260	205	75	109	174		
	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						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/ILLND NATV ###	AMER IND/ALSK #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q35D NEVER	12 29%	121 17%	3 ~ 33%	6 ~ 50%	2 18%	9 28%	~	~	~	~	~	~	~	1 33%	9 25%	6 35%	5 22%	1 14%	10 30%	
SOMETIMES	8 19%	129 18%	3 ~ 33%	2 50%	1 8%	2 18%	5 16%	~	~	~	~	~	1 33%	1 33%	7 19%	3 18%	5 22%	2 29%	6 18%	
USUALLY	8 19%	170 23%	3 ~ 33%	1 25%	1 8%	2 18%	1 50%	8 25%	~	~	~	~	~	~	8 22%	2 12%	5 22%	~	8 24%	
ALWAYS	14 33%	308 42%	2 100%	1 25%	4 33%	5 45%	1 50%	10 31%	~	~	~	~	2 67%	1 33%	12 33%	6 35%	8 35%	4 57%	9 27%	
#ALWAYS + USUALLY (NET)	22 52%	478 66%	2 100%	3 33%	2 50%	5 42%	7 64%	2 100%	18 56%	~	~	~	~	2 67%	1 33%	20 56%	8 47%	13 57%	4 57%	17 52%
TOP BOX SCORE	14 33%	308 42%	2 100%	1 25%	4 33%	5 45%	1 50%	10 31%	~	~	~	~	2 67%	1 33%	12 33%	6 35%	8 35%	4 57%	9 27%	
NOT ANSWERED	2	31	1		1			2							2	2		1	1	
VALID CASES	42	728	2	9	4	12	11	2	32					3	3	36	17	23	7	33
NUMBER OF RESPONDENTS	44	759	3	9	4	13	11	2	34					3	3	38	19	23	8	34
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35C = YES]

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILLND ###	AMER IND/PAC ALSK ##	OTHR ##	MULTI TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE-MALE	MALE
Q35E ALWAYS	10 4%	178 4%	1 4%	2 3%	2 6%	1 2%	3 ~ 20%	5 2%	~	~	~	~	~	1 5%	1 6%	7 3%	6 3%	2 3%	2 2%	7 4%
USUALLY	13 5%	193 4%	2 9%	1 2%	3 8%	4 8%	3 4%	7 3%	~	~	~	~	~	1 5%	3 17%	10 4%	9 5%	4 6%	8 7%	5 3%
SOMETIMES	38 14%	804 17%	4 17%	9 16%	1 3%	9 17%	11 13%	3 20%	~	~	~	~	~	3 14%	2 11%	36 14%	25 13%	12 17%	15 14%	23 14%
NEVER	214 78%	3575 75%	16 70%	46 79%	30 83%	38 73%	70 83%	9 60%	~	~	~	~	~	16 76%	12 67%	196 79%	158 80%	52 74%	82 77%	129 79%
#NEVER + SOMETIMES (NET)	252 92%	4379 92%	20 87%	55 95%	31 86%	47 90%	81 96%*	12 80%	~	~	~	~	~	19 90%	14 78%	232 93%	183 92%	64 91%	97 91%	152 93%
TOP BOX SCORE	214 78%	3575 75%	16 70%	46 79%	30 83%	38 73%	70 83%	9 60%	~	~	~	~	~	16 76%	12 67%	196 79%	158 80%	52 74%	82 77%	129 79%
NOT ANSWERED	20	332	2	2	2	3	1	2						4	1	11	7	5	2	10
VALID CASES	275	4750	23	58	36	52	84	15						21	18	249	198	70	107	164
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17						25	19	260	205	75	109	174
	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	18	25	35	45	55	65	BLCK	AS-	NATV	AMER				EX &				
	AHP	OHP	TO	TO	TO	TO	TO	AND	OR	IAN	ILND	ALSK	OTHR	MUL-	NOT	VERY	GOOD	FAIR		
	TOT	TOT	24	34	44	54	64	OVER	WHTE	#	##	##	##	##	TI	HIS-	HIS-	GOOD	FAIR	
	ADLT	ADLT													IC	IC	&	&		
																GOOD	POOR	MALE	MALE	
Q35F																				
ALWAYS	3	66	1			2		2							3	1	2	1	2	
	1%	1%	4%	~	~	4%	~	0.9%	~	~	~	~	~	~	~	1%	0.5%	3%	1%	1%
USUALLY	3	106		1		1	1	2							1	2	1	2	1	2
	1%	2%	~	2%	~	2%	1%	0.9%	~	~	~	~	~	~	5%	0.8%	0.5%	3%	1%	1%
SOMETIMES	42	672	6	12	4	9	8	1	32					4	3	37	29	12	11	30
	15%	14%	25%	21%	11%	17%	10%	7%	15%	~	~	~	~	~	19%	16%	15%	15%	10%	18%
NEVER	227	3911	17	44	34	40	73	14	175					17	15	206	166	55	92	132
	83%	82%	71%	77%	89%	77%	89%*	93%	83%	~	~	~	~	~	81%	79%	83%	84%	88%	80%
#NEVER + SOMETIMES (NET)	269	4583	23	56	38	49	81	15	207					21	18	243	195	67	103	162
	98%	96%	96%	98%	100%	94%	99%	100%	98%	~	~	~	~	~	100%	95%	98%	99%	98%	98%
TOP BOX SCORE	227	3911	17	44	34	40	73	14	175					17	15	206	166	55	92	132
	83%	82%	71%	77%	89%	77%	89%*	93%	83%	~	~	~	~	~	81%	79%	83%	84%	88%	80%
NOT ANSWERED	20	327	1	3		3	3	2	6					4		12	8	4	4	8
VALID CASES	275	4755	24	57	38	52	82	15	211					21	19	248	197	71	105	166
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174
	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			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR ##	MULTI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FEMALE
Q35G ALWAYS	4 1%	55 1%	1 4%	1 2%	1 ~	1 2%	1 1%	1 ~0.5%	1 ~	~	~	~	~	~	1 5%	1 5%	3 1%	2 1%	2 3%	~	4 2%*
USUALLY	2 0.7%	67 1%	~	~	~	1 2%	1 1%	2 ~0.9%	~	~	~	~	~	~	~	2 ~0.8%	1 ~0.5%	1 1%	2 2%	~	~
SOMETIMES	27 10%	487 10%	4 17%	11 19%*	4 11%	5 10%	2 2%*	1 7%	22 10%	~	~	~	~	~	1 5%	4 21%	23 9%	15 8%	11 15%	8 8%	19 11%
NEVER	242 88%	4149 87%	19 79%	45 79%*	34 89%	45 87%	78 95%*	14 93%	186 88%	~	~	~	~	~	19 90%	14 74%	220 89%	177 91%	59 81%	94 90%	144 86%
#NEVER + SOMETIMES (NET)	269 98%	4636 97%	23 96%	56 98%	38 100%	50 96%	80 98%	15 100%	208 99%	~	~	~	~	~	20 95%	18 95%	243 98%	192 98%	70 96%	102 98%	163 98%
TOP BOX SCORE	242 88%	4149 87%	19 79%	45 79%*	34 89%	45 87%	78 95%*	14 93%	186 88%	~	~	~	~	~	19 90%	14 74%	220 89%	177 91%	59 81%	94 90%	144 86%
NOT ANSWERED	20	324	1	3	~	3	3	2	6	~	~	~	~	~	4	~	12	10	2	5	7
VALID CASES	275	4758	24	57	38	52	82	15	211	~	~	~	~	~	21	19	248	195	73	104	167
NUMBER OF RESPONDENTS	295 100%	5082 100%	25 100%	60 100%	38 100%	55 100%	85 100%	17 100%	217 100%	~	~	~	~	~	25 100%	19 100%	260 100%	205 100%	75 100%	109 100%	174 100%

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					
	AHP	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	
Q35H																				
#YES DEFINITELY	191	3305	15	36	27	29	67	12	141					15	15	170	136	51	68	120
	69%	70%	63%~	61%	71%~	56%*	82%*	80%~	66%	~	~	~	~	~ 71%~	79%~	68%~	69%	71%	64%	72%
YES SOMEWHAT	69	1110	8	19	9	16	13	2	58					5	2	65	50	16	31	37
	25%	24%	33%~	32%	24%~	31%	16%*	13%~	27%	~	~	~	~	~ 24%~	11%~	26%~	25%	22%	29%	22%
NO	17	300	1	4	2	7	2	1	14					1	2	15	12	5	8	9
	6%	6%	4%~	7%	5%~	13%	2%*	7%~	7%	~	~	~	~	~ 5%~	11%~	6%~	6%	7%	7%	5%
NOT ANSWERED	18	367	1	1		3	3	2	4					4		10	7	3	2	8
VALID CASES	277	4715	24	59	38	52	82	15	213					21	19	250	198	72	107	166
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174
	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			
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV ILND ###	AMER IND/ PAC ALSK ###	OTHR ###	MUL-TI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE	
Q35I YES	183 65%	2797 58%*	18 72%~	46 77%*	26 70%~	32 62%	49 58%	7 41%~	139 65%	~	~	~	~	~	12 50%~	14 74%~	162 63%~	136 67%	44 60%	72 67%	107 63%
NO	100 35%	1986 42%*	7 28%~	14 23%*	11 30%~	20 38%	36 42%	10 59%~	76 35%	~	~	~	~	~	12 50%~	5 26%~	94 37%~	67 33%	29 40%	36 33%	64 37%
NOT ANSWERED	12	299			1	3			2					1		4	2	2	1	3	
VALID CASES	283	4783	25	60	37	52	85	17	215					24	19	256	203	73	108	171	
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH		GENDER	
	OT1	OT2																			
	AHP	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				HIS-	HIS-	VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE	
Q35J																					
YES	130	1919	11	31	19	25	32	8	101					7	9	116	98	28	47	79	
	46%	40%*	44%~	52%	50%~	47%	38%	47%~	47%	~	~	~	~	29%~	47%~	45%~	48%	38%	44%	46%	
NO	153	2885	14	29	19	28	53	9	113					17	10	140	106	46	61	92	
	54%	60%*	56%~	48%	50%~	53%	62%	53%~	53%	~	~	~	~	71%~	53%~	55%~	52%	62%	56%	54%	
NOT ANSWERED	12	278					2		3					1		4	1	1	1	3	
VALID CASES	283	4804	25	60	38	53	85	17	214					24	19	256	204	74	108	171	
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						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	3 2%	40 2%	~	7%~	~	4%~	~	2 2%~	~	~	~	~	~	~	13%~	2%~	2 2%~	1 4%~	1 2%~	2 3%~
SOMETIMES	8 7%	150 8%	~	3%~	17%~	8%~	7%~	7 7%~	~	~	~	~	~	~	6%~	7 7%~	6 7%~	2 7%~	5 11%~	3 4%~
USUALLY	22 18%	356 19%	36%~	17%~	6%~	32%~	14%~	20 21%~	~	~	~	~	~	1 14%~	1 13%~	21 19%~	18 20%~	4 14%~	6 13%~	16 21%~
ALWAYS	90 73%	1310 71%	64%~	72%~	78%~	56%~	79%~100%~	68 70%~	~	~	~	~	~	6 86%~	6 75%~	81 73%~	66 72%~	21 75%~	33 73%~	54 72%~
#ALWAYS + USUALLY (NET)	112 91%	1666 90%	100%~	90%~	83%~	88%~	93%~100%~	88 91%~	~	~	~	~	~	7 100%~	7 88%~	102 92%~	84 91%~	25 89%~	39 87%~	70 93%~
TOP BOX SCORE	90 73%	1310 71%	64%~	72%~	78%~	56%~	79%~100%~	68 70%~	~	~	~	~	~	6 86%~	6 75%~	81 73%~	66 72%~	21 75%~	33 73%~	54 72%~
NOT ANSWERED	7	63	2	1	3	4	1	5	6	2	4									
VALID CASES	123	1856	11	29	18	25	29	8	97					7	8	111	92	28	45	75
NUMBER OF RESPONDENTS	130	1919	11	31	19	25	32	8	101					7	9	116	98	28	47	79
	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	
	AHP 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 ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE	
Q35L ALWAYS	22 20%	423 22%	1 11%	6 25%	3 18%	4 20%	5 17%	2 33%	16 21%	~	~	~	~	2 18%	2 25%	19 20%	15 21%	6 19%	10 24%	11 17%
USUALLY	20 19%	375 20%	3 33%	6 25%	2 12%	5 25%	3 10%	1 17%	16 21%	~	~	~	~	2 18%	2 25%	18 19%	11 15%	8 25%	5 12%	15 24%
SOMETIMES	20 19%	377 20%	1 11%	4 17%	5 29%	4 20%	4 14%	~	12 15%	~	~	~	~	2 18%	2 25%	15 16%	17 23%	2 6%	7 17%	11 17%
NEVER	46 43%	744 39%	4 44%	8 33%	7 41%	7 35%	17 59%	3 50%	34 44%	~	~	~	~	5 45%	2 25%	43 45%	30 41%	16 50%	20 48%	26 41%
#NEVER + SOMETIMES (NET)	66 61%	1121 58%	5 56%	12 50%	12 71%	11 55%	21 72%	3 50%	46 59%	~	~	~	~	7 64%	4 50%	58 61%	47 64%	18 56%	27 64%	37 59%
TOP BOX SCORE	46 43%	744 39%	4 44%	8 33%	7 41%	7 35%	17 59%	3 50%	34 44%	~	~	~	~	5 45%	2 25%	43 45%	30 41%	16 50%	20 48%	26 41%
5	164	2747	15	36	21	30	51	10	129					13	10	153	123	40	65	99
NOT ANSWERED	23	416	1			5	5	1	10					1	1	12	9	3	2	12
VALID CASES	108	1919	9	24	17	20	29	6	78					11	8	95	73	32	42	63
NUMBER OF RESPONDENTS	295 100%	5082 100%	25 100%	60 100%	38 100%	55 100%	85 100%	17 100%	217 100%					25 100%	19 100%	260 100%	205 100%	75 100%	109 100%	174 100%

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		
	AHP 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- #	NATV AS- IAN ##	AMER HAW/ IND/ PAC ALSK ##	MUL- OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE		
Q35M NEVER	50 40%	695 36%	4 33%~	9 38%~	11 58%~	12 44%~	13 39%~	1 14%~	34 37%~	~	~	~	~	~	7 58%~	3 30%~	46 42%~	36 42%~	14 38%~	26 46%~	24 36%~
SOMETIMES	14 11%	351 18%*	~	3 13%~	1 5%~	3 11%~	7 21%~	10 11%~	~	~	~	~	~	~	1 8%~	2 20%~	12 11%~	10 12%~	4 11%~	8 14%~	6 9%~
USUALLY	28 22%	351 18%	5 42%~	5 21%~	5 26%~	9 33%~	2 6%~	1 14%~	21 23%~	~	~	~	~	~	2 17%~	3 30%~	23 21%~	19 22%~	9 24%~	8 14%*	19 29%~
ALWAYS	33 26%	514 27%	3 25%~	7 29%~	2 11%~	3 11%~	11 33%~	5 71%~	26 29%~	~	~	~	~	~	2 17%~	2 20%~	29 26%~	20 24%~	10 27%~	14 25%~	17 26%~
#ALWAYS + USUALLY (NET)	61 49%	865 45%	8 67%~	12 50%~	7 37%~	12 44%~	13 39%~	6 86%~	47 52%~	~	~	~	~	~	4 33%~	5 50%~	52 47%~	39 46%~	19 51%~	22 39%~	36 55%~
TOP BOX SCORE	33 26%	514 27%	3 25%~	7 29%~	2 11%~	3 11%~	11 33%~	5 71%~	26 29%~	~	~	~	~	~	2 17%~	2 20%~	29 26%~	20 24%~	10 27%~	14 25%~	17 26%~
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	150	2765	13	36	19	25	48	8	118						12	9	140	113	36	49	101
NOT ANSWERED	20	406				3	4	2	8						1		10	7	2	4	7
VALID CASES	125	1911	12	24	19	27	33	7	91						12	10	110	85	37	56	66
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217						25	19	260	205	75	109	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC-ITY	HEALTH STATUS		GENDER			
	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND ###	AMER IND/ ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q35N EXTREMELY DIFFICULT	11 4%	281 6%	1 ~ 2%	3 8%	2 4%	4 5%	7 ~ 4%	7 ~ 4%	~	~	~	~	~	1 4%	1 5%	9 4%	4 2%*	6 9%	3 3%	7 5%
01	9 3%	112 3%	1 ~ 2%	3 8%	2 4%	2 3%	1 8%	8 4%	~	~	~	~	~	~	~	8 3%	6 3%	3 4%	3 3%	6 4%
02	8 3%	129 3%	4 ~ 7%	1 3%	2 4%	1 1%	5 ~ 3%	5 ~ 3%	~	~	~	~	~	2 8%	1 5%	7 3%	6 3%	2 3%	2 2%	6 4%
03	11 4%	164 4%	2 8%	~	3 8%	1 2%	5 7%	7 ~ 4%	~	~	~	~	~	1 4%	2 11%	9 4%	9 5%	2 3%	6 6%	5 3%
04	12 5%	138 3%	2 ~ 3%	1 3%	1 2%	6 8%	2 15%	8 4%	~	~	~	~	~	2 8%	~	12 5%	8 4%	4 6%	4 4%	8 5%
05	39 15%	547 12%	5 20%	8 14%	3 8%	12 25%	10 14%	1 8%	32 17%	~	~	~	~	3 13%	3 16%	36 16%	28 15%	11 16%	18 18%	21 14%
06	17 6%	230 5%	5 20%	4 7%	2 6%	1 2%	4 5%	1 8%	13 7%	~	~	~	~	~	3 16%	14 6%	14 7%	3 4%	8 8%	9 6%
07	21 8%	375 8%	10 ~ 17%*	5 14%	3 6%	2 3%*	1 8%	16 8%	~	~	~	~	~	3 13%	2 11%	19 8%	19 10%*	2 3%*	5 5%	16 10%
09	62 23%	1161 26%	7 28%	9 16%	6 17%	12 25%	16 22%	2 15%	43 22%	~	~	~	~	2 8%	2 11%	50 22%	36 19%*	16 24%	18 18%	34 22%
EXTREMELY EASY	76 29%	1320 30%	6 24%	19 33%	9 25%	12 25%	23 32%	5 38%	53 28%	~	~	~	~	10 42%	5 26%	68 29%	57 30%	18 27%	32 32%	43 28%
#8-10 (NET)	138 52%	2481 56%	13 52%	28 48%	15 42%	24 50%	39 53%	7 54%	96 50%	~	~	~	~	12 50%	7 37%	118 51%	93 50%	34 51%	50 51%	77 50%
9-10 (NET)	138 52%	2481 56%	13 52%	28 48%	15 42%	24 50%	39 53%	7 54%	96 50%	~	~	~	~	12 50%	7 37%	118 51%	93 50%	34 51%	50 51%	77 50%

Continued

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

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC-ITY	HEALTH STATUS		GENDER		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER #	AS-IAN ##	NATV ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	VERY GOOD & POOR	FE-MALE	MALE
88		6																		
NOT ANSWERED	29	619		2	2	7	12	4	25					1		28	18	8	10	19
VALID CASES	266	4457	25	58	36	48	73	13	192					24	19	232	187	67	99	155
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%
MEAN	7.02	7.14	7.36	7.28	6.22	6.83	6.92	7.31	6.97					7.04	6.47	7.00	7.10	6.57	7.03	6.92
p stat_(*=Sig @ p<=.05)	.544		~.447		~		~.739		~.650	~	~	~	~	~	~	~	~.542	.196	.974	.498

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	WHITE	BLK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILLND ###	AMER IND/ALSK ##	OTHR ##	MULTI TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	MALE	FE-MALE			
Q36																							
EXCELLENT	28 10%	447 9%	5 20%~	8 13%	6 16%~	3 5%	5 6%	1 6%~	21 10%	~	~	~	~	~	3 12%~	1 5%~	27 11%~	28 14%~	15 14%	13 8%			
VERY GOOD	73 26%	1140 24%	6 24%~	24 40%*	12 32%~	11 20%	19 23%	1 6%~	61 29%	~	~	~	~	~	4 16%~	3 16%~	70 27%~	73 36%~	30 28%	43 25%			
GOOD	104 37%	1676 35%	9 36%~	21 35%	9 24%~	21 38%	34 40%	8 50%~	74 35%	~	~	~	~	~	12 48%~	9 47%~	91 36%~	104 51%~	36 34%	67 39%			
FAIR	52 19%	1110 23%*	4 16%~	4 7%*	8 21%~	14 25%	18 21%	4 25%~	39 18%	~	~	~	~	~	6 24%~	5 26%~	47 18%~	52 69%~	20 19%	32 19%			
POOR	23 8%	395 8%	1 4%~	3 5%	3 8%~	6 11%	8 10%	2 13%~	18 8%	~	~	~	~	~	~	1 5%~	21 8%~	23 31%*	6 6%	17 10%			
#EXCELLENT + VERY GOOD + GOOD (NET)	205 73%	3263 68%	20 80%~	53 88%*	27 71%~	35 64%	58 69%	10 63%~	156 73%	~	~	~	~	~	19 76%~	13 68%~	188 73%~	205 100%~	81 76%	123 72%			
NOT ANSWERED	15	314					1	1	4								4		2	2			
VALID CASES	280	4768	25	60	38	55	84	16	213						25	19	256	205	75	107	172		
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217						25	19	260	205	75	109	174		
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%		

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

	BANT	BANT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	VERY GOOD & FAIR & POOR	MALE	FE-MALE	
Q37	AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	VERY GOOD & FAIR & POOR	MALE	FE-MALE	
EXCELLENT	56 20%	870 18%	7 28%~	15 25%	11 29%~	6 11%*	14 17%	3 18%~	39 18%	~	~	~	~	~	6 25%~	4 21%~	51 20%~	53 26%*	3 4%*	27 25%	29 17%	
VERY GOOD	78 28%	1189 25%	6 24%~	22 37%	11 29%~	10 19%	24 29%	4 24%~	65 30%	~	~	~	~	~	7 29%~	2 11%~	75 29%~	64 31%*	12 16%*	29 27%	49 29%	
GOOD	72 26%	1480 31%*	8 32%~	11 18%	8 21%~	15 28%	22 26%	7 41%~	53 25%	~	~	~	~	~	4 17%~	7 37%~	64 25%~	57 28%	15 20%	31 29%	40 23%	
FAIR	56 20%	937 20%	3 12%~	7 12%*	6 16%~	19 35%*	20 24%	1 6%~	43 20%	~	~	~	~	~	6 25%~	5 26%~	49 19%~	27 13%*	29 39%*	18 17%	38 22%	
POOR	18 6%	296 6%	1 4%~	5 8%	2 5%~	4 7%	4 5%	2 12%~	14 7%	~	~	~	~	~	1 4%~	1 5%~	17 7%~	3 1%*	15 20%*	3 3%*	15 9%*	
#EXCELLENT + VERY GOOD + GOOD (NET)	206 74%	3539 74%	21 84%~	48 80%	30 79%~	31 57%*	60 71%	14 82%~	157 73%	~	~	~	~	~	17 71%~	13 68%~	190 74%~	174 85%*	30 41%*	87 81%*	118 69%*	
NOT ANSWERED	15	310				1	1		3						1		4	1	1	1	3	
VALID CASES	280	4772	25	60	38	54	84	17	214						24	19	256	204	74	108	171	
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217						25	19	260	205	75	109	174	
	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																										
	AHP	OHP	18	25	35	45	55	65	BLCK	NATV	AMER						NOT	EX &										
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/				HIS-	HIS-	VERY	GOOD	FAIR								
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	IC	IC	&	&	GOOD	POOR	MALE	MALE						
Q38																												
#YES	71	1705	5	11	6	13	26	8	54					8	3	66	47	23	24	46								
	26%	36%*	22%~	18%	17%~	24%	31%	47%~	25%	~	~	~	~	~	32%~	17%~	26%~	23%	31%	23%	27%							
NO	207	2994	18	49	30	42	59	9	158					17	15	189	154	52	81	126								
	74%	64%*	78%~	82%	83%~	76%	69%	53%~	75%	~	~	~	~	~	68%~	83%~	74%~	77%	69%	77%	73%							
DON'T KNOW	4	99	2		2				3						1	3	4		3	1								
NOT ANSWERED	13	284							2							2			1	1								
VALID CASES	278	4699	23	60	36	55	85	17	212					25	18	255	201	75	105	172								
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174								
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%								

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE	
Q39 EVERY DAY	61 22%	949 20%	4 17%	13 22%	7 19%	10 19%	23 27%	3 18%	45 21%	~	~	~	~	~	7 30%	2 11%	57 23%	40 20%	21 29%	29 28%	31 18%*
SOME DAYS	16 6%	436 9%*	1 4%	2 3%	4 11%	6 11%	3 4%	11 5%	~	~	~	~	~	4 17%	1 6%	15 6%	11 5%	5 7%	4 4%	12 7%	
NOT AT ALL	199 72%	3380 71%	19 79%	44 75%	25 69%	38 70%	58 69%	14 82%	156 74%	~	~	~	~	12 52%	15 83%	181 72%	150 75%	47 64%	70 68%	129 75%	
DON'T KNOW	5	34	1	1	2	1		2						2	1	4	3	2	4	1	
NOT ANSWERED	14	283					1	3								3	1		2	1	
VALID CASES	276	4765	24	59	36	54	84	17	212					23	18	253	201	73	103	172	
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174	
	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						ETHNIC-ITY	HEALTH STATUS		GENDER			
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER #	NATV AS-IAN ##	AMER HAW/ IND/ PAC ALSK ##	OTHR ##	MUL-TI TI	HIS-IC	NOT HIS-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	POOR	MALE	FE-MALE
Q40 NEVER	17 23%	367 27%	2 67%~	2 13%~	3 27%~	1 6%~	8 31%~	1 33%~	11 20%~	~	~	~	~	~	3 30%~	2 67%~	15 21%~	15 31%~	2 8%~	6 19%~	11 26%~
SOMETIMES	11 15%	331 24%*	~	3 20%~	2 18%~	4 25%~	1 4%~	1 33%~	10 18%~	~	~	~	~	~	~	11 ~16%~	7 14%~	4 15%~	~	7 23%~	4 9%~
USUALLY	15 20%	212 16%	1 33%~	3 20%~	2 18%~	5 31%~	3 12%~	1 33%~	13 24%~	~	~	~	~	2 20%~	15 ~21%~	8 16%~	7 27%~	~	6 19%~	9 21%~	
ALWAYS	32 43%	455 33%	~	7 47%~	4 36%~	6 38%~	14 54%~	~	21 38%~	~	~	~	~	5 50%~	1 33%~	29 41%~	19 39%~	13 50%~	12 39%~	19 44%~	
#ALWAYS + USUALLY (NET)	47 63%	667 49%*	1 33%~	10 67%~	6 55%~	11 69%~	17 65%~	1 33%~	34 62%~	~	~	~	~	7 70%~	1 33%~	44 63%~	27 55%~	20 77%~	18 58%~	28 65%~	
TOP BOX SCORE	32 43%	455 33%	~	7 47%~	4 36%~	6 38%~	14 54%~	~	21 38%~	~	~	~	~	5 50%~	1 33%~	29 41%~	19 39%~	13 50%~	12 39%~	19 44%~	
NOT ANSWERED		2	2						1					1		2	2			2	
VALID CASES	75	1365	3	15	11	16	26	3	55					10	3	70	49	26		31	43
NUMBER OF RESPONDENTS	77	1385	5	15	11	16	26	3	56					11	3	72	51	26		33	43
	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 ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE-MALE	
Q41 NEVER	42 55%	687 50%	3 75%~	8 53%~	7 64%~	8 50%~	13 50%~	2 67%~	33 60%~	~	~	~	~	~	5 45%~	2 67%~	39 55%~	33 66%~	9 35%~	20 63%~	21 49%~
SOMETIMES	12 16%	305 22%	1 25%~	2 13%~	2 18%~	3 19%~	3 12%~	1 33%~	9 16%~	~	~	~	~	~	2 18%~	12 17%~	5 10%~	7 27%~	5 16%~	7 16%~	
USUALLY	7 9%	152 11%	~	~	2 18%~	2 13%~	3 12%~	~	2 4%~	~	~	~	~	~	2 18%~	1 33%~	6 8%~	3 6%~	4 15%~	3 9%~	4 9%~
ALWAYS	15 20%	223 16%	~	5 33%~	~	3 19%~	7 27%~	~	11 20%~	~	~	~	~	~	2 18%~	14 20%~	9 18%~	6 23%~	4 13%~	11 26%~	
#ALWAYS + USUALLY (NET)	22 29%	375 27%	~	5 33%~	2 18%~	5 31%~	10 38%~	~	13 24%~	~	~	~	~	~	4 36%~	1 33%~	20 28%~	12 24%~	10 38%~	7 22%~	15 35%~
TOP BOX SCORE	15 20%	223 16%	~	5 33%~	~	3 19%~	7 27%~	~	11 20%~	~	~	~	~	~	2 18%~	14 20%~	9 18%~	6 23%~	4 13%~	11 26%~	
NOT ANSWERED	1	18	1						1							1	1		1		
VALID CASES	76	1367	4	15	11	16	26	3	55					11	3	71	50	26	32	43	
NUMBER OF RESPONDENTS	77	1385	5	15	11	16	26	3	56					11	3	72	51	26	33	43	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

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

	BANT	BANT	AGE						RACE						ETHNIC-ITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND ##	AMER IND/ ALSK NATV ##	MUL-OTHR #	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE
Q42 NEVER	45 59%	778 57%	3 75%~	5 33%~	8 73%~	11 69%~	16 62%~	1 33%~	33 60%~	~	~	~	~	7 64%~	3 100%~	41 58%~	31 62%~	14 54%~	23 72%~	21 49%~
SOMETIMES	12 16%	261 19%	1 25%~	5 33%~	2 18%~	1 6%~	2 8%~	1 33%~	10 18%~	~	~	~	~	1 9%~	~	12 17%~	8 16%~	4 15%~	4 13%~	8 19%~
USUALLY	6 8%	141 10%	~	2 13%~	~	~	4 15%~	~	3 5%~	~	~	~	~	2 18%~	~	6 8%~	4 8%~	2 8%~	~	6 14%~
ALWAYS	13 17%	175 13%	~	3 20%~	1 9%~	4 25%~	4 15%~	1 33%~	9 16%~	~	~	~	~	1 9%~	~	12 17%~	7 14%~	6 23%~	5 16%~	8 19%~
#ALWAYS + USUALLY (NET)	19 25%	316 23%	~	5 33%~	1 9%~	4 25%~	8 31%~	1 33%~	12 22%~	~	~	~	~	3 27%~	~	18 25%~	11 22%~	8 31%~	5 16%~	14 33%~
TOP BOX SCORE	13 17%	175 13%	~	3 20%~	1 9%~	4 25%~	4 15%~	1 33%~	9 16%~	~	~	~	~	1 9%~	~	12 17%~	7 14%~	6 23%~	5 16%~	8 19%~
NOT ANSWERED	1	30	1						1							1	1		1	
VALID CASES	76	1355	4	15	11	16	26	3	55					11	3	71	50	26	32	43
NUMBER OF RESPONDENTS	77	1385	5	15	11	16	26	3	56					11	3	72	51	26	33	43
	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

Q43 DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH		GENDER	
	OT1	OT2	18	25	35	45	55	65	AND	BLCK	AS-	NATV	AMER	IND/	ETHNIC-	EX &	VERY	FE-			
	AHP	OHP	TO	TO	TO	TO	TO	AND	OR	AFR-	IAN	ILND	NATV	ALSK	NOT	GOOD	FAIR	MALE			
	TOT	TOT	ADLT	ADLT	ADLT	ADLT	ADLT	ADLT	WHTE	#	##	##	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q43																					
YES	51	997	1	2	4	5	30	9	39						6	2	48	33	17	22	29
	18%	21%	4%~	3%*	11%~	9%*	35%*	53%~	18%	~	~	~	~	~	24%~	11%~	19%~	16%	23%	20%	17%
NO	231	3756	24	58	34	50	55	8	176						19	17	210	172	58	86	144
	82%	79%	96%~	97%*	89%~	91%*	65%*	47%~	82%	~	~	~	~	~	76%~	89%~	81%~	84%	77%	80%	83%
DON'T KNOW		42																			
NOT ANSWERED	13	287							2							2				1	1
VALID CASES	282	4753	25	60	38	55	85	17	215						25	19	258	205	75	108	173
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217						25	19	260	205	75	109	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND PAC #	AMER IND/ ALSK #	OTHR #	MUL-TI #	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE-MALE	MALE		
Q44	AHP	OHP	18	25	35	45	55	65														
YES	249%	44810%	14%~	35%	13%~	49%~	1013%	529%~	1910%	~	~	~	~	~	4%~	16%~	229%~	147%	1015%	33%*	2113%*	
NO	23691%	395690%	2396%~	5495%	3597%~	4391%~	6887%	1271%~	18090%	~	~	~	~	~	2296%~	1594%~	21791%~	17993%	5585%	9697%*	13987%*	
DON'T KNOW	22	377	1	3	2	8	7		16					2	3	19	12	10	9	13		
NOT ANSWERED	13	301							2							2			1	1		
VALID CASES	260	4404	24	57	36	47	78	17	199					23	16	239	193	65	99	160		
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174		
	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						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2																		
	AHP	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	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
									#	##	##	##	##	TI			GOOD	POOR	MALE	MALE
Q45																				
YES	91	1716	2	8	7	15	48	11	70					11	4	85	54	36	42	49
	33%	36%	8%~	14%*	18%~	28%	57%*	69%~	33%	~	~	~	~	~ 46%~	21%~	33%~	27%*	49%*	39%	29%
NO	187	3045	23	51	31	39	36	5	144					13	15	169	148	38	66	120
	67%	64%	92%~	86%*	82%~	72%	43%*	31%~	67%	~	~	~	~	~ 54%~	79%~	67%~	73%*	51%*	61%	71%
NOT ANSWERED	17	321		1		1	1	1	3					1		6	3	1	1	5
VALID CASES	278	4761	25	59	38	54	84	16	214					24	19	254	202	74	108	169
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174
	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					
	AHP	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	TO	TO	TO	TO	TO	OVER	AFR-	AS-	PAC	ALSK			PAN-	PAN-	&	&		
			24	34	44	54	64	OVER	AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
Q46.1																				
YES	62	1102	1	2	5	16	33	4	46					5	3	58	32	29	22	40
	21%	22%	4%~	3%*	13%~	29%	39%*	24%~	21%	~	~	~	~	~ 20%~	16%~	22%~	16%*	39%*	20%	23%
NO	233	3980	24	58	33	39	52	13	171					20	16	202	173	46	87	134
	79%	78%	96%~	97%*	87%~	71%	61%*	76%~	79%	~	~	~	~	~ 80%~	84%~	78%~	84%*	61%*	80%	77%
VALID CASES	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE							RACE							ETHNIC-	HEALTH		GENDER	
	OT1	OT2																			
	AHP	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
Q46.2																					
YES	75	1444	1	6	8	17	36	6	55					6	8	65	47	28	32	43	
	25%	28%	4%	10%*	21%~	31%	42%*	35%~	25%	~	~	~	~	~ 24%~	42%~	25%~	23%	37%*	29%	25%	
NO	220	3638	24	54	30	38	49	11	162					19	11	195	158	47	77	131	
	75%	72%	96%~	90%*	79%~	69%	58%*	65%~	75%	~	~	~	~	~ 76%~	58%~	75%~	77%	63%*	71%	75%	
VALID CASES	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174	
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174	
	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			
	AHP 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	FE- MALE MALE		
Q46.3 YES	43 15%	826 16%	1 4%	7 12%	2 5%	15 27%*	16 19%	2 12%	32 15%	~	~	~	~	~	5 20%	3 16%	39 15%	21 10%*	22 29%*	15 14%	28 16%
Q46.3 NO	252 85%	4256 84%	24 96%	53 88%	36 95%	40 73%*	69 81%	15 88%	185 85%	~	~	~	~	~	20 80%	16 84%	221 85%	184 90%*	53 71%*	94 86%	146 84%
VALID CASES	295	5082	25	60	38	55	85	17	217						25	19	260	205	75	109	174
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217						25	19	260	205	75	109	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER		
	OT1	OT2												ITY	STATUS					
	AHP	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			PAN-	PAN-	&	&		
									AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	FE-
									WHTE	#	##	##	##	##	TI					MALE
Q47.1																				
YES	13	211				2	8	3	8					3	13	3	10	8	5	
	4%	4%	~	~	~	4%	9%*	18%~	4%	~	~	~	~	~ 12%~	~ 5%~	1%*	13%*	7%	3%	
NO	282	4871	25	60	38	53	77	14	209					22	19	247	202	65	101	169
	96%	96%	100%~	100%~	100%~	96%	91%*	82%~	96%	~	~	~	~	~ 88%~	100%~	95%~	99%*	87%*	93%	97%
VALID CASES	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174
	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 OT1	BANT OT2	AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-AMER #	AS-IAN ##	NATV HAW/ILND PAC #	AMER IND/ALSK #	OTHR #	MUL-TI #	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE-MALE
Q47.2 YES	8 3%	212 4%	1 ~ 2%	2 ~ 4%	4 5%	1 6%	1	5 2%	~	~	~	~	3 ~ 12%	8 ~ 3%	2 1%*	6 8%*	2 1%*	6 8%*	2 2%	6 3%
NO	287 97%	4870 96%	25 100%~	59 98%	38 100%~	53 96%	81 95%	16 94%~	212 98%	~	~	~	~	22 ~ 88%	19 100%~	252 97%~	203 99%*	69 92%*	107 98%	168 97%
VALID CASES	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174
NUMBER OF RESPONDENTS	295 100%	5082 100%	25 100%	60 100%	38 100%	55 100%	85 100%	17 100%	217 100%					25 100%	19 100%	260 100%	205 100%	75 100%	109 100%	174 100%

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					
	AHP	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	&		
																		&		
																			FE-	
																			MALE	
																			MALE	
Q47.3																				
YES	15	195	1		1	3	4	6	12						1	14	7	8	4	11
	5%	4%	4%~		~ 3%~	5%	5%	35%~	6%	~	~	~	~	~	5%~	5%~	3%	11%*	4%	6%
NO	280	4887	24	60	37	52	81	11	205					25	18	246	198	67	105	163
	95%	96%	96%~	100%~	97%~	95%	95%	65%~	94%	~	~	~	~	~100%~	95%~	95%~	97%	89%*	96%	94%
VALID CASES	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174
	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		
	AHP 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
Q47.4 YES	58 20%	916 18%	2 8%~	3 5%*	5 13%~	13 24%	31 36%*	4 24%~	43 20%	~	~	~	~	~	6 24%~	5 26%~	52 20%~	30 15%*	27 36%*	25 23%	33 19%
NO	237 80%	4166 82%	23 92%~	57 95%*	33 87%~	42 76%	54 64%*	13 76%~	174 80%	~	~	~	~	~	19 76%~	14 74%~	208 80%~	175 85%*	48 64%*	84 77%	141 81%
VALID CASES	295	5082	25	60	38	55	85	17	217						25	19	260	205	75	109	174
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217						25	19	260	205	75	109	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	AHP	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	OTHR	MUL-	HIS-	HIS-	GOOD			
									AMER	IAN	ILND	NATV		TI	IC	IC	&			
									#	##	##	##	##				FAIR			
									WHTE								&			
																	POOR			
																	MALE			
																	MALE			
Q48																				
YES	83	1408	6	14	13	17	26	6	65					7	5	76	39	42	23	60
	30%	30%	24%~	24%	34%~	31%	31%	35%~	31%	~	~	~	~	~ 29%	26%~	30%~	19%*	56%*	21%*	35%*
NO	195	3330	19	45	25	37	58	11	148					17	14	180	162	33	84	111
	70%	70%	76%~	76%	66%~	69%	69%	65%~	69%	~	~	~	~	~ 71%	74%~	70%~	81%*	44%*	79%*	65%*
NOT ANSWERED	17	344		1		1	1		4					1		4	4		2	3
VALID CASES	278	4738	25	59	38	54	84	17	213					24	19	256	201	75	107	171
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174
	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					
	AHP	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	
Q49																				
YES	69	1187	4	12	11	14	22	6	52					7	5	62	28	39	19	50
	87%	88%	67%~	86%~	85%~	88%~	96%~	100%~	84%~	~	~	~	~	~100%	~100%	86%~	76%~	98%~	95%~	85%~
NO	10	167	2	2	2	2	1		10						10	9	1	1	9	
	13%	12%	33%~	14%~	15%~	13%~	4%~		16%~	~	~	~	~	~	~14%~	24%~	3%~	5%~	15%~	
NOT ANSWERED	4	54				1	3		3						4	2	2	3	1	
VALID CASES	79	1354	6	14	13	16	23	6	62					7	5	72	37	40	20	59
NUMBER OF RESPONDENTS	83	1408	6	14	13	17	26	6	65					7	5	76	39	42	23	60
	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						
	AHP	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	
Q50									WHTE	#	##	##	##	##	TI						
YES	163	2988	10	20	25	35	57	15	130					14	10	149	98	63	64	99	
	58%	63%	40%~	34%*	66%~	64%	67%*	94%~	61%	~	~	~	~	~ 56%	53%~	58%~	49%*	84%*	59%	58%	
NO	116	1758	15	39	13	20	28	1	84					11	9	107	104	12	44	72	
	42%	37%	60%~	66%*	34%~	36%	33%*	6%~	39%	~	~	~	~	~ 44%	47%~	42%~	51%*	16%*	41%	42%	
NOT ANSWERED	16	336		1				1	3						4	3			1	3	
VALID CASES	279	4746	25	59	38	55	85	16	214					25	19	256	202	75	108	171	
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174	
	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						
	AHP	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	TO	TO	TO	TO	TO	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	PAN-	PAN-	&	&	FE-		
			24	34	44	54	64	OVER	WHTE	#	##	##	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
Q51																					
YES	150	2723	8	19	22	35	51	14	120					13	8	139	87	61	57	93	
	94%	95%	80%~	95%~	88%~	100%~	96%	93%~	95%~	~	~	~	~	~	93%~	80%~	95%~	93%	97%	92%	96%
NO	9	155	2	1	3		2	1	6					1	2	7	7	2	5	4	
	6%	5%	20%~	5%~	12%~		4%	7%~	5%~	~	~	~	~	7%~	20%~	5%~	7%	3%	8%	4%	
NOT ANSWERED	4	110					4		4						3	4			2	2	
VALID CASES	159	2878	10	20	25	35	53	15	126					14	10	146	94	63	62	97	
NUMBER OF RESPONDENTS	163	2988	10	20	25	35	57	15	130					14	10	149	98	63	64	99	
	100%	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	VERY GOOD & POOR	FAIR & POOR	FE-MALE	MALE			
AHP TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	#	##	###	###	##	TI	IC	IC	GOOD	POOR	MALE	MALE			
NQ52																							
18 TO 24	26 9%	485 10%	25 100%~	~	~	~	~	14 6%*	~	~	~	~	~	2 8%	6 32%~	19 7%~	20 10%	5 7%	13 12%	12 7%			
25 TO 34	64 22%	853 17%*	~100%~	60 ~	~	~	~	50 23%	~	~	~	~	~	6 24%	3 16%~	56 22%~	53 26%*	7 9%*	19 17%	41 24%			
35 TO 44	41 14%	805 16%	~	38 ~100%~	~	~	~	28 13%	~	~	~	~	~	5 20%~	3 16%~	35 13%~	27 13%	11 15%	16 15%	23 13%			
45 TO 54	58 20%	1048 21%	~	~	55 ~100%~	~	~	44 20%	~	~	~	~	~	2 8%~	6 32%~	50 19%~	36 18%	20 27%	19 17%	37 21%			
55 TO 64	88 30%	1437 28%	~	~	~	85 ~100%~	~	66 30%	~	~	~	~	~	9 36%~	1 5%~	82 32%~	59 29%	26 35%	36 33%	49 28%			
65 TO 74	11 4%	302 6%*	~	~	~	~	10 59%~	10 5%	~	~	~	~	~	1 4%~	~	11 4%~	5 2%	4 5%	5 5%	6 3%			
75 OR OLDER	7 2%	152 3%	~	~	~	~	7 41%~	5 2%	~	~	~	~	~	~	~	7 3%~	5 2%	2 3%	1 0.9%	6 3%			
VALID CASES	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174			
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174			
	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				
	AHP	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY				
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR			
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	&		
									WHTE	#	##	##	##	##	TI	IC	IC	GOOD	
																	POOR	MALE	
																	MALE		
NQ53																			
MALE	112	2039	13	19	16	19	36	5	82					8	9	98	81	26	109
	38%	40%	52%~	32%	42%~	35%	42%	29%~	38%	~	~	~	~	~ 32%	47%~	38%~	40%	35%	100%~
FEMALE	183	3043	12	41	22	36	49	12	135					17	10	162	124	49	174
	62%	60%	48%~	68%	58%~	65%	58%	71%~	62%	~	~	~	~	~ 68%	53%~	62%~	60%	65%	~100%~
VALID CASES	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-AMER #	AS-IAN ##	NATV HAW/ ILND #	AMER IND/ ALSK #	OTHR ##	MUL-TI #	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE-MALE
Q54																				
8TH GRADE OR LESS	7 2%	267 6%*	1 ~	2 2%	3 3%~	4 4%	3 4%	3 1%	~	~	~	~	~	1 4%~	2 11%~	5 2%~	4 2%	3 4%	2 2%	5 3%
SOME HIGH SCHOOL BUT DID NOT GRADUATE	43 15%	599 13%	5 20%~	12 20%	4 11%~	6 11%	11 13%	4 24%~	32 15%	~	~	~	~	4 16%~	3 16%~	39 15%~	25 12%*	17 23%	17 16%	26 15%
HIGH SCHOOL GRADUATE OR GED	90 32%	1663 35%	11 44%~	17 28%	11 30%~	20 36%	24 28%	5 29%~	71 33%	~	~	~	~	3 12%~	8 42%~	81 31%~	67 33%	21 28%	33 31%	57 33%
SOME COLLEGE OR 2-YEAR DEGREE	109 39%	1668 35%	8 32%~	21 35%	18 49%~	20 36%	37 44%	5 29%~	83 38%	~	~	~	~	14 56%~	5 26%~	103 40%~	78 38%	31 41%	44 41%	65 37%
4-YEAR COLLEGE GRADUATE	16 6%	348 7%	1 4%~	7 12%	2 5%~	2 4%	3 4%	1 6%~	14 6%	~	~	~	~	1 4%~	1 5%~	15 6%~	15 7%*	1 1%*	6 6%	10 6%
MORE THAN 4-YEAR COLLEGE DEGREE	17 6%	201 4%	~	2 3%	1 3%~	5 9%	7 8%	2 12%~	14 6%	~	~	~	~	2 8%~	~	17 7%~	14 7%	2 3%	6 6%	11 6%
NOT ANSWERED	13	336			1												2		1	
VALID CASES	282	4746	25	60	37	55	85	17	217					25	19	260	203	75	108	174
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

Q55 ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	AHP	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				HIS-	VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			HIS-	GOOD	FAIR				
									AMER		ILLND	NATV	OTHR	MUL-	IC	IC	&	&		FE-	
									WHTE	#	##	##	##	##	TI		GOOD	POOR	MALE	MALE	
Q55																					
YES HISPANIC OR LATINO	19	571	6	3	3	6	1								19	13	6	9	10		
	7%	12%*	24%~	5%	8%~	11%	1%*		~	~	~	~	~	~	~100%~	~	6%	8%	8%	6%	
NO NOT HISPANIC OR LATINO	260	4145	19	56	34	49	82	17	216					25	260	188	68	98	162		
	93%	88%*	76%~	95%	92%~	89%	99%*100%~	100%~	~	~	~	~	~	~100%~	~100%~	94%	92%	92%	94%		
NOT ANSWERED	16	366		1	1		2		1							4	1	2	2		
VALID CASES	279	4716	25	59	37	55	83	17	216					25	19	260	201	74	107	172	
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174	
	100%	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					
	AHP	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/			HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	TO	TO	TO	TO	TO	OVER	AFR-	IAN	PAC	ALSK			PAN-	PAN-	&	&		
									AMER		ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
Q56.1																				
YES	255	4120	21	58	34	48	76	15	217					25	13	241	184	67	96	159
	86%	81%*	84%~	97%*	89%~	87%	89%	88%~	100%~	~	~	~	~	~100%~	68%~	93%~	90%*	89%	88%	91%*
NO	40	962	4	2	4	7	9	2							6	19	21	8	13	15
	14%	19%*	16%~	3%*	11%~	13%	11%	12%~	~	~	~	~	~	~	32%~	7%~	10%*	11%	12%	9%*
VALID CASES	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174
	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					
	AHP	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
Q56.2																				
YES	2	85		1	1									2	2	2				2
	0.7%	2%		~ 2%	3%~									8%~	~0.8%~	1%~				1%
NO	293	4997	25	59	37	55	85	17	217					23	19	258	203	75	109	172
	99%	98%*	100%~	98%	97%~	100%~	100%~	100%~	100%~					92%~	100%~	99%~	99%	100%~	100%~	99%~
VALID CASES	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

Q56.3 WHAT IS YOUR RACE? RESPONSE: ASIAN

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	AHP	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	&			
									WHTE	#	##	##	##	##	TI	IC	IC	GOOD		
																		POOR		
																		MALE		
																		MALE		
Q56.3																				
YES	5	136			1	1	2	1							5	4	1	1	4	
	2%	3%	~	~	3%	2%	2%	6%	~	~	~	~	~	~	~	2%	2%	1%	0.9%	2%
NO	290	4946	25	60	37	54	83	16	217					25	19	255	201	74	108	170
	98%	97%	100%	100%	97%	98%	98%	94%	100%	~	~	~	~	~100%	100%	98%	98%	99%	99%	98%
VALID CASES	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH		GENDER			
	OT1	OT2												ITY	STATUS						
	AHP	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	
Q56.4																					
YES	3	40			1		2							1	3	2	1	2	1	2	1
	1%	0.8%	~	~	3%	~	2%	~	~	~	~	~	~	4%	~	1%	~	1%	1%	2%	0.6%
NO	292	5042	25	60	37	55	83	17	217					24	19	257	203	74	107	173	
	99%	99%	100%	~100%	~97%	~100%	~98%	100%	~100%	~	~	~	~	~96%	~100%	~99%	~99%	99%	98%	99%	
VALID CASES	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174	
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

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

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	OT1	OT2																		
	AHP	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				HIS-	HIS-	VERY	GOOD	FAIR	
	ADLT	ADLT	TO	TO	TO	TO	TO	OVER	AFR-	AS-	PAC	ALSK			PAN-	PAN-	&	&	FE-	
			24	34	44	54	64	OVER	AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	GOOD	POOR	MALE	MALE
Q56.5																				
YES	26	313	4	4	2	4	11	1						18	1	24	18	8	13	13
	9%	6%	16%	7%	5%	7%	13%	6%	~	~	~	~	~	72%	5%	9%	9%	11%	12%	7%
NO	269	4769	21	56	36	51	74	16	217					7	18	236	187	67	96	161
	91%	94%	84%	93%	95%	93%	87%	94%	100%	~	~	~	~	28%	95%	91%	91%	89%	88%	93%
VALID CASES	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174
	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					
	AHP	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/			NOT	VERY					
	ADLT	ADLT	TO	TO	TO	TO	TO	OVER	AFR-	AS-	PAC	ALSK		HIS-	HIS-	GOOD	FAIR			
			24	34	44	54	64	OVER	AMER	IAN	ILND	NATV	OTHR	MUL-	IC	IC	&	&		
									WHTE	#	##	##	##	##	TI	IC	IC	GOOD	POOR	
																		MALE	MALE	
Q56.6																				
YES	16	278	3	3	4	1	5							5	5	10	14	2	4	12
	5%	5%	12%~	5%	11%~	2%	6%		~	~	~	~	~	~ 20%~	26%~	4%~	7%	3%	4%	7%
NO	279	4804	22	57	34	54	80	17	217					20	14	250	191	73	105	162
	95%	95%	88%~	95%	89%~	98%	94%	100%~	100%~	~	~	~	~	~ 80%~	74%~	96%~	93%	97%	96%	93%
VALID CASES	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174
NUMBER OF RESPONDENTS	295	5082	25	60	38	55	85	17	217					25	19	260	205	75	109	174
	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					
	AHP	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	&			
									WHTE	#	##	##	##	##	IC	IC	GOOD			
																POOR	MALE			
																	MALE			
Q57																				
YES	23	466	1	9	1	4	4	4	19						1	22	15	8	8	15
	10%	12%	6%~	22%~	5%~	8%~	5%*	25%~	11%~	~	~	~	~	~	7%~	11%~	9%	14%	9%	12%
NO	199	3267	16	32	21	44	71	12	155					13	14	183	145	50	85	114
	90%	88%	94%~	78%~	95%~	92%~	95%*	75%~	89%~	~	~	~	~	~100%~	93%~	89%~	91%	86%	91%	88%
NOT ANSWERED	1	46				1									1			1		1
VALID CASES	222	3733	17	41	22	48	75	16	174					13	15	205	160	58	93	129
NUMBER OF RESPONDENTS	223	3779	17	41	22	49	75	16	174					13	16	205	160	59	93	130
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	AHP	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK			GOOD	FAIR				
									AMER		ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									WHTE	#	##	##	##	##	IC	IC	&			
																	POOR			
																	MALE			
																	MALE			
Q58.1																				
YES	12	238	1	3	1	3	2	2	8						1	11	8	4	4	8
	52%	51%	100%	33%	100%	75%	50%	50%	42%	~	~	~	~	~	100%	50%	53%	50%	50%	53%
NO	11	228		6		1	2	2	11							11	7	4	4	7
	48%	49%	~	67%	~	25%	50%	50%	58%	~	~	~	~	~	~	50%	47%	50%	50%	47%
VALID CASES	23	466	1	9	1	4	4	4	19						1	22	15	8	8	15
NUMBER OF RESPONDENTS	23	466	1	9	1	4	4	4	19						1	22	15	8	8	15
	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					
	AHP	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	IND/				VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	&	&		
									AMER	##	##	##	##	##	TI	IC	IC	GOOD	POOR	
									WHTE	#	##	##	##	##	TI	IC	IC	GOOD	POOR	
Q58.2																				
YES	6	182	1	2		1	1	1	6						6	3	3	4	2	
	26%	39%	100%	22%		25%	25%	25%	32%	~	~	~	~	~	~	27%	20%	38%	50%	13%
NO	17	284		7	1	3	3	3	13						1	16	12	5	4	13
	74%	61%		78%	100%	75%	75%	75%	68%	~	~	~	~	~	100%	73%	80%	63%	50%	87%
VALID CASES	23	466	1	9	1	4	4	4	19						1	22	15	8	8	15
NUMBER OF RESPONDENTS	23	466	1	9	1	4	4	4	19						1	22	15	8	8	15
	100%	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%

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

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

	BANT	BANT	AGE						RACE						ETHNIC-	HEALTH	GENDER			
	OT1	OT2												ITY	STATUS					
	AHP	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &				
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY					
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	AS-	PAC	ALSK			GOOD	FAIR				
									AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD			
									WHTE	#	##	##	##	##	TI	IC	IC	GOOD		
																		POOR		
																		MALE		
																		MALE		
Q58.3																				
YES	8	156		4			2	2	8						8	5	3	2	6	
	35%	33%		~ 44%			~ 50%	~ 50%	42%						~ 36%	33%	38%	25%	40%	
NO	15	310	1	5	1	4	2	2	11						1	14	10	5	6	9
	65%	67%	100%	56%	100%	100%	50%	50%	58%						~ 100%	64%	67%	63%	75%	60%
VALID CASES	23	466	1	9	1	4	4	4	19						1	22	15	8	8	15
NUMBER OF RESPONDENTS	23	466	1	9	1	4	4	4	19						1	22	15	8	8	15
	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 OT1	BANT OT2	AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER		
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE
Q58.4 YES		56 12%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	23 100%	410 88%	1 100%	9 100%	1 100%	4 100%	4 100%	4 100%	19 100%	~	~	~	~	~	1 100%	22 100%	15 100%	8 100%	8 100%	15 100%
VALID CASES	23	466	1	9	1	4	4	4	19						1	22	15	8	8	15
NUMBER OF RESPONDENTS	23	466	1	9	1	4	4	4	19						1	22	15	8	8	15
	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			
	AHP	OHP	18	25	35	45	55	65	BLCK	NATV	AMER				NOT	EX &		
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	HAW/	IND/				VERY	GOOD	FAIR	
	ADLT	ADLT	TO	TO	TO	TO	TO	OVER	AFR-	AS-	PAC	ALSK			&	&		
			24	34	44	54	64	OVER	AMER	IAN	ILND	NATV	OTHR	MUL-	HIS-	HIS-	GOOD	FAIR
									#	##	##	##	##	TI	IC	IC	GOOD	POOR
																	MALE	MALE
Q58.5																		
YES		39																
		8%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	23	427	1	9	1	4	4	4	19						1	22	15	8
	100%	92%	~100%	~100%	~100%	~100%	~100%	~100%	~100%	~	~	~	~	~	~100%	~100%	~100%	~100%
VALID CASES	23	466	1	9	1	4	4	4	19						1	22	15	8
NUMBER OF RESPONDENTS	23	466	1	9	1	4	4	4	19						1	22	15	8
	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																					
	AHP	OHP	18	25	35	45	55	65	BLCK	NATV	AMER					NOT	EX &	VERY	GOOD	FAIR			
	TOT	TOT	TO	TO	TO	TO	TO	AND	AFR-	AS-	HAW/	IND/				HIS-	HIS-	GOOD	FAIR			FE-	
	ADLT	ADLT	24	34	44	54	64	OVER	AMER	IAN	ILND	NATV	OTHR	MUL-	TI	IC	IC	&	&			MALE	MALE
									#	##	##	##	##	##	TI			GOOD	POOR			MALE	MALE
NQ13																							
0-6	34	687	3	5	4	7	13		26					1	3	29	18	15	17	15			
	16%	20%	20%~	12%~	14%~	18%~	20%	~	16%	~	~	~	~	~	6%~	23%~	16%~	13%	24%	24%	12%*		
7-8	69	1221	6	17	14	13	13	4	53					8	3	63	50	17	22	45			
	33%	35%	40%~	41%~	50%~	33%~	20%*	31%~	34%	~	~	~	~	~	50%~	23%~	34%~	36%	27%	31%	35%		
9-10	105	1603	6	19	10	19	38	9	79					7	7	94	69	31	33	70			
	50%	46%	40%~	46%~	36%~	49%~	59%	69%~	50%	~	~	~	~	~	44%~	54%~	51%~	50%	49%	46%	54%		
VALID CASES	208	3511	15	41	28	39	64	13	158					16	13	186	137	63	72	130			
NUMBER OF RESPONDENTS	208	3511	15	41	28	39	64	13	158					16	13	186	137	63	72	130			
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
MEAN	2.34	2.26	2.20	2.34	2.21	2.31	2.39	2.69	2.34					2.38	2.31	2.35	2.37	2.25	2.22	2.42			
p stat_(*=Sig @ p<=.05)	.118		~	~	~	~	.546	~	.840	~	~	~	~	~	~	~	~	.428	.295	.109	.050*		

[ASKED IF Q7 >= 1 TIME]

NQ23 RATING OF PERSONAL DOCTOR

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2																			
	AHP	OHP	18	25	35	45	55	65	BLK	NATV	AMER					NOT	EX &	VERY			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	AS-	HAW/	IND/				HIS-	HIS-	GOOD	FAIR		
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-	IAN	PAC	ALSK	OTHR	MUL-	IC	PAN-	PAN-	&	&	FE-	
									WHTE	#	##	##	##	##	TI	IC	IC	GOOD	POOR	MALE	MALE
NQ23																					
0-6	29	572	1	7	3	6	10		23					1	3	25	18	9	8	20	
	12%	15%	6%	16%	11%	13%	14%		13%	~	~	~	~	~	5%	20%	12%	11%	14%	10%	13%
7-8	65	959	3	18	12	12	17	2	58					2	2	60	47	17	24	40	
	28%	26%	17%	42%	43%	26%	23%	13%	33%*	~	~	~	~	~	11%	13%	29%	29%	27%	30%	27%
9-10	139	2197	14	18	13	28	47	14	94					16	10	124	97	38	47	89	
	60%	59%	78%	42%	46%	61%	64%	88%	54%*	~	~	~	~	~	84%	67%	59%	60%	59%	59%	60%
VALID CASES	233	3728	18	43	28	46	74	16	175					19	15	209	162	64	79	149	
NUMBER OF RESPONDENTS	233	3728	18	43	28	46	74	16	175					19	15	209	162	64	79	149	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%
MEAN	2.47	2.44	2.72	2.26	2.36	2.48	2.50	2.88	2.41					2.79	2.47	2.47	2.49	2.45	2.49	2.46	
p stat_(*=Sig @ p<=.05)	.443		~	~	~	~	.682		.010*	~	~	~	~	~	~	~	~	.625	.802	.740	.793

[ASKED IF Q15 = YES]

NQ27 RATING OF SPECIALIST SEEN MOST OFTEN

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	OT1	OT2																			
	AHP	OHP	18	25	35	45	55	65	BLK	AS-	NATV	AMER					EX &	VERY			
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	IAN	ILND	ALSK				NOT	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	AFR-							HIS-	HIS-	&	&		
									AMER							IC	IC	GOOD	POOR		
									WHTE	#	##	##	##	##	##	TI			MALE		
																			FE-		
																			MALE		
NQ27																					
0-6	11	239	1	3	1	3	3	7						1	2	9	7	4	5	6	
	10%	13%	25%~	13%~	6%~	15%~	8%~	~	8%~	~	~	~	~	~	9%~	40%~	9%~	11%~	9%~	14%~	8%~
7-8	25	475		7	5	6	4	3	24					1		25	15	10	9	16	
	23%	27%	~	30%~	31%~	30%~	11%~	33%~	28%~	~	~	~	~	~	9%~	~	24%~	23%~	23%~	24%~	22%~
9-10	75	1057	3	13	10	11	31	6	56					9	3	70	44	29	23	51	
	68%	60%	75%~	57%~	63%~	55%~	82%~	67%~	64%~	~	~	~	~	~	82%~	60%~	67%~	67%~	67%~	62%~	70%~
VALID CASES	111	1771	4	23	16	20	38	9	87					11	5	104	66	43	37	73	
NUMBER OF RESPONDENTS	111	1771	4	23	16	20	38	9	87					11	5	104	66	43	37	73	
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	
MEAN	2.58	2.46	2.50	2.43	2.56	2.40	2.74	2.67	2.56					2.73	2.20	2.59	2.56	2.58	2.49	2.62	
p stat_(*=Sig @ p<=.05)		.083	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

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

NQ35 RATING OF HEALTH PLAN

	BANT	BANT	AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER				
	OT1	OT2																					
	AHP	OHP	18	25	35	45	55	65	BLK	AS-	NATV	AMER					NOT	EX &					
	TOT	TOT	TO	TO	TO	TO	TO	AND	OR	IAN	HAW/	IND/				HIS-	HIS-	VERY	GOOD	FAIR			
	ADLT	ADLT	24	34	44	54	64	OVER	WHTE	#	##	###	###	###	TI	IC	IC	&	&	GOOD	POOR	MALE	MALE
NQ35																							
0-6	57	953	4	13	11	13	14		44					5	2	53	36	19	27	29			
	21%	21%	17%	23%	29%	26%	18%		22%	~	~	~	~	~ 22%	11%	22%	19%	27%	25%	18%			
7-8	87	1522	10	17	14	19	21	5	68					9	3	82	65	21	31	55			
	32%	33%	42%	30%	37%	38%	27%	29%	33%	~	~	~	~	~ 39%	17%	33%	34%	30%	29%	34%			
9-10	127	2121	10	26	13	18	44	12	91					9	13	110	92	30	48	76			
	47%	46%	42%	46%	34%	36%	56%	71%	45%	~	~	~	~	~ 39%	72%	45%	48%	43%	45%	48%			
VALID CASES	271	4596	24	56	38	50	79	17	203					23	18	245	193	70	106	160			
NUMBER OF RESPONDENTS	271	4596	24	56	38	50	79	17	203					23	18	245	193	70	106	160			
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%			
MEAN	2.26	2.25	2.25	2.23	2.05	2.10	2.38	2.71	2.23					2.17	2.61	2.23	2.29	2.16	2.20	2.29			
p stat_(*=Sig @ p<=.05)		.928		~.780		~.114	.102		~.332	~	~	~	~	~	~	~	~.294	.211	.312	.380			

GETTING NEEDED CARE

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS		GENDER				
	AHP TOT ADLT	OHP TOT ADLT	18 TO	25 TO	35 TO	45 TO	55 TO	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	
NPRBSEE4 NQ46	2.18	2.25	2.17	2.26	2.06	1.95	2.24	2.50	2.18					2.23	2.00	2.19	2.25	2.04	2.26	2.15	
p stat_(*=Sig @ p<=.05)	.330		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCARNES4 NQ15	2.36	2.31	2.07	2.32	2.29	2.22	2.46	2.86	2.36					2.50	2.23	2.36	2.46	2.14	2.39	2.35	
p stat_(*=Sig @ p<=.05)	.312		~	~	~	~.228	~	~.985	~	~	~	~	~	~	~	~	~.021*	.011*	.677	.707	
COMPOSITE	2.27	2.28	2.12	2.29	2.17	2.09	2.35	2.68	2.27	x	x	x	x	x	2.37	2.12	2.28	2.36	2.09	2.33	2.25
p stat_(*=Sig @ p<=.05)	.800		~	~	~	~.164	~	~.868	~	~	~	~	~	~	~	~	~.004*	.005*	.292	.467	

GETTING CARE QUICKLY

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS		GENDER				
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILLND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
NCARSN4 NQ4	2.33	2.40	2.33	2.14	2.27	2.19	2.52	2.67	2.27					2.60	2.43	2.31	2.41	2.15	2.23	2.36	
p stat_(*=Sig @ p<=.05)	.338		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NAPGET4 NQ6	2.32	2.26	1.50	2.33	2.38	2.21	2.37	2.69	2.27					2.47	2.46	2.29	2.34	2.19	2.33	2.29	
p stat_(*=Sig @ p<=.05)	.353		~	~	~	~	~.592	~	~	~	~	~	~	~	~	~	~.635	~.168	~.892	~.539	
COMPOSITE	2.33	2.33	1.92	2.24	2.32	2.20	2.44	2.68	2.27	x	x	x	x	x	2.54	2.45	2.30	2.37	2.17	2.28	2.33
p stat_(*=Sig @ p<=.05)	.821		~	~	~	~	~.049*	~	~.016*	~	~	~	~	~	~	~	~.079	~.007*	~.399	~.945	

HOW WELL DOCTORS COMMUNICATE

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS		GENDER				
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER #	AS- IAN ##	NATV HAW/ PAC ILND ###	AMER IND/ ALSK ###	OTHR ###	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE MALE		
NDREXPL4 NQ32	2.72	2.64	2.50	2.77	2.70	2.61	2.80	2.92	2.74					2.73	2.67	2.74	2.76	2.65	2.75	2.72	
p stat_(*=Sig @ p<=.05)		.039*	~	~	~	~	~.140	~	~	~	~	~	~	~	~	~	~.220	.294	.561	.939	
NDRLSTN4 NQ33	2.66	2.61	2.58	2.58	2.57	2.51	2.84	2.92	2.67					2.87	2.42	2.70	2.65	2.73	2.73	2.65	
p stat_(*=Sig @ p<=.05)		.281	~	~	~	~	~.002*	~	~	~	~	~	~	~	~	~	~.795	.313	.282	.648	
NDRESPU4 NQ34	2.72	2.67	2.58	2.58	2.83	2.56	2.87	2.92	2.70					3.00	2.50	2.75	2.71	2.77	2.78	2.71	
p stat_(*=Sig @ p<=.05)		.254	~	~	~	~	~.008*	~	~	~	~	~	~	~	~	~	~.692	.476	.362	.672	
NDRTMEN4 NQ37	2.63	2.52	2.50	2.58	2.57	2.50	2.80	2.92	2.64					2.87	2.25	2.68	2.66	2.65	2.61	2.65	
p stat_(*=Sig @ p<=.05)		.023*	~	~	~	~	~.007*	~	~	~	~	~	~	~	~	~	~.492	.848	.735	.535	
COMPOSITE	2.68	2.61	2.54	2.63	2.66	2.55	2.83	2.92	2.69	x	x	x	x	x	2.87	2.46	2.72	2.69	2.70	2.72	2.68
p stat_(*=Sig @ p<=.05)		.038*	~	~	~	~	~.002*	~	~	~	~	~	~	~	~	~	~.721	.773	.504	.936	

CUSTOMER SERVICE

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY	HEALTH STATUS		GENDER				
	AHP TOT ADLT	OHP TOT ADLT	18 TO	25 TO	35 TO	45 TO	55 TO	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
NPBCLCS4 NQ50	2.52	2.30	2.50	2.58	2.20	2.36	2.76	2.50	2.48					2.67	2.43	2.54	2.55	2.52	2.52	2.53	
p stat_(*=Sig @ p<=.05)		.014*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCSRESP NQ51	2.71	2.69	3.00	2.68	2.60	2.50	2.86	2.75	2.65					3.00	2.57	2.71	2.69	2.72	2.59	2.76	
p stat_(*=Sig @ p<=.05)		.814	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.61	2.50	2.75	2.63	2.40	2.43	2.81	2.63	2.57	x	x	x	x	x	2.83	2.50	2.63	2.62	2.62	2.56	2.64
p stat_(*=Sig @ p<=.05)		.097	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

SHARED DECISION MAKING

	BANT OT1	BANT OT2	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
NNRXWHY NQ11	2.83	2.87	2.33	2.78	2.67	2.85	2.93	3.00	2.84					2.71	2.71	2.83	2.87	2.74	2.94	2.76	
p stat_(*=Sig @ p<=.05)		.425	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NNRXWYNT NQ12	2.58	2.49	2.33	2.65	2.78	2.33	2.64	2.71	2.55					2.86	2.14	2.61	2.65	2.46	2.49	2.64	
p stat_(*=Sig @ p<=.05)		.290	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NRXBST NQ13	2.57	2.53	3.00	2.78	2.67	2.26	2.54	2.71	2.49					2.71	2.71	2.54	2.64	2.47	2.53	2.58	
p stat_(*=Sig @ p<=.05)		.621	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.66	2.63	2.56	2.73	2.70	2.48	2.70	2.81	2.63	x	x	x	x	x	2.76	2.52	2.66	2.72	2.56	2.65	2.66
p stat_(*=Sig @ p<=.05)		.573	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

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

	BANTO T1	BANTO T2	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
	AHP 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	77%	77%	100%	83%	71%	62%	78%	100%	80%					62%	67%	78%	82%	70%	74%	80%	
CARNES4 Q14	83%	82%	80%	78%	75%	80%	87%	100%	83%					83%	77%	83%	88%	70%	83%	83%	
AVERAGE	80.04	79.43	90.00	80.33	72.79	70.95	82.68	100.0	81.94	x	x	x	x	x	72.44	71.79	80.53	85.05	69.70	78.39	81.29

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	83%	83%	89%	71%	80%	81%	92%	100%	82%					100%	71%	84%	87%	76%	83%	83%
APGET4 Q6	81%	78%	42%	87%	81%	79%	83%	92%	80%					94%	77%	81%	82%	77%	80%	81%
AVERAGE	82.38	80.38	65.28	79.30	80.48	79.95	87.35	96.15	81.17	x	x	x	x	x 97.06	74.18	82.44	84.43	76.70	81.83	82.26

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

	BANT	BANT	AGE							RACE							ETHNIC- ITY		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	FE- MALE	MALE		
DREXPL4 Q17	96%	92%	92%	94%	100%	94%	98%	100%	96%					100%	92%	97%	97%	94%	98%	96%		
DRLSTN4 Q18	94%	90%	100%	90%	100%	83%	98%	100%	94%					100%	83%	95%	95%	92%	97%	93%		
DRESPU4 Q19	94%	91%	92%	90%	100%	86%	98%	100%	94%					100%	83%	95%	95%	92%	95%	94%		
DRTMEN4 Q20	92%	88%	92%	90%	87%	89%	98%	100%	94%					93%	75%	94%	92%	94%	93%	92%		
AVERAGE	93.9	90.3	93.7	91.1	96.7	88.1	98.2	100	94.5	x	x	x	x	x	98.3	83.3	95.2	94.9	93.2	95.7	93.6	

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

	BANTO T1	BANTO T2	AGE						RACE							ETHNIC- ITY		HEALTH STATUS		GENDER	
	AHP 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	
PBCLCS4 Q31	92%	80%	100%	100%	80%	79%	95%	100%	92%					83%	86%	92%	91%	92%	95%	90%	
CSRESP Q32	94%	94%	100%	95%	100%	86%	95%	100%	92%				100%	100%	94%	93%	96%	86%	98%		
AVERAGE	93.00	86.67	100.0	97.37	90.00	82.14	95.35	100.0	91.75	x	x	x	x	x	91.67	92.86	92.68	92.12	94.00	90.80	93.88

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE						RACE						ETHNIC- ITY	HEALTH STATUS		GENDER			
	AHP TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE	
NRXWHY Q10	91%	93%	67%	89%	83%	93%	96%	100%	92%					86%	86%	91%	94%	87%	97%	88%	
NRXWYNT Q11	79%	74%	67%	82%	89%	67%	82%	86%	77%					93%	57%	81%	83%	73%	74%	82%	
RXBST Q12	79%	77%	100%	89%	83%	63%	77%	86%	74%					86%	86%	77%	82%	74%	76%	79%	
AVERAGE	83.0	81.5	77.8	86.7	85.2	74.1	85.2	90.5	81.3	x	x	x	x	x	88.1	76.2	83.1	86.1	77.8	82.6	82.9

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		
	AHP 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
Q1 YES	309 100%	5277 100%	56 100%	85 100%	82 100%	86 100%	190 100%	~	~	~	~	~	17 ~100%	67 100%	217 100%	272 100%	10 100%	240 100%	69 100%
NOT ANSWERED	1	32				1								1		1		1	
VALID CASES	309	5277	56	85	82	86	190						17	67	217	272	10	240	69
NUMBER OF RESPONDENTS	310 100%	5309 100%	56 100%	85 100%	82 100%	87 100%	190 100%						17 100%	68 100%	217 100%	273 100%	10 100%	241 100%	69 100%

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		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN #	NATV ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q3 YES	100 33%	1639 32%	20 38%	25 30%	29 36%	26 31%	65 34%	~	~	~	~	~	5 ~ 29%	22 33%	74 34%	91 34%	4 40%	69 30%*	31 45%
NO	199 67%	3549 68%	33 62%	57 70%	51 64%	58 69%	124 66%	~	~	~	~	~	12 ~ 71%	44 67%	142 66%	180 66%	6 60%	161 70%*	38 55%
NOT ANSWERED	11	121	3	3	2	3	1							2	1	2		11	
VALID CASES	299	5188	53	82	80	84	189						17	66	216	271	10	230	69
NUMBER OF RESPONDENTS	310	5309	56	85	82	87	190						17	68	217	273	10	241	69
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN #	NATV ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q4 NEVER		19 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	6 7%	114 7%	1 5%	1 5%	2 8%	2 10%	1 2%	~	~	~	~	~	3 18%	3 4%	5 6%	~	6 10%	
USUALLY	14 16%	272 18%	4 21%	3 14%	3 12%	4 19%	8 13%	~	~	~	~	1 25%	4 24%	9 13%	14 17%	~	6 10% 8 31%	
ALWAYS	68 77%	1135 74%	14 74%	18 82%	21 81%	15 71%	51 85%	~	~	~	~	3 75%	10 59%	56 82%	64 77%	1 100%	50 81% 18 69%	
#ALWAYS + USUALLY (NET)	82 93%	1407 91%	18 95%	21 95%	24 92%	19 90%	59 98%	~	~	~	~	4 100%	14 82%	65 96%	78 94%	1 100%	56 90% 26 100%	
TOP BOX SCORE	68 77%	1135 74%	14 74%	18 82%	21 81%	15 71%	51 85%	~	~	~	~	3 75%	10 59%	56 82%	64 77%	1 100%	50 81% 18 69%	
NOT ANSWERED	12	99	1	3	3	5	5					1	5	6	8	3	7	5
VALID CASES	88	1540	19	22	26	21	60					4	17	68	83	1	62	26
NUMBER OF RESPONDENTS	100 100%	1639 100%	20 100%	25 100%	29 100%	26 100%	65 100%					5 100%	22 100%	74 100%	91 100%	4 100%	69 100%	31 100%

[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		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS- IAN #	NATV ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q5 YES	180 61%	3464 67%*	38 72%	48 59%	43 56%	51 61%	125 67%*	~	~	~	~	~	7 41%~	37 56%	137 64%	167 62%~	6 67%~	126 55%*	54 81%
NO	115 39%	1672 33%*	15 28%	33 41%	34 44%	33 39%	62 33%*	~	~	~	~	~	10 59%~	29 44%	77 36%	103 38%~	3 33%~	102 45%*	13 19%
NOT ANSWERED	15	173	3	4	5	3	3							2	3	3	1	13	2
VALID CASES	295	5136	53	81	77	84	187						17	66	214	270	9	228	67
NUMBER OF RESPONDENTS	310	5309	56	85	82	87	190						17	68	217	273	10	241	69
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN #	NATV ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q6 NEVER	5 3%	57 2%	~	~	2%~	8%~	3%	~	~	~	~	~	~	1 3%~	3 2%~	3 2%~	1 20%~	2 2%	3 6%
SOMETIMES	16 9%	393 12%	3 8%~	5 12%~	3 7%~	5 10%~	10 8%	~	~	~	~	~	~	2 6%~	12 9%~	14 9%~	1 20%~	10 8%	6 12%
USUALLY	43 25%	850 26%	7 18%~	11 26%~	11 27%~	14 29%~	32 27%	~	~	~	~	~	3 43%~	6 19%~	37 28%~	41 26%~	1 20%~	26 22%	17 34%
ALWAYS	106 62%	1954 60%	28 74%~	27 63%~	26 63%~	25 52%~	75 63%	~	~	~	~	~	4 57%~	23 72%~	80 61%~	100 63%~	2 40%~	82 68%*	24 48%
#ALWAYS + USUALLY (NET)	149 88%	2804 86%	35 92%~	38 88%~	37 90%~	39 81%~	107 89%	~	~	~	~	~	7 100%~	29 91%~	117 89%~	141 89%~	3 60%~	108 90%	41 82%
TOP BOX SCORE	106 62%	1954 60%	28 74%~	27 63%~	26 63%~	25 52%~	75 63%	~	~	~	~	~	4 57%~	23 72%~	80 61%~	100 63%~	2 40%~	82 68%*	24 48%
NOT ANSWERED	10	210		5	2	3	5							5	5	9	1	6	4
VALID CASES	170	3254	38	43	41	48	120						7	32	132	158	5	120	50
NUMBER OF RESPONDENTS	180	3464	38	48	43	51	125						7	37	137	167	6	126	54
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q5 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN #	NATV HAW/ILND ##	AMER IND/PAC ALSK ##	OTHR ##	MULTI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q7 NONE	85 29%	1484 30%	10 19%	23 28%	26 35%	26 31%	46 25%*	~	~	~	~	~	9 53%~	18 27%	61 29%	77 29%~	2 20%~	76 34%*	9 13%
1 TIME	90 31%	1437 29%	14 27%	31 38%	16 21%*	29 35%	64 34%	~	~	~	~	~	3 18%~	19 28%	67 31%	84 31%~	2 20%~	71 32%	19 28%
2	60 20%	1045 21%	16 31%	12 15%	16 21%	16 19%	36 19%	~	~	~	~	~	2 12%~	18 27%	42 20%	58 22%~	1 10%~	44 20%	16 23%
3	25 9%	518 10%	6 12%	8 10%	6 8%	5 6%	15 8%	~	~	~	~	~	2 12%~	7 10%	17 8%	22 8%~	2 20%~	16 7%	9 13%
4	17 6%	229 5%	3 6%	3 4%	6 8%	5 6%	13 7%	~	~	~	~	~	~	3 4%	13 6%	15 6%~	1 10%~	10 4%	7 10%
5 TO 9	12 4%	232 5%	3 6%	4 5%	3 4%	2 2%	9 5%	~	~	~	~	~	1 6%~	2 3%	10 5%	10 4%~	2 20%~	5 2%*	7 10%
10 OR MORE TIMES	4 1%	79 2%	~	1 1%	2 3%	1 1%	3 2%	~	~	~	~	~	~	~	3 1%	3 1%~	~	2 0.9%~	2 3%
NOT ANSWERED	17	285	4	3	7	3	4							1	4	4		17	
VALID CASES	293	5024	52	82	75	84	186						17	67	213	269	10	224	69
NUMBER OF RESPONDENTS	310	5309	56	85	82	87	190						17	68	217	273	10	241	69
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN #	NATV ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q8 #YES	140 69%	2500 72%	27 64%~	38 66%	36 77%~	39 68%	102 73%*	~	~	~	~	~	3 ~ 38%~	32 67%~	107 71%	133 70%~	5 63%~	94 65%	46 78%
NO	64 31%	975 28%	15 36%~	20 34%	11 23%~	18 32%	37 27%*	~	~	~	~	~	5 ~ 63%~	16 33%~	44 29%	57 30%~	3 38%~	51 35%	13 22%
NOT ANSWERED	4	65		1	2	1	1							1	1	2		3	1
VALID CASES	204	3475	42	58	47	57	139						8	48	151	190	8	145	59
NUMBER OF RESPONDENTS	208	3540	42	59	49	58	140						8	49	152	192	8	148	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN #	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q9 NEVER	4 2%	83 2%	~	2%	4%	2%	1 0.7%	~	~	~	~	~	2 4%	1 0.7%	3 2%	~	3 2%	1 2%
SOMETIMES	14 7%	254 7%	2 5%	3 5%	4 8%	5 9%	8 6%	~	~	~	~	1 13%	4 8%	9 6%	13 7%	1 13%	8 6%	6 10%
USUALLY	43 21%	708 20%	9 21%	11 19%	10 21%	13 22%	25 18%	~	~	~	~	2 25%	12 25%	29 19%	37 19%	3 38%	27 19%	16 27%
ALWAYS	144 70%	2421 70%	31 74%	42 74%	32 67%	39 67%	105 76%*	~	~	~	~	5 63%	30 63%	112 74%	137 72%	4 50%	107 74%	37 62%
#ALWAYS + USUALLY (NET)	187 91%	3129 90%	40 95%	53 93%	42 88%	52 90%	130 94%	~	~	~	~	7 88%	42 88%	141 93%	174 92%	7 88%	134 92%	53 88%
TOP BOX SCORE	144 70%	2421 70%	31 74%	42 74%	32 67%	39 67%	105 76%*	~	~	~	~	5 63%	30 63%	112 74%	137 72%	4 50%	107 74%	37 62%
NOT ANSWERED	3	74	2	1			1						1	1	2		3	
VALID CASES	205	3466	42	57	48	58	139					8	48	151	190	8	145	60
NUMBER OF RESPONDENTS	208 100%	3540 100%	42 100%	59 100%	49 100%	58 100%	140 100%					8 100%	49 100%	152 100%	192 100%	8 100%	148 100%	60 100%

[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			
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS- IAN #	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q10 YES	55 27%	1023 30%	9 21%~	12 21%	12 25%~	22 38%*	40 29%	~	~	~	~	~	4 50%~	9 19%~	45 30%	51 27%~	3 38%~	26 18%*	29 48%
Q10 NO	150 73%	2434 70%	33 79%~	45 79%	36 75%~	36 62%*	99 71%	~	~	~	~	~	4 50%~	39 81%~	106 70%	139 73%~	5 63%~	119 82%*	31 52%
NOT ANSWERED	3	83		2	1		1							1	1	2		3	
VALID CASES	205	3457	42	57	48	58	139						8	48	151	190	8	145	60
NUMBER OF RESPONDENTS	208	3540	42	59	49	58	140						8	49	152	192	8	148	60
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP 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	
Q11 #YES	50 96%	937 94%	8 89%	12 100%	10 91%	20 100%	38 97%	~	~	~	~	~	4 100%	7 88%	43 98%	48 96%	2 100%	24 96%	26 96%
NO	2 4%	63 6%	1 11%	~	1 9%	~	1 3%	~	~	~	~	~	~	1 13%	1 2%	2 4%	~	1 4%	1 4%
NOT ANSWERED	3	23			1	2	1							1	1	1	1	1	2
VALID CASES	52	1000	9	12	11	20	39						4	8	44	50	2	25	27
NUMBER OF RESPONDENTS	55	1023	9	12	12	22	40						4	9	45	51	3	26	29
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	AHP 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	
Q12 #YES	40 78%	709 71%	7 78%~	9 75%~	8 73%~	16 84%~	31 82%~	~	~	~	~	~	2 50%~	6 75%~	34 79%~	38 78%~	2 100%~	18 75%~	22 81%
NO	11 22%	290 29%	2 22%~	3 25%~	3 27%~	3 16%~	7 18%~	~	~	~	~	~	2 50%~	2 25%~	9 21%~	11 22%~	~	6 25%~	5 19%
NOT ANSWERED	4	24			1	3	2							1	2	2	1	2	2
VALID CASES	51	999	9	12	11	19	38						4	8	43	49	2	24	27
NUMBER OF RESPONDENTS	55	1023	9	12	12	22	40						4	9	45	51	3	26	29
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

Q13 WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, DID A DOCTOR OR OTHER HEALTH PROVIDER ASK YOU WHAT YOU THOUGHT WAS BEST FOR YOUR CHILD?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS- IAN #	NATV ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q13 #YES	40 78%	780 79%	6 67%	9 75%	9 82%	16 84%	29 76%	~	~	~	~	~	4 ~100%	7 88%	33 77%	38 78%	2 100%	20 80%	20 77%
NO	11 22%	209 21%	3 33%	3 25%	2 18%	3 16%	9 24%	~	~	~	~	~	~	1 13%	10 23%	11 22%	~	5 20%	6 23%
NOT ANSWERED	4	34			1	3	2							1	2	2	1	1	3
VALID CASES	51	989	9	12	11	19	38						4	8	43	49	2	25	26
NUMBER OF RESPONDENTS	55	1023	9	12	12	22	40						4	9	45	51	3	26	29
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-##	AS-IAN #	NATV ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q14 WORST HEALTH CARE POSSIBLE		12 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
01		10 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
02	1 0.5%	13 0.4%	~	~	~	2%	1 0.7%	~	~	~	~	~	~	~	~	1 0.5%	~	1 0.7%	~
03		13 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
04	1 0.5%	22 0.6%	~	~	~	2%	1 0.7%	~	~	~	~	~	~	~	1 0.7%	1 0.5%	~	~	1 2%
05	2 1%	111 3%	~	~	1 2%	1 2%	2 1%	~	~	~	~	~	~	~	2 1%	2 1%	~	1 0.7%	1 2%
06	7 3%	105 3%	3 7%	1 2%	1 2%	2 3%	6 4%	~	~	~	~	~	~	1 2%	6 4%	5 3%	1 13%	6 4%	1 2%
07	24 12%	269 8%	2 5%	3 5%*	4 9%	15 26%*	14 10%	~	~	~	~	~	2 25%	6 13%	18 12%	22 12%	2 25%	14 10%	10 17%
08	43 21%	725 21%	6 14%	13 23%	13 28%	11 19%	31 22%	~	~	~	~	~	2 25%	8 17%	34 23%	39 21%	3 38%	25 17%	18 30%
09	40 20%	742 21%	9 21%	9 16%	12 26%	10 17%	28 20%	~	~	~	~	~	1 13%	8 17%	30 20%	37 19%	1 13%	27 19%	13 22%
BEST HEALTH CARE POSSIBLE	86 42%	1438 42%	22 52%	31 54%*	16 34%	17 29%*	56 40%	~	~	~	~	~	3 38%	25 52%	60 40%	83 44%	1 13%	70 49%*	16 27%
#8-10 (NET)	169 83%	2905 84%	37 88%	53 93%*	41 87%	38 66%*	115 83%	~	~	~	~	~	6 75%	41 85%	124 82%	159 84%	5 63%	122 85%	47 78%

Continued

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	AHP 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)	126 62%	2180 63%	31 74%~	40 70%	28 60%~	27 47%*	84 60%	~	~	~	~	~	4 50%~	33 69%~	90 60%	120 63%~	2 25%~	97 67%*	29 48%
NOT ANSWERED	4	80		2	2		1							1	1	2		4	
VALID CASES	204	3460	42	57	47	58	139						8	48	151	190	8	144	60
NUMBER OF RESPONDENTS	208 100%	3540 100%	42 100%	59 100%	49 100%	58 100%	140 100%						8 100%	49 100%	152 100%	192 100%	8 100%	148 100%	60 100%
MEAN	8.77	8.70	9.07	9.16	8.74	8.21	8.71						8.63	9.04	8.73	8.82	7.88	8.92	8.43
p stat_(*=Sig @ p<=.05)		.408		~.005*		~.001*	.258	~	~	~	~	~	~	~.448		~		~.021*	

[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		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN #	NATV HAW/ILND NATV ##	AMER ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
Q15 NEVER	2 1%	57 2%	~	~	~	4%	2 1%	~	~	~	~	~	~	2 1%	2 1%	~	2 3%	
SOMETIMES	14 7%	311 9%	3 7%	3 5%	4 9%	4 7%	7 5%	~	~	~	~	1 13%	5 11%	8 5%	14 7%	~	6 4%	8 14%
USUALLY	58 29%	1019 29%	7 17%	14 25%	15 32%	22 39%	38 27%	~	~	~	~	2 25%	14 30%	42 28%	50 26%	5 71%	38 26%	20 34%
ALWAYS	129 64%	2073 60%	32 76%	40 70%	28 60%	29 51%*	92 66%	~	~	~	~	5 63%	28 60%	99 66%	124 65%	2 29%	100 69%*	29 49%
#ALWAYS + USUALLY (NET)	187 92%	3092 89%	39 93%	54 95%	43 91%	51 89%	130 94%	~	~	~	~	7 88%	42 89%	141 93%	174 92%	7 100%	138 96%*	49 83%
TOP BOX SCORE	129 64%	2073 60%	32 76%	40 70%	28 60%	29 51%*	92 66%	~	~	~	~	5 63%	28 60%	99 66%	124 65%	2 29%	100 69%*	29 49%
NOT ANSWERED	5	80		2	2	1	1						2	1	2	1	4	1
VALID CASES	203	3460	42	57	47	57	139					8	47	151	190	7	144	59
NUMBER OF RESPONDENTS	208	3540	42	59	49	58	140					8	49	152	192	8	148	60
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN #	NATV HAW/ PAC ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q16 YES	212 73%	3801 75%	11 22%*	71 90%*	67 88%*	63 75%	135 73%	~	~	~	~	~	14 ~ 82%~	44 68%	159 75%	197 74%~	4 40%~	156 71%	56 81%
NO	77 27%	1296 25%	39 78%*	8 10%*	9 12%*	21 25%	51 27%	~	~	~	~	~	3 ~ 18%~	21 32%	54 25%	70 26%~	6 60%~	64 29%	13 19%
NOT ANSWERED	21	212	6	6	6	3	4							3	4	6		21	
VALID CASES	289	5097	50	79	76	84	186						17	65	213	267	10	220	69
NUMBER OF RESPONDENTS	310 100%	5309 100%	56 100%	85 100%	82 100%	87 100%	190 100%						17 100%	68 100%	217 100%	273 100%	10 100%	241 100%	69 100%

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		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS- IAN #	NATV ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q17 YES	19 10%	409 11%		7 ~ 10%	8 13%	4 7%	12 9%	~	~	~	~	~	1 8%	5 13%	13 9%	17 9%~	1 33%~	8 6%*	11 20%
NO	181 91%	3206 89%	11 100%~	60 90%	54 87%	56 93%	116 91%	~	~	~	~	~	12 92%~	35 88%~	138 91%~	169 91%~	2 67%~	137 94%*	44 80%
NOT ANSWERED	12	186		4	5	3	7						1	4	8	11	1	11	1
VALID CASES	200	3615	11	67	62	60	128						13	40	151	186	3	145	55
NUMBER OF RESPONDENTS	212	3801	11	71	67	63	135						14	44	159	197	4	156	56
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q16 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	AHP 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	
Q18 #YES	17 89%	369 92%	6 ~ 86%	7 ~ 88%	4 ~ 100%	11 ~ 92%							1 ~ 100%	4 80%	12 92%	15 88%	1 100%	8 ~ 82%	9
NO	2 11%	30 8%	1 ~ 14%	1 ~ 13%		1 8%								1 20%	1 8%	2 12%			2 ~ 18%
NOT ANSWERED		10																	
VALID CASES	19	399	7	8	4	12							1	5	13	17	1	8	11
NUMBER OF RESPONDENTS	19	409	7	8	4	12							1	5	13	17	1	8	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			
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS- IAN #	NATV ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q19 YES	12 4%	214 4%	3 6%	1 1%*	4 5%	4 5%	9 5%	~	~	~	~	~	1 6%	2 3%	10 5%	10 4%~	2 20%~	5 2%*	7 10%
NO	282 96%	4864 96%	49 94%	79 99%*	73 95%	81 95%	181 95%	~	~	~	~	~	16 94%~	65 97%	207 95%	263 96%~	8 80%~	220 98%*	62 90%
NOT ANSWERED	16	231	4	5	5	2								1				16	
VALID CASES	294	5078	52	80	77	85	190						17	67	217	273	10	225	69
NUMBER OF RESPONDENTS	310	5309	56	85	82	87	190						17	68	217	273	10	241	69
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN #	NATV ILND NATV ##	AMER ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q20 NEVER		21 10%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	1 8%	30 14%	1 33%	~	~	~	1 11%	~	~	~	~	~	~	~	1 10%	1 10%	~	~	1 14%
USUALLY	2 17%	46 22%	~	~	2 50%	~	1 11%	~	~	~	~	~	~	1 50%	1 10%	1 10%	1 50%	~	2 29%
ALWAYS	9 75%	113 54%	2 67%	1 100%	2 50%	4 100%	7 78%	~	~	~	~	~	1 100%	1 50%	8 80%	8 80%	1 50%	5 100%	4 57%
#ALWAYS + USUALLY (NET)	11 92%	159 76%	2 67%	1 100%	4 100%	4 100%	8 89%	~	~	~	~	~	1 100%	2 100%	9 90%	9 90%	2 100%	5 100%	6 86%
TOP BOX SCORE	9 75%	113 54%	2 67%	1 100%	2 50%	4 100%	7 78%	~	~	~	~	~	1 100%	1 50%	8 80%	8 80%	1 50%	5 100%	4 57%
NOT ANSWERED		4																	
VALID CASES	12	210	3	1	4	4	9						1	2	10	10	2	5	7
NUMBER OF RESPONDENTS	12	214	3	1	4	4	9						1	2	10	10	2	5	7
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q19 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER		
	AHP 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
Q21 #YES	9 82%	170 83%	2 67%	1 100%	3 75%	3 100%	6 75%	~	~	~	~	~	1 100%	2 100%	7 78%	9 100%	4 100%	5 71%
NO	2 18%	36 17%	1 33%	~	1 25%	~	2 25%	~	~	~	~	~	~	2 22%	~	2 100%	~	2 29%
NOT ANSWERED	1	8				1	1							1	1	1		
VALID CASES	11	206	3	1	4	3	8					1	2	9	9	2	4	7
NUMBER OF RESPONDENTS	12	214	3	1	4	4	9					1	2	10	10	2	5	7
	100%	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		
	AHP 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	
Q22 YES	19 6%	522 10%*	4 8%	6 8%	4 5%	5 6%	11 6%	~	~	~	~	~	2 ~12%	5 7%	13 6%	17 6%~	1 10%~	6 3%*	13 19%
NO	274 94%	4555 90%*	48 92%	74 93%	73 95%	79 94%	177 94%	~	~	~	~	~	15 ~88%	63 93%	202 94%	254 94%~	9 90%~	218 97%*	56 81%
NOT ANSWERED	17	232	4	5	5	3	2								2	2		17	
VALID CASES	293	5077	52	80	77	84	188						17	68	215	271	10	224	69
NUMBER OF RESPONDENTS	310	5309	56	85	82	87	190						17	68	217	273	10	241	69
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN #	NATV HAW/ILND ##	AMER IND/PAC ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR POOR	GOOD & FAIR	NO CCC	CCC	
Q23 NEVER	4 21%	63 13%	~	~	50%	40%	18%	~	~	~	~	~	~	~	2 40%	2 15%	4 24%	2 33%	2 15%
SOMETIMES	5 26%	78 16%	~	33%	50%	20%	18%	~	~	~	~	1 50%	1 20%	3 23%	4 24%	~	2 33%	3 23%	
USUALLY	4 21%	122 24%	2 50%	2 33%	~	~	3 27%	~	~	~	~	~	1 20%	3 23%	3 18%	1 100%	~	4 31%	
ALWAYS	6 32%	236 47%	2 50%	2 33%	~	40%	4 36%	~	~	~	~	1 50%	1 20%	5 38%	6 35%	~	2 33%	4 31%	
#ALWAYS + USUALLY (NET)	10 53%	358 72%	4 100%	4 67%	~	40%	7 64%	~	~	~	~	1 50%	2 40%	8 62%	9 53%	1 100%	2 33%	8 62%	
TOP BOX SCORE	6 32%	236 47%	2 50%	2 33%	~	40%	4 36%	~	~	~	~	1 50%	1 20%	5 38%	6 35%	~	2 33%	4 31%	
NOT ANSWERED		23																	
VALID CASES	19	499	4	6	4	5	11					2	5	13	17	1	6	13	
NUMBER OF RESPONDENTS	19	522	4	6	4	5	11					2	5	13	17	1	6	13	
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q22 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE ##	BLCK OR AFR- AMER IAN #	AS- PAC ILLND NATV #	NATV HAW/ IND/ ALS K #	AMER IND/ #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q24 #YES	13 72%	347 69%	4 100%	5 83%	1 33%	3 60%	7 70%	~	~	~	~	~	2 ~100%	4 80%	9 75%	12 75%	1 100%	3 50%	10 83%
NO	5 28%	153 31%	~	1 17%	2 67%	2 40%	3 30%	~	~	~	~	~	~	1 20%	3 25%	4 25%	~	3 50%	2 17%
NOT ANSWERED	1	22			1		1								1	1			1
VALID CASES	18	500	4	6	3	5	10						2	5	12	16	1	6	12
NUMBER OF RESPONDENTS	19	522	4	6	4	5	11						2	5	13	17	1	6	13
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q22 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS- IAN #	NATV ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC
Q25 YES	39 13%	769 15%	2 4%*	12 15%	11 14%	14 17%	26 14%	~	~	~	~	~	3 18%~	7 10%	30 14%	34 13%~	3 33%~	11 5%*	28 41%
NO	254 87%	4303 85%	50 96%*	69 85%	65 86%	70 83%	161 86%	~	~	~	~	~	14 82%~	61 90%	184 86%	237 87%~	6 67%~	214 95%*	40 59%
NOT ANSWERED	17	237	4	4	6	3	3								3	2	1	16	1
VALID CASES	293	5072	52	81	76	84	187						17	68	214	271	9	225	68
NUMBER OF RESPONDENTS	310	5309	56	85	82	87	190						17	68	217	273	10	241	69
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT	BANT	AGE				RACE					ETHNIC-	HEALTH		CCC			
	OT1	OT2	<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 IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q26	AHP	OHP																
NEVER	3 8%	94 13%	~	~	20%	7%	~	~	~	~	~	~	3 43%	2 6%	1 33%	1 11%	2 7%	
SOMETIMES	8 22%	122 16%	1 50%	4 40%	3 21%	5 20%	~	~	~	~	1 33%	1 14%	7 24%	8 24%	~	2 22%	6 21%	
USUALLY	11 30%	178 24%	5 45%	1 10%	5 36%	8 32%	~	~	~	~	1 33%	2 29%	9 31%	9 27%	2 67%	2 22%	9 32%	
ALWAYS	15 41%	353 47%	1 50%	6 55%	3 30%	5 36%	12 48%	~	~	~	~	1 33%	1 14%	13 45%	14 42%	~	4 44%	11 39%
#ALWAYS + USUALLY (NET)	26 70%	531 71%	1 50%	11 100%	4 40%	10 71%	20 80%	~	~	~	~	2 67%	3 43%	22 76%	23 70%	2 67%	6 67%	20 71%
TOP BOX SCORE	15 41%	353 47%	1 50%	6 55%	3 30%	5 36%	12 48%	~	~	~	~	1 33%	1 14%	13 45%	14 42%	~	4 44%	11 39%
NOT ANSWERED	2	22	1	1		1							1	1		2		
VALID CASES	37	747	2	11	10	14	25				3	7	29	33	3	9	28	
NUMBER OF RESPONDENTS	39	769	2	12	11	14	26				3	7	30	34	3	11	28	
	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q25 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER				
	AHP 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	26 68%	428 57%	1 50%	9 82%	6 55%	10 71%	19 73%	~	~	~	~	~	1 33%	5 71%	21 70%	24 71%	2 67%	7 70%	19 68%	
NO	12 32%	317 43%	1 50%	2 18%	5 45%	4 29%	7 27%	~	~	~	~	~	2 67%	2 29%	9 30%	10 29%	1 33%	3 30%	9 32%	
NOT ANSWERED	1	24	1																	
VALID CASES	38	745	2	11	11	14	26							3	7	30	34	3	10	28
NUMBER OF RESPONDENTS	39	769	2	12	11	14	26							3	7	30	34	3	11	28
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS- IAN #	NATV ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
Q28 YES	65 22%	1124 22%	9 17%	21 26%	13 17%	22 26%	43 23%	~	~	~	~	~	5 29%	14 21%	50 23%	60 22%	5 50%	~	32 14%*	33 48%
NO	230 78%	3915 78%	43 83%	59 74%	64 83%	64 74%	147 77%	~	~	~	~	~	12 71%	54 79%	167 77%	213 78%	5 50%	~	194 86%*	36 52%
NOT ANSWERED	15	270	4	5	5	1														15
VALID CASES	295	5039	52	80	77	86	190						17	68	217	273	10		226	69
NUMBER OF RESPONDENTS	310	5309	56	85	82	87	190						17	68	217	273	10		241	69
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%		100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP 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	
Q29 #YES	44 69%	673 62%	8 89%~	11 52%~	11 85%~	14 67%~	31 74%~	~	~	~	~	~	3 60%~	9 64%~	35 71%~	40 68%~	4 80%~	21 68%~	23 70%~
NO	20 31%	416 38%	1 11%~	10 48%~	2 15%~	7 33%~	11 26%~	~	~	~	~	~	2 40%~	5 36%~	14 29%~	19 32%~	1 20%~	10 32%~	10 30%~
NOT ANSWERED	1	35				1	1							1	1	1			
VALID CASES	64	1089	9	21	13	21	42						5	14	49	59	5	31	33
NUMBER OF RESPONDENTS	65	1124	9	21	13	22	43						5	14	50	60	5	32	33
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN #	NATV ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q30 YES	267 92%	4437 89%	51 98%*	71 91%	69 92%	76 88%	177 94%	~	~	~	~	~	16 94%~	58 87%	201 93%	250 93%~	8 80%~	202 91%	65 94%
NO	24 8%	550 11%	1 2%*	7 9%	6 8%	10 12%	12 6%	~	~	~	~	~	1 6%~	9 13%	14 7%	20 7%~	2 20%~	20 9%	4 6%
NOT ANSWERED	19	322	4	7	7	1	1							1	2	3		19	
VALID CASES	291	4987	52	78	75	86	189						17	67	215	270	10	222	69
NUMBER OF RESPONDENTS	310	5309	56	85	82	87	190						17	68	217	273	10	241	69
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP 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 ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q31 NONE	75 29%	1154 27%	10 20%	20 29%	23 35%	22 29%	47 27%	~	~	~	~	~	9 56%	15 27%	59 30%	72 30%	1 13%	62 32%*	13 20%
1 TIME	85 33%	1496 35%	15 29%	28 41%	16 25%	26 35%	61 35%	~	~	~	~	~	2 13%	16 29%	66 34%	81 33%	1 13%	64 33%	21 32%
2	59 23%	893 21%	14 27%	11 16%	14 22%	20 27%	37 21%	~	~	~	~	~	3 19%	14 25%	42 21%	53 22%	3 38%	43 22%	16 25%
3	21 8%	389 9%	7 14%	7 10%	6 9%	1 1%*	14 8%	~	~	~	~	~	2 13%	5 9%	16 8%	20 8%	1 13%	13 7%	8 12%
4	11 4%	157 4%	4 8%	1 1%	3 5%	3 4%	9 5%	~	~	~	~	~	~	2 4%	9 5%	9 4%	2 25%	6 3%	5 8%
5 TO 9	7 3%	138 3%	1 2%	2 3%	1 2%	3 4%	4 2%	~	~	~	~	~	~	3 5%	4 2%	7 3%	~	5 3%	2 3%
10 OR MORE TIMES	2 0.8%	34 0.8%	~	~	2 3%	~	1 0.6%	~	~	~	~	~	~	~	1 0.5%	1 0.4%	~	2 1%	~
NOT ANSWERED	7	176		2	4	1	4							3	4	7		7	
VALID CASES	260	4261	51	69	65	75	173						16	55	197	243	8	195	65
NUMBER OF RESPONDENTS	267	4437	51	71	69	76	177						16	58	201	250	8	202	65
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	AHP 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	
Q31A ALWAYS	2 1%	65 2%	~	1 2%	~	1 2%	0.8%	~	~	~	~	~	~	2 1%	2 1%	~	~	2 2%	
USUALLY	2 1%	49 2%	~	~	~	4%	~	~	~	~	~	~	2 5%	~	1 0.6%	~	~	2 2%	
SOMETIMES	12 7%	202 7%	3 8%	3 6%	2 5%	4 8%	~	~	~	~	~	~	10 26%	~	9 5%	1 14%	~	11 8%*	1 2%
NEVER	167 91%	2765 90%	37 93%	45 92%	40 95%	45 87%	124 99%*	~	~	~	~	~	7 ~100%	27 69%	135 99%	157 93%	6 86%	117 89%*	50 98%
#NEVER + SOMETIMES (NET)	179 98%	2967 96%	40 100%	48 98%	42 100%	49 94%	124 99%	~	~	~	~	~	7 ~100%	37 95%	135 99%	166 98%	7 100%	128 97%*	51 100%
TOP BOX SCORE	167 91%	2765 90%	37 93%	45 92%	40 95%	45 87%	124 99%*	~	~	~	~	~	7 ~100%	27 69%	135 99%	157 93%	6 86%	117 89%*	50 98%
NOT ANSWERED	2	26	1			1	1						1	1	2			1	1
VALID CASES	183	3081	40	49	42	52	125						7	39	137	169	7	132	51
NUMBER OF RESPONDENTS	185 100%	3107 100%	41 100%	49 100%	42 100%	53 100%	126 100%						7 100%	40 100%	138 100%	171 100%	7 100%	133 100%	52 100%

[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				
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN #	NATV ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q32 NEVER		64 2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	4 2%	100 3%	1 2%	~	2 5%	1 2%	3 2%	~	~	~	~	~	~	1 3%	3 2%	3 2%	1 14%	2 2%	2 4%	
USUALLY	24 13%	428 14%	4 10%	6 12%	5 12%	9 17%	11 9%*	~	~	~	~	~	3 43%	8 20%	13 9%	20 12%	1 14%	16 12%	8 15%	
ALWAYS	156 85%	2486 81%	36 88%	43 88%	35 83%	42 81%	111 89%*	~	~	~	~	~	4 57%	31 78%	121 88%	147 86%	5 71%	114 86%	42 81%	
#ALWAYS + USUALLY (NET)	180 98%	2914 95%*	40 98%	49 100%	40 95%	51 98%	122 98%	~	~	~	~	~	7 100%	39 98%	134 98%	167 98%	6 86%	130 98%	50 96%	
TOP BOX SCORE	156 85%	2486 81%	36 88%	43 88%	35 83%	42 81%	111 89%*	~	~	~	~	~	4 57%	31 78%	121 88%	147 86%	5 71%	114 86%	42 81%	
NOT ANSWERED		1 29				1	1								1	1		1		
VALID CASES	184	3078	41	49	42	52	125						7	40	137	170	7	132	52	
NUMBER OF RESPONDENTS	185	3107	41	49	42	53	126						7	40	138	171	7	133	52	
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%	

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP 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	VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q33 NEVER	1 0.5%	29 0.9%	~	~	2%~	1	1 0.8%	~	~	~	~	~	~	1 ~0.7%	1 ~0.6%	~	~	1 2%
SOMETIMES	5 3%	120 4%	~	2%~	~	4	5 4%*	~	~	~	~	~	~	4 ~3%	4 2%	1 14%	3 2%	2 4%
USUALLY	30 16%	422 14%	5 12%~	7 14%~	5 12%~	13 25%	20 16%	~	~	~	~	1 ~14%	8 21%~	21 15%~	27 16%~	1 14%~	17 13%	13 25%
ALWAYS	148 80%	2505 81%	36 88%~	41 84%~	36 86%~	35 67%*	100 79%	~	~	~	~	6 ~86%	31 79%~	112 81%~	138 81%~	5 71%~	112 85%*	36 69%
#ALWAYS + USUALLY (NET)	178 97%	2927 95%	41 100%~	48 98%~	41 98%~	48 92%	120 95%*	~	~	~	~	7 ~100%	39 100%~	133 96%~	165 97%~	6 86%~	129 98%	49 94%
TOP BOX SCORE	148 80%	2505 81%	36 88%~	41 84%~	36 86%~	35 67%*	100 79%	~	~	~	~	6 ~86%	31 79%~	112 81%~	138 81%~	5 71%~	112 85%*	36 69%
NOT ANSWERED	1	31				1							1		1		1	
VALID CASES	184	3076	41	49	42	52	126					7	39	138	170	7	132	52
NUMBER OF RESPONDENTS	185	3107	41	49	42	53	126					7	40	138	171	7	133	52
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN #	NATV HAW/ILND ##	AMER IND/PAC/ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
Q34 NEVER	1 0.5%	30 1%	~	2%~	~	~	~	~	~	~	~	~	1 3%~	1 ~0.6%~	1 ~0.8%~			
SOMETIMES	5 3%	85 3%	~	2%~	5%~	4%~	4 3%	~	~	~	~	~	1 3%~	3 2%~	5 3%~	3 2%	2 4%	
USUALLY	20 11%	368 12%	12%~	4%~	10%~	17%~	13 10%	~	~	~	~	1 ~14%~	6 15%~	14 10%~	16 9%~	3 43%~	11 8%	9 17%
ALWAYS	158 86%	2589 84%	88%~	92%~	86%~	79%~	108 86%	~	~	~	~	6 ~86%~	32 80%~	120 88%~	148 87%~	4 57%~	117 89%	41 79%
#ALWAYS + USUALLY (NET)	178 97%	2957 96%	100%~	96%~	95%~	96%~	121 97%	~	~	~	~	7 ~100%~	38 95%~	134 98%~	164 96%~	7 100%~	128 97%	50 96%
TOP BOX SCORE	158 86%	2589 84%	88%~	92%~	86%~	79%~	108 86%	~	~	~	~	6 ~86%~	32 80%~	120 88%~	148 87%~	4 57%~	117 89%	41 79%
NOT ANSWERED	1	35				1	1							1	1		1	
VALID CASES	184	3072	41	49	42	52	125					7	40	137	170	7	132	52
NUMBER OF RESPONDENTS	185	3107	41	49	42	53	126					7	40	138	171	7	133	52
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q35 YES	126 69%	2086 68%	6 15%	31 66%	39 93%	50 94%	83 66%	~	~	~	~	~	5 71%	29 73%	91 66%	115 68%	5 71%	87 66%	39 75%	
NO	57 31%	964 32%	35 85%	16 34%	3 7%	3 6%	42 34%	~	~	~	~	2 29%	11 28%	46 34%	55 32%	2 29%	44 34%	13 25%		
NOT ANSWERED	2	57	2				1							1	1	2				
VALID CASES	183	3050	41	47	42	53	125							7	40	137	170	7	131	52
NUMBER OF RESPONDENTS	185	3107	41	49	42	53	126							7	40	138	171	7	133	52
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%	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			
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN #	NATV HAW/ILND ##	AMER IND/PAC ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q36 NEVER		25 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
SOMETIMES	8 6%	112 5%	~ 10%	3 3%	1 8%	4 7%	6 7%	~	~	~	~	~	1 3%	6 7%	7 6%	1 20%	3 3%	5 13%	
USUALLY	26 21%	405 20%	2 33%	8 27%	6 15%	10 20%	19 23%	~	~	~	~	~	2 40%	3 10%	21 24%	22 19%	1 20%	18 21%	8 21%
ALWAYS	90 73%	1518 74%	4 67%	19 63%	32 82%	35 71%	57 70%	~	~	~	~	~	2 40%	25 86%	62 70%	84 74%	3 60%	65 76%	25 66%
#ALWAYS + USUALLY (NET)	116 94%	1923 93%	6 100%	27 90%	38 97%	45 92%	76 93%	~	~	~	~	~	4 80%	28 97%	83 93%	106 94%	4 80%	83 97%	33 87%
TOP BOX SCORE	90 73%	1518 74%	4 67%	19 63%	32 82%	35 71%	57 70%	~	~	~	~	~	2 40%	25 86%	62 70%	84 74%	3 60%	65 76%	25 66%
NOT ANSWERED		2		1		1	1							2	2		1	1	
VALID CASES	124	2060	6	30	39	49	82						5	29	89	113	5	86	38
NUMBER OF RESPONDENTS	126 100%	2086 100%	6 100%	31 100%	39 100%	50 100%	83 100%						5 100%	29 100%	91 100%	115 100%	5 100%	87 100%	39 100%

[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	
	AHP 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 & FAIR POOR	NO CCC	CCC	
Q37 NEVER	4 2%	72 2%	~	4%~	2%~	1%~	1 0.8%	~	~	~	~	~	2 5%~	2 1%~	4 2%~	~	3 2%	1 2%
SOMETIMES	10 5%	238 8%	12%~	4%~	~	3%~	6 5%	~	~	~	~	2 29%~	1 3%~	8 6%~	10 6%~	~	9 7%	1 2%
USUALLY	42 23%	692 23%	20%~	25%~	19%~	27%~	29 23%	~	~	~	~	2 29%~	9 24%~	32 23%~	38 22%~	43 43%~	19 19%	17 33%
ALWAYS	126 69%	2035 67%	68%~	67%~	79%~	65%~	90 71%	~	~	~	~	3 43%~	26 68%~	96 70%~	118 69%~	4 57%~	93 72%	33 63%
#ALWAYS + USUALLY (NET)	168 92%	2727 90%	88%~	92%~	98%~	92%~	119 94%	~	~	~	~	5 71%~	35 92%~	128 93%~	156 92%~	7 100%~	118 91%	50 96%
TOP BOX SCORE	126 69%	2035 67%	68%~	67%~	79%~	65%~	90 71%	~	~	~	~	3 43%~	26 68%~	96 70%~	118 69%~	4 57%~	93 72%	33 63%
NOT ANSWERED	3	70	1	2									2		1	3		
VALID CASES	182	3037	41	48	42	51	126					7	38	138	170	7	130	52
NUMBER OF RESPONDENTS	185	3107	41	49	42	53	126					7	40	138	171	7	133	52
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS-IAN #	NATV ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q38 #YES	155 84%	2662 87%	36 88%~	42 88%~	38 90%~	39 74%*	109 87%	~	~	~	~	~	5 71%~	32 80%~	118 86%~	145 85%~	6 86%~	110 83%	45 87%	
NO	29 16%	384 13%	5 12%~	6 13%~	4 10%~	14 26%*	17 13%	~	~	~	~	~	2 29%~	8 20%~	20 14%~	26 15%~	1 14%~	22 17%	7 13%	
NOT ANSWERED	1	61	1																	1
VALID CASES	184	3046	41	48	42	53	126							7	40	138	171	7	132	52
NUMBER OF RESPONDENTS	185	3107	41	49	42	53	126							7	40	138	171	7	133	52
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS- IAN #	NATV ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q39 YES	65 36%	1240 41%	14 34%~	17 35%~	15 36%~	19 37%	45 36%	~	~	~	~	~	4 57%~	14 35%~	50 36%~	60 35%~	5 71%~	34 26%*	31 60%
NO	117 64%	1789 59%	27 66%~	31 65%~	27 64%~	32 63%	80 64%	~	~	~	~	~	3 43%~	26 65%~	87 64%~	110 65%~	2 29%~	96 74%*	21 40%
NOT ANSWERED	3	78	1			2	1								1	1		3	
VALID CASES	182	3029	41	48	42	51	125						7	40	137	170	7	130	52
NUMBER OF RESPONDENTS	185	3107	41	49	42	53	126						7	40	138	171	7	133	52
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN #	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q40 NEVER	8 12%	81 7%	2 14%~	2 12%~		4 21%~	7 16%~	~	~	~	~	~	1 7%~	6 12%~	7 12%~	1 20%~	3 9%~	5 16%~	
SOMETIMES	4 6%	139 12%	2 14%~		2 13%~		1 2%~	~	~	~	~	~	2 14%~	2 4%~	4 7%~		2 6%~	2 6%~	
USUALLY	19 29%	342 28%	3 21%~	5 29%~	5 33%~	6 32%~	16 36%~	~	~	~	~	~	3 21%~	16 32%~	17 28%~	2 40%~	8 24%~	11 35%~	
ALWAYS	34 52%	645 53%	7 50%~	10 59%~	8 53%~	9 47%~	21 47%~	~	~	~	~	~	4 100%~	8 57%~	26 52%~	32 53%~	2 40%~	21 62%~	13 42%~
#ALWAYS + USUALLY (NET)	53 82%	987 82%	10 71%~	15 88%~	13 87%~	15 79%~	37 82%~	~	~	~	~	~	4 100%~	11 79%~	42 84%~	49 82%~	4 80%~	29 85%~	24 77%~
TOP BOX SCORE	34 52%	645 53%	7 50%~	10 59%~	8 53%~	9 47%~	21 47%~	~	~	~	~	~	4 100%~	8 57%~	26 52%~	32 53%~	2 40%~	21 62%~	13 42%~
NOT ANSWERED		33																	
VALID CASES	65	1207	14	17	15	19	45						4	14	50	60	5	34	31
NUMBER OF RESPONDENTS	65 100%	1240 100%	14 100%	17 100%	15 100%	19 100%	45 100%						4 100%	14 100%	50 100%	60 100%	5 100%	34 100%	31 100%

[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			
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	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	
Q41 WORST PERSONAL DOCTOR POSSIBLE		6 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
01		4 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
02		12 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
03	2 0.8%	23 0.5%	~	~	2%	1%	0.6%	~	~	~	~	~	1% 6%	~	1% ~0.5%	2 0.8%	~	2 1%	
04		19 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
05	7 3%	105 2%	~	1%	2%	7%	3%	~	~	~	~	~	~	1% 2%	6% 3%	7 3%	~	2 1%*	5 8%
06	6 2%	97 2%	4%	~	2%	4%	2%	~	~	~	~	~	~	2% 4%	4% 2%	5 2%	1 14%	3 2%	3 5%
07	24 9%	261 6%	4%	4%	11%	16%*	10%	~	~	~	~	~	~	5% 9%	19% 10%	22 9%	2 29%	17 9%	7 11%
08	46 18%	672 16%	12%	22%	18%	18%	16%	~	~	~	~	~	6% 38%	11% 20%	34% 17%	44 18%	~	37 19%	9 14%
09	49 19%	839 20%	12%	22%	18%	22%	22%	~	~	~	~	~	3% 19%	5% 9%*	43% 22%*	48 20%	~	38 20%	11 17%
BEST PERSONAL DOCTOR POSSIBLE	124 48%	2208 52%	35 69%*	34 50%	31 48%	24 32%*	80 46%	~	~	~	~	~	6% 38%	31% 56%	90% 46%	116 48%	4 57%	95 49%	29 45%
#8-10 (NET)	219 85%	3719 88%	47 92%*	64 94%*	55 85%	53 72%*	145 84%	~	~	~	~	~	15% 94%	47 85%	167 85%	208 85%	4 57%	170 88%	49 77%

Continued

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN #	NATV ILND ##	AMER IND/ PAC ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	HIS- PAN- IC	NOT VERY GOOD & FAIR & POOR	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
9-10 (NET)	173 67%	3047 72%	41 80%*	49 72%	43 66%	40 54%*	118 68%	~	~	~	~	9 56%~	36 65%	133 68%	164 67%~	4 57%~	133 69%	40 63%
NOT ANSWERED	9	191		3	4	2	4						3	4	6	1	8	1
VALID CASES	258	4246	51	68	65	74	173					16	55	197	244	7	194	64
NUMBER OF RESPONDENTS	267 100%	4437 100%	51 100%	71 100%	69 100%	76 100%	177 100%					16 100%	58 100%	201 100%	250 100%	8 100%	202 100%	65 100%
MEAN	8.89	8.98	9.37	9.13	8.88	8.35	8.87					8.63	9.00	8.88	8.89	8.57	8.97	8.64
p stat_(*=Sig @ p<=.05)		.336	.001*	.054	.924	.001*	.688	~	~	~	~	~	.504	.795	~	~	.138	

[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		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN #	NATV HAW/ PAC ILLND #	AMER IND/ ALSK #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q42 YES	66 25%	1096 26%	8 16%*	14 21%	17 26%	27 36%*	47 27%	~	~	~	~	~	6 ~ 38%~	9 16%*	53 27%	55 23%~	7 88%~	17 9%*	49 75%
NO	193 75%	3160 74%	43 84%*	54 79%	48 74%	48 64%*	126 73%	~	~	~	~	~	10 ~ 63%~	47 84%*	144 73%	189 77%~	1 13%~	177 91%*	16 25%
NOT ANSWERED	8	181		3	4	1	4							2	4	6		8	
VALID CASES	259	4256	51	68	65	75	173						16	56	197	244	8	194	65
NUMBER OF RESPONDENTS	267 100%	4437 100%	51 100%	71 100%	69 100%	76 100%	177 100%						16 100%	58 100%	201 100%	250 100%	8 100%	202 100%	65 100%

[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			
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLK OR AFR-##	AS- IAN #	NATV ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q43 #YES	57 88%	955 90%	7 100%	12 86%	15 88%	23 85%	42 91%	~	~	~	~	~	4 67%	7 78%	46 88%	48 87%	5 83%	13 76%	44 92%
NO	8 12%	109 10%	~	2 14%	2 12%	4 15%	4 9%	~	~	~	~	~	2 33%	2 22%	6 12%	7 13%	1 17%	4 24%	4 8%
NOT ANSWERED	1	32	1				1							1		1		1	
VALID CASES	65	1064	7	14	17	27	46						6	9	52	55	6	17	48
NUMBER OF RESPONDENTS	66	1096	8	14	17	27	47						6	9	53	55	7	17	49
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP 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	
Q44 #YES	55 85%	906 85%	7 100%	13 93%	13 76%	22 81%	40 87%	~	~	~	~	~	4 67%	7 78%	44 85%	46 84%	5 83%	15 88%	40 83%
NO	10 15%	155 15%	~	1 7%	4 24%	5 19%	6 13%	~	~	~	~	~	2 33%	2 22%	8 15%	9 16%	1 17%	2 12%	8 17%
NOT ANSWERED	1	35	1				1							1		1			1
VALID CASES	65	1061	7	14	17	27	46						6	9	52	55	6	17	48
NUMBER OF RESPONDENTS	66	1096	8	14	17	27	47						6	9	53	55	7	17	49
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	AHP 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 & FAIR & POOR	GOOD & POOR	NO CCC	CCC	
Q45 YES	53 19%	856 17%	7 14%	11 14%	13 17%	22 27%*	37 20%	~	~	~	~	~	3 18%	12 18%	40 19%	48 18%	4 44%	25 12%*	28 42%
NO	231 81%	4125 83%	42 86%	68 86%	62 83%	59 73%*	149 80%	~	~	~	~	~	14 82%	55 82%	172 81%	221 82%	5 56%	192 88%*	39 58%
NOT ANSWERED	26	328	7	6	7	6	4						1	5	4	1	24	2	
VALID CASES	284	4981	49	79	75	81	186						17	67	212	269	9	217	67
NUMBER OF RESPONDENTS	310 100%	5309 100%	56 100%	85 100%	82 100%	87 100%	190 100%						17 100%	68 100%	217 100%	273 100%	10 100%	241 100%	69 100%

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		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN #	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q46 NEVER	5 10%	59 7%	~	~	17%~	2 3 14%~	5 14%~	~	~	~	~	~	~	5 13%~	5 11%~	~	2 3 9%~ 11%	
SOMETIMES	8 16%	127 15%	29%~	~	8%~	1 5 23%~	6 16%~	~	~	~	~	~	2 20%~	6 15%~	8 17%~	~	2 6 9%~ 21%	
USUALLY	13 25%	239 29%	57%~	30%~	17%~	2 4 18%~	10 27%~	~	~	~	~	1 33%~	2 11 20%~ 28%~	13 28%~	~	7 6 30%~ 21%		
ALWAYS	25 49%	410 49%	14%~	70%~	58%~	7 10 45%~	16 43%~	~	~	~	~	2 67%~	6 18 60%~ 45%~	20 4 43%~100%~	~	12 13 52%~ 46%		
#ALWAYS + USUALLY (NET)	38 75%	649 78%	71%~	100%~	75%~	9 14 64%~	26 70%~	~	~	~	~	3 100%~	8 29 80%~ 73%~	33 4 72%~100%~	~	19 19 83%~ 68%		
TOP BOX SCORE	25 49%	410 49%	14%~	70%~	58%~	7 10 45%~	16 43%~	~	~	~	~	2 67%~	6 18 60%~ 45%~	20 4 43%~100%~	~	12 13 52%~ 46%		
NOT ANSWERED	2	21		1	1								2	2		2		
VALID CASES	51	835	7	10	12	22	37					3	10	40	46	4	23	28
NUMBER OF RESPONDENTS	53 100%	856 100%	7 100%	11 100%	13 100%	22 100%	37 100%					3 100%	12 100%	40 100%	48 100%	4 100%	25 100%	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	
	AHP 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	3 6%	48 6%	~	~	9%~	9%~	3 8%~	~	~	~	~	~	~	3 8%~	3 7%~	~	1 4%~	2 7%
1 SPECIALIST	34 68%	509 61%	5 71%~	8 80%~	8 73%~	13 59%~	23 62%~	~	~	~	~	3 ~100%	7 78%~	26 65%~	31 69%~	2 50%~	16 70%~	18 67%
2	7 14%	170 20%	1 14%~	1 10%~	2 18%~	3 14%~	6 16%~	~	~	~	~	~	1 ~11%~	6 15%~	5 11%~	2 50%~	5 22%~	2 7%
3	4 8%	53 6%	~	10%~	~	3 14%~	3 8%~	~	~	~	~	~	1 ~11%~	3 8%~	4 9%~	~	1 4%~	3 11%
4	1 2%	27 3%	~	~	~	1 5%~	1 3%~	~	~	~	~	~	~	1 3%~	1 2%~	~	~	1 4%
5 OR MORE SPECIALISTS	1 2%	25 3%	1 14%~	~	~	~	1 3%~	~	~	~	~	~	~	1 3%~	1 2%~	~	~	1 4%
NOT ANSWERED	3	24	1	2									3		3		2	1
VALID CASES	50	832	7	10	11	22	37					3	9	40	45	4	23	27
NUMBER OF RESPONDENTS	53	856	7	11	13	22	37					3	12	40	48	4	25	28
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP 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		7 0.9%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
04		5 0.6%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
05		20 3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
06	3 6%	24 3%~	1 14%~	~	~	2 10%~	2 6%~	~	~	~	~	~	1 11%~	2 5%~	3 7%~	~	2 9%~	1 4%
07	3 6%	51 7%~	1 14%~	2 20%~	~	~	3 9%~	~	~	~	~	~	3 8%~	3 7%~	~	2 9%~	1 4%	
08	15 32%	135 17%~	3 43%~	2 20%~	1 10%~	9 45%~	13 38%~	~	~	~	~	1 33%~	1 11%~	14 38%~	14 33%~	1 25%~	7 32%~	8 32%
09	8 17%	171 22%~	1 14%~	2 20%~	3 30%~	2 10%~	7 21%~	~	~	~	~	~	1 11%~	7 19%~	7 17%~	1 25%~	2 9%~	6 24%
BEST SPECIALIST POSSIBLE	18 38%	353 45%~	1 14%~	4 40%~	6 60%~	7 35%~	9 26%~	~	~	~	~	2 67%~	6 67%~	11 30%~	15 36%~	2 50%~	9 41%~	9 36%

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			
	AHP 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)	41 87%	659 85%	5 71%	8 80%	10 100%	18 90%	29 85%	~	~	~	~	~100%	8 89%	32 86%	36 86%	4 100%	18 82%	23 92%
9-10 (NET)	26 55%	524 67%	2 29%	6 60%	9 90%	9 45%	16 47%	~	~	~	~	~67%	7 78%	18 49%	22 52%	3 75%	11 50%	15 60%
NOT ANSWERED		5																
VALID CASES	47	779	7	10	10	20	34				3	9	37	42	4	22	25	
NUMBER OF RESPONDENTS	47	784	7	10	10	20	34				3	9	37	42	4	22	25	
	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	
MEAN	8.74	8.73	8.00	8.80	9.50	8.60	8.53				9.33	9.22	8.59	8.67	9.25	8.64	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		
	AHP 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
Q49 YES	76 27%	1241 25%	11 22%	19 24%	24 32%	22 27%	45 24%	~	~	~	~	~	7 41%	19 28%	54 25%	72 27%	3 33%	53 24%	23 34%
NO	209 73%	3699 75%	38 78%	59 76%	52 68%	60 73%	141 76%	~	~	~	~	~	10 59%	48 72%	159 75%	197 73%	6 67%	165 76%	44 66%
NOT ANSWERED	25	369	7	7	6	5	4							1	4	4	1	23	2
VALID CASES	285	4940	49	78	76	82	186						17	67	213	269	9	218	67
NUMBER OF RESPONDENTS	310 100%	5309 100%	56 100%	85 100%	82 100%	87 100%	190 100%						17 100%	68 100%	217 100%	273 100%	10 100%	241 100%	69 100%

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				
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN #	NATV HAW/ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	NO CCC	CCC		
Q50 NEVER	3 4%	36 3%	~	1 5%	1 4%	1 5%	1 2%	~	~	~	~	~	14%	1 6%	2 4%	3 4%	2 4%	1 4%	
SOMETIMES	16 21%	228 19%	1 9%	5 26%	6 26%	4 18%	10 22%	~	~	~	~	~	29%	3 17%	12 22%	16 23%	12 23%	4 17%	
USUALLY	15 20%	350 29%	5 45%	1 5%	2 9%	7 32%	10 22%	~	~	~	~	~	22%	4 19%	10 19%	13 18%	1 33%	9 17%	6 26%
ALWAYS	41 55%	598 49%	5 45%	12 63%	14 61%	10 45%	24 53%	~	~	~	~	~	57%	10 56%	30 56%	39 55%	2 67%	29 56%	12 52%
#ALWAYS + USUALLY (NET)	56 75%	948 78%	10 91%	13 68%	16 70%	17 77%	34 76%	~	~	~	~	~	57%	14 78%	40 74%	52 73%	3 100%	38 73%	18 78%
TOP BOX SCORE	41 55%	598 49%	5 45%	12 63%	14 61%	10 45%	24 53%	~	~	~	~	~	57%	10 56%	30 56%	39 55%	2 67%	29 56%	12 52%
NOT ANSWERED	1	29			1									1		1		1	
VALID CASES	75	1212	11	19	23	22	45						7	18	54	71	3	52	23
NUMBER OF RESPONDENTS	76	1241	11	19	24	22	45						7	19	54	72	3	53	23
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN #	NATV HAW/ILND ##	AMER IND/PAC ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q51 NEVER		17 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	7 9%	87 7%	2 18%	1 5%	2 9%	2 10%	7 16%	~	~	~	~	~	~	7 13%	7 10%	~	5 10%	2 9%
USUALLY	11 15%	274 23%	~	3 16%	2 9%	6 29%	5 11%	~	~	~	~	1 14%	4 24%	6 11%	10 14%	1 33%	7 14%	4 17%
ALWAYS	56 76%	831 69%	9 82%	15 79%	19 83%	13 62%	33 73%	~	~	~	~	6 86%	13 76%	41 76%	53 76%	2 67%	39 76%	17 74%
#ALWAYS + USUALLY (NET)	67 91%	1105 91%	9 82%	18 95%	21 91%	19 90%	38 84%	~	~	~	~	7 100%	17 100%	47 87%	63 90%	3 100%	46 90%	21 91%
TOP BOX SCORE	56 76%	831 69%	9 82%	15 79%	19 83%	13 62%	33 73%	~	~	~	~	6 86%	13 76%	41 76%	53 76%	2 67%	39 76%	17 74%
NOT ANSWERED	2	32			1	1							2		2		2	
VALID CASES	74	1209	11	19	23	21	45					7	17	54	70	3	51	23
NUMBER OF RESPONDENTS	76	1241	11	19	24	22	45					7	19	54	72	3	53	23
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	AHP 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
Q52 YES	120 42%	1806 37%	25 50%	28 35%	31 41%	36 45%	73 39%	~	~	~	~	~	6 ~ 38%	34 52%	83 39%	114 42%	4 44%	86 40%	34 51%
NO	164 58%	3092 63%	25 50%	51 65%	44 59%	44 55%	114 61%	~	~	~	~	~	10 ~ 63%	32 48%	130 61%	155 58%	5 56%	131 60%	33 49%
NOT ANSWERED	26	411	6	6	7	7	3						1	2	4	4	1	24	2
VALID CASES	284	4898	50	79	75	80	187						16	66	213	269	9	217	67
NUMBER OF RESPONDENTS	310 100%	5309 100%	56 100%	85 100%	82 100%	87 100%	190 100%						17 100%	68 100%	217 100%	273 100%	10 100%	241 100%	69 100%

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		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN #	NATV HAW/ PAC ##	AMER IND/ ALSK ##	OTHR MUL- TI ##	HIS- IC IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD GOOD	FAIR FAIR	NO CCC	CCC
FQ53 NEVER	5 2%	83 2%	1 2%~	~	1 1%	3 4%	3 2%	~	~	~	~	~	~	2 3%	2 1%	4 2%~	~	3 1%	2 3%
SOMETIMES	21 8%	357 7%	5 10%~	3 4%	6 8%	7 9%	11 6%	~	~	~	~	~	~	7 11%	13 6%	18 7%~	2 22%~	13 6%	8 12%
USUALLY	47 17%	646 13%	7 14%~	16 20%	13 18%	11 14%	30 16%	~	~	~	~	~	4 25%~	11 17%	35 17%	47 18%~	~	33 15%	14 21%
ALWAYS	206 74%	3743 78%	36 73%~	60 76%	53 73%	57 73%	140 76%	~	~	~	~	~	12 75%~	44 69%	160 76%	195 74%~	7 78%~	164 77%*	42 64%
#ALWAYS + USUALLY (NET)	253 91%	4389 91%	43 88%~	76 96%*	66 90%	68 87%	170 92%	~	~	~	~	~	16 100%~	55 86%	195 93%	242 92%~	7 78%~	197 92%	56 85%
TOP BOX SCORE	206 74%	3743 78%	36 73%~	60 76%	53 73%	57 73%	140 76%	~	~	~	~	~	12 75%~	44 69%	160 76%	195 74%~	7 78%~	164 77%*	42 64%
NOT ANSWERED	5	69	1		2	2	3							2	3	5		4	1
VALID CASES	279	4829	49	79	73	78	184						16	64	210	264	9	213	66
NUMBER OF RESPONDENTS	284	4898	50	79	75	80	187						16	66	213	269	9	217	67
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN #	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q54 WORST HEALTH PLAN POSSIBLE		17 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
01	1 0.3%	14 0.3%	~	~	~	1%~	1 0.5%	~	~	~	~	~	~	~	1 0.4%	~	1 0.5%	~	
02		21 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
03	1 0.3%	35 0.7%	~	~	1%~	~	~	~	~	~	~	~	1%~	1 0.4%	~	~	~	1%~	
04	3 1%	62 1%	~	1%~	2%~	~	1 0.5%	~	~	~	~	1%~	2 0.9%	3 1%	~	2 0.9%	1%~		
05	13 5%	266 5%	~	3%~	1%*~	10%*~	12 6%*	~	~	~	~	~	1%~	12 6%*	11 4%~	1 11%~	8 4%~	5 7%~	
06	15 5%	237 5%	10%~	3%~	4%~	5%~	12 6%	~	~	~	~	1%~	1%*~	14 7%*	15 6%~	~	10 5%~	5 7%~	
07	30 10%	471 10%	10%~	9%~	4%*~	15%*~	21 11%	~	~	~	~	~	24%~	2 3%*	28 13%*	29 11%~	1 11%~	22 10%~	8 12%~
08	55 19%	939 19%	12%~	20%~	25%~	17%~	37 20%	~	~	~	~	~	24%~	11 16%~	44 20%~	52 19%~	1 11%~	38 17%~	17 25%~
09	61 21%	844 17%	12%~	16%~	18%~	15%~	46 24%	~	~	~	~	~	6%~	12 18%~	47 22%~	57 21%~	2 22%~	46 21%~	15 22%~
BEST HEALTH PLAN POSSIBLE	108 38%	1982 41%	44%~	44%~	37%~	28%*~	58 31%*	~	~	~	~	~	35%~	40 59%*	68 32%*	103 38%~	4 44%~	92 42%*	16 24%~
#8-10 (NET)	224 78%	3765 77%	80%~	85%~	87%*~	63%*~	141 75%	~	~	~	~	~	65%~	63 93%*	159 74%*	212 78%~	7 78%~	176 80%~	48 71%~

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						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP 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	GOOD & POOR	NO CCC	CCC	
9-10 (NET)	169 59%	2826 58%	34 68%	51 65%	46 61%	38 46%*	104 55%	~	~	~	~	~	7 41%~	52 76%*	115 53%*	160 59%~	6 67%~	138 63%*	31 46%
NOT ANSWERED	23	421	6	6	7	4	2							2	1	1	22	1	
VALID CASES	287	4888	50	79	75	83	188					17	68	215	272	9	219	68	
NUMBER OF RESPONDENTS	310	5309	56	85	82	87	190					17	68	217	273	10	241	69	
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	
MEAN	8.54	8.47	8.82	8.82	8.65	7.99	8.37					8.18	9.18	8.39	8.54	8.67	8.68	8.07	
p stat_(*=Sig @ p<=.05)		.453	.124	.063	.465	.001*	.017*	~	~	~	~	~	~	.000*	.006*	~	~	.006*	

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		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN #	NATV HAW/ PAC ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q55 YES	112 39%	1910 39%	20 40%	26 33%	29 39%	37 45%	80 43%	~	~	~	~	~	4 ~ 24%	22 33%	87 40%	104 38%	4 50%	64 29%*	48 72%
NO	174 61%	3030 61%	30 60%	53 67%	46 61%	45 55%	108 57%	~	~	~	~	~	13 ~ 76%	45 67%	128 60%	168 62%	4 50%	155 71%*	19 28%
NOT ANSWERED	24	369	6	6	7	5	2							1	2	1	2	22	2
VALID CASES	286	4940	50	79	75	82	188						17	67	215	272	8	219	67
NUMBER OF RESPONDENTS	310 100%	5309 100%	56 100%	85 100%	82 100%	87 100%	190 100%						17 100%	68 100%	217 100%	273 100%	10 100%	241 100%	69 100%

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		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN #	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q56 NEVER	1 0.9%	42 2%	~	~	~	3%	1 1%	~	~	~	~	~	~	1 1%	1 1%	~	2 2%	
SOMETIMES	7 6%	156 8%	3 16%	1 4%	~	3 8%	5 6%	~	~	~	~	~	2 10%	5 6%	6 6%	1 25%	2 3%	5 10%
USUALLY	33 30%	483 26%	4 21%	6 23%	14 50%	9 24%	24 30%	~	~	~	~	1 25%	5 24%	26 30%	29 28%	1 25%	18 29%	15 31%
ALWAYS	69 63%	1206 64%	12 63%	19 73%	14 50%	24 65%	49 62%	~	~	~	~	3 75%	14 67%	54 63%	66 65%	2 50%	42 68%	27 56%
#ALWAYS + USUALLY (NET)	102 93%	1689 90%	16 84%	25 96%	28 100%	33 89%	73 92%	~	~	~	~	4 100%	19 90%	80 93%	95 93%	3 75%	60 97%	42 88%
TOP BOX SCORE	69 63%	1206 64%	12 63%	19 73%	14 50%	24 65%	49 62%	~	~	~	~	3 75%	14 67%	54 63%	66 65%	2 50%	42 68%	27 56%
NOT ANSWERED	2	23	1		1		1						1	1	2		2	
VALID CASES	110	1887	19	26	28	37	79					4	21	86	102	4	62	48
NUMBER OF RESPONDENTS	112 100%	1910 100%	20 100%	26 100%	29 100%	37 100%	80 100%					4 100%	22 100%	87 100%	104 100%	4 100%	64 100%	48 100%

[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		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS- IAN #	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q57 #YES	58 53%	1118 60%	14 70%~	12 46%~	13 46%~	19 54%~	43 54%~	~	~	~	~	~	2 50%~	10 50%~	47 55%~	56 55%~	2 50%~	29 47%~	29 62%
NO	51 47%	755 40%	6 30%~	14 54%~	15 54%~	16 46%~	36 46%~	~	~	~	~	~	2 50%~	10 50%~	39 45%~	45 45%~	2 50%~	33 53%~	18 38%
NOT ANSWERED	3	37			1	2	1							2	1	3		2	1
VALID CASES	109	1873	20	26	28	35	79						4	20	86	101	4	62	47
NUMBER OF RESPONDENTS	112	1910	20	26	29	37	80						4	22	87	104	4	64	48
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR- AMER ##	AS- IAN #	NATV HAW/ ILND PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q57A YES	231 83%	3983 82%	28 56%*	65 87%	71 97%*	67 83%	150 81%	~	~	~	~	~	15 88%~	54 84%	174 82%	218 82%~	9 100%~	171 81%	60 90%
NO	48 17%	876 18%	22 44%*	10 13%	2 3%*	14 17%	35 19%	~	~	~	~	~	2 12%~	10 16%	38 18%	47 18%~	~	41 19%	7 10%
NOT ANSWERED	31	450	6	10	9	6	5							4	5	8	1	29	2
VALID CASES	279	4859	50	75	73	81	185						17	64	212	265	9	212	67
NUMBER OF RESPONDENTS	310	5309	56	85	82	87	190						17	68	217	273	10	241	69
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN #	NATV HAW/ PAC ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q57B YES	176 62%	2993 61%	15 30%*	53 68%	55 77%*	53 64%	112 60%	~	~	~	~	~	10 ~ 59%~	46 70%	128 60%	167 62%~	7 78%~	128 60%	48 71%
NO	106 38%	1901 39%	35 70%*	25 32%	16 23%*	30 36%	75 40%	~	~	~	~	~	7 ~ 41%~	20 30%	85 40%	102 38%~	2 22%~	86 40%	20 29%
NOT ANSWERED	28	415	6	7	11	4	3							2	4	4	1	27	1
VALID CASES	282	4894	50	78	71	83	187						17	66	213	269	9	214	68
NUMBER OF RESPONDENTS	310 100%	5309 100%	56 100%	85 100%	82 100%	87 100%	190 100%						17 100%	68 100%	217 100%	273 100%	10 100%	241 100%	69 100%

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			
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN #	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	NO CCC	CCC		
Q57C NEVER	1 0.6%	52 2%*	~	~	~	2%~	1 0.9%~	~	~	~	~	~	~	1 0.8%~	1 0.6%~	~	1 0.8%~		
SOMETIMES	13 8%	168 6%	~	4 8%	3 6%	6 12%	9 8%	~	~	~	~	2 20%~	2 5%~	11 9%~	13 8%~	~	10 8%~	3 6%	
USUALLY	26 15%	532 18%	~	3 6%*	7 13%	16 31%*	15 14%	~	~	~	~	2 20%~	7 16%~	18 14%~	22 13%~	3 50%~	17 14%~	9 19%	
ALWAYS	132 77%	2201 75%	100%~	15 87%*	45 81%	44 81%	28 55%*	85 77%	~	~	~	~	6 60%~	35 80%~	96 76%~	128 78%~	3 50%~	97 78%~	35 74%
#ALWAYS + USUALLY (NET)	158 92%	2733 93%	100%~	15 92%~	48 94%	51 94%	44 86%	100 91%	~	~	~	~	8 80%~	42 95%~	114 90%~	150 91%~	6 100%~	114 91%~	44 94%
TOP BOX SCORE	132 77%	2201 75%	100%~	15 87%*	45 81%	44 81%	28 55%*	85 77%	~	~	~	~	6 60%~	35 80%~	96 76%~	128 78%~	3 50%~	97 78%~	35 74%
NOT ANSWERED	4	40		1	1	2	2						2	2	3	1	3	1	
VALID CASES	172	2953	15	52	54	51	110					10	44	126	164	6	125	47	
NUMBER OF RESPONDENTS	176	2993	15	53	55	53	112					10	46	128	167	7	128	48	
	100%	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			
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-##	AS-IAN #	NATV HAW/ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q57D NEVER	30 26%	609 28%	4 25%	10 30%	2 7%	14 40%	16 25%	~	~	~	~	~	3 43%	10 26%	20 27%	29 26%	1 33%	20 23%	10 36%
SOMETIMES	24 21%	384 18%	4 25%	3 9%	8 27%	9 26%	10 16%	~	~	~	~	~	3 43%	10 26%	13 18%	24 22%	~	19 22%	5 18%
USUALLY	27 24%	484 22%	1 6%	10 30%	11 37%	5 14%	18 28%	~	~	~	~	~	1 14%	6 16%	20 27%	27 25%	~	19 22%	8 29%
ALWAYS	33 29%	716 33%	7 44%	10 30%	9 30%	7 20%	20 31%	~	~	~	~	~	~	12 32%	21 28%	30 27%	2 67%	28 33%	5 18%
#ALWAYS + USUALLY (NET)	60 53%	1200 55%	8 50%	20 61%	20 67%	12 34%	38 59%	~	~	~	~	~	1 14%	18 47%	41 55%	57 52%	2 67%	47 55%	13 46%
TOP BOX SCORE	33 29%	716 33%	7 44%	10 30%	9 30%	7 20%	20 31%	~	~	~	~	~	~	12 32%	21 28%	30 27%	2 67%	28 33%	5 18%
I DID NOT HAVE A DENTAL EMERGENCY IN THE LAST 6 MONTHS	165	2639	33	45	39	48	119						10	29	136	157	7	125	40
NOT ANSWERED	31	477	7	7	13	4	7							1	7	6		30	1
VALID CASES	114	2193	16	33	30	35	64						7	38	74	110	3	86	28
NUMBER OF RESPONDENTS	310	5309	56	85	82	87	190						17	68	217	273	10	241	69
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY	HEALTH STATUS		CCC SCREENER			
	AHP 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
Q57E EXTREMELY DIFFICULT	9 3%	164 3%	3 6%	~	~	6 7%*	4 2%	~	~	~	~	~	1 6%~	2 3%	7 3%	9 3%~	~	6 3%	3 4%
01	7 2%	92 2%	~	1 1%	2 2%	4 5%	4 2%	~	~	~	~	~	1 6%~	2 3%	5 2%	7 3%~	~	4 2%	3 4%
02	2 0.7%	75 1%	1 2%	~	~	1 1%	2 1%~	~	~	~	~	~	~	~	2 1%	2 0.8%~	~	~	2 3%
03	11 4%	133 3%	2 4%	3 4%	2 2%	4 5%	9 5%	~	~	~	~	~	1 6%~	1 2%	10 5%*	10 4%~	1 10%~	8 4%	3 4%
04	10 3%	87 2%	2 4%	1 1%	2 2%	5 6%	7 4%	~	~	~	~	~	1 6%~	2 3%	8 4%	9 3%~	1 10%~	4 2%*	6 9%
05	28 9%	371 7%	5 9%	9 11%	5 6%	9 11%	19 11%	~	~	~	~	~	1 6%~	5 8%	21 10%	27 10%~	1 10%~	21 9%	7 10%
06	12 4%	203 4%	3 6%	1 1%*	4 5%	4 5%	11 6%*	~	~	~	~	~	~	~	12 6%~	12 5%~	~	10 4%	2 3%
07	28 9%	375 7%	7 13%	5 6%	9 11%	7 9%	19 11%	~	~	~	~	~	~	6 9%	22 11%	26 10%~	1 10%~	20 9%	8 12%
09	93 31%	1657 33%	15 28%	21 26%	32 40%	25 30%	46 26%*	~	~	~	~	~	7 41%~	17 26%	54 26%*	66 25%~	5 50%~	75 33%	18 26%
EXTREMELY EASY	97 33%	1890 37%	15 28%	40 49%*	25 31%	17 21%*	59 33%	~	~	~	~	~	5 29%~	31 47%*	66 32%	95 36%~	1 10%~	80 35%	17 25%
#8-10 (NET)	190 64%	3547 70%*	30 57%	61 75%*	57 70%	42 51%*	105 58%*	~	~	~	~	~	12 71%~	48 73%	120 58%*	161 61%~	6 60%~	155 68%*	35 51%
9-10 (NET)	190 64%	3547 70%*	30 57%	61 75%*	57 70%	42 51%*	105 58%*	~	~	~	~	~	12 71%~	48 73%	120 58%*	161 61%~	6 60%~	155 68%*	35 51%

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							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN #	NATV ILND ##	AMER IND/ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
88		1																	
NOT ANSWERED	13	261	3	4	1	5	10							2	10	10		13	
VALID CASES	297	5047	53	81	81	82	180					17	66	207	263	10	228	69	
NUMBER OF RESPONDENTS	310	5309	56	85	82	87	190					17	68	217	273	10	241	69	
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	
MEAN	7.74	8.02	7.42	8.51	8.22	6.72	7.56					7.41	8.23	7.48	7.64	7.40	8.00	6.88	
p stat_(*=Sig @ p<=.05)		.060	.340	.001*	.035*	.000*	.161	~	~	~	~	~	~	.100	.007*	~	~	.008*	

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	AHP 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 POOR	FAIR & POOR	NO CCC	CCC	
Q58 EXCELLENT	137 48%	2100 43%*	31 61%*	43 54%	32 46%	31 37%*	97 52%	~	~	~	~	~	9 53%~	23 34%*	112 52%*	137 50%~	~	123 57%*	14 21%
VERY GOOD	91 32%	1734 35%	13 25%	24 30%	25 36%	29 35%	57 30%	~	~	~	~	~	7 41%~	23 34%	68 32%	91 33%~	~	65 30%	26 38%
GOOD	45 16%	854 17%	6 12%	12 15%	10 14%	17 20%	28 15%	~	~	~	~	~	1 6%~	16 24%	29 14%	45 16%~	~	23 11%*	22 32%
FAIR	10 4%	210 4%	1 2%	~	3 4%	6 7%	5 3%	~	~	~	~	~	~	5 7%	5 2%	10 ~100%~	~	4 2%	6 9%
POOR		17 0.3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
#EXCELLENT + VERY GOOD + GOOD (NET)	273 96%	4688 95%	50 98%	79 100%~	67 96%	77 93%	182 97%	~	~	~	~	~	17 ~100%~	62 93%	209 98%	273 100%~	~	211 98%	62 91%
NOT ANSWERED	27	394	5	6	12	4	3							1	3			26	1
VALID CASES	283	4915	51	79	70	83	187						17	67	214	273	10	215	68
NUMBER OF RESPONDENTS	310 100%	5309 100%	56 100%	85 100%	82 100%	87 100%	190 100%						17 100%	68 100%	217 100%	273 100%	10 100%	241 100%	69 100%

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		
	AHP 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	139 49%	2151 44%	39 76%*	40 51%	33 46%	27 33%*	95 50%	~	~	~	~	~	8 47%~	30 45%	108 50%	137 50%~	1 10%~	126 58%*	13 19%
VERY GOOD	81 28%	1382 28%	9 18%*	28 35%	22 31%	22 27%	53 28%	~	~	~	~	~	5 29%~	18 27%	62 29%	80 29%~	1 10%~	63 29%	18 26%
GOOD	42 15%	930 19%*	2 4%*	9 11%	10 14%	21 25%*	24 13%	~	~	~	~	~	3 18%~	14 21%	28 13%	39 14%~	2 20%~	21 10%*	21 30%
FAIR	19 7%	366 7%	~	3%*	6 8%	11 13%*	13 7%	~	~	~	~	~	1 6%~	5 7%	14 6%	14 5%~	5 50%~	5 2%*	14 20%
POOR	4 1%	88 2%	1 2%	~	1 1%	2 2%	4 2%~	~	~	~	~	~	~	~	4 2%*	3 1%~	1 10%~	1 0.5%	3 4%
#EXCELLENT + VERY GOOD + GOOD (NET)	262 92%	4463 91%	50 98%*	77 97%*	65 90%	70 84%*	172 91%	~	~	~	~	~	16 94%~	62 93%	198 92%	256 94%~	4 40%~	210 97%*	52 75%
NOT ANSWERED	25	392	5	6	10	4	1							1	1			25	
VALID CASES	285	4917	51	79	72	83	189						17	67	216	273	10	216	69
NUMBER OF RESPONDENTS	310 100%	5309 100%	56 100%	85 100%	82 100%	87 100%	190 100%						17 100%	68 100%	217 100%	273 100%	10 100%	241 100%	69 100%

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		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN #	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q60 YES	62 22%	1056 22%	10 20%	10 13%*	17 24%	25 31%*	43 23%	~	~	~	~	~	3 ~ 18%	14 21%	47 22%	57 21%~	5 56%~	14 7%*	48 70%
NO	221 78%	3853 78%	41 80%	69 87%*	55 76%	56 69%*	145 77%	~	~	~	~	~	14 ~ 82%	52 79%	168 78%	215 79%~	4 44%~	200 93%*	21 30%
NOT ANSWERED	27	400	5	6	10	6	2							2	2	1	1	27	
VALID CASES	283	4909	51	79	72	81	188						17	66	215	272	9	214	69
NUMBER OF RESPONDENTS	310	5309	56	85	82	87	190						17	68	217	273	10	241	69
	100%	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						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN #	NATV ILND NATV ##	AMER IND/ ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
Q61 YES	49 79%	843 81%	7 70%~	7 70%~	16 94%~	19 76%~	37 86%~	~	~	~	~	~	3 ~100%~	8 57%~	40 85%~	45 79%~	4 80%~	3 21%~	46 96%~
NO	13 21%	192 19%	3 30%~	3 30%~	1 6%~	6 24%~	6 14%~	~	~	~	~	~	~	6 43%~	7 15%~	12 21%~	1 20%~	11 79%~	2 4%~
NOT ANSWERED		21																	
VALID CASES	62	1035	10	10	17	25	43						3	14	47	57	5	14	48
NUMBER OF RESPONDENTS	62 100%	1056 100%	10 100%	10 100%	17 100%	25 100%	43 100%						3 100%	14 100%	47 100%	57 100%	5 100%	14 100%	48 100%

[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	
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN #	NATV HAW/ PAC ILND #	AMER IND/ ALS #	OTHR #	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q62 YES	44 92%	748 91%	6 86%	6 86%	15 94%	17 94%	36 97%	~	~	~	~	~	2 67%	5 71%	38 95%	41 91%	3 100%	44 98%
NO	4 8%	77 9%	1 14%	1 14%	1 6%	1 6%	1 3%	~	~	~	~	1 33%	2 29%	2 5%	4 9%	~	3 100%	1 2%
NOT ANSWERED	1	18				1							1			1		1
VALID CASES	48	825	7	7	16	18	37					3	7	40	45	3	3	45
NUMBER OF RESPONDENTS	49	843	7	7	16	19	37					3	8	40	45	4	3	46
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q60 = YES AND Q61 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE							ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER ##	AS-IAN #	NATV ILND ##	AMER HAW/IND/ PAC ALSK ##	OTHR ##	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC
Q63 YES	46 16%	832 17%	5 10%	12 15%	13 18%	16 19%	33 18%	~	~	~	~	~	4 ~ 24%	6 9%*	39 18%	39 14%~	6 60%~	8 4%*	38 56%
NO	237 84%	4059 83%	46 90%	66 85%	58 82%	67 81%	153 82%	~	~	~	~	~	13 ~ 76%	62 91%*	174 82%	231 86%~	4 40%~	207 96%*	30 44%
NOT ANSWERED	27	418	5	7	11	4	4							4	3			26	1
VALID CASES	283	4891	51	78	71	83	186						17	68	213	270	10	215	68
NUMBER OF RESPONDENTS	310	5309	56	85	82	87	190						17	68	217	273	10	241	69
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q64 YES	38 84%	689 85%	5 100%	10 83%	10 77%	13 87%	29 88%	~	~	~	~	~	2 50%	5 100%	32 82%	31 82%	6 100%	3 43%	35 92%
NO	7 16%	123 15%	~	2 17%	3 23%	2 13%	4 12%	~	~	~	~	~	2 50%	7 18%	7 18%	~	~	4 57%	3 8%
NOT ANSWERED	1	20				1							1	1	1			1	
VALID CASES	45	812	5	12	13	15	33					4	5	39	38	6		7	38
NUMBER OF RESPONDENTS	46	832	5	12	13	16	33					4	6	39	39	6		8	38
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%		100%	100%

[ASKED IF Q63 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN #	NATV HAW/ PAC ILND NATV ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q65 YES	34 92%	662 97%	5 100%	9 90%	10 100%	10 83%	27 93%	~	~	~	~	~	2 ~100%	3 75%	30 94%	29 94%	4 80%	34 ~100%	
NO	3 8%	19 3%	~	1 10%	~	2 17%	2 7%	~	~	~	~	~	~	1 25%	2 6%	2 6%	1 20%	3 100%	
NOT ANSWERED	1	8				1								1			1		1
VALID CASES	37	681	5	10	10	12	29						2	4	32	31	5	3	34
NUMBER OF RESPONDENTS	38	689	5	10	10	13	29						2	5	32	31	6	3	35
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q63 = YES AND Q64 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	AHP 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- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q66 YES	32 11%	644 13%	4 8%	7 9%	8 11%	13 16%	24 13%	~	~	~	~	~	2 12%	5 8%	27 13%	26 10%	5 50%	3 1%*	29 43%
NO	250 89%	4243 87%	47 92%	72 91%	63 89%	68 84%	164 87%	~	~	~	~	~	15 88%	61 92%	187 87%	244 90%	5 50%	211 99%*	39 57%
NOT ANSWERED	28	422	5	6	11	6	2							2	3	3		27	1
VALID CASES	282	4887	51	79	71	81	188						17	66	214	270	10	214	68
NUMBER OF RESPONDENTS	310	5309	56	85	82	87	190						17	68	217	273	10	241	69
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q67 YES	30 94%	508 81%	4 100%	6 86%	8 100%	12 92%	23 96%	~	~	~	~	~	2 100%	5 100%	25 93%	24 92%	5 100%	1 33%	29 100%
NO	2 6%	121 19%	~	1 14%	~	1 8%	1 4%	~	~	~	~	~	~	2 7%	2 8%	~	2 67%	~	
NOT ANSWERED		15																	
VALID CASES	32	629	4	7	8	13	24					2	5	27	26	5	3	29	
NUMBER OF RESPONDENTS	32	644	4	7	8	13	24					2	5	27	26	5	3	29	
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q66 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN #	NATV ILND NATV ##	AMER ALSK ##	OTH#	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	GOOD	FAIR	NO CCC	CCC
Q68 YES	29 97%	477 96%	4 100%	6 100%	8 100%	11 92%	23 100%	~	~	~	~	~	2 ~100%	4 80%	25 100%	23 96%	5 100%	~	29 ~100%	
NO	1 3%	22 4%	~	~	~	1 8%	~	~	~	~	~	~	~	1 20%	~	1 4%	~	~	1 100%	
NOT ANSWERED		9																		
VALID CASES	30	499	4	6	8	12	23						2	5	25	24	5		1	29
NUMBER OF RESPONDENTS	30	508	4	6	8	12	23						2	5	25	24	5		1	29
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%		100%	100%

[ASKED IF Q66 = YES AND Q67 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN #	NATV HAW/ PAC ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q69 YES	13 5%	558 11%*	2 4%	7 9%	2 3%	2 2%	9 5%	~	~	~	~	~	1 6%	3 4%	10 5%	11 4%	2 20%	1 0.5%*	12 18%
NO	271 95%	4342 89%*	49 96%	72 91%	69 97%	81 98%	180 95%	~	~	~	~	~	16 94%	64 96%	205 95%	261 96%	8 80%	215 100%*	56 82%
NOT ANSWERED	26	409	5	6	11	4	1							1	2	1		25	1
VALID CASES	284	4900	51	79	71	83	189						17	67	215	272	10	216	68
NUMBER OF RESPONDENTS	310	5309	56	85	82	87	190						17	68	217	273	10	241	69
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	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	
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q70 YES	11 85%	389 72%~100%	2 ~100%	6 86%~	1 50%~	2 100%~	8 89%~	~	~	~	~	~100%	2 67%~	9 90%~	9 82%~	2 100%~	11 ~92%	
NO	2 15%	149 28%~	~	1 14%~	1 50%~	~	1 11%~	~	~	~	~	~	1 33%~	1 10%~	2 18%~	~	1 100%~	1 8%
NOT ANSWERED		20																
VALID CASES	13	538	2	7	2	2	9				1	3	10	11	2	1	12	
NUMBER OF RESPONDENTS	13	558	2	7	2	2	9				1	3	10	11	2	1	12	
	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q69 = YES]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN #	NATV HAW/ PAC ##	AMER IND/ ALS ##	OTHR MUL- TI ##	HIS- IC IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q71 YES	10 91%	357 93%	2 100%	6 100%	1 100%	1 50%	7 88%	~	~	~	~	~	1 100%	2 100%	8 89%	8 89%	2 100%	10 ~ 91%
NO	1 9%	27 7%	~	~	~	1 50%	1 13%	~	~	~	~	~	~	1 11%	1 11%	~	1 ~ 9%	
NOT ANSWERED		5																
VALID CASES	11	384	2	6	1	2	8					1	2	9	9	2		11
NUMBER OF RESPONDENTS	11	389	2	6	1	2	8					1	2	9	9	2		11
	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		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-##	AS- IAN #	NATV ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q72 YES	39 14%	813 17%	4 8%	7 9%	10 14%	18 22%*	28 15%	~	~	~	~	~	4 ~ 24%~	6 9%	33 15%	34 13%~	5 50%~	3 1%*	36 53%
NO	243 86%	4085 83%	47 92%	71 91%	61 86%	64 78%*	159 85%	~	~	~	~	~	13 ~ 76%~	60 91%	181 85%	236 87%~	5 50%~	211 99%*	32 47%
NOT ANSWERED	28	411	5	7	11	5	3							2	3	3		27	1
VALID CASES	282	4898	51	78	71	82	187						17	66	214	270	10	214	68
NUMBER OF RESPONDENTS	310	5309	56	85	82	87	190						17	68	217	273	10	241	69
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	AHP 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
Q73 YES	35 95%	726 92%	3 75%	7 100%	9 100%	16 94%	25 93%	~	~	~	~	~	4 ~100%	5 100%	30 94%	30 94%	5 100%	35 ~ 97%
NO	2 5%	64 8%	1 25%	~	~	1 6%	2 7%	~	~	~	~	~	~	2 6%	2 6%	~	1 100%	1 3%
NOT ANSWERED	2	23			1	1	1						1	1	2		2	
VALID CASES	37	790	4	7	9	17	27					4	5	32	32	5	1	36
NUMBER OF RESPONDENTS	39	813	4	7	10	18	28					4	6	33	34	5	3	36
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q72 = YES]

NQ74 WHAT IS YOUR CHILD'S AGE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	AHP 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
NQ74																		
3 YEARS OLD OR LESS	56 18%	908 17%	56 100%	~	~	~	41 22%*	~	~	~	~	1 6%	8 12%	43 20%	50 18%	1 10%	46 19%	10 14%
4 TO 7 YEARS OLD	85 27%	1228 23%	~	85 ~100%	~	~	50 26%	~	~	~	~	7 41%	19 28%	60 28%	79 29%	~	72 30%*	13 19%
8 TO 12 YEARS OLD	82 26%	1650 31%	~	~	82 ~100%	~	43 23%	~	~	~	~	6 35%	19 28%	53 24%	67 25%	3 30%	61 25%	21 30%
13 OR OLDER	87 28%	1523 29%	~	~	~	87 ~100%	56 29%	~	~	~	~	3 18%	22 32%	61 28%	77 28%	6 60%	62 26%	25 36%
VALID CASES	310	5309	56	85	82	87	190					17	68	217	273	10	241	69
NUMBER OF RESPONDENTS	310	5309	56	85	82	87	190					17	68	217	273	10	241	69
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

NQ75 IS YOUR CHILD MALE OR FEMALE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN #	NATV HAW/ ILND ##	AMER ALS ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NQ75																			
MALE	164 53%	2736 52%	32 57%	41 48%	47 57%	44 51%	106 56%	~	~	~	~	~	8 47%	35 51%	116 53%	143 52%	5 50%	124 51%	40 58%
FEMALE	146 47%	2573 48%	24 43%	44 52%	35 43%	43 49%	84 44%	~	~	~	~	~	9 53%	33 49%	101 47%	130 48%	5 50%	117 49%	29 42%
VALID CASES	310	5309	56	85	82	87	190						17	68	217	273	10	241	69
NUMBER OF RESPONDENTS	310 100%	5309 100%	56 100%	85 100%	82 100%	87 100%	190 100%						17 100%	68 100%	217 100%	273 100%	10 100%	241 100%	69 100%

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

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

	BANT	BANT	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	OT1	OT2	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER	AS-IAN	NATV ILND	AMER PAC ALSK	OTHR	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q76																			
HISPANIC OR LATINO	68 24%	1726 35%*	8 16%	19 24%	19 26%	22 27%	~	~	~	~	~	~	~	68 ~100%	62 ~23%	5 50%	58 27%*	10 15%	
NOT HISPANIC OR LATINO	217 76%	3146 65%*	43 84%	60 76%	53 74%	61 73%	189 100%	~	~	~	~	~	~	17 ~100%	217 ~100%	209 77%	5 50%	159 73%*	58 85%
NOT ANSWERED	25	437	5	6	10	4	1								2		24	1	
VALID CASES	285	4872	51	79	72	83	189					17	68	217	271	10	217	68	
NUMBER OF RESPONDENTS	310 100%	5309 100%	56 100%	85 100%	82 100%	87 100%	190 100%					17 100%	68 100%	217 100%	273 100%	10 100%	241 100%	69 100%	

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

	BANT OT1	BANT OT2	AGE					RACE							ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV ILND	AMER ALS	IND/ NATV	OTH R	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q77.1 YES	241 78%	3787 71%*	47 84%	66 78%	59 72%	69 79%	190 100%~	~	~	~	~	~	17 ~100%~	34 50%*	206 95%*	229 84%~	9 90%~	177 73%*	64 93%	
NO	69 22%	1522 29%*	9 16%	19 22%	23 28%	18 21%	~	~	~	~	~	~	34 ~50%*	11 5%*	44 16%~	1 10%~	64 27%*	5 7%		
VALID CASES	310	5309	56	85	82	87	190						17	68	217	273	10	241	69	
NUMBER OF RESPONDENTS	310 100%	5309 100%	56 100%	85 100%	82 100%	87 100%	190 100%						17 100%	68 100%	217 100%	273 100%	10 100%	241 100%	69 100%	

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		
	AHP 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	
Q77.2 YES	9 3%	204 4%	1 2%	2 2%	4 5%	2 2%	~	~	~	~	~	~	5 ~ 29%	2 3%	7 3%	8 3%	1 10%	7 3%	2 3%
NO	301 97%	5105 96%	55 98%	83 98%	78 95%	85 98%	190 100%	~	~	~	~	~	12 ~ 71%	66 97%	210 97%	265 97%	9 90%	234 97%	67 97%
VALID CASES	310	5309	56	85	82	87	190						17	68	217	273	10	241	69
NUMBER OF RESPONDENTS	310 100%	5309 100%	56 100%	85 100%	82 100%	87 100%	190 100%						17 100%	68 100%	217 100%	273 100%	10 100%	241 100%	69 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.3 YES	5 2%	184 3%*	~	2%	2%	1%	~	~	~	~	~	~ 24%	1%	4%	2%~	~	5	5
NO	305 98%	5125 97%*	100%~	98%	98%	99%	100%~	~	~	~	~	~ 76%	99%	98%	98%~100%~	~	236	69
VALID CASES	310	5309	56	85	82	87	190					17	68	217	273	10	241	69
NUMBER OF RESPONDENTS	310 100%	5309 100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN #	NATV HAW/ PAC ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.4 YES	3 1%	83 2%	1 2%	1 1%	1 1%	~	~	~	~	~	~	1 6%	1 1%	2 0.9%	3 1%	~	2 0.8%	1 1%
NO	307 99%	5226 98%	55 98%	84 99%	81 99%	87 100%	190 100%	~	~	~	~	16 94%	67 99%	215 99%	270 99%	10 100%	239 99%	68 99%
VALID CASES	310	5309	56	85	82	87	190					17	68	217	273	10	241	69
NUMBER OF RESPONDENTS	310 100%	5309 100%	56 100%	85 100%	82 100%	87 100%	190 100%					17 100%	68 100%	217 100%	273 100%	10 100%	241 100%	69 100%

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	
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.5 YES	13 4%	335 6%	~	5%	7%	3%	~	~	~	~	~	~ 47%	4 6%	9 4%	12 4%	1 10%	6 2%*	7 10%
NO	297 96%	4974 94%	56 100%	81 95%	76 93%	84 97%	190 100%	~	~	~	~	~ 53%	64 94%	208 96%	261 96%	9 90%	235 98%*	62 90%
VALID CASES	310	5309	56	85	82	87	190					17	68	217	273	10	241	69
NUMBER OF RESPONDENTS	310 100%	5309 100%	56 100%	85 100%	82 100%	87 100%	190 100%					17 100%	68 100%	217 100%	273 100%	10 100%	241 100%	69 100%

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALS	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q77.6 YES	18 6%	374 7%	1 2%*	9 11%	4 5%	4 5%	~	~	~	~	~	~ 18%	9 13%*	9 4%	18 7%~	~	17 7%*	1 1%
NO	292 94%	4935 93%	55 98%*	76 89%	78 95%	83 95%	190 100%~	~	~	~	~	~ 82%	59 87%*	208 96%	255 93%~	10 100%~	224 93%*	68 99%
VALID CASES	310	5309	56	85	82	87	190					17	68	217	273	10	241	69
NUMBER OF RESPONDENTS	310 100%	5309 100%	56 100%	85 100%	82 100%	87 100%	190 100%					17 100%	68 100%	217 100%	273 100%	10 100%	241 100%	69 100%

Q78 WHAT IS YOUR AGE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-AMER ##	AS-IAN #	NATV ILND PAC ##	AMER ALSK NATV ##	MUL-OTHR ##	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q78 UNDER 18	8 3%	141 3%	~	~	3%	7%*	5 3%	~	~	~	~	~	1 6%~	1 1%	7 3%	8 3%~	~	7 3%	1 1%
18 TO 24	9 3%	161 3%	6 12%~	3 4%	~	~	7 4%	~	~	~	~	~	~	2 3%	7 3%	9 3%~	~	8 4%	1 1%
25 TO 34	94 33%	1564 32%	34 69%~	34 43%*	22 31%	4 5%*	69 37%	~	~	~	~	~	6 35%~	19 28%	75 35%	91 34%~	3 30%~	73 34%	21 31%
35 TO 44	107 38%	1821 37%	8 16%~	33 42%	30 42%	36 44%	60 32%*	~	~	~	~	~	6 35%~	34 51%*	72 34%*	105 39%~	2 20%~	88 41%*	19 28%
45 TO 54	38 13%	797 16%	1 2%~	3 4%*	11 15%	23 28%*	27 14%	~	~	~	~	~	3 18%~	6 9%	32 15%	34 13%~	3 30%~	27 13%	11 16%
55 TO 64	21 7%	266 5%	~	4 5%	6 8%	11 13%*	15 8%	~	~	~	~	~	1 6%~	5 7%	16 7%	16 6%~	2 20%~	10 5%*	11 16%
65 TO 74	5 2%	116 2%	~	2 3%	1 1%	2 2%	5 3%~	~	~	~	~	~	~	~	5 2%~	5 2%~	~	1 0.5%	4 6%
75 OR OLDER		16 0.3%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	28	427	7	6	10	5	2							1	3	5		27	1
VALID CASES	282	4882	49	79	72	82	188						17	67	214	268	10	214	68
NUMBER OF RESPONDENTS	310	5309	56	85	82	87	190						17	68	217	273	10	241	69
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

Q79 ARE YOU MALE OR FEMALE?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN #	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q79																			
MALE	43 15%	702 14%	1 2%*	14 18%	11 15%	17 20%	26 14%	~	~	~	~	~ 24%	4 15%	10 15%	33 15%	40 15%	2 20%	32 15%	11 16%
FEMALE	241 85%	4191 86%	49 98%*	65 82%	61 85%	66 80%	163 86%	~	~	~	~	~ 76%	13 85%	58 85%	182 85%	230 85%	8 80%	184 85%	57 84%
NOT ANSWERED	26	416	6	6	10	4	1							2	3		25	1	
VALID CASES	284	4893	50	79	72	83	189					17	68	215	270	10	216	68	
NUMBER OF RESPONDENTS	310 100%	5309 100%	56 100%	85 100%	82 100%	87 100%	190 100%					17 100%	68 100%	217 100%	273 100%	10 100%	241 100%	69 100%	

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP 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/ALS #	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q80																		
8TH GRADE OR LESS	21 7%	479 10%	1 2%*	6 8%	6 8%	8 10%	3 2%*	~	~	~	~	~	18 27%*	3 1%*	18 7%~	2 20%~	17 8%	4 6%
SOME HIGH SCHOOL BUT DID NOT GRADUATE	25 9%	480 10%	3 6%	5 6%	6 8%	11 13%	11 6%*	~	~	~	~	2 12%~	12 18%*	13 6%*	25 9%~	~	21 10%	4 6%
HIGH SCHOOL GRADUATE OR GED	76 27%	1452 30%	19 37%	28 36%*	16 22%	13 16%*	52 27%	~	~	~	~	3 18%~	20 30%	56 26%	70 26%~	4 40%~	60 28%	16 24%
SOME COLLEGE OR 2-YEAR DEGREE	126 44%	1752 36%*	21 41%	27 35%*	37 51%	41 49%	95 50%*	~	~	~	~	9 53%~	15 22%*	111 51%*	122 45%~	4 40%~	91 42%	35 51%
4-YEAR COLLEGE GRADUATE	27 10%	437 9%	6 12%	7 9%	7 10%	7 8%	23 12%*	~	~	~	~	3 18%~	1 1%*	25 12%*	26 10%~	~	21 10%	6 9%
MORE THAN 4-YEAR COLLEGE DEGREE	9 3%	238 5%	1 2%	5 6%	~	3 4%	6 3%	~	~	~	~	~	1 1%	8 4%	9 3%~	~	6 3%	3 4%
NOT ANSWERED	26	471	5	7	10	4							1	1	3		25	1
VALID CASES	284	4838	51	78	72	83	190					17	67	216	270	10	216	68
NUMBER OF RESPONDENTS	310	5309	56	85	82	87	190					17	68	217	273	10	241	69
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

Q81 HOW ARE YOU RELATED TO THE CHILD?

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN #	NATV HAW/ PAC ##	AMER IND/ ALS ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q81 MOTHER OR FATHER	269 95%	4466 93%	51 100%~	74 95%	66 93%	78 94%	179 95%	~	~	~	~	~	15 88%~	64 96%	203 95%	257 96%~	9 90%~	212 98%*	57 85%
GRANDPARENT	8 3%	186 4%	~	1 1%	4 6%	3 4%	5 3%	~	~	~	~	~	1 6%~	2 3%	6 3%	5 2%~	1 10%~	3 1%	5 7%
AUNT OR UNCLE	2 0.7%	33 0.7%	~	~	1 1%	1 1%	~	~	~	~	~	~	1 6%~	1 1%	1 0.5%	2 0.7%~	~	~	2 3%
OLDER BROTHER OR SISTER	1 0.4%	12 0.2%	~	1 1%~	~	~	1 0.5%	~	~	~	~	~	~	~	1 0.5%	0.4%~	~	1 0.5%	~
OTHER RELATIVE		6 0.1%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
LEGAL GUARDIAN	1 0.4%	73 2%*	~	~	~	1 1%	1 0.5%	~	~	~	~	~	~	~	1 0.5%	1 0.4%~	~	~	1 1%
SOMEONE ELSE	2 0.7%	33 0.7%	~	2 3%~	~	~	2 1%	~	~	~	~	~	~	~	2 0.9%	2 0.7%~	~	~	2 3%
NOT ANSWERED	27	500	5	7	11	4	2							1	3	5		25	2
VALID CASES	283	4809	51	78	71	83	188					17	67	214	268	10	216	67	
NUMBER OF RESPONDENTS	310	5309	56	85	82	87	190					17	68	217	273	10	241	69	
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	

Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	AHP 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	
Q82 YES	3 2%	101 3%	~	~	5%	2%~	1 0.8%	~	~	~	~	~	~	2 6%	1 0.7%	2 1%	~	1 0.7%	2 5%	
NO	173 98%	2894 97%	26 100%	47 100%	42 95%	58 98%	126 99%	~	~	~	~	~	6 ~100%	34 94%	138 99%	163 99%	7 100%	136 99%	37 95%	
NOT ANSWERED	1	59	1																	1
VALID CASES	176	2995	26	47	44	59	127							6	36	139	165	7	137	39
NUMBER OF RESPONDENTS	177	3054	26	48	44	59	127							6	36	139	165	7	138	39
	100%	100%	100%	100%	100%	100%	100%							100%	100%	100%	100%	100%	100%	100%

[ASKED IF SURVEY COMPLETED BY MAIL]

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
	AHP 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 & FAIR & POOR	NO CCC	CCC			
Q83.1 YES	2 67%	53 52%	~	~	50%	100%	~	~	~	~	~	~	~	100%	~	100%	~	100%	~	50%
NO	1 33%	48 48%	~	~	50%	~	100%	~	~	~	~	~	~	~	100%	~	~	~	~	50%
VALID CASES	3	101			2	1	1							2	1	2		1	2	
NUMBER OF RESPONDENTS	3	101			2	1	1							2	1	2		1	2	
	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	
	AHP 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/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.2 YES	1 33%	31 31%~	~	~	~	100%~	~	~	~	~	~	~	50%~	~	50%~	~	100%~	
NO	2 67%	70 69%~	~	~	100%~	100%~	~	~	~	~	~	~	50%~	100%~	50%~	~	100%~	2
VALID CASES	3	101		2	1	1	1						2	1	2		1	2
NUMBER OF RESPONDENTS	3	101		2	1	1	1						2	1	2		1	2
	100%	100%		100%	100%	100%							100%	100%	100%		100%	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	
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q83.3 YES		13 13%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO	3 100%	88 87%	~	~100%	~100%	~100%	~	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%
VALID CASES	3	101		2	1	1							2	1	2	1	2
NUMBER OF RESPONDENTS	3 100%	101 100%		2 100%	1 100%	1 100%							2 100%	1 100%	2 100%	1 100%	2 100%

[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	
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER ##	AS- IAN #	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.4 YES	1 33%	43 43%	~	~	~	100%	~	~	~	~	~	~	50%	~	50%	~	100%	~
NO	2 67%	58 57%	~	~	100%	~	~	~	~	~	~	50%	100%	50%	~	~	100%	~
VALID CASES	3	101		2	1	1	1					2	1	2			1	2
NUMBER OF RESPONDENTS	3	101		2	1	1	1					2	1	2			1	2
	100%	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		
	AHP 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/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q83.5 YES	1 33%	6 6%	~	~	50%	~	100%	~	~	~	~	~	~	100%	~	~	~	50%
NO	2 67%	95 94%	~	~	50%	100%	~	~	~	~	~	~	100%	~	100%	~	100%	50%
VALID CASES	3	101			2	1	1						2	1	2		1	2
NUMBER OF RESPONDENTS	3	101			2	1	1						2	1	2		1	2
	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	
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN #	NATV HAW/ILND ##	AMER IND/PAC ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR POOR	GOOD & FAIR & POOR	NO CCC	CCC
NQ14 0-6	11 5%	286 8%	3 7%	1 2%	2 4%	5 9%	10 7%*	~	~	~	~	~	1 2%	9 6%	9 5%	1 13%	8 6%	3 5%
7-8	67 33%	994 29%	8 19%	16 28%	17 36%	26 45%*	45 32%	~	~	~	~	4 50%	14 29%	52 34%	61 32%	5 63%	39 27%*	28 47%
9-10	126 62%	2180 63%	31 74%	40 70%	28 60%	27 47%*	84 60%	~	~	~	~	4 50%	33 69%	90 60%	120 63%	2 25%	97 67%*	29 48%
VALID CASES	204	3460	42	57	47	58	139					8	48	151	190	8	144	60
NUMBER OF RESPONDENTS	204 100%	3460 100%	42 100%	57 100%	47 100%	58 100%	139 100%					8 100%	48 100%	151 100%	190 100%	8 100%	144 100%	60 100%
MEAN	2.56	2.55	2.67	2.68	2.55	2.38	2.53					2.50	2.67	2.54	2.58	2.13	2.62	2.43
p stat_(*=Sig @ p<=.05)		.708	~.050*		~.009*		.240	~	~	~	~	~	~.252		~	~.044*		

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS-IAN #	NATV HAW/ILND ##	AMER IND/PAC/ALSK ##	OTHR ##	MUL-TI	HIS-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
NQ41																			
0-6	15 6%	266 6%	2 4%	1 1%*	3 5%	9 12%*	11 6%	~	~	~	~	~	1 6%~	3 5%	11 6%	14 6%~	1 14%~	7 4%*	8 13%
7-8	70 27%	933 22%	8 16%*	18 26%	19 29%	25 34%	44 25%	~	~	~	~	~	6 38%~	16 29%	53 27%	66 27%~	2 29%~	54 28%	16 25%
9-10	173 67%	3047 72%	41 80%*	49 72%	43 66%	40 54%*	118 68%	~	~	~	~	~	9 56%~	36 65%	133 68%	164 67%~	4 57%~	133 69%	40 63%
VALID CASES	258	4246	51	68	65	74	173						16	55	197	244	7	194	64
NUMBER OF RESPONDENTS	258 100%	4246 100%	51 100%	68 100%	65 100%	74 100%	173 100%						16 100%	55 100%	197 100%	244 100%	7 100%	194 100%	64 100%
MEAN	2.61	2.65	2.76	2.71	2.62	2.42	2.62						2.50	2.60	2.62	2.61	2.43	2.65	2.50
p stat_(*=Sig @ p<=.05)		.234	.025*	.092	.962	.003*	.813	~	~	~	~	~	~	.862	.745	~	~	.128	

[ASKED IF Q30 = YES]

NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

	BANT OT1	BANT OT2	AGE				RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR-AMER ##	AS- IAN #	NATV HAW/ ILND ##	AMER IND/ ALSK ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR POOR	GOOD & FAIR & POOR	NO CCC	CCC
NQ48 0-6	36%	699%	14%	~	~	10%	26%	~	~	~	~	~	11%	25%	37%	~	29%	14%
7-8	1838%	18624%	57%	40%	10%	45%	1647%	~	~	~	~	33%	11%	46%	40%	25%	41%	36%
9-10	2655%	52467%	29%	60%	90%	45%	1647%	~	~	~	~	67%	78%	49%	52%	75%	50%	60%
VALID CASES	47	779	7	10	10	20	34					3	9	37	42	4	22	25
NUMBER OF RESPONDENTS	47	779	7	10	10	20	34					3	9	37	42	4	22	25
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%
MEAN	2.49	2.58	2.14	2.60	2.90	2.35	2.41					2.67	2.67	2.43	2.45	2.75	2.41	2.56
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		
	AHP 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 & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC	
NQ54																			
0-6	33 11%	652 13%	5 10%	5 6%*	7 9%	16 19%*	26 14%	~	~	~	~	~	2 12%~	3 4%*	28 13%	31 11%~	1 11%~	21 10%	12 18%
7-8	85 30%	1410 29%	11 22%	23 29%	22 29%	29 35%	58 31%	~	~	~	~	~	8 47%~	13 19%*	72 33%*	81 30%~	2 22%~	60 27%	25 37%
9-10	169 59%	2826 58%	34 68%	51 65%	46 61%	38 46%*	104 55%	~	~	~	~	~	7 41%~	52 76%*	115 53%*	160 59%~	6 67%~	138 63%*	31 46%
VALID CASES	287	4888	50	79	75	83	188						17	68	215	272	9	219	68
NUMBER OF RESPONDENTS	287 100%	4888 100%	50 100%	79 100%	75 100%	83 100%	188 100%						17 100%	68 100%	215 100%	272 100%	9 100%	219 100%	68 100%
MEAN	2.47	2.44	2.58	2.58	2.52	2.27	2.41						2.29	2.72	2.40	2.47	2.56	2.53	2.28
p stat_(*=Sig @ p<=.05)		.478	.227	.103	.504	.003*	.047*	~	~	~	~	~	~	.000*	.002*	~	~	.008*	

GETTING NEEDED CARE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NPRBSEE4 NQ46	2.24	2.27	1.86	2.70	2.33	2.09	2.14					2.67	2.40	2.17	2.15	3.00	2.35	2.14	
p stat_(*=Sig @ p<=.05)	.762		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCARNES4 NQ15	2.56	2.49	2.69	2.65	2.51	2.40	2.60					2.50	2.49	2.59	2.57	2.29	2.65	2.32	
p stat_(*=Sig @ p<=.05)	.168		~.197		~.042*	.183	~	~	~	~	~	~	~.213		~	~	~.003*		
COMPOSITE	2.40	2.38	2.27	2.67	2.42	2.25	2.37	x	x	x	x	x	2.58	2.44	2.38	2.36	2.64	2.50	2.23
p stat_(*=Sig @ p<=.05)	.589		~.000*	.600	.002*	.123	~	~	~	~	~	~	~.399		~	~	~.000*		

GETTING CARE QUICKLY

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NCARSN4 NQ4	2.70	2.65	2.68	2.77	2.73	2.62	2.83					2.75	2.41	2.78	2.71	3.00	2.71	2.69	
p stat_(*=Sig @ p<=.05)	.411		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NAPGET4 NQ6	2.50	2.46	2.66	2.51	2.54	2.33	2.52					2.57	2.63	2.49	2.53	2.00	2.58	2.30	
p stat_(*=Sig @ p<=.05)	.485		~	~	~	~	.635	~	~	~	~	~	~	~	~	~	~	.017*	
COMPOSITE	2.60	2.56	2.67	2.64	2.63	2.48	2.67	x	x	x	x	x	2.66	2.52	2.64	2.62	2.50	2.65	2.50
p stat_(*=Sig @ p<=.05)	.154		~.484		~.022*		.003*	~	~	~	~	~	~	~	~	~	~	.034*	

HOW WELL DOCTORS COMMUNICATE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS	CCC SCREENER				
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NDREXPL4 NQ32	2.83	2.75	2.85	2.88	2.79	2.79	2.86					2.57	2.75	2.86	2.85	2.57	2.85	2.77	
p stat_(*=Sig @ p<=.05)		.024*	~	~	~	.462	.104	~	~	~	~	~	~	~	~	~	~	.317	
NDRLSTN4 NQ33	2.77	2.77	2.88	2.82	2.83	2.60	2.75					2.86	2.79	2.78	2.78	2.57	2.83	2.63	
p stat_(*=Sig @ p<=.05)		.877	~	~	~	.012*	.240	~	~	~	~	~	~	~	~	~	~	.039*	
NDRESPU4 NQ34	2.83	2.81	2.88	2.88	2.81	2.75	2.83					2.86	2.75	2.85	2.84	2.57	2.86	2.75	
p stat_(*=Sig @ p<=.05)		.547	~	~	~	.195	.800	~	~	~	~	~	~	~	~	~	~	.195	
NDRTMEN4 NQ37	2.62	2.57	2.56	2.58	2.76	2.57	2.66					2.14	2.61	2.62	2.61	2.57	2.62	2.60	
p stat_(*=Sig @ p<=.05)		.326	~	~	~	.531	.198	~	~	~	~	~	~	~	~	~	~	.783	
COMPOSITE	2.76	2.72	2.79	2.79	2.80	2.68	2.78	x	x	x	x	x	2.61	2.73	2.78	2.77	2.57	2.79	2.69
p stat_(*=Sig @ p<=.05)		.182	~	~	~	.094	.419	~	~	~	~	~	~	~	~	~	~	.100	

CUSTOMER SERVICE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NPBCLCS4 NQ50	2.29	2.28	2.36	2.32	2.30	2.23	2.29					2.14	2.33	2.30	2.28	2.67	2.29	2.30	
p stat_(*=Sig @ p<=.05)	.852		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCSRESP NQ51	2.66	2.60	2.64	2.74	2.74	2.52	2.58					2.86	2.76	2.63	2.66	2.67	2.67	2.65	
p stat_(*=Sig @ p<=.05)	.406		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.48	2.44	2.50	2.53	2.52	2.38	2.43	x	x	x	x	x	2.50	2.55	2.46	2.47	2.67	2.48	2.48
p stat_(*=Sig @ p<=.05)	.614		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

SHARED DECISION MAKING

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
NNRXWHY NQ11	2.92	2.87	2.78	3.00	2.82	3.00	2.95					3.00	2.75	2.95	2.92	3.00	2.92	2.93	
p stat_(*=Sig @ p<=.05)		.360	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NNRXWYNT NQ12	2.57	2.42	2.56	2.50	2.45	2.68	2.63					2.00	2.50	2.58	2.55	3.00	2.50	2.63	
p stat_(*=Sig @ p<=.05)		.229	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NRXBST NQ13	2.57	2.58	2.33	2.50	2.64	2.68	2.53					3.00	2.75	2.53	2.55	3.00	2.60	2.54	
p stat_(*=Sig @ p<=.05)		.938	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.69	2.62	2.56	2.67	2.64	2.79	2.70	x	x	x	x	x	2.67	2.67	2.69	2.67	3.00	2.67	2.70
p stat_(*=Sig @ p<=.05)		.380	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

ACCESS TO SPECIALIZED SERVICES

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN #	NATV HAW/ PAC LLND ##	AMER IND/ ALSK NATV ##	OTHR MUL- TI ##	HIS- IC IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NEZMDEQ NQ20	2.67	2.30	2.33	3.00	2.50	3.00	2.67					3.00	2.50	2.70	2.70	2.50	3.00	2.43
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTHP NQ23	1.84	2.19	2.50	2.00	1.00	1.80	2.00					2.00	1.60	2.00	1.88	2.00	1.67	1.92
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NEZTC NQ26	2.11	2.18	2.00	2.55	1.70	2.07	2.28					2.00	1.57	2.21	2.12	1.67	2.11	2.11
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.21	2.22	2.28	2.52	1.73	2.29	2.32	x	x	x	x	x 2.33	1.89	2.30	2.23	2.06	2.26	2.15
p stat_(*=Sig @ p<=.05)		.771	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

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

	BANTO T1	BANTO T2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN #	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
PRBSEE4 Q46	75%	78%	71%	100%	75%	64%	70%						100%	80%	73%	72%	100%	83%	68%
CARNES4 Q15	92%	89%	93%	95%	91%	89%	94%						88%	89%	93%	92%	100%	96%	83%
AVERAGE	83.31	83.54	82.14	97.37	83.24	76.56	81.90	x	x	x	x	x	93.75	84.68	82.94	81.66	100.0	89.22	75.45

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

	BANTO T1	BANTO T2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN #	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
CARSN4 Q4	93%	91%	95%	95%	92%	90%	98%						100%	82%	96%	94%	100%	90%	100%
APGET4 Q6	88%	86%	92%	88%	90%	81%	89%						100%	91%	89%	89%	60%	90%	82%
AVERAGE	90.41	88.77	93.42	91.91	91.28	85.86	93.75	x	x	x	x	x	100.0	86.49	92.11	91.61	80.00	90.16	91.00

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	AHP 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	98%	95%	98%	100%	95%	98%	98%						100%	98%	98%	98%	86%	98%	96%
DRLSTN4 Q33	97%	95%	100%	98%	98%	92%	95%						100%	100%	96%	97%	86%	98%	94%
DRESPU4 Q34	97%	96%	100%	96%	95%	96%	97%						100%	95%	98%	96%	100%	97%	96%
DRTMEN4 Q37	92%	90%	88%	92%	98%	92%	94%						71%	92%	93%	92%	100%	91%	96%
AVERAGE	95.9	94.0	96.3	96.4	96.4	94.7	96.0	x	x	x	x	x	92.9	96.2	96.2	95.9	92.9	96.0	95.7

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

	BANTO T1	BANTO T2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN #	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
PBCLCS4 Q50	75%	78%	91%	68%	70%	77%	76%						57%	78%	74%	73%	100%	73%	78%
CSRESP Q51	91%	91%	82%	95%	91%	90%	84%						100%	100%	87%	90%	100%	90%	91%
AVERAGE	82.60	84.81	86.36	81.58	80.43	83.87	80.00	x	x	x	x	x	78.57	88.89	80.56	81.62	100.0	81.64	84.78

SHARED DECISION MAKING (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	AHP 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 NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
NRXWHY Q11	96%	94%	89%	100%	91%	100%	97%						100%	88%	98%	96%	100%	96%	96%
NRXWYNT Q12	78%	71%	78%	75%	73%	84%	82%						50%	75%	79%	78%	100%	75%	81%
RXBST Q13	78%	79%	67%	75%	82%	84%	76%						100%	88%	77%	78%	100%	80%	77%
AVERAGE	84.3	81.2	77.8	83.3	81.8	89.5	85.1	x	x	x	x	x	83.3	83.3	84.5	83.7	100	83.7	84.9

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR- AMER ##	AS- IAN #	NATV HAW/ PAC ILND ##	AMER IND/ ALSK NATV ##	OTHR ##	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
EZMDEQ Q20	92%	76%	67%	100%	100%	100%	89%						100%	100%	90%	90%	90%	100%	100%	86%
EZTHP Q23	53%	72%	100%	67%	0%	40%	64%						50%	40%	62%	53%	100%	33%	62%	
EZTC Q26	70%	71%	50%	100%	40%	71%	80%						67%	43%	76%	70%	67%	67%	71%	
AVERAGE	71.5	72.8	72.2	88.9	46.7	70.5	77.5	x	x	x	x	x	72.2	61.0	75.8	70.9	88.9	66.7	72.9	

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

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
	AHP 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	84%	87%	88%	88%	90%	74%	87%						71%	80%	86%	85%	86%	83%	87%
DRUNCON Q43	88%	90%	100%	86%	88%	85%	91%						67%	78%	88%	87%	83%	76%	92%
DRUNFAM Q44	85%	85%	100%	93%	76%	81%	87%						67%	78%	85%	84%	83%	88%	83%
AVERAGE	85.5	87.5	95.9	88.7	85.1	80.1	88.3	x	x	x	x	x	68.3	78.5	86.2	85.2	84.1	82.7	87.2

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

	BANT OT1	BANT OT2	AGE				RACE						ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	AHP TOT CHLD	OHP TOT CHLD	<4	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
HELPCONT Q18	89%	92%	86%	88%	100%	92%					100%	80%	92%	88%	100%	100%	82%		
HLPCOORD Q29	69%	62%	89%	52%	85%	67%	74%				60%	64%	71%	68%	80%	68%	70%		
AVERAGE	79.1	77.1	88.9	69.0	86.1	83.3	82.7	x	x	x	x	x	80.0	72.1	81.9	78.0	90.0	83.9	75.8

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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]

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3. YOUR PERSONAL DOCTOR

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

4. GETTING HEALTH CARE FROM SPECIALISTS

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

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5. YOUR HEALTH PLAN

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

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

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

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

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

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

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

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

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

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

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

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

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5. ADDITIONAL QUESTIONS

39 Q35E IN THE LAST 6 MONTHS, 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?

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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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

3. SPECIALIZED SERVICES

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

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

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

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

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

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

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

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

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

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

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

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4. YOUR CHILD'S PERSONAL DOCTOR

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

PAGE QUESTION TITLE

5. GETTING HEALTH CARE FROM SPECIALISTS

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

6. YOUR CHILD'S HEALTH PLAN

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

PAGE QUESTION TITLE

7. PRESCRIPTION MEDICINES

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

7. ACCESS TO DENTAL CARE

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

8. ABOUT YOUR CHILD AND YOU

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

88 Q78 WHAT IS YOUR AGE?

89 Q79 ARE YOU MALE OR FEMALE?

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

91 Q81 HOW ARE YOU RELATED TO THE CHILD?

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

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

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

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

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

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

9. RATINGS

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

10. COMPOSITES

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

11. GLOBAL PROPORTION COMPOSITES

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

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

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

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

SURVEY INSTRUCTIONS

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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?

-
- 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?

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

YOUR CHILD'S HEALTH PLAN

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

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

- Yes
- No → *Go to Question 52*

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

- Never
- Sometimes
- Usually
- Always



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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No → *Go to Question 54*

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

- Never
- Sometimes
- Usually
- Always

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

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

PRESCRIPTION MEDICINES

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

- Yes
- No → *Go to Question 57a*

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

- Never
- Sometimes
- Usually
- Always

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

- Yes
- No

ACCESS TO DENTAL CARE

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

- Yes
- No

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

- Yes
- No → *Go to Question 57d*

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

- Never
- Sometimes
- Usually
- Always



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

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

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

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

ABOUT YOUR CHILD AND YOU

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Excellent
- Very good
- Good
- Fair
- Poor

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

- Yes
- No → **Go to Question 63**

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

- Yes
- No → **Go to Question 63**

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

- Yes
- No

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

- Yes
- No → **Go to Question 66**

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

- Yes
- No → **Go to Question 66**

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

- Yes
- No

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

- Yes
- No → **Go to Question 69**

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

- Yes
- No → **Go to Question 69**



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

74. What is your child's age?
- Less than 1 year old
 - YEARS OLD (write in)
75. Is your child male or female?
- Male
 - Female
76. Is your child of Hispanic or Latino origin or descent?
- Yes, Hispanic or Latino
 - No, Not Hispanic or Latino
77. What is your child's race? Mark one or more.
- White
 - Black or African-American
 - Asian
 - Native Hawaiian or other Pacific Islander
 - American Indian or Alaska Native
 - Other (Please print)
-
78. What is your age?
- Under 18
 - 18 to 24
 - 25 to 34
 - 35 to 44
 - 45 to 54
 - 55 to 64
 - 65 to 74
 - 75 or older
79. Are you male or female?
- Male
 - Female

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

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

81. How are you related to the child?

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

82. Did someone help you complete this survey?

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

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

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

THANK YOU

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

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

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





897-12



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CZPCE

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

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

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

INSTRUCCIONES PARA EL CUESTIONARIO

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

Marca
Correcta

Marca
Incorrecta

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

Sí ➔ *Pase a la Pregunta 1*
 No

↓ **COMIENCE AQUI** ↓

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

Sí ➔ *Pase a la pregunta 3*
 No

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

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

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

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

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

LA ATENCIÓN MÉDICA QUE RECIBIÓ DE ESPECIALISTAS

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

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

Sí
 No → *Pase a la pregunta 28*

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

Nunca
 A veces
 La mayoría de las veces
 Siempre

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

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

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

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

SU PLAN DE SALUD

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

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

Sí
 No → *Pase a la pregunta 30*

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

Nunca
 A veces
 La mayoría de las veces
 Siempre

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

Sí
 No → *Pase a la pregunta 33*

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

Nunca
 A veces
 La mayoría de las veces
 Siempre

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

Nunca
 A veces
 La mayoría de las veces
 Siempre

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

Sí
 No → *Pase a la pregunta 35*

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

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

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

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

35a. En los últimos 6 meses, ¿tuvo usted un problema de salud para el cual 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 cual 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 rápido 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

↓ **COMIENZE 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





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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?